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Homelessness Prevention and Rapid Re-Housing Connecticut

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Households with very low incomes are overly rent-burdened, sometimes paying as much as 80% of their income on housing costs. In Connecticut there are 64,000 such households¹.

In 2011, over 13,000 people used Connecticut's crisis response system, and over 11,000 used the state's emergency shelters alone. A lack of affordable housing is the primary cause of homelessness in Connecticut, according to current research. Eighty percent (80%) of Connecticut's poor households spend more than half of their income on rent², while homeless families typically have extremely low incomes under 50% of the poverty level.³

Most people become homeless as a result of a financial crisis that prevents them from paying the rent or mortgage, or a domestic conflict that leaves one member with no resources for housing. People experiencing homelessness typically need services beyond housing assistance such as childcare, employment, income supports, and healthcare. Through community partnerships, such services and homelessness assistance can be better coordinated to ensure that families find housing and remain stable. Coordinated intake can promote timely intervention and streamlined services.

As part of the American Recovery and Reinvestment Act, the U.S. Department of Housing and Urban Development (HUD) distributed funds for the Homelessness Prevention and Rapid Re-housing Program (HPRP). HPRP provided financial assistance and services to prevent persons from becoming homeless, or to re-house and stabilize those who had become homeless. Financial assistance included temporary rent and utility assistance, security and utility deposits, and rent arrearages. Non-financial services included case management and legal services.

Creating Lasting Change

From the beginning of Connecticut's HPR program to date, more than 9,000 persons in over 4,000 households have been served. On average, households received assistance for approximately three months.

Most people served by the program were in households with at least one child, and for both prevention and rapid re-housing services, the majority of persons served were female. Almost 40% of people served were under 18 years of age.

A Glance at Connecticut Homelessness Prevention and Rapid Re-Housing Services (October 1, 2009 - September 31, 2011)

Percent of persons served that were in families	74%
Percent of families headed by a single female	54%
Percent of persons served that were children (under 18 years of age)	41%
Percent of clients "housed and at imminent risk of losing housing"	63%
Percent of clients renting without subsidy prior to HPRP contact	79%
Percent of persons receiving rapid re-housing services that were female	67%
Percent of persons receiving prevention services that were female	74%

Source: CT Homelessness Management Information System (CT HMIS)

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Lessons Learned

Ending homelessness means helping people transition out of shelter, preventing returns to homelessness, and preventing people from becoming homeless in the first place. Because adults, youth and families have varying needs and become homeless for different reasons, there is no single intervention that will work for everyone. Despite this, research and evidence demonstrates that the following are proven to have the greatest impact on preventing and ending homelessness:

- **Affordable and subsidized housing**
- **Targeted financial assistance**
- **Permanent supportive housing**
- **Job training and jobs that pay a living wage**

Re-housing and stabilization should be targeted to families with the following characteristics:

- Children under six years of age
- History of domestic violence
- Head of household under twenty-five years of age

Prevention and rapid re-housing can help focus efforts to recalibrate our homeless crisis response system, moving from an antiquated shelter-based model to one that is housing-based. Prevention and rapid re-housing support retooling the crisis response system by promoting:

- ***Aligned Common Outcomes***

The HEARTH Act challenges local Continua of Care to reduce lengths of stay in shelter and decrease returns to homelessness within their communities. Program guidelines will include direct movement from homelessness to housing, providing the most appropriate amount of assistance necessary to obtain and stabilize housing, and linking households to community resources in order to achieve housing stability and maximize financial support.

- ***Housing Centered Solutions***

Prevention and rapid-rehousing programs are based on the “housing first” model, which emphasizes the quickest possible procurement of stable permanent housing for those either at-risk for already homeless, and subsequent connections to sustain housing.

- ***Targeted Programs***

Successful homeless prevention programs strive to target people who are at the highest risk of becoming homeless and also have a probability of remaining housed if they receive assistance. Under HEARTH, government grantees can direct prevention and rapid re-housing programs to use risk factors in order to more accurately target services. Accurate and effective targeting can alleviate strain on the buckling shelter system.

- ***Strong Local Partnerships***

Prevention and rapid re-housing programs work with staff of Continua of Care and Community Plans to End Homelessness to refine and restructure resources to ensure housing stabilization. Partnerships with landlords and social services are key to rapid re-housing success.

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Implementing the Emergency Solutions Grant

The U.S. Department of Housing and Urban Development (HUD) has published draft regulations for the Homeless Assistance and Rapid Transition to Housing (HEARTH) Emergency Solutions Grant (ESG), which replaces the Emergency Shelter Grant. ESG is a formula-based program which is awarded annually to state and municipal grantees. New regulations add rapid re-housing and more targeted prevention to traditional shelter and prevention activities.

Connecticut grantees will receive a combined additional allotment of approximately \$1 million during the upcoming federal fiscal year for prevention and rapid re-housing activities.

Recommendations

- Targeting prevention to people most likely to become homeless is critically important and extremely challenging, thus requires a focused effort.
- Successful prevention and rapid re-housing assistance programs rely on community-wide performance outcome measures. ESG funding should be combined with other resources to create a community-wide system of rapid re-housing.
- Concerns about tenants' ability to sustain housing should be addressed through program design rather than through stringent eligibility screens.

Source: National Alliance to End Homelessness

Implications for Connecticut

Six grantees will implement the ESG regulations, including the Connecticut Department of Social Services and the cities of Hartford, New Britain, New Haven, Waterbury, and Bridgeport. ESG introduces:

- A 60% cap on allocation for homeless outreach and emergency shelter;
- Restriction of outreach funding to only unsheltered persons;
- Minimum standards for homeless shelters, street outreach, and prevention and rapid re-housing services, and
- Homeless Management Information System reporting mandates.

The draft regulations include references to centralized or coordinated intake for people seeking homeless prevention services. HUD will provide guidance on minimum requirements for this system when they issue draft HEARTH/Continuum of Care regulations.

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CT HPRP: Two Connecticut Families' Stories

After being evicted from her apartment, Janet, a 26 year-old mother with four young children, applied to the program. She was living in her car and her children were staying with various family members. Poor credit and an eviction history rendered Janet unable to find a landlord that would rent to her. She found an apartment that was affordable but the landlord refused to accept her until the case manager intervened. Janet moved in and is now working full-time. Her family is reunited.



Return on Investments

- Janet could ensure a stable education for her children
- With affordable rent, Janet gained housing stability
- Janet's full-time employment enabled her to pay living expenses for her family
- Janet and her children avoided child welfare involvement

Tom, 57 years old, struggled with addiction and entered an in-patient treatment program. After being successfully discharged from the program, he entered emergency shelter. Tom had difficulty finding a landlord that would rent to him due to his multiple evictions and criminal history. Within a week of entering the shelter, Tom was approved for CT HPRP and placed on a wait list for supportive housing. Tom is currently in an Easter Seals job training program where he is earning income and gaining skills that will lead to permanent employment. He has a housing voucher.



Return on Investments

- The training program prepared Tom for permanent employment
- Permanent employment stabilized Tom's housing situation
- Supportive housing is helping Tom stay sober and avoid arrest

¹ M. William Sermons and Peter Witte. *State of Homelessness in America*, Washington, DC: National Alliance to End Homelessness, January 2011.

² National Alliance to End Homelessness, "2010 Policy Guide" Washington, DC: July 2010.

³ M. William Sermons and Peter Witte. *State of Homelessness in America*, Washington, DC: National Alliance to End Homelessness, January 2011.

About CCEH

The Connecticut Coalition to End Homelessness is a research-driven, community-rooted statewide organization that seeks to end homelessness in Connecticut. Our tools: leadership development, community engagement and organizing, advocacy, field mobilization, research and analysis and communications.

