SAMHSA
Substance Abuse and Mental Health Services Administration

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Shared Housing for People with Mental Illness: Choice, Stability, and Support

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INTRODUCTION: Shared housing is recognized as a best practice for ending homelessness in unaffordable housing markets. It also offers unique advantages as a housing intervention for people with mental illness (MI), helping them quickly achieve stability and develop opportunities for long-term recovery and personal growth.

A Simple Approach to Shared Housing

Shared housing is defined by the Shared Housing Institute as "when two or more people live together and share common space in temporary or permanent housing."[1] In the context of providing housing solutions for homeless people with MI, shared housing is a model in which two or more individuals from different households choose to live together in a unit with both common and private areas. Shared housing program participants choose the individual with whom they live, participate in care management, and have separate leases in their names. Care managers coordinate matching and support while keeping each participant's health information confidential, so a housemate is never given clinical details about the person they live with. They pursue their journeys to housing stability with the support of community resources and, often, a supportive living environment.

> "If they are active in their recovery, they have their toolbox to address and meet the moment. . . . We've had people struggle and relapse, and then their roommates are the ones that circle around them and support them and help them get to treatment." —Shared housing provider

The Truth about Shared Housing

There are assumptions about shared housing program guidance and best practices. The following information clarifies some of the features, components, and philosophies of a shared housing program.

Many people want to share housing, and choice is what makes it work.

Sharing housing is normal, common, and familiar to most people. People live together as families and roommates for many years of their lives. Shared housing helps individuals avoid loneliness and isolation, which can be a tremendous benefit for people with MI. Many shared-housing participants find great comfort and safety in living with others, as well as in sharing household duties, which can help them remain housed.

Sharing the cost of a home makes housing more affordable and attainable for participants while giving them an opportunity to improve their wellness. Participant choice in selecting a roommate and a unit to live in makes shared housing a person-centered housing intervention.

> "Whether they're living together in a shelter or an encampment, some folks have already built community, and they want to keep that community, and helping them so that they can live permanently together works really well." —Shared housing provider

With good matching and support, housemates can get along and thrive.

Shared housing can help move homeless individuals with MI off the street and into housing without losing the camaraderie they established while living on the streets together. Care managers provide direct support to shared housing participants, and connections to community supports are established once participants are housed. However, roommate matching is the foundation of a successful placement. Many shared housing providers establish protocols for pairing housemates together that may include questionnaires and social events, allowing participants time to get to know one another and determine whether becoming housemates is a good option for them.

> "One thing that we learned that we need to do was leave the two of them alone together for a little bit too. . . . Y'all figure out your stuff—so you can genuinely, honestly make this true decision—ask this person what you need to ask them." —Shared housing provider

Care managers can use several approaches to maximize harmony once housemates have chosen to live together:

1. **Deepening the housemate connection**—Establishing a personal connection between housemates early can help avoid some conflicts or minimize their duration when they arise. Ensuring that each housemate sees the strengths and humanity of the person with whom they share space lays the foundation for a successful living arrangement. Care managers can facilitate discussions between housemates to help them become better acquainted and begin establishing appropriate boundaries.
2. **Housemate agreements**—Care managers can help housemates develop formal agreements to promote long-term clarity about how they treat shared spaces, pay bills, entertain guests, and define each person's household responsibilities. Keeping visible copies of these agreements in shared spaces and revisiting them with care managers can help housemates avoid disagreements.
3. **Anger management**—Disagreements, misunderstandings, and miscommunications can occur when people share living space. These situations can build resentment, which may emerge as frustration and anger. Care managers may connect shared housing participants to anger management classes and services if an individual has a history of acting in anger or has difficulty communicating feelings and needs verbally.
4. **Mediation and conflict resolution**—Taking the time to understand how a housemate communicates is critical to establishing a successful shared living arrangement. Care managers can help housemates improve their communication skills and practice expressing their needs while setting appropriate boundaries. A third party (excluding the care manager for either housemate) can also provide mediation or conflict resolution when housemates cannot resolve disagreements themselves. Community resources or another care manager can assist.

There are multiple approaches that shared housing providers can use to help housemates live together. In addition, there may be times when a housemate pairing simply does not work. In that case, shared housing can be a stepping stone to another permanent housing situation. Leases end, roommates change, and participants can choose to seek a different housemate or living situation if their current roommate is not a successful match. This transition can occur with the guidance of a care manager while participants remain safely housed and connected to services.

Shared housing is manageable for staff when roles and partnerships are set up well.

A shared housing program is often run by a nonprofit or government organization that works with landlords to find units and provides rental assistance and care management to homeless individuals with MI. Staffing for shared housing projects should include care managers and other providers of direct services in the community. Many shared housing programs employ or contract with individuals who provide landlord relationship management, tenant advocacy, and conflict resolution or mediation.

Establishing a clear set of duties within a shared housing project is key to setting care managers up for success, and each housemate should have their own care manager to avoid potential challenges with partiality in settling housemate disputes.

In addition, connecting participants to holistic services helps each housemate achieve their personal goals and remain housed. Therefore, shared housing programs should offer behavioral health supports directly or through partnerships with agencies that provide them. Case conferencing across service agencies and

systems of care should take place regularly to ensure that shared housing participants with MI who are exiting homelessness continue to access the resources they need for recovery and wellness.

Shared housing can be safe, and often safer, for people with MI.

Behavioral health conditions are present in families and other shared housing. Matching for compatibility, not diagnosis, is what drives a good fit for sharing a unit. A housemate agreement sets clear, shared expectations for the household up front, so concerns are addressed early instead of escalating.

Shared housing can be a supportive or even lifesaving setting for a person with MI regardless of previous housing status. Having a housemate means someone is available to notice a health change, a crisis, or a difficult day that can lead to new or worsening health or recovery challenges. A housemate may notice behavior changes before an individual with MI does. A strong behavioral health connection means that clinical support and crisis response are available when challenges arise rather than being left for housemates to manage.

Federal Funding Sources that Support Shared Housing

Several federal funding sources can support shared housing projects, including the following:

Continuum of Care (CoC)

CoC Program funding is available through the US Department of Housing and Urban Development (HUD), including sponsor-based (SBRA) and/or project-based (PBRA) rental assistance:[2]

- → **SBRA.** Program participants must reside in housing owned or leased by a sponsor organization and arranged through a contract between the recipient and the sponsor organization.
- → **PBRA.** Program participants reside in housing provided through a contract with the owner of an existing structure, whereby the owner agrees to lease subsidized units to program participants.

Emergency Solutions Grants Program (ESG)

ESG Program funding through HUD can cover the costs of moving into a unit, rental and utility assistance, and case management supports for persons in shared housing. Each housemate must have a lease in their name.

Housing Choice Voucher (HCV)

HCV Program funding from HUD can subsidize a portion of a rental unit's rent for participants in a shared housing program. Program participants can share a home with other voucher holders or unassisted individuals.

Medicaid

Medicaid Program funding through the US Centers for Medicare and Medicaid Services (CMS) can fund the services that make shared housing work, though not the rent itself. Depending on the state, it covers behavioral health case management and tenancy support services, including roommate matching, housing searches, conflict mediation, and regular check-ins to help housemates remain stably housed. These services are available through home- and community-based services authorities or targeted case management.

Coverage varies by state, and federal guidance on Medicaid housing support services has shifted recently, so programs should confirm what their state currently covers.

HUD-VASH

HUD-VASH Program funding through HUD and the US Department of Veterans Affairs uses Housing Choice Vouchers to pay long-term rental costs while providing mental health care, health care, and other support services for homeless veterans.

Flexible Funding

Finally, flexible funding, such as "private dollars from philanthropists, endowments, foundations, and other charitable entities," can also fund shared housing living arrangements in these same ways.[3] Flexible funding sources can also help fill in gaps in program delivery, such as paying for services or landlord incentives.

Summary

Shared housing is a flexible and person-centered housing intervention for homeless people with MI. Designing a program with appropriate funding, effective approaches, and adequate staffing is essential to delivering safe, affordable, and supportive living environments that affirm choice and prevent loneliness.

Learn More: The Shared Housing Institute

The Shared Housing Institute (SHI) develops tools, resources, and training on effective shared housing practices, and its website offers a range of free materials to support programs at any stage. Staff can find practical resources, such as housemate-matching tools, roommate agreement and rent analysis worksheets, and the Living Well with Others toolkits on structuring the housemate experience, building relationships, and resolving conflict. SHI also provides guidance on landlord engagement, master leasing, and the use of shared housing within the HCV program, along with recorded trainings and materials from its national shared housing conferences. Visit sharedhousinginstitute.com to explore these resources and learn more.

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Endnotes

1 Shared Housing Institute, home page, accessed July 17, 2026, https://www.sharedhousinginstitute.com/.

2 US Department of Housing and Urban Development, "Continuum of Care (CoC) Program Eligibility Requirements," *HUD Exchange*, accessed July 17, 2026, https://www.hudexchange.info/programs/coc/coc-program-eligibility-requirements/.

3 National Alliance to End Homelessness, "Shared Housing," fact sheet, February 2022, https://endhomelessness.org/wp-content/uploads/2024/10/Shared-Housing-Fact-Sheet_Feb-2022.pdf.

Learn More about the Homeless and Housing Resource Center

Providing high-quality, no-cost training for health and housing professionals in evidence-based practices that contributes to housing stability, recovery, and an end to homelessness.

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