



**U.S. Department of Housing and Urban Development**

Washington, DC 20410

**Written Testimony of Jennifer Ho**

**Senior Advisor on Housing and Services to Julian Castro**

**Secretary of U.S. Department of Housing and Urban Development**

**Hearing before the House Committee on Veterans Affairs**

**on**

**“Evaluating Federal and Community Efforts to Eliminate Veteran Homelessness”**

**Thursday, December 11, 2014**

Good morning Chairman Miller, Ranking Member Michaud, and Members of the Committee. Thank you for this opportunity to discuss how the Department of Housing and Urban Development (HUD), the Department of Veterans Affairs (VA), and the U.S. Interagency Council on Homelessness (USICH)—along with our community partners—are working together to eliminate Veteran homelessness in the United States.

Since launching *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness* in June 2010, ending Veteran homelessness has been a high priority goal for HUD. The latest 2014 Point In Time count estimates that the number of Veterans experiencing homelessness on a single night has dropped by 33 percent in five years – from 74,770 in 2010 to 49,933 in 2014. The significant progress made thus far would not have been possible without funding from Congress and working closely with our Federal and local partners. While much more needs to be done, we know that collaboration and sufficient resources strategically

deployed are the keys to being able to address the housing and service needs of any Veteran who experiences homelessness.

## **Collaboration**

HUD, VA, and USICH are working together in innovative ways to combat a problem that cannot be solved by one agency alone. Both VA and HUD administer programs that target a range of Veterans from those at risk of losing their housing to the Veterans experiencing chronic homelessness who have lived on the streets for years and even decades. To align our programs and formalize our joint commitment to ending Veteran homelessness, HUD, VA, and USICH created an interagency committee known as *Solving Veteran Homelessness as One (SVHO)*. SVHO meets frequently and has dedicated staff to work on Veteran homelessness issues on a daily basis. This group also reports to senior leadership at both Departments and USICH to discuss progress on meeting goals and to identify any potential barriers to success.

To ensure that limited resources are used as efficiently as possible, HUD and VA are aligning programs so they are not redundant or duplicative. For example, HUD strongly encourages Continuums of Care (CoCs) to coordinate with their local VA and nonprofit partners executing VA programs, so that CoC resources are prioritized for those who are ineligible for VA programs. This helps ensure that Veterans who do not meet the eligibility criteria for VA programs can receive assistance through other programs in the community. While this is not something that can be required, HUD incentivized this level of coordination by scoring CoCs on the extent to which they were doing this through the FY 2013-FY 2014 CoC Program Competition Notice of Funding Availability.

## **HUD-VASH**

The greatest collaborative effort is the Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH) program, which is key to meeting the goal of ending Veteran homelessness in the United States in 2015. HUD-VASH is a robust resource that combines Housing Choice Voucher (HCV) rental assistance from HUD with intensive case management and clinical services provided by VA to assist the most highly vulnerable Veterans who have experienced homelessness for extended periods of time. Since 2008, nearly 70,000 HUD-VASH vouchers have been awarded to Public Housing Authorities (PHAs) in each of the 50 states, the District of Columbia, Puerto Rico and Guam, with nearly 11,000 of those vouchers being awarded in the last several months. As of September 2014, almost 52,000 Veteran families are being assisted through HUD-VASH vouchers and another 3,300 families have been issued vouchers and are searching for housing. In addition to HUD-VASH, there are other resources for Veterans with fewer barriers to housing who have experienced homelessness for shorter periods of time, such as the HUD's transitional housing and rapid re-housing programs, and VA's Supportive Services for Veteran Families (SSVF) and Grant and Per Diem (GPD) programs.

HUD and VA use data collected by both agencies to allocate HUD-VASH vouchers based on need. This information includes the number of Veterans experiencing homelessness in communities and the performance of the PHAs and VA Medical Centers (VAMC). This data-driven approach to allocating HUD-VASH ensures this scarce resource goes to areas with the greatest need that also have the ability to effectively administer the influx of new vouchers.

Of course, HUD-VASH is only as successful as the local partnerships between VAMC staff, PHA staff, and the local CoC. The partnerships required in the HUD-VASH program often involve a new, challenging way of doing business, but I'm pleased to report that the relationships between VAMCs and PHAs are thriving in many communities. When requested or needed, Federal staff at either or both agencies are available to resolve policy issues or to help identify solutions regarding procedures or practices that could be improved. In the last two years, local partnerships with CoCs have greatly expanded in many communities, and CoCs are often at the table when PHAs and VAMCs work to improve the HUD-VASH program. As communities identify challenges, such as low voucher utilization or lack of housing stock, HUD, VA, PHAs, and community partners are working together to find solutions to overcome the obstacles. By overcoming challenges together, the collaboration between the groups is stronger and better able to address the next challenge.

In order to ensure the HUD-VASH resource is used as effectively as possible, HUD and the VA maintain a performance target to use 65 percent of HUD-VASH vouchers for Veterans experiencing chronic homelessness. To meet the definition of chronically homeless, a Veteran must have a disabling condition and must have been homeless continuously for at least one year or experienced at least four occasions of homelessness in the last three years. These Veterans tend to have high rates of behavioral health problems, including severe mental illness and substance abuse disorders, which may be exacerbated by physical illness, injury or trauma, and typically require long-term housing assistance and supportive services. The housing assistance offered through HUD, in conjunction with the intensive case management and supportive services offered through VA, are able to support the housing and service needs of these Veterans for as long as is required. This type of supportive housing enables Veterans to live as

independently as possible in a permanent setting. Research has demonstrated time and again, including several studies published in the Journal of the American Medical Association, that permanent supportive housing not only ends homelessness for people who in the past would live on our streets and in shelters for years, but also saves taxpayers money by interrupting the costly cycle through shelters, emergency rooms, hospitals, detox centers, and jails.

HUD and VA are both committed to *Housing First* in HUD-VASH, a model that has been identified as the most successful intervention for people who have been homeless for years and have complex disabilities. This evidenced-based model has several key characteristics, including immediate access to permanent supportive housing from the streets or shelters, while providing intensive supportive services to help residents achieve and maintain housing stability and improve their lives. *Housing First* targets Veterans experiencing chronic homelessness who are considered the most vulnerable and does not require residents to undergo psychiatric treatment or maintain sobriety prior to obtaining housing. Vulnerable Veterans can more easily engage in services and address their chronic health conditions once they are no longer dealing with the chaos and uncertainty of homelessness. VA has provided guidance to VAMC case managers not to require Veterans to demonstrate sobriety or to receive treatment for underlying addiction or mental health issues as a precondition for receiving housing assistance. To support appropriate targeting, HUD has eliminated all criminal history screening requirements for HUD-VASH vouchers except for the ban on lifetime sex offenders.

The collaboration between HUD, VA, and USICH on the HUD-VASH program is unprecedented and reaches from the top leadership at each Agency to national program staff to local offices on the ground. I thank Secretary McDonald and Dr. Clancy for their leadership and collaboration.

## **Working together to improve performance**

HUD and its Federal partners are committed to working with community officials to improve the performance of HUD-VASH through technical assistance and shared best practices. HUD and VA have delivered multiple national-level trainings and webinars on HUD-VASH policies and procedures since 2008. These efforts have been supplemented by dozens of local trainings and conferences carried out by HUD field offices and VA regional staff. One of HUD's major technical assistance efforts has been community boot camps in which HUD, in collaboration with VA, USICH, the Rapid Results Institute, and Community Solutions, invested almost \$900,000 and conducted trainings for 20 communities in 2012. "Boot Camps" are 2.5 day planning sessions followed by 100 days of intense and coordinated effort to streamline the process of operating the HUD-VASH program, to accelerate housing placement, and to improve the targeting of those vouchers to the most vulnerable Veterans experiencing homelessness. The teams are made up of key leaders from HUD, VA, PHAs, local government and CoCs, who work together to come up with local solutions based on individual community circumstances and need.

The methodology of the boot camps is based on the belief that the persons closest to the ground are in the best position to recommend improvements and that having multiple stakeholders in the community—including local government, CoCs, PHAs and VAMCs—is necessary to eliminate homelessness among Veterans. These boot camps demonstrate that large gains can be made in a short period of time when these partners are all at the table. For example, the Houston team increased their housing placement rate by 68 percent, issued 100 percent of HUD-VASH vouchers to Veterans experiencing chronic homelessness, and expedited access to those units. Many communities like Jacksonville, Florida, set ambitious goals of housing 100 Veterans experiencing chronic homelessness in 100 days and succeeded in their efforts. Based

upon the success of the first round of boot camps, HUD invested \$1.3 million in 6 boot camps in 2013 for both Veterans and others experiencing chronic homelessness.

The work and progress made through the boot camps is being leveraged by the VA-funded 25 Cities initiative. Working in partnership with HUD and USICH, VA's 25 Cities effort enlists communities with the highest concentration of persons experiencing chronic homelessness and Veterans experiencing homelessness to continue their strategic work to end Veteran homelessness. Forty-six percent of Veterans experiencing homelessness are located in major urban areas. New York and Los Angeles alone account for 17 percent of all Veterans experiencing homelessness in the United States. These 25 communities account for more than 40 percent of Veterans experiencing homelessness. This effort builds off previous boot camps and technical assistance and helps local communities strengthen coordinated, community-based assessment systems for assisting Veterans experiencing homelessness to access appropriate housing and supportive services options.

### **Zero: 2016 Campaign**

HUD and our Federal partners will continue to help communities improve the identification, assessment, and housing placement of Veteran, as well as non-Veterans experiencing chronic homelessness through HUD's technical assistance support of the Zero: 2016 Campaign, a targeted initiative which includes 67 communities from across the country. This campaign is a rigorous follow-up to the 100,000 Homes Campaign and involves hands-on coaching, the implementation of transparent data and performance management strategies, and a shared learning environment for these 67 communities, who are committed to ending Veteran and chronic homelessness. Each community will develop "take down" targets, specific targets

for the number of people they must house each month, to end Veteran homelessness by December 2015 and chronic homelessness by December 2016. This effort dovetails nicely with other large-scale initiatives helping communities end homelessness, including the 25 Cities initiative and the Mayor's Challenge to End Homelessness, championed by First Lady Michelle Obama.

### **Mayors Challenge to End Veteran Homelessness**

The Mayors Challenge is a great example of how HUD has collaborated with our federal partners, the National League of Cities, and with local governments to commit to ending Veteran homelessness. I am excited to announce that, as of last week, more than 350 mayors, governors, and county executives from across the country have pledged to end Veteran homelessness in their community.

### **Conclusion**

Mr. Chairman and members of the Committee, I hope this discussion has been helpful to your understanding of how HUD, VA, and USICH collaborate on ending homelessness among Veterans, and how we work together on the HUD-VASH program in particular. Thank you for this opportunity and I'm prepared to answer any questions you may have.