



Understanding Shelters & Emergency Housing

Newcomers' housing challenges reflect the ongoing housing crisis in the United States. Newcomers to the U.S. enter a housing system that is already lacking affordable housing and burdening renters with high costs, leading many refugee clients to face a risk of homelessness. Shelters and emergency housing can offer a critical bridge to stability during a vulnerable period. This guide will help service providers understand and effectively navigate options available to clients facing homelessness.

Prioritize Early Intervention

Before an individual or household enters a shelter system, look for upstream interventions that can resolve a housing crisis without the need for a shelter stay. Explore **housing assistance programs** offered at the city, county or state levels. You may need to have difficult conversations with clients regarding budgeting and prioritizing housing expenses, as well as searching for more affordable housing options.

Explore Switchboard's [Emergency Rental Assistance Programs: Opportunities for Refugees and other ORR-Eligible Clients](#) or [Affordable Housing 101 for Newcomer Service Providers](#) for more information.

ORR-Funded Programs & Shelters

Note that some ORR programs prohibit shelter use while active in the program. For example:

- **Program of Initial Resettlement (PIR)** requires agencies to provide safe, decent, sanitary housing for a minimum of 30 days. Shelters are not allowed; at least one viable permanent housing option must be offered during this time.
- **Matching Grant Program (MG)** provides direct assistance (including rent payment) during the program service period. Active MG clients are not allowed to be unhoused or in shelters.



Key Definitions in Housing, Emergency Housing and Shelter Systems

Continuum of Care (CoC): Local planning bodies responsible for coordinating the full range homelessness services in a geographic area – covering city, county, metropolitan area, or an entire state.

Coordinated Entry (CE): A centralized process designed to streamline the way individuals and families experiencing homelessness access housing support services within a CoC.

Emergency Shelters (ES): Also called crisis response housing, facilities that provide temporary shelter for people experiencing homelessness.

Homeless Management Information System (HMIS): Continuums of Care (CoCs) use HMIS to collect data on people experiencing sheltered homelessness in their area

Permanent Housing (PH): Community-based housing without a set length of stay where individuals and families live as independently as possible.

Permanent Supportive Housing (PSH): Permanent housing that provides long-term housing assistance and support services to households with at least one member who has a qualifying disability.

Rapid Re-Housing (RRH): Permanent housing that provides short-term (up to 3 months) and medium term (4-24 months) tenant-based rental assistance and supportive services to household experiencing homelessness.

Transitional Housing (TH): Provides temporary housing to individuals and families experiencing homelessness; offers supportive services for interim stability and support to aid clients successfully enter and maintain permanent housing. TH programs can cover housing costs and supportive services for up to 24 months.

Other programs allow for the use of shelters while enrolled; however, providers should still take steps to either avoid shelter placement or minimize the length of shelter stays if possible. Intensive Case Management (ICM), Supplemental Case Management (SCM) and ORR Initial Resettlement Services (OIRS) allow for the use of shelters if no alternatives exist. Do your due diligence to ensure that clients are safe.

Prevention and Diversion

Before a newcomer enters the shelter system, most Continuums of Care (CoC) or the confidential community resource hotline 2-1-1, will screen for two interventions to avoid the need for a shelter stay. These interventions are Prevention and Diversion. Know these interventions to help prepare clients for conversations that, along with a safety screen, usually happen during first contact with a CoC.

- **Prevention** refers to financial assistance or utility arrears payments. It best applies to individuals or families that are still actively housed but are at risk of losing housing within the next 14 days. CoC intake staff will check income against thresholds (often 30% of area median income) to determine eligibility.

- **Diversion** applies to individuals or families that are presenting as homeless (do not have a home address) but are not yet in a shelter. Staff will explore immediate, safe alternatives to a shelter such as staying with family members.

If a client is already unsheltered, or living somewhere not meant for human habitation, they will be routed directly to a shelter assessment since there is no housing to preserve or alternative to arrange.

Support with Finding and Accessing Shelters

Partner with Your Local CoC

Although the [U.S. Department of Housing and Urban Development \(HUD\)](#) administers the CoC program, each CoC operates to its specific needs and homelessness challenges. No two CoC geographies operate the same. It is essential to build relationships with your local 2-1-1 or CoC and its partners prior to a crisis. With a strong relationship in place, future referrals for newcomer clients go through a known contact with a warm handoff. See Switchboard's [Building Community Partnerships Across the Resettlement Landscape](#).

If your agency is not a member organization of your local CoC, you won't administer community-level screenings or evaluations, but familiarizing yourself with them will help you prepare clients and advocate their needs effectively. For instance, some CoC's, like those found in Baltimore and Silver Spring, Maryland, require residency in the county in order to access shelters; the CoC in Washington D.C. does not ask. Note: HUD requires that Coordinated Entry (CE) never delay access to a shelter bed that night. The full assessment can take place afterwards if needed.

HUD's [Find Shelter](#) tool provides information about housing, shelter, health care, and clothing resources in communities across the country.

Shelter Intake for Single Adults

Local CoC systems vary in their policies regarding walk-in availability. New York City, for example, offers dedicated intake centers open 24/7 and walk-ins are typically seen the same day. However, in Chicago, shelters do not accept walk-ins except for their Shelter Placement and Resource Center (SPARC) for single adults. Instead, Chicago requires a call to their 3-1-1 hotline to match individuals to a bed. Note local requirements in your area.

Women Only Shelters

Some women's shelters allow walk-ins, while others only accept clients through their local CoC coordinated entry system. Raleigh's Helen Wright Center for Women, for example, only takes referrals through Wake County's Coordinated Entry System. Referrals from partner agencies (like domestic violence shelters or hospitals) are also common. National networks like the Salvation Army operate women's shelters in most major cities, but intake hours and walk-in policies vary.

Families with Children

Family shelter models follow a separate system from single adult shelters, even when the parent is a single parent. Eligibility is usually based on whether the minor

children are in the household, not on the child's sex, but exceptions apply.

In Los Angeles, for instance, LA County's Coordinated Entry System runs through eight Family Solutions Centers (FSCs). A family in LA county will be routed to whichever FSC is closest to the family when they seek help. Families can access the system by calling 2-1-1 to be pre-screened and receive a warm hand-off to the FSC during business hours. After hours, 2-1-1 can issue crisis motel vouchers.

Pregnancy: The federally funded [Maternity Group Homes Program](#) offers adult-supervised transitional living for pregnant or parenting youth ages 16-22 and their dependent children. Access operates through a referral from a runaway and homeless youth provider or the [National Runaway Safeline](#).

Family Violence (FV) and Trafficking Survivors Confidential Shelter Pathways

HUD promotes full participation and integration of **Victim Service Providers (VSPs)** within CoCs for FV and trafficking survivors. While the scope will vary by community, CoCs work with VSPs to "establish client driven, trauma-informed and culturally relevant assessment and screening tools, as well as referral policies and procedures, to ensure that the process addresses the physical and emotional safety, privacy, and confidentiality needs of participants."¹

Survivors of trafficking are ORR-eligible once certified, but shelter capacity built specifically for this client population remains scarce. A confidential intake through a VSP is typically the first step. The VSP can connect a survivor to CoC housing resources like rapid re-housing (RRH) or permanent supportive housing (PSH) through its comparable database without the survivor's identity entering the shared system.

The [National Domestic Violence Hotline](#) and [National Human Trafficking Hotline](#) are the fastest way to be connected to a VSP.

¹ U.S. Department of Housing and Urban Development, 2015, HUD Exchange. Coordinated Entry and Victim Service Providers FAQ

Confidentiality: HUD requires CoCs to have a written policy for how survivors reach coordinated entry, and many communities run parallel confidential intakes. In Connecticut, for example, 2-1-1 routes those fleeing family violence into a VSP-specific process where a survivor can be prioritized on the community's list without including their identifying information.

In fact, the Violence Against Women Act and the Family Violence Prevention and Services Act prohibit VSPs from entering survivor data into a CoC's shared Homeless Management Information System (HMIS); they must instead use a comparable database that is only accessible by the VSP². To learn more about survivor-centered service provision, see Switchboard's [Family Violence: Core Concepts for Refugee- and Newcomer-serving Organizations](#).

Communicate Openly with Clients to Help Navigate Barriers

Several considerations influence shelter and emergency housing options for newcomers, from local shelter capacity to legal status and policy. Building trusting client relationships through open and honest communication can help navigate barriers, as a newcomer's personal circumstances also influence how smoothly they can access shelter. Two important factors are **household composition** and **trust**.

Household Composition and Access Barriers

Shelter eligibility is largely based on household composition. Whether your client is a single adult, family with minor children, or a household with a member who has a disability will determine the most appropriate shelter type, support systems, and future housing options.

Intake itself can have complex logistical demands. Family intake in New York, for example, can take many hours and requires every household member to be physically present and possess identification³. Some shelters may be inaccessible for clients without reliable transportation, child care, or a working phone (for a call-first system) even if clients meet every eligibility requirement.

To assist your clients:

- **Confirm household composition** and the appropriate shelter type before referring newcomers. A family with children cannot access a singles adult shelter, and vice versa, regardless of need or urgency.
- **Work to address intake challenges** like transportation and access to a phone before sending a client to an intake site, especially where intake happens at one physical location.
- **Inform intake staff about disabilities** of any household member early, as this can open access to permanent supportive housing.

Trust, Disclosure, and Safety

Many newcomers have experienced extensive insecurity or [trauma](#), and some may have prior harmful experiences with authorities who failed to protect them. This can create an ongoing mistrust of formal services that feel bureaucratic or unsafe. As a known service provider, you may be one of the few people a client trusts. If a client mentions domestic violence, trafficking, or exploitation, [respond appropriately](#) within the boundaries of your role and refer to a confidential resource.

Mental Health Effects of Shelters

A shelter stay is not a neutral experience. It carries its own measurable mental health cost, separate from the stress of homelessness itself. For newcomers, pre-existing trauma or mental health concerns can be exacerbated by a stressful and unpredictable shelter stay. For example:

- Congregate settings like shelters carry documented health risks and high rates of depression. Noise, lack of privacy, and unpredictability have been identified as stressors.
- Children have shown measurable mental health effects tied to shelter entry.⁴ As a result, some CoCs require mental health staff at all family shelters.
- Research suggests that embedded mental health and parenting supports in shelters improve outcomes for both parents and children.

² U.S. Department of Housing and Urban Development, 2026, HUD Exchange. HMIS Comparable Database Manual

³ Department of Homeless Services, New York City, (2026), STH Resource Guide for NYC Families & Students in Temporary Housing

⁴ Cassidy, M., Currie, J., Glied, S., Howland, R.(2025) Child mental health, homelessness and the shelter system: evidence from Medicaid in New York City, *American Journal of Epidemiology* Vol 194 Is 6, Pgs. 1534-1543

Given these concerns, providers should focus efforts on early intervention (see *Early Intervention*, above) to prevent shelter stays if at all possible.

Cultural and Linguistic Capacity

Local shelter and Continuum of Care ecosystems were built primarily around domestic homelessness patterns rather than newcomer circumstances.

While HUD requires shelters funded through the CoC to provide meaningful language access, many shelters and CoCs lack the cultural and linguistic capacity that newcomers need. A 2025 study found that resource-constrained CoCs struggle serving less-common populations⁵. It also found that people of color often prefer informal, culturally trusted community organizations over the formal CoC system. In some cases, this distrust may push them towards less safe housing situations.

Here are some recommendations.

- Learn the steps, wait times, and referral process of your local CoC so that you can help set clear, realistic expectations with clients.
- As mentioned above, [build relationships](#) with your local CoC and its partners in advance. This can help you advocate for compliance with language access requirements. Often, due to staff turnover or other factors, shelter staff may be unaware of interpretation needs or requirements.
- If your client requires interpretation, consider providing an “I Speak” card (examples [here](#) and [here](#)) that they can hand to shelter staff. If your own organization has interpretation resources available, such as a language access line, help ensure your clients and partner agencies know how to utilize them.
- If your local shelters lack cultural capacity, maintain a referral list of organizations that may be able to offer assistance, such as [ethnic community-based organizations \(ECBOs\)](#).⁶ Community leaders or faith-based organizations may also be useful resources.

Conclusion

Newcomers frequently encounter challenges navigating housing systems that may not fully meet their needs. While these barriers can be significant, the information and strategies presented in this guide can help create positive outcomes. By prioritizing early interventions to avoid homelessness, helping clients find and access shelters through partnerships with your local Continuum of Care system—including knowing their barriers or gaps and developing strong referral partnerships—and by building trusting relationships with clients through open and honest communication, you can support clients’ immediate housing needs and reduce the impact on those experiencing instability.

Resources

[Emergency Housing: Three ways to Connect with Local Shelter Systems](#): If you are a newcomer, or are working with a newcomer, who is homeless or at risk of becoming homeless, here are tools to help find immediate shelter and keep you safe.

[Safe Stays by Relo Share](#): Safe Stays allows hotel bookings under an alias, no credit card or photo ID for the guest, and consolidated billing that VSP’s working in anti-trafficking organizations have praised as a valuable resource

[Refugee Housing Solutions Resource Library](#): Contains over 200 resources on topics related to housing and refugee resettlement.

Looking for multilingual resources for clients? Settle In provides resources in 11+ languages on various housing topics. Visit the Settle In [Housing](#) page to find videos, tip sheets and more.

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⁵ Kim, S., Sullivan, A., Yokokura, K., Kwak, H., & Nwakpuda, E. (2026). Cultural Competence in Community-Level Initiatives to Advance Racial Equity in Homeless Services. *Public Administration*.