Homelessness, Poverty and Social Exclusion in the United States and Europe

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Abstract This paper explains differential rates of lifetime homelessness in the United States and Europe, as indexed by household surveys, from income inequality and tax and benefit programmes that increase or reduce poverty. These lifetime rates do not reflect recent efforts to reduce homelessness in some countries. The United States and the United Kingdom have higher lifetime rates of homelessness, more income inequality and, especially in the US, less generous social welfare policies than most European countries. The meagreness of family benefits in the US seems particularly associated with family homelessness. Two groups of people experience high rates of homelessness everywhere: racial minorities and people who experience mental illness. This paper explains their higher rates of homelessness across nations in terms of four forms of social exclusion based on income, wealth, housing and incarceration, and offers experimental as well as correlational evidence that discrimination remains important, at least in the US, today. Relative levels of homelessness across societies stem from societal choices in these domains.

Key Words Poverty; social exclusion; homelessness; race; mental illness; policy
Introduction

Poverty and social exclusion are key causes of homelessness across developed nations. This paper takes a comparative perspective on the ways that social policies and cultural practices in the United States and Europe shape both levels of inequality and the particular groups who lack resources, and hence both rates of homelessness and the groups who are most likely to experience it. It argues that patterns of social exclusion are related to homelessness at two levels: they influence the overall generosity of social welfare programmes and they affect the ability of particular households to access income, wealth, jobs and housing. Structural factors such as poverty and social exclusion may interact with individual vulnerabilities to produce and maintain homelessness.

Rates of Homelessness across Nations

A comparative analysis of the causes of homelessness must start with some estimate of its extent. It is difficult to get accurate figures on rates of homelessness within a society (Pleace et al., 1997), and differences in definitions, institutional structures and approaches to counting hamper comparisons across nations (Busch-Geertsema and Fitzpatrick, 2008). One approach that generates reasonably comparable figures is a household survey that asks respondents whether they have ever experienced homelessness (in forms specifically defined). Most of the surveys reported here (Link et al., 1994; Manrique and Toro, 1995; Burrows, 1997; Toro et al., 2007; Miguel et al., 2010) asked about times when people were literally homeless, corresponding to the 2007 European Typology of Homelessness and Housing Exclusion (ETHOS) categories 1 living rough, 2 in emergency accommodation and 3 in accommodation for the homeless, or times when they were living temporarily with relatives and friends (ETHOS category 8.1), also described as ‘doubling up.’

These surveys of people in ordinary dwellings are far from perfect. They clearly underestimate lifetime rates of homelessness because they miss anyone who is currently homeless, as well as people at high risk of homelessness who are in institutional settings such as a prison or mental hospital or who are too poor to afford a phone. Such exclusions make the surveys worthless for estimating current homelessness or the effectiveness of recent policy changes, but are less serious over longer periods such as a lifetime. Telephone surveys may additionally exclude people with unlisted numbers and those with only mobile phones, but it is less clear how those situations affect reported rates. Despite these issues, the surveys provide some evidence about relative rates of homelessness across nations.
Rates of lifetime literal homelessness and homelessness plus doubling up temporarily with relatives or friends found in household surveys conducted between 1990 and 2006 are shown in the first two rows of Table 1. The standard errors of the observed proportions in the estimates from Toro et al. (2007) based on samples of 250 to 435 per country are on the order of 1 per cent; however, the relatively low response rates for most of the surveys (13 to 29 per cent) suggests somewhat less precision.

Two surveys did much better. Link et al. (1994) conducted a telephone survey in 1990 of a nationally representative sample of 1,507 households in the US and achieved a substantially higher response rate (63 per cent). An initial question asked, ‘Have you ever had a time in your life when you considered yourself homeless.’ As of 1990, 14.0 per cent of Americans reachable by phone in conventional dwellings reported having been homeless, 4.6 per cent in the previous five years. Follow-up questions led to the categorisation of respondents as literally homeless or doubled up, as shown in Table 1. Burrows (1997) reported on a 1994/5 representative sample of 9,933 households in England. When the respondents were asked, ‘In the last ten years would you say that you have ever been homeless?’, 4.3 per cent said they had been homeless over a ten-year period that encompassed the five years in the US survey. In both surveys, follow-up questions showed that homelessness was more common among some sectors of the population, especially poorer or lower class people, but the questions are not comparable, and the questions in Burrows did not distinguish literal homelessness from other forms or yield lifetime rates.

Two caveats suggest that telephone surveys may differentially underestimate rates of homelessness in the US relative to Europe. First is the use of slightly different wording in the questions: Americans were asked whether they had ever been homeless, followed by questions about where they had stayed, to allow classification into literal homelessness and doubling up; Europeans (except in Burrows, 1997) were asked whether they had ‘ever been in a difficult situation, such as...’ followed by comparable examples of the two states (Toro et al., 2007). That is, the Europeans did not have to define themselves as homeless to be counted, whereas the Americans did, likely biasing reported homelessness in the US downward. This is especially true since homelessness, rather than ‘precarious housing’ (Rossi, 1989), is typically defined more narrowly in the US than in Europe. Second, as shown later, imprisonment rates are sufficiently higher in the US that exclusion of people currently in prison from household surveys may depress estimates of homelessness in that country.
The dates of the surveys vary somewhat. Large-scale homelessness appears to have arisen later in Europe than in the US, if the timing of research reports is taken as an index. Philippot et al. (2007) note that, among European countries, only the UK and France had much literature on homelessness prior to 1996, whereas literature in the US had begun to burgeon a decade earlier. Recent efforts to combat homelessness, for example in Germany and the UK (Anderson, 2007; Busch-Geertsema and Fitzpatrick, 2008), are unlikely to have much effect on lifetime history of homelessness; however, any expansions in homelessness after the dates of the surveys would not be reflected.

Taking into account all of these caveats, it seems reasonable to conclude that rates of homelessness are higher in the US than in the UK (relying in particular on the studies by Link et al., 1994 and Burrows, 1997), but that rates in both countries are higher than those on the European continent, especially in Germany and Portugal (relying on the smaller telephone surveys).
## Table 1: Selected social and economic indicators: Countries with household survey results and selected others

<table>
<thead>
<tr>
<th>#</th>
<th>Indicator</th>
<th>US</th>
<th>UK</th>
<th>Italy</th>
<th>Belgium</th>
<th>Germany</th>
<th>Portugal</th>
<th>Sweden</th>
<th>France</th>
<th>Czech Republic</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Lifetime literal homelessness (1990–2006)</td>
<td>6.2/8.1%</td>
<td>7.7%</td>
<td>4.0%</td>
<td>3.4%</td>
<td>2.4%</td>
<td>2.0%</td>
<td>–</td>
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<tr>
<td>2</td>
<td>Lifetime literal homelessness plus doubling up (1990–2006)</td>
<td>12.9/14.0%</td>
<td>13.9%</td>
<td>10.5%</td>
<td>9.6%</td>
<td>5.6%</td>
<td>6.5%</td>
<td>–</td>
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<tr>
<td>3</td>
<td>Share of income or consumption by lowest 10% (1996–2000)</td>
<td>1.9%</td>
<td>2.1%</td>
<td>2.3%</td>
<td>3.4%</td>
<td>3.2%</td>
<td>2.0%</td>
<td>3.6%</td>
<td>2.8%</td>
<td>4.3%</td>
</tr>
<tr>
<td>4</td>
<td>GINI coefficient (1996–2000)</td>
<td>40.8</td>
<td>36.0</td>
<td>36.0</td>
<td>33.0</td>
<td>28.3</td>
<td>38.5</td>
<td>25.0</td>
<td>32.7</td>
<td>25.4</td>
</tr>
<tr>
<td>5</td>
<td>GINI market income (1994–2000) (Luxembourg)</td>
<td>45</td>
<td>45</td>
<td>50</td>
<td>43</td>
<td>44</td>
<td>49</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>% Reduction in market GINI by taxes, benefits (1994–2000)</td>
<td>18%</td>
<td>24%</td>
<td>48%</td>
<td>42%</td>
<td>43%</td>
<td>47%</td>
<td></td>
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<tr>
<td>7</td>
<td>Social benefits and transfers as % of GDP (2000)</td>
<td>10.6%</td>
<td>15.6%</td>
<td>20.5%</td>
<td>20.2%</td>
<td>19.6%</td>
<td></td>
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<tr>
<td>8</td>
<td>Social expenditures for families as % of GDP (1980–1998)</td>
<td>0.5%</td>
<td>2.2%</td>
<td>2.7%</td>
<td>3.3%</td>
<td>2.7%</td>
<td></td>
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<tr>
<td>9</td>
<td>Social rental sector as % of stock</td>
<td>3.2%</td>
<td>18%</td>
<td>7%</td>
<td>17.7%</td>
<td>17.3%</td>
<td>17%</td>
<td></td>
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<tr>
<td>10</td>
<td>Imprisonment per 100,000</td>
<td>760</td>
<td>149/154</td>
<td>97</td>
<td>94</td>
<td>105</td>
<td>74</td>
<td>96</td>
<td>210</td>
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</tbody>
</table>

*a* Toro et al., 2007, unless otherwise indicated.

*b* 7.4%, Link et al., 1994; 8.1%, Manrique and Toro, 1995.

*c* Miguel et al., 2010.

*d* 14%, Link et al., 1994.

*e* 4.3% self-defined homelessness over ten years in England, Burrows, 1997.

*f* UNDP, 2007, Human Development Indicators, section 15.

*g* Smeeding, 2005.

*h* Alesina and Glaeser, 2004, Table 2.1.

*i* Alesina and Glaeser, 2004, Table 2.2.


*k* International Centre for Prison Studies, 2009.
Poverty and Inequality

Why are lifetime rates of homelessness in the US and the UK higher than elsewhere? Many authors have observed that English-speaking countries have greater income inequality (McFate et al., 1995; Smeeding, 2005) and less generous social programmes (Alesina and Glaeser, 2004; Smeeding, 2005) than other developed nations. Rows 3 to 8 of Table 1 illustrate this point with selected indicators of inequality and social transfer programmes.

Row 3 shows the share of income or consumption for the poorest 10 per cent of a country’s population (UNDP, 2007), and row 4 gives the GINI coefficient, which indexes the extent to which the distribution of income (or consumption) in a society deviates from an equal distribution (UNDP, 2007). The GINI coefficient is thus sensitive to deviations from equality throughout the income distribution, not just at the bottom. By either measure, the US has greater inequality than any country in Western Europe. It has also seen greater increases in inequality over the past two to three decades (Smeeding, 2005). The UK is also high in terms of inequality and homelessness and Germany is low on both counts. Only Portugal, with high inequality but low homelessness, fails to follow the pattern.

Inequality is not simply a function of market forces. Smeeding (2005) calculated the extent to which inequality in market income was reduced by taxes and benefits in selected countries (based on data from the Luxembourg income survey). The results, given in rows 5 and 6 of Table 1, show that the US and UK are not outliers in terms of market income, but their tax and transfer programmes do less to reduce inequality than those in continental Europe. Thus, poverty is a function of low levels of social benefits as well as low wages in the US and UK (Smeeding, 2005).

Social benefit and transfer programmes are also directed at different groups of people in different countries, as shown in rows 7 and 8 of Table 1, based on calculations by Alesina and Glaser (2004). The US spends far less, as a proportion of gross domestic product (GDP), on transfer programmes than does continental Europe, with the UK in between, and much of the US spending benefits older adults (Alber, 2010), who consequently have much lower poverty rates than children (US Bureau of the Census, 2010). Alber (2010) points out that private spending in the US, particularly on pensions and health, is extremely high, but most of this spending is not redistributive in nature. People at the top of the income distribution are far more likely than low-wage workers to have both private pensions and health insurance. Almost one-third of the US population under the age of 65 lacked health insurance at some point in 2002 and 2003 (Alber, 2010). Recent health care reform legislation in the US should change these patterns over time.
Disparities in social spending between the US and Europe are particularly large in the case of social benefits to families, where the UK falls much closer to the other European than to the US values. Income supports for poor families in the US, including public assistance (welfare) and tax benefits, are increasingly conditioned on work effort (Blank, 2010), but erratic child care and volatile employment situations make it difficult for low-income single mothers of young children to maintain steady work (Chaudry, 2004).

Low rates of family benefits in the US are associated with high rates of family homelessness. One-quarter of all episodes of poverty in the US begin with the birth of a child (Waldfogel, 2001) and homelessness among families is also associated with childbirth (Weitzman, 1989). Indeed, infancy is the age at which shelter use is highest (based on calculations from age distributions in US Department of Housing and Urban Development, 2007), and almost one-third of the people in homeless shelters and other specialised homeless assistance programmes are members of families with children; 34 per cent of such homeless adults are female (US Department of Housing and Urban Development, 2009). Firdion and Marpsat (2007) find, across several European studies, that between 17 and 21 per cent of homeless adults are female (including those with and without children).

Many people in the US shelter system for single adults are in fact parents of minor children who have become separated from them. Burt et al. (1999, pp.12–13) reported that 60 per cent of all homeless women and 41 per cent of all homeless men in the US in 1996 had children under 18 years, but only 65 per cent of those mothers and 7 per cent of fathers lived with any of their children. In contrast, in Paris, few homeless men and about one-third of homeless women had children who were not with them (by subtraction from figures in Firdion and Marpsat, 2007), and it is not clear how many of these children were still minors. The larger proportions of homeless parents who are separated from their children in the US and the larger number of families in the homeless population are both likely consequences of US social policy.

Empirically, higher levels of inequality and lower levels of social benefits are associated with higher rates of homelessness. Although these associations do not prove causality, a causal relationship is plausible. O’Flaherty (1996) points in particular to a drop in the size of the middle class as a cause of the increase in costs for low-quality housing and a decrease in the stock of low-quality, low-rent housing.

Economic changes can also lead to homelessness. For example, Firdion and Marpsat (2007) emphasise industrial restructuring, which led to income loss for blue-collar workers in France. Similarly, in Central and Eastern Europe under socialism, housing and other forms of welfare were typically delivered through the workplace and social welfare spending remains low (Hladikova and Hradecky,
2007; Stephens and Fitzpatrick, 2007). In the Czech Republic, for example, homelessness became notable only after the break-up of Czechoslovakia in 1993, despite continuing high levels of income equality. People retain a right to work but any social disruption or personal problem that leads to loss of an identity card also leads to loss of access to employment, housing and medical services (Hladikova and Hradecky, 2007).

Historically, economic cycles are also associated with cycles in homelessness. O’Flaherty and colleagues have shown the links between two recent recessions and increases in homelessness in New York City (O’Flaherty and Wu, 2006; Cragg and O’Flaherty, 1999). It is too early to judge the full effects of the current worldwide recession. The US Conference of Mayors (2009) reported that homelessness among families in the US increased in three-quarters of the cities participating in its survey for the year ending September 2009, whereas homelessness among single individuals decreased in a majority of cities. The report attributed increases to the recession and the lack of affordable housing and decreases to the success of policies aimed at ending chronic homelessness among adults with disabilities. It also reported the largest increase in requests for food assistance observed in eighteen years.

**Housing Policy, Poverty and Homelessness**

Stephens and Fitzpatrick (2007) point out that housing systems may reinforce or counterbalance the effects of welfare regimes on poverty and inequality. In the US, housing policy tends to augment inequality. Homeownership is encouraged by tax deductions for mortgage income and property taxes, and these benefits flow mainly to wealthier individuals with larger mortgages and more expensive homes. In contrast, housing subsidies for poor renters come from direct budget outlays. In 2002 housing tax benefits to Americans in the top one-fifth of the income distribution totalled $89 billion, \(^1\) whereas outlays to households in the bottom one-fifth totalled only $26 billion (Dolbeare and Crowley, 2002).

Across nations, the size of the social housing sector is not closely related to rates of homelessness (see row 9 in Table 1, based on Fitzpatrick and Stephens, 2007). For example, in the UK about 18 per cent of the housing stock is in the social housing sector, whereas in Germany it is only 7 per cent, but the ordering of homelessness in the two countries is reversed. What may be more important is the extent to which housing costs for available low-cost units exceed what poor people can afford to pay. The rise in homelessness in the US corresponded to the rising gap in housing affordability, with the loss of affordable units concentrated in the private sector (Shinn and Gillespie, 1994). Across several US data sets, homelessness was

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\(^1\) All currency amounts are given in US dollars.
higher when rental costs were higher relative to incomes and when vacancy rates for inexpensive housing were lower (Quigley et al., 2001), although the quality of the estimates of homelessness could be challenged. O’Flaherty (1996) suggests that the key factors are increasing rents for low-quality units and decreasing the stock of low-quality, low-rent units. Currently there is no state in the US where a full-time worker employed at the minimum wage can afford to rent a two-bedroom apartment at the ‘fair market rent’ (a low average rent) determined by the US Department of Housing and Urban Development, which assumes that people should spend no more than 30 per cent of their income on housing. Indeed, a worker would need to work from 63 hours per week in an inexpensive state (West Virginia) to 163 hours per week in an expensive state (Hawaii) to afford the fair market rent for a property with two bedrooms (Waldrip et al., 2009).

Further evidence that poverty is at the root of homelessness, at least for families in the US, comes from the fact that housing subsidies virtually eliminate it. These subsidies typically pay the amount by which the fair market rent for an apartment exceeds 30 per cent of the household’s income. Studies in New York City have found that homeless families who received subsidies were far less likely to return to shelters (Wong et al., 1997) and far more likely to attain long-term stability (Shinn et al., 1998). Formerly homeless families who received subsidies attained the same levels of housing stability as poor families generally. The policy of providing subsidies to families in shelters also reduced shelter populations in New York (Cragg and O’Flaherty, 1999; O’Flaherty and Wu, 2006) and Philadelphia (Culhane, 1992). Subsidised housing and welfare and disability benefits were associated with exits from homelessness for adults and families in California (Zlotnick et al., 1999). A nine-city study in the US offered subsidies with various packages of social services to families chosen for their recurrent histories of homelessness and other risk factors. Housing retention was excellent: 88 per cent of the 601 families remained in housing for up to eighteen months in the six cities with follow-up data, but cities with more intense service packages did not have higher rates of housing stability (Rog et al., 1995a and 1995b).

Housing subsidies also prevent homelessness for poor families who receive them. A national random assignment study showed that provision of housing subsidies to families receiving public assistance reduced subsequent homelessness by 74 per cent in an analysis (treatment on the treated) that took account of the fact that not all families who were offered vouchers used them (Wood et al., 2008).

Cross-city surveys of rates of subsidised housing and of homelessness, such as the cross-national study of the size of social housing sectors (Fitzpatrick and Stephens, 2007), do not show clear relationships between the two rates. Some researchers find clear benefits to subsidies (Mansur et al., 2002), others do not and
this is perhaps, the researchers suggest, because housing subsidies are not well targeted at those in need of them (Early, 1998 and 2004; Early and Olsen, 2002). Although giving housing subsidies to homeless families draws some poor families into shelters, O’Flaherty and Wu (2006) find that the net effect is a reduction in homelessness. However, the 2008 FEANTSA annual theme report on housing and homelessness warns that housing subsidies, in contrast to social housing, may simply bid up prices at the bottom of the cost distribution. Under these circumstances, subsidies might help those who receive them, but not reduce overall rates of homelessness.

Cultural Attitudes, Social Welfare Policy and Social Exclusion

Tax and transfer policies that shape income inequality do not arise in a vacuum, rather they reflect underlying cultural beliefs about the causes of poverty and the people deemed worthy of help. For example, in a sample of thirty nations, Alesina and Glaser (2004) found that the average extent to which survey respondents in a country believed that poverty is society’s fault explained 43 per cent of the variance in social welfare spending. Among nations with per capita GDP of over $15,000 in 1998 (i.e. with the means to offer generous benefits), it explained 82 per cent of the variance. Specific to homelessness, Toro et al. (2007) found less compassionate public attitudes towards homelessness in the English-speaking countries with less equal income distributions and less generous social programmes than other nations.

Alesina and Glaser (2004) also explain the variability in social welfare spending as a proportion of GDP as an inverse function of ethnic fractionalisation in different societies. They argue that ethnic fractionalisation shapes social welfare policy directly, because majorities are unwilling to pay for redistributive policies that favour minority groups, and indirectly, because it interferes with the formation of a unified labour movement. In cross-national data they found that racial heterogeneity explained 66 per cent and linguistic heterogeneity (taken separately) explained 41 per cent of the variance in social welfare spending as a proportion of GDP. The greater racial heterogeneity of the US accounted for two-thirds of the gap in social spending between the US and Europe. Within the US, where the generosity of welfare benefits is decided by individual states, there was an inverse correlation between maximum welfare benefits and the percentage of the state population that was Black. By this argument, social exclusion of racial and linguistic minorities plays an indirect role in the origins of homelessness because it influences the generosity of social welfare programmes. But there are other more direct effects of racism and social exclusion.
Racism, Social Exclusion and Homelessness

In a review of literature concerning homelessness in Europe, Philippot et al. (2007) suggest that stigmatised and excluded groups are more likely to become homeless everywhere. Across nations, two characteristics stand out: minority racial or ethnic status, and experience of mental illness. In the US, African Americans and Native Americans are overrepresented among people who become homeless (Burt et al., 1999; Hopper and Milburn, 1996). In France, Africans and people from overseas départements are at higher risk than others (Firdion and Marpsat, 2007). In England, Blacks are at risk (Burrows, 1997); in Australia, it is Aboriginal and Torres Strait Island peoples (Homelessness Task Force, 2008); and in Japan, discrimination against ethnic minorities such as the Ainu, Koreans and Okinawans and groups such as the Eta and Hinin who fall outside of the main social classes leads to their segregation in poor residential districts and hence, presumably, their heightened risk of homelessness (Okamoto, 2007).

People who experience mental illness are also overrepresented among those who become homeless in Europe (see review by Philippot et al., 2007), Australia (Homelessness Task Force, 2008) and the US, at least among single adults (Koegel et al., 1996), although the frequency of mental illness among homeless groups is often exaggerated by poor sampling and measurement (Lehman and Cordray, 1993). Fitzpatrick and Christian (2006) suggest that well-functioning housing markets, generous social welfare policies and high levels of employment may lower the overall prevalence of homelessness, but people who nevertheless become homeless may have more complex personal problems (see similar arguments by Shinn and Weitzman, 1990 and Buckner, 2008).

Although the state of homelessness can certainly lead to anxiety and depression, Philippot et al. (2007) find that the relationship between homelessness and mental illness tends to follow a social selection model; that is, people who experience mental illness are differentially likely to become homeless. Two facts suggest that the relationship between mental illness and homelessness is at best indirect. First, homelessness in the US arose well after the time when large numbers of people were released from mental hospitals, but coincided with the loss of inexpensive housing when many people with and without mental health problems became homeless (O'Flaherty, 1996). Second, people with serious mental illnesses can be stabilised in their own apartments, even after long histories of homelessness, with appropriate economic and social supports and respect for their personal choices (Tsemberis, 1999; Tsemberis et al., 2003 and 2004).

This paper argues that the relationship between homelessness and mental illness, like that between homelessness and minority status, is a function of societal choices, in particular the social exclusion of people with devalued identities. In the
case of race and ethnicity, alternative explanations involving culture would have to take account of the great variety in cultural characteristics of excluded groups across nations. The mechanisms by which social exclusion leads to homelessness are quite similar for mental illness and minority status. For both, social exclusion in the areas of income, wealth, housing and imprisonment seem particularly important. Documentation is clearest in the case of race in the US, however, cross-national research suggests that the structure of prejudice is very similar in the US and Western Europe (Pettigrew and Meertens, 1995; Pettigrew et al., 1998) and it is plausible that links to homelessness are also similar.

**Income**

The first form of exclusion is in access to adequate income, whether from employment or from social benefits. Whether people can afford housing is a joint function of housing costs and incomes, so people with lower incomes are at greater risk of homelessness. In the US, the earnings and employment of Black Americans relative to White Americans eroded in the 1980s, as homelessness began to rise, and in 1997 the median income of Black families was only 55 per cent that of White families (Conley, 1999). In 2008 the unemployment rate (among people available for work) was 10.1 per cent for Blacks and 5.2 per cent for Whites. Among full-time wage and salary workers, Black men earned 75 per cent of the amount paid to White men; Black women received 85 per cent of the earnings of White women (US Department of Labor, 2009).

Differential outcomes do not necessarily prove discrimination if different groups bring different qualifications to the labour market. Bertrand and Mullainathan (2004) tested discrimination directly using a methodology developed by Jowell and Prescott-Clark (1970) in the UK. The researchers sent out up to four résumés in applications for each of over 1,300 jobs listed in newspapers in two US cities (Boston and Chicago). The résumés met the minimum requirements for the jobs but were of higher or lower quality in terms of experience, gaps in work history and additional credentials. Within each résumé pair (high quality or low quality), the researchers randomly assigned one a ‘Black’ name (e.g. Lakisha or Jamal) and the other a ‘White’ name (e.g. Emily or Greg), with the designation based on both the proportions of Black and White children actually given the names and perceptions of the names in survey data. The dependent measure was whether the employer called to invite the supposed applicant for an interview. Putative White applicants got an interview invitation for every ten résumés sent out, Black applicants for every fifteen; a difference that held across occupational categories tested. The White advantage was equivalent to that conferred by eight additional years of experience on the résumé. Further, the return to higher versus lower quality résumés was greater for White than for Black applicants. Thus, current, ongoing discrimination
in employment is an important mechanism linking race to social exclusion on a dimension (income) related to homelessness. A number of studies describe unemployment (i.e. inability to secure income) as a cause of homelessness (Firdion and Marpsat, 2007; Philippot et al., 2007).

Low levels of both social benefits and employment put individuals with mental illness at risk. In 2008, 7.5 million Americans received federal supplemental security income, 84 per cent on the basis of a disability, most frequently mental illness. The average monthly payment was $478 and more than half of recipients had no other income (Social Security Administration, 2009). Some states supplement federal disability payments, but in no state is the maximum combined payment sufficient to allow an individual to rent an efficiency apartment (a one-room unit without a separate kitchen or bedroom) at the fair market rent while spending no more than 30 per cent of income on rent. Indeed, in fifteen states, the fair market rent for an efficiency apartment exceeds the entire disability payment (Waldrip et al., 2009).

People who experience mental illness also face discrimination in employment (Draine et al., 2002), although this is illegal under the Americans with Disabilities Act 1990, just as racial discrimination is illegal. Further, the structure of disability benefits in the US discourages work, since benefits depend on not earning too much. The law allows exclusion of some work income in the calculation of eligibility for benefits and continuation of health insurance under some circumstances in order to encourage work, but earnings while receiving disability benefits remain severely limited and recipients’ work involvement remains low. Most people with serious mental illnesses have worked at some time, but job tenure tends to be short. Draine et al. (2002) suggest that poor employment records are associated less with mental illness per se than with other forms of social exclusion, namely prejudice in hiring, disruptions in educational attainment and living in poor neighbourhoods. They note that people with mental illness often take entry-level jobs in industries with high turnover, although the fact that they are differentially steered into these jobs represents yet another form of exclusion.

**Wealth**

A second form of social exclusion is inability to accumulate wealth. In the case of race, historical discrimination in jobs, housing and credit markets affects the distribution of wealth, which is far more strongly associated with race in the US than is the distribution of income. For example, in 1994 the median net worth of White families was nearly eight times that of African American families (Conley, 1999, p.5). Thus, minority families have less of a cushion to fall back on in the event of a loss of income or housing crisis. For poor families, most wealth is tied up in housing, so
the disparity in wealth translates directly into a disparity in secure housing. Further, African Americans’ informal social networks of friends and relatives are also less likely to have assets, in the form of cash or housing, with which to help out.

Lack of wealth can affect homelessness across generations. Firdion and Marpsat (2007) note that many homeless adults grew up in low socioeconomic status or impoverished families. Such findings suggest three different underlying mechanisms. One, based on a ‘culture’ of poverty, suggests that children who grow up poor lack motivation to extricate themselves from that state as adults. A more economic theory suggests that adults from poor backgrounds have less individual or family wealth to draw on when they encounter difficult times. The fact that in a New York study of families receiving public assistance (Shinn et al., 1998) childhood poverty predicted shelter entry but had no effect on long-term housing stability after families received housing subsidies suggests that the second explanation may be more important. Any psychological factors lost potency when economic resources were provided. Firdion and Marpsat (2007) suggest a third mechanism, whereby growing up in poverty is related to poor physical and mental health in adulthood, which may make it harder to sustain employment. Childhood poverty is also related to the opportunity to acquire human capital (education and skills) that provides income in adulthood (Conley, 1999). Associations between race and educational attainment, unemployment and premarital childbearing in the US are all greatly diminished and sometimes reversed by taking the social class of the family of origin (parents’ education and various forms of assets) into account (Conley, 1999), and this could be the same for homelessness as well.

In the case of mental illness, disability benefits in the US cease if an individual accumulates more than $2,000 in assets, with some exclusions. The most important such exclusion is for a home: people lucky enough to own a home are not turned out of it before they can receive disability benefits, but renters have no possibility of accumulating enough assets to purchase housing. The exclusions of income designed to foster work do not extend to exclusion of assets, although under special circumstances an individual is allowed to save the funds needed for a particular vocational goal (e.g. funds for education, training, work-related equipment or transportation). Permanent housing is not included among the approved goals (Social Security Administration, 2009).

**Housing**

Discrimination in the housing market is a third form of social exclusion relevant to homelessness. One widely used measure of residential discrimination is the dissimilarity index, which calculates the difference in the distributions of two groups across a given geographic area. Across all US metropolitan areas, the dissimilarity index for African Americans relative to Whites in 2000 was 640, meaning that 64
per cent of African Americans would have to move from heavily Black to less segregated areas to achieve the same distribution as Whites. Dissimilarity was lower for Hispanics.509, and for Asians and Pacific Islanders.411 (Iceland and Weinberg, 2002, p.96). Of course, residential segregation is also associated with segregation in schooling (Pettigrew, 2004) and proximity to jobs (Kain, 1968; Wilson, 1996), both of which feed into economic disadvantage. But, as in the case of jobs, differential distributions do not prove active discrimination; experiments do.

The US Department of Housing and Urban Development (HUD) assesses racial discrimination via systematic paired tests in which two otherwise comparable renters or buyers, one minority and one White, visit rental or real estate agents to ask about advertised housing units. The test partners are matched on income, asset and debt levels, family circumstances, job characteristics, education levels and housing preferences. Discrimination is observed when only one member of the pair is offered the unit or gets some other form of favourable treatment such as a lower rent.

Although it is illegal, housing discrimination remained rampant in the latest round of national tests in 2000, with Whites receiving more favourable treatment than African Americans in 21.6 per cent of tests for rentals and 17.0 per cent of tests for sales. For the first time, Hispanics had even worse treatment, with 25.7 per cent of renters and 19.7 per cent of buyers experiencing discrimination relative to Whites (Turner et al., 2002). Real estate agents also steered White homebuyers into neighbourhoods that are overwhelmingly White, and Black homebuyers into areas where minorities are overrepresented in 12 to 15 per cent of cases (Galster and Godfrey, 2005). The authors suggest such steering into areas where homes are more and less likely to appreciate in value contributes to racial disparities in wealth. Because the HUD study examined only advertised units, and many rentals and sales occur more informally within segregated neighbourhoods, it is likely to underestimate overall levels of discrimination, particularly for African Americans.

Banks compound the problems of African American homeowners by systematically offering them higher cost loans than they offer to Whites. For example, in 2006 nearly 45 per cent of loans to purchase homes in low-income minority communities were high-priced ‘subprime’ loans, compared with 15 per cent of loans in high-income, predominantly White areas (Joint Center for Housing Studies, 2008).

In the case of many people who experience mental illness, low incomes make renting on the private market nearly impossible. Although, as already noted, supported housing programmes that offer people private apartments and supportive services with respect for residents’ choices have successfully housed many people with histories of both homelessness and mental illness, many individuals are shunted into far more restrictive settings. A federal court recently ruled that New York State discriminated against thousands of mentally ill people in New
York City by placing them in privately run ‘adult homes’, where residents are segregated from other community members. Some homes even forced individuals to undergo unnecessary surgery to garner money from federal insurance programmes for their ‘care’ (Barron, 2009).

The consequences of housing discrimination and residential segregation for homelessness go beyond their effects on the prospects of individual households. Because owners are far more likely to default on high-cost than on low-cost loans, home mortgages in low-income minority areas are more likely to be foreclosed, destabilising communities and depressing property values for neighbours. Foreclosures of rental properties may also make tenants homeless (Joint Center for Housing Studies, 2008). It has been found that individuals who experience homelessness in the US are disproportionately likely to come from impoverished neighbourhoods, which may have fewer resources to assist them (Culhane et al., 1996), although this study did not control for individual income.

**Incarceration**

Imprisonment is another form of social exclusion that disproportionately affects both African Americans and people who experience mental illness in the US. Incarceration rates (in prisons and jails) are 6.5 times higher for Black men and 3.8 times higher for Black women than for their White counterparts. Approximately 11 per cent of Black males in their twenties were in prison or jail at mid-year 2006. Rates for Hispanics are 2.5 and 1.6 times higher than for Whites, but not as high as for Blacks (Sabol et al., 2007). Cross-national studies suggest that in every country, incarceration rates are higher for at least some minority groups than for the majority, with Black/White disparities in Ontario, and disparities involving Aboriginal peoples in Australia and in Canada even greater than the Black/White disparity in the US (Tonry, 1997). Further, those minorities with the highest crime and imprisonment rates also suffer other forms of social and economic disadvantage. However, not all disadvantaged groups have high crime and incarceration rates. For example, in the Netherlands, people from Morocco and Surinam have high crime and incarceration rates, but similarly disadvantaged people from Turkey do not (Tonry, 1997), although the cross-national studies of prejudice show higher Dutch prejudice against Turks than against Surinamers (Pettigrew et al., 1998).

Cross-national research suggests that although part of the difference in incarceration rates by race may have to do with simple bias, it has more to do with legally relevant factors that have differential consequences for different groups (e.g. different penalties for drugs favoured by different racial groups), and still more with actual rates of offending (Tonry, 1997). Sampson and Lauritsen (1997) suggest that
offending rates are highly influenced by community-level poverty and social disruption to which African Americans in the US are differentially exposed – factors strongly associated with homelessness as well (Culhane et al., 1996).

Studies of individuals with serious mental illness who are living in the community in the US have found high lifetime rates of arrests (between 42 and 50 per cent). Draine et al. (2002) attribute this fact to the high rate of arrests in the US generally, and to overlap of study populations with other groups with high arrest rates, including people with low incomes and educations and high rates of unemployment, minority group members and substance users. Fischer et al. (2008) found that people with serious mental illnesses were not very likely to commit crimes, but the same individuals were more likely to do so during periods when they were homeless than during periods when they were housed. Offences included 'subsistence crimes' such as stealing food, failing to pay fares on public transport and trespassing or breaking into a place to sleep, as well as more serious crimes, which may have been precipitated by stressful and sometimes dangerous living conditions in shelters.

The US leads the world in terms of the proportion of its population – 760 people per 100,000 – behind bars. The base here is all people, not just adults. Countries in the former Soviet Union also have high rates (e.g. Russian Federation 618 and Georgia 423 per 100,000), followed by some countries in Eastern Europe. Among countries in Western Europe, rates are highest for the UK, as shown in row 10 of Table 1 (International Centre for Prison Studies, 2009). Because former prisoners are more likely than others to become homeless (Firdion and Marpsat, 2007; Philippot et al., 2007), and because individuals who are incarcerated are missed in telephone surveys, the far higher rate of imprisonment in the US than in Europe may create a differential bias in telephone survey estimates of homelessness.

Whether or not homelessness and crime share common aetiologies, there is strong reason to believe that imprisonment is causally related to homelessness in the US, both for the individuals incarcerated and for their families. Approximately 1.7 million children had a parent in state or federal prison in 2007, including 6.7 per cent of Black children, 2.4 per cent of Latino children and 0.9 per cent of White children; about half of the parents had provided primary financial support for their children prior to their incarceration (Glaze and Maruschak, 2008). Families lose income while a wage earner is imprisoned, and the offender’s employment prospects are diminished after release. A felony conviction also entails a range of civil disabilities that often last long after completion of a sentence. Depending on the state, people convicted of felonies, especially drug offenders, can be denied welfare benefits, food stamps and financial aid for higher education (Mauer and Chesney-Lind, 2002). When a released felon returns to live with family, the entire family is barred
from many forms of subsidised housing, regardless of need. Similarly, families can be evicted from public housing if any member is found using an illegal drug (Rubinstein and Mukamal, 2002). In England and Wales, hostels provided for ex-offenders are often squalid, and social housing, when offered, is often in poor locations (Carlisle, 1997).

Former offenders also find it difficult to gain employment. Pager (2003) used a variant of the audit methodology employed in housing tests to examine this phenomenon. He sent paired testers of the same race (both Black or both White) to visit employers and apply for advertised entry-level jobs on successive days. One member of the pair was assigned to have a criminal record: a non-violent felony drug conviction for possession with intent to distribute cocaine, with a consequent eighteen-month prison sentence. Members of the pair rotated in who portrayed the offender, and were equated in other ways. The putative offender disclosed the offence on applications whenever requested (74 per cent of application forms asked), listed work experience in the correctional facility and offered his parole officer as a reference. The dependent variable was a call-back for an interview. Whites without a criminal record were twice as likely to receive a call-back as Whites with a criminal record (34 versus 17 per cent a 2:1 ratio). Overall levels of call-backs were far lower for Blacks (although this comparison was quasi-experimental, since Black and White pairs applied for different jobs), and the effect of a criminal record was (non-significantly) stronger: 14 per cent of Blacks with no criminal record were called for an interview compared with only 5 per cent of those with a record, almost a 3:1 ratio. African Americans with criminal records thus suffer two forms of social exclusion, which may compound each other.

The collateral consequences of imprisonment extend beyond families to communities. The census practice of counting prisoners in the county where the prison is located rather than in their home community transfers political power away from poor urban communities (Mauer and Chesney-Lind, 2002). Further, because felons are disenfranchised in many states even after serving their sentences, differential rates of imprisonment by race lead to high levels of disenfranchisement in urban, minority communities. Four million Americans, disproportionately African American, were disenfranchised in the 2000 elections (Mauer, 2002). By way of contrast, the European Court of Human Rights ruled against blanket disenfranchisement of current prisoners in 2004 in Rirst v United Kingdom.2

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2 Hirst v United Kingdom (No. 2), Application No. 74025/01, European Court of Human Rights, Fourth Section, 30 March 2004.
Poverty, Social Exclusion and Individual Risk Factors for Homelessness

The different forms of social exclusion described here all too often intertwine with one another and with poverty to put people at risk of homelessness. This paper’s focus on poverty and social exclusion does not deny the role of individual vulnerabilities such as experience of mental illness in the path to homelessness. Rather it asks why, and in what sort of society, is homelessness the all-too-frequent penalty for mental illness? What sort of society allocates housing and homelessness at least partly on the basis of race? What sort of society routinely flouts its own laws against discrimination?

In any society, individuals will have bad luck and make bad choices. Societies reasonably impose consequences for some of those choices, such as prison sentences for criminal offences, although reasonable people may debate the extent and severity of those sentences. Serving a prison sentence is colloquially called ‘paying one’s debt to society’. What sort of society imposes continuing poverty and homelessness on people who have paid those debts?

Similar analyses could be extended to other risk factors for homelessness. For example, the breakdown of relationships is frequently cited as a contributor to homelessness (Firdion and Marpsat, 2007; Hladikova and Hradecky, 2007; Okamoto, 2007; Philippot et al., 2007; Toro et al., 2007) and may be particularly important because it disrupts access to income and housing. Jencks (1994) suggested that divorce is the primary cause of homelessness among US families. However, rates of both divorce and single parenthood are as high in Belgium as they are in the US, but Belgium has half the rate of homelessness (Toro et al., 2007). The difference is most likely in the strong family supports provided by the Belgian government. International comparisons demonstrate that here, as elsewhere, social policy can compensate for many individual vulnerabilities.

National tax and social welfare policies shape the structure of inequality in nations, and are associated with levels of homelessness. Patterns of social exclusion determine which groups in a society are at greatest risk. Welfare policies can counteract individual risk. Just as individuals sometimes make choices that may lead them to homelessness, nations make choices that can lead to high rates of homelessness for their citizens, and differentially high rates for socially excluded groups.
References


