

Policy Description

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) was one of the first reforms made during the Obama administration led by the Housing and Urban Development department. This act was reformed and officially enacted into law in May of 2009. The intent of the HEARTH Act, formally McKinney-Vento Homeless Assistance Act, was created to coordinate with the federal response department and every level of government and private sector to reduce and end homelessness in the nation while maximizing the effectiveness of federal contributions. (Transition to Housing Act, 2021) HEARTH consolidates three separate HUD homeless assistance programs into a single grant program while revising the Emergency Shelter Grants program (Department of Housing and Urban Development, 2012).

When it comes to the application of the policy, HEARTH requires the state's government and local organizations like M.B.S. Healing and Built for Zero who shares the same vision of helping individuals and families transition into stable housing to apply for a homeless assistance grant. This will require a collaborative applicant to: “(1) design a collaborative process to develop such grant applications and evaluate project outcomes; (2) establish priorities for funding projects; (3) participate in the Consolidated Plan for the geographic area served by the applicant; (4) ensure operations of, and consistent participation by, project sponsors in a community-wide homeless management information system (HMIS); and (5) act as a unified funding agency to distribute HUD funds to other project sponsors in the applicable geographic area funds for their projects.” (Congress.gov, n.d.)

The target populations that qualify for this assistance include four main categories. The first category that merits qualification for this support is those individuals who had been living in a residence that is considered either non-habitable, a shelter used for emergency purposes only, a transitional housing situation, or an institution that they were living in temporarily. Another category for individuals qualifying for this assistance are those who have lost their primary residency, and that includes living situations such as a hotel or motel room, and/or a situation in which multiple people were living together in a home or single resident. In the past, HUD required individuals to pursue support within seven days of being displaced; however, the allotted time to report homelessness has now been extended to 14 days. One of the two final categories of individuals needing assistance includes families with children and/or unaccompanied youth, a new category of homelessness applying to families with children and youth who have been unstably housed in the past 60 days and will most likely continue to be unstably housed. The final category of qualification includes those who are fleeing domestic violence and have no other stable resources or housing (National Alliance to End Homelessness, 2012).

The Secretary of Housing and Urban Development (HUD) provides oversight to the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009. It was no later than 12 months after the date of the legislation that HUD declared regulations governing the operation of the programs that are created or modified by this division. (The Public Health and Welfare, 2018) However, when it comes to the goals of this policy, the provisional ruling was intended to help respond to and work toward the goal of eliminating homelessness. This was to give greater clarity and guidance about planning and performance to the more than 430 existing Continuums of Care that span all 50 states and 6 United States territories. (Federal Register,

2012) HUD assures that this method will lead to better use of limited resources, more efficient service models, and to establish a Federal goal of ensuring that individuals and families who become homeless return to permanent housing within 30 days. (The Public Health and Welfare, 2018).

The Homeless Emergency Assistance and Rapid Transition to Housing Act are intended to address quite a few problems as it pertains to the homeless. It is to address the problem of a crisis that is due to the lack of shelter for a growing number of individuals and families, including the elderly, handicapped, families with children, Native Americans, and veterans. Also, due to the record increase in homelessness, States, units of local government, and private voluntary organizations have been powerless in meeting the basic human needs of the homeless. (The Public Health and Welfare, 2018) As of January 2019, Tennessee had an estimated 7,467 experiencing homelessness on any given day, as reported by Continuums of Care to the U.S. Department of Housing and Urban Development (HUD). Of that total, 558 were family households, 679 were Veterans, 366 were unaccompanied young adults (aged 18-24), and 1,133 were individuals experiencing chronic homelessness. (Homeless Estimation by State | US Interagency Council on Homelessness, 2021) With this problem of homelessness, if not corrected, it is expected to become dramatically worse, which leads to endangering the lives and safety of the homeless. (The Public Health and Welfare, 2018).

Applicability to Organization

The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 addresses multiple grant programs to streamline the United States Department of Housing and Urban Development's (HUD's) conglomerate of homeless grant programs into one

grant program known as: The Continuum of Care Program (Romley, 2012). The HEARTH Act of 2009 will influence Mind, Body, Soul by providing additional financial resources which amount to further support to clients. Mind, Body, Soul will be able to operate through The Continuum of Care grant because the organization is committed to ending homelessness, which is the sole purpose of this act (Pursue, 2016).

Another way this policy has influenced our organization's operation is by expanding the definition of homelessness. Due to the expansion of the definition, individuals now considered are those at imminent risk of experiencing homelessness and those who have previously been homeless and/or temporarily housed in institutional settings (Leopold, 2019). Under the HEARTH Act, individuals considered to be chronically homeless have now become eligible to qualify for Mind, Body, and Soul Healing. It has allowed for M.B.S Healing to provide adequate housing for these individuals. The expansion of the term homelessness has helped M.B.S. Healing, by providing a larger pool of individuals, to receive the assistance they need and become a part of the program.

The HEARTH Act has also established coordinate entry systems, which creates a standard for assessing people's housing and service needs (Leopold, 2019). This then helps connect them to available resources. This is important because it has influenced how the community around M.B.S. Healing may address homelessness. Overall, it has expanded access to more resources and helped support the homeless community in the best way possible. As a result, M.B.S. Healing can receive assistance and be able to access more resources due to this section of the HEARTH Act. By having this coordinated entry, applicants can quickly be notified of M.B.S and its services which increases the likelihood of receiving assistance.

The HEARTH Act contributes to Mind, Body, Soul's mission to eradicate homelessness. The policy influences the sustainability of M.B.S Healing. The Continuum of Care program will provide funding and furthers accessibility for eligible clients to benefit from MBS offered services. The organization's operations would continue to exist because of the policies the HEARTH Act has set in place.