

CRS Report for Congress

Distributed by Penny Hill Press

<http://pennyhill.com>

Homelessness: Recent Statistics, Targeted Federal Programs and Recent Legislation

Updated July 28, 2003

M. Ann Wolfe
Technical Information Specialist
Domestic Social Policy Division

Updated by:

Maggie McCarty
Analyst in Social Legislation
Domestic Social Policy Division

Christopher E. Carter
Intern
Domestic Social Policy Division

Homelessness: Recent Statistics, Targeted Federal Programs and Recent Legislation

Summary

There is no one federal definition of homelessness. However, most federal programs for the homeless define a homeless individual as a person who lacks a fixed and night-time residence or whose primary residence is a supervised public or private shelter designed to provide temporary living accommodations, an institution accommodating persons intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

Existing data show estimates of the homeless population in the United States as ranging from 600,000 to 2.5 million. A congressionally mandated Homeless Management Information System (HMIS) to count the homeless is expected to produce annual data about the number of homeless individuals beginning in 2005.

While an overall count of the homeless is awaiting the final implementation of the Department of Housing and Urban Development's (HUD) HMIS, several studies have been conducted that focus on the demographics of and services used by homeless persons. Sponsored by the U.S. Conference of Mayors, "Hunger and Homelessness in America's Cities" found that requests for emergency food assistance and emergency shelter each increased by an average of 19% during 2002. Another study, "The 1996 National Survey of Homeless Assistance Providers and Clients (NSHAPC)" found that homeless clients were predominantly male, mostly nonwhite, and almost one-quarter were veterans. The survey also found that over one-third of the homeless population are homeless families with, on average, two children.

A number of federal programs, most authorized by the McKinney-Vento Homeless Assistance Act (P.L. 100-77), serve the homeless. The main federal programs for the homeless include the Education for Homeless Children and Youth (EHCY) program; the Emergency Food and Shelter Program (EFSP); the Health Care for the Homeless Program (HCH); the Projects for Assistance in Transition from Homelessness (PATH) program; the Consolidated Runaway and Homeless Youth Programs (the Basic Center Program and the Transitional Living Program); the Street Outreach Program (SOP); the Supportive Housing Program (SHP); the Shelter Plus Care (S+C) program; the Section 8 — Moderate Rehabilitation of Single-Room Occupancy Dwellings (SRO) program; the Emergency Shelter Grants (ESG) program; the Homeless Veterans Reintegration Program (HVRP); the Health Care for Homeless Veterans (HCHV) program; and a number of other federal programs for homeless veterans.

Several proposals have been made in the 108th Congress that would impact homeless programs. Initiatives from both the Congress and the Administration, including the President's new Samaritan Initiative, legislation to reauthorize the Runaway and Homeless Youth Act (RHYA) (H. R. 1925), and several other bills await congressional action. This paper will be updated to reflect legislative activity.

Contents

Recent Data on the Homeless	1
The 2002 U.S. Conference of Mayors Study	2
The NSHAPC	3
The Federal Response to Homelessness	4
Department of Education (ED)	5
Education for Homeless Children and Youth	5
Federal Emergency Management Agency (FEMA)	5
Emergency Food and Shelter Program (EFSP)	5
Department of Health and Human Services (HHS)	6
Health Care for the Homeless (HCH) Program	6
Projects for Assistance in Transition from Homelessness (PATH)	6
Consolidated Runaway and Homeless Youth Program	7
Runaway and Homeless Youth — Street Outreach Program	8
Department of Housing and Urban Development (HUD)	8
Homeless Assistance Grants	8
Department of Labor (DOL)	10
Homeless Veterans Reintegration Program	10
Department of Veterans Affairs (VA)	11
Health Care for Homeless Veterans (HCHV)	11
Homeless Providers Grant and Per Diem Program	11
Domiciliary Care for Homeless Veterans (DCHV)	11
Compensated Work Therapy/Therapeutic Residence Program	12
Loan Guaranty Transitional Housing for Homeless Veterans	12
Homeless Veterans with Special Needs	12
Technical Assistance Grants	12
HUD VA Supported Housing (HUD-VASH)	12
Other VA Activities	13
Proposed Program Changes: Administration Initiatives and Legislation in the 108 th Congress	14
Administration Initiatives in the 108 th Congress	14
Homeless Assistance Grants Consolidation	14
Emergency Food and Shelter Program (EFSP) Transfer	14
Maternity Group Homes	15
Samaritan Initiative	15
Reactivation of the Interagency Council on Homelessness	15
Legislative Activities in the 108 th Congress	16
The Bringing America Home Act	16
Funding	17

List of Tables

Table 1. Homelessness: Targeted Federal Programs Appropriations, FY2000-FY2004	17
Table 2. Homelessness: Targeted VA Program Obligations, FY2000-FY2004	19

Homelessness: Recent Statistics, Targeted Federal Programs and Recent Legislation

There is no one federal definition of what it means to be homeless. However, most federal programs for the homeless use the definition of a homeless individual provided by the McKinney-Vento Act (P.L. 100-77):

an individual who lacks a fixed, regular, and adequate nighttime residence; and a person who has a nighttime residence that is (a) a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill); (b) an institution that provides a temporary residence for individuals intended to be institutionalized; or (c) a public or private place not designed for, nor ordinarily used as, a regular sleeping accommodation for human beings.¹

Recent Data on the Homeless

Data on the number of homeless individuals and families are largely unavailable. The only consensus is that the number of homeless persons is probably between 600,000 and 2.5 million. The homeless are notoriously difficult to count because of their nomadic nature and because so many of the homeless are not in shelters, but are on the streets or are doubled-up with friends and family. The Department of Housing and Urban Development (HUD) has undertaken a congressional mandate to implement a system that will provide an unduplicated count of homeless individuals and families who access homeless services. The Homeless Management Information System (HMIS) is currently being implemented across the country, but data from the HMIS are not anticipated to be available until 2005. Since HMIS data are not yet available, the best homeless data currently come from sample studies.

There are two major studies of the homeless. Although both studies provide an assortment of data on the homeless, neither one includes an estimate of the homeless population. The most recent report, "Hunger and Homelessness in America's Cities,"² was sponsored by the U.S. Conference of Mayors and was released on December 18, 2002. In order to conduct the study, the Conference of Mayors appointed 25 mayors to serve on its Task Force on Hunger and Homelessness. The

¹ 42 U.S.C. §11302

² A copy may be obtained from the USCM Web site at [<http://www.usmayors.org>].

cities where those 25 mayors serve were surveyed for the study.³ The data from each of those 25 cities were compiled by an individual or agency in the city's government, and were reviewed by a senior-level manager before being submitted. For the 2002 report, the data were collected from the cities for the period of November 1, 2001 to October 31, 2002, and were supplemented with data on population, poverty, and unemployment available from the Bureau of the Census and the Bureau of Labor Statistics.

The earlier of the two studies was released in December 1999. "The 1996 National Survey of Homeless Assistance Providers and Clients (NSHAPC)"⁴ was designed and funded by 12 federal agencies⁵ with guidance provided by the Interagency Council on the Homeless, a working group of the White House Domestic Policy Council. The U.S. Bureau of the Census collected the data based on a statistical sample of 76 metropolitan and nonmetropolitan areas between October 1995 and November 1996. The Urban Institute analyzed the data.

Specific findings of these two studies are summarized below. It is important to remember that these two surveys were conducted at different times, look at different geographical areas, ask different questions and use different survey techniques; thus the results are not necessarily comparable.

The 2002 U.S. Conference of Mayors Study. The U.S. Conference of Mayors (USCM) study seeks to track the changes in demand for emergency shelter and emergency food assistance, as well as changes in the characteristics of the homeless population. According to the 2002 report, requests for emergency *food assistance* increased by an average of 19% from the previous year. Of those emergency food requests, the study estimated that 16% went unmet. Forty-eight percent of the people requesting emergency food assistance were members of families — children and their parents. Thirty-eight percent of the adults requesting food assistance were employed. All of the cities reported that emergency food assistance facilities were used by families not only for emergencies but also as a steady source of food over long periods of time. People who requested emergency food assistance cited as the cause of their food insecurity (in order of frequency): low-paying jobs, unemployment and other employment-related problems, economic downturn or weakening of the economy, medical or health costs, homelessness, poverty or lack of income, substance abuse, reduced public benefits, child care costs, mental health problems, and limited life skills.

³ The 2002 cities surveyed were: Boston, Burlington, Charleston, Charlotte, Chicago, Cleveland, Denver, Kansas City, Los Angeles, Louisville, Miami, Nashville, New Orleans, Norfolk, Philadelphia, Phoenix, Portland, Providence, Salt Lake City, San Antonio, Seattle, St. Louis, St. Paul, Trenton, and Washington, D.C.

⁴ A copy may be obtained from the HUD Web site at [<http://www.huduser.org>]. Click on "Publications," then click on "Homelessness."

⁵ The federal agencies are Departments of Housing and Urban Development; Health and Human Services; Veterans Affairs; Agriculture; Commerce; Education; Energy; Justice; Labor; Transportation; Social Security Administration; and the Federal Emergency Management Agency.

The mayors' survey also found that requests for emergency *shelter* increased in 2002, also by an average of 19%. The survey reported that people remained homeless an average of 6 months, which is an increase over the previous year in 82% of the cities. Of those emergency shelter requests, the study estimated that 30% went unmet in 2002.

People who requested emergency shelter cited as the causes of their lack of shelter (in order of frequency): lack of affordable housing, mental illness and the lack of needed services, substance abuse, low-paying jobs, domestic violence, unemployment, poverty, prison release, economic downturn, limited life skills, and change and cuts in public assistance programs.

In studying the demographics of the homeless population, the USCM survey found that, on average, single men comprised 41% of the homeless population, families with children comprised 41%, single women comprised 13%, and unaccompanied minors comprised 5%. An average of 23% of homeless people in the survey cities were diagnosed with a mental illness; 32% abused substances; 22% were employed; and 10% were veterans.

The U.S. Conference of Mayors also sought to gauge homeless persons' access to services. In the survey cities, applicants had to wait an average of 19 months for public housing, 21 months for project-based Section 8 certificates, and 23 months for Section 8 vouchers. Forty-eight percent of the cities had stopped accepting applications for at least one assisted housing program due to the excessive length of the waiting list.

Officials in all of the participating cities stated that they expect requests for emergency food assistance to increase during 2003. Ninety-six percent expect that requests for emergency food assistance by homeless families will increase during 2003. One-hundred percent of the responding cities expect requests for emergency shelter to increase during 2003. All participating cities agreed that the problems of hunger and homelessness were likely to increase during 2003.

The NSHAPC. Although the NSHAPC has not been updated since 1996, it is largely considered to be the most comprehensive data set available on the extent of homelessness, the characteristics of the homeless population, and service programs designed to serve the homeless. The study found that homeless clients were predominantly male (68%) and nonwhite (53%); 23% of homeless clients were veterans. Large proportions had never married (48%) and 38% had not received a high school diploma. The NSHAPC also found that 34% of homeless people found in homeless assistance programs were members of homeless families (defined as a client with one or more children) and that homeless families had, on average, two children. Parents reported that almost half (45%) of these children ages 3 to 5 attended preschool and that 93% of school-age children (ages 6 to 17) attended school regularly. Forty-two percent of homeless clients reported that finding a job was their top need followed by a need for help in finding affordable housing (38%). Fifty-eight percent reported at least one problem with getting enough food to eat during the 30 days before being interviewed. Thirty-eight percent of homeless clients reported alcohol problems during the past month, 26% reported drug problems, and 39% reported mental health problems during that period. Over one-quarter (27%) of

homeless clients had lived in foster care, a group home or other institutional setting for part of their childhood. Twenty-five percent reported childhood physical or sexual abuse.

The NSHAPC counted approximately about 40,000 homeless assistance programs in 21,000 service locations operating in the United States. Food pantries (about 9,000) were the most common type of program, followed by emergency shelters (about 5,700), transitional housing programs (about 4,400), soup kitchens (about 3,500), outreach programs (about 3,300), and voucher distribution programs (about 3,100). Nonprofit agencies operated 85% of all homeless assistance programs; 51% were operated by secular non-profits and 34% were operated by faith-based nonprofits. Government agencies operated only 14% of homeless assistance programs.

The Federal Response to Homelessness

Before the early 1980s, most homeless assistance took place at the local level. However, as advocates for the homeless garnered national attention for the problem of modern homelessness, the federal government played a greater role in responding to homelessness. In 1983, the first federal task force was created to provide information to local governments and other parties on how to obtain surplus federal property that could be used for providing shelter and other services for the homeless. On June 26, 1986, H.R. 5140 and S. 2608 were introduced as the Homeless Persons' Survival Act to provide a comprehensive aid package for homeless persons. No further action was taken on either measure. However, later that same year, legislation containing Title I of the Homeless Persons' Survival Act — emergency relief provisions for shelter, food, mobile health care, and transitional housing — was introduced as the Urgent Relief for the Homeless Act (H. R. 5710). The legislation passed both houses of Congress in 1987 with large bipartisan majorities. The Act was renamed the Stewart B. McKinney Homeless Assistance Act⁶ after the death of its chief sponsor, Stewart B. McKinney of Connecticut. President Ronald Reagan signed the Act into law on July 22, 1987 (P.L. 100-77).

The original McKinney Act consisted of 15 programs providing an array of services for the homeless. The Act also established the Interagency Council on the Homeless, which is designed to provide guidance on the federal response to homelessness through the coordination of the efforts of multiple federal agencies covered under the McKinney Act. Since the enactment of the McKinney-Vento Homeless Assistance Act, there have been several legislative changes to programs and services provided under the Act. Specific programs covered under the McKinney-Vento Act, as well as other federal programs responding to homeless, are discussed below.

⁶ P.L. 106-400 renamed the Stewart B. McKinney Homeless Assistance Act as the McKinney-Vento Homeless Assistance Act on Oct. 30, 2000.

Department of Education (ED)

Education for Homeless Children and Youth. (42 U.S.C. §§ 11431-11435) This program was created by the McKinney-Vento Homeless Assistance Act and it assists state education agencies (SEAs) in providing access to a free, appropriate education for homeless children and youth. Grants made by SEAs to local education agencies (LEAs) under this program must be used to facilitate the enrollment, attendance, and success in school of homeless children and youth. The LEAs may use the funds for activities such as tutoring, supplemental instruction or referral services for homeless children and youth, as well as to provide them with medical, dental, mental and other health services. In order to receive funds, each state must submit a plan indicating how homeless children and youth will be identified, how assurances will be put in place that homeless children will participate in federal, state, or local food programs if eligible, and how the state will address such problems as transportation, immunization, residency requirements and the lack of birth certificates or school records.

Education for Homeless Children and Youth grants are allotted to SEAs in proportion to grants made under Title I, Part A of the Elementary and Secondary Education Act, except that no state can receive less than \$100,000. The Department of Education may reserve 0.1% of the total appropriation in order to provide grants to outlying areas (Virgin Islands, Guam, American Samoa, the Commonwealth of the Northern Mariana Islands, and Palau). The Department also can transfer up to 1% of the total to the Department of the Interior for Bureau of Indian Affairs services to homeless children and youth.

The Education for Homeless Children and Youth Program was amended by the No Child Left Behind Act (P.L. 107-110) and now explicitly prohibits states that receive McKinney funds from segregating homeless students from non-homeless students, except for short periods of time for health and safety emergencies or to provide temporary, special, supplementary services. An exception was made for four counties that operated separate schools for homeless students in FY2000 (San Joaquin, Orange, and San Diego counties in California, and Maricopa County in Arizona), as long as those separate schools offered services that were comparable to local schools and homeless children were not required to attend them. The Education for Homeless Children and Youth Program is authorized through FY2007 at 42 U.S.C. §11435, as amended.

Federal Emergency Management Agency (FEMA)

Emergency Food and Shelter Program (EFSP). (42 U.S.C. §§ 11331-11352). Currently administered by FEMA, the intent of the EFSP is to purchase food and shelter to supplement and expand available resources. The funds can be used for food banks/pantries, mass shelters (five or more beds), mass feeding sites, emergency repairs to meet building codes of mass feeding facilities or shelters, limited emergency rent or mortgage assistance and limited utility assistance for individuals or families to prevent homelessness.

The EFSP is governed by a National Board chaired by FEMA. The Board includes representatives from the United Way of America, the Salvation Army, the National Council of Churches of Christ in the U.S.A., Catholic Charities U.S.A., the Council of Jewish Federations and the American Red Cross. The United Way of America was selected as the secretariat and fiscal agent to perform necessary administrative duties for the board. The National Board establishes written guidelines each year which are published, when modified, in the *Federal Register*. Each area designated by the National Board to receive funds for that year must constitute a local board. The Local Board determines which private nonprofit or public organizations of the local government within individual localities should receive grants to act as service providers. Affiliates of the organizations represented on the National Board are invited to join the local board if possible; if a selected jurisdiction is part of an Indian reservation, the board must include a Native American. Also, all local boards must include a homeless or a formerly homeless person.

The EFSP was established by the Temporary Emergency Food Assistance Act of 1983 (P.L. 98-8); in 1987 it was authorized under the McKinney-Vento Homeless Assistance Act. The authorization for the EFSP expired at the end of FY1994 (42 U.S.C. §11352); however, it continues to be funded through annual appropriations.

Department of Health and Human Services (HHS)

Health Care for the Homeless (HCH) Program. (42 U.S.C. §254b(h)) This program is authorized as a Health Center Program under the Public Health Service Act and is administered by the Health Resources and Services Administration (HRSA). It provides access to comprehensive, preventive, and primary health care services, including substance abuse services, for homeless individuals. The HCH also provides grants for innovative programs that provide outreach to homeless children and children at risk of homelessness. This program is authorized through FY2006 at 42 U.S.C. §254b(j)(6).

Projects for Assistance in Transition from Homelessness (PATH). (42 U.S.C. §290cc-21 through 290cc-35) This program is authorized under the Public Health Service Act. Program services are provided in a variety of different settings, including clinic sites, shelter-based clinics, and mobile units. In addition, they take health care services to locations where homeless individuals are found, such as streets, parks, and soup kitchens. PATH was established in FY1991 as a formula grant program to provide services to individuals with severe mental illness, with or without co-occurring substance abuse disorders, who are homeless or at risk of becoming homeless. States may use the funds for eligible services including outreach, screening and diagnostic treatment, habilitation and rehabilitation, community mental health services, alcohol or drug treatment, staff training, case management, supportive and supervisory services in residential settings and referrals for primary health care, job training and education. In addition, to improve the coordination of services and housing for the target population, a limited number of housing subsidies (not more than 20% of the payments) may be funded. States must match one-third of all federal PATH funds in order to participate. Authorization for PATH is for FY2001-FY2003 at 42 U.S.C. §290cc-35.

Consolidated Runaway and Homeless Youth Program.⁷ This program was initially authorized as the Runaway and Homeless Youth Program under Title III, Runaway and Homeless Youth Act (RHYA), of the Juvenile Justice and Delinquency Prevention Act, amended, (JJDP A)(93-415). In October 1999, the Missing, Exploited, and Runaway Children Protection Act (MERC PA) reauthorized RHYA through FY2003 (42 U.S.C. §5751), consolidated funding for its program components — Basic Center Program (BCP) and Transitional Living Program (TLP) — and renamed the program as the Consolidated Runaway and Homeless Youth Program. RHYA mandates that 90% of appropriated funds be used for BCP and TLP for creating and operating community-based runaway and homeless youth centers and shelters. The remaining 10% of the funds must be used for a national communications system — that is, the National Runaway Switchboard, which is the national toll free runaway and homeless youth crisis hotline, an information clearinghouse; training and technical assistance activities; and research and demonstration projects that seek to improve program administration; and outreach through prevention activities.

Basic Center Program. (42 U.S.C. §§5701-5751) Authorized under Title III of the Juvenile Justice and Delinquency Prevention Act, this program provides grants to local public and private organizations to establish and operate local runaway and homeless youth centers. The centers address the crisis needs of runaway and homeless youth and their families. Grants are used to develop or strengthen community-based centers that are outside the law enforcement, juvenile justice, child welfare and mental health systems. The Act mandates that 90% of appropriated funds be used to establish and operate basic centers; in addition, approximately 10% of the funds in each of the past 5 years have been used to fund projects that support and strengthen the work in the shelters, such as the national toll-free runaway and homeless youth crisis hotline, training and technical assistance activities, research and demonstration projects on a wide variety of topics and activities to improve program administration, outreach, and prevention activities. Grants are allotted among the states using a formula based on the population of persons under age 18 in each state, proportionate to the national population of youth under age 18.

Transitional Living Program. (42 U.S.C. §§5714-1 through 5714-2) This program provides grants to local public and private organizations to meet the long-term needs of homeless youths ages 16 through 21. The program provides shelter — such as group homes, host family homes, and supervised apartments — and services — including information and counseling services in basic life skills (which include money management, budgeting, consumer education, and use of credit), interpersonal skill building, educational advancement, job attainment skills, and mental and physical health care to runaway and homeless teens. This program was reauthorized through FY2003 at 42 U.S.C. §5751.

⁷ For more detail, see CRS Report RL31933, *The Runaway and Homeless Youth Program: Administration, Funding, and Legislative Actions*, by Edith Fairman Cooper.

Runaway and Homeless Youth — Street Outreach Program.⁸ (42 U.S.C. §5712d) This program was created through the Violence Against Women Act of the Violent Crime Control and Law Enforcement Act of 1994 (P.L. 103-332). MERCPA amended RHYA to include the Street Outreach Program as a separately-funded program component. SOP provides grants to nonprofits for street-based outreach and education, including treatment, counseling and referral services for runaway, homeless, and street youth who have been subjected to, or are at risk of being subjected to, sexual abuse. Priority must be given to agencies that have experience in providing services to runaway, homeless, and street youth. MERCPA reauthorized SOP through FY2003 (42 U.S.C. §5751).

Department of Housing and Urban Development (HUD)

Homeless Assistance Grants. The Homeless Assistance Grants account was established to provide funding for four of HUD's programs for the homeless — *Supportive Housing Program (SHP)*, *Shelter Plus Care Program (S+C)*, *Section 8 Moderate Rehabilitation Assistance for Single-Room Occupancy Dwellings (SRO)*, and *Emergency Shelter Grants Program (ESG)*. Funding for these programs is disseminated through HUD's Continuum of Care (CoC) system. Under HUD's Continuum of Care (CoC) strategy, localities and states are encouraged to develop and maintain assistance systems which integrate programs and services for the homeless or potentially homeless. The CoC allows communities to choose the types of assistance that they provide, based on their priority needs. Out of concern that not enough CoC dollars were being spent on housing, FY2002 and FY2003 appropriations required that not less than 30% of funds be used for permanent housing and that all funding for services be matched at a 25% rate.⁹

There has been variation in the programs funded under the homeless assistance grants since HUD consolidated its homeless programs in 1995. For example, for the first several years, HUD consolidated seven McKinney-Vento Act homeless assistance programs under this grant — Shelter Plus Care, Supportive Housing, Emergency Shelter Grants, Section 8 Moderate Rehabilitation (Single Room Occupancy), Rural Homeless Grants, and Safe Havens for Homeless Individuals, as well as the Innovative Homeless Initiatives Demonstration Program. Rural Homeless Grants and Safe Havens for Homeless Individuals still exist statutorily, although they have not been funded for years. The following is a description of the four programs that are presently funded under the homeless assistance grants.

Supportive Housing Program (SHP). (42 U.S.C. §§11381-11389) This program was created by the McKinney-Vento Homeless Assistance Act of 1987, as amended. Housing funded under SHP funds may be transitional within a 24-month period, permanent housing for the disabled or a single room occupancy dwelling. In order to receive funds, permanent housing must provide supportive services for its residents such as case management, child care, employment assistance, outpatient health services, food and case assistance and assistance in obtaining permanent

⁸ This program is also known as the Education and Prevention Services to Reduce Sexual Abuse of Runaway, Homeless, and Street Youth Program.

⁹ See P.L. 107-73 and P.L. 108-7.

housing. States, local governmental entities, private nonprofit organizations, or community mental health associations that are public nonprofit organizations may apply for these competitive program funds through their local CoC board. This program requires that not less than 25% of appropriated funds be used to serve homeless families with children, not less than 25% be used to serve homeless persons with disabilities, and not less than 10% be used for providing supportive services. There is also a dollar-for-dollar match requirement, and no provider may use more than 5% of SHP funds for administrative purposes. The authorization for this program (42 U.S.C. §11389) expired at the end of FY1994; however, it has continued to be funded through annual appropriations.

Shelter Plus Care Program (S+C). (42 U.S.C. §§11403-11406b) This program was created by the McKinney-Vento Homeless Assistance Act, as amended. The purpose of this program is to provide short-term rental housing assistance, together with supportive services, to homeless persons with disabilities (primarily persons who are seriously mentally ill, have chronic problems with alcohol, drugs, or both, or who have acquired immunodeficiency syndrome and related diseases) and their families. Supportive services include health care, mental health services, substance and alcohol abuse services, child care services, case management services, education, job training, and other services essential for achieving and maintaining independent living. Not less than 50% of S+C vouchers must be reserved for homeless individuals who are seriously mentally ill or who have chronic problems with alcohol, drugs, or both. A state, unit of general local government (city, county, town, township, parish, or village) or public housing agency may apply for these competitive program funds. Through their local CoC boards, grantees may provide rental assistance to private nonprofit entities (including community mental health centers established as nonprofit organizations) that own or lease dwelling units. There is a dollar-for-dollar matching fund requirement. The authorization for this program (42 U.S.C. §11403h) expired at the end of FY1994; however, the program has continued to be funded through annual appropriations.

The FY2001 appropriations (P.L. 106-377) established a separate account called “*Shelter Plus Care Renewals*” to fund expiring Shelter Plus Care contracts. Because funding for S+C contracts is provided in 1-year increments, every year all S+C assistance will expire — and homeless families risk losing their assistance — unless Congress provides sufficient funding to renew all contracts. However, S+C renewal costs have been rising steadily, which has led some to worry that S+C contract renewals may eventually engulf the entire Homeless Assistance Grants Account. The FY2002 appropriations included no funding for the Shelter Plus Care Renewal program, as renewal funds were provided as a part of the general Shelter Plus Care Program. The Bush Administration proposes to separately fund the Shelter Plus Care Renewal Program for FY2004.

Section 8 Moderate Rehabilitation Assistance for Single-Room Occupancy Dwellings (SRO). (42 U.S.C. §§11407-11407b) This program was created by the McKinney-Vento Homeless Assistance Act of 1987, as amended, to provide rental assistance to homeless single individuals. Under the program, HUD provides rental subsidies, through public housing agencies, in connection with the moderate rehabilitation of residential properties that contain multiple single room dwelling units. These project units are similar to dormitories, having single

bedrooms, community bathrooms, and kitchen facilities. Funds for this program may also come from the *Shelter Plus Care Program*. The same type of supportive services may be funded under this program as under the Shelter Plus Care Program. There is no matching fund requirement for this program. The authorization for this program (42 U.S.C. §11403h) expired at the end of FY1994; however, it has continued to be funded through annual appropriations.

Emergency Shelter Grants Program (ESG). (42 U.S.C. §§11371-11378)

This program was authorized through the McKinney-Vento Homeless Assistance Act, as amended. ESG is a formula grants program to state and local governments (any local government may distribute all or a portion of the funds to private nonprofit organizations providing assistance to homeless individuals). Emergency Shelter Grants are used for the renovation, major rehabilitation or conversion of buildings into emergency shelters. Essential services, including employment, health, drug abuse or education services may be funded with ESG funds (up to 30% of funds may be used for building renovation and essential services). Maintenance, operation, insurance, utilities and furnishing costs for these emergency shelters may also be funded under this program, although not more than 10% of the funds may be used for staffing costs. Also, to prevent homelessness, financial assistance may be given to families who have received eviction or termination of utility service notices if: (1) the inability to make such payments is due to a sudden reduction in income, (2) there is a reasonable prospect that the family will be able to resume payments within a reasonable period of time, and (3) the assistance will not supplant funding for preexisting homelessness prevention activities from other sources (up to 30% of funds may be used for this activity). There is a one-for-one match requirement for local governments; there is no match requirement for the first \$100,000 for states, but a one-for-one match is required for the remainder of the funds. The authorization for this program (42 U.S.C. §11377) expired at the end of FY1994; however, the program has continued to be funded through annual appropriations.

Department of Labor (DOL)

Homeless Veterans Reintegration Program. (38 U.S.C. §2021) The Homeless Veterans Reintegration Program (HVRP) provides grants to states or other public entities and non-profits, including faith-based organizations, to operate employment programs that outreach to homeless veterans. The main goal of the HVRP is to reintegrate homeless veterans into the economic mainstream and labor force. This program was recodified under veterans benefits by the Homeless Veterans Comprehensive Assistance Act of 2001 (P.L. 107-95); formerly, it was authorized under the McKinney-Vento Homeless Assistance Act of 1987. For FY2003, the Administration proposed to move this program from the Department of Labor (DOL) to the Department of Veterans Affairs (VA), consolidating the program with two other DOL programs, the Disabled Veterans' Outreach Program and the Local Veterans' Employment Representative. This consolidation was not undertaken by Congress; and for FY2004, no such plan was proposed by the Administration. However, legislation has been introduced in the 108th Congress (H. R. 2518) that would transfer the Homeless Veterans Reintegration Program from the DOL to the VA. This program is authorized at 38 U.S.C. §2021(e) through FY2006 at \$50 million per fiscal year.

Department of Veterans Affairs (VA)

Health Care for Homeless Veterans (HCHV).¹⁰ (38 U.S.C. §§2031-2034)

This program provides outreach services, care, treatment and rehabilitative services to homeless veterans suffering from chronic mental illness. Residential housing may be purchased or leased with program funds to operate therapeutic transitional housing (38 U.S.C. §§2032, 2042). Under this program, the VA is required to coordinate and provide services in conjunction with state and local governments, other appropriate departments and agencies of the federal government and nongovernmental organizations. This program was created by the Hospital, Nursing Home, Domiciliary and Medical Care Act (38 U.S.C. 1710). This program is authorized until December 31, 2006 at 38 U.S.C. §2033.

Homeless Providers Grant and Per Diem Program.¹¹ (38 U.S.C.

§§2011-2013) Under this program, grants are awarded to public or private nonprofit organizations to provide outreach, rehabilitative services, vocational counseling and training, and transitional housing assistance (38 U.S.C. §2042) to homeless veterans. Funds may be used for the expansion, remodeling, or alteration of existing buildings or the acquisition of facilities for use as service centers, transitional housing or other facilities, and for the procurement of vans for use in outreach to and transportation for, homeless veterans. Service centers must provide health care, mental health services, hygiene facilities, benefits and employment counseling, meals, and transportation assistance. Centers must also be equipped to provide job training, counseling and placement services (including job readiness and literacy and skills training), as well as any outreach and case management services which may be necessary. A grant may not be used to support operational costs. This program is authorized through September 30, 2005 at 38 U.S.C. §2013.

Domiciliary Care for Homeless Veterans (DCHV). (38 U.S.C. §1710(b))

This program is a residential rehabilitation program specifically intended to meet the clinical needs of homeless veterans while preventing the therapeutically inappropriate use of hospital and nursing home care services. A multi-dimensional, individually tailored treatment approach is used and the clinical status of the veteran is stabilized while the underlying causes of homelessness are addressed. The basic components of the DCHV program include community outreach and referral, admission screening and assessment, medical and psychiatric evaluation, treatment and rehabilitation, and post-discharge community support. DCHV staff help veterans apply for housing assistance, or arrangements are made for placement of homeless veterans in long-term care facilities such as State Soldiers Homes, group homes, adult foster care or halfway houses. Homeless veterans are provided employment training through involvement in VA's Incentive Therapy Program, a medically prescribed rehabilitation program involving therapeutic work assignments at VA medical centers for which veterans receive nominal payments. The Secretary of VA was also authorized to establish up to 10 additional programs to provide domiciliary services

¹⁰ Formerly called the Homeless Chronically Mentally Ill Veterans (HCMI) program.

¹¹ Formerly called the Homeless Veterans Comprehensive Services Programs.

to homeless veterans (P.L. 107-95). The homeless veterans component of this program is authorized through FY2004 at 38 U.S.C. §2043.

Compensated Work Therapy/Therapeutic Residence Program. (CWT/TR) (38 U.S.C. §2063) This program is a component of the DCHV and HCHV programs described above. Under this program, disadvantaged, at-risk, and homeless veterans live in a CWT/TR community-based supervised group homes while working for pay in VA's Compensated Work Therapy Program, (also known as Veterans Industries). Funding for this program comes from the VA's Special Therapeutic and Rehabilitation Activities Fund, which is permanently authorized at 38 U.S.C. §1718(c).

Loan Guaranty Transitional Housing for Homeless Veterans. (38 U.S.C. §§2051-2054) Qualified nonprofit organizations or other qualified organizations that have experience in underwriting transitional housing projects may obtain a loan under this program for the construction, rehabilitation or acquisition of land for a multifamily transitional housing project. Under this program, housing may be single room occupancy and must provide supportive and counseling services (including job counseling) with the goal of encouraging self-sufficiency among participating veterans. To qualify, a project must require the occupant veteran to seek and maintain employment. The project must also maintain strict guidelines regarding the sobriety of participants. Occupants must pay a reasonable fee in order to live in these transitional units. Veterans who are not homeless and homeless individuals who are not veterans may be occupants of transitional housing if all of the transitional housing needs of homeless veterans in the project area have been met. Not more than five loans could be guaranteed for the 3 years following enactment (November 11, 1998); not more than 15 loans may be guaranteed under this program. Funding for this program comes from the VA's Veterans Housing Benefit Program Fund, which is permanently authorized at 38 U.S.C. §2051.

Homeless Veterans with Special Needs. (38 U.S.C. §2061) This program provides grants to health care facilities and to grant and per diem providers to encourage the development of programs for homeless veterans who are women (including women who care for minor dependents), frail elderly, terminally ill, or chronically mentally ill. This program is designated as a "special purpose program" under the appropriation for VA "Medical Care," through FY2005.

Technical Assistance Grants. (38 U.S.C. §2064) Under this program, VA provides grants to entities with expertise in preparing grant applications. The grantee must then provide technical assistance to nonprofit community-based groups who are applying for grants to assist homeless veterans. This program is authorized through FY2005 at 38 U.S.C. §2064.

HUD VA Supported Housing (HUD-VASH). (42 U.S.C. §1437f(o)) This joint HUD and VA Supported Housing Program provides specially designated HUD rental assistance (Section 8) vouchers to homeless veterans. Every homeless veteran who receives a housing voucher must be assigned to a VA case manager and receive supportive services. This program serves homeless veterans who have chronic mental illnesses or chronic substance abuse disorders. Before a veteran may participate in this program, he or she must agree to continue treatment for the mental

illness or substance abuse disorder. The set aside amounts for fiscal years 2003 — 2005 include 500 vouchers (FY2003); 1,000 vouchers (FY2004); 1,500 vouchers (FY2005); and 2,000 vouchers are set aside FY2006, subject to appropriations.

Other VA Activities. In addition to the targeted programs for which specific funding is available, as shown in **Table 2**, the VA engages in several activities to assist the homeless that are not reflected in this report as separate programs. An *Advisory Committee on Homeless Veterans* was established within VA (15 members appointed from veterans service organizations, community-based providers of services to homeless individuals, previously homeless veterans, experts in mental illness, substance use disorders and others) to consult with and seek advice concerning VA benefits and services to homeless veterans (38 U.S.C. §2066). A *demonstration program of referral and counseling* serves veterans who are in transition from certain institutions (penal institutions or long-term care mental institutions) and provides information about the benefits and services available to them under the VA programs (38 U.S.C. §2023). VA has several *Comprehensive Homeless Centers (CHCs)* in various cities, which consolidate all of VA's homeless programs in that area into a single organizational framework to promote integration within VA and coordination with non-VA homeless programs. CHCs offer a comprehensive continuum of care (CoC) to help homeless veterans escape from homelessness. VA also sponsors *Drop-in Centers*, which provide a daytime sanctuary where homeless veterans can clean up, wash their clothes, get a day time meal, and participate in a variety of low intensity therapeutic and rehabilitative activities. Linkages with longer-term assistance are also available. The *VA Excess Property for Homeless Veterans Initiative* provides for the distribution of federal excess personal property (hats, parkas, footwear, sleeping bags) to homeless veterans and homeless veterans programs. VA also operates a pilot project with the Social Security Administration (SSA) called *SSA-VA Outreach* where HCMI and DCHV staff coordinate outreach and benefits certification with SSA staff to increase the number of veterans receiving SSA benefits and otherwise assist in their rehabilitation.

VA programs and staff have actively participated in each of the *Stand Downs for Homeless Veterans* run by local coalitions in various cities each year. Stand Downs give homeless veterans 1-3 days of safety and security where they can obtain food, shelter, clothing, and a range of other types of assistance, including VA provided health care, benefits certification, and linkages with other programs. In a program called Veterans Benefits Administration (VBA)'s *Acquired Property Sales for Homeless Providers*, VA is able to sell, at a discount, foreclosed properties to nonprofit organizations and government agencies that will use them to shelter or house homeless veterans. However, agreements under this program may not be entered into after December 31, 2003 (38 U.S.C. §2041). Certain specified homeless veterans are eligible for a one-time course of dental care for homeless veterans engaged in rehabilitation (38 U.S.C. §2062). Finally, *Project CHALENG for Veterans*, is a nationwide VA initiative in which VA's Community Homelessness Assessment Local Education and Networking Groups work with other federal agencies, state and local governments, and nonprofit organizations to assess the needs of homeless veterans and develop action plans to meet identified needs.

Proposed Program Changes: Administration Initiatives and Legislation in the 108th Congress

There are currently a number of proposed homeless initiatives both from the Bush Administration and from Congress. The Department of Housing and Urban Development (HUD) proposes to consolidate three of its four homeless assistance programs into one program. The FY2004 budget suggests that the consolidation will serve homeless persons more comprehensively and effectively in a more timely fashion. The Administration's second proposed change is the transfer of the Emergency Food and Shelter Program (EFSP) from FEMA to HUD. The proposed transfer of the EFSP to HUD is in recognition of the fact that FEMA is now part of the Department of Homeland Security and that programs serving the homeless might be more appropriately placed under HUD. The Administration also proposes to fund Maternity Group Homes — a transitional living program for unwed teen mothers and their children — at \$10 million for fiscal year 2004. In addition, several bills have been proposed in Congress to change existing or create new programs.

Administration Initiatives in the 108th Congress

As noted earlier, the Administration's FY2004 budget submission proposed a number of changes to existing programs for the homeless. The Bush Administration proposes to consolidate HUD's three competitive programs within the Homeless Assistance Grants Account; transfer the Emergency Food and Shelter Program (EFSP) from FEMA to HUD; and authorize and fund Maternity Group Homes for unwed teen mothers.

Homeless Assistance Grants Consolidation. The FY2004 budget proposes \$1.325 billion for a consolidated homeless assistance program. HUD proposes to consolidate its three competitive programs — *Supportive Housing (SHP)*, *Shelter Plus Care (S+C)*, and *Section 8, Moderate Rehabilitation Assistance for Single-Room Occupancy Dwellings (SRO)* — into one competitive grant program. The Homeless Assistance Grants program would continue to reserve an estimated \$150 million for the formula Emergency Shelter Grants program; and up to \$194 million would be used for Shelter Plus Care Renewals. The HUD budget indicates that the consolidation of the three competitive programs would significantly streamline homeless assistance in the United States. A similar consolidation proposal was made for FY2003. However, legislation to implement these changes as well as the reauthorization of the HUD portion of the McKinney-Vento Act were not introduced in the 107th Congress.

Emergency Food and Shelter Program (EFSP) Transfer. HUD is requesting the transfer of the Emergency Food and Shelter Program (EFSP) from the FEMA — which is now under the newly established Department of Homeland Security — to HUD. The EFSP helps meet the needs of hungry and homeless people throughout the United States and its territories by allocating federal funds for the emergency provision of food and shelter. This transfer would consolidate all emergency shelter assistance — both EFSP and HUD's Emergency Shelter Grants Program — within HUD. The same plan was proposed for FY2003; however, Congress did not pass legislation mandating the transfer, citing the success of the

current structure. The funding level for the EFSP is proposed at \$153 million, the same as the funding level for FY2003.¹²

Maternity Group Homes. For FY2002, the Bush Administration proposed a Maternity Group Homes initiative as part of the Runaway and Homeless Youth Program's TLP component. Maternity Group Homes would provide a supportive and supervised living arrangement for unwed teen mothers (16 to 21) and their children. Such mothers would be provided transitional living guidance, including lessons on parenting, child development, health and nutrition, and other skills. The goal would be to promote the long-term economic independence of unwed teen mothers in order to ensure the well-being of their children. The Bush Administration's FY2004 budget request for maternity group homes is \$10 million, the same amount requested for FY2003, but \$23 million less than the Administration requested when the program was initially proposed for FY2002. For FY2003, Congress appropriated \$40.5 million for the Transitional Living Program (TLP), but no funds were specified for the maternity group homes initiative. However, grantees may and do use TLP funds for this purpose, without a specific set-aside. The Department of Health and Human Services administers this program.¹³

Samaritan Initiative. The FY2004 budget proposes a new Samaritan Housing Grant Program, which would target the chronically homeless — those persons living in encampments and on the streets across the United States. HUD would be required to contribute \$50 million and the VA and HHS would be required to contribute \$10 million each to the new initiative. The grants would fund programs that provide supportive permanent housing that combines housing and social services for the chronically homeless.

Reactivation of the Interagency Council on Homelessness. The Interagency Council on Homelessness was established by the Stewart B. McKinney Homeless Assistance Act. The Council's major activities include planning and coordinating the federal government's activities and programs to assist homeless people, and making or recommending policy changes to improve such assistance; monitoring and evaluating assistance to homeless persons provided by all levels of government and the private sector; ensuring that technical assistance is provided to help community and other organizations effectively assist homeless persons; and disseminating information on federal resources available to assist the homeless population. Various task forces and Council staff all work jointly to develop the actions needed to carry out the policies and priorities established by the Council.

As mentioned above, although the Council was created by the Stewart B. McKinney Homeless Assistance Act in 1987, it was relatively inactive for 6 years prior to President Bush's appointment of Philip Mangano as the Council's new

¹² For updated information on the EFSP budget, see CRS Report RL31802, *Appropriations for FY2004: Department of Homeland Security*, by Paul M. Irwin and Dennis W. Snook.

¹³ For more information, see CRS Report RL31933, *The Runaway and Homeless Youth Program: Administration, Funding, and Legislative Actions*, by Edith Fairman Cooper, and CRS Report RL31540, *Second Chance Homes: Federal Funding, Programs, and Services*, by Edith Fairman Cooper.

executive director on July 18, 2002. On the same day, Bush announced a new plan to better coordinate the federal response to homelessness. Three federal agencies were directed to collaborate in order to provide permanent housing and services to long-term homeless individuals. The total contribution by each agency would amount to \$35 million — \$20 million from HUD, \$10 million from HHS, and \$5 million from VA. For FY2004, the Administration proposes to fund the Interagency Council on Homelessness at \$1.5 million, a 50% increase from the FY2003 appropriation of \$1 million. The authorization for the Interagency Council on Homelessness expired at the end of FY1994; however, it continues to be funded through annual appropriations.¹⁴

Legislative Activities in the 108th Congress

In addition to legislation related to the Administration's proposals, Congress may consider other initiatives related to the homeless. Amendments impacting the homeless have been added to several bills under consideration in the 108th Congress, including: the **Individuals with Disabilities Education Act (IDEA)(H. R. 1350)** and the **School Readiness Act (Head Start reform)(H. R. 2210)**.

On June 19, 2003, Representative Christopher Smith introduced the **Veterans Affairs Reorganization Act of 2003 (H. R. 2518)**. This bill would amend Title 38 of the United States Code to provide for consolidation and improvement of programs that assist homeless veterans. Section 2 of the bill would create a new office in VA for homeless veterans. Section 3 of the bill would transfer HVRP from DOL to the VA. No further action has been taken on this bill.

The Bringing America Home Act.¹⁵ In the 108th Congress, Representative Julia Carson (D-IN) and Representative John Conyers (D-MI) introduced the Bringing America Home Act (H.R. 2897). The proposed legislation would arguably be the most comprehensive legislation to date to address the problem of modern homelessness in the United States. H.R. 2897 includes provisions covering housing security, economic security, health care, and civil justice. The Act was introduced on July 25 and referred to several committees.

The proposed legislation's housing security provisions would include the establishment of a National Housing Trust fund; the establishment in the Treasury of an Emergency Rent Relief Fund; a requirement that demolition of housing units funded by federal dollars result in no net loss of units; and several new authorizations as well as reauthorization of several HUD McKinney-Vento Act programs. The proposed bill would also include several economic security provisions, including the establishment of a "Homebuild" program that would assist those who have experienced homelessness through training and apprenticeship programs; greater access to Workforce Investment Act (WIA) services; and a number of provisions related to Supplemental Security Income (SSI).

¹⁴ H. Rept. 108-7.

¹⁵ See Web site: <http://www.bringingamericahome.org>

The proposal's health care provisions include the strengthening of the mainstream addiction and mental health services programs; and strengthening of services provided by the Ryan White Comprehensive AIDS Resources Emergency Act. Finally, the proposal's civil justice provisions would include a requirement that communities receiving homeless assistance dollars would certify that they are not criminalizing homelessness through laws and ordinances. The proposed bill would also require the United States Postal Service (USPS) to provide no-fee post office boxes to homeless individuals.

Funding

Table 1 shows final appropriation levels for FY2000-FY2003 and FY2004 Presidential funding requests for targeted homeless programs administered by all of the federal agencies except VA. Unless otherwise noted, the appropriation figures come from the budget justifications submitted by the various agencies or congressional appropriations documents.

Table 2 shows actual and estimated obligations for the Department of Veterans Affairs targeted homeless programs for FY2000-FY2004. With the exception of the Loan Guaranty Transitional Housing for Homeless Veterans, funding for VA activities described below were not specified as line items in VA appropriations. VA's Loan Guaranty Transitional Housing for Homeless Veterans program began in FY1999; the law allocated \$48.25 million for the subsidy for guaranteed loans for transitional housing to remain available until expended. The figures in **Table 2** were obtained from both VA budget documents and conversations with VA employees.

Table 1. Homelessness: Targeted Federal Programs Appropriations, FY2000-FY2004
(\$ in thousands)

Program	Agencies	FY2000	FY2001	FY2002	FY2003	FY2004 request
Education for Homeless Children & Youth	ED	28,800	35,000	50,000	54,642	50,000
Emergency Food & Shelter (EFSP)	FEMA ^a	110,000	139,700	140,000	153,000	153,000
Health Care for the Homeless (HCH)	HHS	88,000	101,000	116,000	125,000 ^b	139,9000
Projects for Assistance in Transition from Homelessness (PATH)	HHS	30,883	36,855	39,855	43,073	50,055

Program	Agencies	FY2000	FY2001	FY2002	FY2003	FY2004 request
Consolidated Runaway, Homeless Youth Program	HHS	64,144	69,122	88,024	89,977	98,043
<i>Runaway and Homeless Youth - Basic Center</i>		<i>43,645</i>	<i>48,383</i>	<i>48,288</i>	<i>49,473</i>	<i>61,630</i>
<i>Runaway and Homeless Youth - Transitional Living</i>		<i>20,499</i>	<i>20,739</i>	<i>39,736</i>	<i>40,504</i>	<i>26,413</i>
<i>Runaway and Homeless Youth - Maternity Group Homes</i>		—	—	—	—	<i>10,000</i>
Runaway and Homeless Youth - Street Outreach Program	HHS	14,996	14,999	14,999	15,399	14,999
Homeless Assistance Grants (HAG)	HUD	1,020,000	1,123,000	1,123,000	1,130,000	1,325,000
Homeless Veterans Reintegration Project	DOL	3,000	10,000	17,500	18,250	19,000
Samaritan Initiative	HUD	—	—	—	—	70,000
	HHS	—	—	—	—	50,000
	VA	—	—	—	—	10,000

Source: Table prepared by the Congressional Research Service (CRS). Unless otherwise stated, sources of data were agency budget justifications and congressional appropriations documents.

Notes: (1) Italics indicate amount is subsumed under earlier line item. (2) The Homeless Children Nutrition Program was a separately authorized and funded program entity until July 1999 and was included in previous editions of this table. This activity, created by Section 17(t) of the Richard B. Russell National School Lunch Act, has since been fully subsumed by the Child and Adult Care Food Program and no longer receives separate funding. The homeless shelters which receive these child nutrition funds are counted as child care centers.

- a. The Bush Administration proposes to transfer this program to the Department of Housing and Urban Development for FY2004.
- b. This figure does not reflect the FY2003 across-the-board rescission of 0.65%.

**Table 2. Homelessness: Targeted VA Program Obligations,
FY2000-FY2004**
(\$ in thousands)

Program	FY2000 (actual)	FY2001 (actual)	FY2002 (actual)	FY2003 (actual)	FY2004 (estimate)
Health Care for Homeless Veterans (HCHV) ^a	38,381	60,346	54,135	45,649	38,843
Homeless Providers Grants and Per Diem Program	19,640	31,100	22,431	49,689	69,391
Domiciliary Care for Homeless Veterans (DCHV)	34,434	34,576	45,443	47,261	49,151
Compensated Work Therapy/Therapeutic Residence Program (CWT/TR)	8,068	8,144	8,028	8,349	8,683
Loan Guaranty Transitional Housing for Homeless Veterans	—	366	528	10,263	11,050
HUD VA Supported Housing (HUD-VASH)	5,137	5,219	4,729	4,918	5,115

Source: Table prepared by the Congressional Research Service (CRS). Data for FY2000 and FY2001 supplied by the Department of Veterans Affairs (VA); Data for FY2002-2004 obtained from FY2004 VA budget submission.

- a. Includes funding for the Homeless Chronically Mentally Ill Veterans (HCMI) and the Homeless Comprehensive Service Centers, including mobile centers. A specific breakdown of obligations among activities is not available.