Learning the Language of Ending Homelessness: What Does It All Mean?

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As the Florida Housing Coalition travels across the state to help communities think, plan, and act toward ending homelessness, the first step we take is encouraging everyone to use the same language. We also focus the conversation on working to end—not just manage—homelessness, so that local governments, the private sector, homeless Continuums of Care, and other stakeholders can drive toward the best practices and most effective strategies for providing safe and stable housing for all. Below we offer explanations of some of the key concepts in this work.

**Continuum of Care (CoC)** – HUD created the concept of Continuums of Care to promote community-wide commitment and planning to end homelessness for specific geographic areas, which might be one county or multiple counties. Representatives from various stakeholder groups make up the Continuum Care for an area. Representatives might include stakeholders such as government, hospitals and health care, the local school system, the faith community, representatives from the private sector, philanthropy, law enforcement, and more. The CoC’s purpose is to oversee CoC Planning, operate the CoC, operate a CoC Homeless Management Information System (HMIS) and designate an HMIS Lead Agency. The Lead Agency is the organization (nonprofit or local government) that facilitates the work of the CoC. In Florida there are 27 CoCs and Lead Agencies.

**Coordinated entry** – A coordinated process in a homeless Continuum of Care (CoC) jurisdiction designed to provide common assessment, client intake, and provide appropriate referrals to housing and services in the CoC. In many CoCs, the Coordinated Entry system is a component of the Homeless Management Information System. An essential purpose of coordinated entry (also known as coordinated...
intake) is to determine the most appropriate housing intervention (e.g., rapid rehousing or permanent supportive housing), given the applicant’s situation and vulnerability.

**Ending homelessness** – An end to homelessness means that every community will have a systematic response in place that ensures homelessness is prevented whenever possible, or if it can’t be prevented, it is a rare, brief, and non-recurring experience. Specifically, every community will have the capacity to: (1) quickly identify and engage people at risk of and experiencing homelessness; (2) intervene to prevent the loss of housing and divert people from entering the homelessness services system; (3) when homelessness does occur, provide immediate access to shelter and crisis services, without barriers to entry, while permanent stable housing and appropriate supports are secured, and quickly connect people to housing assistance and services—tailored to their unique needs and strengths—to help them achieve and maintain stable housing. (Excerpt from Opening Doors: Federal Strategic Plan to Prevent and End Homelessness)

**Homeless Management Information System (HMIS)** – As required by HUD, an information system to collect client information and data on the provision of housing and services to individuals who are homeless and those who are at risk of homelessness. Each Continuum of Care is responsible for selecting an HMIS software provider and an HMIS Lead Agency that complies with HUD’s data collection, management, and reporting standards. HMIS serves a vital role in providing data and insight on the number of people experiencing homelessness in a local area, understanding patterns of service use, and measuring effectiveness of local programming.

**Housing first** – An approach to homelessness that centers on providing people experiencing homelessness with permanent housing (typically, a rental unit) as quickly as possible and, after the person
is housed, providing services to help the person remain stably housed. Housing first is recognized as an evidence-based best practice and is cost effective for the community. Housing first results in better outcomes as compared to approaches that provide services prior to housing and/or impose barriers or program requirements that delay moving into permanent housing.

**Permanent supportive housing (PSH)** – Long-term housing assistance combined with long-term support services for those who have disabilities and have been homeless more than a year or on multiple occasions. PSH is a cost-effective way to help people with serious and complex barriers to live more stable lives. Permanent supportive housing is recognized by HUD as “the solution” to chronic homelessness.

**Rapid rehousing** – A best practices approach to quickly connect homeless households with permanent housing (typically, a rental unit) through an individualized package of assistance that may include the use of time-limited financial assistance, like short-term rent subsidies, and targeted support services provided after housing to help ensure housing stability. A fundamental goal of rapid rehousing is to reduce the length of time a household is homeless and stabilize the household as quickly as possible.

When the concepts described above are woven together in a local community, homelessness is more likely to decrease and decrease more quickly, as compared to using other approaches. The concepts fit together into a successful scheme. For instance, rapid rehousing and permanent supportive housing are both housing first approaches. The way a CoC determines which of those approaches would be best for a particular household is through the coordinated entry system and HMIS. By using a common assessment tool, households can be prioritized for rapid rehousing if they have moderate barriers to housing stability, or to permanent supportive housing if they have high barriers to housing stability. Those households that have minor barriers to housing stability need very few resources from the homeless assistance system.

When the community – including local government and Continuum of Care – works together to build an effective crisis response system that includes the concepts and best practices described here, homelessness is more likely to decline and at a rapid pace. Of course, an important piece of this puzzle is access to deeply affordable housing, whether the household needs rapid rehousing, permanent supportive housing, or little help at all. Ultimately, homelessness cannot be ended without affordable housing that is accessible to extremely low income households with problematic housing histories.

If you and your community would like assistance from the Florida Housing Coalition, let us know. FHC is the statewide provider of training and technical assistance under contract with DEO. Under the DEO contract, we offer the community a free site visit, provide answers to questions via email or phone, and offer workshops and webinars throughout the year.

If your community would like in-depth systems evaluation, assistance with CoC redesign and/or long-term planning, or even a series of trainings for stakeholders, we can provide these services as a consulting contract with the local government, Homeless Commission, or CoC. Just let us know what you need to end homelessness in your community.

**Susan Pourciau** is the Director of Homeless Training and Technical Assistance for the Florida Housing Coalition. Susan’s areas of expertise include housing first, Continuum of Care (CoC) governance, homeless system design, data analysis, rapid rehousing, CoC funding, and permanent supportive housing. Prior to joining the Florida Housing Coalition, Dr. Pourciau was the Executive Director of several human services nonprofit organizations and was on the faculty of Florida State University. Susan has a doctorate in Accounting and a law degree from Duke University.