



NATIONAL COALITION *for* HOMELESS VETERANS

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Statement for the Record

**Before the
Subcommittee on Economic Opportunity**

**Committee on Veterans' Affairs
U.S. House of Representatives**

**on
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Executive Summary

Part I—HVRP Reauthorization Act of 2005

- Reauthorize the Homeless Veterans Reintegration Program for a five-year period.
- Expand the eligible population for HVRP to include veterans at imminent risk of homelessness.
- Reauthorize HVRP at a \$50 million level annual.
- Appropriate funds for HVRP at the full \$50 million level currently authorized.

Part II—H.R. 419, Hire Veterans Act of 2004

- Withhold reauthorization of the President's National Hire Veterans Committee until questions are answered regarding the effectiveness of the HireVetsFirst Campaign and the Committee's efforts to encourage employers to hire veterans with serious barriers to employment.

PART III—Service Members' Enhanced Transition Services Act

- Enact the Service Members' Enhanced Transition Services Act to improve transition assistance provided for members of the Armed Forces being discharged, released from active duty, or retired.

PART IV—Reauthorization of VA Specialized Homeless Programs

- Reauthorize, strengthen, and expand the specialized homeless programs and authorities of the Department of Veterans Affairs.

Introduction

The National Coalition for Homeless Veterans appreciates the opportunity to submit recommendations regarding the draft Homeless Veterans Reauthorization Act of 2005 and H.R. 419, the Hire Veterans Act of 2004. Our statement also addresses current issues of likely interest to the Subcommittee regarding service member transition and reauthorization of the specialized homeless programs of the U.S. Department of Veterans Affairs.

The **National Coalition for Homeless Veterans** (NCHV), established in 1990, is a **nonprofit organization** with the **mission of ending homelessness among veterans** by shaping public policy, promoting collaboration, and building the capacity of service providers. NCHV's nearly 250 member organizations in 46 states and the District of Columbia provide housing and supportive services to homeless veterans and their families, such as street outreach, drop-in centers, emergency shelter, transitional housing, permanent housing, recuperative care, hospice care, food and clothing, primary health care, addiction and mental health services, employment supports, educational assistance, legal aid and benefit advocacy.

The VA estimates that approximately 250,000 veterans are homeless on any given night; more than 500,000 experience homelessness over the course of a year. *Conservatively, one of every three homeless adult males sleeping in a doorway, alley, box, car, barn or other location not fit for human habitation in our urban, suburban, and rural communities has served our nation in the Armed Forces.* Homeless veterans are mostly males (2 percent are females). 54 percent are people of color. The vast

majority are single, although service providers are reporting an increased number of veterans with children seeking their assistance. 45 percent have a mental illness. 50 percent have an addiction.

America's homeless veterans have served in World War II, Korea, the Cold War, Vietnam, Grenada, Panama, Lebanon, anti-drug cultivation efforts in South America, Afghanistan, and Iraq. 47 percent of homeless veterans served during the Vietnam Era. More than 67 percent served our nation for at least three years and 33 percent were stationed in a war zone.

Male veterans are twice as likely to become homeless as their non-veteran counterparts, and female veterans are about four times as likely to become homeless as their non-veteran counterparts. *Like their non-veteran counterparts, veterans are at high risk of homelessness due to extremely low or no income, dismal living conditions in cheap hotels or in overcrowded or substandard housing, and lack of access to health care.* **In addition to these shared factors, a large number of at-risk veterans live with post traumatic stress disorders and addictions acquired during or exacerbated by their military service. In addition, their family and social networks are fractured due to lengthy periods away from their communities of origin. These problems are directly traceable to their experience in military service or to their return to civilian society without appropriate transitional supports.**

Contrary to the perceptions that our nation's veterans are well-supported, in fact many go without the services they require and are eligible to receive. One and a half million veterans have incomes that fall below the federal poverty level. **Neither the VA, state or county departments of veteran affairs, nor community-based and faith-based service providers are adequately resourced to respond to these veterans' health, housing, and supportive services needs.** For example, the VA reports that its homeless treatment and community-based assistance network serves 100,000 veterans annually. *With an estimated 500,000 veterans experiencing homelessness at some time during a year and the VA reaching only 20 percent of those in need, 400,000 veterans remain without services from the department responsible for supporting them.* **Likewise, other federal, state, and local public agencies—notably housing and health departments—are not adequately responding to the housing, health care and supportive services needs of veterans.** Indeed, it appears that veterans fail to register as a target group for these agencies.

Our statement is organized in four parts. The first part focuses on the draft HVRP Reauthorization Act of 2005. The second part focuses on H.R. 419, the Hire Veterans Act of 2004. The third part focuses on service member transition. The fourth part presents our recommendations for reauthorization of the specialized homeless programs of the U.S. Department of Veterans Affairs.

PART I—HVRP Reauthorization Act of 2005

NCHV is privileged to testify today on the reauthorization of the Homeless Veterans Reintegration Program (HVRP) -- privileged in that NCHV, commemorating its 15-year anniversary this year, owes its founding to HVRP. It was at the first meeting of HVRP grantees that our organization's founders met each other and came to appreciate that they were not working in isolation -- that there were others sharing their concern with the tragedy of homelessness among our nation's former service members and taking action about it. Our founders learned at that first HVRP meeting that a network of allies existed across the nation. They determined that, perhaps, by joining forces, they could win the war against homelessness among veterans. And so NCHV was born.

At the same we are saddened to be a witness today -- saddened that there is still a need over 15 years later to hold a another Congressional hearing on homeless veterans, saddened further that there is still a need for the Homeless Veterans Reintegration Program. Frankly, our founders and members expected that by

now WE would be out of business, much less HVRP. That we are here today is a call to arms – a challenge to each American to **take immediate action to end homelessness, especially among those who have nobly served our nation.**

An immediate first step – shocking in fact that it has not yet come to pass -- would be to appropriate funding for HVRP in FY 2006 at its full authorization level of \$50 million. *We challenge each member of the House Veterans' Affairs Committee to correspond with their counterparts on the Appropriations Committee singularly or as a body and demand that they honor the authorization level that this Committee set as a source of direction. An appropriation at the full authorization level would enable HVRP grantees to reach approximately 24,000 homeless veterans.*

The Homeless Veterans Reintegration Program (HVRP), within the Department of Labor's Veterans Employment and Training Service (VETS), provides competitive grants to community-based, faith-based, and public organizations to offer outreach, job placement and supportive services to homeless veterans. HVRP grants are intended to address two objectives: (a) to provide services to assist in reintegrating homeless veterans into meaningful employment within the labor force, and (b) to stimulate the development of effective service delivery systems that will address the complex problems facing homeless veterans.

HVRP is the primary employment services program accessible by homeless veterans and the only targeted employment program for any homeless subpopulation. *Homeless veterans have many additional barriers to employment than non-homeless veterans due to their lack of housing. HVRP grantees remove those barriers through specialized supports unavailable through other employment services programs. Grantees are able to place HVRP participants into employment for \$2,100 per placement, a tiny investment for moving a veteran out of homelessness, and off of dependency on public programs.*

DOL estimates that 14,750 homeless veterans will be served through HVRP at the FY 2005 appropriation level of \$21 million. **This figure represents just three percent of the overall homeless veteran population,** *which the Department of Veterans Affairs estimates numbers more than 500,000 over the course of a year.*

We appreciate the Subcommittee's obvious interest in the interest in HVRP as made evident by preparing the draft reauthorization bill. We are particularly grateful that the legislation proposes to continue to set a \$50 million authorization level.

Reauthorize HVRP for a five-year period. A longer authorization period is particularly important given the current proposal by the Administration to fundamentally restructure our nation's veterans' workforce program within its "WIA Plus" proposal. While NCHV has received assurances that HVRP funds would not be eligible for consolidation within the "WIA Plus" consolidated grant, we remain cautious, particularly since early descriptions of "WIA Plus" did include HVRP within its scope.

We appreciate this Subcommittee's efforts to protect the integrity of DOL VETS programs overall within the larger discussion around reauthorization of the Workforce Investment Act. We urge you to continue in this direction by reauthorizing HVRP for a five-year period, if for no other reason than to send a clear message to your colleagues on Education and Workforce and to the Administration that this targeted, community-based and faith-based program is "off the table."

Expanding the eligible population for HVRP to include veterans at imminent risk of homelessness. HVRP in its present form is limited to veterans currently experiencing homelessness (38 U.S.C. 2021(a)).

This eligibility limitation prevents grantees from using HVRP funds for homelessness prevention. This eligibility restriction was appropriate when HVRP was first enacted in 1987. At the time, the hope was that homelessness could be resolved by an intensive infusion of resources to literally homeless people. In 2005, *restricting the program to veterans already homeless is out of step with the general thrust of both public policy and service delivery practice away from simply managing homelessness to also preventing it.* **Expansion of the eligible population for HVRP services to include veterans at imminent risk of homelessness would enable HVRP to have both preventative and remedial purposes.**

Also, HVRP is being used as the account to fund a joint Department of Labor and Department of Veterans Affairs initiative authorized by Congress to assist veterans incarcerated in their reentry to the community. Use of HVRP to fund this program is technically a violation of the statute in that veterans incarcerated are not homeless. This technical violation could be easily remedied by adding veterans at imminent risk of homelessness as an eligible population to the program.

Part II—H.R. 419, Hire Veterans Act of 2004

The National Coalition for Homeless Veterans generally supports efforts that generate employment opportunities for veterans. Veterans with jobs are less likely to lose their housing than are veterans without sources of income. As such, we had no reason to be anything other than supportive of Congress's decision to establish the President's National Hire Veterans Committee in the Jobs for Veterans Act.

At the time of the Committee's formation, NCHV received assurances that homeless veterans would be a target veteran subpopulation of the Committee's public awareness campaign. We now question the sincerity of that pledge as we have never received a communication from the President's National Hire Veterans Committee.

More broadly, we are interested in knowing how the Committee is tracking specific and measurable outcomes of its work, and what those outcomes are. How many veterans have actually been hired due to the HireVetsFirst campaign? And what actions is the Committee taking to promote hiring of veterans with serious barriers to employment?

We are also concerned that funding for the President's National Hire Veterans Committee and the HireVetsFirst campaign is drawn from the VETS State Grants (DVOP/LVER) program account, diverting precious resources that are known to put veterans to work to a public awareness campaign that has no evidence-base.

Given these concerns, we withhold support for the Hire Veterans Act of 2004 and recommend that the Committee postpone reauthorization of the President's National Hire Veterans Committee until its efficacy can be demonstrated.

NCHV would be pleased to reconsider our position if proponents of the Committee offer evidence of its effectiveness and provide assurances that the HireVetsFirst campaign will prioritize promotion of the hiring of veterans with serious barriers to employment such as homelessness, incarceration histories, and age.

PART III—Service Members' Enhanced Transition Services Act

Current law (10 U.S.C. 1142) requires the Departments of Defense and Homeland Security to provide individual pre-separation counseling to each member of the armed forces whose discharge or release from active duty is anticipated. Matters covered during the counseling include: a discussion

of educational assistance, compensation, and rehabilitation benefits to which service members are entitled; information concerning job search and job placement assistance; information concerning relocation assistance; information concerning medical and dental coverage; financial planning assistance; and the creation of a transition plan for the service member. Preseparation counseling takes many forms, but tends to be brief group presentations to service members immediately prior to their separation.

Generally, in the case of an anticipated retirement, preseparation counseling shall commence as soon as possible during the 24-month period preceding the anticipated retirement date. In the case of a separation other than retirement, counseling shall commence as soon as possible during the 12-month period preceding the anticipated date. Counseling shall be made available no later than 90 days prior to separation. Service members being discharged or released before the completion of that member's first 180 days of active duty are not eligible for preseparation counseling, unless the separation is due to disability.

Current law (10 U.S.C. 1144) authorizes the Department of Labor to furnish counseling, assistance in identifying employment and training opportunities, help in obtaining such employment and training, and other related information and services to members of the armed forces who are being separated from active duty. Elements of this program, known as the Transition Assistance Program (TAP), include information concerning employment and training assistance; information concerning Federal, state, and local programs and programs of military and veterans' service organizations; information about small business loan programs for veterans; information about the geographic locations to which members are returning; and other matters. Participation in the program is encouraged, not required. TAP is a three-day group-level workshop.

Current law (10 U.S.C. 1142(c)) requires the Secretaries of Defense and Homeland Security to transfer the medical records of service members being medically separated or being retired to transmit a copy of the members' service medical records to the U.S. Department of Veterans Affairs.

Former service members with whom homeless veteran service providers are in daily contact report that the preseparation counseling and transition assistance programs are lacking in a number of areas. Among their concerns: the depth and content of preseparation counseling is quite variable across delivery sites. Preseparation counseling may be limited to brief group-level presentations rather than individualized transition planning (as is contemplated in the statute). **Service member participation in the Transition Assistance Program is at the will of the unit commander, and often allowed only during off-duty time. Neither program includes content on homelessness awareness or housing counseling assistance and referral.** Service member medical records are not automatically transferred to VA in a timely manner to ensure the former service members' access to clinically appropriate care when they first enter the VA health care system.

Weaknesses in both the content and delivery of service member separation programs result in some service members failing to receive information necessary to ensure their stable health care, steady employment, and secure housing upon their return to civilian life. **This places service members at increased risk of homelessness.**

In response to these concerns, NCHV has developed a legislative proposal, the **Service Members' Enhanced Transition Services Act of 2005**, to improve transition assistance provided for members of the Armed Forces being discharged, released from active duty, or retired.

The Service Members' Enhanced Transition Services Act strengthens the existing programs of the Department of Defense, the military branches, and the Department of Labor that support our

nation's separating service members as they return to civilian life. *The legislation would ensure equity in access to preseparation counseling and transition assistance regardless of the service members' type of service, military branch, duty station, rank, or discharge condition. The bill would improve the quality of preseparation counseling currently available by making as much as eight hours of individualized transitional assistance available to service members in addition to group workshops. Further, the legislation would expand the scope of content to be covered in preseparation counseling and transition assistance to ensure the dissemination of full information on the health care, compensation, employment and housing benefits to which service members and veterans are eligible.*

We urge Committee members to introduce or co-sponsor the Service Members' Enhanced Transition Services Act and to ensure its enactment this session. *While we believe the Armed Services Committee would be assigned primary jurisdiction of the legislation, we welcome Veterans' Affairs Committee and committee member leadership to advance this important legislative proposal.*

PART IV—Reauthorization of VA Specialized Homeless Programs

In addition to the Homeless Veterans Reintegration Program, many other programs that Congress has authorized to address homelessness among veterans are scheduled to sunset in 2006 and merit extension. In addition, new issues affecting homeless veterans and a greater understanding of the gaps in supports for them have emerged that require a Congressional response. The National Coalition for Homeless Veterans urges Congress to reauthorize, strengthen, and expand the specialized homeless programs and authorities of the Department of Veterans Affairs. Our legislative recommendations follow.

A. Reauthorize and Strengthen Existing VA and DOL Specialized Homeless Programs

1. Reauthorize the Homeless Providers Grant and Per Diem Program through FY 2011 at at least the \$200 million level annually. The Homeless Providers Grant and Per Diem (GPD) Program (38 U.S.C. 2011-2013) provides competitive grants to community-based, faith-based, and public organizations to offer transitional housing or service centers for homeless veterans. The GPD program is set to expire September 30, 2006. The current authorization level for the program is \$99 million. Collectively, nearly 100 GPD providers offer nearly 10,000 transitional housing beds. More than 150 outreach and transportation vans are supported through the program.

The GPD program is an essential component of the VA's continuum of care for homeless veterans, assuring the availability of transitional housing, social services, employment supports, and direct treatment or referral to medical treatment. *Congress should continue the program for a five-year period.*

The current authorization level for GPD is simply insufficient to enable VA to meet the demand for transitional housing assistance expressed by homeless veterans. Data gathered by VA Medical Centers (VAMCs) through the Community Homelessness Assessment, Local Education, and Networking Groups (CHALENGs) process consistently document that the numbers of homeless veterans in their service areas far exceed the number of GPD beds currently available for them. Without an increase in the authorization level, VA will not be able to add new beds. Furthermore, as the per diem rate to cover the daily cost of care rises annually, there could be an actual reduction in the number of beds, if the authorization level is not increased. Accordingly, *Congress should double the authorization level.*

2. Require VA to pay GPD grantees per diem payments without adjustments. Congressional intent when it adopted 38 U.S.C. 2012(a) (2) was to simplify the process for paying GPD grantees. Regrettably, the construction of the statutory language itself has led to GPD grantees being required to submit extensive documentation on all of their sources of project funding in order to secure per diem payments at

the maximum rate permitted by statute (which is the rate authorized for State homes for domiciliary care), straining grantees and VA alike. *Congress should amend the statute to require VA to pay GPD grantees per diem payments without adjustments.*

3. Establish preference for current GPD grantees over new applicants in GPD “per diem only” competitions. Grantees receiving funds through GPD “per diem only” competitions are periodically subjected to re-competition against new applicants rather than treated as renewal applicants. This places current GPD projects at perpetual risk of closure. *Congress should insert a preference for current grantees in per diem only competitions.*

4. Include permanent housing assistance as an eligible use of GPD funds. Use of GPD grant funds is currently limited to expansion, remodeling, or acquisition of facilities for use as service centers, transitional housing, or other facilities to serve homeless veterans and to procurement of vans for use in outreach to and transportation for homeless veterans. Homeless veteran service providers struggle to secure placement of some of their program participants in permanent units following their completion of transitional programs due the shortage in low-income housing generally and veterans’ ineligibility for or low priority for some types of assisted housing that is available. *Congress should insert permanent housing assistance as an eligible use of GPD funds.*

5. Reauthorize the Homeless Veterans Reintegration Program through FY 2011 at at least the \$50 million level annually.

We discuss this recommendation in Part I of this statement for the record.

6. Expand eligible population for Homeless Veterans Reintegration Program to include veterans at imminent risk of homelessness.

We discuss this recommendation in Part I of this statement for the record.

7. Reauthorize Treatment and Rehabilitation for Seriously Mentally Ill and Homeless Veterans through FY 2011. Current law (38 U.S.C. 2031) authorizes VA to provide outreach services; care, treatment, and rehabilitative services; and therapeutic transitional housing assistance to veterans with serious mental illness, including veterans who are homeless. This authority expires December 31, 2006. Rates of mental illness are high within the veteran population, meriting continuing focused attention to veterans’ mental health care. *Congress should continue this authority for a five-year period.*

8. Reauthorize Additional Services at Certain Locations Program through FY 2011. Current law (38 U.S.C. 2033) authorizes VA to provide comprehensive services centers to homeless veterans. VA's Comprehensive Homeless Centers place the full range of VA homeless efforts in a single medical center's catchment area and coordinate administration within a centralized framework. This authority expires December 31, 2006. *Congress should continue this authority for a five-year period.*

9. Reauthorize Grant Program for Homeless Veterans with Special Needs through FY 2011 at at least the \$5 million level annually. Current law (38 U.S.C. 2061) authorizes VA to carry out a program to make grants available to health care facilities of the Department and to GPD providers to encourage development of programs for homeless veterans with special needs, including women (with and without children), frail elderly, terminally ill, or chronically mentally ill. This program is authorized through FY 2005 at the \$5 million level annually. The special needs program has enabled VA and GPD providers to devote attention to underserved subpopulation within the homeless veteran population. *Congress should*

continue the program for a five-year period. Further, Congress should maintain the current authorization level of \$5 million.

10. Reauthorize the Homeless Veteran Service Provider Technical Assistance Program through FY 2011 at at least the \$1 million level annually. Current law (38 U.S.C. 2064) authorizes VA to make competitive grants to organizations with expertise in preparing grant applications to provide technical assistance to nonprofit community-based and faith-based groups with experience in providing assistance to homeless veterans in order to assist such groups in applying for homeless veteran grants and other grants addressing problems of homeless veterans. Community-based and faith-based organizations serving homeless veterans rely on a complex set of funding and service delivery streams with multiple agencies in order to assemble comprehensive housing and supportive services. These providers face a capacity gap around managing this complexity. *Congress should continue the program for a five-year period. Further, Congress should raise the authorization level from \$750,000 to \$1 million.*

11. Establish a specialized homeless program specific purpose account within the VA medical services appropriation and ensure that of such sums appropriated annually for VA medical services, the greater of \$350 million annually or a fixed percentage (to be determined) of the total medical services appropriation be reserved for specialized homeless programs.

Presently Congress plays no role in determining funding levels for medical programs within VA, including the Department's specialized homeless programs. Funding for veterans medical care is appropriated in aggregate to four accounts (medical services, medical administration, medical facilities, prosthetics and medical research), from which the VA Secretary allocates appropriated funds across VA health care networks and through the Department's specific purpose programs.

Congress has routinely provided increased funding to VA for medical care. Regrettably, these increases have not been distributed equitably among VA programs. Specialized homeless programs are among those that do not receive their "fair share" of the annual appropriation increase. The establishment of a specialized homeless program specific purpose account within the VA medical services appropriation would serve to ensure that specialized homeless programs receive any increase in VA appropriations in proportion to their costs within the overall VA medical care budget. *Congress should codify the specialized homeless purpose account in statute in order to ensure that VA makes consistent and fair allocations to its specialized homeless programs.*

The statute should direct VA to use funds within the homeless specific purpose subaccount to operate: the program of the Department known as the Health Care for Homeless Veterans, the program of the department known as Domiciliary Care for Homeless Veterans, comprehensive service programs (GPD) (Section 2011, Section 2012), outreach program (Section 2022), therapeutic transitional housing assistance (Section 2032), comprehensive services centers (Section 2033), loan guarantee for multifamily transitional housing program (Section 2051), grant program for homeless veterans with special needs (Section 2061), technical assistance grants for nonprofit community based groups (Section 2064), advisory committee on homeless veterans (Section 2066), Stand Downs, the evaluation center for homeless veterans programs, and any new specialized homeless programs authorized by statute or initiated by the Department.

B. Establish New Specialized Homeless Authorities

12. Authorize grant program for benefit assistance to homeless veterans through FY 2011 at at least the \$10 million level annually. Veterans who are disabled by injury or disease incurred or aggravated during active military service are eligible for VA Disability Compensation, a monthly payment. Veterans

are eligible for Social Security Disability Insurance and Supplemental Security Income benefits under the same conditions as any other person. Veterans are often eligible for both benefits. But because the programs themselves and their claims processes are distinct, a veteran must work their way through each one separately. Each process is grueling in and of itself. Navigation through both processes simultaneously merely compounds the complexity. In addition, scant attention is paid to assisting veterans in accessing mainstream health and income benefit programs for which they may be eligible including Medicaid, Food Stamps, and TANF. For homeless veterans—all of whom have higher priority needs such as securing a place to live, and some of whom either distrust or wish to avoid dependency on governmental programs—the various application processes may be insurmountable, without help.

Congress should authorize VA to carry out a program to make grants available to homeless veteran service providers for public benefit and veteran benefit outreach, application assistance, and reconsiderations and appeals support. Congress should authorize the program for a five-year period at the \$10 million level annually.

13. Authorize a study on the intersection of military sexual trauma and homelessness and effective service models for addressing trauma among homeless veterans. The VA Secretary's Advisory Committee on Women Veterans recommended in 2004 that a study be conducted on the possible correlation between military sexual trauma and homelessness among veterans and effective service models for assembling various treatment modalities and environments. The study should also include an evaluation of the "Seeking Safety" intervention, a treatment regime being made available to homeless women veterans in eleven locations. Preliminary data from Seeking Safety participants indicates that over 80 percent reported a history of life-threatening trauma, over 60 percent had been raped (with over 40 percent of rapes occurring while serving in the military.)

C. Expand Health Care Benefits to Homeless Veterans

14. Expand eligible population for homeless veteran dental care benefit. Current law (38 U.S.C. 2062) establishes a limited dental care benefit for certain homeless veterans. Under the provision, homeless veterans in certain VA homeless programs are eligible for a one-time course of dental treatment which is medically necessary for veterans to gain employment, to alleviate pain, or to treat disease.

Early VA data indicates that only 1,147 additional homeless veterans received dental care in FY 2003 as a result of this provision. The requirement that a homeless veteran participate in a VA residential program for at least 60 days is a major contributor to the underutilization of the dental care provision. *Congress should eliminate the 60-day eligibility restriction.*

15. Ensure provision of Assertive Community Treatment for all eligible homeless veterans. The VA Secretary's Mental Health Task Force recommended in 2004 that the Department offer Mental Health Intensive Case Management (the Department's version of ACT) to all homeless veterans who meet clinical eligibility criteria for this type of mental health service. ACT offers comprehensive interdisciplinary services that are both flexible and mobile. *Congress should codify in statute MHICM as health care benefit for eligible homeless veterans.*

D. Prevent Homelessness among Veterans and Separating Service Members

16. Incorporate homelessness prevention content into VA outreach efforts. Current law (38 U.S.C. 7722) requires VA to conduct a range of outreach efforts to alert veterans to the programs and services available through the Department. Also, current law (38 U.S.C. 2022) requires VA to develop a coordinated plan by the Mental Health Service and the Readjustment Counseling Service for joint

outreach to veterans at risk of homelessness and an outreach program to provide information to homeless veterans and veterans at risk of homelessness. Individuals leaving the military are at high risk of homelessness due to a lack of job skills transferable to the civilian sector, disrupted or dissolved family and social support networks, and other risk factors that preceded their military service. Separating service members must be made aware of the factors that contribute to homelessness and receive information about sources of preventive assistance *before* they exit the military.

A robust outreach program not only informs veterans of services available to them should they become homeless, but also to guides them on steps they may take to avert homelessness. *Congress should require VA outreach plans and outreach efforts to add homelessness prevention matter as expected outreach content, including information on risk factors for homelessness, a self-assessment of risk factors, and contact information for preventative assistance associated with homelessness.*

17. Include separating service members as a target of VA outreach program. Current law (38 U.S.C. 2022) requires VA, in its outreach program, to target veterans being discharged or released from institutions after inpatient care. *Congress should add as an additional target population individuals separating from the armed forces.*

E. Ensure Oversight of VA Homeless Activities

18. Require VA to report on homeless veteran coordination efforts with other federal departments and agencies. Current law (38 U.S.C. 2065) requires VA to submit to Congress an annual report on assistance to homeless veterans. *Congress should amend the statute to require VA to include in the general contents of the report information on their efforts to coordinate the delivery of housing and services to homeless veterans with other federal departments and agencies, including the Department of Defense, Department of Health and Human Services, Department of Housing and Urban Development, Department of Justice, Department of Labor, Interagency Council on Homelessness, and the Social Security Administration.*

19. Reauthorize the Advisory Committee on Homeless Veterans through FY 2011. Current law (38 U.S.C. 2066) establishes an Advisory Committee on Homeless Veterans to provide a formal mechanism for the Secretary to gather advice from the homeless veteran service provider field and others with expertise on homeless veteran matters. The Committee is set to expire December 31, 2006. The Committee has proved invaluable in impacting the VA's delivery of medical care and supportive services to homeless veterans. *Congress should extend the Advisory Committee on Homeless Veterans for a five-year period.*

20. Add the Executive Director of the Interagency Council on Homelessness (ICH) to the Advisory Committee on Homeless Veterans. The ICH plays a leadership role in coordinating the federal government's response to homelessness. *Congress should add the ICH Executive Director as an ex-officio representative on the Advisory Committee on Homeless Veterans.*

F. Dispose Surplus Property to Homeless Service Providers

21. Require VA to use the McKinney-Vento Title V Program as its first method for transferring real property to homeless service providers. The Title V program requires federal departments and agencies, including VA, to make surplus properties available to nonprofit and public organizations serving homeless persons, including homeless veterans, at no cost. Under current law (38 U.S.C. 8122(d)), VA has been able to avoid declaring property excess, and thus avoid listing it through the Title V process, by determining that the property is suitable for services to homeless veterans under an

enhanced use lease. Enhanced use lease is less favorable to homeless service providers than Title V because under EUL, providers are expected to pay for the property, while under Title V the transfer is without charge. *Congress should require VA to select Title V as its first method for transferring real property to homeless service providers.*

22. Require VA to enter into lease agreements to rent space to homeless service providers at no charge or at least at no greater than an amount sufficient to cover the direct costs associated with making it available. Currently, VA enters into space agreements with nonprofit organizations to utilize VA capital assets for services to homeless veterans. The rates the Department negotiates with nonprofit organizations fluctuate greatly, and are sometimes above fair market rental rates or at rates that are cost-prohibitive to nonprofit organizations. *Congress should require VA to ensure that space agreements with homeless service providers are set without charge or at least at a rate not to exceed the direct costs associated with making it available.*

23. Make permanent VA's authority to transfer properties obtained through foreclosure on VA home mortgages. Current law (38 U.S.C. 2041) authorizes VA to sell, lease, or donate foreclosed properties to homeless service providers for purposes of assisting homeless veterans and their families in acquiring shelter. The authority expired December 31, 2003. The program has proven invaluable to federal and community efforts to provide permanent housing for persons experiencing homelessness. *Congress should renew and make permanent the transfer authority.* Further, Congress should require VA to dispose of at least ten percent of transferred properties via donation.

Conclusion

The National Coalition for Homeless Veterans looks forward to continuing to work with the Committee on Veterans' Affairs in ensuring that our federal government does everything within its grasp to prevent and end homelessness among our veterans. They have served our nation well. It is beyond time for us to repay the debt.

Curriculum Vitae

Linda Boone, Executive Director, took over the management of the National Coalition for Homeless Veterans in April 1996. Since then the organization has grown from a handful of members to nearly 250 community-based organizations, government agencies and businesses providing supportive services to more than 150,000 homeless veterans and their families every year.

Boone spent the first 20 years of her career in the high technology manufacturing environment before developing her own consulting and training business, working with multi-million dollar corporations to develop competitive management practices.

Boone's involvement with veteran issues began in 1969 as a volunteer in her local community. Her advocacy for homeless veterans began in 1990 after meeting veterans living under a boardwalk near her home. She went on to serve as the National President of the one million-member American Legion Auxiliary. During her administration, the organization contributed 10 million volunteer hours and \$20 million to more than 11,000 communities worldwide.

Boone is recognized as one of the nation's foremost authorities on homeless veteran issues, and has had a significant impact on the development of and increased funding for many of the federal homeless veteran programs in existence today.

Federal Funding

The National Coalition for Homeless Veterans has received the following Federal grants:

FY03

HUD Grant to provide technical assistance to community-based organizations, \$138,502.

FY04

Department of Veterans Affairs Grant to provide technical assistance to community based organizations with experience in assisting homeless veterans, \$517,422.

Department of Labor Grant to provide technical assistance to community based organizations with experience in assisting homeless veterans, \$86,313.

FY05-06

Department of Veterans Affairs Grant to provide technical assistance to community based organizations with experience in assisting homeless veterans, two year total award is \$1,112,500.