

Letter to our Representative in the State of Arizona

This increase could be used to pay for several pressing items:

1. **A modest cost of living increase** for front-line homelessness services staff: Compensation for these essential workers must be made more competitive. A senior Administration official recently described the frontline homelessness service workforce as being in crisis: organizations are struggling to compete for workers, who face low wages and persistent stress from their work. This is having an adverse effect on the provision of services. Since the biggest cost of providing supportive services are the salaries of front-line employees, Congress should direct HUD to use the Continuum of Care competition process to annually adjust increases in supportive services (based on the change in the Consumer Price Index over the previous fiscal year as calculated by the Bureau of Labor Statistics). This adjustment would account for cost-of-living increases in compensation. This follows the same methodology HUD uses to adjust rental costs to reflect increases in fair market rents.

2. **Critical support services** for people with behavioral health needs: People experiencing homelessness may need behavioral health supports, especially people experiencing unsheltered homelessness with chronic health conditions (including mental health conditions and substance use disorders). They have acute needs and are costly to their communities, and they need to be safely and securely housed, which requires services for rental navigation, ongoing case management, and connection to other supports and services tailored to the individuals needs and preferences. Given that unsheltered homelessness has increased 3.4% since the last count, Congress should make investments to address it. These numbers have increased especially for people who experience homelessness and have long-term health conditions, furthering the need for these critical support services.

3. **Emergency Solutions Grants** (ESG) funding to help communities maintain shelter resources (especially for new non-congregate shelter) and Rapid Re-Housing efforts established with soon-to-expire, one-time CARES Act COVID funding: The change in the public health emergency declaration means that FEMA funding will no longer be available for communities to use for critical non-congregate shelter options. This will lead to a huge loss in shelter capacity that will place a larger burden on communities trying to address unsheltered homelessness. Congress has provided similar funds in previous economic crises: to aid in the recovery from the Great Recession, communities were provided with significant emergency funding pursuant to

the Homelessness Prevention and Rapid Re-Housing Program. Congress, understanding that vital local efforts would otherwise be undercut, substantially increased the annual amount of ESG, a valuable precedent we should follow. It is undeniable that increased homelessness resources achieve results. Homelessness among people in families with children is down 6.1 percent, unaccompanied youth homelessness is down 12 percent, and veteran homelessness is down 11.1 percent. Why? Because those are the categories where we are focusing resources. HUD pledged to house 100,000 homeless people in 15 months—and it did. VA promised to house 38,000 homeless veterans in one year—and it did. Thanks for your consideration. Please tell me what you are doing to increase resources for homelessness.

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