

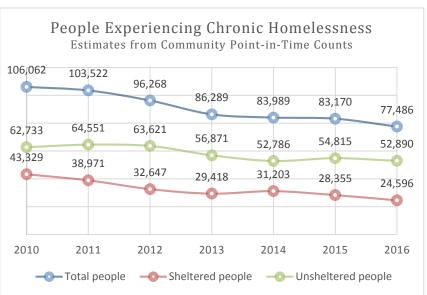
Ending Chronic Homelessness: Our Progress, Essential Strategies, and the Work Ahead

Our Progress

We can end homelessness for people in our communities with disabilities and other complex needs, including people who have the most extensive experiences of homelessness. We know the solution — permanent supportive housing — and we have seen its effectiveness, and cost-effectiveness, across the country.

Supportive housing has been shown to help people with disabilities permanently stay out of homelessness, improve their health conditions, and lower public costs by reducing their use of crisis services. In fact, numerous studies have shown that it is cheaper to provide people experiencing chronic homelessness with supportive housing than have them remain homeless.

Informed by that evidence-base, we've expanded access to permanent supportive housing, doubling the number of supportive housing beds to more than 110,000 since 2010. As a result, we've reduced chronic homelessness by 27% in this country between 2010 and 2016. But in order to end chronic homelessness once and for all, we must continue to expand the supply of permanent supportive housing opportunities through federal, state, and local strategies and investments.



Essential Strategies

To make sure all people with disabilities experiencing chronic homelessness are on a quick path to permanent housing — and that no one else becomes chronically homelessness — communities need robust, coordinated systems that are focused on the same shared outcomes. We have identified 10 essential strategies communities are using to drive progress toward ending chronic homelessness. We encourage stakeholders in every community to review these strategies and identify opportunities to strengthen their systems:

- 1. Start at the Top: Get state and local leaders to publicly commit to and coordinate efforts on ending chronic homelessness.
- 2. Identify and be accountable to all people experiencing chronic homelessness, including people cycling through institutional settings.
- 3. Ramp up outreach, in-reach, and engagement efforts.
- 4. Implement a Housing-First system orientation and response.
- 5. Set and hold partners accountable to ambitious short-term housing placement goals.

- 6. Prioritize people experiencing chronic homelessness for existing supportive housing.
- 7. Project the need for additional supportive housing and reallocate funding to take it to the scale needed.
- 8. Engage and support public housing agencies and multifamily affordable housing operators to increase supportive housing through limited preferences and project-based vouchers.
- 9. Leverage Medicaid and behavioral health funding to pay for services in supportive housing.
- 10. Help people increase their income through employment opportunities and connections to mainstream benefits and income supports.

The Work Ahead

Our work is not complete. On any given night, an estimated 77,486 Americans with disabling health conditions who have been experiencing homelessness for long periods of time — some for years or decades — can be found sleeping in shelters, on our streets, or other places not meant for human habitation. To achieve our goal to end chronic homelessness, we must focus even more effort on several important priorities:

- Increasing the availability of supportive housing. We must target, prioritize, and dedicate supportive housing to those with the highest needs and greatest barriers to obtaining and maintaining housing on their own. We must also continue to reallocate funds from underperforming projects or less cost-effective models so that we can expand the supply of supportive housing, while also pursuing additional federal, state, and local strategies and investments that can take supply to the scale needed.
- Aligning health, behavioral health, and housing systems at the state-level. We must continue to innovate in
 how we pay for and provide cost-effective services to people in supportive housing. States have options for
 ensuring their Medicaid plans and other health care investments cover supportive services that support
 housing stability. Partnered with existing housing units and/or with new investments into rental subsidies,
 housing development, or rehabilitation activities, such strategies can help create new permanent supportive
 housing opportunities.
- Improving the identification, outreach, and engagement of people experiencing chronic homelessness. We need to improve our effectiveness, through outreach and data-matching strategies, at identifying people experiencing or at risk of experiencing chronic homelessness, including people cycling between homelessness, jails, and hospitals. By coordinating efforts through local, real-time lists of people experiencing chronic homelessness, we can better monitor and hold ourselves accountable to progress.
- Enhancing connections to employment and independence. To both prevent chronic homelessness, and to ensure the success and stability of people with disabilities who have exited chronic homelessness, we must do more to integrate employment services and opportunities into our housing and services systems and to connect people to mainstream benefits that can help them maximize their independence.
- Maintaining partnerships at all levels of government. To sustain the progress we've made to date, we must continue to pursue a collaborative approach across federal, state, and local government, with federal investments carefully targeted to ensure that they are complementary to and supportive of on-the-ground efforts by state and local officials to address community-specific challenges.
- Building lasting systems that will sustain our success. Finally, we must sustain our investments into the best
 practices, strategies, and programs that are driving progress toward ending chronic homelessness, knowing
 that our communities must have lasting systems that are poised to respond to crisis every day.

Together, we can drive our progress even further. We can end chronic homelessness.