



Home for now: A mixed-methods evaluation of a short-term housing support program for homeless families



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ABSTRACT

The use of short-term rental subsidy vouchers offers a new approach to addressing the housing needs of families facing homelessness. In Massachusetts, the Family Home pilot program placed homeless families in housing instead of shelter, providing two years of rental subsidy plus support services with the goal of enabling families to maintain market rate housing. This mixed-method case study complements staff and participant interview data with participant survey and administrative data to evaluate the implementation and short-term outcomes of Family Home in one region. Data point to improved family well-being in housing but also persistent barriers to achieving longer-term housing and economic stability. Of the families who had exited the program at the end of the study, one quarter were able to retain their housing at market rate, only 9% returned to shelter, and one in five moved in with families/friends. Lack of affordable housing in a high rental cost region and jobs that pay living wages were among the major reasons that families struggled to maintain housing. This research points to the need for integrating supportive services from the program's start, including targeted workforce development, to plan for the end of the short-term rental subsidy.

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1. Introduction

The number of homeless families¹ has been growing and becoming increasingly visible since the early 1980s, when families first began to appear on the streets of U.S. cities (Burt, 1991; Rog & Buckner, 2007; Schön & Rein, 1995). Nationally, family homelessness increased sharply since the early '80s, and has only leveled off and begun to decrease slightly since 2005 (Berg, 2012; Office of Community Planning and Development, 2013b). In contrast to this recent national trend, the number of homeless families in Massachusetts has continued to grow, increasing by 71% between 2007 and 2012 (Office of Community Planning and Development, 2013a). In Massachusetts and nationally, while a Housing First approach has gained more traction in the recent decade, the

predominant approach to addressing family homelessness (as for other homeless groups) continues to be the Treatment First model utilizing emergency shelter and other programs that address service needs when individuals and families become homeless.

Families who lose their homes in Massachusetts, a right-to-shelter state², need to qualify for shelter assistance based on family income and assets, unlike single homeless persons (US Department of Housing and Urban Development, 2011). In Massachusetts, this assistance is called Emergency Assistance (EA), a package of services that includes shelter and case management directed at finding a permanent housing solution. In shelter, families are expected to access the resources they need to transition to market-rate housing. Research has demonstrated that exit from shelter into stable housing is mostly determined by access to permanent housing subsidies plus support services (Rog & Buckner, 2007). However, the number of permanent housing subsidies for low-income people has decreased in recent years (Curnan, 2010; Rice, 2014). In response to these trends, the state turned to a new

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¹ In Massachusetts, a homeless family is defined as a family with one or more dependent children under the age of 21, or a pregnant woman with no dependent children who is facing homelessness (Eligibility for Emergency Assistance (EA), 2012). It is worth noting that the federal definition is more restrictive: According to HUD, a homeless family is defined as one or more parents with one more children under the age of 16—a pregnant woman with no dependent children does not qualify (Homeless Emergency Assistance and Rapid Transition to Housing: Defining 'Homeless', 2011; United States Interagency Council on Homelessness, 2012).

² "Right-to-shelter" means that any family that meets the eligibility criteria has a right to state-sponsored shelter, in an emergency shelter, a scattered-site apartment, or a motel.

approach to supporting homeless families in accessing stable housing: the use of short-term housing supports.

Massachusetts piloted a short-term housing support program in the summer of 2009, referred to in this text as Family Home³. Family Home provided rental vouchers plus case management support for up to two years to families that qualified for EA in Massachusetts, a state known for its high rents and housing affordability challenges. Case management services were provided by housing stabilization workers, a new position created for Family Home. Services were minimal: monthly contact in person or by phone that mostly focused on filling out applications for permanent housing subsidies. The program's goal, according to the state, was for Family Home participants to increase their incomes so that they could maintain housing at market rate, and to support these families during the two years in Family Home in achieving housing stability as a first step in their journey toward self-sufficiency. Family Home ran for two years, from August 1, 2009 to the fall of 2011.

This new short-term housing support approach was loosely based on the Housing First model for chronically homeless individuals that originated in the late 1990s (Bassuk & Geller, 2006; Padgett, Gulcur, & Tsemberis, 2006). Reversing the Treatment First model ingrained in the emergency shelter approach, which focuses on providing services first (i.e., before housing,) the Housing First model focuses on placing people in stable housing *first* and then providing them with the intensive services they need to be able to sustain this housing. This model has proven extremely effective with chronically homeless individuals (Meschede, 2007) and, in particular, with those struggling with psychiatric disabilities (Padgett et al., 2006). However, Family Home differed from the Housing First model in three important ways. First, the Family Home rental subsidy was limited to two years; second, the case management services provided once they were in housing were very limited; and third, the program was for families, not individuals.

This study provides a critical evaluation of one region's participation in Family Home, including both program implementation and participants' short-term outcomes. Using several data sources examining multiple perspectives, this research aims at providing empirical evidence in three areas: (1) life in Family Home, including access to and quality of housing, and finding and maintaining employment; (2) assessment of the pilot model by multiple stakeholders; and (3) expected and actual housing outcomes at program exit. This study adds to prior research (e.g., Davis & Lane, 2012) by using a mixed methods research design to incorporate many perspectives to this new approach of addressing family homelessness. Data collection for this evaluation was funded by the largest homeless service provider in the region. The funder had no role in the study design or analysis and had no part in writing this article or in the decision to publish it.

2. Background and previous literature

2.1. Homeless families and access to housing

Family homelessness has many negative impacts for parents themselves and poses substantial challenges for raising their children without housing. Nationally and locally, homeless families are predominately female-headed households with young children (Rog & Buckner, 2007). Homelessness affects these mothers' ability to parent, as well as their own and their children's health and well-being (Cutts et al., 2011). Life in shelter is often characterized by a

lack of privacy, rigid rules, and routines; compliance is required in order to continue to receive shelter services and this requirement can compromise homeless mothers' relationships with their children (Friedman, 2000). Research suggests that rigid shelter rules and the constant presence of shelter staff disrupt parents' ability to create structure and discipline in their children's lives (Lindsey, 1998). Mothers have to negotiate their simultaneous roles as parents with authority and as clients who are required to submit to staff authority (Deward & Moe, 2010)⁴.

Without housing support – i.e., rental subsidy and supportive services – it is extremely difficult for these families to transition to self-sufficiency (Rog & Buckner, 2007). Families facing homelessness have extremely low incomes, often cannot afford market-rate rents, and lack the social networks that can provide housing support in times of crisis (Bassuk & Rosenberg, 1988). Housing subsidies are a critical element to preventing homelessness and maintaining stable housing, both of which improve child and family welfare (Bassuk & Geller, 2006; Shinn, 2009). However, long-term housing vouchers have been on the cutting block in recent years (Rice, 2014). In Massachusetts, state funding for permanent housing subsidies has been dramatically reduced over the years: allocation to housing vouchers in the state's 2010 budget was less than a quarter of its allocation in the 1990 budget (Curman, 2010).

While housing supports are critical to homeless parents' ability to return to housing, research suggests that they are not enough to move these families toward self-sufficiency. Once re-housed, homeless parents need steady employment to be able to maintain their housing for the long term, particularly as cash assistance programs suffer budget cutbacks (Shaheen & Rio, 2007). Low-income single mothers in Massachusetts with low levels of education face few job opportunities, and those jobs that are available pay extremely low wages, often much less than these women need to support their families (Loya, Liberman, Albelda, & Babcock, 2008). However, these women do not have the resources to pursue higher education, and if they do increase their earnings slightly then they face the possibility of losing valuable work supports such as child care vouchers (Loya et al., 2008; Prenovost & Youngblood, 2009). Women continue to earn less than men on average, and although women's employment rates suffered less than did men's in the most recent recession of 2007–2009, the persistent gender pay gap leaves low-income women with few opportunities for economic mobility (Albelda & Kelleher, 2010; Shriver & The Center for American Progress, 2014).

2.2. Short-term housing subsidies

Since 1983, Massachusetts state law has mandated that families facing homelessness and meeting certain income and asset eligibility guidelines (income under 115% of the federal poverty line and no more than \$2500 in assets) have a right to EA, a package of shelter and case management services⁵. EA-eligible families are placed in either congregate housing or scattered site units; when these are full, the state puts overflow families into budget motels. The number of homeless families in Massachusetts had risen steadily over the course of the last decade and continues to rise. Shelters had been filled to capacity (almost 1900 beds) for many years (Culhane & Byrne, 2010; Office of Community Planning and Development, 2013b). As a result, in 2011, over 1700 families were living in motels (Burge, 2012). Escalating expenses for shelters and

⁴ A vast literature on the effects of homelessness on children exists, but will not be reviewed here because this evaluation did not include assessment of children's well-being.

⁵ The right to shelter was established in the state's Acts of 1983, Chapter 450, §1(D)(d), as part of then-Governor Dukakis' large-scale plan to reduce homelessness in the state (Schön & Rein, 1995).

³ The actual pilot program did not have an official name. Program staff informally referred to it by one of its many funding sources. It is worth noting that this pilot preceded HomeBASE, a statewide short-term housing support program initiated in 2011.

motels and long shelter stays (the state average is eight months) that can be disruptive to family well-being called for a review of the current system (Culhane & Byrne, 2010). Massachusetts piloted the Family Home program in response to these trends.

Little research has examined the effectiveness of the short-term housing support model as a policy tool in Massachusetts. However, a few other locations have implemented rapid re-housing programs similar to Family Home, and some preliminary data from these programs exist. Most notably, New York City implemented a rapid re-housing program for homeless families from 2007 until 2011, titled Advantage, and Hennepin County, Minnesota has had a rapid re-housing program in place since 1993.

New York's Advantage program offered services similar to Family Home. Advantage rapidly re-housed families that faced homelessness by supplying them with two years of rental subsidies, and helped them find long-term housing solutions. Advantage served more than 21,000 families and dramatically reduced the length of shelter stays during its four years, but did not reduce the rate of shelter entry for families (Durham & Johnson, 2014). It was criticized for being a "revolving door," i.e., families would not be able to increase their incomes sufficiently in two years to meet the high cost of housing in New York, and would have to return to shelter when their subsidies ended (Secret, 2011). At its end, over a quarter of Advantage families had returned to shelter (Durham & Johnson, 2014; Routhier, 2012).

Hennepin County, Minnesota has embraced the rapid re-housing approach since the launch of its Family Homeless Prevention and Assistance Program (FHPAP) in 1993. The FHPAP, now operating statewide, provides cash assistance for families facing eviction because of arrears in rent or utilities in order to divert them from homelessness, as well as landlord mediation, shelter and rapid re-housing with rental subsidy, and case management to connect participants to community services. FHPAP showed a 47% decrease in time families in Hennepin County spent in shelter between 2000 and 2003, and significant cost savings to the county (Hennepin County Office to End Homelessness, 2011; Liou, Nutt, Dunnham, & Sanchez, 2011; National Alliance to End Homelessness, 2006). Unlike Massachusetts, housing prices in Hennepin County fall into the more affordable price range: fair market rent⁶ for a two-bedroom apartment in Hennepin County was \$904 in 2011, as compared with \$1291 in the Massachusetts county where this research was conducted, and \$1209 statewide (Bravve, DeCrappeo, Pelletiere, & Crowley, 2011)⁷.

Finally, an evaluation of a sub-group⁸ of Family Home participants at four sites in Massachusetts reports qualified program success (Davis & Lane, 2012). Two years into program operation (in December, 2011), over three quarters remained stably housed, though well over half of them continued to receive Family Home assistance and faced the end of their subsidies within six months. Those who had exited Family Home at the time of the study by and large had either received a long-term subsidy or had unknown housing outcomes because they had either left voluntarily or been terminated from the program. The families in this evaluation saw some increase in income as a result of

program participation but this increase was not sufficient to allow them to pay market rents.

The research presented in this article builds on this prior Family Home evaluation in two important ways. First, the prior evaluation only reports on families whose Family Home participation was funded by federal funds from the Homelessness Prevention and Rapid Re-Housing Program (HPRP). The state funded many more Family Home slots with similar terms and these participants are not included in this evaluation. Second, the research presented in this article includes data from interviews with program participants and staff, and these data are critical to understanding the program's full impact on participants' lives.

3. Family Home: The Massachusetts short-term rental voucher pilot program

Facing rapidly rising costs for shelters and motels as well as increasingly long shelter stays, Massachusetts committed to reforming its Emergency Assistance programs in 2009 to reduce shelter use and promote flexible responses to homelessness (Curnan, 2010). In the summer of 2009, as part of this reform, the state piloted Family Home, a short-term housing support program for eligible families facing homelessness. The families in this pilot were on waiting lists for permanent subsidies (Housing Choice Voucher Program, public housing, and Massachusetts' MRVP) but waiting lists have been quite long in Massachusetts for many years, ranging from two years in rural areas to eight or more years in Boston and other major cities. Furthermore, the families in Family Home were not eligible for Permanent Supportive Housing (PSH) because they were not disabled. They were able to work but, due to their low levels of education, the downturn in the economy, and the high cost of housing in the state, they were unable to sustain housing at market rates.

The Family Home model promoted rapid re-housing and homelessness prevention for families with an eye toward their building a foundation for housing security and economic self-sufficiency. According to the state, this model was intended to move families facing homelessness quickly back into housing, where they could work towards being able to maintain market rent over the two years of housing supports. It also presented a more efficient approach for the use of limited state resources, as shelter stays and motels were (and continue to be) much more expensive than housing families in the community (Culhane & Byrne, 2010; Pulster, 2010).

The Family Home pilot model was as follows: Families moved quickly from shelter to housing and received twelve months of housing support, which included rental subsidy and support services provided by housing stabilization workers. These supports were renewable up to an additional twelve months: families could apply for two six-month extensions. Families in Family Home paid between 25% and 35% of their income towards rent and were responsible for 100% of any utilities that were not included in the rent. Once families were housed, housing stabilization workers were assigned to assist families, providing support and help in accessing community services, such as job training, educational programs and health care. Housing stabilization workers had caseloads of 35 to 50 families and were expected to have monthly contact with families at a minimum.

Families were referred to Family Home when in shelter or motel. Soon after a family arrived at the shelter or motel, a shelter or motel caseworker could refer the family to Family Home if the caseworker deemed them appropriate. It is worth noting that caseworkers were instructed to refer families that they considered most likely to succeed in the program. Therefore, the caseworkers' discretion in referring families to the program introduced the potential for bias in this evaluation. Once referred to Family Home,

⁶ Fair Market Rent is determined by HUD. For more information see <http://www.huduser.org/>.

⁷ Since 2011, the cost of housing in Hennepin County, Minnesota has increased, from \$904 in 2011, to \$946 in 2014, for a two-bedroom apartment. In Massachusetts, statewide, the cost of housing has also increased, from \$1209 in 2011 for a two-bedroom apartment, to \$1252 in 2014. However, the cost has decreased in the county in which this research was conducted, from \$1291 in 2011 to \$1152 in 2014 (Arnold, Crowley, Bravve, Brundage, & Biddlecombe, 2014).

⁸ This sub-group was not representative of the entire Family Home population.

families looked for an apartment with rent up to 80% of the area's fair market rent (determined by HUD); they generally used online advertisements such as Craigslist and the newspaper. Family Home also provided financial assistance with moving costs, paying storage rental fees, and paying any utility bills that might have been in arrears from previous residences, so that the families could get set up in their new apartments.

Once in Family Home, participants were assigned a housing stabilization worker. Housing stabilization workers checked in with families once a month, either in person or over the phone. During these meetings, housing stabilization workers assessed participants, filled out paperwork required by Family Home's funding source (the program had both state and federal funding sources) and completed or updated applications for permanent housing subsidies. In addition, housing stabilization workers assessed participants' individual needs in order to connect them to any area services they have might needed. Housing stabilization workers also made sure that participants were compliant with program rules, which centered around tenancy: participants were required to pay their portion of the rent on time and to adhere to any rules that their landlords may have imposed.

Funding for Family Home was provided by state and federal resources. The largest share of funding came from the federally funded Homeless Prevention and Rapid Re-Housing Program, part of the American Recovery and Reinvestment Act of 2009. The bulk of Family Home funding was expended in the first year. Between August 2009, and May 2010, the vast majority of families in shelter were referred to Family Home and moved quickly into apartments. After May 2010, funds dried up considerably, and shelter and motel caseworkers became much more selective about whom they would refer to the program.

This case study evaluates one region's participation in Family Home, following participants and staff over the course of a year in the program. The region was a metropolitan area of approximately 100,000 people in 2011. Whites were underrepresented in this area, constituting less than 50% of the population. The population was just over 30% African-American and 10% Latino. Median household income was about \$50,000, which was well below the state median, and 17% of the population lived in poverty (above the state median of 11%). The county surrounding this city more closely resembled the state as a whole, suggesting that this city was a pocket of disadvantage. The city had only a handful of homeless service provider agencies, the largest being the agency that contracted this evaluation⁹.

4. Mixed methods evaluation research

This evaluation employs a mixed-methods case study research design. Evaluation studies need to attend to the complex relationships between many factors both within and external to the program under consideration, requiring many indicators to make judgments about the program (Rallis & Rossman, 2003). Therefore, both quantitative and in-depth qualitative data are required. The mixed method study design offers a comprehensive view of both program outcomes and the mechanisms through which families achieved varying levels of housing security. Mixed methods study designs also provide the opportunity to examine deeper meaning while producing generalizable results (Creswell & Plano Clark, 2011; Onwuegbuzie & Teddlie, 2003). Case studies are an effective tool for examining complex phenomena within their context, and are frequently used in evaluation research specifically because of their ability to explain an outcome while taking into account the social context in which it occurs (Yin, 2003).

Mixed methods research combines quantitative and qualitative research methods into one research design; evaluation research has been at the forefront of using mixed methods over the past several decades (Creswell & Plano Clark, 2011; Greene, Caracelli, & Graham, 1989). There are several reasons for using mixed methods and several ways of designing a mixed methods research project. Using Creswell and Plano Clark's (2011) typology of mixed methods research designs, this evaluation employs a "convergent parallel" design. In a convergent parallel research project, quantitative and qualitative data are collected simultaneously and each dataset is analyzed separately. Then, the results are merged to examine how the findings complement each other. This research design offers a complete and multi-dimensional picture of the subject of research, and is particularly useful when sample sizes are small, because it allows for epistemologically different analyses of data on the same subjects (Creswell & Plano Clark, 2011).

5. Research questions

This evaluation was guided by the following research questions:

1. What was participants' experience in Family Home? How did they find housing and employment, and what types of housing and employment did they find?
2. How did participants and program staff evaluate Family Home?
3. What happened to participants at the end of their subsidies?

6. Data and methods

Data were collected from a range of sources crucial to Family Home program activities and operations; data collection methods and study design were approved by an Institutional Review Board. All Family Home family heads of household who entered the program between August 1, 2009 and May 31, 2010 ($N = 155$) are included in this study, as well as all program staff who worked with these families. Data sources include (a) six in-person interviews and three focus groups with program staff ($N = 13$ staff members in focus groups), as well as nine interviews with other key stakeholders including state agency administrators and homeless advocates; (b) interviews with participant family heads of household ($N = 22$) targeted to achieve maximum variation, conducted about a year after they entered the short-term subsidy program; (c) a survey on financial behavior and well-being targeting the first cohort of families one year after program entry; (d) an exit survey of this same population; and (e) basic demographic information from the Massachusetts' Homelessness Management Information System (HMIS) for this population, including income, education, health and disability, and length of stay in shelter. All quantitative data were merged into one data set. In addition, the authors constructed a comparison group using HMIS data. The comparison group consisted of heads of household from the same regional shelter system who exited shelter or motel between May 1, 2010 and March 15, 2011 (i.e. just after the bulk of Family Home subsidies were distributed) and did *not* go into Family Home. Because HMIS only contains demographic and limited housing data, the comparison group was used to detect baseline differences between the two groups.

Participant interview respondents were recruited as follows: Housing stabilization workers distributed a letter of recruitment stating the purpose of the research to all English-speaking participants in the study population (the vast majority of participants were English-speaking; the few who were not were excluded because no members of the research team spoke any of these participants' first languages). If a participant consented to participate, the housing stabilization worker sent the participant's

⁹ Regional data are from the US Census Bureau.

name and phone number to the research team. The research team then contacted the participant to set up an interview. Interviews took place in participants' homes and lasted about an hour, and participants received a \$20 gift card to an area supermarket as compensation for their time.

Participant interviews were semi-structured, with an interview guide designed to answer the evaluation questions. The interview guide was synchronic (Weiss, 1994, pp. 44–45) and covered the following domains: prior housing, cause of homelessness, experience in shelter/motel, finding current apartment, family health and well-being, employment and financial well-being, program assessment (including experience with housing stabilization worker), and plans for the future. The research team conducted interviews with families until maximum saturation was achieved, i.e., until all of what was heard in an interview had already been heard in prior interviews (Corbin & Strauss, 2008) or, put differently, until any additional data did not expand or change the thematic category that was being developed (Glaser & Strauss, 1967, p. 61).

Staff interviews were conducted similarly: The program director recruited staff for interviews and small focus groups. The director introduced the project to the staff and the research team then contacted staff by email. Individual interviews were conducted with higher-level and specialized staff ($N = 6$), and the three focus groups were with frontline staff ($N = 13$ staff members total). These interviews took place during work hours. A semi-structured interview guide was used to collect data on staff opinion of the program model, assessment of the impact of the program on families' health and well-being, use of services, access to employment and benefits, daily living activities, and finally, staff experience working in this program. These interviews were conducted approximately six months into program operation.

All participant and staff interviews and focus groups were recorded and the recordings were transcribed. Interview data were analyzed with qualitative data analytic software (NVivo) using a modified grounded theory approach (Glaser & Strauss, 1967). A set of deductive codes was assigned initially, related to the evaluation questions. From there, interviews were analyzed inductively for emergent themes, yielding a set of tree and free codes (Corbin & Strauss, 2008).

Two surveys collected additional information on Family Home families. A survey on general and financial well-being was sent to all Family Home families one year after program entry ($N = 155$), after it was pilot-tested with a sample of program participants. The survey employed Likert scales that asked families detailed questions about their financial status, sources of income, levels of anxiety related to finances, and money-related barriers to meeting their goals for the future. Finally, an open-ended question asked for an assessment of the Family Home program. Fifty-eight surveys were completed, resulting in a response rate of 37%. There were no significant differences in demographics (gender, race/ethnicity, and age), employment or income between the group that completed the survey and the group that did not.

At the end of the study period, a short exit survey on reasons for leaving and destination was distributed to housing stabilization workers. Housing stabilization workers contacted Family Home participants who had exited the program to complete the survey together over the phone. Fifty five exit surveys were completed; the rest of the sample either had not yet reached the end of their Family Home subsidy or could not be reached. Comparing those who provided exit data to those still in the program or missing revealed no significant differences on most demographic characteristics (race/ethnicity, age), employment and income. However, families who had exited the program were more likely to be headed by a man, possibly suggesting more two-parent families in this group.

Table 1
Family Home heads of household characteristics ($N = 155$).

Item	<i>N</i> (%)
Gender	
Female	146 (94.2%)
Male	9 (5.8%)
Age (years)	
Less than 20	5 (3.3%)
20–24	61 (39.9%)
25–29	33 (21.6%)
30–39	29 (19.0%)
40–49	17 (11.1%)
50 and above	8 (5.2%)
Race	
African-American	55 (35.5%)
White	69 (44.5%)
Other/don't know	31 (20.0%)
Ethnicity	
Latino/a	35 (22.6%)
Number of children	
1	80 (56.7%)
2	34 (24.1%)
3	18 (12.8%)
4 or more	9 (6.3%)
Length of stay in shelter	
1 month (0–30 days)	15 (9.7%)
2 months (31–60 days)	24 (15.5%)
3 months (61–90 days)	20 (12.9%)
4–6 months (91–180 days)	44 (28.4%)
6–12 months (181–365 days)	38 (24.5%)
1 year or more	14 (9.0%)
Prior living arrangement	
Shelter	31.9%
Rental, no subsidy	20.6%
Doubled up w family	29.8%
Doubled up w friends	9.2%
Hotel	8.5%

7. Findings

7.1. The families

Overall, Family Home families resembled homeless families at state (Davis & Lane, 2012) and national levels (US Department of Housing and Urban Development, 2011). Homeless Management Information System (HMIS) data on these families reveal that most (94%) were female-headed families, whose heads of household ranged in age from 19 to 55, with an average age of 29.5, and 43% age 24 and under (see Table 1). Just over one-third of the Family Home heads of household were African American (36%), just under one-half were White (44%), and almost a quarter (23%) were Latino/a. Compared to the region's general population statistics, Latino families were overrepresented¹⁰. Families typically had just one child (52%) or two children (22%), most (60%) between the ages of 0 and 5. Length of prior shelter stay varied widely, ranging from zero days (for those directly placed into Family Home) to more than two years, with an average stay of just under six months (167 days) and median stay of four months (124 days).

As stated earlier, shelter and motel caseworkers had discretion to choose which families they referred to Family Home. In the first few months of the program, they referred every family that met the state-mandated requirements (i.e. income and asset eligibility criteria) to the program. After the first few months, the state restricted the number of housing vouchers available due to budget constraints. At this point, caseworkers were told to refer selectively, choosing the families they determined most likely to

¹⁰ As stated earlier (see p. 10) the metropolitan area in which the research was conducted is 10% Latino/a and just over 30% African-American.

Table 2

Family Home participants' income and wage at entry to shelter (income includes government assistance (TANF, SSI, etc.), Unemployment Insurance and Worker's Compensation.)

Wage/income	Percent	Mean	Median	Minimum	Maximum
Participants with wage at entry	18.7% (N = 29)				
Hourly wage		\$10.23	\$10.23	\$8.00	\$14.28
Participants with income at entry	89% (N = 138)				
Monthly income		\$692.31	\$492.50	\$60.00	\$2200.00

succeed in the program, and keeping the rest in shelter. It is worth noting that, according to the authors' analysis of HMIS data, families who entered shelter during the study year and were *not* referred to the housing support program had significantly more children and were more likely to be African-American.

HMIS data on the Family Home families showed that educational attainment among program participants was low: 61% of heads of household held a high-school or General Educational Development (GED) diploma, and 36% had not completed high school. Most of the families relied on public benefits as their sole income source. Slightly less than half of the families (48%) received Temporary Assistance for Needy Families (TANF) as their sole income source¹¹, with an average benefit of \$387 per month, and 10% received SSI/SSDI (average benefit \$635.80 for SSI and \$846.60 for SSDI). In addition, 81% of the families received Supplemental Nutrition Assistance Program (SNAP) subsidies (formerly known as food stamps). Average total monthly income from all sources, including employment, amounted to \$692.31 (see Table 2). At program entry, 19% of participants worked, and another 6% received unemployment benefits. Most often the employed heads of household worked part-time, had unpredictable schedules and low wages; the hourly pay ranged from \$8.00 to \$14.28 with an average of \$10.23 per hour, and a monthly average income of \$1246.31 (this included income from all sources, i.e. wages plus TANF etc.) Total family income was similar to the comparison group, but earned income for families in the program was almost \$300 higher than earned income of working parents in the comparison group (comparison group monthly income \$962.94, $t = 2.823$, $p = 0.008$).

Families who were interviewed resembled the entire group of 155 families who entered Family Home, with most having one child (59%) or two children (27%) and the median age of children at five. Latinas were slightly overrepresented in the interview sample.

7.2. Families living in the program

7.2.1. Housing

A year into the program, interview and survey data revealed that overall, participants' lives had improved over their lives in shelter and motel, but they also faced many barriers on the road to maintaining housing at market rent. The following section depicts the major themes that emerged from the in-depth interviews with 22 of the 155 participating families and in the interviews and focus groups with Family Home staff, interspersed with survey and HMIS data.

Family Home requirements stated that families had to live in apartments whose rent was at or below 80% of Fair Market Rent (as determined by HUD). While all families who were offered short-term subsidies were able to find housing, as noted by staff, their housing quality varied. Some families were able to find new

housing in recently renovated apartments in private homes but many of the families in the program lived in apartments in multi-family homes that were older, poorly maintained, and located on busy streets. In the interviews, families in these apartments expressed concern that their proximity to neighborhood bars left them feeling unsafe. Although old, worn, and sometimes unsafe, these homes were generally near shopping and public transportation.

Those who did not live in downtown areas usually lived in large apartment complexes in residential neighborhoods. These complexes were generally several three-story buildings and respondents tended to live on the lowest level, which was either halfway or all the way in the basement. These apartments were built more recently than the multi-family downtown homes, and had grounds that were well maintained. The living spaces were larger, and the complexes had more amenities such as central air conditioning and parking. However, these apartments tended not to be accessible to shopping or public transportation, so respondents had to have access to a car to live in them.

7.2.2. Low-wage employment and financial well-being

The families in the Family Home pilot faced serious barriers to employment, as do most homeless and housed low-income families. Inflexibility of work schedules, difficulty finding full-time work, lack of education and training, insufficient affordable childcare, and inadequate transportation all emerged in participant interviews as challenges that these families face. HMIS data revealed that less than 5% of the families received TANF transportation support, and a similar number received TANF childcare vouchers.

The financial well-being survey included questions on how often a participant experienced challenges or barriers to achieving the goal of self-sufficiency in the following areas: employment, credit, and debt. Responses were measured on a 5-point Likert scale ranging from 1 = not at all to 5 = very much. Survey responses showed that families identified the following three employment areas as interfering with achieving their goals at levels of 4 or 5, i.e., quite a bit: lack of steady employment (51%), low paying jobs (47%), and few and unpredictable hours (43%).

According to participant and staff interviews, many of the employed respondents worked in service industry jobs, e.g., clothing stores, fast food restaurants, and supermarkets. Inconsistent hours emerged as the most challenging barrier for those in service industry jobs. One respondent stated that in the year since she had begun working in one store, her hours had gradually been cut from 30 to 15 a week. Another shared that she was hired by a store over an hour away that promised her 25 h a week. In her first week there, she was only asked to come in two days for a few hours each day. Given the time and expense of the commute it was not worth it for her to keep this job. One respondent who worked 20–25 h a week, but with hours that changed every week, stated that she would have liked to find another part-time job, but this was difficult when she did not have a consistent schedule at her first job.

Likewise, participant interviews revealed extreme difficulty in finding a full-time job. Many interview respondents described looking for full-time work constantly and not finding anything. Several respondents described not being able to find a year-round job, and instead working primarily in retail and customer service during the Christmas season when more workers were needed. They entered these seasonal jobs hoping they would lead to permanent positions but none of them was actually kept on once the holiday season ended. Staff corroborated this challenge, stating that the state of the economy had made it virtually impossible to find a full-time job that would pay a living wage.

The respondents who did not work in customer service had a variety of jobs including certified nursing assistant (CNA), store manager, packing and shipping worker, and hair stylist. For the

¹¹ A few clients received TANF in combination with other income sources such as informal child support and Worker's Compensation.

vast majority of respondents who worked in low-wage service sector jobs, there was little or no chance for promotion to a full-time position that would make a sustainable wage (Acker, 1990; Bonacich, 1972).

The tension between wanting to get a college degree and having to work to pay the bills emerged as a key stressor. Some program participants were enrolled in the local community college or GED programs. In addition, some reported in interviews that they had completed courses while in shelter or in Family Home, including GED, CNA and computer training. However, they were unable to attain the level of education to which they aspired because of the need for income. One respondent said: “It has been very hard not being able to get a job because of my school schedule.” Another stated: “I’m on the borderline if I should take next semester off to focus on working and taking care of the household or should I just stick with the school and try to work it out.”

Lack of childcare emerged as another critical barrier to both work and school. One respondent reported that she was accepted into a GED program but was unable to go because she could not get childcare set up before the first day of class. She lost her place in that program and was then put on a one-year waiting list to start the program again. Another had to stop working when she discovered that her children were being poorly cared for at their daycare center and she was unable to make another daycare arrangement quickly enough to keep her job.

Family heads of household in the program faced considerable financial stress. The greatest source of anxiety to them was the utility bills; many stated that having to pay for utilities caused strain in their lives. They were also stressed about the cost of childcare and transportation—either paying for car maintenance and insurance or paying for public transportation. In addition, survey data revealed poor credit (51%), credit card debt (33%), and other debt (31%) as key financial barriers to reaching their goals.

Staff and stakeholders also pointed out the difficulty Family Home families faced in making ends meet. High market rent, along with limited access to childcare and transportation, were among the key barriers that they discussed¹². One staff member stated:

The hardest part [for participants] is finding affordable housing, period, so that after the twelve months, they’re able to sustain, they’re able to keep it. Because I mean, even if they’re working, even the ones who work full-time, they’re making \$8.00 an hour for 40 hours a week. That’s not enough to pay rent. Their rent is ridiculously too high.

Another shared:

For a lot of my clients, it doesn’t matter, because they are never going to get more than the Dunkin Donuts job, so how are they ever going to be able afford to maintain themselves if that’s the job they are going to get? They can’t afford to live on that.

7.3. Assessments of Family Home by participants, staff and other stakeholders

Overall, families in the program reported that living in an apartment – as opposed to in a shelter or motel – was very helpful for them and their families. Most notably, they discussed the benefits of increased privacy, freedom, security and stability in their own apartments. When they compared their current life in

¹² In addition to structural barriers, some frontline staff members also argue that individual barriers can prevent families from succeeding in the program. The individual barriers emphasized by frontline staff include personal choices related to motivation and drive to invest in personal skills and pursue employment, a family history of living off the ‘system’ and a lack of parenting skills. These themes related to individual attitudes did not emerge from other data sources (e.g. higher-level staff, participants, stakeholders) and, therefore, are excluded from this discussion.

the program to their life in shelter and/or motel, they reported more overall satisfaction, improved well-being, and most of all increased independence.

Among staff, government officials, and advocates, the rapid rehousing aspect of the short-term subsidy model enjoyed widespread support, particularly in contrast to long-term stays in shelter or motels. Many cited the program’s ability to provide temporary assistance for families to be able to ‘get back on their feet.’ As one staff person stated,

I think it is a good model. To have somebody be in shelter for a year, waiting for Section 8 [i.e., a Housing Choice Voucher], is more damaging than having somebody be in their own apartment. For the kids, it gives them a sense of stability. For the parents, it takes [away] a lot of the angst of living in congregate shelter, or constantly having to deal with someone in your space. It gives you back your sense of self.

The time-limited nature of the program emerged from all sources as a major barrier for participants. In interviews, staff, stakeholders and participants agreed that one to two years of housing support was insufficient for families to reach the point at which they could pay market rent without a subsidy, in the face of what many saw as the longer-term structural and individual barriers that families faced. One Family Home participant stated that because the voucher was time-limited, she did not feel an increased sense of stability in her apartment:

[The program has] helped but it’s kind of not helped because of worrying about what is going to happen, where we are going to wind up. [The program helps to] put a roof over my head, just a place to live for now but I don’t feel like it’s permanent. . . There are a few pictures up [in the apartment] but I like to decorate, but at this point I haven’t really decorated or anything. I live here but that is it until I find out what I can do.

Despite facing these uncertainties, participants’ assessment of Family Home was overall positive. The vast majority of interview respondents stated that without the program, they would still be in a shelter or motel or that they would be living with family members, and one noted that her only other choice would have been to live with an abusive family member. Respondents who had started community college since they entered housing stated that they could not have started college if they had been in shelter. One participant stated that the stability offered by having a home allowed her teenage children to succeed in school and develop professional aspirations.

Overall, participants agreed that the stability afforded by having their own homes was critical to their and their children’s well-being. One participant summed it up as follows:

It was good because I didn’t have to live in the shelter with my kids. I pretty much got to live on my own, and work on myself. I didn’t have to worry where I and my kids were going to be at the end of the day. I didn’t have to wait for a phone call saying, ‘Oh you’re being moved to this shelter. ‘We didn’t have to live from shelter to shelter. We moved from. . . [one hotel to another], and then from there to our own apartment [i.e. scattered site unit], and to here. That was enough. That’s four moves in a year. So imagine moving my kids every other week, like, ‘Oh you know, we found a different place, here you go’—that would have been heartbreaking because I would have had to keep packing my bags and leaving with the kids.

7.4. Housing stabilization worker support services

As part of the Family Home pilot, families received stabilization services intended to help families with housing, employment, their

own and their children's education, and financial goals. However, interviews with participants and frontline staff revealed that due to having little guidance and large caseloads, housing stabilization workers mostly used their time with the families to do a superficial check-in, and saw their primary responsibility as helping participants to maintain their housing. Thus, these meetings mostly focused on helping participants build good landlord/tenant relationships, making sure the rental portion for which the participant was responsible was paid on time, and ensuring that the family maintained its place on waiting lists for a permanent housing voucher. In rare instances, these meetings focused on working with families to develop a budget for monthly expenses and steering participants towards employment and educational opportunities.

Participants' experiences of receiving housing stabilization services differed. Just over half of those interviewed reported that they had monthly contact with their housing stabilization workers, either in person or by phone. When asked what they did during check-ins, these participants emphasized that they did the paperwork for their voucher extensions and they filled out and updated applications for permanent housing subsidies. The other half stated that they rarely heard from their housing stabilization workers.

When asked if her housing stabilization worker contacted her to set up meetings, one respondent answered: "She's supposed to. But the only time she came was when I had to fill out my papers for the [Family Home 6-month] extension. They're supposed to come every month. She came once in the year that I've been here." It is worth noting that a few participants reported that their housing stabilization workers had connected them to area resources, including GED programs, daycare, and organizations that provided Christmas meals and gifts for their children. And they offered assistance negotiating with DTA (the Department of Transitional Assistance, the state's TANF administrator), Mass Health (the state's Medicaid program) and the Supplemental Nutrition Assistance Program (SNAP) when participants were surprised by unexpected changes in their benefit levels.

Knowing that their primary need was full-time work with a sustainable wage, some participants expressed the sentiment that there was little that housing stabilization workers could do. One said of her housing stabilization worker:

I'm supposed to talk to her every two weeks, but I don't. Because I don't feel like there's no need for me to talk to her. I don't feel like there's any need to, because my voucher's gonna end in February, and you're not gonna help me anymore, so what do you want me to call and talk to you about? How my life is going? It's going shitty. I don't want to talk to you about it. There's no point.

A need for more help with connections to wraparound services emerged in participants' assessment of the program. One participant, who was on a one-year waiting list for a GED program, wished that Family Home could help her get access to a program more quickly. Another participant stated that she needed:

... someone to help me find a job. 'Cause you know, places that are meant to help people find jobs have really good relations with jobs and companies. It's easier that way. But I didn't expect things to be handed to me, but I would like someone to help me find a job. But even if I don't enjoy it, I need a stable job that pays my bills, that can guarantee me a roof over me and my daughter's head.

Some participants also wished that the program could have helped them more with daycare; one wanted help finding out about job training programs and what she would need to do to get access to one and to pay for it.

Table 3
Family home program exit (N=55).

Outcome	N (%)
Retain housing without subsidy	14 (25.5%)
Permanent housing subsidy	12 (21.8%)
Moved in with family/friends	11 (20.0%)
Returned to a homeless shelter	5 (9.1%)
Other/don't know	13 (23.6%)

7.5. Program end

The stated goal of Family Home was for families to maintain their housing at market rate as the first step towards achieving self-sufficiency. This metric, therefore, is the first indicator of program success. At the end of June 2011, 35% of the families had exited Family Home (see Table 3) mostly due to reaching the end of the two year pilot program. Of these families, 25% were able to retain their housing without subsidies. However, most did not return to homelessness upon program end: only 9% moved back to shelter at program exit, and the rest found alternate housing options. In addition to the 25% who maintained their housing at program exit, another 22% received permanent housing subsidies (Housing Choice Vouchers or public housing). And 5% of those who exited the program did so because they were identified as over the income eligibility limit. Thus, for almost 50% of the families, the short-term voucher program provided critical support in avoiding shelter and allowed them to lead a more stable life as a family. But close to half have moved to less stable housing situations since program exit. In addition to the 9% who were back in shelter, 20% were living with family or friends, another 24% could not be located, and two of these families were asked to leave due to non-compliance. For these families, the two years in housing provided only a break from less suitable living conditions.

The barriers that the families in Family Home faced were typical for low-income families (Loya et al., 2008). Given the persistence and durability of these challenges, the goal of maintaining market housing may be unrealistically high. Indeed, a key theme emerging from participant interviews was anxiety about not foreseeing being able to pay market rent when their subsidies ended and having no alternative housing plans. Most families wanted to stay in their apartments but were not sure if they would be able to because their income had not increased sufficiently while in the program to be able to pay the full rent when the subsidy ended. Therefore, most families hoped to move to the top of a permanent subsidy waiting list before their short-term vouchers were going to end. When asked about her plans after end of her the subsidy, one participant said: "[I'm] hoping for the best. That I'll hopefully have a job, and I don't have to move, I can stay right here. 'Cause I really love it here. It's a good location, I love my apartment." Another participant, when asked if she would like to stay in her apartment after the end of her subsidy, stated: "Yeah, but that's not gonna happen. I can't afford this place. I really can't."

Anxiety about the program ending emerged from staff interviews as well. One staff member shared:

It was very apparent the families that were in the [Family Home] program versus the families that were in permanent [subsidized] housing. You could sense the anxiety in the families [in Family Home] and in their stories; very grateful for the opportunity, happy to be out of shelter and be able to finally build a safe stable home for the family, but extremely anxious and concerned about, 'I don't know what's gonna happen because my hours got cut at work and I was doing so great.

Another staff member highlighted the differences in participants' emotional states at the beginning and end of their time in Family Home:

And you can see that with the moms too [when they first enter Family Home]. I mean, their faces light up. They're happy. Sometimes you can look at a mom and say she's at the beginning of her [Family Home] subsidy. And sometimes you can look at a mom and say, "She's probably close to the end of her subsidy." Because you see the stress, you see the fear, you see the worry.

A few participants elaborated on strategies they planned to employ to make up the deficit between the income from their low-wage jobs and the high cost of living in Massachusetts. One participant planned to gain a technical skill and do freelance work to supplement her income in order to be able to pay the rent:

To be honest I have no idea what is going to happen at that point [i.e., the end of her subsidy]. I'm trying to live life one day at a time because when I think about the long run I feel extremely overwhelmed and stressed. What I'm hoping is that I can go back and get certified as a web designer because with that I can do freelance work from home [and] that wage will definitely help me to be self-sufficient. . . I would love to [stay in this apartment], you know we've become comfortable and it's hard to move everything and have to put it back in storage. [With the web design work] I think I would be able to.

Another participant was considering reconciling with her children's father in order to bring in additional income to pay the rent. When asked if she hoped to stay in her apartment, she said: "Yes. So that's why I'm looking for employment, and me and their father was talking about moving back with each other to try to help out more. This I would like to be a long-term stay."

Overall, however, lack of employment emerged as the key barrier to paying market rent in their apartments. As one participant said:

If it worked like I planned out, it would have been perfect. If I could have got signed on to that [seasonal job] full-time, it would have been perfect. I could save \$200 from this [pay]check, \$200 from that check, and be able to do my rent. You know, I wouldn't be struggling. I would be living. And that's all I want to do, is just live. But it didn't happen that way.

One participant, who stopped working when she became homeless and went back to work while in shelter, and at the time of the interview worked full-time as an assistant manager at a retail store, stated that she planned to stay in her apartment when her subsidy ended. When asked if she would be able to pay the full rent, she said

I would be able to cover my rent, but then I don't know how much more I would be able to cover outside of my rent. Especially that now in August, my rent went up by almost like \$100. I didn't think it was gonna go up, but it just went up more. . . I'm planning to stay here. I've been trying to figure out how much can I do to stay here. I really don't have anywhere else to go, so I have to try to make it work as much as I can.

Another challenge to remaining in their apartments that emerged from staff and participant interviews was landlords' unwillingness to rent to people in Family Home because of its short-term nature, or to extend the lease by just six months; this limited families' housing options. One participant stated:

When I was looking [for an apartment]. . . a couple of people [i.e., landlords] was like 'I didn't hear too much good news about that program. I don't want to rent to you.' . . . They was like 'I can't count on something short term. It's not long-term.

This was a significant limitation of the program design. It is important that future research on this model include the voices and assessments of landlords as another stakeholder group in this program.

8. Discussion

Living in their own apartments and in the community provided Family Home homeless families in this study with a secure environment that supported family well-being in many different ways: it provided stability and a sense of normalcy for family members, and it improved individual health, employment outcomes, and family stability. Compared to living in the shelter, having private apartments provided families with independence, privacy, security and a sense of achievement. However, the lack of affordable housing and living wage employment stood out as critical barriers to this program's success. As staff and stakeholders praised the program as an important first step, they also all acknowledged that many of the barriers families faced in securing stable housing and economic self-sufficiency were longer-term in nature, and not easily tackled over one or even two years.

Given the high cost rents in the region, the state's goal of maintaining market rate housing for the Family Home participants was ambitious. At the time this research was conducted, the average rent for a 2-bedroom apartment in this region was \$1291 per month. For a single parent to meet this cost would have required full-time work at an hourly wage of \$23.25 (Bravve et al., 2011). With Family Home families' average monthly employment income at only \$1200¹³, they were in no position to support themselves and their families solely on their incomes. Even with full-time employment at minimum wage (\$1280 per month), families would have been far from being able to afford to rent an apartment in this region. Families who solely relied on support programs (TANF, SSI, SSDI) were also not in a position to afford housing without additional subsidies.

Families who were able to remain in their rented units could do so due to increased employment incomes at levels just sufficient to make the rent payments in addition to other household expenses. It is, however, unclear how sustainable these income levels were for the families in the long-term. Future research should extend the evaluation period to collect long-term post-program participation outcomes.

As stated earlier, the short-term nature of the program posed a number of challenges for the Family Home families. Families were anxious about having to move when their vouchers ended, and repeated moves have been shown to have adverse effects for children in particular (Cutts et al., 2011). One survey respondent wrote that the program ". . . is somewhat helpful because it is not permanent housing, which means that after the year goes by, me and my family might need to move back to a shelter." In addition, it is unclear whether landlords would have been willing to continue to rent to program participants, especially to lease their units in six-month intervals.

Families also had little success in finding employment within a year. This is not surprising given the extent of the economic recession at the time, and the limited skill sets and employment histories of many of the parents in the program. The vast majority of Family Home families were homeless for economic reasons, and the likelihood of their finding employment that would have allowed them to pay market rent was slim. In addition, access to quality childcare and transportation were critical for mothers to

¹³ The Earned Income Tax Credit (EITC) has been shown to be an important supplement to low-income families' incomes (Halpern-Meeekin, Edin, Tach, & Sykes, 2015). However, we did not have data on Family Home participants' EITC receipt so were unable to factor it into the overall picture of their financial status.

have been able to gain employment and stay employed, or to attend trainings that may have improved their employment trajectories.

9. Limitations

This evaluation has some important limitations. Most importantly, the possibility of selection bias may have skewed the results. First, Family Home vouchers were optional, so it is possible that some families in shelters and motels in the August 2009 to May 2010 time frame were offered vouchers and refused them, and that those who accepted the vouchers were more motivated to succeed on them. Second, shelter and motel caseworkers had discretion to choose which families they would refer to the program, and they may have referred those whom they assessed as more likely to succeed in the program. Indeed, those in Family Home did differ from those not in it, on the number of children in the family and head of household's race. Having more children could have disadvantaged families, as they would have needed more resources to house and feed more children, and this difference may have reflected other systematic differences between the two groups. Future research should construct an equivalent comparison group to further study the effects of short-term vouchers.

The interview sample suffered from two limitations. First, the sample size was small. While interviews were conducted to saturation, it is possible that the interview sample was not representative of the universe of Family Home participants. Second, participation in interviews was voluntary, and the research team was only able to conduct interviews in English, so the interview sample may have been biased (however, the vast majority of program participants were English speakers.) Interview data complemented the other data sources (survey and HMIS data) where possible, however, the response rate to the well-being survey was low (37%), and only 35% of the families had exited the pilot program at the end of the study, limiting data on housing status post program participation. In spite of these limitations, this evaluation offers a comprehensive look at a new strategy to address family homelessness in Massachusetts.

10. Lessons learned

This research reveals important programmatic and policy lessons. The data show that Family Home's short-term voucher model may have helped prevent homelessness for all program participants for the time they received these subsidies. In addition, only 9% of participants returned to shelter at program end, and a quarter of all families in the program were able to move off these subsidies and maintain their apartments through their own resources. Through the access to a short-term rental voucher, these families were able to avoid stays in shelters or motels. However, follow-up data are needed to evaluate longer-term participant outcomes. Future research should include data collection at several time points throughout the duration of the program and following program exit to understand the potential effectiveness of the program in preventing future homelessness and promoting self-sufficiency.

Many of the homeless families in the Family Home pilot, however, needed additional supports to achieve housing security. First, participants revealed a need for increased work support programs, including childcare subsidies, transportation vouchers, and practical public transportation options, as well as services to help them to access jobs or to allow them to pursue higher education or job training programs. Working closely with parents at the beginning of their short-term rental voucher receipt on all these issues was critical to increasing their employment, which

was of foremost importance in allowing them to provide for themselves and their children.

Second, in the context of impacts of the economic recession and inflated housing prices, two years of subsidy may not have been sufficient for many who needed longer periods of time to work toward housing stability. Extending the duration of the program or providing different lengths of support for different levels of participants' need may have strengthened the approach of offering short-term housing subsidies. Third, the literature and data both point to a critical need for an increase in the stock of permanent affordable housing. When even full-time minimum wage work would not have allowed someone to pay for housing for her family, she either needed additional housing supports or access to lower cost housing units.

Shelter and motel are very costly to the homeless system. Average expenses for shelter and for the short-term subsidy program for homeless families offer an additional insight into the effectiveness of this pilot program. According to the program staff, annual average cost estimates for rental expenses and stabilization services amounted to between \$10,404.28 and \$11,233.33 in 2011 (depending on the voucher funding source). This translates into a daily average rate of between \$28.50 and \$30.78. In contrast, the average cost of a day in shelter at the time of this research was \$121.00. Based on these estimates, the average statewide shelter stay of eight months would have cost around \$29,000 more than did two years of support in Family Home. These data suggest that in this region, the Family Home model is more cost effective than the traditional congregate shelter model. Whether the Family Home model provided the same level of services or had the same effect in terms of preventing future homelessness and promoting stable housing is beyond the scope of this paper. However, the data here indicate that family well-being was better in Family Home than in shelter or motel.

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