



# CALL TO ACTION

## Toward Ending Female Veteran Homelessness

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**USC** Social Work  
*Center for Innovation and Research  
on Veterans & Military Families*

# CALL TO ACTION

## **TOWARD ENDING FEMALE VETERAN HOMELESSNESS**

The opportunity to end homelessness in our female veteran population is within our reach. Coordinated, collaborative, and visionary actions will be required. This effort will need to engage individuals, groups, and communities with a visionary new approach that focuses efforts and resources on prevention and early intervention versus the current model of reacting to homelessness once it actually occurs. We will need to leverage both the Internet and social media; develop strong peer-to-peer networks; and be more inclusive of veterans in helping us resolve female veteran homelessness. Activities related to resolving homelessness in our female veteran population will require total transparency, allowing the data to be disseminated to the public with the intent of tapping into the vast networks of problemsolvers throughout the country. Diversity in our approach to this issue will be critical as a “one size fits all” approach to public service will fail since everyone’s needs are rarely met with a single approach. We will need to connect back to government resources regularly as they will allow us to catalyze and scale solutions within the various communities throughout the land. Conducting early measurement of successes and failures is critical so limited resources are spent on those initiatives proving successful, and resources for those efforts not working can be redirected to more promising solutions. We need to stop reinforcing failure; rarely does providing more resources to initiatives that are not working lead to success. We will need to reward those demonstrating metrics-driven results with additional funding. And finally, philanthropy will need to play a critical role to fill the gaps typically unmet by the government. They will need to provide early-stage funding to validate untested ideas and approaches; be comfortable with new models and new markets; and be prepared to engage in this effort for the long haul without becoming distracted by other issues. Pro bono support will also play a critical role in this national effort, an effort that will take time, resources, energy and a long-term commitment—a commitment we owe our female veterans.

## BACKGROUND

Thousands of American veterans are homeless, living in shelters, on the streets, in alleyways, in abandoned buildings, and in their cars. These homeless veterans struggle to obtain the bare necessities of everyday living: safe housing, food, and clothing. Most homeless veterans have significant unmet mental and physical health care needs. There are an estimated 17,000 female homeless veterans, many with children who share in their homeless situation. It is estimated that 25 percent of female homeless veterans are veterans of the Iraq and Afghanistan wars. Many female homeless veterans are struggling with mental and physical health issues—injuries incurred during their military service. Unemployment and limited civilian job preparation and skills have led many of these veterans to poverty and the inability to care for their or their families' everyday basic needs. Ginger Miller, former homeless female veteran who is now CEO of Women Veterans Interactive, said: "Homelessness was not because I was lazy; homelessness is what happened to me."

We know that female veteran homelessness can result from many different situations. Many of these women have experienced sexual trauma; some, domestic violence, often while they were in uniform. Others struggle with post-traumatic stress disorder (PTSD) and other mental health disorders. Some struggle with a divorce as a result of their or their spouse's deployments and/or military service. Whatever the causes of their homelessness, it remains a national tragedy and a serious challenge to assist those who are currently homeless while simultaneously working on designing early-intervention programs to prevent homelessness in this vulnerable population of deserving veterans.

One of the significant shortfalls in attempting to adequately confront the issue of homelessness in our female veteran population is that we lack an accurate way to identify those female veterans who are homeless throughout the nation. The U.S. Departments of Veterans Affairs (VA) and Housing and Urban Development (HUD) collaborate on "point-in-time" counts of homeless veterans annually. These counts generally occur on a single night during the last week in January and they represent a snapshot of the number of homeless veterans on that given day. They

are not meant to represent the total number of male and female veterans who experience homelessness over the course of the entire year. The VA and HUD also provide "estimates" of veteran homelessness during the year, but at this point in time these are just "estimates." A more dynamic accounting methodology is needed that presents a clearer picture of the actual number of homeless veterans each year, which includes female homeless veterans. This new "system" of accounting for all homeless veterans should provide a more accurate count of those veterans experiencing homelessness throughout the year and should also be inclusive of the number of children who live in homeless situations with their veteran parents.

Since November 2009, the VA's focus on ending veteran homelessness has increased significantly after Eric Shinseki, then-secretary of the VA, pledged to end homelessness among veterans within five years. With less than a year remaining on this five-year pledge, after a one-year planning phase, the goal of ending veteran homelessness appears to be headed toward falling short in many communities, as new veterans become homeless every year. Indeed, there are significant challenges in respect to ending female veteran homelessness. Many female homeless veterans do not identify themselves as veterans and, therefore, do not seek assistance from the VA. Service members must serve honorably on active duty for two years to qualify for most veteran benefits, affecting female veterans to a greater extent than male veterans. Veterans who have never served during a combat operation generally don't qualify for most state veteran benefits, again affecting female veterans to a greater extent than male veterans. In addition, the majority of VA homeless programs lack congressional authority to provide services to non-veterans, such as spouses and children of veterans.

Furthermore, female homeless veterans are overrepresented in the homeless population nationally, indicating that female veterans are more likely to become homeless than male veterans. Studies also indicate that female veterans are two to four times more likely to be homeless than their non-veteran counterparts. Female veterans are reluctant to get healthcare from the VA; when working, they tend to be underemployed and paid less than their male veteran counterparts; and have very little trust for anyone other than another

female veteran. Female homeless veterans' challenges are on a continuum of need. Therefore, the solution to female veteran homelessness may lie in good prevention and early intervention strategies allowing for the most effective engagements on the front end of this continuum.

Many organizations, both federal and private, have committed significant resources and funding to address the homeless veteran population. While significant progress has been made, the goal of ending homelessness has yet to be achieved. A change in strategy from reacting to homelessness within the female veteran population once it occurs to a strategy of prevention and early intervention may prove more successful in preventing homelessness in the first place. It takes more resources to restore a veteran to health and well-being following a period of homelessness than it does to prevent homelessness, and yet we find that the best support and the most resources are often made available to a female veteran only after she has become homeless.

The best time to start prevention and early intervention programs and initiatives is at the transition point from military to civilian life. This transition point could be the place where effective, efficient, and comprehensive prevention and early intervention efforts could take place, specifically with those who are most vulnerable to becoming homeless following separation from military service. This kind of "proactive" system could dramatically increase the likelihood of a successful military transition, with success being defined as: a) permanent safe housing for the veteran, b) stable and good-paying jobs, c) healthcare needs being met, d) legal and financial issues addressed, e) strong, healthy relationships with self, family, friends, employer, colleagues, and community resulting in a strong social support network before they separate from military service, and f) affordable child care so women with young children may work.

The problem of female homeless veterans is a national problem and is therefore the responsibility of every citizen in this country. Many selfless and dedicated citizens took up the "call to arms." The nation as a whole has an obligation to care for each and every one of these veterans once they return home and deal with the many injuries (be they physical, emotional or psy-

chological) incurred during their service to a nation at war. Every American should feel a personal obligation in rectifying this national problem. We feel strongly that these recommendations are not intended to be the sole responsibility of the VA or the military or any other single agency, government or private. However, we believe that both the U.S. Department of Defense (DOD) and the VA have significant responsibilities in adequately addressing the homeless female veterans issue and will need to put forth significant efforts in obtaining the funding and resources needed to adequately confront this serious national tragedy.

The solution will require a commitment across the full spectrum of support agencies—the VA, DOD, federal, state and local policymakers, nonprofits, philanthropy, veteran service organizations, faith-based organizations, and homeless female veterans themselves. We will need to establish a "system of prevention" during the transitional phase out of the military that clearly identifies those at risk and then actively coordinates between the multiple organizations mentioned above to assist those at high risk of becoming homeless from ever becoming homeless. Resource coordination will be critical to meeting the needs of the transitioning veteran, whether that need is a job, safe and adequate housing, support for childcare, or resources to support the physical, mental, and emotional needs of the departing service member. State, city, and local meetings of all stakeholders should occur to collaborate on local solutions. Current and recent female homeless veterans should be included in stakeholder meetings to seek their feedback; identify the challenges they faced in overcoming homelessness; and solicit suggestions for effective interventions that can assist in preventing homelessness from occurring.

The recommendations listed below are offered as a beginning to assist in the development of such a prevention and early-intervention strategy. The recommendations build upon existing efforts, as well as call for new efforts and approaches to ending this alarming national issue. If successful, this strategy could be applied in attempting to end male veteran homelessness as well. From the outset, we have attempted to frame the recommendations toward ending female veteran homelessness within a woman-centric framework. All too frequently, male homelessness solutions were simply extended to females who are homeless, with



little regard as to whether the unique needs of homeless females were being met. The recommendations proposed were also developed within a family-centric framework. So, the care of children and partners/spouses figure prominently in our recommendations.

The recommendations are organized around the following key themes: 1) prevention and early intervention; 2) addressing the health and support needs of children; 3) improving existing homelessness support; and 4) improving awareness about female homeless veterans and closing research gaps to include accurate counts of homeless female veterans and the number of children accompanying them. We recognize that many of these recommendations have been suggested before and that many may be opposed on the grounds that they would violate existing law, would be too expensive, aren't necessary, aren't part of the military's mission, are already being done, or simply won't work. Our objective is to propose bold, innovative approaches in order to reinvigorate the discussion on how to best end the national tragedy of female veteran homelessness.

## **RECOMMENDATIONS**

### **I. Prevention and Early Intervention**

In order to eradicate female veteran homelessness, we must place significant efforts in preventing homelessness from occurring in the first place. Many current efforts are focused on addressing homeless issues only after our female veterans are imminently at risk of literal homelessness or have become homeless. Much work and effort, for example, has been devoted to the rapid rehousing strategy and Supportive Services for Veteran Families (SSVF); however, these efforts are reactive and address the problem of homelessness when the veteran family is imminently homeless or after the individual and/or family has actually become homeless. We feel that more efforts should be focused on preventing homelessness by taking proactive and early-intervention measures focused on those individuals who are at high risk as they prepare to transition out of the military—thus preventing homelessness from occurring.

Termination from military service obligation, for the most part, is a predictive transition with scheduled

out-processing milestones offering the opportunity to put into place some of these measures to ensure a more prepared exit from the military. We know when their job ends. We know when their medical care is no longer covered. We know when their support for housing comes to an end. We, therefore, are in a perfect position to develop transition plans that focus on ensuring that each service member gets a very thorough evaluation as they prepare for transition, identifying those individuals who are struggling with post-military employment and/or housing opportunities and those that do not have strong social support networks to assist them during the transitional phase. The recommendations below will require sufficient time and opportunities for female service members to fully prepare for their military transition, to include the opportunity to interface with those support agencies established to assist the service member during the transitional phase.

- Mandate that a thorough assessment of the health status of female service members be conducted during their military career, especially as they prepare to depart from military service.
- Ensure that separating female service members have established permanent housing, especially separating female service members with children.
- Educate female service members about the resources available to them should they encounter finding or maintaining their homes through outreach using peer support.
- Make as a primary objective for all separating female service members to have a “hard” job offer in hand that pays them enough to support themselves and their children.
- Conduct an assessment of the social support network of separating female service members to identify gaps in their support structure, especially those relocating to an area where they lack family and established relationships.
- Formally identify those separating female service members who are at high risk for becoming homeless and conduct continuous evaluations of their reintegration status for two to three years following separation from military service.

- With the help of the many support agencies, both local and national, develop aggressive re-training programs for separating female service members. These re-training programs should be matched to the separating female service members' desires and then coordinated prior to their separation from service to allow to immediately transition into the chosen re-training program.
- Based on the Canadian military system's transition compensation program, consider providing separating female service members with transition compensation to offset any differential from their military compensation they have been receiving.

## II. Child Health

Increased efforts focused on the healthcare and support for the children of separating female veterans should be undertaken. Accordingly, several recommendations are provided to ensure that the needs of children of separating female service members are strongly considered during the military transitional process. Collaboration among all support agencies should occur to provide the separating service member and her family with the strongest support possible and access to all available resources. Specifically, the issue of safe housing and access to good schools should be a primary focus in the female veterans out-processing and planning process.

- Identify those separating female service members with children and then ensure that resources are identified that will ensure that the essential needs of these children are met prior to separating from military service, especially special health or education needs.
- Establish a "life-skills" coaching program for female veterans with children, both during the transition phase and then following separation from the military.
- Strong consideration should be given to provide the VA with the authority to assist in meeting the health care needs of veterans' children through either direct or coordinated care.
- Collaborate to identify support organizations

that can assist in providing child care for female veterans while participating in job re-training programs or while working, especially single mothers.

- Monitor the health and well-being of veteran children to assess the possible long-term health and behavioral impact that service-related mental, physical, or emotional trauma on parents has had or the impact on those who have actually become homeless.

## III. Improve Existing Support

Existing support for female homeless veterans is often limited or restricted due to agency definitions of policies, some of which are based on law and others that are not. In this set of recommendations we advocate for changing the definitions of "veteran" and "homeless" since both are used to determine eligibility for care and benefits. Broadening these definitions to be more inclusive should serve to assist in reducing homelessness and destitution. For example, the current definition of "veteran" is someone who honorably served on active duty for at least two years. Thus, National Guardsmen or reservists, who may have served for 30 years, technically wouldn't be viewed as veterans unless they were called to active duty. Female veterans who served honorably, yet who may have left the military early due to pregnancy or to take care of family needs, also technically wouldn't be considered a veteran. Further, the VA assigns higher access priority to those veterans who served in combat, disproportionately impacting female veterans. A simpler and more inclusive definition of a veteran would be "anyone who has ever served in the military." With this definition, serving on active duty, serving for a specified period of time, status of discharge or combat duty would not factor into access to healthcare and benefits. Likewise, broadening the definition of homeless to include those veterans at risk of losing their home and who lack stable, safe housing would greatly reduce the number of new homeless veterans. Housing offered and provided to female veterans should be safe and not simply what is available. Finally, we call on the VA to establish "female veteran health and support centers" where female veterans can have visibility of, and access to, all the benefits that the VA and other federal and state agencies provide, to include veteran service organizations and nonprofits.

- Provide early housing support intervention for female veterans experiencing housing distress prior to receiving an eviction notice.
- For existing female homeless veterans, accelerate rapid re-housing initiatives to include full employment or re-training opportunities.
- Ensure all female veterans have safe housing, which may require relocating female veterans (and their children) to safe housing environments with safe school systems.
- Provide care and support to the spouse and partner of female veterans. For example, expand the job re-training programs within the VA to include partners or spouses of veterans.
- Mandate closer coordination of VA homeless programs with non-VA homeless programs to ensure that female veterans receive all entitled VA benefits, regardless of who is serving the female veteran.
- Expand the VA home loan and business loan programs to include rental housing support for female veterans, adjusted for children if they have any.
- Enhance support services for female veterans facing legal issues.
- Provide VA benefits to all female veterans regardless of time served or the nature of their military discharge.
- Establish female veterans' health and support centers designed to meet the comprehensive needs of female veterans and their families.

#### **IV. Improve National Societal Awareness and Address Research Gaps**

Improving awareness about female veteran homelessness and dispelling the many myths related to homelessness are important measures in the fight to end female veteran homelessness in this country. Thus, several recommendations are targeted to address these issues. In addition, there are also numerous research gaps regarding female veteran homelessness, far too many to address within the confines of this document. However, suffice it to say that there is great opportunity for academic institutions and

government related research organizations to take the lead on these important research endeavors and lead the way in developing evidence based approaches to resolving this national tragedy.

- Conduct a local, state, and national campaign aimed at dispelling the myths of homelessness.
- Conduct a community public awareness campaign to identify female veterans in need.
- Improve upon the identification and treatment of female service members suffering from sexual trauma, including sustained “booster” treatments to meet this population’s long-term care needs.
- Conduct intervention studies to identify the best housing practices for female veterans, focusing on those practices that prevent recidivism.
- Conduct local community needs assessments of female veterans to identify the most pressing challenges to help target prevention and early intervention strategies at the grassroots level.
- Improve upon the accuracy of veteran homelessness counts. These counts should include, but not be limited to, number of children, those with disabilities (mental, physical, and emotional), those suffering from military traumas, number of deployments, and military occupations.
- Improve this nation’s female veterans’ sense of being a veteran. Emphasis should be placed on being proud of their service to the nation and visibility on how best to access benefits they have earned and are entitled to.

These recommendations are not intended to be a “take it or leave it” demand. One or all of the recommendations may be pursued, as we believe that each recommendation stands on its own merit. Further, the list of recommendations is not intended to be exhaustive. We are confident that others will identify even more innovative and effective approaches towards ending female veteran homelessness—which is exactly what this Call to Action hoped to achieve.

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