A New Vision
What is in Community Plans to End Homelessness?

NOVEMBER 2006

National Alliance to
End HOMELESSNESS

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National Alliance to
END HOMELESSNESS

The National Alliance to End Homelessness is a nonpartisan, mission-driven organization committed to preventing and ending homelessness in the United States.

Our work

The National Alliance to End Homelessness is a leading voice on the issue of homelessness. The Alliance analyzes policy and develops pragmatic, cost-effective policy solutions. We work collaboratively with the public, private, and nonprofit sectors to build state and local capacity, leading to stronger programs and policies that help homeless individuals and families make positive changes in their lives. We provide data and research to policymakers and elected officials in order to inform policy debates and educate the public and opinion leaders nationwide. Guiding our work is *A Plan, Not a Dream: How to End Homelessness in Ten Years*. The Ten Year Plan identifies our nation's challenges in addressing the problem and lays out practical steps our nation can take to change its present course and truly end homelessness within 10 years. To learn how to end 20 years of homelessness in 10 years, please visit www.endhomelessness.org.

Homelessness Research Institute

The Homelessness Research Institute at the National Alliance to End Homelessness works to end homelessness by building and disseminating knowledge that drives policy change. The goals of the Institute are to build the intellectual capital around solutions to homelessness; to connect with researchers across the country to ensure that policymakers, practitioners, and the caring public have the best information about trends in homelessness demographics, research, and emerging solutions; and to engage the media to ensure intelligent reporting on the issue of homelessness.

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Executive Summary

The problem of homelessness, many say, is an unsolvable problem. Communities across the country have struggled with getting homeless people off the street by building shelters, transitional housing, and soup kitchens. Although these strategies help address the immediate needs of our nation's homeless people by providing food and temporary shelter, they have not been successful in decreasing homelessness, leaving communities frustrated and hopeless. In 2000, the National Alliance to End Homelessness announced *A Plan, Not a Dream: How to End Homelessness in Ten Years.* Drawing on research and innovative programs from around the country, the plan outlined a new vision to address the problem of homelessness. This vision included strategies to end the problem by providing affordable housing and needed services, and, just as important, by preventing homelessness from occurring in the first place. Since that time, 220 communities have undertaken efforts to end homelessness and 90 communities have completed plans to end homelessness. These plans echo key strategies outlined in the Alliance's plan and represent a critical, collective effort to end homelessness nationwide.

This report is the first nationwide examination of local plans to end homelessness. The major findings in the report include the following areas.

Plan Types

A majority (66 percent) of the community plans to end homelessness target all homeless people and 34 percent focus on chronically homeless people. Many plans lay out strategies for specific subgroups of homeless people, including families, youth, veterans, and the elderly. Forty-one percent of plans outline strategies to end family homelessness, 49 percent outline efforts to end youth homelessness, and 31 percent of plans address the housing needs of former prisoners, to prevent them from becoming homeless.

Planning efforts to end homelessness have taken root across the country—geographically distributed, but concentrated in population centers. A wide range of stakeholders were involved in the community planning process, with the strongest representation from the nonprofit sector and the weakest representation from the private sector. Although some plans (28 percent) involve currently or formerly homeless people, their participation in the development of plans is lower than that of other stakeholders.

Primary Strategies Outlined in the Plans

Communities outline a wide range of strategies in the plans: creating data systems; preventing homelessness—both emergency prevention and prevention at the systems level; outreach to homeless people to get them back into housing; shortening the time that people spend homeless by using rapid re-housing strategies; creating permanent housing options for homeless people; and, once homeless people become housed, linking them

to services and to programs that will help them boost their income and increase their ability to afford housing in the future. The plans address the following issues:

- **Creating Data Systems.** Almost all of the plans (91 percent) outline strategies to create Homeless Management Information Systems (HMIS).

- **Homelessness Prevention.** An overwhelming majority of the plans (79 percent) address emergency prevention (e.g., one-time rental or utility assistance, help negotiating an eviction with a landlord, etc.), and 91 percent of the plans outline systems prevention activities, such as discharge planning from correctional facilities, foster care systems, or mental health facilities.

- **Outreach.** Outreach efforts to engage people living on the streets are outlined in 79 percent of the plans.

- **Shortening Time of Homelessness.** Shortening the time that people spend homeless by providing permanent housing to homeless people is included in 67 percent of the plans; 57 percent call for rapid re-housing. In total, the plans call for creating approximately 196,000 units (or subsidies), of which 80,000 units are permanent supportive housing.

- **Links to Services.** Once individuals or families are in housing, 81 percent of the plans outline strategies to link them with **mainstream services** so they can earn enough money to pay rent and avoid homelessness.

Implementation and Funding Sources

The plans are a step in the right direction—a forward movement in the effort to end homelessness—but in order for a community to see real declines in the number of homeless people, it must implement its plan. This analysis measured the strength of the plans by calculating a score for *each strategy* outlined in the plan based on the likelihood that it would be implemented. The strength score was calculated based on whether the plan identified performance measures, set a timeline, and identified specific funding sources and bodies responsible for the implementation of each strategy. Most of the strength scores were low to medium, with a majority falling between 0 and 2 (the highest being 4). These scores show that, although plans are outlining the right strategies, they are not always setting clear numeric indicators, establishing timelines, implementing bodies, and identifying funding sources to implement each key strategy. While the strength scores examined specific strategies, we also looked at overall plan implementation and funding. We found that a little over half (54 percent) of the plans identify a body that will take up responsibility for overall plan implementation once the plan is completed. Similarly, about half of the plans (48 percent) identify funding sources to implement the overall plan.

Implications for Homelessness and Future Planning Efforts

Today hundreds of communities are tackling the seemingly intractable problem of homelessness by outlining plans that move from managing the problem of homelessness to ending it. The problem of what to do about homelessness is no longer viewed as an unan-

swerable question. Although community plans to end homelessness represent a collective effort, much more can and should be done. This study reveals that hundreds of communities are planning to end homelessness. Some are implementing their plans—and are seeing positive results—but many more must take their plans off the shelf and move from planning to action. While efforts to end homelessness require participation from local communities, the federal government has a bigger role to take on in the form of increasing access to affordable housing and coordinating mainstream services, such as Temporary Assistance to Needy Families (TANF), Medicaid, Earned Income Tax Credit (EITC), and mental health services. There is much more to be done, but despite these challenges, for the first time in two decades, communities have a plan and homelessness is a problem with a clear solution.

Background

For more than two decades, communities have struggled with the complex problem of homelessness, a seemingly intractable problem in cities and small towns across the United States. Homelessness increased significantly in the 1980s. In response, the federal government funded a $2 billion homeless assistance system, made up of emergency shelters, soup kitchens, transitional housing, and other programs that met homeless people's immediate needs.[1] At the time, most Americans thought homelessness was a temporary problem caused by a devastating recession, the deinstitutionalization of people with mental illness, and the onslaught of the crack epidemic. Eventually, the economy recovered, but affordable housing became increasingly scarce and incomes failed to keep pace. Despite billions spent on a homeless assistance system, homeless people remained—even increased during that period. Today, on any given night, upwards of 750,000 people are without a permanent place to call home.[2]

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What went wrong? The homeless assistance system provides shelter and feeds and clothes homeless people, but it cannot provide them with the thing they need the most—permanent housing. The system was set up to manage the problem of homelessness, not end it. Now, 20 years later—when homelessness has gotten worse, not better—the homeless assistance system, initiated as a stopgap measure, risks becoming the sole response to the problem.

It has been said that the solution to every problem starts with a great plan. During the past five years, hundreds of communities have committed to ending homelessness by dramatically transforming their homeless assistance systems. Each commitment starts with a plan that outlines a framework to guide community-wide efforts. These plans have become a critical component of efforts to prevent, reduce, and end homelessness nationwide.

The development of local 10-year plans began in 2000 when the National Alliance to End Homelessness announced *A Plan, Not A Dream: How to End Homelessness in Ten Years.*[3] The Alliance's Ten Year Plan focuses on using data to plan for outcomes, closing the front door to homelessness through prevention programs, and opening the back door out of homelessness by rapidly re-housing individuals and families. Finally, it calls for building an infrastructure by increasing incomes, expanding affordable housing, and helping individuals and families access needed services. This plan, supported by research and grounded in practical experience, was a call to action that outlined a blueprint for communities to follow (see "How to End Homelessness in 10 Years").

Since the National Alliance to End Homelessness' announcement in 2000, the concept of local planning to end homelessness has taken root, and local 10-year plans have prolif-

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[1] For more on the history of homelessness policy, see Burt, Martha R. *Helping America's Homeless Emergency Shelter or Affordable Housing?* Urban Institute, 2001.
[2] See Burt, Martha R. *What Will it Take to End Homelessness*? Urban Institute, 2001.
[3] See National Alliance to End Homelessness, *A Plan, Not a Dream: How to End Homelessness in Ten Years*, available at www.endhomelessness.org.

How to End Homelessness in 10 Years

The Alliance's Ten Year Plan to End Homelessness, announced in 2000, outlined four principal strategies for local communities to use to end homelessness

Plan for Outcomes

Communities should collect data at the local level on who is homeless, why they became homeless, what assistance they receive, and what is effective in ending their homelessness. Based on these data, communities should create a plan focused on the outcome of ending homelessness. The planning process should include representatives from the public, private, and nonprofit sectors.

Close the Front Door

A crucial part of ending homelessness is preventing people from becoming homeless in the first place. Public systems, such as the mental health, the public health, the welfare, and child protective services systems, must take responsibility for ensuring that their clients do not become homeless. These efforts should be supplemented by emergency prevention strategies, including rent and utility assistance and landlord–tenant mediation. Prevention efforts hold the promise of saving public and charitable expenditures in the long run.

Open the Back Door

People experiencing homelessness should move back into housing as quickly as possible. Any necessary services should be provided in permanent housing, rather than in the homeless system. This approach is known as "Housing First."

Build the Infrastructure

Communities must address the root causes of homelessness by working toward livable incomes, affordable housing, and access to services for people who need them.

Source: The National Alliance to End Homelessness, *A Plan, Not a Dream: How to End Homelessness in Ten Years*, 2000

It has been said that the solution to every problem starts with a great plan.

erated across the country. In 2000, Indianapolis Mayor Bart Peterson was the first mayor to endorse the creation of a plan to end homelessness. In 2002, Chicago, Memphis, and Indianapolis become among the first cities to complete 10-year plans. At the same time that local efforts to end homelessness started to develop, U.S. Department of Housing and Urban Development (HUD) Secretary Mel Martinez endorsed ending chronic homelessness in 10 years.[4] President Bush echoed this endorsement, making ending chronic homelessness an Administration-wide goal.[5] Congress committed to creating 150,000 units of permanent supportive housing for chronically homeless people. The Administration also reinvigorated the once dormant U.S. Interagency Council on Homelessness (USICH), an agency dedicated to coordinating federal efforts to end homelessness.

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[4] "Taking On the Problem That 'Cannot Be Solved.'" Remarks prepared for delivery by Secretary Mel Martinez, Friday, July 20, 2001.
[5] President Bush first announced the Administration's commitment to end homelessness in the FY 2003 Federal Budget.

2000 The National Alliance to End Homelessness announces *A Plan, Not A Dream: How to End Homelessness in Ten Years.*

2001 U.S. Department of Housing and Urban Development Secretary Mel Martinez endorses the idea of ending chronic homelessness.

2002 The U.S. Interagency Council on Homelessness is reactivated.

The Administration's proposed FY03 budget affirms that the administration has a goal of ending chronic homelessness in 10 years.

Indianapolis, Chicago, and Memphis all complete plans to end homelessness.

2003 At the annual meeting of the U.S. Conference of Mayors, U.S. Interagency Council on Homelessness Executive Director Philip Mangano challenges 100 cities to create plans to end homelessness. The U.S. Conference of Mayors adopts a resolution in support of this challenge.

The National League of Cities and the National Association of Counties adopt resolutions in favor of plans to end homelessness.

2004 Approximately 100 communities initiate 10-year planning efforts.

2005 Approximately 190 communities initiate 10-year planning efforts.

2006 220 communities have embarked on the process of creating plans to end homelessness, and 90 plans are complete.

> To date, over 200 cities, counties, and states have initiated a planning process to end homelessness, and 90 jurisdictions have completed plans.

The movement to end homelessness continued to grow when, in 2003, the USICH Director, Philip Mangano, challenged 100 cities to create plans to end homelessness. Spurred by a federal goal of ending chronic homelessness in 10 years, resolutions by the U.S. Conference of Mayors, the National League of Cities, and the National Association of Counties, and encouragement and technical assistance from the National Alliance to End Homelessness, a parade of plans followed (See "Plans to End Homelessness—Timeline").

To date, over 200 cities, counties, and states have initiated a planning process to end homelessness, and 90 jurisdictions have completed plans. At the local level, these plans are widely scrutinized and publicized, often the product of lengthy public processes, and closely watched by local media and advocacy groups. Yet, at a national level, little to no information about the plans exists. What are the primary goals and strategies outlined in the plans? What stakeholders are involved in the planning process? Are there patterns or similarities across plans or are they a disparate set of documents? Do plans include mechanisms or concrete steps that will lead to implementation? And, the most common question, which plans are the best? These questions, and others, remain unanswered.

Information about the content of completed 10-year plans to end homelessness is important and informative both at the national and the local levels. Policymakers and advocacy groups have an interest in what strategies communities are adopting across the country and what resources they are utilizing to implement these strategies. Local organ-

izations and jurisdictions embarking on plans to end homelessness can learn from the experience of other communities and replicate model plans.

Faced with this vacuum of knowledge, the Alliance set out to gather information on the content of existing local plans to end homelessness. Alliance staff analyzed all completed plans using qualitative and quantitative methods (see "Methods"). This report describes the findings, including the types of plans, their geographic location, and the strategies outlined within them (see the appendix of this report for a list of plans that were included in this analysis). It further examines key indicators of the implementation potential, including funding. In addition to reporting on quantitative measures, this report also highlights case studies of model plans. Finally, it examines the implications of the findings for future planning efforts. This report is the first nationwide examination of local plans to end homelessness.

This report is the first nationwide examination of local plans to end homelessness.

Methods

This analysis examines three questions: (1) What types of plans exist?; (2) What are the primary strategies outlined in the plans; and (3) Do plans include mechanisms—or concrete steps—that will lead to implementation? To answer these questions Alliance staff collected and analyzed all completed local plans to end homelessness.

To collect completed plans, Alliance staff worked from a list maintained by the U.S. Interagency Council on Homelessness of all communities with plans either completed or in process (N = 220), as well as list of completed plans that existed on the Alliance Web site (www.endhomelessness.org). These lists were supplemented by a request for completed plans sent out via the Alliance Online News, which resulted in uncovering 20 additional plans. In addition, the status of plans identified as in process was checked via Internet searches and, when necessary, follow-up with community stakeholders. This strategy identified 90 complete plans, as of the time of our analysis (February 2006–June 2006).

Alliance staff analyzed the content of all 90 plans, coding the plans for information on geographic detail, target populations, stakeholder involvement, and the primary strategies outlined in the plan. Primary strategies were coded using the conceptual framework of the Alliance's Ten Essentials (see Ten Essentials to Ending Homelessness). Whether the plans set measurable goals, set a timeline for achievement of goals, identified funding sources, or assigned responsibility for implementation to a specific body was also noted. These four indicators were used as measures of the "strength" of a plan—that is, the likelihood that a given strategy would be implemented and the goal achieved.

Alliance staff entered data into a Access database; the data entry started with a test phase to ensure each analyst was interpreting and entering qualitative measures using consistent methods. The data were summarized using Access, SPSS, a statistical software program, and Geographic Information Systems (GIS). In addition to the quantitative summaries, we include qualitative case studies of model plans.

It is imperative to note that this analysis is largely descriptive. The purpose of this report is to provide resources to community organizations involved in efforts to end homelessness. The report shares strategies that communities plan to adopt; the data collected cannot definitively answer questions about how successful local communities are—or will be—in ending homelessness.

Plan Types

Planning to end homelessness is, for the most part, a local process. Plans usually cover a city or county, although statewide plans do exist—for example, Utah, North Carolina, New Jersey, and Rhode Island. Plans come together in different ways: mayors or governors initiate some, and the local Continuum of Care or homeless advocates spearhead others. The development of plans involves different stakeholders ranging from homeless service providers to bank presidents. Some plans are the result of small working groups and others are the product of hundreds of constituents. No matter how it is developed, each plan is a unique document that takes into consideration the needs of the local homeless population and the resources in the community to address the problem of homelessness.

The Majority of Plans Target All Homeless People

Plans target different segments of the homeless population, including chronically homeless people, families, youth, and others. Because of the Administration's commitment to ending chronic homelessness, local communities receive encouragement from the federal level, including outreach from the USICH to create plans to end chronic homelessness. Jurisdictions receiving HUD Supportive Housing Program and other HUD funding are rewarded for developing plans to end chronic homelessness.[6] Despite this federal emphasis on ending chronic homelessness, the majority of communities have, in their planning processes, looked beyond the chronically homeless population and created plans to end homelessness for all homeless people.

Approximately two-thirds of completed plans to end homelessness (66 percent) are plans to end all homelessness. About one-third of completed plans (34 percent) are plans focused exclusively on ending chronic homelessness (see Exhibit 1).

Many plans further lay out strategies targeted to specific subgroups of the homeless population including families, youth, veterans, and the elderly. Approximately 41 percent of plans outline strategies to end family homelessness, such as using

Exhibit 1 Plan Target Populations

Chronic 34%

All 66%

N = 90

TANF dollars to fund short-term housing subsidy programs or rapid exit programs that help families move from shelter to permanent housing; 20 percent of the plans address the needs of homeless victims of domestic violence. About half of plans (49 percent) target strategies to homeless youth, including 19 percent of plans that specifically address

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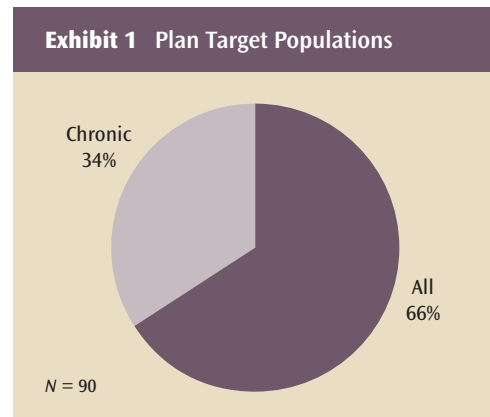
[6] See the *Toolkit for Ending Homelessness* available at www.endhomelessness.org/section/tools/essentials/.

homelessness among youth involved in the child welfare system. About one-third (31 per-cent) of plans address homelessness among ex-offenders, commonly calling for discharge planning for individuals leaving prison and jail. Almost one-third (29 percent) of the plans address the housing needs of homeless veterans, and 11 percent of plans target strategies to elderly homeless people (see Exhibit 2).

Exhibit 2   Plan Target Subpopulations

N = 90
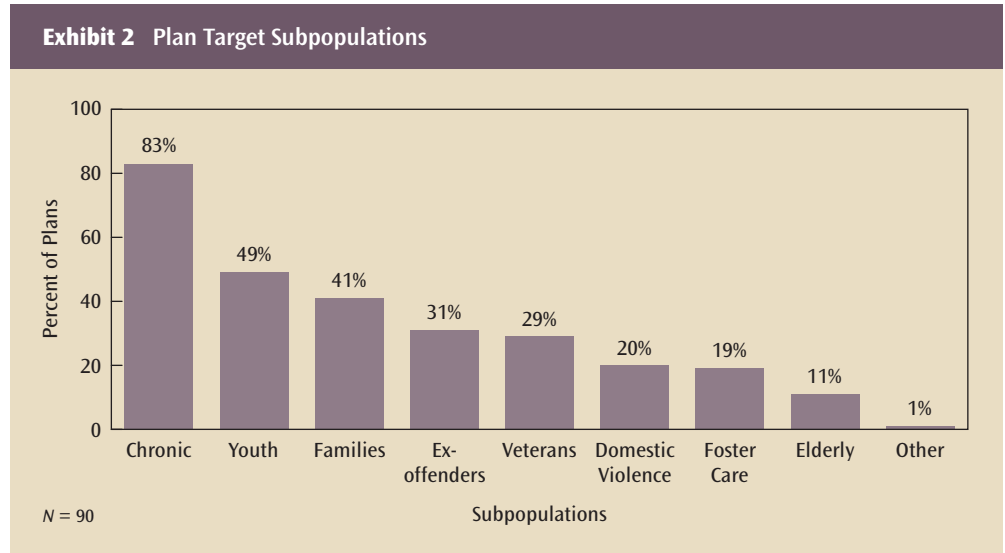
Plans Are Geographically Distributed

Communities across the country have completed plans to end homelessness. Plans are not concentrated in any particular geographic region, but rather spread out across the map, with the exception of the Great Plains. Almost one-quarter of the plans are located in the Southeast; 14 percent are in the Southwest. The Northeast holds 17 per-cent of the plans to end homelessness and the mid-Atlantic region holds 9 percent. The Midwest has 13 percent, the Pacific coast 13 percent, and the Northwest 16 percent (see map and Exhibit 3).

However, while plans are geographically spread across regions of the country, they are concentrated in urban areas, or urban areas and their surrounding suburbs.[7] As Exhibit 4 shows, about one-third (30 per-cent) of plans focus exclusively on urban areas such as New York or Chicago, and 30 percent of plans include urban areas

Exhibit 3   Plans by Geographic Region

N = 90
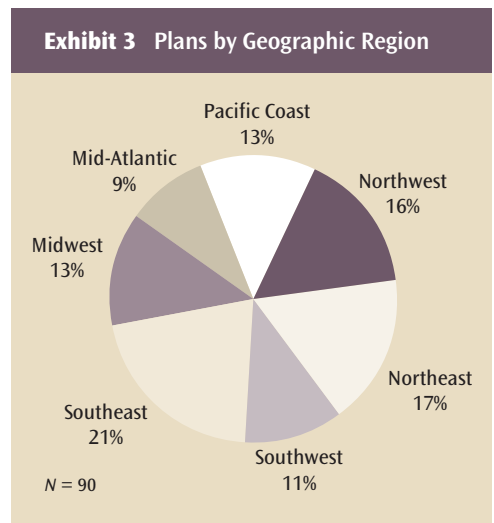
[7] These categories were assigned loosely. The distinction between urban, suburban, and rural was made using population and proximity to closest metropolitan statistical area.

MAP Geographic Representation of Completed Ten Year Plans

▲ State Plans
● City/County Plans
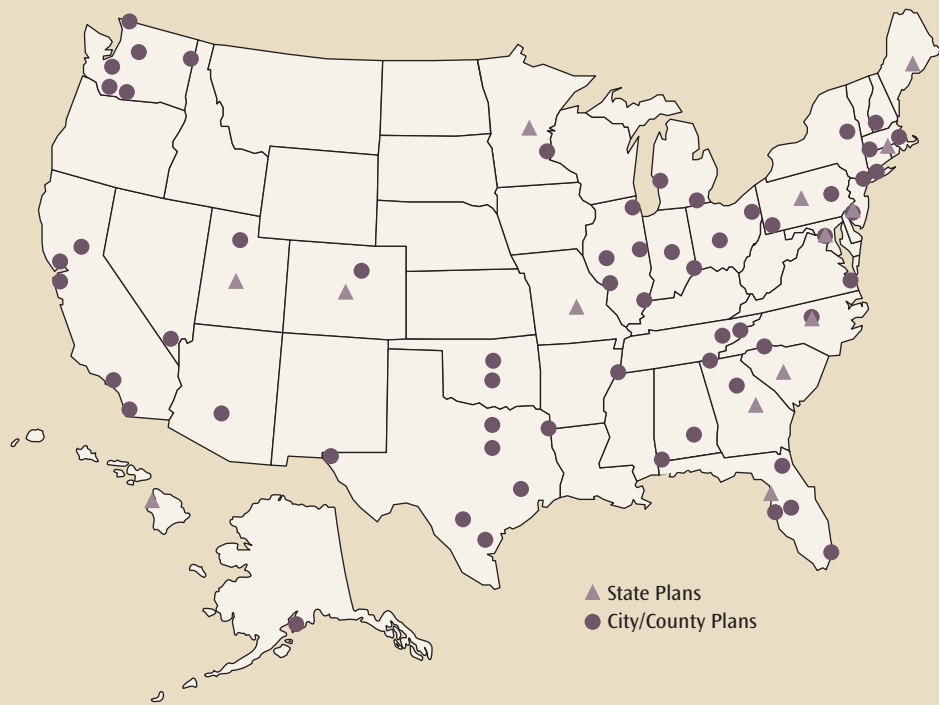
For a list of plans, please see the appendix to this report.

Exhibit 4 Plans by Area Type

Percent of Plans

Urban Only	Urban-Suburban	Suburban Only	Suburban-Rural	Rural Only	All
30%	30%	2%	2%	1%	34%

N = 90
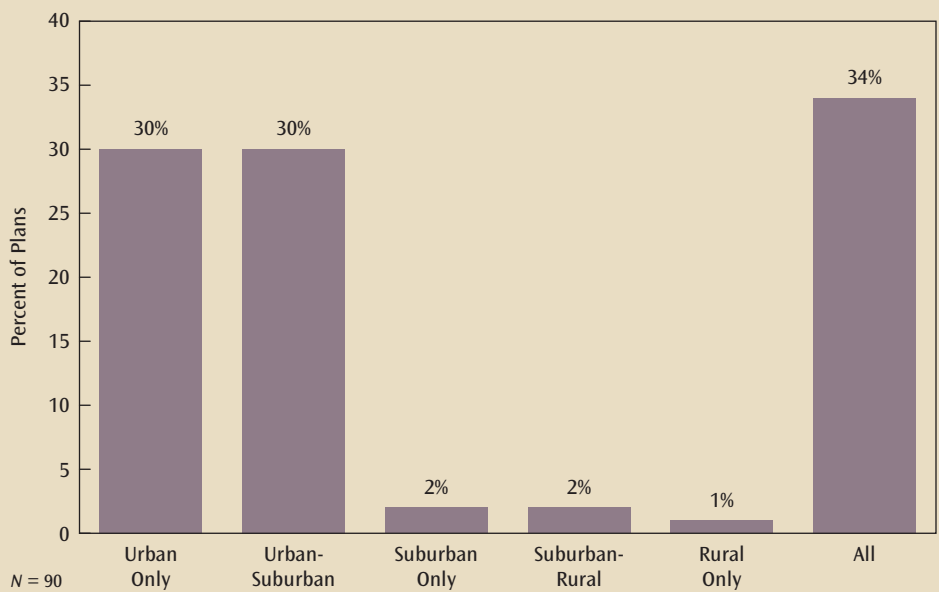
and their suburbs, such as King County, Washington, which encompasses Seattle. Another 34 percent of plans cover urban, suburban, and rural areas—these include state plans, such as the state of Georgia and the state of Minnesota. Only 5 percent of plans cover exclusively suburban, exclusively rural, or suburban and rural—but not urban—areas.

A Wide Range of Stakeholders Were Involved in Community Planning Processes

It will take a united effort of the private, the public, and the nonprofit sectors of society to end homelessness. Analysis of the plans demonstrated that, indeed, the process of creating 10-year plans brings a wide range of community stakeholders from the private, public, and nonprofit sectors to the table. As Austin's plan states, "Ending chronic homelessness is an achievable goal, but only if there is a strong commitment from local government leaders, federal and state policymakers, and the community at large."
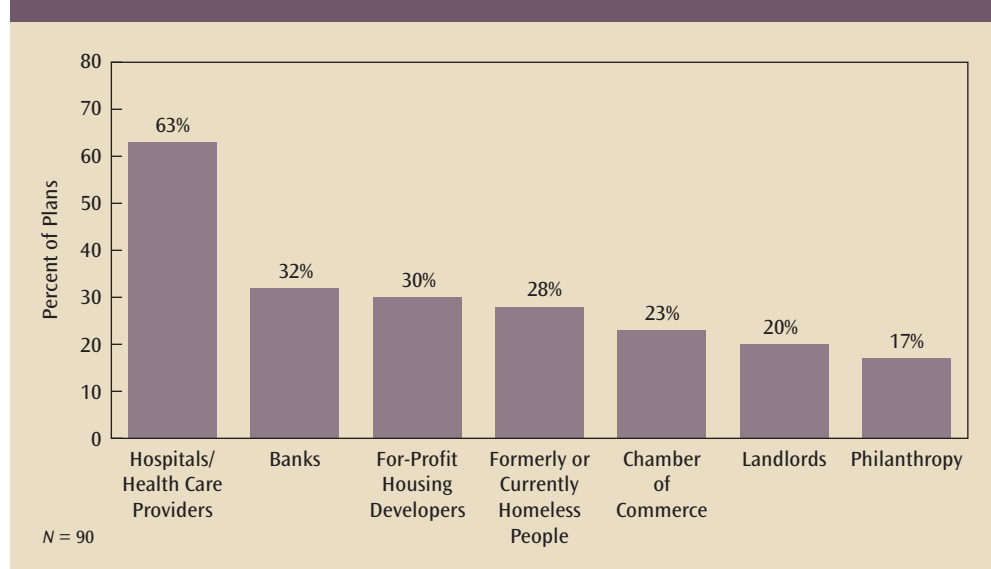
Stakeholder involvement—those from the community with a vested interest in ending homelessness—varies from community to community. An overwhelming majority (83 percent) of plans identify private stakeholders that had been a part of the planning process (Exhibit 5). These include hospitals and health care providers (63 percent of plans), banks (32 percent of plans), for-profit housing developers (30 percent of plans), Chambers of Commerce (23 percent of plans), landlords (20 percent of plans), and philanthropic organizations (17 percent of plans). Indianapolis, Pittsburgh, and Nashville are among the 30 plans that involve representatives from banks. Twenty plans involve members from the Chamber of Commerce, including Memphis, El Paso, and Dallas. Yakima, Washington, Hartford, CT, and Waco, TX are among the 15 plans that include representatives from philanthropic organizations.

> …the process of creating 10-year plans brings a wide range of community stakeholders from the private, public, and nonprofit sectors to the table.

Exhibit 5 Private Stakeholders

N = 90

Almost all of the plans (90 percent) identify public stakeholders that had been involved in creating the plan. The represented public stakeholders include Departments of Human or Social Services (70 percent of plans), Housing Authorities (60 percent of plans), Departments of Community or Economic Development (52 percent of plans), police departments (44 percent of plans), mayors' offices (44 percent of plans), Departments of Mental Health (43 percent of plans), Departments of Public Health (42 percent of plans), and Departments of Corrections (41 percent of plans). Many other public agencies were involved in the planning efforts (see Exhibit 6).

The importance of involving mainstream agencies should not be overlooked. Many people who become homeless still are, or should be, clients of mainstream systems of care. These systems can prevent homelessness by monitoring the housing stability of the people they assist, particularly those who are at greatest risk of homelessness because of lack of family supports, extremely low incomes, mental illness, or other personal difficulties. Mainstream agencies and systems also have the resources and responsibility to end homelessness for individuals and families and in doing so can lead to improving organization performance and cost savings to the community.

An overwhelming majority of plans (87 percent) identify participation from the nonprofit sector. Nonprofit stakeholders include community-based nonprofit organizations (73 per-

Exhibit 6 Public Stakeholders

Stakeholder	Percent of Plans
Department of Human or Social Services	70%
Housing Authority	60%
Department of Community or Economic Development	52%
Police	44%
Mayor's Office	44%
Department of Mental Health	43%
Department of Public Health	42%
Department of Corrections	41%
Office of Planning	33%
Department of Education/School District	30%
Department of Child Welfare	29%
City Council	23%
Courts	21%
Housing Finance Authority	17%
State Legislature	11%
Fannie Mae Partnership Office	10%
Governor's Office	8%
Tribal Organizations	1%

N = 90

Percent of Plans

Exhibit 7　Nonprofit Stakeholders

Bar chart titled "Percent of Plans" (y-axis, 0 to 100):
- Community Based Nonprofit Organizations: 73%
- Faith Community: 66%
- Nonprofit Housing Developers: 57%
- United Way: 50%
- Academia: 37%
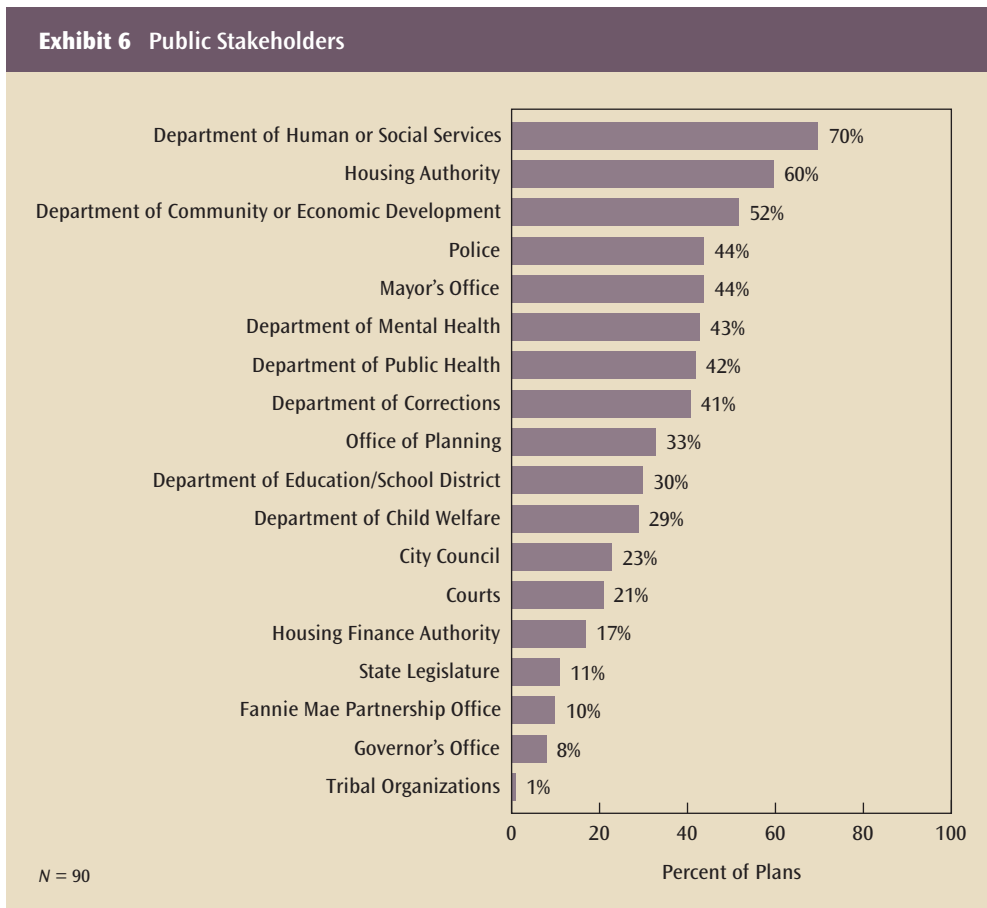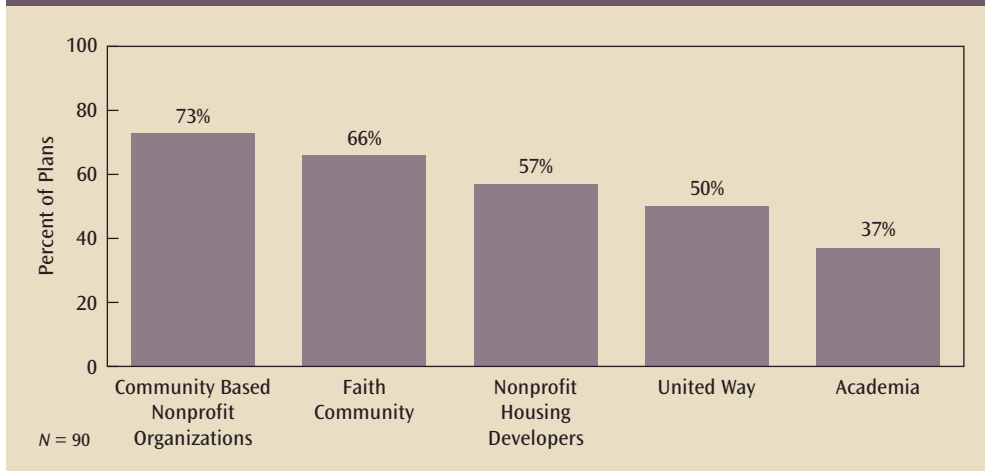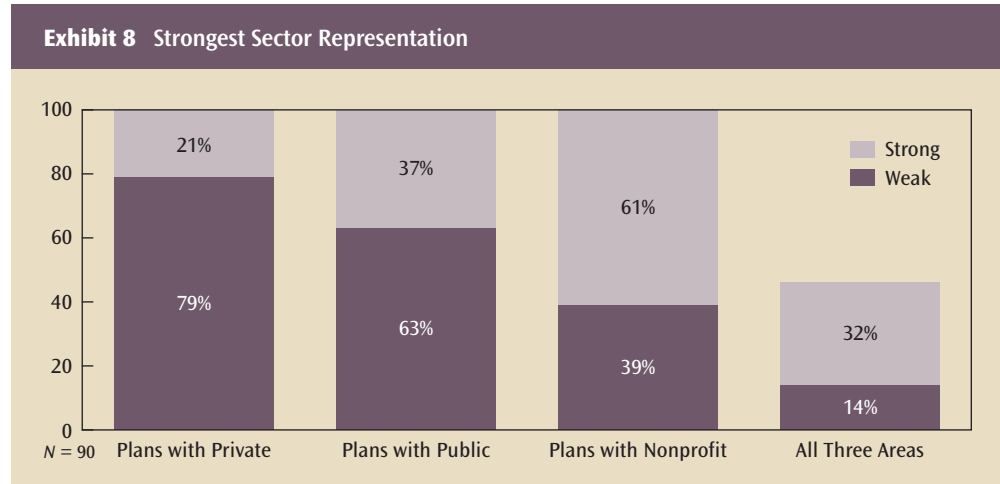
N = 90

cent of plans), the faith community (66 percent of plans), nonprofit housing developers (57 percent of plans), and representatives of academia (37 percent of plans). The national office of the United Way has made a commitment to ending homelessness and encourages local United Way offices to become involved in planning efforts. It is not surprising then that the United Way participated in developing 50 percent of plans (see Exhibit 7).

Consumer involvement—that is, including currently or formerly homeless people in the planning process—is generally viewed as a positive and invaluable contribution. However, compared with other stakeholder involvement, consumer participation was lower. Only 28 percent of plans included currently or formerly homeless people in the planning process. Hartford, Connecticut; King County, Washington; and Nashua, New Hampshire are among the 25 plans that included formerly or currently homeless people in the planning process. Austin's planning committee spent an evening listening to the experiences of those who exited chronic homelessness and then used this information to help develop the plan.

Strongest Stakeholder Representation Is from the Nonprofit Sector

The descriptive analysis presented above is limited: To have a stakeholder from each sector, the plan need only have one organization or agency present. These indicators give the breadth of participation. Therefore, for example, if a representative from a bank, a representative from the Department of Mental Health, and a nonprofit homeless provider drafted the plan, it would be recorded as having representation from stakeholders in all sectors. This is an extreme example, but it illustrates the limitations of the data. To overcome these limitations, we created a list of possible stakeholders and recorded how many representatives out of all possible were present from each sector. This provides an indication of the depth of participation of any given sector. Across the board, the nonprofit

sector was the sector represented most broadly (that is, representatives from many different organizations or agencies) in planning processes. About two-thirds (61 percent) of plans had strong representation from the nonprofit sector, while 37 percent of plans had strong representation from the public sector and 21 percent of plans had strong representation from the private sector (see Exhibit 8).

Exhibit 8 Strongest Sector Representation

	Strong	Weak
Plans with Private	21%	79%
Plans with Public	37%	63%
Plans with Nonprofit	61%	39%
All Three Areas	32%	14%

N = 90

Primary Strategies and Plan Quality

How do communities end homelessness? Homelessness is one of society's most vexing social problems. It is not surprising that many people think that homelessness will exist no matter what we do or how much money we throw at the problem. However, widespread homelessness did not always exist and there are strategies that communities can undertake to end and prevent future homelessness. In 2003, the National Alliance to End Homelessness published the "Ten Essentials to Ending Homelessness."[8] These essentials mapped out, in more detail, the essential ingredients for ending homelessness at the community level (see "Ten Essentials to Ending Homelessness: A Guide for Communities"). For this analysis, we examined the content of local plans to end homelessness using the 10 essentials as a framework and recording which essentials, if any, were addressed in each plan.[9] This section describes these strategies.

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[8] See the *Toolkit for Ending Homelessness* available at www.endhomelessness.org/section/tools/essentials/.
[9] It is important to note that we do not report on other strategies that are not included in the 10 essentials—a few plans expand the shelter system, create a local panhandling ordinance, or increase transitional housing.

Creating a Plan to End Homelessness

Develop a set of strategies aimed at ending homelessness in your community, keeping in mind each community's homeless population has unique characteristics and needs.

Creating a Data System to Help You End Homelessness

A data system, such as a homelessness management information system, can help communities assess how long people have been homeless, what their needs are, and what the causes are, to evaluate programs and allocate resources appropriately.

Establishing Emergency Prevention Programs

Each plan should outline an emergency prevention program that includes rent/mortgage/utility assistance, case management, landlord/lender intervention, and other strategies to prevent eviction and homelessness.

Making System Changes That Prevent Homelessness

Streamline mainstream programs—such as TANF, Medicaid, and mental health service—that provide care and services to low-income people and consistently assess and respond to their housing needs. Stable housing is also needed for those discharged from public institutions.

Outreach to Homeless People on the Streets

Development of an outreach and engagement system designed to reduce barriers and encourage homeless people so that they enter appropriate housing (including safe havens) linked with appropriate services.

Shortening the Time People Spend Homeless

Organize shelter and transitional housing programs to reduce or minimize the length of time people remain homeless, and the number of times they become homeless.

Re-housing People Rapidly So That They Do Not Become Homeless

Develop skilled housing search methods and housing placement services to rapidly re-house all people losing their housing or who are homeless and who want permanent housing.

Putting Together Treatment and Other Services for Homeless People

After households are re-housed, make available rapid access to funded services and mainstream programs that provide the bulk of these services.

Creating an Adequate Supply of Permanent Affordable Housing

A sufficient supply of permanent supportive housing is needed to meet the needs of all chronically homeless, homeless, and extremely low-income people.

Ensuring That Homeless People Have Incomes to Pay for Housing

When it is necessary in order to obtain housing, assist homeless people in securing enough income to afford rent by rapidly linking them with employment and/or benefits.

Source: The National Alliance to End Homelessness, *Toolkit for Ending Homelessness,* 2003

Exhibit 9 Strategies for Ending Homelessness

Strategy	Percent
Services	94%
Permanent Housing	92%
Systems Prevention	91%
Income	81%
Outreach	79%
Emergency Prevention	79%
Shorten Homelessness	57%
Rapidly Rehouse	56%

N = 90
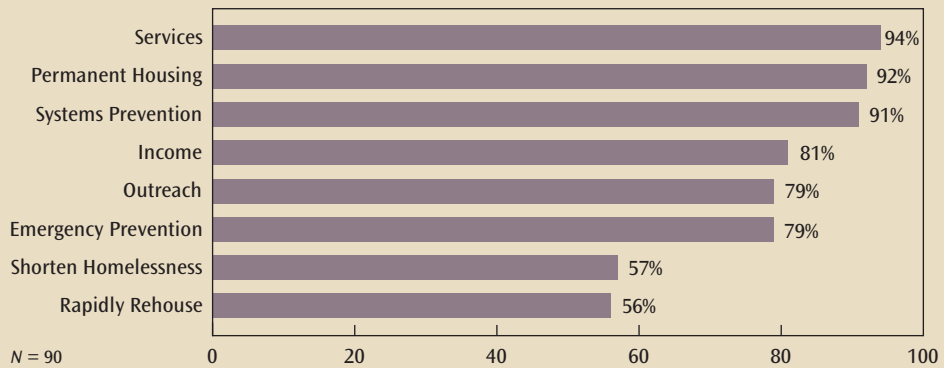
The plans outline a wide range of different strategies to end homelessness. Attention to the 10 essentials varies widely (Exhibit 9). All of the plans include at least one of the 10 essentials and more than half (56 percent) of the plans address all of the 10 essentials. It is important to note that because the plans reflect community need, they do not necessarily have to address each of the 10 essentials. For example, if the community does not have many people living on the street, then conducting outreach may not make sense to that community. Taking this into consideration, not having a specific essential in the plan does not mean the plan is inadequate or doomed to failure. It may be more of a reflection of community need or of a place where the community already has systems in place.

Creating a Data System

Planning for outcomes and using data to manage and evaluate programs are key components of a majority of the plans. Almost all of the plans (91 percent) outline a strategy for implementing a Homelessness Management Information System (HMIS). Efforts to incorporate HMIS are aligned with HUD funding requirements that mandate Continuums of Care to adopt HMIS. According to HUD, about 284 Continuums (about 60 percent of all Continuums) have implemented HMIS.[10]

The city of Hartford has been developing their HMIS since 2001 and it is a model plan for developing data systems. The city's plan calls for 80 percent of service providers, including emergency shelters, transitional living facilities, and supportive housing units, to be using HMIS by 2006. In addition, the plan calls for enhancing data collection and implementing best practices. The city is planning to use HMIS to identify populations at risk of becoming homeless and to identify homeless veterans (see Box 1: Hartford, Connecticut).

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[10] See *Performance and Accountability Report Fiscal Year 2003* from the Department of Housing and Urban Development for more on HUD's performance measures and HMIS.

The Hartford Continuum of Care estimates that there are 322 chronically homeless individuals (240 sheltered and 82 unsheltered) in Hartford. *Hartford's Plan to End Chronic Homelessness by 2015* identifies "gridlock in treatment systems," prison releases, termination of benefits, and high housing costs factors that contribute to an increasing chronically homeless population.

Hartford took a regional approach addressing homelessness by working with surrounding communities. The plan focuses on permanent supportive and affordable housing, calling for 2,133 units to be built in the "Capitol Region" over the next 10 years. Half of the units will serve long-term individuals and families—half of the long-term housing units will be built in Hartford proper. Linking housing with services is critical for communities serving chronically homeless people. Hartford's plan calls for better discharge planning and the active prevention of "graduating" people into homelessness, whether from prison or foster care.

Enhanced data collection through continued support for the development and implementation of HMIS is integral to Hartford's plan to end chronic homelessness in 10 years. Increased use of HMIS involves identifying both chronically homeless and those at risk of becoming chronically homeless. Increasing attention to data and HMIS will allow Hartford's Chamber of Commerce to understand the needs of the chronic homeless, target funds appropriately to address the needs of the chronic homeless, and track their progress in reducing chronic homeless. The HMIS will be reviewed on a quarterly basis to ensure high-quality data collection. As a benchmark for utilization, Hartford has declared that by September of 2006 all service providers, including emergency shelters, supportive housing, and transitional housing facilities, will have entered data on at least 80 percent of their beds.

Source: *Hartford's Plan to End Chronic Homelessness by 2015,* The Commission to End Chronic Homelessness, Prepared for Mayor Eddie A. Perez, June 2005

Ending homelessness is impossible without implementing strategies to prevent it from occurring in the first place.

Emergency Prevention

Even with the most effective strategies for helping people leave homelessness, ending homelessness is impossible without implementing strategies to prevent it from occurring in the first place. An overwhelming majority of plans (79 percent) address emergency prevention, mostly in the form of rent, mortgage, or utility assistance (52 percent) and case management (44 percent). Denver's plan to end homelessness, for example, calls for funding one-time eviction, foreclosure, and utility assistance for those at 0 to 50 percent of area median income (AMI). Further, the plan calls for negotiating with landlords to reduce or waive rental application fees, deposits, and move-in costs; this will help move families immediately into housing rather than into emergency shelter (see Box 2: Denver, Colorado).

Grand Rapids, Michigan and Kent County, Michigan are redirecting funds to prevention. The plan, *Vision to End Homelessness*, calls for developing a coordinated application for public assistance benefits; funding a revolving pool for housing assistance intended to resolve minor rent back payments, mortgage, or utility assistance delinquencies; and funds

In June 2003, the city of Denver underwent a political transformation, electing a new mayor and 10 new city council members. Recognizing the opportunity for change in the city's homelessness policy, a group of local and nonprofit stakeholders joined together in taking the necessary steps toward a 10-year plan to end homelessness. *The Ten Year Plan to End Homelessness,* a report to the citizens of Denver by the Denver Commission to End Homelessness, was formally introduced in May 2005. Extensive research of the homeless population in Denver provided the information necessary to develop a unique plan that addresses the need of homeless people in the area.

Denver's strategy consists of eight different goals. Within each goal the plan outlines specific benchmarks serving as year-to-year guidelines and defining successful implementation. Goal 1 is to increase permanent housing available to those at or below 30% AMI and to expand temporary housing to provide a safety net while the new housing stock is put into place. Denver aims to produce 94 new housing units with supportive services per year, thus reducing chronic homelessness by 75% in the first five years. Goal 2 is to provide safe and legal shelter to those who have recently become homeless, targeting 135 new shelter beds in Year 1. Goal 3 addresses prevention through increased resources for support services such as credit counseling, rental fee waivers, and foreclosure prevention assistance.

Goals 4 and 6 target specific needs of homeless and at-risk clients, committing to providing better access to support services such as transportation and mental health care, as well as education, training, and employment services to promote long-term stability. Denver's plan includes developing 580 employment opportunities in the 10-year period for homeless and formerly homeless persons. Public Safety, street outreach to homeless, and increasing community awareness are addressed in Goals 5 and 7, calling for increased coordination with governmental and nongovernmental agencies dedicated to ending homelessness.

Finally, Goal 8 of the plan calls for collaborating with local housing developers, funding agencies, and officials to review existing housing codes and to identify changes to facilitate the construction of permanent affordable units. Denver's plan calls for a reformation of their zoning codes to allow currently large shelters to continually operate at overflow status. This increases the capacity up to 350 beds, expanding the amount of people who can be served without suspending the zoning ordinance for shelters. Further, Denver's plan calls for an expansion of the zoning code, to allow shelters in mixed-use districts to ensure adequate space for all persons in need during the construction of permanent housing units.

Source: *The Ten Year Plan to End Homelessness,* a report to the citizens of Denver by the Denver Commission to End Homelessness

for landlord and tenant education programs. The Continuum of Care, the body responsible for overseeing plan implementation, will monitor outcomes, including reductions in evictions, a decrease in the number of people living in places not meant for habitation, and a decrease in the number of people living in shelters (see Box 3: Grand Rapids, Michigan).

Systems Prevention

Systems prevention activities are also prevalent in the plans. Public systems or institutions, such as jails and prisons, hospitals, the child welfare system, and mental health

facilities, too often "graduate" people directly into the homeless system. One aspect of prevention is to stop these discharges into homelessness through basic transition planning so that people leaving these institutions have stable housing and some means for maintaining it. Almost all of the plans (91 percent) outline systems prevention activities; 86 percent include strategies to improve discharge planning from correctional facilities; 62 percent include transitional services from foster care; and 61 percent and 67 percent of the plans outline efforts to improve discharge plans from mental health facilities and hospitals, respectively.

Box 3 Grand Rapids, Michigan

Grand Rapids, Michigan packages their plan action steps into three principles: close the front door, open the back door, and build the infrastructure.

Close the Front Door

Grand Rapids will target prevention through a coordinated application form for benefits requested through various public assistance programs. A housing assistance revolving pool will allow the continuum to resolve minor issues such as late rent, mortgage, or utility payments before the eviction process begins. To help curb eviction before it starts, the plan calls for developing landlord–tenant education and information sessions. The Grand Rapids plan also intends to broaden the central intake system to increase the population served and enhance the services for prevention and placement in permanent housing. System coordination will be managed through a specialist directly responsible for discharge planning for prison/jail, foster care graduates, and those leaving mental/physical health institutions.

Open the Back Door

Emergency shelter use will be dramatically decreased. In order to address emergencies, Grand Rapids intends on providing a brief, interim housing with a goal of rapid placement and long-term success. For example, the short-term crisis shelter option will be interim housing for 1 to 90 days, ending as soon as a permanent unit is found for the homeless person/persons. Wrap-around services will also be provided with the permanent housing as needed. Thorough screening for housing readiness will help to gauge how ready one is for housing and to enable the tailoring of services to the needs of the client. Whenever possible, clients will be given a choice of housing where affordable ownership and rental options will be provided with supportive services as needed.

Build the Infrastructure

Building the infrastructure involves expediting access to mainstream resources, and funding a pool for those awaiting public benefits in Grand Rapids.

HMIS will be used to inform community planning efforts around the provision of housing. In the next few years, Grand Rapids intends on gathering their baseline data regarding current affordable housing stock, the affordable housing needed, and the number of people who are at risk of homelessness in the region. Funding allocations will be informed by a broad cost/benefit analysis of the data collected and analyzed.

Source: *Vision to End Homelessness*, Grand Rapids Area Housing Continuum of Care

Public systems or institutions, such as jails and prisons, hospitals, the child welfare system, and mental health facilities, too often "graduate" people directly into the homeless system.

Quincy, Massachusetts' plan to end chronic homelessness serves as a model example of a plan that addresses systems prevention. According to the plan, an average of 25 to 30 youth, individuals with mental health needs, or former prisoners who are discharged from systems of care—including discharges from the Department of Youth Services, Department of Corrections, Department of Mental Health, regional hospitals, and regional courthouses—are ending up in emergency shelters. Local city officials plan to work with state agencies to create a "zero tolerance policy" toward discharges into homelessness. Quincy's goal is to reduce inappropriate discharges by 10 percent each year until they reach zero.

Outreach

Most plans (79 percent) outline strategies to address outreach to homeless people living on the streets. Outreach can play an important role in ending homelessness by engaging people who are living on the streets and getting them into housing or shelters. A key ingredient of effective outreach is a rapid link to housing, which necessitates some form of low-demand housing—housing with few rules or requirements. Safe Havens are one popular form of low-demand housing intended to reach hard-to-serve homeless people with serious mental illness. About 39 percent of plans call for creating Safe Havens and 28 percent outline strategies to link homeless people to other types of low-demand housing.

Contra Costa County, California plans to provide 3,000 units of low-demand housing. With few rules, requirements, and optional services, this housing engages chronically homeless adults who are unwilling or unable to access other housing options. Plans for outreach to chronically homeless adults include a 24-hour, 7 days a week outreach team targeted at homeless encampments and resistant populations; the teams will be outfitted in new outreach vans that facilitate safe client transportation and effective communication between services and outreach teams (see Box 4: Contra Costa County, California).

Permanent Housing

Housing instability for extremely low-income individuals will continue until the supply of affordable housing increases substantially. While federal funding for affordable housing has dramatically declined over the past decade, states and municipalities have developed a number of strategies to respond to the housing needs of extremely low-income individuals. Permanent housing is among the key provisions outlined in the plans. An overwhelming majority of the plans (92 percent) address the issue of permanent housing. The plans focus on permanent supportive housing units and other types of affordable housing such as Section 8 vouchers and single room occupancy units (SROs). The plans call for creating about 196,000 affordable housing units (or subsidies); 80,000 of this total are permanent supportive housing.

The Blueprint to End Chronic Homelessness in the Chattanooga Region in Ten Years calls for creating 1,400 affordable housing units for homeless people over the next 10 years.

A key ingredient of effective outreach is a rapid link to housing, which necessitates some form of low-demand housing—housing with few rules or requirements.

Box 4 Contra Costa County, California

For the past 20 years, Contra Costa County, California has been addressing homelessness through comprehensive, countywide initiatives involving 96 housing and service organizations in the area, including a number of nationally recognized programs. In 2004, however, the county decided it was time to take a different approach. New cases of homelessness, chronically homeless people cycling through the system without attaining the help they need, and increasing amounts of people turned away from assistance because of lack of space indicated to Contra Costa that there were flaws in the current system. The Contra Costa County plan to end homelessness in 10 years asserts that communities can eradicate homelessness if enough resources are invested wisely to address the problem successfully.

Contra Costa County's plan consists of five key priorities that, if implemented, would make possible the goal of ending homelessness in 10 years. First, adopting the Housing First approach will allow the county to help homeless persons in Contra Costa County access stable housing as quickly as possible, and then link them with the appropriate services and supports. The second priority is to provide wraparound services by integrating homeless and mainstream services at both the system and client level. This strategy also includes the systemwide data collection through the HMIS to better understand the needs of the homeless population in Contra Costa.

Essential to housing stability is employment that provides a "housing wage," the wage level that allows people to pay no more than 30 percent of their income to rent. Enhancing the ability of homeless people to access and maintain housing wage employment in order to increase their level of self-sufficiency is the third priority. Enacting a "Hire Homeless First" policy for all local government, entry-level employment opportunities and a housing wage ordinance that links minimum wage to housing costs are two of the action steps Contra Costa County has included in their strategy.

Contra Costa's plan includes an aggressive approach to incorporating the often mistrustful chronically homeless population. Developing teams comprised of specialists from a number of pertinent disciplines, outreach to the chronically homeless will be expanded and intensified. Low case loads will allow the outreach team to build trust and successfully link services with needs in this often difficult-to-serve homeless population. The final priority is the implementation of homeless prevention. The expansion of existing emergency prevention services, case management, and legal assistance, as well as the creation of housing support centers, will aid in the elimination of new cases of homelessness. The plan also calls for a new "bridge subsidy" program dedicated to those at risk of homelessness. Contra Costa County recognizes prevention as the most humane and cost-effective way to end homelessness, and thus all mainstream health and social service programs should join the effort to prevent homelessness in the county.

Source: *Ending Homelessness in Ten Years: A County-Wide Plan for the Communities of Contra Costa County, 2004*

> **Housing instability for extremely low-income individuals will continue until the supply of affordable housing increases substantially.**

Chattanooga will draw on several sources to make the units available, including increasing Section 8 vouchers available to homeless people, developing a local time-limited subsidy program, preserving existing rental stock by implementing a one-for-one replacement, and creating new units with dollars from Low Income Housing Tax Credit (LIHTC), HOME, and Community Development Block Grant (CDBG) (see Box 5: Chattanooga, Tennessee).

Chattanooga's plan, titled *The Blueprint to End Chronic Homelessness in the Chattanooga Region in Ten Years,* relies on four primary "spheres of activity." Each sphere includes realistic strategies to address and end homelessness in the Chattanooga region in 10 years.

1. **Expand permanent housing opportunities:** Chattanooga's plan calls for creating 1,400 new affordable housing units over the next 10 years through the provision of rent subsidies, new housing development, and the preservation of the current affordable housing stock. Also, it will streamline housing placement services through a centralized housing assistance office that will locate units and identify prospective clients. In addition, the plan calls for the exploration of ways to prioritize homeless people for placement into subsidized housing.

2. **Increase access to services and supports:** The plans reconfigures the current case management system to be more assertive, coordinated, and focused on placing homeless people in permanent supportive housing and keeping them there. Integral to increasing services and supports available is the prioritization of funding for supportive services to both homeless and formerly homeless people in permanent supportive housing. Linking homeless and formerly homeless individuals to mainstream services as well as improving the effectiveness of outreach and engagement of unsheltered homeless persons are necessary ingredients in Chattanooga's plan.

3. **Prevent homelessness:** The plan calls for establishing a system that identifies people at risk of homelessness and aids them in stabilizing their housing by providing emergency assistance, improving access to supportive services, and maximizing their income. It also calls for developing permanent housing plans prior to the release of individuals from prison, hospitals, shelter, treatment, and foster care, and establishing clear responsibilities for their implementation in each community.

4. **Develop a mechanism for planning and coordination:** A newly formed Chattanooga Regional Interagency Council on Homelessness will be responsible for enhancing the government and nonprofit's capacity to raise funds directed at ending homelessness, expanding the capacity for data collection and analysis, and determining funding priorities for homelessness reduction efforts. Establishing and maintaining standards of service delivery and case management and increasing and improving the collaboration efforts between for-profit, government, nonprofit, and faith-based initiatives will also be within the jurisdiction of the Council.

Source: *The Blueprint to End Chronic Homelessness in the Chattanooga Region in Ten Years*

Services

Services are a critical component of ending homelessness and should be provided after people are housed. Homeless people may have immediate service needs in the form of substance abuse treatment or physical and mental health problems that have gone unaddressed. Other homeless people may need services to help them access mainstream benefits or find employment. All but five plans (94 percent) outline strategies to address gaps in service delivery to homeless people. Most of the plans (81 percent) focus on linking homeless people to mainstream services, and 68 percent outline a strategy to provide dedicated services, mostly in the form of case management. Designing one-stop service centers are also among some of the different service strategies outlined in the plans. Almost all of the plans identify strategies to deliver services to homeless populations;

these include efforts to link clients to mainstream resources (81 percent) and provide dedicated services (68 percent of the plans) such as case management.

Broward County, Florida's plan to end homelessness calls for more treatment and services through accessing detoxification and mental health crisis stabilization for people who are homeless. The plan will increase contracted services for homeless beds at detoxification facilities and mental health facilities (see Box 6: Broward County, Florida). Linking homeless people to existing mainstream services is equally important to creating new services. Spokane, Washington's plan is one example of a plan that outlines strategies to improve mainstream service delivery to homeless adults, families, and youth. Specifically, the plan identifies steps to increase access to Medicaid, Supplemental Security Income

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Box 6 Broward County, Florida

Located on the southeastern coast of Florida, Broward County's primary industry is tourism, universally drawing people to its shoreline. Recognizing both the social and economic costs of homelessness, a group of individuals convened at the Florida Summit on Homelessness in 2004 to create a 10-year plan to end homelessness. The 10-year plan shifts their focus from emergency housing to permanent housing through the creation of more units for a stable and permanent living situation.

The most recent point-in-time count of homeless people in the county numbered 3,100 men, women, and children. Broward County is focusing on the rapid creation of at least 1,200 permanent housing units for homeless and at-risk individuals, mandatory inclusionary zoning in the county, and the use of public land for development by nonprofits.

Broward County's plan also calls for systems prevention through expanded discharge protocol and the removal of the barriers to obtaining mainstream resources faced by homeless people. A housing specialist position will be created to address the barriers to housing and aid in the rapid rehousing of homeless individuals. Full implementation of the HMIS as well as the ability to interface with other service delivery databases will improve the quality of data and ability to identify trends for preventive intervention.

Finally, the plan calls for the expansion of the Living Wage Ordinance passed in 2002 to address the gap between income and affordable housing. Further, improving education and equipping homeless and at-risk populations with job readiness and training is imperative to the maintenance of long-term housing. Included in their strategy, Broward County encourages improved communications between Homeless Service Providers and Employment Services to offset the increasingly difficult task of finding and keeping housing because of the rising costs in the county.

Leveraging the $9 million they received from federal contributions, Broward County government invested $12 million in 2005 for homeless services, and raised $8 million from private donors for homeless services. Currently, the steering committee is soliciting increased support, and working on expanding its membership to include members of the local business community, corrections, and hospital districts as well as homeless and formerly homeless individuals. This expanded group will formulate the "Implementation Committee," which will be used to identify new resources, assess existing resources, and establish annual targets for success.

Source: *A Way Home: Broward County, Florida's Ten Year Plan to End Homelessness*

(SSI), General Assistance, and TANF by training case managers in expedited enrollment procedures and providing technical assistance on navigating different systems.

Incomes

Increasing homeless people's incomes is a primary strategy of most (81 percent) of the plans. After homeless people reaccess housing, in addition to immediate needs, services should focus on ensuring that households have adequate income to afford their rent. To boost income, services should focus on helping people obtain and retain employment and linking them with mainstream income programs such as SSI and TANF. One-third of plans (30 percent) outline strategies to help households access TANF benefits and 43 percent call for methods to expedite SSI enrollment (43 percent). More than two-thirds (68 percent) of plans call for creating job training opportunities for homeless people; these are usually through government assistance programs funded through the Department of Labor.

Austin's plan outlines a number of activities to increase income—both earned and income from benefits—for homeless people once they access housing. The plan calls for increasing income through benefits acquisition by expediting access to SSI and expanding the number of representative payees who can accept and manage SSI payments for homeless people. Austin's plan calls for increasing access to mainstream employment programs through designated funding or slots for homeless persons in local workforce contacts and for working collaboratively with the workforce investment board to address the employment needs of homeless people. In addition, the plan calls for developing partnerships with Austin Community College and other postsecondary education institutions to expand access to job training and placement.

Shortening Homelessness and Housing First

Shortening the time people spend homeless is an important component of efforts to end homelessness. A little more than half the plans (57 percent) identify strategies to shorten homelessness. Housing First is an approach that guides a set of interventions designed to help homeless people transition more rapidly out of the shelter system; it includes crisis intervention, re-housing as quickly as possible, follow-up case management, and housing support services to prevent the reoccurrence of homelessness. A majority of the plans (67 percent) specifically mention Housing First, but, despite the strong emphasis on creating additional units of permanent housing, there is less focus overall on strategies that help homeless people access permanent housing faster.

Portland, Oregon's plan calls for a adopting a Housing First approach that helps homeless people access Housing First, and then, if needed, provides services. According to the plan, only 27 percent of Portland's homeless population eventually accesses permanent housing. One goal outlined in Portland's plan is to increase that percentage to 40 percent of homeless people moving into permanent housing within three years; by 2012 the goal is 60 percent (see Box 7: Portland and Multnomah County, Oregon).

The Portland and Multnomah County plan has taken a direct approach to solving the issue of homelessness. Three simple principles guide their strategy: focus on the most chronically homeless populations first, prevent new homelessness by streamlining access to existing services, and concentrate resources on programs that have been effective. The plan recognizes that eliminating homelessness in 10 years will require the participation of all homeless service providers. The Ten Year Plan offers steps by which to accomplish this goal by the year 2015:

1. Move people into Housing First.
2. Stop discharging people into homelessness.
3. Improve outreach to homeless people.
4. Emphasize permanent solutions.
5. Increase supply of permanent supportive housing.
6. Create innovative partnerships to end homelessness.
7. Make the rent assistance system more effective.
8. Increase economic opportunity for homeless people.
9. Implement new data collection technology throughout the homeless system.

These nine steps have contributed to significant progress in Portland and Multnomah County's mission to end homelessness in 10 years. In the last year, new resources have been secured through two large federal grants and a Robert Wood Johnson Foundation grant to implement systems change to help end chronic homelessness through permanent supportive housing. The Housing First approach has helped move 436 homeless into permanent housing, and 64 chronically homeless into permanent supportive housing in the last year. As of September 2004, there were 350 new units of permanent supportive housing with a goal of 400 by 2007 and 1,600 by 2015.

The Transitions to Housing program has provided over 1,300 households with short-term rental subsidies. Twelve-month estimates show that 71 percent of households retained permanent housing free of rent assistance, and the latest figures show that households, on average, have increased their monthly income by almost 35 percent. Finally, Portland has implemented a HMIS through successfully securing a HUD grant. This system will serve more than 20 nonprofit agencies with a better tool for the data collection and analysis of Portland's homeless population, and better data create better solutions.

Source: *Home Again: A 10-Year Plan to End Homelessness in Portland and Multnomah County*

Only 16 percent of plans, however, call for tracking length of stay in emergency shelters. "Hope for the Homeless," Shreveport, Louisiana's plan to end homelessness, monitors Housing First outcomes by using HMIS to track length of stay in shelter. The HMIS captures the entry and exit, calculates length of stay, and generates a report for the entire homeless population. Tracking length of stay will help Shreveport monitor the Housing First model, which the plan calls for instituting during the next 24 months.

Rapid Re-housing

Helping people rapidly reaccess housing is essential to ending homelessness. More than half (57 percent) of the plans outline activities to shorten the length of time people spend

homeless through rapid re-housing. One of the primary challenges that homeless people face in getting back into housing is navigating the private rental market. Most communities have a shortage of housing affordable for low-income households. Consequently, landlords can select the most appealing tenants, many of whom have higher incomes, and require a large sum of cash for a deposit to cover first and last months' rent. There is little incentive for landlords to work with potential tenants who have lower incomes, little savings, credit problems, or unstable housing histories. About half (56 percent) of the plans address rapid re-housing through housing search assistance, outreach to landlords, and addressing barriers to housing.

Chattanooga, Tennessee's plan, *The Blueprint to End Chronic Homelessness in the Chattanooga Region in Ten Years*, focuses mainly on getting homeless people back into housing rapidly. The plan calls for providing housing search assistance and housing placement, links to subsidies, first-month rent, and utility assistance. Chattanooga's plan also calls for outreach and incentives to landlords to persuade them to rent to homeless people and families.
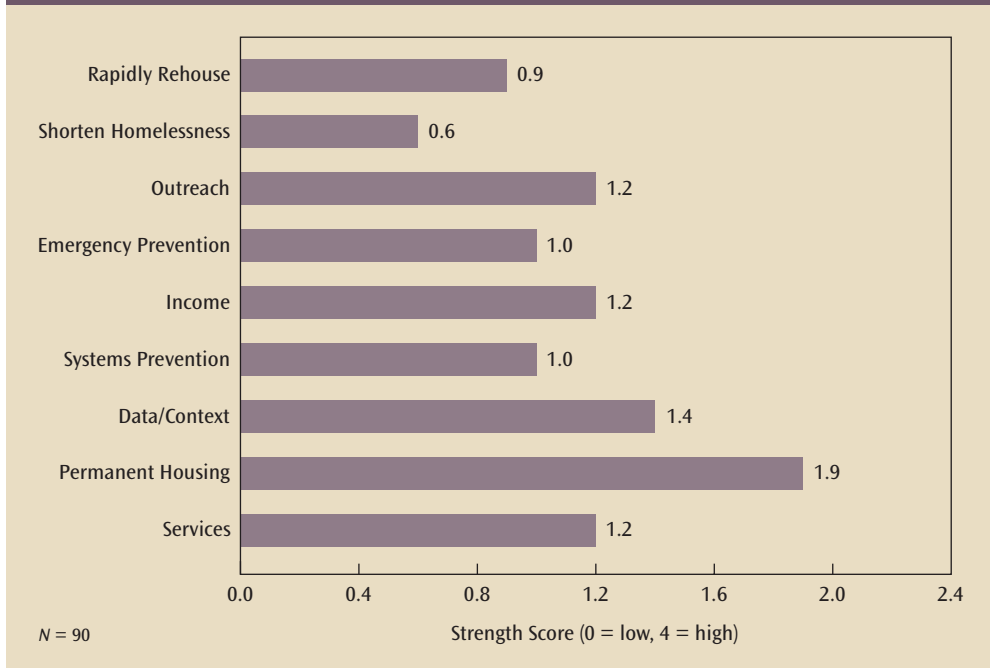
Strength of Plans

One common and fair-minded criticism of the plans is that, until implemented, they remain ideas on paper. The plans are a step in the right direction—a forward movement in the effort to end homelessness—but in order for a community to see real declines in the number of homeless people, it must implement its plan. A number of factors affect the potential success and implementation of the plans to end homelessness. Some measures can be quantified—funding availability or dedicated housing units— while others are qualitative, such as strong mayoral leadership or a long-standing partnership between government agencies and the nonprofit sector.

To measure the strength of the plans we looked at various built-in mechanisms that would increase the likelihood that the strategies outlined in the plans would be adopted; these include setting quantifiable performance measures, setting timelines, identifying specific funding sources for specific strategies, and identifying bodies responsible for the implementation of specific strategies. For each of the 10 essentials, we calculated a strength score, giving the essential one point for each of the indicators. Each essential receives a score on a scale of 0 to 4 (with 0 being the lowest) and each plan has an average overall score based on their scores for each of the essentials. These measures are imperfect and certainly have limitations because they do not capture some of the qualitative aspects of the plans, but they do provide meaningful quantitative indicators of the likely implementation success of the plans.

The implementation scores vary by essential (see Exhibit 10). Permanent housing received the highest average score of 1.9, followed by creating a data system, which

Exhibit 10 Strength of Plans

Strategy	Strength Score
Rapidly Rehouse	0.9
Shorten Homelessness	0.6
Outreach	1.2
Emergency Prevention	1.0
Income	1.2
Systems Prevention	1.0
Data/Context	1.4
Permanent Housing	1.9
Services	1.2

N = 90 — Strength Score (0 = low, 4 = high)

received a score of 1.4, then by services at 1.2, and systems prevention and emergency prevention at 1.0. Shortening homelessness and rapidly re-housing received the lowest strength score of 0.6 and 0.9, respectively. It is important to note that some strategies are easier to quantify and therefore will result in higher strength scores. Permanent housing, for example, is clearly measured by the number of units, giving the strategy a clear numeric indicator. Outreach efforts or prevention strategies may be more difficult to set numeric measures.

In addition to a score for each essential strategy, an overall strength score was also calculated. The strength scores were low to medium, with most falling between 0 and 2. Forty percent of the plans had an average score that fell between 1 and 2 and 33 percent of the plans fell between 0.1 and 1; only 11 percent of plans received a 0 score and only 2 percent of plans received an aver-age score above 3. These scores show that while plans are outlining the right strategies, they are not always setting clear numeric indicators, timelines, implementing bodies, and identifying funding sources (see Exhibit 11).

Exhibit 11 Plan Strength Scores

More than 3.0 — 2%
Zero — 11%
2.1 to 3.0 — 14%
0.1 to 1.0 — 33%
1.1 to 2.0 — 40%

N = 90

These scores show that while plans are outlining the right strategies, they are not always setting clear numeric indicators, timelines, implementing bodies, and identifying funding sources.
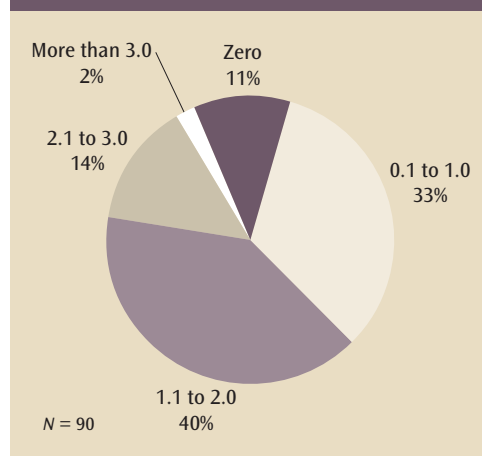
Implementation and Funding Sources

As communities complete the planning process and assume the next step of implementing the strategies laid forth in the plan, an organizational body that is responsible for overseeing plan implementation is crucial to making sure that the plan gets off the ground and does not become a piece of paper on a shelf. Equally important is ensuring that the strategies outlined in the plans are not unfunded mandates.

About Half of the Plans Identify Implementing Bodies

A little over half of the plans (54 percent) identify a body that will take up the responsibility for plan implementation once the plan is completed. In most cases where an implementing body is identified, the body was made up of a combination of nonprofit, governmental, and other stakeholders—such as a local interagency council on homelessness. More than half (61 percent) of plans that identify an implementing body identify a body that was made up of representatives from different sectors. In other cases, the implementation of plans is assigned to governmental body, such as a Department of Health and Human Services (22 percent of plans) or a nonprofit organization (10 percent of plans); one third of plans (33 percent) call for progress reports to be released on a periodic basis, updating the community on the progress of the plan (see Exhibit 12).

Exhibit 12   Implementing Bodies

Other 10%
Government 22%
Nonprofit 10%
Combination 61%
N = 51

About Half of the Plans Identify Funding Sources

About half of the plans (48 percent) identify funding sources. Funding to address the needs of homelessness, including housing and services, comes from a wide range of sources. The federal government provides competitive and formula grants through the McKinney-Vento Homeless Assistance Programs. In addition, there is funding for housing available through other HUD programs such as CDBG, HOME, and LIHTC. The U.S. Department of Health and Human Services (HHS) also sponsors a number of pro-
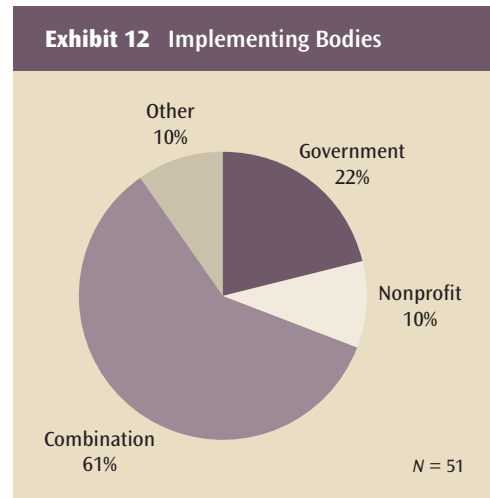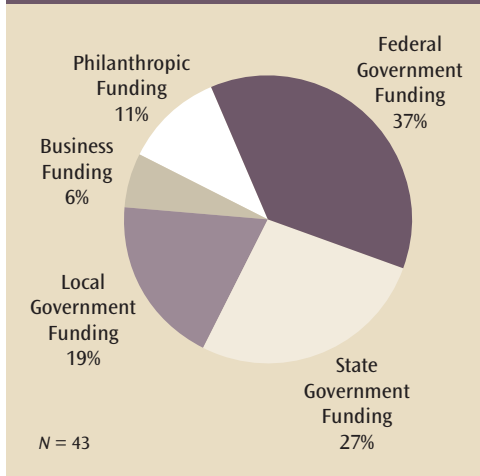
Exhibit 13 Funding Sources

Philanthropic Funding 11%

Business Funding 6%

Federal Government Funding 37%

Local Government Funding 19%

State Government Funding 27%

N = 43

grams for homeless people, and TANF funds can be used for some housing and prevention programs as well; 37 percent of the plans identify federal government funding for strategies outlined in their plan. Other funding sources, such as setting up local housing trust funds that generate revenue from taxes or fees are also identified. As Exhibit 13 shows, almost two-thirds of plans (66 percent) identify state and local government funding. Finally, only about 19 percent of plans identify funding from foundations (11 percent) or from the private sector (6 percent).

Implications for Homelessness and Future Planning Efforts

Efforts to end homelessness started with a plan—like all solutions to every problem. Quickly, one plan turned into 10 and then 10 plans turned into hundreds of plans spread across the United States. Today about 220 communities have tackled planning efforts and almost half have completed plans. Taken together, these community plans represent a nationwide effort to end homelessness; they are an important policy illustration of innovation at the state and local level. This study reveals that communities are moving forward. They are dramatically transforming their homeless assistance systems by focusing on emergency prevention, systems prevention, permanent housing, and bringing mainstream agencies and resources to the table.

The effort to end homelessness is far from over, however. Indeed, challenges remain formidable. Some communities are moving from planning to implementation, but there is a need, in many communities, for increasing brawn and power behind the plans. Communities must set clear goals and timetables, and identify funding and implementing

Some communities are moving from planning to implementation, but there is a need, in many communities, for increasing brawn and power behind the plans.

bodies to ensure that they move from planning to action. Other communities that have not yet embarked on a planning process must gather stakeholders and begin outlining strategies.

Unquestionably, community plans to end homelessness represent a collective and critical effort, but much more can be done. In the past five years, the federal government has made a number of changes within the homeless assistance system that retool policies to focus on permanent housing. These changes help communities enact changes that move homeless people from temporary housing to permanent housing. Still, the federal government has a bigger role to take on. Without critical housing dollars in the form of public housing or housing vouchers, communities will be left without the necessary resources to address the primary driver of homelessness—the lack of affordable housing. Further, the federal government should work to coordinate funding sources and encourage collaboration among mainstream agencies.

Will the plans end homelessness? It is still too early to tell, but there certainly is some evidence to suggest that, as a nation, we are moving in the right direction. One thing is clear, communities no longer view homelessness as an intractable problem; it is a problem with a solution, mapped out by hundreds of local plans.

Appendix

Plans Included in the Study			
Plan Title	**City**	**County**	**State**
A Way Home		Broward County	Florida
Ten Year Plan to End Homelessness in Cambridge	Cambridge		Massachusetts
Albany County Ten-Year Plan to End Homelessness	Albany	Albany	New York
Opening Doors Unlocking Potential: The Mayor's Ten Year Plan to End Chronic Homelessness	Waco		Texas
Opening Doors of Opportunity: A 10-Year Plan to End Homelessness		Pinellas County	Florida
Ten Year Plan to End Homelessness in Placer County		Placer County	California
Ending Homelessness Now: Creating New Partnerships For Change	Pittsburgh	Allegheny County	Pennsylvania
Home Again: A 10-Year Plan to End Homelessness in Portland and Multnomah County	Portland	Multnomah County	Oregon
Ten-Year Plan on Homelessness	Anchorage		Alaska
10-Year Strategic Plan to End Chronic Homelessness	Springfield	Sangamon	Illinois
Hope for the Homeless Plan to End Homelessness in Northwest Louisiana	Shreveport	Bossier	Louisiana
Destination Home: A Ten Year Journey to End Homelessness in Evansville and Vanderburgh County	Evansville	Vanderburgh	Indiana
Ten-Year Plan to End Chronic Homelessness and Other Forms of Homelessness	Alexandria		Virginia
Homes for the Homeless—10-Year Plan to Create Lasting Solutions	Oklahoma City		Oklahoma
Looking Homeward: The 10-Year Plan to End Homelessness	Asheville	Buncombe County	North Carolina
A Way Back Home: A Ten Year Plan to End Chronic Homelessness in Whatcom County	Bellingham	Whatcom County	Washington
The New Haven Ten Year Plan to End Chronic Homelessness	New Haven		Connecticut
City of Norfolk Blueprint to End Homelessness	New York		New York
Blueprint of the Plan to End Homelessness	Norfolk		
ECHO: End Chronic Homelessness by 2015	Norman	Cleveland County	Oklahoma
State of Colorado Homeless Policy Academy Mainstream Resources Action Plan			Colorado
Utah State Homeless Coordination Committee's Ten Year Strategic Action Plan to End Chronic Homelessness			Utah

Plan Title	City	County	State
Reducing Homelessness: A Blueprint for the Future	Louisville		Kentucky
Ending Homelessness Is Everyone's Responsibility: Regional Plan to End Homelessness		Maricopa County	Arizona
Blueprint to Break the Cycle of Homelessness and Prevent Future Homelessness: Memphis/Shelby County Mayor's Task Force on Homelessness	Memphis	Shelby County	Tennessee
Plan to End Homelessness Saint Paul-Ramsey County	St. Paul	Ramsey County	Minnesota
Ten Year Plan to End Homelessness in Mercer County		Mercer County	New Jersey
A Plan to End Chronic Homelessness in Mobile and Baldwin Counties, Alabama	Mobile	Baldwin and Mobile Counties	Alabama
A Home for Everyone: A Blueprint to End Homelessness in Washtenaw County	Ann Arbor, Ypsilanti	Washtenaw County	Michigan
GRACE for the Homeless	Gainesville	Alachua	Florida
Vision to End Homelessness	Grand Rapids	Kent County	Michigan
Blueprint to End Homelessness in Greenville County, SC		Greenville County	South Carolina
Hartford's Plan to End Homelessness by 2015	Hartford		Connecticut
Blueprint to End Homelessness	Indianapolis		Indiana
Building Homes, Building Hope: Ending Homelessness in Rhode Island			Rhode Island
Ten-Year Plan to End Chronic Homelessness	St. Louis	St. Louis County	Missouri
A Roof Over Every Bed in King County: Our Community's Ten Year Plan to End Homelessness	Seattle	King County	Washington
Ten-Year Plan to End Chronic Homelessness	Knoxville	Knox County	Tennessee
Bring Los Angeles Home	Los Angeles		California
The Montgomery Area's Blueprint Toward Ending Chronic Homelessness	Montgomery		Alabama
Homelessness in Montgomery County: Beginning to End		Montgomery County	Maryland
A Home for Everyone: A Plan for Ending Homelessness	Nashua	Hillsborough County	New Hampshire
The Strategic Plan to End Chronic Homelessness in Nashville	Nashville	Davidson County	Tennessee
State of Florida Homeless Policy Academy Action Plan			Florida
Blueprint to End Homelessness in South Carolina			South Carolina
Scranton/Lackawanna County: Ten Year Plan to End Chronic Homelessness	Scranton	Lackawanna	Pennsylvania
State of Georgia Homeless Action Plan to End Homelessness in Ten Years			Georgia

Plan Title	City	County	State
Plan to End Chronic Homelessness in Hawaii			Hawaii
Ten Year Plan to End Chronic Homelessness	San Antonio	Bexar County	Texas
State of Maine Action Plan to End Homelessness			Maine
Ending Long-Term Homelessness in Minnesota			Minnesota
The San Francisco Plan to Abolish Chronic Homelessness	San Francisco	San Francisco	California
Ending Homelessness in Missouri			Missouri
New Jersey State Policy Academy Team Preliminary Action Plan to End Homelessness in New Jersey			New Jersey
North Carolina 10 Year Plan to End Homelessness			North Carolina
Agenda for Ending Homelessness in Pennsylvania			Pennsylvania
Our Way Home: A Blueprint to End Homelessness in Philadelphia	Philadelphia		Pennsylvania
A Plan to End Homelessness in Yakima County by 2014		Yakima	Washington
City of San Jose Homeless Strategy	San Jose		California
Plan to End Chronic Homelessness in Austin/Travis	Austin	Travis County	Texas
Blueprint to End Homelessness in Atlanta in Ten Years	Atlanta		Georgia
If we could end homelessness…The Greater Bridgeport Area Ten Year Plan to End Homelessness	Bridgeport		Connecticut
Moving Towards Home: Strategies for Ending Homelessness in Ten Years	Burlington		Vermont
A Ten Year Plan to End Homelessness on Cape Cod and the Islands	Cape Cod	Barnstable, Dukes, Nantucket	Massachusetts
Ten-Year Plan to Reduce Homelessness in Chelan and Douglas Counties		Chelan and Douglas Counties	Washington
Getting Housed, Staying Housed	Chicago		Illinois
Clark County Ten Year Homeless Housing Plan		Clark County	Washington
Homeward Bound: A Plan to End Chronic Homelessness in Collin County	Plano	Collin County	Texas
Ending Homelessness in Ten Years: A County-Wide Plan for the Communities of Contra Costa County		Contra Costa County	California
A Strategic Plan to End Chronic Homelessness in Seven Years, Corpus Christi	Corpus Christi		Texas
The Blueprint to End Chronic Homelessness in the Chattanooga Region in Ten Years	Chattanooga	Hamilton County, Southeast Tennessee	Tennessee

Plans Included in the Study *(continued)*

Plan Title	City	County	State
City of Quincy, Massachusetts 10-Year Plan to End Chronic Homelessness	Quincy	Norfolk County	Massachusetts
Urbana-Champaign Continuum of Care Ten-Year Plan to End Chronic Homelessness	Urbana-Champaign		Illinois
Keys to Housing: A 10-Year Plan to End Chronic Homelessness in Santa Clara County		Santa Clara County	California
Alameda Countywide Homeless and Special Needs Plan		Alameda	California
Spokane Regional 10-Year Plan to Address Homelessness	Spokane	Spokane	Washington
The Road Home: Ending Chronic Homelessness		Pierce	Washington
Blueprint to End Homelessness: A Ten Year Plan		Trumbull County	Ohio
10-Year Plan to End Chronic Homelessness	Columbus	Franklin	Ohio
Dallas Ten-Year Plan: An Action Plan to Identify Goals, Strategies and Methodology to Impact and End Chronic Homelessness	Dallas		Texas
Ending Homelessness: The 10-Year Action Plan	Raleigh	Wake County	North Carolina
Ten Year Plan to End Homelessness	Denver	Denver	Colorado
The DuPage Homeless Continuum Plan to End Homelessness		DuPage County	Illinois
Border Solutions: Ending Chronic Homelessness in El Paso Texas	El Paso		Texas
Homes for the Homeless Nevadans 10 Year Plan to Reduce Homelessness	Las Vegas	Clark County	Nevada
Places for the People: 10 Year Community Response Initiative to End Homelessness	Tampa	Hillsborough County	Florida
City of Pasadena Ten Year Strategy to End Homelessness	Pasadena		California
Homeless No More: A Strategy for Ending Homelessness	Washington		Washington, DC
Mayor's Task Force to End Homelessness	Danbury		Connecticut
Plan to End Chronic Homelessness in the San Diego Region	San Diego	San Diego, Imperial	California
Uniting for Solutions Beyond Shelter: The Action Plan for New York City	New York City		New York