Dear Friends,

This edition of Rural Voices makes clear the complexity of rural homelessness. Defining, much less quantifying, rural homelessness is a formidable task. While the challenges are sobering, we are inspired by those addressing rural homelessness across sectors ranging from education to domestic violence to veterans’ services. We’ve brought together national experts and local providers to share perspectives on this issue while cognizant of one constant: affordable housing matters – and we need more of it.

Probing rural homelessness provides a stark reminder – important for policymakers and practitioners alike – that homelessness and housing related issues manifest differently in rural environments. Highly effective urban solutions aimed at homelessness too often falter in rural America, where nonprofits – not governments – often provide services and where those who are homeless are often less conspicuous, but no less in need of assistance. We also know that rural homelessness recognizes no geographic boundaries. Counties with entrenched poverty deal with homelessness regularly. But homelessness is also a constant in rural areas with popular recreational amenities and well-heeled seasonal residents, as economic booms inevitably lead to high rents, unaffordable to those in the service industries, seniors living on fixed incomes, and others.

In a fast-paced world where “solutions” to complex problems are often noted in bullet points it would be tempting to offer a slate of quick fixes to rural homelessness in this forum. But doing so would be disingenuous as we know that addressing complex problems requires local ingenuity coupled with sustained resources.

Rural Voices last addressed rural homelessness in 2007. Since then, researchers from a variety of disciplines have further explored the impact of homelessness. Their findings indicate the far-ranging human and fiscal costs when shelter is unavailable. For example, a 2014 government report noted that one out of every 45 children faces homelessness in a given year, adding that experiences associated with homelessness can lead to “toxic stress” in children linked to behavioral and developmental delays, physical disabilities, and social emotional issues.

Perhaps in 2022, after the next seven-year interval, we can devote a Rural Voices issue to how rural homelessness was solved. If so, we will know that those rural voices featured in this edition deserve a part of the credit.

Sincerely,

Andrew Bias  
Chair, Board of Directors

Peter Carey  
President, Board of Directors

Moises Loza  
Executive Director
Dear Friends

On the Brink of Change
Innovative housing solutions are possible if everyone can work together.

An Overview of Rural Homelessness
Homelessness has some different causes, features, and resources in rural places than in cities, and recognizing the distinctions can help in crafting solutions.

From Storage Shed to Stable Home
What does rural homelessness look like? A Tennessee man shares his story of hardship and perseverance.

Farmworker Homelessness in Imperial County, California
Factors related to the seasonal nature of their work, their low wages, and discrimination may lead to homelessness among farmworkers.

Moving into Housing...First
The Housing First approach provides housing without preconditions or requirements relating to behavior or treatment. With a stable home base, residents then address the challenges that caused, or kept them in, homelessness.

Expanding Healthcare Services for Supportive Housing Residents in Rural Areas
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What the Schools Know: Children and Youth Experiencing Homelessness
A national system of state and local homeless education coordinators works to ensure the growing numbers of homeless students have access to the resources they need.

HAC Facts
A View From Washington

On the Brink of Change

Innovative housing solutions are possible if everyone can work together.

By Congressman Blaine Luetkemeyer
Through winter’s bitter cold and summer’s sweltering heat, hundreds of thousands of individuals sleep outdoors or in cars, tents, barns, or local homeless shelters, and do not have their own places to call home.

In 2015, the national rate of homelessness dropped to 18.3 homeless people per 10,000 individuals in the general population. In this same time period, 34 states saw a decrease in overall homelessness, while 17 states saw an increase. Nevertheless, homelessness across our country is heartbreakingly and inexcusably high. While most Americans are fortunate to have a place to call home each and every night, we have to recognize that is not the case for everyone and we know this issue will not be solved on its own.

When I took the gavel of the House Financial Services Subcommittee on Housing and Insurance, I told my colleagues and all who would listen that I wanted to work together to accomplish more for those Americans facing homelessness, knowing that the current system isn’t built to combat the multi-layered housing problems seen throughout our nation.

We need to look for innovative housing solutions in both urban and rural areas.

Last year, Housing and Urban Development (HUD) Secretary Julián Castro visited my district in Missouri. Together we met with residents, housing advocates, and state and local officials charged with finding solutions for rural housing issues.

As a result of those meetings, and of meetings held throughout Missouri and in Washington, I developed H.R. 3700, comprehensive legislation that takes the first step in instituting reforms to the programs and processes at HUD for the first time in 50 years and at USDA’s Rural Housing Service (RHS).

Among other things, H.R. 3700 would:

- Aim to ensure that veterans have fair access to housing and homeless assistance programs;
- Authorize the RHS single-family housing guaranteed loan program to delegate approval authority to preferred lenders;
- Extend the period for which a family could use a family unification housing voucher and increase the ceiling for the Family Unification Program voucher age requirement;
- And streamline requirements for the Self-Help Homeownership Opportunity Program and other housing assistance programs.

H.R. 3700 is a significant start, but conversations throughout 2016 will go beyond one bill alone. The subcommittee will continue to conduct oversight of HUD and RHS to identify paths forward for innovations that strive to serve Americans in need, while responsibly utilizing limited resources.

There is a renewed effort to focus on poverty in both urban and rural communities across the nation. I firmly believe we are on the brink of making real, meaningful changes. If we can continue to keep working, and keep working together, we can ensure that actors in Washington help, not hurt, our most vulnerable populations.

Editor’s note: H.R. 3700 passed the House on a 427-0 vote on February 2, 2016. The bill has not yet been considered in the Senate.

Rep. Luetkemeyer, a Republican representing Missouri’s third district, is the Vice Chairman of the House Small Business Committee and is a member of the House Financial Services Committee, where he serves as the Chairman of the Subcommittee on Housing and Insurance.
An Overview of Rural Homelessness

By Nan Roman and Steve Berg

Homelessness has some different causes, features, and resources in rural places than in cities, and recognizing the distinctions can help in crafting solutions.
Homelessness affects people in communities throughout our nation: wealthy and poor, northern and southern, urban and rural. It is a problem driven largely by the gap between what low-income people earn and the skyrocketing cost of housing, often exacerbated by unmet service needs.

Homelessness is a constant across the U.S. landscape, but its effects on those who experience it, as well as its solutions, can vary considerably based on local factors. According to the Annual Homeless Assessment Report (AHAR) 2015 Part 1, published by the Department of Housing and Urban Development, 564,708 people experienced homelessness on a given night in 2015. What does this look like when we consider the rural landscape?

According to the AHAR 2015 Part 1:
- 78,085 people in rural areas experienced homelessness on a given night in 2015;
- 42 percent of those (approximately 32,800) were people in families; and
- 11.6 percent (approximately 9,650) were chronically homeless individuals.

Incidence and Causes of Rural Homelessness

The best existing studies appear to show that people who are homeless are under-represented in the rural population relative to the general U.S. population. According to the AHAR 2015 Part 1, 14 percent of all homeless people live in rural areas, whereas the 2010 Census found that 19 percent of the U.S. population is rural. It is possible, however, that this under-representation is due to the challenge of counting homeless people in rural areas versus urban areas, described further below.

There are broad structural factors that cause homelessness in both rural and urban areas: the lack of affordable housing and employment options, low wages, and insufficient services for those who need them. Rural areas do, however, have several unique issues that may affect homelessness:
- more substandard housing;
- acute transportation barriers that impede access to jobs, services, and education, affecting incomes and access to affordable housing;
- lack of mental health, child care, health, employment, and other services that would help people maintain adequate incomes and stability in housing; and
- higher poverty rates resulting from the above as well as disproportionate recovery from the Great Recession.

Assistance for People Experiencing Homelessness in Rural Areas

Most big cities have a well-developed assistance infrastructure designed specifically for people who are homeless, supported with federal, state, and local public funding, and significant philanthropic and faith-based contributions. This results in a network of shelters for different populations, longer term transitional housing, street outreach, drop-in centers, and meal programs.

The concentration of those experiencing homelessness is thinner in rural areas and populations overall are smaller, so individual rural communities rarely have the same availability of shelters and other infrastructure as big cities. As a result, the percentage of homeless people who are unsheltered is higher in rural areas than in urban – people may live in campers or other places not meant to serve as homes.

At the same time, the problem of homelessness is often less visible in rural areas. Unsheltered homeless people in rural areas may be less likely to live openly on the streets. Services that are available are often provided by larger antipoverty or community development programs, rather than by programs that define themselves as addressing homelessness. Because there are few visible reminders of this pressing social issue, other residents do not know, and may even deny, that homelessness exists.
First, there must be continued improvement in the assessment of the size and nature of rural homelessness. These factors all feed into the question of reliability around rural homelessness data. Nationally, homeless people are “counted” in two ways: by assessing the number of people who use homeless programs, and by physically scouring jurisdictions to count people who are unsheltered (living outside, or in cars, tents, abandoned buildings, etc.). Since individual rural communities have fewer homeless programs, this method is less effective there. And covering the massive rural geographies to count those not in programs, an unfunded activity, is prohibitive. In addition, in both rural and urban areas the counts do not attempt to measure the much larger number of low-income people who are “doubled up” or in substandard housing, even those who are eligible for homeless programs due to the instability or danger of their situations. As a result, it is quite likely that the extent of rural homelessness is underestimated.

A more scattered, less understood, and less visible homeless population likely contributes to a lack of attention and resources to address homelessness in rural areas.

Ending Rural Homelessness

A combination of the causes of homelessness, the way in which people experience it, and the response in rural areas may be holding back progress on the issue. What could be done differently to help rural communities solve their homelessness problems?

Many of the factors that distinguish rural from urban homelessness could in fact suggest a path to ending homelessness in rural areas.

First, there must be continued improvement in the assessment of the size and nature of rural homelessness. Administrative data matching might identify people who are homeless but who, in the absence of homeless programs, receive assistance from other public systems of care (hospitals, mental health services, substance abuse treatment, etc.). And enhanced and coordinated counting methodologies could better identify those living outdoors or in places not meant for human habitation.

The fact that rural areas have relatively less investment in shelters and other temporizing measures can, in some places, allow more flexibility to spend available funds to help people escape homelessness immediately. Funds could be used to more directly house people who become homeless, employing the “rapid rehousing” model, thus eliminating the need for shelters where none exist. As the number of literally homeless
The causes, nature, and mechanics of solving homelessness are different in rural than in urban areas. Our failure to appreciate this has created obstacles when it comes to solving the problem in these communities. Despite that, it is likely that rural areas could end homelessness more, not less, quickly than their urban neighbors if given good data and the ability to address the issue in the most effective manner.

The HEARTH Act established the Rural Housing Stability Assistance program to replace the regular Continuum of Care programs in rural areas that choose to do so with flexible funds and broader eligibility for people needing assistance, linked to a commitment to solve the most severe housing problems in the rural community. To date, however, this program has not been funded so rural communities are still operating under the same structure as urban areas.

Nan Roman is President and CEO of the National Alliance to End Homelessness. Steve Berg is Vice President of Programs and Policy for the National Alliance to End Homelessness.
From Storage Shed to Stable Home

By Ashley Gooch

What does rural homelessness look like? A Tennessee man shares his story of hardship and perseverance.

I scheduled a meeting with two formerly homeless men to talk about their experiences, and what I got was a raw and intimate conversation between case worker and client who had much in common. Columbus “Billy” Helton had experience with homelessness here in west Tennessee. Mike Smith, a caseworker at Tennessee Homeless Solutions, was also once homeless. Hearing the two of them interact, I knew they connected on a deep level of understanding that I would never
know, so I sat back and listened as they recounted stories of hardship, pain, and solitude.

Billy Helton was once a very successful and hardworking man working in construction and traveling all over the U.S. doing professional painting. As he recounts it, his downfall into homelessness began after his divorce. Once able to think quickly on his feet, he found himself suddenly unable to do that under the stress that comes with divorce in addition to his declining health. Billy found it hard to find a job because he had breathing difficulties and many places that would hire him would soon let him go, fearing that they were doing more harm than good by letting him work in his poor condition. All at once he found himself sleeping on an old army cot in a tent in the wooded area of Adamsville, Tennessee. On colder nights he would sneak into a nearby storage unit, owned by someone else, and pray no one would catch him so that he might get a good night’s rest.

Our case worker Mike related to Billy, telling him many nights he would wake up so cold that he could not go back to sleep and would be sore from shivering all night. Billy agreed that, he too, had experienced nights so cold his teeth would chatter and he would find himself piling all the clothing he owned on top of him for some kind of comforting warmth.

Billy suffered through homelessness in Adamsville for about a year, doing the best he could to get by. He often washed himself in nearby lakes or creeks, and told us that, at times, it was warmer in the water than it was out of the water. He remembered standing out in the cold to dry off since he did not have a towel and did not want to soak the clothing he would have to wear. Billy did not have a car; he walked and bicycled everywhere that he needed to go around town, often going
to the dollar store to pick up some ramen noodle cups, filling them with cold water and letting them sit until they were edible. He laughed as he remembered putting anything he had available – such as bacon, black pepper, and salt – in them to make them taste better.

I asked Billy if he ever felt like giving up when he was homeless. He sat silently for a time, then told me he had contemplated suicide for only a moment before praying for strength and courage to make it through. On one particularly dark night in the woods, Billy’s tent was surrounded by coyotes. He heard their hungry howling from far off, drawing nearer until he knew they surrounded him completely. Laughing, he told me, “I knew it was either me or them, and I didn’t care which way it went at that point.” All he had with him was a small pocketknife and a mini LED flashlight. He turned on the flashlight, got out his knife, unzipped his tent, and waited for what was to come next. Maybe coyotes have compassion, maybe they were too afraid, or maybe this was some divine intervention, but when Billy awoke the next morning, there were no coyotes in sight. They had left him untouched.

One fateful day, the gentleman that owned the storage shed in Adamsville found Billy staying there. This kind man pointed Billy in the right direction, towards a local charity that put him up in a hotel and instructed him to call Tennessee Homeless Solutions’ hotline after finding out that he was once in the United States National Guard. Billy told me that he was so full of pride, he did not want to put anyone else out and he certainly didn’t want to ask for help. Once he called the Tennessee Homeless Solutions’ hotline he was set up to work with a case worker, which is where Mike came in. Mike, knowing how it truly feels to be cold and hungry, told his family about Billy’s situation and they delivered food to his hotel room. Billy went into Tennessee Homeless Solutions’ Supportive Services for Veteran Families program and was soon moved into Tennessee Homeless Solutions’ long term Supportive Housing Program.
where he has a place to call his own, a warm bed to sleep in, and good food to eat. Billy’s new case worker, Amy, checks on him often and has helped him secure some constant income so that he may able to support himself and stand on his own two feet again.

The last question I asked Billy was what he would say to others that were going through the same struggles now as he once did. Without missing a beat he replied, “Lay down your pride. There are people out there that want to help you. Everyone has to ask for help sometimes. When people want to buy a house they have to go to the bank to ask for help, and the bank asks people to bank with them so that they remain successful. Everyone asks for help and asking does not make you any less than anyone else. There are good people out there. Go find them.”

We agree with Billy on this one. If you are reading this right now and you are struggling with homelessness, there are people out there that do want to help you. Know that you do matter to someone and that there is a reason to keep clinging to hope.

Ashley Gooch is Hotline Operator/Office Manager at Tennessee Homeless Solutions, a nonprofit homeless assistance agency serving West Tennessee.
The seasonal nature of agricultural labor, combined with a shortage of affordable housing in rural communities, frequently results in homelessness among farmworkers. The 2014 American Community Survey (ACS) estimates that there are 386,724 agricultural workers in California, with median earnings of $18,733. The ACS estimates, however, are likely to reflect the historically significant undercount of farmworkers, whose population has been estimated by experts to be between 545,000 and as high as approximately 1 million individuals. The ACS estimate of 5,501 farmworkers employed in Imperial County probably is significantly lower.
Female-only shelters often impose age limits on male children, resulting in teenage male children being unable to stay in shelters with their mothers.

than the true number during the work season and does not include their dependents. California Rural Legal Assistance (CRLA) estimates that it is closer to 8,000 workers.

Affordable Housing Shortage

The peak of the agricultural season in Imperial County is during the winter months, with significantly less farm work available outside this main season. Most farmworkers have low incomes by virtue of industry rates, with median annual wages in 2015 of $18,656 per year in Imperial County.³ The limited farming season, combined with a county unemployment rate that fluctuates between 20 and 30 percent, means that farmworkers earn the bulk of their annual income during a small portion of the year and receive little income other than unemployment insurance benefits during the remainder of the year. Unexpected expenses, such as medical bills, have the potential to wipe out any savings, leaving many individuals unable to afford rent and resulting in eviction.

Farmworkers who find themselves evicted often have a difficult time obtaining affordable replacement housing or even shelter. There is typically a shortage of beds in homeless shelters in more remote rural communities, such as

Faris Algosail, Flickr Creative Commons: https://flic.kr/p/nsEPLz
Their low wages frequently leave farmworkers unable to afford housing even during the peak of the agriculture season.

Imperial County, as well as a shortage of shelters equipped to accept mixed-gender families. Male and female shelters often are located in separate towns, and female-only shelters often impose age limits on male children, resulting in teenage male children being unable to stay in shelters with their mothers. Female-headed households have to choose between splitting up the family to stay in available shelters or remaining together and staying with friends and relatives, in substandard residential hotels, or on the streets.

Low, seasonal wages and a lack of affordable housing force many farmworkers in Imperial County to live across the border in Mexicali, Baja California and to commute to work every morning. Housing in Mexico is significantly less expensive than in Imperial County, so many individuals choose to move to Mexico in order to avoid homelessness. Some of the individuals crossing the border for work each morning are United States citizens and lawful permanent residents who cannot afford to live in the United States.

These individuals face further hardships related to lost public benefits. They are ineligible for food stamps and Medi-Cal if they move to Mexico. This highly vulnerable population is thereby placed in the unenviable position of choosing between homelessness in the United States, where they might receive food stamps and healthcare, or Mexico, where they can afford housing but will have no health insurance if an emergency arises.

The border crossing wait into the United States during the peak of the winter harvest can be upwards of two hours, and an individual crossing the border can be sent to secondary inspection for any reason. A worker might not make it to their pickup site on time, so the work bus leaves without them, and they run the risk of losing their job, not just a day’s work. A temporary homeless/farmworker tent shelter is assembled in a park in Calexico, a town on the U.S. side of the border, and many farmworkers who cannot afford housing in Imperial County sleep in this park during the harvest, when the weather is coldest.
Poor Quality Housing

Their low wages frequently leave farmworkers unable to afford housing even during the peak of the agriculture season. This leads to exploitation of farmworkers by unscrupulous landlords, who rent severely dilapidated and substandard properties to these individuals. These properties often are crowded and occupied by multiple families, and may be infested with vermin such as mice, bedbugs, and cockroaches. These conditions seriously threaten farmworker health and well-being. Retaliation, including termination of utility services by landlords, and threats are common against tenants who speak out regarding living conditions, so tenants are afraid to seek outside assistance.

Health and building departments in small communities suffer from a lack of resources, and often are ill-equipped to handle local slumlords. CRLA has observed a variety of responses from local code enforcement agencies in these cases. Some tenants have been incorrectly told by enforcement agencies that a residence cannot be inspected without a landlord’s consent or without prior payment of an inspection fee by the tenant. Inspectors in other communities in the county have been overzealous in condemning properties, resulting in tenants’ immediate homelessness. Some communities have provided written warnings to property owners and demanded repairs, while trying to avoid condemning properties or initiating code enforcement proceedings against the owner. Each of these strategies largely has been ineffective in improving the living situations of tenants in these properties.

A tenant living in a property that is condemned by code enforcement is entitled to relocation benefits under California law. Landlords almost universally refuse to pay these benefits, however, and cash-strapped communities typically are unwilling to advance the payments to tenants and place a lien against the property, despite having the right to do so. Displaced tenants consequently become homeless, do not receive the funds that the state legislature believed would help them obtain alternate housing, and are afraid to contact code enforcement again in the future. CRLA has had limited success in obtaining these benefits for tenants without resorting to litigation. Our El Centro office has sent numerous demands for relocation benefits over the past years, and has had only one landlord provide payment in response to a demand letter. The former tenants in every other case have had to proceed to small claims court to enforce this right.

CRLA’s offices throughout the state assist farmworkers and other low-income individuals in obtaining and maintaining access to safe, affordable housing. Our offices participate in local housing planning efforts to ensure that rural communities allow for the development of affordable housing, and defend tenants who are threatened with termination of subsidized housing for alleged lease violations. We also have brought numerous habitability cases against landlords and mobile home park owners who rent substandard properties, with great success. This advocacy is essential to preventing homelessness among farmworkers and their families.
Discrimination

Farmworkers often face housing discrimination because they are farmworkers, or because of their national origin or race. Our office often provides assistance for farmworkers who cannot obtain access to decent, affordable housing due to discrimination. We frequently bring fair housing cases against housing providers who have engaged in housing discrimination, and we assist many disabled former farmworkers with making reasonable accommodation and reasonable modification requests. Through this work we have been able to prevent evictions as well as obtain relief for clients who have faced discrimination.

We have also been working to ensure that low-income housing providers that receive federal funds are complying with their duty under Title VI of the Civil Rights Act of 1964 to provide language access services to Limited English Proficient (LEP) individuals. We discovered that many subsidized housing providers in Imperial County, including those operating farmworker housing within mere blocks of the Mexican border, were providing leases and notices to Spanish-speaking tenants in English only, and using these English documents to terminate the tenancies of monolingual Spanish speaking tenants. We have since made language access advocacy a local priority, and have represented a number of Spanish-speaking tenants and regularly provide community presentations discussing the rights of LEP tenants. We have been able to negotiate the development and adoption of language access policies by local low-income housing providers.

The housing situation is further complicated for LGBT farmworkers, for whom rural communities like Imperial County typically have few resources available. Discrimination against LGBT farmworkers is rampant, both on the job and in the community. Our El Centro office recently provided assistance to a transgender individual who had been denied admission to several homeless shelters. Each shelter was a single-gender facility, and the client, who identified as female, was questioned regarding the specifics of her transition, denied admission to each of the women’s shelters, and referred to a male-only shelter which also denied admission because she physically presented as female. Our office was able to resolve this case by contacting each shelter and explaining the law on this issue, and each women’s shelter agreed to update its admissions policies and provide training to staff regarding the rights of transgender applicants. We were also able to obtain admission to a shelter for our client, where she was provided with a private unit.
Solutions

The first solution to address many of the homelessness issues faced by farmworkers would be funding and construction of decent, affordable housing, in a variety of types to provide housing affordable to farmworker families, complex households, and unaccompanied farmworkers, in rural agricultural communities like Imperial County. Next would be expanded and appropriate funding for enforcement of fair housing laws and enforcement of applicable health and safety codes, designed to require repair of substandard housing conditions, to prevent retaliation and to require relocation assistance when displacement is the only alternative. Finally would be the creation of additional shelters, particularly mixed-gender shelters. Many communities resist the idea of building additional shelters and low-income housing.

The creation of affordable housing in rural farmworker communities must become a priority, or our society will continue to be one in which too many of the individuals who harvest the food on our tables are unable to afford a roof over their heads.


Ilene J. Jacobs is Director of Litigation, Advocacy & Training and Patrick Saldana is El Centro Directing Attorney at California Rural Legal Assistance.
The Complicated (& largely unknown) Picture of Rural Homelessness

Homeless Estimate by State

Estimate of Homeless Persons in Each State

Balance of State Continuum of Care

Percent of Homeless in Balance of State CoC

Source: Housing Assistance Council (HAC) Tabulations of HUD 2015 Point in Time Homelessness Estimates


How many homeless persons are in rural America?

It’s nearly impossible to estimate the level of homelessness in rural areas. HUD’s “Point in Time” survey is the data source most often used to enumerate homeless estimates. The Point in Time’s “Balance of State CoC” estimates are frequently used as proxies for rural homelessness. However, they are not an optimum, or even accurate measure of homeless persons for various methodological reasons. In short, we need a better way to count and understand rural homelessness.

IN 2015 THERE WERE AN ESTIMATED

564,708
Homeless persons in the United States

Of the total homeless estimate

78,085
Or
14%
were located in balance of state CoCs

BALANCE OF STATE CoCs, 2015

45,463
Homeless Individuals

32,622
Homeless People in Families

6,858
Homeless Veterans
The Housing First approach provides housing without preconditions or requirements relating to behavior or treatment. With a stable home base, residents then address the challenges that caused, or kept them in, homelessness.
He walked the streets of our neighborhood, proudly sporting his FBI sweatshirt. Many days, he’d wear a surgical mask to hide where the cancer had slowly chipped away at his face. I could watch him from my office window, grateful that his finding an apartment just a couple of blocks away allowed us to stay connected. We would know if he decided to abandon his housing...again.

Mr. J, who had slept rough on the streets for nearly two decades and had been an on-again off-again client for nearly as long, had secured housing through the local Housing First program. He was assessed to be a high priority for the program because of his various maladies...for once something positive coming out of his deeply rooted struggles. He was assigned a case manager who worked closely with his legal aid attorney to find housing that Mr. J would deem acceptable. This was not a task for the faint of heart. He rejected many apartments because of real or perceived safety concerns, finally leasing a small unit across town just as the weather began to turn cold. Because he’d been on the streets for so many years, we were skeptical that he’d transition well to life indoors; sadly, Mr. J fulfilled our expectations, returning to rough living at the end of the winter.

Fortunately, the Housing First program was designed for folks like Mr. J; the fact that he abandoned his first apartment would not disqualify him from securing another unit, should he decide to give stable housing another try. And thankfully, that’s just what he did. Before we turned our calendars to another winter, we were apartment hunting with Mr. J once again. He found an acceptable unit just up the street, and we became neighbors.

That Mr. J was welcomed back into the Housing First program after having once walked away was somewhat revolutionary, a reversal of many years of programming in the homeless services world. Revolutionary, and a vital element of the program’s unprecedented success. Putting success rate data aside, however, what his return to Housing First really meant in human terms was that Mr. J could live out his final years, and ultimately die, in the dignity of his own home. Since last spring, I’ve missed seeing him from my office window. Losing a neighbor is always a difficult thing.

**HUD defines a chronically homeless person as**

“either (1) an unaccompanied homeless individual with a disabling condition who has been continuously homeless for a year or more, OR (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in the past three years.”


**HUD defines permanent supportive housing as**

permanent housing with indefinite leasing or rental assistance paired with supportive services to assist homeless persons with a disability or families with an adult or child member with a disability achieve housing stability.

https://www.hudexchange.info/programs/coc/coc-program-eligibility-requirements/
Housing First has flipped decades of “housing ready” practices on their head, making the bold declaration that everyone can be ready for a safe, stable affordable place to call home. dutifully taking his or her meds or seeing a psychiatrist, in order to be “ready” for housing, or to remain housed.

The Housing First approach was initially piloted by a psychiatrist in New York City who grew frustrated at seeing patient after patient languishing on the streets, being offered opportunities to de-tox or medicate or to secure placement in conventional shelters, instead of being offered what they really needed, a key to their own apartment. Dr. Sam Tsemberis founded Pathways to Housing in 1992 to test his belief that “Housing ends homelessness...It’s that simple.”

Housing First has flipped decades of “housing ready” practices on their head, making the bold declaration that everyone can be ready for a safe, stable affordable place to call home. With Housing First, there is no paternalistic third-party assessment of whether someone has complied with all of the rules and is therefore ready to move into, or retain, his or her own place.

This was a dramatic change from a homeless services system that gave significant power to providers to control outcomes for their residents. In that system, providers of shelter held the key to housing’s front door. Some dangled that key as an enticement to encourage obedient behaviors. They made the decision about whether one could move from shelter into housing. In that system, providers of permanent housing controlled a resident’s security in his or her housing. They made the decision about whether that resident was able to remain.

What is Housing First?

According to the U.S. Interagency Council on Homelessness (USICH), “Housing First is a proven approach in which people experiencing homelessness are provided with permanent housing directly and with few to no treatment preconditions, behavioral contingencies, or barriers.” In somewhat simpler terms, it provides people who are experiencing chronic homelessness with exactly what they need: housing. It places them in such housing...first. It does not require a resident to be clean and sober, compliant with a treatment plan, Lance Cheung, Flickr Creative Commons: https://flic.kr/p/biHz5D
How is Housing First different from other Permanent Supportive Housing?

Housing First “unbundles” housing and services. A resident’s ability to remain in his or her housing is wholly de-coupled from one’s receipt of, or refusal to accept, services. A resident loses his or her housing only for the reasons that anyone else might lose his or her housing: failure to pay rent (Housing First rents are typically subsidized to keep rents affordable, so this is seldom an issue) or failure to comply with a lease…but not failure to comply with house rules or treatment plans. Other permanent supportive housing programs link a resident’s tenure in housing to his or her compliance with rules, which often include zero tolerance regarding alcohol and drug use.

From the place of stability that Housing First provides, residents are then able to address the various challenges that caused, or kept them in, homelessness. The chances of successful recovery, the ability to stay on top of one’s health needs, the likelihood of completing a treatment program or securing employment are all far greater when one has a place where she or he can keep track of appointments, store medication that needs refrigeration, and focus upon the tasks of daily living. It’s far easier to build a relationship of trust with a caseworker who will help to navigate such challenges when that caseworker doesn’t have the authority to take away one’s shelter bed or housing as a punishment for non-compliant behavior.

Is everyone on board with Housing First?

While study after study has shown Housing First to be successful and while it is a favored approach of the federal government in ending homelessness, Housing First is not without its detractors. Critiques typically come from providers who want to control the environment in their programs and favor the “housing ready” approach to Permanent Supportive Housing, as well as from those who believe that, by housing people who have not achieved sobriety or who have other negative behaviors, Housing First spends scarce resources on the “undeserving poor.” These community members, the argument goes, are being rewarded for refusing to comply with societal norms regarding playing by the rules. There should be punitive, not positive, consequences for such behavior, the critics urge.

To be sure, “clean” housing does work for, and is preferred by, some people who have experienced homelessness. When my city began to develop its Housing First program nearly a decade ago, we surveyed our clients and other shelter residents to find out what these community members saw as important elements of permanent housing. While a significant majority of respondents described
housing that aligns with Housing First, there were some who expressed an interest in housing that would provide a supportive environment for their recovery, where other residents were similarly struggling to maintain sobriety and where alcohol and drug use would not be tolerated.

Putting such moral arguments aside, Housing First does make good financial sense for communities and thus has gained favor with many fiscal conservatives who might otherwise oppose the expenditure of public funds on these community members. It has been shown to be more economical to house people who have experienced chronic homelessness than to keep them unhoused. Because those who are chronically homeless consume a disproportionately large share of costly public services (including emergency room visits, 9-1-1 calls, jail time and the like), a relatively small investment in housing will make such other expenditures unnecessary...and it will be far more effective in ending homelessness.

The simplicity of this approach – housing ends homelessness – has been satirized exactly because it is so simple and obvious. The Daily Show aired a segment, “The Homeless Homed,” which explored how Salt Lake City was able to end chronic homelessness. More than anything, the segment was an indictment of decades of failed and expensive approaches that sought to manage people in their homelessness instead of providing the very thing they needed most – a home. As Dr. Tsemberis of Pathways to Housing reminded us, “housing ends homelessness.”
How can a community implement a Housing First approach to ending homelessness?

For Housing First to be effective, there must be a commitment to working collaboratively among all stakeholders, as well as a commitment of local resources to supplement federal funding.

To assure that the adopted approach is truly a Housing First approach, the USICH offers this simple test:

1. Are applicants required to have income prior to admission?
2. Are applicants required to be “clean and sober” or “treatment compliant” prior to admission?
3. Are tenants able to be evicted for not following through on their services and/or treatment plan?

If the answer to any of these questions is “yes,” the program is not Housing First.

Our experience at the legal clinic where I work tells us that the most important ingredient is the belief that all members of the community are worthy of a decent, affordable place to call home – a place to live, and someday die, in dignity.

The USICH and others provide a number of wonderful resources to guide a community’s efforts to develop a Housing First program:

- National Alliance to End Homelessness – Housing First, [http://www.endhomelessness.org/pages/housing_first](http://www.endhomelessness.org/pages/housing_first)
- Community Solutions – 100,000 Homes Campaign, [http://100khomes.org/](http://100khomes.org/)

*Patricia Mullahy Fugere* is Executive Director of the Washington Legal Clinic for the Homeless.
Supportive housing proponents are fond of the phrase “meet people where they are.” One challenge that rural service providers face is how to do exactly that. Low population densities, linguistic and cultural isolation, lack of public transportation, and a shortage of service providers mean that rural homeless service providers have had to get creative in going to their clients. Expansions in coverage under the Affordable Care Act hold
Health services are usually a major need for supportive housing clients. Rural communities tend to have fewer health care providers, which can be a hurdle to proper care since supportive housing residents sometimes require frequent visits to manage chronic conditions, substance abuse disorders, or permanent disabilities. Several recent innovations make it easier to address the health care needs of people in supportive housing. Thanks to improvements in mobile technology and rural internet connectivity, mobile

promise, however, for funding the services that people need to remain stably housed, and rural areas are no exception.

Supportive housing is affordable rental housing with the option of intensive wrap-around case management and services designed to help people stabilize their lives despite complicated, interacting factors such as health issues, criminal justice backgrounds, lack of knowledge of healthy and productive behaviors, substance abuse disorders, and more. The services are tailored to the individuals’ needs and are available when they want to seek them out. Ideally, the barriers to housing are as low as possible, rather than providers deciding when clients are “ready” or keeping housing as a reward to be “earned.” Housing is the foundational anchor that makes it much more likely that services will be effective; services, in turn, help people maintain housing stability. Supportive housing has been effective at ending homelessness in all kinds of communities.

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health vans and tele-health programs can bring health care providers right to people’s doorsteps or even into their homes. In addition to reducing transportation burdens for low-income people, tele-health saves providers money because it allows for more effective use of specialists’ time and reduces transportation and office visit costs borne by health systems. The Center for Medicare and Medicaid Services sees telemedicine as a cost-effective alternative to face-to-face care and is encouraging states to pursue innovative payment methodologies that take advantage of tele-medicine technologies.

Veterans in North Louisiana have seen that distance does not have to be a barrier to the medical, mental health, and social service assistance they need. Volunteers of America North Louisiana promised to bring the VA to them. Through a grant from the VA’s Office of Rural Health, Volunteers of America North Louisiana operates a Rural Vets Mobile Clinic, which provides tele-health connectivity to VA providers. A registered nurse travels with the clinic to provide health assessments, patient education, and other medical services, while case managers provide in-home visits and intensive case management, including resource management and referrals for veterans. The case managers and nurse work together to offer a holistic approach to ensure each client’s physical, social, and mental needs are met. The mobile clinic’s coverage area includes 44 parishes and counties across Louisiana, Arkansas, and Texas encompassing approximately 31,400 square miles and reaching 154,000 veterans living in rural communities.

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Volunteers of America has expanded the mobile clinic idea to the other populations the organization serves in northern Louisiana, such as those with chronic mental illness. Volunteers of America already passed one major hurdle, becoming a Medicaid biller. States can reimburse equipment costs by incorporating them into the fee-for-service rates or covering them separately as administrative costs; however, they must be linked to approved Medicaid services. Since the mobile clinic can visit multiple affordable housing providers, residents can get health services without transportation challenges and each provider
does not need to go through the complicated process of becoming a Medicaid biller. Medicaid can cover and pay for many of the services in supportive housing, including case management, services coordination, and rehabilitative services. And with the state option to expand Medicaid eligibility under the Affordable Care Act, more people experiencing homelessness will be eligible for Medicaid, making it a viable option to cover services for many more people. Because it is a state-administered program, however, states have significant discretion over what services to cover under Medicaid. It is therefore critical that state Medicaid agencies be fully educated about the benefits and outcomes of supportive housing and the options they have to cover services in supportive housing. Usually, states that are interested in funding supportive housing services with Medicaid pursue one or more special authorities:

- **1115 Waivers** offer broad flexibility for states to explore innovations and demonstration projects in the delivery of care and to pay for services not typically covered by Medicaid, in order to test their impact on health outcomes and costs.

- **1915 Home and Community Based Services Waivers and State Plan Amendments** allow Medicaid beneficiaries with disabilities to receive services in their own home or community as an alternative to costly institutional care such as nursing homes, intermediate care facilities, and hospitals.

- **1915b Waivers** allow states to use managed care to administer and deliver services for the Medicaid program, usually in conjunction with one of the other waivers.

- **Health homes** are comprehensive systems of care coordination for Medicaid beneficiaries with chronic conditions. States can receive a 90 percent federal match for the first two years of the program, and receive higher payments for participants with more severe or complex health conditions.

- **Rehabilitative services options** focus on restoring, improving, and/or preserving a person’s individual and community functioning in ways that are consistent with goals related to recovery, resiliency, independent living, and enhanced self-sufficiency. All 50 states and the District of Columbia cover behavioral health services to some extent under the rehabilitation benefit.

- **Targeted Case Management options** can include tenancy supports, comprehensive assessment, periodic reassessment, service plans, referrals and linkages, and monitoring.
The waivers are available to states that have not adopted Medicaid expansion, and some state waivers provide alternative paths to coverage for people experiencing homelessness. For example, Louisiana has a managed care system and offers behavioral health services. Supportive housing providers may find it more difficult to build Medicaid into their service plans, however, in non-Medicaid expansion states where they cannot count on most residents being enrolled in Medicaid.

Expanded health care coverage for people experiencing homelessness, flexibility in coverage of supportive housing services, and technology facilitating the reach of health care into rural areas is a powerful combination for supportive housing.

The Corporation for Supportive Housing (CSH) works with communities all over the country, including those in rural areas, to make sure that they are taking advantage of the new opportunities created by the Affordable Care Act.

A stable stream of funding for health services eliminates a major challenge faced by supportive housing providers: how to pay for and then sustain services. Bringing consistent, high-quality health care and case management to scale, as Volunteers of America is doing with mobile health, is a way of ensuring that those in supportive housing in rural communities have the access to healthcare they need.

Rutherford House, a 16-unit apartment complex in Lancaster, Ohio, houses families that include at least one person with a disability and that previously experienced homelessness. Families pay 30 percent of their income for rent and are able to access voluntary services such as financial and job counseling and referrals for healthcare, as well as services for people with mental health and substance use conditions. Utilizing a housing first approach, this supportive housing program connects families with the appropriate level of support after they have been housed. The Corporation for Supportive Housing provided technical assistance and a $50,000 loan for pre-development support of this project. This is the second supportive housing development to open in Lancaster, both developed by the Lancaster-Fairfield Community Action Agency. Once used as the Fairfield County Children’s Home, this historic building was first developed in 1886 and was rehhabbed with a capital budget of $2.9 million, financed though the Ohio Housing Finance Agency.

Eva Wingren is a Policy Analyst with CSH and Brian Byrd is Regional Vice President of Volunteers of America North Louisiana.
What the Schools Know: Children and Youth Experiencing Homelessness

A national system of state and local homeless education coordinators works to ensure the growing numbers of homeless students have access to the resources they need.

By Patricia A. Popp
Children and youth are not typically the first images that come to mind when the public hears the word “homeless” – unless that public is the public schools. Teachers and administrators have a long history of supporting their students who lack stable housing. Among the most vulnerable families schools serve are those who lack a safe, stable place to call home, those experiencing homelessness. Homelessness has many causes (e.g., poverty, physical or mental illness, lack of affordable housing or a living wage, substance abuse, domestic violence). Whatever the cause, our schools must be ready to welcome all our children and, since 1987, they have had a special responsibility to serve those who are homeless.

The federal McKinney-Vento Act’s Education of Homeless Children and Youth Program was created to ensure that children and youth experiencing homelessness have access to and success in school. Since the 1990s this legislation has been included in the Elementary and Secondary Education Act, reauthorized in December 2015 as the Every Student Succeeds Act. McKinney-Vento requires that every state has an office of the state coordinator. The state coordinator provides technical assistance and compliance oversight to local school districts and works across state agencies to support the educational success of children and youth in homeless situations. As the state coordinator for Virginia, I have worked with urban, suburban, and rural school districts trying to meet the needs of their students. All three types of districts report that they serve students facing homelessness.

In addition to a state coordinator, every local school district must have a local homeless education liaison who is responsible for identifying students who are homeless, ensuring their access to appropriate school services, and coordinating with other agencies to support the families. In rural communities, liaisons share that identification is challenging due, in part, to the great pride that families have and their reluctance to be identified and ask for assistance. Ensuring confidentiality and

Every state has an office of the state coordinator.
To find the state coordinator for your state and to learn some basic statistics, visit the U.S. Department of Education–funded technical assistance center, the National Center for Homeless Education. State data can be found at http://center.serve.org/nche/states/state_resources.php.

Typically, the state coordinator is located at the state department of education. Virginia is one of just a few states where the program is outsourced and administered through a university. The office is called Project HOPE-Virginia and is located in the School of Education at The College of William and Mary.
building trusting relationships with families is key to breaking down such barriers. Furthermore, many rural communities lack the resources found in more populous areas, leaving liaisons with few options for referrals outside the school when identification does occur.

When students are homeless, they must be immediately enrolled in school to lessen the impact of poor attendance and lost instruction. To reduce the effect of multiple moves, they have the right to remain in the same school even if they move out of the area. This is based on a joint decision by the family and school agreeing that it is in the student’s best interest. When such a determination is made, the school district is responsible for providing the transportation.

Across the nation, schools are identifying homeless students in growing numbers. The students are in cities, suburbs, and yes, rural communities. Schools are legally mandated to use a broad definition of homeless emphasizing the lack of a fixed, regular, and adequate nighttime residence. Using the data schools report to the U.S. Department of Education (DoE), Figure 1 shows a 64 percent increase.

**FIGURE 1.**
Number of Students Reported as Experiencing Homelessness by Public Schools

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<tr>
<td>Students</td>
<td>794,617</td>
<td>956,914</td>
<td>939,903</td>
<td>1,065,794</td>
<td>1,168,794</td>
<td>1,258,182</td>
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Source: Data retrieved from the National Center for Homeless Education Federal Data Summaries available at http://center.serve.org/nche/pr/data_comp.php.
in the number of students identified as homeless between 2007–08 and 2013–14 (the most recent year available; data are not aggregated by rural, urban, or suburban geography).

To give the numbers context, it is important to note that DoE takes into account any child identified as homeless at any point in the school year and reports an annualized count. (This contrasts with the Point-in-Time count used by HUD. The differences in definition and counting methodology help explain the discrepancy that exists when DoE and HUD data are compared.)

Figure 2 shows the 2013–14 distribution across types of residences when the students were first identified – what educators call the student’s initial primary nighttime residence. Being doubled-up, tripled-up, quadrupled-up is the most common type of residency for most identified children in schools. Most families cannot be on the streets. Police reports and referrals to child protective services would result.

While we do find youth living in barns, tents, and the woods, in rural communities that lack access to shelters, families are even more likely to be sharing the housing of others who are willing to let them stay. When doubling up, families can be asked to leave at a moment’s notice – they have no legal right to stay, which makes the living arrangement especially tenuous. Living with another family is stressful. As conflicts arise, children and youth often are forced to move multiple times. With each move there are new expectations and routines to learn.

In addition, living in hotels and motels is becoming more common among the families schools serve. In communities that lack affordable housing, including multifamily rental units, short term
accommodations in a local motel may be the only option. Families scratch enough money together week-to-week to squeeze into hotel rooms. These types of homelessness are often invisible to the general public, but all too evident to schools as they see children moving in and out of their classrooms.

What happens when a student cannot go to the same place (fixed) every night (regular) to sleep in a safe and sufficient space (adequate)? What are the impacts of homelessness on their education? In young children, we know such instability and the stress hormones that result affect the neurobiology of the developing brain. Efficient neural pathways are not formed, increasing the likelihood that the child will be identified for special education. Once in school, students who are homeless frequently move multiple times in a given year. This can lead to multiple schools. No wonder these students are more likely than their housed peers to have attendance challenges, repeat grades, and be identified as students with developmental delays or learning and emotional disabilities. As students become older, high mobility can affect credit accrual, limit expectations for the future, and increase the likelihood of dropping out of school.

While educators can work to identify families and children who are homeless, get students enrolled, and try to keep them stable in school, those efforts will not be sufficient to mitigate all the stressors our youth face when homeless. Schools have a valuable perspective that needs to be included at the table as communities discuss the allocation of resources, including those related to housing and homelessness. When schools and other community agencies collaborate, they can create safe and stable environments for students to grow beyond the school house door. Around the country, there are examples of such teamwork; some are described in *Homelessness and Education Cross-System Collaboration: Applied Research Summary and Tools*, [http://center.serve.org/nche/pr/res-cross-system.php](http://center.serve.org/nche/pr/res-cross-system.php).
We certainly have more work to do. There is hope, however, that the efforts of educators are making a difference. For example, in Virginia, more and more students who experience homelessness in high school are graduating from high school on time. More students who have faced homeless are pursuing higher education. Education may not be the only solution, but it is a powerful force in protecting our youth and giving them the opportunity for a brighter future. As a 2013 high school graduate currently attending college said,

“Education is the most important thing to me, because I know this is the only way I can change my life to overcome the poverty I was raised in, to reach my dreams for the future.”
HAC RURAL HOUSING CONFERENCE – SAVE THE DATE!

Mark your calendars for the 2016 HAC Rural Housing Conference on Nov. 30 – Dec. 2, 2016 at the Renaissance DC Downtown Hotel.

For more information and updates on the conference, visit ruralhome.org/conference

HAC HELPS RAISE $1.1 MILLION FOR VETERANS HOUSING

HAC joined a coalition of 9 organizations in The Home Depot Foundation’s Celebration of Service campaign. Over a two month period ending on Veterans Day, The Home Depot Foundation donated $1 to a general pool of funding for every interaction with posts bearing the hashtag #ServiceSelfie on Facebook, Twitter, and Instagram. The funds will be used for safety and accessibility improvements to veterans housing across the United States.

For more information visit ruralhome.org/veterans

INFORMING STRATEGIES TO HELP VETERANS

Two new tools developed by the Housing Assistance Council with support from JPMorgan Chase & Co. are designed to put the power of discovering more about the veteran community in the hands of everyday Americans. Veterans Data Central is an extensive data utility that provides detailed information on the situation of veterans down to the level of every U.S. county. Supporting Veterans in Your State provides a set of fact sheets — one for each state, the District of Columbia, and the U.S. overall — which provide detailed demographic, economic and housing data on the veterans’ population.

Access these tools at ruralhome.org/veterans