IMPACT OF TRAUMA

The Office of Special Needs Assistance Programs (SNAPS) administers HUD’s homeless assistance programs. Survivors of domestic and dating violence, sexual assault and stalking often find themselves homeless or at risk of homelessness. According to the 2012 Point-in-Time Count, there were 54,122 sheltered survivors of domestic violence and 20,148 unsheltered survivors of domestic violence. Survivors of domestic violence are often isolated from support networks and financial resources by their abusers. They may lack steady income, employment history, credit history, or landlord references, making affordable housing options difficult to find. In the long-term, survivors need options that let them transition into safe, stable, and affordable housing. This requires an adequate supply of affordable transitional and permanent housing and appropriate social services. Further information can be found in the first Federal Partners Report on Women and Trauma http://nicic.gov/Library/025082.

How a Trauma-Informed Approach Can Make a Difference

HUD’s two targeted homeless assistance grants programs are the Emergency Solutions Grants and the Continuum of Care program. While neither is specifically focused on survivors, many domestic violence providers receive funding from these programs. HUD’s definition of homelessness specifically includes any individual or family who is fleeing or attempting to flee domestic or dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions. In 2011, HUD provided over $40 million in targeted homeless assistance grants for this population. HUD homeless assistance grants allow for flexible program design, including innovative trauma informed care models. Trauma-specific service models have become increasingly common in homeless and mental health programs, including residential and non-residential programs designed for specific subpopulations. Many victim service providers have already started using HUD funds for trauma-informed care models as well as rapid re-housing projects for survivors of domestic violence.
**Major Accomplishments 2010-2013**

Under the American Recovery and Reinvestment Act of 2009, Congress established the Homelessness Prevention and Rapid Re-Housing Program, a one-time allocation of $1.5 billion, to provide short- and medium-term financial assistance and services to individuals and families who were homeless or at risk of becoming homeless. Persons fleeing domestic violence could receive assistance if they would be homeless “but for” the HPRP assistance. In the 3 years of the program, approximately 138 victim services providers received HPRP assistance, and rapidly re-housed or prevented homelessness for approximately 48,000 persons.

On May 20, 2009, President Obama signed the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, which amends and reauthorizes the McKinney-Vento Homeless Assistance Act. The Act includes a consolidation of HUD’s competitive grant programs; creation of a Rural Housing Stability Assistance Program; a change in HUD's definition of homelessness and chronic homelessness; a simplified match requirement; an increase in prevention resources; and an increase in emphasis on performance. HUD has published regulations associated with the HEARTH Act, including rules related to the definition of homeless; Emergency Solutions Grants; Homeless Management Information Systems; Continuum of Care Program; and Rural Housing Stability Assistance Program.

**New Directions and Collaborations**

HUD’s Office of Special Needs Assistance Programs will continue to serve on the Women and Trauma Committee and is a part of HUD’s Working Group on the Intersection of HIV/AIDS, Violence Against Women and Gender-related Health Disparities and provides support to HUD staff on the President’s Interagency Taskforce on Human Trafficking.

An example of a best practice in the field is the Trauma Recovery and Empowerment Model developed at Community Connections in Washington, DC. This evidence based practice directly addresses trauma and its impact, and facilitates trauma recovery for people who often bring other complicating vulnerabilities (e.g., substance use, severe mental health problems, homelessness, contact with the criminal justice system) to the service setting.

**Additional Resources**

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https://www.onecpd.info/

http://www.communityconnectionsdc.org/web/page/656/interior.html