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Policy Shifts in the Massachusetts Response to Family Homelessness

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Massachusetts's response to the tragedy of family homelessness during a period of economic prosperity (1983–1987) is contrasted to a period of economic decline (1988–1992). The article describes the movement toward a structural response in the boom years and its dismantling with the emergence of a “blame the victim” response in the decline years. The roles of state government, advocacy groups, human service providers, private funding sources, academic institutions, and the media, as they influence these responses, are outlined. Interviews with key actors in these groups, group interviews with formerly homeless women, a review of the literature, and the authors' direct experience in the field provide concrete evidence from which conclusions are drawn.

Competing Causes of Family Homelessness

Family homelessness has increased dramatically in the past ten years within the commonwealth of Massachusetts and nationwide. There has been considerable discussion about the causes of its rapid growth. Perception of cause is critical to the choice of strategies employed to respond to it.

In a comparative federal study, “Homeless Families with Children: Programmatic Responses of Five Communities,” cause is described as political, economic, social, or individual, with an array of detrimental consequences.¹ Structural causes are the root of family homelessness, while individual or family pathology is a major precipitating cause. These two sets of causes are frequently set in opposition to one another, as they can support opposing ideologies. This is best illustrated by the conceptualization of William Ryan in *Blaming the Victim*, in which he describes the “exceptionalist” versus the “universalist” ideology.² Ryan's interpretation applies to the general conditions of poverty, but it can equally be applied to the specific issue of homelessness.

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Proponents of the exceptionalist position see the cause of family homelessness as pathology/deficits within its victims as primary and social, economic, and political causes as secondary. Supporters of this position define homeless families as a distinct subcategory that needs specialized human services. It supports the growth of a human service system that addresses pathology in a specific category of individuals and families — in this instance, homeless families. John McKnight calls such a system a “comprehensive, multi-disciplinary, coordinated, interagency service system. It is the equivalent of institutionalization without walls or the design of an environment to create a totally dependent service system consumer.”³ The exceptionalist position legitimates the status quo and calls for only incremental changes in public policy.

This position has its roots in history when the English poor laws became the foundation for evolution of public policy based on the distinction between the deserving and undeserving poor. It gives rise to the “blame the victim policy,” an American ideology that all too frequently resulted in misaligned public policy that hurts poor people.

In contrast, proponents of the universalist position see social, economic, and political causes that sustain endemic poverty and marginalization as primary. Family problems are often exacerbated through a struggle to survive in a basically unjust system. Supporters of this view argue against categorizing homeless families as a distinct and separate entity. Inadequate income and out-of-control housing costs are the factors that cause homelessness to increase today. They advocate public policy changes designed to give poor families equity in access to resources and call for a comprehensive analysis of the systemic causes of poverty that exacerbate homelessness and the need for radical social change.

Our Perception

We, as human service providers committed to the universalist position, advocate a structural response to family homelessness. We propose that the causes of homelessness be perceived from the perspective of its victims and that homeless persons be organized and involved as advocates in the process of social change. A view of family homelessness from the State House, the hallways of academia, clinical professional perspective, or the kitchen table of a family shelter reveals different perceptions of cause. A view from the experience of the victims identifies lack of affordable housing, inadequate income, unequal access to resources like child care, skills training, and education as key factors.

Homeless families are just like other poor families. What differentiates them is that they have been burned out, evicted, or have exhausted the good will and resources of family, friends, and acquaintances in doubled-up accommodations and sometimes threatening environments. Many of them have extraordinary survival skills. They have the same desires and aspirations to be good parents, to be responsible and independent adults, and to make the American dream come true for themselves and their children. They are ashamed that the dream turned to nightmare and that they are in cars, on the street, in doubled-up situations, or in hotels, motels, and shelters.

We regard the exceptionalist response to family homelessness as misdirected. The building of an alternative human service system for a separate population of home-

less families is costly and ineffective. Poor families fall out of housing because of inadequate income and the profit structure of housing. They should be placed in permanent housing. Public policy should then be focused on the creation of supportive, neighborhood-based services that all poor families need for their growth and development. These include day care, recreational facilities, human development and educational programs, support groups, substance-abuse programs, and community-based organizations and associations. In the past several years we have seen the erosion of such a communal infrastructure in many poor neighborhoods.

What accompanies the exceptionalist position is blaming the victim, an ideology that is embedded in the culture of the United States. Even when it has receded into the background for a time, it can all too easily rear its ugly head. Perhaps its most devastating effect is what it does to its victims, giving them this message: you are inadequate, deficient, ill, something is wrong with you. The tragedy is that the message becomes interiorized and the target group accepts the verdict. This can result in the depletion of self-esteem, which generates dependency and creates conditions in which personal and family pathology thrive.

Our second core belief is that real change comes from the bottom up. Homeless families themselves must be engaged as active participants in the change process. Acting as their own advocates, in collaboration with others, is empowering, heals blame, and keeps the advocates and human service providers focused. We need to make organizational links between homeless families, AFDC (Aid to Families with Dependent Children) families, and low-income families, who are equally at risk of becoming homeless. Group power and action inclusive of the organization and presence of homeless families is the basic vehicle for social and institutional change.

We argue that during the economic boom years, 1983–1987, there was a movement in the commonwealth of Massachusetts to provide greater access to shelter, housing resources, and other financial benefits for homeless families and families at risk of being homeless. However, we also argue that when resources dried up and the problem continued to escalate in the years of economic decline, 1988–1992, the institutional gains of the boom years were gradually stripped away. The blame-the-victim ideology was often employed as the rationale for these changes.

The Economic Boom Years: 1983–1987

Homelessness in Massachusetts grew rapidly in the 1980s, particularly among its most vulnerable victims, economically disenfranchised women and children. These were the years of the “Massachusetts Miracle” for some, but for others they were the years of the trickle-down illusion. “The economic recovery of the 1980s bypassed many American families with children. Far from becoming prosperous, millions of families now find themselves without enough income to ensure a decent standard of living — including stable housing — for their children. Family incomes were hurt by a number of factors, including changes in the job market and falling wages, a ‘safety net’ so weak it pulls few families out of poverty, and a growing number of one-parent families.”⁴

Young families headed by persons younger than thirty years of age “saw their median income fall by 13 percent between 1973 and 1987; the incomes of young families with children fell by 24%, of black families by 33%, of Latino families by 19%, and of female-headed families by 22%.”⁵

In the early years in Massachusetts, over 90 percent of homeless families were recipients of AFDC. AFDC grants had not been adjusted to inflation for several years. Between 1960 and 1980, AFDC grants decreased by 56 percent. This left AFDC families extremely vulnerable to an escalating real estate market.

The average monthly AFDC grant for a family of three in 1986 was \$426, while the fair market value for a rental apartment well exceeded the allotment. Less than a third of AFDC families were in subsidized housing. One advocate we interviewed commented that "in 1980, poor people could still bounce from apartment to apartment because housing costs weren't so exorbitant. The situation was much worse by 1983, since families on AFDC received no grant increases for several years, and the market boom and gentrification had taken effect."

Insufficient income, unaffordable housing, and a dearth of subsidies resulted in the escalation of family homelessness. In 1983, homeless families were relegated to cars, the streets, or moving from place to place in doubled-up conditions to whoever would take them, overcrowded and unwanted. Such scenes shocked the moral conscience of the citizens of Massachusetts. There was a sense of moral outrage that cried out for something to be done. These conditions shaped the state's agenda in the early years: access to emergency shelter and to resources for subsidized housing.

In the fall of 1982, William Hogan, secretary of the Executive Office of Human Services (EOHS) in the outgoing Edward King administration, gave the green light to the Department of Public Welfare to craft an initial response. Elyse Jacob, a former human service advocate commissioned to conduct this research on behalf of state government, immediately engaged the advocacy and human provider community in the process. This initial work took on a life of its own when Governor Michael Dukakis, during his January 1983 inaugural address, declared that combating homelessness would be a number one priority of human service in his administration. The leadership of state government had declared its commitment to eradicate homelessness, and this had a decisive influence on Massachusetts's movement to a more systemic response to family homelessness in the early years.

Structural Response to Family Homelessness

The movement to a systemic response consisted of two basic developments. The first was the passage of Chapter 450, which provided an emergency service program for homeless and at risk of being homeless families. The second was the procuring of greater access to subsidized housing certificates for homeless families.

Chapter 450: Emergency Assistance

In the fall of 1983, Chapter 450 of the Massachusetts General Laws was enacted by the legislature. It mandated the commonwealth to provide a program of emergency assistance (EA) to needy families. EA addressed homelessness in two ways: (1) It prevented homelessness by providing rent, mortgage, and utility arrearage for low-income families who were at risk of being homeless. The commitment to this program, which began in 1983 with \$2 million, expanded to \$8.3 million in 1987. (2) It also provided payment for shelter and hotel/motel costs for homeless families, as well as cost of furniture storage and first month's rent, security deposit, and moving expenses when families moved from shelter into permanent housing.

Families were living on the streets, a situation that needed an emergency response. Affordable housing, a long-term solution, was not immediately available, so shelters were considered the best answer. Massachusetts availed itself of the experience of advocates. It did not create barrack-type dwellings for families as was done in New York State. A unique and replicable model was created. Family shelters were designed as small dwellings in residential neighborhoods with supportive financial and political roots in local communities. Besides food and shelter and a place to feel safe and secure, these programs provided housing search, family life education, information and referral, case management, transportation reimbursement, advocacy, access to health and educational services, and follow-up services. This family shelter model was unique in the nation. As stated in a comparative federal study, "Shelters in Massachusetts resembled Transitional Programs in many other cities especially if the shelter has undertaken to develop social service linkages beyond those reimbursed by DPW."⁶

The state commitment to this response is documented by its growth. In 1983 there were three family shelters, while in late 1987 fifty-eight were geographically distributed throughout the state.

In "A Service Model for Homeless Families," the Massachusetts Shelter Providers Organization in 1986 identified its support for an economic response to family homelessness. "Homelessness is a situation, not a population. Homeless families are a diverse group and represent many segments of our society. In working with families in a variety of shelters as well as hotels/motels, it has become clear that the needs of homeless families are similar to the needs of all other families. The main difference for these families is that they are in crisis due to the lack of permanent housing and receptive support systems."⁷

In addition to family shelters, which had a bed capacity of slightly over 500 beds in late 1986, the state used hotels and motels to house homeless families. The choice of hotels/motels to handle the increasing number of homeless families was riddled with problems. Costs were exorbitant and greatly exceeded shelter costs. Conditions were inadequate, unsanitary, unsafe, and inappropriate for families with young children. By mid-1987, 684 families were housed in hotels and motels by the state. The media and advocate community dramatized the suffering of these families and the exorbitant expenditures entailed. They challenged the state to redirect these moneys to provide permanent housing for homeless families. This pressure played a positive role in highlighting the need for greater access to subsidies and set the stage for a major focus on access to subsidized housing. As one of our interviewees put it, "The legislature's commitment to reduce the hotel/motel count opened the door for greater access to 707's [the state subsidized housing program]."

Access to Subsidized Housing

Each year, thousands of subsidized housing resources, funded by the federal government, and with already appropriated state funds, turn over and are made available for new applicants. Only a small proportion of these resources has gone to homeless and/or AFDC families. The primary reasons for the substantial failure to deliver existing resources to homeless families are failure of housing authorities to give priority to homeless, procedural and administrative barriers, and discrimination.⁸ Advocates believed that homeless and AFDC families were too frequently left out

of EOCD, the state's housing agency system. Advocates joined with state government employees to gain greater access to both the state and federal government's housing resources.

In fiscal year 1986, the Department of Public Welfare and the Economic Office of Community Development (EOCD) established a special pilot program to provide state-funded Chapter 707 rent subsidies to homeless families, called set-asides. In fiscal year 1987, the legislature expanded funding for the program and more than 900 homeless families found housing with Chapter 707 certificates. Gains were also made in access to Section 8 vouchers and certificates (subsidized by the federal government), as well as to other subsidized units in the state.

In assessing the effectiveness of this response, these figures speak for themselves. In 1983 less than one third of the AFDC caseload had subsidized housing, but by 1992, 44 percent of an increased AFDC caseload have subsidized housing. Since 1983, 12,000 formerly homeless families have been placed into permanent housing with subsidies.

Homelessness Prevention Initiative

In late 1987, Governor Dukakis proposed an initiative aimed at stopping homelessness before it started. In his fiscal 1989 House 1 budget he requested an additional \$21.8 million to fund this prevention effort. This initiative mandated all appropriate state agencies to collaborate to implement a response, including the Executive Office of Human Services, the Executive Office of Community Development, the Department of Public Welfare, the Department of Social Services, the Department of Mental Health, and the Department of Public Health. Extended to include advocates and human service providers throughout the state, the collaboration provided an interdepartmental forum in which the key elements to prevent homelessness could be discussed: rent subsidies, child care, housing search, education, health care, case management. The initiative did not make it through the legislature, and these efforts fizzled.

Influential Factors in Massachusetts's Boom Year Response

Several factors helped shape a structured response to family homelessness in the boom years, one of the most important of which was the leadership of the Dukakis administration. "Homelessness was the governor's number one priority. It therefore gained budget, policy, and media attention," says one former public servant. A statewide Commission on Homelessness, chaired by Kitty Dukakis, was formed to oversee the implementation of this priority.

Advocacy Groups

Advocacy groups were ready to move on the issue in 1983. The Massachusetts Coalition for the Homeless was formed in the early eighties to advocate for the homeless. It had forged bonds with the Coalition for Basic Human Needs, Greater Boston Legal Services, and Massachusetts Law Reform. They had collaborated on the Up to Poverty campaign, which sought to upgrade AFDC grants for families. These groups were extremely instrumental when they focused their combined attention on the homeless.

In 1985 an organization of human service providers, later the Massachusetts Shelter Providers Association, was in its early stages of formation. Members of this association came from the nonprofit world, churches, community-based agencies, and neighborhood associations. Providers of service to the homeless first on a voluntary basis, they later became Department of Public Welfare-funded shelters in a contractual arrangement with the state. These groups were close to the real needs of homeless families. Their roots were not in traditional human service systems, so they brought a freshness to the issue that led to quick identification of economic, political, and social causes.

Collaborative Links among Key Actors

An atypical synergy existed among strange bedfellows in the early years. Human service providers, advocates, public servants, private funding sources, media, and to a lesser extent the academic community agreed in naming declining income and high housing costs as the causes of family homelessness. Together they tried to shape public consciousness and marshal public and private resources to respond to the need for emergency shelter and permanent housing. Former advocates active in the King administration were later hired by the Dukakis administration and appointed to key state positions. These newly appointed public servants valued the grassroots community experience and created channels for these voices to be heard within state government.

Private foundations were also part of the collaborative. The Fund for the Homeless played a uniquely supportive role in the early years. It complemented state funding through the provision of capital grants to new shelter programs. This was followed by STAP, Shelter Technical Assistance Project, which advised shelters in critical administrative and program development areas. The third phase of the fund's response is Beyond Shelter. "Its purpose was to provide resources for public education, constituency development and coalition building among the direct service, development and advocacy organizations at work in Massachusetts. Its overarching purpose is to promote broad based citizen action to end homelessness."⁹

Strong links with the media were forged. Efforts to work with the media were proactive and coordinated through the collaborative. While the media dramatized the human tragedy of homelessness especially during the holidays, they were quite sensitive in identifying the systemic causes. They focused on the issues and continued a dialogue with the advocacy community. Bashing the victims or state government was much less apparent.

In the economic boom years, Massachusetts made a serious commitment to respond to family homelessness. The Department of Public Welfare played a major role in this effort. The state's commitment was hampered in these years of the Reagan era, with its substantive federal cuts in human services and its major retreat in the area of low-income housing development. The gains, however, were significant for thousands of homeless and at risk of becoming homeless families in Massachusetts.

They included:

- Growth of a humane model of family shelter geographically distributed throughout the state

- EA arrearage payments (back payments for rent, mortgage, or utilities), which prevented many families from joining the ranks of the homeless, and financial supports to assist homeless families in the move to obtain and maintain permanent housing
- Improved access to Section 8 (federal) and 707 (state) subsidies, as well as other subsidized units
- Creation of a forum in which key actors in state government, advocates, human service providers, homeless persons, and private funders could communicate and plan strategies to respond to family homelessness

Testimony from the victims of homelessness speaks to some of the gains of the Massachusetts response in these years. Wellspring, a family shelter in Gloucester, Massachusetts, recently completed a research study based on a survey of seventy-nine formerly homeless women who were residents of the shelter during the 1980s, "We Are Like You." It reveals that 94 percent of the women have survived homelessness and are still in permanent housing. All but two of the respondents indicated that their lives were dramatically better than when they were at Wellspring."¹⁰

Two formerly homeless women were among our interviewees. One, who is employed full time, says, "I met people who believed in me and helped me to believe in myself." The second, who just completed four years of college and is in her first year of teaching in the Boston school system, reports, "The doors were open to me through the shelter. I got health care for my failure-to-thrive daughter, an apartment, child care, education, and friendship that supported me all along the way." Both women are members of the board of directors at Project Hope.

The movement toward an increasingly systemic approach was expressed in a recent federal study.

To a greater extent than in most of the cities visited, advocates and providers were reluctant to attribute family homelessness to individual problems such as substance abuse and mental illness. In part, this reflects a dominant ideology among service providers of homelessness as a failure of the system. In addition, the decline in the economy and the escalation of housing costs have clearly put a larger portion of households at risk of homelessness. A survey of public attitudes towards the homeless indicated that 57 percent of respondents were sympathetic to the plight of homeless people because they felt that their own households were at risk of homelessness.¹¹

Many who call 1983–1987 the "good years" in the Massachusetts response to homelessness remember, sometimes with nostalgia, the collaboration and bonding that made things happen: encouragement to shape creative programs; the sense of hope that Massachusetts could indeed make a difference in its response to the moral tragedy of family homelessness. Reflection on those five years confronts us with their dark side. Already present in the good years were the seeds of demise, which left us vulnerable to the dismantling that occurred in the economic decline years.

The Economic Decline Years: 1988–1992

Family homelessness continued to escalate in the late 1980s. Shelters were full and the hotel/motel count reached its peak, with 684 families. Poor families were feeling

the strong effects of years of real estate speculation, decrease in real wages, and stagnation of welfare benefits.

Chronic poverty and public assistance alone do not characterize the homeless. Another population of families with at least one parent in full-time employment is now becoming homeless. This includes people from middle-class backgrounds, displaced by big rises in rents and condo-conversions, and with salaries too low to afford market rents. As in the case of the very poor, these "working homeless" are essentially no different from others of similar income who are still holding on to their homes, with increasing anxiety. The number of homeless families of this type becoming homeless will inevitably grow."¹²

This fear was verified by the experiences of formerly homeless women who declared that "two-parent, working families cannot buy homes and are struggling to avoid homelessness for the second time." Insightfully, they recognize that "anyone who lives near the poverty line is vulnerable [and] that group of people is getting bigger every day." Michael Stone in his study "One-Third of a Nation: A New Look at Housing Affordability in America" identifies a growing number of "shelter poor," those living on the verge of homelessness. His figures show that the number of U.S. households afflicted with "shelter poverty" rose from 18.7 million in 1970 to 26.5 million by 1987, a 42 percent increase.¹³

In the late eighties, when Governor Dukakis was campaigning in the presidential election, the state was confronted with increasing numbers of homeless persons. In 1983, in response to public pressure, the administration committed itself to an emergency response to homelessness, genuinely believing that the problem could be solved, without, however, "any fundamental reordering of society itself."¹⁴

But "emergency services are an unstable basis on which to ground policy. Claims are expected to disappear or diminish in intensity or institutions may be expected to routinize interventions."¹⁵ Homelessness did not disappear. Advocates witnessed the dismantling of the gains achieved in the boom years. A distressing shift began: control the numbers by restricting eligibility and multiplying regulations. This strategy of limiting access to shelter and housing was like putting a finger in the dike, court-jing short-term success and long-term disaster.

Limiting Access

Articles in this publication by Sue Marsh and Barbara Sard address in detail the dismantling of emergency policies, that is, Emergency Assistance (EA), which included emergency shelter and arrearage as well as access to Chapter 707, Section 8's, and other subsidized housing.

In the fall of 1989, the Department of Public Welfare implemented new regulations governing entrance into emergency shelter that restricted eligibility and required burdensome verification. It was a successful strategy. In fiscal 1989, 6,300 families received emergency shelter; in fiscal 1990, 4,700 families received emergency shelter, a 26 percent decrease in the midst of a serious economic recession.

Families who are currently homeless reported abuse from the welfare department in the form of misinformation and denial of services based on punitive regulations designed to reduce the number of families in shelter. Desperate families were often told that the state no longer provided shelter or that they were ineligible for help.

Families, unaware of their rights, believed what they heard. From January 1990 to June 1990, Greater Boston Legal Services received 190 cases of homeless families denied emergency shelter.

The Executive Office of Community Development regulated access to housing resources. Eligibility for 707 state subsidies was severely restricted. EOCD, as stated by an interviewee, "has helped to reinforce the worthy and nonworthy homeless message by adding a 'no-fault' element to HUD's [Housing and Urban Development] Section 8 resources. Admittedly in an effort to curtail the number of eligible homeless families, they defined specific categories of homelessness with stringent documentation requirements which did not formerly exist for federal housing resources." HUD has followed their lead with the creation of the Bootstrap Section 8 program, which ties housing subsidies to people who are involved in "self-improvement" as defined through the state's Education and Training program. Ironically, fewer people will be eligible for these as the state cuts back on EA and day care support for low-income families.

The action of the legislature also had an impact on the number of resources available for permanent housing. Chapter 707 state subsidies designated specifically for the homeless in the state budget were reduced by 60 percent in 1990 and then eliminated. The logical result is that families are destined to much longer shelter stays. In May 1988, a Project Hope resident could expect to live there for eight to twelve weeks. In May 1991, the length of stay, with luck, increased to eight months. The cost of this stay could house a family with a subsidy for four years.

Cuts were inevitable as the budget crisis worsened and the state had to face up to an economic recession. The rationale that supported these cuts was indeed disconcerting to many advocates who believed that we had moved beyond blaming the victim. "Homelessness faces U.S. [and Massachusetts] policy makers with a critical dilemma: they cannot actually 'solve' the problem, and yet they cannot ignore it. They must find a different approach. The government denies the extent of the problem, blames the victim, specializes the cause, and hides the consequences of homelessness."¹⁶

Factors That Influenced the Shift

Homelessness persisted beyond the point of patience for the politicians and the public. Complex socioeconomic causes permitted no easy solution. The cost would require major sacrifices for large numbers of people in the state. Effectively combating most social problems such as homelessness "requires large scale income redistribution attainable only through both higher taxes and higher transfer payments or subsidies."¹⁷ Citizens became conscious of this cost at the same time that Bill Weld campaigned for governor on a "no new taxes" and "elimination of government waste" platform.

Many were discouraged that after so much attention, homelessness did not go away, others were threatened by the presence of increased numbers of homeless people, and still others were just bored with the issue. These responses followed the pattern of the "issue attention cycle" in regard to domestic problems. "A problem suddenly leaps to prominence, remains there for a short time, and then, though still largely unresolved, gradually fades from the center of public attention, and then a new issue takes center stage."¹⁸

Frustration with homelessness and excessive budget cuts laid the groundwork for projecting the blame on the victim, a tenacious cultural perception that is embedded both in our psyches and social institutions. It was the most frequently stated rationale for the dismantling process.

This ideology expressed itself through a number of stereotypes: families become homeless to get subsidies; young parents want to get out from under parental control, so they have children, make themselves homeless, and access shelter and subsidies; families are homeless because of substance abuse, personal and familial dysfunction, and many of these are the hard-core multiproblem families.

These beliefs reinforced the idea that homelessness is a population, not a condition. While the state focused on limiting access to vitally needed resources, the federal government targeted grants to transitional housing, with a major funding focus on the cure and reform of homeless families. Such housing is based on the belief that families are not ready for housing and need long-range segregated housing to address their multiple problems.

This way of thinking reinforced a dual thrust in response to homeless families. First, there was an effort to punish families abusing the system by limiting access to shelter and curtailing subsidies. Second, there was emphasis on creating an alternative transitional program for the "cure" and "reform" of homeless families. We believe that both strategies are counterproductive. Keeping people in untenable and dangerous situations exacerbates problems, and shelter providers across the state are seeing the results of this effort. We see the dramatic increases in the protective services of the Department of Social Services, as well as the increased AFDC case-loads, as some of the fallout from lack of access to shelter.

Massachusetts advocates join several others throughout the country who believe that "transitional housing is creating another step in the parallel service system and that the longer that settings such as shelters and transitional housing are used to house families, the more they will be perceived as legitimate and 'normal' housing. While they acknowledge the need of families for support services, these experts advocate permanent housing scattered throughout the community and accompanied by a case plan for support services."¹⁹ This approach is based on the conviction among advocates that homeless families are similar to housed families. Both are in need of services. Physical and sexual abuse, drug abuse, failed education, and hunger are symptoms that reflect inequality and a puzzlingly high level of unalleviated distress in America, which is totally inconsistent with our proclaimed ideals and our enormous wealth.

Housed families in poverty and low-income neighborhoods and homeless families are equally victims of such distress. A Boston-area study compared fifty housed families to fifty homeless families in regard to prevalence of physical and sexual abuse. "Contrary to expectation, there were no differences between the homeless and housed women in their histories of sexual and physical abuse in childhood or adulthood except that a significantly higher proportion of housed mothers had experienced sexual abuse in adulthood."²⁰

Studies that described homeless families as problem laden, as distinguished from housed low-income families, have met with considerable resistance in Massachusetts. The advocacy community believes that such studies give credence to the exceptionalist approach to homelessness and lend a veneer of validity to the blame-the-victim mentality.²¹

Public Backlash

Marshall McLuhan pointed out that it is the American public that manages the news by either maintaining or losing interest in a given issue. In the boom years, when there was intense interest in homelessness, human service providers and advocates were continually barraged by the press, particularly during the holidays. In the years of economic decline the reverse became true. They refer to a media blackout, or backlash. "From Atlanta to New York, from Washington to Philadelphia, there is a backlash against those who live in the street. In some cities police are cracking down, in others funding for shelters is drying up. The homeless who once could count on a greater degree of society's compassion, are now the victims of its 'compassion fatigue.'"²²

During a meeting at the Boston Foundation, advocates and human service providers addressed the backlash issue. Charlotte Ryan, a media consultant with Boston College Media Research Action Project, reviewed several articles in the national press and identified key themes. Some of these flow from blaming the victim: the homeless are not the deserving poor; the homeless are so by choice; homeless people are drug addicts and alcoholics; taxes for government programs are going into a black hole; and homelessness is an unsolvable problem.

In the early years the homeless were viewed with compassion: the energy of society flowed naturally toward finding a solution for their suffering. Now that they are subconsciously or consciously labeled as undeserving, the public feels justified in moving on to other agendas.

Our reflections on the collective learning and wisdom of those interviewed lead us to the following conclusions:

- Public servants who had been advocates and close to the grassroots experience facilitated communication, dialogue, and bonding among actors in state government and the advocacy community during the economic boom years. These linkages favored a systemic response to family homelessness.
- Advocacy groups — Massachusetts Coalition for the Homeless, Greater Boston Legal Services, Committee for Basic Human Needs, Massachusetts Law Reform, Massachusetts Shelter Providers Association, as well as the Fund for the Homeless, which frequently convened joint strategy sessions — worked together around a focused agenda. Their collaboration helped to focus the response in the economic boom years toward access to shelter and housing subsidy, as well as to coalesce these actors to prevent splitting and further reductions in the economic decline years.
- One of the most significant lessons was the definition of family homelessness as an emergency necessitating a crisis-oriented response. The Dukakis administration was under pressure to solve this problem that confronted the public conscience. And because advocates tend to focus on winnable fights, these two needs converged and the focus was to create a humane model, in contrast to a barracks-type model, of family shelter. Only as key actors lived this response did the need for accessing subsidies for permanent housing become the main

focus. Often the extent and emergency of people's needs impede advocates from the kind of research and analysis that would call for long-range public policy changes.

- When the situation of families living in cars, on streets, and in unsafe doubled-up situations became known, it shocked the moral conscience of Massachusetts citizens. Instead of blaming the victim, advocates and government officials linked with the press to educate the public to the need for affordable housing to decrease homelessness.
- Advocates expressed regret that the academic community was largely absent from the debate. "Where were the universities?" "Where were the schools of social work?" Early on, a conceptualization of homelessness called for vigorous housing policies and dramatic increases in welfare, and advocates believed that the academic community would have been a great asset in realizing that aim. If they had entered the picture, we might have avoided the creation of a shelter industry. One interviewee who was significantly involved in shaping the state's policy said, "If I had to live those days over, I would focus on sufficient income for a family to do more than survive, the need for subsidized housing, child care, education, and training. As a middle-income woman, I need all of the above for my family." Advocates need to tackle systemic changes, with an eye to long-range results.
- Unlike those of other states, the Massachusetts advocate community was well organized. Homeless people appeared at protests, rallies, and meetings through the intervention of advocates and human service providers, but they were not organized as a distinct group. Advocates affirm the need for homeless people to express their own requirements and capabilities as a great corrective to the internalization of blaming the victim and the human service provider community. Insights from the homeless can challenge us to acknowledge our own participation in injustice and help us to avoid becoming co-opted and part of the problem.
- Homeless families and poor families in low-income neighborhoods are much alike. We should have forged bonds between the homeless, the AFDC, and low-income communities. Together we could have developed a comprehensive strategy for poor families in general. We could have been more supportive of Education and Training and the links to jobs, skills, and day care.
- We must stand inside the experiences and neighborhoods of the economically disenfranchised if we are to undergo a conversion of perception and see the world with new eyes. A challenge is presented to us by John McKnight, who suggests that we "need to develop a capacity-oriented strategy in needs assessments, rather than deficit-oriented strategies. We need to recognize the nature of the human assets, skills, and abilities that exist in low-income neighborhoods. People and neighborhoods cannot be built upon a deficiency orientation. Policies, programs, and resources predicated upon deficiencies are the cornerstones of dependency, consumption, and clienthood."²³

- Last, we must continue to believe that homelessness can be solved. "You don't have to be mean-spirited to walk away from social problems. All it takes is the certainty that nothing can be done to solve them."²⁴

The economic boom years favored a systemic response to family homelessness. When the emergency did not go away, and the budget crisis worsened in the years of economic decline, we lived through a painful dismantling of the gains of the boom years. What was most disconcerting was the shift from problem of family homelessness to that of problem families who are homeless — at both state and federal levels. "For if it is the character faults or pathology of the poor that best accounts for their poverty, then the deeper systemic questions that their disturbing presence might otherwise provoke may be safely ignored."²⁵

The moral tragedy of homelessness, of poverty, lies not only in the fundamental inequities in the economic, social, and political fabric of U.S. society, but in the cultural disparagement that accompanies them, the denial of human dignity. The cultural dynamic of blaming the victim "has its most tragic effect when the targeted group, without adequate resources for sustained resistance, accepts and interiorizes and acts out the denigrating verdict. The tragedy is that people under pressure, out of touch with their true power, will live down to the image of themselves projected with such force by the dominant culture"²⁶

The challenge that faces Massachusetts and the nation is to address this fundamental norm in judging and crafting public policy: "What will this approach or policy do to the poor and deprived members of the human community?"²⁷ 28

Notes

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