

Understanding Rapid Re-housing:

Findings from Initial Interviews
with Rapid Re-housing Participants



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FOREWORD

Rapid re-housing (RRH) provides temporary assistance to help people quickly move from homelessness into housing. RRH programs vary widely in aspects like funding sources, target populations served (for example, individuals versus families), landlord engagement practices, and duration and amounts of assistance provided. *The Understanding Rapid Re-housing* study seeks to shed light on the current state of RRH regarding short-term participant outcomes as well as program practices in different types of communities—urban, suburban, and rural, for example, or those with tighter or looser rental housing markets.

Two new papers from the study, being published in tandem here, comprise a compelling pairing of perspectives, one that examines programmatic characteristics and the other an exploration of the role that RRH plays in the lives of individual participants.

- **Rapid Re-housing in 2018: Program Features and Assistance Models** is a community scan that uses newly collected data from surveys administered to Continuums of Care (CoCs) and RRH programs, along with in-depth interviews with staff from 20 RRH programs, to describe key features of RRH programs across the nation.
- **Findings from Initial Interviews with Rapid Re-housing Participants** describes findings from one-time, in-depth interviews with 30 RRH participants, in two communities, who were at different stages of RRH. Of the interviewees, six were enrolled in RRH but still in emergency shelter, 18 were currently receiving RRH assistance, and six had exited RRH within the previous six months.

In addition to these papers, the **2018 RRH Data Repository**—to be published concurrently on HUDUser.gov—is a data tool that combines newly collected survey data from CoCs and RRH programs with data from secondary data sources to provide the first comprehensive documentation of RRH programs nationwide. The repository has a dashboard with a query function that allows users to select options such as state, housing market cost (for example, high, moderate, or low cost), and/or target population to find specific statistics for selected characteristics.

These two papers follow two previously published reports from the *Understanding Rapid Re-housing* study, the **Systematic Review of Rapid Re-housing Outcomes Literature**¹ and the **Supplemental Analysis of Data from the Family Options Study**². There will be one more paper published from this study which will describe findings from 15-months of ethnographic research with 16 participant households; this last report is expected to be published in Fall 2020.

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¹ <https://www.huduser.gov/portal/publications/Systematic-Review-of-Rapid-Re-housing.html>

² <https://www.huduser.gov/portal/publications/Supplemental-Analysis-Rapid-Re-housing.html>

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1. Introduction

Introduction

This interim report presents the findings from a set of qualitative interviews conducted in late 2018 and early 2019 with 30 people in various stages of receiving rapid re-housing (RRH) assistance: those who have been offered RRH but not yet secured a unit (“pre-RRH”), those currently supported by an RRH program (“RRH”), and those who have exited from RRH support (“post-RRH”).

The interviews are part of an ongoing study that will continue to follow a subset of these study participants (the current RRH participants) over another year and describe how they fared after they no longer were receiving RRH rental assistance and case management.

Other components of the **Understanding Rapid Re-housing Study**, conducted by Abt Associates for the U.S. Department of Housing and Urban Development (HUD), use a program-centered lens (see Dunton and Brown, forthcoming; Gubits et al., 2018; and Walton et al., 2018). This interview component, in contrast, looks at participants’ experiences and the role that RRH plays in their lives. Among our research questions, for example, is “What role does housing play in the coping strategies of vulnerable households?” (See appendix A for a complete list of the research questions.) Accordingly, although the interviews we conducted and analyzed focus on the immediate experience of homelessness, participation in an RRH program, and maintaining housing stability following program exit, we consider a wide variety of contextual factors. Doing so allows us to present full stories about the lives of RRH participants, so they may be understood as complex individuals who have experienced one or more episodes of homelessness, rather than being defined by their current episode of homelessness or by their participation in a specific intervention. We include text boxes throughout the report that provide additional detail about

“Jasmine”

Jasmine, a post-RRH participant in Pine Grove, described how she lost her housing when her children’s father’s grandmother, with whom they were living, had a stroke and no longer could provide housing for Jasmine and her family. Jasmine had moved to the South from New Jersey, so her local support network was limited. When she moved, she was able to transfer her retail job to a store in Pine Grove, but only a part-time position was available (she had worked full-time in New Jersey). When the grandmother’s stroke meant she had to move, Jasmine had nowhere else to go and decided to go to a hotel with her four children. The children’s father did not come with them to the hotel or to subsequent housing.

Jasmine had only enough money to pay for “a night or two” but pleaded with an extended stay hotel to let her check in and pay what she could. She was able to obtain a \$1,500 payment through an emergency program her employer offered, which covered three weeks of hotel stay at \$500 a week. She obtained an overnight job at a fast food restaurant and had to leave her children at the hotel sometimes when she worked—the oldest age 11 at the time and the youngest 2. She gave birth to a child while living in the hotel and brought her newborn son there from the hospital.

Although Jasmine had a difficult childhood in some ways—being removed from her parents and raised by a harsh grandmother raising five grandchildren—this was Jasmine’s first experience of homelessness. Recounting it 2 years later in an interview, she openly sobbed at the memories.

Jasmine continued to work her two part-time jobs and live in the hotel for a year, continuing to pay \$500 a week for rent. Paying approximately \$2,000 a month to stay in hotels, she could not accumulate the savings for the upfront costs to lease an apartment. She never entered shelter, because she was told her older son would have to go to a men’s shelter by himself, and she felt unsafe about him doing so.

She was able to enter the RRH program when she happened to meet the program director, who was shopping at the store where Jasmine worked. Through the RRH program, she received rent assistance, a broad suite of services, and assistance applying for a housing choice voucher (HCV), which she received and used.

interviewees’ lives, sometimes a fuller explanation of their history and other times a deeper look at a specific experience.³

Our analysis seeks to identify the contributing roles and complex relationships among, for example, family dynamics, personal aspirations, work and health situations, and criminal justice involvement.

The rest of this section introduces the people we interviewed and the two communities where they live, and we describe our methodology for conducting the interviews and analyzing them. The next three sections move chronologically through the precursors to the interviewees’ respective episodes of homelessness (section 2), their entry into the RRH program (section 3), and their RRH program experience (section 4). In section 5, we then summarize how RRH fits into the broader context of interviewees’ lives and aspirations. The final section draws some conclusions and makes some immediate suggestions that might improve RRH programs.

Study Sites, People Interviewed, and Methodology

The Abt team conducted 30 one-time, indepth interviews with RRH program participants in two communities (each is a city and its surrounding area) in late 2018 and early 2019. In consultation with HUD, we chose the two sites based on a combination of convenience (so that the primary researchers could make day trips for interviews and home visits) and contrasting housing markets. One community had a typical rental housing market, and the other had high housing costs and a low rental vacancy rate (see exhibit 1).

The pseudonym “Pine Grove” refers to a mid-sized southern city with rents and a rental vacancy rate at about the national median. It had just begun a coordinated entry system at the time of the study, using scores from the VI-SPDAT to refer households in the middle tier of scores to RRH.⁴ In Pine Grove, we partnered with an organization we call “Homeward Bound,” which is embedded in a community action agency located in an African-American neighborhood. Homeward Bound operates two RRH programs—one targeting all populations funded by HUD’s Continuum of Care Program, and one for veterans funded by the U.S. Veterans Administration’s Supportive Services for Veteran Families (SSVF) program. The community action agency also offers programs for education, employment (job training and job search assistance), budgeting, and access to benefits. It serves as an entry point for the coordinated entry system and has a community development corporation that, as of early 2019, owns 136 affordable housing units.

The pseudonym “Easterly” refers to the site with a tight housing market, located in the eastern part of the United States. Easterly seeks to use RRH to serve people with substantial barriers to housing. It had recently implemented a coordinated entry system that selects for RRH those people experiencing homelessness who are unlikely to resolve it on their own. To recruit interviewees, we worked with two Easterly programs, referred to in this report as “Overton Way” and “New Lease.”

³ Names of people, communities, and programs are pseudonyms.

⁴ The Vulnerability Index—Service Prioritization Decision Assistance Tool (VI-SPDAT) is a survey administered to individuals and families currently experiencing or at-risk of homelessness to help determine their level of risk for prioritizing housing assistance. The tool recommends placement in RRH as appropriate for those that receive scores of between 5 and 9 on the tool. Scores of greater than 10 are recommended for Permanent Supportive Housing/Housing First, and those with scores between 1 and 4 are not recommended for referral to either program.

Exhibit 1. Community and Program Characteristics (All Pseudonyms)

	Community			
	Pine Grove		Easterly	
MSA Population	1.4 million		4.8 million	
Rental Vacancy Rate (city)	5.9%		3.3%	
Median Rent (city)	\$926		\$1,320	
2018 Homeless Population (city)	983		6,183	
RRH Program	Homeward Bound	Homeward Bound SSVF	Overton Way	New Lease
Organization Type	Community action agency, focusing on employment and income support		Homeless services agency, also offering emergency shelter with onsite services	Homeless services agency, also offering housing placement and prevention services
RRH Program Characteristics	<ul style="list-style-type: none"> • Case management support to help participants locate housing units in the community or sometimes in affordable housing owned by the agency • Rental and move-in assistance • Case management for entire financial assistance period plus 3 to 6 months • Referrals to Homeward Bound’s workforce development program • HUD-funded program and VA-funded SSVF program 		<ul style="list-style-type: none"> • Landlord networks and ability-to-pay holding fees in order to secure units for incoming participants • Rental and move-in assistance • Case management and services to connect participants to furniture, transportation, and other resources 	<ul style="list-style-type: none"> • Landlord network of 5 to 10 landlords • Rental and move-in assistance • Case management and referral to external support services, including mental health, career development, and legal

MSA = metropolitan statistical area. RRH = rapid re-housing. SSVF = Supportive Services for Veteran Families. VA = U.S. Department of Veterans Affairs.

Sources: 2015 American Community Survey; 2018 Annual Homelessness Assessment Report: Part 1—Point-in-Time Estimates of Homelessness in the United States; program interviews

We recruited RRH program participants for the study with the help of case managers, based on the participants’ stage in the program and willingness to complete an interview. These interviewees are not necessarily representative of the four programs’ participants or of the broader population of RRH participants nationwide.⁵ We conducted interviews with households across the three stages of RRH: 6 households who had been offered RRH assistance but had not yet secured housing, 18 households who were currently receiving RRH assistance, and 6 households that had already exited RRH.⁶ In two cases, we interviewed two members of a household together (“Jay” and “Luke,” a married couple; and “Harry” and “Magda,” an adult son and his mother).

⁵ Because we recruited through case managers, interviewees are program participants who are more likely to have good relationships with their case managers or (especially for participants still looking for housing) who are more likely to be interested in fulfilling a case manager’s request in hopes of it helping them in the program. In our recruiting process and consent form, we explained that participating in the study would have no effect on the services they received, but we do not know whether interviewees believed participating would help their cases.

⁶ We used each program’s definition for exiting.

This report is also informed by two other sources: interviews we conducted with staff at each of the four RRH programs and early insights from ongoing ethnographic research with current RRH participants, who are 16 of the 30 interviewees described in this report. The ongoing ethnographic research includes case management observations, home visits, ongoing communication, and two additional in-depth interviews.

The RRH program participant interviews were semi-structured around major themes tailored to each RRH stage: precursors to homelessness, expectations about RRH assistance, housing costs, rent burden during and after RRH assistance, financial status, landlord relationships, housing history and stability, housing and neighborhood quality during and after RRH assistance, housing decisions, services received, and family dynamics. Though covering all major themes, the interviews were conversational, using open-ended questions, to which families described their experiences in their own words, allowing them to share additional themes important to understanding their situations. We conducted interviews with families in person at their current place of residence (shelter, RRH, or post-RRH) or at another location agreed on by the interviewee and interviewer, including the RRH program offices, libraries, and restaurants.

Most people we interviewed experienced the episode of homelessness that brought them into an RRH program as individuals. Of the 30 households, only 9 were families with children under age 18, and 2 were families with grown children. Most family households were single-parent women with their children; in one case, both parents were present. Five of the interviewees in Pine Grove were veterans served by the Homeward Bound SSVF program. Of the 30 households, 21 had experienced some prior episode of homelessness. Appendix B presents selected characteristics for the 30 interviewees.

Analysis and Reporting

All interviews were audio recorded and transcribed verbatim. The transcripts were loaded into NVivo 11, a qualitative analysis software. Three researchers (the two interviewers and the project director) developed the initial codebook of expected themes based on the project’s research questions (for example, housing quality, decision-making, RRH assistance design), issues identified in prior research (for example, homeless as a child), and key issues from interviews (for example, death of a key support person, domestic violence, role of the case manager). A team of two coders (an interviewer and analyst) coded two interviews to test the codebook and then made revisions and additions based on their results. Two additional analysts then used the revised codebook to complete coding of the remaining 28 interviews.

We then analyzed the coded interviews to identify major themes articulated by interviewees or identified by researchers. Some codes (for example, entry to shelter) were specific enough that analysis simply involved reading the text that had been assigned that code more closely and summarizing the common experiences and variations. Other themes required queries to identify patterns in larger issues. For example, we ran a query about experiences in the RRH unit, examining them by housing quality, landlord relationship, and neighborhood. We also ran queries by interviewees’ stage in the program (pre-RRH, RRH, post-RRH) to identify meaningful variations by stage.

Finally, we synthesized the findings from the analysis for this report, using illustrative quotes related to the themes to personalize and further explain key themes.

We have adopted the conventions shown in exhibit 2 to aid in readability while conveying the relative

Exhibit 2. Reporting Conventions (n=30)

Frequency	Represents
Almost all / All / Most	27-30
A majority	17-26
About one-half	14-16
Some / Several/ A minority	5-13
A few	1-4

frequency of a finding. We sometimes also provide specific counts. We also sometimes note when we are reporting on fewer than the full set of 30 interviews and use similar percentage cutoffs for those cases (for example, the statement “Of the 20 interviewees who received rental assistance, “a majority reported,” would refer to at least 11 interviewees but fewer than 18).

2. Precursors to Homelessness

This section describes interviewees’ housing experiences leading up to their entry in an RRH program. It contextualizes the current episode of homelessness in their overall housing stability and other influential factors. Though each interviewee experienced a unique trajectory into homelessness, we present a framework for understanding how a suite of factors reduced their resilience and ultimately culminated in homelessness.

Adult Residential Instability

Residential instability is strongly correlated with increased risk for homelessness and generally poorer life outcomes. For example, formerly incarcerated individuals are more likely to re-offend after a period of residential instability (Roman and Travis, 2006). For this report, we define residential instability as moving more than once a year. Interviewees experienced varying degrees of residential instability.

Some of the people we interviewed had stable living situations in the years prior to experiencing homelessness. For example, Tania and Colleen had lived in public housing for more than 20 years prior to becoming homeless. Victor owned his own home before losing it and all his wealth as a result of his addiction to heroin. Michael had his own apartment for 4 years before he was incarcerated but has been residentially unstable since being released.

William lived in an apartment for 5 or 6 years, but eventually was unable to afford the rent. His aunt offered to help but encouraged him to find a smaller place that he could afford. He didn’t want to give up his place—he enjoyed the space, and it was home. Eventually he moved out and couldn’t find a place to live.

More frequently, the people we interviewed had been residentially unstable as adults, moving frequently and finding it hard to establish a home. For example, Jude, a White man in his 50s, had lived in eight or nine different apartments since moving to Easterly 10 years ago. He moved apartments to be closer to jobs, which changed frequently. He joked in the interview: *“I learned to pack lightly.”*

Other people had had a period of extended residential stability and then became unstable. Harry and his mother, Magda, moved to the United States from Colombia when he was a child. Before emigrating, they

“Javier”

Javier, a Latino man in his 40s, currently receiving RRH program services in Easterly, struggled with residential instability through most of his adult life. A father of four children with three different women, he had grown up with an abusive mother, living “in chaos” and constantly moving between his mother’s and grandmother’s houses to escape.

When he was a teenager, Javier started to use and sell drugs. By his 20s he was going in and out of prison and drug rehabilitation. The result was a high degree of residential instability throughout most of his adult life. His one element of stability was his partner of 15 years, with whom he was raising a child. He would go into prison or rehab and come out to live with her. He described how this worked: *“I’d come out, maybe last a month or two on the street, go back to jail...in and out, in and out, just a vicious cycle.”*

After a recent stint out of jail, he and his partner broke up; afterwards, he found his residential situation even more precarious: *“I’m telling you, you know I’m rolling around. So prior to that, I was at a sober house in Pine Grove for three months. Prior to that, I was incarcerated for 1 month.”* When he got out of jail, he was in a homeless shelter and then got into the RRH program and used it as a bridge while he got his Section 8 voucher. He was able to find an apartment.

Javier knows that it is a struggle to not use drugs. He struggles with his “addict’s brain,” but he hopes that he can persevere and stay clean, work with therapists to heal some of his childhood trauma and use his own experience of addiction to become an addiction counselor. He is working on what he needs to do to attend community college so that he can achieve his goal, taking each step as it comes on the path to recovery.

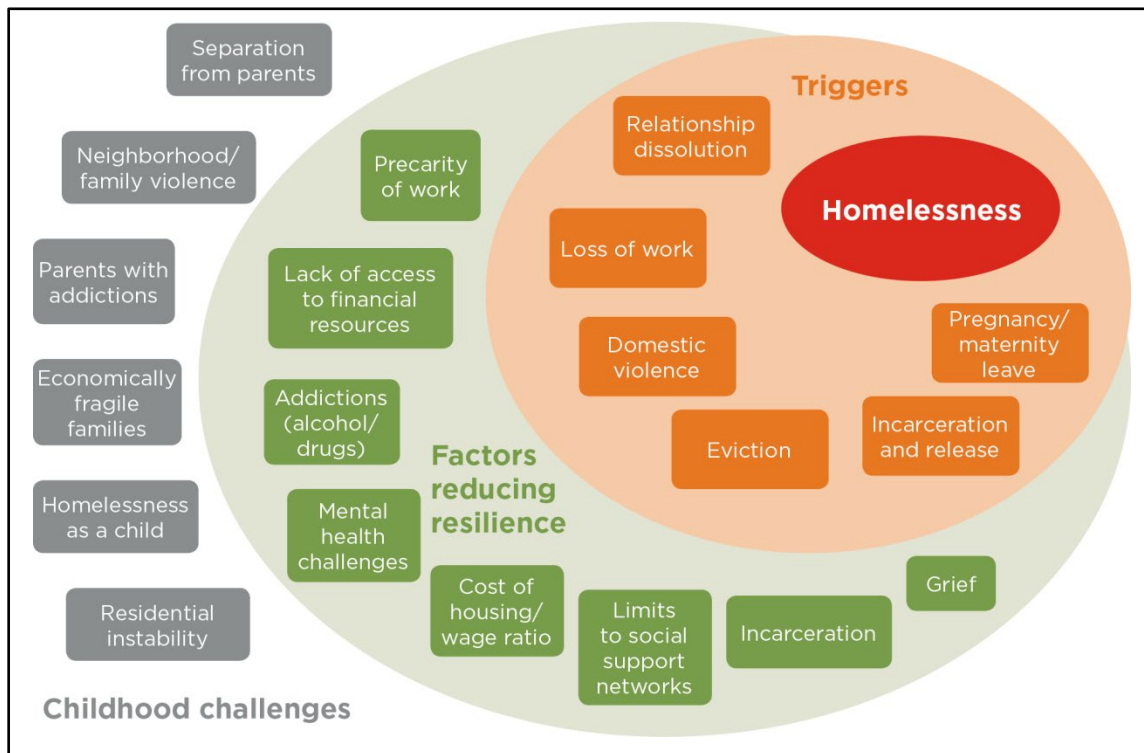
had lived continuously with Magda’s father, but once here Magda struggled to find a stable place. Harry described moving six or seven times when he was just 10 years old. Eventually, Magda and Harry moved to the Easterly area and found better paid work and stable housing, and Magda met and married a U.S. citizen. At this point, Magda and Harry had lived stably for 10 years in a suburban neighborhood. Harry started attending college; however, Magda’s husband began to be physically abusive, and finally Magda decided to leave him for her and Harry’s safety, giving up the residential stability they had attained.

Bethany in Pine Grove stabilized in an apartment after a period of homelessness. Combining her wages from employment and her brother’s Social Security disability income, they were able to afford the apartment, “keep the lights on,” and raise her twins for 4 years. After her third child was born, however, she had no maternity coverage, and the bills piled up until she was evicted.

Factors Influencing Pathways to Homelessness

In aggregate, the interviews reveal that adult residential instability is influenced by a variety of factors that finally culminate in a trigger event leading to homelessness. Exhibit 3 is based on analysis of the 30 interviews and describes pathways into homelessness. On the far left of the diagram are childhood challenges that, for many of the people we interviewed, weakened their resilience as adults. In the green circle are the factors that reduced people’s resilience as adults. The immediate triggers that sent them into homelessness are in the orange circle.

Exhibit 3. Pathways into Homelessness



Each of the people we interviewed had a unique pathway into homelessness. Some had few childhood challenges, whereas others had many. Some had few factors reducing resilience as adults, whereas others had multiple challenges that weakened their resilience, leading up to the experience that precipitated them into homelessness. The rest of this section follows the logic of this diagram, from left to right.

Childhood Challenges and Family Histories

We found that three aspects of childhood experience appear critical for starting the people we interviewed on a pathway to homelessness: childhood socio-economic and housing status, teenage homelessness, and childhood traumas.

Childhood Socio-Economic and Housing Status

Most interviewees who spoke about their childhoods grew up in working-class or poor households and had unstable housing. Most interviewees' parents were renters rather than homeowners. Several interviewees described moving frequently as a child,⁷ sometimes because a parent was in the military. Brandon's mother was a tobacco picker and had to move from place to place to find work on tobacco farms when he was growing up in the 1970s. When asked how often he moved, Brandon said: *"I'd say it was a lot. I went to four different high schools."* Brandon explained how the housing was bad at some of the farms where his mother worked: *"We had the ceiling fall in on one. The floor fell in on the other one. I mean they be old, the older wood houses. That's the type where—otherwise they fall apart or they dry rot or whatever, especially in the sun where it was."*

Moves sometimes resulted in families being split up. Michelle explained: *"They would kind of split us [siblings] up here and there. I mainly lived with my grandparents."* Javier described his childhood of moving between his mother's and grandmother's homes because of the chaos of living with his mother, an alcoholic who would still go to work every day. *"But I lived with my grandmother for a long time, too. I bounced from my mother's to there because it was just, I don't know, too much. It was just always chaotic."* Drake, an African-American man in his 20s, moved between his mother's and father's homes, an 8-hour drive from each other.

Teen Homelessness

Five interviewees first experienced homelessness as a teen, and four of them remained on the streets until entering the RRH program. In some cases, a parent would no longer house the teen; in others, the teen ran away. One person became homeless as a young teen in an attempt to avoid foster care.

Jim, a 50-year-old single White man whose working-class parents owned their own home, described how his family broke down after his brother died when he was a teenager:

I first became homeless I think—well I left home when I was 14. But there was a big hit in the family. One of my brothers died when I was 14, he was 17...everybody went their own

"Tara"

Tara, a 41-year-old Native American single mother now living in Pine Grove, grew up in a family rife with domestic violence such that her mother would bring Tara to her work site to sleep under the desk because it was the safest place for her and the kids.

I've never physically seen my dad hit my mom, but I know he broke her jaw. He shot her with a 12-gauge and just the pellets got her. But I think that was before we were even born. But other than that, great upbringing. I had a great dad and mom besides them drinking—never moved around. Mom worked at the Pentagon. Dad was a construction worker.

Plenty of nights I slept under her desk at the Pentagon because we left him. Because she figured that's the safest place to be. He'd never come there looking for us. So mom always kept us safe. But times that he wasn't drinking, and even sometimes when he was drinking, he was cool. He was Dad. Never a night without dinner on the table. He always cooked—drunk or not, he always cooked.

⁷ Interviewees were not usually able to give us accurate details on the number of times they moved as a child. We were, however, able to get a general sense from the interviews about whether a person experienced some degree of residential instability during their childhood.

different direction.... I left home, so got into drugs for a few years, got out of it, got clean...after being in and out of jail.

Jim tried returning home, but “*I just didn’t get along with my parents.*” Throughout the interview he described his difficult relationship with his father, including ongoing criticism and abuse. Poor parental relationships were common for interviewees who had experienced teenage homelessness, making it hard to reach out to family members for help to regain stability.

Childhood Traumas

Childhood traumas, referred to in the literature as “adverse childhood events,”⁸ seemed to play an important role in reducing overall adult resiliency, contributing to mental health challenges and addiction. For about half of the people we interviewed, childhood family physical or sexual abuse and neighborhood violence contributed to present-day mental health challenges. Moses grew up in a neighborhood of Easterly with high levels of drug-related violence. He watched many of the teens and young adults who were his friends get killed. At home, his father was an alcoholic and beat his mother and the kids. Moses turned to alcohol and drugs, which led him down a path of periodic incarceration and residential instability. As an adult, Moses struggles with depression. Still living in the same city where he grew up, he has tried to escape the neighborhoods where he experienced these traumatic events.

Jermaine described being regularly beaten by his father. His sister initially got the brunt of it, then, when she left the house, he became the main target. He described how he finally stood up to his dad: “*Once I got to that age to defend, I tried to kill him a couple of times. I pointed guns at him a couple of times. I never had the strength to shoot him. It was just more letting him know that you’re not hitting me no more.*”

Three of the interviewees had such traumatic childhoods that they were unwilling to talk about it. Once the tape recorder was off, an interviewee, Bunny, did say that childhood trauma had led to her having post-traumatic stress disorder (PTSD). Another interviewee asked about his childhood looked down at the floor and went quiet before saying, “*I’d prefer not to talk about it.*”

Factors That Reduced Resilience as Adults

The green oval in exhibit 3 depicts factors that reduced the resilience of people we interviewed when they were adults.

Precarious Work and the Cost of Housing

Seven of the 30 people we interviewed were working in the immediate period before becoming homeless and continued to do so throughout their time being homeless. They talked about challenges with covering the cost of housing in their communities. Several talked about variations in numbers of hours of work they were able to secure, which made it difficult to afford the fixed cost of housing.

Lack of Access to Financial Resources

Prior to becoming homeless, the people we interviewed had exhausted the financial resources that might have allowed them to maintain housing. Lack of access to financial resources was usually an ongoing and chronic challenge, starting with childhoods in families who had limited incomes and little or no savings. As adults, they often had extended periods of unemployment.

⁸ Research suggests that childhood traumas can adversely influence later adult outcomes in a range of areas. See for example, Sacks, Murphey, and Moore (2014).

Two interviewees had exhausted their assets as a result of addiction. Victor, a White man in his 50s, had worked as a mason, running his family business building and repairing swimming pools. He owned a large house and a car and had received an inheritance in the form of significant savings. After a heart attack, he had to stop work. He had a triple bypass surgery and was prescribed the opioid oxycodone to manage the pain:

[T]he pills I was getting when they first put me on them were \$2 a piece, and then they went up to \$4 a piece, and then they went up to \$7 a piece and last time I got them, they went up to \$30 a piece. And I got to take six of these—seven in a day.... And you can get a bag of heroin that's the equivalent of probably 10 of those pills for \$20.

Before long Victor had spent all his inheritance on his drug addiction and could no longer afford to pay his mortgage. He lost the house and then rights to visit his daughter when it became clear that he was unable to care for her as a result. At this point, he became homeless: *“I had stability right up until I got onto heroin.”*

Being out of work due to a disability was another reason that households exhausted their assets. Living in Pine Grove, William had been without a job for 8 years. His expenses had outstripped his disability income, and he had drawn down his retirement savings to pay for his housing and living expenses. Jude, living in Easterly, was at risk of exhausting his retirement savings: he had lost his job, was denied unemployment benefits, and was unable to afford housing. So, he decided to stay at a shelter while he had some retirement savings left. He hoped to find a new job while he was receiving help from the RRH program.

Almost all the interviewees had no assets or savings to start with. Nor did they have access to extended family assets. For the most part, extended families either were financially precarious themselves or were unable to provide the level of financial support needed to keep the interviewee housed.

Addictions, Mental Health Challenges, and Grief

Of the 30 people we interviewed, 13 had mental health challenges or addictions. Ten had addictions, and nine had mental health challenges. Six people had both, with their bipolar disorder, PTSD (diagnosed and undiagnosed), or other mental health challenge leading to addiction. Two people had lost a parent or close family member and found that grief exacerbated their addiction.

Limited Social Support Networks

Family networks could sometimes provide financial, logistical, emotional, and housing support to the people we interviewed. Often, however, their needs—housing, financial, or emotional—were greater than what family members could provide. The absence of social support networks affected their overall resilience and their ability to withstand trigger events, leading to homelessness.

Ricardo struggled to find work after moving to Easterly from Puerto Rico. He stayed at the shelter and was sometimes unable to afford his phone bill. His wife or his mother would send money to ensure they could stay in touch, but they were not able to help him with rent.

A few people we interviewed had limited family networks because they had lost siblings to violence, illness, or drug addiction. For others, their own mental health and addiction challenges strained their relationships with friends and family. In one case, offers of help came with strings attached. In Easterly, Natalia, the young single mother of a toddler, described how she was kicked out by her mother at age 13 and then couch surfed with friends. In return, she sometimes was expected to *“kiss butt,”* which could include providing sexual favors to male hosts. When Natalia became pregnant, the parents of her child’s

father would help their grandson, but they refused to help her because they were Puerto Rican and she was Dominican.

Harry and his mother, Magda, emigrated from Colombia when he was a child. After escaping a domestic abuse situation in another city, they found themselves in Easterly, knowing nobody and with no idea where to go. Magda described the situation, “*No teníamos a nadie, no teníamos amigos, no teníamos familia* [we didn’t have anybody, we didn’t have friends, we didn’t have family].” All their family had remained in Colombia, and Harry and Magda had to rely on the charity of a church that took them in and housed them until they could get into the RRH program.

Victor had moved from a southern state in an attempt to leave his drug addiction behind. As well as a lack of social networks, he was experiencing a degree of culture shock: “*I don't know anybody up here. I don't know how to dress. I don't have any friends. I don't fit in. I can't understand most of the people up here. I can't understand their accents.*”

Two of the people we interviewed created the boundary themselves, not wanting to weigh on family members. Jude was caring for his father and lost his job, but he did not want to ask for help from his father or his siblings. He repeated the phrase “*I always want to be a productive member of society. I want to be a taxpayer; I don't want to be living off of somebody else's charity*” a few times during the interview. Asked whether he had reached out to his family for help, he said:

I guess I was kind of embarrassed by the whole situation and I didn't want them to...really know about it and I didn't go into too many details when I was homeless and stuff.... I'd just check in with them once in a while, give them a call, “Hey, I'm still alive and, you know, looking for a job right now,” that kind of stuff, you know. It's kind of superficial stuff, but I just didn't want to be an imposition on them, I guess. It's...kind of hard to swallow my pride and talk about stuff like that, but it is what it is.

Incarceration and Criminal Record

For nine of the 30 people we interviewed, incarceration, sometimes related to addiction, in a few cases to violent crimes, created financial and housing precariousness. Two people told us they had held up a grocery store in order to get money to pay for heroin. One person had been imprisoned for sexual offenses against children.

“Moses”

Moses grew up in a historically African-American neighborhood of Easterly, his parents having traveled north from Alabama and Mississippi during the Great Migration. His mother was a nurse at a local hospital, and his dad was in and out of work. Moses was one of five brothers and two sisters. Home life was violent and surrounded by addictions. His dad was an abusive alcoholic, and many of siblings ended up struggling with their own addictions.

One of the first students to integrate Easterly schools, Moses was targeted with racial epithets and had rocks and bricks thrown at him on his way to school. The neighborhood he grew up in was rife with abandoned buildings and gangs. Moses lost two of his brothers to violence on the street. Moses was not one for street violence but ended up with an addiction of his own.

His mother finally decided to leave his father and moved into her own place, only to be diagnosed with terminal cancer. She died shortly afterwards. Moses was devastated and lost one of his main support systems. He sank further into his addiction, regularly moving from being incarcerated, to the streets, to drug rehab centers, and then lodging with a sibling.

Over the years he lost two more of his brothers to illness. His most recent stint of homelessness occurred after losing one of his brothers while he was staying at this brother’s house.

At age 55, Moses hopes that he might be able to turn his life around, but he feels hopeless and depressed about the prospects. He has trouble finding a job because of his criminal record and the grief of losing his brothers overwhelms him at times.

He dreams of having a place where he can invite his daughter and grandkids over and cook them a roast. He is in a training program to work in the food preparation industry.

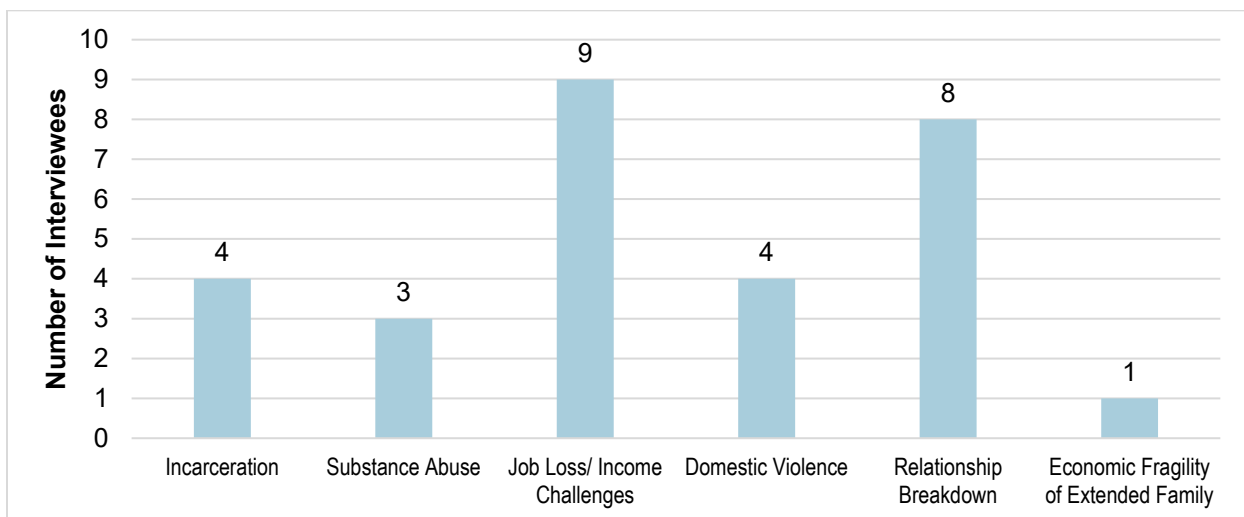
Those who had been incarcerated encountered challenges in finding and maintaining housing and employment. For example, since his youth, Steve, a single White man in his 40s, had had a criminal record (he did not disclose the crime). Although he was able to find apartments to live in, at some point the landlord would discover his criminal record and ask him to leave. Steve would move on and try again. Moses found that his criminal record made it hard to get a job. Jermaine moved between Pine Grove and a city in the Midwest, the two cities that he grew up in. To avoid dealing with the consequences of an arrest (such as for drug dealing or gun possession), he would move from one city to the other, and this contributed to his housing instability. Interviewees with felony records continued to face challenges securing housing or had to pay more for lower-quality housing (especially in the case of two sex offenders) once they entered an RRH program.

Trigger Events into Homelessness

Usually a clearly defined trigger event had pushed an interviewee from being precariously housed to becoming homeless. Trigger events were usually related to existing vulnerabilities that became so severe that homelessness was unavoidable, and in some cases included multiple trigger events. Among people interviewed who gave us one or more direct reasons for their homelessness,⁹ the most frequently mentioned tipping point was a job loss or another income-related challenge, followed closely by the breakdown of a key relationship with a parent, sibling, or partner as the result of a break-up or death (see exhibit 4).

Across our interviewees, there is a great degree of similarity between the types of vulnerabilities described above and these trigger events. In one case, a challenge (such as a relationship breakdown) may have reduced someone’s resilience but not led to homelessness, whereas relationship breakdown could be the trigger event for another person. For example, Moses and Tara both came from families with domestic violence and struggled with addictions. Tara’s addiction itself was the cause of her homelessness, whereas for Moses—who had been chronically homeless—his latest episode of homelessness was triggered by the death of the brother who had been housing him.

Exhibit 4. Trigger Events to Homelessness (n=27)



Source: Interviews

⁹ Three interviewees were vague or did not wish to discuss what had led them to become homeless.

Nine interviewees became homeless because they were unable to pay their rent because of their low wages or unpredictable hours. No longer paying the rent, they were either evicted or left voluntarily in anticipation of eviction. In several cases, the person had lost a job or had a partner who was no longer able to work. For example, Jay and her family became homeless when her husband was unable to work after losing his leg as a result of diabetes.

For eight interviewees, the relationship with a parent or a partner with whom the person lived broke down as a result of conflict, illness, or death, which led to the person leaving or being told to leave, tipping the person into homelessness. Domestic abuse is a particularly violent form of relationship breakdown we report separately from other relationship breakdowns. Four interviewees experienced domestic abuse that resulted in the interviewee fleeing the situation and becoming homeless.

For four interviewees, incarceration led directly to homelessness. Michael had been living in the same apartment for 4 years with a Section 8 voucher that had allowed him to afford housing. Then he was incarcerated for a couple of years. When he was released, he no longer had the apartment or the voucher, and he has been homeless since. Steve was evicted from his apartment when his landlord found out about his criminal record. He doubled up with a friend whose lease allowed Steve to stay for only 90 days. Steve then went into a shelter. Joel was incarcerated for 20 years for sexual crimes involving children. During the time he was in prison, both his parents died, and his brother disowned him. Joel left prison with \$147 in his pocket and went immediately to a shelter because he had no job and no intact family or social network to house him.

In two cases, substance abuse itself was the direct trigger event. Brandon returned from the Gulf War and got as far away from the people he served with as possible. Though not diagnosed with PTSD, over time he slowly developed an addiction to alcohol and ended up separating from his wife because of it. At one point, when particularly depressed, he went on a binge of smoking crack and drinking. Afterwards, realizing that was not what he wanted to do any longer, he checked himself into rehab, and then from rehab to a shelter.

“Anthea”

Anthea is a 22-year-old African-American mother to a 3-year-old and a 1-year-old.

Heavily pregnant, she had moved out of her mother's house and into her partner's mother's home—a double-wide trailer in a town near Pine Grove. The couple intended to buy the trailer over time while living in it; however, Anthea's partner was abusive.

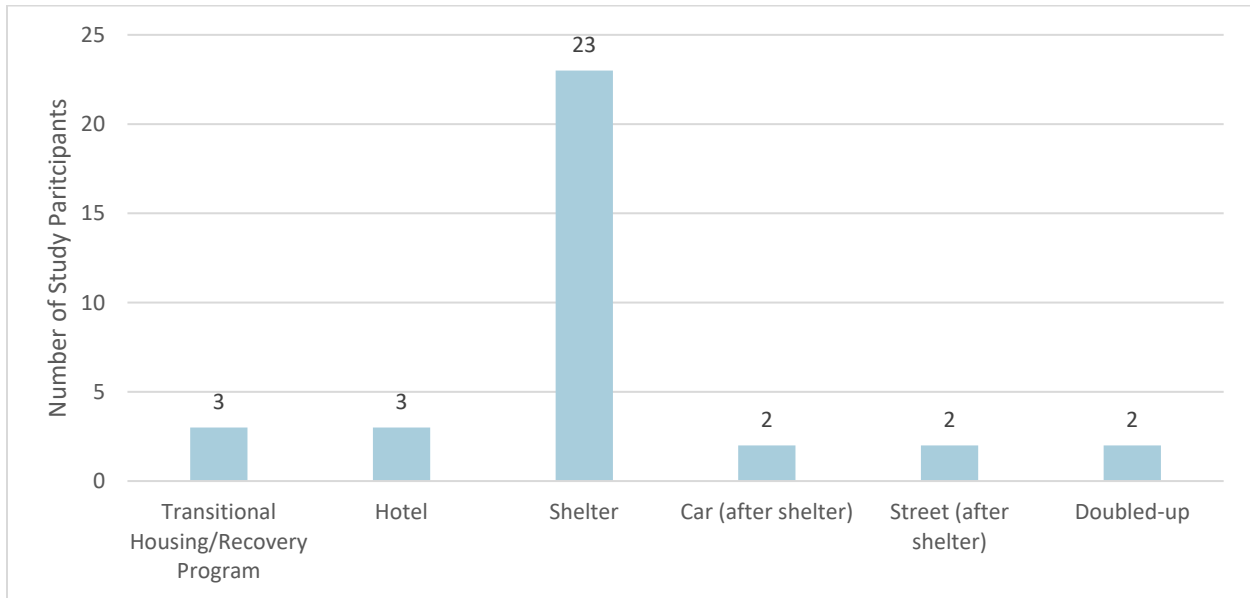
When her second child had just turned 1 year old, hoping to escape the abuse, Anthea left him one Wednesday night. She showed up at one of the Pine Grove shelters hoping to get help but was not immediately helped. She sat on the street with her two young children, preparing for a cold night outdoors. A passerby called the police, who showed up and helped her get into a shelter.

Since then, Anthea has been finding her feet, getting housed and working towards her CNA certification. She hopes to become self-sufficient within a year.

3. Rapid Re-housing Program Entry

Of the 30 people we interviewed, 23 told us they were in emergency shelters immediately before entering an RRH program in Pine Grove or Easterly. For 14 of those who told us their amount of time in emergency shelter prior to RRH entry, the median time was more than 2.75 months. A few explained they had been in multiple locations over their most recent episode of homelessness, such as a shelter then a car or hotel, after they had applied to RRH (exhibit 5). Three were in transitional programs, three were staying in hotels, two were staying in cars, and one was on the street, having just been kicked out of a shelter. Two people were doubled up but in situations they would have to leave.

Exhibit 5. Location Immediately prior to RRH Program Entry



Source: Interviews

Those we interviewed were staying in a variety of different homeless shelters in the two cities. One shelter was run by the same organization as the RRH program, others by churches and non-profits.

Experiences in Emergency Shelters

For nearly all people we interviewed who came to an RRH program from an emergency shelter, the shelter was an unpleasant and challenging place to stay. Staying in a shelter influenced how interviewees experienced the RRH program because they felt very relieved to be exiting the shelter. Specific challenges that interviewees articulated included rules and schedules that made it difficult to work, unsafe environments, and exacerbation of mental and physical health challenges.¹⁰

Set Shelter Schedules

The seven people who were employed while staying in emergency shelter reported that it was difficult to manage their work schedules, given the shelter’s rigid schedules. For example, Tania noted that to get a bed, she needed to show up at the shelter at 3:30 pm to enter that night’s lottery. At one point she got access to a “guaranteed bed,” but then she lost it.

¹⁰ The shelter experiences that are described in this section are the interviewees’ shelter experiences that immediately preceded entry into the RRH program.

Unsafe and Unpleasant Living Environment

Many of the people who came to an RRH program from a shelter described witnessing physical violence, fearing that their phones or other personal items would be stolen from them, smelling shelter residents who defecated or vomited on themselves, and suffering a general lack of privacy. Natalia, who was pregnant when she stayed in the shelter, described some nights when there were not enough beds and she slept on a chair in the shelter foyer. When she did have a bed, it wasn't much better:

I barely slept when I was sleeping in the shelter because the shelter beds are really hard and the blankets that they give you are so uncomfortable.... When I was staying in the shelter, the blanket gave me a rash...but the first week that I stayed in a shelter, I didn't sleep.... A lot of women would argue with each other over who's taking this bed or who's going to take a shower next or.... Anybody would argue over anything, that their items were missing, there was always something missing.... They don't really clean the showers...Every time I took a shower, I would smell urine. The whole shelter smelled like urine.... I even got robbed in a shelter. I got robbed for clothes.

Victor, also described taking a shower in the shelter as a horrible experience:

So you get about 500 guys, and the shower room is about the size of this café here.... Some of them don't shower. Some of them hadn't showered in years. They break into each other's lockers...it's a horrifying experience to go through. It is degrading in every single way that it can be. And there's guys in there that prey on other guys. They rape people. They rob them. They know every trick in the book. They act like your friend, and then they rob you or this or that.

Staying in shelter is particularly hard on families with children. Bethany described the challenges she had with parenting in the shelter environment:

"It was very hard...to keep doing the community living situation.... I was so tired of constantly getting into something with somebody and the kids, 'Why are your children...?'"

"Ricardo"

Ricardo is a 50-year-old Puerto Rican who migrated to Easterly looking for economic opportunities to support his wife and young son still in Puerto Rico. Before finding an apartment through the RRH program, he stayed in a shelter for a year, working at a job during most of that time.

He described his stay and the challenges of learning the rigid shelter schedule and rules. *"And then you got to make another line over here, then you got to make a line over there, too, a line to go to take a shower. And it was kind of hard for me because it was a new experience."* He threw himself into his work to avoid being at the shelter: *"I used to rather be at work.... Sometimes I used to work overtime just because I was in peace.... I'd work on my computer, and it was good to be there [at work]."*

He struggled with getting enough sleep and food at the shelter and he was often tired. This motivated him to find a way to leave the shelter:

I needed to get out of here because my eyes were black. I wasn't getting no rest because I was working all day. I used to get off work 6:00 or 7:00 at night and then come over here. By the time you make a line and do all this stuff and go to bed, it will be 9:00 or 10:00.... It was a real hard routine.... I wasn't eating...they serve food here at 5. I used to get off work at 6:00. By the time I would get here, it would be 7:00, 7:30 because I used to catch the train and the bus. So sometimes I would go to sleep without eating. And it wasn't easy, have to wait the next day, so I could eat something. And then until I started getting paid—and then after that, you start saving money and then get off work, and you could eat something. And you don't have to come over here and eat at the shelter.

Ricardo lost his job while he was at the shelter. He is still looking for work, hoping to be able to take advantage of Easterly's buoyant economy. His wife and son have managed to get to Easterly but are living in a different apartment, having figured out assistance in another way. Ricardo hopes they might one day live together again.

Three of the people we interviewed avoided staying in shelters, instead moving between sleeping on the streets, doubling up at a friend’s or family member’s house, paying for a hotel when they had the money, or sleeping in a car.

Exacerbation of Mental and Physical Health Challenges

A few people we interviewed described how staying in a shelter created health problems or made a problem worse. Victor described trying to avoid spending time in the shelter because he didn’t want the atmosphere created by other guests to affect his mental resolve to move out of homelessness:

But I just couldn't stay there. I just couldn't. The conversations, the smells, the arguments, the bullying, just the whole—I was trying to get out of that atmosphere. And I felt like I didn't want to become part of that atmosphere...there are many people have been in there for years. They're very, very comfortable in there, and I didn't want to be one of those people. I just, I didn't.

Moving frequently from shelter to shelter, Luke and Jay built up cumulative stress to the point where Luke thought this contributed to his having a heart attack.

Colleen brought her adult daughter, who has depression and bipolar disorder, into a shelter during the summer when her daughter was not at college. When Colleen and her daughter arrived at the shelter, her daughter had a panic attack.

She never had a situation, she's always been secure, plus we're both going through anxiety and depression problems and she gets panic attacks, and she had a panic attack right there in the shelter because she just couldn't do it. She just wouldn't stay. She said, "I can't stay here, I can't stay here."

Carina also struggled with anxiety and mental health challenges:

I couldn't deal with it, my mental state from, like, being in the shelter off and on for so many years. It's been like 8 years I've been in and out of the shelter and stuff and the way that [they] wake you up in the morning in Overton.... Like, it tends to put a traumatic trigger in someone's head if they're not mentally stable.

Experiences with RRH Program Entry

The people we interviewed had all entered an RRH program, although six had not yet secured housing. They had heard about the program from a mixture of word of mouth (other shelter residents) and referral by shelter or program case workers such as Veterans Administration staff. Several found out about the program very quickly, almost upon entering the shelter; others did not for a year or longer. A majority of people we interviewed in Pine Grove reported completing an assessment or survey of some kind, and it was their impression that this determined their eligibility for RRH.¹¹ In Easterly, the process appeared less consistent. Some interviewees in Easterly described completing an assessment, whereas others met with a case worker and did not remember a formal assessment asking a structured series of questions. An

¹¹ Pine Grove had just implemented a coordinated entry system for non-veteran RRH programs when we started recruiting interviewees, so our interviews reflect this new standard process. (Pine Grove’s SSVF programs had already been using coordinated entry.) Homeward Bound was using basically the same internal process before coordinated entry began, but prospective participants would have to call each RRH program individually to find out if it had a slot for them.

additional source of confusion in Easterly was that some participants who were employed at the time of entering the RRH program thought that employment was a requirement to qualify for the program.

Self-advocacy seemed an important component of getting access to the program. Tania, an African-American woman in her 50s, talked about having a clear understanding that she needed to advocate for herself at the time she entered a shelter in Easterly. Carina, also in Easterly, talked about entering the shelter lacking confidence but eventually realizing that she needed to self-advocate.

I just, pretty much, came into Overton and didn't really talk to anybody until I was fed up with just being there and having nobody [no case workers] come up to me.... And I was just like, all right, something's got to be done so I spoke up. And I talked to the necessary people...I feel that I needed to speak up. Because if I didn't speak up, then I would've lost this chance, you know.

A dominant experience for people who entered the RRH program in Easterly is a lack of clarity about what the program would provide and for how long. Interviewees' knowledge about the program was more limited in Easterly than in Pine Grove—more interviewees from Pine Grove understood the specific parameters of what the program could provide once they were accepted.

A common narrative across a majority of the people we interviewed in both cities was a lack of control over the process and a need to flow with the process as it unfolded. They usually did not know what was coming next and waited to be told what to do. While many people did not articulate anxiety about not knowing what was happening, for others it was stressful.

Most interviewees in RRH programs seemed to understand that the program was a stepping stone to other resources, rather than something they could rely on long-term. For example, Javier described knowing that he could expect support for a set period, but he was unsure of how long that support would be. Another RRH interviewee said that she understood the support would go for 2 years.

In some cases, what we heard may have reflected the ability of the people we interviewed to understand what program staff told them or even their ability to articulate what they understood. For example, Javier noted that he was “*under the influence*” when he had been told the parameters of the program, and he hoped to check in with his case worker to get more clarity. Bunny struggled with anxiety-related comprehension and verbal articulation challenges.

It seems that, at least in Easterly, people entering the RRH program were told that it would help move them from homelessness into housing while they went through the process of applying for Section 8

Navigating Uncertainty

Luke and Jay described the high degree of uncertainty in the RRH program process in Pine Grove:

“Okay, once we got picked, what's next?” And they really couldn't explain to us what was next. We went weeks without knowing. Okay, we got picked by [RRH Program], but what does that mean?... It was, okay, are they going to help us find a place and just pay that month's security and that first month's rent and then that's it and we're on our own? Every time you ask or give a little scenario, [they reply], “I'm not sure because each one is different. I'm not sure, I'm not sure.” When [Case Worker] finally said that, we went through with [Intake Coordinator]. And even when we did our intake, we still wasn't clear as to what exactly [RRH Program] will do for us and our family. After that interview with [Case Worker], that's when we got clarity as to how they'll help us, and I don't know if that's for everybody, so I can only speak on our situation.

Eventually the program coordinators provided more information, but both Luke and Jay experienced high anxiety with the program's tailored nature—which made it hard to plan and know what was coming.

vouchers or RRH would help them afford security deposits and first and last month's rent when they searched for a unit with a Section 8 voucher.¹²

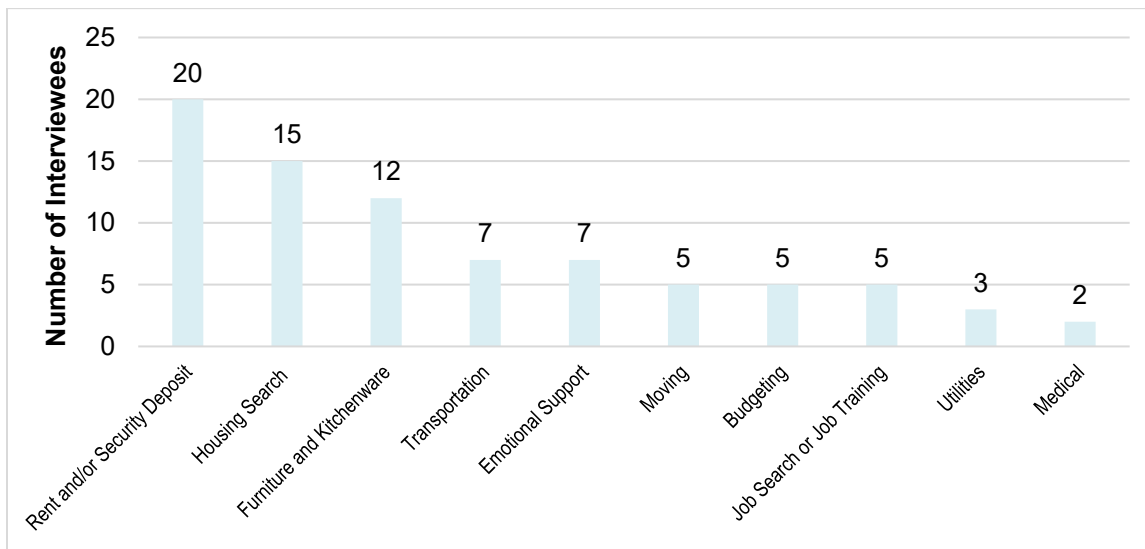
¹² This kind of bridge model was not evident in the RRH treatment arm in the Family Options Study (Walton et al., 2018; see footnote 1) but appears to have become more common since then (Dunton and Brown, forthcoming).

4. Rapid Re-housing Program Experience

RRH Services Received

The 30 people we interviewed all had entered a rapid re-housing program. Six had not yet secured housing and begun receiving rental assistance, but they already had received other forms of assistance—for example, case management—through the RRH program. Among the 24 interviewees who had secured housing, 20 told us that rental assistance or security deposits were among the services they received, as shown in exhibit 6; the remaining four did not explicitly describe their rental assistance.¹³ Housing search assistance was the next most common service mentioned, followed by provision of furniture and kitchenware. In addition to these direct housing-related services, the people we interviewed talked about a variety of additional supports, referrals, and services, though none of these additional services was reported by more than seven interviewees.

Exhibit 6. Rapid Re-housing Services Reported by Interviewees



For example, Jermaine, an interviewee in Homeward Bound’s program in Pine Grove, told us about rental assistance, gift cards for food, bus passes, a referral for mental health care, and participation in a job training program. He was kicked out of job training, however, when he missed the day of a random drug screening in order to be at the Human Services offices to get his utility shut-off notice paid.

RRH interviewees were often participating in an ecosystem of social and health services broader than those provided by their RRH program or to which RRH case managers referred them. Veterans were receiving health care and other services from the Veterans Administration. Other interviewees were receiving case management and material support from other benefits programs or were participating in programs for sobriety, health care, job search assistance, and (in a few cases) court-mandated activities.

¹³ Services shown in the exhibit should be understood as the services that interviewees remembered receiving. Thus, to some degree, they may represent the services interviewees valued, rather than the full set of services provided. For example, based on our observations of a few case management sessions in Pine Grove, it appears that verifying income, coaching program participants to plan and save money, and discussing budgeting are standard services there. A few interviewees in Easterly reported having budgeting and savings goals, but only five people we interviewed across the two communities mentioned this as a specific service they received.

Rental Assistance

Most of the interviewees who reported they had received rental assistance described some level of variation in the amount or duration of their assistance based on their circumstances. Several told us that their RRH program paid the full amount of rent for the first few months, then tapered off to paying half of the rent for a few months, and then ceased payment. Some said that they had received additional help after they began paying the full rent, usually when they lost a job or could not get enough hours at work. Joel, an RRH interviewee in Pine Grove, summarized the agency's approach: "*The standard entry-level agreement is usually for 3 months. But [my case manager] made brief, vague mention that sometimes, on some occasions, that can be extended to extra months. I don't know if they're going to do that for me or not.*"¹⁴ Interviewees described understanding the program as being available to them for anywhere from "first, last, and security" (in Easterly) to up to 2 years (in Pine Grove), most commonly talking about a time horizon of about 6 months.

Interviewees expressed different sentiments about the uncertainty and flexibility offered by the RRH programs. Jermaine, a 36-year-old single man in Pine Grove, appeared not to want to know how long he would be helped and even to believe that the uncertainty would motivate him:

I'm not even going to ask... I don't want to get too far ahead of myself. You get what I mean? I feel like if I already know they're going to pay it, I'll backslide.... I'm trying to humble myself. If I don't know [the program will pay the rent] and be worried about how I'm going to pay it, I know not to backslide.

Bethany, also in Pine Grove, alternatively described the relief she felt understanding that the program would provide support for a certain amount of time but could be flexible with extending assistance if she was not ready to assume the full rent when her initial period of support ended. Bethany moved into a two-bedroom unit owned by the RRH program's community development corporation with three children (twins, age 5, and a daughter, age 3) in the weeks leading up to giving birth to another child. The program was covering her full rent until she could go back to work. She hoped to find a job based on a hospitality industry training she had completed through the program. She was enthusiastic about the flexibility built into the program and that she was living in an affordable housing complex:

It seems manageable to me, especially with the fact that they're giving me time to build up [savings]. Now [my case manager] also stated that like if something happens like I'm having this baby or I get sick or something, break my leg or anything, anything—knock, knock on wood—happens that they're not just going to be, like...that sixth month they're going to be, like, "Well, you're just going to have to...." They're reasonable with the situation. You know what I mean? They'll look at the situation and give you time or still help you. I think that's also one of the best reasons why I'm happy that it's their property and that it's not another landlord, because they can be more reasonable about the situation rather than if it was a private landlord, they don't really have to be reasonable, so I'm grateful for that.

In contrast, Bunny in Easterly was plagued by anxiety from not knowing how long her assistance would last:

It was like you want to commit suicide or something because it was just that you don't know which way—it's like you don't know which way you going here. You know what I'm saying? They saying, 'Well your time might be up in that 12 months range, okay? And you might have to

¹⁴ Dunton and Brown (forthcoming) found that this is the most common model of rental assistance provided by RRH programs.

come back to the shelter.” Now you have been in this apartment over nine months or whatever. Who's going to come back to a shelter? You know what I'm saying? Then you sitting there talking about, “Oh, we don't know if we can keep on paying your rent.” So where I'm going to be, in the street? So it all depends how they want to work with you. And it all depends how you willing to work with them. So I'm working with them.

Housing Search and Identification

Finding a suitable unit for RRH participants must balance many considerations: the participant’s preferences for housing quality and location, the affordability of the rent, how hard it is to find affordable units in the community, and landlords’ willingness to rent to participants (either because they receive assistance or because of their history).

Interviews captured variation in the division of responsibilities between interviewees and their case managers for finding a unit, with the case manager sometimes taking primary responsibility, the interviewee sometimes having primary responsibility, and the responsibility sometimes shared. We classified these roles according to interviewees’ descriptions.

Of the 24 people who had secured housing, seven interviewees described a leading role for the case manager in finding the housing. Case managers appeared to have worked through a network of landlords to find potential units or, in some cases, looked in areas they knew to be affordable. An interviewee in Easterly, Colleen, explained that the RRH program

was a blessing for me because they would turn my advocate. I could go to them, tell them my situation, and they were willing to work with me to help me look for apartments. So [my case manager], she would outreach apartments...they offered me places here within the city in areas I'm familiar with, they offered me places outside the city.... I was willing to apply for anything at that time. [My case manager] was positive, she was kind, she was motivating, she's energetic.

Robert, in Pine Grove, chose to live in a shared housing arrangement that his case manager found and described his very limited involvement in the search process: *“I looked on Craigslist every once in a while to see if they had any units kind of similar to what I'm in now. And that's about the extent of my search.”*

Six interviewees who described themselves as leading their own housing searches did so for a variety of reasons. Several reported wanting greater privacy and autonomy than what would be available in shared housing offered through the program. Other reported having a personal connection that helped identify a unit. Others, at least by implication, cited a lack of case manager support. Natalia in Easterly, who was approved for a housing choice voucher (HCV) based on to Easterly’s linkage of RRH to that program, reported:

[T]he least helpful [aspect of the program] was the fact that I had to look for the apartment because there were months, weeks, days that would go by and I called so many owners, I called so many places, I did so many applications...but all these homes are so expensive and all these owners want you to have good credit, and all these owners discriminate [against people who have HCVs]...you can't just go to an office and say, “You're my case worker, you have to look for apartments for me.”

One caveat about this group of interviewees leading their own housing searches is that three of these six were recent entrants to the program and still looking for housing. It is possible their experience will change as they are in the program longer, shifting more towards sharing responsibility for housing search with their case managers.

Six people described working in parallel with their case manager to identify housing. Like many RRH interviewees, Holly felt that, despite her efforts, she struggled to find an appropriate unit because “*a lot of them were too expensive...out of a reasonable range.*” In November 2018, she accepted a two-bedroom apartment found by her case manager, for \$880 a month, somewhat below the median rent in Pine Grove. Similarly, Tania in Easterly described the complementary roles she and her case manager played in finding a unit: “*It was like, ‘Okay, you look. You find something. Let us know. We’ll call the landlord. We’ll see if they’re willing to take the security deposit.... And do you like that place?’ That was always what they’d tell you. ‘You think you’d want to live here?’*” In some cases, case managers went to view units with interviewees, sometimes driving them if they did not have transportation, and coached them about a unit’s suitability for their needs.

Interviewees by and large were grateful to be in a unit because it was so much better than the alternative, but there were some unit characteristics that interviewees sought out more than others. Most often, these were arrangements that offered them privacy, autonomy, and flexibility, which were lacking in the shelters, cars, doubled-up situations, and prisons they were in immediately prior to RRH. Several people who were homeless on their own, especially in high-cost Easterly, tried to find single-unit apartments without roommates or units with fewer roommates than other options they were shown. Despite preferring to live on their own, several interviewees were living in shared housing, either identified through their RRH program or that they found on their own.¹⁵ Nevertheless, we learned of no families who were using their RRH assistance to live in shared housing. Rather, for affordability, families were often making do with smaller units than desired (for example, single parents with three, four, or five children living in two-bedroom units).

The people we interviewed, both those who had secured housing and those who were still looking, described individual challenges that made the housing search more problematic than just finding an affordable unit: prior evictions, felony histories, sex offender registration, or lack of any history as a leaseholder. Six interviewees had formal evictions on their records; five additional interviewees described informal evictions. Both formal and informal evictions reverberated through interviewees’ lives, but formal evictions had much more deleterious effects. Two interviewees in Easterly had been evicted from Easterly public housing, and Tania explained that this caused her to be blacklisted from other affordable housing opportunities in Easterly.

Because the Pine Grove community action agency that runs Homeward Bound also owns income-based apartment complexes, it can sometimes house RRH participants who have barriers such as histories of eviction. Five of the 11 currently housed interviewees in Pine Grove were living in units owned by the program. Many of the people who could not access such a resource described discouraging housing searches. For example, Moses, a single man in his 50s, explained that he had to look in a broad geographic area and believed that he was turned down for units for a variety of reasons: being a single man instead of a parent of young children, his criminal record, and his lack of rental history. His housing search was taking a toll on his mental health:

I get depressed [about losing out on apartments], yeah, I do. My heart just goes up and then it goes right back down.... I just pray to God, that’s all I can do. I just ask him, “Can you just find me something to call home?” I don’t know but it just doesn’t happen. I don’t know, because

¹⁵ Dunton and Brown (forthcoming) found that RRH programs are increasing their use of shared housing, especially in high-cost markets but only for individuals and not families.

probably because of how long I've been homeless, they'll probably be like, "Ah, he ain't going to be a good candidate."

He also described having a history with addiction that motivated him to want to avoid “*where I did all running and everything else, because for me I think it's going to be easy to fall right back into a cycle again.*”

A few other interviewees also described trying to keep away from neighborhoods with drug and alcohol activity, including neighborhoods where they had once used. One family household considered the school district, noting their desire to keep their child enrolled in the same school, although children in at least two families in Pine Grove were being bused to their old schools.¹⁶

Role of Case Managers

Case managers are RRH participants' direct interface with the RRH program and are therefore crucial to participants' experiences with RRH. Many of the people we interviewed attributed their assistance directly to their case manager (instead of to the program or its structure). All were extremely positive about their case managers, with gratitude being the overwhelming sentiment.

RRH interviewees described both the broad range of tangible supports their case managers provided and emotional support they valued.¹⁷ For example, Jasmine, the post-RRH interviewee introduced at the beginning of this report, described a broad suite of services she received in addition to the RRH rental assistance and the help applying for the HCV she was receiving at the time of our interview: “*a better relationship with my kids, learning to be able to talk about stuff...clothes, my electric, school supplies, my Christmas shopping for my kids...gas...if my baby needed milk...Pampers...food.*”

For many people, emotional support is a highly valued part of the services case managers provide. Some interviewees said that what they most valued was their case managers' relationship to them, being empathetic, coaching them against falling back into substance use or encouraging them to get into counseling, and taking time to come meet them at the shelter or driving them to look at housing. A few people specifically described the psychological benefit of having a case manager who was willing to extend herself to help. Joel, in Pine Grove, was effusive about how the intake coordinator and his case manager “*both came to the shelter to talk with me. I was very pleased by that.*” Javier, in Easterly, was one of a few people who struggled to put into words his gratitude. He had a history of substance abuse, prison time related to his addiction, residential instability, and difficult family relationships:

I don't even know how to explain it. They're relentless in a good way, though...always calling me...check in on me, see how I'm doing—just honestly, down to earth, generally good people. I'm not used to being around good people. I'm not used to people...wanting to help me.

¹⁶ Under the McKinney-Vento Act, the U.S. Department of Education requires local school districts to allow homeless students to remain enrolled at their school of origin and to receive transportation if requested. <https://www2.ed.gov/policy/elsec/leg/essa/160315ehcyfactsheet072716.pdf>

¹⁷ Few participants described the frequency of their meetings with case managers. Many current participants reported communicating with their case managers approximately monthly for a period, then as needed via email, phone, text, or occasionally in person. This mirrors Dunton and Brown's (forthcoming) finding that the frequency of case management meetings in RRH programs is highest before housing placement and decreases thereafter.

Jermaine described the pivotal role his case manager played in influencing him to stop using and selling drugs, to address the mental health issues he had been self-medicating, and to take responsibility for himself in a new way:

At first when I signed up with them and I got signed with the program, I was still more in depressed mode. And I was just basically letting them just pay it.... But after that six months turn in a certain sense, I snapped out of it. I was like, okay. I can't let this opportunity down. You know what I mean? I can't let this slip. I can't let this slip. [My case manager] actually had a talk to me, too. She had to tell me like, you need to wake up because this program ain't going to be here forever.

And she didn't talk to me as a client. She talked to me as a human being. You get what I mean? She didn't say, "This program is going to end on such and such date. You need to do this before it ends." She didn't come at me like that. She came at me like a human being.... She talked to me and I really felt like it was somebody that really cared about me, not cared about her program that she signed somebody up for.... And it made me feel good. It made me feel like somebody cared for the first time.

After that conversation, Jermaine reported that he stopped using street drugs, signed up with a psychiatrist who prescribed medications for his bipolar depression, and turned to religious faith: *"I turned to my higher power and just leaned my faith on my higher power, Homeward Bound, and myself. It was like my higher power and Homeward Bound, it's the circle and I'm in the middle."*

Most often when people expressed frustrations or negativity, it was framed not as about their case managers but about the program overall, the affordable housing situation in their community, their own situation (for example, a criminal record, unemployment), or a combination of factors. One interviewee simply wished that his case manager had given him more explanation about the program. A few interviewees who had trouble finding units noted the irony of the program being named *Rapid Re-housing* (one going so far as to suggest it was *Turtle-Pace Housing*).

Housing and Neighborhood Quality

Interviewees were grateful to the RRH programs for the assistance they received to find and pay for housing, but their experiences with living in those units and their neighborhoods were more mixed, approximately half positive and half negative.

The psychological satisfaction of having a place of one's own was the major benefit interviewees reported about having found housing through the RRH program. A few interviewees described being very pleased with the quality of their housing. Most, however, described shortcomings in their living arrangements, related either to the physical quality of the housing or to having to share space with roommates.

Colleen is an example of a graduate of RRH who had a high-quality housing situation at the time of the interview. She was living in an apartment that was a permanently subsidized unit within a larger market-rate housing complex in Easterly. The complex had private parking for residents and immaculately maintained and cleaned common areas that included a patio with a grilling area and swimming pool and a common room with a TV, couches, and an area in which to use computers. Describing the transition from being homeless to her current living situation Colleen said: *"That was a nightmare, and this is a dream."* She described her current unit:

Two bedrooms, a carpeted floor. It has a dishwasher, it has a microwave, refrigerator, garbage disposal, tiled kitchen floors, cabinets. You go into the bathroom, it's tiled floor. Everything is stainless steel, the faucets, the sink, the kitchen. We have a shower, bathtub, a nice big area for

the bathroom, like a lot of space. It's not like a cramped bathroom, it's a spacious bathroom. My daughter has her own room, walk-in closet. I have my own room, walk-in closet. Then we have a living room area, then we have a door to go on to a little porch, plus we have all these amenities I had mentioned, the gym, the pool, the grilling area....

Several of the people we interviewed had to sacrifice the quality of their living situation to get into a unit. Single adults often ended up in apartments with roommates even though they wanted to live on their own. Some could not afford a one-bedroom unit, whereas others opted for roommates to be able to get out of the shelter faster. Families made analogous sacrifices by moving into cramped living quarters. In a few cases, people resolved to accept the sacrifice because a less-than-desired apartment is better than the alternative: *"It's a step up from being at the shelter."*

Tara is living in a two-bedroom apartment with her two teenagers in Pine Grove. There is one bedroom for each of the kids, and Tara sleeps on an airbed in the living room. Though she likes the apartment and feels at home there, she has one complaint: her dad cannot visit because he uses a wheelchair and there is no elevator to her second-story apartment: *"[I] really would love for my dad to be able to come and stay with me, spend the night or something."* Moses expressed a desire to be able to host his grown children and grandchildren in his apartment, but he could not do that because he is in shared housing that will not accommodate his cooking a large meal and having several guests.

Some accepted these sacrifices in housing quality to the detriment of their physical and mental well-being, again because the alternative of homelessness was so much worse. Victor, a 52-year-old White man with a heroin addiction, had previously had three heart attacks and other health issues, but he was living on the fourth floor of an apartment building with no elevator. The location of his apartment is *"limiting. It's hindering my life because I can only go up and down those stairs once a day. If I got to go up and down those stairs twice a day, the next day I'm just like, don't want to do anything. I'm just wiped."* Not only did the situation exhaust him physically, it took a toll on his mental health. Detailing his deep angst, Victor said,

It gives me anxiety thinking that I could be there by myself and then first of all, being able to call them to begin with and explain where I am. And then how are they going to get through three dead-bolted doors, up four flights of stairs? It's a scary situation...but it is better than being found frozen to a park bench.

"Natalia"

Natalia, a 23-year-old Latina mother to a 3-year-old, was managing the conflicting emotions of incredible gratitude at having a place to live while at the same time being frustrated with an apartment where the dishwasher, sink disposal, and refrigerator did not work and where there was black mold throughout the kitchen:

The first day that I moved in, I bleached the whole house.... I told the landlord, I said, "Wasn't you supposed to get this apartment fixed before I moved in?" "Oh, my cleaners did clean it, but I guess they didn't do a good job." No, no. The whole back door, mold. When I put bleach on it, every time I sprayed it, the dirt was flying. So, when I grabbed a sponge and scrubbed it, the whole dirt was coming down, mold, everything. It was just ugh, it was disgusting, like ugh!

The heat did not work when she moved in and still did not work at the time of the interview, and there was a dangerous socket in the room, which she had hurt herself on and was scared might hurt her son. The broken refrigerator leaked and would start and stop and melt her food. *"I believe it's leaking now, so when I get home, I know I have to clean the door and dry it off and stuff. I have to put on the fan or something because it leaks every day."* She also described finding insects in the apartment. *"I even find centipedes inside the apartment.... So in my apartment, I'm finding centipedes a lot, and I'm finding ants, centipedes, ants, weird bugs that I've never even seen before."*

The back yard to her apartment is filled with trash so that she cannot use it or let her son run around.

Michelle’s apartment also gave rise to both physical health concerns, because of black mold, and mental health concerns. She felt anxious and depressed about living with her four young children (all under age 8) in a two-bedroom apartment.¹⁸ She also had general maintenance issues with the unit.

Michelle was one of a handful of interviewees who either had already or were preparing to move into new housing situations at the time of the interview. Michelle lived in an affordable housing unit owned by the RRH program and was working with her case manager and landlord to move into another unit when one came available. Since the interview, she has moved into a recently renovated two-bedroom unit in the same complex. Four other interviewees who moved did so for a combination of reasons related to poor housing quality, disagreements or discomforts living with roommates, and one case of a misunderstanding with a landlord about the ability to have a pet.

The aspect of their housing that interviewees were most often positive about was their neighborhood, sharing sentiments such as, *“It’s quiet and really peaceful. I don’t have to worry about no crime, nothing.”* Joel, who is living in Pine Grove in shared housing with other felons, noted that his neighborhood—where he, as a registered sex offender, is able to live—is *“very quiet. No gang activity that I’ve seen. No beer cans in the yards, you know, anything like that. People seem to be well behaved—no fights. No—haven’t seen many police cars or anything like that. So it’s a very well maintained neighborhood.”*

Some people considered the neighborhood where they lived to be a sacrifice. Jay said, *“This is not where we would have chosen to live, definitely not. Especially the neighborhood.”* Jay and Luke lost their apartment in a suburb of Pine Grove known for being family friendly and quiet, and for its good schools, which their 8-year-old was still attending through a bussing program. Their new house was renovated by Homeward Bound and is located in a high-poverty neighborhood with drug activity. They, like others we interviewed, tried to manage their concerns about safety by keeping to themselves. As Tania described,

You mind your business. You just—there’s a little crime and stuff. But there’s nothing you can really do about it. You mind your business. That’s it.... I just go to work and come home, shower, go to bed pretty much. I don’t really interact with my neighbors or any of that crap. I keep—pretty much keep to myself.

Access to amenities and transportation were additional qualities people evaluated in their neighborhoods. Jay and Luke had been able to walk to shops and restaurants in their old town but reported of their current neighborhood, *“There’s nothing around here.”* Moses was also unhappy in his neighborhood, because, in the town where he could afford an apartment, he was far from transportation, amenities, and services. In contrast, a few people specifically noted their unit’s accessibility to public transportation as a positive feature. Very few interviewees had their own cars, so accessibility to public transit was a requirement for most of them to be able to get to work or run errands.

Current Financial Situations and Housing Cost Burdens

These interviews sought to understand how households waiting for, receiving, or who had received RRH assistance manage financially, laying the groundwork for understanding how households will cope financially when RRH assistance ends, including paying for their housing. Of 30 interviewees, 27 provided information about their current financial situations (exhibit 7).

¹⁸ She was also newly pregnant at the time of the interview and has another daughter who lives with another family member but visits frequently—both adding to the space constraints of the apartment.

Exhibit 7. Interviewee Finances

Income	
Monthly income	
Zero income	n=6
Median monthly (non-zero) income	\$900
Monthly income range	\$50-\$3,500
Sources of income	
Employment	n=15
Social Security (any type)	n=8
Supplemental Nutrition Assistance Program	
Recipients	n=14
Median benefit value	\$191
Monthly benefit range	\$15-\$799
Expenses	
Median monthly expenses	\$846
Range of monthly expenses	\$113-\$2,103

Almost all the people we interviewed who had income earned it from working, with a few receiving Social Security benefits (either disability or retirement). Six people said they had zero income at the time of the interview, for a variety of reasons including unemployment, impending birth of a child, and waiting for a disability claim to be approved. Among those with any income, it ranged from \$50 a month—picking up odd jobs or temp work as needed to cover a bill—to \$3,500 a month, with a median of \$900.

Only about half of the people we interviewed were receiving Supplemental Nutrition Assistance Program (SNAP) benefits. No one reported receiving other public benefits such as Temporary Assistance for Needy Families (TANF), though at least one planned to sign up for the Women, Infants, and Children (WIC) program as her pregnancy progressed.

As is the case for many Americans, both incomes and expenses of the people we interviewed are

volatile from month to month. Interviewees described a wide variety of strategies they use to manage their expenses and budget shortfalls. They described a range of odd jobs they are able to pick up—babysitting, cleaning houses, working concessions at a sports arena, going to a temp agency for day labor. They also described in detail strategies for being thrifty, going without items (often personal care or clothes), buying in bulk and at discounts when they had money, borrowing or receiving money from loved ones, eating at restaurants where they worked, and receiving donations from their RRH program, former shelter, and other social service providers.

Michelle, for example, had experienced multiple job losses and transitions. At the time of our interview, she was just about to begin working again for a daycare center she had left previously because they were not paying her regularly. She described a network of supports she draws on when she is not working:

Just recently I went down to Human Services for the first time ever to get assistance with my light bill. If I'm not working, I may have a friend or two that's very supportive with making sure I'm above water. They'll help here and there. But if I need to, I'll keep some kids, do some hair, clean a house, stuff like that to get funds.... I have a phone bill, but I didn't pay it because I wanted to pay on my water bill. So it's like my phone has been off for a month now.

Tania, who has worked for the Easterly school system since 2012, is one of a few strict budgeters:

I've cut back on a lot of stuff like my toiletries. I'll go to Target for my toiletries because sometimes you'll get the big body washes for \$3 and change, \$4 or even up to \$5, whereas in the other store you see them for like \$8.... And then we have a couple dollar stores where I live. So sometimes if I see certain things in the dollar store, I'll get it.... Sometimes you have to just think of ways to save.... And what I do now at work, I'll take \$60 out of my check, and I'll say, "This is for two weeks." And then I'll spend 20 or 30 dollars on my [public transit] card because you think how you can do it.

Tania’s self-described “*guilty pleasures*” were going to the movies and out to dinner, for example, to Olive Garden, once in a while. Other interviewees described indulgences such as buying fast food (because they did not have time or experience cooking for themselves), buying clothes on discount, or occasional nights out at a bar.¹⁹

Many interviewees described ways that receiving RRH support might help them improve their overall financial situations. Many reported having debts (for example, child support, medical bills, student loans, court fees) they were not paying on or were paying sporadically, but a few hoped to start paying them down as they stabilized their financial situations through a combination of affordable housing and better work situations. A few people described how they hoped to use their time in the RRH program to build up a savings cushion. It is an explicit goal for Homeward Bound participants who are working that they divert what would be rent payments into paying down debts or saving. Tania explained:

What I’m doing now is I’m trying to save as much money as I can. Just build up my bank. Build it up because I have a checkings and savings. So what I do when I get paid every time, even if it’s \$50, if I see I can put \$50, put \$50. If I can put \$100, doesn’t matter, \$25, \$30, \$40, it doesn’t matter. Put something. Just let it sit there because eventually it accumulates. And don’t touch it.

Housing Cost Burdens and Prospects for Future Affordability

Affordability is a major concern for individual interviewees and a tension that is inherent to a time-limited housing program such as RRH. Easterly has long had above-median housing prices, and Pine Grove has been experiencing remarkable population growth, with attendant strain on its housing stock, over the last 5 to 10 years. Ellie, a pre-RRH participant, explained:

Because of the gentrification and the cost of living in Easterly, I can’t afford market rate places, and I think that’s the main issue with rapid re-housing. It’s a great program and it works for some, but because of some of the people’s inability to access services for education or a sustainable job that pays sustainable wages and the cost of living in general in Easterly makes it difficult to afford market rate even with a partial subsidy.

We were able to calculate housing cost burdens for most interviewees who provided financial information. We used HUD’s housing cost burden guidelines, including rent and utilities (heat, electricity, water)—categorizing costs of more than 30 percent of income as *cost-burdened* and more than 50 percent as *severely cost-burdened*. At the time of the interviews, about one-half of interviewees were paying rent and the other one-half were not (either still homeless or receiving RRH support for the full rent). Most were not paying for utilities separately, either because they were receiving utility assistance, had utilities included in the rent, or were not paying until they received a shut-off notice.²⁰

Current housing cost burdens ranged from zero to 165 percent, with a non-zero median of 30 percent. We also calculated *projected* housing cost burdens after interviewees’ RRH assistance ends, as this gives some indication of their ability to sustain housing in future. Projected housing cost burdens ranged from 3 percent²¹ to 425 percent of income, with a non-zero median of 32 percent. We were not able to calculate

¹⁹ These were not the few interviewees who reported actively struggling with an addiction.

²⁰ Some participants in Pine Grove reported that they could get their utility arrears paid by Human Services if they brought a shut-off notice and used this as a strategy, or they rotated utility payments based on what was closest to being shut off.

²¹ We excluded one participant who reported an income but not a rent amount.

current cost burdens for the six interviewees with no income. Projecting forward, including the six with no current income, one-half of interviewees for whom we have financial information will be housing cost-burdened when the program ends. The degree of projected burden varies widely, with three being cost-burdened (between 30 and 50 percent) and the remaining 11 being severely cost-burdened. A caveat to these calculations is that interviewees were often actively looking for work, and finding a new job was an explicit goal for their limited time in the RRH program.

Interviewees in general were concerned about how they would be able to maintain housing in the long term. For many, their plans centered on finding work or finding better work. Many others had been coached by case managers to seek more affordable permanent housing for after their RRH assistance ended, through either an HCV or an apartment complex with income-based rent restrictions. Because of long waitlists at many of these complexes, many interviewees were applying while they had RRH support. For example, applying to two complexes in Pine Grove was a specific action item that Michelle's case manager gave her in one case management session we observed. Jasmine was able to use this strategy successfully: she obtained an HCV while she was receiving RRH. The RRH program helped her cover moving costs into her voucher unit and graduated her from the program. When asked about the voucher application and waitlist, she explained that her application received priority because Pine Grove has a homelessness preference for housing assistance, and she has five children under 18 living with her.

Jasmine's experience reflects waitlist priorities, and many of the people we interviewed reported long waitlists. William, a single veteran with a non-combat disability, was one of many interviewees who reported being on the waitlist for a voucher. At the same time, he was on the housing authority waitlist, he was trying to find a unit through RRH and had also applied to 12 to 15 affordable housing complexes in Pine Grove. He understood that because he received Social Security Disability Insurance, he could not keep his benefits if he worked full-time, so he expected his income to stay capped and affordability to be a permanent problem for him. Before entering the RRH program, he had to give up the apartment he had been renting, when his medical and other expenses outstripped his disability income, and he used up 80 percent of his savings for living expenses. At the time of the interview, he was living in a family member's attic. The RRH program had offered him a suite in a shared housing arrangement, but he was holding out for a one-bedroom unit (compared to his previous two-bedroom), hoping to "come up on the list" at one of the affordable housing complexes.

Colleen, whose happiness with her post-RRH unit in a low-income unit in a market-rate apartment complex was described earlier, is struggling to cover her \$1,100 rent for the apartment. She is caught between needing to earn enough to pay off debts and her current bills and the income limits for the apartment she shares with her daughter:

I can't say everything is happily ever after because life is a struggle. We're still struggling through our life's system, the things that we still need to financially fight.... It's rough because my whole Social Security check goes towards rent and the rest goes towards the bills that I have to pay monthly...we have to maintain their low-income guidelines...we're in a situation where even if we do find extra work, it's going to be penalized either by the housing or by the government with the Social Security, so we are kind of caught between a rock and a hard place right now, trying to figure out which way we're going to go.

Colleen's daughter has just graduated from college, and Colleen would like her to be able to get a good job, but if she does and her income goes up, they will lose the apartment.

5. Rapid Re-housing in Life Context

Despite the significant impact an episode of homelessness has in a person's life and the sometimes profound impact RRH has for its participants, focusing only on these aspects gives a partial view of the lives of the people we interviewed. This section de-emphasizes the RRH experience and returns to the broader context of interviewees' lives, which are still defined by numerous financial, housing, and personal challenges but also by new opportunities to work towards stability and aspirations for the future.

Often the overwhelming demands of homelessness kept interviewees focused on their immediate survival needs, even those who continued working throughout their episode of homelessness. Asked to project forward to life in 1 year, a few of the interviewees—all men—could not do so. Each of these men had significant destabilizing events in his life aside from experiencing homelessness, and this may make it difficult for them to imagine the future. Jim, a 48-year-old White man in Easterly who had been homeless as a teenager after his brother died, resisted imagining his life 1 year hence:

I have no clue.... No idea. No, I always thought I'd—that I wouldn't make it past 25, and here I am. And then I was like, once I hit 25, I was like, nah maybe, you know, 30. You know, I'm still here. So, I gave up after that so I'm like, I don't even know. I honestly don't know.

Javier's aspiration was simply to “*hopefully not fall apart*” when his participation in RRH ended. He had a history of drug use and stints in prison but had formed a close support relationship with his RRH case manager. His ability to imagine life going forward hinged on continuing to be able to draw on her support and friendship. A third man, Joel, had recently left prison after a 20-year sentence. His response to the question was, “*I don't even—thoughts like that don't really enter my mind. I take one day at a time. I don't even look down the road at a year.*” Nevertheless, he continued that “*what I'd like to do, a fantasy of mine*” is to work at either the re-entry program or the county job placement agency that had offered him help since his release.

As two of these three examples demonstrate, public and non-profit programs play a significant role in the social networks and emotional support for interviewees who do not have other social supports.

For other people we interviewed, stabilizing in housing allowed them to begin thinking again about their plans and aspirations for the future. Most aspirations had fairly short time horizons (months to a few years), focusing on goals that would stabilize their circumstances and prevent them from returning to homelessness. As Tania emphasized, her overriding goal was, “*I'm not going to be homeless ever again. Oh no. That shit is not happening. That's a no-no.*” Tania's motivation, like that of a handful of other interviewees, was to regain autonomy and independence she had lost while living in shelter.

Interviewees' goals cohered around improving their work situations (10 people) or living arrangements (eight people), reflecting a common understanding that RRH was a temporary bridge they could leverage to stabilize their overall financial situations. With the benefit of stable housing and rent covered for the short term, interviewees sought to find work (or better work) that would allow them to earn more money to pay rent, build savings, and work towards moving into better housing. Although many people were focused on finding work, they simultaneously expressed a lot of uncertainty about their job searches. Robert, a current RRH participant in Pine Grove, illustrates the ways that some interviewees were investigating a wide field of uncertain options and making assessments, based on the best information they could find, about which employment options they believed would be most promising.

As for their housing aspirations, those who were living with roommates or in shared housing expressed hopes of obtaining a one- or two-bedroom unit so they could have more privacy and autonomy.²² Jude had been living in his RRH apartment for about a year at the time of the interview. His expressed his hopes for the next year:

Be gainfully employed by then, again. And, you know, I won't need assistance from rapid re-housing. Eventually, I mean, if I am gainfully employed, I think I'd like to move to a bigger apartment, you know, not one that's not so tiny as the one I'm in now. I've just, you know, very modest goals for myself, you know.

Many explained having interlocking challenges or circumstances they needed to address and uncertainty about which aspect they could resolve first. For example, Bethany was 39-weeks pregnant with her fourth child at the time of the interview.²³ She had completed a job training program for a hospitality job in hotel room service and been offered a full-time position at the hotel that hosted the training. She was not planning to start, however, until her baby was six weeks old, when she expected to have recovered from birth and feel ready to work. Bethany was enthusiastic about the hotel job but also about myriad other possible career paths—in the food industry, where she had long worked, cosmetology, dental (after deciding she was “too old” at 40 for certified nursing assistant work). At the same time, she faced challenges with her transportation: her insurance had lapsed, which invalidated her tags. “I’m trying to dip and dodge, look into all my mirrors until I start making money enough to go back and reinstate the car.” In fact, her car was impounded when she was in the hospital giving birth, which she recounted in a later home visit. When she attempted the commute to the hotel on the bus, the two potential routes each had insurmountable impediments: one, having to cross a multi-lane divided highway on foot; the other, a long, circuitous route with a transfer that made the commute (and her work days) prohibitively long for someone with young children at home.

“Robert”

Robert, an RRH current participant, was enrolled in a job training program offered through the Pine Grove program for the construction field at the time of his first interview. He had quit a part-time job as a materials handler at a warehouse in order to join the job training program. Robert decided to leave the relative stability of his job to join the training program “because they said you get benefits like health insurance. And they were saying the pay would be pretty decent,” at first \$17 or \$18 an hour “but after being in the class for a little bit, I think it’s going to range anywhere from maybe \$14 to \$18 an hour starting.” He had no income other than \$192 a month in SNAP benefits and money from his mother or sister.

A veteran who has struggled to maintain stable housing since he left the Navy, Robert has participated in other RRH programs twice before. He also struggles with addictions and has been on probation and in a drug court program since 2014. He thought this job training program “would be different” from others he had done but, in the end, there were not job placements but a “job fair where you had to market yourself. Some promises got made but nothing panned out.”

Three months after the training, he was still looking for work. He had applied to several places that were hiring but, at one, he would need steel-toed boots he could not afford. He also said he would go back to restaurant work because “I’m kind of desperate now” because he believed he had another three months of housing support, which increased the urgency of his job search. He also confided that, “I fancy making music but that seems so cliché” so he does not pursue it.

²² In addition to those already using RRH assistance, William, a pre-RRH participant, hoped to find a one-bedroom to avoid a shared housing arrangement his case manager had offered him.

²³ She has twin boys (age 5) and a daughter (age 3). She also has a 22-year old son from a previous relationship who lives with his girlfriend in Pine Grove.

These interdependencies—of transportation, work, childcare, and other obligations—complicated interviewees’ decisionmaking when they were trying to assess their best options to move forward.

Other interviewees were looking forward to leveraging a stable housing situation to work towards educational goals: Ellie was enrolled in community college, Jermaine was enrolled in GED classes, Magda wanted to study English, and her son, Harry, hoped to start attending college. A few others wanted to care for previously unattended health challenges (two mental health, one physical health).

6. Summary and Conclusions

The 30 interviews summarized in this report demonstrate that the four RRH programs they participated in accepted people who had prior histories of homelessness and a variety of challenges with getting into and maintaining housing. Most interviewees described themselves as facing a number of challenges that, in combination, strained their resources and coping mechanisms past the breaking point. Most interviewees described unstable housing histories, sometimes stretching back to childhood. Some had current struggles with addiction stemming from family histories of addiction, abuse, or both.

Interviewees' most frequent trigger events that led to homelessness were a job loss or the breakdown of a key relationship that provided stability in their lives. Interviewees most often already had aspects of their lives that reduced their resilience—including lack of access to financial resources, addictions, and mental health challenges—such that they could not absorb the trigger event when it came. Unstable housing histories or a lack of rental history (for example, for young mothers living with extended family) complicated people's ability to find alternative housing when their current housing fell through. For 6 of the 30 interviewees, an eviction record further hindered their ability to secure new housing.

Key Findings

In both Pine Grove and Easterly, there was broad agreement among interviewees about some aspects of their experience with RRH:

- They were grateful for the RRH programs that helped them leave the shelter or other homeless situations.
- They were pleased with the services and treatment offered by their case managers, with emotional support perceived as a key element of case management.
- Their RRH housing situations were not ideal: the physical quality of the housing was poor, or they had to share space with roommates or in overcrowded families. Nevertheless, most viewed their current housing as temporary and considered RRH much better than the alternative of homelessness.

In other areas of interviewees' experiences with RRH, we found more variation:

- Many were comfortable with not knowing the time horizon for their financial assistance, while a few expressed distress about this uncertainty.
- Neighborhood quality varied: some neighborhoods were thought dangerous or unpleasant, and interviewees felt insecure or unhappy in them. Other interviewees in similar neighborhoods felt fine living there because they kept to themselves. Many people reported being happy that they lived in peaceful or quiet neighborhoods. A few were frustrated by living in a quiet, more suburban area but being far from transportation and amenities.
- Most interviewees' financial situations were precarious, but they varied in how they assessed their circumstances. Many were optimistic they could improve their financial situations while they were in the RRH program by obtaining work or having applications for Social Security or disability approved. For others, their finances and struggles to make ends meet contributed to ongoing anxiety.
- Half of the people we interviewed will likely be housing *cost-burdened* or *severely cost-burdened* when they exit RRH unless their financial situation improves. Almost all interviewees, however, described strategies they hoped would improve their incomes.

The findings summarized in this report have implications for understanding participant experiences in RRH programs. The 30 people we interviewed varied widely in the trigger events that sent them into homelessness, as well as in their backgrounds and underlying vulnerabilities, which in most cases were substantial. The flexible and intensive case management that appears to have been provided by the RRH programs in Pine Grove and Easterly²⁴ may be appropriate for such relatively high-needs families and individuals. Whether it means that rental assistance can be tailored to the circumstances of individual participants rather than defined by standard rules remains to be seen.

Overwhelmingly, people we interviewed felt immense relief to be out of homeless situations, but they moved into situations that were still problematic—for example, living in neighborhoods that felt unsafe or challenged their sobriety, or living in housing units with shortcomings. Interviewees talked about the burden and frustration of being responsible for finding their own units and in some cases would have like more active involvement by RRH staff. A few interviewees wished to move but felt constrained, either because they were aware of few alternatives or, like one program graduate, they could not afford to move now that their assistance had ended.

Programmatic Suggestions

Interviewees made some direct suggestions for RRH programs. Most often, they exhorted programs to continue offering the services they do and to expand access to RRH, and for cities and HUD to support the creation of more affordable housing units. Specific program delivery suggestions included these: more support to participants in applying for non-RRH affordable housing units; move-in welcome packages beyond the furniture programs currently provided (for example, cleaning supplies, kitchen wares, toilet paper, and shower curtains). Two interviewees expressed wishes for more frequent meetings with their case managers, one interviewee suggested there be more extensions for extenuating circumstances such as disability, and another wanted to remind program managers to “*treat the person like you’d like to be treated.*” Many interviewees reported they “*couldn’t ask for anything more.*”

Based on this research, and with the caveat that this is based on only 30 interviews, the research team offers these programmatic suggestions.

- Developing more robust networks of landlords willing to house program participants and increasing the level of support for participants to find housing could improve the housing options and timeliness of housing placement.
- For RRH participants with formal evictions, assistance removing those evictions from their records would substantially improve their future housing options. (We saw one of the four programs provide this service in some cases; the other three did not.)
- More formal coordination between RRH and other housing resources in the community could help with both long and short-term housing placements. The Easterly Continuum of Care had decided to coordinate RRH receipt with receiving priority for an HCV. The Homeward Bound program in Pine Grove is itself an affordable housing developer and was able to house a few interviewees in its units when they had other barriers to housing (for example, eviction). We did not learn of any RRH programs developing formal partnerships with other affordable housing owners in their communities. Instead, interviewees described making their own efforts to apply for affordable housing projects.

²⁴ Note the caveat in footnote 4 that, because of the way we selected interviewees, they may have had particularly strong relationships with their case managers compared with other RRH participants.

Developing more partnerships between the RRH program and providers of affordable housing might help improve participants' RRH experiences and prospects for long-term stable housing.

Our research will continue to follow 16 of the 30 RRH participants we interviewed for approximately 9 more months, for a total of 15 months of ethnographic research. The remaining research will consist of two follow-up interviews with each person, approximately 7 to 8 and 12 to 15 months after their first interview. We will also do home visits and, when feasible, attend case management meetings, housing searches, and moves with our interviewees.

Doing this will allow us to understand how households fare after RRH assistance ends, including whether, where, and why households move²⁵ and the long-term affordability of their housing. Because many interviewees expressed both hope and a dire need to improve their financial situations, we will follow how interviewees' job searches and financial situations unfold. We will also learn how interviewees are able to work towards their aspirations, whether and what obstacles they encounter, and other ways their plans and trajectories change.²⁶

²⁵ For example, as of April 2019, Bethany and Michelle have been notified they will need to move soon because the complex where they live will be torn down and redeveloped into a new affordable housing complex.

²⁶ For example, we learned in March 2019 that Jermaine left his GED class for a high-paying job, which he has since lost because he was in a car accident and has no transportation to work.

Appendix A: Research Questions

Topic	Research Questions	Sample Question(s)	Stage of Rapid Re-housing		
			Emergency Shelter	Current RRH	Former RRH
Housing history and stability	How stable are households in housing before homelessness (crisis, rent burden, doubled up, on the street, prior episodes of homelessness)?	Overall, how frequently would you say you've moved since moving out on your own? How old were you when you moved out on your own? Do you know the approximate frequency or number of places you've lived since then? How many times in your entire life have you been homeless? Tell me about where you lived as a child? Did you grow up in this area? Did you move as a child at all? What prompted your moves as a child?	✓	✓	✓
	If households move, why do they do so, and is the new situation better or more sustainable? How much do households move? Do they double up? Housing and neighborhood quality (after RRH ends)? What tradeoffs do households make among housing quality, neighborhood quality, and housing costs?	It seems like you have moved [frequently, often, not often]. Would you say this is similar to how much you have always moved? When you were without housing, what did you do to find a place to stay? Have you moved since your RRH assistance ended? How many times? Please tell me about what caused you to move. How does your housing situation now compare with your housing situation when you were in [RRH PROGRAM NAME]? Before you got into [RRH PROGRAM NAME]? What is it like living here? What do you like/dislike about this unit? About the neighborhood?		✓	✓
Current housing	How did households enter shelter? What events or situations precede stays in emergency shelter? How do households get into RRH programs? How do they learn about RRH assistance?	Please describe to me your living situation right before you came to [SHELTER NAME]. Who lives with you in your current housing situation? Are these the same people who lived with you when you first enrolled in the RRH program? Can you tell me what happened that brought you to this shelter? There are many things that can make finding a place to live difficult. What do you think are the problems for you and your family to find a place to live?	✓		

APPENDIX A: RESEARCH QUESTIONS

Topic	Research Questions	Sample Question(s)	Stage of Rapid Re-housing		
			Emergency Shelter	Current RRH	Former RRH
	<p>With the RRH assistance, what proportion of monthly income do households typically pay for rent (or what is the depth of the rental subsidy provided by RRH)?</p> <p>After RRH assistance ends, what proportion of monthly income do households typically pay for rent?</p>	<p>Altogether, how much did you and the people you live with pay [as rent/towards the mortgage]? What was your total income last month? (rent burden)</p> <p>What help have you received from RRH program?</p> <p>Do you know how the amount of your assistance is/was calculated?</p> <p>What do you pay in monthly rent here? How much of that is out of pocket and how much, if any, is help from RRH program?</p> <p>How manageable does your current rent feel to you?</p> <p>In your financial situation, what rent do you think you could manage over the long term? (What do you think of as long term here?)</p>		✓	✓
Rapid re-housing experience	<p>How do households experience the transition from emergency shelter to permanent housing?</p>	<p>How helpful do you think RRH program will be/is/was to you?</p> <p>How satisfied have you been with the services you've received since you came to the shelter (this/last time)?</p> <p>What was your experience like with the in-reach program (that is, getting information about [RRH PROGRAM NAME] while you were living in the shelter?</p> <p>Probe for:</p> <p>How long were you in the shelter before you were offered RRH?</p> <p>What did they tell you about the program?</p> <p>What did you think of the offer? Did you consider options other than the RRH offer?</p>	✓	✓	
	<p>How do households search for housing? What search assistance do they receive? What is the move-in process like?</p>	<p>What help have you received from [RRH PROGRAM NAME]? Probe for examples, such as:</p> <p>Do/Did you get help looking for housing?</p> <p>Do/Did you get help with moving expenses?</p> <p>Do/Did you get help with landlord?</p> <p>Do/Did you get help looking for work?</p> <p>Do/Did you meet with a case worker?</p> <p>Who provided the services? How often? What were you required to do?</p>	✓	✓	
	<p>Do households believe RRH will enable them to succeed?</p>	<p>How helpful do you think [RRH PROGRAM NAME] will be/is to you? What makes you say that? Please give me an example.</p>	✓	✓	

APPENDIX A: RESEARCH QUESTIONS

Topic	Research Questions	Sample Question(s)	Stage of Rapid Re-housing		
			Emergency Shelter	Current RRH	Former RRH
	How do households experience case management? the recertification process? progressive engagement?	<p>What is it like for you to be in [RRH PROGRAM NAME]? What do you think about:</p> <p>Any meetings you have with a case worker?</p> <p>Recertification / providing documentation?</p> <p>Any changes to the case management or assistance you receive?</p> <p>Was it clear to you from the start how much help you would get from [RRH PROGRAM NAME] and for how long? OR Do you know how much rent assistance you'll get going forward?</p>	✓	✓	
	How do they evaluate the assistance?	<p>Overall, what do you think of [RRH PROGRAM NAME]? Why do you say that?</p> <p>What has been the most helpful to you?</p> <p>What has been the least helpful to you? Were there services offered to you that you didn't use? What were they, and what were the reasons you didn't use them?</p> <p>Are there parts of the program you found burdensome or difficult? Tell me about those.</p> <p>If you were going to give one piece of advice to the people who design or run this program, what would it be?</p> <p>How helpful do you think [RRH PROGRAM NAME] will is/was to you? What makes you say that? Please give me an example.</p>		✓	✓
Financial status and well-being	How do households waiting for, receiving, or who have received RRH manage financially? What is the role of housing in coping strategies of vulnerable households? How do households make tradeoffs among housing and other needs?	<p>[Review of all monthly expenses, followed by all sources of income (employment, benefits, family/friend support, in-kind trades)]</p> <p>Employment:</p> <p>Tell me about your job situation. Are you currently working? Where? For how much?</p> <p>Are you looking for work? (Are you currently in school or a training program?) Please tell me about that.</p> <p>Have there been any times in the last month you didn't have enough money for food? Have there been times in the last month you or your family had to go without other things because you didn't have enough money? (Probe about medical care, clothing or personal items, leisure activities, rent or utilities.)</p>	✓	✓	✓

APPENDIX A: RESEARCH QUESTIONS

Topic	Research Questions	Sample Question(s)	Stage of Rapid Re-housing		
			Emergency Shelter	Current RRH	Former RRH
Physical, mental, and social well-being (adult, child, and family)	What is the role of housing in coping strategies of vulnerable households?	<p>Have there been any changes in your family composition in the last six months as a result of your housing situation? (That is, did anyone move in or move out, such as separating from partner or older, opposite-sex children while staying in a shelter; family living elsewhere due to crowding; and so on?)</p> <p>How has your health been in the last month? The health of your children in the last month? (for example, illnesses, injuries, medical/well child check-ups.)</p> <p>How has your mental health been in the last month? Are you feeling mentally well? Please tell me about that. What, if anything, makes any problem better? How about your children's mental health? What have you noticed in their moods or behavior in the last month? (for example, behavior problems, trouble sleeping, clingy, irritable, and so on.)</p> <p>Please tell me how things are going with your child's/children's schooling (for example, grades, relationships with peers/teachers/administration, attendance, school changes, behavior/discipline.)</p>	✓	✓	✓
	If they do not receive permanent housing subsidies, how do they pay rent?	<p>How manageable does your current rent feel to you? In your financial situation, what rent do you think you could manage over the long term? (What do you think of as long term here?)</p> <p>Please tell me about any times when it's been hard to pay the rent since the help you were getting from [RRH PROGRAM NAME] ended. How did you handle it?</p>			✓

Appendix B: Interviewee Profiles, by RRH Stage and Household Type (All Pseudonyms)

Pseudonym	RRH Stage	Household Type	Gender	Race/Ethnicity	Age	Prior Homelessness
Pine Grove						
William	Pre-RRH	Individual	M	African-American/Black	57	N
Anthea	Pre-RRH	Family	F	African-American/Black	Missing	N
Charmayne	Pre-RRH	Family	F	African-American/Black	Missing	Y
Robert	RRH	Individual	M	African-American/Black	32	Y
Joel	RRH	Individual	M	White	63	N
Jermaine	RRH	Individual	M	African-American/Black	36	Y
Brandon	RRH	Individual	M	African-American/Black	49	Y
Michelle	RRH	Family	F	African-American/Black	30	Y
Jay	RRH	Family	F	African-American/Black	47	N
Holly	RRH	Family	F	African-American/Black	22	N
Bethany	RRH	Family	F	African-American/Black	39	Y
Gary	Post-RRH	Individual	M	African-American/Black	63	Y
Jasmine	Post-RRH	Family	F	African-American/Black	29	N
Tara	Post-RRH	Family	F	Native American	41	Y
Easterly						
Steve	Pre-RRH	Individual	M	White	42	N
Ellie	Pre-RRH	Individual	F	White	23	N
Michael	Pre-RRH	Individual	M	African-American/Black	57	N
Bunny	RRH	Individual	F	African-American and Native American	52	N
Drake	RRH	Individual	M	African-American/Black	25	N
Harry	RRH	Individual	M	Latino/Hispanic	21	Y
Javier	RRH	Individual	M	Latino/Hispanic	43	N
Jim	RRH	Individual	M	White	48	Y
Jude	RRH	Individual	M	White	55	N
Moses	RRH	Individual	M	African-American/Black	55	N
Ricardo	RRH	Individual	M	Latino/Hispanic	49	N
Tania	RRH	Individual	F	African-American/Black	48	N
Victor	RRH	Individual	M	White	52	N
Carina	Post-RRH	Individual	F	White	38	Y
Colleen	Post-RRH	Individual	F	African-American/Black	55	N
Natalia	Post-RRH	Family	F	Latino/Hispanic	23	N

* White denotes non-Hispanic White.

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