



2025 State *of the*
System

Read the Report:



*People, programs, and progress in Austin/Travis County's
Homelessness Response System (HRS)*



Who We Are



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Director of Research & Evaluation

ABOUT ECHO

The Ending Community Homelessness Coalition (ECHO) is the **backbone of our community's Homelessness Response System**. As the lead agency for the Austin/Travis County Continuum of Care, **we lead and align a coalition responsible for planning and implementing community-wide strategies to end homelessness**. We work alongside people with firsthand experience of homelessness and nonprofit, government, and philanthropic partners to **build a future in which everyone in our community has housing of their choice that provides a foundation for optimal health, success, and stability**.

Learn more: austinecho.org



About the Report



The 2025 *State of the System* report:

- *encompasses data from calendar year 2024, as well as 2019-2023*
- *pulls data from the Homeless Management Information System (HMIS)*
- *identifies progress, needs, gaps, and disparities in Austin/Travis County's Homelessness Response System (HRS)*



Key Takeaways



The System is growing to match the needs of our community.

Fewer people are coming to providers for help for the first time.

Disparities still exist amongst several groups.



People 'served' by the Homelessness Response System include people who:

- *stayed at a shelter for a night*
- *were housed the entire year through an HRS program*
- *got housed in 2024*
- *were homeless for all of 2024*
- *were at risk of homelessness but kept their housing*

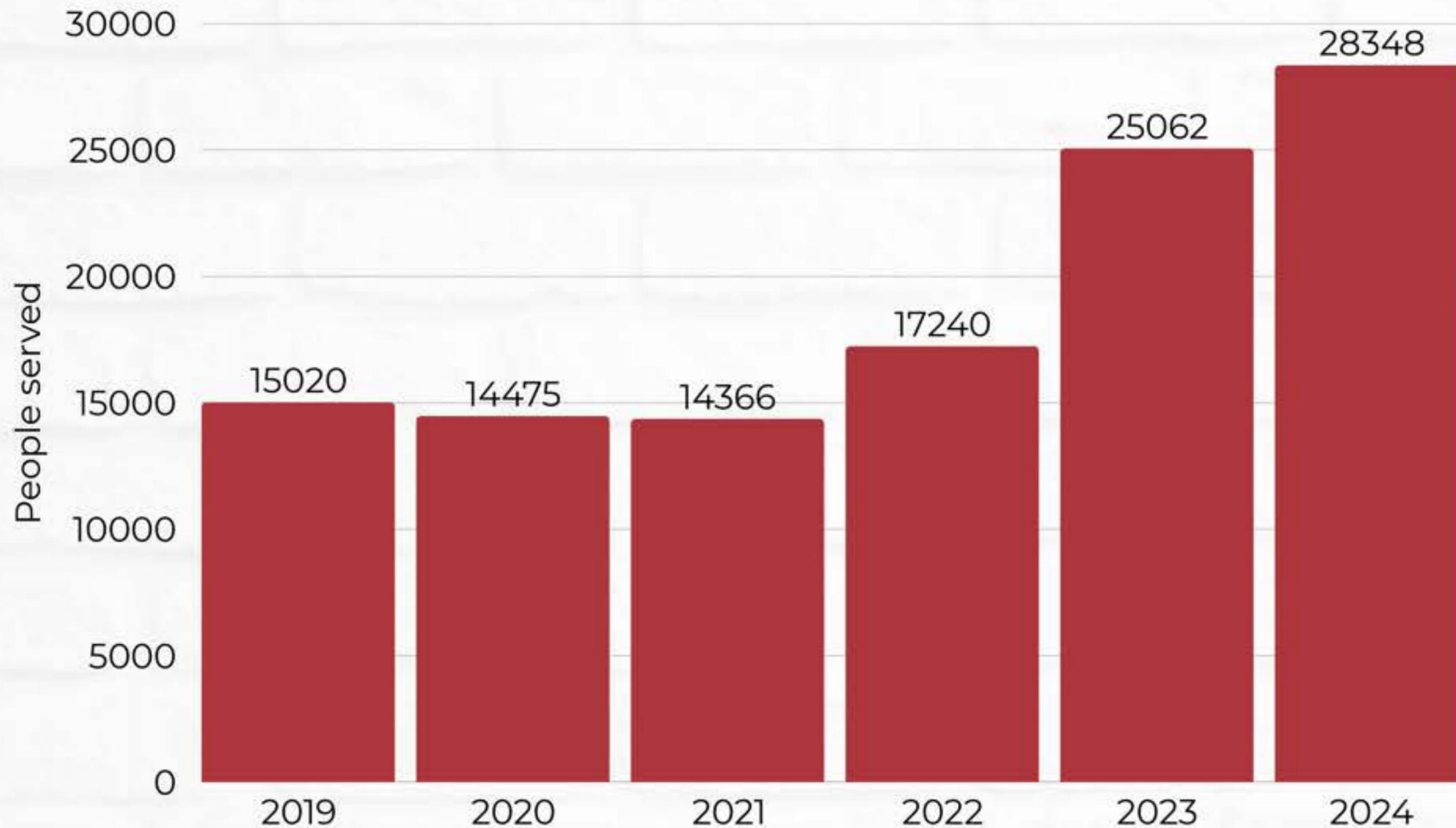


Beds and units continued to grow for our system overall

Total	3616	4270	5019	4929	6213	6704	
PH - Rapid Re-Housing	557	1025	1803	1644	2615	2502	
PH - Permanent Supportive Housing	1204	1263	1326	1560	1553	1809	
Emergency Shelter	1038	1209	1110	966	1180	1678	
Transitional Housing	484	406	408	430	565	489	
Permanent Housing with Services	318	352	357	311	285	211	
Safe Haven	15	15	15	18	15	15	
Years	2019	2020	2021	2022	2023	2024	



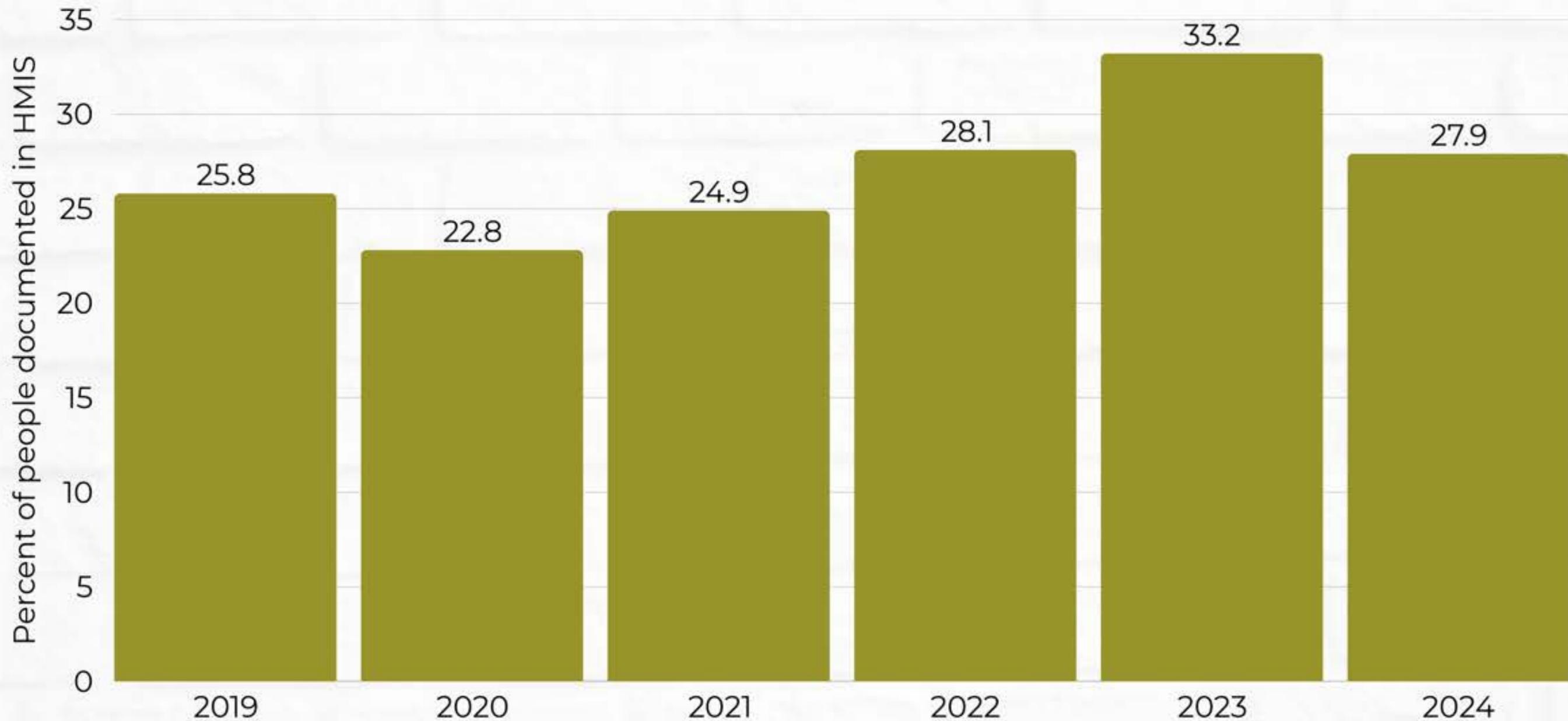
The total number of people served by the Homelessness Response System increased



2024 saw a smaller increase in people served by the system since 2022, about 13%



The number of people who became homeless decreased for the first time in five years



Fewer people becoming homeless is promising; our community can build on this by investing more in what works.

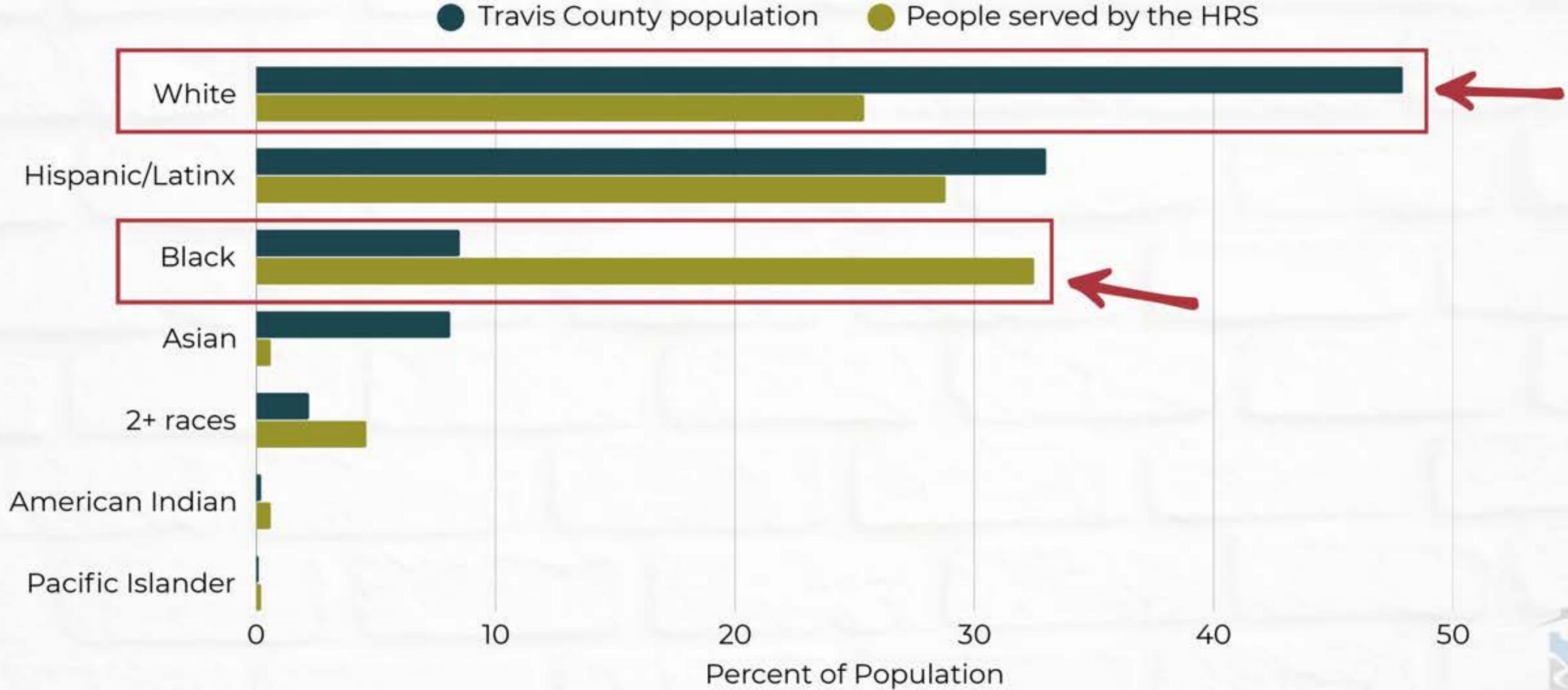
The HRS is reaching more people experiencing homelessness which will refine our understanding of the people accessing the system and providers.



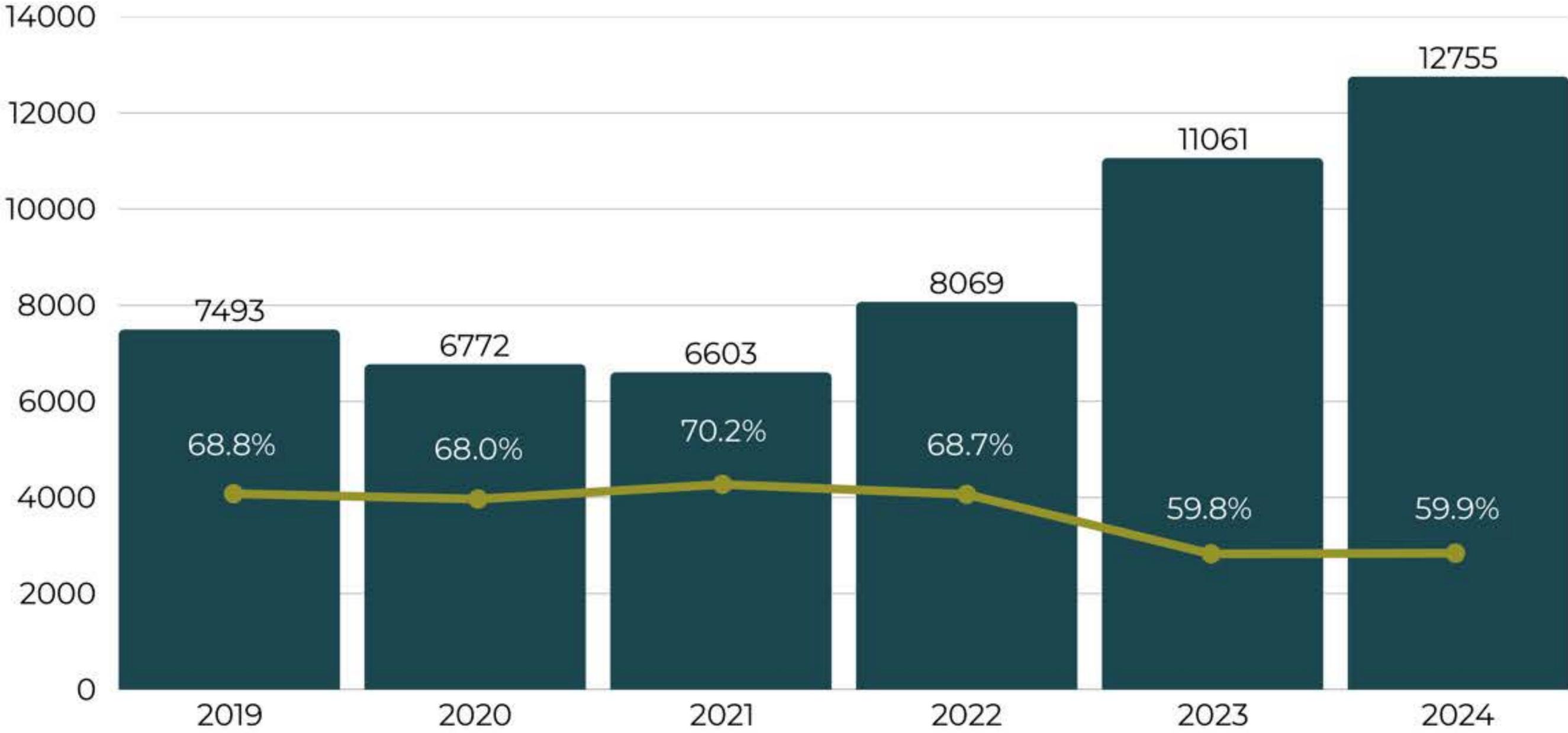
**There is still work to do to ensure
no portion of our community
suffers more than others.**



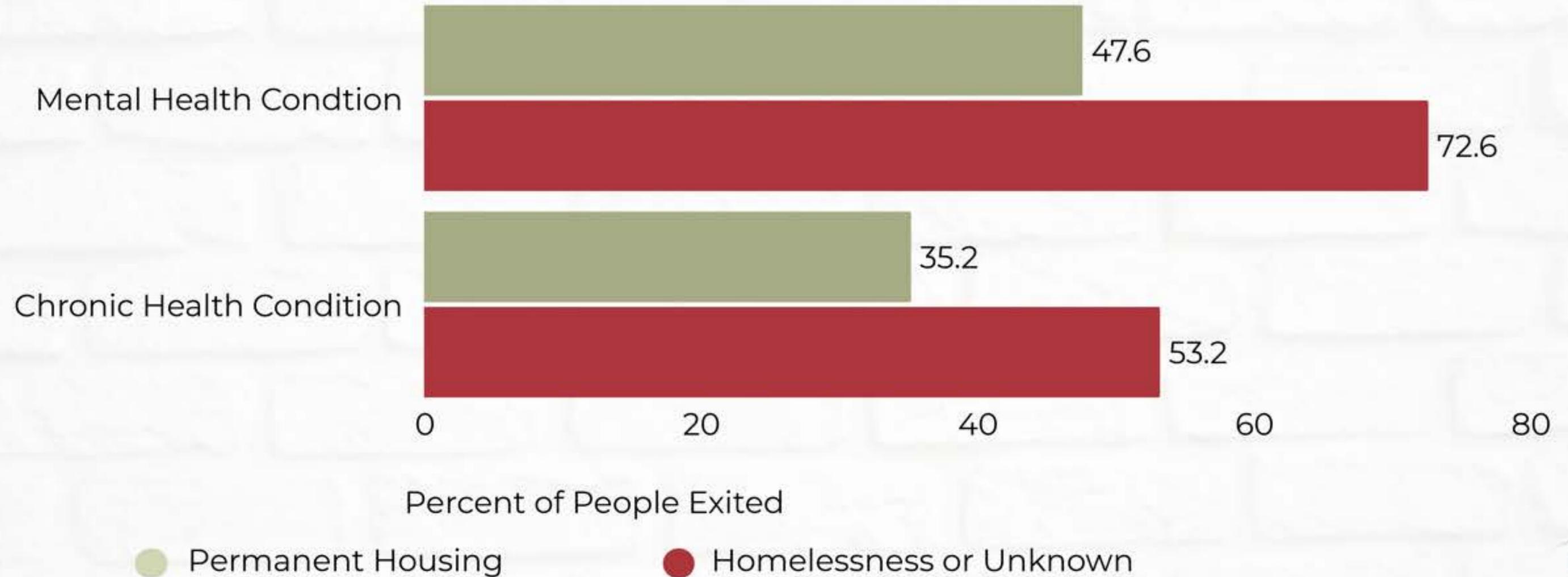
Race demographics still do not match our local census data



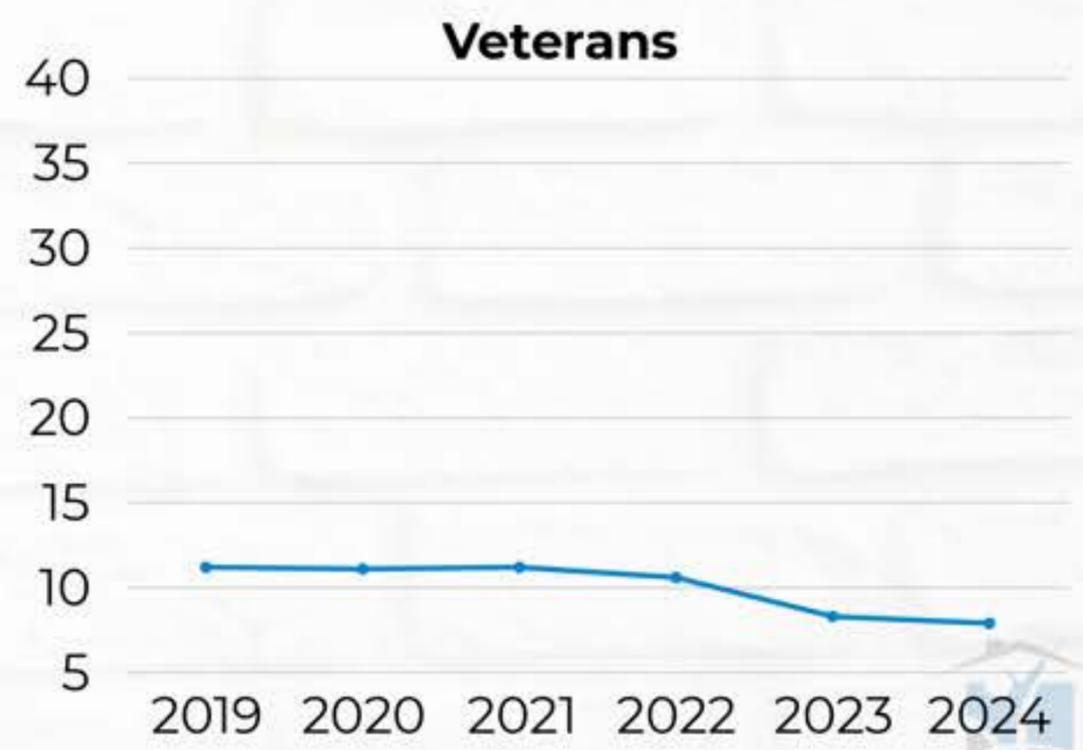
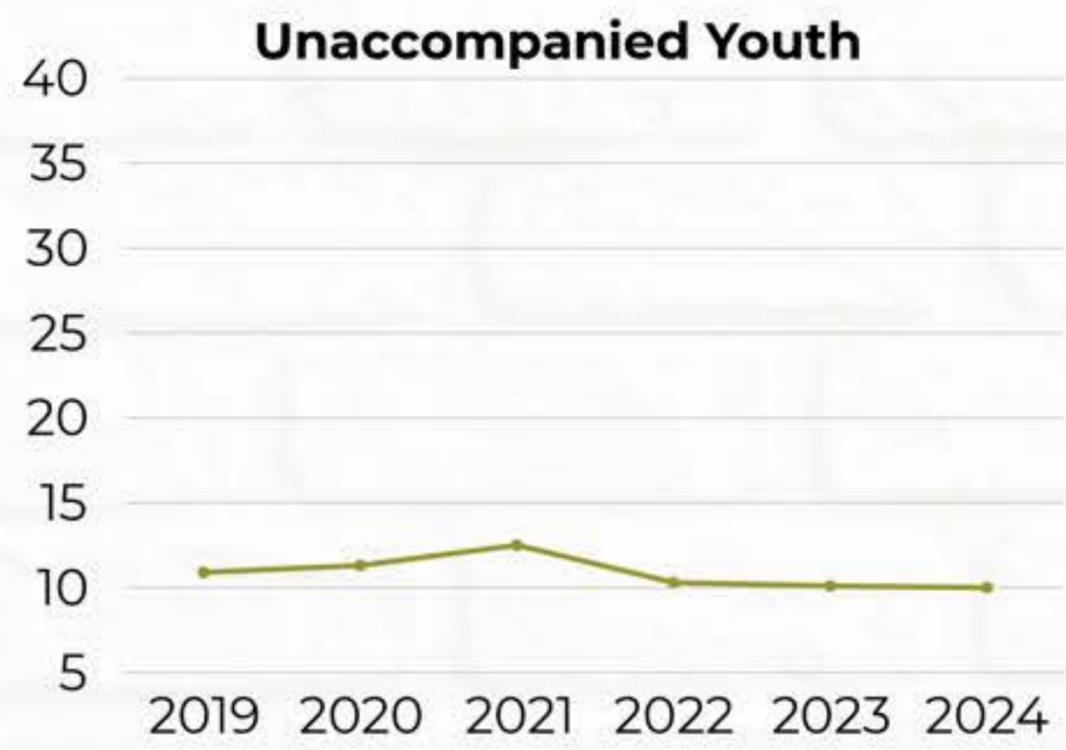
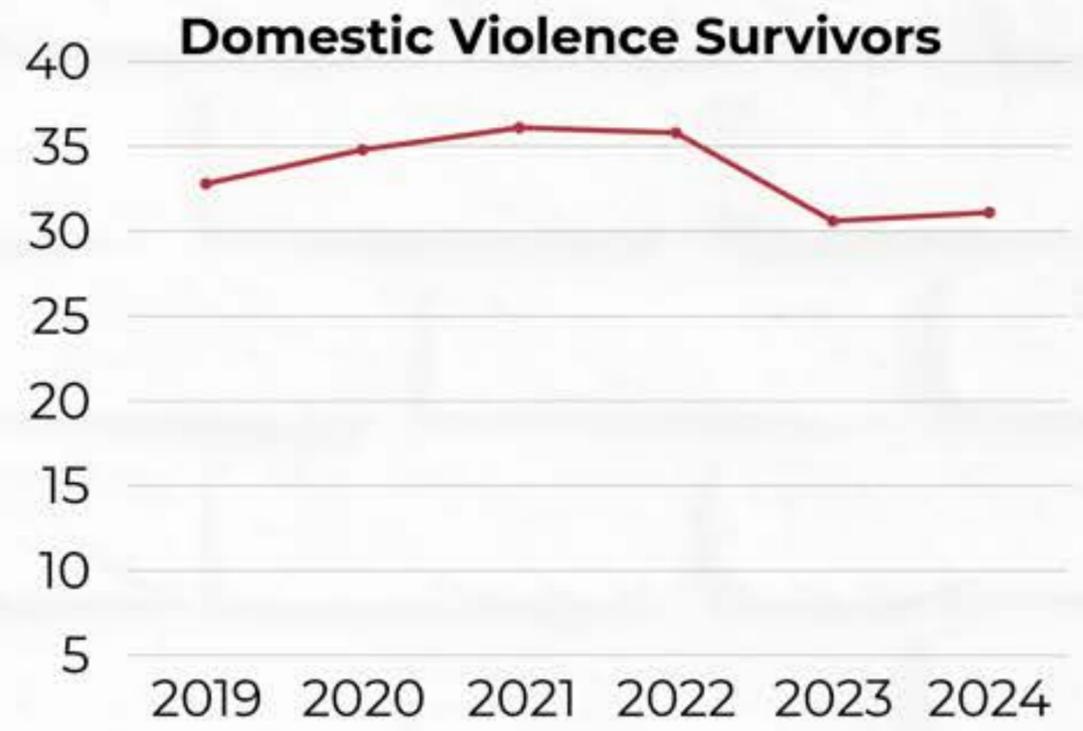
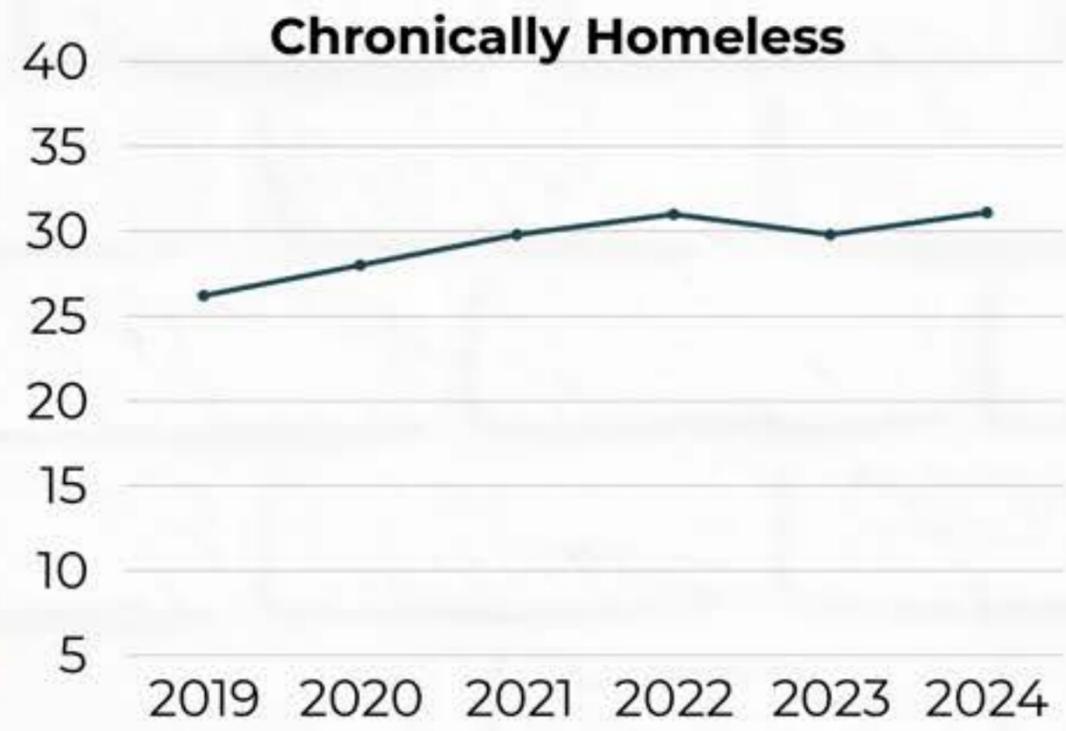
The number of people with disabilities continues to grow



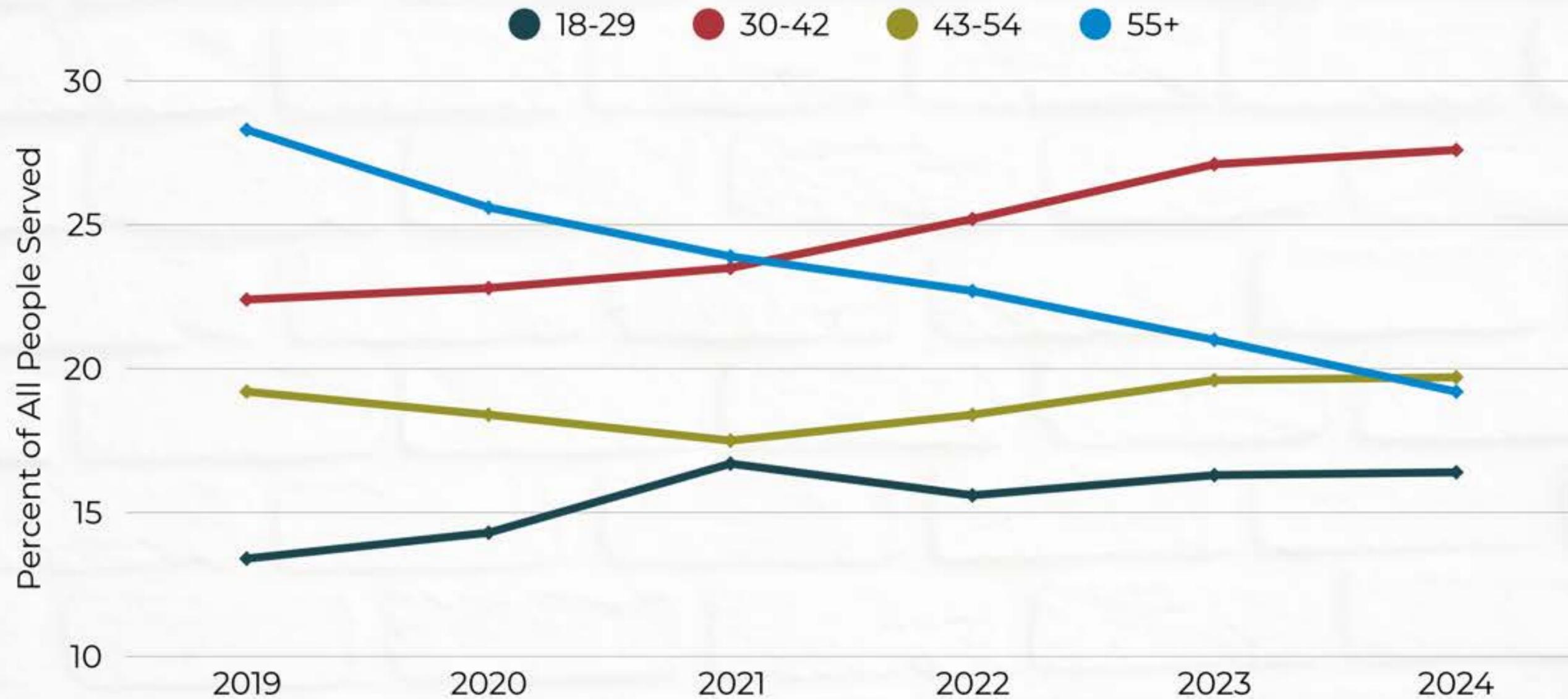
People with disabilities are much more likely to leave HRS housing programs back into homelessness.



Sub-populations with dedicated resources remain stable while overall chronic homelessness increased

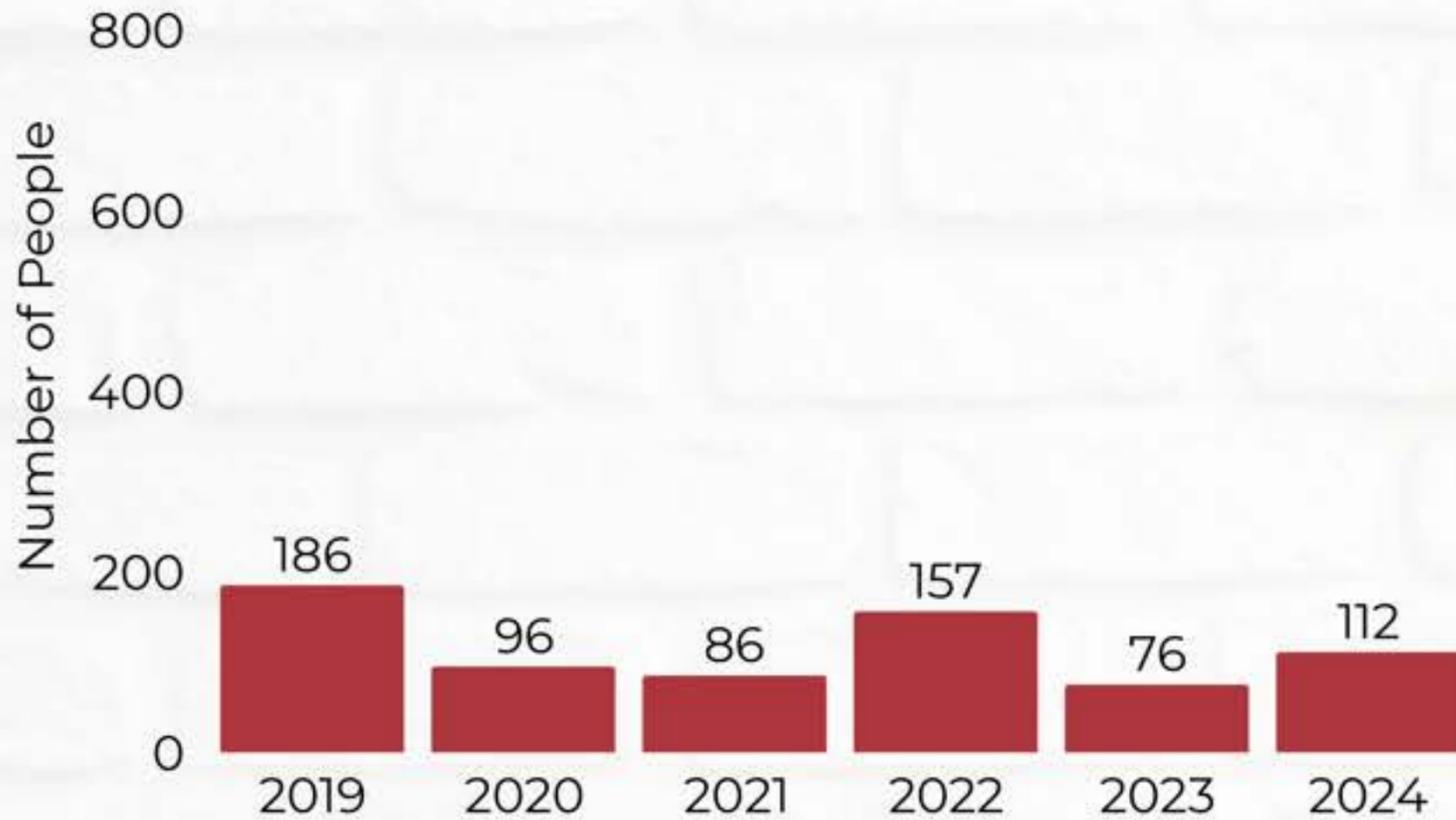


The percentage of older adults decreases while others grow

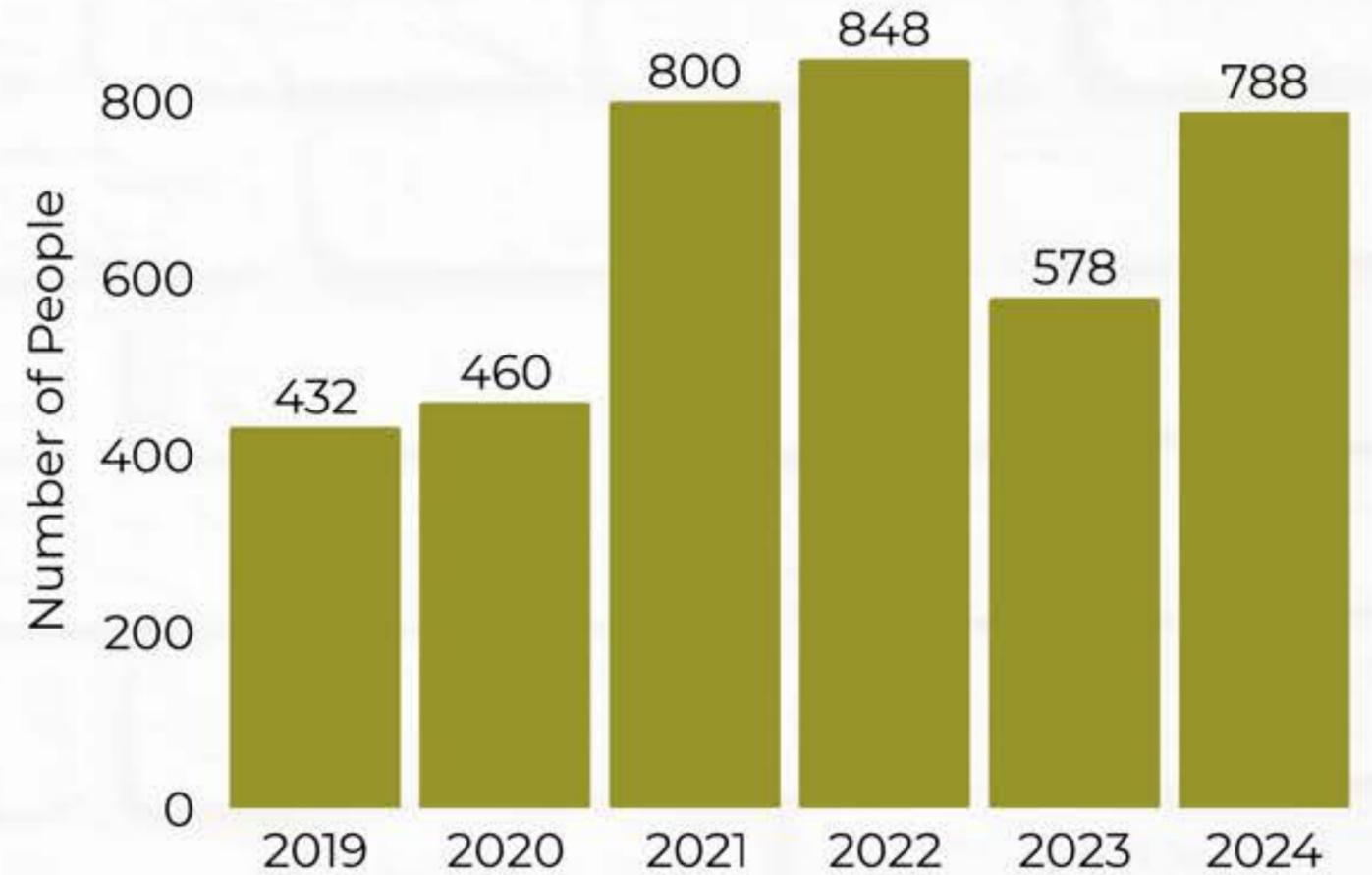


Both PSH and RRH Providers helped more people move on from the HRS and into housing on their own.

Total Number of People Moving to Housing of Their Own from PSH

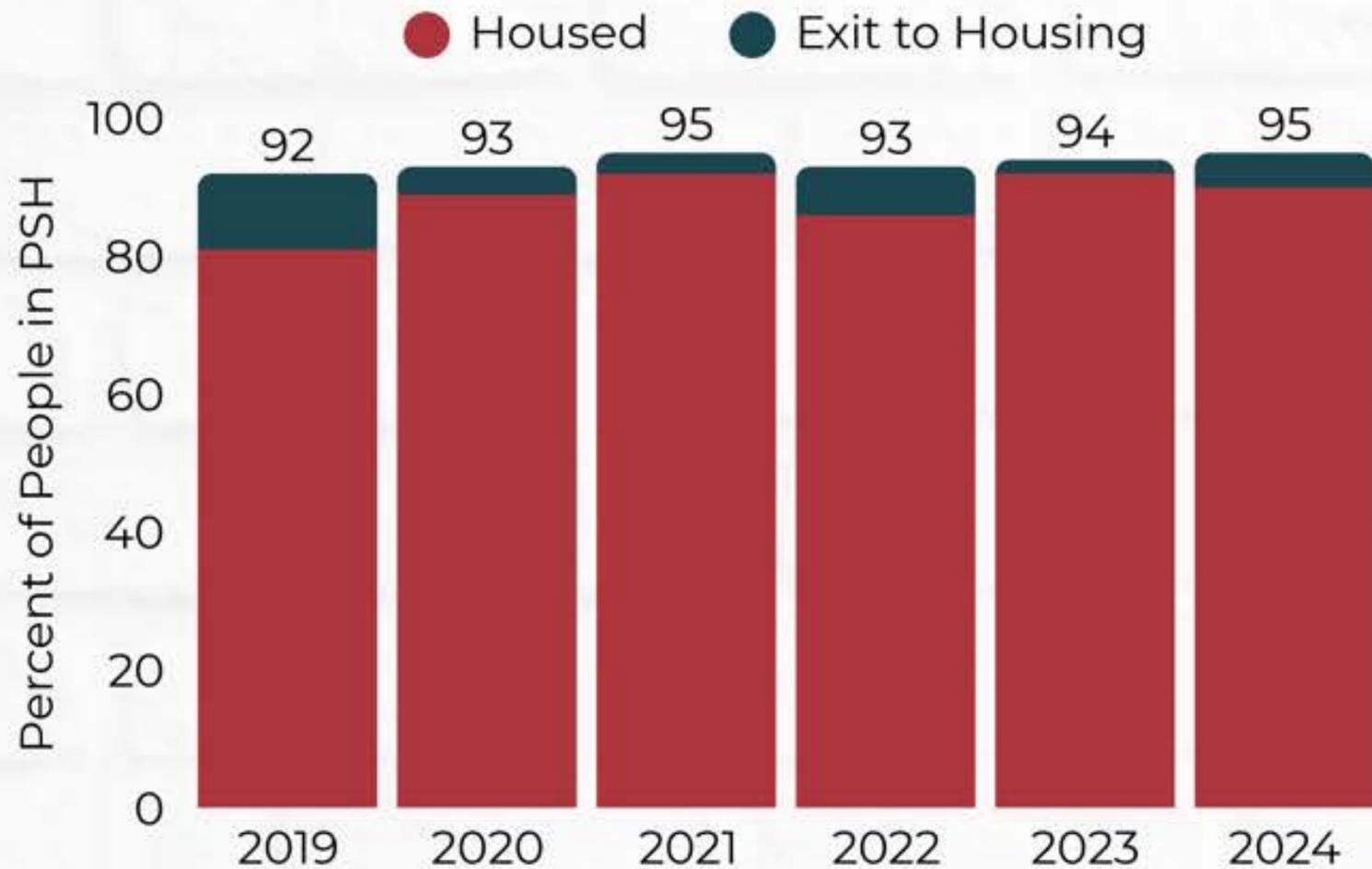


Total Number of People Moving to Housing of Their Own from RRH

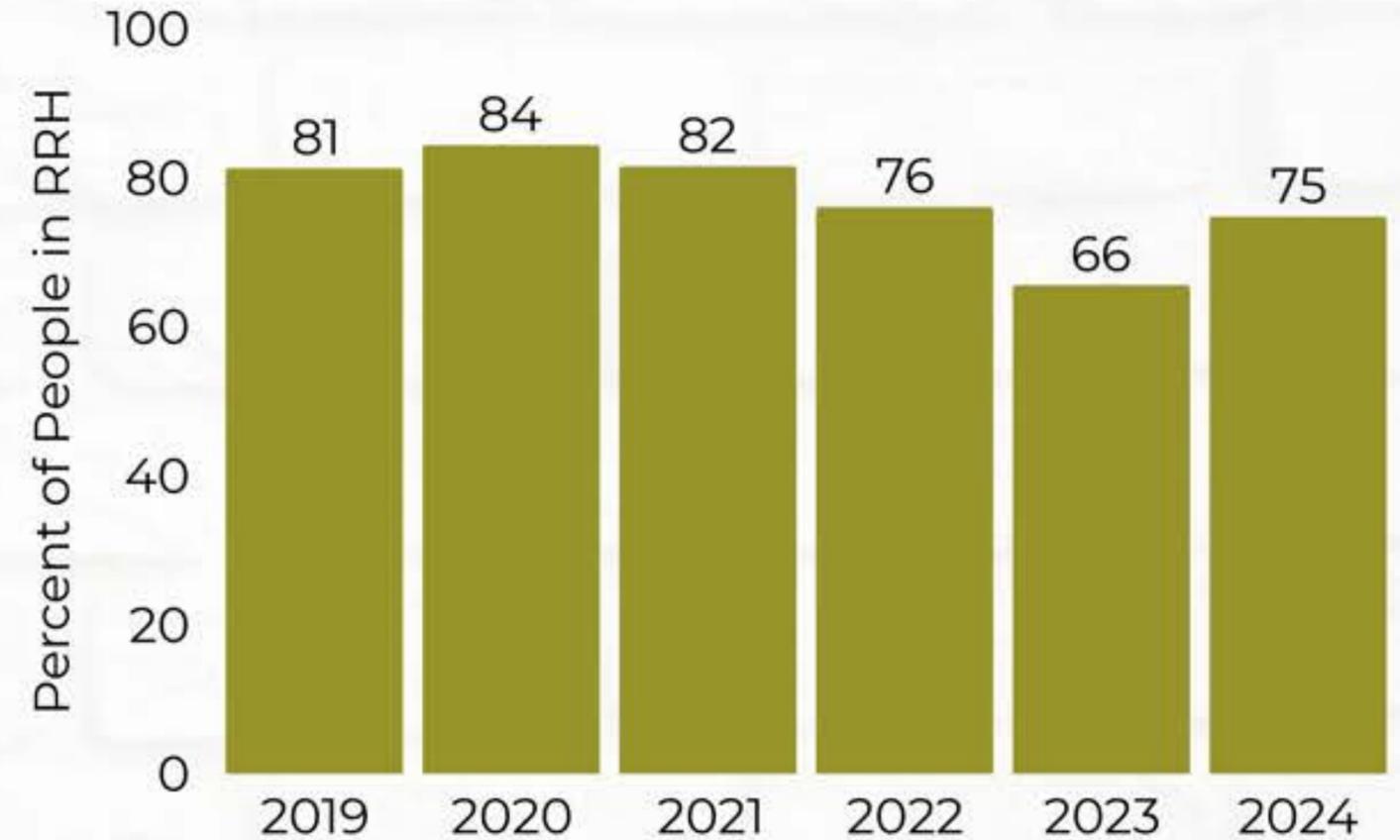


The rate of exits to permanent housing are different between PSH and RRH providers

Percent of People Still Housed or Leaving to Housing of Their Own from PSH

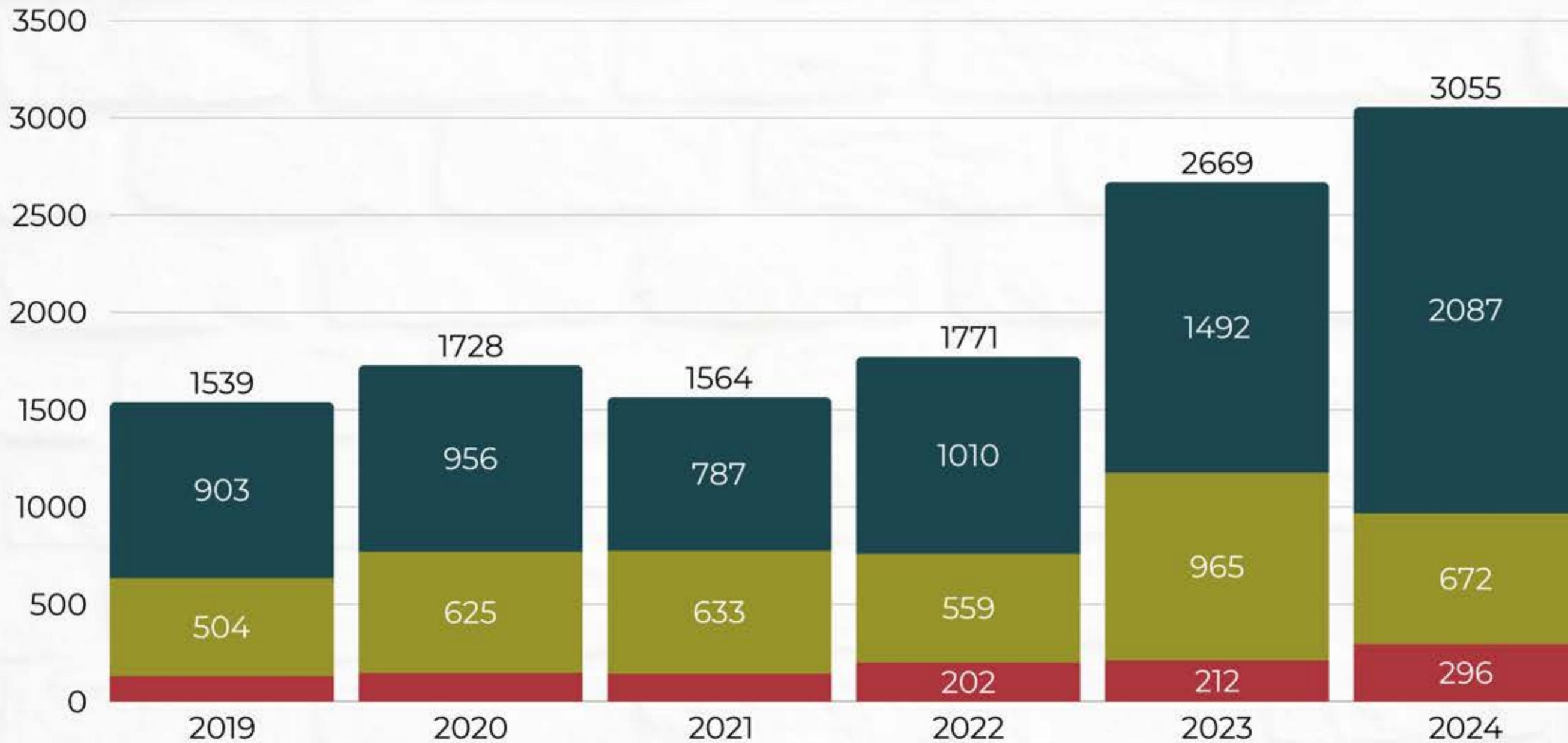


Percent of People Leaving to Housing of Their Own from RRH



More people moved into housing, led by growth in minimal assistance programs

PSH RRH MHA



Key Takeaways



The System is growing to match the needs of our community.

Fewer people are coming to providers for help for the first time.

Disparities still exist amongst several groups.



Recommendations



Build on investments in housing, shelter, and short-term programs like diversion and prevention.

Fund more supportive services to meet the needs of people with disabilities and standardize service documentation in HMIS.

Target additional research studies for populations with growing needs.



Thank you!

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