Homelessness: Reviewing the Facts

Homelessness is a growing social injustice in the United States. It is a crisis that we too often ignore, hoping it will remedy itself. But that assumption betrays a widespread lack of understanding about the factors that lead to homelessness and frustrates efforts to address it. We must acknowledge the need to explore the facts about homelessness, so we can develop ways to prevent and eliminate it in our society.

• People who are homeless are the poorest of the poor. Recent data indicate that the median monthly income for people who are homeless is $367, less than half the federal poverty level for a single adult. Decreases in the numbers of manufacturing and industrial jobs, combined with a decline in the real value of the minimum wage, have left significant numbers of people without livable incomes.

• In 14 states and 69 metropolitan areas, the entire maximum Supplemental Security Income (SSI) benefits do not cover the Fair Market Rent for a one-bedroom apartment and no state in the nation offers SSI income equal to the federal minimum wage.

• The average adult man who is homeless is in his late 30s; the average adult woman is in her early 30s. Minorities, in particular African Americans, are overrepresented among people who are homeless and have a mental illness.

• Approximately 40 percent of adult males who are homeless are veterans.

• As many as 90 percent of people who are homeless have prior work histories and 15 percent to 20 percent currently have jobs.

An estimated one-third of the approximately 600,000 Americans who are homeless on any given night have serious mental illnesses and more than one-half also have substance use disorders.

• Many people who are homeless and have addictive disorders want treatment, but the service system is ill-equipped to respond to their needs, leaving them with no access to treatment services and recovery supports.

• People who are homeless frequently depend on the highest-cost public service systems—emergency rooms, hospital psychiatric beds, detoxification centers, residential treatment programs and, in some places, jail cells—which places a huge and unnecessary burden on health, mental health and correctional systems.
Because men who are homeless are more likely to have substance use disorders than women who are homeless, men are more often excluded from emergency shelters because these facilities often require abstinence as a condition for admission. This partially explains why more men than women sleep on the streets.

**A Destructive Cycle:**

People who were at one time contributing members of society are now living on the streets. They are prisoners of a lifestyle that causes isolation, hopelessness, despair and humiliation. For some, committing suicide seems to be the only way out. For others, a physical ailment that is left untreated or a sub-freezing night without shelter takes their lives.

**How Can We Help?**

One way to help is to advocate at the local, state and national levels. Advocate for more programs that provide community-based treatment and support services for people who are homeless. Advocate for higher minimum wage, Social Security Income (SSI) and Social Security Disability Income (SSDI) rates, so people can afford a safe and secure place to call home. Advocate for more opportunities that enable people who are experiencing homelessness to become contributing members of society once again.