

U.S. Department of Veterans Affairs' (VA)
Fiscal Year (FY) 2024 Veteran Homelessness National Goals
Office Hours

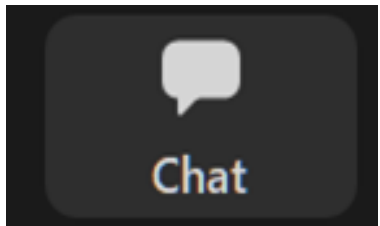
VHA Homeless Programs Office
July 11, 2024

Housekeeping

- This call will be recorded.
- The webinar will last approximately 60 minutes.
- All attendees will be muted.
- Questions can be submitted using the chat function.
- If you have questions following the call, please email VHA11HPO38kGoalSupport@va.gov.

Zoom Controls

Typically, on the bottom of the screen



All participants are muted upon entry.

Please use the chat to add questions or comments during the call.

Agenda

- Progress Update
- System-Level Coordination of Outreach Services
- Q&A

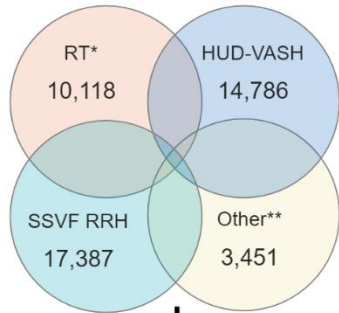


Progress Update



Goal 1: Permanent Housing

Shared Placements
Includes single PHPs where programs overlap

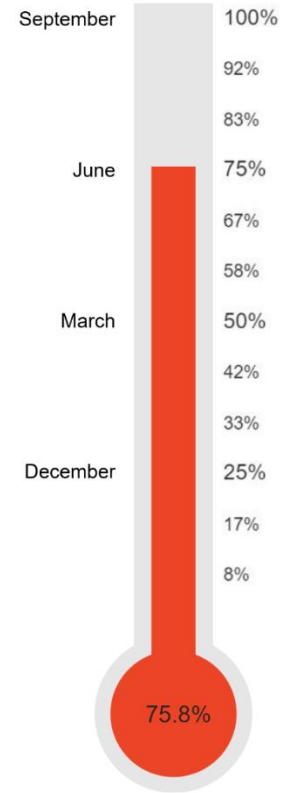
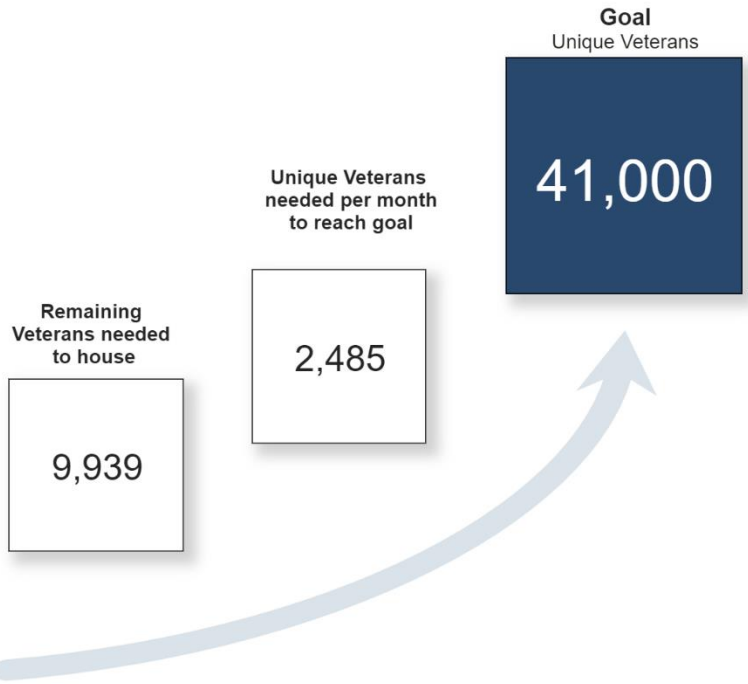


De-duplicated PHPs
32,342

Unique Veterans Housed

31,061

National
Data as of May 2024



* RT Programs: GPD and HCHV CRS/LDSH
 ** Other: MH RRTP, GPD CM, HCHV CM, Homeless VJP, and SSVF HP
 *** Nationally, Unique Veterans Housed represents all unique Veterans across facilities

Goal 2: Prevention of Returns to Homelessness

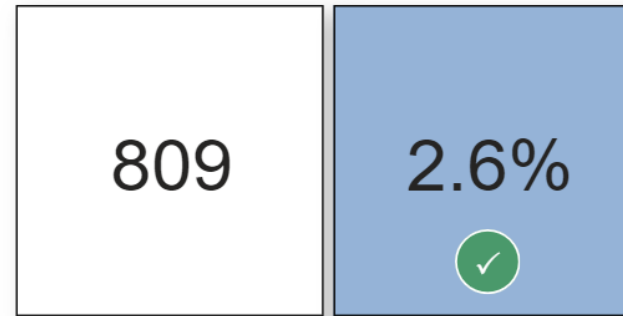
National

Veterans placed in housing as of May 2024

Veterans Housed
in FY 2024



Returns to Homelessness

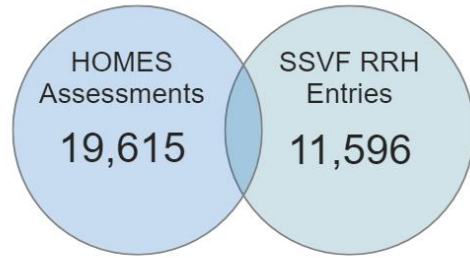


Goal: $\leq 5\%$

Goal 3: Engagement with Unsheltered Veterans

National
Data as of May 2024

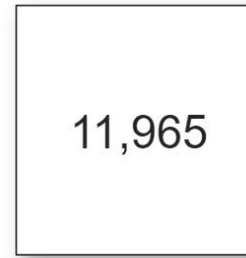
Unsheltered Veteran Engagement
Unsheltered Veterans de-duplicated by type of engagement (includes Veterans unsheltered at both assessment and SSVF RRH program entry)



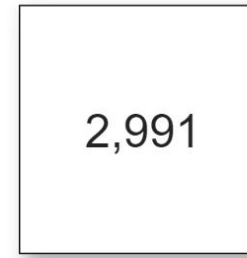
Unique Unsheltered Veteran Engagement



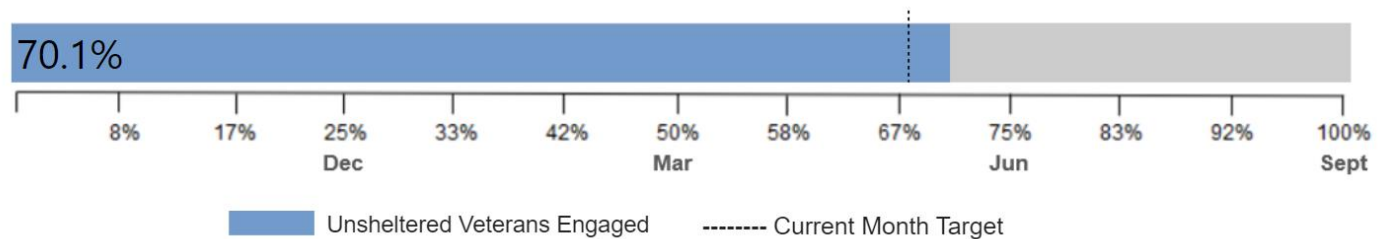
Remaining Unsheltered Veterans Needed



Unsheltered Veterans needed per month to reach goal



Goal Unique Veterans



System-Level Coordination of Outreach Services

Cynthia Spencer, LCSW
Supervisory Regional Coordinator,
Supportive Services for Veteran Families

Molly Batschelet, LCSW-S, LCDC
Coordinated Entry Systems Integration
National Program Coordinator,
Health Care for Homeless Veterans

Outreach Defined

- Outreach services generally consist of **engagement, short-term case management, connection to housing, linkage to medical and psychiatric care, and other social services**. These services occur out in the community, versus in-reach.
- Outreach occurs across **various geographical landscapes**, including rural, urban, suburban, tribal, and island areas, each requiring unique and nuanced strategies.
- Types of outreach:
 - **Community outreach** is outreach to Veterans experiencing homelessness taking place in community-based settings such as shelters, meal sites, homeless Veteran Stand Down events, job fairs, resource and referrals centers, and other community outreach events.
 - **Street outreach** is outreach to Veterans experiencing unsheltered homelessness taking place in settings such as on the street, under bridges, in homeless encampments and in parks or other places not meant for human habitation.

Effective Engagement Practices in Outreach

- Outreach workers should employ **active listening**, utilizing **motivational interviewing** techniques.
- Approaches should be **Veteran-centered**, **trauma-informed**, and **culturally responsive**.
- Outreach should be **housing-focused**, but engagement should continue, even if the Veteran declines housing at the time. Sometimes engagement takes months or even years.
- Maintain **consistency** in engagement, do what you say you will do. Follow-up is incredibly effective at fostering engagement.
- Enhance the effectiveness of outreach efforts by providing **tangible support** (transportation, hygiene supplies, survival supplies).

Culturally Responsive Outreach and Engagement

- It is imperative to partner with **culturally specific organizations**, reflective of the population served, and lift up the voices of Veterans with lived experience and expertise in planning, program design, and evaluation.
- Outreach teams should strive to be **reflective of the population** served.
- Develop and provide culturally responsive training and **guidance** to outreach teams.
- Provide **ongoing training and education** to staff on racial equity, trauma-informed approaches, and housing first.
- Routinely **review and disaggregate data** to monitor for disparities (racial, ethnic, age, gender, etc.) in access and outcomes, and adjust practices if disparities are identified.

System-Level Coordination of Outreach Services

- Coordination among **all outreach providers** and programs is key.
- Requires fidelity to the **VA One Team approach**, which refers to coordinated, united actions and interconnectedness between programs as they work toward the joint mission of ending Veteran homelessness.
- **Strategic integration** with other community partners ensures comprehensive community coverage.

System-Level Coordination of Outreach Services: Urban Partners

- Emergency shelters/warming or cooling centers
- Sobering centers
- Community health and mental health programs including Opioid Medication Assistance Treatment (MAT) providers
- Community peer support services, especially those specific to Veterans who have lived experiences and expertise of homelessness
- Soup kitchens/food banks
- City, county, or state homeless strategy offices
- Area hospitals and hospital diversion programs
- Women's clinics
- Culturally/population specific organization

System-Level Coordination of Outreach Services: Rural Partners

- Community hospitals and clinics
- Fire/emergency medical services departments
- Law enforcement
 - Including specialized outreach programs
 - Designated departments with eviction enforcement (Sheriff, Highway Patrol, local police)
- Post offices
- Truck stops
- Veteran service organizations (VSO)
- Community/area religious coalitions
- 24-hour businesses
 - Laundromats
 - Fast food establishments and convenience Stores

System-Level Coordination Benefits



Expanded
geographical
reach



Reduced
duplication



Streamlined
referral
processes



Additional
opportunities
to identify
Veterans



Increased
access to
resources
and data



Integration with Coordinated Entry Systems

- Coordinated outreach efforts should **align** with the overall goals of the coordinated entry system.
 - Strategies for same day access to shelter and interim housing should be locally developed, utilizing approaches to **streamline** the process.
 - Ensure that **all Veterans identified** are represented on the by-name list.
 - **Utilize case conferencing** to ensure all Veterans are on a housing pathway and to address barriers at the Veteran and system levels.

Identifying and Leveraging Resources

- Leverage **all resources** available through collaboration, including **braiding of resources**.
 - Examples:
 - Utilization of community resources when gaps exist within the VA, i.e., diversion funding, access to risk-mitigation funds.
 - Co-enrollment between programs such as HCHV and SSVF to serve the Veteran as quickly as possible, while working on the best long-term housing intervention.
 - Agencies may have complementary services such as support for income maximization, i.e., the VBA outreach staff can assist with VBA claims while the Veteran is also working with a community SOAR expert, so that they are working towards all available benefits.

Utilization and Coordination of Data

- Outreach providers should **leverage all available technology** available through the VA and community partner collaboration, such as:
 - Homeless Management Information System (HMIS)
 - Homeless Operations Management and Evaluation System (HOMES)
 - Geographic Information Systems (GIS) mapping
- GIS technology can be used in conjunction with HMIS and other data sources to **assess for system disproportionality**.
- Data can **guide outreach planning** by identifying sub-population trends or disparities, identifying hotspot locations, and allowing teams to strategize around ensuring comprehensive geographical coverage.

Targeted Outreach

- Is a part of the larger coordinated outreach framework.
- Involves identifying and outreaching **specific Veteran subpopulations using intentional approaches**. Subpopulations might include women, tribal communities, LGBTQ+ Veterans, older adults, etc.
- Requires close collaboration with **subject matter experts and individuals with lived experience and expertise** to ensure culturally responsive and effective outreach methods are being deployed.

Developing a Targeted Outreach Strategy

- Teams should **identify and connect** with community organizations and VA programs that specialize in, or have contact with, the community of Veterans you are trying to reach.
 - Provide education to each other on programs, eligibility, referrals process, and designated points of contact.
- As needed, create a **cross-sector team** to address specific subpopulations.
 - Identify a lead from **key partners** across the continuum.
 - Use this team to **review local needs and gaps, regularly review data to assess for progress, identify opportunities for outreach** and other service enhancement, and promote the integration of targeted outreach into local initiatives, i.e., Stand Down, pop-up resource clinics, and outreach surge events.

Developing a Targeted Outreach Strategy

- Utilize **inclusive marketing** materials, ensuring that the materials are reflective of the population being outreached.
- Work toward a goal of ensuring **outreach teams are as reflective** as possible of the Veterans being served.
- Maintain **specialized resource** lists that detail community and VA resources available to specific communities, in addition to more generalized resource listings.

Example: Targeted Outreach to Women

- Identify and connect with key partners and collaborators, including:
 - Women’s shelters, day resource centers, community-based clinics, workforce development centers, Temporary Assistance for Needy Families (TANF) offices, local schools, and faith-based organizations.
 - Internal VA programs that serve women such as the Women’s Health Program, SSVF, HUD-VASH, Intimate Partner Violence Assistance Program, Mental Health Clinic, LGBTQ+ Health Program, and Center for Women Veterans.
- Ensure marketing materials are targeted to and reflective of women. We cannot be what we cannot see.



**YOU SERVED.
YOU DESERVE
A STABLE HOME.**

On any given day, **more than 3,000** women Veterans experience homelessness.

VA is here to help.

National Call Center for Homeless Veterans: 1-877-424-3838
www.womenshealth.va.gov | #WomenVets

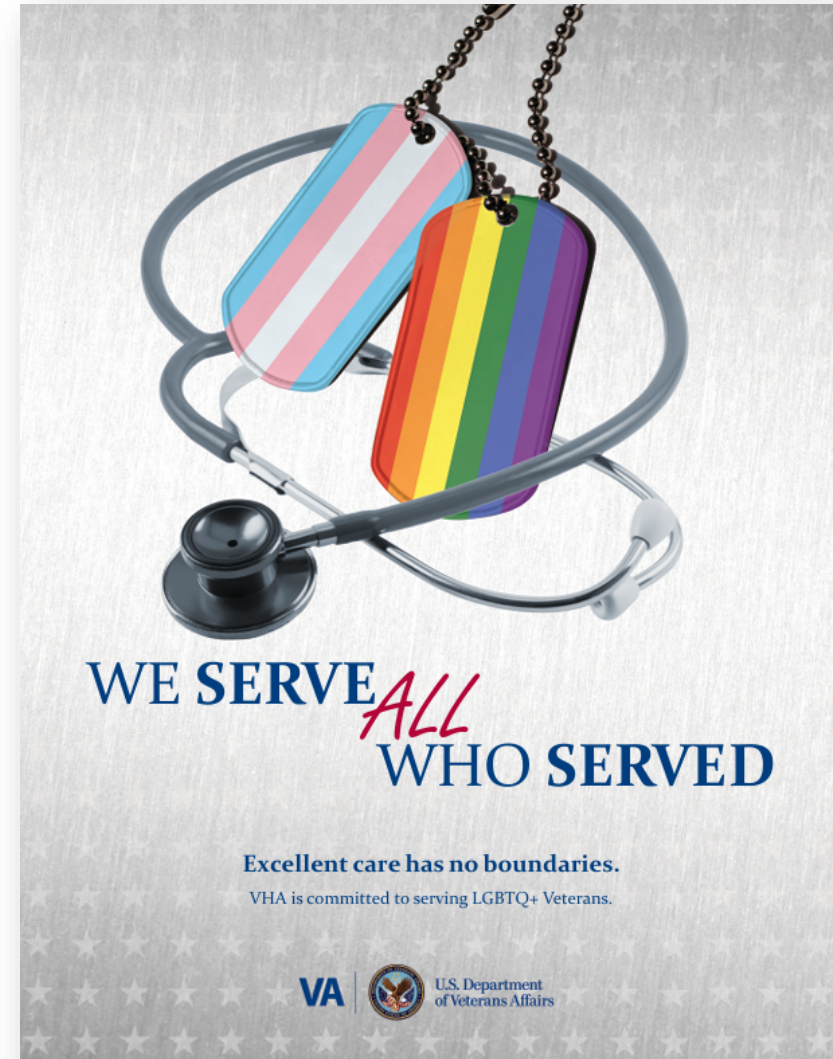
VA |  U.S. Department of Veterans Affairs

Example: Targeted Outreach to Women

- Create a cross-sector team to address the specific needs of women Veterans.
 - Identify a lead from key partners across the continuum, ensuring there is advocacy and representation from crucial services such as childcare agencies and women's health programs, as well as shelter, interim housing, and permanent housing programs.
 - This team regularly disaggregates data to assess for progress, needs, trends, and barriers. This data can guide outreach strategies and resource planning.
 - Example:
 - Data shows an increase in the time from initial engagement to permanent housing for women Veterans.
 - The cross-sector team drills down to find multiple barriers that may be contributing to this delay such as lack of available shelter and interim housing beds in a safe environment, challenges getting to appointments due to lack of childcare resources, and fear of engagement due to myths such as putting child custody at risk.
 - This leads to advocacy for additional interim housing beds, identifying childcare supports, and proactively providing education to dispel myths about risk of losing children if seeking help.

Example: Targeted Outreach to LGBTQ+ Veterans

- Identify and connect with key partners and collaborators, including:
 - LGBTQ+ focused health and wellness clinics, specialized mental health counseling services, and LGBTQ+ senior services.
 - Internal VA programs that serve LGBTQ+ Veterans, such as the LGBTQ+ Health Program, SSVF, HUD-VASH, and the Mental Health Clinic.
 - Ensure marketing materials are targeted to and reflective of the LGBTQ+ community and message allyship and safe spaces.

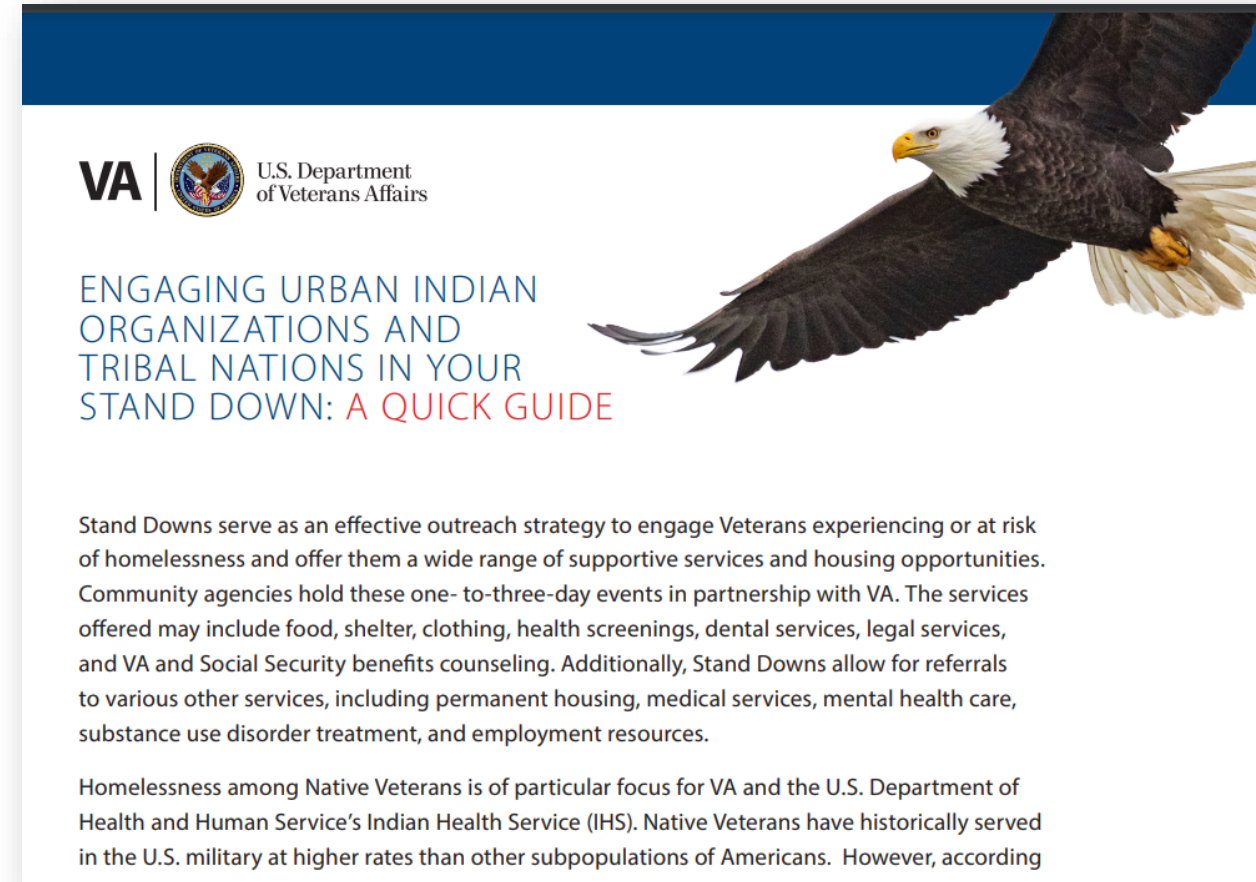


Example: Targeted Outreach to LGBTQ+ Veterans

- Create a cross-sector team to address the specific needs of LGBTQ+ community of Veterans.
 - Identify a lead from key partners across the continuum, ensuring there is advocacy and representation from crucial services such as the LGBTQ+ Veteran Care Coordinator, interim housing providers, and community LGBTQ+ health and wellness providers.
 - This team regularly disaggregates data to assess for progress, needs, trends, and barriers. This data can guide outreach strategies and resource planning.
 - Example:
 - Data shows an increase in transgender Veterans who are experiencing unsheltered homelessness, despite open CRS and GPD beds.
 - The cross-sector team drills down and discovers that there have been access barriers with an interim housing program due to the contractor's lack of awareness of the [VA directive](#) that requires Veterans be placed in rooms that align with their gender identity. This led to Veterans being turned away, which resulted in a higher number of those living unsheltered.
 - This resulted in additional training and education to contract providers and grantees, and an increase in affirmative outreach toward the LGBTQ+ Veteran population to ensure clear messaging of available services.

Example: Targeted Outreach to Tribal Veteran Communities

- Identify and connect with key partners and collaborators, including:
 - Local and culturally relevant partners such as Tribal Nations, Tribal VSO, Indian Health Services, and Urban Indian Organizations.
 - Internal VA and Federal programs such as Office of Tribal Health and Office of Tribal Government Relations.
 - Utilize targeted outreach materials such as the [Homelessness and Housing Needs of Native American Veterans Toolkit](#) to ensure outreach is culturally responsive.



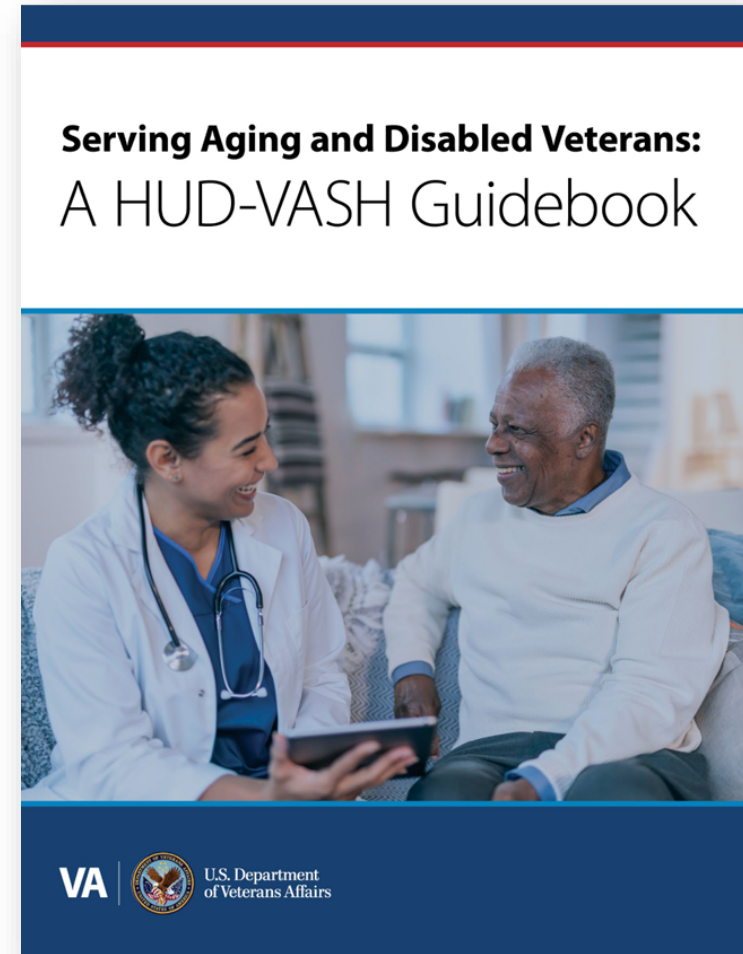
[Engaging Urban Indian Organizations and Tribal Nations in Your Stand Down: A Quick Guide](#)

Example: Targeted Outreach to Tribal Veteran Communities

- Create a cross-sector team to address the specific needs of Tribal Veterans.
 - Identify a lead from key partners across the continuum, ensuring there is advocacy and representation from crucial services such as Tribal Nations, Indian Health Services, Urban Indian Organizations, HUD-VASH, and the Office of Tribal Government Relations.
 - This team regularly disaggregates data to assess for progress, needs, trends, and barriers. This data can guide outreach strategies and resource planning.
 - Example:
 - Track participation of Native Veterans in Stand Down events and use this information to inform and improve future events.

Example: Targeted Outreach to Older Veterans

- Identify and connect with key partners and collaborators, including:
 - Local area agency on aging, elder advocacy groups, and Adult Protective Services.
 - Internal VA programs that serve older Veterans, such as Geriatric and Extended Care (GEC) and the Veterans Benefits Administration (VBA).
 - Ensure marketing materials are targeted to the older Veteran community, being mindful of jargon and potential technology barriers.



[A HUD-VASH Guidebook: Serving Aging and Disabled Veterans](#)

Example: Targeted Outreach to Older Veterans

- Create a cross-sector team to address the specific needs of older Veterans.
 - Identify a lead from key partners across the continuum, ensuring there is advocacy and representation from crucial services such as GEC, HUD-VASH, and the local area agency on aging.
 - This team regularly disaggregates data to assess for progress, needs, trends, and barriers. This data can guide outreach strategies and resource planning.
 - Example:
 - Data shows a disproportionate number of Veterans over 65 who had an initial engagement with the VA but did not successfully obtain permanent housing.
 - After drilling down, multiple accessibility barriers were identified, including staff pre-emptively screening out Veterans for inability to live independently versus referring for tools and services that could support living in the community, as well as Veterans' income being too low to qualify for specialized housing options that could best serve them.
 - This resulted in additional training and consultation with staff on available support options through GEC, as well as creating a strong partnership with VBA to maximize and expedite benefits, including Aid and Attendance claims.

Community in Action: Long Beach Veterans Collaborative Outreach Team (VCOT)

- Allison Kripp, City of Long Beach Veteran Outreach Coordinator
- Veronica Hood, US Vets Long Beach Outreach Coordinator
- Nancy Pelayo, Department of Mental Health Veteran Outreach Program
- Ahn Tran, Department of Mental Health Veteran Outreach Program
- Melanie Martins, VA Long Beach
- Karla Coronado, VA Long Beach
- Brian Jacobo, VA Long Beach

Q&A



Wrapping Up

- The recording of this call will be posted to the [VHA Homeless Programs Hub](#) in the coming days and [VA.gov/Homeless](#).
- Join our Office Hours calls on the first Thursdays of the month at 3:00 p.m. Eastern / 2:00 p.m. Central / 11:00 p.m. Mountain / 12:00 p.m. Pacific / 9:00 a.m. Hawaii.
 - The next Office Hours Call is **Thursday, August 1, 2024**.
 - For questions, please email VHA11HPO38kGoalSupport@va.gov.

“Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.”

– Margaret Mead