We can end homelessness with coordinated, strategic investments—both public and private—in effective solutions. Or, put more simply, by funding what works. The key is housing combined with the right supports for people who are or may become homeless.

Until recently, responses to homelessness focused on funding emergency shelters and other temporary options that only managed the problem, instead of tackling the root causes that allow homelessness to persist. But in the last 5-10 years, armed with better data about who is homeless and why, as well as solid evidence about what works to end it, some communities have begun achieving real reductions in homelessness.

With critical support from government, philanthropy, and other partners, communities are successfully restructuring their homelessness response systems and helping people without stable living situations move quickly into long-term rental housing. They also are preventing homelessness, providing supportive services to help those housed remain in their homes, and expanding their supply of affordable housing. It’s an approach that has repeatedly been shown to be effective, efficient, achievable, and affordable. Some examples:

- Between 2003-2009, Alameda County, CA reduced totally homelessness 15%, chronic homelessness 20%, and family homelessness 37%.
- Fairfax County, VA reduced total homelessness 16% and family homelessness 19% between 2009-2010.
- Worcester, MA, in 2009, reduced the average cost per homeless family served by almost 80% and reduced its hotel population (where families are sent where shelters are full) by 90%.

According to research by the Corporation for Supportive Housing, it costs about the same amount to house someone in stable, supportive housing as it does to leave that person homeless and reliant upon high-cost crisis care and emergency housing. And housing results in better outcomes for both the person experiencing homelessness and the public systems that must otherwise respond to that person’s emergency needs.

**Housing-based Solutions to Homelessness**

Housing-based solutions, including those described below, focus on moving people who are homeless into affordable rental housing and providing them with the support they need to remain there. This differs from the traditional approach to homelessness, which focused on counseling and treating people while they were residing in emergency shelters or living on the street. Research indicates that people experiencing homelessness need a stable living environment before they can benefit fully from support services and begin to achieve self-
sufficiency. All of these solutions depend upon access to affordable rental housing in communities across the country.

**Permanent supportive housing** is long-term affordable rental housing linked to services to help formerly homeless people remain in their homes and achieve self-sufficiency. While temporary shelters and transitional housing can help people who are homeless manage short-term emergencies or bridge waiting periods, these options are a step or two away from life on the street. Only a stable home can lift homeless individuals and families, particularly those who are chronically homeless, out of the chaos of crisis.

According to the U.S. Department of Housing and Urban Development, permanent supportive housing is now the largest part of the nation’s homeless housing inventory—with nearly 237,000 beds in 2010. Residents of permanent supportive housing tend to be individuals and families identified as chronically homeless, with 79% reporting a disabling condition and more than half having a substance abuse problem, mental illness, or both. To be successful at helping the most vulnerable, chronically homeless people off the streets, permanent supportive housing should be easy to enter with no pre-conditions on residency, such as sobriety or mandatory participation in mental health counseling.

**Supportive services** tailored toward a person’s needs are an important component of housing-based solutions to homelessness. There are many different types of supportive services designed to help people stabilize their lives, achieve self-sufficiency, and remain in their homes, including:

- Help maintain a lease, being a successful tenant, and other life skills training;
- Case management and connections to mainstream services, such as health care; and
- Assistance with post-secondary education, job training, and employment counseling.

People identified as chronically homeless often require more intensive, specialized, on-site services, including medical care, mental health counseling, and substance abuse treatment services.

**Rapid re-housing** recognizes that people are better able to stabilize their lives when living in their own homes rather than temporary shelter. The goal is to quickly move them into housing and provide support to help them remain there. The federal government gave this approach a significant boost through the 2009 American Recovery and Reinvestment Act by allocating $1.5 billion over three years for the Homelessness Prevention and Rapid Re-housing Program (HPRP). In the first year of the program, nearly 700,000 people received assistance, with 23% of those receiving help to move quickly from shelter into permanent housing.

**Preventing and diversion** strategies help people avoid homelessness. The primary difference between the two is the point at which services are delivered: prevention targets people at imminent risk of homelessness, while diversion target people are they are applying for entry into emergency shelter. Services include:

- Institutional discharge planning—for example, to help veterans leaving military service or youth aging out of the foster care system—to identify housing, employment, and other supportive service options;
- Financial help to pay rent or utilities in arrears;
- Short-term cash assistance until the household can resume paying rent independently;
- Case management and legal assistance to help a household remain in its current housing; and
- Help obtaining new housing without entering a shelter.

The federal HPRP helped communities focus not only on rapidly re-housing homeless people but also on preventing those at risk from becoming homeless in the first place. Of the nearly 700,000 people helped during the first year of HPRP, 77% received homelessness prevention assistance. The program will expire in 2013.
Creating a **coordinated entry system**—standardizing the process for identifying and assisting homeless people and those at-risk of homelessness—is important to the success of housing-based solutions. Coordinated entry allows communities to quickly match people to the services they need. In a coordinated system, each system entry point uses the same assessment tool and makes decisions with their clients about which programs will be most helpful to them. An uncoordinated system is inefficient and frustrating for both providers and consumers alike.