Local and Global Homelessness During the COVID-19 Pandemic

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Abstract

Homelessness is a phenomenon experienced by various populations in the most advanced nations around the world. It occurs globally often from poverty, wars, and disasters, and in the United States commonly from mental and physical health disabilities and substance use and abuse disorders. The impact of COVID-19 on homelessness locally and globally are yet to be fully realized but may exacerbate this dilemma considerably. In the United States professional social workers provide extensive programs and case management services to prevent, reduce, and end homelessness. The United States system is the most advanced in the world for a nation of its size, however homelessness still persists. This paper will examine causes of local and global homelessness and recommend investigating perceptions of professional social workers for impacts on homelessness, and then suggest adoption of the United States system to combat homelessness globally.

Keywords: local, global, homelessness, populations, COVID-19, social worker, interventions, case management, perceptions, programs, policy.

Table of Contents

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This paper will identify, address, and examine causes and factors concerning the current local and global homeless crisis during the COVID-19 pandemic and learn from previous strategies used to "think globally; act locally" (Briar-Lawson et al., 2001). While recognized standards concerning homelessness on a global scale may not be abundantly available, efforts must be made to develop strategies to meet this need. Capdevila (2005) estimated those experiencing homelessness in the world's urban centers is between 20 and 40 million. The United Nations Economic and Social Council (2020) adopted a resolution to address affordable housing and social protections systems related to homelessness and recognized the need for implementation of this resolution on a national level.

In the United States (US) during the last week of January each year, a Point in Time count (PIT) mandated by the Department of Housing and Urban Development (HUD) is conducted (Department of Housing and Urban Development, 2020; Paynich, 2019). This count measures the total number of persons experiencing homelessness on one night and is organized by the lead Continuum of Care (COC) agencies who receive and disburse government funding to prevent and end homelessness in their respective areas. HUD data estimated this count in 2019 to be 567,715 persons without a permanent fixed adequate nighttime residence, an increase of 14,885 from 2018 (Department of Housing and Urban Development, 2020).

The severe acute respiratory syndrome coronavirus 2 (SARS-COV-2), the virus that causes COVID-19, places vulnerable people, such as those experiencing local and global

homelessness, at extremely high risks of contracting the virus and being hospitalized, (Hsu, et al., 2020; Ralli et al., 2021). This is due to factors such as staying in congregate settings, emergency shelters or enclosed outdoor areas, practicing poorer hygiene, having physical and mental health conditions, and limited access to personal protective equipment (PPE), which all increase the likelihood of transmission (Ha et al., 2021; Ralli et al., 2021). The World Health Organization (WHO) has been monitoring Variants of Concern (VOC) since the start of the pandemic to inform countries about increased risks to the global public and inform responses to COVID-19 (World Health Organization, 2021).

In the US as of September 20, 2021, statistics from the Center for Disease Control and Prevention (CDC) report the total number of COVID-19 deaths in the US as 670,565 total cases 41,915,285, and total number of adults with at least one vaccination at 76.5% (Centers for Disease Control and Prevention, 2021). COVID-19 presents unique risks to both local and global populations experiencing homelessness due to insufficient access to PPE, testing, and vaccination.

Examples of populations of persons experiencing global homelessness include, but are not limited to, displaced persons or refugees, considered globally homeless, and in the US according to HUD (2020), married and unmarried couples, individuals, one and two parent families with children, transitional aged youth (TAY), members of the LBGTQ+ community, and veterans. Several factors that contribute to homeless experiences include but are not limited to, mental health disorders, domestic violence, substance use and abuse disorders, chronic health conditions, and economic issues (Colombo, 2019). The data collected from PIT counts illustrate a country wide persistent cycle of homelessness that fluctuates back and forth yearly. Comprehensive global data is limited.

In the US, professional social workers are in the crucial position of delivering the most appropriate case management services and housing interventions provided to individuals and families. This is no small matter and social workers have an ethical responsibility as professionals to, "monitor and evaluate policies, the implementation of programs, and practice interventions" and, "should promote and facilitate evaluation and research to contribute to the development of knowledge" (National Association of Social Workers, 2021).

The current problem of local and global homelessness affects diverse populations of people, it is complex and involves a lack of affordable housing and social protection systems due to natural disasters and wars, chronic mental and physical health conditions, substance use and abuse disorders, and economic issues which are exacerbated by the COVID-19 pandemic. This paper will examine the dynamics of homelessness through three distinct perspectives, 1) global homelessness and 2) local homelessness and solutions, and 3) social worker perceptions regarding interventions and case management services all within the context of the COVID-19 pandemic. A thorough review and analysis of relevant literature collected by government, private, for-profit, and non-profit organizations will inform this investigation and assist in making recommendations to remedy this crisis on a global scale to now, "think locally; act globally."

Literature Review

Global Homelessness

The available literature regarding homelessness suggests there is a crisis on a global scale for industrialized nations as well as under-developed nations. In 2005 at the 61st session of the United Nations Council on Human Rights (UNCHR), special reporter on adequate housing

Miloon Kothari estimated that those experiencing homelessness in the world's urban centers is between 20 and 40 million, while UN statistics indicate 78% of the population of least developed countries live in slums (Capdevila, 2005).

It is a difficult task to gain an accurate estimation of individuals and families experiencing global homelessness for various reasons: the definition of homelessness differs from country to country, census data is based on households, and hidden populations of persons experiencing homelessness exist. The UNCHRs took place 15 years ago, at that time Kothari also told the commission that over one billion people lack adequate housing, while 100 million have no housing at all (Capdevila, 2005).

During the most recent UNCHRs, special reporter for human rights John Knox linked the adverse effects of climate change to a wide range of human rights including rights to life, health, food, water, housing, and development (*Human rights council holds interactive dialogue with special rapporteurs on environment on adequate housing*, 2016). Leilani Farha, another commission reporter, stated that global homelessness is too often viewed as a social policy issue alone rather than a violation of human rights, which should and could be addressed with human rights responses.

Nearly 70% of natural disasters are caused by climate change, the result of man's actions, which has led to a new term called "environmental refu-gees" to refer to those displaced (Pourhashemi et al., 2012). Reports by the Intergovernmental Panel on Climate Change (IPCC) recognize climate change as the cause of migration and movement of millions of people. Natural disasters can be labeled events uncontrolled by humans such as earthquakes and storms, but when the effects can be linked to man's actions they can be called, "semi-natural disasters."

Conflicts from North Africa to the middle east starting in 2011 have led the UN to debate, almost daily, the most recent of these uprisings, the on-going Syrian refugee crisis, where over 450,000 Syrians fled their home country to nearby countries (Fargues & Fandrich, 2012). Thousands of Syrians flee the country everyday due to the conflict and the numbers continue to rise, these refugees can be considered globally homeless. Approximately 10 million worldwide cross borders to flee conflict, persecution, or natural disasters, and another 26 million internationally displaced people experience this crisis in their own countries (Crowe, 2011).

While estimates by the UN suggest that globally close to 100 million people have no housing at all (Capdevila, 2005), the seriousness and urgency of the cycle of homelessness in the US is illustrated by the $47.9 billion proposed funding to fight homelessness detailed in a February 10, 2020, press release by HUD, (Department of Housing and Urban Development, 2020).

PIT counts are required by HUD to be conducted by 397 COC agencies throughout the country and directly affects HUD funding and services to address homelessness. The estimates do not portray the actual figures on all persons experiencing homelessness; the phenomenon of homelessness and dynamics surrounding it are far too challenging to be accurately described and measured on one night each year (Cackley, 2020). The inability to understand and explain this phenomenon may include difficulties understanding the issues experienced by this population, and the relationships with professionals attempting to assist them.

Local Homelessness

In the US, the federal government establishes policies and provides funding to address homelessness at the state and local levels. Programs established by the federal government are

policy specific for certain populations of individuals and families experiencing homelessness. Program policies and funding come from the federal level while the implementation is administered on a local level, which makes possible the ability to meet specific needs of individuals and families by professionals in direct contact with the population. The policy process from development to implementation to monitoring to renewal is closely evaluated on federal, state, and local levels as the data regarding the population served and the amount of money spent is closely monitored.

As of 2011, in the mid-sized US city of Reading, Pa. 41.3% of people were living below the poverty line, and Reading, PA. had the highest poverty rate of any US city with a population of 65,000 people or more (*Reading, PA., has highest poverty rate*, 2011). During the annual PIT count conducted by the Berks Coalition to End Homelessness (BCEH) on January 25, 2019, the homeless statistics for Berks County revealed: 385 individuals and families were staying in emergency shelters, 202 were staying in transitional housing programs, and 10 persons were unsheltered and staying on the streets (Berks Coalition to End Homelessness, 2019).

The BCEH is the lead collaborative applicant for the COC grant in Berks County, PA. The agency partners with over 60 local agencies to ensure individual and family well-being through comprehensive coordination of innovative solutions and quality programs. Coalition agency partners collaborate to meet the needs of individuals and families by providing housing opportunities and other social services. Many residents accessing services through the coalition and agency partners have disabilities that contribute to experiencing homelessness or being at-risk. Complete intake and assessments are conducted by social work professionals in collaborative agencies using the strengths-based perspective which focuses on client strengths rather deficits to build self-confidence and inspire hope (Kirst-Ashman & Hull, 2012).

It is necessary to understand what homelessness is and who can be considered homeless so that professionals can assist individuals and families access housing programs. The federal definition of an individual or family experiencing homelessness is one who, "lacks a fixed, regular, and adequate nighttime residence" and to be considered chronically homeless, "a person must have a disability and have been living in a place not meant for human habitation, in an emergency shelter, or a safe haven for the last 12 months continuously or on at least four occasions in the last three years" (Department of Housing and Urban Development, 2012).

Traditional pathways to preventing and ending homeless experiences follow what is known as the staircase approach, an individual or family enters emergency shelter, then enters transitional housing programs, and finally obtains permanent housing when available. Some individuals and families move from shelters directly to permanent housing situations due to having the available resources, while others may spend longer periods of time moving through the system. It is also possible for individuals or families experiencing homelessness to cycle endlessly through all three interventions until a permanent solution is found (de Vet et al., 2013). Dittmer et al (2018) examined perceptions of citizens and found they tend to blame the homeless population for their situation who are further stigmatized as a result.

In 2009, the Homeless Emergency and Rapid Transition to Housing Act (HEARTH) was passed, which called for a turning away from this staircase approach (de Vet et al., 2013). This act focuses on providing access to permanent housing along with supportive services as a response to homelessness (Department of Housing and Urban Development, 2012).

Homeless Interventions

The HEARTH Act recognized the traditional pathways to end homelessness are not adequate in all circumstances, so an Emergency Solutions Grant (ESG) was developed and implemented to meet individual and family homeless needs apart from the traditional paths (de Vet et al., 2013). ESG interventions include Homeless Prevention (HP) financial assistance to prevent evictions, and Rapid Re-Housing (RRH) to rapidly re-house individuals and families where eviction prevention is not possible. The homeless interventions available and implemented by professional social workers are complex and determining a "good fit" may be challenging even for the most well-trained professional.

Individuals and families who experience traumatic transitions and disruptions can experience homelessness as a result and benefit from receiving micro level case management services using the strengths-based perspective (de Vet et al., 2013). Available housing programs that receive HUD funding provide case management services to vulnerable individuals and families experiencing homelessness. Case management is a coordinated approach of service delivery, emphasizing on-going supportive care to individuals and families with the greatest need, involving frequent client contacts and more intensive services.

The levels of case management applied by social workers to meet the housing needs of persons experiencing homelessness include case management (CM), standard case management (SCM), and intensive case management (ICM). CM involves assessment and intervention during an office visit, which involves collection and documentation of client or family information and then providing one-time financial assistance. SCM involves a higher level of involvement by social workers providing services, usually in an emergency shelter or transitional housing program that may last up to two years. ICM is the highest level of care provided and is usually

implemented with individuals and families experiencing chronic homelessness and associated with permanent housing programs.

Street Outreach

Street outreach coordinators train volunteers in data collection during street outreach patrols in local communities while supporting the chronically homeless population. The statistics show a small percentage of chronically homeless persons exists, but there are others considered the hidden homeless living out of plain sight. During street outreach, the evidence-based practices of motivational interviewing including change talk are utilized by social workers to encourage emergency shelter, treatment programs, and application to available housing programs.

Marginalized populations need professionals trained to listen, support, and validate their emotions in a caring manner, professional social workers most commonly fill this role. Using empathy to perceive and understand their experiences and respond is also a powerful intervention. Many individuals encountered during street outreach gladly accept necessities including toiletry kits and blankets, bottled water, and snack bars. The sites visited by outreach teams include drop-in centers, outdoor tent locations, soup kitchens, and other areas frequented by persons experiencing chronic homelessness.

Housing Locator

Lead COC agencies are responsible for preventing, reducing, and ending homelessness, and refer those experiencing homelessness or at-risk individuals and families to housing options through a housing locator. The housing locator establishes relationships with property owners to work closely with the at-risk population. When working with at-risk clients and businesspersons

it is necessary for the housing locator to advocate on behalf of this vulnerable population.

Locating affordable units and assisting clients during the lease signing process promotes and

ensures housing stability. Coalition agencies frequently contact housing locators to refer

homeless or at-risk clients in their communities to housing options for housing, rapid re-housing,

or relocation.

Two specific programs implemented by the federal government to address homelessness

for veterans and their families are the Supportive Services for Veteran Families (SSVF) and the

Veterans Affairs Supportive Housing (VASH). These programs depend on case management

services to assist veteran families with housing, health care needs, and employment services, all

provided on a local level involving community agencies in a position to make family well-being

attainable.

Supportive Services for Veteran Families

The SSVF program was developed to assist veteran families in need of homeless

prevention (HP) or rapid re-housing (RRH) services. HP is short term assistance to prevent

homelessness and RRH is available to rapidly re-house and stabilize veteran families in crisis if

homelessness occurs (Department of Housing and Urban Development, 2016). Professional

social workers link individual veterans or veteran families to affordable, safe, stable housing as

quickly as possible. The Veterans Administration (VA) awards grants to community non-profits

to administer both types of assistance to veterans and their families: HP and RRH.

SSVF policies recommend RRH assistance to provide one of the most basic family needs,

stable affordable housing if an episode of homelessness occurs. RRH assistance ensures veteran

families most in need receive the assistance to end their homelessness as quickly as possible

(Department of Housing and Urban Development, 2016). Implementation of this policy by professional social workers within local communities promotes family well-being by ending a homeless episode or exiting a veteran family out of an emergency shelter into affordable stable housing to avoid prolonged family homelessness.

SSVF also provides HP funding to stop an eviction by paying past due rent. The lead agencies for HUD funding, monitor and evaluate agency input of veteran family information into the Homeless Management Information System (HMIS). HUD requires each local agency assisting veteran families to enter data into HMIS to ensure grantees are meeting program goals (Department of Veteran Affairs, 2015).

Another important aspect of the SSVF program is supportive services, specifically, case management services offered to veteran families. Under the umbrella of supportive services case management, veterans and their families can receive assistance for: substance abuse and mental health treatment, domestic violence, financial support, housing searches, and service planning to remain stably housed.

The SSVF program follows the housing first policy in delivering supportive services to veteran families, which eliminates common barriers to receiving assistance including, documentation requirements, monthly income, abstinence, and participation and completion of treatment programs. Instead, the policy principle emphasized is providing housing first, then supportive services to follow to promote family well-being (Department of Veteran Affairs, 2015).

Veteran Affairs Supportive Housing

The HUD-Veterans Affairs Supportive Housing (HUD-VASH) voucher program links housing vouchers with case management and clinical services for veterans and their family members. The HUD-VASH program provided $50 million in 2011 to serve approximately 7000 veteran families, and $60 million in 2016 to serve approximately 8000 families nationally (Department of Housing and Urban Development, 2016). The recent push for meeting the overall needs of veterans and their families has been successful due to the investments of federal funding totaling $110 million since 2008 for housing, health care (mental/physical), and employment services through HUD-VASH. This was made possible because of town hall meetings and family summits in Washington, DC, which laid the groundwork for policy solutions which benefited military veterans and their loved ones (*Congressional military families caucus holds summit for service members, veterans, and families*, 2012).

The millions of dollars poured into the HUD-VASH program since 2008 has provided over 85,000 housing vouchers administered to participating veterans through VA medical centers or community-based outreach clinics. The program uses a community collaborative approach working with local public housing agencies (PHA) and local PIT counts documented by the lead COC. After the VA determines the highest homeless veteran need in an area, a local PHA will be identified to distribute the vouchers, at least one in every state (*Congressional military families caucus holds summit for service members, veterans, and families,* 2012).

Emergency Rental Assistance Program (ERAP)

The American Rescue Plan (ARP) signed into law by President Joe Biden on March 11, 2021, included $21.6 billion for households struggling to pay rent and utilities hit hard by the

COVID-19 pandemic (United States Interagency Council on Homelessness, 2021). This plan included several interventions to stem homelessness including preventing foreclosures and evictions, and new funding for those experiencing homelessness, $5 billion for the HOME Investment Partnership Program, $5 billion for the Emergency Housing Voucher Program (EHV), and $21.6 billion for the Emergency Rental Assistance Program (ERA) (United States Interagency Council on Homelessness, 2021).

The COVID-19 pandemic has created a new drastic situation in housing, those stably housed in mortgaged homes and rental units are now facing foreclosure and eviction due to non-payment of mortgages and rent which may lead to exponential homelessness in the US. In anticipation of this, HUD has provided evictions guidance in which it initiated eviction moratoriums for borrowers and renters alike (Department of Housing and Urban Development, 2021). The Secretary of the US Treasury, Janet L. Yellen, wrote in a letter to state and local leaders that, "no one should be evicted from their homes before they have a chance to apply for rental assistance" and, "no eviction should move forward until that application has been processed" (Department of the Treasury, 2021).

Professional Social Worker Perceptions

Professional social workers must take care not to believe they are the experts and clients are incompetent, this misperception could come from the knowledge, insight, and ideas acquired during their practice. Social worker perceptions about persons experiencing homelessness can include the belief that homelessness is typical within certain populations of people who have, 1) problems with alcohol and substance abuse, 2) mental health disorders, and 3) those living in poverty (Welch-Lazoritz, et al., 2015; Colombo, 2019).

These perceptions may be a result of working in homeless systems for many years and developing social worker bias regarding populations experiencing homelessness. Social workers have the ethical obligation to recognize their own bias and work in a collaborative relationship with all clients and see the clients as the experts of their own lives with strengths and potential which will reduce bias and instill confidence and inspire hope (National Association of Social Workers, 2021).

The research conducted up and until the present time on populations of individuals and families experiencing homelessness and related factors in the US is vast and has added valuable information that contributes to designing programs and services to meet homeless needs. However, what is lacking is research that seeks to specifically study professional social workers and their perceptions on populations experiencing homelessness, and if their perceptions positively or negatively impact homeless intervention selection and provision of case management services, gaps of knowledge in this area exist. A carefully planned study of social worker perceptions in the US could lead to policy recommendations that may be applied on a global scale as professional social workers have the most experience developing programs and implementing interventions and services.

Analysis

General Systems Theory

General Systems Theory (GST) developed by Ludwig von Bertalanffy posits that any organism at its basic level of functioning is made up of single parts and processes operating together (Van Assche et al., 2019; Klir, 1972). von Bertalanffy also proposed that an investigation of organisms and their organization is not enough to explain any phenomena

entirely. A practicing biologist, von Bertalanffy intimated that the term "organism" could be replaced by the term "organized entities" and social groups could be considered and researched using the GST model (Klir, 1972).

In the GST model, the process of parts operating together was considered an open system by von Bertalanffy (Kilr, 1972), and suggested this was a move away from study of the organism itself to a study of systems within their environments. Since the traditional scientific view failed to explain the multifaceted nature of organisms and attributes such as wholeness, evolution, self-regulation, and equifinality, the concept of an open system or general system offered integration of many disciplines within the general systems theory. GST brought insight into the fields of biology, economics, thermodynamics, engineering, and computer science early on and manifested non-biological symbolism in those fields to explain phenomena (Van Assche et al., 2019).

Homelessness, as previously discussed in this study, is at crisis levels on a global scale, as 100 million worldwide illustrate, even prior to the COVID-19 pandemic. Individuals, families, groups, organizations, and communities (IFGOCs) are part of complex systems and behavior is influenced by a variety of factors within the system or the "organized entity" as von Bertalanffy said (Klir, 1972). IFGOCs can be viewed as being organisms in an open system negatively affected by their environment leading to homelessness in a process of parts operating together, receiving inputs, and producing outputs. IFGOCs as part of the world are an open system needing positive inputs by social workers using professional judgement to provide housing, and case management services to reduce the rates of homelessness locally and globally, the environment, so they then in turn contribute as productive members of society, outputs.

<u>Professional Social Worker and Client System</u>
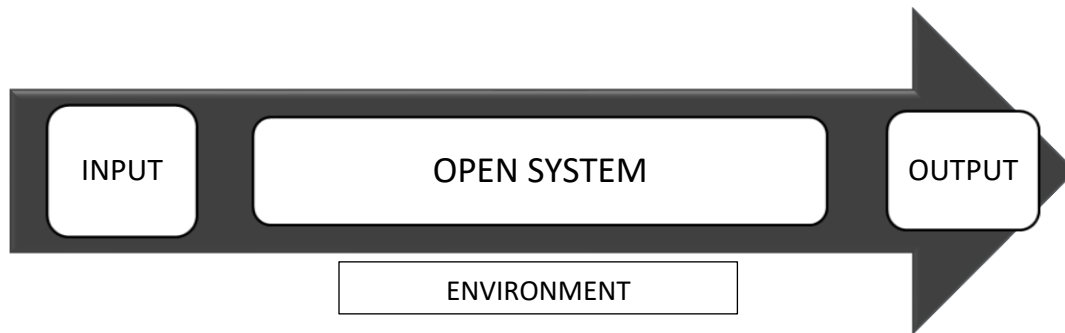
Relational Theory

Relational theory focuses on individuals and how they relate to self, others, and their environment (Segal, 2013). Relational theory has its roots in Freudian Psychoanalysis and is used in clinical social work practice to enhance work with clients (Ornstein et al., 2005; Segal, 2013). The features of this approach are transference, the client's projections towards the therapist, and counter transference, redirection of therapist projections towards the client. Traditionally this was to be avoided, but now is central to treatment and offers understanding of their own participation and the clients' dynamics in therapy when working with vulnerable populations.

Practitioners using the Relational Theory strategy of projective identification, stress that change occurs not just through showing empathy, "but through a process of supportive, respectful, mutually-reciprocal meaning-making" and that human behavior is influenced but not determined by past interactions (Ornstein et al., 2005; Segal, 2013). During therapy sessions, clients unknowingly project undesirable elements of them self onto practitioners and

practitioners take on these roles and continue engaging in a cycle where these interactions do not prevent growth, but on the contrary become "fertile ground" for new growth.

This is not to say empathy is of no use since professional social workers can use empathy to engage and establish significant partnerships with clients seeking housing and other services during the COVID-19 pandemic, as clients who experience empathy in treatment have improved outcomes (Gerdes et al., 2011). Together the Relational Theory concepts of transference, counter transference, and projective identification, lay the groundwork for client and therapist interactions that will lead to individual well-being in the context of the social environment (Ornstein et al., 2005; Segal, 2013).

<u>Professional Social Worker and Client Interactions</u>
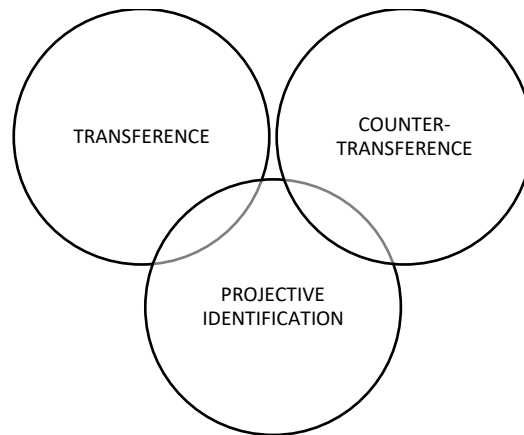
Class Conflict Theory

History has demonstrated that conflicts occur between social classes concerning economics, those who have verses those who have not (Fenyo, 2010). Competition for available resources among vulnerable populations living in society can also create conflicts (Lancee, 2013). Race, gender, sexuality, culture, religion, and ethnicity are other factors to consider regarding conflicts between classes and have an impact among populations of people suffering
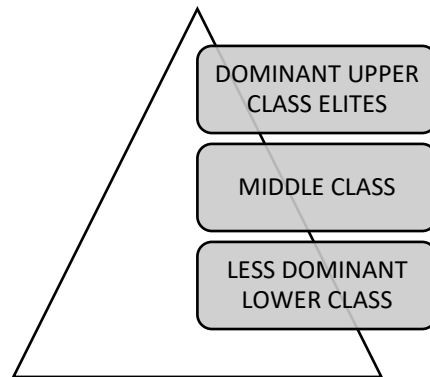
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from the effects of the COVID-19 pandemic who are experiencing homelessness locally and globally. These populations are considered a vulnerable class due to poor physical, psychological, and social health.

According to Calavita (2004), because of competition between the dominant and less dominant class, conflicts with the lesser class will occur. And these tensions and conflicts surface when power is unequally distributed between groups in society. Power within this framework is defined as having control of resources over those considered to have a lower social status. The current pandemic circumstances place those in positions of power, the dominant class, in positions to provide housing and other services with limited resources, which may aggravate conflicts with the less dominant class who are already in competition among themselves for scarce resources.

Politics and the institutions that make up society are under the control of those in power (Gilens & Page, 2014), economic elites and organized groups have a greater impact on policy than interest groups or average citizens. Populations experiencing homelessness already distressed by COVID-19 encounter numerous barriers implemented by those in power when attempting to access resources due in part to unreasonable policies requirements initiated locally, that must be improved and then possibly applied globally.

Unequal Power Between Classes

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         /  │DOMINANT UPPER│  \
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Rational Choice Theory

Rational choice theory suggests that individuals take actions based on maximizing their own rewards while minimizing the consequences (Akers, 1990). Some of the challenges people experiencing homelessness face include substance use and abuse, mental health, and chronic health conditions which may hamper individual decision making. According to Apel (2013), weighing risks and making decisions involves various aspects of individual behavior. People facing a homeless situation, i.e., eviction, foreclosure, living on the streets, may not perceive the consequence of their actions rationally due to the extreme pressure of their current situation.

Considering the circumstances of local and global homelessness with the added anxiety of ambiguous information on the COVID-19 pandemic, it may not be likely to expect individuals or families to act rationally when making decisions that could affect their housing. An individual may make decisions based on self-interest or survival, including poor decisions. For instance, it's not inconceivable for an individual, or family head of household, to use limited resources to purchase food or pay a utility bill rather than pay rent. An individual or head of household must balance their own interests, with the information they have, and beliefs about outcomes after they decide on course of action as the table below illustrates.

<u>Client Decision Making</u>

BELIEFS ABOUT POSSIBLE EFFECTS

INTERESTS

INFORMATION

ACTIONS
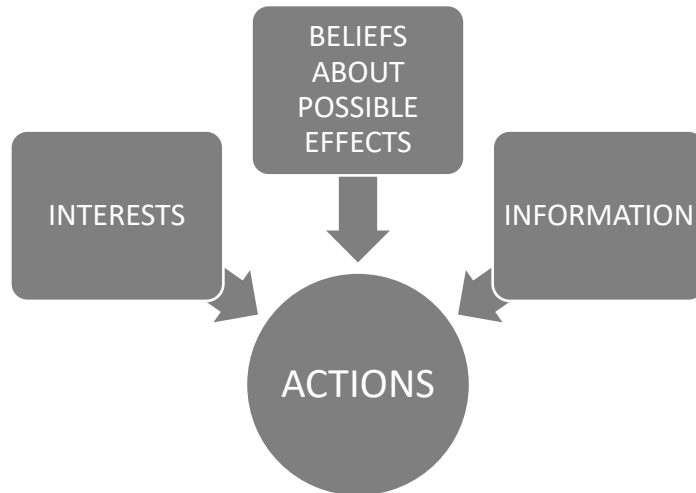
Ethical Implications

There is something distressing about the reality of homelessness, seeing pictures or videos from journalists covering stories around the globe or walking by someone living in a cardboard box on the street. These images evoke strong emotions like, "this is not acceptable" or, "something should be done about this." Immanuel Kant (2020), the 18th and 19th century philosopher, advanced a deontological ethical view and would say, "to be beneficent when we can is a duty." Contemporaries of Kant's, Jeremy Bentham & John Stuart Mill, spoke of "universal benevolence" and "the greatest happiness of the greatest number" respectively, a utilitarian ethical viewpoint (Viner, 1949; Mill, 2003). These two ethical philosophies are still relevant today and apply appropriately when examining homelessness and responses by governments tasked with addressing the local and global homeless crisis.

The world is becoming increasingly globalized through trade agreements, national alliances, and partnerships. Now is the time for world leaders to work together, not only for economic gain and protection from enemies, but to create a world where people have the most basic of needs met, which is housing. Lerner (2019) talked about the current global economic system and cited Thomas Hobbes describing a desperate world as a "state of nature that was a struggle of all against all." Hobbes, the founding father of Western political philosophy lived in the seventeenth century, now in the twenty first century, steps should finally be taken address homelessness locally and globally.

If addressing homelessness is finally to be realized globally, representatives of the UN must follow through on what was affirmed decades ago in Article 25 of the United Nations Universal Declaration of Human Rights proclaimed by the U N General Assembly in Paris on 10 December 1948 (The Story of Human Rights, 2012).

1. Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age, or other lack of livelihood in circumstances beyond his control.

In the US, the National Association of Social Workers (NASW) Code of Ethics is a set of standards that guide the professional conduct of social workers who have ethical responsibilities: to promote the well-being of clients, to colleagues, in practice settings, as professionals, to the social work profession, and to broader society (National Association of Social Workers Code of Ethics, 2021). Social workers are in the unique position to assist those experiencing chronic or episodic homelessness as they are generalist practitioners who assist individuals and families

obtain needed services and necessities in a variety of settings using integrated methods since clients may need a combination of responses to problems (Derezotes, 1999).

Policy Recommendations

Below are policy recommendations to address homelessness in the US:

1) the development of a Professional Social Workers Perceptions Test (PSWPT)

2) a national study in the US of professional social workers providing housing interventions and case management services

3) implementation of the PSWPT to determine if their perceptions and attitudes inhibit significant reduction and eradication of homelessness

As previously mentioned, there is a persistent cycle of homelessness in the US and investigations must be undertaken to discover possible causes. The data collected during PIT counts clearly illustrates a fluctuating pattern of episodic and chronic homelessness in the US and the inability to understand and explain this phenomenon may include difficulties understanding the issues experienced by this population, and the relationships with professionals attempting to assist them.

Social workers may not consider themselves as part of an open system when operating under the general systems model. It is possible social workers view themselves as operating outside the system when completing social histories, assessments, implementing change plans, and evaluation of interventions (Kirst-Ashman & Hull, 2012; Kilpatrick & Holland, 2009). By examining social workers and their perceptions on persons experiencing homelessness as being inside the system or as a crucial part of the system, it may yield beneficial information whether

the case management services and interventions are a good fit and if they are influenced by their

perceptions, positively or negatively.

The diagram below is a representation of the homeless intervention system in the US

including social worker perceptions, case management services, and the impact on homelessness.

<u>Impacts on Homelessness</u>

SOCIAL WORKER PERCEPTIONS

INTERVENTIONS/CASE
MANAGEMENT SERVICES

IMPACT ON HOMELESSNESS
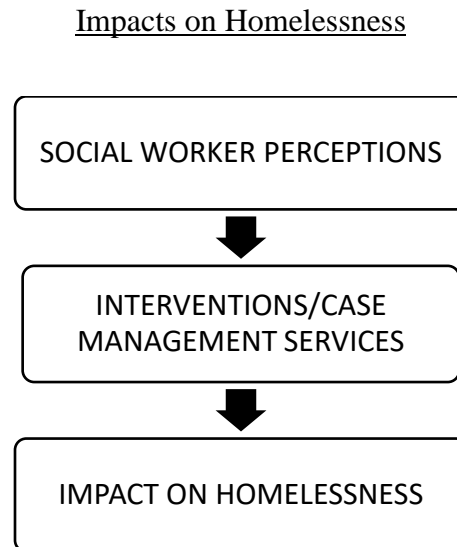
Social workers are in a unique therapeutic alliance with clients which enables them to

collaborate in a two-person rather than one-person supportive and respectful approach to care

(Ornstein et al., 2005; Segal, 2013). This worker-client relationship offers clients the opportunity

to express their challenging experiences where social workers act in a participatory manner to

validate the client's narrative (Ornstein et al., 2005). Professional social workers must be

sensitive to the systems that influence a person's life experience, but also be aware of the

relationships inside and outside of the environment and act as a catalyst for change or as a part of

the change agent system.

Typically, social work focuses on assessment and interventions with the social worker

trying to effect change as an agent within the system (Kirst-Ashman & Hull, 2012; Kilpatrick &

Holland, 2009). In relational practice the social worker is sensitive to the systems that reveal an individual's life experiences and give the worker an understanding of where to begin, within the relational atmosphere of the individual. This relational model of practice offers clients a mutually supportive atmosphere, and at the same time, social workers use their knowledge of appropriate case management services and interventions as a key part of the helping process. Conducting research involving social worker perceptions on homelessness, while considering case management services and interventions to prevent and end homeless situations is limited or non-existent and may show valuable new knowledge.

Currently there are almost 700,00 trained professional social workers in the US, and 120,000 are members of the National Association of Social Workers (National Association of Social Workers, 2021). Their primary responsibility is to promote the well-being of clients and work to design effective policies and procedures to address complex issues. As direct service providers of rental assistance, housing programs, and case management services, use of the PSWPT will aid in understanding how their attitudes, perceptions, and beliefs about the homeless population positively or negatively affect preventing, reducing, or ending homelessness. This enterprise is essential and therefore is the main policy recommended in this paper.

Another policy recommendation of this paper is for the UN to follow-up on their declaration that housing is a human right by:

1) developing and instituting a Global Initiative to End Homelessness (GIEH) and,

2) using current programs and services in the US as a model.

Elaborating on details of what the GIEH looks like in practice is too intricate to discuss in this paper. But the local homeless solutions section of this paper discusses the effectiveness at reducing, preventing, and ending homelessness in the US and it is recommended that the UN adopt the US model as part of the GIEH. There is room for improvement in the US housing system as discussed, but the US has the most extensive national model in the world for a country its size.

The global homeless dilemma is multi-faceted and includes many aspects listed earlier in this paper including disasters and wars, physical/mental health disabilities, poverty, and domestic violence incidents. These factors increase the likelihood of homeless episodes occurring and becoming chronic if nothing is in place to prevent them. One principle of the GIEH to begin to address global homelessness is for neighboring countries to temporarily house refugees until more developed nations can provide aid (Pourhashemi, et al., 2012). The United Nations and the Human Rights Council can also implement international legal enactments for countries most vulnerable to disasters which will oblige other countries with similar risks to aid one another in emergency conditions using elements of the US system.

Addressing global homelessness is an enormous task for many reasons, including the difficulty in anticipating events like natural disasters and global conflicts. Professional social workers have unique practice skills to meet individual and family needs in crisis situations, which can be used on an international level to collaborate and address this issue. The UN could enact recommendations to use the US system, including interventions and case management services, and then train international workers to respond to crisis and ultimately alleviate global homelessness.

Summary

Statistics show close to 100 million people globally experience homelessness (Capdevila, 2005) 567,715 in the US alone in 2019 (Department of Housing and Urban Development, 2020). The COVID-19 pandemic has exacerbated local and global homelessness with the full impact of the pandemic yet to be realized. The UN General Assembly in Paris December 10, 1948, in Article 25 of the United Nations Universal Declaration of Human Rights announced housing is a human right (United Nations, 2021). This universal basic need can be met by nations coming together to investigate underlying causes and adopting plans to finally address homelessness on a global scale.

Populations of people experiencing homelessness face the extreme risk of being infected and transmitting the COVID-19 virus. This is a result of factors such as living in overcrowded places, practicing poorer hygiene, a lack of PPE, and having various physical/mental health disabilities. The nature of the COVID-19 virus along with factors related to episodic and chronic homelessness occasions real danger to those experiencing homelessness and the general public who may come in contact with them. The current world situation regarding homelessness during the COVID-19 pandemic offers a unique opportunity for global leaders to address this issue and make efforts to begin to remedy this phenomenon.

The incredible goal of addressing homelessness on a global scale is not expected, but should be accepted as possible and attempted with the help of nations coming together and adopting the extensive US system of meeting homeless needs for multiple populations of people. Professional social workers are uniquely qualified to meet the needs of populations experiencing homelessness including implementation of housing interventions and delivery of case

management services. In depth investigation into social worker perceptions, beliefs, and attitudes using a PSWPT may lead to understanding why the homeless phenomenon in the US persists.

At the same time, without a far-reaching plan to deal with the global homeless dilemma, expectations of preventing, reducing, and ending homelessness may only result in continued persistent cycle. It must be attempted at the global level with national leaders collaborating together to create attainable policies but implemented by trained professional social workers. This too is an enormous undertaking when considering that many underdeveloped nations may not have professional social workers, but by no means a reason not to pursue it and plan accordingly.

Investments like the ARP which included $21.6 billion for households in the US struggling to pay rent and utilities hit hard by the COIVD-19 pandemic must be made by the international community to counter global homelessness. The GIEH will require development of strategies including professional social workers in the US training workers in the international community on housing interventions and case management services as well as responding to unusual global homeless occurrences, i.e., wars and disasters.

There has never been an opportunity like the present for the world to come together where neighboring countries can mutually assist one another by providing resources and temporary shelter until permanent solutions can be found. The COVID-19 pandemic has unfortunately brought fear, illness, and death to the world, but also a global effort to stop the virus. If nations will view global homelessness as they do the pandemic and initiate a global effort similar to what is recommended in this paper to eliminate it, what may now seem impossible, may one day accomplished.

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