Overview of the *Almanac*

- Provides a comprehensive look at family homelessness at the local, state, and national levels
- Reviews demographics, barriers to services, policies, and service systems
- Divided into three sections:
  - Issue by Issue
  - State by State
  - Ideas in Action
Overview: The Untold Story

• History of federal homelessness policy
• Causes of family homelessness
• Parts of service delivery system
• Successful strategies for reducing family homelessness
Federal Homelessness Policy

• A quick public policy history from early 2000’s
• Plans to end chronic homelessness among single adults
• Use savings for homeless families
Federal Homelessness Policy

• 99,894 sheltered and unsheltered chronically homeless single adults on a single night in January 2012
  – 19.3% decline since 2007

• Number of persons accessing shelter over a one-year period
  – Individuals: 11.7% decrease from 2007 to 2011
  – Family members: 13.5% increase over same time period
Federal Homelessness Policy

• Current federal plan (released in 2010)
• US Interagency Council on Homelessness goals are to end:
  – Chronic homelessness by 2015
  – Veteran homelessness by 2015
  – Children, families, and youth by 2020
Percent of People Who Lived in Homeless Shelters (January 2011)

- **.26% – .63%**
- **.16% – .25%**
- **.08% – .15%**
- **.00% – .07%**
- **No beds**
Top Three Causes of Family Homelessness According to City Officials
(by year)

- Medical or health costs: 2007: 4%, 2009: 4%, 2011: 0%

Unemployment

Seasonally Adjusted Unemployment Rate, September 2007–August 2013
(by month)

Great Recession

United States

Pennsylvania

www.ICPHusa.org
Affordable and Available Housing Units Per 100 ELI Renter Households in 2000

Why do families become homeless?

- Extreme poverty, *see page 4 in the Almanac*
- Lack of affordable housing, shortage of rental subsidies, *see page 6*
- Low educational attainment, high unemployment, few low-wage jobs, *see page 36*
- Racial discrimination, *see page 13*
- Domestic violence, *see page 16*
Homelessness is more than a result of a lack of affordable housing and high poverty & unemployment: homeless families face many other risk factors compared with at-risk or poor stably housed families.

<table>
<thead>
<tr>
<th>Risk factor</th>
<th>Homeless or doubled-up (n=742)</th>
<th>Unstably housed (n=833)</th>
<th>Always stably housed (n=343)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low employment years 1–5 (fewer than 32 weeks/year)</td>
<td>82%</td>
<td>76%</td>
<td>69%</td>
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<tr>
<td>Poor physical health years 1–5</td>
<td>80%</td>
<td>72%</td>
<td>59%</td>
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<tr>
<td>Low social support years 1–5</td>
<td>78%</td>
<td>67%</td>
<td>66%</td>
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<tr>
<td>Less than high school degree at baseline</td>
<td>60%</td>
<td>47%</td>
<td>49%</td>
</tr>
<tr>
<td>Single at baseline</td>
<td>56%</td>
<td>40%</td>
<td>23%</td>
</tr>
<tr>
<td>Teen birth</td>
<td>51%</td>
<td>53%</td>
<td>32%</td>
</tr>
<tr>
<td>Multiple-partner fertility by year 5</td>
<td>46%</td>
<td>52%</td>
<td>38%</td>
</tr>
<tr>
<td>Ever cohabited years 1–5</td>
<td>42%</td>
<td>52%</td>
<td>28%</td>
</tr>
<tr>
<td>Depressed years 1–5</td>
<td>28%</td>
<td>27%</td>
<td>9%</td>
</tr>
<tr>
<td>Domestic violence years 1–5</td>
<td>22%</td>
<td>28%</td>
<td>9%</td>
</tr>
<tr>
<td>Drug use years 1–5</td>
<td>11%</td>
<td>8%</td>
<td>3%</td>
</tr>
</tbody>
</table>

Source: ICPH analysis of Fragile Families and Child Wellbeing data. n = 1,918. Excluded are mothers who did not participate in the year-five survey, do not live with the focal child at least half of the time at year five, do not have valid sample weights, and do not report an average (baseline to year five) income-to-poverty ratio greater than 1.3.
More Risks = Higher Likelihood of Homelessness

PREDICTED PROBABILITIES OF EXPERIENCING HOUSING INSTABILITY
(by number of risks)

- Homeless or doubled-up (n=742)
- Unstably housed (n=833)
- Always stably housed (n=343)
What are the effects on children?

• Poor health, see page 18 in the Almanac
• Food insecurity, see page 44
• Developmental delays, lower academic performance, see page 24
• Effects can last a lifetime, see page 4

• Programs that work: Head Start (see page 22) McKinney-Vento (see page 29)
United States: 57% increase to 1,065,794 students
Pennsylvania: 43% increase to 18,531 students
Homelessness Service Models

• A continuum of need
  (one-size does not fit all)
  – Prevention
  – Emergency shelter
  – Rapid re-housing
  – Transitional housing
  – Permanent supportive housing
Prevention: Overview

• Minimizes both the negative effects of homelessness on family well-being & save $$$$$

• Homelessness Prevention and Rapid Re-housing Program (HPRP) conflicting mandate: serve families with highest need and those with greatest likelihood of remaining housed after assistance ends

• Spent 3x more on prevention (7/09–3/11)
  – needed to spend money quickly
  – Most communities already had prevention programs in place, but not rapid re-housing
Prevention: Challenges

• Targeting who would become homeless “if not but for” prevention assistance is really hard

• Those served by HPRP didn’t look like homeless
  – 6x more likely to live in own housing (66% vs. 12%)
  – Half as likely to live doubled up (15% vs. 30%)

• Targeting tools unique to locality & time period

• Targeting tools become less effective over time
Prevention: Lessons

• Most prevention clients wouldn’t have become homeless, but HPRP distributed money to extremely low income clients after recession

• HUD learned to:
  – Spend more $$$$ on rapid re-housing vs. prevention
  – Communities should restrict prevention to diversion

• 2013 NYC study offered first evidence that prevention can be cost neutral and reduce LoS
Homelessness Service Models

• A continuum of need
  (one-size does not fit all)
  – Prevention
  – Emergency shelter
  – **Rapid re-housing**
  – Transitional housing
  – Permanent supportive housing
  – Mainstream benefits
Rapid Re-housing: Motivation

- Influenced by one academic study by Culhane et al. 2007
  - Easy to accept approach for families since same framework applied from research on chronic singles
- Popularized by a separate 2010 HUD cost study
  - Shelter and transitional housing are more expensive than permanent supportive housing since more supportive services cost more money
- Solidified into law (2009) and implemented before evaluations could be completed (still unpublished)
  - Partially due to recession too
Culhane’s Typology of Homeless Families (2007)

• Recommendation: system should be mostly housing first
  – 95% of families didn’t have intense service needs.

• Limitations
  – One cluster is missing from results
  – Ignored patterns of shelter stays
  – Treated all families the same regardless of age
  – Limited variables on service needs

• No wholesale policy overhaul should ever be based on one study or one person’s research.
# RRH Program Overview

<table>
<thead>
<tr>
<th>Program</th>
<th>Rapid Re-housing Demo</th>
<th>HPRP</th>
<th>New ESG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time period</td>
<td>23 sites funded in 2009 (available until expended)</td>
<td>July 2009–September 2012</td>
<td>January 2012–present</td>
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<tr>
<td>Overview and eligibility</td>
<td>Evaluate RRH for families with at least one moderate barrier to housing and are likely to sustain stable housing</td>
<td>Conflicting mandate: serve families most in need of aid and are most likely to sustain stable housing</td>
<td>Direct as much funding as possible to RRH, conserve shelter for most urgent housing needs. Supportive services just as critical as financial aid</td>
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<tr>
<td>Financial assistance</td>
<td>Leasing for 3–6 or 12–15 months</td>
<td>TBRA for less than 3 or 4–18 months</td>
<td>TBRA or PBRA for less than 3 or 4–18 months</td>
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<tr>
<td>Supportive services</td>
<td>Housing placement, case management, legal assistance, literacy training, job training, mental health services, child care services, and substance abuse services. Grantees are limited to spend no more than 30% of funds on supportive</td>
<td>Housing search and placement, case management, legal services, credit repair, and outreach. Child care and employment training are ineligible services.</td>
<td>Housing search and placement, housing stability case management, tenant legal services, landlord-tenant mediation, and credit repair.</td>
</tr>
</tbody>
</table>
Does a short- or medium-term subsidy lead to self-sufficiency?
Rapid Re-housing Recap

• For cost reasons, the government was eager to switch the family homelessness system to rapid re-housing, and one study supported this change.
• Rapid Re-housing for Families Demonstration Program still hasn’t released results
• HUD: direct as much funding as possible to rapid re-housing
  – Conserve shelter for most urgent housing needs
  – Supportive services just as critical as financial aid
Homelessness Service Models

- A continuum of need
  (one-size does not fit all)
  - Prevention
  - Emergency shelter
  - Rapid re-housing
  - **Transitional housing**
  - Permanent supportive housing
  - Mainstream benefits
Life After Transitional Housing for Homeless Families (2010)

Housing Stability of Families During the Year After Transitional Housing Exit

- Own housing, same unit whole time: 60%
- Own housing after short stay somewhere else: 19%
- Always own housing, moved at least once: 5%
- One or more moves, at least one to own housing and one to somewhere else: 13%
- Never own housing: 4%

Two percent of families experienced an episode of homelessness.
Life After Transitional Housing for Homeless Families (2010)

- Employment rate of mothers
  - Program entry: 18%
  - Program exit: 61%
  - 12 months after exit: 65%

- 86% of families maintained the same household composition for at least one year after leaving transitional housing.

- Longer stays were associated with:
  - Higher educational attainment rate
  - Higher employment rate
  - Working more consistently after program exit
  - Greater likelihood of having own residence
  - Better mental health among children
Planning to End Family Homelessness (HUD)

• Centralized or coordinated system for assessments and intake
  – ESG and CoC Program grantee requirement (HEARTH Act interim rules)
  – Multiple models available to fit local needs
    • Single point of entry, multiple points of entry, no wrong door, hotline number
  – Locally developed screening tool (used by all service providers)
Planning to End Family Homelessness (ICPH)

• Choosing target populations based on local needs assessment
  – Data collection to establish the “lay of the land”
  – Reassess periodically, adapt to changing needs

• Choosing shelter and service models that fit local needs
  – Data collection should drive the selection process
  – Evaluate the research on each model critically
# Planning to End Family Homelessness (ICPH)

<table>
<thead>
<tr>
<th>CoC Number</th>
<th>CoC Name</th>
<th>ES for Families</th>
<th>TH for Families</th>
<th>PSH for Families</th>
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</tr>
</tbody>
</table>
Planning to End Family Homelessness (ICPH)

• Setting specific but realistic goals
  – Establish baselines, benchmarks, responsible parties, deadlines for each goal
• Different strategies for different subpopulations
  – Veteran families, parenting youth, householder with mental illness, etc. have different needs
• Tracking progress through ongoing data collection
• Releasing updates on progress annually
  – List accomplishments, barriers to progress, steps to overcome barriers, updated demographic information, revision of goals
HUD’s Recommendations

- Prevention – limit to diversion; targeting Emergency shelter – low need; exit on own
- Rapid re-housing – low to moderate need; supportive services equally as important as subsidy
- Transitional housing – high need
- Permanent supportive housing – limit to chronic, disabilities
- Connection to mainstream benefits
Family Options Study (HUD)

- **Housing models**
  - Community-based rapid re-housing
  - Project-based transitional housing
  - Permanent housing subsidies
  - Control group (usual care)

- **Outcome measures**
  - Housing stability
  - Family Preservation
  - Self-sufficiency
  - Adult well-being
  - Child well-being

- Final report expected in 2014

www.ICPHusa.org
Ending Family Homelessness

- One size does not fit all, use most appropriate intervention based on family need
- Tailor solutions to your community needs
- Ending family homelessness doesn’t necessarily require more money, just a reallocation of priorities/resources
  - Remember what happened when we focused on chronic singles and veterans?
QUESTIONS???

The American Almanac of FAMILY HOMELESSNESS

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