CITY OF SANTA FE

Homelessness Response Strategy

2026 Comprehensive Update

A strategic framework for a system in transition — aligning shelter, bridge housing, permanent housing, prevention, and cross-sector services amid significant local and federal change.

Contents

This update to the City of Santa Fe's 2026 Homelessness Response Strategy reflects a community at an important turning point. The long-term goal remains the same: homelessness is best resolved through stable housing, supported by services when needed. But achieving that goal depends on maintaining a functioning continuum of care while new housing and shelter options are developed.

Today, that continuum is under increasing strain because three critical local timelines are converging.

The first is the future of **Agape House**, now the city's primary shelter. The building is being offered for sale, with no replacement site identified. The second is the **Senior Bridge Program**, which has provided motel rooms for medically fragile older adults since 2025 but lost its dedicated funding at the end of June 2026 and is currently operating month to month. The third is the planned **Richards Avenue micro-community**, which remains delayed in permitting and zoning more than a year after approval.

City officials have identified the micro-community as a potential destination for seniors currently living in motel rooms, yet the timelines do not align, and many medically fragile older adults would require housing with greater accessibility and support than a pallet shelter community is designed to provide.

These are not three separate challenges. They are three overlapping deadlines. Each assumes another part of the system will be ready in time to absorb the people it serves. At present, none of those assumptions is certain.

At the same time, the broader environment is becoming more difficult. Federal changes to Medicaid, SNAP, and housing programs are expected to increase demand for services while placing additional financial pressure on the nonprofit providers that make Santa Fe's homelessness response possible, and affordable housing and permanent supportive housing production have failed to keep pace with growing need. One development partly offsets this picture: in July 2026, Congress enacted the 21st Century ROAD to Housing Act, the first major federal housing legislation in three decades. It does not reverse the pressures described above, but it opens tools Santa Fe should pursue immediately, most notably a new waiver allowing Emergency Solutions Grant recipients to direct a larger share of funding toward emergency shelter and street outreach (Section 2.5).

The central message of this strategy is simple: **Santa Fe cannot afford to lose existing capacity before appropriate replacement capacity exists.** The city needs every part of its current homelessness response system (including Agape House, the Senior Bridge Program, Consuelo's Place, St. Elizabeth Shelter, Esperanza Shelter, street outreach, and other community partners) while continuing to expand new housing options. New investments should strengthen the continuum, not replace programs that remain essential.

This strategy recommends resurrecting guaranteed emergency shelter, strengthening bridge housing, expanding permanent housing opportunities, supporting the nonprofit providers that deliver these services, and improving coordination across the system. Most importantly, it recognizes that not every housing solution serves every population. A successful homelessness response requires enough capacity, the right kinds of housing, and careful coordination so that no one loses shelter before a more appropriate option is available.

The strategic imperative

Santa Fe must rebuild guaranteed emergency shelter capacity, formalize and expand its bridge housing continuum for those falling into homelessness or waiting for housing placement, protect its permanent housing pipeline against federal cuts, and stabilize the reimbursement-funded nonprofits that carry much of the system — all at once, and with less certain federal support than at any point in the last decade.

The 2026 compounding risk

Santa Fe cannot treat the Agape House building sale, the senior bridge program's funding cliff, and the micro-community's unresolved permitting timeline as three separate issues. They are converging on the same calendar. Losing guaranteed shelter capacity, guaranteed bridge capacity, and a promised interim-housing expansion in the same window would not shrink the system to something leaner — it would remove doors faster than any new door can open, forcing more people onto waitlists, into cars, and onto the street. Every existing program — Agape House, the senior bridge program, Consuelo's Place, St. Elizabeth Shelter, Esperanza, the Micro-Community at Arroyo Chamiso, and the rest of the provider network — must remain funded and open through this transition. The opening of one new micro-community on Richards Avenue does not replace any of them; it is one additional door in a system that needs every door it already has.

This strategy responds to that imperative through an interconnected continuum: prevention and diversion; guaranteed low-barrier emergency shelter; a modernized bridge housing model; permanent supportive and rapid re-housing; and the cross-sector systems — school-based McKinney-Vento supports, street outreach, storage, coordinated entry, and regional CoC collaboration.

2. What Has Changed Since 2024

2.1 Santa Fe's Shelter System Has Been Restructured

The single most significant local change is the transformation of the Cerrillos Road shelter. In mid-2025 the City terminated the Interfaith Community Shelter's lease at the city-owned building at 2801 Cerrillos Road and brought in Urban Alchemy, a California-based organization, to operate the facility — now renamed Agape House (the site long known as Pete's Place).

- **No guaranteed emergency shelter:** Advocates and community members have noted that, functionally, Santa Fe no longer operates a traditional guaranteed-access emergency shelter. Agape House operates as a managed facility with a waitlist, meaning same-night, no-barrier emergency beds are not reliably available to everyone who needs one.
- **Higher cost, lower capacity model:** The City's shelter spending has risen dramatically under the new structure — from roughly $158,000/year historically provided to Interfaith to a shelter operating contract of $1.5 million (later amended upward), alongside a separate multi-year street outreach contract. This reflects a national tension between managed, security-oriented models and lower-cost, volunteer-supported community models.
- **Consuelo's Place as the default catch-all with significant expanded need:** With emergency capacity constrained, Consuelo's Place has increasingly absorbed people the rest of the system cannot place (including respite and non-active DV placements). This is a mismatch: Consuelo's Place is designed and best suited to serve seniors and families, not to function as the community's undifferentiated emergency backstop. Resolving this mismatch is a central goal of this strategy.

> **Why this matters**
> A homelessness system without a guaranteed emergency shelter front door pushes unmet need onto street outreach, hospitals, jails, and providers like Consuelo's Place that were built for specific populations. Rebuilding a reliable, low-barrier emergency entry point is foundational to everything else in this plan.

2.2 The Federal Safety Net Is Contracting

Santa Fe's homelessness system does not operate in isolation — it is heavily dependent on federal programs that are being cut, restructured, or destabilized. Key developments:

- **Medicaid and SNAP cuts:** Federal legislation enacted in 2025 imposed deep cuts and new work-requirement eligibility rules on Medicaid and SNAP. Because both programs free up household budgets for rent, national analysts (including the Center on Budget and Policy Priorities) warn these cuts directly increase housing instability and homelessness risk.
- **ACA subsidy expiration:** Enhanced Affordable Care Act premium subsidies expired at the end of 2025, raising health-care costs for lower-income households and further squeezing budgets already strained by housing costs.
- **New Mexico's state-level response, and its limits:** The New Mexico Legislature has moved to backfill part of this gap, but not all of it. The state budget (HB 2) includes new state funding to preserve Medicaid coverage for lawfully present immigrant enrollees who would otherwise lose it, and a separate bill (HB 4) increased distributions from the state's Healthcare Affordability Fund and Behavioral Health Program Fund — financed by a surtax on health insurance companies — specifically to help absorb the cost of expired ACA subsidies and Medicaid cuts. The state has used the Healthcare Affordability Fund to hold BeWell marketplace subsidies stable through Plan Year 2026 and, as of the 2026 legislative session, through June 30, 2027. Even so, between roughly 15,300 and 27,100 New Mexicans could still lose Marketplace

coverage without continued state support — and every state dollar redirected to this backfill is a dollar that competes directly with the Behavioral Health Services Division funding streams Santa Fe's own providers, including Linkages, depend on.

- **HUD Continuum of Care disruption:** The Administration's FY2026 budget proposed eliminating the dedicated CoC Program and consolidating homeless assistance into the Emergency Solutions Grant (ESG) program — a change that, if enacted, would end dedicated funding for Permanent Supportive Housing (PSH), which ESG does not allow. National estimates placed roughly 170,000 units of PSH nationwide at risk. Separately, HUD issued, then rescinded, a CoC funding notice with major scoring and policy changes, creating timing chaos and funding gaps for communities on 2026 grant cycles.
- **Permanent housing funding reductions:** Independent reporting indicates HUD moved to cut permanent housing funding within the Continuum of Care significantly starting in 2026 — a reduction measured in the billions nationally — with rapid re-housing and supportive services among the first casualties as providers triage limited dollars.
- **Emergency Housing Voucher cliff:** Funding for the Emergency Housing Voucher (EHV) program — which supports tens of thousands of households nationally — is projected to run out in 2026 absent congressional action, threatening people currently housed through the program.
- **The end of ARPA / pandemic-era relief funds:** Perhaps the largest single fiscal shift is the expiration of American Rescue Plan Act (ARPA) State and Local Fiscal Recovery Funds (SLFRF). Under Treasury rules, these funds had to be obligated by December 31, 2024 and fully expended by December 31, 2026 — meaning the pandemic-era money that quietly propped up shelter, outreach, rental assistance, and homelessness programs across the country is ending now, with no replacement stream behind it. This is covered in detail in Section 2.3 because of its outsized local impact.

2.3 The ARPA Cliff: The Quiet Fiscal Emergency

Layered on top of the federal cuts above is a distinct and equally serious problem: the end of pandemic-era relief funding. The American Rescue Plan Act (ARPA) delivered $350 billion in State and Local Fiscal Recovery Funds beginning in 2021, and across the country a large share flowed — directly or indirectly — into homelessness and housing-stability programs: emergency rental assistance, shelter operations, outreach, hotel/motel non-congregate sheltering, and provider capacity. That money is now ending.

- **The hard deadlines:** Per U.S. Treasury rules, ARPA SLFRF dollars had to be obligated (committed via contract or subaward) by December 31, 2024, and must be fully spent by December 31, 2026. After the obligation deadline, jurisdictions generally cannot re-obligate or add new obligations. In practical terms, 2026 is the last year this money exists — and unspent funds are returned to Treasury.
- **Santa Fe's own ARPA exposure:** The City of Santa Fe received $15 million in ARPA State and Local Fiscal Recovery Funds, and directed the largest single share — $6.9 million, or

45.9% — to community health and safety, including homelessness response. That funding did real, measurable work: it financed the City's first pilot micro-community (the same pallet-shelter model now central to Section 2.4 and Section 5.4), expanded street outreach from one worker to six, and delivered $2.5 million in direct cash assistance that helped more than 1,000 Santa Fe households catch up on rent, utilities, and other essential costs. Every dollar of this funding disappears on the same December 31, 2026 deadline described above, with no replacement source yet identified for any of these three uses.

- **The scale of the shock:** The National League of Cities reports that 69% of city leaders expect negative budget impacts once ARPA funding ends. The Government Finance Officers Association warned from the outset that ARPA was non-recurring and should not fund ongoing programs — yet many jurisdictions used it, at least partly, to sustain services that now have no funding source. Brookings documented that the single largest use of SLFRF nationally was “revenue replacement” — backfilling general budgets — which means the cliff is often invisible until the program it quietly supported suddenly cannot be paid for.
- **Why homelessness services are especially exposed:** Homelessness programs were prime candidates for one-time ARPA dollars because need spiked during the pandemic and the funds were flexible. Emergency rental assistance in particular was heavily ARPA-funded nationwide; as those dollars expire, eviction-prevention capacity contracts precisely as rents remain high — a documented driver of increased homelessness.

The compounding effect for Santa Fe

The ARPA cliff, the Emergency Housing Voucher cliff, the Medicaid/SNAP cuts, and the CoC restructuring are not four separate problems — they are four simultaneous withdrawals of support hitting the same system in the same window (2025–2026). Any program or provider currently relying on ARPA or pandemic-era funds must be identified now and given a transition plan, or the City will face abrupt, unplanned service losses. Following GFOA guidance, one-time funds should never have been the base for recurring services; the corrective is to identify those exposed services and build sustainable local, state, health-system, and philanthropic replacement funding before the cliff, not after.

A note on the final outcome: Congress ultimately enacted an FY2026 THUD appropriations bill that was more protective than the Administration's proposal. This provided HUD roughly $77.3 billion, an increase over FY2025, including an increase for homelessness assistance grants and renewed tenant-protection vouchers. This means the most catastrophic scenarios were avoided at the appropriations level. However, the combination of enacted Medicaid/SNAP cuts, the EHV cliff, HUD's mid-cycle CoC notice disruption, and ongoing structural threats to the CoC model means Santa Fe must plan for a more constrained, less predictable federal funding environment than it operated under in 2024.

Planning assumption for Santa Fe

Assume federal support for permanent housing and reimbursement-funded services will be flatter, later, and less certain than in prior years. Build local reserves, diversify funding, and protect the permanent-housing pipeline as first-order priorities, not as contingencies.

2.4 The 2026 Convergence: Three Closures on One Calendar

Since the ARPA and federal pressures described above were first catalogued, three separate local timelines have converged into a single compounding emergency. Each is documented independently by City officials, providers, or local reporting; taken together, they describe a system where guaranteed shelter, guaranteed bridge housing, and a promised interim-housing expansion could all be reduced or lost at the same time, with no coordinated plan for where the people affected go instead.

- **Agape House's building is listed for sale:** The state grant that funds a year of Agape House operations required the City to list the city-owned Cerrillos Road building for sale by March 31, 2026, as a condition of that funding. Agape House has grown to roughly 100 beds (up from about 75) and, as of last winter, carried a waitlist of well over 100 people on top of that capacity. No alternative site or building has been identified. If the property sells before a replacement facility is secured and funded, the City will have to shelter its single largest concentration of emergency beds somewhere — and every month without an identified alternative is a month closer to having nowhere to put them.
- **The senior bridge (motel) program's funding has already lapsed once:** The motel-based senior bridge program — which has housed medically fragile older adults, including residents dependent on supplemental oxygen and people with recent hospitalizations — saw its dedicated funding contract expire at the end of June 2026. The City is covering the gap only on a temporary, month-to-month basis while it works to move residents into the still-unbuilt micro-community on Richards Avenue. Of the people served by this program to date, a majority have moved into permanent housing or another placement, but the program has also had to absorb participant deaths from underlying medical conditions while sheltered — a measure of how medically fragile this population is and how high the stakes are if the bridge closes before a suitable alternative exists.
- **The micro-community has no confirmed opening date:** The Richards Avenue micro-community was approved by the City Council in June 2025. As of this update, more than a year later, it remains stuck in zoning and permitting review: pallet-shelter villages are not currently a defined use in the City's land use code, so each site must be individually interpreted into an existing category (currently "residential care facility") rather than approved through a clear, repeatable process. A defined use category is expected as part of a future phase of the City's land use code rewrite, but no date has been set for either that code change or for the site's construction to be complete.

Why this matters

> These three timelines are not backup plans for one another — they are dependent on each other in a way none of them currently guarantees. The senior bridge program's planned exit is the micro-community. The micro-community's opening date is unknown. Agape House's long-term home is unresolved. If any one of these three pieces slips past the others, people move from a shelter, or a motel room, directly onto the street or into cars — not into a new door, because the new door is not yet built. A strategic plan has to treat these three timelines as a single, coordinated calendar, not three independent problems each provider or department is managing on its own.

- **Do not let the building sale outrun the relocation plan:** The Cerrillos Road building sale should not proceed without a signed, funded plan for where Agape House's beds relocate — the sale timeline and the shelter-relocation timeline must be sequenced together, not managed as two separate processes on two separate clocks.
- **Extend the senior bridge program's funding until its replacement actually exists:** Fund the motel-based bridge program on a rolling basis until the micro-community has a confirmed, City-Council-approved opening date — not indefinitely, but for exactly as long as the alternative it depends on remains unbuilt.
- **If the micro-community's opening date keeps slipping, reassign the funds committed to it:** Where operating and case-management dollars have already been committed to the Richards Avenue site, and the site continues to miss its opening milestones, those funds should be temporarily reassigned to the providers currently absorbing the resulting need — the senior bridge program, Consuelo's Place, and Agape House — so that money already budgeted for this population does not sit idle while people go without shelter. Section 5.4 describes the permitting reform that would prevent this reassignment from becoming necessary in the first place.

2.5 New Federal Legislation: The 21st Century ROAD to Housing Act (2026)

On July 11, 2026, Congress enacted the 21st Century ROAD to Housing Act, the first major federal housing legislation in over three decades. The bill passed both chambers by large bipartisan margins (358–32 in the House; 85–5 in the Senate) and became law without the President's signature. The Act is broad — covering zoning and land-use reform, manufactured and modular housing, HOME and CDBG program changes, and housing-finance provisions — but several provisions have direct, near-term relevance to this plan:

- **ESG spending-cap waiver:** The Act allows Emergency Solutions Grant (ESG) recipients to request a waiver of the statutory 60% cap on spending for emergency shelter beds and street outreach. Under prior law, no more than 60% of a jurisdiction's ESG allocation could go toward shelter and outreach combined, forcing a tradeoff against rapid re-housing and prevention spending even where local need was concentrated in a shelter gap. This is directly relevant to Santa Fe's ESG-funded programs — Safe Outdoor Space, Street Outreach, and the Bridge Senior Housing program — and is worth pursuing immediately given the funding-cap constraints described in Section 6.4.
- **Expanded Rental Assistance Demonstration (RAD) program:** The Act lifts the national RAD unit cap by 100,000 units and extends tenant protections, expanding the pool of public

housing eligible to convert to project-based Section 8 — a tool that can support the permanent housing pipeline described in Section 9.

- **Manufactured and modular housing reforms:** The Act eliminates the permanent chassis requirement for manufactured homes, directs HUD to set new energy-efficiency standards, and reauthorizes PRICE grants for manufactured-home community preservation. These provisions are relevant to any manufactured or modular components of the Richards Avenue micro-community or the apartment-based bridge model described in Section 6.2.
- **New conversion funding (RESIDE Act):** A new pilot grant program helps convert vacant commercial buildings into affordable housing — a potential funding source for the hotel/motel acquisition-and-remodel path (Option C) discussed for Consuelo's Place in Section 7.1.
- **Restored federal oversight:** The Act requires the U.S. Interagency Council on Homelessness (USICH) to report annually on its progress reducing homelessness, restoring a layer of federal accountability.

The Act does not reverse the federal contractions described in Section 2.2 — CoC/ESG consolidation risk, Medicaid/SNAP cuts, and the Emergency Housing Voucher funding cliff remain live threats — but it opens specific new tools, particularly the ESG spending-cap waiver, that Santa Fe should pursue immediately given the plan's existing funding constraints on shelter and bridge housing capacity.

3. National Context & How Homelessness Is Measured

Effective local strategy depends on understanding both national trends and how homelessness is counted, as the counting method determines who becomes visible to the system and who does not.

3.1 Two Federal Definitions, Two Different Pictures

- **HUD's definition (narrower):** HUD counts people who are "literally homeless" — in shelters, transitional housing, or places not meant for habitation. HUD data comes from the annual Point-in-Time (PIT) Count conducted each January and the year-round Homeless Management Information System (HMIS). In New Mexico, the New Mexico Coalition to End Homelessness coordinates the PIT count and HMIS across the state's Continuums of Care.
- **The Department of Education's definition (broader):** Under the McKinney-Vento Homeless Assistance Act, children and youth living doubled-up, in motels, or in other unstable situations count as homeless. This consistently reveals a much larger population of housing-insecure families and children than HUD's count captures — a population highly relevant to Santa Fe given Consuelo's Place's family focus and the role of local school districts.

Implication for Santa Fe

Because families and children are systematically undercounted in HUD data, planning that relies solely on PIT/HMIS numbers will understate family need. Santa Fe should integrate school-district McKinney-Vento data into its planning to see the full picture of need.

3.2 National Trends

- **Rising overall and record highs:** Homelessness has risen to record levels nationally in recent counts, driven primarily by the gap between housing costs and incomes rather than by individual factors.
- **Family and senior homelessness growing fastest:** Family homelessness and senior (older-adult) homelessness have both risen sharply since the pandemic — precisely the populations Consuelo's Place is built to serve, and precisely the populations most threatened by Medicaid, SNAP, and rental-assistance cuts.
- **Chronic homelessness up:** Chronic homelessness — long-term homelessness paired with a disabling condition — has grown over the past decade, underscoring the need to protect Permanent Supportive Housing even as federal PSH funding is threatened.

4. The Santa Fe Continuum: How the Pieces Fit

Santa Fe's response should be understood as a single continuum, not a set of disconnected programs. A person should be able to move from crisis to stability through clearly connected stages, with no dead ends. Providers do their best to configure a smooth transition, but face funding gaps, expanding need, and few housing options.

The stages below form the backbone of this strategy.

1 Prevention & Diversion	2 Emergency Shelter	3 Bridge Housing	4 Permanent Housing	5 Wraparound Services

- **Prevention & Diversion** — keeping people housed before they lose housing, and diverting them from the shelter system into safe alternatives at the front door.
- **Emergency Shelter** — guaranteed, low-barrier, same-night safety for anyone in crisis. This is the stage most weakened by the 2025 shelter restructuring and the top rebuild priority.
- **Bridge Housing** — stable, service-enriched transitional housing for people who have a housing pathway (e.g., a voucher or pending placement) but cannot move in immediately. Santa Fe's senior bridge model lives here.
- **Permanent Housing** — Permanent Supportive Housing (PSH) and Rapid Re-Housing (RRH), are the piece’s most exposed to federal CoC cuts. They are also the most significant tool for permanent stability.
- **Wraparound Services** — outreach, coordinated entry, storage, McKinney-Vento and Adelante school supports, behavioral health, and benefits navigation that make every other stage work. These supports should be offered at all stages of the continuum.

5. Rebuilding Guaranteed Emergency Shelter

The 2025 restructuring left Santa Fe without a reliably available, low-barrier emergency shelter front door. Agape House, operated by Urban Alchemy on Cerrillos Road, functions as a managed transitional facility with a waitlist rather than a same-night guaranteed-access shelter. This is the system's most urgent gap.

5.1 The Evidence Base for Low-Barrier Shelter

The case for a guaranteed, low-barrier emergency shelter is not a matter of opinion — it is supported by federal guidance and peer-reviewed research:

- **USICH best practice:** The U.S. Interagency Council on Homelessness (USICH), the federal body coordinating national homelessness policy, identifies low-barrier, housing-focused emergency shelter as a core system component, emphasizing that shelters should minimize entry requirements (no sobriety, income, or ID preconditions), be accessible, and maintain clear pathways to permanent housing. High-barrier intake processes are documented to screen out the most vulnerable people — exactly those the system most needs to reach.
- **Peer-reviewed harm evidence:** Research published in JAMA and the American Journal of Public Health finds that unsheltered individuals experience mortality rates several times higher than the general population and higher than sheltered homeless individuals, driven by exposure, untreated illness, and violence. A guaranteed shelter door is, literally, a mortality-reduction intervention.
- **Why congregate design alone is not enough:** The case above is for guaranteed shelter existing at all, and for that shelter being low-barrier in design — it is not an argument against congregate shelter as one component of the system. But the evidence also shows why low-barrier design cannot stop at removing intake preconditions. Peer-reviewed work in Social Service Review and Housing Studies documents that congregate shelters, even well-run ones, often operate at capacity, cannot accommodate partners or pets, and feel unsafe to trauma survivors — leading many people to remain unsheltered rather than use a congregate bed even when one is available. For this subset of the population, no amount of low-barrier redesign of a congregate shelter solves the problem, because the barrier is the setting itself, not the intake rules. That is why guaranteed congregate shelter and expanded non-congregate options (Section 5.3) are both necessary and address two different groups of people — not competing solutions to the same gap.
- **Denver's validation:** Denver's independently evaluated “All In Mile High” initiative reduced unsheltered homelessness 45% (2023–2025) in significant part by rapidly standing up low-barrier, non-congregate shelter where residents could keep pets and possessions — which participants reported as safer and more effective than prior congregate options (Urban Institute evaluation).

5.2 Recommendations

- Re-establish a guaranteed low-barrier emergency shelter option (whether through an expanded/modified Agape House mandate, a second site, or a partnership model) so that no one in Santa Fe is turned away from same-night safety.
- Adopt USICH low-barrier standards: minimize entry requirements, ensure accessibility, and build explicit pathways from shelter to housing so shelter is a bridge, not a terminus.
- Separate "emergency" from "transitional" functions so that waitlisted transitional beds are not mistaken for emergency capacity in system planning and public communication.
- Protect and formalize food access at and around any shelter site, addressing gaps that emerged during the 2025 transition.

5.3 Non-Congregate & Interim Options

- Preserve and expand non-congregate options (pallet micro-communities, private-room/motel models, and the historical faith-based seasonal network) as complements to a guaranteed core. Providers report Santa Fe's pallet models are working with demand far exceeding supply, consistent with the National Alliance to End Homelessness finding that Safe Outdoor Spaces / micro-communities measurably reduce street homelessness. Planning for long-term financial security for these programs is essential.

Consuelo's Place is itself a live, local example of this principle: it already operates as a non-congregate, service-enriched option for seniors and families, and providers consistently point to it as evidence that this model works in Santa Fe specifically. The problem is not the model — it is capacity: Consuelo's Place has been stretched to also absorb general emergency overflow it was never designed for, at the direct expense of the senior and family capacity this evidence base calls for. Section 7 addresses this mismatch, and the facility and funding recommendation, in detail.

5.4 Streamlining Permitting and Zoning for Micro-Communities

Santa Fe's own experience with the Richards Avenue site illustrates a solvable structural problem, not a case-specific delay. Pallet-shelter and tiny-shelter micro-communities are not currently defined as a distinct use in the City's land use code; each proposed site must instead be interpreted into an existing category on a case-by-case basis, which invites exactly the kind of open-ended zoning and permitting review that has stalled the Richards Avenue site for more than a year past its City Council approval. Other cities have already solved this problem, and Santa Fe does not need to invent a new approach — it needs to adopt one.

- **Denver, Colorado:** In 2019, Denver amended its zoning code to create a defined "Tiny Home Village" land use, permitted (subject to a time-limited permit) in nearly every zoning district in the city rather than requiring a rezoning fight at each new site. In 2023, the City consolidated this with its Safe Outdoor Space rules into a single "Temporary Managed Communities" category, giving operators one predictable path to a permit instead of a novel negotiation each time. City officials and advocates credit this single change with allowing new tiny-home villages to open in Denver without the years-long, site-by-site struggle Santa Fe is currently experiencing.

- **Seattle, Washington:** Seattle's land use code has, since 2019, classified tiny-house villages as a "transitional encampment," a defined interim use permitted through an administrative (non-discretionary) Type I decision rather than a lengthy legislative or discretionary process. In 2026 the City went further, exempting emergency shelters and nonprofit housing from certain layers of environmental review and raising per-site capacity limits specifically to speed shelter delivery; City officials estimated the permitting changes alone could shorten development timelines by five to twelve months.
- **The common thread:** Both cities' reforms share the same structure — a specific, defined land-use category for micro-shelter communities, written into the code once, rather than negotiated site-by-site. That single change converts a discretionary, multi-department, multi-hearing process, of the kind Santa Fe's Richards Avenue site has been through for over a year, into a predictable, administrative one, without lowering safety or design standards.

Recommendation: define micro-communities in Santa Fe's land use code

As part of the City's ongoing Land Development Code rewrite, adopt a defined "micro-community" or "temporary managed community" use category — modeled on Denver's and Seattle's — that specifies where these sites are allowed, sets objective design and safety standards, and routes approval through an administrative (staff-level) permit rather than a full discretionary review at every location. This does not lower safety or design standards; it replaces an undefined, case-by-case interpretation with a predictable, repeatable one. Absent this change, every future micro-community Santa Fe attempts to site will face the same multi-year uncertainty the Richards Avenue site has faced, regardless of how much community support or Council approval it has already secured.

6. Bridge Housing: From Hotel-Based to Apartment-Based

Bridge housing is the connective tissue between crisis and permanent housing: it stabilizes people who have a housing pathway but no immediate unit to move into. Santa Fe has operated a senior bridge model using a hotel/motel-based approach. This strategy recommends evolving that model toward an apartment-based bridge.

6.1 The Current Senior Bridge (Hotel/Motel) Model

The senior bridge program has used a hotel-room-based model to provide immediate, safe, service-enriched accommodation for older adults experiencing homelessness while they await permanent or senior housing placement. This model has real strengths: rapid stand-up, immediate safety, private rooms, and on-site case management. Interfaith and other partners have contributed to bridge-related support even after exiting the shelter-operator role.

6.2 Why Move to an Apartment-Based Bridge

While hotel-based bridge housing solves the immediate-safety problem, an apartment-based bridge model better serves the seniors and families this system prioritizes, and better prepares residents for permanent housing. Recommended shift:

- **Dignity and normalcy:** Apartment units — with a kitchen, private bath, and living space — restore the daily rhythms of independent living far better than a single hotel room, which matters especially for seniors managing health conditions and for families with children.
- **Skill-building for permanence:** Living in an apartment-style unit lets residents practice the exact skills (cooking, budgeting, tenancy routines) they will need to sustain permanent housing, reducing returns to homelessness.
- **Family suitability:** Hotel rooms are poorly suited to families with children; apartment units provide appropriate space, privacy, and stability for the family population Consuelo's Place serves.
- **Cost and control over time:** Master-leased or dedicated apartment units can offer more predictable costs and greater programmatic control than per-night hotel arrangements, and align with the City's existing master-leasing strategy.
- **Health and aging-in-place fit:** Apartment settings better accommodate mobility needs, in-home services, and the medical complexity common among unhoused seniors.

6.3 The Evidence for Non-Congregate & Interim Housing

- **Non-congregate models improve outcomes for vulnerable groups:** The Santa Fe provider network and national research agree that non-congregate shelter, professionally managed Safe Outdoor Spaces, pallet/modular interim housing, and private-room models produce better outcomes for medically fragile individuals, survivors of violence, families, seniors, and high-trauma populations than congregate settings. During COVID-19, non-congregate sheltering was adopted nationally precisely because private rooms reduce disease transmission and improve safety — benefits that persist beyond the pandemic.
- **Denver proved it at scale:** Denver's independently evaluated hotel-conversion and micro-community models were reported by residents as safer, cleaner, and more supportive than prior congregate shelter, and were central to a 45% reduction in unsheltered homelessness — direct evidence that private-room/apartment-style interim housing outperforms congregate beds (Urban Institute).
- **Interim housing must connect to permanent exits:** USICH and the Denver evaluation both stress that interim/bridge housing only reduces homelessness when paired with permanent-housing exits. Successful exits to permanent housing — not interim beds alone — are the driving force behind reduced homelessness. An apartment-based bridge that builds tenancy skills directly improves the odds of a successful permanent exit.

Recommendation

Transition the senior bridge program from a hotel/motel-based model to an apartment-based bridge model — using master leasing and dedicated units — while preserving the immediate-safety and on-site case-management strengths of the current approach. Sequence the transition so no current resident loses shelter during the shift, and ensure every bridge placement is paired with an active permanent-housing plan.

6.4 Why the Senior Bridge Program Must Not Close

As Section 2.4 describes, the City's senior motel bridge program lost its dedicated funding at the end of June 2026 and is being kept alive only temporarily while officials work to move participants into the still-unbuilt Richards Avenue micro-community. This plan recommends against closing the program, or shrinking it below current need, for reasons grounded in both the population it serves and the national evidence on senior homelessness.

- **The population is medically fragile by design, not by exception:** The program was created specifically for chronically homeless seniors with significant health needs; participants have included people dependent on supplemental oxygen, people with recent hospitalizations, and people managing multiple chronic conditions. The program has also had to absorb participant deaths from underlying medical conditions while sheltered — a measure of how acute the medical need in this population already is.
- **National research confirms this is the norm, not the exception, for homeless seniors:** The HOPE HOME study, a longitudinal University of California, San Francisco research cohort of homeless adults 50 and older, found that nearly four in ten had difficulty performing at least one basic activity of daily living, and that over half had difficulty with self-care — compared with roughly 5 to 20 percent of housed adults over 65 nationally. Researchers describe this population as experiencing "accelerated aging," developing geriatric conditions such as falls, incontinence, and cognitive impairment roughly two decades earlier than their housed peers. Homeless seniors are not simply older; they are, medically, elderly far sooner than their birth year would suggest.
- **Need already exceeds the program's capacity, by funding decision, not by lack of demand:** The motel program has served a limited number of seniors at a time since 2025, a cap set by available funding rather than by the size of the need. Santa Fe's senior homeless population is far larger than the number of beds this program has ever had, and it is one of the fastest-growing subpopulations in the city's entire homeless response system (Section 3.2). Closing or shrinking the program does not reduce that need; it simply moves unmet need from a funded waitlist to the street.
- **The planned replacement — a Pallet micro-community — was not designed for this population:** See Section 6.5.

The bottom line on the senior bridge program

A population with this level of documented medical fragility needs a model built around private, weather-protected rooms, indoor plumbing, and rapid staff response to a medical event — precisely what the current motel-based bridge model provides, and precisely what a pallet-shelter micro-community, by design, does not. The City should treat the senior bridge program as a protected, must-fund line item, not a bridge to be dismantled once a lower-cost alternative exists on paper, especially when that alternative is not yet built and was not designed for this population's medical needs.

6.5 Micro-Communities Are Not a Substitute for High-Medical-Need Seniors

Santa Fe's Pallet micro-community model has real strengths, documented throughout this plan (Sections 5.3, 6.3, 8.5): it is fast to deploy, popular with the individuals and couples it was designed for, and validated by peer-city experience as safer than unmanaged street homelessness. It is also, by its physical design, poorly suited to a significant share of the senior population currently in the motel bridge program.

- **Physical design mismatch:** Pallet shelter units are small, freestanding structures without private plumbing; residents typically use shared, sometimes outdoor, bathroom and shower facilities located elsewhere on site. For a population with elevated rates of incontinence, mobility limitations, and fall risk, as documented in Section 6.4, a nighttime walk across an outdoor site to a shared bathroom is not a minor inconvenience; it is a fall risk and a dignity issue that a private motel room or apartment unit does not present.
- **Not every senior can navigate this model, and that is not a small caveat:** The Richards Avenue site was originally planned for families and children, with seniors added as a priority population only as the motel program's funding crisis forced the issue, not because the physical model was redesigned around seniors' needs. Some current motel-program residents will be able to transition successfully into a micro-community; others, particularly those with high medical need, mobility limitations, or cognitive impairment, will not be safely served by that setting no matter how the referral priority list is written.
- **The result if this is not corrected:** Treating the micro-community as a full substitute for the motel bridge program risks discharging medically fragile seniors into a setting that cannot safely serve them, or, if providers correctly decline to place them there, leaving them with no placement at all once the motel program's funding ends. Either outcome fails the population this plan identifies as one of the fastest-growing and most at-risk in the entire system.

Recommendation: match seniors to the setting their medical needs require

Use the planned micro-community expansion for what it is well suited to: individuals, couples, and others on Santa Fe's shelter waitlist who can safely navigate a non-congregate, low-barrier interim setting (Section 5.3). Reserve the motel- or apartment-based senior bridge model — private rooms, indoor plumbing, and rapid staff response — for seniors with high medical need, mobility limitations, or cognitive impairment, funding it as a protected line item rather than a temporary bridge to be phased out. Where a senior can safely and willingly transition to a micro-community, that frees a bridge placement for someone who cannot — but the City should not assume that transition is safe or appropriate for every current participant simply because it is the lowest-cost option on paper.

7. Consuelo's Place

Consuelo's Place is one of Santa Fe's most significant providers and, as of July 1, 2026, has transitioned to an independent 501(c)(3) organization. Its intended focus, the population it is structured and best equipped to serve, is seniors and families. The current reality is that Consuelo's Place has been functioning as the community's catch-all for emergency capacity as the number of shelter beds has shrunk, while facing the reality that their core service populations (seniors and families) are increasing rapidly.

7.1 The Structural Challenge

Consuelo's Place's mission cannot be separated from its physical home. In 2026 the Mayor of Santa Fe indicated that the City can guarantee Consuelo's Place's continued use of its current site for approximately two more years — a short runway for any organization that may need to relocate, and an especially tight one for a program simultaneously standing up as an independent 501(c)(3). Any facility strategy adopted now must work within, or actively extend, that window.

The current site has real, underappreciated advantages that should weigh heavily in this decision. It is an established, known location for the seniors and families who rely on it and for the referral partners (Adelante, hospitals, coordinated entry) who route people there. Critically, it already has a large kitchen, though it is not currently functional and would need to be repaired as part of any remodel. Once restored, this kitchen would support both congregate meal service and the kind of home-like daily routine that matters most for seniors managing health conditions and for families with children.

The building's dorm-style layout with interior hallways is also a genuine safety asset, not just a design feature. Interior corridors mean every room is reached through a supervised, staff-monitored hallway rather than a private exterior door — the same design logic that makes interior-corridor buildings safer for domestic violence survivors, since an abuser cannot approach a room directly from a parking lot or street. For children, interior halls keep every bedroom within easy sight and earshot of staff and other residents, reducing the isolation that predatory behavior depends on. For seniors managing chronic health conditions, climate-controlled indoor circulation and proximity to communal space mean staff and neighbors can respond to a medical event in minutes rather than hours, without residents having to cross outdoor walkways to reach a dining hall or bathroom. Taken together, the layout suits exactly the population Consuelo's Place is meant to serve.

Three broad paths are available, and they are not mutually exclusive:

- **Option A — Remain in place with a remodel and capital upgrade:** Invest in the current building: life-safety and code upgrades, accessibility improvements for an aging population, HVAC and building-envelope work, and reconfiguration of sleeping and program space to add capacity. This is the fastest and lowest-cost path (renovation of an already-occupied, already-permitted building typically runs months, not years) and it preserves the site's community familiarity. Its central risk is tenure: a remodel is only a sound investment if the City's commitment to the site extends meaningfully beyond the two-year window the Mayor referenced, so this path depends on securing a longer-term lease or ownership commitment alongside the capital investment.

- **Option B — New construction on raw/vacant land:** A purpose-built facility offers the greatest long-term design flexibility — a floor plan sized and configured specifically for seniors and families rather than adapted from another use. It is also the slowest and most expensive path. Comparable municipal and nonprofit ground-up shelter or supportive-housing projects nationally typically require 3–5 years from site identification through occupancy once land acquisition, environmental review, zoning/entitlement, design, capital fundraising, and construction are sequenced — a timeline that does not fit inside a two-year runway without a bridge plan. If pursued, this option should be treated as a multi-year capital project run in parallel with, not instead of, a nearer-term solution.
- **Option C — Acquisition and remodel of an existing structure (e.g., a hotel/motel):** Converting an existing hotel or motel is the faster and lower-cost route to a new building, because the core infrastructure — individual rooms, private bathrooms, plumbing, and often a commercial or semi-commercial kitchen — already exists. Denver and other peer cities have used exactly this model (Section 6 and 5.2 above) to stand up non-congregate, apartment-style capacity in a fraction of the time and cost of ground-up construction, and with outcomes residents rated as safer and more dignified than congregate settings. A realistic timeline runs roughly 12–24 months from acquisition to occupancy once financing, zoning/use-permitting, ADA and code compliance retrofits, and any kitchen upgrade are accounted for — faster than raw-land construction, but still a stretch against a two-year deadline unless site identification and financing begin immediately.

Given the timeline the Mayor described, the recommended path is Option A: a remodel of the current facility — investing now in upgrading the building, repairing the kitchen, and preserving the established location, rather than pursuing a new build or hotel-conversion acquisition.

This is the fastest route within the two-year window, and it is also the most financially realistic. Low-Income Housing Tax Credits (LIHTC) — the primary financing tool behind a new build or a hotel-conversion acquisition — are scarce, and that scarce capital is already needed to fund net-new Permanent Supportive Housing and affordable units that create the exits from the shelter system this strategy depends on elsewhere (Section 9). Competing for that same limited capital to relocate Consuelo's Place would come at the direct expense of the PSH and affordable-housing production Santa Fe needs just as urgently. The current location also carries an advantage a new site cannot guarantee: established, vocal neighborhood support. Neighbors have consistently welcomed Consuelo's Place, and the site has a track record of stability in place — goodwill a new location would have to build from zero, and could just as easily lose in a contested zoning process. Funding realities and community support point to the same conclusion: invest in the current building rather than relocate.

7.2 Recommendations

- **Pursue the remodel of their current facility:** Fund an immediate remodel and capital upgrade of the current building — preserving and upgrading its large kitchen and established location — paired with a longer-term lease or ownership commitment from the City that extends meaningfully beyond the two-year window referenced by the Mayor.
- **Increase funding to expand capacity for the two fastest-growing populations:** Grow Consuelo's Place's budget specifically to add senior and family capacity, rather than to continue absorbing general emergency overflow — a shift made possible as Section 5's guaranteed emergency shelter rebuild takes pressure off Consuelo's Place to serve as the community's catch-all. Sizing this investment to actual growth in senior and family homelessness (Section 3.2) ensures the City is funding capacity where the need curve is steepest, not where a gap happened to open.
- **Apply peer-city and best-practice research to the facility decision:** Use USICH facility guidance and the documented outcomes of peer-city non-congregate conversions (Denver's Urban Institute-evaluated model, cited in Sections 5.2 and 6.3) to inform the remodel design — in particular the dorm-style, interior-corridor layout and private-room principles that the evidence favors — and apply National Council of Nonprofits and philanthropic-sector guidance on reserve capitalization and reimbursement cash-flow risk to the funding transition. Both bodies of evidence point the same direction: lower-cost facility paths and predictable, cushioned funding produce more stable programs than large capital construction or reimbursement-only contracts.

Recommendation

Treat the current two-year window as a planning deadline, not a planning horizon. Remodel and upgrade the existing building now — repairing the kitchen and preserving the site's community familiarity and neighborhood support — while securing a longer-term lease or ownership commitment from the City; and pair that investment with a multi-year, reserve-backed funding commitment sized to Consuelo's Place's true mission population — seniors and families — so the organization can expand capacity to meet demonstrated, fast-growing need rather than continuing to substitute for the emergency shelter gap described in Section 5.

This is not a default reached for lack of effort: the City and Consuelo's Place have actively explored alternative sites for a permanent, purpose-built home, but the local real-estate market has historically offered very few properties of suitable size, location, and cost — which is itself evidence that remodeling the current, community-supported site is the realistic path forward, not merely the cheapest one.

A well-designed remodel is also likely to add net new beds within the building's existing square footage simply by reconfiguring current space more efficiently — capacity that did not exist before and that specifically targets seniors and families. As that dedicated senior capacity comes online, it creates a realistic, responsible off-ramp for the motel-based senior bridge program described in Section 2.4 and Section 6.4: rather than closing that program before a replacement exists, the City can wind it down in step with new senior beds actually opening at Consuelo's Place.

The convergence described in Section 2.4 makes this recommendation more urgent, not less. As Agape House’s long-term home remains unresolved and the senior bridge program’s funding lapses, Consuelo's Place is the one program in this continuum structurally built, staffed, and positioned to absorb displaced seniors and families without compromising the population it was designed to serve. Santa Fe should treat Consuelo's Place's capital and operating funding as a priority claim on any redirected or reassigned dollars described elsewhere in this plan (Sections 2.4 and 12), ahead of newer or unproven initiatives, precisely because it is proven, already trusted by referral partners, and serving the two populations growing fastest.

8. The Santa Fe Continuum: Every Program & How They Fit Together

Santa Fe's homelessness response is delivered by a network of specialized organizations, each serving a distinct population, need, or stage of the continuum. A recurring and damaging misconception is that these providers duplicate one another's work. They do not. The scale of need in Santa Fe means multiple providers serving different populations is not duplication; it is exactly the differentiated, non-overlapping coverage a functioning continuum requires. This section documents each provider and program, the population it serves, and where it sits in the continuum, making the absence of duplication visible.

One piece of this system already exists specifically to prevent duplication while ensuring coordination, and is worth naming here because its purpose can get lost in budget discussions: CONNECT, a joint City of Santa Fe / Santa Fe County program, funds a shared network of community navigators — health workers, social workers, and volunteers based at clinics, shelters, and community organizations — who share referrals through a common technology platform so that a resident's needs (housing, utilities, food, transportation) are routed to the right provider rather than repeated at every door. Several organizations in the inventory below, including St. Elizabeth Shelter and The Life Link, participate in this network. The City and County jointly fund CONNECT precisely so that a differentiated provider network like Santa Fe's can function as one coordinated system instead of a set of disconnected intake points — the same principle this section exists to document.

> **A note on “duplication of services”**
> Every organization below serves a distinct population (survivors of domestic violence, seniors and families, medically fragile individuals, people leaving hospitals or jail, people in active addiction, etc.) or a distinct stage of the continuum (prevention, emergency shelter, bridge, permanent housing). No two are interchangeable. Framing this differentiated network as “duplicative” risks defunding exactly the specialization that makes the system work. What looks like overlap from a distance is, on the ground, a set of doors each built for a different person.

8.1 Provider & Program Inventory

The following organizations and programs make up Santa Fe's homelessness and housing continuum. This inventory reflects the provider network that signed on to the January 2026 provider recommendations to the City, plus the cross-system partners (hospitals, behavioral health, law enforcement) essential to the continuum.

Organization / Program	Population Served	Role in Continuum
Consuelo's Place	Seniors and families experiencing homelessness	Senior & family transitional program; needs a permanent home
Esperanza Shelter	Survivors of domestic violence and their children facing active domestic violence.	Confidential active DV emergency shelter & wraparound advocacy
St. Elizabeth Shelter	Single adults; specialized programs incl. supportive housing	Emergency, transitional & supportive housing
Salvation Army	Single adults & families in crisis; basic needs	Emergency assistance, food, and shelter-adjacent support
Agape House (Urban Alchemy)	Adults; managed transitional beds (waitlisted)	City-contracted managed transitional shelter & street outreach
Interfaith Community Shelter	General homeless population (now via services)	Former shelter operator; now bridge support & the future possible ROCk resource center
Micro-Community at Arroyo Chamiso	Adults needing low-barrier, private interim space	Pallet-shelter / Safe Outdoor Space micro-community
The Life Link	People with mental illness, substance use, trauma; homeless	Behavioral health, PSH & supportive services
HUGS (Health/Human Services), a program of Christus St. Vincent	The most complex and vulnerable individuals experiencing homelessness, including those with intensive medical, behavioral health, and social needs	Bridges hospital and community care; a team of licensed masters-level social workers providing wraparound, intensive clinical case management and therapeutic support, in collaboration with hospital and community providers
Adelante (Santa Fe Public Schools)	Homeless & housing-insecure students and families	School-based McKinney-Vento identification & family support
Hospitals (Christus St. Vincent)	Medically fragile / patients discharged into instability	Medical care; discharge point needing housing linkage
Addiction / ARU & Detox providers	People in active addiction; needing detox & stabilization (ARU is currently suspended and not operational.)	Detox, residential treatment & stabilization capacity
Santa Fe Police / First Responders	People in crisis encountered in the field	Crisis contact point; diversion vs. criminalization decisions

Organization / Program	Population Served	Role in Continuum
Coordinated Entry	System-wide	Coordination, prioritization & funding administration

8.2 Visualizing the Continuum: No Duplication, Distinct Doors

The chart below maps each provider to the stage of the continuum it primarily serves. Read left to right — prevention through permanent housing — the picture is one of coverage across stages and populations, not stacked, redundant programs competing for the same clients.

STAGE 1 — Prevention & Diversion
Eviction prevention, rental & utility assistance, mediation, diversion funds · Adelante (school-identified families) · HUGS · legal/benefits navigation
STAGE 2 — Emergency Shelter/Transitional Housing (the current gap)
Agape House / Urban Alchemy (waitlisted congregate transitional) · Esperanza (DV-specific) · St. Elizabeth · seasonal/faith network. No provider currently offers guaranteed, same-night emergency shelter placement.
STAGE 3 — Non-Congregate / Interim / Bridge
Micro-Community at Arroyo Chamiso (pallet) · Consuelo's Place (seniors & families) · senior bridge
STAGE 4 — Permanent Housing
The Life Link (PSH) · St. Elizabeth supportive housing
CROSS-CUTTING — Health, Justice & Coordination
Christus St. Vincent (hospital discharge) · ARU/detox & residential treatment (currently suspended) · SFPD & first responders · Coordinated Entry

8.3 Vouchers: The Piece That Ties Housing Together — and Where It's Breaking

Housing vouchers are the primary mechanism for moving people from shelter and bridge into permanent housing. They are also one of the most fragile parts of the system right now. Any continuum discussion that omits vouchers is incomplete.

- **Types of vouchers in play:** Housing Choice Vouchers (the federal “Section 8” tenant-based program); Emergency Housing Vouchers (EHV, created through pandemic relief); Veterans Affairs Supportive Housing (HUD-VASH) vouchers; project-based vouchers tied to specific units; and state/local rental-assistance subsidies (Linkages). Each has different eligibility, funding, and rules.
- **The voucher freeze:** Voucher issuance has been effectively frozen or paused in many jurisdictions as federal funding tightens. This means that even people who qualify cannot

receive a new voucher, and waitlists stall. A frozen voucher pipeline breaks the continuum at its most important exit point: people stabilize in shelter or bridge with nowhere permanent to move to.

- **"Walking" vouchers — the utilization gap:** A voucher on paper is not housing. "Walking" a voucher — actually getting it leased up into a real unit — is where the system frequently fails. Voucher holders face a shortage of units, landlords unwilling to accept vouchers, and — critically — the inability to cover deposits, application fees, and move-in costs. Vouchers routinely expire unused because the holder cannot get over the move-in cost hurdle. This is why deposit/move-in funding is repeatedly requested by providers: without it, vouchers are wasted.
- **The Emergency Housing Voucher cliff:** EHV funding is projected to run out in 2026 absent congressional action, threatening households currently housed through the program — not just future applicants. This turns a housing success into a looming crisis.
- **Voucher Waitlists:** Local vouchers carry significant backlogs. As of this update, Linkages — the state-funded permanent supportive housing voucher program serving Santa Fe — is currently processing and serving August 2025 vouchers, roughly a year behind real time as of July 2026. This is not a one-time delay; it reflects a structural backlog that keeps otherwise-eligible, currently homeless applicants waiting a year or more for a voucher that has already been budgeted.
- **About Linkages, specifically:** Linkages is a state-funded permanent supportive housing program administered by the New Mexico Health Care Authority's Behavioral Health Services Division (BHSD) in partnership with Housing New Mexico (the New Mexico Mortgage Finance Authority, or MFA). It provides long-term rental assistance and supportive services — case management and mental health care — to adults with a diagnosed serious mental illness who are homeless, precariously housed, or at risk of homelessness. In Santa Fe, Linkages is administered locally by The Life Link (2325 Cerrillos Rd., Santa Fe, NM 87505; (505) 438-0010), which provides housing and support services, including home visits and rental funds, to Linkages households until a permanent voucher is received or the household achieves self-sufficiency. Statewide, MFA has periodically expanded the number of Linkages vouchers available (338 statewide as of a 2023 program update), but the pool remains fixed and allocated by the state rather than open-enrollment — which is the structural reason the local waitlist keeps growing even as need does.

The voucher takeaway for Santa Fe

Two things must happen for vouchers to function: (1) the pipeline must keep issuing them (the freeze is a system-level failure point outside local control but must be advocated against) and the city must expand its available of local vouchers, and (2) local deposit/application/move-in funding must exist so issued vouchers can actually be "walked" into units. Santa Fe can directly control the second. Funding move-in costs is one of the highest-leverage local investments available — it converts stranded vouchers into housed people.

Santa Fe does not have to wait on the state's fixed Linkages allocation to grow its own voucher supply. Albuquerque already runs a City-funded Permanent Supportive Housing and Rapid

Re-Housing voucher program — roughly 48% of that city's homelessness budget — administered through providers such as Good Shepherd Center and Heading Home, currently serving over 1,300 clients. Santa Fe should pursue the same model in partnership with the State: City-funded vouchers, layered on top of (not instead of) the state-funded Linkages pool, would directly add to local voucher supply rather than compete for a share of a pool that is not growing.

8.4 Where the Gaps Are

Mapping the continuum makes the gaps unmistakable. These are the points where the system currently fails people, drawn directly from what Santa Fe providers report:

- **No guaranteed low-barrier emergency shelter:** The single largest gap. Agape House is waitlisted as does not function as an emergency shelter/program; there is no reliable same-day, no-barrier front door. Providers' top ask is a permanent, adequately sized, low-barrier shelter with immediate access and no exclusionary intake.
- **No permanent home for Consuelo's Place:** Seniors and families lack a stable, permanent shelter location. With the vast increase in unhoused seniors and families, it is vital a solution be brought forth and put in place immediately.
- **Insufficient non-congregate / interim capacity:** Pallet-shelter micro-communities are working, but demand far exceeds supply. Families, medically fragile people, DV survivors, and seniors who cannot safely use congregate shelter have too few options.
- **Voucher utilization gap:** No reliable local funding for deposits, application fees, and move-in costs, so vouchers go unused (see 8.3).
- **Detox, ARU & residential treatment shortage:** Too little inpatient/residential substance-use treatment, detox, and stabilization capacity, so people cycle between streets, ERs, shelters, and jail instead of accessing timely care. ARU must be reinstated as part of the continuum.
- **Hospital discharge into homelessness:** Medically fragile patients are discharged into unstable conditions without a housing landing spot, increasing mortality and costly service cycling.
- **No day services / resource center hub:** No single co-located hub for daytime services, hygiene, benefits navigation, and coordinated care — the role Interfaith's future ROCk is intended to fill.
- **Workforce strain:** Compensation lags cost of living; burnout and vicarious trauma are widespread; shrinking/restrictive grants threaten staffing. When staff leave, programs shrink or close.
- **City process delays:** Slow contract execution, fund disbursement, and reporting responsiveness, plus difficulty obtaining police reports and IPRA responses, directly undermine providers' ability to operate and access reimbursement.

8.5 What Providers Are Asking For

A coalition of Santa Fe providers, including Esperanza Shelter, HUGS, Consuelo's Place, Urban Alchemy, The Life Link, Interfaith, the Micro-Community at Arroyo Chamiso, St. Elizabeth Shelter, and the Salvation Army, have joint recommendations for a strategic plan:

- A permanent, adequately sized, low-barrier emergency shelter with immediate same-day access and no exclusionary intake or prolonged waitlists.
- A permanent home for Consuelo's Place to stabilize services for seniors and families.
- Non-congregate shelter and bed solutions (motel/hotel, pallet, private-room) as a distinct, necessary component — with expansion of the proven pallet micro-communities.
- A community resource and opportunity center as a coordinated-care hub and safe daytime space — distinct from, and more than, a place to congregate.

This distinction matters because it is easy to conflate the two in practice. Urban Alchemy's “Oasis” at Agape House — an outdoor space where people can gather during the day and during Code Blue events — is a genuine, valuable piece of the system, and some City Councilors have pointed to it as evidence that Santa Fe already has a daytime resource in place. But the Oasis is a congregation space: it gives people somewhere to be. It is not staffed or equipped to provide case management, healthcare, benefits enrollment, or recovery support. The resource and opportunity center providers are asking for — the model behind Interfaith's proposed ROCk — is a different thing entirely: a purpose-built hub that co-locates case management, healthcare access, housing navigation, and recovery support alongside a safe place to be during the day, so that daytime safety and access to services happen at the same location instead of requiring separate trips to separate providers. Congregation space and a resource center are complementary, not interchangeable, and funding one is not a substitute for building the other.

- Expansion of transitional and permanent affordable housing that accepts vouchers and non-traditional income, with on-site trauma-informed services.
- Rental assistance and — critically — funding for deposits, application fees, and move-in costs so vouchers can actually be used.
- Expanded inpatient/residential substance-use treatment, detox, and stabilization capacity.
- Faster City contracting, disbursement, and reporting; better access to police reports and IPRA responses; and internal City coordination.
- Investment in the frontline workforce that makes the entire system function.

The providers' central message

No single sector or level of government can address these issues alone. Santa Fe already has the assets — a differentiated, trust-based network of providers — and what is needed is leadership that listens, aligns, and invests across the full continuum rather than shifting strategies without the infrastructure to support them. Protecting and funding this network is protective, not duplicative.

8.6 The “They’re Not From Here” Misconception

One of the most common assumptions about Santa Fe's unhoused population — that most people using local homeless services are transients or recent arrivals rather than long-term Santa Feans — is not supported by the data providers themselves report, and it runs counter to the national research on homelessness and migration.

As part of the January 2026 provider letter to the Mayor, the coalition of providers cited throughout this document (Esperanza Shelter, HUGS, Consuelo's Place, Urban Alchemy, The Life Link, Interfaith, the Micro-Community at Arroyo Chamiso, St. Elizabeth Shelter, and the Salvation Army) was asked a direct, quantitative question: what share of the people they serve are not long-term Santa Fe residents, using birth in Santa Fe or long-term residency as the definition of local. Every provider that responded reported a figure of 8 percent or lower. In other words, at least 92 percent of the people using Santa Fe's homeless services are, by this definition, already members of the Santa Fe community — not people who came here because of the city's shelter system.

This local finding lines up closely with the national research base on homelessness and migration. A 1997 national study found that 75 percent of people experiencing homelessness were still living in the city in which they first became homeless. A 2018 Seattle/King County survey found that approximately 83 percent of people experiencing homelessness there were living locally at the time they lost housing. The largest representative survey of homeless people in more than 25 years, conducted by the University of California, San Francisco, found that only about 10 percent of unhoused Californians became homeless outside the state, and most of that group had prior ties — family, a former home, a job history — that drew them back rather than the availability of services. Peer-reviewed research on the subject, including Lindquist, Lagory, and Ritchey's 1999 study "The Myth of the Migrant Homeless," and a large national study of homeless veterans finding only 15.3 percent had migrated across large geographic areas while homeless, reach the same conclusion: homelessness is overwhelmingly a local phenomenon, produced by local housing costs and local economic conditions, not an imported one.

The distinction matters for policy. Research and advocacy organizations that study this question note that the "not from here" narrative functions as a way of treating unhoused neighbors as outsiders who do not belong, which can erode public support for exactly the investments — shelter, bridge housing, permanent supportive housing — that this strategy depends on. Santa Fe's own provider data reinforces the national pattern: the people the system serves are, overwhelmingly, Santa Feans who lost housing here, not visitors drawn by services elsewhere.

The data

In response to a direct question in the January 2026 provider letter to the Mayor, every responding provider reported that 8 percent or less of the people they serve are not long-term Santa Fe residents (defined as born in Santa Fe or long-term local residency). This matches national research showing that 75–83 percent or more of people experiencing homelessness remain in the community where they became homeless, and that fewer than 10–15 percent migrated from elsewhere. Santa Fe's homelessness system serves Santa Feans.

8.7 Keep Every Door Open: Why the Full Continuum Must Remain Funded as the Micro-Community Opens

Section 2.4 describes three timelines converging at once: Agape House's building for sale, the senior bridge program's funding cliff, and the still-unbuilt Richards Avenue micro-community. Read together with the continuum mapped in this section, one conclusion follows directly: opening one additional micro-community does not reduce the need to keep every existing program funded and open. It adds one more door to a system that, as this section documents, already has too few.

- **The math does not work if any existing door closes:** Agape House currently carries a waitlist that, as of last winter, exceeded 100 people on top of roughly 100 occupied beds, meaning the current shelter system is already short by more than its own capacity. A single new micro-community, even at full build-out, adds only a fraction of that shortfall in new capacity. If Agape House loses its building, or the senior bridge program closes, before that capacity is replaced, the math moves further from balance, not closer to it.
- **Every provider in this continuum serves a distinct population the micro-community cannot:** St. Elizabeth Shelter's emergency and supportive housing beds for single adults, Esperanza's confidential domestic-violence shelter, Consuelo's Place's dedicated senior and family capacity, and Agape House's managed, staffed, 24-hour facility each serve needs — confidentiality, medical support, family-appropriate space, higher-acuity behavioral health — that an unstaffed or lightly staffed pallet community, by design, is not built to meet (Section 8.1). None of these programs is redundant with the micro-community; each is a distinct door for a population the micro-community cannot safely or appropriately serve.
- **The fiscal case cuts the same direction:** Section 13.1 documents that unaddressed homelessness already costs the public system more, in emergency-room visits, ambulance runs, jail bed-nights, and police response, than housing or shelter would cost to provide. Closing existing shelter and bridge capacity before replacement capacity exists does not save money; it shifts the same people, and the same costs, onto the most expensive parts of the public system Santa Fe is already paying for. A senior discharged from the motel bridge program directly to the street is more likely, not less, to end up in a CHRISTUS St. Vincent emergency department or a police contact, both of which cost the City and County far more than the daily cost of the motel program itself. This is not a hypothetical: under the current City-County Inmate Confinement Agreement (effective December 2024), the City pays Santa Fe County $220 per inmate, per night — up from $95/night in 2020 — with total payments capped at $4.8 million over the agreement's four-year term. A single jail bed-night already costs more than most shelter or bridge-housing bed-nights in this continuum.

The strategic principle

Every program currently in place — Agape House, the senior bridge program, Consuelo's Place, St. Elizabeth Shelter, Esperanza, The Life Link, HUGS, Salvation Army, the Micro-Community at Arroyo Chamiso, and the future Richards Avenue site — should remain funded and open throughout this transition, with no program treated as expendable simply because a lower-cost alternative exists on paper. The opening of one new micro-community is a

> net addition to system capacity, not a replacement for any part of it. A continuum that closes doors as fast as it opens them is not a continuum; it is a waitlist with a rotating cast of buildings.

9. Protecting the Permanent Housing Pipeline

Permanent housing — Permanent Supportive Housing (PSH) and Rapid Re-Housing (RRH) — is the only durable exit from homelessness, and it is the part of the system most directly threatened by federal cuts. Santa Fe must actively defend and expand this pipeline.

- **Permanent Supportive Housing (PSH):** Affordable housing paired with voluntary, ongoing supportive services for people with disabilities or chronic homelessness histories. PSH is one of the most cost-effective interventions for chronically unhoused people — and is exactly what the proposed CoC-to-ESG consolidation would defund, since ESG does not permit PSH. Protecting existing PSH units and residents is a top priority.
- **Rapid Re-Housing (RRH):** Short- to medium-term rental assistance plus case management. Effective for lower-barrier households and families; more fragile for chronic homelessness without added long-term support. RRH is also exposed to federal permanent-housing cuts.
- **Master leasing:** Continuing and expanding master leasing of units — including for apartment-based bridge and for permanent placements — gives Santa Fe more control and more predictable capacity as federal voucher programs face uncertainty.

9.1 The Evidence: PSH and Housing First Work

Permanent Supportive Housing paired with a Housing First approach is among the most rigorously studied interventions in all of homelessness policy, and the evidence is consistent and strong:

- **The federal position:** USICH identifies Housing First and Permanent Supportive Housing as proven, evidence-based solutions, noting that PSH — offered without preconditions and with voluntary, trauma-informed wraparound services — leads to housing stability and improvements in health and well-being when implemented to fidelity.
- **Peer-reviewed cost-effectiveness:** A systematic economic review in the American Journal of Preventive Medicine found that in the U.S., PSH-with-Housing-First produced a median benefit of $18,247 per person per year against a median cost of $16,479 — the benefits outweigh the costs. Broader reviews find about $1.44 in societal savings per $1 invested, with public-cost savings ranging from roughly $900 to $29,400 per person per year after program entry (NLIHC research synthesis).
- **Measured public-system savings:** The Denver Social Impact Bond evaluation (Urban Institute) found supportive-housing participants cost about $6,876 less per person per year in emergency public services, spent 40% less time in jail (consistent with a NYC study), and that combined crisis-care, jail, and shelter costs ran more than $15,000/person/year higher for those left without housing. Charlotte, NC saved $2.4 million in one year (1,050 fewer jail nights, 292

fewer hospital days). One synthesis found chronic homelessness cost roughly $40,449/person/year in public services, dropping to a net ~$995/year after PSH placement.

- **Retention and health:** Housing First studies (published in JAMA, The Lancet, Psychological Services) consistently show high housing-retention rates, reduced emergency-department and inpatient use, and reduced incarceration compared to treatment-first models — and a 2014 study found that the faster a community adds PSH beds, the faster its rate of chronic homelessness falls.
- **A caution on services funding:** Harvard ALI / national policy analysis warns that new vouchers or rental subsidies must be paired with corresponding supportive-services funding; subsidies provided without service dollars are difficult to use responsibly and can lead to housing failure for people with significant needs. This directly reinforces the providers' request for on-site, trauma-informed services in supportive housing.

Recommendation

Treat protection of existing PSH units and residents as non-negotiable — losing a PSH unit means reverting from a ~$995/person/year net cost to a ~$40,000/person/year crisis cost. Diversify local, state, and health-system funding to backstop federal CoC/RRH reductions; pair any new subsidy with services funding; and use master leasing to hold capacity that would otherwise be lost to voucher-program instability.

Concretely, two New Mexico examples show what this protection can look like in practice. First, Albuquerque and the New Mexico Coalition to End Homelessness, in partnership with Housing New Mexico, operate a Landlord Engagement Program that makes direct payments to landlords — up to $1,500 for unit repairs or upgrades needed to meet inspection standards, and up to $1,000 in flexible funds for damages or lost rent beyond the security deposit — specifically to keep landlords willing to rent to voucher holders. Santa Fe should adopt an equivalent landlord-retention fund; losing landlord willingness to accept vouchers is one of the most common, and most preventable, ways a PSH pipeline quietly stalls.

Second, when a voucher-administering provider in Albuquerque (the Supportive Housing Coalition) misused voucher funding, the City did not let the disruption fall on tenants: it declined to renew that provider's contract, made direct payments to landlords to keep residents housed through the transition, and moved those vouchers to two stable, vetted providers. That sequence — protect the tenant first, then resolve the provider issue — is the model Santa Fe should commit to in writing now, before a similar situation forces an improvised response.

More generally, the City should favor multi-year PSH contracts over single-year ones, maintain a small reserve specifically to bridge reimbursement gaps, and require ongoing provider financial monitoring rather than the kind of sudden, unplanned defunding action that has, in other contexts, caused lasting damage to a service system it was meant to protect.

10. School-Based & Family Supports: McKinney-Vento and Adelante

Because families and children experiencing homelessness are systematically undercounted in HUD data, Santa Fe's schools are among the most important early-warning and service-delivery points in the entire system. Two mechanisms are central.

10.1 McKinney-Vento (Education for Homeless Children and Youth)

- **What it does:** The federal McKinney-Vento Act requires public schools to identify and support students experiencing homelessness — including those doubled-up or in motels — and to provide transportation, school stability, free meals, and access to services through designated school liaisons.
- **Why it matters here:** McKinney-Vento identifies housing-insecure families that HUD's count misses — the exact family population Consuelo's Place serves. It is a critical data source and referral pipeline for the family side of the continuum.
- **Federal risk:** Proposed federal cuts threaten McKinney-Vento technical assistance and related supports, and broader Department of Education and youth-program disruptions could weaken this safety net. Santa Fe should protect and lean on local school-district liaison capacity accordingly.
- **The peer-reviewed "why" — childhood trauma as an upstream driver:** Landmark Adverse Childhood Experiences (ACE) research (Felitti et al., 1998; Hughes et al., 2017) establishes a dose-response relationship between childhood trauma and adult housing instability, chronic illness, mental illness, substance use, and premature mortality. New Mexico consistently ranks among the highest states for ACE prevalence. Because unaddressed childhood trauma is a predictable upstream driver of adult homelessness, school-based identification and support is not peripheral to homelessness strategy — it is homelessness prevention at its most cost-effective point. Research (Shonkoff et al., 2012; Chetty et al., 2014) shows trauma compounded by housing instability, food insecurity, and educational disruption persists across the life course, resurfacing decades later in emergency rooms, shelters, and jails.

10.2 Adelante (Santa Fe Public Schools)

- **What it is:** Adelante is Santa Fe Public Schools' program serving students and families experiencing homelessness, operating as the district's McKinney-Vento implementation — connecting homeless and housing-insecure students to housing resources, basic needs, school stability, and wraparound support.
- **Role in the continuum:** Adelante is the front door for many families who will never enter an adult shelter but are nonetheless homeless under the education definition. Tight coordination between Adelante, Consuelo's Place (families), and coordinated entry ensures these families are routed to family-appropriate housing and bridge resources rather than being missed entirely.

Recommendation

Formalize a family-services pathway linking Adelante / McKinney-Vento liaisons, Consuelo's Place's family programming, prevention/diversion funds, and coordinated entry — so that a family identified at a school can move into family-appropriate bridge and permanent housing without falling through the gap between the education and HUD systems.

11. Wraparound Systems That Hold It Together

11.1 Street Outreach

Trauma-informed street outreach is the system's engagement layer, reaching people who are unsheltered and disconnected from services. Santa Fe currently contracts significant street outreach capacity (including through Urban Alchemy and The LifeLink). Outreach should be tightly integrated with coordinated entry and with a rebuilt emergency shelter front door, so that engagement leads somewhere.

11.2 Coordinated Entry & Regional CoC Collaboration

Coordinated entry ensures scarce housing resources are prioritized by need rather than first-come-first-served, and prevents duplication across providers. As HUD's CoC structure faces federal restructuring, protecting and strengthening local/regional coordinated entry and CoC collaboration becomes even more important. This is to defend funding and to keep the system coherent. Santa Fe should continue exploring deeper regional CoC collaboration to strengthen data, coordination, and resource access.

11.3 Storage Solutions

Loss of belongings is a major, under-recognized barrier to exiting homelessness. Secure storage reduces this barrier and supports service engagement. Santa Fe should continue developing secure storage options as part of the wraparound layer.

11.4 Office of Housing & Homeless Services and Coordination

Centralized coordination, through a dedicated City housing and homeless services function, improves efficiency and outcomes by aligning outreach, shelter, bridge, permanent housing, schools, and funding. In a period of federal instability and local restructuring, strong central coordination is essential to prevent the continuum from fragmenting.

12. Funding & Sustainability in a Constrained Environment

The 2026 plan cannot assume a stable federal backdrop. Sustainability planning must now be a first-order element of strategy.

12.1 From Managing Homelessness to Solving It

A great deal of public money currently spent on homelessness in Santa Fe, as in most American cities, goes toward managing its visible symptoms rather than toward the interventions that actually end it. This distinction is not rhetorical. Research on communities that have measurably reduced homelessness — including the Built for Zero movement, which has helped communities reach “functional zero” for veteran and chronic homelessness — consistently finds the same thing: it is cheaper to solve homelessness than to manage it. Santa Fe's strategy has to make this shift explicit, and the City has to be held to it.

Santa Fe's own recent choices illustrate the difference. The City's shift from Interfaith's roughly $158,000/year shelter arrangement to a $1.5 million-plus contract with Urban Alchemy (Section 2.1) produced a facility with a waitlist and lower guaranteed capacity than before — nearly ten times the spending for less certain access. That is what a management investment looks like: it contains and monitors need without necessarily resolving it. A solving investment looks different: guaranteed shelter beds, bridge units paired with a housing plan, and permanent supportive housing that ends someone's homelessness for good. The City should evaluate every dollar it spends on this system by asking which category it falls into, and shift the balance deliberately toward the second.

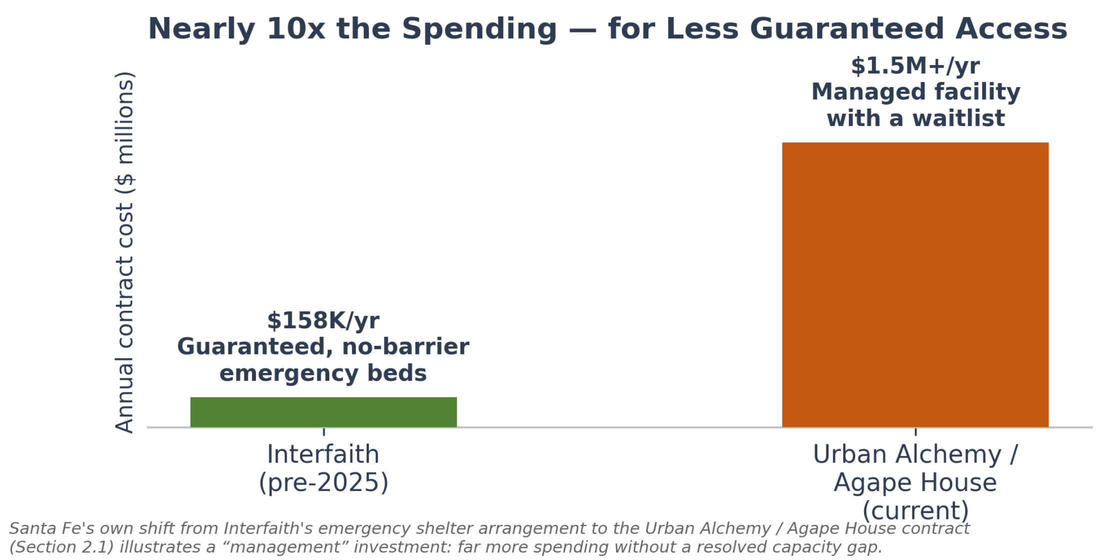

Figure 12.1a — Santa Fe's own shelter contract shift: far more spending without more guaranteed access.

The clearest national evidence of wasted management spending is encampment enforcement. An Abt Global study found that responding to encampments cost Houston $3.4 million and San Jose $8.6 million in a single year, and a HUD/HHS analysis found cities fund the overwhelming majority of these costs themselves — 97 percent in Tacoma, 91 percent in Chicago — out of general funds, not federal grants, because HUD dollars cannot be used for encampment removal or policing. Sweeps do not reduce homelessness; they displace it, and evaluations have found their effects on crime and visible disorder are modest to nonexistent. By contrast, Eugene, Oregon saved its police department roughly $8.5 million per year between 2014 and 2017 by routing crisis calls to a community response team instead of armed officers — direct, measured evidence that money currently spent managing homelessness through enforcement can be redirected into service-based response without any new revenue at all.

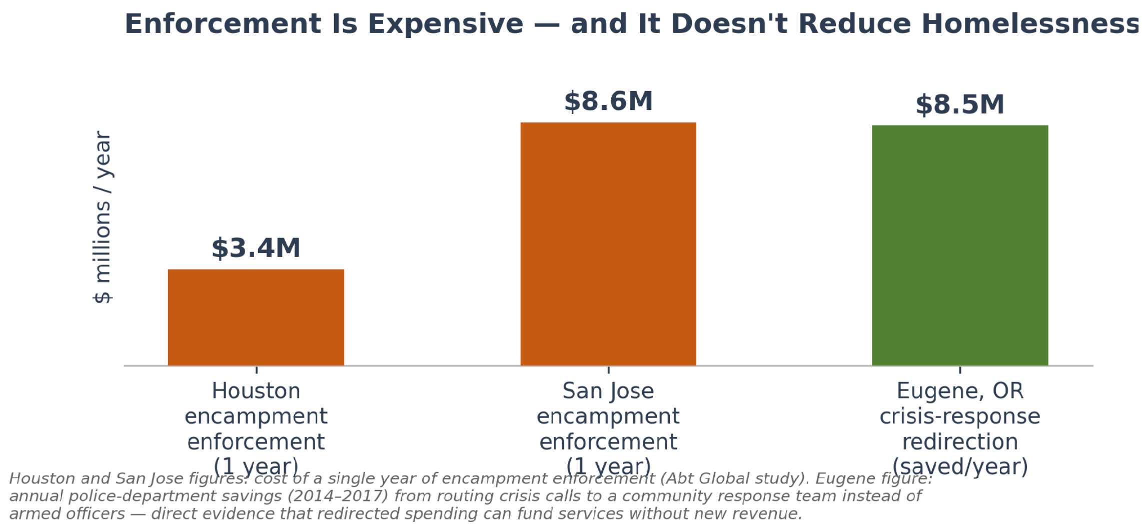

Figure 12.1b — Encampment enforcement is costly and doesn't reduce homelessness; redirected spending can fund services instead.

This is the standard the City should be held to. Santa Fe does not need to wait for a new tax, a new grant, or a more favorable federal environment to act at meaningfully greater scale. It needs to look at where its existing general fund, public-safety, and code-enforcement dollars are already going — including any spending on encampment response, cleanup, or citation-based enforcement of homelessness-adjacent ordinances — and redirect a defined share of that spending into the housing- and service-based system described throughout this plan. Asking only for new money lets the City off the hook for the choices it has already made about where its existing dollars go. This strategy does not do that: it asks the City to redistribute, not just to add.

Redistribution should follow two disciplines. First, fund what is already in place and already working before funding anything new. Santa Fe's pallet micro-communities, Consuelo's Place, the senior bridge program, and street outreach are proven, provider-run, and already producing results with demand that exceeds supply (Sections 5.3, 6, 7, 11.1) — yet they remain underfunded and, in several cases, exposed to the ARPA cliff (Section 2.3). Launching new pilots while the City's own working programs go unfunded or wait on a lease extension is itself a form of managing rather than solving. Second, treat providers as the authority on what is needed, not one stakeholder among many. The coalition of providers behind the January 2026 letter to the Mayor (Section 8.5) has already told the City, specifically and repeatedly, what a functioning system requires: a guaranteed low-barrier shelter, a permanent home for Consuelo's Place, expanded non-congregate capacity, a resource and coordination hub, move-in cost funding, expanded detox and treatment capacity, faster contracting, and investment in the frontline workforce. That list should be treated as this plan's baseline, not as input to be weighed against other priorities.

The City's choice

> Santa Fe can make immediate progress by redirecting spending it already controls, but redirection alone is not enough — the City should also commit new and increased funding of its own as this system's lead funder. Audit general fund, public-safety, and code-enforcement spending currently used to manage homelessness's visible symptoms (encampment response, cleanup, citation-based enforcement) and redirect a defined share into the provider-run system this plan describes. Fully fund what is already in place and already working, and then grow that funding further as the City's budget allows, rather than treating redirection as the ceiling of its commitment. Treat the specific, repeated asks from the provider network in Section 8.5 as the plan's baseline — providers already know what is needed; the City's job is to fund it, at the highest level it can, and to implement it, not to keep studying it or waiting for the County, the State, or philanthropy to close the gap first.

- **Diversify beyond federal reimbursement:** Providers dependent on single reimbursement-based contracts acutely vulnerable to timing gaps and federal , State, and City cuts. The City should support diversified funding and, where possible, more flexible payment structures that reduce fronting risk.
- **Build local and reserve capacity:** Encourage and, where feasible, help capitalize 3–6 month operating reserves for critical providers, so cash-flow timing cannot force service cuts.
- **Protect permanent housing dollars first:** Where trade-offs are forced by federal cuts, prioritize protecting existing PSH units and residents, since these are the hardest to rebuild and the most exposed to CoC restructuring.
- **Leverage state and county partners:** With federal certainty reduced, deepen state (New Mexico) and Santa Fe County funding partnerships, master leasing, and capital-outlay strategies to supplement — not substitute for — the City's own funding commitment to the local system.
- **Plan for timing, not just totals:** Even where federal appropriations were ultimately preserved, mid-cycle notice disruptions caused funding gaps. Build local bridge financing and cash-flow tools to absorb federal timing shocks.
- **Identify and transition off ARPA-dependent programs now:** Following Government Finance Officers Association guidance that one-time funds should never sustain recurring programs, the City should immediately inventory every shelter, outreach, rental-assistance, or provider function that has relied on ARPA/SLFRF dollars (which must be fully spent by December 31, 2026) and build a replacement-funding or wind-down plan for each before the cliff — not after. Peer jurisdictions (e.g., Palm Beach County) used one-time dollars specifically to build lasting nonprofit capacity and reserves rather than to create recurring obligations; Santa Fe should apply the same discipline to its remaining funds.

13. A Strategic Blueprint for a City That Leads on Funding

Santa Fe faces real fiscal pressure, and federal support is shrinking. That pressure does not excuse the City from being the lead funder of its own homelessness response — it makes the case for the City prioritizing this system above competing budget items and shifting as much of its own funding toward it as it possibly can. Cities that have made dramatic progress on homelessness did so by combining the two: reorganizing and redirecting existing dollars toward what demonstrably works, while also committing new City funding as a first-order budget priority, and only then mobilizing non-City resources (state, county, health-system, philanthropic, business, and community) as a supplement to City investment, not a replacement for it. The core argument of this section is simple and backed by strong peer-reviewed evidence: doing nothing is the most expensive option, because unaddressed homelessness is paid for anyway — in emergency rooms, jails, ambulances, and crisis response — at a higher cost than housing would have been. That argument is precisely why the City, as the level of government closest to the problem, should treat funding this system as one of its top budget priorities rather than something to be solved only through redirection and outside partnerships.

13.1 The Central Financial Case: Housing Is Cheaper Than the Status Quo

The single most important fact for a cash-constrained city is that homelessness already has a cost whether or not the City invests in housing. People experiencing unsheltered, chronic homelessness are among the highest per-person users of the most expensive public systems: emergency departments, inpatient hospital stays, psychiatric crisis care, ambulances, detox, jail, and police response. Housing people does not add a new cost so much as it substitutes a lower cost (housing plus services) for a higher one (repeated crisis response).

Peer-reviewed and systematic-review evidence: A systematic economic review published in the American Journal of Preventive Medicine found that in the U.S., Permanent Supportive Housing delivered with a Housing First approach produced a median benefit of $18,247 per person per year against a median implementation cost of $16,479 — the benefits outweigh the cost. Broader reviews find societal savings of roughly $1.44 for every $1 invested in Housing First, with public-cost savings ranging from about $900 to $29,400 per person per year after entry.

Chart: Cost of crisis-driven homelessness vs. supportive housing (illustrative, per person / year)

The bars below illustrate, in round figures drawn from the cited studies, why housing is the fiscally responsible choice. These are national research figures used to show the relationship, not Santa Fe-specific budget lines.

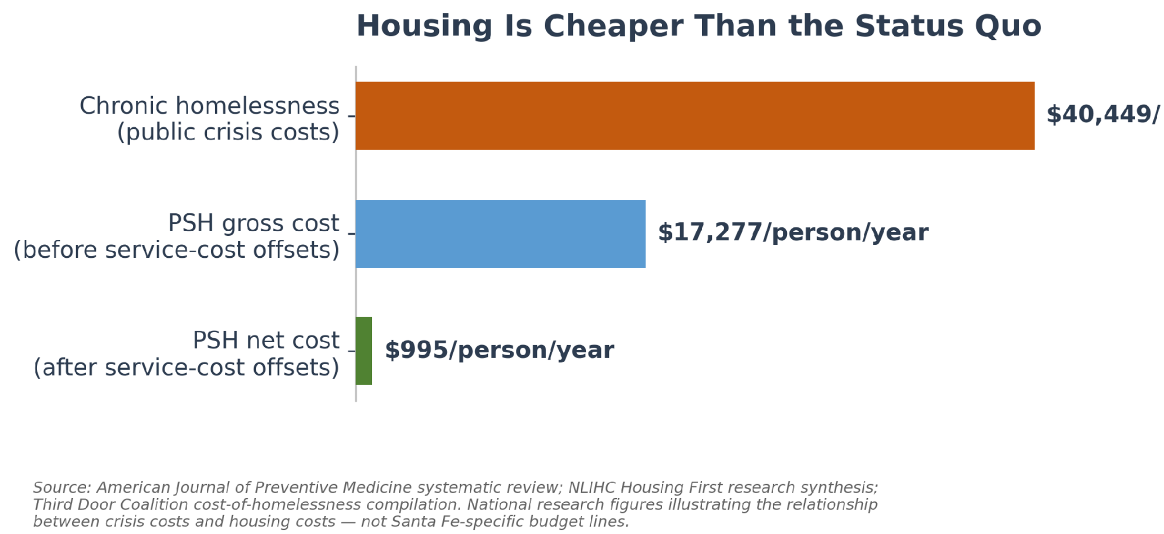

Figure 13.1 — Housing is the fiscally responsible choice on a per-person, per-year basis.

How to read this chart

Individuals experiencing chronic homelessness consumed roughly $40,449/year in public services (health, corrections, shelter) in the cited study. After placement in Permanent Supportive Housing, service-cost reductions averaging ~$16,282/year offset most of the ~$17,277 annual housing cost — bringing the net public cost down to roughly $995/year. In plain terms: the City (and the broader public system) is already paying far more to leave people unhoused than it would pay to house them. (Source: systematic reviews compiled by the Third Door Coalition; NLIHC Housing First research; American Journal of Preventive Medicine.)

Additional documented savings: Denver's Social Impact Bond evaluation (Urban Institute) found supportive housing participants cost $6,876 less per person per year in emergency public services than a control group, with jail, ER, and shelter costs combined running more than $15,000 higher per person for those left without housing. Charlotte, NC saved $2.4 million in a single year after creating a Housing First program (1,050 fewer jail nights, 292 fewer hospital days). These are not projections — they are measured outcomes.

Santa Fe's own local data point: This national research is backed up by a concrete local figure. Under the four-year Inmate Confinement Agreement approved by the City in January 2025, Santa Fe pays Santa Fe County $220 per inmate per night to house people arrested or charged with a crime in City jurisdiction — up from $95/night in 2020, an increase of more than 130% in five years. Annualized, that is roughly $80,300 per person per year in jail costs alone, before medical, transportation, or "additional services" charges the agreement allows the County to bill separately. Total payments to the County under the agreement are capped at $4.8 million over four years ($1.2 million/year), funded through the City's General Fund. This confirms, with a real Santa Fe number, the same relationship the national research shows: incarceration is one of the most expensive ways the public system currently responds to unmet housing and behavioral-health needs, and it is a cost the City is already paying. (Source: City of Santa Fe / Santa Fe County Agreement for Inmate Confinement, effective Dec. 12, 2024, approved Jan. 3, 2025; City Council Budget Amendment Resolution, Jan. 3, 2025.)

An open question worth pursuing: the $220/night rate does not include "additional services" (e.g., off-site medical or mental health care), which the agreement allows the County to bill on top of the per diem in emergency situations. Given the prevalence of opioid use disorder and other behavioral health needs among people cycling through the jail, these additional-service costs are likely substantial but are not yet itemized in any document reviewed for this plan. The City should request a cost breakdown of additional-services billing from SFPD/the County to quantify this fully before the next contract renewal.

13.2 What Peer Cities Did — and What Santa Fe Can Learn

Santa Fe does not need to invent a model. Several cities have demonstrably reduced unsheltered homelessness using strategies Santa Fe can adapt at its own scale. The lessons below are drawn from their published results and independent evaluations.

Denver, Colorado — "All In Mile High" (AIMHigh)
Result: Denver reduced unsheltered homelessness by 45% between January 2023 and January 2025, with independent Urban Institute evaluation confirming 98% fewer encampments of 20+ people and 89% fewer of 10–20 people. Denver effectively reached "functional zero" for unsheltered veteran homelessness by the end of 2024.

How they did it — the transferable elements:

- A galvanizing champion and clear goal: the Mayor declared a state of emergency and set a specific, public, time-bound target (1,000 people indoors, then 2,000/year). Independent evaluators cited political will plus a concrete goal as a key driver.
- Non-congregate, low-barrier interim housing: Denver converted hotels and built micro-communities where residents could bring pets and possessions — residents reported these as safer and more supportive than congregate shelter. This validates Santa Fe's pallet micro-community model and the apartment-based bridge direction in Section 6.
- A "Housing Central Command" to expedite permanent housing: a consolidated coordination function to match people to vouchers and rapid re-housing and reduce private-market barriers. Santa Fe's HOST/coordinated-entry function can play this role.
- Real-time data and coordinated outreach: daily cross-agency calls using live encampment data to respond quickly and prevent encampment return — without relying on criminalization, which evaluators found less effective and less humane.

> **The honest caveat from Denver**
> Denver's overall regional homelessness still rose even as unsheltered homelessness fell, and advocates raised concerns about shelter quality and continued enforcement/citations. The lesson

> for Santa Fe: interim shelter must be paired with real permanent-housing exits, or people simply move from street to shelter without resolution. Shelter is a bridge, not a destination.

Houston, Texas — Coordinated Regional System

Result: Houston reduced homelessness by more than 60% over roughly a decade by having a local nonprofit orchestrate 100+ partners into a single integrated system, working closely with the Mayor and other leaders.

- The transferable lesson: coordination beats fragmentation. Houston's gains came less from a single new program than from aligning existing agencies, funding, and providers into one coherent system with shared goals — exactly the coordination role Santa Fe's providers are asking the City to lead (Section 8.5).

Santa Clara County, California — "Destination: Home" Public-Private Partnership

Result / model: A public-private partnership uniting local government, corporations, philanthropy, developers, advocates, and people with lived experience around a shared community plan — catalyzed by major private investment (including a $50 million Cisco donation and a $950 million housing bond) that unlocked and accelerated public funding.

- The transferable lesson for a cash-poor city: private and philanthropic capital can be the accelerant that de-risks and unlocks public and federal dollars. Santa Fe's role may be less "write a big check" and more "convene, align, and leverage" the health systems, foundations, and businesses that can invest.

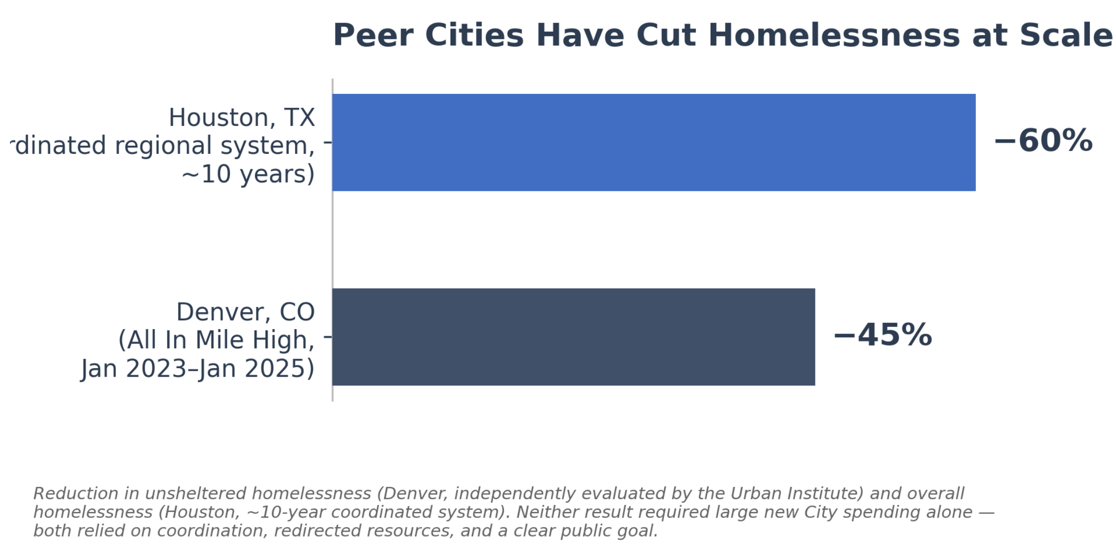

Figure 13.2 — Reduction in homelessness achieved by peer cities using transferable strategies.

The Common Thread Across All Three

National research (National Civic League / National Academy of Public Administration) studying cities that made real progress found the same three ingredients every time: (1) civic and political leaders acting as catalysts to bring the community together; (2) genuine collaboration across public, private, and nonprofit sectors; and (3) integrated service-delivery networks rather than siloed programs. None of these three requires large new City spending. All three are within Santa Fe's control.

13.3 The Santa Fe Strategy: A Sequenced, Low-New-Cost Blueprint

Translating the evidence and peer examples into Santa Fe's constrained context, the following blueprint prioritizes actions that redirect existing resources, leverage non-City partners, and prevent the most expensive outcomes — rather than assuming large new appropriations.

Pillar 1 — Lead and Coordinate (near-zero new cost)

- Name a single accountable homelessness lead (a Senior Advisor / HOST director) empowered to coordinate across City departments, County, providers, health systems, and schools — Denver's and Houston's most cited success factor.
- Set a specific, public, time-bound goal (e.g., a functional-zero target for veterans or for unsheltered seniors) to focus effort and build momentum, as Denver did.
- Stand up a Santa Fe “housing command” function using existing HOST/coordinated-entry staff to expedite matching people to vouchers and units and to cut private-market barriers.
- Convene providers on a regular cadence with protected case-conferencing and shared real-time data, replacing fragmentation with coordination (directly responsive to the January 2026 provider memo).

Pillar 2 — Redirect Spending Toward What Works

- Rebalance the shelter budget toward permanent-housing exits. Denver's evaluators were explicit: successful exits to permanent housing are the driving force behind reducing homelessness and freeing shelter capacity. Dollars spent only on managed shelter beds without exits recycle people rather than resolve homelessness.
- Protect existing Permanent Supportive Housing at all costs — it is the highest-return, most cost-effective investment and the most exposed to federal cuts. Losing PSH units means paying the ~$40,000/person/year crisis cost instead of the ~$995 net.
- Fund the cheapest high-leverage item first: deposits, application fees, and move-in costs so existing vouchers actually get used (Section 8.3). This converts already-funded vouchers into housed people at a fraction of the cost of new construction.
- Expand proven low-cost interim models — pallet micro-communities — which providers report are working with demand far exceeding supply, and which Denver validated as safer and more effective than congregate shelter.

Pillar 3 — Leverage Non-City Dollars

- Braid health-system funding: pursue Medicaid housing-related supports and partnerships with Christus St. Vincent and behavioral-health providers, since hospitals bear the cost of discharging patients into homelessness and have a direct financial stake in solutions.

- Deepen State (New Mexico) and County partnerships and master leasing to supplement the City's own funding commitment and help offset federal reductions, as the strategy's funding section describes.
- Cultivate philanthropic and business capital as an accelerant (the Santa Clara model), using City convening power rather than City cash to unlock it.
- Apply jointly and on time for every available federal and state funding stream — emergency shelter, transitional, supportive housing, and treatment capacity — a specific provider request; missed deadlines are lost dollars a cash-poor city cannot afford.

Pillar 4 — Prevent the Most Expensive Outcomes

- Invest upstream in prevention and diversion — eviction prevention, rental/utility assistance, mediation, and flexible diversion funds — because keeping a household housed is dramatically cheaper than re-housing them after a shelter and crisis-system cycle. Denver's data showed a notable drop in first-time homelessness where prevention was funded.
- Integrate school-based prevention (Adelante / McKinney-Vento) so families are caught before they hit the adult crisis system.
- Expand detox, residential treatment, and stabilization capacity so people access timely care instead of cycling — at high cost — through ERs, streets, shelters, and jail.

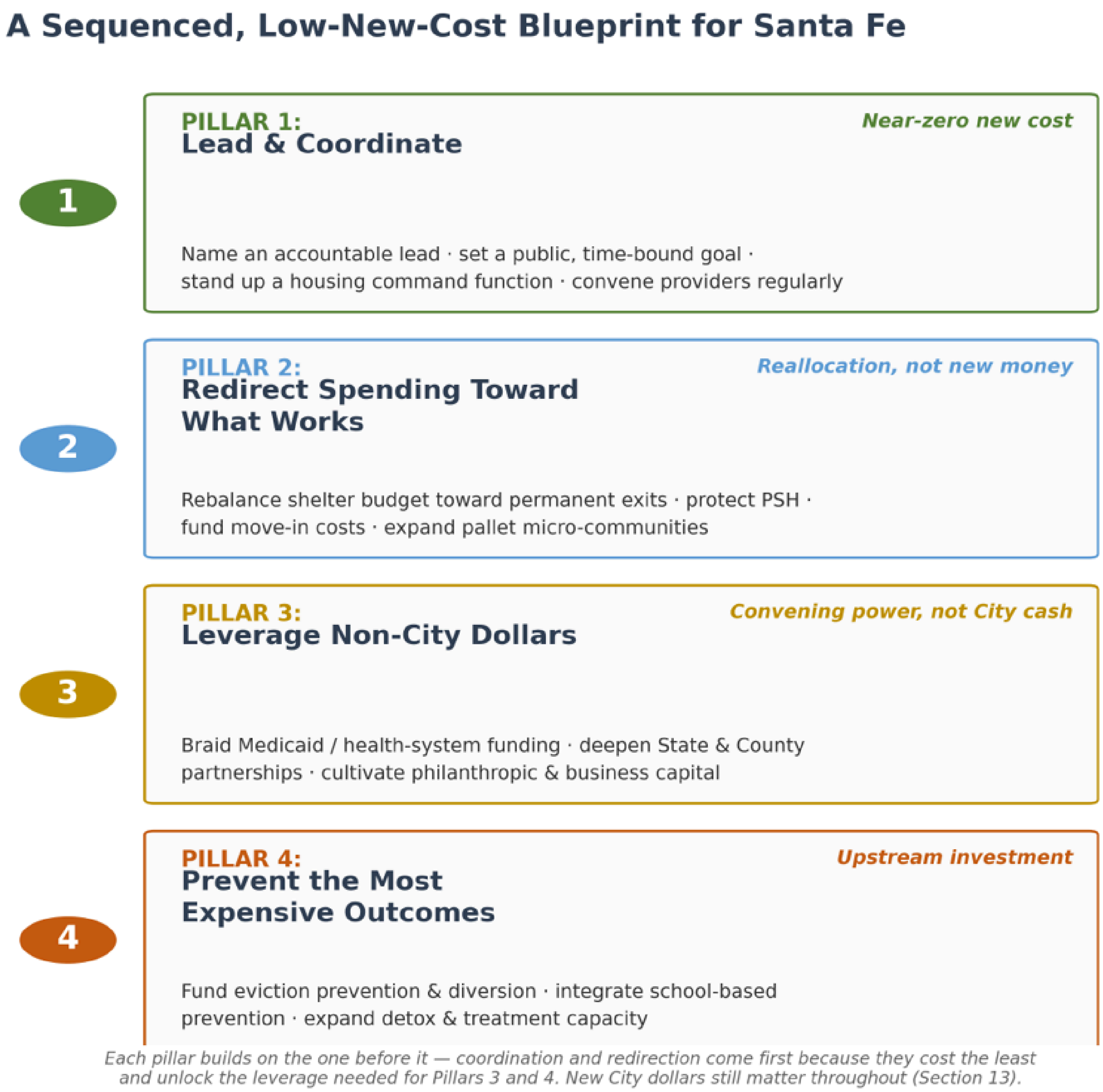

Figure 13.3 — The four pillars of Santa Fe's blueprint, sequenced from lowest to highest new cost.

13.4 What the City Has Actually Been Spending: A Funding Composition Snapshot

Every dollar figure elsewhere in this section describes what Santa Fe's response system needs. This subsection asks a different, necessary question: of what the City has already been spending, how much reflects a genuine increase in the City's own general-fund commitment, and how much reflects temporary federal relief dollars moving through the City's books on a schedule that ends in 2026? The table below presents what is verifiable in the City's own published budget documents. It is presented with its gaps shown, not smoothed over, because the gaps are themselves part of the answer.

What's documented	Amount & source
Community Services Dept., General Fund — FY2020/21	$10.99M (FY25 Adopted Budget Book, multi-year summary table)

Community Services Dept., General Fund — FY2021/22	$9.08M (same source)
Community Services Dept., General Fund — FY2022/23	$11.76M (same source)
Community Services Dept., General Fund — FY2023/24 (midyear)	$18.08M (same source)
Community Services Dept., General Fund — FY2024/25 (adopted)	$14.13M (same source)
Named homelessness contract lines, FY2023/24	$1.5M contracted homelessness services + $1M eviction prevention (FY24 Adopted Budget)
Named homelessness contract lines, FY2024/25	New $150,000 line for congregate shelter and case management; continuation of a 3-year, $4.87M commitment to 22 agencies in the CONNECT network (FY25 Adopted Budget)
Total ARPA (federal, one-time) received by the City	$15M (2021–2024 allocation)
ARPA directed to community health & safety, incl. homelessness	$6.9M, or 45.9% of the total ARPA award (City ARPA spending plan)
Specific ARPA-funded homelessness uses	$1M for the first micro-community pilot; street outreach staffing expanded from 1 to 6 workers; $2.5M in direct cash assistance to 1,000+ households (City ARPA program recap)

Read across these lines, one pattern stands out: the specific, named increases in homelessness-related spending that are easiest to point to — the pallet micro-community pilot, the expanded outreach team, the cash-assistance program — are ARPA-funded, one-time federal dollars, not new General Fund commitments. The Community Services Department's own General Fund total, which bundles homelessness contracts together with libraries, senior centers, and youth programming, does not show a clear, sustained upward trend over this period once midyear and adopted figures are compared on the same basis — it moves up and down year to year in a way that tracks broader department reprioritization more than a deliberate, compounding investment in homelessness response specifically.

What this table cannot yet tell us

A fully isolated, year-by-year General Fund total for homelessness spending alone — separated cleanly from libraries, senior centers, and youth programs, and tracked consistently from before COVID through today — is not available in the City's publicly posted budget summaries. The specific homelessness-only line items above are called out as narrative highlights in some years' budget books and simply not broken out the same way in others. This report recommends the City's Finance and Budget Office compile that isolated figure directly;

until it exists, any claim about the City's true general-fund trend in homelessness spending — including the pattern this subsection observes — should be treated as a strong, sourced indication, not a settled fact.

Why this matters going forward: As Section 2 documents, the federal and ARPA dollars that have visibly grown Santa Fe's homelessness response since 2021 expire on a fixed schedule ending December 31, 2026. If that expansion was substantially federally funded rather than reflecting a new, sustained City General Fund commitment, the coming ARPA cliff is not just a funding gap — it is a return to a lower baseline than the last several years' visible activity would suggest, at precisely the moment national and state trends (Section 3) show the need continuing to grow.

A reasonable benchmark, not a rule of thumb: There is no nationally recognized standard for what share of a city's general fund should go toward homelessness response, scaled to population or unsheltered rate — any specific percentage offered as a “rule of thumb” would not be defensible. Peer cities' scale of commitment is a more honest reference point: Seattle's dedicated homelessness budget grew from $85.2 million in 2018 to a proposed $225 million in 2026 (a city of roughly 750,000, putting sustained General Fund commitment in the range of $110–$300 per resident depending on the year), and Denver's combined housing-and-homelessness package reached $254 million in 2023 (a city of roughly 715,000). Santa Fe, at roughly 90,000 residents, operates at a different scale entirely — these figures are offered as evidence of what sustained municipal commitment looks like elsewhere, not as a target Santa Fe should be measured against directly.

The bottom line: the City must lead on funding

Coordination, redirection of existing spending toward permanent-housing exits, leverage of health-system and philanthropic dollars, and prevention are all real tools Santa Fe should use — but they are not a substitute for the City putting its own new and increased dollars into this system. The evidence is unambiguous: every one of these approaches lowers total public cost, and that is precisely the argument for the City to fund this work at the highest level it can sustain, not the argument for holding funding flat. The status quo — unaddressed unsheltered homelessness — is the single most expensive path available, because the community pays for it anyway through its most expensive systems. The County, the State, and philanthropy should be asked to partner and to expand what the City can do; they should not be asked to substitute for the City's own leadership on funding.

14. What Businesses and the Community Can Do

Government leads on solving homelessness, and it should not have to do so with one hand tied behind its back — but it does not have to do it entirely alone. In a period of tight City budgets and shrinking federal support, the business community, faith community, philanthropy, and individual residents are not optional “nice-to-haves” but a valuable supplement to a City that is itself investing at the highest level it can. Every city that has made real progress — Houston, Denver, Santa Clara — did so through committed local government leadership and funding, expanded by cross-sector partnership, not through cross-sector partnership standing in for government action. This section lays out concrete, evidence-based roles for the private and community sectors, alongside — not instead of — the City's own funding commitment described in Sections 12 and 13.

14.1 Why Business Engagement Matters — and Pays Off

Homelessness directly affects local businesses through foot-traffic, public-safety perceptions, and employee wellbeing. But engagement is not just risk mitigation — national research (Community Solutions / Built for Zero, USICH, Harvard ALI Social Impact Review) shows business and civic leadership is a decisive factor in whether a community's efforts succeed. In Santa Clara, a single corporate donation ($50M from Cisco) catalyzed an entire coordinated system. Businesses bring three things government often lacks: flexible capital, real estate and hiring capacity, and the civic influence to build political will.

14.2 What Businesses Can Do

Hire and support employment pathways

- Hire people exiting homelessness and partner with providers on job-readiness, apprenticeships, and second-chance hiring — employment income is one of the documented economic benefits of Housing First.
- Offer skills-based volunteering: resume coaching, financial literacy, digital-skills, and career mentoring for people in bridge and supportive housing.

Provide real estate and housing capacity

- Landlords: accept vouchers, reduce screening barriers for people with housing history, and participate in landlord-incentive / risk-mitigation programs — landlord participation is repeatedly identified as a key bottleneck in leasing up vouchers.
- Property owners and developers: donate, discount, or master-lease units; contribute unused land or property for micro-communities or supportive housing — USICH specifically calls on the business and financial sector to donate resources, land, or property.
- Hotels/motels: partner on non-congregate interim housing (the Denver hotel-conversion model).

Invest financial and in-kind resources

- Corporate and philanthropic giving as an accelerant that unlocks public dollars (the Santa Clara model) — including funding the highest-leverage gap: deposits and move-in costs that make vouchers usable.
- Sponsor specific programs or micro-community sites; fund the frontline workforce whose burnout and turnover threaten the whole system.
- In-kind contributions: goods, services, professional expertise (legal, accounting, IT, construction), and space.

Lend civic leadership

- Chambers of commerce and business-improvement districts: organize the business community for systems change and provide political cover and pressure for effective policy (the Built for Zero / Grand Rapids model).
- Use business voice to counter NIMBY opposition and support faster permitting and zoning for affordable and supportive housing.

14.3 What Faith Communities, Nonprofits & Philanthropy Can Do

- Faith communities: provide volunteers, space, seasonal shelter capacity, in-kind support, and sustained funding — a documented backbone of many local systems.
- Foundations: fund prevention and upstream solutions, capitalize provider operating reserves (directly relevant to Consuelo's Place's reimbursement gap), and provide the flexible early capital that de-risks and accelerates public investment.
- Community foundations as neutral conveners: national research identifies a trusted, resourced convener (often a community foundation) as a catalyst for effective cross-sector networks.

14.4 What Individual Residents Can Do

- Volunteer with local providers — meal service, apartment set-up for incoming families, mentoring, tutoring for children in family shelters.
- Donate funds (most flexible and impactful) or specific requested items — giving directly to trusted local providers like Consuelo's Place, Esperanza, St. Elizabeth, and the micro-communities.
- Support, don't criminalize: back trauma-informed, housing-focused responses over enforcement, and support (rather than oppose) shelter and housing sites in their neighborhoods — scattered-site models reduce stigma and improve outcomes.
- Advocate: contact state and federal representatives about protecting vouchers, PSH, Medicaid, SNAP, and CoC funding — local systems cannot backfill every federal cut.
- Employ, rent to, and welcome people exiting homelessness as neighbors, tenants, and employees.

14.5 A Shared-Responsibility Framework

The table below summarizes who can do what. Other sectors and levels of government can meaningfully expand what is possible, but the City remains the lead funder and decision-maker — this table describes support for the City's effort, not a substitute for it.

Sector	Highest-Leverage Contributions
City	Lead and primarily fund the system; set public goals; commit new and increased City dollars alongside redirected spending toward permanent-housing exits; fund move-in costs; expand micro-communities; apply for every grant on time.

Sector	Highest-Leverage Contributions
County & State	Partner with and supplement City funding; help backstop federal cuts; master leasing; Medicaid housing supports; joint funding applications.
Health systems	Fund/partner on housing to reduce costly discharges into homelessness; braid Medicaid dollars.
Businesses	Hire; accept vouchers; donate/master-lease property & land; give capital; lend civic leadership on policy & permitting.
Philanthropy	Accelerant capital; fund prevention & provider reserves; convene as neutral party.
Faith community	Volunteers, space, seasonal capacity, sustained funding.
Residents	Volunteer, donate, advocate, welcome housing in their neighborhoods, employ & rent to people exiting homelessness.

The community message

Santa Fe already has the assets — a differentiated provider network, engaged residents, faith communities, and a business sector with a real stake in the outcome. The City should convene, align, and leverage these assets — but that is in addition to, not instead of, funding the system itself. Businesses, philanthropy, faith communities, and residents can meaningfully expand what Santa Fe can do, and the County and State should be full partners, but none of them can substitute for the City's own commitment. Ending homelessness takes a community effort, and the City's job is to lead it by putting its own money behind it first, at the greatest level it can, not to treat its role as coordination alone.

15. Conclusion

Santa Fe faces a defining moment. The local shelter system has been restructured in ways that removed a guaranteed emergency front door, and the federal safety net that the entire continuum depends on is contracting even where the worst-case appropriations scenarios were avoided. In this environment, the instinct to treat each program as a separate problem must be resisted. Homelessness in Santa Fe is a system challenge, and it requires a system response.

The path forward is clear in outline: rebuild guaranteed emergency shelter; modernize bridge housing from hotel-based to apartment-based units; stabilize Consuelo's Place; defend the permanent housing pipeline against federal cuts; and knit the whole together with school-based supports, outreach, coordinated entry, and strong central coordination. None of these pieces works alone. Together, they form a continuum that can move people from crisis to stability even in a harder funding climate.

Housing ends homelessness. Santa Fe's task in 2026 is to protect the housing pathways it has, rebuild the ones it has lost, and stabilize the providers who carry the system — so that every resident in crisis has a real, reliable door to walk through.

Esperanza Shelter

HUGS

Consuelo’s Place

Urban Alchemy

The Lifelink

Interfaith

Micro-Community at Arroyo Chamiso

Marisol Atkins

St. Elizabeths Shelter

Salvation Army

Appendix A: Sources & Notes

Local reporting & City sources

Santa Fe New Mexican, Santa Fe Reporter, Source New Mexico, and Taos News reporting on the Interfaith–Urban Alchemy shelter transition and Agape House; City of Santa Fe shelter/emergency-housing resources; and the January 2026 Santa Fe Provider Network memorandum to the incoming administration (Esperanza Shelter, HUGS, Consuelo's Place, Urban Alchemy, The Life Link, Interfaith, Micro-Community at Arroyo Chamiso, St. Elizabeth Shelter, Salvation Army).

Additional 2026 local reporting drawn on for this update: Santa Fe New Mexican and KSFR coverage of the Agape House shelter contract and the state grant's March 31, 2026 requirement that the City list the Cerrillos Road building for sale; Santa Fe New Mexican reporting on the expiration of the Interfaith/City senior motel bridge program and its planned transition to the Richards Avenue micro-community; and Santa Fe New Mexican and KUNM reporting on the Richards Avenue micro-community's zoning and permitting delays following its June 2025 City Council approval.

Linkages program details drawn from Housing New Mexico / New Mexico Mortgage Finance Authority program pages (housingnm.org), NCSHA's 2023 coverage of MFA's statewide Linkages voucher allocation, and The Life Link's published Linkages program information for Santa Fe County.

Federal policy, funding & the fiscal cliffs

U.S. Interagency Council on Homelessness (USICH) federal strategic plan and best-practice guidance; Center on Budget and Policy Priorities on Medicaid/SNAP cuts and housing instability; Congress.gov / FY2026 THUD appropriations; National Alliance to End Homelessness and Corporation for Supportive Housing on CoC/PSH funding; U.S. Treasury SLFRF Obligation Interim Final Rule; National League of Cities, National Association of Counties, Brookings Metro, and Government Finance Officers Association on the ARPA obligation (12/31/2024) and expenditure (12/31/2026) deadlines and the "ARPA cliff."

Peer-reviewed & systematic-review evidence

Felitti et al. (1998) and Hughes et al. (2017) on Adverse Childhood Experiences; the American Journal of Preventive Medicine systematic economic review of Permanent Supportive Housing with Housing First (median benefit $18,247 vs. cost $16,479 PPPY); NLIHC Housing First research synthesis ($1.44 return per $1; $900–$29,400 PPPY savings); Urban Institute evaluations of Denver's Social Impact Bond and All In Mile High initiative; Third Door Coalition cost-of-homelessness synthesis; and JAMA, The Lancet, Psychological Services, Social Service Review, and Housing Studies on mortality, shelter utilization, and Housing First outcomes.

Brown, Guzman, Kaplan, Ponath, Lee, and Kushel, "Trajectories of functional impairment in homeless older adults: Results from the HOPE HOME study" (PLOS ONE, 2019) and related HOPE HOME publications (University of California, San Francisco), documenting elevated rates of functional impairment, self-care difficulty, and “accelerated aging” among homeless adults 50 and older relative to the general housed population.

Peer-city & best-practice models

Denver (All In Mile High / House1000, Urban Institute evaluation); Houston (Coalition for the Homeless multi-partner model); Santa Clara County (Destination: Home public-private partnership); and the National Civic League / National Academy of Public Administration study of civic-engagement factors in successful communities; Community Solutions / Built for Zero and Harvard ALI Social Impact Review on business and cross-sector engagement.

Denver’s 2019 and 2023 zoning code amendments creating a defined “Tiny Home Village” / “Temporary Managed Communities” land use category, and Seattle’s 2019 “transitional encampment” zoning classification and 2026 “Shelter Acceleration” permitting and environmental-review reforms, cited in Section 5.4 as models for streamlining Santa Fe’s micro-community permitting process.

Note: Figures and program structures described here should be verified against the most current City contracts, provider agreements, and final federal appropriations before being used for binding budget or policy decisions. Per-person cost figures cited from national studies are illustrative of the relationship between crisis costs and housing costs, not Santa Fe-specific budget lines.