Communities and organizations that provide services for homeless families increasingly are adopting structured tools that assess a family’s needs at the time the family experiences a housing crisis and that assess the barriers to achieving stable housing the family may face. The use of a standardized assessment tool was mandated by the U.S. Department of Housing and Urban Development (HUD) in its implementation of the Rapid Re-housing for Homeless Families Demonstration (RRHD) program, and, therefore, the evaluation of the RRHD provided an opportunity to learn about the characteristics of assessment tools and their implementation by the 23 communities across the nation that were awarded RRHD grants. HUD mandated the use of an assessment tool because the legislative purpose of RRHD was to serve families with “moderate barriers” to housing. HUD’s grant announcement further specified that families served by RRHD “are expected to independently sustain housing, either subsidized or unsubsidized, at the end of the leasing subsidy. Therefore, it is crucial that households are properly assessed.”

The RRHD evaluation team found that assessment tools are used for several purposes in RRHD communities. They are used (1) to screen families for admission to a particular program, (2) as part of an intake system in which families are triaged into the program that best fits the families’ needs among those programs with availability, and (3) as the basis of goal-setting and development of service plans for individual families. When a community

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1 Abt Associates, Inc.
About the Rapid Re-housing for Homeless Families Demonstration and Its Evaluation

In 2007, Congress appropriated $23.75 million for the Rapid Re-housing for Homeless Families Demonstration (RRHD) program. The U.S. Department of Housing and Urban Development (HUD) awarded grants to 23 Continuums of Care, or CoCs, through its 2008 annual competition for McKinney-Vento homeless assistance funding. The legislation specified that the program was intended to serve families with “moderate barriers” to housing who could independently sustain housing, either subsidized or unsubsidized, at the end of the leasing subsidy that they received through RRHD.

HUD commissioned Abt Associates Inc. to conduct an evaluation of RRHD. The evaluation included site visits to all 23 communities to learn about their program models. The evaluation also tracked a cohort of families served in RRHD programs and attempted to conduct an interview with the family head approximately 12 months after program exit. The site visits and further work with the RRHD communities during the tracking process have produced in-depth information about the ways communities organize and implement their homeless services systems for families.

For more information about the study, contact Anne Fletcher at anne.l.fletcher@hud.gov or at 202-402-4347, or contact Brooke Spellman at brooke_spellman@abtassoc.com or at 301–634–1816.

Communities need to define three primary elements when designing coordinated assessment systems: (1) clear points of access, (2) a tool and process for conducting standardized assessments of people’s housing and service needs, and (3) protocols for making appropriate referrals based on the assessments. This research brief describes observations from the RRHD evaluation related to the second element—a tool and process for conducting standardized assessments of people’s housing and service needs. A separate research brief—Rapid Re-housing for Homeless Families Demonstration: The Role of Centralized Intake—addresses observations related to the first and third elements—access and referral protocols.

selects among existing assessment tools, or chooses to design a custom tool, it needs to consider the purpose or purposes for which the tool will be used. The elements of the tool and its application must also reflect the programmatic and policy context for the use of the tool. For example, the factors that a community needs to consider in the tool depend on the program options provided within the community. If the community has developed a consensus around a “housing first” philosophy that aims to place families immediately in housing, the tool may focus solely on housing barriers.

The content of the assessment tool used in each community and the way in which the elements of the tool were scored sometimes unintentionally resulted in some programs being much more selective with admissions than others.
Types of Assessment Tools That RRHD Communities Used

RRHD programs varied significantly in the types of tools they use to guide decisions regarding the appropriateness of a particular family for the RRHD program. Of the 23 RRHD programs, 6 used variations of the Self-Sufficiency Matrix originally developed and tested in Arizona. The Arizona Self-Sufficiency Matrix was tailored for each site by adding more domains or assessment areas, modifying the criteria associated with scores within some domains, or selecting a smaller number of domains to include in assessments. Of the 23 RRHD programs, 9 use standardized, locally developed screening tools with explicit scoring criteria. In both cases, the tools prompt program staff to rate each family, sometimes with family input, on multiple domains based on standardized rating definitions. The scores on the various domains are then combined to create a global score leading to an RRHD referral or enrollment decision.

The other 8 RRHD programs used implicit assessment and selection criteria—meaning less formally articulated criteria, with more room for interpretation by the staff conducting the intake interview or reviewing intake documentation. Several programs that used interview-oriented assessment tools also used a Self-Sufficiency Matrix as part of their assessment process, but the information gathered with the matrix was used only for case planning purposes and not to form scores to decide whether families were appropriate for RRHD.

Domains Covered by Assessment Tools

Several domains figure strongly in all standardized assessment tools used by the 15 RRHD programs that employed explicit scoring criteria. Income is assessed and rated in all 15 tools. Employment, rental history, criminal background, mental health, and substance abuse are domains in at least 12 of the 15 tools.

Some programs that use a standardized assessment tool include a large number of topic areas or domains. For example, they include domains like parenting skills, life skills, childcare arrangements, children’s school attendance, and the use of public benefit programs such as Medicaid and the Supplemental Nutrition Assistance Program, or SNAP (food stamps).

Other programs use a narrow subset of the domains in their adaptation of the Arizona Self-Sufficiency Matrix or in a locally developed screening tool. They focus on the domains most directly relevant to a family’s potential for maintaining housing, increasing household income, managing expenses and debts, or obtaining other, ongoing sources of rental assistance, if needed.

Six RRHD Programs Used a Variant of the Arizona Self-Sufficiency Matrix

- Anchorage, Alaska
- Denver, Colorado
- Kalamazoo/Portage, Michigan
- Montgomery County, Maryland
- Ohio Balance-of-State
- Overland Park, Kansas

Nine RRHD Programs Used a Locally Developed Standardized Screening Tool With Explicit Criteria

- Cincinnati, Ohio
- Dayton, Ohio
- District of Columbia
- Madison, Wisconsin
- New Orleans, Louisiana
- Phoenix, Arizona
- Portland, Oregon
- Trenton, New Jersey
- Washington Balance-of-State
Programs that adapted the Arizona Self-Sufficiency Matrix to focus on fewer domains and domains with the most direct relevance to housing retention seemed to accept families with higher barriers because they did not penalize families for barriers that did not directly affect housing placement and they have developed targeted strategies to mitigate the other identified barriers. These communities also established a range of scores to indicate whether a family was appropriate for RRHD rather than establishing a flat cutoff score. Families who had scores above the identified range are referred for less-intensive assistance than the package offered by the RRHD program, and those who scored below the range were referred for more-intensive assistance.

How Programs Use the Assessment Tools To Screen Families for RRHD

Despite similarities in the names of domains on different assessment tools, RRHD programs define domains differently; for example, screening for criminal history did not always mean the same thing from one RRHD program to another. Programs with more restrictive criteria used assessment tools that asked whether a family had any prior evictions or any history of treatment or hospitalization for mental health or substance use problems, while programs with less restrictive criteria focus on whether multiple prior evictions took place, if the applicant had recent substance abuse problems, or if the applicant had problems that currently interfere with functioning or the ability to work. Similarly, some programs considered any history of arrest or conviction in their screening criteria, while others focused on criminal history related to restrictions on eligibility for assisted-housing programs, felony convictions involving drugs or violence, recent or frequent incarcerations, or any convictions within the past 12 months.

Programs that used less restrictive definitions tended to focus on recent experiences that might directly affect a family’s ability to access housing. For example, these programs were less likely to consider a family’s use of food stamps, Medicaid, or subsidized childcare as an indicator that the family would not likely become self-sufficient. Instead, some programs used the assessment to focus on whether the lack of health insurance or reliable childcare was an obstacle to a parent’s employment that could be met as part of the RRHD program.

Programs that used more restrictive definitions of domains also tended to use scoring methods that were more selective and screened out families with higher access barriers. For example, five programs specified a cutoff score, indicating a minimum level of self-sufficiency that families must meet before the program would accept them. In contrast, seven RRHD programs specified a range of acceptable scores. Instead of establishing a cutoff score above which families were eligible, these programs sought to enroll families with scores that were within a range, in effect, screening out families who were more self-sufficient—those who had fewer barriers—who would have been screened in using a cutoff-score approach. Communities that established both upper and lower bounds on scores for purposes of selecting families for RRHD generally had identified other forms of assistance for families with scores that were outside the range, such as assistance less intensive than RHDD for those families with higher scores and transitional or permanent supportive housing for those with lower scores.

Some programs were very clear about using RRHD to serve a very small subset of high-functioning homeless families with high levels of self-sufficiency and very few barriers. These programs often screened out families with
more than one episode of homelessness or parents without full-time work or enrollment in a training program that was very likely to lead to employment at a good wage.

The RRHD programs took different approaches to address the expectation that families would be able to independently sustain housing after they are re-housed in subsidized or unsubsidized housing. A few programs offered RRHD to families who were likely to face ongoing financial challenges. These programs worked to get families into housing quickly, while linking them to other ongoing rent subsidies that would enable the families to keep their housing after the time-limited assistance from the RRHD program ended. Other programs selected only families who were likely to be able to sustain unsubsidized housing after receiving support from RRHD. More selective programs often assumed that families with household incomes at less than 30 percent of Area Median Income would not be able to secure and sustain affordable housing after program participation concludes, especially when the program identified other barriers such as poor credit, unpaid medical or phone bills, and money owed to a utility company or landlord.

A few RRHD programs chose to enroll families with more significant challenges, including prior evictions, felony convictions, or terrible credit reports, despite the extra effort it takes to find housing for families with these red flags. These programs identified and built relationships with landlords who were willing to accept their families as tenants if (1) the parent completes a ready-to-rent class or similar training that covers the responsibilities of tenancy and (2) the RRHD program committed to providing ongoing support services, close monitoring of rental payments, and regular communication with landlords to troubleshoot any problems that might arise. These programs used assessment tools to identify issues that would need to be addressed to house families and provide the supports they need to succeed in housing, rather than using the tools to screen families out because of these challenges.

Why Are Some RRHD Programs More Selective?

RRHD program representatives provided several reasons why they adopted more selective screening criteria and procedures.

Size of RRHD Program. Some RRHD programs had the capacity to serve only a very small number of homeless families relative to the total number of families staying in homeless shelters. When several potentially eligible families were being referred for every available slot in the RRHD program, some programs used assessments to select the family most likely to succeed with the program.

RRHD Program Design. Some RRHD programs offered only short-term rental assistance and used more stringent selection criteria that reflected the expectation that families must have fewer barriers or higher levels of self-sufficiency if they were to be expected to pay rent on their own after only 3 to 6 months of rental assistance.

Resources in the Homeless System. In some communities, RRHD was one of several options available to homeless families at that time; other options also included rapid re-housing rental assistance and supportive services that were different from those offered by the RRHD program, housing options that were available for a different length of assistance, or an array of affordable and permanent supportive housing options. In these communities, families who had more barriers to housing stability or a greater need for longer term rental assistance could be offered a different program that would be more responsive
to their needs, and RRHD was used to serve families who were more likely to be self-sufficient after receiving only a few months of assistance.

**Local Rental Housing Markets and the Availability of Ongoing Rental Assistance.** In communities where rental housing is in very short supply or rents are very high, RRHD programs often adopted more stringent screening and selection criteria because of a concern that most families would be unable to increase their incomes significantly enough to pay rent without assistance after 12 to 15 months when the RRHD rent subsidy would end. In these communities, selection criteria were often designed to target assistance to families with current full-time employment or strong work histories, good employment prospects, and very few (if any) barriers to self-sufficiency.

**Program Philosophy.** Although some programs clearly articulated the goal of reducing the amount of time families spend in shelters, others expressed the view that many homeless families need the services and supports that they can get in a family shelter or congregate transitional housing program. Further, some program managers said they believe a key indicator of a family’s future success was its motivation to succeed. Thus, more stringent criteria were sometimes designed to decipher a family’s motivation level. When program staff held a strong belief that longer shelter stays could be harmful for many families, the staff were more willing to be less selective, offering RRHD to families with more substantial barriers and providing services and supports to address family needs after they were housed.

**Conclusion**

As a growing number of communities are implementing or considering the rapid re-housing program model, the experience of the RRHD program highlights the significance of decisions about assessment tools and approaches. The research team observed through RRHD that the selection, adaptation, or design of assessment tools is a reflection of the context in which programs operate, including assumptions or beliefs about the characteristics of families who are likely to benefit from rapid re-housing interventions as an alternative to extended stays in the homeless assistance system. Furthermore, as programs adopt and adapt assessment tools, they sometimes make changes that have unintended consequences—particularly when the tools are used to produce a score that determines whether families are eligible for program participation.

The Arizona Self-Sufficiency Matrix that was used or adapted by several RRHD programs was originally developed as a tool for case planning and for improving overall system performance. The scores achieved were also used to measure client progress on goals after they were enrolled in a program and to identify additional programs that could help clients achieve the best outcomes. When total scores on a self-sufficiency matrix are used for the purpose of making eligibility determinations, each domain and the criteria used to score each domain has an effect on a family’s score.
The effect of adding domains to the matrix is to add criteria that may result in excluding some families from program participation—even if some of the added domains or criteria do little to predict the likelihood that a family could benefit from assistance. This effect is magnified if all the domains are given the same weight in calculating the family’s total score.

When selecting domains to include in assessment tools, communities and programs need to consider how the results of assessments will be used and what resources are available to offer to families with different levels and types of needs. If community leaders and program staff believe that most homeless families benefit from the services available in shelters and transitional housing programs, and if more long-term and service-rich programs have the resources and capacity to serve all of the families who need them, assessments may cover a broad range of domains or areas of family functioning, resources, and needs—and assessment results may be used to select only families with the fewest needs or barriers for participation in rapid re-housing programs, while other families will be served in other programs.

If community leaders and programs are committed to the goal of helping most families exit homelessness as quickly as possible because they believe families are usually better off living in their own housing instead of in shelters or transitional housing programs, then assessment tools and criteria used for selecting families for rapid re-housing should focus only on issues that are directly relevant to the family’s potential for accessing and maintaining housing. Assessments may also collect information about other domains or areas of need for purposes of informing case management or linking families to community resources after they obtain housing, but these factors should not determine whether a family should be helped to exit the homeless system as quickly as possible.