



DESC

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Why Housing First?

The Housing First philosophy, which is the cornerstone of all DESC housing, embraces the notion that vulnerable clients are more easily engaged in robust clinical services and experience greater success once the chaos of living on the streets has been eliminated from their lives. Eliminating this debilitating chaos is achieved when a chronically homeless adult is provided a safe and permanent apartment of their own.

As the name suggests, the Housing First practice dispenses with decades of trying to determine who is "housing ready" or using the promise of housing to reward people for achieving some pre-determined clinical goal such as psychiatric stability or drug and alcohol abstinence. These outdated approaches lead to high failure rates and the false notion that homeless people like living on the streets.

DESC pioneered the Housing First model in this region in the 1990's. As this innovative approach to ending homelessness among our community's most vulnerable men and women proved to be effective, slowly other organizations began to consider its viability. Today both the United Way of King County and Seattle/King County

government have embraced Housing First as an effective and affordable answer to homelessness. Operating in partnership with these agencies, DESC has become the leading developer of permanent supportive housing for our community's most vulnerable men and women.

Housing First has been recognized as a promising practice by national researchers and policymakers. As a result, communities around the country are piloting projects that employ Housing First principles.

The National Alliance to End Homelessness (NAEH) defines the Housing First approach for addressing the chronic homelessness of disabled and vulnerable people as: "a client-driven strategy that provides immediate access to an apartment without requiring initial participation in psychiatric treatment or treatment for sobriety."

Housing First is based on two core convictions:

1. Housing is a basic human right, not a reward for clinical success, and
2. Once the chaos of homelessness is eliminated from a person's life, clinical and social stabilization occur faster and are more enduring.



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Housing First Principles

- 1. Move people into housing directly from streets and shelters without preconditions of treatment acceptance or compliance.**
- 2. The provider is obligated to bring robust support services to the housing. These services are predicated on assertive engagement, not coercion.**
- 3. Continued tenancy is not dependent on participation in services.**
- 4. Units targeted to most disabled and vulnerable homeless members of the community.**
- 5. Embraces harm reduction approach to addictions rather than mandating abstinence. At the same time, the provider must be prepared to support resident commitments to recovery.**
- 6. Residents must have leases and tenant protections under the law.**
- 7. Can be implemented as either a project-based or scattered site model.**