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## Reimagining homelessness assistance for children and families

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### ABSTRACT

The homelessness response system in the United States is dominated by the U.S. Department of Housing and Urban Development (HUD). HUD's definition of homelessness, program models, metrics, data, approaches, and goals have overshadowed those of other federal agencies. This policy brief argues that children, youth, and families experiencing homelessness have been poorly served by HUD's dominance, especially during the COVID-19 pandemic. It proposes that other federal agencies, specifically the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services and the U.S. Department of Education, are better suited to provide comprehensive homeless assistance for children, youth, and families. The author draws from research, policy analyses, and testimonies of parents, service providers, and educators to make the case for a reimagined homelessness response that is child-centered and oriented toward long-term goals of economic independence, health, and wellness.

### KEYWORDS

Family homelessness; child homelessness; Department of Housing and Urban Development (HUD); COVID-19; housing assistance; Administration for Children and Families (ACF)

It's very easy in shelter [and street outreach] work for us to just react. And just to be on the front lines, to be there 24/7 to be able to take the folks, and feed them, call them shelter, and hopefully get them out. But when they keep coming back around, you have to ask the question of why is this happening in the first place? And what can we do to prevent that? We've been reacting a lot to the issue of homelessness. But it hasn't worked. Reaction is important. When someone is hungry, feed them. When someone is homeless, shelter them. But obviously we're all here today because we realize that we haven't moved the needle much. We've got to reboot the system. We have to reboot the system within our families. We have to reboot the system within our communities, within our country. We believe that while we're putting the necessary reactions in place to create more shelter, to have affordable housing, until we address the issue of trauma that's going on in these families' lives, which is so complex, so complex, I don't believe we're going to get any further ahead than we've ever been.

—Barry Feaker, Topeka Rescue Mission, KS, ACF Family Listening Session, Kansas City, MO, March 22, 2019, author notes

## Introduction

A gripping pandemic, an economy in free fall, and a long overdue public awakening to structural racism: three interrelated seismic events that have pundits calling for the

“re-thinking” or “re-imagining” of nearly every public system, from health care to education to law enforcement.

The federally funded system for responding to homelessness—the homeless assistance system administered by the U.S. Department of Housing and Urban Development (HUD)—appears to be immune from scrutiny. Despite historic levels of homelessness prior to the pandemic, and despite the impact of COVID-19 on homelessness, this system continues to prioritize the same populations (chronically homeless and unsheltered adults), using the same methods and providing the same kinds of assistance, while largely ignoring children and families.

Yet research shows that the connections between child, youth, and family homelessness can create a cycle of homelessness. Most youth experiencing homelessness report that their homelessness grew out of volatile or unsafe family contexts that, over time, erupted into parental rejection, getting kicked out, or fleeing family conflict (Samuels et al. 2019). Nearly one-quarter of youth first experienced family homelessness with their parents (Samuels et al. 2019). Once homeless, youth are disproportionately likely to become pregnant and have children, which makes repeated or continued homelessness more likely: compared to their peers without children, young parents have three times the risk of experiencing homelessness as young adults (Morton, Dworsky, and Samuels 2017). Research based on HUD’s own data shows that parents who had experienced childhood homelessness were 37% more likely to have experienced repeated or persistent homelessness in adulthood before a shelter stay than parents who had not experienced childhood homelessness (Zachary and Shinn 2018).

Childhood homelessness is also correlated with single adult homelessness. Twenty percent of unsheltered homeless adults in Los Angeles indicated that they first experienced homelessness when they were under age 18, and 25% when they were young adults between the ages of 18 and 24 (Flaming, Burns, and Carlen 2018). In Seattle, 18% of homeless adults indicated that their first experience of homelessness occurred when they were under age 18, and 27% when they were between the ages of 18 and 24 (All Home 2019). And in Minnesota, more than half (52%) of homeless adults surveyed first became homeless by the time they were age 24, and over one-third (36%) first became homeless at or before age 18 (Pittman et al. 2020).

When homelessness for so many adults first occurs in childhood, it is not rare, brief, and one-time—the high-level definition of “ending homelessness” per the current national policy (U.S. Interagency Council on Homelessness 2018). Four years ago, I argued that by neglecting the needs of children, youth, and families, the homeless assistance system was perpetuating the very problem it aimed to solve, all but guaranteeing a steady stream of chronic adult homelessness (Institute for Children, Poverty and Homelessness 2016). Nothing in the past four years has fundamentally changed that analysis.

To be sure, the structural drivers of homelessness, such as housing, income, health, disability, child welfare, early care, and education—as well as the pervasive racism across these systems—demand action and reform, now more than ever. But HUD homeless assistance does not address the structural issues driving homelessness. To the contrary, HUD homeless assistance is fundamentally an emergency response system—an

emergency response system that, tragically, is *also* a driver of homelessness, with a particularly injurious impact on children, youth, and families.

At this moment of national reckoning with myriad inequities, and the potential for massive increases in homelessness, it is time to reimagine the homelessness assistance response. And to do that, we must first see children—as people, as clients, as our future. We must design a system that recognizes how children and families actually experience homelessness; that builds on community-based systems and agencies that are best positioned to identify and serve families; that provides individualized services, education, and housing to meet the actual needs of both children and parents; and that is oriented toward clear long-term goals of economic independence, health, and wellness.

### How do children and families experience homelessness?

I reached out to situations that I knew were dangerous for my family, looking for four walls to keep us out of a shelter. I reached [out] to a biological family member who had a registered sex offender living in their home, begging for a floor to sleep on. Had they told me yes, I would have been there in a heartbeat because I believe, and I know, that there are families in all of our communities that believe dealing with the dangers we know is safer than dealing with the dangers that are unknown in the shelter system.

—Kat Lilly, Colorado Springs, CO; Testimony, Subcommittee on Housing, Community Development and Insurance, Committee on Financial Services, U.S. House of Representatives, June 6, 2018.

Most families with children experiencing homelessness are not in homeless shelters, nor are they visible on the streets. Lack of homeless shelters for families, fear of homeless shelters, and fear of removal of children lead parents to seek alternative arrangements, which often means staying temporarily with other people in situations that are crowded, unstable, and sometimes dangerous. Many families experiencing homelessness also stay in motels, sometimes paid for by charity or government, sometimes with their own meager and sporadic income. Of the record 1.5 million children and youth experiencing homelessness identified by public schools in 2017–2018, only 12% lived in shelters, and 6% were unsheltered (National Center for Homeless Education 2020). It is common for families to move frequently between these make-shift arrangements.

While federal early care and education laws recognize all of these arrangements as constituting homelessness and provide protections and services to families and children who endure them, HUD homeless assistance does not (see [Appendix](#) for federal definitions of homelessness). Instead, families must be on the streets or in shelters in order to be found eligible for homeless assistance and in order to be part of HUD's official homelessness count. The different definitions of homelessness not only create barriers to housing and services for families, they also lead to misinformed policy: HUD data show a dramatic decline in family homelessness, indicating that it is a lessening problem, while education data show a dramatic increase, signaling that there is no abatement (SchoolHouse Connection 2020). Because HUD data is more publicized and used by all levels of government, children and families are overshadowed in public and policy discourse on homelessness (Zaveri 2020).

Comparison of ED and HUD definitions of homelessness		
Living situation	Definition of homelessness used by public schools, Head Start, federal child care, higher education, school meals	Definition of homelessness used by HUD
Unsheltered locations	Yes	Yes
Emergency shelters and transitional housing	Yes	Yes
Hotels and motels	Yes if due to lack of adequate alternative accommodations	Only if paid for by government or charity
Staying with others temporarily ("doubled up")	Yes, if due to loss of housing, economic hardship, or a similar reason	Only under narrow conditions (a long duration of homelessness, and multiple moves over specific lengths of time, <u>and</u> multiple specific disabilities). This category is not eligible for the largest homeless programs that HUD funds (Rapid Rehousing and Permanent Supportive Housing). In addition, communities must apply for and receive permission from HUD to serve this population. HUD has denied all such requests to date.

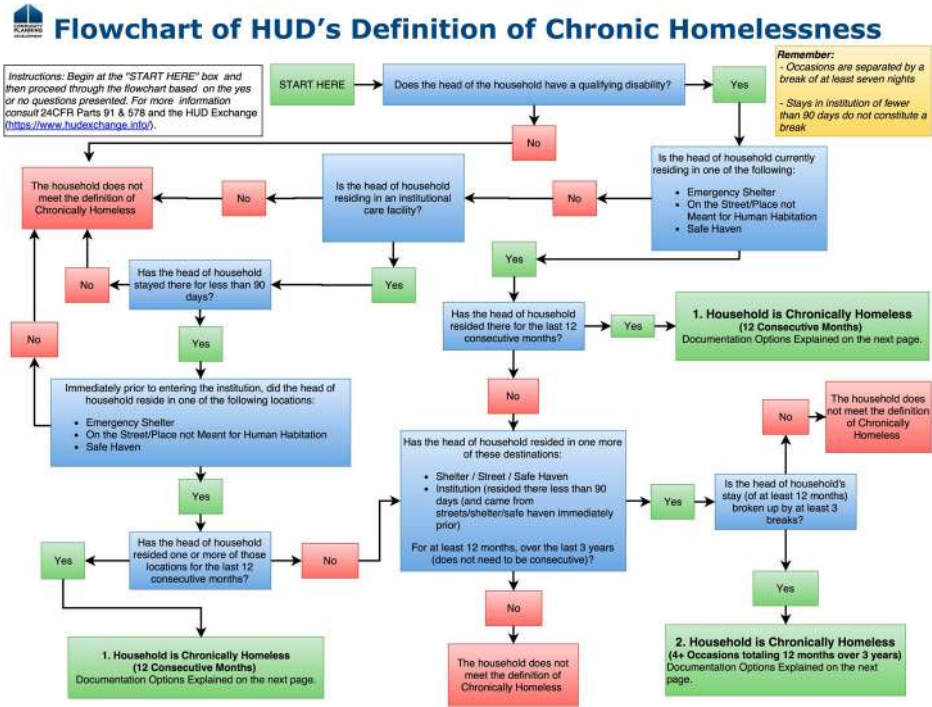
## Competing definitions

Something is wrong with our system, when I go for help and ask for shelter I am diverted to a friend's home only to be told I am now doubled up and can't access housing programs. Our own system removes me from the supports I so desperately need.

—Jani Koester, Madison, WI; Testimony, Wisconsin Opportunity Act, Senate Bill 467 and Assembly Bill 508, February 17, 2020

The debate over what constitutes homelessness, and the role of the HUD homeless assistance system in meeting the needs of families and youth, have been highlighted in the halls of Congress on several occasions: specifically, in 2011, in a Financial Services Committee hearing in which seven children and youth provided testimony, and most recently, in 2018, in a Financial Services Committee hearing about legislation to amend HUD's definition of homelessness to align it with other federal systems serving families (Subcommittee on Housing, Community Development and Insurance, Committee on Financial Services 2011, 2018).

Before the pandemic, the arguments against changing HUD's definition of homelessness revolved principally around the notion that families who stay with others temporarily, or who stay in motels paid for with their own income, were less vulnerable than those in shelters or outside, and that, in the context of limited resources, making these families eligible for HUD homeless assistance would "take away" from the "needier" homeless populations (single adults with disabilities who are visibly homeless outside or in shelters) (Cohen 2018). These arguments about relative vulnerability ignore the evidence. An analysis of the Centers for Disease Control's Youth Risk Behavior Survey (YRBS) shows that the vulnerability of high school students experiencing homelessness to violence, suicide, substance abuse, hunger, bullying, and lack of sleep is comparable across all homeless living situations: for every risk behavior studied, the incidence among students in any homeless living situation was significantly higher than that of their housed peers (SchoolHouse Connection 2019). Other research demonstrates that the academic outcomes of children and youth experiencing homelessness, regardless of living situation, are comparable and are, across-



**Chart 1.** Flowchart of HUD's definition of chronic homelessness (Office of Community Planning and Development, U.S. Department of Housing and Urban Development).

the-board, worse than for students who are low-income, but permanently housed (Building Changes 2019; Meltzer, Quintero, and Valant 2019).

Nor does lack of resources appear to be the real crux of the argument. Legislation introduced in 2019 entitled “Ending Homelessness in America” authorized \$13 billion in emergency spending on homelessness; however, even with this dramatically increased funding level, the legislation continued to target resources to people who met HUD’s definition of chronically homeless (see chart above) and excluded those who meet the education definition of homelessness (Ruiz-Grossman 2019) (Chart 1).

Indeed, some national homeless advocates seized upon the increase in unsheltered homelessness and the growth in homeless encampments to advocate for retaining funding priorities focused on single adults, successfully capitalizing on the political inclination to address what is most visible and on the privileged, middle-class sensibility that being outside is always the worst form of homelessness.

“They hear about stories of the shelter, predators, mattresses on the floor, bed bugs, rules about discipline and hours of quiet that they sometimes cannot control. (A crying baby cries when it wants.) They choose not to go, only to find that it really isn’t any different when you stay at someone else’s house. Staying with someone else, even a friend or family member, provides a roof, but always at a cost—whether personal, financial, relationship, or one’s pride. Wherever a family sleeps, their stories often are the same: eviction, loss of community, loss of connections, loss of job, loss of life as it was to a life of constant seeking.”

—Jani Koester, Madison, WI; “How HUD Homeless Assistance Leaves Children Behind,” 2018 (Koester 2018)

In the wake of the coronavirus pandemic, the arguments to maintain HUD's definition of homelessness are even weaker. Health experts have made clear the imperative of limiting movement and avoiding crowded conditions, especially indoors, in order to reduce the transmission, spread, and infection of COVID-19 (Centers for Disease Control and Prevention 2020). Yet these are precisely the living circumstances of families experiencing homelessness, who have even less access to shelter during COVID-19 and are more likely to be staying in temporary, crowded situations that, due to the stresses accompanying the pandemic, are even more subject to disruption than under normal circumstances, leading them to move more frequently. Despite their higher risks, families who do not meet HUD's definition of homelessness have been excluded from most of the emergency homeless assistance funds in coronavirus relief legislation—even though funding was 17 times higher than regularly appropriated funds (National Alliance to End Homelessness 2020a). Moreover, national advocates have gone to great lengths to urge communities not to use coronavirus homeless “prevention” dollars to serve families who are homeless under the education definition, even invoking racial equity as a reason to exclude them (National Alliance to End Homelessness 2020a). Even the most prominent coronavirus rent relief legislation, which prioritizes people experiencing homelessness for rental assistance during the pandemic—at a \$100 billion price tag—fails to use the education definition of homelessness, thus preventing some of the most vulnerable youth and families from receiving it (Kimura 2020). It is unclear what level of funding would be deemed sufficient to include these children, youth, and families.

The intransigence of HUD-aligned advocates and policymakers—the willful refusal to consider research and the lived experiences of parents, educators, and service providers about the vulnerabilities and dynamics of homelessness for families—shows no signs of softening, even in a pandemic and economic crisis. The cowardice of political leaders, philanthropists, and advocates who have chosen to “stay out of the definitions debate” also continues, representing a choice to support the status quo. If the agency in charge of homelessness assistance and its advocates are steadfast in their refusal to acknowledge how children and families actually experience homelessness, then other agencies—those who *do* see children—must play an even greater role in responding to family homelessness.

### How do children and parents experience the HUD homeless assistance response system?

There's this hotline that you call, and once you tell them these things, it places you lower and lower on the list. Even though I had nowhere to go, nowhere to be. Not having any sort of disability, not being drug addicted was held against me.

—April Goode, Sussex, NJ; Virtual Congressional Briefing on Family and Youth Homelessness in the Wake of COVID-19, July 16, 2020

### Coordinated entry

Prior to this point, Mia—a young mother of a three-year-old child staying in a car—had made every effort to obtain shelter for herself and her daughter. She called the Central Access Point hotline on several occasions, and was told that the shelters were full. No services were offered to her; she was simply told to call back. She had tried to get to the Homeless

Coalition so that someone could inspect her car between the hours of 9 am and 4 pm. She connected to her local St. Vincent de Paul and asked for direct services. All of these efforts failed. While a HUD Continuum of Care (CoC) affiliated shelter could have offered a “homeless certificate” to Mia before moving her into a temporary motel, we could not because (according to our CoC) we are not considered an emergency shelter due to our average stay being longer than 30 days. Therefore, our program was faced with the decision of whether or not to offer immediate assistance to get Mia and her daughter out of her car and into a motel, knowing that, if we did, we would be preventing Mia and her daughter from receiving long-term assistance.

—Mary Ellen Mitchell; Cincinnati, OH; “Failing Mia and Kiley: The Family Homeless Assistance System is Broken.” (Mitchell 2018)

In 2012, HUD required communities to adopt “coordinated entry” intake systems for homeless assistance, with the stated goals of prioritizing people with the most severe needs and pooling and centralizing resources from various systems and programs in the community (U.S. Department of Housing and Urban Development 2012). Individual agencies that receive HUD homeless assistance funding must participate in the coordinated entry system and take referrals from it. Prioritization through coordinated entry is accomplished both through the eligibility criteria for HUD homeless programs (meeting HUD’s definition of homelessness or chronic homelessness), as well as through “vulnerability assessment tools” which assign scores to people based on their histories of homelessness, personal conditions (addiction, mental health, disabling conditions), and other attributes. The greater the length of homelessness and number of personal conditions, the higher the score. Higher scores translate to greater access to assistance, and conversely, lower scores result in a lower place on the list. (Those who do not meeting HUD’s definition may not be assessed and assigned a score at all.) If, while on the waiting list, a person sleeps in a place that does not meet HUD’s definition, he or she loses their place in line, and their “chronicity” timeline resets, placing them further away from help. In this way, parents are penalized for attempting to put a temporary roof over the heads of their children, or for circumstances beyond their control.

I realized we have a homeless hotline here called “381-SAFE”; it’s supposed to be for families. I would call every day. Every day for a whole year, I called. I told ‘em my situation, they know I got five kids. I realized they kept asking me, “Well, where did you sleep last night?” and I’m like, “Well, me and my kids slept on somebody’s floor.” [Their response], “Okay, we’ll call you if we got something available.” No calls. Then I realized, I actually gotta lie. I started saying we slept outside. Some nights we did sleep outside. But that’s when I noticed, these people ... they’re not trying to help me unless I’m sleeping up under the bridge or something. So, I had to start saying that and actually, a year and a half later, is when they actually gave me a chance. I kept saying “I’m sleeping outside, I’m sleeping outside.” They put me in a family shelter. I was actually in there for one day. It was so filthy, unsafe, the doorknobs was broken, the beds was broken. I couldn’t even sleep. It was too unsafe for me, so I went on ahead and left. Found somebody house to stay over, and then COVID hit.

—Freda Mason, Cincinnati, OH; Virtual Congressional Briefing on Family and Youth Homelessness in the Wake of COVID-19, July 16, 2020

For the most part, coordinated entry does not consider children at all—not their histories of homelessness (many young children haven’t been alive long enough to meet HUD’s definition of chronic homelessness), nor their disabilities, their development, health conditions, or school status. Children are invisible in coordinated entry—they are not viewed



as individual clients in their own right. The various vulnerability assessment tools used to triage and prioritize people for homelessness assistance have been found to be flawed in other ways—they rely on potentially re-traumatizing self-disclosure and are biased in favor of white people (Brown et al. 2018; Wilkey et al. 2019). In addition to these flaws, coordinated entry absorbs local and state dollars, imposing HUD eligibility and priorities on services provided with those dollars, thereby co-opting nearly all public resources to address homelessness.

Families don't score high enough to be prioritized for housing. And "diversion" means nothing for them—there's nothing to divert them to. Then after 30 days, they're off the list [for housing.]

—Georgia participant, ACF Family Homelessness Listening Session, Atlanta, GA, May 22, 2019, author notes

From a parent's perspective, as the quotes above illustrate, coordinated entry is a bewilderingly complex, convoluted, demeaning, and bureaucratic system that often stands in the way of help, and may even make matters worse. These challenges have been exacerbated in recent years, as HUD and national advocates have strongly pushed "diversion," a strategy explicitly designed to prevent people from accessing shelter by re-routing them to other places to stay, and/or providing very short-term assistance, often without regard to the safety or stability of children. Diversion proponents point to low rates of return to shelter within the same geographic region within a year as evidence of "success" (Building Changes 2018; Connecticut Coalition to End Homelessness 2015). Yet these outcome metrics do not account for unstable or dangerous arrangements outside of the shelter system, in a different jurisdiction, or over a longer time frame; nor do they acknowledge that a person who did not receive any meaningful assistance from diversion might not seek help again.

### *Toward increasing stability*

What we see overall is the homeless services system was just not built [for] or intended to serve children, and that is reflected every day in the family experience ... For example, housing replacement with rapid rehousing providers or other housing placement in the community does not take into account the transportation or childcare needs of the family. We had a mother of four children who went through job training and got a certificate for forklift, and then she was placed with her four children outside the public transportation system and not anywhere near a child care provider, so she lost access to child care because she didn't get her kids there, and she lost her job, so she and her four kids were in their apartment until their housing [assistance] ran out ... this family was on a forward trajectory and lost their ability to move forward.

—Carol Klocek, ACF Family Homelessness Listening Session, Ft. Worth, TX, February 21, 2019, author notes

An overarching goal of simply reducing shelter, rather than increasing stability and well-being, would be problematic under the best of circumstances, particularly if the strategies used to achieve that goal cause families to languish in various harmful arrangements, without the help they need to achieve true stability. But in the context of a pandemic, diversion is potentially lethal: if families are "diverted" to stay with other people in crowded conditions where they cannot socially distance, without access to hygiene

items, and without regard to the infection status of people in either household, they are risk of contracting or transmitting COVID-19.

“We are missing data on the outcomes of diversion. We need to know the consequences of decisions: where are families going? What are they doing during this time that they have been diverted? Are they coming back into some form of homelessness? What situations are they going into? We need to make sure we are gathering what is happening to those families.”

—Connecticut participant, ACF Family Homelessness Listening Session, Boston, MA, April 3, 2019, author notes

In the wake of COVID-19, it makes even less sense to continue to manage family homelessness by funneling families through an increasingly narrow triage system that does not see children, listen to parents, or truly stabilize families. At this moment and beyond, we should broaden entry to assistance through the systems and programs to which families are most connected, such as schools, early childhood programs, and community-based organizations. These agencies provide organic points of engagement, where parents are more likely to build trust and receive more immediate help. Yet, currently, the predominance of HUD as the lead agency on homelessness has meant that schools, early childhood organizations, and community-based organizations are fundamentally subservient to the HUD CoC, or an extension of it, rather than recognized as significant providers of emergency support in their own right. Indeed, HUD has failed to implement even the few of its own requirements related to early care and education, including 2009 requirements to place children closer to their schools, and for family programs to designate staff to ensure that children are connected to early childhood and education ([McKinney-Vento Homeless Assistance Act](#)).

### What kinds of assistance do children and parents experiencing homelessness need?

What I really realized is that these programs can help you in the beginning, but they don't help you long term. And this is the issue ... The process of these programs is really troubling, because they will help you in the beginning, but I'm scared to enjoy my own apartment, because in two years, what am I going to do? How am I going to afford this? Where is this going to lead me? I'm going to be back outside. Who will help me then? Because I'll be over 25. I won't be eligible for youth services anymore. So now I'll get stuck in the adult system.

—Stephanie Ford, Boston, ACF Family Homelessness Listening Session, April 3, 2019, author notes

The reduction of family homelessness to a simple housing problem—caused and solved by housing assistance and affordable housing—is in many ways the core reason the system is broken. After the last great recession, in 2009, this ideology took shape in the form of Rapid Rehousing, a short-term housing intervention intended as a temporary patch for homelessness caused by job loss and foreclosure. Some national homelessness advocates seized on the inexpensive nature of Rapid Rehousing—particularly in contrast to Permanent Supportive Housing, which is primarily reserved for chronically homeless adults—and worked with HUD to reshape HUD's scoring application, all but eliminating services and transitional housing. This left Rapid Rehousing as almost the only housing model available to families who do not meet the definition of chronically homeless, regardless

of the complexity of the problems facing the family as a unit, the needs of the parent, or the needs of the children. While some have questioned the orthodoxy of Rapid Rehousing and opted to pursue private dollars to support longer-term approaches, many homeless providers have adapted their programs in order to receive funding. HUD categorizes Rapid Rehousing as permanent housing, and transitional housing as homelessness; thus, the shift to Rapid Rehousing and defunding of transitional housing has contributed to the claims about dramatic declines in family homelessness based on HUD data over the past 10 years.

It is perhaps unsurprising that a federal agency whose primary focus is housing would define success in addressing homelessness as a roof over one's head. Nor is it surprising that the homelessness sector would regard a subsidized housing voucher as the ultimate success and end goal, without regard to any other elements of well-being: education, employment, health, and wellness. Yet the strong connection between adult, youth, and child homelessness strongly suggests that a roof alone does not end homelessness. The lasting impact of childhood homelessness, even prenatally, demands a more holistic view and a more nuanced and individualized approach to matching children and families to services and housing.

There needs to be a long-term plan, not just help us get into a shelter, help us out, and then just leave us floating. Because then that's where the repeat homelessness happens, that's where you have youth who had homeless parents, and that's all they know, so then they go back into the system themselves as adults. It's just a cycle that I want to break with my kids.

—Aralese Estrella, Boston, MA, ACF Family Homelessness Listening Session, April 3, 2019, author notes

The bottom line is that family homelessness was not simple before the pandemic, and it is even less so now. The very presence of another person in a household, especially a child, magnifies and adds complexity. Children and their parents have a range of needs—even families who are homeless for the first time and for whom short-term housing assistance is most appropriate need child care, education, nutrition, health, employment, and other assistance in order to recover and maintain housing stability. Families who were homeless before the pandemic face even greater levels of trauma and challenge that threaten their future. If the current homeless assistance system was failing families before COVID-19, it has no hope of meeting the anticipated new wave of family homelessness. Even the staunchest defenders of the current system recently conceded that families with children experiencing homelessness have tremendous needs that are unmet by HUD homeless assistance (National Alliance to End Homelessness 2020b). The time to create a new homeless assistance system for children and families is now.

### **A new homelessness response for children and families**

The way I got out of homelessness was Educare; it was Head Start. They educated me. They made me a leader. I enrolled myself in a Parent Ambassador program, and in that program, I was able to advocate for myself, and advocate for other parents. I went back to school and graduated in two years, and that's because of the support that Educare gave me ... They gave me four hours for my son to be at a Head Start, which was free, no questions asked. A four-hour program so my son gets to be there, and be safe, and I get four hours to get a

job. Homelessness has a ripple effect. My family went through it when I was a youth, and then I lived it as an adult. So, I'm here today so we can stop that, so my children, and my children's children don't have to go through that.

—Flavia Debrito, Board Member, Kennebec Valley Community Action, ME, ACF Listening Session on Family Homelessness, Boston, MA, April 3, 2019, author notes

The shortcomings of the current homeless assistance system, especially for families and youth, stem in large part from its definition of success: if “ending homelessness,” operationally, means not returning to federally funded shelter in the same area within a year, then generational homelessness is an acceptable outcome, as are a host of ills that occur with a roof over one’s head that can subsequently lead to instability. If we wish to establish a new response to family homelessness, then, we must embrace a new goal: one that extends beyond housing and encompasses the same aspirations that we have for all children and families. To realize that goal, we must look to those agencies—the U.S. Department of Education (ED) and the U.S. Department of Health and Human Services (HHS)—which already share it and which have deep expertise about children, youth, and families. At the same time, especially in a pandemic, service delivery must be decentralized if we are to stabilize children, youth, and families immediately. The chart below compares and contrasts the current and proposed responses to child and family homelessness.

	Current Approach (Administered by HUD)	Proposed Approach (Administered by HHS and ED)
<b>Overarching goal</b>	Success means avoiding return to a federally funded shelter in the same geographic area over a short time frame (a year).	Success is holistic and means physical and mental health; parents are able to realize their own career goals; children and youth are reaching developmental milestones and academic achievement.
<b>Definition of homelessness</b>	Defines homelessness in a way that excludes how most families and youth experience homelessness and does not recognize the vulnerabilities of various homeless living arrangements (HUD definition of homelessness).	Defines homelessness in a way that is inclusive of the lived experiences and recognizes the unique vulnerabilities of children and families across all homeless living arrangements (ED definition of homelessness).
<b>Populations</b>	Single adults, youth, and families with children compete for attention and funding within a single federal program.	Funding is specific to, and separate from, emergency funds for single adults and is targeted to programs with expertise in serving children, youth, and families. Culturally specific organizations are prioritized for funding.
<b>Primary client(s)</b>	Adults are the client.	Both parents and children are clients in their own right, with distinct and related needs. Young children, youth, and young adults are recognized for their unique developmental status.
<b>Points of access</b>	Access to emergency housing and services is highly centralized through a central intake system.	Access is decentralized and provided through a range of systems and programs to which children, youth, and families are already closely connected: early childhood, public schools, institutions of higher education, and culturally specific and other community organizations.
<b>Types of assistance</b>	Short term housing assistance (Rapid Rehousing) and Permanent Supportive Housing (for those who meet the chronically homeless definition).	Flexible funding to meet a range of emergency needs: health and safety needs, including housing-related needs such as eviction prevention, utility payments, rental assistance, motel stays, and housing placement assistance; PPE, food, and hygiene supplies, and mental health services; transportation assistance; emergency child care; communications and

(Continued)

Continued.

	Current Approach (Administered by HUD)	Proposed Approach (Administered by HHS and ED)
<b>Federal agency oversight</b>	U.S. Department of Housing and Urban Development. National priorities for specific populations and program models are imposed on communities through requirements, incentives, and bonuses.	connectivity needs; education, training, and employment-related needs; the particular needs of pregnant women and of children; staffing for outreach and case management; services and supports to meet the particular needs of survivors of domestic violence, sexual assault, or trafficking. U.S. Department of Health and Human Services and U.S. Department of Education. Uses of funding are locally driven and support the specific missions of grantee agencies (Administration for Children and Families programs, schools, community-based partners).

As outlined above, ED and HHS are best positioned to carry out a new emergency response to family homelessness.

### *Child-focused systems must lead*

Working with Grand Street Settlement, I was able to receive my GED (I was a high school dropout). My son’s in daycare fulltime now. I am certified as [a] home health aide. I have my own apartment. I was doubled-up for a few years. But now I’m applying for colleges ... I take care of my sister, too, and I just want her to know that she can do anything she wants to. She’s about to graduate from high school.

—Jenai Brown, Early Head Start Parent, Grand Street Settlement, New York City, ACF Listening Sessions on Family Homelessness, New York City, April 17, 2019, author notes

The Administration for Children and Families (ACF) in the HHS administers programs that are uniquely able to strengthen and support children and families experiencing homelessness, including families headed by young parents. Several of ACF’s programs already have specific mandates to serve children, youth, and families who are homeless. For example, the Head Start and the Child Care and Development Fund programs are required to prioritize homeless children for enrollment, proactively identify and provide outreach, and remove barriers to enrollment and participation. The Runaway and Homeless Youth Act program has 45 years of expertise in serving young people experiencing homelessness, including young parents, by building relationships, meeting immediate needs, providing short- and long-term residential services, and conducting prevention and outreach. Other ACF programs and offices, such as the Family Violence Prevention and Services Program, Temporary Assistance for Needy Families (TANF), Children’s Bureau, and the Office of Trafficking in Persons, engage in primary prevention strategies to reduce the risk of becoming homeless and alleviate conditions associated with homelessness.

There is precedent for ACF programs to provide housing-related assistance: The Runaway and Homeless Youth Act programs provide funds for basic center shelters and transitional living programs, while Chafee Foster Care Independent Living programs are used for housing assistance for youth aging out of foster care. In addition, TANF funds also are used in some states for housing-related costs, including rental assistance. Community Services Block Grant funds are used for housing assistance, and Head Start programs

are required to report on the numbers of homeless families that they have placed in housing. Overall, ACF programs are well-suited to two-generational approaches that help mitigate the impact of homelessness on the early development of children and build skills for self-sufficiency for parents—goals that go beyond a temporary roof or a housing voucher.

In addition to programs at ACF, the Maternal and Child Health Bureau, part of the Health Resources and Services Administration at HHS, administers a number of programs well poised to deliver critical care to children and parents experiencing homelessness. The Maternal Infant Early Childhood Home Visiting program is just one example of a program outside of HUD that has a demonstrated success with families experiencing homelessness; in one study of home-visiting and young parents experiencing homelessness, young mothers who participated in home-visiting were less likely than mothers in the control group to experience homelessness when their children were preschool-age or older. During program participation, the number of home visits was negatively associated with concurrent homelessness when children were infants or toddlers (Stargel, Fauth, and Ann Easterbrooks 2018).

In 2019, ACF began exploring its role in family homelessness more intentionally by holding 10 regional listening sessions on family and youth homelessness. These sessions brought together a wide range of stakeholders, including public and private community-based organizations (those that receive funding from ACF and those that do not); faith-based organizations; school districts; early childhood programs; and representatives from other federal agencies (Administration for Children and Families 2020).

The purpose of the listening sessions was to help ACF understand trends, learn about challenges and innovative responses, and share information about ACF programs and resources. Stakeholders were frank in expressing their concerns about the fragmentation and silos between federal agencies, and, in particular, the abdication of families by HUD. While homeless service providers and even some school district homeless liaisons in attendance were unfamiliar with ACF's programs—unsurprising given HUD's dominance of the homelessness space in funding and in determining community priorities—they expressed interest in the family-centric approach that ACF brings to the homelessness conversation, and, when asked what ACF could do to help community efforts, they urged ACF to be the voice on child and family homelessness at the federal level (U.S. Department of Health and Human Services 2020).

### **Educational supports**

My high school had developed to be my home outside of the home, and this was the only place I could still control. After my mother passed and I was then left to face homelessness on my own, my school is the only place I had left. I had no family left, my brother moved out to family in Missouri, and I needed to continue to go to the high school I was attending because this ensured a positive and impactful education. I spent 12 hours awake at school, doing school work, or thinking about my school consistently for months after. The only thing left important to me in this world was education, and I still had my home at school.

—Ash P., SchoolHouse Connection Scholar and current college student

ED also plays a critical role (in some ways greater than ACF) in addressing family homelessness: the sheer scale of the public education system, strong federal rights for children

experiencing homelessness, and the nature of compulsory education make public schools unparalleled first responders. Unlike other agencies or programs, schools exist in all communities and are required to identify and enroll all children experiencing homelessness, using the broader definition. These features, coupled with the requirement to designate homeless liaisons with internal and external responsibilities, create a service delivery mechanism and infrastructure that is very often the sole source of services for children and families who are homeless. “Housing ends homelessness” has been the rallying cry of homeless advocates, yet schools provide the education that is ultimately necessary to escape poverty and homelessness permanently—a point underscored by research demonstrating that lack of a high school degree or GED is the single greatest risk factor associated with homelessness as a young adult (Kull et al. 2019).

Consider the potential reach of child and family serving systems within education and early care: there are more than 18,000 local educational agencies (encompassing school districts and charter schools) in the United States, serving all communities (National Center for Homeless Education 2020). Every single one of them is required to designate a liaison to ensure that schools proactively identify children and youth experiencing homelessness, enroll and stabilize them, connect them to resources inside and outside of school, and support them in getting the education that is the single most important protective factor against future homelessness, in addition to a necessary prerequisite for employment, and connected to many other indicators of well-being.

There are more than 1,700 agencies providing Head Start and Early Head Start programs in all 50 states and territories (Office of Head Start n.d.). These programs serve pregnant women, as well as children birth to age five, and their parents. Every federal early education program is required to identify and remove barriers to enrollment and participation for children and families experiencing homelessness. Access to high-quality early learning is a prerequisite to later school and life success.

There are more than 250,000 child care providers serving children who receive federal child care subsidies (Administration for Children and Families 2019). Every single one of them has responsibilities to identify and remove barriers for families experiencing homelessness. Access to high-quality child care is imperative for child development, *and* for enabling parents to find and keep employment.

There are more than 6,600 colleges and universities in the United States (National Center for Education Statistics 2019). Some form of postsecondary education and/or training is increasingly necessary for obtaining a job that pays a living wage and maintaining housing.

In many respects, public schools, early childhood programs, institutions of higher education, and community-based organizations are currently the primary homeless response system for children, youth, and families. They see more youth and families experiencing homelessness than the HUD homeless system, have a greater understanding of their needs, and, if they were properly supported and resourced, could do even more to stabilize children and youth holistically and help them permanently resolve their homelessness. In sum, these agencies are not ancillary to the response on homelessness—they are central to it—now, and especially in the wake of COVID-19.

Of course, no emergency response for families experiencing homelessness will be effective without also directly addressing the profound structural racism that runs through all institutions, including health, early care, housing, child welfare, employment,

and education—which is evidenced in the disproportionality of homelessness. The anti-racist work that must occur in each of these institutions is beyond the scope of this policy brief; however, one core element of a new response system consists of culturally specific organizations: organizations by and for communities of color. Culturally specific organizations must be resourced and positioned to play lead roles in responding to family homelessness. This means they must be prioritized for local, state, and federal funding and recognized as leading agencies for service delivery and training across systems. In this regard, we must learn from the fight against sexual assault, dating violence, domestic violence, and stalking, where the recognition of culturally specific services and training has led to changes in policy, practice, and approaches.

### **The Emergency Family Stabilization Act**

Bipartisan legislation introduced in June and August 2020 takes steps toward establishing a structure and funding stream to respond to child and family homelessness that encompasses many of the principles articulated in this article. The Emergency Family Stabilization Act, S. 3923, authorizes \$800 million in direct flexible funding to community agencies, including local educational agencies, to meet a variety of emergency needs of children, youth, and families experiencing homelessness under the broader education definition (Office of U.S. Senator Lisa Murkowski. 2020). The House companion bill, H.R. 7950, authorizes \$2 billion for the same purpose (Office of U.S. Representative John Yarmuth 2020). Administered through ACF, this funding fills an urgent gap in previous coronavirus relief legislation, which was provided through HUD's Emergency Solutions Grant and limited to short-term housing for those who meet HUD's definition of homelessness. As of this writing, it is unclear whether the Emergency Family Stabilization Act will be included in the next coronavirus omnibus legislation or enacted in annual appropriations legislation. While intended as emergency legislation related to the pandemic, it nonetheless provides a starting point to illustrate what a new federal grant program could look like to more appropriately respond to child, youth, and family homelessness.

### ***Imagination and innovation in crisis***

Imagine this: a screening question on a Head Start application indicates potential homelessness. A discreet and sensitively conducted conversation between a family services coordinator and the parent reveals that the parent and child are sleeping on the floor in the apartment of an acquaintance and don't know how long they can stay. The Head Start program pays for the family to stay in a motel for their immediate safety and begins to work with the mother to help her navigate longer-term housing options, repair her car so she can get to work, pay for diapers, obtain child-appropriate food, assess her child for developmental delays, explore her own potential educational goals, and meet other needs—all without a referral to a hotline that will tell her she isn't quite homeless or disabled enough to receive assistance and that she and her child must wait. The parent and child are stabilized without an invasive vulnerability assessment through trusting, trauma-informed relationships by agency staff with deep expertise in the needs of families.



This is but one example of how child- and youth-serving programs could be resourced and empowered to meet the immediate needs of children and families experiencing homelessness, while engaging with parents and children on longer-term goals. It is not purely hypothetical: school-housing partnerships, flexible funding models, community schools, and culturally specific programs are in operation in various communities across the nation, taking advantage of organic entry points and service hubs while eschewing contrived access, silos, fragmentation, and the shackles of short-term goals. Fledgling though they may be, they give hope and substantiate elements of the approach outlined in this article.

Innovation is sometimes born of crisis. We must use the current unprecedented crisis to radically reform how we see child, youth, and family homelessness, and how we respond to it. To overlook the shortcomings in the current homeless assistance response now, in the face of deep fissures in an already frayed system, is to condemn countless generations to homelessness and harm. It is my sincere hope that four years from now, I will write an article describing the lessons we have learned and the progress that has been made toward a future where every child, youth, and parent is supported in the quest to realize their full potential and become whomever they wish to become, in a more just and equitable society.

## Disclosure statement

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## Notes on contributor

*Barbara Duffield* began her career as a tutor for children experiencing homelessness in Washington, D.C., and is now Executive Director of SchoolHouse Connection. For more than 20 years, she has bridged policy and practice in early care, education, housing, and homelessness, serving as the Director of Education for the National Coalition for the Homeless (1994–2003), where she collaborated with service providers, educators, federal agencies, and Congressional offices to address children's issues, and later as the Director of Policy and Programs at the National Association for the Education of Homeless Children and Youth (2003–2016), leading national efforts to strengthen federal protections and services for children and youth experiencing homelessness, from early childhood through higher education.

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## Appendix: Federal definitions of homelessness.

Federal definitions of homelessness (emphasis added)		
Runaway and Homeless Youth Act— 42 U.S.C. §5601 (Used by HHS for Family and Youth Services Bureau)	McKinney-Vento Homeless Assistance Act—42 U.S.C. §11434A, as amended by the Every Student Succeeds Act (Used by ED, by HHS for Head Start and the Child Care Development Fund, by USDA for Child Nutrition, and by DOJ for the Violence Against Women Act)	McKinney-Vento Homeless Assistance Act as amended by the Homeless Emergency and Rapid Transition to Housing (HEARTH) Act of 2009 - 42 U.S.C. §11302 (Used by HUD)*
The term “homeless,” used with respect to a youth, means an individual— (A) who is— (i) less than 21 years of age, or, in the case of a youth seeking shelter in a [Basic Center Program], less than 18 years of age or is less than a higher maximum age if the State where the center is located has an applicable State or local law (including a regulation) that permits such higher maximum age in compliance with licensure requirements for child—and youth-serving facilities; and (ii) for [a Transitional Living Program], not less than 16 years of age and either (I) less than 22 years of age; or (II) not less than 22 years of age, as the expiration of the maximum period of stay permitted under section 322(a)(2) if such individual commences such stay before reaching 22 years of age; [Note that pending legislation would raise this age to 24]	The term “homeless children and youths” — (A) means <i>individuals who lack a fixed, regular, and adequate nighttime residence</i> (within the meaning of section 103(a)(1)); and (B) includes— (i) children and youths who are <i>sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason</i> ; are living in motels, hotels, trailer parks, or camping grounds <i>due to the lack of alternative adequate accommodations</i> ; are living in emergency or transitional shelters; or are abandoned in hospitals; (ii) children and youths who have a <i>primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings</i> (within the meaning of section 103 (a)(2)(C)); (iii) children and youths who are <i>living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar</i>	(a) ... [T]he terms “homeless,” “homeless individual,” and “homeless person” mean— (1) an individual or family who <i>lacks a fixed, regular, and adequate nighttime residence</i> ; (2) an individual or family with a <i>primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground</i> ; *(3) an individual or family <i>living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing)</i> ; (4) an individual who resided in a <i>shelter or place not meant for human</i>

(Continued)

Continued.

	Federal definitions of homelessness <i>(emphasis added)</i>	
<p>(B) <i>for whom it is not possible to live in a safe environment with a relative; and</i>                      (C) <i>who has no other safe alternative living arrangement.</i></p>	<p>settings; and                      (iv) migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in clauses (i) through (iii).</p>	<p><i>habitation and who is exiting an institution where he or she temporarily resided;</i>                      (5) an individual or family who—                      (A) <i>will imminently lose their housing, including housing they own, rent, or live in without paying rent, are sharing with others, and rooms in hotels or motels not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, as evidenced by—</i>                      (i) a court order resulting from an eviction action that notifies the individual or family that they must leave within 14 days;                      (ii) the individual or family having a primary nighttime residence that is a room in a hotel or motel and where they lack the resources necessary to reside there for more than 14 days; or                      (iii) credible evidence indicating that the owner or renter of the housing will not allow the individual or family to stay for more than 14 days, and any oral statement from an individual or family seeking homeless assistance that is found to be credible shall be considered credible evidence for purposes of this clause;                      (B) has no subsequent residence identified; and                      (C) lacks the resources or support networks needed to obtain other permanent housing; and                      (6) <i>unaccompanied youth and homeless families with children and youth defined as homeless under other Federal statutes who—</i>                      (A) <i>have experienced a long term period without living independently in permanent housing,</i>                      (B) <i>have experienced persistent instability as measured by frequent moves over such period, and</i>                      (C) <i>can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse, the presence of a child or youth with a disability, or multiple barriers to employment.</i>                      (b) Domestic violence and other</p>

(Continued)

Continued.

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 Federal definitions of homelessness  
*(emphasis added)*


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dangerous or life-threatening conditions.

Notwithstanding any other provision of this section, the Secretary shall consider to be homeless any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in the individual's or family's current housing situation, including where the health and safety of children are jeopardized, and who have no other residence and lack the resources or support networks to obtain other permanent housing.

(c) Income eligibility

(1) In general

A homeless individual shall be eligible for assistance under any program provided by this chapter, only if the individual complies with the income eligibility requirements otherwise applicable to such program.

(2) Exception

Notwithstanding paragraph (1), a homeless individual shall be eligible for assistance under title I of the Workforce Innovation and Opportunity Act.

\*Note that HUD's "Notice on Limitation on Use of Funds to Serve Persons Defined as Homeless Under Other Federal Laws" (Notice: CPD—12-001, Issued: January 17, 2012, available at <http://bit.ly/HUDNotice>) restricts communities from using HUD funding to serve youth considered homeless under other definitions. A FOIA request of HUD revealed that since 2010, HUD has not allowed any community to serve persons defined as homeless under other federal laws, despite special requests from twelve communities to do so.

HUD's final rule on subparagraph (b), Domestic Violence, omits the statutory language "including where the health and safety of children are jeopardized." In addition, HUD has restricted eligibility under subparagraph (b), Domestic Violence, such that persons who meet these criteria are not eligible for Rapid Rehousing unless they also meet Category 1, "literally homeless."

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