OUT IN THE COLD:
Homeless Children in Crisis in Massachusetts

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Massachusetts Law Reform Institute: Fighting Poverty and Advancing Justice

Founded in 1968, the Massachusetts Law Reform Institute (MLRI) is the statewide poverty law and policy center. Our mission is to advance economic, racial and social justice through legal action, administrative and policy advocacy, training and public information. MLRI focuses on advancing policies that ensure the fundamental needs of traditionally underserved, low-income populations are met and on reforming policies and practices that harm people living in poverty.

Our programmatic work encompasses a wide range of poverty law fields including housing, health care, family homelessness, public assistance, immigration, employment law, racial equity, child welfare, family law and domestic violence, and court reform.

In addition, MLRI coordinates two statewide legal information websites: www.masslegalhelp (for individuals and social service providers seeking legal information to assist low income clients) and www.masslegalservices.com (for legal aid lawyers and advocates).

For more information, please visit our website at www.mlri.org, or contact Executive Director, Georgia Katsoulomitis at 617-357-0700 x314. Follow us on Facebook at https://www.facebook.com/MassachusettsLawReformInstitute.
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Executive Summary

In September 2012, Massachusetts imposed new restrictions on eligibility for emergency shelter for homeless families with children. Under the new regulations, many families are not eligible for shelter until they become so desperate that their children have to sleep to in a “place not meant for human habitation.” Since September, more than 160 families – including hundreds of children – were placed in shelter only after sleeping in places not meant for human habitation. This figure is based on the Commonwealth’s own data, and consistent with the authors’ first-hand experience.

These families are sleeping outside, in abandoned buildings, in emergency rooms at great expense to the Commonwealth and the health care system, and in cars – including on some of the most frigid nights of the year.

The current policy is immoral, unacceptable, and unnecessary. It is needlessly placing the lives and health of children and their families at risk. And it is wasting more state resources than it is saving.

Fortunately, the solution to this problem is simple: For less than $100,000 per year, homeless children can be provided with shelter before they have to stay in a place not meant for human habitation.

The answer to homelessness is greater investment in more affordable housing. But such investments should not come at the expense of children who are being denied both housing and shelter. Access to shelter should not be cut off unless and until these families can be housed instead. That – not the policy currently being implemented – would be true “Housing First.”

The new Massachusetts policies are, literally, leaving children out in the cold. As explained in this report, we can and must do better.

We call on our State Government to protect these children by making families who are at imminent risk of staying in a place not meant for human habitation eligible for shelter.

MLRI
April 2013
Out in the Cold

Introduction

Family homelessness is at very high levels throughout the Nation, and Massachusetts, with its very high housing costs, is no exception.\(^1\)

Massachusetts has historically had one of the most robust, state-funded emergency shelter systems in the country for homeless children and their families. Through Administrations both Republican and Democrat, the Commonwealth has maintained this safety net through the Emergency Assistance (EA) program.

In Massachusetts, there are approximately 2,000 homeless families in congregate (shared living) or scattered-site (apartment style) EA shelter placements and another 1,200 or so families in overflow motel room placements, for a total of about 3,200 families.

Beginning in late summer 2012, Massachusetts began restricting access to EA shelter, saying it wanted to use the resources to fund affordable housing and homelessness prevention instead. We – and all who are concerned about homeless families – strongly support increased investments in affordable housing and homelessness prevention. But those investments take time to result in actual housing options for individual families who are already homeless and therefore do not justify precipitously restricting access to emergency shelter.

The new restrictions on access to emergency shelter are leaving many families out in the cold – literally – without housing and without shelter. Since these new rules went into effect, the rate of denial of applications for EA shelter has skyrocketed from less than 45 percent to 60-75 percent. Many homeless families with children are now not eligible for emergency shelter in Massachusetts unless and until the parent and their children have become so desperate that they have had to stay in a place “not meant for human habitation” – such as a car, the streets, an office building or an emergency room – or have engaged in “irregular housing” defined as moving from one “double-up” situation after another, staying with each host for a very brief period of time.\(^2\)

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2 760 CMR 67.06(1)(a)4.
Each week, a number of families are found eligible for EA shelter only after they have slept in a place “not meant for human habitation” with their children. Although we believe that many of these families are later approved, they find safety only after they have gone through a traumatic and health-threatening experience.

As a result of the new restrictions, Massachusetts legal services programs, hospital clinics and emergency rooms, and other social service agencies are being overwhelmed with requests for assistance from homeless families who cannot access shelter and have no safe place to say. And, most importantly, families are being subjected to conditions that have seriously adverse consequences for child and parental health, are unnecessarily increasing health care costs, and undermine the children’s ability to obtain a quality education.

The medical community, the social services community, the legal services community and others who advocate for families are asking that homeless families be placed in shelter before they have to resort to such desperate measures.

In addition to restricting access at the “front door” of shelter, the Department of Housing and Community Development (DHCD), the agency that administers EA shelter, is moving aggressively to terminate families placed in motels, including for only very minor alleged rules violations, such as allowing a friend or family member or a member of another family living in the motel to visit them in their motel room during the day. This may be an aspect of the agency’s effort to end the use of motels in the next year. But, in the name of ending usage of motels, these families should not lose the roof over their heads, especially for conduct that is simply part of trying to maintain a sense of community and humanity and causes harm to no one.

On the positive side, approximately 900 state rental vouchers are being distributed in fiscal year 2013 to families already in EA shelter to help them move into apartments in the

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3 Additionally, families who should be eligible are often turned away because they do not have preferred forms of verification at hand, even though state law wisely says the families are to be placed for up to 30 days, during which time they are to be provided with assistance in obtaining any necessary third-party verifications and that third-party verifications are not to be required unless absolutely necessary. St. 2012, c. 139, § 2, item 7004-0101 (EA line item in FY 13 state budget providing that “notwithstanding any other general or special law to the contrary, the department shall provide shelter for up to 30 days to families who appear to be eligible for such shelter based on statements provided by the family and any other information in the possession of the department, but who need additional time to obtain any third-party verifications reasonably required by the department; ... provided further, that the department shall not impose unreasonable requirements for third-party verification and shall accept verifications from a family whenever reasonable”).

4 Neighborhood Legal Services on the North Shore has reported a more than 200% increase in requests for assistance by homeless families comparing February 2013 with February 2012. The Massachusetts Law Reform Institute (MLRI), which is not generally a direct service provider but the poverty law policy and support center for civil legal services programs in the state, has begun doing direct representation due to the inability of local programs to meet demand. Since the beginning of January 2013, MLRI has consulted on or taken the lead on advocacy to assist homeless families at the rate of approximately one new case a day.

private rental market. As a result of the distribution of these vouchers, the number of families in the shelter system has declined by approximately 500 since July 2012.

If the Commonwealth truly wants to follow a “Housing First” approach to the family shelter crisis, substantially increased investments in state rental vouchers and other forms of affordable housing are necessary. And, until those investments are made and can bear fruit, the safety net of shelter must be shored back up in order to keep the Commonwealth’s children safe.

This report is intended to shine a light on the crisis facing many homeless families in Massachusetts and set forth proposals for addressing that crisis.

**Historical Backdrop**

In January 2008, the Massachusetts Commission to End Homelessness issued a report proposing to end family homelessness in five years – by January 2013. In January 2009, the Administration of Governor Deval Patrick proposed to transfer responsibility for the EA shelter system from the state’s welfare agency, the Department of Transitional Assistance (DTA) to the state’s housing agency, the Department of Housing and Community Development (DHCD), on the theory that the housing agency was better positioned to provide housing to homeless families. This transfer proposal was adopted by the Legislature effective July 1, 2009.

The EA line item in the budget has been funded at over $100 million for the past several years. This amount of funding is less than the funding for many other programs administered by DTA but much more than the amount of funding for other DHCD-administered programs. Almost as soon at the transfer occurred, efforts began to redirect EA funding to other housing programs without regard to whether the funding was still needed for EA.

Simultaneously with the proposal to transfer EA to DHCD, the Administration proposed restrictions on access to EA shelter, signaling from the outset that one way that the Administration was going to try to “end family homelessness” was to end access to emergency shelter for many. The most severe of the 2009 proposed restrictions were prevented from taking effect due to advocacy by Legislators and others.

Continuing an approach begun by DTA, DHCD provided time-limited housing subsidies to families who had been in shelter for some period of time. DHCD called its version of this program “Flexible Funds” or “Flex Funds.” Several thousand families in shelter were provided with Flex Funds subsidies during state fiscal years 2010 and 2011. However, because of the

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6 However, as discussed below, the criteria for distribution of these vouchers among families in shelter are arbitrary. And none of these vouchers are being provided to families who are newly homeless and who are being denied EA shelter under the new rules. Hence, although Massachusetts policy makers often characterize their new policies as being part of a “Housing First” strategy, the unavailability of housing for families who can’t access shelter renders it “Housing Never/Shelter Never” policy for many homeless families.


recession and the great upsurge in the number of homeless families with children, the total number of families in EA shelter did not decline significantly.

For state fiscal year 2012, the Patrick Administration therefore proposed a new approach of very dramatically restricting access to shelter but providing those denied shelter with a 3-year, time-limited housing voucher instead, through a program it called “HomeBASE.” The Legislature approved the creation of HomeBASE but refused to give the Administration the power to restrict access to EA shelter. The Legislature’s rationale for not restricting access to shelter was that families with no where to go could not be immediately housed by provision of a HomeBASE subsidy – since it takes time to find an apartment to rent.

The wisdom of preserving the EA shelter safety net was proven when in October 2011 – only 3 months after DHCD began distributing HomeBASE rental assistance – DHCD had to stop providing HomeBASE rental assistance to new applicants due to overwhelming demand. If EA eligibility rules had not been preserved, newly homeless families would have been ineligible for both HomeBASE and for EA shelter.

Although the fiscal year 2012 experience confirmed the importance of an emergency shelter safety net for homeless families with children, in fiscal year 2013 the Administration doubled-down on its proposals to restrict EA shelter access. The Administration proposed to (1) restrict access to emergency shelter so that only families falling into four very narrow categories would be eligible and (2) not provide these families with any HomeBASE or other form of rental assistance instead. Rather, families denied access to EA would potentially be referred to a homelessness prevention program called Residential Assistance for Families in Transition (RAFT), which provides the possibility of no more than $4,000 for an entire year to try to re-house the family. While the RAFT program is very valuable in preventing homelessness among those who are still housed and who, for instance, need some one-time financial assistance to pay off a rental or utility arrearage, it was not designed to and is inadequate to provide an alternative to emergency shelter for most families who are already homeless. And in some parts of the state, RAFT money is already depleted well in advance of the end of the fiscal year. For example, by email dated March 18, 2013, the Western Massachusetts Network to End Homelessness reported that all of their RAFT funds, as well as all of their Emergency Shelter Grant (ESG) funds for state fiscal year 2013 were gone.

The Massachusetts Legislature largely went along with the Administration’s proposals for state fiscal year 2013, which began in July 1, 2012. As a result, the Administration adopted new regulations in the late summer of 2012 dramatically restricting access to emergency shelter only to:

a) families who are at risk of domestic abuse in their current housing or who are homeless because they previously fled domestic violence and have not had permanent housing since;

b) families who are homeless due to a fire, flood or natural disaster due to no fault of their own;
c) families who are homeless because they have been evicted due to a foreclosure or for nonpayment of rent due to a disability or medical condition or the loss of income in the prior 12 months; and

d) families who have no tenancy of their own and (i) are “doubled-up” with other households and face a substantial health and safety risk due to violence or conduct related to substance abuse or mental health issues, or (ii) are staying in a place not meant for human habitation.\(^9\)

Left out by these categories are families who have no tenancy of their own and have been forced out of their last “double-up” situation and are on the verge of having to stay in a place not meant for human habitation, such as a car, an abandoned building, an office building or an emergency room.\(^10\) These are the families who are at “imminent risk of staying in a place not meant for human habitation.”

Also left out are those families whose presence in the home of another violates the host’s lease and, if continued, could lead to the eviction of the host family – resulting in two homeless families, not just one.\(^11\)

I. Impact of the New Access Regulations

A. Children Staying in Places Not Meant for Human Habitation

Immediately after the new regulations took effect, medical providers, legal services programs and other community based agencies noticed a sharp increase in the number of families being denied EA shelter benefits who were then forced to stay in places not meant for human habitation.

\(^9\) 760 CMR 67.06(1)(a)1.-4. Over the Administration’s objection, the Legislature added the requirement that families staying in a place not meant for human habitation be provided with shelter. Had this language not been added, families would be in even more desperate circumstances than they are now.

\(^10\) After a family becomes homeless, it often tries to find other households to take them in at least temporarily. A “double-up” is a situation in which a homeless family who is not on the lease stays temporarily with a primary tenant.

\(^11\) DHCD has said that it will consider placing these families in shelter only after their host has received a Notice to Quit for unauthorized occupants from the host’s landlord. Housing Stabilization Notice 2012-6B, pp. 6-7 available at http://www.mass.gov/hed/docs/dhcd/hs/hsn/hsn2012-06b.pdf. Of course, this requires host families to let their landlords know that they have an unauthorized occupant and will increase the odds that the landlord will use the situation as grounds for an actual eviction. DHCD contends that its unenforceable request that state housing assistance providers not start eviction proceedings in these situations adequately addresses this risk, even though these landlords have no incentive to forebear on these evictions, given the increased utility and security costs that result from housing two rather than just one family. Moreover, DHCD has failed to revise its own regulations governing the HomeBASE rental assistance program to allow HomeBASE rental assistance recipients to allow homeless families to “double-up” with them. As a result, families are being terminated from the HomeBASE program for the very conduct DHCD is encouraging as an alternative to EA shelter. See 760 CMR 65.05(m)(forbidding unauthorized occupants in HomeBASE units).
In two days of public hearings held in October 2012 concerning the new EA shelter restrictions, medical providers, affected families and others presented more than 7.5 hours of testimony, including testimony about how important it is for the regulations to be revised to provide shelter to children and families at “imminent risk of staying in a place not meant for human habitation.” A video of the October testimony on the issue of “imminent risk” – entitled Give Them Shelter – is available on the homepage at www.mlri.org or at http://www.youtube.com/watch?feature=player_embedded&v=cFgeTsHJ-Yw.

Nevertheless, DHCD refused to revise the regulations in this way and families continue to be forced to stay in places not meant for human habitation before they are eligible for EA shelter. As a result of this refusal, since mid-September 2012, the denial rate of EA shelter applications has soared to 60-75 percent (from a prior denial rate of less than 45 percent), and more than 162 families, including hundreds of children, have been placed in shelter only after their children had slept in places not meant for human habitation. Appendix 1.

Families who have been forced to stay in places not meant for human habitation since the new regulations took effect include:

- Danielle, from MetroWest, who with her 5-week old baby and her baby’s father, slept in a car for more than 10 days after being denied shelter by DHCD.
- Sharna, a survivor of domestic violence, who with her 19-year-old son, slept in a car for 2 weeks, after being denied shelter.
- A family who had to sleep in a van at Miles Standish State Park in Plymouth for weeks, causing the mother to develop a pulmonary embolism from sleeping sitting up in the front seat. She was admitted to the hospital for three weeks and was then discharged with nowhere to use the oxygen machine that was prescribed.
- Lindsey, who while in her last week of a pregnancy and after telling DHCD how desperate she was, had to sleep on a beach with her 3-year-old son.
- Charmaine, who with her husband and her 17-year-old son with mental health issues, had to sleep in their car before they were placed in emergency shelter.
- Ebonie, who with her 8-year-old daughter, had to sleep in the hallways of abandoned buildings for many days, washing up for school and work at the Dunkin Donuts restroom near the child’s school.
- Mr. and Mrs. B. from the North Shore who had nowhere to sleep other than their car, but whom DHCD would not place because they could not name all the streets they drove around on to avoid being towed while their children slept in the back seat.
• Lakeisha, who with her 4-year-old and 6-year-old had to sleep in the back of a truck for weeks during the coldest days of the winter (pictured below).

• Carmen who with her 9-month-old baby was denied shelter and forced to sleep in South Station bus terminal in Boston, and then spend another night on the floor of a conference room at the offices of a local nonprofit agency before DHCD would place them in shelter.

• Katiria from Western Massachusetts who was placed in shelter only after sleeping outside on open porches with her children for several nights.

• Ginna, who was denied EA on the grounds she allegedly had access to housing with others, even though she had been kicked out of that housing. She then spent two nights in South Station in Boston with her 18-month-old daughter, was taken home by someone pretending to want to help, and was then raped. Her story was chronicled in an October 7, 2012 Boston Globe column by Yvonne Abraham, “A Safety Net That is Leaving More People Out”, available at [http://www.bostonglobe.com/metro/2012/10/06/safety-net-leaves-them-out/00tzU5RIJorNONk87DhEwO/story.html?camp=pm](http://www.bostonglobe.com/metro/2012/10/06/safety-net-leaves-them-out/00tzU5RIJorNONk87DhEwO/story.html?camp=pm).

B. Burden on the Heath Care System

In addition to putting families in dangerous situations, the new policies are also putting a strain on the medical system. Families denied emergency shelter have been turning up in hospital primary care centers and emergency rooms. Based on oral and written reports provided to DHCD and the authors, Boston Medical Center pediatricians estimate a 30 percent increase in the number of homeless families reporting to the hospital since the new regulations were implemented. Boston Children’s Hospital has documented a 50 percent increase in the number of social work hours devoted to homelessness since the regulations took effect. Appendix 2. The new policies seem to be having a particularly harsh effect on new mothers with newborn children who cannot access emergency shelter. Social workers from Brigham and Women’s Hospital recently wrote to legislative leaders about this phenomenon and its impact on child health and health care costs. The Massachusetts Hospital Association has written a letter to the
Administration discussing the “droves of families” who have started showing up at hospital emergency rooms, included as Appendix 3.

This shifting of the burden to the medical system is needlessly driving up health care costs. According to the Massachusetts Hospital Association, the cost of an emergency room visit is usually billed as an out-patient service at an average cost in 2013 of $333.99 – much more than the average cost of $85 per night of putting a family in shelter. Moreover, some hospitals report that these visits result in additional testing, driving up costs to $1,000 or more. And, if the visit results in admission for observation, the cost increases rapidly to the standard payment amount per discharge (SPAD) rate which is $7,785.85 in 2013.

Particularly at a time when the Commonwealth is trying to rein in health care costs, the Commonwealth’s family shelter policy is not only dangerous, it is penny-wise and pound-foolish.

C. Children Being Forced to Move From Place to Place

Under the new regulations, DHCD has provided that a family who has access only to “irregular housing” shall be deemed to be as much at risk as a family who has stayed in a place not meant for human habitation and thus eligible for EA shelter. “Irregular housing” is defined as “a sleeping situation that is not regular, consisting of repeated moves from place to place or the exhaustion of time limits in a time-limited emergency family homeless shelter not funded pursuant to 760 CMR 67.00.”

DHCD has refused to say how many “repeated moves” over what period of time qualifies as “irregular housing.” Instead DHCD has given individual caseworkers discretion to make that determination, leading to arbitrary and inconsistent outcomes for similarly situated families depending on the DHCD office where they are served or the worker they are assigned. However, DHCD has said that a family cannot be considered to have engaged in “irregular housing” if they stay one week at one place, another week at a second place and the next week back at the first place – repeating this pattern indefinitely – because DHCD views this as “regular” housing. Moreover, DHCD has said that if a homeless family is lucky enough to have a place where they can stay for a period of two weeks, that would be considered “regular” housing and likely break the chain of “irregular housing” needed to qualify for EA shelter.

Although families who have multiple places to stay temporarily are more fortunate than those who have no one to take them in, it is hard to overstate the stress and strain that bouncing from place to place has on both the parents and the children in these families. The parents must engage in a daily effort to find someone who will take them in, often not knowing until late in the day whether they will be successful. And those who are able to line up such temporary arrangements often have to wait outside until late in the day or evening until their temporary hosts return from work or other activities to let them in. One homeless mother, Carmen, recently

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12 760 CMR 67.06(1)(f)7.b.
informed the authors of this paper of the many days she spent out in the cold with her 9-month-old baby waiting for hosts to return from work.

Just as importantly, these frequent moves cause great disruption to children’s schooling. Since the implementation of the new EA shelter restrictions, homelessness liaisons in public schools have reported an increase in the number of school children with no safe place to stay.14

D. Families Who Have Stayed in Non-EA Time-Limited Shelter

As noted above, the “irregular housing” regulation also provides that a family is eligible for shelter at the end of a time-limited stay in a non-EA shelter. When this regulation was originally proposed, DHCD management opined that it would cover situations in which the City of Boston expends resources to place families in a motel room for one or two nights. But since then, DHCD has taken the position that a night or two in such a sheltering arrangement is not enough to confer eligibility, leaving other nonprofit organizations to expend resources to provide shelter to these families or allow these children and their parents to sleep on the streets.

II. Unreasonable Demands for Third-Party Verification Before Placement

Reflecting the fact that the EA program is an emergency child welfare program to keep homeless children safe and off the streets, the EA line item in the annual state budget and DHCD’s own regulations have long required DHCD to place families in shelter for up to 30 days if they appear to be eligible based on their own statements and information in DHCD’s possession. They can then use the 30 days to obtain any necessary third-party verifications to establish ongoing eligibility. The line item also forbids DHCD from imposing unreasonable requirements for third-party verification and requires it to accept self-verifications from the family whenever possible.

Despite these mandates, DHCD rarely places families pending collection of verifications unless the family has a legal advocate to insist on such placement and, even then, obtaining placement pending verification is often difficult.

Some of the verification-related barriers imposed by DHCD include:

- declaring that issues such as identity, relationship to the child, and Massachusetts residency are not subject to the “placement pending verification” rule,15 even though the line item creates no such exceptions,

- requiring families to produce verifications, such as birth certificates, that are already in the possession of the Department of Transitional Assistance with which DHCD shares

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14 See, e.g., Testimony of Representative Denise Provost at October 25, 2012 public hearing, available at [http://www.youtube.com/watch?v=9c6PYalzn3Y&list=UU55BWOf12kBEC3aKDC1Diog&index=37](http://www.youtube.com/watch?v=9c6PYalzn3Y&list=UU55BWOf12kBEC3aKDC1Diog&index=37). In addition, during the week of February 25, 2013, a school teacher reported a child regularly crying in class because her family had no where to stay but had been denied shelter by the state.

office space—an arrangement that was mandated by the Legislature in order to facilitate communication between the agencies,\textsuperscript{16}

- requiring victims of domestic violence to produce “professional” documentation of domestic violence and not accepting third-party statements from family and friends,\textsuperscript{17} even though victims often have good, safety-based reasons for not going to the police or obtaining a restraining order prior to fleeing the violence and often do not have access to mental health services until after they have fled,

- asking for irrelevant verifications, such a letter from a prior host’s landlord confirming that the homeless family cannot continue to stay with the host, even though, regardless of what the landlord says, the host will not allow the family to return,

- not exploring with families whether they qualify for a “good cause” exception to various rules that otherwise bar a family from shelter, e.g. whether they had “good cause” for leaving a job or leaving a prior subsidized housing situation,\textsuperscript{18} and

- not assisting applicants to obtain verifications even though DHCD regulations purport to require such assistance.\textsuperscript{19}

As a result of these policies, homeless families often spend days in places not meant for human habitation trying to collect verifications that should not be required before placement. Some examples include:

- In the case of Ginna discussed above, the Department originally denied her application for EA based on its belief that she had quit a job in the past 90 days without good cause. When Ginna produced a letter from her supervisor indicating he would be happy to talk to DHCD to explain that she did have good cause based on homelessness and lack of child care, DHCD refused to call and turned her away, leading to her having to stay in South Station.

- Carmen applied originally after she and her 9-month-old baby had stayed with three different acquaintances over the course of one week and had run out of options. She was unable immediately to get letters from each of her former hosts but provided their contact information. However, the DHCD worker refused to assist in verifying these stays by making phone calls to the hosts. Moreover, DHCD refused to place the family

\textsuperscript{16} See St. 2009, c. 27, § 142.
\textsuperscript{18} See, e.g., 760 CMR67.02(3) and 67.06(2)(c)
\textsuperscript{19} 760 CMR 67.04(3). The failure to explore good cause and the lack of assistance in obtaining verification is consistent with reports from DHCD workers that DHCD management has told them to deny as many EA applications as possible and to spend no more than a set number of minutes processing a family’s application for EA shelter.
presumptively, which would have allowed time to verify these stays in writing. As a result, with nowhere else to go, Carmen and her baby stayed in South Station.

- Jacquelyn, who was 5 months pregnant with a very high risk pregnancy when she applied for shelter, had been sleeping for weeks on the hallway floor of a public housing development. She explained this to the DHCD worker when she applied, but she was not placed presumptively. Instead, she was denied because she did not have verification from a police officer or other official source that she had been sleeping on the floor of the public housing development.

Families often report feeling like DHCD is just trying to get them to leave the office, does not want to help them, and looks for reasons to deny them.

Consistent with this perception, on the day of a recent snow storm, the DHCD offices were closed, with no information provided as to where families in need of shelter that night should turn. (See DHCD’s sign imaged on the left, below.) Fortunately, staff from Rosie’s Place went to the Boston office and left another sign (imaged on the right), providing referral information.

III. Terminations for Minor and Harmless “Rules” Violations

The preceding discussion focuses on the problems at “the front door” to EA shelter. Similar problems exist at the “back door” where families are often terminated from the EA shelter system based on minor alleged violations of very strict shelter rules.

This problem is especially acute for families placed in motels instead of congregate or scattered site shelters because the rules that families in motels must follow are much stricter than the rules applicable to other forms of shelter. For instance, families in motels are categorically barred from ever having a guest or visitor in their room, a rule that does not apply to those in other forms of shelter, and families in motels are subject to unannounced room inspections, whereas families in other forms of shelter must be given 24 hours notice.
Compounding the problem for families in motels are DHCD regulations that allow a family in a motel to be terminated from the EA system for only 2 violations of applicable rules, whereas families in other forms of shelter cannot be terminated unless and until they accumulate at least 6 such violations.20

Further compounding the difficulty for families in motels is that DHCD is taking the position that its policy of allowing families to present their side of the story and explain why they may have had “good cause” before a noncompliance ruling is issued does not apply to families in motels, who may in fact need this protection the most.

The following are examples of families facing termination due to these policies:

- Amanda is the mother of a 2-year-old son. She and her son and his father were in an EA-funded motel for much of her son’s life. DHCD sought to terminate this family from shelter because one day last February, when the baby was sick and his father was outside working on his car, Amanda ran down to the parking lot to ask the father to come up and watch the baby while she ran to the store for some baby Tylenol. In the few minutes she was gone, the baby was sleeping and a neighbor in an adjoining room watched him from her own room through the adjoining door. DHCD cited this family for violating the “no babysitting” rule that applies in motels but not other forms of shelter. But for a lawsuit challenging her termination, this family would now be on the streets. Instead, they have now moved into permanent housing for the first time in their young son’s life.

- Sherrie and her husband are the parents of 4 children. The parents each suffer from disabilities that make it hard for them to climb stairs or carrying heavy things. Nonetheless, they were placed on the second floor of a motel with no elevator. This family is facing termination from EA shelter because one day last Fall, Sherrie obtained help from another shelter resident and her niece to help her carry possessions up to her second floor room. This was deemed to violate the “no guests” rule, even though those helping her had no plans of staying after helping her deliver her belongings.

Similar cases, based on redacted hearing decisions, include:

- A family placed in a motel was terminated from the shelter system because the mother and some of her family members helped another resident with a sleeping baby carry her bags down to a waiting taxi and momentarily went into the other resident’s room to help retrieve the bags in alleged violation of the “no guests” rule.

20 Compare 760 CMR 65.06(5)(a)4. (one noncompliance requires 3 rules violations for families not in motels) with 65.05(5)(a)6. (noncompliance in hotel can be based on 1 rules violation) and 65.06(5)(c) and (6)(a)3. (second noncompliance leads to termination). Conduct that presents a health or safety risk to anyone in the shelter system is covered by separate rules which apply equally to those in any form of shelter. 760 CMR 67.06(5)(a)1. and 67.06(6)(a)1.
• A family in a motel was terminated from the shelter system for allegedly leaving their room cluttered even though the mother submitted medical records showing she has a torn muscle in her arm. Her doctor had advised her not to lift more than 5 pounds, but because she was unable to obtain a letter from him stating this, her unrebutted testimony was not credited.

• A family in a motel was terminated because the daughter’s 12-year-old friend from school slept over in the motel for two nights with no adverse consequences to anyone.

• A family in a motel was terminated because the mother’s mother and sister only stepped foot into her room momentarily when they came to pick her up to take her to do housing search.

The Patrick Administration often declares its intention to “empty the motels” within the next year.21 We support the goal of helping families find housing that is better than a motel room, but are concerned that the goal of emptying the motels not be achieved in whole or in part by terminating families for such minor and harmless conduct when they have no other safe place to stay.

IV. Arbitrary Distribution of Rental Vouchers

In the state fiscal year 2013 state budget, the Legislature provided funding for new rental subsidies through the Massachusetts Rental Voucher Program (MRVP) to go to families in shelter to help them find affordable housing. As many as 900 vouchers are being distributed to families in shelter this year, which is a very positive development.

However, the manner in which DHCD chose to distribute these vouchers is, in some instances, arbitrary. For instance, instead of providing the vouchers to families who had been in the EA system the longest, DHCD chose to provide vouchers to virtually every family staying in certain motels in certain communities, regardless of when they entered the shelter system.

A much fairer distribution system would have provided vouchers to families in shelter for the longest time and then moved families more recently placed in motels into the shelter spaces vacated by these families.

V. Low-Cost Proposals to Fix the Most Urgent Problems

A fairly simple and inexpensive set of recommendations would go a long way toward remedying the problems identified above.

1. Amend the EA Line Item In the State Budget to Address the Most Egregious Shelter Access Issues.

The EA line item in the annual state budget should be amended to require DHCD to provide EA shelter to:

a) families at imminent risk of having to stay in a place not meant for human habitation;

b) families who have stayed in three or more places within a 30-day period and cannot return to any of them; and

c) families who have spent one or more nights in a non-EA sheltering situation and cannot return.

We estimate that the annual cost of these health-and-safety-saving provisions would be less than $70,000 per year. 22

Since the new regulations were adopted, the Western Massachusetts Network to End Homelessness has been using Emergency Shelter Grant (ESG) funds to provide shelter to families turned away by DHCD – funds which are now depleted. Based on the Network’s personal experience trying to keep families safe in recent months, the Western Massachusetts Network has made the “imminent risk” language a top priority for the state fiscal year 2014 budget. Appendix 4.

In addition, the placement pending verifications language should continue to be included in the EA line item 23 but strengthened by adding the following language:

provided further, that the placement pending verification provisos shall apply to all eligibility criteria without exception; provided further, that if a family is denied shelter based on a provision of the regulations that includes any form of good cause exception, the denial notice must set out with specificity the basis on which the department has determined that no such good cause exists.

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22 Based on DHCD data showing approximately 162 families in 6 months being placed in shelter only after staying in a place not meant for human habitation, we estimate that there will be approximately 324 families during the year who are at “imminent risk of staying in a place not meant for human habitation” and who, when the requested language is adopted, will enter the shelter system one or two nights earlier than otherwise. The average nightly cost of shelter is less than $100 per family. If each of these 324 families received two additional nights of shelter because they are placed when they are at “imminent risk of staying in a place not meant for human habitation,” the cost would be only $64,800 per year (324 x 200 = 64,800).

23 As in prior years, the Administration has proposed to omit this important, life and health-saving language from the fiscal year 2014 state budget.
2. **End Unfair Terminations from Motels.**

A lawsuit is pending in the Western Massachusetts Housing Court challenging the harsher rules and termination regulations applicable to families in motels. A ruling could take substantial time. The issue could be addressed in a more timely fashion by adding language to the EA line item in the budget providing that:

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notwithstanding any rule or regulation to the contrary, families in motels shall not
be subject to more onerous rules or regulations for termination of shelter benefits
than families in other forms of shelter.
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3. **Set Fair Rules for Distributing Housing Resources.**

We are hopeful that the fiscal year 2014 state budget will include additional resources to provide more MRVPs to families in shelter.

We urge the Legislature to mandate that the subsidies shall be provided to those families who have been in the shelter system the longest and/or those who have the most difficult time in the shelter system due to family members with disabilities.

4. **Recognize that a “Housing First” Policy Requires the Provision of “Housing” to Those Otherwise Eligible for Shelter.**

As previously noted, the Administration has suggested that denying homeless children and their families access to shelter is part of a “Housing First” approach because they intend to use the “savings” to fund housing resources for other families.

This is not “Housing First.” Housing First is a model whereby homeless families or individuals are moved immediately into permanent, affordable housing, with intensive case management and wrap-around services which are accessed on a voluntary basis. Just as the Legislature did not restrict access to emergency shelter for single adults when it created the housing first program “Home and Healthy for Good,” which places single individuals into housing instead of shelter, neither should it restrict access to emergency shelter for homeless children just because it is trying to invest in more housing resources for families.

If and when more affordable housing resources are available, fewer families will be homeless and will need shelter. Until then the safety net of EA shelter must be re-established to prevent leaving our children “Out in the Cold.”

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24 See National Alliance to End Homelessness, *What is Housing First*, available at [http://www.endhomelessness.org/library/entry/what-is-housing-first](http://www.endhomelessness.org/library/entry/what-is-housing-first). As explained by a “Housing First” expert Dr. Eric Hirsch from Providence College at the October hearings, unless and until there are enough housing resources to provide housing to each family who would otherwise be eligible for shelter, shelter access should be maintained. See Dr. Hirsch’s testimony at [http://www.youtube.com/watch?v=3cQHi85Nm7s&list=UU55BWOfl2kBEC3aKDC1Diog](http://www.youtube.com/watch?v=3cQHi85Nm7s&list=UU55BWOfl2kBEC3aKDC1Diog).
VI. Longer-Term Approaches to Address the Underlying Problem of Family Homelessness

Of course, neither providing nor cutting off access to emergency shelter – as important as emergency shelter is for keeping children safe and with their families – addresses the underlying problem of how to prevent or end homelessness. While it is outside the scope of this report to analyze in detail how to end family homelessness, it is clear that addressing that problem will require additional investments in:

- **permanent housing** that is affordable to the lowest income residents of the Commonwealth, such as state and federal public housing, the federal Housing Choice Voucher Program (Section 8), and the Massachusetts Rental Voucher Program. Currently, long wait lists exist for all of these resources, showing how great the need is in the high-cost Massachusetts housing market;

- **legal services to help families defend against evictions** from both subsidized and private housing, including the Massachusetts Tenancy Preservation Program;

- **homelessness prevention programs** such as the Massachusetts Residential Assistance for Families in Transition (RAFT) program;

- **truly supportive housing** for families headed by a person or persons with a disability or other issues that make it difficult for them to sustain a tenancy without case management support;

- **reform of “priority” systems for deciding who can access subsidized housing** to provide priority to otherwise qualified families who are doubled up in units where they are not the primary tenant and there is overcrowding or other safety issues or where their presence threatens the host’s tenancy. The priority systems should also be reformed so as not to exclude homeless persons who have spent time on the streets in the past five years but understandably cannot document each place they stayed.

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Conclusion

The answer to family homelessness is making more housing available to low-income families and providing supports to help them retain it.

Unless and until homeless families can be provided with the housing they need, the emergency shelter safety net needs to be strengthened and sustained.

As the Massachusetts experience shows, cutting off access to shelter before families have housing, literally, leaves children out in the cold.

For more information, contact: The Massachusetts Law Reform Institute 617-357-0700 (Ruth Bourquin x 333 rbourquin@mlri.org or Liza Hirsch x 321 lhirsch@mlri.org or go to www.mlri.org).
Appendix 1:
Families Allowed Into EA Shelter Only After Staying in Places Not Meant for Human Habitation
By Week Since Sept. 21, 2012:
According to DHCD’s Own Data

<table>
<thead>
<tr>
<th>Week Ending</th>
<th>Number of Families</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/22/13</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>3/15/13</td>
<td>5</td>
<td>At least one family placed on 3/15 had first slept in a car but was not coded as such by DHCD.</td>
</tr>
<tr>
<td>3/8/13</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>3/1/13</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>2/22/13</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>2/15/13</td>
<td>1</td>
<td>not all offices reported – and 2 reported on daily data from 2/13/13 alone</td>
</tr>
<tr>
<td>2/8/13</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>1/25/13</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>1/18/13</td>
<td>4</td>
<td>aggregate data not reported, just cases from Boston and Brockton</td>
</tr>
<tr>
<td>1/11/13</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>1/04/13</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>12/28/12</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>12/21/12</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>12/13/12</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>12/5/12</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>11/30/12</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>11/23/12</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>11/16/12</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>11/7/12</td>
<td>0</td>
<td>0 reported in weekly numbers but 2 reported on 11/5 daily numbers, so 0 is not correct</td>
</tr>
<tr>
<td>11/2/12</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>10/26/12</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>10/19/12</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>10/12/12</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>10/5/12</td>
<td>2</td>
<td>Not all offices reported in weekly data</td>
</tr>
<tr>
<td>9/28/12</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>9/21/12</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>At least 162</strong></td>
<td></td>
</tr>
</tbody>
</table>

Note: These numbers are primarily based on DHCD weekly reports. But as noted, we believe that these numbers are understated because on certain days when the number is listed by DHCD as lower on the weekly reports, the daily reports show there were more during that week, and, in addition, some of the daily reports are understated because we can identify families legal services helped get placed only after they stayed in a place not meant for human habitation that are not reported as such on the daily reports.
February 7, 2013

The Honorable Aaron Gornstein
Massachusetts Department of Housing and Community Development
100 Cambridge Street, Suite 300
Boston, MA 02111
Sent via Email Transmission

Re: Follow Up to DHCD Meeting with Representatives of the Medical Community on January 22, 2013

Dear Undersecretary Gornstein:

We thank you for the opportunity to meet with your staff on January 22, 2013 to discuss our experiences working with homeless families on the front lines. We continue to be deeply concerned about the devastating impact of the current Emergency Assistance (EA) regulations on the health and development of children. While we agree with the need to move families out of motels and appreciate the state’s investments in affordable housing and prevention, we will continue to have concerns unless and until families being denied shelter are immediately placed in housing instead.

The numbers of homeless families reporting to our primary care clinics and emergency rooms have increased dramatically since the new EA regulations went into effect in August 2012, and we have observed no improvement since the amended regulations went into effect on December 7, 2012. At Boston Medical Center, we estimate a 30% increase in the number of homeless families reporting to the hospital with no place to sleep. At Boston Children’s Hospital, we’ve measured a 50% increase in the number of social work hours devoted to managing homelessness crises since August.

The restrictions in the Emergency Assistance regulations have left families in dire straits, sleeping in dangerous and unfit places after having been denied shelter. This is an urgent and serious crisis. With families forced to sleep in cars during these frigid winter temperatures, we are concerned that a young child or infant will freeze to death. Additionally, families are increasingly showing up in our emergency rooms, where children are exposed to the flu and other infectious diseases, and witness to other traumatic scenes such as the entry of stabbing and gunshot victims. The emergency room is designed to handle medical emergencies and is not equipped to host families that have been denied shelter. Additionally, an emergency room visit typically costs the Commonwealth over $1000, just one example of the myriad ways in which denying shelter to families or delaying their access to shelter ends up costing the Commonwealth in other ways.
Other families denied shelter are forced to sleep in overcrowded and stressful double-up situations, bouncing around from place to place and missing school and work, all of which is tremendously destabilizing for a child, often leading to increased behavioral and mental health problems and contributing to developmental delays. Children also absorb the stress of their parents in such situations and are exposed to the arguments that inevitably and frequently occur in double-up situations. The cost of the impact of such unstable, overcrowded, and unhealthy housing environments on children and on society is incalculable.

We strongly urge you to make the following immediate changes to the EA regulations, and the EA system more broadly, in order to protect our homeless children from dire short- and long term health outcomes:

1. Amend the regulations to admit into shelter all families at imminent risk of sleeping in a place not meant for human habitation (meaning they truly have nowhere else to go and are about to sleep in a car, emergency room, etc.). Consider devoting DHCD staff resources to contacting host families to determine whether a family truly has no other options. If, based on these contacts, it appears that a family truly has no place to sleep that night, the family should be placed presumptively pending a DCF assessment to more closely evaluate the family’s double-up options.

2. Although not necessary if you take the step recommended above, at least amend the regulations and Housing Stabilization Notice 2012-06B to provide that if a DCF assessment confirms that a family is particularly vulnerable: for example, has an infant 6 months or younger or a family member with a medical condition or disability, and the family is at imminent risk of staying in a place not meant for human habitation, and the DCF worker is unable to mediate successfully to locate other double-up options, the family will be found eligible for shelter.

3. Create clear standards regarding the irregular housing situation, “chronic couch surfing” provision of the regulations. Amend Housing Stabilization Notice 2012-06B to provide that families who have stayed in three or more housing situations within the past 30 days or have spent one or more nights in a non-EA funded shelter shall be eligible for EA shelter.

4. Reduce the number of times a family must return to the DHCD office with verifications, or to re-apply for shelter. This may be accomplished in part by ensuring that homeless coordinators assist families with obtaining verifications, including accessing applicants’ DTA files to help verify income, assets, immigration status, and Massachusetts residency. Also reduce the hours families and workers have to spend on completing applications by ensuring that homeless coordinators access applications recently completed and ask applicants only to highlight what has changed since the most recent application. Start tracking the number of times families return to the office before being admitted into shelter.

5. Provide homelessness priority for subsidized housing to families in double up situations that are overcrowded or violate the sanitary code. These double up situations put
children’s health at risk, and absent a homelessness priority, these families will have to wait 10 or more years to be placed in their own subsidized unit.

We also want to reiterate concerns about the failure of DHCD Guidance on verification of domestic violence to allow for self-declarations and non-professional third-party statements of domestic violence for both presumptive and final eligibility. We would like to direct your attention to testimony provided at the October 25 hearing and later conversations with Administration representatives about this important issue.

Finally, during our meeting there was discussion by the Department about creating “non-EA” shelter beds. We understand DHCD has contracted with HAP Housing in Western Massachusetts to provide very short term shelter for some for families whose EA eligibility could not promptly be assessed, e.g. those who arrive late in the day on a Friday. We would like to understand more about what plans DHCD might have for creating “non-EA beds” across the Commonwealth. We are in favor of anything that keeps families safe but we think any such system must be transparent, available statewide and readily accessible to those without advocates or connections to providers to make a real dent in the crisis we are seeing due to restrictions on EA access.

We hope you will demonstrate your commitment to meaningful collaboration with the medical community by seriously considering our comments and making concrete changes toward a more effective system that protects vulnerable children from living in circumstances that are inhumane and devastating to their health and wellbeing.

We look forward to receiving your response to our comments.

Sincerely,

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Massachusetts Law Reform Institute

Georgia Katsoulomitis  
Executive Director  
Massachusetts Law Reform Institute

cc:  Arthur Jemison  
     Alana Murphy  
     Ita Mullarkey  
     Deborah Goddard  
     Darrell LeMar
October 25, 2012

Michael Malamut
Department of Housing & Community Development
100 Cambridge Street, Suite 300
Boston, MA 02114

RE: Proposed Regulations for Emergency Assistance Program 760 CMR 67.06

Dear Mr. Malamut:

The Massachusetts Hospital Association, on behalf of its respective members, appreciates the opportunity to comment on the Proposed Regulations for the Emergency Assistance Program. As an organization dedicated to patient care, we realize the critical role readily accessible access to basic human needs, such as shelter, plays in a person’s health. Access to such needs provides residents of the Commonwealth with a better chance of keeping themselves and their families healthy and safe. We commend the Department of Housing and Community Development’s (Department) commitment to providing housing, shelters, and further emergency assistance to low-income children and their families. However, we wish to express our strong concerns with some of the recent changes to your regulations, 760 C.M.R. 67.00 et seq., that were adopted via emergency regulations.

Per the FY2013 budget and as set forth in 760 C.M.R. 67.06, the Department is required to provide shelter to families with children and/or pregnant women who are experiencing homelessness due to either: (1) domestic violence; (2) fire, floor, or natural disaster; (3) certain “no fault” evictions” or (4) those living in places not meant for human habitation or situations that present significant health and safety risks. This last requirement, “those living in places not meant for human habitation or situations that present significant health and safety risks,” has given rise to some unintended consequences and concerns. Based on this requirement, most families must first actually stay in a place not meant for human habitation prior to becoming eligible for a shelter. This mean families, who would have previously been provided with a shelter prior to this change, must now first sleep in cars, vans, parks, beaches, campgrounds, and outdoor porches etc. Hospitals have also seen the effect of this change as droves of families are coming to emergency departments (EDs) to spend the night to satisfy this criterion. None of these options are appropriate or safe places for families, especially those with young children, to have to stay in order to qualify for shelter and other assistance from the state.

While hospitals wish to provide the best care for patients, an ED is not a suitable place for a family to stay. EDs are not equipped to provide necessary food, sleeping, or bathing arrangements for families and remaining in such an environment unnecessarily exposes
individuals to illness. Additionally, EDs are already overcrowded and do not have the room or the staff to manage individuals seeking shelter. Yet, they are forced to manage such families leaving less time for acute and critically ill patients. EDs, with nowhere else to turn, provide hospital beds for these families, leaving less access to care for those in need of emergency medical attention. As a result, the Department’s regulatory change are causing further backups in the emergency department which will only decrease our member’s ability to care for our communities and patients.

If families are in need of medical care, hospitals will admit patients and provide medically necessary care. Once treated, however, these families have nowhere to go. Hospitals have no choice, but to allow them to remain in their beds, again limiting acute level treatment that are needed by others. Ultimately, having families remain in the ED to meet the fourth criteria is not only unfair to those in need of housing, but also to those who come to the ED in need of medical care. Hospitals are being forced to meet the Department’s obligations to provide beds to these families, a situation which limits access to care and is not financially sustainable.

MHA supports any and all efforts to aid survivors of domestic violence (DV) and the expansion of that assistance, but is concerned that the Guidance offered for acceptable verification of DV is vague and may inadvertently inhibit access to survivors. In a number of areas, the guidance is unclear as to the exact requirements necessary to prove evidence of DV. For instance, the Guidance states that a victim can provide a police report to show DV, but does not provide a timeframe for when that report has to have been issued. This lack of clarity has been problematic when, for instance, the Department requests other forms of evidence if the report is more than 10 days old. Clear guidance on the timing of the police report would eliminate this problem. Additionally, we urge the Department to allow for verification that is realistic for those fleeing DV, including those available to most low-income DV survivors such as survivor’s sworn statement and third-party verification from friends, family members, and other non-professionals. Often times, survivors are fleeing rapidly and do not have the time or the resources to obtain some of the more exact requested documentation.

We appreciate this opportunity to comment on the Emergency Regulations. If you have any questions, please do not hesitate to contact me, Anuj Goel, at agoel@mhalink.org or 781-262-6034.

Sincerely,

Anuj K. Goel, Esq.
Vice President, Legal and Regulatory Affairs
The Western Massachusetts Network to End Homelessness
Legislative Priorities for Fiscal Year 2014

Investment and Tax Reform

The Leadership of the Western Massachusetts Network to End Homelessness voted to support Governor Patrick’s investment and tax proposal for Fiscal Year 2014. The investments outlined in Governor Patrick’s plan align with the Network’s priorities to increase access to quality early education and public transportation, two of the most frequently identified barriers to ending homelessness and sustaining permanent housing. We urge the legislature to either adopt the Governor’s progressive tax proposal or to enact an alternative proposal that will generate sufficient revenue to support these critical investments.

Family Homelessness

The Network’s Family Homelessness Committee urges the Legislature to:

- **Protect families from sleeping in places “not meant for human habitation.”** DHCD recently amended regulations have made many families ineligible for shelter unless and until their children have first slept in places “not meant for human habitation.” Western Massachusetts Network partners can attest to how this regulation, as currently applied, is placing some families in unsafe situations. We urge our legislators to either amend this regulation or enact an alternative solution to protect families from this unintended consequence.

- **Provide assistance to 6,057 families statewide and 1,009 families in Western Massachusetts who will face a substantial risk of homelessness when their HomeBASE short-term subsidies expire,** beginning in August, 2013. Right now, these families stand to lose a substantial rent subsidy without having alternative sources of income available. This crisis can be averted with legislative intervention, providing some degree of transitional support when the subsidy terminates.

- **Extend the 32 week limit for utilizing HomeBASE household assistance ($4,000).** This limit was intended to provide incentive for families to move out of shelter; instead, it has created an unintended barrier to exiting shelter since with the loss of this resource, many families have no possibility of entering permanent housing.

Individual Homelessness

The Network’s Individual Services Committee urges the Legislature to:

**Amend Individual Services line item 7004-0102 so that “no shelter shall receive less than a $30 per night minimum unit rate.”** It is well known that the shelters serving individuals across the Commonwealth are funded at very different rates and are not based necessarily on services provided. While DHCD continues to sort through that issue, we think it is vital that the line item be adjusted to the $30 per night minimum rate to help keep the programs safe, at a minimum, as well as to work towards reducing the numbers of individuals who are homeless overall.
Family and Individual Homelessness

The Network urges the Legislature to adopt budget line-item 7004-3045 to allocate $750,000 to the Tenancy Preservation Project. This effective program works with individuals and families who are facing eviction as a result of behavior related to a disability, as well as rental property owners, and the Massachusetts Housing Court Department to prevent homelessness and ensure ongoing housing stability.

Unaccompanied Homeless Youth

The Network’s Work Group for Unaccompanied Homeless Youth urges the legislature to:

- Allocate $500,000 for the work of the Massachusetts Unaccompanied Homeless Youth Commission to determine the scope of need among unaccompanied youth and young adults ages 24 and younger who are experiencing homelessness, and to identify and implement potential models for appropriate service delivery to unaccompanied homeless youth in urban, suburban, and rural areas of the Commonwealth.”

- Adopt An Act Providing Housing and Support Services to Unaccompanied Homeless Youth (House Docket #364, filed by Representative Jim O’Day and Senator Katherine Clark) which will address the critical need for housing and support services geared specifically for unaccompanied homeless youth.

Public Safety and Housing Sex Offenders

The mission of the Work Group for People with Sex Offense Histories is to maximize the safety of the community by minimizing the potential for re-offense through the identification and development of stable, supportive housing options for registered sex offenders who are committed to an offense-free life.

Towards the goal of greater access to housing, stability and community safety, this Work Group urges the legislature to:

- Adopt “An Act relative to the creation of a sex offender management board” (HD782) (sponsored by Representative Kahn): This legislation creates an interagency council that ensures that all of the work with sex offenders within the state of MA is based upon the current research in this field. It moves beyond the “one size fits all approach” to utilize different assessments and treatment protocols for adult sex offenders than for children.

- Adopt “An Act to protect our communities (SD1613), sponsored by Senator Clark. (Representatives Brodeur and Wong filed corresponding legislation, HD 3309, in the House).

This comprehensive legislation will:
  - Empower the Sex Offender Registry Board (SORB) to reclassify offenders on its own initiative or upon written request by a District Attorney or police department.
  - Ensure that the Board has access to all relevant information necessary to determine an offender’s level of risk and clarify what types of incidents are to be reported.
  - Strengthen interagency communication by providing direct access to registry information for agencies responsible for ensuring child safety.
  - Make Level 1 sex offender information publicly available via an in-person request at local police departments.
  - Make information about licensing history of childcare facilities publically available online.
About the Authors

**Ruth Bourquin** has been an attorney at the Massachusetts Law Reform Institute since January 1998, specializing in public benefits law. At MLRI, she represented two low-income mothers with learning disabilities in an action that led to a groundbreaking ruling from the Office for Civil Rights of the U.S. Department of Health and Human Services that state employment and training programs must better accommodate the needs of persons with learning disabilities. In the case of *Smith v. Commissioner of Transitional Assistance*, 431Mass. 638 (2000), Ruth represented a class of more than 12,000 low-income working families wrongly being denied extensions of their time-limited cash assistance benefits. During the various state fiscal crises in the 2000s, she helped forestall cuts to benefits to low-income elders and seniors and children with parents receiving federal disability benefits. Since 2008, she has primarily focused on the needs of families with children experiencing homelessness, engaging in legislative and administrative advocacy, direct representation of hundreds of individual families, litigation, and community education. Before joining MLRI, Ruth served as the Deputy General Counsel of the Massachusetts Committee on Ways and Means, was a partner in a labor and employment law firm, a Massachusetts Assistant Attorney General, an associate at the firm of Sullivan & Cromwell in Washington, DC, counsel for a former death row inmate in Alabama, and a clerk to the Honorable Phyllis Kravitch on the United States Court of Appeals for the Eleventh Circuit. Ruth is a 1982 graduate of Harvard Law School and a 1979 graduate of Franklin College of Indiana. In 2009, Ruth received a Woman of Justice Award from the Women’s Bar Association and the Inspiring Leadership Award from Homes for Families. She is a 2013 recipient of the Massachusetts Bar Association’s Access to Justice Award.

**Liza Hirsch** is a staff attorney with the Massachusetts Law Reform Institute. She is the recipient of a 2011 Skadden Fellowship, awarded to academically outstanding law school graduates. Skadden Fellows are funded to work full time for two years at legal and advocacy organizations that provide legal services to the poor, the elderly, the homeless and the disabled, as well as those deprived of their civil or human rights. At MLRI, Liza provides direct representation to homeless and low-income families who have been denied shelter or terminated from emergency shelter or short-term housing subsidy programs. She assists families in accessing and retaining access to affordable housing, with an emphasis on those who need accommodations for their disabilities. Before joining MLRI, Liza completed the first year of her fellowship at Medical-Legal Partnership | Boston where she represented low-income clients in matters relating to eviction, housing conditions, housing subsidies and reasonable accommodation. She launched a new medical-legal partnership with the Family Medicine Department at Boston Medical Center and was the attorney liaison to Boston Children’s Hospital. During law school, Liza interned with the Housing Unit at Greater Boston Legal Services, interned at the Youth Advocacy Department where she represented youth in juvenile delinquency proceedings, and completed a judicial co-op with the Honorable Jay D. Blitzman, first justice of the Middlesex Juvenile Court. Prior to law school, Liza worked as a Care Coordinator with the Massachusetts Department of Public Health, where she was a founding member of the Rainbow Program, a Medical Home program for children with chronic illness and special health care needs at Boston Children's Hospital. Liza is a graduate of Northeastern University School of Law. She received her B.A. in Psychology from the University of Wisconsin-Madison.