HOMELESSNESS IN METROPOLITAN WASHINGTON

Results and Analysis from the Annual Point-in-Time (PIT) Count of Persons Experiencing Homelessness

June 2020











Metropolitan Washington
Council of Governments

HOMELESSNESS IN METROPOLITAN WASHINGTON
Prepared by the Homeless Services Planning and Coordinating Committee
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EXECUTIVE SUMMARY

For the 20th consecutive year, the Metropolitan Washington Council of Governments (COG) Homeless Services Planning and Coordinating Committee has conducted a regional Point-in-Time (PIT) enumeration of the area's residents experiencing homelessness and those who were formerly homeless.

This year's enumeration and survey occurred on January 22, 2020. The report provides a one-night "snapshot" of the region's residents experiencing homelessness within nine metropolitan Washington area jurisdictions. It is important to note that this "snapshot," by definition, provides only one perspective on the state of homelessness in metropolitan Washington on only one night, and the count may be influenced by numerous variables, such as weather and bed availability by jurisdiction.

Impact of COVID-19

At the time the count was conducted, the impact of the pandemic caused by COVID-19 was not apparent within this region. It did not alter the methodology or results of the 2020 count. By the time the data were gathered and analyzed from the annual enumeration, however, the challenges facing people experiencing homelessness and those who are working to end their housing crisis had grown exponentially.

This report will not cover the significant needs that the metropolitan Washington's Continua of Care require to manage the public health crisis, but this year perhaps more than ever, it is apparent that **housing is health care.**

Findings, Highlights, and Trends from the 2020 Enumeration

LITERALLY HOMELESS COUNT

- The 2020 PIT enumeration resulted in a total count of **9,763 literally homeless individuals. This is the lowest number of persons counted experiencing homelessness since the region began coordinating in 2001, and the second year in a row that the literally homeless total has been below 10,000 persons.**

- The region's number of persons experiencing homelessness **decreased by 31 persons from 2019.**

This decrease is smaller than the decrease noted from 2018 to 2019 in last year's enumeration, but remains essentially unchanged on a percentage basis. Two of nine jurisdictions recorded decreases in the number of persons experiencing homelessness in 2020 from the 2019 count.

SHORT-TERM CHANGES IN THE HOMELESS ENUMERATION, 2019 TO 2020

- The District of Columbia had the greatest reduction in the number of persons experiencing homelessness from 2019 to 2020 (141 fewer persons), followed by Arlington County (16 fewer persons).

LONGER TERM CHANGES IN THE HOMELESS ENUMERATION, 2016 TO 2020

- **Seven of nine participating Continua of Care experienced a decline in the number of people experiencing homelessness between the 2016 and 2020 enumerations.**

- During the period from 2016 to 2020, the District of Columbia experienced the greatest reduction in persons experiencing homelessness, counting 1,970 fewer individuals. The District of Columbia also has the largest proportion of the region's residents experiencing homelessness (65 percent). Montgomery County had the second largest reduction between 2016 to 2020, with 311 fewer homeless persons counted, followed by Prince George's County (91 fewer persons) and Prince William County (74 fewer persons).

- Montgomery County reported the highest percentage reduction in its literally homeless count from 2016 to 2020 (32 percent).

VETERANS EXPERIENCING HOMELESSNESS

The region's count of veterans experiencing homelessness is essentially unchanged from 2019; there were three additional veterans on the night of the count from the previous year's enumeration.

- In 2020, the total number of veterans counted on the night of the PIT was 418, or three more individuals than were counted in 2019;

- The total number of veterans experiencing homelessness counted in 2020 has increased since its regional lowest count of 408 veterans in 2018, but remains below the number recorded during the PIT counts in 2016 and 2017; only two jurisdictions (Arlington County and Fairfax County) noted a decrease from 2019 to 2020, for a combined total of 16 fewer veterans counted.

- The District of Columbia recorded the greatest reduction in the number of veterans between 2016 and 2020 (48 fewer veterans counted), followed by Prince William County (12 veterans), and Frederick and Fairfax Counties (six and four fewer veterans respectively).

- The greatest percentage reduction between 2016 and 2020 was recorded by Frederick County (50 percent fewer veterans counted), followed by Prince William County (43 percent reduction) and Arlington County (40 percent reduction)[1].

[1] It's important to note that these percentages are based on small total numbers; for example, in Frederick County, the 69 percent reduction is based on a difference of six individuals.

- Six of nine CoCs reduced the incidence of veteran homelessness since 2016, for a regional reduction of 14 percent.

CHRONICALLY HOMELESS

The trend noted for the number of persons counted as chronically homeless follows similar results, holding steady, as noted for other persons experiencing homelessness in 2020.

- Five of the nine participating jurisdictions experienced decreases in their chronically homeless single adult counts since 2016, and six Continua of Care recorded a decrease between the PIT counts of 2019 and 2020. Overall, the region counted 13 percent fewer single persons who were considered chronically homeless on the night of the enumeration between 2016 and 2020.

- The District of Columbia had the greatest reduction in the region in the number of chronically homeless single adults from 2016 to 2020 (164 fewer persons counted in 2020), followed by Montgomery County and the city of Alexandria, (135 and 32 fewer chronically homeless persons respectively).

- The jurisdiction with the greatest percentage reduction in chronically homeless single adults since 2016 is Montgomery County (93 percent for the second year in a row), followed by the city of Alexandria (68 percent) and Arlington County (51 percent).

Being able to intervene in other systems of care to prevent a housing crisis challenges the jurisdictions in the region from preventing a person from becoming chronically homeless. Persons seeking a permanent home may wait long enough to find housing they can afford that they eventually meet the U.S. Department of Housing and Urban Development's (HUD) definition for chronically homeless. It is a conundrum faced nationwide in communities with high housing costs and limited housing affordable to those with the lowest incomes.

FORMERLY HOMELESS

The number of individuals who are in permanent housing and no longer experiencing homelessness was double the number of people counted as literally homeless on the night of the annual enumeration. The region measured a decrease from 2019 to 2020 of four percent of the single individuals and persons in families who were counted in permanent housing on the night of the PIT and are no longer considered homeless, but have increased the regional total of persons who are formerly homeless by 30 percent since 2016.

In addition, in 2020:

- 7,306 formerly homeless individuals were rapidly re-housed;

- 11,425 formerly homeless persons were counted in Permanent Supportive Housing; and

- 3,563 formerly homeless persons were counted in other permanent housing.

This brings the regional total of formerly homeless persons in 2020 to 22,294 additional people housed than at this time last year. The significant number of people placed in permanent housing has constrained the incidence of homelessness in the region and helped prevent it from growing unchecked.

CONCLUSION

Data collected this year confirm what each jurisdiction has observed in practice, that the single greatest barrier to ending homelessness in our communities is the insufficient number of affordable and available permanent housing opportunities for the lowest income households.

The 2020 report highlights several key, recurring themes:

1. The significant increase in the number of formerly homeless persons in permanent housing;
2. The positive impact of shelter diversion and homeless prevention programs;
3. The critical need to increase the supply of housing affordable to the lowest-income households and appropriate supportive resources.

Dedication to addressing the region's homelessness challenges has resulted in steady, measurable progress in providing shelter and wrap-around services to homeless individuals and families. The region should celebrate the achievements made to reduce the number of people counted experiencing homelessness in 2020. These reductions reflect the dedication and coordinated efforts of many to prevent people from entering the homeless system, to improve service delivery, and to increase permanent housing solutions. Reductions in chronically homeless and veteran subpopulations reflect focused efforts to ensure that the experience of homelessness is *brief, rare,* and *one time only.*

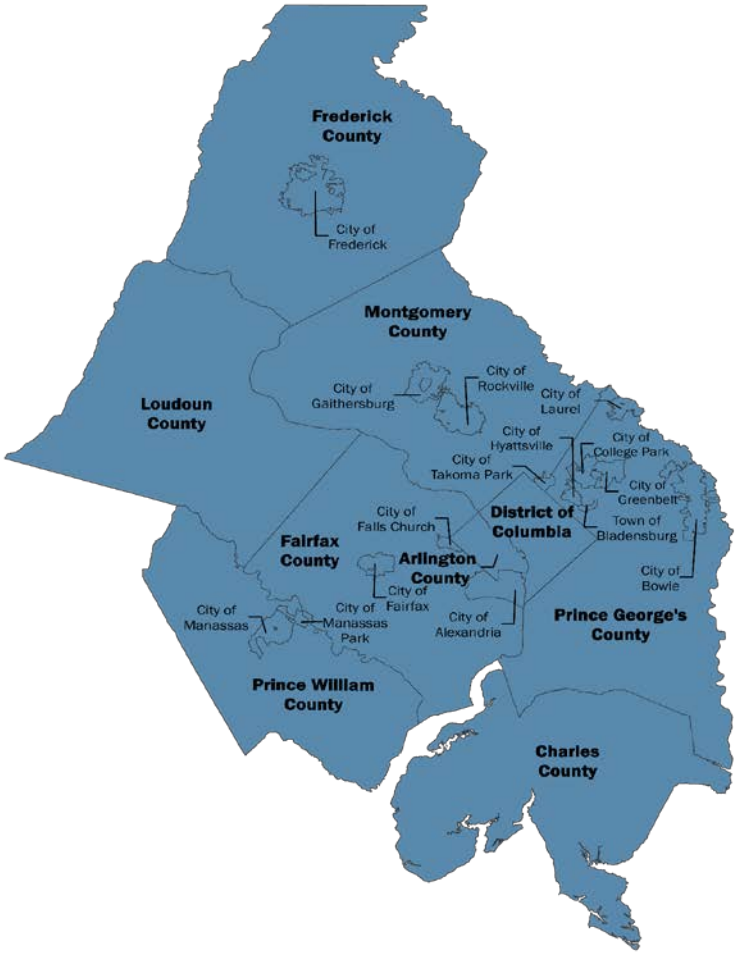
However, there remain significant challenges highlighted in this year's numbers. The challenges laid bare by the global pandemic caused by COVID-19 have highlighted the lifesaving protections that housing provides.

The successes reflected in the numbers in the report demonstrate that effective strategies are in place, but a sustained commitment to creating and adequately funding viable housing solutions for the lowest-income individuals and families, continuously improving data tracking and interpretation, and providing service paths to ensure successful housing placements are among the most critical components to making further significant reductions in the annual PIT. [2]

[2] The map (following page) represents those jurisdictions which are members of COG. However, Charles County is not included in this Point-in-Time report. Unlike the other jurisdictions, Charles County provides its homelessness data to the Baltimore HUD Field Office.

The following report includes a count of the region's residents who are:

- Unsheltered and living on the streets, including parks, alleys, and camp sites;
- Staying in an emergency or hypothermia shelter or safe haven;
- Living in transitional housing where they receive supportive services designed to help them move into some form of permanent housing;
- No longer experiencing homelessness and are now living in permanent supportive housing or other permanent housing and who may be receiving supportive social services.



INTRODUCTION

The 2020 Point-in-Time (PIT) Enumeration provides information on the number of unsheltered persons in the region as well as figures on how many persons use winter shelters, year-round emergency shelters, safe havens, transitional housing, and several permanent housing solutions. The PIT also provides information on the extent to which persons experiencing homelessness in each jurisdiction live with disabling conditions or whose special needs are represented among various subpopulations. There is no "one size fits all" housing solution, and the region's Continua of Care (CoC), a public-private partnership designed to coordinate a response to a person's housing crisis, respond with different housing types and services to meet residents' unique needs.

The metropolitan Washington region's homeless services system consists of nine jurisdictions, each representing a local CoC that receives federal funding through the U.S. Department of Housing and Urban Development's (HUD) Continuum of Care Homeless Assistance Program to assist its residents experiencing homelessness.

The participating jurisdictions are:

- City of Alexandria, Virginia;
- Arlington County, Virginia;
- District of Columbia;
- Fairfax County, Virginia, including data from the City of Falls Church and the City of Fairfax;
- Frederick City and County, Maryland;
- Loudoun County, Virginia;
- Montgomery County, Maryland;
- Prince George's County, Maryland, including data from the City of Bowie; and
- Prince William County, Virginia, including data from the City of Manassas and the City of Manassas Park.

Although Charles County, Maryland is a COG member, the county's homeless enumeration figures are not tracked as part of this report. Charles County submits its enumeration results to the Baltimore, Maryland HUD office and not the Washington, D.C. HUD office, unlike the other COG member jurisdictions.

The report includes narratives that were prepared by each of the respective jurisdictions. The narratives briefly describe each jurisdiction's CoC and provide detailed explanations of their respective enumeration results. All the region's jurisdictions use a Homeless Management Information System (HMIS) to count their residents experiencing homelessness, in addition to other methodologies. HMIS is an electronic data collection system that is used to produce an unduplicated count of people experiencing homelessness for the respective jurisdictions, improve program operations, measure program performance, and coordinate services community-wide.

Similar to past enumerations, the 2020 count *does not* include people who "double up" with relatives or friends, in accordance with HUD guidelines. HUD's requirements for conducting the annual Point-in-Time count can be found in its Standard and Methods for Point-in-Time Counts of Homeless Persons and the annual Housing Inventory Count updates at **www.hudexchange.info**.

Due to high housing costs and limited housing options for households with lower incomes, several local jurisdictions and service providers are concerned that many of the region's residents are at risk of experiencing homelessness.

These concerns have been exacerbated since the declaration of the COVID-19 pandemic in March 2020. All jurisdictions in the metropolitan Washington region enacted eviction moratoria and are working on providing assistance to renters and landlords with affordable units, but many fear it may not be enough to prevent someone from experiencing homelessness. The high rate of unemployment due to the stay at home orders and other measures to prevent the spread of COVID-19 impacts many in lower-wage service jobs, placing those individuals and families at greater risk of facing a housing crisis.

While not yet considered homeless, many households are believed to be doubled up and/or living in overcrowded situations. Homelessness is often the next step for such households once the family members or friends who have been sheltering them can or will no longer do so. The complications that an uncontrolled infectious disease presents further challenges the region's Continua of Care, which are already dealing with significant resource and staffing constraints due to the public health crisis.

How We Define Homelessness

The region's jurisdictions use HUD's definition of homelessness which is defined as *people who reside in emergency shelter, transitional housing, domestic violence shelters, runaway youth shelters, safe havens, or places not meant for human habitation, such as streets, parks, alleys, abandoned buildings, and stairways.*

Literally Homeless persons, which may also be referred to as "homeless" in this report, include Households without Children, Households with Adults and Children, and Households with Only Children, who may be **sheltered or unsheltered**, as described above.

Formerly Homeless persons in this report include those who, on the night of the PIT, had moved into permanent supportive housing, were rapidly rehoused, or moved into other permanent housing. This does not include homeless persons who are able to secure other permanent housing outside of the homeless system, including a non-subsidized apartment or room, moving in with a relative or friend, or receiving a mainstream rental subsidy.

Data for the 2020 enumeration were collected in the following three categories, as defined by HUD:

1. **Households without Children.** Households without children consist of only adults age 18 or over. This report also refers to households without children as "single adults." The vast majority of households without children are single persons, although this category may include couples without minor children or a parent and an adult child over the age of 18. These households are counted as single adults for purposes of the Point-in-Time count.

2. **Households with Adults and Children.** Households with adults and children contain at least one adult age 18 or over and at least one child under age 18. In this report, we also refer to households with adults and children as "homeless families."

3. **Households with ONLY Children**. Households with ONLY children contain no adults age 18 or over, only persons under age 18, including teenage parents under 18 with at least one child, or other households with only persons under age 18.

Why We Conduct This Count

COG's Homeless Services Planning and Coordinating Committee, concerned by the lack of regional data available, undertook the first effort to produce an unduplicated Point-in-Time count of homeless adults and children in the metropolitan Washington region in 2001. Regional information can help inform local efforts and provide an avenue for sharing strategies to better serve the region's residents facing a housing crisis. Nationally, in 2007, other CoCs began conducting the first counts.

HUD requires communities which receive federal funds (McKinney-Vento Homeless Assistance Grants) conduct an annual count during the last ten days of January. The annual count is done using electronic administrative records to enumerate people living in shelters. Unsheltered counts are only required every other year, although the nine CoCs in the metropolitan Washington region having been conducting an unsheltered count annually for twenty years.

Point-in-Time counts are valuable for gathering trend data, establishing the dimensions of the problem of homelessness, and are necessary and essential to policymakers and community members alike in tracking progress toward the goal of ending homelessness. At the federal level, HUD uses Point-in-Time count data to inform Congress about the number of people experiencing homelessness nationwide and the effectiveness of HUD's programs and policies in achieving its goals.[3]

At the local level, point-in-time counts can assist CoCs to identify any service gaps and appropriately size its system to meet the current needs of its residents, measure progress towards ending the experience of homelessness, identify individuals who may not be known to the homeless services system, and raise awareness that may attract additional resources to help solve a community's housing challenges.[4]

It is important to note, however, that the point-in-time count provides a limited and imperfect perspective on the challenges, successes, and progress made in ending homelessness. Many variables – bed availability, weather, surveying methodology, the willingness of people to be interviewed, and the availability of trained outreach workers – can impact the number of people counted on any given night.

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It is important to note, however, that the Point-in-Time count provides a limited and imperfect perspective on the challenges, successes, and progress made in ending homelessness.

[3] https://endhomelessness.org/resource/what-is-a-point-in-time-count/

[4] Ibid.

To round out the limited perspective that PIT data provides, the region's CoCs use other data sources to measure the extent of the number of people experiencing homelessness and determine the best responses. These include having a quality by-name list, which provides live, up-to-date information on exactly who is experiencing homelessness; Longitudinal System Analysis reports, which provides information about how people experiencing homelessness use their system of care, and System Performance Measures,[5] which HUD requires of communities to measure their performance as a coordinated system of homeless assistance as opposed to programs and funding sources that operate independently.

However, the PIT count remains a dependable source upon which the nine participating CoCs in the metropolitan Washington region can measure their efforts over time to prevent and end the experience of homelessness.

[5] https://www.hudexchange.info/programs/coc/system-performance-measures/#guidance

HOW MANY LOCAL RESIDENTS ARE EXPERIENCING HOMELESSNESS?

On January 22, 2020, 9,763 people throughout the metropolitan Washington region indicated that they were experiencing homelessness, a number essentially unchanged from the historic low counted in 2019. There was a slight reduction of 31 fewer persons counted experiencing homelessness from 2019. Table 1 illustrates the region's 2020 homeless enumeration across jurisdictions compared to last year.

The District of Columbia and Arlington County were the two CoCs which recorded a decrease in the number of literally homeless counted from the previous year's enumeration.

The other seven CoCs recorded increases, but the changes were small, such as the six additional persons counted in Prince George's County. The largest increase in the literally homeless count from 2019 to 2020 was in Prince William County (49 additional persons counted).

The same trend is not true for the period of 2016 to 2020, as shown in Table 2, which illustrates the numerical and percentage change in the number of residents in the region experiencing homelessness.

How Has the Number of People Experiencing Homelessness Changed?

TABLE 1: Literally Homeless By Jurisdiction, 2019 - 2020

Jurisdiction	2019	2020	Change in Number of Persons 2019-2020	Percent Change 2019 - 2020
City of Alexandria, VA	198	207	9	5%
Arlington County, VA	215	199	-16	-7%
District of Columbia	6,521	6,380	-141	-2%
Fairfax County, VA	1,034	1,041	7	1%
Frederick County, MD	286	308	22	8%
Loudoun County, VA	169	179	10	6%
Montgomery County, MD	647	670	23	4%
Prince George's County, MD	447	453	6	1%
Prince William County, VA	277	326	49	18%
TOTAL	**9,794**	**9,763**	**-31**	**0%**

Source: COG 2020

Two of nine CoCs experienced a decrease in the number of individuals counted from the 2019 to 2020 enumerations, and seven of nine CoCs experienced decreases in the number of people experiencing homelessness between 2016 and 2020. Montgomery County had the largest percentage decrease (32 percent), followed by the District of Columbia (24 percent) and Prince

William County (19 percent). The region reduced the number of persons counted experiencing homelessness by 2,452 or 20 percent between 2016 and 2020. This represents an increased rate of reduction from 16 percent fewer people counted experiencing homelessness noted during the period of 2015 to 2019.

The District of Columbia, Montgomery County, and Prince George's County experienced the largest decreases in the total number of people experiencing homelessness during the same period. The District of Columbia counted 1,970 fewer individuals in 2020 than in 2016, followed by Montgomery County (311 fewer individuals) and Prince George's County (91 fewer individuals).

TABLE 2: Literally Homeless By Jurisdiction, 2016-2020

	2016	2017	2018	2019	2020	Change in Number of Persons 2016 - 2020	Percent Change 2016 - 2020
City of Alexandria	224	211	226	198	207	-17	-8%
Arlington County	174	232	221	215	199	25	14%
District of Columbia	8,350	7,473	6,904	6,521	6,380	-1,970	-24%
Fairfax County	1,059	964	987	1,034	1,041	-18	-2%
Frederick County	349	309	316	286	308	-41	-12%
Loudoun County	134	113	134	169	179	45	34%
Montgomery County	981	894	840	647	670	-311	-32%
Prince George's County	544	532	478	447	453	-91	-17%
Prince William County	400	400	374	277	326	-74	-19%
TOTAL	**12,215**	**11,128**	**10,480**	**9,794**	**9,763**	**-2,452**	**-20%**

Source: COG 2020

The District of Columbia attributes the decrease in persons experiencing homelessness primarily to the reduction in the numbers of homeless families. In 2017, the District of Columbia implemented a policy and program change to provide year-round access to shelter and increased prevention services for families. The result of this change has allowed the system to normalize demand for services during peak hypothermia months and resulted in reduced numbers of families seeking shelter throughout the year. The District also closed DC General, the main site for emergency shelter for families and has been opening new facilities across the District to serve families citywide in smaller settings for shorter stays with access to critical supportive services on site.

Montgomery County attributes the decrease in the number of persons experiencing homelessness to a multipronged approach to ensuring that all residents experiencing a housing crisis and entering the homeless services system are supported and housed as quickly as possible. Since January of 2016, more than 400 people experiencing homelessness have been placed in permanent housing through the Inside (not Outside) Initiative.[6] The county's newer initiative, @Home Together, is focused on ending homelessness for families by 2020 and is part of the "Housing for All" campaign.

[6] Inside/Not Outside is a community-wide effort dedicated to ending chronic homelessness for individuals and families in Montgomery County, MD. Accessed at https://www.montgomerycountymd.gov/Homelessness/InsideNotOutside.html

In addition to the concentrated effort to end long-term homelessness, the CoC instituted a shelter diversion program for families, leading to a reduction in the number of households entering the homeless continuum. Staff offer support in problem solving and conflict resolution that allows families to resolve their housing crisis quickly. A similar approach is used at the single adult emergency shelters resulting in shorter length of stay. Last, the CoC has increased the number of Rapid Rehousing units and made the program more flexible to meet the varying needs of all households.

Prince George's County attributes its decline in homelessness to six key strategies: prevention; diversion; coordinated entry; rapid re-housing and "moving on"; permanent housing; and improved data collection and performance measures. In addition, Prince George's County has made accommodations for six subpopulations with distinct needs (elderly/aging, unaccompanied youth/young adults, survivors of violence and trafficking, returning citizens, veterans, and persons with significant somatic and behavioral health challenges) to systemically target the unique barriers to housing for these groups. Collectively, these strategies enhance system accountability, build on current success, and provide continued flexibility to shift resources to meet newly emerging needs.

A combination of factors, including the region's focus on increasing the supply of permanent supportive housing, rapid re-housing, and homeless prevention and diversion efforts account for some other jurisdictions' consistent declines in homelessness. Significant challenges remain, however. Increases in the region's already-high rents make it very difficult for extremely low-income households to find or maintain housing that they can afford. A shortage of living wage jobs compounds the difficulty in finding and maintaining affordable housing, particularly given the economic recession caused by the COVID-19 pandemic. At the federal level, uncertainty about funding levels threatens housing programs of all types and constrains local jurisdictions' ability to make dramatic progress in providing more permanent housing solutions.



Molly Herman from Pathways to Housing DC gives instructions to survey volunteers for the unsheltered portion of the count on January 22, 2020. (COG)

A lack of affordable, permanent housing opportunities remains the most significant and persistent obstacle to ending homelessness in our region.

REGIONAL HOMELESSNESS BY TOTAL POPULATION

The prevalence of homelessness can also be understood by determining the number of persons experiencing homelessness counted in the metropolitan Washington region as a percentage of its total population. Including the District of Columbia, there was a 0.18 percent incidence of homelessness in the region. This figure is unchanged from 2019 and 2018. Excluding the District, the incidence of homelessness is 0.07 percent for the region's suburban population, which remains unchanged since 2016.

HUD's national 2019 CoC Point-in-Time data state that there were 567,715 people experiencing homelessness in the country. This figure represents a three percent increase from the results of the national 2019 count, the most recent figures available. This rate is 0.002 percent of the total US population (329,135,084 as of January 2020), compared the region's rate of 0.18 percent. The incidence of homelessness per 1,000 persons is higher in our region than the national average, although the difference is less significant: 1.72 persons per 1,000 Americans were experiencing homelessness on the night of the count in 2019 compared to 1.8 persons per 1,000 in the metropolitan Washington region in 2020.

The results described above are shown in Table 3 below. The District of Columbia has the largest local incidence of homelessness within the population. Of every 1,000 people in the District, 9.0 are homeless, a decrease from last year when it was 9.3.

TABLE 3: 2020 Share of Population That Is Experiencing Homelessness

Jurisdiction	2019 Total Population*	2020 Literally Homeless	Homeless as Percent of Total Population	Homeless Persons per 1,000 People
City of Alexandria	159,428	207	0.13%	1.3
Arlington County	236,842	199	0.08%	0.8
District of Columbia	705,749	6,380	0.90%	9.0
Fairfax County[1]	1,186,168	1,041	0.09%	0.9
Frederick County	259,547	308	0.12%	1.2
Loudoun County	413,538	179	0.04%	0.4
Montgomery County	1,050,688	670	0.06%	0.6
Prince George's County	909,327	453	0.05%	0.5
Prince William County[2]	528,898	326	0.06%	0.6
Region with D.C.	**5,450,185**	**9,763**	**0.18%**	**1.8**
Region without D.C.	**4,744,436**	**3,383**	**0.07%**	**0.7**

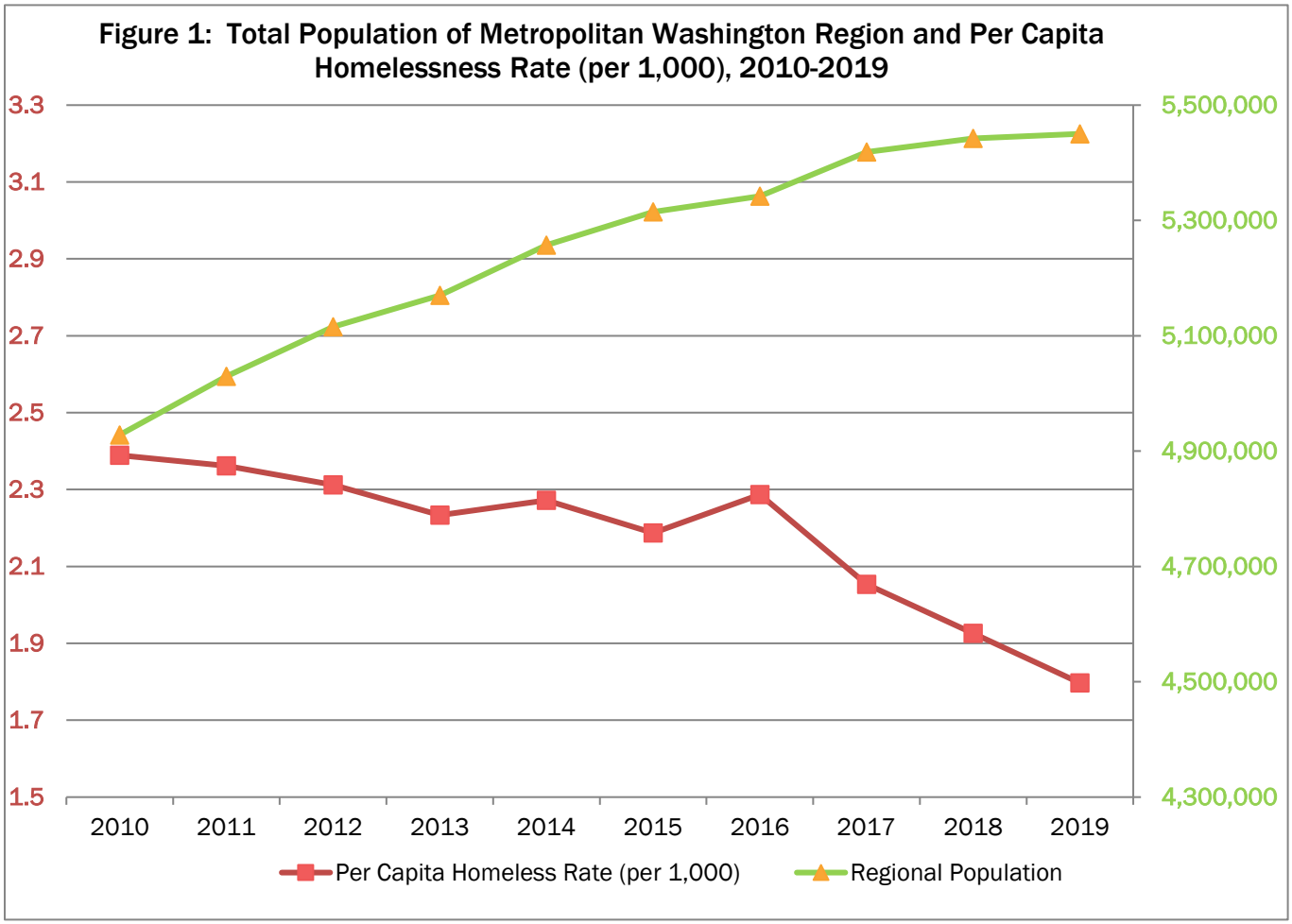
*Source: Annual Estimates of the Resident Population for the Metropolitan Washington Council of Governments: April 1, 2010 to July 1, 2019. U.S. Census Bureau, Population Division, March 26, 2020.

[1] Includes the Cities of Fairfax and Falls Church

[2] Includes the Cities of Manassas and Manassas Park

Another way to evaluate the size of the literally homeless population over time is to compare it to the region's population growth. Since the first regional enumeration in 2001, the total number of literally homeless persons has represented 11,800 people on average, while the region's population has grown dramatically. Figure 1 visually illustrates the rate of homelessness compared to the rate of regional population growth since the end of the Great Recession in 2010. Therefore, compared to population growth, the rate of homeless persons per thousand (also described in Table 3) has declined over time.

Figure 1: Total Population of Metropolitan Washington Region and Per Capita Homelessness Rate (per 1,000), 2010-2019



Source: COG 2020

Household Composition

Table 4 compares enumeration survey responses from the three main categories of homeless households from 2016 to 2020. Regional family homelessness (the number of persons in homeless families) decreased 7 percent from 2019 to 2020. This is a positive trend, although at a slower rate of decline than in previous years (13 percent reduction from 2019 to 2018, and 15 percent reduction per year from 2016 to 2018).

The longer-term trend from 2016 to 2020 represents an impressive 42 percent reduction in persons in families experiencing homelessness. This decline in families experiencing homelessness noted during the past four years mirrors changes observed at the national level, where family homelessness declined by 17 percent between 2015 and 2019 and declined five percent between 2018 and 2019.[7]

TABLE 4: Household Composition					
		Total Persons in Households without Children	Total Persons in Households with Adults and Children	Total Persons in Households with ONLY Minor Children* (Unaccompanied Minors)	Regional Total
COG REGION	**2020**	**5,990**	**3,760**	**13**	**9,763**
	2019	5,735	4,044	15	9,794
	2018	5,798	4,667	15	10,480
	2017	5,630	5,489	9	11,128
	2016	5,764	6,435	16	12,215
2016 - 2020 Percent Change		**4%**	**-42%**	**-3**	**-20%**

**Change in Households with ONLY Minor Children is shown in total numbers, not a percentage, due to the small overall number of individuals counted.*

Family Households

Families represent 39 percent of all persons experiencing homelessness in the metropolitan Washington region. Tables 5 and 6 (following pages) illustrate the 2020 survey responses from the region's families without a permanent home. As of January 22, 2020, a total of 1,191 family households were counted as homeless, a decrease of four percent from 2019. This year marks the fourth in a row of recorded declines in families experiencing homelessness.

In 2020, six of nine CoCs reduced the number of persons in families recorded as homeless on the night of the enumeration from the previous year. The three CoCs with increases noted changes in the low to single digits (two more persons in Fairfax County, five more persons in families in Loudoun County and 12 more persons in families in the city of Alexandria.) The District of Columbia had the greatest reduction in the number of persons in families from the 2019 PIT count, with 215 fewer family members counted.

One distinguishing characteristic of families experiencing homelessness is that the age of adults in homeless families tends to be much younger than single adults experiencing homelessness. For example, a homeless single adult in the metropolitan Washington region is most likely to be between the ages of 45 and 54, but adults in homeless families with children are most likely to be between the ages of 25 to 34.

[7] https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/

Reductions in the one-year rate of family homelessness were greatest in Prince William County and Montgomery County, which counted 30 percent and 11 percent fewer persons respectively.

TABLE 5: 2020 Literally Homeless Persons In Families By Jurisdiction				
Jurisdiction	**Number of Families**	**Adults in Families**	**Children in Families**	**Total Persons in Families**
City of Alexandria	32	36	50	86
Arlington County	21	21	39	60
District of Columbia	767	1,011	1,420	2,431
Fairfax County	161	210	318	528
Frederick County	25	28	42	70
Loudoun County	15	19	31	50
Montgomery County	60	70	113	183
Prince George's County	77	85	155	240
Prince William County	33	54	58	112
ALL COG COCs	**1,191**	**1,534**	**2,226**	**3,760**

Note: Chart above does not include Households with Only Children (Unaccompanied Minors).

Source: COG 2020

The same positive trend is reflected in the longer period of 2016 to 2020, when eight of nine regional CoCs recorded decreases in family homelessness. During this period, Montgomery County experienced the greatest percentage decrease (49 percent) and the District of Columbia recorded the greatest reduction in numbers of persons counted in homeless families (2,431 fewer persons in families from 2016 to 2020).

According to the U.S. Census Bureau's 2018 American Community Survey 1-Year Estimates, the Washington Metropolitan Statistical Area's (MSA) median monthly housing costs are $1,990 and median monthly gross rent is $1,670. Regionally, nearly half of all households - 48 percent – are housing cost burdened, meaning they pay more than a third of their incomes to satisfy these monthly housing costs[8]. Severely cost-burned households (i.e. paying more than 50 percent of monthly income towards housing costs) vary by income level. Seventy-six percent of households with extremely low incomes (at or below 30 percent of the average median) are severely cost burned in the metropolitan Washington region and may face difficult decisions regarding which basic needs to prioritize for payment.[9] In the District of Columbia, a person earning the minimum wage ($14.00 per hour) in 2019 would need to work 80 hours per week to be able to afford a one-bedroom apartment at the Fair Market Rent ($1,454/month).[10] The region's lowest-income households face significant challenges affording housing, especially as the area's increased housing demand creates pressure on rental rates. This trend makes otherwise affordable units unaffordable for households, especially as they compete with the general public for housing.

[8] Source: COG analysis of U.S. Census Bureau, 2016 1-Year PUMS files

[9] National Low Income Housing Coalition,, *The Gap: A Shortage of Affordable Rental Homes.* https://reports.nlihc.org/gap/2018/dc Accessed on May 29, 2020

[10] National Low Income Housing Coalition, *Out of Reach 2019.* http://nlihc.org/oor/district-columbia Accessed on May 29, 2020.

Children in Homeless Families

It is important to note that children face particularly adverse effects from experiencing homelessness. Children are often dislocated from familiar surroundings, relatives, friends, and neighborhood schools when their families become homeless. Children must also contend with the stigma associated with being homeless when navigating their new surroundings and making friends. Children who experience homelessness may have poor nutrition, increased incidence of health impairments, higher exposure to violence, and severe emotional distress.[11] Homelessness and hunger are also closely intertwined. Homeless children are twice as likely to experience hunger as their non-homeless peers, which negatively effects the physical, social, emotional and cognitive development of children. Schooling for homeless children is often interrupted and delayed, with homeless children twice as likely to have a learning disability, repeat a grade or to be suspended from school.[12] Combined, these conditions eliminate feelings of safety and predictability that are important for healthy growth.

COG's 2020 enumeration identified 2,226 children experiencing homelessness, representing 23 percent of the region's total homeless population (9,763). This represents a slight decrease of three percent from last year, duplicating the results recorded during the 2019 and 2018 enumerations. Children account for 59 percent of all people in homeless families; this proportion of persons in homeless families decreased slightly from 61 percent in 2019 but has otherwise remained fairly consistent since 2010.

TABLE 6: Change In Literally Homeless Persons In Families By Jurisdiction

Jurisdiction	2016	2017	2018	2019	2020	Percent Change 2016-2020
City of Alexandria	95	91	84	74	86	-9%
Arlington County	50	83	77	66	60	20%
District of Columbia	4,667	3,890	3,134	2,646	2,431	-48%
Fairfax County	575	472	488	526	528	-8%
Frederick County	100	92	109	74	70	-30%
Loudoun County	69	42	48	45	50	-28%
Montgomery County	358	278	272	206	183	-49%
Prince George's County	308	338	273	247	240	-22%
Prince William County	213	203	182	160	112	-47%
ALL COG COCs	**6,435**	**5,489**	**4,667**	**4,044**	**3,760**	**-71%**

Source: COG 2020

Some of the region's public schools have reported higher numbers of homeless children than are reported in the annual Point-in-Time. The primary reason for this is that area public schools track the number of homeless children on a cumulative basis throughout the school year, compared to the one-day snapshot of the region's homeless provided by the Point-in-Time count. Also, the self-reported homeless information used by public schools is based upon definitions provided by the U.S. Department of Education.

[11] National Center for Homeless Education, http://center.serve.org/nche/briefs.php, *Domestic Violence, Homelessness, and Children's Education:* 1.

[12] http://www.apa.org/pi/families/poverty.aspx

Children counted by public schools may or may not be literally homeless per the HUD definition, and may be living in doubled up situations. Editorial Projects in Education, the publisher of *Education Week*, reported that a record high 1.5 million students were homeless during the 2017-2018 school year, which represents an 11 percent increase over the previous year and nearly double the number from a decade ago.[13] The National Center for Homeless Education reported that during the 2014-2015 school year, 76 percent of students that self-identified as being homeless reported they were "doubled up" with family or friends.[14] Based upon HUD's guidelines, local jurisdictions cannot count people who live in doubled up situations for the Point-in-Time count.

Table 7 (following page) provides a breakdown of households of homeless children without adults by jurisdiction. The small number of Households with Only Children counted in 2020 reflects the challenges of counting homeless youth accurately. One difficulty is the HUD definition of homelessness, which excludes persons who are "doubled up" or "couch surfing," [15] a form of shelter often used by youth. Also, methods often used for counting homeless adults do not accurately capture survival strategies particularly common to youth, such as being mobile and transient, latching onto friends and staying in groups, or trying to hide in plain sight. In addition, many homeless youth do not want to be found because they may be fleeing abuse or fear being placed in foster care. Most are not connected to formal supports such as the child welfare, juvenile justice, and mental health systems and many avoid or are unaware of available services.[16]



(toptenalternatives/Creative Commons)

Children account for 59 percent of all people in homeless families and represent nearly a quarter of all persons experiencing homelessness in the metropolitan Washington region in 2020.

There are many challenges with counting homeless youth, and because their experiences with homelessness are episodic, single point-in-time counts will always underestimate the true number of homeless youth. Taking note of seasonal conditions that affect whether youth will seek shelter or

[13] Education Week. *Number of Homeless Students Hits All-Time High*. February 10, 2020. Accessed May 2020. https://www.edweek.org/ew/articles/2020/02/12/number-of-homeless-students-hits-all-time-high.html

[14] National Center for Homeless Education, *National Overview, Education for Homeless Children and Youth.* Accessed April 2017. http://center.serve.org/nche/downloads/data-comp-1112-1314.pdf http://profiles.nche.seiservices.com/ConsolidatedStateProfile.aspx

[15] Couch surfing is typically understood to mean a temporary stay in a series of acquaintances' homes at no cost, rather than a hotel, making use of improvised sleeping arrangements.

[16] The Urban Institute, *Youth Count! Process Study:* 10.

stay on the street, some homelessness researchers make sure they count in more than one season.[17]

Noting the importance of counting youth during non-winter months, Prince George's County and the District of Columbia have held separate youth counts; Prince George's County has held six to date since 2011 and the District of Columbia has held five since 2015. Montgomery County conducted its first youth count in April 2018.

Youth counts differ from the annual Point-in-Time census in January in several important ways. First, the count takes place during warmer months, when youths are more likely to be spending time outside, and potentially unsheltered. Second, the youth count takes place during nine days (in the District of Columbia) and two weeks (in Prince George's County) rather than just one 24-hour period and includes intentional enumeration by school personnel with knowledge of and connections to youth and young adults who may not be regularly attending school and would be missed in the one-day count. Third, in addition to counting youth who are literally homeless, per the HUD definition, the youth count efforts include those who are unstably housed who may be doubled-up or "couch surfing." Finally, the youth count includes a much broader series of questions designed to identify social, economic, developmental and other contributing factors leading to youth homelessness for the purposes of strategic system design at the local level as well as to reveal opportunities for focused diversion and prevention work among youth who are unstably housed and at risk of experiencing literal homelessness.

TABLE 7: Households With Only Children Under Age 18 By Jurisdiction, 2017 - 2020

Jurisdiction	2017	2018	2019	2020	Absolute Change 2017 - 2020
City of Alexandria	0	0	0	0	0
Arlington County	0	0	0	0	0
District of Columbia	5	9	12	11	7
Fairfax County	3	2	0	0	-3
Frederick County	0	0	0	0	0
Loudoun County	0	0	0	0	0
Montgomery County	0	0	0	0	0
Prince George's County	1	2	1	1	0
Prince William County	0	2	0	0	0
TOTAL	**9**	**15**	**13**	**12**	**4**

Source: COG 2020

The six completed youth counts conducted in Prince George's County included individuals between the ages of 13 and 24 and have resulted in higher numbers of youth than were counted in the Point-in-Time enumeration of literally homeless persons in January.

[17] http://www.healthycal.org/archives/11079

For example, Prince George's County outreach workers counted five unsheltered youth and young adults who met the HUD definition of literally homeless during the 2018 PIT count in January but reported 43 unsheltered youth and young adults during its most recent 2-week youth only count.[18] The planned 2020 youth count in Prince George's County and Montgomery County, Maryland was postponed due to the COVID-19 pandemic.

Prince George's County is one of six CoCs in the State of Maryland which has participated in the Youth REACH MD (Reach out, Engage, Assist and Count to End Homelessness) demonstration pilot since 2015 to count unaccompanied homeless youth and young adults and serves as one of three regional team leaders providing technical assistance to Maryland CoCs doing the count for the first time.[19] The enumeration involved surveying youth through shelter counts, service-based counts (meaning youth/young adults who used services from participating providers during the count), and kick-off/magnet events and street counts.[20] Further, results from this state-wide effort concluded that combining survey data and administrative data (via HMIS or Homeless Management Information Systems) result in a more accurate picture of youth homelessness than survey data alone.[21]



Daejanae D., Prince George's County Youth Advisory Board Co-Chair, visits the Maryland state capitol to speak with lawmakers. (Prince George's County Department of Social Services).

In October 2018, the state of Maryland passed the Ending Youth Homelessness Act of 2018 (SB 1218). The Ending Youth Homelessness Act of 2018 defines unaccompanied homeless youth as individuals of 24 years of age or younger who are not in the physical custody of a parent or guardian and lack a fixed, regular, and adequate nighttime residence; makes the annual Youth REACH MD unaccompanied homeless youth count a permanent fixture under the leadership of the Department of Housing and Community Development; and, provides additional grant funding to end youth homelessness and address related disparities based on race, ethnicity, sexual orientation, and gender identity by establishing the Ending Youth Homelessness Grant Program.[22]

The District of Columbia passed the End Youth Homeless Amendment Act in 2014, which not only provided expanded funding for youth-accessible services, but also mandated an annual census.[23] The most recent of the past five homeless youth counts took place over nine days during September 20 – 28, 2019. The youth counts included persons aged 24 years or younger and who met the HUD definition of literally homeless as well as those who were unstably housed.

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[18] http://dhcd.maryland.gov/HomelessServices/Documents/Meetings/2017-09/Youth-REACH-Presentation.pdf

[19] http://www.youthreachmd.com/

[20] *Maryland's First Unaccompanied Homeless Youth & Young Adult Count: Findings from Youth REACH MD Phase 2 (May 2016),* accessed at https://theinstitute.umaryland.edu/docs/YouthREACHMD-Phase2Report-Final.pdf

[21] Ibid.

[22] http://www.youthreachmd.com/

[23] https://dc-aya.org/youth-count-dc-2018/

The count resulted in a total of 1,306 youth who were either literally homeless or unstably housed. This represents a slight decrease of two percent from the total youth counted in 2019. The decrease was driven by a five percent reduction in singles, in contrast to a three percent increase in youth-headed families.

When asked where they spent most nights in the past month, 55 percent of youth stayed in an emergency shelter or transitional housing program; 18 percent stayed in an unsheltered location; 49 percent were in an unstable housing arrangement (e.g. staying house-to-house or couch-surfing); 11 percent were in permanent housing, and five percent mostly stayed in an institutional setting (including foster care or juvenile justice) but had since lost that housing or had been discharged at the time of the survey. Reflecting the fluidity of the youths' housing status, 25 percent of youth had stayed in at least two of these locations in 2019.



Dennis M., Prince George's County Youth Advisory Board Co-Chair, visits the Maryland General Assembly in Annapolis. (Prince George's County Department of Social Services).

The District of Columbia's CoC created a Youth Advisory Board called *Through the Eyes of Youth*, which ensures youth who have experienced homelessness have a role in planning services for this population. The CoC also worked with The Community Partnership for the Prevention of Homelessness (TCP) to develop and implement *Solid Foundations*. In turn, this plan has highlighted youth service needs leading to the establishment of a 24-hour youth drop in center, prevention and family reunification services, rapid rehousing for Transition-Aged Youth (TAYs), and a new model called extended transitional housing which allows for longer lengths of stay with intensive supportive services, progressive engagement, and a housing first approach.

Both Prince George's County and the District of Columbia have received HUD grant funding from the Youth Homelessness Demonstration Program. The program requires convening a large variety of stakeholders, assessing the needs of special populations, convening Youth Advisory Boards, and creating a coordinated community plan for youth experiencing homelessness. It also provides an opportunity to test new approaches to address youth homelessness.

In both Prince George's County and the District of Columbia youth counts, a key contributing factor to youth experiencing homelessness was conflict with a parent, guardian, or foster parent. Findings from the Maryland Youth REACH initiative suggest that focused interventions on prevention among youth and young adults who identify as black or African-American, LGBTQ, are in high school and/or are pregnant or parenting are needed to reduce the numbers of youth and young adults who are unstably housed or experiencing literal homelessness.[24]

[24] http://www.youthreachmd.com/content/wp-content/uploads/2018/02/YRMD-2017-Report-Executive-Summary-FINAL.pdf

Demographic Profile of the Region's Residents Experiencing Homelessness

In 2014, COG began reporting questions regarding ethnicity and race in addition to age and gender. HUD specified the ethnic and racial categories included in the Point-in-Time questionnaire which generally reflect a social definition of race recognized in this country and are not an attempt to define race biologically, anthropologically, or genetically. The answers are also limited and may not fully represent the varied racial and ethnic backgrounds of all people who live in our region.

Figure 2: Regional Homeless Single Adults Demographic Profile (Race)

Source: COG 2020

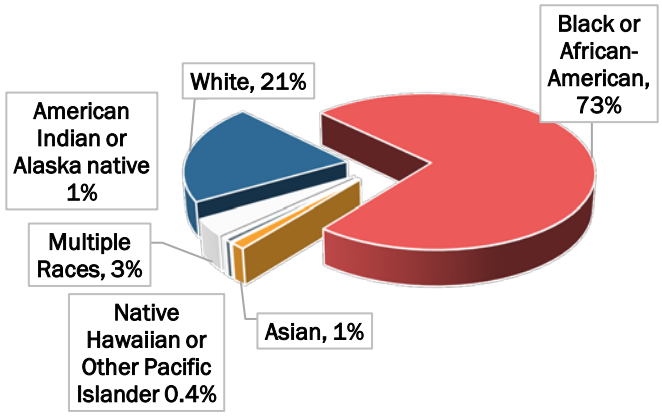
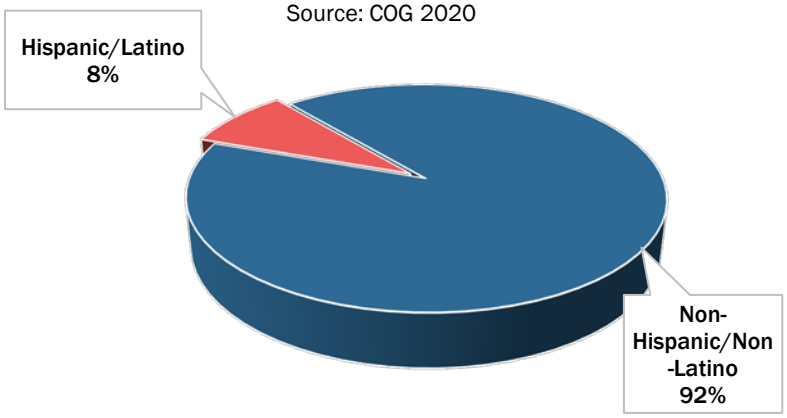


Figure 3: Regional Homeless Single Adults Demographic Profile (Ethnicity)

Source: COG 2020



The survey question on ethnicity asks respondents to identify whether they are Hispanic or Latino (people who identify their ethnic origin as Hispanic or Latino may be of any race[25]). In addition, the categories of the race item include racial and national origin or sociocultural groups. Race and ethnicity were self-reported, and individuals could choose "multiple races" to indicate their racial mixture, such as "American Indian" and "White."

Of the 5,987 homeless single adults (Figure 2) who responded to these demographic questions, 93 percent were over the age of 24, and the majority (70 percent) were male. For those who responded to the question regarding ethnicity, 92 percent self-identified as non-Hispanic or non-Latino. The racial breakdown included 73 percent African American, 21 percent white, three percent as multiple races, and one percent Asian. Less than one percent declined to respond, or the information was not recorded. The remaining categories (American Indian or Alaska native, Native Hawaiian or Other Pacific Islander) all were one percent or less of the total literally homeless single adult population.

[25] http://www.census.gov/population/race/

In Frederick and Loudoun counties, the single adult racial profile differs slightly from the rest of the region. In Frederick and Loudoun, the majority of single adults experiencing homelessness are white (63 percent and 46 percent), and in Fairfax County and Arlington County, 44 percent and 35 percent respectively of the single homeless adults identified racially as white.

The demographic profile of families experiencing homelessness (Figure 4) differs from that of single adults in a few key characteristics. In homeless families, the majority of adults (80 percent) are female. The average age of the adult in a homeless family also tends to be younger. Twenty-six percent are aged 18 to 24, 43 percent are aged 25 to 35, and overall, 74 percent are over age 24. Ethnically, 80 percent of adults in homeless families are Non-Hispanic/Non-Latino, and racially, 86 percent are African American. White adults in families experiencing homelessness make up eight percent of the regional literally homeless family population, two percent are Asian, and three percent are multiple races, with the other racial categories all less than one percent.

Figure 4: Regional Homeless Adults in Families Demographic Profile (Race)

Source: COG 2020

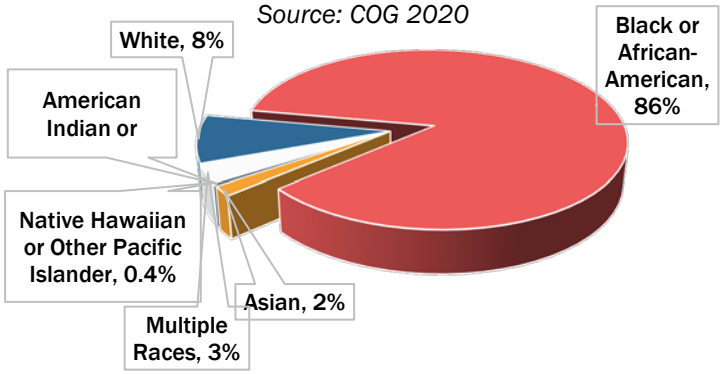


Figure 5: Regional Homeless Adults in Families Demographic Profile (Ethnicity)

Source: COG 2020

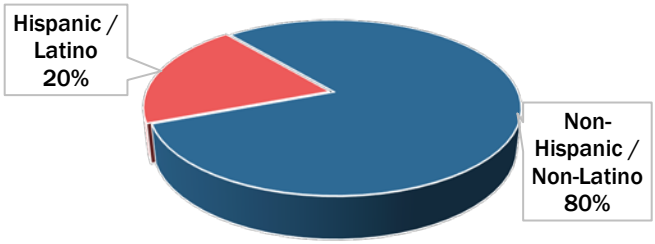
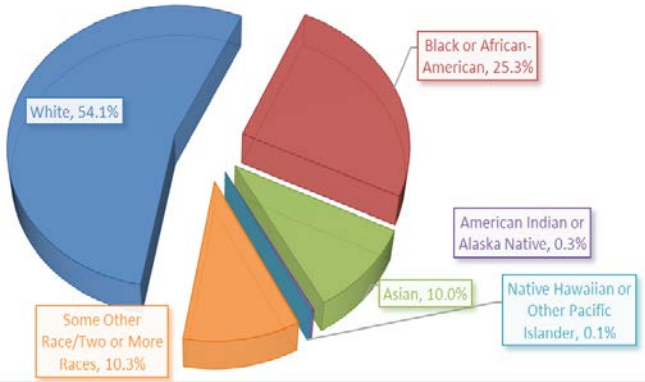


Figure 6: Regional Total Population Demographic Profile (Race)

Source: American Community Survey 2018 5-Yr Estimates



Again, the demographic profile of adults experiencing homelessness in families in Frederick County differs from the rest of the region. In Frederick County, 68 percent of homeless adults in families were white and 25 percent were African- American or Black. In Loudoun County, homeless adults in families identified racially in the same percentages as white and African American or Black (37 percent each). In Arlington County, 33 percent of adults in families were white, and 38 percent were African American or Black.

In contrast, the region's racial breakdown (Figure 6) shows that 54 percent of the population is white and only 25 percent is African American or Black. With the exceptions of Frederick and Loudoun

Counties, persons experiencing homelessness are disproportionately more likely to be Black or African American than they are in the general regional population.

Addressing Racial Inequality

The racial disproportionality reflected in the 2020 PIT count demographic data is not unique to the metropolitan Washington region. Rather, it reflects a long history of racial segregation and discrimination in the United States that continues to impact people of color to this day. The Center for Social Innovation launched an effort in 2016 to address racial inequity in homelessness. The Center undertook a mixed-methods (quantitative and qualitative) research study known as SPARC (Supporting Partnerships for Anti-Racist Communities). The phase one research is comprised of HMIS data, census data, and oral histories from individuals in six study sites across the United States.[26]

Among some of the key findings from its first phase research, it notes that, "Although Black people comprise 13% of the general population in the United States and 26% of those living in poverty, they account for more than 40% of the homeless population, suggesting that poverty rates alone do not explain the over-representation."[27]

The research coalesced around five major areas of focus regarding racial inequity and homelessness, including economic mobility, housing, criminal justice, behavioral health, and family stabilization. The disparate experiences of people of color in these realms are all factors that can lead to high rates of homelessness and prolong exits to permanent housing.[28]

In the metropolitan Washington region, several jurisdictions have adopted equity policies to consider how local government decisions may result in a disparate impact on its residents. Examples include the Fairfax County's "One Fairfax" initiative, the Takoma Park City Council's "Racial Equity Considerations" (these statements are part of an overall initiative by the city to address institutionalized racism[29]), and the Arlington County Board's Equity Resolution which passed in September 2019. The Arlington resolution commits the county to gathering data on racial inequality in Arlington, creating a "scorecard" to track progress made, and designing a tool to help officials consider race during policy and budget decisions, among other actions.[30] The Montgomery County Council passed its Racial Equity and Social Justice Act shortly after in October 2019. This bill mandates racial equity training for government employees, requires proposed legislation to include a racial equity impact, and it establishes an Office of Racial Equity and Social Justice. Many CoCs within the metropolitan Washington region have adopted a racial equity focus within their strategic plans and operating principles as well.

These policies are meant to address structural racism and bias created over centuries through deliberate practice (de facto) as well as legal (de jure) decisions that have led to segregated

[26] Center for Social Innovation, *SPARC, Supporting Partnerships for Anti-Racist Communities, Phase One Study Findings, March 2018.* Accessed April 2018. http://center4si.com/wp-content/uploads/2018/03/SPARC-Phase-1-Findings-March-20181.pdf

[27] Ibid.

[28] https://endhomelessness.org/time-change-findings-sparc-study-race-homelessness/

[29] https://takomaparkmd.gov/initiatives/project-directory/racial-equity/

[30] https://www.arlnow.com/2019/09/23/county-board-signs-resolution-committing-county-to-racial-equity/

communities and decisions that disadvantaged persons of color in favor of those who were or are white.

The legacy of these practices has resulted in neighborhoods with residents who are living in impoverished networks -- where not just an individual or family, but the entire network, lacks the economic and social capital necessary to prevent and end homelessness.[31]

In January 2019, HUD released a CoC Racial Equity Analysis Tool that allows communities to visualize who is accessing services and to help identify racial disparities in homelessness assistance. The tool draws on data from the American Community Survey (ACS) 5-year estimates, Block Group estimates, PIT and AHAR data.[32] Information is provided at the individual CoC level as well as state level and provides information similar to what is included in this report.

The CoCs in the metropolitan Washington region recognize that homelessness is not colorblind and are seeking new ways to work together regionally to design complimentary systems that result in preventing fewer people from experiencing homelessness and creating better, more equitable, outcomes for those who do.

Senior Citizens Experiencing Homelessness

There is concern among the region's CoCs that there may be a growing number of senior citizens facing a housing crisis and who are seeking emergency shelter.

Elderly persons experiencing homelessness face unique vulnerabilities due to health or mobility limitations. They may also have more significant health concerns not typically seen in homeless services systems, such as Alzheimer's disease or cancer.[33]

It's important to note that older adults experiencing homelessness already have medical ages that exceed their biological ages. Multiple studies have demonstrated that older adults experiencing homelessness have age-related medical conditions, such as decreased mobility and cognitive decline, on par with housed counterparts who are 20 years older.[34] The average life expectancy of a person experiencing homelessness is estimated between 42 and 52 years, compared to 78 years in the general U.S. population.[35]

National demographic trends suggest that there will be a dramatic increase in the number of people age 65 or older as the Baby Boomer generation reaches retirement age. This means the region's policy makers and service providers may need to adjust their systems' approach to accommodate this growing segment of persons experiencing homelessness. The National Alliance to End Homelessness projected that homelessness among the elderly may ". . .increase by 33 percent from

[31] https://endhomelessness.org/time-change-findings-sparc-study-race-homelessness/

[32] See the Tool online at https://www.hudexchange.info/news/new-coc-racial-equity-analysis-tool/

[33] http://www.seniornavigator.org/article/12426/special-concerns-elderly-who-are-homeless

[34] Brown, R.T., Hemati, K., Riley, E.E., et al. Geriatic conditions in a population-based sample of older homeless adults. (2017). *Gerontologist, 57(4), 757-766.* Doi:10.1093/geront/gnw011. (n/u). As accessed in *The Emerging Crisis of Aged Homelessness: Could Housing Solutions Be Funded by Avoidance of Excess Shelter, Hospital, and Nursing Home Costs?,* https://www.aisp.upenn.edu/aginghomelessness/

[35] National Coalition for the Homeless, *Health Care and Homelessness,* Accessed at https://www.nationalhomeless.org/factsheets/health.html

44,172 at the national level in 2010 to 58,772 in 2020, and more than double between 2010 and 2050, when over 95,000 elderly persons are projected to be homeless."[36]

In the metropolitan Washington region, 17 percent of persons in Households without Children (886 individuals) were over the age of 62, an increase of one percent from 2019, and 137 seniors were unsheltered up from the 70 seniors without children who were counted as unsheltered in 2017. For the fourth year in a row, the region counted seniors age 80 or above experiencing homelessness in more than one CoC. A total of 14 persons over 80 years old were experiencing homelessness on the night of the Point-in-Time count, three of whom were unsheltered. The oldest senior experiencing homelessness was 93 years old. The oldest unsheltered senior person was 83 years old.

Figure 7: Age Distribution of Homeless Single Adults
Source: COG 2020

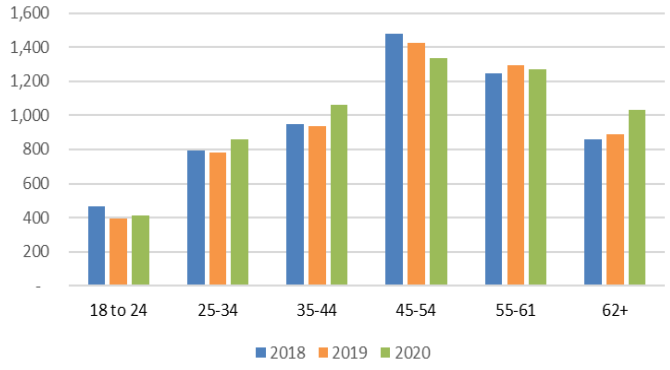
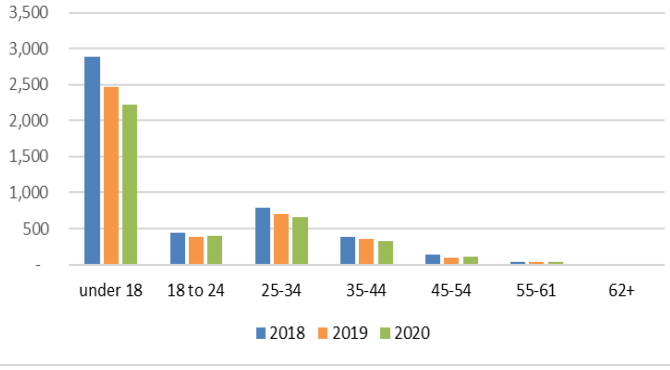


Figure 8: Age Distribution of Homeless Persons in Families
Source: COG 2020



Beginning in 2018, the nine-member CoCs in the metropolitan Washington region provided a more detailed age breakdown in the regional report in order to monitor these data more closely and determine how best to respond to changing demographic needs. Figures 7 and 8 illustrate the range of ages of people experiencing homelessness for the three years in which these data were collected regionally. The number of single adults experiencing homelessness over the age of 62 continues to grow each year, in line with national trends.

The number of facilities which are set aside to house seniors are limited; one example of an organization that serves seniors experiencing homelessness is So Others Might Eat (SOME) in the District of Columbia. It can temporarily house 42 seniors, but the need greatly exceeds the available beds.[37]

Several CoCs in the region have medical respite beds for persons discharged from the hospital who need rest to recover which elderly persons may be able to use. However, many seniors require ongoing medical assistance and lack access to adequate care. The region's CoCs are working to address the unique needs of senior citizens while anticipating a growing need to expand resources to assist this group of residents appropriately and safely in the future.

[36] M William Sermons and Meghan Henry, *Demographics of Homelessness Series: The Rising Elderly Population,* National Alliance to End Homelessness, Homeless Research Institute. Accessed at http://www.endhomelessness.org/page/-/files/2698_file_Aging_Report.pdf

[37] Zelinksy, Alex., "Solving the Growing Health Needs of America's Elderly Homeless", Accessed at https://thinkprogress.org/solving-the-growing-health-needs-of-americas-elderly-homeless-3814a6eca60d

HOMELESSNESS AND THE WORKING POOR

Employment, or an adequate and reliable source of income, is crucial to a household's ability to either afford a place to live or move out of homelessness. According to the U.S. Department of Labor's Bureau of Labor Statistics, the metropolitan Washington region's preliminary unemployment rate for February 2020 was 2.9 percent, compared to 3.7 percent for the nation. The region's unemployment rate decreased slightly from February 2019.[38]

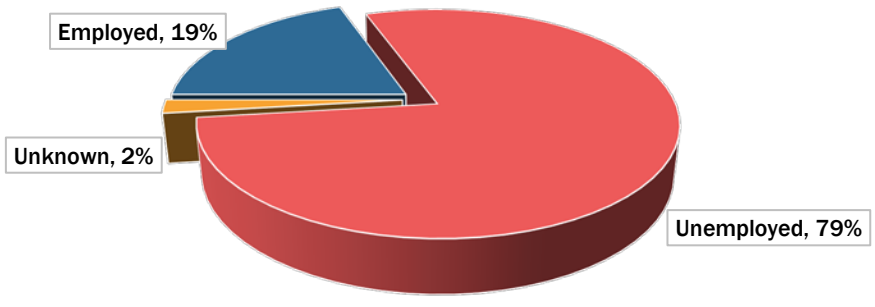
However, this was prior to the economic shock that began in mid-March due to the COVID-19 pandemic; local regional forecasts suggest that the unemployment rate could be as high as 10 percent in April 2020 in the metropolitan Washington region[39] and as high as 14.7 percent nationally.

The deep and sudden economic crisis compounds pre-existing challenges for those without a high school diploma, bachelors or advanced degree who seek employment opportunities.

Among all adults experiencing homelessness on the night of January 22, 2020 – both single adults and adults in families -- 22 percent were employed; employment status could not be determined for two percent. The rates of employment vary by household type; Figures 9 through 11 illustrate the employment status (including full- and part-time employment) for homeless single adults and homeless adults in families throughout the region. Also included are percentages for people experiencing homelessness for whom employment status was unknown.

Similarly, approximately 19 percent of single adults experiencing homelessness were employed, which remains essentially unchanged since 2016 (Figure 9). The lower rate of employment for homeless single adults (compared to adults in families) is attributed to higher incidences of conditions that make securing and maintaining employment difficult, such as physical disabilities, and multiple behavioral and chronic health issues, including substance abuse and mental illness.

Figure 9: Employment Status of Single Homeless Adults
Source: COG 2020



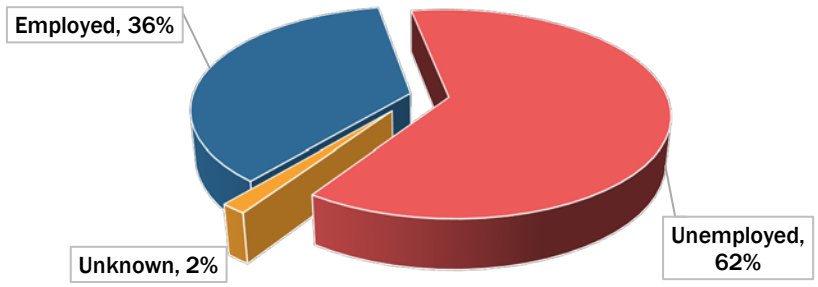
[38] https://www.bls.gov/web/metro/laummtrk.htm

[39] Sources: US DOES (NSA); The Stephen Fuller Institute at the Schar School, George Mason University; from presentation by Jeannette Chapman on May 20, 2020.

Data from the 2020 enumeration suggests that 36 percent of all homeless adults in families with children were employed (Figure 10), but the picture varies significantly by jurisdiction.

In Loudoun County, for example, 95 percent of these adults were employed, compared to 24 percent in Arlington County (Figure 10). Approximately 62 percent of adults in these families region-wide were unemployed and employment status is unknown for two percent.

Figure 10: Employment Status of Adults in Homeless Families
Source: COG 2020



Although the total number is small, 10 children in homeless families were employed on the night of the enumeration. None of the 13 unaccompanied minors in the region's Households with Only Children were employed on the day of the PIT. This is attributed to the youths' age, levels of employability, and housing status.

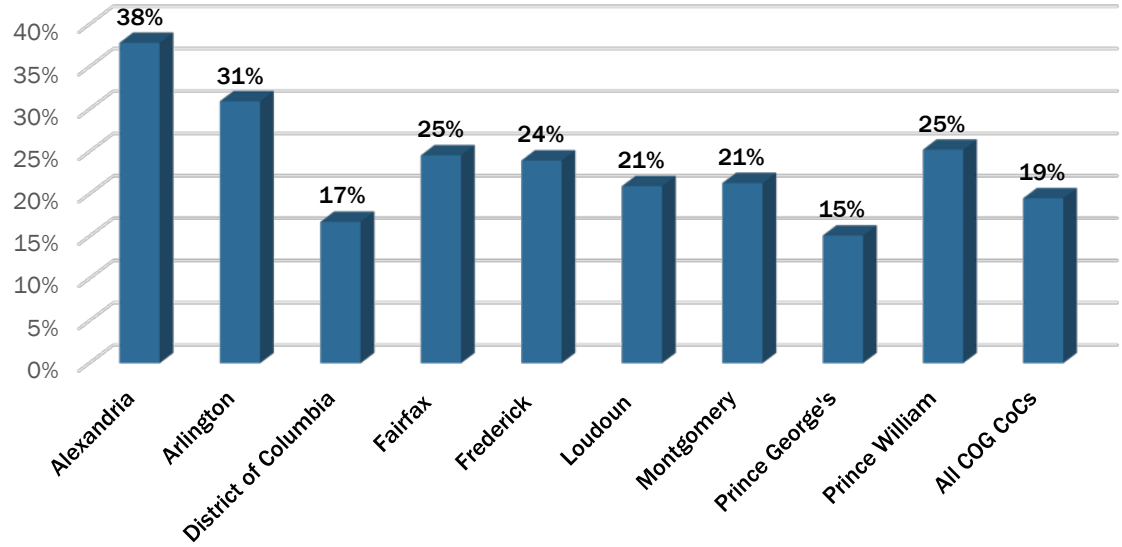
While metropolitan Washington has traditionally enjoyed a lower unemployment rate compared to other national metropolitan areas, it remains one of the country's most expensive areas in which to live. In a region where housing prices are rising faster than wages, the lowest income workers face tremendous pressures. The reality is stark for the region's homeless households as evidenced in the following charts.

Figure 11 (following page) shows that, in eight of nine of the region's participating CoCs, less than 30 percent of single homeless adults were employed on the night of the annual enumeration. This trend remains essentially unchanged from the past five years, although rates have varied for individual jurisdictions. For example, the city of Alexandria's single adult employment percentage increased from 28 percent in 2019 to 38 percent in 2020. The lower observed rates of employed single adults experiencing homelessness is in part due to the high rate (59 percent) of persons who reported having a disability, serious mental illness, or chronic health condition, which may prevent employment.

In contrast, in seven of nine local jurisdictions, more than 40 percent of adults in family households were employed (Figure 12). Several CoCs experienced gains since the previous year's enumeration. Loudoun County (increase from 62 percent to 95 percent employed), Prince George's County (from

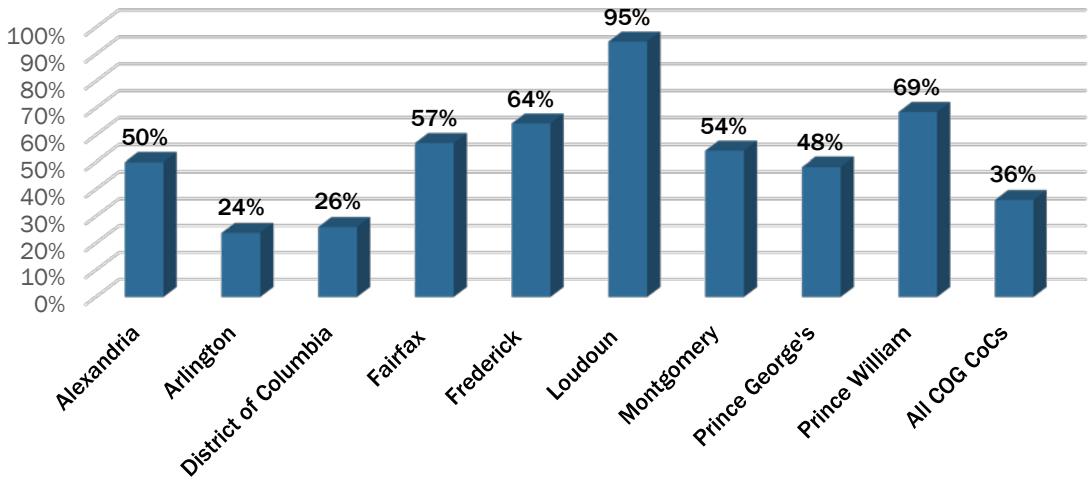
39 percent to 48 percent) and Fairfax County, which recorded an increase in the percentage of adults in families employed from 52 percent in 2019 to 57 percent in 2020.

Figure 11: Employed Single Homeless Adults
Source: COG 2020



As a region, the percentage of employed adults in families remained just slightly less than 2019 levels (36 percent in 2020 versus 38 percent the previous year). Improving the employment picture for some of the region's most vulnerable residents remains challenging, particularly given the regional economy during and post-pandemic, but CoCs will continue efforts to increase residents' earned income as a critical component for long-term housing stability. The availability and safety of living wage jobs remains a key obstacle to ending homelessness, even for those individuals who are already employed.

Figure 12: Employed Adults in Homeless Families
Source: COG 2020



Income

While a portion of the region's homeless population reports receiving monthly income, many people experiencing homelessness do not receive any monthly income. In 2020, 70 percent of adults in families reported having income, but only 53 percent of single adults reported income.
Over half (56 percent) of all homeless adults report having some form of monthly income. Among single adults experiencing homelessness, 34 percent reported that employment wages and salaries were their primary source of income (see Figure 13). The next largest sources of primary income following employment were disability (such as Supplemental Security Income), followed by public assistance, retirement (such as Social Security), and last, other sources of income.

Among homeless adults in families, 42 percent reported the primary source of income being from employment. However, a smaller proportion of families (38 percent) reported public assistance was their primary source of income. Public assistance supports a much larger number of families than single individuals experiencing homelessness.

Figure 13 illustrates the primary source of income for the 3,147 single adults experiencing homelessness who provided this information; Figure 14 represents the responses from 1,492 adults in homeless families.

Figure 13: Source of Income for Homeless Single Adults
Source: COG 2020

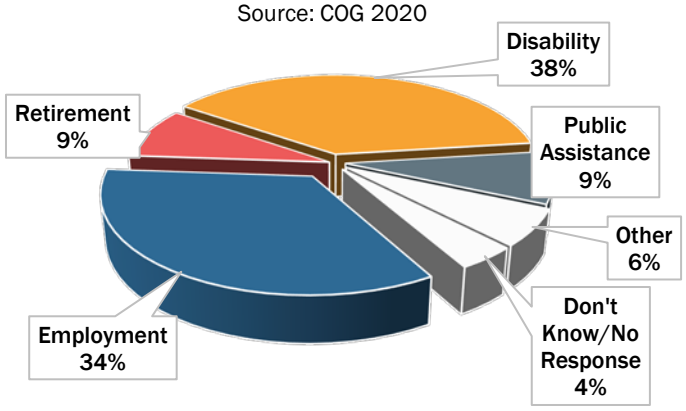
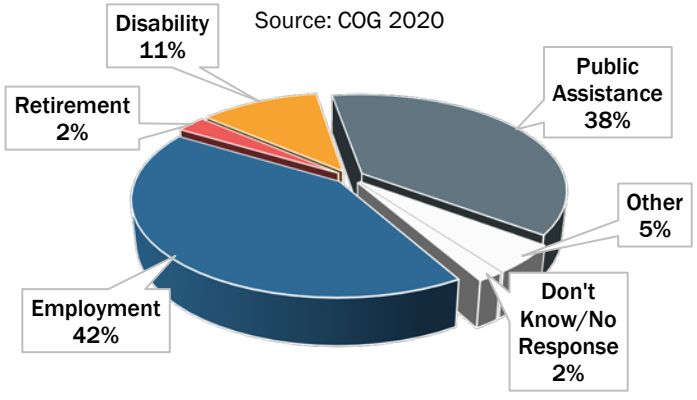


Figure 14: Source of Income for Homeless Adults in Families
Source: COG 2020



UNSHELTERED HOMELESSNESS

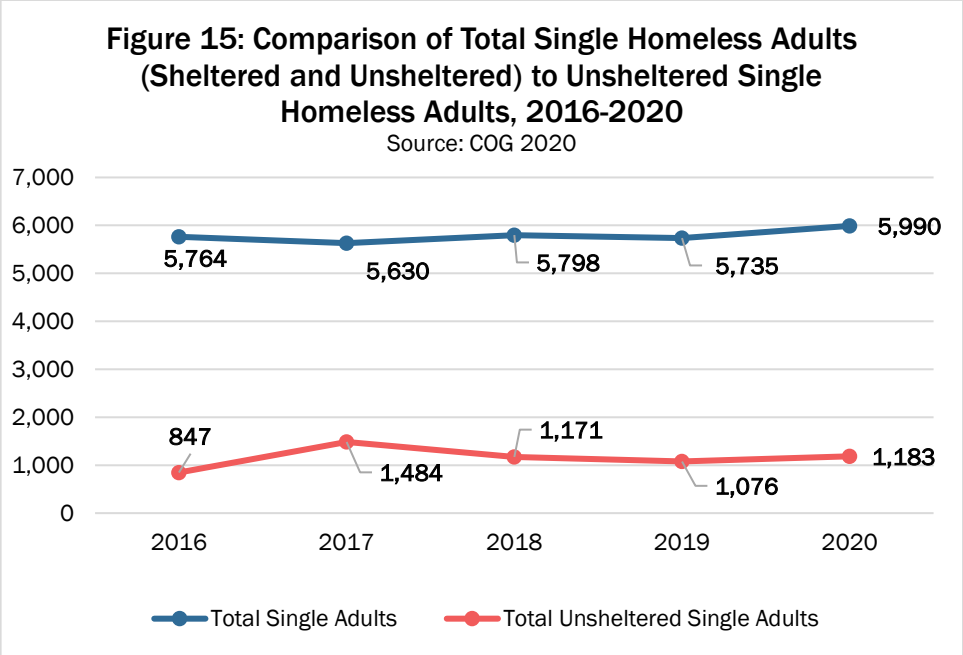
On January 22nd, outreach workers and volunteers for the region's Continua of Care surveyed their communities to count the area's unsheltered persons experiencing homelessness. Outreach workers counted people living on the streets, in alleys, under bridges, in local parks, in camp sites, and in other places frequented by people experiencing homelessness. According to the 2020 count, 1,188 persons (approximately 12 percent of the region's 9,763 persons experiencing homelessness on the night of the PIT) were unsheltered. Of these, 1,183 were single adults, one family household of an adult and three children, and one person was a child from a Households with Only Children. The 1,183 unsheltered single persons counted is higher than the number of unsheltered adults in Households without Children counted in 2019 (107 additional persons counted, or a ten percent increase). Overall, regional homelessness among unsheltered single adults increased 40 percent (336 additional persons) during the period between 2016 and 2020.

The fluctuations in the unsheltered count may be attributed to a variety of factors. Typically, the number of individuals counted residing in areas unfit for human habitation can depend on weather conditions, the number of surveyors employed for the count, and methodology (complete coverage or sampling.) A number of CoCs in the region have been engaged in vigorous efforts to house chronically homeless individuals, which may have attributed to decreases recorded in some jurisdictions. In Prince William County, the increase noted in unsheltered homelessness between the 2019 and 2020 counts may be attributed in part to its efforts to strengthen the CoC's relationships with known community-based street outreach providers. Additionally, the CoC has increased street outreach resources and has been providing training opportunities to providers that may have allowed survey volunteers to identify more unsheltered persons experiencing homelessness on the night of the count.



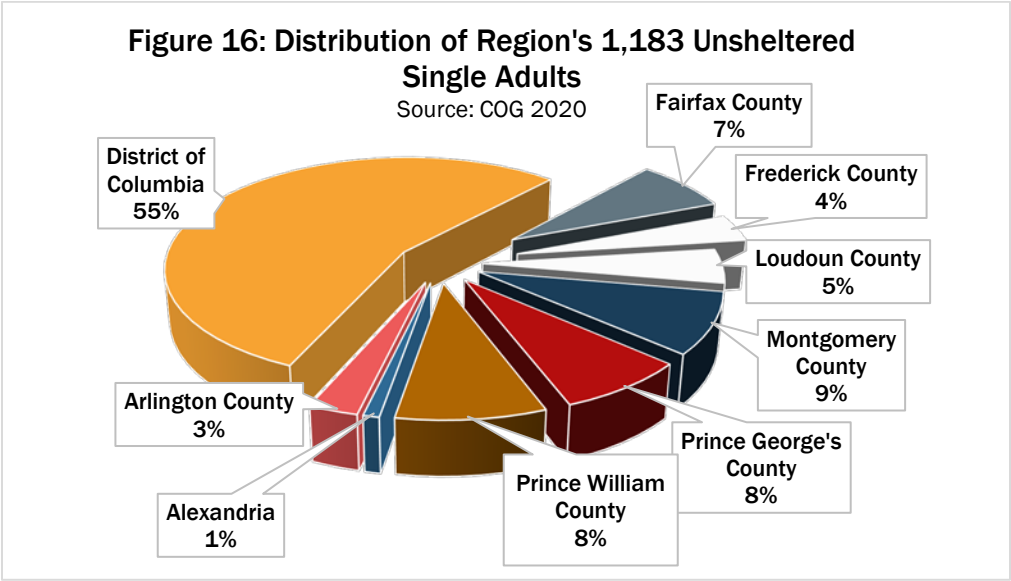
An outreach worker interviews a person experiencing homelessness in Arlington, Virginia, on January 22, 2020. (Arlington County Department of Human Services).

The variation in the unsheltered count by year makes discernment of a real trend difficult. This is represented graphically in Figure 15 (following page). While the prior four counts reflect a slight upward trend in the total number of homeless single adults, the count of single adults who were unsheltered on the night of the enumeration does not precisely correspond.



Distribution of the Region's Unsheltered Homeless Single Adults

Where are people experiencing homelessness outside the shelter system in the metropolitan Washington region? Figure 16 indicates where survey volunteers interviewed persons experiencing homelessness in places not meant for human habitation, such as streets, parks, alleys, abandoned buildings, stairways, and rural campsites. The District of Columbia accounts for 55 percent of the region's unsheltered homeless single adults. This figure represents a slight decrease from 2019 and is still below 60 percent of the region's total that was recorded in 2017.



Four of nine CoCs recorded reductions in their unsheltered counts from 2019 to 2020, while five noted increases. Overall, the region counted ten percent more unsheltered single adults in 2020 than in 2019. The largest reduction during this one-year period was recorded in Frederick County (84fewer persons); the largest increase during the same period was in Prince William County (an increase of 65 unsheltered single adults counted).

Comparison of Unsheltered Homeless Single Adults by Jurisdiction

Reviewing the unsheltered count for a longer period than one year provides a different perspective of the PIT count results, although a pattern in the findings is less clear. During the counts from 2016 to 2020, three of nine jurisdictions recorded reductions in their unsheltered counts.

Frederick County recorded the greatest decline in its rate (65 percent) or a difference of 84 fewer people counted in 2020 than in 2016. The City of Alexandria experienced a smaller rate of reduction (eight percent) and counted one less unsheltered individual in 2020 than in 2016. Prince George's County counted a similar number (six fewer unsheltered persons) representing a six percent decrease between 2020 and 2016. The District of Columbia recorded the greatest increase in the number of unsheltered single adults experiencing homelessness (334), followed by Loudoun County (38 more individuals) and Prince William County (19 more individuals). Overall, the region's percentage of unsheltered homeless single adults increased by 40 percent from 2016 to 2020. Table 8 presents the number and percentage of single adults experiencing homelessness by CoC from 2016 to 2020. Table 9 represents the percentage of each individual jurisdiction's literally homeless population that was unsheltered during the same period.

TABLE 8: Comparison of Unsheltered Single Adults By Jurisdiction, 2016 – 2020

Jurisdiction	2016	2017	2018	2019	2020	Change in Number of Persons 2016 – 2020	Percent Change 2016 – 2020
City of Alexandria	12	18	15	10	11	-1	-8%
Arlington County	19	33	35	36	34	15	79%
District of Columbia	318	897	599	607	652	334	105%
Fairfax County	74	105	86	89	88	14	19%
Frederick County	129	103	84	78	45	-84	-65%
Loudoun County	19	16	24	71	57	38	200%
Montgomery County	96	126	133	75	103	7	7%
Prince George's County	97	73	85	73	91	-6	-6%
Prince William County	83	113	110	37	102	19	23%
TOTAL	**847**	**1,484**	**1,171**	**1,076**	**1,183**	**336**	**40%**

Source: COG 2020

It is important to note that although the majority of individuals who are unsheltered are single adults, there was one family (one adult and three children) and one child (unaccompanied minor) counted as unsheltered on the night of the 2020 Point-in-Time enumeration.

TABLE 9: Unsheltered Single Adults As A Percentage of Total Homeless By Jurisdiction, 2016 - 2020

Jurisdiction	2016	2017	2018	2019	2020
City of Alexandria	5%	7%	7%	5%	5%
Arlington County	11%	16%	16%	17%	17%
District of Columbia	4%	9%	9%	9%	10%
Fairfax County	7%	9%	9%	9%	8%
Frederick County	37%	27%	27%	27%	15%
Loudoun County	14%	18%	18%	42%	32%
Montgomery County	10%	16%	16%	12%	15%
Prince George's County	18%	18%	18%	16%	20%
Prince William County	21%	29%	29%	13%	31%
TOTAL	**7%**	**13%**	**11%**	**11%**	**12%**

Source: COG 2020



Volunteers for the unsheltered portion of the PIT count gather in Arlington, Virginia on January 22, 2020. (Arlington County Department of Human Services)

CHRONIC HOMELESSNESS

The nine CoCs in the region are working to reduce the number of residents who are considered chronically homeless. In 2015, HUD updated its definition of an individual experiencing chronic homelessness as an unaccompanied adult or youth head of household with a disabling condition who has either been continuously homeless for a year or more or has had at least four episodes of homelessness in the past three years; the episodes of homelessness must cumulatively equal at least 12 months. The definition of a chronically homeless family includes an adult member of a family who has a disabling condition and meets the same time period requirements as an unaccompanied adult. Persons who are not the head of the household under the age of 18 are not counted as chronically homeless individuals in this scenario, nor are other adults in the family who do not meet the HUD definition. However, all members of the family household are counted as persons in a chronically homeless family. Also, as of 2015, persons under the age of 18 who are heads of household, including unaccompanied youth and parenting youth, may be counted as chronically homeless.

Numerous studies[40] have found that housing chronically homeless individuals helps these individuals lead a more stable and independent life, can achieve significant reductions in the overall numbers of people experiencing homelessness and may help communities reduce public expenditures, particularly for the most frequent users of medical, judicial, and other emergency services. For example, one study, completed by the University of California Irvine in June 2017[41], found that the costs incurred by a chronically homeless person can be cut in half (from an average of $35,500 per year) when a chronically homeless person is provided with permanent supportive housing. However, it is worth noting that the cost of homelessness declines when someone experiencing homelessness is housed, whether someone has experienced multiple episodes of homelessness or not.

TABLE 10: Chronically Homeless Single Adults By Jurisdiction, 2016 - 2020

Jurisdiction	2016	2017	2018	2019	2020	Percent Change 2016 - 2020
City of Alexandria	47	43	57	38	15	**-68%**
Arlington County	41	63	57	74	20	**-51%**
District of Columbia	1,501	1,470	1,586	1,374	1,337	**-11%**
Fairfax County	146	150	171	213	174	**19%**
Frederick County	133	72	39	37	183	**38%**
Loudoun County	16	15	22	37	21	**31%**
Montgomery County	145	158	124	11	10	**-93%**
Prince George's County	20	28	26	12	15	**-25%**
Prince William County	47	76	31	19	53	**13%**
All COG CoCs	**2,096**	**2,214**	**2,113**	**1,815**	**1,828**	**-13%**

[40] http://www.endhomelessness.org/library/entry/supportive-housing-is-cost-effective and http://www.upenn.edu/pennnews/news/housing-homeless-mentally-ill-pays-itself-according-university-pennsylvania

[41] https://www.unitedwayoc.org/wp-content/uploads/2017/08/united-way-cost-study-homelessness-2017-report.pdf

The more important benefit to housing chronically homeless persons using a Housing First approach, however, may be in achieving an improved quality of life rather than basing the value of this approach solely from a cost-savings perspective. This may have the unintended effect of implicitly devaluing the lives of people experiencing homelessness.[42]

Chronically Homeless Single Adults

Nineteen percent of the region's literally homeless population were chronically homeless single adults on the night of the PIT count in 2020. This percentage remains unchanged from 2019. Among all single adults experiencing homelessness, however, the incidence of being chronically homeless is much higher -- 32 percent.



A person sleeps unsheltered in Arlington County, Virginia on January 22, 2020. (Arlington County Department of Human Services.)

Six of the nine jurisdictions experienced decreases in their chronically homeless single counts since 2019 and five of nine noted reductions between 2016 and 2020. The two jurisdictions with the greatest reductions in total persons counted as chronically homeless single adults since 2019 are Arlington County (54 fewer persons) and Fairfax County (39 fewer persons). This represents a 73 percent decrease in the number of chronically homeless single adults in Arlington County and an 18 percent reduction in Fairfax County since the previous year. During the years between the 2016 and 2020 PIT counts, the District of Columbia and Montgomery County had the greatest reduction in the numbers of people counted as chronically homeless. The District of Columbia counted 164 fewer chronically homeless persons and Montgomery County counted 135 fewer individuals who were chronically homeless.

Three jurisdictions experienced an increase in the number of chronically homeless single adults from 2019; Frederick County had the largest increase with 146 additional persons counted, followed by Prince William County (34 additional chronically homeless individuals counted). The region's CoCs attribute the increase in the number of residents counted as chronically homeless from 2019 to 2020 primarily to a lack of affordable housing options, particularly permanent supportive housing, to enable more residents to exit homelessness and remain stably housed. Another contributing factor to this year's rise in three CoCs is that although permanent supportive housing is prioritized for persons considered chronically homeless, those who are not chronically homeless or who don't have access to this resource may become chronically homeless as they wait for a permanent housing option to become available. It is important to note that PIT data is self-reported, and persons who may disclose being chronically homeless, upon further investigation, may not meet HUD's definition.

[42] Stefan G. Kertesz, M.D., Travis P. Baggett, M.D., M.P.H., James J. O'Connell, M.D., David S. Buck, M.D., M.P.H., and Margot B. Kushel, M.D., "Permanent Supportive Housing for Homeless People – Reframing the Debate" , New England Journal of Medicine 2016; 375:2115-2117December 1, 2016DOI: 10.1056/NEJMp1608326. Accessed April 14, 2017 at http://www.nejm.org/doi/full/10.1056/NEJMp1608326#t=article

Overall, the region has worked successfully to decrease the number of chronically homeless single adults since 2016. The regional 13 percent reduction reflects the region's efforts to permanently house residents who may be among the most vulnerable due to having a disabling condition and experiencing the trauma of multiple episodes of homelessness.

TABLE 10: Chronically Homeless Single Adults By Jurisdiction, 2016 - 2020

Jurisdiction	2016	2017	2018	2019	2020	Percent Change 2016 - 2020
City of Alexandria	47	43	57	38	15	**-68%**
Arlington County	41	63	57	74	20	**-51%**
District of Columbia	1,501	1,470	1,586	1,374	1,337	**-11%**
Fairfax County	146	150	171	213	174	**19%**
Frederick County	133	72	39	37	183	**38%**
Loudoun County	16	15	22	37	21	**31%**
Montgomery County	145	158	124	11	10	**-93%**
Prince George's County	20	28	26	12	15	**-25%**
Prince William County	47	76	31	19	53	**13%**
All COG CoCs	**2,096**	**2,214**	**2,113**	**1,815**	**1,828**	**-13%**

One resource that has proven successful housing chronically homeless single adults is HUD-VASH vouchers (U.S. Department of Housing and Urban Development and Veterans Administration Supportive Housing). These vouchers provide rental support for veterans. An important region-wide strategy is the use of a coordinated entry system and a by-name list to prioritize housing for the most vulnerable residents. Several of the region's CoCs also attribute success in reducing the number of persons experiencing chronic homelessness during the longer period between 2016 and 2020 to participation in several successive nation-wide campaigns, such as Built for Zero.[43] Montgomery County created its own campaign, called Inside/Not Outside in its efforts to end the experience of chronic homelessness in the county.[44] Those efforts continued since the campaign's inception in 2018 and contributed to the County's impressive 93 percent reduction in the number of individuals counted as chronically homeless between the 2016 and 2020 enumerations.

Table 11 (following page) provides the sheltered status breakdown of the chronically homeless single adults counted as part of the 2020 Point-In-Time Enumeration. Most chronically homeless residents suffer from severe physical health and mental health-related impediments. Health impediments may include physical disabilities and substance use disorders. The problem is more acute when individuals suffer from multiple challenges. To provide appropriate services for a person experiencing chronic homelessness, jurisdictions and service providers must ensure that individuals are adequately screened and diagnosed. Additionally, in many cases, people need medical assistance and/or other regimented methods of care and counseling. People may not immediately respond to the care they receive, or their care may be required for the remainder of their lives. In such instances, proper case management services are essential.

[43] https://www.community.solutions/what-we-do/built-for-zero

[44] https://www.montgomerycountymd.gov/homelessness/InsideNotOutside.html

TABLE 11: 2020 Shelter Status Of Chronically Homeless Single Adults				
Jurisdiction	Total Chronically Homeless Single Adults	Number of Sheltered* Chronically Homeless Single Adults	Number of Unsheltered Chronically Homeless Single Adults	Percentage of Chronically Homeless Single Adults Who Are Unsheltered
City of Alexandria	15	13	2	13%
Arlington County	20	6	14	70%
District of Columbia	1,337	952	385	29%
Fairfax County	174	115	59	34%
Frederick County	183	144	39	21%
Loudoun County	21	10	11	52%
Montgomery County	10	10	0	0%
Prince George's County	15	15	0	0%
Prince William County	53	25	28	53%
All COG CoCs	**1,828**	**1,290**	**538**	**29%**

*Refers to chronically homeless persons residing in Emergency, Winter Shelters and Safe Havens and excludes Transitional Housing. Source: COG 2020

Chronically Homeless Families

Most chronically homeless families across the region reside in emergency and/or winter shelters. There were 47 chronically homeless families (or 149 total persons in families) counted in the region in 2020, a decrease from the 111 families (355 adults and children) counted in chronically homeless families in 2019. In 2020, four CoCs (Arlington County, Montgomery County, Prince William County and the City of Alexandria) did not count any chronically homeless families. One chronically homeless family was unsheltered on January 22, 2020.



New short-term family shelter facilities, such as the one pictured on the left in Washington DC, has contributed to reductions in the number of families experiencing homelessness in the District. (District of Columbia Department of Human Services.)

SUBPOPULATIONS

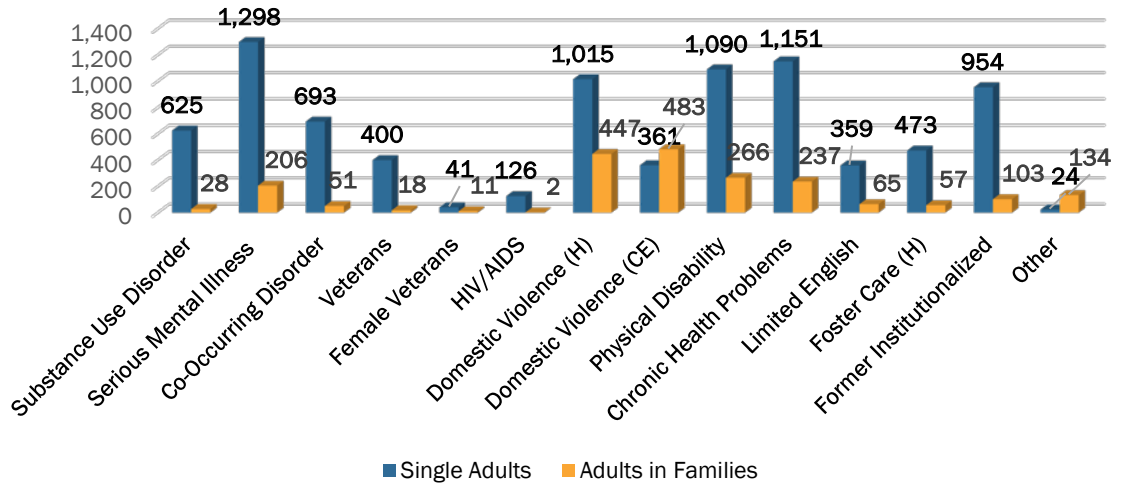
According to the 2020 enumeration, a number of the region's residents experiencing homelessness suffer from chronic health conditions, physical disabilities, substance use disorders, severe mental illness, or were formerly institutionalized and discharged directly into homelessness. The high incidence of substance use disorders, severe mental illness, or co-occurring disorders among persons experiencing homelessness is similar among all CoCs in the region. Nationally, conservative estimates say 25 percent of people experiencing homelessness suffers from some form of severe mental illness[45], compared to only four percent who suffer from serious mental illness in the general population overall.[46]

Further, the experience of homelessness can cause or exacerbate poor mental health -- the stress of being without housing can contribute to anxiety, depression, sleeplessness, or lead to substance abuse.[47] This was evident in the 2020 enumeration, where the most prevalent characteristic reported among Households without Children was having a serious mental illness. The next most reported characteristics for single adults experiencing homelessness were having a chronic health problem or having a physical disability. Other past experiences that were shared were having a history of domestic violence trauma, followed by being formerly institutionalized.

Among families, the most defining characteristic is an incidence of domestic violence, either as a contributing factor to the current episode of homelessness on the night of the enumeration or having a history of domestic violence. Twenty-nine percent of the adults in families who responded in the subpopulation categories indicated having experienced domestic violence in the past, and over a third of respondents (31 percent), reported their current episode of homelessness was related to domestic violence.

Figure 17: The Region's Homeless Subpopulations

Source: COG 2020



Note: These subgroups are not mutually exclusive. It is possible for homeless adults to be counted in more than one category.

45 http://www.treatmentadvocacycenter.org/fixing-the-system/features-and-news/3965-research-weekly-homelessness-increases-among-individuals-with-serious-mental-illness-

46http://www.nationalhomeless.org/publications/facts/Mental_Illness.pdf

47 http://homelesshub.ca/about-homelessness/topics/mental-health

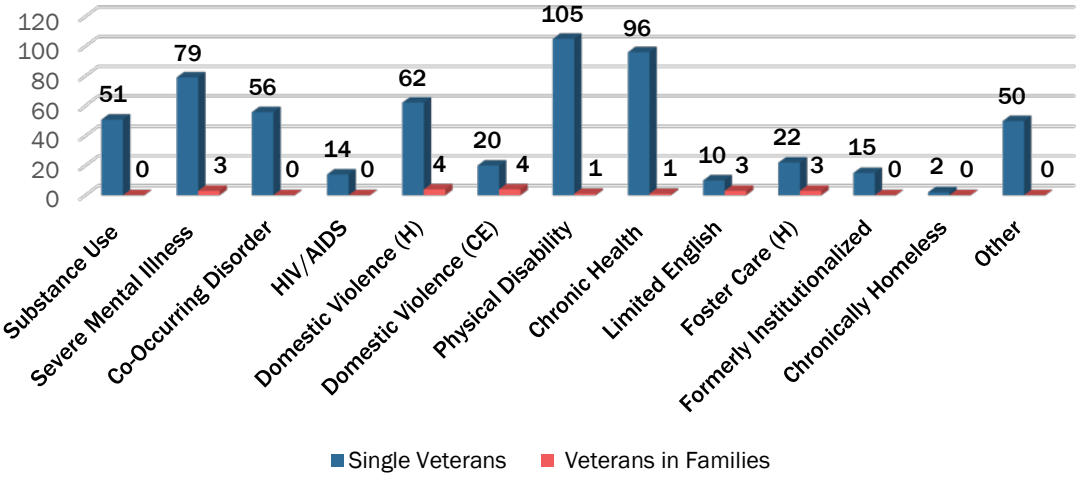
Beginning with the 2013 enumeration, HUD requested data on persons who had a *history* of domestic violence. In order to maintain base data for trend comparison, both elements are collected and are shown in the subpopulations for Figure 18 (previous page). Regionally, the number of single adults who were homeless as a result of a current episode of domestic violence (DV-CE) decreased in 2020 to 361 persons, 104 fewer people than in 2019. This may be due in part to increased capacity in some CoCs to serve victims fleeing domestic violence. However, the number of single adults (1,015) who were identified as having a history of domestic violence at any time (DV-H) is higher (17 percent) than the number of single adults whose current episode of homelessness was caused by domestic violence (6 percent).

Homeless Veterans

Veterans are another subset of the homeless population tracked by HUD and the U.S. Department of Veterans Affairs (VA). This is the seventh year that the region's CoCs collected separate data on single adult veterans experiencing homelessness as well as homeless veterans in families to better understand this subpopulation.

Nationally, as of 2019 (the year for which the most recent data are available), veterans represent seven percent of the total number of persons experiencing homelessness.[48] In contrast, in the metropolitan Washington region, four percent of veterans were experiencing homelessness as of the PIT count in 2020, which remains unchanged since 2016. Of the total self-reported veterans experiencing homelessness in the 2020 enumeration, 52 were women (12 percent). Figure 18 (previous page) graphically represents this homeless population; veterans are broken out separately as individuals in Households without Children as well as Households with Adults and Children. Female veterans are a subset of the "All Veterans" category. Homeless veterans, like other persons experiencing homelessness, have a high incidence of being formerly institutionalized, have substance use disorders and severe mental illness, or co-occurring disorders, as shown in Figure 19. However, veterans in Households without Children were more likely than others to have chronic health problems or a physical disability.

Figure 18: The Region's Veteran Subpopulations
Source: COG 2020



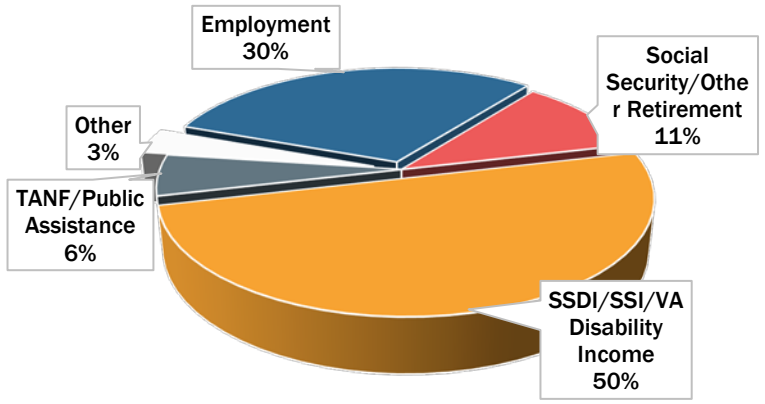
[48] As of the 2019 Point-in-Time Count. See https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/

For those single veterans who reported having income in 2020, 30 percent reported that employment was the primary source of income. The likelihood of having a disability is reflected in the veteran populations' source of income; fully 50 percent of veterans with income noted SSVI/SSI/VA disability and retirement as their primary source of income, as shown in Figure 20.

The majority of homeless veterans who reported their race selected Black or African American (77 percent of single adults and 83 percent of adults in families). It is important to note that the total numbers of adult veterans in families is small (18 persons) compared to the total number of single veterans (393) who reported their racial identity. White veterans made up the next largest group, with 18 percent. This remains essentially unchanged since 2018. See Figure 21 on the following page.

Figure 19: Homeless Veteran Single Adults: Source of Income

Source: COG 2020

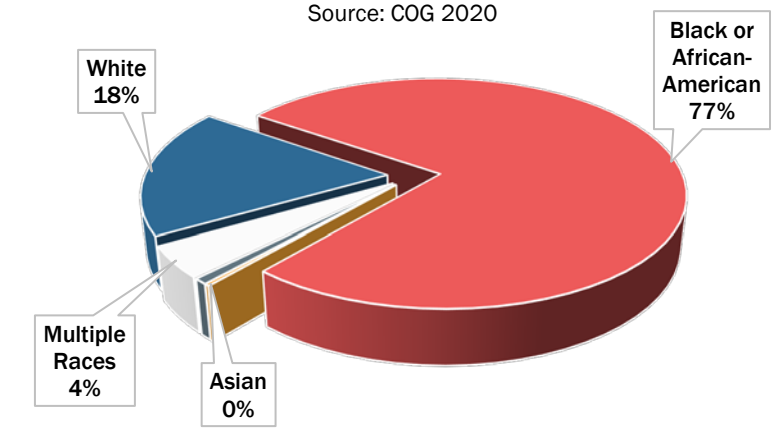


HUD and the VA, through the VA's Supportive Housing program (VASH), have focused efforts to increase the supply of housing choice vouchers to put more homeless veterans into permanent housing.

Key strategies used throughout the region in reducing the number of veterans experiencing homelessness include strong eviction prevention services, diversion services, street outreach and implementation of a Housing First approach.

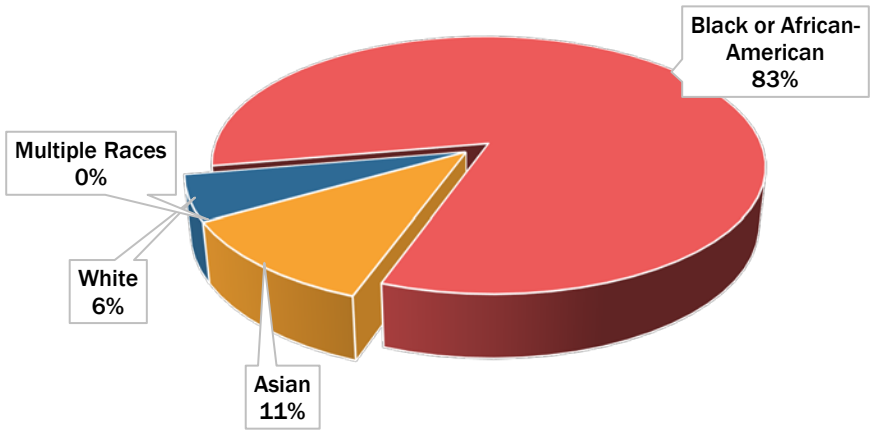
Figure 20: Homeless Single Adult Veterans (Race)

Source: COG 2020



Housing First, a successful and well-documented national best practice, focuses on placing residents experiencing homelessness in housing first and receiving wrap-around social services to maintain housing stability rather than requiring behavioral health changes to be eligible for housing assistance.

Figure 21: Homeless Adult Veterans in Families (Race)
Source: COG 2019



Two of nine CoCs reported small reductions in the number of veterans experiencing homelessness from 2019 to 2020. For example, Fairfax County recorded nine fewer homeless veterans in 2020 than 2019, followed by Arlington County with seven fewer veterans. Those CoCs which did not record reductions measured small increases in the single digits. Prince William County had the greatest one-year increase in the number of veterans experiencing homelessness (six persons) and the District of Columbia counted five additional veterans in 2020 than in 2019.

However, the longer-term trend as shown in Table 12 (following page) demonstrates that during the period of 2016 to 2020, six of nine CoCs reduced their incidence of veterans experiencing homelessness and the region reduced the number of veterans experiencing homelessness by 14 percent. Coordinated regional efforts from the local to state and federal level at the U.S. Departments of Housing and Urban Development (HUD) and Veterans Affairs (VA) have had a positive impact on reducing the number of veterans experiencing homelessness in our region since 2016. Key elements of this success include the increased availability of permanent housing resources (such as SSVF and VASH vouchers), tied to the use of coordinated entry to ensure that available resources are used efficiently. The Continua of Care[49] (CoCs) in the metropolitan Washington region will continue to implement proven strategies to end the experience of homelessness for those who have served in the armed forces by placing veterans in permanent housing.

[49] According to HUD, a Continuum of Care is "a community plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximize self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness." Definition accessed at https://endhomelessness.org/resource/what-is-a-continuum-of-care/

TABLE 12: Homeless Veterans By Jurisdiction, 2016 - 2020							
Jurisdiction	**2016**	**2017**	**2018**	**2019**	**2020**	**Change in Persons 2016 - 2020**	**Percent Change 2016 - 2020**
City of Alexandria	5	6	8	7	9	4	80%
Arlington County	5	10	8	10	3	-2	-40%
District of Columbia	350	285	306	297	302	-48	-14%
Fairfax County	37	34	33	42	33	-4	-11%
Frederick County	12	10	9	4	6	-6	-50%
Loudoun County	4	6	6	4	7	3	75%
Montgomery County	17	14	18	13	14	-3	-18%
Prince George's County	26	21	29	28	28	2	8%
Prince William County	28	22	24	10	16	-12	-43%
TOTAL	**484**	**408**	**441**	**415**	**418**	**-66**	**-14%**

Source: COG 2020

Transition Age Youth

Beginning in 2015, as required by HUD, the region's CoCs collected demographic information on persons experiencing homelessness who are considered young adults, or Transition Age Youth (TAY). Transition Age Youth are between the ages of 18 and 24 and face a number of unique challenges on their path to a successful adulthood, including finding employment with health benefits, as they may have become ineligible for Medicaid or SCHIP (State Children's Health Insurance Program). Youth who may be "aging out" of foster care (reaching age 18 without returning to their birth families or being adopted) or leaving juvenile detention facilities face significant challenges in finding affordable housing and employment as well. [50]

At the national level, every year, approximately 24,000 youth age out of foster care and are expected to transition to independent living. Of those youths aging out, approximately one in five will experience homelessness.[51]

In 2020, the region counted 702 persons who were between the ages of 18 and 24, representing seven percent of the total literally homeless population and 17 percent of the total persons in homeless families. Similar to 2019, persons who fit this age category were more likely to be single adults than adults in families; 56 percent of all homeless adults in TAY households were single young adults. Similar to other homeless families, 53 percent of persons in homeless TAY families were children.

[50] http://youth.gov/youth-topics/transition-age-youth

[51] https://www.nfyi.org/51-useful-aging-out-of-foster-care-statistics-social-race-media/

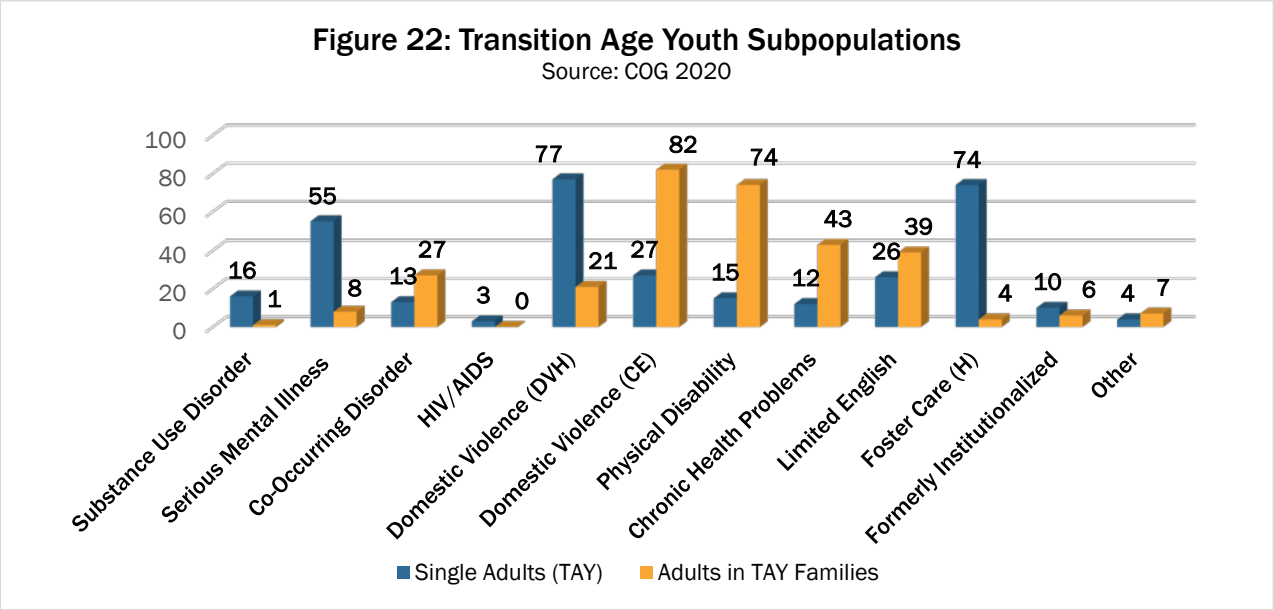
TABLE 13: Homeless Transition Age Youth (TAY) By Jurisdiction: 2020			
Jurisdiction	Single Adults (TAY)	Adults in TAY Families	Total
City of Alexandria	2	6	8
Arlington County	5	2	7
District of Columbia	243	242	485
Fairfax County	47	32	79
Frederick County	12	0	12
Loudoun County	20	2	22
Montgomery County	31	9	40
Prince George's County	22	10	32
Prince William County	11	6	17
TOTAL	**393**	**309**	**702**

Source: COG 2020

TABLE 14: Homeless Single Transition Age Youth (TAY) By Jurisdiction: 2016 -2020						
Jurisdiction	2016	2017	2018	2019	2020	Change in Persons 2016 - 2020
City of Alexandria	8	4	7	9	8	0
Arlington County	6	3	2	10	7	1
District of Columbia	201	223	309	489	485	284
Fairfax County	43	46	51	70	79	36
Frederick County	16	21	19	20	12	-4
Loudoun County	4	10	7	20	22	18
Montgomery County	24	32	29	22	40	16
Prince George's County	22	20	21	31	32	10
Prince William County	11	16	18	7	17	6
TOTAL	**335**	**375**	**463**	**678**	**702**	**367**

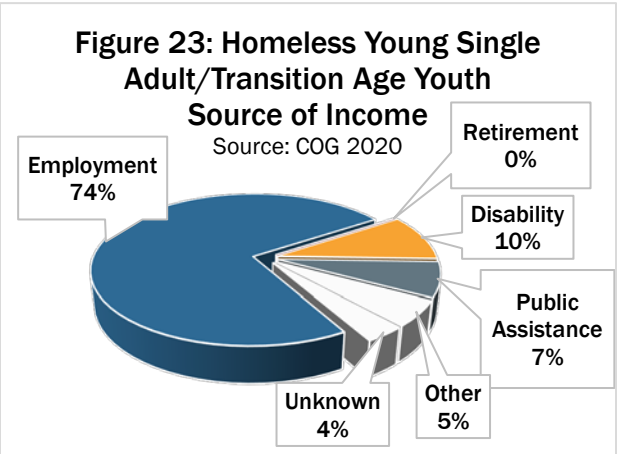
Source: COG 2020

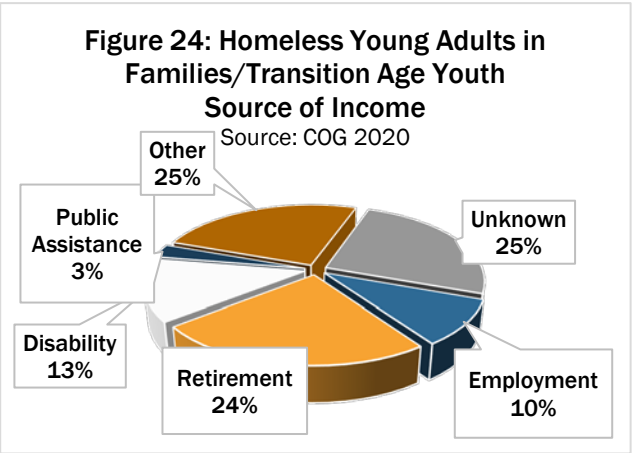
Single adult TAYs have one subpopulation characteristic that distinguishes them from the other single homeless adults: they are more likely to have a history of foster care involvement (Figure 23). Like the larger adult single homeless population, they were also likely to have a physical disability and to have experienced trauma in the form of domestic violence.



Homeless adults in TAY families were most likely to have experienced domestic violence which led to their current experience of homelessness on the night of the count, followed by having experienced domestic violence in the past. This is shown in Figure 23 above.

Transition Age Youth, or young adults in Households without Children who report having income were most likely (74 percent) to report their primary source of income was from employment. However, adult TAYs in families reported their primary source of income from other sources or retirement. For another 25 percent of adults in TAY families, the primary source of income was unknown, and just 10 percent of adults in TAY families' primary form of income was from employment. The next largest category of income for single adult TAYs was from disability income (10 percent), followed by public assistance. See Figures 24 and 25.





Reflecting the same characteristics as the larger population experiencing homelessness, most single TAY adults who reported their race selected Black or African American (70 percent) as well as adults in TAY families (90 percent). White Transition Age Youth made up the next largest group, with 19 percent of single adult TAYs and four percent of adult TAYs in families. These percentages have remained essentially unchanged since 2016.

Figure 25: Single Young Adult/Transition Age Youth (Race)
Source: COG 2020

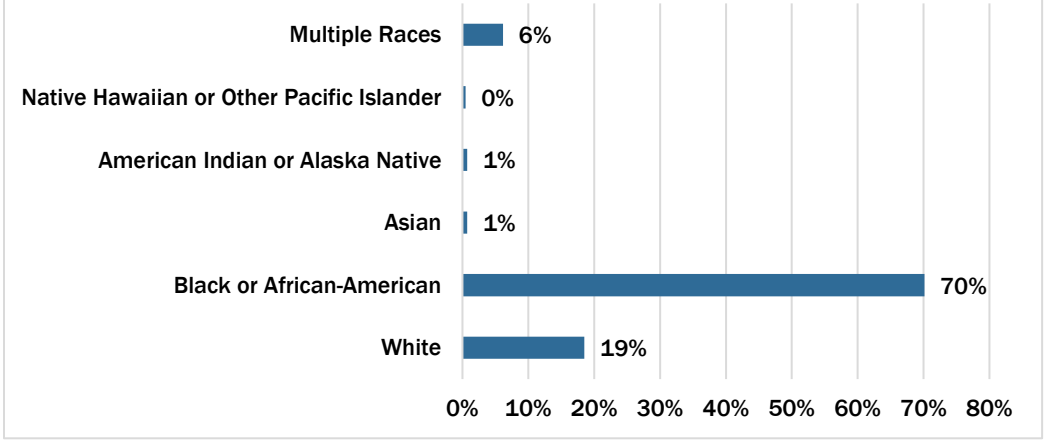
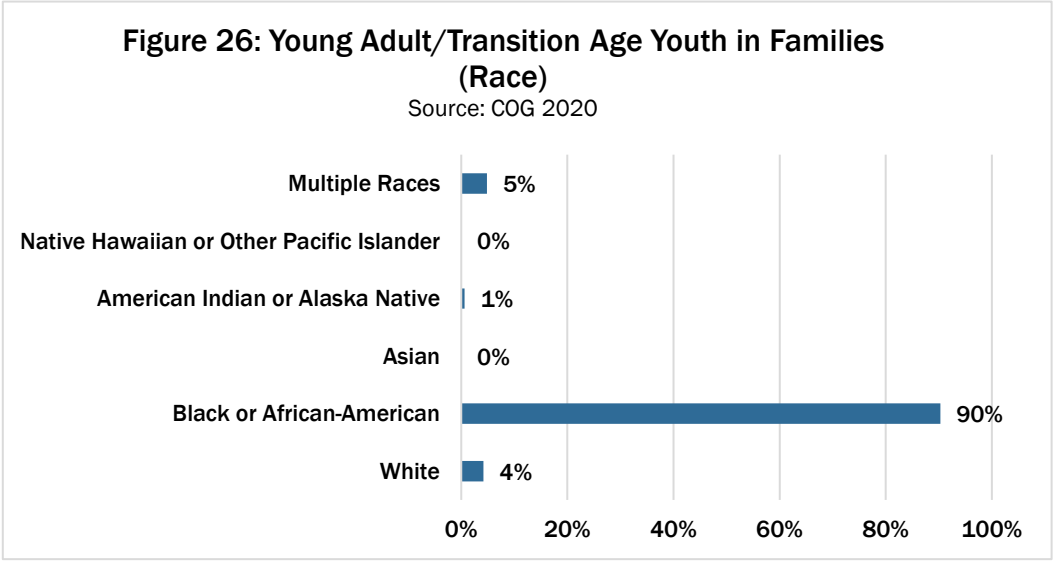


Figure 26: Young Adult/Transition Age Youth in Families (Race)
Source: COG 2020



SHELTER FACILITIES AND PERMANENT HOUSING SOLUTIONS

The metropolitan Washington region's multi-faceted CoC model focuses heavily on providing permanent housing solutions while continuing to provide emergency shelter for those facing an immediate housing crisis. The model for assisting persons experiencing homelessness has evolved due to the recognition that it is difficult to adequately address the systemic and personal problems that many people without permanent housing have with the emergency shelter-based model. Emergency shelters cannot provide the intensive longer-term assistance people experiencing homelessness may need in order to become more self-sufficient. Housing models such as transitional, rapid re-housing, and permanent supportive housing programs can provide this assistance, based on each individual's needs and circumstances.

Table 15 provides the region's 2020 distribution of emergency, seasonal and overflow, transitional, safe haven, rapid re-housing, permanent supportive housing and other permanent housing beds for persons experiencing homelessness, unaccompanied minors, and families. These facilities were available in the winter months during the Point-In-Time Enumeration and during the year's warmer months from April to October.

It's important to note that the availability of beds for persons experiencing literal homelessness are also affected by weather conditions; during a hypothermia alert, the number of seasonal beds (shown in Table 15) increases to meet the demand for those beds.

Between 2016 and 2020, the region added 3,927 permanent supportive housing beds to its year-round facility inventory. This represents a 39 percent increase since 2016.

The region reflected 2,717 more rapid re-housing beds in use on the night of the PIT 2020 than in 2016, bringing the total inventory of permanent supportive housing and rapid re-housing beds to 21,378. Rapid re-housing beds, as reflected in the Point-in-Time count, however, are a more fluid intervention and are different than permanent supportive housing which typically has a designated number of beds. A better representation of Rapid Re-housing bed utilization would review the number of people served during a year.

Beds categorized as "other permanent housing" also represent another significant source of permanent housing. The region's increased supply of permanent housing is consistent with the national initiative to use a Housing First[52] model. Persons in rapid re-housing, permanent supportive housing, or other permanent housing are no longer considered homeless; they are counted as formerly homeless persons. The region recorded 7,622 emergency, seasonal and overflow beds in 2020, representing a decrease of 238 beds since 2019 and a decrease of 16 percent of beds for those persons experiencing literal homelessness since 2016.

The region continued to lose transitional beds from 2016 through 2020. During this period, the region provided 1,441 fewer beds, or a 41 percent decrease.

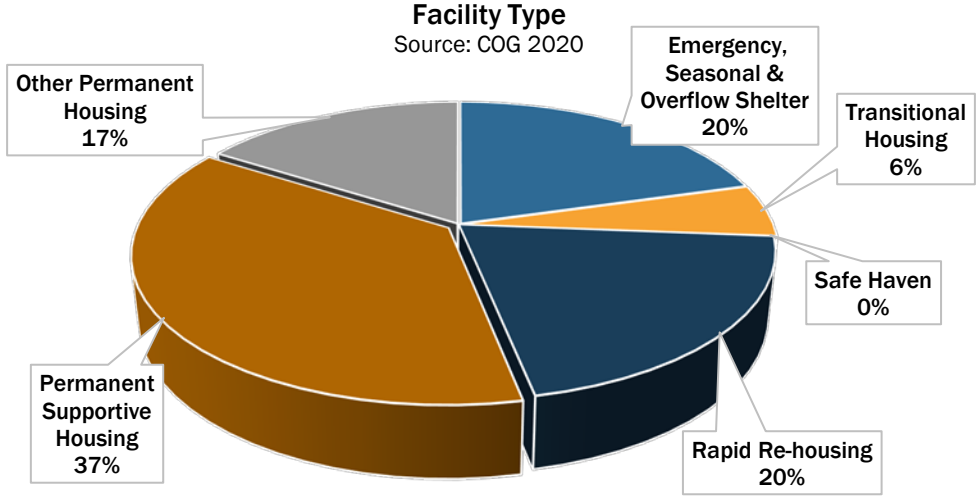
[52] Housing First is an approach to solving homelessness that emphasizes providing housing first and making use of clinical services optional. This strategy has proven successful in stabilizing persons experiencing homelessness, lowering returns to homelessness, and reducing the use of crisis services. For more information: http://usich.gov/usich_resources/fact_sheets/the_housing_first_checklist_a_practical_tool_for_assessing_housing_first_in and http://www.endhomelessness.org/library/entry/what-is-housing-first

The reduction in transitional housing beds is due to several factors. One main factor is a resource reallocation to focus on prevention and permanent supportive housing. As funding to support transitional housing declines, primarily due to changed policy and practice at HUD, the region's jurisdictions are faced with the need to eliminate beds as a result. In several jurisdictions, some transitional housing units have been converted to better meet the identified individual CoC needs, such as providing more rapid re-housing or permanent supportive housing. Overall, the reduction in transitional housing beds reflects a change in approach that emphasizes permanent housing solutions, as transitional housing programs are inconsistent with a Housing First approach.

Permanent supportive housing beds in 2020 comprise 37 percent of the region's inventory serving homeless and formerly homeless households. This represents an increase from 32 percent in 2019.

Other permanent housing was included in Table 15 for the first time in 2017. Other permanent housing is housing that is specifically targeted for persons experiencing homelessness. Examples of other permanent housing in the metropolitan Washington region includes non-profit agency partners purchasing housing units and designating them for persons who are formerly homeless and using project-based Housing Choice Vouchers to provide a longer-term rental subsidy. The data on other permanent housing are also reported to HUD and reflect a more complete picture of the number of formerly homeless beds available in the metropolitan Washington region. Including other permanent housing in the bed count shows an additional 6,256 beds that would otherwise not be counted.

Figure 27: Regional Distribution of Beds by Facility Type
Source: COG 2020



Transitional housing beds comprised six percent of the region's literally homeless beds in winter in 2020, reflecting a slightly reduced proportion from seven percent in 2019. The distribution of emergency, seasonal and overflow shelter beds declined from 23 percent last year to 20 percent in 2020. The region currently has a total of 37,514 beds for its residents currently or formerly experiencing homelessness across each of the facility categories; this number has increased by 7,053 beds since 2016. Table 15 on the following page represents this regional resource for persons who were literally or formerly homeless on January 22, 2020.

TABLE 15: 2016 - 2020 Winter And Year-Round Inventory Of Beds In The Washington Region								
		Beds for Singles	Beds for Unaccompanied Youth	Beds for Persons in Families	All Beds: Winter	Percent Distribution in Winter	All Beds: Warm Months	Percent Distribution in Warm Months
Beds for Literally Homeless								
Emergency, Seasonal & Overflow Beds	**2020**	**4,230**	**24**	**3,368**	**7,622**	**78%**		
	2019	4,561	21	3,278	7,860	77%		
	2018	4,436	28	3,941	8,405	78%		
	2017	4,505	31	4,667	9,203	78%		
	2016	4,332	23	4,762	9,117	72%		
Transitional Housing Beds	2020	1,116	0	982	2,098	22%	2,098	22%
	2019	1,092	0	1,207	2,299	23%	2,299	23%
	2018	1,131	8	1,235	2,374	22%	2,374	22%
	2017	1,149	8	1,368	2,525	21%	2,525	21%
	2016	1,278	16	2,245	3,539	28%	3,539	28%
Safe Haven	**2020**	**12**	**0**	**n/a**	**12**	**0%**	**12**	**0.1%**
	2019	34	0	n/a	34	0%	34	0.3%
	2018	46	0	n/a	62	1%	62	0.6%
	2017	62	0	n/a	59	1%	59	0.5%
	2016	59	0	n/a	56	0%	56	0.4%
Subtotal: Beds for Literally Homeless	**2020**	**5,358**	**24**	**4,350**	**9,732**		**9,732**	
	2019	5,687	21	4,485	10,193		10,193	
	2018	5,613	36	5,176	10,841		10,841	
	2017	5,716	39	6,035	11,787		11,787	
	2016	5,669	39	7,007	12,715		12,715	
Percent Change Since 2016		**-5%**	**-38%**	**-38%**	**-23%**		**-23%**	

Between 2016 and 2020, the metropolitan Washington region's supply of permanent housing beds increased by 34 percent or 7,029 beds. This in part reflects the addition of other permanent housing to the inventory count; however, it also reflects the priority the region's CoCs continues to place on increasing resources for permanent housing solutions. The region currently has 27,782 permanent housing beds, representing 74 percent of the region's total bed inventory.

According to Figure 28, 20 percent of the region's distribution of beds is for emergency, seasonal and overflow shelter. In 2014, the region added the number of rapid re-housing beds to the inventory it tracks. Rapid-rehousing beds accounted for 20 percent of the region's inventory during the 2020 enumeration. Transitional housing comprises six percent of the region's bed inventory, down from the seven percent it reflected in the 2019 PIT count.

TABLE 15: 2016 - 2020 Winter And Year-Round Inventory Of Beds In The Washington Region (Continued)								
Permanent Housing Beds for Formerly Homeless Persons								
Permanent Supportive Housing Beds	**2020**	**6,709**	**0**	**7,076**	**13,933**	**50%**	**13,933**	**50%**
	2019	5,550	0	5,547	11,097	46%	11,097	46%
	2018	5,106	0	6,714	11,820	49%	11,820	49%
	2017	5,033	0	5,032	10,065	46%	10,065	46%
	2016	4,924	0	5,082	10,006	48%	10,006	48%
Rapid Re-Housing & RRH Demonstration Beds	**2020**	**746**	**0**	**6,847**	**7,593**	**27%**	**7,593**	**27%**
	2019	589	0	6,807	7,396	31%	**7,396**	**31%**
	2018	339	0	6,417	6,756	28%	**6,756**	**28%**
	2017	491	0	4,971	5,462	25%	**5,462**	**25%**
	2016	524	0	4,352	4,876	23%	**4,876**	**23%**
Other Permanent Housing	**2020**	**1,274**	**0**	**4,982**	**6,256**	**22%**	**6,256**	**23%**
	2019	1,885	0	3,637	5,522	23%	5,522	23%
	2018	230	0	3,242	3,472	14%	3,472	14%
	2017	1,998	0	3,228	5,226	24%	5,226	24%
	2016	1,699	0	1,168	2,867	14%	2,867	14%
Subtotal: Beds for Formerly Homeless	**2020**	**8,877**	**0**	**18,905**	**27,782**		**27,782**	
	2019	8,024	0	15,991	24,015		24,015	
	2018	8,024	0	15,991	24,015		24,015	
	2017	5,675	0	16,373	22,048		22,048	
	2016	7,522	0	13,231	20,753		20,753	
TOTAL - All beds (literally and formerly homeless)	**2020**	**14,235**	**24**	**23,255**	**37,514**		**37,514**	
	2019	13,711	21	20,476	34,208		34,208	
	2018	13,711	21	20,476	32,889		34,856	
	2017	11,161	39	19,166	27,314		33,835	
	2016	11,240	39	16,038	30,461		33,468	
Percent Change Since 2016		**27%**	**-38%**	**45%**	**23%**		**12%**	

In addition to the resources represented above in Table 15, the region also has 71 medical beds to provide short-term recuperative care for people who are too ill or vulnerable to use emergency shelter services, but who are not sick enough to be admitted to a hospital. These facilities provide an important short-term safety net solution for persons with significant medical needs. Some hospital systems, such as Bon Secours, recognize housing as an important social determinant of health and have partnered with housing providers to create additional permanent housing for persons experiencing homelessness.

The District of Columbia's 6,658 permanent supportive housing beds for single adults and families represent 48 percent of the region's total number of permanent supportive housing beds.

Montgomery County has 16 percent of the region's permanent supportive housing beds at 2,202 beds, and Fairfax County, the next largest system, had four percent or 515 permanent supportive housing beds in the region on the night of the 2020 annual enumeration.



Survey volunteers prepare to head out in Loudoun County, Virginia on the night of the PIT count on January 22, 2020. (Loudoun County Department of Family Services)

PERMANENTLY HOUSED: THE FORMERLY HOMELESS

Homeless service providers and government housing officials are often asked, "How many people are now housed who were once homeless?" The question was harder to answer when governments followed the emergency shelter model of the 1980s. Under this model, persons who were considered chronically homeless comprised the majority of people experiencing homelessness and were less likely to receive permanent housing.



(Tim Parkinson/Flickr)

Housing First is an alternative model to the emergency shelter or transitional housing model. A core principle of the Housing First model is that the most vulnerable person experiencing homelessness is more responsive to interventions and social services support after they are in their own housing, rather than while living in temporary or transitional housing facilities. Under a Housing First model, homeless individuals can gain the stability necessary to better manage the challenges in their lives.

The ultimate goal of the metropolitan Washington region's homeless Continua of Care is to move people out of homelessness into permanent housing in communities where they can thrive. Permanent supportive housing provides some formerly homeless residents with wrap-around services to assist them in their efforts to live as independently as possible. These services may include substance abuse counseling, life skills training, health care, mental health services, and job training. Many of these crucial supportive services and housing subsidies are provided by the region's CoCs, comprised of local governments, nonprofits, and other human services agencies. Table 15 (previous page) provides information on the region's formerly homeless residents living in different categories of permanent housing.

According to the 2020 enumeration, there were 22,294 people who were formerly experiencing homelessness currently residing in some form of permanent housing; this represents 4,378 fewer individuals in permanent housing than in 2019. Table 16 cites the region's number of formerly homeless living in permanent supportive housing (PSH), rapid re-housing (RRH) and other permanent housing (OPH) by household category and reflects the evolving pattern of permanent housing solutions for persons experiencing homelessness in the metropolitan Washington region. The change in the number of permanently housed individuals from 2019 to 2020 may be a reflection on the availability and use of units affordable to persons exiting homelessness in the region as of the day of the annual enumeration.

Figure 29 compares the literally homeless and formerly homeless populations from 2016 through 2020. The totals of literally and formerly homeless adults are mutually exclusive and should not be combined. The data for formerly homeless for 2016 through 2020 reflect not only persons in permanent supportive housing, but other forms of permanent housing such as rapid re-housing and other permanent housing. According to HUD, formerly homeless people living in permanent housing are not counted as part of the literally homeless that live on the streets, in emergency shelter, or in transitional programs. By definition, people who are formerly homeless includes people presently living in permanent housing following a period of living on the street or in emergency or transitional shelter. Beginning in 2014, the nine participating Continua of Care gathered data on permanent

housing options in addition to permanent supportive housing. Other permanent housing options include rapid re-housing, which primarily serves homeless families in the metropolitan Washington region, and other supportive housing options.

TABLE 16: Formerly Homeless Persons In Permanent Housing

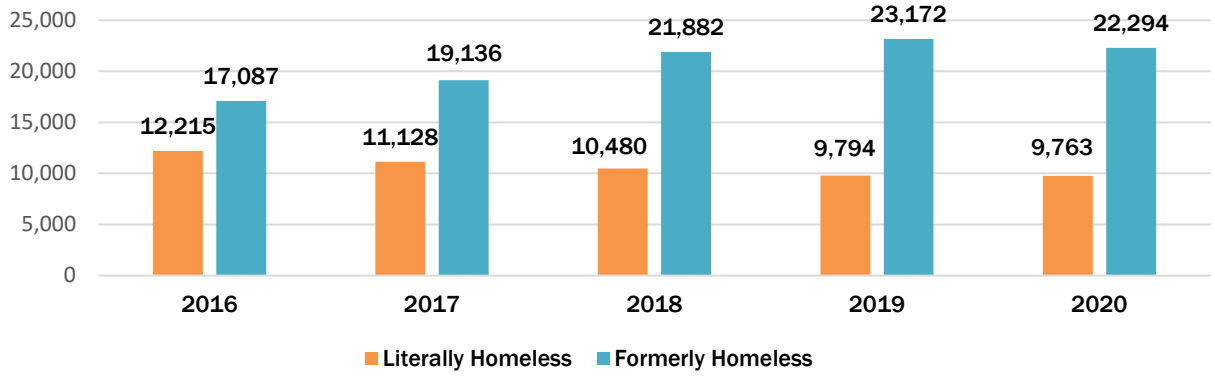
		Permanent Supportive Housing (PSH) Persons in Households Without Children	Permanent Supportive Housing (PSH) Persons in Households with Adults and Children	Rapid Re-Housing (RRH) Persons in Households Without Children	Rapid Re-Housing (RRH) Persons in Households with Adults and Children	Other Permanent Housing (OPH) Persons in Households Without Children	Other Permanent Housing (OPH) Persons in Households With Adults and Children	Total Permanent Housing
ALL COG CoCs	**2020**	**5,615**	**5,810**	**565**	**6,741**	**912**	**2,651**	**22,294**
	2019	5,395	5,461	502	6,647	1,645	3,522	23,172
	2018	4,954	6,088	326	6,034	1,501	2,979	21,882
	2017	4,552	4,663	497	4,980	1,798	2,646	19,136
	2016	4,747	4,922	524	4,195	1,585	1,114	17,087
Percent Change Since 2016		**18.3%**	**18.0%**	**7.8%**	**60.7%**	**-42.5%**	**138.0%**	**30.5%**

Source: COG 2020

The differences in the rates of use of permanent supportive housing and other permanent housing strategies by household type are represented graphically by Figures 30 and 31 and help demonstrate that importance of having different options to solve someone's housing crisis.

Figure 28: Region's Literally and Formerly Homeless in Permanent Supportive Housing, Rapid Re-Housing, and Other Permanent Housing

Source: COG 2020



As mentioned earlier in this report, it is important to note that the Point-in-Time count is only a one-day snapshot of people experiencing homelessness in the metropolitan Washington region. People become homeless every day and this number is fluid throughout the year. Growing pressures on the region's competitive housing market and increasing rents continue to negatively impact employable

homeless households. In a region where housing costs are rising faster than incomes, it creates additional challenges for residents with low-wage jobs and remains a critical obstacle to ending homelessness. The region's focus on preventing homelessness, rapidly re-housing those residents who do experience homelessness, and creating more permanent supportive housing has constrained the number of literally homeless and prevented it from growing unchecked.

Figure 30: Permanent Housing Solutions for Formerly Homeless Single Adults, 2018 - 2020

Source: COG 2020

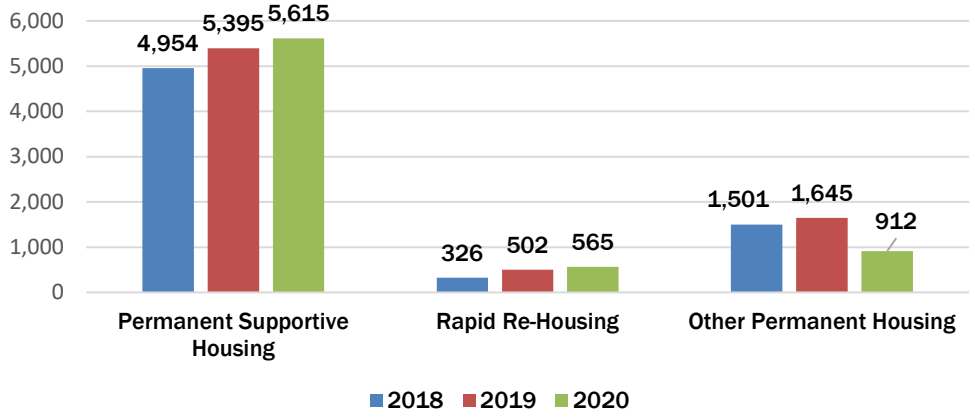
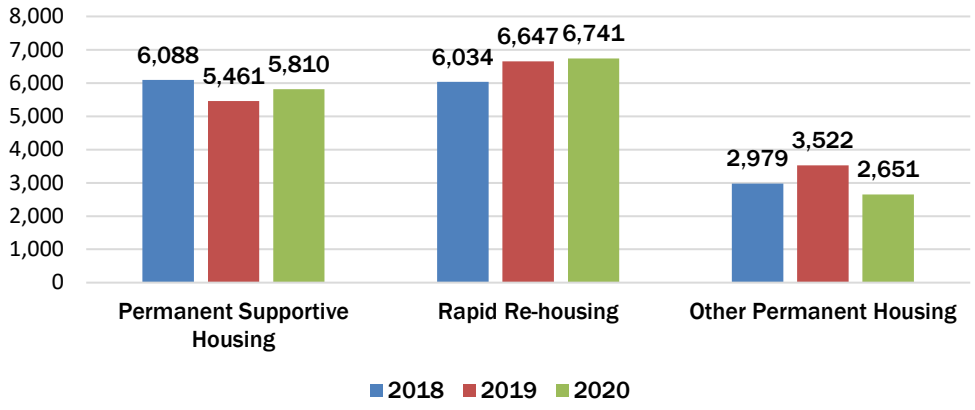


Figure 31: Permanent Housing Solutions for Formerly Homeless Adults in Families, 2018 - 2020

Source: COG 2020



CONCLUSIONS AND RECOMMENDATIONS

As of January 22, 2020, 9,763 people throughout metropolitan Washington were experiencing homelessness. This is the lowest recorded number of persons counted experiencing homelessness since the region began coordinating the annual Point-in-Time enumeration in 2001. Although this number is essentially unchanged from 2019, it represents steady progress in ensuring that the experience of homelessness in the metropolitan Washington region is brief, rare, and one-time only.

The decrease may be attributed in part to the ongoing use of proven best practices throughout the metropolitan Washington region, which have kept the numbers of people experiencing homelessness from growing unchecked during a time of rapid population growth and increasing housing prices. In fact, what may be more significant than the seven percent decrease in the regional homeless count is the fact that over 18,000 people who were formerly experiencing homelessness were residing in some form of permanent housing on the night of the count in 2020.

Our region faces significant challenges in its efforts to end homelessness. Several of these key challenges are not new: high rents that continue to rise every year and make it very difficult for extremely low-income households to find or maintain housing that they can afford,[53] and wages that have not increased to keep pace with the rising cost of housing, particularly for less-educated workers.[54] In addition, the region's declining supply of permanently affordable housing continues to expand the gap between the options available for the lowest-income households and the increasing need.

The global pandemic caused by COVID-19 brings new urgency to the crisis of homelessness and the need to prioritize housing as part of the region's health care and economic recovery plans.

Prior research has found that for every one percent increase in the unemployment rate, homelessness per 10,000 people increased by 0.65.

Using the most recent data available from HUD and the Congressional Budget Office's unemployment forecast for 2020, it is possible that an additional 800,000 people, or an increase of 40 to 45 percent of Americans nationwide, could lose their housing and experience homelessness this year.

Prior research has found that for every one percent increase in the unemployment rate, homelessness per 10,000 people increased by 0.65. Using the most recent data available from HUD and the Congressional Budget Office's unemployment forecast for 2020, it is possible that an additional 800,000 people, or an increase of 40 to 45 percent of Americans nationwide, could lose their housing and experience homelessness this year.[55] The implications for the metropolitan Washington region's homeless services systems becoming overwhelmed are clear.

To address these significant challenges, **the COG Homeless Services Planning and Coordinating Committee recommends the following:**

[53] http://www.urban.org/research/publication/housing-security-washington-region/view/full_report, p. 5

[54] http://www.thecommonwealthinstitute.org/2014/06/22/bursting-the-bubble/

[55] https://community.solutions/analysis-on-unemployment-projects-40-45-increase-in-homelessness-this-year/ Accessed May 30, 2020.

1. **Each jurisdiction should continue its efforts to reach out, assess, and house unsheltered persons experiencing homelessness.** The region's CoCs have in place, or are developing, systems to rapidly re-house people experiencing homelessness into appropriate permanent housing. This includes persons currently in COVID-19 quarantine hotels, who ideally should not have to return to an unsheltered living situation.

Emergency shelters are an important resource for an immediate housing emergency, but do not provide the long-term solution to ending homelessness.

2. **The Committee recommends that each of the region's CoC jurisdictions continuously increase its permanent supportive housing, rapid re-housing and other permanent housing inventory.** The provision of supportive wrap-around services, in conjunction with permanent housing, helps people experiencing homelessness become more confident and independent once their challenges are diagnosed and addressed.

Permanent supportive housing is one solution to ending homelessness that is particularly effective for individuals who suffer from chronic homelessness. However, some individuals in emergency shelter do not require the high level of care associated with permanent supportive housing. There is no "one size fits all" solution to ending a person's housing crisis.

The greatest need in the metropolitan Washington region is permanent housing that is affordable to the lowest-income households, combined with a subsidy to be able to support the housing costs in this region and remain independently housed for the long-term. Rapid re-housing is a newer approach in our region to ending homelessness for families and single adults facing a short-term economic crisis. However, without adequate affordable housing options, we will not be successful in assisting these families with achieving self-sufficiency and preventing a future return to homelessness.

3. **As such, it is critical that housing affordable for all income levels, including subsidized housing targeted for extremely low-income households, must be available across the region for metropolitan Washington to realistically reduce and eliminate homelessness. Resources from the local, state, and federal level should be maximized with a sustained commitment to achieve an end to homelessness.**

While the provision of housing is one of the most important elements of the solution to ending homelessness, the importance of jobs that pay wages high enough to allow individuals and families to be financially stable and remain housed for the long-term cannot be overstated.

4. **The committee further recommends that jurisdictions continue to provide job training opportunities and partner with employers to create ladders of opportunity to careers with higher-paying jobs.**

The economic crisis and unprecedented rise in unemployment beginning in April 2020 presents stark challenges for jurisdictions to support residents in COVID-impacted industries as well as those who were already unemployed or under-employed. Workforce development programs should be staffed appropriately to meet the rising need for more job seekers in the marketplace.

As noted earlier in this report, PIT data provides a limited, one-day perspective of the region's progress in preventing and ending homelessness. Other data sources can also measure the extent of the number of people experiencing homelessness and help determine the best responses.

5. In addition to the data required by HUD, **jurisdictions should continue to gather the best possible up-to-date information on persons experiencing homelessness using a by-name list and seek opportunities to share data within and across the region's CoCs to strengthen local programs and improve outcomes for persons experiencing homelessness.**

A by-name list includes everyone in a jurisdiction experiencing homelessness, and access to housing resources is determined through a coordinated entry system and prioritized based on level of vulnerability. Jurisdictions' use of a coordinated entry system is critical to ensure that housing resources are targeted and appropriate to ending a person's unique experience of homelessness.

A guiding principle in all of these efforts is to center racial equity in our solutions to ensure that the homeless services system does not compound existing structural inequities and contribute to the disproportionate representation of people of color experiencing poor housing outcomes.

6. **The Committee recommends that each of the region's CoC jurisdictions aim to close gaps in systems of care that lead to disproportionality and disparities. In order to understand the impacts of those gaps and identify appropriate and effective responses, communities should consult the people most impacted in their planning, design, and implementation.**[56]

The nine jurisdictions comprising COG's Continuum of Care worked hard to decrease the region's incidence of homelessness over the past year. However, funding challenges at all levels – local, state and federal – will have a direct impact on whether the region's CoCs are able to prevent an increase in the number of people experiencing homelessness this year.

Without additional funding from the federal level, there is the potential to stall gains seen in providing housing during the past five years. Innovations at the local level will play a prominent role in making continued progress towards reducing the number of residents who experience a housing crisis.

Despite these challenges, member local jurisdictions' Housing First models and emergency rental assistance programs have proven successful and the region must continue these best practice efforts to realize the goal to provide permanent, affordable homes for all of its residents and end homelessness, rather than merely managing it through the provision of emergency shelter. As the current public health crisis has made abundantly clear, housing is the foundation for being able to live a safe and healthy life. No one should have to live without a place to call home.

[56] https://endhomelessness.org/wp-content/uploads/2020/04/COVID-Framework-4.29.2020-1.pdf

TABLE 17: Literally Homeless by Jurisdiction, 2016- 2020					
Jurisdiction/Year		Households Without Children	Unaccompanied Youth/ Households with Only Children	Households with Adults and Children	All Persons
City of Alexandria	**2020**	**121**	**0**	**86**	**207**
	2019	124	0	74	198
	2018	142	0	84	211
	2017	120	0	91	224
	2016	129	0	95	224
2016-2020 Percent Change		**-6.2%**	**N/A**	**-9.5%**	**-7.6%**
Arlington County	**2020**	**139**	**0**	**60**	**199**
	2019	149	0	66	215
	2018	144	0	77	221
	2017	149	0	83	232
	2016	124	0	50	174
2016-2020 Percent Change		**12.1%**	**N/A**	**20.0%**	**14.4%**
District of Columbia	**2020**	**3,937**	**12**	**2,431**	**6,380**
	2019	3862	13	2646	6,521
	2018	3,761	9	3,134	6,904
	2017	3,578	5	3,890	7,473
	2016	3,673	10	4,667	8,350
2016-2020 Percent Change		**7.2%**	**20.0%**	**-47.9%**	**-23.6%**
Fairfax County	**2020**	**513**	**0**	**528**	**1,041**
	2019	507	1	526	1,034
	2018	497	2	488	987
	2017	489	3	472	964
	2016	481	3	575	1,059
2016-2020 Percent Change		**6.7%**	**-100.0%**	**-8.2%**	**-1.7%**
Frederick County	**2020**	**238**	**0**	**70**	**308**
	2019	212	0	74	286
	2018	207	0	109	316
	2017	217	0	92	309
	2016	249	0	100	349
2016-2020 Percent Change		**-4.4%**	**N/A**	**-30.0%**	**-11.7%**

TABLE 17: Literally Homeless by Jurisdiction, 2016- 2020					
Jurisdiction/Year		Households Without Children	Unaccompanied Youth/ Households with Only Children	Households with Adults and Children	All Persons
Loudoun County	**2020**	**129**	**0**	**50**	**179**
	2019	124	0	45	169
	2018	86	0	48	134
	2017	71	0	42	113
	2016	65	0	69	134
2016-2020 Percent Change		**98.5%**	**N/A**	**-27.5%**	**33.6%**
Montgomery County	**2020**	**487**	**0**	**183**	**670**
	2019	441	0	206	647
	2018	568	0	272	840
	2017	616	0	278	894
	2016	623	0	358	981
2016-2020 Percent Change		**-21.8%**	**N/A**	**-48.9%**	**-31.7%**
Prince George's County	**2020**	**212**	**1**	**240**	**453**
	2019	199	1	247	447
	2018	203	2	273	478
	2017	193	1	338	532
	2016	233	3	308	544
2016-2020 Percent Change		**-9.0%**	**N/A**	**-22.1%**	**-16.7%**
Prince William County	**2020**	**214**	**0**	**112**	**326**
	2019	117	0	160	277
	2018	190	2	182	374
	2017	190	0	203	393
	2016	187	0	213	400
2016-2020 Percent Change		**14.4%**	**N/A**	**-47.4%**	**-18.5%**
COG REGION	**2020**	**5,990**	**13**	**3,760**	**9,763**
	2019	5,735	15	4,044	9,794
	2018	5,798	15	4,667	10,480
	2017	5,623	9	5,489	11,121
	2016	5,764	16	6,435	12,215
2016-2020 Percent Change		**3.9%**	**N/A**	**-41.6%**	**-20.1%**

APPENDICES

APPENDIX A: SHELTER HOTLINE RESOURCE NUMBERS

This section provides a regional overview of resources to call when a person is in need of shelter throughout the metropolitan Washington region.

APPENDIX B: HOMELESSNESS ENUMERATION JURISDICTIONAL NARRATIVE REPORTS

This section provides each of the nine participating Continua of Care the opportunity to provide additional details regarding the Point-in-Time count conducted in their jurisdiction as well as an overview of the activities of their respective CoCs during the past year.

APPENDIX A: SHELTER HOTLINE RESOURCES

The information below is designed to assist a person experiencing a housing crisis with an emergency solution. Additional shelter resources may become available during the winter months (typically November through March each year) when a hypothermia alert is issued.

In addition to the information below, regional resources may be found online via the Interfaith Council of Metropolitan Washington's Emergency Services Directory at https://ifcmw.org/resources/emergency-services-directory . It does not include information for COG member jurisdiction Frederick County, MD, however.

Alexandria, VA

(703) 746-5700 Homeless Services Assessment Center (Monday through Friday, 8 A.M. to 5 P.M). After hours, persons needing emergency overnight stay should contact the Alexandria Community Shelter (703-746-3660) or Carpenter's Shelter (703-548-7500).

Arlington, VA

(703) 228-1300 or (703) 228-1010 (24/7)

District of Columbia

(202) 399-7093 (24/7). Youth under the age of 18, call Sasha Bruce Youth Hotline: (202) 547-7777

Fairfax County, VA

(703) 222-0880 weekdays 8:00 AM—4:30 P.M. Fairfax Coordinated Services Planning (CSP)

Frederick, MD

(301) 600-1506 Frederick Community Action Agency

Loudoun County, VA

(703) 777-0420 weekdays 8:30 AM - 5 PM - Coordinated Entry Services

Montgomery County, MD

240-907-2688 Montgomery County Crisis Center (24/7)

Prince George's County, MD

(888) 731-0999 (toll free in Maryland) or (301) 864-7095 (24/7)

Prince William County, VA

(703) 792-3366, Coordinated Entry System (CES), 7 days a week, 9 AM -9PM

APPENDIX B: HOMELESS ENUMERATION JURISDICTIONAL NARRATIVE REPORTS

This section provides each of the nine participating Continua of Care the opportunity to provide additional details regarding the Point-in-Time count conducted in their jurisdiction as well as an overview of the activities of their respective CoCs during the past year.

City of Alexandria, Virginia

DESCRIPTION OF HOMELESS SERVICES

The Partnership to Prevent and End Homelessness in the City of Alexandria (The Partnership) made up of public and private non-profit homeless, housing, and mainstream service providers, faith-based and educational institutions, advocates, former homeless consumers, and other community stakeholders serves as the homeless services Continuum of Care (CoC). The Partnership develops and implements the Strategic Plan to End Homelessness in the City of Alexandria and coordinates and oversees the delivery of prevention and homeless services to residents experiencing or at-risk of homelessness.

The Housing Crisis Response System is the CoC's centralized and coordinated approach to addressing the needs of persons experiencing or at-risk of homelessness in the City of Alexandria. The comprehensive screening and assessment process ensure that all households that present with a housing crisis are screened for diversion services first to ensure the most appropriate assistance is offered and unnecessary entries into shelter are avoided. Intended outcomes include 1) reductions in the number of first-time shelter entries; 2) shortened lengths of homelessness; and 3) the prevention of reoccurring episodes of homelessness.

CITY OF ALEXANDRIA HOUSING CRISIS RESPONSE SYSTEM SERVICE COMPONENTS

COMPONENTS	DESCRIPTION
Projects for Assistance in Transition from Homelessness (PATH)	Outreach and assistance provided to adults with serious mental illness who are experiencing homelessness or who are at risk of becoming homeless. Services include community-based outreach, mental health, substance abuse, case management and other supportive services, and a limited set of housing services.
Substance Abuse Peer Support Outreach	Outreach and assistance provided to adults with a Substance Abuse disorder who are experiencing homelessness or at risk of becoming homeless. Services include community-based outreach, referral to mental health, substance abuse, case management and other supportive services, and a limited set of housing services.
Day Shelter	Facility providing services to meet the basic needs of unsheltered homeless individuals including access to showers, laundry machines, lockers, phone, and voicemail services, mailing address, case management, outreach, and linkage and referral to community resources.
Homeless Services Assessment Center	Assistance for persons experiencing or at-risk of homelessness to determine the best immediate next step to effectively address the housing crisis. Services include screening for diversion services and emergency shelter as appropriate, basic needs assessment, and mainstream and community resource linkages and referrals.
Diversion and Prevention Services	Temporary support to persons at-risk of homelessness including housing location, case management, housing counseling, linkage to mainstream resources, landlord-tenant mediation, job search assistance and employment services, budgeting/ financial management and financial assistance.

Emergency Shelter	Temporary lodging and supportive services for homeless individuals and families.
Domestic Violence Program	Crisis intervention and supportive counseling services to victims of domestic and sexual violence. Services include temporary accommodations, 24-hour hotline, individual counseling, support groups, and court and medical facility accompaniment.
Rapid Re-housing Assistance	Temporary supportive services and limited financial assistance to aid persons experiencing homelessness to quickly return to and remain in permanent housing.
Winter Shelter	Seasonal shelter from November 1 to April 15 to protect persons experiencing homelessness from exposure-related conditions such as hypothermia and frostbite during cold weather months.
Safe Haven	Supportive housing for hard-to-reach homeless individuals with serious mental illness who have been unable or unwilling to participate in housing or supportive services.
Transitional Housing	Extended supportive housing targeting homeless individuals and families needing longer-term assistance to facilitate a move to permanent housing.
Permanent Supportive Housing	Permanent housing with supportive services including barrier-free units for individuals designed to allow formerly homeless adults with children and individuals with serious mental illness to live in the community as independently as possible.
Other Permanent Housing Resources	Public housing units with and without supportive services; private income-based apartment units; Housing Choice voucher-subsidies; as well as rent relief subsidy for seniors and the disabled.

The CoC provided a combined total of 124 emergency shelter beds including 124 year-round beds (70 for households without children and 54 for households with adults and children). Combined, the transitional housing inventory consisted of 46 beds (14 for male households without children and 32 for households with adults and children).

The Domestic Violence Program shelter provided 21 undesignated year-round beds to serve persons in imminent danger of domestic or sexual violence. From November 1 to April 15, the Winter Shelter Program provided an additional 50 undesignated seasonal beds to protect unsheltered persons experiencing homelessness from exposure-related conditions such as hypothermia and frostbite during cold weather month.

CITY OF ALEXANDRIA CONTINUUM OF CARE HOMELESS SERVICES UNIT & BED INVENTORY

INVENTORY TYPE	Units for Households with Adults & Children	Beds for Households with Adults & Children	Beds for Households without Children	Year-Round Beds
Winter Shelter	-	14*	36*	-
Emergency Shelter	-	54	70+	124
Domestic Violence Program Shelter	-	14	7	21
Transitional Housing	10	32‡	14	46
Safe Haven	-	-	12	12
TOTAL	10	114	139	203

- Not Applicable

* These numbers represent a combined total of 50 undesignated cold weather seasonal beds to serve households without children and those with adults and children. Designations are made each year based upon average occupancy during the Winter Shelter season.

‡This number includes operating capacity, which is determined by family size for occupied units, as well as maximum capacity for vacant units.

SIGNIFICANT ACCOMPLISHMENTS SINCE THE 2019 WINTER ENUMERATION

The City of Alexandria Racial Equity Initiative

In February of 2019, the Department of Community and Human Services (DCHS) was selected by city manager Mark Jinks as one of the four pilot departments taking the initiative in addressing racial inequalities in the city, by changing the way we think and approach our work. Three other programs were selected: The Alexandria Police Department, Juvenile Courts, and the Office on Human Rights. The decisions made by these programs also potentially affect both DCHS, and more specifically the Continuum of Care, administrated by the Office of Community Services. As learning continues, decisions and procedures will be centered around racial equity so that the historically marginalized communities experiencing poverty and homelessness, are serviced in an equitable capacity.

Reorganization of Rapid Rehousing

With the beginning of the 2020 Fiscal Year, Carpenter's Shelter began operating the city's three rapid rehousing programs under the grant management of New Hope Housing. Since the takeover, the shelter has significantly improved the program by utilizing a committed housing locator to form strong bonds with families and individuals in shelter, to property managers and landlords within the city. As a result, this has increased the amount of families who have been rapidly rehoused or received rapid re-housing services this fiscal year. Total number of clients rapidly rehoused has increased by 37%, compared to those rehoused under the previous provider. The previous rapid re-housing provider no longer operates programs within this Continuum of Care.

HOMELESS POINT-IN-TIME COUNT

The Partnership conducted the 2020 Winter Point-in-Time count for those sheltered solely by collecting data through the Homeless Management Information System (HMIS). We feel this provides us more accurate, client-level specific data in our reporting. It also gives the CoC the ability to conduct a Point-in-Time count on an ad-hoc basis, leaving potential for comparable Summer PIT data in the future. A manual count of unsheltered homeless persons was conducted under the leadership of the Office of Community Services and Homeless Services/PATH Coordinator. Reflected below are the demographic and sub-population comparisons from previous year enumerations.

HOMELESS COUNT BY HOUSEHOLD TYPE

PERSONS EXPERIENCING HOMELESSNESS	2011		2015		2016		2017		2018		2019		2020	% Change 2019-2020	% Change 2011 - 2020
Total Persons	416		267		224		211		226		198		207	5%	-50%
HOUSEHOLDS WITHOUT CHILDREN													121		
Men	198	75%	111	70%	97	75%	83	69%	99	70%	84	68%	85	1%	-57%
Women	66	25%	48	30%	32	25%	36	30%	42	30%	40	32%	36	-10%	-45%
Transgender	0	0%	0	0%	0	0%	1	1%	1	1%	0	0%	0	0%	0%
Total Households	264		159		129		120		142		124		121	-2%	-54%
HOUSEHOLDS WITH ADULTS & CHILDREN													32		
Total Households	52		34		28		30		29		21		32	52%	-38%
Single Parent Households	46	88%	33	97%	26	93%	26	87%	27	93%	17	81%	28	65%	-39%
Adults	58	34%	37	34%	31	33%	35	38%	31	37%	28	38%	36	29%	-38%
Children	94	66%	71	66%	64	67%	56	62%	53	63%	46	62%	50	9%	-47%
Total Persons in Households	152		108		95		91		84		74		86	16%	-43%

A total of 207 persons experiencing homelessness were identified in this year's PIT Count, a 5% increase from 2019. There were no households with only children identified in the 2020 Count. There were 121 households without children, a 2% decrease from 2019. There were 85 single men, and 36 single women identified, a 1 % increase for men and a 10% decrease for women from last year's count of 84, and 40, respectively. There were no significant changes to policies or procedures in the CoC, which may be contributing to the very minor changes to the PIT Count aggregates, specifically for singles.

On the night of the count, 32 households with adults and children were counted, a 52% increase from 2019 enumeration of 23. Similarly, there was an increase in persons in households counted, from 74 from 86, a 16% increase from last year. Both the numbers of adults, and children, increased from 28 adults to 36 in 2020, and 46 children to 50 in 2020.

TOTAL COUNT AND BREAKOUT BY HOUSEHOLD TYPE

LOCATION ON THE NIGHT OF THE COUNT	2011		2015		2016		2017		2018		2019		2020
Unsheltered	42	10%	23	9%	12	5%	18	9%	15	7%	10	5%	11
Sheltered	374	90%	244	91%	212	95%	193	91%	211	93%	188	95%	196
Total Persons	**416**		**267**		**224**		**211**		**226**		**198**		**207**
HOUSEHOLDS WITHOUT CHILDREN	2011		2015		2016		2017		2018		2019		2020
Place Not Meant for Human Habitation	42	16%	23	14%	12	9%	18	15%	15	11%	10	8%	11
Winter Shelter	57	22%	35	22%	31	24%	39	33%	37	26%	27	22%	21
Emergency Shelter	102	39%	71	45%	60	47%	39	33%	63	44%	63	51%	65
Emergency Shelter for Registered Sex Offenders	-	-	3	2%	4	3%	0	0%	0	0%	0	0%	0
Domestic Violence Program Shelter	*	*	3	2%	0	0%	3	3%	3	2%	0	0%	2
Transitional Housing	51	19%	15	9%	10	8%	10	8%	12	8%	13	10%	11
Safe Haven	12	5%	9	6%	12	9%	11	9%	12	8%	11	9%	11
Total Households	**264**		**159**		**129**		**120**		**142**		**124**		**121**
HOUSEHOLDS WITH ADULTS & CHILDREN	2011		2015		2016		2017		2018		2019		2020
Number of Households													32
Place Not Meant for Human Habitation	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0
Winter Shelter	0	0%	0	0%	0	0%	2	7%	2	7%	1	5%	0
Emergency Shelter	25	48%	15	44%	13	46%	15	50%	17	59%	11	52%	18
Domestic Violence Program Shelter	*	*	4	12%	3	11%	1	3%	3	10%	2	10%	6
Transitional Housing	27	52%	15	44%	12	43%	12	40%	7	24%	7	33%	8
Total Households	**52**		**34**		**28**		**30**		**29**		**21**		**32**

100% of households with adults and children were sheltered on the night of the count. Of households with adults and children, 56% were represented in Emergency Shelter, 25% in Transitional Housing and 18% in Domestic Violence Shelter. 9% of Households with adults only, were unsheltered, or in a place not meant for human habitation. The number of unsheltered households increased by 1, or 10% since last year. 91% of households with adults only were sheltered.

HOMELESS COUNT BY SUBPOPULATION

CHRONIC HOMELESSNESS	2011		2015		2016		2017		2018		2019		2020
Households without Children	109	41%	48	30%	47	36%	43	36%	57	40%	38	31%	15
Households with Adults & Children	0	0%	3	9%	0	0%	0	0%	1	3%	0	0%	0
SUBPOPULATIONS (ALL ADULTS)‡	**2011**		**2015**		**2016**		**2017**		**2018**		**2019**		**2020**
Veterans	27	14%	12	6%	5	3%	6	4%	8	5%	7	5%	9
Substance Use Disorder	91	46%	41	21%	27	17%	24	15%	31	18%	17	11%	13
Serious Mental Illness	54	28%	43	22%	42	26%	64	41%	36	21%	50	33%	17
Co-Occurring	45	23%	29	15%	18	11%	12	8%	22	13%	20	13%	5
Physical Disability	28	14%	16	8%	13	8%	13	8%	16	9%	12	8%	4
Chronic Health Conditions	78	40%	20	10%	15	9%	14	9%	22	13%	18	12%	12
HIV/AIDS	6	3%	1	1%	6	4%	4	3%	5	3%	4	3%	1
Limited English Proficiency	26	13%	11	6%	10	6%	2	1%	4	2%	10	7%	7
History of Foster Care	8	4%	7	4%	3	2%	12	8%	15	9%	12	8%	10
Institutional Discharge^	43	22%	16	8%	23	14%	14	9%	26	15%	18	12%	12
DOMESTIC VIOLENCE	**2011**		**2015**		**2016**		**2017**		**2018**		**2019**		**2020**
Homeless Due to Domestic Violence													30
Total Households	*	*	12	6%	4	3%	9	6%	6	3%	2	1%	15
Single Women	*	*	4	8%	1	3%	4	11%	3	7%	0	0%	5
Women w/Minor Children	*	*	8	25%	3	12%	5	19%	3	11%	2	12%	9
Children	*	*	20	28%	9	14%	14	25%	5	9%	6	13%	15
Total Persons	**50**	**12%**	**32**	**12%**	**13**	**6%**	**23**	**11%**	**11**	**5%**	**8**	**4%**	30

As reflected in the chart above, there were no chronically homeless households with adults and children in the 2020 count; As with last year, there was a 0% change from the 2019 count in which no chronically homeless families were identified. There was a 61% decrease in the amount of chronically homeless households with adults only.

Also reflected in the chart below, the 2020 enumeration yielded a decline in all subpopulation categories, except for a 29% increase in the number of Veterans; 7 in 2019, and 9 in 2020. The decrease in all other subpopulations may be a result of a decrease in the data collection quality.

There was a substantial increase in the number of households fleeing due to domestic violence; 2 households in 2019, and 15 households in 2020. Where there were no single women without children in domestic violence programs last year, there were 5 this year. Similarly, where there were no males fleeing due to domestic violence, there was one male represented in the enumeration this year.

EMPLOYMENT & MONTHLY INCOME FOR HOUSEHOLDS WITHOUT CHILDREN

HOUSEHOLDS WITHOUT CHILDREN													
EMPLOYMENT	**2011**		**2015**		**2016**		**2017**		**2018**		**2019**		**2020**
Not Reported	0	0%	0	0%	0	0%	1	1%	2	1%	3	2%	9
No	182	69%	101	64%	94	73%	82	68%	100	70%	87	70%	67
Yes	82	31%	58	36%	35	27%	37	31%	40	28%	34	27%	45
GROSS MONTHLY HOUSEHOLD INCOME	**2011**		**2015**		**2016**		**2017**		**2018**		**2019**		**2020**
Not Reported	0	0%	2	1%	1	1%	3	3%	3	2%	3	2%	6
No	114	43%	71	45%	57	44%	52	43%	57	40%	52	42%	56
Yes	150	57%	86	54%	71	55%	65	54%	82	58%	69	56%	59
Income Amount													
$1-150	10	7%	4	5%	0	0%	0	0%	0	0%	0	0%	3
$151-250	13	9%	3	3%	5	7%	2	3%	2	2%	2	3%	3
$251-500	20	13%	5	6%	7	10%	6	9%	5	6%	3	4%	3
$501-1,000	68	45%	39	45%	39	55%	29	45%	43	52%	38	55%	28
$1,001-1,500	18	12%	16	19%	9	13%	12	18%	18	22%	13	19%	11
$1,501-2,000	17	11%	13	15%	11	15%	6	9%	5	6%	6	9%	14
More than $2,000	4	3%	6	7%	0	0%	7	11%	8	10%	7	10%	7
~Primary Source of Income													
Wages	81	54%	58	67%	35	49%	34	52%	44	54%	30	43%	27
Retirement+	2	1%	1	1%	6	8%	2	3%	3	4%	6	9%	5
Disability^	52	34.5%	24	28%	27	38%	25	38%	32	39%	27	39%	4
Public Assistance*	0	0%	0	0%	0	0%	0	0%	1	1%	5	7%	2
Other**	16	10.5%	3	3%	3	4%	3	5%	2	2%	1	1%	0

37% of households without children were employed in 2020, a 32% increase from last year. 55% of these households were not employed, a 23% decrease from last year. Of the 46% that reported having income, as with last year, majority reported having monthly income of $501-$1000. 32 clients, or 26% of households without children reported having income higher than $1000. Earned wages was reported as the majority income source for this population.

Of those not employed and receiving income, most clients are compensated with retirement, by a very small margin. There was a significant amount of income information not collected from the clients represented in this year's PIT Count.

EMPLOYMENT AND MONTHLY INCOME OF HOUSEHOLDS WITH ADULTS AND CHILDREN

HOUSEHOLDS WITH ADULTS & CHILDREN													
EMPLOYMENT (ADULTS)	**2011**		**2015**		**2016**		**2017**		**2018**		**2019**		**2020**
Not Reported	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0
No	21	41%	8	22%	12	39%	14	40%	14	45%	8	26%	18
Yes	37	73%	29	78%	19	61%	21	60%	17	55%	20	65%	18
GROSS MONTHLY INCOME (ADULTS)	**2011**		**2015**		**2016**		**2017**		**2018**		**2019**		**2020**
Not Reported	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	6
No	8	15%	1	3%	4	13%	9	26%	10	32%	5	16%	14
Yes	44	85%	36	97%	27	87%	26	74%	21	68%	23	74%	16
Income Amount				*		*							
$1-150	1	2%	0	0%	0	0%	1	4%	0	0%	0	0%	0
$151-250	0	0%	0	0%	2	7%	3	12%	0	0%	0	0%	1
$251-500	7	16%	7	19%	5	19%	3	12%	4	19%	4	17%	4
$501-1,000	10	23%	11	31%	6	22%	3	12%	2	10%	4	17%	3
$1,001-1,500	13	30%	10	28%	10	37%	5	19%	5	24%	4	17%	2
$1,501-2,000	5	11%	5	14%	2	7%	4	15%	5	24%	6	26%	6
More than $2,000	8	18%	3	8%	2	7%	7	27%	5	24%	5	22%	5
~**Primary Source of Income**													
Wages	35	79.5%	29	81%	19	70%	19	73%	17	81%	20	87%	14
Retirement+	0	0%	0	0%	0	0%	0	0%	0	5%	0	0%	0
Disability^	0	0%	1	3%	1	4%	1	4%	1	5%	1	4%	1
Public Assistance*	7	16%	6	17%	7	26%	6	23%	1	5%	2	9%	1
Other**	2	4.5%	0	0%	0	0%	0	0%	2	10%	0	0%	0

50% of adults, in households with children and adults, were employed, which is a 10% increase from 2019. 16 adults reported monthly income, while 14 reported not having income, and 6 were unreported. Of those receiving income, majority reported having income in the $1501-$2000 range, followed closely by those making more than $2,000 monthly, both of which had the same number of clients as the 2019 enumeration. Though there were more families reported in this year's PIT count, 6 more families did not report any income, which is a major increase from 0 in last year's count. 30% less families reported having income this year.

HOMELESS POINT-IN-TIME RESULTS ANALYSIS

The data collected in this year PIT Count indicates several trends. One consistent trend is the city's steadiness in reducing homelessness. While this year's count is a slight 5% increase of last year's enumeration, the aggregate is lower than all other subsequent years (2011-2018). The increase this year can be attributed mainly to more families captured in the count, and subsequently more persons in families.

There were no major policy changes that may have contributed to the increase in this number, however, this CoC is still championing more affordable and permanent supportive housing solutions for adults and children in the City of Alexandria. A decrease in affordable housing and stand-still of open permanent supportive housing units can arguably be the main factor driving more families into shelter. Another major trend was the increase in households fleeing domestic violence, which represented 30% of families in the count, a substantial increase from 2 families fleeing due to domestic violence in last year's count; those families only made up 2% of total families in 2019.

While there was an increase in the number of adults with serious mental illness in 2019, that number has reduced in the 2020 count. This can be attributed to challenges in data collection. Confusion concerning the HUD definition for disabling condition led to incoming clients without disability documentation being sometimes recorded as not having a disabling condition on their Entry and NAEH Assessment. However, as stated by HUD, lack of documentation does not prohibit one from being considered to have a disability. Retraining of the HUD definition of disabling condition has been helpful to case managers not only for making corrections, but also in how clients with disability are documented moving forward. The HMIS team is working diligently, but carefully with case managers to make sure the appropriate corrections are being made in the system.

Chronic homelessness has also decreased by 61%. There were no major policy changes that contributed to this metric, however, the CoC continues to look for permanent housing solutions for this vulnerable population.

HOMELESSNESS, PREVENTION, SHELTER DIVERSION AND HOUSING PLACEMENT

PERMANENT SUPPORTIVE HOUSING FOR CHRONICALLY HOMELESS INDIVIDUALS

To assist formerly homeless persons, the CoC currently operates 39 permanent supportive housing beds for households without children and 3 permanent supportive housing units totaling 8 beds for households with adults and children whose heads of household have a serious mental illness. On the night of the 2020 count, 96% of the beds were occupied. The HMIS team maintains a current list of chronic homeless clients which is prioritized using NAEH Assessment scores. When a vacancy becomes available in a PSH program, the team recommends clients in prioritization order.

HOMELESS PREVENTION, DIVERSION & RAPID RE-HOUSING

Since 2013 the City of Alexandria Housing Crisis Response System has enabled the CoC to more efficiently and effectively assess the needs of persons seeking shelter, best utilize community resources, quickly return households to permanent housing, and significantly reduce the number of households entering the shelter system.

Prevention and Diversion services have since the previous enumeration, with Prevention being the official program title, and Diversion, being a method that is attempted at each step in the case management, in the effort to prevent persons from experiencing a possible episode of homelessness.

- ***Prevention*** – 33 households totaling 89 people at-risk of homelessness were aided to retain permanent housing this past fiscal year. Services included case management, linkage to mainstream resources, financial assistance, landlord-tenant intervention, job search assistance, employment services, budgeting/financial management and housing counseling.

- ***Rapid Re-Housing*** – As with last year, this CoC saw an even more significant increase in rapidly rehoused families and singles, due mainly in part to Carpenter's Shelter reinvigorating the rapid re-housing services, as mentioned earlier in the narrative.

  It is clear that our rapid re-housing programs can have a direct impact on reducing homelessness in the City of Alexandria, but it is not without unique challenges: 1) Households still struggle to find affordable units for which they qualify; 2) The extent of need for rental assistance consistently exceeds original projections; 3) The assistance must be tailored to fit the household's budget and ability to sustain housing costs post-assistance, which often limits

the household's ability to meet its housing need; and 4) Grantors' guidelines for rapid re-housing funding assistance dictate that rental subsidies not exceed fair market rents, which creates a barrier for households to access the limited permanent housing for which they qualify. This is a result of the City of Alexandria's high demand rental market where there is a huge gap between the fair market rents and the market rates.

FUTURE TRENDS IN HOMELESSNESS

The greatest barriers to ending homelessness in our community are 1) racial inequity among residents experiencing poverty and homelessness further amplified by the COVID-19 pandemic. 2) extremely low incomes (i.e., low fixed income and the lack of a living wage received by persons experiencing homelessness); and as reflected in the charts above, 3.) the lack of fixed affordable permanent housing opportunities for the lowest income households (i.e., those with an income 30% and below the area median of $110,300)

1.) Racial inequity among residents experiencing homelessness in the City of Alexandria has consistently been the highest barrier in housing. The COVID-19 pandemic will only amplify this disparity, however, as the CoC continues to understand racial equity, the creation of policies targeting housing for the most underprivileged group(s) experiencing homelessness will be the most effective way to address the overwhelming equity gap.

   As this CoC continues to grow in its understanding of racial equity, policies that are race-specific, or that focus specifically on housing African Americans, our largest population in the CoC, will be monumental in driving down the number of persons experiencing homelessness in this city. 66% of this CoC's programs are made up of African Americans, and have been, with very little variance, over the last five years; however, African Americans only account for 21% of the city's overall population, which highlights a huge disparity in our programs.

   The sudden emergence of the COVID-19 pandemic will cause these disproportions to grow. The racial inequity that affects, health, health care, employment, and income will affect African Americans and Latinx communities most, as these groups bode worst off than any other community in all the above-mentioned categories. With the development of Racial Equity Framework tools and increased Government Alliance for Racial Equity (GARE) training, this CoC will need to quickly and effectively educate itself on race and the long standing inequity imbed in this community; this will in turn aid in the development of polices that service the most disadvantaged communities in an equitable and effective manner during this pandemic and beyond, ultimately decreasing the amount of clients cycling through homeless programs within the City of Alexandria.

2.) The need for on-going supportive services to assist low income, formerly homeless households who remain extremely vulnerable – who are a crisis away from the risk of or recidivism into homelessness. The need to revisit policies that have inadvertently resulted in cyclical shelter stays for persons with a diagnosable substance use disorder, and to incorporate CoC-level harm-reduction policies specifically related to service provision for this population.

   The need for coordination and collaboration with and among community partners that provide emergency assistance (e.g., food, furniture, financial aid) to persons who are essentially at–risk of homelessness, but who never present as such in the Housing Crisis Response System,

which results in duplicative, inefficient and costly service provision as well as a misrepresentation of the community need.

3.) The need for more permanent supportive housing in our community is evident but there is also a need to offer other flexible housing with support services. This could decrease chronic homelessness and address our aging population that has limited income, likely which will not increase, and those with disabling conditions. We are also mindful and looking to address those with mental health and substance abuse who are experiencing homelessness in our community. The decrease in households without children, due to Rapid Re-Housing, and the increase in households with adults and children are something to consider moving forward. Rapid Re-Housing efforts could perhaps be a viable option to move towards in focusing on families in our community.

Although the continued advocacy in response to the decline of limited affordable housing opportunities has resulted in planning and development for households at 60% to 80% of the area median income ($110,300), the cost of permanent housing is expected to remain high in general, particularly for the populations we serve with incomes of 30% or less. Therefore, the City of Alexandria CoC is committed to finding innovative and non-traditional ways to continue providing prevention and rapid re-rehousing assistance as well as seeking federal, state, and local funding to this end.

Arlington County, Virginia

Description of Homeless Services

The Arlington County Continuum of Care (CoC) has a well-developed and efficient crisis response system with an unchanged mission: to sustain an integrated, community-based support system which helps households at risk of homelessness keep their housing and assist any household that does become homeless in regaining stable housing. The mission is supported by a shared community responsibility, that includes collaborative planning, an alignment of stakeholders and resources essential to Arlington County's Action Plan for Ending Homelessness.

The Arlington County CoC includes:

- **Centralized Access System (CAS):** Provides access to services across the entire Arlington CoC, matching households, as quickly as possible, with the interventions that will most effectively and efficiently prevent or end their homelessness and lead to stability.
- **Street Outreach and Engagement**: Outreach workers connect with individuals living on the street and other outdoor environments to help navigate them towards a path of stability and housing.
- **Targeted Prevention**: Efforts to provide services to at-risk households in order to prevent homelessness before it occurs are an integral part of the Arlington CoC.
- **Shelters:** Five Arlington County homeless shelters provide a safe, structured environment for singles and families who are experiencing homelessness as well as survivors of domestic violence.
- **Transitional Housing**: Transitional housing programs provide housing services to help Arlington families and individuals prepare for permanent housing.
- **Rapid Re-housing**: Rapid Re-housing programs move households quickly out of shelter into housing with rental support and services to help families maintain housing.
- **Permanent Supportive Housing**: Permanent supportive housing programs provide rental assistance and case management services for households who are homeless and have (or a family member has) a disabling condition.

Arlington County has made several notable accomplishments since its last jurisdictional update in 2019. Below are just a few highlights of the County's successful efforts to serve its most vulnerable populations and build an inclusive community as a direct result of community and coordinated systems of engagement.

- The Arlington County Board adopted an Equity Resolution, reaffirming its commitment to continue dialogue about race and equity, resolve existing disparities and create a framework for an equitable approach to decision-making.
- Arlington County solicited competitive bids for the operation of its two single adult emergency shelters, implementing a performance-based management approach for each the two awarded contracts.
- Led by the Arlington Community Foundation the Arlington Shared Prosperity Initiative was formed as part of the broader Shared Prosperity Partnership – a collaborative between Urban Institute, The Kresge Foundation, Brookings Metropolitan Policy Program, and Living Cities – to address challenges with housing affordability, workforce development, affordable childcare and access to healthcare.

- Arlington County's Housing Grants program increased its Maximum Allowable Rent to 60% of the Area Median Income (AMI) for low-income renters resulting in greater access to affordable housing.
- Amazon pledged $20 million to the Arlington County Affordable Housing Investment Fund (AHIF) which represents the fund's largest commitment since its inception.

This 2020 jurisdictional narrative report details Arlington County's Point-in-Time survey results as of January 22, 2020.

Current Inventory of Beds for Homeless Persons

The table below illustrates the County's current inventory of beds (emergency shelter and transitional housing) available within the continuum of care on the day of the count. There were no changes in inventory from 2019 to 2020.

Year-Round and Winter Inventory of Beds				
	Beds for Singles	Beds for Families	All Year-Round Beds	Winter Beds
Hypothermia/Overflow/Other (Additional winter Capacity)	0	0	0	25
Emergency Shelter Beds	99	80	178	0
Transitional Housing Beds	9	8	21	0
TOTAL	108	89	197	25

Point-in-Time Count

Arlington County's Department of Human Services led the 2020 Point-in-Time (PIT) survey on January 22, 2020 in conjunction with the Metropolitan Washington Council of Governments (COG), local homeless non-profit partners and members of the community.

Arlington County experienced an overall decrease of 7% in the total number of persons experiencing homelessness counted:

Arlington County Point-in-Time Count						
	2016	2017	2018	2019	2020	*% Change 2019-2020*
Singles	124	147	144	146	135	*-8%*
Families	50	85	77	69	64	*-7%*
TOTAL	174	232	221	215	199	*-7%*

Arlington County Point-in-Time Count						
	2016	2017	2018	2019	2020	*% Change 2019-2020*
Sheltered	155	199	186	179	165	*-8%*
Unsheltered	19	33	35	36	34	*-6%*
TOTAL	174	232	221	215	199	*-7%*
***Unsheltered:** Singles or families experiencing homelessness in a place not meant for human habitation within and/or across jurisdictional boundaries.*						

Factors contributing to the continuing decline of homelessness include:

- **Shelter Diversion**: Arlington County continues to have creative problem-solving conversations at each point of entry that help people experiencing a housing crisis quickly identify and access safe alternatives, connect with community resources and family supports, and housing search.
- **Eviction/Prevention Services:** The Arlington County's CoC maintains a robust menu of targeted prevention services to assist households faced with eviction. Without these services, the Arlington CoC would have an increased number of individuals and families requesting and receiving emergency shelter services.
- **Housing Grants:** Unique to Arlington County, the Housing Grants program provides rental assistance to eligible low-income renters who are 65 years or older, totally and permanently disabled, working families with at least one child under age 18 or clients and patients of a County-operated behavioral health program. These grants cover a portion of monthly rent, depending on household income, household size and maximum rent amounts.
- **Continuation of Housing First Approach:** Housing First emphasizes moving households into permanent housing as quickly as possible, and then providing ongoing services to help maintain housing while addressing personal needs/challenges. Households with leasing barriers (including little or no income), are quickly moved into permanent housing with rental assistance, service supports and a plan to sustain their housing.

Factors contributing to the two-person, or 6%, decrease in the unsheltered population include:

- **Street Outreach:** Service workers continue to be proactive in their outreach efforts throughout the year, often encountering extremely difficult to engage persons. Many individuals living on the street are transient and connected to services in other jurisdictions. Street Outreach continues to move individuals into permanent housing with rental assistance and support services through different housing interventions.

Factors contributing to the 8%, decrease in the single adult population include:

- **Largest Subpopulation:** Arlington has recognized that single adults experiencing homelessness is its largest population within the CoC. The County continues to implement the By-Name List framework to quickly identify pathways to permanent housing solutions while prioritizing the most vulnerable individuals. Arlington's homeless service providers and community stakeholders routinely meet and review the By-Name list which can be attributed to the successful decline.

Point-in-Time (PIT) Subpopulations Count

Chronically Homeless PIT Table						
	2016	2017	2018	2019	2020	*% Change 2019 to 2020*
Chronically Homeless – Sheltered Households without Children	45	61	57	74	20	*-73%*
Chronically Homeless – Sheltered Households with Children	0	2	0	0	0	*0%*
TOTAL	45	63	57	74	20	*-73%*

Chronically Homeless: Arlington County has continued to prioritize chronically homeless individuals and families, through use of a By-Name List, for housing opportunities that best meet their needs. While notable, the 73% decrease in chronic homelessness reflects enhanced training for volunteer surveyors, additional vetting through the Homeless Management Information System (HMIS) and By-Names List and more accurate snapshot of those who are chronic or "likely" chronic.

Veteran PIT Table						
	2016	2017	2018	2019	2020	*% Change 2019 to 2020*
Veteran –Sheltered Households without Children	6	10	8	9	2	*-78%*
Veteran – Sheltered Households with Children	0	0	0	1	0	*-100%*
Veteran –Unsheltered Households without Children	-	-	-	-	1	-
TOTAL	6	10	8	10	3	*-70%*

Veterans: Arlington reached functional zero for veterans in December 2015 and has largely continued to sustain functional zero since that time. A close partnership with local Supportive Services for Veterans Families (SSVF) providers and the Veterans Affairs outreach team has enabled Arlington to use a rapid identification and housing placement approach to veterans experiencing homelessness. VASH vouchers have played a critical role in ensuring eligible veterans have appropriate supports that create long-term housing stability.

Domestic Violence PIT Table						
	2016	2017	2018	2019	2020	*% Change 2019 to 2020*
Domestic Violence Current (DVC) Sheltered Households without Children	5	6	3	6	8	*33%*
Domestic Violence Current (DVC) – Sheltered Households with Children	17	20	25	21	8	*-62%*
TOTAL	22	26	28	27	16	*-41%*

Domestic Violence (DV) Survivors: DVC households represent those whose current episode of homelessness is a direct result of fleeing domestic violence. The total number of homeless DVC households marked a considerable decrease compared to years prior. Domestic violence can be considered one of the leading causes of homelessness among women and families. The number of adults in shelter without children experiencing homelessness as a direct result of domestic violence has increased in contrast to adults with children, which decreased substantially. Our domestic violence provider reported seeing more adult head of households who have been separated from their children as a result of the domestic violence or child protective service involvement. Additionally, the large decline in adults with children can be attributed to the overall downward trend of mixed status immigration households no longer feeling safe in accessing critical human services assistance, including Arlington's domestic violence safety net.

Transition-Aged Youth (TAY) PIT Table						
	2016	2017	2018	2019	2020	*% Change 2019 to 2020*
TAY Households without Children	6	3	2	6	5	*-17%*
TAY Households with Children	15	24	13	8	5	*-38%*
TOTAL	21	27	15	14	10	*-29%*

Transitioned-Aged Youth (TAY): The Arlington County CoC continues to see a decline among literally homeless youth, experiencing a 29% decrease from 2019 to 2020. While the CoC previously conducted targeted outreach to identify youth during the Point-in-Time Count, we elected not do so in 2020 based on lessons learned from 2018 and 2019. Youth experiencing homelessness remain a challenge to quantify in Arlington, but we continue to enhance existing shelter and housing programs to better meet the needs of transition-aged youth by providing trauma-informed care and developmentally targeted services.

Arlington County Permanent Housing Inventory Chart

The chart below enumerates permanent housing options for homeless persons as of the day of the 2020 PIT count.

Arlington County Permanent Housing Inventory Chart			
Rapid Re-Housing Chart			
Singles		Families	
Number of Programs	Beds Utilized	Number of Programs	Beds Utilized
2	72	5	125
Permanent Supportive Housing Chart			
Singles		Families	
Number of Programs	Beds Utilized	Number of Programs	Beds Utilized
6	226	1	52
Other Permanent Housing Chart			
Singles		Families	
Number of Programs	Beds Utilized	Number of Programs	Beds Utilized
0	0	1	15
TOTAL Number of Programs	TOTAL Number of Beds Utilized	TOTAL Number of Programs	TOTAL Number of Beds Utilized
Singles		Families	
8	298	7	192

Individuals Exiting Shelter Connected to Permanent/Stable Housing Chart

Individuals Exiting Shelter Connected to Permanent/Stable Housing Chart								
	FY 2016		*FY 2017*		*FY 2018*		*FY 2019*	
	# Exited	% Realize Housing	# Exited	% Realize Housing	# Exited	% Realize Housing	# Exited	% Realize Housing
Family Shelters	*138*	***82%***	*122*	***86%***	*145*	***86%***	*167*	***88%***
Domestic Violence Shelter	*68*	***53%***	*62*	***45%***	*47*	***51%***	*70*	***71%***
Individual Shelters	*200*	***36%***	*201*	***43%***	*183*	***45%***	*193*	***48%***

Conclusion

Arlington continued to see a decline in homelessness during its 2020 Point-in-Time count. Minor adjustments to its PIT methodology in 2020; through intensive training of staff and volunteers around federal definitions related to homelessness, person-centered approaches to surveying, and how to target unsheltered individuals using geotagging. We believe our success and decline results from critical federal, state, local and private funding coupled with a commitment from service providers, multifamily housing partners, volunteers, and the community.

Preventing homelessness at every opportunity is the foundation of our crisis response system. Rapid Re-housing and Permanent Supportive Housing provide core pathways to permanent housing for individuals and families that experience homelessness. Housing affordability remains a challenge in northern Virginia, but Arlington's Affordable Housing Investment Fund provides low-interest loans to developers of affordable housing and incentivizes additional density for the provision of committed affordable housing units.

While we celebrate this modest success, we would be remiss if we did not address the future of homelessness as a result of the COVID-19 pandemic which presented in our region shortly after finalizing our PIT data. Now more than ever we must be intentional about how we press forward: safety is paramount, permanent affordable housing is the solution and explicitly centering racial equity in the center of our work is essential.

The District of Columbia

System Overview and Recent Achievements

Homeward DC, the District of Columbia Interagency Council on Homelessness's (ICH) strategic plan,[1] has laid a strong foundation for the Continuum of Care (CoC) with a vision to end long-term homelessness. Currently in its fifth year of implementation*, Homeward DC* provides a framework for a responsive system, ensuring that homelessness in the District will become rare, brief, and nonrecurring.

In the District of Columbia, homeless services are administered and primarily funded by the Department of Human Services (DHS). The Community Partnership for the Prevention of Homelessness is DHS's prime contractor for homeless services and is the Collaborative Applicant for federal resources awarded by the U.S. Department of Housing and Urban Development (HUD). As a part those roles, TCP oversees the District's Homeless Management Information System (HMIS),[2] operates the Coordinated Assessment and Housing Placement (CAHP) [3] system, and completes data-driven projects for the CoC like Point in Time.

DHS and TCP work with the CoC's provider agencies who deliver the following services for residents facing housing crises: winter- and year-round emergency shelter, meal services, daytime services, street outreach, emergency rental assistance, targeted prevention assistance, transitional housing, rapid rehousing, targeted affordable housing,[4] and permanent supportive housing. These services are available for unaccompanied adults, persons in families, unaccompanied youth, and pregnant and parenting youth. Moreover, the CoC targets many of its services to specific subpopulation groups such as veterans, the LGBTQIA+ population, and survivors of domestic violence to better meet their unique service needs.

Families in the District seeking homeless services may visit DHS's Virginia Williams Family Resource Center for referral to preventative and emergency resources based on need. All families placed in shelter from Virginia Williams have access to rapid rehousing resources while a smaller subset are matched to longer-term interventions via the CAHP system. Unaccompanied adults experiencing homelessness may access any of the District's low barrier emergency shelters for overnight accommodations and meals.

As part of Mayor Muriel Bowser's strategy to close the DC General Family Shelter and replace it with smaller, community-based shelter facilities, the District has opened 202 new units of Short-Term Family Housing (STFH) with two more STFH programs set to open in 2020. Families in STFH have access to private space and neighborhood amenities while they receive services to support their exit to housing as quickly as possible. The STFH sites show first-hand the impact that building size and design can have on service quality and outcomes. These programs have helped to achieve a

[1] ich.dc.gov/page/homeward-dc-ich-strategic-plan-2015-2020.

[2] HMIS is a community's primary repository for information on programs serving persons experiencing or formerly experiencing homelessness.

[3] CAHP provides standardized access and coordinated referrals to the housing placement process that ensures that persons experiencing homelessness receive appropriate assistance with both immediate and long-term housing and service needs.

[4] Targeted affordable housing is a permanent subsidy earmarked for use by the homeless services system that provides with light-touch services, targeted to those living with a disabling condition, who do not require the level of services associated with permanent supportive housing.

significant reduction of families in emergency shelter and reduction of shelter length of stay to an average of 90 days – all while maintaining year-round access to shelter for families.

In 2019 DHS also began the Family Rehousing and Stabilization Program Task Force to work together with stakeholders to assess what rapid rehousing is doing well and to outline opportunities to improve the program. The Task Force included people with lived experience of homelessness, CoC service providers, landlords, advocates, and representatives from the District Government. This group worked together to provide recommendations on improvements for customer experience and outcomes, program delivery, and oversight and accountability.

Further efforts were made to assist families at risk of homelessness with continued investments into the Homeless Prevention Program (HPP). HPP aims to help families resolve a housing crisis before a shelter stay is necessary and to connect them to shelter when there are no other safe options. Since its launch, HPP has prevented over 7,000 families from experiencing homelessness.

Having significantly advanced the work to close DC General and replace it with smaller, STFH sites throughout the District, in 2019 the District was able to turn more attention and resources to shelter improvements for unaccompanied adults. The design process for a new 801 East Men's Shelter on St. Elizabeth's Campus has been completed and construction is set to begin in 2020. The new shelter is designed with different spaces to meet the unique needs of various subpopulations (such as seniors, persons with physical disabilities, individuals who are working or seeking employment, etc.). The objective of this new facility is to provide more tailored assistance with the goal of helping individuals exit homelessness to permanent housing more quickly. Planning is also underway to replace the Harriet Tubman Women's Shelter and to conduct extensive renovations of the New York Avenue Men's Shelter, Blair Shelter, and Emery Shelter which serve men experiencing homelessness.

The launch of this work to reform the shelter system for unaccompanied adults coincides with other major changes to the "front door," including the addition of a Downtown Day Services Center created in partnership with the Downtown DC Business Improvement District and Pathways to Housing DC. The Center is an important access point to the homeless services system and is a critical resource for laundry, showers, meals, and an array of health services and agency services including those from the District Department of Employment Services, the Department of Health's Office of Vital Records, the Department of Motor Vehicles, DHS's Economic Security Administration, Unity Health Care, and the Washington Legal Clinic for the Homeless. Since opening, the facility has enrolled over 1,000 men and women in case management and has completed close to 800 Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT)[5] assessments to connect clients to housing resources. This complements a growing network of daytime services in the District, including the Adams Place Day Center, which serves an average of 160 people per day in Northeast DC.

2019 also marked the development of a locally funded Comprehensive Street Outreach Network, designed to increase resources, enhance coordination, and provide more real-time support to unsheltered residents. As these important pieces of system reform continue to take shape, they will improve the District's ability to connect those experiencing homelessness to available housing resources and services while aiding in efforts to prevent homelessness whenever possible.

[5] The VI-SPDAT is a survey administered to determine risk and prioritization for appropriate housing supports for persons who are experiencing homelessness or who are experiencing housing insecurity.

2020 Continuum of Care (CoC) Inventory

The following table shows the number of units for unaccompanied individuals and families (as well as beds within the family units) in the District's CoC. This inventory includes all programs dedicated to serving households who currently are experiencing or who have formerly experienced homelessness. Most of the District's programs receive funding from DHS, with additional funding coming from HUD and the U.S. Departments of Health and Human Services (HHS) and Veterans Affairs (VA), as well as from other private funding sources.

DISTRICT OF COLUMBIA 2020 SHELTER & HOUSING INVENTORY			
Category	**Units for Individuals**	**Units for Families**	**Beds in Family Units**
Winter Shelter	792	-	-
Emergency Shelter	2,496	806	2,530
Transitional Housing	1,003	270	785
Rapid Rehousing	409	2,000	5,922
Permanent Supportive Housing	4,710	1,759	5,484
Other Permanent Housing	1,118	1,310	3,942

The District of Columbia is one of a few jurisdictions nationally and the only jurisdiction in Metropolitan Washington that is legally required to provide low-barrier emergency shelter to all residents who need it. As such, the District adds 792 beds for unaccompanied individuals to its shelter capacity during the Hypothermia Season, which runs from November through March.[6] The additional winter shelter beds consist of a combination of "seasonal," "Hypothermia alert," and "overflow" beds. Seasonal beds are open nightly throughout the Hypothermia Season, Hypothermia alert beds open during specific weather conditions,[7] and overflow beds are added to the inventory, as necessary.

The CoC's low barrier shelter model means shelter staff do not ask individuals for identification or documentation upon entry, with the goal of ensuring protection from cold weather injury or death for anyone who does not have a safe place to sleep. While the District does not have a set number of winter shelter units for families, the emergency shelter capacity for families is flexible throughout the year to meet the needs of households with children and women who are pregnant.

[6] Defined in the *Homeless Services Reform Act* (HSRA).

[7] Activation of Hypothermia alert beds is determined through consultation between DHS, the District's Homeland Security & Emergency Management Agency, and the National Weather Service. The alert is activated when the actual or forecasted temperature is 32 degrees or below, though DHS may also call an alert when the temperature is forecasted to be 40 degrees or below with a 50 percent chance or greater for precipitation. The Hypothermia alert was active on the night of the 2020 PIT count.

2020 Point-in-Time Results Overview

The number of persons experiencing homelessness in the District of Columbia on the night of PIT decreased by 2.2 percent from the 2019 count and is down by 23.6 percent from the PIT count conducted in 2016. Although the number of persons in families experiencing homelessness decreased by 8.0 percent from last year, the number of unaccompanied individuals increased by 1.9 percent. The two subsystem counts within the overall PIT count have been diverging since 2017.

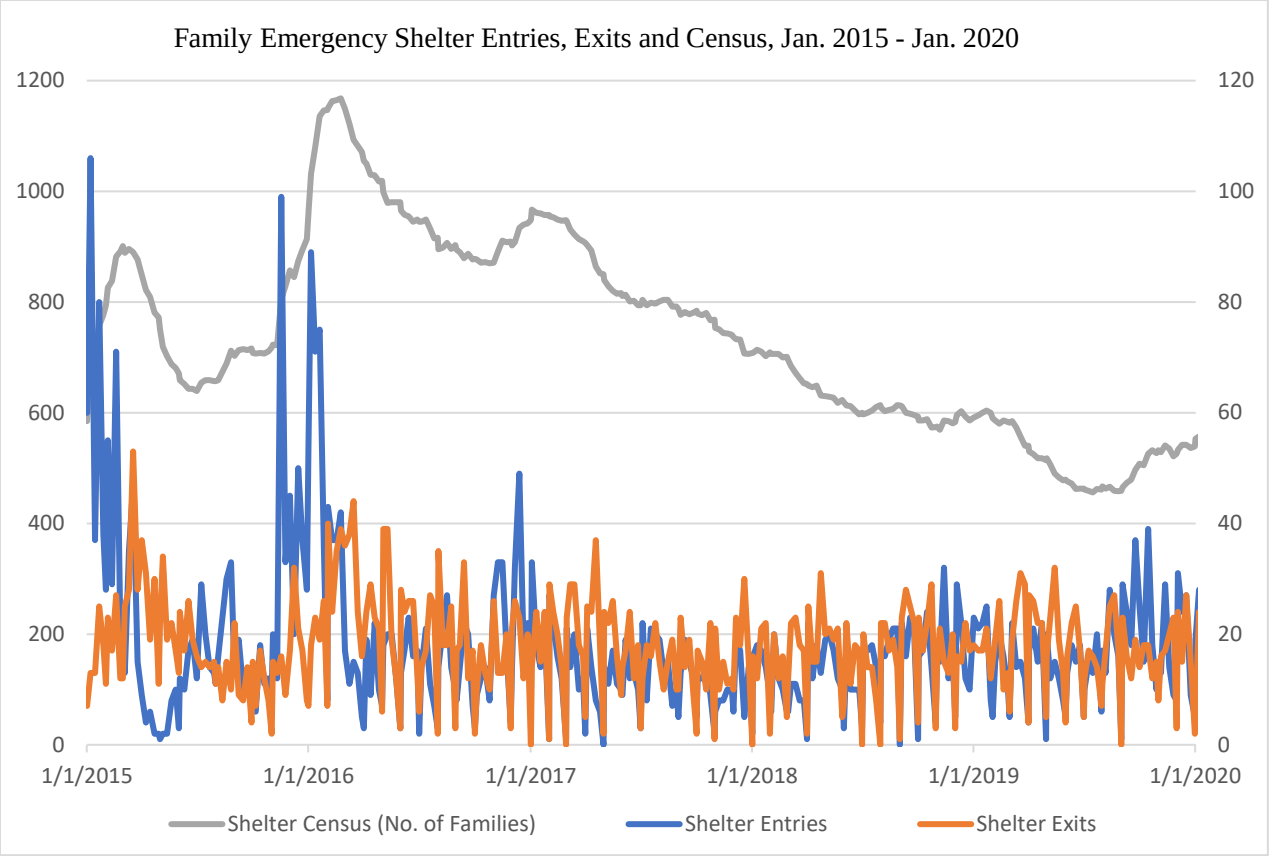
	POINT-IN-TIME COUNT BY CATEGORY						
	2016	2017	2018	2019	2020	% Change 2019-2020	% Change 2016-2020
Unaccompanied Individuals	3,683	3,583	3,770	3,875	3,947	1.9%	7.2%
Persons in Families	4,667	3,890	3,134	2,646	2,433	-8.0%	-47.9%
Total Persons Experiencing Homelessness	**8,350**	**7,473**	**6,904**	**6,521**	**6,380**	**-2.2%**	**-23.6%**

Families

The number of families (as distinct from *persons in* families) counted at PIT has decreased by 48.5 percent since 2016 when shelter occupancy was at its highest point over the last five PIT counts.

	POINT-IN-TIME COUNT, FAMILIES & PERSONS IN FAMILIES						
	2016	2017	2018	2019	2020	% Change 2019-2020	% Change 2016-2020
Families	1,491	1,166	924	815	768	-5.8%	-48.5%
Persons in Families	4,667	3,890	3,134	2,646	2,433	-8.0%	-47.9%

Prior to 2015, the District made family shelter placements only during the Hypothermia season. Opening shelter to families in need of placement throughout the year has resulted in a decreased strain on the system, which was previously seen in winter months, because both shelter entries and exits now occur year-round. The chart below illustrates how shelter entries outnumbered exits in winter months leading to increased census counts.



This shift benefits families as they can access shelter when they need it, not just during certain weather conditions. In turn, families entering shelter have access to housing assistance that enables them to exit shelter quickly, and families served by prevention can get assistance that provides stability before a shelter placement is necessary. Families exiting shelter through the Family Rehousing and Stabilization Program (FRSP), also known as rapid rehousing, enter their own housing while receiving rental assistance and case management. Once in housing, families can connect with more intensive service interventions through CAHP if households need deeper levels of service. Due to the limited amount of permanent housing resources available, the CoC reserves placements into permanent housing subsidies for families who are the most vulnerable and who are at the greatest risk of returning to shelter without long-term supports. Between the 2019 and 2020 PIT counts, nearly 800 families exited the emergency shelter system for permanent destinations, including FRSP. The CoC's HMIS data continues to show that 85 percent of rapid rehousing recipients retain their housing for at least two years after the subsidy ends, which is similar to rates of housing retention among families receiving permanent subsidies.

In addition to recent improvements in family shelter services and the availability of permanent housing resources after shelter, DHS's HPP has been a key resource in the District's work to end homelessness among families. However, there remains a gap between what families exiting the homeless services system earn on average and the cost of rent in the District. To address this and to bolster housing retention after exiting shelter, DHS is currently working to better integrate homeless services with the TANF Employment Program by helping families connect to, or reconnect to, a TANF employment vendor. Additionally, DHS's Economic Security Administration (ESA) has on-site office hours at the newly opened STFH programs to connect families to their TANF vendors and provide other connections to public benefits.

Unaccompanied Individuals

Despite the number of families experiencing homelessness has decreased over the past five years, the count of unaccompanied individuals is increasing, albeit to a lesser extent in 2020 than in recent PIT counts. Between the 2019 and 2020 PIT counts, the number of unaccompanied individuals increased by 1.9 percent, which followed increases of 2.8 percent from 2018 to 2019 and 5.2 percent from 2017 to 2018.

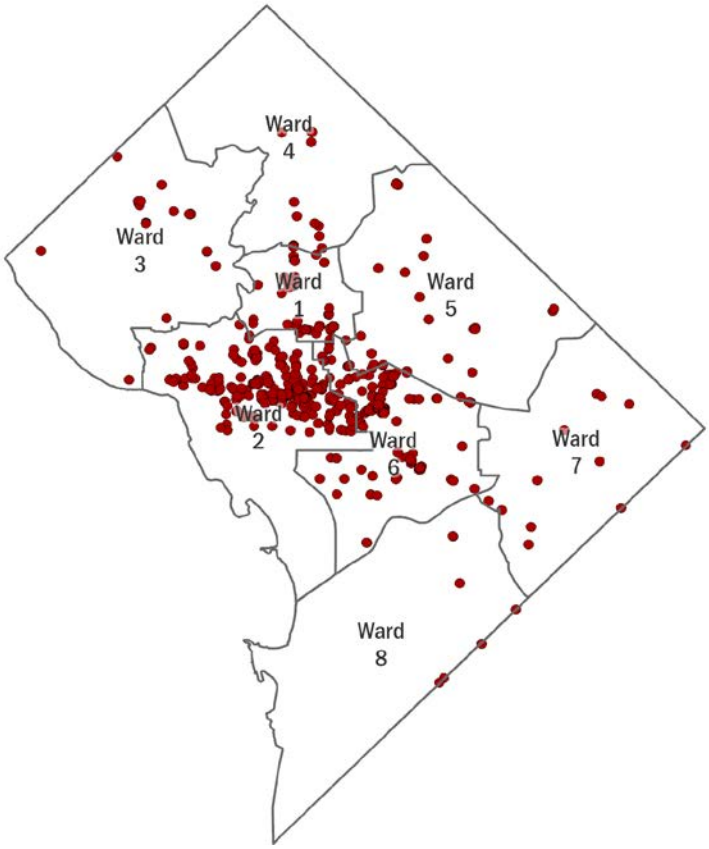
POINT-IN-TIME COUNT, UNACCOMPANIED INDIVIDUALS			
	2019	2020	% Change 2019-2020
Emergency Shelter	2,520	2,580	2.4%
Transitional Housing	747	714	-4.4%
Unsheltered	608	653	7.4%
Total	3,875	3,947	1.9%

Unlike the family system, there are several front doors to the homeless services system for individuals, which requires more strategic engagement, and this is particularly the case for unsheltered individuals. At PIT 2020, homelessness among unsheltered individuals increased by 7.4 percent, even as homelessness among all unaccompanied individuals rose only by 1.9 percent.

Mapping PIT engagements shows that most unsheltered persons were clustered in the Downtown area, with smaller concentrations in the rest of the District. Having a better understanding of where people are staying when experiencing unsheltered homelessness allows for a more strategic approach within homeless services and the new housing-focused Comprehensive Street Outreach Network. The Network, launched by DHS in consultation with DBH and CoC providers, increases resources, enhances coordination, and provides more real-time support to outreach providers to better support individuals who are staying on the streets. The Network is designed to provide a coordinated entry point to services, including access to housing supports.

As we continue to map engagements over time, we can begin to better understand how people move throughout the system and more effectively meet the needs of people experiencing homelessness.

Map: Unsheltered Engagements at PIT (January 22, 2020)



In 2019, the CoC averaged 88 monthly exits of unaccompanied individuals from the homeless services system into a permanent housing resource, for a total of more than 1,000 for the calendar year. The CAHP system matches individuals to rapid rehousing, targeted affordable housing, and permanent supportive housing based on their service needs, and the CoC's HMIS data shows housing retention rates among individuals placed in these programs – 85 percent for time limited subsidy recipients and 94 percent for permanent subsidy recipients – is higher than those seen in the family subsystem.[8] Despite high rates of placements and housing retention, the CoC saw the number of individuals newly enter the system increase by 25 percent between 2016 and 2019. As part of its continued effort, DHS has increased investment in PSH resources for FY20, ramping up CAHP housing matches to the PSH system since August 2019, and has seen an increase in monthly housing placements in 2020.

To aid in the CoC's understanding and strategic planning efforts for this population, TCP conducted an analysis in 2018 of the inflow and system use patterns of the unaccompanied men and women counted during that year's PIT count.[9] The inflow analysis brought a greater understanding of the different ways individuals are using the homeless services system; however, it raised questions on causation and led to taking a deeper look at prevention strategies further upstream. As a follow-up to the 2018 inflow analysis, TCP and DHS conducted a second, more qualitative analysis alongside PIT

[8] Per the System Performance Metrics as reported to HUD annually via the Homelessness Data Exchange.

[9] Results of the Inflow Analysis can be found at: www.community-partnership.org/facts-and-figures

2019, called "Point-in-Time Plus."[10]

The 2019 PIT Plus survey was conducted with a statistically significant sample of unaccompanied individuals who were either accessing shelter or transitional housing, a day or meal program, or who were engaged by outreach teams. The survey helped to expand the CoC's knowledge about the challenges faced by unaccompanied individuals and uncovered opportunities to address these issues. The main takeaways include:

- A lack of employment and income were the largest drivers of homelessness cited by respondents. When asked what might have helped prevent their experience of homelessness, employment exceeded rent or mortgage assistance by 20 percentage points.
- Thirty-three (33) percent of respondents said they were living in Maryland, Virginia, or another state prior to using homeless services in the District. This has important implications for how to work with CoCs in Metropolitan Washington to connect unaccompanied individuals to shelter and eventually sustainable housing resources.
- Many individuals have support or social networks that might prove useful for prevention and diversion efforts. Most people surveyed reported that they had networks that included friends, people who makes them feel comfortable or safe, and someone who will help them out when they are in need. For those with adult children, the overwhelming majority are still in communication with them and over 30 percent of respondents reported staying with friends or family when shelter is not an option. Connection to these networks may help to build on last year's launch of Project Reconnect, a diversion and rapid exit program for single adults.
- Two questions revealed opportunities to change client perceptions about shelter conditions to increase the use of available shelter and about benefits eligibility to increase applications to benefits.
- Most respondents were previously incarcerated and most experienced homelessness immediately after incarceration. Additionally, 30 percent of respondents had previously been in a residential treatment facility and almost 60 percent exited that treatment into homelessness.

These and other lessons learned were documented in a progress report from the ICH, entitled "Homeward DC: Looking Back to Move Forward - Progress and Lessons Learned During the First Four Years of Implementation." *Homeward DC 2.0*, the second iteration of the District's strategic plan, builds on these lessons and outlines dozens of new strategies. The plan was approved by the ICH in March 2020 and is expected to be released later this year.

2020 Point-in-Time Results: Characteristics and Service Needs

Surveys conducted with adults – both unaccompanied and in families – during PIT update and inform the CoC on the demographic make-up, service needs, barriers to housing, and economic indicators of persons experiencing homelessness. Publicly funded programs in the District administer the PIT survey and include the collected information in HMIS. Although the same information is collected throughout the year by these providers, TCP queries the HMIS for information on persons served on the PIT date to inform the count. Providers that do not use the HMIS (domestic violence programs, privately funded providers, etc.) send the survey information from their program participants to TCP for the purposes of having similar information on the entire population

[10]Results of the Point-In-Time Plus Survey can be found at: www.community-partnership.org/facts-and-figures

experiencing homelessness.[11]

The following tables detail the rates at which adults reported living with various disabling conditions or their affiliation with various subpopulation categories. The CoC uses this information to develop programming that addresses the disability or subpopulation specific-related service needs seen among the persons counted at PIT.

REPORTED DISABLING CONDITIONS AMONG ALL ADULTS						
	Unaccompanied Adults 2020	Unaccompanied Adults 2019	Adults in Families 2020	Adults in Families 2019	Total (All Adults) 2020	Total (All Adults) 2019
Substance Abuse (SA) History (Only)	9.3%	9.4%	0.6%	1.1%	7.5%	7.7%
History of Mental Illness (MI) (Only)	22.5%	18.3%	11.5%	5.8%	20.3%	18.0%
Dual Diagnosis (SA & MI) (Only)	13.3%	12.5%	1.4%	1.9%	10.9%	10.2%
Chronic Health Problem	22.4%	21.1%	1.9%	6.5%	18.2%	17.9%
Developmental Disability	5.6%	4.0%	1.0%	2.3%	4.6%	3.6%
Living with HIV/AIDS	2.3%	3.0%	0.1%	1.1%	1.9%	2.6%
Physical Disability	20.3%	16.3%	3.1%	5.8%	16.8%	14.1%

The characteristics and service needs reported during PIT are typically consistent from year to year, with disabling conditions and subpopulation affiliation being more prevalent (in most categories) among unaccompanied persons as compared to adults in families. The rates at which unaccompanied individuals and adults in families report different life experiences show some notable differences. In particular, the rate of past experiences of domestic violence is higher for adults in families than for unaccompanied individuals. Conversely, the rate of having resided at some point in an institutional setting, which includes incarceration as well as inpatient hospital stays, is higher for individuals than for adults in families.

REPORTED SUBPOPULATION AFFLIATION AMONG ALL ADULTS						
	Unaccompanied Adults 2020	Unaccompanied Adults 2019	Adults in Families 2020	Adults in Families 2019	Total (All Adults) 2020	Total (All Adults) 2019
Domestic Violence	19.8%	20.7%	30.3%	32.3%	21.9%	23.2%
Limited or No English Proficiency	5.1%	4.0%	4.0%	5.7%	4.9%	4.4%
U.S. Military Veteran	7.5%	7.6%	1.5%	0.5%	6.2%	6.0%
Formerly in Foster Care	9.9%	9.4%	11.1%	9.7%	10.2%	9.5%
Resided in an Institutional Setting	47.1%	41.0%	14.0%	10.6%	40.3%	34.5%

[11] Information from domestic violence programs does not include the program participants' names or program locations.

While PIT data for unaccompanied persons is usually reported out on that group as a whole, TCP conducts a gender-based analysis of the information collected to look at the differences between unaccompanied men and women[12] (as shown in the tables below). Since women make up only 27.9 percent of the total population of unaccompanied persons, this unequal distribution can have the effect of statistically "diluting" women's characteristics and experiences when considering the unaccompanied population at large. One example of where this bears out is the differing rates of mental health histories among women as compared to men.

REPORTED DISABLING CONDITIONS AMONG UNACCOMPANIED ADULTS						
	Unaccompanied Men 2020	Unaccompanied Men 2019	Unaccompanied Women 2020	Unaccompanied Women 2019	Total (All Adults) 2020	Total (All Adults) 2019
Substance Abuse (SA) History (Only)	11.1%	11.6%	4.6%	3.5%	9.3%	9.4%
History of Mental Illness (MI) (Only)	19.9%	15.5%	29.2%	26.0%	22.5%	18.3%
Dual Diagnosis (SA & MI) (Only)	13.1%	12.6%	13.9%	11.9%	13.3%	12.5%
Chronic Health Problem	21.5%	18.7%	24.7%	27.7%	22.4%	21.1%
Developmental Disability	5.7%	4.2%	5.1%	3.6%	5.6%	4.0%
Living with HIV/AIDS	2.5%	2.7%	2.0%	3.6%	2.3%	3.0%
Physical Disability	21.2%	16.0%	17.9%	17.3%	20.3%	16.3%

Like the information collected regarding persons living with disabling conditions, there are differences between unaccompanied men and women's characteristics and experiences, particularly for reported histories of domestic violence as highlighted in the following table.

REPORTED SUBPOPULATION AFFLIATION AMONG UNACCOMPANIED ADULTS						
	Unaccompanied Men 2020	Unaccompanied Men 2019	Unaccompanied Women 2020	Unaccompanied Women 2019	Total (All Adults) 2020	Total (All Adults) 2019
Domestic Violence	10.5%	13.0%	43.4%	42.20%	19.8%	20.7%
Limited or No English Proficiency	5.5%	4.4%	4.2%	3.20%	5.1%	4.0%
U.S. Military Veteran	9.2%	9.0%	2.8%	3.50%	7.5%	7.6%
Formerly in Foster Care	8.9%	7.9%	12.3%	13.90%	9.9%	9.4%
Resided in an Institutional Setting	51.9%	43.7%	34.5%	33.60%	47.1%	41.0%

[12] "Unaccompanied Men" and "Unaccompanied Women" comprises all male- or female-*identifying* single adults, this includes all transgender single adults in the gender category of their identification. Single adults whose gender identity is not binary (i.e. male or female) are included in the totals for all single adults.

Income & Employment

The tables below provide income information for unaccompanied individuals and adults in families, including whether they receive income of any kind, whether they are employed, and the primary income source for those with some type of income. While information collected at PIT continues to show that most persons experiencing homelessness have some type of income, only 16.7 percent of individuals and 25.5 percent of adults in families report having employment as an income source.

The differential between wages relative to rental costs has not changed significantly for low-income households over the last several years, remaining a primary driver of homelessness in the community as it leads to both system inflow and makes system exits difficult for those who do not qualify for permanent financial supports. Any shock to the household (job loss, a health crisis, death, divorce, etc.) can lead to housing instability or housing loss. This instability is seen most keenly in the system serving unaccompanied individuals, where there is relatively less assistance available in terms of housing resources and income and food assistance.

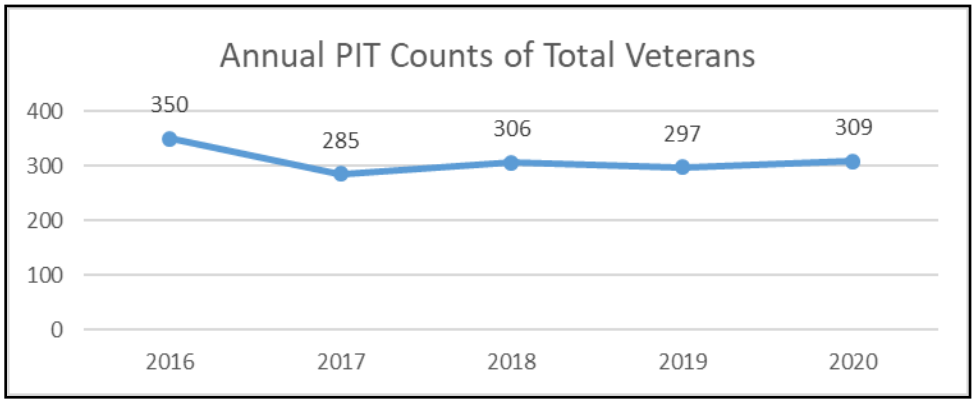
INCOME & EMPLOYMENT			
	Unaccompanied Persons 2020	Adults in Families 2020	Total (All Adults) 2020
Receives Income	55.1%	75.9%	59.3%
Employed	16.7%	25.5%	18.6%
PRIMARY INCOME SOURCE			
From Employment	30.5%	31.2%	30.4%
Social Security / Retirement	4.6%	0.3%	3.4%
SSI / SSDI / Disability	46.4%	13.8%	37.9%
TANF / Public Assistance	11.1%	51.0%	21.5%
Other Income Source	7.4%	3.8%	6.4%

2020 PIT Results: Subpopulation Highlights

Veterans

The District's count of veterans experiencing homelessness has increased by four (4.0) percent between the 2019 and 2020 PIT counts. Of the 309 veterans counted, 294 were unaccompanied individuals and 15 were persons in families. Though an increase overall, the number remains relatively flat with 12 more veterans counted year-to-year. Despite this year's increase, the number of veterans is still down from 2016 by 11.7 percent.

Through the efforts of the Veteran Leadership Team and CAHP workgroups, the CoC has had success in connecting known veterans to housing resources. Between the 2019 and 2020 PIT counts, the Veterans CAHP team housed an average of 29 veterans per month, totaling to more than the number of veterans counted at PIT 2019 PIT. Moreover, the Veteran Leadership Team continues to improve coordination among CAHP systems within the region. Since the summer of 2019, the CoC has helped more than 70 veterans reconnect with CAHP systems in surrounding jurisdictions based on history of housing and homelessness as well as client preferences. Additionally, a new veteran-specific permanent supportive housing program on the Walter Reed campus opened in 2019. Sixty-one (61) veterans experiencing homelessness obtained housing at the site with another 14 more placements to be made in 2020.



Despite ongoing work to end of veterans' homelessness, this year's increase is likely a result of overall increases in unaccompanied homelessness over the last few years, as the vast majority (95.1 percent) of veterans experiencing homelessness in the District are unaccompanied individuals.

Youth

The District continues progress towards the goals outlined in *Solid Foundations DC,*[13] the CoC's strategic plan to prevent and end youth homelessness and has made significant investments over the past year to serve the unique needs of youth experiencing homelessness. Now, in the middle of its third year of implementation and with new resources provided by the District, efforts include further refining the CAHP system for young people and expanding shelter, transitional housing, and permanent housing options available to youth experiencing, or at risk of experiencing, homelessness. The District's Youth Action Board, which was created in 2018 to ensure youth who have experienced homelessness have a role in planning services for this population, has served in a leadership role on several efforts over the past year.

The counts of Transition Age Youth (TAYs, young people aged 18 to 24 years) remained relatively flat between the 2019 and 2020 PIT counts, with 548 TAYs counted in 2020, an increase of two (2) from the previous year. However, there was a difference in the share of TAYs in families versus unaccompanied households between years. TAYs in families increased by 5.9 percent, whereas unaccompanied TAYs decreased by 5.8 percent. TAY-headed households have also increased 7.4 percent between 2019 and 2020. An increase in youth-headed households was also seen in the 2019 Homeless Youth Census, which TCP conducts each summer, a change from trends in past years.

In 2019, the District added new transitional housing beds and extended transitional housing (ETH) beds for youth with the highest needs. ETH allows for up to six years of housing placement with intensive supportive services, progressive engagement, and a housing first approach.

Through the collaborative effort of the ICH, DHS, TCP, the Youth Action Board, and other youth-serving partners, the District was awarded a $4.28 million grant under the Youth Homelessness Demonstration Program (YHDP) from HUD. Being a demonstration site has given the District an opportunity to conduct a thorough mid-plan review to examine where efforts under *Solid Foundations* are working and where there are gaps to fill. New resources from this award will be online in 2020.

[13] ich.dc.gov/page/solid-foundations-dc-comprehensive-plan-end-youth-homelessness

Lastly, at the beginning of 2020, the District launched Zoe's Doors – a 24-hour drop-in center for youth ages 24 and under. Zoe's Doors provides a safe, welcoming space for young people in the District, offering meals, laundry facilities, shower facilities, healthcare services, life skills workshops, connection to education and employment resources, and social supports.

Chronic Homelessness

Chronic homelessness is defined by HUD as persons who have experienced homelessness for a year or more, or who have had four or more episodes of homelessness in three years (which total at least 12 months), and who are living with a disabling condition. Families are considered to be experiencing chronic homelessness if at least one adult person in the household meets the definition of chronic homelessness.

The success on the family side of the homeless services system is highlighted in the significant reduction of families experiencing chronic homelessness in 2020 versus 2019. The rapid exit to housing provided by FRSP has helped keep families from timing into chronicity while in shelter, and has enabled families, specifically those who need longer term housing support, transition from rapid rehousing to permanent supportive housing or targeted affordable housing after shelter exit.

Relatedly, the small reduction in chronic homelessness among unaccompanied individuals points to the challenges the CoC experiences as many begin to meet the definition of chronic homelessness while waiting for a housing resource to enable their shelter exit. Despite CAHP's success in facilitating exits throughout the year, the existing resources for individuals experiencing chronic homelessness are generally at capacity and have low rates of turnover. While the CoC lauds its permanent supportive housing providers for helping participants maintain their housing, without additional resources the CoC's ability to make new placements will decrease over time. To that end the CoC continually looks to expand its permanent housing portfolio using all available resources.

CHRONIC HOMELESSNESS AMONG ADULTS				
	Unaccompanied Adults 2020	Unaccompanied Adults 2019	Adults in Families 2020	Adults in Families 2019
Experiencing Chronic Homelessness	41.5%	44.1%	6.1%	19.6%

Permanent Housing Solutions

As a part of the PIT count, TCP also counts formerly homeless persons – unaccompanied individuals and persons in families whose experience of homelessness ended upon entry into a dedicated housing resource. Most of these households would still be in emergency shelters, transitional housing, or living in unsheltered situations if not for these resources. At PIT 2020, 4,727 formerly homeless unaccompanied individuals and 4,074 formerly homeless families were in permanent supportive housing, rapid rehousing, or other permanent housing programs (such as targeted affordable housing).

	Number of Unaccompanied Individuals	Number of Family Households
Other Permanent Housing (e.g., TAH)	773	650
Permanent Supportive Housing	3,724	1,588
Rapid Rehousing	230	1,836
Total	4,727	4,074

Funding for these units comes primarily from the District, but also from HUD, the VA, and private sources. The resources have increased the number of permanent housing solutions the CoC is able to offer to persons experiencing homelessness, and the array of services provided at each have led to better matching of individuals and families to programs that meet their needs. While there is still work to do, the CoC recognizes resources like these are the key to achieving *Homeward DC*'s overarching goal of quickly connecting residents to permanent housing with the supports needed to maintain that housing over time.

Methodology notes

As in previous years, TCP coordinated with both District and Federal agencies, the ICH, and the CoC's public and privately-funded outreach providers, meal programs and drop-in centers, winter and emergency shelters, and transitional housing programs to complete the PIT count. The District's permanent housing programs also provide information for determining the number of formerly homeless persons. To determine the unsheltered portion of the PIT count, TCP again engaged roughly 300 trained volunteers and professional outreach workers to canvass the District between 10:00 PM and 2:00 AM.

For the 2020 PIT count, nearly 90 percent of the PIT information collected at shelter and supportive housing programs comes from HMIS, with service providers that use HMIS submitting rosters and demographic information of persons served on the night of the count. Providers that do not use the HMIS instead conduct PIT surveys with their program participants and submit these to TCP; TCP in turn aggregates this with HMIS information to produce the final, District-wide count and survey results.

In addition to HMIS, TCP used Survey123 for ArcGIS to complete the PIT Survey. Survey123 for ArcGIS is a phone application that allows volunteers to collect survey data and location data quickly and accurately. This smart survey uses skip logic, prompts volunteers with hints on how to best ask a question, and requires certain questions be answered so the data collected is accurate and high quality. A unique username and password were required to access the survey, which ensured that the data was submitted securely. Surveys were automatically removed from the individual device upon successful upload.

This methodology ensures the PIT count is thorough, unduplicated, and accurately reflects the size and scope of the population of persons experiencing homelessness on a given night.

Fairfax County, Virginia

DESCRIPTION OF HOMELESS SERVICES

In 2008, the Fairfax County Board of Supervisors established the Office to Prevent and End Homelessness (OPEH) to manage, coordinate and monitor day-to-day implementation of the community's 10 Year Plan to End Homelessness. OPEH supports the Fairfax-Falls Church Community Partnership to Prevent and End Homelessness which engages nonprofits, businesses, faith-based communities, county agencies, and those with lived experience in its efforts to ensure that homelessness is brief, rare, and one time. OPEH also works closely with the independent Governing Board of the Fairfax-Falls Church Community Partnership as well as a wide range of committees and workgroups to build awareness and provide strong leadership to address community-wide goals. OPEH partners with a wide range of non-profit and governmental partners who provide the entire spectrum of homeless services, including outreach, homelessness prevention, rapid re-housing (RRH), emergency shelter, hypothermia prevention, transitional housing, permanent supportive housing (PSH) and other permanent housing. Our Continuum of Care (CoC) continues to increase the number of people moving into permanent housing by applying Housing First strategies, including the utilization of mainstream resources, RRH, and the expansion of PSH. OPEH manages the Homeless Management Information System (HMIS) and acts as the CoC Lead Agency, preparing and submitting the CoC application and ensuring compliance with all US Department of Housing and Urban Development (HUD) mandates.

During the past year, the Fairfax-Falls Church Community Partnership to Prevent and End Homelessness focused on the following core areas:

- Emergency Shelter Redevelopment and Supportive Housing Expansion – A public finance bond that included four of Fairfax County's year-round emergency shelters passed in November 2016. The bond provides $48 million over the next several years to renovate the 30-year old shelters that serve both single individuals and families experiencing homelessness. In November 2019, the doors were opened on the newly renovated Bailey's Shelter and Supportive Housing, which is the first facility that has been redeveloped. The new facility replaced the existing 48 emergency shelter beds serving single individuals experiencing homelessness and implemented a new model, which includes co-located emergency shelter and permanent supportive housing. Not only did the project add 18 new units of permanent housing to the homeless services system, but also added four medical respite beds, which doubled the system's capacity to serve those who are experiencing homelessness and recovering from illness, surgery, and other medically-related events. The total number of emergency shelter beds is 52. Planning is underway for the other shelters included in the bond.
- Racial Equity Initiatives – Fairfax County established a community-wide commitment known as 'One Fairfax' to consider equity in decision-making and in the development and delivery of future policies, program and services. Following the adoption of the One Fairfax policy in 2017, the Fairfax County Board of Supervisors created a Chief Equity Officer position charged with leading the county's efforts to address social and racial inequities and move from acknowledgment and identification of issues, to change. An equity lead was appointed in each county department, including the Fairfax County Office to Prevent and End Homelessness (OPEH). The CoC's momentum to examine its homeless programs and

systems for racial disparities coincided with the county's development of a formal structure to support community-wide change. The CoC convened a Racial Equity Data Committee in 2018, comprised of diverse representation from nine different nonprofit and county agencies, to compile data to further understand the disproportionate representation of minorities entering the homeless system, analyze outcomes to identify differences, and develop recommendations to address disparities. To begin to address the disparities identified thus far by the Racial Equity Data Committee and align with the county initiatives designed to produce change, the Office to Prevent and End Homelessness established an Equity Guiding Statement and Equity Impact Plan in 2019. The CoC also partnered with Race Forward and GARE to provide a CoC-wide training in December 2019 on racism and racial equity, which was attended by 19 agencies and more than 130 people.

- Coordinated Entry System – The continued refinement of our Coordinated Entry System (CES) remained a top priority in 2019. The Coordinated Entry System Manager, based in OPEH, engaged direct service providers and other partners in an extensive review of all project types and released a 2nd edition of the Coordinated Entry Manual in 2019. In addition to the programs mandated to participate (all programs funded by the Federal, State or County Government), several collaborative partners are utilizing the CES to select participants for their programs because they recognize the efficiency and effectiveness of this newly designed system. Ongoing connection to housing resources has continued to be supported through Prioritization Pool and By-Name List meetings.
- Built for Zero – In October 2018, the CoC joined Built for Zero, a national change effort that allows communities to partner with a team of dedicated coaches, key federal agencies, and peers that are also devoted to ending homelessness. As a result of the technical assistance provided, momentum generated by CoC leadership, and commitment of nonprofit partners, the CoC enhanced its real-time, by-name list of all single individuals experiencing homelessness in the community. Custom reports were developed within the Homelessness Management Information System in 2019 to more easily capture active, inactive, in-flow, and out-flow data, which is compiled and analyzed on a monthly basis. Homeless service providers also started to attend monthly in-person meetings to match individuals to housing opportunities. After a year of implementing these best practices, the CoC has started to see results. In January 2019, there were 476 active chronically homeless single individuals identified and as of January 2020, there were only 322 chronically homeless single individuals, which is a 32 percent decrease.
- HMIS Governance – OPEH, as the HMIS Lead, established a HMIS Super User Committee to promote collaboration with the non-profit providers utilizing the database. Several subcommittees were developed to focus on core system needs, including system administration and compliance, training, data quality, and data analysis. The chair of each subcommittee is held by a non-profit partner and all chairs participate on the HMIS Steering Committee. Members of the Committee and Subcommittees serve as liaisons between OPEH HMIS staff and partner agencies/programs. This ensures that partners have to ability to make recommendations for changes and upgrades, enhance training curriculum development and implementation, support the collection of high-quality data, and develop a deeper understanding of existing reports and data.

EMERGENCY SHELTER AND TRANSITIONAL HOUSING

Fairfax County has a total of ten shelters in its jurisdiction operating year-round. All shelters are operated by non-profit partner organizations, majority of which have funding through county contracts. There are two shelters that exclusively serve households without children. There is one shelter that serves both households with and without children. Two of the shelters serving single adults have medical respite beds. There are three shelter programs serving households with children, two utilizing congregate facilities and one using leased apartments. Three facilities are dedicated to serving households with and without children fleeing domestic violence, one of which was a new addition in 2019. The new domestic violence shelter added 28 emergency shelter beds for this population. There is one shelter designated to youth ages 13-17. The emergency shelter capacity overview is also outlined below:

- Single adults (2 shelters);
- Single adults and Families (1 shelter);
- Families (3 shelters);
- Domestic Violence Survivors (3 shelters);
- Youth shelter (1 shelter, for ages 13 -17 years)

These shelters provide overflow beds as needed throughout the year. Overflow is primarily used during the winter but can be used for extreme heat or other emergencies as well. In addition, there are five hypothermia prevention programs designed to serve single adults that are operated in three fixed sites and two that rotate among faith-based congregations.

There are two transitional housing programs that serve single adults in Fairfax County. The programs serve transitioning age youth who are still attending Fairfax County Public Schools and no longer reside with their families. All other transitional housing programs for single adults have been closed over the past few years. There are six transitional housing programs for households with children. Two of these programs exclusively serve people impacted by domestic violence. Three serve very young mothers and their children and one serves families with many barriers to attaining and sustaining permanent housing. These programs are operated by non-profit agencies with various combinations of private, county, and federal funding. Overall, transitional housing inventory has decreased significantly due to shifting priorities and reallocations of HUD CoC Program funding.

Inventory of Emergency Shelter and Transitional Housing Beds			
Program Type	Beds for Individuals	Beds/Units for Persons in Families	All Year-Round Beds
Hypothermia/Overflow/Other (Additional Winter Capacity)	271	32/not applicable	N/A
Emergency Shelter Beds	140	265/62	405
Domestic Violence Emergency Shelter Beds	25	70/30	95
Transitional Housing Beds	27	220/69	247
TOTALS	463	587/161	747

Overflow beds are available for both individuals and persons in families as necessary throughout the year.

HOMELESS POINT-IN-TIME RESULTS

As shown in the table below, the overall Point-in-Time Count (PIT) in 2020 increased by 7 people or 1% from the 2019 PIT, from 1034 people to 1041 people. This is the 4th consecutive year in which the total number of persons identified to be experiencing homelessness during the night of the PIT Count has increased.

HOMELESS COUNT BY CATEGORY								
Category	2020	2019	2018	2017	2016	% Change 2017 to 2020	% Change 2018 to 2020	% Change 2019 to 2020
Total # Counted	1041	1034	987	964	1059	7%	5%	1%
Total # of Singles	513	508*	499**	492***	482	4%	3%	1%
Total # of Families	161	150	151	142	179	12%	6%	7%
Total # of Persons in Families	528	526	488	472	577	11%	8%	0.4%
Total # of Adults in Families	210	197	190	186	236	11%	10%	6%
Total # of Children in Families	318	329	298	286	341	10%	6%	-3%

*includes one youth only household
**includes two youth only households
***includes three youth only households

This year's PIT enumeration documented an increase of 7% in the number of families, but less than a 1% increase in the number of persons in families between the 2020 PIT Count and the 2019 PIT Count. There was an increase of 6% in the number of adults in families and a decrease of 3% in the number of children in the families.

There was a 1% increase among the single adult population between the 2020 PIT Count and the 2019 PIT Count. The utilization rates across program types in the 2019 and 2020 PIT Counts were similar. The number of single adults experiencing unsheltered homelessness decreased by 1%, which is following a 3% increase between the 2018 and 2019 PIT Counts. There was no change between 2019 and 2020 PIT Counts in the number of single individuals served in hypothermia shelter.

The number of persons experiencing chronic homelessness decreased; from 218 (comprised of 213 individuals and 5 households) in 2019 to 180 (comprised of 174 individuals and 6 households) in 2020. This is the first year since 2015 there has been a decrease in chronic homelessness between the annual PIT Counts. The CoC continues to have a minimal number of chronically homeless families; this year there were 6 families experiencing chronic homelessness on the night of the PIT count.

Overall, single individuals represented 49% and people in families with children represented 51% of all people counted on the night of the 2020 PIT Count. This is the same percentage as the previous year and the second consecutive year in which there were more people in families than there were single individuals. Among adults in families, 83% were female and 17% male. Among single individuals, 70% were male, 29% female, and 5 were transgendered or did not identify as male, female, or transgendered. Children under age 18 in families made up 31% percent of all persons

counted. There were no unaccompanied minors in emergency shelter on the night of the 2020 PIT Count. Youth households, consisting of families where all members were under the age of 25, comprised 13% (20) of the families and 9% (47) of the single individuals.

HOMELESS SUBPOPULATIONS			
	Individual Adults	Adults in Families	TOTAL
Substance Abuse Disorder	41	10	51
Severe Mental Illness	142	32	174
Physical Disability	89	11	100
Chronic Health Problems	87	10	97
Domestic Violence–History	85	103 households	188
Domestic Violence–Current	41	52 households	93
Limited English Proficiency	71	40	111
U.S. Military Veteran	30	3	33

The major subpopulations are noted in the chart above and were similar to previous years' numbers. In addition, among single adults, 25% were reported as employed and 54% percent reported having any income with 5% receiving income from panhandling. In families, 56% of persons age 18 and over were employed and 73% reported having some source of income with <1% receiving income from panhandling. The percentage of both people in families and single individuals who were employed and who have regular income increased slightly. For single individuals, 36% were reported as having a substance abuser disorder or were seriously mentally ill, or both, which is slightly less than the number from last year. Among families, 32% percent were homeless due to domestic violence, a small decrease from 39% last year.

The number of veterans reported to be experiencing homelessness on the PIT decreased from 41 in 2019 to 33 in 2020. This decrease is attributed to the additional resources dedicated to this population as well the continuing collaboration amongst the community partners that serve veterans and their families.

PERMANENT, PERMANENT SUPPORTIVE HOUSING, AND RAPID RE-HOUSING PLACEMENTS

Our CoC continues to focus on moving people from homeless situations into permanent housing. During FY2019, a total of 814 households (1432 persons) moved into permanent housing from the mainstream county shelters. This is a slight increase from the 808 households (1373 persons) that moved into permanent housing in FY2018. Various strategies were used to support the exits to permanent housing, including efforts by our housing locators and case managers to find affordable housing in the rental market, as well as increasing access to RRH resources, PSH, and other permanent housing options.

During FY2019, a total of 86 households (107 persons) entered a PSH program via new funding opportunities or vacancies in existing programs. This is a slight decrease from FY2018 in which there were 97 households (118 persons) placed in a PSH program. The ability to continue development of PSH in our community, as resources decline, will be an important part of ending chronic homelessness among single individuals and adequately serving families with heads of households that have significant disabilities.

RRH continues to be an integral part of our CoC's homeless services system. During FY2019, a total of 752 households (1492 persons) exited rapid rehousing services to a permanent housing destination, which is nearly 75% of those that exited during the fiscal year. Although the total households that exited is a slight decrease from FY2018 when 799 households (1515) exited to permanent housing destinations, the percent that exited to permanent housing increased from 66% to 75%. The RRH totals include any individual who received housing search and placement services, housing stability case management, or rental assistance. A range of funding was utilized to provide RRH assistance, including the federal Emergency Solutions Grant (ESG) program and the Commonwealth of Virginia's Homeless Solutions Program, along with funding from the County of Fairfax and private donations. In addition to these ongoing programs, our community has obtained HUD CoC Program funds during the FY2018 competition to create a new RRH project designated exclusively to households experiencing homelessness as a result of domestic violence, which was implemented in December 2019.

Recent challenges to expanding permanent housing options include the increase in the already high local rental costs and the continuing shortage of very low-income housing in Fairfax County. Despite these significant challenges, progress is being made as our CoC continues to move forward with critical system changes and an ongoing commitment to preventing and ending homelessness in our community.

Frederick City and Frederick County, Maryland

Description of Homeless Services:

Frederick County, Maryland is fortunate to have a wide-range of governmental, private non-profit, and faith-based organizations that together have established an almost seamless service delivery system targeted to addressing the needs of homeless individuals and families. Major providers of homeless services include the Advocates for Homeless Families, Frederick Community Action Agency, Frederick Rescue Mission, Heartly House, Religious Coalition for Emergency Human Needs, Mental Health Management Agency of Frederick County, Student Homelessness Initiative Partnership of Frederick County, and the St. Vincent de Paul Society - all of these organizations are active members of the Frederick County Coalition for the Homeless.

Established in 1983, the Frederick County Coalition for the Homeless (FCCH) is the oldest local coalition working to end homelessness in Maryland. The FCCH is a coalition comprised of governmental and non-profit human service and community development organizations, religious institutions, for-profit businesses such as banks, local government officials, interested citizens, and homeless and formerly homeless persons. The FCCH meets monthly in order to coordinate the planning of local homeless services, discuss local needs and approve new projects, and advocate for additional resources to address homelessness.

Homeless Point-In-Time Results:

The most recent Point-in-Time Survey for both sheltered and unsheltered homeless populations was conducted on January 24, 2020. All emergency shelter, transitional housing, permanent supportive housing, and motel placement providers were instructed on how to use the survey instrument and when to conduct the Point-in-Time Survey. Whenever possible, surveys were to be completed directly by people experiencing homelessness; however, shelter staff could utilize HMIS or administrative data if a person was unable to directly complete the survey. A total of 308 persons experiencing homelessness completed the point-in-time survey; the largest household type was single-individuals. This year, the FCCH made a better use of available HMIS data, which improved the accuracy of the PIT count.

The Point-in-Time Survey instrument contains specific questions regarding all HUD-defined homeless subpopulations (e.g., veterans, alcohol abuse problem, drug abuse problem) and contains specific questions about the length of time that a respondent has been homeless.

Category	2020	2019	2018	2017
Total Number Counted	308	286	316	309
Total Number of Singles Individuals	238	212	207	217
Total Number of Families	25	27	36	32
Total of Persons in Families	70	74	109	92
Total Adults in Families	28	28	47	39
Total Children in Families	42	46	62	53

EMPLOYMENT	
Category	Total Number Employed
Total Number of Single Individuals	56
Total Number of Adults in Families	18
Total Number of Children in Families	0

SUBPOPULATION DATA			
Subpopulations	Single Individuals	Persons in Families	Total
Substance Abuse	50	8	58
Serious Mental Illness	37	3	40
Dually Diagnosed	40	2	42
U.S. Veteran (adults only)	5	0	5
Living with HIV/AIDS (adults only)	1	0	1
Domestic Violence Survivor – Current Episode (adults only)	5	4	9
Physical Disability (adults only)	37	2	39
Chronic Health Problem (adults only)	25	5	30
Limited English (adults only)	4	2	6
Chronically Homeless	144	5	149

According to the 2020 Point-In-Time data, homelessness in Frederick County increased by a total of 22 persons from the 2019 PIT count of 286 persons. It is important to keep in mind that the Point-in-Time survey is a "one-day snapshot" of homelessness and may not be reflective of all trends experienced in a local jurisdiction.

Veteran homelessness has decreased significantly in Frederick County and local providers and advocates have submitted an application to the U.S. Interagency Council on Homelessness (USICH) in order to declare that Frederick County has "effectively ended veteran homelessness". The application was submitted to the USICH on December 6, 2017.

Permanent Supportive Housing:

There are two programs that offer Permanent Supportive Housing (PSH) for people experiencing homelessness in Frederick County. The Continuum of Care (CoC) Housing Program is operated by the Mental Health Management Agency of Frederick County in partnership with the Maryland Department of Health, Behavioral Health Administration. The CoC Housing Program serves both families and individuals experiencing homelessness and diagnosed with a serious behavioral health issue. The program has 4 units with 8 beds for homeless families and 19 units with 19 beds for single individuals (there is fluidity with beds for families and individuals based on openings and needs).

The second program is a Housing First Program that is operated by the Frederick Community Action Agency. As the program name implies, this program serves chronically homeless individuals that have one or more disabling conditions. The Housing First Program has 21 units with a total of 26 beds (two units are two-bedroom units that are shared by unrelated roommates and two units are currently leased to couples). At present, the Frederick Community Action Agency is partnering with the Housing Authority of the City of Frederick in order to apply for HUD Housing Choice Vouchers specifically designated for people with disabilities who are homeless.

Rapid Re-Housing (RRH) programs are gaining acceptance in Frederick County, but low vacancy rates in rental housing combined with high rents for the housing that is available are making the program more difficult to implement. Both Advocates for Homeless Families and Heartly House have established RRH programs and the programs are growing as more resources are devoted to RRH. However, gentrification, combined with virtually no efforts to preserve affordable rental housing, is having a devastating impact on lower-income renters in Frederick County; families are being "priced-out" of the rental housing market, especially in downtown Frederick.

Loudoun County, Virginia

Description of Homeless Services

The Loudoun County Continuum of Care (CoC) provides a broad range of services to the community to assist residents who experience a housing crisis. The Continuum of Care is a network of county and community partners that work together to provide quality services to assist households that are homeless or at-risk of becoming homeless. The following is a description of the Homeless Services provided by the Loudoun County Continuum of Care.

- Hypothermia Shelter
  Hypothermia Shelter is a seasonal (November 15 – March 31) emergency shelter that provides residents a warm place to go during winter months. Transportation is provided and services include access to showers, laundry facilities and meals (dinner and breakfast).

- Coordinated Entry System Intake Line
  Coordinated Entry is a streamlined system developed to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed, referred, and connected to housing and supportive services based on their strengths and presenting need. The Coordinated Entry System operates as the single point-of-entry for all homeless services.

- Domestic Violence Emergency Shelter
  The Loudoun Abused Women's Shelter (LAWS) provides a full array of comprehensive services to adult and child survivors of domestic and sexual violence. In addition to providing emergency shelter, LAWS also delivers assistance to survivors at its Community Services Center where counseling, legal services, support groups, advocacy and community outreach is provided.

- Drop-In Services
  The Drop-In services provide a place for individuals experiencing homelessness to go during the day to take care of everyday needs and access services and supports. Access to showers, laundry facilities and other on-site services are provided.

- Emergency Shelter
  Emergency Shelter is designed to provide short-term emergency shelter for residents in the County that are homeless. The program provides households with housing-focused case management services for employment, housing location assistance, transportation and other critical areas of service to assist with housing stabilization.

- Homeless Management Information System (HMIS) Database
  The Homeless Management Information System is an information technology database used to collect client-level and program-level data on the provision of housing and services to individuals and families. The system reports aggregated data to assist with program monitoring and evaluation, benchmarks and outcome measures and fiscal management.

- Outreach and Engagement
  The Continuum of Care partners with the Project Assistance to Transition from Homelessness (PATH) Program through the Department of Mental Health, Substance Abuse and Developmental Services to conduct outreach and engagement to persons in the community

that are unsheltered and experiencing some type of serious mental health. PATH provides outreach and support to adults with serious mental illness that are homeless. The goal is to connect residents with primary behavioral healthcare, substance abuse services and other supports that enhance stability and functioning in the community.

- Permanent Supportive Housing (PSH)
  Permanent Supportive Housing is permanent housing with indefinite leasing or rental assistance paired with supportive services. The program assists persons (and families) who have an adult or child with a documented disability, and individuals with a history of chronic homelessness. The PSH program differs from other supportive housing programs due to the federally mandated eligibility criteria, such as individuals and families who meet HUD's definition of chronic homelessness, have the longest length of time homeless, and have been identified as having severe service needs such as serious mental illness, chronic physical disability or mental health diagnosis.

- Homeless Prevention & Diversion Services
  Prevention and Diversion Services are designed to assist individuals and families at risk of losing their housing. The program provides short-term financial assistance based on eligibility criteria along with case management services to stabilize housing, prevent rental evictions and divert households from entering the Emergency Shelter. The goal of the Homeless Prevention and Diversion program is to assist households by stabilizing their housing to minimize the likelihood of emergency shelter entry.

- Rapid Re-Housing (RRH)
  Rapid Re-Housing is an intervention, informed by a Housing First approach that is a critical part of our community's Coordinated Entry System. The Rapid Re-Housing program quickly connects families and individuals to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.

- Transitional Housing (TH)
  Transitional Housing is designed to provide individuals and families who are homeless, or at-risk of becoming homeless with the interim stability and support to successfully move to and maintain permanent housing.

- Youth Crisis Services
  A local non-profit operates a Crisis Care Program that provides youth ages 18-24 who are literally homeless with access to a variety of supportive services.

The Loudoun Homeless Services Center offers programs such as emergency shelter, permanent supportive housing, hypothermia shelter, and rapid re-housing. The Continuum of Care continues to make progress in providing comprehensive and inclusive services to expand the diversity of programming available to residents of the community. The Housing Inventory Count reflected below indicates the number of beds and units that were available on the night of the Point-in-Time Count.

Table 1

Housing Inventory Count (based on bed capacity on the night of January 22, 2020)

Year-Round Beds *Emergency Shelter**	Year-Round Beds *Transitional Housing*	Hypothermia Shelter Beds *November - March*	Permanent Supportive Housing Beds	Domestic Violence *Emergency Shelter Beds*
56	26	23	21	12

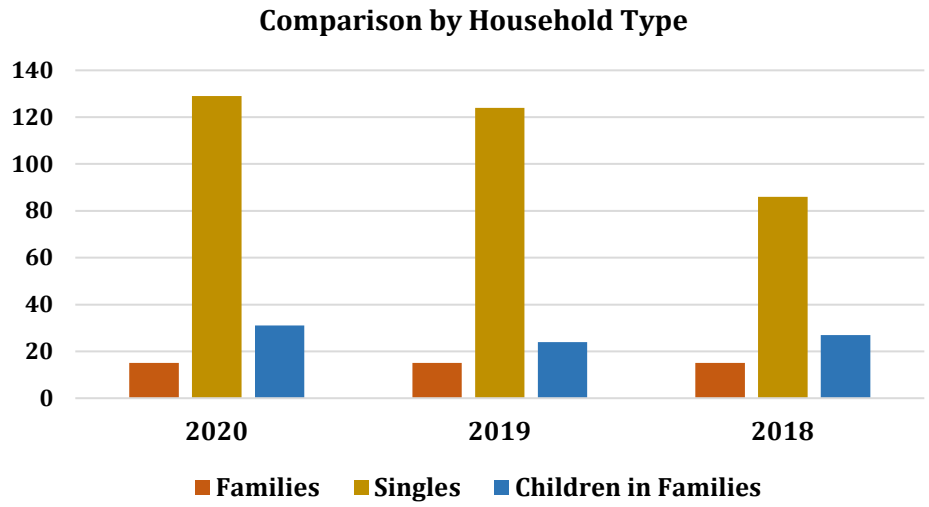
**Reflects the temporary reduction of beds due to shelter renovations*

Point-in-Time Count Results

The Loudoun County Continuum of Care (CoC) along with CoC's across the nation conducted the annual HUD Point-in-Time (PIT) Count on night of Wednesday, January 22 through Thursday, January 23, 2020. The methodology used for data analysis was provided through hardcopy surveys completed by staff at partnering organizations and throughout various county departments. There was a coordinated effort with local law enforcement, hospitals, nonprofits and others to ensure that unsheltered persons were connected to services and appropriate resources.

A total of 179 persons were experiencing homelessness in Loudoun County during the 2020 Point-in-Time Count. Of those, 129 were single adult households and 15 were identified as family households. There were 31 children and 19 adults represented in those households with a total of 50 persons in family households experiencing homelessness on that night. These numbers represent a 5.9% increase in the number of persons who were homeless compared to the 2019 PIT Count. The chart below reflects comparison totals for the PIT Count by household type over the past three years:

Chart 1

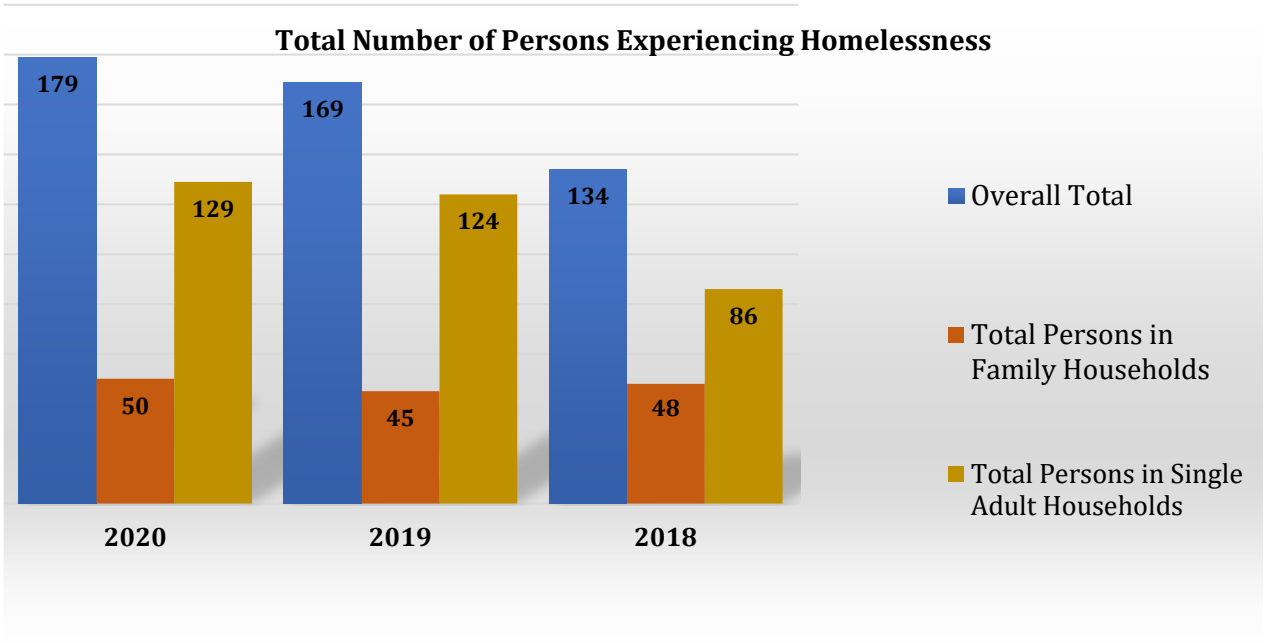


In Loudoun County, the overall number of persons experiencing homelessness on the night of the Point-in-Time Count has increased. However, for families experiencing homelessness, the totals continue to remain consistent. Loudoun County currently has five HUD VASH (VA Supportive Housing) vouchers, with two currently leased-up. The county continues to work with the Supportive Services for Veteran Families (SSVF) program to ensure that veterans experiencing or at-risk of homelessness are connected to housing resources and services quickly. In addition to the VASH vouchers, the Department of Family Services works closely with the Office of Housing and other community partners to provide Family Unification Program (FUP) vouchers to households that are currently working with young adults aging out of Foster Care.

The efforts of the Point-in-Time Count reflect two categories of households experiencing homelessness. The first category is households that are sheltered, yet still meet the criteria of homeless per the HUD definition (e.g. residing in an emergency shelter, transitional housing program or hotel/motel being paid for by a third party). Loudoun County currently has two homeless emergency shelters, one of which was closed due to renovations, and one shelter for survivors of domestic violence. The second category are households that are unsheltered and residing in places not intended for human habitation (e.g. tents, vehicles, parking garages, etc.).

The following chart depicts the overall count for persons experiencing homelessness in Loudoun County over the past three years:

Chart 2



Demographics and Subpopulations

The most commonly reported subpopulation among households (including both single and family households) for the 2020 PIT Report is chronically homeless, with a total of 23 individuals. The second highest reported subpopulation among all households is households where the Head of Household has a Serious Mental Illness diagnosis (SMI), with a total of 12 individuals.

The subpopulations reflected in the report represent all adults in each household, including both single adults and families. Children in family households are not reflected in the total count of subpopulation results. The total percentage of individuals with a history of domestic violence increased from 2.4% in 2019 compared to 4.5% in 2020. The percentage increase was 50% among single adults. Additionally, there was a slight increase in individuals with limited English proficiency, 1.2% in 2019 compared to 2% in 2020.

Table: 2

Category	Subpopulations					
	Single Adults 2020	Adults in Families 2020	Percentage of Population 2020	Single Adults 2019	Adults in Families 2019	Percentage of Population 2019
Chronically Homeless	21	2	12.8%	37	2	23%
Chronic Health Condition	0	0	0%	3	0	1.8%
Domestic Violence (History)	6	2	4.5%	3	1	2.4%
Domestic Violence (Current Episode)	4	3	3.9%	2	6	4.7%
Foster Care	2	0	1%	5	0	3%
Formerly Institutionalized	1	1	1%	8	0	4.7%
Limited English	3	1	2%	1	1	1.2%
Physical Disability	2	0	1%	18	2	11.8%
Serious Mental Illness	11	1	6.7%	22	0	13%
Substance Abuse	8	0	4.5%	23	0	14%

**More than one person may identify with multiple subpopulations*

For the past several years, there have been questions as to the number of households that may not be considered homeless per the HUD definition yet are in living situations that are unstable, sporadic or temporary. For 2020, the Point-in-Time Count committee included the subcategory of couch-surfing on the PIT Count survey. Couch-surfing is typically a temporary stay in a series of other people's homes (e.g. friends, family, co-workers, etc.), by making use of improvised sleeping arrangements.

During the 2020 PIT Count, there were 31 households that were counted as meeting the criteria of couch-surfing. Of households that were couch-surfing on the night of the count, 11 were family households and 20 were single adult households. Although reporting the number of households that are couch-surfing is not federally required, including this number helps to create a clearer understanding of how many households in the community are having difficulty stabilizing their housing. It is important to note that the Point-in-Time Count is a one-day snapshot of residents in the community experiencing a housing crisis that has resulted in homelessness and most likely does not adequately represent the full scope of the issue.

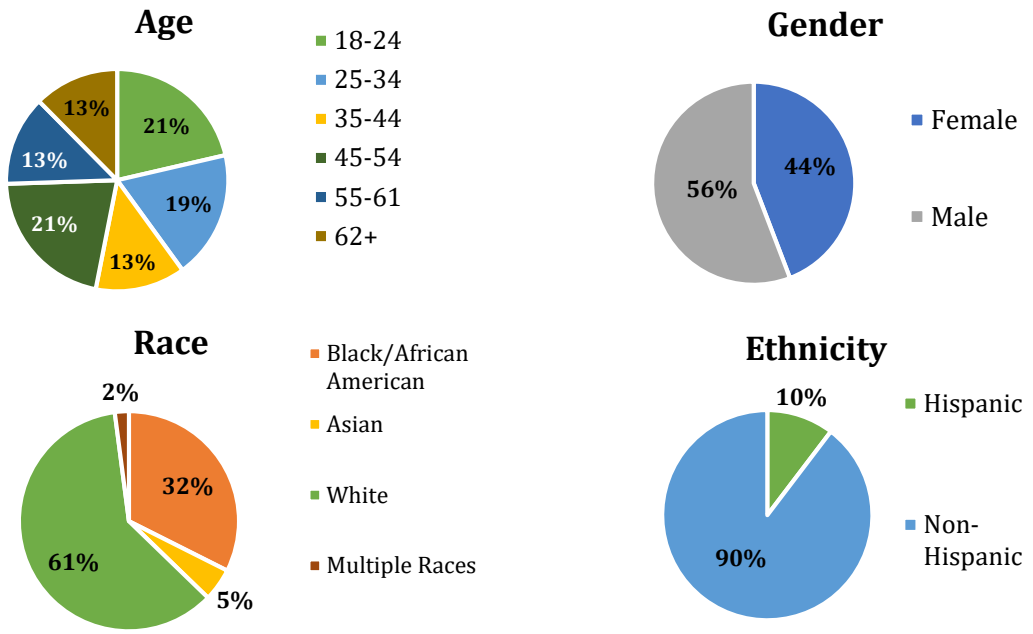
Employment

Of the 129 single adult households that were counted, 27 of those individuals were employed or 20.9%. Some single adult households are working two or three part-time jobs to make ends meet. With limited housing options and few single resident occupancy (SRO) units, many single adults are faced with minimal housing options.

Of the 15 households with children, all Heads of Households indicated the main source of income as employment. Several families and single adults receive mainstream benefits to help with household needs because employment income alone is not sufficient to support household costs. Supplemental services such as Social Security Disability Income (SSDI), Temporary Assistance for Needy Families (TANF), Supplemental Nutritional Assistance Program (SNAP) and other programs often contribute to the overall household income.

The Point-in-Time Count gathers demographic data to assess the diversity of households experiencing homelessness on the night of the count. The following charts indicate some categories included in the PIT Count. These data points are required by HUD and reflect only those persons who were included in the 2020 PIT Count as either sheltered or unsheltered.

Figure 1



Housing Programs and Supportive Services

Permanent Housing
Permanent Housing is housing that households are able to access and maintain with little to no outside support. The ultimate goal for all Continuum of Care (CoC) programs is to ensure that households that access homeless services receive the necessary tools while enrolled in the various programs, to help them achieve self-sufficiency upon program exit. All CoC programs, utilize a Housing First approach that aims to ensure stable housing first and then provide wraparound services to support the household in remaining housed.

Conversations across the region continue to include the issue of affordable housing. A lack of affordable, permanent housing opportunities remains one of the most significant and persistent obstacles to ending homelessness in our region, and certainly in Loudoun County. Throughout 2019, the Loudoun County Department of Family Services (DFS) which serves as the Lead Agency for the Loudoun CoC was a key participant in the development of the Loudoun County Human Services Strategic Plan (HSSP). Loudoun County, in partnership with local nonprofit organizations, developed the county's first, community-wide Human Services Strategic Plan, which provides a roadmap for implementing improved, coordinated systems of care that meet the county's human service needs in areas such as affordable childcare, health care, and housing. The plan was developed through a wide-ranging, collaborative effort by the Loudoun County government, the Community Foundation for Loudoun and Northern Fauquier Counties and the Loudoun Human Services Network. The HSSP has five major goals: 1) Close critical service gaps for vulnerable or underserved members of the Loudoun community; 2) improve health and wellness outcomes by addressing the social determinants of health that challenge the Loudoun community; 3) optimize access for people seeking services by integrating the Loudoun human services system; 4) meet the growing needs of the Loudoun community through the development and coordination of resources and funding practices; and 5) enhance the quality, capacity and delivery of services by strengthening the network of human services providers.

DFS has also been a major participant in developing the Unmet Housing Needs Strategic Plan. Loudoun County's Board of Supervisors directed that an unmet housing needs strategic plan be

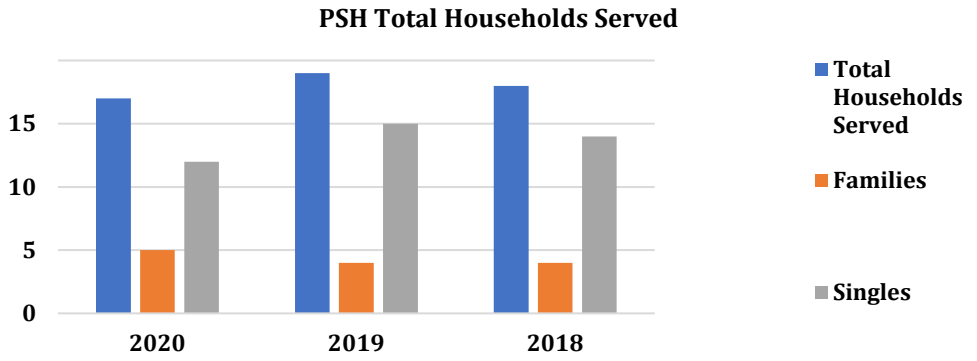
drafted as a key implementation step of the recently adopted Loudoun County 2019 Comprehensive Plan. The purpose of the Unmet Housing Needs Strategic Plan is to define how the county will address unmet housing needs in a systematic and comprehensive way with integrated programs. The plan has incorporated an open house for community and stakeholder input, topic-specific focus groups, a public hearing, and surveys for employers and county government employees. Key stakeholders included public and non-profit affordable housing developers/service providers, for-profit affordable housing developers and development/building industry and various county departments such as the Department of Family Services (DFS), Department of Mental Health, Substance Abuse and Developmental Services (MHSADS), Transportation and Capital Infrastructure, and Economic Development. For households exiting homelessness, affordability and accessibility often go hand-in-hand. Many households accessing services are struggling to cover rising housing costs while earning minimum wage salaries.

Permanent Supportive Housing (PSH)
The Permanent Supportive Housing (PSH) program is a federally funded program designed to serve residents of the community that have a history of chronic homelessness and a documented long-term disability. Residents enrolled in the program are able to remain stably housed with ongoing supportive services to ensure that they remain connected to needed resources. Permanent Supportive Housing is a long-term program where case management services are combined with mental/ behavioral health support to provide holistic care to program participants.

Loudoun County currently has 15 Permanent Supportive Housing units with a total of 21 beds within those units. The number of Permanent Supportive Housing (PSH) beds and/or units has not increased since the program's inception. The program accepts both single adults and families and is open to residents of Loudoun County. The Department of Family Services partners with a local non-profit to provide supportive services in collaboration with Loudoun County's Department of Mental Health, Substance Abuse and Developmental Services. The program has 7 units that are located on-site at the Loudoun Homeless Services Center and 8 units that are located throughout the community.

Below is a chart reflecting the total number of households served in the PSH program over the past few years:

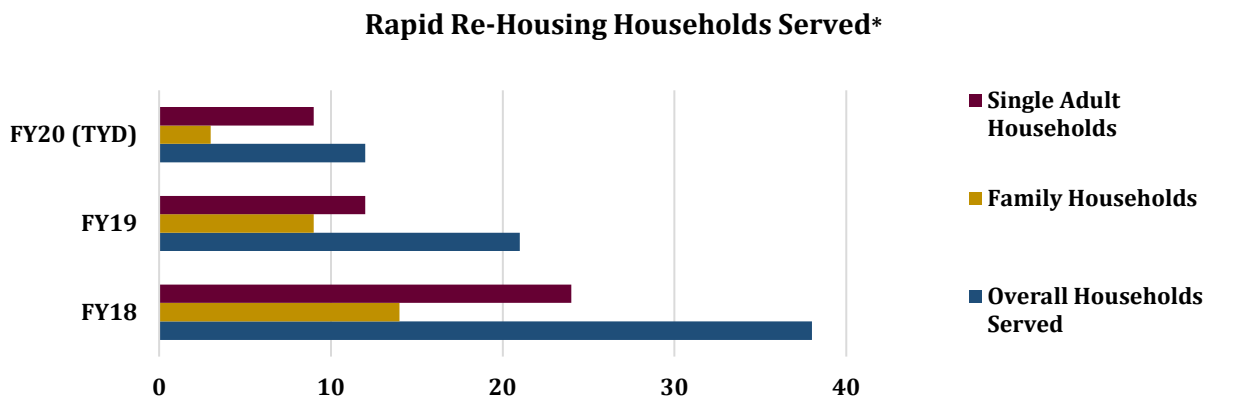
Chart 3



Rapid Re-Housing (RRH)
The Rapid Re-Housing program is a national best practice model that aims to transition households from homelessness to housing quickly and with needed supports. The main criteria for the Rapid Re-

Housing program is that the household meet the HUD definition of literally homeless to enroll in the program. Loudoun County currently has one (1) Rapid Re-Housing program that is provided through contract with a local nonprofit organization. The RRH program also provides Housing Location assistance to work with households in locating and securing viable housing options. Below is an overview of households served by the program over the past several years:

Chart 4



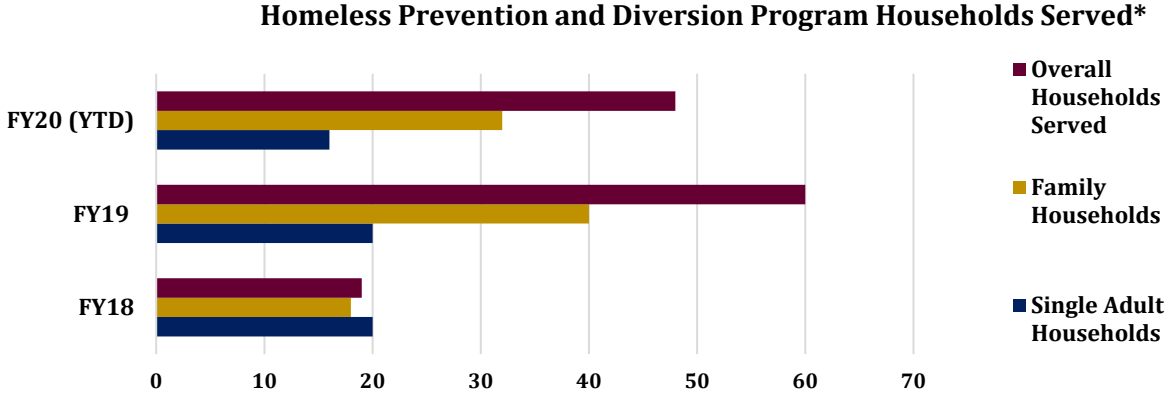
*Households served includes financial assistance and case management services.

Homeless Prevention and Diversion

The Homeless Prevention and Diversion program is a program that works to reduce the number of households that become literally homeless and enroll in the emergency shelter program. The goal of the Homeless Prevention and Diversion program is to prevent community residents from entering shelter by providing case management along with short-term financial assistance to help families and single adults remain housed. The program focuses on community outreach and engagement to ensure that households facing rental eviction or displacement are able to connect with case management staff and receive needed assistance and support.

Another component of the program is to divert households that are experiencing a housing crisis (expected to lose housing within 14 days) from becoming homeless. Diversion may include mediation with family or friends, advocating with landlords or property managers and many other strategies designed to keep households stably housed. Prevention and Diversion case management is designed to prevent households from becoming homeless and divert them from enrolling in the Emergency Shelter through proactive engagement and strategic advocacy in a timely fashion.

Chart 5



Loudoun County has a limited number of Transitional Housing (TH) units through partnership with local nonprofits that provide supportive housing with wraparound services. With a decrease in

federal funding for Transitional Housing programs, there is a need for strategic partnerships to help fill the gap of supportive housing for households that may need additional time to stabilize and increase their income.

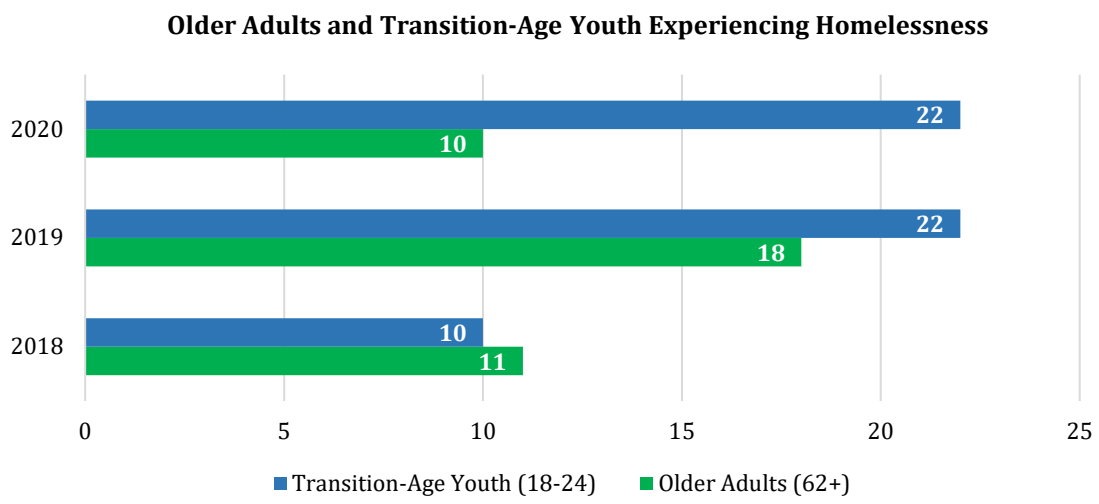
Older Adults, Transition-Age Youth and Unmet Housing Needs

For the 2020 PIT Count, 10 individuals were included that were 62 or older, with the oldest person being 75 years old. There were a total of 22 Transition-Age youth, with the youngest person being 19 years of age.

Housing needs can vary based on unique household needs; however, one consistency in both demographics is the need for stable income to assist with housing costs. While some Older Adults may be limited in terms of increasing their income due to physical limitations or health issues, Transition-Age Youth are often just launching in terms of establishing credit, exploring a career path and navigating the process of starting to live independently.

The Continuum of Care partners with youth services organizations within the community and throughout the region to serve youth and young adults who are on brink of homelessness or have become homeless due to a variety of circumstances. Services for those 62 and up includes collaboration with numerous community-based organizations to provide supportive services and assistance to Older Adults in the community in need of stabilizing their housing. Below is a chart reflecting the number of Older Adults and Transition-Age Youth experiencing homelessness over the past few years as indicated in the Point-in-Time Count:

Chart 6



While there are several programs to assist community residents in need of housing such as the Affordable Dwelling Unit (ADU) Program and the Housing Choice Voucher (HCV) Program, many of the households accessing Continuum of Care programs do not qualify for those programs due to various barriers, such as income requirements and positive credit history, and long waitlists. The language of affordable housing tends to be subjective based on the population demographic. Redefining what 'affordable housing' means in real world investments and housing stock diversity could include restructuring operational definitions for addressing a community's housing needs. Addressing the unmet housing needs for households at or below 30% Area Median Income (AMI), is a critical component to reducing the number of persons experiencing a housing crisis. No community is immune to homelessness.

Montgomery County, Maryland

DESCRIPTION OF HOMELESS SERVICES

The Montgomery County Homeless Continuum of Care (CoC) is a public-private partnership that includes state and local government agencies, non-profit service providers, landlords, and other stakeholders who have a role in preventing and ending homelessness. The Interagency Commission on Homelessness (ICH) serves as the CoC's governing board and the Services to End and Prevent Homelessness division of the Montgomery County Department of Health and Human Services is the Collaborative Applicant/ CoC Lead.

This year the ICH embarked on updating and revising the Montgomery County's strategic plan to end homelessness. This community-wide effort began in February 2019 and involved multiple stakeholders including elected officials, non-profit service providers, representatives from other systems of care, and government agencies. The final plan and action plan was launched in January 2020. Below are highlights from the strategic plan.

Vision: *We envision a home for everyone in Montgomery County, where the experience of homelessness is rare, brief, and one-time only.*

Mission: *Through commitment and collaboration, we will create effective systems in our community to achieve our vision. We strive to be a leader in the work to end homelessness across our nation.*

Bold Goals: *Montgomery County's strategic plan overarching goal is to ensure that by 2023 homelessness will be rare, brief, and one time only for everyone. In order to get there, Montgomery County will reach and maintain the following goals:*

- End homelessness among Veterans by 2015. - **Achieved!**
- End homelessness among chronically homeless individuals by 2019. - **Achieved!**
- End homelessness among families with children by the end of 2020.
- End homelessness among youth (ages 16-24) by the end of 2021.
- End homelessness among seniors by the end of 2022.
- End homelessness among everyone in Montgomery County by the end of 2023.

Values: *The values that guide the strategic plan efforts are as important as the strategies. Supporting the following core values will help to ensure that each person who interacts with the homeless services system is met with the highest standard of dignity and respect and receives the highest quality solutions*

- Housing First and Person-Centered Approaches
- Diversity, Equity, and Inclusion
- Collaboration Across the Continuum of Care
- Data and Results Based Decisions
- Continuous Change and Improvement

Strategies: *The following six strategies will lead Montgomery County's efforts to end homelessness and achieve our population-specific bold goals.*

- Reduce Racial Disparities Across the System
- Build and Support Strong and Adaptable Programs
- Build and Support Affordable Housing Solutions within the Homeless Continuum
- Coordinate Effectively Across Other Systems of Care
- Increase and Diversify Funding
- Educate and Advocate for Change

A broad array of services is offered to help achieve the goals of the CoC including homeless prevention, diversion, street outreach, temporary shelter, shallow and deep housing subsidies, and supportive services.

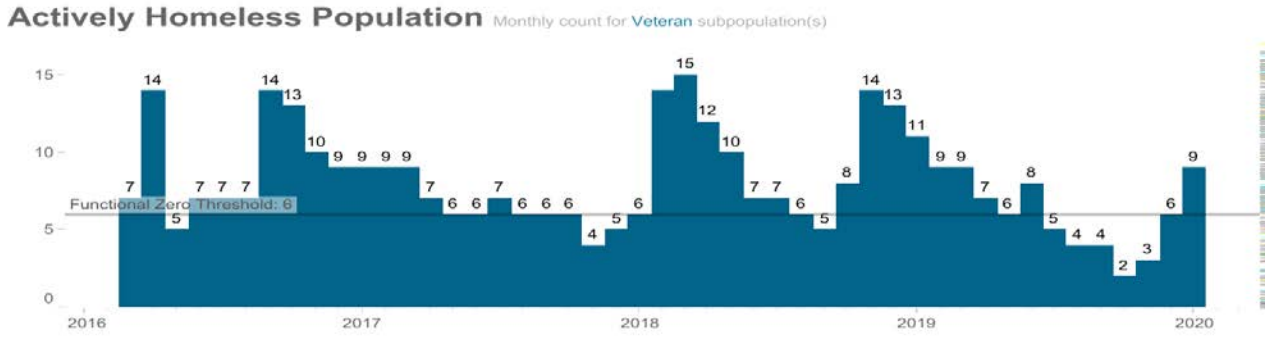
INITIATIVES

The work over the past year has been focused on the three current initiatives that are part of the *"Housing for All"* campaign:

- "Zero:2016" – Veterans Homelessness
- "Inside (Not Outside)" – Chronic Homelessness
- "At Home Together" – Family Homelessness

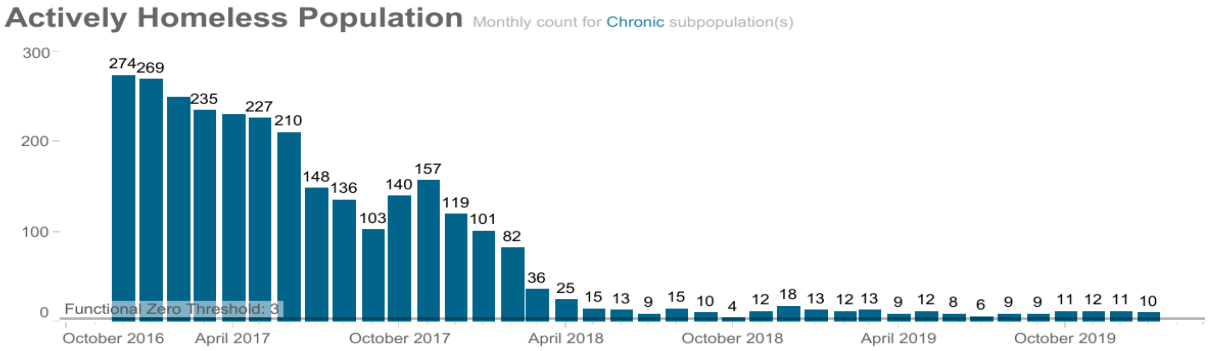
"Zero: 2016" Veterans Homelessness

In December 2015, Montgomery County was one of the first four jurisdictions in the Country to effectively end Veteran homelessness. This success was confirmed by the U.S. Department of Housing and Urban Development (HUD), the U.S. Interagency Council on Homelessness, and the Community Solutions ***Built for Zero (BFZ)*** campaign. We have housed more than 167 Veterans since the ***Zero:2016*** effort officially kicked off in June 2015 and only 5 % of them have returned to homelessness.



Inside (not Outside) Initiative

The Inside (not Outside) Initiative is Montgomery County's campaign to end chronic homelessness. In January 2016, Montgomery County CoC committed to the ambitious goal of ending long-term homelessness for people with disabilities. As of May 2020, 431 chronically homeless persons were housed through this initiative and 7 households are remaining to be housed. Although the CoC has not officially met the target for "functional zero", Montgomery County has consistently had less than 13 unhoused people identified as chronic since May of 2018. See the run chart below.



For nearly two years, the CoC has averaged only eleven chronically homeless individuals awaiting housing placement. This allowed the Coordinated Entry System to serve other vulnerable adults in permanent supportive housing and rapid rehousing. Since January 2019, Montgomery County has permanently ended homelessness for 201 vulnerable single adults in addition to those individuals meeting the federal definition of chronic homelessness. This is important, as it is no longer necessary for someone with very complex needs to have to remain homeless for twelve months before receiving housing placement. The County can move swiftly and reduce the length of time homelessness for very vulnerable people.

At Home Together Initiative

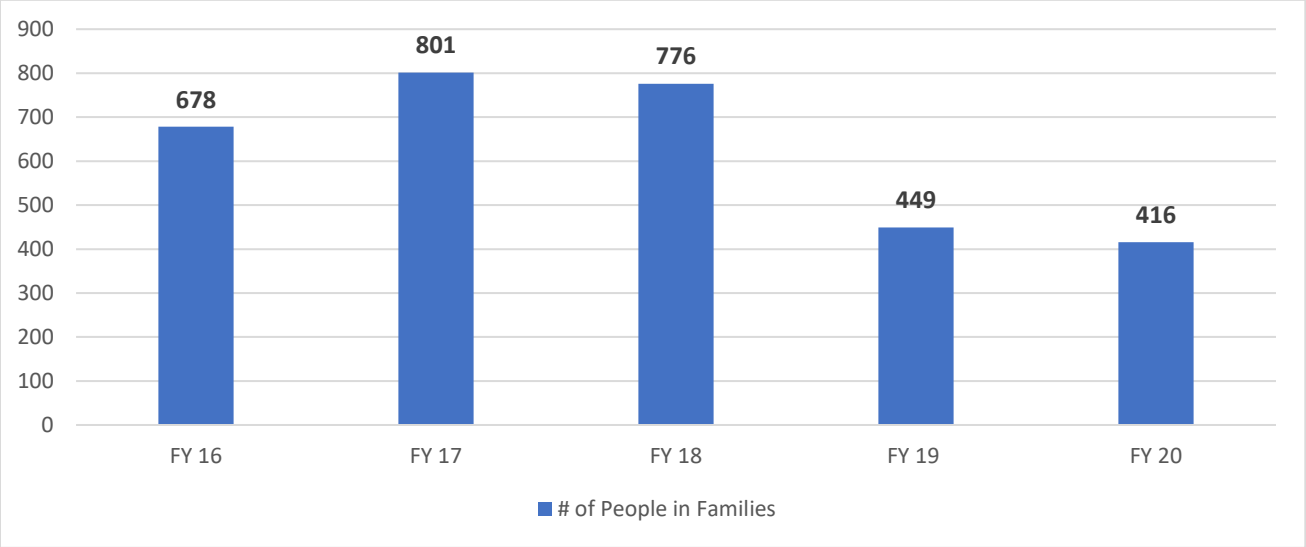
The At Home Together Initiative is Montgomery County's campaign to end and prevent homelessness for families with children. The CoC has committed to this bold goal and recognizes the need to intensify partnerships with other systems of care. Unlike the previous initiatives addressing Veteran and chronic homelessness, success is not defined by a "functional zero" number but instead by making the experience rare, brief, and one-time only. Montgomery County will measure success by reducing the length of time a family experiences homelessness, the number of households entering homelessness for the first time and rate of returns to homelessness for families with children. Since July 2018, 375 families have moved into permanent housing.

The strategies of the ***@Home Together Initiative*** include new and enhanced programs to better engage families early before they become homeless, and better targeted resources to provide rental assistance to families who are at risk of losing their housing. For families who enter the emergency

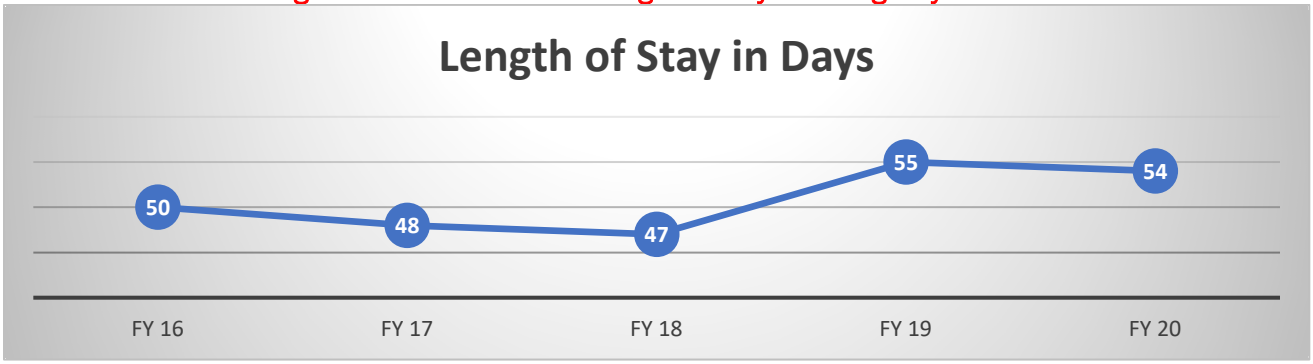
family shelter, there will be more integration between agencies to quickly connect to mainstream resources, employment, and affordable childcare. We believe ending homelessness is possible by providing the right amount of assistance to help families obtain or regain permanent housing quickly and ensuring access to services to help them remain stably housed.

Homelessness has significant and long-lasting adverse effects on children impacting their physical, social, and emotional growth and well-being. If we do not end homelessness for families with children, the result for the children is lower academic achievement, greater health issues, and more involvement with the child welfare system.

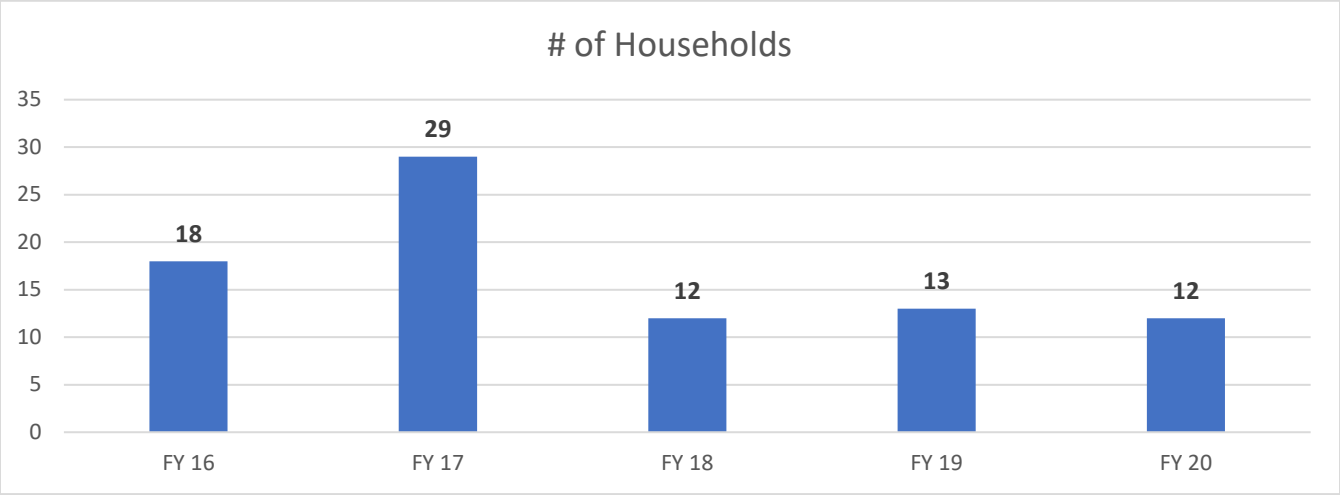
Making Homelessness RARE: Number of People in Families Experiencing Homelessness for the First Time



Making Homelessness BRIEF: Length of Stay in Emergency Shelter



Making Homelessness ONE-TIME ONLY: Returns to Homelessness after 24 Months



Other Important Initiatives

For the past year, the CoC has been engaged in restructuring the Interagency Commission on Homelessness, the governing body of the CoC. This restructure included changes to membership to be more inclusive of critical stakeholders, redesign of the committee structure to distribute the workload, and the development of the "People's Committee" to ensure the voices of people with lived experience are heard. The People's Committee reports directly to the Interagency Commission on Homelessness and is currently engaged in making recommendations to amendments to emergency shelter contracts.

EMERGENCY SHELTER

The CoC continues to provide emergency shelter to households with minor children through three year-round family shelters, one domestic violence shelter, and limited hotel subsidies used as overflow. During hypothermia, additional overflow shelter is provided via a non-profit organization. During this year's enumeration, a total of 51 households with minor children were residing emergency, overflow shelter, or DV shelter which is a slight increase (1%) from 2019 and a 26% decrease from 2018.

Emergency shelter capacity for adults without children remains 140 for year-round capacity. This includes the DV shelter with 5 beds designated for this household type, 3 designated as medical beds, and 2 designated for older adults or people with disabilities. During hypothermia season from November 1 to March 31st, capacity expanded this year to 385 beds. On the day of the 2020 enumeration, there were 328 emergency shelter and overflow beds occupied: an increase of 10% from 2019 and 6% from 2018.

MONTGOMERY COUNTY'S YEAR-ROUND AND WINTER INVENTORY OF BEDS				
	Beds for Households w/o Children	Beds/Units for Households w/children	Total Year-Round Beds	Total Winter Beds
Hypothermia/Overflow/Other (Additional winter Capacity	245	65/18	0	310
Emergency Shelter Beds	140	138/43	278	0
Transitional / Safe Haven Beds	65	38/7	103	0
TOTALS	450	241/68	381	346

HOMELESS POINT-IN-TIME RESULTS

Montgomery County's homeless point in time survey was conducted on January 22, 2020. A total of 670 homeless persons were counted that day, an increase of 4% from 2019 and a decrease of 20% from 2018 count. Although there was an increase this year, the declining trend in homelessness over the last two years can be attributed to a population specific approach that seeks to connect households who become homeless to the most appropriate housing intervention, targeting prevention resources to those most likely to become homeless and engaging in homeless diversion or rapid exit from shelter for those households newly entering the system.

Households without children experienced a 10% increase in 2020 from 441 in 2019 to 487 in 2020. There was an increase of 37% in the number of unsheltered population, 75 in 2019 compared to 103 in 2020. This is still a decrease of 23% from the 2018 enumeration. In addition to the annual enumeration Montgomery County plans to conduct quarterly "head counts" of unsheltered persons to identify, engage, and track those experiencing street homelessness. The number of unsheltered individuals in trending upwards specifically in the more urban centers in the county.

The table below provides a comparison of the past 3 years.

Number of Unsheltered Individuals 2018-2020					
Category	2018	2019	2020	Percent Change 2018 to 2020	Percent Change 2019 to 2020
Total Number Counted	840	647	670	-20%	4%
Total Individuals	568	441	487	-14%	10%
Total Number of Families	86	61	60	-30%	-2%
Total Persons in Families	278	206	183	-34%	-11%
Total Adults in Families	93	76	70	-25%	-8%
Total Children in Families	185	130	113	-39%	-13%

The number of households with children headed by transition age youth (18-24 years old) decreased 36% from 11 in 2018 to 7 during the 2020 enumeration In July 2018, the CoC began implementing homeless diversion for families with children. Trends over the last two years suggest that nearly 2/3 of all households seeking shelter can resolve their housing crisis without needed emergency shelter. If the trend continues, the CoC will attribute the decline in transition age youth headed households with children to this change in practice. The number of unaccompanied transition age youth increased in 2020 to 31 (55%) from 2019. This increase is likely due to increased outreach and engagement with providers serving youth including a network of peer outreach workers.

Monthly Income and Employment

Among all household types without children including those who are unsheltered, veterans, and transition age youth, 201 or 41% reported some type of monthly income. This is a decrease from 51% in 2019 and 50% in 2018. However, of those reporting monthly income 49% reported income from employment compared to 41% percent in 2019. The CoC has recognized the need to support homeless persons in obtaining eligible benefits. A total of 42% percent reported income from Social Security Retirement, Social Security or Veteran Disability, and/or Temporary Disability Assistance Program as their primary source of income. Montgomery County supports Housing First philosophy and though income is not required to be for permanent supportive housing or rapid rehousing, the CoC has made a concerted effort to connect homeless persons with vocational and employment supportive services. Additionally, emergency shelter staff are more focused on addressing the immediate barriers to housing such as income in their efforts to help individuals rapidly exit. Among households with children including veterans and transition age youth, the number of adults reporting monthly income was 47 (26%) which increased from 74% in 2019. In addition, 26 (55%) reported income from employment, which is an increase over the 2018 which was 39%. Still is likely attributed to the CoC's effort to increase housing interventions for families like rapid rehousing and

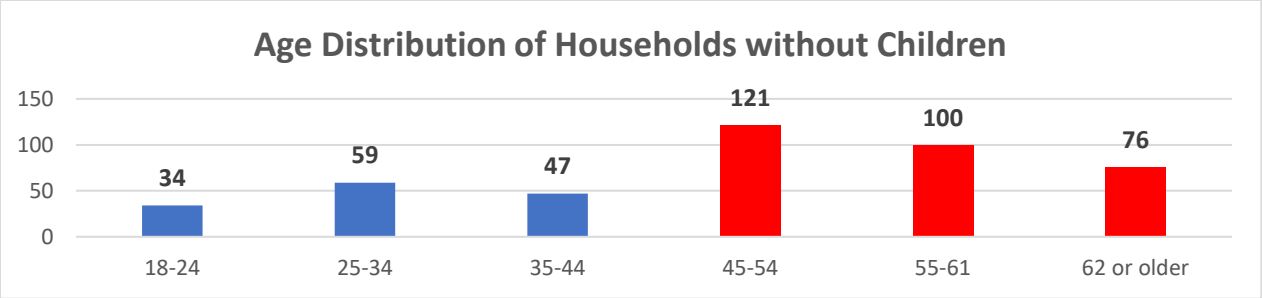
permanent supportive housing. Work force development has been identified as a gap in the CoC and must continue to be a priority for all household types. Employment specialist and vocational services are incorporated into Rapid Re-housing and permanent supportive housing contracts. The other primary source of income for households with families included Temporary Aide to Needy Families, Social Security Retirement, Social Security Disability / Survivor benefits which accounted for the income of 40% of this cohort.

SUBPOPULATIONS

Montgomery County saw declines in every subpopulation with two exceptions. The greatest decreases were with adults reporting dual diagnosis, limited English, and chronic health conditions. There was a 100% decrease in those reporting dual diagnosis and an 82% percent decrease in adults reporting chronic health problems. There was an 83% decrease in adults reporting limited English from the 2017 enumeration and a 45% decrease in adults reporting physical disability from 2017. Such significant declines can be attributed to full implementation of the Coordinated Entry System that prioritizes those households with the highest acuity for permanent housing.

	Adults Only in all Households FY18	Adults Only in all Households FY19	Adults Only in all Households FY20	Percent Change 2018 – 2020
Chronic Substance Abuse (CSA)	66	28	71	+8%
Severe Mental Illness (SMI)	170	126	123	-28%
Dual Diagnosis (CSA&SMI)	97	73	0	-100%
Chronic Health Problem	144	84	26	-82%
Living with HIV/AIDS	6	2	15	+150%
Physical Disability	110	136	61	-45%
Domestic Violence Victim History	147	106	35	-76%
Limited English	63	32	11	-83%
U.S. Veterans	13	13	12	-8%
Chronically Homeless	124	11	10	-92%

There continues to be an increasing number of older adults entering the homeless system. More than half (61%) of all adults without children are over 45 years old, 36% are over 55, and 17%, representing a 21% increase from 2019, are 62 years or older. Research states that people experiencing homelessness die an average of 30 years younger than the average person in the United States. This means that individuals with a history of homelessness age at an increased rate, so those 45 years old may have similar health issues as someone in their 70s.



Over the past three years, the number of persons fleeing domestic violence has decreased. This year there was a 54% decrease in the 2020 enumeration from 12 in 2020 to 26 adults in 2019 and 85% from 83 in 2018. The percent of adults reporting a history of domestic violence decreased by 76% since 2018. The CoC cannot attribute the changes to any specific reasons. The CoC continues to prioritize the limited scattered site transitional housing for DV households with minor children and undocumented households.

The number of persons experiencing chronic homelessness decreased by 92% from the 2018 enumeration. This decrease directly correlates to the efforts of the Inside (not Outside) initiative to end chronic homelessness. Since January 2016, Montgomery County has permanently ended homelessness for over 430 individuals. Regarding households with minor children, the County has monitored this closely and utilized permanent supportive housing options to re-house. Therefore, during this enumeration, there were no chronically homeless households with minor children.

Though Montgomery County achieved the goal of ending Veteran Homelessness in December 2015, sustaining functional zero requires continual monitoring and tracking. During the 2020 enumeration, 12 homeless veterans were counted. This is a slight decrease from the 2018 enumeration. To maintain functional zero, the CoC should average no more than 6 Veterans experiencing homelessness at any given time. As of May 1, 2020, 10 veterans are identified as homeless awaiting housing placement.

Permanent Housing

From 2017 to 2020, the number of units of permanent housing in Montgomery County has increased by 29% from 1138 to 1466. County officials remain committed to investing new local resources for permanent supportive housing, rapid rehousing, and shallow subsidies. As stated earlier, the CoC seeks to provide access to housing to all people experiencing homelessness. This requires creativity and an ability to leverage federal and state resources. Montgomery County continues to receive funding from the Maryland Department of Housing and Community Development and hopes to increase the amount in future years. Additionally, the Housing Opportunities Commission, the local public housing authority was awarded 99 new non-elderly disabled vouchers, resulting in 26 known homeless households being selected to receive a housing voucher. Lastly, SEPH continues to advocate for a revision to the County Rental Assistance Program to all for larger subsidies and more flexibility. Currently the program provides a maximum of $200 shallow subsidy for households with minor children, or households without minor children that have a disability or are at least 62+ years of age. Of the program participants, 42% are over 62 years of age.

RAPID RE-HOUSING

Montgomery County remains a high cost geographical area which poses challenges for households with minimal education and income to obtain and maintain housing without an on-going subsidy. Although Montgomery County has begun to increase the number of Rapid Rehousing slots, there is still a gap of approximately 300 units for both individuals and families according to the 2017 gap analysis of the CoC.

Beginning in August 2017, Montgomery County began a re-design of the RRH program from a fixed subsidy ($400 per month for singles, $600 per month for families) program to a flexible subsidy with re-evaluations of subsidy and need every ninety days. The program will also accept households with no income and work with them in obtaining temporary eligible benefits and on-going employment and pays the security deposit and first month rent to allow the family to transition from homelessness into stable housing. In coordination with the Learning Collaborative and the Coordinated Entry policy, the County has increased staffing to include a housing locator for landlord engagement and to develop a "housing stock". The goal is to serve more households more effectively by reducing the length of stay from 12 months to 4-6 months. Rapid rehousing has a success rate of 79% of households exiting to permanent housing.

PERMANENT SUPPORTIVE HOUSING AND OTHER PERMANENT HOUSING

Through the Inside (not Outside) Initiative, Montgomery County created more permanent supportive housing by increasing funding for the Housing Initiative Program (HIP). The program is unique in that the support services and reimbursement rates are based on acuity and change over time. By basing reimbursement rates on acuity, the program can serve more households more effectively. This allows providers to increase or decrease services depending on need.

In the 2018 HUD Continuum of Care Competition, Montgomery County was awarded $538,250 for a new permanent supportive housing program to serve 21 adults with chronic substance use. In addition, Montgomery County applied to the State of Maryland Assistance in Community Integration Services (ACIS) Pilot. The 1115 Medicaid Waiver allows states to bill Medicaid for housing support services including pre-tenancy supports and housing case management. Montgomery County has been approved to provide services to 110 individuals in permanent supportive housing and rapid rehousing programs. This additional resource has allowed the County to reinvest the savings from supportive services into housing subsidies and increase the stock of permanent housing. Finally, Montgomery County received an additional $1 million in funding for FY20 to increase the number of permanent supportive housing units by 40.

Prince George's County, Maryland

DESCRIPTION OF HOMELESS SERVICES

The Prince George's County Continuum of Care (CoC) for homeless persons is coordinated through the County's Homeless Services Partnership (HSP); the local Homeless Advisory Board for the County Executive. The mission of the HSP is to ensure that episodes of homelessness are rare, brief and non-reoccurring and to that end, the HSP is responsible for needs assessments, gap analysis, service coordination, resource development, drafting and adoption of policy, and system performance evaluation of all homeless services. Membership includes over 100 public and private organizations, consumers and concerned citizens with expertise in relevant impact areas including homelessness, education, employment, mental health, substance use, behavioral health services, aging and vulnerable adult services, public safety, street outreach, benefit assistance, youth services, and domestic violence and trafficking which meet monthly and work collaboratively to establish strategic priorities, assess progress, and oversee full implementation of the County's efforts to end homelessness. The Prince George's County Department of Social Services is the lead administering agency for the County's CoC, and serves as the Homeless Management Information System (HMIS) administrator; the Collaborative Applicant (CA) for the annual HUD Homeless Assistance grant application process; and Co-Chair of the HSP.

The County has a comprehensive network of programs designed to provide a coordinated and systemic response to persons identified as at risk of, and/or, literally homeless as well as a coordinated entry system that ensures prioritization of those who are most vulnerable. All CoC services are coordinated through a central call center allowing persons in need to gain services and shelter without having to navigate multiple systems. The system currently includes:

- Street Outreach , Mobile Crisis and SOAR;
- 24/7/365 intake through the "Homeless Hotline" and Coordinated Entry;
- Integrated Diversion and Homeless Prevention Services;
- Emergency and hypothermic overflow shelters including beds specifically for veterans, DV / trafficking survivors, and unaccompanied youth and young adults;
- Transitional housing and Transitional Housing - Rapid Re-Housing combination programs;
- Rapid Re-Housing programs; and
- Permanent Supportive Housing programs.

The County's strategic plan focuses on six (6) key strategies that have proven to be effective in reducing homelessness: 1. coordinated entry, 2. prevention assistance, 3. shelter diversion, 4. rapid re-housing, rapid exit and "moving on", 5. permanent housing, and 6. improved data collection and performance measures. In addition, the County has prioritized six subpopulations to systemically target the unique barriers to housing experienced by these groups: 1. Vulnerable elderly and aging; 2. Unaccompanied youth/young adults; 3. Survivors of domestic violence, sexual assault, human trafficking and other violent crimes; 4. Returning Citizens, 5. Veterans; and 6. Chronic homeless and other homeless with severe somatic and behavioral health challenges (SMI, SUD and COD). These strategies have been carefully designed to achieve purposeful and intentional reduction in the incidents of homelessness and collectively they form a plan that enhances system accountability, builds on current success, and provides continued flexibility to quickly shift resources to meet newly emerging needs. System success is measured by positive movement in several key indicator areas including but not limited to: Change in income, Recidivism, Length of Stay in Homelessness, Exits to Permanent Housing, and Reduction in new entry of first time homeless.

PRINCE GEORGE'S COUNTY YEAR-ROUND AND WINTER BED INVENTORY				
	Beds for Individuals*	Beds for Families	Year-Round Beds	Winter Beds
Hypothermia/Overflow/Other	40	20	0	60
Emergency Shelter Beds	69	127	196	0
TH-RRH Beds	38	127	165	0
TOTAL	147	274	360	60

*includes beds for unaccompanied youth and young adults ages 13-24

HOMELESS POINT-IN-TIME RESULTS

The Prince George's County homeless point–in-time count was conducted on Wednesday, January 22, 2020. The survey counted and interviewed unsheltered homeless persons living on the streets and sheltered individuals and families in overnight hypothermia shelters, 24–hour emergency shelters and transitional housing programs. A diverse group of volunteers and providers met weekly through conference calls and face to face sessions to plan and develop strategies for conducting the count. Training webinars were conducted that allowed volunteers and staff be universally trained regardless of location and availability and ensured consistency of survey application on the day of the actual PIT count.

The County's homeless management information system (HMIS) was used to conduct the sheltered count and the unsheltered count was conducted by volunteers. The volunteers were divided into 11 teams each targeting specific zip codes within 6 County zones. A database of "hot spot" locations within each County zone was made available to each team which included known encampments, shopping malls, metro stations, libraries, soup kitchens and other areas where homeless have been known to gather. Teams were disbursed from 6:00 am until midnight and included teams from Police, Fire/EMS mobile integrate health and community health workers from the Department of Health. The unsheltered count included an interview component to gather pertinent demographic, subpopulation, employment and other relevant data used to generate comparable data for this report and a command center was established as a point of contact for team leaders to call with any questions, emergencies, supply needs or assistance during the count.

An electronic process was used to conduct the unsheltered count. The County's Continuum of Care Point-in-Time Survey (PIT) Committee in collaboration with the County's Homeless Management Information System (HMIS) Administrator used iPads, iPhones, tablets and Survey Monkey to conduct the 2020 unsheltered count. Training sessions not only prepared volunteers and team leaders to effectively use the electronic devices but enabled them to review and provide feedback about the survey questions in advance of the count. IT Specialists were assigned to each team on the day of the count to assist with user questions and overflow survey input to ensure accountability.

On January 22, 2020 a total of 453 homeless adults and children were counted in Prince George's County, Maryland; (212 single adults, 86 adults in families, 155 children in families and 1 unaccompanied child) reflecting a 1.3% increase from 2019. Of this number, 362 (80%) were sheltered and 91 (20%) were unsheltered and living on the streets and public places not meant for human habitation. The following charts provide a comparison of the 2018, 2019, and 2020 counts. In spite of having the highest number of cost burdened households amongst neighboring jurisdictions, the overall number of homeless continues to show a slight decline.

PRINCE GEORGE'S COUNTY HOMELESS COUNT BY CATEGORY				
Category	2020	2019	2018	% Change - 2019 to 2020
Total Number Counted	453	447	478	+1.3%
Total Number of Singles	212	199	203	+6.1%
Total TAY (18-24)	18	18	21	0%
Total Veterans	23	23	27	0%
Total Number of Families	77	81	88	-4.9%
Total Number Persons in Families	240	247	273	-3.9%
Total Adults in Families	85	86	97	-1.2%
Total Number of Children in Families	155	161	176	-3.7%
Total TAY (18-24) – Head of Household	10	12	16	-16.6%
Total TAY (18-24) – Children in Household	12	17	21	-29%
Total Veterans – Head of Household	1	5	2	-80%
Total Veterans – Children in Household	3	13	5	-76.9%
Total Children w/ONLY Children	1	1	2	0%

**TAY = Transition Age Youth*

The following chart provides a summary of those surveyed by income type. As in prior years, the largest source of income remains employment for the sheltered population however this is closely followed by SSI / SSDI (the growth in the elderly and disabled population was statistically significant at 54% and continues to be the largest sub-population growth area in the homeless system in the last four years). "Other sources" now represents the largest source of income for the unsheltered followed closely by SSI/SSDI and then Social Security, Retirement, and Public Assistance:

HOMELESS COUNT BY INCOME TYPE – ADULTS ONLY				
Category	Sheltered		Unsheltered	
	Individuals	%	Individuals	%
Total Number of Adults	206		91	
Income	124	60%	37	40.6%
Employment	71	57.3%	2	5.4%
Social Security /Retirement	33	26.6%	4	10.8%
SSI / SSDI	13	10.5%	9	24.3%
TANF / Public Assistance	4	3.2%	4	10.8%
Other Sources *	3	2.4%	18	48.7%
Don't know / refused / no income	82	40%	54	59.4%

**other sources include unemployment, child support, and panhandling.*

This following chart provides a summary of barriers impacting sheltered and unsheltered adults surveyed on the night of the count. When reporting barriers, single adults reported severe behavioral (51%) and significant somatic (41%) health challenges as presenting the greatest barriers to permanent housing and independence while for adults in families, the highest barrier remained domestic violence (16.5%) followed by severe mental illness (14.2%).

PRINCE GEORGE'S COUNTY SUB-POPULATIONS –SINGLE ADULTS AND ADULTS IN FAMILIES					
Category	Adults in Families		Single Adults		Total
Population	Sheltered	Unsheltered	Sheltered	Unsheltered	ALL
Number of Adults (includes TAY)	85	0	121	91	297
Chronic Homeless *	1	0	15	0	16
Veteran	2	0	22	5	29
TAY	10	0	22	0	32
Substance use Disorder	0	0	5	53	58
Severe mental Illness	12	0	6	13	31
Co-occurring Disorder	0	0	6	25	31
HIV/AIDS	0	0	1	1	2
DV History *(any time in the past)*	13	0	3	16	32
Domestic Violence *(this episode)*	1	0	1	0	2
Physical Disability	3	0	10	31	44
Chronic Health Condition	3	0	8	38	49
Limited English	0	0	0	0	0
Foster Care**	0	0	0	0	0
Former Institutionalized***	0	0	0	0	0
None of the above	49	0	83	27	159

**Adults meeting the HUD definition who were unsheltered or in Emergency, safe haven, or hypothermia shelters on the day of the PIT Count.*

***Adults who have been in foster care at any time.*

**** Adults who were discharged directly into homelessness from prison or jail, hospitals, psychiatric facilities or other care facilities.*

PERMANENT AND PERMANENT SUPPORTIVE HOUSING PLACEMENTS

While the County has experienced significant success with unsubsidized and non-traditional permanency efforts, there remain individuals and families who require a more structured and supportive housing plan and in 2020, the County's Continuum of Care system continued to emphasize expansion of rapid re-housing beds and new supportive housing beds for high risk singles which represent the largest population of the County's known chronic homeless unsheltered population.

PRINCE GEORGE'S COUNTY PERMANENT SUPPORTIVE HOUSING (PSH) BED INVENTORY				
	2020	2019	2018	% Change 2019 to 2020
Beds for Individual	160	136	116	15%
Beds for Families	150	150	160	No change
TOTAL	310	286	276	7.8%

PRINCE GEORGE'S COUNTY RAPID-REHOUSING (RRH) BED INVENTORY				
	2020	2019	2018	% Change 2019 to 2020
Beds for Individual	54	54	12	No change
Beds for Families	125	125	56	No change
TOTAL	179	179	68	No change

PRINCE GEORGE'S COUNTY OTHER PERMANENT HOUSING BED (OPH) INVENTORY				
	2020	2019	2018	% Change 2019 to 2020
Beds for Individual	9	9	9	No change
Beds for Families	188	188	188	No change
Total	197	197	197	No change

OTHER NOTEWORTHY CONTINUUM OF CARE ACTIVITIES

The County has identified six (6) homeless sub-populations for targeted program development and has made significant progress in the past five years as a result of that intentional focus. County highlights include but are not limited to:

1. *Domestic violence and Human Trafficking:*

    - Partnership with the National Alliance for Safe Housing (NASH) to develop a comprehensive and coordinated County response to the housing needs of survivors of domestic violence, sexual assault, and human trafficking;
    - Launch of a very aggressive "Stop the Silence" campaign to raise awareness and ensure victims get connected quickly to the help they need (Survivors of domestic violence can get confidential help 24/7/365 through the County's 2-1-1 service);
    - Creation of a domestic violence and human trafficking supportive services division within the HHS network to ensure survivors are connected to care and immediate resources;
    - Set aside vouchers for persons impacted by violence who are homeless and unable to stabilize using traditional CoC housing options;
    - Establishment of a Family Justice Center that has DV experts in place to assist with individual cases;

- Establishment of a SAFE Center for victims of trafficking; and awarded a two (2) year $1.5 million GOCCP VOCA grant to implement the Domestic Violence - Supportive Assistance and Financial Empowerment (SAFE) Program.

2. *Unaccompanied Youth and Young Adult ages 13-24:*

- Completed the national 100-day challenge to end youth homelessness with a focus on higher education, housing 56 youth;
- Launch of a Training Academy that provides key trainings on youth and young adult related issues for providers serving youth to expand both capacity and competency;
- Conducted 6 annual County-wide counts of homeless and unaccompanied youth ages 13-24 (the last three of which were done as part of a pilot statewide count ("Youth REACH MD") in an on-going effort to better understand the scope, nature, and needs of youth and young adults experiencing homelessness;
- Renovated a 4,000 sq. ft. county facility to create an emergency shelter for youth;
- Created bed capacity for youth who are experiencing homelessness or are unstably housed (20 emergency, 4 host home, 16 transitional, and 8 rapid re-housing) and raised more than $1 million dollars in federal, state, local and private funding to support those operations;
- Secured 60 Family Unification Program (FUP) vouchers for former foster youth experiencing homelessness;
- Launched the first Homeless Youth Action Board in Maryland to ensure youth with lived experience are engage in all facets of system design.
- Member of the Maryland SB764/HB823 statewide task force to study housing and supportive services for unaccompanied youth experiencing homelessness, which led to: the addition of 2 housing instability and homelessness questions to the State's annual Youth Risk Behavior Survey of middle and high school students, establishment of "Youth REACH MD" (a statewide effort to regularly survey unaccompanied youth experiencing homelessness), and State legislation creating a tuition waiver for youth experiencing homelessness and the Ending Youth Homelessness Act of 2018 funded in 2019 at $1million statewide;
- Secured Maryland Governor's Office of Crime Control & Prevention's Bridge Program for housing subsidies for systems-connected youth;
- Launched AFFIRM, a skills and resources program for LGBTQ+ youth and their parents;
- Established a demonstration Gap Housing Pilot (15 beds) for college students;
- Executed an Administrative Order to establish the Circuit Court for Prince George's County Bridge From Youth Experiencing Success (Y.E.S.) Committee to establish a center that assists with the successful transition of foster care youth, from exit to age 26;
- Selected as one of five pilot sites by the Center for Law and Social Policy (CLASP) to explore Pathways to Transformative Healing for youth ages 16-24 who are experiencing homelessness, at risk of experiencing homelessness, or otherwise disconnected from services;
- Awarded a 4-year SAMHSA System of Care expansion grant to develop a comprehensive, developmentally appropriate, behavioral health system for youth ages 16-24;
- Member of the State legislative Workgroup to Study Shelter and Supportive Services for Unaccompanied Homeless Minors which resulted in passage of Maryland Senate Bill 207, Unaccompanied Minors in Need of Shelter and Supportive Services, allowing for minors to consent to shelter; and
- Selection as a HUD Youth Homelessness Demonstration Program *(cohort 3)* and awarded $3.48 million for innovative programs aimed at ending youth homelessness.

3. *Veterans:*

    - Established a Veteran Court which strategically aligns legal response systems to these strategies;
    - Set aside housing vouchers for veterans who are homeless and unable to stabilize using traditional CoC housing options;
    - Awarded 2 SSVF and 1 GPD program for veterans;
    - Increased local allocation of VASH vouchers;
    - Secured faith based funding for homeless prevention, rapid re-housing and other crisis intervention efforts;
    - Established a veteran only coordinated entry team to ensure rapid linkages to housing; and
    - Host the annual veterans stand down (a daylong event that provides a one-stop location where veterans can access a multitude of services including: VA benefits, haircuts, medical and dental care, mainstream benefits, housing assistances, linkages with employers, counseling and legal support).

4. *Chronically homeless and other homeless persons experiencing severe behavioral health challenges*:

    - Established a multi-disciplinary care coordination team to staff complicated high acuity cases;
    - Make regular visits to known encampments to drop off food, warm blankets and other necessities create opportunities to build trust and ensure the relative health and safety of this population;
    - Secured a SAMSHA system of care grant to improve local pathways to treatment;
    - Established 2 specialty courts (a Mental Health Court and a Drug Court) that strategically align legal response systems with the supportive services and housing response systems available to these vulnerable sub-populations;
    - Led Maryland in successful SOAR applications with an approval rate of 100% and partnered with the State to create 12 new SOAR time limited transitional housing units;
    - Set aside housing vouchers to support homeless persons with behavioral health challenges who are unable to stabilize using traditional CoC housing options;
    - Established a mobile integrated Healthcare system within the County's Fire/EMS Department to support crisis response;
    - Executed a multi-system data sharing agreement and begun data integration efforts to identify high system utilizers for care coordination and targeted intervention, and began working on a telehealth model of care to supplement the work of the street outreach teams;
    - Assisted in the creation of an 1115 waiver for supportive services to high system utilizers experiencing homelessness and one of 4 pilot locations in the State testing the new ACIS program;
    - Invited to be a Data Driven Justice Initiative jurisdiction; and
    - Selected as one of 6 Pay For Success sites across the Country.

5. *Returning citizens*:

    - Established a Re-Entry Court that strategically aligns legal response systems with appropriate the supportive services and housing response systems;
    - Secured more than $1.5 million dollars in funding for this population;
    - Opened the "Bridge at Adams House" in Suitland to centralize services to persons returning to the community from incarceration.

6. *Vulnerable elderly and aging*:

    - Hosted a strategic planning process with key stakeholders to identify challenges impacting housing instability for vulnerable adults and currently procuring a national technical assistance provider to assist the County with development of a comprehensive and coordinated County response to the housing needs of this vulnerable population; and
    - Secured $250,000 in new funding to mitigate housing crises for this population

Prince William County, Virginia

Description of Homeless Services

The Prince William Area Continuum of Care (PWA CoC) is comprised of nonprofit, faith-based and government agencies across the areas of Prince William County and the cities of Manassas and Manassas Park. The PWA CoC has a comprehensive homeless response system and includes projects funded at the federal, state and local levels. Programs within the CoC include: prevention services, street outreach, day shelter (i.e. our drop-in center), emergency shelter, transitional housing, rapid re-housing and permanent supportive housing. The CoC works closely with a variety of community partners to increase access to and coordination of services such as those related to housing, employment, benefits, education and health and wellness. Access to services is largely coordinated through the CoC's Coordinated Entry System (CES).

The PWA CoC includes multiple programs that serve persons and families experiencing homelessness. Programs include temporary shelter, overnight shelter, hypothermia shelter, hotel/motel shelter vouchers and transitional housing. The CoC has a total of 311 sheltered beds which is broken down as follows:

- Emergency Shelter Beds (total: 270)
    - Singles - 117
    - Families - 132
    - Domestic Violence - 21
- Transitional Housing Beds (total: 41)
    - Singles - 6
    - Families - 35

This reflects a 9% increase in sheltered beds since 2019 due to the addition of new hypothermia beds, hotel/motel shelter vouchers as well as increased utilization of family shelter. There was a 51% decrease in transitional housing beds from 2019 as a program no longer meets the criteria to be counted on HUD's Housing Inventory Count (i.e. the beds are no longer dedicated to homeless persons). The program maintains its relationship with the CoC and will continue to accept referrals for services.

In addition to this, the PWA CoC brought two new projects online: a HUD-funded Permanent Supportive Housing (PSH) project for single adults as well as a Housing Location Services project to assist homeless persons obtain permanent housing. More excitingly, the PWA CoC was awarded over $277,000 in HUD funding as part of 2019 NOFA which house addition chronically homeless households. will fuel the development of even more permanent supportive housing beds in the next fiscal year.

Homeless Point-in-Time Results

The PWA CoC conducted its annual Point-in-Time Count the night of January 22, 2020 as well as an additional "Service-Based Count" on the following day. The CoC saw a significant increase (more than 100%) in the number of unsheltered persons counted in 2020 in comparison to last year's data.

For the 2020 PIT County, DSS took the lead role for organizing the PIT and implemented the recommended best model practices from HUD to conduct the count. This included utilizing volunteers to conduct surveys, providing incentives to those that are surveyed and mapping out the CoC using GIS tools. The CoC has also worked to strengthen its relationships with known community-based street

outreach providers. Additionally, the CoC is working to increase street outreach resources and provide training opportunities to providers.

Despite this increase, certain trends remain consistent in the unsheltered data. Unsheltered persons in the PWA CoC tend to be single adult males who identify as white and are between the ages of 25 and 54. As in previous years there were no households with children identified in the unsheltered count. One notable change from last year is that 42% of unsheltered persons reported this episode of homelessness is due to a release from an institution where only 19% of clients reported this in 2019.

The CoC saw a 30% decrease in persons in families, a 43% decrease in the number of children in families and a 9% decrease in adults in families from 2019. This information suggests the CoC is seeing smaller family sizes in the shelter system and is reflective of the CoC's prioritization process. In addition to utilizing the VI-SPDAT, the CoC uses a local prioritization score for vulnerable populations; one of which is households with children comprised of 6 or more individuals.

The Prince William Area did see a 40% increase in the number of single adults in shelter (emergency and transitional) on the 2020 PIT. This in part is due to the increase in the number of available beds for single persons as well as the fact that the hypothermia alert was active the night of the count.

In looking at received income, the CoC notes consistent data from 2019 for adults in families. There was a slight decrease for the receipt of monthly income (4%) and no change to the percentage of employed adults. For single adults, there is a 21% decrease in the number of persons receiving monthly income and an 8% increase in the number of employed adults. It is important to note the CoC saw a 53% increase in the number of single adults experiencing homelessness due to a release from an institution. This could very well explain the increase in the number of single adults as well as the decrease in received income.

The data for single adults indicates the importance of community involvement beyond homeless service providers within a CoC. The PWA CoC will continue their work to strengthen relationships with institutions to help prevent continued, increased entry into the homeless system. The data for single adults also indicates the importance of social inclusion and support for those experiencing homelessness. The family data indicates current supports and services are effective but that there is still to improvement.

Permanent, Permanent Supportive Housing & Rapid Re-housing Placements

Permanent Housing

Using HMIS data for emergency shelter, transitional housing and street outreach projects, the CoC saw 261 persons across all household types move into permanent housing other than PSH and RRH in FY19 (7/1/2018 – 6/30/2019). It also supports the CoC's efforts to provide diversion services beyond the point of coordinated entry. Under the current policy, providers attempt diversion within eight (8) days of shelter entry by providing services such as support coordination, conflict mediation, connection to benefits and temporary financial assistance. This allows the CoC to prioritize PSH and RRH resources for households without alternate housing options.

This year the CoC reclassified two projects formerly listed under PSH as "Other Permanent Housing" based on the HUD Data Standards for reporting homeless inventory. These projects offer permanent housing to single individuals with or without a disability as well as supportive services. Both projects remain at 100% capacity, as in 2019, serving a total of 9 individuals.

Permanent Supportive Housing

The CoC currently has 6 PSH projects in operation. Four (4) of these projects receive HUD-CoC funding, one (1) is VA-VASH funded and the last is funded through the state of Virginia. All PSH beds within the CoC are dedicated to chronically homeless persons and families. As previously mentioned, the CoC was awarded bonus PSH HUD funding as a result of the 2019 NOFA, which will serve 12 new households. The CoC hopes to implement at least one new PSH for next year.

Based on the 2020 PIT data, the CoC housed 41 persons in PSH across all household types. Excluding VA-VASH data (which brings the total to 30 persons) this represents a 15% increase in the number of persons housed through PSH since 2019. This data is compared to previous years in the table below:

Category	2018	2019	2020	Percent Change 2019 - 2020
Persons Served	23	26	30	+15%
Available Beds	30	30	35	+17%
Utilization	77%	87%	86%	

**Data excludes VA-VASH PSH beds*

The CoC expects to continue to see an increased need for permanent supportive housing for single adults based on current data. On the 2020 PIT, 53 single adults met the definition of chronically homeless out of the 208 surveyed. This means 25% of single adults in emergency shelter or unsheltered locations qualify for PSH. This represents a 47% increase in the number of chronically homeless persons based off the 2019 data where only 19 out of the 112 persons surveyed met the definition. This increase may be due to the higher number of single adults experiencing homelessness because of a release from an institution as well as the continued lack of affordable housing in the Prince William area. The current Fair Market Rate for a single bedroom in the PWA is $1,470 per month. Based on HMIS data, only 10% of current PSH participants earn more than the FMR for a single bedroom.

Rapid Re-Housing

The PWA CoC currently has 10 RRH projects in operation. One (1) project is HUD-CoC funded, two (2) are HUD-ESG funded, three (3) are VA-SSVF funded and four (4) through the state of Virginia. The state funded projects are in alignment with the HUD data standards and requirements for ESG funded RRH. The CoC continues to incorporate the Housing First model within all RRH programs with the goal of placing households in stable housing as quickly as possible. The CoC also provides Housing Location Services to assist RRH providers in identifying, approving and maintaining permanent housing. Housing Locators work directly with clients and case managers to overcome household barriers and establish housing. Lastly, Housing Locators will provide mediation services between landlords and clients as issues arise to include eviction prevention.

Providers offer supportive services and practice progressive engagement with the goal of helping the household establish independence and “transition in place” in their current housing. Households are

reviewed every 90 days to determine if there is a for continued financial assistance. Households may continue to receive supportive services even if there is not a need for financial assistance.

Based on 2020 PIT data, the CoC housed 136 persons in RRH across all household types. This includes 66 households, 78 adults and 58 children. This represents a 20% decrease in the number of persons housed through RRH since 2019. This data is compared to previous years in the table below:

Category	2018	2019	2020	Percent Change 2019 - 2020
Total Households	103	65	66	+2%
Total Adults	176	90	78	-13%
Total Children	108	81	58	-28%
Total Persons	**284**	**171**	**136**	**-20%**

It is important to note the decreases from 2018 – 2020 may be due to the closing of RRH projects as well as the loss of an RRH provider. Additionally, there were poor data entry practices in place such as enrolling clients into RRH simply based on shelter entry as well as not accurately capturing the Housing Move-in Date. The addition of a full-time HMIS System Administrator in early 2019 has provided more consistent monitoring and training for data entry practices.

Rapid Re-housing programs have had a significant impact on addressing homelessness within the CoC by providing stable housing without conditions and then working to address barriers. The recidivism rate for persons exiting to permanent housing remains low (3%) in both FY19 and FY18. Based on HMIS data for FY19, 82% of persons served through RRH are in permanent housing within 30 days of project start. This reduces the length of time persons are in emergency shelter or a place not meant for habitation. About 65% of adults in RRH receive monthly income and, of those adults, 73% are employed. Increased income leads to the independence and stability of households. For 68% of persons exiting RRH projects, the length of participation is less than 6 months (median stay of 137 days), which is the current CoC goal. Shorter lengths of participation ensure more households can be served using available funds. Lastly, 92% of persons in RRH exit to permanent destinations with 85% of those persons exiting to rentals without ongoing subsidies. The percentage of positive exits shows that providing immediate stability to households leads to greater success in addressing barriers and reducing risk factors that contribute to homelessness.

PWA CoC 2020 Data Charts

2020 PIT Homeless Count by Category					
Category	Total Unsheltered	Emergency Shelter	Transitional Housing	Total Sheltered	Total Counted
Total Number Singles	102	106	6	112	214
Total Number of Persons in Families	0	83	29	112	112
Total Number Counted	**102**	**189**	**35**	**224**	**326**
Total Adults in Families	0	39	15	54	54
Total Children in Families	0	44	14	58	58
Total Number Counted in Families	**0**	**83**	**29**	**112**	**112**
Total Number Single Households	99	99	6	105	204
Total Number Family Households	0	26	7	33	33
Total Number of Households	**99**	**125**	**13**	**138**	**237**

2020 Year-Round & Winter Inventory					
Project Type	Beds for Single Adults	Beds for Families	Total Beds	Year-Round Beds	Winter Beds
Emergency Shelter	117	132	249	209	40
Domestic Violence Shelter	3	18	21	21	0
Transitional Housing	6	35	41	41	
Total Beds	**126**	**185**	**311**	**271**	**40**

2020 PIT Count Data Trends						
Category	2017	2018	2019	2020	Change in Persons 2019-2020	Percent Change 2019-2020
Total Number Counted	400	374	277	326	+49	+18%
Total Number Singles	197	190	117	214	+97	+83%
Total Number of Persons in Families	203	182	160	112	-48	-30%
Total Number Families	53	54	46	33	-13	-28%
Total Adults in Families	72	70	59	54	-5	-9%
Total Children in Families	131	112	101	58	-43	-43%

2020 PIT Homeless Subpopulations			
Category	Single Adults	Adults in Families	Total Adults
Chronically Homeless	53	0	**53**
Chronic Substance Abuse	11	0	**11**
Severe Mental Illness	30	8	**38**
Co-Occurring Disorder	13	1	**14**
Chronic Health Problem	31	7	**38**
Living with HIV/AIDS	0	0	**0**
Physical Disability	32	6	**38**
Domestic Violence Victims*	56	18	**74**
Limited English Proficiency	44	8	**52**
Foster Care History	13	5	**18**
Formerly Institutionalized	61	11	**72**
Veterans	15	1	**16**

**Adults with a DV experience any time in the past as well as those who are currently homeless due to DV*

2020 PIT Homeless Subpopulations Data Trends						
Category	2017	2018	2019	2020	Change in Persons 2019-2020	Percent Change 2019-2020
Chronically Homeless	76	42	24	53	+30	+120%
Chronic Substance Abuse	31	23	11	11	0	0%
Severe Mental Illness	26	36	26	38	+12	+46%
Co-Occurring Disorder	17	10	12	14	+2	+17%
Chronic Health Problem	36	39	19	38	+19	+100%
Living with HIV/AIDS	0	0	0	0	0	0%
Physical Disability	19	31	16	38	+22	+138%
Domestic Violence Victims*	8	18	33	74	+41	+115%
Limited English Proficiency	15	29	22	52	+30	+136%
Foster Care History	19	21	6	18	+12	+200%
Formerly Institutionalized	54	49	23	72	+49	+213%
Veterans	22	36	10	16	+6	+60%

**Adults with a DV experience any time in the past as well as those who are currently homeless due to DV*

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