



FACT SHEET: THE HUD CONTINUUM OF CARE PROGRAM

Responding to Concerns Raised by the Cicero Institute & Others

The U.S. Department of Housing and Urban Development’s Continuum of Care (CoC) Program is the federal government’s primary framework for coordinating housing and services for people experiencing homelessness. CoCs are grounded in collaboration, data-driven decision making, and local flexibility. Recently, organizations like the Cicero Institute have circulated misleading claims about CoCs while promoting punitive, centralized state models that threaten to disrupt effective local systems. This fact sheet provides accurate, evidence-based responses to their claims.

MYTH VS. FACT

MYTH	FACT
“The rising number of people homeless on our streets is proof that CoCs don't work.”	CoCs have been extremely successful in getting people who are disabled and chronically homeless into stable housing. The reason there are more people on our streets is that more people are becoming homeless for the first time — a direct result of the rising cost of housing, property investment firms buying up existing housing, pandemic-era supply shortages, and a lag in new construction.
“The CoC Program rewards failure by giving more money to areas with rising homelessness.”	HUD awards CoC funds based on outcomes like exits to permanent housing, reduced returns to homelessness, and bed utilization. Rising need is driven by housing costs, not program failure. Florida reduced homelessness by 47% (2007–2023, population-adjusted).
“CoCs force a one-size-fits-all Housing First model.”	The US Department of Housing & Urban Development has made Housing First a policy since the Bush Administration; It is an evidence-based best practice, not a mandate. CoCs retain local control and can fund various models—transitional housing, rapid rehousing, and permanent supportive housing—based on community needs. See information below.
“Requiring treatment and transitional housing will solve homelessness.”	Transitional housing programs do not account for the unique needs and experiences of all persons experiencing homelessness. There is no one-size-fits-all approach to homelessness. Continuums of Care choose the right interventions based on community needs. Some communities in Florida have chosen to fund transitional housing projects through the CoC program .
“CoCs lack transparency and accountability.”	CoCs are governed locally and include public officials, funders and community leaders. CoCs must report annually to HUD using Point-in-Time counts, Housing Inventory Counts, and System Performance Measures. HUD reviews performance and funding is re-competed annually. HUD uses the CoC reporting to complete an annual report to congress.
“States would run homeless systems better than CoCs.”	State systems can be detached from local realities. Local CoCs promote fast, responsive collaboration between agencies, nonprofits, law enforcement, faith-based initiatives and health systems. Florida has 3,350 engaged community members and partners—demonstrating the power of community-driven solutions.
“Cities should criminalize unsheltered homelessness.”	Approaches focused on arrests, fines and forced treatment lead to higher public costs and do not reduce homelessness. When individuals are released from jail or treatment, their housing status does not change – they will return to homelessness.
“Housing First leaves mental illness and substance use untreated.”	Housing First connects people to appropriate services after they are stably housed. CoCs coordinate with health providers. Institutional care can cost over \$2,200/day; supportive housing is far more affordable and effective in the long term.

UNITED STATES DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT POLICY PRIORITIES

The following table presents official evidence from the U.S. Department of Housing and Urban Development (HUD) confirming that Housing First is a formal policy priority across federal programs, funding competitions, and strategic guidance. This national policy direction originated with HUD, starting in 2007, not individual Continuums of Care. Given the clarity and availability of this information, it's concerning that some institutions omit or misrepresent these facts in their public statements.

Evidence Type	Description	Official Link
HUD Housing First Summary - 2007	Provides an overview of Housing First principles, implementation and supporting research.	Housing First Models to Homeless Persons with Serious Mental Illness
Housing First Implementation Resources	HUD Provides various training topics on implementing housing first dated 2009-2017	Housing First in Specific Project Types
HUD Strategic Plan 2013 Agency Priority Goals	Lists advancing Housing First models as a strategic HUD and interagency goal.	HUD Management Discussion & Analysis
HUD Notice CPD-14-012	Defines Housing First and strongly encourages its use in CoC-funded programs.	HUD Notice 14-12
HUD Notice CPD 16-11	HUD encourages providers to use a Housing First approach	HUD Notice 16-11
HUD Notice CoC Program Competition 2016	HUD Homelessness Policy and Program Priorities #7- Using a Housing First Approach	FR-5934-N-01
FY 2017 Notice of Funding Availability	HUD's policy priorities: 1) ending homelessness for all persons; 2) creating a systemic response to homelessness, 3) strategically allocating and using resources, and 4) use of a Housing First approach	FY 2017: CoC Program Competition Highlights <i>*The Link to the official application has been taken down from the HUD website</i>
FY 2018 Notice of Funding Availability	CoCs could apply for a Domestic Violence Bonus, but the project must be new and rapid rehousing and permanent housing projects must use a housing first approach.	FY2018 CoC Competition in Focus <i>*The Link to the official application has been taken down from the HUD website.</i>
FY 2019 YHDP Notice of Funding Availability	Grantees are called to expand community capacity to serve youth experiencing homelessness (particularly by using a Housing First approach), pilot new models of assistance, and report on successful programs.	FY 2019-2020 YHDP NOFO <i>*The Link to the official CoC program application has been taken down from the HUD website.</i>
HUD Evidence Matters FY2023	Reviews the evidence base supporting Housing First; shows positive outcomes and cost savings.	HUD Spring/Summer Highlight
Summary	It is important to recognize that the Housing First model has been studied for decades and has been proven effective in reducing time spent on the streets and improving long-term housing stability—particularly when housing and supportive services are readily available, as seen in successful models like the VA Supportive Housing Program . However, not all communities across the country have sufficient access to mental health and substance use treatment for those in need. Requiring treatment prior to housing placement—particularly with significant Medicaid cuts—would be ineffective, as many areas lack the infrastructure to deliver these services at scale. Expanding access to behavioral health services, especially for people experiencing homelessness, would be a valuable and much-needed enhancement. However, it would require substantial investment to rebuild service systems that have been chronically underfunded for years.	

THE FLORIDA CONTINUUM OF CARE MODEL: DATA & RESULTS

Proven Results (See [AHAR](#) and [System Performance Measures](#), publicly available outcomes & data)

- 90,000+ people served annually through Florida's CoCs.
- 73 days – Average shelter stay in Florida.
- 87% of households exiting short-term shelter remain housed.
- 96% of persons with disabilities in permanent supportive housing remain stably housed.

Locally Driven, Community-Centered (See Examples – [Central Florida](#) & [Gulf Coast Partnership](#) (Stakeholders))

Each CoC is governed by a board of local stakeholders including:

- Local Government, law enforcement, school districts and public agencies
- Healthcare providers (including mental health, substance abuse, hospitals and local health clinics)
- Faith-based organizations and individuals with lived experience
- Service providers including those serving domestic violence, youth, elderly, veterans, families with children, disabled persons experiencing homelessness.

Federal Coordination with Local Flexibility

HUD sets broad priorities and funds initiatives to implement them (e.g., ending chronic homelessness), but local CoCs design implementation plans, which fosters innovation, data-informed strategies, and tailored interventions.

SHIFTING COC OVERSIGHT TO STATE-LEVEL SYSTEMS DESERVES CAREFUL CONSIDERATION

Some policy advocates have proposed replacing locally governed CoCs with state-managed homelessness systems. While this idea aims to increase coordination and standardization, it's important to consider the potential trade-offs.

Key Considerations and Potential Drawbacks:

- Local Expertise May Be Lost – CoCs have deep knowledge of their housing markets, providers, and local needs.
- Community Engagement Could Decline – Local systems include nonprofits, schools, healthcare, and law enforcement. State systems may be less accessible.
- Risk of Uneven Resource Distribution – Smaller or rural communities could be overshadowed by larger population centers in state-run models.
- Reduced Agility – Local CoCs can rapidly adjust during crises such as hurricanes or housing shortages.
- Higher Administrative Costs – Adding layers of oversight could lead to duplication and delays.
- Strong Performing Local Models Could Be Disrupted – Communities with proven success may face unnecessary restructuring.

THE PATH FORWARD

Rather than replacing a successful model, policymakers should:

- Invest in Affordable Housing
- Expand Behavioral Health & Substance Use Services
- Support Local Innovation
- Strengthen Data Systems & Accountability
- Reduce administrative barriers for housing access

CONCLUSION

The HUD Continuum of Care model is the only national framework grounded in collaboration, accountability, and evidence. Proposals to replace or criminalize this model should be carefully evaluated for unintended consequences. Communities benefit most from accessible housing options for all income groups, local flexibility, cross-sector partnerships, and results-driven support.