

## **Homelessness Brief**

**January 9, 2015**

### **I. Data - Point In Time Count – Annual Statewide Count of Homelessness**

- On January 28<sup>th</sup> 2014 there were 1556 Vermonters counted as homeless. This includes unsheltered, in emergency shelter or in transitional housing. This was an increase of 144 or 9.27 percent from 2013 (1412).
- 371 or 24 percent were children
- 90% are sheltered; 10% are unsheltered
- 702 or 45% report a disability
- 8% or 120 are Veterans
- 150 were chronically homeless
- 227 persons reported as victims of DV (does not include children)

*\*Trend from PIT Count – Increase in overall homelessness*

### **II. Data - Emergency Solutions Grant Annual Report (SFY 2014) 1.7 M**

**A. OEO through the Vermont's Emergency Solutions Grants program, funds and support operations, staffing and homelessness prevention and re-housing assistance at:**

- 40 non-profit emergency shelter, transitional housing and prevention programs serving all regions of the state.
  - This includes 28 overnight emergency shelters
  - 7 warming shelters open only during cold weather months (we have pending applications for two more shelters (NEK and Burlington))
  - 9 shelters for persons fleeing domestic/sexual violence
  - 3 day shelters for people experiencing homelessness.



## B. Overnights Sheltered (SFY 2014)

Between July 1, 2013 and June 30, 2014, Vermont's ESG-funded emergency shelters, domestic violence shelters, veteran's shelters and youth shelters, reported the following.

- **3,934** persons sheltered for a total of **141,778** shelter bed nights. The number of people is down from 4,124 the year before and the number of shelter bed nights is up from 122,893.
- **3,034** were adults and **891** were **children** under the age of 18. In SFY 2013 there were **807 children** in shelter.
- The average length of stay was approximately **36** days. This is up from **29.8 days** in 2013

*Trend – increase in child homelessness/ increase in bed nights and slight decrease in people who access shelter which may be due to number of bed nights / hotel usage/coordination between ESD and Shelters*

## C. Homelessness Prevention and Rapid Re-Housing

These activities provided housing stability for **1,703** persons in **771** households, 60% of these households were literally homeless.

## III. Special Initiatives

**A. Family Supportive Housing Pilot Program (600,000)**– Permanent housing, intensive support services and financial empowerment in five districts (Second year: Burlington, Brattleboro, Rutland/First year: St. Johnsbury and Hartford)

- 48 families enrolled in year one and received a variety of services based on their needs.
- 36 of these 48 families were also placed in permanent housing.
- 12 of the 48 were not yet placed in permanent housing but receiving services.
- Families had been homeless for an average of 141 days prior to moving into permanent housing.
- 88 children and 60 adults.
- 85% (41/48) of families are participating in the Reach Up program.
- 35% (17/48) of families have an open case with the Department for Children and Families, Family Services.



**B. 100,000 Homes Campaign in Burlington and Addison County**

- Housing First Initiative
- Focus on housing people who are chronically homeless
- Housing people who are chronically homeless save service system dollars
- Use of Intensive assessment to register people over a four day period. More than 220 people were registered in Burlington

**C. Coordinated Entry System**

Providing technical assistance to the Continuum of Care to provide assessment and streamlined services that connects the person to the most appropriate level of care including housing and supports based on their strengths and needs.

**D. Ending Family Homelessness by 2020**

- Effort of AHS and DCF and supported nationally by US Interagency Council on Homelessness
- The Point in Time Count and the ESG Annual Report suggest between 23 percent and 26 percent of all Vermonters experiencing homelessness are under 18.
- The ESG Annual Report counted an increase in children who are homeless (891 vs 807).
- Research shows that children who are homeless develop significant delays, emotional distress, poor academic development and more health problems

**Major Challenges**

- Chronic health conditions, co-occurring mental health and substance abuse conditions and trauma
- Lack of Affordable housing
- Lack of housing subsidies
- Transportation infrastructure/ accessibility, cost, fines and penalties

**Major Efforts**

- Better integrate housing programs within DCF by moving ESD's Community Housing Grant into OEO
- Target prevention assistance and temporary shelter as needed
- Assist in developing a coordinated Entry System
- Focus on rapid re-housing
- Create more affordable housing
- Provide service intensive housing interventions/ Housing First approach
- Link families to the benefits, supports, and community-based services
- Develop and build evidence based practices such as Housing First principles, trauma-informed services, critical time intervention, and partner with early childhood programs

