The transformation of public housing will necessarily have profound effects on the lives of thousands of very vulnerable families. For three decades, public housing served as the housing of last resort, with federal regulations increasingly favoring the neediest households. But during the 1990s, the federal government dramatically changed its policy for housing the poor. Under the new approach, largely driven by the $5 billion HOPE VI program begun in 1992, the U.S. Department of Housing and Urban Development (HUD) began promoting mixed-income housing and relocating families through housing vouchers to prevent the concentration of troubled, low-income households (see page 7). Our most recent research shows that the majority of HOPE VI relocatees have received vouchers, with most of the remainder moving to other traditional public housing developments (Cunningham 2004). For many residents, this relocation means that HOPE VI has met its basic goals; most HOPE VI relocatees report living in better housing in dramatically safer, less poor neighborhoods (Comey 2004; Buron 2004).

Despite these successes, however, public housing transformation has largely failed to address the more complex needs of “hard-to-house” residents who have relied on public housing as a source of stable, if less than ideal, housing. According to recent research by the Urban Institute, a substantial proportion of these residents may not fit easily into existing relocation options for HOPE VI households, particularly vouchers or new mixed-income communities that may require the household to pass strict screening requirements (i.e., criminal background checks, drug tests, or work requirements). Further, many families awaiting relocation will need special assistance beyond the typical relocation package to help them move from their current units into safe and stable housing.

The hard to house include a range of high-need households, such as grandparents caring for grandchildren, families with disabled members, very large households, and multiple-barrier families coping with an array of difficult problems. For these vulnerable families, the same public housing transformation that may offer better housing and new opportunities for other tenants can be just one more blow—leaving families in their distressed communities, facing the specter of losing their assistance altogether. Because housing continues to become increasingly unaffordable for low-income families, these families are left with few good alternatives outside of public housing.

In this brief, we lay out a strategy for effectively serving “hard-to-house” residents who remain in distressed public housing or who are experiencing hardship as a result of HOPE VI–related relocation. Using evidence from our research on HOPE VI families, we identify the different needs that make it difficult for some residents to
successfully transition to mixed-income or private-market housing. Next, we use this evidence to find out how many residents living in HOPE VI developments fall into these categories and require special assistance or support during and after relocation. We conclude with recommended strategies that can meet the needs of these vulnerable families and help ensure better outcomes for all original residents.

**Defining “Hard-to-House” Tenants**

Families that may need additional services or alternative housing models are often referred to as “hard to house.” It is unclear, however, how many residents of severely distressed public housing fit into this category, largely because the term has never been defined or quantified. Categorizing specific groups of residents as hard to house runs the risk of gross overgeneralization. Some may even find the label “hard to house” pejorative. We should be clear that we are talking about only a subset of residents of distressed public housing. However, without understanding the factors that make residents “hard to house,” policymakers and practitioners cannot develop strategies to address their needs. Likewise, without knowing the magnitude of the problem, housing authorities and city agencies cannot effectively plan services for these residents.

Sometimes when researchers or practitioners think of the term “hard to house,” they are referring to truly homeless families or individuals. We use it here instead to refer to families that have been relying on public housing as the housing of last resort and are at risk of losing this housing because of public housing transformation. For the purposes of this analysis, we define “hard-to-house” tenants as public housing residents who are at risk of losing their housing for reasons that go beyond affordability. These residents have personal or family circumstances that make it difficult for them to fit into standard relocation options and they require or are best served by alternative housing models.

To understand how many residents may face special challenges in relocation, we have identified different sets of characteristics that could place residents at risk for housing problems. Our categories are neither mutually exclusive nor exhaustive, but provide a useful tool for assessing the magnitude of the problem:

- **Multiple-barrier households.** These households are long-term public housing residents (lived in public housing for more than 10 years) who are unemployed but of working age, and who do not have a high school diploma. They may also have a drug or alcohol problem, a mental health problem, or a criminal record. Multiple-barrier households may have trouble finding a unit with vouchers and will most likely not meet the screening requirements to return to a new mixed-income development.

- **Disabled households.** These households identify themselves as disabled in the survey, identify someone living in their household as disabled, or report receiving SSI. Public housing residents who are mentally or physically disabled will require more intensive relocation services. They may require accessible units, which are difficult to find in the private market and may not exist in new, mixed-income developments. Disabled individuals may qualify for special disabled housing, but families are excluded from these developments; those with disabled members may well require accessible units with multiple bedrooms, which are extremely difficult to find. Residents moving temporarily or permanently with vouchers may need assistance identifying new medical facilities or transportation to care.

- **Elderly households.** These households are age 65 or older and do not include children. Many older residents living in public housing have aged in place and are living in family units. Given the poor health of many distressed public housing residents (Popkin et al. 2002; Harris and Kaye 2004), these residents are likely frail and require housing that offers on-site supportive services. At many public housing developments, seniors have been provided their own buildings (senior housing) or other project-based assistance, but service-enriched housing, such as independent living with care and assisted living with services on site, is rare.

- **“Grandfamilies.”** These households consist of a single elderly adult (older than 65 years) who is the primary caregiver for one or more children. A growing number of families in public housing are nontraditional households, such as custodial grandparents or persons caring for related foster children. Some may
even be children caring for their aging grandparents. These households, particularly custodial grandparents who are ready for senior housing, need more supportive living environments than are available in traditional public housing or the private market. Senior housing is likely inappropriate for grandparents taking care of grandchildren; like families with disabled members, these households may require accessible units with multiple bedrooms. They may also require supportive housing that links housing to other types of assistance.

- **Large households**. These households need four or more bedrooms to meet HUD standards for adequate housing. Large families often have difficulty finding stable housing with vouchers, particularly in tight rental markets. Public housing has long been one of the few reliable sources of affordable large apartments.

- **Households with one-strike problems**. These households have a family member with an arrest record or other drug-related criminal history that could place the family at risk of eviction. Left without options, most ex-offenders return to the communities they came from, which in many cases is public housing (La Vigne et al. 2003). Ex-offenders and their families are particularly at risk owing to changes in public housing regulations. Strict enforcement of the one-strike rule may exclude them from even traditional public housing (Popkin et al. 2000).

### Estimating the Size of the Hard-to-House Population

To estimate the proportion of residents living in distressed public housing who meet our definition of hard to house, we used data from two large-scale Urban Institute studies of HOPE VI residents awaiting relocation: the HOPE VI Panel Study, which includes five different public housing sites (see page 7); and the Residents at Risk study, which focuses on Chicago (Popkin, Cunningham, and Woodley 2003). Although each survey used slightly different measures, we were able to identify residents in each sample who fall into our categories and likely will require either additional relocation assistance or alternative housing options.

### The Problem of Hard-to-House Residents Is Widespread across Sites

Table 1 shows that the proportion of residents who face special challenges varies considerably across the five sites, from nearly two-thirds in Chicago’s Ida Wells and Washington’s East Capitol to just over one-third in the three smaller sites (Shore Park, Few Gardens, and Easter Hill). Still, the fact that at least 40 percent of the residents at all five sites fall into one or more of our “hard-to-house” categories demonstrates that the problem of hard-to-house residents in HOPE VI sites is widespread and the need for alternative relocation options is significant.

### TABLE 1. Hard-to-House Residents in the HOPE VI Panel Study

<table>
<thead>
<tr>
<th>Hard-to-house category</th>
<th>Shore Park</th>
<th>Wells</th>
<th>Few Gardens</th>
<th>Easter Hill</th>
<th>East Capitol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total “hard-to-house” residents on site*</td>
<td>37%</td>
<td>62%</td>
<td>42%</td>
<td>39%</td>
<td>62%</td>
</tr>
<tr>
<td>Multiple-barrier households**</td>
<td>17%</td>
<td>16%</td>
<td>10%</td>
<td>10%</td>
<td>5%</td>
</tr>
<tr>
<td>Grandfamilies and disabled households**</td>
<td>22%</td>
<td>37%</td>
<td>22%</td>
<td>24%</td>
<td>43%</td>
</tr>
<tr>
<td>Elderly households***</td>
<td>2%</td>
<td>10%</td>
<td>9%</td>
<td>4%</td>
<td>16%</td>
</tr>
<tr>
<td>Large households***</td>
<td>4%</td>
<td>7%</td>
<td>1%</td>
<td>2%</td>
<td>9%</td>
</tr>
</tbody>
</table>


*Residents who fall into at least one alternative housing model.

**Households with multiple barriers (living in public housing for more than 10 years, no high school degree, not employed, and less than 50 years old) or potential one-strike issues.

***Grandfamilies have a single elderly (older than 65) adult who is the primary caregiver for one or more children (younger than 18) because the children’s parents do not live in the household. Disabled households identify themselves as disabled, have a disabled member of the household, or receive SSI.

***Elderly-headed households (65 or older) with no children.

We used HUD standards to determine the number of bedrooms needed by each household. They are as follows: one bedroom for one to two people, two bedrooms for two to four people, three bedrooms for three to six people, four bedrooms for four to eight people, and five bedrooms for five to ten people.
Table 1 also shows that a single alternative will be insufficient; clearly, housing programs need a range of options to serve families with different needs. Across sites, the largest groups needing special assistance with relocation are grandfamilies and disabled households—in Wells and East Capitol, these households make up more than a third of the sample. These families need accessible units with multiple bedrooms. Multiple-barrier households needing some sort of service-enriched housing make up the third-largest group, ranging from about 16 percent of the sample in Shore Park and Wells to just 5 percent in East Capitol, perhaps because of the large proportion of older residents. The proportion of elderly households varies similarly across the sites, from 16 percent in East Capitol to just 2 percent in Shore Park. The proportion of large families ranges from 9 percent in East Capitol to just 1 percent in Few Gardens.

The Need for Alternatives in Chicago Is Especially Urgent

The Residents at Risk study is a component of the HOPE VI Panel Study (Popkin et al. 2003). Because of the size and scope of transformation of public housing in Chicago, we received special funding to conduct a census of Ida B. Wells and Madden Park (the Panel Study site) to identify how many residents were at risk for falling out of the relocation process and losing their housing assistance.8

The plans for Ida Wells and Madden Park called for replacing the original 3,200 public housing units with a 3,000-unit mixed-income development. A thousand of the new units were to be set aside for public housing residents, including 750 units of rental family housing, 150 units of senior housing, and 100 for-sale units (Urban Design Associates 2000). The master plan called for redevelopment to take place in five phases over several years.

As with the Panel Study, we used the data from the Residents at Risk survey to determine the proportion of residents who fell into one or more of our “hard-to-house” categories. Because the surveys were not identical, we have somewhat different information about the Residents at Risk respondents, particularly whether the respondent reported that someone in the household had a “one-strike” problem that could put the family at risk of eviction. These data provide more details on the scope of Chicago’s “hard-to-house” residents problem—which, as the Panel Study data indicate, may be very similar to the situation in other large, central cities with multiple developments.

The Residents at Risk survey occurred almost exactly one year after the Panel Study survey in Wells. As table 2 shows, a slightly higher proportion of Wells residents were hard to house and required alternative relocation options, compared with residents of the other sites (72 versus 62 percent). The increase is not surprising, given that relocation had progressed over the 12-month period and the residents who remained were likely those who were difficult to relocate or had chosen to stay. As with the Panel Study, about a third of the residents with special housing needs are grandfamilies and disabled households. However, the proportion of large families is substantially bigger than in the Panel Study, perhaps because they are more difficult to relocate. This variation could also be the result of an important difference in the

<table>
<thead>
<tr>
<th>Hard-to-house category</th>
<th>Total “hard-to-house” residents on site</th>
<th>Multiple-barrier households</th>
<th>Grandfamilies and disabled households</th>
<th>Elderly households</th>
<th>Large households</th>
<th>Households with one-strike problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total “hard-to-house” residents on site</td>
<td>72%</td>
<td>10%</td>
<td>32%</td>
<td>19%</td>
<td>34%</td>
<td>15%</td>
</tr>
<tr>
<td>Multiple-barrier households</td>
<td>10%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grandfamilies and disabled households</td>
<td></td>
<td>32%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elderly households</td>
<td></td>
<td></td>
<td>19%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Large households</td>
<td></td>
<td></td>
<td></td>
<td>34%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Households with one-strike problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>15%</td>
<td></td>
</tr>
</tbody>
</table>

Source: Popkin et al. (2003).

a Residents who fall into at least one alternative housing model.
b Households with multiple barriers (living in public housing for more than 10 years, no high school degree, not employed, and less than 50 years old).
c Grandfamilies have a single elderly (older than 65) adult who is the primary caregiver for one or more children (younger than 18) because the children’s parents do not live in the household. Disabled households identify themselves as disabled, have a disabled member of the household, or receive SSI.
d Elderly-headed households (65 or older) with no children.
e We used HUD standards to determine the number of bedrooms needed by each household. They are as follows: one bedroom for one to two people, two bedrooms for two to four people, three bedrooms for three to six people, four bedrooms for four to eight people, and five bedrooms for five to ten people.
f Households that reported the property manager had talked to them about problems with a felony, drug arrest, or conviction.
surveys: unlike the Panel Study, the Residents at Risk survey specifically asked about all members of the household, including those not on the lease. The proportion of multiple-barrier households is slightly lower than in the Panel Study, but adding a new category (households with one-strike problems) means that the proportion of families with serious problems may actually be higher. Again, these findings clearly show that Chicago has an especially urgent need for alternative relocation options to meet the complex needs of different hard-to-house residents.

**Serving the Hard to House**

The challenge facing policymakers and housing authority administrators is how to address the needs of the hard to house in a time of shrinking resources for housing assistance. Funding for HOPE VI, the public housing capital fund, and Section 8 vouchers has declined over the past year (Popkin et al. 2004). Yet, a primary goal of the HOPE VI program—and public housing transformation more broadly—is to ensure an improved living environment for all original residents. Hard-to-house families are the most vulnerable residents and the most in need of additional services and support to make a successful transition to safe, stable housing. While these types of interventions are more expensive than traditional public housing, they could have important long-term benefits for families, improving outcomes for children and reducing homelessness and the need for other costly public services.

Table 3 summarizes our categories of hard-to-house residents and the alternative housing options we believe are most appropriate for each group. Housing authorities should consider assorted housing options for residents relocating from public housing. Depending on the needs of the resident population, which will vary by site, housing alternatives could include these elements:

- **Search assistance/post-move support.**
  These services should include, but certainly not be limited to, helping hard-to-house tenants locate appropriate units, move into them, get settled, meet their neighbors and new landlord, and adjust to their new surroundings. Health, mental health, substance abuse, and child care services may also be important in

<table>
<thead>
<tr>
<th>Hard-to-house category</th>
<th>Description</th>
<th>Alternative housing options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multiple-barrier</td>
<td>Long-term public housing residents, unemployed, have less than a high school diploma; may have drug or alcohol problems</td>
<td>Transitional supportive housing, SROs</td>
</tr>
<tr>
<td>Disabled</td>
<td>Self-identified or receiving SSI</td>
<td>Permanent supportive housing or accessible units in the private market or redeveloped housing</td>
</tr>
<tr>
<td>Elderly</td>
<td>Households headed by adult 65 or older without children</td>
<td>Permanent supportive housing for seniors</td>
</tr>
<tr>
<td>Grandfamilies</td>
<td>Elderly-headed households with children living with them, mother or father absent</td>
<td>Permanent supportive housing or accessible units with multiple bedrooms in the private market or redeveloped housing</td>
</tr>
<tr>
<td>Large</td>
<td>More than four bedrooms (HUD standards)</td>
<td>Search assistance and post-move support, construction of new units in redeveloped housing</td>
</tr>
<tr>
<td>One-strike</td>
<td>Ex-offenders or drug users among family members</td>
<td>Transitional supportive housing, counseling and support to “cure” one-strike problems</td>
</tr>
</tbody>
</table>
assuring a stable transition. Serving these tenants may mean using HOPE VI dollars to fund “enhanced vouchers” that would include long-term intensive counseling to families to help them stabilize in their new communities.

- **Transitional supportive housing.** Transitional housing is usually appropriate for households that, with (sometimes substantial) support, could ultimately sustain themselves in housing without supportive services (but not necessarily without rental subsidies). Supportive services in transitional housing could include parenting and child care, educational completion, budgeting and life skills, or training for employment. They also frequently include assistance in achieving and maintaining recovery from substance abuse, mental health services, and case management to ensure that tenants continue to work toward their stated goals and receive the assistance to which they are entitled.

- **Permanent supportive housing.** Permanent supportive housing has no limit on length of stay and no requirement that tenants move out if their service needs change. It is usually reserved for people with a history of housing instability coupled with disabilities that make finding or keeping stable housing unlikely. This type of housing would meet the needs of single elderly and disabled adults. It is also increasingly recognized as an option for families.

- **Large units/accessible units.** Housing authorities should require HOPE VI developers to create accessible units with multiple bedrooms as part of any new development. Such units are nearly impossible to find in the private market, and private developers are unlikely to meet the growing need for such options, leaving public housing as the most appropriate option to serve these families.

- **Counseling and support to “cure” one-strike problems.** The housing problem for ex-offenders will not be resolved on its own. Currently, very few programs provide any kind of services for ex-felons, and there is certainly no coherent housing plan. Addressing the needs of ex-felons will help not only public housing residents, who face the risk of having their families destabilized and their rights to housing assistance jeopardized, but also the larger community; without help, these ex-felons are likely to commit other offenses (La Vigne et al. 2003).

We cannot tell from this research whether the results from the HOPE VI Panel and Residents at Risk studies can be generalized to the entire public housing population. However, the fact that we find similar problems in Panel Study samples from large, central-city housing authorities and from smaller city housing authorities suggests that these problems are likely widespread—and are certainly not limited to the worst public housing developments. Housing authorities should be required to identify the proportion of their population that might be hard to house and needs special housing or support as part of their HOPE VI application.

Without question, these services are costly and will require considerable investment by housing authorities and federal and local governments. However, HOPE VI provides large, multimillion dollar grants to local housing authorities; the bulk of these funds is used to underwrite the construction of new, mixed-income developments, including units for higher-income households. While these investments are justifiable as a way to create sustainable developments, it is also reasonable to require housing authorities to set aside a meaningful portion of their HOPE VI awards to serve tenants who have relied on public housing as the housing of last resort. These tenants cannot be easily accommodated in the private market, and local social service agencies in most cities are already struggling to meet the needs of existing clients. The federal government and local housing authorities have an obligation to ensure that all families displaced by HOPE VI redevelopment efforts eventually benefit from the program and end up in safe and stable housing that meets their needs.

**Notes**

This brief is based on an article of the same title that will appear in a forthcoming issue of *Housing Policy Debate*.


2. The HOPE VI program was the largest and most visible component of the transformation of public housing. HOPE VI specifically targeted the worst public housing, combining grants for physical revitalization with funding for management improvements and supportive services to promote resident self-sufficiency (Popkin et al. 2004). Since 1992, HUD has awarded 446 HOPE VI revitalization and demolition grants in 166 cities. To date, 63,100 severely distressed units have been demolished and another 20,300 units are slated for redevelopment (HUD 2003). As of the end of 2002, 15 of 165 funded HOPE VI programs were completed (GAO 2002).

3. For a complete review of the history and impact of public housing transformation and HOPE VI, see Popkin et al. (2004).


6. Venkatesh et al. (2004) call these residents “hardship cases.”

7. HUD standards are as follows: a one-bedroom unit must have a minimum of one occupant and a maximum of two; a two-bedroom unit must have a minimum of two occupants and a maximum of four; a three-bedroom unit must have a minimum of three occupants and a maximum of four; a four-bedroom unit must have a minimum of four occupants and a maximum of six; and a five-bedroom unit must have a minimum of five occupants and a maximum of ten.

8. The Residents at Risk study is funded by the Ford Foundation. See Popkin et al. (2003) for a complete description of the study and methods.

**References**


HOPE VI Program

Created by Congress in 1992, the HOPE VI program was designed to address not only the bricks-and-mortar problems in severely distressed public housing developments, but also the social and economic needs of the residents and the health of surrounding neighborhoods. This extremely ambitious strategy targets developments identified as the worst public housing in the nation, with problems deemed too ingrained to yield to standard housing rehabilitation efforts.

The program’s major objectives are

- to improve the living environment for residents of severely distressed public housing by demolishing, rehabilitating, reconfiguring, or replacing obsolete projects in part or whole;
- to revitalize the sites of public housing projects and help improve the surrounding neighborhood;
- to provide housing in ways that avoid or decrease the concentration of very low income families; and
- to build sustainable communities.

Under the $5 billion HOPE VI program, HUD has awarded 446 HOPE VI grants in 166 cities. To date, 63,100 severely distressed units have been demolished and another 20,300 units are slated for redevelopment. Housing authorities that receive HOPE VI grants must also develop supportive services to help both original and new residents attain self-sufficiency. HOPE VI funds will support the construction of 95,100 replacement units, but just 48,800 will be deeply subsidized public housing units. The rest will receive shallower subsidies or serve market-rate tenants or homebuyers.

HOPE VI Panel Study

The HOPE VI Panel Study tracks the living conditions and well-being of residents from five public housing developments where revitalization activities began in mid- to late 2001. At baseline in summer 2001, we conducted closed-ended surveys with a sample of 887 heads of households across five sites and conducted in-depth interviews with 39 adult-child dyads. The second wave of surveys was conducted in 2003, 24 months after baseline. We conducted follow-up surveys with 736 households and interviews with 29 adults and 27 children. We also interviewed local HOPE VI staff on relocation and redevelopment progress, analyzed administrative data, and identified data on similar populations for comparative purposes.

The panel study sites are Shore Park/Shore Terrace (Atlantic City, NJ); Ida B. Wells Homes/Wells Extension/Madden Park Homes (Chicago, IL); Few Gardens (Durham, NC); Easter Hill (Richmond, CA); and East Capitol Dwellings (Washington, DC).

The principal investigator for the HOPE VI Panel Study is Susan J. Popkin, Ph.D., director of the Urban Institute’s “A Roof Over Their Heads” research initiative. Funding for this research is provided by the U.S. Department of Housing and Urban Development, the John D. and Catherine T. MacArthur Foundation, The Annie E. Casey Foundation, the Rockefeller Foundation, the Robert Wood Johnson Foundation, The Fannie Mae Foundation, the Ford Foundation, and the Chicago Community Trust.

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The Urban Institute’s Center on Metropolitan Housing and Communities believes that place matters in public policy. We bring local perspectives on economic development, neighborhood revitalization, housing, discrimination, and arts and culture to our study of policies and programs. Our research pioneers diverse and innovative methods for assessing community change and program performance and builds the capacity of policymakers and practitioners to make more informed decisions at local, state, and federal levels.

A Roof Over Their Heads: Changes and Challenges for Public Housing Residents
The Urban Institute’s “A Roof Over Their Heads: Changes and Challenges for Public Housing Residents” research initiative examines the impact of the radical changes in public housing policy over the past decade. A major focus is how large-scale public housing demolition and revitalization has affected the lives of original residents. A second key area of interest is the impact of neighborhood environments on outcomes for public housing families. A third focus is evaluating strategies for promoting mobility and choice for assisted housing residents.

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Support for this research was provided by the Fannie Mae Foundation and the Ford Foundation.