

May 2012

# HOMELESSNESS

## Fragmentation and Overlap in Programs Highlight the Need to Identify, Assess, and Reduce Inefficiencies



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## Why GAO Did This Study

Federal programs for those experiencing or at risk for homelessness generally are designed to provide housing assistance and other services such as health care, job training, or food assistance. This report responds to the statutory requirement that GAO identify federal programs, agencies, offices, and initiatives that have duplicative goals or activities and addresses (1) the number of and funding levels for federal homelessness programs and the extent to which fragmentation, overlap, and duplication exists; (2) whether the programs have been evaluated; and (3) actions of the Interagency Council and federal agencies to coordinate efforts and the extent to which the federal strategic plan to prevent and end homelessness is an effective strategy. To address these objectives, GAO sent questionnaires to 10 federal agencies and obtained and analyzed data for a range of programs.

## What GAO Recommends

The Interagency Council and the Office of Management and Budget—in conjunction with HHS, HUD, Labor, and VA, should further analyze the degree and effects of overlap and fragmentation. VA agreed with this recommendation. HHS, HUD, Labor, and the Council did not explicitly agree or disagree. We also recommended that the Council incorporate additional elements into updates to the federal strategic plan or in implementation and planning documents. The Council stated it has been setting priorities and measuring progress, but was unable to provide documentation. GAO maintains its position and that the implementation of the federal strategic plan be made more transparent.

View [GAO-12-491](#). For more information, contact Alicia Puente Cackley at (202) 512-8678 or [cackleya@gao.gov](mailto:cackleya@gao.gov).

## HOMELESSNESS

### Fragmentation and Overlap in Programs Highlight the Need to Identify, Assess, and Reduce Inefficiencies

## What GAO Found

Homelessness programs are fragmented across multiple agencies and some show evidence of overlap. In fiscal year 2010, eight federal agencies obligated roughly \$2.8 billion to administer 26 homelessness programs. Three agencies—the Departments of Health and Human Services (HHS), Housing and Urban Development (HUD), and Veterans Affairs (VA)—are responsible for the majority of programs and dollars, 22 of 26 programs, and 89 percent of total funds. GAO found that these agencies and the Department of Labor (Labor) have multiple programs that offer similar services to similar beneficiaries. Fragmentation of services and overlap in some programs is partly due to their legislative creation and partly due to programs evolving to offer services that meet the variety of needs of persons experiencing homelessness. Fragmentation and overlap can lead to inefficient use of resources. For example, both HHS and VA have programs that provide similar services, but each agency separately manages its programs under different administrative units. In addition, some local service providers told us that managing multiple applications and reporting requirements was burdensome, difficult, and costly. Moreover, according to providers, persons experiencing homelessness have difficulties navigating services that are fragmented across agencies.

While almost all targeted programs maintain performance information (including data on the number of homeless served), few targeted programs have conducted evaluations to assess how effectively the programs are achieving their objectives. While performance information can be helpful for monitoring whether programs were achieving desired results, evaluations allow for comprehensive assessments. According to GAO's questionnaire, 2 of the 26 programs reported they had a program evaluation within the last 5 years. Information from program evaluations can help agencies fully assess what is working and how improvements can be made. Moreover, understanding program performance and effectiveness is key to determining in which programs and interventions to strategically invest limited federal funds.

The U.S. Interagency Council on Homelessness (Interagency Council) is required to coordinate the federal response to homelessness and has taken several steps to coordinate efforts and promote initiatives across federal agencies. Federal coordination efforts have increased in recent years and included issuing the first federal strategic plan, increasing coordination at the state and local levels by focusing on the creation of state interagency councils on homelessness, and taking steps to develop a common vocabulary for discussing homelessness and related terms. The strategic plan serves as a useful and necessary step in increasing agency coordination and incorporates some elements of an effective strategy, but lacks key characteristics desirable in a national strategy. For example, the plan does not list priorities or milestones and does not discuss resource needs or assign clear roles and responsibilities to federal partners. In order for the Interagency Council and its members to effectively translate the goals and objectives of the plan into actions and measure their own progress in implementing them, these elements must be made transparent to help ensure accountability and measure the plan's progress.

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### **Abbreviations**

Education	Department of Education
FEMA	Federal Emergency Management Administration
GSA	General Services Administration
HEARTH Act	Homeless Emergency Assistance and Rapid Transition to Housing Act
HHS	Department of Health and Human Services
HMIS	Homelessness Management Information Systems
HUD	Department of Housing and Urban Development
Interagency Council Justice	U.S. Interagency Council on Homelessness Department of Justice
Labor	Department of Labor
VA	Department of Veterans Affairs

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United States Government Accountability Office  
Washington, DC 20548

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May 10, 2012

The Honorable Tim Johnson  
Chairman  
The Honorable Richard C. Shelby  
Ranking Member  
Committee on Banking, Housing,  
and Urban Affairs  
United States Senate

The Honorable Spencer Bachus  
Chairman  
The Honorable Barney Frank  
Ranking Member  
Committee on Financial Services  
House of Representatives

In recent years, increasing attention has been paid to the issue of homelessness, in part because the economic downturn has placed more individuals and households at risk for homelessness. Evidence suggests that the number of those entering shelters has remained constant, but there has been an increase in the number of people living with family or friends. According to Department of Housing and Urban Development (HUD) estimates, on a single night in January 2011, approximately 636,000 people experienced homelessness. A number of federal agencies and programs specifically target assistance for those persons experiencing homelessness or at risk for homelessness, while other programs, referred to as “mainstream,” more broadly assist low-income populations. Both targeted and mainstream programs can offer housing assistance, and supportive services such as food assistance, health care, or job training.<sup>1</sup> As we previously reported, the wide range of programs that federal agencies offer has resulted in a fragmented service system; that is, more than one federal agency is involved in the same broad area of national interest.<sup>2</sup> A fragmented service system could lead to some

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<sup>1</sup>In this report, we use “supportive services” to include all nonhousing services that may assist persons experiencing homelessness.

<sup>2</sup>See GAO, *Opportunities to Reduce Potential Duplication in Government Programs, Save Tax Dollars, and Enhance Revenue*, [GAO-11-318SP](#) (Washington, D.C.: Mar. 1, 2011), 129-133.

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programs offering similar services and serving similar populations, and thus to inefficiencies in program administration and service delivery across the federal government. As a result, effective coordination of fragmented service systems is essential.

This report responds to the statutory requirement that GAO identify and annually report on federal programs, agencies, offices, and initiatives that have duplicative goals or activities.<sup>3</sup> It addresses (1) the number of and funding levels for federal homelessness programs and the extent to which fragmentation, overlap, and duplication exists; (2) whether the programs have been evaluated; and (3) actions of the U.S. Interagency Council on Homelessness (Interagency Council) and federal agencies to coordinate federal efforts and the extent to which the federal strategic plan to prevent and end homelessness is an effective strategy.

To gather information on federal homelessness programs and assess fragmentation, overlap, and duplication, we developed structured questionnaires and obtained information from 10 federal agencies that administer programs for persons experiencing homelessness. We identified programs that were specifically designed to assist the homeless (targeted) or programs that more broadly assist low-income populations but which people experiencing homelessness may access (mainstream).<sup>4</sup> We defined a targeted program as one that provided assistance exclusively to those persons experiencing homelessness or at risk for homelessness in fiscal year 2011. We defined a mainstream program as one that (1) was in operation as of fiscal year 2011, (2) included persons experiencing homelessness or at risk for homelessness as part of the population served, (3) provided services that benefit the homeless that are similar or complementary to those offered by targeted programs, and that (4) agency officials identified to be critical in meeting the needs of the homeless. We ultimately obtained and analyzed data for 26 targeted and 62 mainstream programs. The structured questionnaires asked questions about program goals and objectives, target populations, services offered, performance information and evaluations, and funding. To help assess the reliability of the information we received, we incorporated questions about the reliability of the programs' data and financial systems,

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<sup>3</sup>Pub. L. No. 111-139, § 21, 124 Stat. 29 (2010), 31 U.S.C. § 712 Note.

<sup>4</sup>We obtained information from eight agencies that administered targeted and mainstream programs and an additional two agencies that administered only mainstream programs.

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conducted internal reliability checks, and conducted follow-up as necessary with agency staff. While we did not verify all responses, we determined that the data used in our report were sufficiently reliable for our purposes. We excluded programs that did not meet our definitions; for example, this report does not include all mainstream programs that can serve persons experiencing homelessness because they did not meet all the criteria in our definition. To gather additional information about the programs, we met with agency officials who oversee the programs and conducted three site visits to obtain information on how local communities implement programs and deliver services (New York, New York; San Francisco, California; and Washington, D.C.). We selected these locations based on the variety of targeted programs, size of the homeless population, and geography. Finally, we reviewed relevant federal laws and regulations as well as our previous work on homelessness programs.<sup>5</sup> To review the coordination efforts of the Interagency Council and federal agencies and the extent to which the national strategic plan addresses the characteristics of an effective national strategy, we analyzed the council's coordination responsibilities, obtained examples of coordination actions from the council and federal agencies, interviewed agency officials, and analyzed the strategy. We assessed the strategy to determine how well it addressed the six desirable characteristics of an effective national strategy that we developed in previous work.<sup>6</sup>

We conducted this performance audit from June 2011 through May 2012, in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our

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<sup>5</sup>See GAO, *Rural Homelessness: Better Collaboration by HHS and HUD Could Improve Delivery of Services in Rural Areas*, [GAO-10-724](#) (Washington, D.C.: July 20, 2010); *Homelessness: A Common Vocabulary Could Help Agencies Collaborate and Collect More Consistent Data*, [GAO-10-702](#) (Washington, D.C.: June 30, 2010); and [GAO-11-318SP](#).

<sup>6</sup>See GAO, *Combating Terrorism: Evaluation of Selected Characteristics in National Strategies Related to Terrorism*, [GAO-04-408T](#) (Washington, D.C.: Feb. 3, 2004); *Financial Literacy and Education Commission: Further Progress Needed to Ensure an Effective National Strategy*, [GAO-07-100](#) (Washington, D.C.: Dec. 4, 2006); *Influenza Pandemic: Further Efforts Are Needed to Ensure Clearer Federal Leadership Roles and an Effective National Strategy*, [GAO-07-781](#) (Washington, D.C.: Aug. 14, 2007); *Maritime Security: National Strategy and Supporting Plans Were Generally Well-Developed and Are Being Implemented*, [GAO-08-672](#) (Washington, D.C.: June 20, 2008), and *National Capital Region: 2010 Strategic Plan is Generally Consistent With Characteristics of Effective Strategies*, [GAO-12-276T](#) (Washington, D.C.: Dec. 7, 2011).



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findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. See appendix I for a more detailed description of our scope and methodology.

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## Background

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### Role of Interagency Council and Recent Changes

Congress established the Interagency Council in 1987 under the McKinney-Vento Homeless Assistance Act as an independent establishment to provide federal leadership for activities to assist homeless families and individuals.<sup>7</sup> Initially the main functions of the council revolved around using public resources and programs in a more coordinated manner to meet the needs of those experiencing homelessness. From 1994 to 2000 the council operated as a working group of the White House Domestic Policy Council. An executive director, who is appointed by the council members and reports directly to the Interagency Council's chairperson, manages the daily activities of the council. Since 1987, there have been several executive directors with the most recent appointed in November 2009. Additionally, the council elects a chairperson and a vice chairperson from its members and the positions rotate among member agencies annually. The current members of the Interagency Council include the heads of 19 departments and agencies.<sup>8</sup>

The most recent reauthorization of the council occurred in 2009 when Congress enacted the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act).<sup>9</sup> The HEARTH Act included

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<sup>7</sup>The Interagency Council was established by title II of the McKinney-Vento Act, Pub. L. No. 100-77 § 201, as the "Interagency Council on the Homeless." In 2004, Congress renamed it the "United States Interagency Council on Homelessness." Pub. L. No. 108-199, Division G, § 216 (Jan. 23, 2004).

<sup>8</sup>The members of the Interagency Council are from the Departments of Agriculture, Commerce, Defense, Education, Energy, Health and Human Services, Homeland Security, Housing and Urban Development, Interior, Justice, Labor, Transportation, and Veterans Affairs; Corporation for National and Community Service; General Services Administration; Office of Management and Budget; Social Security Administration; U.S. Postal Service; and the White House Office of Faith-Based and Community Initiatives (now known as the White House Office of Faith-Based and Neighborhood Partnerships).

<sup>9</sup>Pub. L. No. 111-22 § 1001, et seq. (May 20, 2009).

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several new responsibilities and directed the council to coordinate the federal response to homelessness and create a national partnership at every level of government and with the private sector to reduce and end homelessness. The HEARTH Act also requires the council to take several actions related to coordination and information dissemination, and includes various reporting requirements. For example, the Interagency Council must

- develop and annually update a federal strategic plan to end homelessness;
- review all federal activities and programs to assist homeless individuals;
- take actions that may be necessary to reduce duplication among federal homelessness programs and activities;
- monitor, evaluate, and recommend improvements in programs and activities to assist homeless individuals conducted by federal agencies, state and local governments, and private voluntary organizations;
- provide professional and technical assistance to states, local governments, and other public and private nonprofit organizations;
- encourage the creation of State Interagency Councils on Homelessness and the formulation of jurisdictional 10-year plans to end homelessness at state, city, and county levels;
- obtain from federal agencies resources for which persons experiencing homelessness may be eligible and improvements to ensure access and develop mechanisms to ensure access by persons experiencing homelessness to programs for which they are eligible, and verify collaboration among entities within communities;
- conduct research and evaluation related to its functions;
- develop joint federal agency and other initiatives to fulfill the goals of the agency and collect and disseminate information relating to homeless individuals;
- prepare annual reports;
- develop constructive alternatives to criminalizing homelessness; and
- convene a meeting of experts to discuss all issues relevant to the definitions of “homeless” and the extent to which the differences in

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such definitions create barriers for individuals in accessing services and issue transcripts and recommendations.<sup>10</sup>

In fiscal year 2012, Congress appropriated \$3.3 million for the Interagency Council to carry out its responsibilities. In that year, the council had 18 full-time employees, with staff based in Washington, D.C. and four regional positions.

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## Definitions of Homelessness

The HEARTH Act changed the definition of homelessness for several federal programs. As described in our June 2010 report, federal programs define homelessness differently.<sup>11</sup> The HEARTH Act broadened the general definition of homelessness because it expanded who is eligible for various HUD-funded homeless assistance programs. For example, the act adds a new category of homelessness, unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes (such as the Runaway and Homeless Youth Act and the Head Start Act).<sup>12</sup> As a result, persons meeting other federal statutes' broader definitions of homelessness also can be eligible for HUD programs.

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## Our Work on Fragmentation, Overlap, and Duplication

In 2010, Congress directed us to identify programs, agencies, offices, and initiatives with duplicative goals and activities within departments and governmentwide and report annually to Congress.<sup>13</sup> In March 2011 and February 2012, we issued our first two annual reports to Congress in response to this requirement.<sup>14</sup> The annual reports describe areas in which we found evidence of fragmentation, overlap, or duplication among

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<sup>10</sup>42 U.S.C. 11313.

<sup>11</sup>See [GAO-10-702](#).

<sup>12</sup>42 U.S.C. 5701 et seq. and 42 U.S.C. 9831 et seq.

<sup>13</sup>Pub. L. No. 111-139, § 21, 124 Stat. 29 (2010), 31 U.S.C. § 712 Note.

<sup>14</sup>See [GAO-11-318SP](#) and *2012 Annual Report: Opportunities to Reduce Duplication, Overlap and Fragmentation, Achieve Savings, and Enhance Revenue*, [GAO-12-342SP](#) (Washington, D.C.: Feb. 28, 2012). Homelessness programs were not covered in detail in [GAO-12-342SP](#). We also covered homelessness programs in our follow-up to the 2011 report, see GAO, *Status of Actions Taken to Reduce Duplication, Overlap, and Fragmentation, Save Tax Dollars, and Enhance Revenue*, [GAO-12-453SP](#) (Washington, D.C.: Feb 28, 2012), 49.

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federal programs. Using the framework established in the reports, the key terms are defined as follows:

- *Fragmentation* occurs when more than one federal agency (or more than one organization within an agency) is involved in the same broad area of national interest.
- *Overlap* occurs when multiple programs have similar goals and activities, and offer similar services to similar beneficiaries.
- *Duplication* occurs when two or more agencies or programs are engaging in the same activities or providing the same services to the same beneficiaries.

For homelessness programs, we noted in the March 2011 report that better coordination of programs could minimize inefficiencies that may stem from fragmentation and overlap. We discussed the work of the Interagency Council and noted the development of its strategic plan. We concluded that while federal agencies have taken some positive steps to improve coordination of programs and reduce fragmentation and overlap, more needed to be done.

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## Homelessness Programs Address a Variety of Needs, but Result in Fragmentation and Overlap of Services

Eight agencies—HHS, HUD, the Departments of Education (Education), Labor (Labor), Justice (Justice), Veterans Affairs (VA), the Federal Emergency Management Agency (FEMA), and the General Services Administration (GSA)—administered 26 targeted homelessness programs in fiscal year 2011.<sup>15</sup> That is, they administered programs that exclusively assisted persons who were homeless or at risk for homelessness (see table 1). However, three agencies—HHS, HUD, and VA—were responsible for the majority of these programs (22 of 26). HUD was the primary agency providing funding for housing, such as emergency shelters, permanent housing, and transitional housing. HHS and VA typically operated programs or provided funding for supportive services such as health care, substance abuse treatment, and employment assistance. However, most VA programs and services are only available to men and women who have served in the military and have been discharged under honorable or general circumstances. Of the 26 programs, three programs provide

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<sup>15</sup>FEMA is an agency within the Department of Homeland Security, which is a member of the Interagency Council.

surplus federal properties to eligible homeless service providers and one program provides personal property to veterans experiencing homelessness.

**Table 1: Targeted Federal Homelessness Programs and Descriptions, Fiscal Year 2011**

Agency	Program name	Description
VA (11)	Domiciliary Care for Homeless Veterans Program	Provides residential treatment to homeless veterans with health care and social-vocational deficits.
	Homeless Providers Grants and Per Diem Program	Awards grants to community-based agencies for transitional housing, outreach, rehabilitative services, and vocational counseling and training; and offers per diem payments.
	Health Care for Homeless Veterans Program	Performs outreach to identify homeless veterans eligible for VA services and assists them in accessing appropriate health care and benefits.
	Homeless Veterans Dental Program	Provides dental care to eligible homeless veterans.
	National Call Center for Homeless Veterans	Assists homeless veterans and their families through a 24-hour hotline.
	Stand Downs	Conducts 1- to 3-day outreach events that involve a broad range of community providers. Services include food, clothing, benefits assistance, linkages to shelter and treatment programs, medical and mental health screenings, and referrals.
	Acquired Property Sales for Homeless Providers <sup>a</sup>	Offers discounted prices on VA properties acquired through foreclosure to qualified nonprofit organizations that will offer the properties as shelters to homeless veterans.
	Excess Property for Homeless Veterans Initiative	Helps distribute excess personal property, such as hats, parkas, footwear, and other items.
	Regional Office Homeless Veterans Outreach Activities	Provides information and assistance on VA benefits and services through outreach.
	Homeless Veteran Supported Employment Program	Provides vocational and employment services.
	Preventing Veteran Homelessness through Mortgage Foreclosure Assistance	Provides financial counseling for veterans with VA-guaranteed or conventional loans to help ensure that veterans receive consideration of all possible options to avoid foreclosure.
HHS (5)	Projects for Assistance in Transition from Homelessness	Provides grants to state and territories for community-based outreach, mental health, substance abuse, and other supportive services, including limited housing to individuals with serious mental illness who are experiencing or at risk of homelessness.
	Runaway and Homeless Youth Programs <sup>b</sup>	Provides temporary emergency shelter and permanent housing for youths and residential services to help them transition to self-sufficiency.
	Health Care for the Homeless	Provides outreach to homeless individuals and families to provide primary care and substance abuse services.
	Grants for the Benefit of Homeless Individuals	Provides grants to communities to expand and strengthen their treatment services for persons who are homeless or at risk of homelessness with mental health disorders, substance use disorders, or co-occurring mental and substance use disorders in coordination with stable housing programs and resources.

Agency	Program name	Description
	Services in Supportive Housing Grants	Provides treatment and supportive services to people experiencing chronic homelessness and severe mental illness or co-occurring mental and substance abuse disorders in coordination with permanent supportive housing programs and resources.
HUD (3)	Homeless Assistance Grants <sup>c</sup>	Provides emergency shelter facilities, transitional and permanent housing with supportive services, or rental assistance for homeless individuals or homeless persons with disabilities.
	Homelessness Prevention and Rapid Re-Housing Program	Provides homelessness prevention assistance and assistance to rapidly re-house persons who are homeless.
	Base Realignment and Closure Program <sup>a</sup>	Provides surplus properties, at no cost to representatives of the homeless, for homeless assistance use.
Education (1)	Education for Homeless Children and Youths	Helps ensure that homeless children and youths have equal access to free and appropriate public education and facilitates their enrollment, attendance, and success in school.
FEMA (1)	Emergency Food and Shelter Program	Supplements and expands ongoing efforts to provide shelter, food, and supportive services to needy families and individuals.
Justice (1)	Transitional Housing Assistance Grants for Victims of Sexual Assault, Domestic Violence, Dating Violence, and Stalking Program	Provides transitional housing, housing assistance, and supportive services to those fleeing domestic violence, dating violence, sexual assault, or stalking; and for whom emergency shelter services or other crisis intervention services are not sufficient.
Labor (1)	Homeless Veterans Reintegration Program	Provides services to assist in reintegrating homeless veterans into meaningful employment.
Multiple agencies (3)	HUD-VA Supportive Housing (HUD-VASH) <sup>d</sup>	Provides section 8 Housing Choice Vouchers and case management and supportive services to eligible homeless veterans.
	Veterans Homeless Prevention Demonstration Program <sup>e</sup>	Offers early intervention homelessness prevention, primarily to veterans returning from wars in Iraq and Afghanistan.
	Federal Surplus Real Property (Title V) <sup>a,f</sup>	Provides surplus federal properties that can be used to help homeless persons.

Source: GAO analysis of agency information.

Note: VA staff told us the Supportive Services for Veteran Families Program made grant agreements in September 2011, but stated no services were provided prior to the end of the fiscal year. VA staff did not complete a questionnaire for this program because they told us the program was not in operation in fiscal year 2011. Our review excludes this program.

<sup>a</sup>These programs provide different properties to eligible homeless service providers but do not directly provide services for persons experiencing homelessness.

<sup>b</sup>Runaway and Homeless Youth Programs include the Basic Center Program, Transitional Living Program, Street Outreach Program, and Maternity Group Home Program.

<sup>c</sup>Homeless Assistance Grants include the Emergency Solutions Grant Program, Supportive Housing Program, Shelter Plus Care Program, and Single Room Occupancy Program.

<sup>d</sup>HUD-VASH is jointly administered by HUD and VA.

<sup>e</sup>The demonstration program is jointly administered by HUD, Labor, and VA.

<sup>f</sup>The Federal Surplus Real Property (Title V) program is jointly administered by HHS, HUD, and GSA.

**Multiple Agencies Administered 26 Targeted Homelessness Programs and Obligated \$2.8 Billion in Fiscal Year 2010**

According to the most recently available data (fiscal year 2010), federal agencies reported obligations of \$2.8 billion for the 26 targeted programs. Individual program obligations ranged from \$475,000 to \$1.4 billion (see table 2).<sup>16</sup> HUD’s Homeless Assistance Grants, the largest program, accounted for 50 percent of overall federal spending commitments. Eight programs had obligations of more than \$100 million each, and 10 programs had obligations between \$1 million and \$100 million.

**Table 2: Federal Obligations for 26 Homelessness Programs, Fiscal Year 2010**

Agency	Program	Fiscal year 2010 obligations	Assistance through grants
HUD	Homeless Assistance Grants	\$1,379,155,000	X
FEMA	Emergency Food and Shelter Program	200,000,000	X
HHS	Health Care for the Homeless	185,066,000	X
VA	Domiciliary Care for Homeless Veterans Program <sup>a</sup>	175,979,000	
VA	Homeless Providers Grants and Per Diem Program	175,057,000	X
HUD and VA	HUD-VA Supportive Housing (HUD-VASH) <sup>b</sup>	147,046,192	
HHS	Runaway and Homeless Youth Programs	115,705,000	X
VA	Health Care for Homeless Veterans Program	109,727,000	
Education	Education for Homeless Children and Youths	65,427,000	X
HHS	Projects for Assistance in Transition from Homelessness	65,047,000	X
Labor	Homeless Veterans Reintegration Program	35,888,000	X
HHS	Grants for the Benefit of Homeless Individuals	35,560,000	X
HHS	Services in Supportive Housing Grants	32,264,000	X
VA	Preventing Veteran Homelessness through Mortgage Foreclosure Assistance	29,565,000	
VA	Homeless Veterans Dental Program	17,530,000	
Justice	Transitional Housing Assistance Grants for Victims of Sexual Assault, Domestic Violence, Dating Violence, and Stalking Program	15,304,802	X
VA	National Call Center for Homeless Veterans	2,410,000	
VA	Regional Office Homeless Veterans Outreach Activities	1,908,000	
VA	Stand Downs <sup>c</sup>	786,000	
HHS, HUD, and GSA	Federal Surplus Real Property (Title V) <sup>d</sup>	613,000	
VA	Excess Property for Homeless Veterans Initiative	475,000	

<sup>16</sup>Obligations are defined as definite commitments that create a legal liability of the government for the payment of goods and services ordered or received.

Agency	Program	Fiscal year 2010 obligations	Assistance through grants
HUD	Homelessness Prevention and Rapid Re-Housing Program <sup>e</sup>	0	X
HUD	Base Realignment and Closure Program <sup>f</sup>	0	
VA	Acquired Property Sales for Homeless Providers <sup>g</sup>	0	
VA	Homeless Veteran Supported Employment Program <sup>h</sup>	0	
HUD, Labor, and VA	Veterans Homeless Prevention Demonstration Program <sup>h</sup>	0	X
<b>Total</b>		<b>\$2,790,512,994</b>	<b>13 programs</b>

Source: Each agency reported obligation amounts to GAO.

<sup>a</sup>VA told us the amount represents direct and indirect costs including veterans' total health care costs while in the program.

<sup>b</sup>HUD and VA reported obligations of \$76 and \$71 million, respectively.

<sup>c</sup>Labor told us they have been involved in Stand Downs as well, but any funds obligated from Labor are included in the reported amount for the Homeless Veterans Reintegration Program.

<sup>d</sup>HUD told us no funds were obligated and the only costs incurred were for a contractor to update a data system. Therefore, the figure includes obligations as reported by HHS and GSA only.

<sup>e</sup>HUD told us the funds for this program, roughly \$1.5 billion, were obligated in fiscal year 2009.

<sup>f</sup>HUD told us no funds were awarded or contracted for this program.

<sup>g</sup>VA reported no obligations because the program receives foreclosed properties and sells a minimal number to nonprofit organizations that provide shelter to veterans and their families.

<sup>h</sup>VA and HUD reported that the program was new and no funds were obligated in fiscal year 2010.

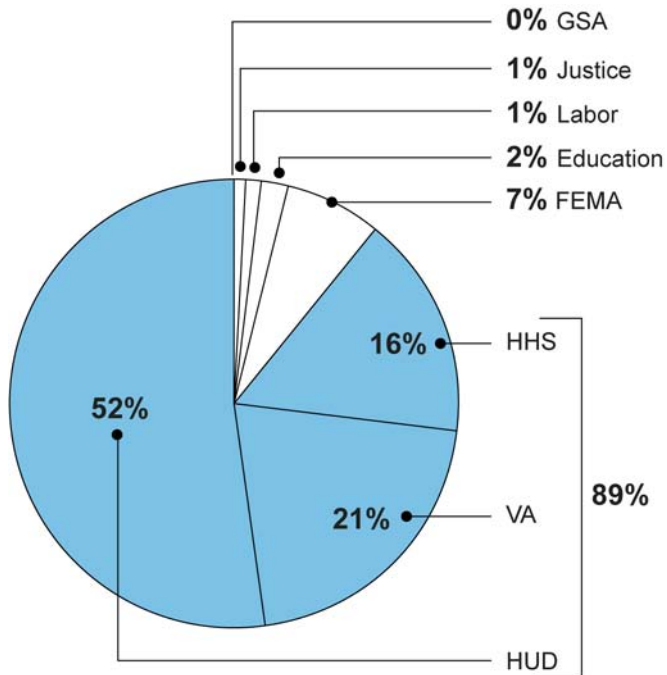
The majority of obligations were committed for grants—13 of the 26 programs offered grants, totaling about \$2.3 billion in obligations for fiscal year 2010.<sup>17</sup> These grants were generally distributed on a formula or a project basis. Formula grants are noncompetitive awards based on a predetermined formula. Project grants award funds for fixed periods of time for specific projects.

HUD, HHS, and VA administered most of the targeted programs and accounted for 89 percent of the federal funds obligated (see fig. 1).

<sup>17</sup>Most programs provide assistance through grants, meaning federal agencies provide funds to states, localities, or nonprofit organizations that in turn provide homelessness services. Some programs provide assistance through properties, meaning federal properties are transferred or sold to entities that in turn provide homelessness services.



**Figure 1: Percentage of Obligations for Homelessness Programs by Agency, Fiscal Year 2010**



Source: GAO analysis of agency obligation data.

Note: Obligations for programs administered by two or more agencies (for example, the HUD-VASH program) are included in each agency's portion of the pie chart. For instance, HUD's obligations for the HUD-VASH program are included in the 52 percent.

Finally, in addition to targeted programs, several federal agencies provide assistance through mainstream programs—programs that broadly assist low-income populations. For example, the Temporary Assistance for Needy Families, Head Start, and Public Housing programs are designed for low-income populations but provide services to people experiencing homelessness as well. See appendix II for a list of mainstream programs, descriptions, and other information.<sup>18</sup>

<sup>18</sup>As previously discussed, this report does not include all mainstream programs that can serve homeless people because some programs did not meet all the criteria included in our definition.

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## Evidence Suggests Fragmentation and Some Overlap

Figure 2 shows that multiple agencies manage several similar homelessness programs, suggesting fragmentation and some overlap. Further, agencies deliver several different types of services to persons experiencing homelessness. For example, HUD not only administers housing assistance, but also provides funding for mental health care, substance abuse treatment, and employment services. Similarly, HHS and VA administer programs that provide housing and employment assistance. Fragmentation and overlap in some programs have been caused in part by their legislative creation as separate programs under the jurisdiction of several agencies. This fragmentation of services may be advantageous because agencies can tailor programs to suit specific needs of persons experiencing homelessness. Additionally, according to HHS, fragmented services are the result of providing comprehensive care to a population with complex, varying needs. However, fragmentation can also lead to inefficiencies.

Fragmentation of services was most apparent in three agencies—HHS, HUD, and VA—that administered most of the programs and also offered the most types of services (see fig. 2). In particular, service fragmentation was most apparent for transportation and case management. According to agency staff, case management is necessary in most programs to provide linkages and referrals to other services as needed. In contrast, fragmentation was least apparent for permanent housing, income support, primary health care, and dental care services.

**Figure 2: Fragmentation of Services in Homelessness Programs across Agencies, Fiscal Year 2011**

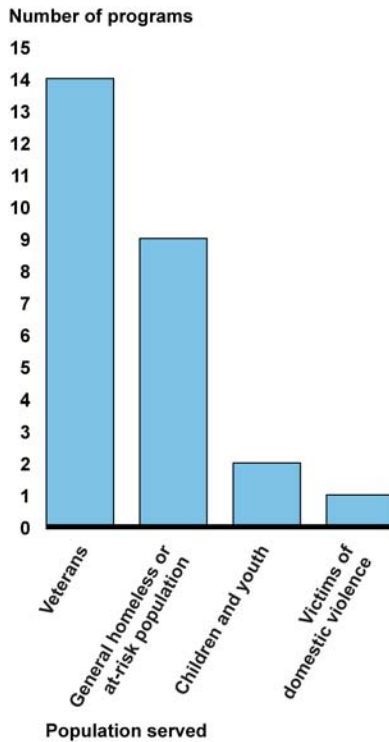
Service	Agency/Entity							
	HHS	VA	HUD	Justice	Labor	FEMA	Education	GSA
Permanent housing			●					
Transitional housing	●	●	●	●		●		
Emergency shelter	●	●	●			●		
Food assistance	●	●	●	●		●		
Primary health care	●	●						
Dental care	●	●						
Mental health care	●	●	●	●				
Substance abuse treatment	●	●	●	●				
Education	●	●		●	●		●	
Employment assistance	●	●	●	●	●			
Income support	●							
Homeless prevention	●	●	●			●		
Case management	●	●	●	●	●		●	
Outreach	●	●	●		●		●	
Transportation	●	●	●	●	●	●	●	
Property <sup>a</sup>	●	●	●					●

Source: GAO analysis of questionnaire responses.

<sup>a</sup>Programs provide different properties to eligible homeless service providers that can be used to help persons experiencing homelessness.

Some programs served the general homeless population while others assisted specific populations (see fig. 3). For example, 17 of the 26 targeted programs served specific populations, most commonly veterans (14 programs). According to questionnaire responses, while the programs exclusively served specific populations, the individuals served also may have had additional characteristics such as substance abuse disorders or disabilities. As stated previously, most VA programs and services are only available to men and women who have served in the military and have been discharged under honorable or general circumstances.

**Figure 3: Populations Served by Homelessness Programs, Fiscal Year 2011**



Source: GAO analysis of questionnaire responses.

Note: We included programs that assist chronically homeless persons in the general homeless or at-risk population.

In addition to fragmentation of services, some degree of overlap in services occurred for programs serving three distinct homeless populations—the general homeless or at-risk population, veterans, and children and youth. We differentiated between two types of services:

- *Primary services* were stated directly within a program's goals and objectives.
- *Other eligible services* were indicated by agency staff as services or activities the program is eligible to provide.

More specifically, we found two different types of overlap—instances when programs offered the same primary service to a similar population and instances when programs offered other eligible services to a similar population. Overlap tended to be more prevalent for the “other eligible services” category. However, the scope of this report did not allow us to

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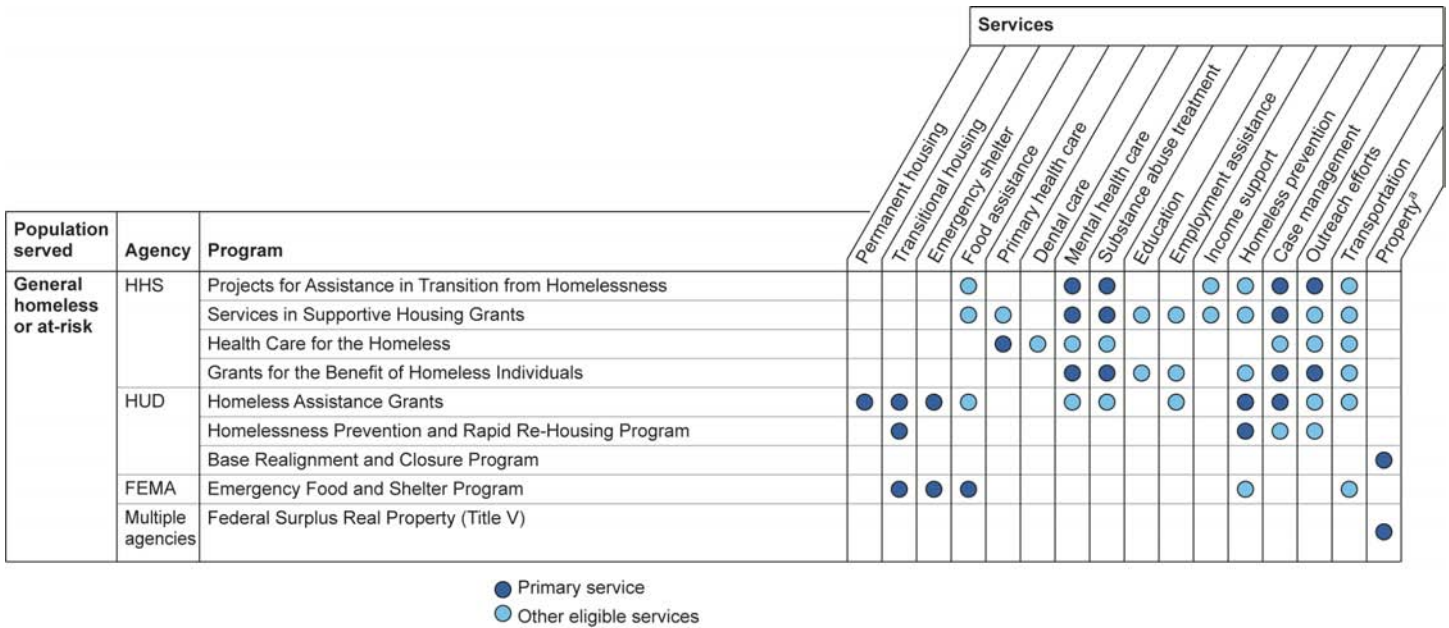
gather enough information to fully discuss the degree of overlap among homelessness programs. Agency officials provided explanations about why persons experiencing homelessness often need assistance in areas other than housing, such as health care and employment. For example, HHS staff told us that it was necessary for programs to offer several services—in particular, case management services that provide linkages and referrals to other services as needed. In addition to case management services, agency staff told us it was important for programs to conduct outreach efforts because the population was difficult to reach and the outreach helped ensure access to services. HHS staff also told us that while persons experiencing homelessness may be eligible for services provided by specific programs, resource constraints limit the availability of services. For some programs, such as HUD’s Homeless Assistance Grants or HHS’s Runaway and Homeless Youth Programs, meeting the definition of homelessness does not entitle individuals to benefits because these programs are limited by the amount of funds appropriated for them.

#### General Homeless or At-Risk Population

We found program overlap in three HHS programs that provide mental health care and substance abuse treatment as primary services (see fig. 4). According to HHS staff, the three programs have distinct differences, such as their statutory authorities, subpopulations served, or living situations.

- *Projects for Assistance in Transition from Homelessness* provides services including case management, outreach, community mental health, and substance abuse treatment services to persons typically living on the street with serious mental illnesses or co-occurring disorders (such as substance abuse disorders).
- *Services in Supportive Housing Grants* primarily provides mental health care and substance abuse treatment to individuals and families living in HUD-funded and other permanent supportive housing units.
- *Grants for the Benefit of Homeless Individuals* provides services to individuals with mental health disorders, substance use disorders, or co-occurring mental and substance use disorders and links individuals to stable housing.

**Figure 4: Overlap in Program Services to the General Homeless or At-Risk Population, Fiscal Year 2011**



Source: GAO analysis of questionnaire responses.

<sup>a</sup>These programs provide different properties to eligible homeless service providers but do not directly provide services for persons experiencing homelessness.

Overlapping programs can lead to individuals being eligible for similar services in multiple programs—as is the case with these three HHS programs. According to the Interagency Council, while it is possible that individuals may be eligible for multiple programs, it is unlikely that there is a high occurrence of individuals actually being served by multiple programs. The scope of this report did not allow us to assess whether individuals were accessing multiple programs. According to HHS staff, the agency coordinates its homelessness programs and activities with biweekly meetings that serve to update and share homelessness program information across the agency and to discuss new initiatives. According to the staff, the meetings are one way to help to ensure that HHS’s homelessness programs complement rather than duplicate one another.

### Homeless Veterans

The services of several programs for veterans overlapped (see fig. 5). According to agency staff, the programs are distinct in that they serve different subpopulations, in different settings.

- *Domiciliary Care for Homeless Veterans Program* offers mental health care and substance abuse treatment. The program is an intensive

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residential treatment program that targets veterans with severe medical conditions and psychiatric needs and operates at 44 sites across the country. As part of its services, the program assists veterans in finding transitional or permanent housing options.

- *Homeless Providers Grants and Per Diem Program* is a transitional housing program that provides supportive services for veterans living in the community and operates at roughly 600 sites and veterans may reside for up to 24 months. Veterans participating in the Homeless Providers Grants and Per Diem Program are connected with VA Medical Center services such as primary health care and other clinical services.
- *Health Care for Homeless Veterans Program* helps get homeless veterans off the streets and connects them to VA Medical Center services such as primary health care and other clinical services.
- *Homeless Veteran Supported Employment Program* uses homeless veterans, formerly homeless veterans, or those at risk for homelessness to provide rapid, individualized, competitive community job placement for currently homeless veterans. These services occur within a health care delivery system, which includes assessment of employment barriers such as medical, psychiatric, and substance abuse.
- *Homeless Veterans Reintegration Program* offers employment assistance as a primary service. The Labor program offers classroom training and job placement with the goal of placing veterans in direct employment.

**Figure 5: Overlap in Program Services to Homeless Veterans, Fiscal Year 2011**

Population served	Agency	Program	Services															
			Permanent housing	Transitional housing	Emergency shelter	Food assistance	Primary health care	Dental care	Mental health care	Substance abuse care	Education	Employment assistance	Income support	Homeless prevention	Case management	Outreach efforts	Transportation	Property <sup>a</sup>
Veterans	VA	Domiciliary Care for Homeless Veterans Program		●	●	●		●	●					●				
		Homeless Providers Grants and Per Diem Program	●		●	●		●	●	●	●			●	●	●		
		Health Care for Homeless Veterans Program	●	●	●	●		●	●	●	●			●	●			
		Homeless Veterans Dental Program					●											
		Stand Downs													●			
		Excess Property for Homeless Veterans Initiative															●	
		Regional Office Homeless Veterans Outreach Activities													●			
		Homeless Veteran Supported Employment Program									●							
		Preventing Veteran Homelessness through Mortgage Foreclosure Assistance												●	●			
		National Call Center for Homeless Veterans													●			
		Acquired Property Sales for Homeless Veterans															●	
		Labor	Homeless Veterans Reintegration Program								●	●			●	●	●	
		Multiple agencies	HUD-VA Supportive Housing (HUD-VASH)	●						●	●		●		●	●	●	
Veterans Homeless Prevention Demonstration Program										●		●	●	●	●			

- Primary service
- Other eligible services

Source: GAO analysis of questionnaire responses.

<sup>a</sup>The Excess Property for Homeless Veterans Initiative helps distribute personal property, while the Acquired Property Sales for Homeless Providers program sells properties to eligible homeless service providers that will offer the properties as shelters to homeless veterans.

### Homeless Children and Youth

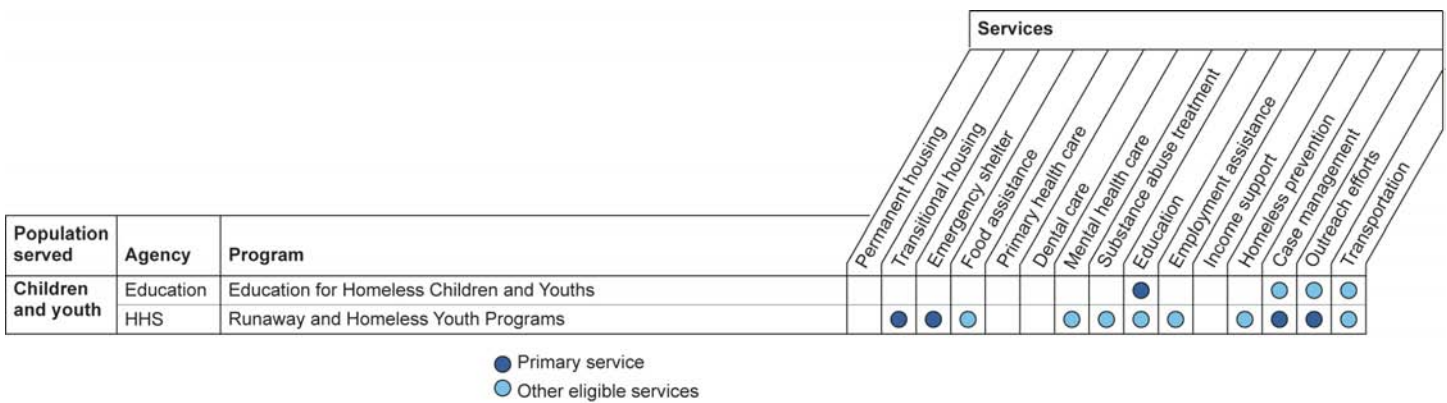
The two programs serving homeless children and youth did not offer the same primary services, but there is some overlap in other eligible services offered by these two programs (see fig. 6). Education’s program focused on offering educational services and case management to school-age children, while HHS’s Runaway and Homeless Youth Programs provided housing, case management, and outreach efforts to youth who run away from home and are living in at-risk situations.<sup>19</sup> The Runaway and Homeless Youth Programs provide services for severely at-risk youth, including pregnant and parenting teens who may not be

<sup>19</sup>Runaway and Homeless Youth Programs age eligibility requirements vary by subprogram. For example, the Basic Center Program serves youths up to age 18, while the Transitional Living Program serves youths from age 16 to age 22.



able to receive services through many other homelessness programs due to their age. According to HHS, the programs that support youth homelessness are an attempt to address the needs of this specific population.

**Figure 6: Overlap in Program Services to Homeless Children and Youth, Fiscal Year 2011**



Source: GAO analysis of questionnaire responses.

### Fragmentation and Overlap May Result in Inefficiencies

Inefficiencies as a result of fragmentation and overlap can result at multiple levels. Our body of work on fragmentation, overlap, and duplication has found that agencies often can realize a range of benefits, such as improved customer service and decreased administrative burdens and cost savings from addressing issues related to fragmentation, overlap, and duplication. However, these cost savings can be difficult to estimate in some cases because the portion of agency budgets devoted to certain programs or activities is not clear. In addition, the implementation costs that might be associated with consolidating programs, establishing collaboration mechanisms, or reducing activities, facilities, or personnel (among other variables) are difficult to estimate, or needed information on program performance or costs is not readily available.

For this report, we identified some inefficiencies that result from fragmentation and overlap, such as increased administrative costs, additional work for providers, and a confusing service delivery system for those needing help. Federal agencies dedicate staff time and resources to separately manage overlapping programs, which may increase administrative costs. For example, while HUD has taken steps to manage most of its homelessness programs under the same administrative unit and limit the amount of supportive services it provides, HHS and VA

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separately manage programs that provide similar services under different units.<sup>20</sup>

Further, fragmentation creates additional work for providers because each agency has its own application and reporting requirements. During our site visits, several local providers told us that managing multiple applications and reporting requirements was burdensome, difficult, and costly. The views of these service providers were consistent with information about administrative burden, for example, that we gathered in our previous work.<sup>21</sup> Some providers told us it was especially difficult to manage some homelessness programs because they required funding streams from various agencies, each with various reporting requirements. Moreover, according to providers, persons experiencing homelessness have difficulties navigating services that are fragmented across agencies. As a result of this, many targeted programs provide case management services because of the difficulty their clients have in identifying and accessing various services available to them due to their multiple needs.

As previously mentioned, fragmentation and overlap in some programs has been caused in part by their legislative creation as separate programs under the jurisdiction of several agencies. Additionally, programs developed incrementally over time to address the specific needs of certain segments of the homeless population. Some advantages exist to having multiple federal agencies or programs providing homelessness services. Agency officials and service providers stated that reasons why a fragmented service system existed were because the needs of people experiencing homelessness varied greatly as did the nature of the assistance they required. Similarly, agency staff and local officials stated that overlapping services and the availability of multiple programs with similar benefits helped ensure that those in need had access to the resources they needed because one program might be more accessible or better suited than another to meet the needs of a

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<sup>20</sup>HUD manages its Homeless Assistance Grants under its Office of Special Needs Assistance Programs and the HUD-VASH program under the Office of Public and Indian Housing. HHS manages some homelessness programs under the Substance Abuse and Mental Health Services Administration and others under the Administration for Children and Families and Health Resources and Services Administration. VA manages some programs under the Veterans Health Administration and others under the Veterans Benefits Administration.

<sup>21</sup>See [GAO-10-724](#).

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particular client. HHS staff told us overlapping programs helps ensure access to services because persons experiencing homelessness are not steered toward one point of entry and in contrast can access services through several points of entry. Another provider stated that it was important for persons experiencing homelessness to receive services from both targeted and mainstream programs because the ultimate goal was to house clients and have them live independently (that is, not be in need of homeless services).

Ultimately, fragmentation across agencies can create an environment in which persons experiencing homelessness are not served as efficiently and effectively as possible, making coordination across government essential. By addressing inefficiencies that result from fragmentation and overlap, agencies will be able to better leverage government resources, decrease administrative burdens, and assist persons experiencing homelessness more effectively.

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## Programs Maintain Performance Information, but Program Evaluations Are Limited

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### Targeted Programs Have Performance Data, and Efforts to Increase Information from Mainstream Programs Have Begun

The majority of targeted programs maintain performance data, which is an important component for measuring program performance. Performance measurement is the ongoing monitoring and reporting of program accomplishments, particularly progress toward pre-established goals.<sup>22</sup> Performance measures may address the type or level of program activities conducted (process), the direct products and services a program delivers (outputs), or the results of those products and services (outcomes). According to the questionnaire responses, 25 of 26 targeted programs reported that they maintained performance information such as metrics and targets for the level of performance to be achieved, or report

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<sup>22</sup>See GAO, *Performance Measurement and Evaluation: Definitions and Relationships*, [GAO-11-646SP](#) (Washington, D.C.: May 2011).

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the actual level of performance achieved (see app. III).<sup>23</sup> We asked respondents to provide examples of the types and uses of performance information collected. For instance, HHS's Services in Supportive Housing Grants program responded that it collects various data related to mental health when an individual enters the program, at 6 months into the program, and again when the individual is discharged, which enables the program to measure performance and report outcomes. VA's Domiciliary Care for Homeless Veterans Program responded that it uses a monitoring system that includes baseline information about veterans at admittance to the program and their clinical outcomes at the time of discharge.

A majority (24 of 26) of the targeted programs reported that they collected data on the number of homeless served, which is a measure of program output.<sup>24</sup> Of the two remaining programs, one program—FEMA's Emergency Food and Shelter Program—collects information on services such as meals provided or nights of lodging but not the number of homeless served. The other program—the Acquired Property Sales for Homeless Providers—did not collect data on the number of homeless served because the program transfers government properties to nonprofit organizations or other entities, which in turn provide services to persons experiencing homelessness. The program tracks the number of properties transferred.

While persons experiencing homelessness may access services through targeted and mainstream programs, the mainstream programs do not consistently collect data on services provided to this population. Less than half of the mainstream programs, 30 of 62 programs or 48 percent, indicated that they collected data on the numbers of homeless served

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<sup>23</sup>VA's Acquired Property Sales for Homeless Providers program reported that it did not collect performance information, but collected other information such as number of properties transferred.

<sup>24</sup>The data for numbers of homeless served are not comparable across programs because program staff used different approaches and reporting periods to collect this information. For example, some programs reported actual data according to annual reports from grant recipients, while others estimated the expected number of participants or reported frequency of services. Some programs collect data by fiscal year (October 1 through September 30) while other programs collect data by program year (July 1 through June 30) or other reporting period. Additionally, some programs indicated concerns with the reliability of the data for reasons such as the lack of independent verification of grantee-generated data, the possibility that the data included multiple visits by a homeless individual, or the process for collecting and submitting information.

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(see app. II for more detail). We asked respondents who indicated their programs did not collect data on homelessness to explain why not. Some responded that they did not collect data on persons experiencing homelessness because their programs did not target this population specifically. For instance, some stated that eligibility for the program was based on income levels, which would not necessarily identify persons experiencing homelessness. Other programs did not collect information on homelessness because they had a different focus such as food nutrition and collected information such as meals served instead. Also, other programs indicated that they were not required by law to collect information on an individual's housing status. For example, HHS told us by law, they cannot ask Temporary Assistance for Needy Families grantees to report on certain information, including housing status.

However, respondents for 29 of 62 programs reported that their programs had taken steps to increase the participation of persons experiencing homelessness (see app. II for more detail). For instance, the Department of Agriculture's Special Supplemental Nutrition Program for Women, Infants, and Children includes outreach to homeless shelters, social service departments, or other agencies that serve persons experiencing homelessness. HHS's Child Support Enforcement Program has collaborated with VA to increase participation of homeless veterans. Finally, HHS's Ryan White HIV/AIDS Program requires grantees to have a public planning process to prioritize services. The homeless population is included in the planning process.

As we have discussed in a previous report, collecting consistent, comprehensive, and accurate data on persons experiencing homelessness presents numerous challenges.<sup>25</sup> Such efforts could be difficult and costly. But we also noted that several mainstream programs already collect information on the housing status of individuals, and opportunities exist for building on existing systems and procedures. If collected, the more comprehensive data then could potentially be used to identify areas for increased coordination between targeted and mainstream programs and help increase the effectiveness of homelessness programs. We made recommendations to federal agencies and the Interagency Council that addressed consistent data collection

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<sup>25</sup>See [GAO-10-702](#).

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and a related issue—developing a common vocabulary for homelessness programs.

As GAO recommended, the Interagency Council has begun facilitating discussions with federal agencies about the feasibility of creating a common data standard in relation to housing status across relevant federal programs. According to the Interagency Council’s strategic plan, this effort will facilitate data exchanges and comparisons between targeted and mainstream programs and improve identification of people experiencing or at risk of homelessness. We discuss the Interagency Council’s efforts later in this report.

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### Few Efficiency or Effectiveness Evaluations of Targeted Programs Exist

Limited information exists about program efficiency or effectiveness because the majority of targeted programs have not conducted a program evaluation recently. According to our questionnaire results, 2 of 26 targeted programs reported having a program evaluation to assess efficiency or effectiveness within the last 5 years. We define “evaluation” as an individual systematic study conducted periodically or on an ad hoc basis to assess how well a program is working, typically relative to its objectives.<sup>26</sup> Program evaluations also allow for identification of actions that may improve results.

The two completed program evaluations looked at the following:

- *Labor’s Homeless Veterans Reintegration Program.*<sup>27</sup> The study examined how well the program was accomplishing its mission and meeting its goals and provided data to inform future program decisions. The evaluation focused on four main issues: (1) how common measures impacted grantee performance; (2) how Labor-funded staff positions influence grantee processes, performance, and outcomes;<sup>28</sup> (3) how performance results differ across grantee types; and (4) the characteristics of successful and unsuccessful homeless

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<sup>26</sup>See [GAO-11-646SP](#).

<sup>27</sup>ICF International and Advocates for Human Potential, *Homeless Veterans Reintegration Program Effectiveness Study*, a report prepared for the Department of Labor (Dec. 23, 2009).

<sup>28</sup>This issue specifically refers to Labor-funded positions in state workforce one-stop agencies designed to support disabled veteran and veteran employment, respectively.

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veteran job seekers in relation to employment and retention outcomes.<sup>29</sup> Labor officials told us that as a result of the study, the agency clarified the role of Labor-funded staff who work with program grantees, strengthened the language in the program application to emphasize building relationships and partnerships with local agencies that employ Labor staff, and changed the language in the program guidance to emphasize to state workforce agencies the need to provide services to homeless veterans.

- *HHS's Projects for Assistance in Transition from Homelessness.*<sup>30</sup> According to this evaluation, the legislation for this program requires that the expenditures of program grantees are evaluated at least once every 3 years to ensure they are consistent with legislative requirements and to recommend changes to program design or operations. The objectives for the evaluation were to determine if (1) services were appropriate, (2) services were well administered, and (3) outcome and process goals were achieved. The evaluation found that the program was meeting its objectives. HHS officials told us that evaluation findings are used to improve program performance, monitor, and identify trends among grant recipients and clients.

Additionally, agency staff from two other programs indicated that the agency either had an evaluation under way or was planning an evaluation. For instance, Education officials told us that a program evaluation has been under way for the Education for Homeless Children and Youths program, with the study expected to be completed in 2013. HHS officials stated that they were in the early planning stages for an evaluation of one of the components of the Runaway and Homeless Youth Programs (Transitional Living Program). The officials estimated that the evaluation would begin in fiscal year 2012 and include an analysis of 5 years of program data to determine program performance and success.

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<sup>29</sup>According to the evaluation, common measures are a consistent approach to measuring outcomes for employment programs. Labor introduced common measures to grantees in 2006 and began requiring grantees to report specific common measures during program year 2006. Labor provides regular training and technical assistance to support the use of common measures.

<sup>30</sup>MANILA Consulting Group, Inc., *The 2005 National Evaluation of the Projects for Assistance in Transition from Homelessness (PATH) Formula Grant Program, Final Report*, a report prepared for the Department of Health and Human Services (April 2009).

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Although program evaluations were limited, some agencies have conducted general research on the issue of homelessness. For example,

- *HHS's Office of the Assistant Secretary for Planning and Evaluation* is responsible for policy research, evaluation, and economic analysis. According to HHS officials, the office oversees various research projects including homelessness. For instance, in fiscal year 2011 the office conducted two homelessness research projects. One project focused on Medicaid and permanent supportive housing services for individuals experiencing chronic homelessness. The other project focused on linking services and housing assistance for homeless families and those at risk of homelessness.
- *HUD's Office of Policy, Development, and Research* is responsible for maintaining information on housing needs and existing programs and also addresses the efficacy and cost of different homeless interventions such as transitional housing and emergency shelter. According to HUD, the office plays a policy advisory role in preparing HUD's regulatory, budget, and legislative proposals and in activities such as assessing the economic effect of HUD's regulations and setting performance goals and measures.
- *VA's Northeast Performance Evaluation Center* performs program evaluation on specialized mental health care provided through VA nationally. These specialized programs include services for homeless veterans, resident treatment, work therapy programs, post-traumatic stress disorder programs, and intensive case management programs.<sup>31</sup> Additionally, *VA's National Center on Homelessness Among Veterans* has a primary goal to develop, promote, and enhance policy, clinical care research, and education to improve and integrate homeless services.

The Interagency Council maintains homelessness research and evaluation information from across the federal government and

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<sup>31</sup>The Northeast Performance Evaluation Center issues annual reports on three VA homelessness programs. The programs include the Domiciliary Care for Homeless Veterans Program, the Health Care for Homeless Veterans Program, and the Homeless Veterans Grants and Per Diem Program. According to VA officials, these reports do not by themselves represent a complete formal evaluation but are monitoring reports of program operations. The reports provide the program office with feedback regarding the specialized services offered.



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throughout the country on its website, but does not conduct research itself. According to Interagency Council staff, the council does not have the resources or the expertise to conduct research. Instead, the Interagency Council's strategic plan calls for collaborating and compiling research to better understand best practices, the cost-effectiveness of various interventions, metrics to measure outcomes, and the gaps in homelessness research. According to the 2011 update to the strategic plan, the council convened a federal interagency research group to share research information and has compiled research on its website to make information more accessible to state, local, and private sector partners.

While performance information can be helpful for monitoring whether programs were achieving desired results, program evaluations allow for comprehensive assessments. Thus, the limited evaluations of recent years make it difficult to fully assess what is working and how improvements can be made in programs addressing homelessness. It is critical for the federal agencies that carry out these programs to identify which programs are more effective in addressing the needs of persons experiencing homelessness. Understanding program performance and effectiveness is key to determining in which programs and interventions to strategically invest limited federal funds.

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## While Federal Coordination Efforts Have Increased, Strategic Plan Could Be Improved

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### Interagency Council Has Taken Steps to Enhance Coordination

The Interagency Council has taken several actions to enhance coordination and promote initiatives across government agencies. As previously discussed, the HEARTH Act, which was enacted in May 2009, directs the Interagency Council to coordinate the federal response to homelessness and create national partnerships at every level of government and with the private sector to reduce and end homelessness.<sup>32</sup> The act contains statutory functions and requirements

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<sup>32</sup>42 U.S.C §§ 11311.

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for the council, some of which relate to coordination, while others relate to monitoring or reporting requirements. While the HEARTH Act also requires the Interagency Council to take actions as necessary to reduce duplication among programs, council staff told us they do not view duplication among programs as the problem. Rather, they regard fragmentation in delivery of services at the local level and a mismatch between need and resources as the most significant issues. Therefore, the council focuses its attention on coordination efforts among its member agencies.

Based on our review of documents and discussions with council and other agency staff, the Interagency Council's actions in response to HEARTH Act requirements include the following:

- *Convened federal partners and issued a federal strategy.* Since May 2009, the Interagency Council appointed a new executive director and convened 10 full council meetings where participants focused discussions around the development and implementation of a federal strategy.<sup>33</sup> In June 2010, the council issued the first federal strategic plan.<sup>34</sup> According to the HEARTH Act, the council must update the plan annually and the first update was issued in October 2011.<sup>35</sup> Agencies have taken steps to adopt the strategy and incorporate it into their own efforts. HUD told us they incorporated the strategic plan's goals, objectives, and strategies into its annual budget process; Agency Performance Goals; and its strategic plan and performance management process. VA officials told us they developed an operating plan to help implement and incorporate the plan into their own efforts. HHS and Council officials told us plans specific to homeless children and youth are under development and expected to be discussed in June and September 2012 at Council meetings. Some member agencies do not operate homelessness programs, or administer relatively few, and therefore would not be expected to develop plans to implement the federal strategic plan.

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<sup>33</sup>The executive director was appointed in October 2009. The meetings took place in June and October 2009; February, May, November, and December 2010; and March, July, September, and December 2011.

<sup>34</sup>See U.S. Interagency Council on Homelessness, *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness* (Washington, D.C.: June 2010).

<sup>35</sup>See U.S. Interagency Council on Homelessness, *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness Update 2011* (Washington, D.C.: October 2011).

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- *Distributed information about federal programs and resources and provided professional and technical assistance.* In May 2011, the Interagency Council launched a redesign of its website and implemented a broader communication strategy that included updating newsletters and implementing a webinar series. The redesigned website includes information about programs, funding opportunities, and federal technical assistance available; abstracts of relevant research conducted in the past 10 years; and a series of fact sheets. Additionally, council staff provided professional and technical assistance through a series of webinars.
  - *Coordinated at the state and local levels.* The Interagency Council has developed several resources to help states and local communities implement strategic plans tailored to prevent and end homelessness or realign existing plans. To this end, the council issued guidance to assist local governments and communities. The Interagency Council also has encouraged the creation of state interagency councils on homelessness—a requirement of the HEARTH Act—by issuing a fact sheet and toolkit about how to start and develop these councils. An interactive state map with key facts and contacts for federal, state, and local officials is available on the Interagency Council website. Additionally, the council will have four regional coordinators throughout the country to provide professional and technical assistance to states and local communities beginning in May 2012. The regional coordinators will also participate in local, state, and regional meetings and workshops as necessary.
  - *Took steps to develop a common vocabulary.* The Interagency Council has taken initial steps to develop a common vocabulary for discussing homelessness and related terms, as recommended in our June 2010 report.<sup>36</sup> In January 2011, the council held a meeting with 85 participants from stakeholder organizations and issued a report to Congress in June 2011 that summarized feedback received during the meeting. The report notes that a common vocabulary would allow federal agencies to better measure the scope and dimensions of homelessness, and may ease program implementation and coordination. Additionally, the council held three meetings in 2011 (in August, September, and October) to discuss implementation of a common vocabulary with key federal agencies. The Interagency

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<sup>36</sup>[GAO-10-702](#).

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Council has stated implementation of a common vocabulary among its member agencies would require long-term efforts.

- *Developed joint federal agency initiatives.* The Interagency Council organized a work group, known as the Council Policy Group, which provides a regular forum for coordinating policies, programs, data, and other initiatives among council members. HHS, HUD, VA, and the Interagency Council issued joint guidance and hosted a webinar on strategies to improve the accuracy of HUD's point-in-time counts of people experiencing homelessness. HHS and VA also have been working with HUD and the Interagency Council to determine the feasibility of entering data from their respective programs into HUD's data system (Homelessness Management Information Systems, or HMIS). According to VA officials, three VA programs input data into HMIS and officials told us they were in the early stages of determining the feasibility of entering data from additional programs into HMIS. Additionally, HHS officials told us they have been working to determine the feasibility of having all grantees in the Runaway and Homeless Youth Programs enter data into HMIS. As we reported in the past, a common vocabulary would allow agencies to collect consistent data that agencies could compile to better understand the nature of homelessness.
- *Developed performance goals and metrics related to coordination.* In fiscal year 2011, the Interagency Council worked with the Office of Management and Budget to develop specific performance goals. However, more time is needed to assess the council's progress in meeting its performance goals because the council put the goals in place in fiscal year 2012. One of the council's two performance goals relates to coordination of federal resources; that is, coordinating the federal government's response to homelessness to maximize the reach and impact of federal resources. Additionally, the council established two strategies and five metrics to help accomplish the coordination goal.

Several federal agency officials told us that the Interagency Council has been effective in coordinating the federal response to homelessness across agencies. For instance, HUD officials told us that the council effectively disseminates information, lessons learned, and best practices. HHS told us that the council has led efforts to obtain a better understanding of homeless youth by convening a workgroup to determine gaps in services and resources for this population.

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While federal coordination efforts have increased or were under way, local service providers with whom we spoke during our site visits said greater coordination still was needed, providers suggested activities such as promoting the movement toward permanent supportive housing, providing more technical assistance, having a greater role in promoting research around prevention methods, and increasing attention around how changes in federal health care will impact local communities. Interagency Council staff told us resource constraints have affected their ability to coordinate the federal response to homelessness and fulfill HEARTH Act requirements. They noted that improving coordination would be a long-term effort.

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### Opportunities Exist to Further Improve the National Strategy

The federal strategic plan to prevent and end homelessness has served as a useful and necessary first step in increasing agency coordination and focusing attention on ending homelessness, but lacks some key characteristics desirable in a national strategy. In previous work, we identified six characteristics desirable for an effective national strategy. (See table 3 in app. I for a detailed description of each characteristic.)<sup>37</sup> The federal strategic plan and its update fully address two characteristics of an effective national strategy and partially address the remaining four (see fig. 7).

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<sup>37</sup>See [GAO-04-408T](#), [GAO-07-100](#), [GAO-08-672](#), and [GAO-12-276T](#).

**Figure 7: Extent to Which the Strategic Plan to Prevent and End Homelessness Addresses Characteristics of an Effective National Strategy, as of May 2012**

Desirable characteristic	Strategic plan	Area where improvement needed
(1) Clear purpose, scope, and methodology	●	Not applicable
(2) Detailed discussion of problems and risks	●	Not applicable
(3) Desired goals, objectives, activities, and performance measures	●	Priorities, milestones, and performance measures
(4) Description of future costs and resources needed	●	Costs and resource allocation
(5) Organizational roles, responsibilities, and coordination	●	Delineation of roles and responsibilities for federal agencies
(6) Description of integration with other entities and implementation	●	Clarification of integration with other entities and plans to implement the strategy

- Addresses
- Partially addresses
- Does not address

Source: GAO analysis of strategic plan to prevent and end homelessness.

More specifically, the plan addresses the following characteristics:

- *Clear purpose, scope, and methodology.* The strategy effectively addresses why it was produced, the scope of its coverage, and the process by which it was developed. For example, the HEARTH Act mandated that the Interagency Council develop the federal strategic plan and update it annually. The council worked with its 19 member agencies and state, local, and private sector partners to develop the strategy. The plan clearly articulates the methodology and states that the council held meetings with representatives of several organizations, mayors, and congressional staff, and also received input from leaders of state and regional interagency councils, and thousands of comments from the public, as part of the process of developing the plan.
- *Detailed discussion of problems and risks.* The strategy provides a detailed discussion of problems and risks, including national data points, relating to homelessness in the United States. The Interagency Council primarily used data from HUD and Education to provide statistics and information about the number of persons experiencing homelessness. Additionally, in terms of risks, the plan includes a discussion about the consequences of homelessness. For example, the plan states that children in families experiencing homelessness

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have high rates of acute and chronic health problems and a majority of them were exposed to violence.

The strategic plan partially addresses the following characteristics:

- *Desired goals, objectives, activities, and performance measures.* The strategy effectively describes the desired overall goal, which is to prevent and end homelessness. It includes four key goals: (1) finish the job of ending chronic homelessness in 5 years; (2) prevent and end homelessness among veterans in 5 years; (3) prevent and end homelessness for families, youth, and children in 10 years; and (4) set a path to ending all types of homelessness. Additionally, the strategy includes 10 objectives and 52 strategies that align with the four goals. However, the strategy does not discuss or identify priorities and milestones that would help translate the goals and objectives into action. For example, it does not rank or prioritize which objectives or strategies need greater attention and focus. While the plan does align the objectives with federal agencies, it does not identify specific activities for each member agency to implement. Although the Interagency Council's implementation plan for the strategic plan assigns the plan's 10 objectives and 52 strategies to specific council staff, it does not set priorities, milestones, or differentiate which objectives and strategies require greater focus by specific member agencies. Additionally, while the strategy includes six performance measures that align well with the goals and objectives, the plan lacks specific activities and corresponding performance metrics that the council and member agencies could use to measure their progress in taking actions to implement the plan.<sup>38</sup> Furthermore, the strategy does not describe the overall framework for accountability and oversight, such as how federal agencies would be held accountable for implementing the plan and taking actions. Without additional performance metrics corresponding to actions taken to implement the plan, the Interagency Council, federal agencies, and Congress may

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<sup>38</sup>Four performance metrics track annual changes in the number of (1) persons experiencing homelessness, (2) individuals experiencing chronic homelessness, (3) veterans experiencing homelessness, and (4) families with children experiencing homelessness, and align well with the strategy's four broad goals. The two additional performance measures track increases in the number of permanent housing units and increases in the employment and participation in mainstream programs by persons experiencing homelessness. These two measures align well with 2 of the plan's 10 objectives that directly correspond to providing affordable housing and improving access to mainstream programs.

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face difficulty in measuring incremental progress and ultimately determining whether the strategic plan was successful in terms of helping coordinate federal efforts.

- *Description of future costs and resources needed.* The plan generally identifies numerous resource and investment needs, but lacks a discussion of the costs and resources needed to help achieve the 10 objectives and put into action the 52 strategies. For instance, it does not discuss the costs, sources of investment, and types of resources needed. Further, an effective strategy would provide guidance to implementing parties about how to manage resources and investments accordingly—and begin to address difficult but critical issues of who pays, and how such efforts will be funded and sustained in the future. For instance, an effective strategy would help prioritize future costs and resources for research and program evaluations. Some budget figures are included in the October 2011 update to the strategic plan. For example, the update includes information about enacted appropriations for targeted homelessness programs; however, it does not discuss in detail the costs and sources of investments needed in the future to help implement objectives such as providing affordable or permanent supportive housing or improving access to mainstream programs. The strategy states the development of the plan was guided by key principles, including cost-effectiveness, but contains relatively little discussion about the cost-effectiveness of specific federal programs. Program evaluations can help identify which programs are most effective in addressing the needs of persons experiencing homelessness and better target federal resources. Without a discussion of resources, investments, and priorities, the Interagency Council, federal agencies, and Congress could face difficulties in focusing scarce resources on the most cost-effective programs and initiatives.
- *Organizational roles, responsibilities, and coordination and integration with other entities.* The strategy specifically states that the Interagency Council will provide federal leadership coordinating homelessness efforts and that the council's staff should work in partnership with the 19 member agencies. For each of the objectives, the plan identifies federal leadership, but does not include priorities for each agency and does not provide actions or activities that the agencies should take to help achieve the goals and objectives. Without discussion and delineation of which entities will implement the strategy, their roles and responsibilities, and mechanisms for coordinating efforts, the ability of agencies to implement the goals and objectives of the strategy will be diminished.



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Overall, the plan effectively describes goals and objectives. In discussions with council staff they told us in implementing the strategic plan the council is setting priorities, determining how to measure programs and results, and identifying mechanisms to hold federal and nonfederal partners accountable. However, these efforts need to be transparent to ensure accountability, inform Congress, and enhance federal efforts to prevent and end homelessness.

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## Conclusions

The economic downturn and governmental resource constraints of recent years have focused attention on the problem of homelessness and on ways to help ensure that federal programs efficiently and effectively use their resources to address that problem. But the wide range of federal homelessness programs has resulted in some degree of fragmentation and overlap of services provided and populations served. Specifically, we found that HUD, HHS, Labor, and VA have multiple programs that offer similar services to similar beneficiaries. The VA offers multiple programs to veterans that are eligible for receiving these services as a result of military service. While there may be advantages to fragmentation and overlap, they also entail inefficiencies that programs may not be able to afford in an era of resource constraints and ongoing coverage gaps. Our work has shown that fragmented and overlapping federal programs result in administrative burdens, additional work for local service providers, and a confusing service delivery system for beneficiaries. However, because our work identified specific areas of fragmentation and overlap among targeted homelessness programs, it also suggests that agencies can use this and other information to better target their efforts and coordinate to help reduce or eliminate inefficiencies that result from fragmentation and overlap. Additionally, limited performance evaluations make it difficult to fully assess what is working and how improvements can be made in programs addressing homelessness. While such evaluations can be resource-intensive, their benefits include helping agencies identify how to better structure or operate programs more efficiently, which in turn may help realize cost savings.

Since 2009, one entity—the Interagency Council—has had an explicit mandate to coordinate the federal response to homelessness. The council has taken several actions to increase coordination across federal agencies, and its issuance of the first national strategic plan to prevent and end homelessness was a positive first step in improving coordination across agencies. The strategy is important because it broadly describes the federal approach to preventing and ending homelessness. The strategy sets goals and is an evolving effort, as the HEARTH Act requires

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that it be updated annually. However, the plan does not specifically address priorities, milestones, resources, and a clear delineation of roles and responsibilities for federal agencies to help achieve results. Without a detailed and transparent discussion of these elements, the plan's usefulness as a management tool for ensuring accountability and achieving results is diminished. In addition, without descriptions of the resources needed to achieve the goals, policymakers lack information that would be helpful in allocating resources.

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## Recommendations for Executive Action

Based on our review, we are making two recommendations:

The Interagency Council and the Office of Management and Budget—in conjunction with the Secretaries of HHS, HUD, Labor, and VA—should consider examining inefficiencies that may result from overlap and fragmentation in their programs for persons experiencing homelessness. As a starting point, the agencies could use the program information from this report to further analyze the degree and effects of overlap and fragmentation. The results of this assessment could be used to take actions to reduce any identified inefficiencies and therefore better leverage their resources. Actions may include streamlining services offered within specific programs or by agencies, identifying programs that could benefit from further research or evaluations, or consolidating programs or services to reduce administrative costs.

To help prioritize, clarify, and refine efforts to improve coordination across agencies, and improve the efficiency and effectiveness of federal homelessness programs, the Interagency Council, in consultation with its member agencies, should incorporate additional elements into updates to the national strategic plan or other planning and implementation documents to help set priorities, measure results, and ensure accountability. Such elements should be transparent and may include milestones, a clear delineation of roles and responsibilities as related to the plan's objectives, and corresponding performance metrics.

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## Agency Comments and Our Evaluation

We provided a draft of this report to the Secretaries of Agriculture, Education, Health and Human Services, Homeland Security, Housing and Urban Development, Justice, Labor, and Veterans Affairs; the Acting Administrator of the General Services Administration; the Commissioner of the Social Security Administration; and the Executive Director of the Interagency Council for comment. We provided an informational copy to the Office of Management and Budget. We received comments from

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HHS, Homeland Security, HUD, Labor, VA, and the Interagency Council that are reproduced in appendixes IV through IX, respectively. HHS, Justice, VA, and the Interagency Council provided technical comments that were incorporated, as appropriate. The Departments of Agriculture and Education, GSA, and the Social Security Administration did not provide any comments.

VA explicitly agreed with our first recommendation to work with the Interagency Council and other federal agencies that provide services to homeless veterans to identify opportunities to streamline programs and services. HHS, HUD, and Labor did not explicitly agree or disagree with this recommendation. They offered additional comments, which are reproduced in appendixes IV, VI, and VII, respectively. HHS stated there currently are not enough federal resources to meet the needs of the homeless population and close the services gap, especially for those with substance use and mental health disorders. While this report identified federal funding for homelessness programs in fiscal year 2010, we did not assess the availability of federal funding compared to the overall need. The identification of overlap or fragmentation in this report does not mean that funds to existing homelessness programs should be cut or eliminated but raises questions about whether existing funds are being used efficiently. HHS also commented about the importance of a “no wrong door” approach that enables people to access needed services and supports through multiple entry points. While this report suggests some evidence of overlapping services, the report also acknowledges that overlapping programs help ensure access to services because persons experiencing homelessness are not steered toward one point of entry. HUD disagreed with our assertion about the extent of fragmentation across federal programs that serve the homeless. As a result of this comment, we clarified in the report that evidence suggests fragmentation and some overlap. As previously defined, fragmentation is more than one agency involved in the same broad area of national interest (i.e., homelessness). This report identified multiple agencies managing several similar homelessness programs, suggesting fragmentation. Additionally, we acknowledge that federal agencies have taken steps to enhance coordination, which we have previously stated is important to help minimize inefficiencies. Labor offered additional comments about its efforts in relation to employment of homeless veterans and stated it will continue to work closely with the Interagency Council and other federal partners.

The Interagency Council did not explicitly agree or disagree with the first or second recommendations. However, it provided additional comments

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about each. Regarding the first recommendation, the Council stated it is not within the agency's authority to streamline overlapping services. However, our recommendation states the Council should work in conjunction with key agencies and as a starting point use the program information from this report to further analyze the degree and effects of overlap and fragmentation. Streamlining services is one of several potential actions that agencies could take after further analyzing the degree and effects of overlap and fragmentation. As the entity mandated to coordinate the federal response to homelessness, the Interagency Council has an important role in facilitating the efforts of member agencies to address potential inefficiencies related to fragmentation and overlap. Regarding the second recommendation, the Council stated that in implementing the federal strategic plan it has been setting priorities, determining how to measure progress and results, and identifying mechanisms to hold federal and nonfederal partners accountable. However, the council was unable to provide us with documentation that these activities were occurring. Therefore, we did not revise our second recommendation because these additional implementation efforts must also be transparent to help ensure accountability and measure the plan's progress. The Interagency Council made additional points, including

- commenting that our report did not reflect the strong commitment to research and to implement innovative practices across member agencies. Our report acknowledges that some agencies have conducted general research on the issue of homelessness, including specific research offices at HHS, HUD, and VA. The focus of our work was to identify whether programs had been evaluated and specifically whether program evaluations had occurred in the last 5 years.
- questioning whether there was a specific understanding of "at risk" for homelessness in determining whether two programs met the criteria we used for targeted programs. In identifying programs, we defined a targeted program as one that (1) was in operation as of fiscal year 2011 and (2) provided assistance exclusively to those persons experiencing homelessness or at risk for homelessness. While we agree there may be subjectivity in interpreting "at risk" for homelessness, we shared our list of programs with agency officials and they agreed the programs met the criteria for a targeted program.
- asserting that property disposition programs would be better examined separately from targeted programs. The council further

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stated that including more programs in our review made it appear that there is more fragmentation and overlap than actually exists and they disagreed with our assertion about the extent of fragmentation. As previously stated, we clarified in the report that evidence suggests fragmentation and some overlap. This report states that 3 of 26 targeted programs provide federal surplus properties to eligible homelessness service providers and one program provides excess personal property to homeless veterans. In assessing the extent of fragmentation, overlap, and duplication of federal homelessness programs, we did not distinguish between different types of federal assistance and therefore included programs providing grants; direct assistance; or the sale, exchange, or donation of property or goods.

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We are sending copies of this report to the Secretaries of Agriculture, Education, Health and Human Services, Homeland Security, Housing and Urban Development, Justice, Labor, and Veterans Affairs; the Acting Administrator of the General Services Administration; the Commissioner of the Social Security Administration; the Executive Director of the Interagency Council; the Office of Management and Budget; and appropriate congressional committees. In addition, the report is available at no charge on the GAO website at <http://www.gao.gov>.

If you or your staffs have any questions regarding this report, please contact me at (202) 512-8678 or [cackleya@gao.gov](mailto:cackleya@gao.gov). Contact points for our Offices of Congressional Relations and Public Affairs may be found on the last page of this report. GAO staff that made major contributions to this report are listed in appendix X.



Alicia Puente Cackley  
Director, Financial Markets and  
Community Investment

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# Appendix I: Objectives, Scope, and Methodology

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The objectives of our report were to determine (1) the number of and funding levels for federal homelessness programs and the extent to which fragmentation, overlap, and duplication exists; (2) whether the programs have been evaluated; and (3) actions of the U.S. Interagency Council on Homelessness (Interagency Council) and federal agencies to coordinate federal efforts and the extent to which the federal strategic plan to prevent and end homelessness is an effective strategy.

Overall, we reviewed relevant laws and regulations, particularly the McKinney-Vento Homeless Assistance Act and the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act). We reviewed relevant literature and past reports on federal homelessness programs, including the Congressional Research Service's report on targeted federal homelessness programs and recent legislation.<sup>1</sup> We interviewed federal agency officials and staff from the Interagency Council to gather information on federal homelessness programs and information about coordinating homelessness efforts. We reviewed documents related to the programs and the council's coordination efforts and national strategic plan. We also conducted site visits to New York, New York; San Francisco, California; and Washington, D.C. We selected these locations based on the variety of targeted programs, size of the homeless population, and geography. In all three locations, we interviewed stakeholders, including local government officials; federal agency officials; and representatives of local service providers that offer services to homeless veterans, children and youth, women and families, and the general homeless population. While the number of site visits was too small to generalize information about the programs or assess the Interagency Council's overall efforts to coordinate a federal response to homelessness, the observations and perspectives the various stakeholders expressed were sufficient to provide examples about the programs and suggest that the Interagency Council has begun to take steps to coordinate federal responses to homelessness.

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<sup>1</sup>Congressional Research Service, *Homelessness: Targeted Federal Programs and Recent Legislation* (Washington, D.C.: July 19, 2011).

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## Federal Homelessness Programs and the Extent of Fragmentation, Overlap, and Duplication

### Program Identification

To identify both targeted and mainstream federal homelessness programs, we developed a comprehensive list of programs based on legislative and agency information. First, through several searches, we identified programs that potentially met our definitions of targeted and mainstream. We defined a targeted program as one that (1) was in operation as of fiscal year 2011 and (2) provided assistance exclusively to those persons experiencing homelessness or at risk for homelessness. We defined a mainstream program as one that (1) was in operation as of fiscal year 2011, (2) included persons experiencing homelessness or at risk for homelessness as part of the population served, (3) provided services that benefit the homeless similar or complementary to those offered by targeted programs, and that (4) agency officials identified to be critical in meeting the needs of the homeless. We excluded programs that did not directly help persons experiencing homelessness, such as those that exclusively provided technical assistance, referrals, or administrative functions. In developing our comprehensive list, we reviewed the *Catalog of Federal Domestic Assistance*, the Interagency Council's previous reports and information, and previous GAO and Congressional Research Service reports on homelessness, and searched the websites of the 19 member agencies of the Interagency Council.<sup>2</sup> Our initial review revealed that 5 of the 19 member agencies did not operate any targeted or mainstream programs. As a result, we excluded these five agencies from our study.<sup>3</sup> In total, our initial search identified more than 150 potential programs (48 targeted and 106 mainstream) that 14 federal agencies administered.

Second, we excluded 4 of the 19 member agencies and their mainstream programs because they were not deemed critical to meeting the needs of

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<sup>2</sup>See [GAO-11-474R](#), [GAO-10-724](#), and [GAO-10-702](#).

<sup>3</sup>The five member agencies that do not operate targeted or mainstream programs are the Departments of Commerce and Transportation, the Office of Management and Budget, the U.S. Postal Service, and the White House Office of Faith-Based and Community Initiatives.

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the homeless.<sup>4</sup> Thus, the number of agencies in the scope of this study decreased from 14 to 10. Next, we shared our comprehensive list of programs with agency officials and asked officials to explain why programs should remain on the list and if any should be added or deleted. For example, some programs were removed from the list because they were not in operation in fiscal year 2011 or were part of a larger program already listed. During the initial meetings with agency officials, we asked officials to clarify program names, descriptions, and services offered. To obtain program-specific information, we sent a total of 105 (35 targeted, 70 mainstream) structured questionnaires to the 10 agencies. These questionnaires are described in detail below. Our refined list included 100 unique programs of which three were jointly administered by two or more agencies.<sup>5</sup> We made additional refinements to our list of targeted and mainstream programs based on questionnaire responses. For instance, we excluded additional programs or characterized them differently from our initial list based on the program official's input on whether the programs met the criteria for targeted or mainstream. As a result, we identified a total of 26 targeted and 62 mainstream programs.

### Questionnaires on Federal Homelessness Programs

More specifically, we developed two different questionnaires, one for targeted programs and one for mainstream programs. The targeted questionnaire was lengthier and included more in-depth questions about program information and funding levels (for example, about program goals and objectives, target populations, services offered, performance information and evaluations, numbers of homeless served, and funding information). The mainstream questionnaire included questions about services offered, target populations, whether the programs collect data on the number of persons experiencing homelessness or at risk for homelessness, and whether steps had been taken to increase participation of persons experiencing homelessness in mainstream

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<sup>4</sup>These four member agencies are the Departments of Defense, Energy, and Interior and the Corporation for National and Community Service.

<sup>5</sup>The Departments of Housing and Urban Development (HUD) and Veterans Affairs (VA) administer HUD-VA Supportive Housing (HUD-VASH); HUD, the Department of Labor, and VA administer the Veterans Homeless Prevention Demonstration Program, and the General Services Administration and the Department of Health and Human Services (HHS) and HUD administer Federal Surplus Real Property (Title V). For the HUD-VASH program, two agencies received questionnaires. Additionally, for the demonstration program and Federal Surplus Real Property (Title V) three agencies received questionnaires. As a result, the number of questionnaires we sent is higher than the number of programs.



programs. To minimize errors arising from differences in how questions might be interpreted and to reduce variability in responses, we conducted pretests with two different agencies in September 2011. We obtained feedback during the pretests and revised the questionnaires to improve organization and clarity. We then used the revised instrument to conduct a second round of pretests in October 2011 with the same two agencies.

We sent the questionnaires to the relevant agency contacts in November 2011 as attachments to an e-mail message, which provided instructions, contact information for GAO staff, and the time frame for completing the questionnaire. Most of the questions required close-ended responses, such as checking boxes that best fit a description of the populations served by each program. Some questions were open-ended, allowing the officials to provide more in-depth details on program objectives, eligibility criteria, and beneficiary eligibility. Respondents returned completed questionnaires by e-mail, and we reviewed each program's questionnaire to ensure agency staff had provided complete and consistent responses. From November 2011 through January 2012, we made telephone calls to agency staff and sent follow-up e-mails, as necessary, to clarify responses. We received completed questionnaires for 26 targeted and 62 mainstream programs.

For the 26 targeted programs, we also collected obligations and enacted appropriations data, as available. We asked the agency staff to report on obligations—defined as definite commitments that create a legal liability of the government for the payment of goods and services ordered or received. Each of the 26 targeted programs provided obligations data for fiscal years 2008 through 2010, as available. A few programs were new or had not obligated any funds in fiscal years 2008 through 2010; therefore, they reported zero obligation dollars. We also collected enacted appropriations data for fiscal years 2008 through 2011. In several cases, programs were not able to provide enacted appropriations data because agency staff told us the program did not have a specific appropriation and funding for the program originated in a larger appropriation line item. As a result of not having complete enacted appropriations data, we excluded such data from this report. We did not collect funding-level information on mainstream programs because the programs serve the general low-income population, not solely persons experiencing homelessness, and therefore funding for mainstream programs is not an appropriate estimate of federal funding spent on persons experiencing homelessness.

We used an independent contractor to keypunch the questionnaire data and provide us with a comprehensive data file. We verified a selected

sample of keypunched records with their corresponding questionnaires and found that less than 0.5 percent of the data items had random keypunch errors that were not corrected during data processing. We used standard descriptive statistics to analyze responses. We performed data checks to identify missing fields, outliers, and inappropriate answers, and followed up with agency staff as necessary. To assess the reliability of data provided in the questionnaires, we incorporated questions about the reliability of the programs' data and financial systems, conducted internal reliability checks, and conducted follow-up as necessary. While we did not verify all responses or have access to each agency's data and financial systems to fully assess the reliability of the data provided or the systems themselves, on the basis of our questionnaire design and follow-up procedures, we determined that the data used in this report were sufficiently reliable for our purposes. Finally, GAO data analysts independently verified all data analysis programs and calculations for accuracy.

#### Determining the Extent of Fragmentation, Overlap, and Duplication

To determine the extent of fragmentation, overlap, and duplication we compared data from the 26 targeted programs to comprehensively look at homelessness programs across the federal government and used the following definitions:

- *Fragmentation* occurs when more than one federal agency (or more than one organization within an agency) is involved in the same broad area of national interest.
- *Overlap* occurs when multiple programs have similar goals and activities, and offer similar services to similar target populations.
- *Duplication* occurs when two or more agencies or programs are engaging in the same activities or providing the same services to the same beneficiaries.

We previously had reported that the wide range of homelessness programs that federal agencies offer resulted in a fragmented service system.<sup>6</sup> To further determine the extent of fragmentation, we used the questionnaire data to identify the number of agencies that deliver similar or the same services. For example, five federal agencies each administer

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<sup>6</sup>[GAO-11-318SP](#).

programs that offer transitional housing assistance. To determine overlap, we identified the number of programs with similar services (such as housing or employment assistance) to similar populations (such as the general homeless population, homeless veterans, or homeless children and youth). To further determine overlap, we then used the services offered to determine each program's "primary services" and other eligible services. We designated those services stated within a program's goals and objectives, as reported in the *Catalog of Federal Domestic Assistance* or in the questionnaire, as primary services. In instances of overlapping primary and other eligible services to similar target populations, we reviewed the data with agency officials and asked clarifying questions about each program's primary and other eligible services and obtained information about differences between programs. However, the scope of this report did not allow us to gather enough information to fully discuss the degree of overlap among homelessness programs. To determine the extent of duplication, in instances when two or more programs engaged in the same primary service to similar target populations, we reviewed programmatic information, statutory authorities, and held meetings with program staff to determine whether the programs were providing the same services to the same beneficiaries.

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## Performance Information and Program Evaluations

We also used the targeted questionnaire discussed above to obtain information to answer our second objective about performance information and program evaluations. For the 26 targeted programs, we collected performance information and asked agency staff if a program evaluation had been conducted in the past 5 years. For instance, the questionnaire asked whether the programs had performance metrics, targets for the level of performance to be achieved, reporting of actual level of performance achieved, and what other data the agency collected on program performance. Additionally, the questionnaire asked program staff to describe the performance metrics, targets, reporting, or other data and submit relevant documentation (that is, submit documents to us describing the performance information and the program's success in meeting any performance metrics within the last 3 years). Further, the questionnaire asked whether targeted programs had an efficiency or effectiveness evaluation completed within the past 5 years and to submit documents to us about any evaluation's findings. We generally defined

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“evaluation” as an individual systematic study conducted periodically or on an ad hoc basis to assess how well a program was working.<sup>7</sup>

For the two programs that reported having had an evaluation within the past 5 years, we reviewed each report’s objectives, scope, key findings and recommendations made. However, we did not independently assess the quality of these reviews. Finally, we interviewed program staff to obtain information on how the agency uses performance information and program evaluation findings, as appropriate. We did not collect performance information or program evaluations for mainstream programs because these programs were designed to assist the general low-income population and would not necessarily track or monitor program performance or outcomes related to persons experiencing homelessness.

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## Coordination Actions and the National Strategy

To review the actions of the Interagency Council and federal agencies to coordinate federal efforts, we analyzed the council’s coordination responsibilities, obtained examples of coordination actions and activities from the council and key federal agencies, and interviewed agency officials. We reviewed the HEARTH Act and identified functions and duties as they relate to coordinating the federal response to homelessness. For instance, coordination refers to a joint activity bringing together two or more agencies or entities. We identified actions such as issuing and updating the federal strategic plan to end homelessness; providing assistance to states, local governments, and nonprofit organizations; and developing joint federal agency and other initiatives to fulfill the goals of the Interagency Council, as coordination duties. We interviewed Interagency Council staff and asked them to provide evidence of actions taken to fulfill requirements of the HEARTH Act. We reviewed relevant documents such as a report to Congress on developing a common vocabulary, congressional budget justifications, performance and accountability reports, guidance on creating effective state interagency councils, and agendas for various meetings held by the council. Additionally, our questionnaire to targeted programs asked agency staff whether the agency or program offices coordinated or collaborated with other federal agencies or programs to plan, facilitate, or

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<sup>7</sup>For more information on how we have defined performance information and program evaluation, see [GAO-11-646SP](#).

implement programs and examples of how this was done. Finally, during our site visits, we asked local service providers, local officials, and federal program staff to provide examples of coordination activities the Interagency Council and federal agencies have undertaken.

To determine the extent to which the national strategic plan to prevent and end homelessness is an effective strategy, we analyzed the national strategy and gathered feedback on it from federal agencies. We obtained copies of the 2010 national strategy, the 2011 update to the national strategy, and an implementation plan that indicates which Interagency Council staff were responsible for specific items within the strategy. We assessed the strategy by benchmarking it against our prior work identifying the six desirable characteristics of an effective national strategy (see table 3). We have used this methodology in several past reports.<sup>8</sup>

**Table 3: Summary of Desirable Characteristics for a National Strategy**

Desirable characteristic	Description
(1) Purpose, scope, and methodology	Addresses why the strategy was produced, the scope of its coverage, and the process by which it was developed.
(2) Problem definition and risk assessment	Addresses the particular national problems and threats the strategy is directed towards.
(3) Goals, subordinate objectives, activities, and performance measures	Addresses what the strategy is trying to achieve, steps to achieve those results, as well as the priorities, milestones, and performance measures to gauge results.
(4) Resources, investments, and risk management	Addresses what the strategy will cost, the sources and types of resources and investments needed, and where resources and investments should be targeted based on balancing risk reductions with costs.
(5) Organizational roles, responsibilities, and coordination	Addresses who will be implementing the strategy, what their roles will be compared to others, and mechanisms for them to coordinate their efforts.
(6) Integration and implementation	Addresses how a national strategy relates to other strategies' goals, objectives, and activities, and to subordinate levels of government and their plans to implement the strategy.

Source: GAO.

We assessed the federal strategic plan to prevent and end homelessness according to the six characteristics and provided a rating for each characteristic. Similar to our other reports that used these six characteristics, we gave ratings of “addresses,” “partially addresses,” or

<sup>8</sup>See [GAO-04-408T](#), [GAO-07-100](#), [GAO-07-781](#), [GAO-08-672](#), and [GAO-12-276T](#).

“does not address.” According to our methodology, a strategy addresses a characteristic when it explicitly cites all, or nearly all, elements of the characteristic, and has sufficient specificity and detail. A strategy partially addresses a characteristic when it explicitly cites one or a few of the elements of a characteristic, and the documents have sufficient specificity and detail. It should be noted that the partially addresses category includes a range that varies from explicitly citing most, but not all, of the elements to citing as few as one of the elements of a characteristic. A strategy does not address a characteristic when it does not explicitly cite or discuss any element of a characteristic, any references are either too vague or general to be useful, or both.

We conducted this performance audit from June 2011 to May 2012 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

# Appendix II: Mainstream Programs That Persons Experiencing Homelessness Can Access

Persons experiencing homelessness may receive assistance through mainstream programs that are designed for low-income people generally. We defined a mainstream program as one that (1) was in operation as of fiscal year 2011, (2) included persons experiencing homelessness or at risk for homelessness as part of the population served, (3) provided services that benefit the homeless similar or complementary to those offered by targeted programs, and that (4) agency officials identified to be critical in meeting the needs of the homeless. This report does not include all programs that can serve persons experiencing or at risk for homelessness because some programs that can do so did not meet all the criteria in our definition. Table 4 summarizes 62 mainstream programs that met the above definition. In response to our questionnaire (see appendix I), mainstream programs reported whether they collected data on the number served and steps taken to increase participation of persons experiencing homelessness.

**Table 4: Mainstream Programs That Persons Experiencing Homelessness Can Access**

Program name	Description	Collect data on homeless served	Steps taken to increase participation
<b>Department of Agriculture (11)</b>			
Child and Adult Care Food Program	Provides snacks and meals to low-income children participating in after school, weekend, or holiday activities such as a tutoring program or after school childcare.	X	X
Emergency Food Assistance Program	Provides food to local agencies, usually food banks, which in turn, distribute the food to soup kitchens and food pantries that directly serve the public.		
Food Distribution Program on Indian Reservations	Provides food to low-income households living on Indian reservations, and to American Indian households.		
Hunger Free Communities Grants	Provides grants to assess community hunger problems, develop new resources to achieve hunger-free communities, or both.		
Multi-Family Housing	Provides permanent affordable housing.		
National School Lunch Program and School Breakfast Program	Allows eligible children to receive free or reduced-price meals during the school year.	X	
Senior Farmers' Market Nutrition Program	Provides low-income seniors with coupons that can be exchanged for eligible foods at farmers' markets, roadside stands, and community-supported agriculture programs.		
Single-Family Housing	Provides permanent affordable housing.		

**Appendix II: Mainstream Programs That  
Persons Experiencing Homelessness Can  
Access**

<b>Program name</b>	<b>Description</b>	<b>Collect data on homeless served</b>	<b>Steps taken to increase participation</b>
Special Supplemental Nutrition Program for Women, Infants and Children	Provides nutritious foods, healthy eating information, and health-care referrals to help protect the health of women, infants, and children who are at nutritional risk.		X
Summer Food Service Program	Provides free breakfasts and lunches to children during the summer months at participating schools, summer camps, churches, and community organizations that are designated by their states as sponsor programs. Some participating programs are connected with supervised activities in which children also participate.		
Supplemental Nutrition Assistance Program	Provides food benefits issued via debit cards to low-income households that can be used to purchase food from participating retail stores.		
<b>Department of Education (2)</b>			
Individuals with Disabilities Education Act Program, Parts B and C	Provides services and improves results for infants, toddlers, children and youth with disabilities, including those with disabilities who are homeless.		X
Title I, Part A, Improving Basic Programs Operated by Local Educational Agencies	Provides financial assistance to local educational agencies and schools with high numbers or high percentages of children from low-income families to help ensure that all children meet challenging state academic standards.	X	
<b>Department of Health and Human Services (15)</b>			
Access to Recovery	Provides discretionary funds to states, territories, and tribal organizations to establish new or expand existing voucher programs that promote client choice for substance abuse treatment and recovery support services.	X	
Child Support Enforcement Program	Helps families by promoting family self-sufficiency and child well-being.		X
Children's Health Insurance Program	Provides health insurance to children in families with very low income.		
Community Mental Health Services Block Grant	Provides and encourages the development of creative and cost-effective community-based care for people with serious mental disorders.	X	X
Community Services Block Grant	Funds a network of community action agencies that provides services and activities to reduce poverty, including services to address employment, education, better use of available income, housing assistance, nutrition, energy, emergency services, health, and substance abuse needs.	X	
Family Violence Prevention and Services Grant Program	Assists state agencies, territories, and Indian tribes in the provision of shelter to victims of family violence and their dependents, and for related services, such as emergency transportation and child care.		X



**Appendix II: Mainstream Programs That  
Persons Experiencing Homelessness Can  
Access**

<b>Program name</b>	<b>Description</b>	<b>Collect data on homeless served</b>	<b>Steps taken to increase participation</b>
Head Start	Provides school readiness by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services to enrolled children and families.	X	X
Health Center Program	Provides comprehensive, primary health care services to medically underserved communities and vulnerable populations. Health centers are community-based organizations that serve populations with limited access to health care.	X	X
Healthy Start	Increases access and utilization of health-care services for low- income women during pregnancy and in the months following delivery in areas with high infant mortality and shortages of health-care providers.	X	
John H. Chafee Foster Care Independence Program	Assists current and former foster care youths achieve self-sufficiency. Provides short-term housing, education, employment and job training, and case management.		
Medicaid	Provides health care coverage to low-income individuals and families.		X
Ryan White HIV/AIDS Program	Provides HIV-related services for those who do not have sufficient health-care coverage or financial resources for coping with HIV.	X	X
Social Services Block Grant	Assists states in delivering social services directed toward the needs of children and adults.		
Substance Abuse Prevention and Treatment Block Grant	Provides substance abuse prevention, early intervention, treatment, and recovery support services for individuals, families, and communities impacted by substance abuse and substance use disorders.	X	
Temporary Assistance for Needy Families	Provides temporary cash assistance and services for low-income families with children.		X
<b>Department of Housing and Urban Development (8)</b>			
Community Development Block Grant	Addresses a wide range of unique community development needs.	X	
HOME Investment Partnerships Program	Expands the supply of affordable housing and increases the capacity of state and local governments and nonprofit organizations in developing such housing.		
Housing Choice Voucher Program (Section 8)	Assists very low-income families, the elderly, and persons with disabilities to afford decent, safe, and sanitary housing in the private market.	X	X
Housing Counseling Program	Provides funding to support free or low-cost advice related to buying a home, renting, default, foreclosure avoidance, credit issues and reverse mortgages.	X	X

**Appendix II: Mainstream Programs That  
Persons Experiencing Homelessness Can  
Access**

<b>Program name</b>	<b>Description</b>	<b>Collect data on homeless served</b>	<b>Steps taken to increase participation</b>
Housing Opportunities for Persons with AIDS	Funds may be used for a wide range of housing, social services, program planning, and development costs.	X	
Native American Housing Assistance and Self Determination Act	Provides loan guarantees to Indian tribes for private market loans to develop affordable housing. The act provides a formula-based grant program as well.		
Public Housing Program	Provides decent and safe rental housing for eligible low-income families, the elderly, and persons with disabilities.	X	X
Section 811 Supportive Housing for Persons with Disabilities	Allows persons with disabilities to live as independently as possible in the community by increasing the supply of rental housing with the availability of supportive services.		
<b>Department of Justice (5)</b>			
Drug Court Discretionary Grant Program	Funds the development, implementation, and enhancement of drug treatment courts in state and local jurisdictions. Services may include substance abuse and mental health treatment, employment, job training, and education.		
Justice and Mental Health Collaboration Program	Provides grants and assistance to states and local government agencies to tackle the problem of serious mental illness among the nation's nonviolent offenders.		
Promoting Child and Youth Safety: Chicago Safe Place Program	Provides resources to the Youth Network Council with the purpose of promoting youth safety by preventing victimization of Chicago's unaccompanied and homeless youth through the provision of a network of resources.		X
Second Chance Act Program	Provides funding to assist the re-entering population of adults and adolescents from state and local correctional facilities.		
Services to Advocate for and Respond to Youth	Provides mental health and case management services to youth victims of domestic violence, dating violence, sexual assault, and stalking.	X	
<b>Department of Labor (12)</b>			
Disabled Veterans Outreach Program	Provides intensive services to meet the employment needs of disabled veterans and other eligible veterans, with the maximum emphasis directed toward serving those who are economically or educationally disadvantaged, including homeless veterans, and veterans with barriers to employment.	X	
Indian and Native American Employment and Training Program	Provides funds for employment and training services provided by organizations serving Indians and Native Americans.	X	
Job Corps	Provides career technical training and educational services for low-income students, ages 16-24.	X	X

**Appendix II: Mainstream Programs That  
Persons Experiencing Homelessness Can  
Access**

<b>Program name</b>	<b>Description</b>	<b>Collect data on homeless served</b>	<b>Steps taken to increase participation</b>
Local Veterans Employment Representative	Conducts outreach to employers and engages in advocacy efforts with hiring executives to increase employment opportunities for veterans, encourage the hiring of disabled veterans, and generally assist veterans to gain and retain employment.	X	
National Farmworker Jobs Program	Provides funding to community-based organizations and public agencies to offer job training and employment assistance for migrant and seasonal farmworkers.	X	X
Reintegration of Ex-Offenders	Provides employment and training services for adult prisoners 18 and older returning home and juvenile offenders and at-risk youth ages 14-24.	X	X
Senior Community Service Employment Program	Helps unemployed, low-income older individuals gain the skills they need to find and sustain employment in the workforce while they participate in useful community service activities.	X	
Veterans' Workforce Investment Program	Provides services to assist in reintegrating eligible veterans into meaningful employment within the labor force and to stimulate the development of effective service delivery systems that will address the complex problems facing eligible veterans.	X	
Wagner-Peyser Employment Service	Provides employment-related labor exchange services, including but not limited to, job search assistance, job referral and placement assistance for job seekers, re-employment services to unemployment insurance claimants, and recruitment.		X
Workforce Investment Act Adult Program	Provides workforce investment services to adults to increase their employment, retention in employment, and earnings, and also support their occupational skill attainment and career advancement.	X	
Workforce Investment Act Youth Program	Provides workforce investment services to low-income youth who meet specific eligibility categories.	X	X
Youth Build	Serves low-income youth between the ages of 16 and 24. Strong emphasis is placed on leadership development and community service.	X	
<b>Department of Veterans Affairs (5)</b>			
Compensated Work Therapy Program	Provides employment and training and case-management services to veterans whose vocational lives have been disrupted by mental illness, substance abuse, or homelessness.	X	X

**Appendix II: Mainstream Programs That  
Persons Experiencing Homelessness Can  
Access**

<b>Program name</b>	<b>Description</b>	<b>Collect data on homeless served</b>	<b>Steps taken to increase participation</b>
Disability Compensation and Non-Service Connected Pension	Provides disability compensation benefits to veterans because of injuries or diseases that happened while on active duty, or were made worse by active military service. Pension is an income-based monthly benefit paid to veterans with honorable wartime service who are 65 or older or who are permanently and totally disabled due to disability that is not related to military service.	X	X
Healthcare for Reentry Veterans	Addresses the community reentry needs of incarcerated veterans. The program goals are to prevent homelessness, reduce the impact of medical, psychiatric, and substance abuse problems upon community readjustment, and decrease the likelihood of reincarceration for those leaving prison.	X	X
Vet Center	Provides counseling, outreach, and referral services to eligible combat veterans and active duty servicemembers to help them make a satisfying post-war readjustment to civilian life. Family members of eligible veterans are also eligible for Vet Center services.	X	X
Veterans Justice Outreach	Provides outreach services to veterans in contact with the justice system through encounters with police, jails, and courts. The goal of the program is to provide timely access to VA services for eligible justice-involved veterans to prevent homelessness and avoid the unnecessary criminalization of mental health and other problematic clinical issues among veterans.	X	X
<b>General Services Administration (1)</b>			
Federal Surplus Personal Property Donation Program	Enables certain nonfederal organizations to obtain personal property that the federal government no longer needs and can benefit the community. Surplus property can include all types and categories such as food, clothing, beds, medical supplies, furniture, and a host of other items.		X
<b>Social Security Administration (3)</b>			
Social Security Disability Insurance	Provides benefits based on a worker's prior earnings. Dependents, such as spouses and children, of disabled workers also may receive benefits.		X
Supplemental Security Income	Provides basic income support to needy individuals who are blind, disabled, or who are aged 65 or older and have limited or no other income.		X
Social Security Retirement	Provides benefits based on a worker's prior earnings and retirement age.		

Source: GAO analysis of agency information and questionnaire responses.

# Appendix III: Performance Information for 26 Targeted Programs

In their responses to our questionnaire (see app. I), almost all of the targeted programs (25 of 26) replied they maintained performance information such as metrics and targets for the level of performance to be achieved, or reported the actual level of performance achieved for their respective programs (see table 5). The specific type of performance measures they maintained varied. More than half of the programs maintained performance metrics information (15 of 26), and almost half maintained targets for the level of performance (12 of 26). And almost all indicated that they reported information on actual performance (23 of 26).

**Table 5: Performance Information Collected, by Program**

Agency	Program	Performance metrics	Targets for the level of performance	Reporting of actual performance	Other data
VA	Domiciliary Care for Homeless Veterans Program	X	X	X	X
VA	Homeless Providers Grants and Per Diem Program	X	X	X	X
VA	Health Care for Homeless Veterans Program	X			X
VA	Homeless Veterans Dental Program			X	X
VA	National Call Center for Homeless Veterans			X	X
VA	Stand Downs			X	X
VA	Acquired Property Sales for Homeless Providers <sup>a</sup>				
VA	Excess Property for Homeless Veterans Initiative				X
VA	Regional Office Homeless Veterans Outreach Activities			X	X
VA	Homeless Veteran Supported Employment Program			X	X
VA	Preventing Veteran Homelessness through Mortgage Foreclosure Assistance	X	X	X	X
HHS	Projects for Assistance in Transition from Homelessness			X	
HHS	Runaway and Homeless Youth Programs	X	X	X	
HHS	Health Care for the Homeless	X		X	X
HHS	Grants for the Benefit of Homeless Individuals	X	X	X	X
HHS	Services in Supportive Housing Grants	X	X	X	X
HUD	Homeless Assistance Grants	X	X	X	X

**Appendix III: Performance Information for 26 Targeted Programs**

<b>Agency</b>	<b>Program</b>	<b>Performance metrics</b>	<b>Targets for the level of performance</b>	<b>Reporting of actual performance</b>	<b>Other data</b>
HUD	Homelessness Prevention and Rapid Re-Housing Program	X	X	X	X
HUD	Base Realignment and Closure Program	X	X	X	X
Education	Education for Homeless Children and Youths	X	X	X	X
FEMA	Emergency Food and Shelter Program			X	X
Justice	Transitional Housing Assistance for Victims of Domestic Violence, Stalking, or Sexual Assault			X	X
Labor	Homeless Veterans Reintegration Program	X	X	X	X
Multiagency	HUD-VA Supportive Housing (HUD-VASH)	X	X	X	X
Multiagency	Veterans Homeless Prevention Demonstration Program			X	X
Multiagency	Federal Surplus Real Property (Title V)	X		X	X
<b>Total</b>		<b>15</b>	<b>12</b>	<b>23</b>	<b>23</b>

Source: GAO analysis of questionnaire responses.

<sup>a</sup>VA's Acquired Property Sales for Homeless Providers program reported that it did not collect performance information.

# Appendix IV: Comments from the Department of Health and Human Services



DEPARTMENT OF HEALTH & HUMAN SERVICES

OFFICE OF THE SECRETARY

Assistant Secretary for Legislation  
Washington, DC 20201

**MAY 1 2012**

Alicia Puente Cackley  
Director, Financial Markets  
and Community Investments  
U.S. Government Accountability Office  
441 G Street NW  
Washington, DC 20548

Dear Ms. Cackley:

Attached are comments on the U.S. Government Accountability Office's (GAO) correspondence entitled: "Homelessness: Fragmentation and Overlap in Programs Highlight the Need to Identify, Assess, and Reduce Inefficiencies" (GAO-12-491).

The Department appreciates the opportunity to review this draft section of the report prior to publication.

Sincerely,

A handwritten signature in black ink that reads "Jim R. Esquea".

Jim R. Esquea  
Assistant Secretary for Legislation

Attachment

**GENERAL COMMENTS OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS) ON THE GOVERNMENT ACCOUNTABILITY OFFICE'S (GAO) DRAFT REPORT ENTITLED, "HOMELESSNESS: FRAGMENTATION AND OVERLAP IN PROGRAMS HIGHLIGHT THE NEED TO IDENTIFY, ASSESS, AND REDUCE INEFFICIENCIES" (GAO-12-491)**

The Department appreciates the opportunity to comment on this draft report.

HHS agrees that there may be some duplication and fragmentation of services among federal programs that target individuals who are homeless or at-risk of homelessness. However, HHS recommends that GAO address the following critical issues that impact the availability of appropriate homeless services in concluding the report.

The emphasis on identifying areas of overlap and duplication of services among the cited agencies does not recognize the gap between current capacity and magnitude of need. Despite the efforts of current federal programs providing homeless services (GAO is reviewing 26) and total federal funding (GAO's figure is \$2.8 billion), there currently are not enough federal resources to meet the needs of the homeless population and close the services gap, especially for those with substance use and mental health disorders. For example, refer to the following information from HUD and the U.S. Conference of Mayors:

In 2010, nearly 37 percent of all homeless persons reported a disability, and persons with disabilities are 2.5 times more likely to become homeless.<sup>[1]</sup> Persons with mental illnesses and/or substance use disorders accounted for 46 percent of the sheltered adults in the 2010 point-in-time count completed annually by the U.S. Department of Housing and Urban Development.<sup>[2]</sup> When mayors of 29 U.S. cities were asked to identify the three main causes of homelessness among unaccompanied individuals, mental illness and the lack of services tied with substance abuse and the lack of services as the third most significant cause.<sup>[3]</sup>

Therefore, eliminating programs for the purpose of reducing "duplicated" services would result in decreased access to services for individuals with mental health and substance use disorders. In the present system, individuals may seek services from a number of sources (e.g., providers, agencies) according to their circumstances, needs and preferences. In an unduplicated system (e.g., where there is one strictly defined and limited eligibility approach), it is likely that persons would be strictly matched to programs via eligibility criteria. For example, a veteran would be served only by the VA rather than receive services from a program that for them potentially would be more convenient or appropriate.

The document does not distinguish between programs which have time-limited services from those that are ongoing. For example, SAMHSA's Grants for the Benefit of Homeless Individuals (GBHI) and Services in Supportive Housing (SSH) programs are funded for no more than 5 years, whereas HRSA's Health Care for Homeless programs are continually funded.

<sup>[1]</sup> U.S. Department of Housing and Urban Development (2011). The 2010 Annual Homeless Assessment Report to Congress, p. 16-17.

<sup>[2]</sup> U.S. Department of Housing and Urban Development (2011). The 2010 Annual Homeless Assessment Report to Congress, p. 18.

<sup>[3]</sup> U.S. Conference of Mayors (2011). *Hunger and Homelessness Survey: A Status Report on Hunger and Homelessness in America's Cities. A 29-City Survey.*



**GENERAL COMMENTS OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS) ON THE GOVERNMENT ACCOUNTABILITY OFFICE'S (GAO) DRAFT REPORT ENTITLED, "HOMELESSNESS: FRAGMENTATION AND OVERLAP IN PROGRAMS HIGHLIGHT THE NEED TO IDENTIFY, ASSESS, AND REDUCE INEFFICIENCIES" (GAO-12-491)**

The document does not indicate the importance of workforce issues in considering the roles of the cited programs. First, the current workforce is inadequate relative to the need. Second, it is critical that the workforce be trained specifically to work with persons who are homeless in order to understand contextual issues. For example, compliance with medication regimens can be impeded by inability to properly store medications; lack of identification impedes eligibility to insurance and entitlement programs, and so forth. Housing providers need a different skill set than mental health and substance abuse providers. There is a benefit to having overlapping staff, in addition to overlapping services, to ensure a comprehensive approach to covering the needs of homeless individuals.

On page 6, the report notes that better coordination of programs could minimize inefficiencies. SAMHSA is currently participating with the U.S. Interagency Council on Homelessness (USICH) to better understand the array of funding and services available for individuals experiencing homelessness – including our nation's youth. SAMHSA supports the expansion of these important efforts and will participate in all future endeavors to coordinate across the federal government.

HHS recommends highlighting the need to establish an integrated coordinated care system beginning with outreach and moving to treatment, supportive housing and on-going recovery support.

HHS recommends acknowledging the importance of a "no wrong door" approach that enables people to access needed services and supports through multiple entry points and respects variation in individual preferences, geographic, and cultural differences.

As noted on page 14, SAMHSA administers three programs that provide mental health services and substance abuse services for individuals experiencing homelessness. In so doing, SAMHSA coordinates its cross-center homeless activities through an established team responsible for the oversight of the homelessness and housing grant and contract portfolio that ensures that strong coordination and guidance is provided for statutory program requirements (e.g., Projects for Assistance in Transition from Homelessness (PATH) and GBHI programs), collaboration with key federal partners and various program activities. The cross-agency team seeks to ensure that duplication is minimized and programs are administered in a coordinated fashion.

SAMHSA's homeless programs are designed to address the specific needs of different homeless populations and form an integrated continuum of care approach. In complying with statutory requirements for the PATH and the GBHI programs, the services are not duplicative. Rather, they are customized to include outreach, case management, clinical treatment, recovery support services and follow-up, which are individualized, appropriate, and needed for the varied and complex needs of persons who experience homelessness. As such, SAMHSA's programs are not clearly categorized as *General Homeless* or *At-risk population*.

**GENERAL COMMENTS OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS) ON THE GOVERNMENT ACCOUNTABILITY OFFICE'S (GAO) DRAFT REPORT ENTITLED, "HOMELESSNESS: FRAGMENTATION AND OVERLAP IN PROGRAMS HIGHLIGHT THE NEED TO IDENTIFY, ASSESS, AND REDUCE INEFFICIENCIES" (GAO-12-491)**

Finally, we want to reiterate that, although *Opening Doors* does not include a written implementation plan, HHS has been working with ICH staff and our federal partners to implement *Opening Doors*. The Department has participated in several workgroups charged with identifying a specific approach to meeting one of the goals, objectives, or strategies in the Plan. The most recent example of this work is an interagency workgroup co-chaired by ICH and HHS/ACYF. This group meets weekly with the goal of identifying actions that can be taken now and in the future to understand and end youth homelessness.

# Appendix V: Comments from the Department of Homeland Security

U.S. Department of Homeland Security  
Washington, D.C. 20528



**Homeland  
Security**

April 26, 2012

Ms. Alicia Puente Cackley  
Director, Financial Markets and Community Investments  
U.S. Government Accountability Office  
441 G Street, NW  
Washington, DC 20548

Re: Draft Report GAO-12-491, "HOMELESSNESS: Fragmentation and Overlap in Programs Highlight the Need to Identify, Assess, and Reduce Inefficiencies"

Dear Ms. Cackley:

Thank you for the opportunity to review and comment on this draft report. The U.S. Department of Homeland Security (DHS) appreciates the U.S. Government Accountability Office's (GAO's) work in planning and conducting its review and issuing this report.

The Department is pleased to note GAO's mention of the Federal Emergency Management Agency's Emergency Food and Shelter Program (EFSP) in the report. The EFSP is an important program that supplements and expands the ongoing efforts of local social service organizations throughout our country in all States and territories to provide food, shelter, and supportive services to families and individuals with emergency economic needs. For example, during fiscal year 2010, the EFSP provided 181,143,820 meals and 5,943,526 nights of lodging, and paid 1,232,072 rent/mortgage and 331,408 utility payments for people experiencing, or at risk of, homelessness and hunger. We also noted the report does not contain any recommendations directed to DHS.

DHS remains committed to working with its partners throughout all levels of government, law enforcement, private industry, and the public to ensure the safety, security, and resilience of our Nation. Again, thank you for the opportunity to review and comment on this report. We look forward to working with you on future Homeland Security issues.

Sincerely,

A handwritten signature in black ink, appearing to read "Jim H. Crumpacker".

Jim H. Crumpacker  
Director  
Departmental GAO/OIG Liaison Office

# Appendix VI: Comments from the Department of Housing and Urban Development



OFFICE OF COMMUNITY PLANNING  
AND DEVELOPMENT

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

May 1, 2012

Ms. Alicia Puente Cackley, Director  
Financial Markets and Community Investments  
U.S. Government Accountability Office  
441 G Street, NW  
Washington, DC 20548

Dear Ms. Cackley:

Thank you for the opportunity to comment on the Government Accountability Office's (GAO) draft report entitled, *Homelessness: Fragmentation and Overlap in Programs Highlight the Need to Identify, Assess, and Reduce Inefficiencies* (GAO-12-491) (May 2012). The draft report recommends that the U.S. Interagency Council on Homelessness (USICH), in conjunction with HUD and other federal agencies, consider taking actions to reduce inefficiencies, such as streamlining overlapping services and identifying programs that would benefit from further research or evaluations.

The draft report contends that the federal response to homelessness is fragmented, and that overlap among various programs has led to inefficient program administration and service delivery. GAO recommends that agencies consider actions such as streamlining services offered within specific programs, identifying programs that could benefit from further research, or consolidating programs or services to reduce administrative costs.

HUD agrees that improved collaboration and coordination across the federal government is essential. However, HUD disagrees with GAO's assertion regarding the extent of fragmentation across federal programs that serve the homeless. The work that HUD is doing as a result of the *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness* (Strategic Plan) is making a significant impact on the way that housing and services are being provided to serve persons experiencing homelessness. HUD has incorporated the Strategic Plan's goals, objectives, and strategies into its annual budget process, its competitive NOFA for homeless programs, Agency Performance Goals, HUD's Strategic Plan, and HUDStat—the Department's performance management process. As a result, these goals and strategies are being incorporated into local decisionmaking by federal grantees and local interagency councils on homelessness. Furthermore, the level of engagement is unprecedented between HUD Secretary Donovan, U.S. Department of Veterans Affairs (VA) Secretary Shinseki, U.S. Department of Health and Human Services (HHS) Secretary Sebelius, and the USICH.

#### HUDStat

In October 2010, the Department launched HUDStat to track progress on Agency Performance Goals, identify inefficiencies within programs, and develop solutions or action

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

steps to ensure that HUD's administration of its programs are streamlined and effective. In addition to ensuring that HUD is collaborating across its internal offices, other federal agencies and grantees have been invited to participate in meetings, as appropriate. For example, HUD included the VA, USICH, and local Public Housing Agencies (PHAs) in discussions on meeting goals and improving the HUD-VA Supportive Housing (HUD-VASH) program. HUD and VA developed a joint Agency Performance Goal (APG) to align with achieving the Strategic Plan's goal to end veterans' homelessness by 2015; this is monitored through a shared HUDStat semiannual review. HUDStat sessions on all homelessness-related APGs include the participation of USICH so that relevant cross-agency information and experiences are part of the conversation.

HUDStat demonstrates that the analysis of data, combined with focused attention on replicating successes and solving the identified problems, improves agency performance. The quarterly meetings, led by Secretary Donovan, evaluate each Agency Performance Goal and encourage ongoing collaboration between offices within the Department and with other federal agencies.

#### **HUD-VASH**

The HUD-VASH program combines HUD's Housing Choice Voucher rental assistance, administered through its Office of Public and Indian Housing (PIH), for homeless Veterans with case management and clinical services, provided by VA community-based medical centers. Along with PIH and VA, HUD's Office of Special Needs Assistance Programs (SNAPS), which administers HUD's homeless programs, determine where to allocate vouchers based on need (number of homeless veterans) and local performance. Since 2008, this partnership has provided permanent housing and services for 37,395 homeless veterans and their families. HUD and VA meet regularly to ensure that homeless veterans are identified and housed as quickly as possible. As problems with the process or poorly performing sites are identified, HUD and VA meet to develop solutions. Efforts to streamline the administrative processes have significantly reduced the amount of time required between referral and lease-up of a veteran family.

#### **Data Collection Efforts**

The Strategic Plan is the first comprehensive approach to end homelessness nationwide. In it, the Obama Administration set goals to end chronic and veteran homelessness by 2015, family and youth homelessness by 2020, and a set path to end all types of homelessness. HUD's role is vital in setting goals and targets by providing data from Point-in-Time (PIT) counts and Homeless Management Information Systems (HMIS) which track progress on achieving the goals of the Strategic Plan.

In 2010, the VA began participating in the PIT count effort to obtain more accurate data on homeless veterans. Further, both VA and HHS are adopting HMIS as a tool to collect client-level data. In the revised HMIS Data Standards, currently in clearance, both Departments were consulted to ensure that the systems would capture their needed measurements. USICH has also formed an interagency task force to identify opportunities for federal agencies to align the language used in discussing homelessness and, subsequently, the way that each collects data.

**Veteran's Homeless Prevention Demonstration Program**

The purpose of the Veterans Homelessness Prevention Demonstration Program (VHPD) is to explore ways the federal government can offer early intervention homelessness prevention. This 3-year pilot is a partnership of HUD, VA, Department of Labor (DOL), and local service providers. As the lead agency, HUD received \$10 million in funding to award grants for the provision of housing assistance and supportive services to veterans and their families who are homeless or at-risk of homelessness. The VA received \$5 million in funding to provide and coordinate outreach and to ensure veterans engage in VA treatment, services and benefits. Although DOL has not received dedicated funding for this program, it assists veterans in gaining access to mainstream education and job training programs.

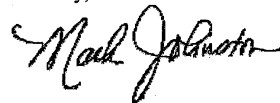
**HEARTH Implementation**

The most significant example at HUD of reducing fragmentation and overlap in homelessness programs is the congressional passage of and signing by President Obama of the Homeless Emergency and Rapid Transition to Housing (HEARTH) Act of 2009. The HEARTH Act amended and reauthorized the McKinney-Vento Homeless Assistance Act with substantial changes including a consolidation of HUD's various competitive grant programs into a single program. This consolidation, when fully implemented, will significantly reduce the overlap and administrative burden that exists with three distinct programs.

In conclusion, while the Department agrees with GAO that federal agencies that administer homeless programs should continue to coordinate their efforts, HUD believes that significant progress has already been made by Congress and the Administration to coordinate programs and policies—where allowed by statute—to minimize inefficiencies to better serve homeless men, women, and children.

The Department appreciates the opportunity to respond to this report.

Sincerely,



Mark Johnston  
Deputy Assistant Secretary  
for Special Needs

# Appendix VII: Comments from the Department of Labor

U.S. Department of Labor

Office of the Assistant Secretary for  
Veterans' Employment and Training  
Washington, D.C. 20210



**MAY 1 2012**

Mr. Paul Schmidt  
Assistant Director  
Financial Markets and Community Investment  
U.S. Government Accountability Office  
441 G. Street, N.W.  
Washington, D.C. 20548

Dear Mr. Schmidt:

Thank you for the opportunity to review the Government Accountability Office (GAO) draft report entitled "*Homelessness: Fragmentation and Overlap in Programs Highlight the Need to Identify, Assess, and Reduce Inefficiencies (GAO-12-491)*". The report is both important and timely considering the many challenges faced by those in America who are homeless, the impact that the recession has had on them, the Hearth Act, and the longer term implications for the homeless.

The Department of Labor (DOL) continues to focus on the employment of homeless veterans. Through the Homeless Veterans Reintegration Program (HVRP), the DOL provides employment services to homeless veterans through grants to community-based organizations throughout the country. This program is unique because it is the only Federally-mandated homeless veterans' employment program. HVRP grantees work closely with other federal, state and local partners to assist participants with health care, benefits and housing, but the uniqueness of HVRP is that it prepares and assists participants with getting employment, which is the real gateway to self-sufficiency.

Since 2003, the HVRP program has served over 107,000 homeless veterans and placed over 68,000 of them in employment with an average hourly wage of over \$10.00. This past year, the program served over 15,900 homeless veterans and placed 9,447 into employment with an average earning rate of \$10.47 per hour. HVRP was one of the two programs identified within the report that had received a program evaluation within the past 5 years. In addition, the program has a rigorous regime of measures and planning benchmarks in the Agency's Annual Operating Plan, which are reviewed quarterly by the Deputy Secretary of Labor.

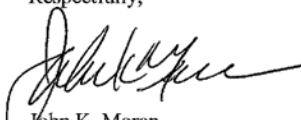
Over the years the HVRP has matured and been tailored to remain effective and relevant to specific and emerging populations of homeless veterans. Within HVRP, DOL has focused on grantees in both urban and non-urban areas. In FY 2010, in response to the growing number of homeless female veterans and homeless veterans with families, the DOL created a special grant program (Homeless Female Veterans and Veterans with Families Program) within HVRP to focus on these populations among the homeless.

While there are many risk factors that portend an individual's likelihood of becoming homeless, incarceration ranks as a high-risk factor. DOL also provides grants to service providers to address this specific high-risk population of veterans, through the Incarcerated Veterans Transition Program, which is also part of HVRP.

Finally, the HVRP program continues to provide aggressive outreach towards homeless veterans through its Stand Down initiatives throughout the country. This outreach leverages the services of other federal, state, and local resources to provide opportunities for homeless veterans to receive services, and to enroll in a structured program aimed at assisting them with shelter, training, and services to gain successful employment and reintegrate into society. In Program Year 2011, DOL funded 96 Stand Down events.

DOL will continue to improve HVRP and work closely with our partners on the Interagency Council on Homelessness to reduce and eliminate homelessness. I would like to thank you once again for the opportunity to review the draft report. If you would like additional information, please do not hesitate to contact me at (202) 693-4700.

Respectfully,



John K. Moran  
Deputy Assistant Secretary



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# Appendix VIII: Comments from the Department of Veterans Affairs

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DEPARTMENT OF VETERANS AFFAIRS  
WASHINGTON DC 20420

May 1, 2012

Ms. Alicia Puente Cackley  
Director, Financial Markets and  
Community Investments  
U.S. Government Accountability Office  
441 G Street, NW  
Washington, DC 20548

Dear Ms. Cackley:

The Department of Veterans Affairs (VA) has reviewed the Government Accountability Office's (GAO) draft report, "**Homelessness: Fragmentation and Overlap in Programs Highlight the Need to Identify, Assess, and Reduce Inefficiencies**" (GAO-12-491) and is providing comments and technical comments in the enclosure.

VA appreciates the opportunity to comment on your draft report.

Sincerely,

  
John R. Gingrich  
Chief of Staff

Enclosure

Enclosure

Department of Veterans Affairs (VA) Comments to  
Government Accountability Office (GAO) Draft Report  
***“Homelessness: Fragmentation and Overlap in Programs Highlight the  
Need to Identify, Assess, and Reduce Inefficiencies”***  
(GAO-12-491)

**GAO recommendation:** The Interagency Council and the Office of Management and Budget—in conjunction with the Secretaries of HHS, HUD, Labor, and VA—should consider examining inefficiencies that may result from overlap and fragmentation in their programs for persons experiencing homelessness. As a starting point, the agencies could use the program information from this report to further analyze the effects of overlap and fragmentation. The results of this assessment could be used to take actions to reduce any identified inefficiencies and therefore better leverage their resources. Actions may include streamlining services offered within specific programs or by agencies, identifying programs that could benefit from further research of evaluations, or consolidating programs or services to reduce administrative costs.

**VA comment:** Concur. VA will work with the Interagency Council on Homelessness and with other Federal agencies that provide programs and services to homeless Veterans to identify opportunities to streamline programs and services.

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# Appendix IX: Comments from the United States Interagency Council on Homelessness

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May 3, 2012

Ms. Alicia Puente Cackley, Director  
Financial Markets and Community Investments  
U.S. Government Accountability Office  
441 G Street, NW  
Washington, DC 20548

Dear Ms. Cackley:

USICH appreciates the opportunity to comment on the Government Accountability Office (GAO) May 2012 draft report *HOMELESSNESS: Fragmentation and Overlap in Programs Highlight the Need to Identify, Assess, and Reduce Inefficiencies* (GAO-12-491). The report recommends that the U.S. Interagency Council on Homelessness (USICH), "in conjunction with HHS, HUD, Labor, and VA, should consider taking actions to reduce inefficiencies, such as streamlining overlapping services and identifying programs that could benefit from further research or evaluations." The report also recommends that USICH "and its members should incorporate additional elements into updates to the federal strategy or in implementation and planning documents to help set priorities, measure results, and better ensure accountability."

USICH concurs with the GAO's assessment that there is not duplication among federal programs since federal resources and capacity are insufficient to address the needs of all people at-risk of or experiencing homelessness.

USICH agrees that improved collaboration and coordination across the federal government is vital to preventing and ending homelessness. That is why both collaboration and coordination are two fundamental elements in *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*. Over the last two years, unprecedented collaboration and coordination has occurred across and within the Council's 19 member agencies. This alignment improves both the efficiency and effective use of government resources. In addition to the interagency work referenced in the report on common vocabulary, data standard, and transition to HMIS, agencies have come together to create a federal framework to end youth homelessness, improve program utilization and data collection, and reduce the time it takes to house Veterans in the HUD-VASH program. In our commitment to be transparent, USICH has provided extensive detail on these efforts.

As you state in the report, USICH's Congressional mandate is to coordinate the federal response to homelessness. USICH agrees that there may be inefficiencies in the way that separate programs have been established and operate across different federal agencies to address various aspects of homelessness since these programs are statutorily mandated. While USICH is engaged in multiple projects to improve coordination across programs and agencies, it is not within the agency's authority to streamline what you consider overlapping services.

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**Appendix IX: Comments from the United States Interagency Council on Homelessness**

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USICH released *Opening Doors* on June 22, 2010. It was an extraordinary effort reflecting public engagement, review of the research, and consensus building across 19 federal agencies. The day after *Opening Doors* was released, we began the work of implementation. *Opening Doors* itself is a statement of USICH's commitment to the vision that no one should experience homelessness—no one should be without a safe, stable place to call home. It is a statement of what needs to be done and why we, in partnership with the private sector and all levels of government, need to act urgently.

In implementing *Opening Doors*, USICH is setting priorities, determining how to measure progress and results, and how to inspire cities, counties, states, tribes, regions, and federal agencies to identify what they can and should do and create mechanisms for follow-through. Your report suggests that the absence of a detailed implementation plan in *Opening Doors* raises questions about whether USICH is implementing the Plan strategically. USICH believes there is ample evidence in the respective HUD and VA strategic plans and annual performance goals, the HUDStat process, and the President's budget proposals to demonstrate the thoughtful and accountable way in which USICH and its member agencies are collectively approaching implementation. Furthermore, USICH has provided extensive documentation on its implementation progress in its 2011 Annual Update to *Opening Doors*. The forthcoming 2012 Annual Update will provide similar extensive documentation that will be made available per USICH's statutory requirement. Within the last two years, USICH has also significantly improved its online communications (website, e-newsletter, webinar series, social media, and blog) to provide real-time updates on its implementation efforts for its stakeholders and the public.

Since the majority of targeted homelessness funding is in HUD and VA, and the VA programs are available only to Veterans because of their military service. Because these programs are targeted towards different population groups, USICH thinks your framework and definitions of fragmentation and overlap are misleading according to standard usage of those terms. In our discussion, you said there is a possibility of "good fragmentation." USICH is not sure that will be self-evident to the public. The fact is funding for programs to prevent and end homelessness is not commensurate with need. Better coordination across programs is imperative, but coordination and increased efficiency alone will not fill this gap in resources and federal capacity.

USICH agrees that research and evaluation are critical to using public resources as efficiently as possible and continuing to learn about effective interventions. Across the Council's member agencies, there has been a strong commitment to research and to implement innovative practices. This is reflected by the volume of research and projects undertaken, but it is not reflected in your report.

The innovative research and evaluation includes work being done through HUD's Office of Policy Development and Research, HHS' Office of the Assistant Secretary for Planning and Evaluation, and the VA National Center on Homelessness Among Veterans, which informs program policy and practice for funds managed in other parts of these departments. While the report notes a handful of studies, there are ground-breaking studies that are critical to our efforts to end homelessness that were not mentioned including SAMSHA's evaluation of the Cooperative Agreements to Benefit Homeless Individuals, HUD's study on the Impact of Housing & Services Intervention on Homeless Families, and the HUD-VASH Evaluation and Exit Study.

In the report you state that you consider a program to be targeted if it is "one that provided assistance exclusively to those persons experiencing homelessness or at-risk for homelessness." USICH questions whether there was a specific understanding of "at-risk" in deeming the FEMA Emergency Food and Shelter Program or VA foreclosure program as targeted. Many people who receive assistance from food shelves or who face foreclosure have low-incomes but are not at-risk of becoming homeless.

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**Appendix IX: Comments from the United States Interagency Council on Homelessness**

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USICH also thinks the purpose and function of all the property disposition programs would be better examined separate from the targeted homelessness housing and service programs. Including more programs in your review makes it appear that there is more fragmentation and overlap than actually exists. Therefore, USICH disagrees with GAO's assertion regarding the extent of fragmentation.

Finally, your report links the need for case management and navigation to the fact of multiple agencies having targeted homelessness programs (characterized in your report as fragmented). USICH believes that the complexity of people's needs is the primary reason why case management is needed. This is particularly true for persons with chronic conditions and disabilities who have multiple challenges that require multiple systems working in concert. It is more than just a housing need, more than just health care, more than just a job or income support.

USICH has also provided you with specific comments on areas where we are questioning the facts, completeness, or possible implications of statements in your report. We appreciate the dialogue with the GAO and I am available to discuss this letter or those comments.

In conclusion, USICH strongly believes that significant progress has been made—where allowed by statute— to coordinate policies and programs across the federal government, at regional, state, and local levels. The Council will not be content that we have done everything to implement this Plan strategically, using data and evaluation to guide us, until no one experiences homelessness and everyone has a safe and stable place to call home.

USICH appreciates the opportunity to respond to this report.

Sincerely,



Barbara Poppe  
Executive Director

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# Appendix X: GAO Contact and Staff Acknowledgments

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## GAO Contact

Alicia Puente Cackley, (202) 512-8678 or [cackleya@gao.gov](mailto:cackleya@gao.gov).

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## Staff Acknowledgments

In addition to the contact named above, Paul Schmidt (Assistant Director), Elizabeth Curda, Beth Faraguna, Janet Fong, Jill Lacey, Marc Molino, John McGrail, Barbara Roesmann, Christine San, and Brian Schwartz made key contributions to this report.

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