

Housing First *is* . . .

. . . an Evidence-Based Approach to Solving Homelessness.

Housing First connects individuals and families experiencing homelessness to housing without limits on length of stay as quickly as possible. Evidence repeatedly demonstrates Housing First allows people to exit homelessness quickly and remain stably housed.¹ By promoting access to housing affordable to people experiencing it and by removing barriers to housing, like past evictions, poor credit, or criminal justice involvement, Housing First is the most effective way to reduce homelessness.²

. . . Based on Maslow's Hierarchy of Needs.

People cannot recover from medical, mental health, or substance use disorders without a stable place to live. Housing First's goal is to stabilize people in housing without a requirement to participate in a program or to abstain from drug or alcohol use. It allows people experiencing homelessness to first meet their most basic need of housing, and then receive services to support housing stability.

. . . Rooted in Fostering Dignity.

Housing First acknowledges that all people experiencing homelessness are able to achieve housing stability and all are "housing ready." Sobriety and treatment compliance are not precursors to succeeding in housing, and a history of incarceration typically has no correlation to being a good tenant.³ In Housing First, case managers engage tenants to want to participate in services. Because housing is not contingent on services participation, a tenant's case manager never threatens the tenant with a return to homelessness (i.e., eviction). As such, tenants develop trusting relationships with case managers, and the tenant is more likely to access treatment, participate in life skills training, get help with managing money, and, ultimately, increase their income. This "voluntary" services model is more successful than "mandatory" services, and fosters over a 90% rate of services participation. It also allows tenants to retain housing at higher rates.⁴

. . . Flexible, and Designed to Serve Different Needs.

In a Housing First approach, the services people receive, the type of treatment they need, and the exact configuration of housing all depend on the needs and choice of the individual or family served. Rather than requiring the tenant to conform to a pre-set services program model, the program conforms to the tenant's needs. This "whatever it takes" approach requires case managers to use evidence-based techniques to work with tenants to set goals and strategies for meeting these goals. Tenants drive their own outcomes in a Housing First model.

. . . Successful!

Multiple studies, including control-group, randomized, and pre-/post- studies show Housing First allows tenants to live independently and improve outcomes. Supportive housing using Housing First costs less than maintaining homelessness.⁵

Q: What is Permanent Housing & Why is it Important in Solving Homelessness?

A: Permanent housing is housing without limits on length of stay. In contrast to transitional housing, which limits a tenant's stay and traditionally requires program compliance to remain housed, permanent housing promotes longer-term stability, allows people to exit homelessness faster, and results in better outcomes. People living in transitional housing return to homelessness as often as people who receive no housing.

¹ Sam Tsemberis, Leyla Gulcur, et. al. "Housing First, Consumer Choice, & Harm Reduction for Homeless Individuals." *Am. J. Public Health*. 2004.

² Daniel Gubits, Marybeth Shinn, et. al. "Family Options Study: 3-Year Impacts of Housing and Services Interventions for Homeless Families." *Washington, DC: U.S. Department of Housing and Urban Development*. 2016.

³ Merf Ehman, Anna Reosti. "Tenant's Screening in an Era of Mass Incarceration: A Criminal Record is Not a Crystal Ball." *NYU J. Legislation & Pub. Pol'y*. March 3, 2015.

⁴ Todd Gilmer, A. Stefancic, et. al. "Fidelity to the Housing First Model and Variation in Health Service Use within Permanent Supportive Housing." *Psychiatric Services* 66(12):1283-1289. 2014. (*Found lower rates of substance use among tenants with substance use disorders than mandatory services model.*)

⁵ See Laura Sandowski, Romina Kee, et. al. "Effect of a Housing & Case Management Program on Emergency Department Visits & Hospitalizations Among Chronically Ill Adults." *J. American Medical Assoc.* May 2009.

...a Requirement for All Projects Receiving Funding Under California Law.

HUD homeless programs already require Housing First. California law passed in 2016 requires for all State-funded programs that provide housing or housing-based services to people experiencing homelessness or at risk of homelessness comply with core components of Housing First.⁶

Housing First is Not . . .

. . . Housing Only.

Housing First offers services based on the needs of the tenant. Services typically include case management that helps tenants remain stably housed, care coordination that helps tenants get treatment they need (medical, mental health, and/or substance use treatment), transportation assistance to help tenants get to appointments, and income supports (benefits advocacy and employment services) to help tenants increase their income.

. . . Expensive to Public Systems.

Housing First decreases use of publicly-funded ambulance services, incarceration, inpatient hospitalization, nursing home stays, and emergency department visits. It results in shorter foster care stays for children of homeless families.⁷ A recent study of a Los Angeles County program following Housing First found over 96% of participants remained stably housed after one year, tenants decreased their inpatient stays and emergency room visits substantially, and decreased their use of General Relief and number of arrests. Evaluators found the housing and services resulted in 20% net public cost avoidance over and above the costs of the housing and services.⁸

. . . Where Tenants Can Do Whatever They Want, as a Reward for Bad Behavior.

A Housing-First project is NOT an “anything goes” project. Tenants have leases with rights and responsibilities of tenancy under California law. If a tenant violates a lease, a landlord may evict. Tenants are responsible for paying 30% of their incomes on rent, and could be evicted for failure to pay rent. Ideally, landlords work closely with service provider staff and tenants to ensure tenants are complying with their lease terms and addressing behaviors that could lead to eviction. Housing is not a reward; rather, housing is a necessity in improving life trajectory and making recovery possible.

. . . a Way to Promote Drug Abuse.

Just like anyone living in an apartment, tenants are typically able to use alcohol or drugs in the privacy of their own apartments without fearing eviction. If drug or alcohol use causes behaviors that lead to lease violations or tenants are disrupting a neighbor’s peaceful enjoyment, tenants may be evicted, just like anyone living in a market-rate apartment. Tenants often choose to abstain from alcohol or drugs. Service providers work with tenants to reduce the harm drug or alcohol use causes through evidence-based harm reduction models, and to use in a responsible way.

. . . Funding for Apartments that Do Not Meet Basic Habitability.

Programs implementing Housing First receive public subsidies, which require compliance with habitability and safety standards. Regulatory agencies inspect the building and each unit at least annually. HUD requires Housing First in homeless assistance programs, along with standards that go well beyond California habitability and safety laws.

. . . A New, Unproven, or Untested Model.

Sam Tsemberis, a psychologist, first tested Housing First in 1992. Over 25 years later, federal agencies recognize Housing First as evidence-based. California and most local governments have also embraced Housing First for years. It is not new, and is no longer, therefore, thought of as “innovative.” Instead, it is a proven, highly-tested, evidence-based model.

⁶ California Welfare & Institutions Code § 8255(b).

⁷ Donna Tapper. “Keeping Families Together: An Evaluation of the Implementation & Outcomes of a Pilot Supportive Housing Model for Families Involved in the Child Welfare System.” *Metis Assoc.* 2010.

⁸ S. Hunter, M. Harvey, et. al. “Evaluation of Housing for Health Permanent Supportive Housing Program.” RAND Corp. 2017.