

# EVH S1EP15 - Figuring Out Why Veterans Return to Homelessness

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So that's how I think about it sometimes. And I think it's probably important to point to the human side of this, which is, it can be devastating for clinicians, for Veterans. A lot of time and investment and effort goes to housing a Veteran, right? And if they return to homelessness, it can be demoralizing for the Veteran. It can be hard for the clinician.

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I don't think we want to normalize returns completely, but helping Veterans and clinicians understand it does happen and we don't want folks to give up.

**Shawn Liu:** Welcome to Ending Veteran Homelessness, your first hand look into our nation's efforts to ensure that every Veteran has a safe and stable place to call home. From the Department of Veterans Affairs Homeless Programs Office, I'm your [00:01:00] host, Shawn Liu.

If you're a Veteran who's homeless or at risk of homelessness, reach out. Call the National Call Center for Homeless Veterans at 877-424-3838. Trained counselors are standing by to help 24 hours a day, seven days a week. That number again is 877-424-3838.

If you've been following this podcast for a while now, you're probably familiar with our 2023 Homelessness Goals - actions that we're taking throughout VA to build upon our work last year to permanently house over 40,000 homeless Veterans, as well as the significant progress we've made over the last decade to reduce and end Veteran homelessness nationwide.

This year, we're planning to permanently house 38,000 more homeless Veterans, prevent them from returning to homelessness, rehouse them if they do return to homelessness, and engage with at least 28,000 unsheltered Veterans.

Since this is all kind of technical, [00:02:00] I'll drop a link in the description that explains it all in detail.

Today, I'd like to home in on this concept of preventing returns to homelessness and rehousing Veterans who have returned to homelessness after being permanently housed. You see, when we looked back on the 40,000 homeless Veterans who we permanently housed last year, we found that nearly 2,500 of those Veterans actually fell back into homelessness again at some point in 2022.

Now, that's pretty distressing for all of us here, especially the Veterans who understandably thought that their homelessness was over. Fortunately, thanks to the relentlessness of our staff and partners all across the country, 86% of those Veterans were rehoused again, or at least were placed back on a pathway to rehousing by the end of last year.

This year, we're working to do better, because our Veterans deserve nothing less.

Now, you're probably wondering, "ugh, Shawn, you're doing it again. This sounds like a bunch of government gobbledygook. What on earth do you mean when you say 'returns to [00:03:00] homelessness'? Didn't you just say 'permanently housed'? Words mean stuff, Shawn. Explain yourself!"

You know what? Fair. Very, very, very fair. Those are really great questions.

So, to help us learn more about what returns to homelessness are, and, most importantly, what VA is doing about it, I can think of no one better to talk to than our next three guests.

First, we have Dr. Jack Tsai, research director for VA's National Center on Homelessness Among Veterans, here at the Homeless Programs Office, where he leads research activities, including administering an intramural grant program, directing a postdoctoral fellowship, and working with various stakeholders on data projects. He's also a professor of public health at the University of Texas.

Today, he's joined by Dr. Thomas Byrne, an investigator with both the VA National Center on Homelessness among Veterans and the Center for Healthcare Outcomes and Implementation Research at the VA Bedford Healthcare System. He's also an associate professor at the Boston University School of Social Work.

And rounding us out. We've brought him back. Ken Mueller, [00:04:00] senior business operations specialist here in the Homeless Programs Office

Jack, Tom, Ken, welcome to the show!

**Jack Tsai:** Thanks, Shawn. Great to be on.

**Kenneth Mueller:** Glad to be here, Shawn.

**Thomas Byrne:** Yeah. Thanks for having us.

**Shawn Liu:** This is going to be great.

Okay. So, trigger warning right out of the gate. This is going to be a really technical show. The four of us are going to do our best to make this simple and accessible. This is a field that many before us have tried to get a handle and understand the concept of people returning to homelessness after being housed. We may call it a lot of different things like stability, retention, recidivism. I think the language is evolving a little bit as well. So, really appreciate you three being here with us to figure this out.

The other thing that I kind of want to acknowledge is this is actually in response to some questions that we got last year from Congress wanting to make sure that the Veterans that we were housing during our big initiative stayed housed.

I remember when Congressman Barry Moore, in particular, reached out to us, he wanted to know, "Hey, tell us about these people who are getting [00:05:00] housed. Are they staying housed? Are any of them falling back into homelessness?"

And a lot of that work that was done to analyze and respond to those really, really important questions have inspired this particular focus, at least in terms of our goals for this year.

But I also acknowledge that you three have been working on this for several years. So although it may be new to me, and new to our audience, you all have been working on this for a while.

Before we get into the technical bits, Ken, we are familiar with you. You've been on our show last year to talk about the Point-in-Time Count. But Jack and Tom, you are new to Ending Veteran Homelessness, the show.

So, Jack, why don't we start with you.

Tell us a little bit more about your role as the Research Director here in the National Center on Homelessness among Veterans.

**Jack Tsai:** My role is basically to oversee all research activities, including program evaluation activities in the Homeless Program Office.

I oversee some in house researchers we have at the National Center. But I also work with, lots of affiliated researchers in VA and also outside VA.

We have various community partners and partners also at other federal [00:06:00] agencies. And so I help coordinate research activities, evaluating current programs, but also testing and developing new programs as well.

Trying to figure out innovative solutions to Veteran homelessness.

**Shawn Liu:** One of the things I want to acknowledge and just let folks know, you are also one of the researchers at the forefront of exploring the intersectionality of homelessness and suicide prevention. That's a topic that I'm really, really passionate about.

I know we're going to have some other guests on later this year to talk about those suicide prevention/homelessness intersections. But just want to acknowledge you've definitely been kind of a thought leader in that realm.

Tom, what about you? So you're an investigator. You're part of the team with the National Center on Homelessness among Veterans. And you also work out of the VA Bedford Healthcare System. Tell us a little bit about your role.

**Thomas Byrne:** I'm one of those folks that works closely with Jack and with other researchers in support of better understanding how VA programs can better help Veterans who are currently experiencing homelessness and who are at risk [00:07:00] of homelessness.

Doing research to help drive better outcomes in Veterans health and their housing stability. It's really important to me as someone who has family and friends who are Veterans and members of my immediate family who are on active duty right now.

It's really important and an honor to be able to be involved in this work.

**Shawn Liu:** We're really glad to have you in this work as well.

Okay, let's go ahead and start diving on in. One more kind of acknowledgement that I want to mention is that, Ken, with your role as a senior business operations specialist here in the Homeless Programs Office, you inhabit kind of a realm of, we call them operations, but I think for the general public, it might be more accurate to say like you inhabit the practice aspects of it - the way in which we support the direct staff. Whereas with Jack and Tom, you're the more research/academic/science part of it.

So in many ways, this episode today is really bridging research and the practice part to really understand how when we get Veterans housed they stay housed, try to understand the reasons [00:08:00] why they may fall back into homelessness, and then get them back on that path to rehousing.

Ken, I want to get your take first. You've been diving in on this in different capacities over the years of your work here in the Homeless Programs Office. But this year, we're kind of like turning it up to 11, so to speak, and really trying to understand what we mean.

So help us just kind of level set a little bit. This concept of returning to homelessness. What do we mean when we say to return to homelessness? Because we're going to be saying that a lot.

**Kenneth Mueller:** I just want to back up a little bit. When we say permanent housing, we're saying that because the type of housing that we're putting a Veteran into is intended to be permanent.

**Shawn Liu:** So just check me on my understanding. When we in the business, say permanent housing, it's kind of like jargon, right?

It's a kind of a term that we use, but it's meant to contrast between temporary housing, temporary accommodation. So maybe say like an emergency shelter or a hotel stay or transitional housing. When we say permanent housing, it's not like they're forever home, they're not going to stay there for the rest of their lives. But it's meant to be like a place that they can stay without a time limit in [00:09:00] contrast to a place where they're temporarily staying that might have a time limit. Did I understand that part correctly?

**Kenneth Mueller:** Correct. Like, if you're signing the lease for a year but there's usually the idea that you're going to be able to renew that lease year after year, or that you go somewhere else and you do the same. A lot of us do that

when we're renting places, if we've been homeless or not, and we consider ourselves permanently housed. But yeah, in contrast to what you're saying, it's not something that has a time limit beyond a typical lease.

But as you mentioned sometimes even though it's intended to be a permanent placement, there can be times where the Veteran does return to homelessness. That can be for a variety of reasons. There may be some change in income or employment status or increasing rents that are just beyond their financial means.

Another big one that we see is limited family and other social supports. A lot of times when there's not strong social networks they're a little more at risk.

But the important thing is that we recognize when it does happen and that we can then work towards getting that Veteran back into housing.

**Shawn Liu:** Jack, are there other perspectives or other [00:10:00] things that would be helpful to understand when we say return to homelessness, especially from how you and Tom are tackling this from a research perspective?

**Jack Tsai:** If you think about homelessness is like a medical condition, a lot of medical conditions, they're treated, and sometimes there's a reoccurrence of it. If you think about cancer, for example, obviously homelessness is very different from cancer, but people get treated for cancer, it goes into remission. And, unfortunately, sometimes there's a reoccurrence and the cancer reemerges, right?

So that's how I think about it sometimes. And I think it's probably important to point to the human side of this, which is, it can be devastating for clinicians, for Veterans. A lot of the time and investment and effort goes to housing a Veteran, right? And if they return to homelessness, it can be demoralizing for the Veteran. It can be hard for the clinician. So I think we're trying to track the metric to understand how often it happens, what Veterans are at risk so that we can figure out which Veterans might need additional services to prevent it from happening.

**Shawn Liu:** Jack, you brought up some really great points there. And, forgive me. I, my brain is kind of like firing on [00:11:00] all cylinders right now because there were a couple of concepts that you brought up.

You mentioned homelessness similar to like treating a chronic health condition, right? If there are folks who are familiar with substance dependence and recovery, they say relapse is a part of recovery. And what I kind of heard from

you just now is almost like returns are a part of housing stability in a way. That there might be these setbacks that happen similar to like a substance relapse. But it's important that we keep striving to get onto that bit of stability.

And you brought up a really, really important perspective on costs too. Like I'm sure many people who are listening in are probably like, "Well, you spent all these resources and money to housing them once you got to spend them all again, to house them again?"

But Jack, you brought up a really important point about the emotional cost, the morale costs. That it can be demoralizing maybe even further stigmatizing both for the Veteran, but also for the staff as well.

And check me on this. There's this important balance that we have to strike about striving to prevent returns to homelessness, but in many ways, destigmatizing and providing more support for the [00:12:00] full spectrum of costs, that are required to help Veterans get back on a path to rehousing.

**Jack Tsai:** I think that's exactly right. We don't want Veterans and clinicians to give up. Borrowing from the mantra: relapse is part of the recovery journey. And that does help normalize it a bit.

I don't think we want to normalize returns completely, but helping Veterans and clinicians understand it does happen and we don't want folks to give up.

**Thomas Byrne:** I just wanted to add it's also the case that in many times a return to homelessness or a loss of permanent housing is going to happen through no fault of a Veteran themselves.

In separate research that I've been involved in looking at people who move around to different apartments in permanent supportive housing programs, sometimes what happens is the landlord is not taking good care of the building. The quality of the building is really deteriorating and it's not a safe place for folks to live anymore and that can cause housing loss as well.

When folks don't have a buffer in terms of family or economic resources that might help them avoid becoming homeless again, when they face a situation that's [00:13:00] not their fault they're going to fall back into homelessness. That's outside of their control.

**Shawn Liu:** Tom, you bring up a really great point. I remember in the last couple of years, we've been hearing a lot of reports of Veterans who were

previously housed, facing a risk of homelessness again, primarily because when it came time for lease renewal, they were being essentially priced out of their apartment. Where the rent was being increased to an amount that was beyond what they can afford. And they were again, facing homelessness.

Tom, this is a great opportunity to shift gears a little bit and talk about those risk factors for returning to homelessness. What are you and Jack seeing in the research and the science?

**Thomas Byrne:** Before going to the risk factors, I think there's some interesting points from the work that Jack and I have been doing looking at returns that are important to talk about as well.

First, one of the things that we've looked at is sort of when Veterans face the highest risk of returning to homelessness. Is there a critical period after they're in permanent housing when folks are most at risk of returning to homelessness? It looks like the period that's [00:14:00] 90 to 100 days after placement in permanent housing is really when folks are at the highest risk for return.

And then after that, things look like they stabilize and you see a lower risk of people leaving permanent housing. We've also looked at possible risk factors to try and see which groups of Veterans or which characteristics of Veterans might be associated with a higher likelihood of experiencing a return to homelessness. What stands out I think are factors that are likely related to Veterans needing additional supports: having experienced military sexual trauma, or having an alcohol or drug use disorder, or certain types of mental health conditions.

On the other hand, we find that things that indicate greater connection with ongoing health services are associated with a decrease risk of returning to homelessness. So more outpatient visits for primary care or for mental health or substance use treatment, which [00:15:00] sort of suggests that folks who are getting access to care that they might need that that might facilitate their ability to remain stably housed.

But we do find that folks who are using inpatient health care services tend to have an increased risk of homelessness, which is probably suggestive of people with more intensive health conditions or who have some sort of health crisis that requires them to be hospitalized that's going to increase their risk of returning to homelessness. So really, what we're seeing is indicators of folks who need a little bit more support and some implications for making sure folks are connected to the supports that they need.



**Shawn Liu:** I'm glad you brought in military sexual trauma. We actually had some experts on a past episode talking about how military sexual trauma can increase risk for homelessness and housing instability. And it's unsurprising to hear that it's a factor here. You also mentioned inpatient stays, which were kind of critical. And I wonder, Tom, if you can unpack that a little bit more for me. Is the increased risk of inpatient [00:16:00] stays solely from the crises that are the reason why they might be staying inpatient? Or other knock on effects like if you're inpatient, you're not at home paying bills and keeping up with your home and all that other stuff?

**Thomas Byrne:** We can't fully disentangle that in the data that we have, but I think that's likely to be one of the things that's going on.

If you are hospitalized, it could be the result of some sort of health crisis that happens. And so if you're in the hospital, you're not going to be able to go to work, so you might lose your job that you've been using to pay your rent. And that's going to cause you to fall back into homelessness. And if you're in the hospital, you might miss paying your utility bill and have your utilities shut off and that might trigger an episode of homelessness.

**Shawn Liu:** I also want to put a pin on something that you said, especially for the service providers, homeless program stakeholders, people who support Veterans who are newly housed. You said like a really critical time was around the 90 to 100 day mark.

So maybe between like the first three to four months of a Veteran becoming housed is a really critical time where, from what I'm [00:17:00] hearing you're saying, we need to make sure that we're stepping up the supports for those Veterans. Really, really providing a lot of touch points, a lot of care, getting them linked to different parts of VA and other community services.

**Thomas Byrne:** I think that's exactly right. And I just want to say that that high risk period immediately after permanent housing is not necessarily unique to Veterans or folks who are previously homeless being rehoused. You see similar things when, for example, you look at people who are exiting incarceration, the risk of mortality in the immediate couple months following exit from incarceration is incredibly high. There are these critical risk periods around transitions in people's lives. And a transition to permanent housing is one of those kind of critical transition periods where folks are going to need additional supports.

**Shawn Liu:** I just want to acknowledge there's been a lot of news lately about Housing First kind of unfortunately entering the culture wars.

And Housing First is this concept that we at VA have had as our official policy for almost a decade [00:18:00] now. And we really attribute it to a big part of our progress and success in reducing and striving towards ending Veteran homelessness. It's basically this concept where we try to get Veterans into housing first, and then assisting them with all of the supports, Tom, Ken, and Jack that you've been talking about today: healthcare, counseling, specialty care for chronic and acute, medical and mental health conditions. All the things that promote stable housing and improved quality of life.

But importantly in this concept is this idea that assistance is optional. The supports are optional. That the Veterans get to choose. And one of the things I bring this up for as somewhat of a little bit of a tangent is, all three of you have made fantastically strong arguments as to why it's important for us to provide all of these services, especially in these critical transition times or to address other stability.

But a big part of it as well as is making sure that these services are optional for Veterans and available and accessible. That there are some weird quirky things that happens if we try to force these type of [00:19:00] supports onto Veterans when they themselves may not yet be ready.

Jack or Ken, any other kind of observations from your perspective, either from the research or practice that gets into the nuance about connecting Veterans to these services, making them available, but not trying to force it upon them.

**Kenneth Mueller:** You're correct that it should be optional, but that doesn't mean we're not still having contact with them and we're still not engaging and even using some of what we refer to often as motivational interviewing kinda of techniques to keep the Veteran engaged, but it's still their option.

**Shawn Liu:** Yeah, It's really incumbent upon us to keep making those offers, make the case to them, and work with them. You mentioned motivational interviewing, which is a fantastic evidence-based technique to help move people, from what they call ambivalence or being torn about a topic to positive and healthy change.

A lot of helping Veterans get connected to resources is helping them work through their own ambivalence, whether it's fear, or concern, or past traumas

that may be a block or a barrier for them to wanting to engage in a certain [00:20:00] type of service.

Jack, before we kind of shift gears again, are there any other things in terms of risk factors or understanding this topic about, why Veterans may return to homelessness or maybe more importantly, what are those critical opportunities for us to better support?

**Jack Tsai:** In our modeling that Tom described, we found various clinical sociodemographic risk factors. One of them that emerged was Veterans who are widowed seem to have a higher risk, almost a 30% higher risk of returning to homelessness.

That kind of ties into the social support. And I think that is a gap in research because it's very hard to measure social support. And even thinking about the Housing First model, there's a lot of supportive services and we do have established evidence-based treatments for mental health and substance abuse treatment, but lack of social support is a little thing that we're all struggling with. If you're a homeless Veteran and you're put into a new housing situation in the new neighborhood, you are probably a little isolated. It's a challenge because there's not established treatments around supportive socialization.

**Shawn Liu:** Yeah, really great points and actually a great opportunity to shift [00:21:00] gears once again and talk about what we're doing about it.

And Ken, I want to come back over to you. This concept of preventing returns to homelessness and getting Veterans rehoused or on a path to rehousing if they return to homelessness is a major focus. It's actually one of our major goals for 2023. Can you tell us a little bit from a strategic standpoint what are we doing to try to address?

**Kenneth Mueller:** We're getting better at tracking these Veterans. Through defining some of our methodology of how we're identifying them in the system and then making this information available at different levels. These are the Veterans we need to be looking for. They've returned. We need to try to get them reengaged, get them back into housing. In some areas we're providing some additional technical assistance and support. But really trying to get those Veterans back into housing once they do return.

**Shawn Liu:** I imagine for many of our providers, this is a bit of a culture shift in some ways. They are passionate about serving our Veterans. They're

passionate about helping resolve their homelessness. But I imagine this is a bit of a culture shift because for many communities, the need is so great, right?

There's so many Veterans [00:22:00] who need help. There are so many people who need help. And there might be a mantra of like I help this person. There's like a hundred more people in line. I got to help the next person in line. I got to help them in the next, in the next.

And in many ways, what I'm hearing from this particular work is that we can't just have Veterans go back to the end of the line and then like start over again when they fall back into homelessness. We have to figure out a way of helping everybody. The first timers and the folks who have returned to homelessness, but need a second, third, fourth, all the chances, right? And I imagine that's going to be kind of a tough thing to balance.

**Kenneth Mueller:** Yeah, it is. And you're absolutely right. We need to be addressing both. But one thing to kind of keep in mind is those that are returning, they're often some of our more vulnerable Veterans that really need our support and help the most. So we absolutely need to be helping those first time homeless Veterans as well.

But we can't forget about those that may be struggling a little bit more and having multiple episodes of homelessness.

**Shawn Liu:** Yeah, this is really about leaving no Veteran behind. Really, really great points.

As we start winding down this episode, I've really appreciated this discussion. This is [00:23:00] insightful stuff and I'm learning a lot.

Jack, Tom, as we start winding down, what's on the horizon for the research?

**Jack Tsai:** Well, Tom and I have done some statistical modeling. And so we've looked at it generally to identify risk factors among Veterans in terms of determining risk for returns. But I think we're starting also to hone down on subgroups of Veterans. For example, female Veterans, aging Veterans and Veterans in particular homeless programs to understand what are their particular risk factors. The homeless Veteran population is very diverse, so we want to identify individual risk factors that can inform clinicians.

How do we help providers use that information? How do we translate that research into practice?

**Thomas Byrne:** There's a very small group, less than 1% of Veterans who, have multiple returns to homelessness within a short period. So they exit to permanent housing, return to homelessness, exit to permanent housing again, and then return. That seems like an important group to focus on as well.

**Shawn Liu:** Yeah, I'm looking forward to hearing what you both are able to learn and discover, and especially from that model [00:24:00] development standpoint. And I know for many of our service providers who are listening in, the falling into homelessness after being rehoused and then again and again and again, I'm sure they're going to want to hear those insights too.

We'll bring you back on if that's okay with you both as you learn more on what the science is telling us.

**Thomas Byrne:** Yeah, that'd be great.

**Shawn Liu:** Okay. Let's go ahead and wrap with a tradition on our show: ending with "why." Now I, myself, I'm not a Veteran. None of us are Veterans, right?

**Thomas Byrne:** No.

**Shawn Liu:** All right. Yeah. I know Ken, you've experienced this before as well. You used to do direct services like I did and one of the things that our Veterans wanted to know about us when we were providing services for them, especially because we weren't Veterans was, is this another job for us or are we here for the mission? Are we here for them? Do we understand their sacrifice and are thus committed to, as Secretary McDonough would say, "Fight like hell for them?"

Ken, we were able to hear your fantastic why last time you were on for the PIT Count. But Jack, I want to start closing out with you.

What's your why for this work? You are a very smart, very pro [00:25:00] prolific researcher. You've done amazing articles better understanding homelessness from all of the different intersections. You could be working on any different subpopulation. Why are you here doing research for Veterans?

**Jack Tsai:** I'm an immigrant. I was born in Taiwan but grew up in the U. S. So I really appreciated the country. I love America, and I think it's exceptional in terms of the world. And the military is an important part of America's exceptionalism. And Veterans, of course, were at the front line, and I think it's,

important that we honor them by serving them because they've served us. And it's very tragic that Veterans become homeless after their service. And so I want to do whatever we can to help them.

**Shawn Liu:** Tom, I'll give you the last word. What's your why for this work?

**Thomas Byrne:** I mentioned this briefly at the top of the show. I have family members and friends who are Veterans and I have members of my immediate family, including one of my sisters who's on active duty in the Navy right now.

So it's a really personal thing for me and just a real honor to be doing this work to help [00:26:00] ensure that the men and women who have served our country are able to live lives where they have a stable place to live, which I think is a necessary prerequisite to having a dignified and fulfilling life. Being involved in that work to ensure that more Veterans can have a safe, stable place to live is incredibly important to me.

**Shawn Liu:** Dr. Jack Tsai is the research director for VA's National Center on Homelessness Among Veterans. Dr. Thomas Byrne is an investigator with VA's National Center on Homelessness Among Veterans and the VA Bedford Health Care System. And Ken Mueller is a senior business operations specialist here in the Homeless Programs Office.

Jack, Tom, Ken, thank you so much for the gifts of your time.

**Thomas Byrne:** Thank you for having us.

**Kenneth Mueller:** Thank you, Shawn.

**Shawn Liu:** If you want to know more about the services that VA provides to Veterans experiencing homelessness and housing instability, visit us online at [www.va.gov/Homeless](http://www.va.gov/Homeless). And if you're a Veteran who's homeless or at risk of homelessness, reach out. Call the National Call Center for Homeless Veterans at [00:27:00] 877-424-3838. Trained counselors are standing by to help 24 hours a day, 7 days a week. That number again is 877-424-3838.

That's all for this month. We hope that you found this time to be valuable, and that you feel empowered in our collective work to ensure that every Veteran has a safe and stable place to call home.

Take care.