RESEARCH METHODS
From September 2010 to January 2012, the study enrolled 2,282 families living in 12 communities. Researchers randomly assigned treatment groups to families that recently spent at least 7 days in emergency shelters. The study tracked these families over the span of 3 years, with two surveys measuring the impacts at 20 months and 37 months after assignment. Reports published in July 2015 and October 2016 summarized the findings of these surveys for outcomes in four areas of interest:
- Housing stability: nights spent homeless, doubled-up, or in emergency shelter
- Family preservation: whereabouts of family members or changes to household composition
- Adult/child well-being: physical/mental health and incidence of trauma, substance abuse, and domestic violence
- Self-sufficiency: employment status, household income, education/training, and food security

ABOUT THE HOMELESSNESS POLICY RESEARCH INSTITUTE
The Homelessness Policy Research Institute (HPRI) convenes researchers and policymakers to help design and coordinate timely, relevant, and actionable research to end homelessness in Los Angeles County. HPRI is a partnership between the USC Price Center for Social Innovation and the United Way of the Greater Los Angeles’ Home for Good Initiative.

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THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT launched the Family Options Study in 2008 to determine the effectiveness of policy interventions that assist families experiencing homelessness. This brief highlights the findings, applies policy lessons to LA County’s Homeless Initiative (HI), and recommends further areas of research. The three-year, multi-state study evaluated the impact of giving families in emergency shelters priority access to one of the following interventions:

- **Subsidy only (SUB):** permanent housing subsidy without additional services (e.g., Housing Choice Voucher)
- **Community-Based Rapid Re-housing (CBRR):** temporary housing subsidy for private housing with limited additional services
- **Project-Based Transitional Housing (PBTH):** temporary stay in transitional housing facility with emphasis on additional services
- **Usual Care (UC):** services or assistance that homeless families usually receive (such as shelters, temporary housing, and job training) without priority access to any of the above programs

**POLICY IMPLICATIONS FOR THE LOS ANGELES REGION**

The benefits exhibited by long-term subsidies support advancing HI strategies that facilitate or expand housing voucher programs. For example, no current HI strategy grants priority access to families in emergency shelters for long-term subsidy programs.\(^1\) Further research should be done to determine how best to expand access to this intervention and the costs associated.

Current recommendations for FY 2019-2020 increase the budget for HI strategy B4, which financially incentivizes landlords to secure housing for voucher recipients.\(^2\) Results from this study support the use of strategies like B4 that increase access and effectiveness of long-term rental subsidies.

Priority access to rapid re-housing produced roughly the same outcomes as usual care, but it costs 9% less. This supports current HI efforts to expand rapid re-housing programs (e.g., HI strategy B3) since these programs save resources in comparison to status quo care.

Policies should avoid granting priority access to transitional housing programs since this intervention showed little to no measureable advantage to usual care or other interventions.

Evidence here supports the theory that the high cost of housing primarily causes homelessness. This highlights the importance of County efforts to directly address housing costs by building more affordable housing and expanding access to current units for families experiencing homelessness.

Several family outcomes of interest saw no improvement over 3 years despite priority access and intervention policies. As such, further research should address housing stability outcomes, food security concerns, and employment and training opportunities.


**SNAPSHOT FINDINGS**

- Families with priority access to long-term subsidies saw improved outcomes in housing stability in comparison to families receiving usual care (Figure 1). Long-term subsidies increased the number of families living in their own place by 15 percentage points, reduced the number of places families reported living, and reduced the proportion of families with a recent shelter stay by nearly three-fourths (Figure 1). Surveys also indicated that long-term subsidies reduced: proportion of families separated from a child, stress of the head of household, and reported incidence of domestic violence, substance abuse, and food insecurity.

- Families with priority access to rapid re-housing saw no significant differences in outcomes for housing stability, family preservation, or adult well-being. However, surveys indicated that CBRR reduced school/childcare absences and reported child behavior issues.

- Families with priority access to transitional housing reported fewer emergency shelter stays (9%) in comparison to families receiving usual care (15%). No additional differences in outcomes were found between the PBTH group and the UC group. Even though additional services and costs associated with PBTH are directed at adult/child well-being and family self-sufficiency, the PBTH groups did not display improved outcomes in these areas.

- At $4,819 per month, the cost of providing shelter and housing services to families in emergency shelters exceeds that of the three interventions combined (Figure 2). Both emergency shelters and transitional housing incur higher costs due to additional services. Long-term subsidies and rapid re-housing were the least expensive intervention at $1,172 and $880, respectively.


\(^5\) Housing Choice Voucher

\(^6\) Independent community-based rapid re-housing

\(^7\) Family-Based Transitional Housing

\(^8\) Community-Based Re-Housing

\(^9\) Usual Care

\(^10\) Housing Choice Voucher

\(^11\) Project-Based Transitional Housing

\(^12\) Usual Care

Sources: Gubits et al. (2015), exhibits 6-4; Gubits et al. (2016), exhibits 3-5

**FIGURE 1**

**Housing Stability at 37 Months**

- Families with priority access to long-term subsidies saw improved outcomes in housing stability in comparison to families receiving usual care (Figure 1). Long-term subsidies increased the number of families living in their own place by 15 percentage points, reduced the number of places families reported living, and reduced the proportion of families with a recent shelter stay by nearly three-fourths (Figure 1). Surveys also indicated that long-term subsidies reduced: proportion of families separated from a child, stress of the head of household, and reported incidence of domestic violence, substance abuse, and food insecurity.

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**FIGURE 2**

**Average Per-Family Monthly Cost of Housing and Services**

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