Cecil County Homelessness Study

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Agenda

- Homeless study methodology

- Key findings

- Public funding analysis

- Recommendations

- Potential vision for homeless services in Cecil County

Homelessness study methodology

Homelessness study methodology

- ■ Primary data analysis:
  - ■ Homeless services providers in Cecil County completed an online survey between September 2018 and January 2019 (n=8)
    - ■ Cecil County Department of Community Services, Aging and Disability Resource Center
    - ■ CCDSS
    - ■ Cecil County Health Department
    - ■ Deep Roots, Inc.
    - ■ HSDC, Inc.
    - ■ Meeting Ground Inc./Cecil County Men's Shelter
    - ■ On Our Own of Cecil County, Inc.
    - ■ The Paris Foundation

Homelessness study methodology

- Primary data analysis:
  - In collaboration with local organizations, surveys were administered to people experiencing homelessness in Cecil County (n=29)
  - Semi-structured interviews were conducted in person or over the phone with a variety of stakeholders in Cecil County (n=13)
    - Homeless providers
    - Law enforcement and emergency responders
    - Local government
    - Healthcare
    - Public spaces
    - Local business

Homelessness study methodology

- Secondary data analysis:
  - Analysis of Cecil County Point in Time Count 2018 data (n=129)
  - Analysis of FY18 Homeless Management Information System (HMIS) data for Cecil County (n=943 individuals, 625 households)
  - Research was conducted on evidence-based best practices and rural homelessness case studies

- Select results presented in the following slides

Homelessness study methodology

- Strengths:
  - Demographic data from HMIS, Point in Time Count, and the survey of people experiencing homeless were similar, implying that the survey results were a good approximation of the population experiencing homelessness as a whole
  - Primary data collection techniques minimized bias
    - Surveys of people experiencing homelessness were conducted by homeless providers who could build a trusting rapport with respondents
    - Key informant interviews of local stakeholders were conducted by an unbiased external consultant

- Limitations:
  - Participants of the survey for people experiencing homelessness were identified by homeless providers

Key findings

Finding #1: Study suggests that there are approximately 300 people experiencing homelessness in Cecil County over the course of one year

There are approximately 300 people experiencing homelessness in Cecil County

- ◻ HMIS data indicated that there were 333 people in Cecil County in a homeless living situation in fiscal year 2018

- ◻ Homeless services providers' average estimate of the number of people experiencing homelessness in Cecil County was 287

- ◻ The point in time count (n=129) and survey of people experiencing homelessness (n-29) represent a sample of the ~300 people that experience homelessness over the course of one year

Finding #2: Study suggests that the average person experiencing homelessness in Cecil County is an adult, White, non-Veteran, male, who is not of Hispanic, Latino, or Spanish origin and has no domestic violence history

The average person experiencing homelessness in Cecil County is an adult, White, non-Veteran, male, who is not of Hispanic, Latino, or Spanish origin and has no domestic violence history

◻ **Adult** (79% of Point in Time Count sample, 72% according to HMIS)

◻ **Male** (70% of Point in Time Count sample, 55% according to HMIS, 59% of survey respondents)

◻ **White** (70% of Point in Time Count sample, 64% according to HMIS, 64% of survey respondents)

◻ **Not of Hispanic, Latino, or Spanish origin** (94% according to HMIS, 88% of survey respondents)

◻ **No domestic violence history** (73% (n=683) according to HMIS data)

◻ **Non-veteran** (58% of Point in Time Count sample*, 89% of survey respondents)
   ◻ *includes all individuals at Perrypoint VA

Finding #3: Study suggests that the average person experiencing homelessness in Cecil County has health insurance, access to a working phone and internet, eats 2+ meals a day, and has been hungry for less than 5 days in the last 30

Finding #4: Study suggests that most people experiencing homelessness had little to no income and did not receive financial support from family or friends

Most people experiencing homelessness had little to no income and did not receive financial support from family or friends

- **56% had no income** (according to HMIS data)

- **71% had a monthly income between $0 and $999** (according to survey)

- **Does not receive financial support from family or friends** (most survey respondents)

Finding #5: Study suggests that most people experiencing homelessness are not experiencing it by choice and most find it very or extremely difficult

Most people experiencing homelessness are not experiencing it by choice and most find it very or extremely difficult

Survey question: are you experiencing homelessness by choice? (n=25)
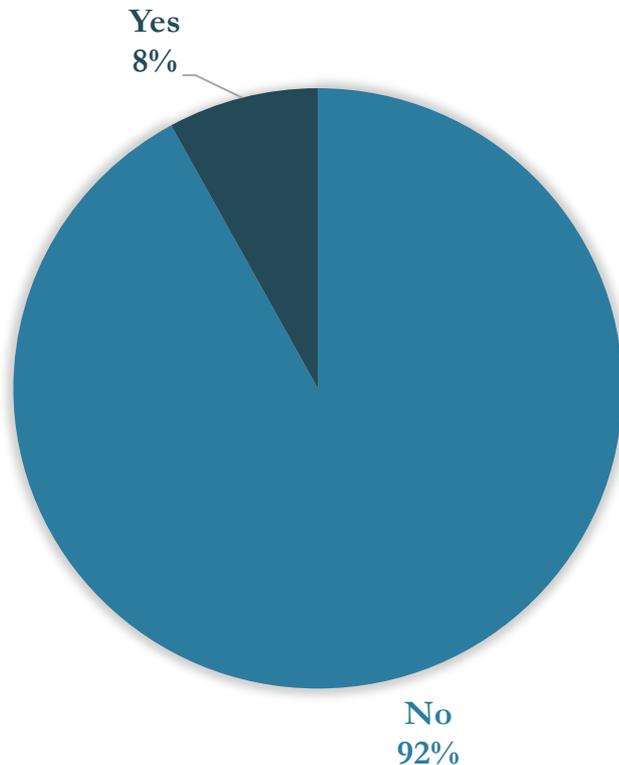
Survey question: How difficult is experiencing homelessness for you? (n=29)

**Yes
8%**

**No
92%**

**Moderately
or slightly
difficult
14%**

**Very
difficult
27%**

**Extremely
difficult
59%**
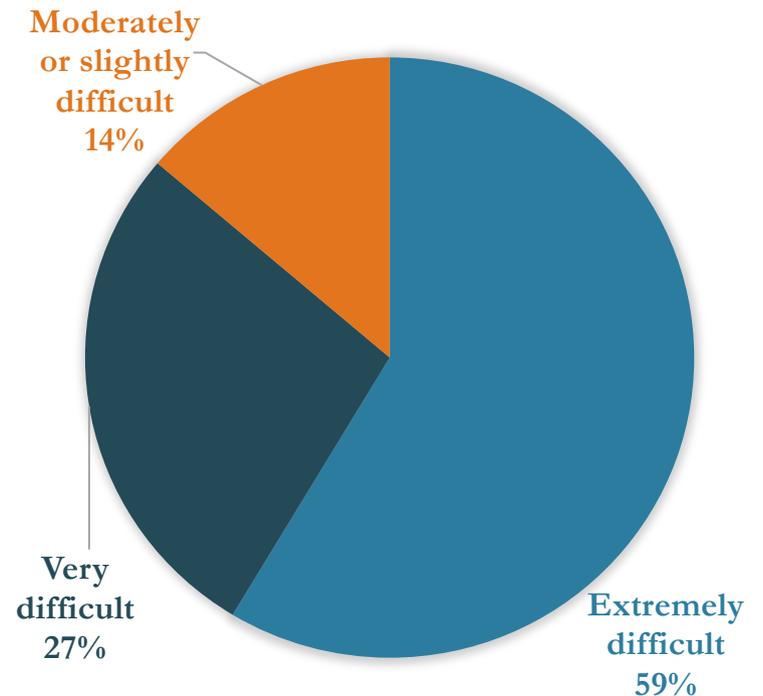
Finding #6: Study suggests that people experiencing homelessness often experienced challenges including abuse, neglect, childhood trauma, and theft

People experiencing homelessness most often experienced physical or sexual abuse or neglect and/or running away from home or being forced to leave home in their childhoods

Survey question: in your childhood, did you ever experience any of the following? (n=19)

Legend: ■ Survey respondents
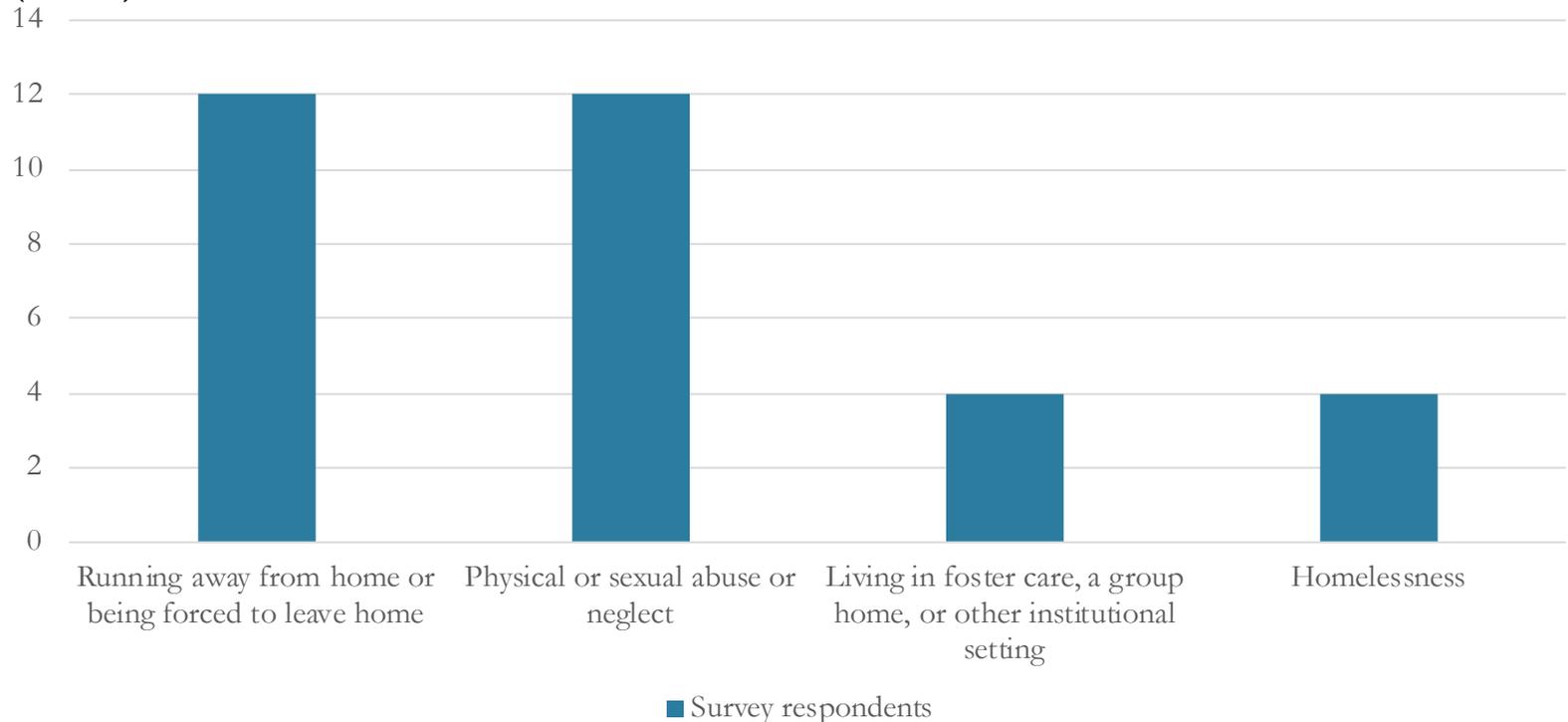
People experiencing homelessness most frequently experienced someone stealing money or things from their possessions while they were not present and/or directly from them while homeless

Survey question: while you were homeless did you experience any of the following? (n=18)

Survey respondents
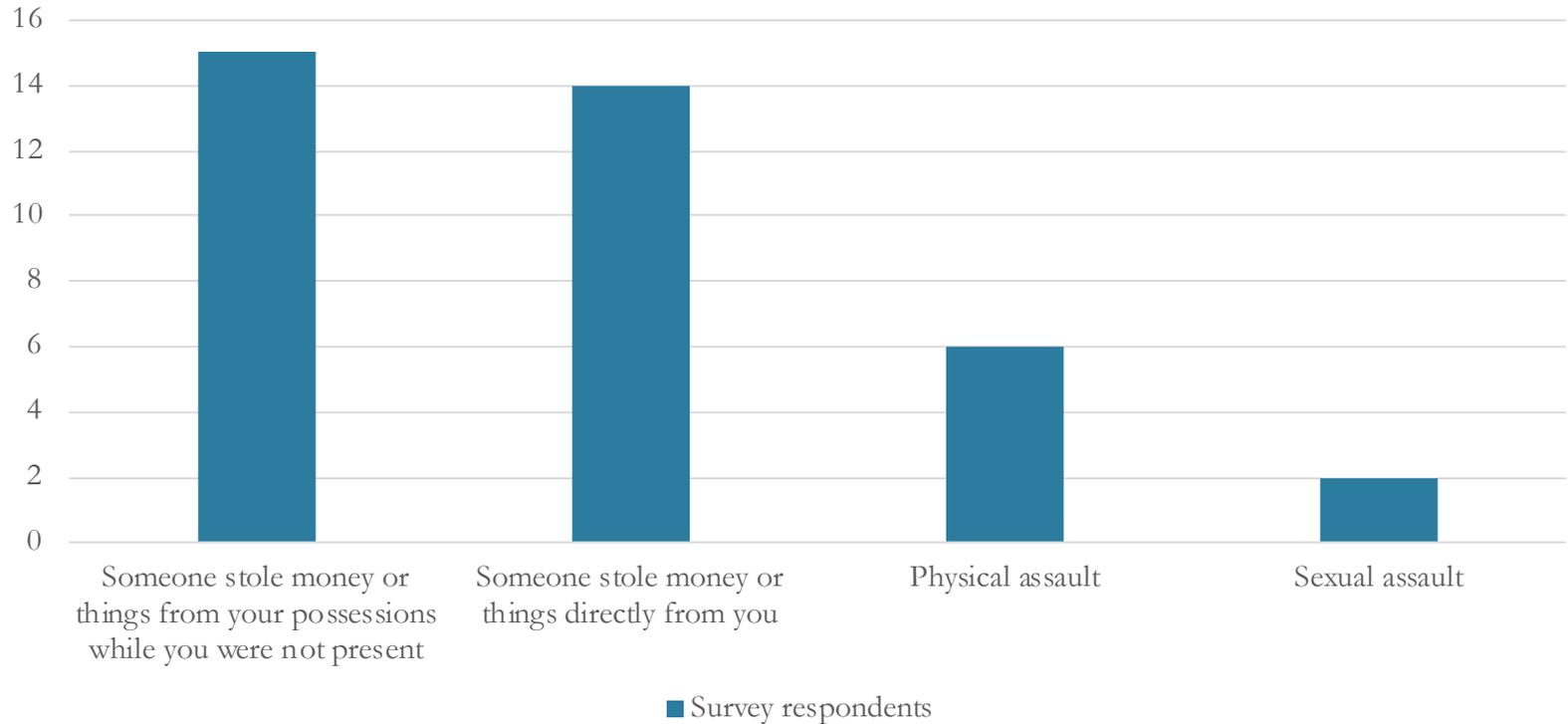
Finding #7: Study suggests that mental health is a challenge for people experiencing homelessness

Mental health is a challenge for people experiencing homelessness

- Mental health was the challenge most frequently faced by people experiencing homelessness

- Mental health and traumatic life events were the causes that most frequently caused a person to experience homelessness

- Mental illness was most frequently cited as the primary reason for remaining homeless

- Providers believed that mental health was the factor that contributed most to homelessness in Cecil County

Finding #8: Study suggests that lack of affordable housing is the greatest obstacle to overcoming homelessness due to lack of employment

Finding #9: Study suggests that most people experiencing homelessness do not believe there are enough services in Cecil County and cite a need for shelters, affordable housing, and employment opportunities

Finding #10: Study suggests that Cecil County is not attracting people experiencing homelessness due to its services

Most people experiencing homelessness are experiencing their first or second episode of homelessness that has lasted less than 1 year

Survey question: how many times have you been homeless? (n=29)
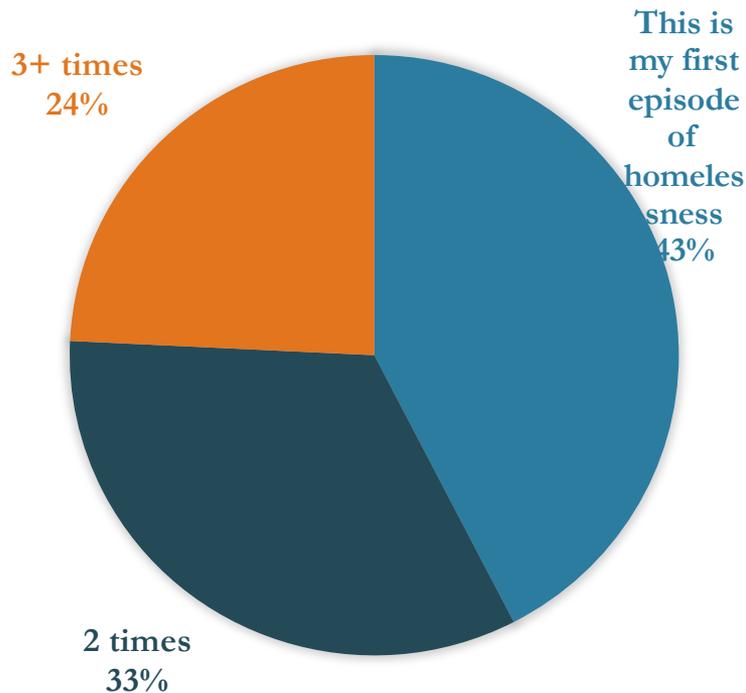
Survey question: how long has this current episode of homelessness lasted? (n=29)

3+ times
24%

This is my first episode of homelessness
43%

2 times
33%

> 1 years
**38%**

< 1 year
62%
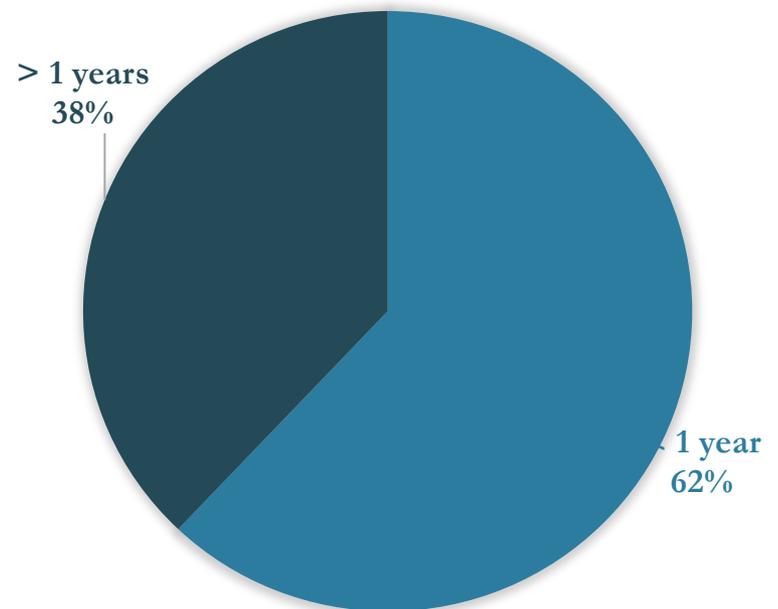
Almost half of the people currently experiencing homeless have been living in Cecil County for more than 10 years and consider Cecil County their original home

Survey question: how long have you been living in Cecil County? (n=29)
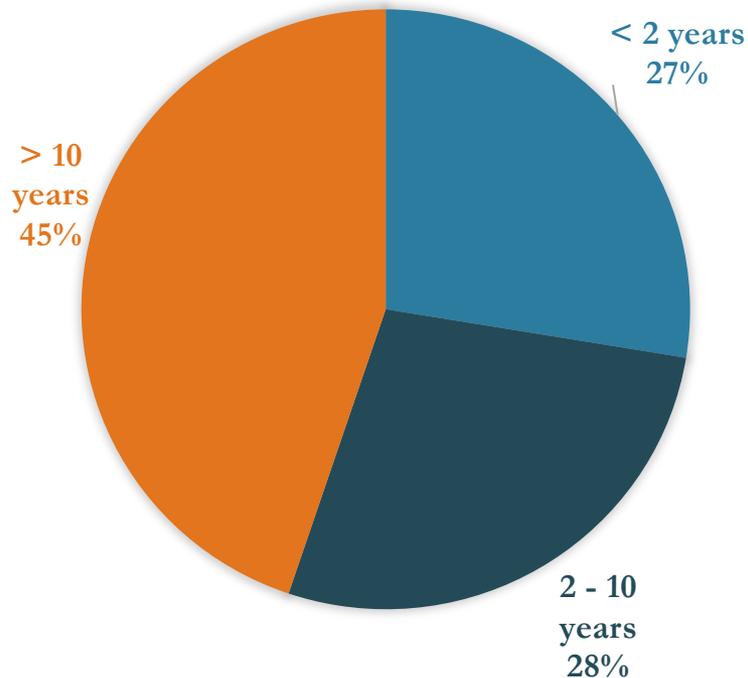
Survey question: is Cecil County your original home? (n=29)

< 2 years
27%

> 10 years
45%

2 - 10 years
28%

Yes
45%

No
55%
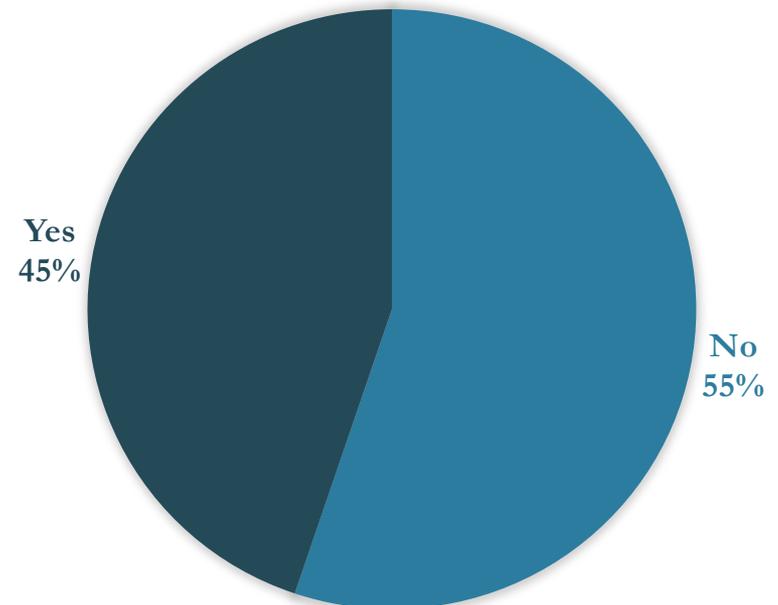
# Most people experiencing homelessness became homeless in Cecil County and most of those that did not become homeless in Cecil County would not like to return to their original home

Survey question: is Cecil County where you became homeless? (n=29)
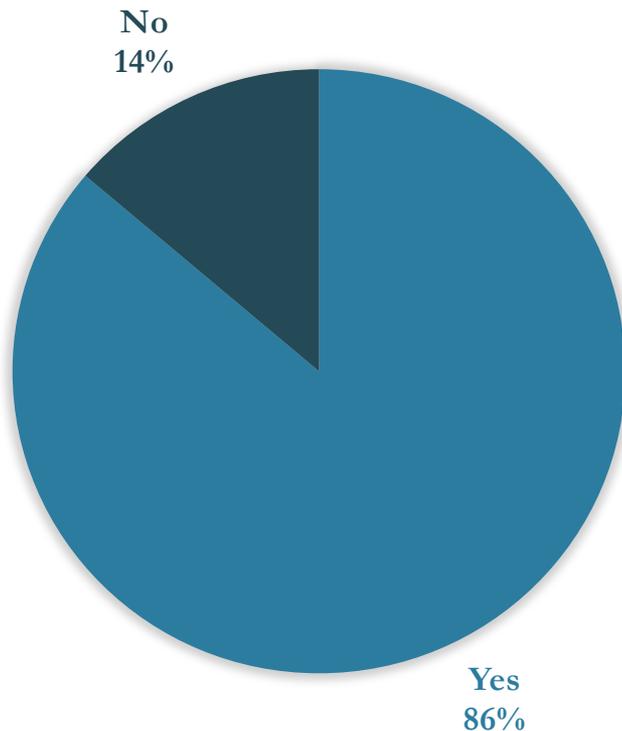
Survey question: If Cecil County is not where you became homeless, would you like to return to your original home? (n=14)
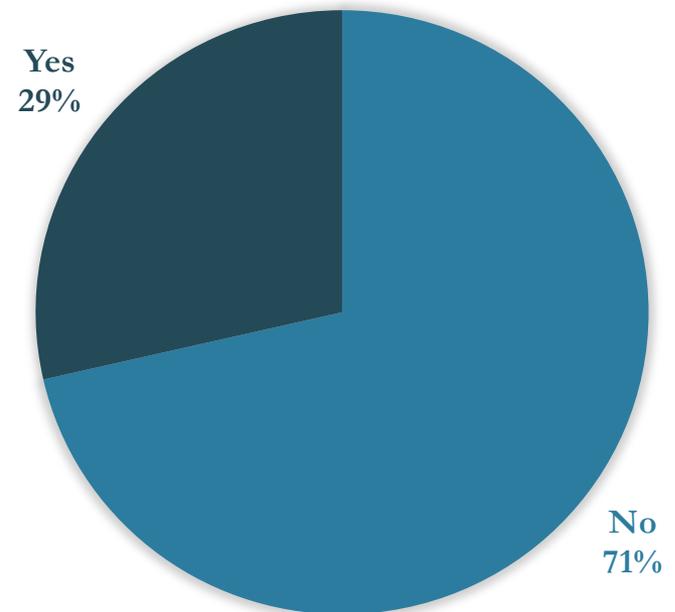
No
14%

Yes
86%

Yes
29%

No
71%

Cecil County is not attracting people experiencing homelessness due to its services

- Most people who did not become homeless in Cecil County did not leave their city/town or come to Cecil County because of Cecil County's homeless services

- Most people who did not become homeless in Cecil County did not want to return to their original home for reasons other than Cecil County's homeless services

Finding #11: Study suggests that people experiencing homelessness reported most frequently utilizing Mary Randall Center and Paris Foundation

Finding #12: Study suggests that self-referrals made up the greatest cumulative percentage of how people who utilize providers' services accessed their programs

Self-referrals made up the greatest cumulative percentage of how people who utilize providers' services accessed their programs

Survey question: in the last fiscal year, please indicate the breakdown by percentage of how people who utilize your services accessed your programs
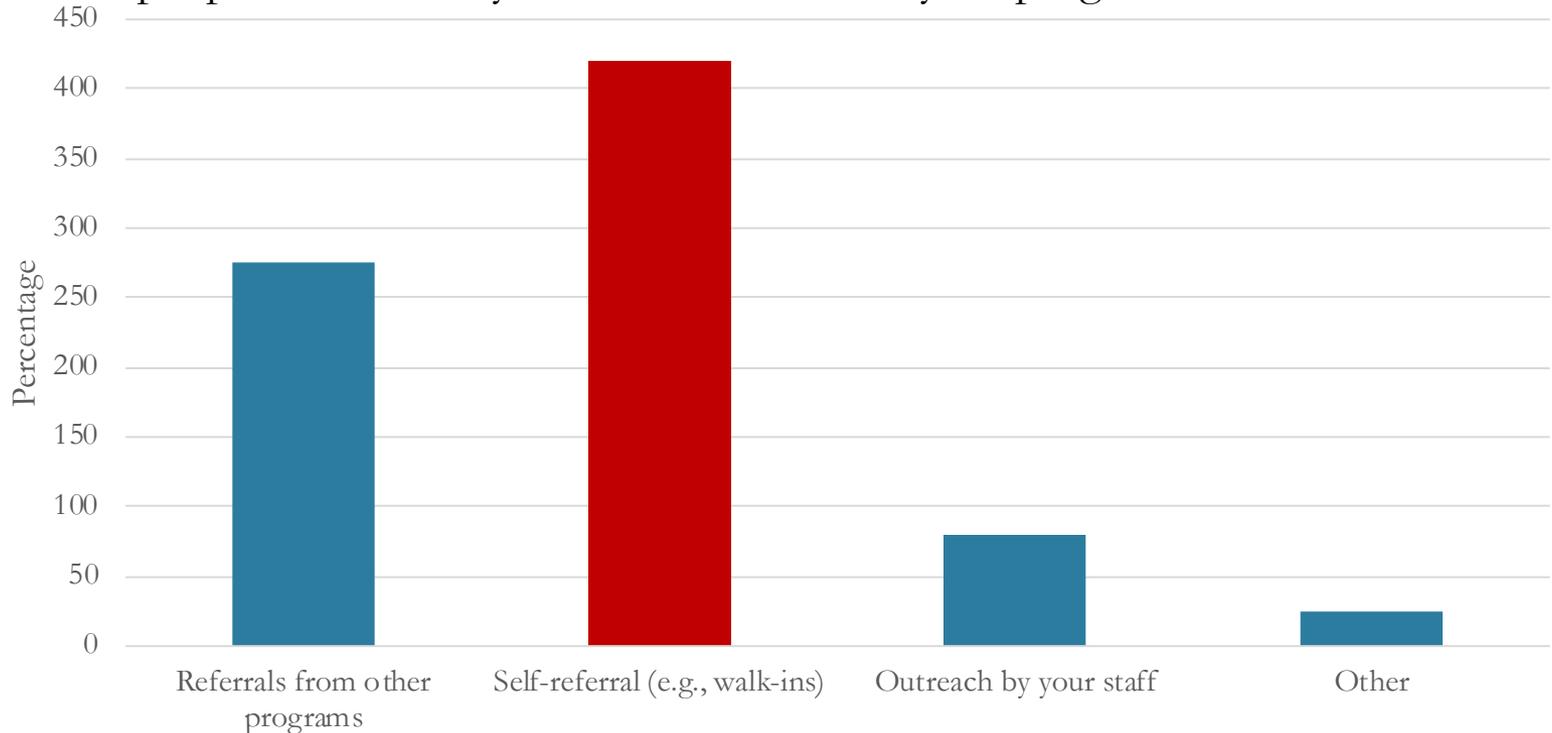
Finding #13: Study suggests that most of the nonprofit providers surveyed had small staff and considered people with both substance use disorders and mental illnesses to be the primary population served

Most providers' services focused on people with both substance use disorders and mental illnesses

- Most of the nonprofit providers had small staff (between 1 and 5 full-time and part-time employees)

- 62% of homeless services providers focused on a specific population group

- People with both substance use disorders and mental illnesses made up the greatest cumulative percentage of people experiencing homelessness that the providers served and were considered to be the primary population group served by providers

Survey question: Which of these, if any, would you consider to be the PRIMARY population group served by your program?

Bar chart data:
- People with substance use disorders only: 2
- People with both substance use disorders and mental illnesses: 5
- Veterans: 1
- Other*: 3

■ Number of times listed
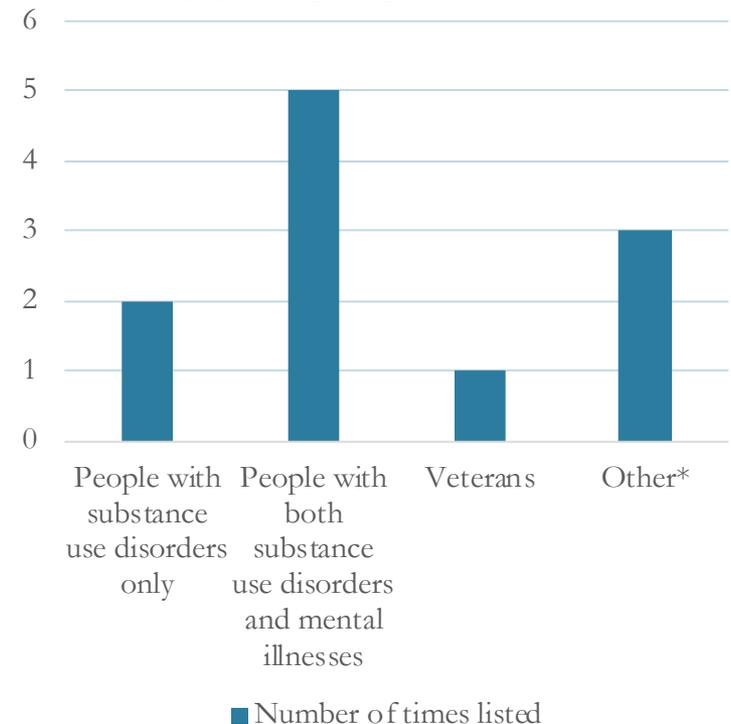
Finding #14: Study suggests that individual contributions made up the greatest cumulative percentage of funding sources for providers' homeless services

In FY 2018, individual contributions made up the greatest cumulative percentage of funding sources for provider's homeless services
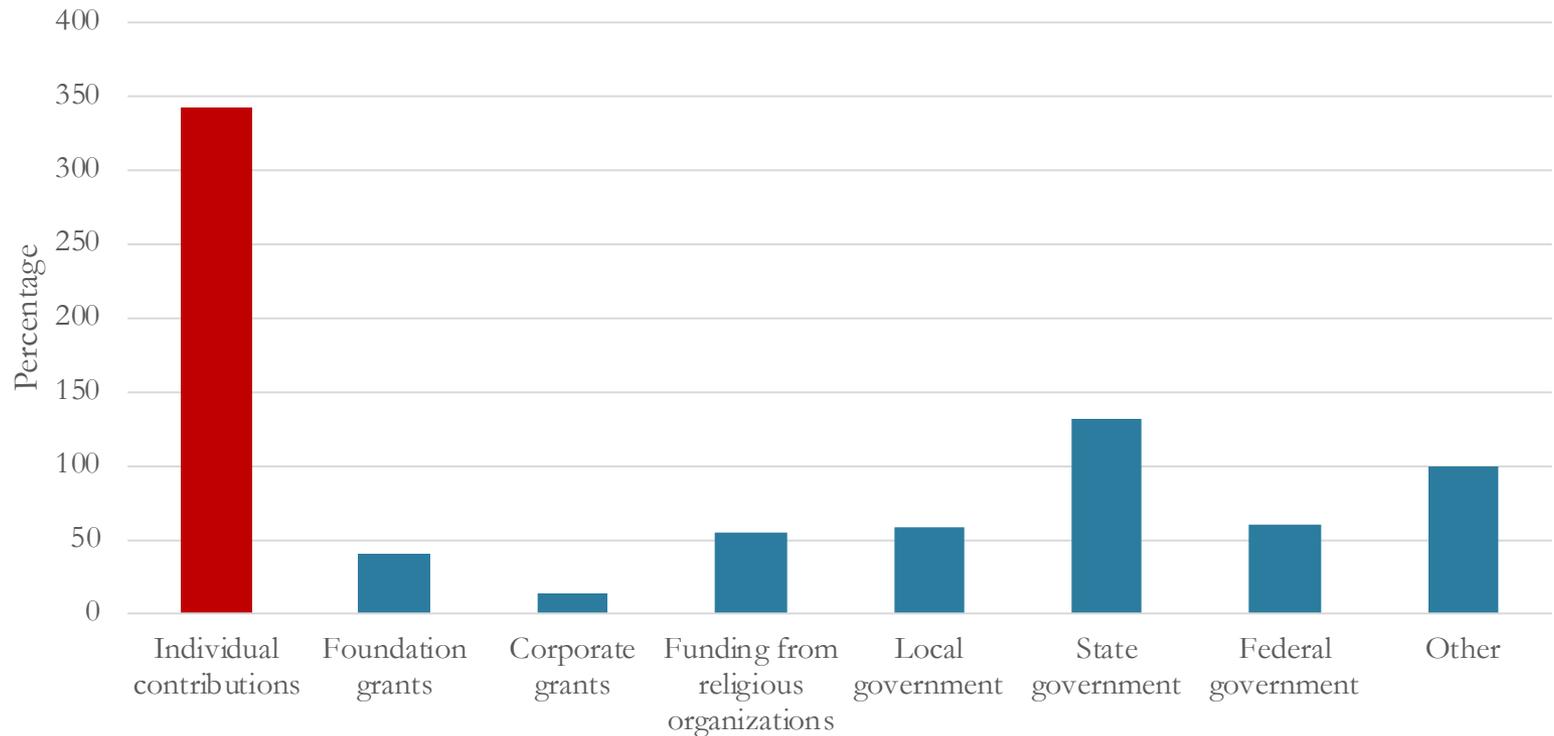
Relative budgets of nearby/similar jurisdiction

	Cecil County	Carroll County
Population (people)	103,000	167,000
CoC Funding ($)	255,444 (federal)	414,519
County Funding ($)	93,496 (HD, VLT)	1,200,000

Recommendations

Recommendation #1: Central model for coordinated entry system to promote consolidation and coordination of services

Supporting data

- The evidence base recommends the use of a central Continuum of Care (CoC) model

- A central CoC model is one in which there are one or a few linked points of entry, aimed to minimize prolonged and misdirected searches for emergency shelter and services and make intake and assessment uniform

- By focusing on broadening the scope of planning, incorporating additional funding sources, and increasing participation of mainstream agencies, local CoCs will be better able to meet the constantly changing needs of homeless persons and increase their ability to be flexible in the years to come

- In a small CoC, it is less burdensome to have one agency serve as the coordinated intake site to the training demands and time and staffing constraints among partner agencies

Supporting data

- Self-referrals made up the greatest cumulative percentage of how people who utilize providers' services accessed their programs

- Homeless provider recommendations included creating a comprehensive strategy for addressing homelessness such as creating a single point of entry, removing duplication, and having more coordinated partnerships

- Stakeholder recommendations most frequently shared to effectively address homelessness in Cecil County included consolidating all services under one roof in a centralized facility ("one stop shop") that would operate under one director to reduce duplication of/streamline services and improve coordination and communication between stakeholders

Recommendation #2: Strong homeless/eviction prevention component of counseling as well as case management, inclusive of jobs and behavioral health

Supporting data

- According to the evidence base, homelessness prevention programs aim to stop the inflow into the homeless services system and help vulnerable individuals and families maintain housing stability

- Eviction prevention programs prevent displacement from rental units and can include financial assistance, legal representation, or mediation services
  - For example, when poor tenants were provided with legal counsel in New York City's Housing Court, eviction orders were reduced by 77%

- Community-based services link clients to an array of supportive services that help them maintain stable housing
  - Studies show that assistance from New York City's HomeBase program prevented families from entering shelters and reduced the rate of homelessness in the communities it served

Supporting data

- Critical time intervention provides comprehensive case management to connect individuals with severe mental illness who are being discharged from a psychiatric facility with community-based supports
  - A study of 150 people with severe mental illness who were discharged from inpatient transitional housing facilities to housing in the community found that the group that received the intervention were significantly less likely to have experienced homelessness

- Proactive screening of populations at heightened risk of homelessness with follow-up services and targeted support to help individuals and families maintain stable housing
  - A 2-time screening tool coincided with a significant reduction in the rate of homelessness among a study of veterans who received outpatient services from the Veterans Health Administration

Supporting data

- Homeless provider recommendations included prioritizing prevention/early intervention and case managers for individuals looking for housing or at risk of losing their housing to make sure those individuals have support through the process

- Stakeholder recommendations included more counseling and long-term case management

Recommendation #3: Coordinated body to oversee funding, diversify funding to match state and federal dollars, and redistribute services to reflect homeless population

Homeless services public funding by program type
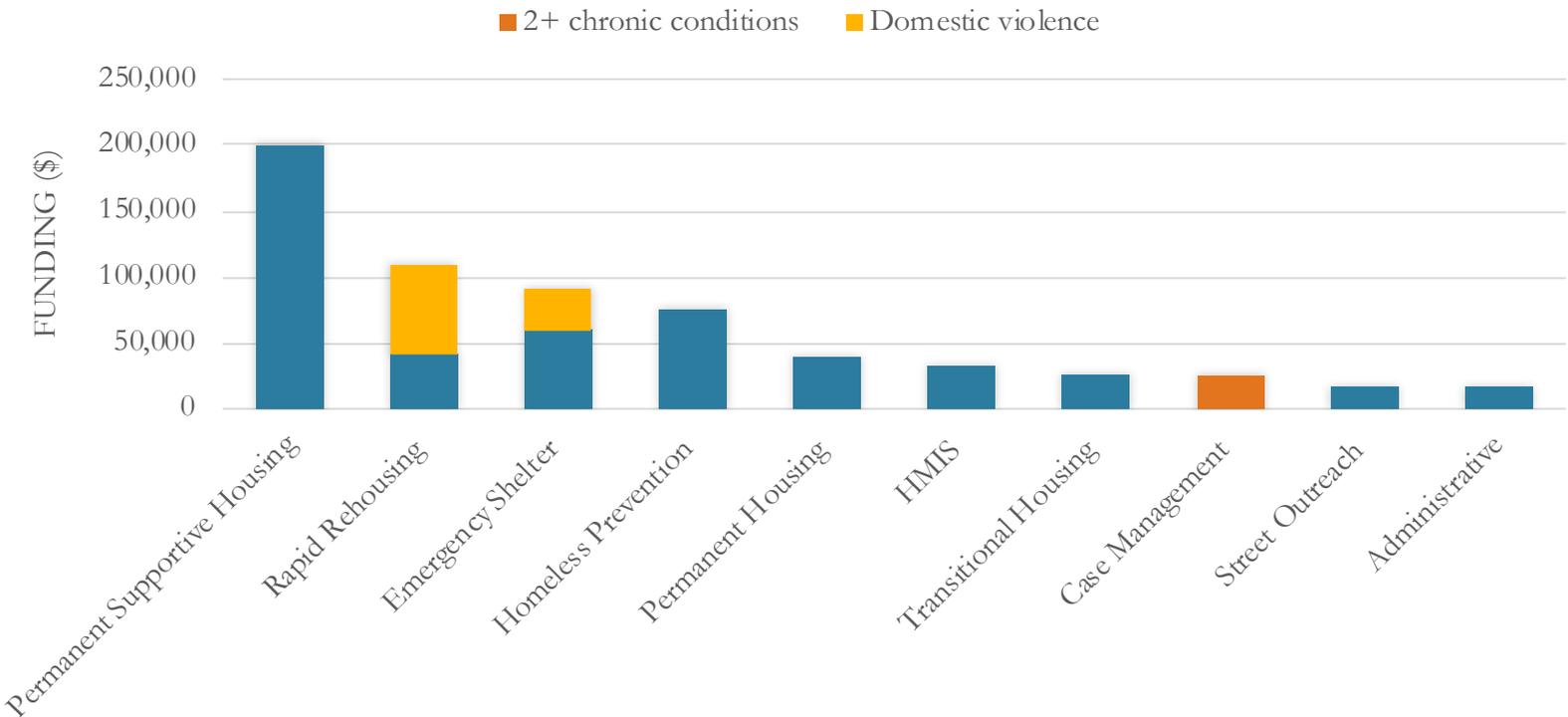
Homeless services public funding by source

State ($27,019) 4%
County/VLT grants ($41,000) 7%
Health Department (County) ($52,496) 8%
Fed ($294,444) 47%
State/Fed ($215,589) 34%
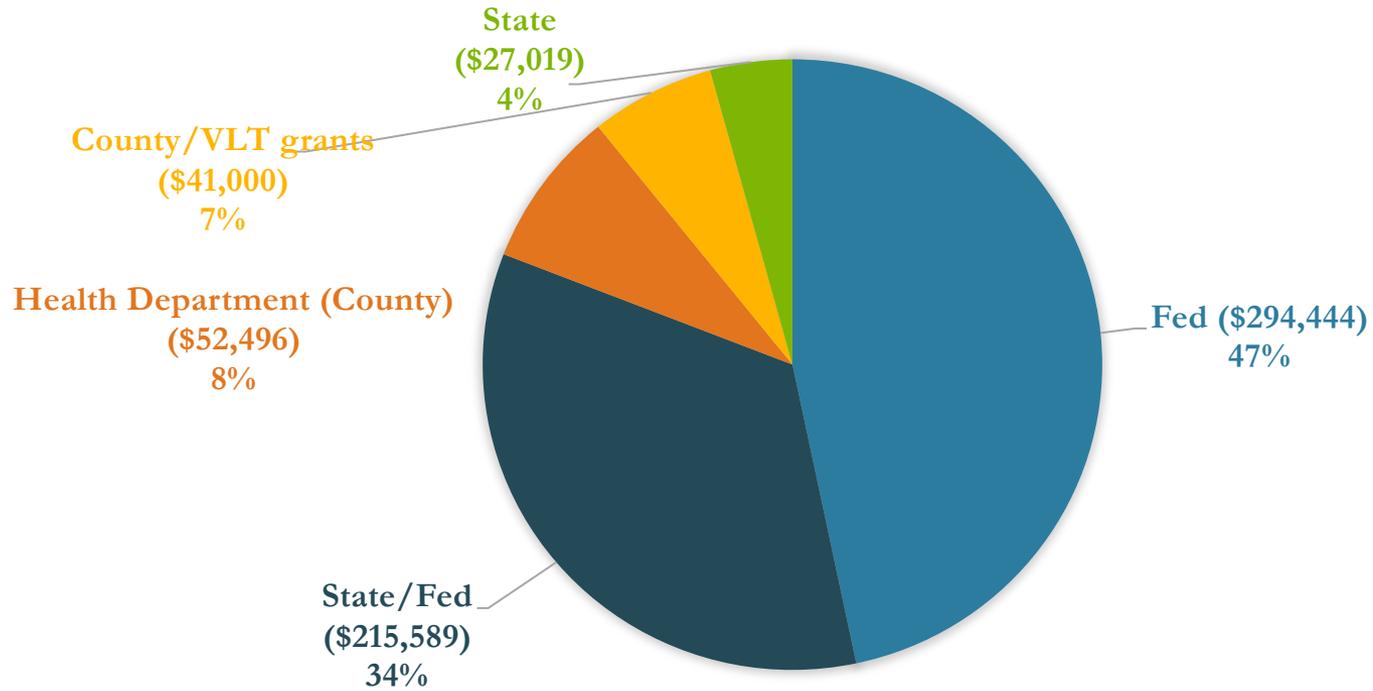
Veterans housing units/beds (total = 199)

CHEP at Perry Point VA 14%

VASH Vouchers (CCHA) 48%

VASH PBV (MD-DHCD) at Village at Perry Point VA 38%
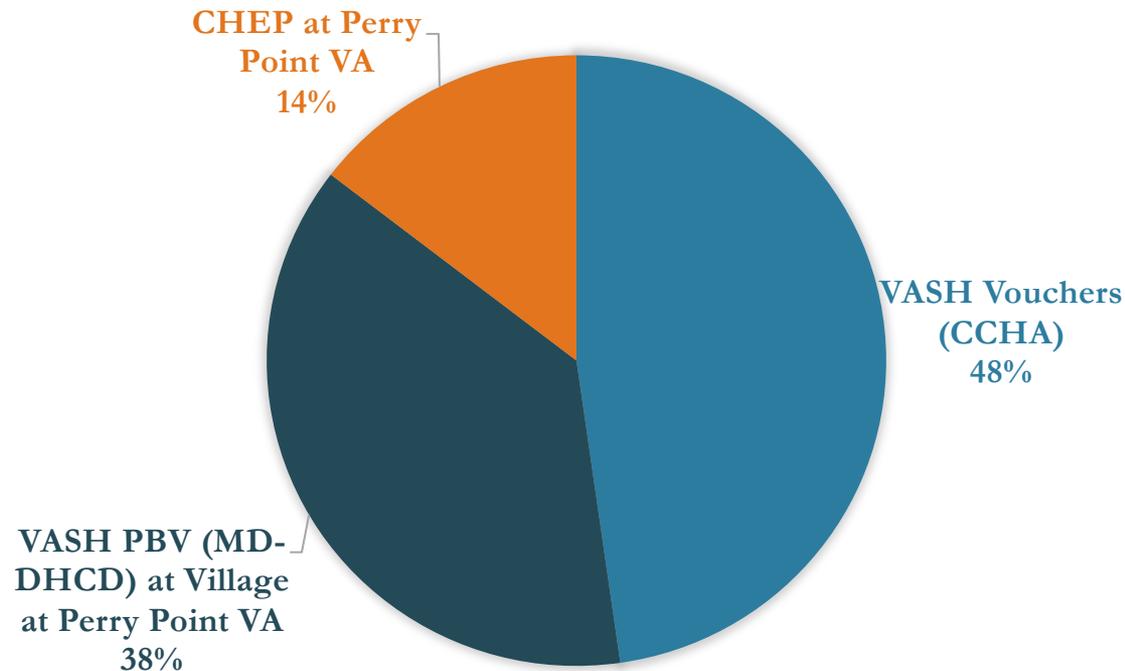
100% of this funding is restricted to veterans and cannot be re-allocated

Supporting data

- Most of the nonprofit providers had small staff

- Individual contributions made up the greatest cumulative percentage of funding sources for providers' homeless services

- Homeless provider recommendations included consolidating funding to the Continuum of Care
  - According to the evidence base, a Continuum of Care (CoC) is a system for helping people who are or have been homeless or who are at imminent risk of homelessness

- Stakeholder recommendations included less dependence on government funding and more partnerships with private resources

Supporting data

- The average person experiencing homelessness in Cecil County is an adult, White, non-Veteran, male, who is not of Hispanic, Latino, or Spanish origin and has no domestic violence history
  - Cecil County currently has 7 beds out of a total of 99 transitional housing beds available to serve this demographic
  - Additionally, there are no emergency shelter beds available to anyone for 9 months out of the year (based on the criteria of homelessness exclusively)

- People with both substance use disorders and mental illnesses made up the greatest cumulative percentage of people experiencing homelessness that the providers served and were considered to be the primary population group served by providers

Recommendation #4: Expansion of rapid rehousing and more emergency shelter options

Homeless housing program types

- Emergency shelter
  - Same day access to a bed
  - Maximum stay of 30 days
  - Sometimes daily check-in/check-out

- Transitional housing
  - Focus is on "readiness for housing"
  - Longer term stay up to 2 years
  - Eligibility requirements
  - Waitlist for access

- Rapid rehousing
  - Package of move-in and rental assistance combined with case management services
  - Longer term stay up to 2 years

- Permanent supportive housing
  - Permanent subsidy for homeless individuals with a disabling condition

- Permanent housing
  - Permanent place to live regardless of funding source

Supporting data

■ According to the evidence base, rapid re-housing is the provision of short-term rental assistance and services to help individuals and families quickly exit homelessness. Core components include:

  ■ Housing identification: programs recruit landlords to provide housing for rapid re-housing participants and help households find and secure rental housing

  ■ Rent and move-in assistance: assistance provided to help cover move-in costs and deposits as well as ongoing rent and/or utility payments

  ■ Rapid re-housing case management and services: programs connect participants to community-based resources that can help them maintain housing stability

Supporting data

- Results indicate high rates of placement and few returns of homelessness

  - A randomized controlled trial showed that families who received priority access to rapid re-housing assistance moved into their own place more quickly and were significantly more likely to be living in their own place during the first year after random assignment than those receiving usual care; in addition, rapid re-housing was less expensive than usual care even though both returned to homelessness at the same rate

- There is a variety in structures: while some emphasize front-end case management and one-time financial assistance, other provide rent subsidies over a limited period of time

Supporting data

- A study in Chicago found that people experiencing homelessness who called agencies that provide modest financial assistance (up to $1500) on days when when funds were available were 76% less likely to enter a homeless shelter over the next 6 months compared to callers on days when funds were not available

- In Cecil County, of those who left transitional housing in FY18, the average length of stay was 164 days

- Rapid re-housing is used to increase flow through the system; it gets people out of emergency/transitional housing settings and into permanent housing while the resulting vacant beds can be used to get more people off the street

- Stakeholder recommendations included more emergency shelter opportunities such as a County-led 25 bed true emergency shelter that has supervision

Potential vision for homeless services in Cecil County

Continuum of Care

Representation
- Government
- Non-profit
- Community-at-large

Scope
- Management and dissemination of federal, state, and local dollars related to homelessness
- Administration of homeless management information system
- Implementation of point-in-time count
- Referral committee on permanent housing vouchers (PHV)

Homeless services provider 1

- Street outreach
- Education
- (.5 FTE)

Coordinated point of entry

- Eviction prevention
- Funding
- Counseling
- (.5 FTE)

Emergency shelter

- Case management
- Behavioral health services / partnership(s) with behavioral health entity
- Legal services
- (1.5 FTE)

Vocational component

Transitional shelter

Referral to CoC for PHV

Permanent housing ref. agreement

Homeless services provider 2

Transitional shelter/housing

- Case management
- Behavioral health
- Vocational
- Legal services
- Street outreach
- (2 FTE)

Rapid rehousing (1FTE)

Permanent housing

Needs to be created