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Executive Summary

In the Council of Economic Advisors (CEA) The State of Homelessness in America report, CEA pointed out that overall homelessness has increased in America; and in many communities, homelessness has reached a crisis level.

In just five years, unsheltered homelessness increased 20.5 percent from 175,399 in 2014 to 211,293 in 2019.
Simultaneously, the number of year-round beds available to serve persons experiencing homelessness through subsidized Rapid Rehousing and Permanent Supportive Housing rose from 338,065 to 482,254, a 42.7 percent increase in five years.

Despite significant increases in funding and beds, overall homelessness has been increasing in the United States.

The federal government's policy shift in 2013 to prioritizing housing first as a one-size-fits-all approach has not worked to reduce homelessness for all populations and communities.

Policies that do not address the real root causes of homelessness combined with high housing costs in overregulated markets have exacerbated the homelessness condition in America.

As many community leaders are coming to realize, the status quo is simply not working. Reforms and changes are needed to reverse the growing homelessness crisis in America. Artificial changes in definitions and reclassifications that purport temporal improvements only give false hope. The time has come for real change, for real reforms.

Our aspirational goals should move beyond primarily providing subsidized housing assistance. As Congress has suggested, we must optimize self-sufficiency in federal homeless assistance programs and reduce reliance on public assistance.

This strategic plan, **Expanding the Toolbox**: **The Whole-of-Government Response to Homelessness**, envisions an approach that dramatically reduces homelessness by engaging and assessing families and individuals with a trauma-informed approach to care that addresses the real root causes of homelessness. This plan focuses on:

- The Importance and Power of The Dignity of Work,
- Mental Health and Trauma Informed Care Are Critical,
- Affordable Construction Leads to Affordable Housing,
- Prevention Will Save Money While Reducing Trauma,
- The Need for Population Specific Programming.
- Renewed Focus on Racial Disparities,
- Promotion of Alternatives to Criminalizing People Experiencing Homelessness, and
- Importance of National Emergency Readiness.

Together we can make the necessary changes to dramatically reduce homelessness in America, and most importantly, to help improve the lives of the families and individuals experiencing homelessness.

The Whole-of-Government Response to Homelessness

The Expansion of the Toolbox

The US Interagency Council on Homelessness (USICH) was born of our nation's noble desire to prevent and dramatically reduce homelessness. Supported by tribal, territory, state and local governments and private partners, USICH works to reduce homelessness, with the ultimate goal of one day ending it. Collaborating with federal agencies plus state and local stakeholders, USICH uses national-level engagement to continuously refine and improve the federal response to homelessness.

USICH

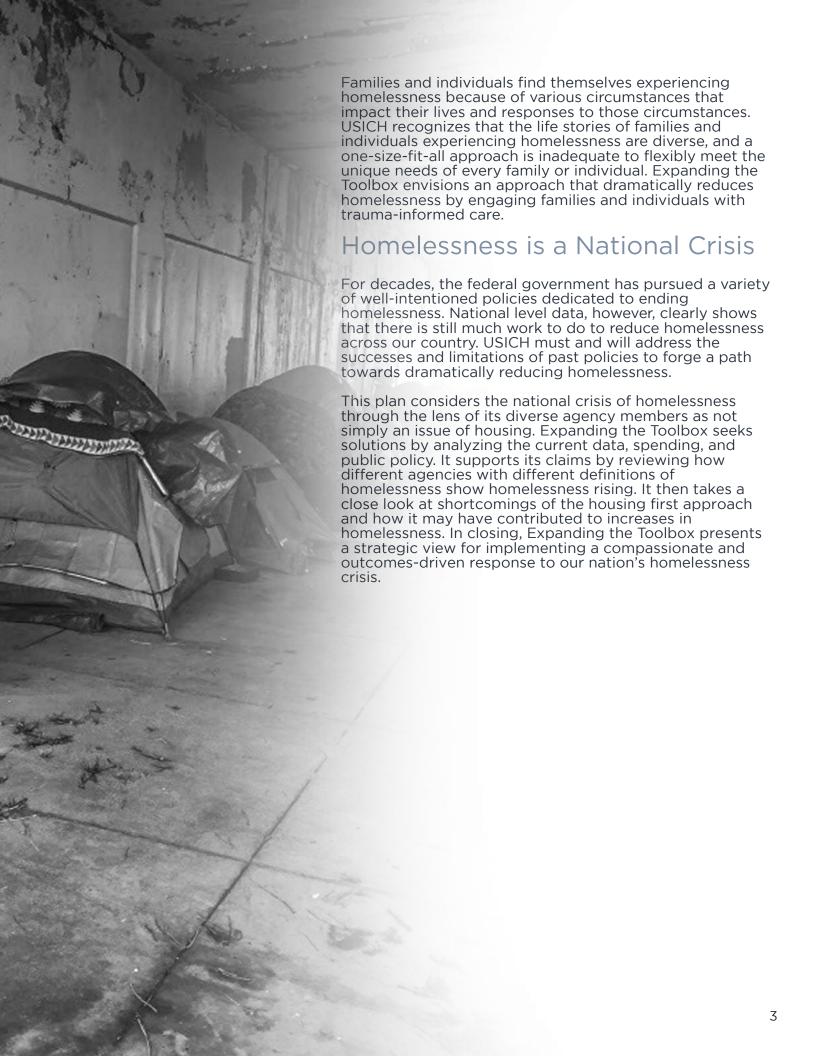
The 19-member USICH coordinates the Federal response to homelessness in order to maximize the effectiveness of Federal resources to address the root causes of homelessness (e.g. substance use disorders, mental health issues, domestic violence, trauma and stress related disorders, economic family factors, etc.).

At the organization's inception in 1987, a bipartisan coalition of congressional leaders recognized the urgent need "to protect and improve the lives and safety of the homeless, with special emphasis on families and children." This pledge, made by our nation's 100th Congress and signed by President Reagan, laid the foundation on which USICH stands today.¹

Expanding the Toolbox

Throughout its history, USICH has always anchored itself to the belief that it is the moral obligation of an honorable nation to help every single citizen to obtain safe and stable housing. Congress, on several occasions, has made it an explicit goal to end homelessness. To this end, Expanding the Toolbox draws on the expertise of direct service providers, individuals with lived experience, and advocates to identify appropriate solutions for each unique family and individual experiencing homelessness.





Measuring Success

What Gets Measured Gets Done

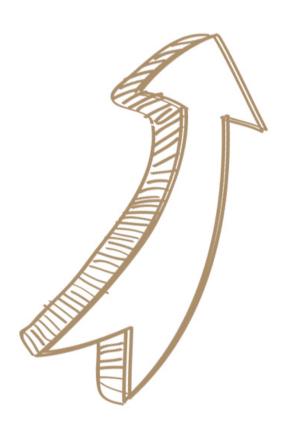
Despite funding increases, homelessness has gone up in most sub-group populations and within many regions of the country. Policy makers and stakeholders need to make sure they are looking at the whole picture when making regulatory and funding decisions. It is important to note that the federal government has two different definitions of homelessness that are tailored to the respective programs and are used to determine program eligibility. Per the McKinney-Vento Homeless Assistance Act, ED has one definition of homelessness, and HUD another. ED and HUD also use different metrics and methodologies to measure the number of families and individuals experiencing homelessness and success. When looking at the Department of Education (ED) and Department of Housing and Urban Development (HUD) data more closely - and together - homelessness is increasing across the spectrum no matter which definition one uses.

Homelessness Has Been Increasing While Federal Funding Has Been Increasing

In 2020, Congress appropriated over \$6.6 billion for targeted homelessness assistance programs.² These funds do not include the over \$4 billion allocated to address COVID-19 assistance targeted to homelessness nor other mainstream federal programs, which also provide substantial support to homelessness populations.³

Federal funding for targeted homelessness assistance has increased every year in the last decade, resulting in being more than 200 percent of what it was a decade ago. However, from 2014 to 2019, people experiencing unsheltered homelessness increased by 20.5 percent nationally.⁴ This troubling trend is evident in both federal agencies that collect population estimates of people experiencing homelessness – ED and HUD.

Every American citizen has a right to know our return on the federal investment in fighting homelessness. The success of these efforts is measured in the most precious national resource: human lives. Some have posited that progress has been made in reducing homelessness, yet despite increases in funding, the data tells a different story.



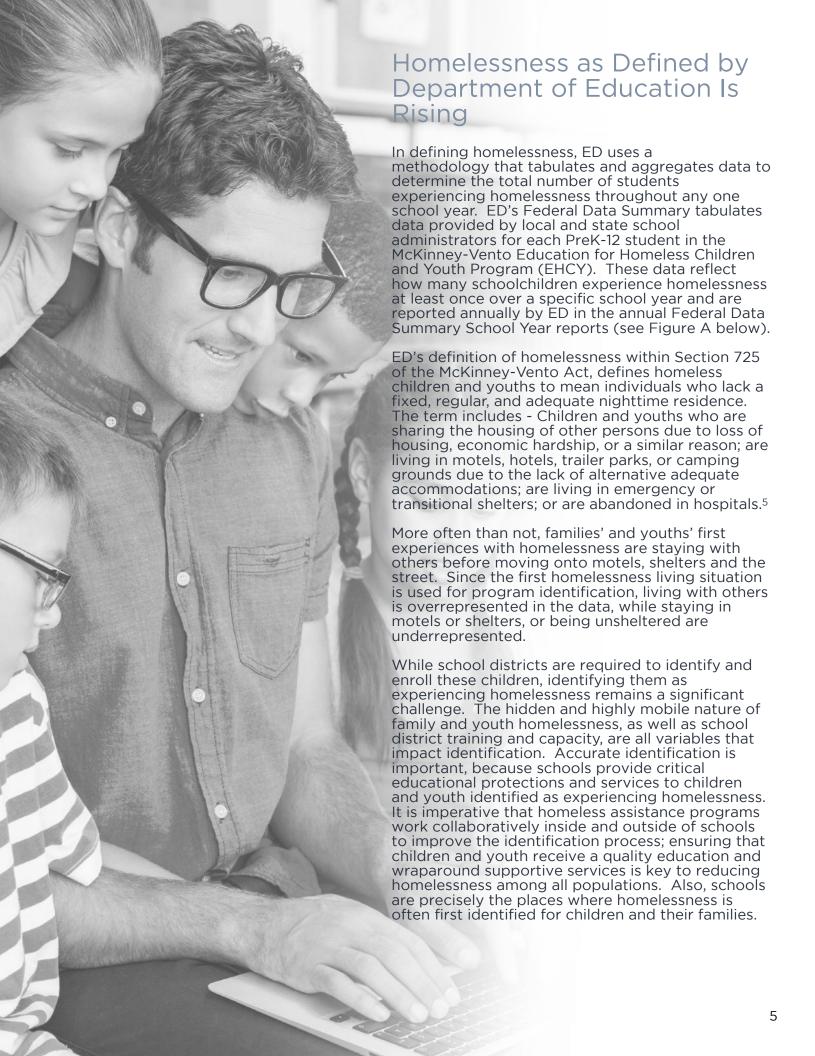


Figure A

The number of children and youth experiencing homelessness (PreK-12) continues to rise.6

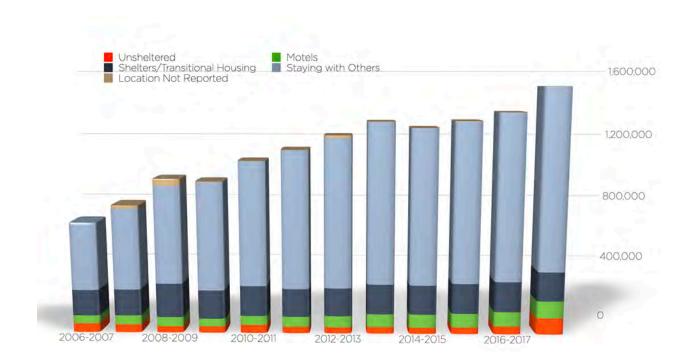


Figure A above reflects the total number of students formally identified as experiencing homelessness within the McKinney-Vento Education for Homeless Children and Youth Program. It should be noted that this tally excludes students' parents and siblings not enrolled in school. The red bar reflects the number of students identified as being unsheltered, the green are students in motels, and the dark blue are students in shelters and transitional housing. The light blue reflects the number of students staying with others, sometimes referred to as "doubled-up." All totaled, this chart reflects the total number of students identified as experiencing homelessness per the Department of Education.

Key Takeaways

- The total number of children and youth identified as experiencing homelessness and enrolled in public schools increased from 679,724 in the 2006–2007 school year to 1,508,265 in the 2017-2018 school year, a 122 percent increase. The increase within the "staying with others" category arises from a combination of better identification of students not previously identified as experiencing homelessness as well as new increases in homelessness.
- The total number of students living in shelters, transitional housing, motels and in unsheltered situations increased from 283,137 in the 2012-2013 school year to 390,760 in the 2017-2018 school year, a 38.1 percent increase.

- The number of students in unsheltered situations (on the street and in vehicles) more than doubled between the 2016-2017 school year and the 2017-2018 school year, a 104 percent increase.⁷
- Beyond the K-12 statistics, the number of children experiencing homelessness enrolled in Head Start rose from 26,200 in the 2007–2008 school year to 58,771 in the 2018–2019 school year, a 124 percent increase.
- It is important to note that a crucial percentage of adults experiencing homelessness first experienced homelessness as a child. For example, HUD's point-in-time count survey reports that 20 percent of the adults experiencing homelessness in Los Angeles first experienced homelessness as children. In Seattle and Santa Cruz, it was 18 percent, and in San Francisco, it was 15 percent.

Homelessness as Defined by Department of Housing and Urban Development Is Rising

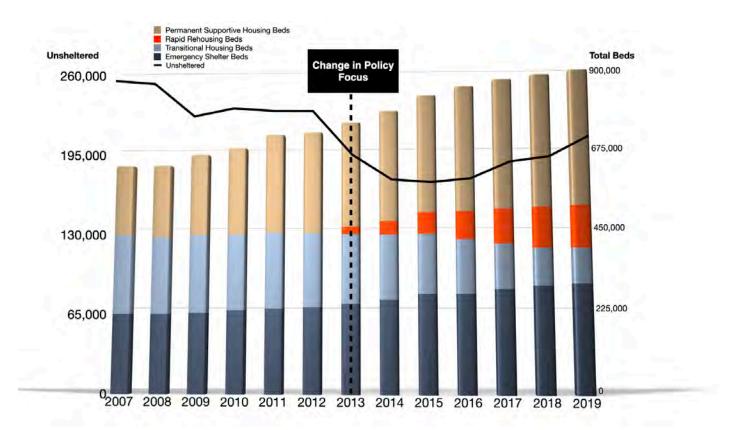
HUD's Annual Homeless Assessment Reports (AHARs) provide data on five groups of individuals and their housing circumstances: unsheltered; in emergency shelters; in transitional housing; in rapid rehousing; and in permanent supportive housing. HUD provides estimates of homelessness based on both "point-in-time count" (PIT) counts and one-year Homelessness Management Information Systems data in these AHARs. The PIT estimates the total number of individuals experiencing homelessness on any given night. These data are initially gathered at the local level, in accordance with HUD guidance.

In simple terms, the AHAR documents how many people are experiencing sheltered homelessness and how many people are experiencing homelessness in unsheltered locations.

HUD's definition of people experiencing homelessness includes: a) individuals and families who lack a fixed, regular, and adequate nighttime residence (includes a subset for those who reside in an emergency shelter or a place not meant for human habitation and who is exiting an institution where he or she temporarily resided); b) individuals and families who will imminently lose their primary nighttime residence; c) unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; and d) individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or lifethreatening conditions that relate to violence against the individual or a family member.8



Figure B
The homelessness assistance system has expanded, while unsheltered homelessness has risen dramatically from 2014 to 2019 after a change in policy focus.⁹



In Figure B above, the solid black trend-line represents the point-in-time count of unsheltered individuals. The dark blue, light blue, red, and gold represent emergency, transitional, rapid-rehousing, and permanent supportive beds, respectively. When totaled together, these latter four cohorts reflect the aggregated year-round homelessness assistance system in terms of beds and housing units. It should be noted that the utilization rates vary among jurisdictions.

Key Takeaways

- The total number of unsheltered individuals dropped by 31.4 percent from 2007–2014.
- Unfortunately, this encouraging trend reversed course, and the total number of unsheltered individuals rose by 20.5 percent over the next five years.
- The 2013 NOFA formally shifted to penalize programs with service participation requirements and incentivize housing assistance with low barriers to entry and no service participation requirements.
 Speed of placement became the focal measuring stick supplanting robust holistic wraparound services combined with housing to optimize self-sufficiency and reduce returns to homelessness.
- Local communities responded by changing program and funding priorities. This caused the number of transitional housing beds to fall precipitously, from 197,192 to 95,446, a drop of 101,746 units. During this same time period, the number of newly categorized rapid rehousing beds went from 0 to 112,961.10

Housing First

History & Drawbacks

Consistent with HUD's Continuum of Care NOFA in 2013, many other federal homelessness assistance programs also prioritized subsidized housing and prevented service participation requirements of critical wraparound services through changes in regulations, grant application scoring factors, program guidance and encouragement from technical assistance consultants. Taken together. it was clear what continuums of care and local projects needed to do to receive funding - change their programs to reflect the housing first approach or risk defunding. These changes in course impacted the many programs and organizations that make up most of the direct front-line homelessness service providers, including faithbased or transitional housing providers.¹³

One way to make sense of what occurred in 2013 is to understand a policy adopted by the federal government called housing first. Housing first is perhaps the most single significant change to federal homelessness assistance policy in at least the past decade. Many have promoted housing first as the ideal solution to homelessness. Others, such as the Institute for Children, Poverty and Homelessness (ICPH), point out that the "one-size-fits-all" approach does not work for all populations or in all locations, citing statistics in New York City that suggest it is destined to fail. It is therefore important to understand the official definition of housing first.

Advocates promote a housing first approach that utilizes government-subsidized housing vouchers and assistance with no preconditions or service participation requirements.

Many promote housing first as the only tool needed in the toolbox. They believe the provision of housing only solves homelessness and housing first provides housing. On December 20, 2013, a Notice of Funding Availability (NOFA from the Department of Housing and Urban Development formally prioritized housing first and for the first time formally funded rapid rehousing while reducing funding of transitional housing, which in turn dramatically altered the way federal homelessness assistance is allocated:

Housing first is a model of housing assistance that is offered without preconditions (such as sobriety or a minimum income threshold) or service participation requirements, and rapid placement and stabilization in permanent housing are primary goals.¹²

For example, between 2012 and 2019, changes to federal funding notices deprioritized transitional housing, which resulted in the dramatic loss of transitional housing beds. In many, if not most cases, the same local agencies that were providing the transitional housing beds were now providing the rapid rehousing beds, most often within the same buildings for the same individuals. Even though transitional housing and rapid rehousing have the same HUD regulatory 24-month limit, HUD considers people living in rapid rehousing programs as no longer experiencing homelessness, while people living in transitional housing are still experiencing homelessness.¹⁴

"Reclassifying" 101,746 individuals that moved from transitional programs to rapid rehousing programs as no longer experiencing homelessness has been cited as evidence of the reduction of homelessness. This reclassification has also been used to support the effectiveness of housing first, thus this may not represent a true reduction.

The conclusion from ED and HUD data is that homelessness is increasing, irrespective of how it is defined. But as discussed above, policy changes and funding priorities do have an important impact on the size of homelessness populations. What is also clear is that homelessness will not be solved by redefining technical terms and programs. Yet over the last 15 years, federal definitions of homelessness and chronic homelessness have been revised several times, leading to artificial data changes that purported to demonstrate temporal improvements.¹⁵

Unfortunately, shortly following the policy shift towards no preconditions or service participation requirements in homeless assistance, unsheltered homelessness rose from 175,399 in 2014 to 211,293 in 2019, a 20.5 percent increase in five years. Simultaneously, during this exact timeframe, the number of individuals receiving subsidized Rapid Rehousing and Permanent Supportive Housing vouchers rose from 338,065 to 482,254, a 42.7 percent increase in five years.

Federal homelessness assistance changes begat similar changes at the state level. In 2016, the California legislature and governor made statutory changes that required all California state-funded homelessness programs to operate under housing first plans. Every dollar spent on homelessness from the State of California must be spent consistent with a housing first approach.

In California, from 2015 (the year before the State restricted state-funded projects to only housing first) to 2019, unsheltered homelessness in California rose 47.1 percent in four years and overall homelessness (as represented by all five AHAR categories) rose from 115,738 to 151,278, a 30.7 percent increase. It should be noted that beyond the shift to housing first only policies, California's high costs of housing has also contributed to these increases. ¹⁹ California now boasts nearly one in four of America's homelessness population, even though it contains only 12 percent of the United States population. California's state-wide prescriptive policy should be considered when understanding the state's significant rise in homelessness and its significant portion of the nation's homelessness population.

Data also demonstrate concerning results in cities that have aggressively embraced housing first. The rate of homelessness rose steadily and dramatically in cities like Los Angeles, San Francisco, Seattle, and New York City as these cities embraced housing first policies.²⁰



Two of the most important tools in the toolbox to end homelessness are traumainformed care and affordable housing. When they are united, housing stability is created for vulnerable populations. The next section elaborates on this and various other solutions that will expand the toolbox.



The housing first approach has produced concerning results. Advocates for housing first argue that increasing the number of subsidized vouchers and permanent supportive housing units decreases unsheltered homelessness. Yet unsheltered homelessness increased 20.5 percent while subsidized housing vouchers increased by 42.7 percent.²¹ Taken together, these facts suggest that the provision of subsidized or dedicated housing has not led to reducing the total population of people experiencing homelessness.

One significant feature of the housing first approach is the elimination of participation requirements in order to receive housing and assistance. Housing first proponents argue issues such as sobriety, participation requirements and program compliance should not be a barrier to continuing to receive subsidized housing. Yet participation requirements may well be a key element to improved health and increased self-sufficiency, thus reducing the number of people experiencing homelessness.

The welfare policy reforms enacted in 1996 required program participation to receive government assistance. Pell Grants require recipients to make satisfactory academic progress, take a full class-load and maintain a certain grade point average (GPA). Unemployment benefits require program participation, including demonstrated participation in prescriptive job searches. Temporary Assistance for Needy Families (TANF), which provides benefits to families in poverty, requires beneficiaries to work or advance their education.

A one-size-fits-all approach can actually harm many populations experiencing homelessness that need and benefit from customized, trauma-informed wraparound services. The federal toolbox must include approaches that respect the unique circumstances of each individual and family experiencing homelessness.

Since federal funding increases for homelessness assistance programs have failed to reduce the number of people experiencing homelessness, policy makers must look to other factors that cause individuals and families to experience homelessness. These root causes are many and varied and often require a variety of programming or treatment options.

Housing first should be considered as one tool in the toolbox, but not the only tool in the toolbox. Other approaches have promise. Prioritizing housing first as the entire toolbox subordinates and disregards other approaches.

Solutions

Solutions Overview

National and state level data combined with input from stakeholders and people with lived experiences guide this strategic plan. Expanding the Toolbox allows for broader and more vigorous responses by adding the information and voices of direct service providers who have experienced measurable success through policies that promote other approaches that incorporate robust wraparound supportive services. By incorporating information from direct front-line service providers, we posit there are better approaches that allow local service providers and continuums of care to create customized solutions that will produce better outcomes within their respective local communities.

Our aspirational goals should expand our thinking to move beyond the basic goal of providing subsidized housing assistance. As Congress has suggested, we must optimize self-sufficiency through the reduction of reliance on public assistance and implement policies that pursue this as an end goal. Communities should prioritize projects that increase self-sufficiency. Regulatory constraints should be removed, and innovation should be encouraged. Program quality should be measured by reductions in homelessness and by increases in exits from any kind of subsidized housing to unsubsidized market rate housing.

One of the most menacing but easily made errors in measuring success is to measure outputs rather than outcomes. Outputs are process measurements, while outcomes are the ultimate desired goals. Completing a job training program is an output, finding and keeping a job is an outcome. When measuring outputs, the system focuses on well intentioned, altruistic activities. When measuring outcomes, the system focuses on the long-term success and stability of the people we are tasked to empower. In order to better evaluate programs, continued efforts should be made to improve overall data quality.

The provision of housing must be balanced with quality wraparound services that lead to improvements in economic status, housing stability and self-sufficiency. All federal programs assisting people experiencing homelessness should support wraparound services, and those services should be evaluated according to how well they improve a participant's life and housing status.

Expansion of the Toolbox

In attacking the issue of homelessness, the toolbox must include all approaches that successfully address the problem. Stakeholders must consider innovative ideas and reject the notion that there are any sacred cows. Advocates for families and individuals experiencing homelessness also recognize that what succeeds with one population group may be disastrous in another. Because of this, policies adopted should be flexible and avoid the danger of being a one-size-fitsall approach or being overly prescriptive in the way funding is appropriated and services are delivered.

People with lived experiences are the first to insist that solutions lie in eradicating the barriers that inhibit access to housing and wraparound services. Expanding the Toolbox, identifies how programming and policies can improve and sustain outcomes for America's most vulnerable and housing-insecure citizens.

Solution 1

The Importance and Power of the Dignity of Work

Homelessness can be reduced by expanding opportunities for jobs and job training to individuals who are on the economic margins of society, experiencing homelessness or at risk of losing housing. However, initial employment alone does not guarantee that an individual will reach economic stability and avoid homelessness. This troubling statistic confirms that securing a job does not guarantee economic success. Likewise, securing shelter alone does not automatically mean long-term housing stability.

Expanding the Toolbox underscores the importance of interagency collaboration to ensure that programs and services offered by one federal entity are enhanced by those of another and go beyond simply housing. People experiencing homelessness have benefitted from a "one workforce" approach to services — a model where a seamless pipeline of tailored services to the needs of the customer are provided once they walk in the door. Under such a model, a coordinated approach to resolving each separate aspect of care and service leads to better outcomes and results.

As emphasized in the HEARTH Act, Congress intended for homelessness assistance to optimize self-sufficiency among individuals and families experiencing homelessness. Therefore, to reduce homelessness and better serve people experiencing homelessness, prevention and reduction approaches that emphasize employment, empowerment and increasing self-sufficiency supported by housing and services should be scaled.

Employment provides people experiencing homelessness with income to afford housing and improves recovery outcomes for individuals with a mental or substance use disorders (SUDs), or both. Long-term sustainable solutions need to provide a pathway out of dependency on government assistance so that the cycle of homelessness and poverty can be broken. This relies on workforce training and employment for able-bodied adults. SAMHSA has identified programs that find great success by integrating employment supports to help build self-esteem and advance recovery from substance use disorders.

It is also important for providers to work with local businesses to expand opportunities for employment. Homelessness assistance providers must work with local workforce development boards and American Job Centers to ascertain the needs and trends of local employers. Providing individuals experiencing homelessness with viable connections to employers opens the door to training opportunities such as apprenticeships and on the job training (OJT). These connections can have a lifelong impact in the lives of individuals by putting them on the path to sustainable and long-lasting employment.

Strategic Action

Programs and communities should work with local workforce partners, employers and other public and private organizations to prioritize and incentivize training and employment opportunities for people experiencing homelessness.

Desired Outcome

Measurable increase in the number of individuals experiencing homelessness who obtain and retain employment for at least six months.

Solution 2 Mental Health and Trauma Informed Care Are Critical

The connection between mental illness, SUDs and homelessness is clear. Without proper interventions, individuals afflicted with mental illness and/or substance use disorders have a higher likelihood of experiencing homelessness than individuals without mental illness and/or SUDs.²² Furthermore, individuals experiencing homelessness with mental illnesses and/or SUDs often return to homelessness after becoming housed. Fortunately, mental illness and substance use disorders often can be successfully treated.

Mental health services need to be significantly expanded. Additionally, homelessness providers and communities must partner with appropriate state and local resources to effectively address mental illness and SUDs in order to reduce homelessness, relapses and unsafe behaviors. The facilities best suited to effectively address these often cooccurring challenges provide intensive case management and care programs to address on-site treatment.

Homelessness assistance providers should ensure their programs and housing are best suited for dually diagnosed individuals experiencing homelessness and should measure success by outcomes such as adoption of successful behaviors, increased sobriety and improved housing stability.

Strategic Action

Develop trauma-informed mental illness and substance use disorders and promote trauma-informed care across all systems and services.

Strategic Action

Learn from, be guided by and empower people with expertise from lived experiences.

Desired Outcome

Increase in the number of people successfully completing traumainformed care programs. leading to self-sufficiency and a corresponding reduction in the number and frequency of homelessness.



Strategic Action

Local governments should critically evaluate their zoning, housing permitting, regulations, and building fees in order to reduce costs. A forthcoming report from the White House Council on Eliminating Regulatory Barriers to Affordable Housing will provide additional direction on Strategic Actions.

Desired Outcome

Measurable increase in the stock of affordable housing on the market thus helping to reduce homelessness.

Solution 3 Affordable Construction Leads to Affordable Housing

The rising cost of housing has been a driver of homelessness, especially in communities where living costs are highest, and especially for families experiencing homelessness. It is important to engage the factors contributing to this problem. Regulatory demands placed on developers inflate construction costs. Many cities and counties have excessive building fees. Zoning restrictions limit where and how many housing units may be built. All of these contribute to a situation that leaves many low-income Americans unable to access affordable housing.

Expanding the Toolbox celebrates stakeholders who have pursued strategies to increase the affordable housing stock and access to it. It is imperative to increase the number of homes on the market that are within the financial reach of more Americans.

President Trump established the White House Council on Eliminating Regulatory Barriers to Affordable Housing. Americans living on the financial margins face great challenges in all regions of the country where policies have created high housing costs. The Council is charged with reviewing the policies and practices of communities suffering great shortages in affordable housing and those of communities that have successfully reduced housing costs to further inform which policies reduce the stock of affordable housing and which increase the supply.

Almost half (47 percent) of all people experiencing unsheltered homelessness within the United States live in California.²³ Of the five cities with the highest rates of unsheltered homelessness populations, four are in California.²⁴ To address this crisis, California must reduce its regulatory burdens on housing construction. For example, CEA estimates that homelessness would fall by 54 percent in San Francisco and by 40 percent in Los Angeles as a result of substantial regulatory reform.²⁵ It is clear that the Golden State's homelessness and housing policies have made California the most housing-insecure state in the United States. Exorbitant regulatory costs to build housing in California has resulted in less development. At the same time, regressive taxes and policies burden low-income households reducing their ability to afford housing and increasing their vulnerability to becoming homeless.

Solution 4

Prevention Will Save Money While Reducing Trauma

The causes for homelessness are wide-ranging. As we identify key solutions to dramatically reduce homelessness in America, it is equally important to identify areas where we may prevent individuals and families from experiencing homelessness in the first place. The cruelty of this vicious cycle is evidenced in the fact that children who experience homelessness are far more likely to experience homelessness as adults.²⁶

We must place high priority on ending the generational cycles of homelessness. By following the data, we are better equipped not only to end the cycle, but also to address other problematic factors that increase a person's chance of experiencing homelessness.



Before the novel coronavirus (COVID-19) pandemic, over 20 million American households were spending more than 30 percent of their income on rent. Nearly 7.7 million renter households were spending over half of their income on rent.²⁷

These numbers, against the backdrop of the stagnant supply of housing across the country and economic challenges faced by the pandemic, could place 30 to 40 million people at risk for evictions.²⁸

Prevention programs are most effective when targeting lowincome people who face an unexpected financial shock, like unbudgeted medical expenses or a loss of a job, and do not have a personal safety net.

Evictions can be a major factor in whether an individual or family will experience homelessness. Evictions can be especially devastating in high-cost-of-living areas like Seattle. A 2016 study by the Seattle Women's Commission found that, among tenants who had been evicted: more than 37.5 percent became unsheltered; 25 percent moved into shelters; and another 25 percent moved in with family or friends. Only 12.5 percent found another home of their own. Other studies examining the effects of evictions on lowincome families report similar findings.²⁹

For instance, on average, pre-Covid-19 evictions occurred because a renter owed less than \$600 in back rent.³⁰ It is important to understand the impact that evictions have on entry into homelessness, and to provide proactive solutions to curb evictions arising from the COVID-19 pandemic.



Strategic Action

Identify, evaluate and promote effective eviction prevention programs that provide support and rental assistance services to help renters stay in their homes.

Desired Outcome

At the local level, have fewer renters evicted and forced into homelessness because of being behind on their rent by two months or less.

Strategic Action

Provide immediate wraparound supportive services, including job training and employment assistance, to help guide young people aging out of foster care to advance successfully into the next phase of life.

Youth Exiting Foster Care

According to the Midwest Study by the Chapin Hall Center for Children, more than half of the 26-year-olds surveyed had experienced homelessness at least once since exiting foster care. Almost a quarter of respondents reported experiencing homelessness at least four times or more.³¹

Because we know young adults who exit foster care are at a higher risk of experiencing homelessness, it would be wise to use the data to inform policy and programs around foster care exits. The data show that leaving youth without wraparound supportive services leads to housing instability.

Desired Outcome

At the local level, have fewer renters evicted and forced into homelessness because of being behind on their rent by two months or less.



Individuals Exiting the Criminal Justice System

Formerly incarcerated individuals are 10 times more likely to experience homelessness than their fellow citizens are.³² Tracking and supporting ex-offenders is easier immediately after they exit correctional facilities, which is when their chances of experiencing homelessness are greatest.

People with criminal records face many challenges when it comes to successfully reentering society. Their job prospects are diminished, making them even more financially vulnerable and housing insecure. Moreover, they may face barriers when accessing low-income public housing.

Strategic Action

Ensure that youth released from incarceration have needs met that take into account age, brain development and trauma-informed care are factors communities should consider in reducing recidivism among youth experiencing homelessness.³³

Strategic Action

Begin discharge planning and reentry assistance collaboration between criminal justice agencies and homelessness assistance services at least six months before discharge from a correctional facility, allowing time to coordinate targeted housing and services interventions.

Strategic Action

Provide wraparound support services and holistic case management to help total incarcerated populations, prior to exiting prison, find employment, as well as safe and affordable housing.

Strategic Action

Ban the box in job applications that requires disclosure of prior incarceration; this will give previously incarcerated individuals a more level playing field when applying for jobs.

Desired Outcome

Reduce the number of individuals with criminal records who start to experience homelessness.

Strategic Action

Identify areas of public-private partnerships and collaborations that allow faith-based organizations to provide housing with wraparound supportive services.

Desired Outcome

Increased placements of individuals and families into successful programs.

Strengthen Support Offered to Community and Faith-Based Organizations

Many of the programs most successful in helping individuals reach self-sufficiency and exit homelessness are led by community and faith-based organizations that do not follow the housing first model.

According to a 2017 study by Baylor University, religious organizations in major cities provide more than half of the emergency shelter beds for people experiencing homelessness. Nationally, the number is significantly higher. The report also found that cities with higher participation by religious groups had lower percentages of unsheltered people.³⁴

Often faith-based organizations have service participation requirements for their programs. A funding structure that penalizes such organizations from participating in homelessness assistance programs limits access to a valuable tool for ending homelessness.

It is important to give America's families and individuals who are experiencing homelessness access to programs that work best for their unique needs. The emphasis on housing first approaches leads to fewer faith-based organization receiving federal funding. The problem of ending homelessness is simply too massive to exclude organizations and programs that have records of success.



Solution 5

The Need for Population Specific Programming

One-size-fits-all programming is sub-optimal and sometimes dangerous. For example, it is important to understand that the needs of a runaway youth are quite different from those of an older adult experiencing homelessness. Likewise, the needs of urban communities are different from rural areas. All programing should meet and engage families and individuals "where they are," with tailored and customized trauma-informed care. As members of the lived-experience community often say, people experiencing homelessness should not be traumatized a second or third time. It is important to note that individuals with disabilities fall within each of these sub-group populations and should be considered as strategies are developed moving forward. Programs should address the unique needs of families and individuals experiencing homelessness.

Improving Outcomes for America's Veterans

The success achieved in reducing homelessness among veterans provides an excellent case study in the advantages of breaking down the silos walling off federal, state and local governments programs from each other and providing robust wraparound services. A concerted effort at all levels of government to increase veterans' access to permanent housing, combined with robust wraparound services, reduced the number of veterans experiencing homelessness on any given day by an estimated 50 percent between 2010 and 2019. During that same timeframe, the number of veterans experiencing unsheltered homelessness fell by an estimated 53 percent.³⁵

Strategic Action

Continue to effectively deploy HUD-VASH vouchers with wraparound supportive services and efficiently refer veterans experiencing homelessness to the program.

Desired Outcome

Continue to show a measurable decrease in the number of veterans experiencing homelessness.

Over the course of FY 2016, homelessness service programs provided emergency shelter or transitional housing combined with robust wraparound services to 124,709 veterans across America, according to HUD's Homeless Management Information System (HMIS) data. In addition, the Department of Veterans Affairs' Supportive Services for Veteran Families (SSVF) program, which provides housing assistance, served 67,581 Veterans in FY 2016. The federal government also funds nearly 90,000 permanent supportive housing units with wraparound services to veterans and their family members through the HUD-VA Supportive Housing program (HUD-VASH). Because of programs like SSVF and HUD-VASH, we have seen tremendous improvement.

There is work yet to be done to completely eliminate homelessness among veterans. On a given night in January 2019, an estimated 37,085 veterans experienced homelessness.

According to 2019 point-in-time count estimates, almost a third of all veterans experiencing homelessness live in California.

Strategic Action

Facilitate partnerships between housing agencies and child and youth service agencies to provide trauma-informed wraparound supportive services for families, with the goal of achieving self-sufficiency.

Strategic Action

Revise policies and practices to remove barriers to accessing federal early care, education, job training, employment, health and housing programs.

Desired Outcome

Annually improve the identification of children and youth experiencing homelessness in our nation's public schools, so that more may benefit from the services and supports necessary to achieve in school and in life.

Greater Support for Children, Youth and Families

As there was a focus a decade ago on veterans who were experiencing homelessness, there now needs to be a focus on families, children and youth.

Families with children experiencing homelessness are much less visible, yet they have unique challenges that must be addressed if we are to stem the tide of adult homelessness. Research demonstrates the harmful impact of homelessness on children, as well as a strong connection between childhood homelessness and single adult homelessness. In order to decrease homelessness over the long-term, federal agencies must take focused action to help children, youth and parents experiencing homelessness to achieve healthy development, self-sufficiency and economic independence. All federal agencies and programs that touch the lives of families with children need to play a critical role in achieving these goals.

A high school degree is a minimal requirement for most people to obtain a job that allows individuals to pay for housing. In fact, the lack of a high school degree or GED is the single greatest risk factor for experiencing homelessness as a young adult.³⁶ Unfortunately, the graduation rate for students experiencing homelessness has been well below other low-income students in all but one state. Learning begins at birth, and children who participate in quality early childhood programs perform better in school and have better life outcomes and better paying jobs. In addition, a growing number of jobs require at least some form of postsecondary training or education, requiring an intentional focus on education and/or training after high school.

Desired Outcome

Annually increase educational attainment, training/certification, employment and earned income among parents experiencing homelessness.

Desired Outcome

Annually increase the completion rate of high school graduation of youth experiencing homelessness as well as the completion rate within postsecondary training, apprenticeship and education programs. Annually increase the participation rate of young children who are experiencing homelessness within quality early childhood programs (like Head Start, Early Head Start and public preschool).

Desired Outcome

Among families experiencing homelessness, annually increase the number who have access to quality childcare, in order to allow parents to focus on employment and education goals that directly lead to self-sufficiency. Among expectant mothers and mothers experiencing homelessness, annually increase the number participating in prenatal care programs and accessing maternal health services.

Focus on Unaccompanied Women

Responses to homelessness have resulted in research, policy initiatives and focused resources on specific subpopulations within the overall community of homelessness. However, the unaccompanied women cohort, sometimes referred to as women not accompanied with children, has never been a defined community of focus.

In the 2019 point-in-time count individual section there were 115,625 women reported as experiencing homelessness, which is formally defined as persons in households without a minor child. This also includes many women experiencing domestic violence. Unaccompanied women represent about 29 percent of all individuals experiencing homelessness. Between 2015 and 2019, the number of overall unaccompanied women increased 15.4 percent, while the number of unsheltered unaccompanied women increased 40.0 percent. Trauma informed care practices that prioritize safety and belonging need to be developed to address the unique needs of unaccompanied women.

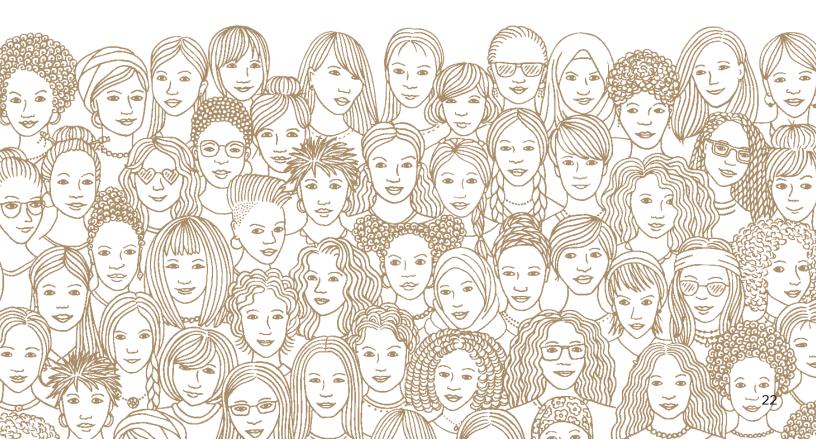
The limited available research highlights the challenges of this underserved population. An estimated 90 percent of women experiencing homelessness have suffered some form of trauma/abuse as early as childhood (physical, psychological or sexual). These patterns of abuse often extend into adulthood. More than 80 percent report serious injury or assault. Unaccompanied women often report high rates of first-time homelessness and longer spells of homelessness. Women of color are disproportionately affected, with African American women estimated to be 50 percent of the population. Older women report homelessness due to insufficient income, mental health problems, spousal or family violence.

Strategic Action

As with other targeted groups, use focused research to develop effective strategies and tactics.

Desired Outcome

Reduce the number of unaccompanied women experiencing homelessness.



Strategic Action

Local service agencies should actively examine existing policies and practices to ensure they are meeting the highest standards of quality and equity for all participants.

Strategic Action

Analyze the community's data to better understand whether and how the homelessness service system can help combat racial inequities.

Desired Outcome

A measurable reduction in people of color who experience homelessness.

Solution 6 Renewed Focus on Racial Disparities

Homelessness is disproportionately high among the nation's racial and ethnic minority groups. Minorities - particularly African Americans and Native Americans - are overrepresented among the community of homelessness, both as a percentage of the overall population and as a percentage of individuals living in poverty. African Americans constitute 13.1 percent of the U.S. population, yet African Americans account for 26 percent of individuals living in poverty and more than 40 percent of individuals who are experiencing homelessness. Data from public and privately funded studies confirm this disparity.

It is important to work across our communities to dismantle racism and other factors that can put people at risk for homelessness. Homelessness service systems must be active participants in this work, while also examining their own policies and practices with a lens to ensure that they are doing what they can to advance equitable outcomes.

Efforts to eliminate inequality in the homelessness service system start with an understanding of whom we are serving and the outcomes we are achieving. Stakeholders must take specific strategic actions.



Solution 7

Promote Alternatives to Criminalizing People Experiencing Homelessness

USICH is statutorily required to develop constructive alternatives to criminalizing homelessness. Laws and policies that prohibit sleeping, feeding, sitting, resting or lying in public spaces - when no suitable alternatives exist - are often selectively enforced against people experiencing homelessness.³⁷

Homelessness and criminal justice involvement are inextricably linked. Anywhere from 25 to 50 percent of people experiencing homelessness have a history of incarceration.³⁸ In 2017, over 52,000 people who entered shelter came directly from a correctional facility.³⁹ To break this link and reduce the criminalization of homelessness there are several actions stakeholders should take to encourage the adoption of alternative policies and practices.

Strategic Action

Strengthen partnerships between law enforcement and homelessness service organizations. Develop shared goals, clearly define roles, and engage other critical stakeholders. Use data to understand local need and assess progress. Review and align local laws and ordinances to support the goals of the partnership. When appropriate, utilize multidisciplinary homelessness outreach teams. Divert people from the criminal justice system, while supporting long-term stabilization. Incorporate insight of those with lived expertise to improve service participation and to maintain successful partnerships.40

Strategic Action

Cultivate partnerships with system brokers such as homelessness, veterans, drug and mental health courts, the local prosecutor's office, public defender's office, problem-solving courts, legal aid and other decision makers to utilize diversion and intervention practices.

Strategic Action

Promote deflection, pretrial diversion, prosecution and sentencing policies that avoid severe penalties for non-violent offenses. Expand diversion services that connect youth and adults with trauma-informed care services and affordable housing. Ensure that communities of color obtain equitable access to mental or substance use disorder services, or both. Reduce the role of law enforcement unless there is a clear and present danger to public safety.

Strategic Action

Increase capacity of social workers and mental health professionals to work alongside law enforcement to co-respond to address crisis situations among people experiencing homelessness. Promote and resource the use of appropriate social services as the primary response to individuals who suffer from mental illness, substance use disorders or homelessness. Equip law enforcement officers and their behavioral health and homelessness system counterparts with training to respond appropriately when called to address a person experiencing homelessness, a mental health crisis or a substance misuse crisis.

Desired Outcome

Reduction in recidivism among individuals experiencing homelessness in order to reduce reoccurrence of homelessness and to reduce reincarceration rates.



Solution 8 Importance of National Emergency Readiness

The primary objective for USICH during the COVID-19 pandemic has been to save lives and avoid overwhelming local emergency rooms and departments due to homelessness facilities and encampments becoming medically compromised. In this vein, USICH has been coordinating the federal response to the COVID-19 pandemic for families and individuals experiencing homelessness. A large part of USICH's work has been to lift up the need for more focused attention across all stakeholder groups on the community of homelessness.

This work is based on the realization that, if we do not do this, the consequences for the homelessness community would be devastating. Often, individuals experiencing homelessness are already experiencing poor health, mental illness, substance use disorders, unemployment and other traumatic events. These conditions easily can be exacerbated by a public health crisis such as COVID-19, or by other natural or man-made disasters.

Acting on this realization, USICH has worked closely with CDC, ED, FEMA, HHS, HUD, USDA and other federal agencies to ensure that frontline homelessness service providers receive accurate and proactive guidance and information necessary to support the individuals they serve, as well as their staffs. Many of the direct service providers had difficulty getting through to the proper local authorities to get guidance ranging from how to operationalize CDC protocols, to how to acquire PPE, and to how to access food for out-of-school children. Many of these agencies also sought information on quarantining and isolation as well as technical assistance regarding CARES Act funding opportunities and mechanics.

Having identified the need for immediate federal intervention, USICH used its convening power and was able to identify the proper federal subject matter experts, and then connect these experts to the frontline providers across the country. In many cases, USICH was able to assign USICH staff members as liaisons to stakeholder groups.

USICH has learned during the COVID-19 response that it is critical, on all levels, to be able to better integrate emergency response efforts among homelessness service providers, emergency response agencies and the community of homelessness proper. We have learned that many organizations, focused deeply on their daily work of serving individuals experiencing, have not made allowances for the possible effects of emergency disasters. Moreover, homelessness service providers are often overlooked in disaster communications and left out

of emergency response planning. Additionally, these direct service providers sometimes lack the equipment and information necessary to continue serving during these most critical times of need for the homelessness community.

Lessons learned from the current COVID-19 pandemic tell us that the federal government, homelessness service systems and communities have a pivotal role to play as it relates to the intersection of homelessness, emergency response activities and public health emergencies for the people we serve. This intersectionality calls for more attention and focus of individuals involved in the work of homelessness in our planning and preparation for these kinds of crisis-related events.

Strategic Action

To ensure alignment and efficiency, service providers, local governments and others should plan collaboratively to meet the needs of people experiencing or at risk of experiencing homelessness during times of crises, disasters and public health emergencies. Plans should address not just the immediate needs of crisis response, but also the longer-term recovery needs of people experiencing homelessness, who may be more adversely affected than other population groups.

Strategic Action

Service providers should establish connections and partnerships with local public health and emergency response authorities and incorporate guidance from these authorities in their emergency planning as well as their routine methods of work.

Strategic Action

Service providers should ensure their staff are trained and certified in emergency preparedness and response, and in public health. FEMA offers such programs of study and certifications that communities and homelessness services systems might consider.

Desired Outcome

Contain and mitigate the negative effects of future disasters and public health emergencies incidents on the community of homelessness.

Conclusion

For decades, the federal government has pursued a variety of well-intentioned policies dedicated to ending homelessness. Despite significant increases in funding and beds, overall homelessness has been increasing in the United States. The federal government's policy shift in 2013 to prioritizing housing first as a one-size-fits-all approach has not worked to reduce homelessness for all populations and communities. Policies that do not address the real root causes of homelessness combined with high housing costs in over-regulated markets have exacerbated the homelessness condition in America.

Our aspirational goals should move beyond primarily providing subsidized housing assistance. Families and individuals find themselves experiencing homelessness because of various circumstances that impact their lives and responses to those circumstances. USICH recognizes that the life stories of families and individuals experiencing homelessness are diverse, and a one-size-fit-all approach is inadequate to flexibly meet the unique needs of every family or individual. Expanding the Toolbox provides a new approach to dramatically reduce homelessness by engaging families and individuals with trauma-informed care.

Many federal agencies have provided support to reduce homelessness. Department of Education (ED), Department of Health and Human Services (HHS), Department of Housing and Urban Development (HUD), Department of Justice (DOJ), Department of Labor (DOL), Department of Veterans Affairs (VA), General Services Administration (GSA) and the United States Postal Service (USPS) are just a few of the many federal agencies that have laid the groundwork for various support programs, crisis intervention networks and substance use disorder treatment services to communities affected by homelessness. These collaborations forged by government partners have been strategic, intersectional and comprehensive in their common mission to ensure that homelessness becomes a rare and brief experience. These goals establish the foundation from which USICH develops its relationships with its public and private partners to eradicate homelessness.

To expand the toolbox and reduce homelessness; Federal, state, and local government programs should increase flexibility, encourage innovation and focus on outcomes. Barriers should be removed for different and innovative approaches tailored to unique populations and communities. This means letting everyone lend a hand: faith-based agencies, housing first as well as non-housing first programs, transitional housing efforts and multicomponent linear programs. Local agencies and communities should have the choice to fund and develop shelters, services, and a variety of housing types. In doing so, we must optimize self-sufficiency in homeless assistance programs and reduce reliance on public assistance. Programs and communities should be measured by results and outcomes, instead of processes.

The journey towards dramatically reducing homelessness is not one traveled alone. The national response to the crisis of homelessness should be considered from the lens of diverse agency members and go beyond simply an issue of housing. Homelessness will be eradicated only if efforts are robust. coordinated, and met with the support of partners in the federal arena.

Targeted and Non-Targeted Federal Homeless Assistance Programs

Department of Agriculture

- 4-H & Positive Youth Development
- Child and Adult Care Food Program
- Community Facilities Grants
- National School Lunch Program
- School Breakfast Program
- Special Supplemental Nutrition Programs for Women, Infants and Children
- Summer Food Service Program
- The Senior Farmers Market Nutrition Program
- The Supplemental Nutrition Assistance Program
- The WIC Farmers Market Nutrition Program
- USDA Multifamily Housing

Department of Commerce

• The Opportunity Project

Department of Defense

- Employer Support of the Guard and Reserves
- Military OneSource
- Transition Assistance Program
- Yellow Ribbon Reintegration Program

Department of Education

- Carl D. Perkins Career and Technical Education Act
- Education for Homeless Children and Youths Grants
- Individuals with Disabilities Education Act, Part B and Part C
- Title I, Part A of the Elementary and Secondary Education Act

Department of Health and Human Services

- Basic Center Program
- Child Care and Development Fund
- Child Support Enforcement Program
- Children's Health Insurance Program
- Community Health Center Program
- Community Mental Health Services Block Grant
- Community Services Block Grant
- Family Violence Prevention and Services Grant Program
- Grants for the Benefit of Homeless Individuals
- Head Start
- Health Care for the Homeless
- Maternal and Child Health Services Block Grant
- Maternal, Infant, and Early Childhood Home Visiting Program
- Maternity Group Homes for Pregnant and Parenting Youth
- Medicaid
- Medicare
- Projects for Assistance in Transition from Homelessness (PATH)
- Runaway and Homeless Youth Programs
- Ryan White HIV/AIDS Program
- Social Services Block Grant
- State Medicaid-Housing Agency Partnerships
- Substance Abuse Prevention and Treatment Block Grant
- Temporary Assistance for Needy Families
- Title V Program Federal Surplus Property for Use to Assist the Homeless

- Transitional Living Program for Older Homeless Youth
- Treatment for Individuals Experiencing Homelessness (TIEH)

Department of Homeland Security

- FEMA Disaster Recovery Centers
- FEMA The Emergency Food and Shelter National Board Program

Department of Housing and Urban Development

- Continuum of Care Program
- Emergency Solutions Grants Program (ESG)Family Unification Vouchers
- Foster Youth to Independence (FYI)
- HOME Investment Partnerships Program
- Housing Choice Vouchers (HCV)
- Housing Trust Fund
- Housing Opportunities for Persons With AIDS
- HUD-Veterans Affairs Supportive Housing Program (HUD-VASH)
- HUD-DOJ Pay for Success Permanent Supportive Housing Demonstration
- Indian Housing Block Grant
- Project-Based Rental Assistance
- Public Housing
- Title V Program Federal Surplus Property for Use to Assist the Homeless
- Youth Homelessness Demonstration Program (YHDP)

Department of Interior

• Tiwahe Initiative

Department of Justice

- HUD-DOJ Pay for Success Permanent Supportive Housing Demonstration
- Transitional Housing Assistance Grants for Victims of Domestic Violence, Dating
- Violence, Stalking, or Sexual Assault Program
- Tribal Governments Program

Department of Labor

- American Job Center Network
- Disability Employment Initiative
- Homeless Veterans' Reintegration Program
- Job Corps

Department of Veterans Affairs

- Community Resource and Referral Centers (CRRCs)
- Enhanced Use Lease Program
- Grant and Per Diem Program (GPD)
- HCHV Contract Residential Services
- Health Care for Homeless Veterans (HCHV)
- Homeless Patient Aligned Care Teams (H-PACT)
- Homeless Veterans Community Employment Services (HVCES)
- HUD-VASH
- National Call Center for Homeless Veterans
- Supportive Services for Veteran Families (SSVF)
- Veteran Justice Programs (Health Care for Re-Entry Veterans and Veterans Justice
- Outreach)

General Services Administration

- Title V Program Federal Surplus Property for Use to Assist the Homeless
- Government Property for Sale or Disposal

Corporation for National and Community Services

- AmeriCorps
- AmeriCorps Indian Tribes Grants

Social Security Administration

- Social Security and Individuals Experiencing Homelessness
 Social Security Ticket to Work Program
 Information for Veterans

U.S. Postal Service

• USPS Homeless Mail Service: Receive Mail Without an Address

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The U.S. Interagency Council on Homelessness leads the national effort to prevent and end homelessness in America. We drive action among our 19 federal member agencies and foster partnerships at every level of government and with the private sector.

USICH was originally authorized by Congress through Title II of the landmark Stewart B. McKinney Homeless Assistance Act of 1987 (PL 100-77) to serve as an "independent establishment" within the executive branch. We were charged with coordinating the federal response to homelessness and creating a national partnership at every level of government and with the private sector to reduce and end homelessness in the nation while maximizing the effectiveness of the federal government in contributing to the end of homelessness.

The agency was most recently reauthorized by the <u>Homeless Emergency Assistance and Rapid Transition</u> to <u>Housing (HEARTH) Act</u> of 2009.

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