United States Government Accountability Office

GAO

Report to Congressional Requesters

December 2011

HOMELESS WOMEN VETERANS

Actions Needed to Ensure Safe and Appropriate Housing

U.S. Government Accountability Office

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ACCOUNTABILITY ★ INTEGRITY ★ RELIABILITY

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Abbreviations

CHALENG	Community Homelessness Assessment, Local Education and Networking Group for Veterans project
GPD	VA Homeless Providers Grant and Per Diem Program
HMIS	Homeless Management Information Systems
HUD	Department of Housing and Urban Development
HUD-VASH	HUD-VA Supportive Housing
MST	military sexual trauma
OIG	Office of Inspector General
VA	Department of Veterans Affairs

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GAO
Accountability * Integrity * Reliability
United States Government Accountability Office
Washington, DC 20548

December 23, 2011

The Honorable Patty Murray
Chairman
Committee on Veterans Affairs
United States Senate

The Honorable Daniel Akaka
United States Senate

As more women serve in the military, the number of women veterans has grown substantially, doubling from 4 percent of all veterans in 1990 to 8 percent, or an estimated 1.8 million, today. The number of women veterans will continue to increase as servicemembers return from the conflicts in Iraq and Afghanistan. Some of these women veterans, like their male counterparts, face challenges readjusting to civilian life and are at risk of becoming homeless. Such challenges may be particularly pronounced for those women veterans who have disabling psychological conditions resulting from military sexual trauma[1] and for those who are single mothers.[2]

The Department of Veterans Affairs (VA) has committed to ending homelessness among all veterans by 2015 and funds several programs to house homeless veterans. The two largest are the VA Homeless Providers Grant and Per Diem (GPD)[3] program, which provides

[1]Military sexual trauma (MST) has been linked to homelessness among women veterans ("Risk Factors for Homelessness Among Women Veterans," Washington, Yano, McGuire, et al. *Journal of Health Care for the Poor and Underserved*, 2010; 21(1): 82-91). VA uses the term MST to refer to psychological trauma resulting from a physical assault or battery of a sexual nature or sexual harassment which occurred while the veteran was serving on active duty or active duty for training. See 38 U.S.C. § 1720D. Women are more likely than men to experience MST. See GAO, *VA Health Care: VA Has Taken Steps to Make Services Available to Women Veterans, but Needs to Revise Key Policies and Improve Oversight Processes*, GAO-10-287 (Washington, D.C.: Mar. 31, 2010).

[2]Young single mothers, in general, are vulnerable to being homeless. Women veterans are also more likely to experience homelessness than similar women who have not served in the military. Fargo, Metraux, Byrne, Munley, Montgomery, Jones, Sheldon, and Culhane, 2011, "Prevalence and Risk of Homelessness among US Veterans: A Multisite Investigation," *The Selected Works of Dennis P. Culhane*.

[3]38 U.S.C. §§ 2011, 2012, 2061, 2064. In fiscal year 2011, VA obligated $217.7 million for the GPD program.

transitional housing and supportive services; and HUD-VA Supportive Housing (HUD-VASH), [4] which is a joint program of the Department of Housing and Urban Development (HUD) and VA offering permanent supportive housing.

While these programs have expanded in recent years to serve more veterans, it remains unclear whether they are meeting the housing needs of all homeless women veterans. To respond to your interest in this issue, this report addresses (1) What is known about the characteristics of homeless women veterans, including those with disabilities? (2) What barriers, if any, do homeless women veterans face in accessing and using VA's Homeless Providers Grant and Per Diem and HUD-VA Supportive Housing programs?

To answer these questions, we analyzed VA data on women veterans (including those with disabilities) identified by VA as being homeless at some point during fiscal years 2006 through 2010.[5] We also surveyed all GPD program providers that VA indicated had a capacity to serve women veterans, and all homeless coordinators at VA Medical Centers.[6] In addition, we conducted site visits to California, the District of Columbia, Pennsylvania, and Texas,[7] which included discussions with service providers (GPD providers and others), organizations collecting homelessness data, and homeless women veterans; and interviewed agency officials, academic researchers, and representatives of veterans service organizations. Finally, we reviewed program documents and relevant federal laws and regulations. For more details on our methodology, see appendix I. We assessed VA data for reliability and found them to be sufficiently reliable for the purposes of this report.

[4]See 73 Fed. Reg. 25,026 (May 6, 2008). Permanent supportive housing consists of case management provided by the VA coupled with rental assistance provided by HUD for housing selected by the veteran. In fiscal year 2011, VA obligated $151.1 million for case management under the HUD-VASH program and HUD received a $50 million appropriation for rental assistance vouchers under HUD-VASH.

[5]The VA may identify women as homeless during outreach activities or when women contact the VA for services. Not all women veterans who contact the VA for services are automatically screened for homelessness.

[6]Both surveys achieved a response rate of 80 percent and are generalizable.

[7]These sites were selected in part for geographic diversity and the range of services offered. In addition, California and Texas are among the states with the highest concentration of homeless veterans.

We conducted this performance audit from October 2010 through Decembert 2011 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

On November 21, 2011, we briefed your staff on the results of our work. This report formally conveys the information shared at the briefing (see app. II for detailed briefing slides). In summary, our review found:

Finding 1: Data on the characteristics of homeless women veterans are limited to those who have been in contact with VA. Neither VA nor HUD captures data on the overall population of homeless women veterans.

- Limited VA data show the number of women veterans it has identified as homeless more than doubled, from 1,380 in fiscal year 2006 to 3,328 in fiscal year 2010. Although these data are not generalizable to the overall population of homeless women veterans, we identified some characteristics of these women. For example, almost two-thirds were between 40 and 59 years old and over one-third had disabilities. In addition, many of these women resided with their minor children.

- HUD collects data on homeless women and on homeless veterans, [8] but does not collect detailed information on homeless women veterans. Neither VA nor HUD collect data on the total number of homeless women veterans in the general population. Further, they lack data on the characteristics and needs of these women on a national, state, and local level. Absent more complete data, VA does not have the information needed to plan services effectively, allocate grants to providers, and track progress toward its overall goal of ending veteran homelessness by 2015. According to knowledgeable

[8]For the past 2 years HUD and VA have been working in coordination to collect data on homeless veterans for an annual report to Congress on homelessness.

VA and HUD officials we spoke with, collecting data specific to homeless women veterans would incur minimal burden and cost.[9]

Finding 2: Homeless women veterans face barriers to accessing and using veteran housing,[10] such as lack of awareness about these programs, lack of referrals for temporary housing while awaiting placement in GPD and HUD-VASH housing, limited housing for women with children, and concerns about personal safety.

- Homeless women veterans were not always aware of veteran housing services, which posed a significant barrier to access, according to GPD programs we surveyed, service providers, agency officials, and experts we interviewed. Some VA Medical Center homeless coordinators reported challenges in reaching this population. However, VA has recently launched an outreach campaign to increase awareness that includes materials specific to homeless women veterans.

- VA requires its staff to give homeless veterans a referral for shelter or short-term housing while they await placement in veteran housing; however, several homeless women veterans told us they did not receive such referrals. In addition, about 24 percent of VA Medical Center homeless coordinators indicated not having referral plans or processes in place for temporarily housing homeless women veterans while they await placement in HUD-VASH and GPD programs. According to our data analysis, women veterans waited an average of 4 months before securing HUD-VASH housing.[11] In addition, about one fourth of GPD providers reported that women veterans had to wait for placement in their programs and the median wait was 30 days. Without referrals for shelter or temporary housing during these

[9]Beginning with the 2011 Point-in-Time counts (counts of homeless individuals), HUD required all participating communities to gather the veteran status of sheltered and unsheltered homeless individuals. Its guidance acknowledged that determining veteran status would likely require interviewing individuals—as this status cannot be determined visually. HUD officials agreed that data on gender could be gathered during these interviews with minimal additional burden.

[10]Throughout this report, we use the term “veteran housing” to refer exclusively to the housing offered by the GPD and HUD-VASH programs.

[11]In response to our draft report, VA noted that it had used more recent data to calculate that as of September 30, 2011, it took an average of 102 days to transition a veteran into HUD-VASH housing.

waits, homeless women veterans may be at risk of physical harm and further trauma on the streets or in other unsafe places.

- More than 60 percent of surveyed GPD programs that serve homeless women veterans did not house children, and most programs that did house children had restrictions on the ages or numbers of children. In our survey, GPD providers cited lack of housing for women with children as a significant barrier to accessing veteran housing. In addition, several noted there were financial disincentives for providers, as VA does not have the statutory authority to reimburse them for costs of housing veterans' children.[12] Limited housing for women and their children puts these families at risk of remaining homeless.

- Homeless women veterans we talked to cited safety concerns about GPD housing, and 9 of the 142 GPD programs we surveyed indicated that there had been reported incidents of sexual harassment or assault on women residents in the past 5 years.[13] GPD providers also cited safety concerns as a barrier to accessing veteran housing. In response to a recent report by the VA Inspector General, VA has begun to evaluate safety and security arrangements at GPD programs that serve women. However, VA does not have gender-specific safety and security standards for its GPD housing, potentially putting women veterans at risk of sexual harassment or assault.

While VA is taking steps—such as launching an outreach campaign—to end homelessness among all veterans, it does not have sufficient data about the population and needs of women veterans to plan effectively for increases in their numbers as servicemembers return from Iraq and Afghanistan. Further, without improved services, women—including those with children and those who have experienced military sexual trauma—remain at risk of homelessness and experiencing further abuse.

[12]According to a VA official, there is no specific statutory prohibition against making these payments solely on behalf of veterans' children, rather it is the lack of such authority in the GPD program statute that precludes VA from making such payments. Although VA lacks authority to fund beds for children, under the special needs component of the GPD program VA can provide some additional funding on behalf of women veterans with dependent children. See 38 U.S.C. § 2061.

[13]Seven of the nine programs that reported incidents of sexual assault or harassment were mixed gender facilities. Reports included incidents involving both staff and other residents.

Recommendations for Executive Action

We are making the following recommendations:[14]

- In order to help achieve the goal of ending homelessness among veterans, the Secretaries of VA and HUD should collaborate to ensure appropriate data are collected on homeless women veterans, including those with children and those with disabilities, and use these data to strategically plan for services.
- In order to ensure homeless women veterans have an appropriate place to stay while they await placement in GPD or HUD-VASH housing, the Secretary of VA should ensure implementation of VA's referral policies.
- To better serve the needs of homeless women veterans with children, the Secretary of VA should examine ways to improve transitional housing services for homeless women veterans with children.
- To ensure that women veterans are safely housed, the Secretary of VA should determine what gender-specific safety and security standards are needed for GPD programs, especially for those serving both women and men.

Agency Comments and Our Evaluation

We provided a draft copy of this report to the Department of Veterans Affairs and to the Department of Housing and Urban Development for review and comment. Both agencies generally agreed with our recommendations and noted steps they were taking to address them.[15] Specifically, HUD officials told us they agreed with our recommendation that the Secretaries of VA and HUD should collaborate to ensure appropriate data are collected on homeless women veterans and use these data to strategically plan for services. They also noted that HUD is considering requiring gender data be collected in the upcoming 2013 count of unsheltered veterans. VA officials provided written comments stating their general agreement with our recommendations and detailed the agency's ongoing or planned initiatives related to those

[14]More details on these recommendations can be found in appendix II, pages 55-58.

[15]Both agencies also provided technical comments which we incorporated in our draft as appropriate.

recommendations. VA comments are discussed in further detail below and are reprinted in appendix VI.

In concurring with our recommendation on data collection, VA said several initiatives are already planned or underway to gather information on those homeless women veterans who are in contact with the VA, including the development of a more streamlined and comprehensive data collection system. VA also stated that the agency already gathers information on homeless women veterans and their needs. However, we disagree that current efforts capture detailed information on homeless women veterans or their gender-specific needs.

In concurring with our recommendation on ensuring the implementation of VA's referral policies, VA acknowledged there may be service gaps while women await veteran housing. To address the recommendation, VA said it plans to review and modify current national guidance on referrals, and to develop training for all staff working with homeless veterans on providing appropriate referrals for women.

In its concurrence with our recommendation on improving transitional housing services for homeless women veterans with children, VA said it will work with the U.S. Interagency Council on Homelessness to examine how other federal agencies fund such housing and to identify resource-sharing opportunities. VA also said it will explore the development of a legislative proposal to enhance its authority to fund transitional housing for the children of homeless veterans.

In its concurrence with our recommendation on ensuring that women veterans are safely housed in GPD programs, VA noted that it has taken steps to evaluate the gender mix and scope of services and recently developed gender-specific safety and security standards. However, VA officials were unable to provide us with written documentation of any such standards for the GPD program. VA also said it plans to make regulatory changes to enforce specific safety and security standards for those programs that shelter women veterans.

As agreed with your offices, unless you publicly announce the contents of this report earlier, we plan no further distribution until 30 days from the report date. At that time we will send copies of this report to relevant congressional committees, the Secretary of the Department of Veterans Affairs, the Secretary of the Department of Housing and Urban Development, and other interested parties. In addition, this report will be available at no charge on GAO's Web site at http://www.gao.gov.

If you or your staffs have any questions about this report, please contact me at (202) 512-7215 or bertonid@gao.gov. Contact points for our Offices of Congressional Relations and Public Affairs may be found on the last page of this report. GAO staff who made key contributions to this report are listed in appendix VII.

Daniel Bertoni
Director, Education, Workforce,
and Income Security Issues

Appendix I: Objectives, Scope, and Methodology

Objectives

This appendix discusses in detail our methodology for addressing the following research questions: (1) What is known about the characteristics of homeless women veterans, including those with disabilities? and (2) What barriers, if any, do homeless women veterans face in accessing and using VA's Homeless Providers Grant and Per Diem and HUD-VA Supportive Housing programs?

To address these research questions, we analyzed VA data on women veterans (including those with disabilities) identified by VA as being homeless for fiscal years 2006 through 2010, and surveyed all GPD program providers that VA indicated had a capacity to serve women veterans and all homeless coordinators at VA Medical Centers. We also conducted site visits to California, the District of Columbia, Pennsylvania, and Texas, which included discussions with service providers, organizations collecting homelessness data, and homeless women veterans. In addition, we interviewed agency officials, and representatives of veterans service organizations, and reviewed relevant federal laws, regulations, and program documents.

We conducted our work from October 2010 through December 2011 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and recommendations based on our audit objectives.

Analysis of VA Data

We received various data sets from VA that included information on homeless women veterans that had been in contact with the VA. The largest data set was the Form X data set, followed by data on HUD-VASH. We also received data on VA's diagnoses of disabilities among these homeless veterans.

Data Sets

Form X is the intake form that VA used to identify the programmatic needs of homeless veterans—and includes information on the veterans' characteristics and demographics. For example, Form X data include information on age, gender, race, marital status, and time period of military service. In addition, the form captures information on homelessness, such as length of time homeless, the location of the veteran's sleeping arrangement the prior night, and number of incidents

of homelessness. The form also has information on employment, income, veterans' benefits, and the programmatic needs of the veteran.

HUD-VASH data were collected on several worksheets that corresponded to the process of accessing HUD-VASH services. VA provided us with data from HUD-VASH Referral Worksheets, Admission Worksheets, and Housing Progress Report Worksheets. The HUD-VASH data contains demographic information similar to that described for Form X in the prior paragraph, but also includes information on the veteran's parental status and relation with minor dependent children (i.e., custody and residence).

VA also provided us with data (VETSNET) on the any diagnoses of disabilities for those veterans the VA had identified as being homeless. For those veterans with such diagnoses, the data specified the disabling conditions and provided the disability rating associated with severity of the disabilities.[1]

Analysis of Characteristics of Homeless Women Veterans

To conduct this analysis we combined the two large data sets—Form X and HUD-VASH Referral data.

Before combining the data, we cleaned each data set as follows:

- Dropped cases where the date the form was completed or the date the referral to HUD-VASH was made were missing.
- Dropped cases where gender was missing or where gender changed in cases where there were multiple records for the same individual.
- Ensured one record per person per fiscal year in each data set.
  - For cases that had more than one record, we:
    - Selected the record that had the least amount of missing variables
    - In cases that had more than one record with the same amount of missing variables we kept the most recent record.

[1]VA uses disability ratings to set monthly disability compensation for eligible veterans. The rating is a percentage that increases with the severity of the disability. 38 U.S.C. § 1155.

We then combined the data sets. To clean the combined data, we:

- Dropped cases where gender was not consistent—for example if a veteran was coded as a female in one source and a male in another.
- Followed the same steps as above for multiple records.

Form X data did not contain information on the number of children a veteran may have or their residential status in relation to the veteran. For the analysis related to children, we relied exclusively on HUD-VASH Referral data.

Based on the data from Form X and HUD-VASH Referral, we created a disability flag according to a self reported response of receiving disability compensation.

To conduct our analysis of the frequency of various disabling conditions among homeless women veterans, we used the VETSNET data as follows:

- For cases where there was more than one record per person, we kept the record with the highest combined disability rating and with the most diagnostic codes.
- We merged the VETSNET data with the data that was used for the analysis described above.
- As before, we dropped cases where gender was undetermined, for example if the gender from one data set was different from the gender in the other.

Analysis of HUD-VASH Wait Times

- To conduct our analysis of the wait times for HUD-VASH we used information from the HUD-VASH Referral, Admission, and Housing Progress Report Worksheets as follows:
- We used only data that was collected through VA's Online Data Collection because the data contained unique identifiers for each episode, which allowed us to accurately track and merge episodes across the multiple forms.

- We merged the following data sets:
  - HUD-VASH Referral
  - HUD-VASH Admission
  - HUD-VASH Housing Progress Report, Forms I and II
- To ensure we had complete records for our analysis we dropped cases that were missing key information.
  - We dropped cases that did not have the entire sequence of forms. For example, if a case appeared in the Admission form but not the Housing Progress Report forms, then that case was dropped.
  - We dropped those cases that were missing one or more of the following key variables of our analysis:
    - Date of HUD-VASH referral
    - Date of formal admission to HUD-VASH (Admission Form, Q8)
    - Date HUD-VASH voucher was awarded (Housing Progress Report, Part I, Q8a)
- Date veteran moved into apartment (Housing Progress Report, Part II, Q15)
- We also dropped cases where gender was missing or did not match across the various forms.
  - We ensured each person had one record by using the most completed record (based on key variables for our analysis) across all forms for each person with multiple records.
    - If a person had multiple completed records, then the most current entry was used. “Most current” was defined as the most current date of referral.

Surveys

In order to determine whether there were barriers that homeless women veterans faced in accessing veteran housing services, we conducted two surveys—one to GPD providers and one to homeless coordinators at VA Medical Centers. The practical difficulties of conducting any survey may introduce certain errors, such as difficulties interpreting a particular question, which can introduce unwanted variability into the survey results. We took steps to minimize such errors by pretesting the GPD survey with four program providers and the short homeless coordinator survey with two homeless coordinators. We conducted pretests to verify that (1) the questions were clear and unambiguous, (2) terminology was used correctly, (3) the questionnaires did not place an undue burden on officials, and (4) the questionnaires were comprehensive and unbiased. An independent reviewer within GAO also reviewed a draft of each survey prior to its administration. We made revisions to the surveys based on feedback from the pretests before administering the surveys.

Survey of Grant and Per Diem (GPD) Program Providers

In order to determine whether there were barriers that homeless women veterans faced in accessing GPD housing we surveyed GPD programs that VA indicated had a capacity to serve women. We added 10 more programs as some providers told us they had additional programs serving women (for a total of 226 programs). Of these, we dropped 48 programs—bringing our target population to 178—as we determined that certain GPD programs were not in the scope of our survey. For example, we dropped programs that reported not serving women, were not yet operational, or had closed. To increase the response rate for our survey, we sent out follow up e-mails, made phone calls to the non-respondents on two occasions, and resent surveys as necessary. Through these efforts, 142 of 178 providers submitted their completed surveys—for a response rate of 80 percent. In addition, for the map on slide 9 we were able to contact 9 additional providers and have them complete partial surveys by phone; thus the map is based on information from 151 providers, or 85 percent of our population.[2] Questions in the GPD Survey focused on number of beds available to homeless women veterans and the configuration of GPD facilities (mixed gender or single gender and living arrangements), beds for specific populations (veterans with disabilities and veterans with children), safety concerns, outreach, and

[2]With the exception of the map and its corresponding appendix, GPD survey findings in the report are based on responses from the 142 surveys (80 percent) that were submitted.

barriers homeless women veterans may face when accessing veteran housing.

Survey of VA Medical Center Homeless Coordinators

In order to determine whether there were barriers related to outreach and placement in temporary housing during wait times for VA programs, we surveyed all 142 homeless coordinators at VA medical centers. We received responses from 114 of these coordinators, for a response rate of about 80 percent. We do not have information on whether or not VA Medical Centers reviewed these surveys or how such a review may have affected the responses. Questions focused on outreach efforts, referral plans and processes, and tracking veterans awaiting placement in veteran housing.

Site Visits

In order to improve our understanding of data collection on homeless women veterans and any barriers women veterans may face in accessing GPD or HUD-VASH housing, we conducted four site visits to California, the District of Columbia, Pennsylvania, and Texas. These sites were selected in part for geographic diversity, range of services offered, and the concentration of homeless veterans. California and Texas are among the fours states with the greatest populations of homeless veterans. More information on the types of programs we visited is in table 1.

Table 1: Types of Programs and Settings Visited during Our Site Visits

	VA GPD providers			Non VA sponsored Facility			
	Special needs grant to serve women with children	Women only program	Mixed gender program	Capacity to serve women and children	Women only	Mixed Gender	Sites we visited were generally
California	✓	✓	✓	✓	✓		Urban
District of Columbia			✓				Urban
Pennsylvania		✓					Non Urban
Texas			✓	✓		✓	Both

Source: GAO analysis of site visit documentation.

For our site visits we spoke with:

- VA Medical Center staff, including homeless coordinators when possible;
- GPD providers;
- homeless women veterans;
- representatives from the local Continuums of Care; and
- community-based homeless service providers that housed women veterans, but did not receive GPD funding.

We also took photographs at VA Medical Centers and at GPD programs.

Discussion Groups

To improve our knowledge of any barriers that homeless women veterans face and to understand their experiences seeking housing, we held ten structured discussion groups during our site visits at VA and non VA funded programs. Overall we spoke with more than 50 women veterans who were experiencing or had experienced homelessness (the number is not exact because in some discussion groups women entered and left). In order to help ensure anonymity and increase comfort with the discussion, we asked that the women not use their own names throughout the discussions.

In each of the discussion groups, we covered the following topics: factors that led to homelessness, experiences with current housing program and other housing programs if appropriate, HUD-VASH, homelessness with dependent children, and experiences while waiting for veteran housing programs. We also discussed barriers the women may have faced in accessing GPD housing and solicited any suggestions the women had for how the federal government could best meet their needs. Following the discussion groups, we asked the women to provide us with some basic demographic information on a volunteer basis, and 52 women completed the demographic forms.

Table 2: Summary Information about the Women in Our Discussion Groups Who Completed the Demographic Forms

Characteristic		Number of women (Total 52)
Age	18-29	4
	30-39	7
	40-49	12
	50-59	25
	60-69	3
	70-79	1
Race	African American or Black	23
	Caucasian or White	20
	Other	5
Employment	Employed	12
	Unemployed	39
Education	GED	1
	High school diploma	8
	Some college (no degree)	24
	Associate's degree	9
	Bachelor's degree	9
	Doctorate	1
Had children under the age of 18		11

Source: GAO analysis of voluntary participant questionnaires.

Note: Number of women in each category may not sum to 52 as some fields were missing.

Appendix II: Briefing Slides

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HOMELESS WOMEN VETERANS: Actions Needed to Ensure Safe and Appropriate Housing

Briefing to Congressional Staff:

Committee on Veterans Affairs
United States Senate

November 2011

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Overview

- Introduction
- Research Questions
- Scope and Methodology
- Summary of Key Findings
- Background
- Findings
- Conclusions
- Recommendations

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Introduction

- As more women serve in the military, the number of women veterans has grown substantially, doubling from 4 percent of the veteran population in 1990 to 8 percent (or an estimated 1.8 million) today.
- The number of women veterans will continue to increase as service members return from the conflicts in Iraq and Afghanistan.
- Some women veterans are at risk of homelessness because they:
  - have disabling psychological conditions, such as Post-Traumatic Stress Disorder and Major Depressive Disorder, often resulting from experiencing military sexual trauma,[a] or
  - are single mothers facing challenges with readjustment to civilian life.[b]

[a]Military sexual trauma (MST) is linked to homelessness among women veterans ("Risk Factors for Homelessness Among Women Veterans," Washington, Yano, McGuire, et al. *Journal of Health Care for the Poor and Underserved*, 2010; 21(1): 82-92. VA uses the term MST to refer to psychological trauma resulting from a physical assault or battery of a sexual nature or sexual harassment which occurred on active duty. See 38 U.S.C. 1720D. Women are more likely than men to experience MST (GAO-10-287).

[b]Young single mothers, in general, are vulnerable to being homeless. Women veterans are more likely to experience homelessness than similar non-veteran women. Fargo, Metraux, Byrne, Munley, Montgomery, Jones, Sheldon, and Culhane. 2011. "Prevalence and Risk of Homelessness among US Veterans: A Multisite Investigation," *The Selected Works of Dennis P. Culhane*.

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Introduction

- The Department of Veterans Affairs (VA) has committed to ending homelessness among all veterans by 2015.
  - One of the guiding principles set forth in the plan is that "veterans and their families are the centerpiece of our mission and of everything we do."[a]
- VA offers several housing programs for homeless veterans. The two largest housing programs are the:
  - VA Homeless Providers Grant and Per Diem (GPD) Program, which funds transitional housing and supportive services;[b] and
  - HUD-VA Supportive Housing (HUD-VASH), which is a joint program of the Department of Housing and Urban Development (HUD) and VA offering permanent supportive housing.[c]
- While these programs have expanded in recent years to serve more veterans, it remains unclear whether they have the capacity to meet the housing needs of all homeless women veterans and their families.

[a]Department of Veterans Affairs, *VA Strategic Plan Refresh 2011-2015*, 21.

[b]38 U.S.C. §§ 2011, 2012, 2061, 2064. In FY 2011, VA obligated $ 217.7 million under the GPD program.

[c]See 73 Fed. Reg. 25,026 (May 6, 2008). HUD-VASH permanent supportive housing consists of case management provided by the VA coupled with rental assistance provided by HUD for housing selected by the veteran. In FY 2011, VA obligated $151.1 million for case management under the HUD-VASH program and HUD received a $50 million appropriation for rental assistance vouchers under HUD-VASH.

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Research Questions

1. What is known about the characteristics of homeless women veterans, including those with disabilities?

2. What barriers, if any, do homeless women veterans face in accessing and using VA's Homeless Providers Grant and Per Diem and HUD-VA Supportive Housing programs?

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Scope and Methodology

To answer these questions, we:

- analyzed VA data for fiscal years 2006-2010 on women veterans (including those with disabilities) identified by VA as being homeless;[a]
- surveyed all GPD program providers that VA indicated had a capacity to serve women veterans and all homeless coordinators at VA Medical Centers;[b]
- conducted site visits to California, the District of Columbia, Pennsylvania, and Texas, which included discussions with service providers, organizations collecting homelessness data, and homeless women veterans;[c] and
- interviewed agency officials and veterans service organizations, and reviewed relevant federal laws, regulations, and program documents. For more details on our methodology, see appendix I.

We assessed VA data for reliability and found them to be sufficiently reliable for the purposes of this report.

We conducted this performance audit from October 2010 through November 2011 in accordance with generally accepted government auditing standards.

[a]VA may identify women as homeless during outreach activities or when women contact the VA for services. Not all women veterans who contact the VA for services are automatically screened for homelessness. Fiscal years span October 1 – September 30.
[b]Both surveys achieved a response rate of 80 percent and are generalizable. Homeless coordinators are responsible for oversight and monitoring of VA homeless programs for a given network of VA Medical Centers in a geographic region.
[c]These sites were selected in part for geographic diversity, range of services offered, and the concentration of homeless veterans identified by VA.

Summary of Key Findings

1. Data on the characteristics of homeless women veterans are limited to those who have been in contact with VA. While HUD captures data on homeless women and on homeless veterans, neither HUD nor VA collect detailed information on homeless women veterans. Specifically, they lack data on the number of such women in the general population, as well as data on the characteristics and needs of these women on a national, state, and local level.

2. Homeless women veterans face barriers when accessing and using veteran housing,[a] including lack of awareness of these programs, lack of referrals for temporary housing while awaiting placement in GPD and HUD-VASH housing, limited housing for women with children, and concerns about personal safety.

[a]Throughout this report, we use the term "veteran housing" to refer exclusively to the housing offered by the GPD and HUD-VASH programs.

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GAO
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Background

- For the purpose of the GPD and HUD-VASH programs, homeless veterans include those:
  - who lack a fixed, regular, and adequate nighttime residence;
  - whose primary nighttime residence is a place not designed for or ordinarily used as a regular sleeping accommodation; or
  - who are living in a supervised temporary shelter (including hotels and motels funded by charities or government programs).[a]
- HUD, VA, and the Department of Labor fund programs that specifically serve homeless veterans. These programs focus on supportive housing (transitional and permanent); treatment and rehabilitation; employment and job training; and the prevention of homelessness.[b]
- In addition, VA officials told us that the agency recently created a task team to address the needs of homeless women veterans.

[a]Pursuant to 38 U.S.C. § 2002(1), both the GPD and HUD-VASH programs define "homeless veteran" in accordance with section 103(a) of the McKinney-Vento Homeless Assistance Act. Other veterans may also be considered homeless under these programs; for the complete definition, as amended, see 42 U.S.C. § 11302(a).

[b]VA homelessness prevention efforts include Supportive Services for Veteran Families and the National Call Center for Homeless Veterans (1-877-4AID VET). See appendix III for information on these programs and others. A complete discussion of these programs is also available in a report by the Congressional Research Service, Veterans and Homelessness (RL34024), July 2011.

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Background

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Grant and Per Diem Program

- VA annually awards funding to community providers for supportive housing to homeless veterans through its GPD Program.[a]
  - VA staff are tasked with approving applications from potential community providers and annually reviewing existing programs to ensure they meet program requirements, including general safety requirements. As of October 2011, VA reimbursed providers up to $38.90 per day for each veteran housed.
  - A special needs component of the GPD program funds providers that serve certain groups of vulnerable homeless veterans, including women veterans caring for minor dependent children.[b]
- GPD programs offer various supportive services for homeless veterans to help them achieve residential stability, increase their skill levels and/or income, and aid their self-determination.
- The 600 current GPD programs have 13,888 beds that primarily provide transitional housing—typically up to 24 months—to homeless veterans.
  - Approximately 178 GPD programs serve women and 42 of these programs opened in the last two years.[c]
  - Currently, as many as 2,605 beds are available to women veterans.
    - At least 956 of these beds are currently designated solely for homeless women veterans.
    - These figures include 74 beds at the six GPD providers receiving special needs funds to serve women veterans with children.

[a]38 U.S.C. §§ 2011, 2012, 2061, 2064. VA also awards funding for supportive services. Under the per diem component of the program, VA is authorized to pay providers the daily cost of care per eligible veteran, subject to certain limitations.
[b]38 U.S.C. 2061.
[c]We determined there were about 178 GPD programs with a capacity to serve women based on data provided by VA. In the course of surveying programs, we found that some did not actually serve women. On the other hand, some programs that were not identified as having a capacity to serve women did, in fact, serve women. Therefore, the exact number of these programs remains unclear. The 178 programs include the 26 GPD programs that did not respond to our survey. See appendix I.

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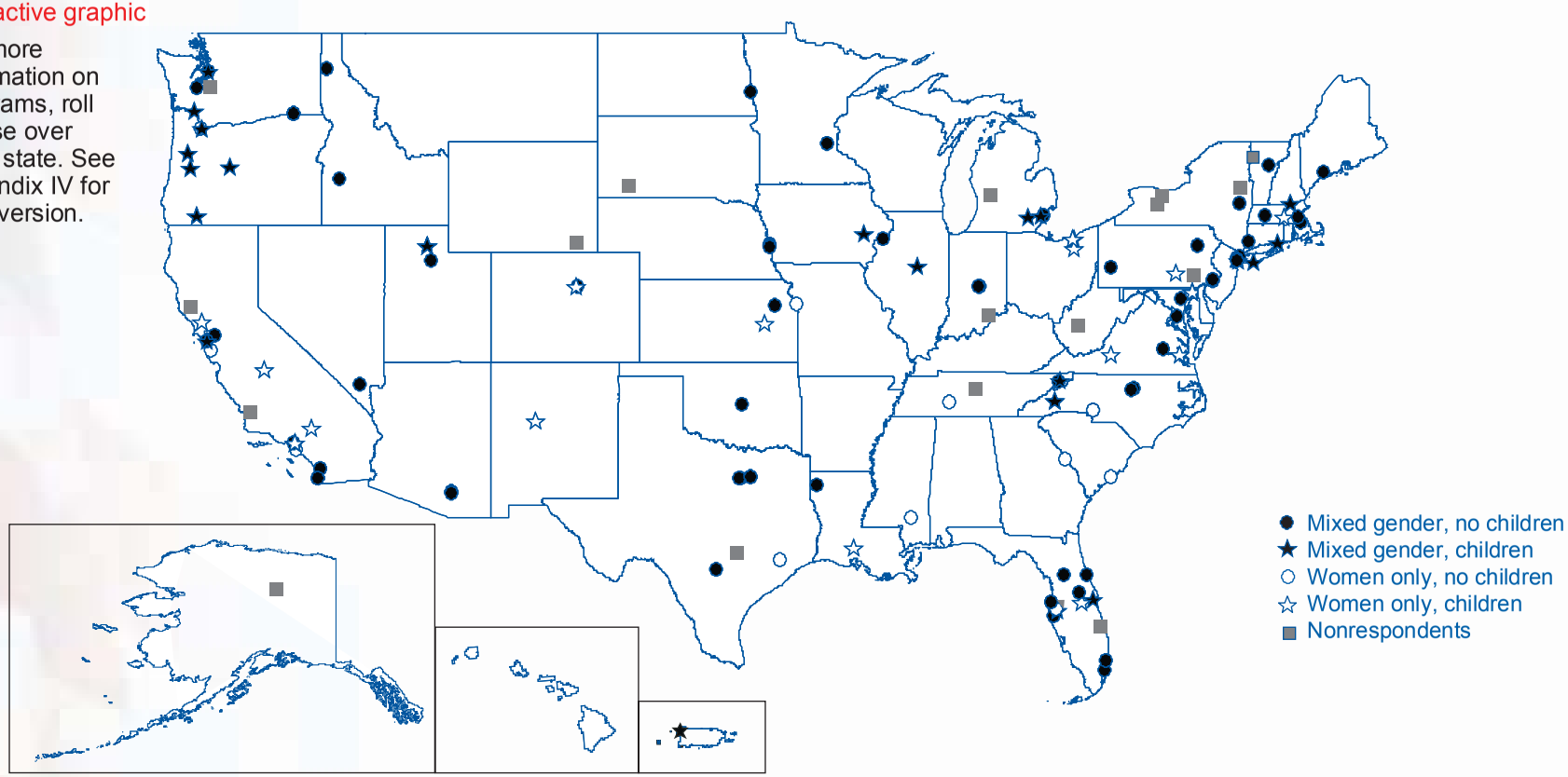
Grant and Per Diem Program (cont'd)

Interactive graphic

For more information on programs, roll mouse over each state. See appendix IV for print version.



Source: GAO analysis of survey and VA data.

Background

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HUD-VA Supportive Housing (HUD-VASH) Program

- The HUD-VASH program provides case management and assistance with permanent supportive housing for homeless veterans and their families.
  - VA provides case management and services to support stability or recovery from physical and mental health issues, or substance abuse.[a]
  - HUD provides rental assistance through the Housing Choice (Section 8) Voucher Program, which provides rental subsidies to homeless veterans to rent apartments or houses.[b]
- HUD and VA work collaboratively to determine the distribution of the vouchers.

[a]38 U.S.C. 2003(b).
[b]Local public housing agencies use funding from HUD to administer Housing Choice/Section 8 vouchers that assist very low-income families, among others, to afford decent, safe, and sanitary housing in the private market. See 24 C.F.R. 982.1.

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Background

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HUD-VA Supportive Housing (HUD-VASH) Program (cont'd)

- HUD-VASH vouchers are targeted to the chronically homeless; however, homeless women veterans who are not chronically homeless, including those with children, are also eligible for HUD-VASH, according to the program handbook.[a]
  - Over 31,000 HUD-VASH vouchers were issued from fiscal years 2008 through 2011, according to VA data, and about 11 percent went to homeless women veterans.[b]
  - 1,020 HUD-VASH vouchers, or about 3 percent, were given to homeless women veterans with children during this time period, according to VA data.[b]

[a]Veterans Health Administration Handbook 1162.05, 19-20.
[b]Based on GAO analysis of VA data from HUD-VASH Referral Worksheets (fiscal years 2008-2011).

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Background

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Federal Data Collection on Homeless Veterans

- In response to congressional directives, HUD collects data on homelessness in part to assist with service planning at the federal level.[a] VA uses HUD data on homeless veterans to track progress toward its goal of ending homelessness among veterans by 2015.
  - HUD publishes the Annual Homeless Assessment Report to Congress on the extent and nature of homelessness using data collected from the Homeless Management Information Systems, Point-in-Time Counts, and Housing Inventory Counts.[b]
  - Over the past 2 years, VA and HUD have been collaborating to jointly collect data specific to veterans for the veterans supplement to the Annual Homeless Assessment Report.
- To identify and plan for the needs of homeless veterans, VA collaborates with local communities across the United States through its Community Homelessness Assessment, Local Education and Networking Groups for Veterans (CHALENG) project.
  - This project publishes an annual report that ranks the needs of homeless veterans based on two VA surveys: one of homeless and formerly homeless veterans and the other of VA staff and community providers.

[a]See S. Rep. No. 106-410, at 51 (2000), S. Rep. No. 109-109, at 176 (2005).

[b]HUD and other planners and policymakers use aggregate Homeless Management Information Systems (HMIS) data for information on homelessness over time. HMIS data are collected locally then reported to HUD in aggregate form. In addition to HMIS data, HUD also collects data from locally-administered Point-in-Time counts, which are one-night counts of sheltered and unsheltered homeless persons, and Housing Inventory Counts, which inventory beds for homeless persons. VA's GPD programs recently began to participate in HMIS and in the Housing Inventory Counts.

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Finding 1: Overview of Characteristics

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Information on the Characteristics of Homeless Women Veterans Is Limited

- Limited VA data show that the number of women veterans the agency identified as homeless more than doubled between FY 2006 and FY 2010. In FY 2010, homeless women veterans were commonly middle-aged, divorced, unemployed, or newly homeless. Many of these women also had disabilities.
- HUD collects data on homeless women and on homeless veterans, but does not collect detailed data specific to homeless women veterans.
  - As a result, the number of homeless women veterans is unknown at the national, state, and local levels.
- Key information on the characteristics and needs of these women is also lacking at these levels, potentially hindering program planning and progress toward VA's goal of ending homelessness among veterans.

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Characteristics: Limited Information

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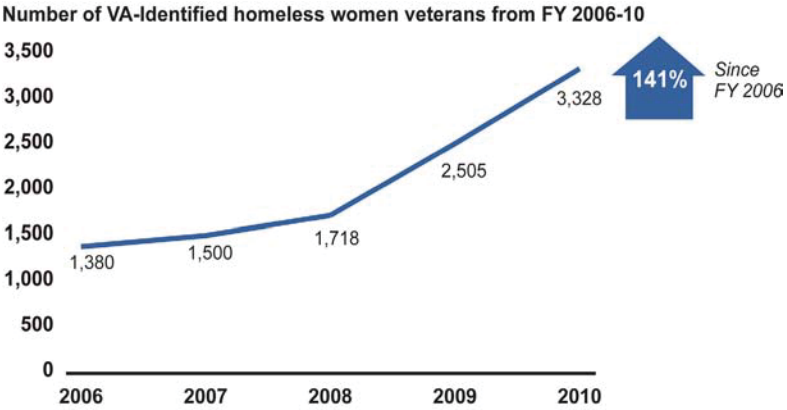
Number of Homeless Women Veterans Identified by VA Increased between FY 2006 and FY 2010

- Women veterans identified as homeless by VA increased more than 140 percent, from 1,380 in fiscal year 2006 to 3,328 in fiscal year 2010.[a]
- This compares to a 45 percent increase in male veterans identified as homeless, from 34,137 to 49,373 over the same period.



Source: GAO analysis of VA data.

- Data represent only those homeless veterans identified by VA, and are not generalizable to the population of homeless women veterans.

[a]VA collects data on homeless veterans primarily through program intake or outreach forms. Unless otherwise noted, these analyses are based on individuals identified as homeless by VA through either an intake form referred to as Form X or the HUD-VASH Referral Worksheet.

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Characteristics: Limited Information

GAO
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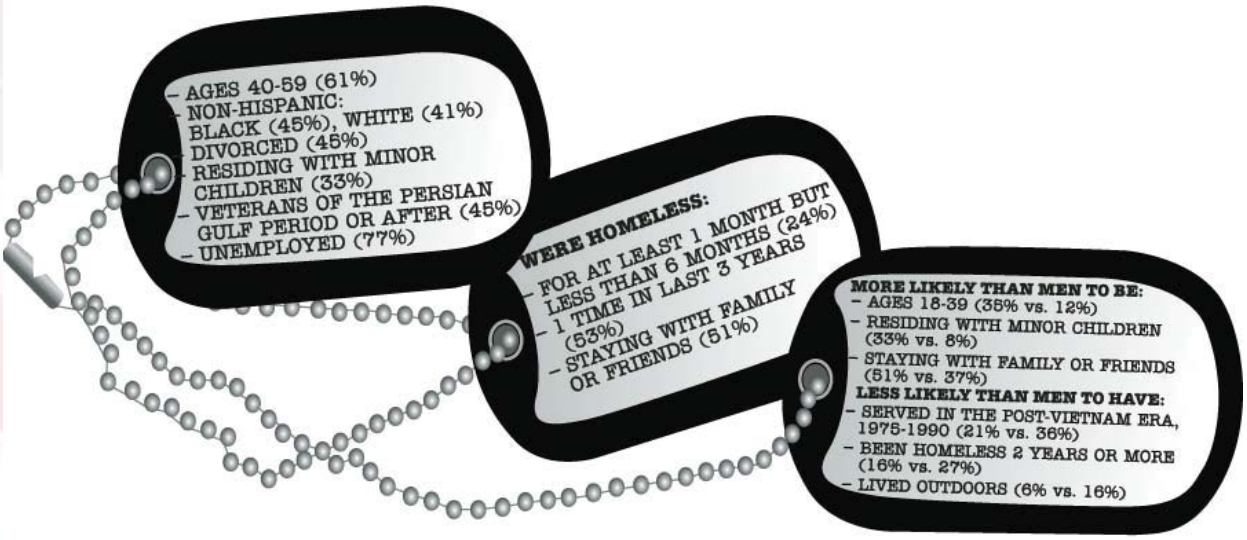
Homeless Women Veterans Identified by VA Were Often Unemployed and Staying with Family or Friends

Characteristics of VA-Identified Homeless Women Veterans (FY 2010)[a]



Source: GAO Analysis of VA data on population identified as homeless (intake form and HUD-VASH Referral Worksheet).

[a] Information concerning the children of VA-identified homeless women veterans is based on GAO analysis of VA's HUD-VASH Referral Worksheet data. "Staying with family or friends" above signifies "living in an apartment, room, or house of family member or friend during the past 30 days." "Lived outdoors" above signifies "lived outdoors during the past 30 days." The "Persian Gulf period or after" includes the conflicts in Afghanistan and Iraq.

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Characteristics: Limited Information

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Homeless Women Veterans Identified by VA Frequently Had Disabilities

- VA data indicate that over 40 percent of VA-identified homeless women veterans had disabilities and a corresponding disability rating.[a]
  - Among those with a disability rating, homeless women were more likely than homeless men to have a rating of 50 percent or higher.
  - The most frequent diagnoses among homeless women veterans with a disability rating were musculoskeletal conditions followed by mental disorders and eating disorders.
- The characteristics of homeless women veterans who reported receiving disability compensation were largely similar to those who did not report receiving such compensation. However, a larger percentage were unemployed (86 percent compared to 71 percent for those without disability compensation).

[a]VA uses disability ratings to set monthly disability compensation for eligible veterans. The rating is a percentage that increases with the severity of the disability. 38 U.S.C. 1155. About 20 percent of the homeless women veterans with a disability rating had a rating of 0 percent and therefore likely received no disability compensation. Analysis on disability ratings and associated conditions of homeless women veterans identified by VA between FY 2006 and FY 2010 is based on VETSNET data received from VA on May 31, 2011.

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Characteristics: Inadequate Data

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Neither VA Nor HUD Capture Data on the Overall Population of Homeless Women Veterans

- HUD captures detailed data on homeless women and on homeless veterans, but not on homeless women veterans.
  - As a result, the number of homeless women veterans is unknown at the national, state, and local levels.[a]
- In addition, VA does not have complete information on the characteristics and needs of these women on a national, state, or local level because neither HUD nor VA collect these data.
  - HUD does not collect any data on unsheltered veterans by gender.
  - Neither HUD's Annual Homeless Assessment Report nor its associated veterans supplement capture characteristics of sheltered homeless women veterans, such as age, number of children, or disability status.
  - VA does not have complete information on the needs of homeless veterans by gender.
    - While VA has begun collecting gender information from its survey of homeless veterans for its 2011 CHALENG report, it does not collect gender-specific information on the needs of homeless veterans from its survey of local VA staff and community providers.[b]

[a]Because HUD does not collect data on unsheltered homeless women veterans, neither HUD nor VA know the total number of sheltered and unsheltered homeless women veterans.
[b]VA's annual Community Homelessness Assessment, Local Education and Networking Groups for Veterans (CHALENG) report is the agency's primary assessment of homeless veterans' needs.

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Characteristics: Inadequate Data

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Lack of Data Hinders Program Planning and Measurement of Progress toward Goal of Ending Homelessness

- Limited VA and HUD data hinder a thorough understanding of the characteristics and needs of the overall population of homeless women veterans.
- Without more complete data, VA does not have information needed to plan services effectively, allocate grants to providers, and track progress toward its overall goal of ending veteran homelessness by 2015.
  - VA's incomplete data on the needs of homeless women veterans impedes its ability to plan programs and services for this population.
  - While VA funds programs for housing homeless women veterans, it does not have adequate data to determine if the programs have the right number of beds in the right locations.
  - VA does not have the information necessary to measure changes in the total number of homeless women veterans, including those who are unsheltered, over time.
- To be consistent with federal standards and best practices established by GAO, federal agencies should ensure they capture information needed to plan effectively.[a] In addition, Congress directed HUD to develop meaningful data on the nation's homeless population to improve efforts in addressing homelessness.[b]

[a]For more information on these standards and best practices, see the Government Performance and Results Act (GPRA) Modernization Act of 2010 (GPRAMA), Pub. L. No. 111-352, 124 Stat. 3866 (2011), which amends the Government Performance and Results Act of 1993, Pub. L. No. 103-62, 107 Stat. 285 (1993), and internal control standards in GAO/AIMD-00-21.3.1 and GAO-01-1008G.
[b]See S. Rep. No. 106-410, at 51 (2000), S. Rep. No. 109-109, at 176 (2005).

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Characteristics: Inadequate Data

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Collecting Additional Data on Homeless Women Veterans Would Involve Minimal Burden and Cost

- A key HUD official familiar with homelessness data collection said the burden and cost of obtaining data on homeless veterans by gender would be minimal.
  - Because HUD currently captures information on both homeless veterans and on homeless women, capturing detailed information on homeless women veterans would require minimal changes to HUD's data collection efforts, according to HUD officials.[a]
- Representatives of the five organizations we contacted that submit homelessness data to HUD said the burden of submitting data on the numbers and characteristics of homeless veterans by gender would be minimal.
  - These representatives also stated that they currently collect some data on the characteristics of homeless women veterans.
- In addition, VA officials familiar with the CHALENG report indicated that modifying the report's data collection efforts to gather information from providers on the needs of homeless women veterans would not impose additional costs.

[a]Beginning with the 2011 Point-in-Time counts, HUD required all participating communities to gather the veteran status of sheltered and unsheltered homeless individuals. Its guidance acknowledged that determining veteran status would likely require interviewing individuals—as this status cannot be determined visually. Although HUD officials told us this requirement may be challenging and data quality could initially be problematic, they agreed that data on gender could likewise be gathered with minimal additional burden. Collecting gender specific data would likely require minimal modifications to HUD's data system; however, as with any new data collection effort, HUD would need to ensure the data were cleaned and validated. Representatives of the two software companies we contacted told us the cost associated with modifying their data collection software and the challenges to making these changes would be minimal.

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Finding 2: Overview of Housing Barriers

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Homeless Women Veterans Face Several Significant Barriers to Accessing and Using GPD and HUD-VASH Housing

Homeless women veterans encounter several barriers to accessing and using the GPD and HUD-VASH programs. These include:

- Lack of awareness about these housing programs:
  - Many homeless women veterans may not know about VA supported housing; however, VA has recently launched an extensive outreach campaign that includes efforts to target homeless women veterans.
- Lack of referrals:
  - About 24 percent of VA Medical Center homeless coordinators reported not having referral plans or processes in place to ensure homeless women veterans have temporary housing while they wait for HUD-VASH or GPD housing.
- Limited housing for women with children:
  - Only about one-third of GPD programs with a capacity to serve women could also house their children, and many of these programs had restrictions on the ages or number of children per family.
- Safety concerns:
  - Homeless women veterans we talked to cited safety concerns with GPD housing and some GPD programs reported incidents of sexual harassment or assault on women residents. In addition, there are no minimum gender-specific safety and security standards for GPD programs.[a]

[a]However, GPD providers must comply with general safety requirements, such as fire codes and state and local housing codes and licensing requirements. See 38 C.F.R. 61.80

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Housing Barriers: Lack of Awareness

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Lack of Awareness About Veteran Housing Poses a Barrier

- Many homeless women veterans may not be accessing veteran housing programs because they are unaware of the availability of these programs, according to GPD programs we surveyed, service providers, agency officials, and experts we interviewed.

- While VA Medical Center homeless coordinators reported reaching out to homeless women veterans at locations such as soup kitchens and homeless veteran outreach events (stand downs), they described several challenges.[a]
  - For example, one homeless coordinator wrote, "Homeless women veterans are an invisible population. They do not want to be identified as homeless for fear of [youth protective services] assessing their situation as dangerous to the welfare of their families."
  - Several homeless coordinators told us women do not always self-identify as veterans. One homeless coordinator explained that women often believe the designation refers exclusively to those who served in combat.[b]

[a]Stand downs are 1 to 3 day events providing services to homeless veterans including food, clothing, benefits counseling, and referrals to other services.
[b]However, VA may consider those who served in combat or non-combat positions to be veterans. For the purposes of the GPD and HUD-VASH programs, a veteran is defined as a person who served in the active military, naval or air service, and who was discharged or released under conditions other than dishonorable. 38 U.S.C. 101(2).

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Housing Barriers: Lack of Awareness

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In Their Own Words: Lack of Awareness About Veteran Housing

I found myself sleeping out there on the streets… If it wasn't for a couple of veterans that were out there that told me about this place, I'd still be out there...I was stopped by a couple of cops. They said…there are lots of places for veterans. I asked where; they couldn't tell me.

—Mother of three
Served in Marine Corps for 14 years, homeless for 13 years

★ ★ ★ ★ ★

I didn't know about this place until a month ago, I had no idea the place existed…they don't advertise it or anything.

—Homeless woman veteran
Served in U.S. Navy for 1 year, homeless for 3 years

Source: GAO discussion groups with homeless women veterans in 10 locations. For details, see appendix I. These are quotes from individual veterans and do not represent the views of all the women in the discussion groups or of the total population of homeless women veterans.

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Housing Barriers: Lack of Awareness

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New VA Outreach Campaign May Increase Awareness of Veteran Housing Programs

- In October 2011, VA launched an extensive campaign to reach out to homeless veterans and connect them with veteran housing and related services. The campaign includes:
  - materials specific to women veterans and veterans with children, and
  - outreach to clergy, family members, and friends to engage those women veterans who may be reluctant to approach VA.
- The campaign targets 28 communities, including 7 in rural areas that may have fewer resources for homeless women veterans.[a]
- Sustained outreach efforts could help homeless women veterans, including those with children and those in rural areas, by increasing their awareness of veteran housing services.

[a]In a recent report on rural homelessness, GAO found that there were several challenges associated with providing homeless services in rural areas, including limited access to services and a lack of transportation. GAO, *Rural Homelessness: Better Collaboration by HHS and HUD Could Improve Delivery of Services in Rural Areas*, GAO-10-724 (Washington, D.C.: July 2010).

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Housing Barriers: Lack of Referral Plans

GAO
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Lack of Referrals for Temporary Housing While Waiting for HUD-VASH and GPD Housing Poses a Barrier

- VA screens homeless veterans for various services, including HUD-VASH and GPD housing, and requires its staff to "ensure that homeless veterans have a referral for…shelter or temporary housing" in VA or community facilities.[a]
- However, several homeless women veterans told us VA did not provide referrals for temporary housing while they awaited placement in veteran housing.
- Further, 24 percent of VA Medical Center homeless coordinators indicated that they did not have a referral plan or process for temporarily housing homeless women veterans awaiting placement in HUD-VASH or GPD programs.
- We also found that 11 percent of homeless coordinators did not have a referral plan, process, or list of shelters for these women.[b]
- Additionally, it was unclear the extent to which some homeless coordinators who reported having a referral plan, process, or list of shelters actually referred women to shelter or temporary housing.[b]

[a]The *Uniform Mental Health Services in VA Medical Centers and Clinics* handbook (VHA Handbook 1160.01) establishes minimum clinical requirements for VA mental health services, which includes treatment of homeless veterans. VA has also issued general guidance on the referral and placement of homeless veterans in its HUD-VASH handbook (VHA Handbook 1162.05).
[b]Based on GAO analysis of open-ended survey responses among VA Medical Center homeless coordinators.

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Housing Barriers: Lack of Referral Plans

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Referrals for Temporary Housing Are Needed Because of Waits for HUD-VASH and GPD Housing

- On average, a homeless woman veteran waited 126 days from her initial HUD-VASH screening to her move into more permanent HUD-VASH housing, according to our analysis of VA data for fiscal years 2008-2011.[a]

- One fourth of GPD programs we surveyed reported waits for women's beds. The median wait was 30 days.[b]

[a]Screenings for HUD-VASH are sometimes performed only if vouchers are available, so this wait time does not include any additional time a homeless woman veteran may wait for availability of a voucher. In response to our draft report, VA told us that based on their calculations using more recent data, it took an average of 102 days to transition a veteran into HUD-VASH housing, as of September 1, 2011.
[b]Waits ranged from 4 days to 1 year.

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Housing Barriers: Lack of Referral Plans

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In Their Own Words: Lack of Referrals Pose a Barrier

GAO interviewer
Did the VA help you find a place to stay while you were waiting [for veteran housing]?

No, I stayed in an unhealthy environment where I was very abused.

—Woman veteran
Served in U.S. Army and
diagnosed with a condition related to military sexual trauma

★ ★ ★ ★ ★

(While waiting for veteran housing) I slept in my car…for 9 days…One of the reasons I like a big car is in case someone throws me out I have a big back seat to sleep in…

—Homeless woman veteran
Served in U.S. Army for 3 years, homeless since 2003

Source: GAO discussion groups with homeless women veterans in 10 locations. For details, see appendix I. These are quotes from individual veterans and do not represent the views of all the women in the discussion groups or of the total population of homeless women veterans.

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Housing Barriers: Lack of Referral Plans

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Lack of Referrals for Temporary Housing Puts Homeless Women Veterans at Risk During Wait for Veteran Housing

- VA officials and others told us that homeless women veterans are often further in crisis than their male counterparts when they seek VA help.
  - One VA Medical Center homeless coordinator said homeless women veterans "have often used all of their available resources from family, friends, and community before they come to us, causing them to need immediate help, which is often hard to find."
- Without referrals to appropriate and safe housing while waiting for HUD-VASH or GPD housing, homeless women veterans may be at risk of physical harm and further trauma.
  - Homeless women living on the street are at risk of assault and other physical harm.[a]

[a]Lisa A. Goodman et al, *No Safe Place: Sexual Assault in the Lives of Homeless Women* (Harrisburg, Pa.: National Online Resource Center on Violence Against Women, 2011); Phoebe Soares et al, *A Long Journey Home: A Guide for Creating Trauma-Informed Services for Mothers and Children Experiencing Homelessness* (Rockville, Md.: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration; and the Daniels Fund; National Child Traumatic Stress Network; and the W.K. Kellogg Foundation, 2008); and Margot B. Kushel et al, "No Door to Lock: Victimization Among Homeless and Marginally Housed Persons," *Archives of Internal Medicine*, vol. 163, no. 20 (2003).

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Housing Barriers: Limited Programs House Children

GAO
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Limited GPD Housing for Homeless Women Veterans with Children Poses a Barrier

- Over 60 percent (90) of GPD programs we surveyed with a capacity to serve women reported that they do not house children.
- Over 70 percent of the 52 GPD programs that reported housing children had restrictions.
  - 31 programs restricted the number of children housed per veteran. Of these, 11 said they could accommodate up to 2 children and 6 said they could accommodate up to 3 children per veteran.
  - 16 programs had age restrictions. Of these, 5 house only children age 14 and under, and 3 do not house boys over age 12.
  - Other restrictions applied to room arrangements. For example, one program does not allow children older than 5 of different genders to share a room.

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Housing Barriers: Limited Programs House Children

GAO
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Limited GPD Housing for Homeless Women Veterans with Children (cont'd)

- Over 40 percent (62) of the GPD programs we surveyed cited "lack of access for women with children" as one of the top barriers faced by homeless women veterans.
- Additionally, over 25 percent (37) reported insufficient housing or services for homeless women veterans with dependent children.[a]
  - For example, one provider wrote: "One of the biggest [service] gaps that I see is the lack of access for women with children. It is difficult to find housing with children. The VA does not provide much support for the veteran's family."
- Such limitations on housing for women veterans with children could hinder VA from fulfilling its guiding principle of serving veterans and their families.

[a]We asked GPD programs with a capacity to serve women, "Based on your experience with this population, please describe unmet housing needs or service gaps, if any, for homeless women veterans."

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Housing Barriers: Limited Programs House Children

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In Their Own Words: Limited GPD Housing for Women with Children Poses Challenges

(Shelters that take children) don't have any beds available. You call one, they say they're full and tell you to call the one down the street and they don't have beds either…I've done things I wasn't happy with just to keep my kids off the streets.

—Mother of three children under age 12, served in U.S. Army

★ ★ ★ ★ ★

I called Child Protective Services on myself…I figured if I'd give [my children] to CPS, they could give them back to me...my son was 2 and the babies…they were infants...No one asked if I was a veteran.

— Mother of four children, served in U.S. Army
Homeless in area with no GPD program for women with children
She later received HUD-VASH housing and was reunited with her children

Source: GAO discussion groups with homeless women veterans in 10 locations. For details, see appendix I. These are quotes from individual veterans and do not represent the views of all the women in the discussion groups or of the total population of homeless women veterans.

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Housing Barriers: Limited Programs House Children

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GPD Programs Face Financial Disincentives to Serving Homeless Women Veterans with Children

- VA reimburses GPD providers for the daily costs of housing homeless veterans, but does not have the statutory authority to reimburse providers for the costs of housing veterans' children.[a]
  - Even VA's GPD special needs grant program—which specifically serves women with children—does not include payments for the daily cost of housing children.[b]
- 18 of the GPD programs we surveyed reported financial disincentives or increased costs associated with serving homeless women veterans with children.
  - For example, one provider wrote: "If a female is admitted with children, there is no compensation or reimbursement for the beds that the children use, which could be used for veterans. The result is a net loss of income for the program. Housing women veterans with children is a disincentive to programs due to an income reduction."
- As a result, homeless women veterans with children face additional barriers to accessing GPD housing and may be at risk of remaining homeless.

[a]Such reimbursements are subject to certain limitations. According to a VA official, there is no specific statutory prohibition against making these payments solely on behalf of veterans' children, rather it is the lack of such authority in the GPD program statute which precludes VA from making such payments.
[B]38 U.S.C. § 2061. As with all GPD programs, VA lacks authority to make payments solely on behalf of housing veterans' children, although funds may be used for child care and other costs.

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Housing Barriers: Safety Concerns

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Safety Concerns Pose a Barrier to Using GPD Housing

- Several homeless women veterans we talked to cited safety concerns with GPD housing, including incidents of men accessing women-only spaces, and male staff and residents watching them and making inappropriate comments and physical advances.
- 9 of 142 GPD programs we surveyed said there were reports of sexual harassment or assault of women at their facilities.[a] These included:
  - A staff member making inappropriate telephone calls to and taking photographs of a female resident.
  - A male resident pushing a female resident down and trying to kiss her.[b]
- Over one-fourth (40) of GPD programs we surveyed cited "feeling unsafe in shelter or housing facility" as a barrier that could hinder women from accessing veteran housing.

[a]Of the 9 programs reporting sexual harassment/assault of women: 7 incidents occurred in mixed gender facilities, and 5 of these programs housed men and women on a common floor with gender specific rooms.
[b]Both incidents were addressed: the staff member was fired and the male resident was discharged, according to these GPD programs.

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Safety Concerns Pose a Barrier (cont'd)

- We also found possible safety issues at some GPD facilities we visited, including:

Double doors meant to separate the women's wing from the men's wing were kept open

Unmonitored security station

Women could only access showers at specific times and had to cross a public lobby and enter the men's area to do so

Source: GAO.

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Housing Barriers: Safety Concerns

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In Their Own Words: Safety Concerns in GPD Programs

A man put his hands on me and I body slammed him...I got in trouble, but I'm not letting a man touch me...Men made gestures, said sexual things, and (sometimes) got physical. They (the VA GPD program) need to figure out a way for the women to feel safe there.

— Homeless woman veteran speaking about her experiences at a GPD program. She noted that another man continued to harass her and other female residents. She told us the GPD program gave him a warning, but did not discharge him from the program for some time.

★ ★ ★ ★ ★

If (men are allowed to say) things that are sexually inappropriate, it just doesn't feel good when you walk into that environment—it's almost like you are violated all over again. I have heard comments made that shouldn't have been made, some females here (at the GPD housing) were touched. It goes from comments, to looks, to touching.

— Homeless woman veteran speaking of her experiences at a GPD program. She had also experienced military sexual trauma while on active duty.

Source: GAO discussion groups with homeless women veterans in 10 locations. For details, see appendix I. These are quotes from individual veterans and do not represent the views of all the women in the discussion groups or of the total population of homeless women veterans.

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Housing Barriers: Safety Concerns

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VA's Inspector General Found Unsafe Conditions at a GPD Program

- The VA Office of Inspector General (OIG) reported in September 2011 that one GPD program had been housing homeless women veterans—including some who had experienced military sexual trauma and domestic violence—in an all-male facility since fiscal year 2002.[a]
- The OIG found women were inappropriately housed and little action was taken to address their safety, security, and privacy risks.
  - For example, male and female residents shared a common bathroom that was easy to enter even when the door was locked.[b]
- As a result, VA has begun surveying all active GPD programs on safety and security measures in place to protect women residents. In addition, VA officials told us that in the future they plan to ask potential GPD providers to discuss safety provisions in their funding applications.

[a]The facility was designated as being all-male, but had housed some women veterans.

[b]The VA OIG found that while the door had a lock, it was easy to use a credit card to open the door from the outside.

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Housing Barriers: Safety Concerns

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GPD Programs Lack Gender-Specific Safety and Security Standards

- VA generally requires supportive housing providers to ensure that each resident is "afforded appropriate space and security."[a]
- However, GPD programs do not have gender-specific safety and security standards, according to a VA official.[b]
- Without such standards and oversight to ensure they are in place, homeless women veterans and their children may remain at risk of sexual harassment or assault.

[a]38 C.F.R. 61.80(b)(4).
[b]Although providers applying for the special needs grants to care for women, including those with children, should include in their applications how they will address safety and security issues, see 38 C.F.R. § 61.43(d)(4), there are no minimum gender-specific safety and security standards that must be met.

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Conclusions

- VA is taking steps to end homelessness for all veterans by 2015, but it risks inadequately serving women in programs that have traditionally served men.
  - This risk is particularly significant as VA encounters an influx of women veterans, including those returning from Iraq and Afghanistan.
- Although VA has recently funded additional Grant and Per Diem programs that house women, the agency cannot efficiently allocate its resources nor effectively plan or evaluate programs for these women without specific data on the population of homeless women veterans.
- Homeless women veterans face several barriers in accessing and using veteran housing. While VA's new outreach campaign should increase awareness of veteran housing, it is incumbent on the agency to foster a more welcoming environment for homeless women veterans—including those with children and those who have experienced military sexual trauma—and to ensure they have safe and appropriate housing. Failure to do so may place homeless women veterans, and the agency's goal of ending homelessness, at risk.

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Recommendations for Executive Action

In order to help achieve the goal of ending homelessness among veterans, the Secretaries of VA and HUD should collaborate to ensure appropriate data are collected on homeless women veterans, including those with children and those with disabilities, and use these data to strategically plan for services.

- HUD could gather information on the number of unsheltered homeless women veterans through the Point-in-Time Counts.
- HUD could also collect additional information on the characteristics of homeless women veterans through its data collection efforts for the Annual Homeless Assessment Report supplement.
- VA could solicit information on the needs of homeless women veterans from local VA staff and community service providers through its CHALENG survey.

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Recommendations for Executive Action

In order to ensure homeless women veterans have an appropriate place to stay while they await placement in GPD or HUD-VASH veteran housing, the Secretary of VA should ensure implementation of VA's referral policies.

- VA should provide technical assistance or guidance to its homeless coordinators to facilitate appropriate referrals for women. For example, a national directory of programs serving women could be helpful. VA could create and distribute such a directory of GPD programs—with information on the number of beds available to women and children, the housing environment, and services offered—to help homeless coordinators make appropriate referrals for women.
- For more short term housing or when GPD beds are unavailable, VA should develop guidelines to ensure homeless coordinators have formal plans or processes to ensure homeless women veterans receive appropriate referrals.

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Recommendations for Executive Action

To better serve the needs of homeless women veterans with children, the Secretary of VA should examine ways to improve transitional housing services for homeless women veterans with children. For example, VA could:

- Establish or strengthen partnerships with community nonprofit organizations, state or local government agencies, and tribal organizations to increase transitional housing options for homeless women veterans with children—including those with older or multiple children.
- Seek additional legislative authority from Congress to fund beds for children as part of its current spending on the Grant and Per Diem Program.

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Recommendations for Executive Action

To ensure that women veterans are safely housed, the Secretary of VA should determine what gender-specific safety and security standards are needed for Grant and Per Diem programs, especially for those serving both women and men.

- Such standards should be incorporated into Grant and Per Diem Program funding applications and annual program reviews.

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Appendix III: Selected Federal Programs Serving Homeless Veterans

Agency	Program name	Type of program	2011 Obligation
VA	Homeless Providers Grant and Per Diem Program	Community-based transitional housing and/or supportive services	$217,639,000
	Health Care for Homeless Veterans	Outreach to homeless veterans and many programs, including contract housing	135,932,000
	Domiciliary Care for Homeless Veterans	Residential rehabilitation and treatment services	140,949,000
	Compensated Work Therapy/Vocational Training	Job training and ongoing employment supports	52,788,000
	Supportive Services for Veteran Families (SSVF)	Community-based supportive services to prevent homelessness	50,560,000
	National Call Center for Homeless Veterans (1-877-4AID VET)	Homelessness prevention and assistance	3,000,000
HUD & VA	HUD-VA Supportive Housing (HUD-VASH)	Permanent housing with case management and supportive services	151,069,000 (VA – obligation for case management) 50,000,000 (HUD – appropriation for rental assistance vouchers)[a]

Source: VA Volume II Medical Programs and Information Technology Programs Congressional Submission FY 2012 Funding and FY 2013 Advance Appropriations Request.

Note: These programs are listed as examples only. This table is not intended to provide a complete list of all federal programs available to homeless veterans.

[a]HUD-VASH appropriation based on Office of Housing Voucher Programs Implementation of 2011 Appropriations Housing Choice Voucher Program.

Appendix IV: State-Level Data and Additional Information on Facilities for the Grant and Per Diem Program

Table 3: State by State Data on Number of GPD Programs and Beds for Women Veterans[a]

State	Total number of programs	Number of programs serving women	Number of programs serving women with children[b]	Total number of beds	Maximum number of beds for women	Number of beds exclusively for women[b]	Number of beds for women with physical disabilities[b]	Number of beds for women with mental disabilities[b]
AK	2	1	*	50	30	*	*	*
AL	5	0	0	62	0	0	0	0
AR	1	0	0	40	0	0	0	0
AZ	9	3	0	305	46	6	8	26
CA	100	28	8	2,833	707	404	139	319
CO	11	2	1	245	80	10	20	20
CT	16	2	1	157	13	0	2	13
DC	3	1	0	126	12	12	2	12
DE	1	0	0	15	0	0	0	0
FL	46	15	3	903	149	52	29	97
GA	7	1	0	228	20	20	4	20
HI	1	0	0	98	0	0	0	0
IA	6	2	1	97	19	0	*	2
ID	5	3	1	55	23	2	20	23
IL	18	1	1	249	10	0	10	10
IN	9	3	1	226	85	30	6	75
KS	5	3	1	93	42	22	19	22
KY	10	1	*	224	16	*	*	*
LA	13	3	1	342	20	12	7	12
MA	24	6	1	623	140	43	10	35
MD	10	2	0	388	14	4	10	10
ME	2	1	0	18	10	0	10	10
MI	10	5	1	348	80	42	42	46
MN	6	3	0	46	25	0	1	20
MO	8	0	0	208	0	0	0	0
MS	3	1	0	80	12	12	12	12
MT	4	0	0	49	0	0	0	0
NC	15	5	2	361	75	26	32	69
ND	1	1	0	48	5	5	5	5
NE	5	3	0	60	30	0	20	30
NH	4	2	2	96	85	0	85	85
NJ	6	0	0	166	0	0	0	0

State	Total number of programs	Number of programs serving women	Number of programs serving women with children[b]	Total number of beds	Maximum number of beds for women	Number of beds exclusively for women[b]	Number of beds for women with physical disabilities[b]	Number of beds for women with mental disabilities[b]
NM	4	2	1	90	10	10	2	10
NV	10	3	1	339	59	4	24	24
NY	28	11	2	936	128	53	18	32
OH	27	4	4	402	16	16	2	16
OK	4	1	0	62	6	2	*	6
OR	14	7	6	267	64	9	42	64
PA	31	8	1	562	100	38	46	83
Puerto Rico	2	1	1	21	2	0	2	2
RI	4	1	1	61	6	6	2	6
SC	11	4	2	263	42	19	10	35
SD	3	1	*	82	12	*	*	*
TN	16	5	1	331	34	15	28	30
TX	17	8	0	475	75	55	23	54
UT	11	5	4	173	60	0	13	60
VA	8	5	1	140	40	22	14	30
VT	4	2	0	62	43	0	23	23
WA	17	10	2	319	147	0	63	119
WI	13	*	*	346	*	*	*	*
WV	5	1	*	63	5	5	*	*
WY	4	1	*	49	8	*	*	*
Total	**599**	**178**	**52**	**13,882**	**2,605**	**956**	**805**	**1,567**

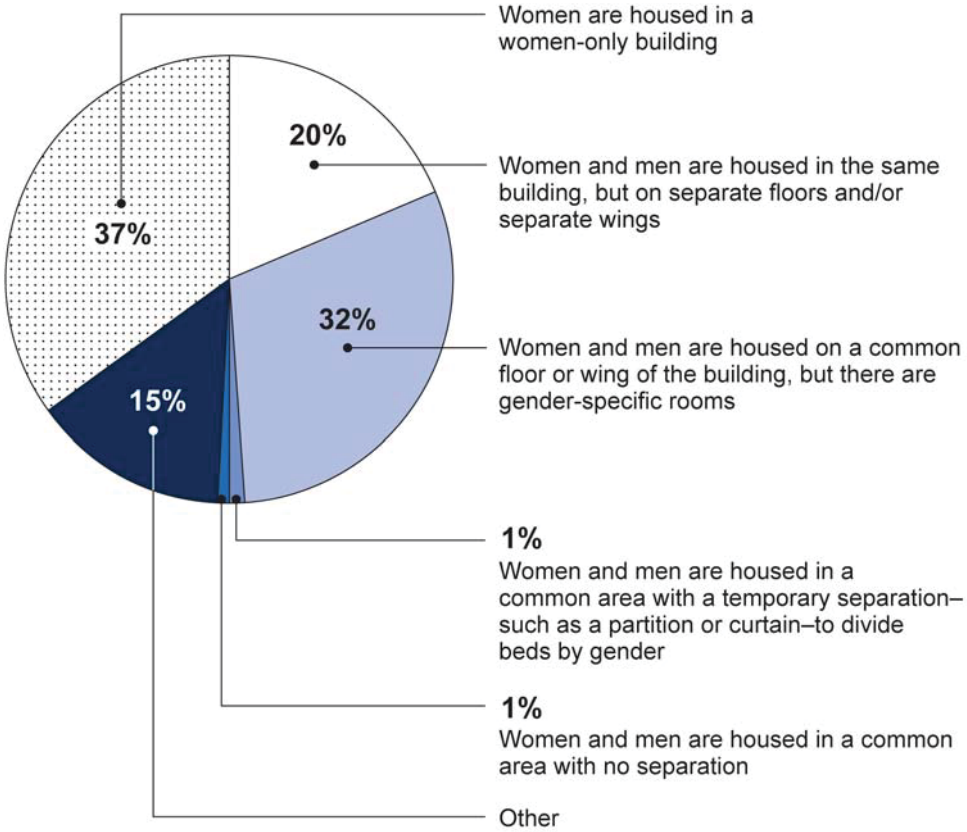
Source: GAO analysis of survey data and VA data on GPD program.

Note: We have incomplete information on those states fields marked with * due to nonresponses to our survey.

[a]The information in this table corresponds to the information in the pop-up boxes in the interactive map on page 26 of this report. The data on the number of beds for women with disabilities is not represented on the map.

[b]Numbers in this column are based entirely on our survey, because no relevant VA data were available.

Figure 1: Types of living arrangements in GPD programs



Source: GAO analysis of GPD survey data.

Note: In general, respondents who reported “other” living arrangements generally described having apartments or rental units.

Appendix V: Characteristics of Veterans Identified by VA as Homeless

Characteristic		Female (N=3,328)[a]	Male (N=49,373)[a]
Age	18-29	14.5	4.5
	30-39	20.3	7.4
	40-49	30.4	22.7
	50-59	30.2	48.1
	60-69	3.9	14.9
	70-79	0.4	1.8
	80 and older	0.2	0.5
Ethnicity	Hispanic, white	6.3	5.9
	Hispanic, black	1.3	1.1
	American Indian or Alaskan	2.5	1.5
	Black, not Hispanic	44.9	42.9
	Asian	0.5	0.5
	White, not Hispanic	41	46.3
	Pacific Islander	0.8	0.4
	Other	2.0	1.0
Marital status	Married	7.6	7.6
	Remarried	0.2	0.2
	Widowed	3.2	4.0
	Separated	14.7	13.3
	Divorced	45.1	45.1
	Never married	28.0	29.0
Military period of service	Pre-WW II (11/18-11/41)	0	0
	WW II (12/41-12/46)	0.1	0.3
	Pre-Korean (1/47-6/50)	0	0.2
	Korean War (7/50/-1/55)	0.1	0.2
	Between Korean and Vietnam Eras (2/55-7/64)	0.2	1.1
	Vietnam Era (8/64-4/75)	3.9	11.6
	Post-Vietnam (5/75-7/90)	20.5	36
	Persian Gulf Period or after (8/90-present)—includes conflicts in Iraq and Afghanistan	45.1	36.7
	Veteran declined to answer	28.8	13.3
Employment status	Employed	21.2	18.5
	Unemployed	77.4	80.3
Children[a]	Veteran has dependent children	45.4	26.8
	Veteran has legal custody of children	38.9	12.9
	Children reside with veteran	33.4	8.1

Characteristic		Female (N=3,328)[a]	Male (N=49,373)[a]
Homelessness data			
Length of homelessness	Not currently homeless	20.2	12.0
	At least 1 night but less than 1 month	14.0	14.7
	At least 1 month but less than 6 months	23.9	20.7
	At least 6 months but less than 1 year	13.9	12.6
	At least 1 year but less than 2 years	11.0	12.4
	Two years or more	15.9	26.8
Number of homeless incidents	0	11.2	6.0
	1	53.1	53.4
	2	17.0	18.2
	3	8.1	9.4
	4	3.7	4.4
	5 or more	5.6	8.0

Source: GAO analysis of VA data from Form X and HUD-VASH Referral Worksheet; information on children based on analysis of data from HUD-VASH Referral Worksheet only.

[a]The number of males (49,373) and females (3,328) apply for all analysis with the exception of the analysis for “Dependent Children.” This analysis is based on 16,251 males and 1,592 females solely from HUD-VASH Referral Worksheets.

Appendix VI: Comments from the Department of Veterans Affairs

DEPARTMENT OF VETERANS AFFAIRS
Washington DC 20420

December 15, 2011

Mr. Daniel Bertoni
Director, Education Workforce
and Income Security Issues
U.S. Government Accountability Office
441 G Street, NW
Washington, DC 20548

Dear Mr. Bertoni:

The Department of Veterans Affairs (VA) has reviewed the Government Accountability Office's (GAO) draft report, ***"Homeless Women Veterans: Actions Needed To Ensure Safe and Appropriate Housing"*** (GAO-12-182) and generally agrees with GAO's conclusions and concurs with GAO's four recommendations to the Department.

The enclosure specifically addresses GAO's four recommendations, provides an action plan for each, and includes technical comments. VA appreciates the opportunity to comment on your draft report.

Sincerely,

John R. Gingrich
Chief of Staff

Enclosure

Enclosure

Department of Veterans Affairs (VA) Comments to
Government Accountability Office (GAO) Draft Report
"Homeless Women Veterans: Actions Needed To Ensure Safe and Appropriate Housing"
(GAO-12-182)

Recommendation 1: In order to help achieve the goal of ending homelessness among veterans, the Secretaries of VA and HUD should collaborate to ensure appropriate data are collected on homeless women veterans, including those with children and those with disabilities, and use these data to strategically plan for services.

- **VA could solicit information on the needs of homeless women Veterans from local VA staff and community service providers through its CHALENG survey.**

VA Comment: Concur. The Veterans Health Administration (VHA) agrees with this recommendation and has included requests for information about gender specific needs and information for homeless programs in the 2011 Community Homelessness Assessment, Local Education and Networking Groups for Veterans (CHALENG) survey. Also, plans are already in place to collect gender specific information from community partners and local VHA staff in the 2012 CHALENG survey.

While the CHALENG survey and report provide important data to the VA, VA has undertaken numerous other efforts to gather information about homeless female Veterans and their needs. For example, VA and the Department of Housing and Urban Development (HUD) have been working in coordination over the past 2 years to jointly collect data for the HUD Veteran Homelessness: A Supplemental Report to the 2010 Annual Homeless Assessment Report to Congress. VHA, HUD, the Department of Defense (DoD), and community agencies are also collaborating to gain greater access to the Homeless Management Information System and Post Deployment Health Assessment data to develop a more comprehensive definition for the prevalence and the unique needs of homeless female Veterans who may not currently access VA services.

Other VHA efforts to further ensure that appropriate data are collected on homeless women Veterans have included:

- Implementation of a Homeless Operations Management and Evaluation System (HOMES) in April 2011. HOMES is an online data collection system that tracks identified homeless Veterans as they move through VA's system of care; facilitates communication between VHA homeless program staff and leadership on the local, regional, and national levels; streamlines and centralizes data collection; and enables VA to efficiently and effectively collect, manage and access homeless Veteran data for evaluation and strategic planning purposes.
- Use of VA Homeless Registry to identify rates of homelessness of female Veterans by state, VISN, and VA medical center (VAMC). The VHA Women

Enclosure

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Veterans Strategic Health Care Group has been actively involved in development of aspects of the registry tool relating to women Veterans. This information is currently used to strategically plan services, set priorities in funding notices, and measure progress of how VA is eliminating homelessness among Veterans;

- Pilot of an at-risk screening tool for homeless Veterans who may enter VHA through VHA emergency rooms or specialty clinics (e.g., women, Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn Veterans), to ensure that female Veterans have access to needed services that promote housing stability and improved quality of life; and
- Internal VHA collaborations among women's health clinicians and homeless program specialists to develop a more comprehensive tool that identifies risk factors for homelessness among our female Veterans. Targeted Completion Date: March 2012.

Recommendation 2: In order to ensure homeless women veterans have an appropriate place to stay while they wait placement in VA housing, the Secretary of VA should ensure implementation of VA's referral policies.

- **VA should provide technical assistance or guidance to its homeless coordinators to facilitate appropriate referrals for women. For example, a national director of programs serving women could be helpful. VA could create and distribute such to a director of GPD programs with information on the number of beds available to women and children, the housing environment, and services offered to help homeless coordinators make appropriate referrals for women.**
- **For more short term housing or when GPD beds are unavailable, VA should develop guidelines to ensure homeless coordinators have formal plans or processes to ensure homeless women Veterans receive appropriate referrals.**

VA Comment: Concur. VA agrees with GAO about the importance of ensuring that homeless women Veterans have appropriate places to stay while they wait for placements in Government-funded housing. It is important to note that while resources vary across the country, each VAMC is already required to provide homeless emergency residential services in the community for homeless Veterans. However, VA recognizes that gaps before placements in Government-funded housing exist. During such gaps, Veterans are often temporarily served in VHA short term treatment programs, Grant and Per Diem (GPD) transitional housing programs, or other community-funded programs.

In order to strengthen existing processes, VHA Homeless Program leadership, clinicians, and staff, in coordination with mental health and women's health officials,

Enclosure

Department of Veterans Affairs (VA) Comments to
Government Accountability Office (GAO) Draft Report
"Homeless Women Veterans: Actions Needed To Ensure Safe and Appropriate Housing"
(GAO-12-182)

will review and modify, as necessary, current national guidance and policy on referral processes for homeless Veterans. VHA-wide training will be developed for all homeless staff regarding this guidance to address how best to make appropriate referrals for women. How to address national coordination, as well as facility implementation for formal plans or processes to ensure homeless women Veterans receive appropriate referrals will be explored. The VHA homeless program office will report to the Under Secretary for Health about its actions no later than June 2012.

Recommendation 3: To better serve the needs of homeless women veterans with children, the Secretary of VA should examine ways to improve transitional housing services for homeless women veterans with children. For example, VA could:

- **Establish or strengthen partnerships with community nonprofit organizations, state or local government agencies, and tribal organizations to increase transitional housing options for homeless women Veterans with children, including those with older or multiple children.**
- **Seek additional legislative authority from Congress to fund beds for children as part of its current spending on the GPD program**

VA Comment: Concur. VA agrees that addressing the needs of homeless Veterans' children is important. At the national level, VA will work with the U.S. Interagency Council on Homelessness to examine how VA's Federal partners (i.e., HUD, Department of Health and Human Services, and the Department of Education) fund housing for homeless women and children to identify opportunities to share information and resources. Once opportunities have been identified, VHA will share information with VA providers, stakeholders and staff, including the facility Women Veteran Program Managers, on resources and options to support women Veterans and their children.

While current statutory authority does not allow VA to pay per diem for children in transitional housing under the GPD Program, VA does have limited authority to pay for services for children through its GPD Special Needs Grants, which provides enhanced funding for special populations, including homeless women Veterans with dependent children.

VHA will consult with VA officials about developing a legislative proposal to increase the authority for VA to fund transitional housing for children of homeless Veterans. Targeted Completion Date: June 2012.

Enclosure

Department of Veterans Affairs (VA) Comments to
Government Accountability Office (GAO) Draft Report
"Homeless Women Veterans: Actions Needed To Ensure Safe and Appropriate Housing"
(GAO-12-182)

Recommendation 4: To ensure that women veterans are safely housed, the Secretary of VA should determine what gender-specific safety and security standards are needed for Grant and Per Diem programs, especially for those serving both women and men.

- **Such standards will be incorporated into Grant and Per Diem Program funding applications and annual program reviews.**

VA Comment: Concur. In August 2011, VA initiated national reviews and inventories of all operational transitional housing projects to ascertain each program's gender mix and scope of services. Further, the review resulted in VHA providing written guidance, as well as face-to-face and national conference call training for both VHA homeless program staff and community providers regarding how to ensure safety, security, and privacy needs of all Veterans.

As a result of this review process, VHA has set gender-specific safety and security standards, and has determined the gender-specific mix that can be appropriately served by each community provider for VA funded programs.

VHA homeless programs officials will continue to monitor and address these standards and administer guidance as needed to ensure the safety, privacy and services for all Veterans. In addition, the GPD Handbook and the GPD inspections will be modified to include specific safety and security standards for serving women Veterans in transitional housing settings. The appropriate regulatory changes will be made to enforce these standards. Compliance with these standards will be monitored through a proposed national contract. Targeted Completion Date: September 2012.

Appendix VII: GAO Contact and Staff Acknowledgments

GAO Contact

Daniel Bertoni 202-512-7215 or bertonid@gao.gov

Staff Acknowledgments

In addition to the contact named above, the following staff members made important contributions to this report: Melissa Emrey-Arras, Assistant Director; Nagla'a El-Hodiri, Analyst-in-Charge; Tarik Carter, Grace Cho, and Michelle Liberatore. Also, Walter Vance provided guidance on the study's methodology; Hiwotte Amare, Melinda Cordero, John Mingus, and Ruben Montes de Oca provided data analysis; Sarah Cornetto and Sheila McCoy provided legal advice; Mimi Nguyen assisted with report graphics; Susan Aschoff provided writing assistance; Almeta Spencer provided administrative support; and Theresa Lo, Lise Levie, and Ken Stockbridge verified our findings.

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