

Virginia's Homeless Solutions

Input Session

October 2019



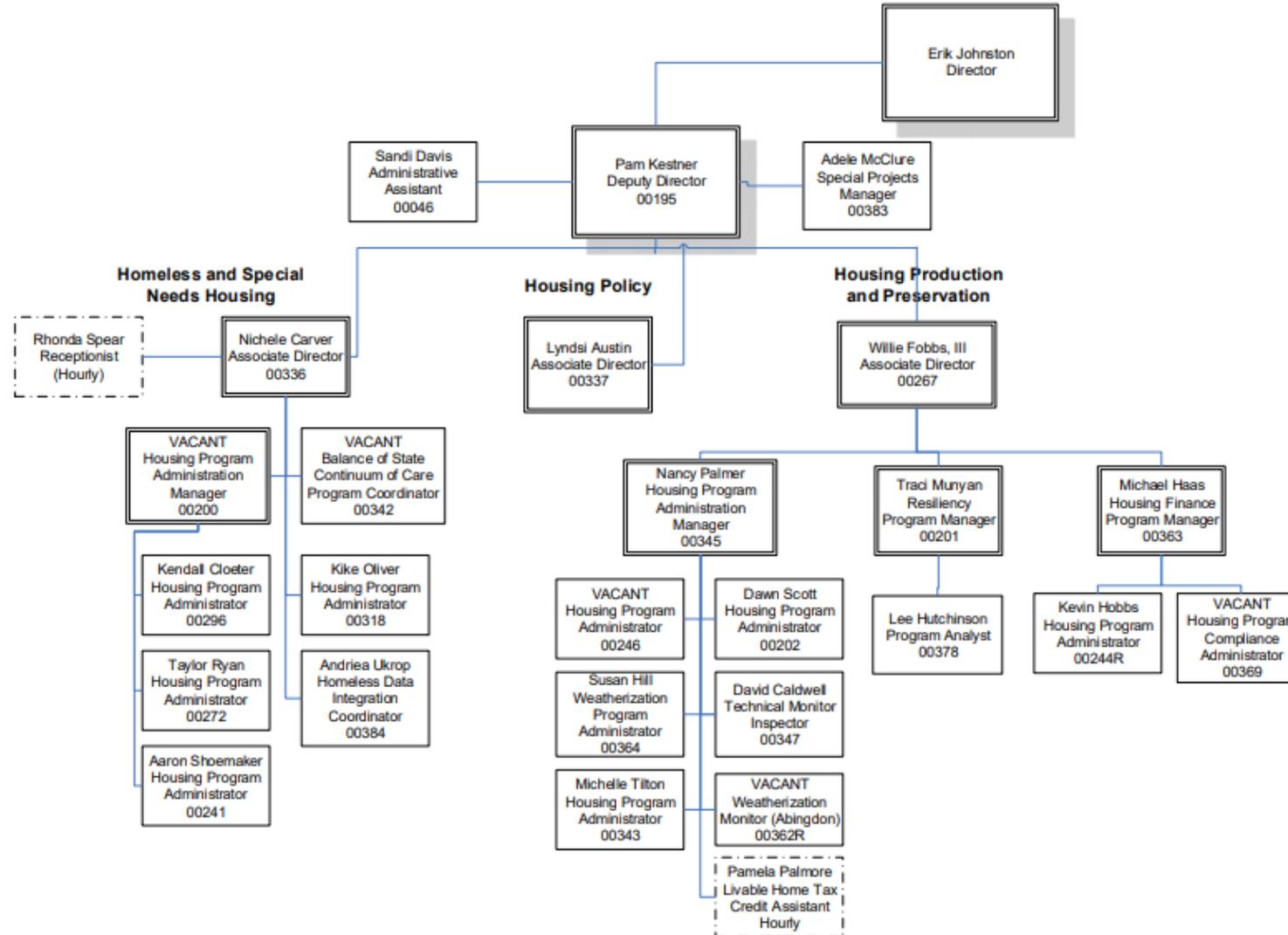
VIRGINIA DEPARTMENT OF HOUSING
AND COMMUNITY DEVELOPMENT

DHCD is committed to creating safe, affordable and prosperous communities to live, work and do business in Virginia.

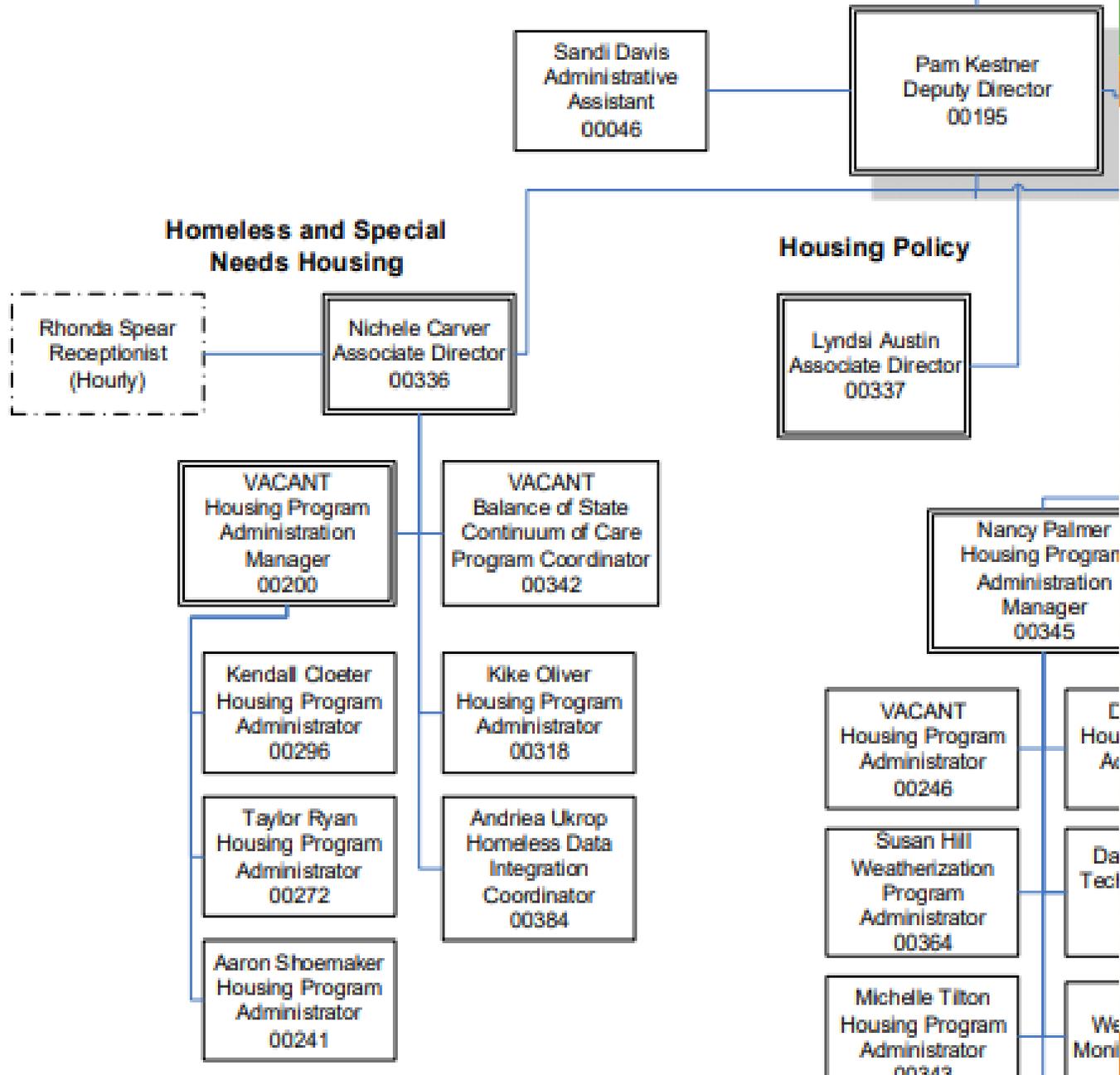


Department of Housing and Community Development Division of Housing

8/2019



Organizational Chart



Input Session Goals:

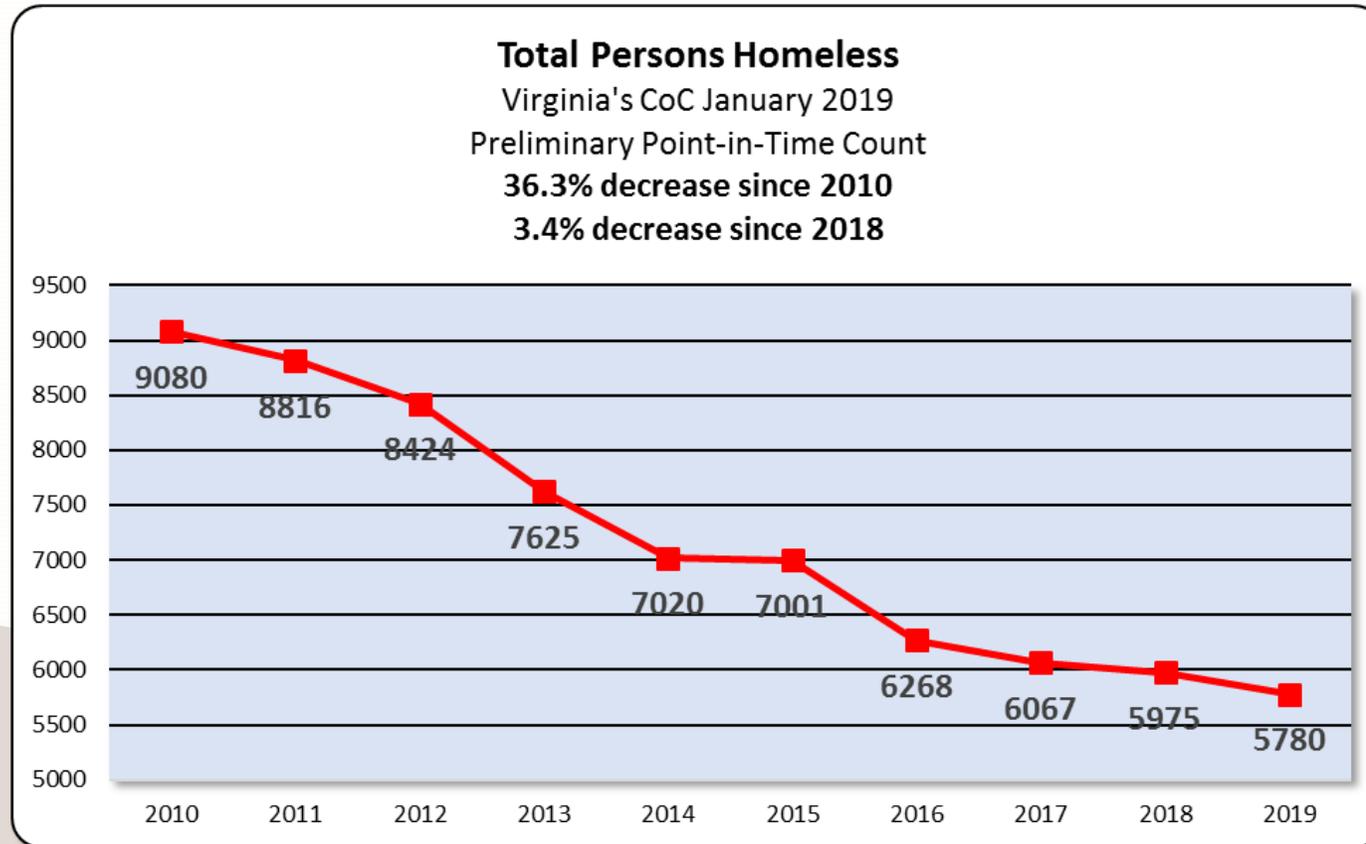
- 1) To provide an **update on homelessness** in Virginia
- 2) To gather input from you to help **with process and outcome improvement**
- 3) HSNH **funding** applications
- 4) To gather input for use in the **2020-2021 Annual Action Plan**

Virginia Homelessness Trends (2010-2019)

- Overall **decrease** in the number of individuals and households experiencing homelessness
- This good news is not shared by all...

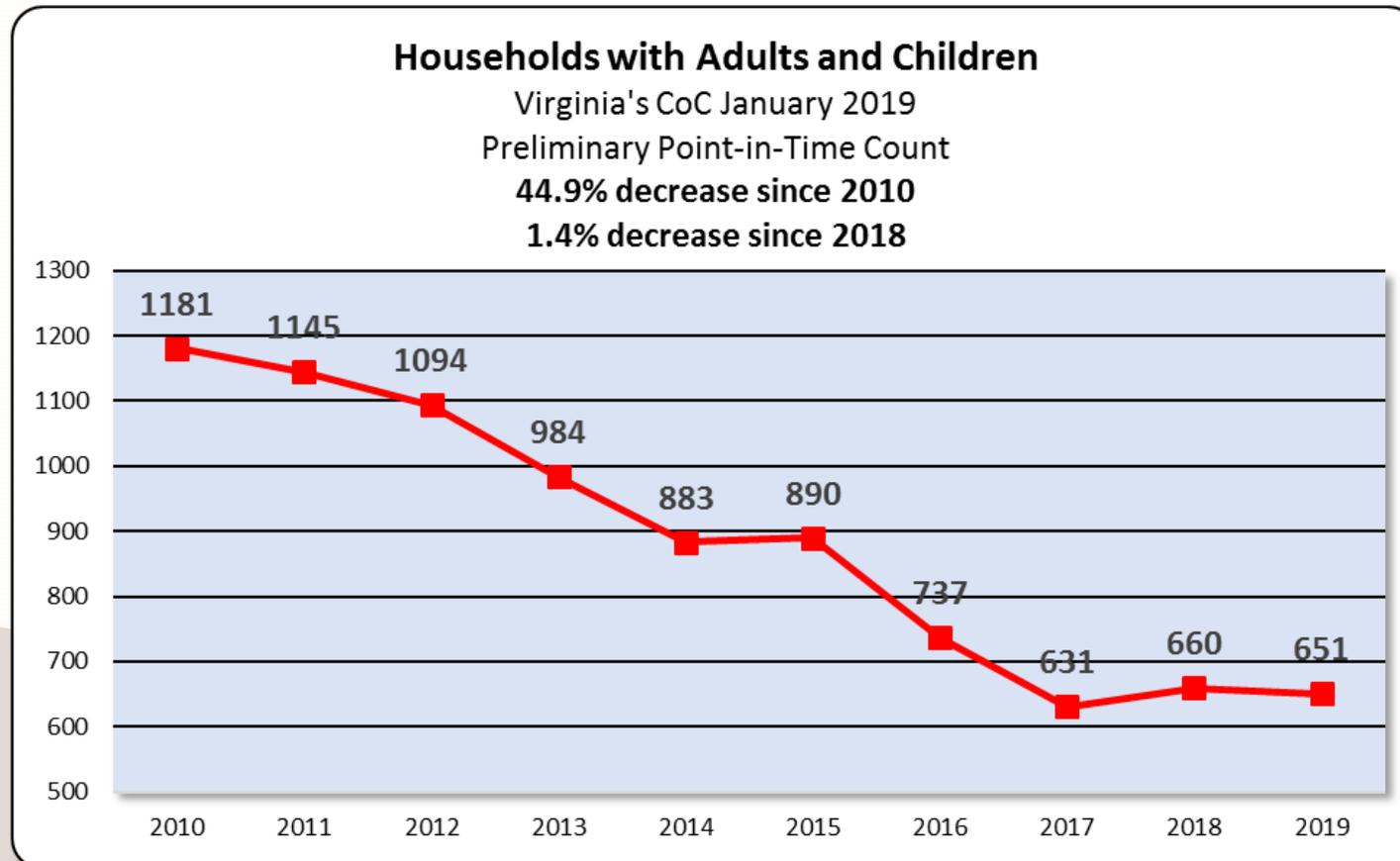
Virginia Homelessness Trends (2010-2019)

Total Homeless Persons



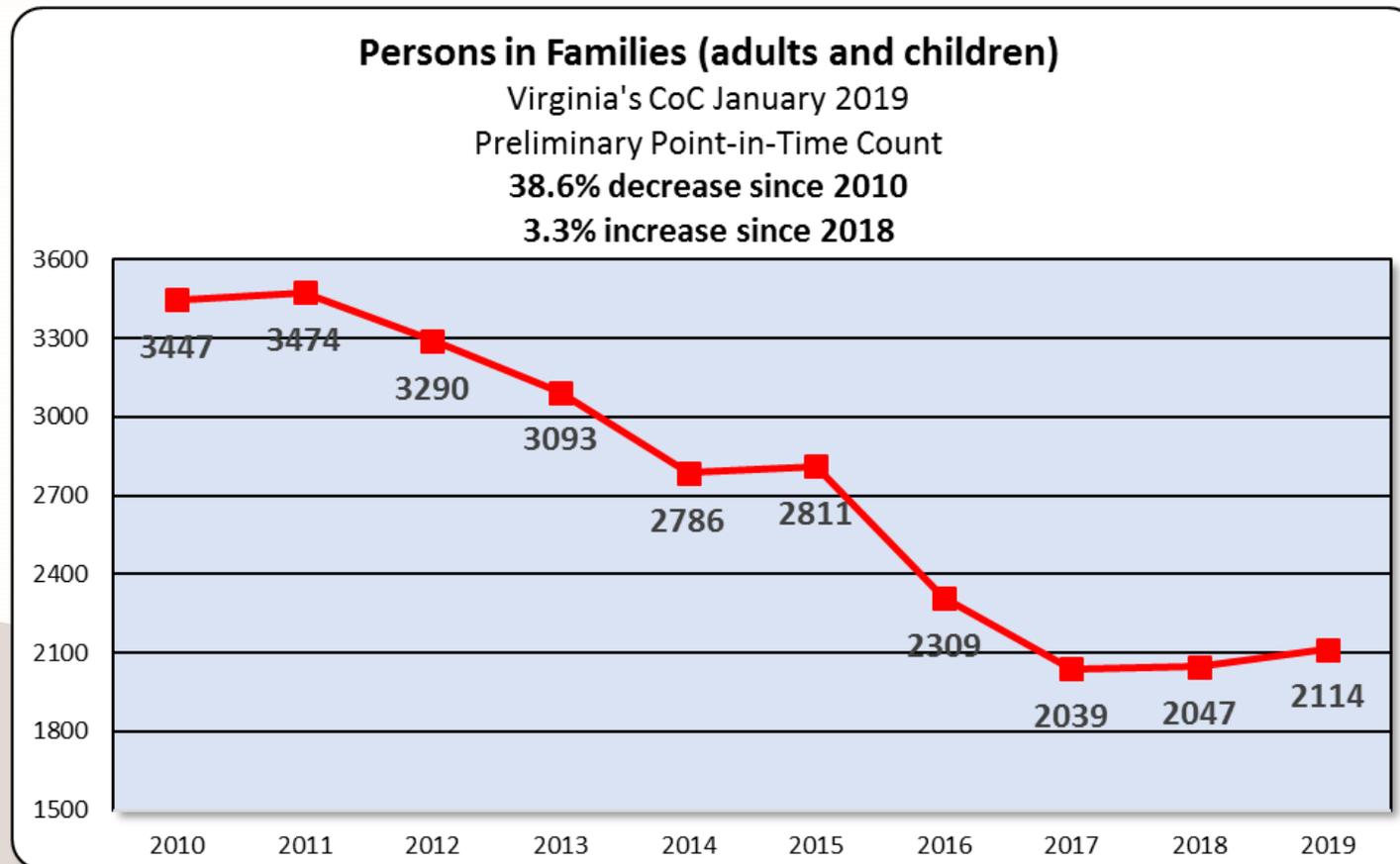
Virginia Homelessness Trends (2010-2019)

Households with Adults and Children:



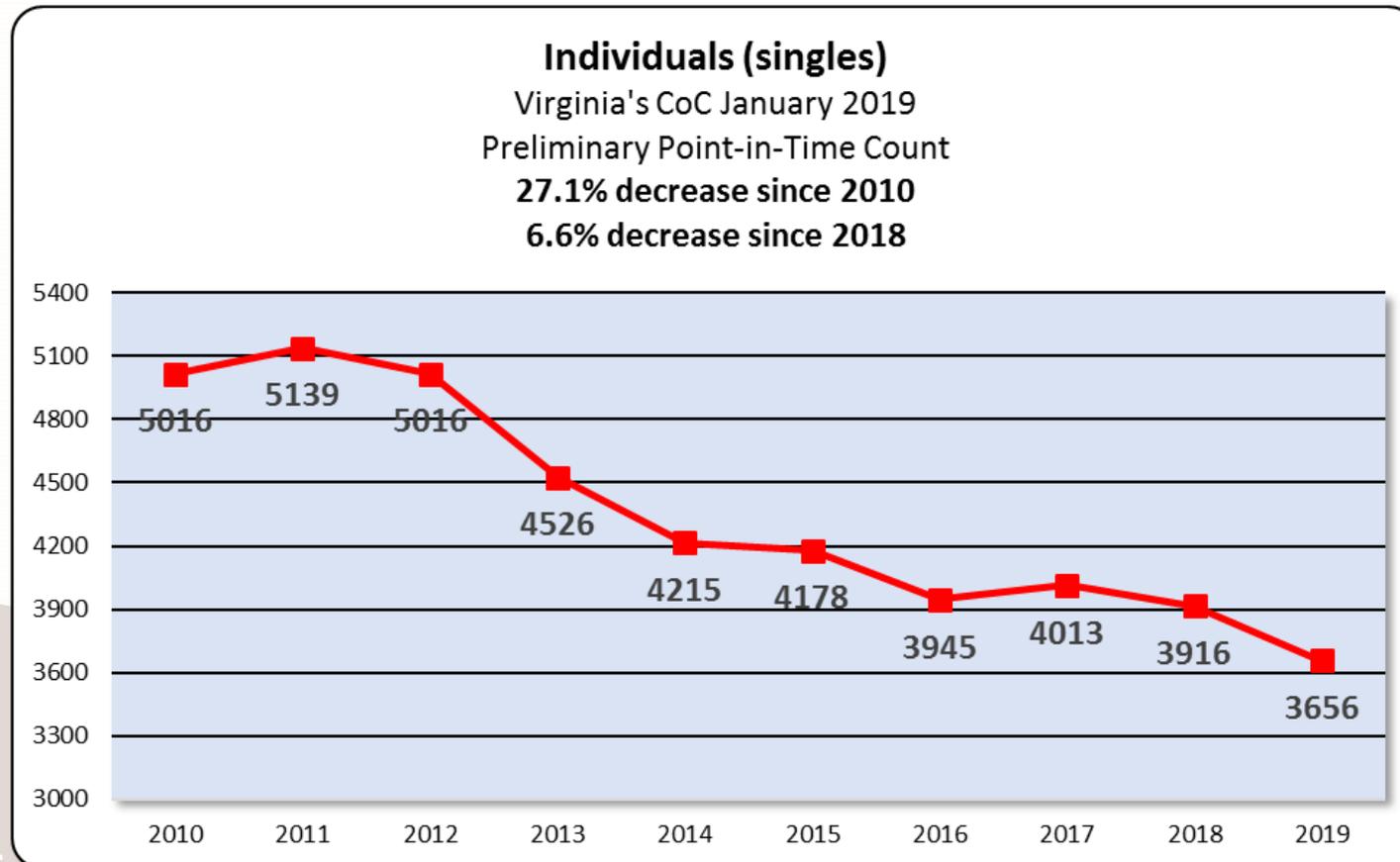
Virginia Homelessness Trends (2010-2019)

Total Persons in Households w/ Adults and Children (Families):



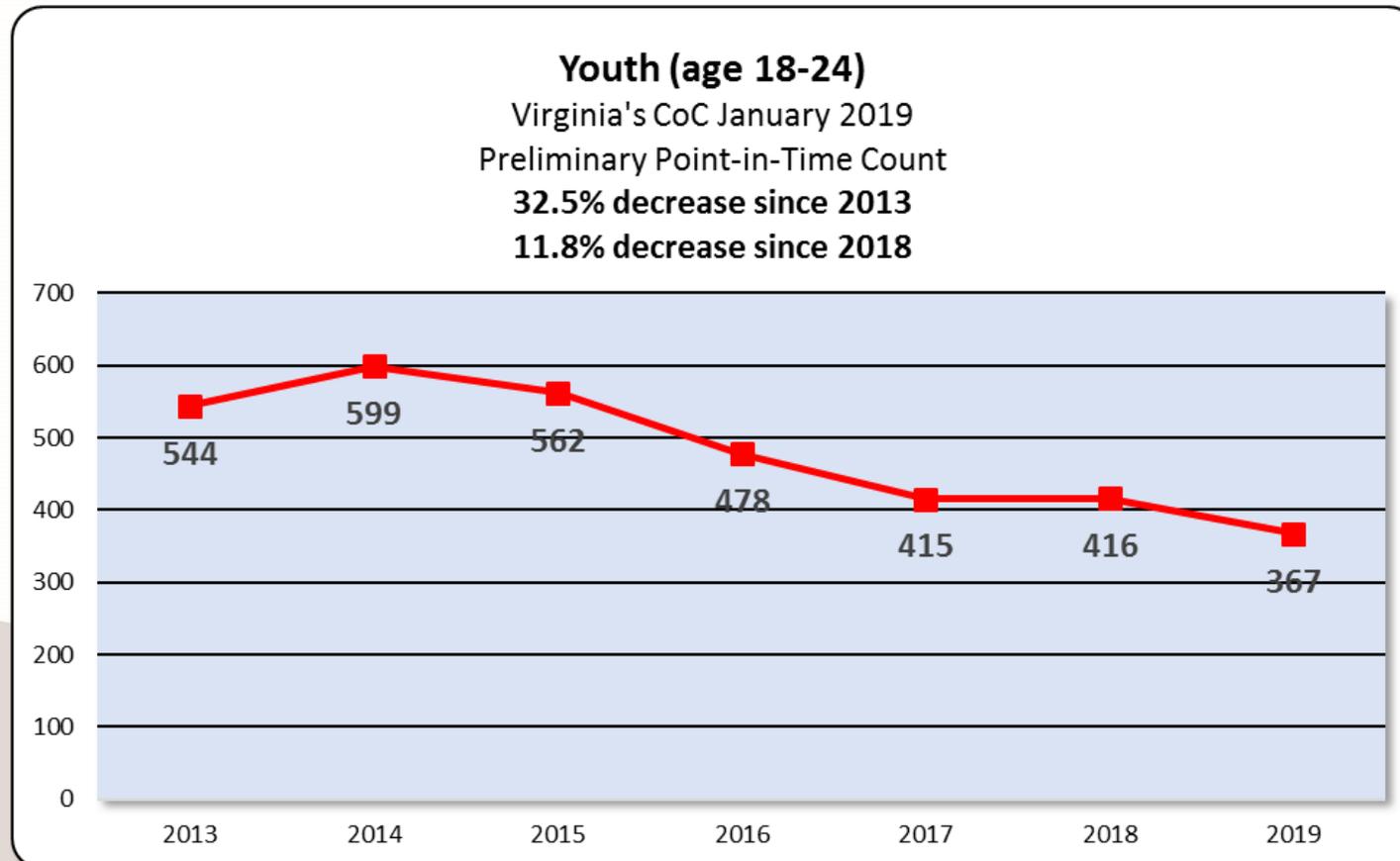
Virginia Homelessness Trends (2010-2019)

Total Persons in Households without Children (singles)



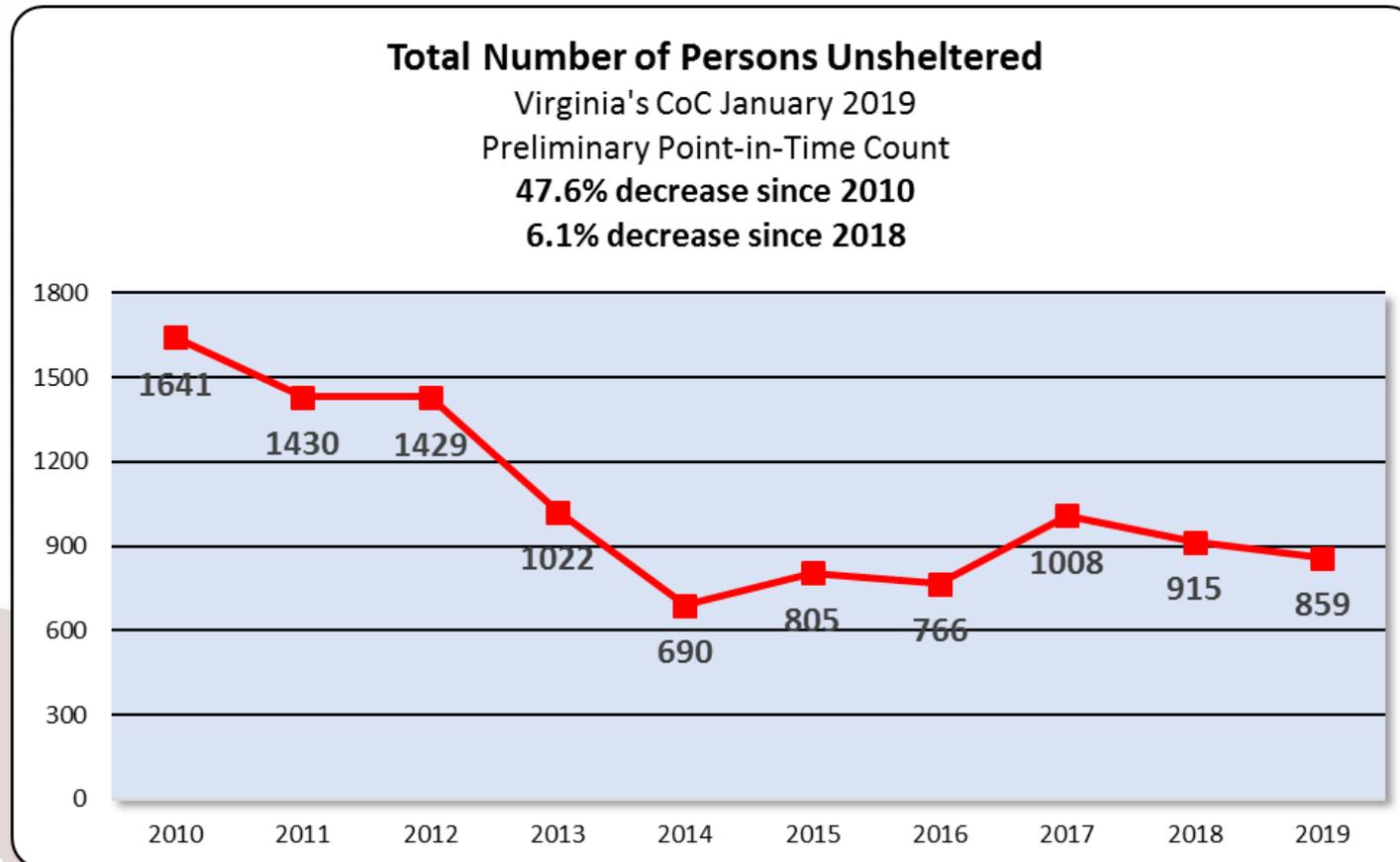
Virginia Homelessness Trends (2010-2019)

Total Homeless Youth (18-24)



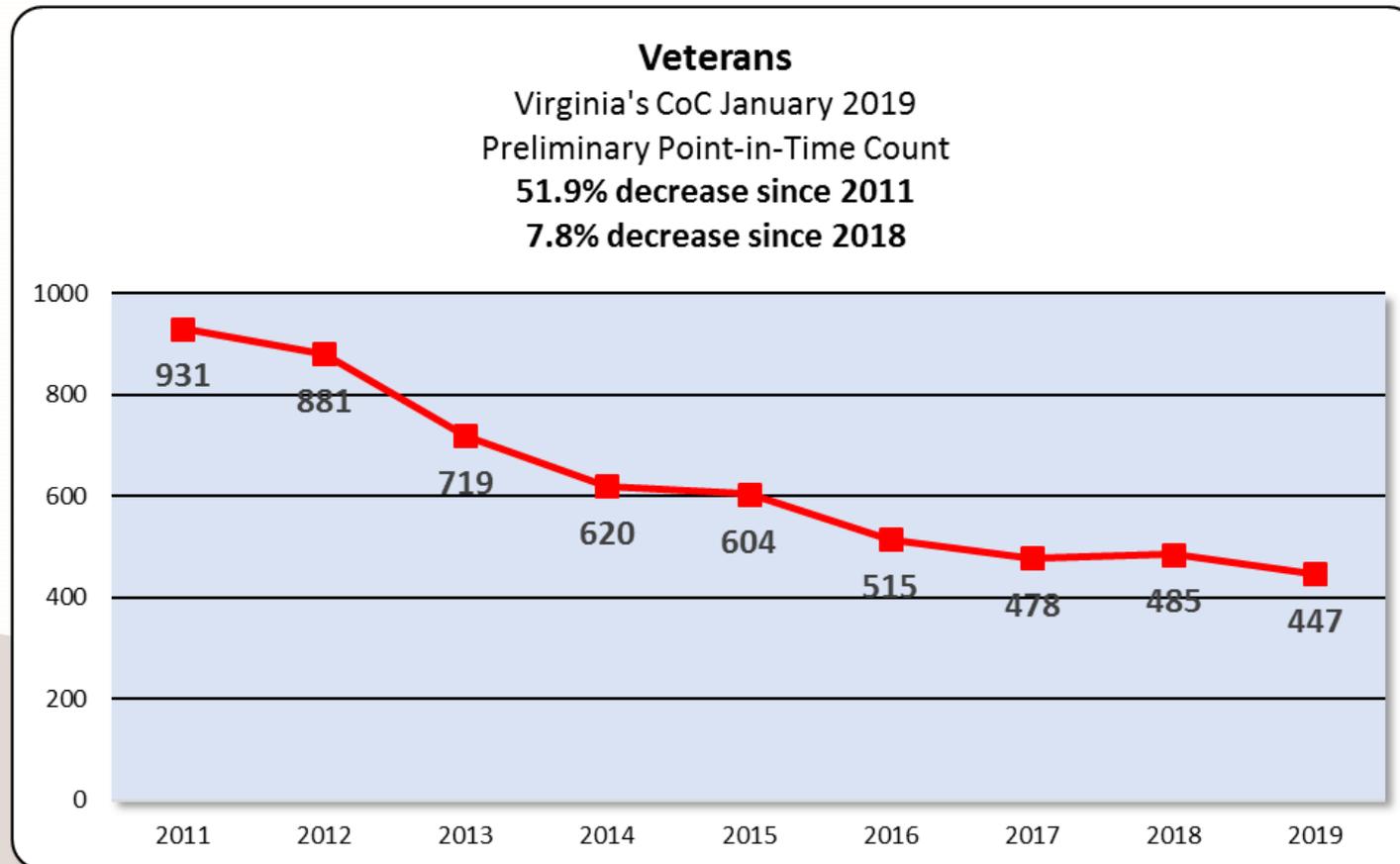
Virginia Homelessness Trends (2010-2019)

Total Unsheltered Persons



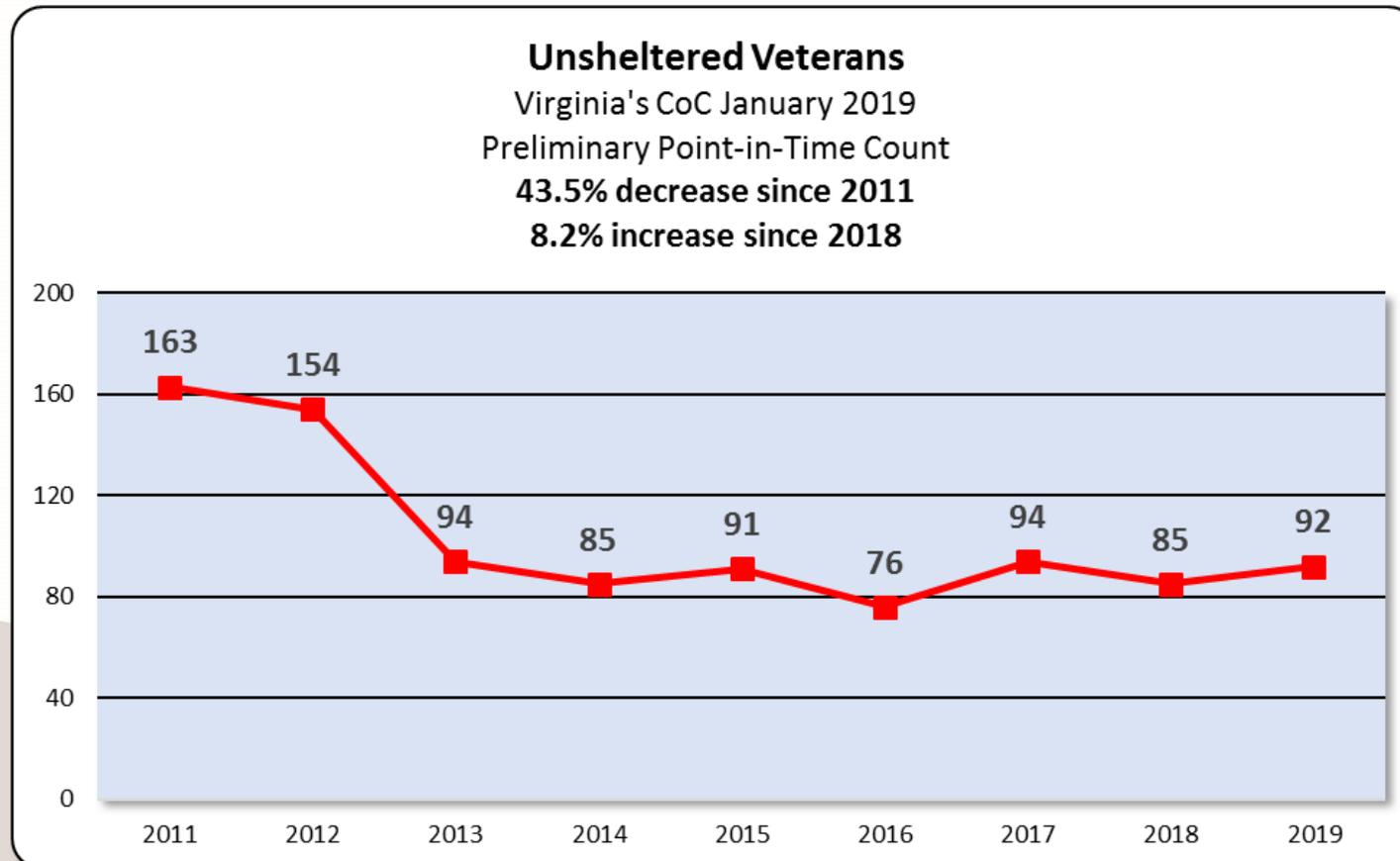
Virginia Homelessness Trends (2010-2019)

Veterans



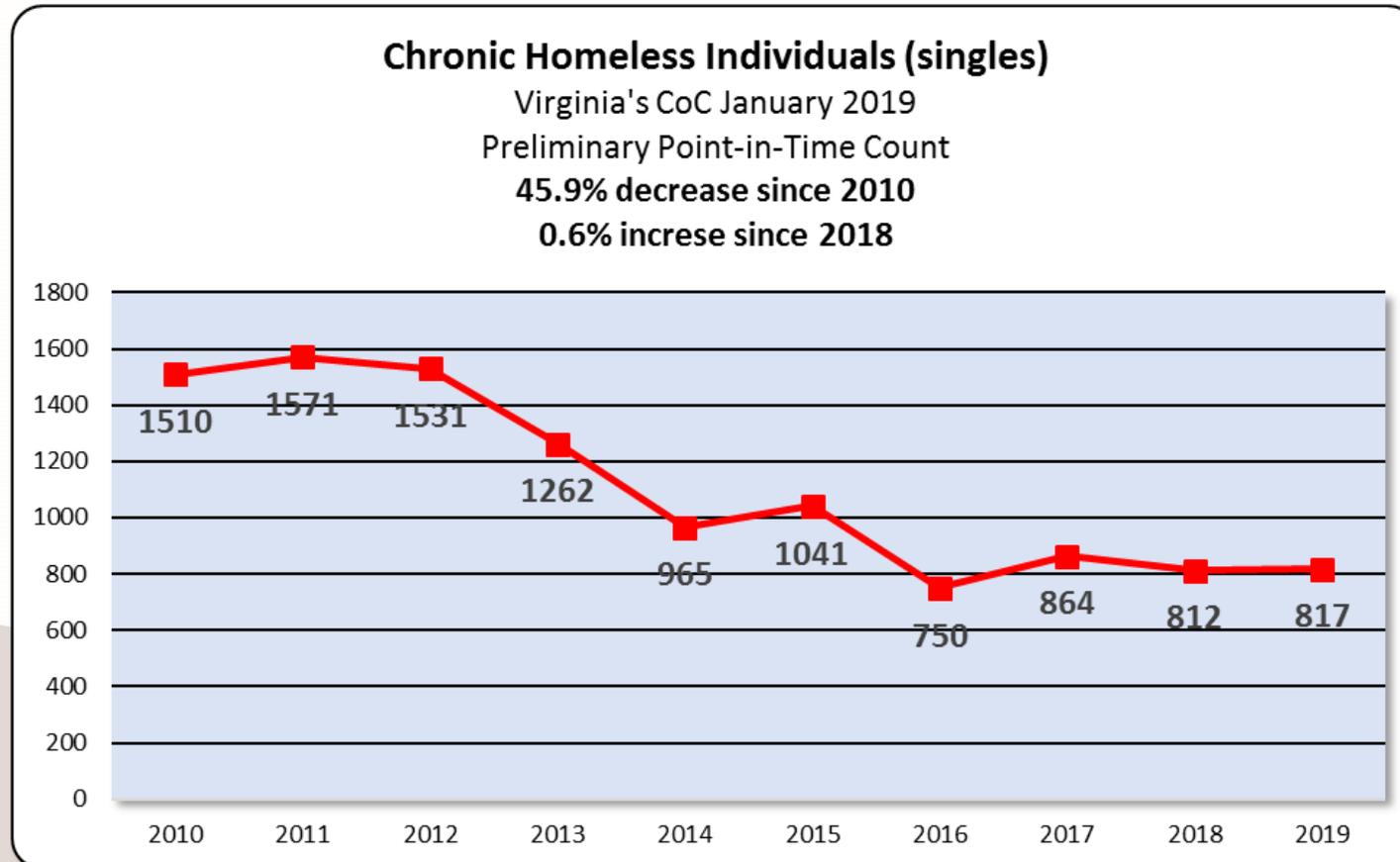
Virginia Homelessness Trends (2010-2019)

Unsheltered Veterans



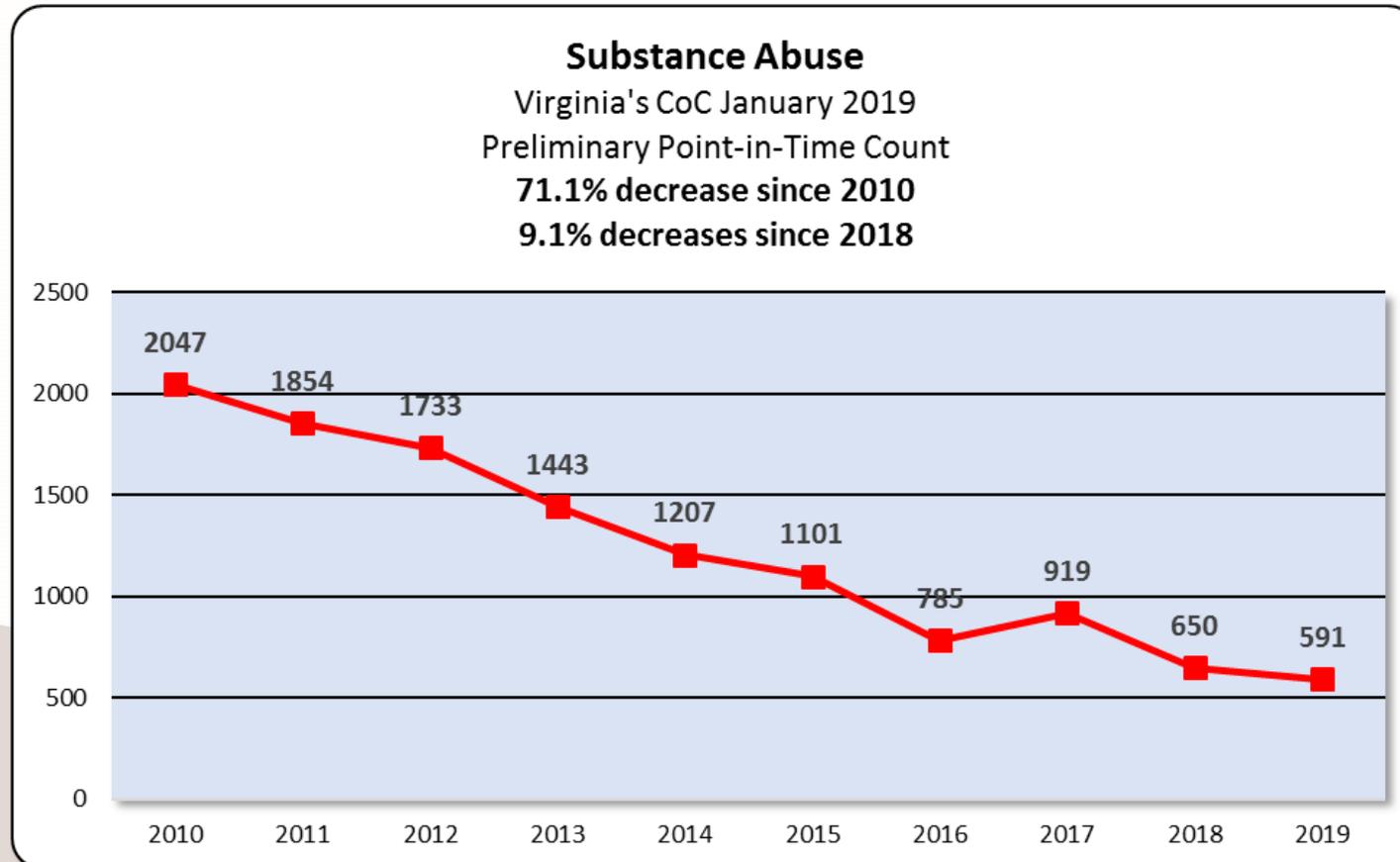
Virginia Homelessness Trends (2010-2019)

Chronically Homeless Singles



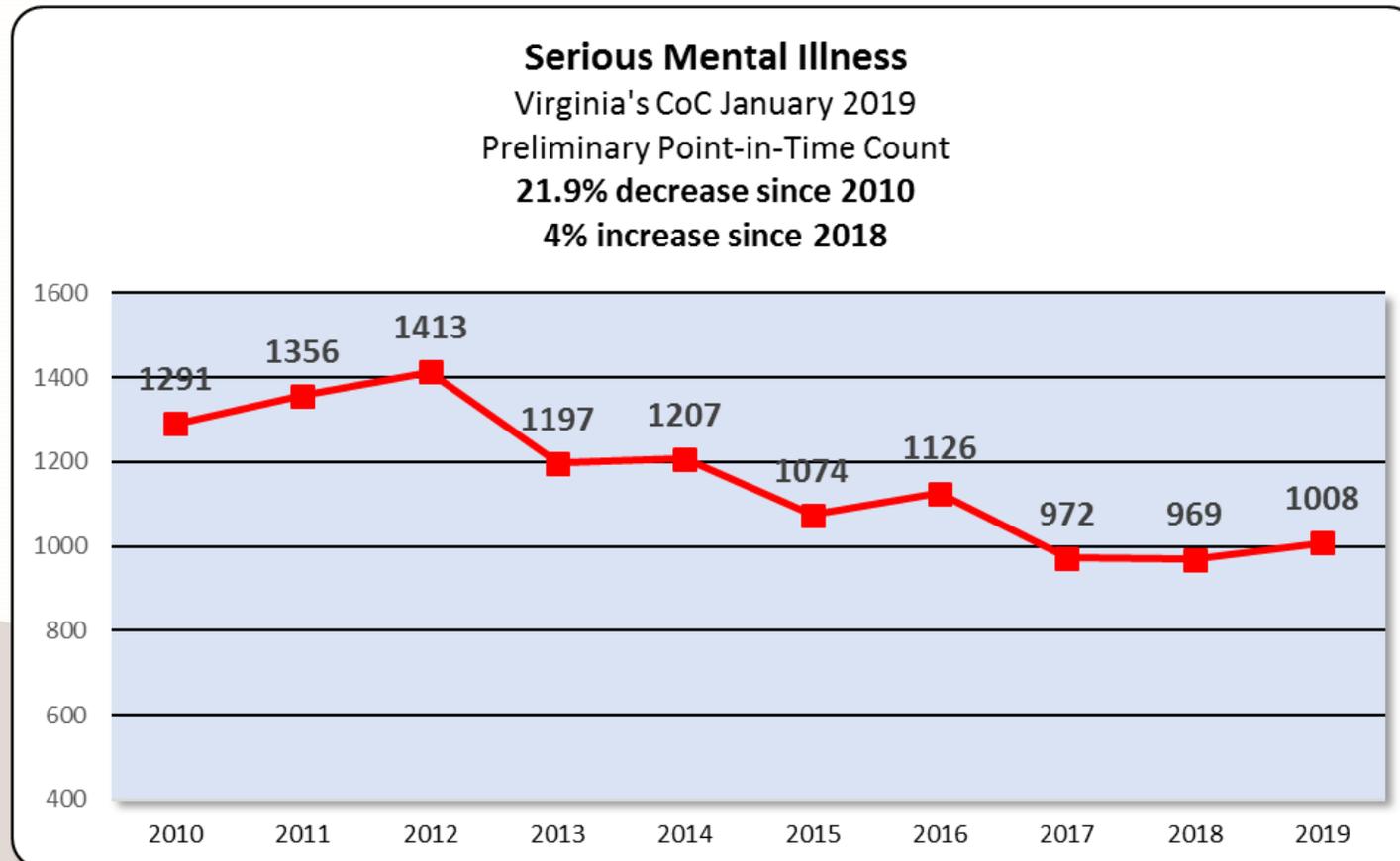
Virginia Homelessness Trends (2010-2019)

Chronic Substance Abuse



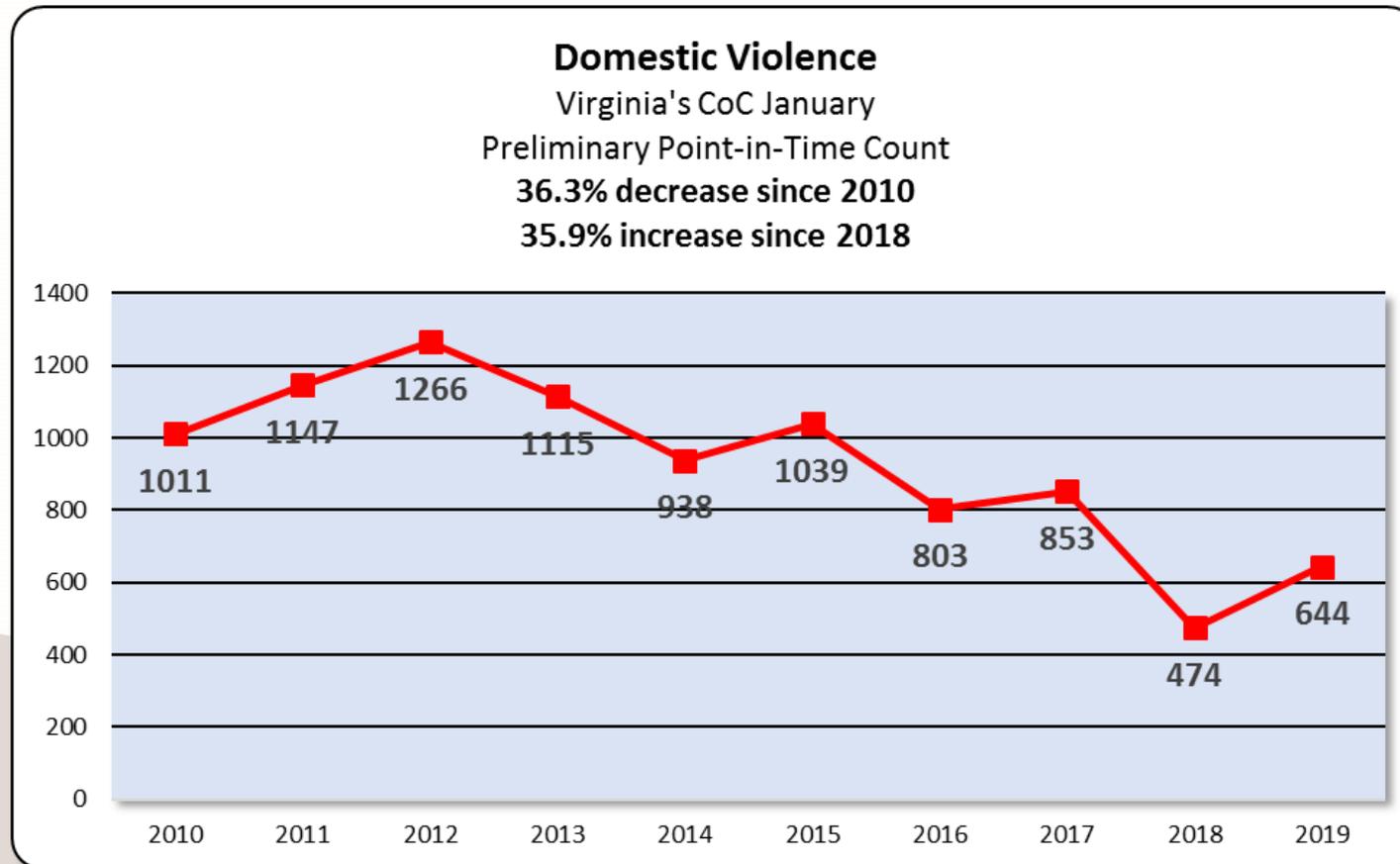
Virginia Homelessness Trends (2010-2019)

Serious Mental Illness



Virginia Homelessness Trends (2010-2019)

Victims of Domestic Violence



Virginia's Homelessness Challenges

1. Special needs populations are harder to serve

- Chronic homelessness
- Substance Abuse
- Domestic Violence

2. Data, data, data

- More required
- More needed
- Quality and Consistency Issues

3. Coordinated Entry

Executive Order 25 (November 15, 2018)

1. Increase the supply of permanent supportive housing

Bolsters the ongoing inter-agency structures aimed at providing permanent supportive housing for individuals with **developmental disabilities, serious mental illness, or substance use disorders**

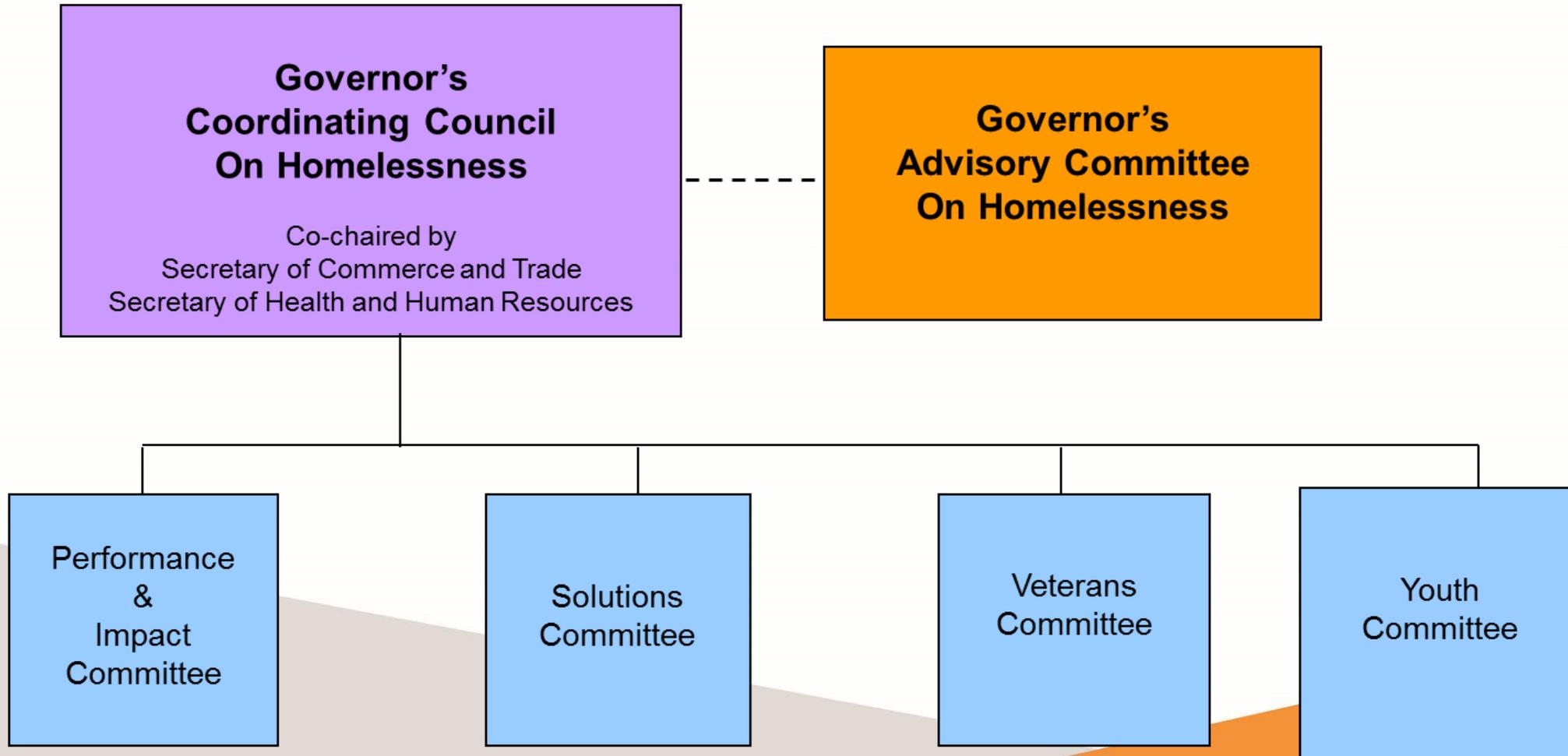
2. Address the shortage of quality affordable housing

Focuses on **coordinating economic development projects with housing production**, supporting housing production technology, and supporting regional and pilot projects that increase the supply of affordable housing units.

3. Reduce the rate of evictions across the Commonwealth

Includes **diversion and prevention programs** that bolster housing stability for individuals and families, evaluating potential **pilot programs** that provide eviction relief, and counseling and education services.

Governor's Initiative on Homelessness



Special Populations

Older Adults

Study by Actionable Intelligence for Social Policy at the University of Pennsylvania

- Predicts the population of homeless older adults will **triple** by 2030
- As this population grows, so too will service use and costs, including costs for hospital and nursing home stays
- Suggests housing interventions should be targeted to the needs of the population with a large focus on **permanent housing solutions** (RRH + PSH)

Special Populations

Homeless Youth

The Data (Point in Time Count, 2018)

- **36,361** unaccompanied youth were counted as homeless
- **89%** were between the ages of **18 to 24**
- Remaining **11%** were **under the age of 18** (4,093 unaccompanied children)
- **51%** of homeless youth are **unsheltered**
- NAEH estimates that in 1 year, approximately 550,000 unaccompanied youth (age 18-24) experience a homelessness episode of longer than one week

Special Populations

Homeless Youth

Improve crisis response system

- Prevent
- Identify, engage, connect
- Intervene early
- Prioritize through coordinated entry systems
- Ensure access to safe shelter and emergency services
- Adapt assessments
- Focus on individualized and youth-led services and housing options

All programs and services should be: trauma-informed, culturally appropriate, and developmentally and age-appropriate

Special Populations

Homeless Youth

Practical Solutions:

1. Stable Housing
 - Tailored housing options
2. Supportive connections (reunification with family or a support system, when safe and appropriate)
3. Access to mainstream services for long-term stability
 - Education and employment supports

Petersburg Housing Stability Pilot

- Increase stable housing as a support to increase academic success through improved attendance
- National testing data demonstrates that students who miss more school than their peers consistently score lower on standardized tests, a result that holds true at every age, in every demographic group, and in every state and city tested (NAEP, 2013).
 - Measure: does housing stability increase attendance?
 - Attendance is not a requirement for housing services

Petersburg Housing Stability Pilot Partnerships

- Virginia Department of Housing and Community Development
- Petersburg City Public Schools
- Petersburg High School
- Petersburg Department of Social Services
- St. Joseph's Villa – Flagler Housing Resource Center
- Community in Schools - Petersburg

Special Populations

Substance Use Disorder

- **68% of cities** reported substance abuse was a **major cause of homelessness** for single adults; 1 of the top 3 causes of family homelessness in 12% of cities.
- Substance abuse may have the **highest impact** on relative risk for **homelessness in veterans**, even more so than bipolar disorder and schizophrenia.
- Prevalence of homelessness in veterans with OUD is **10 times more** than the general veteran population.
- Overdose has **surpassed HIV as the leading cause of death** among **homeless adults**, opioids are responsible for more than 80 percent of these deaths.
- Homeless adults, 25-44, were **nine times more likely** to die from an overdose than their counterparts who were stably housed.

Special Populations

Substance Use Disorder

Recommendations:

- 1) Incorporate **housing and social supports** (including PSH and RRH) into treatment for individuals with SUD experiencing homelessness
- 2) Homeless services systems and providers should complete **overdose response planning**
- 3) Providers should **eliminate barriers to emergency shelter** and support services for individuals with SUD (sobriety, abstinence-only requirements)
- 4) Incorporate **harm reduction** in homeless services programs

Homelessness and Racial Equity

What we know:

- Most **minority groups** in the US are **overrepresented** in the homelessness system
- Disparities in homelessness are influenced by historical and structural discrimination in:
 - Housing practices
 - Criminal justice system
 - Child welfare
 - Education
 - Behavioral Health
 - Community investment
- 2019 CoC NOFA encourages us to examine our programs and systems for racial disparities or to assess whether we might be contributing to them.

Homelessness and Racial Equity

Step 2. Act

NAEH Racial Equity Network

- Convening leaders in the field to exchange ideas and advise the Alliance on developing and recommending practical approaches to addressing racial disparities
- Goal: Answer the “What now?”
- Progress to date

Homeless Services Funding Virginia 2019-2020

Funding Services	Type	Amount
Emergency Solutions Grant (ESG)	Federal – HUD	\$2,885,391
General Funds—Homeless Assistance	State	\$8,331,784
General Funds—Homeless Prevention	State	\$3,969,000
Housing Opportunities for Persons with AIDS/HIV (HOPWA)	Federal – HUD	\$1,087,223
Total Homeless Services CoC-based Application	Federal/State	\$16,273,398
State Housing Trust Fund: Homeless Reduction Grants	State	\$1,400,000
Total		\$17,673,398

Funding Timeline

Process	Tentative dates
Application Released	January
“How to Apply” Workshops	January/February
Application Due	Eight weeks later (mid March)
Application Review	April
Negotiations	April-May
Contracts with individual organizations	July 1, 2020

State HTF Homeless Reduction Grants

Application Open

Due October 30, 2019

State HTF Homeless Reduction Grants

Possible Changes

Raising DHCD's administrative allocation from 2% to 4%

Rationale:

- Increased number of projects requiring more staff to do project management
- Necessary additional capacity to provide technical assistance for grantees
- Critical additional capacity to enhance program evaluation and improve program effectiveness

We want to hear from you...

- Training Needs
- Coordinated Entry
- Housing Trust Fund: Homeless Reduction Grants
- Rapid Re-Housing
- Diversion
- CoC processes
- Statewide HMIS Data

Statewide Data Merge

State Purpose: is to enhance state policy makers, the Virginia Department of Housing and Community Development (DHCD), and other state executive offices' understanding of the homeless population across the Commonwealth of Virginia.

Statewide Data Merge

Benefits to all:

- Consolidated and unduplicated picture of homelessness
- Identify patterns of mobility
- Prevalence of sub-populations(chronic, veteran, youth, unsheltered, etc.)
- Target investments (better planning, resource management, and ability to address present and future needs)
- Near real-time dashboards (state, CoC/LPG, and project level)

Statewide Data Merge

Next Steps:

- Re-initiate pilot project (Oct. 2019)
- Identify Advisory Board (Nov/Dec. 2019)
- Procure Vendor (goal Jan. 2020)
- Next steps...TBD

Coordinated Entry: Standards

Overview

- Virginia and HUD **requirement**
- Must provide **coordinated** intakes, assessments, and referrals
- Must cover the **entire** CoC/LPG geographic area
- Must provide **easy access** for individuals and families seeking housing or services
- Must provide a **comprehensive and standardized** model
- Must have **written standards** for determining program eligibility, prioritization, and level of assistance

Coordinated Entry: Standards

Additional Requirements Effective

January 23, 2018

Coordinated Entry: Standards

Core Elements of New Requirements

- 1) **Access points** use a **standardized assessment process** to gather information on people's needs, preferences, and barriers they face to regaining housing
- 2) Once the assessment has identified the most vulnerable people with the highest needs, the CoC follows the established policies and procedures to **prioritize** households for **referral** to appropriate available housing and supportive services resources ("projects").

Coordinated Entry: Standards

Differences in Focus Before and After Coordinated Entry

Before

Should we accept this person into our project?

Project-centric

Different forms of assessment for each organization or small subgroup of project

Project-specific decision making

Ad hoc referral process between projects

Uneven knowledge about available housing and service interventions in the CoC's geographic area

After

What housing and service assistance strategy among all available is best for this household?

Person-centric

Standard forms and assessment used by every project for every participant

Community agreement on how to triage based on the household's needs

Coordinated referral process across the CoCs geographic area

Based on **written standards** for administering CoC assistance

HOPWA Required Trainings

HOPWA Oversight Training

<https://www.hudexchange.info/trainings/hopwa-oversight-training/>

Getting to Work: A Training Curriculum for HIV/AIDS Service Providers and Housing Providers

<https://www.hudexchange.info/trainings/dol-hud-getting-to-work-curriculum-for-hiv-aids-providers/>

HOPWA Financial Management Training course

<https://www.hudexchange.info/trainings/courses/hud-hopwa-financial-management-online-training/>

Roundtable Discussion

Is there any other input you would like to offer DHCD?

Additional Resources

Governors Housing Policy Group

www.virginiahousingpolicy.com

If you have any additional feedback, please contact Lyndsi Austin at (804) 371-7122
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