



**CITY OF SOMERVILLE, MASSACHUSETTS
MAYOR'S OFFICE OF STRATEGIC PLANNING & COMMUNITY
DEVELOPMENT**

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Submitted via www.regulations.gov

Regulations Division, Office of General Counsel
Department of Housing and Urban Development
451 7th Street SW
Washington, D.C. 20410

**RE: Notice of Research Justifying Additional Incentives for Certain Activities To Reduce
Homelessness – Docket No. FR-6628-N-01 (HUD-2026-1453)**

The City of Somerville, Massachusetts (“Somerville” or “the City”), a city of approximately 82,000 residents in Greater Boston, submits these comments through its Office of Housing Stability (OHS). Although OHS does not receive CoC funding, our work is part of the continuum of care that serves Somerville residents and supports the long-standing federal goal of making homelessness rare, brief, and non-recurring. We prevent homelessness before it begins and help residents who lose their housing find stable housing again. In 2025, OHS served 1,047 Somerville households facing eviction, unaffordable rent increases, or other housing crises. Nearly half of these households came to us before any eviction had begun¹.

Section 428(d)(2)(C) of the McKinney-Vento Act permits HUD to incentivize additional activities only if it determines, “based on research and after notice and comment,” that they have been “proven effective” at reducing homelessness. The City does not dispute HUD’s authority to make such a determination. However, the research presented in the notice does not show that these activities meet that standard, so HUD’s finding is not supported as the statute requires.

1. The notice misattributes rising homelessness to Housing First

HUD attributes the growth in homelessness since 2013 to its investment in permanent housing. The evidence offered is a before-and-after comparison of national Point-in-Time (PIT) counts that does not account for rising rents, the end of pandemic-era protections, or changes in shelter demand. Correlation is

¹ City of Somerville Office of Housing Stability, 2025 Annual Report (2026) <https://www.somervillema.gov/departments/office-strategic-planning-and-community-development-ospcd/office-housing-stability>

not proof of cause, and it falls well short of the statutory standard.

Massachusetts shows why. Our statewide PIT count rose about 53% between 2023 and 2024, nearly three times the national rate. The growth was concentrated among families with children in emergency shelter: about three-quarters of people counted were in families, and more than 94% were sheltered². These are families priced out of a housing market where average rent in Somerville is \$3,750 per month³. Their homelessness says nothing about whether PSH works for the chronically homeless adults it serves.

The notice also misstates its sources on Massachusetts. Its figures on overdose deaths among homeless residents of Boston and Massachusetts (footnote 73) cite “Id.,” which refers to a JAMA study of San Francisco. Its headline figures on chronic homelessness and PSH growth (footnote 13) cite “supra note 5,” which is a funding notice, not the Annual Homelessness Assessment Report.

2. Permanent Supportive Housing works, by HUD’s own measures

HUD’s System Performance Measures show that in every year from 2019 through 2023, about 96% of people in permanent housing projects other than rapid re-housing either remained housed or moved to other permanent housing⁴. Randomized trials show the same⁵.

HUD presents the fact that only 1.7% of PSH households exit to unsubsidized housing as evidence of failure. PSH is designed for people with disabling conditions, many of whom could never sustain market-rate rent, particularly in high-cost regions like ours. For these residents, *staying housed is the outcome*.

3. Transitional housing should be an option, not a replacement

The City recognizes that transitional housing can offer needed respite for some households, especially in Massachusetts, where waits for affordable housing often stretch for years. But the notice overstates the evidence. HUD’s own Family Options Study, which the notice cites in support of transitional housing, found that permanent housing subsidies were the most effective intervention for ending family homelessness⁶. Project-based transitional housing had little effect, and families were least comfortable in it and most likely to leave⁷.

Shifting Continuum of Care (CoC) resources from PSH renewals toward transitional housing would move people out of housing that works and into housing that ends, often with no affordable place to go next. Any transitional housing incentive should add to, not draw from, permanent housing funding, and should be measured by exits to permanent housing.

4. Sobriety and service participation should not be conditions of housing

Drug-free premises are already required by federal law, and the City does not object to them. Our concern

² U.S. Dep’t of Hous. & Urb. Dev., The 2024 Annual Homelessness Assessment Report (AHAR) to Congress, Part 1 (Dec. 2024) <https://www.huduser.gov/portal/sites/default/files/pdf/2024-AHAR-Part-1.pdf>, as reported in Boston Globe, “Massachusetts homeless population” (Jan. 2, 2025) <https://www.bostonglobe.com/2025/01/02/data/massachusetts-homeless-population-charts>.

³ Zillow, *Somerville, MA Rental Market Trends*, May 2026

⁴ U.S. Department of Housing and Urban Development, Continuum of Care System Performance Measures Data Since FY 2015, Measure 7b.2 (2025), <https://files.hudexchange.info/resources/documents/System-Performance-Measures-Data.xlsx>

⁵ Tim Aubry, Geoffrey Nelson & Sam Tsemberis, Housing First for People With Severe Mental Illness Who Are Homeless: A Review of the Research and Findings From the At Home—Chez Soi Demonstration Project, 60 Can. J. Psychiatry 467 (2015). Summarized in J-PAL North America, Housing First evidence brief, https://www.povertyactionlab.org/sites/default/files/publication/Housing-First_JPALNA.pdf

⁶ Daniel Gubits et al., Family Options Study: 3-Year Impacts of Housing and Services Interventions for Homeless Families (U.S. Dep’t of Hous. & Urb. Dev., Off. of Pol’y Dev. & Rsch., Oct. 2016), <https://www.huduser.gov/portal/sites/default/files/pdf/Family-Options-Study-Full-Report.pdf>.

⁷ U.S. Dep’t of Hous. & Urb. Dev., The Family Options Study, HUD User, https://www.huduser.gov/portal/family_options_study.html.

is with incentives for housing that is conditioned on abstinence or on participation in services. Recovery from substance use disorder is rarely a straight line, and relapse is a common part of it⁸. When housing depends on sobriety, a relapse means eviction, and in Massachusetts, people experiencing homelessness have died of opioid overdose at 16 to 30 times the rate of the general population.⁹ Research summarized by J-PAL North America finds that Housing First produces substance use outcomes similar to treatment-first housing while producing far greater housing stability¹⁰. Harm reduction keeps people alive, housed, and connected to the services that make recovery possible.

Mandatory participation agreements raise the same problem. HUD-VASH, which the notice cites as its model, pairs a permanent housing voucher with well-resourced VA case management. It does not make housing contingent on sobriety, and its success cannot be separated from the permanent subsidy at its core. In our experience, people engage with case management because they trust it, not because they are compelled to participate. Participation requirements also fall hardest on people who face real barriers to services. When services are not available in a person's language, near their home, or around their work or caregiving schedule, failing to participate should never cost them their housing.

5. Homelessness is a poverty issue, not a crime issue

The households OHS serves often lose housing because they cannot pay the rent. In 2025, 71% of Somerville eviction filings were for non-payment, with median arrears of \$3,616¹¹. Among OHS clients with known income, 27% reported monthly income under \$1,000 or no income at all¹¹. Arrests, fines, and camping bans do not create housing. They create records that landlords screen for.

Of the 20 sources HUD cites for this activity, most are news stories, opinion pieces, press releases, or materials from advocacy organizations, including a poll. None are peer-reviewed evaluations of whether law enforcement partnerships reduce homelessness. Declines in visible encampments after camping bans, such as in Austin, do not show that fewer people are homeless; they may show only that people have moved somewhere less visible. The notice offers no data on exits to permanent housing, returns, arrests, injury, or deaths. HUD should separate voluntary, clinician-led crisis response, which has real value, from enforcement and criminal penalties, and should limit any incentive to the former.

Conclusion

For these reasons, the City of Somerville urges HUD to withdraw this determination. People cannot get a job, stay in recovery, or keep their children in school without a stable place to live. Housing is the foundation, and federal policy should continue to treat it that way.

Bia Moreira, Deputy Director
City of Somerville's Office of Housing Stability

⁸ National Institute on Drug Abuse, Drugs, Brains, and Behavior: The Science of Addiction – Treatment and Recovery, <https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/treatment-recovery>.

⁹ Mass. Dep't of Pub. Health, Data Brief: An Assessment of Opioid-Related Overdoses in Massachusetts 2011–2015 (Aug. 2017), <https://www.mass.gov/doc/data-brief-chapter-55-opioid-overdose-study-august-2017/download>.

¹⁰ J-PAL North America, Housing First (evidence brief), https://www.povertyactionlab.org/sites/default/files/publication/Housing-First_JPALNA.pdf

¹¹ [OHS 2025 Annual Report](#)