



## Chronic Homelessness: Getting to Zero by 2015

July 17, 2012

9:00 – 10:45 am



# Agenda

- 9:00 Welcome and Overview
- 9:10 USICH Analysis of Chronic Homelessness Trends
- 9:30 Community Progress: Dayton, Ohio
- 9:45 Community Progress: Tulsa, Oklahoma
- 10:00 Q & A Session with Panel
- 10:35 Concluding Remarks



## Welcome and Panelists

- Joshua Leopold, Management and Program Analyst, USICH
- Joyce Probst-MacAlpine, Manager of Housing and Homelessness Solutions, Office of Family and Children First, Montgomery County, Ohio
- Gregory Shinn, MSW, Associate Director, Mental Health Association in Tulsa
- Moderator: Barbara Poppe, Executive Director, USICH



# Overview

- *Opening Doors* sets goal to finish ending chronic homelessness by 2015
- In the 2011 Point in Time Count, chronic homelessness decreased by 2.4%, to 107,148. In 2007, that number was 123, 833.
- Progress is slowing. We now need added urgency and focus to finish the job by 2015.
- Today -- examination of underlying reasons for this slowed progress & community strategies that have proven to make progress despite challenging economic times.



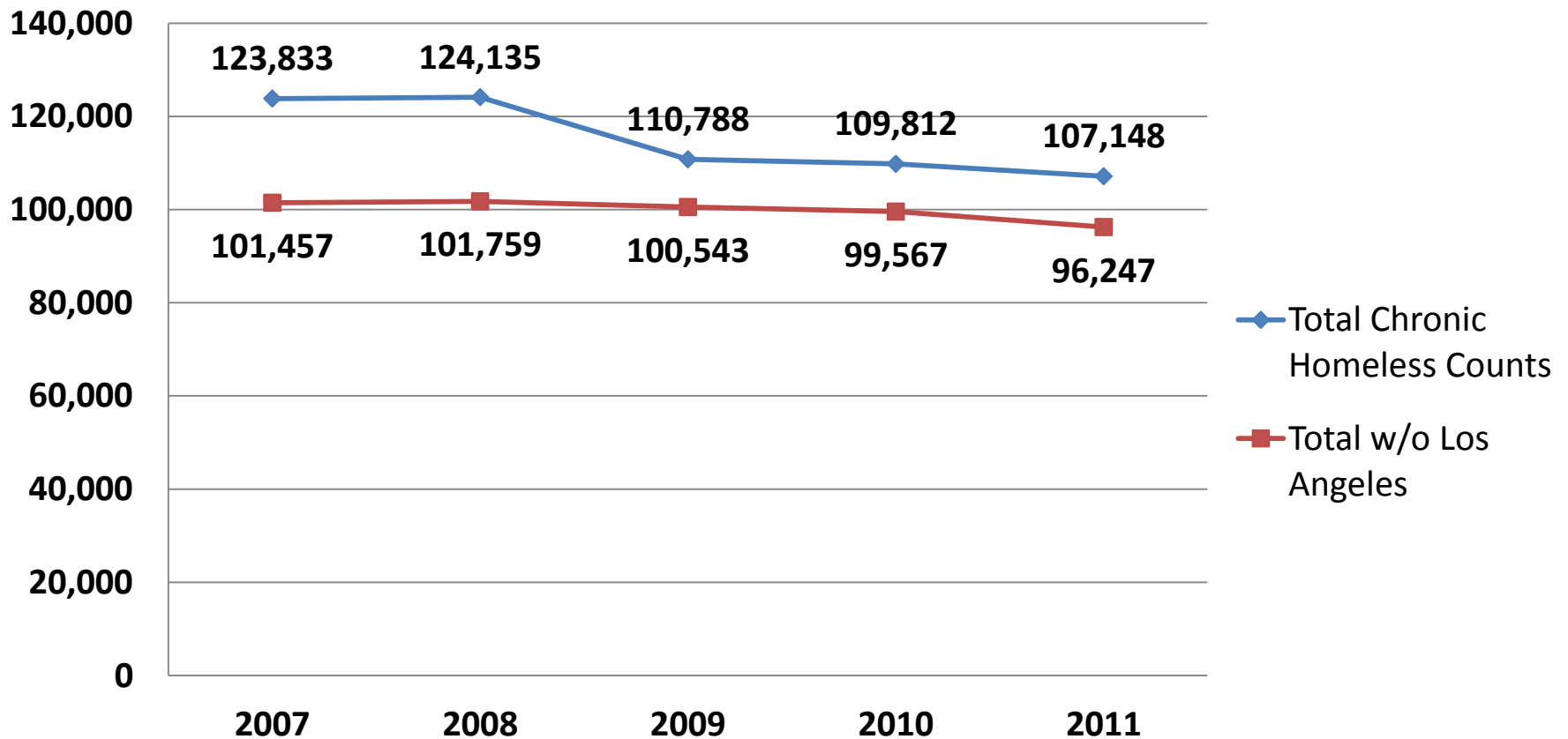
# Chronic Homelessness Defined

An individual or family who:

- Resides in a place not meant for human habitation or in an emergency shelter;
- Has been homeless continuously for one year (OR) on four separate occasions in the last three years; and
- Has an adult head of household that is disabled.

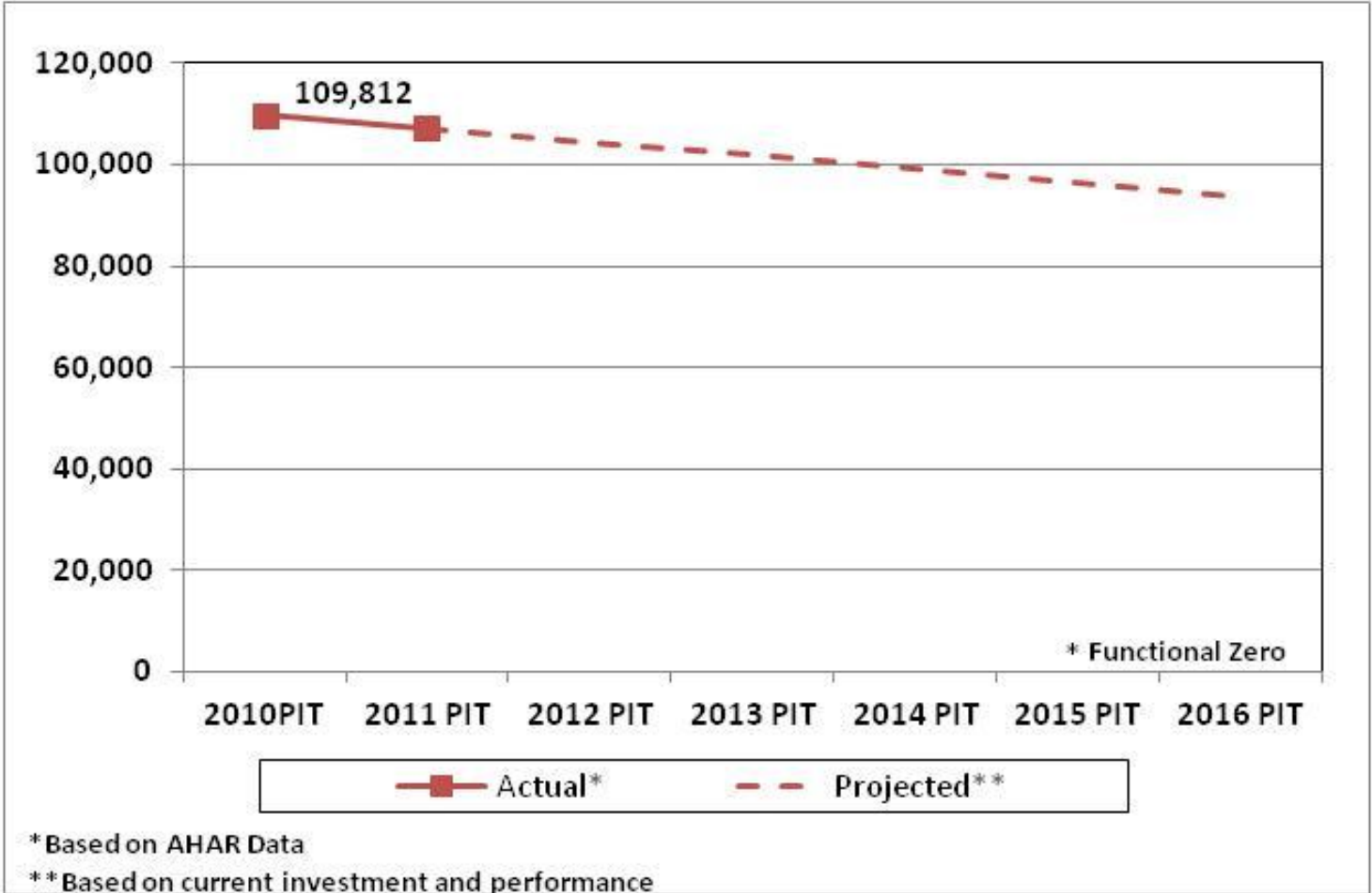


# Chronic Homelessness, 2007 - 2011





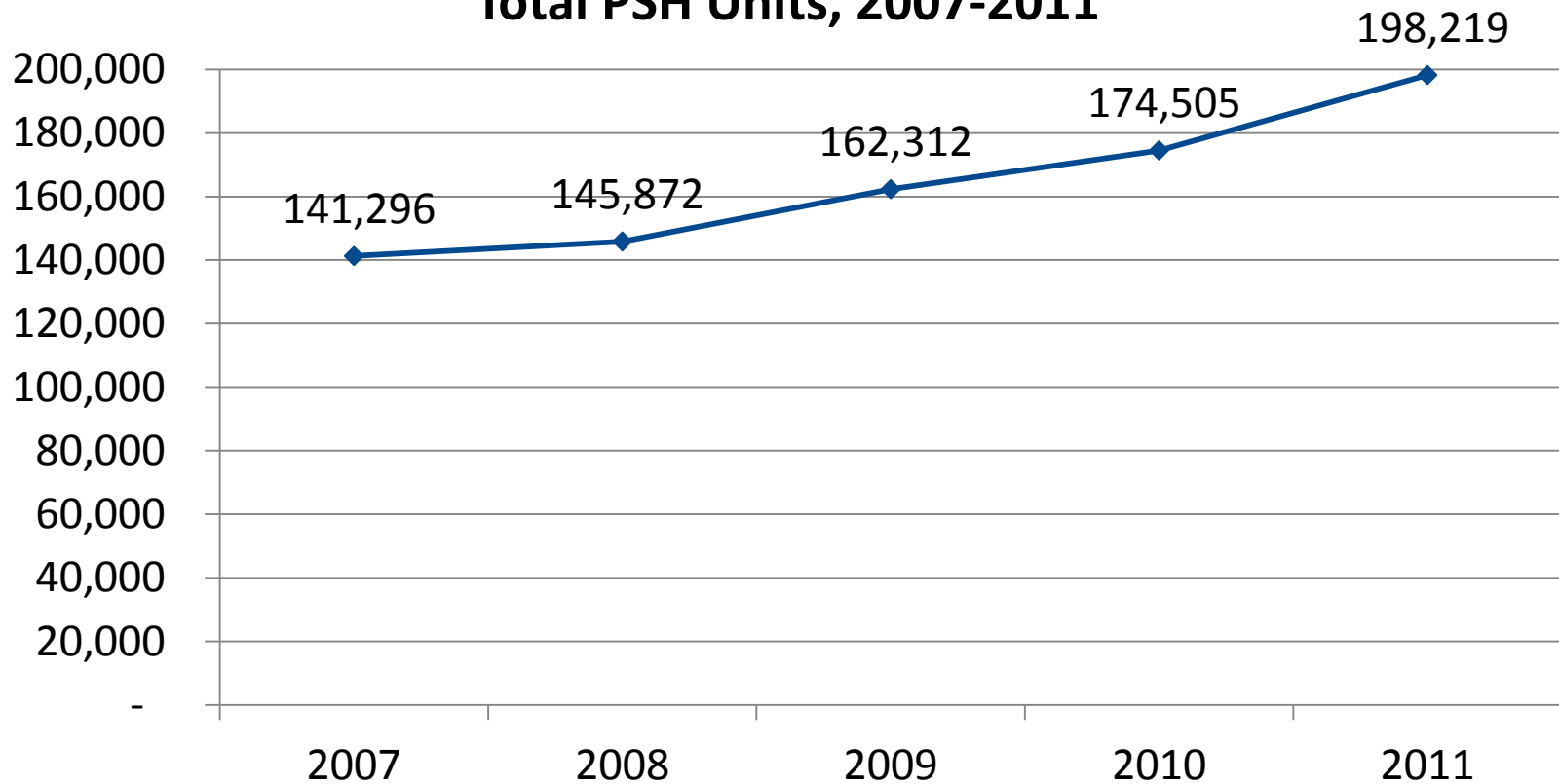
# Chronic Homelessness, Projected Path vs. Target





# Increase in Permanent Supportive Housing

### Total PSH Units, 2007-2011







# Relationship between Permanent Supportive Housing and Chronic Homelessness

- Regression analysis to examine relationship:
  - ✓ Statistically insignificant relationship between increases in overall PSH inventory and chronic homelessness
  - ✓ Statistically significant relationship between increases in PSH for individuals and decreases in sheltered chronic homelessness

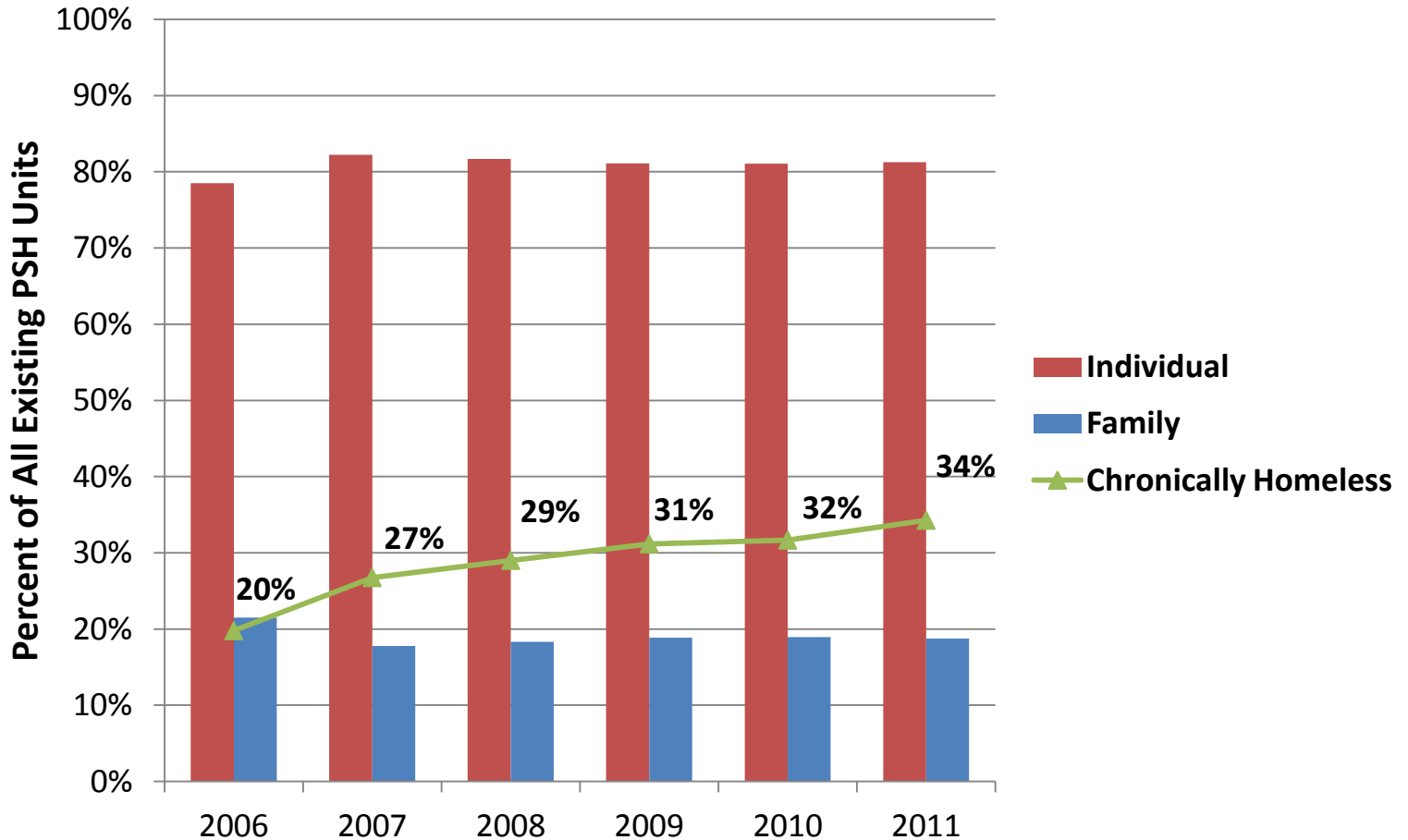


## Factors Believed to be Influencing Progress

1. The degree to which communities are effectively targeting their PSH units
2. The geographic distribution of federal, state, and local resources invested in solutions
3. The dynamics of chronic homelessness



# Targeting of Supportive Housing





## Effective Use of PSH Resources

- Adoption of “Housing First” service philosophy, instead of requiring “housing readiness”
- Centralized priority placement list to coordinate PSH referrals
- Leveraging Medicaid, other funding sources, for services
- Opportunity to free up resources for other populations (families, youth)
- Community plans for getting to zero



## Geographic Distribution of Resources

- South and West regions have 50% of PSH units but 80% of chronically homeless population
  - ✓ Federal funding formulas do not fully reflect factors contributing to homelessness
  - ✓ Funding decisions must weigh capacity and past performance in addition to need
  - ✓ States and local communities in the South and West often under-investing

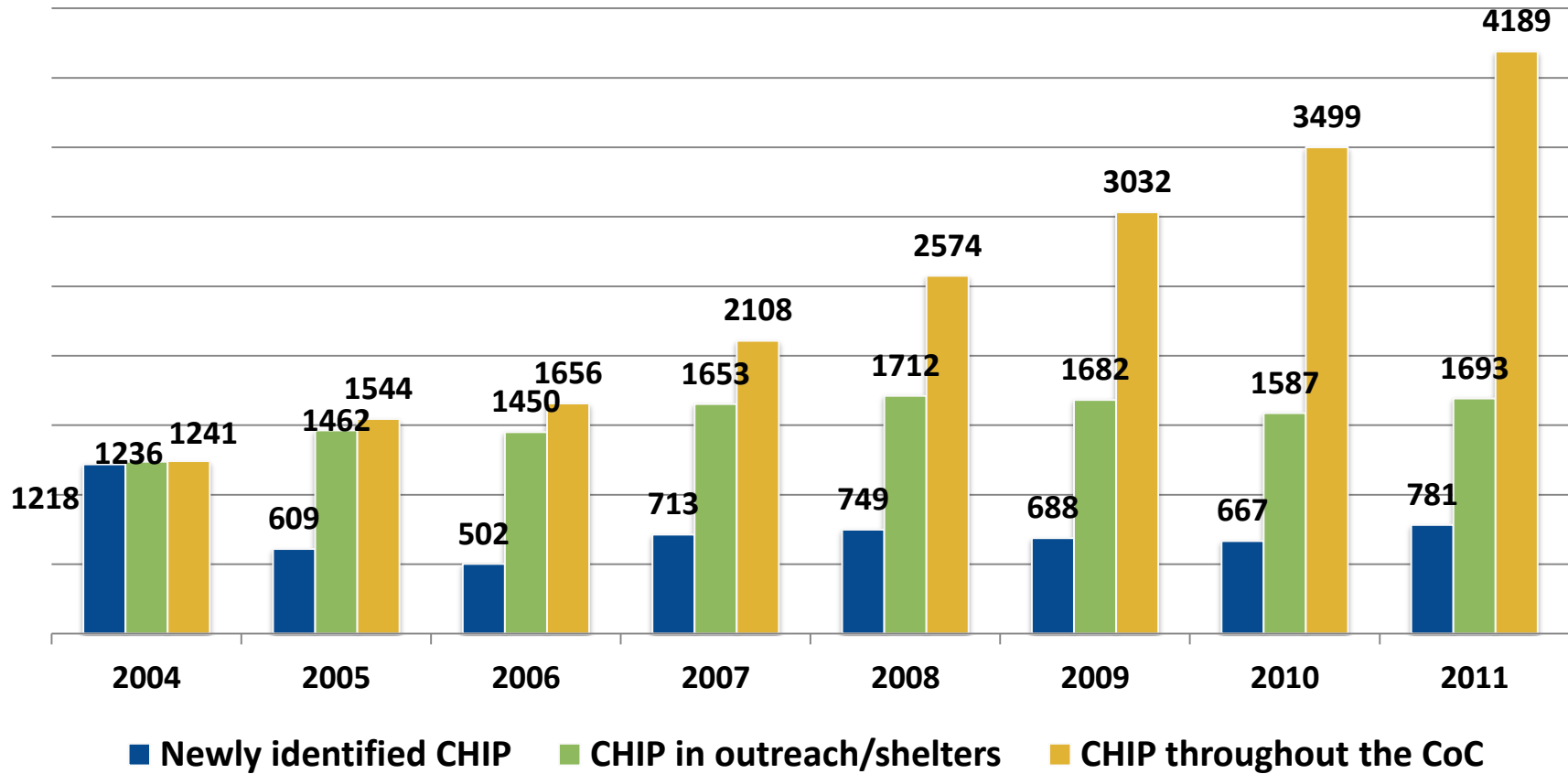


## Dynamics of Chronic Homelessness

- Chronic homelessness appears more dynamic than previously assumed
  - ✓ Based on a recent study in Philadelphia, 60-70% of individuals met episodic definition
  - ✓ New York City found that over 80% met episodic definition



# Chronic Homelessness Cincinnati, 2004 - 2011





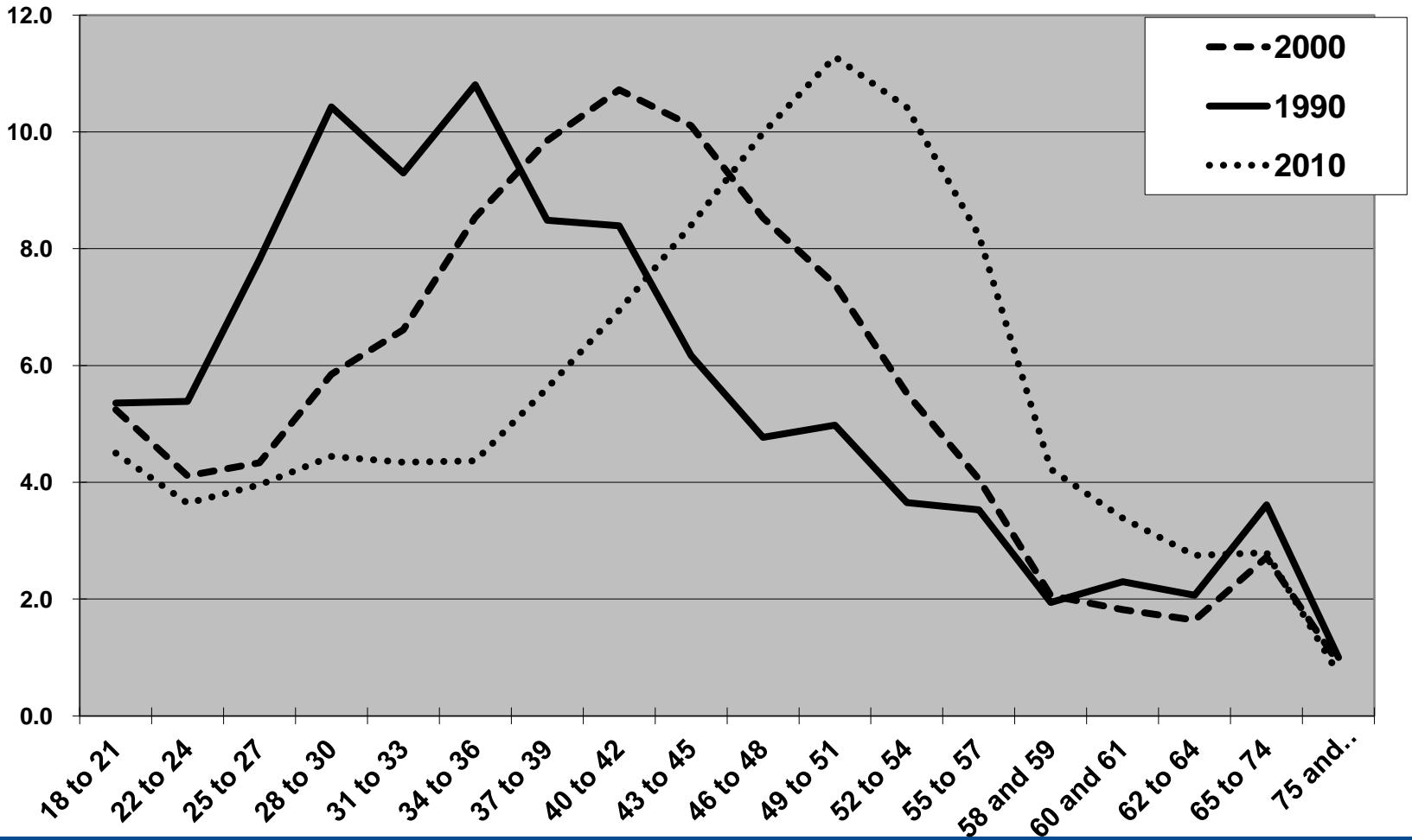
## Dynamics of Chronic Homelessness

- 81% of State Mental Health Agencies reported cuts in FY 2011
  - ✓ Nearly half reported cuts would result in shutdown of state psychiatric hospitals or wards within hospitals
  - ✓ 8% reduction in national inventory of state hospital beds
- In 2010, prison releases exceeded admissions for the first time
  - ✓ State of California ordered to reduce prison population by 55,000 inmates in next 3 years (Brown v. Plata)
  - ✓ Number of people in custody exceeds total prison capacity in 19 states





# Distribution, by Age, of Male Shelter Users – 1990, 2000, and 2010





## Questions for Further Consideration

- Disentangling the impacts requires further study:
  - ✓ How accurate are PIT estimates of chronic homelessness?
  - ✓ How many people experience chronic homelessness during a year?
  - ✓ What impact do reductions in state and local spending have on chronic homelessness?
  - ✓ Does 100,000 Homes Campaign participation lead to stronger and more sustained progress?

# Chronic Homelessness: Getting to Zero by 2015 in Dayton-Montgomery County

Joyce Probst MacAlpine  
Montgomery County  
July 17, 2012



- Montgomery County
  - 2011 Population Estimate: 537,602
  - May 2012 Unemployment Rate: 7.6%
- January 2012 PIT (shelter & street): 607
- 2011 Annual Homeless Numbers: 3,836  
(9% reduction from 2010)
- Total 2011 CoC Funding: \$7,291,891
- *Homeless Solutions Community 10-Year Plan to End Chronic Homelessness and Reduce Overall Homelessness* adopted June 2006

**Dayton-Montgomery County**

Prevention

ODOD Housing Stability Program \* ESG Prevention \*

Street Outreach/Inreach

AIDS Resource Center Ohio Daybreak PATH Samaritan Homeless Clinic Homefull VA Medical Center

Safe Haven

HomeStar Safe Haven

Gateway Shelter

Daybreak Gettysburg Gateway for Men St. Vincent Gateway for Women and Families YWCA Domestic Violence Shelter

Programmatic Shelter

Holt Street HCHV Red Cross Family Living Center Samaritan Clinic Respite Care VA Domiciliary YWCA WIN

Rapid Re-Housing

ESG Rapid Rehousing \* MVHO TBRA \* ODOD Housing Stability Program \*

Transitional Housing for Homeless

Daybreak Community DePaul Center Homeshare Linda Vista Mercy Manor  
 Opportunity House St. Vincent Supportive Housing Homefull Rapid Re-Housing CoC Demo Homefull VA TH Per Diem VOA VA TH Per Diem

Permanent Supportive Housing for Homeless

DePaul Center PSH Housing First - Belvo Housing First – Cobblegate Housing First – Tangy Housing First IV \* HUD VASH Iowa Ave. SRO  
 McKinney I&II MVHO Leasing \* N. Main Home Ohio Commons Red Cross Family Living Center PSH River Commons II  
 St. Vincent Kettering Commons Shelter+Care SRA Shelter+Care TRA Homefull Fisher Square Family PSH Westcliff YWCA SRO

Supportive Services

Goodwill Rapid Employment Opening Doors for the Homeless Samaritan Clinic YWCA Supportive Housing Program

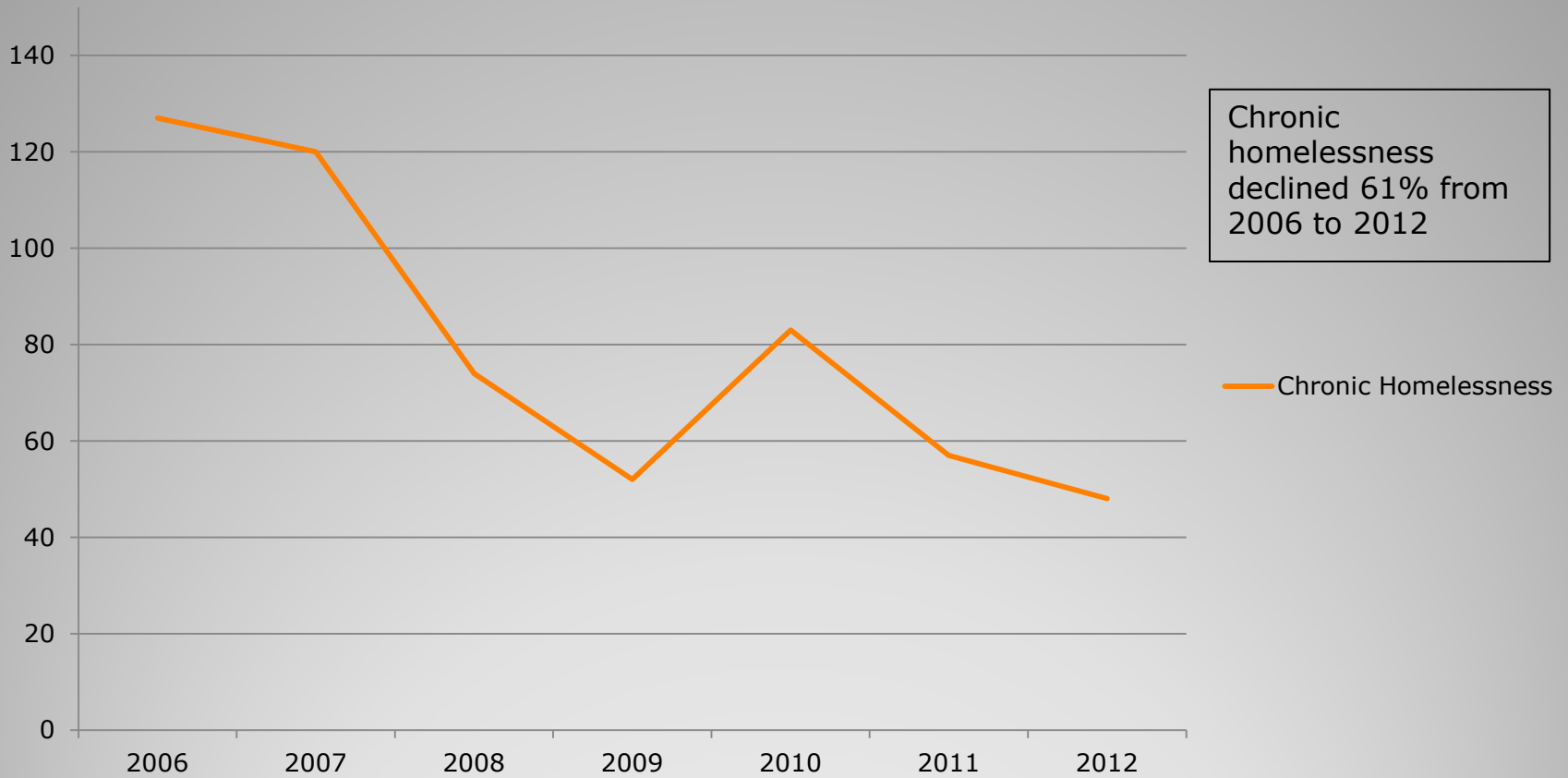
Pathways to Housing Programs

KEY: \* = under development

Program name highlighted in YELLOW = program opened after adoption of Homeless Solutions Plan

- Coordinated assessment implemented August 2010 at all gateway shelters and outreach programs
- Front Door Policies:
  - Housing providers receive clients only through Front Door process (Closing the Side Doors)
  - Clients must accept first appropriate housing referral with exceptions for vulnerable populations (ie. mental illness, domestic violence, youth)
  - PSH openings prioritized for long-stayers (200+ nights in a 12 month period), elderly, youth, unsheltered, medically fragile

## Front Door Assessment



# Chronic Homelessness

- 513 units of PSH added since 2006
- Long-stayers (200+ nights in 12 months) prioritized for PSH since August 2010
- Improved counting – verifying chronic status on PIT date

## **Reasons for Decline in Chronic Homelessness**



2012 PIT Count found 48 chronically homeless people, getting to zero by 2015 means setting a goal of housing 2-3 chronically homeless people per month. To do that we need to:

- Prioritize housing exits for people who are chronically homeless
- Prevent people from becoming chronic
  - target at 2<sup>nd</sup> or 3<sup>rd</sup> episode
  - target men who are age 46-58
- Improve housing retention

**Getting to Zero**

- As chronically homeless numbers decline communities need to work with HUD for flexibility on chronic PSH units – need to be targeted to people who would be chronic without the housing
- Need better solutions for single adults in their 1<sup>st</sup> and 2<sup>nd</sup> episodes – community based supports for employment, treatment and attachment to family & community

## **Other Considerations**

Joyce Probst MacAlpine  
Manager Housing & Homeless Solutions  
Montgomery County  
451 W. Third Street, 9<sup>th</sup> Floor  
Dayton, OH 45422  
937-225-4218  
[macalpinej@mcoho.org](mailto:macalpinej@mcoho.org)

**For More Information**



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# Ending Chronic Homelessness in Tulsa, Oklahoma

## *Community Planning and Outcomes*

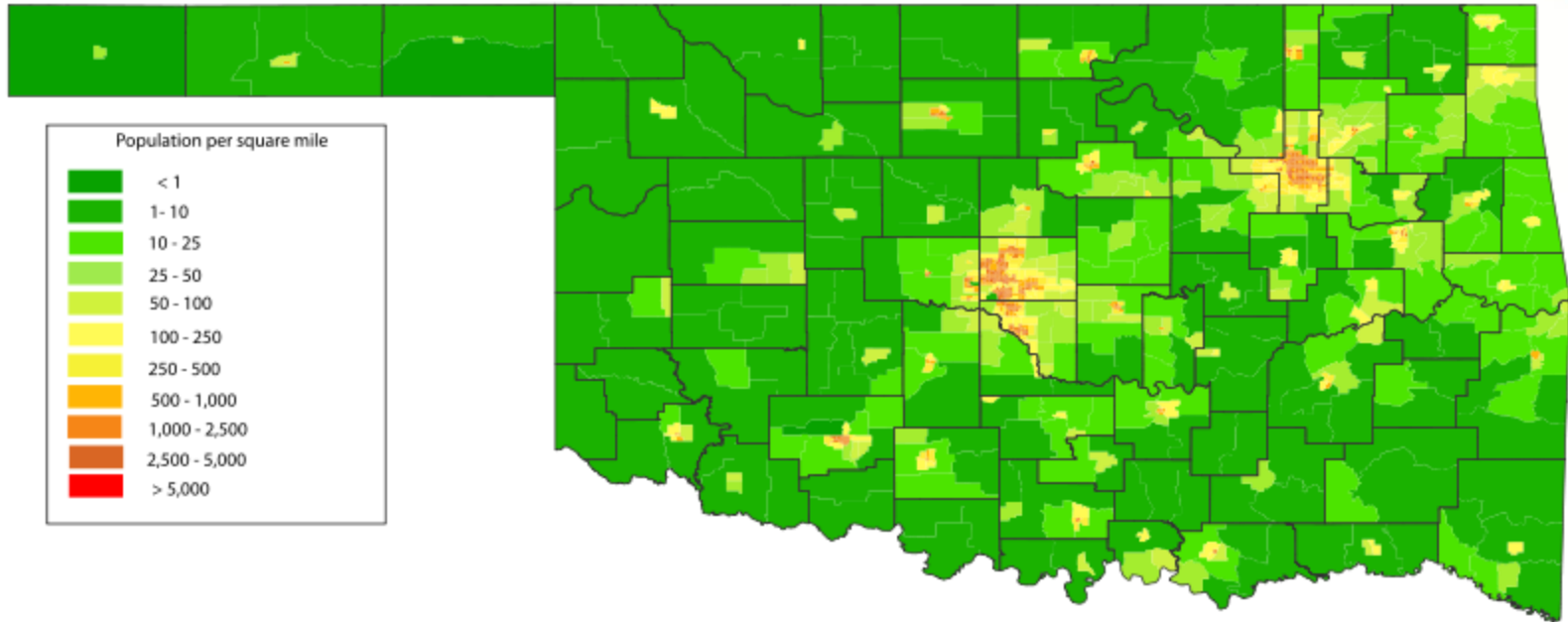
Gregory A. Shinn, MSW  
Associate Director, Mental Health Association  
in Tulsa



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p 918.585.1213 | f 918.585.1263 | [info@fromhousingtorecovery.org](mailto:info@fromhousingtorecovery.org)

# Oklahoma!!

## Population at a glance...



	Total State Population	Percent Change
<u>2000</u> Census	3,450,654	2000 - 2010
<u>2010</u> Census	3,751,351	8.7%

# Tulsa, Oklahoma

## *Community Profile*

*Population Demographics					
Tulsa County	1990 Census	2000 Census	2011 Estimate	2016 Projection	Percent Change 2011-2016
Total Population	503,346	563,299	611,583	644,236	5.3%
Population Density sq/mile	857.5	959.6	1,041.8	1,097.5	5.3%
Total Households	202,536	226,892	244,316	254,551	4.2%

\*Source 2012 Tulsa Metro Chamber





# Tulsa, Oklahoma Homeless Population

*2012 Point in Time Count	2012			2011		
	All	Adults	Children	All	Adults	Children
Currently Homeless						
Emergency Shelter	627	505	122	578	508	70
Street	145	140	5	50	49	1
Total	772	645	127	628	557	71

*Over 5,000 unduplicated individuals enter the homeless system annually.*

\*Source 2012 Community Service Council of Tulsa/Tulsa CoC



# *Community Planning and Neighborhood Stabilization*

1. **Provide** : Access for Homeless
2. **Prevent** : Homelessness
3. **Preserve** : Affordable Housing Stock  
  
= **The Mixed Income Model**

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# The Vision: *Ending Chronic Homelessness Is Possible*

- Why End Chronic Homelessness?
- It makes fiscal sense: *2007 Tulsa Study*
  - Cost of CH person on street: \$24,000 - \$34,000 annually\*
  - Cost of formerly CH person in supportive housing: \$19, 315\*

\*Source: Q2 Consulting 2007/2008

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# The Vision: Reintegration

## *Recovery Is Possible*

Goal: Housing for persons living with mental illness and co-occurring disorders that is:

- Affordable - Permanent
- Safe – located in good neighborhoods
- Accessible to local amenities
- Stigma-free
- Fully integrated into the Community: *Formerly Homeless live side-by-side with market rate payers*

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# Economic Impact: *When People Are Housed They ....*

- Have incomes
- Pay taxes
- Get jobs
- Purchase goods and services
- Are good neighbors
- Contribute to community

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# Total Economic Impact: *A Marketing Formula That Works*

## Measure Pre- and Post- Homeless Costs

- Shelter/Housing (including services and Admin.)
- Street Outreach
- Emergency Transport
- Emergency Room
- Incarceration/Transports
- Hospitalizations
  - Medical
  - Psychiatric

## Then Deduct post-housing:

- Reduction in Homelessness
- Increased Income
- Jobs Created
- Taxes Generated
- Funds Leveraged

*This will provide your  
community's net return on its  
investment which can be  
multiplied annually....*

# Determining the Impact: *The Cost of Development*

- The impacts in the table are based on the assumption that a total of 511 units are to be completed and that a completed unit, either built or purchased and refurbished, is valued at \$44,000. The schedule of production over the four years, 2008-2011, is assumed in the impacts and is detailed in the following table:

Assumptions for the Analysis

	new units			refurb units			total new and refurb	
	number	price*	total value*	number	price*	total value*	number	total value*
2008	25	\$44,000	\$1,100,000	76	\$44,000	\$3,344,000	101	\$4,444,000
2009	30	\$44,000	\$1,320,000	93	\$44,000	\$4,092,000	123	\$5,412,000
2010	40	\$44,000	\$1,760,000	124	\$44,000	\$5,456,000	164	\$7,216,000
2011	30	\$44,000	\$1,320,000	93	\$44,000	\$4,092,000	123	\$5,412,000
	125			386			511	
*All values are 2008 dollars.								

Source: Tulsa Metro Chamber of Commerce 2008

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# Economic Impact: *Housing Development Creates Jobs*

## Total Impacts of Construction and Refurbishing in 2008-2011 of Residential Units for "Building Tulsa, Building Lives"

	2008	2009	2010	2011	2012	2008-2012 Totals
employment	56	78	103	85	12	67*
income	\$2,042,993	\$2,899,251	\$3,895,659	\$3,245,941	\$465,447	\$12,549,291
output	\$6,665,576	\$9,459,249	\$12,710,182	\$10,590,377	\$1,518,591	\$40,943,975
local sales tax	\$35,887	\$50,928	\$68,430	\$57,018	\$8,176	\$220,438
property tax	\$39,486	\$56,035	\$75,293	\$62,736	\$8,996	\$242,546
state taxes, fees	\$104,443	\$148,217	\$199,156	\$165,941	\$23,795	\$641,552
*Average of 67 employees annually, 2008-2012.						

Source: Tulsa Metro Chamber of Commerce 2008

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# The Plan: *Resource Development*

- Identify Possible Funding Sources
  - Federal/State/City/County Grants
    - HUD (HOME, SHP, S+C, CDBG, ESG, 811-202, HOPWA)
    - SAMHSA
    - VA
  - Federal Home Loan Bank/Other lenders
  - Foundations
  - Capital Campaign
  - Tax Payers/Legislative Action
  - Housing Trust Fund
  - Tax Credits



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# The Plan:

## *Strategies for Sustainability*

- Debt-Free Ownership = No Mortgage
- Capital = Leveraging = Grants
- Partnerships: Don't reinvent the wheel
- Community Integration – Mixed Income Model
- Resident Rents: Maximize Resident Potential
- Allowances for extremely low income and those not eligible for mainstream resources
- Prevention Units

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# The Method:

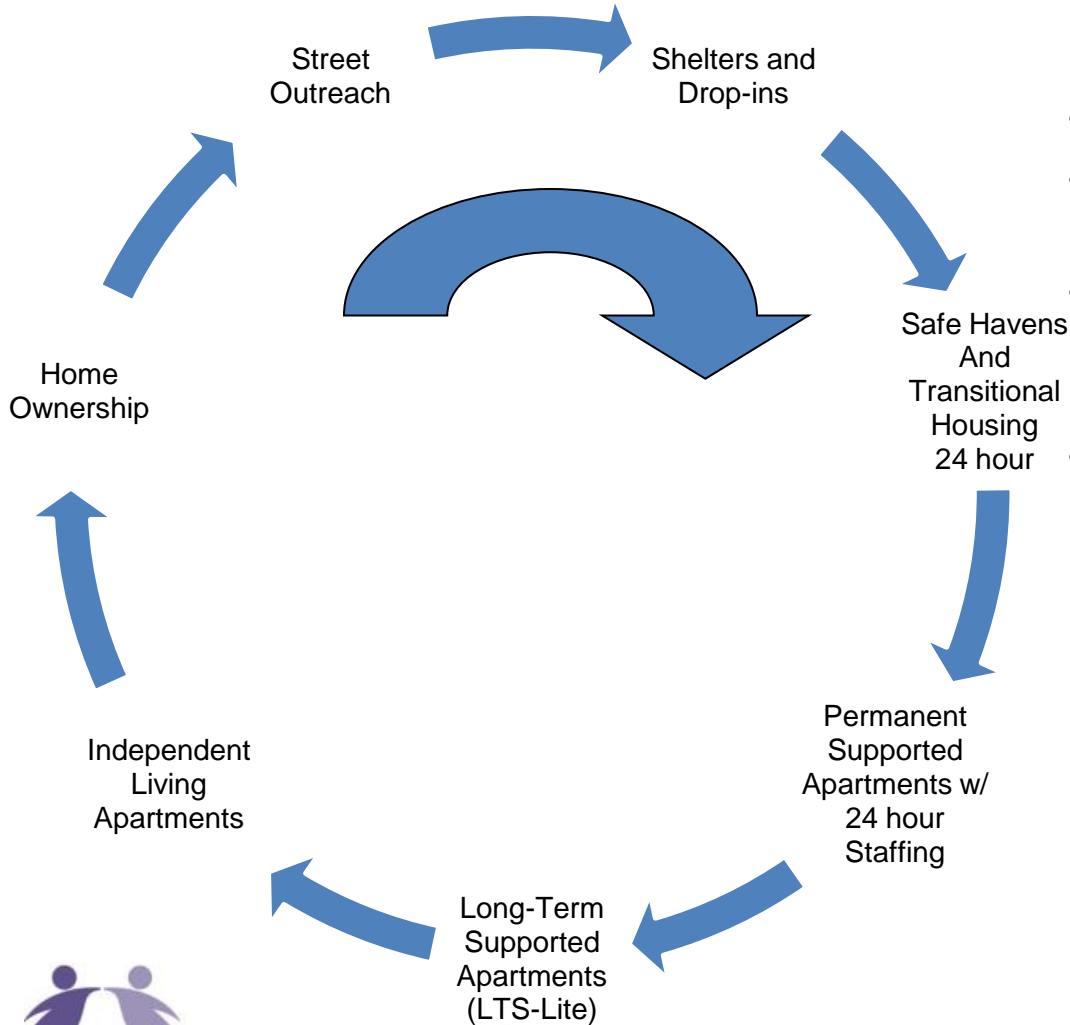
## *Housing First*

- Having a place to live is the key
- Direct placement from the street or shelter
- No barriers to access: placement not dependent on income, treatment, or stability
- Choices: Provide a range of housing options
- Intensive Case Management: delivery of wrap-around services
- Social Inclusion – Faith, Friends, Employment

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# System Design: Access and Retention = Community Reintegration



- **Choice and Options!!**
- Residents may enter at *any level* in the continuum
- May move forward or “backward” in the continuum as desired or needed

## Goals:

- Increased independence, decreased dependency
- Greater Self-sufficiency
- Reintegration into the Community
- Social Inclusion
- Decrease Stigma
- Increase Quality of Life

# Housing Development

1. 2001 Capital Campaign
2. Building Tulsa, Building Lives

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# Capital Development:

## *The Mental Health Association in Tulsa's Capital Campaigns*

### 2001 Capital Campaign

- Outcome: \$5.25 Million raised
- Outcome: 6 properties – 146 units
- Outcome: \$25,000/unit average cost

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# Building Tulsa, Building Lives

## *2008 Campaign to End Chronic Homelessness*

Campaign Goal: \$30 million for creation of 511 Units @ \$44,000 (average) per unit including:

- End Chronic Homelessness by 2013
- Public-Private Partnership
- Debt-Free Ownership
- Mixed-Income, Mixed Population Model
- New construction, acquisition and rehab
- City, State, Federal, Private \$ for acquisition/operation
- HUD, SAMHSA, VA, ODMHSAS grants/contracts
- Create jobs valued at \$13.6 million

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# Capital Development:

## *The Mental Health Association in Tulsa's Capital Campaigns*

### **Building Tulsa Building Lives Through July 2012**

- Outcome: \$25 Million raised
- Outcome: 11 properties – 435 units
- Outcome: \$53,366/unit average cost

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# 2001 Campaign and Building Tulsa, Building Lives: *Measuring Outcomes So Far....*

- Total Raised / Spent / Invested: \$21,761,655
- Total Grants Leveraged: \$16,683,957
- Total Value of Campaigns to Community : \$38,445,612
  
- 2001 CH Count: 230
- 2008 CH Count: 83
- 2010 CH Count: 66
- 2011 CH Count: 78
- 2012 CH Count: 63 (not including Safe Haven)
- Chronic Homeless Reduction Savings To-Date: \$ 8,859,760
  
- Total Value w/CH Reduction To-Date: \$47,305,372
- *Plus Projected Earned Income = \$13,653,827*

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# Bottom Line

**\$ 60,959,200**

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# Outcomes: Tulsa's Chronic Count

## Chronic Count History

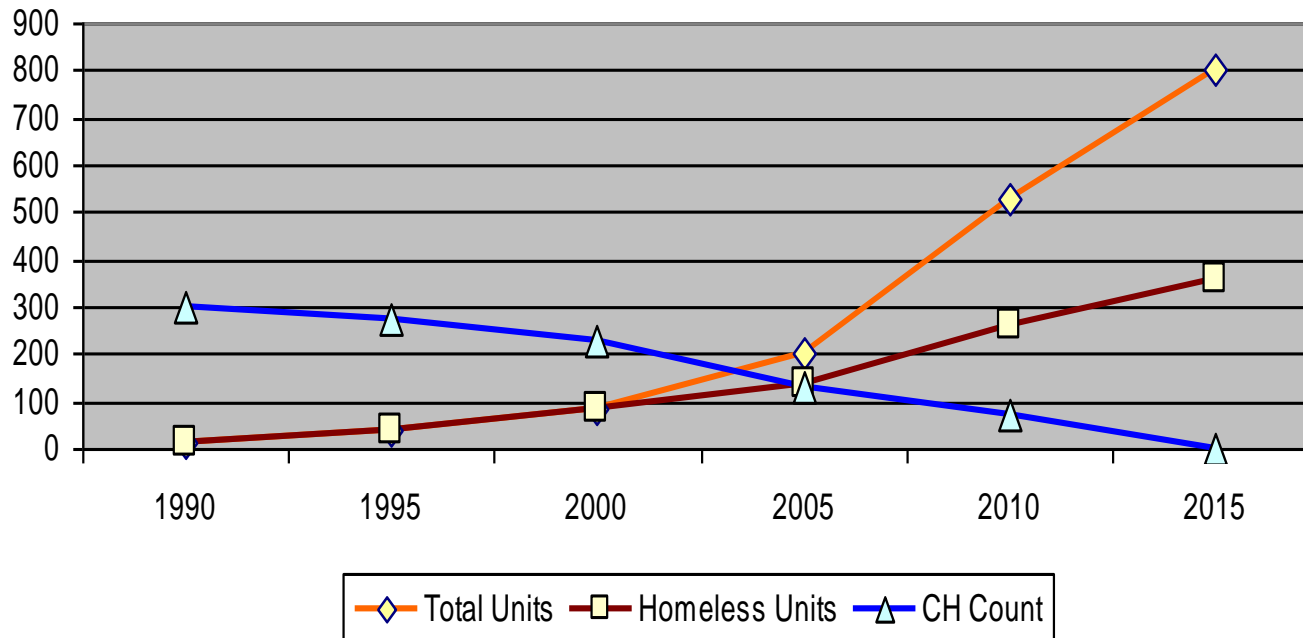
	Sheltered		Unsheltered	Total	Notes
	Emergency Shelters	Safe Havens			
<b>2012</b>					
Individuals	59	23	4	86	23 out of 86 residing in Safe Haven PSH (26%)
Family Members	2		0	2	
<b>Total</b>	<b>61</b>	<b>23</b>	<b>4</b>	<b>88</b>	
<b>2011</b>					
Individuals	65	19	7	91	HUD's first year for Chronic family member count
Family Members	6		0	6	
<b>Total</b>	<b>71</b>	<b>19</b>	<b>7</b>	<b>97</b>	
<b>2010</b>					
Individuals	59	19	7	85	
Family Members				0	
<b>Total</b>	<b>59</b>	<b>19</b>	<b>7</b>	<b>85</b>	
<b>2009</b>					
Individuals	78	0	5	83	
Family Members				0	
<b>Total</b>	<b>78</b>	<b>0</b>	<b>5</b>	<b>83</b>	



Source: 2012 Community Service Council of Tulsa/Tulsa CoC

# Outcomes: Housing Development and Chronic Homeless Reduction

Expansion Timeline and Projected Outcomes



**2001 Capital Campaign**  
**\$5.36 Million**  
**146 Units**  
**Building Tulsa Building Lives:**  
**\$30 Million**  
**(\$25M raised)**  
**Goal: 511 units**  
**To Date: 435 units**

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# Service Delivery: *System Redesign*

- Rapid access to housing
- Data driven with priority on chronic and vulnerable
- Community-wide collaboration
- Commitment and Investment in Process



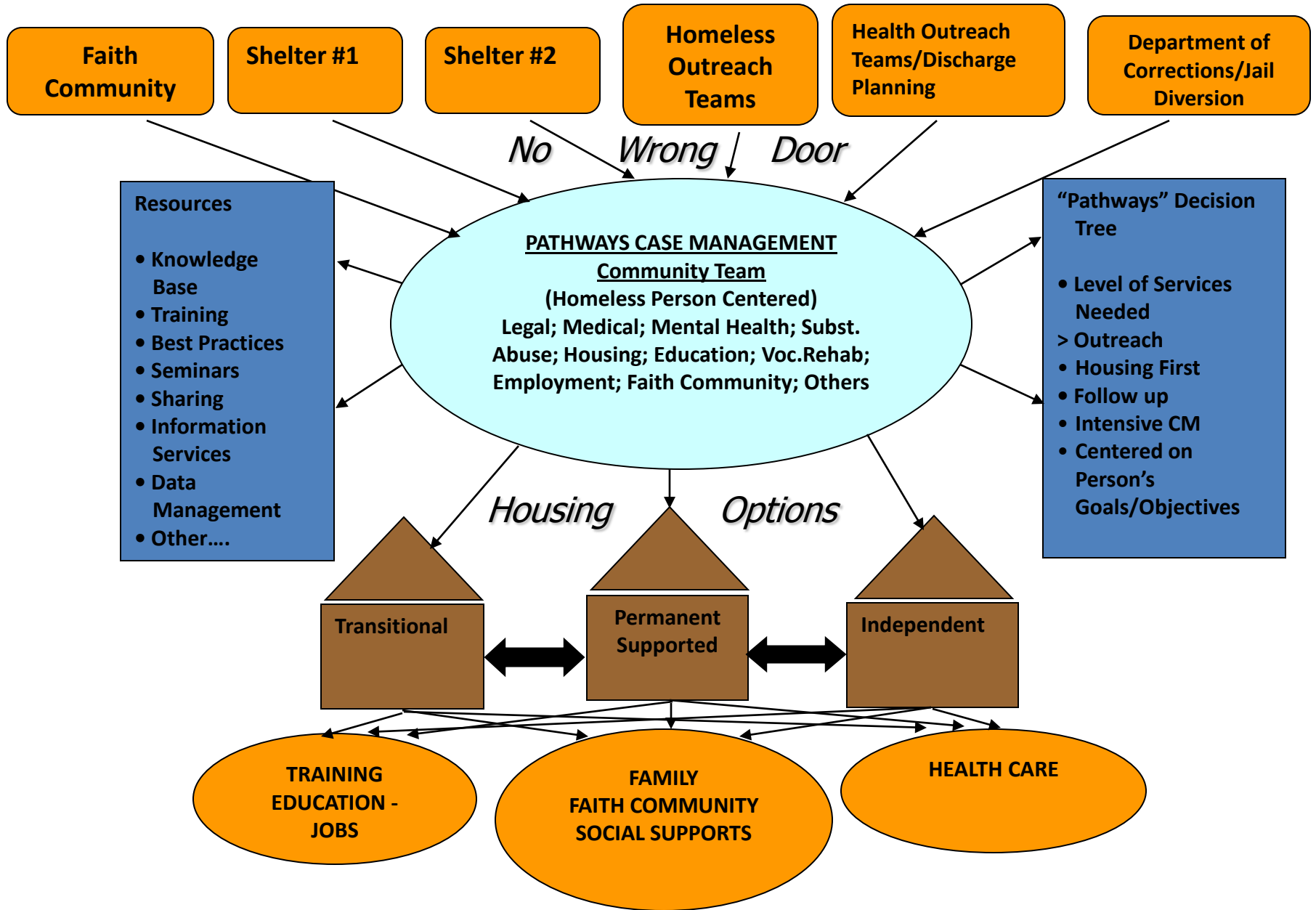
# A Way Home for Tulsa

## Tulsa's Coordinated Case Management Model

- 16 Charter Organizations
- \$960,000 in private funding
- MOU's – Governance Council
- HMIS Data – Top 100 Long Term Stayers
- “Pathways” Case Management
- 19 Pathways - Goals - Outcomes



# A Way Home For Tulsa: Coordinated Case Management Model



# SUMMARY

- Strategic Planning for Community Need
- Cost Analysis – Economic Impact Forecast
- Raise Capital
- Housing Development
- Use Data to Drive Service Delivery  
System Changes Through Collaboration





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**Gregory A. Shinn, MSW Associate Director**  
Mental Health Association in Tulsa  
[gshinn@mhat.org](mailto:gshinn@mhat.org)

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# Q & A Session with Panel





## Conclusion

1. Adopt **Housing First** across all existing PSH and create new **Housing First** PSH at sufficient capacity
2. Create community wide agreement to target PSH **first** to chronically homeless individuals and families
3. Manage admission to all PSH via a community priority placement list
4. Help successful PSH tenants to move up to more independent housing wherever possible
5. Update your local plan to end chronic homelessness to incorporate the measurable goal and benchmarks to align with 2015



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