

Joint Transitional Housing and Permanent Housing– Rapid Re-Housing Component Project for Domestic Violence Survivors

Frequently Asked Questions

A resource for domestic violence and sexual assault service providers

Domestic violence and sexual assault (DV/SA) service providers have a critical role to play in ending homelessness in their communities. This FAQ document has been developed by the Domestic Violence & Housing Technical Assistance Consortium to respond to questions about the Joint Transitional Housing and Permanent Housing-Rapid Re-Housing Component Project (JCP) and how it can be utilized to expand safe housing options for survivors of DV/SA.

This FAQ document draws from regulations and other guidance from HUD and the U.S. Interagency Council on Homelessness (USICH) and offers strategies and resources for DV/SA providers who currently receive funding for the joint component project or are interested in implementing joint component projects in their communities.

1. What is the Joint TH and PH-RRH Component Project (Joint Component Project)?

The Joint Component Project (which we have shortened to JCP in this FAQ) is designed to provide short-term, crisis housing while helping individuals and families experiencing homelessness identify and move into permanent housing. The JCP is a new project type first funded under the U.S. Department of Housing and Urban Development's (HUD) FY 2017 CoC Program Competition Notice of Funding Availability (NOFA). HUD states in the FY 2018 CoC Program NOFA, "the Joint TH and PH-RRH component project combines two existing program components – transitional housing and permanent housing-rapid rehousing – in a single project to serve individuals and families experiencing homelessness."¹ By combining TH and PH-RRH, individuals and families experiencing homelessness have access to low-barrier, temporary housing and the financial supports necessary to help them quickly move into and maintain permanent housing.

The JCP is a strong option for communities with:

- A large number of people experiencing unsheltered homelessness;
- A lack of crisis housing capacity to shelter everyone experiencing unsheltered homelessness; and
- A lack of strategies to exit people into permanent housing quickly.²

The JCP is not recommended for communities where a scarcity of permanent housing options results in long stays in shelter and transitional housing programs. Rapid Re-Housing programs are better suited to address such permanent housing scarcities and reduce lengths of stay in transitional housing and emergency shelters.

Additional background information on the JCP can be found in the following resources:

- SNAPS In Focus Message: <https://www.hudexchange.info/news/snaps-in-focus-the-new-joint-transitional-housing-and-rapid-re-housing-component/>.
- Overview from the US Interagency Council on Homelessness: <https://www.usich.gov/news/highlights-from-the-nofa-opportunities-to-expand-housing-supports-and-improve-system-performance>.

- Overview and program details provided by the National Alliance to End Homelessness:
<https://endhomelessness.org/scoop-transitional-housing-rapid-re-housing-joint-component/>

2. Why is the JCP a promising model for housing for survivors of domestic violence (DV) and sexual assault (SA)?

The JCP can be a particularly responsive housing strategy for survivors of domestic and sexual violence. The JCP is designed to provide safe, temporary housing combined with the services and financial resources to help survivors identify and move into permanent housing. Increased safety and confidentiality needs, coupled with the additional economic and housing barriers survivors face as a result of the violence, often prolong the amount of time it takes for survivors to secure safe, permanent housing. In response to the immediate crisis, the JCP offers survivors safe, short-term housing and trauma-informed services, and swiftly connects them to permanent housing options while seamlessly maintaining the provision of trauma-informed services.

3. Who is eligible to apply for funding for JCP models that are specifically designed to serve survivors?

Both victim services providers and homelessness and housing providers that are not victim service providers but serve DV/SA survivors can apply for JCP funding. However, it is *strongly advised* that non-victim service providers partner with DV programs to ensure critical program elements are included, such as ongoing safety planning, survivor confidentiality, trauma-informed services and survivor choice. Providers that do not serve victims of domestic violence and sexual assault are also eligible to apply for the JCP.

4. HUD requires a Housing First approach be applied to both TH and PH-RRH portions of the project for the JCP model. How can a Housing First approach be enhanced to improve services for survivors?

As HUD outlines, Housing First is “a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions (such as sobriety or minimum income threshold).”³ HUD notes in the CoC Program Competition NOFA that TH projects are considered a Housing First model if they “operate with low barriers, work quickly to move people into permanent housing, do not require participation in supportive services, and do not require any preconditions for moving into TH.”⁴

Research shows that incorporating safety and confidentiality needs into the Housing First approach can work well for survivors. In addition to the foundational Housing First principles⁵, program components should include: (1) survivor-informed, trauma-informed, mobile advocacy; (2) flexible funding (money that is not tied to housing costs, and can be used for childcare, transportation, and other personal expenses); and (3) community engagement (providing outreach and education to landlords, law enforcement, city government, and housing council on the specialized needs of survivors). Survivors and advocates address survivor-identified needs together. Mobile advocacy services are provided in locations that are safe and convenient for survivors. Individualized flexible funding is used to support housing access and stability and is not limited to rental subsidy or one-time grants. Partnerships with a wide range of housing providers, including landlords, increase housing access for survivors and supports broader systems change.⁶ Examples of Housing First elements that incorporate survivor choice and safety should be included in any Housing First approach.

Examples of Housing First elements that also encompass the specialized needs survivors of DV/SA include:

- Service and housing plans are survivor-driven and emphasize how survivor choice is integrated into safety and housing needs;
- Service options range from crisis/emergency support to support gaining long term stability (see question number five for specific examples of service options);
- Survivors have choice in terms of the extent and nature of supports and housing offered, including flexibility in lengths of stay to account for their unique safety and community circumstances; and
- Survivors have the ability to exit to permanent housing of their choice, with increased safety and security.

5. How can programs design and implement the JCP for survivors?

Housing programs that respond to survivors' safety and trauma needs and employ evidenced-based strategies that center on survivor self-determination are referred to as "safe housing" programs, and the JCP should be no exception.

Safe TH program models offer an array of voluntary services and advocacy coupled with housing to create a safe discernment period for victims to determine their next steps toward permanent housing. Models vary from scattered site/master leased units to site-based residential programs. Examples of services often provided through safe TH programs include, but are not limited to:

- Crisis/emergency support
- Safety planning
- Referrals to legal support
- Referrals to child custody related support
- Referrals to immigration support
- Obtaining protection orders
- Relocation support, which is a recommended component of the JCP in general, includes landlord engagement, support identifying permanent housing options and funding for security deposits and first month's rent to help survivors secure and transition to safe permanent housing, which is automatically included in the Joint Component Project.

Safe RRH program models offer survivors the opportunity to access safe housing and services within their communities. Some services often provided through safe RRH programs include, but are not limited to:

- Help repairing credit and rental history
- Ongoing support with landlords to prevent evictions
- Advocacy
- Case management
- Substance abuse and/or mental health counseling
- Mental health counseling for the survivor and children
- Assistance in locating and maintaining employment and gaining economic stability
- Support and assistance with children and child custody related matters

Flexible funding (unrestricted funds or cash assistance) is often utilized by TH and RRH programs to help survivors access and maintain permanent housing. In thinking about the JCP program design and how to augment funding support in coordination with CoC funds, communities should consider the use of flexible funding model to provide a low-barrier, rapid response to the survivor's needs.

6. How much Transitional Housing and Rapid Rehousing is required for an organization to implement the JCP?

The general guideline is the JCP will provide enough RRH assistance to ensure that at any given point in time a survivor may choose to move from transitional housing to permanent housing. According to the [FY2018 CoC NOFA](#), “this may be demonstrated by identifying a budget that has twice as many resources for the rapid re-housing portion of the project than the TH portion, by having twice as many PH-RRH units at a point in time as TH units, or by demonstrating that the budget and units are appropriate for the population being served by the project.”⁷

Because the goal of the JCP is to support program participants to transfer from short-term, crisis housing to permanent housing, adequate RRH resources should be allocated to smoothly and seamlessly facilitate access to permanent housing from TH when a survivor chooses to do so. Choice also needs to be built into the program to allow for flexibility in lengths of stay in both the TH and PH-RRH portions of the project.

7. Is there a recommended or required timeframe for the Transitional Housing or Rapid Rehousing?

JCP program participants may receive a maximum of 24 months of total assistance between the TH and PH-RRH portions of the project combined. HUD has not set a specific time limit for program participants to reside in either component of the JCP. For example, if a survivor resides in the TH portion for 4 months, they can receive up to 20 additional months of RRH assistance.

HUD advises that when designing the JCP, it is important to keep in mind:

- The CoC project recipient or subrecipient cannot dictate minimum stays in either portion of the project (e.g., the recipient cannot require a program participant to reside in the transitional housing portion of the project for one-year).
- Survivors should receive only the assistance they need to safely and stably exit homelessness; therefore, not all program participants should automatically receive 24 months of assistance.
- The CoC will need to develop written standards for prioritizing this type of assistance locally and recipients and subrecipients will be required to follow the CoC's written standards.⁸

8. How do you know when survivors are ready to move from TH to RRH? What does it look like for the survivor?

When working with survivors, the length of assistance should be based on each client's needs, as determined by the survivor, and the program design must be flexible to accommodate for survivor choice. Survivors are best suited to determine which option is safest and when it is appropriate to move. Many survivors find it challenging to clarify options and make meaningful decisions while in crisis. The TH component of the JCP can offer survivors the safety, time and support needed to do just this. Program staff should implement a trauma-informed approach to establish a relationship with the survivor, using goal planning, motivational interviewing and other strategies to support the survivor's empowerment and self-determination.

9. Are individuals or families who enter a Joint Component Project required to first go into Transitional Housing and then move into Rapid Rehousing, or can they move into Rapid Rehousing and bypass Transitional Housing altogether?

Survivors are not required to reside in the TH portion of the project before they receive RRH assistance. It is based on survivor choice to enroll in either TH or RRH upon entry. While the JCP must make both types of assistance available to all participants (i.e., the units supported by the TH component and also the tenant-based rental assistance and services provided through the PH-RRH component), a participating individual or family may choose to receive only one type of assistance provided through the JCP. An additional note: RRH is a lease in a program participant's name and TH is master leased.⁹

10. Are DV / SA Programs with joint component projects required to participate in their communities' CE process?

Joint Component Projects must be a part of and receive referrals from the local Continuum of Care (CoC) Coordinated Entry (CE) process, whether or not victim service providers use the same or separate CE process as the CoC. Survivors who seek safety and housing options through their community's CE process should have the opportunity to disclose domestic violence in a safe and confidential setting to a CE worker who is trained in domestic violence and trauma-informed practice. Screening and assessment tools used should be able to assess for DV/SA and referrals to services should be provided as requested or needed by the household. Throughout the CE process, survivors should have full access to the array of housing available throughout the CoC, including but not limited to, JCP programs. Joint Component Projects must participate in the Coordinated Entry process, meaning providers take referrals after survivors have been assessed and prioritized. More information about DV and Coordinated Entry can be found on the [HUD Exchange](#) and also on the [Safe Housing Partnerships](#) website.

11. Does a person need to be literally homeless to qualify for TH or RRH offered through Joint Component programs?

Individuals and families who are considered to be homeless under [HUD's categories in the definitions of homelessness](#) are eligible for TH or RRH offered through the Joint Component Project. Please note that Continuums of Care will need special permission from HUD to serve individuals and families under HUD's Category 3 definition of homelessness. Survivors do not necessarily have to meet the Category 1 "Literally Homeless" definition. Additionally, individuals and families who are "fleeing or attempting to flee domestic violence" are considered homeless under the Category 4 definition and are eligible for the JCP. Fleeing or attempting to flee domestic violence includes any individual or family who:

- 1) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; and
- 2) Has no other residence; and
- 3) Lacks the resources or support networks to obtain other permanent housing.

If projects are applying for JCP using the Domestic Violence bonus under the FY2018 CoC NOFA, 100% of individuals served must be Category 4 and meet the criteria above.

Additional Resources

- [Coordinated Entry and Victim Service Providers FAQs](#)
- [FAQ - Coordinated Entry Process: A Resource for Domestic Violence and Sexual Assault Victim Service Providers](#)
- [Creating Safe Housing Options for Survivors: Learning From and Expanding Research](#)
- [Common Ground, Complementary Approaches: Adapting the Housing First Model for Domestic Violence Survivors](#)
- [Rapid Re-Housing: Considerations for Homeless Service Providers Supporting Families Impacted by Domestic Violence](#)
- [Domestic Violence Housing First Toolkit by Washington State Coalition Against Domestic Violence](#)

Domestic Violence and Housing Technical Assistance Consortium

The Consortium, launched in 2015, provides training, technical assistance, and resource development at the critical intersection of homelessness and domestic violence and sexual assault. Funded by a partnership between the U.S. Department of Justice, the Department of Health and Human Services, and the Department of Housing and Urban Development, the Consortium supports a TA Team of four national organizations: Collaborative Solutions, the National Alliance for Safe Housing, the National Network to End Domestic Violence, and the National Resource Center on Domestic Violence. The Consortium works collaboratively to improve policies and practices that strengthen efforts to build safe and supportive housing options for domestic and sexual violence survivors.



SAFE HOUSING
PARTNERSHIPS

To find this FAQ and other related resources, visit SafeHousingPartnerships.org, an online resource for domestic and sexual violence advocates as well as homeless and housing partners.

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ENDNOTES

¹ HUD <https://www.hudexchange.info/resources/documents/FY-2018-CoC-Program-Competition-NOFA.pdf>, p. 18.

² USICH <https://www.usich.gov/news/highlights-from-the-nofa-opportunities-to-expand-housing-supports-and-improve-system-performance> and NAEH <https://endhomelessness.org/scoop-transitional-housing-rapid-re-housing-joint-component/>.

³ HUD <https://www.hudexchange.info/resources/documents/FY-2018-CoC-Program-Competition-NOFA.pdf>, p. 18.

⁴ Ibid., p. 18.

⁵ USICH <https://www.usich.gov/solutions/housing/housing-first/>

⁶ Cris M. Sullivan & Linda Olsen (2017): Common ground, complementary approaches: adapting the Housing First model for domestic violence survivors, Housing and Society, doi: 10.1080/08882746.2017.1323305.

⁷ HUD 2018 CoC Program Competition NOFA, <https://www.hudexchange.info/resources/documents/FY-2018-CoC-Program-Competition-NOFA.pdf>, p. 36.

⁸ HUD FAQ 3523, <https://www.hudexchange.info/faqs/3253/are-there-time-limits-on-the-th-or-ph-rrh-portions-of-the-joint-th-and-ph/>.

⁹ HUD 2018 CoC Program Competition NOFA, <https://www.hudexchange.info/resources/documents/FY-2018-CoC-Program-Competition-NOFA.pdf>, p. 18.