RESEARCH HAS BROUGHT US CLOSER THAN EVER TO UNDERSTANDING—AND ENDING—HOMELESSNESS. THE ELUSIVE FIRST STEP IS HOUSING.

BY NICOLE PEZOLD / GSAS ‘04
For much of its existence, the Bowery was the ultimate skid row. The mile-long strip in Lower Manhattan, just a few minutes walk from Washington Square, devolved from a raucous shopping and entertainment district in the mid-1800s to a den of 10-cent-a-night flophouses by the century’s end. Men—and it was usually only men—languished in doorways and along the cracked pavement, hassling passersby for change. They smelled of drink, sweat, and often urine or feces, as their lodging rarely had adequate washing facilities, if any. As cracked pavement, hassling passersby for men—languished indoor ways and along the century’s end. Men—and it was usually only of Culture, Education, and Hu-

“...there had been much more of a tilt toward emphasizing the individual’s deficits, we, among others, helped to shift the lexicon to ‘Wait a second, this is probably more about the fact that poor people can’t get housing.’” Weitzman says in the 1990s. study after study confirmed that while an addiction or illness or domestic violence may hasten the descent into homelessness, or ag-
gorize the climb out, it was not the cause. A man of means, after all, may run a media empire and still abuse prescription painkillers. A mother with a supportive fam-
ily may get laid off or leave her partner without necessarily losing her home.

HISTORY CONFIRMS this idea that homelessness is tied to economies. Though we did not officially start counting the home-
less until the 1970s, census, they interviewed more than 550 families on welfare, half of whom sought shelter, to see the true null hypothesis be-
cause of the variable nature of the problem itself. ‘Families don’t just go from apartments into a shelter,” explains Mary McKay, McSilver Professor of Poverty Studies and founder of the new McSilver Institute for Poverty Policy and Research at the Silver School of Social Work. “They tend to move in with relatives or friends first, or go from apartment to apart-
mant. By doing so, they may avoid the permanence of a shelter, they’ve been
capable of moving on, and what had made the greatest impact was possible physical health.”

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“Bowery types” who setup house on quite a destabilizing jour-

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sparked during the depressions of the 1870s and 1930s. More recently, the demonization of mental hospitals in the 1960s and ’70s accounted for a rise among the chronically homeless, and the ’80s recession hit just as entitlement programs were being delayed for the first time. It was a perfect storm, from which we still haven’t recovered when the financial and mortgage crises hit in 2008. In New-

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New Yorkers’ altruism found that homelessness appeared like an epidemic, starting in New York City. In the 1980s, homelessness, which has been an issue in the city since the 19th century, was particularly acute. Three-quarters of residents believe that the homeless lack motivation and are gaming the system for benefits. This view has never quite shaken the suspicion that homeless people may be uninterested in helping themselves first, if they are able to do so. And so, as a show of support, PATHWAYS clients receive a key to a new apartment.

In 2006, Deborah Padgett and Victor Tsemberi, with support from the Substance Abuse and Mental Health Services Administration, showed that some 88 percent of PATHWAYS clients stayed off the streets during the five-year period studied, compared to just 47 percent in programs that required treatment first. It was as if the client had won the lottery, Tsemberi explains. “Look at this! This is incredible!” They think, “I’m going to turn over a new leaf.” They are determined to keep this place,” he says. “So the motivation to deal with the illness or addiction is actually strengthened by the housing. Nobody thinks of incentives that way.”

Almost all compelling is that PATHWAYS clients were three times more likely to abstain from heavy drinking or drug use, even though it was never required of them. “That to me was the missing piece,” Padgett says.

Of course, just because someone is finally off the streets, and may even be managing their disorder and staying clean, doesn’t mean they can’t return to the streets. The chronically homeless typically live 25 years less than the average person, but they are not all destitute. Many of these individuals, even in mid-2000s, the PATHWAYS model caught the eye of author and philanthropist Michael Bloomberg. And, in his administration has delivered a new order to the Department of Homelessness by streamlining the process from days to hours, and creating a preventive program for those at risk of losing their apartments. He also vowed to make homelessness by two-thirds.

THAT NEVER HAPPENED. Though there was a slight dip in homelessness in New York in 2006, their ranks have climbed steadily. Blame the economy, and years of budget cuts. But also blame how we connect poor people to housing. We simply don’t have enough cheap apartments, or an efficient way to get people into them. As the system works now, only about one-quarter of New Yorkers who need housing assistance get it, says Hipodict Gould Ellen, professor of public policy at the Robert F. Wagner Graduate School of Public Service, who has written extensively on the subject.

The PATHWAYS clients, as they are called, may compute up to 10 percent of one building’s tenants. PATHWAYS includes one-third of a client’s monthly disability check—those with diagnosed disorders—and Social Security income as a result of deinstitutionalization—which goes toward rent. There’s no probationary period, nor is the client required to stay sober, take medication or see a clinic. There are no urine tests or threats of expulsion. If there’s a problem with the landlord or a neighbor, PATHWAYS intervenes. If the client is thrown in jail or rehab, PATHWAYS holds the apartment for them. If they’re evicted, PATHWAYS finds them a new one.

It worked astonishingly well. A randomized trial, funded by the Substance Abuse and Mental Health Services Administration, showed that some 88 percent of PATHWAYS clients stayed off the streets during the five-year period studied, compared to just 47 percent in programs that required treatment first. It was as if the client had won the lottery, Tsemberi explains. “Look at this! This is incredible!” They think, “I’m going to turn over a new leaf.” They are determined to keep this place,” he says. “So the motivation to deal with the illness or addiction is actually strengthened by the housing. Nobody thinks of incentives that way.”

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