



VISION
The end of homelessness in Arizona.

MISSION
To serve as a leader in the efforts to end homeless in Arizona through advocacy, education, and coordination with local communities.



PROJECT OVERVIEW AND HISTORY:

Project H3 VETS is a special initiative developed by the [Arizona Coalition to End Homelessness](#) (AZCEH). AZCEH provides leadership in statewide efforts to end homelessness through advocacy, education, and coordination with local communities and initiatives. By coordinating special initiatives, AZCEH is able to bring national, state and local resources together, study best practices, and ultimately address these issues on a scale that would not be possible without a high degree of collaboration.

Project H3 VETS takes the skills and lessons learned from AZCEH's [Project H3: Home, Health, Hope](#). Project H3 started as a grass roots collaboration of individuals representing a majority of the homeless and human services system in Maricopa County. AZCEH became the leader of the initiative based on the Coalition's ability to bring disparate community partners together in a coordinated fashion. Both Project H3 and Project H3 VETS are the local implementation of the national [100,000 Homes Campaign](#), a movement of communities working together to find permanent home for 100,000 of the country's most vulnerable homeless individuals and families by July 2014.

Project H3 VETS officially launched as a special initiative at the Coalition's 18th [Annual Statewide Conference](#) on Homelessness in October 2010 and began surveying over the Veteran's Day holiday week. Project H3 VETS uses the Vulnerability Index as an assessment tool to prioritize the most medically vulnerable homeless veterans living on the streets in the Phoenix Metro area. The Vulnerability Index is a tool for identifying and prioritizing the street homeless population for housing according to the fragility of their health. Using the assessment tool, volunteers canvassed the streets of targeted areas in Phoenix over the 2011 Veteran's Day Holiday week. During that week, more than 150 community volunteers and stakeholders spent three mornings combing Valley streets, alleys, and vacant lots. They surveyed shelters and transitional housing programs in the afternoons and evenings. Their goal was to identify homeless veterans with the most urgent needs and get an up-to-date and accurate snapshot of the current homeless population.

Surveying continued up until the [Arizona StandDown](#) 2012 event. Working with the many partners that put on the annual veteran-centric outreach event, we tailored the registration process to include the vulnerability index questions for all veterans that were living on the streets or in a shelter.

The result of survey week in November 2011, the data collected from StandDown, and working with community partners to embed the vulnerability prioritization tool as a part of the normal

intake process is a by-name list of veterans experiencing chronic homelessness who are at most at risk of premature death without housing and supportive services intervention.

In the Project H3 VETS initiative, the housing resource is the Housing and Urban Development – Veterans Affairs Supportive Housing (HUD-VASH) program administered by local VA medical centers (VAMC), which is permanent housing and supportive services. These services include case management, social support, and mental health services. The Phoenix Veterans Affairs Medical Center (VAMC) committed to 3 HUD-VASH case managers and 65% of outstanding and subsequent allocations of HUD-VASH vouchers to chronically homeless veterans in Maricopa County.

While the HUD-VASH program is a great resource and signifies marked progress toward ending homelessness among veterans, it is inadequate with regard to serving the *chronically* homeless veteran. While the Department of Veterans Affairs claims the HUD-VASH vouchers are targeting the chronic homeless veteran; their goal of a quick lease-up of the vouchers seems to directly contradict that target. The result is local VAMCs trying to adhere to requirements and leasing the voucher to the first in line, rather than those they aim to target. HUD-VASH program staff has no way to prioritize the HUD-VASH voucher resource to those most in need versus those “next in line”.

REPLICABLE BEST PRACTICES

1. **HOUSING FIRST**: Project H3 VETS relies heavily on incorporating the proven and cost-effective method of “housing first”. Housing first is distinct and separate from "[rapid re-housing](#)", is a relatively recent innovation in human service programs and [social policy](#) regarding treatment of the [homeless](#) and is an alternative to a system of emergency shelter/transitional housing progressions. Rather than moving homeless individuals through different "levels" of housing, known as the Continuum of Care, whereby each level moves them closer to "independent housing" (for example: from the streets to a public shelter, and from a public shelter to a transitional housing program, and from there to their own apartment in the community) Housing First moves the homeless individual or household immediately from the streets or homeless shelters into their own apartments.

Housing First approaches are based on the concept that a homeless individual or household's first and primary need is to obtain stable housing, and that other issues that may affect the household can and should be addressed once housing is obtained. In contrast, many other programs operate from a model of "housing readiness" — that is, that an individual or household must address other issues that may have led to the episode of homelessness prior to entering housing.

2. ***NAVIGATION***: Project H3 VETS partners with Community Bridges Inc., who operates a large Peer Support Program, comprised of certified peer support specialists otherwise known as Navigators. Every H3 Vet is assigned a Navigator. Navigators are involved in every step of the process from the initial placement in bridge housing, voucher issuance, choosing their apartment, lease signing and beyond. Once housed, Navigators continue their role indefinitely, doing “whatever it takes” to keep participants stably housed and improve their quality of life. Navigators serve as a friend, confidant, and advocate to help provide support, advice, transportation, and direction for their veterans. They also check in regularly with all landlords. Operating on a 1:15 caseload, they use intensive and proactive approaches to motivate each participant to:
 - Build relationships and rapport
 - Overcome social isolation and manage social anxiety
 - Become involved as a member of a community
 - Develop positive natural supports and meaningful activities
 - Pursue volunteer and employment opportunities
 - Increase income and mainstream services/benefits
3. **“12 POINTS OF LIGHT” AKA THE “BAT PHONE”**: This broad and comprehensive strategy was developed to incorporate a wide range of community portals that chronically homeless veterans (who traditionally are not highly engaged or motivated to seek services) tend to frequently interact with. Traditionally individuals tend to cycle through these various community portals without lasting positive intervention, connection to ongoing treatment services, housing or interaction with the VA System. We increased coordination and streamlined processes through many of these areas where chronically homeless, unengaged veterans tend to present. This process is utilized to identify, assess veteran eligibility (often within minutes) and seamlessly integrate into Project H3 Vets & the HUD VASH process. AZCEH’s Project Coordinator serves as the central communication hub for the project.

The primary referral sources are:

1. VA Hospital
2. Level 1 Sub-acute Detox Centers - (CCARC (LARC)/EVAC)
3. Maricopa County StandDown (largest homeless Veteran outreach event in the country)

4. Mobile Homeless Outreach Programs (Community Renewal Team/Blue-prints to Life, etc.
5. Drug Court Program
6. Police
7. Fire
8. Street Outreach
9. Transit/Parks & Rec
10. Jails
11. Prosecutor's Offices
12. Over-Flow Shelter

The list of referral sources continues to expand.

4. **BRIDGE HOUSING:** Once deemed eligible for VASH, Veterans are brought directly to temporary “bridge housing”. This might be a local motel or YMCA and helps to ensure the veteran will not return to the streets. Taking the veteran out of the elements that may contribute to his or her homelessness and keeping them in a clean, comfortable, and safe environment allows for daily contact with their Navigator while they manage the HUD-VASH process. It also shows the veteran we are serious about housing them and affirms we never want them to return to the streets.
5. **VA SOCIAL WORKERS CO-LOCATED IN THE COMMUNITY:** AZCEH has three HUD-VASH Case Managers co-located in our office (within the community). This allows for real time communication with Navigators and the Project Coordinator. It also allows for easier assessment and intake scheduling. We have bi-weekly staffings to discuss every veteran housed through the project in an effort to stay ahead of any potential barriers or issues that could jeopardize their housing.
6. **MOVE-IN CELEBRATION:** Every H3 Vet is given a full set of furniture (often picked out by the veteran), a television, household goods and grocery store gift card for the Navigator to take the veteran grocery shopping. We do this to ensure their housing feels like a home, improving their chance for housing success and retention. AZCEH sends a mass email to our list of stakeholders, donors, volunteers, and fans as notification/invitation to attend each veteran homecoming. This short 10-20 minute “party” can include cake, balloons and baked goods and shows the veteran that a whole community is supporting them and encouraging them to be successful in housing. The Navigator and VA HUD-VASH Social Worker are also there to welcome them home.

7. **CONVENING BODY:** The Arizona Coalition to End Homelessness became the leader of the initiative based on the Coalition’s ability to bring disparate community partners together in a coordinated fashion. AZCEH’s ability to be the convening body to seek community collaboration and buy-in allowed us to move together towards our goal in a coordinated fashion. AZCEH also had a Project Coordinator staff person dedicated to the initiative. This staff person acted as the “hub” of the program, working with leadership to address the systematic and administrative barriers that occurred, while vacillating to meet the needs of the social support staff that were working to resolve a veteran’s homelessness on a day-to-day basis. Communication with the veterans we served, our stakeholders, and the community was also crucial to the initiative’s success.
8. **100,000 HOMES CAMPAIGN INVOLVEMENT:** Being involved in the 100,000 Homes campaign on a national level was a huge resource. The national campaign asks communities across the nation to “enroll” to the movement and commit to organizing a leadership team, set a housing placement strategy based on the resources of a community, share what was learned, and report out monthly housing placements. Being involved in a national co-hort of change agents empowered our community to make bold decisions, knowing we had a growing number of supporters across the country doing the same thing. Additionally, the 100,000 Homes campaign often convened national leaders to hear about our progress at “boot camps”, which are regional events aimed at strengthening our decision making process and streamlining process to better serve those in need.

CONCLUSION:

Ending homelessness is possible. It does not mean that no one will ever experience homelessness again. It means that when an individual or family has a housing crisis, our community has the systems and resources in place to immediately identify and support them in rapidly getting back into housing. Instances of homelessness should be rare, short-lived and non-recurring. Project H3 VETS has ended chronic homelessness among veterans in Maricopa County as of February 14th, 2014 (Maricopa County StandDown), making Phoenix the first city in the country to do so. We believe we have achieved such a state for Veterans experiencing chronic homelessness here in the Phoenix Metro Area, where:

- Every chronically homeless veteran in our community known to the homeless services delivery system has been assessed and is connected to the appropriate housing and service resources required to end their homelessness.
- A robust and coordinated outreach and identification system is in place to rapidly identify and engage potentially chronically homeless veterans on the streets or in shelters in order to connect them with the appropriate housing and services resources

required to end their homelessness.

Project H3 VETS has removed the “homeless” adjective for 240 chronically homeless and medically vulnerable veterans in our community and continues to work to make systemic changes to end homelessness for countless more. With a project of this scale, community buy-in is paramount. Please see the list of our primary partners below –all working side by side to get to functional 0. The project monitors housing retention and quality of life. Project H3, a similar initiative utilizing Navigation services, has sustained a 94% housing retention amongst individuals aided through the project since 2010. As such, Project H3 VETS aims to maintain housing retention in the 90th percentile and currently holds a 95% housing retention after 30 months.

