AGENCY PRIORITY GOAL: REDUCE HOMELESSNESS

Between October 1, 2011, and September 30, 2013, HUD aimed to reduce the number of homeless Veterans to 35,000 by serving 35,500 additional homeless Veterans.

OVERVIEW

Veterans are overrepresented in the homeless population, consisting of approximately 12 percent of homeless individuals at a given point in time (PIT) in 2013, while only 7 percent of the U.S. adult population has veteran status. On a single night in January 2013, there were 57,849 Veterans reported as experiencing homelessness, which reflects a 24 percent decrease since 2009 of the total number of homelessness among Veterans. Causes of homelessness among Veterans are similar to causes of homelessness among non-Veterans. In terms of housing, renters in America already face serious difficulty finding affordable housing in a broad range of communities because of the dual problems of a shortage of units in some areas and a lack of income to afford units in the existing market. This is compounded for Veterans who may have additional challenges related to their service.

Researchers have identified certain factors that may increase a Veteran’s risk of homelessness. Primary risk factors include adverse childhood events including having experienced homelessness prior to military service, mental illness and substance abuse (important to know if this occurred during military service), relationship breakdown and a history of abusive relationships, limited education and poor employment history, limited advancement during military service, transitions out of institutionalized care (prison/jail), poverty, and housing affordability problems. As for other populations, the complexity of navigating systems makes it difficult for Veterans to get their needs met.

Effectively transitioning homeless Veterans to permanent housing requires access to health care, employment, and benefits. Because homeless Veterans have medical and mental health needs greater than non-veteran chronic homeless, health care and the other benefits play a significant role in achieving and maintaining stability in permanent housing for Veterans experiencing homelessness. Employment and VA benefits are critical in providing homeless Veterans the income required to support housing and other daily living expenses.

STRATEGIES

Strategies to end Veterans homelessness address three subpopulations within the broader homeless Veteran population: 1) Veterans experiencing chronic homelessness who are eligible for VA services, 2) Veterans experiencing non-chronic homelessness who are eligible for VA services, and 3) all Veterans experiencing homelessness who are ineligible for VA services. For Veterans experiencing chronic homelessness who are eligible for VA services, HUD-VASH vouchers, jointly administered by HUD and VA, offer the most appropriate resources, as they couple intensive services with permanent housing. For Veterans experiencing non-chronic homelessness who are eligible for VA services, VA’s Supportive Services for Veteran Families (SSVF) program offers prevention and rapid re-housing solutions to both keep Veterans in housing and quickly move short-term homeless Veterans back into permanent housing. For Veterans experiencing homelessness who are ineligible for VA health services, HUD’s Emergency Solutions Grant dollars and Continuum of Care Program resources are the appropriate vehicles to offer services and housing packages needed to move Veterans who are ineligible for VA health services off the street and out of shelters and transitional housing.
Management’s Discussion And Analysis
Agency Priority Goals

- Dual focus on housing unsheltered (street) homeless Veterans and increasing exits to permanent housing of sheltered homeless Veterans
- Target Continuum of Care resources to serve homeless Veterans ineligible for VA health services
- Explore and implement systems changes for converting transitional housing programs to Permanent Supportive Housing or Rapid Re-housing
- Continue to advance Housing First models
- Collaborate across HUD, VA and USICH to align programs and efforts
- Continue to build place-based initiatives that align local, regional, state, and federal efforts to end Veterans homelessness
- Determine method of tracking exits from non-permanent HUD funded programs into permanent housing
- Improve the methodology and reporting of the HUD PIT data, with the primary intent to acquire timely, reliable, and detailed data regarding the number of homeless Veterans

MEASURING OUR PROGRESS

As of the third quarter of FY 2013, HUD has served 42,179 Veterans, surpassing its two-year goal of serving 35,500 Veterans, and aims to further exceed its goal by the end of FY 2013. A full calculation of HUD’s two-year performance impact to reduce the number of homeless Veterans by the end of FY 2013 will be assessed during the annual PIT count which will take place on a single night in January 2014. HUD continues to work toward its end-of-year FY2013 goal of a reduction in Veterans’ homelessness to 35,000 individuals, and based on the PIT count in January 2013, the number of homeless Veterans has decreased by 24% since 2009.

Through FY13 Q3, HUD-VASH program targets for serving homeless Veterans were exceeded by 23%, with participating PHAs serving 26,142 homeless Veterans. Contributing programs from the Office of Community Planning and Development report annually, so performance in FY13 is not yet known. In FY12, 11,962 Veterans were served by Continuum of Care funded Permanent Supportive Housing programs, exceeding FY12 targets by 58%. Also in FY12, 4,075 Veterans were served by Homeless Prevention and Rapid Rehousing (HPRP) dollars, exceeding FY12 targets by 9%. In order to meet the goal of ending Veteran’s homelessness by 2015, HUD and the Department of Veterans Affairs have worked hard to target HUD-VASH vouchers and supportive services to chronically homeless Veterans.

The HUD-VASH program is jointly administered in communities by VA Medical Center (VAMC) and Public Housing Authority (PHA) staff, with help from Continuums of Care and other local partners. HUD and the VA participate in ongoing planning meetings to ensure that communications and strategies for the
two agencies remain open and aligned. As part of their continued commitment to joint problem solving and improvement of efforts, HUD and VA jointly committed to pursuing a short-term goal of facilitating more effective information sharing between Continuums of Care and VA Medical Centers about the homeless Veterans they serve. For detailed quarterly assessments of progress, readers may consult the archived quarterly updates on Performance.gov.

AGENCY PRIORITY GOAL: ENERGY EFFICIENCY AND HEALTHY HOMES

Between October 1, 2011 and September 30, 2013, HUD aimed to enable a total of 159,000 cost effective energy efficient or healthy housing units, as part of a joint HUD-DOE goal of 520,000 in FY 2012–2013 and a total goal of 1.2 million units in FY 2010–2013.

OVERVIEW

HUD has committed to creating energy efficient, healthy housing as part of a broader commitment to fostering the development of inclusive, sustainable communities. The residential sector is responsible for fully 21 percent of the nation’s greenhouse gas emissions; creating energy efficient housing is part of a long-term strategy to reduce the environmental impact of these buildings and at the same time increase housing affordability by reducing utility costs for both owners and residents. HUD itself spends an estimated $6.4 billion annually on utilities (both water and energy)—either in the form of allowances for tenant-paid utilities, through direct operating grants for public housing or through housing assistance payments for in privately-owned assisted housing. Much of HUD’s portfolio of public and assisted housing consists of older housing built before the advent of energy codes, and therefore does not have the level of energy efficiency that has resulted from newer, more efficient housing. Resulting utility costs account for around 22 percent of public housing operating budgets, and a similar share in the assisted housing sector. Costs are also high in much of Indian Country and in Alaska Native villages due to climate and housing conditions in these locations.

In FY 2013, the Department undertook a range of actions aimed at making significant improvements to the energy efficiency, health and safety of this housing and sustaining the progress achieved in prior years through significant HUD investments of Recovery Act funds in lower-cost, energy efficient housing. HUD is also committed to improving the health and safety of homes for families and children by improving indoor environmental quality and addressing lead hazards and other conditions that threaten the life or health of residents.