AUTHENTICATED
U.S. GOVERNMENT
INFORMATION
GPO

REAUTHORIZATION OF THE McKINNEY-VENTO HOMELESS ASSISTANCE ACT, PART I

HEARING

BEFORE THE

SUBCOMMITTEE ON
HOUSING AND COMMUNITY OPPORTUNITY

OF THE

COMMITTEE ON FINANCIAL SERVICES

U.S. HOUSE OF REPRESENTATIVES

ONE HUNDRED TENTH CONGRESS

FIRST SESSION

OCTOBER 4, 2007

Printed for the use of the Committee on Financial Services

Serial No. 110–68

U.S. GOVERNMENT PRINTING OFFICE

39–906 PDF WASHINGTON : 2008

For sale by the Superintendent of Documents, U.S. Government Printing Office
Internet: bookstore.gpo.gov Phone: toll free (866) 512–1800; DC area (202) 512–1800
Fax: (202) 512–2104 Mail: Stop IDCC, Washington, DC 20402–0001

HOUSE COMMITTEE ON FINANCIAL SERVICES

BARNEY FRANK, Massachusetts, *Chairman*

PAUL E. KANJORSKI, Pennsylvania
MAXINE WATERS, California
CAROLYN B. MALONEY, New York
LUIS V. GUTIERREZ, Illinois
NYDIA M. VELÁZQUEZ, New York
MELVIN L. WATT, North Carolina
GARY L. ACKERMAN, New York
JULIA CARSON, Indiana
BRAD SHERMAN, California
GREGORY W. MEEKS, New York
DENNIS MOORE, Kansas
MICHAEL E. CAPUANO, Massachusetts
RUBÉN HINOJOSA, Texas
WM. LACY CLAY, Missouri
CAROLYN McCARTHY, New York
JOE BACA, California
STEPHEN F. LYNCH, Massachusetts
BRAD MILLER, North Carolina
DAVID SCOTT, Georgia
AL GREEN, Texas
EMANUEL CLEAVER, Missouri
MELISSA L. BEAN, Illinois
GWEN MOORE, Wisconsin,
LINCOLN DAVIS, Tennessee
ALBIO SIRES, New Jersey
PAUL W. HODES, New Hampshire
KEITH ELLISON, Minnesota
RON KLEIN, Florida
TIM MAHONEY, Florida
CHARLES A. WILSON, Ohio
ED PERLMUTTER, Colorado
CHRISTOPHER S. MURPHY, Connecticut
JOE DONNELLY, Indiana
ROBERT WEXLER, Florida
JIM MARSHALL, Georgia
DAN BOREN, Oklahoma

SPENCER BACHUS, Alabama
RICHARD H. BAKER, Louisiana
DEBORAH PRYCE, Ohio
MICHAEL N. CASTLE, Delaware
PETER T. KING, New York
EDWARD R. ROYCE, California
FRANK D. LUCAS, Oklahoma
RON PAUL, Texas
STEVEN C. LATOURETTE, Ohio
DONALD A. MANZULLO, Illinois
WALTER B. JONES, JR., North Carolina
JUDY BIGGERT, Illinois
CHRISTOPHER SHAYS, Connecticut
GARY G. MILLER, California
SHELLEY MOORE CAPITO, West Virginia
TOM FEENEY, Florida
JEB HENSARLING, Texas
SCOTT GARRETT, New Jersey
GINNY BROWN-WAITE, Florida
J. GRESHAM BARRETT, South Carolina
JIM GERLACH, Pennsylvania
STEVAN PEARCE, New Mexico
RANDY NEUGEBAUER, Texas
TOM PRICE, Georgia
GEOFF DAVIS, Kentucky
PATRICK T. McHENRY, North Carolina
JOHN CAMPBELL, California
ADAM PUTNAM, Florida
MICHELE BACHMANN, Minnesota
PETER J. ROSKAM, Illinois
THADDEUS G. McCOTTER, Michigan
KEVIN McCARTHY, California

JEANNE M. ROSLANOWICK, *Staff Director and Chief Counsel*

SUBCOMMITTEE ON HOUSING AND COMMUNITY OPPORTUNITY

MAXINE WATERS, California, *Chairwoman*

NYDIA M. VELÁZQUEZ, New York
JULIA CARSON, Indiana
STEPHEN F. LYNCH, Massachusetts
EMANUEL CLEAVER, Missouri
AL GREEN, Texas
WM. LACY CLAY, Missouri
CAROLYN B. MALONEY, New York
GWEN MOORE, Wisconsin,
ALBIO SIRES, New Jersey
KEITH ELLISON, Minnesota
CHARLES A. WILSON, Ohio
CHRISTOPHER S. MURPHY, Connecticut
JOE DONNELLY, Indiana
BARNEY FRANK, Massachusetts

SHELLEY MOORE CAPITO, West Virginia
STEVAN PEARCE, New Mexico
PETER T. KING, New York
CHRISTOPHER SHAYS, Connecticut
GARY G. MILLER, California
SHELLEY MOORE CAPITO, West Virginia
SCOTT GARRETT, New Jersey
RANDY NEUGEBAUER, Texas
GEOFF DAVIS, Kentucky
JOHN CAMPBELL, California
THADDEUS G. McCOTTER, Michigan
KEVIN McCARTHY, California

CONTENTS

	Page
Hearing held on:	
October 4, 2007	1
Appendix:	
October 4, 2007	45

WITNESSES

THURSDAY, OCTOBER 4, 2007

Allard, Hon. Wayne, a United States Senator from the State of Colorado	3
Anderson, Barbara, Executive Director, Haven House Services	21
DeSantis, Deborah, President and Chief Executive Officer, Corporation for Supportive Housing	19
Foscarinis, Maria, Executive Director, National Law Center on Homelessness & Poverty	15
McKinney, Hon. John, State Senator, State of Connecticut	17
Reed, Hon. Jack, a United States Senator from the State of Rhode Island	1
Rosen, Jeremy, Executive Director, National Policy and Advocacy Council on Homelessness	40
Vasquez, Jessica, Executive Director, New York State Coalition Against Domestic Violence	37
Walker, Pittre, Homeless Liaison, Caddo Parish School Board	23
Weintraub, Amy, Executive Director, Covenant House of West Virginia	35
Young, Linda M., Executive Director, Welcome House of Northern Kentucky	38

APPENDIX

Prepared statements:	
Carson, Hon. Julia	46
Anderson, Barbara	48
DeSantis, Deborah	60
Foscarinis, Maria	68
McKinney, Hon. John	74
Rosen, Jeremy	79
Vasquez, Jessica	95
Walker, Pittre	129
Weintraub, Amy	141
Young, Linda M.	150

REAUTHORIZATION OF THE McKINNEY-VENTO HOMELESS ASSISTANCE ACT, PART I

Thursday, October 4, 2007

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

The subcommittee met, pursuant to notice, at 10:06 a.m., in room 2128, Rayburn House Office Building, Hon. Maxine Waters [chairwoman of the subcommittee] presiding.

Members present: Representatives Waters, Cleaver, Green; Capito, Biggert, Shays, Neugebauer, Davis, and McCarthy.

Ex officio: Chairman Frank.

Chairwoman WATERS. This hearing of the Subcommittee on Housing and Community Opportunity will come to order. And I would like to deviate a little bit from our normal schedule and protocol. We have United States Senators Reed and Allard here this morning, and I would like to afford them the opportunity to make their statements, and then we will proceed. I will start with Senator Reed.

STATEMENT OF THE HONORABLE JACK REED, A UNITED STATES SENATOR FROM THE STATE OF RHODE ISLAND

Senator REED. Thank you very much, Madam Chairwoman. It is a pleasure to be here. And thank you for your invitation, and also thank you, Ranking Member Capito, for your hospitality this morning.

I am delighted to be with my colleague and friend, Wayne Allard. We were reminiscing a bit. We entered the House of Representatives together in 1991, and the Senate in 1997, so, this is the Wayne and Jack show.

[Laughter]

Senator REED. We have been working for a number of years on the reauthorization of the McKinney-Vento Homeless Assistance Act, and we have been superbly aided by our staff members, Kara Stein and Tewana Wilkerson.

This is important legislation. And, throughout this process, we have sought significant input, meeting with all interested parties, inviting written comments on all of our drafts, and holding hearings for several Congresses in a row on the reauthorization of this very important legislation.

We are very pleased with the latest version of our legislation, S. 1518, the Community Partnership to End Homelessness Act. It was approved unanimously by the Senate Banking Committee on September 19th, and it is our hope to have this bill passed by the entire Senate, and sent over to you very shortly. We welcome the opportunity you have given us this morning to talk about some of the highlights of this bipartisan legislation.

Though the last significant reauthorization of the McKinney-Vento Act occurred in 1994, a number of important changes have been made over the last several years, most significantly in 1995. In 1995, Congress consolidated the funding from several accounts, and HUD began encouraging communities to submit a single application for funding. The purpose of this single application was not only to streamline the application process, but also to encourage providers to coordinate an overall strategy for preventing and ending homelessness in their community.

This process became known as the continuum of care, and our bill has been designed to enact into statute this award-winning program. Our reauthorization legislation, in large part, has been designed to provide this continuum of care program on a broader basis throughout the country.

We eliminate three separate programs and consolidate them into a single community homeless assistance program. Communities can now make a single application for funding from this program, and use the funding for a broad array of activities to reduce homelessness.

We are particularly proud of the new focus on rural homelessness in S. 1518. Our bill would allow rural communities to apply for funding through a separate competition at HUD. Under the legislation, a rural community can also use funds more flexibly for such activities as homelessness prevention and housing stabilization, in addition to transitional housing, permanent housing, and support services.

The application process for these funds is more streamlined, and consistent with the capacities of rural homelessness programs. In addition, a minimum of 5 percent of the overall funding for homeless programs would go to the rural competition, which will ensure that this program is truly used to better address rural homelessness.

Another major change in S. 1518 is that 20 percent of the overall funding for HUD homeless programs would be distributed by formula to cities, counties, and States as emergency solution grants. Currently, only 11 percent of homelessness assistance funds go out to emergency shelter grant programs and most communities use those funds exclusively for temporary emergency shelters.

S. 1518 basically doubles the amount of money that would go out to communities via block grant, and would allow at least 40 percent of these funds to be used for prevention activities, in addition to emergency shelter. These new emergency solutions grants will allow communities to help people who are at greatest risk of becoming homeless.

I think this is a major improvement in how we deal with people who are living on the edge of homelessness. Instead of forcing everyone who is unstably housed to be defined as homeless—a defini-

tion which most individuals and families don't want to meet—cities, counties, and States would be able to use up to $440 million to help people in bad housing situations from becoming homeless in the first place, through help with rental payments, security deposits, and utility payments.

I would also like to mention a few things we have done in particular, to tackle the terrible problem of family homelessness.

First is the expansion we have made to the definition of homelessness, which recognizes that families with multiple moves are in just as much need of the emergency stabilization that the homeless system provides as a family living in a car or a campground.

Second, we have included families with a disabled member in the definition of chronically homeless.

Third, we have included a family housing and service demonstration project that will allow us to study what housing and service models work best for families.

As a result of all these changes, 100 percent of the funding of the bill is now available to families. This should make a tremendous difference in how our Federal homeless programs help prevent and reduce family homelessness. It has been 20 years since the enactment of the Stewart B. McKinney Homeless Assistance Act, and we have learned a lot about the problem of homelessness since then.

Senator Allard and I believe the Community Partnership to End Homelessness Act puts some of these best practices and proposals into action, and will help communities break the cycle of repeated and prolonged homelessness. We look forward to working together with you on reauthorizing the housing titles of the McKinney-Vento Homelessness Assistance Act, to better focus them on preventing and ending long-term homelessness.

And a final point. I did not have the privilege of serving with Stewart McKinney, but both Wayne and I served with Bruce Vento, and he was an extraordinary gentleman. And this is a fitting tribute to his efforts, and if we improve it, I think he would be very pleased and proud. Thank you.

Chairwoman WATERS. Thank you, Senator Reed. Senator Allard?

Senator ALLARD. Chairwoman Waters. Well, first of all, I wanted to express my sincere appreciation, Chairwoman Waters, and also Ranking Member Capito. I ask permission to put my full statement into the record. It goes longer than 5 minutes. And in respect to your time limits, I will not read my full statement, I will just give you parts of it, if I may.

Chairwoman WATERS. Without objection, such is the order.

STATEMENT OF THE HONORABLE WAYNE ALLARD, A UNITED STATES SENATOR FROM THE STATE OF COLORADO

Senator ALLARD. I would also like to acknowledge the hard work that my colleague and his staff have put forward on this particular piece of legislation, something that we have been working on for several years.

As a result of that, I think we have come up with a good bipartisan effort, and it takes us back to when we had the first homeless assistance act, which was in 1987, and then that was modified, which is now known as the McKinney-Vento Homeless Assistance Programs, which I do remember serving on the Agriculture Com-

mittee at the time, and working with Bruce Vento, who did a considerable amount of work on homelessness.

This act was the first comprehensive law addressing the diverse needs of the homeless, including programs at the Department of Health and Human Services, the Department of Education, the Department of Labor, the Department of Agriculture, and the Department of Housing and Urban Development.

And, until enactment of this law, the problems confronted by the homeless were mainly addressed at the State and local level. Currently, the Federal Government devotes significant resources to the homeless, yet despite the enormous Federal resources directed toward homelessness, the problem persists.

In my view, we need to bring more accountability to homeless assistance, increasing funding for those successful programs and initiatives, and then replacing those that are ineffective.

So, there seems to be a consensus that the McKinney-Vento Act has been an important tool to help some of society's most vulnerable members, and that the first step should be reauthorization of the Act. I appreciate that you are holding this hearing to explore this issue.

There also seems to be increasing consensus that the second step should be consolidation of the existing programs. I originally introduced consolidation legislation in 2000, and then Senator Reed offered a proposal in 2002. HUD also advocated for a consolidation of programs for several years now.

While we differed in some of the details, including the funding distribution mechanism for a new program, these legislative proposals offered consensus on the important starting points of reauthorization and consolidation. We worked together to find the best elements of both bills, and after extensive discussions and outreach, Senator Reed and I introduced Senate Bill 1518, known as the Community Partnership to End Homelessness Act.

Our bill will consolidate the existing programs at HUD, and to the new community homeless assistance program. And why is this consolidation so important? I think our colleague and former HUD Secretary, Senator Mel Martinez, described it very well during the Banking Committee's mark-up of the bill. He described how the HUD Secretary had his grantees confused by the various programs, not sure how to apply, and for which programs they were even eligible. It was under his leadership that HUD began to advocate consolidation of the programs.

Quite simply, consolidation will reduce administrative burdens and maximize flexibility. Rather than dealing with conflicting eligibility requirements, conflicting eligibility uses, multiple applications, and different match requirements, applicants will have to deal with only one flexible program. This streamlined approach will combine the efficiencies of a block grant with the accountability of a competitive system.

I am especially supportive of approaches such as those in the Community Partnership to End Homelessness Act, that focus on results, rather than processes. Communities that demonstrate results in preventing and ending homelessness will be rewarded. I think this is an important aspect.

We also believe that the bill makes an appropriate distinction between rural areas and large, metropolitan areas. While both areas experience homelessness, the problem manifests itself in very different ways, and the solutions are different.

I believe that we all share the goal of wanting to prevent and end homelessness in America. There are many different people with many different and laudable ideas of how to accomplish this goal. The Community Partnership to End Homelessness Act strikes the balance between these many viewpoints.

The balance is demonstrated by the unanimous support the bill received in the Senate Banking Committee. Republicans and Democrats, urban areas like New York, and rural areas like Wyoming, everyone came together to say that we believe the Community Partnership to End Homelessness Act would help prevent homelessness in the United States.

Senator Reed and I, along with our other colleagues, look forward to working with you to enact legislation to accomplish this goal, and thank you for allowing us to be here today to testify before the subcommittee.

Chairwoman WATERS. Once again, I would like to thank Senator Reed and Senator Allard, for making time to speak with us today. The extraordinarily thoughtful and consultative process you undertook in crafting the Community Partnership to End Homeless shines through clearly, and I aspire to the standard as the subcommittee focuses on reauthorizing the McKinney-Vento Act.

We are lucky to have S. 1518, as well as H.R. 840, the Homeless Emergency Assistance and Rapid Transition to Housing Act, which we will hear more about shortly, to work from, as we move forward.

At this time, I know you need to return to your pressing work with the Banking Committee, and I ask our second panel of witnesses to come forward. Thank you very much.

Mr. SHAYS. Madam Chairwoman?

Chairwoman WATERS. Yes?

Mr. SHAYS. Madam Chairwoman, could I just make a quick comment, very quick?

Chairwoman WATERS. Yes, I yield to the gentleman from Connecticut.

Mr. SHAYS. I just want to thank both of you for working on a bipartisan basis. This is what this committee is doing. And it is just nice, in this kind of excited world, that on such an important issue, we see this bipartisan help. I thank you both.

Senator ALLARD. Well, it has been a pleasure to work with Senator Reed. We worked together in Armed Services, we are together on Banking and everything, so it is a real pleasure.

I was thinking, Chairwoman Waters, you must have come into the House about the same time we did, didn't you?

Chairwoman WATERS. I did. I did.

Senator ALLARD. That is right, you were in our class, I think.

Chairwoman WATERS. That is right.

Senator ALLARD. So, it is kind of a reunion here.

Mr. SHAYS. Thank you, Madam Chairwoman.

Chairwoman WATERS. This has been a good reunion on a good issue that we can do something about. Thank you very much.

I would like to ask our second panel to take their seats at the table. I will now proceed with our opening statements, and I will recognize myself for 5 minutes.

Allow me to begin by repeating something I have said a number of times since assuming my position as Chair, namely that I intend to make preventing and ending homelessness a priority focus of the Housing Subcommittee. There is simply no more stinging indictment of recent Federal housing policy than its failure to prevent and end literal homelessness.

I am proud to note that the first serious attention Congress paid to modern homelessness consisted of hearings convened 25 years ago by my distinguished predecessor, as Chair of the then-Housing and Community Development Subcommittee, the late Henry Gonzalez.

From those hearings evolved the McKinney Act itself, thanks, of course, to the dedication of Chairman Gonzalez's full committee colleagues, Stewart McKinney of Connecticut, whose son we look forward to hearing from today, and Bruce Vento of Minnesota.

Since enactment in 1987, the McKinney-Vento Act programs have helped thousands of homeless men, women, and children return to stable housing and lives, in which they can reach their full potential. I hope that we can move forward on reauthorizing this critical legislation in the same bipartisan spirit that animated Representatives McKinney and Vento.

But the sad fact is that the McKinney-Vento Act programs should not be so desperately needed 2 decades after they were established. Earlier this year, I joined many of the organizations represented on the witness panels here today at last week's hearing, at an event marking the 20th anniversary date itself, where appropriately, bittersweet chocolate bars were distributed, reflecting the ambivalence we felt.

I dare say that Representatives McKinney and Vento themselves would be disappointed to learn that these programs remain the linchpin of the Federal response to homelessness.

Notably, the legislative history of this bill in the Congressional Record makes clear that nobody involved at the time believed that the McKinney-Vento Act alone would end homelessness, despite its ambitious creation of 15 separate programs, and an authorization of over $400 million in funding.

Indeed, the original House bill was entitled, "The Urgent Relief for the Homeless Act." Simply put, the McKinney-Vento programs were always meant as a first step, a first step toward a social safety net in which no person is forced to live on the streets or in shelters because of poverty, whether or not that poverty is coupled with additional challenges like mental illness, drug addiction, or HIV/AIDS.

What also struck me was how much the people present at the birth of these programs we consider today knew or suspected, even in the midst of a new crisis, about the real long-term solutions to homelessness, of necessity, perhaps, given the rapid and overwhelming growth in homelessness at the time. The majority of early McKinney-Vento Act authorizations and appropriations funded emergency food and shelter assistance.

Yet, from the outset, the McKinney-Vento Act invested in a wide range of interventions, including permanent support of housing, transitional housing, education, mental health, and substance addiction services, job training, and other interventions.

Building on this basic infrastructure, academic research coupled with the hard-earned knowledge of practitioners and government, have moved us to a place where we now know much more about who the homeless are, and what it takes to end homelessness for them, more than we knew then in 1987.

As we will hear from the witnesses here today, there is vastly improved understanding of how to meet the needs of the various homeless households, from the mentally ill or drug-addicted individuals who have lived on the streets for years, to families with histories of domestic violence or childhood sexual abuse, to veterans of the current and prior wars. We will build on that knowledge and our work to reauthorize the McKinney-Vento Act.

I want to be clear that this does not mean that I expect the witnesses today or next week to agree entirely on precisely what we should do, in terms of reauthorization. I mention this because it sometimes bothers me that policymakers impose expectations on advocates for the poor to deliver unanimous support on a silver platter when no such thing is demanded from the more powerful, well-heeled constituencies.

Just as this committee routinely learns from debates between individual investment banks or hedge funds, and even battles among different sectors of the financial services industry, so too do we benefit from the perspectives of the informed and passionate stakeholders in the effort to end homelessness. Our job as legislators is to draw the best from all that we hear and we quite often end up leaving nobody entirely happy.

I will conclude, however, with a sobering reflection that the bottom line of the homelessness is the bottom line, which is that we haven't made demonstrable progress in reducing the number of households experiencing homelessness nationwide in the past 2 decades.

Indeed, despite lots of heartwarming individual success stories, we may very well have lost ground. Homeless people are notoriously difficult to count, for obvious reasons. So it is hard to get consensus on what estimates can reliably be compared to others.

But let me put it this way. There is absolutely no evidence that the over 800,000 or so people whom we know, pretty reliably, to be homeless on any given night—over 10 percent of them in Los Angeles, alone—are a lower number than the day the McKinney-Vento Act was passed. And fully 34,000 individuals in Los Angeles County alone, and perhaps 4 times that nationwide, are considered chronically homeless, meaning they experience long and repeated episodes of homelessness.

Let me just conclude my remarks by thanking our witnesses for being here today, and thanking the members of this committee for already indicating that this, too, is a high priority with them, and their willingness to work in a bipartisan manner to get something done.

With that, I would like to recognize Ranking Member Capito for as much time as she would need. This is her first opening state-

ment as the new representative for the subcommittee—thank you very much—on the minority side.

Mrs. CAPITO. Thank you, Chairwoman Waters. And this, indeed, is my first hearing as the ranking member. I am trying to fill Judy Biggert's shoes over here. They are large shoes over here. And thank you, Chairwoman Waters, for scheduling this hearing today on the reauthorization of the McKinney-Vento Act.

I also want to take this opportunity today to welcome one of the witnesses here who is on our third panel, Amy Weintraub. She is the executive director of the Covenant House, in Charleston, West Virginia, my home and my district. Amy is a good friend, and a tireless advocate for the homeless in not only Charleston, West Virginia, but also the surrounding metropolitan area.

She has been very active in the Charleston community, and in our State of West Virginia over the last decade, within the homelessness advocacy community, but also on many other issues including health care education and domestic violence. I would like to thank her, and all of the witnesses, for taking time from your schedules to share your experiences on the front lines of helping to end homelessness.

While the overall number of homeless families and individuals is extremely difficult to predict, as the chairwoman mentioned in her remarks, it is estimated that at least 700,000 people are homeless, and as many as 2 million to 3.5 million people experience homelessness at least once during an average year.

Unfortunately, this number continues to grow. In recent years, cities like my hometown City of Charleston, West Virginia, have seen an increase in their homeless shelter occupants. While this number continues to grow, we are always seeking the solution to make that a smaller number.

Two comprehensive homeless bills have been introduced in the 100th Congress. We are going to be hearing about H.R. 840, the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2007, introduced by Congresswoman Julia Carson, and also my colleague from Kentucky, Congressman Geoff Davis. Thank you, Congressman Davis.

Also, we are going to be talking about, as the two senators testified, Senate Bill 1518. The Senate bill was passed unanimously on September 19, 2007.

In addition to these bills, the Administration has recently transmitted a legislative proposal to Congress that is similar to the bills introduced by Senators Reed and Allard.

I would like to take this opportunity to commend our colleague, Congresswoman Carson, who is not here today, for the work she has done on this issue. I am sorry she cannot be here, and I hope that she will be feeling better soon, and back working with us on this important issue.

My hope is that this hearing today, and the recent action by the Senate, will represent an important step forward in determining how best to go about fixing today's serious homeless problem. There are many areas of agreement among these various legislative proposals.

For instance—and we have already heard; I am anxious to hear the testimony from the other witnesses—general consensus among

the legislative proposals that consolidation of the three competitive grant programs into one program—gee, that just happens to make good sense, doesn't it—would be beneficial. This consolidation would alleviate the need for HUD to review each proposal individually, and could cut the time that it takes HUD to make a decision by as much as 3 months.

Consolidation would also increase local control and flexibility. I represent a rural area. We need the flexibility to put forth programs that adequately serve our constituents.

Reauthorization reform of the McKinney-Vento homeless program is an important goal. I know that we can certainly better address the pressing needs of the homeless across this country, and we can do it in a bipartisan manner. I believe that the first step to making progress and moving forward is to focus more on the areas of agreement and less on the areas of disagreement.

I know that both Congresswoman Biggert and Chairwoman Waters are committed to working on comprehensive legislation to reform and reauthorize this program, and I want to pledge my willingness, as the new ranking member of the Housing Subcommittee, to work together with them.

Thank you, Chairwoman Waters, for holding this important hearing, and I look forward to hearing from our witnesses today.

Chairwoman WATERS. Thank you very much, Ranking Member Capito.

The lead sponsor of H.R. 840, subcommittee member Carson, is unable to join us today, due to health considerations, and we certainly wish her a speedy recovery. In the meantime, our chairman, Chairman Frank, is here, and I understand he would like to deliver a statement on her behalf.

The CHAIRMAN. Thank you, Madam Chairwoman.

Chairwoman WATERS. I recognize the chairman.

The CHAIRMAN. Thank you. Yes, I do have a statement that I will read on behalf of our colleague, Ms. Carson, who has worked so hard on this:

Thank you, Chairwoman Waters and Ranking Member Capito, for holding this important hearing. I know we share a deep interest in eradicating homelessness. I regret not being present today, but I am thankful homelessness assistance programs are receiving the attention they so desperately deserve.

"Today's hearing affirms that working to end homelessness is a mission taken very seriously by this Congress. July marked the 20th anniversary of the enactment of the McKinney-Vento Homeless Assistance Act, but the tragedy of homelessness persists. Over 3 million individuals experience homelessness every year, and over 1 million of those are children. This is unacceptable.

"It is in this spirit that I introduce the Homeless Emergency and Rapid Transition to Housing Act of 2007. The bill would reauthorize McKinney-Vento, programs would provide critical transitional housing supportive services, emergency shelters, and permanent housing.

"The changes reflect the lessons we have learned since the last reauthorization in 1994. It addresses the concerns of diverse communities with distinct needs but one goal, ending homelessness. This would restore local-level decisionmaking on homeless prior-

ities, increase the authorization of the program, and modify HUD's definition of homelessness, which is outdated and exclusive. H.R. 840 ensures more children of families receive homeless assistance, by aligning this definition with the one used by the Departments of Education, Justice, and Health and Human Services.

"Local providers know which housing priorities best address their unique needs. But currently, severely inadequate funding levels, restrictive definitions, and inflexible requirements prevent them from implementing housing solutions that best suit these needs. Many of the witnesses today are local service providers and advocates who face these obstacles and H.R. 840 would diminish those hurdles.

"My home State of Indiana includes urban, suburban, and rural communities, each struggling with different homeless dilemmas. In my district, in the City of Indianapolis, more than 15,000 individuals experience homelessness each year. In this urban setting, it may be best to target housing and services towards the homeless who live in the streets for long periods of time.

"In Jeffersonville, Indiana, however, there was a dramatically different picture. Barb Anderson, a witness today, serves as the executive director of Haven House Services in this rural community, where affordable housing is sparse, and the homeless less visible, often living in doubled-up situations with relatives, and over-crowded, substandard housing.

"Under H.R. 840, both Indianapolis and the balance of Indiana continuum of care boards would be able to set different and more effective priorities. They would be able to address all homeless individuals, not just those who meet a narrow, federally-mandated definition.

"We would like to thank Congressman Geoff Davis for his hard work on H.R. 840 and all the cosponsors of the bill. I am grateful that so many of my colleagues have invested efforts to address homelessness. Congress has been disgracefully slow in recognizing and responding to the national crisis of homelessness, and we are thrilled that we have the opportunity to shed light on this issue today."

The CHAIRMAN.That is the statement of Congresswoman Carson. Madam Chairwoman, I would just add, myself, that I don't think it is entirely coincidental that the last time it was authorized was 1994, and we are taking it up again today. Something happened during the interim period that has changed, and that is why we were able to get back to this.

But I would also note that a very important part of this—and our colleague, Ms. Carson mentioned it—is permanent housing. There is no solution to the homelessness problem, not even a serious effort to diminish it, without programs to increase the construction of affordable housing for low-income people. That is why part of the approach here will be the Affordable Housing Trust Fund bill, Madam Chairwoman, which you brought out of your subcommittee and out of our committee, and which will be on the Floor next week.

So, I do say yes, we need the services. This is underlying some of the problems, and we have different agencies involved. We are going to, I hope, move forward on this under your leadership,

Madam Chairwoman, but part of the solution to this, or part of the effort to alleviate, as I said, will be an increase in the supply of housing.

The central problem of homelessness is they don't have homes, those people. And they all used to, by the way. None of them were born on Mars, and came here, and never had a place to live. So we need to restore people to homes. And we can't do that, unless we increase the stock of affordable housing. So that is our approach.

Thank you, Madam Chairwoman, for your interest.

Chairwoman WATERS. Thank you very much, Mr. Chairman. I will now recognize the gentlelady from Illinois, Mrs. Biggert, for 3 minutes, for an opening statement.

Mrs. BIGGERT. Thank you very much, Madam Chairwoman. And thank you and the ranking member for holding this very important hearing on the reauthorization of McKinney-Vento.

I would like to just comment on the remark from our chairman. I think that, starting with Congressman Lazzio, there were repeated efforts to bring this issue up which met with resistance not so much from the Congress but from the advocacy groups which were not in agreement. So, hopefully, this can be worked out this year, and we will find a result. But it is not for lack of trying that there hasn't been a reauthorization since 1994.

And I would also like to echo the remarks of my colleague from West Virginia, Ranking Member Capito. And, again, I would like to congratulate her on her new position. As far as shoes are concerned, I wear a size six, so I think I have small shoes to fill. I think you will do very well.

And second, I would like to note that McKinney-Vento is not a new issue to me. Back when I was in the State legislature, I worked with a wonderful colleague, Mary Lou Cowlishaw, on her bill to educate homeless children in Illinois. And during my first year in Congress, I introduced H.R. 623, the McKinney-Vento Homeless Education Act of 2001. This bill was to allow homeless children to be immediately enrolled in school, so that they would have at least one stable environment and that was education.

This bill was included, the language was included, in the definition of homeless children which was eventually incorporated into a small bill which is up for reauthorization in Congress this year, and that's the No Child Left Behind bill.

But this leads me to my request. I think that—I hope that the witnesses will focus today, in particular, on the definitions that the Department of Housing and Urban Development uses for the homeless and chronically homeless. Do they make children a priority? I know the definitions do not harmonize with those used by the Department of Education, and I fear the HUD definition may allow children to fall through the cracks, and wander like nomads to hotels, to campgrounds, to cars, and to friends' homes, leaving them homeless and in a very unstable living environment.

So, focusing on the housing needs of homeless children is my number one priority, and I am grateful to my colleagues from both sides of the aisle who share this sentiment. In particular, I would like to thank Congresswoman Julia Carson, and I'm sorry she can't be here today. I would also like to thank Congressman Geoff Davis for his hard work on helping homeless children.

I look forward to hearing from the witnesses today, and I yield back the balance of my time.

Chairwoman WATERS. Thank you very much, Congresswoman. I will now recognize the gentleman from Texas, Congressman Green.

Mr. GREEN. Thank you, Madam Chairwoman. And thank you for what you have done through the years to help those who are less fortunate. Before I came to Congress, I had an opportunity to know of your great reputation, in terms of helping the powerless. You have truly been hope for the hopeless, help to the helpless, and power for the powerless. So I thank you for what you have done through the years.

I want to thank the ranking member, as well, Ranking Member Capito. I have had the opportunity to—by way of hearsay, which is good, because reputation evidence is hearsay—get some evidence as to where you stand on these issues. And my belief is that you have a good reputation, and I look forward to working with you. I always thank the chairman of the full committee, especially for what he is doing now to help us arrive at a housing trust fund.

Madam Chairwoman, it saddens me greatly when I look at the scope of this problem, the length and breadth of it, because we live in a country where we have houses for our cars—houses for our cars. They're called garages. And yet, we have 3.5 million people, approximately 39 percent of whom are children, whom, each year, are likely to experience some homelessness.

It really hurts my soul to know that I live in a country where we can spend $229 million per day—not per year, not per week, not per month, but per day—on a war, and on any given night, we have 700,000 to 800,000 men, women, and children who are without homes. It really saddens me to understand the length, width, and breadth of this problem.

And so, I would like to let people know that, in my hometown of Houston, Texas, in Harris County, the problem is one that I am hopeful we will have an opportunity to impact with this legislation. The numbers are so shocking that I think they ought to be stated for the record.

In Houston, Harris County, among the homeless we have: 28 percent veterans; 66 percent have no income; 59 percent lost housing as a result of a lost job; 57 percent have a history of substance abuse; 55 percent have a history of mental health problems; and 11 percent have experienced domestic violence.

And if I may, I would like to emphasize the domestic violence aspect of this. We must provide transitional housing for every victim of domestic violence, most of whom are women, who find themselves on the street because they cannot coexist in the same space with a spouse or a significant other.

Twenty-four percent have been incarcerated. So this is a most timely hearing, because we are going to do what we can to help those who are living, literally, in the streets of life. The well-off, the well-heeled, and the well-to-do seem to fare well; it's the least, the last, and the lost that we must give special attention to with reference to housing. So, I thank you, Madam Chairwoman. I look forward to these hearings, and I yield back the balance of my time.

Chairwoman WATERS. Thank you very much. I recognize the gentleman from Connecticut, Mr. Shays, for 2 minutes.

Mr. SHAYS. Thank you very much, Madam Chairwoman. I want to thank you for convening this hearing, and for your reaching out to both sides of the aisle on this very important issue.

My predecessor was Stewart McKinney. He put his country first. He put his State first. He put his district first, first before everything, even his own life. He was asked one time why he served on the Banking Committee. He said, "I don't serve on the Banking Committee, I serve on the Housing Committee." It was his passion, it was his love, and he is the reason we are here today.

His son, John McKinney, will be our first witness, and I just want to say that his dad would be so very proud of him. He, like his father, is the minority leader of the Senate. His dad, 40 years ago—or 38 years ago—was the minority leader of the State house. I can just say about this witness that he is extraordinarily intelligent, and very capable. I consider him a close friend, and a close advisor, and I am just very grateful that he would spend the time here today, and that he would be invited to be here.

Let me just quickly say about the issue, I am most interested about this bill about getting homeless people to be able to have their own place to live. I stay at shelters and spend the night. I don't tell the press when I'm there, but I've gotten to know so many homeless people, and there is very little difference between them and any other American, except they have had some rough things in their lives.

I would just conclude by saying to you that I also welcome Deborah DeSantis. She has just hired away one of the most capable and talented staff members on the Hill, and he is just a truly good person and a good friend of mine. He is a member of my staff for another week, and I congratulate you for getting the best and the brightest in Jordan Press. Thank you, Madam Chairwoman.

Chairwoman WATERS. You are certainly welcome. Thank you. And I will now recognize the gentleman from Kentucky, who has been identified as someone who has not only worked for and on behalf of homeless children, but has been dedicated to this issue for quite some time, Representative Davis.

Mr. DAVIS. Thank you, Chairwoman Waters. We have come a long way this year, so I would like to start out with a few acknowledgments. First, thank you for holding these hearings on homelessness, and the reauthorization of McKinney-Vento. This issue is in need of discussion in a public forum, and I truly appreciate your commitment to this effort.

Unfortunately, Julia Carson is not with us today. I know she wishes she could be here, and I would ask all of you to keep her in your prayers, as she is recovering. I know she is excited to get back to D.C. and keep working on this issue. She has been a tremendous force behind the HEARTH Act.

Moreover, I would like to recognize Hillary Swab and Kathleen Taylor, her two professional staffers, who have worked on this bill over the past year, and really deserve a lot of credit, as well, along with the outstanding efforts of Lauren O'Brien, my staff professional for housing issues.

Lastly, I would like to recognize Linda Young, from Welcome House of Northern Kentucky. I am thrilled that she was able to make it to D.C. today to testify about her hands-on experience with

this issue. My wife, Pat, and I have worked with families in crisis for the last 25 years. I have known Linda in this capacity since before I was elected to Congress. She has inspired me with her tireless dedication and innovative strategies to make most of the resources available to improve the quality of life for, literally, thousands of my constituents every year.

As a fiscal conservative, I fully support the Federal investment and homeless assistance grant programs. A roof over one's head goes a long way, but it is truly the more holistic approach of support services, combined with housing, that have the biggest impact on changing a person's path in life.

These programs lend a helping hand to people who want to build a future and pursue a dream. This type of Federal assistance has a lasting impact, not only on the recipient, but on our communities, as a whole.

I am sure everyone here is familiar with the HEARTH Act, and I know many of the witnesses will discuss it in their testimony, so I won't go into the details. However, I want to point out briefly the two parts of HEARTH that I think are the most critical: the alignment of the definition of homelessness with the definition used by the Department of Education; and the increase in local flexibility.

This is about acknowledging that homelessness looks different in different parts of the country. Homelessness has many faces that, for the most part, are invisible to the public at large, though it is all around us. These people need and deserve our help. So why don't we let the people who best know the local situation make the majority of the decisions about how that money would be spent?

I hope we can all agree after this series of hearings that this method is in the best interest of our constituents, and will be the most effective at decreasing all types of homelessness. With that, thank you, Madam Chairwoman, and I yield back.

Chairwoman WATERS. Thank you very much. Mr. Cleaver, would you like to have a few moments?

Mr. CLEAVER. Thank you, Madam Chairwoman.

Chairwoman WATERS. To share with us your thoughts on this, Mr. Cleaver? Thank you.

Mr. CLEAVER. In the interest of time, I will hold my comments until the time for questioning.

Chairwoman WATERS. Thank you very much. With that, we are going to introduce our witnesses on our second panel. Even though Mr. Shays almost introduced his very special witness here today, I am going to recognize him to introduce Senator John McKinney of Connecticut.

Mr. SHAYS. Well, I have really said what I need to say about this exceptional young man, and so I will just say, John, it's really an honor to have you here, a real privilege. I just think that one time I had an opportunity to walk with your dad to a hearing. He always showed up before the hearings started. And it was just fun to be here, and just look out and see you there. Welcome.

Chairwoman WATERS. Thank you very much. The other witnesses on this distinguished panel today are: Ms. Maria Foscarinis, executive director, National Law Center on Homelessness and Poverty; Ms. Deborah DeSantis, president and executive officer, Corporation for Supportive Housing; Ms. Barbara Anderson, executive

director, Haven House Services; and Ms. Pittre Walker, homeless liaison, Caddo Parish School Board.

I thank you all for being here today. Without objection, your written statement will be made part of the record. You will now be recognized for a 5-minute summary of your testimony. With that, we will start with Ms. Foscarinis.

STATEMENT OF MARIA FOSCARINIS, EXECUTIVE DIRECTOR, NATIONAL LAW CENTER ON HOMELESSNESS & POVERTY

Ms. FOSCARINIS. Thank you very much, Madam Chairwoman, for inviting me to testify here today. I am the executive director of the National Law Center on Homelessness & Poverty. We are a nonprofit legal advocacy group working to end homelessness.

I want to thank you, Madam Chairwoman, for holding this very important hearing, and I want to also thank the ranking member, Congresswoman Capito, for holding this hearing. It's a very important hearing on a very urgent topic at a very critical time. It is the 20th anniversary of the enactment of the McKinney-Vento Act, and this is a bittersweet anniversary, as a number of people have mentioned. And if anyone would like a bittersweet chocolate bar, we still have some left in our offices, and we will be happy to make them available.

I want to start with just a little bit of history, because I am a veteran of the original campaign to enact McKinney-Vento 20 years ago, and I never thought I would still be here, working on this issue today.

Homelessness is a crisis that has not always been with us. It began to explode in the early 1980's, in a very dramatic fashion, affecting not only the single men in inner cities that it had affected previously, but also affecting many families, many children, in suburban areas and rural communities, as well. So, this is a crisis that not only does not have to be in a country with our resources, it also has not always been with us. We need to remember that, because I think we need to keep focused on ending and preventing homelessness.

The McKinney-Vento Act had its origins in a comprehensive piece of legislation that was introduced in Congress in 1986. That legislation had three parts: an emergency part, to address the immediate needs of homeless people; a prevention part; and a long-term solutions part.

The McKinney-Vento Act, through an extraordinary campaign, became law and was signed into law in 1987. It was part one. It was the emergency part only of the original legislation that had been introduced. Part two and part three, prevention and long-term solutions, have yet to be enacted.

This was an extraordinary campaign. It involved sleep-outs, including Members of Congress, most significantly including Congressman McKinney, who really was an extraordinarily committed person, and an inspirational person, as was Congressman Vento.

At the time that McKinney-Vento was passed, Congress explicitly stated—and there are many statements in the Congressional Record by many Members, bipartisan statements, about this being a first step only, and it was a first step to respond to the immediate crisis. It was never intended to be the final step. It was to

be followed by longer term solutions. In fact, the McKinney-Vento Act has been the major response to homelessness since that time. And the remaining steps have yet to be enacted.

That is not to say that there haven't been changes. There have been a lot of changes since 1987, and there have been improvements to the Act. There have been expansions of the Act, very significant expansions. There have been some movements towards longer-term solutions, but not at the scale, and not in the way that is needed, or was initially envisioned.

There has not been a reauthorization since 1992. Instead, changes have been made to the Act through the appropriations process, as well as through the regulatory process, primarily through HUD. And I am talking now about the HUD McKinney programs. I think it is very critical that the legislation be reauthorized, and I think it is also very critical it be improved.

This is really an opportunity to change the legislation to reflect current realities, current knowledge, and current best practices, and to make a really important step towards keeping that 20-year-old promise of putting in place permanent solutions to end and prevent homelessness, to go beyond those emergency steps.

I think there are a number of pieces of legislation now that are very significant. My organization has endorsed the HEARTH Act. I think the Senate piece has—a lot of people have worked very hard on that, and it has some very important provisions, as well. I am just going to summarize the key points that are important to us.

I think aligning the definition of homelessness, to make it consistent with the Department of Education definition, is very important. And that is something that the HEARTH Act does.

I realize—we recognize—that the current programs are very—are terribly oversubscribed, and there is an argument that expanding, or changing the definition, would add to that. I think, for this reason, it is very important to also increase the resources. And the HEARTH legislation does increase, as does the Senate counterpart, increase the authorized levels very significantly. Still not sufficient, but a very significant step forward. And that, I think, is also a critical part of the legislation.

Another critical piece, which is in the Senate bill but is not currently in the HEARTH legislation, concerns renewals. There are Section 8 vouchers associated with the HUD McKinney programs to—

Mr. CLEAVER. [presiding] I am going to ask you to wrap it up. We allotted 5 minutes.

Ms. FOSCARINIS. Okay.

Mr. CLEAVER. Thank you so much.

Ms. FOSCARINIS. May I just—

Mr. CLEAVER. Yes, yes, please.

Ms. FOSCARINIS. Okay. The renewal—to have the renewal provision through the Section 8 program, as in the Senate legislation, I think, is critical. The continuum of care process, where all stakeholders come together is also very critical. It is very important to keep that in there.

Lastly, discouraging cities from criminalizing homelessness, which is in the HEARTH Act through an incentive process is very

important to protecting people's rights and putting in place cost-effective solutions to homelessness. Thank you.

[The prepared statement of Ms. Foscarinis can be found on page 68 of the appendix.]

Mr. CLEAVER. Thank you very much. Mr. Shays, would you like to, again, introduce Senator McKinney?

Mr. SHAYS. You know, this has never occurred in the history of this place, John, that someone has been introduced three times. So I will spare you any further introduction or embarrassment.

He, actually, is a very humble guy, so this must drive him crazy. John, welcome.

Mr. CLEAVER. Senator, thank you for being here with us.

STATEMENT OF THE HONORABLE JOHN McKINNEY, STATE SENATOR, STATE OF CONNECTICUT

Mr. MCKINNEY. Thank you, sir. And I want to thank Chairwoman Waters, Ranking Member Capito, and the members of the subcommittee for holding these hearings, and for giving me an opportunity to testify in support of a bill and a cause that is near and dear to my heart.

I also want to pay special mention to my good friend and my Congressman, Chris Shays, and thank him for his leadership on this issue.

I am here today simply because I believe, as my father believed, that every American has the right to a home. I am here today to ask you to reauthorize the McKinney-Vento Homeless Assistance Act, and expand our Federal Government's role in the fight to end homelessness in America.

In 1986, my father helped craft, and Congress ultimately passed, legislation we know now as the McKinney-Vento Homeless Assistance Act. It was the first major coordinated Federal response to homelessness in our Nation's history. While it was an important first step, it was just that, a first step. We were supposed to do more. We have not followed through on the promise to do more to combat homelessness. Reauthorization of the McKinney-Vento Homeless Assistance Act by this Congress will get us back on the right track, and help fulfill the promises made 2 decades ago.

Over those past 2 decades, the face of homelessness has changed. It is no longer only single men or the mentally ill who are sleeping on our streets or inhabiting emergency shelters. Today, it is all too common to see mothers and their children, entire families, arrive at an emergency shelter in need of a place to sleep.

Another dramatic change has occurred over the last 20 years. We no longer need to manage homelessness; we can end it. In Connecticut, we are working on doing just that, ending homelessness. And the problem is real in our small State. A point of time survey that was done this past winter, which was the first coordinated statewide survey done in the State, found an estimated 3,300 people who were homeless on one night of January 30th. Of those, almost 400 were families.

In my own hometown of Fairfield, Connecticut, an affluent suburb of 60,000 people where the average home price is $750,000, we see our own problems with homelessness. Operation Hope, which is a local nonprofit agency providing innovative solutions to home-

lessness, reports that the people calling in need of shelter and housing has been rising steadily. In the last 6 months alone, over 500 people have called in need of immediate shelter, and almost 100 others have called in need of support services, and are at risk of homelessness. This is on top of the dozens and dozens of people they serve in their support services every day.

In Connecticut, we have been leading in supportive housing. To date, there are 3,000 units of permanent supportive housing that have been created or are in the pipeline, and McKinney funding has been a critically important part to this development. State and local funds have been used to leverage Federal dollars, including McKinney funding, to pay for supportive housing.

McKinney funding allocated by HUD is not enough, however. While in the late 1990's, these funds sparked new development of supportive housing, today the funds only cover the expenses of keeping current housing open. Communities aren't getting a boost in funding to ensure the continued operation of current housing stock, and to inspire new locally-determined developments.

While renewal grants are important, we need new funding to jumpstart the next phase of supportive housing development. In my hometown of Fairfield—let me give you an example—Operation Hope used McKinney funding from HUD to open up six units of supportive housing for families and six units for single adults between 1999 and 2001. These homes still receive HUD funding for operating and supportive service costs, but the HUD funding is no longer available for future developments. Operation Hope has been able to develop the next 12 units, but they have had to do so without HUD funding.

The model developed by Operation Hope—non-urban, scattered site development—works well for communities and people who are homeless. Integrating supportive housing directly into thriving neighborhoods is the best way to help families who were once homeless in a way that will enrich the communities around them. This model is especially good for children, who benefit from seeing their parents maintain their households and get up and go to work like everyone else in the neighborhood.

But we need new capital funding to spur development. While the State of Connecticut has tried to pick up the slack, our current efforts are over-subscribed. There are many more developments proposed than there is money to cover them. Our goal in Connecticut is to end homelessness by the year 2014 through the creation of 10,000 units of supportive housing. We have done 3,000, and we have 7,000 units to go. We need help. We need Federal dollars, combined with State and local funds, to make this a reality.

This is an important and fiscally smart investment of Federal funds. It is an investment in a proven model, a better investment than the current emergency shelter system, consisting only of emergency rooms, jails, and shelters.

Imagine if we could take those 100 people who are on the service wait list on Operation Hope, or the 500 people who are in need of emergency shelter, and provide them with financial assistance and support services to prevent them from ever being evicted, to prevent them from being homeless. Think of the consequences of that emergency aid. Children would get to stay in their homes, their

schools, their neighborhoods. Their parents would be less stressed, more steady, and thinking and planning for the future.

Local agencies like Operation Hope can help these families, but the financial assistance piece is critical. If we don't have financial support, there is no ending the crisis of homelessness. With authorization of the McKinney Act, we will continue to change and improve the lives of millions of people in this country.

In closing, let me touch upon two specific issues in the legislation before you. First, regarding the permanent housing set-aside, Congress has long directed HUD to dedicate at least 30 percent of funds appropriated for permanent supportive housing. It would be a mistake to remove this set-aside. Legislation reauthorizing McKinney-Vento should codify the 30 percent set-aside, because supportive housing has been highly successful in providing assistance to homeless individuals.

Local organizations throughout the State of Connecticut have made incredible use of these funds. Maintaining the set-aside will help meet the critical needs of people, including those disabled by chronic health conditions or long-term substance abuse problems. It will also help families with the greatest challenges to stability, who are often not receiving any help from other Federal programs.

Second, I want to address the definition of homeless, which some have proposed broadening to include individuals and families who are living in doubled-up situations and motels.

While it is certainly admirable to want to address all people who are in need, I am concerned that this could lead to a thinning of resources. Changing the definition could divert resources from those with disabilities who are least likely to seek help or fend for themselves, if many more people are competing for the resources provided by the homeless assistance grant programs. I do not think any of us want to see the most troubled and sick homeless get pushed to the back of the line.

Again, it is a great honor for me to be here. My father campaigned vigorously 20 years ago to end homelessness. I think it is time for us and our Nation to help bring this issue back to the forefront of political discourse and into American consciousness. He would be delighted to know that, while 20 years ago we were struggling for funds to help manage homelessness, today we know we can end homelessness. And I want to thank you, Mr. Chairman.

[The prepared statement of Senator McKinney can be found on page 74 of the appendix.]

Mr. CLEAVER. Thank you, Senator. We appreciate very much your willingness to give of your time to be with us today.

Next, the CEO and president of the Corporation for Supportive Housing, Ms. Deborah DeSantis.

STATEMENT OF DEBORAH DeSANTIS, PRESIDENT AND CHIEF EXECUTIVE OFFICER, CORPORATION FOR SUPPORTIVE HOUSING

Ms. DESANTIS. Thank you. My name is Deborah DeSantis, and I am president and CEO of the Corporation for Supportive Housing. CSH is a national nonprofit helping communities create permanent, affordable housing linked to services that prevent and end homelessness. We have worked for more than 15 years to help com-

munity-based nonprofits and local and State governments develop and operate permanent supportive housing.

I would like to thank Subommittee Chairwoman Maxine Waters for committing her leadership to the important issue of ending homelessness. I would like to also acknowledge Representative Carson and other members of this subcommittee who took an early interest by introducing H.R. 840, the HEARTH Act.

CSH is also pleased that the Senate Banking Committee has passed a comprehensive bipartisan bill, S. 1518, to reauthorize the McKinney-Vento programs. And let me also say it is an honor to speak on behalf of McKinney reauthorization, along with Connecticut State senator John McKinney, whose father is rightly recognized for his leadership and passion in responding to our Nation's crisis of homelessness.

Twenty years after the passage of the McKinney Act, the need for McKinney-Vento resources remains great. Over 200,000 individuals with disabilities experience homelessness on a repeated or chronic basis. By our conservative estimates, the cost to taxpayers of maintaining homelessness, particularly chronic homelessness, totals between $5 billion and $8 billion a year.

Despite its tragic and costly consequences, the persistence of homelessness has allowed us to explore causes of homelessness and test solutions. This research supports the recommendations I am making today.

First, I urge the reauthorization legislation to include a 30 percent set aside for permanent housing, for homeless households with one or more disabled persons. For those homeless individuals and families who confront chronic health conditions and suffer, or are at risk of suffering long-term or repeated bouts of homelessness, permanent supportive housing is the only intervention proven to end costly cycling between systems.

Studies indicate that providing permanent housing with services to those with disabilities allows more than 80 percent of residents to remain stably housed after 1 year, decreases tenants' emergency room visits by more than 50 percent, and increases tenants' income by 50 percent, resulting in cost savings of about $16,000 per housing unit per year.

Based on the success of permanent supportive housing, congressional appropriators, on a bipartisan basis, have imposed a 30 percent set-aside for permanent housing for the past 9 fiscal years. In 1998, the year before the 30 percent set-aside, only 13 percent of McKinney money was dedicated to permanent housing.

While significant McKinney-Vento resources have been invested in new permanent supportive housing since Fiscal Year 2000, the overall funding available for other interventions has not plummeted. In fact, it has increased by $50 million.

Further, people experiencing chronic homelessness are more likely than other McKinney-Vento-eligible populations to be excluded from other safety net programs. Indeed, the average national rent for an efficiency 1-room bedroom apartment of $715 is more than the monthly income a disabled person receives on SSI. In such circumstances, it is appropriate for Federal policy to provide this population with some priority.

Second, CSH recommends expanding the definition of chronic homelessness to include families where a head of household suffers from a disability, and has been homeless repeatedly or continuously. About 12,000 to 15,000 households of families with children are homeless for 2 or more years. These families experience chronic or long-term homelessness, but are not recognized as such under current definition.

Third, CSH supports a prudent expansion of the definition of homelessness. Legislation should recognize the reality that many homeless people do not live on the streets, but in hospitals, treatment facilities, or jail. These previously homeless individuals should be considered homeless, too.

Additionally, individuals or families at risk who have moved three or more times in the past year, living off of temporary motel vouchers or with a relative or friend on a short-term, unstable basis should be considered homeless.

However, we have great reservations about expanding the definition of homelessness, as suggested in H.R. 840. While we agree housing affordability is at the root of homelessness, we believe other programs are better equipped to address our country's housing affordability crisis. The Financial Services Committee recently completed work on legislation to strengthen and expand the Section 8 housing voucher program and to establish a national housing trust fund.

Also, S. 1518 creates a new grant program to keep families and individuals from becoming homeless.

Once again, I thank you for the opportunity to offer my testimony. I applaud you for the ambitious undertaking at this hearing and for responding to the homelessness and housing needs of America today. Thank you.

[The prepared statement of Ms. DeSantis can be found on page 60 of the appendix.]

Chairwoman WATERS. Thank you very much.

Ms. Anderson?

STATEMENT OF BARBARA ANDERSON, EXECUTIVE DIRECTOR, HAVEN HOUSE SERVICES

Ms. ANDERSON. Good morning, Chairwoman Waters. I want to share with the subcommittee a book Kathleen has, that I think she is going to be passing out shortly. It's a book of photographs of people in my community who have experienced homelessness. I share it to remind you that the public policy you make affects the lives of ordinary Americans.

As we get into the weeds of writing law, we don't need to forget that it is our neighbors, family members, and indeed, ourselves who are the true subjects of this hearing. Each of us may experience homelessness at any given time. As a young student in a community that is very small and rural, I had to live in a car and in garages to be able to graduate from college.

When I began my career as a social worker in 1979, the only person I can recall being homeless in my community was the man they called Herbie, and he was affectionately known as "The Town Drunk." Four years later, Congress and the President enacted massive budget cuts that decimated Federal social programs. I watched

those incidences of homelessness from a very practical level, not from a policy level.

The consequences for countless of Americans and countless neighbors was that over those 2 decades, night after night of sleeping in shelters with dozens of strangers occurred. People slept in the woods, hidden from sight, on the couches of grudging relatives, and in roadside motels that lacked kitchens. I have even pulled people out of chicken coops and barnyards.

Last night at our shelter, we provided 78 people with a temporary place to sleep. Our facility is suitable for 60 people. Of those 78, 23 were children. They do not meet the Federal guideline for chronic homeless. Twenty-seven have full-time employment. They are working poor people. They do not meet the definition for chronic homeless. Thirteen work in day labor, because suitable work on a nomadic lifestyle is hard to find. Fifteen have disabilities.

We serve all comers, disabled and working poor, single adult, and families with children. We are the only shelter serving 14 counties, so we have urban and rural—and many, many rural.

As a board member of the National Coalition for the Homeless, with colleagues from across the country, I can tell you there are serious flaws just within McKinney-Vento itself. In 20 years, the evolution of the program has not kept up with the pace of the population outburst.

Take, for example, the definition. It is antiquated. Congress has modernized the definitions used by other Federal programs to include a more complete set of living arrangements, yet HUD has stubbornly clung to this definition, because an undercount better serves the definition.

We can't ignore the numerous people in this country who have 19 and 20—I have visited families who have 19 and 20 people living in a 2-bedroom home, with only 1 person on the lease. Those families are homeless, and they have no options but to be cluttered and on top of each other with all the social ills that go with that, including domestic violence and abject poverty, and sometimes burglary, and whatever else happens for them to make it. And it is a crime that we allow that to happen. We call on Congress to amend the HUD definition of homelessness following the HEARTH Act language.

Then there is the Administration's chronic homeless initiative, the set-asides and the permanent housing bonuses. The national directives have resulted sometimes in a concentration of resources on permanent supportive housing to the cost of those of us who are trying to build in small communities with very few resources to build any kind of housing.

The HEARTH Act restores flexibility to communities to select a set of eligible activities that best responds to their individual and greatest needs, rather than dictates from Washington. The National Coalition for the Homeless supports the HEARTH Act. It addresses the above concerns and many other grievances.

We call for Congress to authorize and appropriate at least $3 billion annually for HUD and McKinney-Vento programs, and we don't need to stop there. Congress should authorize and appropriate funds for a homeless prevention initiative outside of the

McKinney-Vento program, because every penny that is in HUD and McKinney-Vento is needed there.

We also urge Congress to authorize and appropriate funds for a rural homeless assistance program through the U.S. Department of Agriculture, where field sites are located in communities throughout this country, and where the true rural needs of rural America can be met with people who understand rural homelessness.

Homelessness is our national shame and our global embarrassment. It is also a personal and family tragedy to over 3 million Americans every year, including the people in the book that Kathleen has passed out. These are people depicted in photography from my small piece of America, Jeffersonville, Indiana. In their honor, we must recognize housing as a basic human right, and ensure all Americans' access to it.

We must adopt universal health insurance. We must demand a labor agreement in which all people earn or receive an income sufficient to obtain affordable housing. We must assure the civil rights of all persons, housed and homeless, to participate freely in the life of their community. And it is time for us, with Congress in the lead, to bring America home. Thank you.

[The prepared statement of Ms. Anderson can be found on page 48 of the appendix.]

Chairwoman WATERS. Thank you very much.

Ms. Walker?

Ms. WALKER. Good morning.

Chairwoman WATERS. Good morning

STATEMENT OF PITTRE WALKER, HOMELESS LIAISON, CADDO PARISH SCHOOL BOARD

Ms. WALKER. Chairwoman Waters, and members of the committee, I would like to thank you for the opportunity to appear before you today to speak to you about something that is very dear to my heart.

For the past 9 years, I have served as the homeless liaison for Caddo Parish School Board in Shreveport, Louisiana. I am also a board member of the National Association for the Education of Homeless Children and Youth, and the Louisiana Association for the Education of Homeless Children and Youth.

I will focus my comments today on the youngest victims of homelessness, our Nation's children and youth. Homeless children suffer physically and emotionally. Infants and toddlers who are homeless are at risk of developmental delays. Homeless children and youth are diagnosed with learning disabilities at a much higher rate than other children. They struggle academically, and fall behind in school.

Unfortunately, children and youth have not been a focus of the Federal homeless policies, except in the area of education. We are extremely grateful for the leadership of Congresswoman Judy Biggert, who has worked on the education provisions of McKinney-Vento and has increased the stability and success of homeless children and youth in school. Educators have learned that without the involvement and cooperation of the community service providers, educational efforts are much less likely to succeed.

A child without housing faces greater barriers to academic success than just the barriers that exist within the classroom. One of these barriers is the current HUD definition of homelessness. Many people have no choice but to stay temporarily with other people, or in motels, often in overcrowded and unsafe circumstances. In many places across the country, there are no shelters, or shelters may be full, or have restrictive requirements, forcing people to stay in other homeless situations.

On the other hand, the education definition of homelessness includes families doubled up, tripled up, or living in motel situations. This allows me to serve children and youth who lack housing enroll in school, and obtain educational-related services. Last year, Caddo Parish identified and enrolled 2,031 homeless children and youth in grades K through 12. Of those, 1,232 were doubled up, and 72 lived in motels. Thus, 64 percent of homeless children and youth in my parish are not eligible for HUD homeless assistance services.

Since 1999, Caddo has received a HUD assistance grant to provide case management services for Caddo and six rural areas in our community for homeless families. But I can only help a fraction of those who truly need assistance, because of the HUD definition. For these reasons, I strongly support the definition of homelessness contained in the H.R. 840, the HEARTH Act. In my community, this definition of homelessness will allow service providers to meet the needs of all families that are experiencing homelessness.

Unfortunately, the definition of homelessness in the Senate bill, S. 1518, is not adequate to meet the needs of the families we serve on a daily basis. For families who are doubled up or in motels that are not paid by government, multiple moves must occur before assistance can be provided.

Just last Friday, I received a call from a mother of three who was at the food stamp office. This mother was in crisis, crying over the phone, and needed somewhere to stay. She had been to several different places, and could not find any help. Shelters were full. So, at that point, I decided to use my own credit card, and put that family up in a hotel, so that those children could have a place to stay. And to this day, they are still on my credit card in a hotel.

It is my desire that every child have a home. So, therefore, I said we must work diligently to assure that all families that are experiencing homelessness have a home and services provided to them, to assist them in meeting those needs.

I am not a government official. Would that person be able to meet the HUD definition, with me putting my credit card up, and receive HUD services? I say no. But, in order for that family to have some stability and some place to say, that was something we had to do. And, as liaisons throughout the Nation, we do what we have to do, in order for families to be able to feel safe and secure in their living situation.

I say to you they are usually emotionally a wreck. These children had not slept in days. They were sleeping on a floor with roaches and rats, and I went to the house where they were, and they were actually put out from that place, when they were at the food stamp office. I say to you, we must—we cannot look at ending homelessness without looking at our families. We must address the needs of our families.

It is hard for children to be stable in school. It is hard for them to academically succeed without a place to stay.

I have other concerns about the Senate bill and current policies that are described in my written testimony. But I say to you today, as long as the needs of children and youth are not recognized, we will never end homelessness. I believe the HEARTH Act provides a stronger approach to reauthorization.

I thank you again for this opportunity to present to you today.

[The prepared statement of Ms. Walker can be found on page 129 of the appendix.]

Chairwoman WATERS. Thank you very much. I would like to thank all of our panelists who have come here today to help us formulate public policy on homelessness.

Now, unfortunately, as we do this working committee, voting is going on, on the Floor. If you heard those bells ring, it means that it is time for us to get up to the Floor and take some votes. There are 6 votes, 45 minutes at the most. We are going to have to leave, go up and do that. We will be back, and we will start our questions. So you will have an opportunity to stretch your legs, get some refreshments, and meet us back here in about 40 minutes. Thank you.

[Recess]

Chairwoman WATERS. Thank you very much for your patience. The committee will come to order. Our members will be returning shortly.

I will recognize myself for 5 minutes and begin the questions. I think I will start with Ms. Walker. One thing that jumped into my mind when you told the heartbreaking story of the family that you are personally going to such great lengths to help is, where is the TANF system in all of this?

Now, let me be clear that I was not a supporter of the so-called welfare reform of 1996, but TANF funding is at least 10 times McKinney funding in any given year. It is funding for which chronically homeless individuals are typically eligible. I wonder whether this family, and others who are doubled up or precariously housed, are receiving any TANF funds, or whether your State is targeting TANF dollars toward housing.

If not, can you tell me what the obstacles are? I just wonder why the TANF funds were not available for that family. Could you help me to understand, or all you know is that they have your credit card?

Ms. WALKER. Yes, ma'am. Since I received the phone call from the food stamp office—which actually assists families in receiving food stamps, and the TANF office is also there—I am just assuming, I really don't know, that TANF funds were not available for this family, and that they called me for assistance for housing.

So, therefore, that is why we decided to go ahead and put them up in a hotel.

Chairwoman WATERS. Okay. Ms. Foscarinis, I appreciate your long-standing involvement in the issues of homelessness, including your work on the original McKinney Act.

My question is this: Wasn't that Act itself a targeting or prioritization of Federal resources, namely a recognition that while

America in 1987 had many poor people, it was necessary to place some special importance on persons experiencing homelessness?

I pose this question because I am struggling to understand why, then, is it not appropriate for the Federal Government to place some priority in the allocation of McKinney-Vento resources on the chronically homeless, those who have been homeless the longest and most often, and frequently are the most ill?

Ms. FOSCARINIS. That is a good question, Congresswoman Waters. I don't think that it is inappropriate to place priority on the chronically homeless. I think it is very important to recognize that there is an extreme need among all homeless people, and that what we really need to do is put in the resources to address the needs of all homeless people.

When the original McKinney-Vento Act was passed, part of the missing pieces, the pieces that were not passed, had to do with improving access to mainstream services. In response to your earlier question, "Where are those mainstream services," often homeless people are kept out of those services, because they don't have documents, they don't have an address, or they don't have IDs. So they are, literally, not able to get access to those services. Those services are also oversubscribed, and increasing those resources.

So, I think we need to do those things. I think that is, ultimately, the solution to homelessness. I think targeting resources to the chronically homeless, in some communities, may work. But I don't think that we should be assuming that it is going to work across the board. I think that should be a decision—the resources are very limited. The community process is very important. It is very important that it be inclusive, as it has been currently, and that the local communities determine their priorities.

Chairwoman WATERS. Thank you very much. I will now recognize the ranking member, Mrs. Capito.

Mrs. CAPITO. I thank the chairwoman. I want to thank you all for your patience, and I am glad that we are back and addressing this very critical issue.

Each of you have addressed the issue of the redefinition of homelessness in a different way. Some have expressed some reservations. And I think this is really going to be at the crux of what piece of legislation we come forward with, whether we match the Senate or go with the HEARTH bill, or create something in between.

For those who have expressed some reservations, could you get a little bit more specific on what your reservation is in expanding the definition? Is it lack of resources? Is it inability to specifically define or categorize someone as homeless, if the definition is expanded? I believe Ms. DeSantis, and maybe the Senator had addressed that, as well.

Ms. DESANTIS. Yes, thank you for the opportunity to address that question. And permit me for a minute to personalize the response a bit.

As a young child, my mother was very young. My father left us at the age of three. And at that time, my mother was working two or three jobs, and couldn't support the two of us. We moved into my grandmother's house for close to 14 years. So, never once did I consider myself or my mother "homeless." But, under the ex-

panded definition of homelessness, we would, indeed, be considered homeless.

So, to respond to your question, yes, it is two-fold. It is a matter of limited resources, and spreading those resources too thin. But I also—I worry about stigmatizing thousands more individuals and families, and calling them homeless, when, indeed, I think there are other Federal programs that could address the economic disadvantage that many individuals and families are experiencing, such as the Section 8 program, such as the housing trust fund program.

Mr. MCKINNEY. Thank you. And, if I could just add, I think my concern is one of resources, and that is that we are—I want to make sure that those who are at greatest risk of homelessness, those with the most need, are getting the resources they need.

I would say, though, that—and listening to Ms. Walker's testimony, which is extremely powerful—that all of us here, and all of you, should not let the different definitions in S. 1518 and H.R. 840 prevent us from passing this important Act. We should all sit together to work on it.

If it is the expanded definition in H.R. 840, then I would like to see some type of flexibility, perhaps at the community level, to make that prioritization, so the dollars could go to those at greatest risk. But, yes, I think we are all nervous that we are not going to have the resources available. And if you are adding, say, 10 more people to the definition of homeless, there are going to be more people for the same number of resources.

But those people need help, as well. So I think, at the end of the day, it is a matter of resources.

Mrs. CAPITO. Madam Chairwoman, do I have time for one more question?

Chairwoman WATERS. Yes.

Mrs. CAPITO. I was going to address it to Ms. Anderson. I know you wanted to speak to this issue as well, so you can incorporate that.

I am wondering, in your Haven House Services, where you are the executive director, one of the things in the new bill is the consolidation of HUD programs, and the consolidation of applications, which, to me, makes extremely good sense. In your actual day-to-day or year-to-year applications, how many of those HUD programs do you access?

How many different applications do you have to, in your—and what other Federal programs do you access with Haven House?

Ms. ANDERSON. We are a Hope Project recipient, Social Security Administration. We have had HUD funding. It is not a primary—in a small community like mine, 62 percent of our funds come from donations, soft money, because we don't have the ability to access or compete with Federal areas. We don't have the population base. And we are in Louisville's SMSA, even though we are not necessarily—we don't receive any of their Federal funding, because we are in a different HUD region.

So, we are underserved, dramatically. And while I respect the fact that—and I do want to address the definition issue, quickly—we are—I have been doing this for 27 years, and I have yet to meet a homeless person who has trouble defining who they are. It has

only been my government and the people I work with who have difficulty with that issue. And the very first question I had when I was a young social worker was, "How do we define homelessness?" And still, 27 years later, we are talking about definition.

The thing that amazes me is that I would not be homeless tomorrow under any circumstances because, just like Ms. DeSantis, my family would be there for me. It is not broken. For the people I serve, what I find is that the family units have been broken for whatever reason. Maybe they are in public housing, and they cannot double or triple up, or they will lose the housing themselves. Maybe it is because they had to leave the State they were in, because they lost a job.

There are many, many different reasons why they are doubled and tripled up. On a local level, we know those reasons, and we know who can stay with family. I can't begin to tell you how many times in the course of a week I stopped somebody from entering the shelter, because I go back and talk to their family, and mediate a problem. But there are still numerous people out there who just can't be mediated with.

Mrs. CAPITO. Thank you.

Chairwoman WATERS. Thank you very much. Mr. Green, for 5 minutes.

Mr. GREEN. Thank you, Madam Chairwoman. Let us start with domestic violence, the second most frequently stated cause of homelessness for families. Is there anyone who contends that victims of domestic violence who have to leave what really is their home, that they are not homeless? If so, I would like to hear the rationale.

[No response]

Mr. GREEN. Anyone?

[No response]

Mr. GREEN. We all agree. Now, in terms of the legislation that we have before us, are we doing enough in the area of domestic violence for those persons who have to leave a home, but they need some transitional help? Yes?

Ms. FOSCARINIS. I think that a very significant step was taken when the Violence Against Women Act was reauthorized with new provisions to protect the housing rights of domestic violence women, and to prevent them from losing their housing because of the actions of their abusers. That covers public housing and other subsidized housing.

But there is more that needs to be done. There needs to be funding, specifically to provide places for either transitional housing, shelter, or permanent housing for women—and it is almost always women who are fleeing domestic violence situations, and at risk of becoming homeless—so that they have an alternative, so that they are not staying with their abuser because of fear of becoming homeless, because they don't have a home to go to.

That is really the missing element, providing the funding so that there are those alternatives, and making sure there is enough affordable housing so that people are not staying in domestic violence situations because they do not have a place to go.

Mr. GREEN. Would someone else like to comment? Yes?

Ms. ANDERSON. On any given day in our shelter, 90 percent of the women will have been sexually or physically abused. And I am

not a domestic violence shelter. But those women oftentimes will come into our shelter, they will stay a few days, and they will go back to the perpetrator before they will stay homeless. And it is a lack of resources.

It is also a lack of meat to the laws, and enforcement of those laws. No woman should have to leave her home with her children because she has been beaten. And I really wish and pray and hope that some day we understand that they need to be protected in a real way, and the police officers are actually given the enforcement rights they need to make the perpetrator leave, and not return. That would be the answer.

In the meantime, she is right, Ms. Foscarinis, we do not have resources to put people in places where they are safe. They cannot just go to any motel, because the door gets battered down, and they get themselves beaten to death, or they get hurt again, or they have to be forced to go into some kind of substandard situation.

So, we really do need to look at how we can make safe houses, and enforce the laws that allow women to stay in their homes with their families.

Mr. GREEN. Let us move to another area. Voter registration, as a service. Ms. Anderson, are you permitted, as you perceive the current status of the law, to register homeless people who are in your facility?

Ms. ANDERSON. I have registered homeless people in my facility for 22 years. And I always will. So, I am permitted, and I refuse for anyone not to allow me to be permitted. We register people on a regular basis, because it is their Constitutional right to vote.

Mr. GREEN. Is there anyone who has experienced some complication, in terms of registering people? Please.

Ms. FOSCARINIS. I would like to speak to that. I am not operating a shelter, but this is an issue that we are quite familiar with, because there are very significant barriers to allowing homeless people to vote. And voting, of course, is a Constitutional right. Courts have held that, even for people who don't have a permanent residence, a permanent home because they are homeless, they still should be allowed to exercise this fundamental right.

However, in practice, what is happening now—and some of this is unintended consequences of 9/11 measures, security measures—people, in order to vote, they are being—they need to show a photo ID. And homeless people face very high barriers in getting this kind of identification, because they don't have the documentation, they don't have a home, they don't have a utility bill, they don't have the typical identification you need to establish identity.

And so, this has become a very big barrier to getting access to public benefits, to getting access to all kinds of things that people need to escape homelessness, and also to voting.

Now what we are seeing is that there is a trend to—you know, the "Real ID ACT" has complicated the ID issue for homeless people. And now we are seeing a trend in Federal legislation to attach a requirement—including in the housing legislation—attach a requirement that States must comply with a Real ID Act.

So, it is making the problem even worse. I don't believe that this was intended, and yet the reality is it is keeping people—homeless people—out.

Mr. GREEN. Thank you. Thank you, Madam Chairwoman. I yield back.

Chairwoman WATERS. Thank you very much. Mr. Shays.

Mr. SHAYS. Thank you—

Chairwoman WATERS. For 5 minutes.

Mr. SHAYS. Thank you, Madam Chairwoman, and I also thank the witnesses. I am going to apologize to the second panel. I am supposed to also be in the Oversight and Government Reform Committee in a hearing on Iraq, and I want to get to some of that.

But let me start by saying I would like someone to tell me—I want to first make this quick comment, and say that when I go to a homeless shelter, what I love is that the ones I see—or most of the ones I see—are not warehouses. There are energetic staff there who are trying to work with folks so that they don't have to keep coming back, so that they have a place ultimately to go to, and they have supportive services to help lift them.

And so, for me, a key feature of this bill is the 30 percent set-aside. Is there agreement that the 30 percent set-aside is good, and that it is enough or too little—I'm not looking for long dialogue if there is agreement.

Let me start with you, Mr. McKinney, Senator, are you comfortable with the 30 percent, or should it be more, or should it be less?

Mr. MCKINNEY. Well, we would love more. In Connecticut, what we have seen, and what we have seen in my hometown, is that permanent supportive housing works. And about 80 percent of the people who go into permanent supportive housing are in that housing a year later. That provides tremendous stability—

Mr. SHAYS. You said 80 percent?

Mr. MCKINNEY. About 80 percent.

Mr. SHAYS. Wow.

Mr. MCKINNEY. It is tremendous stability for families and their children. But, you know, I think we need to understand that there are not going to be—there are limited dollars. So I think the 30 percent set-aside would work.

Mr. SHAYS. Okay. Other comments from others? Yes?

Ms. FOSCARINIS. Yes, I would like to comment. I—we have not supported the set-aside, and the reason is not—is simply that we feel that there are many needs that are not being met now, and that it should be a matter to be determined at the local level by—through the community planning process, where to target the resources.

And it is not because we do not agree. Of course, permanent supportive housing is a good thing, and there are many needs there, as well. But there has been a very big focus on chronic homelessness. And there are families, there are children who also have very big needs, and they have needs that can be met in other ways.

So, we need to increase resources—that is very fundamental—to solving the underlying issue. But—

Mr. SHAYS. Thank you. Let me get to the next one. Thank you, ma'am.

Ms. DESANTIS. We do support the 30 percent set-aside. And we believe that we are at a point now where we have learned a lot about homelessness, and the efficacy of what works.

I think, now, we see a whole body of research that came out of the recent HUD symposium that points to supportive housing as a way of addressing long-term homelessness. So, we very much support the set-aside.

Mr. SHAYS. Ms. Anderson?

Ms. ANDERSON. The National Coalition for the Homeless does not support the set-aside, primarily because the Stewart B. McKinney-Vento Act is an emergency act, and the set-aside takes emergency dollars that are needed when 811 could be funded, when Section 8 could be funded at higher levels. There are maneuvers and mechanisms that could increase supportive housing, and we totally support the—giving those funding dollars to them. But to take away shelter dollars when shelter doors are closing all over this country, we think, is detrimental.

So, we would support increasing 811 and many other programs for supportive housing.

Mr. SHAYS. Ms. Walker? Thank you for your answer, Ms. Anderson.

Ms. ANDERSON. Thank you.

Ms. WALKER. We do not support set-asides. We do believe that the money needs to be flexible enough to serve those who are most needy. And so, the funds should be available on the local level, to decide what is the most need in that community.

Mr. SHAYS. Okay, let me—I am going to forget all my other questions, because I didn't expect to get the answer I got, which is interesting, and it is—this is a good panel, to have both sides.

Without talking about the shelter, I was in one shelter in my district where there was tremendous energy and dialogue and interaction and counseling. And I didn't feel like I was in a warehouse. There was another one where it was just totally a warehouse. And I didn't feel any hope, any dreams. I just saw a warehouse of people. And, frankly, their attitude was down.

So, I make the assumption that part of that energy from the first one was because we are doing this kind of a set-aside approach. Tell me why I might be misinformed.

Ms. ANDERSON. From just a practical standpoint, we have a very poor shelter. But the people are very energetic, they are full of hope, and they understand that the staff is working 180 percent for them. And they don't know anything about set-asides. They just know that I might be able to get them into public housing, and that because I don't have any resources, I am going to have to be creative, and I am going to get that way.

They understand that the local manufacturers call us to get them jobs. So they believe in us. I have been to human warehouses, too, and I despise them. I hope in my country, in my land, that there will be a time when we don't have to have them.

Mr. SHAYS. Right.

Ms. ANDERSON. But, in the meantime, there are many providers out there who, with very little, are doing as much as they can do, like the shelter you visited.

And people, you're right, when they have that hope and that sense of tomorrow, they will go out—we have people who sell the Sunday Courier in the rain and the snow to make $10 an hour.

And they do it every Sunday, and they're homeless, and they have not missed for 5 years. So it is—they have hope.

Mr. SHAYS. But are they still—they have been homeless for 5 years?

Ms. ANDERSON. No, sir. They come back and they do that with us on Sunday, as housed people.

Mr. SHAYS. Oh, I see.

Ms. ANDERSON. They stay a part of the program.

Mr. SHAYS. I understand.

Ms. ANDERSON. They come back to volunteer, and to give back.

Mr. SHAYS. I understand.

Ms. ANDERSON. Because they believe that is important.

Mr. SHAYS. But I am happy you clarified that. Let me just end, Madam Chairwoman, by thanking you. And I would love to give a fourth introduction of Senator McKinney.

[Laughter]

Mr. SHAYS. But I will say this. God bless your dad.

Chairwoman WATERS. Thank you very much.

Mr. SHAYS. God bless your dad.

[Applause]

Chairwoman WATERS. Mrs. Biggert, for 5 minutes.

Mrs. BIGGERT. Thank you, Madam Chairwoman. Ms. Walker, I was once, in one of my former lives, a school board president for high schools, and I appreciate what you do as a homeless liaison. I think that really helps so much, to help the kids, particularly with the education. So, thank you.

What I was wondering was if you could provide us with the Senate bill definition and HUD definition of "homeless." We have been talking around it, but—

Ms. WALKER. Thank you, Congresswoman. Under the Senate bill, the definition is: "People in motels paid for by government programs; people who are doubled up, but only if they have moved 3 times in 1 year, or 2 times in the past 21 days, or they have been notified by the owner or renter of their lodging that they can no longer stay for a short period of time, and they do not have any other resources to contribute to the rent; and people who are in motels, but only if they have moved 3 times in 1 year, or 2 times in the past 21 days, and they can pay for the room only for a short period of time."

Under the current HUD definition, it states that: "Persons living in a place not fit for habitation, in cars, campgrounds, abandoned buildings, on the streets, emergency shelter, transitional living facility, supportive housing facility; or persons that have received an eviction notice from the unit that they are staying in."

Mrs. BIGGERT. Okay. Do you think that these definitions serve the needs of the homeless children, or is there a definition that would help to include the homeless children?

Ms. WALKER. In my opinion, neither one of the definitions really serve homeless children. And the reason I say that is because if a child has to move three or four times before they can be identified as homeless, that does not give stability to that child. That child loses school books, that child loses clothing, and the child doesn't know, from day to day, whether or not—"Do I go to Momma's

house, or am I going to Cousin's house? Am I going to be living in the car today?" It just does not give any stability for the child.

Under the current HUD definition, it doesn't include anything about living with anyone else, or having a 21-day notice, or an eviction notice from the family member. So, both definitions really do not address how this would affect a child of moving, and not having stability in their living situation.

Mrs. BIGGERT. Okay. So, if you were to have another definition, the things that you said they don't include are the ones that should be included?

Ms. WALKER. The current definition on the education for McKinney-Vento is one of the best definitions that I have seen that really addresses the needs of children.

When you think about a doubled-up situation, or a tripled-up situation, we are not just talking about persons wanting to live with another family member, and including them in this definition. We are talking about families who have no other choice but to live with someone else, because there is no other places available, or they cannot afford to put themselves in a hotel.

Mrs. BIGGERT. Okay, thank you. About the Administration's chronic homelessness initiative, do you think that this has resulted in less attention or services for children, or is it doing what it should be doing?

Ms. WALKER. It is not addressing the children's issues at all in the current chronic homeless position.

Unless unaccompanied youth—and we're not talking about children within a family situation—in an unaccompanied youth situation, this child has to be homeless for a year before—or three times within one year—before they can be considered chronically homeless, and have a disability.

So, really and truly, it doesn't address the families and children.

Mrs. BIGGERT. I think we have used that definition, not necessarily with the disabilities, but "unaccompanied" as—usually as a runaway?

Ms. WALKER. Yes.

Mrs. BIGGERT. Or someone who is—

Ms. WALKER. Run away, or someone who has been put out of their home, because the family has decided that they can no longer live there.

Mrs. BIGGERT. Okay, okay. So, we can just take that out of the mix.

Ms. WALKER. Yes.

Mrs. BIGGERT. Okay. Is there anything else you would like to add?

Ms. WALKER. I just strongly believe that, if we look at our future, which is our children, and really look at this definition to align with the education definition, then our children will be served best. If we look at the McKinney-Vento definition, and align it with the HEARTH definition, which is excellent, and great, and I feel like this really would serve the children.

We are not trying to over-identify, we are just trying to identify that which is already in existence.

Mrs. BIGGERT. Thank you. I yield back.

Chairwoman WATERS. Thank you very much. We have no other members present to have questions. And the Chair would note that some members may have additional questions for this panel, which they may wish to submit in writing. So, without objection, the hearing record will remain open for 30 days, for members to submit written questions to all of the witnesses, and to place their responses in the record.

I would like to thank you so very much for your patience, for the work that you have done, and for the care that you have given to this issue. I thank you for coming to Washington to share your knowledge and experience with us. The panel is now dismissed, and I would like to bring on a third panel. Thank you very much.

I am very pleased to welcome our distinguished third panel. And I, too, thank you for your patience. Coming to Washington to testify is not an easy thing. And sitting for long hours is certainly not something that we would like to see happen, but it does happen this way sometimes, so we are very appreciative of you.

I would like to ask Ms. Capito to introduce Ms. Weintraub.

Mrs. CAPITO. Thank you, Madam Chairwoman. I am very pleased to have Amy Weintraub. I mentioned her in my opening statements, and I do mirror the chairwoman's statements, and thank you for your patience. But this is extremely interesting, and a very important topic.

Amy is the executive director of Covenant House, which is a homeless shelter serving men, women, and children. And a new veterans' homeless connection, which I want to talk about. But she has a long history of being a real advocate for those who need help in our community. She has a lot of energy, a lot of intellect that she brings, and she has also been just recently appointed by the Governor to be on the West Virginia Interagency Council to End Homelessness. So, welcome, Amy. I am pleased that you are here.

Chairwoman WATERS. Thank you very much. The next witness we have is Ms. Linda Young, who is the executive director of Welcome House of Northern Kentucky. Mr. Davis wanted to introduce you, but he could not get back in time to do so.

And so we welcome you here today, along with Ms. Jessica Vasquez, executive director of the New York State Coalition Against Domestic Violence, and Mr. Jeremy Rosen, executive director, National Policy and Advocacy Council on Homelessness.

Without objection, your written statements will be made part of the record. You will now be recognized for a 5-minute summary of your testimony, and we will start with Ms. Weintraub.

Ms. WEINTRAUB. On behalf of Covenant House of West Virginia—

Chairwoman WATERS. Ms. Weintraub, if you will hold your testimony for just one moment, I am not going to deny Mr. Davis the opportunity to introduce Ms. Young, as he was scheduled to do. Thank you for rushing back.

Mr. DAVIS. You can tell, by my disheveled look, that I was on a—

Chairwoman WATERS. I can tell.

Mr. DAVIS. I appreciate your graciousness, Madam Chairwoman. And, actually, introducing Linda Young, the director of Welcome House, is a great privilege for many reasons. She has invested a lifetime in helping many, many folks in our community, and giving them a real future, and is actually kind of famous in our district.

The group I was with before running back over here was 150 students and teachers from Beechwood School. And they all—all the teachers cheered when they heard your name, that I was going to be coming back here. So they sent their regards and thanks for your contribution to the community.

Thank you for being here, and for the years of work that we have invested together. I yield back.

Chairwoman WATERS. Thank you very much. And thank you for your patience, Ms. Weintraub.

Ms. WEINTRAUB. Thank you.

Chairwoman WATERS. You may proceed.

STATEMENT OF AMY WEINTRAUB, EXECUTIVE DIRECTOR, COVENANT HOUSE OF WEST VIRGINIA

Ms. WEINTRAUB. On behalf of Covenant House of West Virginia, and the Kanawha Valley Collective, which is the Charleston Area Continuum of Care, I thank you all for the opportunity to bring the voices of West Virginia to this dialogue about homelessness.

I especially thank Congresswoman Capito for inviting me, and for her recognition that we, back home, are very concerned with how McKinney-Vento will be reauthorized. West Virginia's motto—you may know it—is Montani Semper Liberi, "Mountaineers are Always Free." Our communities have a long history of resisting control from above, and subscribe to the theory that we know best how to serve our needs.

For West Virginians, passage of this beautiful piece of legislation called the HEARTH Act will mean preserving community flexibility in both rural and more urban settings. The HEARTH Act adopts a simple approach to meeting the needs of rural communities. By aligning HUD's definition of homelessness with the definition used by other Federal agencies, it ensures that people who are without homes in rural areas are counted as homeless.

Let us think for a moment about West Virginia. Our mountains and our rugged topography mean that we don't have a lot of cities and towns. Roadways wind along creek and river beds. We call it community. You may see it as houses here and there along the road.

Now, let's think of Dareema. She is a single mom who has just been evicted from a trailer park in West Virginia. She and her kids are staying with friends in their house down the road, but the husband isn't pleased with the situation, and it is very precarious. It is easy to see that the issues of Dareema in rural West Virginia are far different than those faced by a similar woman being evicted from a housing project in the Bronx, or even in Charleston. Rural America has fewer options.

Dareema's county, like many in our State, has no shelter. It doesn't have an affordable housing program, due to the current HUD set-asides and incentives that favor urban areas. This forces rural West Virginians to leave their home communities and to come to big cities like Charleston for help.

With passage of this bill, and removal of HUD set-asides and incentives favoring urban areas, our localities will be able to have the flexibility that we need to implement a range of housing options.

As you have heard from others, the HEARTH Act more closely aligns the HUD definition of homelessness with other Federal agencies, and West Virginia applauds this. Children sleeping in a roadside motel in rural West Virginia with their moms are in as much need of comprehensive support services related to housing, as if they were staying in Sojourners Night Shelter in downtown Charleston. Yet, HUD-funded services are not available to them. They do not meet the HUD definition of what it means to be homeless.

I understand that Congresswoman Waters is a social worker, or comes from a social work background. And I am sure you can understand the frustration of our staff, at not being able to refer some families to other community providers, because those providers are not allowed to provide services.

For example, an unemployed man who has been staying at a flea bag motel for several weeks, and who needs resume help and job help and interview assistance is not able to go to Charleston's YWCA Job Readiness Center, because it is only for the "homeless," as defined by HUD.

Or, a woman who moves from an emergency shelter into—in with her new boyfriend, who is very sketchy, and she has ongoing emotional and mental health needs, but she has to be dropped from our intensive support services case management system, because that is only for the homeless, as defined by HUD.

Or, a mother who is living with AIDS, and her child, who are currently living in an emergency shelter cannot move into our permanent Section 811 housing that Covenant House has, because it is only for the "homeless," as defined by HUD.

I would like to say that the idea that our system is somehow going to become overwhelmed by all of these people suddenly being defined as homeless is just unfounded. School districts have been using this broader definition for 10 years. And, unlike HUD homeless assistance, the education statute is an entitlement with greater costs, such as transportation. Yet there has been no, "The sky is falling," response from the Department of Education.

The fact is, recognizing and acknowledging the predicament and needs of all homeless people similarly across agencies actually, in my view, has the potential to streamline delivery services, and make the Federal machine more efficient.

Covenant House, and our partnering West Virginia agencies and organizations, are fully committed to the idea that the needs of the hardest to serve and the most in need will be met. We assure you that they will always be our top collective priority. However, we want to provide services for all who are homeless, whether they are living in a shelter, or on the streets, or otherwise.

As for the Senate bill, S. 1518, I am happy to address that in my Q&A. I have run out of time. I just want to again say that West Virginia is in strong support of the HEARTH Act. And thank you for your interest in hearing from our State, as we fight poverty and homelessness.

[The prepared statement of Ms. Weintraub can be found on page 141 of the appendix.]

Chairwoman WATERS. Thank you very much.

Ms. Vasquez?

STATEMENT OF JESSICA VASQUEZ, EXECUTIVE DIRECTOR, NEW YORK STATE COALITION AGAINST DOMESTIC VIOLENCE

Ms. VASQUEZ. Chairwoman Waters, Ranking Member Capito, and distinguished members of the committee, my name is Jessica Vasquez. I am the executive director of the New York State Coalition Against Domestic Violence, and a board member of the National Network to End Domestic Violence. Thank you for the opportunity to address the committee about reauthorization of the McKinney-Vento Homeless Assistance Act.

The inter-related nature of domestic violence and homelessness is undeniable. This is not because homeless women are more likely to be victims of domestic violence. But, rather, because experiencing domestic violence often forces women and children into homelessness. Given this connection, the McKinney-Vento Homeless Assistance Act has provided significant funding for domestic violence shelters, transitional housing programs, and services.

Unfortunately, HUD's practice in recent years has caused a range of problems for victims of domestic violence and programs that serve them. H.R. 840, the HEARTH Act, solves these problems by returning control to the local communities in addressing the needs of homeless families. By expanding the definition of homelessness and eliminating bonus points and set-asides, the HEARTH Act ensures the diverse needs of all communities can be met.

The difficulty in addressing homelessness within New York provides a window into the complexities faced by local jurisdictions. Our State combines extremely urban and extremely rural areas. Stays on domestic violence programs are limited by the State to a maximum of 90 days with one 45-day extension. But with insufficient transitional and permanent housing options, only 20 percent of the victims leaving domestic violence shelters enter permanent housing.

In New York City, staying in a domestic violence shelter doesn't count as time spent homeless, by HUD definition. So, to receive any services, victims must actually requalify as homeless. To prevent victims from having to sleep in the street, many programs pay out-of-pocket to serve them, receiving no reimbursement from HUD.

The HEARTH Act would help end homelessness in New York, first by expanding the definition of homelessness. The Nassau County Coalition Against Domestic Violence, which serves a largely suburban population just outside New York City, reports that victims of domestic violence and their children sleeping on floors and doubled up in untenable situations are not considered homeless, and are often trapped in dangerous situations.

They estimate that they could easily serve an additional 30 families each year if the definition of homelessness was expanded. This would not require additional funding, and the expanded definition would not overwhelm their system. They could serve these families, if only they were allowed to do so.

The second key way in which the HEARTH Act would end homelessness is by removing bonus point set-asides and carve-outs. Rather than pitting needy populations against each other, the HEARTH Act recognizes that there are many hard-to-serve populations, including homeless immigrants, prisoners re-entering the

community, and teens who have turned to drugs and violence to survive.

Every community has different groups who are very difficult to serve. And prioritizing one over the other at the Federal level does nothing to help each State address its unique homeless population. Instead, the HEARTH Act rewards "continua" of care that engage in an inclusive process, conduct a thorough needs analysis, and propose funding projects that truly respond to those identified needs. It returns the decision-making power to local service providers who are on the ground, in communities, and are best equipped to analyze the needs of homeless individuals and develop effective responses.

Rural Allegheny County has one of the highest poverty rates in New York State, and old substandard housing stock. Because of bonus points and set-asides that don't reflect their reality, the Accord Corporation lost their SHP and ESG funding, and had to close both their transitional and emergency shelter program. They currently only have five beds available in their county for only survivors of domestic violence. Accord was the only homeless shelter in the county, and many homeless families and victims of domestic violence are now with very limited resources.

These bonus points and set-asides haven't helped urban areas, either. Two years after beginning a plan to end chronic homelessness in accordance with HUD priorities, New York City reported the highest number of homeless families in the City's history.

While the Senate's Community Partnership to End Homelessness Act takes laudable steps in the right direction, it unfortunately stops short of what is needed. It proposes expanding the definition of homelessness to include some doubled-up individuals, but only if they have moved multiple times. Requiring multiple moves may place a victim fleeing violence in greater danger.

While we appreciate the effort to respond to the needs of families in rural areas, the best way to help all homeless persons in all parts of the country is to stop carving up McKinney-Vento funding, and let the States use it more flexibly and efficiently. For these reasons, we believe that the HEARTH Act is the most effective solution to ending homelessness for New Yorkers.

Thank you again for your consideration of the needs of victims of domestic violence. We look forward to working with you and your staff in the upcoming months.

[The prepared statement of Ms. Vasquez can be found on page 95 of the appendix.]

Chairwoman WATERS. Thank you very much.

Ms. Young, for 5 minutes.

STATEMENT OF LINDA M. YOUNG, EXECUTIVE DIRECTOR, WELCOME HOUSE OF NORTHERN KENTUCKY

Ms. YOUNG. I appreciate the opportunity to be here today in support of the HEARTH Act on behalf of people who experience homelessness and in the continuum of care in the northern Kentucky area. I am Linda Young, executive director of Welcome House of Northern Kentucky.

The agency has been serving the homeless and at-risk population for 25 years, providing a continuum of services, ranging from out-

reach to people on the streets, a food pantry, emergency shelter, payee and other financial services, case management and employment services, and service-enriched housing for families whose goal is self-sufficiency.

We served 9,700 people in 2006: 99 percent had incomes under $10,000; approximately 35 percent had a significant mental illness or mental health issue; 40 percent had a chemical dependency issue; approximately 45 percent were homeless because of domestic violence; and most were poorly educated.

The fastest growing segment of the homeless population we serve is families—40 percent. We are in an urban setting that is part of the greater Cincinnati Metropolitan Area.

The economic realities of a minimum wage job that doesn't lift a family out of poverty, rising housing and utility costs, a drop in the manufacturing sector, and a rise in the service sector, with lower-paying jobs for unskilled and semi-skilled workers, have huge costs. The demand for shelter has increased. However, the people residing in shelters are just the tip of the iceberg. The condition of homelessness is, for the most part, hidden.

There is a significant number of families living doubled up with family and friends because their earnings do not cover basic household expenses. Moving frequently makes it difficult to keep a job, and children miss enough schooling to prevent them from getting an education, the very thing that gives them a chance to find a way out of poverty, and at risk of being homeless. These families do not meet the current definition of homelessness, and therefore, are not eligible for our services until they go into a shelter, or are on the street.

More recently, priorities have shifted to the chronic homelessness initiative, and in the future, less emphasis and funding for the renewal of supportive services grants for the homeless. Prioritizing funds to this specific population is limited, and diverts funds away from homeless families. The continuum of care has been built on an integrated approach of housing and services, inclusive of people who are chronically homeless.

In our region, we work together to provide a comprehensive, holistic approach to meet a range of needs of homeless people in our community. Housing developers using HUD funds, public housing, and private landlords have learned to rely on the support services to stabilize individuals and families who are homeless. Case management is often a condition for which housing is accessed by people with poor rental histories and/or have disabilities and challenges to maintain stability. A reduction in these services will have a devastating impact.

A basic understanding of the continuum of care process is that homelessness is not caused merely by a lack of shelter, but involves a variety of underlying unmet needs. Housing alone will not address the issue of homelessness.

From the perspective of the director of a relatively small agency that provides services for the homeless, I can tell you that one of my biggest concerns is the number of children we are serving. In 2006, 39 percent of the people served at Welcome House were children, over half under 5 years of age.

If we are truly interested in ending homelessness, it will take a concerted effort on many focused fronts, not concentrating on one group at the expense of others.

I have been an active participant in the continuum care system in the northern Kentucky area for over 12 years. The continuum of care has included faith-based organizations, businesses, government, service providers, landlords, professionals, advocates, and people who have been homeless. Over time, we have built a comprehensive approach to planning, organizing, evaluating, and advocating. Because we must make the most of resources in our community, we have learned to be innovative, and work together more effectively and efficiently throughout this process.

The homeless assistance grants have provided critical resources for emergency shelter, transitional and permanent housing, supportive housing, and supportive services. Ours, as well as continua of care across the country, are functioning as HUD intended, a continuum of care system designed to address the critical problem of homelessness through a coordinated community-based process of identifying needs, and building a system to address those needs. The approach is predicated on the understanding that homelessness involves a variety of underlying unmet physical, economic, and social needs.

Each continuum of care community is unique. Urban, suburban, and rural communities in various geographic locations have much different needs, available resources, and approaches. I support that planning boards, as recommended in the HEARTH ACT, be established in each locality to design, execute, and evaluate programs, policies, and practices to prevent and end homelessness.

Chairwoman WATERS. I am going to have to ask you to wrap up your testimony. We are going to have to go back to the Floor and vote, and I want to make sure that we get Mr. Rosen's testimony in, and we give the members each one question, because we will not tie your time up, and have you wait another 40 or 50 minutes until we get back. So will you wrap up now?

Ms. YOUNG. Yes. I just wanted to thank Congressman Davis, and all the committee, for allowing me to speak, and thank you all for your interest in creating solutions to end homelessness.

[The prepared statement of Ms. Young can be found on page 150 of the appendix.]

Mr. DAVIS. Madam Chairwoman?

Chairwoman WATERS. Yes?

Mr. DAVIS. I was wondering if we could ask unanimous consent to submit the balance of Ms. Young's remarks for the record.

Chairwoman WATERS. Absolutely. Without objection, it is so ordered.

Mr. DAVIS. Thank you.

Chairwoman WATERS. Yes, Mr. Rosen?

STATEMENT OF JEREMY ROSEN, EXECUTIVE DIRECTOR, NATIONAL POLICY AND ADVOCACY COUNCIL ON HOMELESSNESS

Mr. ROSEN. Congresswoman Waters, thank you for your invitation to testify today and for your strong leadership on affordable housing issues. Ranking Member Capito, thank you as well, for

your commitment to housing homelessness issues, as you assume your new post.

I would also like to thank two other members of the subcommittee: Representatives Julia Carson and Geoff Davis, for their leadership in introducing H.R. 840, the HEARTH Act of 2007. Let me also commend Representative Judy Biggert for her commitment to ensuring that every homeless child and youth can attend school. Thank you, as well, to all the subcommittee members who have cosponsored the HEARTH bill.

I am Jeremy Rosen, executive director of the National Policy and Advocacy Council on Homelessness. I have spent the past 9 years providing assistance to homeless persons, first through direct legal assistance, and now by promoting comprehensive public policies to help end homelessness.

We will not end homelessness in the United States without a major commitment to the development and preservation of affordable housing that goes far beyond the current investment made by Federal, State, and local governments.

As an extremely small percentage of the current Federal housing budget, HUD's homeless assistance grant programs were never designed to end homelessness in this country, and they are incapable of doing so. Nevertheless, it is our collective responsibility, in reauthorizing the McKinney-Vento Homeless Assistance Act, to design an effective and efficient program that provides a full range of housing and services to as many homeless children, youth, families, and single adults as possible.

Enacting the HEARTH Act is a critical first step in meeting our moral obligation to these Americans. HEARTH will consolidate and simplify HUD's homeless assistance grant programs, align HUD's definition of homelessness with the definition used by the U.S. Departments of Education, Justice, and HHS, eliminate administratively-created set-asides and incentives that hamper local efforts to prevent and end homelessness, better support rural communities, and provide new opportunities to fund homelessness prevention.

Many different viewpoints will be expressed in the testimony at this hearing. Witnesses will say that HUD's current policies are working well across the country. We believe that they are not.

We are now 6 years through a 10-year Federal initiative to end chronic homelessness. We have successfully housed, through the initiative, many people in permanent supportive housing. Unfortunately, the number of chronically homeless individuals in this country is no lower today than it was 6 years ago. This calls into question whether or not, within the remaining 4 years, we will be successful in truly ending chronic homelessness.

The reason, quite simply, for this is that, instead of providing new and significant resources to house a difficult-to-house population, HUD and the Administration chose to divert resources, resources that were going to provide housing and resources for other homeless populations, including many children, youth, and families.

My organization, and many of the other witnesses who have testified today, do not object to serving those folks who are living on the street, and providing them with housing. We do, however, remain concerned that prioritizing a particular population is divert-

ing resources away from groups who need that funding just as much.

Many of the other witnesses will also say today that the Senate's approach to reauthorization would be more effective than HEARTH. The Senate approach will be described as a careful balance, crafted to ensure that limited funding is used to serve the most vulnerable homeless persons. We disagree.

Finally, witnesses will say that we cannot afford HEARTH, it will make too many people eligible for Federal homeless assistance. This is not the case. To determine eligibility for Federal programs, we must first adequately define the eligible population—in this case, the number of people in this country who do not have a home of their own. Resources are insufficient to serve all eligible people. We must strive to increase the available funds. And in the interim, we must rely on people in local communities to make tough decisions about how to most effectively use the limited Federal funding that they receive.

In short, how we define homelessness must not be influenced by the funding currently available for homeless assistance programs. Important social programs cannot be solved by merely defining them out of existence, as HUD has sought to do, by declaring that the Federal Government is committed only to ending chronic homelessness. This is an unacceptably modest goal.

I look forward to answering your questions. Thank you.

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

Chairwoman WATERS. Thank you very, very much. I am going to forgo my questions, because we have to get to the Floor.

Mr. Davis was not here to ask any questions of the last panel, so I will yield time to him, and there will only be time for one question, and then we have to rush to the Floor. So I recognize Mr. Davis for 1 minute.

Mr. DAVIS. Thank you, Madam Chairwoman. This question is for Linda Young.

If HEARTH was signed into law 6 months from now—and I think I am probably being optimistic, in the current political climate—I guess my question would be, what impact would it have on the types of homelessness that you see on a regular basis? And maybe you could tell a little bit about, in particular, how it would affect children in the short and long term.

Ms. YOUNG. Well, specifically, it will give us the flexibility to do what needs to be done for each particular family. And, also, not only the flexibility, but will help bring into the fold people who we now have to wait until they go into a shelter or are out on the streets before we can help them.

It will allow us, as a community, to be flexible in meeting the needs of each particular—whether we are rural or urban, and be able to express specific needs, and actually gather resources in our own community to do that.

Mr. DAVIS. Would you just say, in closing, that the reason that you need this is that, in reality, the type of homelessness that you deal with doesn't fit the public stereotype?

Ms. YOUNG. That would be correct.

Mr. DAVIS. Okay. Thank you. I yield back.

Chairwoman WATERS. Thank you very much. Unfortunately, we have to go back to the Floor and vote. We thank you so very much for coming, and giving us your testimony here today.

And I note that some of the members may have additional questions for the panel, so, without objection, the hearing record will remain open for 30 days for members to submit written questions to the witnesses, and to place their responses in the record. This panel is now dismissed, and I thank you again so very much.

[Whereupon, at 1:22 p.m., the hearing was adjourned.]

A P P E N D I X

October 4, 2007

Financial Services Subcommittee on Housing and Community Opportunity
Hearing "Reauthorization of the McKinney Vento Homeless Assistance Act"
Opening Statement for Congresswoman Julia Carson
October 4, 2007

Thank you, Chairwoman Waters and Ranking Member Capito for holding this important hearing today. I know we share a deep interest in eradicating homelessness. I regret not being present today, but I am thankful Homeless Assistance programs are receiving the attention they so desperately deserve. Today's hearing affirms that working to end homelessness is a mission taken very seriously by this Congress.

This past July marked the 20th Anniversary of the enactment of the McKinney Vento Homeless Assistance Act and yet the tragedy of homelessness persists. More than three million individuals experience homelessness every year and over one million of those individuals are children. This is unacceptable in our prosperous nation. It is in this spirit that I introduced the Homeless Emergency and Rapid Transition to Housing Act of 2007, H.R. 840. The bill would reauthorize McKinney-Vento Homeless Assistance programs which provide critical transitional housing, supportive services, emergency shelters and permanent housing.

The changes within H.R. 840 reflect the lessons we have learned since the last reauthorization of these programs in 1994. It addresses the concerns of diverse communities with distinct needs but one goal- to end homelessness. This bill would restore local-level decision making on homeless priorities, increase the authorization of these programs and modify HUD's definition of homelessness which is outdated and exclusive. H.R. 840 ensures more children and families receive homeless assistance by aligning HUD's definition with the one used by the Department of Education, the Department of Justice and the Department of Health and Human Services.

Local providers know which housing priorities best address their unique needs, but currently, severely inadequate funding levels, restrictive definitions and inflexible requirements prevent them from implementing housing solutions that best suit those needs. Many of the witnesses today are local-level service providers and advocates who face these obstacles every day. H.R. 840 would diminish these hurdles.

My home state of Indiana includes urban, suburban and rural communities, each struggling with different homeless dilemmas. In my district, which is comprised of the city of Indianapolis, more than 15,000 individuals experience homelessness each year. In this urban setting, it may be best to target housing and services towards the homeless that live on the streets for long periods of time. In Jeffersonville, Indiana, however, there is a dramatically different picture of homelessness. Barb Anderson, a witness today, serves as the executive director of Haven House Services in this rural community where affordable housing is sparse and the homeless are less visible, often living in doubled-up situations with relatives or in overcrowded, substandard housing.

Under H.R. 840, both the Indianapolis and the Balance of Indiana Continuum of Care Boards would be able to set different, more effective priorities. Further, they would be able to address all homeless individuals, not just those who meet a narrow, federally mandated definition.

I would like to thank Congressman Geoff Davis for his hard work on H.R. 840 and all of the cosponsors of the bill. I am grateful that so many of my colleagues are invested in efforts to address homelessness. Congress has been disgracefully slow in recognizing and responding to the national crisis of homelessness and I am thrilled that we have the opportunity to shed light on this issue today. Thank you.

National Coalition for the Homeless
2201 P St. NW
Washington DC 20037-1033
Phone: (202) 462-4822 • Fax: (202) 462-4823
Email: info@nationalhomeless.org
Web page: www.nationalhomeless.org

Statement for the Record
of
Barbara Anderson

Executive Director
Haven House Services
Jeffersonville, Indiana

and

Member, Board of Directors
National Coalition for the Homeless

before the
Subcommittee on Housing and Community Opportunity
Committee on Financial Services
U.S. House of Representatives

October 4, 2007 Hearing on
The Reauthorization of the McKinney-Vento Homeless Assistance Act

Introduction

The National Coalition for the Homeless is pleased to testify before the House Financial Services Subcommittee on Housing and Community Opportunity at its hearings on reauthorization of the McKinney-Vento Homeless Assistance Act.

The National Coalition for the Homeless (NCH), founded in 1984, is a national network of people who are currently experiencing or who have experienced homelessness, activists and advocates, community-based and faith-based service providers, and others committed to a single mission. That mission, our common bond, is to end homelessness. We are committed to creating the systemic and attitudinal changes necessary to prevent and end homelessness. At the same time, we work to meet the immediate needs of people who are currently experiencing homelessness or who are at risk of doing so. We take as our first principle of practice that people who are currently experiencing homelessness or have formerly experienced homelessness must be actively involved in all of our work.

The National Coalition for the Homeless is the nation's oldest national homeless advocacy organization. NCH was the lead organization in the fight to pass the Stewart B. McKinney Homeless Assistance Act (now named the McKinney-Vento Homeless Assistance Act) during the 1980s. We remain a champion for annual appropriations for McKinney-Vento programs, including the programs administered by the U.S. Department of Housing and Urban Development. We also continue to play an active role in monitoring the administration of McKinney-Vento programs and advocating for their periodic reauthorization.

The National Coalition for the Homeless maintains a careful decision-making process in which we rely on our Board of Directors to set our public policy. Our Board of Directors includes people experiencing and formerly experiencing homelessness; community-based, faith-based, and public service providers; state and local homeless and housing coalition advocates; and representatives of philanthropy and business. Our board members represent rural, suburban, and urban communities across the nation. It is from this perspective of field experience and diversity that we offer both supportive and strengthening comments on the two HUD McKinney-Vento reauthorization measures currently before Congress – the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act, H.R. 840) and the Community Partnership to End Homelessness Act (CPEHA, S. 1518).

Homeless Emergency Assistance and Rapid Transition to Housing Act

The National Coalition for the Homeless heartily endorses the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act, H.R. 840). We urge the Financial Services Committee to use the HEARTH Act, a bipartisan measure with the support of over 75 co-sponsors, as the base legislative product for reauthorizing HUD McKinney-Vento programs.

The HEARTH Act is closely aligned with NCH's long-standing principles about homeless assistance and HUD homeless programs. Further, the bill closely follows provisions within the Bringing America Home Act (H.R. 4347 of the 109th Congress), legislation which NCH played a central role in crafting and which is the signature public policy element of our Bringing America Home campaign.

Among the provisions of the HEARTH Act that the National Coalition for the Homeless fully supports:

- **Definition of Homeless Individual**. We support the addition into the definition of homelessness applicable to HUD programs additional living arrangements that are also understood to be homeless, including in other federal law. The HEARTH Act amends the HUD definition of homelessness to include individuals and families living in motels, hotels, and campgrounds due to lack of adequate alternative accommodations, and persons sharing the housing of others due to loss of housing, economic hardship, or a similar situation. These living arrangements are typical among some homeless families, homeless youth and young adults, and homeless persons in rural areas. By excluding these living arrangements, some members of these subgroups are denied access to life-sustaining homeless assistance.

Adding these two living arrangements does nothing more than recognize that homelessness is manifest contemporarily in manners other than those contemplated by Congress when it first passed the McKinney Act 20 years ago this year. Furthermore, Congress codifies these living arrangements as homeless in other federal laws. It should do so now for HUD homeless programs.

State and local educational agencies have managed to include homeless families and unaccompanied youth living in shared housing and in motels/hotels/campgrounds in their definitions of homelessness without overwhelming the public education system. We have confidence that HUD-funded shelters, supportive services providers, and transitional and permanent housing providers could manage the addition of these subgroups equally well.

- **Community Homeless Assistance Planning Boards**. We support the requirement that geographic areas seeking HUD McKinney-Vento funds establish community homeless assistance planning boards for the purposes of identifying service gaps, prioritizing needs, completing applications for funding to HUD, and monitoring funded projects within the geographic area. The scope of stakeholders that HEARTH indicates should be considered for inclusion in the community boards has our full support, particularly language around the expected participation of people experiencing homelessness, people formerly experiencing homelessness, and relatives of homeless persons.

- **Homeless Civil Rights**. We support the requirement that applicants for HUD McKinney-Vento funds make plans and report progress on steps taken in the geographic area of the applicant to eliminate laws that penalize persons experiencing homelessness based upon their status as homeless, or by using zoning laws, ordinances, or policies to prevent the siting of homeless facilities. We also support the requirement that applicants demonstrate efforts to assist homeless children and youth exercise their civil right to public education.

- **Eligible Activities**. We support the full scope of activities eligible for HUD McKinney-Vento funds within the HEARTH Act, including homelessness prevention (and an inclusive definition of such); supportive services (and an inclusive definition of such), without limitation on duration of the services or the subpopulation that can be provided such services; transitional housing; and permanent housing, including permanent supportive housing.

- **Emergency Shelter Grants**. We support reauthorization of the Emergency Shelter Grants program. We support the granting of flexibility to ESG grantees to use more ESG funds for homelessness prevention by repealing the current law limitation of only 30 percent of such funds for homelessness prevention. We also support the requirement that entities that receive ESG grants and serve one or more geographic areas served by a community board shall allocate ESG funds in consultation with such community boards.

- **Community Board Duties**. We support requirements that applicants for HUD McKinney-Vento funds address in their applications and progress reports compliance with the following worthy expectations:

    - Expectations that applicants demonstrate a comprehensive understanding of the extent and nature of homelessness in the geographic area and efforts needed to combat the problem of homelessness in the geographic area.
    - Expectations that applicants demonstrate the need for the types of projects proposed in the geographic area to be served and the extent to which the prioritized programs of the applicant meet such unmet needs.
    - Expectation that applicants provide in their application plans reviews of local policies and practices related to discharge planning from institutions; access to mainstream benefits and services; and zoning and land use policy and practices.
    - Expectations that applicants incorporate in their application plans the findings and recommendations of VA CHALENG assessments of the needs of homeless veterans in their geographic areas.
    - Expectations that applicants describe the degree to which homeless individuals and families in the geographic area are able to access public benefits and services, including schools, and VA benefits.

- **Grantmaking Timetable**. We support the establishment of a schedule by which the HUD Secretary shall announce the annual application for funds, announce awards decisions, and obligate and distribute awarded amounts.

- **Appeals Process**. We support the requirement that the HUD Secretary establish a timely appeal procedure for grant amounts awarded or denied.

- **Victim Protections**. We support the requirement that the HUD Secretary instruct victim service providers receiving HUD McKinney-Vento funds not to disclose for purposes of the Homeless Management Information System any personally identifying information about any client.

We are grateful that the HEARTH Act excludes the following provisions:

- **Permanent Housing Set-Aside**. Current HUD practice requires that 30 percent of funds appropriated to the McKinney-Vento account be used for the development of new permanent supportive housing units targeted to "chronically homeless" persons. NCH prefers instead that geographic areas be given maximum flexibility in the use of HUD McKinney-Vento funds for all eligible purposes, depending on the housing and service gaps in their community. We urge Congress to refrain from establishing national set-asides of funds for permanent housing, or other eligible activities, in the HUD McKinney-Vento statute.

- **Incentives and Bonuses**. Regrettably, the HUD Secretary currently uses bonuses to encourage communities to prioritize particular interventions or subpopulations over others, and in doing so discourages community use of funds for all eligible services, or for supporting those most underserved in their communities. We urge Congress to refrain from establishing incentives and bonuses that serve to limit community flexibility or suppress innovation.

As Congress fine-tunes the HEARTH Act, pleased consider the following recommended improvements:

- **Permanent Housing Renewals**. We strongly recommend that Congress renew expiring contracts for permanent housing through the housing choice voucher account rather than the HUD McKinney-Vento account.

- **Prevention Set-Aside**. NCH prefers that geographic areas be given maximum flexibility in the use of HUD McKinney-Vento funds for all eligible purposes, depending on the housing and service gaps in their community. Accordingly, we recommend Congress to refrain from establishing a national or local cap on the percentage or amount of funds within the McKinney-Vento account that geographic areas may use for homelessness prevention.

- **Community Board Diversity**. Congress should grant individuals and organizations the opportunity to request the HUD Secretary to take remedial action upon confirming a complainant's allegation that a Community Homeless Assistance Planning Board established under this Act has failed to meet the membership requirements of the Act.

- **Multiple Applicants**. We urge Congress to permit multiple collaborative applicants for each geographic area, with the Secretary awarding funds to the applicant with the highest application score. Further, a community board should be granted a right to appeal the Secretary's decision not to recognize the community board as suitable for preparing the collaborative application.

Community Partnership to End Homelessness Act

The National Coalition for the Homeless believes improvements to the Community Partnership to End Homelessness Act (CPEHA, S. 1518) **are necessary to make it a stronger and more inclusive bill.**

NCH has had the opportunity to comment in writing on CPEHA on at least two occasions. We submitted detailed comments on the introduced version of S. 1518 in a June 20, 2007 letter to the bill's sponsor, Senator Jack Reed (D-RI). We also submitted comments on the version as adopted by the Senate Committee on Banking, Housing, and Urban Affairs on September 19, 2007, in an October 3, 2007 letter to Committee Chairman Christopher Dodd (D-CT) and Ranking Member Richard Shelby (R-AL).

Upon comparison of our recommendations for strengthening S. 1518 as introduced with the Committee-passed version of the legislation, the National Coalition for the Homeless can only conclude that the Committee-passed version of S. 1518 not only does not address most of the requests we made to improve the original measure, it also adds new concerns for us that were not present in the original version. Examples of our concerns include:

- **Definition of Homeless Individual.** We very much appreciate the Banking Committee's responsiveness to the request of NCH and other organizations regarding the inclusion of some additional living arrangements to the definition of homelessness applicable to HUD programs. We appreciate the addition of campgrounds as a homeless living arrangement. We also acknowledge strides that the Committee has made to add some doubled-up persons and motel/hotel users to the definition. The Committee-approved amendments to the definition of homeless individual are an improvement over current law and merit our commendation.

That being acknowledged, we do not support clauses in these newly-eligible living arrangements that require people to have changed primary residences three or more times in the past year or two or more times in the past 21 days in order to be considered homeless. First, these clauses would force people to move repeatedly before they could become eligible for homeless assistance, or to delay homeless assistance to them until after they have moved repeatedly. Second, it will be difficult for homeless people to prove, and homeless service providers to verify, multiple moves.

Additional work on the fine points of this language is required to make these sub-definitions of homelessness safe for homeless persons and operable for providers.

We are also concerned about confusion that will inevitably ensue by the bill's inclusion in the definition of "at risk of homelessness," living arrangements that are recognized as homeless in other federal law definitions of homelessness. We also question why the income threshold for this at-risk population is set as low as 20 percent of area median income, when the customary standard for extremely low-income is 30 percent of area median income.

There is a simpler solution of amending the HUD definition of homeless individual – add "persons sharing the housing of others due to loss of housing or economic hardship" and

"persons living in motels, hotels, and campgrounds due the lack of an adequate alternative arrangement." – the approach taken in the HEARTH Act.

- **Community Homeless Assistance Planning Boards**. We urged the Banking Committee to require each geographic area applying for HUD homeless assistance to form a community board to coordinate the design, execution evaluation of programs and oversee general decision making processes. Not only did the Committee fail to adopt our recommendation, it struck bill language that would give specific direction to collaborative applicants as to the range of people with whom the applicant ought to consult when developing their applications for funds, including people experiencing homelessness, homeless service providers, representatives of special populations, homeless education liaisons, representatives of the business community, representatives of philanthropies, and others.

The National Coalition for the Homeless cannot support a HUD homeless assistance reauthorization measure that does not provide either safeguards or instructions that a full range of stakeholders, especially persons experiencing homelessness, will be involved in the development and monitoring of collaborative applications.

- **Emergency Shelter Grants Program**. We do not support the requirement in the Committee-passed version of S. 1518 that will restrict ESG grantees, two years after enactment, from spending more than 40 percent of their ESG awards for emergency shelter renovation, rehabilitation or conversion; essential services (and now restricted by the Committee only to essential services related to emergency shelter or street outreach); or emergency shelter maintenance or operations. We are concerned this set-aside may negatively affect the wherewithal of the nation's emergency shelter system – the very safety net for persons experiencing homelessness.

We prefer that grantees be given maximum flexibility in the use of ESG for all eligible activities, depending on the prevention and emergency response needs in their community. National set-asides of funds for specific purposes limit such flexibility and should be removed from the bill prior to Senate passage.

- **Permanent Housing Set-Asides**. In our June 2007 letter, we expressed our preference that communities be given maximum flexibility in the use of HUD McKinney-Vento funds for all eligible purposes, depending on the housing and service gaps in their community. We recommended that national set-asides of funds for permanent housing activities be removed from the bill. The Banking Committee rejected this recommendation.

- **Selection Criteria**. The National Coalition for the Homeless objects to the Banking Committee's decision to eliminate from the original bill many of the application selection criteria. Among the selection criteria that has "gone missing" from the Committee-approved version of S. 1518:

    - Expectations that applicants address in their application plans the needs of relevant subpopulations, to include persons with disabilities, families with children, unaccompanied youth, veterans, and persons at risk of homelessness.

- Expectations that applicants identify in their application plans an individual or body responsible for overseeing implementation of specific strategies.
- Expectation that applicants provide in their application plans reviews of local policies and practices related to discharge planning from institutions; access to mainstream benefits and services; and zoning and land use policy and practices.
- Expectations that applicants incorporate in their application plans the findings and recommendations of VA CHALENG assessments of the needs of homeless veterans in their geographic areas.
- Expectations that applicants demonstrate a comprehensive understanding of the extent and nature of homelessness in the geographic area and efforts needed to combat the problem of homelessness in the geographic area.
- Expectations that applicants demonstrate the need for the types of projects proposed in the geographic area to be served and the extent to which the prioritized programs of the applicant meet such unmet needs.
- Expectations that applicants describe the degree to which homeless individuals and families in the geographic area are able to access public benefits and services, including schools, and VA benefits.
- Specific direction on the range of persons the applicant shall consult when preparing their application (see our comments on community homeless assistance planning boards above).

The National Coalition for the Homeless urges that these selection criteria be restored to the bill before presenting S. 1518 to the full Senate for a vote.

- **Incentives and Bonuses**. NCH believes the bill's proposed High-Performing Community designation authority is too cumbersome for most communities to compete. Also, we are concern that granting the Secretary authority to award bonuses gives HUD ability to designate priority activities at the expense of maximizing community flexibility. Our concerns with the incentive and bonus authority have been exacerbated by the Banking Committee's decision to require HUD to develop a new pro-rata need formula. This new formula is to include consideration of the best available data that targets such need amount to actual rates of homelessness. Thus, while the High-Performing Community incentive rewards geographic areas making demonstrable reductions in homelessness, the pro-rata formula change is likely to "reward" geographic areas with higher incidences of homelessness. High-performing communities could very well, then, see reductions in their pro-rata need amounts.

- **Additional Missed Opportunities**. Additional recommendations for strengthening S. 1518 that the Banking Committee chose not to implement include:

  - Interagency Council on Homelessness. While we support the reauthorization of the Interagency Council on Homelessness, we recommended that the executive director of the Council be subject to Senate confirmation, so that the public may play a role in the selection of this important position within the executive branch. We requested that the monitoring of state and local practices regarding the criminalization of homeless persons based on their homeless status be added as an ICH duty. We recommended

that ICH be explicitly funded through the account for the Executive Office of the President, as the Council is a function of the full executive branch, not of HUD.

- Technical Assistance. We requested stronger language regarding technical assistance to project sponsors. Current wording does not permit the HUD Secretary to offer technical assistance to current sponsors.
- Unified Funding Agencies. We recommended that this additional layer of grants administration be eliminated, as it is an additional diversion of funding from direct services to program administration. HUD should continue to make grant awards directly to project sponsors and manage such awards.
- Program Requirements. We requested that the proposed program requirement placing limits on resident capacity in permanent supportive housing projects be removed, since this is an area of state and local jurisdiction.

There are several provisions of the Community Partnership to End Homelessness Act that enjoy NCH support. Among them:

- **Permanent Housing Renewals**. We strongly support the legislation's proposal to renew expiring contracts for permanent housing through the housing choice voucher account rather than the HUD McKinney-Vento account.

- **Supportive Services**. We thank the Banking Committee for clarifying language in the original measure such that the use of homeless assistance funds for supportive services to individuals and families who in the prior 6 months have been homeless but are currently residing in permanent housing shall not be construed to apply to individuals and families occupying permanent housing units funded through the homeless assistance program.

- **Administrative Expense Limit**. The Committee's decision to set an administrative expense limit for project sponsors at 7 percent, while lower than our recommended 10 percent, is an improvement over current policy.

- **Victim Protections**. We support the requirement that the HUD Secretary instruct victim service providers receiving HUD McKinney-Vento funds not to disclose for purposes of the Homeless Management Information System any personally identifying information about any client.

- **Grantmaking Timetable**. We support provisions that establish the schedule by which the HUD Secretary shall announce the annual application for funds, announce awards decisions, and obligate and distribute awarded amounts.

- **Appeals Process**. We support the requirement that the HUD Secretary establish a timely appeal procedure for grant amounts awarded or denied.

- **Findings and Purpose**. We support the comprehensive findings and purpose enumerated in S. 1518. These are important sections of a bill as they are used by the executive branch, the courts, and the public to interpret Congressional intent.

Additional Recommendations for Strengthening HUD McKinney-Vento Programs

As the HEARTH Act and CPEHA make their ways through Congress, we urge the following additions or improvements to both bills:

- **Increase Authorization Level**. We urge Congress to double the authorization and appropriations for HUD McKinney-Vento programs to $3 billion annual. While the HEARTH Act provides a welcome increase in the authorization level for HUD McKinney-Vento programs to $2.5 billion in FY 2008, and CPEHA to $2.2 million in FY 2008, these levels fall short of the $3.0 billion doubling goal of national homeless organizations, as expressed in a joint document "10 Steps to Help Prevent and End Homelessness Right Now," issued in connection with the 20th Anniversary of the McKinney-Vento Homeless Assistance Act.

- **Protect Housing Choice Voucher Tenants**. We recommend that as renewal contracts for permanent housing projects initiated with HUD McKinney-Vento funds are transferred to the Housing Choice Voucher fund, additional budget authority be granted at such sums as may be necessary in order to protect current voucher holders and persons on voucher waiting lists from being displaced or unserved by the transfer.

- **Manage the Homeless Management Information System.** NCH seeks a vigorous body of law to protect confidentiality of data about clients served with homeless assistance funds. We hope to curb the adverse impact that the Homeless Management Information System (HMIS) is having on community and provider ability to direct limited resources to actual housing and services for homeless persons. Finally, we are concerned that data collected through HMIS is not sufficiently reliable or valid for purposes of calculating estimates of homelessness incidence and prevalence or for determining the pro-rata estimate of need.

If Congress decides to allow HUD to retain the HMIS, which it has never expressly authorized, we urge that a statutory framework for governing and controlling it be established. Statutory language on HMIS should accomplish the following:

  - Distinct funds should be authorized and appropriated separate from HUD McKinney-Vento Homeless Assistance programs for the implementation and execution of HMIS.
  - Use of HMIS as the data source for determining the pro-rata estimate of need and as a source for a homeless incidence and prevalence estimate should be prohibited.
  - Consumers and providers should have the opportunity to opt out of participation in HMIS and to review and correct HMIS data.
  - Project sponsors who collect equivalent data outside of HMIS should remain eligible for funds.
  - The HUD Secretary should be required to instruct any providers receiving HUD McKinney-Vento funds not to disclose for purposes of HMIS any personally identifying information about any client. (Current law and the HEARTH Act extend

this responsibility to victim service providers only. We support this language, but ask Congress to widen the scope to all providers.)
- Data sharing between providers should be prohibited without client consent.
- HMIS data should be encrypted and audit trails should be established.
- Law enforcement shall not have access to HMIS data without a search warrant.
- Collaborative applicants and project sponsors should be required to train staff on HMIS policies and procedures.
- Criminal and civil penalties for persons who knowingly and willingly disclose HMIS data should be established.
- Congress should ensure non-preemption of state privacy laws more vigorous than federal HMIS law.
- Protections on academic researcher use of data should be established.
- An independent evaluation of HMIS should be conducted to assure its efficacy.

- **Expand Sources of Match**. We request that donated real and personal property be made eligible as matching contributions, in addition to cash and donated services.

- **Maintain Current Level of Non-Federal Effort**. A requirement should be established that funds appropriated and made available for all eligible activities under the HUD McKinney-Vento program shall be used to supplement, and not supplant, other Federal, State, and local public funds use for such activities.

- **Establish a Transition Period**. Project sponsors and tenants should be assured continuity of funds and housing and services during the transition period from the homeless assistance program as currently configured and any new or re-designed program(s) that result from reauthorization. Tenants of housing projects currently receiving HUD McKinney-Vento funds should not be displaced as a result of any changes in funding to the project. Further, project sponsors of permanent housing units must retain funding for the full 20 years for which they are required to keep the units affordable.

- **Enact Criminal Justice Grant Conditions to Spur De-Criminalization of Homelessness**. We urge Congress to bar geographic areas with laws that penalize persons experiencing homelessness based upon their status as homeless, or by using zoning laws, ordinances, or policies to prevent the siting of homeless facilities, from receiving formula funds through the Edward Byrne Memorial Justice Assistance Grant Program until such laws are repealed.

- **Homelessness Prevention**. Congress should authorize and appropriate funds separate from HUD McKinney-Vento for a major homelessness prevention initiative. As one possibility, we encourage consideration of the establishment and appropriation of funds for an emergency rent relief fund, whereby HUD would assist individuals and families at risk of losing their housing by making grants available to local units of government and nonprofit organizations to establish local funds for emergency payments to prevent evictions (See Section 304 of H.R. 4347 of the 109th Congress). The original version of S. 1518 offers a second option for consideration.

- **Rural Homeless Assistance.** Congress should authorize and appropriate funds separate from HUD McKinney-Vento for a rural homeless assistance grant program. A targeted homeless assistance program would ensure greater access of rural communities to federal homeless assistance resources. We prefer that this proposed rural homeless assistance program be administered by the U.S. Department of Agriculture, which has greater competency in working with rural communities.

Conclusion

The National Coalition for the Homeless congratulates the sponsors and staff of both the HEARTH Act and CPEHA for their efforts to develop reauthorization measures for HUD McKinney-Vento programs. We are heartened that both bills have attracted high numbers of co-sponsors, an indication of Congress's concern with and intention to reduce homelessness.

After comparing the HEARTH Act to CPEHA, the National Coalition for the Homeless concludes that H.R. 840 is the legislative product that aligns more closely with our long-standing position on homeless assistance and on the appropriate role of HUD McKinney-Vento programs in responding to the emergency condition of homelessness in the United States. Accordingly, we call on Congress to use the HEARTH Act as its base legislation for developing a HUD McKinney-Vento reauthorization measure worthy of enactment into law.

The National Coalition for the Homeless looks forward to continuing to work with Congress in developing a HUD McKinney-Vento reauthorization measure that is fully protective of people experiencing homelessness and highly responsive to their diverse shelter, housing and support services needs.

Testimony of

Deborah DeSantis

President and Chief Executive Officer
Corporation for Supportive Housing

Regarding

Reauthorization of Federal Homeless Assistance Provided Under

The McKinney-Vento Homeless Assistance Act of 1987

Before the

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

October 4, 2007

Introduction

Madam Chair, Members of the Committee, Good Morning (Afternoon).

My name is Deborah DeSantis and I am President and Chief Executive Officer of the Corporation for Supportive Housing (CSH).

CSH is a national non-profit helping communities create permanent affordable housing linked to services that prevent and end homelessness.

I am pleased to offer testimony to the Subcommittee on reauthorizing the McKinney-Vento Homeless Assistance Grants Program, a critical resource for homeless housing and services programs.

It is an honor to speak just after the testimony of Connecticut State Senator John McKinney. Mr. McKinney's father, the late Congressman Stewart McKinney, is rightly recognized for his leadership and passion in responding to our nation's crisis of homelessness two decades ago.

I would like to thank the Subcommittee Chair, Representative Maxine Waters, for committing her leadership to the task of shaping legislation to reauthorize the McKinney-Vento Homeless Assistance programs.

I would also like to acknowledge Representative Carson and other Members of this Subcommittee, who took an early interest by introducing HR 840, the HEARTH Act.

Finally, CSH is also pleased that the Senate Banking Committee, under the Chairmanship of Senator Dodd, has passed an excellent bill to reauthorize the McKinney-Vento programs, which Senators Jack Reed and Wayne Allard, along with a bi-partisan group of their colleagues, sponsored as S. 1518, the Community Partnership to End Homelessness Act of 2006 ("CPEHA").

CSH has worked for more than 15 years to help community-based non-profits and local and state governments across the country develop and operate permanent supportive housing. I will address the following issues, as they relate to the McKinney-Vento programs, as succinctly as possible:

- The proven effectiveness of permanent supportive housing funded in part through the McKinney-Vento programs;
- The need to continue to reserve or set aside at least 30% of funds allocated through HUD's McKinney-Vento programs for permanent housing; and
- The potential impact of modifications to the definition of "homeless individual" as it applies to HUD's McKinney-Vento programs

The McKinney Act was designed to fund emergency responses to homelessness, such as shelters and food programs. Unfortunately, 20 years later, the need for the McKinney-Vento programs remains great, with an estimated two million people experiencing homelessness each year. The

majority of homeless people have short periods of homelessness, typically resulting from economic circumstances, such as loss of a job or public assistance cuts.

However, studies show that a significant sub-population of about 200,000 homeless individuals and families experience extended or repeated bouts of homelessness. People within this sub-population often encounter disabling conditions, including mental illness, substance addition, HIV/AIDS, and other chronic conditions. Many first experienced homelessness or residential instability as children or as youth transitioning out of foster care. The most troubled homeless families, who bounce in and out of shelters repeatedly without achieving housing stability, are likely to be involved in the child welfare system and parents are more likely to be receiving costly inpatient care for mental health or substance abuse problems. Children face a growing risk of entering foster care when parents are unable to obtain housing.

Despite its tragic consequences, the persistence of homelessness has allowed us to study the problem, explore causes, and test solutions in an ongoing effort to formulate the best policy solutions at the local, state and federal levels. As a consequence, the Subcommittee now has access to a depth of knowledge in several key areas that was simply not available in 1987, when Congress first passed the McKinney Act.

Supportive Housing Works

Research documenting the effectiveness of supportive housing has, in fact, bolstered the ever-increasing momentum of government, corporate and philanthropic investment in supportive housing. To date, these studies indicate:

- More than 80% of people who enter supportive housing are still in housing a year later;
- Formerly homeless residents of supportive housing achieve decreases of more than 50% in emergency room visits and hospital inpatient days, and decreases in emergency detoxification services of more than 80%;
- Supportive housing leads to improvements in neighborhood safety and beautification that helps stabilize property values; and
- Tenants are able to increase by 50% their earned income and by 40% their employment rates when employment services are provided in supportive housing, reducing their reliance on public assistance.

The most comprehensive case for supportive housing was made by Dr. Dennis P. Culhane and his colleagues at the University of Pennsylvania's Center for Mental Health Policy and Services Research, which tracked the cost of nearly 5,000 mentally ill people in New York City for two years while they were homeless and then for two years after they were housed. The study's central findings include:

- It currently costs $40,500 annually to keep mentally ill people homeless – with 86% of the costs borne by the health care and mental health systems.
- Supportive housing provides major reductions in costs across seven service systems (including hospitals, jails, and emergency shelters) with 72% of the reductions in health care costs—a savings of $16,282 per housing unit per year.

Among homeless families, researchers have found the highest costs may be associated with extended stays in family shelters or transitional housing programs. By our conservative estimates, the costs to taxpayers of providing the crisis services necessary for maintaining homelessness, particularly chronic homelessness, totals between $5-8 billion a year.

Significantly, the cost-effectiveness of permanent supportive housing is not simply a 'big city' phenomenon. Similar findings from studies in communities as diverse as Seattle, Minneapolis, San Francisco, Denver, Indianapolis, Atlanta, Dayton Ohio, Portland Oregon, and others, were recently highlighted at the National Symposium on Homeless Research, sponsored by HUD and the US Department of Health and Human Services.

Permanent, supportive housing is the only intervention that works to stabilize the housing and health status of this vulnerable population, which otherwise consumes a disproportionate share of public and private safety net resources, with little in the way of positive outcomes to show for it.

Given the facts, McKinney reauthorizing legislation should provide incentives to create more permanent housing by:

- Targeting at least 30% of funds to permanent housing for homeless people with disabilities (individuals and families with a head of household with a disability);
- Providing incentives through bonus funding to encourage grantees to invest in cost-effective interventions, including permanent supportive housing for those experiencing long-term homelessness, for people who are most likely to remain homeless and least likely to be served by other programs; and
- Allowing grantees to use funds for permanent housing as an eligible activity for other homeless individuals and families, with substantial flexibility to respond to locally identified needs, including short or medium term assistance to help people find and keep stable independent housing.

Set-aside for Permanent Housing

CSH urges codification of a 30% set aside for permanent housing for homeless households with one or more disabled persons. Congressional appropriators, on a bipartisan basis, have imposed this 30% set aside every year for the past nine fiscal years. For those homeless individuals and families who confront chronic health conditions and suffer, or are at-risk of suffering, long-term and/or repeated bouts of homelessness, permanent supportive housing is the only intervention proven to end costly cycling between systems. The McKinney-Vento permanent housing programs are a critical resource for making supportive housing available and have a real impact on the need among these vulnerable households who are often ineligible or screened out of mainstream housing and services programs. Dr. Martha Burt, in her seminal white paper, "What Will It Take to End Homelessness?" said "Providing housing helps currently homeless people leave homelessness. It also prevents people from losing their homes. *In the absence of housing, virtually nothing else works.*"

Prior to the 30% set-aside, a sharp decline in the amount of McKinney funding used for permanent housing occurred, despite great need. In 1998, the year before the set aside, only 13% of McKinney money was dedicated to permanent housing, even though sound research backed the general consensus that permanent, supportive housing is an effective approach to ending homelessness,

especially for people experiencing long-term homelessness who are persistently shut out of other targeted homeless interventions and/or mainstream housing/service systems.

Why did this sharp decline happen? Funding for permanent supportive housing decreased as well-intentioned local Continuums faced strong incentives to "spread the wealth" among as many homeless projects as possible. Additionally, permanent supportive housing is a complex undertaking. While many agencies expressed willingness to take on the challenge, the path of least resistance in annual local Continuum of Care planning—where existing grantees often strongly influence a community's competitive application to HUD—was often to sustain and even expand dominant, non-permanent housing interventions.

The set aside restored balance to the Continuum of Care and created more permanent affordable housing. The set-aside encouraged many communities, in fact, to begin reducing homelessness. For these reasons, CSH has concerns about the lack of any set-aside in H.R. 840, the HEARTH Act, as currently drafted. On the other hand, S. 1518, the Community Partnership to End Homelessness Act, does include a national 30% set-aside for permanent housing for those with disabilities. The Act strikes a careful balance of meeting the needs of rural and small communities, while addressing the evidenced-based practices that have been so effective.

In addition to encouraging the creation of housing models that work to reduce homelessness among those experiencing long-term or chronic homelessness, other McKinney-Vento funded interventions have continued to operate over the last nine years of the congressionally-mandated set-aside. While significant McKinney Vento resources have been invested in new permanent supportive housing since FY 2000, the overall funding available for other interventions has not plummeted. In fact, it has increased by $50 million. By augmenting the McKinney-Vento appropriation from $900 million in FY 2000 to $1.44 billion in FY 2007, increases that occurred largely because of the well-known successes of permanent supportive housing, Congress greatly softened the impact of the set aside.

Further, people experiencing chronic homelessness are more likely than other McKinney-Vento eligible populations to be categorically excluded or, in practice, screened out of other safety-net programs. Indeed, those with disabilities face the greatest barriers in accessing permanent, stable housing. The Consortium for Citizens with Disabilities' *Priced Out in 2006* reveals that the average national rent for an efficiency or one-bedroom apartment of $715 is more than the monthly income disabled people receive on Supplemental Security Income (SSI). People with disabilities who rely on SSI benefits, which average $632 per month nationally, as their sole income source face the prospect of spending 113% of such benefits to afford a modest apartment.

In such a circumstance, it is appropriate—in fact, imperative—for federal policy governing HUD homeless assistance grants to provide this population with some priority. It is also appropriate for the federal government to tie funding to certain outcomes, and to intervene where a locally controlled system risks failing to produce these outcomes, which H.R. 840 and S. 1518 both seek to accomplish. Outcome measurements will, in essence, ensure that the set-aside continuously meets the needs of each community.

Finally, permanent housing is a key to ending current homelessness and preventing future homelessness. In 2002, CSH and others estimated a need for approximately 150,000 units of permanent supportive housing by 2012 to reduce significantly the number of those experiencing chronic homelessness and thereby progress toward ending homelessness. Congress, the Millennial

Housing Commission, and the President's New Freedom Mental Health Commission have all adopted this goal. We recognize that a significant portion of the 150,000 units of permanent supportive housing needed to end chronic homelessness will have to come from mainstream housing programs. Like all housing models funded through McKinney, nearly all supportive housing projects that rely on the McKinney-Vento programs to leverage significant capital investments from other sources, including the Low Income Housing Tax Credit program and other housing and supportive services resources controlled by states and local governments.[1]

CSH appreciates and works with many providers of high quality emergency shelter, transitional housing, and supportive services programs who serve non-disabled homeless families, youth aging out of foster care, reentering prisoners, and others We maintain that a 30% set-aside will not exclude these models. CSH strongly asserts, however, that permanent housing targeted to those experiencing long-term homelessness should remain a priority in the McKinney-Vento programs. Indeed, as stated in my testimony, evidence establishes that applying the intervention of supportive housing for long-term or "chronically" homeless people makes good policy sense.

Additionally, CSH supports a 10% set aside for permanent housing for non-disabled families, as well as special incentives (such as long-term rental assistance contracts) to create permanent housing for chronically homeless and homeless families. Though the number of units likely to be created for non-disabled homeless families under this set aside will not be large enough to meet the need--indeed, targeting the entire McKinney-Vento appropriation to this task for the next decade would have a negligible impact on the affordable housing crisis as it now stands—it is critical that McKinney reauthorization make explicit that more affordable housing is a necessary component of any effective intervention for this growing population and that the McKinney-Vento programs support such permanent housing strategies for non-disabled homeless families (who are ineligible for assistance under the existing McKinney-Vento permanent housing programs).

Definitions of Homelessness

The HUD definition of homelessness includes people who, "*lack a fixed, regular, or adequate nighttime residence,*" who are sleeping in a shelter, who reside in institutions for less than 30 days, or who are living in a place not intended for sleeping quarters. It does not include people who are in prison or jail or "otherwise detained." The federal government currently defines chronic homelessness as, "*An unaccompanied homeless individual with a disabling condition who has either a) been continuously homeless for a year or more* OR *b) has had at least 4 episodes of homelessness in the past three years.*" The definition of chronic homelessness excludes families.

Modifications to the definitions of homelessness or chronic homelessness should be informed by research about patterns of homelessness among both families and individuals. Leading national experts have said that about 12,000-15,000 households of families with children are homeless for two or more years at a time. Data also suggest that a subset of homeless families who are dealing with medical problems, mental illness, substance abuse, and traumatic stress (e.g., domestic violence or victimization from other forms of physical or sexual violence) are at risk of long-term or repeated episodes of homelessness. These families experience "chronic" or "long-term" homelessness, but are not recognized as such under current definitions. For this reason, CSH supports including

[1] In the years FY 2001-FY 2005, the McKinney-Vento programs produced approximately 10,000 units of permanent supportive housing annually.

families, where a head of household suffers from a disability, in the definition of "chronic homelessness" when homeless repeatedly or continuously.

CSH also supports an expanded definition of "homelessness" for purposes of determining eligibility for housing or services funded through McKinney-Vento programs. About 100,000 households are either homeless or cycling in and out of institutions for years on end. As indicated throughout my testimony, people with disabilities often cycle between homelessness, shelters, hospitals, treatment facilities, and jails. The federal government should recognize this reality to avoid excluding these individuals from benefiting from homeless assistance programs.

As such, individuals or families who have moved three or more times in the past year and are at severe risk of becoming homeless due to their unstable living situations (i.e., because they are living off of a short-term motel voucher or are living with a relative or friend on a short-term, unstable basis) should be considered "homeless." S. 1518 has incorporated this approach. We also assert that those who are temporarily staying in a safe haven, hospital, treatment program, or jail, but were previously homeless, should be considered "homeless" and able to access the supports the McKinney programs offer.

We support a common-sense and fact-based expansion of the definitions of homelessness and strongly endorse limiting the definitions to those experiencing homelessness. We have great reservations about expanding the definition as suggested in H.R. 840.

We agree that housing affordability is at the root of homelessness. According to the Harvard Joint Center on Housing Studies' *State of the Nation's Housing 2007*, one in seven Americans, most of whom fall under the federal poverty line, spend more than 50% of their incomes on housing. In recognition of this significant and growing unmet need for affordable housing, the Financial Services Committee recently completed work on landmark legislation to strengthen and expand the Section 8 housing voucher program and to establish a National Housing Trust Fund. S. 1518 would also create a new grant program to fund relocation, stabilization, rental assistance, and supportive services for families and individuals precariously housed or at risk of homelessness. If enacted and adequately funded, these policy reforms will do much to end and prevent homelessness for many Americans living in doubled-up, substandard, or unstable housing.

These thoughtful approaches to the crisis in housing affordability, however, stand in stark contrast to expanding the definition of homelessness to all experiencing the effect of this problem. Many of the individuals who would be included within the definition of homelessness currently proposed under H.R. 840 actually are not those at greatest risk of falling into homelessness. Expanding the definition in this manner would allow grantees to "cream" when serving those in poverty, as housing and services providers could be permitted to accept those with higher incomes into programs intended to serve the most vulnerable.

In fact, this expansion may make eligible as many as 10 million people to access the mere $1.5 billion now available for homeless assistance funding. To provide some context, the level of funding for HUD's McKinney-Vento programs is less than one-tenth the amount of federal funding appropriated each year for Temporary Assistance to Needy Families (TANF) or for tenant based rental assistance through the Section 8 Housing Voucher Program. Consequently, the statute that governs the distribution of HUD's McKinney-Vento funds must carefully address how best to focus grants , rather than stretching the resources available to McKinney grantees too thin.

Our Thanks

Once again, we thank the Subcommittee for the opportunity to submit this testimony, and applaud you for your ambitious undertaking at this hearing, for soliciting input on the critical issues at stake in reauthorizing the McKinney-Vento programs, and for responding to homelessness and the housing needs in America today.

Madam Chair, I am happy to answer questions.

NATIONAL LAW CENTER
ON HOMELESSNESS & POVERTY

Testimony of Maria Foscarinis
National Law Center on Homelessness & Poverty

Before the Subcommittee on Housing and Community Opportunities
House Committee on Financial Services

October 4, 2007

411 K STREET, NW, SUITE 1400
WASHINGTON, DC 20005

www.nlchp.org
nlchp@nlchp.org

PHONE: 202.638.2535
FAX: 202.628.2737

Good morning. My name is Maria Foscarinis and I am the Founder and Executive Director of the National Law Center on Homelessness & Poverty (NLCHP), a nonprofit advocacy organization whose mission is to serve as the legal arm of the national movement to prevent and end homelessness. I would like to begin by thanking the Chair for holding this hearing and for providing the opportunity to focus Congressional attention on the urgent issue of homelessness in America.

This year marks the 20th Anniversary of the enactment of the McKinney-Vento Homeless Assistance Act. While they were never intended as a sole solution to homelessness, over the past 20 years, the McKinney-Vento Act programs have made a substantial difference in the lives of thousands of homeless Americans. But for too long, the programs administered by the U.S. Department of Housing and Urban Development have not been reauthorized. Now is the time to reauthorize and improve the programs to make them reflect current knowledge and realities.

Background

I want to begin with a little history. During the early 1980s, the U.S. experienced a rapid growth in the number of homeless persons not seen since the Great Depression. While the problem had once been associated with single males in inner cities, the 1980s brought about a dramatic increase in the number of homeless women and families as well as men. Homelessness also spread beyond the inner cities out to suburban and even rural areas. During the first half of the 1980s, there was little federal involvement, and cities and states were left to struggle with the problem on their own. Without federal help, few resources were available to provide shelter or other services.

I came to Washington to work with a coalition of advocates and other stakeholders to press Congress to take action. As a result of our advocacy, in 1986, Congress introduced the Homeless Persons' Survival Act. The Survival Act contained three parts: emergency measures, prevention measures, and measures to create permanent solutions to homelessness.

Recognizing the urgent need for emergency measures, we worked with Congressional sponsors to move those measures into a separate bill and seek passage of that bill first. Following a winter campaign – including sleep-outs on Capitol Hill joined by Members such as Stewart McKinney and Bruce Vento – that legislation was enacted in 1987 as the McKinney Act, now known as the McKinney-Vento Act. The Act was the first – and remains the only – major, coordinated federal response to homelessness. The Act included programs administered by the U.S. Department of Housing and Urban Development (HUD) to provide emergency shelter, transitional, and permanent housing.

In passing the McKinney Act, Congress explicitly stated that it was intended to be only a first step in addressing the national crisis of homelessness. Congress recognized that longer-term solutions – such as the prevention and long-term sections of the Homeless

Persons Survival Act – were needed. But to date, those have not been passed. As a result, national homeless policy has been built around primarily emergency measures.

After passage of the McKinney Act in 1987, the HUD Title IV programs were reauthorized several times. During those reauthorizations, Congress began to adapt the programs to provide more than just emergency solutions. The Supportive Housing Demonstration program was made a permanent program, and the Shelter Plus Care program was created to provide housing matched with services for persons with significant service needs.

Additional changes were proposed in legislation in 1994 but were never enacted. Since that time, no other HUD McKinney reauthorization bills have been enacted. This lack of authorization has meant that appropriators were left to set funding levels without guidance from the authorizing committee. Additionally, with no legislative authorizing mechanism to make amendments to the programs, HUD modified the programs through changes in the Notices of Funding Availability processes and appropriators also began setting priorities for funding in the appropriations bills.

While some of these changes, such as the institution of the Continuum of Care process, have been positive, others have created controversy, such as the heavy focus on chronic homelessness. Additionally, the lack of statutory authorization has resulted in variation in the process from year-to-year, making it more difficult for communities to plan. At the same time, eligible activities and program requirements have remained the same for the past fifteen years, and we have not been able to modify them to reflect current realities and best practices.

It is time for Congressional oversight committees to step in and exercise their authority. Reauthorization will provide stability and clarity in the planning process while providing flexibility to allow communities to serve all homeless populations in the most effective manner. Improving the programs will bring the Act – and national policy – closer to the original Congressional promise to put in place long-term solutions to end and prevent homelessness.

The HEARTH Act: Improving existing programs

NLCHP has endorsed H.R. 840, the Homelessness Emergency and Rapid Transition to Housing Act, also known as the HEARTH Act. We believe it makes several important changes to existing law. In particular, the bill would:

- More closely align HUD's definition of homelessness with that of other federal agencies;
- Establish a clear authorization level and provide guidance to appropriators
- Codify a community-based planning process and ensure a place at the table for key stakeholders; and
- Discourage communities from penalizing homeless status.

I would like to take a minute to talk about each of these points.

A. Expanded definition of homelessness

HUD's current definition of homelessness is too restrictive -- it excludes many persons who are living in temporary accommodations, such as motels or doubled up with another household, even though they are living there because they have lost their housing and have nowhere else to go. It leaves people in unsuitable, unstable, and sometimes unsafe living arrangements. HUD's definition has been particularly problematic in rural areas, where homelessness is more hidden.

The HEARTH Act would more closely align HUD's definition with that of the Department of Education and allow grantees to serve the many homeless households who are excluded by HUD's current definition, such as homeless families and individuals living doubled up. It would reduce problems that service providers currently experience with dual definitions, such as being able to obtain McKinney education funded tutoring for homeless children in a doubled-up family but not being able to help that family to find stable and secure housing with HUD McKinney funds. It would also help homeless youth who may be selling their bodies in return for housing each night.

While we are well aware that current programs are woefully oversubscribed, we believe the best way to address this problem is through increasing resources and giving communities more discretion in how and when to serve people. Instead of forcing communities to wait for people to enter shelter or live on the streets, communities should be allowed to stabilize homeless individuals and families more quickly.

The Senate legislation, S. 1518, recognizes the need to expand beyond HUD's definition and expands the definition somewhat. However, we are concerned about the Senate definition because it requires persons in the new categories to have moved several times in order to meet the definition. We are concerned this encourages instability.

B. Authorization level

The HEARTH Act would provide an authorization level of $2.5 billion and the Senate bill would provide $2.2 billion. While these amounts will not be enough to end homelessness, we believe it is a step in the right direction. Current funding levels are inadequate to meet the need. According to HUD's 2007 Annual Homeless Assessment Report to Congress, approximately 45% of the population considered homeless by HUD is unsheltered. In order to give cities and states the resources they need to address homelessness, we must significantly increase funding for the HUD McKinney programs.

C. Renewal Funding

One important provision in the Senate bill not currently in HEARTH would provide for the renewals of HUD McKinney permanent housing projects from the Housing Choice Voucher program. We would like to see this provision included in the House bill. Currently, renewal funding for the McKinney-Vento Section 8 Single Room Occupancy (SRO) Moderate Rehabilitation Program comes from the Housing Choice Voucher Program. This provides a steady revenue stream for nonprofits to use to pay back financing used for rehabilitation. By creating a secure source of funding for housing rehabilitation, it enables nonprofits to more easily obtain financing for the rehabilitation.

As the Committee consolidates the three competitive programs, I urge the Subcommittee to shift renewals of all McKinney-Vento funded permanent housing projects over to the Housing Choice Voucher program. This would provide a more secure funding stream, allowing nonprofits to obtain financing more easily and on better terms. Additionally, it would recognize that persons in permanent housing are no longer homeless and thus renewal funding should come from mainstream housing assistance programs. The Committee should also ensure such renewals do not displace other vouchers and authorize additional funding for this purpose.

D. Codification of Continuum of Care process and ensuring inclusion of key stakeholders

H.R. 840 would codify the Continuum of Care planning process and guarantee key stakeholders an opportunity to participate in a meaningful way in the planning process. It would require Community Homeless Assistance Planning Boards (CHAPBs) to include homeless persons, as well as advocates and service providers. We strongly believe it is necessary to require communities to ensure homeless persons and their advocates have a seat at the planning table, in order to ensure the most effective plan possible.

We believe it is important to give communities more flexibility to determine what housing and services to provide and to whom, rather than providing proscriptive set-asides. However, communities should be required to consider the needs of all homeless populations. To ensure hard-to-serve populations are not overlooked, the Committee could establish a presumption that plans that provide no resources to individuals with disabilities have not adequately considered the needs unless the CHAPBs can document there are no homeless individuals with disabilities in the relevant jurisdiction.

E. Discouraging cities from criminalizing homelessness

A growing number of cities are enacting or enforcing ordinances or policies that penalize homeless persons for engaging in necessary, life-sustaining activities in public spaces even when they have nowhere else to go. These ordinances include

anti-sleeping, anti-sitting, and anti-camping ordinances. More recently, we have seen an increasing number of ordinances prohibiting public feeding as well, even though mobile soup kitchens are the only daily source of food for some homeless persons.

In most cities, there are not enough shelter beds to meet the need, and homeless persons have no choice but to be in public spaces. Unsheltered persons are the most vulnerable to these types of ordinances.

These ordinances and actions criminalize the condition of homelessness and are harmful to the goals of the McKinney Act. For example, such ordinances and policies hinder the movement of persons out of homelessness by:

- Creating unnecessary arrest records;
- Requiring fines that homeless persons are unable to pay and resulting in bench warrants for the arrest of those persons; and
- Driving homeless persons away from services intended to address their homelessness.

These ordinances are also expensive. The costs of incarceration can exceed the costs of providing housing and services. For example, a study by the Lewin Group found the average cost of jail in nine major cities ranged from $45.84 per day to $164.57 per day, while the average cost of supportive housing ranged from $20.54 per day to $42.10 per day.[1]

The HEARTH Act would require HUD to consider the extent to which cities penalize homeless status as one of the award criteria for grants. We strongly support this and believe it will encourage cities to adopt more constructive alternatives, such as Housing First models, to address homelessness.

HEARTH also requires HUD to educate local governments regarding best practices, and we encourage the Subcommittee to direct HUD to include alternatives to criminalization in its best practices models.

Conclusion

Thank you again for this opportunity to testify. I look forward to working with you to secure passage of a bill to reauthorize and strengthen the HUD McKinney-Vento programs and to move towards the elimination of homelessness in the United States.

[1] Lewin Group, *Costs of Serving Homeless Individuals in Nine Cities*. Prepared for the The Partnership to End Long-Term Homelessness. (November 19, 2004).

State of Connecticut
SENATE
STATE CAPITOL
HARTFORD, CONNECTICUT 06106-1591

SENATOR JOHN McKINNEY
TWENTY-EIGHTH DISTRICT

LEGISLATIVE OFFICE BUILDING
SUITE 3400
HARTFORD, CONNECTICUT 06106-1591
CAPITOL: (860) 240-8800
TOLL FREE: 1-800-842-1421
FAX: (860) 240-8308
EMAIL: John.McKinney@cga.ct.gov

SENATE MINORITY LEADER

RANKING MEMBER
ENVIRONMENT COMMITTEE
TRANSPORTATION COMMITTEE
SELECT COMMITTEE ON HOUSING

MEMBER
APPROPRIATIONS COMMITTEE
EXECUTIVE AND LEGISLATIVE NOMINATIONS COMMITTEE

Testimony of Connecticut State Senate Minority Leader John McKinney before the Subcommittee on Housing and Community Opportunity

Re: Reauthorization of the McKinney-Vento Homeless Assistance Act

U.S. House of Representatives
Committee on Financial Services

October 4, 2007

Chairwoman Waters, Ranking Member Capito, members of the Subcommittee on Housing and Community Opportunity: thank you for holding these hearings and thank you for allowing me to testify today in support of a bill and a cause that is dear to my heart. I would also like to make special mention of my congressman and friend, Chris Shays for his leadership on this issue, as well as my former colleague, Congressman Chris Murphy. Lastly, I want to thank Financial Services Committee chairman Frank for his steadfast leadership on our nation's housing issues.

My name is John McKinney and I am the Minority Leader of the Connecticut State Senate. I also serve as the Ranking Member of the Select Committee on Housing. Perhaps of more interest, I am the son of the late Congressman Stewart McKinney, who served as a Member of Congress from 1970 to 1987, and for whom the McKinney-Vento Homeless Assistance Act is named.

I am here today because I believe, as my father believed, and as I know all of you believe, that every American deserves and has a right to a roof over their head at night; to a home.

I am here today to ask you to reauthorize the McKinney-Vento Homeless Assistance Act and expand our federal government's role in the fight to end homelessness in America.

My father was among the earliest and staunchest advocates for the homeless. He watched with great concern in the early 1980s as a flawed and fragmented policy toward homelessness started to unravel. At the time, our country really didn't have a federal policy to deal with the problem of homelessness. As a nation, we thought then, that state and local governments were better equipped to address the issue. And we didn't really understand the underlying social and economic problems that were causing substantial growth in the homeless population.

Local and state resources funded soup kitchens, shelters and public service announcements. But, while these efforts helped people cope with *being* homeless, they rarely helped anyone *escape* homelessness. We were, in effect, treating the symptoms, but not the disease.

And so, while local and state efforts intensified, we made little progress and the numbers of homeless people continued to grow.

In 1986, my father helped craft and Congress ultimately passed legislation we now know as the McKinney-Vento Homeless Assistance Act. It was the first major coordinated federal response to homelessness in our nation's history. While it was a tremendous first step, it was just that: a first step. We were supposed to do more. Sadly, over the past 20 years since this law first passed, we have not followed through on the promise to do more to combat homelessness.

Reauthorization of the McKinney-Vento Homeless Assistance Act by this Congress will get us back on the right track and help fulfill the promises made two decades ago.

Over the past 20 years, the face of homelessness has changed. It is no longer only single men or the mentally ill who are sleeping on streets or inhabiting emergency shelters. Today, it is all too common to see mothers and their children – entire families – arrive at an emergency shelter in need of a place to sleep.

Another dramatic change has occurred over the last 20 years: we no longer need simply to manage homelessness, we can end it.

In my home state of Connecticut, we are doing just that – we are working to end homelessness, not just manage it.

Today we know that people who are homeless need a helping hand out of poverty and distress and <u>into</u> housing stability. One of the most promising solutions to achieve this is supportive housing. For many, the combination of affordability, together with support, is the right recipe for personal success.

In Connecticut, private and public funding is helping open doors to new housing opportunities and new hope. We are about 10 years into an effective supportive housing movement and we are seeing the impact it can make in the lives of children and adults.

Given adequate resources and time, some people who become homeless will find their way into a permanent home on their own. But for many, homelessness is intertwined with chronic health problems, lack of education, poverty, unemployment, or substance addictions.

These individuals and families can cycle in and out of homelessness for years, accessing services only in reaction to crisis situations, or not at all. They may return repeatedly to emergency shelters simply because they lack other resources to maintain a stable, permanent living situation.

In Connecticut, a point in time survey this past winter – the first coordinated statewide survey – found an estimated 3,325 households experienced homelessness on the night of January 30. Of those, 2,138 single adults and nearly 392 families with minor children resided in emergency shelters or transitional programs. Almost 40 families and more than 700 single adults were living on the streets, in parks, cars, transportation terminals and other locations not intended for human habitation.

In my hometown of Fairfield, an affluent suburb of 60,000 where the average price of a home exceeds $750,000, Operation Hope, a local nonprofit agency providing innovative solutions to homelessness reports that the number of people calling in need of shelter and housing has been rising steadily over the years. In just the last six months, 510 people called in need of immediate shelter, 89 others called in need of support services and were at-risk of homelessness. These are in addition to the hundreds served each month through various other housing and support programs.

On top of this current situation, sub-prime lending crisis has increased the number of families living on the edge of financial insecurity – just one medical emergency or interest rate hike away from losing their homes.

Connecticut is a leader in supportive housing. To date, there are 3,000 units of permanent supportive housing that have been created or are in the pipeline, and McKinney funding has been critically important to this development. State and local funds have been used to leverage federal dollars, including McKinney funding, to pay for supportive housing. Supportive housing's operating expenses (utilities, maintenance, insurance and property taxes) are also funded in part through McKinney funding that comes to local continuums of care across the state.

McKinney funding allocated by HUD is not enough. While in the late 1990s these funds sparked new development of supportive housing, today the funds only cover the expenses of keeping current housing open. Communities aren't getting a boost in funding to ensure the continued operation of current housing stock and to inspire new locally determined developments. While renewal grants are important (these housing programs rely on the HUD funding to ensure the affordability of these units), we need new funding to jumpstart the next phase of supportive housing development.

Let me give you an example from my hometown: Operation Hope used McKinney funding from HUD to open units for 6 families and 6 single adults between 1999 and 2001. These homes still receive HUD funding for operating and supportive services costs. But HUD funding is no longer available for future development. Operation Hope has had to develop the next 12 units without any HUD funding.

The model developed by Operation Hope—non-urban scattered site development—works well for communities and people who are homeless. Integrating supportive housing directly into thriving neighborhoods is the best way to help families who were once homeless in a way that will enrich the communities around them. This model is especially good for children who benefit from seeing their parents maintain their households and get up and go to work like everyone else in the neighborhood.

But we need new capital funding to spur future development. While the state has tried to pick up the slack, our current efforts, via a program called "Next Steps", is oversubscribed—there are many more developments proposed than there is money to cover.

In Connecticut, our goal is to end homelessness by 2014 through the creation of 10,000 units of supportive housing. We have 7,000 units to go. We need federal dollars, combined with state and local funds to make this a reality.

This is an important and fiscally smart investment of federal funds; it is an investment in a proven model—a better investment than the current emergency system consisting only of jails, emergency rooms and shelters.

Imagine if we could take the 89 people on the services waitlist at Operation Hope or the 510 people on the shelter list and immediately intervene with financial assistance and support to enable them to stay in their housing and prevent eviction. We could also help them learn to avoid this crisis in the future. Think of the consequences of that emergency aid - children would get to stay in their home, their school, their neighborhoods. Their parents would be less stressed, more steady, and thinking and planning for the future. Local agencies like Operation Hope can help these families, but the financial assistance piece is critical—no matter how much you provide emotional support, job coaching, budgeting assistance and the like—if you don't have the financial support, there's no ending the crisis.

For children, chronic homelessness can have a particularly devastating effect. The American Academy of Pediatrics has found that homeless children are more likely than other children to experience trauma-related injuries, developmental delays and chronic disease. Disruptions in education and the effects of living in stressful, chaotic environments can create permanent barriers to success. How wonderful it would be to prevent this from ever happening – and we know it can be done!

I want to share with you the story of a family moving into Jarvis Court supportive housing in Fairfield: a single mother with 2 young children, 6 and 9. She and her children became homeless when her husband abandoned the family and she could not afford to support them on her own. They lived in the family shelter at Operation Hope, and then moved into supportive housing. She suffers from depression--has worked hard with social workers to stabilize her health and to keep a steady job. Her children attend Fairfield schools, but unfortunately, her income is not enough to cover area market rate rents. Thanks to supportive housing, she has a stable home for herself and her kids. To quote this courageous woman, "My children and I have had no place to go. Operation Hope took us in. Every morning we prayed and asked God to help us find some place safe, clean and within our income, and this is exactly what we found at Operation Hope."

There are success stories like this all across our nation. With reauthorization of the McKinney Act, we will continue to change and improve the lives of millions of people.

In closing, let me touch upon 2 specific issues in the legislation before you.

First, regarding the permanent housing set-aside, Congress has long directed HUD to dedicate at least 30% of funds appropriated for permanent supportive housing. It would be a mistake to remove this set-aside. Legislation reauthorizing McKinney-Vento should codify the 30% set aside because supportive

housing has been highly successful in providing assistance to homeless individuals. Organizations like Operation Hope in Fairfield, Connecticut or St. Luke's Lifeworks in Stamford, Connecticut and organizations like them make incredible use of these funds. Maintaining the set-aside will help meet the critical needs of people, including those disabled by chronic health conditions or long term substance abuse problems. It will also help families with the greatest challenges to stability, who often are not receiving help from any other federal programs.

Second, I want to address the definition of "homeless," which some have proposed broadening to include individuals and families who are living in doubled-up situations and motels, among other circumstances. While it is certainly admirable to want to address all people who are in need, I am concerned this could lead to thinning of resources. Changing the definition could divert resources from those with disabilities who are least likely to seek help or fend for themselves if many more people are competing for the resources provided by the homeless assistance grants programs. I don't think any of us want to see the most troubled and sick homeless get pushed to the back of the line.

So, I call on this Congress to Reauthorize the McKinney-Vento Act. Do it in a generous and responsible way. And then don't stop there.

As Stewart McKinney did 20 years ago, campaign vigorously to end homelessness.

Help bring this issue back to the forefront of political discourse and American consciousness. Write letters, make phone calls, talk to your constituents, encourage volunteerism and philanthropy. Because, while federal funding is important, it is ultimately going to take a more personal commitment to end homelessness. It's ultimately up to people to make this plan work. People like you and I who see the importance of speaking out on this issue. People like those who volunteer their time at Operation HOPE, the Stewart B. McKinney Foundation, or any number of other organizations across this country dedicated to ending homelessness and improving people's lives.

Together, let's make this commitment and take the next step.

Thank you again for holding these hearings and for giving me the opportunity to testify.

Written Statement
of
Jeremy Rosen

Executive Director
National Policy and Advocacy Council on Homelessness

Testifying before the
Subcommittee on Housing and Community Opportunity
Committee on Financial Services
U.S. House of Representatives

October 4, 2007 Hearing on
Reauthorization of the McKinney-Vento Homeless Assistance Act

Introduction and Oral Statement:

Congresswoman Waters, thank you for your invitation to testify today, and for your strong leadership on affordable housing issues. Ranking Member Capito, thank you as well for your commitment to housing and homelessness issues, as you assume your new post. I would also like to thank two other members of this Subcommittee, Representatives Julia Carson and Geoff Davis, for their leadership in introducing H.R. 840 – the Homeless Assistance and Rapid Transition to Housing (HEARTH) Act of 2007. Let me also commend Representative Judy Biggert – for her commitment to ensuring that every homeless child and youth can attend school. And thank you as well to all of the Subcommittee members who have co-sponsored HEARTH.

I am Jeremy Rosen, Executive Director of the National Policy and Advocacy Council on Homelessness (NPACH). NPACH is a grass roots anti-poverty organization. Our mission is to ensure that national homelessness policy accurately reflects the needs and experiences of local communities. In this and other roles, I have spent the past nine years providing assistance to homeless persons – first through direct legal assistance and now by promoting comprehensive public policies to help end homelessness.

We will not end homelessness in the United States without a major commitment to the development and preservation of affordable housing that goes far beyond the current investment made by federal, state, and local governments. As an extremely small percentage of the current federal housing budget, HUD's homeless assistance grant programs were never designed to end homelessness in this country, and they are incapable of doing so. Nevertheless, it is our collective responsibility, in reauthorizing the McKinney-Vento Homeless Assistance Act, to design an effective and efficient program that provides a full range of housing and services to as many homeless children, youth, families, and single adults as possible.

We are not talking about "statistics" or "the homeless," but about people. They are young children, living with their mother in an emergency shelter, or youth who live on the streets after running away from abusive parents, or women hastily fleeing their homes, seeking an end to domestic violence. They are also single mentally ill adults who live on the streets, sometimes for a very long time, many of whom are veterans

Enacting the HEARTH Act is a critical first step in meeting our moral obligation to these Americans. HEARTH will consolidate and simplify HUD's homeless assistance grant programs, align HUD's definition of homelessness with the definition used by the U.S. Departments of Education and Justice, eliminate administratively created set-asides and incentives that hamper local efforts to prevent and end homelessness, better support rural communities, and provide new opportunities to fund homelessness prevention. This will give local service providers, advocates, and government officials – working together – with the flexibility they need to respond to homelessness as it appears in their urban, suburban, and rural communities.

Many different viewpoints will be expressed in the testimony at this hearing. Witnesses will say that HUD's current policies are working well across the country. We believe that they are not. Witnesses will also say that the Senate's approach to McKinney-Vento reauthorization would be more effective than HEARTH. The Senate approach will be described as a careful balance – crafted to ensure that limited funding is used to support the "most vulnerable" homeless persons. We disagree. While the Senate legislation represents an improvement on current HUD policy, we believe that the bill does not adequately meet the needs of America's homeless children, youth, single adults and families.

Finally, witnesses will say that we cannot afford HEARTH – that it will make too many people eligible for federal homeless assistance. This is not the case. In determining eligibility for federal programs, we must first adequately define the eligible population – in this case, the number of people in this country who do not have a home of their own. If resources are insufficient to serve all eligible people, we must strive to increase the available funds – and in the interim we must rely on people in local communities to make tough decisions about how to most effectively use the limited funding that they receive.

In short – how we define homelessness must not be influenced by the funding currently available for homeless assistance programs. Important social problems cannot be solved by merely defining them out of existence, as HUD has sought to do by declaring that the federal government is committed only to ending "chronic homelessness." This is an unacceptably modest goal.

The remainder of my statement will elaborate on these points – I ask that it be entered into the record. Thank you again for the opportunity to be here today. I look forward to answering questions from members of the Subcommittee.

Testimony:

NPACH works with homeless service providers, advocates, and government officials from around the country. We also work with groups representing youth, single adults, and families who are homeless. Through this work we have come to understand that homelessness looks different in every urban, suburban, or rural community in America. Some cities have a large street homeless population – in other localities there are more doubled up families. Still other communities may see large numbers of unaccompanied homeless youth. Just to add a layer of complexity, each community has a different capacity to respond to homelessness – one city might have a significant supply of housing for homeless families but no funding for supportive services, while another area might have almost no vacant units of affordable housing, but adequate supportive services funding.

Ultimately, this means that when reauthorizing HUD's McKinney-Vento Homeless Assistance Grant programs, Congress must codify a comprehensive and flexible approach to homelessness that allows communities to effectively use federal funds to meet their most pressing local needs. HUD's role should not be to use set-asides, bonuses, and incentives to force communities into a one size fits all approach that focuses on ending "chronic" homelessness – even in communities where a gaps analysis shows that this is not the most pressing local need. Compared to HUD's current approach and to the approach contemplated under S. 1518, currently pending in the Senate, H.R. 840 – the HEARTH Act – presents such a flexible framework; we recommend strongly that that the House adopt it. In the remainder of my statement, I will outline key issues for reauthorization, and discuss why HEARTH provides our best hope for resolving them.

Ending Homelessness:

Before commenting on specific legislative proposals, it is important to state a fundamental truth that

in America. This is an especially worrisome suggestion when one considers that, as a share of the federal budget, McKinney-Vento funding has declined by 28 percent since 1995.

Most people who become homeless do so because of the failure of federal and state "mainstream" programs or systems of care to meet their needs. These "mainstream" programs and systems can be defined as interventions designed to assist all low income Americans – not just persons experiencing homelessness. Funding for these programs, while wholly insufficient, is far greater than funding for HUD's homeless assistance programs. To truly end homelessness in this country, we must ensure that "mainstream" programs keep low income children, youth, and families stably housed, fed, insured, and employed or in school.

In recent years, we have discovered just how "mainstream" programs can contribute directly to homelessness. Here are some examples. When funding for Section 8 and other affordable housing programs is reduced, and affordability requirements on other housing units are allowed to expire, individuals and families will not find alternative affordable housing in their communities, and many will become homeless. When eligible low-income persons are incorrectly denied Temporary Assistance for Needy Families (TANF) "welfare" or Supplemental Security Income (SSI) disability benefits, they lose their ability to afford housing, and many will become homeless. When people are discharged from mental health or substance abuse treatment facilities, jails, prisons, or foster care, and no provisions are made to ensure that they receive appropriate housing and healthcare, many of them will become homeless. And when people cannot access mental health or substance abuse treatment, they lose jobs and other social supports. Many of these people will become homeless.

Unfortunately, none of these statements are hypothetical. Over the past 20 years, we have repeatedly seen funding cuts for affordable housing programs, incorrect denials of eligibility for public assistance, lack of discharge planning, and inability to access community based services – and these failures of "mainstream" programs have directly resulted in homelessness.

Ensuring access to public benefits and treatment, and ensuring adequate discharge planning, is costly and complicated – there is no question about it. However, the moral and economic cost of not doing

prevent it, and preventing homelessness must be our primary social objective – so no individual or family spends time on the street or in emergency shelter.

We can offer several recommendations in this area. Consistent with HUD's *FY 2006-2011 Strategic Plan* measure to "carefully scrutinize the policies of its mainstream housing programs to determine whether additional mainstream housing resources can be brought to bear," permanent housing solutions should be pursued through increases in Section 8, public housing, CDBG, HOME, Section 202, Section 811, and HOPWA programs as well as increases in housing production for households living at or below the federal poverty line, rather than supportive housing set-asides placed on HUD McKinney-Vento programs. We appreciate the Subcommittee's effort to begin this process – particularly efforts to enact H.R. 2895, the National Affordable Housing Trust Fund Act of 2007.

Ending Long-Term Homelessness:

Among the reasons that passing a prompt reauthorization of the McKinney-Vento Act is critical is that it will ensure that Congress makes important decisions about the structure and emphasis of federal homeless programs. Over the past thirteen years, lack of input from Congress has led to HUD dramatically overstepping its bounds, and making significant policy changes through the annual Notice of Funding Availability (NOFA) process. This un-democratic approach has essentially been "legislation by NOFA." Compounding this problem, HUD has made poor policy choices, seeking to turn a set of programs meant to meet the emergency, transitional, and permanent housing needs of a broad range of individuals and families into a narrowly tailored group of programs focusing on providing permanent housing for a small number of homeless individuals, with less and less money available to meet the needs of the majority of the homeless population.

In making these comments, we refer specifically to HUD's initiative to end "chronic" homelessness. Note that rather than using the term "chronic" homelessness, we prefer "long-term" homelessness – using the term "chronic" to describe a homeless individual unnecessarily pathologizes people who are simply without housing.

We could not be more supportive of any sincere initiative to end homelessness for people living on the streets of this country. It is unarguably wrong that, in the world's richest nation, we have even one man, woman, or child who must sleep on the streets – without a roof over his or her head. That said, it could not be more cynical for the Administration to have sought cuts to HUD's overall housing budget – including the budget for Section 811 permanent housing for persons with disabilities – while declaring a goal of ending long-term street homelessness for individuals with disabilities. Unfortunately, homeless persons living in emergency shelter and transitional housing have paid the price for these policies of contradiction, as HUD has taken resources that were keeping people off of the streets and devoted them to people who were already on the streets. As a result, different groups of vulnerable homeless persons have been pitted against one another – one group deservedly seeking new housing, and the other rightfully seeking to preserve the housing they already had.

In 2001, HUD Secretary Mel Martinez had the opportunity to commit the Administration to a bold goal – ending homelessness in the United States. Instead he made a significant but dramatically less impressive pledge - to end "long-term" homelessness in ten years. HUD defined the "long-term" homeless population as single adults, with disabilities, who had either lived on the street for more than one year, or on at least four occasions over a period of 3 years. And HUD determined that the size of this population was approximately 150,000 – and that each "long-term" homeless person would need a unit of permanent supportive housing – housing with no length of stay requirement, coupled with intensive supportive services.

Regrettably, from the beginning of the Administration, HUD's signature homelessness initiative excluded children, youth, and families – even families where the head of household would have met the "long-term" homelessness definition, except that he or she was living with one or more children. It is hard to understand how having a child can make a single adult <u>less</u> worthy of obtaining permanent housing.

Quickly, additional consequences of the "long-term" homeless initiative became clear. Immediately, HUD and the U.S. Interagency Council on Homelessness began urging local communities to begin planning activities. One might expect that communities would have been urged to prepare plans to end homelessness for everyone, with ending "long-term" homelessness as one strategy. But this was not

instead were only asked to plan for ending "long-term" homelessness. While some enlightened jurisdictions prepared more comprehensive plans, all too many cities, counties, and states followed the Administration's narrow directives. Again, HUD ignored the needs of homeless children, youth, and families.

Over the next several years, HUD unveiled the centerpiece of the "long-term" homeless initiative – significant financial incentives that have resulted in the widespread de-funding of programs serving homeless children, youth, and families – even in communities which had no desire to take money away from those populations, and had little to no "long term" homelessness. Starting in the late 1990's, with Congressional approval, HUD began setting aside 30% of homeless assistance grant funds for permanent housing targeted to disabled individuals and families with disabled heads of household. No duration of homelessness was required to qualify for this housing.

Under the "long-term" homeless initiative, bonus and incentive funds from this 30% pot were targeted to any community that would prioritize "long term" homelessness. In addition, grant scoring criteria were changed so that communities not prioritizing "long-term" homelessness would be less competitive in applying for funds. With overall affordable housing funding flat or declining, no community could afford to turn down bonus funds. As a result, cities, suburbs, and rural areas began to use significant amounts of their homeless assistance grant funding for permanent supportive housing to provide additional assistance for the "long-term" homeless population. However, homeless assistance grant funding did not increase to pay for this new housing. The money had to come from somewhere, and it did – it came from existing programs providing emergency and transitional housing, and supportive services.

Even communities where street homelessness was not prevalent, or communities that had significant other needs, were forced to focus funding on HUD's rigid permanent supportive housing priority. And as funding shifted towards permanent housing, the annual renewal burden – the amount of funds necessary to renew all of the rent subsidies for permanent housing units – began to grow more and more quickly. As a result, we are in a situation where, if action is not taken soon, HUD's Homeless Assistance Grant program funds will be completely consumed by renewal funding for existing projects. At that point, HUD will be unable to fund any new programs to assist homeless persons. And as this shift has been

So, let us now assess progress – more than six years after the initiative to end "long-term" homelessness in ten years began. In our view, the initiative has failed. There is no question that a significant number of very hard to serve people have left the streets for permanent supportive housing. This is a positive outcome. Unfortunately, the overall number of people housed has been difficult to quantify. HUD and the U.S. Interagency Council on Homelessness periodically release selective data from specific cities, but no comprehensive assessment has been provided. And when city-by-city data has been made publicly available, in many cases the data does not match reports from local homeless coalitions and service providers.

But one thing is clear – more than halfway through this ten year initiative – "long-term" homelessness has not declined. In fact, it may even have increased. In 2000, the National Alliance to End Homelessness stated that approximately 150,000 people met this definition. More recently, estimates have ranged as high as 200,000. We do know this - no advocacy organization or federal government agency can report an overall decline in "long-term" homelessness. This is because, for every person who is moved off the streets and housed, another person arrives on the street, stays there for an extended time, and becomes a part of the "long-term" homeless population. We are bailing water from a leaky boat. However, because the Administration has chosen to fund much of their initiative by shifting homeless assistance grant money rather than providing new funds, water is entering the boat as fast as we can remove it.

Just ask homeless persons, advocates, service providers, and local government officials in New York City. Two years after their "long-term" homeless initiative began, New York City reported a record number of homeless families. Or ask homeless persons in Philadelphia, Pittsburgh, and Louisville – all cities who lost millions of dollars in HUD homeless assistance because they failed to prioritize permanent supportive housing to the degree that HUD desired. For that matter, ask people in Columbus, Ohio – a model city for success in ending "long-term" homelessness. Columbus lost funding even though the local Continuum of Care sought to prioritize "long-term" homelessness. Why? Because the Continuum was so successful in obtaining new housing units from outside the homeless assistance grant programs, that they decided to ask HUD for supportive services funding. But because of HUD's rigid permanent housing

If we have been unable to reduce "long-term" homelessness for over six years, it seems unlikely that we will end it in the next four years. We must continue our efforts to move people from the streets to permanent housing, but new approaches are needed – approaches that focus on the use of mainstream federal housing funds, not limited homeless assistance dollars. For example, NPACH and other organizations have pushed this year for 7,500 new Section 8 vouchers for disabled homeless veterans. We are hopeful that when FY 2008 appropriations are finalized, these funds will be included. These 7,500 vouchers, coupled with new supportive services dollars from the VA, will end homelessness without taking money away from existing homeless assistance programs.

HEARTH and S. 1518 address the "long-term" homelessness initiative in different ways. S. 1518 codifies for the first time the rigid definition of "long-term" homelessness. Families with a disabled head of household would be included (an improvement over current HUD practice), but this makes the definition no less arbitrary - for example, families where a child, not an adult, has a disability still would be excluded. In addition, S. 1518 would authorize the HUD Secretary to continue the damaging incentives and bonuses which have driven the "long-term" homeless initiative. Finally, S. 1518 would write the 30% set-aside for permanent housing for persons with disabilities into law through the authorization process – currently this language becomes law every year only because it is tucked onto one page of the annual appropriations legislation that funds HUD – a location that does not lend itself to appropriate Congressional scrutiny.

We must strongly oppose making these provisions a part of federal law. A failed experiment ought not to be institutionalized. Instead, we support the approach taken in HEARTH. HEARTH requires communities to prepare a comprehensive analysis of local service gaps. Communities would then apply for funding to meet their most pressing needs. HUD would oversee this process, ensuring that local communities were in fact seeking funds to address their most severe needs. In communities where significant percentages of the homeless population is living on the street, a large percentage of funding could continue to flow towards reducing street homelessness – without people having to stay on the streets for a year, waiting to become eligible for housing. And in rural communities where few people live on the streets, resources could be focused on youth, families, or victims of domestic violence.

We do support one provision from S. 1518 which is not contained in HEARTH – a provision that would renew permanent housing grants funded initially through the homeless assistance grant programs from the Section 8 funding account. This provision offers the potential to relieve the crippling burden of permanent housing renewals, allowing funds to go for new housing and services interventions. It is our expectation and belief that supporters of HEARTH would be in favor of adding this key provision, and we will work with the Subcommittee to help ensure that this occurs.

Aligning HUD's Definition of Homelessness With That Used By Other Federal Agencies:

HUD's current definition of homelessness, adopted twenty years ago and not amended since that time, is largely limited to people who are on the streets or living in emergency shelters. This definition excludes people who are forced to live in other homeless situations, including people staying with others ("doubled-up") or staying in motels because they have nowhere else to go. Children, youth, and families are disproportionately impacted by this exclusion. To address these concerns, HUD's definition of homelessness must be updated to include people living in doubled up situations or in motels due to an inability to afford adequate alternative housing.

This would better align the HUD definition with the definitions of homelessness used by the U.S. Departments of Education, Health and Human Services, and Justice. The definition of homelessness contained in the education subtitle of the McKinney-Vento Act includes children and youth who are sharing the housing of others due to loss of housing, economic hardship, or similar reasons, and those children and youth in motels. The Violence Against Women Act, signed into law in January 2006, now incorporates the education definition. And homeless assistance programs administered by HHS (Head Start, Health Care for the Homeless, the Treatment for Homeless Program) have adopted regulations that define homelessness more broadly than the HUD definition. The current HUD definition of homelessness may have been appropriate twenty years ago, but it does not adequately protect people who are without homes in 2007.

These more recent federal definitions better respond to the reality of homelessness among families and youth. In many communities across the country, there are no shelters, shelters are full, or shelters do

addition, the streets are untenable for families who lose their housing, because living on the streets puts children at unthinkable risk – it means child welfare involvement and family separation. Due to the lack of other options, many homeless families end up staying temporarily with other people, or in motels. Youth on their own are also more likely to "couch surf" than to live outdoors.

Doubled-up and motel situations are damaging. They are crowded and unstable, making it difficult for parents to work and children to attend school. These living situations can also be unsafe. And in the case of doubling up they create specific child welfare concerns, when children continuously stay with strangers. Plus, there are few services for families and youth living doubled up or in motels. Finally, because battered women's shelters nationwide turn away nearly as many women as they serve, victims of domestic violence and their children often have no other option but to live doubled-up, which exposes them to greater risks of returning to an abusive situation or being found by an abuser.

HEARTH includes the amended definition of homelessness that we recommend. This will allow communities, especially exurban and rural areas without shelters, to serve the people who are without homes within their borders. And it will accurately define homelessness to cover everyone who is without a home of their own due to an inability to afford safe and adequate housing.

While we strongly support funding increases for federal homeless assistance programs, accurately capturing the number of people who are homeless in this country unfortunately does not guarantee that result - homeless assistance is not an entitlement like food stamps or Medicaid. Instead, the homeless assistance budget is set through the appropriations process. However, we strongly believe that efforts to include all people without homes in the definition of homelessness are helping to build the political will for funding increases - by making it clear that homelessness is not just a problem for large cities. As we demonstrate to Members of Congress that significant homelessness exists in the suburban and rural communities they represent, many legislators who had not devoted significant time to this issue are becoming supporters of the policy changes and appropriations increases proposed under HEARTH.

Ultimately, however, the number of homeless people in this country cannot be tied to the level of funding for homeless assistance programs – homelessness exists, whether or not the federal government

yet the agency's definition of homelessness was recently expanded to accurately reflect what local communities were reporting. Similarly, schools do not have infinite homeless assistance funding, but the McKinney-Vento education program is committed to serving everyone who is homeless.

We cannot afford to turn our backs on these children and youth, particularly if we look at the long term costs to society: today's homeless children and youth are at high risk of becoming tomorrow's homeless adults. If we do not make policies that are responsive to their needs, we will be perpetuating homelessness indefinitely.

Unfortunately, S. 1518 abandons many of these vulnerable young people. The bill acknowledges a need to expand HUD's current definition of homelessness to include people who are doubled up or living in motels, but it limits that expansion in unacceptable ways. For a doubled up family to be covered, the family would have to be told by the host that they can only stay with them for a short time, and be unable to contribute significantly to the cost of the host's rent. In addition, the family would be required to have moved twice during a 21 day period or three times over the course of a year. For a family living in a motel to be covered, the family would have to establish that they can only afford the motel for a short time, and again that they have moved twice during a 21 day period or three times over the course of a year.

Proponents of this provision argue that basing eligibility for assistance on how many times an individual or family has moved will focus resources on people who are most in need. We do not agree. Moving once into a dangerous or abusive situation, for example, could be far more damaging to a family than moving three times in quick succession. Arbitrary eligibility criteria that allow no flexibility to meet individual circumstances have no place in federal statute. On the other hand, the HEARTH definition would allow local providers to make individualized assessments of which doubled up or motel families were most in need – and to quickly and effectively provide them with assistance.

Homelessness in Rural America:

As many of my colleagues have carefully documented in their written testimony, homelessness is a significant problem in rural America. Both HEARTH and S. 1518 seek to address rural concerns. We

S. 1518 would set up a new rural homelessness program, amending an existing piece of the McKinney-Vento statute that has never been funded or implemented by HUD. We are pleased that the Senate bill is focusing attention on rural concerns. However, that attention is focused too much on program administration, and not enough on distribution of program funds.

The two most significant barriers to serving people who are homeless in rural communities are HUD's existing definition of homelessness and HUD's implementation of the "long-term" homeless initiative. As we have discussed in detail above, S. 1518 does not significantly amend the definition of homelessness, and it would perpetuate and codify the "long-term" homeless initiative. In contrast, HEARTH amends the HUD definition of homelessness so that people who are without homes in rural communities would be covered, eliminates unsuccessful set-asides and bonuses, and provides significant local flexibility in the use of federal funds. For those reasons, HEARTH is the better bill for rural America.

Homelessness Prevention:

As we have discussed above, federal, state, and local mainstream programs must do a better job of preventing homelessness. However, we also believe (as do all of our colleagues testifying today) that a portion of homeless assistance grant funding should be spent on homelessness prevention. Both HEARTH and S. 1518 seek to codify this approach. Because HEARTH allows greater local flexibility in using funds for homelessness prevention, without putting at risk funds for street outreach and emergency shelter, we prefer the approach taken in the House legislation.

Under current law, the "Emergency Shelter Grant (ESG)" program block grants 15% of federal homeless assistance funds to local communities. Up to 30% of these funds can be used for homelessness prevention, with the rest going to emergency shelter and street outreach. HEARTH would continue this approach, while lifting the 30% cap on prevention. The legislation permits jurisdictions to spend more of their block grant funds on prevention, without requiring it. HEARTH also makes prevention an eligible use of funds under the "competitive" portion of homeless assistance funding. Because HEARTH broadens HUD's definition of homelessness, the bill would allow local communities to serve the full range of people who need

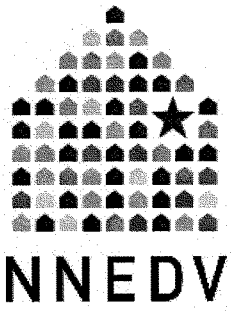
In contrast, S. 1518 renames the current "Emergency Shelter Grant" program the "Emergency Solutions Grant" program, boosting block grant funding to 20% of federal homeless assistance funds. However, many of the individuals and families who could be served under HEARTH would not be served under S. 1518. This is because S. 1518 targets eligibility for prevention funds to individuals and families considered homeless under the bill's narrow expansion of current law, plus individuals and families considered "at risk" of homelessness- a newly defined population that requires people to meet several criteria, including being at or below 20% of area median income. This standard is likely to exclude many people who are truly in need of help. In addition, S. 1518 imposes a new requirement on local communities – beginning two years after enactment of the legislation, ESG grantees would not be allowed to spend more than 60% of total block grant funding on emergency shelter or street outreach. This could force communities to de-fund successful existing programs that provide emergency shelter or street outreach. Finally, S. 1518 does not make prevention an eligible use of funds in the "competitive" homeless assistance program, thus restricting local flexibility.

Community Participation:

Because homelessness looks different in every community, we strongly believe that decisions about how to allocate homeless assistance funds should be made at the local level. However, we also believe that – in order to ensure that communities make wise decisions – it is appropriate for HUD to ensure that all key stakeholders are at the table when decisions are being made. As many of our colleagues have indicated in their own written statements, too many local Continuums of Care have had a history of excluding certain groups, including homeless persons, homeless education liaisons, and service providers assisting homeless youth, homeless victims of domestic violence, and homeless veterans. We also support HUD's review of local funding decisions to ensure that they are congruent with the gaps and needs analysis that communities must produce. And finally, we think that communities seeking funds to assist homeless persons should certify that they are not taking counter-productive steps such as "criminalizing" homelessness or making it more difficult for homeless children and youth to exercise their civil right to

these key provisions. Because the HEARTH Act best codifies a "Continuum of Care" that reflects our values, we support the House-proposed framework for community participation.

Thank you again for your invitation to testify today. We look forward to working closely with the Subcommittee to approve the HEARTH Act.



The Testimony of

Ms. Jessica Vasquez, Esq.

Executive Director of
The New York State Coalition Against Domestic Violence

Member of the Board of Directors of
The National Network to End Domestic Violence

Before the Committee on Financial Services,
Subcommittee on Housing and Community Opportunity

United States House of Representatives

Reauthorization of the McKinney-Vento Homeless Assistance Act

October 4, 2007

Introduction

Chairwoman Waters, Ranking Member Capito, Chairman Frank, Ranking Member Bachus, and distinguished members of the Committee, my name is Jessica Vasquez and I thank you for the opportunity to appear before the Committee to address the Committee's concerns about homelessness in this country and the reauthorization of the McKinney-Vento Homeless Assistance Act. As an advocate for victims of domestic violence, I am honored to address Members of Congress with such an outstanding record of work on behalf of victims and their families. Chairwoman Waters is an outspoken advocate for women and children since her days in the California State Assembly and has worked to address domestic violence as a member of the Judiciary Committee, including co-sponsoring the Violence Against Women Act of 2005. Ranking Member Capito is also a close friend and ally of domestic violence advocates, having led efforts to reauthorize the Violence Against Women Act in the 109th Congress and advocating for critical increases in funding for VAWA, particularly programs addressing the needs of rural communities. Chairman Frank and Ranking Member Bachus championed the needs of victims and their families, particularly through their efforts to address the housing needs of victims through the Housing Title of VAWA. The Committee is taking remarkable leadership by seriously considering the complex issues that cause homelessness and the best strategies for ending it. It means so much to victims of domestic violence and sexual assault that you are carefully considering all aspects of homelessness in the reauthorization of the McKinney-Vento Homeless Assistance Act.

I speak this morning on behalf of two organizations, both the New York State Coalition Against Domestic Violence and the National Network to End Domestic Violence. Per the Committee's request, my resume is attached at the end of this testimony. Founded over 29 years ago, the New York State Coalition Against Domestic Violence (Coalition) is a not-for-profit membership organization representing all licensed residential and non-residential programs and other allies in the state. Our mission is to eradicate domestic

violence and to ensure the provision of effective and appropriate services to victims of domestic violence through community outreach, education, training, technical assistance and policy development. The National Network to End Domestic Violence (NNEDV) is a not-for-profit social change organization representing the 53 state domestic violence coalitions, including NYSCADV. Founded in 1995, NNEDV is dedicated to creating a social, political, and economic environment in which violence against women no longer exists. NNEDV's membership of domestic violence coalitions represents over 3,000 domestic violence service providers across the country, as well as the 1.5 million women who are victims of domestic violence every year.[1]

Recommendations for Reauthorizing McKinney Vento – Support H.R. 840

NYSCADV, NNEDV, and domestic violence service providers across the country support H.R. 840, the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH) because it returns control to local communities and works for homeless families. It helps both urban and rural areas by expanding the definition of homelessness and eliminating bonus points and set-asides. It also maintains confidentiality protections for victims of domestic and sexual violence. We thank Congresswoman Carson and Congressman Davis for their leadership in introducing the bill, and the 77 other cosponsors of the HEARTH Act. This is a piece of legislation that will truly help us end homelessness, as well as reduce domestic violence by giving victims safe shelter and housing options.

Domestic Violence is a Primary Cause of Homelessness

The interrelated nature of domestic violence and homelessness is undeniable: 92% of homeless women have experienced severe physical or sexual abuse at some point in their lives, and 63% have been victims of intimate partner violence as adults.[2] This is not because homeless women are more likely to be victims of domestic violence, but rather because experiencing domestic violence or sexual assault often forces women and children into homelessness. One study found that 38% of all victims of domestic

violence become homeless at some point in their lives,[3] while another found that 50% of all homeless women and children are so because of domestic violence.[4]

Victims of domestic violence struggle to find permanent housing after fleeing abusive relationships. Many have left in the middle of the night with nothing but the clothes on their backs, and now must entirely rebuild their lives. As long-term housing options become scarcer, battered women are staying longer in emergency domestic violence shelters. As a result, shelters are frequently full and must turn families away. This can cause disastrous and deadly consequences: in 2005, 29% of the requests for shelter by homeless families went unmet due to the lack of emergency shelter beds available.[5] The National Census of Domestic Violence Services found that in one 24-hour period 1,740 requests for emergency shelter and 1,422 requests for transitional housing went unmet due to lack of resources.[6]

Nationwide, the number of families in need of housing is greater than ever: requests for emergency shelter by homeless families with children increased in 56% of U.S. cities surveyed in 2005, with 87% of cities reporting an increase in the number of children in emergency shelter.[7] Because of this lack of resources and increase in needs, victims of domestic violence often have no choice but to return to their abusers or be forced into homelessness.[8]

Children and youth who flee violent homes with their abused parent, and become homeless as a result, face many barriers. In addition, many young people become homeless to escape abuse in the home, particularly sexual abuse, and find few resources once they have left. These children and young people who flee violent homes are at heightened risk for emotional and behavioral problems.[9] They are more likely than their peers to experience or participate in emotional or physical abuse themselves.[10] These effects can have a pronounced impact on children's performance in school, including their ability to learn and their concentration levels.[11]

Because so many women and children become homeless as a result of domestic violence, it is impossible to separate the two issues into distinct categories. To advocate for victims of domestic violence, we must advocate for all homeless individuals and families. If we do not address domestic violence, women and families will be forced into homelessness and children will continue to grow up in fear and poverty, likely to repeat the cycles of homelessness.

A recent tragic story illustrates this point. In Boston, Massachusetts this winter, a woman fled from her abuser. The domestic violence shelters were full. We do not know if local homeless shelters were full or if the woman didn't consider them a viable option. Regardless, she apparently had no where else to go, and she was living on the street. Two weeks after she had left her abuser, she was found frozen to death. It had been the coldest night of the year. In conducting the state's domestic violence fatality review, a local police officer recounted the story. Should he count her death as due to domestic violence or homelessness, he wondered? But we know such questions are irrelevant – as long as domestic violence exists, women and children will be forced to flee their unsafe homes and will desperately need shelter, housing and services. All homeless people are equally deserving of resources to prevent them from dying in the streets.

McKinney-Vento Funding for Domestic Violence Programs in Recent Years

The McKinney-Vento Homeless Assistance Act has provided significant funding for domestic violence shelters, transitional housing programs, and services. According to U.S. Department of Housing and Urban Development (HUD) Secretary Alphonso Jackson, in the 2005 Continuum of Care Homeless Assistance Program competition, 663 projects that identified domestic violence victims as the primary target population to be served were awarded nearly $118 million to provide housing and services for this vulnerable group. An additional 2,934 projects anticipated providing housing and services to victims of domestic violence, even though this group was not the primary target population for the projects. Indeed,

domestic violence service providers rely on McKinney-Vento funds to provide transitional housing and emergency shelter to victims of domestic violence. McKinney-Vento is often the primary source of funding for transitional housing, which is a particularly critical service for victims of domestic violence who need assistance to rebuild their lives and secure permanent housing.

Impact of Current HUD Practices

Unfortunately, HUD's practice in recent years has caused a range of problems for victims of domestic violence and their children. Due to HUD's chronic homeless* initiative and prioritization of permanent supportive housing for single individuals with disabilities, local domestic violence programs in at least 23 states, including programs in New York, have lost funding or are being told they will lose funding in the future. Additional programs have lost funding as a result of confusion about implementation of the Homeless Management and Information System (HMIS).

State domestic violence coalitions and local service providers noted specific problems resulting from the chronic homeless initiative and restrictive definitions, including HUD shifting dollars from services to capital costs, priority within the Continuum of Care being giving to programs serving primarily (or exclusively) chronically homeless individuals, the Continuum of Care losing overall funding because it had not sufficiently prioritized chronic homelessness, and pressure to convert domestic violence programs into programs for chronically homeless individuals. This year, NNEDV saw a dramatic increase in calls for assistance on this issue, and expects the situation to worsen significantly next year as 10 Year Plans to End Chronic Homelessness are implemented across the country. As Turning Lives Around in Hazelton,

---

* To qualify as chronically homeless a person must be a single adult, with a qualifying disability, who has been continuously homeless for more than a year or homeless on at least four occasions in a three year period. By definition this excludes most victims of domestic violence, all families, and all youth and children.

New Jersey reported, "We have been told that chronic homelessness or permanent housing are HUD's priority and as a result are very concerned that we may lose funding in the near future."

Additional programs reported being threatened with losing funds if they did not provide identifying details to HMIS – despite statutory language prohibiting domestic violence programs from providing such details. For instance, The Self-Help Center in Wyoming was told they would not get funding unless they participated in HMIS, which in their Continuum of Care includes submitting social security numbers for all individuals receiving services. This practice exposes domestic violence victims who seek services through HUD-funded shelters to incredible danger when they are most in need of safety.

It should also be noted that NNEDV has surveyed exclusively domestic violence programs on this issue. We know from experience in New York and across the country, however, that victims often rely on emergency and transitional services from broader programs serving all homeless women and families. It is our understanding that, in general, those programs have fared worse. Domestic violence programs often have more financial support from the community than homeless shelters. As a result, those emergency and transitional services that helped families, but not exclusively victims of domestic violence, have experienced more severe cuts over the last few years.

States reporting funding problems include Alabama, California, Connecticut, Florida, Idaho, Illinois, Maryland, Massachusetts, Michigan, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Dakota, Texas, Vermont, Washington, Wisconsin, and Wyoming. Below are quotes from a few local programs:

Alabama:

> *"The domestic violence program in Montgomery, Alabama, does receive Emergency Shelter Grants (ESG) and Supportive Housing Program (SHP) funds. With so much money being diverted to chronically homeless we are getting squeezed to the bottom of*

the priority list because we provide transitional housing and our domestic violence population does not meet the definition for chronically homeless. It has not been a problem yet because the SHP guidelines have contained a "Hold Harmless" clause. Should this change and communities truly be held to pro rata share we will probably lose our funding, which is about $350,000 per year for SHP. Bottom line, we are very popular in our local continuum, but when the applications get to Washington, how our locals prioritize us can mean the difference in whether any projects in our community get funding." (Family Sunshine Center)

California:

"We here at the Glendale YWCA are having nightmares over the HUD issues you have discussed. We were told that DV program emergency and transitional services are not part of their community's 10 Year Plan to End Homelessness and no longer a HUD priority. We were also told that services for victims of DV are no longer a priority, unless those victims are chronically homeless. Our Continuums of Care is afraid of losing funding if they do not prioritize chronic homelessness and the creation of permanent supportive housing."

Missouri:

"Lafayette House in Joplin, Missouri, has seen HUD make a radical shift away from funding shelters for victims of domestic violence. Our shelter has been receiving HUD funding for over 20 years...over the past five or six years the funds available have been decreasing. In fact in 2005 (calendar year, 2004 funding year), our HUD Continuum of Care dollars were cut in half."

New Jersey:

"We [have been] a recipient of HUD funding (approximately $196,000 per year) to support our Transitional Living Program for the past 4-5 years....This year and last year, our program has dropped in priority within the Continuum of Care – part of the justification for the drop has been that the group has heard that the County is in jeopardy of losing HUD funding for domestic violence and/or Transitional Programs in the future. Several reasons for that have been used over time. They include items like: HUD's full focus is shifting only to the chronic homeless, which does not typically apply to domestic violence victims; and HUD's priority is new housing and permanent supportive housing ... and not Transitional Housing." (Jersey Battered Women's Service)

New Mexico:

"HUD's emphasis on the chronic homeless means that in both continuum of care regions the bonus project can only go to the chronic homeless and hence not to families. In Albuquerque the only new project each year is the bonus project, so no new projects for families are possible including DV families."

New York:

"Our agency has lost funding from two different sources that served domestic violence victims. We lost McKinney-Vento funding in 2003 and ESG funding from the New York State Office of Temporary and Disability Assistance last year. So we have lost around $135,000 in grant funds.... Indeed all technical assistance personnel through either state housing coalitions or HUD clearly state that to strengthen our Continuum of Care the focus needs to be on the chronically homeless population. It is blatantly true – we are afraid of losing funds if we do not prioritize chronic homelessness and permanent housing for individuals with disabilities. So, we have felt the impact of this funding prioritization and

closed our transitional housing program for victims in 2003. Last year we lost our ESG funding and had to close our emergency housing assistance program as well.... Allegany County is rural with one of the highest poverty rates in New York State and housing stock that is old and substandard. The loss of our funding has significantly, negatively impacted victims and their children." (ACCORD Corporation)

Ohio:

"The focus in Toledo is on Permanent Supportive Housing. Safety issues for victims of domestic violence are not being considered. [Victims of domestic violence are at greatest risk from harm when leaving an abusive relationship, so if they have nowhere safe to go, they are in grave danger.] Of the 15 women murdered in domestic violence incidents from 2006 to now, 13 women were killed as they attempted to end the abusive relationship." (Bethany House)

Rhode Island:

All 6 of Rhode Island's local domestic violence programs have lost some funding from the small emergency Shelter Grants that they had received in the past. One transitional housing program lost funding.

Pennsylvania:

"Domestic Violence Service Center [in Wilkes-Barre] is a link in the community's Continuum of Care and the Bridge Housing Program (transitional housing) is part of the county's Homeless Assistance Programs. Our county's Continuum of Care is supportive of our [See Yourself Succeed Project], but it was only resubmitted for a one year renewal. We were told that it probably will not be renewed again because HUD has shifted from supportive services to permanent housing."

Wisconsin:

> *"The Women's Community, Inc. in Wisconsin received $20,200 from the HUD ESG in 2005-2006. We received $0 in our request for 06-07. The Women's Community is also part of a local COC that was cut from $200,000 to $20,000. I am not sure about how that decision was made, but it certainly gives the perception that emergency shelter, in particular DV emergency shelter is not a priority."*

Cookie-Cutter Approaches Don't Work for Communities

HUD's policies imply a "one size fits all" solution to homelessness with little space for Continuums of Care to assess local needs or choose responses that maximize the resources of their communities. This is not effective in New York, where the needs of the rural upstate are often different from New York City. However, communities across the United States are diverse beyond the simple labels of urban, rural and suburban. Rural Wyoming and rural Alabama differ greatly, for instance, just as Boston faces different realities than Los Angeles. Climate, culture, local infrastructure, state and local government, transportation systems, unemployment rates, immigration, and many other factors affect how people become and remain homeless. The responses to ending homelessness in those communities must be just as diverse. In some areas, a strong interfaith network may provide emergency shelter to youth, while in other communities, the only option for homeless teens is "couch surfing" from place to place or living on the street. Thus the two communities might prioritize their HUD funding differently, with the latter opting to help break the cycle of homelessness by providing services and housing to homeless youth.

Challenges in New York

Survivors of domestic violence need access to emergency, transitional and permanent housing or else their safety, and the safety of their children, is at risk. There are significant consequences to the

community, including perpetuating both domestic violence and homelessness, when victims and their children are not served.

New York's Domestic Violence Shelter System

In the homeless system in New York, 21% of families reported having a history of domestic violence. In over 80% of these families, domestic violence was found to have contributed to their homelessness.[12] In 2006, New York provided shelter to 15,009 individuals in our emergency domestic violence shelter system, which is an increase of 79 persons from 2005 to 2006. Transitional housing admissions increased by 86 from 2005 to 2006, to a total of 1,067 individuals being served.[13]

New York needs permanent and transitional housing for those who may not be "homeless" by HUD definition, but who are inadequately and marginally housed, and may need mental health, domestic violence, substance abuse and other services. Throughout the state of New York, survivors of domestic violence look to their friends and families for shelter prior to entering the domestic violence shelter system.

As of December 2006, there were 165 residential programs approved by Office of Children & Family Services in New York State, with a total of 2,863 beds.[14] The statewide bed capacity has increased by 95 beds since 2005. Seventy-two percent (72%) of the emergency domestic violence shelter beds in the state are in New York City. Except for Hamilton, Schuyler, and Seneca counties, all social services districts have at least one residential program. Counties that do not have a residential domestic violence program are required to provide these services pursuant to contracts with domestic violence providers in adjacent counties.[15] Despite the number of domestic violence beds available, many survivors of domestic violence have not had access to a shelter bed; in 2006 New York State was unable to meet the shelter needs of over 22,000 adults and children. In 2006, 68% of the individuals leaving our transitional housing system entered the homeless shelter system (80 of the 117) and 59% of those leaving went to live with friends or family due to the inaccessibility or lack of affordable permanent housing.[16] Therefore, it is not uncommon

for survivors of domestic violence to live doubled up with friends or family or sleeping from house to house prior to entering shelter or even after leaving shelter.

The vast majority of New York counties are rural, where people who don't have homes sometimes have automobiles. Many families live in their cars and are more transient than your traditional "street homeless." They are more difficult to count or serve, since they may cross county lines as they move around. Conversely, outside of our larger cities such as New York, Syracuse, and Buffalo, the lack of public transportation is an insurmountable obstacle. New Yorkers outside of New York City are nearly totally dependent on personal cars, and those without cars are either unable to access services or are forced to depend on family or friends. A victim of domestic violence who has just fled her abuser and does not have access to a car may be trapped – unable to take children to school, to get to work, or to go to court and find other needed assistance.

There is very little new permanent housing in New York, especially *affordable* new housing. Our domestic violence and homeless shelters in all of New York State struggle to find housing for women who are ready to leave shelter. There is too little housing stock available to accommodate many of these women and their children. Funds to develop affordable housing, with or without supportive care, are desperately needed, yet it is difficult to demonstrate the need since most of our "rural" homeless and victims are technically housed with relatives or friends.

Programs Are Unable to Meet the Demand for Services

Many communities within the State lack sufficient emergency shelter capacity to address the needs of those who find themselves in a housing crisis and in need of immediate shelter. In many rural communities, there are no emergency shelters at all and the community is reliant upon motel vouchers paid for by local departments of social services. New York State Division of Housing & Community Renewal estimates a need of at least 965 additional emergency shelter beds for individuals and additional beds for

families. They have identified five large urban/suburban and rural counties with the most demonstrable need.[17]

New York has two large counties that currently do not have any domestic violence shelters located within them. The homeless shelters that exist there are stretched thin and we need to have options for those exiting the emergency domestic violence shelter system to allow for others to enter. This system, unlike the general homeless system, has a state mandated length of stay of 135 days or 4 ½ months.[18] There are 2,081 specialized emergency domestic violence shelter beds in 39 shelters serving 700 households in NYC. Domestic violence shelters try to move people from this emergency system to the Tier II shelters, of which there are 202 units in 7 specialized transitional or Tier II shelters serving 233 households in NYC. The Tier II system is only 1/3 the size of the emergency system so only 20% of families move through the continuum of care from emergency to transitional shelter for an additional 6 month stay. As a result, most families are expected to move from emergency shelter directly to permanent housing within 4 ½ months. This is most always an impossible feat for a domestic violence program to accomplish. [19]

As a result, only 20% of domestic violence survivors leave emergency shelter for permanent housing.[20] From April through December 2005, 21% of domestic violence survivors discharged from the New York City domestic violence shelter system were referred to the intake center of the general homeless shelter system. When applying to this system, survivors must re-qualify as homeless and are no longer considered in danger or in need of specialized services.

Federal Definition Limits Who New York Serves

Additional feedback from New York's domestic violence programs that do get HUD money is that their grants have been reduced and they are very concerned that their existing transitional housing programs will be de-funded because they don't primarily serve the chronically homeless. They have been

creative in trying to identify and locate other funding sources to supplement the needs of their programs. The Nassau County Coalition Against Domestic Violence, which serves a largely suburban population just outside New York City, tells us that the shift in emphasis to the chronically homeless and the definitions used severely limit who they can help. The definition of chronically homeless as a "single person" has made it impossible for them to expand their transitional housing assistance program despite ever-increasing demand from victims of domestic violence and their children. They are also limited due to the definition of "homeless" itself; if a victim of domestic violence and her children are sleeping on the floor of a friend's living room, it would disqualify them for assistance under current definitions. Program administrators in Nassau estimate they could easily serve another 30 families if changes were made to these definitions and the Continuum of Care was able to focus on addressing needs of people currently slipping through the cracks.

In addition, in New York City domestic violence survivors have been negatively affected by the narrowing of HUD's definition of homelessness as have housing providers, like New Destiny Housing Corporation, that are interested in developing permanent housing for this population.

McKinney-Vento has focused increasingly on chronically homeless singles with chronic disabilities. That priority shapes local continuums of care, in New York City and elsewhere, and has effectively blocked domestic violence survivors and other populations (e.g., youth aging out of foster care) from eligibility for federally-supported supportive permanent housing. Domestic violence survivors in New York have been excluded from consideration for permanent supportive housing developed under McKinney-Vento because:

(1) Domestic violence survivors in the shelter system are disproportionately women with children—*families*—and therefore outside the federal focus on chronically homeless *individuals;*

(2) "Domestic violence" is not recognized as a *long-term or chronic disability*—even though many survivors, due to the severity and duration of their abuse, are "disabled; " and

(3) Domestic violence survivors in New York—and for the most part across the nation—tend to use *short-term emergency or crisis shelters* that are time limited or may restrict the number of times they can re-enter the shelter. As a result, it is difficult for domestic violence survivors, even single survivors, to meet the federal definition of chronically homeless.

For the same reasons, developers who want to provide supportive permanent housing for this population are not eligible for McKinney-Vento funding. In previous years, when funding was available in New York City for new projects, several "semi-perm" or transitional residential projects for domestic violence survivors were funded. Now, however, the focus is exclusively on permanent housing for the chronically homeless which is the equivalent of one large project a year and the renewal of existing contracts.

Flexible Uses of Funds Are Needed

Supportive services are also needed in New York. Many of our domestic violence shelters are part of larger anti-poverty agencies such as Catholic Charities, YWCA's or Community Action Agencies and are stretched thin on resources, both financially and programmatically. In some counties we have one domestic violence program serving all of the residents of that county and its neighboring counties.

Survivors of domestic violence require extensive counseling and support services to overcome the abuse they have endured. The trauma created by the abuse and its impact on victims' ability to rebuild and maintain their lives cannot be ignored and needs to be a priority of those providing services to victims.

Domestic Violence Programs in New York tell us that supportive services are a critically important component of their work. Unfortunately, Continuum of Care Committees are forced to conform to priorities impacting how much of a project's funding can be used for service provision versus covering housing costs.

These two things are inextricably linked and there needs to be a recognition of that in reauthorization language.

McKinney Vento reauthorization that includes strong language about services and homeless housing will no doubt help to achieve residential stability, better health outcomes and employment for all homeless individuals, including survivors of domestic violence.

And mostly, we need local flexibility to identify local needs and priorities, and to seek funds to address those needs. Obviously the needs and goals have to be justified, but we could do that if we weren't locked into a definition of "homeless" that doesn't reflect rural or small community culture and reality.

Priority Issues: Expand the Definition of Homelessness and Return Control to Local Communities

From NYSCADV's experience on the ground in New York and the input NNEDV has received from state domestic violence coalitions across the country, we know there are two aspects of current HUD practice that must be changed to address domestic violence and reduce homelessness for all people: the definition of homelessness should be expanded; and control should be returned to local communities by eliminating set-asides and bonus points. Those two changes would respond to many of the challenges facing rural areas, end homelessness more quickly for more people, and give families access to services. The HEARTH Act accomplishes both goals. While legislation recently passed by the Senate Banking Committee, S. 1518, the Community Partnership to End Homelessness Act (CPEHA), takes important steps in this direction, it does not sufficiently address either goal.

Issue One: Definition of Homelessness Should Be Expanded

Solution: The HEARTH Act

HUD employs a more narrow definition of homelessness than do the Department of Justice (DOJ), the Department of Health and Human Services (HHS) and the Department of Education (ED). The

HEARTH Act uses the same definition of homelessness used in the McKinney-Vento education title, which has been an effective definition for service providers and communities. This definition more accurately reflects homelessness in New York and is more inclusive of victims of domestic violence and of rural areas across the country. It has not overwhelmed service provision systems, and providers are able to serve those most in need by making decisions about how to allocate resources in a way that makes sense for their community.

The narrow definition of homelessness used by HUD is limited to people living on the streets or in shelters; it excludes people living in doubled-up situations and those in motels. The definitions of homelessness used by DOJ, HHS and ED are broader, and specifically include individuals or children and youth who are "sharing the housing of others *due to loss of housing, economic hardship, or a similar reason.*" In addition, individuals or children and youth who "are living in motels, hotels, trailer parks, or camping grounds *due to the lack of alternative adequate accommodations*" are specifically included, along with other temporary living situations. This definition does not include people who are stably housed with friends or relatives or who simply choose to live with friends or family. In reauthorizing the Violence Against Women Act of 2005, Congress specifically utilized the broader definition for the array of programs – including housing programs – in DOJ and HHS.

We believe that the HUD McKinney-Vento definition of homelessness should be amended to explicitly include two of the homeless situations referenced above (living doubled-up and in hotels or motels) that are included in the DOJ, HHS and ED definition of homelessness. There are many pressing reasons to expand this definition.

Homeless families and youth often have no choice but to live doubled-up or in motels. The street is not an option for families with children, given the risks to children and potential child welfare involvement.

Across the country, housing is unaffordable, and in many communities emergency shelters are full or non-existent.

Families and youth in doubled-up and motel situations are among the most vulnerable segments of the homeless population. Homelessness directly contributes to physical, mental and emotional harm to children and youth. In addition, there is evidence that experiencing homelessness as a child is associated with experiencing deep poverty and homelessness as an adult. Doubled-up and motel living situations can be less safe and less stable than shelters, involving more uncertainty, frequent moves and disruptions known to be harmful to child development. Yet despite their desperate need for HUD-funded housing and supportive services, these families and youth cannot access that assistance because HUD does not consider them to be homeless.

Ignoring the real need for housing and homeless assistance by using a limited definition of homelessness does nothing to assist policymakers, service providers, and others in making informed decisions about who is impacted by the affordable housing crisis in our communities and how to meet their needs. Refusing to identify someone as "officially" homeless does not make them any less actually homeless – it just ties the hands of service providers and policymakers who need an accurate depiction of homelessness if they are to end it. Only by acknowledging the full extent of homelessness, and by giving communities the flexibility to respond to it, can we begin to address the causes of and solutions to homelessness.

Making HUD's definition of homelessness more like the one used by DOJ, HHS or ED will result in better coordination between programs and services funded by the multiple agencies. This can be expected to result in improved services for homeless children, youth, and families. It will also facilitate data collection and data sharing.

Furthermore, housing and homeless assistance are not entitlements; therefore expansion in eligibility for HUD homeless assistance programs will not lead to automatic increases in federal costs or a strain on local resources. Faced with limited resources to serve an increased number of victims seeking help, domestic violence shelters make priority decisions based on the availability of shelter beds and the lethality of a victim's situation. A homeless service provider should be able to make a similar choice. A homeless man who is residing in a shelter may be in less need of long-term housing than a family that has been moving from couch to couch. Local homeless shelters are the experts – they can triage situations to ensure that the neediest in their community receive priority access to resources. Broadening the HUD definition of homelessness will simply give communities the flexibility to serve families and youth who are extremely vulnerable and who they are currently unable to serve.

Though S. 1518 (CPEHA) expands the definition of homelessness somewhat, it is insufficient. It includes individuals and families living doubled-up only if (1) they have moved 2 times in 21 days or 3 times in a year, (2) they cannot contribute significantly to rent in the household where they are doubled-up and (3) they have received notice that they can only remain with their host for a short time. This language excludes people who are literally without homes from the definition of homelessness, putting homeless children, youth, and families at risk, and providing an incentive for families to make multiple moves in order to receive assistance – moves which are especially damaging to children. This definition will be particularly difficult for victims of domestic violence. It may not be safe for victims and their families to move multiple times before receive assistance. For example, most victims could not stay with in-laws or with friends who know their abusers. It would also be virtually impossible for local homeless service providers to verify eligibility under this complex definition.

Issue Two: Control Should Be Returned to Local Communities

Solution: The HEARTH Act

Local service providers who are on the ground, in communities, are best equipped to analyze the needs of homeless individuals and develop effective responses. Currently, HUD sets aside at least 30% of funds for permanent housing for single adults with disabilities, and awards points to Continuum of Care applications based on HUD priorities such as serving chronically homeless individuals. When Continuums of Care pick other priorities, they frequently lose some or all of their funding. Decisions made from "inside the beltway" in Washington, D.C. are rarely as informed as those made by on-the-ground practitioners who are experts in the dynamics of local homelessness. Reauthorization of McKinney-Vento must return the decision-making power to local communities who know which populations are most in need and know which interventions are most effective for their communities.

Under the HEARTH Act each community is free to prioritize the housing and services options that best meet local needs, based on a needs analysis that ensures communities do not ignore top priority populations. Communities who do an inclusive analysis and work effectively to end homelessness in their communities would be rewarded with funding. This is an effective way to incentivize quality work and let the experts – local Continuums of Care that know every detail of their communities – make the best decisions possible and use funding in the most efficient, cost-effective ways.

CPEHA (S. 1518), codifies HUD's current 30% set-aside for permanent housing, and limits it for homeless persons with disabilities. It does expand the set-aside to include a family headed by an individual with a disability. It adds an additional 10% set-aside for permanent housing for non-disabled homeless families. While these are important steps to include some families in receiving permanent housing – a necessary resource for many homeless families – the nature of carving out 40% of funding for a particular activity and a limited number of eligible recipients makes it very difficult for communities to do what they know must be done to end homelessness. CPEHA (S. 1518) also codifies additional incentives focused on chronic homelessness, and permits the HUD Secretary to approve still more incentives. Because the

available resources, infrastructure, culture, and daily reality of communities across the United States are so incredibly varied, it is simply not effective to direct funding so specifically.

The division of funds between Emergency Shelter Grants (ESG) and other McKinney-Vento grants is also changed by CPEHA (S. 1518). While we support increasing the amount of funding available for ESG from 15% to 20% as proposed in CPEHA (S. 1518), we have serious concerns about the 12% cap imposed on the provision of emergency shelter and street outreach. This would become effective after two years, and could require local communities to cut funding for emergency shelter and street outreach. CPEHA (S. 1518) makes prevention an eligible activity under ESG, but the criteria for this participation in program are extremely restrictive. To qualify, individuals must qualify under the restrictive definition of homeless, or be at or below 20% of the area median income, lack the resources to attain housing stability, and be in a dire housing situation that should more realistically be considered homeless than "unstably housed." This would likely exclude many victims of domestic violence who are trapped between an abusive home and the street, as well as other groups who are likely to become homeless such as children aging out of the foster care system and prisoners reentering their communities.

NNEDV believes that removing set-asides and other caps and incentives, and instead allowing communities the flexibility they need to address homelessness is the most effective solution.

Returning Control to Local Communities: Set-asides and Bonus Points Should be Reduced

Many communities have found investing in permanent supportive housing for chronically homeless individuals to be an effective use of resources. This is an important activity and one that would continue to be permissible under the HEARTH Act. However, requiring or heavily incentivizing this activity above all others is problematic. HUD's use of set-asides and bonus points in their "chronic homelessness" initiative, though well-intentioned, is placing victims of domestic violence in danger. Victims of domestic violence across the country are losing access to resources for homeless persons due to funding priorities and set

asides that exclude the majority of the homeless population, including families. For example, only 10% of homeless individuals are "chronically homeless" while 63% of homeless women are victims of domestic violence.

If we don't assist victims of domestic violence, they will be trapped between life with their abusers and life on the streets. Rather than preventing homelessness, victims may be driven into "chronic" homelessness, and their children may repeat the cycle of violence and homelessness. The same is true of many other populations who will eventually become chronically homeless if there are no interventions to assist them, particularly homeless children and youth.

The current combination of bonus points to serve chronically homeless adults and the 30% set-aside has led to the funding cuts for domestic violence programs and homeless services previously discussed. But worse, these HUD policies fail to accomplish their stated aim of reducing chronic homelessness and are likely to actually increase homelessness, particularly for other vulnerable groups. As the studies cited above document, family homelessness has not declined, but rather has been growing since implementation of these initiatives. For example, two years after beginning a plan to end chronic homelessness, New York City reported the highest number of homeless families recorded in the city's history.[21]

There are five key areas of concern when evaluating the chronic homeless initiatives, including the 30% set-aside: does the initiative "free up" resources or merely shift them; will it end chronic homelessness for individuals with disabilities; are the most vulnerable individuals being served; is it the most cost-effective choice; and is federal funding being used effectively.

1) Targeting resources toward permanent supportive housing for the "chronically homeless" is unlikely to "free up" emergency resources for families or other populations.

This argument assumes that there is a fixed, unchanging population of people who are "chronically homeless," and that "freed up" shelter beds will go to serve other populations. Neither assumption is true. Without addressing the causes of homelessness, new people will continue to join the ranks of the "chronically homeless" and be in need of emergency shelter beds. Furthermore, no plan, discussion, or proposed restructuring of homeless assistance grants has been offered to specify precisely *how* "freed up" emergency shelter resources will be redirected toward "non-chronic" populations. In the absence of such a plan, or a significant influx of new resources for *all* populations, the targeting of resources toward permanent supportive housing for the "chronically homeless" merely re-shuffles the deck, resulting in *fewer*, not more, services for families and other populations.

2) The "chronic homelessness initiative," as currently conducted by HUD, is incapable of "ending homelessness" for people with disabilities.

While permanent supportive housing targeted to people who are *currently homeless* is an essential service in resolving the homelessness of many people with disabilities, it cannot prevent *currently housed* people with disabilities from losing their housing. Even if enough funding were allocated for permanent supportive housing for every person who is currently "chronically homeless," new individuals with disabilities would continue to become homeless because the underlying causes of their homelessness are not addressed by the initiative. Similarly, while "discharge planning" has been part of the "chronic homelessness" discussion around prevention, it becomes merely an ad hoc exercise in problem management when no affordable housing exists to which people can be discharged. Only a sustained effort to address the long-term causes of homelessness, including lack of adequate health care, affordable housing, and livable incomes, will prevent and end homelessness for people with – and without – disabilities.

3) The argument that "chronically homeless" people are "the most vulnerable" among people experiencing homelessness, and therefore deserving of greater attention and resources, is flawed.

Proponents of the chronic homelessness initiative have sought to garner support for it by asserting that "chronically homeless" people are "the most vulnerable" among people experiencing homelessness, and therefore deserve a greater portion of federal resources.[22] Such assertions unethically pit needy populations against each other for service dollars. Moreover, the accuracy of the assertion is undermined when research on children is considered – research that is strikingly absent from discussion at the federal policy level. Rarely mentioned, for example, is the finding that young children were most at risk of staying in public shelter in New York and Philadelphia, and the younger the child, the greater the risk; indeed, infants under the age of one had the highest rates of shelter use.[23] To assume that these children are less vulnerable to the ill effects of homelessness because they move through the public shelter system more quickly is wrong. Many of the horrific conditions of homelessness directly contribute to physical, mental and emotional harm. For example, infants and toddlers who are homeless are at extreme risk of developmental delays and health complications.[24] Children experiencing homelessness are diagnosed with learning disabilities at much higher rates than other children.[25] In addition, there is evidence that experiencing homelessness as a child is associated with experiencing deep poverty and homelessness as an adult.[26] Ignoring the plight of this equally vulnerable population, under the questionable assumption that it is "less vulnerable" than single adults with disabilities, all but guarantees the perpetuation of "chronic" homelessness into the foreseeable future. Proponents of the chronic homeless initiative have also called "chronically" homeless individuals the "hardest to serve" and stated that without federal priorities, local communities would not serve them. In truth, there are many "hard to serve" communities, including homeless immigrants, prisoners reentering the community, and teens who have turned to drugs and violence to survive. Every community has different groups who are very difficult to serve, and prioritizing

one over the other at the federal level does nothing to help each state address its unique homeless population.

4) Profound cost-efficacy arguments can be made for addressing homelessness for many groups, not just for chronically homeless individuals.

One argument often put forth to justify the emphasis on chronic homelessness is that of cost efficacy. It is frequently stated that chronically homeless individuals cost society significant sums of money in emergency health care, jail and law enforcement costs, and temporary shelter. However, the same arguments can be made for other homeless populations, particularly victims of domestic violence and their children. The cost of intimate partner violence exceeds $5.8 billion each year, $4.1 billion of which is for direct medical and mental health care services.[27] When property loss, lost productivity, and pain and suffering are included, the total annual victim cost of domestic violence grows to $67 billion dollars.[28] These calculations do not include the enormous costs to the criminal justice system, including police response and prosecution, which would drastically increase the totals. Domestic violence also costs U.S. employers an estimated $3 to $13 billion annually,[29] and 25% to 50% of domestic violence victims report that they had lost a job due, at least in part, to domestic violence.[30]

Domestic violence contributes to a number of chronic health problems including depression, alcohol and substance abuse, and sexually transmitted diseases such as HIV/AIDS, and limits victims' ability to manage other chronic illnesses such as diabetes and hypertension.[31] New research also shows that intimate partner violence costs a health plan $19.3 million each year for every 100,000 women between 18 and 64 enrolled.[32] Even five years after abuse has ended, health care costs for women with a history of intimate partner violence remain 20% higher than those for women with no history of violence.[33]

The costs to society of a child growing up in a home with domestic violence are also shocking. A staggering number of children, between 3.3 and 10 million, experience or witness violence every year. [34]

Slightly more than half of female victims of intimate partner violence live in households with children under age 12.[35] Furthermore, it is estimated that 50% of men who frequently abused their wives also abused their children.[36] Unfortunately, children who experience violence in the home are far more likely to not only engage in violence during their youth but also repeat abusive patterns in their future relationships. Children who witness spousal assault and who have also been the victims of parental assault are six times more likely to assault other children outside their family.[37] Boys who witness domestic violence are twice as likely to abuse their own partners and children when they become adults.[38] A high percentage of the nearly half a million 14-to-24-year-olds who leave the juvenile justice system, federal or state prisons or local jails annually have experienced or witnessed violence at home.[39] Children who are exposed to domestic violence are also more likely to exhibit behavioral and physical health problems including depression and anxiety[40] as well as being more likely to attempt suicide, abuse drugs and alcohol, run away from home, engage in teenage prostitution, and commit sexual assault crimes.[41]

These costs to society are pervasive. Furthermore, when adequate shelter and housing are not available to victims, they frequently remain in abusive relationships – exacerbating these costs and exposing themselves and their children to danger.

5) Communities are being forced to overlook the results of their own needs assessments in order to meet federal mandates to serve "chronically homeless" people. As a result, federal funding is not addressing the service gaps determined by communities.

In distributing homeless assistance grants, HUD asks communities to rank local needs and prioritize the gaps in the resources available to meet those needs. It then awards grants based on that process, called the "Continuum of Care." Over the past few years, as a result of the "chronic homelessness" initiative, HUD has given preference to communities that use funds for permanent housing to "end homelessness for chronically homeless people."[42] This preference disregards local needs,

realities, and emerging trends, and is therefore in direct conflict with the stated goal of the Continuum of Care process: rather than enabling local communities to determine their own priorities based on local need, HUD has determined their priorities for them. Many communities have witnessed significant growth in the scale and severity of homelessness among families with children, unaccompanied youth, and disabled and non-disabled populations that do not fit neatly into the "chronic homeless" paradigm. Yet these communities are being forced to overlook emerging needs in favor of a narrowly constructed national priority. As a result, equally vulnerable populations face service gaps that, if left unaddressed, have the potential to cause irreparable harm and even lead to "chronic homelessness."

When federal priorities instead of local priorities are funded, the results can be unintended or even absurd. For example, to help address the needs of rural and impoverished small towns in Alabama, the Alabama Coalition Against Domestic Violence took the lead in organizing a Balance of State Continuum (called ARCH). Since forming, ARCH has submitted four applications to HUD, none of which have been funded, except a $128,000 grant to develop a Homeless Management Information System. So ARCH finds itself in the peculiar position of developing an HMIS for a geographic region with no Homeless Assistance grantees and therefore no one to include in the HMIS. HUD chose to fund a tracking system rather than meet the immediate needs of homeless individuals for shelter and services. This does not help end homelessness in rural and small town Alabama, and it is not a cost-effective use of federal dollars.

Conclusion

In one day alone, 62% of the domestic violence programs in this country directly served nearly 50,000 women, men and children.[43] Over the course of a year, these programs serve at least 300,000 individuals. [44] Demand for our services rises continually – calls to the National Domestic Violence Hotline increased 15% last year, as it has nearly every year since its inception.[45] The New York State Domestic and Sexual Violence hotline saw an 18% increase last year, and as stated above, the emergency shelter

system We know the House Committee on Financial Services, along with the rest of Congress, is committed to meeting the needs of these victims of domestic violence – and of the many more who are only now gaining the courage to come forward and ask for help.

On behalf of victims of domestic violence in New York and around the country, we thank the Committee for this opportunity to testify. We are in strong support of reauthorizing the McKinney-Vento Homeless Assistance Act and believe that the HEARTH Act is an excellent piece of legislation that meets the needs of diverse communities. By expanding the definition of homelessness and eliminating bonus points and set-asides, it gives all communities – whether urban, rural or suburban – the flexibility and resources they need to help all homeless people, including families and victims of domestic violence. We look forward to working with the Committee to pass the HEARTH Act. Thank you again for your leadership to end both domestic violence and homelessness.

JESSICA FRANCES VASQUEZ, ESQ.
New York State Coalition Against Domestic Violence
350 New Scotland Ave, Albany, NY 12208
518-482-5485 email: jvasquez@nyscadv.org

EDUCATION

New York Law School, New York, NY
Juris Doctor, June 1999
Honors: Soros Post Graduate Fellowship; Charles H. Revson Public Interest Fellowship; Solomon Fellowship; Moot Court Executive Board Member.

Bryn Mawr College, Bryn Mawr, PA
Bachelor of Arts in Psychology, minor in Feminist and Gender Studies, May 1996
Honors: Laura Van Straaten Women's Rights Scholar, 1996

EXPERIENCE

New York State Coalition Against Domestic Violence, Albany, NY
Executive Director April 2006 - present
Supervise a staff of 14, involving training, work flow, quality control, conflict resolution, and review processes. Planned and adhered to a $1.7 million budget. Design and implement a fund development plan. Spokesperson for the organization, including developing a vision and policy agenda to support survivors of domestic violence.

Athena Strategic Council, Maspeth, NY
President September 2004- April 2006
Provide services and trainings to non-profit organizations in order to maximize their impact and effectiveness. Service areas include Non-profit Management & Governance; Board Development and Management; Strategic Planning and Analysis; Public Policy Advocacy and Research; Program Planning and Development; Executive Transitions and, Training & Technical Assistance. Provide services to individuals in the areas of informational consulting, financial literacy and career counseling.

Alianza: The National Latino Alliance for the Elimination of Domestic Violence, New York, NY
Director of Projects October 2002-August 2004
Oversaw and directed program enhancements to the Research, Policy, and Training & Technical Assistance projects. Managed and projected program budgets. Directed and chaired the policy project via an advisory committee on issues relevant to Latino communities. Developed and wrote policy analysis and briefings on various issues affecting Latino communities. Represented the organization on national policy committees. Provided oversight and supervision to all program consultants and staff. Conducted presentations on panels and committees on behalf of Alianza. Reviewed and edited all materials and reports produced by Alianza. Prepared and submitted grant proposals for special events and operating support. Provided training and conducted presentations on policy issues in a variety of forums. Coordinated and supervised the maintenance of Alianza's website, including its redesign. Enhanced the website and resource library with culturally and linguistically appropriate domestic violence materials. Responded to requests for information, materials, and resources by community based organizations.

New York Legal Assistance Group, New York, NY

Staff Attorney July 2001-October 2002

Represented victims of violence in family court, matrimonial actions, and immigration proceedings. Represented families of the victims of the World Trade Center disaster in family court proceedings. Conducted trainings for the staff of the Violence Intervention Program, Inc. and the Dominican Women's Development Center on family law and immigration.

Center for Battered Women's Legal Services, New York, NY

Soros Post Graduate Fellowship August 1999-July 2001

Represented Spanish-speaking battered women in family court, matrimonial actions, and immigration cases. Co-coordinated Spanish Uncontested Divorce Pro-Se Workshop. Developed educational pamphlets and conducted trainings on family law and immigration for the Violence Intervention Program, Inc., Dominican Women's Development Center, and other Latina/o community service agencies.

Legal Intern January-May 1997, May 1998-May 1999

Assisted in trial preparation process; served as second-chair counsel for battered women in family court and matrimonial actions, advocated for them in criminal court; conducted extensive legal research and writing on a variety of substantive issues, drafted motions, conducted client intake interviews.

Courtroom Advocates Program, New York, NY

Student Chair June 1997-May 1999

Supervised law students in New York County Family Court in drafting petitions for orders of protection, assisted battered women in drafting orders of protection, advocated on behalf of battered women before judges, enhanced the structure of the program with court personnel, judiciary, and experienced attorneys.

ACLU Reproductive Freedom Project, New York, NY

Legal Intern May 1997-May 1998

Legal research and writing on reproductive rights.

BAR ADMISSIONS/AFFILIATIONS

Admitted to the New York State Bar, January 2001
Board Member, National Network to End Domestic Violence
Policy Committee, National Network to End Domestic Violence
Advisory Board Member, Dominican Women's Development Center
Member, NYS VAWA Advisory Board
Member, NYS Crime Victims Board Advisory Board
Former Advisory Committee Member, National Clearinghouse on Abuse in Later Life

PUBLICATION

"Developing Linguistically and Culturally Responsive Materials for Latina Survivors of Domestic Violence," June 2003, co-writer, National Latino Alliance for the Elimination of Domestic Violence: New York.

PANEL PRESENTATIONS

"Sustainability: Strategies and Resources for State Coalitions," November 10, 2005, at National Network to End Domestic Violence Roundtable Meeting, California.

"Life Stages of a Coalition," November 9, 2005, at National Network to End Domestic Violence Roundtable Meeting, California.

"Engaging Communities to End Domestic Violence," April 30, 2005, at 2nd Women's Conference, Latin Women In Action, New York.

"Impact of Marriage Promotion and Fatherhood Initiatives on Domestic Violence Programs," February 2, 2004, at New York State Coalition Against Domestic Violence Conference, New York.

"Domestic Violence/Domestic Silence: The Activist Response to Shaming Mechanisms," October 18, 2003, at American Studies Association annual meeting, Hartford, Connecticut.

"Frameworks for Culturally Sensitive Services," May 29, 2003 at Domestic Violence Resource Network's Forum, Texas.

Spring 1999- Fall 2002. Monthly legal rights workshops for clients/residents of Violence Intervention Program, Henry Street Shelter, and Dominican Women's Development Center.

"Access to Services for Immigrant Battered Women," October 8, 2000 at National Conference of Puerto Rican Women, New York.

"Legal Services for Immigrant Battered Women," October 5, 2000 at 1st Women's Conference, Latin Women In Action, New York.

"Overcoming Barriers for Immigrant Battered Women," June 22, 23, 2000 at New York State Coalition Against Domestic Violence Conference, New York.

"Immigration Relief for Battered Undocumented Women," May 25, 2000 at The Mexican Consulate, New York.

"Cultural Awareness and Domestic Violence" and "Safety Planning" January 31, 1998 at NYU School of Law; August 29, 1998 at Columbia School of Law, September 13, 1998 at NYU School of Law; January 24, 1999 at Cardozo School of Law. For the Courtroom Advocates Program.

"Protecting Battered Women," April 1998, Domestic Violence: Taking Stock and Taking Action Conference at Fordham University.

"Domestic Violence Advocates in NY Family Court," June 1998, Family Justice Plan: One Year Later Conference at the Association of the Bar of the City of New York.

SKILLS

Proficiency in written and spoken Spanish; Literate in Microsoft Office Programs; Literate in Lexis and Westlaw

Endnotes

---

[1] Tjaden, Patricia & Thoennes, Nancy. National Institute of Justice and the Centers of Disease Control and Prevention, "Extent, Nature and Consequences of Intimate Partner Violence: Findings from the National Violence Against Women Survey," 2000.

[2] Browne, A. & Bassuk, S., "Intimate Violence in the Lives of Homeless and Poor Housed Women: Prevalence and Patterns in an Ethnically Diverse Sample," American Journal of Orthopsychiatry, 67(2) 261-278, April 1997; Browne, A., "Responding to the Needs of Low Income and Homeless Women Who are Survivors of Family Violence," Journal of American Medical Association, 53(2), 57-64. Spring 1998.

[3] Charlene K. Baker, Cook, Sarah L., Norris, Fran H., "Domestic Violence and Housing Problems: A Contextual Analysis of Women's Help-seeking, Received Informal Support, and Formal System Response," Violence Against Women 9, no. 7 (2003): 754-783.

[4] Zorza, Joan. "Woman Battering: A Major Cause of Homelessness," in Clearing House Review, vol. 25, no. 4, 1991.

[5] U.S. Conference of Mayors, A Status Report on Hunger and Homelessness in America's Cities: A 23-City Survey, December 2006.

[6] "Domestic Violence Counts: A 24-hour census of domestic violence shelters and services across the United States." National Network to End Domestic Violence (Washington, DC: 2007). http://www.nnedv.org/census/index.php.

[7] U.S. Conference of Mayors, A Status Report on Hunger and Homelessness in America's Cities: A 23-City Survey, December 2006.

[8] Correia, A., Housing and Battered Women: A case study of domestic violence programs in Iowa. Harrisburg, PA: National Resource Center on Domestic Violence. March, 1999.

[9] See Linda L. Baker et al., Children Exposed to Domestic Violence: A Teacher's Handbook to Increase Understanding and Improve Community Responses (2002).

[10] See Linda L. Baker et al., Children Exposed to Domestic Violence: A Teacher's Handbook to Increase Understanding and Improve Community Responses (2002).

[11] See Linda L. Baker et al., Children Exposed to Domestic Violence: A Teacher's Handbook to Increase Understanding and Improve Community Responses (2002).

[12] Smith, N. et al. 2005. *Understanding Family Homelessness in New York City: An In-Depth Study of Families' Experiences Before and After Shelter*, Vera Institute of Justice.

[13] *Domestic Violence Prevention Act: 2006 Annual Report to the Governor and Legislature*. The New York Office of Child and Family Services, New York. (2006).

[14] *Domestic Violence Prevention Act: 2006 Annual Report to the Governor and Legislature*. The New York Office of Child and Family Services, New York. (2006).

[15] *Domestic Violence Prevention Act: 2006 Annual Report to the Governor and Legislature*. The New York Office of Child and Family Services, New York. (2006).

[16] *Domestic Violence Prevention Act: 2006 Annual Report to the Governor and Legislature*. The New York Office of Child and Family Services, New York. (2006).

[17] New York State Division of Housing and Community Renewal, New York State Consolidated Plan Federal Fiscal Years 2006 - 2010 and the Annual Action Plan for Program Year 2006.

[18] New York State Office of Children and Family Services, 94 ADM-11

[19] Human Resources Administration, ODVEIS.

[20] Smith, N. et al. 2005. *Understanding Family Homelessness in New York City: An In-Depth Study of Families' Experiences Before and After Shelter*, Vera Institute of Justice; and, *Domestic Violence Prevention Act: 2006 Annual Report to the Governor and Legislature*. The New York Office of Child and Family Services, New York. (2006).

[21] Kaufman, Leslie. "With a Record Number of Homeless Families, the City Vows to Improve Aid." New York Times. 19 March 2007, late ed.: 1.

[13] News Release, U.S. Department of Housing and Urban Development, December 17, 2002. "Bush Administration Awards Record $1.1 Billion to Provide Housing and Services to Homeless Individuals and Families."

[14] Culhane, DP & Metraux, S (1996). One year rates of public shelter utilization by race, sex, age and poverty status in New York City (1990-1995) and Philadelphia (1995).

[15] Homeless infants and toddlers have higher rates of low birth weight and need special care right after birth four times as often as other children. Nearly 70 percent of homeless infants and toddlers have chronic illnesses. Children experiencing homelessness are

diagnosed with learning disabilities at twice the rate of other children, and suffer from emotional or behavioral problems that interfere with learning at almost three times the rate of other children. The Better Homes Fund, *America's New Outcasts: Homeless Children* (1999).

[16] The Better Homes Fund, *America's New Outcasts: Homeless Children* (1999).

[17] Interagency Council on the Homeless, Homelessness: Programs and the People They Serve, 1999.

[27] Costs of Intimate Partner Violence Against Women in the United States. 2003. Centers for Disease Control and Prevention, National Centers for Injury Prevention and Control. Atlanta, GA.

[28] Ted R. Miller et al., *Victim Costs and Consequences: A New Look*, National Institute of Justice Research Report (1996).

[29] Bureau of National Affairs Special Rep. No. 32, Violence and Stress: The Work/Family Connection 2 (1990); Joan Zorza, Women Battering: High Costs and the State of the Law, Clearinghouse Rev., Vol. 28, No. 4, 383, 385; National Center for Injury Prevention and Control, Costs of Intimate Partner Violence Against Women in the United States, Atlanta: Centers for Disease Control and Prevention, 2003.

[30] U.S. General Accounting Office, Domestic Violence Prevalence and Implications for Employment Among Welfare Recipients 19 (Nov. 1998).

[31] Coker, A., Smith, P., Bethea, L., King, M., McKeown, R. 2000. "Physical Health Consequences of Physical and Psychological Intimate Partner Violence." Archives of Family Medicine. 9.

[32] Rivara, F., et al. 2007. "Healthcare Utilization and Costs for Women with a History of Intimate Partner Violence." American Journal of Preventive Medicine. 32:89-96.

[33] Rivara, F., et al. 2007. "Healthcare Utilization and Costs for Women with a History of Intimate Partner Violence." American Journal of Preventive Medicine. 32:89-96.

[34] See: Carlson, Bonnie E. (1984). Children's observations of interpersonal violence. In A.R. Roberts (Ed.) Battered women and their families (pp. 147-167). NY: Springer; Straus, M.A. (1992). Children as witnesses to marital violence: A risk factor for lifelong problems among a nationally representative sample of American men and women. Report of the Twenty-Third Ross Roundtable. Columbus, OH: Ross Laboratories.

[35] Greenfeld, Lawrence, et al. "Violence by Intimates: Analysis of Data on Crimes by Current or Former Spouses, Boyfriends and Girlfriends," Bureau of Justice Statistics Factbook, Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, March 1998.

[36] Strauss, Murray A., Gelles, Richard J., and Smith, Christine. 1990. Physical Violence in American Families; Risk Factors and Adaptations to Violence in 8,145 Families. New Brunswick: Transaction Publishers.

[37] Widom C (1989) Does violence beget violence? Psychological Bulletin. 106: 3-28.

[38] Strauss, Gelles, and Smith, "Physical Violence in American Families; Risk Factors and Adaptations to Violence" in 8,145 Families. Transaction Publishers (1990).

[39] Rosewater, A., "Promoting Prevention, Targeting Teens: An Emerging Agenda to Prevent Domestic Violence," Family Violence Prevention Fund (2003), 11.

[40] Jaffe, P. and Sudermann, M., "Child Witness of Women Abuse: Research and Community Responses," in Stith, S. and Straus, M., Understanding Partner Violence: Prevalence, Causes, Consequences, and Solutions. Families in Focus Services, Vol. II. Minneapolis, MN: National Council on Family Relations, 1995.

[41] Wolfe, D.A., Wekerle, C., Reitzel, D. and Gough, R. 1995. "Strategies to Address Violence in the Lives of High Risk Youth." In Ending the Cycle of Violence: Community Responses to Children of Battered Women, edited by E. Peled, P.G. Jaffe, and J.L. Edleson. New York, NY: Sage Publications.

16 Notification of Funding Availability for Continuum of Care Homeless Assistance Programs, Office of Community Planning and Development, U.S. Department of Housing and Urban Development; Federal Register: April 25, 2003 (Volume 68, Number 80).

[43] "Domestic Violence Counts: A 24-hour census of domestic violence shelters and services across the United States." National Network to End Domestic Violence (Washington, DC: 2007). http://www.nnedv.org/census/index.php.

[44] National Coalition Against Domestic Violence, *Detailed Shelter Surveys* (2001).

[45] The National Domestic Violence Hotline. "Called to Make A Difference Campaign." 2006-2007. http://www.ndvh.org/images/case%20statement.pdf

The Testimony of

Ms. Pittre Walker

Homeless Liaison

Caddo Parish Schools, Shreveport, Louisiana

Member of the Board of Directors of

The National Association for the Education of

Homeless Children and Youth

Before the Subcommittee on

Housing and Community Opportunity of the Financial

Services Committee

United States House of Representatives

October 4, 2007

My name is Pittre Walker, and I thank you for the opportunity to appear before the Subcommittee. For the past 9 years, I have served as the homeless liaison for Caddo Parish Schools in Shreveport, Louisiana. I am also a board member of the Louisiana Association for the Education of Homeless Children and Youth (LAEHCY) and the National Association for the Education of Homeless Children and Youth (NAEHCY).

I will focus my comments today on the youngest victims of homelessness – our nation's children and youth.

Homelessness compromises the very foundation of child development. Homeless children face loss, trauma, instability, and the deprivation of extreme poverty. They suffer physically and emotionally. Infants and toddlers who are homeless are at extreme risk of developmental delays and health complications.[1] School-age children experiencing homelessness are diagnosed with learning disabilities and chronic and acute health conditions at much higher rates than other children.[2] They struggle academically, and many fall behind in school.

We often speak of various homeless populations as if they were distinct and separate, unconnected. Yet every adult was once a child, and many homeless adults experienced disruption in their living situations during their childhood. According to the National Survey of Homeless Assistance Providers and Clients, as reported by the Interagency Council on Homelessness in 1999, 21 percent of homeless adults experienced homelessness as children, 33 percent ran away from home, and 22 percent

---

[1] Weinreb, L., et al., "Determinants of health and service use patterns in homeless and low-income housed children," *Pediatrics* 102(3) (1998): 554-62. Garcia-Coll, C., et al., "The developmental status and adaptive behavior of homeless and low-income housed infants and toddlers," *Am. J. Public Health* 88(9) (1998): 1371-4; Bassuk, E.L., et al., "Determinants of behavior in homeless and low-income housed preschool children," *Pediatrics* 100(1) (1997): 92-100.

[2] The Better Homes Fund. (1999). *Homeless Children: America's New Outcasts*, Newton, MA: Author.

were forced to leave their homes.[3] This striking correlation between adverse childhood housing experiences and adult homelessness ought to be cause for concern, as well as a key topic in any conversation about ending homelessness. When we ignore or minimize child and youth homelessness, we perpetuate adult homelessness.

Tragically, children and youth have not been a focus of federal homelessness policy -- except in the area of education. We are extremely grateful for the leadership and commitment of Congresswoman Judy Biggert (R-13th/IL), whose work on the education provisions of the McKinney-Vento Act has increased the stability and success of homeless children and youth in school. Congresswoman Biggert's amendments have helped to change the very fabric of the public school system, so that our schools are more inclusive and supportive of homeless children and youth. Indeed, school has become a safety net and safe harbor for hundreds of thousands of children and youth who do not have a safe, adequate, permanent place to call home.

Yet educators have learned that without the involvement and cooperation of other community service providers, educational efforts are much less likely to succeed. A child without housing - hungry, sick, scared - faces greater barriers to academic success than just the barriers that exist inside the school itself. Homelessness affects all aspects of a person's life, and an effective and humane response brings together myriad appropriate systems to address them - including education. Public schools are the cornerstones of communities; no other entity has the same level of daily contact with children, youth, and families. Schools see the scope and the depth of housing problems in every community in the nation and, therefore, are among the most accurate barometers

[3] Interagency Council on the Homeless. (1999). *"Homelessness: People and the Programs They Serve,"* Washington D.C.

of family and youth homelessness. Increasingly, educators are getting involved in housing and homelessness initiatives as way to stabilize the lives of children and youth, so that they can come to school ready and able to learn.

It is from this perspective that I offer comments on the House, Senate, and current policy approaches to the reauthorization of the McKinney-Vento Homeless Assistance Programs administered by the U.S. Department of Housing and Urban Development (HUD). My concerns lie in four main areas: definitions of homelessness, the community planning process, permanent housing set-asides/national priorities, and funding levels.

Definitions of Homelessness

The current HUD definition of homelessness – which encompasses those in shelters or literally on the streets – disproportionately excludes children and youth. The streets are untenable for families because living on the streets puts children at unthinkable risk – it means child welfare involvement and the separation of the family. Many homeless families, unaccompanied youth, and single adults have no choice but to stay temporarily with other people or in motels, often in overcrowded and unsafe circumstances. In many places across the country, there are no shelters, or shelters are may be full, forcing people into other homeless situations. In addition, many shelters will not accept families with older children and/or boys over the age of 10, so the family must split up or find another unstable arrangement if they wish to stay together. Thus, the current HUD definition of homelessness does not match the reality of who is homeless in my community, or communities nationwide. While this incongruity is especially true for

smaller towns and rural areas, it is also true in urban areas. The HUD definition of homelessness prevents us from meeting the needs that we are identifying.

In contrast, the definition of homelessness in the education subtitle of the McKinney-Vento Act includes children and youth who are sharing the housing of others due to loss of housing, economic hardship, or a similar reason, and children and youth who live in motels, hotels, and camping grounds due to lack of adequate alternative accommodations. This definition, which public schools have used successfully for more than ten years, allows me to help those children and youth who lack stability in their housing situation enroll in school and obtain educationally related services.

Let me illustrate these points with examples from my community. Last year, Caddo Parish Schools identified and enrolled 2,031 homeless children and youth in grades K-12. Of these, 1,232 were in doubled-up situations and 72 were in motels. People who are in doubled-up situations or in motels are not "homeless" under the HUD definition. Thus, the vast majority of homeless children and youth in my parish are not eligible for HUD homeless assistance services. These statistics are in line with the national statistics: 56 percent of the 907,228 homeless children and youth identified and enrolled in the nation's public schools in the 2005-2006 school year were in doubled-up situations, and 7 percent were in motels.[4] In total, 63 percent of all children and youth identified as homeless by public schools in 2005-2006 were ineligible for HUD homeless assistance.

Families in doubled-up and motel situations are extremely vulnerable. Their living arrangements are crowded, very unstable, and often unsafe. In one instance, I

[4] National Center for Homeless Education. (2007). *Education for Homeless Children and Youth Program: Analysis of 2005-2006 Federal Data Collection and Three-Year Comparison*, Greensboro, NC.

identified a family who had no place to live except the back of the mother's aunt and uncle's house. There was mold in the bathroom and large rats and other bugs crawling on the floor. With no beds available, the mother and children had to sleep on that floor. I was able to help the children enroll in school, but no HUD services were available to help this family find and maintain a better place to live. They did not meet the HUD homeless definition.

Since 1999, the homeless education program that I oversee also has received a HUD homeless assistance grant through our local Continuum of Care to provide case management services to homeless families in Region Seven, which includes Shreveport and six rural parishes. Last year, we provided 419 families (including 727 children) with housing referrals, help accessing Medicaid and Medicare, TANF, food, medical assistance, and other services. Case managers complete an overall assessment to determine what services are needed. They advocate on behalf of the families. Most case managers have built a rapport with agencies and have a contact person that they can call at any time. This helps to speed up the process for families to gain services needed. Case managers help to provide support systems that these families lack.

Yet as critical as these services are, I can help only a fraction of those who truly need assistance, since I can provide HUD case management services only to those families who meet the HUD definition of homelessness. If the HUD definition were expanded, we would be able to provide comprehensive services to more families. These families would have priority for housing and social services.

For these reasons, I strongly support the definition of homelessness contained in H.R. 840, the HEARTH Act. The HEARTH Act definition more closely aligns the HUD

definition with the education definition by including people who are sharing the housing of others due to loss of housing, economic hardship, or a similar reason, and children and youth who live in motels, hotels, and camping grounds due to lack of adequate alternative accommodations. In my community, in my state, and across the nation, the HEARTH Act definition of homelessness would allow service providers to meet real needs. It is a definition that acknowledges the true extent of the affordable housing crisis, and gives us the flexibility to begin to address it.

Unfortunately, the definition of homelessness in the Senate bill, S. 1518, does not provide stability for children. It expands the current HUD definition by including:

- People in motels paid for by a government program;
- People who are doubled-up, but only if they have moved three times in one year or two times in the past 21 days, and they have been notified by the owner or renter of their lodging that they can only stay for a short time period, and they don't have resources to contribute to rent; and
- people who are in motels, but only if they have moved three times in one year or two times in the past 21 days, and they can pay for the room only for a short period of time

The Senate definition is not adequate to meet the needs of the families we serve on a daily basis. Just last Friday, I received a call from a mother of three young children, who was referred to me by the Food Stamp office. The family was moving from place to place and had nowhere to go. The mother told me she was ready to pull her children (ages 9, 12 and 14) from school – she just couldn't take it anymore. I could not allow this family to end up on the street, so I put them up in a motel using my own credit card.

I am not a government agency. I am not a charity. Was this family any less homeless? Should I have asked this mother, desperate and in crisis, for proof of her multiple moves prior to staying in the motel? What if she had only moved two times? Should I have advised her to uproot her children once more? When I called to check in on her on Sunday, her children were still sleeping; they had not slept for days previously. Constant moving and uncertainty has disrupted their lives physically and emotionally.

As this example illustrates, it would be harmful to predicate assistance on repeated moves. This flies in the face of what we know about healthy child development: routine, stability, and consistency are essential. Each and every move is traumatic and damaging for children and youth, especially those in deep poverty. Moreover, this definition will be very hard, if not impossible, for providers to verify with any degree of accuracy. Families and youth in crisis may have a hard time proving their multiple moves, especially when safety issues are present. Transportation arrangements for public schools also become more complicated and costly with multiple moves. With multiple moves, children lose books, clothing, services, stability, and friends. They are usually emotional wrecks, not knowing where they will be from day to day. Multiple moves also put children at greater risk of being physically and sexually abused by others. It is hard for homeless parents in these situations to keep their children safe.

For these reasons, S. 1518's proposed definition of "homelessness" is not satisfactory. The HEARTH Act's definition should be adopted instead. Our Continuum will not be "overwhelmed" with an expanded definition, as some have suggested; rather, we will be freed from a restrictive and short-sighted definition that currently limits our ability to help all people experiencing homelessness.

HUD's Community Planning Process

My program has been fortunate to benefit from a strong collaboration with the HUD Continuum of Care, through which we have assisted thousands of families over the past eight years. However, my program is rare: only two parish school systems in the state of Louisiana enjoy this level of collaboration and coordination. My fellow liaisons across the state – and the nation – often struggle to get a seat at the table in the HUD community planning process. Public schools are not necessarily seen as natural partners, and meeting the needs of children and youth is not always viewed as a priority. This is especially true since HUD has begun rewarding continuums that prioritize the "chronically homeless," which, by definition, excludes children and youth.

The HEARTH Act would address this problem by requiring community homeless assistance planning boards to include the participation of local school district homeless education liaisons, or their designee. This participation would help ensure comprehensive services for families and youth, while also preventing duplication of efforts. Participation of liaisons also would provide a consistent voice for children and youth, so that their needs are not overlooked, and so that the resources of schools and community agencies can be coordinated. The HEARTH Act also would help align federal education and housing policies by requiring that Continuum of Care applications include assurances that project sponsors will establish policies and practices that are consistent with, and do not restrict the exercise of, the educational rights of homeless children and youth. It would emphasize placing families with children as close to possible to the children's school of origin so as not to disrupt their education. This

requirement is necessary in order to ensure that families and youth are never put in the position of being forced to choose between their school and a shelter bed.

Unfortunately, the Senate bill, S. 1518, contains none of these provisions for bringing public schools and shelter agencies closer together in their efforts to end homelessness, and ensuring that homeless children and youth – who are already so invisible in their communities – do not get lost in community dialogue and planning initiatives on homelessness.

There is, however, an important provision in the Senate bill that I would like to highlight and support. The Banking Committee-approved version of S. 1518 seeks to prevent family shelters, transitional housing, and permanent housing programs receiving HUD McKinney-Vento funds from denying admission to families based on the age of any of the children in the family. This provision is particularly important to help curb the practice in some family shelters and family housing of denying admission of families with older children, or denying admission to the older children only, based on the erroneous assumption that older children threaten the safety of other residents of the shelter or housing. This bias and resulting practice of denying admission to the whole family, or older children of the family, tears families apart and creates unaccompanied youth homelessness. Homeless families with older children should be allowed to remain intact to support each other as they struggle through the crisis of homelessness.

Permanent Housing Set-Asides/National Priorities

The HEARTH Act allows each community to prioritize the housing and services options that best meet local needs, based on a gaps and needs analysis to ensure that communities do not ignore top priority populations – including children and youth.

In contrast, the Senate bill codifies the 30 percent set aside limited to permanent housing for homeless individuals with disabilities and families where an adult head of household (but not a child) has a disability, adds an additional ten percent set-aside for permanent housing for non-disabled homeless families, and also codifies additional incentives focused on chronic homelessness. This top-down, one-size-fits-all approach prevents us from addressing the needs that we identify, and once again relegates children and youth to a lesser status in HUD homeless policy.

For example, current HUD policy has forced my local Continuum of Care to prioritize housing for single adults with disabilities. This is an important activity, but if it comes at the expense of housing and services for populations who are equally vulnerable, we are not doing what we need to do to end homelessness. Children and youth have disproportionately high rates of disabilities and developmental delays; indeed, the very fact of their homelessness puts them at risk. Yet HUD policy does not acknowledge the needs of children with disabilities, the ill effects of homelessness on children more generally, their need for special services, or the likelihood that without attention to their needs, they are at significant risk of experiencing homelessness as adults.

Two years ago, we provided services to a family consisting of a mother and her eight children, one of whom has a disability. They were stable for a year, and then the mother returned to Lake Charles in an unstable situation. Last year, one of the daughters

who remained in my parish came to our office in need of assistance. Now that daughter has a child, and is once again in need of housing services. Without more attention to children and youth and better services for families, the cycle of homelessness will repeat, and we will never end homelessness in this nation.

Funding

More funding also is needed for the following services:

- CDBG Funds
- HOME Funds
- Tax credits to target setasides for families in homeless situations
- More safe havens for youth

Conclusion

The current HUD approach to homelessness is not working – certainly not for children and youth. All too often, it places the needs of adults before the needs of children. In what other area of social policy do we allow ourselves to say: "Let's take care of the adults first – the kids can wait" ?

The HEARTH Act is the best vehicle for the reauthorization of the HUD McKinney-Vento Homeless Assistance Programs. It provides a much stronger approach than the Senate bill, and it brings us closer to a federal policy that is inclusive, comprehensive, and responsive to the needs of all people who are homeless in our communities.

The Testimony of

Ms. Amy Weintraub

Executive Director of
Covenant House of West Virginia

Before the Committee on
Financial Services

United States House of Representatives

Working Towards Ending Homelessness: Reauthorization of the McKinney-Vento Homeless Assistance Act/ Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), H.R. 840

October 4, 2007

Introduction

Good morning and many thanks for the opportunity to appear before the Committee to address concerns about homelessness in this country and the reauthorization of the McKinney-Vento Homeless Assistance Act. As an advocate for victims of domestic violence and homelessness, I am honored to be here today. We in West Virginia deeply appreciate the committee's concern about the complex issues that cause homelessness and the best strategies for ending it. It means so much to Americans at risk of losing their housing that you are carefully considering all aspects of homelessness in the reauthorization of the McKinney-Vento Homeless Assistance Act.

I speak this morning on behalf of Covenant House of West Virginia, the Kanawha Valley Collective, and the West Virginia Coalition Against Domestic Violence.

Covenant House of West Virginia is a nonprofit organization dedicated to working for justice by offering direct services for people in need while creating social change through advocacy and education. We operate a day shelter and drop in center for those in Charleston living in homelessness or who are at risk of homelessness, providing case management, showers, laundry facilities, and emergency assistance. Our AIDS Residential & Resource Program, funded through HUD's Housing Opportunities for People with AIDS provides comprehensive supportive services to help low- and no-income West Virginians who are living with HIV or AIDS to sustain safe, secure housing. We also own three houses in downtown Charleston, providing permanent shelter for people with disabilities.

The Kanawha Valley Collective (KVC) is a consortium of organizations working collaboratively through direct services, advocacy, education and prevention to provide a seamless service delivery system addressing the impact of poverty, homelessness, and other social problems. Serving as our local Continuum of Care, KVC Collective works to enrich the quality of life for individuals and families in the Kanawha Valley and surrounding areas.

The West Virginia Coalition Against Domestic Violence (WVCADV) is a nonprofit organization dedicated to working toward a peaceful society where domestic violence no longer exists. The Coalition was organized more than two decades ago as a network of shelters for battered women and their children, and organizations and individuals concerned about the issue of domestic violence. The WVCADV serves domestic violence victims throughout the state through its 14 member shelter programs.

The HEARTH Act: Addressing the Needs of Those Facing Domestic Violence or Homelessness

The beautiful piece of legislation currently before you, the "Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), H.R. 840, was introduced by U.S. Representatives Julia Carson (D-7th/IN), Geoff Davis (R-4th/KY), Rick Renzi (R-1st/AZ) and Barbara Lee (D-9th/CA). The HEARTH Act reauthorizes the McKinney-Vento Homeless Assistance Programs that are administered by the U.S. Department of Housing and Urban Development (HUD). HEARTH now has 75 additional co-sponsors.

Community Flexibility & Participation in Decision Making

West Virginia's motto is "Montani Semper Liberi" – Mountaineers Are Always Free. Our communities have a long history of resisting control from above, subscribing to the theory that we know best how to serve our own needs. For West Virginians, passage of the HEARTH Act will mean greater decision-making at our local levels, preserving community flexibility in both rural and more populated settings. With passage of this bill, our localities will be allowed the flexibility to implement a range of housing solutions and be able to use HUD homeless assistance funds to meet our communities' most pressing local needs. We will continue to use gaps and needs analysis, as called for in HEARTH, to ensure that communities do not ignore top priority populations – such as women and children who have been victimized by violence in their homes.

Further, the HEARTH Act ensures broad community participation in planning to end homelessness – a practice we in Charleston already have in place. We know first-hand the benefits that come from having those who have the most at stake at the decision-making table. We applaud the HEARTH Act's provision to include education liaisons, people experiencing homelessness, and domestic violence and youth service providers when local community priorities for the use of HUD homeless assistance funding are set. Additionally, we are in full support of HEARTH's guarantee that the civil rights of homeless persons or the educational rights of homeless children and youth will be met.

Serving Those in Need

The HEARTH Act more closely aligns the HUD definition of homelessness with other federal agency definitions, which will translate into a greater number of homeless West Virginia families assisted. Today, we are finding that most victims of domestic violence, as well as all homeless families, are currently excluded from HUD's chronic homeless initiative and from McKinney-funded permanent housing, despite their rising in numbers.

Why? Because these women and families are living doubled-up temporarily or in motels – a living situation which HUD will not recognize as homelessness. Due to this issue, we have found it extremely difficult to provide adequate and necessary services for these people in need. In Kanawha County many families, especially those escaping domestic violence situations, often choose to be doubled or tripled up instead of using emergency shelters. These victims need access to emergency, transitional and permanent housing or else their safety, and the safety of their children, is at risk. There are significant consequences to the community, including perpetuating both homelessness and domestic violence, when victims and their children are not served. Children sleeping in a rural West Virginia roadside motel with their mother are in as much need of comprehensive support services related to housing as if they were staying in an emergency night shelter in downtown Charleston. Yet, HUD-funded services are not available to them as they do not meet the HUD definition of what it means to be homeless.

We know that the Department of Education, with its broader view of homelessness, recorded last year that 467 school-aged children were reported as homeless in Kanawha County. However, fewer than one quarter actually resided in shelters. The more than 300 children not residing in a shelter, but who were staying with friends or relatives, or who were staying in motels, were not considered homeless by HUD. As stated above, all our homeless children deserve to have the same opportunities for housing as all homeless people.

At the same time, due to limits imposed by HUD, those of us reporting to that agency are reporting what we consider to be inaccurate numbers as to how many homeless people we are actually serving – or who need to be served. The fact is, until HUD aligns its definition with McKinney-Vento Education for Homeless Children and Youth (EHCY), we will continue to severely under-report numbers of those experiencing homelessness.

Restricting the definition does not change the reality of those struggling with homelessness. Whether they are called homeless or not, the Ferrante family is still bunking on the living room floor of Great Aunt Gussie on Charleston's West Side. Emily Priaulx is still going to church to church begging ministers for enough money to pay for another night at the Ivy Terrace Motel in Kanawha City for herself and her kids. And, the Fuller, the Smithson, and the Beal families are all crammed into one 2-bedroom trailer in Cabin Creek. Homeless? I think so.

Further, the Covenant House staff and the case managers from my partnering agencies in Charleston increasingly report frustration at not being able to refer some homeless families to other community providers because those providers do not serve those in motels and those who are doubled-up. An unemployed man who has been staying at a flea bag motel for a month and who needs resume and interview preparation help is not able to access Charleston's YWCA Job Readiness Center – it is only for the homeless. A woman moved from an emergency shelter in with a sketchy new boyfriend and has ongoing emotional and health needs, yet had to be dropped from intensive case management as she was no longer considered homeless under our Supportive Services Continuum of Care grant.

The idea that the system will somehow be overwhelmed by a broader HUD definition is unfounded. School districts have been using the broader definition for more than 10 years, and, unlike HUD homeless assistance, the education statute is an entitlement with greater costs (transportation, etc.). Yet there has been no "the sky is falling" response. The fact is, recognizing and acknowledging the predicament and needs of all homeless people similarly across federal agencies has the potential to actually streamline delivery systems and make the federal machine more efficient.

Although Covenant House and our partnering West Virginia agencies and organizations are fully committed to the idea that needs of the hardest to serve and most in need will always be our top collective responsibility, we want to provide services for all who are homeless, whether they are living in a shelter or on the streets or otherwise. It is for this reason that Covenant House and the Kanawha Valley Collective strongly support the revision of this definition, so those who are working with this population can efficiently and sufficiently assist those who need it the most.

Critical Supportive Services

Providing new and flexible resources for homelessness prevention, the HEARTH Act provides a framework for greater homelessness prevention activities. Many victims of domestic violence and their children are in danger of becoming "chronically" homeless if intervention is not provided sooner. Certainly Congress would rather help people ***before*** they spend a year on the street, lose custody of their children, and develop disability, mental illness, or substance abuse problem.

It is imperative that funding is given to programs to address issues of education, employment, drug free environments, etc. Homelessness will continue to exist until the issues such as these are decreased in our West Virginia communities. By broadening the existing definition of prevention and allowing prevention activities to be funded through Emergency Shelter Grant

(ESG) program or "competitive" homeless assistance program, HEARTH will work to provide local flexibility in use of prevention funds.

Rural Solutions for Rural Communities

The HEARTH Act adopts a simple approach to meeting needs of rural communities. By aligning HUD's definition of homelessness with the definition used by other federal agencies, it ensures that people who are without homes in rural communities are counted as "homeless." West Virginia's mountainous and rugged topography has stifled the growth of towns and cities in remote parts of the states. Roadways wind along creek and river beds, with small houses dotting the country side. We call it community, but admittedly we also call it a house here and there along the road. Almost no small towns have any kind of shelter or affordable housing programs due to current HUD set-asides and incentives that favor urban areas. This forces rural West Virginians out of their home communities and to the big city for help. It is unfair to those families living in rural America who are struggling to keep their families under roof.

The removal of current HUD set-asides and incentives will allow rural areas to spend funds flexibly to most effectively prevent and end homelessness.

Victims of Domestic Violence Protected

By prohibiting the disclosure of any information collected by a housing or social service provider that could identify them and by permitting victims of domestic violence who may be in danger to immediately move to a safer living situation, the HEARTH Act works intentionally and proactively to protect victims of domestic violence.

McKinney-Vento funded services are critical to meeting the shelter and housing needs of victims of domestic violence – programs must continue to receive McKinney funding. Victims frequently stay in homeless shelters because domestic violence shelters are full or because they

don't identify themselves as "battered women." Therefore all shelters that serve women and families need support if we are to help victims of DV.

S. 1518: Flawed Legislation

Per your request, Covenant House and the Kanawha Valley Collective Continuum of Care have considered S. 1518, the Community Partnership to End Homelessness Act (CPEHA), which reauthorizes the HUD Homeless Assistance Programs. We find it flawed in several respects.

Attempted Homeless-Definition Expansion: A Day Late & A Dollar Short

First, although it does expand the definition of homeless beyond the current HUD definition, the expansion proposed in S. 1518 falls short of satisfying actual needs we see here on the ground in Charleston. For example, S. 1518 will include people in motels, but only if their bills are paid for by a government program or charity or IF they have moved three times in one year or two times in the past 21 days, AND they can only pay for the room for a short period of time.

Another S. 1518 definition expansion that falls short is the allowance to individuals and families who are doubled-up as homeless, but only IF they have moved three times in one year or two times in the past 21 days, AND they have been notified by the owner or renter of their lodging that they can only stay for a short time period, AND they don't have resources to contribute to rent.

This expansion is inadequate and harmful in many respects. It would force families and youth in motels and who are doubled-up to move repeatedly before they are eligible for HUD homeless assistance.

Healthy child and youth development is predicated on routine, consistency, and stability. Each and every move is traumatic for children and youth -- especially those in deep poverty. This

provision would be harmful to families and individuals by forcing repeated disruption of their living situation; it also is contrary to the goal of preventing chronic homelessness. For service providers, verification of multiple moves will be time-consuming and difficult; for families and youth in crisis, this requirement creates more administrative hoops through which they must jump in order to receive the help they need.

Community Collaboration? Gone!

Important provisions have been stripped from the bill regarding how recipients are evaluated, including the extent to which they address the needs of relevant special populations (including persons with disabilities, children and families, unaccompanied youth, and veterans) and whom should be consulted in the development of the application, including homeless education liaisons and persons experiencing homelessness.

Onerous Permanent Housing Set-Asides Steal Local Decision-Making

S. 1518 maintains a set-aside for permanent supportive housing that denies communities the ability to meet the needs of all homeless populations that they identify, including families with children and unaccompanied youth.

On behalf of victims of homelessness and domestic violence in West Virginia and around the country, I thank the Committee for this opportunity to testify. West Virginia advocates for victims of homelessness and domestic violence are in strong support of reauthorizing the McKinney-Vento Homeless Assistance Act and the "Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), H.R. 840. We believe that by working together a bill can be passed that meets the needs of diverse communities. We look forward to working with the Financial Services Committee to achieve legislation that returns control to our local communities and works for homeless families, including victims of domestic violence. Thank you again for your leadership to end both domestic violence and homelessness.

HR 840 (HEARTH Act) – *Homeless Emergency Assistance and Rapid Transition to Housing Act of 2007*

I appreciate the opportunity to be here today in support of the HEARTH Act on behalf of people who experience homelessness and the Continuum of Care in the Northern Kentucky area. I am Linda Young, Executive Director of Welcome House of No. KY. The agency has been serving the homeless and at risk population for 25 years providing a continuum of services ranging from outreach to people on the streets, a food pantry, emergency shelter, payee and other financial services, case management and employment services, and service enriched housing for families whose goal is self-sufficiency. We served 9,700 people in 2006. 99% had incomes under $10,000; approximately 35% had a significant mental illness or mental health issue; 40% had a chemical dependency issue, 45% were homeless because of domestic violence and most were poorly educated. The fastest growing segment of the homeless population we serve is families – 40%. We are in an urban setting that is part of the Greater Cincinnati metropolitan area.

The economic realities of a minimum wage job that doesn't lift a family out of the poverty level, rising housing and utility costs, a drop in the manufacturing sector and rise in the service sector with lower paying jobs for unskilled/semiskilled workers have huge costs. The demand for shelter has increased; however, the people residing in shelters are just the tip of the iceberg. The condition of homelessness is for the most part hidden. There is a significant number of families living doubled up with family and friends because their earnings do not cover basic household expenses. Moving frequently makes it difficult to keep a job and children miss enough schooling to prevent them from getting an education – the very thing that

gives them a chance to find a way out of poverty and at risk of being homeless. These families do not meet the current definition of homeless therefore are not eligible for our services until they go into a shelter or are on the street.

More recently priorities have shifted to the "chronic" homelessness initiative and in the future less emphasis and funding for the renewal of supportive services grants for the homeless.

HUD defines a chronically homeless person as "an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more **OR** has had at least four (4) episodes of homelessness in the past three (3) years." To be considered chronically homeless a person must have been on the streets or in an emergency shelter (i.e. not transitional housing) during these stays.

By prioritizing funds to this specific population as defined is very limited and diverts funds away from homeless families. The Continuum of Care has been built on an integrated approach of housing and services inclusive of people who are chronically homeless. In our region we work together to provide a comprehensive holistic approach to meeting a range of needs of homeless people in our community. Housing developers using HUD funds, public housing and private landlords have learned to rely on the support services to stabilize individuals and families who are homeless. Case management is often a condition for which housing is accessed by people with poor rental histories and/or who have disabilities and challenges to maintaining stability. A reduction in these services will have a devastating impact. A basic understanding of the Continuum of Care process is that homelessness is not caused merely by a lack of shelter, but

involves a variety of underlying, unmet needs. Housing alone will not address the issues of homelessness.

From the perspective of the director of a relatively small agency that provides services for the homeless, I can tell you that one of my biggest concerns is the number of children we are serving. In 2006, 39% of the people served at Welcome House were children; over half under 5 years of age - and two of our programs serve primarily singles without children. If we are truly interested in ending homelessness, it will take a concerted effort on many focused fronts - not concentrating on one group at the expense of others.

I have been an active participant in the Continuum of Care system in the Northern Kentucky area for over 12 years. The Continuum of Care has included faith based organizations, businesses, government, service providers, landlords, professionals, advocates and people who have been homeless. Over time we have built a comprehensive approach to planning, organizing, evaluating, and advocating. Because we must make the most of the resources in our community, we have learned to be innovative and work together more effectively and efficiently through this process. The Homeless Assistance grants have provided critical resources for emergency shelter, transitional housing, supportive housing and supportive services. Ours as well as Continuum of Cares across the country are functioning as HUD intended - A continuum of care system designed to address the critical problem of homelessness through a coordinated community-based process of identifying needs and building a system to address those needs. The approach is predicated on the understanding that homelessness involves a variety of underlying, unmet physical, economic, and social needs.

Each Continuum of Care community is unique. Urban, suburban and rural communities in various geographic locations have much different needs, available resources and approaches. I support that planning boards, as recommended in the HEARTH act, be established in each locality to design, execute and evaluate programs, policies, and practices to prevent and end homelessness. Existing 10 year plans to end homelessness can serve as the map for these planning boards. The planning boards would be held accountable for outcomes in the plan, forming broader coalitions, assist in obtaining the required cash match and leverage significant collaborations with funders and resources in the community such as United Way, foundations, corporations, etc.

I first came to know Congressman Goeff Davis about 4 years ago (before he was a Congressman) when as a business consultant he offered his professional expertise in assisting us with an innovative idea for expanding employment services for clients and ways for non profits to become self sustaining. A great example of how businesses and others can partner with social service providers for creative solutions for ending homelessness. He continues to work with service providers in his district to address the needs of the homeless populations in our communities.

Thanks to you all for your interest in creative solutions to ending homelessness.

Definition of Homeless

The federal government's definition: *1) an individual who lacks a fixed, regular, and adequate nighttime residence; and 2) an individual who has a primary nighttime residence that is a) a shelter; b) hospital, residential treatment or c) a public or private place not designed for or ordinarily used as, a regular sleeping accommodation for human beings.*