

**FEEDING THE HOMELESS: DOES THE  
PREPARED MEALS PROVISION HELP?**

**REPORT TO CONGRESS ON THE  
PREPARED MEAL PROVISION**

**VOLUME I  
(revised)**

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## EXECUTIVE SUMMARY

The nutritional status of the homeless has been of increasing public concern. To augment the resources of meal providers so they could offer more and better meals for the homeless, Congress passed the Homeless Eligibility Clarification Act--as part of the Omnibus Anti-Drug Act of 1986. The Act enables homeless people to use food stamps to purchase prepared food from authorized providers. It also extends eligibility for food stamps to homeless persons who live at shelters that provide 50 percent or more of their meals. This report presents the results of a Congressionally mandated evaluation of the Act (referred to as the prepared meals provision).

### Evaluation Design

The evaluation was designed to yield detailed interview data on nationally representative samples of both service-using homeless individuals and providers of food and shelter for the homeless in U.S. cities of 100,000 or more. A nationally representative sample of 20 cities was drawn, in which 400 providers were randomly selected--representing soup kitchens, shelters without meals, and shelters with meals. Then, 1800 hundred homeless individuals were systematically selected from among the homeless using the services of the providers in the sample. Final sample sizes were 381 providers and 1704 homeless service users. In addition, a nonrandom sample of 142 persons who had not used meal or shelter services during the week before the interview was identified by asking local providers and police in the 20 sample cities to help locate sites where homeless people congregated--parks, train or bus stations, certain street corners, culverts, or day shelters that did not offer meals--and then interviewing homeless persons at these sites.

In-person interviews were conducted with providers, and with homeless users and nonusers of shelter and meal services. In addition, meal observation was done by the same persons who administered the provider interviews on the occasion of that interview. Finally, telephone interviews were conducted with local food stamp offices in the 20 cities. This data collection took place in March 1987, before the implementation of the provisions in the Homeless Eligibility Clarification Act. Providers authorized under the prepared meal provision were interviewed by telephone in March 1988.

This evaluation is one of only two studies based on nationally representative sample data. It is the only such study to interview individual homeless persons, and the only study ever to collect detailed information from the homeless on their eating patterns and to collect meal observation data. Two limitations should be mentioned. Although nationally representative, the data do not apply to providers or homeless individuals in cities under 100,000 population. And since the in-person interview data for most of the analysis were collected during March 1987, they do not necessarily reflect the situation during other months in the year.

#### First Year of Implementation

The prepared meals provision went into effect on April 1, 1987. As of March 31, 1988, one year later, out of the more than 3000 meal and shelter providers serving the homeless in this country only 40 programs had become

The majority of the authorized providers (32) serve three meals a day. Most of the rest serve breakfast and lunch.

The reason for applying for authorization most often given by the authorized providers was to be able to purchase more food or more nutritious food. Another prominent reason was to let the homeless contribute, have more dignity, and eat in a restaurant-like environment.

The application process was reported as very easy. However, only slightly over half (22) of the providers in fact receive food stamps from their clients. Some are not doing it as a matter of policy (typically because asking some but not others to pay was distasteful or disruptive). Other providers are willing, but their clients will not give up their food stamps in exchange for meals which used to be free or for which others do not pay.

Most authorized providers who charge make payment arrangements on a weekly or monthly basis, restrict them to residents, and stress the voluntary nature of the use of food stamps--and indeed of making a payment at all. Two authorized providers appear to be unique in their approach to using the prepared meals provisions in that they charge by the meal, and meals are not linked to residence in a shelter. They also charge everyone for every meal and require payment (if necessary in the form of work) before the meal is eaten. These are the two providers for which the provision seems to work best for large numbers of people, although factors in addition to their methods of charging may contribute to their ability to use this provision.

#### Providers of Meal and Shelter to the Homeless

As of winter 1987, there were almost 3,000 providers of meals or shelter for the homeless in cities of 100,000 population or over. The vast majority

(88 percent) of these provide some meals. Almost half (47 percent) are shelters that serve their residents at least one meal a day; another 41 percent are soup kitchens. Most meal and shelter providers to the homeless are affiliated with religious organizations.

The majority of providers serving the homeless in 1987 had been established relatively recently. More than 6 out of 10, for example, were less than eight years old; and about 4 out of 10 soup kitchens and shelters with meals were less than four years old. The newer shelters are more likely to house families. The oldest ones typically serve single men.

#### Number of Meals Served

The frequency of service differs substantially between shelters that serve meals and soup kitchens. Over half the shelters that serve meals (54 percent) serve three meals a day, compared with only 3 percent of soup kitchens. Almost three-quarters (72 percent) of soup kitchens serve only one meal a day, compared with only 11 percent of shelters that serve meals. Shelters that serve meals are also much more likely to do so seven days a week than are soup kitchens. Because of the differences in frequency, more than twice as many meals per day are served to the homeless in shelters as in soup kitchens. Shelters and soup kitchens combined serve about 321,000 meals a day to the homeless in cities of 100,000 or more.

#### Sources of Food

Where providers of meals for the homeless get most of their food is an important question for the evaluation of the prepared meals provision, because the law only allows providers to take food stamps in exchange for meals made from purchased food supplies.

Retail and wholesale purchase is a major source of food for about half of these providers. Most (82 percent) purchase some food, and one in four providers rely on purchased food for more than half of the food they serve. However, 18 percent of providers do not purchase any food--all food used comes from USDA commodities, food banks, and donations. Two-thirds of meal providers get some food from USDA commodity programs, with about one-third citing USDA commodities as their first or second largest source of food. However, only 3 percent get more than half of their food from commodities.

Cash income for meal services comes predominantly from individual donations, followed by church contributions and government grants and contracts. Individuals were the most substantial source of cash income for meal services; 38 percent of meal providers received more than half their cash income for meal services from this source, and 59 percent cited individuals as their first or second largest cash source. Cash donations from churches and from government also were significant. Thirty-three percent cited churches as their first or second largest cash source, while 30 percent said the same of government.

The United Way, corporations and foundations contributed money to more than half of these meal providers, but only 5 percent got more than half of their cash from these organizations. Charges to users are a very small item; 84 percent did not have user charges at all.

The average cash cost per meal varied between \$0.36 and \$0.58, with soup kitchens' average being lower than for shelters (\$0.39 vs. \$0.56). And larger providers paid less cash per meal, on average, than smaller providers.

#### Meal Variety and Nutrient Content

Meal variety was assessed by the presence of 10 food groups in the meals served. Five of the food groups are considered the core of an adequate diet

and the other five primarily add variety and caloric content:

<u>Core</u>	<u>Additional</u>
Milk and Milk Products	Fats and Oils
Grain Products	Baked Goods
Fruits and Fruit Juices	Sweets
Vegetables	Sweetened Beverages
Meat and Meat Alternates	Salty Snacks

The meals were observed as served; these are not measures of food actually eaten, however, which should be kept in mind when interpreting the results.

The meals typically available to the homeless, particularly lunch and dinner, provide substantial variety. A majority of lunches and dinners (55 and 51 percent, respectively) contained at least four of the five core food groups, and 8 out of 10 lunches and dinners contained at least one of the additional five food groups. Breakfast was the only meal at which any providers served less than two core food groups, but 28 percent of providers included at least four core food groups even at breakfast.

The meals served were analyzed for the availability of certain nutrients. The average meal provided over 50 percent of the Recommended Dietary Allowance (RDA) for both men and women for 7 of 11 nutrients studied: protein, vitamin C, thiamin, riboflavin, niacin, vitamin A, and phosphorous. Of the other four nutrients, 50 percent or less of the RDA for men and women was provided for three: calcium, vitamin B-6 and magnesium. The final one, iron, was available at 70 percent of the RDA for men, but only 39 percent of the RDA for women. It should be noted that the average American has a low dietary intake of vitamin C, calcium and iron. For vitamin C, however, meals for the homeless appear to be higher than average. The average caloric content per meal was 1023--38 percent of the 2700 calories a day recommended for men and 51 percent of the 2000 a day recommended for women.

### Characteristics of the Service-Using Homeless

About 229,000 homeless persons in cities with population 100,000 or over used meal or shelter services at some time during a 7-day period in March 1987, including 194,000 adults and 35,000 children.

The picture of the homeless that emerges from this nationally representative sample of larger cities confirms the findings from more limited studies.

### Demographic Characteristics

Most of the homeless are male; the majority are nonwhite and between 31 and 50 years of age. They also tend to be homeless for substantial periods (the median for the whole sample was 10 months). Homeless persons who use services are three to four times as likely to be black as the general population or the population in metropolitan areas. They are also slightly more likely to be Hispanic. Almost half (48 percent) have not graduated from high school, compared to 19 percent of all U.S. adults and 43 percent of all adults below the poverty level in 1986.

Of all homeless persons, 77 percent are alone, 15 percent are children, and 8 percent are the adults in the families to which the children belong. Counting parents with children together as a household, and also counting a single homeless adult as a household, parent-children households make up 10 percent of homeless households. Ten percent is considerably lower than some recent estimates. But it is very similar to the 9 percent reported in the only other study of homeless persons that includes a national sample of individuals.

### Meal Service Use

About 40 percent of the service-using homeless population use both soup kitchens and shelters; 29 percent use only soup kitchens; the remainder use only shelters. Those who use only soup kitchens are more likely to be men than the shelter-only group or the group that use both. Finally, those who use only soup kitchens are much less likely to be members of families with children present.

### Economic and Noneconomic Problems

A whole variety of characteristics indicate that service-using homeless are a very vulnerable group, who tend to have both economic and noneconomic problems.

Service-using respondents report very little cash income. The average income per person for the 30 days preceding the interview was \$137. During this same 30-day period 17 percent reported no cash income. The service-using homeless have typically also been without a job for a considerable period of time--almost four years on average, with a median of 20 months.

They also tend to be in relatively poor physical and mental health. A majority (56 percent) reported at least one health problem, including 15 percent with joint problems, 15 percent with high blood pressure, and 10 percent with problems walking. More than a third said their health was fair or poor, compared with 10 percent of the general population ages eighteen to sixty-four.

Mental health problems are prevalent. Almost 20 out of 100 reported a history of mental hospitalization. A similar proportion reported having tried to commit suicide--versus 3 out of 100 for the general population and 7 out of 100 for persons ever diagnosed as suffering from a major psychiatric illness. Finally, on a scale developed by the National Institute of Mental Health to

measure current depression and demoralization, 49 percent had sufficiently high psychological distress to indicate the need for immediate treatment.

Institutionalization experiences also are prevalent. One-third have been patients in a detoxification or alcohol/drug treatment center. Half have spent more than 3 to 4 days in a county jail. One-quarter have served sentences in state or federal prisons. Two-thirds have been in at least one institution, and nearly one-fifth have been institutionalized in three or in all four types of institutions assessed (mental hospital, detoxification or chemical dependency center, county jail, state or federal prison).

#### Eating Patterns of the Service-Using Homeless

As already noted, the meals available to homeless people are of relatively good variety and nutrient content. However, many of the service-using homeless do not eat enough meals often enough to achieve an adequate diet.

Most homeless people, for example, do not eat three meals a day, although 3 out of 5 eat two or more meals a day. The average number of meals eaten daily was 1.9, compared to 3 or more meals a day for the average American. Homeless people also go whole days without food. Thirty-six percent reported that they go one day or more per week without eating anything. One in 6 said they go two days or more without eating as often as once a week; 1 in 8 said they go two days or more without eating once or twice a month.

Not only do the homeless in this study eat relatively infrequently, their diets also lack certain core foods. Calculations based on descriptions of what homeless people said they ate the day before the interview reveal that 65 percent had not consumed any milk or milk products during that day, 43 percent had eaten no fruits or vegetables, 30 percent had eaten no grain products, and 20 percent had eaten no meat or meat alternates such as dried beans, peas and peanut butter.

How Individuals Compare with Families among the Service-Using Homeless Population

Three-quarters of the homeless who use soup kitchens and shelters are single persons who are by themselves. The remaining 23 percent are in families--8 percent of them adults, 15 percent the children who are with them. (This says nothing about how many biological children homeless persons have. The survey did not collect that information.) The survey did not interview the children in homeless families or ask the adults questions about the children who were with them. But information on the adults in the families can tell us quite a bit about the probable environment of the children.

The vast majority of adults with children are women (88 percent). Compared to homeless adults who are alone, they are more likely to be nonwhite and currently married. And they have been homeless on average for much shorter periods of time.

Adults in homeless families who use shelters or soup kitchens are just as unlikely as singles to have worked recently, but more likely to be current recipients of welfare. They also receive more cash income--usually from welfare. Their physical and mental health is better, and they are much less likely to have been in a mental hospital, jail, or prison.

Adults in homeless families also eat somewhat more often each day, are less likely to have gone for whole days without food, and are more likely to report their diet as satisfactory. Even homeless adults in families, however, have a relatively inadequate diet compared to the average American; not much more than one-third have diets that contain four or all five of the core food groups on average. Further, their satisfaction with their diet and perceptions of diet are lower, they eat fewer meals each day, and they go more days per week without anything to eat.

On one important dimension, however, homeless adults with children are no better off than their counterparts who are alone. Their scores on the scale of depression and demoralization are just as high--an indication that being homeless is an extremely difficult circumstance to deal with irrespective of one's general mental or psychological health.

#### How Service-Users Compare with Non-Service-Users

The sample of non-service-using homeless, as noted, is small and not representative in a strict statistical sense. However, the picture it paints is clear. A whole variety of comparisons made possible by the survey indicate that the homeless who do not use services have even more problems than those who do. (No families were encountered in this sample, indicating that very few of the non-service using homeless are in families.)

The homeless who do not use services reported being homeless longer, having been without a steady job longer, and having made less use of public benefits.

They reported being less healthy and having more mental problems. They also eat less, and eat less frequently. The homeless who do not use services also have poorer eating patterns than other homeless on every measure of dietary intake. They rely much more heavily on trash and handouts as sources of food. They average only slightly over one meal per day, and they are much more likely to go one or more days without eating in a week.

Finally, they are less likely to report getting enough to eat, and quite unlikely to get what they want to eat. More nonusers than users describe the quality of their diet as fair or poor; nonusers are less likely to have eaten foods in the five core food groups.

### Food Stamp Access by the Service-Using Homeless

Virtually all service-using homeless individuals and families have low enough gross incomes and few enough assets to qualify for food stamps. Nevertheless, only 18 percent were receiving food stamps at the time of the interview, more than half of whom had been doing so for less than a year. Another 41 percent had done so at some time in the past, and a further 8 percent had applied for food stamps but not received them. One-third of the sample, therefore, had never been in contact with the food stamp program. A considerably higher proportion of families (50 percent) than of individuals alone (15 percent) were currently receiving food stamps.

Of the one-third who had never been in contact with the food stamp program the most common reasons were thinking they were not eligible, having no mailing address, and not knowing where or how to apply. A number of personal characteristics of the service-using homeless increased the likelihood that they were getting food stamps at the time of the interview, including receiving income maintenance, having a mailing address, being a member of a minority group, and having a history of treatment for chemical dependency. Most of these characteristics plausibly reflect contact with the social service system.

Most of the local food stamp offices in the 20 sample cities reported problems with determining eligibility for the homeless, typically because documentation provided by the applicants was inadequate. All except one said they provided expedited service to at least a proportion of their homeless applicants. Once eligibility had been determined, issuance presented less of a problem, with 12 of the 20 reporting no issuance problems.

### Service-Provider Reactions to the Prepared Meals Provision

Detailed questions asked of service providers just before implementation of the prepared meals provision give some insight into why the provision had so little effect.

Almost 6 out of 10 providers said they were not interested in applying for authorization. More than half of these gave as a major reason a philosophical or moral commitment to making food available at no charge. Other major reasons given included a policy of not accepting any government funds, a desire to avoid the paperwork and "hassle" associated with obtaining authorization and actually running the program, and the perception that their facilities were ineligible to take advantage of the provision--either because they were facilities supported by local government agencies (mistaken) or because all of the food served by the agency was donated (correct). Reasons cited by those persons interested or potentially interested in applying were improved service and more resources for the facility.

Provider suggestions of ways to make the prepared meals provision work included promoting availability of the provision to both providers and food stamp recipients; giving food stamps directly to the provider so the provider could manage the food stamps and have additional resources; and allowing restaurants to accept food stamps. Several modifications of the provision were also proposed, including having two separate systems for homeless and nonhomeless (such as vouchers for the homeless and food stamps for the nonhomeless), or issuing a meal ticket which could be punched by the provider after each meal. Another suggestion involved issuing a special type of food stamps that would be worth their face value at grocery stores but double their face value at prepared meal providers. Providers thought this would encourage people to use these special food stamps to consume nutritious meals at provider sites rather than selling them for cash.

FEEDING THE HOMELESS: DOES THE PREPARED MEALS  
PROVISION HELP?

1. POLICY CONTEXT AND DESIGN OF THE EVALUATION

The well-being of the homeless, including their nutritional status, has been of increasing public concern. The major federal program designed to improve the nutrition of low-income Americans is the Food Stamp Program, which provides coupons that can be used to purchase food. Food stamp recipients typically purchase food for home preparation and use. Since homeless people generally lack access to storage and cooking facilities, food stamps could be of limited help to them.

In order to address this issue and to improve the nutrition of homeless individuals through the Food Stamp Program, Congress in 1986 passed the Homeless Eligibility Clarification Act (Public Law 99-570, Title XI, Subtitle A). The general purpose of this legislation was to fine tune the Food Stamp Program to facilitate participation by the homeless. More specifically, this legislation allows individuals who do not have a permanent dwelling place or mailing address to exchange food stamps for meals prepared by non-profit organizations that feed the homeless.<sup>1</sup> Sponsors of the legislation intended it to increase the resources of meal providers so they could offer more and better meals for the homeless (Congressional Record -- Senate, October 6, 1986, S15247-50). The

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1. For text of the legislation and the regulations governing purchase of prepared meals by homeless food stamp recipients, see Part 2, Section A, Supplementary Statistics and Methodological Documentation, Volume II of this Report to Congress on the Prepared Meals Provision (September 1988).

Act also expands Food Stamp Program eligibility, making homeless persons who live at shelters that provide 50 percent or more of their meals newly eligible for food stamps.

In order to assess the extent to which the prepared meals provision achieved its goals, this study had the following objectives:

To describe operations and procedures of service agencies providing meals for the homeless;

To describe the meal services available in the meal provider community;

To describe characteristics of the homeless population;

To describe eating patterns of the homeless;

To describe Food Stamp Program participation by homeless persons, and local office practices for issuing food stamps to the homeless;

To assess provider and recipient perceptions of the prepared meal provision;

To assess provider patterns of participation under the prepared meals provision, and the exchange of food stamps for prepared meals by homeless persons.

The sample design and data collection strategies developed to achieve these objectives are described below. It is important to note first, however, that the prepared meals provision was not the only legislative initiative in the 1980s designed to improve the nutrition of the nation's poor. The objectives of the prepared meals provision, and the results of the evaluation of it, must be interpreted in light of the other food assistance legislation implemented in the 1980s.

#### Recent Food Assistance Initiatives in Addition to the Prepared Meals Provision

The first major initiatives of the 1980s were two new food assistance programs implemented in the environment of the 1981-83 recession. One was the

Emergency Food and Shelter Program (EFSP), which was a direct response to the recession. The EFSP has disbursed \$489 million in food and shelter assistance through six waves of funding. During its first five waves, these funds supplied 318 million meals and 88 million nights of shelter. The other new initiative of the early 1980s was the Temporary Emergency Food Assistance Program (TEFAP). First created by executive order in December 1981 and subsequently authorized by P.L. 98-8 in 1983, TEFAP distributes surplus commodities to low-income households.

Although evaluations of these programs indicate that they do meet the goals set for them (Food and Nutrition Service, 1987; Burt and Burbridge, 1985), neither program is directed to the special needs of the homeless. The Emergency Food and Shelter Program provides a very large proportion of its meals in the form of food bags or food vouchers, rather than prepared meals served in the soup kitchens and shelters frequented by the homeless (Bailey, personal communications, 1987).

TEFAP provides surplus commodities such as cheese, butter, non-fat dry milk, rice, flour, honey and cornmeal, packaged in 1-5 pound quantities for home use. A recent evaluation of TEFAP (Food and Nutrition Service, 1987) indicates that less than one-tenth of one percent of TEFAP recipients are homeless. Even though most homeless individuals would meet TEFAP income eligibility requirements, the benefit, food products for home use, limits its usefulness for the homeless.

A Congressional action more directly focused on the needs of the homeless was the Food Security Act of 1985, which stipulated that food stamp agencies "shall provide a method of certifying and issuing coupons to eligible households that do not reside in permanent dwellings or who do not have fixed mailing addresses." Passage of this Act in fact followed three separate efforts by

the USDA between November 1983 and December 1984 to ensure that State agencies were complying with program regulations concerning the homeless. in particular

and had not been necessary since 1971. In response to the third directive on this matter in December 1984, all regions submitted letters confirming that states were in compliance.

The final major Congressional action on food assistance, containing provisions both to assist the homeless and to prevent homelessness, was passed after the prepared meals provision. This was the Stewart B. McKinney Homeless Assistance Act of 1987 (P.L. 100-77). Changes to assist those already homeless to obtain food stamps included authorization to: conduct outreach programs targeted to the homeless; expand expedited service to enable homeless individuals to receive food stamps within 5 days; and exclude from household income for the purposes of determining eligibility and benefit amount third-party payments for temporary housing if the housing lacks meal preparation facilities. This last provision allows individuals temporarily residing in "welfare hotels" to receive a food stamp allotment that is higher than if the third-party shelter payment had been counted as food stamp income. Changes designed to prevent homelessness included increasing the ceiling on the excess shelter cost deduction in order to increase food stamp eligibility for persons paying very high shelter costs; and, in certain doubling-up situations, allowing subhouseholds who purchase food and prepare meals separately to be treated as separate house-

(as well as the extension of Food Stamp Program eligibility to shelter residents receiving 50 percent or more of their meals) have improved access of the homeless to food stamps after March 31, 1987, the evaluation findings reported here will understate food stamp participation among the homeless and possibly their nutritional status.

### The Evaluation Design

The evaluation was designed to yield detailed interview data on nationally representative samples of both service-using homeless individuals and providers of food and shelter for the homeless in U.S. cities of 100,000 or more.

Sample Selection. The sample selection process involved three stages.<sup>2</sup> First we selected 20 cities from among all U.S. cities of 100,000 or more.<sup>3</sup> Then we selected 400 providers, representing soup kitchens, shelters without meals, and shelters serving meals, from among all providers in our 20 cities. Extensive efforts were made to develop complete lists of all food and shelter providers in each city before making these selections. Finally, we systematically selected 1800 homeless individuals from among the homeless who used the

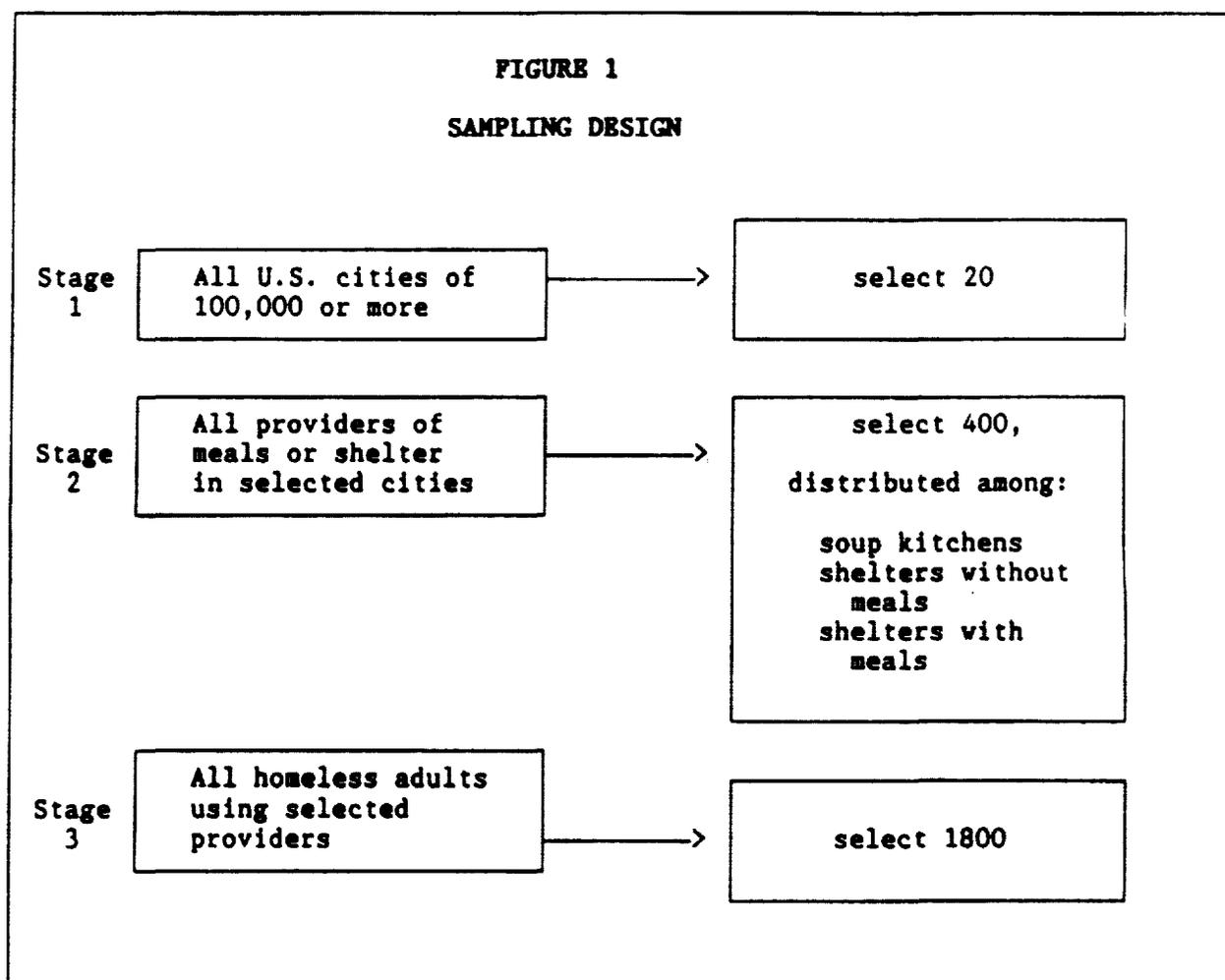
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2. For sampling and weighting methods, see Part 2, Section B of Supplementary Statistics and Methodological Documentation, in Volume II of this Report to Congress on the Prepared Meals Provision (September 1988).

3. The cities were: New York, Los Angeles, Philadelphia, Chicago, Detroit, Houston, Atlanta, Birmingham AL, Cleveland, Memphis, New Orleans, Pittsburgh, San Jose, St. Louis, Seattle, Bridgeport CT, Madison WI, Reno NV, Waco TX and Winston-Salem NC. In New York City, the boroughs of Manhattan and Queens were randomly selected as the locations of the study effort.

services offered by our sampled providers. Final sample sizes were 381 providers and 1704 homeless service users. Figure 1 presents the design graphically.

Providers were identified as facilities operating in March 1987 in cities of 100,000 inhabitants or more that provided shelter to a minimum of 10 homeless adults or at least one meal to a minimum of 15 adults (homeless or not). This definition includes soup kitchens, shelters for the homeless with and without meal service, battered women's shelters, single room occupancy hotels that accepted general assistance vouchers, and welfare hotels that housed homeless ADFC households through a voucher system.



Homeless persons were defined as those who did not rent or own a room, apartment, or house but rather resided in a shelter, welfare or voucher hotel, vehicle, abandoned building, or public place. Individuals who did not have a regular arrangement to stay in a room, apartment or house for more than twice a week were also considered homeless. This definition includes persons who reported having a home which turned out to be a shelter, a particular bench at the local bus station, or some similar situation. It excludes persons who occasionally use a shelter (including persons who did so on the day of our interview but have a regular arrangement to stay in a relative's apartment or house, or a house or apartment of their own). It also excludes persons who used their own money to rent a room at a single room occupancy voucher hotel for the last few days, even if they also had periods of homelessness during which they used vouchers.

Congregating Site Sample. Because homeless persons not using meal and shelter services might differ in important respects from their service-using counterparts, we also felt it important to have a sample of non-service-using homeless persons from the same cities included in the other data collection. Time and budget constraints did not permit the drawing of a random sample, and therefore no statistically rigorous comparisons can be made. The qualitative comparisons are nonetheless informative.

A nonrandom sample of 142 persons was identified by asking local providers and police in the 20 sampled cities to help locate sites where homeless persons congregated -- such as parks, bus or train stations, certain street corners or alleys, culverts and other parts of the highway system, or day shelters that did not offer meals. In order to ensure that they were a non-service-using group, persons were not included in the sample if they had used either a shelter or a soup kitchen within the last seven days.

Data Collection. The evaluation used in-person interviews, meal observations, and telephone interviews, to obtain the necessary data.<sup>4</sup>

In-person interviews were conducted with the provider sample and the service-using and congregating site samples of homeless individuals. The provider interview lasted 60 minutes on average, covering the nature and scope of services offered, with particular emphasis on food. The interview with the homeless lasted an average of 15 minutes. Respondents were paid \$5.00 for their time. Approximately half of the standardized protocol was devoted to descriptions of the homeless respondent's eating patterns; the remainder asked for standard socioeconomic and demographic information and information about the conditions of their homelessness.

The meals observation was done by the same persons who interviewed the providers on the occasion of the provider interview. They noted the meals available, the food items, and the portion sizes, all in sufficient detail to permit nutritional analysis of the meals served.

Telephone interviews were conducted with local food stamp offices and providers authorized to accept food stamps for prepared meals. The local office interview was administered in the 20 sample evaluation cities. It consisted of a semi-structured protocol covering certification and issuance procedures for homeless applicants, available data on homeless recipients, and any activities aimed at assisting homeless applicants for food stamps. All of these data were collected in March 1987, before the prepared meals provision

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4. For the study instruments, see Part 2, Section C of Supplementary Statistics and Methodological Documentation, in Volume II of this Report to Congress on the Prepared Meals Provision (September 1988).

took effect, as well as before Food Stamp Program eligibility was extended to homeless individuals residing in shelters providing 50 percent or more of their meals per day.

The authorized provider interview was administered one year later, in March 1988, to all providers who became authorized under the provision. It consisted of semi-structured questions about their experiences with the prepared meals provision.<sup>5</sup>

#### Distinctive Features of the Evaluation

The evaluation reported here is one of only two studies that are based on nationally representative sample data. Other studies of the homeless are restricted to local areas and typically do not use scientific sampling methods. The only other nationally representative study, done by the Department of Housing and Urban Development (HUD), is more limited than the prepared meals provision evaluation because it sampled only shelters, and because it did not interview individual homeless persons. Thus, it relies on provider data for its assessment of the characteristics of the homeless. It also excluded soup kitchens, preventing any assessment of the characteristics of homeless individuals who do not use shelters. On the other hand this evaluation is more limited than the HUD study in one respect. It is less suitable for nationwide estimates in that sampling was limited to cities of 100,000 or larger, whereas the HUD study includes metropolitan areas as small as 50,000 and includes providers outside the city limits of those areas.

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5. For a set of detailed statistics compiled from the evaluation data base, see Part 1 of Supplementary Statistics and Methodological Documentation, in Volume II of this Report to Congress on the Prepared Meals Provision (September 1988).

One particular strength of the evaluation reported here is the detailed information collected from homeless persons on their eating patterns. Four other studies have asked one or at most two questions about eating (usually how often they eat per day). But no other study has tried in such a systematic manner to get all the foods eaten on the previous day, eating patterns over a whole week, or sources of food.

Even the current evaluation, however, did not attempt to collect the level of nutritional detail that is available for other populations, because of the particular difficulties of interviewing the homeless, which are exacerbated in the case of such a personal activity as eating. The homeless may be more difficult than other populations to interview; some of them have very limited attention spans and other communication difficulties; in addition, soup kitchens and shelters are not ideal environments for interviews.

In order to minimize the effect of these problems -- and maximize the response rate -- the overall interview time was set at 15 minutes, half of which focused on eating patterns and food intake. This did not allow sufficient time to examine refined measures of quantity or quality. The number of servings consumed on the previous day was used as a gross indicator of quantity. The presence of different food groups in the previous day's diet was used as a gross indicator of dietary variety.

A final limitation should also be mentioned. The in-person interview data on which most of the analysis is based were collected at a single point in time, March 1987. It is possible that data collected at other points in the year might produce somewhat different results.

## 2. EXPERIENCE WITH THE PREPARED MEALS PROVISION: FIRST YEAR OF IMPLEMENTATION

The prepared meals provision went into effect on April 1, 1987. As of March 31, 1988, one year later, out of the more than 3000 meal and shelter providers serving the homeless in this country only 40 programs had become authorized (one of which has subsequently withdrawn), and 1 application was pending.<sup>6</sup> This is an authorization rate of less than 2 percent. It raises the question of why so few providers were interested in becoming authorized under the prepared meals provision. Although this issue is dealt with further in Section 6 of this report, the most important aspects of the provisions that hindered acceptance can be described briefly here. Most meals for the homeless are offered free, yet for the provisions to work, providers must charge for meals. Many providers did not want to change their practice of offering free meals. Second, many providers rely on donated foods for a substantial proportion of the food they serve, but the prepared meals provision only allows providers to charge in food stamps for the cash outlays for purchased food. Providers with relatively small cash budgets for food may not have felt the provisions would help them very much. Third, providers may believe that their clients need their food stamps, and use soup kitchen and shelter meal services to supplement what they can buy with stamps. These providers may be reluctant to ask clients for food stamps when they are aware of their clients' limited resources.

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6. For the list of authorized providers see Part 2, Section D of Supplementary Statistics and Methodological Documentation, in Volume II of this Report to Congress on the Prepared Meals Provision (September 1988).

### Characteristics of Authorized Providers

This section of the report describes the characteristics of the few providers that did obtain authorization under the provision, and their experience during the first year of its operation. The description that follows is based on information gathered through telephone interviews in March 1988, not on in-person interviews or observations of meals served. Most authorized providers are not part of the earlier systematic sample of 381 providers interviewed in our 20 sampled cities in March 1987.

Of the 40 authorized providers, all but 2 are shelters. Of the remaining two, one is a low-cost nonprofit restaurant and the other a soup kitchen.

Of the 38 shelters, over half (21) only serve residents. Of the other 17 who serve their own residents plus other persons from the community, 10 serve regular meals open to the community at large. Five serve a few additional people on an occasional or periodic basis (e.g., at the end of the month). The remaining 2 only serve nonresidents if they participate in other programs run by the same agency.

The number of residents served per meal at the shelters cover a wide range, from 3 to 220, with a mean of 47. In those shelters that also serve nonresidents, the number of nonresidents per meal also varies substantially, from 2 to 60, with a mean of 30. The only two authorized providers that are not shelters have meal programs that are as large as those of the largest shelters. The single soup kitchen serves an estimated 240 persons per meal; the nonprofit restaurant serves 250-300 meals a day to approximately 175-200 individuals.

The majority of the authorized providers (32 of the 40) serve three meals a day. Most of the rest (5) serve only breakfast and lunch. Two serve only one meal. One (a battered women's shelter) permits residents to prepare meals when they want them.

Reason for Applying

Authorized providers most often said they applied because they wanted to be able to purchase larger quantities of food and more nutritious food (30 of the 37 providers that gave reasons - Table 1). The next most frequently given reason (14 providers) was that they wanted to let people contribute, let them have more dignity, or create an environment similar to a regular restaurant. Six providers saw the provision as a way to stimulate residents to apply for food stamps, so they would have that resource once they left the program. Three providers thought that food stamps would help them extend their service - either to serve more people at their current location or to extend meal service to locations that did not have it.

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TABLE 1

REASONS FOR APPLYING FOR AUTHORIZATION  
(N=37)

<u>Reason for Applying</u>	<u>Number of Providers</u>
To obtain extra funds to purchase food	30
To allow people to contribute	14
To help people become eligible for food stamps	6
To expand food service to other sites	3
Other reason	4

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Note: Providers often gave more than one response. In 3 cases, the respondent had not participated in the application process and could not answer the question.

The Application Process

With few exceptions, the authorized providers found the application process itself very easy. Three-quarters (29 providers) described it as simple, quick, without problems, and eased by helpful staff at the local Food and Nutrition Service office. Another 8 reported minor difficulties, all of which

were eventually resolved. Only 3 found the forms complex and the process long. One provider had problems with the local welfare department, which did not want to sign off on the application.

#### Provider Use of the Provision

Despite being authorized to accept food stamps in exchange for prepared meals, not all of the authorized providers currently do so. Just over half of the authorized providers (22 providers) have clients who receive food stamps, and at least some of these clients exchange their food stamps for prepared meals. Another ten authorized providers have clients who receive food stamps, but none of these clients are willing to exchange their food stamps for meals from the facility, although they continue to eat there. Five authorized providers currently do not have any clients who receive food stamps. And three could not say whether their clients received food stamps or not.

Even in the case of providers who currently do receive some food stamps from their clients, by no means all food stamp recipients were willing to exchange food stamps for prepared meals (Table 2). At the high end of the range, 41 percent of the providers who receive food stamps from any clients receive them from practically all (90-100 percent) of those who have food stamps. At the low end, one-third receive food stamps from one-third or fewer of their clients who have food stamps. The actual number of homeless people who are using food stamps in exchange for prepared meals under the provision totals only 262 per day, about 10 percent of the clients at authorized facilities. It is also noteworthy that 3 providers account for two-thirds of this total--serving approximately 75, 60, and 35 clients per day who pay with food stamps.

TABLE 2

EXCHANGE OF FOOD STAMPS FOR PREPARED MEALS  
AT AUTHORIZED PROVIDERS WHO RECEIVE ANY FOOD STAMPS

<u>Percent Giving Food Stamps, of Food Stamp Recipients</u>	<u>Percent of Providers</u>		<u>Total Number of Clients Giving Food Stamps</u>
	<u>Who Receive Any Food Stamps (N = 22)</u>	<u>All Author- ized Providers (N = 40)</u>	
90-100%	41	23	205
50-89%	27	15	43
34-49%	0	0	0
10-33%	32	17	14
	100%	55%	262

Among those who have become authorized, some are not currently collecting food stamps as a matter of policy (8 providers), others (10 providers) are willing but their clients are not. Providers who have not activated the program or who have dropped it were asked for their experiences with the provision. Representative responses included:

- o We tried it for three weeks, but it didn't work, We couldn't keep track of who was eligible, some people couldn't qualify, and some people spent their food stamps elsewhere.
- o We didn't realize that we would have to make some pay and some not, so we're not using the program.
- o Our residents stay too short a time to get them certified for food stamps.
- o We had started asking for \$1 per meal in food stamps from those who had them, but it caused disruptions because some had to pay while others didn't. So we stopped the program until there is some uniform policy.

### Reporting Requirements

The reporting requirements are clearly not a major reason why the provision is so little used. Of the providers who are still collecting food stamps in exchange for prepared meals, all but one stated that the reporting requirements are minimal. A staff person fills out a card once a month, recording the dollar value of food stamps redeemed at retail food stores, and sends it to the Food and Nutrition Service. The process takes about 15 minutes.

The exception is the single nonprofit restaurant among the authorized providers. Its situation is somewhat more complicated and time-consuming; but it is also one of the two providers where the provision seems to work for large numbers of clients. This provider serves 250-300 meals a day, all of which are paid for either in cash, food stamps, or work exchange. It accepts food stamps from the elderly under one program, and from the homeless under the prepared meals provision. It exchanges the food stamps from the elderly at a bank, for cash. It exchanges the food stamps from the homeless at retail and wholesale food suppliers. Thus it must keep cash separate from food stamps, and food stamps from the elderly separate from those given by the homeless. The process takes an undetermined amount of time for the cashier, about 20-30 minutes a day for the Director, who sorts out the till at the end of each day, and about 16 hours a month for the bookkeeper (combined time for both of the food stamp operations).

One provider has just started collecting food stamps and no information is yet available. It is likely that this final provider will find the reporting requirement more similar to that of the nonprofit restaurant than to that of the other authorized shelters, since it also has a cashier and deals with both cash and food stamps.

The factors that differentiate the reporting experiences of the nonprofit restaurant from those of other authorized providers appear to be three: 1) receipt of both cash and food stamps; 2) collection on a per meal or per day basis; and 3) many clients paying with food stamps (an average of 75 people per day, for 1 or 2 meals each).

#### Informing Clients and Establishing Charges

As noted, only just over half the authorized providers (22 out of 40) actually receive food stamps from any clients in exchange for prepared meals one year after the provision took effect. The approaches of authorized providers to informing clients about the possibility of using food stamps to purchase meals and to setting meal charges are enlightening in what they tell us about conditions under which the provision seems to work on a per meal basis.

Informing Clients. Thirteen providers either no longer tell their residents about the possibility of using food stamps in exchange for prepared meals, never did so, or have not yet done so. Some prefer that their clients begin receiving food stamps and save them for when they leave. Others once informed clients, but have decided that they could not successfully administer the program with some people paying and some people not paying. The ones who indicate they have "not yet" told their residents are only recently authorized, and have not yet decided how they want to set up their program.

Another 10 providers do inform some clients, but have no systematic method of informing all clients. Some post signs, which they believe are ignored. Some only tell those clients about getting on the food stamp rolls if they ask for information. Some tell only those clients they perceive to be eligible for food stamps.



The typical method of setting the charge for residents is to divide the yearly food budget for purchased foods by the number of meals served per year. The local welfare department or food stamp office set the amount in several cases. One provider reports charging "what it would cost if it were all purchased." One asks clients for an unspecified contribution "because most of the food is donated." Nonresidents who eat meals at the provider's establishment are rarely asked to pay anything.

The emphasis at all providers is on the voluntary nature of the use of food stamps. Most providers in fact quote the cost of the meal only to food stamp recipients, so that in effect only food stamp recipients are asked to pay. No one is ever turned away for not paying, although three providers require work exchange for those who cannot pay either in cash or in food stamps. All three of the providers requiring work exchange were doing so before they became authorized under the prepared meals provision.

### Two Unique Experiences

Two authorized providers appear to be unique in their approach to using the prepared meals provision, in that they charge by the meal and meals are not linked to residence in a shelter. Brief descriptions of each suggest circumstances under which the provision can work for relatively large numbers of people.

Sisters of the Road Cafe in Portland, Oregon, a nonprofit, low-cost restaurant, has been operating since 1979. Staff from the cafe reported having initiated the idea of the prepared meals provision, and worked for passage of the legislation. Sisters, as it is known locally, applied as soon as the legislation passed and has been operating as an authorized provider since April 1, 1987. Sisters serves between 250-300 meals daily to approximately 175-200

people. About 75 homeless people pay each day with food stamps, as do an additional unknown number of elderly homed individuals.

Sisters is open from 6 a.m. to 1 p.m. It serves exclusively a breakfast menu, with 5 different meal choices. Each meal costs \$1.00, payable in either cash or food stamps. People with neither arrange for work exchange, and do the work before eating. Before the provision, meal charges were \$1.25; they were reduced to an even dollar amount to make it easier to pay with food stamps.

At present, 82 percent of Sisters' operating revenues come from meal charges -- 53 percent from cash, 20 percent from food stamps, and 9 percent from vouchers that local service agencies buy from the cafe and give to their clients. The remainder comes from United Way, foundations, and other donations. Staff expect the food stamp revenue to increase in future years, since the program was new in the budget cycle underway during the evaluation period. Staff say that increasing numbers of their clients have been paying with food stamps in the period since they started accepting food stamps from the homeless --both because increasing numbers are applying for food stamps and because increasing numbers of recipients are using them at the cafe.

The Open Door Mission in Houston, Texas, has served the homeless for 35 years. It has been operating as an authorized provider under the prepared meals provision only since March 1988 and only in its snack bar. Although the Mission had only one month's experience with the provision at the time of the interview, staff say the provision works well in their snack bar.

The mission houses 110 single men and serves meals to all residents plus 20-30 nonresidents a day. The Mission serves its residents three meals a day at no cost in its dining hall. The snack bar where the prepared meals provision operates is open all day. Before the provision, anyone could purchase food from the snack bar with cash; now they can also use food stamps. To ac-

commodate the provision, the snack bar changed both the prices and meal portions. Either the price went down to an even dollar amount and the portion size decreased accordingly, or the price and portion size both went up. Someone paying cash gets an open-faced sandwich for \$1.25, for example; someone paying with food stamps gets the same sandwich plus potato salad and pickles for \$2.00.

Mission staff estimate that about one-fourth of their residents have food stamps, and that about half of these use their stamps at the snack bar. Data are only available for the first month of experience under the prepared meals provision. During that month, the snack bar served 75-80 meals a week paid for with food stamps representing between 10 and 20 percent of snack bar business. It is not possible to know whether the first month's experience will be typical, or whether more residents will become food stamp recipients, more food stamp participants will use their stamps at the snack bar, or both.

Both Sisters of the Road Cafe and the Open Door Mission Snack Bar use a sign to inform customers that they can use food stamps to pay for their meal. In both instances the sign works. The circumstances of these two providers are very informative. When everyone is charged for meals on a per-meal basis, it is relatively easy to incorporate the use of food stamps in exchange for prepared meals. Other factors that we did not examine may, of course, also affect the ability of these providers to use the prepared meals provision. It should also be noted that we did not observe any of the meals served and therefore cannot assess their quality.

Since less than 2 percent of the providers of prepared meals have sought to become authorized providers, and since only slightly over half of these (22 out of 40) in fact receive food stamps from clients in exchange for meals, it

is clear that the provision is not effective. The information we collected in the provider interviews indicates that at least a good part of the reason lies in the characteristics of the institutions that provide meals for the homeless. The next section of the report discusses these characteristics.

### 3. THE PROVIDERS OF MEALS AND SHELTER TO THE HOMELESS AND THEIR SOURCES OF FOOD

The providers of meals and shelter to the homeless fall into three groups: shelters that serve meals, shelters that do not serve meals, and soup kitchens. This section presents the evaluation findings with respect to the characteristics of these providers, including their affiliation and size, services offered, and sources of the food used for meal services. Before the results are presented, it is important to remind the reader that the evaluation data are based on a survey of providers in U.S. cities of 100,000 population or over. Twenty-five percent of the U.S. population lives in these cities, which also have the highest rates of homelessness.<sup>7</sup> The sample is nationally representative and can therefore be generalized to the universe of U.S. cities of that size. It cannot be generalized directly, however, to the whole universe of providers of food and shelter for the homeless -- a limitation that should be borne in mind when interpreting the results.

#### Types and Sizes of Providers

As of winter 1987, our estimates indicate that there were almost 3,000 providers of meals and/or shelter for the homeless in cities of 100,000 population or over. Our analysis divides them into three types: shelters with meals, shelters without meals, and soup kitchens.

The vast majority of providers of food or shelter to the homeless (88 percent) do provide some meals. Almost half (47 percent) are shelters that serve their residents at least one meal a day. Another 41 percent are soup

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7. The HUD study estimated that 75 percent of the homeless lived in metropolitan areas, a somewhat broader geographic area than the cities in our sample.

kitchens. Only 12 percent are shelters that do not serve meals.

Table 3 shows the relative importance of different types of providers. As

**TABLE 3**  
**SUBTYPES OF PROVIDERS, WITHIN MAJOR PROVIDER GROUPINGS**  
**NUMBER AND PERCENTAGE, SAMPLE DATA**  
 (weighted data)

<u>Provider Type</u>	<u>Number in Category</u>	<u>Percent of Category</u>	<u>Percent of Provider Sample</u>
<u>Soup Kitchens</u>			
Church-affiliated	615	53	21
Shelter-affiliated	390	33	14
Other	159	14	6
	<u>1164</u>	<u>100</u>	<u>41</u>
<u>Shelters Without Meals</u>			
Welfare Hotels	41	12	1
Voucher Hotels	12	3	- <sup>a</sup>
Missions	104	30	3
Temporary	191	55	7
	<u>348</u>	<u>100</u>	<u>12</u>
<u>Shelters With Meals</u>			
Missions	446	33	16
Family	230	17	8
Temporary	459	34	16
Battered Women's Programs	57	4	2
Other	164	12	6
	<u>1356</u>	<u>100</u>	<u>47<sup>b</sup></u>
<b>TOTALS:</b>	<b>2869</b>	<b>--</b>	<b>100</b>

<sup>a</sup> Less than 1 percent.

<sup>b</sup> Numbers do not add to total due to rounding.

can be seen, the largest group -- almost half the service providers to the homeless (47 percent) -- are shelters with meals.

To be classified as a shelter with meals, a facility had to offer both shelter and at least one meal a day to its residents. Three meals per day was most typical. Shelters with meals also varied within type. Thirty-three percent of shelters with meals (16 percent of the provider sample) were classified

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as missions. A provider was included in this group if it was operated by an organization that had served the homeless for over 10 years, offered one or more meals to its shelter residents, and less than half of its client households included children. The vast majority of these are affiliated with religious organizations. Family shelters offering meals comprised 17 percent of shelters with meals, and 8 percent of the provider sample. Even if run by a traditional organization or in existence for less than 10 years, a shelter was classified as a family shelter if more than half of the households staying there included children. The majority of these were also affiliated with religious organizations.

The largest category of shelters with meals was temporary shelters (34 percent of shelters with meals and 16 percent of all providers in the sample). This category included shelters in existence for less than 10 years, in which less than 50 percent of the adults were accompanied by children, and which were run by any of a variety of organizations -- community groups, churches, local governments, labor unions, coalitions for the homeless, housing authorities and similar agencies. "Other" shelters with meals (12 percent of shelters with meals and 6 percent of the total) were a varied group and included several alcohol rehabilitation programs attached to traditional shelters and, in one city, board and care facilities serving the homeless through local government purchase-of-service agreements. These shelters comprised 12 percent of shelters with meals and 6 percent of the total.

Most of the service providers that are not shelters with meals are soup kitchens, accounting for 41 percent of all providers in the sample. Over half of these were classified as church-affiliated (21 percent of all providers). A typical church-affiliated soup kitchen was affiliated with a church, coalition of churches, denominational social services agencies (such as Catholic Charities or Lutheran Social Services), or with a Catholic or Episcopal diocese.

Most of the rest (33 percent of soup kitchens and 14 percent of all providers) were shelter-affiliated soup kitchens. These are predominantly affiliated with religious organizations as well. They differ from providers classified as church-affiliated soup kitchens in being operated by a shelter which typically served one meal at which most users were not shelter residents.

Shelters without meals are the smallest group (12 percent of all service providers to the homeless). A shelter without meals was considered a "mission" if it was operated by an organization that had served the homeless for more than 10 years. These shelters were also affiliated with traditional national organizations such as the Salvation Army, St. Vincent De Paul Society, or mission associations; the category included YWCAs and YMCAs if they provided rooms for the homeless and did not serve meals. This type of shelter comprised 30 percent of shelters without meals, and 3 percent of all providers in the sample.

A shelter without meals was classified as temporary if it had existed for only a few years and did not fall into the other categories of shelters without meals. These types of shelters comprised 55 percent of shelters without meals, and 7 percent of the provider sample. They were run by a variety of organizations including local governments, settlement houses, churches and community groups. Welfare hotels and voucher hotels are both very small groups, constituting only 12 percent and 3 percent of shelters without meals, respectively, and under 2 percent of all providers of services to the homeless.

The majority of providers serving the homeless in 1987 had been established relatively recently. More than 6 out of 10, for example, were less than eight years old, about 4 out of 10 soup kitchens and shelters with meals were less than four years old. The newer shelters are more likely to have families. The older ones typically serve single men.

Soup kitchens serve the largest number of clients at each meal on average (see Table 4), with just over one-third serving 100 or more clients per meal and 72 percent serving at least 26 clients per meal. Shelters with meals were typically in the middle range, with only 15 percent serving 100 or more per meal, but 75 percent serving at least 26.

#### Meal Services Offered

The number of meals served per day differs substantially between shelters that serve meals and soup kitchens. Over half the shelters that serve meals (54 percent) serve three meals a day, compared with only 3 percent of soup kitchens. Almost three-quarters (72 percent) of soup kitchens serve only one meal a day, compared with only 11 percent of shelters that serve meals. Shelters that serve meals are also much more likely to do so seven days a week than are soup kitchens. More than 9 out of 10 shelters with meals serve every day, whereas 1 out of 2 soup kitchens serve five days a week or less.

Because of these differences in frequency, more than twice as many meals per day are served to the homeless in shelters as in soup kitchens. The total number of meals available to the homeless in March 1987 in U.S. cities of 100,000 or over is estimated at 321,000 per day, of which 224,000 are served in shelters.<sup>8</sup>

#### Sources of Food for Meal Services

Where providers of meals for the homeless get most of their food is an important question for the evaluation of the prepared meals provision, because the law only allows providers to accept food stamps as payment for the cost of the purchased food supplies served in the meal.

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8. These meals will provide approximately 1.4 meals per day for the number of homeless persons estimated to live in cities of 100,000 or more.

**TABLE 4**  
**DISTRIBUTION OF MEALS AVAILABLE PER DAY,**  
**BY TYPE AND SIZE OF PROVIDER,**  
**COMPARED TO DISTRIBUTION OF PROVIDERS**  
 (weighted percentages)

	Provider Size			
	Serving 10-25 (N = 69)	Serving 26-50 (N = 73)	Serving 51-99 (N = 74)	Serving 100+ (N = 119)
<u>Soup Kitchens</u>				
Percent of Providers (N = 151)	28	17	21	34
Percent of Meals Served each Day by Soup Kitchens	21	6	22	50
<u>Shelters with Meals</u>				
Percent of Providers (N = 184)	25	30	30	15
Percent of Meals Served Each Day by Shelters	9	18	39	34
<u>All Providers Serving Meals</u>				
Percent of Providers (N = 335)	27	23	27	23
Percent of Meals Served Each Day by All Providers	13	14	34	39

"N" refers to unweighted N's. All percentages in this table are based on weighted data. Percentages may not sum to 100 due to rounding.

Purchased food is a major source of food for about half of these providers. Fifty-six percent said that purchased food (either retail or wholesale) is their first or second largest source, and 82 percent purchase some food. About one out of four providers rely on purchased food for more than half of the food they serve. However, 18 percent of providers do not purchase any food for their meal services--all food used comes from USDA commodities, food banks, and donations.

The relative importance of different food sources is shown in Table 5. As can be seen, very few rely on a single source. Two out of three providers get some food from USDA commodity programs, but only half of these (35 percent of

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**TABLE 5**  
**PERCENT OF MEAL PROVIDERS USING DIFFERENT SOURCES**  
**OF FOOD FOR MEAL SERVICES**

(weighted percentages)  
(N = 335)<sup>a</sup>

<u>Percent of All</u> <u>Meal Providers Who:</u>	Source of Food			
	Purchase	U.S.D A. Commodities	Food Banks <sup>b</sup>	Private Donations
Get any food from this source	82	67	69	88
Report that this source is their first or second largest source of food	56	35	34	39
Get more than half of their food from this source	26	3	10	21

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<sup>a</sup> "N" refers to unweighted data. All percentages in this table are based on weighted data.

<sup>b</sup> "Food Banks" is exclusive of USDA commodities, although such commodities may also be distributed by Food Banks.

all providers) relied on USDA commodities as their first or second largest sources of food, and only 3 percent got more than half of their total food from this source. The picture for food banks is similar, with 69 percent getting some food from this source, 34 percent citing food banks and their first or second largest source of food, but only 10 percent getting more than half of their food from food banks. A large majority of meal providers (88 percent) got some food from donations, and donations were the source of more than half of all food for 21 percent of providers.

Where providers get food has some bearing on the variety and nutrient content of the food they serve. The higher the proportion of USDA commodity foods that a provider gets, the more calories, protein and carbohydrates are present in meals served, and the more food groups are present in the meals from the five core food groups. Higher proportions of purchased food are associated with less protein in meals.

#### Sources of Cash Income for Meal-Service Providers

Since the prepared meals provision offers meal providers an additional source of revenue with which to purchase food (i.e., food stamps as a user charge), it is relevant to learn how much of their cash income for meal services comes from user charges and how much from elsewhere (see Table 6). Charges to users are a very small item; 84 percent did not have user charges at all, and only 3 percent relied on them for more than half of their cash income.

Cash donations from individual community members were the most substantial source of cash; four out of five providers received some cash from individuals, with 59 percent citing them as their first or second largest source and 38 percent getting more than half of their cash from individual donors.

Churches and government were next. Although 68 percent of meal providers got some cash from church contributions compared to only 45 percent from

**TABLE 6**  
**PERCENT OF MEAL PROVIDERS USING DIFFERENT SOURCES**  
**OF CASH INCOME FOR MEAL SERVICES**  
 (weighted percentages)

(N = 335)<sup>a</sup>

Percent of All Meal Providers Who:	Source of Cash Income for Food Served				
	Charges to Users	Churches	Individuals	Non-Government Organizations <sup>b</sup>	Government
Get <u>any</u> cash from this source	16	68	80	53	45
Report that this source is their first or second largest source of cash	5	33	59	23	30
Get more than half of their cash from this source	3	9	38	5	15

<sup>a</sup> "N" refers to unweighted data. All percentages are based on weighted data.

<sup>b</sup> e.g., United Way, Corporations, Foundations

government sources, approximately equal numbers cited churches and government as their first or second largest source. Fifteen percent got more than half of their cash from government. Twenty-nine percent of providers mentioned federal government sources of cash for meal services, but only 6 percent listed federal funds as their first or second source of cash; FEMA was the primary federal source.

The United Way, corporations and foundations were a source of cash for meal services for about half of these meal providers. However, fewer than one in four cited this source as one of their two largest, and very few (5 percent) got more than half of their cash from these non-government organizations.

### Cost Per Meal

The average provider's cost per meal varied between \$0.36 and \$0.58. Soup kitchens' average cost per meal was lower than for shelters (\$0.39 vs. \$0.56). And larger providers paid less per meal, on average, than smaller providers.

### Staffing

Much of the staffing of the meal providers serving the homeless, as in the case of food, is donated labor. More than half (53 percent) of the providers had one half-time equivalent paid staff member or less, one-third had no paid staff hours, and none had more than five full-time equivalent paid staff. The distribution of volunteer time shows the contrast. Less than 40 percent had one-half time equivalent volunteer worker or less, only 16 percent had no volunteer hours, and 14 percent had more than five full-time equivalent volunteer staff.

The substantial use of volunteers does not mean that the providers are staffed with persons who have no food service experience, however. Three-quarters of the providers serving meals indicated that at least one person among their paid staff, volunteers, or board of directors had food service experience or training; more than one-quarter reported more than one person with such training. The most common type of experience was as a cook in a restaurant or as a restaurant owner (63 percent of all meal providers); 17 percent had staff with some training in nutrition or dietetics.

### Meal Variety and Nutrient Content

Meal variety was observed, as described in Section 1, by the same persons who interviewed the sampled providers during the same visit. These observations were detailed enough to permit analysis of the food served, by food

group, and by nutrient and caloric availability.<sup>9</sup> Time and budget limitations did not permit data collection on the types or amounts of food actually eaten or plate waste. Therefore the following description of the meals served may not be the same in quantity and variety as the food the homeless actually consumed. In addition, proportionally fewer breakfasts and proportionally more lunches and dinners were observed than providers actually served, so observations were not representative of provider meals in a strict statistical sense.

Presence of Certain Food Groups. The analysis was based on 10 food groups, five of which are considered the core of an adequate diet and should be eaten daily.<sup>10</sup> Certain additional foods such as baked goods and sweets provide few vitamins and minerals, but they do provide needed calories. Fats and oils provide essential fatty acids and certain other nutrients in addition to calories.

<u>Core</u>	<u>Additional</u>
Milk and Milk Products	Fats and Oils
Grain Products	Baked Goods
Fruits and Fruit Juices	Sweets
Vegetables	Sweetened Beverages
Meat and Meat Alternates	Salty Snacks

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9. For a description of the methods used to collect and analyze meal observation data and individual intake data, see Part 2, Section E of Supplementary Statistics and Methodological Documentation, in Volume II of this Report to Congress on the Prepared Meals Provision (September 1988).

10. Human Nutrition Information Service, USDA. (1986) "Nutrition and Your Health, Dietary Guidelines for Americans: Eat a Variety of Foods." Home and Garden Bulletin #232-1, April 1986, p.1.

The meals typically available to the homeless, particularly lunch and dinner, provide substantial variety. A majority of lunches and dinners (55 and 51 percent, respectively) contained at least four of the five core food groups, and 8 out of 10 lunches and dinners contained at least one of the additional five food groups. Breakfast was the only meal at which any providers served less than two core food groups, and this only applied to 10 percent of the breakfasts. It should also be noted that 28 percent of providers included at least four core food groups even at breakfast. The mean number of core food groups served at breakfast was 2.9, at lunch 3.6, and at dinner 3.6. All meal types included an average of 1.3 food groups from the additional groups.

Nutrient Content. The meals provided to the homeless were assessed for 13 nutrients:

Protein (grams)	Vitamin B-6 (mg)
Carbohydrates (grams)	Vitamin A (IU)
Fat (grams)	Iron (mg)
Vitamin C (mg)	Magnesium (mg)
Thiamin (mg)	Calcium (mg)
Riboflavin (mg)	Phosphorus (mg)
Niacin (mg)	

On this measure, too, the average availability of nutrients in provider meals is quite high (see Table 7). The average meal provided over 50 percent of the RDA for both men and women for 7 of the 11 nutrients: protein, vitamin C, thiamin, riboflavin, niacin, vitamin A, and phosphorous.

**TABLE 7**  
**AVERAGE NUTRIENT CONTENT OF MEALS**  
**OFFERED BY SOUP KITCHENS AND SHELTERS,**  
**BY NUTRIENT, AND BY TYPE OF MEAL OBSERVED**

	Type of Meal				RDAs <sup>a</sup>	
	Breakfast (N = 45)	Lunch (N = 135)	Dinner (N = 128)	Total (N = 308)	Men	Women
<u>Mean Value</u> <u>of Nutrient</u>						
Protein (grams)	31	37	48	41	56	44
Carbohydrates (grams)	93	113	138	122	n.a.	n.a.
Fat (grams)	34	39	47	42	n.a.	n.a.
Vitamin C (mg)	43	39	54	46	60	60
Thiamin (mg)	1	1	1	1	1.4	1
Riboflavin (mg)	1	1	1	1	1.6	1.2
Niacin (mg)	12	9	12	10	18	13
Vitamin B-6 (mg)	1	1	1	1	2.2	2
Vitamin A (IU)	2279	3601	5840	4557	5000	4000
Iron (mg)	9	7	8	7	10	18
Magnesium (mg)	119	98	118	110	350	300
Calcium (mg)	359	353	445	403	800	800
Phosphorus (mg)	571	525	624	579	800	800
Calories	803	973	1153	1023	2700	2000

<sup>a</sup> "N" refers to unweighted N's of meals observed. All figures are based on weighted data.

<sup>a</sup> RDAs are for individuals 19-50 years of age, and refer to recommendations for a whole day's consumption. Figures for provider meals refer to the nutrients available in one average meal.

Of these nutrients, protein, thiamin, phosphorus, vitamin A and vitamin C were available in the average meal in amounts between 70 and 100 percent of the RDA

for both men and women; riboflavin and niacin were available in amounts between 51 and 75 percent of the RDA for both men and women. The only nutrients for which 50 percent or less of the RDA for men and women was provided were calcium, Vitamin B-6 and magnesium. Iron was available at 70 percent of the RDA for men, but only 39 percent of the RDA for women. It should be noted that the average American has a low dietary intake of vitamin C, calcium and iron. Meals for the homeless appear to be quite high in vitamin C, however.<sup>12</sup> The reader should note that RDAs are for individuals 19-50 years of age, and refer to recommendations for a whole day's consumption, whereas the data for provider meals refer to the nutrients available in one average meal.

Caloric Content. As would be expected, the caloric content of the meal differed by type of meal, with breakfast averaging the least (803) and dinner the most (1153). When all breakfasts, lunches, and dinners are combined, the estimated mean number of calories per meal is 1023, with a median of 920. Twenty-five percent of meals had caloric values of 690 or less, and 25 percent had caloric values of 1218 and above. The average meal of 1023 calories provides 38 percent of the recommended daily level of 2700 for adult men and 51 percent of the recommended daily level of 2000 for adult women (see Table 7).<sup>13</sup>

The number of calories offered in the average meal tended to be lower for the larger providers. Twice as many large providers (serving over 100 people per day) as small providers (serving less than 26 people per day), for example, served meals of under 500 calories, despite the fact that the meals we observed at these providers were more likely to be lunches or dinners. And small providers were much more likely to serve meals in the highest calorie category (1525

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12. See footnote 11.

13. See footnote 11.

calories or more) than were large providers. In the intermediate calorie categories, size of provider made less difference. Several explanations may exist; one possibility is that large providers are stretching limited resources to serve more people.

Providers of meals to the homeless cover a wide range in number of clients served, number of meals served, and institutional affiliation. Shelters with meals typically serve more meals a day more days a week than do soup kitchens. Both rely substantially on noncash sources of food and volunteer labor. Even so, many have some staff with previous food experience, and the variety and quantity of the meals served is typically high enough to afford a person eating two or three of those meals per day to reach the RDA for most nutrients and calories.

This section does not tell us how many of the homeless have these meals available to them, how many meals they typically eat per day, or whether they eat all of the food they are served. The next section of the report provides a profile of the homeless population and their reports of what, where, how much, and how often they eat.

#### 4. THE CHARACTERISTICS AND EATING PATTERNS OF HOMELESS WHO USE MEAL SERVICES

Information on homeless persons collected for the prepared meals provision evaluation is by far the most detailed yet collected on eating patterns of the homeless, and the only nationally representative data set that comes from interviews with the homeless themselves. The picture that emerges confirms the findings from other studies limited to single cities, counties, or states. As with the provider data, it should be remembered that the sample is representative of cities of 100,000 population or larger. Therefore the data presented are not directly generalizable to the country as a whole.

##### Profile of the Homeless Who Use Services

About 229,000 homeless persons in cities with population 100,000 or over used meal or shelter services at some time during a 7-day period in March 1987. Adults comprise 194,000 of this number; children accompanying these adults make up the remaining 35,000.<sup>14</sup>

Most of the homeless are male (81 percent in our sample); the majority are nonwhite (54 percent) and between 31 and 50 years of age (51 percent). They also tend to be homeless for substantial periods (the median for the whole sample was 10 months). Homeless persons who use services are three to four times as likely to be black as the general population or the population in

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14. A very broad confidence interval is associated with the adult estimate (+42 percent, or +81,893); for the children it is much smaller (+647, or 1.9 percent). Readers should refer to Volume II, Part 2, Section B for a detailed description of sampling and weighting issues that contributed to this estimate.

metropolitan areas.<sup>15</sup> They are also slightly more likely to be Hispanic.<sup>16</sup> Almost half (48 percent) have not graduated from high school, compared to 19 percent of all U.S. adults and 43 percent of all adults below the poverty level in 1986.<sup>17</sup>

Thirty-eight percent of the service-using homeless population use both soup kitchens and shelters; 29 percent use only soup kitchens; the remainder use only shelters. Those who use only soup kitchens are more likely to be men (93 percent) than the shelter-only group (68 percent) or the group that use both (84 percent). They are also less likely to be 30 or younger (20 percent) than the shelter-only group (32 percent) or the group that use both (35 percent). Finally, they are much less likely to be members of families with chil-

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15. Bureau of the Census, Statistical Abstracts of the United States: 1987, Tables 17 and 745 (estimated data for 1985); State and Metropolitan Area Data Book, 1986, Table A (for 1980 MSA data -- the census data most parallel to the jurisdictions from which we drew the homeless sample for this study).

16. Bureau of the Census, Statistical Abstracts of the United States: 1987, Tables 19 and 745 (estimated data for 1985); State and Metropolitan Area Data Book, 1986, Table A (for 1980 MSA data). The Census Bureau notes that "Hispanic-origin people may be of any race," reflecting the fact that "Hispanic" is not considered a race by the Census, and Hispanics may be included as black, white or "other" in the Census Bureau's statistics on race.

17. U.S. Department of Commerce, Bureau of the Census, Current Population Reports: Consumer Income, Series P-60, No. 158. Statistics calculated from information given in Table 9.

dren present. (Two-thirds of the persons in such families never eat at soup kitchens versus one-third of homeless persons who are not in such families.)

Of all homeless persons, 77 percent are single or unattached adults, 15 percent are children, and 8 percent are the adults in the families to which the children belong. Counting parents with children together as a household, and also counting a single homeless adult as a household, parent-children households make up 10 percent of homeless households. Eighty percent of parent-child homeless households are represented in our sample by women. Ten percent is considerably lower than figures given in recent reports (which range as high as 30 percent). Nevertheless, it is very similar to the 9 percent reported in the only other study of homeless persons that includes a national but non-random sample (derived from individuals who used special health services for the homeless in 19 American cities; Wright and Weber, 1987).<sup>18</sup>

Since homeless children were not included in the interview sample, we have no data on the eating patterns or other characteristics of the children who are homeless. We can gain some insight into probable patterns, however, from the information about the adults who represent families with children in our sample.

#### Other Characteristics

A whole variety of characteristics indicate that the homeless are indeed a very vulnerable group in the population, who tend to have both economic and noneconomic problems.

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18. It should be noted that these data cannot be interpreted as reflecting the proportions of homeless who are biological parents, or the total number of children who have homeless parents. These questions were not asked.

Economic Characteristics. Respondents reported very little cash income within the 30 days prior to the interview. The average income per person for the preceding 30 days was \$137, which is 28 percent of the federal poverty level for a 1-person household in 1987.<sup>19</sup> Seventeen percent (17 percent) reported no cash income during this period. Homeless persons who used only soup kitchens had substantially lower mean incomes (\$94/month) than users of shelters (about \$150 a month). They also had less education and had been homeless and jobless longer. Men were more likely to report income from handouts or from working, women from means-tested benefits. The service-using homeless had also typically been without a job for a considerable period of time -- about four years on average, with a median of 20 months.

Physical and Mental Health Problems. The homeless who use meal services tend to be in relatively poor physical and mental health. A majority (56 percent) reported at least one health problem, including 15 percent with joint problems, 15 percent with high blood pressure, and 10 percent with problems walking. Their self-reported health status was also low. Thirty-eight percent said their health was fair or poor, compared with 10 percent of the general population ages 18-64.

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19. U.S. House of Representatives Committee on Ways and Means, Background Material and Data on Programs within the Jurisdiction of the Committee on Ways and Means, 1988 Edition, Committee Print 100-29, 100th Congress, 2nd session, March 24, 1988. Table 1, Appendix I, p. 711. Tripling \$137/person for a 3-person household yields a monthly income 54% of the poverty level for a family of three.

Mental health problems also were relatively prevalent in the sample. Almost 20 out of 100 reported a history of mental hospitalization. A similar proportion reported having tried to commit suicide (versus 3 out of 100 for the general population and 7 out of 100 for persons ever diagnosed as suffering from a major psychiatric diagnosis). Finally, on a scale measuring current depression and demoralization, 49 percent of the homeless had high enough psychological distress to indicate the need for immediate treatment.<sup>20</sup>

Institutionalization. Institutionalization for alcohol, drug abuse, or crime is also prevalent. One-third had been patients in a detoxification or alcohol/drug treatment center. Half had spent more than 3-4 days in a county jail. One-quarter had been convicted of serious enough crimes to have been in state or federal prisons. Two-thirds had experienced at least one of the four types of institutionalization included in the interview (detoxification or other chemical dependency inpatient treatment, jail, prison, mental hospital). About one-quarter had experienced only one type, but 18 percent had been institutionalized in three or in all four of the four types of institutions.

### Eating Patterns

As we saw in Section 3, the meals available to homeless people through soup kitchens and shelters are of relatively good variety and nutrient content. The data available from individuals do not allow us to determine where people ate all of their meals. However, data indicate that 321,000 provider meals are

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20. The scale used is a short version of the Center for Epidemiological Studies, National Institute of Mental Health scale used to measure depression, known as the CES-D scale. See Part 2, Section C of Volume II of this report, question 34, Individual Survey Questionnaire.

available each day in cities of 100,000 or more, and we estimate there are 229,000 homeless persons, including children, in these cities. These figures would suggest that only 1.4 provider meals are available for each homeless person every day. Since homeless individuals may eat less adequate meals elsewhere, we can draw no firm conclusions about whether all the meals they eat are as adequate as the average provider meal. However, data on homeless individuals' eating patterns, presented below, suggest that their diet may be less than adequate.

Most homeless people, for example, do not eat three meals a day, although 63 percent eat two or more meals a day. The average number of meals eaten daily was 1.9, compared to 3 or more meals a day for the average low-income person. Thirty-seven percent reported eating one meal a day or less; only 25 percent ate three meals a day or more.

Homeless people also go whole days without food. Thirty-six percent (36 percent) reported that they go one day or more per week without eating anything; when interviewers asked homeless individuals to describe what they ate during the 24 hours before the interview, about 1 in 12 said they had eaten nothing. One in 6 said they go two days or more without eating as often as once a week; 1 in 8 said they go two days or more without eating once or twice month.

Not only do the homeless in this study eat relatively infrequently, their diets also lack certain core foods. On average, each day they eat foods from only 2.7 of the 5 core food groups.<sup>21</sup> Calculations based on descriptions of what homeless people said they ate the day before the interview reveal that 65

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21. Milk and milk products, grain products, fruits, vegetables, and meat and meat alternates.

percent had not consumed any milk or milk products during that day, 43 percent had eaten no fruits or vegetables, 30 percent had eaten no grain products, and 20 percent had eaten no meat or meat alternates such as dry beans, peas and peanut butter. National comparisons for a 1-day period from the Nationwide Food Consumption Survey 1977-78 found that 19 percent of Americans had eaten no milk or milk products, 14 percent had eaten no vegetables, 46 percent had eaten no fruits, 4 percent had eaten no grain products and 7 percent had eaten no meat or meat alternates.<sup>22</sup>

Consistent with these estimates, a majority of homeless individuals in this study perceived the healthfulness of their diets as fair (28 percent) or poor (23 percent). Only 18 percent said their diets were excellent or very good. Thirty-eight percent reported that they sometimes or often did not get enough to eat, compared with 4 percent of all U.S. households and 20 percent of all U.S. households with incomes below 76 percent of the official poverty line.<sup>23</sup>

Those who used only soup kitchens but never went to shelters ate less well than those who used shelters as well or shelters only. Soup-kitchen-only users reported fewer meals per day, more days in the week without eating, more periods of going two days or more without eating, and poorer outcomes on other indicators of eating patterns. The more often a homeless person ate at a shelter during the week, the better their diet and eating patterns.

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22. Human Nutrition Information Service, USDA. (1980) Food Intakes and Nutrients, Individuals in One Day in the U.S., Spring 1977. Preliminary Report #2. September 1980. Hyattsville, MD: HNIS-USDA.

23. Mathematica Policy Research. (1987) Final Report for the Food and Nutrition Service, USDA: Descriptive Tables Based Upon Merged Wave 1 Data for the Core and Low-Income Samples of the 1985 CSFII. Washington, DC: Mathematica Policy Research.

Since the food stamp program is intended to improve the diet of recipients, it is appropriate to inquire whether homeless people who get food stamps eat more often and more adequately than those who do not. The answer is yes--the higher one's food stamp benefit per person the more frequently one reports eating daily, the more servings of all foods one eats, and the more food groups from the five core groups are represented in one's diet.

#### How Individuals Compare with Families among the Service-Using Homeless Population

According to our estimate, 10 percent of homeless households are families with children present. Eight percent of the homeless are adults in families with children and 15 percent are children in those families. Homeless adults who have children with them are substantially different from other homeless persons.<sup>24</sup>

The vast majority of adults with children present were female (88 percent). Exactly the reverse was true of homeless by themselves. Adults with children present were also more likely to be black (54 versus 39 percent) or Hispanic (20 versus 9 percent) than were the homeless living alone. About half of both groups had never been married; but the adults with children present were more likely to be currently married (23 versus 9 percent), and those homeless by themselves were more likely to have lived prior to homelessness in a

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24. Only adults were interviewed; each was asked whether he or she was homeless with children and if so, with how many children. Our estimate of the number of children among the homeless stems from these data. However we have no further information about the children.

single room or some kind of institution (mental hospital, jail, halfway house, detox center, etc.) than were adults with children present (31 versus 8 percent).

Homeless families had been homeless for substantially less time than single homeless persons (median = 4.5 months vs. 12 months). However, neither the adults in homeless families nor the single homeless had much of a history of steady work. Both had been without work for about four years on average, with a median of 20 months.

Adults in homeless families were more likely to be current recipients of public benefits (food stamps, AFDC, GA).<sup>25</sup> They also received more cash income last month as a result of benefit receipt (median = \$300 vs. \$64).

More homeless families than single homeless persons get food stamps (50 percent vs. 15 percent). The average monthly benefit level per person is higher for single people than for family households (\$59 vs. \$35 per person). This difference arises because there are more people in family households and the benefit levels for additional people are lower than for the first person, and because the available cash income for family households is higher, probably because homeless families are more likely to receive income maintenance than single homeless persons.

Adult homeless by themselves were more likely to report that their diet was fair or poor, and less likely to report that it was excellent, very good, or good than homeless adults in families. They were also somewhat more likely to say that they sometimes or often did not get enough to eat.

These perceptions are corroborated by their reported frequency of eating, and reported dietary content. More homeless by themselves reported eating two

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25. Food stamps - families 50%, alone 15%; AFDC - families 33%; alone 1%, GA - families 33%, alone 10%.

or fewer times a day (77 percent) than adults in homeless families (59 percent). Single homeless persons were also more likely to have gone one or more days without eating during the last seven days (38 vs. 16 percent), and to report occasions on which they went two or more days without eating (39 vs. 21 percent).

Adults in homeless families reported eating somewhat lower total quantities of food than single homeless adults -- as measured by the number of servings of all foods they consumed on the day before the interview (8.5 servings for adults in families vs. 9.1 for single adults.) But single homeless persons consumed foods from somewhat fewer food groups among the five core food groups: The mean number of groups was 2.6, vs. 2.9 for adults in families (and 2.7 for the entire sample).

The typical diet is relatively inadequate even for adults in families, however, compared to the average American. Adults in homeless families report lower satisfaction with their diet, eat fewer meals each day, and are more likely to go whole days without food than the average American. Only 37 percent of adults in families and 27 percent of single adults consumed foods from four or from all five of the core food groups on the day preceding the interview. In comparison, the daily diets of most American adults contain foods from four or all five core food groups.

Adults in homeless families were much more likely to have spent all of the past week in a shelter, and much less likely to have avoided shelters altogether during the week. They also were much less likely to have eaten in soup kitchens. Since shelters serve more meals a day, and on more days a week than soup kitchens, families in these shelters benefit from this pattern if they live in a shelter that serves meals. Single adults and adults in families who use shelters were about equally likely to have gotten prepared meals at the

shelter where they lived. Many of the families may have made their own meals at their shelter, however, especially if it was a welfare hotel.

Finally, single homeless adults had much more troubled histories than adults in homeless families. They were more likely to have experienced both mental hospitalization and inpatient treatment for alcohol or drug dependency. They were much more likely to have been in jail and in a state or federal prison. And they were much more likely to have had more than one of each of these types of trouble. Only 12 percent of the adults in families had experienced two or more types of trouble, for example, compared with 42 percent of single homeless persons. The pattern for current depression/demoralization is different however. Adults with children present had as high scores on this scale as homeless alone--an indication that being homeless is an extremely difficult circumstance to cope with, irrespective of one's general mental or psychological health.

As noted earlier, we do not know anything directly about the children who are homeless. These data on the adults with whom they live, however, suggest that they may be homeless for shorter periods than the average homeless person, they may eat somewhat better, and the adults who care for them may be less emotionally disturbed.

#### The Homeless Who Do Not Use Services

To achieve comparison data for the homeless who do not use services, as noted in Section 1, we interviewed homeless persons at congregating sites (bus stations, culverts, etc.) who had not used any kind of shelter or soup kitchen for the past week. Since this was a small and not necessarily representative sample, statistically rigorous comparisons between them and the service-using homeless cannot be made. Nevertheless, the general picture is relatively clear.

A whole variety of comparisons indicates that the homeless who do not use services fare less well than those who do. The homeless who do not use services reported being homeless longer, having been without a steady job for longer,

and having made less use of public benefits. They also reported being less healthy and having more mental problems.

The homeless who do not use services also had poorer eating patterns than the service-using homeless on every measure. They relied much more heavily on trash and on handouts as sources of food. They ate fewer meals per day, averaging only one meal per day (mean = 1.36) compared to the almost two meals of the service users (mean = 1.92). They were much more likely to have gone one or more days without eating during the seven days prior to the interview, with a mean of somewhat over one day (1.35) in comparison to a mean of under one day for service users (0.66).

The homeless who do not use services were less likely to report getting enough to eat, and were quite unlikely to get what they wanted to eat. More nonusers than users described the quality of their diet as fair or poor, and appeared less likely to have eaten foods from the five core food groups.

#### The Effect of Interviews with New York's Homeless

Seventeen percent of our sample of homeless persons were interviewed in New York City. With such a large proportion of the sample coming from a single city it is reasonable to ask in what ways the New York data might influence the results. The answers are very much the same whether one looks at homeless

The homeless in our sample from New York City are more likely than those from the 19 other cities to be non-white, never-married, receiving GA, homeless longer, more depressed/demoralized, and to report more money per person during the past month. They are less likely to have worked during the past month. They report eating fewer servings of all foods and foods from fewer of the five core food groups during the day before the interview. They are also less likely to eat at either soup kitchens or shelters. Finally, New York's single homeless are more likely to have served time in prison than the single homeless elsewhere.

These differences between New York's homeless and those from other large cities pull our results in the direction of the New York responses, although this is more true for families among whom the New York sub-sample comprises 35 percent, than it is for singles where New Yorkers are only 14 percent of all singles in the sample. These differences also suggest that policy makers and researchers should be wary of generalizing from New York's homeless to those homeless elsewhere in the country.

The information in Sections 3 and 4 shows that the meals made available by providers serving food to the homeless are typically of adequate quality but that homeless persons may not eat enough of them to achieve an adequate diet. Since our research also indicates that use of food stamps increases the amount of food eaten by the homeless, other things equal, it is relevant to estimate what proportion of homeless persons receive food stamps and to identify possible barriers to access. This is the topic of Section 5.

## 5. ACCESS OF HOMELESS PERSONS TO THE FOOD STAMP PROGRAM

Since the prepared meals provision is intended to improve the nutrition of the homeless through their use of food stamps, it is of interest to ascertain the proportion of the homeless who do participate in the Food Stamp Program and the reasons why participation rates may be low.

### Food Stamp Program Participation by the Homeless

Virtually all service-using homeless households have low enough gross incomes (96 percent) and a few enough assets (95 percent) to qualify for food stamps. Nevertheless, only 18 percent were receiving food stamps at the time of the interview. Another 41 percent had done so at some time in the past, and a further 8 percent had applied for food stamps but not received them. One-third of the sample, therefore, had never been in contact with the food stamp program. A considerably higher proportion of families (50 percent) than of individuals alone (15 percent) were currently receiving food stamps.

The typical stay on the Food Stamp Program by service-using homeless persons is not long. The median number of months current recipients had been receiving stamps was four and a half months. More than half (54 percent) had been receiving them for 12 months or less. Only 4 percent had been receiving them for 9 years or more.

Forty-one percent of homeless individuals were neither current nor previous food stamp recipients. Eight percent had applied for food stamps at some time in their lives. About half of these (4 percent) gave as their reason for not being participants that they had been turned down.

Of the one-third who had never been in contact with the food stamp program the most common reasons given were thinking they were not eligible (9 percent of the sample), having no mailing address (5 percent) and not knowing where or how to apply (4 percent).

A number of personal characteristics of the service-using homeless increased the likelihood that they were getting food stamps at the time of the interview, including receiving income maintenance, having a mailing address, being a member of a minority group, and having a history of treatment for chemical dependency. Most of these characteristics plausibly reflect contact with the social service system.

#### Information Available on Food Stamp Access by the Homeless

Our information on local food stamp office practice comes from semi-structured telephone interviews that left ample opportunity for respondents to describe their practice, problems encountered, and approaches to solving them. In those cities with more than one office, we either identified and interviewed the office serving most of the homeless for that city, or interviewed someone at a supervisory level who spoke for all offices (New York City, Los Angeles). Half of the persons interviewed were supervisors of eligibility/certification workers. The remaining persons interviewed held various positions, including supervisor of the food stamp planning section, regional director or deputy director of income assistance services, director of the city's Food Stamp Program, and food stamp consultant for a greater metropolitan council.

The first thing to note is that local food stamp offices do not in fact know very much about their homeless recipients. No city, for example, was able to provide a reliable dollar figure for the total number of food stamps issued to homeless recipients during the survey month. And two-thirds could provide no data on the numbers of recipients who were homeless. This means that there is limited local data to measure program participation by the homeless. Our interviews provide the best information available on reported office practices, which is summarized below.

### Local Food Stamp Office Practice

There are two major procedures a local office must go through before food stamps can be issued to participants: eligibility determination and establishment of a workable method of issuing the food stamps every month. The responses of our homeless respondents and of the local food stamp office personnel indicate the problems that being homeless tends to pose for both.

Eligibility Determination. The vast majority of offices in the sample (17 of the 20 offices) reported problems with determining eligibility for the homeless. Lack of proper identification and other documentation was cited most frequently (by 11 of the offices interviewed). All homeless households are now eligible for expedited service, which provides food stamp benefits within 5 days of application, as authorized by the McKinney Act (P.L. 100-7). At the time of the data collection, expedited service was available to all households with monthly gross incomes of less than \$150 and liquid assets of no more than \$100. The local food stamp offices must only verify the identity of the applicant in order to issue food stamp benefits for the first month under expedited service. However, for the household to continue receiving food stamps beyond the first month, verification must be provided for all types of income, liquid resources and other assets.

Homeless applicants often did not have enough documentation, or did not have the proper types of documentation, to satisfy local food stamp office standard practice. These offices said they tried to solve eligibility problems by allowing collateral contacts to serve as identifiers (such as social service workers, relatives, and shelter operators). Five offices were also willing to accept miscellaneous identification sources such as supermarket cards, unemployment insurance cards, and hospital or other medical cards.

Five of the offices also mentioned that failure to keep appointments, including follow-up appointments, was responsible for some of their inability to reach positive eligibility determinations for homeless individuals. Lack of transportation to the food stamp office, or mental health problems of the client (leading to providing unusable information, or having trouble with procedures) were each mentioned by two offices as interfering with eligibility determinations. Establishing residency in a jurisdiction was also noted by three offices as part of the problem. Waiving residency requirements or taking the client's declaration of residency as sufficient to establish residency were reported as ways of dealing with it.

Nineteen of the twenty cities reported giving expedited service to homeless applicants. Seven cities reported that all of their homeless cases received expedited service; five reported that 90-99 percent of their homeless recipients got this service; three said that 60-89 percent of their homeless eligibles got the service. Four cities did not know what proportion of homeless recipients had their cases expedited.

Issuance. The problem of establishing a way to issue the stamps once eligibility has been determined was reported as less serious. Twelve cities reported no problems with issuance. Five of these cities said they allowed homeless individuals to pick up stamps at the local office; three said they sent the stamps to any local address where the client had permission to receive mail; two used general delivery; and two allowed the homeless to pick up stamps at any currency exchange (which also cash welfare checks). Of the offices that did have problems with issuance, reasons included clients moving, not picking up mail, or returned mail (five cities altogether), and the post office not allowing the use of general delivery for food stamps (two cities).

Other Procedures. We were interested in whether food stamp offices in our sampled cities used any other procedures to inform homeless clients of their eligibility or make any other special arrangements for them. It should be kept in mind that these data were gathered before the Stewart B. McKinney Homeless Assistance Act of 1987, which authorized federal reimbursement for outreach to the homeless.

Six cities reported no special procedures. Of those that did have procedures, nine used written materials: five ran radio or TV spot announcements or developed posters or guides for use at shelters, two left literature in their waiting rooms, and two informed AFDC and general assistance applicants of their eligibility. Eleven used in-person contact: five arranged meetings or speaking engagements with service providers to inform them of procedures to help the homeless get food stamps; three assigned a local worker or a special unit of workers to contact providers and other community leaders; three reported that they had generally good interactions with providers, although they did not have a designated worker.

Communication among local food stamp offices might help those offices that do not have many homeless recipients, since many offices have developed policies and procedures to facilitate access that other offices might adopt for their own use.

6. SERVICE-PROVIDER REACTIONS TO THE PROVISION  
AND THEIR SUGGESTIONS FOR IMPROVING FOOD  
SERVICES TO THE HOMELESS

A major reason why the prepared meals provision has had so little effect, as noted, is that very few service providers have chosen to become authorized. The reaction of the many providers who did not do so may provide insight into ways in which food provision to the homeless might be improved, either through revision of the prepared meals provision or in other ways.

We did not interview our provider sample after implementation, so we have no direct evidence to offer about their reactions after the fact. However, our detailed questions about the provision just before implementation do provide information about the interest of providers in the provision, the advantages and disadvantages they believed the provision would have, and their philosophical approach to delivering food and shelter services to the homeless. It also provides information from which we can summarize provider views about ways in which food provision for the homeless might be improved. These include suggested changes to the Food Stamp Program, other USDA action, and the prepared meals provision itself.

Knowledge of and Interest in the Provision

Only 21 percent of providers in our sample had heard about the provision prior to our contacting them to participate in the study. The more heavily providers interacted with other providers in their cities, the more likely they were to have heard of the provision. Since so many providers were unfamiliar with the provision, our interviewer briefly explained it before asking whether the provider's facility might be interested in becoming authorized.

The majority (57 percent) said they were not interested in applying; 21 percent said they might be interested but needed more information; 2 percent said they had or would apply; and 20 percent said they did not know, or gave no answer. Shelters that served meals indicated most interest, and shelters that did not serve meals indicated the least interest.

Of the providers who were not interested in applying, almost half (47 percent) gave as a reason that their facilities did not charge for meals now and would continue to operate as usual, with specific reference to the fact that they would not charge or accept payment of any kind (Table 8). Making meals available at no charge was, for them, a philosophical or moral component of their whole operation, and not one they would drop. Other reasons cited by those responding that they were not interested in the provision were a policy of not accepting any government funds (10 percent), and a desire to avoid the paperwork and "hassle" associated with obtaining authorization and actually running the program (14 percent).<sup>26</sup> Some agencies (12 percent) perceived their facilities to be ineligible to take advantage of the provision, either because they were facilities supported by local government agencies or because all of the food served by the agency was donated. In fact, Local government agencies are eligible, but neither they nor non-profits could charge in food stamps for any meal component that was donated. Others (6 percent) felt that the provision would require changes in the existing program or expansion of facilities that they did not wish to undertake. Some providers (6 percent) viewed the provision as diminishing the limited resources of the clients. In general, these respondents mentioned that clients needed their food stamps for when they moved out of the facility or when they were not eating at the soup kitchen.

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26. For the limited number of authorized providers, these problems did not materialize, as reported in Section 2.

TABLE 8

REASONS GIVEN BY PROVIDERS FOR BEING  
INTERESTED OR DISINTERESTED IN APPLYING FOR  
AUTHORIZATION UNDER THE PREPARED MEALS PROVISION  
(weighted percentages)

<u>Response</u>	<u>Percent of Those Responding</u>
<u>Not Interested in Applying</u> (N = 213; 57% of total sample)	
Do not charge and will not charge	47
Will not accept money from government	10
Anticipates unwanted paperwork	14
Perceived ineligibility	12
Do not want to make changes in program or facility	6
Would diminish client resources	6
Other	5
	<u>100</u>
<u>Interested or Potentially Interested in Applying</u> (N = 88; 23% of total sample)	
Improve services	31
Get more resources for program	24
Interested but with reservations	18
Other	6
Don't know, or no response	21
	<u>100</u>
<u>Don't Know/No Answer</u> (N = 80; 20% of total sample)	n.a.

<sup>a</sup>N<sup>a</sup> refers to unweighted N's. All percentages in this table are based on weighted data.

Reasons cited by those persons interested or potentially interested in applying were: 1) improved service, and 2) more resources for the facility. Service improvements, mentioned by 31 percent of those interested in the provision (7 percent of the whole sample), would come in the form of better meals (in terms of both quantity and quality) as well as the ability to provide special meals as required by the client population. More resources, mentioned by 24 percent (6 percent of the whole sample), were seen as an enabling factor for

the facility; more dollars would enable the facility to expand its services. Those respondents who were interested but had reservations about the provision (18 percent of those interested) were concerned about the types of guidelines to be issued along with the provision, the level of paperwork required to accept food stamps on an ongoing basis, and whether or not the amount of additional money or resources that could be gained as a result of the provision were worth the effort of participating in the program.

#### Advantages and Disadvantages of the Provision

Ten percent of providers either said they did not know about advantages or gave no response. An additional 24 percent said they saw no advantages associated with the provision.

Among the two-thirds who saw advantages, answers fell into the following categories:

Improvements in food and nutrition -- 50 percent of those citing advantages. These included: improvements in nutrition, increased sources of food and better food as well as the ability to supplement their food supply as a result of the provision.

Give facilities more resources -- 26 percent of those citing advantages. Responses included: give facilities more resources, produce greater stability in allowing the providers to continue serving homeless clients.

Personal choice -- 11 percent of those citing advantages. Responses included: the provision represented a chance for homeless persons to have some semblance of "personal choice" in where and how they obtained food, a factor providers perceived as lacking in the lives of many homeless persons.

Service improvements -- 8 percent of those citing advantages. One provider commented that under the provision they would no longer have to find rooms with kitchenettes for clients, since the clients would be able to use their food stamps at soup kitchens.

Other advantages to the provision mentioned by providers were more general in nature. They included the observation that clients could take advantage of

the benefits of bulk buying (by the facility), that the government is recognizing that there is a hunger problem, and even more generally, the statement that "any assistance to the homeless is great."

When asked what disadvantages they saw with the provision, 82 percent of providers perceived some.

The biggest concern, mentioned by 33 percent of providers citing disadvantages, related to the abuse of food stamps by clients (selling or bartering food stamps in order to purchase alcohol, drugs, or cigarettes), and/or client mismanagement of food stamps. The general feeling behind this reasoning appeared to be that many of the homeless were incapable of making decisions with regard to managing resources. Also included in the category was concern about theft of food stamps among the homeless at shelters and congregating sites.

Twenty-three percent of those citing disadvantages felt that the provision would represent a great deal of paperwork and "red tape" that would be an additional burden for the provider. Most responses in this category alluded to the fear that the provision would be a "bill-keeping mess." Similarly, one respondent felt that any reporting/accounting requirements associated with the provision would necessitate the hiring of an additional person to maintain the accounting records for the agency.<sup>27</sup>

Nine percent of providers citing disadvantages perceived bureaucratic problems pertaining to the ability of homeless persons to obtain food stamps. They felt the provision would mean that more homeless would encounter problems with the food stamp program and therefore would not gain the potential advantages of the provision, at the same time that the poor nonhomeless would have

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27. The actual experiences of most authorized providers suggest that these problems did not materialize.

to pay for meals that they now got for free. This latter concern arose because some providers anticipated that facilities would begin charging for meals, in order to be able to collect food stamps.

The difficulties created in serving clients, a category that could be called "at-the-door problems," were cited by 11 percent of providers citing disadvantages. These providers were concerned about the division that would be created between their homeless and nonhomeless clients. This difficulty was perceived as particularly likely to arise at soup kitchens, since most of these facilities serve a mixed client group including significant numbers of homed but poor individuals and families. Providers who mentioned this concern spoke of it in terms of discrimination, and of their unwillingness to "put clients to a test" in front of other clients to see if the facility could accept their food stamps. The anticipated interpersonal confrontations were perceived by providers as potentially degrading to them and to their clients.<sup>28</sup>

Fourteen percent of providers citing disadvantages felt that the provision were not useful, since allowing the use of food stamps at shelters was simply a substitution of resources spent on meals and did not do anything to increase the resources available to food stamp recipients.

#### Provider Philosophy and Approach to Services for the Homeless

Twenty-five percent of the providers saw their mission as performing a nonrehabilitative service which in their view was not adequately provided in the community. These perceived gaps in service ranged from bathrooms where

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28. In fact, difficulties of this type were present for a number of authorized providers, and were responsible for the decision by some to stop asking any of their users for food stamps.

clients could clean up, shower, and shave, to housing and permanent shelter, and to employment services.

Twenty-three percent of providers saw their mission as "rehabilitating" clients, offering services to break the cycle of homelessness by providing clients with skills to make the transition into the mainstream of society.

Eighteen percent of the providers said their philosophy focused on trying to give the homeless some human dignity, structuring services in a way that would counteract the loss in human dignity experienced by those living on the streets or because they felt the need to help the less fortunate.

Eighteen percent of the providers gave religious conviction as a primary reason for providing services -- largely reflecting a religious philosophy of "helping thy brother and sister." Nine percent of the providers gave multiple responses to this question including religious convictions, a desire to improve the human condition, and a desire to provide both nonrehabilitative and rehabilitative services to homeless persons.

#### Improving the Nutritional Status of the Homeless

How to improve the feeding of the homeless generated the largest number and variety of responses to any of the open-ended questions in the provider interview. Only 4 percent of providers had no suggestions to make. The suggestions can be grouped into four major categories:

##### Changes to the Food Stamp Program -- 6 percent of those with suggestions.

Recommendations for changes to the Food Stamp Program included increases in the food stamp allotment, cutting the documentation and paperwork required to become certified to receive food stamps, and ways to make it easier to get food stamps, including issuing food stamps at the feeding sites.

Other USDA Action -- 18 percent of those with suggestions. Suggestions for helpful action by USDA included increasing the availability of surplus food -- particularly expanding the types of food to resemble items available through the school lunch program -- and increase participation by the homeless in meal services, lunch programs, WIC, and other USDA nutrition programs.

Other Actions -- 14 percent of those with suggestions. Providers who recommended more government action had a range of suggestions to make, includ-

Changes to the Prepared Meals Provision -- 16 percent of those with suggestions. Suggestions of ways to make the prepared meal provision work included promoting availability of the provision to both providers and food stamp recipients; giving food stamps directly to the provider so the provider could manage the food stamps and have an additional resource; and allowing restaurants to accept food stamps. Several modifications of the provision were also proposed, including having two separate systems for homeless and nonhomeless (such as vouchers for the homeless and food stamps for the non-homeless), or issuing a meal ticket which could be punched by the provider after each meal. Another suggestion involved issuing a special type of food stamps that would be worth their face value at grocery stores but double their face value at prepared meal providers. Providers thought this would encourage people to use these special food stamps to consume nutritious meals at provider sites rather than selling them for cash.

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