



How many Continuum of Care Projects for Homeless Persons are Asserting Low Barriers and Committing to a Housing First Approach in the State of California?

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Primary Findings:

Among the 942 new and renewal projects submitted by all Continuums of Care project applicants within the 43 Continuums of Care (CoCs) in California to the U.S. Department of Housing and Urban Development (HUD) for Continuum of Care (CoC) funding in November, 2015,

- a. 91% (854) indicated that their projects operate as low barrier projects, meaning that they do not screen out potential project participants based on the following four barriers: 1) too little or little income; 2) active or history of substance use; 3) criminal record, with exceptions for state-mandated restrictions; and 4) history of having been or being currently a victim of domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement);
- b. 85% (800) committed to using a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements.

-source: FY 2015 Continuum of Care Applications submitted by all 43 California Continuums of Care to the U.S. Department of Housing and Urban Development-

Appendix A provides a list of all 43 Continuums of Care in the State of California that includes the total number of projects, total number and percent of projects that are low barrier, and the total number and percent of projects that reportedly have adopted a Housing First approach for each Continuum of Care.

This brief is based on the answers to two questions that were included in the U.S. Department of Housing and Urban Development (HUD) FY 2015 Continuum of Care (CoC) Application. The first question focused on barriers that prevent homeless persons from obtaining housing and the second question focused on barriers that could prevent them from maintaining their housing.

The answers to these two questions are important because of the growing acceptance among homeless service providers that reducing barriers to housing and using a Housing First approach are critical to ending homelessness, especially among chronically homeless individuals and families.

The answers to these two questions are also significant because California accounted for the largest percent (21%) of the nation's homeless population in 2015 according to the Annual Homeless Assessment Report (AHAR) report to the U.S. Congress regarding the extent and nature of homelessness in the United States. The report noted that "more than half of the homeless population in the United States was in five states: CA (21% or 115,738 people), NY (16% or 88,250 people), FL (6% or 35,900 people), TX (4% or 23,678 people), and MA (4% or 21,135 people)." Also, California had the highest percentage of homeless people counted in unsheltered locations (64%).

A. Questions and Answers

The first question focused on barriers that prevent potential participants from entering Permanent Housing (Permanent Supportive Housing and Rapid Rehousing), Transitional Housing, and Supportive Services Only (non-Coordinated Entry) projects (see Appendix B for a description of each of these four Continuum of Care components).

First Question

1. "Based on the CoC's FY 2015 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH) and SSO (non-Coordinated Entry) projects in the CoC are low barrier?¹

HUD noted that this meant "that they do not screen out potential participants based on those clients possessing

- too little or little income,
- active or history of substance use,
- criminal record, with exceptions for state-mandated restrictions, and
- history of having been or currently a victim of domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement)."²

¹ "Detailed Instructions for Completing the FY 2015 Continuum of Care (CoC) Application," p. 62.

² Ibid.

HUD further stated that

“Many recipients of CoC Program and ESG Program funds place more stringent requirements for entry into a program than what HUD requires and this can create barriers for those homeless persons who already have the most barriers and who would be considered the hardest-to-serve. As we continue to shift toward a paradigm of ending homelessness, it is increasingly important that CoC Program-funded projects eliminate barriers to serving people experiencing homelessness.”³

Consequently, project applicants were asked to indicate their alignment with a low barrier philosophy by indicating that they were staying away from the following list of barriers,

- too little or little income
- active or history of substance use
- criminal record, with exceptions for state-mandated restrictions, and
- history of having been or currently a victim of domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement).

According to HUD, if project applicants checked all four boxes, the project was considered “low barrier.” If less than four boxes were checked, the project was not considered low barrier.

As noted before, project applicants submitted a total of 942 new and renewal applications to HUD for funding. Of the 942 applications

- 854 or 91% checked all four boxes meaning that they considered their project to be low barrier.

HUD noted that maximum points would be awarded to Continuums of Care

“where at least 75 percent of the permanent housing (RRH and PSH), transitional housing (TH), and non-Coordinated Entry Supportive Services Only (SSO) project applications submitted in the FY 2015 CoC Program Competition have indicated that the project operates as a low barrier project according to the criteria in the Project Application.”⁴

Answer

- **Of the 942 new and renewal projects submitted by all Continuums of Care project applicants within the 43 Continuums of Care in California, 91% (854) indicated that their projects operate as low barrier.**

³ Ibid.

⁴ Ibid.

As noted in the table below, of the 43 Continuums of Care in California,

- 20 or 46% of Continuums of Care had 100% of their projects considered low barrier;
- 8 or 19% of Continuums of Care had between 90 and 99% of their projects considered low barrier;
- 8 or 19% of Continuums of Care had between 75 and 89% of their projects considered low barrier;
- 7 or 16% of Continuums of Care had less than 75% of their projects considered low barrier;
 - 1 had 43% of their projects considered low barrier;
 - 1 had 29% of their projects considered low barrier;
 - 5 had 0% because they did not submit any new or renewal projects for Permanent Housing (Permanent Supportive Housing and Rapid Rehousing), Transitional Housing, and Supportive Services Only (non-Coordinated Entry) projects.

Table 1. Range of Percentages for Projects Considered Low Barrier by Number of Continuums of Care

Range of Percentages	Continuums of Care	
	#	%
Continuums of Care With 100% of Projects Considered Low Barrier	20	31
Continuums of Care With 90 to 99% of Projects Considered Low Barrier	8	33
Continuums of Care With 75 to 89% of Projects Considered Low Barrier	8	34
Continuums of Care With Less than 75% of projects considered low barrier	7	2
Total:	43	100

Second Question

2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), RRH, SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2015 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

HUD stated that

*“Housing First is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment, or service participation requirements. See the *Housing First Policy Brief* for further description of Housing First. Research has shown that permanent supportive housing models that use a Housing First approach are highly effective for ending homelessness, particularly for people experiencing chronic homelessness who have higher service needs.”⁵*

⁵ Ibid., p. 64.

HUD further stated that

“The Housing First model is an approach to: 1) quickly and successfully connect individuals and families experiencing homelessness to permanent supportive housing; 2) without barriers to entry, such as sobriety, treatment or service participation requirements; or 3) related preconditions that might lead to the program participant’s termination from the project. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry.”⁶

Project applicants provided their responses based on the following three questions, which included specific instructions from HUD:

- **“Does the project quickly move participants into permanent housing?** Select ‘Yes’ to this question if your project will quickly move program participants into permanent housing without intermediary steps or a period of qualification before permanent housing. Select ‘No’ if the project does not work to move program participants quickly into permanent housing.”
- **“Has the project removed the following barriers to accessing housing and services? (Select ALL that apply):** Check the box next to each item to confirm that your project has removed (or never had) barriers to program access related to each of the following: 1) Having too little or little income; 2) Active or history of substance abuse; 3) Having a criminal record with exceptions for state-mandated restrictions; and 4) Fleeing domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement). If all of these barriers to access still exist select None of the above’.”
- **“Has the project removed the following as reasons for program termination?** Check the box next to each item to confirm that your project has removed (or never had) reasons for program participant termination related to each of the following: 1) Failure to participate in supportive services; 2) Failure to make progress on a service plan; 3) Loss of income or failure to improve income; 4) Fleeing domestic violence; and 5) Any other activity not covered in a lease agreement typically found in the project’s geographic area. If all of these reasons for program termination still exist select ‘None of the above’.”

If the answers were affirmative to each of the questions, the following question “Does the project follow a Housing First approach” was automatically populated as “yes.” HUD noted that

⁶ For renewal applications see “Detailed Instructions for Completing the Renewal Project Application: Fiscal Year 2015 Continuum of Care Program Application Process,” p. 17 and for new applications see “Detailed Instructions for Completing the New Project Application: Fiscal Year 2015 Continuum of Care Program Application Process,” p. 19.

“This field is automatically calculated and cannot be edited. **Only if** “Yes” was answered for 4a **AND** all of the barriers and reasons boxes were checked for 4b and 4c, **will** this field indicate “Yes” to confirm a Housing First approach. Otherwise, this field will indicate “No” to confirm that the project will not follow a Housing First approach.”⁷

Answer

- **Of the 942 new and renewal projects submitted by all Continuums of Care project applicants within the 43 Continuums of Care in California, 85% (800) have committed to using a Housing First approach.**

As noted in the table below, of the 43 Continuums of Care in California,

- 17 or 39% of Continuums of Care had 100% of their projects using a Housing First approach;
- 6 or 14% of Continuums of Care had between 90 and 99% of their projects using a Housing First approach;
- 11 or 26% of Continuums of Care had between 75 and 89% of their projects using a Housing First approach;
- 9 or 21% of Continuums of Care had less than 75% of their projects using a Housing First approach;
 - 1 had 50% of their projects using a Housing First approach;
 - 1 had 43% of their projects using a Housing First approach;
 - 1 had 33% of their projects using a Housing First approach;
 - 6 had 0% because they did not submit any new or renewal projects for Permanent Housing (Permanent Supportive Housing and Rapid Rehousing), Transitional Housing, and Supportive Services Only (non-Coordinated Entry) projects.

Table 2. Range of Percentages for Projects Considered Using a Housing First Approach by Number of Continuums of Care

Range of Percentages	Continuums of Care	
	#	%
Continuums of Care With 100% of Projects Using a Housing First Approach	17	39
Continuums of Care With 90 to 99% of Projects Using a Housing First Approach	6	14
Continuums of Care With 75 to 89% of Projects Using a Housing First Approach	11	26
Continuums of Care With Less than 75% of projects Using a Housing First Approach	9	21
Total:	43	100

⁷ Ibid, p. 20.

B. Next Steps

On page 44 of the “Notice of Funding Availability for the 2015 Continuum of Care Program Competition,” HUD stated that

“Any project application(s) that indicate a Housing First approach and is reviewed, approved, and ranked by the CoC that is awarded FY 2015 CoC Program funds will be required to operate as a Housing First project.”

Monitoring such projects is imperative. HUD has now emphasized a Housing First approach for permanent supportive housing, rapid rehousing, transitional housing, and non-Coordinated Entry supportive services only projects. As a matter of fact, the 2015 Continuum of Care Program Competition was the first one in which HUD strongly encouraged using a Housing First approach for transitional housing and non-Coordinated Entry supportive service only projects just like a Housing First approach was strongly encouraged for permanent supportive housing and rapid rehousing in the past.

Project applicants’ responses to the HUD grant questions on their alignment with Housing First should be considered by the Continuums of Care when each project is considered for renewal and when there are new projects for submission in the annual Continuum of Care Program Competition. Gathering the data, however, may be a challenge. CoCs could simply ask project applicants to answer the questions similarly to what HUD did as part of the project application process and can then base their decisions on such data. Verifying the answers is another matter. Verification could come from program participants during entry to the project and during exit. Project staff could also verify project answers. Continuum of Care could also review and gather verification data during annual site visits.

Perhaps HUD will require verification and develop a process to accomplish it as part of the 2016 Continuum of Care competition.

Appendix A:

list of all 43 Continuums of Care in the State of California that includes the total number of projects, total number and percent of projects that are low barrier, and the total number and percent of projects that adopted a Housing First approach.

Continuum of Care:		Total Number of Projects	Projects that are Low Barrier		Projects that Adopted a Housing First approach	
			#	%	#	%
CA-500	San Jose/Santa Clara City & County CoC	41	41	100	41	100
CA-501	San Francisco CoC	65	60	92	54	83
CA-502	Oakland, Berkeley/Alameda County CoC	51	50	98	50	98
CA-503	Sacramento City & County CoC	38	34	89	34	89
CA-504	Santa Rosa, Petaluma/Sonoma County CoC	16	15	94	15	94
CA-505	Richmond/Contra Costa County CoC	26	25	96	25	96
CA-506	Salinas/Monterey, San Benito Counties CoC	14	6	43	6	43
CA-507	Marin County CoC	14	14	100	14	100
CA-508	Watsonville/Santa Cruz City & County CoC	17	17	100	16	94
CA-509	Mendocino County CoC	5	5	100	4	100 ⁸
CA-510	Turlock, Modesto/Stanislaus County CoC	24	7	29	0	0
CA-510	Stockton/San Joaquin County CoC	12	12	100	4	33
CA-512	Daly City/San Mateo County CoC	21	21	100	21	100
CA-513	Visalia/Kings, Tulare Counties CoC	17	17	100	17	100
CA-514	Fresno City & County/Madera County CoC	24	24	100	24	100
CA-515	Roseville, Rocklin/Placer, Nevada Counties	12	12	100	12	100
CA-516	Redding/Shasta County CoC	4	4	100	4	100
CA-517	Napa City & County CoC	4	4	100	4	100
CA-518	Vallejo/Solano County CoC	16	16	100	16	100
CA-519	Chico, Paradise/Butte County CoC	11	9	82	9	82
CA-520	Merced City & County CoC	7	7	100	6	86
CA-521	Davis, Woodland/Yolo County CoC	11	9	82	9	82
CA-522	Humboldt County CoC	10	10	100	10	100
CA-523	Colusa, Glen, Trinity Counties CoC	0	0	0	0	0
CA-524	Yuba City/Sutter County CoC	1	1	100	1	100
CA-525	El Dorado County CoC	0	0	0	0	0
CA-526	Tuolumne, Amador, Calaveras, Mariposa Counties CoC	9	9	100	9	100
CA-527	Tehama County CoC	0	0	0	0	0
CA-529	Lake County CoC	0	0	0	0	0
CA-600	Los Angeles City & County CoC	213	183	86	167	78
CA-601	San Diego City and County CoC	58	54	93	47	81
CA-602	Santa Ana, Anaheim/Orange County CoC	45	44	98	39	87
CA-603	Santa Maria/Santa Barbara County CoC	15	13	87	11	73
CA-604	Bakersfield/Kern County CoC	23	21	91	21	91
CA-606	Long Beach CoC	18	17	94	17	94

⁸ CoC reported only reported four out of five projects.

CA-607	Pasadena CoC	13	13	100	13	100
CA-608	Riverside City & County CoC	29	25	86	25	86
CA-609	San Bernardino City & County CoC	21	21	100	21	100
CA-611	Oxnard, San Buenaventura/Ventura County CoC	17	17	100	17	100
CA-612	Glendale CoC	12	10	83	10	83
CA-613	Imperial County CoC	2	2	100	1	50
CA-614	San Luis Obispo County CoC	6	5	83	6	100
CA-615	Alpine, Inyo, Mono Counties CoC	0	0	0	0	0
	Total:	942	854	91	800	85

Appendix B: Definitions

Permanent housing refers to community-based housing without a designated length of stay, and includes both permanent supportive housing and rapid rehousing. To be permanent housing, the program participant must be the tenant on a lease for a term of at least one year, which is renewable for terms that are a minimum of one month long, and is terminable only for cause.

Permanent supportive housing refers to permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently.

Rapid Re-Housing is a model of housing assistance that is designed to assist the homeless, with or without disabilities, move as quickly as possible into permanent housing and achieve stability in that housing. Rapid re-housing assistance is time-limited, individualized, and flexible, and is designed to complement and enhance homeless system performance and the performance of other homeless projects. While it can be used for any homeless person, preliminary evidence indicates that it can be particularly effective for households with children.

Non-Coordinated Entry Supportive Services Only standalone projects provide supportive services to sheltered and unsheltered homeless persons that generally do not reside in specific housing projects or structures that receive other funding to provide supportive services to clients.

Transitional housing refers to housing, where all program participants have signed a lease or occupancy agreement, the purpose of which is to facilitate the movement of homeless individuals and families into permanent housing within 24 months or such longer period as HUD determines necessary. The program participant must have a lease or occupancy agreement for a term of at least one month that ends in 24 months and cannot be extended.