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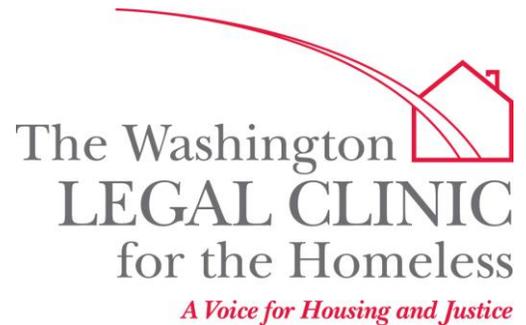
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Testimony before the DC Council  
Committee on Health and Human Services  
Performance Oversight Hearing on  
Department of Human Services  
Presented by Marta Beresin  
March 12, 2015

Good afternoon Councilmember Alexander and members of the Health and Human Services Committee. My name is Marta Beresin and I'm an attorney with the Washington Legal Clinic for the Homeless. The Legal Clinic envisions – and since 1987 has worked towards – a just and inclusive community for *all* residents of the District of Columbia, where housing is a human right and where every individual and family has equal access to the resources they need to thrive. My testimony today will address DHS' operation of the Rapid Rehousing or "Family Rehousing and Stabilization Program" ("FRSP").

Rapid Rehousing ("RRH") is a strategy to quickly rehouse someone following a homeless crisis, using a short-term rental subsidy and case management services to relink the family to employment. According to the National Alliance to End Homelessness, it is best targeted to people who are homeless but who have lived independently in permanent housing at some point in time. Ideal candidates are able to work and don't have serious health issues or disabilities.

A key component of a RRH program is "progressive engagement." This means that the program is right-sized to meet the family's need, often starting off with "light touch" services and subsidy and increasing or decreasing the services and subsidy based on need. RRH was initially relied upon following the 2008 recession, when thousands of families across the U.S. needed short-term rental and employment assistance pending their return to the workforce. The national evidence is inconclusive on the success of this emerging intervention,<sup>1</sup> and the DC government is still learning how best to design the program.

In the meantime, however, DHS has relied increasingly on RRH as an exit strategy for families in shelter. This is because housing is better for families and cheaper to fund than shelter. However, it is still important that we run our program according to best practices, develop a model that best meets the needs of our population and our housing

<sup>1</sup> DHS and its contractors have claimed a high success rate of approximately 85% in the program in DC, but this statistic is flawed because it is based solely on families who reapply for shelter and ignores those who are homeless but don't reapply for shelter, who return to abusers or other unsafe places, or who enter shelter in another jurisdiction.



market, and place into RRH the most appropriate families. This is essential because at least 700 families are currently participating in DHS' RRH program and the DC government is investing \$25 million in the program in FY 2015 to support 1,100 households.

Based on the experiences of our clients, our specific concerns with DC's RRH program are threefold:

First, families are placed in FRSP without regard to their income, earning potential, or the relationship between their income and the housing market. Working families are placed in FRSP, but so are families whose sole source of income is SSI (around \$700/month) because they are permanently disabled and unable to work. Likewise, families whose sole source of income is TANF and who have little or no work history or job skills are placed in RRH. The Legal Clinic is seeing too many families coming back in to shelter from RRH who were not appropriate for a short-term subsidy like RRH to begin with. During fiscal year 2014 and up through the present, the Legal Clinic has represented more than a dozen families who became homeless and needed to re-enter shelter after their RRH subsidy ended.

**Solution: The SPDAT assessment, which assesses families to determine whether they should receive PSH or RRH, needs to include a financial rather than solely a service needs component. And the DC government must bring its program more in line with progressive engagement so that when it becomes evident a family needs more intensive services or a longer-term subsidy, the system is flexible enough to extend their RRH subsidy or to transition them to LRSP or PSH, as appropriate.**

Our second concern with RRH is that families and landlords are wary of accepting RRH due to the fact that families are only guaranteed four months of assistance no matter their income. This has hindered the ability of DHS to exit families to housing quickly, a key best practice for RRH programs. Because accepting a short-term subsidy carries with it a risk of becoming homeless again, more families would be willing to accept RRH if there was year-round access to a safety net. As we have heard, since 2011, the DC government has reneged on its promise to vulnerable DC children by allowing hundreds of families to remain homeless, sleeping in their cars, abandoned buildings, emergency rooms, and other places not fit for human habitation. Over the past four years, unless you applied for assistance on a hypothermic day, DHS did not place you in shelter or RRH.

**Solution: Returning to year-round shelter access for families is not only the humane thing to do but will also ensure more families are willing to risk trying RRH. DHS should also consider offering 12 months of RRH assistance up-front.** This will give landlords the assurance they need to enter into a 12 month lease with a family whose current income cannot support the rent for a unit.

Finally, the DC government's TANF policies have been at odds with its RRH program. Most families who receive even the full level of TANF benefits cannot increase their incomes quickly enough to afford rent in DC within 12 months of entering RRH. The

40% reductions in TANF have meant that a family of three whose TANF income used to be \$428 is now \$257. In addition to the general hardship this imposes on a mother trying to provide for two children, it also means less money for transportation to job interviews, job training programs, and classes, less minutes on her pay per go phone that she uses for job call backs and, no money for the clothing or hygiene products necessary to obtain employment.

**Solution: The Council should forestall further cuts to the TANF benefits of long-stayers, at least for families who are compliant with work requirements and seeking employment, and should work towards restoring benefits to their full levels for all such families.**

The DC government can't have it both ways— it can't use RRH as the exit strategy for the vast majority of families in shelter if it's not willing to continue the subsidy or transition the family to another program if, through no fault of their own, they continue to need assistance. It can't expect all families to try RRH, including those on TANF with few job skills, when there's no year-round safety net for families to fall back upon. It can't have long waiting lists for TANF job training programs, cut families off TANF, and yet expect them to have the basic resources necessary to find employment in order to exit RRH successfully. These have been DHS policies over the last four years.

Director Zeilinger has expressed her hope that in the coming year at least two of these policies will change— 1) That no family will face “the cliff” and return to homelessness after their RRH subsidy ends; and 2) that DC will return to the policy of providing year-round access to a safety net for homeless families. We look forward to working with DHS towards these two goals, as well as towards a more equitable and just TANF policy.

