



The Delta Variant: 5 Ways Communities Can Protect People Experiencing Homelessness

The [Delta variant of COVID-19](#) is spreading rapidly in the United States, particularly in places with low vaccination rates and among unvaccinated people. The following recommendations from the U.S. Interagency Council on Homelessness, and other federal and national partners¹, are informed by CDC guidance to help communities protect people experiencing homelessness from contracting COVID-19 and becoming severely ill or dying. These recommendations should be implemented immediately to mitigate the spread of COVID-19 and to save lives. (For long-term strategies, read the CDC's interim guidance to [protect people experiencing unsheltered homelessness](#) and to [protect people in homeless service settings](#), such as shelters and meal service locations.)

Click below for more information on implementing and funding these strategies.

1. [Encourage and support vaccinations.](#)
2. [Strengthen routine testing, especially in congregate facilities.](#)
3. [Continue to use COVID-specific non-congregate shelter \(NCS\) for people who test positive, were exposed, or are at high risk of severe illness or death.](#)
4. [Maintain or re-institute COVID-19 mitigation protocols.](#)
5. [Continue to rehouse as many people as possible.](#)

For help implementing these strategies, request HUD technical assistance through the [TA portal](#) or by contacting your [local HUD Field Office](#). Communities can also contact their [USICH Regional Coordinator](#).

1. Encourage and support vaccinations.

The Delta variant is more than two times as transmissible as previous variants, and vaccines are the most effective means to prevent infection and control community transmission. Breakthrough cases among vaccinated people can happen, but vaccination can also prevent severe illness, hospitalization, and death. It's critical that homeless services staff and volunteers get vaccinated as soon as possible, and that clients are continually encouraged and offered opportunities to be vaccinated. Communities encountering vaccine hesitancy can consider strategies like hiring vaccine ambassadors or utilizing incentives. It's important to note that while all homeless services staff, volunteers, and clients should get vaccinated as soon as possible, *being fully vaccinated should not be treated as a prerequisite to receiving shelter, housing, or services.*

¹ The Department of Health and Human Services (HHS), the Department of Housing and Urban Development (HUD), the Department of Veterans Affairs (VA), the National Alliance to End Homelessness (NAEH), and the National Health Care for the Homeless Council (NHCHC) all contributed to this guidance.

Helpful Resources:

- [Interim Guidance for Health Departments: COVID-19 Vaccination Implementation for People Experiencing Homelessness](#) (CDC)
- [COVID-19 Vaccination for People Experiencing Homelessness: Frequently Asked Questions](#) (CDC)
- [COVID-19 Vaccine Equity for Racial and Ethnic Minority Groups](#) (CDC)
- [COVID-19 Homeless System Response: Vaccine Planning and Distribution](#) (HUD)
- [HUD Secretary Fudge, HHS Secretary Becerra Announce Joint Effort to Increase Access to COVID-19 Vaccinations](#) (HUD/HHS)
- [COVID-19 Vaccinations and Testing Toolkit](#) (HUD/HHS)
- [Utilizing Incentives to Increase Vaccine Adherence](#) (HUD)
- [Vaccine Ambassador Program and Job Description](#) (HUD)

2. Strengthen routine testing, especially in congregate facilities.

Widespread testing, regardless of signs or symptoms, is a key component of a layered approach to prevent transmission in congregate settings. Data on community-transmission levels can guide decisions about testing strategies in homeless shelters and encampments. For example, in counties with high levels of transmission, the CDC recommends facility-wide testing at least weekly with follow-up testing if cases are identified. The Department of Health and Human Services (HHS) recently announced plans to invest \$80 million to support state and local testing and mitigation for people experiencing homelessness, residents of congregate settings including group homes, and encampments. Homeless services system leaders should coordinate with their state health departments regarding deployment of these resources to ensure they're reaching people experiencing homelessness.

Helpful Resources:

- [Interim Guidance for SARS-CoV-2 Testing in Homeless Shelters and Encampments](#) (CDC)
- [COVID Data Tracker](#) (CDC)
- [Biden Administration to Invest More Than \\$1.6 Billion to Support COVID-19 Testing and Mitigation in Vulnerable Communities](#) (HHS)
- [Performing Broad-Based Testing for SARS-CoV-2 in Congregate Correctional, Detention, and Homeless Service Settings](#) (CDC)
- [Directory of State and Territorial Health Departments](#) (CDC)

3. Continue to use COVID-specific non-congregate shelter (NCS) for people who test positive, were exposed, or are at high risk of severe illness or death.

Many communities are leveraging FEMA Public Assistance to fund COVID-specific non-congregate shelter (NCS), although other funding sources, including Emergency Solutions Grants (ESG-CV) and Community Development

Block Grants (CDBG-CV), may also be used. COVID-specific NCS typically refers to temporary housing—often provided in hotels and motels—that’s used to either:

1. Isolate individuals who have tested positive but do not require hospitalization;
2. Quarantine individuals who have been exposed to COVID but do not require hospitalization; or
3. Protect asymptomatic, high-risk individuals as a precaution. This group could include people over 65 or people with certain underlying health conditions (refer to the CDC’s [Table of Risk list](#) of applicable underlying health conditions).

Depending on the level of community transmission, communities that have begun to deactivate or have discontinued COVID-specific NCS may need to pause or re-activate operations.

Helpful Resources:

- [Fact Sheet: Public Assistance: Non-Congregate Sheltering Delegation of Authority](#) (FEMA)
- [Frequently Asked Questions: Coronavirus \(COVID-19\) Pandemic: Non-Congregate Sheltering](#) (FEMA)
- [Memorandum for Regional Administrators, Update to Non-Congregate Sheltering Delegation of Authority Public Assistance Program and Policy Guide Waiver, December 16, 2020](#) (FEMA)
- [Federal Funding Priority Order for Non-Congregate Shelter During COVID-19](#) (HUD/FEMA/CDC)

4. Maintain or re-institute COVID-19 mitigation protocols.

For shelters and other congregate facilities, prevention strategies should include measures such as masking, physical distancing, cleaning, and adequate ventilation. *Regardless of vaccination status, all homeless services staff, volunteers, and clients should continue wearing masks and physically distancing.* For encampments and other unsheltered locations, prevention strategies should include access to handwashing facilities and hygiene materials, requirements for outreach staff to wear masks and maintain at least six feet of distance in interactions with clients, and regular assessment of clients for symptoms. Consistent with previous guidance, communities should allow people living unsheltered or in encampments to remain where they are unless individual housing options (such as an individual apartment or COVID-specific NCS) are available.

Helpful Resources:

- [Interim Guidance for Homeless Service Providers to Plan and Respond to Coronavirus Disease 2019 \(COVID-19\)](#) (CDC)
- [Interim Guidance on People Experiencing Unsheltered Homelessness](#) (CDC)
- [Interim Guidance for SARS-CoV-2 Testing in Homeless Shelters and Encampments](#) (CDC)
- [Screening Clients for COVID-19 at Homeless Shelters or Encampments](#) (CDC)
- [Biden Administration to Invest More Than \\$1.6 Billion to Support COVID-19 Testing and Mitigation in Vulnerable Communities](#) (HHS)

5. Continue to rehouse as many people as possible.

Stable, permanent housing provides the most cost-effective means to prevent and mitigate the spread of COVID-19 among people experiencing homelessness while also providing a platform to other positive health, educational, and economic outcomes that make maintaining housing easier. Resources from the American Rescue Plan (ARP) and the CARES Act—including the HOME Investment Partnerships Program and the Emergency Housing Voucher Program—could help rehouse more people than ever before: up to 211,000 households over the next few years. Moving people to permanent housing must remain an urgent priority for communities as they continue to address the more emergent needs presented by the COVID-19 pandemic.

Helpful Resources:

- [Rehousing Efforts Tools and Resources](#) (HUD)
- [American Rescue Plan Resources Could Help House Hundreds of Thousands of Households Experiencing Homelessness](#) (HUD)
- [Emergency Housing Vouchers](#) (HUD)
- [HOME-ARP Program](#) (HUD)

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