

**Statement of Charles W. Gould
National President, Volunteers of America**

**Submitted to the
U.S. Senate Committee on Banking, Housing, and Urban Affairs,
Subcommittee on Housing and Transportation**

**Legislative Hearing on McKinney-Vento Act Reauthorization
and Consolidation of HUD's Homeless Programs**

March 30, 2006

Opening Statement and Summary of Testimony

Chairman Allard, Ranking Member Reed, and Members of the Subcommittee – thank you for inviting me to testify this afternoon. My name is Charles W. Gould, and I serve as the National President of Volunteers of America. I have submitted a written statement for the record – I will summarize that statement for you now.

Volunteers of America is a national, nonprofit, faith-based organization that is dedicated to helping those in need rebuild their lives and reach their full potential. Since 1896, our ministry of service has supported and empowered America's most vulnerable groups, including homeless individuals and families. Our interventions both prevent and end homelessness, in urban and rural communities across the country. Last year, we provided assistance to over 80,000 homeless children, youth, and adults.

As the only representative of a homeless service provider testifying today, my comments and recommendations reflect the views of our staff from around the country – the people who are on the ground, every day, working to end homelessness. Volunteers of America believes that by consolidating current programs, broadening the list of eligible activities, focusing on homelessness prevention, and expanding the population to whom housing and services can be provided, reauthorization of HUD's homeless assistance programs will allow local communities to take full advantage of the best practices developed over the past twenty years.

Since 1987, we have learned three key lessons about homelessness in America: (1) McKinney-Vento programs are no substitute for “mainstream” housing and social service programs or systems of care; (2) Family homelessness has significantly increased; and (3) Both permanent and transitional housing can be effective tools to end homelessness.

Each of these lessons has significant policy implications in the context of the McKinney-Vento reauthorization bill before the Subcommittee – The Community Partnership to End Homelessness Act (S. 1801). My written statement details all of Volunteers of America's

recommendations for this legislation – let me use the remainder of my time to focus on three in particular.

First, since we understand that McKinney-Vento programs cannot end homelessness without ensuring that homeless persons are able to access the far greater resources available in “mainstream” housing and social service programs, we must increase the percentage of McKinney-Vento funds being spent on homelessness prevention, and ensure that “mainstream” programs do not discharge people into homelessness. Intervening to end homelessness is considerably more expensive than ensuring that we prevent it, and preventing homelessness must be our primary social objective – so no individual or family spends time on the street or in emergency shelter. Volunteers of America strongly supports the provisions in S. 1801 that address homelessness prevention.

Second, recognizing that family homelessness continues to increase, any reauthorization of McKinney-Vento programs must allow local communities the flexibility necessary to assist all homeless populations. In this regard, Volunteers of America is pleased to support provisions of S. 1801 that permit funds to be spent on permanent housing for non-disabled homeless families. We ask, however, that this Committee take additional measures – such as ensuring that the HUD definition of who is homeless includes persons who are doubled up or living in hotels or motels due to the lack of adequate alternative housing, and requiring that the HUD definition of “chronic” homelessness include families.

And finally, since we now understand that both permanent and transitional housing are effective at ending homelessness, we ask the Committee to incentivize both of these interventions, so that every American community may plan to end homelessness and receive targeted funding to assist local individuals and families who are most in need of help.

Thank you again for inviting me to testify today. I look forward to answering your questions.

Testimony

Chairman Allard, Ranking Member Reed, and Members of the Subcommittee – thank you for inviting me to testify this afternoon. My name is Charles W. Gould, and I serve as the National President of Volunteers of America.

Volunteers of America is a national, nonprofit, faith-based organization that is dedicated to helping those in need rebuild their lives and reach their full potential. Through thousands of human service programs, including housing and healthcare, Volunteers of America helps nearly 2 million people in over 400 communities. Since 1896, our ministry of service has supported and empowered America's most vulnerable groups, including at-risk youth, the frail elderly, men and women returning from prison, homeless individuals and families, people with disabilities, and those recovering from addictions. Our work touches the mind, body, heart - and ultimately the spirit - of those we serve, integrating our deep compassion with highly effective programs and services.

In the context of today's hearing, our interventions both prevent and end homelessness, in urban and rural communities across the country. Last year, we provided assistance to over 80,000 homeless children, youth, and adults. We are working to end homelessness in almost every state represented by a Senator on this subcommittee – and on the full Committee on Banking, Housing, and Urban Affairs.¹

As the only representative of a homeless service provider testifying today, my comments and recommendations reflect the views of our staff from around the country – the people who are on the ground, every day, working to end homelessness. I will begin with lessons learned in the 20 years since the passage of the McKinney-Vento Act, and from those lessons will draw a series of recommendations for how to most effectively reform the U.S. Department of Housing and Urban Development's (HUD's) homeless programs. We have a significant opportunity before us – the opportunity to closely re-examine every portion of the McKinney-Vento programs, and of the

¹ See Appendix A for a summary description of Volunteers of America homeless programs in states represented by members of the Subcommittee.

federal, state, and local partnership to prevent and end homelessness. We should take advantage of that opportunity.

McKinney-Vento's housing programs have not been reauthorized since 1994. Since that time, Volunteers of America has significantly broadened our understanding of how to provide cost-effective housing and supportive service interventions to prevent and end homelessness for all populations. Based on this understanding, the time is right for a complete reauthorization and streamlining of HUD's McKinney-Vento programs. By consolidating current programs, broadening the list of eligible activities, focusing on homelessness prevention and expanding the population to whom housing and services can be provided, reauthorization will allow local communities to take full advantage of the best practices developed over the past twenty years.

Reauthorization will also ensure that Congress makes important decisions about the structure and emphasis of federal homeless programs. Over the past twelve years, lack of input from Congress has led to HUD making significant policy changes through the annual Notice of Funding Availability (NOFA) process. Volunteers of America has not always been comfortable with this approach, which has often appeared to be "legislation by NOFA." Making abrupt policy changes in a February or March NOFA, with applications due in May, does not allow communities the certainty and consistency they need to implement long-term plans to end homelessness.

Twenty Years of McKinney-Vento – Lessons Learned

I want to highlight three important lessons that Volunteers of America has learned in the twenty-year period since McKinney-Vento was first passed: (1) McKinney-Vento programs are no substitute for "mainstream" housing and social service programs or systems of care; (2) Family homelessness has significantly increased; and (3) Both permanent and transitional housing can be effective tools to end homelessness. I will follow my discussion of these "lessons learned" with

Volunteers of America's policy recommendations for S. 1801 – the reauthorization bill that is currently before this Subcommittee.

1. McKinney-Vento Programs Are No Substitute For “Mainstream” Housing And Social Service Programs Or Systems Of Care.

Americans are homeless for many reasons. However, over the past twenty years it has become clear to Volunteers of America that many people become homeless due to the failure of federal and state “mainstream” programs or systems of care to meet their needs. These “mainstream” programs and systems can be defined as interventions designed to assist all low income Americans – not just persons experiencing homelessness.

In recent years, we have discovered just how these programs can contribute directly to homelessness. Here are some examples. When funding for Section 8 and other affordable housing programs is reduced, and affordability requirements on other housing units are allowed to expire, individuals and families will not find alternative affordable housing in their communities, and many will become homeless. When eligible low-income persons are incorrectly denied Temporary Assistance for Needy Families (TANF) “welfare” or Supplemental Security Income (SSI) disability benefits, they lose their ability to afford housing, and many will become homeless. When people are discharged from mental health or substance abuse treatment facilities, jails, prisons, or foster care, and no provisions are made to ensure that they receive appropriate housing and healthcare, many of them will become homeless. And when people cannot access mental health or substance abuse treatment, they lose jobs and other social supports. Many of these people will become homeless.

Unfortunately, none of these statements are hypothetical. Over the past 20 years, we have repeatedly seen funding cuts for affordable housing programs, incorrect denials of eligibility for public assistance, lack of discharge planning, and inability to access community based services – and these failures of “mainstream” programs have directly resulted in homelessness.

Ensuring access to public benefits and treatment, and ensuring adequate discharge planning, is costly and complicated – there is no question about it. However, the moral and economic cost of

not doing so is far greater. Intervening to end homelessness is considerably more expensive than ensuring that we prevent it, and preventing homelessness must be our primary social objective – so no individual or family spends time on the street or in emergency shelter.

2. Family Homelessness Has Significantly Increased.

When the McKinney-Vento Act was first passed, homelessness was viewed mainly as an urban issue – a problem of people, mainly single individuals, living on the streets. And as all of us who live here in Washington, D.C. know, we do not have to go more than a block or two away from the Dirksen building to see that street homelessness continues to exist. There is no question that we must do a better job of ending homelessness for people who live outdoors.

But what we have seen over the last twenty years is that there is another face of homelessness – both in cities around the country, and in suburban and rural areas. Much of this population consists of homeless families with young children. We now know that each year, over one million children are homeless. Homeless children lag behind their housed peers in almost every significant indicator of child well being, including early childhood development, educational performance, health, and well being. As a result, many of these children are likely to grow up to be the next generation of low income, poorly housed, and homeless adults. We must reform HUD's homeless programs to take better care of our nation's homeless families, while continuing to seek an end to street homelessness.

Many of these families enter emergency shelters, and eventually receive transitional housing or other assistance. However, too many homeless families remain on the margins. In rural areas and many suburbs, emergency shelters may not exist or may be full. In urban areas where shelters do exist, parents often do not want to subject their children to overcrowded congregate living facilities. These families are doubled up with friends or family, or living in short term inexpensive hotels or motels. Nobody would choose to live in these hotels or motels – whole families must coexist in one room, with no cooking facilities, no access to public transportation, and no place for

children to play. Families move back and forth between these settings, making it almost impossible to keep children in school. Make no mistake about it – these living situations are involuntary, and these families are homeless. HUD’s homeless programs must assist them.

3. Both Permanent and Transitional Housing Can Be Effective Tools To End Homelessness.

In 1987, many people believed that homelessness could be ended by providing emergency shelter that would allow people to “get back on their feet.” Today, Volunteers of America understands that this generalization does not apply to most homeless populations.

There is no question that 10 to 15 percent of homeless persons have severe disabilities, due to physical, mental, and substance use impairments. Both single adults and families with children can be found among this population. Many members of this group have spent significant time living on the streets or in emergency shelters, and under today’s terminology are identified as “long-term” or “chronically” homeless. The “chronic” homeless population needs permanent supportive housing – a combination of housing and intensive services where individuals and families are not time limited, and can remain for as long as they need to.

Volunteers of America is a major provider of permanent supportive housing. And in response to the federal initiative to end “chronic” homelessness, we are working to produce more - in partnership with groups like the Corporation for Supportive Housing. This initiative must continue. However, permanent supportive housing addresses the needs of no more than 15 percent of the homeless population. Volunteers of America is equally committed to intervening on behalf of the other 85 percent of homeless Americans, and our reauthorization recommendations will detail ways in which HUD’s homeless programs can be realigned to best serve this large and ever growing group.

Although some members of every homeless sub-population will need permanent supportive housing with intensive services, a large group will not. Many single homeless adults and homeless families with children fall into this category. Still others are runaway youth, or youth aging out of

foster care. It is easy to say that all these individuals and families need is access to “affordable housing” – although such housing does not exist in most communities. And indeed, in some cases, this is accurate.

Volunteers of America is a leading provider of quality affordable housing, and we have made affordable housing development and preservation our top organizational priority. We urge the Banking Committee to help us make good on this commitment, by supporting the creation of an “Affordable Housing Fund” through the GSE reform bill – S. 190. By helping Volunteers of America and other nonprofits provide new units of affordable housing, passing this legislation would result in a decrease in homelessness.

But many of these homeless individuals and families can benefit from a shorter-term intervention that comes with supportive services. That intervention, in most cases, is transitional housing. Transitional housing is limited to two years, and focuses on providing individuals and families with the support they need to become self-sufficient. Unfortunately, in recent years, the Administration and many advocacy organizations have been critical of transitional housing, asserting that it amounts to managing homelessness – not ending it. This assertion could not be more incorrect.

Transitional housing, in fact, is an extremely successful and cost-effective way to provide individuals and families with the helping hand they need to obtain stable permanent housing through the private market or through mainstream HUD subsidized housing programs. Given the limited funds available to homeless assistance programs, reducing the role of transitional housing in ending homelessness is unwise.

It is important to understand that transitional housing has significantly evolved since 1987. Years ago, transitional housing meant congregate living without as many supportive services as are provided today. Individuals or families with different needs were put into the same programs. As a

result, many people ended a two year housing placement having no more ability to secure permanent housing than they did upon program entry.

Now, however, “best practice” transitional housing looks different. If housing is provided at a single site, it is usually in the form of individual apartments, with their own living and cooking facilities. And transitional housing providers have specialized services interventions for different populations – families fleeing domestic violence, families with a parent who is returning from incarceration or from mental health or substance use treatment, homeless veterans needing job training, or youth who have either run away from unstable family situations or aged out of foster care.

In many cases, transitional housing is provided in scattered site apartments where tenants remain permanently housed without McKinney-Vento funded subsidies after two years – a model called “transition in place.” This model is successful at ending homelessness, and when rental subsidies move to a new individual or family at least every two years (often much more frequently), it is cost effective for HUD by allowing limited funding to benefit more people. A consolidated homeless program must incentivize this efficient housing intervention.

Volunteers of America Policy Proposals for S. 1801 – The Community Partnership To End Homelessness Act of 2005

I wish to thank Chairman Allard, Ranking Member Reed, and other members of the Subcommittee for the hard work they have put into the drafting of S. 1801 – the Community Partnership to End Homelessness Act of 2005. Volunteers of America believes that S. 1801 provides a strong framework for the reauthorization discussion that we have engaged in over the past several years, and continue to engage in today. The following policy proposals are indicative of our strong support for particular provisions of S. 1801, while also offering recommendations for significant improvements to the bill.

1. Support Cost Effective Homelessness Prevention Initiatives.

Volunteers of America strongly supports the provisions of S. 1801 relating to homelessness prevention. The first of two provisions would continue to allow up to five percent of Emergency Shelter Grants (ESG) (distributed to states and localities) to be used for homelessness prevention by providing short term rental assistance to avoid evictions. The second provision would allow five percent of CHAP funds to be spent on a broader array of prevention activities - including eviction prevention, relocation assistance for people being discharged from public institutions, assistance in reunifying homeless youth with their families, and aid to help reconnect homeless children in the child welfare system with their parents and guardians.

Homelessness prevention is both better for people and financially less costly than allowing individuals and families to live on the streets or in emergency shelter – we are pleased to see that this understanding has been adopted in the drafting of S. 1801.

2. Prevent Discharges Into Homelessness.

HUD funded permanent housing has long served applicants coming from the streets, emergency shelter, transitional housing, and treatment programs or other institutions. However, in the 2005 NOFA HUD announced that future permanent housing renewal projects would only be able to accept residents coming from transitional housing if they originally came from emergency shelter or from the streets. This prevents permanent supportive housing projects from housing individuals who may have become homeless after being discharged from jails, prisons, alcohol or drug treatment programs, or other public institutions. In order to receive permanent housing assistance, people leaving these settings would first have to suffer the indignity of becoming homeless, by living on the streets or in an emergency shelter – even if a permanent housing bed was immediately available.

Volunteers of America believes that this policy change is unwise – particularly since HUD has recently released an exploratory study on homeless prevention which found that one of the most

effective strategies was “supportive services coupled with permanent housing, particularly when coupled with effective discharge from institutions.” We know that reentry housing prevents homelessness – HUD should encourage it, not disfavor it.

In addition, this HUD policy weakens community control over who can be assisted through local homeless programs. Since local service providers and advocates best understand who is homeless and in need of assistance in their cities and towns, a policy that ties their hands contributes to inefficient use of scarce homeless program resources.

3. Provide Service Providers With the Flexibility Needed To Assist All Homeless Populations.

In keeping with our strong support for keeping homeless individuals and families from ever having to live on the streets or enter emergency homeless shelters, Volunteers of America has long believed that McKinney-Vento’s definition of who is homeless should be expanded to include people who are living in doubled up situations, or in hotels or motels, solely due to the lack of adequate alternative housing. We support this change by virtue of what our local office staff from around the country tell us. They report that their Continuums of Care would like to provide assistance to individuals and families living in these precarious situations - before they are forced onto the streets or into a shelter. However, under the current definition of homelessness, they must wait. S. 1801, as currently drafted, does not address this issue.

It is important to realize that living doubled up or in a hotel or motel is not a safe or stable situation, where an individual or family might choose to remain for lengthy periods of time. Instead, doubled up families often bounce between the homes of various friends and relatives – never staying in one place for more than a month or two – before they wear out their welcome and are forced to move on. This highly mobile and unstable lifestyle is particularly difficult for children – it leads directly to poor educational achievement and behavioral problems. Expansion of the definition of homelessness would allow communities who have large numbers of these highly mobile families to provide them with the assistance necessary to enter stable housing.

4. Include Homeless Families In the Definition of “Chronic” Homelessness.

HUD’s current definition of “chronic” homelessness permits only single individuals to be considered under that category. This definition, however, does not appear in McKinney-Vento – it was created by the Administration. Volunteers of America strongly urges Congress to codify an amended definition. Such an amendment would expand the definition of “chronic” homelessness to include families where either the head of household or a child in the household is disabled.

As currently worded, S. 1801 would only include families with disabled heads of household. Volunteers of America supports this language, as does almost every homeless advocacy or service organization. When an adult meets the criteria for being “chronically” homeless, why should that person not be able to receive permanent housing assistance, simply because they are living with one or more minor children. If anything, the presence of a child in the household creates an additional reason to provide that family with permanent housing.

Volunteers of America would also go slightly farther, to include families where the disabled individual is a child. Like other families who have been homeless repeatedly or for one lengthy stretch, these families need long term housing and supports. We should give communities the flexibility to provide them with permanent housing, if the need for such housing can be demonstrated.

5. Incentivize Successful Permanent And Transitional Housing.

Volunteers of America believes that HUD homeless programs ought to incentivize a range of housing interventions that are successful at ending homelessness. Currently, HUD has administratively chosen to provide significant incentives for the development of permanent housing through McKinney-Vento. The permanent housing “bonus” essentially diverts all new funding for the homeless programs into a bonus for communities who develop permanent housing for “chronic” homeless individuals.

We support S. 1801's continued incentives for permanent housing, which maintain the current bonus, while adding a bonus for permanent housing to assist non disabled homeless families. However, Volunteers of America would add an additional activity that is eligible for bonus money – cost effective transitional housing targeted to particularly vulnerable populations. These populations could include families leaving domestic violence situations, parents reuniting with children leaving foster care, or families with extremely young children. In addition – Volunteers of America believes that receipt of bonus money in a community, for a particular type of housing, must be conditioned on the community's ability to demonstrate, through their required gaps and needs analysis, that there is a need for such housing.

These changes will balance the current bonus structure, where permanent supportive housing for single “chronic” homeless individuals is the only eligible activity. Because every community can use additional homeless program funding, this structure pressures communities that do not have a significant “chronic” homeless population to “write to the grant” and devise projects to serve that population, simply to get bonus money. It would be a far more effective use of federal funds to provide bonus money that meets demonstrated local needs.

6. Ensure Continued Access to Supportive Services.

It is well established that ending homelessness requires a combination of housing and supportive services. This is why in 1987 McKinney-Vento authorized HUD to fund services, and why HUD has consistently done so. In recent years, HUD has undertaken significant efforts to fund more housing, and fewer services. Provisions contained in S. 1801 would go too far in continuing this trend.

S. 1801 would allow the Government Accountability Office (GAO) to make a determination, three years after enactment, that certain federal mainstream services programs (such as the Substance Abuse and/or Mental Health Block Grants) were receiving additional funds. If that determination occurred, the HUD Secretary would have discretion to stop funding supportive

services not directly tied to maintaining housing – potentially to include mental health and substance abuse services. Volunteers of America does not believe that this is a wise policy.

As I referenced earlier, mainstream programs do not serve homeless persons well. So additional funding for these programs does not mean that additional funds will go to homeless persons. Therefore, it is inappropriate to condition homeless program funding for services on how mainstream programs are funded.

Volunteers of America would prefer to see HUD and HHS work together to determine an efficient way for HHS to fund additional supportive services for homeless programs. This solution would require additional resources, but would best achieve the goal of having HUD – the federal government’s housing agency - fund more housing. We regret that HUD and HHS have yet to reach agreement on this matter, and hope that the U.S. Interagency Council on Homelessness (USICH) will be able to facilitate an accord.

7. Require Coordinated Federal, State, and Local Planning to End All Homelessness.

Over the past four years, the USICH has strongly encouraged state and local governments to create plans to end “chronic” homelessness in ten years. And in the just released HUD NOFA, Continuums of Care must coordinate their plans with these state and local plans if they want to receive the maximum number of points for strategic planning.

Volunteers of America supports the idea of planning to end homelessness. We believe, however, that this planning must start with the creation of a federal strategic plan to end homelessness – not just “chronic” homelessness but all homelessness. We are pleased that the development of such a plan, by the USICH is required under S. 1801.

Similarly, we believe that it is a mistake for the USICH to insist that state and local plans focus only on “chronic” homelessness. If all levels of government are going to engage in planning around the issue of homelessness, then the resulting plans should focus on ending homelessness

altogether – with specific strategies for “chronic” homelessness, family homelessness, and youth homelessness, or homelessness among any other subpopulation found in that state or locality.

This would allow state and local plans to be in alignment with the gaps and needs analysis that each Continuum of Care is required to prepare every year, and would alter the current inequitable system – under which communities with little to no “chronic” homelessness are still forced to plan for ending it, even as they receive little credit for demonstrating a need to assist other homeless populations and putting together a comprehensive strategy to meet that need. Volunteers of America strongly supports the provision in S. 1801 that would instruct the USICH to encourage these broader state and local plans to end all homelessness.

We would also note that plans to end homelessness are only as good as the resources available to implement them. So while we are pleased that many local plans are succeeding in encouraging state, local, and private investment, we believe that the federal government must set an example by providing adequate funding for McKinney-Vento programs and “mainstream” housing and supportive services programs.

8. Consolidate HUD’s Homeless Assistance Programs.

I will not devote significant time to this recommendation, as it appears to have nearly unanimous support – both in Congress and among service providers and other homelessness advocates. But, in brief, HUD now operates three competitive homeless assistance programs – Shelter Plus Care (SPC), which provides permanent housing for individuals with disabilities and families where the head of household has a disability - Supportive Housing Program (SHP), which provides both transitional and permanent housing, as well as supportive services – and Section 8 Moderate Rehabilitation, which provides funds to nonprofits. Nonprofits then combine these resources with Low Income Housing Tax Credit (LIHTC) or some other source of housing production dollars, and rehabilitate buildings to be used as Single Room Occupancy (SRO) housing.

Since both SPC and SHP have five sub-programs, program consolidation would take a total of 11 programs and turn them into one program – the Community Homeless Assistance Program (CHAP). This single program would have a lengthy list of eligible activities, allowing funds to be used for all current activities, and several new ones – including permanent housing for homeless families without a disabled head of household. Volunteers of America strongly supports this initiative, as proposed in S. 1801.

9. Include Administrative Provisions to Help Service Providers.

I want to conclude by offering our strong support for several administrative changes to McKinney-Vento. S. 1801 as currently drafted requires a 25 percent cash match for almost all housing and supportive services programs funded through McKinney. As service providers, we would prefer that there be no match requirement. However, we understand the importance of having a match, in order to most efficiently leverage funds. But in order to make the match requirement less onerous, we recommend that a service provider be allowed to satisfy it either with cash or in-kind resources. In-kind contributions such as mental health, substance abuse, or other supportive services are of equal value to cash, and are often significantly easier to obtain.

We also recommend that, as S. 1801 mandates, HUD be required to create a formal appeals process for communities who believe that the scoring of their NOFA applications was incorrect. Mistakes do happen, and there should be a formal process in place to correct them. The current system does not specify any appeal procedure, which means that appeals are made on an ad hoc basis, and there are no specified standards for evaluating them.

Thank you again for inviting me to testify today. I look forward to answering your questions.

Appendix A – Volunteers of America Homeless Services

Volunteers of America operates significant housing and supportive services programs, designed to end homelessness, in many of the states represented by members of the Subcommittee. We would be pleased to provide additional information about any of these programs, upon request. We would also be pleased to arrange for program tours.

In Colorado, we are one of the largest providers of assistance to Denver's homeless families. And we have recently received significant funding to build and operate a 15 unit permanent supportive housing program, to help end "chronic" street homelessness for persons with mental and physical disabilities who have been living on the streets for too long. Finally, in a more rural area of the state, we operate two programs in Durango – an emergency shelter and a shelter for victims of domestic violence.

In Alabama, Volunteers of America offers transitional and supportive housing for homeless families – a population that has dramatically increased after Hurricane Katrina. In Pennsylvania, we operate supportive housing, and recently received a substantial grant to develop transitional housing for youth aging out of foster care. In North Carolina, we operate transitional housing for women and their children who are victims of domestic violence, and we are working to site a transitional housing program for homeless veterans. In Wyoming, we provide emergency shelter in Sheridan. In Salt Lake City, we conduct significant street outreach activities designed to engage homeless adults and youth, and we operate a resource center for homeless youth.

And in Florida, we are the state's largest provider of assistance to homeless veterans, with urban and rural programs across the state – from Jacksonville down the coast to Ft. Lauderdale, Miami and Key West – and from the Tampa area inland to Gainesville. In partnership with the Veterans Administration, Volunteers of America staffs the unique "Veterans Mobile Service

Center,” a 43 foot vehicle which travels the state to provide outreach, medical care, and referrals for homeless veterans.

Volunteers of America in Michigan operates day and emergency shelter, along with transitional housing for homeless veterans. In New Jersey, we offer a broad range of homeless assistance for homeless individuals and families with children, ranging from prevention to emergency shelter to transitional housing.

In New York, we are the largest provider of homeless services in New York City, operating emergency shelter, transitional housing, and permanent supportive housing for homeless individuals and families. We also have innovative homeless outreach programs, operating in LaGuardia and Kennedy Airports, and in PATH regional train stations – and we provide emergency and transitional housing in Westchester County. And in upstate New York we operate a significant homelessness prevention program, along with emergency and transitional housing for homeless individuals and families, including homeless veterans.

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Mr. Gould is appearing at this hearing solely on behalf of Volunteers of America.