

Regional Homelessness Assessment Report



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This report uses information from the Homeless Missourians Information System (HMIS) to provide a snapshot of the extent and nature of homelessness. Data was compiled from agencies in region1 for the time period of January 1, 2012 to December 31, 2012. This report also outlines performance measures used to evaluate the effectiveness of homeless service delivery systems.

Regional Overview

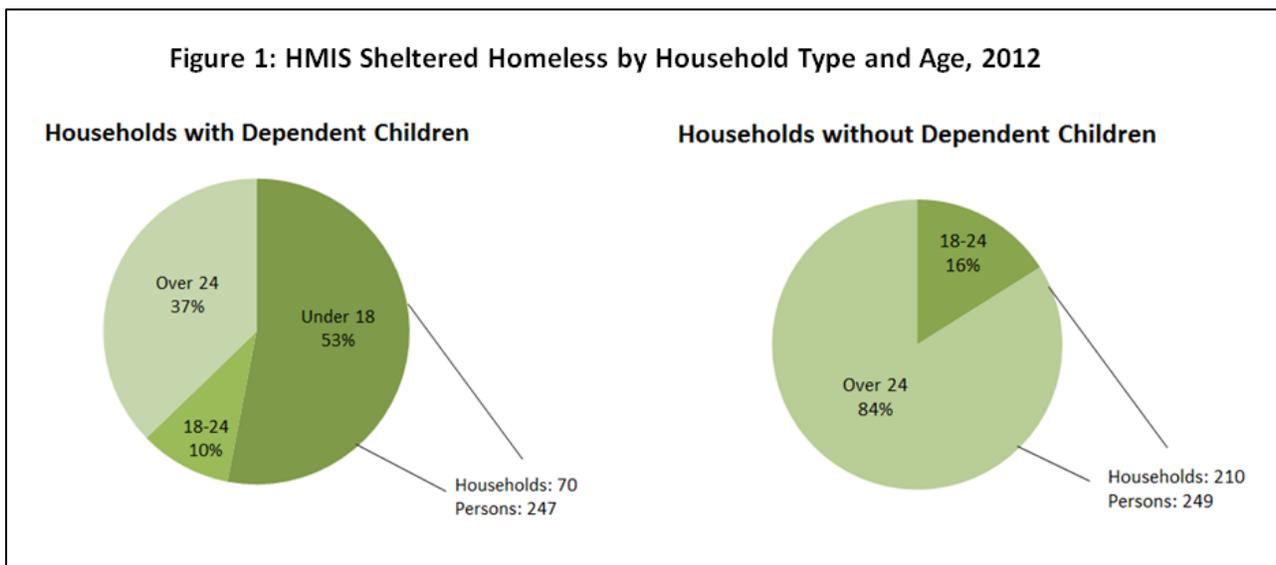
Region 1 of the Balance of State Continuum of Care covers 11 counties: Bollinger, Cape Girardeau, Crawford, Franklin, Iron, Jefferson, Madison, Perry, St. Francois, Ste. Genevieve and Washington. According to the 2012 Winter Point-in-Time Sheltered and Unsheltered Homeless Count, 211 people were reported as being homeless with nine of them not having shelter.

In 2012 there were 11 housing programs, not including domestic violence providers, as well as agencies providing prevention-only services. Of these 11, five are enrolled in HMIS and contributed data to this report. These include:

- Two Shelter Plus Care programs (through the Department of Mental Health with processing centers at COMTREA and East Missouri Action Agency).
- Two permanent housing programs (Community Caring Council and Family Counseling Center).
- One emergency shelter (Salvation Army Cape Girardeau through hotel/motel vouchers to local shelters).

The programs currently not enrolled in HMIS include seven emergency shelters (Amen Center, Agape House of Mountain View, Jefferson County Rescue Mission, New Beginnings women’s shelter, New Beginnings men’s shelter, New Life Evangelistic Center and Shared Blessings). There is also a transitional housing program – Revival Center – that does not track their information in HMIS. These programs account for 228 beds out of 311 available in the region, though the total capacity fluctuates based on the permanent housing program units. As a result, HMIS data and this report only accounts for 27 percent of the homeless population in the region.

With 73 percent of the available beds *not* tracked in HMIS, funders and the community do not have thorough data to understand the extent of homelessness in the region and evaluate the system of care. While the Revival Center accounts for many of the beds, the Amen Center and Agape House of Mountain View also have a relatively high capacity.

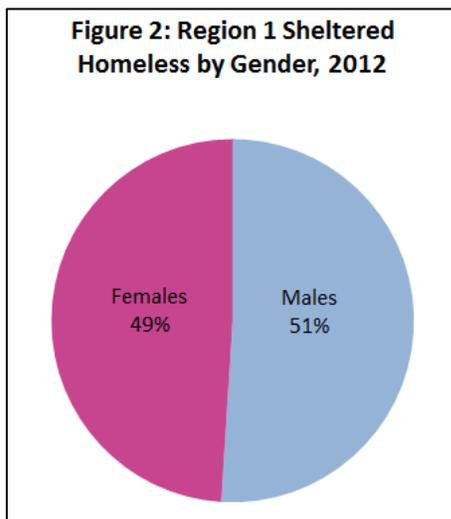


Demographics

A total of 280 households were housed in region 1 in 2012, accounting for 496 people. This represents roughly 13 percent of all persons served by housing programs and shelters enrolled in HMIS in the continuum. In future reports, demographic information will include data from agencies that record prevention services to show a more complete picture of what homelessness looks like in the region and continuum.

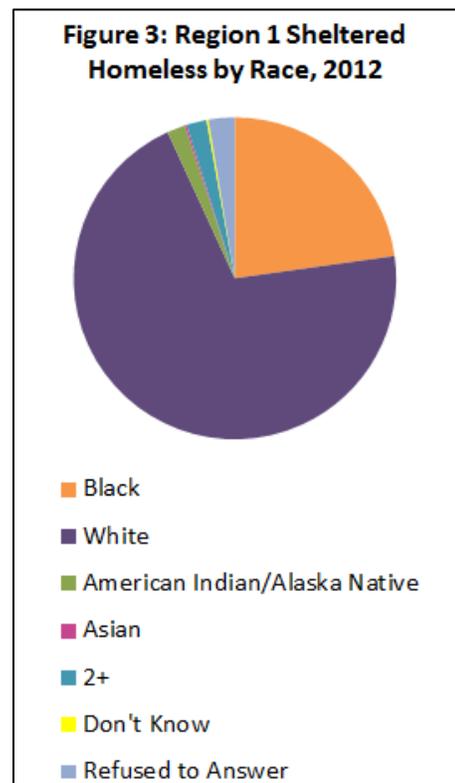
Of the 280 households, 70 were households with dependent children and 210 were households without dependent children (see Figure 1). All five housing programs serve single households with and without children, though the region tends to serve more households without children.

Of the 496 people housed, 51 percent were male (see Figure 2). The split between males and females is equally divided, which is unique in the continuum.

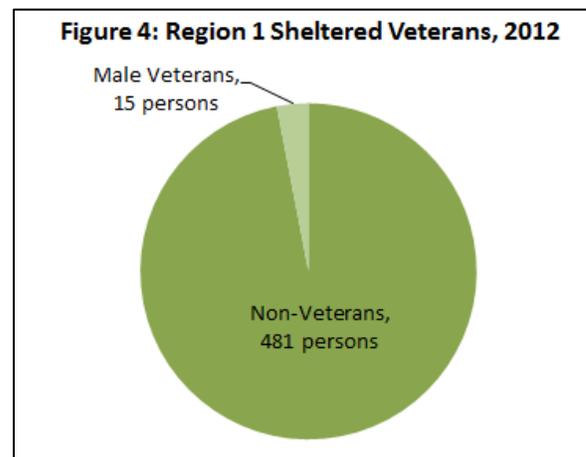


A majority (70%) of all persons served in 2012 reported their race as white (see Figure 3). There was also a relatively substantial amount (23%) who reported their race as black or African American. The remaining population was pretty evenly divided between American

Indian/Alaska Native, two or more races and those who refused to answer.



Only a small percentage (3%) reported being a veteran, all of whom were male (see Figure 4). The distinction in gender among veterans is a particular area of interest for the Department of Housing and Urban Development (HUD) due to the nature of their collaboration with the Department of Veteran Affairs.



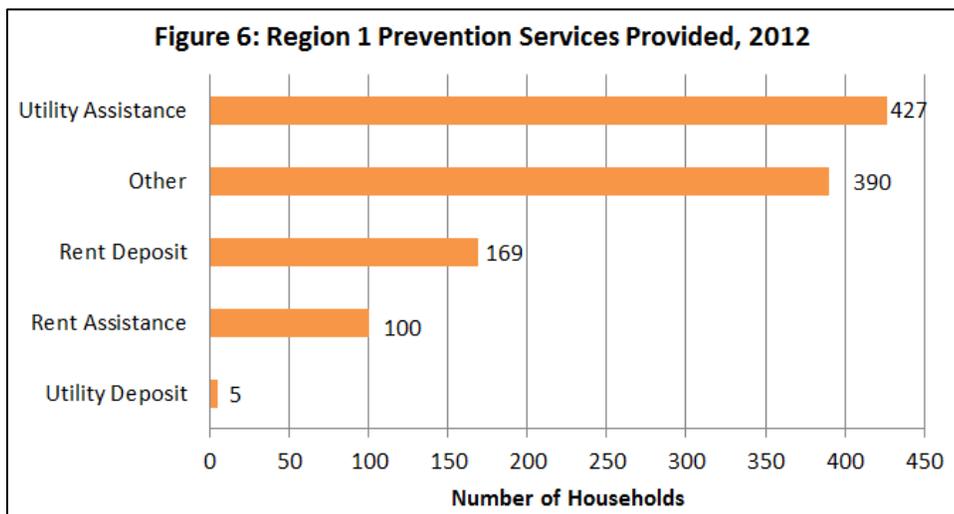
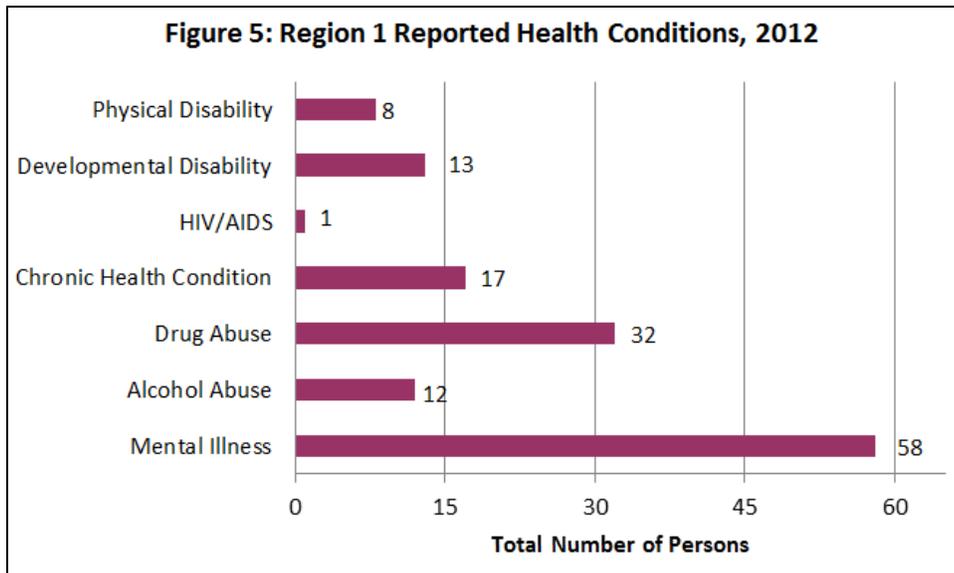
Additional subpopulation data for clients served by housing programs and shelters focuses on health conditions. The most common health condition reported in HMIS was mental illness, which impacts at least 12 percent those served by housing programs during the year. This percentage is higher than the continuum's, which is roughly 10 percent of all served by housing programs and shelters.

The next most commonly reported health condition was drug abuse, which reflects about 6.5 percent of the clients served in 2012. The third highest reported health condition was chronic health, which is somewhat unique given

that at the continuum level, it is the second to last common health condition.

Prevention Services

Currently there are five agencies in region 1 that track prevention services in HMIS: Community Caring Council, Disability Resource Association, Lutheran Family & Children Services, Salvation Army – Arnold and Salvation – Army Cape. Prevention services include rent assistance and deposits, utility assistance and deposits and other services. Other services take into account food pantry items, transportation costs and hotel/motel vouchers.



A total of 1,091 households, which may include households who have received services multiple times or in different categories, were assisted in the region for a total of \$340,431.33. This accounts for 31.6 percent of the total amount expended for prevention in the continuum.

The majority of prevention services provided are for utility assistance, followed by other deposits (see Figure 6). Within the other category, the top assistance items include food/groceries, transportation and hotel/motel vouchers. This is likely due to Salvation Army – Cape Girardeau tracking hotel/motel vouchers provided through their grant.

Moving forward, the HMIS Project will be identifying other agencies in the region that also provide prevention services to get a more complete picture of those efforts.

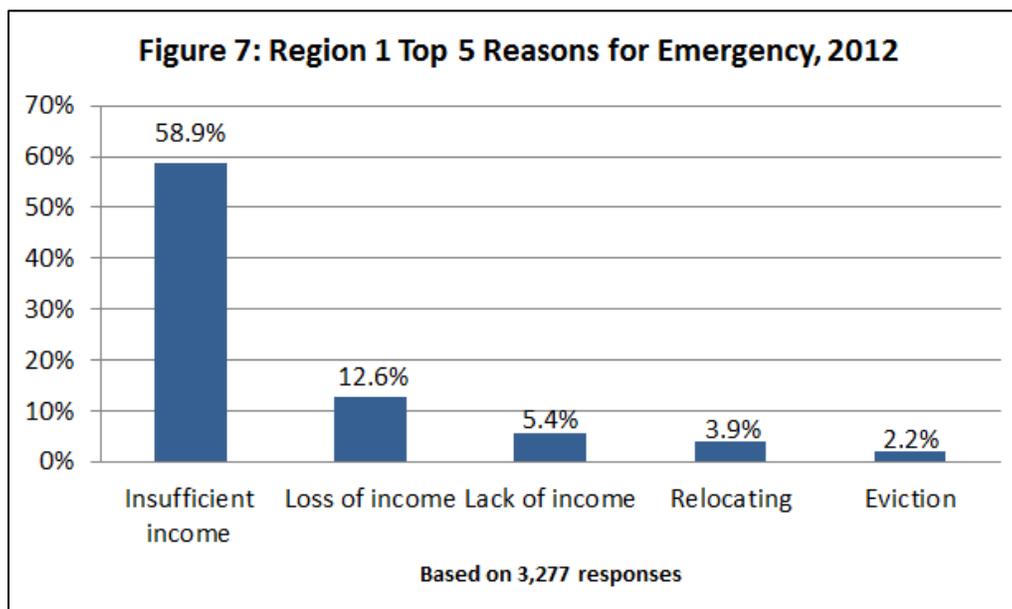
Reasons for Emergency

Currently there are 31 options in HMIS to indicate a household’s primary reason for emergency. There are also a handful of subsequent reasons that a household can select as secondary and tertiary reasons for experiencing emergency. In HMIS, the “Reasons for Emergency” report pulls on all three of

those reasons. As a result, this particular data is not unduplicated. Data is also unduplicated in that a household may have sought services multiple times. Additionally, this report pulls at program level. As a result, data for Family Counseling Center is included with region 6 instead of region 1.

Examining why people seek services – both housing and prevention – allow agencies, communities and the continuum to look at the needs of the clients. It is also helpful in understanding the causes for emergency – whether it is due to financial reasons, health issues or other factors. This may provide some insight to unmet needs as well, pointing to potential gaps in services.

In 2012, the most common reason for emergency in the continuum was insufficient income, accounting for roughly 53 percent of the respondents. That is also the case for region 6, where nearly 23 percent of the responses fell under the category of insufficient income (see Figure 7). The next most common reason for experiencing emergency is loss of income, which is also consistent with data at the continuum level. It is also comparable to data from previous years, which are available through reports on the HMIS Project website.



Program Utilization

Utilization rates represent the number of units or beds occupied on a given night. In addition to providing useful information to the region and continuum about bed availability or unavailability, utilization rates are the single strongest indicator of HMIS data quality. It allows agencies and the HMIS Project to spot if an agency is missing program entries or exits in the system.

The rates are calculated on the last Wednesday of each month from July 2012 to December 2012 for the programs enrolled in HMIS. Data from January through June 2012 was presented during September Regional Housing Team Meetings and the report is available on the HMIS Project website. Utilization rates for 2011 are also available on the website.

All four housing programs track their capacity in units, so unit utilization rates are more telling than bed utilization rates. Additionally, although the number of units available may fluctuate month to month, the capacity for each month remains the number of units indicated by the

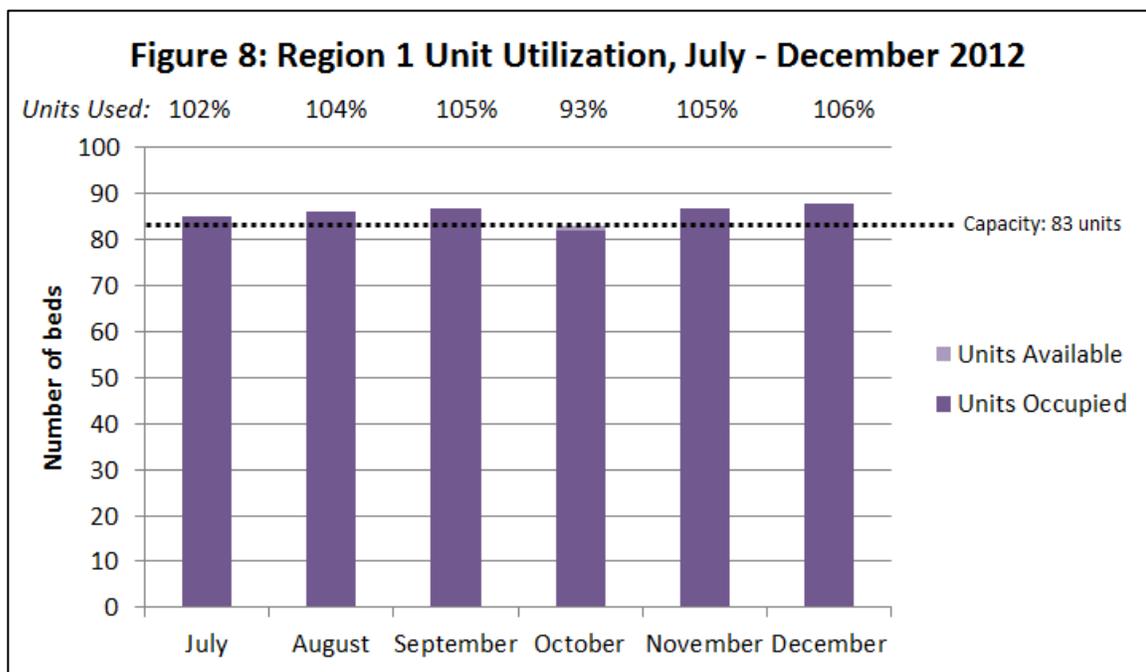
grant. Using that number allows the program to show how they are able to utilize their funds to best serve the region.

For region 1 there is a combined capacity of 83 units. During the six-month period, the utilization rates were consistently at or above full capacity (see Figure 8). This indicates that the program is consistently full and even utilizes their funding in a way that allows them to serve more than the grant estimated.

While the unit utilization rate suggests that there is a limited availability of beds, that is only reflective of permanent housing programs. Without information available for the seven emergency shelters and one transitional housing program not tracking information in HMIS, it is hard to determine what the true need for additional housing is in region 1.

Average Length of Stay for Individuals & Families at Emergency Shelters

While the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act will provide guidance on how to measure for overall



length of homelessness, currently the Balance of State CoC looks at the average length of stay at emergency shelters to obtain a baseline measure of how the continuum is performing.

Currently HUD identifies high performing communities as ones where the average length of stay at emergency shelters is 20 days or less. Communities are also considered high performing if they decrease the average length of stay by 10 percent each year.

Baseline measures from 2011 and 2012 indicate that in the Balance of State Continuum individuals generally have a higher average length of stay at shelters, though they are seeing the largest decreases (see Table 1). With individuals and families having an average length of stay higher than 20 days, the continuum has a goal of decreasing the average length of stay by 10 percent each year.

	2011	2012 Goal	2012 Actual
Individuals	51.3	46.2 days	38.9 days
Families	36.5	32.9 days	35.9 days

At the continuum level, the goal for individuals' length of stay in 2012 was met. However, for families, the average length of stay only decreased by half a day. This could be because there are fewer emergency shelters serving families in the continuum that track data in

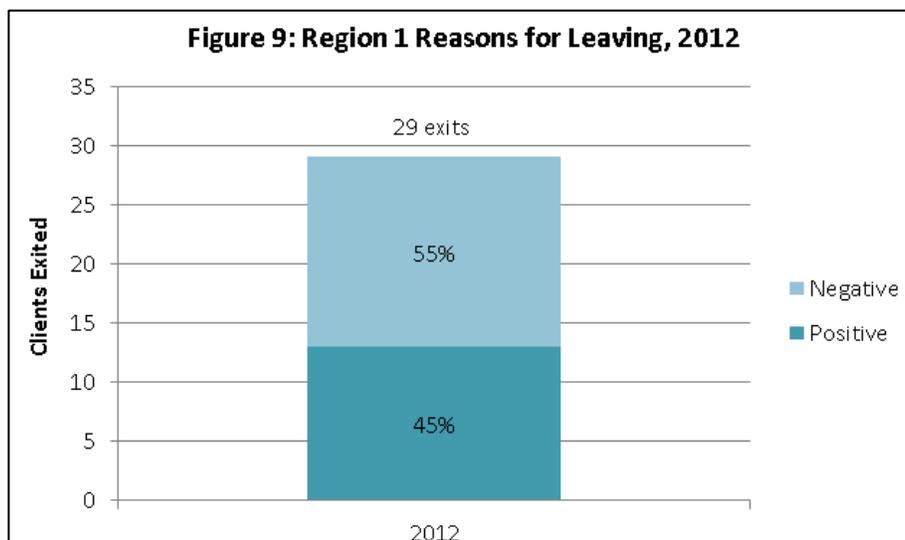
HMIS to help lower the average length of stay.

Moving forward with the goal of reducing the average length of stay by 10 percent each year, the goal for 2013 is 37 days for individuals and 34.1 days for families.

Reasons for Leaving

Currently there are 11 options in HMIS listed as reasons for leaving a housing program or shelter. Those reasons are divided into positive, negative and other/unknown reasons for leaving. Positive reasons for leaving include left for housing opportunity or completed program. Negative reasons for leaving include such things as non-compliance with project, needs could not be met and disagreement with the rules. Both positive and negative reasons are classified based on what other continuums have previously done, which aided in categorizing the reasons for leaving. Unknown/other reasons for leaving are tracked primarily for data quality purposes.

In region 1, just over half (55%) of those who left a housing program did so for negative reasons (see Figure 12). Most of this is attributed to clients recorded as being non-compliant with project. There were also a handful of clients whose needs could not be met by the project.



For the remaining clients who left for positive reasons, a majority of them were listed as completing the project. A small number also left for another housing opportunity. What is unique and also positive about this region is that no clients exited for an unknown reason.

Exit Destinations

Currently in HMIS there are 18 exit destination options for clients leaving a housing program or emergency shelter. Those destinations are categorized as being permanent, temporary, institutional or other and are listed as such based on the Annual Performance Report (APR).

Exit destinations are examined for two reasons. The first is that it provides an opportunity to look at how many clients leave for stable housing situations, which is one of three primary performance measures for permanent housing programs. The second is for data quality purpose, particularly for unknown exit destinations.

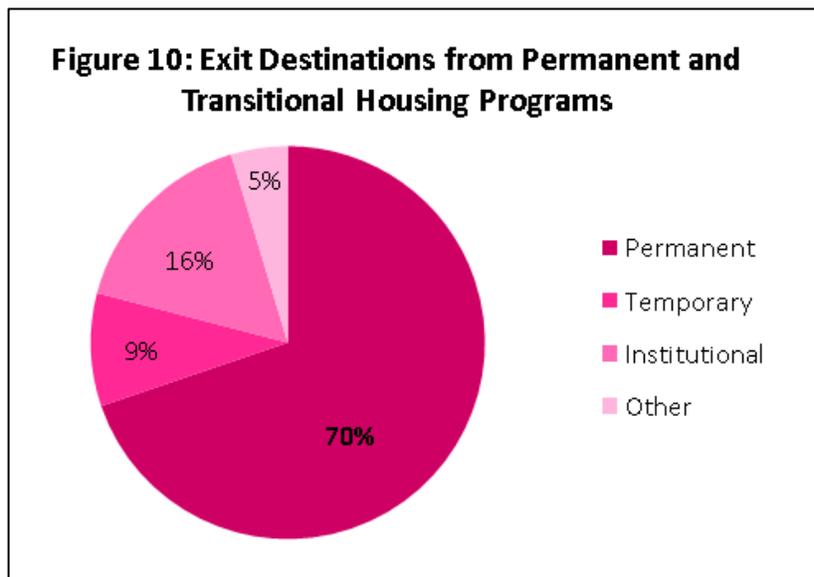
In region 1, a majority (70%) of those who exited went to a permanent housing destination. Most of those were to a rental house or apartment with no subsidy or they moved in with family permanently.

The remaining clients were pretty evenly divided between institutional settings and temporary settings. Only two clients exited to an unknown destination. Those who went to a temporary destination were either moving in with family or friends. The new APR does distinguish whether moving in with family or friends will be a permanent or temporary situation, allowing for further analysis and understanding of where clients go once they exit permanent housing programs in region 1.

Moving Forward

Although this report provides a snapshot of the extent and nature of homelessness in region 1, there are some limitations of the report.

First and foremost, not all programs within the region track their services in HMIS. This report only includes data for agencies enrolled in HMIS and may have data quality issues. This primarily pertains to unknown exit destinations and exiting clients in a timely manner. The HMIS Project will continue to work with agencies on an individual basis to address any data quality concerns. While the data in this report shows aggregate level information for the region, agencies can request their specific data at any point for further review and analysis.



Additionally, there are system limitations in what data can be pulled from HMIS. The HMIS Project will continue working with MISI to enhance the system to allow more detailed data reporting. In the future, the following changes will be addressed:

- Demographic information will include data from programs providing prevention services.
- Reasons for emergency currently pull for primary, secondary and tertiary reasons, which will be reduced to just the primary reasons.
- Reasons for leaving will be pulled at program-level to account for agencies who serve multiple regions.

As regulations are released with guidance on how to measure performance at the agency and continuum level, such as recidivism and average length of homelessness, this report will be changed to address those measurements.