

## **STATEMENT FROM THE GOVERNORS OFFICE:**

The tone and misleading content contained in the Mayors' letter is disappointing considering the team approach that is so important on an issue as critical as this. The state has made unprecedented investments to address this issue and continues to identify additional pathways working through the Continuum of Care model.

It is important to note that the State of NH has three Continuums of Care (COC's) that together are responsible to promote community-wide planning and strategic use of resources to address homelessness; improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; improve data collection and performance measurement; and allow each community to tailor its programs to the particular strengths and challenges in assisting homeless individuals and families within that community. To carry out the primary purpose of the COC program, the US Department of Housing and Urban Development (HUD) requires representatives of relevant organizations (e.g., nonprofit organizations, victim services providers, local governments) to form a Continuum of Care to serve a specific geographic area. In NH, there are three COC's:

- Manchester- the Collaborative Applicant is Families in Transition and covers the City of Manchester;
- Greater Nashua- the Collaborative Applicant is Harbor Care, and covers the City of Nashua and the following towns: Amherst, Brookline, Hollis, Hudson, Litchfield, Mason, Merrimack, Milford, and Mont Vernon; and
- Balance of State- Collaborative Applicant is the Bureau of Housing Supports (BHS) and covers the cities and towns not covered by the other 2 CoC's.

The majority of money for services cannot cross COC boundaries and therefore each COC has to provide its own services and resources as outlined in their plan to HUD.

In 2022, the state made several unprecedented investments including rapid investments in more affordable housing (\$100 million for InvestNH), emergency assistance for families in crisis (\$20 million last month), providing funding for emergency and winter shelters (\$5 million), building statewide healthcare access for individuals experiencing homelessness (\$4 million), extending the landlord incentive program, and more.

Meanwhile, the City of Manchester has seemingly used very little of their \$43 million from the American Rescue Plan funds to directly address homelessness and, as of Q3 of 2022 (according to their public facing website), they had only expended 22% of their funds. Collectively, the municipalities that signed onto the letter received more than \$73 million in American Rescue Plan Funds and Coronavirus Relief Funding that could directly be used for housing, homelessness, and lower income families. This figure excludes the \$137 million in emergency rental assistance provided to households in those localities and other funding opportunities the state has put forward for them to take advantage of that is unrelated to housing but could have an indirect impact.

The unprecedented request to call in the National Guard when federal funding hasn't been spent by many of the municipalities who signed this letter is impossible. For example, \$2 million of American Rescue Plan funding received by Manchester has been dedicated to the city's branding strategy.

Traditionally, the Department has funded more than 700 emergency shelter beds annually, as well as 182 transitional beds. These are in addition to the 250 beds that are funded through other sources.

As referenced above, an additional \$4 million was provided this fall to shelters across the state to maintain or increase capacity for the winter. Additionally, DHHS received an additional \$1 million to assist with winter sheltering. This funding allows each community to address its unique needs, strengths and resources. Importantly, this funding allows communities to expand, not replace, what they currently do to support individuals and families who are homeless. This unprecedented support has established an additional 348 beds statewide to support the needs of individuals experiencing homelessness.

Additionally, the Department of Health and Human Services works closely with all of the providers in all of the local communities, including attending local meetings whenever possible. These meetings are the ideal opportunity for municipalities to join with the state and local partners to work on solutions.

In addition to financial investments, the state in collaboration with local communities have increased collaboration among the three Continuums of Care to align processes and establish case conferencing to ensure consistency and access to services across the state and developed workflow and operational policies to support homelessness prevention.