# National Alliance to END HOMELESSNESS

# INTERIM STRATEGIES for RESPONDING TO UNSHELTERED HOMELESSNESS

# TOPLINE MESSAGES

- Permanent housing strategies remain both an immediate and the sole long-term solution to homelessness. Whenever possible, people should be connected directly to housing from wherever they are currently residing.
- Interim strategies (i.e., temporary solutions offered as communities scale permanent housing options and accompanying services) should be grounded in evidence-based practices, such as low-barrier and housing-focused approaches to providing immediate access to safer places to sleep while service and health needs are addressed.
- No interim strategy should be coercive. A choice to forgo an offer of temporary, safe accommodation should not come at the risk of citations or arrests, nor should it jeopardize access to long-term housing and services.

# BACKGROUND: THE RISE OF UNSHELTERED HOMELESSNESS

In recent years, communities across the United States—including urban, suburban, and rural places—have seen a rapid and alarming rise in unsheltered homelessness, with more people sleeping in public spaces. This is the result of a nationwide lack of investment in affordable housing, stagnant incomes, an inadequate healthcare system, a criminal legal system that punishes too many and limits opportunity upon release, and a long history of racism and other forms of discrimination baked into our systems and society. These challenges—which have long manifested in visible homelessness in large, urban coastal communities—are increasing in every region of the country and in every type of community.

These sharp increases in the number of people sleeping unsheltered in public spaces brings greater visibility and heightened attention from community members and lawmakers. This increased attention can bring pressure on local and state lawmakers to focus on this critical issue. While this pressure can create momentum and opportunity to advance evidence-based solutions to address homelessness, it can also lead to local and state lawmakers seeking out strategies that can swiftly make homelessness less visible such as evicting encampments and passing enforcing laws and ordinances that fine, cite, arrest, and jail people experiencing homelessness. But <u>these efforts are short-sighted</u>, leaving the most vulnerable households at even higher risk and often only making homelessness worse.

# MEETING BOTH SHORT-TERM AND LONG-TERM NEEDS

The only permanent solution to ending homelessness is housing that is affordable, and which is paired with accessible, culturally appropriate, voluntary healthcare and supportive services. Communities can consider **a range of options** to increase housing opportunities, promote public and community health, and advance racial equity. However, the severe shortage of affordable housing, inadequate safety net, and other systemic challenges that result in homelessness are problems that cannot be solved overnight: the tools to create deeply affordable housing quickly are rarely at the disposal of local leaders.

Recognizing that these challenges cannot be solved quickly and unilaterally, the Alliance acknowledges that communities typically cannot access the full scope of housing and resources needed to address homelessness in their area. Permanent housing is the ultimate solution to homelessness, but a community's lack of affordable housing and shelter leaves a gap in how they can most effectively serve people experiencing unsheltered homeless-

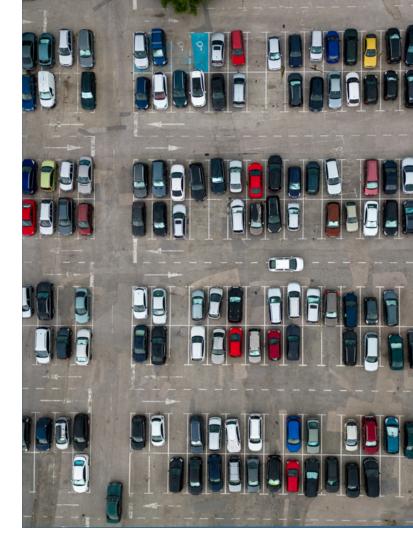
ness in a dignified manner. While communities strive towards providing permanent housing for all who need it, they are still faced with serving the existing unsheltered population, prompting the question: "What do we do in the meantime?"

The strategies in this document represent explanation, not endorsement, of how communities might respond in these situations. Many may create temporary structures and spaces to offer temporary programming and spaces that can be used "in-the-meantime" to be responsive to public pressure, while also prioritizing the safety, autonomy, and health of people experiencing unsheltered homelessness as permanent housing is being secured.



Examples of these structures and spaces to create safe and temporary places for people to reside include:

- <u>Non-congregate shelter</u> that temporarily leases motel/hotel space or repurposed space from other non-residential buildings;
- <u>Safe Parking</u> sites which provide a safe, fixed location for people to park vehicles overnight in locally sanctioned spaces;
- <u>Tiny Homes</u> which provide nonpermanent accommodation in small, private units;
- Large tents or tent-like structures which can be erected quickly to provide a covered sleeping area; or
- <u>Self-governed supported encamp-</u> <u>ments</u> which provide residents with the resources and infrastructure, such as mobile bathrooms, to stabilize in place.



Investing in any of these interim strategies should only happen in conjunction with continued efforts to expand permanent housing options and increase access to healthcare and services that people may want and need. Interim strategies do not solve homelessness but instead are intended to create temporary alternative options where people can safely choose to reside while on their path back to housing. This document seeks to provide guidance on universal standards and criteria for operations, design, and implementation that should always be accounted for when adopting and investing in any of these strategies.

The Alliance **does not endorse or in any way support** approaches that are not human-centered and which restrict individual choice and autonomy, such as models for:

**Sanctioned Encampments.** A specified location that is established as the only place where people can safely reside in tents (or other temporary structures) without the threat of law enforcement action. In essence, people are forced to go to these locations—which also are high-barrier—or otherwise, face arrest, fees/fines, or other punitive actions.

**Transformation Centers.** A model which focuses on rewarding 'positive' behaviors and giving out consequences for 'negative' behaviors (e.g., by creating varying levels of comfort or privilege within a facility and punishing bad behavior by demoting participants to a less comfortable or safe sleeping area).

# **CONSIDERATIONS FOR INTERIM STRATEGIES**

Although the Alliance does not endorse any of the specific types of strategies discussed in this guidance, it supports the below overarching principles and standards which can guide community-decision-making.

#### **Fundamental System Principles**

The following principles should be at the forefront of any planning discussions, and should be considered before implementing any temporary strategy on unsheltered homelessness:

#### Treat Strategies as Temporary

- "Interim strategies" identified in this document should be designed with a clear understanding that they are intended to create temporary capacity within the community. These strategies should aim to create safe locations for people experiencing unsheltered homelessness while permanent solutions are expanded.
- Communities should include a sunset plan in the planning and design process on the front end so that the community recognizes this site as temporary, but that ultimately the need for such sites will decrease as housing opportunities are increased.

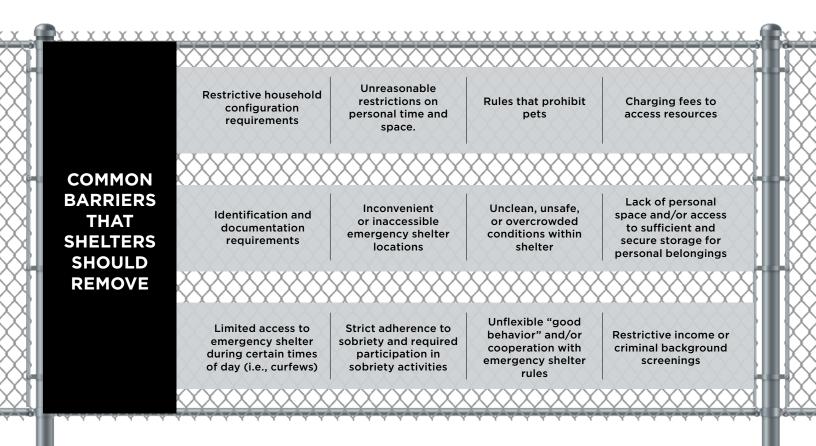
#### Take Inventory of Current Resources

Before considering investment in any of the strategies discussed herein, communities should first account for existing resources including funding, workforce capacity, land, and property. Communities should assess whether current resources are being maximized and should use homeless system data to determine what system capacity is actually needed. In resource-constrained environments, there are always tradeoffs. However, investing these types of interim strategies should only be considered when the community has maximized other resources and is also incorporating other housing-focused tactics throughout their system, including:

- Integrating housing problem-solving into every part of the homelessness response system, including the coordinated entry process, to help those with fewer barriers and less acute health needs avoid homelessness altogether or exit homelessness as quickly as possible with only light touch assistance;
- Implementing <u>direct-to-housing efforts</u> whenever possible to move people who are in unsheltered locations such as encampments directly into housing, including through investing in housing-focused street outreach; and
- <u>Removing barriers</u> from existing emergency shelters that may otherwise be keeping people from accessing resources.

Communities should carefully evaluate emergency shelter rules and remove rules that make it difficult to access or remain in emergency shelter.

Communities should survey shelter staff and residents, as well as people experiencing unsheltered homelessness, to better understand the formal and informal rules and practices that could be affecting decisions about access to emergency shelter and services.



#### Consult with Partners Inclusively and Strategically

- Directly involve people with current and prior experience of unsheltered homelessness in the planning and design process of these interim solutions. The <u>inclusion of people</u> <u>with lived experience</u> helps to ensure that these solutions actually meet the needs and preferences of the community for which they are intended.
- To the extent that the community seeks to hire a consultant to assist in the planning and design process, there should be a competitive process to ensure that there is no financial gain related to any particular type of model, material, product, etc.

#### Integrate Efforts within the Continuum of Care Structure

- Participation in the <u>Continuum of Care</u> (CoC)'s coordinated entry system should be expected so that, at a minimum, anyone that is supported through this type of programming should have access to the CoC's coordinated entry process for assessment and referral to any resources they may be eligible for within the CoC, particularly for permanent housing. CoCs should ensure their coordinated entry policies are up to date and clearly define how these temporary strategies will be incorporated.
- Participation in the CoC's <u>Homeless Management Information System</u> (HMIS) and following of local HMIS policies regarding data quality and privacy to ensure greater levels of care coordination throughout the CoC.

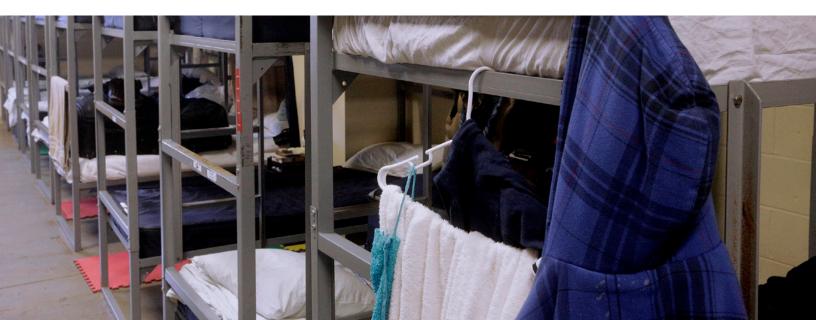
#### Design Thoughtfully

Ensure that residents will be able to maintain community connections, employment, access to services, and more. Utilize the Alliance's **Five Keys to Effective Emergency Shelter** as a starting point for developing an implementation plan, as the same overarching principles should apply across temporary interventions.

### **Universal Design Principles**

#### Considerations for Space and Safety

- Accessibility. Must be accessible to all those experiencing unsheltered homelessness, regardless of disability, gender, or language. For example, ramps and other assistive devices must be available to accommodate a broad range of needs throughout the physical space. Staff and/or assistive devices should be available to ensure that people who don't speak English as a first language can access services.
- Security and Safety. Provide a reasonable expectation of safety, including for those people fleeing abuse, human trafficking, and stalking. <u>Safety practices</u> extend from operational and administration rules to physical spaces, staff training, and trust building. Safety considerations should also include relief from environmental threats such as extreme heat, excessive rain, or flooding.
- **Personal Space.** Offer sufficient space to prevent overcrowding, and infringement on personal space (to allow for privacy), as well as to prevent the spread of communicable diseases. In sites such as tiny homes or non-congregate shelter, sharing space should only be offered as a choice and not a requirement.
- Adequate and Secure Storage. Offer secure storage spaces for personal belongings and property. Residents must have unlimited access to their belongings. If need be, communities may provide storage just outside the site for critical belongings that are not allowed on-site (e.g., a resident who is employed as a security guard may require storage for a licensed weapon). To ensure the safety of people fleeing domestic violence, stalking, and harassment, each person should also have a deidentification code that connects the items stored to the owner.
- **Pets.** Maintain a low-barrier orientation and allow individuals to <u>bring and keep their</u> <u>pets on site</u>. Pets provide an irreplaceable form of companionship and sites that fail to support people's pets are unlikely to be an attractive (or even viable) interim option for unsheltered individuals. If necessary, sites should provide options for kenneling pets, offering veterinary care drop-ins, etc.
- **Households.** Must be able to accommodate <u>households</u> as they present regardless of familial status, marriage, and/or the gender identities of household members.



#### Considerations for Health and Wellness

- **Sanitation.** Communities must maintain sanitation through providing supplies and equipment for cleaning personal and communal spaces, as well as for proper waste disposal. Communities must also ensure regular garbage removal from site and regular cleaning and sanitizing of restroom facilities.
- **Bathroom Access.** Must ensure 24/7 access to clean restrooms and showers, situated closely to participants and which maintain privacy and adequately meet the needs of all, particularly people living with disabilities.
- Water and Food Supply. Must ensure access to clean water and common eating areas. Protocols need to be in place to ensure food and water is free from contamination.
- **Proper Medication Storage.** When necessitated, communities must ensure access to refrigeration for required medication that is needed for a resident or their pet.
- Overdose Prevention. All staff, residents, and volunteers should be trained in overdose prevention strategies, including the use of Naloxone (also known as Narcan). Naloxone should be distributed to participants. Ensure access to sharps containers to safely discard needles. Staff and residents should conduct routine wellness checks (not inspections) to quickly identify and respond to potential overdoses.
- Thermal Environment and Air Quality. In indoor settings, every space and unit should be equipped with cooling or heating elements to ensure the comfort and safety of participants. In open-air facilities, alternative arrangements must be made available during extreme weather, such as heavy rain or extreme heat, as well as during emergencies such as fires, to protect the safety and health of participants.

#### Considerations for Program Design Elements

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- Immediate and Low Barrier Access. Must ensure immediate and easy optional participation by removing barriers to entry and access to resources, such as requiring identification or documenting need. Any programming should be culturally appropriate\* and accessible to those whose first language is not English. Communities should limit requirements related to sobriety or treatment as a pre-condition to program entry, as these barriers are shown to impede progress and prolong time to get housed. It is reasonable, however, to require residents to agree to respect the personal space and property of other residents.
  - **Housing-Focused Strategies.** The goal for every resident is permanent housing. Whenever possible, people should be connected directly to housing from wherever they are currently residing. However, when housing is not immediately available, these accommodations may be offered as a temporary place for people to choose to reside while pursuing permanent housing.
- \* Culturally Appropriate Programming and **Policy** respond to the cultural and linguistic needs of the community being served as defined by the community and demonstrated through needs assessment activities, capacity development efforts, policy, strategy and prevention practice implementation, program implementation, evaluation, guality improvement and sustainability activities.

- **Staffing and Case Management.** Outreach and program staff, including housing navigators and peer supports, should routinely engage residents to address a broad range of needs. To the maximum extent possible, some form of onsite staff support should be available 24/7. Communities should offer connections to community-based health-care, treatment, and other voluntary supportive services and provide onsite whenever possible. At a minimum, every resident should be engaged with case management staff to work on a housing plan that will allow them to access housing options as quickly as possible, depending upon housing availability and personal autonomy and choice.
- **Substance Use Considerations.** People with substance use disorders have different needs at different times. While some people may be in active use, necessitating the availability of harm reduction interventions, others may be in recovery, choosing sobriety or abstinence. Understanding and respecting individual journeys is important to ensure that people are supported where they are and given access to the resources they need when they need them. Onsite substance use treatment services can help provide initial support. Permanent housing remains the foundation from which people can most stably access and benefit from these types of services.
- Data to Measure Performance. Collecting data is important to know who is using specific services, their effectiveness, and if any resources need to be shifted and allocated towards different needs. At a minimum, track outcomes by measuring data on percentage of exits to housing, average length of stay, and returns to homelessness to evaluate the effectiveness of the temporary structures and improve outcomes.
- Strategies for Subpopulations. Consider the unique needs and experiences of different subpopulations accessing temporary accommodation in your community (i.e., older adults, LGBTQ people, veterans, people whose first language is not English, etc.). For example, onsite behavioral health supports can be critical for people living with a severe mental illness, but certain interim strategies may not be appropriate settings to meet these needs. Furthermore, implementing policies such as de-identifying stored personal possessions through anonymous codes can help maintain the safety of people fleeing domestic violence, trafficking, or stalking.
- **Geographically Accessible Sites.** Should be located in the most geographically access sible and strategic areas as possible, where participants can readily access transportation options and services, as well as necessities such as grocery stores or health care clinics/hospitals. In rural communities where options may be more limited, planning should explicitly include how the programming will ensure participants have access to transportation and community resources. Avoid locations which may expose and threaten participants to environmental hazards, including but not limited to air pollution, toxic waste, and/or heat islands.

# CONCLUSION

When considering investing in one of the interim strategies discussed in this guidance, it is important to remember that these strategies should never be viewed as a permanent solution to reducing homelessness in the community. In fact, people residing in these sites are still considered, by definition, to be experiencing homelessness for the duration of their stay. These strategies are not a substitute for moving unsheltered persons directly into permanent housing and should only be considered as a way to create healthier and safer spaces for people to reside temporarily until their permanent housing is secured.