



## National Resource Center on Homelessness and Mental Illness

### Transitional Housing and Emergency Shelter Services

July 2004

*Resources listed herein are a selection of materials available on this topic. Many are available from your local library or inter-library loan. Unless otherwise noted, all other materials are available from the National Resource Center on Homelessness and Mental Illness. Photocopying charges are \$.10 per page; make checks payable to **Policy Research Associates, Inc.** If you have difficulty locating any of the materials listed in this bibliography, please contact the Resource Center at the phone number or e-mail address below.*

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*Policy Research Associates, Inc., under contract to the Center for Mental Health Services*

**Transitional Housing & Emergency Shelter**  
**Section: Transitional Housing and Services**

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**Order #: 5974**

**Authors:** Barrow, S., Cordova, P., Struening, E.L.

**Title:** **Evaluation of A-Plus: A Report on Case Management Services and Housing Outcomes.**

**Source:** New York, NY: New York State Psychiatric Institute, 1996. (Report: 43 pages)

**Abstract:** This report examines case management and housing outcomes in a sample of homeless women with a serious mental illness who were referred to "A Project to Link Up Services" (A-PLUS), which provides psychiatric and case management services to residents of New York City's single women's shelters. A-PLUS is a transitional program designed to help homeless women with serious psychiatric disabilities move from the shelters into more appropriate housing settings and to obtain the supportive services they need to maintain residential stability. Topics discussed include: aims, design, and methods of the outcome evaluation; delivery of case management services; housing outcomes of eligible clients; delivery of case management services; housing status, linkage to mental health services and quality of life; and summary findings. Results show that the program has succeeded in identifying women with mental illnesses in need of services and assisting a significant proportion of them to obtain more appropriate living situations. The authors contend that these findings not only document A-PLUS's effectiveness in serving a portion of the shelter population in special need of assistance, but also endorse the centrality of permanent housing in the effort to ensure that homeless women with mental illnesses will obtain the services they need and the quality of life they desire.

**Order #: 7902**

**Authors:** Barrow, S., Zimmer, R.

**Title:** **Transitional Housing and Services: A Synthesis.**

**Source:** In Fosburg, L.B., Dennis, D.L. (eds.), Practical Lessons: The 1998 National Symposium on Homelessness Research. Delmar, NY: National Resource Center on Homelessness and Mental Illness, 1999. (Book Chapter: 35 pages)

**Abstract:** This paper describes what the concept of transitional housing encompasses and where the boundaries between transitional housing and related concepts -- emergency shelter, residential treatment programs, permanent supportive housing -- can most usefully be drawn. "Low demand" and "high demand" approaches to providing transitional housing for homeless families and individuals are described, and the limited research on transitional housing programs and approaches is reviewed. The paper concludes by identifying research issues that need to be addressed in order to adequately inform policies intended to move individuals and families from homelessness to housing (authors).

**Available From:** HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691,  
[www.huduser.org/publications/homeless/practical.html](http://www.huduser.org/publications/homeless/practical.html).

**Order #: 8713**

**Authors:** Barrow, S.M., Rodriguez, G.M.S.

**Title:** **Closer to Home: Interim Housing for Long-Term Shelter Residents: A Study of the Kelly Hotel.**

**Source:** New York, NY: Corporation for Supportive Housing, 2000. (Report: 81 pages)

**Abstract:** Recent evidence that a subgroup of individuals who are homeless have become long-term residents of New York City shelters has spurred a search for new approaches to engage them in services and providing appropriate housing alternatives. The Kelly Hotel Transitional Living Community (TLC), developed by the Center for Urban Community Services (CUCS) with first year funding from the Corporation for Supportive Housing, is one pioneering effort to help mentally ill long-term shelter residents obtain housing. This report presents results of an evaluation describing the TLC model, its implementation by CUCS, and outcomes achieved by its initial group of residents.

**Available From:** Corporation for Supportive Housing, 50 Broadway, 17th Floor, New York, NY 10004, (212) 986-2966,  
[www.csh.org](http://www.csh.org).

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**Order #: 6050**

**Authors:** Barrow, S.M., Soto, G.

**Title:** **Closer To Home: An Evaluation of Interim Housing for Homeless Adults.**

**Source:** New York, NY: Corporation for Supportive Housing, 1996. (Report: 105 pages)

**Abstract:** This report presents the results of a 15-month study of a model of interim housing designed to provide temporary accommodations for homeless people living in public places and to facilitate their transition into long-term housing. The study focuses on how six agencies serving New York City's "street" homeless have implemented interim housing to help their clients gain access to housing that suits their preferences and needs. The interim housing programs examined here consist of shared apartments and single or double rooms in SROs and YMCAs. Although the sites vary in administrative structure and in the amenities and service they offer, the interim accommodations all provide greater privacy, stability and protection than the streets, drop-in centers or church shelters. They also give programs a means to engage clients who are ambivalent about services and enhance their interest in seeking housing. A baseline resident profile form is included (authors).

**Available From:** Corporation for Supportive Housing, 50 Broadway, 17th Floor, New York, NY 10004, www.csh.org (COST: \$15.00)

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**Order #: 894**

**Authors:** Bennett, R.W., Weiss, H.L., West, B.R.

**Title:** **Alameda County Department of Alcohol and Drug Programs Comprehensive Homeless Alcohol Recovery Services (CHARS).**

**Source:** Alcoholism Treatment Quarterly 7(1): 111-128, 1990. (Journal Article: 18 pages)

**Abstract:** This article describes an NIAAA-funded demonstration project for homeless persons with alcohol and drug problems in Alameda County, CA. The CHARs Program is one of the first comprehensive service systems in the nation to address the needs of alcohol and drug abusing homeless persons. Components of the system include an alcohol crisis center, two multi-purpose drop-in centers, seven residential recovery centers, a transitional housing program, and permanent sober housing. A description of each program component is included.

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**Order #: 13181**

**Authors:** Beyond Shelter, Inc.

**Title:** **Housing First: Ending and Preventing Family Homelessness.**

**Source:** Los Angeles, CA: Beyond Shelter, Inc., 2003. (Program Description: 6 pages)

**Abstract:** This program description highlights Beyond Shelter, Inc., an organization which implements a housing-first approach to ending homelessness. It has assisted more than two thousand families who are homeless to rebuild their lives through affordable housing in residential neighborhoods throughout Los Angeles county. The process by which families are served, research design, demographics and findings of housing-first research, in correlation with Beyond Shelter, Inc., organization are also discussed (authors).

**Available From:** Beyond Shelter, Inc., 520 South Virgil Avenue, Los Angeles, CA 90020, (213) 252-0772, www.beyondshelter.org.

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**Order #: 8703**

**Authors:** Beyond Shelter.

**Title:** **The "Housing First" Program for Homeless Families: Methodology Manual.**

**Source:** Los Angeles, CA: Beyond Shelter, Inc., 1998. (Manual: 158 pages)

**Abstract:** This methodology manual provides a step-by-step guide to adapting Beyond Shelter's Housing First Program, which essentially bypasses completely or limits transitional housing and instead moves families who are homeless directly to permanent housing with supportive services provided after the move. The manual is targeted to program developers, directors and front-line staff working with families who are homeless.

**Available From:** Beyond Shelter, 520 South Virgil Avenue, Los Angeles, CA 90020, (213) 252-0772, [www.beyondshelter.org/aaa\\_the\\_institute/publications.shtml](http://www.beyondshelter.org/aaa_the_institute/publications.shtml) (COST: \$25.00).

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**Order #: 11688**

**Authors:** Bridgman, R.

**Title:** **Housing Chronically Homeless Women: "Inside" a Safe Haven.**

**Source:** Housing Policy Debate 13(1): 51-81, 2002. (Journal Article: 31 pages)

**Abstract:** This article examines an innovative safe haven model for providing services targeted at hard-to-serve clients - chronically homeless, mentally ill women. This model is designed as an unlimited stay and low-demand environment, with high support from staff. This article challenges conventional static understandings of the concepts of "private" and "public" and explores issues related to spatial privacy and communality, sense of ownership, ideas about the safe haven being both a home and a hostel, planning for flexibility, accountability to public funders, and accommodation of individual needs (authors).

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**Order #: 11325**

**Authors:** Bridgman, R.

**Title:** **A Safe Haven for Chronically Homeless Women: A Model Program in Toronto.**

**Source:** International Journal of Mental Health 30(2): 79-89, 2001. (Journal Article: 10 pages)

**Abstract:** This case study of an innovative pilot project for chronically homeless women in Toronto, Canada, contributes to knowledge about how women who are homeless survive life on the streets and about the everyday practices that frontline staff employ in work with these women. The findings further understanding of the multiple, subtle, and shifting levels of distrust and trust involved in work with women who are chronically homeless with mental illness (author).

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**Order #: 13207**

**Authors:** Bristol, K., Greigg, D.

**Title:** **Supportive Housing Financing Sources Guide.**

**Source:** New York, NY: Corporation for Supportive Housing, 2004. (Guide: 159 pages)

**Abstract:** The purpose of the Supportive Housing Financing Sources Guide is to help supportive housing sponsors identify potential financing and funding sources for supportive housing projects and programs. By providing both general information on categories of funding sources (what they are, how they flow, how to access them) and detailed information on more than 40 sources and initiatives with the greatest potential for providing significant project funding, it is hoped that the guide will serve as a resource for organizations seeking to expand the supply of supportive housing (authors).

**Available From:** Corporation for Supportive Housing, 50 Broadway, 17th Floor, New York, NY 10004, (212) 986-2966, [www.csh.org](http://www.csh.org).

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**Order #: 6096**

**Authors:** Broughton, J.

**Title:** **Foodservice for the Homeless: A Manual for Emergency Shelters, Drop-in Centers and Transitional Housing Providers.**

**Source:** Ganado, AZ: Jane Broughton, 1994. (Manual: 105 pages)

**Abstract:** This manual is intended as a resource for foodservice planning for emergency shelters, drop-in centers and transitional housing providers. First published in 1991, it now features a new section on nutrition education resources, including reproducible handouts and 30 recipes for large groups. It also has practical information on nutrition guidelines for all ages and needs of guests, food donation, volunteer coordination, and protection from food borne illnesses. All food recommendations follow the latest U.S.D.A. Food Guide pyramid.

**Available From:** Jane Broughton, M.S., R.D., P.O. Box 57-8238, Chicago, IL 60657 (COST: \$25.00).

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**Order #: 13446**

**Authors:** Camasso, M., Jagannathan, R., Walker, C.

**Title:** **New Jersey's Transitional Housing Demonstration Program: The Relationship of Service Delivery Structure and Process to the Attainment of More Permanent Forms of Housing.**

**Source:** Evaluation and Program Planning 27(1): 45-58, 2004. (Journal Article: 14 pages)

**Abstract:** In this article, the authors examine the impact of New Jersey's Transitional Housing Demonstration Program (THDP) on families receiving public assistance in need of some form of permanent housing. The authors test the demonstration's overall program logic which suggests a linkage between organizational structure, participation of life skills activities, successful graduation from the program, and positive housing outcomes. Surveying welfare recipients who participated in transitional housing for more than three years, the authors assert that demographic characteristics of the participants and features of the programs are linked with more successful outcomes. The article states that programs which require higher levels of activity participation and which limit residents' personal freedom produce graduates who are more likely to find permanent housing (authors).

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**Order #: 8121**

**Authors:** Carr, S., Murray, R., Harrington, Z., Oge, J.

**Title:** **Discharged Residents' Satisfaction with Transitional Housing for the Homeless.**

**Source:** Journal of Psychosocial Nursing 36(7): 27-33, 1998. (Journal Article: 7 pages)

**Abstract:** This article presents information about a metropolitan transitional residence that provides housing and services to families who have been in homeless shelters. A retrospective survey of the residents' level of satisfaction during their stay in this transitional housing program was done. Twenty percent of the discharged residents responded, all of whom were African American female heads of households. The survey indicated that the residents were satisfied with the program, and that it met their needs. Suggestions for improvement related primarily to greater flexibility of rules in the transitional residence. The survey also indicated that most of the women had improved their housing situation since discharge, and all of the women continued to maintain a home for their children.

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**Order #: 11650**

**Authors:** Center for Urban Community Services.

**Title:** **Project Profiles: Supportive Housing Initiatives for Adults Living with Mental Illness.**

**Source:** New York, NY: Center for Urban Community Services, 2002. (Program Description: 61 pages)

**Abstract:** This publication is a compilation of project profiles of supportive housing initiatives for adults living with mental illnesses. Descriptions include type of housing and number of units, project sponsor, goals and philosophy, tenancy profile, physical description of the housing, service description, eligibility criteria, project financing, community acceptance issues, and lessons learned. Programs profiled include Ashbury House in San Francisco, CA; The Colony Apartments in Stamford, CT; Deborah's Place II in Chicago, IL; Euclid Hall in New York, NY; Evolving Consumer Households in Boston, MA; Horace Steele Commons in Phoenix, AZ; Lakefront SRO Corporation in Chicago, IL; Project Renewal in New York, NY; The Prince George in New York, NY; The Rio in New York, NY; The Times Square in New York, NY; and Volunteers of America in Jacksonville, FL.

**Available From:** Center for Urban Community Services, 120 Wall Street, 25th Floor, New York, NY 10005, (212) 801-3300, www.cucs.org.

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**Order #: 11797**

**Authors:** Culhane, D.P., Metraux, S., Hadley, T.

**Title:** **Public Service Reductions Associated with Placement of Homeless Persons with Severe Mental Illness in Supportive Housing.**

**Source:** Housing Policy Debate 13(1): 107-163, 2002. (Journal Article: 56 pages)

**Abstract:** This article assesses the impact of public investment in supportive housing for people who are homeless with severe mental disabilities. Data on 4,679 people placed in such housing in New York City between 1989 and 1997 were merged with data on the utilization of public shelters, public and private hospitals, and correctional facilities. A series of matched controls, people who were homeless but not placed in housing, were similarly tracked. Regression results reveal that persons placed in supportive housing experience marked reductions in shelter use, hospitalizations, length of stay per hospitalization, and time incarcerated (authors).

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**Order #: 11677**

**Authors:** Emerson-Davis Family Development Center.

**Title:** **Supportive Residential Services to Reunite Homeless Mentally Ill Single Parents with their Children.**

**Source:** Psychiatric Services 51(11): 1433-1435, 2000. (Journal Article: 3 pages)

**Abstract:** This article outlines the Emerson-Davis Family Development Center in Brooklyn, New York City, which was opened in May, 1994. This residence is a renovated former college dormitory, where single parents separated from their families because of their mental illness and homelessness were reunited with their children and provided a healthy and safe home of their own. The article describes the staff, funding, program innovations, service delivery and community involvement associated with Emerson, and concludes that the family reunification process leads to gains for most participants, especially the children, even when reunification is not successful. Emerson services cost only 71 percent of traditional New York City shelter and foster care, and offers substantially more therapeutic and rehabilitative alternatives (authors).

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**Order #: 8404**

**Authors:** Family Housing Fund.

**Title:** **The Supportive Housing Continuum: A Model for Housing Homeless Families.**

**Source:** Minneapolis, MN: Family Housing Fund, 1999. (Report: 30 pages)

**Abstract:** The Twin Cities are experiencing a growing problem with family homelessness. The primary response has been the development of transitional housing to provide a bridge for families between emergency shelters and permanent housing. The transitional housing programs provide families with a housing unit, usually for a period of six to 24 months, along with supportive services. This report proposes the development of a more comprehensive system of supportive housing that combines affordable housing with services for homeless families. While transitional housing is one type of supportive housing, a comprehensive supportive housing system encompasses a wider range of programs, including housing with very intensive services to meet the needs of severely troubled families (author).

**Available From:** Family Housing Fund, Midwest Plaza West, Suite 1650, 801 Nicollet Mall, Minneapolis, MN 55402, [www.fhfund.org/\\_dnld/reports/Supportive%20Children.pdf](http://www.fhfund.org/_dnld/reports/Supportive%20Children.pdf).

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**Order #: 8736**

**Authors:** Fischer, R.L.

**Title:** **Toward Self-Sufficiency: Evaluating a Transitional Housing Program for Homeless Families.**

**Source:** Policy Studies Journal 28(2): 402-420, 2000. (Journal Article: 19 pages)

**Abstract:** The Family Development Center (FDC) is a transitional housing program in Atlanta designed to provide young mothers who are homeless an opportunity to emerge from what may well be desperate circumstances and begin the journey to economic self-sufficiency. This article describes the research on programs for families who are homeless and presents the results of a comprehensive look at the operation and effectiveness of the FDC program during its first five years of existence. The work shows that while many families were able to effect notable positive changes in their lives during and after taking part in the housing program, for some the recovery from homelessness was extremely difficult. For even the most successful families who are formerly homeless--those that secured employment, housing, and other social services--the escape from welfare dependence and poverty proved very difficult. The article concludes with a discussion of policy implications (author).

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**Order #: 7217**

**Authors:** Fogel, S.J.

**Title:** **Moving Along: An Exploratory Study of Homeless Women with Children Using a Transitional Housing Program.**

**Source:** Journal of Sociology and Social Welfare 24(3): 113-133, 1997. (Journal Article: 21 pages)

**Abstract:** This article presents a study that was conducted to determine how residents of a group transitional housing program use and develop skills and resources in this setting to secure self-sufficient housing and community re integration. Qualitative data was collected over 14 weeks at one group transitional house. Data were gathered from 12 women, all of which had at least one child with them. The data indicated a variety of causes for the families' homelessness and a variety of personal adaptations to the transitional housing environment. The author suggests that social workers and staff in shelters need to incorporate strategies to build place-identity skills that can promote personal and environmental resources.

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**Order #: 8292**

**Authors:** Fosburg, L.B., Dennis, D.L. (eds.).

**Title:** **Practical Lessons: The 1998 National Symposium on Homelessness Research.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development and U.S. Department of Health and Human Services, 1999. (Report: 437 pages)

**Abstract:** Practical Lessons is the result of the National Symposium on Homelessness Research: What Works? This symposium was held on October 29-30, 1998 and was sponsored by the U.S. Department of Housing and Urban Development and the U.S. Department of Health and Human Services. The goal of this meeting was to examine the current state and future direction of research and evaluation. In addition, assistance was provided to policymakers and service providers in the development, implementation, and monitoring of housing and services that can more effectively serve the homeless population. Practical Lessons includes the revised editions of thirteen papers presented at the meeting by nationally recognized faculty. The topics addressed include prevention, special populations, clinical interventions, systems integration, case management, transitional services, permanent housing and employment, and consumer involvement.

**Available From:** HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691,  
<http://aspe.os.dhhs.gov/progsys/homeless/symposium/Toc.htm>.

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**Order #: 5856**

**Authors:** Grella, C.E.

**Title:** **A Residential Recovery Program for Homeless Alcoholics: Differences in Program Recruitment and Retention.**

**Source:** Journal of Mental Health Administration 20(2): 90-99, 1993. (Journal Article: 10 pages)

**Abstract:** This paper describes the Sober Transitional Housing and Employment Project (STHEP), a long-term residential recovery program in Los Angeles for homeless alcoholics. This NIAAA community demonstration project aimed to reintegrate homeless alcoholics into the urban environment and to increase levels of sobriety, housing, and employment. Participants first completed a 90-day program in a rural location and then transferred to a downtown recovery home for an additional 120 days. Services included enhanced vocational and housing assistance and specialized group activities. The evaluation examined patterns of recruitment and program retention in comparison to a control group which received only the first phase. Upon completion of the second phase, whites were more likely to discharge to a rental situation, blacks to a sober group living facility, and women to live with others. Differences in program recruitment and completion may be explained by employment history, economic status, gender, race, and age differences. The findings suggest the need for program planners to consider the diverse backgrounds and needs of homeless alcoholics and to match services to individual needs (author).

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**Order #: 13088**

**Authors:** Gulcur, L., Stefancic, A., Shinn, M., Tsemberis, S., Fischer, S.

**Title:** **Housing, Hospitalization, and Cost Outcomes for Homeless Individuals with Psychiatric Disabilities Participating in Continuum of Care and Housing First Programs.**

**Source:** Journal of Community and Applied Social Psychology 13(2): 171-186, 2003. (Journal Article: 15 pages)

**Abstract:** This article compares two approaches to housing chronically homeless individuals with psychiatric disabilities and often substance abuse. The experimental Housing First program offered immediate access to independent housing without requiring psychiatric treatment or sobriety; the control Continuum of Care programs made treatment and sobriety prerequisites for housing. A total of 225 participants were interviewed prior to random assignment and every 6-months thereafter for 2 years. Data were analyzed using repeated measures analysis of variance. Participants randomly assigned to the experimental condition spent significantly less time homeless and in psychiatric hospitals, and incurred fewer costs than controls. A sub-sample recruited from psychiatric hospitals spent less time homeless and more time hospitalized, and incurred more costs than a sub-sample recruited from the streets. Recruitment source by program interactions showed that the experimental program had greater effects on reducing hospitalization for the hospital sub-sample and reducing homelessness for the street sub-sample. Three-way interactions including time indicated that in the experimental group, hospitalization and homelessness declined faster for the hospital and street sub-samples, respectively, than for comparable controls. According to the authors, overall results support the Housing First approach (authors).

**Order #: 12555**

**Authors:** Hannigan, T., Wagner, S.

**Title:** **Developing the "Support" in Supportive Housing.**

**Source:** New York, NY: Corporation for Supportive Housing, 2003. (Report: 211 pages)

**Abstract:** This is a guide to providing services in housing. This manual addresses core housing tenancy and service delivery issues, with details on employment, mental health, HIV/AIDS and substance use services, as well as chapters on community building and facing crisis and conflict (authors).

**Available From:** Corporation for Supportive Housing, 50 Broadway, 17th Floor, New York, NY 10004, (212) 986-2966, <http://documents.csh.org/documents/pubs/DevelopingSupport-full.pdf>

**Order #: 933**

**Authors:** Hannigan, T., White, A.

**Title:** **Housing Hard-To-Place Homeless Mentally Ill Women, The 350 Lafayette Transitional Living Community: A Status Report.**

**Source:** New York, NY: Columbia University Community Services, 1990. (Report: 19 pages)

**Abstract:** The Transitional Living Community (TLC) at 350 Lafayette Street in New York City is one of four TLCs in the city designed as a temporary residence to help emotionally troubled homeless women make the transition from homelessness to permanent living. Since the TLC at 350 Lafayette Street has served as a model for other TLCs, this review of its first year and a half is intended to serve a broader purpose than simply reporting about a single program. The report discusses staff recruitment problems and procedures, staffing patterns, and some of the program's innovative means of delivering services in the effort to overcome barriers to housing placement. The primary goal of the program is to reintegrate difficult-to-place women in the shelter system into permanent housing within a six-month period.

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**Order #: 8504**

**Authors:** Herman, D., Opler, L., Felix, A., Valencia, E., Wyatt, R.J., Susser, E.

**Title:** **A Critical Time Intervention with Mentally Ill Homeless Men: Impact on Psychiatric Symptoms.**

**Source:** Journal of Nervous and Mental Disease 188(3): 135-140, 2000. (Journal Article: 6 pages)

**Abstract:** This article describes the impact of a psychosocial intervention, critical time intervention (CTI), on the cardinal symptoms of schizophrenia, namely negative, positive, and general psychopathology. Ninety-six men with schizophrenia and other psychotic disorders who were discharged from a homeless shelter were randomly assigned to receive either CTI or usual services only. CTI is a time-limited intervention designed to enhance continuity of care during the transition from institution to community. Symptom severity was assessed at baseline and at six months. The results suggest that CTI was associated with a statistically significant decrease in negative symptoms at the six-month follow-up, reflecting modest clinical improvement. There was no significant effect on positive or general psychopathology symptoms (authors).

**Order #: 11365**

**Authors:** HomeBase, The Center for Common Concerns.

**Title:** **Transitional Housing: A Bridge to Stability and Self-Sufficiency.**

**Source:** San Francisco, CA: HomeBase, The Center for Common Concerns, 1998. (Report: 163 pages)

**Abstract:** This report was developed in response to requests for information and technical assistance from local governments, service providers, advocates, churches, and community groups looking to develop or enhance transitional housing programs in their communities. This report both introduces communities to the questions to be considered in pursuing transitional housing as a strategy to address homelessness and it lays out concrete recommendations for how to design and operate these programs (authors).

**Available From:** Home Base, The Center for Common Concerns, 870 Market Street, Suite 1228, San Francisco, CA 94102, (415) 788-7961, [www.homebaseccc.org](http://www.homebaseccc.org).

**Order #: 12185**

**Authors:** Homes for the Homeless.

**Title:** **The American Family Inn Handbook: A How To Guide.**

**Source:** New York, NY: Homes for the Homeless, 2003. (Book: 139 pages)

**Abstract:** This report is a first ever collection detailing over fifteen years worth of Homes for the Homeless' experience running shelters and programs for homeless families and children. Readers will find out what makes the American Family Inn work for over 1,100 families and over 2,500 children each year so that they maintain housing, take steps toward higher education, find employment, and succeed in school. Strategies for adapting the size, staff and scope of an inn are included, as well as methods for funding and evaluating programs. Whether readers are service providers, teachers, government officials, community leaders, or concerned citizens from the public, private or non-profit sector, this handbook will prove useful.

**Available From:** Homes for the Homeless, The Institute for Children and Poverty, 36 Cooper Square, Sixth Floor, New York, NY 10003, (212) 529-5252, [www.homesforthehomeless.com/booksframe.html](http://www.homesforthehomeless.com/booksframe.html) (COST: \$10.00).

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**Order #: 2029**

**Authors:** Jahiel, R.I.

**Title:** **Services for Homeless People: An Overview.**

**Source:** In Jahiel, R.I. (ed.), *Homelessness: A Prevention-Oriented Approach*. Baltimore, MD: The Johns Hopkins University Press, 1992. (Book Chapter: 16 pages)

**Abstract:** This chapter is organized according to services for homeless persons: sheltering, food, general health, mental health, substance abuse, employment, education, social service, and transitional housing. In each instance, a brief description of the services is followed by recent studies, cost estimates, and a summary of federal intervention (author).

**Available From:** The Johns Hopkins University Press, 2715 North Charles Street, Baltimore, MD 21218, (410) 516-6900, [www.press.jhu.edu/press/index.html](http://www.press.jhu.edu/press/index.html).

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**Order #: 2039**

**Authors:** Jarvis, S.V., Robertson, R.M.

**Title:** **Transitional Living Programs For Homeless Adolescents.**

**Source:** Washington, DC: Child and Adolescent Service System Program Technical Assistance Center, 1993. (Report: 122 pages)

**Abstract:** This monograph presents a conceptual framework for developing, reviewing, and evaluating transitional living programs for homeless adolescents. It is designed to be used by those in the field who are developing such programs. It pulls together examples of working programs and draws from the assembled information a conceptual framework for delivery of services to youth in transition to adulthood. Several chapters address the needs of special populations of adolescents: those who are developmentally delayed, HIV infected, or pregnant or parenting.

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**Order #: 12402**

**Authors:** Jones, K.

**Title:** **Cost-Effectiveness of Critical Time Intervention to Reduce Homelessness Among Persons with Mental Illness.**

**Source:** *Psychiatric Services* 54(6):884-890, 2003. (Journal Article: 7 pages)

**Abstract:** In this article, the authors investigate the cost-effectiveness of the critical time intervention program, a time-limited adaptation of intensive case management, which has been shown to significantly reduce recurrent homelessness among men with severe mental illness. Ninety-six study participants recruited from a psychiatric program in a men's public shelter from 1991-1993 were randomly assigned to the critical time intervention program or to usual services. The authors state that the critical time intervention group experienced significantly fewer homeless nights than the usual care group. The article concludes that the critical time intervention program is not only an effective method to reduce recurrent homelessness among persons with severe mental illness but also represents a cost-effective alternative to the status quo (authors).

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**Order #: 2181**

**Authors:** Lowery, M.

**Title:** LAMP in L.A.'s Skid Row: A Model for Community-Based Support Services.

**Source:** In Stein, L.I. (ed.), Innovative Community Mental Health Programs. New Directions For Mental Health Services 56: 89-98. San Francisco, CA: Jossey-Bass, Inc., 1992. (Book Chapter: 10 pages)

**Abstract:** This chapter describes the story of Los Angeles Men's Place (LAMP) - how they got started, what some of the struggles have been along the way, and how they have collectively managed to become a creative, effective model for serving the needs of homeless individuals diagnosed with serious mental illness. LAMP includes a drop-in center, shelter, drug treatment program, transitional residence, and four businesses which both employ LAMP guests as well as provide basic community amenities (author).

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**Order #: 2922**

**Authors:** Matulef, M.L., Crosse, S.B., Dietz, S.K., VanRyzin, G., Kiser, M.L., Puhl, L.M., Ficke, R.C.

**Title:** National Evaluation of the Supportive Housing Demonstration Program: Final Report.

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 1995. (Report: 100 pages)

**Abstract:** This report presents results from the national evaluation of the Supportive Housing Demonstration Program (SHDP) administered by the Department of Housing and Urban Development (HUD). The evaluation of SHDP provides strong support for the creation of a flexible block grant to aid the homeless population. SHDP consisted of two distinct initiatives: the Transitional Housing Program for homeless individuals and families and the Permanent Housing Program for homeless persons with disabilities. A comprehensive summary of the many achievements of the program, which was succeeded by the Supportive Housing Program in 1992, are presented.

**Available From:** HUD USER, P.O. Box 23268, Rockville, MD 20849, (800) 245-2691, [www.huduser.org/publications/suppsvcs/shdp.html](http://www.huduser.org/publications/suppsvcs/shdp.html) (COST: \$5.00).

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**Order #: 2489**

**Authors:** Meister, J.

**Title:** On Our Way Home: Transitional Housing, Inc. Program Director's Manual.

**Source:** Cleveland, OH: Transitional Housing, Inc., 1993. (Manual: 221 pages)

**Abstract:** This manual provides guidance to counselors working with homeless women involved in transitional housing programs. The goal of the manual is to explain the system which Transitional Housing, Inc. (THI) in Cleveland, OH, has designed so it can be used by other transitional housing programs for women. The THI program consists of eight parts: personal development planning; vocational/career development; substance abuse prevention; interpersonal skill development; personal/spiritual growth; community involvement; creative leisure/celebration; and independent living preparation and follow up.

**Available From:** Transitional Housing, Inc., 1490 Martin Street, Madison, WI 53713, (608) 250-0380, [www.thousing.com](http://www.thousing.com). (COST: \$22.00)

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**Order #: 12984**

**Authors:** Melbin, A., Sullivan, C., Cain, D.

**Title:** **Transitional Supportive Housing Programs: Battered Women's Perspectives and Recommendations.**

**Source:** Affilia 18(4): 445-460, 2003. (Journal Article: 15 pages)

**Abstract:** This article reports on interviews with 55 key stakeholders of transitional supportive housing (TSH) programs to examine the degree to which TSH programs fulfill the needs of the women who use them. Consistent with other research on empowerment-based services, the study found that the women were most satisfied when services were provided in a respectful and individualized manner. The women's recommendations included the implementation of safety protocols and the need for a variety of support services that should be offered but not mandated (authors).

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**Order #: 11614**

**Authors:** Metraux, S., Culhane, D., Raphael, S., White, M., Pearson, C., Hirsch, E., Ferrell, P., Rice, S., Ritter, B., Cleghorn, J.S.

**Title:** **Assessing Homeless Population Size Through the Use of Emergency and Transitional Shelter Services in 1998: Results from the Analysis of Administrative Data from Nine U.S. Jurisdictions.**

**Source:** Public Health Reports 116(4): 344-352, 2001. (Journal Article: 9 pages)

**Abstract:** This study reports findings from the first-ever systematic enumeration of homeless population size using data previously collected from administrative records of homeless services providers in nine jurisdictions over a one year period. It provides the basis for establishing an ongoing measure of the parameters of the homeless population and for tracking related trends on the use of homeless services over time. Each participating jurisdiction collected data through its homeless services management information systems for persons and families who use emergency shelter and transitional housing. The jurisdictions organized the data by a standardized reporting format. These data form the basis for reporting homeless population size, both in raw numbers and as adjusted for each jurisdiction's overall population size, as well as the rate of turnover and average annual length of stay in emergency shelters and transitional housing. Results are broken down for adults and families. The prevalence of homelessness varies greatly among the jurisdictions included in this study, and possible factors for this diversity are discussed (authors)

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**Order #: 5929**

**Authors:** Murray, R., Baier, M., North, C., Lato, M., Eskew, C.

**Title:** **Components of an Effective Transitional Residential Program for Homeless Mentally Ill Clients.**

**Source:** Archives of Psychiatric Nursing 9(3): 152-157, 1995. (Journal Article: 6 pages)

**Abstract:** This article describes a study that reviews clinical records of 228 former clients of a transitional residential program for severely, persistently mentally ill homeless persons conducted to examine program results for completers and noncompleters. Of the 228 clients, 110 (48.3%) completed the program: they became psychiatrically stabilized, found secure housing, and began receiving disability pensions. Completers participated in significantly more activities than noncompleters. Psychiatric diagnosis was unrelated to successful program completion. Individuals who left against advice had significantly fewer previous hospitalizations (authors).

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**Order #: 7856**

**Authors:** Murray, R., Baier, M., North, C., Lato, M., Eskew, C.

**Title:** **One-Year Status of Homeless Mentally Ill Clients Who Completed a Transitional Residential Program.**

**Source:** Community Mental Health Journal 33(1): 43-50, 1997. (Journal Article: 8 pages)

**Abstract:** This article examines the status of individuals who were discharged from a transitional residential program in St. Louis, MO. Of 228 homeless, severely persistently mentally ill clients admitted within a five and a half year period to the transitional residential program, 179 (79%) remained in contact with staff for at least one year post-discharge. Housing was maintained by 141 (78%) of the clients for at least one year. Entitlements increased from admission, to discharge, to one year post-discharge. Clients maintaining contact for at least one year were likely to have participated in two or more day treatment programs during residence. The authors state that the success of the program may be partly attributed to the staff's vigilance in maintaining post-discharge client contact (authors).

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**Order #: 9996**

**Authors:** National Coalition for the Homeless.

**Title:** **A Home in Between: Designing Transitional Housing for Women and Children.**

**Source:** Washington, DC: National Coalition for the Homeless, 1992. (Videotape: 13 minutes)

**Abstract:** This video focuses on the benefits of good architectural design in transitional housing for women and children. "A Home in Between" makes clear that the primary goal of transitional housing is relocation of residents to permanent affordable housing. However, transitional housing must be of the highest quality if it is to fit well into the community to serve the needs of those who live there temporarily. The video features two transitional residences in New York City's South Bronx-Lee Goodwin House, sponsored by the Phipps Houses and Shearson Lehman Hutton Residence, sponsored by Women in Need. It follows Freida Gaillard, a resident at Lee Goodwin, who leaves after an eight month stay, finds her own apartment, and prepares to return to school for a high school diploma so she can continue on to become a pediatric nurse.

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**Order #: 7736**

**Authors:** National Resource Center on Homelessness and Mental Illness.

**Title:** **In from the Cold: A Tool Kit for Creating Safe Havens for Homeless People on the Street.**

**Source:** Washington, DC: U.S. Department of Health and Human Services and U.S. Department of Housing and Urban Development, 1999. (Tool Kit: 102 pages)

**Abstract:** In 1992, amendments to the McKinney Act created the Safe Haven program, a form of supportive housing for hard-to-reach people who are homeless with severe mental illness who are on the street and have been unable or unwilling to participate in supportive services. This tool kit has been developed to address these issues specifically and serve as a guide to help new programs avoid unnecessary administrative headaches. The kit includes eight chapters covering the key issues surrounding the creation of Safe Haven programs. They include: the Continuum of Care; planning, designing, siting, and financing Safe Haven housing; the challenge and opportunity of NIMBY; outreach, engagement, and service delivery; crisis management; transitions from Safe Havens; program rules and expectations; and staffing issues.

**Available From:** National Resource Center on Homelessness and Mental Illness, Policy Research Associates, Inc., 345 Delaware Avenue, Delmar, NY 12054, (800) 444-7415, [www.nrchmi.samhsa.gov](http://www.nrchmi.samhsa.gov).

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**Order #: 3219**

**Authors:** New York State Office of Mental Health.

**Title:** **The Housing Difference.**

**Source:** Albany, NY: New York Network/State University of New York, 1992. (Videotape: 20 minutes)

**Abstract:** This video describes some of the supportive housing programs for persons with serious mental illnesses in New York. The programs include a variety of housing -- from adult group homes to apartment buildings -- and serve a diverse population, many of whom were previously homeless. Neighbors of the various residences, the providers and the residents themselves are interviewed about the programs. Some of the programs highlighted include the Transitional Living Center (TLC) in New York City and Fleming Housing in Westchester County.

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**Order #: 1736**

**Authors:** O'Neill, J.V., O'Connell M.E.

**Title:** **Affordable Housing for Homeless Persons in Recovery from Alcohol and Other Drug Problems: A Case Study.**

**Source:** Rockville, MD: U.S. Department of Health and Human Services, 1991. (Report: 24 pages)

**Abstract:** The purpose of this case study is to provide an example of how one recovery program has successfully integrated alcohol and other drug treatment services and housing for homeless persons. The program, Comprehensive Addiction Rehabilitation Programs of Georgia, Inc. (CARP), developed this housing by using an easily accessible, leased-housing program sponsored by the U.S. Department of Housing and Urban Development (HUD). This report discusses the history that led to CARP's interest in transitional housing, how the agency accessed the HUD leased-housing program, the structure and management of the houses, and strategies for other agencies interested in the HUD leased-housing program (authors).

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**Order #: 7729**

**Authors:** Proscio, T.

**Title:** **Under One Roof: Lessons Learned from Co-Locating Overnight, Transitional, and Permanent Housing at Deborah's Place II.**

**Source:** New York, NY: Corporation for Supportive Housing, 1998. (Report: 19 pages)

**Abstract:** This case study examines lessons learned from Deborah's Place II, which combines three levels of care at one site with the aim of allowing homeless single women with mental illness to move toward independence without losing necessary supports. The report examines both the model's promise as well as its potential difficulties, and is a resource for nonprofits concerned with developing service enriched housing for people who have been homeless and also cope with psychiatric and medical disabilities. Five main conclusions are reached in the case study: co-location can work for a small but significant percentage of homeless single adults; evidence is inconclusive as to whether this model provides a means for smooth movement among different levels of care and a significant increase in the odds of moving long-term shelter residents into permanent housing; the greatest difficulty in integrating three levels of housing and services seems to arise from the presence of an emergency shelter; providing adequate space for common areas can ease a number of potential tensions; and permanent units should be planned with higher-functioning tenants in mind, even though some of the intended tenants may not be ready for that level of independence.

**Available From:** Corporation For Supportive Housing, 50 Broadway, 17th Floor, New York, NY 10173, (212) 986-2966, www.csh.org (COST: \$5.00).

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**Order #: 6411**

**Authors:** Susser, E., Valencia, E., Conover, S., Felix, A., Tsai, W., Wyatt, R.J.

**Title:** **Preventing Recurrent Homelessness Among Mentally Ill Men: A Critical Time Intervention After Discharge from a Shelter.**

**Source:** American Journal of Public Health 87(2): 256-262, 1997. (Journal Article: 7 pages)

**Abstract:** The authors describe a study that examined a strategy to prevent homelessness among individuals with severe mental illness by providing a bridge between institutional and community care. Ninety-six men with severe mental illness who were entering community housing from a shelter were randomized to receive nine months of a "critical time" intervention plus usual services or usual services only. The primary analysis compared the mean number of homeless nights for the two groups during the 18-month follow-up period. Results show, over the 18-month follow-up period, the average number of homeless nights was 30 for the critical time intervention group and 91 for the usual services group. Survival curves showed that after the nine-month period of active intervention, the difference between the two groups did not diminish. The authors conclude that strategies that focus on a critical time of transition may contribute to the prevention of recurrent homelessness among individuals with mental illness, even after the period of active intervention (authors).

**Order #: 13670**

**Authors:** Tsemberis, S., Gulcur, L., Nakae, M.

**Title:** **Housing First, Consumer Choice, and Harm Reduction for Homeless Individuals With a Dual Diagnosis.**

**Source:** American Journal of Public Health 94(4): 651-656, 2004. (Journal Article: 8 pages)

**Abstract:** This article examined the longitudinal effects of a Housing First program for homeless, mentally ill individuals on those individuals' consumer choice, housing stability, substance use, treatment utilization, and psychiatric symptoms. According to the article, two hundred twenty-five participants were randomly assigned to receive housing contingent on treatment and sobriety or to receive immediate housing without treatment prerequisites, and interviews were conducted every six months for twenty-four months. The article states that the experimental group obtained housing earlier, remained stably housed, and reported higher perceived choice. The authors also assert that utilization of substance abuse treatment was significantly higher for the control group, but no differences were found in substance use or psychiatric symptoms. The article concludes that participants in the Housing First program were able to obtain and maintain independent housing without compromising psychiatric or substance abuse symptoms (authors).

**Order #: 13055**

**Authors:** Tsemberis, S., Moran, L., Shinn, M., Asmussen, S., Shern, D.

**Title:** **Consumer Preference Programs for Individuals who are Homeless and Have Psychiatric Disabilities: A Drop-In Center and a Supported Housing Program.**

**Source:** American Journal of Community Psychology 32(3/4): 305-317, 2003. (Journal Article: 8 pages)

**Abstract:** In this article, the authors illustrate Fairweather's approach to Experimental Social Innovation and Dissemination with two experimental studies of programs to reduce homelessness for 168 and 225 people with mental illness and often substance abuse. Literally homeless participants were randomly assigned to programs that emphasized consumer choice or to the usual continuum of care, in which housing and services are contingent on sobriety and progress in treatment. A drop-in center that eliminated barriers to access to services was more successful than control programs in reducing homelessness, but after 24 months only 38% of participants had moved to community housing. A subsequent apartment program, in which individuals in the experimental condition moved to subsidized apartments directly from the street, with services under their control, had 79% in stable housing (compared to 27% in the control group) at the end of 6 months. According to the authors groups in this study did not differ on substance abuse or psychosocial outcomes (authors).

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**Order #: 10406**

**Authors:** United States Census Bureau.

**Title:** **Emergency and Transitional Shelter Population: 2000.**

**Source:** Washington, DC: U.S. Census Bureau, 2001. (Report: 24 pages)

**Abstract:** In this report, the population in emergency and transitional shelters were counted on March 27, 2000, and include the following facilities: emergency shelters (with sleeping facilities); shelters for children who are runaways, neglected or without conventional housing; transitional shelters for people without conventional housing; and hotels and motels used to provide shelter for people without conventional housing. Shelters for abused women (or shelters against domestic violence) are not included. Data are shown in the report for the emergency and transitional shelter population, but not separately by type of facility. The Census Bureau stressed that the shelter figures do not constitute and should not be construed as a tabulation of the total population without conventional housing or "people experiencing homelessness." Not all people without conventional housing on March 27, 2000, resided at shelters. Some may have "doubled up" at housing units owned or rented by friends or relatives or found other nonshelter locations that night. Since the shelters were visited only one night, only the people residing at shelters open that night would have been enumerated (authors).

**Available From:** U.S. Census Bureau, Public Information Office, 4700 Silver Hill Road, Washington, DC 20233, (301) 763-3030, [www.census.gov/prod/2001pubs/censr01-2.pdf](http://www.census.gov/prod/2001pubs/censr01-2.pdf).

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**Order #: 12426**

**Authors:** United States Department of Housing and Urban Development.

**Title:** **Issues in the First Year.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 2003. (Curriculum: 42 pages)

**Abstract:** This curriculum is part of the Supportive Housing Training Series, put out by the U.S. Department of Housing and Urban Development. This training discusses strategies for managing the transition to supportive housing, including: understanding the stress individuals face when moving into permanent housing and the impact of the homeless experience on new tenants; defining case management and establishing effective boundaries; developing basic policies, procedures and house rules; and developing a service philosophy and menu (authors).

**Available From:** U.S. Department of Housing and Urban Development, 451 Seventh Street SW, Washington, DC 20410, (202) 708-1112, [www.hud.gov](http://www.hud.gov).

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**Order #: 11363**

**Authors:** United States Department of Housing and Urban Development.

**Title:** **A Safe Place: Creating Safe Havens Training Video.**

**Source:** Washington, DC : U.S. Department of Housing and Urban Development, undated. (Videotape: 45 minutes)

**Abstract:** This video begins with the question: "How do we reach people living on the streets? Those who are hardest to reach, those who are both homeless and mentally ill, often made worse by substance abuse?" Safe Havens serve as refuges for people who are homeless with severe mental illness who have been unable to access or participate in traditional housing or supportive services. Safe Havens provide for basic needs such as food, showers, clothing, and shelter. They give people who are homeless a chance to adjust to life off the streets and to transition to permanent housing. Residents and staff are interviewed and facilities are toured in three cities: Project H.O.M.E. in Philadelphia, PA; Harbor House in Seattle, WA; and Pathfinder in Lowell, MA.

**Available From:** U.S. Department of Housing and Urban Development, 451 Seventh Street, SW, Washington, DC 20410, (202) 708-1112, [www.hud.org](http://www.hud.org)

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**Order #: 12427**

**Authors:** United States Department of Housing and Urban Development.

**Title:** **Making the Transition to Permanent Housing.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 2003. (Curriculum: 52 pages)

**Abstract:** This curriculum is part of the Supportive Housing Training Series, put out by the U.S. Department of Housing and Urban Development. This training is aimed at direct service staff and managers who are helping people with histories of homelessness transition into permanent housing (including scattered site housing and congregate models). At the end of this training, participants will be better able to conduct a thorough assessment of residents for housing placement, match residents to appropriate housing, develop housing plans, prepare residents for the transition as well as identify and address obstacles for the individual to access housing (authors).

**Available From:** U.S. Department of Housing and Urban Development, 451 Seventh Street SW, Washington, DC 20410, (202) 708-1112, [www.hud.gov](http://www.hud.gov).

**Order #: 1240**

**Authors:** United States General Accounting Office.

**Title:** **Homelessness: Transitional Housing Shows Initial Success But Long-Term Effects Unknown.**

**Source:** Washington, DC: U.S. General Accounting Office, 1991. (Report: 68 pages)

**Abstract:** This report reviews the Department of Housing and Urban Development's (HUD) Transitional Housing Program for homeless people. The report discusses the extent to which the program is helping homeless individuals move to independent living and the factors that influence successful transitions, the types of clients assisted and the services provided, and HUD's monitoring and evaluation process for grantees. The General Accounting Office determined that the longer clients spent in the program and the more support services they used, the more likely they were to succeed. Client success was also influenced by the combination of household structure and the lack of mental or substance abuse problems. As might be expected, families or couples without mental health or substance abuse problems were most likely to succeed.

**Available From:** U.S. General Accounting Office, 441 G Street, NW, Washington, DC 20548, (202) 512-4800, <http://161.203.16.4/d18t9/145180.pdf>.

**Order #: 2169**

**Authors:** United States House of Representatives.

**Title:** **H.R. 4300, Stewart B. McKinney Homeless Assistance Amendments.**

**Source:** 102nd Congress 2nd Session, February 1992. (Legislation: 54 pages)

**Abstract:** This legislation authorizes amendments to the Stewart B. McKinney Homeless Assistance Act to extend programs providing urgently needed assistance for the homeless. The broadest change included in the amendments is a new requirement that all recipients of McKinney funds, with a few exceptions such as states, include at least one homeless or formerly homeless individual on their board or governing bodies. Another modification to the Act is the merger of the two Supportive Housing programs with the Supplemental Assistance for Facilities to Assist the Homeless (SAFAH) program. The Shelter Plus Care program was modified to include four parts: tenant-based rental assistance, project-based rental assistance, sponsor-based rental assistance, and Section 8 SRO moderate rehabilitation. In addition, changes were made to the SRO Housing program that allow nonprofits to apply directly to the Department of Housing and Urban Development (HUD). The amendment also created two new programs including the Rural Homelessness Grant program and the Safe Havens program.

**Available From:** National Housing Law Project, 1012 Fourteenth Street NW, Suite 610, Washington, D.C. 20005, (202) 347-8775, [www.nhlp.org/html/pubhsg/Rucker%20AARP%20Amicus%20FINAL.PDF](http://www.nhlp.org/html/pubhsg/Rucker%20AARP%20Amicus%20FINAL.PDF)

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**Order #: 8263**

**Authors:** Unites States General Accounting Office.

**Title:** **Homelessness: Grant Applicants' Characteristics and Views on the Supportive Housing Program.**

**Source:** Washington, DC: U.S. General Accounting Office, 1999. (Report: 42 pages)

**Abstract:** This report examines several facets of organizations receiving funding through the Department of Housing and Urban Development's Supportive Housing Program. Specifically it examines: the characteristics of Supportive Housing Program applicants; the types of programs and services for homeless people that this program supports; the importance of the Supportive Housing Program to applicants' programs for the homeless; and the various funding sources, in addition to the Supportive Housing Program grants, that applicants rely on for their programs and services. The report finds that about 90% of the applicants in 1997 are nonprofit organizations. Almost 70% of the applicants have been in existence for between 10 and 50 years; however, most have offered services to the homeless only during the last 20 years. About 64% of the applicants serve fewer than 500 homeless people each year. The majority of programs provide transitional housing with supportive services or supportive services only. The report estimates that Supportive Housing grants represent about 45% of the resources that applicants receive from all sources to support their programs.

**Available From:** U.S. General Accounting Office, 441 G Street, NW, Washington, DC 20548, (202) 512-4800, [www.gao.gov/archive/1999/rc99239.pdf](http://www.gao.gov/archive/1999/rc99239.pdf).

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**Order #: 11331**

**Authors:** Washington, T.A.

**Title:** **The Homeless Need More Than Just a Pillow, They Need a Pillar: An Evaluation of a Transitional Housing Program.**

**Source:** Families in Society 83(2): 183-188, 2002. (Journal Article: 5 pages)

**Abstract:** Current programs serving the homeless population use the systems approach, focusing on the person in the situation. These programs, which are known as transitional housing programs, seek to empower individuals through comprehensive services, such as education, job development, leadership skills, resources, and referrals. This study evaluated the comprehensive services offered at a transitional housing program through the eyes of former residents. Qualitative interviews were conducted with ten successful participants of the program. Analysis of the interview data suggested that the formal and informal services offered empowered the participants by offering life skills classes, resources and referrals, and counseling. Implications for social work practice are discussed (author).

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**Order #: 10886**

**Authors:** White, A., Kirk, C., Wagner, S.

**Title:** **Transitions From Safe Havens.**

**Source:** In the National Resource Center on Homelessness and Mental Illness(s) In from the Cold: A Tool Kit for Creating Safe Havens for Homeless People on the Street, Washington, DC: U.S. Department of Health and Human Services, 1997. (Book Chapter: 13 pages)

**Abstract:** Safe Havens offer a residence to people with mental illness who have been unable to participate in other housing and services. The initial goal of the Safe Haven is to engage residents in living in the Safe Haven; the ultimate goal is to facilitate access to permanent housing. Safe Havens must hold these two goals in balance. The engagement process, service program, policies and procedures, staffing patterns, and building design must be developed with both goals in mind. This paper describes an approach to facilitate the transition of hard to engage homeless people with serious and persistent mental illness who are living in Safe Havens to other housing settings. Examples have been drawn from Safe Havens operating in Philadelphia, Chicago, Honolulu, New York, and Burlington (authors).

**Available From:** National Resource Center on Homelessness and Mental Illness, Policy Research Associates, Inc., 345 Delaware Avenue, Delmar, NY 12054, (800) 444-7415, [www.nrchmi.samhsa.gov](http://www.nrchmi.samhsa.gov).

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**Order #: 8116**

**Authors:** Wilder Research Center.

**Title:** **Minnesota's Fifth Year Experience with Supplemental Assistance for Facilities to Assist the Homeless (SAFAH).**

**Source:** St. Paul, MN: Minnesota Dept. of Children, Families and Learning, 1998. (Report: 7 pages)

**Abstract:** This report provides an overview of the services provided in the fifth year of operation of Minnesota's SAFAH program and provides a summary of the first five years of the program's operation. Minnesota's SAFAH services were provided by six transitional housing agencies. During the first five years, 305 families were served, and 95% of those served were single-parent, female-headed households. At the time participants completed their use of SAFAH funding (no later than 12 months following departure from transitional housing), 76% were still living in their original housing placement, 18% had moved once, 5% had moved twice, and 1% had moved three or more times.

**Available From:** Minnesota Department of Children, Families & Learning, 1500 Highway 36 West, Roseville, MN 55113, (651) 582-8200, <http://education.state.mn.us>.

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**Order #: 2298**

**Authors:** Women's Institute for Housing and Economic Development.

**Title:** **More Than Shelter: A Manual on Transitional Housing.**

**Source:** Boston, MA: Women's Institute for Housing and Economic Development, 1991. (Book: 74 pages)

**Abstract:** This book serves as a guide to groups and individuals for developing successful transitional housing programs. In addition to describing a variety of successful transitional housing programs located around the country, the authors review such topics as project development, site evaluation and selection, design, financing, resident issues, operations and zoning. A listing of funding and information resources, relevant publications, advocacy, development assistance and technical assistance organizations, as well as government programs is also provided.

**Available From:** Women's Institute for Housing and Economic Development, 14 Beacon Street, Boston, MA 02108, (617) 367-0520, [www.wihed.org](http://www.wihed.org) (COST: \$15.00)

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**Order #: 11477**

**Authors:** America's Second Harvest.

**Title:** **Hunger in America 2001.**

**Source:** Chicago, IL: America's Second Harvest, 2001. (Report: 239 pages)

**Abstract:** This study is meant to provide a comprehensive profile of the incidence and nature of hunger and food insecurity in the U.S. as experienced by the low-income people who use our network of emergency feeding programs. The study is comprised of two main data sources. First is the client or recipient data, achieved through face-to-face interviews with more than 32,000 people selected randomly at charitable emergency hunger-relief agencies like pantries, soup kitchens, and shelters. The second source of data comes through responses from agency survey questionnaires; nearly 24,000 local agencies completed the surveys, with a response rate of 77.4 percent.

**Available From:** America's Second Harvest, 35 East Wacker Drive, Suite 2000, Chicago, IL 60601, (800) 771-2303, [www.secondharvest.org](http://www.secondharvest.org).

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**Order #: 5857**

**Authors:** Argeriou, M., McCarty, D.

**Title:** **The Use of Shelters as Substance Abuse Stabilization Sites.**

**Source:** Journal of Mental Health Administration 20(2): 100-112, 1993. (Journal Article: 13 pages)

**Abstract:** The feasibility of providing post-detoxification residential substance abuse programming (stabilization) in large emergency shelters was examined as part of a demonstration project funded by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) under Section 613 of the Stewart B. McKinney Act. The program completion rates of 773 homeless/at-risk substance-abusing individuals assigned to two large shelters (71% and 62%) and two traditional substance abuse treatment agencies (68% and 54%) were compared. These data support the expansion of shelter services to include substance abuse programming and intervention (author).

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**Order #: 6687**

**Authors:** Barth, T., Warn, D.J.

**Title:** **Emergency Reception Center Program Manual.**

**Source:** Rockville, MD: Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, and Center for Substance Abuse Treatment, undated. (Manual: 58 pages)

**Abstract:** BRC Human Services Corporation operates a 24-bed Reception Center for street and subway dwelling homeless persons who have mental illnesses, substance abuse, and are in need of medical services. The Reception Center is designed to provide emergency housing, psychiatric and medical assessment services, case management services, and housing placement services. Clients who are homeless typically remain at the Center for four to six months. The goal of the center is to medically stabilize clients and engage them in recovery activities. Sections of this manual include: executive summary; conceptual framework; history and setting of the intervention; review of the literature; description of the client population; description of the intervention; case studies; lessons learned; and recommendations.

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**Order #: 6096**

**Authors:** Broughton, J.

**Title:** **Foodservice for the Homeless: A Manual for Emergency Shelters, Drop-in Centers and Transitional Housing Providers.**

**Source:** Ganado, AZ: Jane Broughton, 1994. (Manual: 105 pages)

**Abstract:** This manual is intended as a resource for foodservice planning for emergency shelters, drop-in centers and transitional housing providers. First published in 1991, it now features a new section on nutrition education resources, including reproducible handouts and 30 recipes for large groups. It also has practical information on nutrition guidelines for all ages and needs of guests, food donation, volunteer coordination, and protection from food borne illnesses. All food recommendations follow the latest U.S.D.A. Food Guide pyramid.

**Available From:** Jane Broughton, M.S., R.D., P.O. Box 57-8238, Chicago, IL 60657 (COST: \$25.00).

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**Order #: 8919**

**Authors:** Burt, M.R., Aron, L.Y., Lee, E., Valente, J.J.

**Title:** **Helping America's Homeless: Emergency Shelter or Affordable Housing?**

**Source:** Washington, DC: Urban Institute Press, 2001. (Book: 355 pages)

**Abstract:** This book, based largely on findings from the National Survey of Homeless Assistance Providers and Clients (NSHAPC), provides a wide overview of homelessness, homeless services, and recommendations on what actions need to be taken to alleviate the problem. Chapter topics include: how many people are homeless; homeless families, singles, and others; alcohol, drug, and mental health problems among those who are homeless; issues in child and youth homelessness; patterns of homeless; comparing homeless subgroups within community types; factors associated with homeless status; homeless programs in 1996 compared to programs in the late 1980s; and program structures and continuums of care.

**Available From:** The Urban Institute, 2100 M Street NW, Washington, DC 20037, (877) 847-7377, www.urban.org (COST: \$29.50).

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**Order #: 12743**

**Authors:** Coalition for the Homeless.

**Title:** **Supportive Housing as a Cost-Effective Way to Reduce Homeless Shelter Capacity.**

**Source:** New York, NY: Coalition for the Homeless, 2001. (Brief: 8 pages)

**Abstract:** This briefing paper outlines a strategy for reducing shelter capacity through targeted investments in supportive housing. The authors discuss trends in adult shelter use, comparative costs of supportive housing and shelter, the experience of the New York/New York agreement, the plan to close the 30th Street shelter, and the strategy for reducing shelter capacity through supportive housing investments (authors).

**Available From:** Coalition for the Homeless, 129 Fulton Street, New York, NY 10038, (212) 776-2000, www.coalitionforthehomeless.org.

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**Section: Emergency Shelter and Services**

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**Order #: 12720**

**Authors:** Culhane, D., Hornburg, S.

**Title:** **Where to from Here? A Policy Research Agenda Based on the Analysis of Administrative Data.**

**Source:** In Culhane, D., Hornburg, S. (eds) *Understanding Homelessness: New Policy and Research Perspectives*, 1997. (Book Chapter: 20 pages)

**Abstract:** This chapter outlines a policy research agenda based on the analysis of administrative data. Computerized records of client characteristics and their related shelter utilization patterns offer researchers a rich source of longitudinal data that can enable a wide range of investigations, and that can be analyzed with a variety of administrative data to contribute to: enumerating and determining the characteristics of the homeless population; understanding the effect of homelessness on related public systems; gauging the effect of policy interventions on the use of homeless services; evaluating the effectiveness of system-level homeless service delivery; and measuring the performance of individual homeless service providers. The conclusion comments on several issues that policymakers might consider regarding the implementation of automated information systems among homeless service providers (authors).

**Order #: 7010**

**Authors:** Culhane, D.P., Kuhn, R.

**Title:** **Patterns and Determinants of Public Shelter Utilization Among Homeless Adults in New York City and Philadelphia.**

**Source:** *Journal of Policy Analysis and Management* 17(1): 23-43, 1998. (Journal Article: 21 pages)

**Abstract:** This paper describes a study in which administrative data on public shelter utilization among homeless adults from New York City and Philadelphia was analyzed to identify the relative proportion of shelter users by length of stay and rate of readmission, and to identify the characteristics that predict an exit from shelter. Analyses revealed that half of adult shelter users will stay fewer than 45 days over a two-year period, and that approximately one-half of men and one-third of women will experience a re-admission within two years of the first admission. Results also found that 18.2% of New York shelter users stay 180 days or more their first year, consuming 53.4% of the system days for first-time shelter users. It was revealed that, in general, being older, of black race, having a substance abuse or mental health problem, or having a physical disability, significantly reduces the likelihood of exiting shelter. The authors discuss the implications of this study for the analysis and management of emergency shelter system utilization.

**Order #: 8855**

**Authors:** Culhane, D.P., Metraux, S., Hadley, T.

**Title:** **The Impact of Supportive Housing for Homeless People with Severe Mental Illness on the Utilization of the Public Health, Corrections and Emergency Shelter Systems: The New York-New York Initiative.**

**Source:** Washington, DC: Fannie Mae Foundation, 2001. (Report: 62 pages)

**Abstract:** The study reported here examines services use by persons with severe mental illness (SMI) who are formerly homeless before and after being placed into a large supportive housing program in New York City. Administrative data from large public medical, psychiatric, criminal justice, and shelter service providers were used to assess an aggregate level of services demand for pre- and post-placement periods for this study group and for a set of controls. The extent to which reductions in these services are present and can be attributable to a supportive housing placement stand to foster broader insight into both services use patterns among homeless people with SMI and the effectiveness of supportive housing, especially in terms of cost (authors).

**Available From:** Fannie Mae Foundation, 4000 Wisconsin Avenue, NW, North Tower, Suite One, Washington, DC 20016, (202) 274-8000, [www.fanniemaefoundation.org/programs/pdf/rep\\_culhane\\_prepub.pdf](http://www.fanniemaefoundation.org/programs/pdf/rep_culhane_prepub.pdf).

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**Order #: 13465**

**Authors:** Culhane, D.P., Metraux, S., Wachter, S.M.

**Title:** Homelessness and Public Shelter Provision in New York City.

**Source:** In Schill, M.H. (ed.), Housing and Community Development in New York City: Facing the Future. Albany, NY: State University of New York Press, 1999. (Book Chapter: 30 pages)

**Abstract:** This chapter assesses homelessness policy in New York City through analyzing empirical data collected from the shelter system. A variety of approaches produce a set of shelter utilization patterns and trends that, taken together, form a unique and grounded perspective from which to evaluate key components of this policy (authors).

**Available From:** State University of New York Press, 90 State Street, Suite 700, Albany, NY 12207, (518) 472-5000, www.sunypress.edu.

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**Order #: 12523**

**Authors:** Culhane, D.P., Poulin, S.R., Hoyt, L.M., Metraux, S.

**Title:** The Impact of Welfare Reform on Public Shelter Utilization in Philadelphia: A Time-Series Analysis.

**Source:** Cityscape Journal of Policy Development and Research (6)2: 173-185, 2003. (Journal Article: 12 pages)

**Abstract:** The use of public shelters in Philadelphia was examined both before and after the implementation of Act 35, Pennsylvania's response to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. Results indicate that family size and household head age increased after the implementation of Temporary Assistance for Needy Families, although not at consistent lags. A small negative effect on self-reported substance abuse and a small positive effect on the proportion of household heads with a disability were found, but at inconsistent lags. As is the case with most evaluations of welfare reform, it is difficult to separate the effects of welfare reform and Philadelphia's economy during the study period. To test the effect of Act 35's implementation while controlling for economic factors, a multivariate regression analysis of family shelter admissions was conducted along with variables for the unemployment rate and for the consumer price index for the cost of rental housing. This analysis revealed a significant positive effect of unemployment and housing costs on public shelter admissions among families and no effect of the implementation of welfare reform (authors).

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**Order #: 8143**

**Authors:** Emergency Food and Shelter Board National Board Program.

**Title:** Program Overview.

**Source:** Alexandria, VA: Emergency Food and Shelter National Board Program, 1999. (Program Description: 28 pages)

**Abstract:** This document provides a brief description of the Emergency Food and Shelter National Board Program, a provision of the McKinney Act, which is operated by the Federal Emergency Management Agency. It also lists the appropriations by county across the country for FY1999.

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**Order #: 10738**

**Authors:** Emergency Food and Shelter National Board Program.

**Title:** **Emergency Food and Shelter National Board Program: Phase 19 Responsibilities and Requirements.**

**Source:** Alexandria, VA: Emergency Food and Shelter National Board Program, 2001. (Report: 57 pages)

**Abstract:** This manual contains changes from previous manuals issued to guide implementation of the Emergency Food and Shelter Program. Objectives of the program are: to supplement and expand ongoing efforts to provide shelter, food, and supportive services for needy families and individuals; to strengthen efforts to create more effective and innovative local programs by providing supplemental funding for them; and to conduct minimum rehabilitation of existing mass shelter or mass feeding facilities, but only to the extent necessary to make facilities safe, sanitary and bring them into compliance with local building codes. This manual must be carefully studied prior to administering the program, giving any information to the public, or making any grant award. This manual is intended for use by Local Boards and Local Recipient Organizations administering and providing services under the Emergency Food and Shelter National Board Program, and is not for individuals seeking services (authors).

**Available From:** Emergency Food and Shelter National Board Program, 701 North Fairfax Street., Suite 310, Alexandria, VA 22314, (703) 706-9660, [www.efsp.unitedway.org](http://www.efsp.unitedway.org)

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**Order #: 11481**

**Authors:** Emergency Food and Shelter National Board Program.

**Title:** **Emergency Food and Shelter National Board Program: Phase 20 Responsibilities and Requirements.**

**Source:** Alexandria, VA: Emergency Food and Shelter National Board Program, 2001. (Report: 95 pages)

**Abstract:** This manual is intended for use by Local Boards and Local Recipient Organizations administering and providing services under the Emergency Food and Shelter National Board Program, and is not for individuals seeking services. Objectives of the program are: to supplement and expand ongoing efforts to provide shelter, food, and supportive services for needy families and individuals; to strengthen efforts to create more effective and innovative local programs by providing supplemental funding for them; and to conduct minimum rehabilitation of existing mass shelter or mass feeding facilities, but only to the extent necessary to make facilities safe, sanitary and bring them into compliance with local building codes. This manual must be carefully studied prior to administering the program, giving any information to the public, or making any grant award (authors).

**Available From:** Emergency Food and Shelter National Board Program, 701 North Fairfax Street., Suite 310, Alexandria, VA 22314, (703) 706-9660, [www.efsp.unitedway.org](http://www.efsp.unitedway.org)

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**Order #: 7901**

**Authors:** Feins, J.D., Fosburg, L.B.

**Title:** **Emergency Shelter and Services: Opening the Front Door to the Continuum of Care.**

**Source:** In Fosburg, L.B., Dennis, D.L. (eds.), Practical Lessons: The 1998 National Symposium on Homelessness Research. Delmar, NY: National Resource Center on Homelessness and Mental Illness, 1999. (Book Chapter: 35 pages)

**Abstract:** This paper describes the provision of emergency shelter services to homeless persons in the United States. In large part, it grows out of an evaluation of the Emergency Shelter Grants (ESG) Program conducted in 1993, which provides the best description currently available of emergency shelters and homeless services across the U.S. The study shows that different types of shelters serve various groups within the homeless population and that, in general, emergency shelters are not just temporary stopgaps but instead are sources of a much wider range of services. The authors state that shelter providers now see their mission as opening the front door to the continuum of care, so that their clients are started on a part toward stable independent living.

**Available From:** HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691, [www.huduser.org/publications/homeless/practical.html](http://www.huduser.org/publications/homeless/practical.html)

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**Order #: 7533**

**Authors:** Feins, J.D., Fosburg, L.B., Barron, C., Kay, N., Baker, D.

**Title:** **Evaluation of the Emergency Shelter Grants Program. Volume II: Site Profiles.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 1994. ( Report: 230 pages)

**Abstract:** The focus of the Emergency Shelter Grants Program (ESG) since its inception and incorporation into the McKinney Act has been to help states and localities provide facilities and services to meet the needs of homeless people, sheltering them but at the same time aiding in their transition from temporary shelter to permanent homes. This volume of the evaluation presents profiles of the 15 intensive-study sites, in order to develop a sense of how ESG-supported services and facilities fit into the larger picture of local assistance for homeless individuals and families.

**Available From:** HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691,  
<http://webstore.huduser.org/catalog/index.php?cPath=2&page=1&sort=3d> (COST: \$5.00).

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**Order #: 7534**

**Authors:** Feins, J.D., Fosburg, L.B., Locke, G.

**Title:** **Evaluation of the Emergency Shelter Grants Program. Volume III: Technical Appendices.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 1994. ( Report: 175 pages)

**Abstract:** The focus of the Emergency Shelter Grants Program (ESG) since its inception and incorporation into the McKinney Act has been to help states and localities provide facilities and services to meet the needs of homeless people, sheltering them but at the same time aiding in their transition from temporary shelter to permanent homes. This volume consists of two appendices. Appendix A contains supplementary tables corresponding to each of the Department of Housing and Urban Development's specific research questions for the evaluation. Appendix B provides detail on the sample design, survey response, and data collection methods used for the evaluation study.

**Available From:** HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691,  
<http://webstore.huduser.org/catalog/index.php?cPath=2&page=1&sort=3d> (COST: \$5.00).

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**Order #: 7532**

**Authors:** Feins, J.D., Fosburg, L.B., Locke, G.

**Title:** **Evaluation of the Emergency Shelter Grants Program. Volume I: Findings.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 1994. ( Report: 227 pages)

**Abstract:** The focus of the Emergency Shelter Grants Program (ESG) since its inception and incorporation into the McKinney Act has been to help states and localities provide facilities and services to meet the needs of homeless people, sheltering them but at the same time aiding in their transition from temporary shelter to permanent homes. This report presents an analysis of the growth and current status of the ESG, its implementation, its impacts, and recommendations to make the program more effective. The data for these analyses come from the grantee census, grantee surveys, recipient surveys, provider surveys, and site visits. Although short on data on client-level outcomes, the results of this evaluation show positive outcomes for the organizations involved in the ESG, for the facilities they operate, and for the local systems of providing aid to the homeless population.

**Available From:** HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691,  
<http://webstore.huduser.org/catalog/index.php?cPath=2&page=1&sort=3d> (COST: \$5.00).

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**Order #: 11610**

**Authors:** Fenton, W., Hoch, J., Herrell, J., Mosher, L., Dixon, L.

**Title:** **Cost and Cost-Effectiveness of Hospital vs. Residential Crisis Care for Patients Who Have Serious Mental Illness.**

**Source:** Archives General Psychiatry 59: 357-364, 2002. (Journal Article: 8 pages)

**Abstract:** This study evaluates the cost and cost-effectiveness of a residential crisis program compared with treatment received in a general hospital psychiatric unit for patients who have serious mental illness in need of hospital-level care and who are willing to accept voluntary treatment. Residential crisis programs may be a cost-effective approach to providing acute care to patients who have serious mental illness and who are willing to accept voluntary treatment. Where resources are scarce, access to needed acute care might be extended using a mix of hospital, community-based residential crisis, and community support services (authors).

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**Order #: 11636**

**Authors:** Finlayson, M., Baker, M., Rodman, L., Herzberg, G.

**Title:** **The Process and Outcome of a Multimethod Needs Assessment at a Homeless Shelter.**

**Source:** American Journal of Occupational Therapy 56(3): 313-321, 2002. (Journal Article: 9 pages)

**Abstract:** This needs assessment used literature reviews, reviews of local documents and reports, participant observation, focus groups, and reflective journals to guide the development of an occupational performance skills program at one homeless shelter in south Florida. Through these methods, the role of occupational therapy was extended beyond direct service to include program and resource development, staff education, advocacy, and staff-resident mediation. The findings of the needs assessment and the actions taken as a result of this work point to the huge potential for occupational therapists and students to work together with staff and residents of homeless shelters (authors).

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**Order #: 2544**

**Authors:** Gounis, K.

**Title:** **The Domestication of Homelessness: The Politics of Space and Time in New York Shelters.**

**Source:** New York, NY: Columbia University, 1993. (Dissertation/Thesis: 220 pages)

**Abstract:** This dissertation examines the development of the shelter system for homeless men in New York City. It is based on the author's exposure to a number of research projects that over a period of approximately six years provided access to the New York shelter system. Although emergency shelters have been the most comprehensive and enduring response to homelessness in the United States, the author suggests that shelters have emerged as a hybrid between a degraded type of public housing and a new form of "institutionalization." The author provides an ethnographically-based description of daily life in a number of New York City shelters for homeless men. The author discusses how shelter dependency emerges from the strict daily routines and rules and regulations of shelter life which appear to provide a certain amount of security for the residents that they are unable to receive out on the street (author).

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**Order #: 818**

**Authors:** Grunberg, J., Eagle, P.F.

**Title:** **Shelterization: How the Homeless Adapt to Shelter Living.**

**Source:** Hospital and Community Psychiatry 41(5): 521-525, 1990. (Journal Article: 5 pages)

**Abstract:** Emergency shelters have become the backbone of the service delivery system to the homeless. But despite the dangers of shelter living, many residents do not leave. Instead, they develop coping strategies that provide them with a feeling of mastery. This adaptation process, which the authors call "shelterization," is characterized by a decrease in interpersonal responsiveness, a neglect of personal hygiene, increasing passivity, and increasing dependency on others. The authors suggest that the shelterization process may be ameliorated by helping homeless persons establish positive social networks and affiliations with social service and mental health providers. They believe on-site psychosocial rehabilitation programs can foster such affiliation by offering a therapeutic alternative to the shelter subculture (authors).

**Order #: 13228**

**Authors:** Hendricks, S., Helmstetter, C.

**Title:** **Emergency Shelters, Transitional Housing, and Battered Women's Shelters: Data Collection Project Twelfth Annual Report.**

**Source:** St. Paul, MN: Wilder Research Center, 2003. (Report: 63 pages)

**Abstract:** This report focuses on the lack of affordable housing, resulting in the use of shelters and transitional housing. Based on a shared data collection system among shelter programs in Ramsey County, the authors conducted this annual study of usage trends including demographics, reasons leading to use of shelters, length of stay, and repeated stays. The authors state that in 2002, more than 4,000 people used emergency shelters or transitional housing, and over 1,200 women used domestic violence shelters. The authors assert that a lack of affordable housing continues to be a main reason why people use shelters. The report also states that employment/income is also a common factor in seeking shelter (authors).

**Available From:** Wilder Research Center, 1295 Bandana Boulevard North, Suite 210, St. Paul, MN 55108, (651) 647-4600, [www.wilder.org/research/reports/pdf/ramseycounty12thannual%207-03.pdf](http://www.wilder.org/research/reports/pdf/ramseycounty12thannual%207-03.pdf).

**Order #: 12098**

**Authors:** Homes for the Homeless.

**Title:** **A Shelter is Not a Home - Or Is It?**

**Source:** New York, NY: Homes for the Homeless, 2001. (Report: 4 pages)

**Abstract:** In this report, the authors discuss the fact that, despite the strong economy and decreased unemployment rates, over 600,000 families and more than one million children are homeless, living doubled-up and tripled-up, in shelters, on the streets, in cars, and on campgrounds. This report states that while it is necessary to fight homelessness by addressing low education levels and the lack of job skills, it is also important to recognize the factors that have contributed to its dramatic rise. A shortage of affordable housing, a decrease in jobs paying a living wage and welfare reform are discussed. This report argues that America's response to the crisis of family homelessness has led to an unexpected result, and it is this result that must be addressed in order to change the future of family homelessness (authors).

**Available From:** Homes for the Homeless, Institute for Children and Poverty, 36 Cooper Square, 6th Floor, New York, NY 10003, (212) 529-5252, [www.homesforthehomeless.com](http://www.homesforthehomeless.com).

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**Order #: 13401**

**Authors:** Homes for the Homeless.

**Title:** **A Shelter Is Not a Home - Or Is It?**

**Source:** New York, NY: Homes for the Homeless, 2004. (Book: 139 pages)

**Abstract:** In this book, the authors tell the story of family homelessness in New York City while highlighting what has been learned over the last twenty years. Through the exploration of the evolution of New York City's shelter system, this book discusses the permanency of shelters on the poverty landscape. The authors suggest that shelters are a surrogate for traditional low-income housing, and offer a blueprint for successfully moving families out of homelessness (authors).

**Available From:** Homes for the Homeless, Institute for Children and Poverty, 36 Cooper Square, 6th Floor, New York, NY 10003, (212) 529-5252, [www.instituteforchildrenandpoverty.org](http://www.instituteforchildrenandpoverty.org).

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**Order #: 7028**

**Authors:** Kuhn, R., Culhane, D.P.

**Title:** **Applying Cluster Analysis to Test a Typology of Homelessness by Pattern of Shelter Utilization: Results from the Analysis of Administrative Data.**

**Source:** American Journal of Community Psychology 26(2): 207-232, 1998. (Journal Article: 36 pages)

**Abstract:** This article tests a typology of homelessness using administrative data on public shelter use in New York City (1988-1995) and Philadelphia (1991-1995). Cluster analysis was used to produce three groups (transitionally, episodically, and chronically homeless) by number of shelter days and number of shelter episodes. The results showed that the transitionally homeless, who account for approximately 80% of shelter users in both cities, are younger, less likely to have mental health, substance abuse or medical problems, and to overrepresent whites relative to the other clusters. The episodically homeless, who account for 10% of shelter users, are also comparatively young, but are more likely to be non-white, and to have mental health, substance abuse and medical problems. The chronically homeless, who account for 10% of shelter users, tend to be older, non-white, and to have higher levels of mental health, substance abuse and medical problems. Despite their relatively small size, the chronically homeless consume half of the total shelter days. The authors conclude these results to suggest that program planning would benefit from application of this typology, possibly targeting the transitionally homeless with preventive and resettlement assistance, the episodically homeless with transitional housing and residential treatment, and the chronically homeless with supported housing and long-term care programs (authors).

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**Order #: 11637**

**Authors:** Kushel, M.B., Perry, S., Bangsberg, D., Clark, R., Moss, A.

**Title:** **Emergency Department Use Among the Homeless and Marginally Housed: Results from a Community-Based Study.**

**Source:** American Journal of Public Health 92(5): 778-784, 2002. (Journal Article: 7 pages)

**Abstract:** This study examined factors associated with emergency department use among people who are homeless or marginally housed. Interviews were conducted with 2578 people who were homeless and or marginally housed, and factors associated with different patterns of emergency department use were assessed in multivariate models. Findings showed that factors associated with high use rates included less stable housing, victimization, arrests, physical and mental illness, and substance abuse. Predisposing and need factors appeared to drive emergency department use. Efforts to reduce emergency department use among people who are homeless should be targeted toward addressing underlying risk factors among those exhibiting high rates of use (authors).

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**Order #: 1651**

**Authors:** Laws, G.

**Title:** **Emergency Shelter Networks in an Urban Area: Serving the Homeless in Metropolitan Toronto.**

**Source:** Urban Geography 13(2): 99-126, 1992. (Journal Article: 28 pages)

**Abstract:** A framework for analyzing the structure of urban emergency shelter networks in Toronto, Canada is proposed. The shelter and service network consists of clients, shelters, support services, and a political context shaped by state policies and community attitudes. The example of metropolitan Toronto shows that, while it might be true that there is a need for more permanent housing, there also exists a real need for emergency shelters. Patterns of repeat usage of the shelter network suggest that certain client groups might not have access to all the support services they need. The conclusions argue that urban shelter networks offer an opportunity for geographers to consider more closely the links between housing, policy, and political ideologies (author).

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**Order #: 11998**

**Authors:** Lindsey, A.T., Schneider, J.K.

**Title:** **Food and Nutrition Resource Guide for Homeless Shelters, Soup Kitchens, and Food Banks.**

**Source:** Beltsville, MD: Food and Nutrition Information Center, U.S. Department of Agriculture, 2001. (Resource Guide: 24 pages)

**Abstract:** This Resource Guide contains food and nutrition educational materials for staff and volunteers working in homeless shelters, soup kitchens, food banks, and other related facilities, and contains materials that can be used by clients. This guide is divided into two sections: educational materials for clients, and resources for staff and volunteers. Topics include general nutrition, pregnancy, breastfeeding, feeding young children, elderly menu planning, food buying, and food safety and sanitation (authors).

**Available From:** Food and Nutrition Information Center, U.S. Department of Agriculture, 10301 Baltimore Avenue, Room 105, Beltsville, MD 20705, (301) 504-5719, [www.nal.usda.gov/fnic/pubs/bibs/gen/homeold.html](http://www.nal.usda.gov/fnic/pubs/bibs/gen/homeold.html).

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**Order #: 10163**

**Authors:** Majka, G.

**Title:** **A Case Management, Education, and Prevention Program at a Small Emergency Shelter for Homeless Men: One Nurse's Experience.**

**Source:** Journal of Emergency Nursing 27(3): 2001. (Journal Article: 5 pages)

**Abstract:** In this article Gene Majka describes his experiences working in a small emergency shelter for homeless men. It started out as a 100 hour practicum in a graduate cultural diversity class at DePaul, for which he had to select an unfamiliar group of people who were medically underserved. The author is now servicing this shelter full time. He presently runs the shelter's health care case management program. He has finished his graduate studies as an adult nurse practitioner and hopes to obtain a collaborative agreement with a physician to provide a wider range of primary services for the men at the shelter. He is also working with the shelter staff on a proposal for a homeless respite program, which would include having a 24-hour place (possibly an apartment) for the homeless who are in between hospital discharge and the shelter and need a place to recover.

**Available From:** Gene Majka, RN, MSN, ANP, 6453 North Minnehaha Avenue, Chicago, IL 60646, [rocn100@ameritech.net](mailto:rocn100@ameritech.net).

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**Order #: 12750**

**Authors:** Marcus, A.

**Title:** **Shelterization Revisited: Some Methodological Dangers of Institutional Studies of the Homeless.**

**Source:** Human Organization 62(2): 134-142, 2003. (Journal Article: 8 pages)

**Abstract:** This article revisits one of the key discussions that emerged during the homeless crisis of the 1980s and early 1990s, that of shelterization, or the potentially demoralizing and desocializing effects of congregate emergency housing. Many of the fundamental assumptions underlying Goffman's total institution model that drove the shelterization discussion continue to influence research and policy. This model's tendency to abstract shelter life from the surrounding environment, overemphasize the impact of shelters on the behavior of residents, and explain the persistence of homelessness through reference to the psychosocial effects of shelter norms is examined and situated within the confluence of the growth of a shelter system in New York City in the 1980s, the expansion of federal funding through the 1987 McKinney Act, and shared experience of researchers projecting and generalizing on their own experiences working in shelters. Examination of some of the methodological, theoretical, and political problems connected to institutional studies of the homeless during the 1980s and early 1990s will contribute to contemporary homeless policy and research that avoids overemphasizing the importance of the psychosocial and behavioral impact of shelters (authors).

**Order #: 11614**

**Authors:** Metraux, S., Culhane, D., Raphael, S., White, M., Pearson, C., Hirsch, E., Ferrell, P., Rice, S., Ritter, B., Cleghorn, J.S.

**Title:** **Assessing Homeless Population Size Through the Use of Emergency and Transitional Shelter Services in 1998: Results from the Analysis of Administrative Data from Nine U.S. Jurisdictions.**

**Source:** Public Health Reports 116(4): 344-352, 2001. (Journal Article: 9 pages)

**Abstract:** This study reports findings from the first-ever systematic enumeration of homeless population size using data previously collected from administrative records of homeless services providers in nine jurisdictions over a one year period. It provides the basis for establishing an ongoing measure of the parameters of the homeless population and for tracking related trends on the use of homeless services over time. Each participating jurisdiction collected data through its homeless services management information systems for persons and families who use emergency shelter and transitional housing. The jurisdictions organized the data by a standardized reporting format. These data form the basis for reporting homeless population size, both in raw numbers and as adjusted for each jurisdiction's overall population size, as well as the rate of turnover and average annual length of stay in emergency shelters and transitional housing. Results are broken down for adults and families. The prevalence of homelessness varies greatly among the jurisdictions included in this study, and possible factors for this diversity are discussed (authors)

**Order #: 12740**

**Authors:** Metraux, S., Marcus, S., Culhane, D.

**Title:** **The New York-New York Housing Initiative and Use of Public Shelters by Persons with Severe Mental Illness.**

**Source:** Psychiatric Services 54(1): 67-71, 2003. (Journal Article: 5 pages)

**Abstract:** This article examines changes in the use of shelters in New York City by mentally ill persons with a history of homelessness who received housing placements through the New York-New York (NY/NY) housing initiative between 1990 and 1999 and the impact of the initiative on the overall demand for shelter beds in the city. The authors assert that heavy users of the shelter system were more likely to be placed in NY/NY housing. The article concludes that providing housing combined with mental health services is an effective approach to reducing shelter among mentally ill persons who have a history of homelessness (authors).

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**Order #: 13607**

**Authors:** Min, S., Wong, Y., Rothbard, A.

**Title:** **Outcomes of Shelter Use Among Homeless Persons With Serious Mental Illness.**

**Source:** Psychiatric Services 55(3): 284-289, 2004. (Journal Article: 6 pages)

**Abstract:** This article examines the extent to which the use of case management services predicted public shelter use among homeless persons with serious mental illness after the termination of Access to Community Care and Effective Services and Supports (ACCESS), a five-year outreach and case management program. The authors assert that individuals who are homeless with serious mental illness who were younger, were African American, had fewer years of schooling, and had longer shelter stays during the ACCESS intervention period were more likely to enter shelters in the twelve months after the ACCESS program ended. The article also states that although use of vocational and supportive services was associated with a lower probability of shelter entry, use of housing assistance was associated with a higher probability of shelter entry. The authors found that the total number of case management service contacts was not significantly associated with residential outcomes, rather, the use of specific types of services was important in reducing the use of homeless shelters. The article concludes that case management efforts should focus on developing vocational and psychosocial rehabilitation services to reduce the risk of recurrent homelessness among persons with serious mental illness (authors).

**Order #: 7295**

**Authors:** Mosher-Ashley, P., Henrikson, N.

**Title:** **Shelter-Based Services in Massachusetts for Homeless Adult Individuals.**

**Source:** Social Work in Health Care 26(2): 15-32, 1997. (Journal Article: 18 pages)

**Abstract:** A statewide survey, conducted in Massachusetts of the emergency shelters for homeless individuals, found that most of the shelters provided a range of services in addition to a bed. The most common of these were food, clothing, and referral for more permanent housing and information on employment opportunities. The majority of shelters also offered mental health services and medical care. Most mental health services were provided in-house but less than half of the shelters provided medical care in-house. Other shelters referred residents to health care sites in the community. Shelters that relied on staff from other community agencies, the most common arrangement, to provide medical care in-house, allocated the least amount of overall time to health services. Shelters with medical personnel on staff averaged the most. Smaller shelters tended to provide little if any in-house medical care. The need to advocate for greater in-house medical services in small shelters and hiring staff, who are trained certified nursing assistants, are discussed (authors).

**Order #: 13592**

**Authors:** New York City Family Homelessness Special Master Panel.

**Title:** **Report on the Emergency Assistance Unit and Shelter Eligibility Determination.**

**Source:** New York, NY: Citizens' Committee for Children of New York, 2004. (Report: 408 pages)

**Abstract:** This report concerns the Emergency Assistance Unit (EAU), the city's intake facility for homeless families seeking shelter, and contains the panel's findings and recommendations regarding shelter application, shelter eligibility determination, and shelter placement, including overnight placements. The recommendations in the report are presented in their entirety and represent an integrated, systematic, and flexible approach to addressing longstanding concerns about the EAU (authors).

**Available From:** Citizens' Committee for Children of New York, 105 East 22 Street, New York, NY 10010, (212) 673-1800, [www.kfny.org/publications/SMP%20EAU%20and%20SED2.pdf](http://www.kfny.org/publications/SMP%20EAU%20and%20SED2.pdf)

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**Order #: 8515**

**Authors:** Office of Inspector General.

**Title:** **Emergency Shelters for Homeless Families.**

**Source:** Washington, DC: U.S. Department of Health and Human Services, Office of Inspector General, 1992.  
(Report: 31 pages)

**Abstract:** This report assess the quality of living conditions and services in emergency shelters for homeless families. The report also discusses its findings on shelter environment, shelter services, income and benefits, factors affecting homelessness, availability of and access to shelters, and recommendations for the future.

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**Order #: 1161**

**Authors:** Padgett, D.K., Struening, E.L.

**Title:** **Influence of Substance Abuse and Mental Disorders on Emergency Room Use by Homeless Adults.**

**Source:** Hospital and Community Psychiatry 42(8): 834-838, 1991. (Journal Article: 5 pages)

**Abstract:** The correlation between substance abuse, mental health problems and use of emergency rooms was examined using data from a 1987 survey of 1,152 homeless adults in New York City shelters. Twenty-seven percent reported emergency room use within the previous six months, with traumatic injury being the most frequently cited reason for the last emergency room visit. Respondents who reported psychotic ideation during the previous year or severe depressive symptoms during the previous week were much more likely to have used an emergency room within the previous six months. The preliminary findings suggest that substance abuse and mental disorders play a significant role in emergency room use by homeless adults (authors).

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**Order #: 3374**

**Authors:** Padgett, D.K., Struening, E.L., Andrews, H., Pittman, J.

**Title:** **Predictors of Emergency Room Use By Homeless Adults in New York City: The Influence of Predisposing, Enabling and Need Factors.**

**Source:** Social Science and Medicine 41(4): 547-556, 1995. (Journal Article: 12 pages)

**Abstract:** This study examined predictors of emergency room use among homeless adults by employing data from a 1987 shelter survey of 1260 homeless adults in the New York City shelter system. Findings indicate that health symptoms and injuries were strong predictors of emergency room use for men and women, but other significant predictors differed markedly by gender. A high prevalence of victimization and injuries underlies emergency room use among homeless men and women. Based on the findings, the authors suggest expanding health and victim services as well as developing preventive measures (authors).

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**Order #: 7729**

**Authors:** Proscio, T.

**Title:** **Under One Roof: Lessons Learned from Co-Locating Overnight, Transitional, and Permanent Housing at Deborah's Place II.**

**Source:** New York, NY: Corporation for Supportive Housing, 1998. (Report: 19 pages)

**Abstract:** This case study examines lessons learned from Deborah's Place II, which combines three levels of care at one site with the aim of allowing homeless single women with mental illness to move toward independence without losing necessary supports. The report examines both the model's promise as well as its potential difficulties, and is a resource for nonprofits concerned with developing service enriched housing for people who have been homeless and also cope with psychiatric and medical disabilities. Five main conclusions are reached in the case study: co-location can work for a small but significant percentage of homeless single adults; evidence is inconclusive as to whether this model provides a means for smooth movement among different levels of care and a significant increase in the odds of moving long-term shelter residents into permanent housing; the greatest difficulty in integrating three levels of housing and services seems to arise from the presence of an emergency shelter; providing adequate space for common areas can ease a number of potential tensions; and permanent units should be planned with higher-functioning tenants in mind, even though some of the intended tenants may not be ready for that level of independence.

**Available From:** Corporation For Supportive Housing, 50 Broadway, 17th Floor, New York, NY 10173, (212) 986-2966, www.csh.org (COST: \$5.00).

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**Order #: 11113**

**Authors:** Salize, H.J., Horst, A., Dillmann-Lange, C., Killmann, U., Stern, G., Wolf, I., Henn, F., Rossler, W.

**Title:** **Needs for Mental Health Care and Service Provision for Single Homeless People.**

**Source:** Social Psychiatry and Psychiatric Epidemiology 36(4): 207-216, 2001. (Journal Article: 10 pages)

**Abstract:** This article describes a study developed to address specific problems in sampling methodology, case-finding strategies, and standardized needs assessment in people who are homeless with mental illness; all of which have contributed to their being neglected as a mental health care clientele. Results of this study suggest that the traditional shelter system for people who are homeless carries most of the mental health care burden for their clientele and must be supported by adequate interventions from community-based mental health care services. A closer connection of both sectors and a better coordination of the care offers seems to be a prerequisite for helping to reduce unmet mental health care needs in this specific high-risk group (authors).

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**Order #: 8077**

**Authors:** Shelter Project.

**Title:** **The Shelter Project: Direct Client Services - 1998.**

**Source:** Santa Cruz, CA: Community Action Board of Santa Cruz County, Inc., 1999. (Report: 19 pages)

**Abstract:** This report documents the number of people served by four programs administered by The Shelter Project: shelter for homeless people with medical emergencies; rental assistance to prevent eviction; voice mail service for homeless people; and a shelter hotline referring homeless people to services in the greater Santa Cruz County area. The report indicates an increase from the previous year in the number of single mothers requesting help with emergency shelter and rental assistance to prevent eviction. Calls from women requesting assistance increased 38%, with overall calls for emergency shelter increasing 27% and rental assistance requests increasing 47.5%.

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**Order #: 2460**

**Authors:** Trinity, F.R.

**Title:** **Shutting the Shelter Doors: Homeless Families in the Nation's Capital.**

**Source:** Stetson Law Review 23(2): 401-428, 1994. (Journal Article: 27 pages)

**Abstract:** This article documents the efforts of homeless families in Washington, D.C., to obtain emergency shelter through legal action. According to the author, from 1986 to 1990, the number of homeless families entering the District of Columbia's shelter system increased by approximately 400%, yet the District made deep cuts in its shelter budget. Because of this and other legalities, the District required homeless families to provide the intake personnel with exhaustive documentation of their eligibility for shelter. This meant that many families were turned away. In an effort to break the impasse at the family shelter intake office, in August 1992 homeless families and advocates filed a class action lawsuit in federal district court. The complaint alleged violations of a host of rights set forth in federal and local statutes, as well as rights protected by the United States Constitution. As a result, previous erroneous denials of shelter were reversed through administrative appeals, while other mishandlings of applications were corrected through informal advocacy. However, despite the class action law suit, many homeless families are still denied shelter in the District of Columbia (author).

**Order #: 10406**

**Authors:** United States Census Bureau.

**Title:** **Emergency and Transitional Shelter Population: 2000.**

**Source:** Washington, DC: U.S. Census Bureau, 2001. (Report: 24 pages)

**Abstract:** In this report, the population in emergency and transitional shelters were counted on March 27, 2000, and include the following facilities: emergency shelters (with sleeping facilities); shelters for children who are runaways, neglected or without conventional housing; transitional shelters for people without conventional housing; and hotels and motels used to provide shelter for people without conventional housing. Shelters for abused women (or shelters against domestic violence) are not included. Data are shown in the report for the emergency and transitional shelter population, but not separately by type of facility. The Census Bureau stressed that the shelter figures do not constitute and should not be construed as a tabulation of the total population without conventional housing or "people experiencing homelessness." Not all people without conventional housing on March 27, 2000, resided at shelters. Some may have "doubled up" at housing units owned or rented by friends or relatives or found other nonshelter locations that night. Since the shelters were visited only one night, only the people residing at shelters open that night would have been enumerated (authors).

**Available From:** U.S. Census Bureau, Public Information Office, 4700 Silver Hill Road, Washington, DC 20233, (301) 763-3030, [www.census.gov/prod/2001pubs/censr01-2.pdf](http://www.census.gov/prod/2001pubs/censr01-2.pdf).

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**Order #: 13054**

**Authors:** United States Conference of Mayors.

**Title:** **Hunger and Homelessness Survey: A Status Report on Hunger and Homelessness in America's Cities 2003.**

**Source:** Washington, DC: United States Conference of Mayors, 2003. (Report: 115 pages)

**Abstract:** In this report the authors assess the status of hunger and homelessness in America's cities. The U.S. Conference of Mayors surveyed 30 major cities whose mayors were members of its Task Force on Hunger and Homelessness. The survey sought information and estimates from each city on the demand for emergency food assistance and emergency shelter and the capacity of local agencies to meet that demand; the causes of hunger and homelessness and the demographics of the populations experiencing these problems; exemplary programs or efforts in the cities to respond to hunger and homelessness; the availability of affordable housing for low income people; and the outlook for the future and the impact of the economy on hunger and homelessness (authors).

**Available From:** United States Conference of Mayors, 1620 Eye Street, NW, Washington, DC 20006, (202) 293-7330, [www.usmayors.org/uscm/home.asp](http://www.usmayors.org/uscm/home.asp)

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**Order #: 11864**

**Authors:** United States Conference of Mayors.

**Title:** **A Status Report on Hunger and Homelessness in America's Cities 2002.**

**Source:** Washington, DC: The United States Conference of Mayors, 2002. (Report: 141 pages)

**Abstract:** This survey found that as housing costs continued to rise faster than incomes and the national economy remained weak, requests for emergency food assistance increased an average of 19 percent over the past year. The survey also found that requests for emergency shelter assistance grew an average of 19 percent in the 18 cities that reported an increase, the steepest rise in a decade. The report also announced a call to action to the Administration, Congress, state and local governments, the private and non-profit sectors, and all Americans to do their part to address growing hunger and homelessness. Specifically, to immediately consider and build upon the President's request for aid to the homeless, as part of a comprehensive effort to end homelessness within ten years; to enact a national housing agenda, based on the recommendations mayors submitted earlier this year, which would put tens of thousands of Americans to work; to streamline federal anti-hunger programs and provide additional outreach resources; and to donate time, money, and excess food to help combat hunger and homelessness.

**Available From:** United States Conference of Mayors, 1620 I Street NW, Washington, DC, 20006, [www.usmayors.org/uscm/hungersurvey/2002/onlinereport/HungerAndHomelessReport2002.pdf](http://www.usmayors.org/uscm/hungersurvey/2002/onlinereport/HungerAndHomelessReport2002.pdf)

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**Order #: 150**

**Authors:** United States Department of Health and Human Services.

**Title:** **Sheltering and Feeding the Homeless: A Resource Guide for Communities.**

**Source:** Washington, DC: U.S. Department of Health and Human Services, undated. (Brochure: 8 pages)

**Abstract:** This brochure describes the efforts of the Department of Health and Human Services' Interagency Task Force in responding to the food and shelter needs of homeless people, including: emergency shelter assistance, food program assistance, ways to access Federal resources, and section on information and technical assistance, which includes a directory of Federal centers to contact for the establishment of service programs in different regions of the country. The brochure describes the composition of homeless people as those who are chronically mentally ill, migrants, unemployed persons, immigrants, battered women, alcoholics, and drug abusers.

**Available From:** U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Washington, DC 20201, (202) 619-0257, [www.hhs.gov](http://www.hhs.gov).

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**Order #: 2808**

**Authors:** United States Department of Housing and Urban Development.

**Title:** **Evaluation of the Supplemental Assistance for Facilities to Assist the Homeless Program.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 1994. (Report: 118 pages)

**Abstract:** The McKinney Act of 1987 authorized the Supplemental Assistance for Facilities to Assist the Homeless (SAFAH) Program to support local homeless programs and projects. In SAFAH's first two funding rounds, fiscal years 1987 and 1990, the Department of Housing and Urban Development (HUD) awarded 65 grants totaling \$25.8 million. This report examines how grantees chose to use this program: What kinds of facilities and activities were funded? What services were provided to clients? The report also examines program outcomes: What kinds of clients did the program assist? How many clients served by emergency shelters or transitional housing went on to obtain permanent housing?

**Available From:** HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691, [www.huduser.org](http://www.huduser.org). (COST: \$15.00)

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**Order #: 12848**

**Authors:** United States Department of Housing and Urban Development.

**Title:** **Emergency Shelter Grants Deskguide.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 2001. (Guide: 112 pages)

**Abstract:** This guide provides an overview of the Emergency Shelter Grants (ESG) program, describes the funding process, and covers topics including the initial application, grant administration, project implementation, and performance monitoring. Where possible, the guide includes concrete examples of promising administrative practices from ESG programs around the country. This guide is not a substitute for the ESG regulations, but provides a practical resource that addresses many of the common questions and issues that arise in the implementation of a local ESG project (authors).

**Available From:** U.S. Department of Housing and Urban Development, 451 Seventh Street, SW, Washington, DC 20410, (202) 708-1112, [www.hud.gov/offices/cpd/homeless/library/esg/esgdeskguide/index.cfm](http://www.hud.gov/offices/cpd/homeless/library/esg/esgdeskguide/index.cfm)

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**Order #: 12849**

**Authors:** United States Department of Housing and Urban Development.

**Title:** **Homeless Prevention in the Emergency Shelter Grants Program.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 2001. (Brochure Conferen: 19 pages)

**Abstract:** This brochure provides information about homeless prevention efforts within the Emergency Shelter Grants (ESG) program, and highlights some specific homeless prevention strategies employed by ESG grantees and the agencies (recipients) that operate ESG projects. The Emergency Shelter Grants program provides homeless persons with basic shelter and essential supportive services. It can assist with the operational costs of the shelter facility, and for the administration of the grant. ESG also provides short-term homeless prevention assistance to persons at imminent risk of losing their own housing due to eviction, foreclosure, or utility shutoffs (authors).

**Available From:** U.S. Department of Housing and Urban Development, 451 Seventh Street SW, Washington, DC 20410, (202) 708-1112, [www.hud.gov/offices/cpd/homeless/library/esg/esgprevention2.PDF](http://www.hud.gov/offices/cpd/homeless/library/esg/esgprevention2.PDF)

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**Order #: 2923**

**Authors:** United States Department of Housing and Urban Development.

**Title:** **Review of Stewart B. McKinney Homeless Programs Administered by HUD: Report to Congress.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development, 1995. (Report: 45 pages)

**Abstract:** This report synthesizes the findings of six evaluations of homeless programs authorized under the Stewart B. McKinney Act of 1987 and administered by the Department of Housing and Urban Development (HUD). The report responds to the congressional mandate that HUD conduct a comprehensive review and evaluation of each program it administers under Title IV of the McKinney Act. The six programs reported on include: Emergency Shelters Grants Programs (ESG); Supportive Housing Demonstration Program (SHDP); Section 8 Moderate Rehabilitation for SROs; Shelter Plus Care; Supplemental Assistance to Facilities to Assist the Homeless (SAFAH); and Single Family Property Disposition Initiative (SFPDI). The principal conclusion of the report is that McKinney programs should be simplified and consolidated.

**Available From:** HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691, www.huduser.org. (COST: \$15.00)

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**Order #: 6140**

**Authors:** United States General Accounting Office.

**Title:** **Homelessness: McKinney Act Programs Provide Assistance but are Not Designed to be the Solution.**

**Source:** Washington, DC: U.S. General Accounting Office, 1994. (Report: 70 pages)

**Abstract:** This report examines: the difference the McKinney Act programs have made in selected cities' efforts to assist people who are homeless; what problems the cities have experienced with the McKinney Act programs; and what directions the cities' programs for people who are homeless are taking and what gaps the McKinney Act programs may fill. In the four cities studied-- Baltimore, St. Louis, San Antonio, and Seattle-- local officials said the McKinney Act programs were a small but important source of funds for assisting people who are homeless. Officials credited the programs with providing resources to expand and improve existing emergency services, develop longer-term housing options that offer social services, and assist homeless people who have mental illnesses or have substance abuse problems. An executive summary is included. Separate reports for each of the cities' are also included.

**Available From:** U.S. General Accounting Office, 441 G Street, NW, Washington, DC 20548, (202) 512-4800, (#: RCED-94-37)

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**Order #: 1375**

**Authors:** United States General Accounting Office.

**Title:** **Homelessness: HUD's and FEMA's Progress in Implementing the McKinney Act.**

**Source:** Washington, DC: U.S. General Accounting Office, 1989. (Report: 136 pages)

**Abstract:** The Stewart B. McKinney Homeless Assistance Act of 1987 authorized funding for several federal homeless assistance programs. The act required the General Accounting Office (GAO) to evaluate the disbursement and use of the \$377 million appropriated to the Department of Housing and Urban Development (HUD) and the Federal Emergency Management Agency (FEMA) for fiscal years 1987 and 1988 and to issue two reports. GAO's first report, in December 1987, dealt with the implementation of the food and shelter programs under the McKinney Act. This, GAO's second report, discusses the status and impact of the programs, program administration, and related issues. Much of the information included in this report was provided to key legislative committees for their use during 1988 reauthorization hearings. This report also summarizes the results of GAO's survey of FEMA's 1987 Emergency Food and Shelter Program grantees and provides a nationwide perspective on the causes of homelessness, services delivered, and clients served.

**Available From:** U.S. General Accounting Office, 441 G Street, NW, Washington, DC 20548, (202) 512-4800. (Order #RCED-89-50).

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**Order #: 1374**

**Authors:** United States General Accounting Office.

**Title:** **Homelessness: Implementation of Food and Shelter Programs Under the McKinney Act.**

**Source:** Washington, DC: U.S. General Accounting Office, 1987. (Report: 40 pages)

**Abstract:** The Stewart B. McKinney Homeless Assistance Act, passed in July 1987, authorized over \$400 million for fiscal year 1987 in homeless assistance funds for several federal programs. While the act directed the General Accounting Office (GAO) to report in 1987 and 1988 on the disbursement and use of the funds appropriated to the Department of Housing and Urban Development (HUD) and the Federal Emergency Management Agency (FEMA) under the act, implementation of the programs was only beginning. Thus, GAO's 1987 report: examines how HUD and FEMA funds for the homeless were used before the act; describes actions taken pursuant to the act; and identifies issues concerning the act's implementation that may warrant more detailed examination in the 1988 report.

**Available From:** U.S. General Accounting Office, 441 G Street, NW, Washington, DC 20548, (202) 512-4800. (Order #RCED-88-63)

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**Order #: 7484**

**Authors:** Valencia, E., Susser, E., Torres, J., Felix, A., Conover, S.

**Title:** **Critical Time Intervention for Homeless Mentally Ill Individuals in Transition from Shelter to Community Living.**

**Source:** In Breakey, W.R. and Thompson, J.W. (eds.), *Mentally Ill and Homeless: Special Programs for Special Needs*. Amsterdam, The Netherlands: Harwood Academic Publishers, 75-94, 1997. (Book Chapter: 20 pages)

**Abstract:** Critical Time Intervention (CTI) was designed to prevent homelessness among individuals suffering from severe mental illnesses by stabilizing them in the period of transition to living in the community. CTI was tested in a randomized clinical trial between 1990 and 1994 at the Columbia-Presbyterian Mental Health Program for Homeless Individuals at the Fort Washington shelter for men in New York City. Preliminary analysis of the results indicated that the intervention is effective in reducing recurrent homelessness among mentally ill individuals. The authors conclude that if the final results confirm its effectiveness, CTI could be implemented in many programs for mentally ill individuals who are homeless (authors).

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**Order #: 10282**

**Authors:** Vamuakas, A., Rowe, M.

**Title:** **Mental Health Training in Emergency Homeless Shelters.**

**Source:** *Community Mental Health Journal* 37(3): 287-295, 2001. (Journal Article: 9 pages)

**Abstract:** The prevalence of mental illness among homeless persons points to the importance of providing mental health training to emergency shelter staff. The authors report on their own work and argue that such training offers the potential to significantly improve shelter staff's ability to respond to the needs of shelter residents with mental illness, and to the behavioral problems some of these individuals may pose for shelter operation. Mental health care providers should take into consideration organizational dynamics when planning and implementing such training.

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**Order #: 7011**

**Authors:** Wong, Y.I., Culhane, D.P., Kuhn, R.

**Title:** **Predictors of Exit and Re-Entry Among Family Shelter Users in New York City.**

**Source:** Social Service Review 71(3): 441-462, 1997. (Journal Article: 36 pages)

**Abstract:** This study explores the process of exit from and re-entry to public family shelters for homeless families in New York City. Based on eight years of administrative data on public shelter utilization among homeless families from New York City, the study identified the effects of demographic, family structure, reason for homelessness, and time-related variables for different types of shelter discharge and shelter re-entry. The study specifically explored the significance of type of housing placement as a predictor variable for shelter re-entry. Findings indicated that various demographic and family structure attributes are linked with shelter exit and re-entry, including race/ethnicity, family size, age of family head, pregnancy status, and public assistance reciprocity status. Findings also indicated that procurement of subsidized housing is associated with substantially lower probability of shelter readmission. Policy implications of these findings and future direction for research on the dynamics of family homelessness are discussed (authors).