

**STATEMENT FOR THE RECORD**  
**OF**  
**PARALYZED VETERANS OF AMERICA**  
**FOR THE**  
**HOUSE COMMITTEE ON VETERANS' AFFAIRS**  
**SUBCOMMITTEE ON HEALTH**  
**AND**  
**SUBCOMMITTEE ON ECONOMIC OPPORTUNITY**  
**CONCERNING**  
**EFFORTS TO REDUCE VETERANS HOMELESSNESS**

**JANUARY 18, 2018**

Chairman Wenstrup, and Chairman Arrington, and members of the Subcommittee, Paralyzed Veterans of America (PVA) would like to thank you for the opportunity to provide our views on the efforts of the Department of Veterans Affairs (VA), Department of Housing and Urban Development (HUD), and the Department of Labor (DOL) to reduce veteran homelessness.

Every member of PVA, regardless of their injury, faces significant challenges when transitioning back into society. As a catastrophically disabled veteran it can be difficult to maintain substantial gainful employment which could very well result in them becoming homeless.

In 2009, the White House and Department of Veterans Affairs (VA) announced the goal of ending veteran homelessness. This presidential mandate resulted in VA leadership adding homelessness programs as a metric to all director's dashboards. The Director's dashboard provides a list of the priorities for each individual Director.

In 2014, Mayors Challenge was launched as an initiative among mayors to end homelessness in their respective cities. The program used vouchers to provide to homeless veterans to utilize for housing. This movement has resulted in many cities effectively ending "functional" homelessness. This program ended homelessness for newly homeless veterans, not those who previously received vouchers or were chronically homeless.

Since then, thanks to VA's collaborative efforts with HUD, the U.S. Interagency Council on Homelessness, community partner organizations, and local and state governments, there was a 17 percent decrease in Veteran homelessness between 2015 and 2016 contributing to a 47 percent overall reduction in Veteran homelessness across the United States between 2010 and 2016. This statistic is quadruple the previous year's annual decline, and represents a 47 percent decrease since 2010. More specifically, as

of August 1, 2016, the number of veterans experiencing homelessness in the United States has been cut nearly in half since 2010. By utilizing a Point in Time count in January 2016, HUD estimated that just over 13,000 unsheltered veterans were living on the streets, a 56 percent decrease since 2010. A Point in Time count is a tool used to determine the number of sheltered and unsheltered homeless persons on a single night. In 2015 VA no longer recognized ending homelessness as a priority; therefore, all homeless programs were eliminated. Directors are no longer held accountable for the results of their homeless programs. Also homelessness is no longer on Director's dashboards. VA Central Office has only mandated that directors perform outreach, there is nothing specific provided about what must be conducted.

When ending homelessness became a priority VA deployed a housing first strategy that was and currently is very effective. This program gets people in housing where they belong. Unfortunately this initiative does not address the underlying issue of why the veteran is homeless in the first place. Very rarely are financial issues the sole cause of a veteran's homelessness. It's no secret mental illness and substance abuse play a very important role in a veteran becoming homeless. In many cases the money HUD provides is not enough for the veteran to find housing in a good neighborhood. The veterans are forced to reside in the same areas they were trying to escape. Another problem is there is no mandate that veterans must be "clean" while participating in the program. It has been found that veterans with substance abuse problems will sometimes take advantage of this and transform their new residence into a drug house. This creates an adversarial relationship with the community that is often times very

difficult to overcome. Unfortunately at this time, VA does not have the staff or the programs to address the problems with the voucher system.

VA did conduct research and found that if a veteran is involved in the VA healthcare system they were less likely to commit suicide, become homeless or become incarcerated. The importance of increasing the access to VA medical care cannot be overstated. Currently the system in place to provide veterans with Mental Health care is broken. Many VA Medical Centers do not have the resources to provide the necessary psychiatric and therapeutic treatment. Moreover, there is a serious lack of providers who will actually work with VA to provide “choice care” outside of the VA leaving veterans with few alternatives. For those veterans who are employed and have secondary insurance it is possible to find those services in the private sector. For veterans who are on the verge of homelessness that do not have the access or the ability to seek out these services, they will most likely give up, leaving their mental illness untreated and will also leave them on the street.

Just recently Secretary of the Department of Veterans Affairs announced that he was going to reduce the amount of HUD/VASH funds and redistribute these funds to local VA Medical Centers and let leadership determine how the funds are best spent on their individual homelessness programs. The problem is, this program is no longer a metric for VAMC leadership. There will be no oversight as to how these funds are spent and what they are spent on.

In response to the spotlight on homeless veterans, more specifically their disability claims, VA now expedites any claim filed by a homeless veteran. Initially a metric was implemented that required all claims to be completed within 90 days for homeless veterans. Unfortunately this has not been entirely successful since it takes longer to adjudicate a homeless claim than it does a claim that has not been expedited. As of January 5, 2018, the average amount of time to adjudicate a non-homeless expedited claim is 96 days; comparatively, the average time to adjudicate an expedited claim is 111 days. Not surprisingly, this is no longer a metric either; consequently, the staff and resources are no longer available to make this process successful.

PVA certainly applauds VA's dedication to end homelessness and for the progress they have made; more progress needs to be made regarding the barrier to access to VA programs and services. There is a lack of outreach and resources for those who are most in need. Unfortunately, with the lack of resources and oversight for these programs which disappeared after 2015, the chance of any program being successful is minimal. VA has made strides but more work needs to be done for the program to be called a success. PVA offers the following recommendations to ensure homelessness programs are effective.

First, there must be oversight. Without homelessness as a priority there is no longer any emphasis on ensuring the effectiveness of these programs. There should be a metric for Homelessness programs. If HUD/VASH funds are going to be redistributed to VA Medical Centers those directors must be held accountable for how those funds are

utilized. It should not be left to the respective medical center director's discretion as to how those funds are spent.

Second, the HUD/VASH program must receive continued funding. In 2015 leaders in Chattanooga, Tennessee joined the national movement to end veteran homelessness and were able to return to functional zero by January 2017. Unfortunately, due to a funding shortfall announced by HUD in June 2017 issuance of new housing vouchers were halted. For cities like Chattanooga to continue on their movement to end veteran homelessness they must receive the necessary funding to do so.

Third, the lack of resources to provide adequate mental health care within VA medical centers must be addressed. If VA is unable to provide the resources needed for veterans to receive adequate care within their respective VAMC then the choice program must provide the stop gap so any veteran no matter where they reside is able to receive mental health care.

PVA is announcing their support of H.R. 4099 the "Homeless Veteran Families Act." Under current law, a veteran who has dependent children is not eligible for services under the Grant Per Diem (GDP) program. VA does not have the authority to reimburse the costs associated with housing dependent children of homeless veterans. More often than not, providers will give preference to non-veteran homeless families due to other federal assistance programs being available to provide reimbursement of expenses for dependent children. Homeless veterans with children only account for three percent of

all homeless veterans which has not changed in the past two years. The “Homeless Veteran Families Act” would provide the VA with the authority to pay a partial per diem to GDP providers. For each child the provider would receive per diem at a 50 percent rate for each of the minor dependent(s) accompanying the veteran.

Chairman Wenstrup and Chairman Arrington, PVA thanks you for the opportunity to offer our views and concerns on government programs aimed at ending veterans’ homelessness. PVA is ready to work with the committee to support those efforts to help our veterans who have done so much for this nation and its people.

### **Information Required by Rule XI 2(g) of the House of Representatives**

Pursuant to Rule XI 2(g) of the House of Representatives, the following information is provided regarding federal grants and contracts.

#### ***Fiscal Year 2018***

Department of Veterans Affairs, Office of National Veterans Sports Programs & Special Events  
— Grant to support rehabilitation sports activities — \$181,000.

#### ***Fiscal Year 2017***

Department of Veterans Affairs, Office of National Veterans Sports Programs & Special Events  
— Grant to support rehabilitation sports activities — \$275,000.

#### ***Fiscal Year 2016***

Department of Veterans Affairs, Office of National Veterans Sports Programs & Special Events  
— Grant to support rehabilitation sports activities — \$200,000.

### **Disclosure of Foreign Payments**

Paralyzed Veterans of America is largely supported by donations from the general public. However, in some very rare cases we receive direct donations from foreign nationals. In addition, we receive funding from corporations and foundations which in some cases are U.S. subsidiaries of non-U.S. companies.