

# SOHHA

The logo for SOHHA features the letters 'S', 'O', 'H', and 'A' in a light gray, sans-serif font. The letter 'O' is a large circle containing a blue silhouette of a city skyline at night, with a crescent moon in the sky. A small black silhouette of a person is sitting on a ledge in front of the skyline.

**State of the Homeless Address 2018**

# Our Mission

*Lead the development of an effective homeless response system that will make the experience of homelessness in Dallas and Collin Counties rare, brief and non-recurring.*



# Purpose of SOHA

- To collectively **review data** and information and derive knowledge about the nature and extent of homelessness
- To **inform our decisions** on how to move forward and build an effective homeless response system
- To be honest with one another about the challenges, barriers and obstacles our homeless residents face and as providers **own up** to what role we play in removing or creating them
- To **welcome ideas and insights** from all persons on how to make homelessness **rare, brief and non recurring** in our community

# SOHA

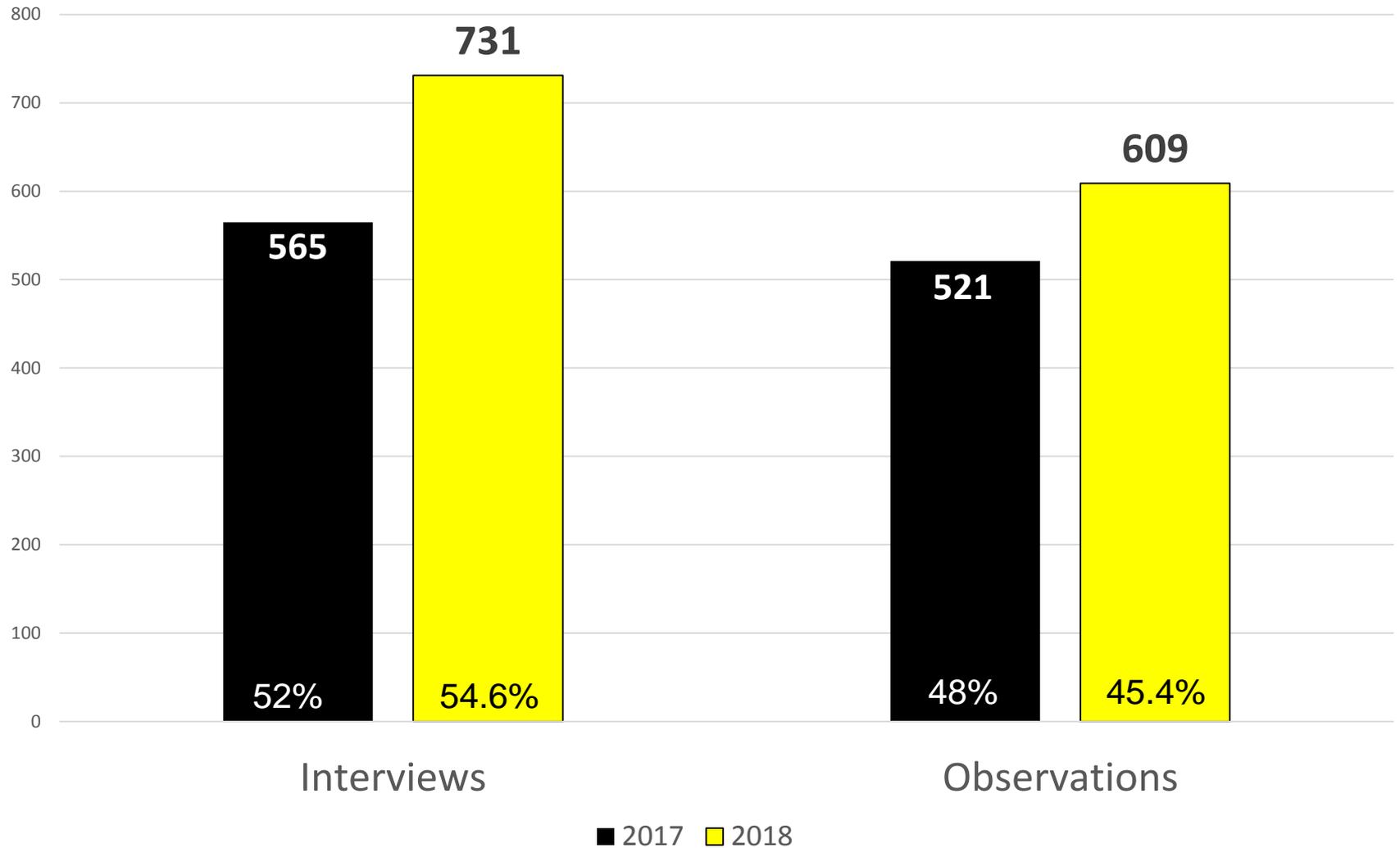
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**2018 POINT IN TIME COUNT**

# Methodology – Unsheltered Homeless

- Count conducted on Thursday, January 25, 2018 approximately 8:30 pm temperatures in the 50's
- Continued improvement in coverage area with well over 1,500 volunteers from 12 deployment sites
- *Counting Us* smart device App fully adopted by all areas using GPS mapping and survey
- GIS generated maps for volunteer assignment and document coverage areas
- Data analyzed and deduplicated
- Volunteers contacted to verify some age data related to youth

# 2018 Unsheltered Survey Data Source



# Methodology – Sheltered Homeless

- HMIS system reports for 11 Emergency Shelter, Safehaven and Transitional Housing agencies
- **Counting Us** Excel template for 12 non-HMIS user agencies domestic violence providers
- Deduplication analysis against other sheltered data AND unsheltered data



# All Homeless – 2018 Point in Time Count

	Unsheltered	Emergency Sheltered	Safehaven	Transitional Housing	Total	Change Year to Year
<b>2018</b>	<b>1,341</b>	<b>1,991</b>	<b>23</b>	<b>785</b>	<b>4,140</b>	<b>+9%</b>
2017	1,087	1,861	19	822	3,789	-.5%
2016	739	1,968	23	1,080	3,810	21%+
2015	363	1,748	23	1,007	3,141	

## 23% increase in Unsheltered homelessness

Safehaven units back online in 2018

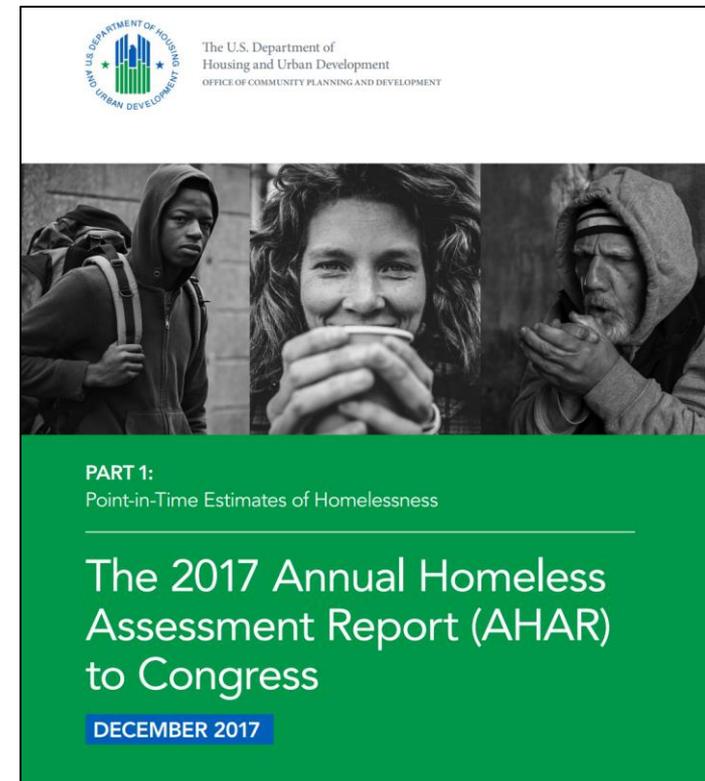
Reductions in Transitional Housing due to reduced inventory and conversion of 22 units of family facility-based transitional housing to emergency shelter

# Tarrant County SOHA 2018 Point in Time Count

	Unsheltered	Emergency Sheltered	Safehaven	Transitional Housing	Total	Change Year to Year
<b>2018</b>	<b>678</b>	<b>1,228</b>	<b>20</b>	<b>89</b>	<b>2,015</b>	<b>+5%</b>
2017	390	1,294	20	220	1,924	
	<b>+74%</b>					

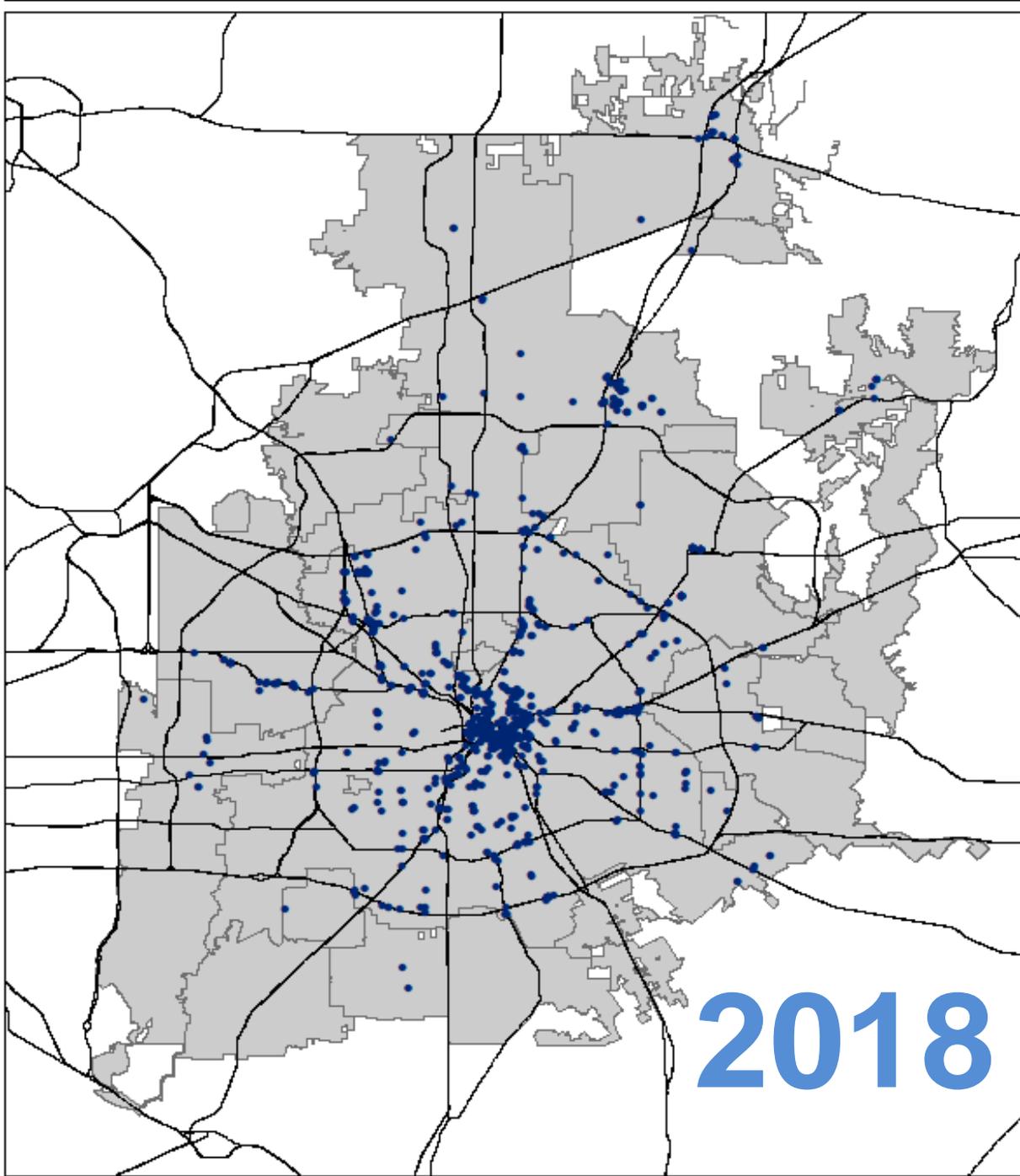
# Increase in Homelessness Nationally

- In December 2017 HUD [Part I 2017 Annual Homeless Assessment Report \(AHAR\)](#) *“Homelessness increased for the first time in seven years.”*
- 9% increase unsheltered homelessness
- Increases in the numbers of unsheltered individuals in the 50 largest cities accounted for nearly all of the national increase



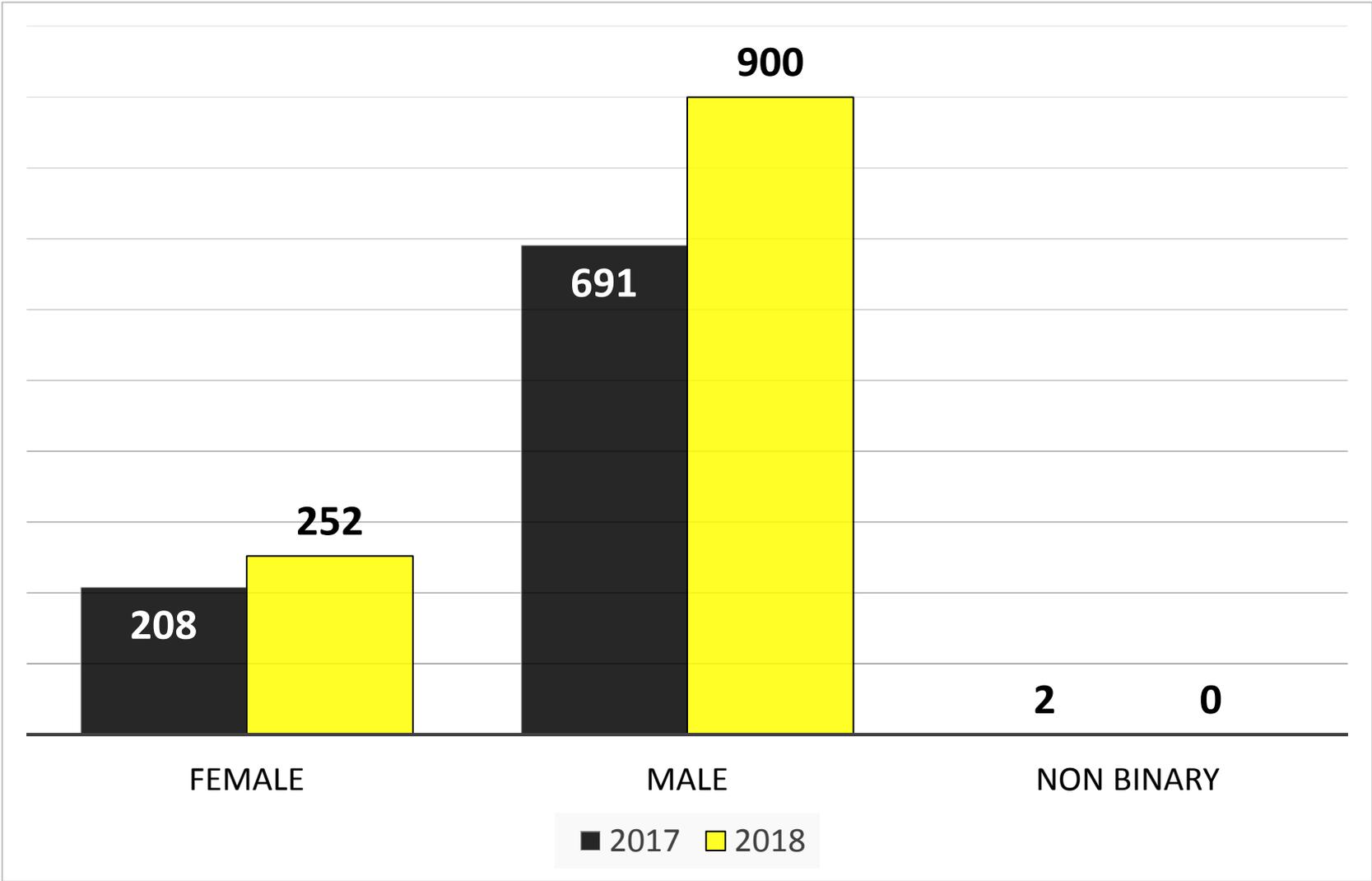
# Unsheltered Homeless by City/County

City	2018	Proportion of all UN	2017 PIT	Change
Dallas	1098	82%	883	+215
Grand Prairie	8	<1%	9	-1
DeSoto	4	<1%	2	+2
Garland	63	2.7%	52	+11
Irving	39	3%	33	+6
Mesquite/Balch Springs	13	1%	0	-
Cedar Hill	0	-	0	-
<i>Total Dallas County:</i>	<i>1225</i>	<i>91%</i>	<i>979</i>	<i>+246</i>
Plano	80	6%	67	+13
Frisco	2	<1%	3	-1
McKinney	22	1.6%	26	-4
Wylie	12	<1%	11	+1
Anna	0	-	1	-1
<i>Total Collin County:</i>	<i>116</i>	<i>9%</i>	<i>108</i>	<i>+8</i>
<i>Total Unsheltered:</i>	<b>1,341</b>		<b>1,087</b>	<b>+253</b>



**2018 PIT**

# 2018 Gender of Unsheltered Homeless



Men: 78%

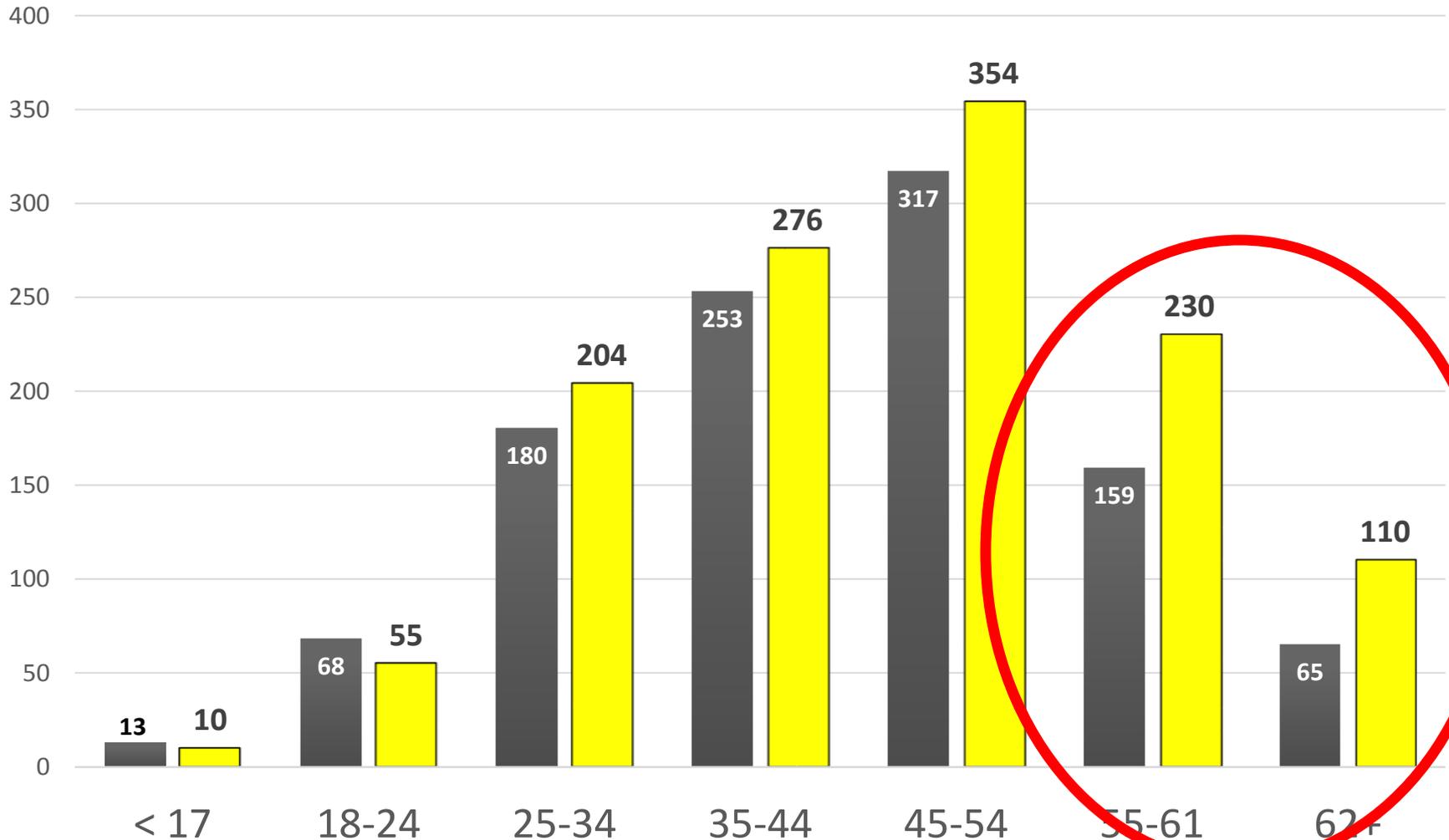
Women: 22%

Transgender/NB: < 1%

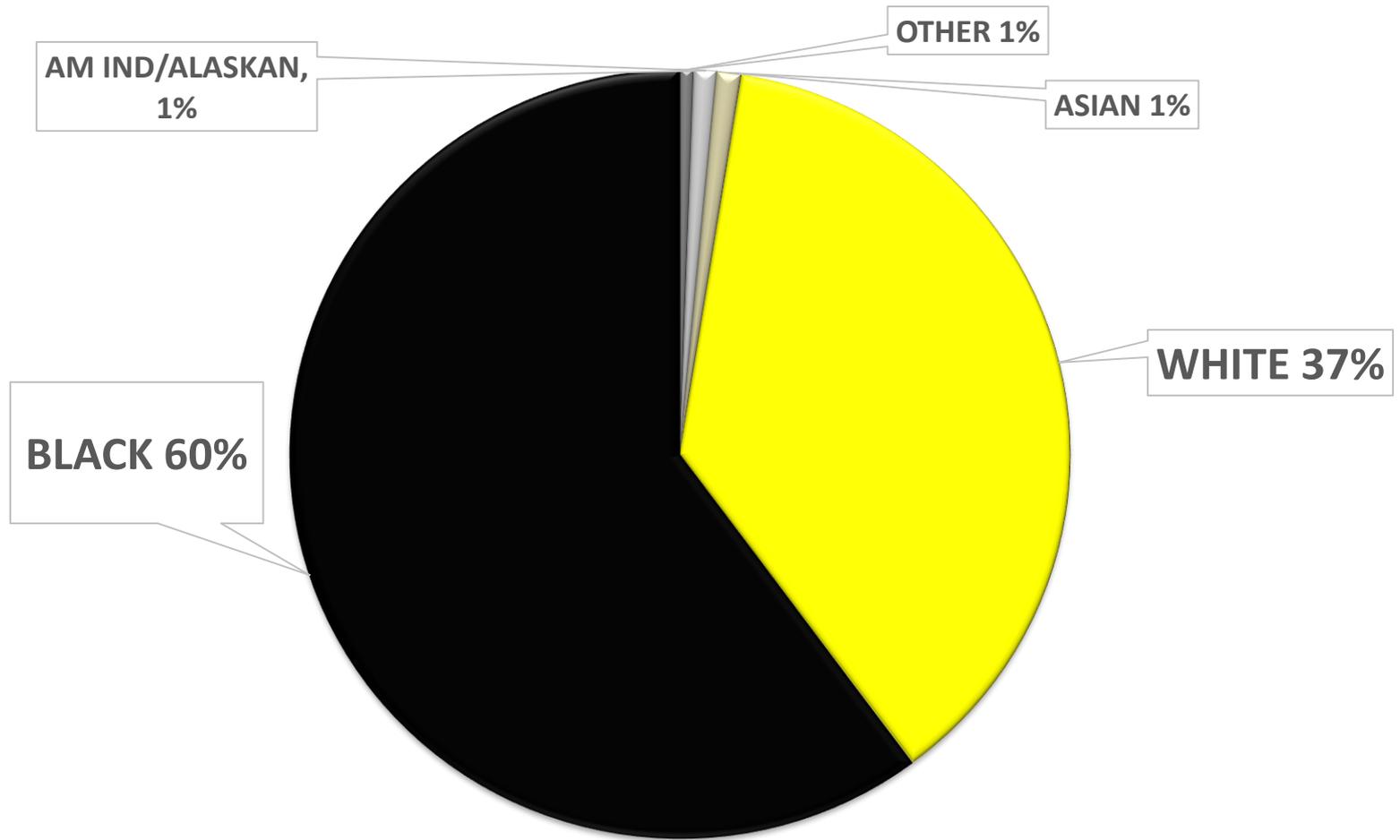
Trend since 2016, 2017 same proportion

# Ages of Unsheltered

■ 2017 ■ 2018



# 2018 Race of Unsheltered



# Length of time homeless – Unsheltered

Homeless over 1 year: 2016 - 47%; 2017-70%; **2018 - 54.4%**

First Time Homeless: 147 – 2016; 208 – 2017; **277 – 2018**

UN Length of Homelessness	Number	Average LOS
ALL	509	2 yrs 5 months
1 year or more	277	4 yrs 1.5 months
1 month to 1 year	232	4.5 months

# Households with Children Point in Time Count

2018	UN	ES	TH	Total
<b>Total Households with Adults and Children</b>	2	148	151	<b>301</b>
Total Adults	2	163	171	336
Total Children	5	308	285	598
<b>Total Persons in Families</b>	7	471	456	<b>934</b>
<b>Unaccompanied Youth/Parenting Youth Under 18</b>	0	64	0	<b>64</b>
<b>Total Homeless Children</b>				<b>662</b>

16% of homeless are children under 18

# Homeless Veterans Point in Time Count

	UN	ES	SH	TH	Total
Individual Veterans	66	160	0	93	319
Veteran Households with Children	0	12 people/ 3 HHLDs	0	0	12
					<b>331</b>
Chronically Homeless Veterans	23	32	0	14	69

**8% of all homeless are Veterans,**  
 9.5% of all homeless were veterans in 2017, 356

# Length of Stay in Homelessness

Annual Homeless Assessment Report is an analysis of sheltered homeless within the HMIS system throughout an entire year in Dallas County October 1, 2016 – September 30, 2017

Data: matches national avg. 60% self resolve rate of ES Ind

Length of Stay	Individuals in ES	Families in ES
A Week or Less	42%	0%
1 week to 1 month	26%	21%
1-3 months	16%	27%
3-6 months	10%	29%
6-9 months	4%	15%
9-12 months	3%	7%

# Chronically Homeless

## ***Definition:***

*Homeless at least 1 year*

*Or*

*Homeless four or more times in the last 3 years where the cumulative time homeless is at least 1 year*

*And possess a documented **disabling condition***

# Chronically Homeless Point in Time Count

2018	UN	ES	Safehaven	Total
Chronically Homeless <b>Individuals</b>	152	214	17	<b>383</b>
Chronically Homeless Persons in <b>Families</b>	7	34	0	<b>41</b>
			<b>TOTAL</b>	<b>424</b>
			2017	542
			2016	597

- 21% reduction in Chronic Homelessness

# Chronically Homeless

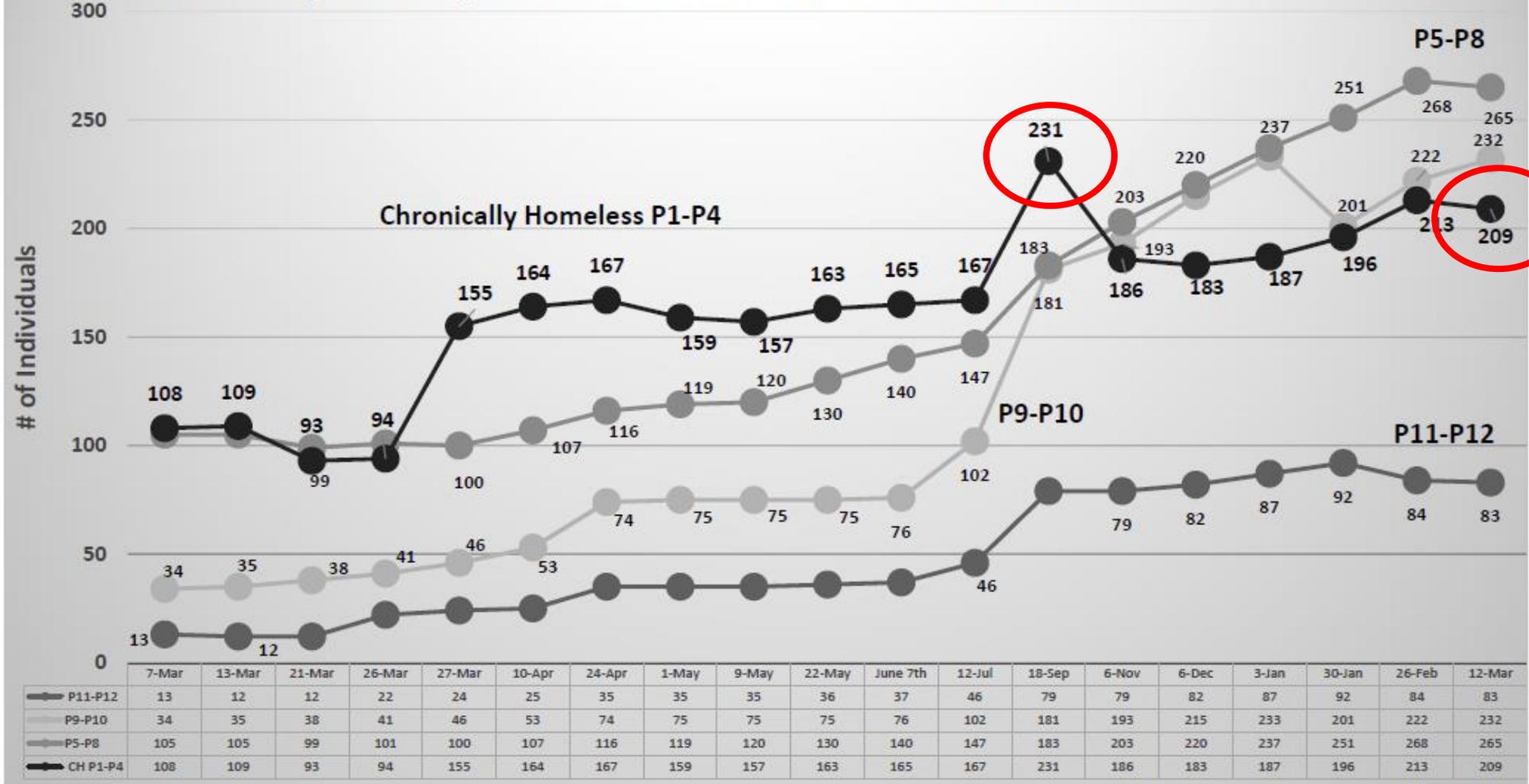
*The Coordinated Assessment System Documentation of Priority Status process - chronic homeless receive the highest Priority Status (P1, P2, P3 or P4 depending on length of homelessness and severity of service needs) and are listed at the top of the Housing Priority List for access to Permanent Supportive Housing*

- **Achievement to date: 209** ( just under 50%) Chronically homeless persons verified and prioritized through the Coordinated Assessment System documentation and housing priority list process - CoC Goal is 75% of Chronic assessed and prioritized for 2018

# The Housing Priority List

- One of the **most important tools** of the homeless response system
- Updated weekly
- Homeless persons are **added to the list** following engagement, assessment, case management as a first step in **developing a housing strategy**
- Homeless persons are housed or exit the system and ***come off the list***

# Housing Priority List Tracker 3/07/17 thru 3/12/18



661 700 744 740 787 789

# The Housing Priority List

- **Top of the list:** disabled, long time homeless chronic, high service needs
- **Middle of the list:** Some disabilities, shorter terms homeless, lower severity of service needs
- **Bottom of the list:** no disability, not homeless long, low service needs
- Organizes housing needs and gaps.

# Documentation of Priority Status – Prioritization Process

- Coordinated Assessment System streamlines tools to determine key factors of homelessness status, **length of time** homeless, **severity** of service needs and presence of a **disabling condition** for the head of household or other member of the family.
- **1554** persons were assessed by MDHA and given a priority status From March 2017 – February 2018 (*698 performed in 2016-2017*)
- **246** persons confirmed housed from the Housing Priority list in the last 12 months

# HPL: Snapshot of Housing Need

Priority	#	Average Age	Avg Income	Type of Housing Needs	Type of Income Needs
Chronic Homeless (P1-P4)	208 207 Adults 1 Family	51.5 Oldest - 76 Young - 22	\$443	<ul style="list-style-type: none"> <li>• Permanent Supportive Housing</li> <li>• Assisted Living</li> <li>• 'Bridge' Rapid ReHousing</li> <li>• HCV</li> </ul>	<ul style="list-style-type: none"> <li>• SSI/SSDI/Retirement</li> <li>• SS 'Gap' income</li> <li>• Medicare/Medicaid</li> </ul>
At Risk of Chronic (P5-P8)	265 235 Adults 30 Families	46.4	\$408	<ul style="list-style-type: none"> <li>• Permanent Supportive Housing</li> <li>• Transitional Housing</li> <li>• Rapid Rehousing</li> <li>• HCV - Families</li> </ul>	<ul style="list-style-type: none"> <li>• SSI/SSDI</li> <li>• SS 'Gap' income</li> <li>• Employment</li> <li>• Child Care Subsidy</li> </ul>
Moderate & Low Severity (P9-P12)	315 210 Adults 105 Families	44	\$584	<ul style="list-style-type: none"> <li>• Rapid Rehousing</li> <li>• Transitional Housing</li> <li>• Housing Search/Placement</li> </ul>	<ul style="list-style-type: none"> <li>• Employment</li> <li>• Child Care subsidy</li> </ul>

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**SYSTEM PERFORMANCE**

# Continuum of Care System Performance

*Data Analysis: PSH Programs*

*March 1, 2017 – February 28, 2018*

Total Persons Served	4,550
Exited to Permanent Housing	<b>882 of 1181 (74%)</b>
Total Veterans Served	471
Persons Served with Disabling Conditions	2045
Housed Unsheltered Persons	213
Exited with no Income Sources Adults	199 (17%)
Exited with 1 or more sources income Adults	529 (72%)

# Continuum of Care System Performance

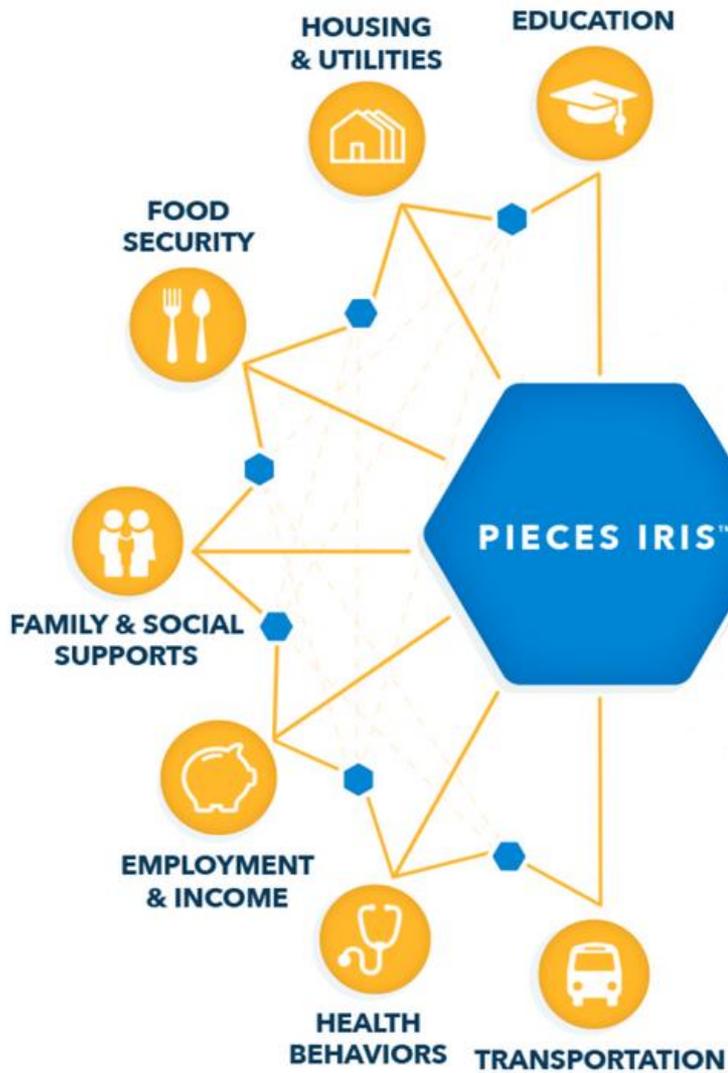
*Data Analysis: Street Outreach*

*March 1, 2017 – February 28, 2018*

	<b>Number</b>
Total Persons Served	1,202
Exited to Permanent Housing Destinations	213
Exited to other Housing	97
<b>Housing Success Rate</b>	<b>26%</b>

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**PIECES IRIS First Data**



# Dallas Accountable Health Communities

- DAHC addresses a critical **gap between care and community services** in the health care delivery system by testing whether systematically identifying and addressing the health-related social needs of Medicare and Medicaid beneficiaries through screening, referral, and community navigation services will impact healthcare costs and reduce healthcare utilization.
- The grant addresses the largest cost drivers:
  - Unmet health related social needs: **food insecurity, unstable housing, WHICH...**
  - develop chronic conditions, reduce individuals' ability to manage conditions

...AND lead to *avoidable healthcare utilization*.



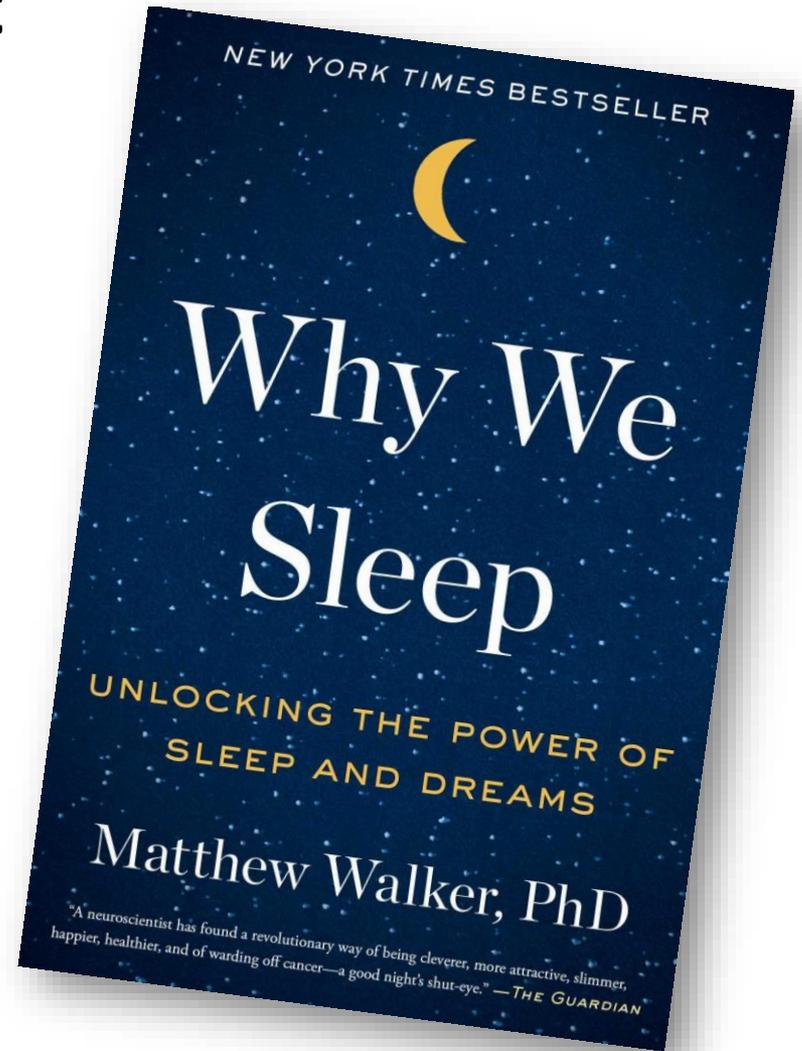
# Analyzing CoC HMIS data in IRIS

- Over 11,500 CoC clients went to two DFW hospitals in last 2 years
- 35% were admitted to the hospital
- 50% of those who went to the ED returned 3 times or more
- 26% of those admitted to the hospital were admitted 3 times or more
- Over 13% of CoC clients are considered high utilizers of ED services
- CoC clients were 4 times as likely to be high utilizers of the emergency department compared to other emergency department patients

# Analyzing CoC HMIS data in IRIS

- Cough was the most common reason for presenting to the emergency department
- CoC clients had a 40% higher readmission rate
- 36% of CoC clients seen in the hospital have hypertension
- 13% of CoC clients seen in the hospital have diabetes mellitus
- 10% of CoC clients seen in the hospital have kidney disease
- One individual had 386 ED visits in a 2 year span
- 36 CoC clients visited the ED over 100 times in the preceding two years

# Your Reading Assignment



# SOHA

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**RACE AND HOMELESSNESS**

# SPARC Initiative

## *Supporting Partnerships for Anti-Racist Communities*

Dallas partnered in October 2016

Other Communities in the Project:

- Columbus, OH
- Atlanta, GA
- Syracuse, NY
- Pierce County, WA
- San Francisco, CA



Phase One Study Findings Published March 2018

# National C4 SPARC Report

- 2/3 of people experiencing homelessness in SPARC communities were Black
- Poverty alone does not explain the inequity, as the proportion of Black individuals experiencing homelessness exceeds their proportion living in deep poverty
- Oral histories from study identified major system areas of focus regarding racial inequity:
  - Economic Mobility
  - Housing
  - Criminal Justice
  - Behavioral Health
  - Family stabilization



# National C4 Report

*“Lack of economic capital within social networks precipitates homelessness for many people of color”*

## Pathways into homelessness:

- **Network impoverishment:** Not just that individual was experiencing poverty – everyone they know was experiencing poverty too
- **Family destabilization:** Strain on social support deep, damaging and exacerbated by systems involvement
- **Intimate Partner Violence:** Common among narratives from study respondents
- **Health:** Instability and trauma correlated with mental health and substance use

# Dallas SPARC Findings & Recommendations



- Black population 18.7%
- Black population in deep poverty 30.7%
- Black population experiencing homelessness 66.7%

## Some of the Recommendations:

- Design equitable coordinated entry/assessment system
- Incorporate racial equity into grantmaking and decisions
- Include racial equity in data analysis
- Support hire racial equity within organizational development
- Support innovative health strategies to meet the needs of communities of color

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**PROJECTS IN PROGRESS**



April 19, 2018 9:00 am - Noon

Lovers Lane United Methodist Church

- *State of Homeless Youth Address*
- *Texas Appleseed & TX Network of Youth Report*
- *Outlast Youth True Colors Fund Training*



# Emergency Shelter Housing Challenge

## *90 in 90*

- April – June 2018
  - Austin Street Center
  - The Bridge
  - The Salvation Army
- **Goal:** house 90 persons in 90 days
- Improve interagency **coordination**
- **Pathway to housing** a primary shelter strategy
- Apply new tools and build skills to rapidly house
- Learn and repeat!

# ES Clients Focus Groups – In Their Own Words

- They **wanted** someone to care
- They are ready and **want** today to get started
- They all talked about where they **wanted** to live – not in the ghetto – one **wanted** to live in downtown Dallas to be close to work
- They talked about getting their ID; some may not have known how
- They talked about wanting to have personal counseling and *grief counseling...*
- But would settle for group meet ups (**the thing is that they are AWARE they need counseling to get back to their normal personalities**)
- They would **like** to meet with their peers to just talk in private at a restaurant
- **They liked** that they could just talk freely to us and nothing would leave the room
- *They all took us seriously and feel their voices have been heard; they **liked** being heard*
- We need a safe space for them to speak



**My Housing Plan**

What is *YOUR*  
housing plan ?

# My Housing Plan



## Step 1: *Let's Get Moving!*

- Critical Documents
- Housing preference, goals, & visioning
- Personal strengths and assets

## Step 2: *Moving Up!*

- Ready to Rent training
- Resolve barriers: background, income

## Step 3: *Moving Out!*

- Housing Search/Placement

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**STRATEGIC PLANNING**

# CoC Leadership and Strategic Planning Retreat

- March 26-28, 2018 Dallas, Texas
- 11 National Leaders in Homelessness will facilitate
- 65 Local Homeless Response Leaders
- Learn about Homeless Response System strategies throughout the US
- Understand the specific roles each provider contributes to ending homelessness
- Apply corporate process strategies within our CoC Planning leadership



# Homeless Response System Consolidated Strategic Plan

- Three Year Plan: Oct 1, 2018 – Sept 30, 2021
- High level **community plan** that will ‘consolidate’ three one-year Strategic Work Plans for core stakeholder groups (CoC, Unlocking Doors, etc.)
- Modeled after the HUD Consolidated Plan and Annual Action Plan process
- ALL stakeholder groups invited to find their role within the plan
- DRAFT to Community April 13
- Endorse and Finalize June 15
- Room for input & Action Plans for CoC, DAP, and others



# Impact Domains on Homelessness

1. Housing
2. Economic Mobility
3. Criminal Justice
4. Behavioral Health
5. Family Stabilization
6. *Community Engagement*

- *What is the transformed state we desire in each domain?*
- *What intervention spaces can we influence?*
- *What are our goals?*



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## Take Aways

# Take Aways from the SOHA

- Homelessness is increasing
- 4,140 persons are homeless on any one night: sheltered and unsheltered
- Homelessness continues to be profoundly correlated to race, primarily people of color
- Veteran Homelessness is decreasing
- Chronic Homelessness is decreasing
- Homelessness is aging
- Homeless families with children are facing longer stays in homelessness
- Demand for safe, affordable and accessible housing dramatically outpaces supply

# Take Aways from the SOHA

- The Homeless Response System is more data driven and more systematically structured than ever
- The Homeless Response System is deeply coordinated, communicative and collaborative than ever
- The funding sources to address the demand are static to decreasing
- Extreme poverty is the primary driver of homelessness – the inability to have household incomes sufficient to meet the cost of housing
- We must build household incomes
- We must build safe, affordable, accessible housing

# Take Aways from the SOHA

Your organization, affiliation, influence will have an opportunity to find a place of impact within the

## *Homeless Response System Consolidated Strategic Plan*

We are listening.



SOHA

**YOUR THOUGHTS & IDEAS?**