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Agency of Human Services  
Testimony before House Committee on General, Housing and Military Affairs  
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**Housing and Homelessness**

Good Morning. My name is Angus Chaney. I'm the Housing Director for the Agency of Human Services and chair the Governor's Council on Homelessness.

The Agency of Human Services strives to improve the health and wellbeing of Vermonters today and tomorrow and to protect those among us who are unable to protect themselves. In the domain of housing and homelessness, protecting the vulnerable *today* require that we have an emergency response such as homelessness prevention programs and shelters or transitional programs with on-site services. Improving health and wellbeing *tomorrow* requires that we simultaneously support housing solutions to move people *beyond* crisis and shelter. These include rapid re-housing services, affordable housing, supportive housing programs and opportunities for independent living.

**AHS Housing Programs by Strategy** *(some programs support multiple strategies)*

**Homelessness Prevention**

- Community Housing Grants
- Emergency Solutions Grants
- Reach-Up Housing Grants
- Housing Assistance for HIV/AIDS

**Emergency Shelter**

- General Assistance Housing
- “Harbor Place” model
- Emergency Solutions Grants

**Transitional Housing**

- DOC Transitional Housing
- ADAP Transitional Housing
- Reach-Up Housing Grants

**Independent Living**

- Home & Community Access Program
- Home Share
- Support & Services at Home
- Youth Development Program

**Rapid Re-Housing**

- Community Housing Grants
- Emergency Solutions Grants
- CRT Housing Support Fund

**Affordable Housing**

- Mental Health Subsidy & Care
- Vermont Rental Subsidy Program
- Transitions to Housing

**Supportive Housing**

- Family Supportive Housing
- DMH Pathways

### **Some sample housing program results from state fiscal year 2014**

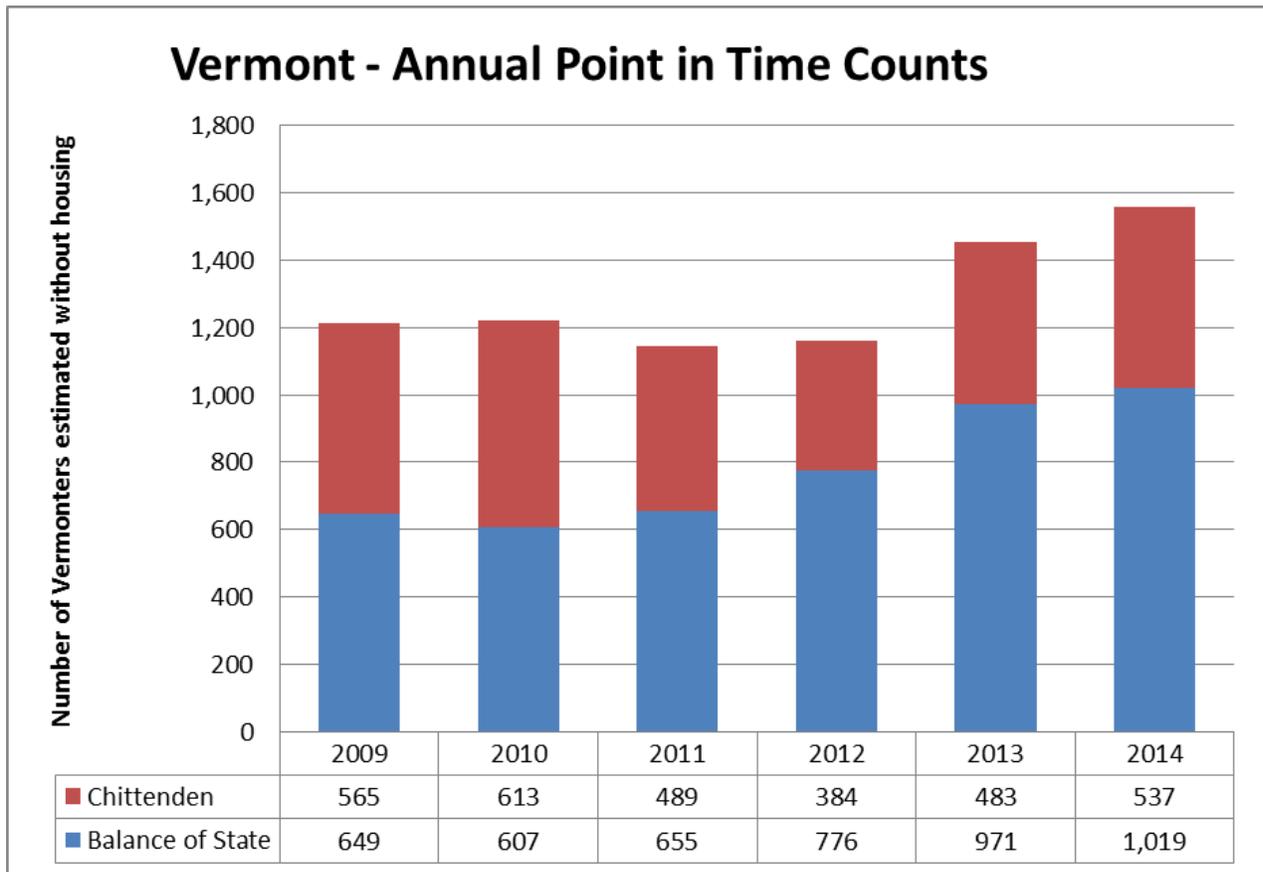
- The Emergency Solutions Grant in the Office of Economic Opportunity provided safe emergency shelter or transitional housing to 3,934 homeless Vermonters, a quarter of whom were children under age 18.
- The CRT Housing Support Fund in the Department of Mental Health housed 297 people with mental illness.
- In its first year, the Family Supportive Housing program housed 48 homeless adults and their 76 children and expanded to two additional districts for fiscal year '15.
- The Transitional housing program in the Department of Corrections housed 569 offenders in the community with service supports.

### **Coordination with partners**

AHS is fortunate to have strong and committed statewide housing partners. Partnerships are essential to AHS when it comes to housing stability for our clients as we are not in the business of developing housing. We collaborate closely with the Vermont Housing Finance Agency (VHFA), the Department of Housing and Community Development (DHCD) and the Vermont Housing and Conservation Board (VHCB). This often takes the form of collaborative policy development, project evaluation, and co-development of special projects.

## Vermont Homelessness Data

The incidence of homelessness is increasing in Vermont. The most recent one-day Point-In-Count of Americans experiencing homelessness (January 2014) indicates that on any given night, approximately 1,556 Vermonters are without housing. This represents a 9% increase over the previous year. While no single measure of homelessness purports 100% accuracy, the Point-In-Time count uses standard definitions developed by HUD and constitutes Vermont’s best proxy measure at this time. Count methodology evolved considerably in 2013 and it is likely that the true number of homeless in Vermont was higher than officially reported prior to that time because people sheltering in motels were not systematically included.



### Who is homeless in Vermont?

Among Vermonters enumerated in the 2014 Point in Time Report:

- 45% reported some type of disability
- 25% were children under 18
- 15% were fleeing domestic violence
- 10% were chronically homeless
- 8% were veterans

## **Where are they from?**

Virtually every region of the state sees some level of homelessness. Among Vermonters enumerated in the 2014 Point in Time Report:

- 35% were in Chittenden County
- 11% were in Windham County
- 10% were in Rutland County

*These counties' share of homelessness exceed their relative share of the state's population.*

## **Where do they stay?**

Among Vermonters enumerated in the 2014 Point in Time Report:

- Approximately 50% are in emergency shelters and transitional housing.
- During cold weather, when shelters are full, almost 40% can end up in motels
- Approximately 10% are unsheltered, meaning outdoors or other place not meant for human habitation.

## **Why do people become homeless? (a partial list)**

- POVERTY
- Disparity between incomes and housing costs
- Unemployment and underemployment
- Domestic violence and other trauma
- Health Crises and Disability
- Substance Abuse and Mental Illness
- Families or individuals just outside an eligibility circle
- Tenant Behaviors and History

## **And why is this number growing? (a partial list)**

- Loss of federal housing subsidies that resulted from sequestration
- Very low statewide rental vacancy rate
- Increased prevalence of opioid drugs
- More people are now counted in motels

## **What challenges does homelessness pose for individuals, families and communities?**

**Health:** Risk of exposure-related injury or illness; reduced life expectancy; increased incidence of illness among homeless children; Exacerbation of mental health symptoms.

**Instability:** Increases stress on families that can make parenting difficult. Instability and chronic stress impact educational attainment with lasting impacts.

**Stigma:** People presenting themselves as homeless have a harder time accessing the very things they need most: apartments, employment and positive social connections and relationships.

**Stress:** A tremendous amount of time and effort are consumed with basic daily activities. Longer-term strategic thinking is inhibited.

### **Evolving Homeless Services Focus at AHS**

- Encouraging realistic case loads
- Expanding supportive housing to continue intensive services once people are re-housed
- Developing subsidy programs
- Integrating financial capacity-building services into housing programs
- Supporting on-site services model such as Harbor Place

### **Evolving System Coordination Focus at AHS**

- Promoting common performance measures across programs
- Targeting initiatives based on data
- Braiding of rental subsidies and supportive services
- Coordinating discharge planning across departments to reduce risk of homelessness
- Promoting Coordinated Intake & Assessment to reduce referral steps, stabilize housing as quickly as possible and divert people from higher-cost, less-effective alternatives.

### **Ending Family Homelessness by 2020**

The highest priority AHS housing effort is ending homelessness in Vermont. Given the high number of children and families without housing in Vermont, AHS Central Office will be working closely with the Department for Children and Families, the Agency of Education, homeless Continuum of Care groups and many other state and private partners in 2015 to support a thoughtful re-tooling of our conventional response to family homelessness. Our emphasis will

be on working closely with existing local homeless Continuum of Care groups to promote and link the following components of an effective local system:

- Coordinated Entry & Assessment;
- Prevention & Diversion;
- Rapid RE-Housing;
- Supportive Housing;
- And targeted emergency or transitional capacity where indicated.

This approach is endorsed by the U.S. Interagency Council on Homelessness which presented at December's Vermont Council on Homelessness and has adopted a national goal of ending family homelessness by 2020.

### **Supportive Housing and the Three Legs of the Stool**

While individual needs and level of need vary widely among persons experiencing homelessness, AHS and our housing partners see access to supportive services, rental subsidies and rental units as the "three legs of the stool" if we are to reverse Vermont's disturbing upward trend in homelessness. These critical components reinforce each other to provide housing stability and improve individual program outcomes. AHS is working with our statewide housing partners to explore how to target and bundle these three ingredients of supportive housing so that they can have the greatest collective impact.