

October 13, 2026

Regulations Division
Office of General Counsel
Department of Housing and Urban Development
451 7th Street, SW
Washington, DC 20410

Re: Docket No. HUD-2026-1453, FR-6628-N-01 Notice of Research Justifying Additional Incentives for Certain Activities to Reduce Homelessness

The National Alliance to End Homelessness (Alliance) submits these comments on the Department of Housing and Urban Development's (HUD) *Notice of Research Justifying Additional Incentives for Certain Activities to Reduce Homelessness* (Notice). The Alliance is a nonpartisan, nonprofit membership organization dedicated to preventing and ending homelessness, working with Continuums of Care (CoCs), service providers, people with lived experience, and state and local partners nationwide. For more than 40 years, the Alliance has been at the forefront of homelessness policy, research, and practice. **The Alliance's leaders and staff bring decades of experience both administering HUD's homelessness programs within government and working to implement these programs within CoCs.**

On a single night in 2025, at least 745,652 people experienced homelessness in the United States. While this represents a 3.3 percent decrease between 2024 and 2025, there are still far too many people without a home. While HUD inaccurately attributes the extent of homelessness that we see today to federal strategies adopted more than a decade ago, the notice overlooks the actual drivers behind the crisis: a nationwide housing shortage¹, stagnant incomes, and fractured services that result in an estimated average of 17,500 people a week entering into homelessness systems for the first time. And as the number of people becoming homeless each year has continued to rise, federal investments have not kept up with need. In 2022, homeless response systems only had the capacity to offer permanent housing to an estimated 16 percent of people in their shelters.

Through this Notice, HUD seeks to establish additional activities for which it can provide bonuses and incentives through the CoC Program competition. To do so, according to section 428(d)(2)(C) of the McKinney-Vento Homeless Assistance Act, HUD must demonstrate that its determination is based on evidence and after a notice and public comment period that establishes such activities as "proven to be effective at

¹ There is a nationwide shortage of 7.2 million affordable and available rental homes for 11 million extremely low-income renter households. [The GAP | National Low Income Housing Coalition](#)

reducing homelessness generally, reducing homelessness for a specific subpopulation, or achieving homeless prevention and independent living goals as set forth in section 11386a(b)(1)(F) of this title.²

The Alliance objects to this Notice for the following reasons:

- **Fails to Demonstrate that Proposed Activities are Proven Effective in Ending Homelessness.** Throughout the notice, HUD repeatedly mischaracterizes evidence, ignores key literature, omits high-quality studies, and provides a false account of events. The burden in this process is on HUD to show this activity meets the statutory standard. The evidence and research presented, however, do not support their claims.
- **Mistakes Unmet Need for Failed Strategy:** HUD attributes rising homelessness to existing homelessness policy and provides an inaccurate accounting for shifts made more than a decade ago on what HUD prioritized for CoC Program funding.
- **Lack of Rigor and Intentionality.** HUD published this Notice with little supporting detail or evidence and gave the public only 30 days to respond, a time frame that is far too short for changes of this scale. That HUD reissued the FY2026 CoC Program NOFO with an expedited timeline while the notice and comment period was open signals it does not intend to seriously consider the input it receives. Finally, the notice omits basic details on how HUD intends to implement incentives, denying the public a meaningful opportunity to respond to these profound changes.

For these reasons, the Alliance urges HUD to withdraw this notice and undergo an intentional and comprehensive process prior to designating new activities for bonuses and incentives.

Fails to Demonstrate that Proposed Activities are Proven Effective at Reducing Homelessness

Transitional Housing with Supportive Services

The Alliance opposes the designation of “transitional housing with supportive services” as a proven strategy for the purpose of providing bonuses and incentives. The burden is on HUD to show this activity meets the statutory standard, but the evidence and research do not support HUD’s claims.

- HUD’s [Family Options Study](#) showed that at 37 months, a long-term subsidy resulted in significant reductions in subsequent homelessness, psychological distress, intimate partner violence, and food insecurity. Meanwhile, families offered project-based transitional housing had outcomes similar to usual care at a higher cost to both a longer-term subsidy and Rapid Re-Housing (RRH). HUD’s assertion in the notice that the Family Options Study supports its proposed designation of transitional housing for incentives is false.
- The notice omits research that shows that transitional housing [does not improve residential stability](#) and is the [most expensive](#) model for individuals.
- Transitional Housing is an eligible component in HUD’s Youth Homelessness Demonstration Program (YHDP). The research that HUD points to on the effectiveness of transitional housing for

² Section 427(b)(1)(F) specifically applies to CoCs that have been approved to serve households defined as homeless under other federal statutes, or Category 3 of the homeless definition, which no CoCs have been approved for as of the publication date.

youth discuss positive outcomes on housing stability, employment, recovery, and “survival behaviors”. None of the research that HUD cites in this section of the notice demonstrate that transitional housing is proven effective at reducing homelessness.

- HUD cites its study from 2010 which found that “transitional housing has been an important element of the Department's efforts to respond to the housing needs of homeless families and individuals.” As noted earlier, this is consistent with HUD’s message even beginning in 2013. However, it omits two key points: first, the study did not conclude that transitional housing is proven effective at reducing homelessness and second, it fails to recognize that RRH was not an available intervention when this study was conducted.

Supportive Services and Participation Agreements

Although the Alliance agrees with HUD that supportive services are a critical component of an effective response to homelessness, **we oppose the designation of “supportive services and participation agreements” for bonuses and incentives.** The burden is on HUD to show this activity meets the statutory standard, but the evidence and research do not support it. Further, HUD does not provide sufficient detail for respondents to adequately assess this activity to inform their comment.

- HUD’s primary arguments in the notice regarding this proposed activity are focused on the need for greater access to individualized supportive services, which the Alliance agrees with. However, HUD’s limited dollars should continue to primarily invest in housing-related costs; other federal agencies, especially the U.S. Department of Health and Human Services (HHS), should expand the availability of and access to voluntary supportive services for people experiencing homelessness.
- HUD cites data and research that reflect positive outcomes including improved health status, family relations, and long-term recovery. While these are all valuable outcomes, none of the studies cited by HUD in the notice demonstrate that this activity is proven effective in reducing homelessness.
 - HUD highlights programs including Projects for Assistance in Transition from Homelessness (PATH) out of HHS’ Substance Abuse and Mental Health Services Administration (SAMHSA) but omits this program’s long history of [supporting Housing First](#). In fact, SAMHSA began listing Housing First as an evidence-based approach in its practice registry, the [National Registry of Evidence-Based Programs and Practices \(NREPP\)](#) in 2007, [published a toolkit in 2010](#) that emphasized the effectiveness of Housing First in in Permanent Supportive Housing, and funded Housing First demonstrations—all before HUD began encouraging the use of Housing First in 2013.
- HUD's discussion of supportive service participation agreements does not provide sufficient clarity.
 - Service participation agreements have long been utilized to establish expectations for case management *without making it a condition of housing*.
 - Case management is widely used across all CoC-funded program types to engage program participants. CoC-funded RRH already includes a service participation requirement under both the CoC Program and the Emergency Solutions Grants program (ESG). This was added by HUD when writing the regulations; it requires that program participants meet with a case manager at least monthly to support long-

term housing stability. Further, HUD has long acknowledged that setting expectations of monthly case management in PSH is permissible within a Housing First approach³.

- HUD highlights service participation requirements in the U.S. Department of Veterans Affairs' (VA's) HUD-VA Supportive Housing (HUD-VASH) program. While the program does require that Veterans take part in VA case management, the VA's broad adoption of Housing First consistently highlighted that Veterans were "not required to participate in services as a condition of occupancy."
- The notice does not specify what HUD will require to be incorporated into service participation agreements and how they will be used. Absent of specificity, commenters must rely on other recent HUD actions that establish HUD's expectations in relation to supportive services.
 - For example, both of HUD's recent CoC Program NOFOs (FY2025 and FY2026) included incentives associated with service participation requirements. In FY2025, HUD's NOFO included a service participation requirement for all new projects and in both years, significant points were assigned to projects in CoCs where 100% of the projects on their priority listing would require participation in services.
 - Years of evidence have consistently shown the importance of allowing program participants to have choice in which types of services they participate. Research shows that services benefit people more when they are accessed from the dignity and security of permanent housing.

Drug Free and Sober Housing

The Alliance opposes the designation of "drug free and sober housing" for bonuses and incentives. The burden is on HUD to show this activity meets the statutory standard, but the evidence and research do not support it. Further, HUD does not provide sufficient detail for respondents to adequately assess this activity to inform their comment.

- HUD notes that "drug-free housing advances the safety, recovery, and self-sufficiency of individuals and families served by the CoC Program". It goes on to say that "sober housing is a proven and effective strategy for addressing substance use disorder and advancing self-sufficiency." HUD does not provide any evidence that this activity is proven effective at reducing homelessness.
- The data and research that HUD does refer to focuses on the "need for recovery-oriented housing environments" but fails to adequately analyze the spectrum of treatment and recovery approaches that are available. Further, in the exit data on deaths in PSH that HUD cites, it omits that this data was not specific to overdose deaths. People residing in PSH often have complex medical backgrounds and one or more disabilities that may impact mortality rates. Research shows that permanent housing interventions are not directly associated with mortality risk.
 - HUD inflates data to justify an over-emphasis on treatment-focused strategies. HUD cites, "Among unsheltered homeless individuals, 75 percent report substance abuse and 51 percent report that substance abuse contributed to their loss of housing," but the study's authors

³ Although a 'frequently asked question' has been removed from HUD's website, a transcript from a HUD webinar in 2023 confirms HUD's position here: <https://web.archive.org/web/20240410041509/https://www.hud.gov/sites/dfiles/CPD/documents/CoC/Session-5-Transcript.pdf>

- explicitly clarify that the study does not describe the prevalence of health conditions among all people experiencing homelessness or explain the causes of homelessness.
- HUD's discussion of drug free and sober housing does not provide sufficient clarity about how it intends to incentivize this activity or how it would be operationalized. CoC-funded projects have long supported people with substance use disorders and has provided guidance on best practices.
 - HUD issued a [Recovery Housing Policy Brief](#) in December 2015 to highlight the more than 1,600 projects across the country funded with CoC Program funds that were serving people with chronic substance use disorders. It provided guidance on Recovery Housing (also referred to as sober housing) as a model that can be an effective *part of* a CoC's response to homelessness when it is an available *option* for people in recovery and it is their choice. HUD also emphasized in this 2015 brief that all projects serving people with substance use disorders should support life in recovery through the dimensions of health, home, purpose, and community.
 - Communities are most effective at supporting people with substance use disorders when they can offer a broad range of housing, support, and treatment options ranging from overdose prevention programs to Recovery Housing.
 - Absent specificity in the notice about how HUD will incentivize drug-free and sober housing, commenters must rely on other recent HUD actions that establish HUD's expectations in relation to assisting people with substance use disorders.
 - Through NOFOs, [public communications](#), and the *Best Practices Toolkit: Addressing Homelessness and Addiction through "Treatment First"* that is highlighted throughout the notice, it is reasonable to assume that HUD intends to require that all programs serving people with substance use disorders to use a treatment first approach and condition housing on participation in treatment.
 - HUD omits a broad body of work that demonstrates that treatment first approaches consistently fail, compared to approaches that prioritize immediate housing, especially at [keeping](#) people stably housed and reducing homelessness. Qualitative research further [shows](#), "Housing First's positive impact is contrasted with the difficulties Treatment First programs have in retaining clients and helping them avoid substance use and possible relapse."

Law Enforcement and First Responders as Crucial Partners

The Alliance opposes the designation of "law enforcement and first responders as crucial" for bonuses and incentives. The burden is on HUD to show this activity meets the statutory standard, but the evidence and research does not support it. Further, HUD does not provide sufficient detail for respondents to adequately assess this activity to inform their comment.

- HUD writes that it "intends to create incentives and bonuses to encourage CoCs to assist in reducing the trauma associated with living on the streets or in encampments". While the Alliance agrees that law enforcement and first responders can be helpful partners in community efforts to respond to homelessness, they should never be *leading* these efforts. Based on the absence of any meaningful detail from HUD on how it would operationalize this activity if designated for incentives, the Alliance must

consider the Administration's [desired approach to homelessness which](#) promotes a policing-first approach.

- HUD highlights communities where a camping ban is in effect as evidence that this approach is effective. HUD credits these reductions entirely on the activity of partnerships with law enforcement and first responders, but it provides no evidence to support this. There is, however, other evidence that HUD omitted from its analysis:
 - [Data from the 100 most populated cities](#) in the U.S. that found “the passage of such policies—including both the ordinances that explicitly target actions related to homelessness and those that target the homeless condition—does not yield a long-term reduction in the number of people experiencing homelessness on a given night.”
 - An Alliance review of 63 studies, which finds that enforcement-driven policies, such as camping bans:
 - fail to reduce homelessness;
 - incur significant financial costs on localities;
 - undermine public health and produce worse health outcomes, including increases in overdoses;
 - fail to reduce crime and deter people from calling the police, and instead divert scarce law enforcement resources;
 - sever trust in providers which complicates any efforts to connect people to stable housing;
 - displace people and key documents required for housing connections; and
 - decrease access to treatment
 - An [analysis of 26 studies across 20 years](#) finds that police interactions with people experiencing homelessness can result in harassments and abuse, and that the enforcement of codes results in “perpetuating homelessness, lack of service provision, conflict, distrust and avoidance of police, and stress.”

Mistaking Unmet Need for Failed Strategy

Throughout the notice, HUD provides flawed accounting and analysis for past decisions and to justify its current shift in priorities.

- **Leaves out important context on the federal government's shifts to permanent housing.**

Throughout the notice, HUD's account of policy changes that began in 2013 leaves out important details that explain the shift that prioritized permanent housing over transitional housing and the adoption of the Housing First approach. We offer the following history for the record:

 - Congress set the direction through the [Homeless Emergency Assistance and Rapid Transition to Housing Act](#) (HEARTH Act), the 2009 law that reauthorized and reformed the McKinney-Vento Homeless Assistance Act, prioritized permanent housing. The implementing regulation, the CoC Program interim rule, went into effect in 2012 and the FY2013 CoC Program competition was the first competition under interim rule.
 - The implementation of the interim rule allowed HUD to take an intentional and deliberate approach. HUD had an opportunity to examine its past practices to identify what had worked

well and what could be improved. Prior to the start of the FY2013 competition, HUD launched a [10-week communication effort](#) to explain its policy priorities and help CoCs prepare.

- Although HUD sought to re-examine the role of transitional housing, it remained an eligible component type and HUD [emphasized](#) that transitional housing continued to be an important part of a CoCs homeless assistance portfolio. HUD summarized the evidence behind the shift and encouraged CoCs to look at the research, review program criteria, and analyze outcomes of existing transitional housing projects. CoCs could use that information to decide whether to keep the transitional housing or if reallocating to a permanent housing model would be more advantageous to their goals.
- In a message from [July 2013](#), HUD emphasized the importance of paring CoC-funded projects with supportive services made available through mainstream programs including TANF and Medicaid as well as targeted programs funded by HHS. This message was not new; HUD began encouraging CoCs to utilize the CoC Program funds for housing while leveraging other federal sources to provide supportive services. Although the share of CoC funding spent on services has declined over time, nearly a quarter of funds continue to go to pay for services both as part of permanent housing projects and separately. Further, project applicants have always been required to document the type, frequency, and nature of services to be provided to participants—regardless of the source.
- **HUD provides a flawed analysis of data.** HUD notes that homelessness fell by 8.8 percent from 2007 to 2013 and rose 27 percent from 2013 to 2026, while also noting that “beginning with the 2013 CoC NOFO, HUD dramatically de-prioritized Transitional Housing and Supportive Services Only projects.” This narrative, and HUD’s flawed analysis of the data, misses the larger context:
 - **Veterans:** Like HUD, VA also began reorienting its homelessness response away from transitional housing and toward HUD-VASH⁴ and Supportive Services for Veteran Families (SSVF)⁵. Veteran homelessness has fallen by more than half since 2010, from more than 74,000 people to 32,495 in January 2025, the lowest level on record. VA has cited its efforts in reducing veteran homelessness as “[grounded in the evidence-based ‘Housing First’ approach and the \[research supports this\]\(#\)](#). In 2023, [VA stated](#), “If not for VA’s adoption of the Housing First approach, which broadened its reach to programs other than PSH and encouraged systemwide Housing First orientations, we would not have seen the over 52% reduction in veteran homelessness since 2010.”
 - **Families:** HUD states that family homelessness increased between 2013 and 2024 as permanent housing interventions increased and transitional housing resources declined. However, according to the very same data HUD relies on to make these conclusions, family homelessness [declined](#) through 2022, and only began rising in 2023. The number of transitional housing beds for families declined through 2022, and rose between 2022 and 2025. Data on family homelessness demonstrates, when funded at scale, existing interventions to pair permanent housing with supportive services succeed at

⁴ HUD-VASH (HUD-Veterans Affairs Supportive Housing) is a joint program that pairs HUD Housing Choice Vouchers for rental assistance with case management and clinical services from the VA, helping veterans experiencing homelessness obtain and keep permanent housing.

⁵ SSVF (Supportive Services for Veteran Families) is a VA grant program that funds community nonprofits to provide Rapid Re-Housing and homelessness prevention to very low-income veteran households, including case management, help accessing benefits, and short-term financial assistance with rent, deposits, and utilities.

reducing homelessness: homelessness amongst families dropped by 24% nationwide from 2013-2019 as 20,000 more RRH beds [came online](#). However, the [supply](#) of PSH and RRH beds is still insufficient for all populations.

- **Chronic:** Chronic homelessness refers to households with a disability who have been homeless for more than a year. As noted earlier, with homelessness response systems not having the capacity to keep up with the number of people becoming homeless for the first time, people remain stuck in shelters and on the streets without a permanent housing resource to exit to. Although HUD asserts that chronic homelessness has risen despite significant increase in the number of dedicated beds, [trends](#) show that the number of beds dedicated to chronic homelessness peaked in 2019, prior to most of the recent increase in chronic homelessness.

Lack of Rigor and Intentionality

There is no one-size-fits-all approach to homelessness. Communities need a range of tools to meet the diverse and unique needs of people experiencing homelessness in their community, which include transitional housing, more access to supportive services, greater coordination with local partners, and options that allow people to choose what will work best for them. In addition, one of the unique elements of the CoC Program is that it is designed to adapt over time as programs and practices are implemented. Congress contemplated this and included the language at section 428(d)(2)(C) of the McKinney-Vento Homeless Assistance Act, so that new activities *could* potentially be prioritized if evidence emerged that justified such a decision.

HUD's lack of rigor and intentionality in issuing this notice is demonstrated by the limited number of credible sources that it points to, the mischaracterization of what those sources show, and a process that will inhibit meaningful participation in the comment process.

- **HUD's Actions Indicate it Plans to Disregard Public Comments:** As evidenced by the last two CoC Program NOFOs the agency has produced, HUD has demonstrated that it intended to incentivize the activities proposed in this Notice *without going through the procedures required by statute*. It was for this specific reason that a [federal court](#) vacated the FY2026 CoC Program⁶. Soon after that decision, HUD published this Notice with little supporting detail or evidence and gave the public only 30 days to respond. It then reissued the NOFO once it was permitted with an application deadline prior to the closing of the comment window. This sequence demonstrates that HUD does not plan to seriously consider the input provided by the public.
- **Notice's Narrow Timeframe Limits Extent of Public Input:** A 30-day comment period is far too short for a change of this scale. HUD's decision to reissue the FY2026 CoC Program NOFO with an expedited timeline signals that the comment period will not meaningfully shape its outcome. Both factors will inhibit the public from participating and will limit the volume and quality of comments that interested parties will have the capacity to provide.

⁶ In its Notice, HUD notes: "On August 7, 2026, the U.S. District Court for the District of Rhode Island held that HUD could not issue its FY 2026 Continuum of Care Competition and Youth Homeless Demonstration Program Grants Notice of Funding Opportunity (NOFO) without going through Notice and comment under section 421(d)(2)(C) to establish a set-aside for transitional housing and "supportive services only" projects. See Memorandum and Order, *Washington v. HUD*, 1:26-cv-436 (D.R.I. Aug. 7, 2026); Memorandum and Order, *National Alliance to End Homelessness v. HUD*, 1:26-cv-439 (D.R.I. Aug. 7, 2026). HUD does not concede the lawfulness of those orders here, either implicitly or otherwise, and fully stands by its ability to implement all of the parts of its 2026 NOFO without going through Notice and comment. HUD is publishing this Notice to reinforce its ability to establish the set-aside and to add another means of promoting sound policies on specific services and program components such as supportive services and transitional housing."

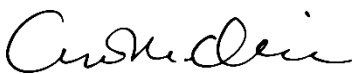
- **Lack of Specificity Limits Holistic Response:** HUD’s lack of detail for how proposed activities will be implemented -- or the impact that incentivizing these activities would have on existing renewals -- limits the ability of respondents to adequately assess HUD’s proposal to inform their comment.
- **Limited Evidence Undermines Credibility of HUD’s Claims:** Of the 116 references HUD provides in this Notice to substantiate its identified strategies, only 17 are research studies. The rest of the references are press releases, new articles, polling, and Tweets. These sources may describe public concerns or individual experiences, but none is designed to measure whether an intervention changes outcomes for the people it serves. HUD mischaracterizes the 17 valid studies it does cite and omits significant parts of a decades-long evidence base⁷. Finally, HUD relies on a flawed analysis of its Point-in-Time Count data, as detailed below, but overlooks its own data sources, including findings from the Youth Homelessness Demonstration Program (YHDP) and System Performance Measure (SPM) data.
- **No Genuine Consultation Process:** In the “Stakeholder Perspectives And Feedback” section of this Notice, HUD notes, “Over the last year, HUD hosted 58 homelessness forums in 32 states, sharing its intended policy direction, listening to feedback, and answering questions.” As a membership organization, the Alliance has heard from members in dozens of communities who attended the invitation-only meetings led by Dr. Robert Marbut. Alliance members reported that the forums were generally available only for in-person attendance, allowed input from select invitees, and comments from those in attendance that contradicted HUD’s claims were disregarded.

Alliance Recommendations

For the reasons outlined above, the Alliance urges HUD to withdraw the notice and decline to move forward with the designation of the proposed activities as eligible for bonuses and incentives. Should HUD want to continue to pursue additional activities for which bonuses and incentives can be used, it should undergo a transparent and comprehensive process that results in the identification of activities that meet the statutory standard.

For questions or more information please contact Marcy Thompson, our Vice President of Programs and Policy: mthompson@naeh.org.

Sincerely,



Ann M. Oliva
Chief Executive Officer
National Alliance to End Homelessness

⁷ See *Technical Appendix: Research Notice Omitted Evidence* at the end of this comment.

Technical Appendix: Research Notice Omitted Evidence

For the *Notice of Research Justifying Additional Incentives for Certain Activities to Reduce Homelessness*, HUD relies on a limited number of sources to substantiate its claims. Of the 116 references HUD cites, only 17 are valid research studies. The rest of the references are press releases, new articles, polling, and Tweets. Its analysis of these resources is flawed and repeatedly misrepresents the actual findings. More noticeably, HUD omits and ignores key literature and high-quality studies. Below is an overview of just some of the sources that HUD failed to consider.

General

1. **How Much Would It Cost to Provide Housing First to All Households Staying in Homeless Shelters?**
Dennis Culhane, Matthew Fowle, and Joy Moses. National Alliance to End Homelessness, 2025.
<https://endhomelessness.org/resources/research-and-analysis/how-much-would-it-cost-to-provide-housing-first-to-all-households-staying-in-homeless-shelters/>
2. **Changes in Homelessness Among US Veterans After Implementation of the Ending Veteran Homelessness Initiative**
Thomas P. O'Toole, Lisa M. Pape, Vincent Kane, Monica Diaz, Anne Dunn, James L. Rudolph, and Shereef Elnahal. JAMA Network Open, 2024.
<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2814324>
3. **Housing First: Overview of the Evidence Base**
Susan E. Collins. University of Washington HaRRT Center, 2025.
<https://depts.washington.edu/harrtlab/wordpress/wp-content/uploads/2025/09/Housing-First-state-of-the-science-8.30.2025-1.pdf>
4. **Effectiveness of Interventions to Reduce Homelessness: A Systematic Review and Meta-Analysis**
Heather Munthe-Kaas, Rigmor C. Berg, and Nora Blaasvær. Campbell Systematic Reviews, 2018.
<https://onlinelibrary.wiley.com/doi/10.4073/csr.2018.3>
5. **Housing First for People with Severe Mental Illness Who Are Homeless: A Review of the Research and Findings From the At Home—Chez soi Demonstration Project**
Tim Aubry, Geoffrey Nelson, and Sam Tsemberis. Canadian Journal of Psychiatry, 2015.
<https://pmc.ncbi.nlm.nih.gov/articles/PMC4679127/>
6. **Permanent Supportive Housing with Housing First: Findings From a Community Guide Systematic Economic Review**
Verugheze Jacob, Sajal K. Chattopadhyay, et al.. American Journal of Preventive Medicine, 2022.
<https://www.thecommunityguide.org/media/pdf/he-ajpm-ecrev-housing-first.pdf>

7. **Effects of Housing First Approaches on Health and Well-Being of Adults Who Are Homeless or at Risk of Homelessness: Systematic Review and Meta-Analysis of Randomised Controlled Trials**
Andrew J. Baxter, Emily J. Tweed, Srinivasa Vittal Katikireddi, and Hilary Thomson. Journal of Epidemiology & Community Health, 2019.
<https://jech.bmj.com/content/73/5/379>
8. **Understanding Rapid Re-housing: Systematic Review of Rapid Re-housing Outcomes Literature**
Daniel Gubits, Korrin Bishop, Lauren Dunton, Michelle Wood, Tom Albanese, Brooke Spellman, and Jill Khadduri (Abt Associates). U.S. Department of Housing and Urban Development, Office of Policy Development and Research, 2018.
<https://www.huduser.gov/portal/sites/default/files/pdf/Systematic-Review-of-Rapid-Re-housing.pdf>
9. **The Faulty Logic Behind Trump's Plans to Massively Disrupt Homeless Services**
Joy Moses, Nicole DuBois, Andrew Hall, and Daniel Soucy. National Alliance to End Homelessness, 2026.
<https://endhomelessness.org/resources/faulty-logic-behind-trumps-plans-for-homeless-services/>

Transitional Housing

10. **Domestic Violence Housing First Model and Association With Survivors' Housing Stability, Safety, and Well-being Over 2 Years**
Cris M. Sullivan et al.. JAMA Network Open, 2023.
<https://wscadv.org/wp-content/uploads/2023/07/Sullivan-et-al-2023-DVHF-24-mo-findings-JAMA-Network-Open.pdf>
11. **Permanent Supportive Housing With Housing First to Reduce Homelessness and Promote Health Among Homeless Populations With Disability: A Community Guide Systematic Review**
Yinan Peng, Robert A. Hahn, Ramona K.C. Finnie, et al.. Journal of Public Health Management and Practice, 2020.
<https://www.thecommunityguide.org/media/pdf/he-jphmp-evrev-housing-first.pdf>
12. **Where's the Housing? Housing and Income Outcomes of a Transitional Program to End Homelessness**
Bernie Pauly, Bruce Wallace, Geoff Cross, and Kathleen Perkin. Journal of Poverty, 2019.
<https://www.tandfonline.com/doi/abs/10.1080/10875549.2018.1549185>
13. **Housing is Health: A Longitudinal Study of Individual and Social Factors Predicting Long Term Retention and Health Outcomes in Permanent Supportive Housing**
Jamie Suki Chang, Micah R. Lattanner, Prabhleen Kaur, Stella Palumbo, Carly Petersen, and Cheryl Ho. Journal of Community Health, 2026.
<https://link.springer.com/article/10.1007/s10900-026-01602-w>

14. **Employment Experiences of Formerly Homeless Adults with Serious Mental Illness in Housing First versus Treatment First Supportive Housing Programs**
Emmy Tiderington, Benjamin Henwood, Deborah K. Padgett, and Bikki Tran Smith. Psychiatric Rehabilitation Journal, 2020.
<https://psycnet.apa.org/doiLanding?doi=10.1037%2Fprj0000391>
15. **Costs Associated with First-Time Homelessness for Families and Individuals**
Brooke Spellman, Jill Khadduri, Brian Sokol, and Josh Leopold. U.S. Department of Housing and Urban Development, 2010.
https://www.huduser.gov/portal/publications/povsoc/cost_homelessness.html
16. **Keeping Children at Home with Supportive Housing: Long-Term Child Welfare Outcomes for Families Who Received Supportive Housing**
Jaclyn Chambers, Laura Packard Tucker, and Michael Pergamit. Urban Institute, 2023.
<https://www.urban.org/research/publication/keeping-children-home-supportive-housing>

Supportive Services & Participation Agreements

17. **Employment and Earnings Before, During, and After Experiencing Homelessness**
Colin Caprara, Max Gross, and Till von Wachter. California Policy Lab, 2026.
<https://capolicylab.org/employment-and-earnings-before-during-and-after-experiencing-homelessness/>
18. **“If You’re Gonna Help Me, Help Me”: Barriers to Housing Among Unsheltered Homeless Adults**
Christina Wusinich, Lynden Bond, Anna Nathanson, and Deborah K. Padgett. Evaluation and Program Planning, 2019.
<https://www.sciencedirect.com/science/article/abs/pii/S0149718918303823>
19. **Investigating Predictors of Successful Exits from Permanent Supportive Housing**
Emmy Tiderington, John S. Palatucci, Evan Cole, and Joel Cantor. Rutgers Center for State Health Policy, 2026.
<https://dms.cshp.rutgers.edu/sites/default/files/2026-02/2026-report-tiderington-1593.pdf>
20. **Employment Experiences of Formerly Homeless Adults with Serious Mental Illness in Housing First versus Treatment First Supportive Housing Programs (open-access version)**
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