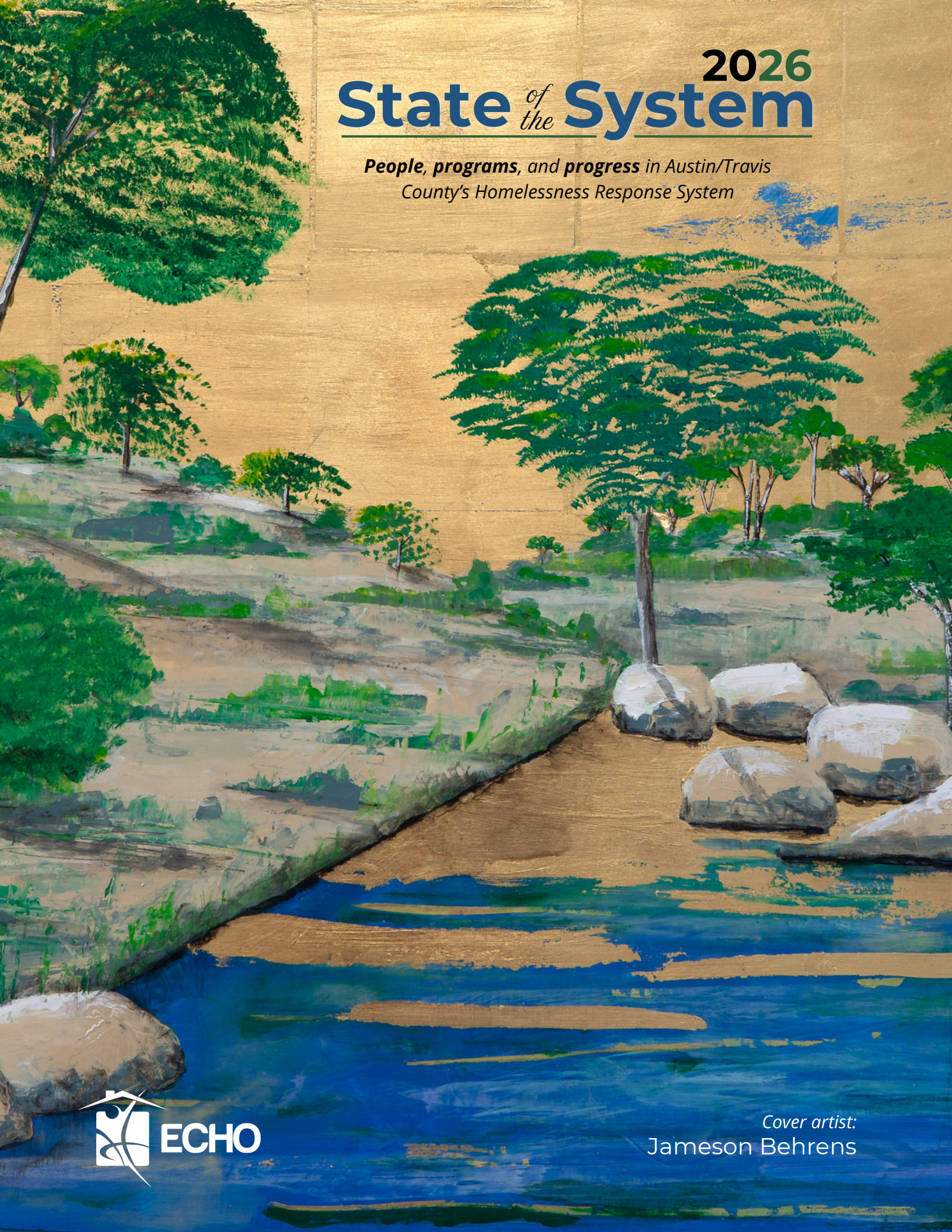
2026 State of the System

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



ECHO

Cover artist:
Jameson Behrens

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2026 State *of the* System

People, programs, and progress in Austin/Travis County's Homelessness Response System

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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 Cover

*The cover image is a work by local artist **Jameson Behrens**. Jameson painted this work at **Art from the Streets** (AFTS), a nonprofit studio in Austin dedicated to providing space and materials to people with lived experience of homelessness. Learn about the organization and support the artists at **artfromthestreets.org**.*

> I always try to find a way to create a sense of **peace** and **tranquility**.

Jameson has been painting since the COVID-19 pandemic. A lifelong Bob Ross fan, he got the bug to buy some art supplies with his first federal stimulus check; he hasn't looked back. He calls AFTS "a godsend." Having time and space "just to be able to paint and not worry about anything else has been so beneficial to my craft."

*For this piece, Jameson collaborated with **Lucy MacQueen**, an artist with a studio in the same building as AFTS, to further develop skills and learn new techniques. He calls it "**one of the coolest experiences of my life**." Each of the artists brought a different approach and style to their landscapes, he explained, and were able to meld the two into a cohesive piece. Lucy showed Jameson how to work with gold leaf "**We fed off each other and we figured things out**."*

*As Jameson develops his craft further, he hopes to move into a studio of his own one day. For now, though, he plans to continue painting at AFTS, an opportunity he says has changed his life. "**There's so much to learn**."*

Report Overview

This report provides an overview of the **Homelessness Response System (HRS)**, how people use the services that are available, and what else is needed to end homelessness in Austin and Travis County. The report also provides an analysis of racial and ethnic disparities in the HRS.

Our goal is to make this report both comprehensive and accessible so Leadership Council (our Continuum of Care's governing body) and funders of HRS programs and services may use it for planning and funding priorities; service providers may use it for strategic and operational planning; and other stakeholders and the community can use it as an overview and reference guide for our local HRS.

Acknowledgements

ECHO would like to acknowledge and thank our partners who serve people experiencing homelessness directly and whose service generates the data that informs the analysis included in this report. As our community transitions to a new HMIS vendor, we're grateful for our partners' continued collaboration and commitment to data quality. Together, this change is a reflection of our shared dedication to building a more responsive system that better serves our unhoused neighbors.

About the Data

Data referenced in this report comes from calendar years 2020-2025. As the Lead Agency for the Austin/Travis County Continuum of Care (CoC), ECHO manages the Homeless Management Information System (HMIS) for our community. Direct service providers use the database to track service needs and provision, and this report relies on this data. While this report focuses on numbers and trends, it's important to remember **these figures represent people in our community - our neighbors, friends, and family members who are or have been dealing with the daily trauma of homelessness**. This report does its best to understand those experiences and translate them into actionable recommendations to make people's lives better and end homelessness for everyone in our community.

People Documented & Served

Most of the charts in the report are based on the number of people that are documented in the Homeless Management Information System (HMIS) who are receiving services from one or more providers within the Austin/Travis County Continuum of Care (CoC). This report reviews service data from the past six years to compare overall system trends over time. This could include people who are unsheltered and have only been engaged by street outreach, people who completed a Coordinated Assessment, people staying in shelters, and people housed by providers.

HMIS Migration

In Fall 2025, our community transitioned to a new software provider for our Homeless Management Information System (HMIS). This will provide new capabilities and flexibility to providers in our community. Transferring to new software required transferring massive troves of data. The transition and impact on the data in this report are explored in-depth in Appendix C, but it's important to recognize two ways in which the transition impacts this report.

First, transferring so much data provided an opportunity to remove duplicate profiles and profiles that are incomplete or no longer needed. This ensures our new HMIS is founded on the highest-quality data possible. Second, there was a blackout period during which providers could not enter information into either HMIS system. Paper records were kept during this time and retroactively entered into the new system, but this is not as consistent as using the database directly. Both of these factors affected the total amount of data available for this analysis. The HMIS migration is referenced throughout the report where the difference may have affected the analysis of our system.

Executive Summary

Austin and Travis County's Homelessness Response System (HRS) continues to grow and change as our community invests in more housing and services, while shifts in funding and data systems are affecting how people interact with the system and how that work is documented. In 2025, the HRS served 24,792 people, a 7% decrease from 2024 and the first decline in people served since 2021. At the same time, the number of people documented as newly homeless decreased for the second year in a row, to 6,895 people in 2025.

These declines follow the significant increase in people served and newly documented people between 2022 and 2023, when the combination of increased evictions following the COVID-era eviction moratorium met expansions in federally and philanthropically funded street outreach/crisis response services that brought more people into the system. The decrease in people documented as newly homeless is potentially impacted by Austin rent prices dropping in 2025 following a significant increase in housing development. Additionally, as several crisis response programs have since lost funding or stopped operating, fewer people are being documented, underscoring the need to invest in services that meet people where they are.

Housing capacity is growing, but that growth is not equal across the system

Continued investment in permanent housing is expanding the HRS's ability to help people exit homelessness. Across Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), and Other Permanent Housing, capacity grew from 3,808 beds in 2024 to 4,387 in 2025, a 15% increase in one year. PSH alone added 237 beds, reaching 2,015 total, and the number of people moving into PSH increased from 316 in 2024 to 363 in 2025.

But other parts of the system are moving in the opposite direction. Rapid Re-Housing inventory declined as American Rescue Plan Act (ARPA) funding ended, and RRH enrollments fell 25% in 2025. RRH move-ins also declined as programs adjusted to reduced inventory. Despite serving fewer people, however, more than 83% of people leaving RRH exited to permanent housing in 2025, the second consecutive year that rate improved. This shows that reductions in the number of people served by a program do not necessarily reflect poorer program performance, particularly when available funding and inventory are also shrinking.

The needs of people served by the HRS are changing

Youth continue to stand out as one of the populations requiring increased attention. Although the total number of people ages 18 to 24 served decreased to 2,127 in 2025, youth grew as a share of everyone served, reaching 8.7%. Even more significantly, newly homeless youth households increased by more than 32%, from 735 in 2024 to 974 in 2025, while youth family households increased 15%. Continued investment in housing and services designed to meet the needs of young people is necessary to keep pace with this growth.

Other groups also continue to experience significant needs. Survivors of domestic violence accounted for 33.1% of people served in 2025. More than half of people served reported a disability, totaling 13,607 people, and mental health conditions reached a six-year high at 39.4% of people served. These trends reinforce the need for a system that pairs housing with healthcare, benefits assistance, case management, and other supportive services, particularly for people with complex medical and behavioral health needs.

Executive Summary

Persistent racial disparities also remain. Black people made up 34% of people served in the HRS in 2025 while representing 8.5% of the Travis County population. Hispanic/Latino people represented 28.7% of people served, and white people represented 25.6%. While these disparities have not substantially worsened, they also have not disappeared, demonstrating the continued need to understand and address both upstream causes of homelessness and differences in housing outcomes.

Continued investment must be paired with better information about what works

The findings in this report point to two interconnected priorities. First, our community must continue investing in the housing and services necessary to meet the needs of populations experiencing growing or persistent vulnerabilities, particularly youth, survivors of domestic violence, and people with complex health needs. Second, system funders and providers need better, more consistent information about the services people receive and the interventions that contribute to successful outcomes.

As the HRS expands, consistent documentation and standardization of program design can help the community understand why outcomes change, identify gaps, and direct limited resources toward approaches that work. The growth in Permanent Supportive Housing demonstrates what sustained investment can accomplish. Maintaining that progress while strengthening outreach, shelter, transitional housing, Rapid Re-Housing, prevention, diversion, and supportive services will be critical to building a system capable of meeting the full range of needs of people experiencing homelessness in Austin and Travis County.

Key Takeaways

The number of people who became homeless for the first time declined for the second year in a row

A total of 6,895 people received services from our Homelessness Response System (HRS) for the first time in 2025. This is a 3.3% reduction from the all-time high our community saw in 2023. The drop is potentially impacted, in part, by Austin rent prices dropping in 2025 following a significant increase in housing development. Additionally, the loss of service projects and street outreach in our community resulted in fewer people documented in HMIS. This signals a need for greater investment in these types of projects to ensure our HRS is reaching everyone. A data entry blackout period during the migration to a new Homeless Management Information System (HMIS) may also have contributed to the decrease (*see Appendix C*).

Providers added nearly 600 new Permanent Housing beds, a 15% increase for our System

This includes 237 Permanent Supportive Housing (PSH) beds, a 13% increase in one year. Including Rapid Re-Housing (RRH) and Other Permanent Housing (OPH), our System saw 579 net increase in beds added to our permanent housing inventory in 2025, for a total of 4,387 beds. This is a result of rapid and consistent investment by the City of Austin,Travis County, and the Austin Housing Authority in site-based PSH units across our community, with continued growth planned through 2027. The total number of beds (including short-term beds) across our HRS has nearly doubled since 2020.

Young people made up a larger share of people served, a trend that continues to grow rapidly

The number of households led by someone aged 18-24 documented as homeless for the first time increased by over 32% from 2024 to 2025. The number of youth families (meaning families with no one over the age of 24) grew by 15%. Additionally, the total number of people aged 18-24 made up a larger share of our entire population in 2025. This increase in proportion continues a trend over the last three years (from 7.2% in 2022 to 8.7% in 2025). Youth have continued to grow in number both nationally and locally. PIT estimates presented in the AHAR show Youth growing across the country while local estimates show a growing number of children and young adults who are either homeless, at-risk of homelessness, or rent-burdened.

The need is underscored by reports that show a growing rate of young people becoming homeless after leaving foster care. Longstanding partners are dedicated to serving youth in our community, yet the need continues to grow. HUD's Foster Youth to Independence (FYI) voucher program aims to disrupt the foster care-to-homelessness pipeline. The City of Austin's Homeless Strategy Office has dedicated funding to leverage the use of FYI vouchers this year. Ahead of the 2027 Legislative session, the Texas House of Representatives was charged with studying FYI vouchers and examining how Texas might make the most effective use of this resource. Our community should pursue further opportunities to support young people entering homelessness and continue dedicating resources to match the growing pace of youth homelessness.

People Served

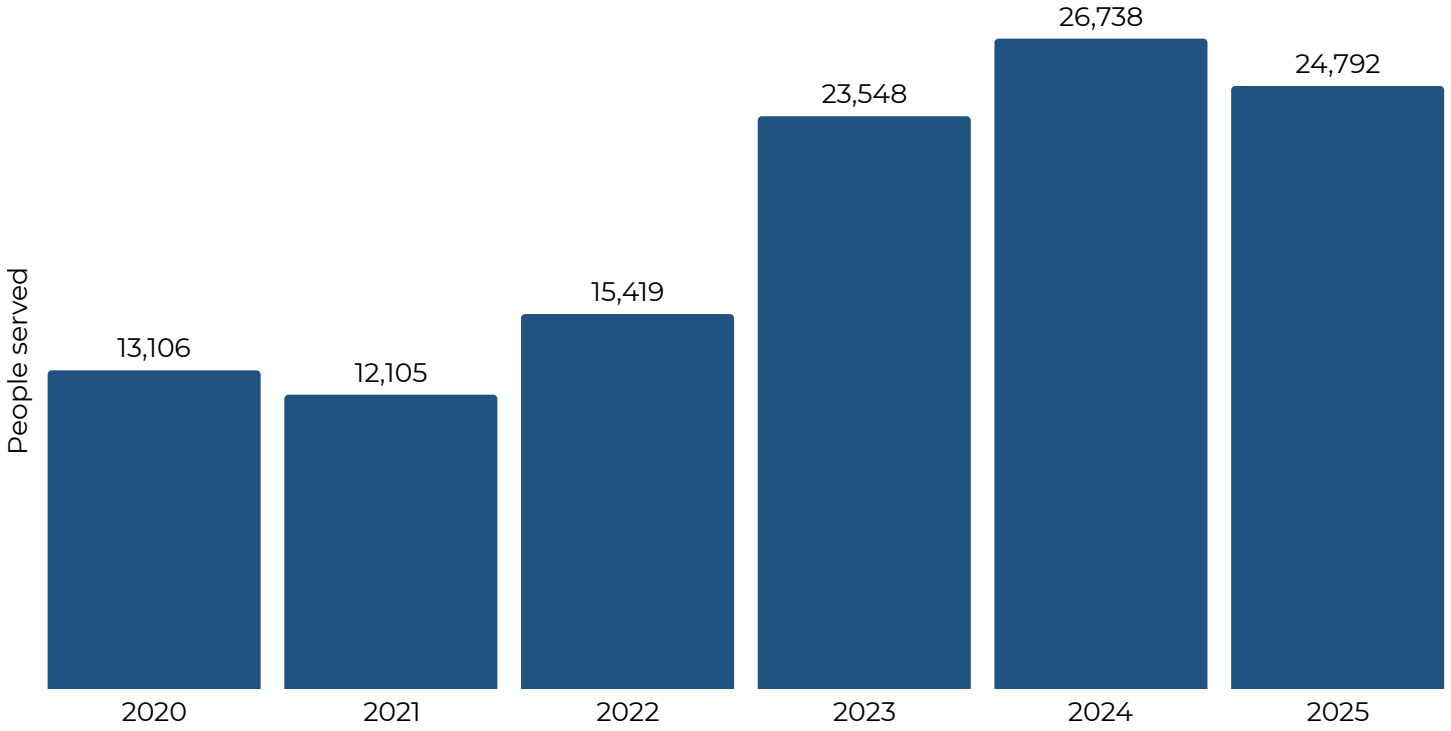
The number of people served by local providers decreased by 7%

Providers documented serving 1,946 fewer people (7.3%) in HMIS in 2025 than in 2024. The number of people served here includes people who are currently experiencing homelessness, people in shelters, people currently housed by housing programs, and other types of experiences.

This is a change from previous years. Our community saw an all-time high of people served in 2024, which continued a trend from the sharp increase in 2023. This report identifies the first decrease our community has seen since 2021. This mirrors the Annual Homelessness Assessment Report (AHAR), compiled by the U.S. Department of Housing and Urban Development (HUD), showing a decrease across the country[1].

The decrease in people documented follows the significant increase in clients served between 2022 and 2023, when the combination of increased evictions after the COVID-era eviction moratorium[2] met expansions in street outreach and other crisis response services that brought more people into HMIS. This is also potentially impacted by Austin rent prices dropping in 2025 following a significant increase in housing development[3,4]. Additionally, ECHO committed to making licenses free to use HMIS for providers which enabled more programs to join HMIS and document services. Several of these street outreach and supportive service providers have since ceased operations. Additionally, our community's migration to a new HMIS software required a blackout period, so providers could not directly document interactions in HMIS for a short time. The HMIS migration and its impact on the data in this report are described in detail in Appendix C.

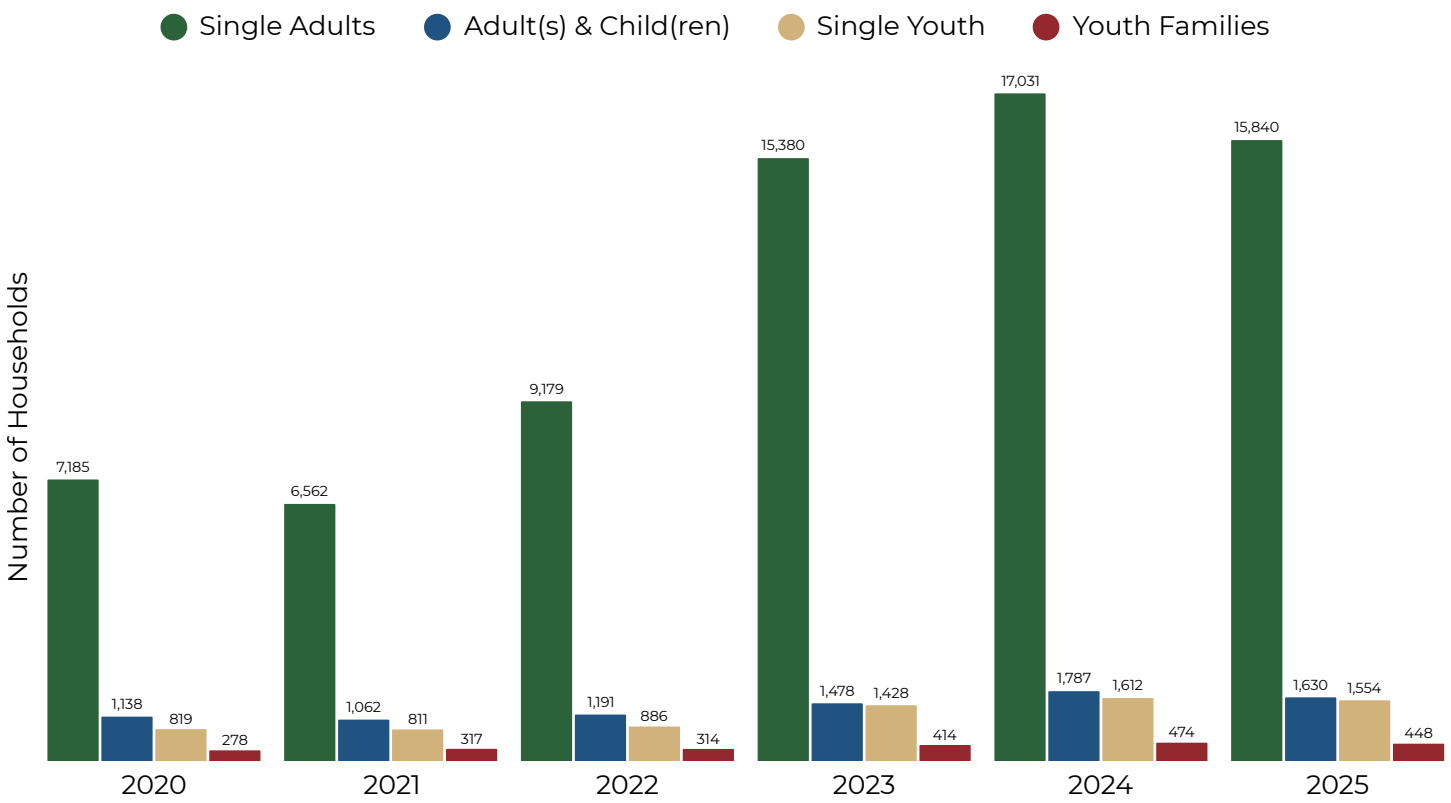
Fig. 1: Number of People Served by all HRS Programs



People Served

Households

Fig. 2 Number of Households Served by Household Type



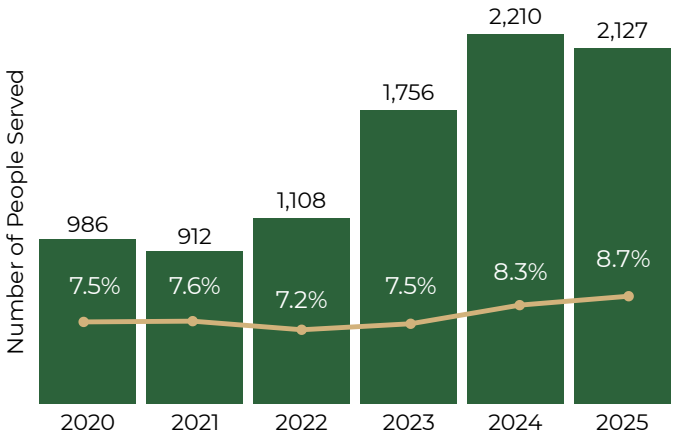
Single adults remain the largest share of people served, though single youth and youth families are taking a larger share of the system

A total of 19,472 households were served in 2025, more than double the 9,420 households served in 2020. Figure 2 shows bars that represent the total number of households for four household types: Single Adults, Adults with Children, Single youth, and Youth Families. The bars are grouped together for each year to compare the growth between households. The tallest bar in each group represents Single Adults, shown in green; this remains the largest household type served by the HRS. The shorter bars on the right represent Single Youth in gold and Youth Families in red. All household types decreased in total number in 2025 and mirrors the decrease in the total number of people documented in HMIS from Figure 1. When we separate the groups above by households that are newly homeless, the rates for Youth Families and Single Youth outpaced the growth of Single Adults. During our community's HMIS migration (*see Appendix C*), household composition was thoroughly vetted to verify all households were recorded accurately. This ensures our new system is founded on clean, reliable data. As a result, some data was transformed to more accurately reflect household composition, which may impact these trends.

Although the share of families and youth served by the HRS is smaller than the share of single adults served, they still represent thousands of people who require consideration with system planning efforts.

People Served

Fig. 3 Percent and Number of Youth Served (18-24 years of Age)



The share of young people (age 18-24) served by the HRS continued to grow for the third year in a row

The total number of youth* and young adults served by our HRS was rapidly rising since 2021 with the exception of the 2025 decrease. Providers served 83 fewer youth in 2025 compared to 2024, for a total of 2,127 youth served. Figure 3 shows a combination chart of bars representing the total number of people between 18-24 years old who were served by the HRS and includes a line chart that shows the share of all people served who were youth 18-24 years old. The line chart shows that while the number of youth served declined, the group's share of the total population increased. This figure mirrors PIT estimates which show an over 15% increase in Youth since 2022 with a decrease in total volume in 2025[5]. Local estimates show a growing number of children who are rent-burdened[6].

In 2025, 974 youth households (one or more youth with no one over the age of 24) became homeless for the first time, a 32% increase from 2024 (735 households). The number of youth families (two or more youth in a single household with no one over the age of 24) grew by 15%. There are also cases of youth under the age of 18 who either access the HRS unaccompanied or as a head of household for other children.

**Note: This number is different from Figure 2, which shows the number of households. See Appendix A, Terms and Definitions for detailed descriptions.*

32%
Increase in New Single Youth Households

15%
Increase in New Youth Family Households

Foster Care

Recent research[7] shows a growing rate of youth aging out of foster care and entering homelessness. That report found 33% of people who aged out of foster care in Texas experienced homelessness at age 21. It also found the number and share of youth who've been in foster care who complete a Coordinated Assessment (CA) for housing has been rising. HUD's Foster Youth to Independence (FYI) voucher program aims to disrupt this foster care-to-homelessness pipeline. Ahead of the 2027 Legislative session, the Texas House of Representatives was charged with studying FYI vouchers and examining how Texas might make the most effective use of this resource[8]. Additionally, the City of Austin dedicated funding in its Fiscal Year 2026-2027 budget[9] to support services for people using FYI vouchers. Our community should continue dedicating resources and pursue further opportunities to support the growing number of young people who are becoming homeless.

People Served

The number of families served by the HRS decreased, while their share of all households remains steady

Providers served 1,630 families with children in 2025, a decrease from 1,787 families served in 2024. Families represented 8.4% of all households, a slight decrease from 2024. Figure 4 shows a combination chart that displays the total number of families represented with the gold bars and their share of the total number of households by the green line. The totals represented by the gold bars show a trend of increasing number of families served since 2021, while the green proportion trend shows a overall decrease compared to 2020. (This figure is showing the number of *households*, not the total number of *people* represented in the household; *see Appendix A: Terms & Definitions*). It's important to recognize the growth in need among families despite their shrinking proportion in relation to the HRS overall. There is a significant difference between the total number of single adult households and the number of households with children, but families by definition include multiple people, and they face additional challenges - childcare, for example - while accessing HRS resources. The number of children served in 2025 are shown by their age in Figure 5; the blue bars represent the total number of children for each year of age up to 17 years of age. As the chart shows, there are more than 4,000 children who need services and a way to end their homelessness. While there is a decrease in the number of children as age increases, we know from Fig. 3 that the proportion of unaccompanied youth heads of household (age 18-24) is growing.

Fig. 4 Percent and Number of Families with Children Served

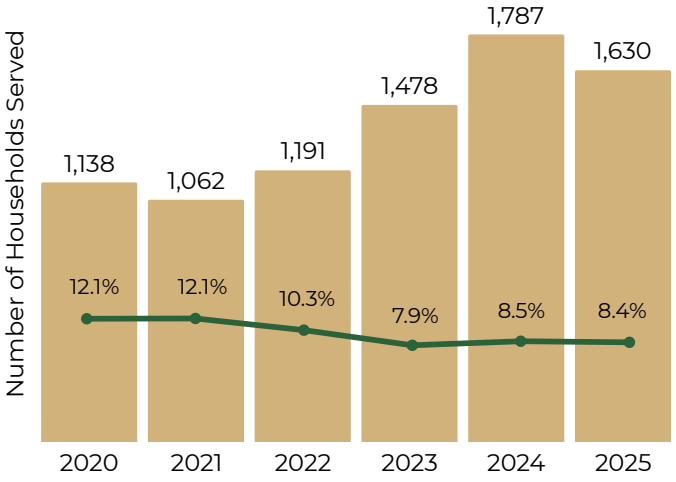
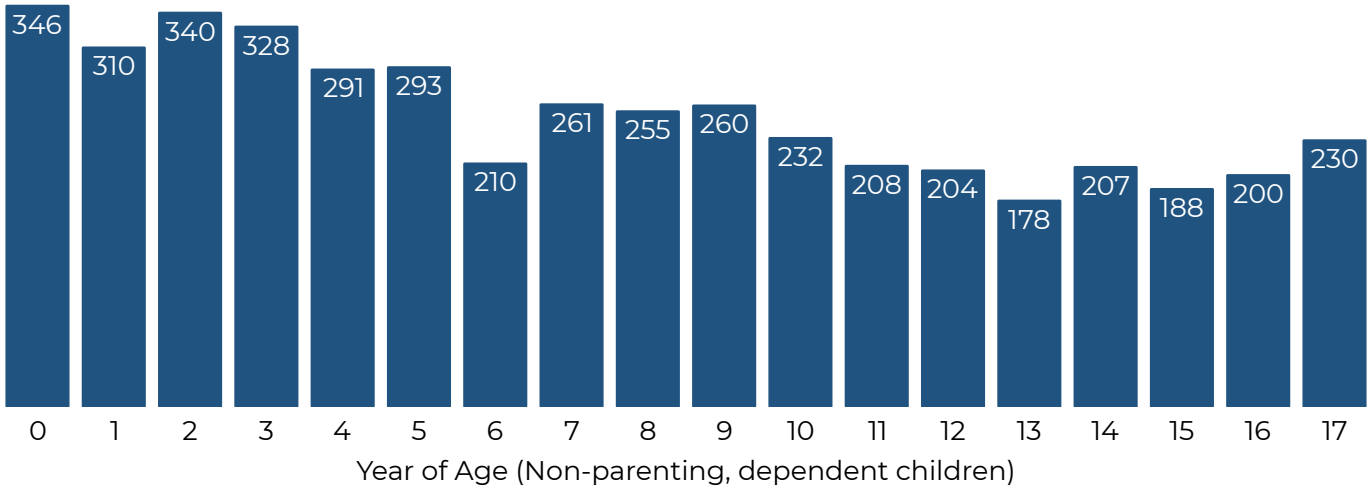
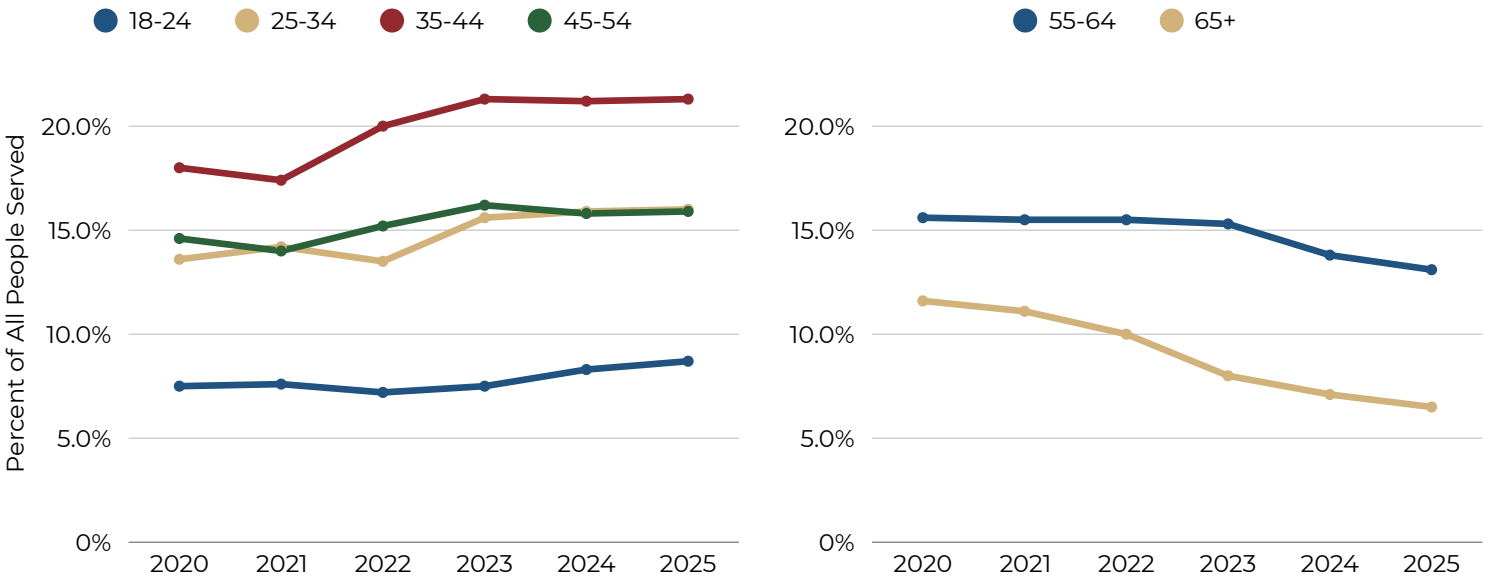


Fig. 5 Number of Children Served in 2025 by Age



People Served

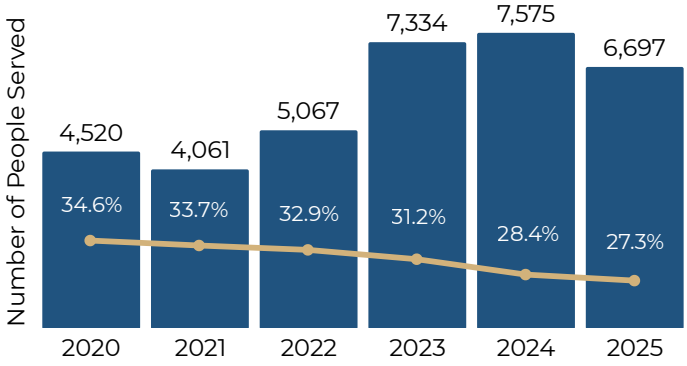
Fig. 6 Percent of All People Served by Age Group



The share of people age 55+ continues to shrink compared to other rapidly growing age groups

All age groups within our HRS grew in their share of the overall population, except for two groups: people age 55-64 and people age 65+. Figure 6 shows two line charts next to each other, one for age groups that are increasing in their share of the system and one for age groups that are decreasing in their share of the system. Each colored line represents an age group's share of all people served by the HRS compared to other age groups. Lines that are sloping upward indicate the group accounts for a bigger share of the system over time, while a line that is sloping down indicates the group is shrinking in its share of the whole system. In 2025, most age groups grew compared to six years ago, especially people between 25-44 years of age. The share of people 55 years old and older is moving in the opposite direction. This is different than trends in national growth seen in community Point in Time (PIT) Counts, where people over the age of 50 continues to rise[1]; additionally, Older Adults are expected to grow over the coming years[10]. The decrease in Older Adults is unique to Austin and should be studied to better understand the reasons for the decline. The average age of death for people who died in 2025 while in any HRS program is 50 years old and previous research[11] found a similar average age of death for people who were unsheltered. Figure 7 is a combination chart that shows the number of people over 50 years old represented as blue bars with a gold line that represents their share of all people served; both decreased in 2025.

Fig. 7 Percent and Number of People Aged 50+ Served



People Served

Gender groups remain static with federal standards impacting the ability to track gender

The breakdown of gender among people served by the HRS has been stable for several years. Men roughly represent almost 2-in-3 people experiencing homelessness, with women generally representing the majority of the remainder. People who do not singularly identify as a man or woman make up less than 1% of the total population.

Figure 8 shows a pie chart that visualizes all people served by the HRS as a circle divided into sections to represent different groups of people. The largest slice of the circle, in gold, represents men, who compose 58.3% of the whole population of people served in 2025. Women make up a smaller slice of the circle in blue with 41.1% of the population served by the HRS.

In 2025, HUD Data Standards were updated to replace the new HMIS gender data element with a new field tracking sex, aligning with federal priorities. This means people are no longer able to report non-binary gender identities. This has resulted in a static count for No Single Gender and Other, as can be seen in figure 9. Figure 9 shows a stacked bar chart where each bar represents the number of non-binary people divided into colors for each gender identity. Inclusion of a local HMIS gender element may assist with understanding disparities in outcomes for people based on gender.

Fig. 8 Gender of All People Served in 2025

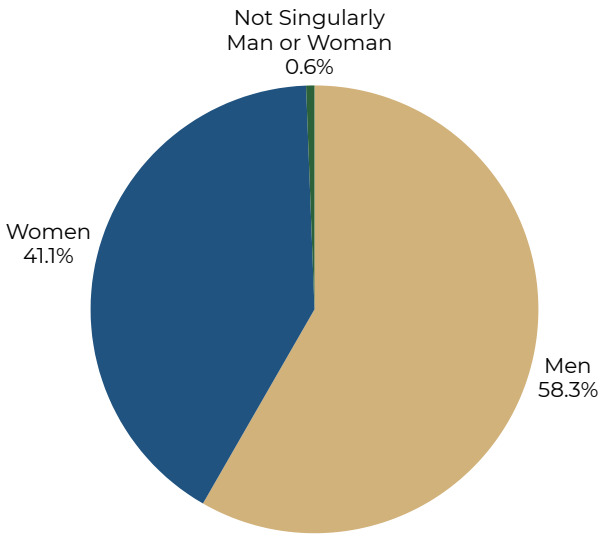
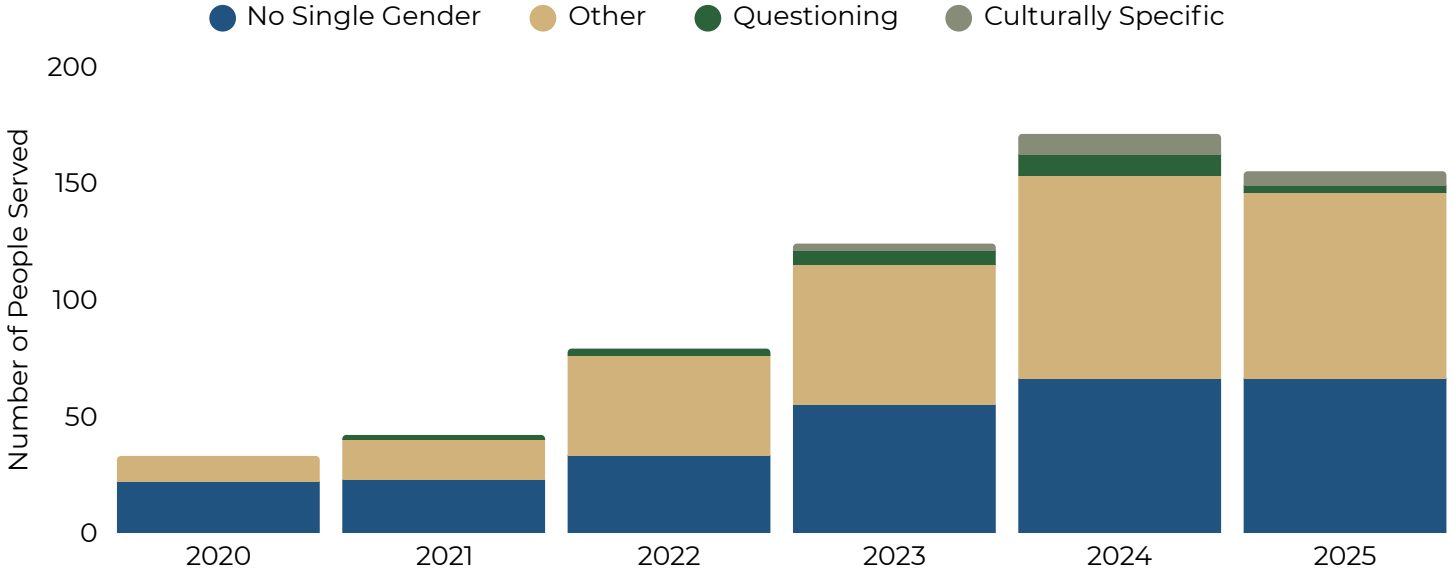


Fig. 9 Number of Nonbinary People Served



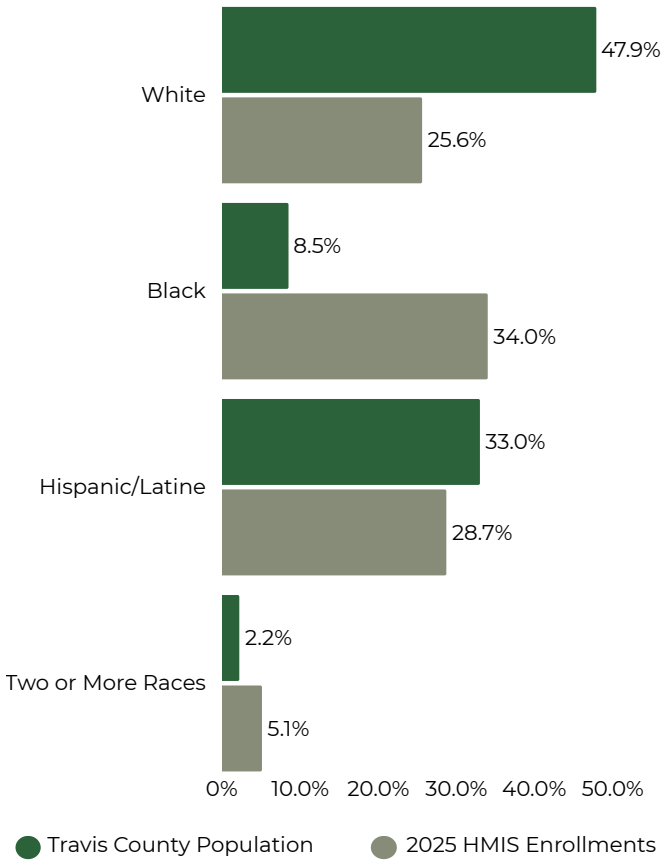
People Served

Large disparities continue to exist between the Travis County census and the population of people experiencing homelessness

The differences between the racial composition of our community and the people served by our HRS remain consistent with what we have seen in years before. The proportion of Black people served by the HRS in 2025 (34%) is four times larger than the proportion of Black people in Travis County (8.5%). Figure 10 shows a horizontal bar chart where each race has two bars: one for the share of the Travis County population as collected through the census represented by green bars, and one for the portion of the population of people served by the HRS represented by the gray bars. White people represent almost half of the Travis County population (47.9%) but only represent one-quarter (25.6%) of the population documented in HMIS. While this disparity revealed in these differences is not worse than 2024, it also has not improved. There is still work needed to understand the upstream causes of homelessness and focus efforts on ending people's homelessness quickly and catching people before they ever experience homelessness through Homelessness Prevention and Diversion programs.

This local pattern follows national trends seen across communities[12]. Approximately 13% of the national population is Black, while close to 30% of people experiencing homelessness across the country are Black[13]. Research points to redlining efforts and housing discrimination that have blocked generations of community members from building wealth that competes with rising housing costs and stagnating wages[14].

Fig. 10 Race/Ethnicity of People Served in 2025 Compared to Travis County Census



The differences between racial groups can be seen here, but further research is needed, utilizing different sources of data to understand the disparities in our community. The Travis County census does shed light on the differences, and further investigation is recommended to compare the demographic makeup for the City of Austin to the population documented in HMIS. From past Point In Time (PIT) Counts, we know that the majority of people living unsheltered in our community are in the City of Austin, and we anticipate a potential shift in this demographic disparity if we focus on more specific data sources.

People Served

Fig. 11 Percent of People Served by Race/Ethnicity

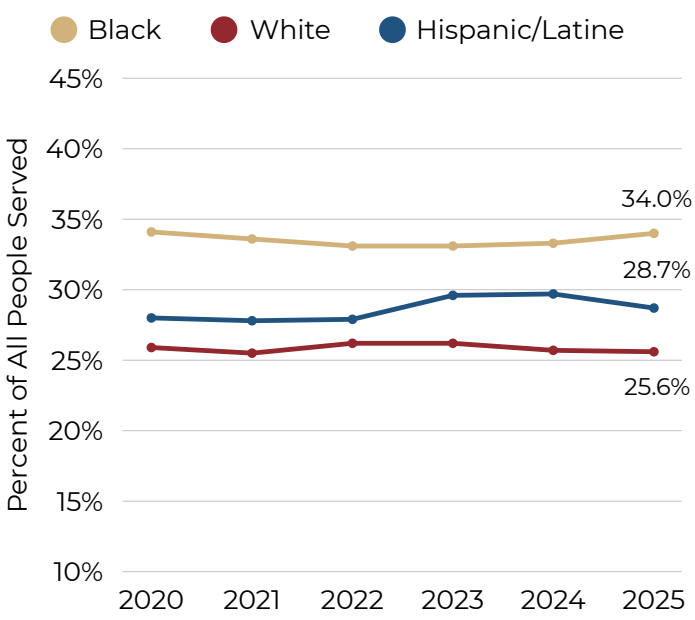
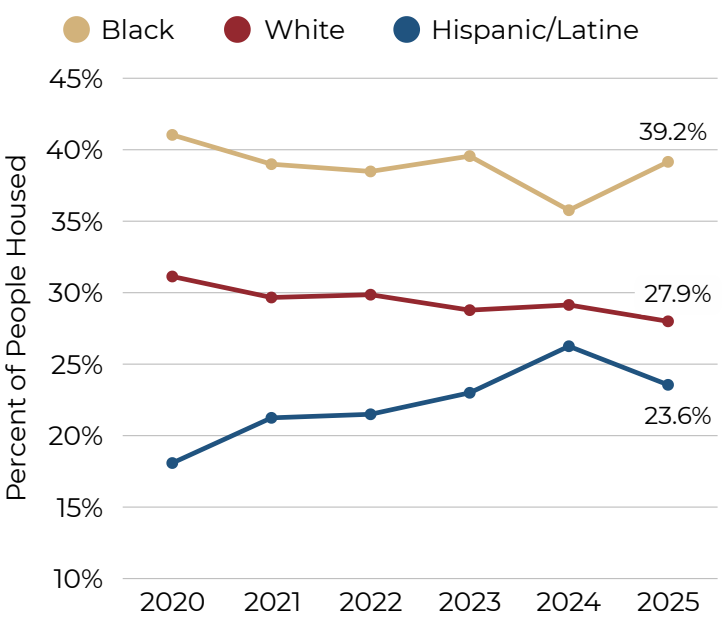


Fig. 12 Percent of People Housed by Race/Ethnicity



Race held steady in 2025, while the rate of people housed continues to be flipped for Hispanic/Latine people

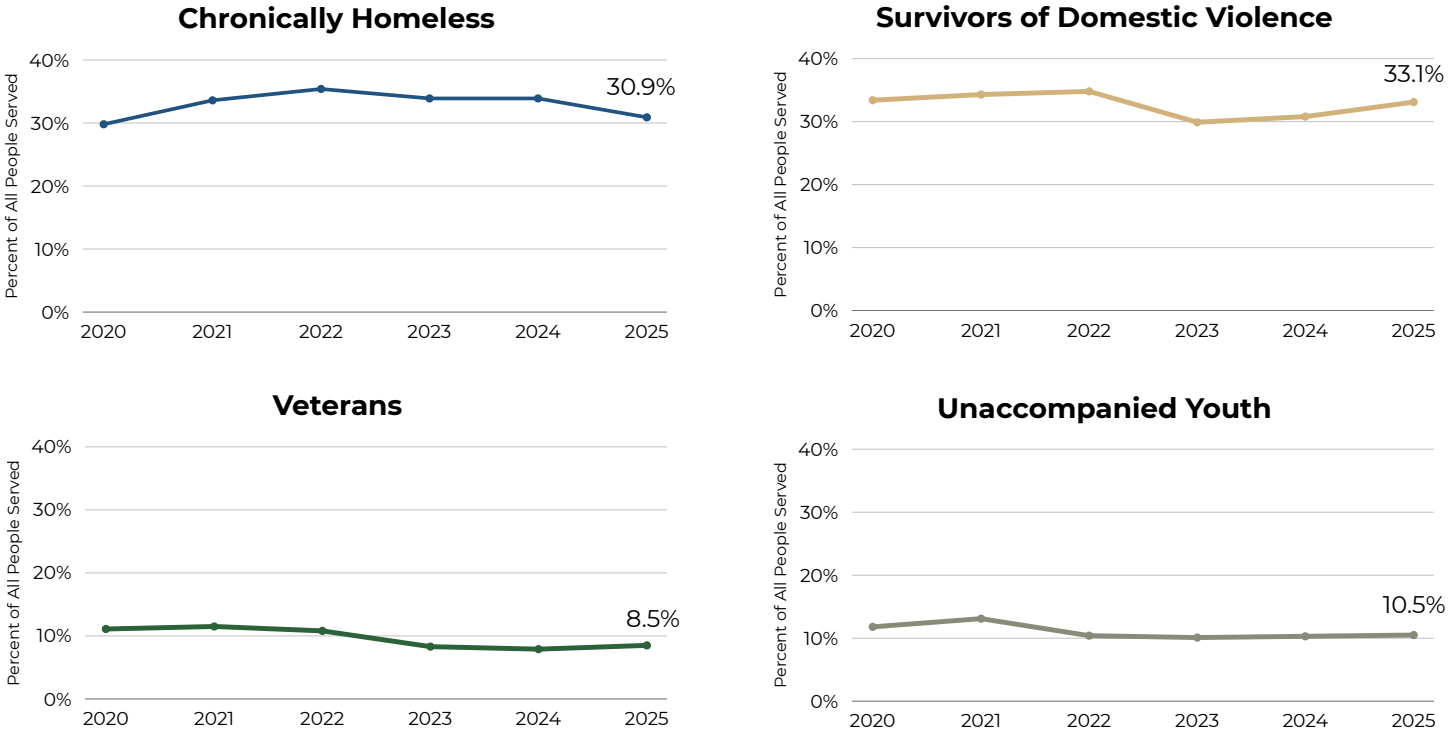
Hispanic people represent a little over a quarter of people served by our HRS in 2025, and this representation can be seen since 2020 in Figure 11. Figure 11 is a line chart that shows the share of each race within the population experiencing homelessness. The percentage of Black people served slightly increased while the percentage of Hispanic people slightly decreased in 2025. Overall, these percentages remain close to the average for the past six years.

Figure 12 shows a very similar chart that represents each race with a different colored line and their respective shares of the number of people moved into housing units through the HRS for each year. Black people represented almost 40% of people who moved into housing - 3.4% percentage points higher than 2024, but closer to the average for all six years. The percentage of Hispanic people moving into housing decreased from 26% in 2024 to 23.6% in 2025. White people slightly decreased to 27.9% of move-ins.

Comparing the rate of all people served by the system to the rate of the people moving into housing units, as is evident when placing figures 11 and 12 next to each other, there is a noticeable difference between the outcomes for White and Hispanic people in the HRS. While 28.7% of people served by the HRS in 2025 were Hispanic, a lower share (23.6%) of people who moved into housing were Hispanic. White people, meanwhile, represent 25.6% of the population served and 27.9% of the population moved into housing. There is not a clear explanation for this difference, but it can be seen year-over-year since 2020. Further investigation is recommended to understand system performance for housing providers.

People Served

Fig. 13 Percent of All People Served by Target Population Type



The rate of people experiencing chronic homelessness shrinks while other sub-populations match six-year average

Figure 13 shows four separate line charts that each represents a subpopulation defined by HUD for specific focus. Each line represents the share of each sub-population out of the total number of people served by the HRS year over year. Each group remained relatively stable, with their 2025 rates remaining near their respective six-year averages.

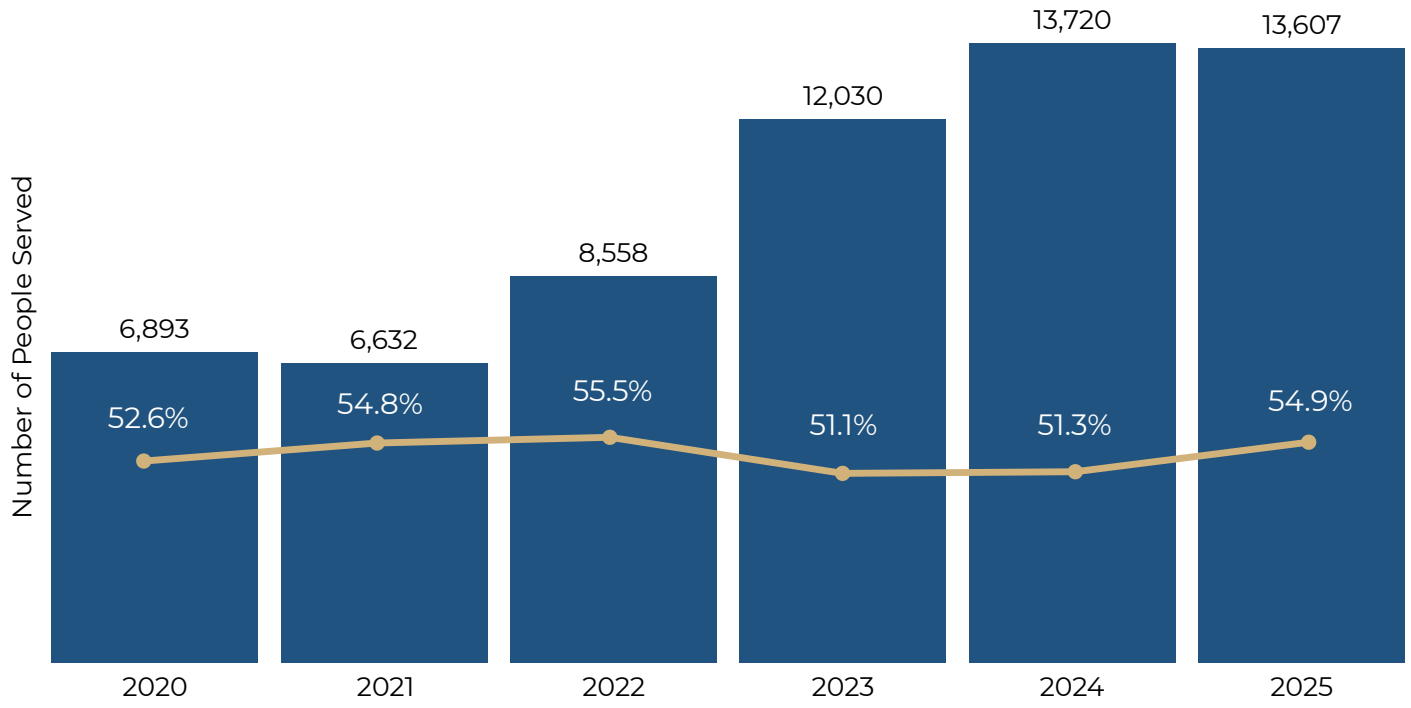
People who are chronically homeless make up about 1-in-3 people served by the HRS. The percentage of people experiencing chronic homelessness slightly decreased from 34% in 2024 to 30.9% in 2025. Over 30% is a high rate compared to the national average and peer cities. Additionally, the decrease is most likely a result of data quality reviews required for the migration to a new HMIS software (*see Appendix C*), as opposed to a true decrease in the proportion or number of chronically homeless people in our community.

Domestic violence survivors represented 33.1% of the total population served by the HRS in 2025, 2.3% higher than 2024, despite a modest reduction in prior years. The share of veterans served increased by less than 1% to 8.5%; unaccompanied youth grew slightly to 10.5% of the entire system. The changes for veterans and youth appear small, but this means these groups are shifting with the pace of the system.

HUD defines "chronic homelessness" as being unhoused for a year or longer, or being unhoused at least four separate times in three years if the total amount of time across those episodes of homelessness is a year or more.

People Served

Fig. 14 Count and Percent of People Served with Disabilities



Over half of all people served had a disability while their share of the population is growing

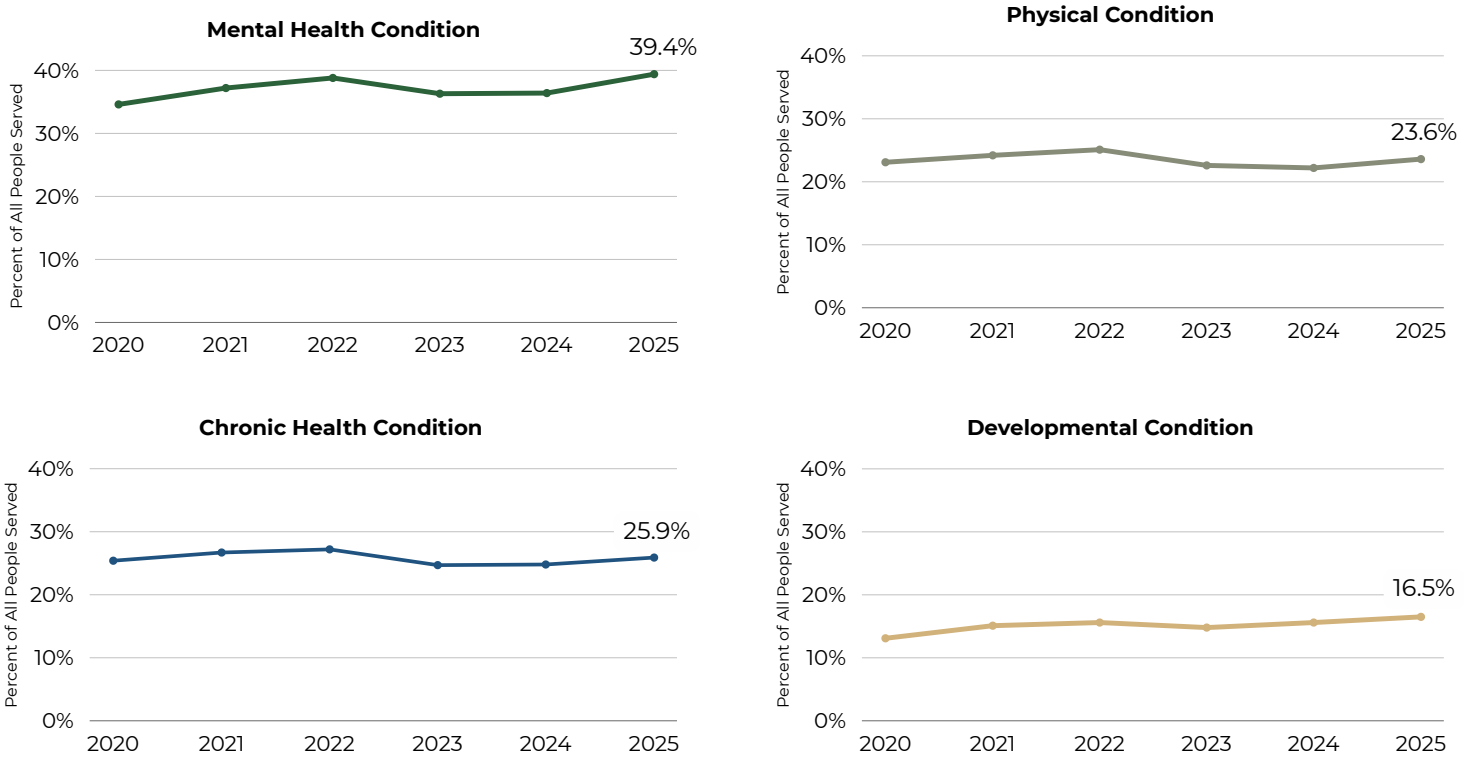
The total number of people who reported any disability in HMIS decreased slightly from 2024, to a total of 13,607 people in 2025. Figure 14 shows a combination chart with bars and a line chart that depict the total number of people with disabilities in the dark blue bars along with the rate of people with disabilities from the whole population of people served in the gold line. The rate of people reporting disabilities increased from 2024 to 2025, to 54.9%. Despite the small decrease in the total number of people with disabilities, the rate of people served with disabilities remains close to our all-time high. The numbers here are slightly higher than the 2025 State of the System report due to the migration to the new HMIS software (*see Appendix C*); however, the overall trends of increasing need remains the same.

This figure is likely an undercount, as many people fear the loss of housing opportunities based on their disability status or simply don't know the technical details of their disability. There is a gap in the connection for people to get appropriately diagnosed for the purpose of receiving necessary services and support. Programs like the PSH Healthcare Collaborative which partners with Central Health to connect PSH residents with healthcare services have proven effective with keeping people stably housed and reducing burden on emergency services like EMS and hospitals.

The number of people reporting disabilities has nearly doubled since 2020 - one of the primary reasons housing must be paired with appropriate care services. Opportunities to appropriately identify people in need of greater care and connect them to needed services should be considered alongside additional resource connections.

People Served

Fig. 15 Percent of All People Served by Disability Type



People reported mental health conditions at a six-year record high, with most disabling conditions increasing in rate in 2025

The proportion of people reporting mental health conditions increased substantially from previous years, as did the proportion of people reporting disabilities. Figure 15 shows disabling conditions across four separate line charts with one for each category of condition. Each line shows the share of the entire population served that reported each of these disabling conditions with a dot for each year's rate. The line chart for mental health conditions is higher than the other three charts, which indicates that it is the most common condition type. Most of the other charts show slight increases in rates in 2025, but physical and chronic health conditions sit close to their six-year average. Developmental conditions, meanwhile, have slowly been on the rise since 2020. These categories are not mutually exclusive, and people have the ability to report more than one disabling condition. This means that each line chart can include people from other line charts; comparing this to the overall disability rate of almost 60% indicates many people with a disabling condition manage multiple conditions at once. This pattern is not unique, and we know having a disabling condition increases both the length and difficulty of someone's homelessness[5]. The limited housing options that include support for disabling conditions make it additionally harder. There is a continued need for increased dedicated support services for mental health conditions and healthcare services connected to case management and housing programs.

System Flow

Fig. 16 Bed Capacity, in Number of "Units", by Program Type

Project Type	2020	2021	2022	2023	2024	2025	Over Time
Permanent Supportive Housing	1161	1162	1507	1718	1778	2015	
Rapid Re-Housing	905	1409	1570	1168	1820	1667	
Emergency Shelter	757	708	926	1020	1657	1442	
Other Permanent Housing	190	286	430	359	210	705	
Transitional Housing	211	207	199	346	480	437	
Total	**3224**	**3772**	**4632**	**4611**	**5945**	**6266**	

The HRS saw a 15% increase in Permanent Housing beds, while other projects require greater investment

Figure 16 shows a table with inventory totals reported by providers for HUD's annual Housing Inventory Count (HIC)*. There is one row per project type for projects that maintained shelter or housing beds within our system, and then each year's inventory that project reported for the HIC; the chart also includes a line chart to visualize the rise and fall of inventory over the past six years, with a transparent dot for each year. The number of PSH beds increased from 1,778 in 2024 to 2,015 in 2025, an increase of 13%. This is a result of rapid and consistent investments in site-based PSH units in Austin/Travis County, with continued growth planned through 2027. The total number of RRH units decreased due to the exhaustion of funding from the 2021 American Rescue Plan Act (ARPA). Much of this funding was allocated to RRH units, resulting in a funding decrease as ARPA sunsets. The number of RRH beds fell by 153 between 2024 and 2025, signaling a system gap for limited-time funding to help people end their homelessness. Other Permanent Housing (OPH) programs include any properties that house people through the HRS but provide a different service and case management model from PSH and RRH. There was strong growth in OPH beds in 2025, from 210 units in 2024 to 705 units in 2025, the result of a new housing partner joining the system. Including all Permanent Housing beds - PSH, RRH, and OPH - the total number of beds grew from 3,808 in 2024 to 4,387 in 2025, a 15% increase over one year. Emergency shelter beds dipped with 10 out of 21 emergency shelter programs reporting slightly less inventory for the 2025 Housing Inventory Count. So while the total number of all beds in our system has nearly doubled since 2020, short-term interventions like Emergency Shelter and Transitional Housing require further investment to keep up with the inflow and demand of the system.

**Note: The 2025 State of the System Report utilized HMIS inventory records. Using the HIC is a change in method that resulted in differing outputs per project type. Data in this report is limited to what providers reported in January 2025 for the HIC.*

System Flow

Fig. 17 Number of Permanent Supportive Housing (PSH) Enrollments

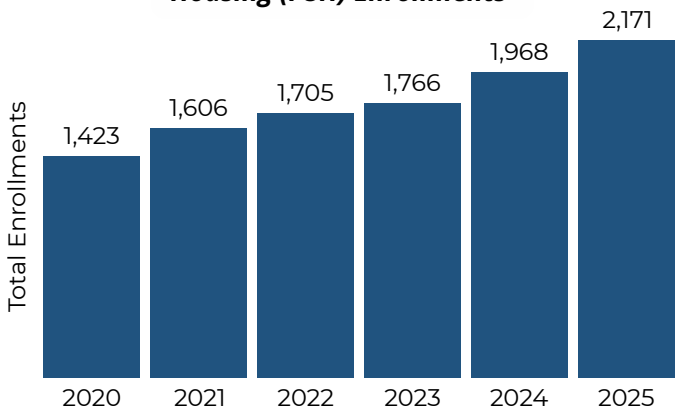


Fig. 18 Number of Rapid Re-Housing (RRH) Enrollments

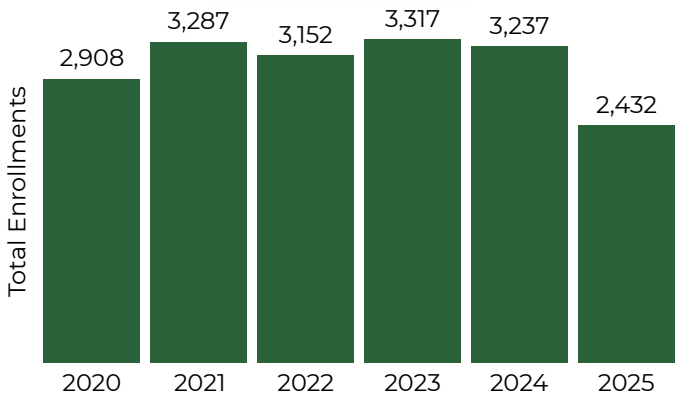
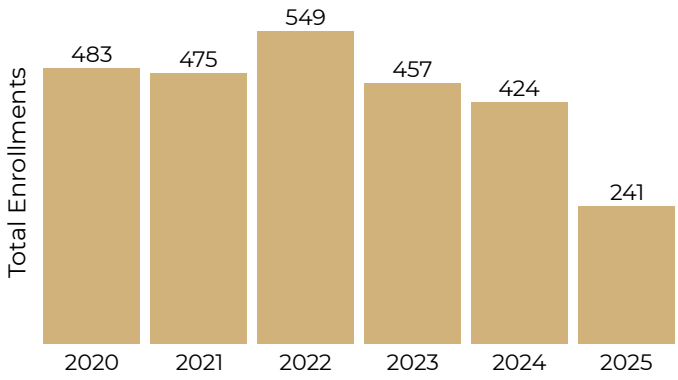


Fig. 19 Number of Transitional Housing (TH) Enrollments



The number of people enrolling in PSH rises steadily; RRH enrollments declined in response to system funding changes

Figures 17, 18, and 19 show three separate bar charts that represent the number of enrollments for each program type documented in HMIS since 2020 (*see Appendix A: Terms & Definitions*). The bars for PSH enrollments show continued increases since 2020, a result of the continued targeted investment in PSH units by the community. The number of enrollments in 2025 was greater than the number of units in the system, meaning more than one person was able to utilize a PSH unit during the year.

RRH enrollments declined significantly in 2025 to 2,432, a decrease of 25% from 2024. The loss of ARPA funds described on the previous page can be seen in the reduction in units and the coinciding reduction in enrollments. Although RRH enrollments still surpassed the total inventory in 2025, we anticipate further loss of RRH units and enrollments in the community as HUD's revised funding priorities are anticipated to reduce the allocation for Permanent Housing (PH), including RRH, within the Continuum of Care (CoC) grant competition[12].

To replace PH funding, HUD is increasing its emphasis on funding for Transitional Housing (TH) projects. TH units remained relatively stable in 2025, however, there was a noticeable decline in the number of TH enrollments between 2024 and 2025; about half as many people enrolled in TH in 2025 compared to 2024.

System Flow

The number of people who received services from our HRS for the first time decreased for the second year in a row

Figure 20 shows a bar chart where each dark green bar represents the number of people who are documented for the first time in HMIS. The total number of newly homeless people has decreased for the past two years, following a large increase between 2022 and 2023, for a total of 6,895 people in 2025.

ECHO made HMIS licenses free for providers in 2023, opening the door for smaller organizations with limited budgets to begin using the database. This led to an increase and diversification of programs that track services for people experiencing homelessness. Expansions in service and street outreach projects spurred the growth in newly homeless people recorded in HMIS, and as these programs have either lost funding or faced additional challenges, they are able to document fewer interactions in HMIS. This may contribute to the decrease in people documented as experiencing homelessness for the first time. The loss of these projects signals continued need for investment in efforts to meet people where they are.

Fig. 20 Number of All People Served who are Newly Homeless

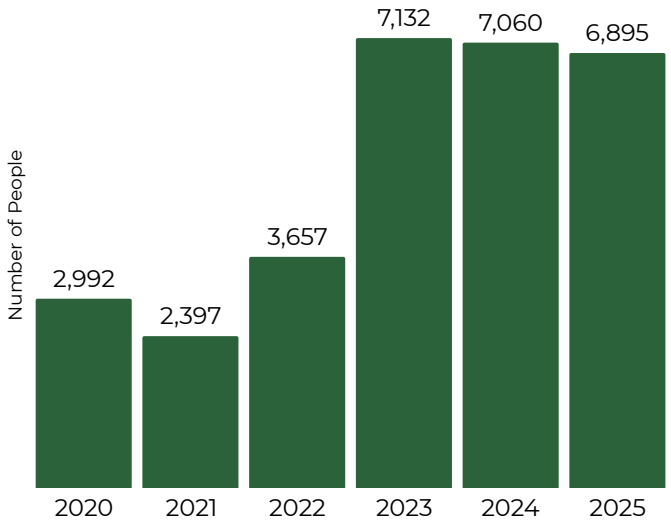
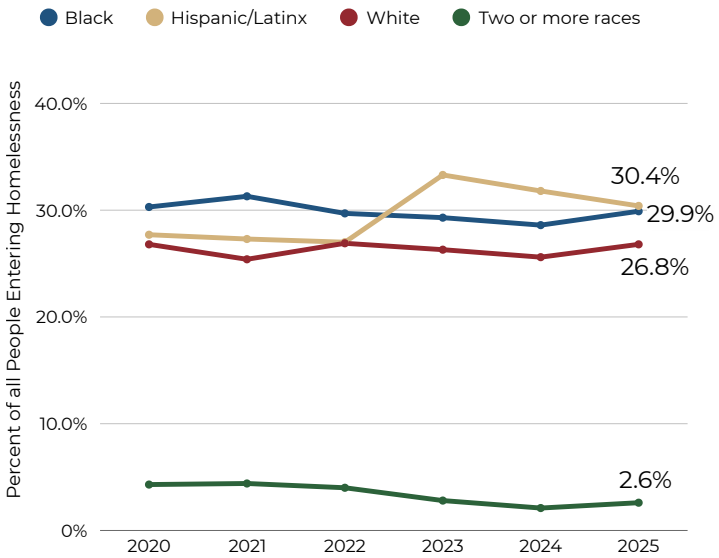


Fig. 21 Race/Ethnicity of Newly Homeless People



The racial demographics of the newly homeless population have remained relatively stable despite the rise and fall of the total population. Figure 21 shows a line chart where each line represents the percentage of newly homeless people for each racial group. Hispanic people (in gold) and Black people (in blue) both sit close to a third of the newly homeless population, with White people represented (in red) slightly increasing to 26.8% of the newly homeless population. People with two or more more races accounted for a little over 2% of the newly homeless population, less than half this group's proportion in 2020. HUD's HMIS Data Standards combined the Race and Ethnicity questions, which allowed for Hispanic people not to identify as White. The proportion of Hispanic/Latino people served by our HRS accounts for a smaller share of the newly homeless group for the second year in a row.

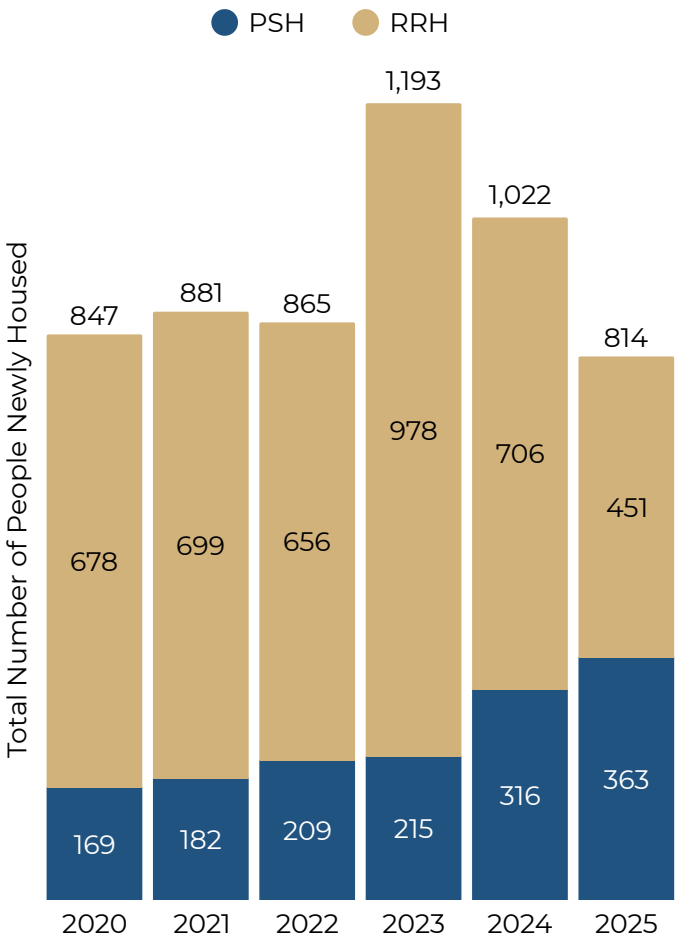
System Performance

The number of people who moved into PSH units grew, while RRH move-ins shrank to match the loss of ARPA funding

New PSH properties have brought new units to our system, contributing to the growth in the total number of people who moved into PSH. In 2025, 363 people moved into PSH units, compared to 316 in 2024. Figure 22 is a stacked bar chart showing the number of people who moved in to PSH units, represented as the blue bars on the bottom of each stack, and RRH move-ins in the gold bars on top. The blue bars continue to grow each year, matching the steady increases in investment. More than twice as many people moved into PSH in 2025 compared to 2020.

Figure 22 shows a significant decrease in the number of people who moved into RRH units. The number of people who moved into RRH dropped by 255 people (36%), from 706 people in 2024 to 451 people in 2025. This follows a 28% decline between 2023 and 2024. We anticipate further reduction in RRH move-ins and enrollments through 2026 due to the potential loss of funding for Permanent Housing programs like PSH and RRH through the CoC grant competition process. It's important to note, however, that this drop in move-ins does not mean that RRH programs are serving people inadequately. Instead, it shows the programs are simply running out of available spots. Because these programs are losing guarantees of funding that will support someone for the full 24 months RRH allows, agencies cannot commit to housing more people. The result is providers must stop moving new people into RRH units to ensure they can keep their promises to the individuals and families they're currently serving.

Fig. 22 Number of People Newly Housed by Project Type



Program exit volume remains unchanged, indicating the system is functioning properly for people currently in housing programs: the front door is closing because the budget is shrinking.

Minimal Housing Assistance is not included in this year's report due to the HUD HMIS Data Standards. Only Permanent Housing programs like RRH and PSH are required and allowed to track housing move-in dates. Details on outcomes for programs like Homelessness Prevention (HP) and Diversion are covered later in this report.

System Performance

Fig. 23 Total Number of People Leaving PSH to Housing of Their Own

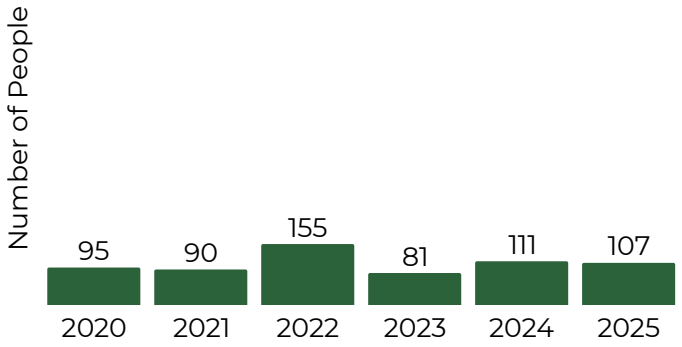
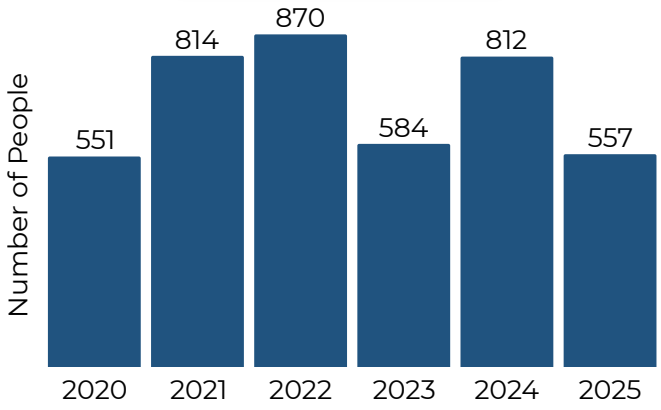


Fig. 24 Total Number of People Leaving RRH to Housing of Their Own

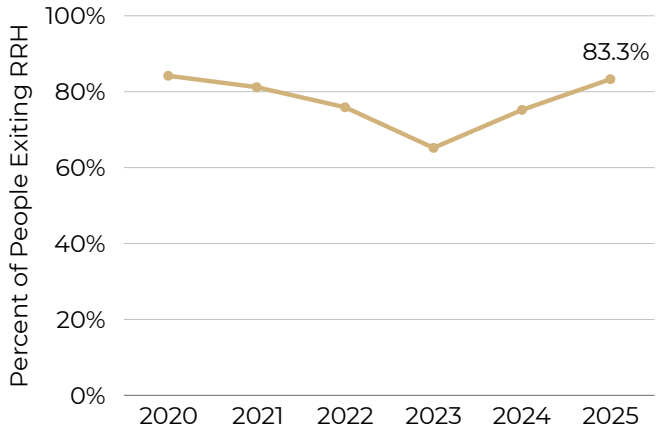


Share of exits to housing from RRH grows, PSH rates remains stable

Figure 23 and Figure 24 show vertical bar charts, one that represents the total number of people who left PSH to housing of their own in green, and the other representing the number of people who exited RRH in blue bars. Both charts have a mix of increases and decreases from year to year, and no trend emerges as there is no single direction of a rise or fall of exits from either program type. Exits from PSH dipped slightly by four people from 2024 to 2025 but this total sits at the six-year average of PSH exits. On average, 107 people move out of PSH to housing of their own each year. RRH exits tell a different story. In 2025, 557 people left a RRH program to housing of their own, a drop of 255 people (31%) from 2024. The six-year average for RRH exits is 698, so the 2025 total sits below the average. However, this decrease is a direct reflection of the loss of RRH units described elsewhere in this report - fewer units means fewer people moving in, which means fewer people moving out. The number of exits will continue to decrease with further loss of units over time.

Figure 25 shows the rate of exits for RRH as a line chart where the gold line shows the change in exit rates over the past six years. Exits to permanent housing increased for the second year in a row: More than 83% of people who left an RRH program in 2025 left to housing of their own, an 8% bump in percentage points compared to 2024 and an 18% increase in percentage points from 2023. The rate of exits to permanent housing has risen back to the same rate we saw in 2020 after a large dip through 2023. Investigation into the reasons for this bounce-back are recommended to better understand program performance.

Fig. 25 Percent of People Leaving RRH to Housing of Their Own



System Performance

Fig. 26 Total Number of People Permanently Housed after Homelessness Prevention

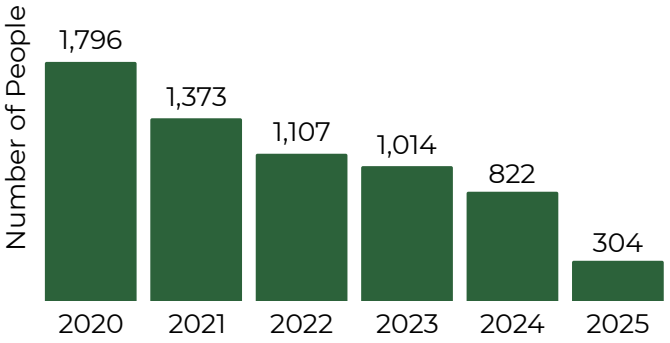
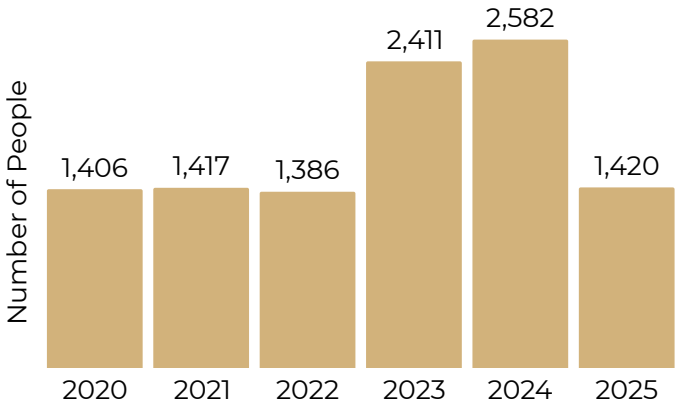


Fig. 27 Total Number of People Permanently Housed after Diversion



Fewer people were Permanently Housed after leaving Homelessness Prevention & Diversion programs

Figure 26 shows a vertical bar chart that represents the total number of people leaving Homelessness Prevention (HP) projects to housing of their own in dark green with Figure 27 representing people leaving Diversion programs to permanent housing in gold bars. Figure 27 has a a mix of increases and decreases from year to year, but fell significantly from 2024 to 2025. This is largely a result of a different methodology being used. Past reports measured the total number of move-ins to permanent housing from every project type outside of PSH and RRH.

Migrating to a new HMIS software (*see Appendix C*) aligned our CoC with HUD Data Standards that prevent providers from adding a move-in date for HP and Diversion projects. Figure 28 shows the percentage of all people served by HP programs that left the program to permanent housing in a blue line, with Figure 29 showing the rate of people permanently housed after Diversion. HP programs maintained a consistent rate for several years, with the largest decrease occurring from 2024 to 2025. Diversion programs had an increase in the rate of people permanently housed. Standardization of service delivery and further research is recommended to understand the reasons for these trends.

Fig. 28 Percent of People Permanently Housed after Homelessness Prevention

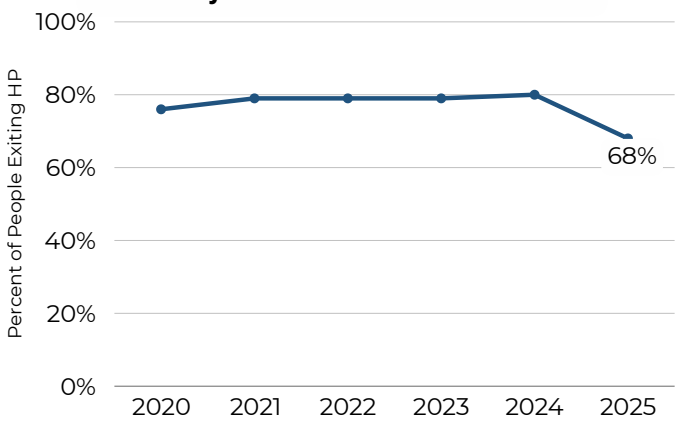
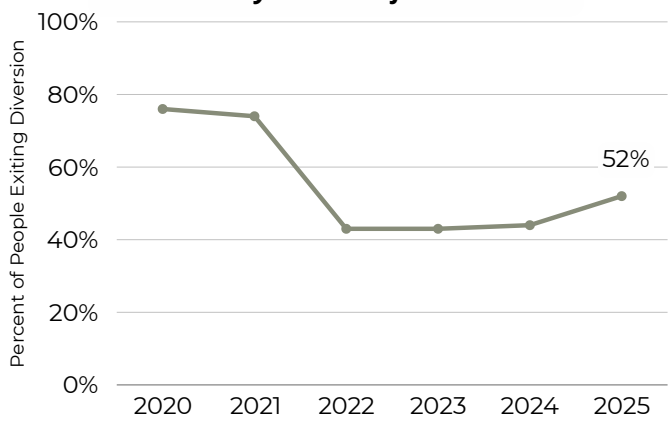


Fig. 29 Percent of People Permanently Housed after Diversion



Recommendations

Invest in service gaps and housing pathways for vulnerable groups like youth, survivors, medically complex

Youth household inflow served by our HRS increased by more than 33% from 2024 to 2025, and the number of new youth families grew by 15%. This trend has been continuing since 2021, underscored by recent reports showing the link between foster care and homelessness. HUD's Foster Youth to Independence (FYI) voucher program is a promising opportunity to collaborate with federal, state, and local partners to address the growing population of young people entering homelessness. Any further opportunities to support youth entering homelessness should be pursued.

Domestic violence survivors represented 33.1% of the total population, 2.3% higher than 2024. Investments in permanent housing options are helping meet the need, but with 1-in-3 clients being a survivor, there is a continued need for growth.

The number of people reporting disabilities has more than doubled since 2020 - one of the primary reasons housing must be paired with appropriate care services. People 55 years old and older made up a smaller share of the system than they did six years ago. The average age of death for people who died in 2025 while in any HRS program is 50 years old. Additional healthcare service referrals, insurance and benefits assistance, and supportive housing is needed to meet the needs of people experiencing homelessness.

Continued research and investments are necessary to match the growing pace of youth, survivors, and people with complex medical needs within our system.

Require service documentation and standardize program design to support performance improvement

HUD has not defined service documentation requirements for non-HUD funded programs in HMIS. The diversity of funding sources for programs in Austin creates variety in program design and contract requirements. We recommend system funders collaborate to align on program standards to require service documentation, regulate service costs, and implement performance accountability measures across all funding streams.

PSH and OPH beds increased by 37% over one year, and other projects like Emergency Shelter and Transitional Housing will see growth in beds and units in the coming years. The expansion of our system sometimes accompanies fluctuating rates of program outcomes that we still don't understand. At a minimum, documentation of services would give us greater insight into people's journeys and the elements of a program that are common among people who've had success.

Exits to permanent housing from RRH programs increased for the second year in a row, representing an 8% increase from 2024 and an 18% increase from 2023. Meanwhile, exits to Permanent Housing from Homelessness Prevention projects decreased significantly in 2025 and, inversely, exits to Permanent Housing from Diversion projects increased after a significant decrease from 2022-2024. The rapid growth and loss of funding for these project types makes it difficult to predict how our system will flow, and without standardized documentation of services across everyone served, we are unable to identify what truly influences these changing success rates.

References

1. US Department of Housing and Urban Development, Office of Community Planning and Development. The 2025 Annual Homelessness Assessment Report (AHAR) to Congress, Part 1: Point-in-Time Estimates of Homelessness. Published May 2026. Accessed October 21, 2026. https://www.huduser.gov/portal/sites/default/files/pdf/2025-AHAR-Part-1.pdf
2. Moreno-Lozano L. Eviction filings in the Austin area are the highest they've been in five years. KUT News. Published August 20, 2025. Accessed October 21, 2026. https://www.kut.org/housing/2025-08-20/austin-tx-evictions-travis-county-housing-rent
3. Clifford L, Rodnyansky S, Su D. Austin's surge of new housing construction drove down rents. The Pew Charitable Trusts. Published March 18, 2026. Accessed October 21, 2026. https://www.pew.org/en/research-and-analysis/articles/2026/03/18/austins-surge-of-new-housing-construction-drove-down-rents
4. Moreno-Lozano L. Austin rents dropped over 7% since last year, but families on tighter budgets are still struggling. KUT News. Published March 23, 2026. Accessed October 21, 2026. https://www.kut.org/housing/2026-03-23/austin0tx-rent-costs-prices-affordability-relief
5. Soucy D, Hall A. 7 takeaways from 2024 Point-in-Time Count data on homelessness. National Alliance to End Homelessness. Published January 7, 2025. Accessed October 21, 2026. https://endhomelessness.org/resources/sharable-graphics/7-takeaways-from-2024-point-in-time-count-data-on-homelessness/
6. Community Advancement Network. Homelessness. CAN Community Dashboard. Accessed October 21, 2026. https://dashboard.canatx.org/our-basic-needs-are-met/homelessness/
7. Ball B, Kim N, Fuetter S, et al. A Community-Participatory Study of Homelessness Among Youth with Experience in Foster Care. Texas Institute for Child & Family Wellbeing, The University of Texas at Austin; 2025. Accessed October 21, 2026. https://txicfw.socialwork.utexas.edu/wp-content/uploads/2025/01/A-Community-Participatory-Study-of-Homelessness-Among-Youth-with-Experience-in-Foster-Care-Full-Report-January-2025-1.pdf
8. Texas House of Representatives. Interim Committee Charges, 89th Legislature. Office of the Speaker; March 2026. Accessed October 21, 2026. https://www.house.texas.gov/pdfs/speaker/F-Interim-Charges-3.25.pdf
9. Rendon A. As Austin sees funding for post-foster care housing, other regions face hurdles. Spectrum News 1. Published September 1, 2026. Accessed October 21, 2026. https://spectrumlocalnews.com/tx/south-texas-el-paso/news/2026/09/01/austin-sees-funding-for-post-foster-care-housing
10. Henderson KA, Manian N, Rog DJ, et al. Size, characteristics, and needs of the population of older adults experiencing homelessness. In: Addressing Homelessness Among Older Adults: Final Report. Office of the Assistant Secretary for Planning and Evaluation; 2023:section 2. Accessed October 21, 2026. https://www.ncbi.nlm.nih.gov/books/NBK606571/
11. Fraher D, Attri S. Unhoused Mortality Report. Ending Community Homelessness Coalition; January 2025. Accessed October 21, 2026. https://www.austinecho.org/wp-content/uploads/2021/12/Bridging-for-Better-Outcomes_Unhoused-Mortality-Report_Final-1.pdf
12. National Alliance to End Homelessness. Long-awaited federal data shows the first overall reduction in homelessness since 2016. Published May 29, 2026. Accessed October 21, 2026. https://endhomelessness.org/media/news-releases/long-awaited-federal-data-shows-the-first-overall-reduction-in-homelessness-since-2016/
13. The racial gap in the homeless population in the United States. The Journal of Blacks in Higher Education. Published January 6, 2025. Accessed October 21, 2026. https://jbhe.com/2025/01/the-racial-gap-in-the-homeless-population-in-the-united-states/
14. National Alliance to End Homelessness. Homelessness and Black history: access to housing. Published February 17, 2021. Accessed October 21, 2026. https://endhomelessness.org/blog/homelessness-and-black-history-access-to-housing/
15. US Government Accountability Office. More older adults are homeless—what can be done to help this vulnerable population with unique needs. WatchBlog. Published January 16, 2025. Accessed October 21, 2026. https://www.gao.gov/blog/more-older-adults-are-homeless-what-can-be-done-help-vulnerable-population-unique-needs

Appendices

Appendix A: Terms & Definitions

Continuum of Care (CoC)
CoC refers to the collection of agencies within Austin/Travis County that provide services to people experiencing homelessness and are funded by the U.S. Department of Housing and Urban Development's CoC program. ECHO is the Lead Agency of the Austin/Travis County CoC.

Homelessness Response System (HRS)
Sometimes used interchangeably with the Continuum of Care (CoC), the HRS is a broader term that covers the different agencies, non-profit organizations, grassroots providers, and anyone directly providing services to people experiencing homelessness, regardless of funding source. Not all organizations in the HRS contribute to HMIS, but most of the providers included in this report do.

Coordinated Entry (CE)
CE is a no-wrong-door approach to homelessness services. It exists to ensure people are connected to the broader HRS regardless of which organization they contact first. CE does several things: 1) assesses individual needs of people experiencing homelessness; 2) prioritizes people for the limited amount of housing available within our HRS; 3) refers people to providers that match their needs; and 4) guides people through the process of accessing housing.

Coordinated Assessment (CA)
The first step in Coordinated Entry is the Coordinated Assessment (CA). Using our locally designed assessment tool, community trained assessors are often the first access point for people seeking housing in our system. The CA is a set of questions that assess a person's barriers to housing and how likely someone is to self-resolve their homelessness without aid from the HRS.

Homeless Management Information System (HMIS)
HMIS is a person-level service database funded by the U.S. Department of Housing & Urban Development (HUD) and managed by ECHO to aid in the administration and documentation of services for people experiencing homelessness.

Enrollment
A Program Enrollment, or Enrollment for short, refers to the full span of time a person works with a provider to receive any services and is documented in HMIS. Enrollments document the journey from the day someone is engaged by a provider until that person completes or leaves the program. In this report, we count people separately from Enrollments because a single person can have multiple enrollments and work with multiple providers.

Entry & Exit
For every enrollment, the date the person began working with a program must be recorded as the 'Entry Date' or Entry for short. Similarly, the date they complete or leave the program must be documented as an 'Exit Date' or exit. We generally group enrollments by entries, the number of people engaged, and exits, the number of people leaving programs.

Household Types
All clients documented in HMIS must have their household that is actively being served with them defined by labeling who is the 'Head-of-household' - as in who might be the primary contact or eventual leaseholder - and any other household members like Child, Spouse, Other Family Member, etc. As clients are labeled in their household, we can group them by household type likes Families with Adults & Children or single adults.

Appendix A: Terms & Definitions

Intervention Types

Permanent Supportive Housing (PSH) provides rental assistance and individualized supportive services for as long as someone needs them. Some PSH projects require chronic homelessness to qualify, while others that are funded through other sources might have differing eligibility or program components. Most PSH programs operate on a single or clustered site as opposed to rentals in the private market.

Rapid-Rehousing (RRH) is a short-term housing option that provides up to 24 months of rental assistance that is designed for people who can start paying for all their housing costs on their own when assistance ends. Projects can operate on a single site or through tenant-based private market rentals.

Other Permanent Housing (OPH) includes any other forms of subsidized or partially subsidized housing that receives housing referrals from the HRS. This can include but does not require programs to provide supportive services and case management.

Transitional Housing (TH) provides temporary housing with supportive services to individuals and families experiencing homelessness, designed to assist people in transitioning to and maintaining permanent housing. Transitional Housing funded by HUD provide housing and supportive services for program participants for up to 24 months. Other forms of transitional housing exist locally with subsidies, eligibility, supportive service offerings, and duration of assistance varying widely between providers.

Street Outreach teams are mobile and engage people experiencing unsheltered homelessness with critical needs and coordinated assessments. Outreach staff canvass Austin and Travis County to provide life-saving supplies and help people start the process of rebuilding stability. Street Outreach often serves as the gateway to the HRS to connect people to needed services.

Emergency Shelter (ES) is a critical short-term lifeline for many people who experience homelessness. Most shelters in Austin/Travis County are operated on a single or clustered site where people can stay for a limited period. ES can be congregate (communal) or non-congregate (tiny homes or individual micro-shelters), and case managers often provide case management to help people end their homelessness or navigate the Coordinated Entry System.

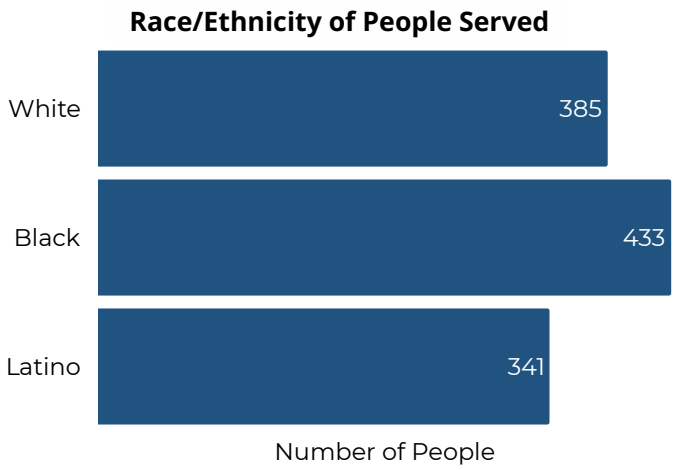
Homelessness Prevention is designed to catch people before they ever experience homelessness. Programs generally offer limited financial assistance on a short or medium-term basis while case management services and allowable expenses range widely between providers.

Diversion is limited or one-time financial assistance that can come in the form of services or monetary support to people who've recently become homeless. This is not related to diversion programs operated by Travis County in the context of the legal system. Eligibility requirements, allowable costs, case management, and other program elements vary widely across providers.

Appendix B: Chart Guide

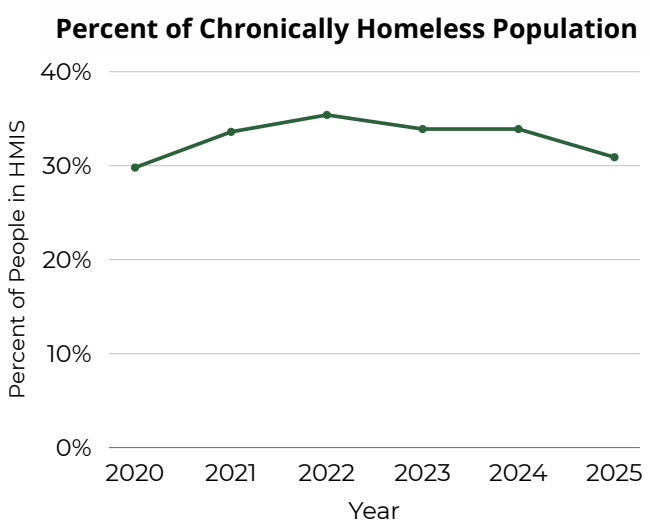
Bar Chart

Bar charts display data with rectangular bars where the length of the bars is proportional to the total value they represent. Categories like Age or Program Type will label each bar while the number of people or items will be displayed above it. Bar charts are generally interpreted by comparing the lengths of each bar to each other or comparing the totals to another data benchmark or reference number. This example looks at the number of clients counted by their reported Race.



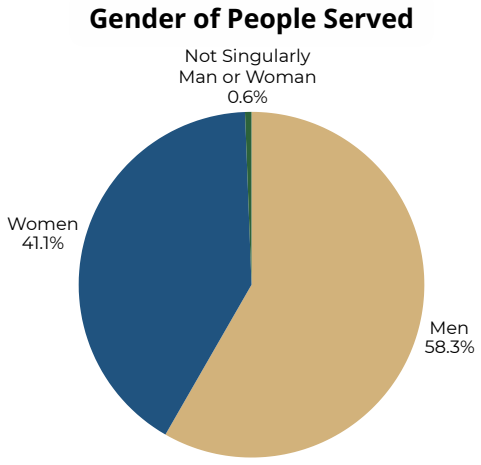
Line Chart

Line Charts visualize data points as dots that are connected by a straight line. This example displays the percentage of the total HMIS population that are chronically homeless where each dot is the percent for each respective year. They are helpful when reviewing changes year-over-year or comparing the rate and share of a group or metric over time. The direction or slope of the line visualizes the rate of change and it is generally interpreted through the direction of the slope or by comparing the slope and direction of the data points against other groups.



Pie Chart

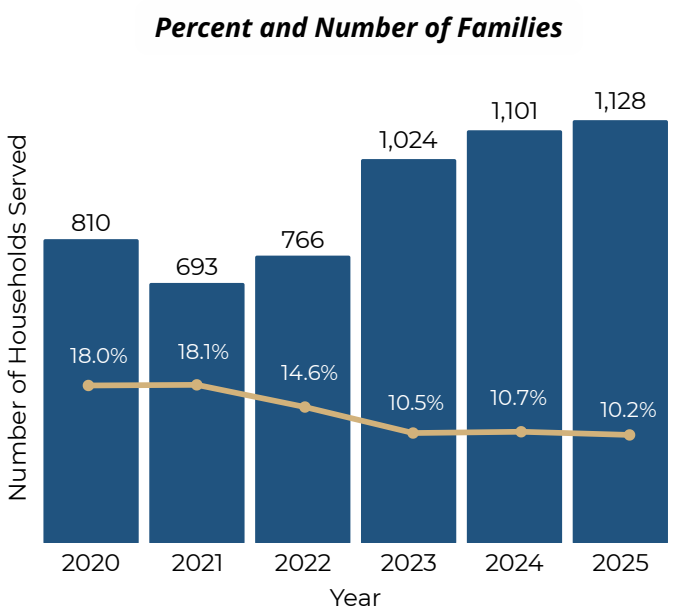
Pie Charts represent a whole group of people or a category as a circle with sections of the circle colored to represent a section or sample of the larger group. It is best used for comparing groups when items or people in the groups cannot be counted in multiple groups. They are generally interpreted by looking at which groups are largest or smallest. This example shows Gender reported for the HMIS population with different colors for different genders in the whole group.



Appendix B: Chart Guide

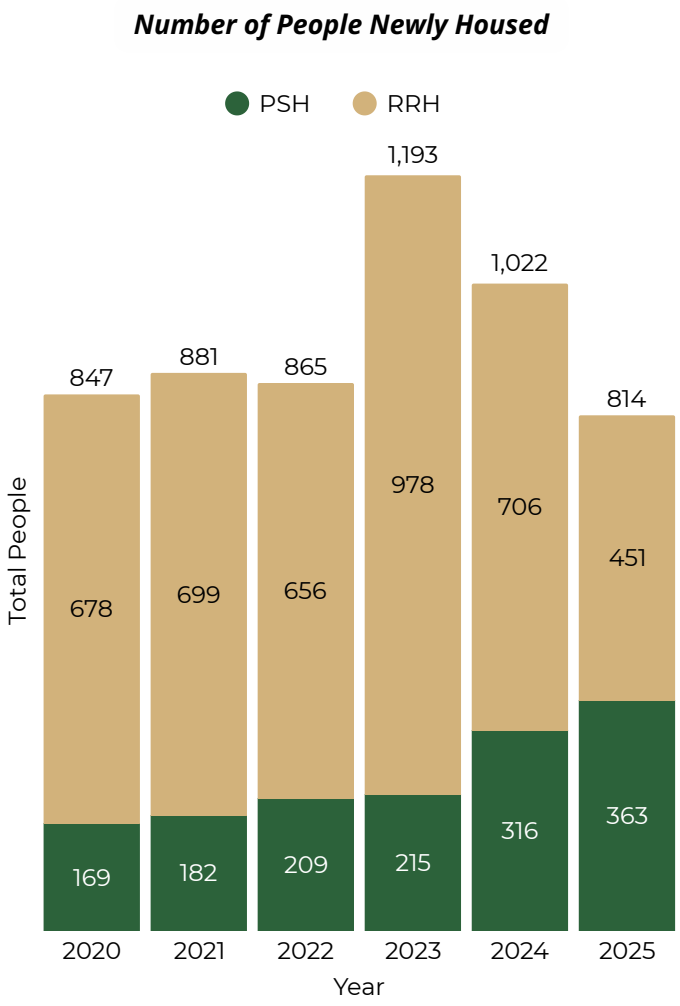
Bar and Line Combination

This chart is an overlay of a bar chart and a line chart together in order to compare the total numbers of a group/category to the proportion of that group from a larger/related group. The example here shows the total of a group of people (Families) over the past six years as bars with their proportion of the total population (Families divided by All Households in the HRS) as a line. While the number of families increased, the rate of families in the system decreased. Combination charts are useful for visualizing the differences between the same or related groups to catch any opposing trends like this example.



Stacked Bar Chart

Similar to bar charts, stacked bar charts visualize the total numbers of a group or category over time or against other groups. Stacked bar charts are different from bar charts because each bar is divided into separate groups and colored to show the comparison of size between sub-sections of groups. Stacked bar charts are helpful for comparing the overall total of a group against its subsections at the same time and should be interpreted by looking at the overall changes in total amount per bar and identifying any changes in the smaller sections of each sub group. This example shows the total number of people who moved in to a Permanent Housing program in the Homelessness Response System where the bars each show the growth and decline in housings and how many of those housings were for Permanent Supportive Housing as opposed to Rapid Re-Housing. While the total number of move-ins decreased in the last year, Move-Ins for PSH increased. Stacked charts assist in identifying trends like this example.



Appendix C: HMIS Migration

In fall 2025, the Austin/Travis County Homelessness Response System (HRS) transitioned to a new software vendor for our community's Homeless Management Information System (HMIS). The change brings more capabilities to providers and creates a more comprehensive system to support people in ending their homelessness.

The transition meant transferring vast amounts of data between systems. This provided an opportunity to closely examine the information that existed in HMIS and clean up inconsistencies - ensuring the new system is founded on the highest-quality data possible.

What the HMIS transition means for the data in this report

When a provider contacts someone experiencing homelessness for the first time, they create a profile for that person in HMIS if one doesn't already exist. Sometimes duplicate profiles are created, and a small number are incomplete or not updated consistently. Part of the migration was finding these profiles and determining whether to bring them to the new system. In total, there were 1,887 profiles in HMIS that were either merged with other records (in the case of duplicates) or removed from the database. The number of records that were not transferred to the new system accounts for less than 3% of all profiles in HMIS.

This clean up impacts the data in one important way: There are fewer recorded interactions with service providers. In this report, these interactions are referred to as "enrollments" - meaning a provider enrolled someone in their housing program, for example. One person can have multiple enrollments in different types of projects. As the charts on this page show, enrollments in all project types dropped across all the years represented in this report. So, while the migration impacts the amount of data this report pulls from, trends and comparisons between years can still be identified reliably.

Similarly, the race/ethnicity and age ranges of enrollments that were excluded mirror demographics in our HRS more broadly, meaning the transition did not significantly impact trends in these categories. One exception is the number of enrollments for single youth and young adults; this group shows up in greater proportion in excluded enrollments than it does in our broader HRS. Meanwhile, families and youth-only families made up much smaller proportions than the broader HRS. This report takes these factors into account in its analysis.

Fig. 30: Number of Enrollments Merged or Excluded During HMIS Transition

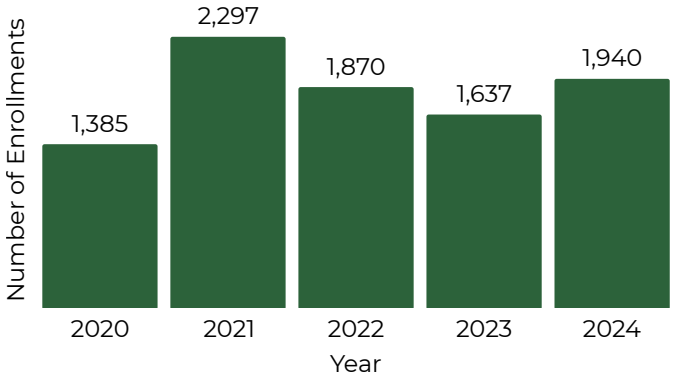
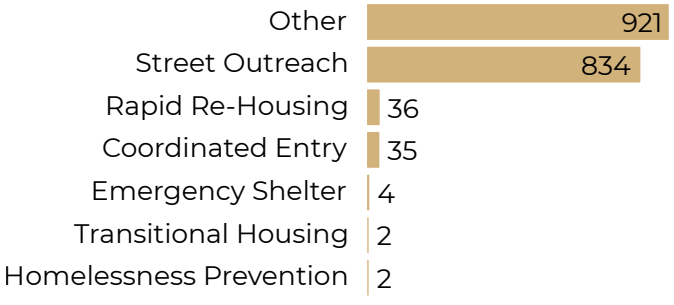



Fig. 31: Number of Clients Merged or Excluded During HMIS Transition by Project Type