

JUSTICE IN AGING

FIGHTING SENIOR POVERTY THROUGH LAW

ISSUE BRIEF

HUD Homeless Assistance Programs: A Basic Primer for Aging Advocates

AUGUST 2024

Jennifer Kye, Senior Attorney

INTRODUCTION

As homelessness rises among older adults, it is crucial for aging advocates to connect their clients to resources, such as permanent supportive housing (PSH), available through the U.S. Department of Housing and Urban Development (HUD)'s homeless assistance programs.* Aging advocates can also play a key role in ensuring that the homeless service system equitably meets the needs of older adults. Research shows that, compared to younger adults, older adults face more barriers in accessing HUD homeless interventions, including PSH. For older adults with marginalized identities, who have experienced structural discrimination throughout their lives, the barriers are even greater. These inequities prevent Black older adults in particular from connecting with resources that can help them gain housing. Among older adults, Black older adults are the least likely to exit homelessness through permanent housing solutions offered by the homelessness system.¹

This issue brief provides a basic overview of HUD homelessness programs and how advocates can refer clients for assistance. This brief also explains how advocates can participate in improving their community's homeless response system for older adults.

CONTINUUMS OF CARE

HUD's Continuum of Care (CoC) program aims to create and fund coordinated, community-wide homelessness response systems across the country. CoCs exist in every state and are local, regional, or statewide groups that work to reduce homelessness in their communities and coordinate homeless assistance projects that provide housing and supportive services. CoCs are comprised of various parties, such as service providers and advocacy organizations, and they are led by a CoC Board and a lead agency. Among other activities,

**In discussing HUD's homeless assistance programs, this brief is broadly referring to HUD's Emergency Solutions Grants (ESG) and Continuum of Care (CoC) programs, which are HUD's primary ways of funding a variety of homeless assistance activities and interventions. This brief does not discuss other HUD programs, like the HUD-VASH program for veterans experiencing homelessness. Additionally, some states have state or local homeless assistance programs that are not funded by HUD and are therefore beyond the scope of this brief.*

CoCs identify needs in the community, conduct annual or biennial Point-in-Time (PIT) Counts of people experiencing homelessness, help determine which local projects receive HUD/CoC funding, and develop processes for referring people to various projects.² CoCs also often engage in advocacy around housing and homelessness issues.

HUD-FUNDED HOMELESS ASSISTANCE INTERVENTIONS

The main homeless assistance interventions funded by HUD include emergency shelter, transitional housing, rapid-rehousing, and permanent supportive housing.

- **Emergency Shelter:** Emergency shelters provide temporary housing for people experiencing homelessness.³
- **Transitional Housing:** Transitional housing provides temporary housing with supportive services for up to two years and is meant to provide interim support to help people transition from emergency shelters into permanent housing.⁴
- **Rapid Re-housing (RRH):** RRH aims to quickly solve immediate homelessness by providing a tailored combination of short- or medium-term tenant-based rental assistance and services, including case management, to help people secure permanent housing as soon as possible.⁵
- **Permanent Supportive Housing (PSH):** PSH provides indefinite rental assistance with voluntary supportive services for people experiencing homelessness who also have disabilities. PSH programs are often designed to address the complex needs of people who are at risk of or experiencing chronic homelessness and need more support to achieve housing stability. These supports, which aim to promote housing retention and independent living, may include services such as case management and behavioral health treatment.⁶

PERMANENT SUPPORTIVE HOUSING IS CRITICAL FOR PEOPLE WITH DISABILITIES

PSH is targeted to households with the most intensive housing and service needs. As its name suggests, PSH is unique among HUD homeless interventions in that it offers rental assistance and supports that are not time-limited so long as people remain eligible for them. PSH projects can be single-site (located in a single building dedicated to PSH or with units set aside for PSH) or scattered-site (with PSH units located among several buildings throughout the community).⁷ Research has consistently found that PSH is effective in reducing homelessness for people with disabilities with higher needs.⁸

IMPORTANCE OF HOUSING FIRST PRINCIPLES

HUD prioritizes funding homeless assistance projects, including those providing RRH and PSH, that tend to adopt a Housing First model.⁹ “Housing First” is a proven model of addressing homelessness that expedites access to permanent housing with voluntary, person-centered wraparound services. In contrast to “Treatment First” models that require clients to complete various steps to show they are “housing ready,” Housing First programs have minimal barriers to entry and do not impose preconditions, such as sobriety and work requirements, for accessing permanent housing. This approach is based on evidence that, once housed, people are better able to engage in supportive services to improve their health and achieve housing stability.¹⁰

HOUSING FIRST REMOVES TENANT SCREENING BARRIERS

Some of the older adults who can benefit the most from Housing First are those who would otherwise be excluded from rental housing due to typical tenant screening methods. PSH and other programs with a Housing First approach have low-barrier admissions policies and generally do not screen people out because of issues such as poor credit history, lack of income, past evictions, or criminal records (with limited exceptions).¹¹

ELIGIBILITY FOR HUD HOMELESS ASSISTANCE PROGRAMS

To be eligible for HUD homeless assistance, people must generally at least meet HUD's definitions of "homeless" or "at risk of homelessness." These definitions include not only people without shelter, but also certain people who, for example, will lose their housing within 14 days and neither have a subsequent residence nor the resources to obtain other permanent housing. Other "homeless" individuals include some people exiting institutions (prisons, nursing homes, etc.) after temporary stays of 90 days or less.¹²

HUD also encourages CoCs to prioritize serving people who are "chronically homeless" through PSH.¹³ Individuals who qualify as chronically homeless are generally people with disabilities who have been continuously homeless for at least a year or have had repeated episodes of homelessness amounting to a year.¹⁴ Recent federal reports estimate that older adults age 55 and over comprise more than one-third of adults with chronic patterns of homelessness.¹⁵

Even though general awareness of HUD's eligibility rules can be helpful, the rules can be complicated, and advocates should avoid screening clients out themselves. **Advocates should refer to coordinated entry (described below) any older adult who may benefit from homeless assistance.**

REFERRING CLIENTS TO COORDINATED ENTRY

Advocates with clients who are at risk of or experiencing homelessness should [contact their local CoC](#) to refer clients to the CoC's coordinated entry process. Each CoC operates a coordinated entry system that conducts intake and assesses people's need and preferences for housing and supports. It aims to match households with appropriate homeless interventions and prioritizes them for referral to available resources. The coordinated entry process differs between CoCs – some CoCs have a centralized point of access through a hotline or physical site, while others have various sites of access spread throughout a geographic area and at different provider locations, such as at shelters or other community-based organizations. CoCs also sometimes offer intake through mobile outreach for people who may have difficulty reaching other points of access. After going through coordinated entry, clients are placed on a CoC's priority list that prioritizes people with the highest needs for referral to various homeless assistance projects. (However, CoCs are not required to prioritize access to emergency shelters. CoCs must ensure people can access emergency services even outside of the coordinated entry process' operating hours.)¹⁶ The wait time for referrals will vary, although the unfortunate reality is that in many areas, the need for homeless assistance far exceeds availability. Nevertheless, clients should periodically keep in touch with coordinated entry staff to update their contact information, report significant changes, and ensure they remain on a priority list.

COORDINATED ENTRY IS IMPORTANT FOR CONNECTING OLDER ADULTS WITH HOUSING

Coordinated entry is important because it is generally the only way to access many HUD-funded homeless assistance projects, including many HUD-funded PSH projects.¹⁷ Advocates should also avoid assuming that clients who are staying in shelters have been connected to coordinated entry. Clients may be staying in shelters or other temporary housing projects that do not receive HUD funding and do not participate in the coordinated entry system. People living in shelters offering temporary living arrangements still meet HUD’s definition of “homeless,” and they may be eligible for referral to HUD-funded RRH and PSH via coordinated entry.¹⁸

Sometimes coordinated entry also refers people to Public Housing Authorities (PHAs) for certain vouchers or other housing assistance designated for people at risk of or experiencing homelessness.¹⁹ (In general, however, coordinated entry does not place people on waiting lists for HUD’s subsidized housing programs like Housing Choice (“Section 8”) Vouchers, Section 202, or public housing – clients should [apply for these programs](#) separately.)

Coordinated entry is considered the “front door” to HUD’s homeless resources. While not everyone who goes through coordinated entry will find housing through this process, it may increase potential housing options for older adults at risk of or experiencing homelessness – particularly those with more intensive needs.

HOW AGING ADVOCATES CAN PARTICIPATE IN CONTINUUMS OF CARE

Aging advocates who want to help address homelessness should consider becoming involved with [their local CoC](#). CoC membership and meetings are usually open to any member of the public with an interest in homelessness issues, and stakeholders should include representatives of subpopulations of people experiencing homelessness. Additionally, CoCs have a board that must be representative of relevant organizations, which may include advocacy programs, social service providers, faith-based organizations, and more.²⁰ However, many CoCs and their boards lack members who represent older adults or who are from the aging service network. This lack of representation may lead to CoCs overlooking the needs of older adults.

By participating in a CoC, aging advocates will be able to influence a CoC’s strategic planning and highlight the housing and service needs of older adults at risk of or experiencing homelessness. HUD requires CoCs to undertake an annual planning process through which CoCs analyze unmet needs in their communities and set priorities for meeting service gaps.²¹ Advocates may also be able to help shape a CoC’s coordinated entry process to ensure that older adults have equitable access to the homeless service system. For example, advocates may be able to offer input on the assessment tool and criteria their CoCs use to prioritize households to ensure they capture older adults’ needs. Older adults who are unhoused face more hurdles in regaining housing due to age-related challenges, such as physical and cognitive disabilities and limited opportunities to increase income. Yet research suggests that current assessment tools may not be optimized for older adults and instead serve as a potential barrier to receiving homeless assistance.²² Indeed, one study found that the likelihood of PSH placement decreases with age among older adults age 55 and over. Further, older adults of color, particularly Black older adults, receive a disproportionately smaller share of PSH interventions compared to older adults who are white.²³

Advocates can also become part of a CoC’s referral network. HUD guidance specifically directs CoCs to include “mainstream service providers”²⁴ (which could include aging advocates/service providers) in various activities, including identifying people experiencing homelessness and facilitating referrals between coordinated entry and community-based resources.²⁵ Moreover, aging service providers may even want to consider providing housing and/or services themselves as part of supportive housing projects, as there is a growing need for projects designed for older adults.²⁶ Many PSH providers currently struggle to serve older adults, who often need more supports (such as long-term care) than younger PSH tenants. Engaging with a CoC will allow aging advocates to better understand opportunities for collaboration and how they can best contribute to their community’s homeless response system.

CONCLUSION

HUD homeless interventions, especially PSH, are a critical resource for older adults at risk of or experiencing homelessness. Advocates for older adults should seek out more information about their local CoC and how to refer clients to coordinated entry, which is generally the only way to access many HUD-funded homeless assistance projects offering these interventions and housing opportunities. Advocates should also consider joining and partnering with their CoCs. As homelessness systems increasingly serve older adults, the need for aging advocates’ participation will become more vital.

ENDNOTES

- 1 National Alliance to End Homelessness, “Connecting Older Adults to Housing: Examining Disparities” (January 2023), available at https://endhomelessness.org/wp-content/uploads/2023/01/1-31-2023_OlderAdultHousingDisparity.pdf.
- 2 See generally U.S. Department of Housing and Urban Development, “Continuum of Care 101” (June 2009), available at <https://files.hudexchange.info/resources/documents/CoC101.pdf>.
- 3 HUD Exchange, Emergency Shelter, available at <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/esg-program-components/emergency-shelter/>.
- 4 HUD Exchange, Transitional Housing (TH), available at <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-program-components/transitional-housing/>.
- 5 HUD Exchange, Rapid Re-Housing (RRH), available at <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-program-components/permanent-housing/rapid-re-housing/>; HUD Exchange, “Rapid Re-Housing Brief” (July 2014), available at <https://www.hudexchange.info/resource/3891/rapid-re-housing-brief/>.
- 6 HUD Exchange, Permanent Supportive Housing (PSH), available at <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-program-components/permanent-housing/permanent-supportive-housing/>; HUD, Notice CPD-16-11, Notice on Prioritizing Persons Experiencing Chronic Homelessness and other Vulnerable Homeless Persons in Permanent Supportive Housing (July 2016), available at <https://www.hud.gov/sites/documents/16-11CPDN.PDF>.
- 7 See HUD Exchange, “Homeless System Response: Long-Term Financing of Permanent Supportive Housing Projects” (July 2021), available at <https://www.hudexchange.info/resource/6341/covid19-homeless-system-response-longterm-financing-of-permanent-supportive-housing-projects/>.
- 8 See, e.g., Raven MC, Niedzwiecki MJ, Kushel M., “A Randomized Trial of Permanent Supportive Housing for Chronically Homeless Persons with High Use of Publicly Funded Services” (2020), available at <https://onlinelibrary.wiley.com/doi/full/10.1111/1475-6773.13553>; Peng Y, Hahn RA, et al., “Permanent Supportive Housing With Housing First to Reduce Homelessness and Promote Health Among Homeless Populations With Disability: A Community Guide Systematic Review” (2020), available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8513528/>.
- 9 HUD Office of Policy Development and Research, “Housing First Works” (2023), available at <https://www.huduser.gov/portal/periodicals/em/spring-summer-23/highlight1.html>.
- 10 See generally HUD Exchange, “Housing First in Permanent Supportive Housing” (July 2014), available at <https://www.hudexchange.info/resource/3892/housing-first-in-permanent-supportive-housing-brief/>.
- 11 HUD does not require ESG- and CoC-funded homeless assistance projects to disqualify households based on criminal history, and the agency strongly discourages projects from excluding people on the basis of criminal records. However, providers may be subject to other federal, state, or local laws that require them to screen out people with certain records, such as people on sex offender registries who may be prohibited from living in certain areas. HUD Exchange, Fair Housing and Equal Access – Criminal History, available at <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-esg-additional-requirements/fair-housing-and-equal-access/criminal-history/>; see also HUD Exchange, “Implementing Housing First Practices for People Involved with the Criminal Justice System” (April 2024), available at <https://files.hudexchange.info/resources/documents/CJS-Toolkit-Implementing-Housing-First-Practices-for-People-Involved-with-the-CJS.pdf>.
- 12 24 CFR § 91.5; 24 CFR § 578.3.
- 13 HUD, Notice CPD-16-11, Notice on Prioritizing Persons Experiencing Chronic Homelessness and other Vulnerable Homeless Persons in Permanent Supportive Housing (July 2016), available at <https://www.hud.gov/sites/documents/16-11CPDN.PDF>.
- 14 24 CFR § 91.5; 24 CFR § 578.3.
- 15 HUD, “2021 Annual Homelessness Assessment Report (AHAR) to Congress, Part 2: Estimates of Homelessness in the United States” (July 2023), available at <https://www.huduser.gov/portal/sites/default/files/pdf/2021-AHAR-Part-2.pdf>.
- 16 HUD, “Coordinated Entry Core Elements” (June 2017), available at <https://www.hudexchange.info/resource/5340/coordinated-entry-core-elements/>; HUD Exchange, Coordinated Entry Policy Brief (February 2015), available at <https://www.hudexchange.info/resource/4427/coordinated-entry-policy-brief/>.
- 17 HUD requires CoC- and ESG-funded homeless assistance projects to accept referrals from the coordinated entry process only.

- (Exceptions exist, however, for providers serving people fleeing domestic violence, trafficking, and other similar situations.) Other projects may choose to only accept referrals from coordinated entry or opt to also receive referrals outside this process. HUD, “Coordinated Entry Core Elements” (June 2017), available at <https://www.hudexchange.info/resource/5340/coordinated-entry-core-elements/>; HUD, Coordinated Entry Policy Brief, (July 2015), available at <https://www.hudexchange.info/resource/4427/coordinated-entry-policy-brief/>; HUD, CPD-17-01, Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System (January 2017), available at <https://www.hud.gov/sites/documents/17-01CPDN.PDF>.
- 18 24 CFR § 91.5; 24 CFR § 578.3.
 - 19 See, e.g., HUD Exchange, Special Purpose Vouchers Fact Sheet (April 2023), available at <https://files.hudexchange.info/course-content/special-purpose-vouchers-working-collaboratively-to-achieve-community-goals-to-end-homelessness/Special-Purpose-Vouchers-Fact-Sheet.pdf>.
 - 20 24 CFR § 578.
 - 21 HUD Exchange, “Guide to Continuum of Care Planning and Implementation” (January 1999), available at <https://www.hudexchange.info/resource/826/continuum-of-care-planning-and-implementation-guide-to/>.
 - 22 Serving Seniors, “Senior Homelessness: A Needs Assessment” (September 2021), available at <https://servingseniors.org/news-events/senior-homelessness-a-needs-assessment.html>.
 - 23 National Alliance to End Homelessness, *supra* note 1.
 - 24 “Mainstream” services refer to programs that are not specifically targeted to people experiencing homelessness. See United States Interagency Council on Homelessness, “Enhancing Coordinated Entry through Partnerships with Mainstream Resources and Programs” (February 2017), available at https://cohho.org/wp-content/uploads/2016/09/USICH-CE-Brief_Partnerships.pdf.
 - 25 HUD, CPD-17-01, Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System (January 2017), available at <https://www.hud.gov/sites/documents/17-01CPDN.PDF>.
 - 26 For more information about establishing or collaborating with PSH projects, see technical assistance guides from the [Administration for Community Living’s Housing and Services Resource Center](#), the [Corporation for Supportive Housing](#), and [Urban Institute](#).