

MEMORANDUM

To: Regional Steering Committee on Homelessness and Housing
From: HomeBase
Date: September 16, 2006
Re: Preventing and Ending Homelessness for Families – What’s New?

SETTING THE CONTEXT¹

Extent of Family Homelessness

It is estimated that tonight, over 100,000 families will be homeless in our nation.² Every year some 600,000 families spend at least one night homeless, sleeping in shelters, cars or abandoned buildings.³ Living in these families are 1.35 million children.⁴

The number of homeless families with children has increased significantly over the past decade; families with children are among the fastest growing segments of the homeless population. In its 2003 survey of 25 American cities, the U.S. Conference of Mayors found that families comprised 40% of the homeless population, a definite increase from previous years (U.S. Conference of Mayors, 2003). On a national level, the numbers are higher: the Urban Institute found that approximately 39% of the homeless population are children (Urban Institute 2000). These proportions are likely to be higher in rural areas; research indicates that families, single mothers, and children make up the largest group of people who are homeless in rural areas⁵

Characteristics of Homeless Families

Families that become homeless share certain characteristics, important to recognize because they can be considered to be risk factors for or predictors of homelessness. They are not necessarily what cause families to become homeless; many characteristics are shared by poor families who do not become homeless:

- *Extreme poverty*: nationwide the income of homeless families is around \$5,000 per year,

¹ Much of the information which follows is contained in the National Alliance to End Homelessness publication, *Family Homelessness in Our Nation and Community: A Problem with a Solution* (2005) [Available at www.naeh.org].

² Burt, M., Aron, L. Y., Lee, E. & Valente, J. (2001). *Helping America's homeless: emergency shelter or affordable housing?* Washington, DC: The Urban Institute.

³ Culhane, D. (2004). *Family homelessness: Where to from here?* Presentation by Dr. Dennis Culhane, University of Pennsylvania Professor of Social Welfare Policy, delivered October 14, 2004 to the National Alliance to End Homelessness Conference on Ending Family Homelessness. [PowerPoint available online at <http://www.endhomelessness.org/back/FamilyHomelessness.pdf>]

⁴ Burt, M. (2002) *America's Homeless II: Populations and Services*. [PowerPoint Presentation]. Washington, DC: Urban Institute. Available online at: http://www.urban.org/UploadedPDF/900344_AmericasHomelessII.pdf

⁵ Vissing, Yvonne. *Out of Sight, Out of Mind: Homeless Children and Families in Small Town America*, 1996. Available for \$16.95 (paperback) from The University Press of Kentucky, 663 S. Limestone St., Lexington, KY 40508-4008; 800/839-6855.

less than half of the poverty level (1996 figures).⁶

- *Headed by single women reducing the household's earning power:* The gap between women's and men's income remains wide, and occupational and gender-related discrimination is rampant. Women earn less over their lifetime than men, and the economic burden of divorce often falls on their shoulders. Service sector jobs do not pay a livable wage or provide essential benefits and TANF benefits, cut as a result of the passage of the 1996 welfare reform legislation, do not help women climb out of poverty.⁷
- *Low education levels:* nationally, only one half of parents in homeless families have a high school diploma or a GED.⁸
- *Low income:* one third work, but most rely on government assistance to meet basic needs.⁹
- *Young children:* nationally, 42% of the children in homeless families are aged five and under; the average number of children in a homeless household is two.¹⁰
- *Lack of support networks:* many homeless families lack networks of supportive friends and family, either because they are physically isolated from these networks or because they have "worn them out."¹¹
- *Unstable housing histories:* Families that become homeless are likely to have lived in overcrowded conditions, moved frequently and/or experienced an eviction.¹² Families on public assistance who do not have a housing subsidy are more likely than families who have a subsidy to become homeless.¹³
- *Other demographics:* parents tend to be young, pregnant or parenting an infant,¹⁴ more likely to be members of ethnic minorities with 43% of individuals in homeless families nationally African-America.¹⁵

⁶ Merves, E. (1992). Homeless Women. Beyond the Bag Lady Myth. In M. Robertson & M. Greenblatt (Eds.). *Homelessness. A National Perspective*. New York: Plenum Press, 229-244. Bassuk, E. L. (1995). Lives in Jeopardy: Women and Homelessness. In C. Willie, P. P. Rieker, B. Kramer & B. Brown. *Mental Health, Racism and Sexism*. Pittsburgh: University of Pittsburgh Press, 237-252.

⁷ Burt, M. R., Aron, L. Y., Douglas, T., Valente, J., Lee, E., & Iwen, B. (1999). *Homelessness: programs and the people they serve. Findings of the National Survey of Homeless Assistance Providers and Clients. Technical report*. Washington, DC: U.S. Interagency Council on the Homeless. [Available online at: <http://www.urban.org/UploadedPDF/homelessness.pdf>]

⁸ Ibid.

⁹ Ibid.

¹⁰ Ibid.

¹¹ Bassuk, E. L., Weinreb, L. F., Buckner, J. C., Browne, A., Salomon, A., Bassuk, S. S. (1996). The characteristics and needs of sheltered homeless and low-income housed mothers. *JAMA*, (8), 276: 640-646; and Letiecq, B. L., Anderson, E. A., Koblinsky, S. A. (1998). Social supports of homeless and housed mothers: a comparison of temporary and permanent housing arrangements. *Family Relations*, 47(4): 415-421.

¹² Shinn, M., Weitzman, B. C., Stojanovic, D., Knickman, J. R., Jimenez, L., Duchon, L., James, S. & Krantz, D. H. (1998). Predictors of homelessness among families in New York City: from shelter request to housing stability. *American Journal of Public Health*, 88(11): 1651-1657; and Bassuk, E. L., Buckner, J. C., Weinreb, L. F., Browne, A., Bassuk, S. S., Dawson, R., & Perloff, J. N. (1997). Homelessness in female-headed families: families: childhood and adult risk and protective factors. *American Journal of Public Health*, 87(2): 241-248.

¹³ Shinn et al. (1998) op cit.

¹⁴ Ibid.

¹⁵ Burt et al. (1999) op cit.

Characteristics as Compared to Poor, Housed Families

Homeless families have somewhat lower incomes than poor housed families. Homeless families have thinner support networks than their housed counterparts.¹⁶ Homeless parents are slightly younger and more likely to be from an ethnic or racial minority than housed, poor families, and they are also more likely to be pregnant or to have an infant.¹⁷ Parents in homeless families are more likely to have been placed in foster care as children and more likely to have had a mother with a drug problem than poor, housed families.¹⁸

Primary Causes of Family Homelessness

The primary cause of family homelessness is that families cannot afford housing. There is an inadequate supply of low-cost housing, and families' incomes are so low that they cannot pay for the housing that is available. The public "safety net" programs do not adequately address the housing needs of the poorest families.

| | FMR: 2-BR | ELI (30% AMI) | ELI-Monthly Affordability¹⁹ |
|---------------|------------------|----------------------|---|
| Alameda | 1,342 | 24,660 | 617 |
| Contra Costa | 1,342 | 24,660 | 617 |
| Marin | 1,539 | 28,500 | 713 |
| Monterey | 1,035 | 18,240 | 456 |
| Napa | 1,006 | 22,170 | 554 |
| Placer | 971 | 19,230 | 481 |
| Sacramento | 971 | 19,230 | 481 |
| San Francisco | 1,539 | 28,500 | 713 |
| San Mateo | 1,539 | 28,500 | 713 |
| Santa Clara | 1,313 | 31,650 | 791 |
| Santa Cruz | 1,347 | 22,590 | 565 |
| Solano | 1,006 | 22,170 | 554 |
| Sonoma | 1,154 | 22,380 | 560 |
| Yolo | 851 | 18,060 | 452 |

The maximum monthly CalWORKs benefit for a family of three is \$723, unless the head of household is disabled, and then the benefit is \$808. (CalWORKs will reduce your monthly grant by the amount of countable income you receive that month.) The maximum monthly food stamps benefit for a family of three with no income is \$393.

Some five million families receive federal assistance to pay for housing, but there are at least twice that many families eligible for such subsidies that do not receive them because of lack of housing.²⁰

¹⁶ Bassuk et al. (1996) op cit.

¹⁷ Shinn et al. (1998) op cit.

¹⁸ Bassuk et al. (1996) op cit.

¹⁹ "Affordable" rents represent the generally accepted standard of spending not more than 30% of income on housing costs.

²⁰ Millennial Housing Commission (2002). Meeting our nation's housing challenge: report of the Bipartisan

Consequences of Family Homelessness

The destructiveness of homelessness among families and human, social and economic costs of family homelessness is well known to RSC members.

Homelessness disrupts virtually every aspect of family life, damaging the physical and emotional health of family members, interfering with children's education and development, and frequently resulting in the separation of family members. For the parent, the experience of homelessness and the associated stress that results from economic, social and psychological dislocations can negatively affect health and well-being.²¹

Children in homeless families are more likely than other children to be taken away from their parents and placed into foster care.²² Children in homeless families are less healthy. They go more often to the hospital emergency rooms than their poor, housed counterparts. Children without a home are in *fair to poor health* twice as often as other children, and have higher rates of asthma, ear infections, stomach problems, and speech problems.²³ Children in homeless families have higher exposure to stress and experience more disruptions in school and to friendships.²⁴ Moving in and out of schools and inadequate study facilities keeps homeless children behind their classmates in learning and results in lack confidence and self-esteem. Pre-school aged homeless children are more likely to have one or more developmental delays than poor, housed children.²⁵

Preventing and Ending Family Homelessness is Cost-Effective

The annual cost of sheltering families experiencing homelessness is estimated to be between \$1.9 billion and \$2.2 billion annually.²⁶ A study in Toronto, Canada found that the cost of delays in returning children to their families because of lack of housing was \$2.9 million per year in that city, alone.²⁷ The cost of placing two children of a homeless family in foster care is about \$34,000 per year.²⁸ Nationally, the monthly cost of emergency shelter for a homeless family is

Millennial Housing Commission appointed by the Congress of the United States. Washington, DC: Author. [Available online at: <http://www.mhc.gov/MHCReport.pdf#search='millennial%20housing%20commission'>].

²¹ Webb, D. A., Culhane, J. F., Metraux, S., Robbins, J. M. & Culhane, D. (2003). Prevalence of episodic homelessness among adult childbearing women in Philadelphia, PA. *American Journal of Public Health*, 93(11): 1895-1896.

²² Culhane, J. F., Webb, D., Grim, S., Metraux, S. & Culhane, D. (2003). Prevalence of child welfare services involvement among homeless and low-income mothers: A five year birth cohort study. *Journal of Sociology and Social Welfare*, 30(3): 1-11.

²³ Weinreb, L., Goldberg, R., Bassuk, E., & Perloff, J. N. (1998). Determinants of health and service use patterns in homeless and low-income housed children. *American Academy of Pediatrics* 102(3): 554-562.

²⁴ Masten, A. S., Miliotis, D., Graham-Bermann, S. A., Ramirez, M. & Neeman, J. (1993). Children in homeless families: Risks to mental health and development. *Journal of Consulting and Clinical Psychology*, 61(2): 335-343.

²⁵ Bassuk & Rosenberg (1990) op cit.

²⁶ Based on an unpublished analysis conducted by Dennis P. Culhane, University of Pennsylvania, and cited in The National Alliance to End Homelessness, *Family Homelessness in Our Nation and Community: A Problem with a Solution* (2005), available on-line at www.naeh.org.

²⁷ Chau, S., Fitzpatrick, A., Hulchanski, J. D., Leslie, B. & Schatla, D. (2001). *One in five...housing as a factor in the admission of children to care: New survey of Children's Aid Society of Toronto updates 1992 survey*. [Research Bulletin, 12/01, No. 6]. Toronto: Center for Urban and Community Studies. [Available online at: <http://www.urbancenter.utoronto.ca/researchbulletin.html#5>]

²⁸ Harburger, D. S. & White, R. (2004). Reunifying families, cutting costs: housing-child welfare partnerships for permanent supportive housing. *Child Welfare*, 83(5): 493-508.

\$1,255 and the cost of transitional housing for that family is \$1,411.²⁹

Nationally, the average annual cost of placing the children of a homeless family in foster care is \$47,608 while the average annual cost for a permanent housing subsidy and supportive services for a family of equal size is about \$9,000.³⁰

Without access to a housing subsidy, some families remain homeless for a longer period of time. Ironically, the cost of a voucher that would prevent homelessness or reduce the length of time a family remains homeless is often less than the cost of providing shelter assistance.³¹

Each of these interventions approaches or exceeds what housing would cost. In Hennepin County, Minnesota, while transitional housing for a homeless family costs \$3,361, help in preventing a family's homelessness costs only \$444 per family and assistance in moving them immediately back into housing costs \$720 per family.³² In the District of Columbia, a homeless prevention initiative that couples financial assistance with intensive case management services costs approximately \$7,186 for every family housed – equivalent to the cost of providing 116 days in shelter.³³ The Office of the Inspector General of the U.S. Department of Health and Human Services has concluded that the cost of preventing a homeless episode is one-sixth the cost of responding once a family has become homeless.³⁴ Such data shows that reducing the incidence and duration of homelessness holds promise of not only saving lives, but also money.

PREVENTING AND ENDING FAMILY HOMELESSNESS

Responding to Individual Family Needs

Once homeless families enter the homeless system of services and housing, their stay will be relatively brief. The majority (60%) of families that become homeless finds housing within six months and does not become homeless again.³⁵ For these families, homelessness has probably been preceded by an economic or domestic crisis that caused them to lose or leave their housing. Now, with few affordable housing units available and a weaker public support system, the search

²⁹ Based on an unpublished analysis conducted by Dennis P. Culhane, University of Pennsylvania, and cited in The National Alliance to End Homelessness, *Family Homelessness in Our Nation and Community: A Problem with a Solution* (2005), available on-line at www.naeh.org.

³⁰ White, R.A., Seth, C.M. (2003, March/April). *No Place Like Home*. Children's Voice. Washington, DC: Child Welfare League of America.

³¹ Office of Policy Development and Research, U.S. Department of Housing and Urban Development, *Evaluation of the Emergency Shelter Grants Program*, Volume 1: Findings September 1994. The average cost of a shelter bed funded through the Emergency Shelter Grant cost is \$8,087 annually, a cost slightly over \$24,000 for a family of three and well beyond the cost of a housing subsidy. Transitional shelter programs are typically more family-friendly in physical design and have an average cost of \$10,695 per person and \$19,470 per household

³² Wherley, M. (2004). *Hennepin County targeted services for homeless families*. [Handout material]. Presentation by Marge Wherley, Hennepin County Human Services, delivered July 21, 2004 to the Housing First for Families System Mini-Institute, Countdown to Success: Implementing Plans to End Homelessness, National Alliance to End Homelessness Conference.

³³ National Alliance to End Homelessness (2004a) op cit.

³⁴ U.S. Department of Health and Human Services Office of the *Programs*. [OIG: 07-90-00100]. Washington, DC: Author. [Available <http://www.oig.hhs.gov/oei/reports/oei-07-90-00100.pdf>]

³⁵ Burt et al. (1999) op cit.

for inexpensive housing takes longer, and shelter and transitional housing provide a temporary place to stay while these families get their affairs in order. The receipt of a housing subsidy greatly increases their chances of long term stability once they return to housing.³⁶ There is, however, a group of families that remains homeless longer, or that becomes homeless repeatedly, even if the families have a housing subsidy. These families have preliminarily been described by Dr. Dennis Culhane at the University of Pennsylvania as exhibiting certain risk factors such as parent foster care history and previous experience of homelessness.³⁷ They may also have characteristics that impede their ability to find housing, such as large family size (affordable apartments with more than three bedrooms are extremely scarce, necessitating longer stays in shelter). Such families may require a special set of housing and/or service supports.

Our analysis should focus then on housing and service supports which make the most sense given the family in need.

☛ This memo focuses on three: prevention, mainstream responses and housing. And it does not fully describe all that should be done over those three issues. The RSC will direct which future housing/services – targeted and mainstream – it wishes to explore toward ending family homelessness.

Creating the Political Will

The National Alliance to End Homelessness launched the national effort to create 10-year plans to end “chronic” homelessness, bolstered by a study by Dennis Culhane of the University of Pennsylvania evidencing the cost-effectiveness of permanently housing people considered “chronically homeless.” Nearly 200 cities/counties nationally have prepared plans, with a resulting decrease in some communities in the number of homeless people living on the street, elected official’s strong involvement in efforts to end homelessness and increased public/private partnerships to garner resources.

A similar campaign, also supported by data from Dennis Culhane, focuses on ending family homelessness. Relationships developed in the course of 10-year plan preparation should prove helpful in implementing and funding best practice strategies to prevent and end family homelessness.

A special challenge Continua of Care must address is that many homeless families are not visible to the public – not sleeping on the streets or under highway over-passes. Especially in the wake of national attention directed toward ending chronic homelessness, Continua should strategize on the public message that needs to be sent.

³⁶ Shinn et al. (1998) op cit.

³⁷ Culhane, D. (2004). *Family homelessness: Where to from here?* Presentation by Dr. Dennis Culhane, University of Pennsylvania Professor of Social Welfare Policy, delivered October 14, 2004 to the National Alliance to End Homelessness Conference on Ending Family Homelessness. [PowerPoint available online at <http://www.endhomelessness.org/back/FamilyHomelessness.pdf>]

Prevention

Prevention averts homelessness and shelter stays that are costly to families and to the public. RSC members are well-versed in the services are needed to prevent homelessness: financial assistance, case management, health care, mental health care, substance abuse treatment, domestic violence support, landlord-tenancy advocacy . . . but where will the money come from to really improve prevention outcomes?

An idea for additional State Funds

Family Homeless Prevention and Assistance Program/State of Minnesota

Minnesota's Family Homeless Prevention and Assistance Program (FHPAP) is facilitating the end of homelessness by providing state funds, including TANF block grant dollars, that can be used innovatively by counties and community nonprofit organizations to help families remain in their homes, re-house those who become homeless and shorten the length of time families spend in shelters. Last year, the Illinois State Legislature established a Family Homeless Prevention and Assistance Program modeled after the Minnesota legislation.

History and Background

Created in 1993 by the Minnesota State Legislature, the Family Homeless Prevention and Assistance Program is designed to achieve three primary goals:

- 1) Prevent homelessness from occurring
- 2) Shorten lengths of time in homelessness and emergency shelters
- 3) Prevent repeated episodes of homelessness

The program provides grants to local communities to achieve the goals of the legislation. The funds are very flexible and use of funds is determined at the local level by an advisory group. The application process for grant funds is competitive and grantees must reapply every biennium. The program requires grantees report outcome data and future funding decisions are determined based on performance.

The program originated after Hennepin County administrators successfully heightened public awareness that the county's existing emergency shelter system would not be able to meet the demand and, as a result, families would soon be turned away from shelters.

The Governor was committed to responding to the need and the Administration developed a policy proposal. Rather than building more shelters to meet the demand they decided to take action to reduce demand--by preventing homelessness, facilitating people's re-entry to and stabilization in housing.

In developing the state policy, a collaborative of private non-profit agencies used focus groups with families who experienced homelessness to shape the legislation. They identified the reasons they became homeless, what might have prevented them from losing their housing and what were the barriers they encountered in becoming re-housed.

The Republican Governor's proposal received strong bipartisan support and passed easily.

The legislation allows for a great deal of local flexibility in determining the use of funds and stresses tracking outcomes. It has received increased appropriations every year since it was created, with continued bipartisan support.

Program Description

Funding for the program is awarded on a competitive basis to counties or community nonprofit organizations. Grantees are required to establish a local advisory group responsible for the local initiative, including designing the program, developing eligibility criteria, problem solving throughout implementation, identifying subcontractors and submitting biennial reports. Local advisory groups are advised to meet monthly and are expected to be active in their community's Continuum of Care efforts. A dedicated staff person in the Minnesota Housing Finance Agency is responsible for reviewing funding applications, program reports and provision of technical assistance. State leadership in developing and promoting the "culture" of the program – to end, not manage homelessness – is viewed as a critical component.

Perhaps contributing to the success of the program and grantees' adherence to meeting the purposes of the legislation is the involvement of the state Interagency Task Force on Homelessness (ITF). Each local advisory group must include a member of the ITF, which consists of representatives from nine other state agencies. Each Interagency Taskforce member is assigned to a grantee advisory group and attends the grantee's meetings as representatives of the ITF. The state ITF also meets monthly as a group and reports on what is occurring at the local level.

Grantees must reapply every biennium. Applications are reviewed by a state advisory committee that makes recommendations on level of funding for applicants based on their performance on outcome measures. Funding is very limited, which forces the advisory committee to target the dollars and limit the amount of assistance to promote the program's effectiveness. Outcomes are stressed not outputs or numbers served. This requires tracking individuals and families served to capture future incidents of homelessness or sustained housing stability. The grant application process and outcome data requirements are viewed as helping direct local activities toward achieving the purposes of the legislation.

Currently there are fourteen grantees representing one half of all the counties in Minnesota. The program relied on state general funds until 2000 when dedicated TANF block grant dollars were added, creating more funding and a new level of complexity with federal reporting and eligibility requirements. \$6.5 million has been budgeted for the next biennium, and an additional \$4.6 million is being sought by the Minnesota Coalition for the Homeless to expand services to new parts of the state and increase capacity with existing grantees.

Legislation and State Advocacy Efforts

Legislation for the Family Homeless Prevention and Assistance Program can be reviewed online at the Office of Revisor of Statutes, State of Minnesota: www.revisor.leg.state.mn.us/stats/462A/204.html

Updates on relevant advocacy activities can be found on the Minnesota Coalition for the Homeless website: <http://www.mnhomelesscoalition.org>

Impressions of Program Administrators/Advocates

The advisory committees are perceived to be particularly effective in solving problems and opening dialogue around homelessness in the community. Advisory groups are typically comprised of a broad spectrum of the community – including advocates for the homeless, homeless or formally homeless people, housing developers, representatives of the local public housing authority and employers. Local advisory groups have become active on homelessness issues beyond the administration and oversight of the local Family Homelessness Prevention and Assistance Program and have advocated for local policy changes and better utilization of locally controlled resources to respond to the needs of homeless people.

Local flexibility is viewed as a vital component in a large geographically diverse state and diverse counties. It allows for a range of responses appropriate to the particular community and experiments with small "pilot" projects that may prove effective. Administrators recognize the importance of developing strong relationships with landlords to prevent homelessness and re-house families. Some programs dedicate staff to respond to landlord concerns and work with landlords and tenants to address issues that may threaten housing stability. If necessary, local programs may assist in paying for damages by tenants placed into housing that exceed the security deposit.

Preventing homelessness has become the priority for many administrators. The state's shortage of affordable housing and high rents make re-housing families difficult and they have decided those with affordable, sustainable housing should receive the necessary assistance to retain it through a short-term crisis. Further, the flexibility of the FHPAP funds have facilitated the development of prevention efforts that was reported by some grantees as too difficult to accomplish with HUD funding restrictions.

The program is administered by a dedicated staff person at the Minnesota Housing Finance Agency. The administration of the program is described to be staff intense, particularly in the early stages. There is a need to provide technical assistance that may include helping to develop strong advisory boards and a group culture that will help achieve the purposes of the legislation.

FHPAP is an outcome-based grant program that places the emphasis on results rather than process or numbers served. Numbers served aren't ignored but 'process' is not the emphasis. Grantees have received more funds when they have performed well and some have had funding reduced. This is viewed as an important component carried out both at the state and local level and a key to its success.

Rapid re-housing of families and individuals with greater challenges may require more flexibility in providing follow-up support and case management than can be provided by the six months of after care that HUD allows for those who can no longer be classified as "homeless." Flexibility to provide follow-up assistance for those rapidly re-housed would remain cheaper than allowing those with significant challenges to remain in transitional housing.

There may be a benefit to increasing federal collaboration between HUD and HHS to better partner housing with services. This would meet both agencies goals as HUD wants to work toward more bricks and mortar yet requires services for some programs and housing is needed for anyone to stabilize sufficiently to benefit from services.

Potential Concerns

Local flexibility -- As program design occurs at the local level, there may be issues around the use of funds and eligibility criteria. For example, some advisory groups have elected not to serve families who have been sanctioned from TANF. The program administrator in one such community reported that they provide assistance to families to help reconcile their sanctions first so they can become eligible for assistance. In this community, the family's resources are enhanced as a result of reconciling the sanction that should increase the likelihood of future housing stability. Without assistance to reconcile sanctions, families in need of assistance might be excluded from this source of assistance. Families who have been sanctioned may experience significant barriers to achieving self-sufficiency, such as mental health and substance abuse disabilities, domestic violence and low educational attainment.

Coordination with Emergency Assistance Funds -- Like many other states, Minnesota has continued to approve Emergency Assistance funds under its state TANF block grant plan. Emergency Assistance funds can be used to provide assistance to families at risk of homelessness and are accessed through the local Division of Human Services. For communities interested in establishing a Family Homelessness Prevention and Assistance Program, coordination at the state and local level with the administrators of the existing Emergency Assistance program will enhance effectiveness. Further care may be required to ensure the creation of a FHPAP program serves to enhance measures to prevent homelessness rather than supplanting them by ensuring both FHPAP and Emergency Assistance funds are maximized.

For More Information, Contact:

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☛ What's next for the RSC? Systems changes to increase wages and public benefit amounts, extend periods of eligibility, decrease sanctions, remove barriers to benefits access by homeless people, improved education, child care, changes in the foster care system also will prevent homelessness and its recurrence. What's of interest to you?

Mainstream Responses

Tools to End Homelessness Among Families³⁸:

What State and Local TANF (CalWORKs) Agencies Can Do To End Family Homelessness

Studies have demonstrated that families who have access to housing that is affordable to them are more likely to be successful under welfare reform. Among the most severely disadvantaged families whom TANF agencies serve are those who have turned to homeless programs to meet their housing

³⁸ From the NAEH's Sourcebook on Ending Family Homelessness (2005) (available on line at www.naeh.org)

needs. The inherent instability of family life in homeless shelters exacerbates all the other challenges that the family and the TANF programs must overcome to achieve greater self-sufficiency.

According to the U.S. Conference of Mayors and shelter providers across the country, more and more families with children are seeking emergency shelter and spending longer periods of time in homelessness. Most of these families interact with the agencies in their communities that administer TANF and virtually all are income-eligible for TANF-funded services and supports.

TANF agencies can:

- adopt protocols that ensure adequate assessment of housing needs among their clients and within their communities, facilitating earlier and likely more successful interventions.

TANF Administrators can:

- Ensure that case managers assess the housing needs and resources of families.

- partner with local public housing authorities, private market landlords, and housing counseling agencies to help maximize the existing affordable housing resources for their clients.

TANF Administrators can:

- Partner with local private and public housing agencies to develop greater internal expertise on affordable housing resources in the community and ensure that existing resources are maximized to address the housing needs of families on TANF;
- Seek agreements to co-locate housing and welfare workers to maximize effectiveness, e.g., allow housing assistance providers to conduct intakes, provide services, do trainings in welfare offices, etc.; and
- Collaborate with private sector landlord groups and housing counseling agencies to increase housing opportunities available to very-low-income families with children on TANF.

- implement models to identify/promote program compliance among families with significant barriers to work, particularly those who are experiencing homelessness or precarious housing situations, so they do not become vulnerable to a housing crisis through the loss of benefits;

TANF Administrators can:

- Identify and implement successful models that are being utilized to improve the identification and assessment of families who have significant barriers to employment;
- Identify and implement successful policies and procedures that states and communities utilize to help families become and remain compliant with program requirements and reduce the need to implement sanctions; and
- Implement efforts to provide outreach and assistance to families whom have been sanctioned, particularly those residing in homeless shelters, to help them become compliant with the TANF program so they can re-access benefits and needed services.

- evaluate the effectiveness of their existing Emergency Assistance Programs and adopt program models designed to help families in housing crises retain their housing through financial assistance or simply through mediation and case management services; and

TANF Administrators can:

- Evaluate their existing Emergency Assistance program or the appropriateness of developing one and assess how programs can be designed to most effectively prevent homelessness, including examining whether assistance limits are appropriate given local housing costs and whether higher risk families can be served with access to intensive services; and

- Consider dedicating case management resources to developing specific expertise in homelessness prevention activities, including landlord mediation and facilitating access to homelessness prevention resources available in the community.

- partner w/ local housing/homeless service providers to ensure appropriate supports are in place and eligible families are receiving services/assistance to facilitate their rapid return to housing.

TANF Administrators can:

- Develop relationships with local homeless emergency shelter and transitional housing programs to enhance and coordinate service delivery;
- Make TANF-funded services and resources more accessible to help families experiencing homelessness transition back into permanent housing; and
- Develop new program strategies to minimize the length of time families remain homeless, e.g., dedicate case management services to help families exit shelters and stabilize in permanent housing, provide short-term emergency assistance housing subsidies coupled with intensive case management to help families transition out of shelters more rapidly.

What Public Housing Authorities (PHAs) Can Do To End Family Homelessness

Local public housing authorities are charged with helping low income people access housing. The resources they manage can be maximized and targeted more effectively to help prevent and end homelessness among families. Numerous studies have found that families who access a housing subsidy upon exiting homelessness can and will remain stably housed. The cost of providing a housing subsidy for a family is often a more cost-effective solution than supporting the family in homeless shelter programs. Thus, partnerships that maximize homeless families' access and use of available subsidies are paramount in efforts to end homelessness. Innovative strategies are more likely to emerge when there is clear leadership from city officials that ending homelessness is both a commitment and a valued goal.

Public Housing Authorities can:

- develop partnerships w/ public agencies and nonprofit organizations to better serve families experiencing homelessness, improve voucher utilization, and reduce administrative costs.
- develop partnerships with social service agencies to help families at risk of homelessness retain their subsidized housing and avoid costly turnovers.
- adopt and sustain a commitment to deep targeting of housing subsidies.

Here's an example:

In Massachusetts, the Department of Transitional Assistance (DTA) partnered with the Department of Housing and Community Development (DHCD) to develop a transition-in-place pilot. Under the pilot, families experiencing homelessness move directly into an available public housing unit on a temporary basis. After a six month period of successful residency, the family is eligible to remain in the unit on a permanent basis. In its first year, the project housed 10 families and is expected to house 100 families in the current fiscal year. This pilot is one of a series of strategies being undertaken in the Commonwealth of Massachusetts to shift their response to family homelessness to a more cost-effective approach that focuses on ending a family's homeless episode.

What Child Welfare Agencies Can Do to End Family Homelessness

Studies demonstrate a clear relationship between homelessness and child welfare involvement.³⁹ Because homelessness and poor housing appear to be factors that contribute to or prolong the placement of children in foster care, child welfare agencies should have a vested interest in being part of the solution to family homelessness. This is particularly true because out-of-home placements incur high costs, both economically and in terms of family well-being. By responding to the pressing housing and service needs of families who are experiencing homelessness, child welfare agencies may be able to prevent foster care placements and minimize the length of time children remain in care.

Some public housing authorities (PHAs) and child welfare agencies jointly applied for, and received, Family Unification Program (FUP) Vouchers. These housing subsidies have enabled child welfare agencies and PHAs to expedite access to appropriate, affordable housing for families in two groups: those who are at risk of losing children due to poor housing conditions, and those for whom a parent's lack of decent housing has delayed reunification with her children. FUP vouchers function the same as Housing Choice Vouchers: families pay a third of their income in rent, and the portable housing subsidy allows families to access housing in the private market. FUP vouchers can also be used to house youth exiting foster care for up to eighteen months. Under the FUP requirements, the child welfare agency agrees to provide services to the family (or youth), and the PHA provides and administers the voucher. An evaluation of the program has shown it to be an effective tool to end homelessness for families.⁴⁰

Although there has been no new allocation of FUP vouchers in recent years, partnerships between public housing authorities and child welfare agencies are still possible. As housing subsidies or public housing units become available, PHAs working with child welfare agencies can prioritize those families who are at-risk of separation or whose reunification is delayed because of poor housing. The availability of child welfare staff to provide intensive services and supports to the family can help make the housing placement successful as well as address the families' service needs. Such services may help lower administrative costs as well as lead to more attractive tenants for a partnering PHA.

Child welfare agencies can:

- partner with public housing agencies to maximize access to vouchers for families whose homelessness or poor housing presents a risk of separation or delayed reunification.
- develop the capacity of staff to address the housing needs of families who are at risk of separation or delayed reunification because of homelessness.
- explore ways to invest child welfare funds to stabilize families in existing housing or provide short-term rental subsidies that can be used to help families transition out of homelessness to prevent family separation or facilitate reunification.
- develop partnerships with public and private non-profit agencies that provide emergency

³⁹ Courtney, M., McMurtry, S. L., Zinn, A. (2005). *Predictors of reunification in a sample of urban out-of-home care cases*. Paper presented at Society for Social Work and Research Annual Conference: Celebrating a Decade of SSWR, January 16, 2005 in Miami, Florida. Abstract available online at:

<http://sswr.confex.com/sswr/2005/techprogram/S1145.HTM> and Culhane, J. F., Webb, D., Grim, S. and Metraux, S. and Culhane, D. (2003). 30(3).

⁴⁰ Rog, D. J., Gilbert-Mongelli, A. M., and Lundy, E. (1998). *The Family Unification Program: Final Evaluation Report*. Washington, D. C.: CWLA Press.

and re-housing assistance to families at risk of, or experiencing, homelessness to promote a rapid response to a housing crisis.

Here's an example . . .

Many different public and private agencies have access to funds that can be used to prevent evictions or cover upfront housing costs for those who are in need of new housing (security deposits, utility assistance, and short-term rental assistance). In Atlantic City, New Jersey, the child welfare agency has a cooperative relationship with the local administrator of Emergency Assistance (EA) funds, in which the administrator has agreed to approve all referrals for assistance that the child welfare agency provides for families under its supervision. The EA resources can be used to pay back rent or supply short-term rent assistance to help families relocate.

- offer voluntary services to strengthen family functioning and preserve families who are experiencing or have recently experienced a homeless episode.
- enhance capacity to intervene to strengthen and preserve families with other complex issues – including substance abuse disorders and mental health issues.
- recognize that children and youth exiting foster care are at heightened risk of future homelessness and respond accordingly.

☞ What's next for the RSC? What mainstream practices would you like to focus on next time toward ending family homelessness?

Housing

Many communities are choosing to end family homelessness through Housing First approach. Housing First is an alternative to the current Continuum of Care system of emergency shelter-transitional housing-permanent supportive housing, which tends to prolong the length of time that people remain homeless. The “housing first” approach is premised on the belief that homeless and at-risk people are more responsive to interventions and social services support *after they are in their own housing*, rather than while living in temporary or transitional housing programs. With “housing first,” these people can begin to regain the self-confidence and control over their lives they lost when they became homeless.

For over ten years, the housing first methodology has proven to be a practical means to ending and preventing homelessness. The methodology is currently being adapted by organizations throughout the U.S. from the Los Angeles-based Beyond Shelter's Institute for Research, Training and Technical Assistance and the National Alliance to End Homelessness' Housing First Network.

The “housing first” approach stresses the immediate return to independent living. Created as a time-limited relationship designed to empower participants and foster self-reliance, not engender dependence, the housing first methodology:

- helps homeless people move directly into affordable rental housing in residential neighborhoods as quickly as possible;

- then provides six months to one year of individualized, home-based social services support "after the move" to help individuals transition to stability.

The housing first approach provides a link between the emergency shelter/transitional housing systems that serve homeless people and the mainstream resources and services that can help them rebuild their lives in permanent housing, as members of a neighborhood and a community. In addition to assisting homeless families in general back into housing, housing first can offer an individualized and structured plan of action for alienated, dysfunctional and troubled families, while providing a responsive and caring support system.

The combination of housing relocation services and home-based case management enables homeless individuals to break the cycle of homelessness. The methodology facilitates long-term stability and provides formerly homeless people who are considered *at risk of another episode of homelessness* with the support necessary to remain in permanent housing.

The Housing First Approach is Implemented Through Four Primary Stages:

- ◆ **Crisis Intervention & Short-Term Stabilization:** This phase includes helping homeless individuals access emergency shelter services and/or short-term transitional housing and address crisis needs.
- ◆ **Screening, Intake and Needs Assessment:** The "needs assessment" results in an action plan for clients, which includes short- and long-term goals and objectives with concrete action steps. This can occur immediately or after individuals are stabilized in emergency services.
- ◆ **Provision of Housing Resources:** After the completion of screening and assessment, the next phase involves assisting individuals in moving into permanent, affordable housing in a safe neighborhood. This is accomplished by helping them overcome various barriers to obtaining permanent housing.
- ◆ **Provision of Case Management:** Before the move into permanent housing, case management services help to identify clients' needs and to ensure individuals and families have sources of income through employment and/or public benefits. After the move, time-limited case management services focuses on helping individuals solve problems that may arise and to connect individuals and families with community services to meet longer-term needs.

Here's an example . . .

Beyond Shelter, Inc. Housing First Program for Homeless Families/ Los Angeles, CA

Target Population

Beyond Shelter's Housing First program serves homeless families with children and has been set up to serve the emergency shelter/transitional housing continuum of a large, metropolitan city. The Housing First Program methodology relies primarily upon the existing homeless services system in Los Angeles for outreach, crisis intervention and short-term stabilization of homeless families. More than 50 agencies throughout the Los Angeles area -- shelters, transitional housing

programs, residential drug treatment programs, domestic violence programs, social service agencies, and homeless access centers -- refer homeless families to Beyond Shelter for the "next step", after they have provided initial emergency or interim services.

The majority of families served each year are families facing multiple challenges that have unstable living patterns and/or histories of homelessness. Approximately 90% of 400 homeless families enrolled each year are headed by a single parent. Approximately 50% of mothers are in recovery and approximately 40% became homeless due to domestic violence. The average age of parents is 30 years old, and the average number of children is 4. Approximately 20% of mothers are pregnant upon enrollment. Approximately 25% of families have histories of child maltreatment and/or neglect. Mothers in recovery have often had children removed to foster care before their mothers sought treatment.

Beyond Shelter requires that an adult family member with a history of substance abuse have at least six months in a recovery program (post-treatment, post-detox) before moving into permanent housing. Similarly, Beyond Shelter requires that families who have experienced domestic violence have at least four months of separation from their abusive partner.

Program Description

Homeless families are referred to the "Housing First" Program for (1) assistance in moving into permanent, rental housing in residential neighborhoods, and then (2) the provision of home-based case management support for six months after the move, to help them transition to stability. The overriding goal of the program is to return homeless families to permanent housing as rapidly as possible.

Referred families meet with Intake Workers at the Beyond Shelter offices for screening and needs assessments. Upon enrollment, the family and Beyond Shelter staff work together to develop an individualized Family Action Plan. This plan identifies the family's housing and social service needs and the steps necessary to assist the family in moving towards stability in permanent housing.

Beyond Shelter Housing Relocation staff then assists families in relocating to affordable rental housing in residential neighborhoods throughout Los Angeles County, usually within three months of enrollment. Families are assisted in negotiating leases, accessing move-in funds, and overcoming the barriers of poor credit history, prior evictions, and discrimination based on ethnicity, family size, or income source. Through targeted Section 8 programs, approximately 75% are assisted in obtaining a Section 8 subsidy. Beyond Shelter builds and maintains close working relationships with private sector building managers, non-profit affordable housing providers, and local, state and federal housing assistance programs. The fact that there exists a support system for their tenants motivates many private landlords to participate in the program.

Each family is also assigned a case manager, who provides individualized case management support as the family carries out its Family Action Plan. This support begins during the housing relocation phase and continues with home-based case management after the family has moved into their new home. Case management services are time-limited and transitional. The primary function of case management is assessing the needs of the family, developing a plan of action to attain identified objectives, linking families to community resources and advocating on their

behalf, and monitoring the progress of families. Families are supported as they reorient to stable living patterns, and are provided assistance with homemaking, nutrition, parenting education, money management, child care, job training, job placement, and job retention. After initial, intensive contact, the focus is on linking families to mainstream programs and resources to meet their on-going and/or special needs.

The "housing first" methodology provides a critical link between the emergency shelter/transitional housing systems and the community-based and governmental services and resources that are often fragmented, difficult to access or simply not available to homeless families trying to attain stability and independence in permanent housing. The program methodology facilitates the move into permanent housing for homeless families and then engages the newly-housed family in a progressive set of individualized case management activities and interventions for a limited period of time, as they move toward improved social and economic well-being. The "housing first" methodology is premised on the belief that multi-problem and at risk families are often more responsive to interventions and support after they are in their own housing, rather than still living in housing programs that are temporary or transitional.

Source of funding

Original funding for the Housing First program came primarily a demonstration program at the U.S. Department of Health and Human Services (HHS). Primary funding has been provided since 1996 through the Federal Department of Housing and Urban Development (HUD), particularly the Supportive Housing Program (SHP), supplemented by a variety of local, state, and federal contracts and private foundation funding.

Available Data

From 1989-2001, the program enrolled over 2,500 homeless families, with approximately 2,200 relocated to, and stabilized in, permanent housing. The Housing First Program has been tested and refined through several national demonstration projects implemented by Beyond Shelter for the U.S. Department of Health and Human Services (HHS) and the Better Homes Fund. In 1990-1993, Beyond Shelter designed and implemented the Los Angeles Early Intervention Demonstration Project for Recently Homeless and At-Risk Families (in collaboration with Para Los Ninos), with an evaluation by a UCLA researcher. In 1992-1995, the home-visitation model was expanded through the HHS Family Support Center Demonstration Project, conducted over four years for over 250 homeless families.

As part of the Pew Partnership initiative, "Wanted: Solutions for America," a two-year evaluation of Beyond Shelter's Housing First program has recently been conducted by researchers from the University of Southern California, coordinated by Rutgers University. Data on 185 families were collected from April 1, 2000 to October 1, 2001, based on the Substance Abuse and Mental Health Administration (SAMHSA) Program Logic Model for Homeless Families. More than 90% of the mothers who graduated the program at the end of six months in permanent housing had achieved the short, intermediate, and long-term goals identified in the SAMHSA Logic Model and over 80% of the children's goals were achieved. Over 80% of adults were attached to the labor force through employment, and others were enrolled in job training

programs. Only 2.3% of those who entered the program with reported substance abuse problems had relapsed and .4 % of domestic violence survivors had returned to a dangerous relationship.

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Housing First May be a Good Idea, But Where do you find the Housing?

Housing assistance typically involves helping the individual/family identify appropriate housing options, negotiate with landlords, and intervening when problems develop following a housing placement that threatens the client's tenancy. Housing assistance may also include providing financial assistance for security deposits, rent guarantees and housing applications.

Developing housing resources has become a necessary component of implementing a Housing First approach -- this may involve marketing the program to landlords to develop a base willing to work with the Housing First program.

With a metropolitan housing vacancy rate under 1%, county and contracting agencies in Hennepin County, Minnesota, are attempting to find innovative ways to seek and retain affordable housing. Such efforts to expand the supply of housing for very low income and homeless people include:

- Intervening to keep housing units affordable when housing developments for low-income people are sold to a new owner.
- Advocacy to promote the "usability" of Section 8 vouchers by reducing landlord disincentives to entering the program.
- Providing dedicated staff time to locating potential housing units and developing an on-going relationship with landlords and responsible landlord association groups in their area.
- Paying double security deposits for those with poor rental history.
- Providing landlords up front Unlawful Detainer/Eviction costs deposits so the landlord will not absorb all of the risk
- Co-signing leases.
- Paying holding fees, a new fee to keep an apartment available while the landlord considers the application of the "troubled" tenant, sometimes refundable, sometimes not.
- Remaining responsive and committed to provide on-going case management intervention with the client and assist the landlord in resolving issues that places the client's housing in jeopardy.

And, Everyone Needn't Conduct Housing Searches – An Example of Coordination...

HomeStart, Boston, MA

In 1994, the Massachusetts Housing and Shelter Alliance (MHSA) developed a project to meet the housing needs of people experiencing homelessness. MHSA recognized that case managers in homeless service agencies were becoming increasingly specialized to deal with the multiple challenges many of their clients presented. When programs were taxed with high demands and high levels of complex needs, it was the housing search services that were often lost. HomeStart was formed to perform this function. Initially, it relied on one grant that funded three staff positions and was housed under MHSA. By 1999, HomeStart was an independent agency consisting of 22 employees and an annual budget of \$1 million. It currently employs 28 people with an annual budget of \$1.6 million.

Target Population

HomeStart receives referrals from 50 different agencies in the Greater Boston area. Homeless individuals or families who are referred must have some source of income, such as SSI/SSDI, employment or TANF and must be able to sustain their housing.

Program Overview

HomeStart's focus is to move individuals into housing and provide the stabilization support services necessary to help them retain their homes. Each of the housing search staff work with several referring agencies, allowing for close working relationships. A housing search staff advocate meets with a client while they remain in the shelter to explore the client's housing needs, potential resources and barriers. The housing staff will work with the client to access and maximize existing benefits. If they are denied housing services, an advocate will help them through the appeal process. The housing search staff is responsible for locating appropriate housing options for the clients they work with. When an individual or family is housed, they are transferred to a stabilization staff person. Stabilization services are usually voluntary and are focused on providing support to help the family or individual sustain their housing. Services may include help accessing programs in the community, such as mental health services, and dealing with life skills issues such as budgeting. Stabilization advocates work with clients to help them deal with any landlord/tenant conflicts that may arise. Staff members support individuals and families by meeting them in their homes as well as in their communities.

To facilitate the successful housing of clients, HomeStart staff members rely on the resources known as their "toolbox." The toolbox includes an array of resources they have developed or secured including housing subsidies and financial assistance for security deposit and first month's rent.

Source of Funding

The agency has 28 staff and an annual budget of \$1.6 million. The majority (80-85%) of their funding is through McKinney-Vento grants. HomeStart also has contracts with state agencies to help house individuals who are exiting state-funded programs, partly because of the state's commitment to improving housing outcomes for those discharged from state-funded programs who are vulnerable to homelessness.

Service Utilization/Data

- Since 1994, the project has moved more than 1,400 people into permanent housing.
- Approximately 65% of the households served by HomeStart are single adults and 35% are families.

- About 35% - 40% of individuals and families that find permanent housing also receive stabilization services. • 81% of individuals placed into housing through HomeStart are still housed one year later.
- In 2001, 218 individuals moved into housing with HomeStart assistance:
 - 72% into subsidized housing
 - 28% into nonsubsidized housing
 - the average length of time to find housing was 6.7 months
 - 67% received financial assistance, e.g. first/last months rent/security deposit

Impressions of Administrators/Advocates

The program is committed to specializing on the "back door" i.e. finding and maintaining housing for those who are homeless. Expanding housing search and stabilization services within existing homeless service centers was considered a less effective approach because staff would inevitably be pulled from housing efforts to meet the daily demands of residential programs. Separate funding streams and dedicated staff essentially produce a "firewall" that allows HomeStart staff to focus solely on re-housing.

The absence of a separate dedicated homeless prevention program has been problematic. HomeStart staff has received a number of inquiries from individuals and families who would more appropriately be served with prevention assistance. This has a demoralizing effect on the staff, who would like to be able to help people before they become homeless. It also signals a gap in the overall safety net. However, HomeStart has just received private funding to begin a small pilot prevention program.

Stabilization services that are essential to the success of the program include home visiting and budget management. If resources were available, staff members believe that having a mental health specialist or psychiatrist on staff would be beneficial to clients.

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☛ What's next for the RSC? What other issues related to ending family homelessness do you wish to focus on?

RELATED MATTERS TO KEEP ON YOUR RADAR

Definition of Homeless

On July 26, 2005, the National Policy and Advocacy Council on Homelessness (NPACH), the Child Welfare League of America (CWLA) and the National Association for the Education of

Homeless Children and Youth (NAEHCY) released a joint paper entitled, “A Matter of Definition: Responding to Homelessness Among Families, Children, and Youth.” The paper calls for the expansion of HUD’s definition of homelessness in order to more accurately reflect the level of need.

Since the McKinney-Vento Homeless Assistance Act was passed in 1987, the federal Departments of Education (DOE), HUD, Health and Human Services (HHS) and Veterans Affairs have adopted different definitions of homelessness to administer programs authorized through the act. According to the paper, “while some variation in federal definitions appropriately reflects different agency missions, other discrepancies have resulted in the exclusion of extremely vulnerable populations identified and assisted by one federal program from receiving much needed services provided by another.”

Current HUD statute defines a homeless person as an individual who lacks a fixed, regular, and adequate nighttime residence, or an individual who has a primary nighttime residence that is: a supervised publicly or privately operated shelter designed to provide temporary living accommodations; an institution that provides a temporary residence for individuals intended to be institutionalized; or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings. In contrast, the Department of Education’s definition of homelessness includes: children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement.

The paper calls for the HUD definition to be amended to include families in doubled-up situations and those living in motels. “Because such households are not included in the HUD definition of homelessness, they are excluded from HUD services.” The paper can be found at www.npach.org.

☛ *Does the RSC support this position?*

Upcoming National Conference on Family Homelessness in Oakland

The National Alliance to End Homelessness’ National Conference on Ending Family Homelessness will be held **January 26-27, 2006** Oakland Marriott City Center Oakland, CA. Agenda, online registration and online hotel reservation links coming soon to www.naeh.org.

☛ *What type of workshops would you hope to attend?*

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