



# Report to Congress on Targeted Programs that Help People Experiencing or At Risk of Homelessness

The United States Interagency Council on Homelessness (USICH) is pleased to submit its Annual Report on programs that help people experiencing or at risk of homelessness pursuant to Section 203[c] of the McKinney-Vento Homeless Assistance Act (42 U.S.C. § 11313 (c)(A)).

## U.S. Targeted Homelessness Assistance

### Discretionary Budget Authority in Millions of Dollars

Agency	Program	FY 2017 Enacted	FY 2018 Enacted	FY 2019 Enacted	FY 2020 Enacted
USDA	USDA/F&NS: The Emergency Food Assistance Program	375	354	374	402
ED	Education for Homeless Children and Youths	77	85	94	102
HHS	HRSA: Health Care for the Homeless	440	460	478	478
HHS	SAMHSA Projects for Assistance in Transition from Homelessness	65	65	65	65
HHS	SAMHSA Mental Health Programs of Regional/National Significance for homelessness	33	33	33	33
HHS	SAMHSA Substance Abuse Treatment Programs of Regional/National Significance	36	36	36	36
HHS	ACF: Runaway and Homeless Youth	119	127	127	132
HHS	ACF: Head Start	406	474	551	583
DHS/ FEMA	Emergency Food and Shelter	120	120	120	125
HUD	Homeless Assistance Grants	2,383	2,513	2,636	2,777
HUD	New HUD-VA Supportive Housing Program Vouchers*	47	40	40	40
DOJ	Transitional Housing Assistance Grants to Victims of Sexual Assault	30	35	36	37
DOJ	BJA: Pay for Success Permanent Supportive Housing Demonstration	--	up to 5	--	--
DOL	Homeless Veterans' Reintegration Program	45	50	50	55
VA	Health Care for Homeless Veterans	188	189	190	160
VA	Domiciliary Care	199	210	182	184
VA	Compensated Work Therapy / Transitional Residence	60	60	84	73
VA	HUD-VA Supportive Housing Program Services	496	543	550	600
VA	Grant and Per Diem Program	247	257	257	257
VA	Justice Outreach Prevention Initiative	48	49	55	64
VA	Supportive Services for Veteran Families	300	340	380	380
VA	Other	104	91	29	85
USICH	United States Interagency Council on Homelessness	3.6	3.6	3.6	3.8
<b>Total</b>		<b>5,822</b>	<b>6,144</b>	<b>6,392</b>	<b>6,676</b>

\*This reflects new incremental HUD-VASH vouchers only; existing vouchers are renewed in the HUD Tenant- Based Rental Assistance account.

## Department of Agriculture

### Emergency Food Assistance Program

The Emergency Food Assistance Program (TEFAP), authorized in the Emergency Food Assistance Act of 1983 (7 U.S.C. § 7501 et seq.), provides low-income Americans with emergency food and nutrition assistance at no cost through state distributing agencies. The amount of food that each state receives is based on the number of unemployed persons and the number of people with incomes below the poverty level in the state. States provide the food to local agencies, such as food banks, that distribute it to local organizations such as soup kitchens and food pantries that directly serve the public. States also provide the food to other types of local organizations, such as community action agencies, that distribute the foods directly to low-income households. These local organizations distribute USDA Foods to eligible recipients for household consumption, or use them to prepare and serve meals in a congregate setting. Recipients of food for individual use, including people experiencing homelessness, must meet income eligibility criteria set by the states. Those individuals experiencing homelessness can receive immediate food assistance in the form of prepared meals in a congregate setting.

**Number of homeless individuals served, fiscal year 2018: N/A (TEFAP does not collect participant data)**

### Supplemental Nutrition Assistance Program

The Supplemental Nutrition Assistance Program (SNAP) provides nutrition assistance to eligible, low-income households via a monthly allotment of benefits placed on an Electronic Benefits Transfer (EBT) card, similar to a debit card, which is used to purchase food at authorized retailers. SNAP is the largest Federal nutrition assistance program.

If individuals do not have a permanent address, they may still qualify for SNAP. They can use the address of an authorized representative or the address of a shelter as a place to receive mail from SNAP. They can also pick up their mail from the local SNAP office.

SNAP allows participants to buy many types of healthy food at a grocery store that do not require special equipment to prepare and eat. A person cannot be turned down just because they do not have a place to cook or store food. SNAP can help homeless people buy healthy food to eat for times when they can't be at the shelter. People cannot be turned down just because they live in a shelter that serves meals.

SNAP also confers eligibility to other FNS programs such as the National School Lunch Program, TEFAP, and the Special Supplemental Nutrition Assistance Program for Women, Infants and Children (WIC).

**Number of homeless individuals served, fiscal year 2018: About 82,000 "households" participating in SNAP, on average, were identified as homeless at certification.**

## Department of Education

### Education for Children and Youth Experiencing Homelessness

To help ensure that all children and youth experiencing homelessness have equal access to the same free, appropriate, public education available to other children, the Education for Homeless Children and Youths program, authorized under Title VII-B of the McKinney-Vento Homeless Assistance Act, provides assistance to states to: (1) establish or designate an Office of Coordinator of Education of Homeless Children and Youth;

(2) develop and carry out a state plan for the education of children experiencing homelessness; and (3) make subgrants to local educational agencies to support the education of those children.

**Number of homeless students served, school year 2017-2018: 1,508,265**

## **Department of Health and Human Services**

### **Health Care for the Homeless Program, Health Resources and Services Administration (HRSA)**

HRSA's Health Center Program provides affordable, accessible, quality, and cost-effective primary health care services to vulnerable populations. In 2018, 298 health centers received funding under the Health Care for the Homeless Program. The Health Care for the Homeless Program provides comprehensive primary health care, including substance use services as needed, to people experiencing homelessness, including homeless children, youth, and Veterans. Comprehensive services include, but are not limited to, basic health services, diagnostic laboratory and radiologic services, preventive health services, emergency medical services, and pharmaceutical services. Outreach workers, case management, and eligibility assistance workers are a few of the other required services that are especially critical to ensure patients experiencing homelessness establish eligibility for all appropriate programs. Other additional optional services include mental health, oral health, optometry, recuperative care, environmental health, and occupational therapy, among others. Recipients of services include people who are experiencing homelessness or are doubled up, living in shelters, or on the street as well as those who are living in permanent supportive housing, transitional housing, or other housing programs that are targeted to people experiencing homelessness. HCH health centers are also required to provide temporary continued provision of services to certain formerly homeless individuals for no more than 12 months.

**Number of homeless individuals served by Health Care for the Homeless grantees, fiscal year 2018: More than 1 million patients (1,010,797)**

### **Projects for Assistance in Transition from Homelessness, Substance Abuse and Mental Health Services Administration (SAMHSA)**

Projects for Assistance in Transition from Homelessness (PATH) is a formula grant program administered by SAMHSA to provide financial assistance to states and territories to support services for individuals experiencing homelessness or at risk of homelessness and who have serious mental illnesses and co-occurring substance use disorders. Eligible programs and activities include: (1) outreach services; (2) screening and diagnostic treatment services; (3) habilitation and rehabilitation services; (4) community mental health services; (5) alcohol or drug treatment services; (6) staff training; (7) case-management services; (8) supportive and supervisory services in residential settings; (9) referrals for primary health services, job training, educational services, and relevant housing services; and (10) a prescribed set of housing services.

The formula allocates funds on the basis of the population living in urbanized areas of the state compared to the population living in urbanized areas of the entire United States. No state receives less than \$300,000 (\$50,000 for territories). Across the country, there are approximately 500 local PATH provider organizations.

**Number of homeless individuals served, fiscal year 2018: 121,561**

### **Mental Health Programs of Regional and National Significance - Homelessness Prevention Programs and Substance Abuse Programs of Regional and National Significance - Treatment Systems for Homeless, SAMHSA**

Through the two Programs of Regional and National Significance, the Center for Substance Abuse Treatment (CSAT) and the Center for Mental Health Services (CMHS) within SAMHSA fund the following programs:

- **Cooperative Agreements to Benefit Homeless Individuals (CABHI)** supports treatment and the development and/or expansion of local systems that provide permanent housing and supportive services. This includes integration of treatment and other critical services for individuals experiencing homelessness who have serious mental illness, serious emotional disturbance, substance use disorders, or co-occurring mental and substance use disorders. Target populations for this program include Veterans and individuals with serious mental illness and/or drug/alcohol addiction. CABHI also supports coordination and planning at the local level with state or local Public Housing Authorities, local mental health, substance misuse, and primary care provider organizations, the local Department of Housing and Urban Development-supported Continuum of Care (CoC) program, the state Medicaid Office, and the state Mental Health and Substance Abuse Authorities.

**Number of homeless individuals served, fiscal year 2018: 2,777**

- **Cooperative Agreements to Benefit Homeless Individuals for States (CABHI-States)** builds on the CABHI program by working with states to enhance or develop statewide plans to ensure sustained collaboration across public health and housing systems that will result in short-term and long-term strategies to support behavioral health services for individuals who experience chronic homelessness. The grantees work with state and local Public Housing Authorities and state Medicaid agencies to develop systematic, cost-effective, and integrated approaches to housing, treatment, and recovery support services for individuals experiencing homelessness who have serious mental illness, substance use disorders, or co-occurring mental and substance use disorders.

**Number of homeless individuals served, fiscal year 2018: 1233**

- **Grants for the Benefit of Homeless Individuals (GBHI)** supports the development and/or expansion of local implementation of a community infrastructure that integrates substance use disorder treatment, housing services, and other critical services for individuals (including youth) and families experiencing homelessness.

**Number of homeless individuals served, fiscal year 2018: 792**

- **Grants for the Benefit of Homeless Individuals—Services in Supportive Housing (GBHI-SSH)** expands and strengthens behavioral health treatment services for persons who experience chronic homelessness or Veterans who experience homelessness or chronic homelessness, who have substance use disorders or co-occurring mental and substance use disorders. SAMHSA seeks to increase the number of program-enrolled individuals placed in permanent housing that supports recovery through comprehensive treatment and recovery-oriented services for behavioral health.

**Number of homeless individuals served, fiscal year 2018: 345**

### **Runaway and Homeless Youth Program, Family and Youth Services Bureau (FYSB)**

FYSB awards nearly 600 grants to more than 300 community-based organizations through three grant programs that provide a range of services to address the needs of young people at risk of or experiencing homelessness.

- **Basic Center Program** works to establish or strengthen locally controlled, community, and tribal programs that address the immediate needs of runaway youth and youth experiencing homelessness and their families. Basic centers provide youth under age 18 with temporary emergency shelter, food, clothing, and

referrals for health care. Other types of assistance provided to youth and their families include individual, group, and family counseling, recreation programs, and aftercare services for youth once they leave the shelter. Basic centers seek to help youth avert crisis and reunite young people with their families, when possible, or to locate appropriate alternative placements. In addition to serving youth in shelter, grantees may offer home-based services for families with youth at risk of separation from the family, street-based services, drug abuse education and prevention services, and testing for sexually transmitted diseases, at the request of the youth.

**Number of homeless individuals served, fiscal year 2018: 20,810**

- **Transitional Living Program** provides longer-term residential shelter and support services to homeless youth between the ages of 16 and under 22. Services are provided for up to 540 days, or in exceptional circumstances, up to 635 days. Youth younger than 18 who pass the 635-day mark may stay in the program until their 18th birthday. Youth are provided with stable, safe living accommodations and support services that help them develop the skills necessary to move to self-sufficiency and independence. Living accommodations may be host family homes, group homes, and maternity group homes or supervised apartments. Skills training and support services provided include basic life skills and interpersonal skill-building, educational opportunities (vocational and GED preparation), job placement, career counseling, and mental health, substance use, and physical health care services. In maternity group homes, young people learn parenting skills, child development, family budgeting, health and nutrition, and other skills to promote their long-term economic independence and ensure the well-being of their young families.

**Number of homeless individuals served, fiscal year 2018: 3,080**

- **Street Outreach Program** provides educational and prevention services to runaways, street youth, and youth experiencing homelessness who have been subject to, or are at risk of being subjected to, sexual exploitation or abuse and severe forms of trafficking in persons. The program works to establish and build relationships between street youth and program outreach staff in order to help youth leave the streets. Support services that will assist the youth in moving and adjusting to a safe and appropriate alternative living arrangements include: substance use disorder and alcohol dependency treatment, counseling, information and referral services, individual assessment, crisis intervention, and follow-up support. Street outreach programs must have access twenty-four hours to local shelters that are appropriate for young people.

**Number of homeless individuals served, fiscal year 2018: 33,976**

- **The National Communication System (NCS) for Runaway and Homeless Youth**, which is currently operated by the National Runaway Safeline (NRS), makes over 100,000 connections a year through their hotline, online, and offline resources and services. Their toll-free services are available 24 hours per day, 365 days per year throughout the United States and U.S. Territories. The NCS connects runaway and homeless youth with their families, legal guardians, transportation services, and service providers. Additionally, the NCS provides prevention counseling and identifies resources for youth in crisis or those who are contemplating running away.

**Number of runaway and homeless individuals served, fiscal year 2018: 66,687**

## **Head Start**

The Head Start Program, which includes Early Head Start, is a comprehensive child development program that serves children from birth to age five, pregnant women, and their families. It is a child-focused, multi-generational program with the overall goal of increasing the school readiness of young children in low-income families. The children of families experiencing homelessness are categorically eligible for Head Start and are identified and prioritized for enrollment. The children of families experiencing homelessness can apply, enroll, and attend while documents are collected in a reasonable time frame. Head Start directly serves children experiencing homelessness from birth to five years old and provides children and their families with services related to nutrition, developmental, medical and dental screenings, immunizations, mental health and social services referrals, family engagement, and in some cases transportation. Many Head Start grantees serve families experiencing homelessness through home-based and center-based programs, both of which provide many supportive services to children and families regardless of their living circumstances.

**Number of families facing homelessness served, fiscal year 2017-2018: 51,696**

**Number of children facing homelessness served, fiscal year 2017-2018: 55,394**

## **Department of Homeland Security**

### **Emergency Food and Shelter Program, Federal Emergency Management Agency**

The Emergency Food and Shelter Program was created by Congress in 1983 to help meet the needs of people experiencing homelessness and hunger throughout the United States and its territories by allocating federal funds for the provision of food and shelter. The EFSP is governed by a national board that is chaired by a representative of FEMA and comprised of representatives from the American Red Cross; Catholic Charities USA; The Jewish Federations of North America; National Council of the Churches of Christ in the USA; The Salvation Army; and, United Way Worldwide. United Way Worldwide also serves as the National Board's Secretariat and Fiscal Agent.

The National Board allocates funds to jurisdictions (counties or cities) based upon a formula; in addition, a small portion of funds is allocated to State Set-Aside Committees, who then allocate funds to jurisdictions based upon the criteria they feel is most appropriate. Funds can be used for: food, in the form of served meals or groceries; lodging in a mass shelter or hotel; one month's rent or mortgage payment; one month's utility payment; transportation costs associated with the provision of food or shelter; minimal repairs to mass feeding or sheltering facilities for building code violations or for handicap accessibility; and supplies and equipment necessary to feed or shelter people, up to a \$300 limit per item.

**Services provided to assist those at risk of or experiencing homelessness, fiscal year 2018:**

**Meals Provided: 51,994,839**

**Nights of Lodging Provided: 3,104,070**

**Rent/Mortgage Payments Made: 75,400**

**Utility Payments Made: 82,205**

## **Department of Housing and Urban Development**

### **HUD's Homeless Assistance Programs**

HUD's Homeless Assistance Grants include both formula (Emergency Solutions Grants) and competitive (Continuum of Care) programs.

## Emergency Solutions Grants

The Emergency Solutions Grants (ESG) program is a formula program that provides funds to states, qualified metropolitan cities, urban counties, and territories. States must subgrant most of their ESG funds to units of general purpose local government and private non-profit organizations to carry out the program components. All recipients must consult with the public, including Continuums of Care, within their jurisdiction in determining how to allocate ESG funds. The funds may generally be used for five program components:

- 1. Street Outreach.** Essential services necessary to reach out to unsheltered individuals and families experiencing homelessness, to connect them with emergency shelter, housing, or critical services, and to provide them with urgent, non-facility-based care. Eligible costs generally include the costs of engagement, case management, emergency health and mental health services, and transportation.
- 2. Emergency Shelter.** Renovation of buildings to be used as emergency shelter, including labor, materials, tools, and other costs for renovation (including major rehabilitation of an emergency shelter or conversion of a building into an emergency shelter). Essential services for families and individuals in emergency shelters, including case management, child care, education services, employment assistance and job training, outpatient health services, legal services, life skills training, mental health services, substance use treatment services, and related transportation needs, are also included. Shelter operations, including the costs of shelter maintenance, rent, repairs, security, fuel, equipment, insurance, utilities, food, and furnishings, are eligible.
- 3. Homelessness Prevention.** Housing relocation and stabilization services and short- and medium-term rental assistance as necessary to help eligible individuals and families avoid moving to a shelter or places not meant for human habitation. Eligible costs generally include the costs of rental assistance (including rental arrears), rental application fees, security deposits, advance payment of last month's rent, utility deposits and payments, moving costs, housing search and placement, housing stability case management, landlord-tenant mediation, legal services, and credit repair.
- 4. Rapid Re-Housing Assistance.** Housing relocation and stabilization services and short- and medium-term rental assistance as necessary to help individuals or families living in shelters or in places not meant for human habitation move as quickly as possible into permanent housing and achieve stability in that housing. Eligible costs generally include the costs of rental assistance (including rental arrears), rental application fees, security deposits, advance payment of last month's rent, utility deposits and payments, moving costs, housing search and placement, housing stability case management, landlord-tenant mediation, legal services, and credit repair.
- 5. HMIS.** Eligible costs generally include the costs of participating in an existing Homeless Management Information System (HMIS) of the CoC where the activities are located. Victim service providers may also use the funds to create and use a comparable database.

**Number of homeless individuals served in residential programs, fiscal year 2018: 870,000**

## Continuum of Care Program

The Continuum of Care (CoC) Program is a competitive program that awards funds, through CoCs, to states, local governments, and nonprofit organizations to promote community-wide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, states, and local governments to quickly rehouse individuals and families experiencing homelessness while minimizing the trauma and dislocation caused to individuals, families, and communities by homelessness; promote access to and effective utilization of mainstream programs; and optimize self-sufficiency among individuals and families experiencing homelessness.

A CoC is a group of stakeholders with an interest in preventing and ending homelessness in a chosen geographic area that is organized to develop and operate a system to prevent and end homelessness in the chosen geographic area, to designate and operate an Homeless Management Information System for the CoC, and to plan for the CoC.

The CoC program awards funds to eligible organizations through five components:

- 1. Permanent Housing.** Permanent housing (PH) is community-based housing where there is no designated length of stay. Grant funds may be used for acquisition, rehabilitation, new construction, leasing, rental assistance, operating costs, and supportive services. This component includes permanent supportive housing for persons with disabilities (PSH) and rapid re-housing (RRH).
- 2. Transitional Housing.** Transitional housing (TH) facilitates the movement of individuals and families experiencing homelessness to PH within 24 months of entering TH. Grant funds may be used for acquisition, rehabilitation, new construction, leasing, rental assistance, operating costs, and supportive services.
- 3. Supportive Service Only (SSO).** Funds may be used for acquisition, rehabilitation, relocation costs, or leasing of a facility from which supportive services will be provided to unsheltered and sheltered people experiencing homelessness for whom the recipient or subrecipient is not providing housing or housing assistance. SSO includes street outreach.
- 4. Homeless Management Information System (HMIS).** Funds may be used by HMIS leads to lease a structure in which the HMIS is operated or as operating funds to operate a structure in which the HMIS is operated and for other costs eligible in 24 CFR § 578.57.
- 5. Homelessness Prevention.** Funds may be used by recipients in CoC-designated High-Performing Communities for housing relocation and stabilization services, and short- and/or medium-term rental assistance, as described in 24 CFR § 576.105 and 24 CFR § 576.106, that are necessary to prevent an individual or family from experiencing homelessness.

**Number of homeless individuals served, fiscal year 2018: 380,000**

### Youth Homelessness Demonstration Program

The Youth Homelessness Demonstration Program (YHDP) is a competitive demonstration program that awards funds to states, local governments, or nonprofit organizations within a chosen geographic area that falls within a CoC boundary to develop and implement a coordinated community approach to preventing and ending youth homelessness. The YHDP was awarded funding in FY 2016-FY 2019.

YHDP generally follows the CoC Program rules, but allows communities to experiment by seeking waivers to regulatory and statutory requirements if necessary to better serve youth and young adults experiencing homelessness. Selected communities must develop a coordinated community plan to prevent and end youth homelessness. All projects must be consistent with the community's coordinated community plan. Generally, a selected community can apply for the following types of projects:

- 1. Permanent Housing.** Permanent housing is community-based housing without a designated length of stay and includes permanent supportive housing and rapid re-housing.
- 2. Transitional Housing.** Transitional Housing facilitates the movement of individuals and families experiencing homelessness to PH within 24 months of entering TH.
- 3. Homeless Management Information System.** Funds are available to use the CoC's designated HMIS.

4. **Supportive Service Only.** Including projects dedicated to coordinated entry, housing search and placement services, case management, drop-in centers, legal services, or street outreach.
5. **Host Homes and Kinship Care.** Funds can be used to subsidize the increased costs to the family that are attributable to housing the youth or young adult, if the costs are eligible CoC Program costs.
6. **Shared Housing.** Funds can be used to provide tenant-based rental assistance for a youth or young adult to reside with a family so long as all CoC Program requirements are met.

**Number of homeless youth and young adults served, fiscal year 2018: Unavailable**

#### **HUD-VA Supportive Housing Program Vouchers**

HUD-VASH combines HUD Housing Choice Voucher (HCV) program rental assistance for Veterans experiencing homelessness with case management and supportive services provided by the VA at its medical facilities and in the community. Veterans experiencing homelessness are first screened by the VA medical facility and then referred to the partner public housing agency for the HCV eligibility determination and issuance of the voucher. The Veteran must agree to participate in case management to receive the rental assistance.

**Number of HUD-VASH vouchers leased as a proportion of all allocated and active HUD-VASH vouchers, fiscal year 2018: 91.48%**

### **Department of Justice**

#### **Transitional Housing Assistance Grants for Victims of Sexual Assault, Domestic Violence, Dating Violence, or Stalking Program, Office on Violence Against Women**

The Transitional Housing Assistance grants support programs that provide assistance to those who are homeless or in need of transitional or other housing assistance as a result of domestic violence, sexual assault, or stalking. Housing assistance is most commonly provided in the form of vouchers or rental subsidies. Transitional housing programs may offer individualized services such as counseling, support groups, safety planning, and advocacy services, as well as practical services such as licensed child care, employment services, transportation vouchers, telephones, and referrals to other agencies. Trained staff and case managers are available to work with clients to help them determine and reach their goals of permanent housing.

**Number of homeless individuals served, calendar year 2018: More than 3,000 victims fleeing domestic/sexual violence received a range of support services to help them locate, secure, and maintain permanent housing and economic stability.**

### **Department of Labor**

#### **Homeless Veterans' Reintegration Program (HVRP)**

The HVRP provides services to help Veterans experiencing homelessness obtain meaningful employment and to stimulate the development of effective service delivery systems to address the complex problems facing Veterans experiencing homelessness. Funds are awarded through competitive grants. Eligible entities include state and local Workforce Development Boards, Native American tribal governments (federally recognized), Native American tribal organizations (other than federally recognized tribal governments), for profit/commercial entities, public agencies, and non-profits, including community- and faith-based organizations. Veterans are provided with intensive case management, employment and training services, and critical linkages to supportive services within their communities. Job placement, training, job development, career counseling, and resume preparation are

among other services provided by grantees. Through HVRP, funding is also available for Stand Downs, local events typically held for one to three days during which a variety of social services are provided to Veterans experiencing homelessness. The Homeless Female Veterans and Veterans with Families Program (HFVWF) targets the subpopulation of female Veterans experiencing homelessness and Veterans with families experiencing homelessness. The Incarcerated Veterans' [Transition](#) Program (IVTP) targets another subpopulation, Veterans who are at risk of homelessness as they transition from [incarceration](#).

**Number of homeless individuals served (excluding Stand Down participants), program year 2018<sup>1</sup>:  
19,946** Department of Veterans Affairs

The United States Department of Veterans Affairs (VA) has made ending homelessness among Veterans a top priority. Programs include:

### **Health Care for Homeless Veterans Program (HCHV)**

HCHV connects Veterans experiencing homelessness to needed health care and social service programs via extensive outreach. HCHV outreach is conducted by clinical teams at 135 VAMCs, making it possible for Veterans to enter the network of VA-funded health care and social service programs with the end goal of eliminating homelessness. HCHV also provides residential treatment for mental health and substance use problems through contracts with community service providers, as well as long-term case management for Veterans in permanent housing who need ongoing support.

**Number of Veterans served with residential services, fiscal year 2018: Over 16, 100**

**Number of Veterans served with outreach, fiscal year 2018: Over 139,600**

### **Domiciliary Care for Homeless Veterans**

Domiciliary Care for Homeless Veterans is a supportive residential rehabilitation and treatment program for Veterans experiencing homelessness who have complex and co-occurring mental health and substance use disorders, medical conditions, and/or psychosocial needs. This intensive clinical care program emphasizes self-care and personal responsibility in addition to treatment programs for conditions that inhibit Veterans from exiting homelessness. It combines a wide range of programs for Veterans to solve the immediate issues of mental health and substance use while continuing long-term support in their transition to stability and housing independence.

**Number of Veterans served, fiscal year 2018: Over 7,300**

### **Compensated Work Therapy/Transitional Residence**

The Transitional Residence (TR) program is a work-based Psychosocial Residential Rehabilitation Treatment Program offering a therapeutic residential setting for Veterans involved in Compensated Work Therapy. The TR program provides a rehabilitation-focused residential setting for Veterans recovering from chronic mental illness, substance use disorders, and homelessness. TR provides a bridge between hospitalization or intensive outpatient treatment and successful community reintegration.

**Number of Veterans served, fiscal year 2018: Over 1,100**

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<sup>1</sup> HVRP operates on a program year (PY) basis. The data corresponds to PY 2018 (July 1, 2018 to June 30, 2019).

## **Housing and Urban Development – Veterans Affairs Supportive Housing (HUD-VASH) Services**

VA partners with HUD to serve Veterans experiencing homelessness through a housing subsidy provided through HUD's Section 8 Housing Choice Voucher program and community-oriented clinical case management provided by the VA. VA case managers provide a range of supportive services focused on helping Veterans to obtain and sustain housing in the community. The program targets the most vulnerable Veterans who will benefit from ongoing support and case management, utilizing the principles of Housing First.

**Number of Veterans who received case management services through HUD-VASH, fiscal year 2018: 91,415**

## **Homeless Providers Grant and Per Diem (GPD) Program**

GPD promotes the development and provision of supportive housing and/or supportive services with the goal of helping Veterans experiencing homelessness achieve residential stability, increase their skill levels and/or income, and obtain greater self-sufficiency. Program funds go toward the provision and maintenance of transitional housing facilities and service centers for Veterans (Grant Program), as well as for the operational costs for services provided to Veterans while in transitional housing (Per Diem Program). GPD Special Needs funding is available to serve five populations: women, frail elderly, the terminally ill, the chronically mentally ill, and individuals who have care of minor dependents.

**Number of Veterans served, fiscal year 2018: Over 30,000**

## **Veterans Justice Programs**

Incarceration is one of the most powerful predictors of homelessness, and VA has two programs intended to serve justice-involved Veterans. The goal of both programs is to provide timely access to VA services for eligible Veterans, preventing homelessness while providing resources to mental health and other clinical treatment aimed toward a lasting rehabilitation and independence for the involved Veterans. Veterans who are at risk of or experiencing homelessness, those in frequent contact with the criminal justice system, and those reentering the community from incarceration are the primary beneficiaries of these programs.

- **Veterans Justice Outreach (VJO)** provides outreach to Veterans involved with the local justice system (i.e., police, jails, and courts). Each VAMC has at least one VJO specialist who serves as a liaison between VA and the local criminal justice system.
- **Health Care for Reentry Veterans (HCRV)** provides pre-release outreach, assessment, linkage, and brief post-release case management services for incarcerated Veterans released from state and federal prisons. HCRV specialists across the country partner with state and federal correctional staff to identify incarcerated Veterans, perform pre-release assessments, and facilitate post-release linkages.

**Number of Veterans served, fiscal year 2018: Over 58,300**

## **Supportive Services for Veteran Families (SSVF) Program**

SSVF works with nonprofit organizations to provide social services for low-income and very low-income Veterans and their families currently residing in or transitioning to permanent housing. Funding to these organizations provides outreach and case management to families to help them through the process of accessing all VA benefits and mainstream benefits for which they are eligible. These benefits include health care, housing counseling services, temporary financial assistance, transportation services, child care services, and legal services. This program allows for families (defined as a single person, or a family in which the head of household or the spouse

of the head of household is a Veteran) to receive guidance and case management to access a full range of community benefits available to maintain stable housing.

**Number of Veterans served, fiscal year 2018: Over 125,800**

#### **Other VA Programs**

- **Community Resource and Referral Centers (CRRC)** are collaborative, multi-agency programs that provide “one-stop” access to housing, health care, job development programs, and other VA and non-VA benefits through a partnership with local community-based homelessness providers and other federal and state partners engaged in providing services to people experiencing homelessness. All centers are located in community settings that facilitate access to services for Veterans and their families.

**Number of Veteran visits, fiscal year 2018: Over 78,000**

- **Stand Downs** are held by community agencies in partnership with VA to outreach and provide service to Veterans experiencing homelessness. Stand Downs are 1- to 3-day events providing health screenings, VA and Social Security benefits counseling, and referrals to a variety of other necessary services, such as housing, employment, and substance use disorder treatment.

**Number of Veterans served, fiscal year 2018: Over 81,000**

- **Veterans Benefits Assistance Outreach Program** funds Homeless Veterans Outreach Coordinators (HVOCs) at 20 regional offices who are dedicated full time to providing access to VA benefits and information through outreach efforts to Veterans at risk of or experiencing homelessness. VBA has Homeless Veterans Claims Coordinators (HVCCs) in the remainder of their regional offices to develop and process claims for the purposes of specially labeling, controlling, and expediting the processing of claims from Veterans at risk of or experiencing homelessness, and reporting on prioritization of homeless claims activities. Both positions work with Veterans involved with the criminal justice system.

**Number of Veterans served, fiscal year 2018: Nearly 28,000 homeless Veterans and over 3,000 justice involved or incarcerated Veterans.**

- **Homeless Veterans Dental Program** works with VA-sponsored and VA-partnered homelessness rehabilitation programs across the country to increase access to quality dental care.

**Number of Veterans served, fiscal year 2018: Over 18,200**

- **Homeless Patient Aligned Care Team (H-PACT)** provides a coordinated “medical home” specifically tailored to the needs of Veterans experiencing homelessness. At selected VA facilities, Veterans are assigned to an H-PACT care team that includes a primary care provider, nurse, social worker, homeless program staff, and others who provide medical and mental health care, case management, housing and social services assistance, to provide and coordinate the health care they may need while assisting them in obtaining and staying in permanent housing.

**Veterans enrolled: Over 18,000**

- **Homeless Veterans Community Employment Services (HVCES)** consists of Vocational Development Specialists that are embedded in homeless programs at VA medical centers (VAMCs), complement

existing medical center-based employment services, and are a bridge to employment opportunities and resources in the local community. HVCES provides a range of site-specific employment services.

**Number of Veterans served, fiscal year 2018: Approximately 7,600 Veterans exited homeless residential programs with employment (Grant & Per Diem (GPD), Compensated Work Therapy/Transitional Residence (CWT/TR), and Domiciliary Care for Homeless Veterans (DCHV)).**

- **Preventing Veteran Homelessness through Mortgage Foreclosure Assistance** works with servicers to assist borrowers with VA guaranteed loans to avoid foreclosure.

**Number of Veterans served, fiscal year 2018: Not available**

- **CHALENG Program: The Community Homelessness Assessment, Local Education and Networking Groups Program for Veterans** enhances coordinated services by bringing VA together with community agencies, and other federal, state, and local governments that provide homeless services to assess the needs of homeless Veterans and develop plans to meet those needs. CHALENG includes two components: CHALENG meetings, and the CHALENG survey, which includes the perspective of Veterans as well as VA and community providers.
  - In 2018, 3,950 individuals completed a CHALENG Participant survey. This included 2,229 homeless Veterans and 1,721 non-homeless Veterans (VA staff, state and public officials, community leaders, volunteers).
  - Twelve percent of the homeless Veteran survey participants were women. Forty-seven percent of all homeless Veteran participants were between the ages of 45-60 with another 32 percent 61 or older. Fifty-one percent were non-White; nine percent identified their ethnicity as Hispanic/Latino.
  - There were 1,721 provider and other stakeholder participants. Of these, 46 percent were VA staff, two percent were other Federal employees, 34 percent were state/local official or community providers, and 18 percent were interested members of the community.
  - Eight of the top ten unmet needs were the same for male and female Veterans: child care, credit counseling, discharge upgrade, family reconciliation assistance, financial guardianship, housing for registered sex offenders, and legal assistance in two categories: child support and to prevent eviction/foreclosure. Two needs that were in the top ten unmet for male Veterans (but no female Veterans) were legal assistance to help restore a driver's license and legal assistance for outstanding warrants and fines. Conversely, dental care and drop-in center/day program were on the female Veterans' top ten unmet list, but not on the male Veterans' top ten unmet needs list.
  - Eight of the top ten met needs were also the same for male and female Veterans: medical services, testing and treatment in three separate areas (TB, Hepatitis C, HIV/AIDS), case management, services for emotional or psychiatric problems, clothing, and health and wellness. Two needs that were in the top ten met for male Veterans (but not female Veterans) were personal hygiene and medication management. Conversely, substance abuse treatment and clothing were on the female Veterans' top ten met list only.
  - Consistency across time: for male Veterans, nine of the top ten unmet needs were the same in 2017 and 2018. Eight of the top ten unmet needs for female Veterans were also the same.
  - Similarly, six and nine of the top ten met needs for male and female Veterans respectively were the same between 2017 and 2018.

- Consistent with 2017 data and with the previous 18 years of CHALENG data, met needs primarily reflect services that Veterans Health Administration (VHA) can provide directly, and unmet needs are primarily services that require community partnership to meet. This consistency underscores the importance of collaboration between federal, state, local, and community partners to meet the needs of homeless Veterans to successfully end homelessness.
- **National Call Center for Homeless Veterans** provides 24-hour assistance to Veterans experiencing homelessness, to those at risk of homelessness, and to community organizations with the goal of connecting them to local resources for help in times of crisis.

**Number of Veterans served, fiscal year 2018: Over 134,400 calls; over 56,300 referrals to the VA medical center point of contact.**

## **U.S. Interagency Council on Homelessness**

USICH coordinates and catalyzes the federal response to homelessness, working in close partnership with senior leaders across its 19 federal member agencies. By organizing and supporting leaders such as Governors, Mayors, Continuum of Care leaders, and other local officials, USICH drive action to achieve the goals of the federal strategic plan to prevent and homelessness--and ensure that homelessness in America is ended once and for all.