

Updates on Homelessness

August 24, 2022



Homelessness in our community

- Why people are homeless
 - Housing cost - only known indicator of rates of homelessness
 - Support system is missing or inadequate
 - Once people lose housing, barriers to getting back into housing multiply
- Regional issue
 - Limited resources in surrounding counties
 - VA Medical Center
- Human crisis affecting our whole community - and the nation
 - 2020 was the first time in national history that the number of people unsheltered was higher than the number of people in shelters or transitional housing
 - Most communities seeing post-pandemic increase

Data

Two primary sources:

- Homeless Management Information System (HMIS)
 - Database managed by the City and used by service providers
 - Tracks demographic data, household characteristics, engagements with community resources, and outcomes
 - HUD-funded programs are required to participate; limited, but growing, participation by other service providers
 - Essential to evaluate performance of individual programs, agencies, and the overall community service system
 - Required for annual HUD reporting that partially determines federal resources available for homeless and housing programs

Data

- Annual Point-in-Time count of all people experiencing literal homelessness on a single night within the last 10 days of January
 - Follows federal definition of literal homelessness (shelter, transitional housing, unsheltered - excludes people doubled up)
- Federal requirement for all communities to conduct and report on
- Informs federal resources to address homelessness at the local level
- Has limitations but is conducted similarly year after year and is our only comprehensive dataset on homelessness
- Shelter count is accurate; likely undercounts the number of people who are unsheltered

2022 Point-in-Time Count: Process

- Conducted evening of January 25, 2022
 - Methodology change from Wednesday to Tuesday to include Haywood Street's Welcome Table
- 48 volunteers on 16 teams
 - Primarily homeless services staff
 - 7 City staff
- Data collected via the Homeless Management Information System (HMIS) and paper survey forms that are manually entered into HMIS, verified, and deduplicated by City staff
- Survey questions include demographics, history of homelessness, and household composition and characteristics
 - New this year: supplemental questions for people who are unsheltered
- Participation is voluntary

2022 Point-in-Time Count: Results

- Results include data from:
 - Shelters: Rescue Mission, Salvation Army, Helpmate, Trinity Place, Haywood Street Respite, Ramada, Homeward Bound's veteran non-congregate shelter, Code Purple sites
 - Transitional Housing: ABCCM, Eliada, Swannanoa Valley Christian Ministry
 - Unsheltered: AHOPE, Haywood Street's Welcome Table, school system liaisons, APD, 16 street count teams

2022 Point-in-Time Count: Results

- Overall, a 21% increase in the number of people who are homeless
- The sheltered population declined slightly
- The number of unsheltered individuals doubled

	2020*	2021	2022
Sheltered	482	411	405
Unsheltered	65	116	232
Total	547	527	637

*Pre-pandemic baseline

2022 Point-in-Time Count: Results

Household characteristics

- Household type: 92% single individuals, 8% families
- Race: 74% white, 20% Black, 6% Asian/American Indian/Multiple Races
- Gender: 69% male, 30% female, 1% transgender
- Chronically homeless (12 months homeless + disability): 33%
- Veterans: 24%
- Youth: 5%

City's role

- Provide core services that often intersect with homelessness (e.g. Planning, Development Services, Sanitation, APD)
 - In NC, counties provide Health and Human Services (social work, behavioral health, public health, and economic services)
- Facilitates federal and City funding available to homeless service providers (CDBG, HOME, Housing Trust Fund, etc.)
- Not a direct provider of homeless services
- Serves as lead agency for the NC-501 Asheville-Buncombe Continuum of Care

Continuum of Care

- Federal framework for building and resourcing community collaboration to end homelessness
- Defined geography (Buncombe County)
 - Continuum of Care is a homelessness response system within that geography
 - Should be looking at inflow, length of time homeless and interaction with services, and outflow within that closed system

Continuum of Care Lead Agency

- Facilitates annual federal HUD funding for homeless and housing programs (\$2M)
- Data collection and reporting: Homeless Management Information System
- Supports Continuum of Care governance board (Homeless Initiative Advisory Committee)

Homeless Service Systems

How they should work:

- Prevent homelessness when possible to keep people stable in their existing housing
- Divert from homeless services when possible to quickly resolve crises
- Coordinated, solutions-focused outreach
- Have a variety of coordinated shelter options with enough inventory to fully meet emergency needs
- Focus on exit planning as soon as people enter: identify the path and needed resources, and pursue proactively
- Have a variety of coordinated, right-sized, quality housing interventions with enough capacity to facilitate exits from shelter quickly and to help people stabilize in housing and not become homeless again
- Data to measure effectiveness and guide adaptations
- Unified vision, coordinated approach, sufficient resources

Homeless Service Systems

How ours currently works:

- Good prevention capacity, especially with federal COVID resources
- Minimal diversion happening
- Some outreach, but without many resources to offer that will resolve the crisis
- Shelter inventory decreased by 50% during the pandemic, minimal options for people who aren't clean and sober or don't have ID
- Great capacity to house veterans and people fleeing domestic violence; very very limited capacity to house anyone else
- Major data limitations, but continually improving
- A lot of good work, but not necessarily coordinated or moving in the same direction

Homeless Strategy Division

- Restructure of Community and Economic Development Department, now 4 divisions
 - Community Development
 - Equitable Economic Development
 - Affordable Housing
 - Homeless Strategy

- Homeless Strategy Division reflects Council's strategic priority, capacity expansion
 - Currently filling 3 positions
 - Data and Compliance
 - Training and Development
 - Integrated Health and Housing

Division Goals

- Build/rebuild the system
 - Create the table for ownership and decision-making
 - Inclusion
 - Transparency
 - Building out system capacity
 - Support service providers, expand inventory and programming
 - Develop community-level initiatives
- Data
 - Comprehensive, quality
 - Help drive performance improvements, strategies, and funding
- Integration and empowerment
 - Partnership development
 - Community work
 - Community education and engagement

Current Priorities

- Rebuilding trust, transparency
- Building unity and collaboration
- Immediate crisis response coordination
- Fully staff division
- Facilitating federal HUD funding for homeless and housing programs
 - Continuum of Care (\$1.8M, due 9/30)
 - Emergency Solutions Grant (\$128K, due 10/3)
- Code Purple planning for winter season
- National Alliance to End Homelessness project