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**Transitional Housing for Survivors of Domestic**

**and Sexual Violence: A 2014-15 Snapshot**

Chapter 6: Length of Stay

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# Chapter 6: Length of Stay

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Any and all errors and omissions are the fault of the author, Fred Berman.

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## Note about the Use of Gendered Pronouns and Other Sensitive Terms

For the sake of readability, this report follows the example of numerous publications -- for example, by the National Center on Domestic Violence, Trauma & Mental Health (NCDVTMH)[[1]](#footnote-1) and the Missouri Coalition of Domestic and Sexual Violence[[2]](#footnote-2) -- and uses feminine pronouns to refer to adult victims/survivors of domestic and sexual violence, and masculine pronouns to refer to the perpetrators of that violence. This report also uses feminine pronouns to refer to the provider staff of transitional housing programs that serve survivors. The use of those pronouns in no way suggests that the only victims are women, that the only perpetrators are men, or that the provider workforce is entirely female. Indeed, the victims and perpetrators of domestic and sexual violence can be male or female or transgender, as can the staff that support their recovery, and the shortcut herein taken is merely used to keep an already long document from becoming less readable.

Although the terms "victim" and "survivor" may both refer to a person who has experienced domestic or sexual violence, the term "survivor" is used more often in this document, to reflect the human potential for resilience. Once a victim/survivor is enrolled in a program, she is described as a "program participant" or just "participant." Participants may also be referred to as "survivors," as the context requires. Notwithstanding the importance of the duration of violence and the age of the victim, we use the terms "domestic violence" and "intimate partner violence" interchangeably, and consider "dating violence" to be subsumed under each.

Although provider comments sometimes refer to the perpetrator of domestic violence as the "abuser" or the "perpetrator," this report refers to that person as the "abusive (ex-)partner," in acknowledgement of their larger role in the survivor's life, as described by Jill Davies in her often-cited [*Advocacy Beyond Leaving*](http://www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Advocates%20Guide(1).pdf) (2009).

Finally, although the Office on Violence Against Women funds transitional housing programs to address the needs of not only domestic violence survivors, but also survivors of sexual assault, stalking, and/or dating violence, the preponderance of program services are geared to DV survivors, the large majority of TH program clients are survivors of domestic violence, and much of the literature and most of the provider quotes are framed as pertaining to domestic violence. Consequently, much of the narrative is framed in terms of addressing "domestic violence" or "domestic and sexual violence," rather than naming all the constituencies.

## Executive Summary

Chapter 6 explores how different programs approach ***length of stay***, the term used to describe the duration of assistance in a transitional housing (TH) program. The narrative (Section 2) addresses the various statutory and regulatory constraints on length of stay governing the use of grants from the two primary funders, OVW and HUD; [[3]](#footnote-3) the ways in which the expectations of providers, funders, and HUD grant-administering states, counties, cities, and Continuums of Care impact policies and practices related to length of stay; and the practical implications of those policies and practices, given the diversity of survivors seeking TH program assistance, and given the broad variation in operating conditions -- program funding and staffing levels, housing and job markets, access to supplemental services, etc. -- that shape and constrain the efforts of TH programs serving survivors.

After a brief introduction, the Section 2 narrative surveys the statutory and regulatory provisions governing length-of-stay, including:

* The [OVW TH grant program enabling statute's](https://www.law.cornell.edu/uscode/text/42/13975) two-year limit on assistance, option for a six-month waiver extension, and requirement that programs be able to offer at least three months of follow-up services;
* The [HUD Continuum of Care (CoC) Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf) and the [Emergency Solutions Grant (ESG) Interim Rule](https://www.hudexchange.info/resource/1927/hearth-esg-program-and-consolidated-plan-conforming-amendments/), which provide a detailed regulatory framework, including a two-year time limit for assistance in a grant-funded "Transitional Housing" (TH)[[4]](#footnote-4) or "Rapid Rehousing" (RRH) project; and
* The "written standards" that Continuums of Care (CoCs), states, counties, and cities administering HUD grants are required to promulgate and implement, which may further narrow eligibility and/or priority for grant-funded assistance, and/or reduce the amount, duration, and/or scope of grant-funded financial assistance and/or program services.

While the statutory and regulatory provisions that explicitly address length of stay appear to indicate that the OVW and HUD grant programs take a compatible approach, other guidance documents -- and the provider comments in Section 3 -- reveal a divergence of approaches that poses one of the more serious challenges for victim services providers using HUD grants[[5]](#footnote-5) to support their TH or transition-in-place programs:

* On the one hand, the OVW program anticipates serving survivors with potentially complex needs above and beyond housing and employment barriers, who may have suffered years of physical, psychological, sexual, emotional, and financial abuse leading to their flight from violence and current homelessness. By contrast, as articulated in its [Rapid Rehousing Brief](https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf), HUD assumes that "the majority of families and individuals [who will be served by the Rapid Rehousing program] become homeless due to a financial crisis or other crisis that leads to the loss of housing. Addressing homelessness for these households primarily entails addressing their housing barriers to help them return to permanent housing." (p.1)
* On the one hand, the OVW approach emphasizes building a trusting, supportive relationship between the advocate/case manager and the survivor, which will be central to the program's ability to offer the necessary assistance; "walking alongside" survivors, to provide the support and assistance they need to address ***their*** priorities; and staying engaged ***for up to the full two years allowed by statute***. By contrast, the "operating principle [of HUD's Rapid Rehousing program, as articulated in its [Rapid Rehousing Brief](https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf)] is that households should receive ***just enough assistance*** to successfully exit homelessness and avoid returning to the streets, other places not meant for human habitation, and emergency shelters." (p.1)
* On the one hand, as described in the [OVW's annual solicitation for TH grant proposals](http://www.justice.gov/sites/default/files/ovw/pages/attachments/2015/01/14/th-solicitation-finalv2.pdf), "successful transitional housing programs ***provide a wide range of flexible and optional servi***ces that reflect the differences and individual needs of victims and allow victims to choose the course of action that is best for them. Transitional housing programs may offer individualized services such as counseling, support groups, safety planning, and advocacy services as well as practical services such as licensed child care, employment services, transportation vouchers, and referrals to other agencies. Trained staff and case managers may also be available to work with survivors to help them determine and reach their goals for permanent housing." (p.6)

By contrast, [HUD's Rapid Rehousing Brief](https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf) states that, "the focus of services in rapid re-housing is primarily oriented toward ***helping families resolve their immediate crises, find and secure housing, and connect to services if/when appropriate***. Case managers should monitor and provide ancillary services in the short run to promote obtaining and maintaining housing. . . . This ***crisis-related, lighter-touch (typically six months or less)*** approach allows financial and staff resources to be directed to as many individuals / households experiencing a housing crisis as possible." (p.5)

Thus, while the regulatory limit on HUD-funded TH and RRH assistance remains at two years, there is strong encouragement from HUD to reduce lengths of stay, to as little as six months, so programs can serve more clients and make a bigger dent in homelessness. In turn, that messaging from HUD, reinforced by the need to annually compete for renewal funding, typically translates into pressure from the Continuums of Care, states, counties, and cities administering HUD grants -- that want to make sure they retain their HUD grant funding -- to reduce participant lengths of stay to levels that may be inadequate to properly support survivors in their recovery, and in their preparation for a sustainable transition to permanent housing, if that is their goal.

The Section 2 narrative discusses some of the potential consequences of shortened lengths of stay. For participants in traditional TH programs, the potential consequence is too little time to find placement housing. For both traditional TH and RRH program participants, a potential consequence is too little time to develop an income that is adequate to sustain placement or transition-in-place housing. As [Davies (2009)](http://www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Advocates%20Guide(1).pdf) notes, planning for safety is not just a matter of developing strategies to avoid or escape batterer-generated risks; it is also about ensuring that the survivor has the ability to protect herself against life generated risks (e.g., poverty, hunger, homelessness, lack of health care). Although short-term program assistance might enable a survivor to briefly transition from shelter to housing, if she has not had adequate time and support to develop the income she needs to sustain that housing, she may again face a choice between poverty/homelessness and dependence on an abusive partner.

The narrative notes how scattered-site participant-leased apartments now constitute almost two-thirds of all OVW-assisted TH units, and constituted 90% of the new units added over a recent two-year period. Scattered-site, participant-leased housing comprises an even larger portion of the units jointly funded with HUD grants[[6]](#footnote-6) (which are not counted in published OVW statistics about the TH program housing stock, even if the survivors in these units receive OVW-funded services). The upshot of this trend is that ***a survivor's ability to obtain a lease in her name is increasingly prerequisite for participation in an OVW-funded TH program.***

In addition to adversely impacting survivor access to transition-in-place programs, the narrative asserts that a too-short program timeframe may also jeopardize the ability of traditional TH programs (which temporarily house participants in provider-owned or provider-leased housing) to successfully serve survivors with significant housing barriers. If such programs cannot sustain their offer of temporary housing until a survivor's housing search finally succeeds, that survivor must be discharged to some other living situation.

The duration of the housing search process is often a determining factor in the length of stay in a "traditional" TH program. It is not uncommon for survivors who are otherwise ready to move on to remain in the program, because they can’t find decent housing they can afford -- or a landlord who will rent to them. The last thing a TH provider wants to see happen to a survivor who is ready to move on, is for that survivor to have to return to a shelter, or be forced to "couch surf" with family members or friends, or worst of all, feel like she has no choice but to return to the abusive relationship she fled, if that is a choice she would otherwise not make.

The narrative continues with a discussion about how programs frame their approach to the duration of services and assistance, in light of regulatory or other constraints on the duration of assistance. Some programs simply treat the ***maximum length of stay*** as the ***expected length of stay***, while other programs define a ***targeted length of stay*** or a baseline period of assistance and then allow for extensions -- which may be routinely approved, or conditionally granted -- up to the maximum 24 months. Some programs routinely provide only six months or a year of assistance; others routinely offer the full two years allowed by law.

While there is nothing inherently problematic with setting a target length of stay or dividing the total stay into a baseline period and periodic extensions for the purpose of taking stock of progress made and progress yet to be made, the narrative observes that programs that make such extensions of assistance contingent on "demonstrated effort" or "participation in services" or "progress" may be at odds with the VAWA voluntary services requirement, or at risk of contravening the OVW's warning (in its [annual solicitation of TH grant proposals](http://www.justice.gov/sites/default/files/ovw/pages/attachments/2015/01/14/th-solicitation-finalv2.pdf)) against "requiring survivors to meet restrictive conditions in order to receive services."

To the extent that such policies have a ***disparate impact*** on the ability of persons with disabilities (or other protected classes) to receive program assistance, they may violate anti-discrimination laws, and, if the provider owns or leases the housing to which access is conditioned, fair housing laws.

Section 3 consists of the following five groupings of provider comments:

* Comments illustrating the range of approaches to length of stay;
* Comments describing the use of the targeted length-of-stay approach;
* Comments describing provider approaches to granting length-of-stay extensions above and beyond the program-defined baseline stay;
* Comments on why participants exit before they have reached the end of their stay limit; and
* Comments describing the challenges that programs with both OVW and HUD grant funding experience the pressure to maintain shorter lengths of stay.

## Regulatory Framework, Implications, and Program Approaches

### Introduction

As described in the 2016 version of the OVW's [annual solicitation for transitional housing (TH) grant proposals](https://www.justice.gov/ovw/file/800641/download), funded programs are expected to offer

*"a holistic, victim-centered approach to providing transitional housing services that* ***move survivors into permanent housing****. . . . Successful transitional housing programs provide a wide range of flexible and optional services that reflect the differences and individual needs of victims and allow victims to choose the course of action that is best for them. Transitional housing programs may offer services such as counseling, support groups, safety planning, and advocacy services as well as practical services such as licensed child care, employment services, transportation vouchers, telephones, and referrals to other agencies. Trained staff and case managers may also be available to work with survivors to help them* ***determine and reach their goals of permanent housing****."* (p.1)

The OVW TH program overview on the [Muskie/VAWAMEI website](http://muskie.usm.maine.edu/vawamei/thousingmain.htm) states that the support services offered by the TH program, "should be designed to enable an individual fleeing domestic violence, dating violence, sexual assault, or stalking to locate and secure permanent housing and to ***integrate into a community***."

Helping survivors "determine and reach their goals of permanent housing" and "integrate into a community" takes time. This chapter looks at how different programs approach "length of stay," the term used to describe the duration of assistance in a TH program. The chapter narrative and provider comments address the different statutory and regulatory constraints on length of stay; the ways the expectations of providers, funders, and grant-administering states, counties, jurisdictions, and Continuums of Care impact length of stay-related policies and practices; and the implications on the ground of those policies and practices, given the diversity of survivors served by programs, and the broad variation in operating conditions -- level of program funding and staffing, housing markets, job markets, availability of supplemental services, etc. -- that shape and impact the work of TH programs serving survivors of domestic and sexual violence.

### OVW and HUD Regulatory Framework vis-à-vis Length of Stay

#### Context

[Davies (2009)](http://www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Advocates%20Guide(1).pdf) explains the importance of a comprehensive approach to safety planning:

*"Safety is broadly defined. To be safe, victims need to be free from the violence and control of their partners, but they must also be able to meet their basic human needs. Reducing the risk of physical or sexual violence but leaving a victim and her children with no long-range financial support is not making her safe. Nor will it make her or her children safe to ignore mental health symptoms, substance use, or trauma issues. Safety requires the reduction of all risks of a partner’s control, “batterer-generated risks” not solely physical violence . . . . [as well as] strategies to address basic human needs for income, housing, health care, food, child care, and education for the children." (pp. 5-6)*

[Davies' (2009)](http://www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Advocates%20Guide(1).pdf) emphasis on the importance of taking a comprehensive approach to safety planning, including strategies to "address basic human needs for income, housing, health care, food, child care, and education for the children," in addition to the more obvious focus on "reducing the risk of physical violence and other harm caused by an abusive partner" points to an important difference between the respective goals of the OVW Transitional Housing grant program and HUD's Rapid Rehousing (RRH) program (often used by victim services providers to support transition-in-place programs), which helps explain the different timeframes that OVW and HUD envision for program participation:

* On the one hand, the OVW [TH grant enabling statute](https://www.law.cornell.edu/uscode/text/42/13975) and [annual solicitation for TH grant proposals](https://www.justice.gov/ovw/file/800641/download) explicitly list as a program purpose -- and permit the use of grant funds for -- supporting participants in -- "secur[ing] employment, including obtaining employment counseling, occupational training, job retention counseling, and counseling concerning re-entry in to the workforce; and integrating] into a community by providing [participants] with services, such as transportation, counseling, child care services, case management, and other assistance."
* On the other hand, [HUD's Rapid Rehousing Brief](https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf) cites as an "operating principle ... that households should receive just 'enough' assistance to successfully exit homelessness and avoid returning to the streets [or] emergency shelter;" (p.1) and explains that RRH grant funds are intended to support "crisis-related, lighter-touch (typically six months or less)" (p.5) housing assistance and staff services, while relying on linkages to other community-based services (which may or may not be adequate, available, or accessible) to address survivors' other needs:

*"Rapid re-housing is not designed to comprehensively address all of a recipient’s service needs or their poverty. Instead, rapid re-housing solves the immediate crisis of homelessness, while connecting families or individuals with appropriate community resources to address other service needs."* (p.2)

#### OVW TH Program Time Limits

According to the aforementioned [2016 OVW solicitation for TH grant proposals](https://www.justice.gov/ovw/file/800641/download):

***"****Transitional housing/rental assistance and related support services must be provided for a* ***minimum of six months and a maximum of 24 months****. Victims may request a waiver for up to an* ***additional six months*** *of services if the victim has made a good faith effort to acquire permanent housing but has not been able to do so. . . . The grant recipient must develop a* ***plan to provide follow-up support services for a minimum of 3 months*** *after a victim has secured permanent housing.[[7]](#footnote-7) Follow-up services should be limited to: advocacy, support groups, case management, and minimal financial assistance (e.g., security deposit, first month’s rent, or childcare)."* (pp.8-9)

Note that these guidelines do not separately limit the amount of time that a survivor can receive advocacy / case management versus the amount of time they can receive housing search assistance versus the amount of time they can receive rental assistance. Presumably, if transition-in-place program staff provide housing search assistance prior to a survivor's moving into their transition-in-place housing, the time during which the survivor was assisted in looking for housing would count against the overall 24-month limit on assistance. Often, DV shelter staff are able to provide housing search support, so that TH program staff don't have to and/or so that the survivor has a "head start" on the process by the time they are hoping to enroll in a TH program. If a survivor is staying in some other temporary situation (e.g., a motel, with a family member or friend, or still living with their abusive partner), they might not have access to other sources of housing search assistance and/or they may feel unsafe in pursuing housing search-related activities.

#### Why HUD Regulations Are Relevant

Many providers operating OVW-funded TH programs (including 42% of the providers we interviewed) also receive ***Transitional Housing (TH) grants*** awarded under HUD's Continuum of Care (CoC) program and/or ***"Rapid Rehousing" (RRH) grants*** awarded under HUD's CoC or Emergency Solutions Grants (ESG) program.

RRH grants pay for rental assistance and services in privately owned apartments ***leased by the participant***; they are often part of the funding mix for OVW ***transition-in-place*** programs, or may fund separate programs.

CoC TH grants help pay for temporary housing and services for participants in provider-owned or provider-leased apartments or houses; they may be combined with OVW grants or fund separate programs.

HUD-funded TH and RRH projects are subject to HUD regulations and to ***written standards*** which HUD requires Continuums of Care administering CoC grants and states, counties, and jurisdictions administering ESG grants to develop and implement. These written standards are also discussed in [Chapter 2](http://www.air.org/THforSurvivors/508_Ch_02_Access_Selection.docx) ("Survivor Access and Participant Selection"), [Chapter 3](http://www.air.org/THforSurvivors/508_Ch_03_Prog_Housing.docx) ("Program Housing Models"), and [Chapter 12](http://www.air.org/THforSurvivors/508_Ch_12_Fund_Sources_Collab.docx) ("Funding and Collaboration: Opportunities and Challenges"), as well as being touched upon in the following discussion.

#### Continuum of Care Transitional Housing Grant Time Limits

With respect to CoC TH grants, the only regulatory requirements addressing length-of-stay are:

* §578.3 of the [CoC Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf), where "transitional housing" is defined as "housing, where all program participants have signed a lease or occupancy agreement, the purpose of which is to facilitate the movement of homeless individuals and families into permanent housing ***within 24 months*** or such longer period as HUD determines necessary. The program participant must have a lease or occupancy agreement for a term of at least one month that ends in 24 months and ***cannot be extended***."
* §578.53(b)(3) of the [CoC Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf), which allows ***up to six months of post-placement follow-up*** services: "services may also be provided to former residents of transitional housing and current residents of permanent housing who were homeless in the prior 6 months, for no more than 6 months after leaving transitional housing or homelessness, respectively, to assist their adjustment to independent living."

#### ESG and CoC Rapid Rehousing Grant Time Limits

RRH regulations are more complex. As described in [HUD Rapid Rehousing: ESG vs. CoC (2013)](https://www.hudexchange.info/resource/2889/rapid-rehousing-esg-vs-coc/), there are similarities and differences in the rules for ESG-funded RRH grants versus CoC-funded RRH grants:

* ***ESG RRH Program Advocacy/Case Management***. §576.105(b)(1) and (b)(2) of the [ESG Interim Rule](https://www.hudexchange.info/resources/documents/HEARTH_ESGInterimRule&ConPlanConformingAmendments.pdf) distinguishes between "Housing Search and Placement" services and "Housing Stability Case Management" services, and provides the following definitions and guidance on the duration of services:
* "Housing search and placement [are] services or activities necessary to assist program participants in locating, obtaining, and retaining suitable permanent housing...."
* "Housing Stability Case Management [includes] assessing, arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability for a program participant who resides in permanent housing, or to assist a program participant in overcoming immediate barriers to obtaining housing. This assistance cannot exceed 30 days during the period the program participant is seeking permanent housing, and cannot exceed 24 months during the period the program participant is living in permanent housing."

§576.105(c) of the [ESG Interim Rule](https://www.hudexchange.info/resources/documents/HEARTH_ESGInterimRule&ConPlanConformingAmendments.pdf) provides the following guidance on the duration of services:

*"The recipient [i.e., the state/county/jurisdiction administering the ESG grant] may ... set a maximum period for which a program participant may receive any of the types of assistance or services under this section [i.e., financial assistance* ***other than*** *rental assistance, housing search and placement, housing stability case management, mediation, legal services, credit repair]. However, except for housing stability case management, the total period for which any program participant may receive [those services] must not exceed 24 months during any 3-year period."*

That is, the regulations define a 24 months + 30 days limit on "Housing Stability Case Management" and a ***separate*** 24-months-in-any-three-year-period limit on any combination of the other ESG RRH services, including Housing Search and Placement assistance. If, for example, RRH program staff have provided six months of intermittent "housing search and placement" assistance while a survivor was in shelter, the regulations allow them to provide up to two years of housing stability case management once the survivor is in housing (***including follow-up assistance*** after the rental assistance has ended).

However, as described below, the written standards governing that grant may be less generous.

* ***CoC RRH Program Advocacy/Case Management***. §578.53 of the [CoC Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf) defines "Housing Search and Counseling" and "Case Management as two of many eligible "Supportive Services." There do not appear to be any regulatory constraints on the duration of supportive services by RRH staff ***prior to the beginning of rental assistance***. That is, staff could continue to provide housing search support (while the survivor is in shelter or some other interim living situation) until the client is successfully placed.

§578.37(a)(1)(ii)(D) of the [CoC Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf) indicates that a CoC RRH-funded program "may provide supportive services for ***no longer than 6 months after rental assistance stops***," that is, the regulations allow ***up to six months of follow-up services*** after housing assistance has terminated.

* ***ESG and CoC RRH Rental Assistance***: Both the ESG and CoC RRH program rules define two categories of rental assistance: ***short-term*** (up to 3 months); ***medium term*** (more than 3 months, up to 24 months).

As noted above, OVW allows up to 24 months of assistance of services and/or financial assistance, and allows the provider to request a waiver for up to six additional months.

* ***ESG and CoC RRH Lease Requirements***: The CoC RRH regulations require that participants have a ***one-year lease in their name*** -- although the duration of rental assistance may be shorter than the 12 month lease period; the ESG RRH regulations require that participants have ***a lease in their name***, but are silent on the term of that lease. (OVW is silent on the matter of leases.)
* ***ESG and CoC RRH Eligibility Re-Determinations***: As described on p. 4 of [HUD Rapid Rehousing: ESG vs. CoC (2013)](https://www.hudexchange.info/resource/2889/rapid-rehousing-esg-vs-coc/), both ESG and CoC RRH grants require at least ***annual re-assessments*** of need and eligibility for assistance. ESG RRH grants require that assistance ***beyond one year be means-tested***: participants may only continue receiving assistance if their income is at or below 30% of the Area Median Income: a participant with income above that threshold would time out of the program at one year. The CoC RRH regulations do not impose an income eligibility standard -- but, a CoC could include an income test at intake or re-assessment in its ***written standards***. (OVW does not establish income eligibility guidelines.)
* ***CoC Written Standards***: The written standards that CoCs must develop and implement (see §578.7(a)(9) of the [CoC Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf)) ***do not specifically address length of stay***.

However, per §578.37(a)(1)(ii)(B) of the [CoC Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf), providers operating RRH projects "***may*** set ... a maximum number of months that a program participant may receive rental assistance, and/or a maximum number of times that a program participant may receive rental assistance."

Although the [CoC Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf) defines these parameters as a project-specific decision, a CoC could establish such a standard for all RRH projects funded through the CoC.

* ***ESG Written Standards***: The written standards that a state, county, or jurisdiction administering ESG grants must develop and implement ***do specifically address length of stay***. Per §576.400(e)(3)(viii) and (ix) of the [ESG Interim Rule](https://www.hudexchange.info/resources/documents/HEARTH_ESGInterimRule&ConPlanConformingAmendments.pdf),

*"At a minimum, these written standards* ***must include****: (viii) Standards for determining how long a particular program participant will be provided with rental assistance and whether and how the amount of that assistance will be adjusted over time[[8]](#footnote-8); and (ix) Standards for determining the type, amount, and duration of housing stabilization and/or relocation services to provide to a program participant, including the limits, if any, on the ... rapid re-housing assistance that each program participant may receive, such as the maximum amount of assistance, maximum number of months the program participant receive assistance; or the maximum number of times the program participant may receive assistance."*

As evidenced by comments in the last section of this chapter and in [Chapter 12](http://www.air.org/THforSurvivors/508_Ch_12_Fund_Sources_Collab.docx) ("Funding and Collaboration: Opportunities and Challenges"), quite a few providers have felt pressure to reduce participant lengths of stay to a level they believe is inadequate; although they may attribute these pressures to HUD, it may well be that the "written standards" are the source of those pressures. In turn, those written standards (and unwritten expectations) for shorter stays likely reflect messaging from HUD -- which understandably wants it's grant funds to have the greatest possible impact in addressing homelessness -- as well as from the states, counties, cities, and CoCs administering HUD grants that feel those same pressures -- from the business community, local politicians, and advocates -- to make a bigger, faster dent in homelessness. [[9]](#footnote-9)

The providers we interviewed -- many of whom operate DV shelters -- are well aware of the unmet need for transitional housing. (In [Chapter 2](http://www.air.org/THforSurvivors/508_Ch_02_Access_Selection.docx), on "Survivor Access and Participant Selection," we estimate that on average across the country, for every TH program vacancy, there are nine survivors seeking such TH.) As one provider noted,

*A challenge we face is balancing the number of clients we serve and the length of stay in the program. The longer participants stay, the less funding we have to bring on new clients. And vice versa: enrolling new clients means having less funding for clients who need a longer stay. The need is so great for this program, there are so many people who need assistance, and there’s no other local program that offers rental assistance for victims of domestic violence. When people need assistance, it’s usually urgent because they want to get out of a domestic violence situation. Or they’re homeless and need a helping hand. So the greatest day-to-day challenge is, how do you say "no" to someone when they need help?*

### Practical Implications of Shortened Program Timeframes

On the one hand, shorter lengths of stay allow programs to serve more survivors within their existing budgets; nominally provide external motivation (i.e., a more quickly approaching deadline) for program participants to more intensively focus on the work they need to accomplish to prepare for a successful transition out of the program; and from the perspective of some providers, give programs the ability to put closure to stays in which a participant isn't "making good use" of the TH resource, freeing a slot for other survivors who need and want the kind of help the program can offer.[[10]](#footnote-10)

On the other hand, shorter lengths of stay may not allow survivors enough time to heal from the trauma and the physical, emotional, psychological injuries caused or exacerbated by the abuse -- so that they have the energy and focus to address their housing and employment-related needs; may not allow survivors with serious obstacles to gainful employment and sustainable housing enough time to address those challenges (e.g., lack of a work history or marketable skills; problematic immigration status; problematic credit or arrearages caused by financial abuse; etc.); and may not allow survivors time to address their other, non-housing-related high priority needs/concerns, for example, the safety of family or friends who supported their flight; rebuilding the relationship with their children; re-engaging with people and organizations their partner prohibited them from contacting; addressing deferred health-related needs; addressing legal needs (e.g., child custody or visitation) or immigration issues; etc.

The narrative notes that, as explained by [Davies (2009)](http://www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Advocates%20Guide(1).pdf), [Melbin, Jordan, & Smyth (2014)](http://fullframeinitiative.org/how-do-survivors-define-success-report-recommendations/), and [Thomas, Goodman, & Putnins (2015)](http://www.ncbi.nlm.nih.gov/pubmed/25580522), not all survivors want or are ready to permanently leave the relationship with their abusive partner. For survivors who are not seeking independent housing, or who have other priorities ***in addition to*** permanent sustainable housing, sharper limits on length of stay may deny them the time in program they need to make meaningful progress in their recovery and/or pursuit of other objectives.

Also, as [Davies (2009)](http://www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Advocates%20Guide(1).pdf) notes, planning for safety is not just a matter of developing strategies to avoid or escape batterer-generated risks; it is also about ensuring that the survivor has the ability to protect herself against life generated risks (e.g., poverty, hunger, homelessness, lack of health care). Although short-term program assistance might enable a survivor to briefly transition from shelter to housing, if she has not had adequate time and support to develop the income she needs to sustain that housing, she will again face a choice between poverty/homelessness and dependence on an abusive partner.

#### How Long Does It Take to Complete a Successful Search Process for Sustainable Housing?

Although [HUD's Rapid Rehousing Brief](https://www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf) suggests that "efficient programs can typically re-house households in a couple weeks and in most cases in less than 30 days," and that successful stabilization and program exit can be accomplished within a total of six months, nearly all the providers we interviewed who discussed their housing search experience described much more challenging and protracted efforts; and few providers felt that the survivors they served were routinely ready to move on after only six months of financial assistance and program services. Certainly, any survivor that required permanently subsidized housing would be at risk of eviction and homelessness if their program couldn’t accommodate the long waiting period for a Housing Choice voucher or a subsidized unit.

The duration and outcome of a housing search typically depends on (a) the availability and competitiveness of housing in the price range that the survivor can afford in the housing market(s) where she is looking; (b) the "credentials" of the survivor (e.g., her housing history; the existence of any rent/utility arrearages or other problems with her credit; her immigration status; any history of criminal convictions; and, of course, the adequacy, source[[11]](#footnote-11), and reliability of her income, i.e., public benefits, child support, occasional part time work versus stable, well-paid employment;[[12]](#footnote-12) etc.); (c) whether the provider can be the initial leaseholder, if the survivor's credentials are too weak to secure a tenancy in her own name; (d) whether the provider can leverage relationships with local landlords; and (e) the amount/duration of rental assistance that the provider can offer to mitigate a potential landlord's risks in entering into a lease with the survivor.

Apart from these more "routine" considerations, a survivor who is still in a state of crisis after having recently fled an abusive situation, or who is suffering the effects of trauma and any co-occurring physical, mental, or emotional health problems might simply lack the wherewithal to initiate and invest the necessary energy in a housing search -- gathering her papers, putting her name on waiting lists, making decisions about where she might want to live, meeting with landlords, etc. - until she has had time to recover her strength.

The better the survivor's "credentials," the more she can afford to spend on housing, and the more progress she has been able to make on her housing search before she tries to enroll in a transitional housing or transition-in-place program, the less time it will take that program to assist with housing placement, and the more likely a program enrolling that survivor will be able to "take credit" for a housing placement.

#### Adverse Impact on Survivors with Significant Housing Barriers: Transition-in-Place Programs

Several concerns are raised regarding shortened timeframes in a transition-in-place program:

* Survivors with serious barriers to obtaining a lease for an apartment may time out of a shelter before they can obtain rental housing.
* Survivors with serious barriers who manage to find placement housing may have used up an excessive amount of advocacy / case management time in the housing search process, so that they have less time remaining during the portion of the program in which they can receive rental assistance and support services while they are in their transition-in-place apartment.
* As described by [Davies (2009)](http://www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Advocates%20Guide(1).pdf), planning for safety is not just a matter of developing strategies to avoid or escape batterer-generated risks; it is also about ensuring that the survivor has the ability to protect herself against life generated risks (e.g., poverty, hunger, homelessness, lack of health care). Although short-term program assistance might enable a survivor to briefly transition from shelter to housing, if she has not had adequate time and support to develop the income she needs to sustain that housing, she may soon face eviction and a morale-crushing loss of housing, leaving her with the awful choice between either poverty and renewed homelessness (in a shelter, couch surfing with friends and family members, or in a car) or renewed dependence on an abusive partner.

Over time, participant-leased scattered-site housing has come to be the most prevalent housing model used by the OVW Transitional Housing program, making ***the ability to find an apartment and to get a lease in her name more and more of a prerequisite for survivor participation in an OVW-funded TH program.***

Since HUD- funded RRH-assisted units (which are not counted in the VAWA MEI totals) must, by regulation, be leased to participants, ***being able to lease an apartment is even more critical than the VAWA MEI statistics suggest -- especially in regions that don't have programs with provider-leased or provider-owned TH units.***

***A shortened program timeframe makes it harder -- and in the case of HUD-funded providers, more risky -- for programs to serve survivors with significant housing barriers.***

A review of [Semi Annual Program Reports](http://muskie.usm.maine.edu/vawamei/thousinggraphs.htm) covering the period 7/1/2012 - 6/30/2014 shows that ***65% of all the units of housing financially assisted by OVW grant funding were scattered-site. 80% of those scattered-site units were leased by the participant***, with the program providing rental/voucher assistance. Only 14½% of the scattered-site units were leased by the program, and a mere 4½% were owned by the provider.

Over that two-year period, the number of OVW-assisted units has grown from 1,253 to 1,464. ***Increases in the number of scattered-site units accounted for about 90% of that increase***, raising the percentage of OVW-assisted units that are participant-leased from 52.3% to 62.6% -- nearly two out of every three units.

If, as documented by the National Low Income Housing Coalition's [annual Out of Reach report](http://nlihc.org/sites/default/files/oor/OOR_2015_FULL.pdf), mainstream households are struggling to bridge the increasing chasm between wages and housing costs, the challenge of finding affordable housing is even harder for survivors coming from the intersection of violence and poverty -- coping with the effects of their chronic exposure to physical, emotional, psychological, and financial abuse; and struggling to overcome housing barriers like poor credit, unpaid rent or utility arrearages, a history of evictions, a criminal record, lack of a stable work history, and weak employment prospects.

While some survivors may be better positioned to compete in their local housing market, many others need housing search assistance -- and enough time in a safe place until their housing search can be successful.

Unfortunately, there are no data on the number of survivors who try but fail to find placement housing where they can transition-in-place -- either because they could not find a landlord to offer them an apartment where they could transition-in-place -- or because the local jointly OVW- and/or HUD-funded program was reluctant to allocate staff to provide housing search assistance and set aside rental assistance funding for a survivor with poor housing prospects, when there were other survivors with much better prospects for success.

However, it is fair to say that ***shortening the program timeframe makes it less feasible for transition-in-place programs to serve survivors with serious housing barriers, and may well discourage such providers from trying*** if such efforts come at the expense of assisting other survivors with better prospects.

#### Adverse Impact on Survivors with Significant Housing Barriers: "Traditional" TH Programs

Shortened program timeframes also jeopardize the ability of traditional TH programs (which house survivors in provider-owned or provider-leased housing, on a temporary basis) to successfully serve survivors with significant housing barriers.

Apart from support in all the other matters that a survivor might seek program assistance addressing, the duration of the housing search process is often a determining factor in the length of stay in such programs: a number of providers that we interviewed stated that there were survivors in their program who were ready to move on, but who couldn’t find housing they could afford -- or landlords who would rent to them.

Although longer deadlines may sometimes encourage "procrastination," as some have suggested, the reality is that many survivors need all the time that programs can offer, in order to address their housing barriers, to find sustainable housing, and to prepare for safe and successful reintegration into the community.

The last thing that a TH program wants to see happen to a survivor that is ready to move on, is for that survivor to have to return to a homeless shelter, or to be forced to return to couch surfing with family members or friends, or worst of all, to be forced by circumstances to return to the abusive relationship she fled, if that is a choice that she would otherwise not have made.

### Range of Program Approaches to Length of Stay

While almost all of the programs whose staff we interviewed allow lengths of stay between 6 and 24 months, a few have been able to leverage other sources of funding which allow them to offer assistance for up to 36 months.

Some programs simply treat their maximum length of stay as the prescribed length of stay, and presume that participants will remain in the program until their time runs out. Many programs, however, define a baseline period of assistance of 6, 12, or 18 months, but allow for the possibility of one or more extensions (subject to the availability of funding[[13]](#footnote-13), of course) up to the 24 month maximum:

* In some programs, such extensions are routinely offered, and provide the program and the participant with periodic opportunities to take stock of participants' situations and to strategize about next steps.
* In other programs, individual extensions are based on the needs and circumstances of each participant.
* In some programs, providers described the need for an extension as an indication that the program has not done enough to help a participant overcome their barriers, or that those barriers are more serious than can be addressed in the program, requiring either additional resources or an alternate placement.
* In other programs, approval of an extension is contingent on a participant's "demonstrated effort" or "demonstrated use of resources" or "demonstrated progress in working towards housing or other goals."

On the one hand, a program that has provided the minimum six months (or more) of transitional housing, as specified (p.8) in the [OVW's annual solicitation for TH grant applications](http://www.justice.gov/sites/default/files/ovw/pages/attachments/2015/01/14/th-solicitation-finalv2.pdf), without requiring participation in services, might see itself as having complied with the grant conditions, and able to establish a higher threshold for more extended TH assistance.

On the other hand, the statutory requirements in [42 USC §13975 (b)(3)(C)](https://www.law.cornell.edu/uscode/text/42/13975?_sm_au_=iVVjBwSrvfjFMQSm) that "participation in the support services shall be voluntary" and in [42 USC §13975 (d)(2)(B)](https://www.law.cornell.edu/uscode/text/42/13975?_sm_au_=iVVjBwSrvfjFMQSm) that "supportive services offered to participants ... are voluntary and that refusal to receive such services shall not be grounds for termination from the program or eviction from the victim’s housing" say nothing about limiting the voluntary services requirement to the first six months of TH program participation.

Similarly, the [OVW's annual solicitation](http://www.justice.gov/sites/default/files/ovw/pages/attachments/2015/01/14/th-solicitation-finalv2.pdf) warning against "requiring survivors to meet restrictive conditions in order to receive services" (p.9) does not distinguish between restrictive conditions in the first six months and restrictive conditions imposed sometime thereafter.

***Programs establishing such requirements in order to access continued assistance may thus be at odds with the VAWA voluntary services requirement and the OVW warning against "restrictive conditions."*** And, as discussed in [Chapter 2](http://www.air.org/THforSurvivors/508_Ch_02_Access_Selection.docx) ("Survivor Access and Participant Selection") and [Chapter 4](http://www.air.org/THforSurvivors/508_Ch_04_Survivor-Centered.docx) ("Taking a Survivor-Centered/Empowerment Approach: Rules Reduction, Voluntary Services, and Participant Engagement"), ***programs with such policies and practices may also be at odds with fair housing or anti-discrimination laws, depending on whether those policies and practices have a disparate impact on certain subpopulations (e.g., survivors with physical, mental, or trauma-related disabling conditions).***

Many providers base their program model on a ***targeted length of stay***, which is typically shorter than the ***maximum length of stay.*** Thus, for example, a provider might routinely strive to fully assist participants within 12 months of their entering the program, but might allow up to 24 months where circumstances necessitate a longer length of stay. The targeted length of stay may be a general expectation for all participants, or it may be client-specific and, if the program maintains written case plans with timeframes, the targeted length of stay may be part of that plan. Some providers indicated that a participant might not even be informed about the possibility of extensions up to the maximum length of stay.

In some programs, it is rare for participants to reach the maximum two-year length of stay; in other programs, reaching the two-year-limit is more common, as for example, in programs that view two-year participation as a precious opportunity for survivors to take advantage of the housing assistance, while they build their savings, pay off debts, attend school, learn marketable job skills, and/or focus on healing from their trauma.

### The Implications of Length of Stay on Participant Selection and Program Capacity

This final portion of the narrative revisits some of the key tradeoffs attendant to shorter versus longer lengths of stay. As noted earlier (and in [Chapter 2](http://www.air.org/THforSurvivors/508_Ch_02_Access_Selection.docx), "Survivor Access and Participant Selection"), "traditional" TH programs that must comply with relatively short length of stay limits will be less inclined to enroll survivors facing multiple or serious obstacles to housing that are likely to take "too long" to resolve, and will tend to prioritize survivors who seem prepared and able to obtain housing (and secure gainful employment) within the shorter program timeframe. If the allowed length of stay is longer, and the provider is not worried about being sanctioned for serving fewer clients, staff can enroll survivors with greater needs, who require more time to successfully complete the program.

As more and more programs utilize scattered-site, participant-leased housing, the inability of survivors to remediate -- or persuade landlords to overlook -- their weak tenancy credentials and offer them a lease will keep more and more survivors from participating in OVW- and HUD-funded transitional housing programs. The problem will be exacerbated by shorter overall program timeframes, whereby survivors who require "too much time" to address their housing barriers and secure a lease in their name leave too little time for the program-supported tenancy which is the heart and soul of the transition-in-place model.

Some landlords that might otherwise be disinclined to lease to survivors with weak tenancy credentials, might be willing to offer them an opportunity to transition-in-place, if the provider is able to guarantees the rent for, say, 12-18 months, giving the survivor enough time to strengthen her credentials and earn the landlord's trust and a lease in her own name. However, if pressure to reduce lengths of stay prevent programs from guaranteeing more than, say, six months of rental assistance, such landlords might not be willing to take the risk of renting to the survivor.

A very constrained period of assistance could especially limit the ability of jointly OVW/HUD-funded transition in place program to serve survivors with poor tenancy credentials, because HUD RRH grants ***require*** landlords to put the lease in the participant's name. The challenge would be greatest with programs using CoC-funded RRH grants, which require that the lease be "at least one year [and] renewable for terms that are a minimum of one month long, and terminable only for cause." (ESG RRH grants are silent on the term of the lease.)

If a program is accountable to the funder for demonstrating "successful" transitions to permanent housing, and/or if the program is concerned about not putting survivors in housing situations that they can't sustain (and that will result in eviction, renewed homelessness, or vulnerability to a predatory partner), then if program lengths of stay are sharply constrained by regulation, "written standards," or funder expectations, the provider will likely find a way to tailor participant selection to favor survivors with relatively modest barriers who can realistically be successful within the allotted time.

That is, in the absence of resources that can fund more extended assistance, length of stay constraints can be a significant, and potentially decisive factor in determining the kinds of clients a program serves.

## Provider Comments

### Comments Illustrating Varied Approaches to Length of Stay

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) The maximum length of stay in our transitional program is 24 months, as prescribed by HUD and OVW. Participants usually stay right up to 24 months; maybe 20 months, but usually it’s right up to 24 months. The 24-month deadline is a really big deal. When a family comes into the program, 24 months feels so long and far away, and they feel like they have lots of time. And then, time passes and all of sudden, they realize, “Oh, I have to be out of here in six months?” So, the long deadline can contribute to a lack of motivation, or it can be very motivating, depending on how close to the end of their stay they are. Eventually, as they approach that deadline, they realize, “I need to start doing some stuff.” And no matter how much we, as advocates, encourage and remind them of their own goals, at the end, it’s the deadline that really motivates them.

We have one client whose goal is to finish with her schooling, and after that, to find a job. Obviously, she might take longer in the program than someone who just needs to find a job. So they'll have different target dates. Some clients know what they want to work on. They know what they have to do and they do it and move on. There’s other clients who are, for lack of a better term, scared to be on their own, scared of failing, scared that the abuser was right that they can't succeed on their own.

(#02) The units of housing are funded as permanent housing under different HUD programs: CoC [Continuum of Care], ESG [Emergency Solutions Grant], and TBRA [HOME Tenant Based Rental Assistance]. So, participants can stay as long as they want, as long as they pay their share of the rent. The OVW grant, which funds program staffing, limits us to providing services for 24 months and then six months of follow-up.

(#03) Our program has a maximum length of stay of two years; whether that's enough depends on the needs of the participants. Even five years might not be enough because it is more about the psychological impact a peaceful place has on people who have not had a peaceful place, a place they can live without trauma. It is more about how you set up your program and who you have helping them to positively move forward. You have to be able to simultaneously address the trauma and keep them moving forward on the other things.

(#04) We pay rent and utilities at 100% for six months. The next two months we drop down to 75%. The next two months, we pay 50%. And then the last two months, we pay 25%. At the end of 12 months, a participant is hopefully self-sufficient and to a point where they can pick up the cost themselves. On average, 12 months is a good timeframe. We’ve certainly had some people that we had to ask to leave the program because a previous boyfriend or partner had moved back in. And we’ve had a few instances where somebody needed a little additional time. But clients going into that program understand about the 12 months. And because our budget is based on 12 months of assistance, we really try to stay within it, but we certainly can be flexible.

(#05) The maximum length of stay in our program is a year. We’ve had some individuals who have been able to accomplish their goals in six months, and felt like they were doing okay and did not need to continue, because they had been able to save money. Probably the majority of people have done it in less than a year.

Participants work with staff to set a target date for transitioning out of the program. That date might get adjusted depending on the person’s situation. If the person’s situation has changed, and they need a little bit more time, we would be flexible with that. We haven’t had anyone beyond the twelve months. The way we look at that is, "If someone needs to stay longer, have we provided them the support they needed?"

(#06) Most people stay the full 18 months, and if they don’t, it’s because they found permanent housing before the 18 months, and they go, and we’re happy for them, and they know that they have follow up services up to 12 months. And they keep coming back. Last night, the person facilitating the group was a woman that has been out of the program since the beginning of the year, but she keeps coming back.

(#07) Our program decided on a three-year length of stay because we were seeing women moving out of the shelter and into public housing who really needed ongoing services for more than a year. During the first year, there was still a lot of crisis and uncertainty, still a lot of old patterns of behavior, so we looked at two years, and thought, “That would give them a year for stabilization, but if we went to three years, that would give them even more support, and help make sure nothing else comes up, and that they are grounded.” We were thinking that some of them could go to school for two year Associate degrees, have a little more of a foundation before they actually move out on their own into the community.

(#08) We have not had people stay beyond the 24 months; we don’t have the additional funding for that. But part of our longer term goals as we’re looking at program development and expansion is creating additional units of permanent supportive housing and additional units of affordable housing to which they can transition once their time in the program is up, just to give our participants additional options… If it were up to me it would be a minimum of 36 months. That first year is really when people are trying to just get their bearings. And then they’re moving into their next year, meeting their goals but also looking at transitioning too ... which creates an additional layer of stress that we’ve been able to help residents deal with. We should do anything we can to relieve that pressure. An extra 12 months would help.

(#09) Participants can stay as long as they’d like, up to 24 months. There’s an option for a six month extension, but so far, for the most part, everyone has been able to find permanent housing – a lot of it subsidized housing – before or by the 24 month mark. Participants who find permanent housing before 24 months can move on, but once they leave the program, that’s it; if their new housing falls through, they can’t come back into the program.

(#10) The service plan is generally based on an 18-month timeframe. It's revised quarterly, but there wouldn’t really be a circumstance where someone would start off and deliberately plan, “I’ll be gone in six months.” It’s always an assumption that participants will stay the full 18 months, and keep updating the plan on a quarterly basis. I think the 18-month maximum works pretty well. We have so much demand for our program, so having it be much longer than that would really create a bottleneck for other survivors who need the services. I think 18 months is a good amount of time - not too short and not too long; it sends a message that this is a temporary opportunity to do some work or prioritize different goals, and do some things that will ultimately lead you to a more stable placement. It is not the end game, and most people don't want it to be.

If we had additional resources, it would be more beneficial to have more units available for the 18 months, so we could serve more people for the same amount of time, rather than serving the current participants longer.

(#11) Most people make the transition to greater stability and leave our program within about 14 months. Technically, our financial assistance is available for up to 24 months; but it hasn’t come up yet.

(#12) The maximum stay in our program is two years. I wouldn’t want our transitional housing to become a lifelong option for someone, but if someone needed a few extra months, and if our OVW funding would allow it, I would have no issue with that. We haven’t had people request it, but I think we’d certainly be open to it.

(#13) Participants can stay in the program for two years. There is a six-month follow-up period during which they can access our services. Some of the women that took advantages of the services offered could maybe have left in six months or a year. It depends on the woman. Many stay two years because that’s their only affordable option until they get a voucher, because the rent in our program is based on their income. If a participant gets a voucher, they have 120 days to use it, or they lose it - so they have to hustle to find housing.

(#14) If we could, I would do away with a maximum length of stay altogether. That’s why we merged the emergency and the transitional. I just think it’s so arbitrary. It forces us to make these definitions, transitional and emergency, that make no sense in the real world. I know that they’re important for funding structures, but they don’t make sense in terms of the way people live their life and how they’re experiencing things: the idea of crisis, then stable and transitional. What we would love to do is just help people who need housing whatever that looks like. For some folks, the 24-month time limit just barely scratches the surface of what families need in terms of time to get stabilized.

We say we’re a transitional housing program, but we see a lot of folks in need of support that doesn’t have anything to do with housing. Often they need help with children’s issues, or employment issues, increasing their income or dealing with trauma. One of the things we found with our voluntary services program is that it takes people months to come around, to engage. It takes us months and months to build relationships. By the end of two years, some folks are just beginning to deal with some of the trauma that they haven’t dealt with ever. Just being in a safe place starts that process for them, but it takes so much time. It’s so case by case.

And because we are low barrier, we are working with people who have active addictions, and we’re working with folks with undiagnosed mental health issues. It takes us a long time just to help people get a handle on that stuff, and then two years kind of comes up really quickly, and it’s the deadline. And it feels very awkward because we have this approach to how we support people, and then it feels awkward to then out of the blue start reminding people about this deadline, that’s moving. It feels like counter to the approach we take 90 percent of the time with people. Then we have to say, “OK. Now we need to like focus on your housing options because this deadline is coming, and it’s coming soon.” So we thought about what if we just change these programs completely into permanent housing, and what would that look like?

(#15) We helped 18 or 19 women during our three year grant period, but they had six months to a year in the program. Generally people exited the program once it ended and their assistance had run out. What we did was wean the more successful participants off our assistance, which is why we do that monthly step-down of rental assistance. For the first three or six months we pay the whole entire rent. For the next three months participants pay one-third of the rent and we pay the rest. The next month we split it. The last month we pay one-third and you pay rest, and the month after that you cover the full rent payment.

(#16) We have 16 transitional beds co-located in our emergency shelter, and four scattered-site apartments. The program is six to 24 months long. At 12 months, we have a conversation: "How has it felt since you’ve been here? What are we doing to make sure you’re in housing at 24 months? By 24 months, it'll be too late to help." We have that conversation again at 18 months and 21 months, so they understand our limitations as a program. Since I’ve been a TH advocate, I’ve haven't had anyone get to 24 months and just have to leave.

(#17) In the past, our transitional stay was six months, however we found that most of the ladies weren’t ready to transition in six months; most were going to nine months. So we extended our program to a year.

(#18) In the OVW-funded program, the participant pays no rent in months one and two; in months three and four, they pay 10% of their income towards rent; in months five, six and seven, they pay 20% of their income towards rent; and from months 8-12, they pay 30% of their income towards rent. The 12-month timeframe is enough time for participants to get public housing, but that means they have to move to a different county, which some participants feel is less ideal, because of the school district and the demographic. It's not enough time to get a subsidy, though; the Section 8 waitlist is pretty long. People might be on a public housing wait list and come to shelter and then to the transitional for six months and they’re name comes up, but the timing is pretty tricky. So many participants come up with a Plan B for next-step housing. But the large majority can sustain their program unit after we end our subsidy.

(#19) Our transitional housing program is designed to provide 100 percent of the rent for three months, and then we gradually step down our level of assistance, going to 75 percent coverage, etc. We step down our level of assistance on a case by case, month by month basis. Our financial assistance ends after a year, but services can continue, up to another full year. Stepping down the financial assistance was a choice we made to increase responsibility for participants and to stretch our grant money, so it could help more families. It's hard to say whether our expectation -- that people will be able to take full responsibility for their housing costs in a year, and at least partial responsibility within three to six months -- is realistic for all of the people we serve. Right now, we do it on a case by case basis, assessing where each person is and what they can do.

(#20) We can offer rental assistance for up to 24 months or until funding has run out. In the conversations we have, it seems like the majority of the women want the full 24 months of assistance as a safety net; one of my clients was up to paying her full rent four months before she exited, but we provided a safety net.

(#21) Our transitional program runs 1-2 years. Our OVW funding is for the clustered site. Clients have been there as long as a year and a half, and a waiver can be approved if people need a little bit longer. The scattered-site program doesn't use any OVW funding, so we don't need a waiver to move them there. We work with each family and look at what their situation is and how much longer they need, and if we have to, we can move them to the scattered-site to finish their last year. Each family situation is different, and we have to assess each one and figure out what's best for them and what they want. Sometimes they want to move to a different town or want their children to start school there. So they may stay at our clustered program for a few months and then be in the scattered-site for a year.

(#21) We have a maximum length of stay for our transitional housing of two years, but there is an option of a six month waiver if the survivor was unable to find housing during that time frame. The two years actually seems to be a pretty good time frame, because it really does seem to take a while for people to unpack mentally and emotionally and start working towards life goals, because it’s been so long for them since they’ve been able to do that. We really see so much progress between that one and two year period.

(#22) (Not a current OVW grantee) Our transitional program provided participants with rent-free housing for six months to help them get on their feet. The six months was just a guideline. They were given a little extra time if they needed it. If we were to do another program, I would want survivors to have longer than six months in transitional housing, because six months may be enough time for somebody with a good paying job to save up the money. But for the women who have to go and find a job, six months is not that long. I'd want to be able to offer at least a year for them to get on their feet, and get ready for more permanent housing.

(#23) All of our transitional housing is temporary; participants need to find their own permanent housing to transition to when their time in the program is up in 18-24 months. Some individuals are a little resistant, but that’s just the messaging that’s built throughout that whole year, trying to prepare the women for that. Sometimes they need more time, but I would say for the most part it seems to work. There are always a couple of participants for whom even a 24 month period is just not enough, but it’s a small percentage.

(#24) Different funders have different rules about length of stay. There are the HUD rules, the OVW rules, and then there are the rules of the cities that we're working with. We had funding from several cities that were bent on helping people get into a place really short-term -- wanting to see progress within three months. We found that very difficult, because some people might fit that model, but there are many people that you just don't automatically drop after three months, if they need two more months to really become established.

So we were just so dead set against having hard and fast rules, and advocated a more lenient, longer-term approach. We argued that it would average out, because some people don't need as long and that's wonderful, they just need help getting it going, they're getting a job, they can stand on their own in perhaps 1-3 months. But then there are many that need up to a year to deal with things. Especially people who need more time while they're learning English, studying, and working to get ahead. And people with medical issues, or legal issues that make it impossible for them to race into a place. We feel that the duration of assistance should be what's needed by the participant; going back to the philosophy of treating people as individuals.

(#25) Participants can stay in the program up to two years; they could stay less, or they could stay more if they need it. We’re pretty flexible with that. But on average, we say two years.

(#26) (Not a current OVW grantee) Our intent is to provide as individualized an approach as possible: those who can move out quickly should, and those who need longer should be able to stay longer. Most families stay around two years but it depends on the individual case. There are many cases in which somebody can’t finish something in two years, so we give them additional support. In today's staff meeting, we were talking about a mom who got a dental assistant certificate, but frankly with five kids, you can’t survive on the income of a dental assistant. She needs to become a dental hygienist, so we'll give her extra time in the program to complete the dental hygienist training, because it pays significantly more than a dental assistant. The ability to be flexible about the end date for people making good use of the time is another benefit of not depending on government funding.

(#27) We don’t say, “We’re going to give you six months.” We try to base it on individual need, and the landlord knows this is not going to last and that we’re not committing to a year, even though it is a year lease. That hasn't been a problem. We have a group of landlords who are really very helpful, and if there’s ever a problem with a survivor we’re right on it.

(#28) A participant's length of stay depends on what their goals are, really. We’ll have moms that are a financial train wreck, have gone through a divorce and they’re financially underwater, and it takes a while for them to be able to take care of some of those issues to be able to find a landlord that will rent to them. If you owe a past landlord money, you’re not going to be able to find anybody that’s going to rent to you that’s not a slumlord, so that financial piece is always a big barrier that we’re working on.

(#29) We have one program-rented unit in the community that we use to house one large family at a time for upwards of 24 months, which is in line with OVW’s maximum length of stay. We’ve been successful in transitioning all of our clients out of that program at the 24-month mark or prior to the 24-month mark. We also maintain four or five scattered-site transition-in-place units that clients lease in their own name. With those units, we would be looking for them to be working within six months. We’ve got a client right now who we just can’t accept into the program. She’s got really significant trauma that keeps her from being able to work, even though she has a strong work history. Although our rental assistance extends beyond six months, within six months they need to be taking significant steps towards being more able to support themselves.

(#30) Length of stay is up to 24 months, and then there is the opportunity for a six-month extension if they’re having difficulty finding permanent housing.

(#31) Once a woman is in the program, she’s guaranteed the 24 months of transitional assistance. If she suddenly gets a $45,000 job, the amount she’s paying on the sliding scale fee might go up, but the services all continue to be free, including child care. Because we assume that most of the women we work with have debts and not-good credit and barriers to employability, we built right into our model that we always set aside funds to make sure we can cover those 24 months of transitional assistance.

(#32) Anyone who’s eligible for funding is eligible for up to two years of assistance, providing they continue to meet criteria and funds are available. We just placed two families in homes and they know that they’re eligible for funding, and if we get renewal, they’ll be eligible for the full two years. So with those clients, we’re looking at a six-month lease or a month-to-month lease. Or if there are clients that have the capacity to generate income, they’ll establish a savings plan. They'll transition in that last six months of their two year stay, and when they transition, the primary source of payment will become the state, like Section 8, or tribal housing, where there’s reduced costs.

***Questions to Consider***

1. Does the allowed length of stay affect the kinds of survivors a program can ***safely*** serve, or only the kinds of survivors a program can ***effectively*** serve?
2. What are the consequences of ending assistance to a survivor before her situation has been effectively stabilized?
3. Given that healing from the impact of chronic trauma can be a very long-term process, how would a program know when a participant has healed sufficiently to be able to sustainably move on with her life?
4. How does a program know when a participant who hopes to be able to transition to independent housing is able to take a more active role in housing and job search and employment readiness activities?

* What is the role of the advocate/case manager in catalyzing that shift in focus, given their commitment to the voluntary services model, their experience-informed sense of the challenges posed by the housing and job market, their desire to avoid burdening the survivor with additional stress, and their concern about leaving the survivor with no good alternatives if time runs out on their program participation?

1. Why might two different programs (in the same or different parts of the country) report significantly different average lengths of stays, if both programs were guided by the Davies' advice about addressing life-generated risks to survivor wellbeing, and so, extended rental assistance until survivors had made meaningful progress to developing the financial capacity to sustain their housing?
2. If it were possible to assess the safety, housing stability, and wellbeing of survivors one year after their exit from transitional housing, would we find any difference in the status of survivors who had been in programs with short lengths of stay versus programs with longer lengths of stay?

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### Comments on How Targeted Length of Stay Often Differs from Maximum Length of Stay

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) The maximum stay in our program is two years. Generally, we have a three-month evaluation, and then provide up to 18 months, and can extend up to two years. As far as I know, nobody has ever been extended beyond two years. The goal is for clients to finish the program in 18 months; usually clients stay for that full time. Recently, one client graduated before she reached the maximum stay because she decided she could afford the rent herself. If clients want to leave our program, we don't try to persuade them to stay. I think the 18 month limit works; based on our experience 18 months is enough time to make a transition.

(#02) I would consider shortening the ***targeted*** length of stay to be more persuasive. I think that if we have a 24-month window, sometimes participants are just not going to get real worked up about accomplishing goals because it's just so far out there. We see that a lot. People wait until the last minute, although some of that's a little bit to do with the case manager not prodding quite as assertively as she might. I would leave the ***maximum*** stay at the 24 months, but not always make that the target. Some people need the 24 months. If they're looking at trying to save enough money to buy a car or something like that, a big expensive goal, then it's going to take some time to accomplish that. I don't have a psychology degree, but it takes some time to develop a different way of living, and so I wouldn't change it.

(#03) If I could I would do away with it the concept of the maximum length of stay altogether. It’s why we merged the emergency shelter and the transitional program. I think it’s so arbitrary. It forces us to make these definitions, transitional and emergency, that make no sense in the real world. I know they’re important for funding structures, but they totally don’t make sense in terms of the way people live and how they’re experiencing things. The idea of being in crisis and then you're stable and ready for the transitional phase doesn’t reflect the reality of people’s lives. We would love to just do away with that and help people who need housing - whatever that looks like. In a perfect world, we would take our scattered-site model and expand it because we help people lease apartments that they want to live in, that they're comfortable in, that they could potentially take over the lease in a few years with our support, and stay for the long term. Then it’s not about kicking people out of the programs, but helping them stay housed permanently.

(#04) The maximum stay is two years; our average is one year. In the whole time we've done this program, we’ve only requested (and gotten) six-month extensions for two people who needed the extra time before they could make it on their own. When families come in, I usually tell them it’s six months to a year. Our clients are just really excited that we help them for that time. And the three months of full rent is kind of a release for them. Two years is really good length of stay. Some clients have even told me that if it were to go longer, there might be some people that would take advantage of it, in a negative way. Those words were coming from them, not me.

(#05) By definition, participants can stay in our units for up to two years. But we have found that a year is probably ideal, nine months to a year. If a resident is in that program any longer than that, they tend to get a little too comfortable, so nine months to a year, and especially, with our local economy.

(#06) We have several transitional programs. The maximum length of stay in the site-based program that uses HUD funding is two years. We ask program residents to set a goal of a one-year stay. The average stay is generally around a year, but we have a range of people with shorter stays and then we often serve those with the most barriers for up to the two-year limit.

(#07) (Not a current OVW grantee) With the HUD-funded congregate program, people can stay for up to 24 months, but we do our best not to have anybody there that long. I'm not saying we never have. We had a client in the last couple of years that was waiting on immigration-related documentation paperwork and work visas. And that took a really long time, so in that situation, it was perfectly okay. We try not to let people -- I don't want to say "linger" -- but sometimes, if they think they have two years, they won't work towards self-sufficiency, towards increasing income. They get a little complacent and comfortable.

We try to say six months is like the first part of that time frame. And then at six months it's another conversation. "Well, do you still need to pay off debt? Are you still working on X?" Hopefully they'll have employment by six months, but if not, or if they recently lost their job, "what can we do to help you get job-ready? Do you need help going to job fairs? Do you need help applying online?" So, six months is our first review, and then we try to have people into permanent housing of some sort after 12 months.

(#08) (Not a current OVW grantee) With our housing market here and in the surrounding counties, property and rent are very expensive, and there’s little to no subsidized housing anymore, so if any of our clients are going to make it to permanent housing, they need to get a job and to be able to pay market rate rent. Developing job skills is pretty hard to do in a year for some of our clients. Some of them have very low educational levels. They may not have any work experience at all. To get themselves work-ready is very difficult. Others have felonies or mental health issues or speak only limited English, and maybe don’t have literacy in any language.

Under the old regime it was a bit more humane. Now, pretty much from week one, we explain very frankly: "you’ve only got so much time here, and in the space of a year, you need to be earning enough money to pay rent." Before, there was hope that if they were here for two years, they might get some form of low income or subsidized housing, but now we’re realistic and we say you can forget that. That’s not going to happen.

So our participants generally end up working in some type of pretty menial work: housekeeping and hotels, a convenience store or Dollar Tree type of store, waitressing, or retail; hard and unstable work. And we increasingly encourage them to find options like sharing a house with another family.

(#09) One big change that we’ve made in the last couple of years is that our OVW program used to be seen as a 24 month guarantee, and we didn’t feel that that was an appropriate message to convey. So we now describe it as an "up to 24 months" program. If one of your goals is to find secure housing, and you get to the top of the Housing Authority list, and you have a job, then let’s transition you out, if that’s what you identified as what you want to do. If you can accomplish that within six months, great. And that’s partly driven by our board of directors and conversations about our capacity, the need, and the size of our complex.

(#10) The majority of participants plan to utilize the full 24 months in the program so that they can save up more money, and so that they can be in a more stable position at the end of the program.

***Questions to Consider***

1. What is the rationale for having a targeted length of stay that is shorter than the maximum length of stay -- or should they be the same?

* Do shorter time frames motivate participants, or do they place too much pressure on them?
* Can effective case management/advocacy overcome a participant's false sense of security, based on misperceptions about the amount of time it will take to make the necessary progress before her time in the program runs out -- or is it necessary to structure the program to create the appearance of more urgent deadlines for progress?

1. When participants enter the program, are they informed about both the targeted length of stay and the maximum length of stay, or just the targeted length of stay? Why?

* If participants are only informed about the targeted length of stay, does the lack of notification about possible extensions up to the maximum length of stay jeopardize the transparency and trust that the staff try to achieve in their relationship with participants?

1. Is there a fair and objective way to establish targeted lengths of stay with/for each participant, or should all participants have the option of staying for the maximum amount of time allowed?

* Does focusing on the maximum length of stay give participants a false sense of stability, so that they delay in taking steps that need to be taken in order to ensure a sustainable transition by the time their program assistance will end?
* Without conditioning a more extended stay on participation in services or demonstrated progress, what can a program do to help a participant stay on task with the work they need to do on such matters as developing employment income, addressing credit and housing history problems, addressing outstanding legal issues, and doing the groundwork for a housing search?

1. How do the program's length of stay policies vis-à-vis maximum and targeted length of stay impact staff decisions about the survivor households the program can or cannot effectively serve?

### Comments Explaining How Programs Take Different Approaches to Granting Extensions

***The following comments apply to programs that offer a baseline period of transitional housing (presumably at least the OVW-specified minimum of six months) and then consider participants' requests for extensions (within the 24-month standard timeframe). As the comments indicate,***

1. *Some programs don't grant extensions;*
2. *Some programs are routinely willing to extend a participant's stay for a variety of reasons;*
3. *Some programs only extend a stay under specific circumstances;*
4. *Some programs make extensions contingent on participant engagement, effort, or progress. As discussed in the Section 2 narrative, these approaches may be at odds with the* ***intent*** *of the VAWA voluntary services requirement.*

***Note: Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#11) The average stay in our shelter-based phase 1 program is a little over 30 days. It is expected that most people will stay in our phase 2 clustered program for the remainder of the two years. (A client must spend time in phase 1 in order to move to phase 2, and the two-year limit counts the combination of time in both phases of our TH program.) In the shelter-based program, we try to update their case plans every 30 days; by the third case plan, three months, it's probably time for them to look for permanent housing if they're not interested in moving to our phase 2 program. But we don’t say "OK, you've been here for 3 months, it's time to go." It's really based on what their situation is. Some survivors stay much longer -- people who can't put together enough income to move out into permanent housing. We have some that get a court and protection order, and then go back to their family in another state; we can help them with bus tickets or gas. Our phase 2 program gives people who are working on things -- college, trade school, GED, waiting for disability benefits to come through -- some additional time before they have to be able to pay for permanent housing.

(#12) We normally start everyone off with a six month contract. If they’re progressing towards goals, but have barriers, we have flexibility to increase to 7 or 8 months - whatever we need to do - in order for them to have what they need to pay their own bills and rent if they don't get the subsidized housing from another source. Most are in the program for less than a year.

(#13) Maybe a resident has just gotten the younger kids into daycare and is just working on getting that employment, and another six months would help them feel a little more stable and ready. Maybe a person is working on disability benefits, and they need more time to get that settled. Sometimes it’s just really hard finding permanent housing, even if they’re looking. The Housing Authority is open – if they know you’re on top of things, you’re looking, you’re really working toward finding an apartment, but just haven’t found a place, they’re open to extending your stay.

(#14) Although they have up to 24 months, we don't say that up front; we say that every six months we're going to review where you are, and as long as you keep moving forward there is a limit of 24 months but that does not mean you get 24 months. When they first enter our housing program, two years might seem like a long period of time; but spending too much time at the beginning, concentrating on their victimization, leaves too little time to get them truly ready to be on their own. One of the significant challenges of a DV- or sexual assault-focused housing program is finding the right balance for each participant. The 24 months could be a blessing and a curse at the same time. It gives the victims a sense of, "I thought through all this stuff and I'm here now, and I can just relax." But in reality, two years is too short a time to relax. They have to keep moving and as a compassionate person, you want to give them that time to relax and instead you need to be pushing.

(#15) Our transitional housing is a two-year program. The client will sign a lease for the first year, and after the year is over, we'll come back and talk to them and see if the program is working for them and if it's something that they want to continue and then we'll sign another lease for another year.

(#16) Overall, 12 months has been a good amount of time. If there are some participants who might need extra case management support, we can extend that. We do follow up for at least three months. But most of the time, once they hit that year, they’re pretty well off, and they feel like they can manage on their own. For the people who still struggle by the end of that year, I don’t know that extending assistance would be beneficial. I think that if you extend it another year, they would still probably be at the same spot. I think part of it is just their other struggles - poverty, lack of budget, maybe lack of full engagement in the program, lack of dealing with mental health issues, or other barriers that they haven’t figured out how to overcome.[[14]](#footnote-14)

(#17) The targeted length of stay is 18 months. When families complete the program, they have to move out. We would have to apply to the state for an extension, so it would have to be a very short extension and very specific – you have found a unit that you can move into, and it’s out of county, so you have to arrange for moving, and you’ll be able to do that in the next 30 to 60 days. An extension would definitely not be granted for anything that’s vague, like “still looking” or “not quite sure what to do.”

(#18) The maximum length of stay in our program is 24 months. We can extend to 36 months in six month increments. Typically if we know that permanent housing is just on the horizon, or if there had been some setback, for example, if a divorce was pending and alimony was on hold for another four months then we can extend that time because we know that person may have more to work with.

(#19) If someone was in a situation where this assistance was ending and there was something tangible on the horizon, we would do what we needed to bridge until they were in housing. If we had to extend someone, we would use some of the local rent assistance we get from the City. Those funds are more flexible, without restrictions on what we can use them for.

(#20) Most people stay for a full year unless they transition into our HUD-funded permanent supportive housing program. At six months we ask that they apply for an extension and then we look at their progress towards their goals: how much they’ve saved, if they’ve addressed barriers, etc. So every six months they can apply for an extension up to two years. Participation in services is voluntary, but the advocate will check in with the client to see if she is making use of the services. But their priority is always discussing housing options. Are you seeking other housing options? Do you need other housing resources? Along with other resources they may need.

(#21) We would consider an extension if there were extenuating circumstances that precluded the resident from moving out after 24 months and being able to establish and sustain their own permanent housing, for example, if there were a health issue that put progress on hold, or something like that -- something unavoidable and not caused by the resident – a situation beyond their control.

(#22) The maximum length of stay is two years. After they’ve been here nine months we start preparing them for the second year. At nine months they can apply for the second year. Basically it’s just a sit down to explain to us what they’ve accomplished during this first year, what they hope to accomplish in that second year, and how they can serve as a mentor to other residents during their second year. We look at their program participation, adherence to policies, whether they’ve developed a good sense of community, no major drug or alcohol issues. In their second year, we're looking for them to be examples to the new residents, by maintaining consistent group participation, sharing their experience, following community chore policies, and getting consistent apartment checks.

(#23) After two years in the program, families would move out, but it's becoming more and more difficult to find affordable housing. So 24 months is the goal, but it’s a flexible deadline, depending on the situation. Every family signs a one-year lease on their unit, and we extend that lease based on their individual situation.

(#24) Everyone starts off the program with a six month stay, and we try to get people in the mindset that they're receiving six months of assistance, because we want participants to work hard to get to a place where they can support themselves financially. If they continue to try hard and do everything in their power to improve their situation and they’re still struggling, then we’ll do a three-month extension. We tell them, "we'll help you three months longer," and we extend their stay for three-months at a time until both the participant and our agency feel they’re in a place where they can support themselves. We haven’t had anyone who needed the full 24 months.

(#025) We’ve extended one person once. We had to send a letter to OVW that said why we felt this was necessary, that this client had taken all the steps she could and just needed some more time, and that she was a person with lots of barriers. She was a felon, couldn’t find a job, and there were a lot of things going on.

(#26) We've been flexible. Some of the things we work on in transitional housing are repairing credit and building savings; and some of that just can’t be done in six months. As long as they’re working the program and working with us and doing their part, we’re happy to extend them or keep them a little bit longer. In general, we just extend it to a year.

(#27) Nine months to a year is our internal guideline, but we wouldn’t discharge somebody at nine months or a year if they were working toward a goal and just needed some extra time. Let’s be honest. You do get those people that do just enough to be in compliance, but won’t do anything else. Those people we probably wouldn’t make an exception for, but someone who was truly working the program and just needed extra time, we would let them stay.[[15]](#footnote-15)

(#28) With the year-long program, the struggle is that once everything is in place, there’s a challenge with vouchers. If they don’t have a voucher at the end of the year, they can't get affordable housing. Although a year may seem like a long time, it isn't when you're dealing with all the trauma, and you're trying to help them get a job or more education.

Two years has been the perfect length of time, with a voucher pretty much guaranteed to come through even if it’s at the last minute. Within the two years you’ve gotten them adequate mental health care, they either have a job or some education under their belt, things seem to be pretty stable, and they're ready to transition to being on their own, and to choose where they live. Giving them a voucher empowers them to say, “I want to live on a different street or in a different town.”

We’ve been fortunate that our participants are able to get vouchers anywhere between a year to a year and a half. We’ve had a couple participants that have stayed right up until about the two-year mark. People leave within a few months after they get the voucher, because they only have a limited amount of time to use it before they lose it. Vouchers are like gold. They don’t want to give them up. So, we’ll work with them as long as the Housing Authority will allow us to help them find a location that’s good for them, and then we’ll follow them afterwards if they want.

(#29) We could extend them past the 12 months, by grant regulations, but we don’t for budgetary reasons. There was one exceptional situation where a landlord became abusive and started harassing a young mother, triggering her trauma. It was a very disruptive situation for her and her daughter, who had some mental health issues. So we helped them relocate, and their 12 months began again. Unless there are extenuating circumstances like that, we just do a 12 month lease.

I think 12 months works pretty well for 70 percent of our clients. I think 30 percent could use a little more time to really turn the corner. A lot of people experience a big shift right at the 12-month mark -- it’s almost like night and day between months #8 and #12. And it's beautiful to see people really ready at month #12, when things have fallen into place. But I’d definitely say that 30% of our clients have additional barriers, or could use a financial break for a little bit longer, or have just paid off their debt and now need a little longer to build some savings. Most clients can make it in 12 months, and on a case by case basis, 18 months would be great for some, and there are some who could benefit from 3-6 additional months of subsidy.

(#30) (Not a current OVW grantee) When people enter the program, we tell them it’s 20 months, and the last four months are extensions. Four years ago when I started here, this was a nine-month program, but no one was getting housing in nine months. So we doubled the stay and it helped. Typically, people are ready to move on before they actually find suitable housing. There are endless lists and people wait for a long time while nothing opens up. Even if they get a voucher, they have trouble finding a landlord who's willing to rent to them for the amount of rent the housing authority allows in a voucher-assisted unit.

If someone were getting to the two-year-limit, and they were very close to housing -- about to sign a lease, and could get housing in a week or two, or even a month -- we could be flexible, but if there’s no other alternative in sight, then no. If there's nothing on the horizon as they are getting close to the two-year limit, we try to find another temporary alternative place for them. Thankfully that hasn’t happened very frequently. In one case, a participant moved to another two-year transitional program.

(#31) We do three-month leases, so we don't have to do the paperwork every single month, and we also have a two-page application and a two-page income verification form that we ask folks to fill out for every lease renewal. And that way we get a check-in about where they are and make sure that we’re calculating rent correctly based on current income. We also talk with folks about making sure they’re paying their rent, following their lease agreement, not causing undue disturbances to the neighbors, complying with basic health and living inspection, head inspection once a month, and tenancy-related requirements. They’re not required to use any other services.

(#32) We have a maximum length of stay of two years, but there is an option of a six month waiver if the survivor cannot find housing during that timeframe. Two years is actually a pretty good time frame, because it really does take a while for people to unpack mentally and emotionally and start working towards life goals -- because it’s been so long since they’ve been able to do that. We really see so much progress between that one and two year period.

(#33) (Not a current OVW grantee) It’s a two year program, but we have the capability of extending people as long as they’re taking active steps – or they’re really close to getting housing. We’re not going to make somebody homeless again. We’re going to work with them. So we will extend a certain number of people, but really with the level of support that they get and the DV priority, most of them access subsidies within the two years. The only issue we have is with our immigrant population, whose status is sometimes a barrier to accessing housing within two years.

(#34) Our OVW-funded transitional housing program is 24 months. We target stays for a year and then we give extensions after that. Most of the time we tell them that it’s a one-year program and then if need be, because of financial situations or extenuating circumstances, we can extend them up to one more year. If, at the end of a year, I don’t think they’ll be able to sustain housing, I can extend their stay in the program up to the 24-month limit, and we can focus on the issues that are preventing them from becoming self-sustaining.

(#35) (Not a current OVW grantee) A person might sign an agreement with us to stay here up to a year, and if they don’t do anything in that first year or don’t seem interested in accessing services, why would we want to renew an agreement for the second year, when somebody else is waiting for an opportunity to come in the program and that person actually does want to find a job and to learn a skill?

(#36) Participants don’t pay anything. They sign a contract providing a minimum of six months of assistance, and pending an evaluation of their situation, we can extend them for up to two more three-month time periods. The maximum they can stay is one year. We look at where they are with their education or their job management, and what they have been doing to stabilize their economic situation. And if there are any barriers for them to get an apartment leaving our program.

They know we have a time limit when they come into the program. The six and nine month evaluations are not so much an issue of whether a participant still deserves assistance and/or whether we should end their assistance. We use those evaluations to assess whether we are getting them to a point that when they come to the end of the assistance, they will be prepared. Have we done what we need to do to get them to a point where they won't need the assistance? And if there are still some barriers that that individual is facing, what do we do in the next three months to get them to where they need to be? There are barriers that they don’t have control over and those are typically the ones that keep them in the program through that full year.

(#37) If we had the flexibility to extend rental assistance beyond those six months, that would be helpful for some of the families, who go in and out of crisis almost continuously because they’re relying on service-related jobs because they can’t qualify for any other type of professional level job.

(#38) They start off with a year and then when the year is almost up we revisit their housing search. So we can give them extensions for up to six months if they’re actively looking for permanent housing. But they have to prove that they’re actively looking for permanent housing in order to get the extension.[[16]](#footnote-16)

(#39) Sometimes if mom has or wants to go to a one or two-year school program, that’s something we would look at if they’re actively involved in a school program that’s going to create their economic stability by the time they’re done, then that’s a great opportunity for them. A lot of times somebody’s got pretty significant PTSD or they have a child with a disability or PTSD. PTSD is going to create a longer stay with us while they’re working on those barriers. Everybody has different goals that they’ve set for themselves and so some people stay for four months and some people stay longer. I know I’ve only had one person in the history of having OVW funding that we’ve actually asked for longer than 24 months, and that was somebody who was working on immigration.

(#40) We also have scattered-site units in the community. With those, the clients find the apartment themselves. They have to have reasonable, viable options for income within a six-month window of time. The support wouldn’t end at six months, but just within six months they need to be taking significant steps -- like working -- towards being more able to support themselves. We’ve got a client right now who we just can’t accept into the program. She’s got really significant trauma that keeps her from being able to work.

***Questions to Consider***

1. Some programs offer participants a baseline guaranteed period of time in the program, and then require participants to periodically meet with staff to assess their needs and progress, and to request an extension. How can such programs be structured, so that they adhere to the voluntary services requirement, while providing program staff with a framework for helping participants stay focused and on track to meet their targeted goals?

* Is there a difference between offering an extension to participants whose efforts have "earned them" extra time, as compared to discharging participants who "haven't taken sufficient responsibility" for achieving their targeted goals?

1. Should extensions only be granted for very specific situations (e.g., lack of childcare, waiting for approval of a U-VISA, a specific unit of housing will become available within 30 days, first paycheck is coming in two weeks, etc.), or should they be offered more generally?

* When and how should the requirements for being offered an extension be explained to a participant? If at the outset of participation, a program doesn't fully explain the grounds for approving or denying extensions, does this jeopardize the transparency and trust that the staff try to achieve in their relationship with participants?

1. Lack of control of one's living situation often characterizes an abusive relationship; how does the program protect participants from the re-traumatization that might occur around the stress and uncertainty attendant to applying for an extension to remain in the program?

* What steps does a program take if they perceive that the stress of an impending deadline and decision about a program extension is adversely affecting a participant's healing?

### Comments Explaining Why Participants Might Exit Before Reaching the Limit on LOS

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) Most families take full advantage of the time. Individuals come and go a little faster. They don’t have child care expenses, and don’t need to find a place that keeps their children in the same school system. They’re more flexible. Typically, the people who leave early are the ones who already have a job or the education to pursue a job. Some people just don’t need as much assistance with jobs as others. As long as it’s working for the participants and their time isn’t up, I encourage clients to stay and save as much money as possible. It’s a great resource to have when they leave. If there’s still a danger for the DV survivors, we encourage them to remain in the program for safety reasons. More often, the participant sets and attains their goals and decides if they want to move on or not. We leave it up to them and help them think through the consequences of leaving or staying a little longer.

(#02) Some leave early because they have other opportunities that they want to pursue. I can think of a woman who left because she wanted to move closer to her family in another city. That has come up on several occasions. One woman moved to another housing program because it was an education-based program that enabled her to go to college and live in housing there. One woman got married. So, some of them move on because of there are opportunities that present themselves. And some women move on because they can’t pay the rent any more.

(#03) The stated length of stay is up to 24 months. We’ve had people who transitioned earlier because they found other housing, tor moved out of the state into new housing. It’s always exciting when they’re able to reach their goals before their plan.

(#04) Often, participants exit the program before they reach the maximum length of stay because housing options came up for them or because they got a great new job, and with their recalculated rental contribution, they’re paying as much for our unit as they would be paying independently. A lot of our clients leave early. They have family and friends they want to move closer to. Occasionally, we have clients who leave because they believe they’ve been found by an abuser, so we help them relocate somewhere safer. But most of the time, people leave because they have a positive option available through work or school for housing, and they don’t need to stay with us anymore.

(#05) Sometimes, if a resident is leaving for permanent housing before their year is up, we might have a concern that they’re not going to meet the financial part of the permanent housing. We would have that conversation with them, but we wouldn’t try to dissuade them from leaving. They’re always welcome to come back for groups and programs.

(#06) Generally speaking, if a participant leaves before 24 months, it’s because they’ve found their own permanent housing and no longer need or want our support. Or, because they’ve chosen to return to their partner, or to move out of state, or to go live with friends. I don’t know that we’ve ever tried to dissuade someone from leaving earlier than we had anticipated; it’s their choice. I’ve had conversations with people leaving the program about what that means, how things look in their life, what are the gains, what are the consequences – not in a punitive way, just consequences of choice. I try to have a conversation if I’m allowed the opportunity, but I don’t think I'd try to convince someone not to make a decision they wanted to make.

(#07) If someone leaves before six months, it’s absolutely fine; they determine their own path. We help them. Just because they leave our program doesn’t mean they can’t still receive advocacy services from us. The goal is to get them re-housed. Some women work full-time and have a good income, and 45 days gets them through the court hearing and then they’re ready to transition to permanent housing. Some people need longer; some people are fine in three months, can save a couple of paychecks, and they’re on their way.

***Questions to Consider***

1. When a participant is contemplating an early departure from the program, how does the program help the participant understand and evaluate the relative benefits and risks in a way that is supportive and nonjudgmental?
2. What are the various advantages and disadvantages of an early departure, for example, if a participant finds an attractive apartment or if their names comes to the top of the housing subsidy waitlist?

### Comments on How Length of Stay is Impacted by Source of Funding

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) We operate a site-based, transition-in-place program, so when participants transition out of the program, they’re still in the apartment complex, and maybe the same apartment. We have a mix of OVW, HUD, private funding, grants, and contributions. OVW-funded participants are in the program for about 18 months or so, and can remain for up to two years. Participants in the HUD-funded units stay for 120 to 160 days, although there might be medical exceptions, pregnancies, or behavioral issues (e.g., hoarding) that might require a longer stay. It's the same for both individuals and families.

Although some families are ready to make the transition to independence within a few months, other families can’t get to a point where they're able to transition-in-place, pay their rent, and move forward within the 120 to 160-day period. That is a challenge, which is why we're currently exploring other avenues of funding; we want to be able to gradually increase participants' share of their rent and gradually decrease our share, while they receive the needed supportive services, until they can get to a point of self-sufficiency.

Another challenge with the HUD-funded units because of the shorter time frame is being able to provide adequate services: When you turn over participants every 3-4 months, that’s a lot of turnover. In our program we provide the furnishings, the clothes, and food -- because they’re homeless families; when they come in, they have little or nothing. We need enough staff to receive the new clients and to continue working with the exiting clients for at least the 12 months of follow-up that we provide to make sure they become stable.

(#02) We operate two transitional housing programs for DV survivors. One program is jointly funded by OVW (30%) and HUD (70%) and provides up to 24 months of transitional housing for 9 families who became homeless as a result of fleeing DV. The second program is jointly funded by HUD and the county, and provides up to 12 months of transitional housing for 11 families who became homeless as a result of fleeing DV.

Some folks leave the OVW/HUD program before the 24 months, some max out the 24 months, depending on how soon they’re able to get back on their feet. We have a lot of pressure from HUD to reduce our lengths of stay in the program, to reduce costs or serve more people. We make sure our folks don’t stay more than 24 months in the program. The problem is finding affordable housing that participants can move to.

(#03) We have two programs, one which uses HUD funding, and one which uses OVW funding. They both have transition-in-place potential. Both OVW and HUD have maximum lengths of stay of 24 months, with up to six months of follow-up. Our average length of stay in transitional housing is around 12 months but there’s much more flexibility with OVW. HUD wants to see people in and out. The more people you serve the better our score when the Continuum of Care ranks our program. We find that most of the participants who we’ve been serving in the last two years are getting into affordable housing.

(#04) Under the OVW grant and transitional housing program model, our housing assistance could be longer. The duration of assistance varied from person to person, simply because people come to us with different states of trauma. Some survivors are able to pick up pretty quickly and get going and access education and job skills training and get on their feet. We've served others with dual diagnoses – post traumatic stress, bipolar, histories of addiction. We had one woman who had been held hostage for two years. To have any expectation that someone can immediately get on their feet in a few months' time, with the kind of trauma they’ve experienced, I think is unrealistic. Especially with the very low wages in our tourist based economy. I feel like the OVW and HUD transitional housing monies gave me the flexibility to be able to provide better services. In the program I run now, we have 12 months to support their healing and get them ready for independent housing. We're being asked to cut that time to four months, and I’m concerned that we’re being asked to do an impossible task.

(#05) (Not a current OVW grantee) In the past couple of years, we’ve been pressured so much by our government funders -- HUD, the county and the city -- into decreasing our stay lengths and focusing on housing as opposed to DV intervention. Program length of stay used to be the standard "between six and 24 months," based on participant needs. Now our program is only one year long. That’s a big change because our population has a lot of barriers.

(#06) We are concerned about HUD's apparent push for shorter stays in transitional housing. In our community there’s simply no place to go. At least once a year, we have a participant who has spent two years in our transitional housing program and has to ask for a waiver because there is simply no available affordable permanent housing in our community. In the beginning, our strategy was that folks could live in our transitional housing program, get on the Section 8 waiting list, which at that time was a 1½ to 2 years long, and then transition out to permanent housing with a voucher. Now, our Section 8 waiting list is 4½ to 5 years long. The idea that they could transition to permanent housing in an even shorter time boggles my mind.

(#07) When the CoC scores our program, we get dinged because, on average, our survivors stay in their transitional housing for more time before they move on to permanent housing. So even though historically, our program has had the highest rate in our CoC for placement in permanent housing, we're told that "people get into your housing and say, 'I've got 24 months,' and so they're not motivated until the last four months." We don’t see it that way. Our services are much more comprehensive than other TH programs in our CoC.

I'd say the biggest struggle is the time limits. We were one of the first agencies in our Continuum to do rapid rehousing, using HPRP [federal Stimulus] funds in 2009. As the program evolved, the emphasis on shorter stays increased. When HPRP ended and funding for rapid rehousing went to ESG, our CoC changed the eligibility from 50% of Area Median Income (AMI) for the entire time to 50% of AMI for the first 12 months, and then 30% of AMI for the next 12 months. And that was very counter to the orientation of our program, which is focused on financial empowerment and self-sufficiency, because hopefully, after a year of housing, most clients would be above 30% of AMI. Now, our CoC wants to rapidly rehouse people in six months.

Once survivors move into their scattered-site unit, and start a new routine, and the adrenaline rush of getting everything taken care of in shelter is over -- the protective order, the mainstream benefits, their child's situation, etc. -- they're more isolated and the trauma catches up with them, and that’s when they really need more of the counseling and support groups. It’s not something they can just deal with and okay they're good; they need those supportive services and the time -- to settle into their apartment, take care of their kids, work part-time for a couple of months and recover emotionally -- and that’s what we want them to be allowed to have. Probably the non-survivor population also has things going on that they have to deal with; but with survivors, it’s a lot more complex: there are still safety and legal issues to resolve; financial issues to resolve. For example, it may appear on paper that they have assets, but they can’t access them, but those assets prevent them from being eligible for some of the mainstream resources. And they don't have the custody and child support resolved because they haven’t been to court for their divorce yet. Survivors going into rapid rehousing or transitional are still dealing with all of that, sometimes for the whole first year they're housed.

We’ve had clients exit after eight months, saying, "I'm good, I'm taking this job, my budget’s good, so I'll leave the program early." But I think that if we want to meet people where they're at, and be truly voluntary and allow clients to go at their own speed while they recover, that's hard to do on a tight timeline; and the risk is someone ending up homeless again. I'll be really interested to see how many rapidly rehoused people land back in shelter. So they get four months of assistance. They might pay the fifth month, something happens, they get evicted, and they end up back in shelter. From what I understand from our Continuum, they can be rapidly rehoused as many times as needed. I have trouble understanding how that’s moving the needle, and our organization feels very strongly that that’s not the best model for DV survivors. So our board has made a commitment to look into alternatives like a capital campaign to build something or to acquire property, so we can still have a percentage of our housing program that's up to 24 months. When we had a monitoring visit from OVW, this was one of our primary concerns, how we’ve made a commitment to OVW to offer up to 24 months of housing, but can't honor that commitment if we continue with HUD funding for leasing costs.

(#08) (Not a current OVW grantee) We have a cool program we worked out with our state housing finance agency. They created a voucher specifically for victims of domestic violence or sexual assault. People can come through our shelter and we can get them a voucher pretty quickly. It gives them subsidized housing for three years and then the goal is to not need subsidized housing by the time your three years are up. I’ve shied away from HUD rapid rehousing, because I feel the two year time limit is too short for what has been years and years of abuse.

Different models work for different people; it depends on where folks are, what their needs are. That's why we decided to do multiple types of housing. I think the fact that everyone comes through the shelter has helped with the scattered-site program, because everyone has already bonded with someone on the staff.

(#09) A HUD-funded rapid rehousing participant might have shorter-term assistance than a person in an OVW-assisted tenancy. We just get really adept at knowing what all the parameters are with all the different funds that are part of our budget and trying to mix and match as much as possible. Put this survivor under this program and that survivor under that program, so that we can respond as much as possible to the circumstances they come in with.

***Questions to Consider***

1. Providers who receive both OVW and HUD grant funding may choose to operate separate programs, allowing longer stays in their OVW grant-funded program, and shorter stays in their HUD-funded program, in keeping with HUD guidance, or the requirements of the written standards adopted by their Continuum of Care or the state, county, or jurisdiction administering their ESG grant.

* What is the best way to explain to survivors why participants in one program are allowed to receive longer-term assistance than participants in the other program?
* What are the pros and cons of allowing participants in one grant-funded program to transition to units that are part of the other grant-funded program?

## Appendix A: Project Description and Methodology

### Project Description: Summary

***Transitional Housing for Survivors of Domestic and Sexual Violence: A 2014-15 Snapshot*** provides an in-depth look at the challenges and approaches taken by Office on Violence Against Women (OVW)-funded providers to address the needs of survivors who have become homeless as a result of having fled domestic violence, sexual assault, dating violence, and/or stalking.

The information in the twelve chapters of the report and accompanying webinars, broadsides, and podcasts comes from 124 hour-long interviews with providers and an in-depth review of the literature and online resources. Our analysis of provider comments was informed by the insights of a small project advisory committee (Ronit Barkai of Transition House, Dr. Lisa Goodman of Boston College, and Leslie Payne of Care Lodge) and the reviews and comments on the initial drafts of chapters by Dr. Cris Sullivan (Michigan State University) and Anna Melbin (Full Frame Initiative).

Although the components of a transitional housing (TH) program -- a place to live and staff support for healing, decision making, and taking next steps -- are simple, the complexities attendant to providing effective survivor-centered assistance are many, as illustrated by the following enumeration of topics covered in the report (which, in many cases, only scratches the surface):

* [Chapter #01](http://www.air.org/THforSurvivors/508_Ch_01_Success_Msrmt.docx) - ***Definition of Success & Performance Measurement*** - Explores how funders and providers define and measure success and program performance; how participant-defined goals are tracked; how participant feedback is collected; and how the definition and measurement of success affects program decisions. Highlights innovative performance and participant outcome metrics. Discusses approaches to collecting, storing, releasing, and destroying data, and the software used to collect, analyze, and report on program data.
* [Chapter #02](http://www.air.org/THforSurvivors/508_Ch_02_Access_Selection.docx) - ***Survivor Access and Participant Selection*** - Explores the distinct and overlapping roles of domestic violence (DV) shelters and transitional housing; the pathways that survivors take to get to transitional housing, and how providers select participants from among "competing" applicants for assistance; why providers might decline to serve certain candidates; who is and isn't served; and the regulatory and legal framework within which those processes occur.

* [Chapter #03](http://www.air.org/THforSurvivors/508_Ch_03_Prog_Housing.docx) - ***Program Housing Models*** - Explores the strengths and challenges of alternate approaches to housing survivors in transitional housing and transition-in-place programs. Examines the pros and cons of time-limited housing vs. transition-in-place housing, congregate vs. clustered vs. scattered site housing, and provider-owned vs. provider-leased vs. participant-leased housing. Discusses how the type of housing can affect participant selection and the services offered.
* [Chapter #04](http://www.air.org/THforSurvivors/508_Ch_04_Survivor-Centered.docx) - ***Taking a Survivor-Centered/Empowerment Approach: Rules Reduction, Voluntary Services, and Participant Engagement*** - Examines the challenges, strategies, and implications of taking a survivor-centered/voluntary services approach, and how such an approach is integral to operating a trauma-informed program. Explores the potential impacts of funder expectations, choice of housing model, staffing patterns, and diverse participant needs and circumstances. Presents comments illustrating the range of providers' interpretations of and responses to the voluntary services requirement, including their approaches to supporting participant engagement and to addressing apparent lack of engagement. Discusses the concept of empowerment, presents comments illustrating the diverse ways that providers see and support survivor empowerment, and cites an innovative approach to measuring safety-related empowerment.

* [Chapter #05](http://www.air.org/THforSurvivors/508_Ch_05_Prog_Staffing.docx) - ***Program Staffing*** - Explores program staffing levels and the kinds of positions providers maintain; the attributes and qualifications that providers look for in the hiring process; and how they assess the value of having a clinician on staff, having child-focused staff, and having survivors on staff. Examines how programs support and supervise staff, and their approaches to staff training. Presents comments illustrating providers' diverse perspectives about utilizing volunteers, and describing how programs that do use volunteers screen, train, and support them.

* [Chapter #06](http://www.air.org/THforSurvivors/508_Ch_06_Length_of_Stay.docx) - ***Length of Stay*** - Explores funders' and providers' approaches to limiting or extending the duration of housing assistance and services, and the implication of those approaches.

* [Chapter #07](http://www.air.org/THforSurvivors/508_Ch_07_Subpops_Cult_Competence.docx) - ***Subpopulations and Cultural/Linguistic Competence*** – Discusses cultural and linguistic competence and how providers understand and work to achieve it in their programs. Presents diverse perspectives from the literature and online resources and from provider interviews about the challenges and approaches in serving specific subpopulations, including African American, Latina, Asian American, Native American/Alaska Native, Immigrant, LGBTQ, older adult, deaf, disabled, and ex-offender survivors. Includes an extensive review of the challenges, approaches, and legal framework (e.g., non-discrimination, reasonable accommodation, fair housing) in serving survivors with disabling conditions that affect their mental health, cognition, and/or behavior, including trauma/PTSD, substance dependence, traumatic brain injury, and/or mental illness. Highlights OVW-funded collaborations to enhance the capacity of victim services providers to serve survivors with disabilities and of disability-focused agencies to serve consumers who are also survivors.
* [Chapter #08](http://www.air.org/THforSurvivors/508_Ch_08_Constituencies.docx) - ***OVW Constituencies*** - Focuses on the needs and approaches to meeting the needs of survivors of sexual violence -- including survivors of rape and sexual assault, homeless victims of sexual violence, survivors of Military Sexual Trauma, and survivors of human sexual trafficking. Explores possible reasons why survivors of sexual assault constitute only a small percentage of the participants in OVW TH grant-funded programs, even though provider comments generally indicate an openness to serving such survivors. Includes a conversation with senior staff from the Victim Rights Law Center discussing possible options for expanding system capacity to serve sexual assault survivors.

* [Chapter #09](http://www.air.org/THforSurvivors/508_Ch_09_Basic_Svcs_Adv_CaseMgmt.docx) - ***Approach to Services: Providing Basic Support and Assistance*** *-* Explores different frameworks for providing advocacy /case management support (e.g., voluntary services, survivor empowerment, Housing First, Full Frame) and how motivational interviewing techniques could be helpful. Discusses survivor safety and how safety is assessed and addressed (e.g., danger and lethality assessment instruments, addressing batterer- and life-generated risks as part of safety planning, safe use of technology). Looks at strategies and practices for supporting community integration, and providing follow-up support to program alumni.

* [Chapter #10](http://www.air.org/THforSurvivors/508_Ch_10_Obtaining_Hsg_Empt.docx) - ***Challenges and Approaches to Obtaining Housing and Financial Sustainability*** - Examines the challenges survivors face in obtaining safe, decent, affordable housing and the approaches providers take to help them, and some useful resources. Explores the added challenges posed by poverty, and approaches and resources leveraged by providers to facilitate access to mainstream benefits, education and training, and decent employment. Other areas of focus Include childcare and transportation, resources for persons with criminal records, workplace-related safety planning, and approaches and resources for supporting survivors in enhancing key skills, including financial management.

* [Chapter #11](http://www.air.org/THforSurvivors/508_Ch_11_Trauma-Informed_Adult-Child.docx) - ***Trauma-Specific and Trauma-Informed Services for Survivors and Their Children*** – Discusses the nature, impacts, and manifestations of trauma; approaches to addressing trauma; what it means to be trauma-informed; and the steps providers take -- and can take -- to become more trauma-informed. Reviews the impact of trauma on children and families, especially the trauma of witnessing abuse of a parent; and discusses the challenges posed and approaches taken in addressing the effects of that trauma. Includes brief sections on custody and visitation.

* [Chapter #12](http://www.air.org/THforSurvivors/508_Ch_12_Fund_Sources_Collab.docx) - ***Funding and Collaboration: Opportunities and Challenges*** - Examines sources of funding for TH programs, focusing on OVW and HUD grants -- the regulatory requirements, strengths and constraints of each funding source, and the challenges of operating a program with combined OVW/HUD funding. Explores the potential benefits, challenges, and limitations of partnerships and collaborations with mainstream housing/service providers, including confidentiality issues. Presents provider comments citing the benefits of being part of a statewide coalition; discussing the opportunities and challenges of participating in a Continuum of Care; and illustrating the range of gap-filling service agreements and collaborations with mainstream providers. Highlights published reports describing successful collaborations.

Although the report chapters attempt to divide the component aspects of transitional housing into neat categories, the reality is that many of those aspects are inextricably linked to one another: the definition of success, the housing model, and sources of funding play a key role in how services are provided; the housing model, sources of funding, and length of stay constraints can play a role in influencing participant selection; the subpopulations targeted and served and the program's approach to cultural/linguistic competency, the program's understanding and embrace of voluntary services, survivor-defined advocacy, and what it means to take a trauma-informed approach all inform how the program provides basic support and assistance; etc.

### Project Description: Overall Approach

This project was originally conceived as a resource guide for "promoting best practices in transitional housing (TH) for survivors of domestic and sexual violence." However, over the course of our conversations with providers, it became clear that while there are certainly commonalities across programs -- for example, the importance of mutual trust and respect between participants and the providers that serve them, and the fundamental principles of survivor-defined advocacy and voluntary services -- there is no one-size-fits-all "best practices" template for providing effective transitional housing for survivors. Instead, there are a multitude of factors which go into determining providers' approaches:

Survivors from different demographics and circumstances may experience domestic and sexual violence differently and may respond differently to different service approaches. Age, class, race, cultural and linguistic background, religious affiliation, gender identity, sexual orientation, military status, disability status, and, of course, life experience all play a role in defining who a survivor is, how they experienced victimization, and what they might need to support healing and recovery. Each survivor's history of violence and trauma and its impact on their physical, physiological, emotional, and psychological wellbeing is different, and their path to recovery may require different types or intensities of support.

Where a program is located and how it is resourced plays a significant role in shaping a program, the challenges it faces, the opportunities it can take advantage of, the logistics of how housing and services are provided, and the kinds of supplementary resources the program might be able to leverage from other sources. Different parts of the country have different types of housing stock, different housing markets, different levels of supply and demand for affordable housing or housing subsidies, and different standards for securing a tenancy; different regions of the country have different economic climates, different labor markets, and different thresholds for entering the workforce; depending on where they are located, low income survivors could have very different levels of access to emergency financial assistance, health care, mental health care, addiction services, child care, transportation, legal assistance, immigration services, and/or other types of supplemental support.

"Best practices" for a stand-alone TH program in which a part time case manager serves a geographically scattered clientele in a rural, under-resourced region will mean something different than "best practices" for a well-resourced, full-service metropolitan-area provider that affords participants access to different types of transitional housing; that can leverage the support of culturally and linguistically diverse in-house staff and volunteers, that can contribute the services of in-house therapists, child specialists, employment specialists, and other adjunct staff; and that can rely upon nearby providers for additional gap-filling services.

"Best practices" in providing transitional housing for a chronically poor survivor whose education was interrupted, who has never been allowed to work, and who suffers from complex trauma as a result of childhood abuse may well look different from "best practices" in serving a survivor who is better educated, has a credible work history, but who was temporarily impoverished due to her flight from an abusive partner.

"Best practices" in serving a recent immigrant, with limited English proficiency, who lacks legal status, whose only contacts in America are her abusive partner's extended family -- will likely look different from "best practices" in serving a teenage girl who ran away from sexual abuse in her small town home, only to end up pregnant and in an abusive relationship, which she fled when he threatened to hurt her baby -- which, in turn, will look different from "best practices" for serving a middle-aged woman who tolerated her husband's abuse for years, because he supported the family and because she couldn't, and because keeping the family together was what her community and her church expected her to do, and what she would have continued to do until he finally went too far.

While there are commonalities to the approaches taken by the diverse programs awarded OVW TH grant funding, the very nature of the kind of "holistic, victim-centered approach ... that reflect[s] the differences and individual needs of victims and allow victims to choose the course of action that is best for them," called for in the [OVW's annual solicitation for TH grant proposals](http://www.justice.gov/sites/default/files/ovw/pages/attachments/2015/01/14/th-solicitation-finalv2.pdf), argues against too many generalizations about one-size-fits-all "best practices."

Recognizing that survivors from a broad spectrum of demographics and circumstances may have different needs and priorities and goals, may have and/or perceive different options for moving forward in their lives, and likewise, may have different definitions of "success," the OVW refrains from asking its TH grantees to render judgments about the quality of specific program outcomes.

In the absence of a consistent measurement of success and a framework for measuring differences in clienteles and program operating environments -- that is, lacking a data-informed basis for assessing whether a particular intervention constitutes a "best" practice -- we chose to take a more descriptive approach for this report. Drawing from providers' own words, the literature, and online resources, we have attempted to frame and provide context for the broad range of challenges and choices that providers face; to describe and offer context for and examples of the approaches they take in furnishing transitional housing for survivors; and to highlight some of the unresolved issues and difficult questions that providers wrestle with.

### Project Methodology: Collection and Analysis of Data from Provider Interviews

#### Development and Implementation of the Interview Protocol

Drawing from information gleaned from the literature and online resources, and from some of the project and advisory team members' personal experience in working with transitional housing programs and/or providing services to survivors of domestic violence, we developed a list of topics and potential questions that we hoped to cover in our provider interviews.

Because there were so many potential subjects to discuss and only an hour to have those conversations, we divided the topics into separate interview protocols. In addition to basic descriptive information ("universal topics")[[17]](#footnote-17) that would be collected in each interview, we defined four distinct sets of topics[[18]](#footnote-18) that would be sequentially assigned as interviews were scheduled. Over time, we eliminated certain areas of questioning from the interview protocol if we were not getting new information, and added topics or questions, as we identified gaps in our information. By the time half the interviews had been completed, the four lists of topics/subtopics had been condensed into three lists/interview protocols.

Pursuant to early discussions with the OVW, we agreed that the initial protocol would be "field-tested" by conducting interviews of staff from nine TH providers that the OVW identified and reached out to on our behalf. We also agreed that our interviews would be conversational and driven by the providers we were interviewing. That is, ***although we had lists of topics and questions that we might want to address, we would follow the lead of the provider to make sure we covered any issues or concerns or approaches that they wanted to highlight. Rather than asking a uniform series of questions, we would use our protocols as guides, rather than as interview scripts***. To realize this objective, our team worked together to make sure we had the same general understandings of the protocol and the purpose of the interviews. The nine initial interviews were all conducted by pairs of team members, to facilitate full-team participation in our review of those interviews and in any revisions to the protocol based on that review.

Our team followed up the OVW's initial outreach to the nine providers with emails elaborating on the project (and attaching the OVW's initial letter), and providing supplemental information emphasizing the voluntary nature of participation and how ***provider responses would be kept confidential***.

Each interview began with an introduction of the project; an explanation of how we intended to create a resource document that would describe the what, how, and why of providers' efforts ***in their own words***; a request to record the conversation; and an assurance that ***once the project was over, recordings and transcripts would be deleted, so that all that would be left would be anonymous comments***. We followed this same procedure throughout the project, eventually reaching out to almost 250 providers and securing the participation[[19]](#footnote-19) of over 50%. Early on, we modified the process, per the request of some of the providers, and began sending a tentative list of topic areas along with the email confirming the date and time of each interview. The email emphasized, however, that the provider should feel free to steer the conversation as they saw fit, to make sure we covered any issues, concerns, or approaches that they wanted to highlight.

Starting with the first "field test" interviews in June 2014 and ending in February 2015, the project team completed interviews with 122 TH providers and one legal services provider that partnered with a TH provider (the Victim Rights Law Center, which asked to be specifically identified), and conducted a joint interview with two providers of LGBTQ domestic violence-related services (identified by Project Advisory Team members, in response to our request for help identifying experts who could help fill that information gap). The project director conducted 62% of the interviews and read the transcripts of all the other interviews.

Of the 122 providers, 92% (112 providers) were current recipients of OVW TH grants; another eight providers had recently lost their OVW grants and, at the time of their interview, were either operating a TH program with other funds, or had ceased TH operations. (Some of these providers subsequently received OVW TH grants.) Only two of the 122 TH providers interviewed had never received OVW TH grants (and were HUD- or state-funded). Fifty-one (42%) of the TH providers we interviewed were current recipients of one or more HUD Continuum of Care Transitional Housing (TH) or Rapid Rehousing (RRH) grants and/or a HUD Emergency Solutions Grant (ESG) RRH grant.

#### Processing of Interview Data

All interviews were submitted to a transcription service and the transcript was reviewed for accuracy (and corrected, as needed) by the project director. Transcripts of the interviews were entered into NVivo, a qualitative data analysis software, and then sentences or paragraphs that pertained to each of 27-30 project-defined topic areas[[20]](#footnote-20) were coded as being related to that topic area. The project director performed the large majority of coding, and reviewed (and, as needed, modified) all of the coding decisions by the project associate, thereby ensuring coding consistency.

The selected provider comments pertaining to each topic area constituted a voluminous amount of data, and had to be boiled down, so that they could be shared with our Project Advisory Team members, and eventually incorporated into the report. Interview comments were edited for clarity and brevity, with an absolute emphasis on retaining the voice and essential message of provider comments. The interviewer's voice was removed. Names of people, places, and programs were removed and replaced with generic references to ensure confidentiality and anonymity, as had been promised to providers at the outset of each interview, and in our outreach correspondence. The project director did the overwhelming majority of all such editing, and reviewed (and, as needed, modified) all edits proposed by the project associate.

These compilations of provider comments (still averaging 20-30 pages, after editing) were shared with members of our Project Advisory Team and reviewed and discussed in a series of thirteen 90-minute meetings over the course of several months. Insights from those conversations, as well as information and perspectives from the literature and online sources were integrated into narratives that supplement the extensive presentation of provider comments in each of the twelve chapters.

Although this is a qualitative study and not quantitative research, we have included the large majority of the provider comments pertaining to each of the covered topics to provide the reader with not only a ***sense of the range of challenges, approaches, and philosophies***, but also with a ***sense of the frequency with which they were mentioned or reflected in provider comments***. Some of the comments will seem very similar to one another, some will differ by nuance, and some will be dramatically different.

This report does not include the very important perspective of victims/survivors. Collecting the feedback of survivors served by OVW TH grant-funded programs was deemed by the OVW to be outside the scope of the Technical Assistance grant that generously funded this project. Although our "***Snapshot of Transitional Housing for Survivors Of Domestic and Sexual Violence***" is missing that perspective, we hope it is nonetheless useful to the dedicated providers, researchers, and government officials who are committed to supporting and strengthening these and other efforts to address the scourge of domestic and sexual violence.

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1. As stated on page 2 of the NCDVTMH's [*A Systematic Review of Trauma-Focused Interventions for Domestic Violence Survivors*](http://www.nationalcenterdvtraumamh.org/wp-content/uploads/2013/03/NCDVTMH_EBPLitReview2013.pdf) by Warshaw, Sullivan, and Rivera (2013):

   *"Although many couples engage in mutual or low-level violence that does not alter the power dynamics within their relationship, the larger social problem of “battering” is a form of gender-based violence characterized by a pattern of behavior, generally committed by men against women, that the perpetrator uses to gain an advantage of power and control over the victim (*[*Bancroft, 2003*](http://lundybancroft.com/books/)*;* [*M. P. Johnson, 1995*](https://www.jstor.org/stable/353683?seq=1#page_scan_tab_contents)*; Stark, 20*07*). Such behavior includes physical violence and the continued threat of such violence but also includes psychological torment designed to instill fear and/or confusion in the victim. The pattern of abuse also often includes sexual and economic abuse, social isolation, and threats against loved ones. For that reason, survivors are referred to as “women” and “she/her” throughout this review, and abusers are referred to as “men” and “he/him.” This is meant to reflect that the majority of perpetrators of this form of abuse are men and their victims are women. Further, the bulk of the research on trauma and IPV, including the studies that met the criteria for this review, focus on female victims of abuse. It is not meant to disregard or minimize the experience of women abused by female partners nor men abused by male or female partners."* [↑](#footnote-ref-1)
2. As stated on page 2, of the Missouri Coalition's [*Understanding the Nature and Dynamics of Domestic Violence*](http://www.ncdsv.org/images/MoCADSV_UnderstandingNatureDynamicsOfDV_revised5-2012.pdf) (2012)

   *"The greatest single common denominator about victims of domestic violence is the fact that the overwhelming majority are women. According to the most comprehensive national study by the U.S. Department of Justice on family violence, the majority of domestic violence victims are women. Females are 84 percent of spouse abuse victims and 86 percent of victims at the hands of a boyfriend or girlfriend. The study also found that men are responsible for the vast majority of these attacks—about 75 percent. ([Durose et al., 2005](https://www.bjs.gov/content/pub/pdf/fvs02.pdf)) And, women experience more chronic and injurious physical assaults by intimate partners than do men. ([Tjaden & Thoennes, 2000](https://www.ncjrs.gov/pdffiles1/nij/183781.pdf)) That’s why feminine pronouns are used in this publication when referring to adult victims and masculine pronouns are used when referring to perpetrators of domestic violence. This should not detract from the understanding that, in some instances, the perpetrator might be female while the victim is male or of the same gender."* [↑](#footnote-ref-2)
3. 42% of the providers we interviewed reported receiving grants from the U.S. Department of Housing and Urban Development (HUD), through its Continuum of Care (CoC) and Emergency Solutions Grants (ESG) grant programs, to support their TH or rapid rehousing (RRH) projects. CoC grants are administered by geographically-based consortia called Continuums of Care and ESG grants are administered by states, counties, and cities that receive ESG block grants. [↑](#footnote-ref-3)
4. Like the OVW statute's waiver provision, the HUD [CoC Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf) allows an exception for participants in a TH program who require additional time to find or prepare for permanent housing. §578.79 of the [CoC Interim Rule](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf) states:

   *"A homeless individual or family may remain in transitional housing for a period longer than 24 months, if permanent housing for the individual or family has not been located or if the individual or family requires additional time to prepare for independent living. However, HUD may discontinue assistance for a transitional housing project if more than half of the homeless individuals or families remain in that project longer than 24 months."* [↑](#footnote-ref-4)
5. The discussion which follows focuses on the pressure to reduce the duration of assistance in a HUD Rapid Rehousing grant-funded project. Providers operating traditional TH projects have felt similar pressures to reduce lengths of stay.

   Not discussed in this chapter, but addressed in [Chapter 12](http://www.air.org/THforSurvivors/508_Ch_12_Fund_Sources_Collab.docx) ("Funding and Collaboration: Opportunities and Challenges"), is HUD's determination that Rapid Rehousing (RRH) projects (which fund what OVW providers call transition-in-place programs) are a more effective vehicle for ending homelessness than "traditional" transitional housing (TH) projects, which provide temporary program housing that participants must transition from when their term of assistance ends. HUD Funding decisions over the last few years have cut by more than 50% the number of TH grant-funded projects, including projects dedicated to serving survivors of domestic and sexual violence. Although at the same time that many traditional TH projects have lost their HUD grant funding, many new RRH projects have been created, including projects dedicated to serving survivors of domestic and sexual violence, the loss of projects utilizing provider-owned and provider-leased housing leaves survivors who are unable to obtain a lease in their own name, even with program rental assistance, without a viable option, which is a serious loss of capacity. [↑](#footnote-ref-5)
6. HUD funding primarily comes in the form of Rapid Rehousing grants, which require that leases be in the participant's name. The OVW program allows the use of provider-owned and provider-leased units, as well as participant-leased units. [↑](#footnote-ref-6)
7. Presumably, for survivors in transition-in-place programs, the period of follow-up would begin after rental assistance had ended, and would assist the survivor in adjusting to having full financial responsibility for their housing costs, and to the end (or phasing out) of the routine case management / advocacy they enjoyed while receiving rental assistance. [↑](#footnote-ref-7)
8. The duration of financial assistance with housing-related costs (e.g., rent, utilities) may or may not extend for the full length of stay. As discussed in [Chapter 3](http://www.air.org/THforSurvivors/508_Ch_03_Prog_Housing.docx) ("Program Housing Models"), providers may reduce the level of financial assistance over time, to prepare survivors for the eventuality of being self-supporting. [↑](#footnote-ref-8)
9. For example, as described in HUD's [Rapid Rehousing Brief](https://www.hudexchange.info/resource/3891/rapid-re-housing-brief/):

   HUD states that "the majority of families and individuals ... become homeless due to a financial crisis or other crisis that leads to the loss of housing. ***Addressing homelessness for these households primarily entails addressing their housing barriers*** to help them return to permanent housing."

   Given the limited resources that Congress has made available, HUD wants those resources to "be used most efficiently to ensure that ***assistance can be provided to the greatest number of people experiencing homelessness***. An operating principle is that ***households should receive 'just enough' assistance*** to successfully exit homelessness and avoid returning to the streets, other places not meant for human habitation, and emergency shelters."

   HUD states that "the ***focus of services in rapid re-housing is primarily oriented toward helping families resolve their immediate crises, find and secure housing, and connect to services if/when appropriate***. . . . This may be a contrast to many programs in which the focus is providing comprehensive support to each household and remaining engaged for a longer period of time. This ***crisis-related, lighter-touch (typically six months or less)*** approach allows financial and staff resources to be directed to as many individuals/households experiencing a housing crisis as possible. At the same time, depending upon funder flexibility, programs should be designed to allow households to return for more assistance if they need it at a later time."

   Unfortunately, for many survivors, sustainably ending that homelessness entails more than "resolv[ing] their immediate crises, find[ing] and secur[ing] housing, and connect[ing] to services if/when appropriate." While some highly resilient survivors may have the wherewithal to quickly bounce back from years of violence and victimization, and can find or resume gainful employment that allows them to afford decent housing, many other survivors are unable to efficiently rebound from the physical, emotional, and psychological impacts of chronic abuse and are unprepared to (re-)enter the workforce in a position that pays well enough to obtain and sustain decent housing and their other costs of living.

   Although they may not need anything as extensive as permanent supportive housing, an intervention that provides only "just enough assistance" may leave them vulnerable to re-traumatizing financial crises and recurrent homelessness. [↑](#footnote-ref-9)
10. As subsequently noted, making further assistance conditional on participation in services, effort, or progress may be at odds with the VAWA voluntary services requirement, the OVW's admonition against "restrictive conditions," and, even fair housing or anti-discrimination laws, depending on whether certain subpopulations experience a disparate impact. [↑](#footnote-ref-10)
11. In most parts of the country, landlords are free to discriminate against prospective tenants who are receiving welfare assistance, or who plan to use a Housing Choice/Section 8 voucher to pay their rent; a few cities and states have laws against discrimination on the basis of "source of income" or "receipt of housing assistance," but they are hard to enforce. [↑](#footnote-ref-11)
12. Many of the same barriers to obtaining housing, also pose significant obstacles to earning an income that would be adequate to enable a survivor to afford mainstream housing prices -- limitations related to their experience of chronic trauma and its emotional and psychological impacts, limited education, limited work histories (in some cases because they were prohibited by their abusive (ex-)partner from working), limitations related to immigration status (e.g., while advocates help them get a T/U/VAWA-visa), and/or barriers related to prior involvement with the criminal justice system. The tighter the employment market, and the more limited her employability, the harder it is for a survivor to overcome those barriers -- just as [Correia and Melbin (2005, pp. 7-8)](http://vawnet.org/material/transitional-housing-services-victims-domestic-violence-report-housing-committee-national) reported a decade earlier. [↑](#footnote-ref-12)
13. The constraint on extensions is particularly relevant to statewide or regional programs in which the OVW grantee allocates funds to locally based provider agencies that identify potential participants. In order to ensure that funds are available for as much of the grant period as possible to meet the anticipated demand for assistance in the targeted state or region, funds may be allocated on a six-month basis, without the expectation of an extension. [↑](#footnote-ref-13)
14. To the extent that a survivor's trauma is a contributing factor to their inability to "fully engage" in the program or to more fully address their mental health issues, a decision not to extend assistance could be seen as penalizing the survivor on account of their trauma -- which would not be very trauma-informed. There may be other reasons, as well, why a survivor might not be "fully engaged" or following through with mental health treatment. It would be the advocate's role to ask the survivor about their needs, priorities, and concerns, and then to hopefully find a way to support the survivor in making progress in meeting those needs and priorities. [↑](#footnote-ref-14)
15. To the extent that a survivor's trauma is a contributing factor to her not "truly working the program, "a decision not to extend assistance could be seen as penalizing the survivor on account of her trauma -- which would not be very trauma-informed. There may be other reasons, as well, why a survivor might not be "working the program," and it would be the advocate's role to work with the survivor to identify those reasons. Is it because the survivor has other priorities that don't appear to be being addressed? Is it because they are afraid of being independent in housing? Do they feel hopeless about achieving housing, or are they afraid that their ex- will take over any new housing that they get? [↑](#footnote-ref-15)
16. An advocate might ask, why the survivor isn't actively looking for permanent housing: Is she ambivalent about independent living? Considering returning to her (ex-)partner? Afraid of being on her own? Convinced that she won't be able to make it work? Afraid that her survivor will find her and punish her? Torn about having to leave the community where she has so many ties in order to find a place she can afford? Perhaps, if the survivor is "stuck," the advocate can give her some help in achieving clarity about how she wants to proceed. [↑](#footnote-ref-16)
17. ***"Universal" Topics***: Program size (number of units, individuals, families); type and configuration of program housing (e.g., temporary versus transition-in-place; congregate versus clustered versus scattered site; provider-owned versus provider-leased versus participant-leased); target constituency (e.g., survivors of domestic violence, sexual assault, etc.); type/number of direct services staff, use of consultants, involvement of other agency staff; other DV- or non-DV-focused programs operated by agency; how survivors access program and participant selection/prioritization; how staff understand the different roles of DV shelter versus TH; characterization of service area (e.g., metropolitan area, small city, suburban, rural, mixed); program definition of a "successful" outcome and how program promotes success; how program implements voluntary services; maximum, typical, and targeted length of stay; other sources of funding; involvement with local or regional network of DV-focused providers and/or with Continuum of Care; most significant challenges faced by program; perceived differences between TH for other homeless populations and TH for survivors of domestic violence/sexual assault. [↑](#footnote-ref-17)
18. ***Group 1 Topics***: staffing details (roles, training, support, etc.); use of volunteers (roles, reasons for/against using, training and support); program philosophy and underlying approach (e.g., trauma-informed, empowerment, survivor-centered, etc.); consumer involvement (Board membership, advisory roles, options for current participants).

    ***Group 2 Topics***: assistance obtaining housing (challenges faced, strategies used, partnerships, etc.); employment assistance (challenges faced, strategies pursued, partnerships, etc.); approach to working with participants with significant barriers (e.g., economic, mental health, substance abuse issues, etc.); child- and family-focused services (what triggers needs assessment, needs assessed, how needs are addressed and by whom, interface with schools); follow-up services (type offered, challenges faced, insights into utilization patterns).

    ***Group 3 Topics***: challenges, advantages, and reasons for choosing type of program housing and approach to offering financial assistance with housing-related costs; distinctive subpopulations served (population-specific challenges and approach, challenges/approaches pertaining to serving a mixed clientele, etc.); meaning and dimensions of cultural competence; approach to ADA compliance in serving persons with disabilities; collaborations (strategies, challenges).

    ***Group 4 Topics***: program rules and the consequences of violating them; performance measurement (formal versus informal approach, specific measures, whether/how participant progress is measured and used to gauge program performance, impact on program design) ; approach to data collection (software used, data collected above and beyond funder requirements, compliance with HUD comparable data base requirement); funding opportunities and constraints (challenges/strategies for government and non-government funding); challenges and benefits of collaboration with local/regional HUD-funded planning entities (Continuum of Care, Consolidated Plan). [↑](#footnote-ref-18)
19. We actually secured the participation of 130 providers; however, six interviews were not included in the analysis because the interviewee was not adequately familiar with the TH program, or the program was too new to have any experience, or the provider no longer operated the TH program and no longer had staff who could answer our questions. [↑](#footnote-ref-19)
20. Several codes were consolidated as the coding process evolved. [↑](#footnote-ref-20)