



Interagency Council on Homelessness

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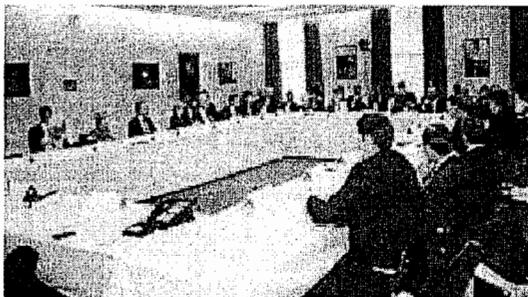
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VA Secretary Principi Convenes Interagency Council Meeting at White House Conference Center

September 29 The 6th Cabinet-level meeting of the U.S. Interagency Council since our revitalization in 2002 demonstrated the continuing commitment of the Bush Administration to meeting the goal of preventing and ending chronic homelessness. With announcements of over \$160 million in new federal resources as well as additional technical assistance to support and improve outcomes from programs already in place, agencies as varied as Veterans Affairs, Labor, Health and Human Services, Housing and Urban Development, Social Security, and Education are collaborating at an unprecedented level to focus resources on preventing and ending chronic homelessness.

The federal commitment is being joined by an equally important commitment and effort by states and communities and the private sector. The Council, chaired by VA Secretary Principi, was pleased to have the opportunity to hear from Horace Sibley, who at the request of Atlanta Mayor Shirley Franklin, has been leading that community's 10 year planning effort to end chronic homelessness, and from Craig Chancellor, President of Triangle United Way in North Carolina, who discussed the commitment of the United Way to the goal and to their role in helping bring resources from the business community to the effort.



Council members also heard from providers of services to veterans who have benefited from the expansion of resources made available through the VA - Marsha Four, Director of Homeless Services for the Philadelphia Veterans MultiService and Education Center; Toni Reinis, Executive Director of New Directors in LA; Kathryn Spearman, Executive Director of Volunteers of America-Florida; and Charles Williams, Executive Director of the Maryland Center for Veterans Employment and Training. Michael German, the Region IV Interagency Council coordinator, led off the panel discussion by describing the many outreach efforts to homeless veterans that are underway, including more than 20 Stand Down events in his region.

ICH Executive Director Philip Mangano reported that 49 Governors of states and territories

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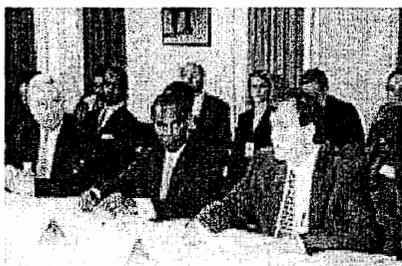
have created state interagency councils on homelessness and 152 cities and counties have committed to developing 10-Year Plans. Mr. Mangano also reported on the progress of the Council's first major initiative - the awards last year to 11 community partnerships through the Collaborative Initiative to Help End Chronic Homelessness, an historic funding collaboration by HUD, HHS and the VA.

Mr. Mangano noted that the federal resources invested in these 11 communities "are demonstrating tangible, visible, and quantifiable results". To date, the Collaborative Initiative grantees, through community partnerships that combine asserting outreach teams coordinated with housing and services including mental health, substance abuse and primary health care, have successfully ended the homelessness of over 400 men and women whose periods of homelessness total over 2800 years.



ICH Executive Director, Philip Mangano and VA Secretary Principi

Broward County, Florida is one of the 11 Collaborative Initiative grantees. Steve Werthman, Homeless Initiative Partnership Administrator for Broward County, spoke to the Council about the progress of their project. Known as HHOPE, Housing and Health Options, they have successfully housed 24 people to date and those 24 were previously homeless for a total of 161 years.



Steve Werthman, Broward County Homeless Initiative Partnership Administrator addresses Council.

"I would guess that the challenges of this new way of collaborating are no less daunting at the federal level than we find them to be at the local level. However, the prospects for lasting systems change keeps us enthused about the project as we address each bureaucratic challenge. We understand that the President's Samaritan Initiative proposal would go a long way in providing the statutory framework to reduce and help eliminate many of these bureaucratic barriers.

Our inter-agency model at the local level, mirroring the federal example, has improved collaboration between the partners, and particularly with the VA which had only a minimal presence in our County as recently as two years ago... Our VA collaboration has improved to the point where we were asked to present on it during recent national conferences. All of our partners, including mainstream agencies, are privileged to be part of this initiative." --Steve Werthman

In another example of the commitment of the Council to forging partnerships at all levels of government to better coordinate resources and improve program delivery, members of six Federal Regional Councils joined the Interagency Council meeting by phone at the opening of their proceedings.



L - R: Kathryn Spearman, Marsha Four, Toni Reinis, Charles Williams and Michael German

The Council's e-newsletter for this week will provide additional information about the meeting. You may subscribe to the e-newsletter through the link provided In The News section of this web page.

Samaritan Bill Introduced in Senate

September 22 U.S. Senators Wayne Allard (CO) and Elizabeth Dole (NC) today introduced

S 2829, the Samaritan Initiative Act of 2004. The legislation has been referred to the Senate Banking, Housing and Urban Affairs Committee. Senator Allard chairs the Committee's Housing and Transportation Subcommittee.

Excerpts from Senator Allard's remarks:



U.S. Senator Wayne Allard (CO)

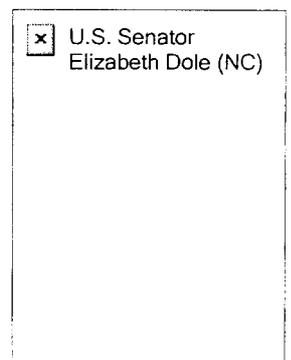
Mr. President, I rise today to introduce the Samaritan Initiative Act of 2004, and I am pleased to have Senator Dole join me in this effort. The Samaritan Initiative would mark the beginning of a new, collaborative approach in the Federal effort to end chronic homelessness. The Initiative would create a groundbreaking joint effort between the Department of Housing and Urban Development, the Department of Health and Human Resources, and the Department of Veterans Affairs.

For many years now I have been a strong advocate for the Government Performance and Results Act, which requires a focus on outcomes through clear, measurable goals. I am pleased to say that the Samaritan Initiative embodies this outcome-based focus and requires visible, measurable, quantifiable performance outcomes in reducing and ending homelessness. A focus on outcomes, rather than case management or process, also allows for new, innovative solutions to chronic homelessness. This will ensure that taxpayer dollars are spent in a responsible, effective manner.

I am proud to say that the Samaritan Initiative is supported by The U.S. Conference of Mayors, The National Association of Counties, The National League of Cities, The Enterprise Foundation, The National Alliance for the Mentally Ill, the National AIDS Housing Coalition, The National Alliance to End Homelessness, The Corporation for Supportive Housing, the Association for Service Disabled Veterans, the National Coalition for Homeless Veterans, and many other groups. I look forward to working with them, along with my colleagues in the Senate, to end chronic homelessness in America.

Denver, Colorado is one of 11 communities currently benefiting from federal funds awarded last October under the HUD/HHS/VA Collaborative Initiative to Help End Chronic Homelessness. The Colorado Coalition for the Homeless is acting as lead partner for the \$3.4 million awarded to the Denver Housing First Collaborative. Eleven Denver agencies are partnering as part of this Collaborative to create a

comprehensive and integrated strategy to provide 100 units of permanent housing to enable persons who are chronically homeless to move from the streets and emergency shelters into "stable, permanent housing and receive the services and other support they need to achieve greater self-sufficiency." Of the 100 units being made available through this initiative, 60 are directly funded through the Collaborative grant award with the remaining 40 leveraged through the Colorado Coalition for the Homeless. The Denver Housing First Collaborative is using a "housing first" strategy, combined with an assertive community treatment approach. Partners in the Denver Housing First Collaborative include the Colorado Coalition for the Homeless and its Stout Street Clinic which together with Denver Health is providing primary care services; the Denver Department of



U.S. Senator Elizabeth Dole (NC)

Human Services, the Mental Health Corporation of Denver, Arapahoe House which is providing substance abuse treatment services, and the Denver VA Medical Center.

Over the past year communities throughout North Carolina have begun engaging in 10-year planning processes to end chronic homelessness including Asheville, Durham, Henderson/Vance County, Raleigh/Wake County, and Winston-Salem. Raleigh/Wake County has the distinction of being the 100th community in the nation to commit to developing such a plan. Enactment and funding of the Samaritan Initiative would provide new resources for the creation of permanent supportive housing for persons experiencing chronic homelessness.

From Sea to Shining Sea

- *A mayors 10-Year Plan summit in Puerto Rico... the 90th annual St. Vincent de Paul Society meeting in Phoenix, AZ, a Housing and Homeless Coalition Conference in Riverside, California... the announcement by Nashua NH Mayor Streeter of a 10-year Plan to end chronic homelessness in that community... a meeting of the Arizona State Interagency Council on Homelessness...the dedication of housing facilities for the chronically homeless on Skid Row in Los Angeles...an Affordable Housing Conference in Bellevue, WA...*

September 20 At these recent events and so many others around the country, community leaders, faith based organizations, the business community and citizens are taking action to develop and implement plans to end the disgrace of homelessness. 20 federal agencies comprising the United States Interagency Council on Homelessness. 49 Governors of states and territories who have established state interagency councils on homelessness. 140 mayors and county executives who have committed to developing 10 year plans to end chronic homelessness in their communities. All partnered. All extending political will on the issue of homelessness made tangible in research-informed and results-oriented interagency and intergovernmental collaborations and local plans.

"I am sorry this morning that I do not remember more Spanish. But I do know this: that no matter which language we speak, homelessness is wrong in all of them."

ICH Director Philip Mangano speaking at Sept 7 Mayors Summit in Puerto Rico

"Today, Nashua and New Hampshire are part of an unprecedented partnership on homelessness that literally extends from the White House to the streets. In Washington there are now 20 federal departments and agencies meeting together to make resources more available and accessible to homeless people. All focused on the President's initiative to end the homelessness of the most vulnerable, those on our streets, long term in our shelters, disabled, most at risk of death." September 17th press conference with NH Gov Craig Benson and Nashua Mayor Bernard Streeter

"Let's begin where we should. Homelessness is wrong. Morally, spiritually, economically, socially – wrong. What is the moral common sense of the future on homelessness? Our children and grandchildren will know- a home for every American." ICH Director Mangano speaking at the Sept 13 Riverside County Conference of Housing and Homeless Coalition, CA

"In the prayer of the Society of St. Vincent de Paul: " that those who have no home may quickly find a place in which they can live a decent and happy life."

The President has called for a new initiative to be created to address the homelessness of those who are disabled on our streets and long term in our shelters in support of his call to

end chronic homelessness in the next 10 years. It's called the Samaritan Initiative and as the name implies, it is targeted to those who have been left behind on our streets. Others have passed by. But this Administration and its partners will stop and ensure that those on the side of the road are moved forward toward housing and services. It's in the Congress now and needs the support of all Americans. It's the down payment to end chronic homelessness." Sept. 10 90th Annual Conference of Society of St. Vincent de Paul, Phoenix, Arizona

Dallas Mayor Names Business Leader and Civic Hero as 'Homeless Czar'

September 3 Longtime civic leader Tom Dunning has been named to lead Dallas' effort to prevent and end homelessness in the 8th largest city in the nation. The announcement of Mr. Dunning's appointment as "homeless czar" for the city was made by Mayor Laura Miller at a press conference last Wednesday attended by ICH Executive Director Philip Mangano, Dallas City Councilmember Lois Finkleman who chairs the Council's Committee on Health, Environment and Human Services, and representatives of various providers, non profit organizations and the Metro Dallas Homeless Alliance. Mr. Dunning, who is Chairman and CEO of Lockton Dunning Benefit Company in Dallas, will form a task force of homeless providers and others to develop a central assistance facility for the homeless in Dallas in conjunction with the city's recently adopted 10-Year Plan to End Chronic Homelessness. That plan was adopted by the City Council in June making Dallas the first city in the state of Texas to have developed such a plan. Nationally, more than 120 communities have developed or are engaged in the process of developing 10-Year plans to end chronic homelessness.

In 2003, Dallas received over \$10 million in federal HUD targeted funds for homelessness assistance, a record funding level for the city and a 113% increase over the 2002 level. The funds were part of a record \$1.27 billion in homeless resources awarded by the Bush Administration to communities across the nation.

Mr. Dunning brings a wealth of experience and civic leadership to this new endeavor. He is a Board member of the Southwestern Medical Foundation and Baylor Medical Foundation, and a member of the Dallas Citizens Council. Said ICH Executive Director Philip Mangano, *"Mayor Miller has joined other mayors across the country in demonstrating wisdom and leadership in appointing a "local hero" to implement the city's 10-year plan...in announcing a local hero of such community commitment to lead the partnering process, to insure stakeholder involvement in an inclusive and expansive process, Dallas has taken a great leap forward. Those cities who have moved the furthest in their response and implementation have had strong and capable leadership from the mayor and from a local hero. The added value of that hero cannot be underestimated... Last year's*

 Mayor Miller at press conference

From left to right: Councilmember Lois Finkelman, Tom Dunning, Mayor Miller. Behind her: Councilmember Rasansky, Mr. Mangano, Councilmember Veletta Forsythe Lill

Renaissance Award winner "to restore and revitalize downtown Dallas" now has a new mission: to restore and revitalize the lives of our homeless neighbors."

The 10-Year plan adopted by the Dallas City Council in June was developed in partnership with Deloitte, the United Way, and the Metro Dallas Homeless Alliance. Following the press conference, Mr. Mangano addressed the Dallas City Council on federal initiatives to end chronic homelessness.

Further, the state of Texas received a total of \$52 million plus in last year's awards, a 28% increase over the \$41 million of 2002 and a record amount for the state.

It's Been A Revelation...

August 16 That's how one project manager described the experience of developing and implementing a project under the HUD/HHS/VA Collaborative Initiative to Help End Chronic Homelessness. At this first annual meeting of the Collaborative Initiative grantees and their federal funding partners held in Washington DC last month, heads nodded in agreement. For grantees and federal officials alike, the process that began with a conversation among three Cabinet Secretaries at a White House meeting of the Interagency Council on Homelessness, led to a federal financial commitment of up to \$55 million to 11 community partnerships, and resulted in housing for more than 300 chronically homeless men and women to date, has been instructive and revealing.

Revealing of the statutory, regulatory and cultural barriers that exist between federal agencies and programs that must be overcome to support joint initiatives. Revealing that real collaboration and partnership at both the federal and local level takes a lot of "energy, resources and compromise". Revealing that even the hardest to serve homeless will respond to clinically based outreach and engagement. Revealing that initiatives like this can be "a window of opportunity to go beyond the immediate NOFA and affect the community" through real systems change. All agreed that the undertaking, demanding and difficult at times, is achieving housing success for long time homeless men and women, and is promoting systems change, and expressed support for the Samaritan Initiative legislation pending before Congress, which would provide additional funding opportunities.

"It's all about access..."

The Collaborative Initiative grantees attending the meeting represented partnerships in 11 communities that are utilizing their federal funding awards to build a seamless and sustainable system of outreach, housing, primary health care, mental health, substance abuse treatment and other supportive services to end the homelessness of men and women with disabling conditions who have been living on the streets, in encampments and in shelters in their communities for years. The 36 men and women who have been housed through the Contra Costa program had a combined 473 years of homelessness, an average of 11 years each. Sadly, grantees are finding many veterans among their chronically homeless population but as Sage Foster, housing manager for the Contra Costa project said, having Veterans Administration participation in their project, "has made a dirt road into a superhighway for getting chronically homeless veterans the help they need".

"You got a stir going. The project has been a catalyst for systems change in my community..."

Participants discussed how the project is having an impact on the way services are being made available for homeless people in their community. For Chicago, the project has strengthened relations between local government agencies and non profits and they have been able to target the grant to an area of the city where there has been an inequity of resources. For Los Angeles, the Skid Row area was already a service-enriched area but there had been a "disconnect" between many of the service providers which the collaborative initiative project is helping to overcome. For some projects, the opportunity to develop a closer working relationship with Social Security has been a big plus. Columbus reported the length of time for SSDI determinations has been reduced to 3-6 weeks, down from 6-12 months. In Denver, they've included an employment specialist on their team and will be benefiting from a recent Social Security HOPE grant that will provide expedited benefit determinations. In Portland, they've developed a strong positive relationship with landlords that is reducing the time between outreach/engagement and housing. In Chattanooga, they've committed to broadening the circle of support for the project to include transportation. The partnerships required to achieve the project's objectives "makes us accountable to each other", said one participant.

Breaking the cycle of homelessness and doing so in a way that is cost effective for government.

Research in recent years has shown that chronically homeless persons generally have a disabling condition such as a developmental or physical disability, substance abuse or mental health condition. Persons experiencing chronic homelessness cycle repeatedly through a variety of community care systems including shelters, correctional and medical care facilities, making them some of the most expensive citizens in the community. The 11 projects being supported through the Collaborative Initiative are focused on engaging chronically homeless persons, assisting them in entering housing, providing supportive services needed to maintain those tenancies and connecting them to mainstream resources such as employment services and social security, where appropriate. The research has shown that such supportive housing solutions are effective in ending the homelessness of even the hardest to serve, promotes greater self sufficiency and recovery, has a visible impact on community streets, and offers potential savings in city and county budgets for emergency medical care, jail and other correctional costs.

During the conference, Chattanooga reported that "they liked the idea of proceeding from a proven model"--that model being Assertive Community Teams (ACT) combined with a Housing First approach and improved access to mainstream program resources. The model was allowing them to "meet the housing, fiscal and health needs of homeless mentally ill persons in our community". Concerns they originally had about whether chronically homeless persons would choose to continue to stay in their housing had been allayed. Of the 51 chronically homeless men and women they had been able to house to date, there had only been three turnovers.

Describing the 90 unit Empress Hotel which is being master leased for their project, a San Francisco participant noted, "the brilliance of this grant is sustainability. If we were just using the money to do another building, it would not be so exciting". San Francisco is targeting the "high flyers" among their chronically homeless population, those who most frequently use community health care services - and by stabilizing them in housing with primary and behavioral health care services is seeing a reduction in community costs.

"I saw the genuineness of their caring..."

Effective outreach and engagement is key to a successful program. In Contra Costa, teams are doing outreach into encampments, using cell phones to arrange for on- demand

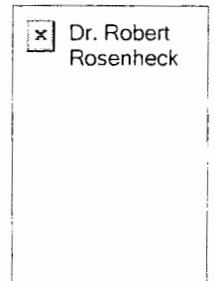
service. In Chattanooga, the local housing authority made space available to store donated furniture and other household items that were then used to furnish the apartments. The donations sprang from an email passed along through the community. Having peer caseworkers on the ACT teams were found to be helpful to both the team and to consumers.

National Performance Assessment

The federal partners are funding a National Performance Assessment of the Collaborative Initiative projects. The assessment is being led by Dr. Robert Rosenheck, Director of the VA's Northeast Program Evaluation Center (NEPEC). The assessment is designed to provide a high level of public accountability for the investment of federal resources and further our knowledge of effective interventions.

The assessment consists of two parts:

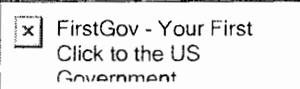
- The first part will collect detailed information on the health and well being of clients when they enter the program and will reassess them every three months for up to three years. This part of the evaluation will tell us whether we helped people exit from homelessness, whether their exit was sustained and what other improvements they experienced in health, community adjustment and well being. Because we will collect extensive data on the kinds of services each client receives, we should also be able to identify services or interventions that are most effective in achieving program goals.
- The second part of the evaluation is an annual survey of inter-organizational relationships in each community. Which organizations are working together? How well do they collaborate with each other? How do they share funds? What services do they provide? With answers to these questions, we hope to identify community differences that may affect program effectiveness.



Dr. Robert Rosenheck,
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and Public Health at
Yale Medical School and
Director of NEPEC

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Privacy Statement



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