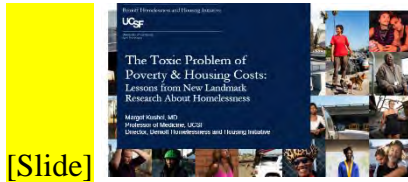
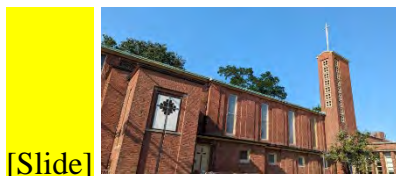


## Dunlop Lecture 3/21/24



- Thank you to Harvard Joint Center for Housing Studies –and to David Luberoff and Chris Herbert—for inviting me. And to Peggy Bailey and Jim O'Connell—two of my heroes for joining the panel. I am truly honored to be here.
- I am happy to be back at Harvard—where I was an undergraduate—and somewhat tickled to be at the GSD—a place I spent many hours—waiting outside of—for my dear friends and roommates to finish their projects. I didn't actually spend much time inside this building because—well, while I would have liked to—as my efforts at anything approaching art look something like a parody of an adult imitating toddlers--and I was—well, a bit intimidated.



- But my journey into this work started a few blocks from here—at University Lutheran Church (or as we called it—Uni Lu—where I worked many a night volunteering at the student run homeless shelter. When I started college in 1985, the Uni Lu shelter had opened two years previously—as an emergency response to a crisis that seemed deserving of an emergency response---but —had you asked me then—whether almost forty years later—would I be here talking about homelessness growth and complexity and endurance, I probably would have looked at you with some combination of disbelief and horror.
- And yet—here we are.
- But today—I am going to talk about homelessness as an enduring crisis that doesn't have to be enduring---and focus my remarks mostly on my adopted home state of California—which, while having many differences from how homelessness presents in regions outside the West and Mountain West--has lessons for us all.
- I hope to leave you today with—perhaps—a new understanding of how we got here, and what impact homelessness has on those who experience it---and to leave you with a sense of possibility that we can—in fact—even forty+ years into the modern crisis of homelessness—make different decisions which will give us different outcomes.
- I approach this work as a physician who has spent my career working in a safety net system—walking alongside those who have worn—on their bodies—the marks of a

deeply unequal society that continues to carry the burdens of its original sins of anti-Black racism and colonization—and as a researcher who knows that the people closest to the problem are the ones who are closest to the solution.

- But—first—to my gorgeous adopted home state of California.



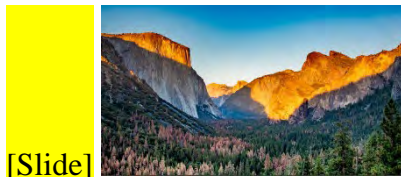
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- My adopted state of California is a magical place—a place of infinite possibilities and unimaginable beauty, a place filled with strivers and dreamers.
- Your image of CA may look something like this:



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- Or this



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- Or this



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- Or this



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- Or—if you happen to watch Fox news, your image may look more like this—a CA nightmare created by “lax drug policies” and “incentives to not work” and “disarray”
- The truth is more...nuanced.



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- While the vision presented on the evening news doesn't describe CA, the truth is that in many —although definitely not all—the landscape looks something like this—
- This is a photo I took last week, a few blocks from my house, - at our Civic Center park in Berkeley, a city much like Cambridge.
- While people living outdoors has become part of the landscape of CA —I am not going to focus on the tents---but rather the people dwelling inside them. And, how, in a state as wealthy as CA---over 181,000 people spend their nights in our shelters, in their cars, or in our parks---How we got to this place—what happens to the people living this reality— and what it will take to get us out of it.



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- Throughout this talk, I am going to share some gorgeous photos taken by colleagues who worked with us—many are by Sam Comen who created a companion piece, UnhousedCA.org in which he and journalist Aaron Schrank created audio essay with interviews to accompany our work. I encourage you to take a look and listen. Barbara Ries a CA photographer did the others. The photos I am using are participants from our research but – due to confidentiality reasons—are no the ones who I am quoting when I use quotes.



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- In 2023, there were 653,104 people who experienced homelessness in one night in the United States.
- 181,399 of them in CA
- A state with 12% of the US population and 28% of those experiencing homelessness
- And approximately 50% of those living outside. How did we get here?

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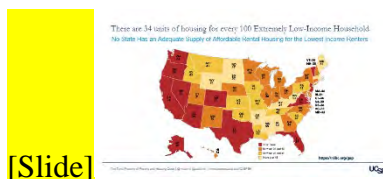
- (First click) To understand homelessness, it is important to frame the questions we ask. In their book, *In the Midst of Plenty*, Beth Shinn and Jill Khadduri point out that when we ask the question; “why are people homeless” we are actually asking two different questions.
- “Why do some people become homeless?”
- “Why do so many people become homeless?”
- If we ask the first question, we are drawn to answers that depend on individual characteristics---”substance use” “Mental health problems” and if we ask the second, we are drawn to structural answers “the cost of housing” “low wages”—the issue is, that we are often trying to answer the second question, but instead, answer the first question.
- (second click) In the early 2002, Martha Burt, Laudan Aron and others noted that homelessness arose from an interaction between structural factors (such as the availability of affordable housing, income inequality); individual factors (such as substance use disorders and mental health problems) and the presence or absence of a safety net (such as income supports and subsidized housing). The less forgiving the structural factors and lower the safety net supports are, the fewer individual vulnerabilities one needs to become homeless. In the US in 2024, you simply don’t need that many individual vulnerabilities to experience homelessness.
- (Third click) and in 2022, Gregg Colburn and Clayton Aldern in their book: “Homelessness is a Housing Problem” distinguished between what they called the drivers of homelessness (or the underlying factors that determined differences in rates of homelessness between communities---which is almost entirely dependent on the mismatch between housing prices and incomes and what they called precipitants –things like substance use problems or mental health.

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- They use a terrific metaphor—musical chairs—to understand the interaction between structural and individual factors. Imagine that the chairs are housing—and the kids are people who need that housing.

- Imagine a kids' birthday party---and the game of musical chairs. You have 10 kids, 10 chairs—the adult plays music, the kids walk around the chairs, the adult pulls away a chair and stops the music and the kids scramble for the remaining chairs.
- Now—imagine that one of the kids sprained their ankle playing soccer the night before—and shows up—awkwardly trying to use crutches that don't fit and they don't know how to use.
- If you had to bet, before the game began—who was going to be still standing when you removed the chair—it would be a good bet to guess the kid on crutches who can't quite scramble for the 9 chairs.
- If you asked the question—who is left standing—or—in this metaphor—who is left without housing---it would be a good bet that the kid on crutches is the one.
- But, if you asked a different question—Why is there a kid standing? Well—there is a kid standing because you have 9 chairs for 10 kids. Either two kids are sitting on top of one another—or someone is standing. If you didn't have any kid on crutches—you would still have someone standing. And if you had 10 chairs for the 10 kids—it might take the kid a bit longer, but eventually, they would sit down.
- The reason we have homelessness is we simply don't have enough chairs. The reason some people are left homeless – is that in the face of a shortage of chairs—they are least able to compete for the remaining scarce chairs.



- Just how short of “chairs” are we?
- The National Low Income Housing Coalition every year publishes a report on the gap between available housing and the need for extremely low-income households—or those who make less than 30% of the area median income for the area in which they live.
- Nationally—we have only 34 units of housing affordable and available for every 100 extremely low income households.
- Affordable means that those households could pay for it for less than 30% of their income and available means that it exists, is habitable, and not occupied by a higher income household.
- In my home state of CA—we have 24 units for every 100 ELI household. (Our neighbors in Nevada have 14/100).
- If you map the states with the highest rate of homelessness—it maps extremely well to the states with the lowest availability of housing.

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- Finally—before I start—a few words.
- Click
- Early on, I promised myself that I would never talk about homelessness without calling out the role that structural racism—particularly anti-Black racism plays—in creating and perpetuating this crisis.
- As a reminder, until very recently in our collective history, we had legal—unethical and immoral—but legal—discrimination in home ownership which operated through racial covenants—which restricted where people of color could live to certain neighborhoods and redlining which allowed banks to not offer (or offer at usurious rates) mortgages to people who were living in the neighborhoods that Black and brown people lived in. This effectively shut Black Americans out of the post world war II boom in home ownership and is the single biggest contributor to the enormous racial wealth gap that we see today.
- Although since the Fair Housing Act of the late 1960s made this illegal, we still live in neighborhoods marked by these maps.
- Because of lax enforcement, there is evidence of ongoing discrimination in the rental and home buying space—for instance—Black households with the same “rental resume” as a white household are less likely to be offered an apartment—leading them to pay more for lower quality housing.
- We saw the predatory lending crisis of 2008 target Black and brown homeowners.
- And, add that to well described discrimination in the criminal legal system, employment system, and educational system (and of course, we pay for public schools with local taxes—leading disinvested neighborhoods to have lower quality schools-
- Perhaps it is not a surprise—that Black Americans are overrepresented by 3-4X in the homeless population.
- (Click) Our recently released report details this.

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- With that background, I want to delve into our findings from the California Statewide Study of People Experiencing Homelessness—which we released in June 2023.
- The largest representative study of homelessness since the 1990s, we at BHHI conducted this at the request of the California Secretary of the Health and Human Services Agency

- To guide a representative sample of adults 18 and over who were homeless—we divided the state into 8 regions and used a computer model to select a list of one county in each region that would allow us to represent the state as a whole and then used methods to generate a sample that would represent all adults 18 and over in the state
- Within each county, we generated a random list of all places that adults experiencing homelessness would be (encampments, shelters, drop in centers etc) and randomly selected a portion of them
- Within each venue, we randomly selected individuals to generate an overall random sample
- To enhance our sample for groups that would be underrepresented—we conducted something called response driven sampling.
- We conducted 3200 structured interviews in English and Spanish and used interpreters for other language and 365 in-depth interviews
- While requested by senior government officials, we were committed to using best community based practices.
- The study was guided at every stage by three community advisory boards, one of which was made up of people from across the state with lived expertise of homelessness.
- Within each county, we partnered with people with lived experience and those who worked with the population to accompany us in our work.
- One caveat—we sought to represent adults 18 and over but young adults are a distinct population who –despite our using RDS sampling to enhance our ability to find them-- may have been underrepresented.



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- Who experiences adult homelessness in CA?
- First—Californians do. 90% of those experiencing homelessness in CA lost their last stable housing in CA. 75% were living in the same county in which they lost housing. A significantly higher proportion were born in CA, then Californians themselves (including me!)



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- Black and Indigenous CA were dramatically overrepresented
- 26% reported a Black racial identity (vs. 7% statewide)

- 12% reported Native American, Alaskan Native or Indigenous identity (vs. 3% statewide)
- 35% reported a Latina/o/x identity
- 69% were cisgender men and 30% cisgender women and 1% trans/nonbinary—although that proportion was much higher among young folks



- The median age of homeless adults in CA is 47, with a range of 18-89
- 48% of those who were single homeless adults were age 50+
- Of those 50+, 48% first became homeless when they were 50 or older
- As one of our participants said, **“I never thought, in my wildest imagination, at 64, to be in this predicament.”**



- Once people became homeless, they stayed homeless a long time
- The median length of the current episode was 22 months
- 38% met Federal Criteria for chronic homelessness



- So how did people come to be homeless?
- 19% of Californians who entered homelessness did so directly from an institutional setting—primarily prisons and long-term jail stays.
- 32% entered directly from a housing situation for which they had legal rights—generally rental housing for which they were on the lease
- 49% entered from housing--but housing for which they didn't have any legal title—for example, a doubled up situation, where they had moved in with family or friends



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- For many, they lost their housing slowly—and then all at once. We heard from many people that they had moved many times—each to a less stable and high quality housing—before their last housing. This was true both for leaseholders and non-leaseholders/ For instance, someone may have lived in a two bedroom house, but due to some crisis, they had moved into a room that they rented---and then, perhaps, into staying on a couch of a family member—and then—suddenly they became homeless.
- They had little warning prior to losing housing. The median warning among all housed participants was 5 days; for non-leaseholders—this was 1 day and leaseholders 10 days.

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- Homeless Californians were extremely poor. The median monthly household income in the six months prior to homelessness was \$960
- Non-leaseholders:
  - Median monthly household income: \$950
  - 43% of non-leaseholders did not pay rent
  - Median monthly housing costs (among those who paid rent): \$450
- Leaseholders:
  - Median monthly household income: \$1400
  - Median monthly housing costs: \$700

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- **“We were going to get an apartment together, but he died last month. So, now I'm up to paying full rent, which is \$700.00, \$800.00 to start with. I can't pay that. I can't pay that much. It's a lot to pay PG&E and get groceries, too. It's just not possible.”**

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- The main reasons people gave for leaving their last housing differed by whether they were leaseholders or non-leaseholders
- For leaseholders—21% noted that the main cause of their losing housing was a decrease in their household income
- For non-leaseholders, living in stressful, overcrowded conditions—about a quarter said it was interpersonal issues: 13% said conflict between residents and 11% said that they didn't want to impose or wanted their own space.
- No matter the reason, it was devastating. As one participant said: **“The first thing I did was I cried because I couldn't believe that I was actually homeless for the first time ever... I've always had a job. If I was unemployed, I was never unemployed for more than a month before finding another job. As time progressed, those things became harder...”**



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- For the most part, homeless Californians were optimistic that relatively small amount of resources timed correctly could have prevented them from becoming homeless.
- 70% thought a \$300-\$500 monthly stipend would have prevented their homelessness;
- 82% thought a one time \$5000-\$10,000 payment would have
- And 90% thought something like a Housing Choice Voucher—which caps rent payments at 30% of household income—would have



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- What was the experience of homelessness like?



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- In a word—harrowing
- **“Most of the time we're ...running around, trying to figure out where we're going to sleep at night ... We're not worried about going to the doctors or going to see somebody or going to get help with our mental state.”**

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- For the most part, people were unsheltered. In the prior six months, 78% were primarily unsheltered: 21% in a vehicle and 57% in a non-vehicle setting. 22% were sheltered.
- 41% of participants noted that at some point during their episode of homelessness, they had wanted shelter, but been unable to access it.

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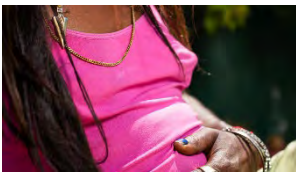
- Homeless Californians health was poor
- Almost half or 46% noted that their health was poor or fair (about three times what you would expect)
- 60% reported at least one major chronic health condition—even though we would anticipate that these were underreported due to poor access to care
- 34% reported a limitation in at least one activity of daily living

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- While 83% reported having health insurance, and 62% reported a non-ED regular source of care,
- 38% had visited an Emergency Department and 21% had had an inpatient hospitalization for a physical health problem in the prior six months

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- Of those assigned female at birth and under age 45, 26% were pregnant at some point during this episode. 40% of those 18-24; 8% were pregnant at the time of the interview.

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- Homeless Californians mental health was poor: In their lifetime, 27% had experienced a psychiatric hospitalization (44% for the first time after they experienced homelessness)
- 31% reported having attempted suicide in their life
- 25% a PTSD diagnosis
- Many reported serious mental health symptoms, but they were driven by depression and anxiety symptoms (each about half)
- 12% reported currently experiencing hallucinations
- 5% reported a recent psychiatric hospitalization (prior six months)
- Of those who reported a serious mental health symptom, only 24% had received any type of treatment in the prior 30 days



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- Substance use was common:
  - 35% reported using illicit drugs 3x a week or more during the current episode—this was mostly driven by methamphetamines.
  - While 11% reported regular use of non-prescribed opioids—most who used opioids did so in the context of using methamphetamine—few used opioids alone
  - 11% reported having survived an overdose during this episode
  - 9% reported heavy episodic alcohol use at least weekly
  - 40% had either regular illicit drug use or heavy regular alcohol use



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- Few received treatment for their substance use
  - Only 10% were currently receiving any treatment—and much of it through peer support
  - Of those with current regular illicit drug use or heavy alcohol use, 21% told us that they currently wanted treatment—but had been unable to find it
  - Many reported using substances as a response to their homelessness. A third of those who used regularly started to do so after they had become homeless
  - As one participant said: **“I started, I guess you could say using, when I became homeless... meth... I would use it to stay awake at night. So, it’s not like I would need a fix in the daytime or nothing else.”**



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- While homelessness is a housing problem—there is no doubt that both because of the way in which homelessness is more likely to impact those with mental health and substance use conditions AND because the trauma of homelessness worsens these problems and interferes with getting help—the end result is that many who experience homelessness have significant mental health and substance use problems.
- Of course—when we study homelessness this way—and select people at one point in time, we tend to overestimate those with the worst problems—because they are likely to stay homeless longer. On the other hand—this does give an accurate snapshot of who is homeless now.
- We found that almost half 48% of those who experienced homelessness had one of the four problems: current regular illicit drug use, heavy regular alcohol use, current hallucinations or a recent psychiatric hospitalization.



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- How traumatic is homelessness?
- Over a third –36% reported that in the prior six months, they had had all their belongings taken from them in a forced displacement or “sweep”
- These sweeps resulted in them losing their belongings—IDs, medicines, photos of family members—cell phones.
- 30% reported at least one overnight stay in jail during this episode—with a median length of stay of two days.
- **“The police would show up and man, there they are, tapping me on my shoulder, and they’d want to search me. And they’d find drugs on me or something, and off to jail we went.”**



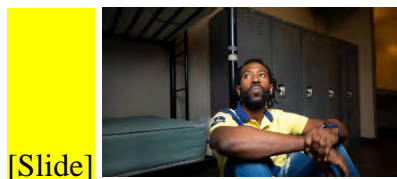
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- The violence people experienced was constant, terrifying, dehumanizing.

- 36% experienced physical violence during this episode of homelessness—almost half of which was perpetuated by a stranger
- 10% experienced sexual violence—this was more common in cis-gender women (16%) and trans/non-binary (35%) Californians
- Of those who experienced this, 54% reported that the perpetrator was a stranger
- **“And I pray every day that it comes to an end because I’m tired, you know? Not only do you have to deal with break-ins regularly, you have to deal with a male who might want to physically violate you, violently at that. There’s robberies galore. There’s always breaking and entering.”**



- What is keeping people homeless?
- First--everyone wanted to be housed. Despite the rhetoric—people want to be housed
- But--the rent is too darn high
- 89% of Californians experiencing homelessness said that the cost of housing was a main impediment to exiting homelessness
- 63% noted that they didn’t have anyone to help them navigate finding housing
- 53% noted that they didn’t have documents—meaning paperwork—to apply for housing
- 49% noted problems with past evictions or bad credit
- 43% reported having experienced discrimination
- 36% reported having a criminal justice system record as a barrier
- But despite this, people yearned for home.



- Although many wanted help, few were getting it
- Only 46% had received any formal assistance in finding housing during this episode of homelessness
- Only 26% had received help at least once a month in the prior six months
- **“There’s just not enough resources out there for people who want to get out of being unhoused... You kind of just seem like you’re stuck there. Even if you’re trying to get a job, like you have to have an address. And, if you don’t have an address, you can’t get a job. If you can’t get a job, you can’t stop being unhoused.”**

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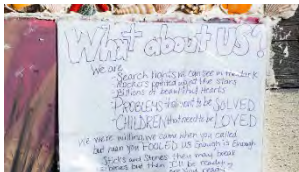
- People were, for the most part, clear eyed about what would help them regain housing.
- 86% thought \$300-\$500 a month would help
- 96% thought \$5000-\$10,000 one time would
- 96% thought a housing voucher would
- 94% thought having a housing navigator would

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- But everyone yearned for home. Dreamt about it. Hoped for it
- **“You be cold and freezing in the tent sometimes. You’ve got plenty blankets, gloves, hoodie, jackets. But it really makes you appreciate being inside. You can bathe when you want to. I was going to flush the toilet when I get in my apartment, just so I can hear it. You don’t realize how important it is to be inside. I know that I would cut all my limbs off, if that’s what it took to pay my rent for the rest of my life. And I would never have to be outside again. That’s what I would do....Having a place, a stable place over your head, is the most honorable thing you can give yourself. Because you can eat, you can sleep, come and go. Yeah, see your grandkids. They come to see you because you have somewhere for them to come to. It’s the most beautiful thing.”**

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- So—where does that leave us? Where do we go from here? How do we fulfill this yearning for home?
- This crisis IS a direct result of bad decisions—but I am not referring to the decisions made by people experiencing homelessness. Instead, the homelessness crisis is a result of policies that left us with ever widening income inequality that have left many constrained by generational poverty; Disinvestment in Federal support for affordable housing---which left us without sufficient affordable housing being created and left all too many without enough to pay rent—policies that today—only provide one voucher for rental assistance

for every four households who meet the strict criteria. It is a result of zoning policies that restricted building such that it was unable to keep up with demand and contributed to skyrocketing prices. It is a result of the erosion of our safety net that failed to catch people when they struggled, widespread stigma and criminalization of substance use and mental health disabilities, criminalization of poverty that has resulted in a response that punishes those victimized by our collective policy failures. These policies were created in a country that has never wrestled with its original sin of structural racism and the way that informed so many of our decisions. While it is so easy to blame people impacted by homelessness—doing so is neither fair or right—nor will it get us any closer to a solution.



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- But the good news—is that problems created by poor policies can be reversed. It won't be easy—but to believe it is impossible is to ensure a future that is not only harmful to those suffering from the effects of homelessness—but harmful to us all. Because ending homelessness will benefit us all. So—where do we go from here?
- The first thing to recognize is that every path to ending this crisis flows through housing. And not just any housing—but housing that is affordable and available for the lowest income households. Steps like:
- Expanding rental assistance programs: Currently, the Housing Choice Voucher program which provides a voucher that enables low income households to rent housing on the private market and caps their contribution at 30% of household income serve only 1 in four who qualify. The Family Options Study—a rigorous RCT of different approaches to family homelessness found that HCV are the most effective way to end family homelessness. But vouchers alone won't solve the problem. We need make it easier to use them—both by creating housing abundance, but also by strictly enforcing anti discrimination laws. We need to expand support for the development of affordable housing—recognizing that the market can not solve this on its own.
- We need to expand and operationalize targeted homelessness prevention—by identifying those at highest risk and intervening before people become homeless—including preventing homelessness among those exiting institutional settings.
- We need to increase incomes—both for those who work jobs and those who have disabilities who can't.
- We need to expand outreach into homeless encampments and places where people are—to help them survive—and help them get into housing.
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- And we need to double down on the proven interventions to end homelessness—even amongst those with significant behavioral health disabilities and chronic homelessness:
- Housing First: Housing First is a philosophy which views housing as the source of stability. It does not require sobriety or engagement in services as a precondition for housing.
- Not everyone who experiences homelessness requires services and supports. Many just need housing that they can access and afford.
- But there is simply no way to end homelessness without housing.
- What about those with significant behavioral health disabilities?
- Housing First pairs subsidized housing with low barrier and appropriately robust services offered voluntarily to support the ability of tenants to thrive
- Housing First is not Housing Only---there a strong evidence base for its effectiveness—but that evidence base assumes that the housing is paired with appropriate services. This—often called Permanent Supportive Housing—can succeed for the vast majority of people experiencing homelessness—but only if both the housing and services are available, funded, and scaled.
- We will not solve this problem by denying the enormous trauma that people who have experienced homelessness have been through—many of them for years prior to homelessness—and worsened by homelessness. We need to acknowledge that many might have significant behavioral health conditions but also acknowledge and agree that everyone can thrive in the community, when the supports are there as needed.
- As few years ago, we were asked to evaluate a PSH project in Santa Clara County—the most expensive real estate market in the country. Asked by the County to help them identify the folks with chronic homelessness with the most significant impairments and perceived barriers to housing—we did just that. We identified the 426 with the most severe high use of services—jails, psychiatric emergency departments, ERs and hospitals. To give you a sense—the group had on average over the two years prior to enrollment: over 5 inpatient admissions, 19 ED visits, 3.7 jail stays.
- We didn't have enough housing for all—so we randomized them.
- We approached people when they presented in the ED or jail or hospital. And basically asked them---if they would be willing to enroll in a study for a 50/50% of receiving housing. We often approached in the early AM after people had been up all night.
- We approached 426. Two told us they didn't want to talk to us. One who we spoke to and confirmed was eligible declined. EVERYONE else said yes. They didn't know us.

They needed to agree to be in a study. These were the folks with chronic homelessness and severe issues—and they basically all said yes to a 50/50 chance of getting housing.

- We randomized them right then.
- Amongn those randomized to housing—within the first four years 86% were housed (by the time we ended the study at 7 years, 91% were)
- It took a median of two months to get them into housing.
- Once they got housed—they stayed housed—for years. Those housed spent an average of over 90% of their nights in housing over the next years.
- We saw some improvements in function compared to the control group—even though over 30% of the control group obtained housing. We saw decreases in use of psychiatric ED, and shelter and increased use of mental health services. But most importantly—they stayed housed.
- We actually know how to do this. It is hard. It takes funding. And trained staff with appropriate ratios. And ongoing funding for the housing and services. But—the price of not doing it—is simply too high.



- The cost of not solving homelessness is too high. The yearning for home is too fundamental and important for health and wellbeing—
- We have it in us to build a better future. It won't be easy—but the price of not doing so is enormous.



- We desperately need a new commitment to creating a future in which all know the safety and security of home.
- The time to do so is now.



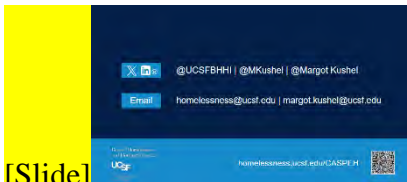
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- I have too many people to thank—but want to start with the brilliant members of BHHI’s Lived Expertise Advisory Board who have walked with us every step of this study.
- They have leant their enormous talents and energy and deep wisdom.
- And they remind me every day of the potential we are at risk of wasting.
- I feel so lucky to get to work with them and learn from them. They are truly extraordinary.



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- And to my incredible colleagues at the BHHI-- there are literally too many people to thank. I am grateful for their brilliance and perseverance and deep commitment to the work. They made enormous sacrifices to do this work—and they inspire me every day. Thank you.
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- I will leave you with ways to contact us—and a QR code for the study.
- We have others to come—so please join us.