

# Comment on Dennis P. Culhane et al.'s "Testing a Typology of Family Homelessness Based on Patterns of Public Shelter Utilization in Four U.S. Jurisdictions: Implications for Policy and Program Planning"

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## *Abstract*

With this research, Culhane and colleagues have added to the understanding of homeless families and opened the door to an important discussion of the optimal public policies for addressing family homelessness. Because the eclectic nature of the data sets makes analysis challenging, this research should be viewed as an initial foray into understanding different types of homeless families. The typology will require further corroboration, but the policy questions raised by this research are an important contribution to the public policy discourse on family homelessness.

This comment discusses three policy-related issues raised either explicitly or implicitly by Culhane et al.'s research: the role of transitional housing in ending family homelessness, the challenge of implementing systems change, and the impact of federal mainstream programs and policies on family homelessness.

**Keywords:** Families and children; Federal policy; Homelessness

## **Introduction**

It is estimated that, on any given night, nearly 100,000 families are homeless in the United States (National Alliance to End Homelessness 2007). The fact that approximately 41 percent of this nation's homeless population consists of adults accompanied by at least one child is often lost in the focus on those homeless persons who are most visible on the streets: usually unat-

tached, single homeless individuals (National Alliance to End Homelessness 2007). Too often, homeless families are hidden in our communities and invisible in current public policy debates.

Despite the staggering number of homeless families, federal homelessness policy since 2002 has focused almost exclusively on single homeless individuals with disabilities and long-term or multiple stays on the street or in the shelter system. While existing federal programs targeted at homeless families have generally been maintained, almost all new resources have been targeted at the single, disabled population. This has occurred despite the fact that this subpopulation, assigned the rather inelegant appellation of “the chronic homeless,” represents only approximately 10 percent of the overall homeless population. Federal officials have justified this inequitable allocation of resources by arguing that the investment in new policies and programs addressing chronic homelessness was evidence based and that because no comparable research exists to support a parallel investment of new federal funds in programs for families and persons who are not disabled, new resources were not being targeted at family assistance (Kaufman 2004).

Over the past two decades, significant research has been done on the characteristics of homeless families by Burt and Cohen (1989), Rog et al. (1995), Shinn and Weitzman (1996), Bassuk et al. (1997), Shinn et al. (1998), and Shinn, Rog, and Culhane (2005), among others. Given the federal government’s stated new emphasis on evidence-based policies and programs, Culhane et al.’s work contributes to this research and represents a very important first step in building the knowledge base needed to inform policies for helping homeless families and fashion a more equitable allocation of limited resources. However, while the findings provide an initial insight into family homelessness and certainly merit further examination, the eclectic nature of the data sets limits their efficacy for policy makers. The varying time periods of the data collected across the selected cities, the significant variation in the types of information, and the variations in the way it was collected in each community all seem to compromise comparability. Also, by using data sets with very limited time overlap and, in some cases, ending dates in the early 2000s, the authors introduce the possibility that more recent changes in federal, state, and local public policy related to low-income and homeless families may not be accounted for in their analysis, ultimately skewing the findings on system effects.

Despite these serious caveats, the research does offer a framework for better understanding homeless families and how public policy may need to respond to this new understanding. While future research may refine the three categories of short-term, episodic, and long-term homeless families, this

typology offers promise as a tool for more efficiently matching public policy to interventions that are likely to be successful in ending family homelessness.

An important finding is that about 25 percent of homeless families have intensive service histories. If this number holds in future research, it suggests that a greater number of families need longer-term support services than some have estimated. Corroboration of this information will surely fuel further debate on optimal interventions for homeless families, ranging from “housing first” to more service-intensive transitional housing models.

One of the most intriguing elements of Culhane et al.’s research is the discussion of system effects on the length of stay for homeless families. The preliminary data seem to support the contention that various social policies, at both the federal and the state levels, may have unintended consequences. The most significant consequence is the creation of an imbalance in the resource distribution for homeless families, resulting in the anomaly of a relatively small group of better-off families consuming significantly more of the system’s resources than those with greater needs.

In my opinion, the single most important contribution of this research is the questions it raises, either explicitly or implicitly, about existing public policies based on the issue of system effect in services to address family homelessness. Foremost are questions about the role of transitional housing, systems change, and federal mainstream resources in addressing family homelessness. Each of these issues will be discussed in greater detail next.

### **Transitional housing**

As Culhane et al. point out, transitional housing has its roots in the evolution of the emergency shelter system. That is, transitional housing is the result of a homeless assistance approach that has moved from basically “three hots and a cot” for single homeless individuals to a more service-enriched and humane physical environment for both singles and families. Burt (2006) suggests that transitional housing mirrored earlier community-based housing and service models from the era of de-institutionalization and reflected providers’ experience that emergency shelter by itself was not enough to help some persons exit homelessness.

As providers and policy makers have gained more experience in addressing family homelessness, questions have emerged about the efficacy of transitional housing as an appropriate tool. As Barrow and Zimmer (1999) point out, quoting HomeBase (1998):

Critics [of transitional housing] have emphasized the stigma associated with transitional programs as well as the diversion of resources

that might otherwise serve to expand the supply of and access to affordable permanent housing; proponents of transitional housing counter that homeless families and individuals with multiple problems need help with more than housing alone if they are to achieve residential stability.

The debate continues because research on how homeless families move through the homeless assistance system has been very limited. Providers and policy makers therefore cannot draw on research to understand the differences among families or the interventions that are most likely to succeed in helping them exit homelessness. Providers of services and housing for homeless families can be found on both sides of the argument.

The missing link in this debate, as the authors point out, is empirical evidence. It is here that Culhane et al.'s research provides valuable initial insight into both the subtypes of homeless families and the system that provides them with assistance. The difficulty, as the authors point out, lies in separating the effects of policies and programs from the families' actual characteristics and needs.

The fact that 25 percent of the homeless families in Culhane et al.'s study have a history of intensive service needs seems to suggest that there may, in fact, be a need for more intensive interventions for some families. This, of course, begs the question of whether these interventions can be provided with as much success in permanent housing with transitional services as they can in transitional housing.

By providing initial empirical evidence that a large majority of families have limited service needs, the research seems to give credence to efforts to move to a rapid rehousing approach, placing families in permanent housing and delivering transitional services as needed. But the research also suggests that it may not be prudent to eliminate transitional housing completely. By determining that about 25 percent of the homeless families in the study cities have intensive service histories, the research leaves the door open for further analysis of the special housing and service needs of these families.

Culhane et al.'s research sheds light on family homelessness but falls short of providing the clarity needed to support a major policy shift at this time. Corroboration of the findings on the subtypes of homeless families will open the door to further analysis of the interventions needed to help the full spectrum of homeless families and the settings in which these interventions have the greatest likelihood of success. Armed with this knowledge, policy makers and providers could proceed to develop the assessment tools needed to more accurately match individual families with the most appropriate intervention and the service and housing mix needed to respond.

## **The challenge of systems change**

However, changing the current system to create the appropriate housing and service mix will be a challenge. As the authors point out, “Converting the existing shelter system into a more flexible emergency assistance system would require significant change, and such change is very difficult to undertake in any environment, but particularly in one where funding sources are complex and diverse, as homeless program funding is in most communities” (24).

Culhane et al. are right to offer this cautionary note, but I would argue that systems change is facilitated by at least three factors: (1) convincing evidence that another approach will have more impact; (2) strong leadership that can articulate the need for change, the benefits of such a change, and a pathway to accomplish it; and (3) resources to facilitate it. The research by Culhane et al. begins to build a case for a more flexible system based on a better understanding of the differences among homeless families and their service needs. It remains to be seen whether future findings are compelling enough to catalyze systems change at the federal, state, and local levels. Early evidence from places like Portland (OR) and Chicago, among others, suggests that there is an emerging consensus around making changes to the systems that seek to assist homeless families, even without additional empirical evidence supporting the merits of such a change. This would seem to indicate that when more empirical evidence is available, there may well be leadership and political will in place in some communities to implement the necessary change.

Ultimately, without new resources, wholesale systems change is not likely to take place, even with the political will and compelling empirical evidence that such change will be effective in ending family homelessness. Change is difficult under any circumstances, but new resources could feasibly motivate it. The historic transformation of the homeless assistance system from a fragmented, uncoordinated, grant-by-grant system (U.S. Department of Housing and Urban Development [HUD] 1995) to the Continuum of Care’s coordinated community planning system was a success in the mid-1990s, not only because it offered a compelling argument for a more equitable and thoughtful way of distributing homelessness assistance resources, but also because all but the most recalcitrant service providers saw that changing to the new system meant additional funding for their community and, by association, perhaps for their organizations (Fuchs and McCallister 1996).

The amount of resources needed to implement these changes is substantial. Chicago’s plan for ending homelessness, “Getting Housed, Staying Housed,” clearly identifies the real costs of systems change (Partnership to End Long Term Homelessness 2005). It calls for additional resources to

1. Create demonstration projects that identify and evaluate local best practices for permanently housing homeless individuals and families that are chronically homeless and are not currently accessing permanent housing
2. Conduct research on the true cost of homelessness to identify resources that could be better used
3. Manage the conversion process across the homeless service system
4. Manage the conversion process among homeless service agencies
5. Develop bridge funding for program conversion
6. Provide funds to rehabilitate facilities
7. Fund the creation of a prevention helpline
8. Conduct evaluations of progress in implementing the 10-year plan

These costs will be substantial; providing the resources to meet these needs would require a significant political and financial motivation that has not previously been apparent. Without the resources to do the hard work of transforming the transitional housing system into a more flexible one, driven by a better understanding of the characteristics of homeless families and appropriate interventions, successful systems change is unlikely.

### **Federal mainstream programs**

More implicit than explicit in the analysis by Culhane et al. is the suggestion that macro or mainstream federal programs, outside of the federal targeted homeless assistance programs, have a large influence on family homelessness. The authors allude to the declining value of cash assistance benefits and reduced participation in the Temporary Assistance for Needy Families (TANF) program as variables with very real impacts on patterns of family homelessness. Although the issue is not explicitly addressed by the authors, I would add that the shrinking supply of housing vouchers, a HUD mainstream program, has a similar impact. I believe that failure to fully understand the implications of significant changes to mainstream programs intended to assist poor and/or homeless families (budget cuts, changes in eligibility criteria, program modifications, etc.) dooms the much smaller targeted programs to failure. Further cuts to federal housing assistance programs will not only have the likely impact of pushing more families into homelessness, but will also significantly reduce their chances of exiting quickly. Even in a family homelessness assistance system reconfigured on the basis of research

like that put forth by Culhane et al., a continuing shortage of safe, decent, affordable housing for low-income families will likely result in some new alternative housing model to warehouse homeless families until enough subsidized or affordable housing stock becomes available. If that occurs, systems change will be meaningless and this interim housing model will be transitional by default if not by policy or name. Similar impacts can be expected from a failure to factor changes in income support policies, employment programs, and health care benefits into systems change efforts targeted at homeless families.

As the authors point out, it is critical to guard against the potential unintended consequences of policy change. In the homeless assistance world, the quickest way to end up with an unintended outcome is to ignore the impact of mainstream programs and policies on housing and service delivery. A better understanding of family types and related interventions will not only serve policy makers well in devising a better system for distributing targeted assistance, but it should also inform macro systems. If these systems can be reconfigured to better respond to a new understanding of appropriate interventions, then they should be more able to do what they should have been doing all along—preventing homelessness.

## **Conclusion**

As Culhane et al. point out, their research only partially explains patterns of family homelessness and raises questions on whether it is the family type or the system that affects both costs and length of stay. Further research should seek to refine family typologies and the ways each type responds to various intervention strategies. It is only with a better understanding of both the commonalities and heterogeneity of homeless families that a sufficient range of housing and service options can be developed and the roles of various housing types defined. Armed with this clearer understanding of family homelessness and appropriate interventions, the very difficult process of building a more efficient and effective system can be implemented.

In the end, the success of any effort will be contingent on the availability of adequate resources. Both new resources and those garnered as a result of a more efficient system will be required to implement the change needed to end family homelessness. Culhane et al.'s research will help build the case for new investments in family homelessness assistance.

The challenge lies in accomplishing the additional research that is needed while more and more families find themselves homeless and fewer and fewer resources are available to address the crisis. I would argue that current

resource allocation inequities must be addressed immediately, even as more research is conducted, or the crisis will spiral even further out of control. Ultimately, the current policy of withholding investments in assistance programs targeted at ending family homelessness until there is more scientific evidence will have devastating effects on vulnerable families if mainstream prevention programs like subsidized housing and TANF continue to be cut or frozen. These effects will be compounded if, as I fear to be the case, there is no political will to provide adequate resources even to implement the new evidence-based programs when they are conceived.

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