

**HOUSING FOR HEROES: EXAMINING
HOW FEDERAL PROGRAMS CAN
BETTER SERVE VETERANS**

HEARING
BEFORE THE
SUBCOMMITTEE ON
INSURANCE, HOUSING AND
COMMUNITY OPPORTUNITY
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HOUSING FOR HEROES: EXAMINING HOW FEDERAL PROGRAMS CAN BETTER SERVE VETERANS

Friday, September 14, 2012

U.S. HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON INSURANCE, HOUSING
AND COMMUNITY OPPORTUNITY,
COMMITTEE ON FINANCIAL SERVICES,
Washington, D.C.

The subcommittee met, pursuant to notice, at 9:35 a.m., in room 2128, Rayburn House Office Building, Hon. Judy Biggert [chairwoman of the subcommittee] presiding.

Members present: Representatives Biggert, Hurt, Duffy, Dold, Stivers; Gutierrez and Waters.

Also present: Representative Green.

Chairwoman BIGGERT. This hearing of the Subcommittee on Insurance, Housing and Community Opportunity will come to order.

Without objection, all Members' opening statements will be made a part of the record. I will now recognize myself for an opening statement.

Good morning, and welcome to today's hearing entitled, "Housing for Heroes: Examining How Federal Programs Can Better Serve Veterans."

I welcome our witnesses today, and I thank all who traveled to participate in today's discussion. President Calvin Coolidge once said, "The nation which forgets its defenders will be itself forgotten," and I couldn't agree more.

For our Nation's heroes returning home from duty, readapting to civilian life is not always easy. I have heard countless stories of hardship from veterans who have attended our job fairs or who have worked with me to improve veterans health care options by getting Federal approval for a new veterans outpatient clinic in my area in Illinois. Whether it is because of post-traumatic stress or trouble finding work, many veterans in the Chicago area and across the Nation are experiencing unstable living conditions or, worst of all, homelessness.

According to the U.S. Department of Housing and Urban Development, on one night in January of 2011, over 67 veterans were homeless. The U.S. Department of Veterans Affairs determined that throughout 2010, more than 144,000 veterans experienced homelessness. Veterans make up one-fifth of our Nation's homeless population. The bottom line is that even one homeless veteran is one too many.

There are many contributing factors, but data and research point to stable housing as a necessary foundation to help veterans overcome any of the other challenges that they may face. Some safety nets and government assistance programs do exist, and more recently, targeted housing programs for veterans, such as the HUD-Veterans Affairs Supportive Housing (HUD-VASH) Program are a step in the right direction. Congress also passed the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act in 2009, which commissioned a national plan to end homelessness.

The current plan sets a goal of ending veterans' homelessness by 2015. As the cochair and cofounder of the Congressional Caucus on Homelessness, that is a worthy goal which I support wholeheartedly.

Beyond government programs and assistance, countless charitable organizations also provide services and housing to veterans. In fact, I have heard that occasionally when funding is short, the employees of these organizations have reached into their own wallets to help a veteran pay a utility bill, the rent or a security deposit for an apartment. Not to everyone's surprise, there is always room for improvement in any program, but particularly Federal programs. That is why we are here today, to examine barriers that homeless and low-income veterans face in securing housing assistance and services from Federal programs. We will discuss findings and suggestions offered by the Government Accountability Office, which has issued a few reports about Federal veterans programs where there is room for improvement. We will also explore other suggestions to improve Federal agency collaboration, program efficiencies, and the administration of homeless housing and services for veterans.

This week, we are working to advance some of those suggestions in the form of legislation to help disabled veterans, H.R. 6361, the Vulnerable Veterans Housing Reform Act of 2012, introduced by Mr. Heck. For purposes of Section 8 and public housing assistance, the bill would exempt from a veteran's income service-related disability benefits and expenses related to in-home aid and care. This bill mirrors language in the Affordable Housing and Self-Sufficiency Improvement Act of 2012, the broader legislation to reform HUD, Section 8 and public housing programs, which this subcommittee passed in February.

We are also working on a bill introduced by Mr. Green, whom I would like to commend for all of his work to help our veterans. H.R. 6381, the Housing Assistance for Veterans Act of 2012 (the HAVEN Act), would allow HUD to award grants to qualified organizations to rehabilitate and modify the homes of disabled or low-income veterans. I look forward to continuing to work with both gentlemen so that we can see that these bills can be signed into law. I would also like to recognize and thank Chairman Bachus for his hard work on these important measures.

While we can never repay our veterans for the selfless sacrifices they have made to defend the liberties we enjoy, we can work on ensuring that they have a place to call home when they return. It is a part of the American dream that they have paid a high price

to safeguard, and they should have the opportunity to experience the blessings that dream represents.

And with that, I would like to recognize the ranking member, Mr. Gutierrez, for an opening statement.

Mr. GUTIERREZ. Thank you for yielding, Madam Chairwoman, and thank you for holding this hearing. Having homeless people in our country, the richest country in the world, is shameful. Families with children, and elderly and mentally ill individuals, going without a roof over their heads, without shelter, is simply outrageous, but as outrageous and inhumane as that is, it is simply unacceptable to have homeless veterans.

Beyond unacceptable, it is a tragedy to see our warriors, our heroes, sleeping on our streets. I have seen estimates—and nobody knows for sure the extent of this problem—that as many as 40 percent of the homeless in the United States are, indeed, veterans. President Obama, Veterans Affairs Secretary Shinseki, and HUD Secretary Donovan have committed this Administration's effort to the lofty goal of ending veteran homelessness by the year 2015. It is not a partisan posture, and it is not a hollow campaign season promise. Rather, it is an achievable goal that can be reached if Members in both parties commit themselves.

Madam Chairwoman, we have a duty to assist our President and this Administration and our Government to bring about the end of this national shame. This is not creating new dependency but, rather, addressing the needs of people who have given so much of themselves already. We should be assisting our veterans and organizations that support them and demand accountability of our government programs that already exist.

In that context, I look forward to our witnesses' testimony about what they consider to be the obstacles that homeless veterans face in obtaining needed housing assistance and services from Federal programs, and the efforts by Federal agencies to collaborate in administering housing and services for homeless veterans in a more effective and efficient manner. I look forward to testimony about the HUD-VASH Supportive Housing Program, does it have enough homeless shelters and vouchers? What kinds of administrative difficulties have they encountered and what are the plans to address those? What role do not-for-profit service organizations play in the process, and is the Federal Government assisting them to maximize their potential contributions?

I am also interested in hearing if there is an understanding of the need to have a comprehensive holistic strategy to attack veterans' homelessness. Are we appropriately dealing with the issues of employment, mental and physical health, continuing education, police and community relations, and other social and cultural needs of veterans in the context of putting an end to veteran homelessness? Are we paying enough attention to the special needs of disabled veterans, especially wheelchair-bound veterans and of women veterans as it relates to housing and homelessness? I look forward to hearing from our veteran witnesses and their stories about the impact of homelessness in their lives and the lives of their loved ones. I am certain that the distinguished panel of witnesses will bring specific suggestions to improve the Federal homeless veterans housing program, and I am pleased to note that at least

three of the witnesses come from Chicago, and I give them a special welcome this morning.

Madam Chairwoman, I also look forward to hearing from our colleague, Congressman Al Green. Congressman Al Green's bill, H.R. 6381, the Housing Assistance for Veterans Act of 2012, proposes to create a pilot program at HUD in coordination with the VA to rehabilitate and modify disabled and low-income veterans' primary residences, working with and providing grants to veteran service organizations. I think it is a great program that we should take a serious, serious look at. I understand there is much more to cover in this hearing, and this is only another step in the examination of this critical issue.

Thank you, and I yield back the balance of my time.

Chairwoman BIGGERT. Thank you, Mr. Gutierrez.

Mr. Green, you are recognized for 5 minutes.

Mr. GREEN. Thank you very much, Madam Chairwoman.

I especially thank you, Madam Chairwoman, for holding this hearing, and I thank you for the many efforts that you have made as well as your successes in helping our veterans. You have been a real friend to veterans, and I greatly appreciate all you have done.

I also especially thank Mr. Gutierrez, who has demonstrated through the years a commitment to helping our veterans and who has been of great benefit to me as we have tried to move this bill forward.

Former Chairman Frank, now Ranking Member Frank, and Chairman Bachus are to be thanked as well. The two of them have been very helpful with this piece of legislation, and my hope is that they can hear the sound of my voice because I really wanted to thank them to make sure that they know how much we appreciate what they are doing on behalf of our veterans.

I, of course, have to thank the veterans themselves. Madam Chairwoman, it is a worn-out cliché, but it is still true, and it merits saying, we are the land of the free because we are the home of the brave, and we can never forget this. Our troops go to distant places. They don't go because they desire to go to a specific location. They do what they are told. Many of them do not return the way they left, and when they return, the very least a grateful nation can do is make sure that they have good, decent housing, housing that is appropriate for their needs.

Many of them find themselves in facilities that are not properly modified to meet their needs. We owe it to them to make sure that their needs are met. That is what this piece of legislation will help do. I am very confident that this legislation is going to be of great benefit to our veterans, to many who would not receive help otherwise.

I would also like to thank two organizations: VetsFirst; and Rebuilding Together. These organizations have been working together, and are committed to veterans. I am committed to working with them to help get this legislation through. They have been great advisers. They have helped with some of the nuances that they understand because they have hands-on experience with our veterans. They know the needs, and they have echoed these needs, and we have tried to capture these needs in this legislation.

We find currently that we have about 864,000 veterans with service-connected disabilities. Now, this depends on who is counting and how you count. The count could go as high as a million, depending on who is counting and how you count. We also understand that these needs can be met, and I would add now that they must be met. I would also add that these organizations that I have mentioned, VetsFirst and Rebuilding Together, not only provide a service in that they can take grant moneys and they can use this money to remodel homes for veterans, but they also provide volunteers, and these volunteers are giving us hours of labor at no cost. This labor helps us to leverage the dollars that we receive. In fact, for every \$1 in Federal funds, we can leverage about \$3, for every one. So we have a three-to-one ratio. And we also know that these organizations are willing to match dollars. They will match each of these grants, and they do so with no less than 50 percent of the grant. So we are helping veterans. We have NGOs that are available to do this.

Volunteerism is alive and well. Bipartisanship is alive and well. This bill should be alive and well, and I hope that it will move forward rather quickly so that we can immediately, if not sooner, help those who are in dire need of the help that we can provide. This is not beyond our reach. This is within our grasp. It is available to us here. We only have to translate it into meaningful legislation that can move quickly and get to those in dire need of what we can provide.

Madam Chairwoman, I would like to close as I began. I thank you. It means a lot to me that you have been willing to do this.

Ranking Member Gutierrez, I thank you, and today I am not appealing, I am not requesting; I am not too proud to beg for help for our veterans.

I yield back.

Chairwoman BIGGERT. Thank you, Mr. Green.

We will now turn to our panel of witnesses, and let me just say that, without objection, your written statements will be made a part of the record, and you will each be recognized for a 5-minute summary of your testimony.

I am delighted to have three veterans who really know what is going on at this time in housing. First, we have Ms. Cassandra Flanagan from Philadelphia, Pennsylvania. Welcome.

Second, Mr. Caesar Hill from Chicago—we are always happy to recognize our home State people here.

And third, Ms. Babette Peyton from Chicago. It turns out that I have known Babette for quite a while, and I am really happy to see her. I haven't seen her in the last few years because she has been busy in the military.

So, thank you all for being here.

And with that, we will start with Ms. Flanagan.

You are recognized for 5 minutes for your opening statement. If you would turn on your microphone there so that it lights up green, and pull it kind of close so we can hear.

STATEMENT OF CASSONDRA FLANAGAN, VETERAN, UNITED STATES ARMY, PHILADELPHIA, PENNSYLVANIA

Ms. FLANAGAN. Madam Chairwoman, I want to thank you for listening to what I have to say as a veteran. I want to thank Mr. Green and Mr. Gutierrez as well. Thanks for having me.

I enlisted in the United States Army in 1999 at the age of 17-years old. I came with a small suitcase, and my first duty station was Korea. I was ordered to the 4th Infantry Division at Fort Hood, Texas, and later I deployed to Iraq for the first time from a unit in that division. I received orders for Iraq a few months later, after reenlisting and being reassigned to Fort Drum, New York.

Once my term of service was completed in 2006, I returned home to Sicklerville, New Jersey. It is a suburb of Camden, New Jersey. I returned home with a DD214, a beautiful 3-year-old daughter, a set of divorce papers, a host of latent internal writhes, and a lot of excitement about the new era in my life. I was pretty happy because I was a veteran. I planned to use all my skills and talents in a meaningful way. I decided to get an associate's degree from the local community college. After graduating, I was accepted to Temple University.

You asked why it is difficult to secure housing. I would say that during those 6 years of college, I rode my bicycle to school. I worked odd jobs. I had short-term employment. I begged teachers to let me bring my daughter to class. I ate ramen noodles. In general, I lived a college life. I felt deeply blessed and grateful that I had the Montgomery G.I. Bill at my disposal. Oftentimes, it was my sole documented source of income—\$1,000-plus of tax-free money awarded by the government on a monthly basis. I secured housing by begging rental managers and landlords to accept this as proof of income. I arrived with child in tow, brought in cash, set up furlough accounts, and whatever other requirements property managers requested. During the summer months, they were especially difficult because I got in the habit of saving my income tax and using that for my month's rent during the summer because the GI bill rates are lower, when school sessions are less.

If you ask me what suggestions do I have to improve outreach, I would say before I found my way to the Philadelphia Veterans Multi-Service & Education Center (PVMSEC), I didn't have enough income. Disability and other government income cannot be claimed as income on a finance assessment document, so that income I couldn't prove. No organization actually wants to help you until you have an eviction notice in hand.

The individuals who helped me the most were my mother, sister, and other individuals from the community. The maintenance man at my apartment complex, Mr. Charles, would catch fish from the ocean and bring it to me once a week, so I knew my meat portion was already accounted for when I had to go grocery shopping. A legal team, Scott Marcus and Associates, made payment arrangements and things like that so I could maintain housing even while I didn't have income.

But most importantly was the Philadelphia Veterans Multi-Service & Education Center. They provided me with case management,

housing assistance, security, and first and last month's rent. They helped me get beds, food vouchers.

I would say partnership and teamwork, at least locally, would be a big help. All the veterans service organizations should share some kind of computer system maybe or at least have monthly classes where employees are required to inform each other of what other organizations experience as far as providing veterans services, maybe even an awareness of what resources remain in each system for the fiscal year so veterans are given proper direction, even when turned away from one organization.

Veterans should be working at those places designed to assist veterans. Organizations should have a clear process that is typed up and given to a veteran so that they don't feel like they are waiting forever for assistance. Case managers should have company travel cards because veterans can't always travel, don't have public transportation. Complete furniture assistance, because once you get housing, it doesn't mean that you have actually something to put in it.

I want to say that I am grateful that I received help from the veterans service center. I know it would improve the lives of other veterans if some changes were made. Overall, PVMSEC was truly a blessing to me. They provided me with affordable housing. I would specifically like to thank my case manager, Aronda Smith, and Jackie Ries, who is their coordinator. Thank you.

[The prepared statement of Ms. Flanagan can be found on page 58 of the appendix.

Chairwoman BIGGERT. Thank you so much.

Mr. Hill, you are recognized for 5 minutes.

STATEMENT OF CAESAR HILL, VETERAN, UNITED STATES NAVY, AND COMMUNITY AFFAIRS MANAGER, CATHOLIC CHARITIES OF THE ARCHDIOCESE OF CHICAGO, CHICAGO, ILLINOIS

Mr. HILL. Good morning. Chairwoman Biggert, Ranking Member Gutierrez, and Representative Green, thank you. I am here today to appeal to you to intensify and support all programs and services as they relate to the betterment of my fellow veterans, especially with regard to housing.

In 2010, Secretary of Veterans Affairs Eric Shinseki set some bold new plans for addressing homelessness of veterans. His plans included the reduction from 131,000 veterans in 2008 to 59,000 in 2012.

Hand-in-hand with housing is a need for employment. The unemployment rate for veterans who served on active duty in the United States Armed Forces at anytime since September 2001, a group referred to as the Gulf War II era veteran, was 12.2 percent in 2011. And that is according to the U.S. Bureau of Statistics. There is also a need to examine service-connected disability benefits. I do not believe this is asking too much, but is only appealing for what is decent and deserved.

All my life I have done it the American way, close, loving, caring, supportive family, religious upbringing, college graduate, and plenty of professional employment prior to my enlistment in the United States Navy in 1977, and thereafter, I received a Naval commission

until 1983. I returned home and eventually earned a commission, an appointment under then-Mayor Harold Washington as district manager, Chicago Department of Human Services, until the mayor's death in 1987.

Thereafter, I was able to bridge the employment gap, but there came a series of layoffs always seemed geared toward budget constraints or budget program cuts and the like. The bridge was always gapped, but in 2004, I faced yet another systemwide layoff. And despite savings and a valiant effort to bridge the gap, it was not to be. I effectively became homeless. Yes, it was very devastating to me, but at that exact moment, I realized this is not just about me, and I also remembered two very important rules of the Hill household: rule number one was that you never give up; and rule number two was never forget rule number one.

I stayed at the Lincoln Park Community Shelter in Chicago, a very special place. Its challenging and vigorous programs call for accountability in accomplishing short- and long-term goals toward economic stability and permanent housing.

So I left there, and I went to a place, wonderful place, the St. Leo Campus for Veterans, the first of its type, large-scale, single-population housing for formerly homeless veterans. The stability that is provided at this wonderful facility adds to the camaraderie of veterans, rest, respite, and stability, all made possible through the Catholic Charities of the Archdiocese of Chicago. Other services there include case management, programs that address the challenges of drug/alcohol abuse, and physical and mental disabilities. There is supportive employment through our Veterans Employment Program, an enterprising program, the Veterans Painting Enterprise.

The need continues and the recommendations are that we need more HUD-VASH vouchers and the shortening of the process in order to cut down on long waiting time; the assurance of hiring of veterans through the Department of Labor Office of Federal Contracts Compliance; housing provided through properties owned by the Federal Government; and streamlining the process for determining service-connected disability ratings and decreased disparity between States in the amount of benefit payments.

The Department of Veterans Affairs Office of Inspector General found that the annual average disability payment in Illinois was \$6,961 and in New Mexico it was \$12,004. The national average payment was \$8,890. And also, we need to determine civilian employment opportunities as they relate to military jobs prior to their disembarkation. I would like to thank you for the time and God bless America.

[The prepared statement of Mr. Hill can be found on page 67 of the appendix.]

Chairwoman BIGGERT. Thank you, Mr. Hill.

Ms. Peyton, you are recognized for 5 minutes.

STATEMENT OF BABETTE PEYTON, VETERAN, UNITED STATES ARMY, AND RESIDENT, CATHOLIC CHARITIES ST. LEO RESIDENCE, CHICAGO, ILLINOIS

Ms. PEYTON. First of all, I am honored to be here, Chairwoman Biggert, Ranking Member Gutierrez, Congressman Green, and

members of the subcommittee. I am a little nervous here. Bear with me.

Before I start and run out of time, I want to thank Catholic Charities so much. They have just been a godsend for me, who has been independent most of my life. Ms. Higgins, who is here with us, and the other people from USA Catholic Charities at home; Bertel Smith, who is with our employment program; my case manager and all the case managers really at St. Leo, where I reside now, including Ms. Pettigrew, and over at the VA, the VA has played a very important part in my life; and a homeless person in the area is Ms. Linda Lyons; and another gentleman who is the head of that, the name is escaping me, but I will come back to that. I just want to say thank you for everything.

I am honored to be selected to come here. And let me just go—I was number one in my battalion and received my first stripe during basic training. God has been a part of my life since the beginning of my life, and He continues to be there, and I think He had something to do with me being selected, praise God.

My job during the term—I had two jobs when I was in my duty station, but they both had to deal basically with traumatic things. One was with the children, and I used my skill set as a dancer to work with these kids who couldn't speak because there was something traumatic, and by the time they got finished, they were speaking because they didn't want me to leave.

And then they put me as part of the Polytrauma Medevac Team, where I worked with people who came in, wounded soldiers who were trying to be stabilized, where we sent them back to the United States. It was rough. Some came with arms gone, legs gone, faces, sides. I saw death on a regular basis.

But I just want to say that it gave me pride to be able to do that, and I was in a lot of pain myself during that time because I was injured early in the military. I decided to stay in there because we had things going on in this world, and like was said, when you volunteer for the military, it is different than even getting married, you really say I do, and your life could be required of you. Whenever there is something going on, most of you probably remember 9/11, we can't say, I don't want to go out, I don't want to be—we go. We follow orders. We go where it is necessary. We do what is necessary because we know freedom is important, and I am just going to say, I wish they never changed their bases across the country because you see they attacked us here. I think they need to rethink that.

Okay, going back into this. You have my testimony, so if I deviate a little bit from that, I hope you don't mind. But I just wanted to let you know how I became homeless. From a long-term injury while I was in the military, I ended up with paralysis on the left side that I have right now. I am in a wheelchair. I thought I knew something about disability and being in a wheelchair, well, let me tell you, I didn't know anything until I got into this chair. So please make things veteran-friendly, think about stairs, think about access into places. And you need to have a veteran who is in a wheelchair—I am going to say a veteran because I want veterans to get jobs—for all these building projects, not just to have

the architects, but have consultants and dealing with that, we talk about housing.

I got a chance to go to St. Leo. Some veterans told me about when it I was in the hospital. But guess what? When I left the hospital, before I left, I got my application in. They helped me to get my application in to St. Leo. They told me the waiting list was over 400. I didn't care because I didn't have an option. Without family to take you in, when you leave the hospital, you have to go to a nursing home, and that is where I went. I was in the nursing home for quite awhile and was headed to a hospice. I was writing my obituary. I was—anyway, my time is almost over. I would just like to say this: I am an archer right now. I help veterans become heroes at home.

I would like to help you with things, and since this is the Subcommittee on Insurance, Housing and Community Opportunity, I would like to say that where I am at St. Leo, I see a lot of veterans who pass. They are not able to have a regular burial. The flag is nice. The cemetery is nice, but they don't have insurance. If they don't have money, many times people get involved, if they don't have money to have a funeral, so we are waiting and waiting for people to get funerals, and I know the issue is money, so I would like to see something being done in terms of that, okay?

In terms of teeth, I am an archer. I am a wheelchair archer. I shoot with my hand and my mouth, and so my teeth are important. But you know what? I can't get it because my disability is not 100 percent. As a matter of fact, I am still fighting to get it back after all these years. And, guess what, did you know that you can die from having a tooth problem? I didn't know that. I would like to see a veteran opportunity fund for veterans who lose licenses, et cetera, where they can keep them for employment and stuff. I would like to see timely Social Security Disability, I never got disability from Social Security because my numbers weren't in order, and I don't want to keep going on because I see the time is gone. I am mindful of the time.

I just want to say thank you so much again, Congresswoman Biggert, Congressman Gutierrez, Congressman Green, and all the other members of the subcommittee, and to Catholic Charities and my fellow veterans. Anytime you see a veteran, please take time, even if they are members of your household, to say thank you for your service, thank you for your service, and thank you for your time, and many of you are veterans' heroes, I love you. Thank you. My name is Babette Peyton.

[The prepared statement of Ms. Peyton can be found on page 77 of the appendix.]

Chairwoman BIGGERT. Thank you. Thank you so much.

We will now begin the questioning.

Each Member will have 5 minutes to ask questions.

I will begin by yielding myself 5 minutes.

Ms. Flanagan, in your testimony, you say that no organization would help you until you had an eviction notice in hand. Can you explain why you would have to have that or you would be ineligible for housing assistance?

Ms. FLANAGAN. I noticed you mentioned in your opening statement about HUD-VASH, that program as well you have to have an

eviction notice or at least the threat of an eviction notice typed from your landlord or the property manager in order to receive even HUD-VASH, and all the other like local programs, State-funded programs that I ran into while I was trying to make phone calls to try to stay at least where I was at just for a little bit more time.

Chairwoman BIGGERT. So what you are saying is you have the housing, but then you can't pay the rent, and so then you have to have—it is not that you want to move to someplace else? It is to stay in that particular housing?

Ms. FLANAGAN. It is to stay where you are at, yes, or to even be considered homeless, that is like the beginning of the process is to have an eviction notice.

Chairwoman BIGGERT. Okay, thank you.

Mr. Hill, in your written testimony, you say that you were homeless for a period of years following a layoff and a series of unfortunate events. However, you also state that you never give up, which is great. How much of a factor has your determination to succeed played a role in your success?

Mr. HILL. The rules of “never give up” are forever with me from my family. It was very important that I persist through the 18 months of homelessness. It wasn't about me at the shelter. We were a group who used the interdependency of the group to help lift each other up. And, I left there for St. Leo, and it represented a reversal of circumstances in my life. This development by Catholic Charities is nothing new. They have been helping veterans since right after World War I. Obviously, they remain on the frontline, and through these programs and services, through developments like St. Leo, they gain higher ground on the war on poverty. No one should have to join our military services and, whether they fight on foreign shores or otherwise, come home and then have to face another war, a war on poverty, and that war has just as many victims as any other war. So where veterans are concerned, it is not right that this happens to them.

Chairwoman BIGGERT. Thank you.

And then Ms. Peyton, you highlight the importance of outreach for low-income, disabled, and homeless veterans. Before I ask you that question, I saw a picture of how you shoot archery, and it is fantastic. You humbly neglected to mention that you have a score of 299 out of 300, and you have won many, many awards at that. So, congratulations.

Ms. PEYTON. Thank you very much, Congresswoman Biggert.

Chairwoman BIGGERT. What kind of outreach would have been most helpful to you when you came back? You said you had a third-floor apartment you couldn't get to because you couldn't walk up the stairs. What did you do immediately?

Ms. PEYTON. I was in the hospital, so I was kind of out of it, but let me tell you the things, the logistics that I really faced, the barriers that I faced that were very difficult. One is having either some type of program, I won't use the word program, having assistance in getting myself moved out from there. I didn't have the money for that. I was able to get my stuff in storage because some people went there. I don't know what went into my storage, keeping that going. Transportation for someone in a wheelchair is really, really rough; that is a big thing, transportation, transportation,

transportation everywhere. If you have transportation, that means you won't necessarily have to go into a nursing home.

Maybe you talk about housing, helping have some places for veterans to go because mentally, I am going to tell you, Congresswoman, the thought of being homeless when you come from an independent state is devastating. So assistance to get into places like St. Leo without having to have that kind of money because if you don't have it, if you don't have income, you can't get in. They were wonderful. But a lot of the time, people are not able to do that. Veterans stepped up and veterans organizations stepped up for me because I had been out there to help pay my security deposit.

But then, you have a lot of other things. Assistants in the house, I heard about one of the bills to help for caregivers, that is really important to get help. You can live independently in an apartment if you can get some help. You don't have to be in a nursing home. I don't care what people say, everybody doesn't die in a hospice. When you think about that, it is depressing. So transportation, I would say, more assistance dealing with the process of assessing somebody's income, and finding ways to bridge those gaps, and then the understanding that wherever we are right now is a transit; it is not forever. So how do we get the financial preparation, income, et cetera, from that so we can make room for others who find themselves in that situation. Thank you.

Chairwoman BIGGERT. Thank you so much.

My time has expired.

The gentleman from Illinois, Mr. Gutierrez, is recognized for 5 minutes.

Mr. GUTIERREZ. Thank you so much.

Of course, I would like to ask Ms. Flanagan, so do you believe that the Administration's stated objective of ending veterans' homelessness by the year 2015 is achievable? And what steps do you think we need to take to achieve such a goal, whether in 2015 or in the immediate future?

Ms. FLANAGAN. Thank you, Congressman Gutierrez.

I do believe it is achievable because the same way this country trusted a 17-year-old girl to hold a weapon and go defend the rights of this Nation, and the same way that this country is asking me, as a homeless single parent, to speak and express the things that I go through, is the same way it shows the belief, and it shows the dedication, and I 100 percent believe, with a few changes, by 2015, the homelessness could be severely—

Mr. GUTIERREZ. If you had to change one thing today, what is the first thing we should change, Ms. Flanagan?

Ms. FLANAGAN. The first thing I would change is the employment, because a lot of the reason why veterans are homeless is because the employment—not that they are not employed, but they are not employed at jobs that make enough money to sustain themselves. So I would definitely change the way veterans are looked at for employment or maybe their employment rates or selection, that kind of thing.

Mr. GUTIERREZ. Welcome, Mr. Hill, a fellow Chicagoan, it is good to have you here this morning. Same question, by 2015, we want

to reach the goal of ending homelessness, can we achieve it, and what is the first step you would take?

Mr. HILL. I think there are evident signs of Secretary Shinseki's goals being met with the reduction of homelessness in vets. I do think we need more supportive housing programs akin to the St. Leo campus for veterans. I think there needs to be more outreach to veterans from the VA and from social organizations.

Mr. GUTIERREZ. How should the VA reach out to veterans more effectively? What steps should they take to reach out to veterans more effectively?

Mr. HILL. I think that they should physically go out in the field and especially look for veterans who are living in the public way, and there are quite a few. I have encountered many from the Vietnam era who are—the difference between that veteran and today's veteran, is that veteran was compelled to service through the draft and was not as welcome as those who are returning today. So, yes, with more outreach, more supportive housing programs, especially HUD-VASH vouchers, and shortening of the time that it takes to receive those vouchers, I think the goal is entirely feasible.

Mr. GUTIERREZ. Thank you.

Ms. Peyton, welcome.

Ms. PEYTON. Thank you.

Mr. GUTIERREZ. Another fellow Chicagoan. I am happy to have you here. I loved to hear your story and read about it yesterday. It is good to see you persevere and be triumphant.

Ms. PEYTON. Thank the Lord.

Mr. GUTIERREZ. What is the first thing, what is the top thing we should do, Ms. Peyton? You are in the field, you see it.

Ms. PEYTON. The first thing I think we need to do is to reevaluate if that is really going to be realistic in terms of 2015, as we are here now on the brink of 2013, we are here right now to come up with suggestions. I think the process here is kind of long to get things going, but I think it is moving in the right direction.

Number one, I think I can speak as a disabled veteran and someone in a wheelchair, I think this is something new, why don't you convene a congressional—a White House conference on veteran affairs? Now, that will be able to look at housing—don't forget business because business creates the jobs. A lot of people, they look for jobs, but you have to have a business. Small businesses are driving—you need big business, too, because small business contracts with big business, so we have to keep everybody in the equation. So if we get a congressional and White House conference on small business, and we do that at the local levels, county levels, whatever the levels are that people come together nationally with the top recommendations with some action plans suggested and where are appropriations so people can start looking for those before they come. I think that we might be able to come up with some solutions. Please keep veterans in the process, not just on the sidelines, because that is important in making it happen. So again, your immediate response, I think we need to reevaluate the timeline. I think that is something we put together, that might be the answer, then I could shut up. And that could answer for us. How is that?

Mr. GUTIERREZ. Please don't. Thank you so much.

Ms. PEYTON. I love you. Thank you.

Chairwoman BIGGERT. The gentleman yields back. The gentleman from Virginia, Mr. Hurt, is recognized for 5 minutes.

Mr. HURT. Thank you, Madam Chairwoman, and I was also hoping I could, with unanimous consent, make my opening statement a part of the record.

Chairwoman BIGGERT. Without objection, it is so ordered.

Mr. HURT. I want to thank the Chair for her leadership on this issue, and I want to thank each of you all for your service to our country: Ms. Peyton; Mr. Hill; and Ms. Flanagan. I do think that as we face challenging times here in Washington, we have borrowed \$16 trillion, we borrow 40 cents on every dollar we spend, to sustain that debt, sustain Washington's spending, I do think that it is probably a uniform belief among all of us on both sides of the aisle that our top priority as a Nation is our national security and supporting those who provide that national security and those who have provided it, and so I think that this hearing is very important, and I hope that it will be useful in trying to address these really serious issues.

Along with that, it seems to me—I was elected 2 years ago, so I have been here for a year-and-a-half. It appears to me from my time in Washington that there are scads and scads of different agencies that are charged with the responsibility of caring for those who have taken care of us in our national security and national defense, and not only are there Federal agencies, but you have State agencies, and in some places, you have local agencies that are all committed to this.

I think that the intent is good, but what strikes me is as all these agencies work, and obviously a lot in the private sector as well, but from a government standpoint, it seems to me that as these agencies struggle to support our veterans on issues of finding housing, finding homes, finding jobs, and making sure that our veterans have high-quality health care, that it must be very, very confusing for anybody who wants to access those services, and I think about my own district office in Virginia where we have a great staff, and we will get calls from veterans or we will get calls from any constituent, and they will call seeking some help with something, and they will just be so relieved to finally find somebody who can help direct them in the right way because it is so confusing, there are so many different programs, et cetera, et cetera, et cetera, that it has to be overwhelming to those who are trying to access that, and so when they call, we just say, we are so glad you called because I think we can help you, but they hadn't heard that before, because they just didn't know where to go.

And so this is sort of a general question, but I would love to hear from each of you what you think we can do to better make sure that our veterans know that there are services and that there are ways to access them, and how do we get that information to them so that they can get the services? Maybe I can start with you, Ms. Flanagan, and then go down the line.

Mr. HILL. If I may, there is the Transition Assistance Program (TAP) that awaits the disembarking veteran. I think that before disembarkation, that this program or programs like them should tell veterans all of the resources, somehow all of the information

of these resources should be channeled through programs like this so there can be broad dissemination.

Mr. HURT. Like a one-stop-shop?

Mr. HILL. Exactly. The Transition Assistance Program is very important.

Mr. HURT. Is that something that veterans or folks who are getting ready to go inactive, are they advised of this? Are they given information about this and are they given one number and one email address, and told, listen, if you have any problems, you call this number?

Mr. HILL. It is a program that waits for them after they are discharged, and I think that, prior to the discharge, the veterans should have the assistance. Assistance in relating their military experience to civilian jobs is critical.

Mr. HURT. Sure.

Mr. HILL. And so with programs such as TAP, a lot of information, vital information is provided.

Mr. HURT. My time is going to expire. I have about 20 seconds. Ms. Flanagan or Ms. Peyton, do you have anything to add?

Ms. FLANAGAN. I want to say that it has been my experience that when people are discharged from the military, they are given a one-stop number and email, this is where you can go, and these are all the services that are provided, and the State that you are going to as well. I think the problem is every year or two, that number and that email changes, and the previous number and email, the information on those sites remain there, but they are no longer valid. So you still end up with this kind of confusion, and until someone calls your office, I guess, they never really get to where they are trying to get. So, yes.

Mr. HURT. I think my time has expired. I would like to wrap up. I can hear from Ms. Peyton when we do another round.

Chairwoman BIGGERT. No, we are not going to do another round, so just quickly, I will give you 1 minute.

Mr. HURT. Thank you.

Ms. PEYTON. Quickly, I was going to say that I think we need to have that Congressional-White House conference or summit on veterans affairs, and we can come to that. As someone who has been involved in the small business community, the Congress, I want to thank you so much for the Congressional Veterans Business Act. That is how our Young Entrepreneurs of the Universe organization was founded, to help veterans become heroes at home, get involved to create businesses to take advantage of the congressional laws, especially for service-disabled veterans, to create specific jobs for those who are disabled, those who cannot work full time or regular part time.

So I just want to say, when we do that, they said veteran businesses create more jobs for veterans than anybody else. So I think the private sector, the not-for profit sector, like Catholic Charities and people like you, the Congress, we love you all and the President, and I just want to say, I just want to thank, again, all of you, so much.

Mr. HURT. Thank you, Ms. Peyton.

Chairwoman BIGGERT. The gentleman yields back.

Mr. Green, you are recognized for 5 minutes.

Mr. GREEN. Thank you, Madam Chairwoman, and I especially thank the witnesses for appearing today. Your testimony has really touched my heart, it really has. As I listened to some of the testimony, I literally had tears welling in my eyes, especially, Ms. Peyton, when you talked about independence, independence and the importance of independence.

When you have been blessed to have mobility and you are ambulatory, and you sacrificed for your country by virtue of being a veteran, independence is something that is instilled in you as a troop, a trooper, and I just, I was overwhelmed when you talked about this independence.

So what I would like for you to do is elaborate just a little bit more for people who may be at home or some other place listening to this, just how important is it for our veterans to have independence in their homes and to be able to negotiate their way through their homes and to do the common things that we take for granted, get a glass of water, just to be able to reach that faucet and get your own water. Would you kindly elaborate on that for a moment?

Ms. PEYTON. Absolutely.

Thank you for the opportunity. Until I got into this wheelchair and was paralyzed on my left side, I couldn't begin to know what it was to be disabled. I thought I knew something. So on behalf of everybody everywhere, people might not feel you are as sensitive as you need to be, you just don't think about it until you are in that condition. So thank you for thinking about it. And I just ask you to think about something that is veteran-friendly. I have friends who can't see. I have friends who have no arms. I have friends who have no legs. I have friends who can't remember from one second to the next—I have to ask them things 2 or 3 times. But getting into your home, I was up on the third floor; I couldn't go up there anymore. I don't even know what went into the locker. If you can't get through a door, even in a building like this, they have the bars in there, they have the wide door, but you can't get in here unless somebody is going to push that door open. I can use my good leg to push it, which I will do.

I am a trooper. So there are a lot of things that are necessary, and people have to get out of their homes; they are going to nursing homes because they don't have accessibility. They don't recommend that people go into their homes; they send people in to help them. These are things that are very important. Every one of us went into the military, whether we were drafted or whether it was voluntary, like me, with a sound mind, okay, with a sound body, and from a home address, and at least there ought to be some really amenable things to come back out so we can get more of a piece of the American dream.

I know that Congress is working hard on it. And so I just want to thank you for the opportunity to be a part of this. And thank you, Catholic Charities, again. I can't say it enough, what they meant to my life. I think the accessibility, just so that you know, I was in the accessibility business before. I never envisioned myself in this need to need accessibility, and I don't talk about it, but boy is it important, and if we just think about when you go to a building that is, say, 10 stories high, 5 stories high, 4 stories high that has an elevator, probably none of you go to look for the stairs, you

go to the elevator. With someone like me, I can't get up one stair. Think about us. If you can't reach for the faucet, they have innovative kinds of things. I have been going through some of these research projects where they can help with things. Think about us; don't think about dollars and cents in terms of it, the quality of life. Because the fact is disability can happen to anybody on a moment's notice. You hear about cars running into people and people getting paralyzed from the neck down. So many different things that happen to you or a family member, then you become engaged because it becomes personal. Well, it is personal with me and my friends around me especially because veterans, it is personal, so if there is anything I can do to add to that, please let me know. I had something left to me I couldn't even take because there was no accessibility. What can I do? And so, thank you all. Thank you. Thank you. Thank you. I love you all.

Mr. GREEN. Thank you. I thank you again.

And I want to also, Madam Chairwoman, thank Mr. Heck, who is the cosponsor of the legislation, and Mr. Cleaver, and the Republican staff members who have been very helpful, and the Democratic staff as well. I believe that these things transcend party lines. They transcend ideology. They really are about helping people who have gone out of their way to help us.

So, thank you again.

And thank you, Madam Chairwoman. I yield back.

Chairwoman BIGGERT. Thank you.

The gentleman from Illinois, Mr. Dold, is recognized for 5 minutes.

Mr. DOLD. Thank you, Madam Chairwoman. I certainly want to thank you for holding this important hearing. I want to thank my friend from Texas for his leadership on this legislation. And I agree with him wholeheartedly that I think this is a piece of legislation and a topic that transcends party lines.

I think it is one of those things that we owe each and every one of you a great debt of gratitude. I want to thank each and every one of you for your service to our country and to all veterans who are out there. And this is an issue that I think we need to come together to try to rectify. As we look at what is happening out there as veterans who are coming off the front lines are coming back and finding themselves either on an unemployment line or looking for a place to live, that is something that we as a country need to address and need to solve. So I want to thank each and every one of you for taking your time and coming to testify before this body today to help us try to figure out how we can better move things forward and help our veterans.

Mr. Hill, I wanted to start with you if I may. I certainly enjoyed hearing your story, it is certainly an impressive one, as everyone here testifying. But certainly I enjoyed, in essence, the family's strongest rules: number one, never give up; and number two, always remember rule number one. Generally, that is what I hear from a lot of veterans; they never give up, which is why we have, I think, the strongest military in the world. But frankly, they are working too hard today to rely on your families rule number one and rule number two.

In your testimony, you noted a number of goals and objectives and methods that homeless shelters generally use to help homeless veterans achieve economic stability. And Ms. Peyton talked about small business, and we will certainly let her talk more about that in a minute. But in your experience, what goals and objectives and methods help you the most during your most difficult times? And could you shed some light on how this Congress can help improve those?

Mr. HILL. Yes. At the shelter, I mentioned their challenging and vigorous programs. We are required to keep a journal, if you will, of our job search efforts and the contacts thereof, our goals for short-term periods and milestone achievement dates as well. And it is important that we do set goals, both short- and long-term, and that they be relevant to the end goal of economic stability and permanent support of housing.

The same existed at St. Leo Campus for Veterans. But the important thing was the housing stability that was there and the case management who would assist with issues that would arise, issues concerning or problems were really and are readily addressed at the facility. Some of the goals that are relevant to a committee such as this would be to provide funding for further such housing, support of housing, for veterans in other States in major cities and rural sections as well. So I see this sort of support of housing as being key. Then, there is the aspect of existing properties that are owned by the Federal Government, in good condition, can be converted and services can be injected into those facilities for veterans who reside there. So, yes.

Mr. DOLD. Ms. Peyton, you talked before a little bit about small business. As a small business owner, certainly I share your zest for small business and trying to make sure we are putting more people back to work. From your perspective, as we look at the unemployment rate, which is far, far, far too high today across the country, pick your State—it is generally too high, there are some exceptions to that—but generally, we are looking at a national unemployment rate of 8.1 percent. In Illinois, as we know, it is higher in the State of Illinois than it is nationally. What relationship do you put our economic and unemployment rate with that homelessness? And can you shed a little light on that?

Ms. PEYTON. Absolutely. If you don't have economics, you can't be housed anywhere. As a matter of fact, for a lot of places, you can't go if you don't have some kind of income, even if you are homeless. That is crucial. Small business creates first a job for the person who is doing it, and then it expands as business expands. That is how jobs are created, in general. You have not-for-profit jobs and government jobs, but everything is based on people; it is based on sales. If a hospital doesn't have the number of people in there, they close down. If a school doesn't have the number of students, they close down.

Now, there are other factors that go into that, but small business, veterans' small businesses, they make the most jobs for veterans. And our organization just wants them to make sure that they have a small component that they cross-train people for, for jobs that can give people dignity. Because let me just share this with you: Besides the homelessness, for some, the homelessness

turns into suicide. People don't talk about that. And that is an important thing because if somebody is talking to you, you know something is going on, but you can't really get it, and the next thing you know, they are gone. And these are not people necessarily that you would consider basket cases.

Plus, the face the homelessness has changed. It used to be thinking about the homeless as somebody who is just a derelict or something. A lot of homeless people now, especially veterans, they have doctor degrees, masters degrees, bachelor degrees. But the thing is, we need to start getting more into business. We need to think about that. And for veterans, even though they have—Congress has put some great programs together for veterans. But I am going to tell you one of the biggest things is the promotion of those and access to credit and capital.

You might have to do some—what do they call those things, Madam Chairwoman? Amnesty for credit, amnesty for taxes, amnesty for educational loans, some way of looking at reassessing the Social Security Disability thing, because everybody is going to have to pay in for Social Security from their jobs at certain times to allow them to be able to get that stability of some kind of income to move forward. But certainly, we need to get back to that congressional and White House conference, summit conference of veterans affairs, and include that in there. And maybe—I was part of the White House Conference of Small Business back in 1986 and 1995. I was selected from Springfield from the small business advocates, and I would just say this, I would probably add the component of not-for-profit organizations to be a resource there for, like, Catholic Charities and the like that have model programs.

Catholic Charities is a place where when you walk into there, the only thing they need to have right now is for you to come and take a look. The place is wonderful. We need a little place for jobs. We have a job service program. But jobs, remember, everybody, it doesn't come without business. Business creates jobs. So I would just say I love you all and thank you.

Mr. DOLD. I thank the witnesses.

And my time has expired, Madam Chairwoman.

Chairwoman BIGGERT. Thank you.

The gentlelady from California, Ms. Waters, is recognized for 5 minutes.

Ms. WATERS. Thank you very much, Madam Chairwoman. I want to thank you for holding this hearing.

I am sorry I could not be here at the beginning of the hearing, but this is one that I think we should all pay attention to.

I would like to thank my colleague from Texas, Mr. Green, for all the work he has put into Housing for Heroes and the leadership that he has provided on this issue. And let me say to our panel, thank you for being here today. We do have Members from both sides of the aisle who are very concerned about the plight of our veterans, the housing problems that our veterans are encountering and the homelessness. The number of veterans on the street in America is shameful.

And there is a lot of misunderstanding about why veterans are on the streets and homeless. A lot of people think, oh, veterans, certainly there are housing vouchers, or there are nonprofit organi-

zations, there are churches, there are places for veterans. And your being here today will help us to understand why some of those thoughts about it being easy for veterans to find housing are just misplaced. It is just not true.

I am from Los Angeles, and downtown Los Angeles is just full of homeless veterans. And so, I know you have been talking with our Members here today and telling them about your plight and what you learned and what you know. And I don't want to ask you to go through it again, but I work with U.S.VETS very closely, but I know that U.S.VETS cannot accommodate all the veterans we have who are homeless. When a veteran is homeless and they have a disability, what is happening out there? Will that disability help to expedite assistance for them so that they can get into housing?

You are shaking your head, Ms. Peyton.

Ms. PEYTON. No. And that is one of the things—I am sorry, thank you so much, Congresswoman. One of the things I wanted to add—when you are invited to something like this, you are just so honored and overwhelmed, you just can't get everything down. But I am in a wheelchair right now, paralyzed on my left side. I am an archer. I had 299—thanks so much, Congresswoman Biggert—actually 299 out of 300 with a bow. I am an archer right now. But not only has it given me the opportunity to do that; it has improved my self-esteem. So I want to throw in a plug for especially disabled or injured or wounded veterans to get involved in sports. They have adaptive sports for everything you can think of. I do scuba diving. I do golfing. I do swimming. I do—you name it, I am doing it, because they have assisted technology in order to help in that. And that is something a lot of your States and a lot of your places, you should really look at. Everybody, I would think, would want to have a committee of veterans, like a task force of veterans, wherever level you are to find out, and include people with disabilities. That is something that can be done.

In terms of policy, I think they ought to have people who have disabilities, like myself, those who can't see, those who have obvious things that are impediments to get housing and the like, to go to the head of the line. We are the ones who are really out there. But we have to wait like everybody else because of policies and regulations. I am sure people are not doing that on purpose. So if they can have that, that is one thing.

The second thing I would say in terms of include everybody in the financial, whole financial picture. Our organization, the Young Entrepreneurs of the Universe, a veterans' initiative, we partner with the Federal Reserve Bank of Chicago, and once a year, we have a program. Our next program will be April 25th at Jesse Brown VA Medical Center. We talk about fiscal budgeting, finance, all that. But small businesses—

Ms. WATERS. What happens, Ms. Peyton, if one who is disabled goes to the VA and says, I need housing. What happens?

Ms. PEYTON. That depends on who you talk to. In our program, we have a Wounded Lady Warrior Project that we are working to try to get in every VA hospital, at least most of the big ones, a place for lady veterans to come so they can galvanize resources in life, both Federal, State, whatever, and local resources, because we served. We might not be the majority, but we deserve also. And

since the majority of men take advantage, they can sit down anywhere in a hospital and talk to each other and network about this or that. For someone to say, maybe they could have a center there also, to be part to come and find out what specifically.

I can give you an example. I saw a young lady at the hospital; she had no legs. I talk to every lady at the hospital. That is what I do when I see them. And I want to know, do they have any services? Do they have any needs, et cetera? And so I asked her where she was living. She said, an apartment. I said, how is it? She said, what do you mean? I said, can you get in your bathroom? She said, not in my chair. I said, what do you mean? She said, I have to get out of my chair and go on my hands and go into the bathroom. I said, do you have any bars? She said, no, I pull myself up on the sink. I said, well, you are coming to the hospital, what are you coming here for? She said, I am coming to get some legs. I said, we are going to get you set up with a social worker right now. So I took her over to the social work section.

Now, she is coming to get legs. This has nothing to do with people and providing the proper services they have to do in the area, because one area is specializing in one thing and one is specializing in another. And everybody figures that it is covered, but it is not. Do you see what I am saying? So I am not blaming anybody. So maybe that might be something. We need places and information where people can get the same information. And the service providers, they can't think of anything else. They need somebody to help them or some resource to help them to refer with something like that. So I just wanted to give you that as an example of something concrete that has happened.

Ms. WATERS. I appreciate that.

And I have to yield back my time. But there is an assumption that because we have such vast VA services in every city, every State, that once you go to the VA, you can tell them what your problems are, whether it is health or housing or what have you, and that they will work with you to connect you with those services. But obviously, what you are telling me is that not only is it not true, but the way that services are rendered in some places where you have to go to different places to access the services, that it is not easy, particularly if you are disabled.

And, let me just say this and I will yield back. I am over time. There are some people, some Members of Congress, who are saying that the entire system needs to be revamped altogether, particularly as it relates to the claims that are put in for the disabled and the backlog that we all experience and the work that we are getting in our offices trying to help people get connected to have those claims worked on. Some people are saying we need to throw out the system altogether and come up with a system that works.

Thank you very much, Madam Chairwoman.

Chairwoman BIGGERT. Thank you so much.

The Chair notes that some Members may have additional questions for this panel, which they may wish to submit in writing. Without objection, the hearing record will remain open for 30 days for Members to submit written questions to these witnesses and to place their responses in the record.

Thank you all for being here today. You have been a wonderful panel.

Ms. PEYTON. We thank you, too. I love you. Thank you so much. Praise God.

Chairwoman BIGGERT. And with that, this panel is dismissed, and we will call up the second panel.

I ask unanimous consent to have Mr. Edward Quill, chief administrative officer, Volunteers of America of Florida, available to assist panel two witness Ms. Baylee Crone, technical assistance director, National Coalition for Homeless Veterans, during the panel two question-and-answer period.

I also ask unanimous consent to insert the following material into the record: a September 12, 2012, letter from the National Association of REALTORS®; an April 15, 2012, letter from The American Legion; a September 11, 2012, statement from BAM House Incorporated; a September 11, 2012, statement from St. Paul's Senior Homes & Services; a September 12, 2012, letter from the Midwest Shelter for Homeless Veterans; a September 12, 2012, statement from Volunteers of America of Florida; a September 14, 2012, letter from Rebuilding Together; a September 14, 2012, statement from A Safe Haven; a September 14, 2012, statement from Veterans Upward Bound; a September 14, 2012, statement from Congressman Joe Heck; and a September 14, 2012, statement from the Corporation for Supportive Housing.

Without objection, it is so ordered.

We will now turn to the second panel: Ms. Heather Ansley, Esquire, president of veterans policy, VetsFirst; Mr. Steve Berg, vice president for programs and policy, the National Alliance to End Homelessness; Ms. Baylee Crone, technical assistance director, the National Coalition for Homeless Veterans; Ms. Sandra Miller, chair, Homeless Veterans Committee of Vietnam Veterans of America; Mr. Arnold Stalk, founder of Veterans Village, Las Vegas, Nevada; and Ms. Eileen Higgins, vice president, Housing Services, Catholic Charities of the Archdiocese of Chicago, who is from my district.

Thank you all for being here.

With that, we will start with Ms. Ansley. You are recognized for 5 minutes.

**STATEMENT OF HEATHER L. ANSLEY, ESQ., MSW, VICE
PRESIDENT, VETERANS POLICY, VETSFIRST**

Ms. ANSLEY. Thank you. Chairwoman Biggert, Ranking Member Gutierrez, and other distinguished members of the subcommittee, thank you for the opportunity to testify regarding VetFirst's views concerning the housing needs of homeless, low-income, and disabled veterans.

My oral testimony will focus on the needs of certain disabled and/or low-income veterans for assistance with home modifications and repairs. According to the Department of Veterans Affairs, 3.47 million veterans receive VA disability compensation. Disability compensation is available for veterans who have an injury or illness that is caused or aggregated by their military service. In August 2011, 864,000 veterans reported having a service-connected disability rating by the VA of 60 percent or greater out of 100. In

addition, 300,000 low-income veterans who are either disabled or over the age of 65 who might meet other requirements receive VA pension benefits.

Access to affordable accessible housing, as it was highlighted in the earlier panel, is a critical issue for many disabled veterans. The ability to return home after incurring a significant disability is an important aspect of reintegrating into your family and community. For veterans who have newly acquired injuries, this may mean living with family members for a time prior to focusing on securing their own homes.

VA provides access to home adaptation assistance for eligible disabled veterans and servicemembers. These programs include the specially adapted housing and the special housing adaptation grant programs. These programs are available to veterans and servicemembers who are permanently and totally disabled as a result of a disability connected to their service and who have a qualifying disability. These grant programs provide a maximum of \$63,780 and \$12,756, respectively, as indexed for the cost of construction. A related program is the temporary residence adaptation grant program, which allows individuals who are eligible for both of the previous two programs but who do not have a home of their own to adapt a home of a family member. This is a relatively new program that has recently had some major changes to increase the number of veterans who might use this program.

Another program that is available through VA is the Housing Improvements and Structural Alterations Program. Veterans who require an improvement or alteration to their home due to disability related to their service may receive up to \$6,800, while those who are enrolled in the VA healthcare system but who do not have a service-connected disability may receive up to \$2,000.

VetsFirst fully supports the housing adaptation benefits currently available through the VA. Many of our members have greatly benefitted from the use of these programs. Furthermore, we support efforts to increase eligibility and funding amounts for individual grants to ensure that disabled veterans are able to live in their communities throughout their lives. We also understand that we must seek to leverage all resources if we are to meet the needs of veterans who are not eligible for VA programs but for whom home adaptations are a necessity.

VetsFirst and Rebuilding Together, a national housing nonprofit, have collaborated with Representative Al Green in developing legislation that would help to meet these needs. The Housing Assistance for Veterans Act of 2012, the HAVEN Act, would authorize the Secretary of Housing and Urban Development to establish a pilot program that provides grants to nonprofit organizations to rehabilitate and modify homes of disabled and low-income veterans. The HAVEN Act leverages the resources of nonprofits by expanding their capacity to meet the housing adaptation and home repair needs of our disabled and low-income veterans. Many existing housing nonprofits and more recent veteran-focused housing nonprofits have stepped forward to assist in meeting the housing needs of these veterans.

Nonprofits not only bring in volunteer leverage but also the private sector and foundations. Through a very small investment, the

HAVEN Act would engage nonprofits to test the ability to serve those who have served. Rather than directly providing services for veterans through Federal funding the proposal helps meet the need through national nonprofits that compete for limited funding. The pilot program would require HUD and VA to establish and oversee the program to ensure that veterans' needs are addressed. We believe that this collaboration will build on the efforts of the VA and HUD to work together in addressing veterans' homelessness.

Veterans who are disabled and/or low-income would be eligible for assistance. The definition of disability considers the physical and mental limitations that veterans may face, regardless of whether the limitations are connected to their service. Low-income veterans are those whose incomes do not exceed 80 percent of median income for a particular area. When applying, organizations will need to detail their plans for working with the VA and veterans service organizations to identify those who can benefit.

Preference will be given to organizations that have experience in providing housing rehabilitation and modification for disabled veterans and who serve veterans in rural areas. Organizations will be able to modify and rehabilitate the primary residence of an eligible veteran, rehabilitate a residence that is in a state of interior or exterior disrepair, and install energy-efficient features or equipment. Organizations will be required to provide a match of the grant award, and assistance must be provided either at no or very little cost to the veteran. The program would provide \$4 million a year over a 5-year period. We believe that passage of this bipartisan legislation will help to address a portion of the housing needs of low-income and disabled veterans who may otherwise have limited or no resources. Thank you for the opportunity to testify. This concludes my statement.

[The prepared statement of Ms. Ansley can be found on page 39 of the appendix.]

Chairwoman BIGGERT. Thank you.

Mr. Berg, you are recognized for 5 minutes.

STATEMENT OF STEVE BERG, VICE PRESIDENT, PROGRAMS AND POLICY, THE NATIONAL ALLIANCE TO END HOMELESSNESS

Mr. BERG. Thank you, Chairwoman Biggert. And thank you all for coming to this hearing today.

I am Steve Berg, from the National Alliance to End Homelessness.

There are many things that we in the housing field owe veterans. We owe them a lot more than just not being homeless. However, we do owe them not being homeless. And that is my area of expertise, so that is what I am going to talk about today.

Once in a while in this country, we get a chance to do something really extraordinary. That extraordinary thing is to actually solve a problem, solve a social problem, not just take the edge off the problem, not just make people feel better about the problem, but actually solve the problem.

I want people to come away from this hearing today understanding that we are right on the edge, right on the verge of having solved the problem of homelessness among veterans. There have

been many steps that people on this subcommittee, and other people in this room have been working on for years and years to get us to this point.

Solving a social problem like this from a policy perspective, there are basically four steps to it. The first step is to put in place an overall monitoring and management infrastructure that tells us how big this problem is, whether it is getting better or worse, and holding people accountable for results. That has been done by the VA and HUD working together on things like the Annual Homeless Assessment Report and the veterans information in there. We now have much better information nationally and locally. People know if they are making progress.

The second step is to put in place an array of program models that address all aspects of the problem. Veterans who are homeless range from people with the most severe disabilities who have been on the streets for years to people whose problems with housing are just short term; they are due to a short-term economic crisis. People in that whole range need different things.

The VA and HUD together now have the range of programs in place, from the HUD-VASH program, which serves the most disabled people, to the new program, called the Supportive Services for Veterans Families Program, modeled after the Homeless Prevention and Rapid Rehousing Program that HUD ran to provide short-term assistance to people whose problems are basically economic.

The third step is to fund those programs to scale. And I am happy to say that in the bills that the House Appropriations Committee has already passed, and the bills that the Senate Appropriations Committee has passed, what was in the Administration's budget, the money is now on the table to fund these programs at the level they need to be funded at to make sure that every veteran who is homeless, and every veteran who is at severe risk of homelessness over the next couple of years, will get the services they need if those bills pass. We think they will pass. There is bipartisan support. So those are the first three steps.

The fourth step, which we still have in front of us and which may be the hardest, is to put in place a local structure to ensure that these policies are implemented at the local level, that each veteran—and what this means in a very concrete sense is that each veteran who is homeless, each veteran who is at risk of homelessness will be found, will be contacted, will be brought into the system, and will get what they need to have stable housing. This is a challenge that people working in the field around the country have embraced, whether at VA or HUD, or at agencies such as those who have testified here today. There is a hunger for doing this out there.

People all over the country want this to succeed. So what can this subcommittee do? Here are a few things: First, through monitoring and through oversight, make sure these programs are targeted the right way. There is a range of programs. Some are designed to help people with the most severe barriers; some are designed to work with people without such severe barriers. The HUD-VASH program is the most important example. That is permanent supportive housing. It is deep, long-term rental subsidies combined

with intensive social services. Just about any low-income veteran's life would be made better if they had this, if they had HUD-VASH. But the most severely disabled veterans, those who have been homeless the longest, they are going to stay homeless unless they get HUD-VASH. So, it is essential that HUD-VASH be targeted to this group. It is essential that VA and HUD programs work together at the local level. It is essential that people are assessed, that there is a coordinated assessment system at the local level to make sure that each veteran gets what they need.

My time is up. If you have questions now or in the future, I am happy to answer them. But I want people to know we are on the verge of solving this problem. We have one more big step to take, and I hope we take it.

[The prepared statement of Mr. Berg can be found on page 47 of the appendix.]

Chairwoman BIGGERT. Thank you, Mr. Berg.

Ms. Crone, you are recognized for 5 minutes.

STATEMENT OF BAYLEE CRONE, TECHNICAL ASSISTANCE DIRECTOR, THE NATIONAL COALITION FOR HOMELESS VETERANS

Ms. CRONE. Madam Chairwoman, Ranking Member Gutierrez, and distinguished members of the subcommittee, my name is Baylee Crone, and I am here representing the National Coalition for Homeless Veterans, the only national organization solely dedicated to preventing and ending homelessness among veterans. I am truly humbled to be a part of this panel of experts today. We have folks on this panel and on the previous panel who really know firsthand what the meaning is of this mission and have been working tirelessly for over 20 years to make this a reality.

We are here today to talk about housing options for homeless veterans. And inevitably, as Mr. Berg stated, this starts with HUD-VASH. And that is for good reason, given the incredible success of this program to date. I want to take a moment to express our deep gratitude at the bipartisan leadership of Congress in supporting the build-out of HUD-VASH.

Today, we are closer to the goal of providing housing to 60,000 chronically homeless veterans than many people thought could be possible in this short period of time. This targeted expansion has really changed the world as we know it. And this is for veterans, as Mr. Berg said, who would likely fail without the intensive support of HUD-VASH. I want to thank you for your diligent, thoughtful, sometimes critical, and really steadfast support of this important program.

Now, while the progress of HUD-VASH is definitely something to be commended, HUD-VASH is not the full answer. Not all homeless and at-risk veterans need the intensive supports that are tied to a HUD-VASH voucher, but they still have critical care needs and face difficult obstacles. Homeless and at-risk veterans can have any combination of needs based on several risk factors, either related to generally being homeless, so it could have to do with their family history, illness, disability, or they might have risk factors and needs based on their service related to PTSD, traumatic brain injury, military sexual trauma, or chronic pain. What matters most

is that there is a comprehensive system of care that exists and is maintained to maximize the number and visibility of access points for veterans who are experiencing or at risk of homelessness.

We must make sure that these various access points are connecting the homeless veterans to the services that meet their most pressing needs. And at this time, the most pressing need is access to affordable housing. When I say access to affordable housing, I mean options that increase the number of housing units available, but also that increase veteran access to existing units that are designated for low-income individuals. These options go far beyond HUD-VASH, and several of these programs have been and will be discussed by my colleagues. We have the programs and momentum to make it happen if we can continue connecting the right pieces within our communities.

For the 20,000 veterans who are exiting grant and per diem programs each year, access to affordable housing is the key that leads to a real reduction in the number of homeless veterans who are showing up in the annual counts. The need, however, goes beyond those in HUD-VASH. The numbers of at-risk veterans who are accessing homeless-specific VA services are increasing at a staggering rate. You see over 1.4 million veterans who are currently low-income below the poverty level, and of those 1.4 million, it is estimated that up to around 150,000 of them are likely to experience homelessness. Stabilization and rapid rehousing is going to require a closely coordinated effort within communities to appropriately target resources and services. For over 20 years, homeless veteran service providers have understood that a network of care built around health services of the VA Medical Center is going to provide the best foundation to connect homeless veterans to the tools they need to promote housing stability.

In 2011, the mandate that veteran data be captured in the Homeless Management Information System (HMIS), and integrated into community planning set the stage for this coordinated network to more thoroughly and efficiently connect the mainstream homeless resources of HUD. This data clarity now allows consolidated planning partners to more accurately prepare for the housing needs of veterans in communities.

This does not demand proportional representation but rather equitable access. These veterans are not broken; they are often injured physically and mentally, but they aren't beyond help if assistance is delivered with purpose. Access to affordable housing is a fundamental component of this healing process. It allows veterans to harness the strengths and skills that they gained through their service, to integrate back into their communities, and to contribute back as citizens.

As we move forward in this era of interagency collaboration and integrated community planning, we have better opportunities to provide homeless veterans with the tools to remain successfully and sustainably housed. And I have 19 more seconds, so I just wanted to add that when we are talking about the success of the 5-year plan, it is feasible by 2015. That doesn't mean that veterans will not become homeless during that time period and beyond 2015. But the important piece is that we have the networks in place to be there for them and the access points in place to be there for

them if they do experience or are at risk of homelessness. Thank you.

[The prepared statement of Ms. Crone can be found on page 52 of the appendix.]

Chairwoman BIGGERT. Thank you so much.

Ms. Miller, you are recognized for 5 minutes.

STATEMENT OF SANDRA A. MILLER, CHAIR, HOMELESS VETERANS COMMITTEE, VIETNAM VETERANS OF AMERICA

Ms. MILLER. Madam Chairwoman, and distinguished members of the subcommittee, good morning, and thank you for the opportunity to present testimony here today, where I will focus on HUD-VASH.

My name is Sandra Miller, and I am the chair of the Homeless Veterans Committee of Vietnam Veterans of America. I also sit in my real job as the director of homeless residential services at the Philadelphia Veterans Multi-Service & Education Center, which is really a mouthful, where I oversee the operations of 125 grant and per diem beds, 30 of which are designated for homeless women veterans.

Vietnam Veterans of America (VVA) has as its number one legislative priority the issue of accountability, accountability at every level of any agency, Federal, State or local, impacting veterans and their families. Without accountability, countless dollars are lost to programs that are ineffective, inefficient, and even potentially unsafe. We must all be keepers of the gate, ensuring our programs are achieving the goals they were established to attain.

After all these years of attention given to the homeless veteran issue, it remains a disturbing situation. Can we bring a total end to veteran homelessness? My sense is, no, because there will always be those who choose this way of life.

We can however offer and assist those who seek change, but they can't make it on their own; they can't make it out of the darkness. So we continue to try to find a way to help those who are helping these veterans.

VVA strongly supports and urges the continued funding and expansion of the HUD-VASH program. However, VVA has advocated for both HUD and the VA to establish an oversight mechanism monitoring for compliance to ensure its intended effectiveness.

Oversight of the VASH program will prove to be an invaluable tool, creating effective processes, efficient utilization of dollars, and successful accomplishments. Oversight will ensure that vouchers are administered, distributed, and utilized to the fullest extent possible, and for the purpose they were intended.

Are HUD-VASH vouchers being distributed equitably nationwide? We don't know this. We do know that in some areas—we do know that some areas are saturated with vouchers, while others are screaming for more. We know that one of the barriers to providing housing vouchers in some locations is the lack of case management staff. Alaska is one prime example of the staffing situation which results in the delay in issuing or utilization of these vouchers.

Are all VA medical centers providing the appropriate level of case management to the veterans in HUD-VASH? We don't know

this either. We do know that case management activities vary from VA facility to VA facility. VVA does appreciate that case management is able to be contracted out to community service providers, and applauds the recognition that one no agency or organization can do it all. The VA and the veterans need these collaborations now more than ever if we are to end veteran homelessness.

Here is what we do know: According to the 2011 annual homeless assessment report, there were over 67,000 homeless veterans, down 12 percent from 2010. As of May, there were 48,000 vouchers authorized and 39,000 in use. One challenge many of our veterans face in receiving HUD-VASH vouchers is the expense of moving into their new apartment. This has been addressed in some fashion by the awarding of VA-supported services for veterans' families across the country. SSVF can assist veterans with these moving costs.

Does HUD-VASH work? Yes, VVA believes it does. It does provide housing opportunities for homeless veterans. However, we are concerned that not enough attention is placed on income, motivation or continued housing stability of the veterans. If a veteran is placed in HUD-VASH with only minimum income, that income may not be enough to sustain that veteran. Recently, a number of veterans who came from my program into HUD-VASH who were receiving public assistance were cut off with no notice. They now have zero income. How do they survive? What assistance is there to ensure that they will be able to sustain their housing with no income? Realizing that HUD-VASH focuses on housing, it is our opinion that long-term sustainable income must be part of the intake assessment as well as ongoing case management. Demanding anything else is surely setting up the veteran to fail.

Motivating the veteran to return to the workforce, if possible, or to seek additional income may prove to be an integral part of the case manager's responsibilities. Case managers are their frontline defense for these veterans, and they should be assisting with all avenues. VVA believes in the importance of the housing first model as ideal for some veterans. However, VVA also believes that housing ready model may be the best fit for others.

It has always been the belief of VVA that our homeless veterans must be given every opportunity to succeed in independent living. There are no cookie-cutter solutions and VVA embraces the inter-agency council's mantra of no wrong door. In my written statement, I have outlined additional concerns that VVA has regarding VA homeless grant and per diem service centers and per diem payment methodology. VVA is committed to continuing the advocacy and effort to identifying supportive solutions that will make a difference in the lives of every veteran who finds themselves homeless. We hope that some of these solutions will help when that veteran finds herself home.

[The prepared statement of Ms. Miller can be found on page 70 of the appendix.]

Chairwoman BIGGERT. Thank you.

Mr. Stalk, you are recognized for 5 minutes.

**STATEMENT OF ARNOLD STALK, PH.D., FOUNDER, VETERANS
VILLAGE, LAS VEGAS, NEVADA**

Mr. STALK. Good morning. My name is Arnold Stalk, and I am the founder of Veterans Village, which is located in downtown Las Vegas, Nevada. I would like to thank the Members of the House of Representatives, and more specifically, a special thank you to this Subcommittee on Insurance, Housing and Community Opportunity. It is truly an honor to be here.

I have been developing, operating, constructing, and advocating for special needs housing development since 1977. I began my career as a VISTA volunteer, and my first community project was a design of a methadone clinic for heroin addicts on Los Angeles' Skid Row. I have developed and operated special needs housing developments such as emergency shelters, transitional housing, scattered site rental housing, and homeownership prototypes that are replicable developments throughout southern California initially, and then in other areas of the United States.

The reason I go through this background is because I have been doing this for 37 years, and I believe that the system is broken. It is broken, but I believe that it is repairable. I have been in a private practice consultancy firm, and I also have my own nonprofit organization. In my career, I have been blessed to have the opportunity to be of service to create facilities and residences for people to create humanistic and respectful environments for people from all walks of life.

I am a founder of Veterans Village in downtown Las Vegas, which is a 125-unit residence and is dedicated to the creation of an environment that is a home and a respite for United States veterans. This is a unique and innovative approach to holistic and comprehensive housing with collaborative support services. Public and private collaborative partnerships have been created to provide services to residents, including education and degree programs, nutritional programs, exercise, training, medical services, mental health counseling, specialized activities, and special events.

One recent example of a truly public-private partnership is the Home Depot Foundation, in which our nonprofit share in Veterans Village has received a grant to rehabilitate and retrofit the Veterans Village through a Home Depot Day of Service program, which is scheduled for this coming October 25, 2012.

I am here this morning to discuss barriers that homeless and low-income U.S. veterans face in securing housing assistance from Federal agencies. I would like to advocate for improved Federal agency collaborations, program efficiencies, and the administration of homeless and housing services for veterans along with the private sector. I also would like to express my support for H.R. 6361.

In Las Vegas, Nevada, and southern Nevada, for example, the lack of affordable housing for veterans who are homeless, at risk of becoming homeless, and those more independent veterans who are seeking affordable housing is extremely limited. Additionally, there is a lack of collaborative efforts by and between public and private sector entities to provide better housing services as well. Obstacles that nonprofit organizations and faith-based organizations face in helping homeless and low-income veterans secure housing assistance and services from Federal programs is signifi-

cant, due to a lack of available housing, rental subsidy vouchers, HUD-VASH, Department of Veterans Affairs, Supportive Services For Veteran Families Program and other voucher programs, numerous bureaucratic delays, and the lack of improved collaborations between local, State, and Federal agencies along with non-profit providers to advance the approval processes for veteran housing and related supportive services.

Suggestions for improvement to Federal housing programs to better serve homeless and low-income veterans include: to enact H.R. 6361, the Vulnerable Veterans Housing Reform Act; to create a one-stop shop processing system for veterans to access affordable and attainable housing, which will require local, State, and Federal agencies to work together to speed up the accessibility, affordability, and availability of housing and support systems for veterans; to provide incentives for private sector developers to develop newly built and retrofitted affordable and creative housing models for veterans and to create housing models for replication across the United States; and to create incentives for private sector businesses to provide medical and mental health employment opportunities, another service for our veterans as well.

Our Veterans Village is an example of the public-private partnership that has taken an aging motel, which was about to close, and retrofitted it into a comprehensive resident and respite for our veterans. Partnerships in collaboration have been formed including the Medical Reserve Corps of Southern Nevada, the Las Vegas Urban League, Health of Southern Nevada, Lutheran Social Services, the American Red Cross, the U.S. Department of Veterans Affairs, and others. This model is replicable in every State, city, county, and jurisdiction across the United States, providing affordable, attainable and respectable housing for our U.S. veterans.

Thank you for this opportunity to testify and share my experiences today and the opportunity to be of service to our country.

[The prepared statement of Mr. Stalk can be found on page 79 of the appendix.]

Chairwoman BIGGERT. Thank you very much.

Ms. Higgins, you are recognized for 5 minutes.

STATEMENT OF EILEEN HIGGINS, VICE PRESIDENT, HOUSING SERVICES, CATHOLIC CHARITIES OF THE ARCHDIOCESE OF CHICAGO, CHICAGO, ILLINOIS

Ms. HIGGINS. Thank you, Chairwoman Biggert, Ranking Member Gutierrez, Representative Green, and members of the subcommittee.

My name is Eileen Higgins, and I am here representing Catholic Charities of the Archdiocese of Chicago, where I serve as the vice president of Housing Services, including those programs serving homeless veterans. Persons without homes or on the brink of homelessness struggle with similar concerns: few affordable housing options; low-paying jobs; and lack of access to mental and physical health care and support.

Veterans facing homelessness may have experienced many issues in war, including conflict-related injuries, both physical and psychological. Reentry to civilian life is often impeded, and veterans often experience a downward spiral into homelessness.

Additionally, employment can be challenging due to both the current economic climate as well as the need for training and transferrable skills to enter the civilian workforce. We at Catholic Charities are committed to ensuring our veterans are receiving appropriate care by providing wraparound services to assist them in achieving self-sufficiency to the highest degree possible. For nearly a decade, Catholic Charities has recognized that many of our clients needing emergency services are veterans. Homeless and hungry veterans dine at our Catholic Charities suppers, visit our emergency assistance center for food, clothing, and shelter, and access care through our substance abuse program. They benefit from our case management and counseling programs.

We know how to reach out to veterans, and we know how to empower persons to overcome homelessness. One recent success story is our St. Leo campus for low-income veterans. This campus includes 141 units of supportive housing built by a collaborative effort of the VA, State and local government, and private funding, among which is the Illinois AMVET Service Foundation. Development of this residence was a part of a national project made possible by the VA. Catholic Charities and four other agencies were invited to participate in this program. Subsequent funding through the U.S. Department of Labor and the U.S. Small Business Administration has allowed us to expand services to veterans through its employment and training program.

There are many partners in the successful administration of this program as well, including everyone from local private employers to the local VA health administration and the Council of Network Homeless Coordinators. For more than 5 years, agency representatives have participated in monthly gatherings with the VA staff and veteran services provided through VISN 12. These meetings allow for coordinated delivery of care and ongoing publicity for key programming. In fact, the key to the success of this program is the collaboration of so many partners in order to provide all of the wraparound services necessary to assist veterans who have multiple barriers to housing and employment, including mental and physical disabilities, chronic health problems, behavioral health issues, criminal records, and poor work histories. The veterans in our care receive intensive case management and supportive services, plus referral to our partners for services to address their complex level of need.

At a higher level, the HUD-VASH voucher program is entirely key to assisting homeless veterans whatever their situation because it provides funds for case management services associated with the housing. These intensive personalized case management resources often make the difference between sustained stability and return to housing crisis. Some of the obstacles we face, even with the great collaboration, is the collaboration. Clearly defined roles and responsibilities in the communication of these—and communication of these among them. Early on, we experienced a breakdown in communication among our Federal partners when it came to a decision about who was coordinating the case management services, for example, and found it necessary to take the lead in describing and defining that role. On paper, this seemed to be

a duplication of services. However, in our analysis of the situation, it led us to understand that everybody played a role.

Some of the obstacles that low-income veterans face in securing housing may include when a young man or woman goes into the service, it is out of a sense of pride for their country, to support their education, or to open doors to a better future for themselves.

Chairwoman BIGGERT. Ms. Higgins, if you could wrap up, we are facing a vote here.

Ms. HIGGINS. We are indeed. So, I think I will thank you at this point for this opportunity.

Chairwoman BIGGERT. Thank you so much.

[The prepared statement of Ms. Higgins can be found on page 63 of the appendix.]

Chairwoman BIGGERT. Unfortunately, we have a number of votes on the Floor, so we are going to have to conclude this hearing, and submit additional questions to you in writing.

But we are going to take time—each of us will do one question. So if you could be as brief as possible.

My question is that we have heard that HUD-VASH vouchers are not being tracked, so HUD doesn't know if the vouchers have actually gone to veterans and that veterans are housed. How could we solve this problem?

Mr. Berg, we will start with you, in one sentence.

Mr. BERG. I think HUD does know that they are going to veterans. I think that is—the big part is, are they going to the veterans who are the most disabled, who won't get out of homelessness any other way? I think that is the key question.

Chairwoman BIGGERT. Anyone else?

Okay. Then, we will go to Mr. Green.

Mr. GREEN. And I will be very brief.

Quickly please, and you can maybe simply raise your hands, if you agreed with the three previous witnesses in terms of what they said about modification and accessibility? Would you just kindly raise a hand? Let's let the record reflect that everyone agrees.

Madam Chairwoman, I yield back.

Chairwoman BIGGERT. Thank you. I am sorry that we have to cut the hearing short.

The Chair notes that some Members may have additional questions for this panel, which they may wish to submit in writing. Without objection, the hearing record will remain open for 30 days for Members to submit written questions to these witnesses and to place their responses in the record.

I thank you all. And you have great written statements, which are very helpful to us, and we will submit questions for you.

Thank you, thank you, thank you.

And with that, this hearing is adjourned.

[Whereupon, at 11:30 a.m., the hearing was adjourned.]

A P P E N D I X

September 14, 2012

09/14/2012 – Rep. Robert J. Dold - Opening Statement

I'd like to thank our witnesses, especially our veterans who are on the front line of protecting our nation and our freedoms. Thank you for your service, your sacrifices, and for putting this nation first – it's truly an honor and a privilege to have you here.

We all agree that we need responsive and accessible housing programs that are tailored specifically for low-income and disabled veterans. Our service men and women have been hit particularly hard in this country's housing crisis and face unique challenges in securing sustainable housing.

But our well-intentioned federal housing programs for veterans clearly have meaningful inefficiencies, poor inter-agency coordination, and poor evaluation systems.

However, I'm pleased that this committee continues to address these issues. This past week, the full committee passed Mr. Heck's bill that ensures veteran disability benefits do not reduce access to HUD's housing assistance programs. And today we are discussing Mr. Green's legislation, which allows veteran services organizations to work with HUD on rehabilitating homes for veterans and their families.

I thank Chairwoman Biggert, Mr. Green, and Mr. Heck for their work on these important issues, and I look forward to hearing suggestions from our witnesses.



Congressman Joe Heck
Statement for the Record
Financial Services Subcommittee:
Insurance, Housing and Community Development
September 14, 2012

I would like to thank Chairwoman Biggert and Ranking Member Gutierrez for inviting me to participate in today's hearing and for allowing me to make a brief opening statement. Ending veteran homelessness is a critically important issue that deserves the focused attention of this Congress. In my state of Nevada, we have more than fourteen hundred veterans on the street at any given time. As such, I commend Secretary Shinseki for prioritizing this issue and for working to end homelessness for our veterans by 2015. However, achieving this laudable goal requires a focused collaborative effort between all federal, state and local agencies to ensure that the resources we provide are used in an efficient and cost effective manner. Furthermore, we need to seek out and establish partnerships with non-profits and community and faith-based organizations already providing programs and services to homeless veterans so that we can leverage their experience and expertise in these areas.

One such program is Veteran's Village located in Las Vegas. Veteran's Village, founded by one of today's witnesses, Dr. Arnold Stalk, is a converted hotel that serves as a transitional housing facility to shelter veterans while they get back on their feet. In addition to providing housing, Veteran's Village offers educational opportunities, employment and medical services, mental health counseling and recreational and fitness programs. This program is a perfect example of what can be accomplished when the public and private sector collaborate.

I would also like to take just a moment to thank the members of the Financial Services Committee for voting unanimously to pass my bill HR 6361, the Vulnerable Veterans Housing

Reform Act out of Committee on Wednesday. This bill would remove an unnecessary barrier that prevents our disabled wartime veterans from receiving the housing assistance they so critically need. A special thank you goes out to the staffs of this subcommittee, who have worked diligently to get HR 6361 through the committee. I sincerely appreciate your efforts on behalf of our nation's veterans.

Finally, I want recognize my colleague from Texas, Representative Al Green for his work to assist our low income disabled veterans. His bill, the Housing Assistance for Veterans Act of 2012, or HAVEN Act, of which I am a proud co-sponsor and which will be examined today, would establish a pilot program to provide grants to qualified non-profit organizations for the purpose of rehabilitating and modifying homes for low income disabled vets. This program would provide a critical service to our nation's heroes and ensure that they have quality and accessible housing and I would urge my colleagues to support this initiative. Again thank you for allowing me to participate and I look forward to our witness' testimony.



**Testimony
of
VetsFirst, a program of United Spinal Association**

**Submitted by
Heather L. Ansley, Esq., MSW
Vice President of Veterans Policy**

**Before the
Subcommittee on Insurance, Housing and Community
Opportunity
Committee on Financial Services
United States House of Representatives**

**Regarding
“Housing for Heroes: Examining How Federal Programs Can
Better Serve Veterans”
September 14, 2012**



Chairman Biggert, Ranking Member Gutierrez, and other distinguished members of the subcommittee, thank you for the opportunity to testify regarding VetsFirst's views concerning the housing needs of homeless, low-income, and disabled veterans.

VetsFirst represents the culmination of 60 years of service to veterans and their families. United Spinal Association, through its veterans service program, VetsFirst, provides representation for veterans, their dependents and survivors in their pursuit of Department of Veterans Affairs (VA) benefits and health care before VA and in the federal courts. Today, United Spinal Association is not only a VA-recognized national veterans service organization, but is also a leader in advocacy for all people with disabilities.

Throughout our history, VetsFirst has been integral in the development and implementation of provisions, including drafting key sections of the Fair Housing Amendments Act, that ensure access to housing opportunities for veterans with significant disabilities. Despite these and other advances, veterans who are wheelchair users continue to encounter significant architectural barriers that prohibit their full participation in their communities. Because accessible, affordable housing remains a continual struggle for many people with disabilities, VetsFirst continues to focus on the development of policies and procedures that will improve access to housing for disabled veterans.

VetsFirst is also concerned about the needs of homeless veterans, many of whom have disabilities. Whether veterans are at risk of homelessness due to inadequate housing or currently experiencing homelessness, we owe a debt of gratitude to those individuals who have served our nation. Veterans who have disabilities must be given every opportunity to reintegrate into their communities.

Housing Needs of Veterans with Disabilities and/or Low-Incomes

According to VA, 3.47 million veterans receive VA disability compensation.¹ Disability compensation is available for veterans who have an injury or illness caused or aggravated by their military service. In August 2011, 864,000 veterans reported having a service-connected disability rating of 60 percent or greater.² Among veterans of the wars in Iraq and Afghanistan,

¹ United States Department of Veterans Affairs, "Department of Veterans Affairs Statistics at a Glance." August 2012. The source of this information is the Department of Veterans Affairs, Veterans Benefits Administration and Veterans Health Administration as of June 30, 2012.

² News Release, U.S. Bureau of Labor Statistics, Employment Situation of Veterans – 2011 (Mar. 20, 2012) <http://www.bls.gov/news.release/pdf/vet.pdf>

approximately 26 percent reported having a disability related to their service.³ Of those veterans, 166,000 reported having a disability rated at 60 percent or greater.⁴

Furthermore, 300,000 veterans receive VA pensions.⁵ Pensions are generally available to veterans who are low-income and either over the age of 65 or permanently and totally disabled and who served on active duty for 90 days, at least one day of which was during a period of war. With nearly 1.4 million veterans living below the poverty line,⁶ modest pension benefits are critical for our most vulnerable veterans.

In addition to those veterans who receive VA benefits, many who require housing assistance may not receive or even be eligible for VA benefits. VA estimates that our nation has 22.2 million veterans.⁷ According to the 2010 American Community Survey, 4.3 million veteran homeowners have disabilities.⁸ Of that number, 2.7 million are veterans who are elderly.⁹ Among veterans who are overburden by housing costs, many are more likely to have a disability.¹⁰

Many veterans who have disabilities and disproportionate housing costs are either at risk of becoming homeless or are already experiencing homelessness. According to a report on homelessness released by VA's Office of the Inspector General on May 4, 2012,¹¹ those Operation Enduring Freedom/Operation Iraqi Freedom veterans who become homeless after separating from the military "were younger, enlisted with lower pay grades, and were more likely to be diagnosed with mental disorders and/or traumatic brain injury (TBI) at the time of separation from active

³ *Id.*

⁴ *Id.*

⁵ United States Department of Veterans Affairs, "Department of Veterans Affairs Statistics at a Glance." August 2012. The source of this information is the Department of Veterans Affairs, Veterans Benefits Administration and Veterans Health Administration as of June 30, 2012.

⁶ National Housing Conference, "Housing America's Heroes: Facts about Veterans and Housing." <http://www.nhc.org/media/files/VeteransHousingKeyFacts.pdf>.

⁷ United States Department of Veterans Affairs, "Department of Veterans Affairs Statistics at a Glance." August 2012. The source of this information is the Department of Veterans Affairs, Office of the Actuary, Veteran Population Projection Model (Vetpop) 2007 as of September 30, 2011.

⁸ DataFerrett tabulation of American Community Survey Data.

⁹ *Id.*

¹⁰ National Housing Conference, "Housing America's Heroes: Facts about Veterans and Housing." <http://www.nhc.org/media/files/VeteransHousingKeyFacts.pdf>.

¹¹ Department of Veterans Affairs Office of Inspector General, "Homeless Incidence and Risk Factors for Becoming Homeless in Veterans," Report No. 11-03428-173, May 2012.

duty.”¹² Furthermore, the strongest predictor of homelessness after discharge was mental illness or substance abuse.¹³

VA joined with other federal partners in 2009 in pledging to end homeless for our nation’s veterans by 2015. A point in time count in January 2011, determined that 67,495 veterans were experiencing homelessness.¹⁴ This figure represents a decline in the number of homeless veterans from the January 2010 point in time count which found 76,329 homeless veterans.¹⁵

Housing Needs of At Risk Disabled and Low-Income Veterans

Access to affordable, accessible housing is a critical issue for many disabled veterans. The ability to return home after incurring a significant disability is an important aspect of reintegrating into your family and community. For veterans who have newly acquired injuries, this may mean living with family members for a time prior to focusing on securing their own homes.

VA provides access to home adaptation assistance for eligible disabled veterans and servicemembers. These programs including the Specially Adapted Housing (SAH) grant program, the Special Housing Adaptations (SHA) grant program, the Temporary Residence Adaptation (TRA) grant program, and the Housing Improvements and Structural Alterations (HISA) program. Each program serves different veterans and provides varying levels of support.

The SAH grant program provides assistance for veterans or servicemembers who are permanently and totally disabled as the result of a disability connected to their service and who have a qualifying disability. An example of a qualifying disability includes the loss, or loss of use, of both lower extremities such as to preclude locomotion without the aid of braces, crutches, canes, or a wheelchair. It is important to note that as the result of Public Law 112-154, which was signed into law on August 6, certain post-9/11 disabled veterans who have difficulty ambulating but who do not have a qualifying disability under the current program will temporarily be eligible for the SAH grant program.

Individuals who are eligible for the SAH grant program may receive assistance to construct a house on land purchased for that purpose or on land already owned, adapt an existing house, or defray the principle owed on an already purchased house that has already been adapted. The

¹² *Id.* at ii.

¹³ *Id.*

¹⁴ Department of Veterans Affairs. About the Initiative: http://www.va.gov/homeless/about_the_initiative.asp.

¹⁵ Department of Housing and Urban Development and the Department of Veterans Affairs, “Veteran Homelessness: A Supplemental Report to the 2010 Annual Homeless Assessment Report to Congress.” <http://www.hudhre.info/documents/2010AHARVeteransReport.pdf>.

current amount indexed for the cost of construction available through the program is \$63,780. The grant may be accessed three separate times up to the maximum amount available.

The SHA grant program is a similar program that provides a smaller amount of assistance for veterans or servicemembers who are permanently and totally disabled as a result of a service-connected disability for certain disabilities. An example of a qualifying disability is the anatomical loss or loss of use of both hands. Individuals who are eligible for this program may access it three separate times up to the maximum amount of \$12,756 as indexed for the cost of construction.

Until recently, there were no options for veterans or servicemembers who were living with family members to receive housing adaptation assistance. The TRA grant program allows veterans or servicemembers who are eligible for SAH or SHA but who do not have a home of their own to adapt the home of a family member. Public Law 112-154 recently raised the maximum amount that an individual may receive under this program. Veterans eligible for the SAH program may receive \$28,000 while veterans eligible for SHA may receive \$5,000. In the future, the amount of money available through this program will not count against the money that is available to the individual through the SAH or SHA grant programs.

The HISA program is available both to veterans who have disabilities related to their service and those who are enrolled in VA's health care system but do not have a disability connected to their military service. Veterans who require an improvement or alteration to their homes due to a disability related to their service may receive up to \$6,800. Veterans eligible for SAH or SHA may also receive HISA benefits. Veterans who are enrolled in the VA health system but who do not have a service-connected disability may receive up to \$2,000.

VetsFirst fully supports the housing adaptation benefits currently available through VA. Many of our members have greatly benefited from the use of these programs. Furthermore, we support efforts to increase eligibility and funding amounts for individual grants to ensure that disabled veterans are able to live in their communities throughout their lives. We also understand, however, that we must seek to leverage all resources if we are to meet the needs of veterans who are not eligible for VA programs but for whom home adaptations are a necessity.

Veterans determined to be disabled by VA must meet stringent requirements to receive significant adaptation funding. As evidenced by the temporary expansion in SAH benefits, the need is greater than that covered by the current programs. For veterans who have disabilities not related to their service, the need for adaptation assistance is also significant. Veterans with catastrophic disabilities not related to their service are able to receive VA health care but are not eligible for SAH or SHA.

In general, 80 percent of housing adaptations are paid for by homeowners.¹⁶ For people with disabilities, many of whom are already likely to be overburdened by housing costs, these types of expenses may be unaffordable. When needed adaptations are not made, individuals may experience injuries or other severe consequences.

In addition to accessibility issues, low-income veterans, particularly those who are older, may have difficulty maintaining their homes. These veterans may have homes with stairs that create a fall risk, roofs that leak, or lack a permanent heating source. Leaky roofs can lead to damp housing conditions that may cause respiratory ailments or asthma. Alternative heating sources such as space heaters present an increased risk of fire.

A Complementary Approach to Help Meet the Needs of Disabled and Low-Income Veterans

VetsFirst and Rebuilding Together, a national housing nonprofit, have collaborated with House Financial Services Committee Member, Rep. Al Green (D-TX), in developing proposed legislation to help meet these needs. The “Housing Assistance for Veterans Act of 2012” (HAVEN Act) would authorize the Secretary of Housing and Urban Development (HUD) to establish a pilot program that provides grants to nonprofit organizations to rehabilitate and modify homes of disabled and low-income veterans.

The HAVEN Act leverages the resources of nonprofits by expanding their capacity to meet the housing adaptation and home repair needs of our veterans. Many existing housing nonprofits such as Rebuilding Together and Habitat for Humanity and more recent veteran-focused housing nonprofits have stepped forward to assist in meeting the housing needs of disabled veterans. One of the most important resources that these organizations can leverage is volunteers. According to Independent Sector,¹⁷ the estimated value of volunteer time for 2011 is \$21.79 per hour.¹⁸

Nonprofits not only bring in volunteer leverage, but also the private sector and foundations to work on this critical problem. Nonprofit housing organizations, such as Rebuilding Together, leverage more than \$3 for every one \$1 in federal funding received. Through a very small investment, the HAVEN Act would engage nonprofits to test the ability to serve those who have served. Rather than directly providing services for veterans through federal funding, the proposal helps meet the need through national nonprofits that compete for very limited funding. Neighbors across the country, through qualified nonprofits, will help address this American challenge by volunteering to help house veterans in need.

¹⁶ Center for Housing Policy, “Housing an Aging Population: Are We Prepared?”
<http://www.nhc.org/media/files/AgingReport2012.pdf>.

¹⁷ Independent Sector promotes and strengthens the nonprofit sector.

¹⁸ Independent Sector. Value of Volunteer Time: http://www.independentsector.org/volunteer_time.

The pilot program would require the HUD Secretary and the VA Secretary to establish and oversee the program to ensure that veterans' needs are addressed. We believe that this collaboration will build on the efforts of VA and HUD to work together in addressing veterans homelessness. Without the repairs or adaptations that the pilot program will provide, some veterans who would be eligible for this program may be at risk of homelessness.

Veterans who are disabled and/or low-income would be eligible for assistance. The definition of disability considers the physical and mental limitations that veterans may face, regardless of whether the limitations are connected to the veteran's service. VetsFirst supports the broader definition to ensure, for instance, that veterans who may be catastrophically disabled but whose disabilities are not connected to their service are able to receive assistance. Under the HAVEN Act, low-income veterans are veterans whose income does not exceed 80 percent of the median income for a particular area.

Nonprofit organizations seeking to apply for the grant funds available through the HAVEN Act must provide programs at a nationwide or statewide level that target veterans or low-income individuals. Preference will be given to organizations that have experience in providing housing rehabilitation and modification for disabled veterans and who serve veterans in rural areas. When applying, organizations will need to detail their plans for working with VA and veterans service organizations to identify veterans who can benefit from the program.

Using the grant funds available under the HAVEN Act, organizations will be able to modify and rehabilitate the primary residence of an eligible veteran, rehabilitate a residence that is in a state of interior or exterior disrepair, and install energy efficient features or equipment. Organizations will be required to provide a match not less than 50 percent of the grant award. The repairs or adaptations must be provided at either no cost or at very low cost to the veteran. The program would provide \$4 million a year over a 5 year period to allow for an evaluation of the effectiveness of the program.

VetsFirst is proud to support the proposed legislation and the efforts of Rep. Green to meet the needs of veterans who are low-income and disabled who are in need of housing adaptation or repair assistance. We believe that introduction and passage of this legislation would help to address a portion of the housing needs of low-income and disabled veterans who may otherwise have limited or no resources through leveraging nonprofit resources. Without expanding assistance, these veterans and their families may be left at risk.

Ending Homelessness for Veterans

As evidenced by VA's recent OIG report, disabled and low-income veterans are disproportionately homeless. While the focus of our testimony has been on the need to ensure that disabled and low-income veterans are able to remain in their homes, we want to address some of the issues that impact disabled veterans who are currently experiencing homelessness. Every effort must be made

to ensure that these veterans have access to the housing and supportive services needed to address their urgent concerns.

Although the number of homeless veterans appears to be declining, VetsFirst believes that efforts to address homelessness must be maintained at or above current levels to ensure that chronically homeless veterans have access to permanent supportive housing. Furthermore, VA and HUD must continue to work together to ensure the cultivation of accurate data, which is critical to providing an appropriate level of supports and services. Ensuring that a robust package of housing and services is available to these veterans is critical to their long-term success.

Veterans who would be appropriately served outside of the HUD-Veterans Affairs Supportive Housing program must also have the opportunity to access those housing resources. To ensure that the needs of all homeless or at risk veterans are addressed, HUD must work to ensure that veterans, including women veterans and those veterans who have dependent children, are being adequately served through the housing choice vouchers program and other appropriate housing programs. Otherwise, all needs may not be met.

HUD must also take steps to increase the stock of affordable, accessible housing. Veterans who have mobility or sensory impairments may have a more difficult time finding housing if the only affordable units are not accessible. Ensuring that accessibility requirements under current federal law are followed and providing incentives for developing additional units is crucial to expanding the number of housing units available.

Our nation must continue to assist disabled and low-income veterans who are homeless and provide greater assistance to those who are at risk of homelessness. VetsFirst believes that through continued investment in existing programs and leveraging of new ideas, we will be able to meet the needs of vulnerable veterans, including those at risk of homelessness.

Thank you for the opportunity to testify concerning VetsFirst's views regarding the housing needs of our nation's homeless, low-income, and disabled veterans. We remain committed to working in partnership to ensure that all veterans are able to reintegrate in to their communities and remain valued, contributing members of society.

Testimony of
Steve Berg
Vice President for Programs and Policy
National Alliance to End Homelessness

before the

Subcommittee on Insurance, Housing and Community Opportunity
Committee on Financial Services
United States House of Representatives

**“Housing for Heroes: Examining How Federal Programs Can Better Serve Veterans”
September 14, 2012**

The National Alliance to End Homelessness (the Alliance) is a nonpartisan, mission-driven organization committed to preventing and ending homelessness in the United States. The Alliance analyzes policy and develops pragmatic, cost-effective policy solutions as we work collaboratively with the public, private, and nonprofit sectors to build state and local capacity to help homeless individuals and families make positive changes in their lives. We provide data and research to policymakers and elected officials in order to inform policy debates and educate the public and opinion leaders nationwide.

The Alliance appreciates the important work of this subcommittee over many years to ensure the best possible response to homelessness. The focus on veterans is important. Our country is at a point where the system that addresses homelessness among veterans is prepared to lead the way, in demonstrating what can be achieved when the right interventions are brought to scale in a careful, data-driven manner, with a focus on the concrete goal of ending homelessness. In this testimony, the Alliance would like to report to the subcommittee our analysis of where we have come so far on veterans homelessness, and what needs to be done to finish the job by the end of 2015.

Progress to date

Behind the scenes, in large and small ways, the country has moved toward ending homelessness for veterans. The impacts have barely begun to show up in the numbers, but for people who have worked on the issue, the changes have been remarkable.

Quantifying – There is an increasing level of seriousness about quantifying the problem. The rough estimates of prior years have been replaced by actual enumeration as the standard. Different subpopulations of homeless veterans are more clearly identified and sized. The establishment within VA of the National Center on Homelessness Among Veterans, working with top researchers from academia, has increased the ability to monitor progress overall and on important operational objectives. The coordination between HUD and VA on annual point-in-time counts to include veterans has allowed us to have a realistic measure of progress that is helping to motivate everyone involved.

The right range of program models – VA and HUD together have the statutory authority to run programs providing a full array of interventions, based on proven experience in the field.

The HUD-VASH program, designed for those veterans who have the most severe disabilities, have been homeless the longest, and are the most disconnected from mainstream society, has been implemented across the country. Since the 1990s, people working on homelessness have increasingly understood that the intervention known as permanent supportive housing can be successful at getting even the most hard-to-serve homeless people off the street and into safe, modest apartments. Once housed, with the right package of treatment and medical and supportive services in place, research showed that people who had been chronically homeless quickly came to have fewer encounters with expensive emergency services and institutions such as emergency rooms, acute mental health treatment, detoxification, jail, and, of course, homeless shelters. In other words, when targeted correctly, permanent supportive housing made the lives of homeless people immeasurably better, and saved taxpayers money. HUD made a substantial investment in permanent supportive housing for homeless people during the George W. Bush Administration. Congress followed up with new investments in HUD-VASH, which in an earlier demonstration had proven effective at getting homeless veterans with mental illness into stable housing.

The **Homeless Grants and Per Diem Program** has been made more flexible. This includes a recent move by VA to use Grant and Per Diem to fund a transition-in-place option, allowing a scattered-site model. This intervention allows nonprofits funded by VA to more effectively serve veterans who need a medium-term, residential program due to conditions such as addiction that are debilitating but that can improve significantly over time with intensive supports.

Finally, through the new **Supportive Services for Veteran Families** program, VA has the authority to provide funds for rapid re-housing programs for homeless veterans. Rapid re-housing is a program model that HUD funded successfully in the Homelessness Prevention and Rapid Re-Housing Program from the 2009 economic recovery legislation. As did HPRP, SSVF also provides authority to operate homelessness prevention programs.

Rapid re-housing, as the most recent addition, may be unfamiliar to some readers. It is an intervention based in the observation that many homeless families are homeless due to a short-term crisis, leading to a drop in income that makes paying rent impossible. This is particularly common during a period of high unemployment. Rapid re-housing programs focus on two things – getting the homeless person or family in to housing (through cultivating relationships with landlords, providing help with security deposits and sometimes the first few months' rent, and removing other barriers to rental), and improving the household's income (through intensive employment assistance and/or access to benefits where appropriate). Either of these goals can be met through close work with other service providers in the community. The approach involves short-term, intensive assistance, then quickly puts the onus back on the household to maintain longer term stability and move forward. It avoids long-term dependency, and allows people to escape from homelessness for substantially less money than other programs. It is particularly useful for veterans because of the extensive employment, services, and benefits infrastructure that is already available.

Funding at scale – In the House and Senate MilCon Appropriations bills, and in the Administration's budget, the amount requested for VA homelessness programs is the same, providing modest increases. HUD's funding for its part of the HUD-VASH program matches the VA funding. The Alliance's best estimate is that this capacity, if continued in the future, will be sufficient to provide the right intervention to each homeless veteran, and each veteran at imminent risk of homelessness, by the end of 2015.

A national priority – VA, as mentioned above, instituted the National Center on Homelessness Among Veterans, which has helped focus on the most effective kinds of interventions. It has also brought talented staff from around the country, from both inside and outside VA, to work in its homelessness team at headquarters, adding to the important capacity that was already in place. Through a range of efforts, VA headquarters has promoted the goal of ending homelessness to its regional and local offices and Medical Centers. At the same time, HUD has retained and increased its focus on veterans homelessness, improving cooperation between the Public and Indian Housing division, where HUD-VASH is administered, and Community Planning and Development, where the McKinney-Vento homelessness programs are administered. Finally, the U.S. Interagency Council on Homelessness has taken an active role in promoting interagency cooperation, in Washington and in the field.

A mindset change – All of these individual changes contribute to a paradigm shift that will be essential to reaching the goal. This is a shift from funding disconnected programs that focus only on the individuals they decide to serve, to funding a system that exists and is driven to solve a problem, that problem being the continued travesty of homelessness among veterans. The system focuses as much on the homeless veterans who are not yet being served, and on getting the result of stable housing as efficiently as possible for everyone. The focus on that goal has created a sense of urgency that has not been seen in the past.

All of these changes have created the immediate and very real possibility that when the results of the January 2016 count of homeless people come out, the number of homeless veterans, rather than the 67,000 it was in January 2011, will be much closer to 6,700, or 670.

Challenges

Compared to where we have come in the past 20 years, the changes that still need to happen in order to reach this goal are manageable. They are not, however, insignificant. There are challenges that could stop us from getting to zero.

Targeting – For all efforts to end homelessness for any population, probably the most difficult challenge is for people running programs to take a chance on those whose problems and barriers to stability are more severe. For veterans, overcoming this tendency will be most important in the HUD-VASH program. This is the most intensive intervention that the system has available. If homeless veterans with the most severe barriers cannot get help from HUD-VASH, they will not get help from anyone, and they will continue to live and die on the streets. In turn, the less intensive programs will need to serve every homeless veteran who is not served by HUD-VASH. Fortunately, veterans for the most part have access to a rich array of medical, employment, and other services through VA and other sources. The key to success in housing more disadvantaged veterans is to ensure that the housing programs are well coordinated with other resources.

To achieve targeting goals, it will be essential for VA staff and contractors to work closely with others in their communities, especially HUD-funded homelessness programs. This is particularly the case with HUD-VASH. Many of the most severely disabled and chronically homeless veterans are, for various reasons, estranged from VA, but may be well-known to others in the community, such as ESG-funded shelters, police, or emergency rooms in hospitals. If local VAs make decisions about which veterans should receive help from HUD-VASH without consulting with the rest of the community, many of these veterans will be left behind. A useful rough measure of the targeting of HUD-VASH is the percentage of HUD-VASH tenants who were “chronically homeless,” as that term was defined in the HEARTH Act,

when they were re-housed. The percentage was too low in the first years of HUD-VASH expansion, probably due to pressure to rent the vouchers up quickly. HUD and VA headquarters have worked to push communities to increase the percentage of HUD-VASH vouchers going to chronically homeless veterans. This percentage should be monitored by Congress and expected to increase, especially once SSVF is expanded to provide another resource for those with less severe conditions.

Managing local systems – For these resources to have the impact they need to have, it will be necessary for each community to have structures in place to find every homeless veteran, and connect each homeless veteran to the right intervention to end his or her homelessness. Without this kind of systemic approach to resource distribution, individual programs operate in a vacuum, resources are not aligned with need, and many veterans go unserved. Individual programs and federal funders will need to clearly define in each community which program is appropriate for veterans with which characteristics. A process will need to be established, with buy-in from all sides, for matching individual veterans with programs. The people operating this process cannot be satisfied with serving the veterans who come to them – the system will need to reach out to others in the community, work with outreach teams, and find all homeless veterans in the community, including those who are completely disconnected from social supports and/or who have an adversarial relationship with VA.

To develop such a system will require close cooperation between VA and VA-funded programs, and others in the community who may encounter homeless veterans. The HUD-funded homelessness programs will be particularly important. Fortunately, due to HUD's ongoing implementation of the HEARTH Act, these programs are right now going through a similar local process of developing a coordinated system for assessing the needs of each homeless person and ensuring that each one gets matched with the right program.

Re-housing, then prevention – For everyone working on homelessness, the ultimate goal is to develop a homelessness prevention capacity so that people get help with housing before they ever become homeless. With tens of thousands of veterans still homeless, however, the first task is to get those who are already homeless off the streets, out of shelters, and in to housing. If there is a premature shift to prevention, veterans who are already homeless, who may be harder to find or more complicated to house, will get left behind. Communities will get the best results if they use the resources at hand to make a strong, rapid push to find and house every homeless veteran, with supports to ensure that they will stay housed; and then shift to prevention programs that target veterans who are on the verge of homelessness, and who would become homeless without the kind of interventions that SSVF, for example, can provide. HUD's experience with HPRP will be invaluable in helping VA and others manage this shift and implement homelessness prevention in a manner that is maximally effective.

In the long run, there will be work to do in Congress, once the number of homeless veterans approaches zero in many communities, to determine which veterans are at real risk of homelessness and need more intensive interventions than SSVF can provide in order to stay housed. Existing programs that now serve homeless veterans will be ideal to do that work. Transitioning homeless veterans programs to a country where no veteran is homeless will be complicated but joyful work.

Conclusion

The National Alliance to End Homelessness is in constant communication and interaction with people working on homelessness around the country, including veterans homelessness. We can report that there is a hunger to finish this job. We have been talking about the intolerability of veterans

homelessness for too long. Thanks to important work that people in Congress and several Administrations, in both parties, have done, we can see the end of this travesty right in front of us. The last few steps will be hard ones to take, requiring people to change what they do, to take risks, and to think in new ways. Compared to what veterans have given, these challenges should not be daunting, but should be embraced. We are confident that they will in fact be embraced by people working on this problem at all levels and in all sectors. We look forward to working with this subcommittee and others in Congress to achieve this goal.



Statement for the Record of the

National Coalition
for Homeless Veterans

**United States House of Representatives
Committee on Financial Services,
Subcommittee on Insurance, Housing and Community
Opportunity**

**“Housing for Heroes: Examining How Federal Programs
Can Better Serve Veterans”**

September 14, 2012

**Chairwoman Judy Biggert, Ranking Member Luis Gutierrez,
and distinguished members of the House Committee on Financial Services,
Subcommittee on Insurance, Housing and Community Opportunity:**

Thank you for having me here to speak on this critical issue. My name is Baylee Crone and I am here today representing the National Coalition for Homeless Veterans, the only national organization solely dedicated to ending and preventing homelessness among veterans. I am humbled to be part of this panel of distinguished experts, many of whom come from organizations NCHV is proud to call members; these organizations are a few of the more than 400 NCHV members working tirelessly over the past 22 years to help veterans move out of homelessness and into gainful employment, sustained housing, and independent living.

We are here today to talk about housing options for homeless and at-risk veterans. This discussion often starts with HUD-VA Supportive Housing (HUD-VASH), the collaborative program between the U.S. Department of Veterans Affairs (VA) and the U.S. Department of Housing and Urban Development (HUD) that pairs comprehensive case management and services from the VA with Housing Choice vouchers from HUD.

This is often the starting point for a reason, given the incredible success to date. Let me please take this moment to express our deep gratitude for your bipartisan leadership in advancing the build-out of HUD-VASH. Through FY 2012, more than 44,000 vouchers were distributed to the veterans most in need. With the President's FY 2013 ask, we will be closer to the goal of housing 60,000 chronically homeless veterans than many thought was feasible in such a short period of time. With lease-up rates averaging nearly 1,000 per month, we are on target to reach this goal prior to the end of the VA Five-Year Plan to End Veteran Homelessness. This targeted expansion has changed the world as we know it by facilitating access to permanent supportive housing for disabled and extreme low-income veterans who would likely fail to achieve stability without this program.

While our progress on HUD-VASH represents a noble accomplishment, HUD-VASH is not the full answer, is not the only important housing program for homeless veterans, and does not meet the needs of the majority of homeless and at-risk veterans. This is an important yet positive distinction. Not all homeless and at-risk veterans need or are eligible for the intensive case management and sustained housing support of a HUD-VASH voucher, but these veterans still have critical care needs and difficult obstacles we can help them overcome by supporting integrated community planning and increasing access to affordable housing opportunities.

I am often asked why veterans experience homelessness. I respond that it truly depends on the circumstances and that each situation is unique because we are dealing with people, not just numbers. Many veterans struggle with obstacles common in most homeless populations: unemployment and underemployment, broken families, illness or disability. Veterans also struggle with barriers related more directly to their service, such as disabling conditions related to PTSD, TBI, and military sexual trauma that impact their

likelihood of developing anxiety disorders, substance use disorders, depression, or a combination of these factors.

Understanding the risk factors is important, but just as important is maintaining a comprehensive system of care to maximize the access points for veterans experiencing or at risk of homelessness. We must make sure that these various access points are connecting homeless veterans to services that meet their more pressing needs, and at this time, we recognize that the most pressing need is access to affordable housing. The first comprehensive assessment of homeless individuals in 1997 ranked access to long-term housing as their most important need, and since then, access to long-term housing options has repeatedly been rated as a Top Ten Unmet Need in the VA's annual CHALENG Reports.

When I say "access to affordable housing," I mean both options that increase the numbers of housing units available and that increase veteran access to existing units designated for low-income individuals. These options go beyond HUD-VASH and several of these programs will be discussed in detail by my colleagues. Now is the time to secure that access, and we have the programs and momentum to make it happen if we can continue connecting the right pieces within most communities.

This connectivity takes on various forms, depending on the situation of the individual veteran. Homeless veterans in Grant and Per Diem Programs (GPD) will have housing needs that fall along the entire housing spectrum, from rapid re-housing in independent units to shared living situations to HUD-VASH referral.

For the nearly 25,000 veterans graduating from Grant and Per Diem (GPD) programs each year, successful rapid stabilization and transition to permanent housing requires appropriate referrals within a coordinated service delivery network, connectivity to landlords, employment training and access to income supports, and appropriate funding to cover expenses like utility payments or security deposits that would otherwise prevent the veteran from effectively executing a lease agreement. For veterans in GPD, access to affordable housing provides the main pathway for successful placement and a real reduction in the numbers of homeless veterans in the sheltered and unsheltered counts. The need, however, goes beyond those in GPD programs.

The numbers of at-risk veterans accessing homeless-specific VA services is already increasing. We see these trends in the thousands of veterans receiving stabilization supports and rapid re-housing through the VA's Supportive Services for Veteran Families (SSVF) Program and in the staggering numbers of transitioning veterans who are low-income and likely to experience homelessness. For the 1.4 million veterans below the poverty line, especially the more than 140,000 who are likely to experience homelessness, stabilization and rapid re-housing will require a closely coordinated effort within communities to appropriately target resources and services to maximize benefits to veterans and their families.

Additionally, in the next five years, approximately 1.4 million service members will return to civilian life. With a poverty rate for veterans that has increased from 5.6% in 2000 to 6.9% in 2010, we can anticipate increased demand for efficient service delivery and rapid re-housing interventions. Availability of housing units, resources to secure those units, and community supports to ensure continued housing stability are fundamental components of the dual mission to end and prevent homelessness among veterans.

Fortunately, community providers working with homeless veterans realized many years ago that the integrated service delivery network built around the health services of a VA Medical Center would provide the best foundation to connect homeless veterans to the services they need to promote housing stability. Homeless veteran service providers and their government partners at VA, HUD and the U.S. Department of Labor (DOL) have realized the mutual benefit they each bring to the table. Together, they bring expertise in service delivery, funding and health care that can foster housing stability for homeless veterans in local communities. These veteran-specific providers work collaboratively with their partners in several agencies.

Starting in 2011, we were given the opportunity to ensure that this coordinated service delivery network built around the VA Medical Center and involving the nation's best homeless service providers is more thoroughly connected to HUD's mainstream homeless resources. Prior to 2011, collection of veteran-specific data was not required as part of the Point-in-Time (PIT) count of homeless individuals conducted for the Annual Homeless Assessment Report (AHAR) to Congress. Up to 35% of Continuums of Care either did not collect veteran data or did not collect it at all locations within their Continuum.

With federally mandated veteran integration into data collection and consolidated planning within Continuums of Care, homeless veterans have the opportunity to access increased affordable housing options. Not only do we have more reliable data on the overall numbers of homeless veterans from year to year and over the span of a year, we also have a better sense of veteran representation within local homeless populations, which allows us to more effectively communicate and advocate for homeless veteran service providers and their clients' needs.

This data clarity now allows consolidated planning partners to more accurately prepare for the housing needs of veterans in their communities. This does not demand proportional representation, but rather equitable access to housing options and the supports that facilitate permanent housing placement for homeless veterans.

These veterans are not broken. They are often injured, physically and emotionally, but are not beyond help if assistance is delivered with purpose. Access to affordable housing is a fundamental component of this healing process, allowing veterans to harness their skills and strengths to regain their role in the communities they fought to protect.

As we move forward in this era of increased interagency collaboration and integrated community planning, we have better opportunities to provide homeless veterans with the tools to remain successfully and sustainably housed.

Baylee Crone

Technical Assistance Director

National Coalition for Homeless Veterans

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NCHV Staff Biography

Baylee Crone, Technical Assistance Director

Baylee Crone currently serves as the Director of Technical Assistance for the National Coalition for Homeless Veterans (NCHV). In this capacity, she is responsible for oversight of NCHV's research and communications staff to ensure that service providers around the country have access to timely, accurate and comprehensive resources to support their program activities. NCHV's research and communications activities annually provide more than 300 unique resources, including grant guidance materials, programmatic tools, and research and policy updates through a dynamic website that receives more than 80,000 hits per month. In addition to providing regular intensive, one-on-one program development and expansion consultations with HVRP grantees and their partners, Crone develops informed trainings and best practices to help facilitate stronger outcomes for grantees and the homeless veterans they serve. Utilizing a strong relationship with partners throughout the country, Crone serves as a liaison between grantee organizations and their partners in state and Federal agencies.

Prior to joining NCHV, Crone managed a series of corporate foundation grant programs, evaluating grantee performance and monitoring budgets and deliverables, and trained company staff on organizational structure and theories of change. Since 2008, Crone has also engaged with multiple organizations providing direct services to veterans and at-risk populations, including a regional Lifeline suicide prevention hotline, CAUSE's massage therapy program at Walter Reed Army Medical Center, RAINN's Military Sexual Assault helpline, and the Veterans Artist Program. She graduated with honors from the University of California, Santa Barbara, where she earned a Bachelor's Degree in Political Science with an emphasis in Public Service and Global Security. She is currently pursuing her Master's Degree in Vocational Rehabilitation Counseling at the George Washington University to provide vocational services to veterans with Traumatic Brain Injury.

My military experience:
Cassandra Flanagan

I enlisted in the United States Army in 1999 at the age of seventeen with a small suitcase in hand and my first duty station was Korea. Later, I was ordered to the 4th Infantry Division on Fort Hood, Texas. I deployed to Iraq the first time from a unit in that division. I received orders for Iraq a few months later, after reenlisting and being reassigned to Fort Drum, New York.

Once my term of service were completed in 2006, I returned home to Sicklerville, NJ (a suburb of Camden, NJ), with a DD214, a beautiful three year old daughter, a set of divorce papers, a host of latent internal writhe, and excitement about my new era in life mostly joy and excitement. I'm a veteran and I am going to use all my skill and talent to do something meaningful with myself. I decided to get an associate degree from the local community college, after graduating I was accepted at Temple University.

Why was it difficult to secure housing?

During those six years of college I rode my bicycle to school, worked odd jobs, had short term employment, begged teachers to bring my daughter to class, and ate ramen noodles. In general, I lived the life of a college student. I felt blessed and deeply grateful to have the Montgomery G.I. Bill at my disposal. Often times it was my sole documented source of income; one thousand plus dollars of tax free money awarded by the government on a monthly basis. I secured housing by begging rental managers and landlords to accept this as proof of income, I pouted with child in tow, brought in cash, set up furlough accounts and whatever other requirements property managers requested. Summer months where especially difficult, and I got in the habit of saving my income tax to pay rent during the summer months because the G.I. Bill rates are lower.

What suggestions do I have to improve outreach?

Before I found my way to the Philadelphia Veterans Multi-Service and Education Center (PVMSEC)

▲ I did not have enough income

▲ Disability and other government income cannot be claimed as income on finance assessment documents

▲ No organization will help you until you have an eviction notice in hand.

What programs organizations or individuals helped you the most?

▲ My mother, uncle and sister would baby sit for free while I worked odd jobs at odd times

▲ The maintenance man at the apartment complex, Mr. Charles would bring me fish he caught in the ocean once a week (I include this because it really helped me get by, knowing the meat portion of the meal was already provided)

▲ Scott Marcus and Associates legal team

▲ Budgeting and bankruptcy

- ▲ Financial education
- ▲ Payment arrangements/ extensions fee for services

- ▲ The Philadelphia Veterans Multi-Service and Education Center
 - ▲ Case management
 - ▲ Housing assistance-security, first, and last month's rent
 - ▲ Furniture assistance (Beds)
 - ▲ Food Vouchers

▲ Partnership and teamwork, at least locally. All the veteran service organizations should share a computer system or have monthly classes where they are all equally informed of what other organizations are experienced in providing veterans assistance. Maybe even an awareness of how many resources remain for the fiscal year, so veterans are given direction, even while being turned away from one organization. For example: I just found out there is a place in the next town over that has rooms for vets until they get themselves together. I'm not sure of the details but with all the organizations I spoke with and ineligible for someone should have informed me about this.

▲ Veterans should be working at those places designed to assist veterans. However unintentional, the attitude of most civilians towards veterans (specifically when the veteran is expressing a need) is very discouraging and damaging to the mental health and emotional state of ex-warriors.

▲ Organizations should have a clear process that is typed up and given to the veteran. Step 1, 2, 3... Etc, with approximate time frames. Confusion comes when the process is not understood. You feel like you are waiting forever, no one has answers.

▲ Company travel or a car that is shared will help case managers assist and assess individuals without putting extra burdens on the veteran.

Often, the programs have unrealistic expectations/rule of homeless or nearly homeless veterans. You have to call them once a week or attend a meeting once a week. I don't have rent money; I'm struggling to buy food and clothing for my child, not to mention maintaining transportation fares bus, train, taxi etc. I have no phone, except when I go to work and I'm not really suppose to use that one for personal calls. It's not that I am lazy or undisciplined; I simply don't have the means. With this in mind:

▲ Complete furniture assistance would be a good help or provision to the assistance I received through SSVF. I was lucky to work with PVMSEC as they anticipated and assisted me with furniture. I am completely grateful for what I have received. However, I know it would improve the lives of future veterans if receiving housing assistance did not automatically disqualify the recipient from receiving other services, specifically those that can help the veteran maintain new housing. I was relocated to another state to avoid homelessness. The circumstance left me isolated from my support system, and unable to secure employment in my new location.

▲ Employment services and training should remain available after receiving housing assistance.

Overall, PVMSEC was the only organization that truly helped me secure affordable housing. When I met with the project coordinator, Jack Ries and my case manager, Aronda Smith for the first time I felt appreciated and respected. I instantly knew I was speaking with fellow veterans. I was rapidly assisted with all my needs. They felt my urgency and sense of abandonment and matched it. Everything went quickly and smoothly. Whenever I have a question or need advice concerning veteran issues I call my

case manager. I visit the center when I need a hot meal and am short on groceries. It truly feels like a home away from home.

WHO WE ARE – WHAT WE DO**THE PHILADELPHIA VETERANS MULTI-SERVICE & EDUCATION CENTER**

Services and programs are diversified in scope with an individualized approach. They include:

Veteran Benefit / Entitlement Assistance: PVMSEC employs two full time accredited Veteran Service Officers possessing experience and in-depth knowledge of the VA system. One is a Vietnam Veteran and one an Iraq Veteran. Last fiscal year 348 Individual Veterans were assisted resulting in 1.5 million dollars of VA compensation.

Employment and Training Services: Designed with the current job market in mind, allowing Veterans the ability to acquire the necessary skills to compete for demanding positions and to earn a livable wage. Funded through the Department of Labor, last fiscal year 216 individual Veterans were trained and 153 were placed in employment.

- As a component of training, PVMSEC also has an Incarcerated Veteran Training Program and attends Philadelphia Veterans Court every Friday and works with the Philadelphia VA Medical Center Veterans Justice Outreach Representative.
- This year the National Coalition for Homeless Veterans (NCHV) identified PVMSEC as a Department of Labor, Homeless Veterans Reintegration Program “Best Practices” agency. This was based on a NCHV collection of successful HVRP profiles from across the country, including a wide range of market models.

Homeless Veteran Services: Since our beginning in 1980, PVMSEC has provided assistance to homeless Veterans and Veterans in danger of this life situation. Services have expanded, providing a full continuum for homeless Veterans. Components include:

- *The Perimeter*, a homeless day service center operating as a “stand down” five days a week, last fiscal year had 16, 337 Veteran encounters providing 72,474 service hours.
- *LZ II*, a 95 Bed male transitional housing residence, served 210 male homeless Veterans last fiscal year.
- *The Mary E. Walker House*, a 30 bed female transitional housing residence, served 59 homeless women Veterans last fiscal year.
- *Shelter Plus Care*, 30 Units of HUD subsidized housing for Veterans only, provided 33 Veterans with subsidy, supportive services and case management.
- *Supportive Housing Program*, 10 Units of HUD subsidized housing for Veterans only, provided 11 Veterans with subsidy, supportive services and case management.
- *Supportive Services for Veterans and Families (SSVF)*: VA funded support grant that assisted 115 Veterans and Veteran families with housing services; placed 63 homeless Veterans/families into permanent housing; and 52 Veterans/families received homeless prevention services
- *Homeless Prevention and Rapid Re-Housing*; awarded to us by the City of Philadelphia from its federal *American Recovery and Re-investment Act* initiative funding to work exclusively with Veterans during the three year period of grant commitment. 319 individuals and families were placed in housing.

Veterans Transition Assistance: Freedom and Honor, is a transitional training program with a focus on those Veterans struggling with combat stress and readjustment issues resulting from one or more deployments in Operation Iraqi Freedom (OIF), Operation Enduring Freedom (OEF), and other military operations. To date the Freedom and Honor team has conducted over 60,000 hours of training to more than 7,000 Veterans across 19 states

Additional On-site Resources: Over the past 32 years, PVMSEC has established a wide range of community partnerships and increased our efforts to provide the most current and sought after resources for Veterans within our agency.

- PA CareerLink (A Veteran Employment Specialist)
- Philadelphia VA Medical Center Social Work staff

- Philadelphia VA Regional Office Representative (Benefits and Entitlements)
- Homeless Advocacy Project (legal services)
- Weekday shuttle service to and from the Phila. VA Medical Center and local shelters
- Philadelphia VA homeless outreach team
- Emergency food and clothing
- Open Computer Lab (Internet job site assistance)
- Internet employment application assistance

Prepared Statement of Eileen Higgins, Vice President, Housing Services, Catholic Charities of the Archdiocese of Chicago, Chicago Illinois

Chairwoman Biggert, Ranking Member Gutierrez, and Members of the Committee: I am Eileen Higgins, and I am here representing Catholic Charities of the Archdiocese of Chicago where I am Vice President and in charge of Housing Services, including those programs serving homeless Veterans.

Catholic Charities of the Archdiocese of Chicago is the social service arm of the Catholic Church in Cook and Lake Counties, Illinois. The Agency is under the auspices of our local Catholic Bishop, Francis Cardinal George, O.M.I. We are also a member agency of Catholic Charities USA, and our Administrator is the Chair of Catholic Charities USA's Board Social Policy Committee.

Catholic Charities has a 95-year tradition of providing client-centered services through intensive case management for difficult-to-serve populations. The agency also delivers services tailored to meet individual client needs through a comprehensive network of collaborative partners in order to reduce redundancy and add value to the community served.

Persons without homes or on the brink of homelessness struggle with similar concerns: few affordable housing options, low-paying jobs, and lack of access to mental and physical health care and support. Veterans facing homelessness may have experience many conflict-related injuries, both physical and psychological. Reentry to civilian life is often impeded, and the Veteran experiences a downward spiral into homelessness. Additionally, employment can be challenging, due to both the current economic climate as well as the need for training and transferable skills to enter the civilian workforce. Catholic Charities is committed to bringing out the best in each Veteran by providing wrap-around services to assist them in achieving self-sufficiency to the highest degree possible. We encourage decision-making, self-determination, creativity, and accountability. We provide the knowledge, tools, and techniques to empower our Veteran clients to make informed choices; strengthen their capacity to regain control of their lives; reinforce their ability to manage and adapt to change; and support Veteran clients as they rebuild their stability.

For nearly a decade, Catholic Charities has recognized that many of our clients needing emergency services were Veterans. Homeless and hungry Veterans dine at Catholic Charities' "evening suppers;" visit our emergency assistance centers for food, clothing, and shelter; access care through our substance abuse programs; and benefit from our case management and counseling programs. Catholic Charities also administers homelessness prevention call centers for both the City of Chicago and Suburban Cook County. We know how to reach Veterans, and we know how to empower persons to overcome homelessness.

Recent, successful homeless and low-income Veterans housing initiatives

One recent, successful homeless and low-income Veterans housing initiative is Catholic Charities own St. Leo Campus. The Campus includes a 141-unit supportive housing residence for Veterans built by a collaborative effort of VA, State and local government and private funding, among which is the Illinois AMVETS Service Foundation. Development of the

Residence was part of a national pilot project made possible by the VA, who invited Catholic Charities to create transitional housing for Veterans under the Homeless Veterans Comprehensive Assistance Act. The majority of apartments are subsidized through the HUD VASH and Shelter Plus Care voucher programs. The campus also contains a Health and Education Building, which houses a VA outpatient clinic, a library and computer center, a resource and job training center that incorporates counseling and supportive services, and a Veterans' memorial garden. It is the only one of five locations selected for this national pilot project that was actually built.

Subsequent funding through the U.S. Department of Labor and the U.S. Small Business Administration has allowed us to expand the services to include a Veterans' employment and training program. There are many partners in the successful administration of this program as well, including everyone from local private employers to the local VA Health Administration and Council of Network Homeless Coordinators.

For more than five years, Agency representatives have participated in monthly gatherings with VA staff and Veteran services providers from VISN 12. These meetings allow for coordinated delivery of care and ongoing publicity for key programming. In fact, the key to the success of this program is the collaboration of so many partners in order to provide all of the wrap around services necessary to assist Veterans who have multiple barriers to housing and employment, including mental and physical disabilities, chronic health problems, behavioral health issues, criminal records and poor work histories. The Veterans in our care receive intensive case management and supportive services plus referral to partners for services to address their complex levels of need.

At a higher level, the HUD VASH voucher program is entirely key to assisting homeless Veterans, whatever their situation, because it provides funds for case management services associated with the housing. These intensive, personalized case management resources often make the difference between sustained stability and return to housing crisis.

Obstacles to federal agencies' collaboration to effectively administer housing and services for homeless and low-income Veterans

There are certain obstacles to collaboration: Clearly defined roles and responsibilities, and the communication of these, among them. Early on we experienced a breakdown in communication among our federal partners when it came to a decision about who was coordinating the case management services, and found it necessary to take the lead in doing so. On paper this seemed to be a duplication of services. Catholic Charities own analysis of the situation led us to develop a system that played to every partners' strengths.

Obstacles that homeless and low-income Veterans face in securing housing assistance and services from federal programs

When a young man or woman goes into service, it is out of a sense of pride for their country, to support their education, or to open doors to a better future for themselves and their families. While their time of service is a rewarding experience and a step toward a promising future, many experience unfortunate and life-changing circumstances. As a result of their time in combat, soldiers may experience Traumatic Brain Injury (TBI), Post Traumatic Stress Disorder (PTSD),

severe medical problems and substance abuse. These factors contribute to problems among Veterans, such as mental illness, limited job skills, lack of adequate employment, unemployment, incarceration and even homelessness.

Our military represent some of the strongest men and women among us, but due to the nature of combat, they often come home physically damaged. From a simple broken bone to a life-altering illness, Veterans may return to American soil with a wide range of physical health problems. In addition to multiple health problems, many Veterans often struggle in their attempts to reenter the work force, and when they do, they have difficulty earning a living wage. Experiencing inconsistent and low-paying employment, combined with a significant lack of affordable housing, Veterans find homelessness a serious concern, and frequently a reality.

After selflessly serving our country, all homeless Veterans are entitled to comprehensive benefits. In some cases, it is simply a lack of information or inability to access existing resources that keep Veterans disconnected. Some of the obstacles homeless and low-income Veterans face in securing housing assistance and services relate to their sense of trust in the government agency providing the services. This is more prevalent among populations of older Veterans. Catholic Charities has been able to position itself as a trusted intermediary and has secured many existing benefits for our older, chronically homeless Veteran clients.

Outreach efforts to promote awareness about the nature and availability of VA benefits have begun and should continue to be widely promoted so that Veterans can more easily access the services they require and to which they are entitled. Service expansions would also provide Veterans with access to a wider range of programs in their communities, helping them achieve dignity and self sufficiency.

Obstacles that non-profit entities and other service providers face in helping homeless and low-income Veterans secure housing assistance and services from federal programs

The obstacles that non-profit entities and other service providers face in helping homeless and low-income Veterans secure housing assistance and services from federal programs are largely the problems of this present economic situation: there is not adequate supply to meet the demand. There are not enough vouchers or other monies available to meet the needs and there are not enough supportive services funded for Veterans to prevent them from becoming homeless in the first place. There are good programs in place; there is not enough funding to reach every Veteran in need.

Walking to self-sufficiency with a wounded Veteran can be a long process of rehabilitation and relationship requiring time, patience and determination to open doors allowing the Veteran to gain back their dignity. Ensuring Veteran programs meet the need of the individual Veteran and are not 'cookie cutter' programs can be a challenge.

Suggestions for improvements to federal housing programs to better service homeless and low-income Veterans.

- Continue to expand the creative outreach services that increase awareness about the nature and availability of all benefits from the VA.

- Continue to publicize and provide assistance to Veterans so that they can claim their rightful benefits and compensation based on service to their country.
- Explore different avenues to better explain benefits to Veterans, whether or not they had access to readjustment counseling.
- Expand initiatives to reduce the backlog of claims for benefits pending with the VA.
- Expand tax relief for Veterans; in partnership with the business community, create educational, apprenticeship and vocational training opportunities for Veterans with disabilities to enter or return to the work force.
- Commit to fully funding all portions of plans to end Veteran homelessness and provide funding for supportive services in permanent supportive housing.
- Fund creative solutions that recognize the intersection of employment, housing, and mental/physical health.
- Pursue further development of affordable housing for elderly and disabled Veterans.

Thank you

Thank you for the opportunity to testify before the Committee. I've told just a little of the story. On behalf of Catholic Charities of the Archdiocese of Chicago and the Veterans whom we are privileged to serve, we look forward to working with all of the Members of the Committee to support programs that incorporate these principles and address these issues. Programs and funding for Veterans, particularly homeless Veterans, have received bi-partisan support. The future of our Veterans is not a political party's issue. It's America's issue.

Thank you again for allowing me this time today.

Prepared Statement of Caesar Hill, Veteran, United States Navy, and Community Affairs Manager, Catholic Charities of the Archdiocese of Chicago, Chicago Illinois

Chairwoman Biggert, Ranking Member Gutierrez, and Members of the Committee. I am Caesar Hill, and I am here to appeal to you to intensify and support all programs and services for the betterment of my fellow veterans, especially those of housing. In 2010, VA Secretary Shinseki set bold goals for his department in addressing homelessness among veterans, pledging to reduce the number of homeless veterans from 131,000 in 2008 to 59,000 in 2012.

Hand in hand with housing is a need for employment: The unemployment rate for veterans who served on active duty in the U.S. Armed Forces at any time since September 2001—a group referred to as Gulf War-era II veterans—was 12.1 percent in 2011, according to the U.S. Bureau of Labor Statistics. There is also a need to examine service-connected disability benefits.

I do not believe that this asking too much, but appealing for that which is decent, and deserved.

All my life, I have performed the “American way,” a loving, caring, encouraging and supportive family, a college graduate with substantial professional employment before my enlistment into the United States Navy starting in 1977, as well as after receiving a Naval commission in the United States until 1983. I returned to Chicago and eventually received an appointment under then Mayor Harold Washington as District Manager for the Chicago Department of Human Services, until the Mayor’s death in 1987. There followed a series of hirings and layoffs, always related to program cuts or budgetary constraints. In 2004 I faced a system-wide layoff, could not bridge the gap, and I eventually became homeless. Despite this circumstance, I recalled two of my family’s strongest rules: Rule #1 – Never give up, and Rule # 2 – Always remember rule number one. This is why my dream is to complete the MBA program in which I am currently enrolled.

I stayed in the Lincoln Park Community Shelter for 18 months. The shelter’s challenging and rigorous programming calls for accountability of guests in accomplishing short and long term goals towards economic stability and permanent affordable housing. Although I became a substitute teacher while there, I was unable to move into affordable, permanent housing because this was not permanent employment.

I departed there for St. Leo Campus for Veterans; the first of its type, large-scale, single-population residence for homeless veterans. The housing stability, along with the supportive programs and services provided there, and made possible through the Catholic Charities of the Archdiocese of Chicago, brings about camaraderie of veterans from all branches of the military services, and much needed healing, rest and respite, and stabilization. Other elements include:

- Case management services
- Programs addressing the challenges of substance abuse, physical/mental health issues
- Supportive employment (e.g. Veterans Employment Program)
- Enterprise development (e.g. Veterans Painting Enterprise)
- Training and placement

I was hired on as the Community Liaison for Veterans Services, and in that capacity, working with the management team, was able to bring about an array of services including:

- Legal assistance services (e.g. Catholic Charities, John Marshall Law School Veterans Legal Clinic, Legal Assistance of Greater Metropolitan Chicago Veterans Project, Clerk of the Circuit Court, Illinois Prisoner Review, and Cabrini Green Legal Aid Foundation)
- Continuing education satellite (e.g. Roosevelt University Veterans Upward Bound Program)
- Lasting relations with community organizations and the Chicago Police Department (Three veterans were recipients of Chicago Hero Awards for their dedicated work with children through the community watch program, and the Community Alternative Policing Strategy (CAPS) organization.)
- Health fairs and seminars and community meetings
- Cultural, educational and social activities

The need for such programs and services are indicative of the awful conditions that homeless veterans face.

Service to veterans is nothing new for the Catholic Charities. The agency has worked with veterans starting right after WWI, and it remains on the frontline, gaining the high ground in the war on poverty. Veterans should not have to serve; whether fighting on foreign shores or otherwise, only to return home to face another war; this war on poverty. This war has casualties as any other war. It is not right.

The continued need exists for:

- More HUD/VASH Vouchers and the shortening of the processing system in order to cut down on long waiting periods
- Assurance of veteran hiring through the Department of Labor Office of Federal Contracts Compliance
- Housing provided through properties owned by the federal government
- Streamlining the process for determining service connected disability ratings and decrease disparity between states in amount of benefits payments (e.g. The Department of Veterans Affairs Office of Inspector General found that the annual average disability payment in Illinois is \$6,961 and in New Mexico \$12,004. The national average payment was \$8,890)
- Determine civilian employment opportunities in relationship to military occupations through the Transitional Assistance Program (TAP) prior to disembarkation from the military.

I have moved on and am now Community Affairs Manager for Catholic Charities Community Development and Outreach Services. Still, I encounter veterans who need assistance and refer them to the many programs and services offered through Catholic Charities of the Archdiocese of Chicago as well as a wide range of other resources.

And in closing, I trust that you will make the concerns that I have broached a priority as we receive the tens of thousands of veterans returning from military duty.

Thank you very much for this opportunity to address you. God bless America!

70

**STATEMENT
Of
VIETNAM VETERANS OF AMERICA**



Submitted by

**Sandra A. Miller
Chair
Homeless Veterans Committee**

Before the

**House Subcommittee on Insurance, Housing and Community
Opportunity**

Regarding

**Housing for Heroes: Examining How Federal Programs Can
Better Serve Veterans**

September 14, 2012

Vietnam Veterans of America

House Subcommittee on Insurance, Housing
And Community Opportunity
September 14, 2012

Chairwoman Biggert, Ranking Member, Gutierrez and distinguished members of this subcommittee, good morning and thank you for the opportunity to present testimony here today.

My name is Sandra Miller and I am the current Chair of the Homeless Veterans Committee for Vietnam Veterans of America. One of my other hats is that of Director of Homeless Veteran Residential Services for The Philadelphia Veterans Multi-Service & Education Center, where I oversee the operation of 125 VA Homeless Grant and Per Diem beds.

Vietnam Veterans of America has as its' number one legislative priority the issue of accountability; accountability at every level of any agency, federal, state, or local, that impacts Veterans and their families. It is through this accountability that Vietnam Veterans of America hopes to improve the quality of care and life for all of our nation's Veterans. Without accountability countless dollars are lost to programs that are ineffective, inefficient and even potentially unsafe. We all must be the "keepers of the gate" insuring our programs are achieving the goals they were established to attain.

After all these years of effort, energy, and attention given to the Homeless Veteran issue it remains and endures as a disturbing situation for these Veterans. Can we bring an end to Veterans living on the streets or in boxes, cars, shelters, vacant buildings? None of us can answer that question but we can try. There will always be those who choose this way of life...there always have been...from the beginning of time. We can, however, offer and assist those who seek a different way of existing in the short time we have all been granted, but they can't make it on their own. They just can't make it out of the darkness, so we continue to try to find an effective and efficient way to help those who are helping these Veterans.

US Departments of Housing and Urban Development (HUD) and Veterans Affairs (VA) HUD VASH Program

Oversight of the HUD VASH program and its processes will prove to be an invaluable tool in the continuance and expansion of this program. Oversight of the HUD VASH voucher program is necessary to ensure that these vouchers are administered, distributed and utilized to the fullest extent possible and for the purpose they were intended. By tracking the outcomes of the current HUD VASH voucher program, a full annual evaluation of their effectiveness may well drive the recognition for additional vouchers.

Vietnam Veterans of America strongly supports and has urged the continued funding and expansion of the HUD VASH voucher program. Further, VVA has urged the US Department of Housing and Urban Development and US Department of Veterans Affairs to establish a mechanism whereby oversight of the HUD VASH voucher program can insure that it is being monitored for compliance and fully utilized effectively for the Veterans it was intended to assist.

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Are the HUD VASH vouchers being distributed equitably throughout the country? We don't know this. We do know that some areas are saturated with vouchers, while others are screaming for more. We do know that one of the barriers to providing vouchers in some areas of the country is lack of case management. Alaska is one example of the staffing situation which results in the delay in issuing or utilizing the vouchers.

Are all VA Medical Centers providing the appropriate level of case management to the Veterans in the HUD VASH program? We don't know this either. We do know that case management activities vary from VA facility to VA facility. We appreciate that case management is able to be "contracted out" to community service providers and applaud the recognition that no one agency or organization can do it all. The VA and the Veterans need these collaborations, now more than ever, if, in fact, we are to end Veteran Homelessness in just a little over two years.

Here's what we do know. According to the 2011 Annual Homeless Assessment Report (AHAR), a HUD and VA joint effort, there were 67,495 homeless Veterans, down 12% from the 2010 report. There are currently 48,000 vouchers authorized and 39,340 actually in use. There are 1,500 case managers. There are 14,000 VA Homeless Grant and Per Diem beds. One challenge that many of our Veterans face in receiving a HUD VASH voucher is the expense of moving in to their new apartments. This has been addressed in some fashion by the awarding of the VA Supported Services for Veterans and Low Income Families (SSVF) grants across the country. SSVF assists with these move-in costs, furniture, etc. 12% of the vouchers have gone to women Veterans and 28% have gone to Veterans with children.

Does HUD VASH work? Yes, Vietnam Veterans of America believes it does. It does provide housing opportunities for homeless Veterans to obtain safe and secure housing. However, we are concerned that not enough attention is placed on the income of the Veteran, motivation of the Veteran, or continued housing stability.

If a Veteran is placed in a HUD VASH with only minimal income, though rents are inexpensive and subsidized, that minimal income may not be enough to sustain the Veteran. Recently a number of Veterans in HUD VASH who were receiving Public Assistance of \$214 per month were cut off with little notice. They now have zero income. How do they survive? Certainly they qualify for food stamps, but what assistance is there to insure they will be able to sustain their housing with no income? Realizing that HUD VASH focuses on "housing", it is our opinion that long term, sustainable income has to be part of the intake assessment, as well as the ongoing case management. Demanding anything less is surely setting the Veteran up to fail.

Motivating the Veteran to return to the work force, if possible, or to seek additional income, may prove to be an integral part of the case manager's responsibilities. Case Managers are the front line defense for these Veterans and they should be assisting with all avenues for increasing the Veteran's income.

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Vietnam Veterans of America believes in the importance of the “housing first” model is ideal for some Veterans. However, VVA also believes that the “housing ready” model may be the best fit for others, whereby a Veteran is given the opportunity to build on a strong foundation and become accustomed to daily living and have the ability to develop daily life skills. To think that “housing first” is the best for every Veteran is not true. It has always been the belief of VVA that our homeless Veterans must be given every opportunity to succeed in independent living to include housing. There are no “cookie cutter” solutions...VVA embraces the Interagency Council on Homeless mantra of “no wrong door” when addressing the housing needs of our Veterans.

VA Homeless Grant and Per Diem Service Centers

One of the most effective front line outreach operations funded by VA HGPS is the Day Service Center, sometimes referred to as a Drop-In- Center. Agencies stretch themselves and their staff almost beyond its limit in order to keep the programs afloat. Few even remain in the HGPS system due to the limited per diem funding support.

These service centers are unique and indispensable as a resource for VA contact with homeless Veterans. These Service Centers reach deep into the homeless Veteran population that are still on the streets and in the shelters of our cities and towns. They are the portal from the streets and shelters to substance abuse treatment, job placement, job training, VA benefits, VA medical and mental health care and treatment, homeless domiciliary placement, and transitional housing. They are the first step to independent living. For many it is the first step out of homelessness. But this can only happen if they are able to operate in an effective environment.

Under the VA HGPS program non-profits receive per diem at rates based on an hourly calculation per diem (\$4.90) for the actual time that the homeless Veteran is actually on site in the center. This amount may cover the cost of the coffee and food that the Veterans receive but it does not come close to paying for the professional staff that must provide the assistance and comprehensive services that continue on the Veteran's behalf, long after they leave the facility. As one can well imagine the needs of these Veterans are great and demands an enormous amount of time, energy, and manpower in order to be effective and successful. Their problems are complicated by years of abuse on many levels of life experience.

It is for this reason, the lack of sufficient operational funding, that many service centers for homeless Veterans have either closed or never opened after being funded by VA HGPS. The VA acknowledges and understands that this problem exists. This is a tremendous loss to the outreach efforts so important in connecting the homeless Veterans with the VA and independent housing opportunities.

The reality is that most city and municipality social services do not have the knowledge or capacity to provide appropriate supportive services that directly involve the treatment, care, and entitlements of Veterans. It is for this reason that these homeless Veteran

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service centers are so vital and irreplaceable. These service centers desperately need help and attention. They are an integral part of the outreach and first line contact with homeless Veterans that is, in fact, so essential as part of the Secretary Shinseki's 5 Year Plan. Service Center programs are challenging and staff intensive. But they are one of the raw conduits out of homelessness in many cases.

We believe that it is possible to create "Service Center Staffing/Operational" grants, much like the VA "Special Needs" grants. In light of the Special Needs grants, passing the legislation to establish this funding stream would not be setting a precedent. "Special Needs" grants have been doing it for years. And VVA believes that these service centers can't wait too much longer. Agencies have been advocating for years for the VA to recognize a more appropriate funding distribution process of HGPS resources for their true operational activities. These agencies have been holding on to survival by their fingertips for a very long time. Without serious and speedy activation of staffing grants the result may well be the demise of these critically needed services centers.

We cannot lose these valuable front line, "on the streets", service center outreach programs. They are the heartthrob of VA homeless Veteran programs; the first hand up offered too many of the homeless Veterans who are on the streets and in the shelter system of our cities.

There are agencies in this country that bring support, services, and housing to homeless Veterans. They often times do this with little financial assistance from the outside. There are even some HUD programs that are developed and utilized for homeless Veterans housing (i.e. Shelter Plus Care) that do not provide operational dollars, unlike HUD Supported Housing Program (SHP). There needs to be some consideration given to providing grant dollars through the HGPS program to these Veteran specific programs.

This will enable them to hire appropriate staff for case management. Without this possible assistance and resource, the full opportunity of these homeless Veteran programs will be lost.

VA Homeless Grant and Per Diem Payments

Non-profits have long struggled with the process used to justify the receipt of the per diem payments from VA Homeless Grant and Per Diem (HGPS) program. Although the amount of per diem money received per Veteran per day provided has increased over time, the requirement documentation to meet a 100% cost expense has created a significant burden on non-profits

The collateral expenses of a HGPS program often can be incurred by a non-profit agency and even require discretionary dollars to pay for them. This occurs because of certain restrictions on allowable expenses. This is especially true if the HGPS program is not located on the site of the home agency. Without the up keep and solvency of the parent agency the per diem program could not function because, in truth, the program is linked

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inexplicably to the parent agency. The HGPS program could not exist without the home agency and therefore some of the expenses of the agency must be directly allowable as expenses to the program.

In actuality, HGPS is "fee for service". One difference is that it is not set up as a contract agreement as utilized in the past by the VA where agencies were paid as contractors. Today's methodology works on the approach that grantees are paid based on past accounted and audited expenses, not anticipated expenses.

Though not a popular resolve some non-profit agencies as asking, "Why aren't our programs seen as "fee for service" operations instead of a reimbursement?" This option would, it seems, place the existing and future grant awardees in a per diem program much like that of the past programs which were paid as contractors. But this option is one that is discussed due to the frustration in obtaining the correct amount of per diem based on actual program expenses.

Currently, the per diem amount that non-profits receive is based on the previous year expenses as defined in its annual audit. It is not based on anticipated expenses for the operating year in which the per diem will be paid. This causes the program to fall short in meeting its expenses for the agency's operating year. For this reason, we believe it is a reasonable suggestion that VA consider the distribution of per diem payments in much the same way that other federal agencies operate. One solution to consider would be to set up HGPS disbursements in a "draw down" account similar to the system utilized by the U.S. Department of Housing and Urban Development, whereby agencies submit their projected budgets, are allocated the funds, and draw down on the allocated funds throughout the year. At the end of year reconciliations and adjustments as made.

Payments need to be based on actual anticipated budgetary expenses, not based on past year expenses. We cannot enhance services or hire additional necessary staff before we are able to access the dollars of increased per diem to pay for them. It sets in place a vicious cycle of need. (The agencies have a set per diem; they need more staff; they haven't shown it as an expense on the approved per diem they are receiving, so they can't afford to hire necessary additional staff or establish additional program enhancements because they don't have the money to do so.) This process leaves the program and the agency at a clear disadvantage because they do not have the money to do any advanced or "real time" enhancements to the program. To do so would place them at high risk and this action could be suicidal for a small non-profit. It places them at risk with creditors or, the agency has to reach into its line of credit at the bank. This credit line utilization results in paying interest on the use of its line of credit until they can be approved for higher per diem. This interest is then an added expense to the program...a cost they cannot recoup. VVA awaits the evaluation and study related to HGPS fund distribution as required by Congress in Public Law 112-154, Honoring America's Veterans and Caring for Camp Lejeune Families, signed into law on August 6, 2012 by President Obama.

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As with any change, oversight is the key to the success or failure of the programs. There is already a process for defined oversight in regard to annual inspections, services offered, and goals attained in place. With the requirement for intensive annual inspections by the VA on all GPD programs, we do not see any potential diminished ability by the VA in the oversight of the programs. The method by which funds are paid should have no effect on the VA's ability to provide oversight.

In the past, some very successful VA HGPS residential programs identified a need for increased bed capacity due to a clear identification of increased need for program admission. These existing programs requested additional beds under a VA HGPS "Per Diem Only" (PDO) grant process and were awarded the ability to increase the overall number of program beds.

The original HGPS grant and the PDO grant were awarded at different times; hence, they have separate and different VA "project numbers". These two project numbers are attached to the *same program* with the *same expenses* and the *same staff*. The only difference it has brought to the program is an increase in bed capacity. Here's where it gets convoluted and tricky.

VA policy states that everything related to the one program must be divided out by a percentage based on the number of beds attached to the two project numbers. This includes the request for per diem amounts and the entire budgeted expenses of the entire program. Every bed in the one program has been assigned to one of the two project numbers. For the purpose of billing the VA at the end of each month, each Veteran must be tracked on a daily basis, indicating the bed he/she was assigned on that particular day. And this must be done because when the audit was done for the one program to determine the level of per diem the agency can receive, it was identified that the per diem per day for the two project numbers was different. Not only is this a very time consuming process on the reporting side, all expenses for the one program on the bookkeeping side of the agency have to be calculated by percentage. This also makes it extremely difficult to request increased per diem.

We believe that if a single program has two different project numbers based solely on an approved expansion without change to the program, that program should be treated as a whole and the two projects numbers should be merged. This is the only fair way to work with the non-profit. To do so would allow an agency to function in a more efficient manner, have access to an appropriate and true per diem structure, and reduce the paper work for the VA HGPS offices.

I have spent some time highlighting a number of areas that Vietnam Veterans of America believes needs attention and/or change. VVA doesn't know the answer but we know we are going to try...and keep on trying to do our best to be a part of any solution that will help. Eventually, this will make a difference. It certainly will for the Veteran who finds her way home.

Prepared Statement of Babette Peyton, Veteran, United States Army, Resident, Catholic Charities St. Leo Residence, Chicago Illinois

Chairwoman Biggert, Ranking Member Gutierrez, and Members of the Committee. I am Babette Peyton and I am a Veteran of the United States Army, where I served from January 1973 until January of 1976.

I was number one in my battalion and received my first stripe during basic training. God has been in my life since the beginning. My job during my term of service was a Poly-Traumatic Medivac Specialist. I assisted wounded soldiers and stabilized them for return to the United States. To say the least, I was surrounded by death on a regular basis.

As a returned-home wounded veteran, my health issues began spiraling down within the past three years. A long term service injury left me paralyzed on one side. This experience took me on a journey of being in and out of the hospital, to a nursing home, and almost to hospice. At the beginning of my journey, I was told that I would never be able to recover from my paralysis. This was a lot for an active and independent person with her own apartment on the third floor of a tall, four-story building without an elevator. Since I was paralyzed and could not walk, it was impossible to return to my apartment. Therefore, I found myself a resident of a nursing home. Just four months before my paralysis I was visiting other people in nursing homes – I did not want to live in a nursing home.

While at the hospital for care, I spoke with two other veterans about the St. Leo Residence. I was told that St. Leo's had a 400 person-long wait list. I did not care. I received assistance in filling out the application and faxing it over to Catholic Charities. Three months later I was called for my first interview at St. Leo's.

My struggles continued because I found out that I needed to have a security deposit and an income. This did not deter me either. So with a prayer and support I met with a person from one of the veteran organizations that I am a member of, and received assistance with the security deposit. With the continued support of various veteran organizations I was able to receive my first month's rent, and was connected with a government subsidy that would allow me to be able to afford the monthly rent. The blessings continued, because my SSI also began, and I had a stable income.

My move in date at the St. Leo Residence was May 2010. Since I have been at St. Leo's, I am not only surrounded by my fellow veterans, I have been connected with caring and professional staff, a beautiful apartment and a beautiful campus. Catholic Charities, my fellow veterans and Veteran Service Organizations have allowed me to regain my independence. I did not have to live in a nursing home, I did not have to go to hospice, and I did not have to finish my obituary.

I have my life and I continue to give back as Catholic Charities has given to me. I give back through working with other veterans. I began an organization named the Young Entrepreneurs of the Universe, or YEU. YEU also has a veterans' initiative: we help veterans become heroes at home.

I am also a wheelchair archer who shoots with her right hand and her mouth. I shoot with Olympians and Para Olympians across the country. My statistics are 299 out of 300, which means that I shoot a 299 overall, with a 300 being perfect regarding wins. I have aspirations to participate in the Para Olympics. I tried to make it to London, but I did not have the sponsorship. However, the dream is still there.

During my journey I also received a lot of support from my church and the VA. However, I stayed with God and I would not have been able to pursue these dreams if Catholic Charities did not take a chance and give me a home and a permanent place to live.

In support of Veterans, I suggest increasing the number of supportive housing units for disabled Veterans and for women Veterans, especially wheelchair-bound Veterans. I would also suggest a program of transportation for disabled veterans. Another suggestion I have is to examine the process and regulations for Veterans to qualify for some government housing subsidies, vouchers or other programs. Look especially at the total dollar amount appropriate for security deposits for Veterans.

Members of the committee, I thank you very much for this opportunity to address you!

2701 Alta Drive
Las Vegas, Nevada 89106
702-624-5792 243-2377/FAX

Arnold Stalk PhD



September 14, 2012

United States House of Representatives
Committee on Financial Services
Washington, D.C.

SENT IN ELECTRONIC FORM AND VIA UNITED STATES MAIL
The Committee on Financial Services

ATTENTION:
Committee Clerk
2129 Rayburn House Office Building
Washington, D.C. 20515

SENT VIA EMAIL: fsctestimony@mail.house.gov

The Subcommittee on Insurance, Housing and Community Opportunity Hearing:

"Housing for Heroes: Examining How Federal Programs Can Better Serve Veterans"

Date: September 14, 2012

Location: Rayburn House Office Building
Room 2128

Arnold Stalk PhD
Testimony Narrative

Good morning:

My name is Arnold Stalk. I am the founder of Veteran's Village which is located in Downtown Las Vegas, Nevada.

I would like to thank the members of the House of Representatives and more specifically a special thank you to this Subcommittee on Insurance, Housing and Community Opportunity Hearing. It is truly an honor.

I have been developing, operating, constructing and advocating for special needs housing developments since 1977. I began my career as a VISTA Volunteer and my first community project was the design of a Methadone Clinic for heroin addicts on Los Angeles' Skid Row. I have developed and operated special needs housing developments such as emergency shelters, transitional housing, scattered site rental housing and home ownership prototypical and replicable developments along with special needs projects such as the first AIDS hospice in Southern California, alcohol and drug residential treatment facilities, childcare centers, specialized schools for children and numerous other facilities in various cities throughout the United States.

I have also been a professor of architecture and urban housing, visiting critic at the Southern California Institute of Architecture, University of California at Los Angeles, University of Southern California and the University of Nevada, Las Vegas.

I have a private practice development consultancy firm and I am the President of SHARE, a non-profit 501 c 3 organization in Southern Nevada. SHARE was founded in 1994 and has been the catalyst for neighborhood revitalization projects and has provided food, shelter, housing, and community oriented facilities to thousands of people in need.

My career has been blessed to have had the opportunity to be of service and to create facilities and residences for people and to create humanistic and respectful environments for people from all walks of life.

I am the founder of Veteran's Village, Downtown Las Vegas, Nevada. Veteran's Village is a 125 unit residence and is dedicated to the creation of an environment that is home and a respite for United States Veterans. This is a unique and innovative approach to holistic and comprehensive housing with collaborative support services. Public and private collaborative partnerships have been created to provide services to residents including education and degree programs, nutritional programs, exercise training, medical services, mental health counseling, specialized activities and special events.

One most recent example is a partnership with The Home Depot Foundation in which SHARE and Veterans Village has received a grant to rehabilitate and retrofit the veterans Village through Home Depot Day of Service program which is scheduled for this coming October 25, 2012.

I am here this morning to discuss barriers that homeless and low income US Veterans face in securing housing assistance and services from Federal agencies.

I would like to advocate for improved federal agency collaborations, program efficiencies, and the administration of homeless housing and services for veterans.

I would also like to express my support for H.R. 6111: Vulnerable Veterans Housing Reform Act of 2012. This will move to exclude from consideration as income under the United States Housing Act of 1937 payments of pension made under section 1521 of title 38, United States Code, to veterans who are in need of regular aid and attendance.

By way of background and example, The Veterans Administration offers Aid and Attendance as part of an "Improved Pension" Benefit that is largely unknown. This Improved Pension allows for Veterans and surviving spouses who require the regular attendance of another person to assist in eating, bathing, dressing, undressing, medication dosing, or taking care of the needs of nature to receive additional monetary benefits. It also includes individuals who are blind or a patient in a nursing home because of mental or physical incapacity. Assisted care in an Assisted Living facility also qualifies.

The enactment of H.R. 6111 will allow our veterans to access public and private sector affordable housing without being penalized regarding income qualifications. The availability of affordable housing for veterans is limited as it exists in the United States today and placing and imposing further barriers on the qualification process for our veterans further impedes accessibility and affordability in gaining access to affordable and attainable housing.

Additionally, local, state, and federal agencies, non-profit housing providers and faith based organizations need to work in more intense and creative collaboration to create a more "seamless" opposed to a "seamed patchwork" of access to housing and related services for our veterans. Bureaucratic delays, red tape, repetitive approval processes and limited resources add to the affordable housing crisis and housing accessibility for veterans.

In Las Vegas, Nevada and Southern Nevada for example, the lack of affordable housing for Veterans that are homeless, at-risk of becoming homeless and those more independent veterans that are seeking affordable housing is extremely limited. Additionally, there is a lack of collaborative efforts by and between the public and private sector entities to provide veteran housing services as well.

Obstacles that non-profit organizations and faith based organizations face in helping homeless and low income veterans secure housing assistance and services from federal programs is significant due to the following:

- A lack of available housing rental subsidy, vouchers i.e. HUD VASH , Department of Veteran Affairs, Supportive Services for Veterans Families (SSVF) program and other voucher programs.
- Numerous bureaucratic delays and the lack of improved collaborations between local, state and federal agencies along with non-profit providers to advance the approval processes for veteran housing and related supportive services.

Suggestions for improvements to federal housing programs to better serve homeless and low income veterans include:

- The enactment of for H.R. 6111: Vulnerable Veterans Housing Reform Act of 2012. This will move to exclude from consideration as income under the United States Housing Act of 1937 payments of pension made under section 1521 of title 38, United States Code, to veterans who are in need of regular aid and attendance.

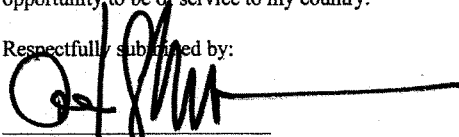
- The creation of a "One Stop Shop" processing system for veterans to access affordable and attainable housing be created which will require local, state and federal agencies to work together to speed up accessibility, affordability and availability of housing and support systems for veterans.
- Provide incentives for private sector developers to develop newly built and retrofitted affordable and creative housing models for veterans and to create housing models for replication across the United States.
- Create incentives for private sector businesses to provide medical, mental health, employment opportunities and other service for our veterans as well.

Our Veterans Village in Las Vegas, Nevada is an example of a public/private partnership that has taken an aging motel which was about to close and retrofitted it into a comprehensive residence and respite for our veterans. Partnerships and collaborations have been formed including but not limited to The Medical Reserve Corps of Southern Nevada, Las Vegas Urban League, Lutheran Social Services of Southern Nevada, The American Red Cross, U.S. Department of Veteran Affairs, The Crossing Church and numerous other non-profit organizations, all focused on helping veterans on a case by case basis.

This model is replicable in every state, city, county and jurisdiction across the United States. Providing affordable, attainable and respectable housing for our US veterans is an obligation and a promise that we must make for those men and women that have put themselves in harm's way and pledged their allegiance and lives so that we may enjoy the freedom that we have as citizens in the United States of America.

Thank you for this opportunity to testify and share my experiences and ideas today and the opportunity to be of service to my country.

Respectfully submitted by:



Arnold Stalk PhD
September 14, 2012



★ WASHINGTON OFFICE ★ 1608 "K" STREET, N.W. ★ WASHINGTON, D.C. 20006 ★
(202) 263-2986 ★

April 16, 2012

Honorable Spencer Bachus, Chair
House Financial Services Committee
2129 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Bachus:

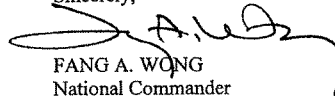
On behalf of the 2.4 million members of The American Legion, urge your passage of the *Affordable Housing and Self-Sufficiency Improvement Act of 2012* during the markup hearing on Wednesday, April 18th, 2012. As amended, the bill addresses several underlying concerns The American Legion recognizes related to veteran housing.

In particular, Section 102 of Title I seeks to clarify income verification methods and formulas. Of particular interest to The American Legion would be provisions that would exempt money paid to veterans for aid and attendance due to service connected disabilities. These benefits are paid to offset the costs of medical equipment, services, and staff for a severely disabled veteran; they should not be included in overall income levels for housing purposes.

In addition, we appreciate the flexibility offered within Section 106. We are aware that circumstances sometimes require certain housing types for veterans. Moreover, we are keenly aware that when veterans can live in close proximity, the social support network can improve healing, adaptation problems, and other issues related to employment and general well-being. This section would improve the opportunity to bunch these residences together to meet these needs.

We thank you for your efforts to improve the housing opportunities for our nation's veterans. We appreciate your support in passage of this legislation and pledge our assistance when this legislation is debated on the floor.

Sincerely,



FANG A. WONG
National Commander



431 North Genesee Street Waukegan, Illinois 60085 phone (312) 307-2454

Fax 224-637-3019

www.bamhouse.org

blessed@bamhouse.org

September 11, 2012

Congresswoman Judy Biggert (R-IL-13)
Chairperson Subcommittee on Insurance, Housing,
and Community Opportunity
Committee on Financial Services,
U.S. House of Representatives

Dear Congresswoman Judy Biggert (R-IL-13):

The Subcommittee on Insurance, Housing and Community Opportunity will hold a hearing entitled "Housing for Heroes: Examining How Federal Programs Can Better Serve Veterans," at 9:30 a.m. on Friday, September 14, 2012, in Room 2128 of the Rayburn House Office Building.

The Subcommittee is interested in examining barriers that homeless and low-income veterans face in securing housing assistance and services from federal programs. This hearing also will explore suggestions to improve federal agency collaboration, program efficiencies, and the administration of homeless housing and services for veterans. As a former homeless veteran, and current service provider I am offering the following attached statements in answering the questions provided by Nicole Austin and Jonathon Madison from your office.

Please visit our website and feel free to contact me personally should the need arise for follow up.

Sincerely,

Kevin A. Means
Executive Director
Bam House Inc.
312-307-2454
www.bamhouse.org

Attachment: Statement

CC: Nicole Austin
Jonathan Madison
Bam House directors



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As a Veteran and consumer

1. Why was it difficult for you to secure housing?

I enlisted into the Army reserves in 1986 and enrolled into ROTC at the University of Hawaii in 1988. As a cadet Lt. I was assigned to the 442nd Infantry Battalion at Ft. Derussy Hawaii (motto "Go for Broke "during WWII.) U. S Senator (D-Hawaii) Daniel Inouye served in this all Japanese-American unit which is distinguished because of the circumstances under which these patriots served their country while many of their family members were held under U.S custody by Executive Order. These men became the most decorated unit in the U.S military.

The difficulties I faced to secure housing were due to my addiction to cocaine and the diagnosis of bi-polar disorder. This experience led me to become homeless during 1994-1995. As a college educated and proud military veteran with a family history of military service, the feeling of defeat led me to isolation and despair. I was broken spiritually and needed help with addressing the core cause of my homelessness, which was drug addiction and mental illness.

2. What programs, organizations, or individuals helped you the most in securing housing?

After leaving Hawaii and returning to Chicago, IL, I received help through cooperative efforts of the Christian Church and Para-Church ministries; and various State and community agencies which helped me to address:

- A. Spiritual emptiness and my relationship with God
- B. Chemical dependency
- C. Mental health

3. How can housing programs work better for veterans?

Housing programs that address the root causes of homeless by providing supportive services and a spiritual foundation will see better outcomes. The desired outcome is for Veterans to become self-sufficient productive members of society and obtain sustainable housing.



431 North Genesee Street Waukegan, Illinois 60085 phone (312) 307-2454
 Fax 224-637-3019
www.bamhouse.org
blessed@bamhouse.org

As Contracted Christian Faith Based providers for the VA

My personal Christian experience guided me on the road to overcome the obstacles which led to my homelessness and also led me to organize BAM House Inc. The acronym B-A-M stands for Blessed Above Measure (Eph:3:20) We are a Christian 501C3 organization of Veterans that has been licensed by the Illinois Department of Human Services (IDHS) since 2006.

1. Recent, successful homeless and low-income veterans housing initiatives.

In 2009 President Obama and VA Secretary Eric Shinseki implemented the 5-yr plan to end homelessness within the veteran population. In 2010, BAM house was the only State licensed Christian faith based program in Illinois to be awarded a contract with the VA VISN 12 network under the Health Care for Homeless Veterans (HCHV) program. BAM house provides transitional housing and supportive services that addresses the core problems which can lead to homelessness.

BAM House has served over 250 men since organizing and 120 of these men are veterans. About 60% of the veterans served have successfully completed our program and obtained employment and supportive or long-term housing. Under our current agreement with the VA, BAM House has served over 60 Veterans. We are a grass roots organization and the therapeutic value of Veterans helping Veterans has no equal.

2. Obstacles that homeless and low-income veterans face in securing housing assistance and services from federal programs.

Our primary objective is to provide emergency housing for the veterans we serve and to help them become stable enough to receive and maintain long term housing through HUD VASH vouchers prior to completing our 6 month program. Out of the 60 veterans we have served since 2010, only 6 have received the voucher while in our program. We view coordination with community providers for distributing the vouchers as an obstacle.

Therefore, our professional counselors use evidence based cognitive behavioral counseling approaches, a strict program structure and tough love in efforts to help the veterans identify strengths, talents and weaknesses to become self-sufficient. With the help of supportive staff and the revenue generated from the VA contract, we have been able to provide short-term and long-term employment for 19 veterans, helping them to secure housing.



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3. Obstacles that non-profit entities and other service providers face in helping homeless and low-income veterans secure housing assistance and services from federal programs.

On July 3rd 2012, all veteran referrals from the VA were removed from our facility by the VA. The reason given was due to complaints. The veterans that were removed provided written statements expressing reluctance to leave our program. Our organization has not received any written explanation or letter of concern from the VISN 12 Contracting office to this date. Our facility has 10 beds and 7 beds are currently empty.

We understand the importance of addressing every complaint and concern as we advocate for the rights of those we serve. We expect complaints from those we serve, due to our challenging and strict program structure. The IDHS has recently completed an audit of our services and we have been found to be 100% in compliance, however we have not been given an opportunity to identify or address any of the concerns raised by the VA.

Our agency does not receive direct funding from the State of Illinois to provide services for our veterans. We rely on contributions and the revenue generated from the VA contract which has enabled us to serve and employ veterans with an average yearly budget of less than \$50,000. In June 2012 we began to implement expansion plans that would provide transitional housing for Female veterans through a linkage agreement with a National Christian organization that has been serving women for over 80yrs. Unfortunately these plans are being delayed while we wait for resolutions to VA concerns that have not been clearly identified.

4. Suggestions for improvements to federal housing programs to better serve homeless and low-income veterans.

We believe that the HCHV program could be improved through improved referral assessment screening and increased communication between the VA and community providers.

Testimony of

Deborah De Santis
President and Chief Executive Officer
Corporation for Supportive Housing

*Financial Services Subcommittee on Insurance, Housing
and Community Opportunity hearing:*

**Housing for Heroes: Examining How Federal
Programs Can Better Serve Veterans**

September 14, 2012

On behalf of the Corporation for Supportive Housing (CSH), I would like to express our appreciation to Chairwoman Biggert and the rest of the members of the Subcommittee for focusing this hearing on the housing needs of low-income veterans. We understand the Subcommittee is interested in examining barriers that homeless and low-income veterans face in securing housing assistance and services from federal agencies. This hearing is timely because as service providers and government partners are making significant improvements in ending veterans' homelessness, Congress and the Administration are considering difficult questions about federal spending and future funding levels for many key programs. In addition, stakeholders in every corner are especially focused on "what works" and wanting to see the most efficient and effective use of federal dollars.

CSH has unique experience as a national organization that, for the last 21 years, has helped communities build permanent supportive housing to prevent and end homelessness, with particular success in serving people struggling with multiple challenges to housing stability. Homeless veterans are a population that we care very much about and we look forward to sharing examples of how supportive housing is a particularly good intervention for those who are homeless and have the shared experience of having served in our military.

We would like to convey at the outset the two most important messages for Congress. First, Congressional support for programs that support homeless veterans – including HUD-VASH vouchers, McKinney-Vento Homeless Assistance Grants, and the VA's Supportive Services for Veterans Families (SSVF) program, among others – is not only greatly appreciated, but is creating real results. Last December HUD reported a 12 percent decrease in veteran homelessness, amounting to nearly 9,000 fewer of our nation's heroes having to sleep on the street, in a campground, or in a shelter. To see numbers like this in a time of economic instability is outstanding. Second, federal policymakers absolutely must continue the momentum and not turn their back on programs that work. Big cities such as New York and Washington, DC have seen significant declines in the number of street homeless veterans, while several smaller communities around the country are coming close to ending veterans' homelessness altogether. We need to keep investing federal, state, local and philanthropic dollars in what's working.

As noted above, the federal programs that CSH and our partners have utilized most extensively to end veterans' homelessness are the HUD-VASH program, McKinney-Vento Homeless Assistance grants and the VA's Supportive Services for Veterans Families program. It is important to note that while these programs are most prominent in ending veteran homelessness, CSH often uses a multitude of different funding sources to create supportive housing. As Committee Members can see in the Project Profile sheet attached at the end of our testimony, a recently-developed and highly-successful supportive housing development for veterans in Detroit, Michigan – Piquette Square – used not only project-based HUD-VASH vouchers, but also HOME funds, Section 8 vouchers, and state tax-exempt bonds.

The HUD-VASH program has been particularly popular among policymakers in recent years, and with good reason; these vouchers combine Section 8 rental assistance with case management from the VA to create a very effective intervention for veterans who are struggling to stay stably housed. HUD-VASH vouchers take veterans off the street, while creating several other positive

outcomes such as reductions in visits to emergency rooms, jail, detoxification facilities and other emergency institutions. Both the House and Senate T-HUD Appropriations Subcommittees have included \$75 million for 10,000 new VASH vouchers in Fiscal Year 2013 and we strongly urge Committee members to support this allocation when Congress makes final funding decisions for the next fiscal year. We also urge Committee members to continue supporting new HUD-VASH allocations in future years as it is one of the single-most important tools to ending veteran homelessness.

We would also like to express support for additional flexibility to project-base HUD-VASH vouchers. These vouchers are primarily tenant-based, meaning that they are provided directly to a homeless veteran who then must find suitable housing in the community. Allowing VASH vouchers to be project-based, or tied to a unit rather than to an individual provides several benefits. First, by guaranteeing that a unit will be subsidized and reserved for a homeless veteran, it can reduce or eliminate the burdensome housing search process, which is especially difficult for veterans with disabilities or cognitive impairments. Second, project-based VASH vouchers can be used as leverage by developers to encourage private investors to commit funding to new housing units. It would be a missed opportunity to not leverage more HUD-VASH vouchers as a means of developing new housing that will remain affordable to homeless veterans for years to come.

HUD has published guidelines on project-basing VASH vouchers that limit the percentage of VASH vouchers that may be project-based, requires units to be placed in service in a very short time frame, and requires the approval of both the PHA and the VA to make the project a reality. While we are not advocating for a specific change to HUD's current guidelines on project-basing VASH vouchers, we do think it would be helpful if the Department would set-aside vouchers in its next competition for communities who want to project-base, and to exercise reasonable flexibility by providing waivers to certain developments that need additional time to place units in service.

SSVF, as a VA program, falls outside of this Committee's jurisdiction, but given the growth and flexibility of this program it is important that we note its potential to achieve great results. SSVF grants allow communities to provide a flexible array of either short or medium-term rental assistance or any of a number of supportive services such as case management, job training, or credit repair. We are also seeing SSVF used in creative ways, such as when it is paired with a HUD-VASH voucher for a severely vulnerable veteran to cover missing gaps in getting them housed such as by covering a security deposit. SSVF funds are provided out of the VA's Health account and Congress recently and wisely increased the amount of money the VA Secretary may allocate for this purpose.

Aside from providing funding, Congress and the Administration can be most helpful by encouraging the targeting of resources. When we say "targeting" we really mean two different things. First, our primary focus should be to ensure that the most vulnerable homeless veterans, those who are most likely to literally die on the street, are given priority access to rental assistance and other resources. This approach is not only the morally correct thing to do. Veterans who are experiencing long-term homeless are also frequent users of costly emergency

systems of care such as emergency rooms and mental hospitals, and therefore prioritizing assistance to this sub-population is also cost-effective for the taxpayer.

Second, targeting also means ensuring the right resource gets to the right person. Decisions about who should get what resource are not easily made, and it is important that VA case managers have tools at their disposal to steer each veteran towards the most appropriate resource. For example, HUD-VASH vouchers are an extremely good resource for veterans who, without the combination of rental assistance and case management, are likely to remain homeless for a long period of time. It would be a poor use of resources to provide a HUD-VASH voucher to a homeless veteran who is likely to stay stably housed with a lighter intervention such as short-term rental assistance or assistance with employment search. Conversely it would be a poor use of resources if a veteran who clearly needed more intensive and longer-term assistance was first offered a more limited array of supportive services or short-term rental assistance. CSH has been working with the VA to help develop a Decision Support Tool to help case managers understand what resources work best, and we appreciate policymakers support for seeing this Tool implemented.

One concern that we would like to bring to the Subcommittee's attention is the length of time it takes the VA to hire case managers. Members of Congress, like many other stakeholders, are particularly concerned that VASH vouchers be quickly utilized, but this process is delayed when the local VA doesn't have its case managers in place. We have seen improvements, but early progress was delayed due to this problem.

Related to the issue of VA case management, we would also bring to your attention recent legislation that was signed into law by President Obama (H.R. 1627) that encourages local VA medical centers to consider contracting VASH case management with local government or non-profit organizations with experience serving homeless veterans. This idea was born right here in Washington, DC where a very successful partnership was set up between the local VA and the City's Department of Homeless Services. The VA established a contract with the City to handle VASH case management for several hundred vouchers. This was an excellent initiative because City homeless services had a better grasp of where chronically homeless veterans were living, had better relationships with landlords around the city, and was able to use some different models with increased flexibility to engage hard-to-serve homeless people. The City subsequently made a marked reduction of street homeless veterans. Contracting with local homeless service providers is also a great idea in rural areas where homeless veterans might live very far away from the nearest VA case manager. We encourage Congress, the VA, and VA Medical Centers to investigate whether contracting VASH case management services is a good solution in other communities across the country.

While Washington has a responsibility to provide resources to end veteran homelessness, it falls on local communities to improve their systems – communication, outreach, and coordination – to achieve the best results. We have been very pleased to collaborate with the 100,000 Homes Campaign and other partners to develop a list of steps that communities can take to reduce the amount of time it takes to get a homeless veteran into stable housing once they are awarded a rental assistance voucher such as HUD-VASH. Reducing this “lease-up” time is one of the most important steps a community can take not only because the veteran is often suffering while

homeless, but also because many homeless people are transient and the longer it takes to get them housed the more likely it is for service providers to lose track of where the veteran is currently living.

Some key steps to reducing lease-up times include:

- Having the local Housing Agency that administers rental assistance share Housing Inspection Standards with non-profit organizations that are assisting veterans in finding housing. These organizations can then conduct a pre-inspection of identified units to ensure they will pass inspection and the veteran will be able to move in as quickly as possible.
- Reducing or eliminating locally-imposed minimum income requirements.
- Eliminating requirements for the Veteran to enter treatment as a condition for receiving a VASH voucher.
- Negotiate rent-reasonableness with the prospective landlord at the time of the housing inspection.
- Issue provisional vouchers to enable the Veteran to begin housing search while the paperwork is being finalized.
- Coordinate among the Housing Agency, homeless service providers, and prospective tenants to fill out of all necessary paperwork and ensure that everything is in order and doesn't get stuck in an administrative logjam.

We would like to note that both HUD and the VA have been generally receptive to new ideas, to fixing problems that CSH and our partners have identified, and eager to achieve the Administration's goal of ending veteran homelessness. As an example, we thought that HUD's publishing of a HUD-VASH best practices guide, was exactly the kind of tool that will make real impact and improve how communities utilize this valuable federal resource.

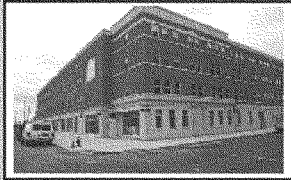
Finally, noting Chairwoman Biggert and Ranking Member Gutierrez's interest in this important issue we would also add that 500 Chicago veterans are homeless on any given night. In Cook County, over 9% of people experiencing homelessness are veterans. Many are chronically homeless due to persistent and complex physical or mental health problems. Absent stable housing tied to supportive services, these men and women cycle between jail, shelters, hospitals, and other costly institutions, never receiving adequate care to address the underlying causes of their homelessness. As a result of CSH's leadership, Chicago's continuum of care is leading the nation in systematically prioritizing high-need individuals, including veterans, for supportive housing. Currently, the people most in need of long-term housing solutions are not targeted in this way and remain homeless. Also, the VA system of care for homelessness is not integrated sufficiently with the larger supportive housing system, which can limit access to appropriate, non-VA housing and service resources for portions of homeless or at-risk veterans.

We again thank the Subcommittee for holding this hearing. We are eager to continue this conversation about how to end veteran homelessness, and would be more than willing to show Members and staff what supportive housing looks like and how it ends homelessness for our nation's heroes.



Piquette Square - Detroit, MI

150 new units of supportive housing for veterans who are homeless



Piquette Square

This unique new construction project in Detroit, MI combines 11,000 sq. ft. of commercial and common space and 150 units of permanent supportive housing for homeless veterans. It is a unique collaboration between Southwest Housing Solutions, Southwest Counseling Solutions, John Dingell VA Medical Center, and the Veterans Benefit Administration - Detroit Regional Office to provide supportive services and housing opportunities.

Owner/ Sponsor: Southwest Housing Solutions

Property Management: Southwest Housing Solutions

Service Provider: Southwest Counseling Solutions, in collaboration with John Dingell VA Medical Center

Tenant Profile:

Veterans experiencing homelessness, including those who have been homeless for long periods of time and those with mental health issues.

Key Features and Innovations:

- Approximately 18,000 individuals experience homelessness in Detroit each year – 4,000 which are veterans.
- The project has 150 project based vouchers administered by the Michigan State Housing Development Authority, including 25 HUD VASH project based vouchers.
- In addition to on-site service space, the project is located within one mile of the John Dingell VA Medical Center which will provide for greater access to inpatient and outpatient services.
- The project is situated on the same ground where the historic Studebaker factory New Center was destroyed by a fire in 2005.
- Once completed this will be the largest supportive housing project in the state of Michigan.

Financing Information

Capital

MSHDA Tax Exempt Bond	\$10,000,000
LP Capital Contribution	\$6,713,770
GP Capital Contribution	\$519,026
MSHDA HOME Funds	\$1,744,447
FHLB AHP	\$500,000
Wayne County	\$510,000
Brownfield Credit	\$1,664,802
Deferred Developer Fee	\$295,204
Total	\$21,947,249

Operating (Annual)

150 Project Based Housing Choice Voucher



Easter Seals

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WRITTEN STATEMENT

**KATY BEH NEAS
SENIOR VICE PRESIDENT, GOVERNMENT RELATIONS
EASTER SEALS INC.**

**BEFORE THE
HOUSE SUBCOMMITTEE ON INSURANCE,
HOUSING AND COMMUNITY OPPORTUNITY**

REGARDING

**HOUSING FOR HEROES: EXAMINING
HOW FEDERAL PROGRAMS CAN BETTER SERVE VETERANS**

SEPTEMBER 14, 2012

Chairwoman Biggert, Ranking Member Gutierrez and members of this subcommittee, Easter Seals thanks you for holding this hearing on ways the federal government can help address veterans' homelessness. We appreciate the opportunity to share our idea for improving the U.S. Department of Veterans Affairs' (VA) Supportive Services for Veterans Families (SSVF) Program, an existing federal program that is instrumental in helping homeless and at-risk veterans and their families establish stable housing. Easter Seals recommends that the VA expand the SSVF Program allocation criteria to allow national nonprofits, with active and experienced local chapters or affiliates, to apply for regional or national grants within available SSVF funds. By modifying this criteria, the VA will allow grantees to demonstrate service efficiency, to model best practices and to enhance implementation oversight.

Easter Seals is a leading national provider of community-based services for veterans, people with disabilities and their families. Through our national network of 73 affiliates, 550 service locations and 24,000 staff, Easter Seals provides veterans, military families and others with local, person-centered services, including transition, housing, employment, caregiving, respite, assistive technology, child care and medical rehabilitation. Easter Seals has forged partnerships with several federal agencies to provide community-based services to veterans and military families. Most recently, the VA contracted with Easter Seals and our partners to provide training for the VA's Caregiver Training Program and the Homeless Veterans Supportive Employment Program. Easter Seals believe that no veteran should suffer from a lack of access to or understanding of how to navigate housing and reintegration services.

Background on the SSVF Program

Easter Seals applauds Congress for its commitment to end veterans' homelessness. With the help of new federal programs and resources, the veterans' homeless population continues to decline. One of the programs helping to provide homeless and low-income veterans with the supports and tools they need to succeed is the VA's Supportive Services for Veterans Families (SSVF) Program. Congress created SSVF in 2008 through the Veterans' Mental Health and Other Care Improvement Act (P.L. 110-387) to assist homeless and at-risk veteran families by providing local access to supportive services, including outreach, case management, and assistance in obtaining VA and other benefits such as health care services, transportation, housing counseling and transportation services. Congress designed the SSVF Program to leverage the expertise and capacity of the existing social services network of community providers. In the legislation, Congress identified "*private nonprofit organizations*" or "*a consumer cooperative*" as the only entities eligible to provide the supportive services to eligible veterans and their families. In addition, Congress intended that grantees have demonstrated "*evidence of the experience*" and "*managerial capacity*" in providing supportive services to very low-income veteran families. Congress understood the importance of the VA and qualified community providers working together to effectively address the needs of homeless and low-income veterans. Through new legislation (H.R. 1627) signed into law in August, Congress increased the SSVF authorization to \$300 million in fiscal year (FY) 2013, a \$200 million increase over the FY 2012 authorized and funded level.

Implementation of the SSVF Program in FY 2011 and FY 2012

Congress gave much of the authority to implement SSVF to the VA Secretary, including the authority "*to establish intervals of payment for the administration of such grants and establish a maximum amount to be awarded, in accordance with the services being provided and their duration.*" Using this legislative authority to "*establish intervals of payment for the administration of such grants and establish a maximum amount to be awarded,*" the VA established the following allocation criteria for FY 2011 and FY 2012 SSVF grants:

- “1. Each grant cannot exceed \$1 million per year.*
- 2. The total amount of supportive services grant funds awarded to a grantee (via one or multiple awards) cannot exceed \$1 million per state per year.*
- 3. The total amount of supportive services grant funds awarded to a grantee (via multiple awards) cannot exceed \$3 million nationwide per year.”*

The VA has completed two SSVF grant competitions using the above allocation criteria. In FY 2011, the VA awarded 85 SSVF grant awards totaling \$60 million. In FY 2012, the VA awarded 83 renewal grants and 68 new SSVF grants totaling \$100 million. FY 2012 grants ranged from \$150,000 to \$1 million. The VA recently requested letters of intent by September 28, 2012 from nonprofit organizations interested in applying for SSVF grants under the FY 2013 competition. The VA currently manages 151 separate SSVF grants. In some cases, multiple affiliates or chapters of national organizations are current grantees or subgrantees on FY 2011 or FY 2012 SSVF grants. Under the existing SSVF guidelines, local and state chapters or affiliates of national organizations can separately apply for and win SSVF grants. However, these separate grants do not necessarily benefit from service delivery expertise and managerial capacity of their national organizations.

Administrative Efficiencies leveraged in Other Federal Programs

Several federal programs, including the Senior Community Service Employment Program (SCSEP) at the U.S. Department of Labor and the Youth Mentoring Grant Program at the U.S. Department of Justice (DOJ), utilize local, multi-state and national grant awards to help accomplish the programs' objectives. For example, DOJ has divided the youth mentoring funds appropriated by Congress into separate National Mentoring Program and Local Mentoring Program grant competitions. DOJ benefits from the diversity and mix of the local and national grantees to help implement youth mentoring activities and youth development programming throughout the United States in the most cost-effective and efficient manner. DOL also values from its combination of state and national awards for SCSEP. Easter Seals Inc. operates SCSEP (which provides job training for low-income individuals, including veterans, over 55) in eight states across the country by providing local service through nine separate community-based Easter Seals affiliates. As a national grantee, Easter Seals Inc. holds each of the participating Easter Seals affiliates accountable for service delivery and outcomes. In addition, Easter Seals Inc. provides participating Easter Seals affiliate staff with specialized training and consultation on best practices to improve the quality and effectiveness of our service. The VA could also benefit from the service delivery expertise and managerial capacity that national organizations, like Easter Seals and others, could provide through regional or national grants.

Opportunities to Leverage National Nonprofit Organization Capacity and Expertise in FY 2013

Easter Seals applauds the VA for its implementation of the SSVF Program. Homeless veterans in several dozen communities across the country are now receiving critical supportive services through SSVF that are helping the veteran and their family transition into stable housing. However with SSVF Program funding expected to triple to \$300 million in FY 2013, the VA has a real opportunity to expand the scope of the SSVF Program in FY 2013 to tap into the expertise and effectiveness of national organizations. Easter Seals recommends that the SSVF Program be expanded to allow both local and national grants within FY 2013 funds appropriated by Congress. Our proposal also has the full support of the Vietnam Veterans of America.

Because this improvement can be changed administratively and does not require congressional action, Easter Seals has shared our proposal with VA officials and are hopeful that the VA will modify the SSVF Program allocation criteria in time for the FY 2013 grant cycle. However, we welcome support from Congress and this

subcommittee to help improve the already effective SSVF Program. While tremendous progress has been made to significantly decrease the homeless veterans' population, new service delivery strategies should be examined and implemented to meet the goal of ending veterans homelessness by 2015 and to prepare for the one million active-duty personnel expected to return to civilian life over the next five years. Thank you for the opportunity to share with this subcommittee our recommendation for improving the VA's Supportive Services for Veterans Families Program.

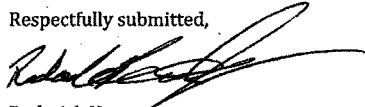
Dear Honorable Members of the Congressional Subcommittee on Insurance, Housing, and Community Opportunity:

My name is Roderick Houston. I served in the U.S. Army from 2000 to 2004 as a combat medic and had the pleasure of serving in Bosnia (SF0R9) & Iraq (OIF1) with the 3rd Squadron, 7th U.S. Cavalry, 3rd Infantry Division.

When I was discharged from the Army, I had a privately owned vehicle, but no money to drive back to my home state of Illinois. Furthermore, I was living in my car until it was repossessed due to my lack of payment. This left me displaced and homeless, and in Texas, where I was discharged.

For ten months, I had no resources for adequate health care or housing; I lived on the streets and did odd jobs until I met a veteran traveling in the same direction and I hitched a ride home with him. After returning to Illinois, my housing situation was the same as it was previously in Texas. Fortunately for me, my father is a Vietnam veteran and he took me to the local VA hospital, where I was introduced to the Veterans Strike Force, an organization of vets whose mission is to help vets find the proper programs or benefits needed to assist them in maintaining and/or adjusting to civilian life. Members of the Strike Force got me registered into the hospital and enrolled in a life-saving program called the Day Hospital which is a daily out-patient program. Through the help of the doctors in the Day Hospital and my Veterans Representative I was able to submit for and receive disability compensation for PTSD; that was instrumental in helping me to find housing. I believe that the Department of Defense and the Department of Veterans Affairs should work more closely together to form a bridge that would enable the soldier/veteran to move from one to the other more seamlessly. Perhaps, early education into how the Department of Veterans Affairs works, as well as, what benefits are available and how to go about applying for and/or receiving such benefits would assist future returning military personnel.

Respectfully submitted,



Roderick Houston
9/13/2012

12 September 2012

To: Rep. Judy Biggert

Re: Comments on Veterans Housing Issues

My name is Robert Adams and I am the Co Founder and President of the Midwest Shelter for Homeless Veterans in Wheaton, IL. We provide two sets of services exclusively for veterans. We have a five bed Transitional Housing unit for male veterans, providing medical care, psychological treatment, case management (life skills, social skills, financial management, employment training and jobs, legal and educational assistance) and finally, assistance in securing independent housing upon completion of the program. We also offer a second program for Affordable Housing for six veterans, including space for a female vet and a disabled vet. We have been in operation since January, 2007.

Our Affordable Housing program is an example of an initiative for homeless and low income veterans. We received a grant from HUD, administered by DuPage County, IL, HOMES Fund, to purchase and rehab a house in Wheaton. This grant has allowed us to more than double our ability to help veterans. The program has already successfully filled to capacity.

We have been more than pleased with our partnerships with the VA and HUD in administering our programs. Communication is solid and free flowing and we have experienced great cooperation from those administrators in each agency who work with us most notably Erin Silanskis of the Homeless Program at Hines VA Medical Center and in Hines, IL., and Carrol Roark and Reed Panther at DuPage County Community Services.

We believe the number one issue for our veterans, after they have received the therapeutic services they need to address their psychological and substance abuse issues, is meaningful work opportunities. And decent housing is right there. According to the Bureau of Labor in 2011, 30.2% of all vets between ages 18-24 were unemployed. Half of all veterans are unaware of their available benefits. 1/3 of employers are unaware of their obligations to returning veterans. So many companies are unaware of tax breaks they will receive for hiring a veteran. A media campaign that focuses on these issues will help with obtaining and retaining jobs, and thus make affording housing easier for veterans.

Non-profits often suffer from lack of staff training and development. Establishing a mentoring program that allows new agencies or ones with operation issues to partner with experienced successful agencies would go a long way towards helping veterans in need to get the services needed.

Continue to encourage and support veterans as a qualifying preference for all federal housing dollars. To make VASH vouchers available in more communities across the country. For example, only 9 of 102 counties in Illinois receive HUD VASH vouchers. And 80% of the VASH vouchers in Illinois are in the city of Chicago. And DuPage County has the highest rents in the state. Decrease the amount of wait time and bureaucratic red tape associated with applying for housing.

Thank you for your time and energy on behalf of veterans.

Respectfully,

Robert M. Adams LCSW

President

www.helpaveteran.org



Maurice "Moe" Veissi
2012 President

Dale A. Stinton
Chief Executive Officer

GOVERNMENT AFFAIRS DIVISION
Jerry Giovaniello, Senior Vice President
Gary Weaver, Vice President
Joe Ventrone, Vice President
Jannie Gregory, Deputy Chief Lobbyist

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Washington, DC 20001-2020
Ph. 202-383-1194 Fax 202-383-7580
www.NAR.org

September 13, 2012

The Honorable Judy Biggert
2113 Rayburn House Office Building
Washington, DC 20515

Dear Chairwoman Biggert,

The National Association of REALTORS® thanks you for holding this important hearing about housing opportunities for America's veterans. Our men and women who have served our nation deserve our gratitude and highest level of priority for access to federal programs.

The VA home loan guaranty program is not only a valuable tool for helping our veterans achieve the dream of homeownership but also fulfills a promise that is made in return for their service. We strongly support the VA home loan guaranty program, and believe there are enhancements that can make the program even more valuable to our veterans.

- **Allow transaction fees to be negotiable**

NAR believes that VA borrowers should be allowed to negotiate fees with sellers, just as non-VA borrowers do, as a part of home purchase transactions. To ensure the veterans do not have to pay excessive fees, VA rules limit the amount veterans can be charged for closing costs and even fees like termite and other inspections. While we fully support VA's efforts to limit fees paid by veterans, our members report that veterans using the VA Home Loan Guaranty program have found themselves at a disadvantage when purchasing a home because of these rules. For some purchases, special certifications and inspections stemming from VA policy guidance are required by lenders. Today, these certifications and inspections involve fees that must be paid by the seller, as VA limits the fees veterans can pay in a home purchase transaction. If the seller refuses, the veteran is denied the opportunity to purchase the home of his or her choice. And, in instances where there are multiple bids, this certainly puts veterans at a disadvantage to the non-veteran purchaser.

This issue is exacerbated by the current proliferation of distressed properties on the market. On a national level, foreclosed homes and short sales make up 24% of all home sales today, and a number of communities have rates that are significantly higher. Veterans are virtually cut out of this market, because there is no "seller" on the other side to pay the necessary fees. These homes are often the most affordable option in many housing markets; however, because VA policy restricts the fees that veterans can pay, the veteran home loan purchaser is clearly disadvantaged from utilizing his certificate of eligibility for a VA loan to purchase a home.



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- **Create a Pilot Program for Renovation/rehabilitation.**

NAR urges the US Department of Veterans Affairs (VA) to use existing authority to offer a Veterans Renovation Pilot Program similar to the Federal Housing Administration's (FHA) 203(k) Program. The pilot could be run through VA's Loan Guaranty Program, which allows a veteran to purchase, repair, alter, renovate, and improve a home under USC Title 38, section 3710. Like FHA's 203(k) Program, this pilot would promote homeownership and be an important tool for community and neighborhood revitalization and stabilization.

Such a program would be very useful in providing veterans access to the currently large supply of Real Estate Owned (REO) properties, owned by lenders or the government. According to the Federal Reserve, as many as 1 million REO properties in both 2012 and 2013 could enter the market.^[1] Florida, Nevada, and Arizona are three states with a substantial number of REO properties and a high concentration of veterans who could be eligible to purchase a home using this pilot. The program would also be effective in areas with a large stock of older homes in need of renovation, just as the FHA program has been for years.

Under the Veterans Renovation Pilot Program, veterans would use their guaranty to purchase single family homes in need of renovation and repair. Condominium units would also be eligible. The borrower gets just one mortgage loan, at a long-term fixed rate, to finance both the acquisition and the rehabilitation of the property. To provide funds for the rehabilitation, the mortgage amount is based on the projected value of the property with the work completed, taking into account the cost of the work. Renovations should be completed only by licensed and bonded contractors. This program has been very successful for FHA borrowers, and should be offered to veterans as well.

The VA home loan guaranty program is a vital homeownership tool that provides veterans with a centralized, affordable, and accessible method of purchasing homes as a benefit for their service to our nation. It should be strengthened and enhanced to ensure that our nation's heroes can achieve the dream of homeownership for themselves and their families.

Sincerely,



Maurice "Moe" Veissi
2012 President, National Association of REALTORS®

Cc: House Financial Services Committee, Subcommittee on Insurance, Housing and Community Opportunity

¹ The US Housing Market: Current Conditions and Policy Considerations. Board of Governors of the Federal Reserve System. January 4, 2012.

**Housing for Heroes: Examining How
Federal Programs Can Better Serve
Veterans**

**House Financial Services Subcommittee on
Insurance, Housing and Community
Opportunity**

**Testimony of Gary A. Officer
President & CEO
Rebuilding Together**

September 14, 2012
Washington, DC



Representative Biggert, Ranking Member Gutierrez and members of the Committee.

My name is Gary Officer and I am President and CEO of Rebuilding Together, the nation's leading nonprofit organization providing critical home repairs, modifications, and improvements for America's low-income homeowners. I offer written testimony on the vision and work of Rebuilding Together in ensuring America's veterans are living in homes that accommodate their needs, homes that are safe and accessible.

Who we are

For more than 30 years, Rebuilding Together has provided home rehabilitation and modification services to homeowners in need. Each year our network of over 200 affiliated nonprofits, with the help of some 200,000 volunteers, completes 10,000 projects across the United States. Completed with the belief that every American deserves a safe and healthy home, these projects help improve the lives of homeowners and the vibrancy of their communities. Our work offers many homeowners, faced with foreclosure or unable to afford needed modifications, the ability to safely remain in their homes. However, with nearly 6 million homeowners still living in homes deemed physically inadequate, we understand the need to continue to work to expand our impact¹.

Our Veterans Housing Program

In 2005, recognizing a growing need among veteran homeowners, Rebuilding Together decided to apply its experience in home repair and modification to assist the veteran community. Born from this decision, our Veterans Housing Program serves to fill gaps in housing services for retired and active service members to ensure that their housing needs are met. For veterans returning home with severe injuries such as amputation or traumatic brain injury, readjustment and reintegration can be hampered by lack of a wheelchair ramp or the ability to take a shower. Older veterans, who served so honorably years ago, are often forced to navigate treacherous staircases or live in homes with no heat and a leaking roof. These conditions are unacceptable for our nation's veterans, but with the appropriate resources they are amendable. With the help of corporate partners and private contributions we've worked to do just that, by providing low-income veterans across the country with the modifications and repairs needed to live independently and safely in their homes, all at no cost to the homeowner.

Since its launch, Rebuilding Together's Veterans Housing Program has grown rapidly, and veteran services have quickly become one of our foremost strategic priorities. The program's impact has

¹ Center for Housing Policy, "Housing an Aging Population: Are We Prepared?"
<http://www.nhc.org/media/files/AgingReport2012.pdf>.

reverberated throughout our affiliate network and, as of today, more than 1,300 veterans projects have been completed in 44 states. With each project comes a story, and with each story I'm reminded of the incredible impact these projects have on the lives of men and women who have served our country dutifully. The story of Josh, a 23 year-old combat veteran, does just that.

Josh's Story

A high school hockey star from Chicago, Josh pursued his passion for military service by enlisting in the Marines in 2010. In March of 2011 Josh was deployed to Afghanistan with the 5th Marine Regiment and a short time later, while on foot patrol, he was seriously injured by a landmine explosion, shattering his eardrums and resulting in the loss of his legs. Josh returned home and began rehabilitation at Walter Reed Military Hospital in Washington, where he underwent numerous surgeries and started down the path to recovery. During this time Josh's parents alternated taking time away from their jobs to be with him through this difficult process. Back in Chicago, complex and expensive renovations of their home, needed to ensure Josh's safety and accessibility, stood as a barrier to his returning home to his family at the completion of his rehabilitation. Upon hearing Josh's story and recognizing this barrier, Rebuilding Together's Chicago affiliate sprang into action, providing his family with accessibility modifications including an elevator, ramps, and widened doorways. Along with extensive kitchen and bathroom modifications, these measures provided Josh greater in-home mobility and would ultimately pave the way for his return. Today, Josh continues his recovery with the love and support of his family.

Veterans in Need

Stories like Josh's offer a sense of accomplishment, but we must remind ourselves of the work that still needs to be done and the unmet needs of countless more veterans across America. Over 1.4 million veterans live in poverty.² 4.3 million veteran homeowners reporting a disability and a quarter of post-9/11 veterans returning home with a service-connected disability, the need to serve veterans is greater than ever before.^{3,4}

Several VA Programs seek to help address the housing needs of low-income and disabled veterans, but we believe an innovative approach that leverages non-profit resources would help stretch Federal funding while meeting an unmet need. The Temporary Residence Adaptation program and the Specially Adapted Housing (SAH) grant program provides assistance for renters and veterans or servicemembers who are

² National Housing Conference, Housing America's Heroes: Facts about Veterans and Housing <http://www.nhc.org/media/files/VeteransHousingKeyFacts.pdf>

³ Dataferret Tabulation of 2010 American Community Survey data prepared by the U.S. Census Bureau, 2011.

⁴ National Housing Conference, Housing America's Heroes: Facts about Veterans and Housing <http://www.nhc.org/media/files/VeteransHousingKeyFacts.pdf>.

permanently and totally disabled as the result of a disability connected to their service and who have a qualifying disability. The Special Housing Adaptations (SHA) grant program provides a smaller amount of assistance for veterans or servicemembers who are permanently and totally disabled as result of a service-connected disability for certain disabilities.

Rebuilding Together believes that there is value in leveraging potential partnerships between government and non-profits to meet the needs of veterans who fall between the eligibility of VA programs but for whom home adaptations are a necessity. Veterans determined to be disabled by VA must meet stringent requirements to receive significant adaptation funding. Further, as evidenced by the temporary expansion in SAH benefits, the need is greater than the current programs. For veterans who have disabilities not related to their service, the need for adaptation assistance is significant. Veterans with catastrophic disabilities not related to their service are able to receive VA health care but are not eligible for SAH or SHA.

An Innovative Solution

With this need in mind, Rebuilding Together, along with Congressman Al Green, has developed an innovative veterans housing repair and modification proposal that leverages private sector funds and volunteers to serve those who have served our country. Current federal programs like the Department of Veteran's Affairs' (VA) Specially Adaptive Housing (SAH) program partially address the housing problems faced by veterans with disabilities, but do not always provide housing to deserving applicants. SAH, for instance, has strict eligibility requirements that cover only a portion of veterans with disabilities and does not provide for low-income veterans without a disability but who have homes in need of urgent repairs. Congressman Green's innovative pilot program, the Housing Assistance for Veterans, or HAVEN, Act, seeks to utilize the benefits of public-private partnerships in expanding these veteran's services in an efficient and cost-effective way. The pilot would allow housing nonprofits to leverage volunteers and private sector funding with federal grants, administered by the Department of Housing and Urban Development (HUD) and overseen by the VA, to provide critical repairs for low-income and disabled veteran homeowners. We see this pilot as an effective means to overcome the obstacles to coordinating and more effectively serve veterans.

Conclusion

Thank you for the opportunity to offer written testimony on behalf of Rebuilding Together and the 200 affiliates in our network that serve 10,000 low income homeowners a year, of whom 16000 are Veterans.



HOMELESS VETERAN HEARING TESTIMONY

The Subcommittee on Insurance, Housing and Community Opportunity will hold a hearing entitled "Housing for Heroes: Examining How Federal Programs Can Better Serve Veterans," at 9:30 a.m. on Friday, September 14, 2012, in Room 2128 of the Rayburn House Office Building.

The Subcommittee is interested in examining barriers that homeless and low-income veterans face in securing housing assistance and services from federal agencies. This hearing also will explore suggestions to improve federal agency collaboration, program efficiencies, and the administration of homeless housing and services for veterans. Your statement should address the following topics:

1. Recent, successful homeless and low-income veterans housing initiatives;

Chicago based, "A Safe Haven" is a nationally recognized model for social business enterprise. Since 1994, A Safe Haven in coordination with affiliated social business enterprises, has successfully transitioned over 40,000 homeless individuals and families (Veterans representing 15% of that population) to sustainable self-sufficiency. The methodology utilized incorporates and integrates a comprehensive continuum of care that includes treatment, housing, supportive services, job training and job placement.

Since 2010, A Safe Haven has contracted with the Veterans Administration to serve as a resource for transitional housing, per diem housing and affordable housing. This partnership has delivered housing services to over 1200 Veterans in the last 18 months.

2. Obstacles to federal agencies' collaboration to effectively administer housing and services for homeless and low-income veterans;

The obstacles to Federal Agencies to effectively serve Veterans needs derive from the fact that Homeless Veterans face a myriad of challenges that leads to homelessness and chronic homelessness. Federal agencies fail to coordinate and collaborate resources among agencies to identify, address and deliver services to meet the individual Veteran's needs. This is leading to fragmentation of services and a revolving door effect. Obstacles include the following:

- Separate program directives prohibit alignment of services to be delivered to the participant.
- Program funding criteria may limit effective collaboration with community based services that can fill the gaps in the support delivery system.
- Funding of services can be fragmented.

- The ability to expand the utilization of community based programs is subjected to a cumbersome approval process that prohibits the agencies from aligning the delivery system.
 - Specific limitations on the number of days a participant is allowed in a program often does not provide a sufficient time period to effectuate a long-term change; especially for treatment for addictions and for support service delivery in transitional housing programs.
3. Obstacles that homeless and low-income veterans face in securing housing assistance and services from federal programs;
- Bureaucracy is often difficult for the Veteran to navigate. The time between presentation for services and the actual delivery can be lengthy leading to the Veteran becoming frustrated and disengaged.
 - The ability to engage Veterans where they need the services does not always correlate to the location of the VAMC or VA service center.
 - Rental conditions and inspection periods that are placed on housing providers often delay the placement of the Veteran. In addition, the current system places more of the financial risk of the rental on the provider making the Veteran a difficult placement.
 - Voucher systems parameters are not aligned with housing providers that offer support services. These providers are in the best position to coordinate service delivery to the placed veteran to insure permanent sustainable housing. Generally, the VA requires services be received at the VA service center.
 - The application process can be cumbersome for a Veteran to qualify for housing, causing delays. Many housing options do not address the needs of Veterans with dependents—or only the veteran is covered for services.
 - Housing options need to be more directly aligned to the level of support services required by the Veteran. Independent housing providers will not risk capital assets on individuals who are not stabilized, or in the process of receiving connected support services.
 - Current rapid housing models are generally not supported by rental housing providers; unless there is a required support service delivery system in place.

Without such services Veterans are in jeopardy of not being able to sustain the housing option.

- Programs for Veteran heads of households are limited in availability.
4. Obstacles that non-profit entities and other service providers face in helping homeless and low-income veterans secure housing assistance and services from federal programs; and
 - The time from approval of programs to actual delivery of services is often delayed due to a cumbersome inspection and contract process. Information requests are often duplicated and would benefit from a more streamlined and coordinated system.
 - Inspections of developments are not coordinated with local rules and approvals, thus creating a separate approval process. Alignment of the project/facility inspection to be more in line with local rules will speed up the project development process.
 - Veteran's benefits would be improved by more direct alignment with actual needs. Benefits should be structured to reach a specific goal and therefore allow for expenditures that are inherent in obtaining the stated goal. Reimbursing program funding for necessary costs such as transportation for the veteran while obtaining housing, job training or support services---all of which, if effectively delivered, lead to stabilized housing.
 - VAMC' should be incentivized for coordinating and utilizing effective community based services that are directly aligned with housing and other services.
 - The service delivery system would benefit from proactive service delivery which will reduce the cost of reactive service delivery. Veterans are often not accountable for the services they receive.
 5. Suggestions for improvements to federal housing programs to better serve homeless and low-income veterans.
 - Utilize community-based services that are experienced and have a proven track record in providing services to this special population.
 - Issue project based vouchers which will attract quality, experienced landlords and incentivize them to lease to special and high risk populations. Establish a rental system that aligns the goals of the housing provider, the funding agency and the Veteran.

- Encourage a culture of cooperation and partnership between the VAMC's and community providers who work on behalf of the homeless veterans in helping them achieve self-sufficiency and/or highest level of independent living.
- Require homeless veterans to participate in recommended support service programs as a condition of maintain their vouchers.
- Federal agencies should partner with community based providers that demonstrate the ability to individually case manage, assess and coordinate service delivery with an integrated, comprehensive continuum of care that may include community based treatment, job training, job placement and affordable housing. Federal agencies should coordinate the delivery system of services with these providers in order to provide better focus on key issues of suicide prevention, PTSD treatment, mental health issues and other disabilities that are prevalent to the Veteran population.
- Provide housing for homeless Veterans men and women and their dependents.
- Extend the time frame of housing through the transitional program to a minimum of 90-120 days. Studies show in order to learn new habits a person must begin to practice the new habits for a minimum of 90 days.
- Allow flexibility on the service delivery protocols for Veterans to be assessment driven.
- Establish benchmarks and implement performance metrics to allow the Federal Agencies to evaluate programs both internal and community based service delivery. Performance based budgeting will support programs and agencies that consistently deliver sustainable successful outcomes.
- The ultimate goal for the veteran is to achieve independence, self-sufficiency, family reunification, building new social networks with Veterans and mainstream society. These goals can only be accomplished by collaboration and partnership between the Government and the community.

Submitted by:
 Neli Vazquez-Rowland, President
 A Safe Haven Foundation
www.ASafeHaven.org
 773-435-8355 office
 630-606-9997 cell

Veterans Upward Bound

Roosevelt University

430 South Michigan Ave. (GB 715)

Chicago, Illinois, 60605

September 13, 2012

Dear Honorable Members of the Congressional Subcommittee on Insurance, Housing and Community Opportunity:

As an educator serving low-income and homeless veterans through Veterans Upward Bound (VUB), a federal grant program, it has been my experience that homeless and low-income veterans housing initiatives have made a positive impact on veterans needing to gain stability in their lives. Although the VUB program is chartered by the U.S. Department of Education to assist veterans prepare for postsecondary education, it has been imperative for the veterans receiving free educational services from VUB to have a place they can call home prior to focusing their efforts on their academic and career goals. VUB has benefitted from working with several Homeless Veterans' Reintegration Programs (HVRP) grantees to which we refer our clients in need of a roof over their heads. Meanwhile, the HVRP grantees have been able to refer clients to us once they have addressed the more pressing issue of housing.

The learning curve for service providers, like me, includes becoming aware of which veterans can be served according to the specific guidelines of a HVRP grant. For example, does the facility work only with single veterans, or does it also accept veterans and their families? Having knowledge of how long a veteran must be on a waiting list, or even simply identifying the appropriate point of contact can help facilitate the connection between the veteran and the HVRP. Other concerns include being cognizant of the differences between emergency, transitional, and long-term housing options.

As someone looking at the situation from the outside, it is rather apparent that veterans do not necessarily know the protocol for getting a referral, or even understanding the process by which one should be added to a housing wait list. Unless the veteran is directly engaged with the local VA hospital, or connected to a community or not-for-profit organization that serves as the veteran's liaison, it would be unlikely that he/she would even be aware of the HVRP resources available to him/her. In many cases, the veteran is simultaneously dealing with other personal life struggles such as lack of employment, inability to provide for his/her family, substance addiction, and need for mental health services. The continuum of services needed to be rendered is multifaceted, but the most vital and fundamental issue is being able to find shelter and food.

Additionally, I have become more aware that the service providers themselves are unsure of what other veteran service organizations do to help veterans. However, simple measures can be taken to better link agencies. Once HVRP grantees are announced, it would be beneficial for the list of organizations and the services they provide to be released to local Congressional offices, VA facilities, and other state and community organizations. A simple fact sheet detailing available resources, eligibility criteria, and contact information would help other service providers to make

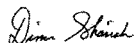
appropriate referrals. Of course, it would be the responsibility of individual organizations to proactively meet, interact with these veterans service programs, while establishing parameters for a mutually beneficial referral system. For example, Veterans Upward Bound at Roosevelt University is able to refer its clients in need of housing to Volunteers of America of Illinois. Conversely, Volunteers of America is able to direct veterans who plan to pursue higher education to Veterans Upward Bound.

A final major concern is that new and robust federal educational benefits have helped propel low-income and homeless veterans, who are not adequately prepared for college, to enroll primarily for the purpose of gaining substantial income. It remains to be determined how effective new federal programs such as the Veterans Retraining Assistance Program (VRAP) will be in providing unemployed veterans with postsecondary education that leads to employment. At roughly \$1,500.00 per month, and assuming that a veteran will select a high-demand field requiring twelve months of funding, the nearly \$18,000.00 in supplemental income has sparked interest from low-income and homeless veterans to enroll in school.

Certainly, the opportunity to receive income while pursuing formal training is a tremendous motivator to consider postsecondary education; however, the unaddressed issue is whether those individuals are prepared for the academic rigors of college. It is also a major concern that prospective student veterans do not understand that the retroactive funding paid directly to them through the VRAP only begins after they are enrolled and participating in college courses. These individuals need someone to explain to them that they must procure other funding sources to pay for college classes prior to the start of the program. Meanwhile, these unemployed veterans are depending on monthly income from the VRAP to provide for basic necessities such as shelter, utilities, food, and transportation. They also need to be aware of the consequences of not paying their tuition on time, taking on too much educational debt, failing status impacting aid received, etc....

Clearly, the task of supporting veterans from a place of socio-economic distress to stability and onward to education leading to employment is of vital significance to our Nation. The more that federal departments (DOD, DOL, ED, and VA) can collaborate and coordinate reintegration and transition services, the better we can serve our veterans. Thank you for taking the time to review my statement.

Sincerely,



Dinu Skariah

VUB Counseling and Career Coordinator

www.navub.org



Vietnam Veterans of America

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A Not-For-Profit Veterans Service Organization Chartered by the United States Congress

September 6, 2012

Katy Beh Neas
Senior Vice President, Government Relations
Easter Seals
1425 K Street, NW, Suite 200
Washington, DC 20005

Dear Katy,

We at Vietnam Veterans of America (VVA) are pleased to support Easter Seals' proposal to modify the allocation guidelines for the Supportive Services for Veterans Families (SSVF) Program to allow qualified, national nonprofits with active and experienced local chapters or affiliates to apply for and win regional or national grants within fiscal year (FY) 2013 SSVF funds.

VVA strongly supports the SSVF Program, which provides housing stability to homeless and at-risk Veteran families through community-based supportive services. VVA endorsed the legislation that created SSVF in 2008 and has closely followed the U.S. Department of Veterans Affairs' (VA) implementation of the program. Vietnam Veterans of California, Inc. successfully operates two SSVF grants serving Veteran families in California and Northern Nevada. SSVF has already brought much advantage to Veterans in communities across the country.

VVA agrees with Easter Seals that the VA would benefit by using some of the FY 2013 SSVF funds to award both local and national grants. Current VA SSVF guidelines preclude a national nonprofit with qualified local affiliates or chapters from securing a single grant that would operate in multiple service areas. National grants to qualified organizations could help the VA to improve service delivery, enhance program management, streamline reporting and increase program outcomes. VVA believes the minor program change proposed by Easter Seals would help to support the VA's goal of ending Veterans' homelessness by 2015.

Katy Beh Neas
Senior Vice President, Government Relations
Easter Seals
September 6, 2012

-2-

Thank you for the opportunity to comment on your SSVF Program proposal. VVA lends our support in helping Easter Seals to achieve this technical fix in time for the FY 2013 SSVF Program grant cycle.

Sincerely,

A handwritten signature in black ink, appearing to read 'John', with a stylized flourish extending to the right.

John Rowan
National President

**Statement of Edward Quill
Chief Administrative Officer, Volunteers of America of Florida**

**Submitted to the
U.S. House of Representatives
Financial Services Committee**

September 14, 2012

Washington, DC

Thank you for the invitation to testify today and for all you do to assist our nation's veterans. Volunteers of America of Florida is a statewide 501 (c) (3) non-profit, faith-based human services organization operating in Florida for 98 years. We are an affiliate of Volunteers of America, a national charitable organization with headquarters in the Washington, DC area, in existence for 116 years, serving more than two and a half million people in over 400 communities in 46 states and Puerto Rico.

Volunteers of America of Florida provides housing and essential services to vulnerable Floridians including individuals, families and veterans who are homeless or at risk of homelessness, senior citizens with limited financial resources striving to maintain an independent lifestyle, and individuals with disabilities. With a continuum of services and strong community support, Volunteers of America delivers comprehensive solutions to the complex challenges facing Florida communities. Currently, we serve more than 5,500 of our most vulnerable through community-based initiatives, and 87 programs in 22 cities and Puerto Rico. We have a strong presence in urban centers such as Jacksonville, Tampa, Orlando and Miami. We are equally responsive to Floridians struggling in our rural communities and we are proud to be a resourceful partner in more than 30 rural counties.

Our long term service to veterans is predicated on solid partnerships and common goals to bridge veterans back into their community of choice. As a provider, Volunteers of America of Florida appreciates the dedication and resources to make this bridge; the funding partners required to deliver comprehensive solutions; the opportunities community partners to collaborate to reintegrate our veterans; and the tireless efforts to provide successful programs as a strategic gateway for veterans to reclaim their position in our communities. We have acquired the capacity to operate statewide, develop a continuum of housing options and array of support services, and have applied diligence in allocating limited resources responsibly. We appreciate the efforts of the National Coalition for Homeless Veterans to advocate for veterans' needs. The VA

healthcare for homeless veteran's services has helped to deliver the necessary the housing and supportive services. Their support has been valuable as we continue to forge solutions that benefit our veterans, their families and the communities they call home.

Florida is projected to have the largest veteran population in the nation by 2020. Consistently, Volunteers of America of Florida has taken action to address the complex housing and service needs of veterans. We are one of the largest providers of the Veterans Affairs Grant and Per Diem transitional housing program in Florida. We have an acute awareness of the issues faced by our returning men and women who have served our country. Based on more a decade of intensive service to veterans, the rest of my testimony will sharpen the focus of the challenges ahead for us to continue to lead communities in effectively care for the needs of our veterans.

Housing stability. Homelessness among Florida veterans has decreased from 17% to 13% over the past three years. This is due in great measure to Homeless Veterans Grant and Per Diem program. This program recognizes the need to give veterans stable housing and supportive services as a pathway to community reintegration. More recently, the HUD/VASH program has also contributed to decrease the number of homeless veterans in Florida. We also recognize the many HUD programs that assist our veterans and individuals struggling with disabilities and financial limitations. The HUD Section 811, Section 202, Supportive Housing Program, and Neighborhood Stabilization Program have enabled us to contribute to develop affordable housing choices. We are grateful to the Florida Department of Veterans Affairs. In 2010, they recommended to the Florida Housing Finance Corporation that we serve as a special needs coordinator for the "LINK Program". This program requires for profit developers to set aside a portion of housing units for individuals at or below 60% of the median average income. We are also appreciative of The Home Depot Foundation and their generous support to assist our veterans with home repairs so they may stay in their homes. We have also stood up to expand our transitional services to veterans over the past three years during the uncertain economic conditions. Our mission driven employees sacrificed personal gain so we could develop housing for our veterans. The long-term solution is to overcome the restrictions and limitations of conventional financing and burdensome mortgages so housing development may continue.

There are major impediments to creating the estimated 7,000 beds needed to house our homeless veterans in Florida. The Grant and Per Diem program is part of the solution. However, there is a need for funding for supportive housing that realizes the needs of our recently returning veterans and the implications for care based on their complex health care issues. The readjustment difficulties of our veterans require stable housing as a platform for the delivery of health care. We must increase veterans' access to a range of housing choices based on their needs. Additional funding for supportive housing

is a priority to assure that our veterans receive the highest quality of care in our communities. We fully support the need for the Grant and Per Diem program, and related initiatives to place dignified housing for veterans where it belongs – the residential community of their choice. With Florida's rise to the first position as home to our nation's veterans, we will continue to work in collaboration with partners who embrace the evidence. Supportive housing is an essential building block for our veterans and their families. Federal programs need to spend limited funds wisely without the requirement of a local cash match. Faith-based and community partners can develop housing as a stabilizing platform for veteran recovery and resilience.

Supportive Services. The invisible wound of our current wars is making it hard for our veterans to adjust and reclaim their position in our communities. Traumatic brain injuries, post traumatic stress injuries, severe mood swings, substance abuse, depression, loss of family support, and isolation are among the challenges faced everyday by our heroes suffering from combat exposure. The impact is also felt by the veterans' families. There is a long road that lies ahead and the best solutions must be delivered. Once the veteran is in secure housing, it is time to provide the supportive services. These services are driven by the goals of the veterans and the needs of their families. Supportive services progressively enable each veteran to succeed in optimizing his or her strengths. A plan is set so each veteran is supported, encouraged, and accompanied to achieve a healthy lifestyle. Fortunately, the VA is there to provide hospitals, clinics and increasingly sophisticated medical services. For our veterans requiring this level of care, we respect the expertise of the VA to deliver. However, for our veterans who can live in our communities and do not require inpatient care, community partners are critical.

We deliver supportive services to veterans with demonstrated results. We focus on the goals of the veteran, and the incremental steps up the ladder to these highly personalized goals. We build community-based alliances, know our community resources and operate with a high level of efficiency. Services to veterans can spring from their communities working in collaboration with the VA to advance veterans' ability to reintegrate in our communities more efficiently, more compassionately. Future resources can be placed with community alliances that can provide direct behavioral health care services to veterans. This enables the VA to focus on medical care priorities as we provide the community based behavioral health care services to enable veterans to reclaim a productive role in our communities. We have seen the impact of our programs as veterans take employment offers worthy of their talents, unify with their families, and purchase a home. Programs like Grant and Per Diem, supportive housing initiatives, and contracting supportive services to community providers are all elements of veterans' successful future.

My final point is to share our purpose and demonstrate the role of community in housing and supportive services for our veterans

Purpose and community. We want veterans to have access to housing that maximizes their independence and strengthens their family. We want our veterans to reclaim their positions in our communities and have the full benefit of the resources our communities offer. We want veterans to effortlessly navigate through the benefits they may rightly claim, the opportunities for retraining, the quality of medical care our VA hospitals provide, and we want them to experience wellness, stability and growth. Our purpose is to advance each veteran in accord with the housing and health goals he or she has selected. We organize community partners, build partners, and know how to navigate so we may guide others responsibly to community resources.

We ask you to support our efforts on behalf of every veteran and our fellow community-based providers. We need resources to continue to develop stable housing for our veterans – they need both transitional and permanent homes in our communities. We want to serve as a community linkage and a supportive services provider so veterans can be served in our communities. In this economic climate, the difficulty in securing a local match makes expansion of services extremely difficult.

On behalf of every veteran we have served, our fellow community providers, our public and private partners, we trust our ability to bridge our heroes into our communities. When we embrace common goals to serve and support those in need, when we deliver nationally recognized, high quality processes in housing and health service program, when we continue to ask for the resources needed to house and serve our veterans, we will continue to create innovative solutions to revitalized lives, neighborhoods, communities, and our nation.

Thank you for the opportunity to share my experiences and views on the issues impacting our veterans and our communities. I appreciate your time. In closing, I send a thanks to all our men and women who have served to protect our communities.

Edward B. Quill, Chief Administrative Officer, Volunteers of America of Florida

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**Statement for the Record
Of
C. A. Wilson, CEO
St. Paul's Senior Homes & Services**

**Submitted to the U.S. House of Representatives Subcommittee on Insurance, Housing
and Community Opportunity of the House Committee on Financial Services
In Connection with the Hearing:
"Housing for Heroes: Examining How Federal Programs Can Better Serve Veterans"
Friday, September 14, 2012
Room 2128
Rayburn House Office Building**

St. Paul's Senior Homes & Services (St. Paul's) appreciates the opportunity to submit a **statement of support** for the record of the Subcommittee's September 14th 2012 hearing on veteran housing.

Legislative bill **H.R. 5861**, "Elderly Homeless Veterans Housing Grant Pilot Program" addresses **permanent** housing with services (meals, counseling, and social supports) for older veterans age 55 and over who have challenges limiting their ability to work or perform activities of daily living due to substance abuse, longstanding PTSD, mental health issues, medical conditions, or other disabilities.

Current programs address the needs of younger homeless Veterans and include transitional housing, job training, and rehabilitative counseling to re-enter civilian life. According to the Department of Veterans Affairs, the number of homeless Vietnam era veterans exceeds the number of fatalities that occurred during the war.¹ Conditions linked to increased risk of death among homeless veterans over 60 is 21.3% versus 9.43% for homeless non-veterans.² However, there are no existing programs to serve homeless, vulnerable older veterans in the specific age group of 55 and older.

Mr. Ron Gilmore who served as a Third Class Petty Officer, U.S. Navy, during the Vietnam War stated, *"If there had been such a place as H.R. 5861 proposes, I would have gone there, and I would not have been afraid and feel so alone."*

The goal, with passage of H.R. 5861, would be to establish two non-profit sponsored, demonstration, "housing first" with services programs in the United States. These will provide **permanent**, non-conditional housing for several hundred older homeless veterans. The model could be replicated nationwide to address the needs of frail, medically challenged older homeless veterans for today, as well as serve combat veterans for generations to come.

Additionally, each of the programs would create much needed jobs in their respective cities.

According to the San Diego Regional Task Force on the Homeless, "We All Count 2012 Annual Homeless Census," veterans comprise 17% of the overall homeless population of San Diego County; nationwide, veterans comprise 12% of those homeless on any given night.

In early 2011, St. Paul's held many focus group meetings that were attended by community leaders of Veteran's agencies, legislative offices, and support groups. The purpose of the meetings was to establish the need and viability for a "housing first" model of care for older veterans. The overwhelming response acknowledged the acute need and gave support for St. Paul's plans to pursue a permanent "housing first" project with services for older homeless Veterans.

St. Paul's Senior Homes & Services recommends adoption of H.R. 5861 which is in keeping with Secretary of Veterans Affairs, General Shinseki's commitment to end veteran homelessness by 2015. This goal, once reached, will give older homeless veterans a place to call home where their physical, social and emotional needs are supported in a long-term housing facility. There they will be welcomed and accepted just as they are; addictions and other challenges notwithstanding.

Thank you for the opportunity to provide the committee with a statement on the need for the adoption of H.R. 5861. St. Paul's Senior Homes & Services would be happy to answer any questions the committee has at any time. Please contact Cheryl Wilson c/o projectmanager@stpaulseniors.org, or (619) 239-6900.

Respectfully submitted,



Cheryl Wilson, RN, MA, LNHA
Chief Executive Officer
St. Paul's Senior Homes & Services

¹ United States Department of Veterans Affairs, —Homeless Veterans: Overview of Homelessness, Updated August 31, 2009.

² Data Report, National Survey of Homeless Veterans in 100,000 Homes Campaign Communities, November 2011.