



19 Strategies for Communities to Address Encampments Humanely and Effectively

April 2024

U.S. Interagency Council on Homelessness

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BACKGROUND

With the exception of 2020-2022 when the [American Rescue Plan](#) used the largest single-year investment in ending homelessness in U.S. history to keep people in their homes during the COVID-19 pandemic, homelessness has been rising since 2016. The most visible and deadly manifestation of the homelessness crisis is encampments, which are informal communities formed by people experiencing homelessness who have nowhere else to go. As the housing crisis has [worsened](#), unsheltered homelessness—which includes people sleeping in not just tents but also vehicles, transit stations, and other places not meant for human habitation—has been on the rise [even when overall homelessness was flat](#).

Everyone deserves a safe and affordable home. Like clean air, water, and food, affordable and accessible housing is a basic human need necessary for the health of people and communities.

Mayors and other local community leaders are caught in a dilemma. Many members of the public worry about the health, safety, and economic impact of encampments and want swift action. But the reality is that affordable housing is often unavailable, and lasting solutions take time. Furthermore, many shelters are full, only offer short stays, or do not accommodate people with disabilities and/or older adults. Some shelters require sobriety or have other programmatic requirements that make them difficult to access for people struggling with mental health or substance use disorders. Some shelters deny entry to people who identify as LGBTQI+, people with criminal records, and people who do not want to separate from their children, partners, or pets. While shelters are often doing their best, they may struggle to accommodate every need or situation.

Some people feel safer and more connected to others in encampments than in shelters. While encampments can serve as temporary communities where people lean on each other for survival and support, their conditions can be dangerous for the people living in them. The reality is that some people give up on the shelter system both for the reasons just cited and when it does not offer a clear path to permanent housing. This leaves thousands of people with nowhere else to go but the street, where they face the deadly risks of hunger, disease, extreme weather, and violence, retraumatizing people already suffering from ongoing and past trauma.

Once unsheltered, many people risk fines, criminal charges, and jail in communities where police enforce so-called camping bans that make it a crime to sleep, sit, or carry out other daily activities in public. Approaches that involve criminal penalties [cost three times more](#) than providing housing and services and can lead to unintended, harmful, and even [deadly consequences](#). Criminalization often leads to encampment sweeps, but clearing an encampment without offering housing and support [does not solve homelessness](#) in the short or long term. Instead, it simply moves people experiencing homelessness from block to block and from streets to jails. The resulting criminal records make it even harder for people experiencing homelessness to access shelters, find housing, and obtain jobs. Furthermore, civil and criminal fines and fees keep people locked up in jail for months or years solely because they cannot afford bail and cripple a person's ability to save for rent or other expenses upon release.

To solve homelessness, communities must use evidence-based strategies to collaboratively, equitably, and humanely address the housing and service needs of people without homes—even when permanent housing is not immediately available. When an encampment is prioritized for closure, the process must be implemented in a humane and trauma-informed way, and the goal must be to connect every person to housing and services to help them overcome and avoid future experiences of homelessness.

Facing this crisis is challenging. The U.S. Interagency Council on Homelessness (USICH) acknowledges that every person's experience of homelessness is different, that there are no one-size-fits-all solutions, and that no community has all the solutions—or the resources to implement solutions that meet the need. USICH and the federal agencies that it represents also acknowledge that this crisis involves multiple systems beyond the homelessness response system (from criminal justice and health care to social services and public works). To meaningfully and sustainably address this crisis, systems must work together but individually acknowledge their role in contributing to and solving homelessness.

Based on what is working well in communities across the country, this guidance serves as an update and expansion of the “7 Principles for Addressing Encampments” USICH published in 2022. It was developed with input from people who have experienced homelessness, national partners, and experts from multiple federal agencies. This guidance is intended to help public leaders and community partners in cities, counties, states,

and federal agencies develop and implement humane and effective responses to encampments on public land using [*All In: The Federal Strategic Plan to Prevent and End Homelessness*](#).

For help implementing the following strategies in your community, [contact your USICH Senior Regional Advisor](#).

Overview of 19 Strategies to Address Encampments

Using the framework of *All In: The Federal Strategic Plan to Prevent and End Homelessness*, the table below provides a roadmap for communities to develop and implement a humane and effective response to encampments. Like clean air, water, and food, affordable and accessible housing is a basic human need necessary for the health of people and communities. Homelessness is a public health crisis that should be treated with the same urgency as a tornado, wildfire, or pandemic—all of which cause displacement from homes. While all encampment responses are crisis responses, it is critical to acknowledge that a humane and effective crisis response must use evidence-based strategies to collaboratively and equitably connect people to housing, shelter, and services. It is also critical to acknowledge that encampments will continue to exist until we prevent more people from losing homes in the first place. While prevention is separate from crisis response for existing encampments, prevention must become part of a community’s overall homelessness strategy to prevent future encampments and is therefore included as a section in this guidance.

EQUITY	CRISIS RESPONSE
<ol style="list-style-type: none"> 1. Engage Encampment Residents in Efforts to Develop Solutions 2. Address Unique Needs of People With Chronic and Acute Health Conditions 	<ol style="list-style-type: none"> 10. Address Basic Needs and Provide Health Care 11. Conduct Comprehensive, Coordinated, and Ongoing Housing-Focused Outreach 12. Provide Storage
COLLABORATION	HOUSING & SUPPORT
<ol style="list-style-type: none"> 3. Establish a Cross-Agency, Multi-Sector Response 4. Empower Outreach Teams and Health Providers to Lead the Effort 5. Prioritize Closure Based on Health and Safety Factors 6. Engage Neighboring Residents and Businesses 	<ol style="list-style-type: none"> 13. Ensure Access to Housing and Services 14. Ensure Interim Strategies Promote Dignity, Respect, and Pathways to Permanent Housing 15. Develop Pathways to Permanent Housing and Support 16. Ensure Encampments Are Closed Humanely
DATA & EVIDENCE	PREVENTION
<ol style="list-style-type: none"> 7. Collect and Share Qualitative and Quantitative Data 8. Track Shelter and Housing Availability 9. Track Status of People Housed and Yet to Be Housed 	<ol style="list-style-type: none"> 17. Expand Affordable Housing 18. Interrupt Pipelines Into Homelessness 19. Build and Strengthen Safety Nets

For each strategy cited above, the following guidance provides examples of actions, followed by a chart with select federal funding opportunities and a list of select technical assistance resources for implementing the strategies. The examples are not intended to be comprehensive. If you or your community have additional strategies that are humanely and effectively addressing encampments, please [contact your USICH Senior Regional Advisor](#).

LEAD WITH EQUITY

“Go to where the community is. Don’t expect them to come to you.”

– Person with lived experience from Washington, District of Columbia

STRATEGY 1: Engage Encampment Residents in Efforts to Develop Solutions

It is critical to connect early, often, transparently, and meaningfully with encampment residents who understand better than any other people which services and outreach approaches work—and which do not. **Engaging and including people living in encampments in policymaking, planning, and nearly every strategy of this guidance increases their likelihood of receiving the housing, health, and other support necessary to move off the streets and into housing** or shelter while they await permanent housing. It is also critical to [fairly compensate](#) people who have experienced homelessness for their time and expertise.

Actions:

- Identify, based on the encampment residents’ selection, a resident to serve as spokesperson for the encampment to communicate information between people living in and people involved in the public response to the encampment.
- Include residents in discussions and decisions related to the encampment.
- Foster transparent engagement by sharing information with every resident (e.g., encampment protocols, plans for potential closure, options for housing, shelter, and services).

- Ensure information is accessible to people with literacy issues and people who do not speak or read English.
- Build authentic, compassionate relationships that demonstrate a genuine concern for the safety, health, and welfare of people living in encampments (e.g., hire and train outreach workers who have experienced unsheltered homelessness).

STRATEGY 2: Address Unique Needs of People With Chronic and Acute Health Conditions

Housing is health care. Living without housing and unsheltered presents dangerous conditions for any person, but some people have medical conditions that put them at higher risk for death and other negative health outcomes. This includes people with mental health or substance use disorders, people with disabilities, people who are older, and people who have one or more chronic or acute condition, including neurological disorders like traumatic brain injury. They frequently rely on hospitals, emergency responders, and other costly public services as their only option for health care. The longer a person lives in an encampment, the harder it can be to move into housing, so it is important to move quickly to treat health conditions while people are living in encampments and continue treatment after they move into shelter or housing. Street medicine, harm reduction strategies, and collaboration with health systems can help address these health needs.

Actions:

- Work with outreach and housing teams with a strong health component to evaluate the health of every person living in an encampment (including their symptoms of and exposure to climate and environmental hazards).
- Provide referrals and confirm people are linked to appropriate and available services, shelter, and housing.
- Meet encampment residents “where they are” by bringing health providers (i.e., street medicine) to the encampment.
- Assess people with chronic or acute health conditions for immediate transition into housing.
- Work with local Health Care for the Homeless programs, Federally Qualified Health Centers, and Certified Community Behavioral Health Clinics to create a comprehensive community response to address the health needs of encampment residents.

COLLABORATE AT ALL LEVELS

“Homelessness and affordable [housing] supply won’t change without a long-term commitment and implementation through a partnership of public- and private-sector stakeholders.”

– Housing developer from Portland, Oregon

STRATEGY 3: Establish a Cross-Agency, Multi-Sector Response

Addressing homelessness requires robust collaboration among a wide range of partners, including mayor’s offices, Continuums of Care (CoCs), health providers, public works and emergency management departments, street outreach teams, schools, law enforcement and public defenders, plus faith-based, civic engagement, and business communities. Land management agencies that do not have social services functions will need to develop strong collaborative relationships with agencies that provide housing and services.

Actions:

- Identify key organizations and decisionmakers to convene and communicate with daily (weekly at a minimum), and create a list of key points of contact for each collaborating organization.
- When multiple agencies or jurisdictions are involved, align protocols to address gaps and avoid confusing or conflicting language. Listen and ask for feedback.
- Establish a communications strategy for engaging early and often with external stakeholders, including neighboring residents and businesses and the media.
- Implement a “housing command center” approach that responds to homelessness like a natural disaster: View people as survivors and make bold changes to standard policies and procedures to accelerate the transition to housing.
- Outline the financial and physical resources needed (people, equipment)—and budget/plan accordingly.

STRATEGY 4: Empower Outreach Teams and Health Providers to Lead the Effort

Homelessness is a public health crisis. People with preexisting health and behavioral health conditions are far more likely to experience homelessness, which can be deadly—especially for people with chronic and acute health conditions. People without a home die roughly [30 years earlier, on average](#), than people with stable housing. The most effective outreach efforts are led by health providers and street outreach teams who

understand how to address the needs of people living in encampments and who often already have developed relationships with them. This may include informal or volunteer organizations with training in homelessness services and trauma-informed care. While law enforcement may respond to emergency situations to protect people living in encampments, law enforcement should not lead the public health response to encampments. Many people experiencing homelessness—especially people of color—have suffered traumatic experiences involving law enforcement, and their presence may worsen trauma and break down the trust necessary for people to receive help.

Actions:

- Identify a lead point of contact (ideally an outreach worker or health provider) for the encampment.
- Decide if, when, and how law enforcement will be involved. When they are involved, communicate their role (and names) to the people living in the encampment and encourage officers to dress in plain clothes.
- Include multiple on-site outreach teams and health providers in planning and decisions to ensure cross-team coordination and information-sharing and to prevent duplication of efforts.
- Provide outreach teams and health providers with direct access to place people in shelters, treatment, and housing.
- Ensure access to outreach workers who can address language and cultural barriers for encampment residents not proficient in English or with hearing disabilities.

STRATEGY 5: Prioritize Closure Based on Health and Safety Factors

Communities are tired of reacting to the crisis with expensive, short-term, and ultimately ineffective responses driven by political pressure or lawsuits. To make evidence-based decisions that lead to effective, long-term outcomes, cities and counties should have clear, publicized protocols to guide when and how encampments will be closed. The ultimate goal should be to move people into permanent housing and free up public spaces without the threat of forcing people to leave an encampment. Some encampments, however, are deemed high risk and prioritized for immediate closure. This could happen if the location is in a flood zone, deemed a hazardous waste site, or near a busy highway. In these cases, special efforts should be made to prevent future encampments in those spaces. In the event of contact with hazardous waste or high levels of pollutants, residents should be notified and referred to the appropriate regulatory agency.

Actions:

- Create a protocol for what happens if an encampment is determined to be imminently at risk (e.g., path of flood, wildfire, or other risk factors).
- Define “encampment” in the context of your community to provide clarity in decision-making. While there is no standard definition, communities often consider the number of tents/people and how long they have been sleeping there, among other factors. An encampment is an informal community, and all efforts to not dehumanize the residents should be taken.
- Review and examine local ordinances and laws and seek to change those that are harming efforts to end homelessness and causing barriers to helping people access housing, health care, and other support.
- Map the location of encampments and update consistently.
- Evaluate the health and safety of people living in encampments and the surrounding neighborhood. Factors to assess include environmental health (e.g., presence of hazardous material or [standing water](#)), vulnerability of population (e.g., presence of children or human trafficking victims), and physical safety (e.g., close to highways or in flood-prone areas). highways or flood-prone areas).
- Adopt protocols to protect data and privacy of encampments and encampment residents.
- Develop and publicize criteria to determine which encampments will be prioritized for closure and which would benefit from interim steps to mitigate or prevent health and safety concerns.
- When encampments are not prioritized for closure, address basic needs and provide health care (See Strategy 10) for the people living in them and conduct comprehensive, coordinated, and ongoing outreach to help people access services and housing (See Crisis Response Section).

STRATEGY 6: Engage Neighboring Residents and Businesses

People living in encampments, housed neighbors, and people who run businesses all have the same goal: a community where no one lives on the streets. But without the support of neighbors and businesses who live near encampments, public pressure can intensify for local leaders to take ineffective, expensive, and inhumane action. It is critical to educate neighbors and businesses about the causes and challenges of homelessness to humanize their unhoused neighbors and increase community support for shelters, affordable housing, and supportive services that help people move off the streets.

Actions:

- Regularly and transparently engage nearby residents and businesses (in writing and in person) about plans for addressing the encampment—but do not share information about specific residents. Share a point of contact in case they have questions.
- Educate the community about homelessness and how to build positive relationships with people living in encampments (e.g., host a community forum that focuses on the lives and experiences of people without a home and/or create a public-facing dashboard).
- Ask neighbors and businesses about their needs and their relationships with the encampment and share ways that they can help.
- Provide ways for encampment residents to engage with their surrounding communities in healthy, equitable, and inclusive ways.
- Provide adequate public services to maintain the surrounding neighborhood (e.g., garbage and litter collection, outdoor maintenance of lawns and traffic lights).

USE DATA & EVIDENCE TO MAKE DECISIONS

“Bring people of color to the tables where discussions are happening. Don’t just rely on data that we know is inaccurate.”

– Advocate from Texas

STRATEGY 7: Collect and Share Qualitative and Quantitative Data

Accurate, real-time data is a critical component of an effective encampment response. Collection, analysis, and reporting of qualitative and quantitative data is essential for targeting interventions, identifying outreach gaps, connecting people with available shelter and housing, tracking results, making strategic decisions, and allocating resources. To fully achieve these goals, it is also critical for communities to modernize their software, hardware, and cybersecurity. In areas with large unsheltered populations, it may not be possible to collect data on every person living in encampments. In those cases, prioritize data collection for people living in encampments flagged for closure in the near future and continue to improve data collection for other people and encampments.

Actions:

- Convene outreach teams, people experiencing homelessness, and data experts to decide what data needs to be collected—and how to ensure data privacy.
- Work with outreach teams to develop a by-name list of encampment residents.
- Assess and record the specific needs of each encampment resident (as well as if and how these needs are being met) regarding housing and shelter preferences, health and supportive service needs, partners, pets, and possessions.
- Use mapping tools to create a coordinated map of encampments to identify coverage and gaps in outreach, services, and availability of housing interventions. Adjust outreach coverage to match population density.
- Evaluate the effectiveness of outdated legacy hardware equipment (e.g., mobile devices) and software systems, modernize them when possible, and identify process solutions when not possible.
- Encourage cross-sector data-sharing and interoperability to connect existing data systems (e.g., the Department of Housing and Urban Development’s Homeless Management Information System (HMIS) with the Center for Disease Control and Prevention’s Immunization Information Systems and Homeless Mortality Information).

STRATEGY 8: Track Shelter and Housing Availability

Real-time data can streamline and speed up the process to connect people to emergency shelter or permanent housing. It is particularly critical to track real-time data during and after climate events that can rapidly and significantly upend housing and shelter. When data is centralized and accessible on a mobile device, outreach teams can offer immediate, on-the-spot placement into shelter or housing. Ensure that the shelters and housing being tracked are “low-barrier,” meaning there are little-to-no requirements that may pose as barriers to people.

Actions:

- Track the type of interventions people need and their barriers to housing (e.g., lack of ID, criminal record).
- Measure real-time data on available and offered shelter beds, interim and permanent housing units, and mental health and substance use treatment beds.

- Create a centralized database of bed and unit availability that is accessible to all outreach workers and housing navigators—and create a protocol for using the database.
- Equip outreach workers and housing navigators with mobile devices that can access the centralized, real-time database.

STRATEGY 9: Track Status of People Housed and Yet to Be Housed

Consistent communication with people who live in encampments is essential for connecting them to permanent housing and supportive services, measuring system performance, informing policies, and efficiently and strategically allocating housing resources. Consistent communication also prevents people from falling through the cracks, keeps them connected to services, and increases their likelihood of accepting housing. Communities should communicate with and track people until *and after* they move into housing. While some communities use the Homeless Management Information System (HMIS) to track this data, not all do, and it is important to note that not all people living in encampments are in the HMIS.

Actions:

- Work with appropriate data system administrators to track progress on housing placements for people living in encampments.
- Produce daily and weekly progress reports (e.g., number and name of people identified and engaged, number of times they were engaged, number of people with housing and service plans, number of people housed, length of time from identification to placement, long-term stability of people who were housed).
- Develop processes to track and stay connected with people who move between encampment sites, shelters, and/or health systems (e.g., hospitals, treatment facilities).
- Work with people previously or currently living in the encampment to develop a public-facing dashboard (with de-identified data) to show progress on unsheltered homelessness and encampment resolution strategies.

IMPROVE EFFECTIVENESS OF HOMELESSNESS RESPONSE SYSTEMS

“Positive results can be achieved if we treat homelessness as a crisis all the time, not just during a pandemic.”

– Person with lived experience from San Diego

STRATEGY 10: Address Basic Needs and Provide Health Care

Housing is health care, and without it, people struggle to survive. While Strategy 2 focused on the importance of addressing the unique needs of people with chronic or acute health conditions, every person (especially people living outside) needs quality health care. Many people experiencing homelessness die of preventable or treatable illnesses—such as asthma, hypothermia, and hepatitis—some of which can be caused and spread by the unsanitary conditions in encampments. The basic need for a safe and sanitary place to wash hands and use the restroom was reinforced by the COVID-19 pandemic. While communities work to move people into housing or shelter, it is critical to offer basic and life-saving services to people living in encampments.

Actions:

- Ensure access to healthy food and preparation materials.
- Deploy outreach, street medicine, mobile medical, and veterinary teams to encampments.
- Ensure basic hygiene is accessible to people living in encampments.
- Provide public sanitation services to encampments (e.g., garbage collection, facility maintenance, and regular cleaning).
- Ensure access to opioid-reversal medication to respond to drug overdoses and needle disposal to prevent the spread of infectious diseases.

STRATEGY 11: Conduct Comprehensive, Coordinated, and Ongoing Housing-Focused Outreach

While several previous strategies cited outreach in this document, not all outreach is identical. The most effective outreach connects people directly with housing and health care, including mental health and substance use treatment, and it is based on a foundation of trust and consistency (e.g., outreach that involves “housing navigators” and “case conferencing”). When permanent housing is not immediately available, outreach efforts can connect people to interim options that promote dignity, respect, and pathways to

permanent housing (see Housing and Support Strategy 2). A coordinated neighborhood-by-neighborhood approach gives outreach teams the opportunity to build trust, increasing the likelihood of people accepting housing, shelter, and services and strengthening support from neighboring residents and businesses.

Actions:

- Provide outreach and referral services that are person-centered, trauma-informed, voluntary, housing-focused, and “low-barrier,” meaning they minimize requirements for housing and services.
- Conduct outreach regularly and consistently to all unsheltered residents in the community—not only for encampments prioritized for closure.
- Determine how services will be provided and how shelter and housing will be identified.
- Train staff and volunteers working in or around the encampment on psychological first aid, outreach and engagement, motivational interviewing, and trauma-informed practices.
- Ensure that all outreach teams are integrated with the larger homelessness system of care and Coordinated Entry process.

STRATEGY 12: Provide Storage

Not all shelters provide sufficient storage for personal property, and for many people, fear of losing personal property (e.g., family photos, letters, identification cards and paperwork, health records) can make shelters unappealing. These items are also frequently lost when encampments are closed and no storage is provided. The provision of storage is an important part of helping people to move off the streets and easing their transition to shelter, housing, or treatment.

Actions:

- Provide storage for personal belongings for an amount of time that aligns with how long it typically takes to get placed into permanent housing—and locate storage facilities in places that are accessible to people.
- Label and photograph all belongings.
- Maintain records of the owner’s name, contact information, and outreach worker/case manager.
- Ensure encampment residents are aware of the location, hours, and requirements for accessing their belongings in a storage facility.

- Develop storage protocol and communication on the storage protocol. Storing items that are biohazards, for instance, is not safe. It is good to set expectations on what can and cannot be stored, how long it will be stored, and the contact information for accessing stored items.

SCALE HOUSING & SUPPORTS THAT MEET DEMAND

“Services are not effective without housing, but housing is not sustainable without services.”

– Provider from Summit, New Jersey

STRATEGY 13: Ensure Access to Housing and Services

Encampment planning and budgeting should focus on the primary goal: moving people as quickly as possible into permanent housing. People living in and moving out of encampments must also have access to supportive services that can help them attain permanent housing and prevent them from experiencing homelessness again. Supportive services include health and behavioral health care, transportation, food assistance, public benefits, employment support, and childcare. **Participation in services—especially mental health or substance use treatment—must not be a requirement for housing or shelter.** Mental health care and substance use treatment is [most effective](#) when people choose it. Forced mental health or substance use treatment is constitutionally limited to people who present a clear danger to themselves or others. When housing is offered with *voluntary* services, [up to nine out of 10](#) people remain stably housed a year later.

Actions:

- Ask encampment residents what housing and service options they need and want.
- Determine funding sources available and needed to connect residents to low-barrier housing and services appropriate for their unique needs.
- Collaborate with the agencies responsible for providing and connecting people to services and housing and connect resources to Coordinated Entry.
- Ensure housing and services are low-barrier, meaning they minimize requirements that create barriers for people.
- Increase access to documents needed for housing and work (e.g., invite Social Security and other licensing staff to the encampment).

- Secure and coordinate transportation from encampments to housing and services for every resident.
- Provide indoor and outdoor shelter space for pets, especially service animals, and referrals for veterinary care. If shelters cannot accommodate all pets, partner with local pet shelters for temporary placement.

STRATEGY 14: Ensure Interim Strategies Promote Dignity, Respect, and Pathways to Permanent Housing

It is often the case that emergency shelters are full and permanent housing is not available. In these cases, communities must use alternative short-term strategies to offer shelter to people while they await permanent housing. All shelter or short-term housing must meet [standards of care](#), rather than serving as alternative forms of encampment, and they should meet individuals' needs (which may include accessible services for people with disabilities). Furthermore, interim strategies must not come at the expense of a community's commitment to developing permanent housing solutions. Interim strategies range from congregate options, such as [sanctioned encampments](#) and safe parking programs, to non-congregate options, such as tiny homes and hotel/motel rooms. Non-congregate shelter gained popularity during the pandemic, and the more private option helped more people move off streets and into shelter.

Actions:

- Provide safe and sanitary conditions.
- Provide adequate on-site services that can connect people to housing, health care, and other support.
- Train staff and protect privacy to ensure services are person-centered, trauma-informed, and based on harm reduction strategies.
- Engage people living in encampments to ensure personal choice and voluntary services.

STRATEGY 15: Develop Pathways to Permanent Housing and Support

When communities do not have enough permanent housing or supportive services to meet the needs of people experiencing homelessness, cities, counties, and states must coordinate their efforts to maximize and expand their capacity, obtain and allocate funding, and mobilize available resources to move people as quickly as possible off the streets and into housing. The options for housing should be as low-barrier as possible.

Actions:

- Coordinate closely with the Continuum of Care Coordinated Entry System, public housing authorities, and non-profit housing owners to ensure a variety of low-barrier housing options.
- Assist with connections to moving services, furniture, and basic start-up supplies for people moving into permanent housing.
- Provide “[move-on](#)” subsidies for people who are ready to exit supportive housing but still need a subsidy.
- Coordinate access to public and private affordable housing (e.g., align forms, streamline application processes, create a single website for advertising unit availability).
- Coordinate with all public housing authorities in the area and encourage them to adopt the same practices (e.g., applications, screening criteria, payment standards).
- Develop and coordinate local landlord education, engagement, and incentive programs to remove barriers for people with low credit scores, past evictions, and criminal records and to provide risk mitigation funds, increased damage deposits, and/or financial resources to pay for move-in costs or past due housing/utility bills.
- Expand the types of permanent housing assistance available (e.g., master-leasing units in the private market, shallow subsidy funds, rapid rehousing vouchers, Medicaid demonstration waivers that are being used to cover short-term rent costs to facilitate mental health and substance use treatment for people experiencing homelessness).

STRATEGY 16: Ensure Encampments Are Closed Humanely

Mayors and other local officials are under pressure to address encampments in their communities. With severe shortages of affordable housing, funding that is insufficient to meet the need, and the end of most pandemic aid. But when an encampment is prioritized for closure, the process must be implemented in a humane and trauma-informed way, and the goal must be to connect every person to housing and services to help them overcome and avoid future experiences of homelessness. People with chronic and/or acute health conditions may need additional notice and support to transition into shelter or housing. When people’s housing and service needs are left unaddressed after closures, encampments are likely to appear again in another neighborhood or even in the same place they had previously been.

Actions:

- Determine who will be on-site the day of closure and what their role will be—and communicate this information to encampment residents, clarifying that outreach workers are not part of the closure. Include health providers and peer support workers to address potential traumatic responses.
- Create timelines for planning, outreach, engagement, notice, closure, and site restoration.
- Provide encampment residents with verbal and written notices in plain and multiple languages (visible to every person and posted multiple times) of a closure at least 30 days in advance. (Imminent threats to the health and safety of encampment residents may make it not possible to provide 30 days of notice, and communities should have plans in place for such situations.) Do not change posted timelines unless necessary. If changes are necessary, provide a reasonable timeframe as well as verbal and written notice to every encampment resident.
- Communicate clearly with residents early and often about the process, housing and shelter options, and storage, among other things. Provide residents at least two days to sort and pack personal items prior to closure—unless there is an environmental health or urgent safety issue.
- To ensure constitutional rights, provide adequate notice that any belongings left behind will be removed and stored; inform people where remaining belongings will be stored; and ensure sufficient time to retrieve them.
- Ensure open availability of low-barrier shelter or other short-term housing for all residents on the day of closure.
- Offer low-barrier shelter, short-term or permanent housing, or residential treatment to every person living in an encampment, and ensure availability on day of closure.
- Secure transportation for all residents from the encampment to housing, shelter, or services.

PREVENT HOMELESSNESS

“So much of the work around homelessness is focused on the emergency of it. That is kind of the nature of the work, which I understand. But until we can go way upstream, it will always be an emergency, and people will always be struggling.”

– Student from Missoula, Montana

STRATEGY 17: Expand Supply of Affordable Housing

Housing, along with wraparound supports, is the solution to homelessness. To prevent more experiences of homelessness and new encampments, communities must have an adequate supply of affordable and supportive housing as well as high-quality and accessible services. Unfortunately, housing is unaffordable for millions of Americans. There is no county in America where a person can work full-time for minimum wage and afford typical rent. Even when people can afford a home, one is not always available. In 1970, the U.S. had a surplus of 300,000 affordable homes; today, only [33 affordable homes](#) are available for every 100 extremely low-income renters.

Actions:

- Develop realistic data-supported projections of the number of affordable and supportive housing units your community needs.
- Create an active inventory of all affordable housing units in your community, including new units in the development pipeline, existing units that may become available, and loss of units due to fire, flood, or other catastrophic events.
- Offer tax and other incentives to developers who commit a substantial number of available units to low- and extremely low-income households.
- Purchase and/or convert vacant property (e.g., hotels, motels, university dormitories) into affordable housing.
- Keep track of when affordable units with sunset dates expect to go off the market permanently due to conversion and work to preserve those units.
- Leverage existing federally funded housing programs and address barriers to ensure access for people transitioning out of homelessness.

- Examine local land-use regulations, off-street parking requirements, preservation or environmental impact regulations, and permitting processes—and identify opportunities to reduce barriers.

STRATEGY 18: Interrupt Pipelines Into Homelessness

Many people experiencing homelessness have prior involvement with or are exiting directly from publicly funded institutional systems, including foster care, juvenile and adult corrections, hospitals, and mental health and substance use treatment facilities. For example, studies have found that [nearly one-third of youth experiencing homelessness](#) have had experiences with foster care. Ending homelessness will require a whole-of-government approach to close gaps and provide greater support to increase the likelihood of housing stability and decrease the likelihood of a subsequent occurrence of homelessness.

Actions:

- Use administrative data to assess the degree to which people experiencing homelessness are currently interacting with these systems and to identify opportunities for intervention.
- Engage state and local corrections agencies, child welfare agencies, hospitals, and other public systems that may serve people experiencing homelessness.
- Begin discharge planning as early as possible—ideally during admission—and assess and strengthen discharge planning protocols (e.g., add questions about housing status on discharge screening tools, take into consideration physical, psychological, and cognitive disabilities in discharge planning and navigating transitions).
- Leverage programs like [Veterans Justice Outreach](#), [Family Unification Program](#) vouchers, [Foster Youth to Independence](#) vouchers, and [Medicaid waivers](#).

STRATEGY 19: Build and Strengthen Safety Nets

The COVID-19 pandemic proved that homelessness is a policy choice. The nation came together to invest more in housing, health care, and other services to prevent people from losing their homes in the first place. For instance, the creation of emergency rental assistance, enforcement of eviction moratoria, expansion of unemployment insurance and child tax credits, and provision of direct cash in the form of economic impact payments [prevented millions of evictions](#) and [cut poverty nearly in half](#). As a result, we prevented a rise in homelessness from 2020 to 2022 during the pandemic.

Actions:

- Create a homelessness prevention committee or working group that includes people who have experienced homelessness and a wide range of federal, state, local, and private programs that may serve low-income households broadly.
- Map out existing prevention resources and assess the demographics, characteristics, and location of people at risk of or entering the homelessness response system.
- Use administrative data to assess the degree to which public benefits are reaching people in your community across a range of income levels and demographics and take proactive steps to address disparities.

CONCLUSION

Everyone deserves a safe and affordable home. Like clean air, water, and food, affordable and accessible housing is a basic human need necessary for the health of individuals, families, and communities. As communities work to solve homelessness, they should keep in mind that ending homelessness requires both patience and urgency to implement humane solutions that not only help people move off the streets but prevent people from losing homes in the first place. Facing the crisis of unsheltered homelessness is challenging, but you are not alone. **For help tailoring and implementing these strategies in your community, [contact your USICH Senior Regional Advisor.](#)**

APPENDIX A

Federal Funding Opportunities to Address Encampments

This chart outlines select (not comprehensive) federal funding, however, USICH acknowledges that in many communities, most funding to address encampments comes from [non-federal sources](#).

All In Solution	Strategy		
Equity	<p>Strategy 1:</p> <p>HUD Continuum of Care Planning Grants</p> <p>HUD Emergency Solutions Grants</p> <p>HHS Grants for the Benefit of Homeless Individuals</p>	<p>Strategy 2:</p> <p>HHS Health Care for the Homeless</p> <p>HHS Projects for Assistance in Transition From Homelessness</p> <p>HHS Grants for the Benefit of Homeless Individuals</p> <p>HHS Treatment for Individuals Experiencing Homelessness</p>	N/A
Collaboration	<p>Strategy 3:</p> <p>N/A</p>	<p>Strategy 4:</p> <p>HUD Continuum of Care Program</p> <p>HUD Emergency Solutions Grants</p> <p>HHS Grants for the Benefit of Homeless Individuals</p> <p>HHS Treatment for Individuals Experiencing Homelessness</p> <p>HHS Health Care for the Homeless</p> <p>HHS Projects for Assistance in Transition from Homelessness</p> <p>HHS Runaway and Homeless Youth Street Outreach Program</p> <p>VA Supportive Services for Veteran Families Program</p> <p>VA Health Care for Homeless Veterans</p>	<p>Strategy 5:</p> <p>N/A</p>
Data	<p>Strategy 7:</p> <p>HHS Health Care for the Homeless</p> <p>HHS Projects for Assistance in Transition From Homelessness</p> <p>HHS Grants for the Benefit of Homeless Individuals</p> <p>HHS Treatment for Individuals Experiencing Homelessness</p>	<p>Strategy 8:</p> <p>HUD Continuum of Care Program</p> <p>HHS Grants for the Benefit of Homeless Individuals</p> <p>HHS Treatment for Individuals Experiencing Homelessness</p>	<p>Strategy 9:</p> <p>HUD Continuum of Care Program</p>

All In Solution	Strategy		
Crisis Response	<p>Strategy 10:</p> <p>HHS Health Care for the Homeless</p> <p>HHS Medicaid</p> <p>VA Health Care for Homeless Veterans</p>	<p>Strategy 11:</p> <p>HHS Medicaid</p> <p>HHS Projects for Assistance in Transition From Homelessness</p> <p>HHS Treatment for Individuals Experiencing Homelessness</p> <p>HHS Grants for the Benefit of Homeless Individuals</p> <p>HHS Health Care for the Homeless</p> <p>HHS Street Outreach Program</p> <p>HUD Continuum of Care Program</p> <p>HUD Emergency Solutions Grants</p> <p>VA Health Care for Homeless Veterans</p> <p>VA Supportive Services for Veteran Families Program</p> <p>VA Grant and Per Diem (GPD) Program</p>	<p>Strategy 12:</p> <p>HUD Emergency Solutions Grants</p>
	Housing & Support	<p>Strategy 14:</p> <p>FEMA Emergency Food and Shelter Program</p> <p>HUD Continuum of Care Program</p> <p>HUD Emergency Solutions Grants</p> <p>HUD HOME-ARP Program</p> <p>HUD Community Development Block Grants</p> <p>HHS Street Outreach Program</p> <p>HHS Medicaid</p>	<p>Strategy 15:</p> <p>N/A</p>
Prevention		<p>Strategy 17:</p> <p>IRS Low Income Housing Tax Credit</p> <p>HUD HOME Investment Partnerships Program</p> <p>HUD Housing Trust Fund</p>	<p>Strategy 18:</p> <p>HUD Foster Youth to Independence Initiative</p> <p>HUD Continuum of Care Program</p>

All In Solution	Strategy		
	HUD Pathways to Removing Obstacles to Housing HUD Community Development Block Grant Program	VA Supportive Services for Veteran Families Program	USDA Multifamily Housing Loans

APPENDIX B: TECHNICAL ASSISTANCE & OTHER RESOURCES

Equity

- [Methods and Emerging Strategies to Engage People With Lived Experience](#) (HHS)
- [Engaging People With Lived Experience to Improve Federal Research, Policy, and Practice](#) (HHS)
- [People With Lived Experience Must Be Meaningful Partners in Ending Homelessness](#) (USICH)
- [Funding Supportive Housing Services for People With Behavioral Health Needs: Federal Resources](#) (HHS)
- [National Health Care of the Homeless Council Learning Hub](#)
- [Coexistence in Public Space: Engagement Tools for Creating Shared Spaces in Places With Homelessness](#) (SPUR and Gehl)
- [Research & Results: 9 U.S. Localities Offer Human-Centered Approaches to Unsheltered Homelessness](#) (Arnold Ventures)
- [3 Ways Communities Can Promote Inclusive Public Space and Better Support People Forced to Live Outside](#) (Urban Institute)
- [The Curb-Cut Effect](#) (Stanford Social Innovation Review)
- [Crime Prevention Through Environmental Design: It's More Than Just Lighting](#) (Choice Neighborhoods Conference)

Collaboration

- [Initiative for Unsheltered and Rural Homelessness Technical Assistance Strategy](#) (HUD)
- [Protecting the Health and Well-Being of People in Encampments and Other People Who Access Public Spaces](#) (HUD)
- [Case Studies: Ending Homelessness for People Living in Encampments](#) (USICH)

- [Ending Homelessness for People Living in Encampments: Advancing the Dialogue](#) (USICH)
- [Office of Policy Development and Research Quarterly Update on Housing First](#) (HUD)
- [Effective Police-Mental Health Collaboration Responses to People Experiencing Homelessness](#) (DOJ)
- [What Other Cities Can Learn From Boston’s Public Health Approach to Homelessness](#) (HUD)
- [Sharing the Solutions: Police Partnerships, Homelessness, and Public Health](#) (DOJ)
- [In-Depth Program Assistance](#) (HUD)
- [Senior Regional Advisors](#) (USICH)
- [Epidemiologic Assistance](#) (CDC)
- [Engaging Individuals With Lived Expertise](#) (HUD)

Data

- [Client-Centered Data Collection Approach: Virtual Reality Series](#) (HUD)
- [Community Compass TA and Capacity Building Program](#) (HUD)
- [Training on Homelessness for Public Health Professionals](#) (CDC)
- [Protecting Health and Well-Being of People in Encampments During an Infectious Disease Outbreak](#) (HUD)
- [Infectious Disease Toolkit for Continuums of Care: Preventing and Managing the Spread of Infectious Disease Within Encampments](#) (HUD)
- [Health Impact of Street Sweeps From the Perspective of Healthcare Providers](#) (Journal of General Internal Medicine)
- [Federal Health and Social Service Programs That Support People Experiencing Homelessness](#) (USICH)
- [Core Elements of Effective Street Outreach to People Experiencing Homelessness](#) (USICH, HUD, VA, HHS, NAEH)
- [The Role of Outreach and Engagement in Ending Homelessness: Lessons Learned From SAMHSA’s Expert Panel](#) (SAMHSA, HUD, USICH)
- [How Not to Sweep Those Without Housing During a Pandemic: Pittsburgh](#) (National Coalition for the Homeless)

Housing & Support

- [Caution Is Needed When Considering “Sanctioned Encampments” or “Safe Zones”](#) (USICH)
- [Model Transitions from Non-Congregate Shelter: Joint Recommendations for Assisting People Experiencing Homelessness](#) (FEMA, HUD)

- [Key Considerations for Implementing Emergency Shelter within an Effective Crisis Response System \(USICH\)](#)
- [Housing and Services Resource Center \(HUD and HHS\)](#)
- [Community Profiles for Engaging Landlords: Risk Mitigation Funds \(USICH\)](#)
- [Planning a Housing Surge to Accelerate Rehousing Efforts in Response to COVID-19 \(HUD\)](#)
- [Housing Surges—Special Considerations for Targeting People Experiencing Unsheltered Homelessness \(HUD\)](#)
- [Housing Command Center TA \(HUD\)](#)
- [Barriers to Affordable Housing Webinar Series \(HUD\)](#)
- [Serving People in Encampments with Severe Service Needs \(HUD\)](#)
- [Exploring Homelessness Among People Living in Encampments and Associated Cost: City Approaches to Encampments and What They Cost \(HUD, HHS\)](#)
- [Understanding Encampments of People Experiencing Homelessness and Community Responses, Emerging Evidence as of Late 2018 \(HUD\)](#)

Prevention

- [Questions to Consider Regarding Inclusionary Zoning Policy \(USICH\)](#)
- [White House Housing Supply Action Plan](#)
- [PHA Strategies to Assist People Experiencing Homelessness Guidebook \(HUD\)](#)
- [A Primer on Affordable Housing Development and Key Funding Sources \(HUD\)](#)
- [Increasing Collaboration Between Health Care and Housing Programs to Improve Outcomes and Reduce Costs \(USICH\)](#)
- [HHS/FYSB Youth Homelessness Prevention Demonstration Program \(HHS\)](#)
- [Meeting the Needs of Formerly Incarcerated and Justice-Involved People \(HUD\)](#)