
2024 CHALENG Survey - Veteran

Identification

1. In which branch of the armed services did you serve?
 - ☐ Army
 - ☐ Navy
 - ☐ Marine Corps
 - ☐ Air Force
 - ☐ Coast Guard
 - ☐ National Guard/Reserve
2. Where are you living now?
 - ☐ Literally Homeless (on streets, in shelter, in car)
 - ☐ Emergency Housing
 - ☐ Transitional Housing (Grant and Per Diem housing, VA Domiciliary, or community contract housing)
 - ☐ Permanent Subsidized Housing (including HUD-VASH and Section 8)
 - ☐ Unsubsidized Housing (private apartment/house/condominium)
- 2a. Which of the following options best describes how long you have been homeless?
 - ☐ 0-3 months
 - ☐ 4-6 months
 - ☐ 7-12 months
 - ☐ 13-24 months
 - ☐ More than 24 months
- 2b. Have you had four or more episodes of homelessness in the past three years?
 - ☐ Yes
 - ☐ No
3. What gender do you identify as?
 - ☐ Male
 - ☐ Female
 - ☐ Transgender Male
 - ☐ Transgender Female
 - ☐ Gender Non-Conforming
4. What is your age?
 - ☐ Less than 25
 - ☐ 25-34
 - ☐ 35-44
 - ☐ 45-54
 - ☐ 55-64
 - ☐ 65-74
 - ☐ 75-84
 - ☐ 85+
5. What race do you most strongly identify with?
 - ☐ American Indian or Alaska Native
 - ☐ Asian
 - ☐ Black or African American
 - ☐ Native Hawaiian or Other Pacific Islander
 - ☐ White
 - ☐ Don't Know
6. What ethnicity do you most strongly identify with?
 - ☐ Non-Hispanic/Non-Latino
 - ☐ Hispanic/Latino
 - ☐ Don't Know

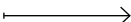
Please only answer these questions if you answered question #2 with "Literally Homeless." All other Veterans should skip questions 2(a) and 2(b).

7. How many dependents under the age of 18 are residing with you?
- ☐ 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4 or more
8. Are you currently enrolled in the VA?
- ☐ Yes
- ☐ No
- ☐ Unsure
9. Is your housing in any way at risk (do you have trouble making mortgage payments, or are your housing plans uncertain)?
- ☐ Yes
- ☐ No
10. Do you live in a rural or frontier community?
- ☐ Yes
- ☐ No


Please tell us in your own words: What is the most important resource/service that could help end your homelessness now, or if you are formerly homeless, what is the most important resource that will prevent you from being homeless in the future?

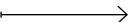
Based on your experience as a Veteran experiencing homelessness or former homelessness, please help us understand how well your needs are being met. Within the past 3 months (or 90 days) how well are your needs being met in the following:

Housing

	Never Met  Always Met				N/A
1. Emergency/Immediate Shelter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Transitional Living Facility and Halfway House	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Long-Term Permanent Housing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Registered Sex Offender Housing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Affordable Housing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Eviction Prevention Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Treatment Services


	Never Met  Always Met				N/A
1. Medical Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Services for Emotional or Psychiatric Problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Substance Abuse Treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. HIV/AIDS Testing and Treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Eye Care and Glasses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Personal Hygiene (shower, haircut, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Never Met  Always Met				N/A
7. Elder Healthcare and Resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Health and Wellness (preventing illness and prolonging life through diet, exercise and self care)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Treatment for Dual Diagnosis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Case Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Military Sexual Trauma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Gender Specific Health Care Provider Availability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Dental Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>


How would you describe the health of your teeth and gums?

- ☐ Excellent
- ☐ Very Good
- ☐ Good
- ☐ Fair
- ☐ Poor

Income/Benefits Services

	Never Met  Always Met				N/A
1. VA Disability/Pension	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Supplemental Security Income (SSI) and Social Security Disability (SSD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Money Management and Budgeting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Clothing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Family Reconciliation Assistance/ Family Counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Move-In Assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Utility Assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Child Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Legal Assistance

	Never Met  Always Met				N/A
1. Legal Assistance to Help Restore a Driver's License	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Financial Guardianship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Re-Entry Services for Incarcerated Veterans	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Legal Assistance for Child Support Issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Legal Assistance for Outstanding Warrants and Fines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Never Met		Always Met	N/A
6. Legal Assistance to Expunge a Criminal Record	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Legal Assistance for Credit Issues/ Debt Collection/Bankruptcy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. ADA issues with rental housing (i.e. ramps for wheelchair access, accommodation of service animals)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Domestic Violence/Protection Orders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Tax Issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Discharge Upgrade Appeals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Family Law (i.e. divorce, child custody)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Education/Job Services

	Never Met		Always Met	N/A
1. Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Job Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Finding a Job or Getting Employment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Vocational Rehabilitation (a process that enables people with functional, psychological, developmental, cognitive, or emotional impairments or health conditions to overcome barriers to accessing, maintaining, or returning to employment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Digital Access

	Yes	No	Don't Know
1. Do you use the internet, at least occasionally?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. How often do you access the internet?			
<input type="radio"/> Never			
<input type="radio"/> At least once a day			
<input type="radio"/> At least once a week but not every day			
<input type="radio"/> At least once a month but less than once a week			
<input type="radio"/> Less than once a year			
3. Do you have a cell phone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Do you have a smart phone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Do you own a computer or laptop?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

VA and Community Coordination

1. In general, how accessible do you feel VA services are to homeless Veterans in your community?	Not Accessible	—————>	Very Accessible	N/A
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. How able is the VA to coordinate services for homeless Veterans?	Not Able	—————>	Mostly Able	N/A
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. How aware of Veterans' needs and resources are Community Homeless Agencies?	Not Aware	—————>	Mostly Aware	N/A
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The Paperwork Reduction Act of 1995: This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average 6 minutes. This includes the time it will take to follow instructions, gather the necessary facts, and respond to questions asked. Customer satisfaction is used to gauge customer perceptions of VA services, as well as customer expectations and desires. The results of this survey/assessment will lead to improvements in the quality of service delivery by helping to shape the direction and focus of services and the patient experience. Participation in this survey is voluntary, and failure to respond will have no impact on benefits to which you may be entitled.

Thank you for your participation in the CHALENG survey! If you would like more information or if you have any concerns, please contact the Call Center for Homeless Veterans:
<http://www.va.gov/homeless/nationalcallcenter.asp> | 1-877-4AID VET (1-877-424-3838)