



Rapid Re-housing's Role in Responding to Homelessness

What the Evidence Says

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Rapid re-housing aims to help people exit homelessness and stabilize in housing as quickly and efficiently as possible. It provides housing search services, short-term financial assistance (e.g., help paying rent and move-in costs), and case management services. Rapid re-housing is a short-term, crisis response intervention intended to minimize a household's time spent homeless. The goal of helping people get back into housing as quickly as possible is informed by the belief that, "prolonged exposure to homelessness has a significant negative effect on adults and children—the longer a household experiences homelessness, the poorer the outcomes will likely be in a variety of areas" (HUD 2014).

Research on rapid re-housing is still emerging. To date, it shows that the model has been successful in helping families and veterans exit homeless shelters to live in housing units in the private rental market faster than they would on their own and for lower cost. Most families and veterans do not become homeless again; though many struggle with ongoing housing affordability, like other low-income renters. These findings suggest that rapid re-housing could be a scalable and cost-effective crisis response intervention that could help communities respond to homelessness more effectively. Though evidence exists on the benefits of rapid re-housing for individuals and families, policymakers need more research to understand the impact of rapid re-housing on system-level outcomes, most importantly how rapid re-housing could advance community goals to end homelessness.

Background

With limited progress made to reduce widespread homelessness since it emerged in the 1980s and inadequate resources available to provide support, homeless assistance programs began experimenting, designing early prototypes of what is known today as rapid re-housing. Following promising reports from communities across the country, rapid re-housing quickly moved from being a community innovation to a significant part of the federal government's approach to homelessness.

In 2009, the US Department of Housing and Urban Development (HUD) launched the Rapid Re-Housing for Homeless Families Demonstration (RRHD) program and, soon thereafter, the \$1.5 billion Homelessness Prevention and Rapid Re-Housing Program (HPRP), created during the Great Recession as part of the American Recovery and Reinvestment Act of 2009. The target populations for these programs were households who faced barriers to housing, but who were not likely to need long-term assistance. For HPRP, targeted households were those who would be homeless “but for” the assistance, but the eligibility allowed for families up to 50 percent of AMI (HUD 2016b), well above the usual eligibility for homeless assistance. For RRHD, targeted households were required to have at least one “moderate” barrier to housing but not significant barriers that may need more assistance to resolve than could be provided by the RRHD program. Research on programs at the time showed that families were screened out of rapid re-housing programs because of a lack of income (Gubits et al. 2013). Ultimately, HPRP rehoused about 300,000 people (HUD 2016a) and the RRHD program rehoused over 800 families (Burt et al. 2016).

Further, 2009 also saw the reauthorization of the McKinney-Vento Homeless Assistance Act. For the first time, rapid re-housing was an eligible activity in the Emergency Solutions Grant and the Continuum of Care programs. This reauthorization also aligned all programs administered under the authorized McKinney-Vento homeless assistance with several key goals (HUD 2015):

- help households quickly exit homelessness;
- increase the number of households exiting to permanent housing;
- prevent households from returning to homelessness;
- increase a household's self-sufficiency; and
- decrease homelessness overall.

Starting in 2012, other federal agencies began investing in rapid re-housing: the US Department of Veteran Affairs began administering the Supportive Services for Veteran Families (SSVF) program, and, in 2013, the US Department of Health and Human Services released an Information Memorandum to State Temporary Assistance for Needy Families (TANF) agencies encouraging the use of TANF funds to support rapid re-housing. Since 2012, SSVF provided rapid re-housing assistance to over 220,000 veterans (VA, *SSVF FY 2016 Annual Report*) and several state TANF agencies have made investments in rapid re-housing (NAEH 2015).

As these programs developed, the federal agencies aligned on core components of the rapid re-housing model, the primary goal of the program, and the population to be served (NAEH 2014). Rapid re-housing consists of three core components: housing identification, rent and move-in assistance, and rapid re-housing case management and services. The primary goal of rapid re-housing is to help individuals and families exit homelessness and return to permanent housing. Rapid re-housing is intended to serve people experiencing homelessness with no preconditions such as employment, income, absence of criminal record, or sobriety. Since the adoption of the core components, more recent program evaluation has shown that programs are serving people without income who had originally been screened out (VA, *SSVF FY 2016 Annual Report*).

With HUD, the VA, and the US Department of Health and Human Services increasingly investing resources in and encouraging communities to implement rapid re-housing, 93,718 people were being served by rapid re-housing assistance in January 2017 (Henry et al. 2017). This represents a nearly 400 percent increase since January 2013, the first year in which rapid re-housing capacity was captured nationwide (Henry et al. 2017).

Does Rapid Re-housing Work?

As the federal government heavily invested in rapid re-housing, many policymakers, advocates, and practitioners asked if it was effective and, if it was, what role could it play in ending homelessness?

Most research on rapid re-housing to date has studied programs that provide families and veterans rapid re-housing. The existing research focuses on a few of key metrics that align closely with the goals of the funding federal programs: where a household exits homelessness to, how long it takes to exit, and if they return. Another area of interest are the impacts the program has on household employment and income as income is essential for maintaining housing after assistance ends. Finally, of importance in a time of tight budgets and for those concerned with the capacity to use the tool to address homelessness at scale, research provides information on the cost of providing rapid re-housing compared with other responses to homelessness. This brief provides an overview of the effectiveness of rapid re-housing in ending homelessness by calling on the most rigorous research available; it draws from across the research literature, relying most heavily on a few studies (box 1).

Time to Housing

The fundamental goal of rapid re-housing is to reduce the amount of time a person spends homeless. The evidence shows that those who receive rapid re-housing exit shelter faster than those who do not (figure 1). The most rigorous study to date, the Family Options Study, found that families randomly assigned to rapid re-housing exited shelter more quickly (2.9 months) than families assigned to usual care (3.1 months) (Gubits et al. 2015; 2016).

But not every family assigned to rapid re-housing actually received rapid re-housing, and some families who were assigned to usual care also received rapid re-housing. Through a nonexperimental

analysis, authors found that families assigned to rapid re-housing and who received the intervention had shorter stays in shelter than families assigned to the rapid re-housing group who did not receive the program because they were not eligible or did not enroll. During the first 20 months after random assignment, the 59 percent of the families who used rapid re-housing assistance spent an average of 2 months in shelter immediately after being assigned to rapid re-housing, and the 41 percent of families who did not use rapid re-housing assistance spent more than 5 months in shelter (Gubits et al. 2015). In other words, of those families who were offered rapid re-housing and used it, on average, exited shelter 3.2 months faster than those who did not use it.

BOX 1

Major Rapid Re-housing Studies

Rapid Re-housing for Homeless Families Demonstration (RRHD). Under contract with HUD, Abt Associates conducted an evaluation of 23 sites that implemented rapid re-housing in 2009. The study used Homeless Management Information System data to track outcomes for 1,459 households, along with a participant survey conducted 12 months after program exit that sampled 500 households.

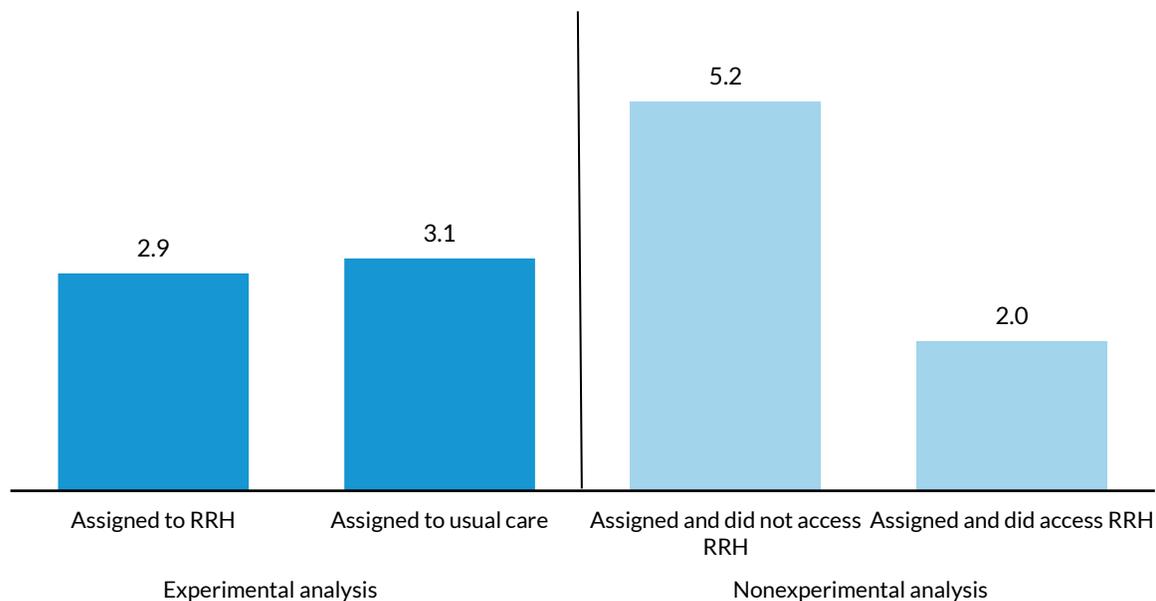
Family Options Study. This randomized controlled trial, also conducted by Abt Associates and funded by HUD, measured the relative impacts and costs of four interventions: (1) rapid re-housing and other temporary rental assistance; (2) project-based transitional housing with intensive supportive services; (3) permanent housing subsidies; and (4) the emergency shelter system (usual care). Researchers randomly assigned 2,282 homeless families (with 5,397 children) in 12 communities to one of these four interventions. Families were enrolled between September 2010 and January 2012.

Supportive Services for Veteran Families (SSVF). SSVF is a rapid re-housing and homelessness prevention program administered by the VA and community service providers. The National Center for Homelessness among Veterans closely monitors this program, and this brief draws on data from annual program reports.

FIGURE 1

Months to Exit by Group Assignment

Family Options Study



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Sources: Daniel Gubits, Marybeth Shinn, Stephen Bell, Michelle Wood, Samuel Dastrup, Claudia D. Solari, Scott R. Brown, Steven Brown, Lauren Dunton, Winston Lin, Debi McInnis, Jason Rodriguez, Galen Savidge, Brooke E. Spellman, and Abt Associates, Inc., *Family Options Study: Short-Term Impacts of Housing and Services Interventions for Homeless Families*, (Washington, DC: HUD, 2015); Daniel Gubits, Marybeth Shinn, Michelle Wood, Stephen Bell, Samuel Dastrup, Claudia D. Solari, Scott R. Brown, Debi McInnis, Tom McCall, Utsav Katte, *Family Options Study 3-Year Impacts of Housing and Services Interventions for Homeless Families* (Washington, DC: HUD, 2016).

Note: RRH = rapid re-housing.

Exit Destination

Rapid re-housing ameliorates the negative outcomes of emergency shelter not just by helping families and individuals exit shelter faster but also by ensuring they have a stable housing arrangement in which to land. The research shows that rapid re-housing effectively achieves this second outcome. At least 70 percent of participants in the SSVF, HPRP, and RRHD rapid re-housing programs successfully accessed permanent housing by program exit. Some programs, such as HPRP in San Jose, California, achieved even better outcomes with 75 percent of households attaining permanent housing (Finkel et al. 2016; Focus Strategies and Kate Bristol Consulting 2012; HUD 2016; VA, *SSVF FY 2016 Annual Report*). And, the data from the Family Options Study showed assignment to a community-based rapid re-housing group increased the proportion of families living in their own place with a lease for the first several months after random assignment (Gubits, McCall, and Wood, forthcoming).

Returns to Shelter

A goal of the federal programs funding rapid re-housing assistance is that homelessness be nonrecurring—that those who exit homelessness do not return. Research on rapid re-housing found that most families who receive rapid re-housing assistance do not reenter shelter at high rates. The RRHD outcome study found that 10 percent of families had a subsequent stay in their jurisdiction emergency shelter or transitional housing within 12 months of program exit (Finkel et al. 2016). The VA reports that only 7 percent of veteran families and 12 percent of individuals who successfully exited the rapid re-housing program into permanent housing reentered VA homeless programs within 12 months (VA, *SSVF FY 2015 Annual Report*). Neither of these studies included a comparison group, so it is difficult to assess whether the low rates of return to homelessness were the result of rapid re-housing assistance or other factors, such as household selection.

The Family Options Study found no difference between the treatment group (those assigned to rapid re-housing) and the usual care group (those who were assigned to the control group) in returns to shelter between 7 and 18 months and at 37 months after random assignment—a little over one quarter of each group returned to shelter. The experimental design of the study could not be used to compare returns to shelter for families who actually used rapid re-housing and those who did not. A nonexperimental analysis, included in the report, comparing families who used rapid re-housing with those who did not regardless of their random assignment, found there is a significant difference in subsequent returns to shelter for those who leased a unit with rapid re-housing assistance (23 percent) and those who did not (33 percent) (Gubits et al. 2015).

Though the research has shown returns to homelessness for families and veterans are low, the RRHD outcome study and the Family Options Study show that families do not achieve long-term housing stability. In the RRHD outcomes study, only 25 percent of families remained in the unit they were placed in a year after program exit (Finkel et al. 2016). The Family Options Study did not find any statistically significant differences between rapid re-housing and usual care with regards to housing stability during the follow-up periods (Gubits et al. 2015; Gubits et al. 2016).

Employment and Income

A goal of rapid re-housing programs and the broader federal programs that fund rapid re-housing assistance is for households to retain housing when the program ends, which often requires helping participants increase their incomes through employment or income assistance benefits. Evaluations have shown that families and individuals provided with rapid re-housing increase their income modestly. The RRHD found that the proportion of families earning income increased from 34 to 38 percent by program exit and up to 45 percent 12 months after program exit (Finkel et al. 2016). Veterans receiving rapid re-housing assistance through the SSVF program increased their median monthly income from \$808 at program entry to \$901 at program exit. However, neither RRHD nor SSVF had a control group, so it is impossible to know how much of this increase can be attributed to the program. The Family Options Study found that families assigned to rapid re-housing had higher incomes (at about \$1,100) 18 months after randomization than families assigned to usual care, but there were no

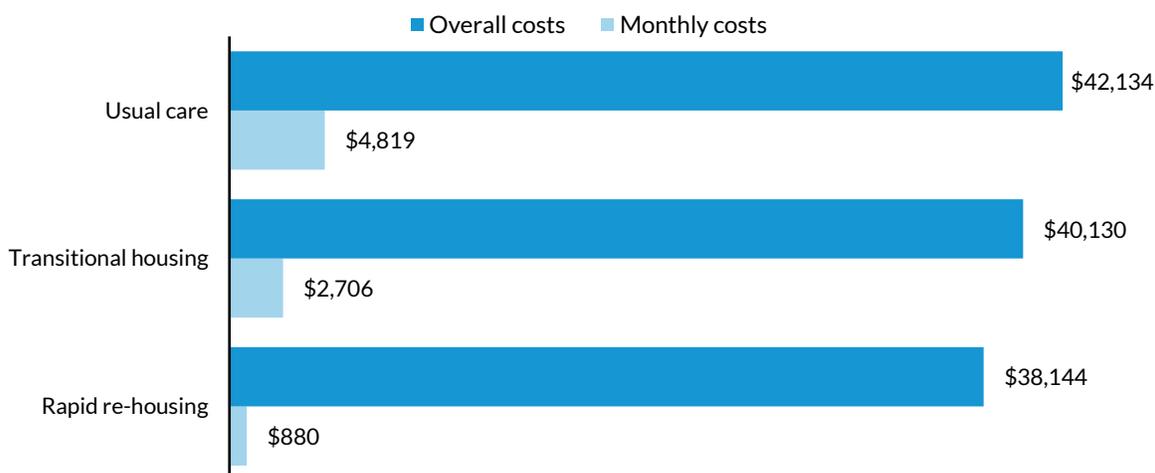
significant differences in employment or annual income or receipt of TANF, Supplemental Security Income, or Social Security Disability Insurance (Gubits et al. 2015). The differences in incomes were not evident at the 37-month follow-up (Gubits et al. 2016). Notably, rapid re-housing was the only intervention studied in Family Options that had a positive effect on income; transitional housing showed no effect, and housing vouchers, though it did not show an effect on annual income, showed decreases in work participation in the short term.

Cost

One important feature of rapid re-housing is that it is less expensive than emergency shelter or transitional housing. Studies have had wide-ranging estimates of the costs per stay of rapid re-housing (Cunningham, Gillespie, and Anderson 2015). In the Family Options Study, the average monthly cost of rapid re-housing, including financial assistance, staffing, and overhead, was \$880, significantly lower than transitional housing (\$2,706) or emergency shelter (\$4,819) (Gubits et al. 2016). The average rapid re-housing cost per stay (\$6,578) was also far lower than transitional housing (\$30,336) or emergency shelter (\$16,829). Families, however, used a variety of programs over the course of the study (figure 2). Looking at total program costs, including the costs of accessing emergency shelter, transitional housing, rapid re-housing, or housing vouchers during the 37-month observation, families assigned to rapid re-housing had slightly lower total costs than families assigned to usual care—\$38,144 compared with \$42,167 (Gubits et al. 2016). Put another way, offering rapid re-housing provided the same outcomes as usual care and cost 10 percent less. These savings are important. The difference of \$4,023 multiplied across all homeless families entering shelter, could result in substantial savings to the system. For example, rapid re-housing would have saved the shelter system \$1.7 million if the 434 families who were assigned to usual care were rapidly re-housed, savings that could have been used to serve more families or the same families for longer periods. This is not a small sum, especially if applied to cities like New York, where 12,000 families reside in homeless shelters (NYC Department of Homeless Services 2018).

FIGURE 2

Costs of Homeless Assistance Programs



Sources: Daniel Gubits, Marybeth Shinn, Stephen Bell, Michelle Wood, Samuel Dastrup, Claudia D. Solari, Scott R. Brown, Steven Brown, Lauren Dunton, Winston Lin, Debi McInnis, Jason Rodriguez, Galen Savidge, Brooke E. Spellman, and Abt Associates, Inc., *Family Options Study: Short-Term Impacts of Housing and Services Interventions for Homeless Families*, (Washington, DC: HUD, 2015); Daniel Gubits, Marybeth Shinn, Michelle Wood, Stephen Bell, Samuel Dastrup, Claudia D. Solari, Scott R. Brown, Debi McInnis, Tom McCall, Utsav Katta, *Family Options Study 3-Year Impacts of Housing and Services Interventions for Homeless Families* (Washington, DC: HUD, 2016).

Notes: The rapid re-housing and transitional housing costs presented are from the CBRR-UC (community-based rapid re-housing-usual care) and PBTH_UC (project-based transitional housing-usual care) pair-wise comparisons respectively. The usual-care cost presented is from the CBRR-UC pairwise comparison.

How Does Rapid Re-housing Compare with Other Homeless Crisis Interventions?

Evaluations of rapid re-housing have found that the intervention offers the best results compared with other interventions offered by the crisis response system to help families exit homelessness, such as transitional housing programs or emergency shelter. Leaving households to navigate exiting shelter on their own by accessing existing services (i.e., usual care) is analogous to a canoe zigzagging across a lake—it takes too long and is an inefficient way to get to the other side. It is also more expensive for the system and more challenging for the family or individual. The monthly cost of rapid re-housing per family is 82 percent less than the cost of shelter (\$880 compared with \$4,819) and 10 percent lower than the overall costs of each program’s approach (\$38,144 compared with \$42,167).

Most participants in rapid re-housing programs exit homelessness to private-market rental housing for a lower cost than alternative interventions, and only a small share return to homeless shelters. Rapid re-housing provides homeless-service providers with much needed flexible dollars to help families get into housing and pay for rent and then connect them with community services to address their ongoing needs.

Transitional housing, which is held up as a program to help families and individuals overcome barriers and move toward self-sufficiency, shows no greater impact on those goals in comparison with rapid re-housing, and it is triple the monthly cost (\$880 compared with \$2,706) (Gubits et al. 2016). Shelter, though not intended to help families move toward self-sufficiency, is also expensive—over 5 times as expensive per month as rapid re-housing (\$880 compared with \$4,800)—and shows no better outcomes for families.

There was one intervention studied in Family Options that showed strong outcomes on every measure for only modestly higher costs than rapid re-housing: permanent housing vouchers. But comparing rapid re-housing to housing vouchers is comparing apples to oranges. One is an emergency response to help families exit shelter, and one is a housing program not funded through homeless assistance and not easily accessible in the homeless assistance system. Vouchers require long-term program resources, which are allocated by public housing agencies, not homeless shelters. And even minor incremental increases in voucher supply are rare. Providing vouchers to all eligible households, including those in shelters, would be ideal, but without an increase in the overall supply to cover most eligible households, the number of people in shelter is unlikely to decrease. Indeed, providing vouchers at the front door of the shelter, without sufficiently increasing the supply of available vouchers, could inadvertently increase shelter requests and lengths of stay, as households seek priority access (instead of waiting for their names to come up on a PHA waiting list) or wait in shelter for a voucher—either of which alone would increase the shelter census. Alternatively, one might think of rapid re-housing as the intervention that helps all or nearly all households to leave homelessness and vouchers as the resource to solve the larger problem of housing insecurity, instability, and cost, including the danger of returns to homelessness. More vouchers as well as increased housing production are critical to ensure an adequate supply of affordable housing, which, ultimately, is required for ending homelessness.

What Do We Still Need to Know?

We still have a lot to learn about rapid re-housing. As a critical component of emergency response, rapid re-housing is a system-level intervention, but, so far, evaluations have focused on household-level outcomes. Household-level findings suggest that rapid re-housing could be an effective emergency response that translates into system-level effects. Can homeless-service providers serve more individuals and families in their shelters? Can communities reduce the number of individuals and families experiencing homelessness? At a basic level, the outcomes that policymakers need to know are whether rapid re-housing programs, provided at scale, help families exit homelessness faster than the rate that families enter homelessness, which would lead to overall reductions in homelessness.

Further, we need to know whether rapid re-housing can be effective in tight rental markets, where vacancy rates are low and affordable housing is in short supply. The RRHD sites were in a range of rental markets: about a quarter had rental housing vacancy rates below 5 percent and three-quarters were above 5 percent. The study found that families who returned to homelessness were only slightly more likely to live in tight housing markets or high-cost areas than those who did not return (Finkel et al. 2016). In contrast, an examination of return rates for veteran households served with SSVF found no

significant relationship between community housing market variables and the likelihood a person would experience a recurrence of homelessness within two years of exit (Byrne et al. 2015). As rents continue to rise, especially in particular urban regions, will rapid re-housing continue to show effectiveness or will adaptations have to be made to the model to show success?

Moving forward, communities will need assistance developing data tools so that their use goes beyond mere reporting to HUD. Communities should use these data for managing the performance of their systems. Policymakers should also consider funding an evaluation of the impact of rapid re-housing on the system-level outcomes noted above that includes jurisdictions with varying housing market conditions.

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