East Texas
Human Needs Network

2015 SMITH COUNTY

HOUSING AND HOMELESSNESS ASSESSMENT REPORT

Contents

Acknowledgements

2015 Annual Homelessness Assessment Report

Report prepared by:

Christina Fulsom, East Texas Human Needs Network

Point in Time Homeless Survey and Count Planning Committee

Jennifer Barnes, The Salvation Army

Christina Fulsom, East Texas Human Needs Network

Julie Goodgame, The Salvation Army

Rev. Pat Mallory, Gateway to Hope

John Smith, Veterans Affairs

Andrea Wilson, People Attempting To Help

Special thanks to:

Ken Martin, Chief Executive Officer Texas Homeless Network

Eric Samuels, Texas Homeless Network Balance of State Manager

Lindsay Marsh, Texas Homeless Network Balance of State Data Coordinator

City of Tyler Police Department

Eighty-eight community volunteers assisted with the survey and data entry

 East Texas Human Needs Network

ETHNN
Christina Fulsom
christina@ethnn.org
903.216.3211
www.ETHNN.org

Introduction

When trying to determine who is homeless in Smith County, a wide variety of barriers exist. Often, there isn't an easy way to establish who is homeless because definitions of homelessness vary. In addition, strategies for obtaining information are complex, diverse, and variable. Many experiencing homelessness do not wish to be found or represented as "homeless." Therefore, organizations face unique challenges when working to curb the numbers of individuals and families experiencing homelessness in Smith County and around the state, not to mention the many difficulties encountered when providing needed services and care.

Recognizing homelessness as an often temporary circumstance rather than a permanent condition is essential in gathering information about the population experiencing homelessness. Furthermore, regardless of which definition is being used, simply finding those who fit the definition of homeless to participate in a survey, or in another way to be counted, is challenging. Our research is conducted at locations known to be frequented by people experiencing homelessness. Institutional locations include places such as shelters, soup kitchens, day centers, and service centers. Non-institutional locations include streets, parks, or abandoned buildings; these locations can become particularly dangerous in Texas, with days of staggering heat in the summer and freezing temperatures in winter. More difficult to identify are those staying temporarily with family or friends, those staying in hotels or living in cars, and those congregating in places not known to or accessible to researchers. Many remain transient at all times. For these reasons, data on homelessness are usually considered to be underestimates.

As the only homeless-advocacy organization in Smith County, the East Texas Human Needs Network (ETHNN), which includes members of the former Smith County Coalition for the Homeless, has made several efforts to assess the size, characteristics, and needs of the homeless population in order to inform policy makers and service providers. Over the past ten years, Texas Homeless Network (THN) and ETHNN have addressed this issue, refining methodology and adding to what is known about the problem of homelessness in Texas.

ETHNN is a member of the Texas Homeless Network Balance of State Continuum of Care (Tx BoS CoC). To learn more about Tx BoS CoC, please visit www.thn.org for more on ETHNN, please visit www.ethnn.org.

Key Findings

The 2015 Point in Time Homeless Survey and Count took place on Thursday, January 22. Volunteers use what is known as the "known location" methodology to survey persons found at sites identified by the community to be where those suffering from homelessness are known to congregate. The resulting survey sample represents people in homeless situations and persons who are at risk of becoming homeless. This information is used by local communities in the development of short and long term strategies to alleviate homelessness.

Homelessness by the numbers:

- 233 homeless persons were found on the night of January 22, 2015. Of those identified that night, 190 (82%) were adults and 43 (18%) were children. Pg. 7
- Thirty-five percent of homeless respondents were female, an increase of 4%; 65% were male. Pg. 8
- Many races and ethnicities are represented in the Smith County homeless population with 57% identifying as white and 33% identifying as African-American. Nine percent stated their ethnicity was of Hispanic/Latino descent. Pg. 8
- Single individuals represent the highest percent of respondents in our surveyed population at 73%. Homelessness in families with children increased to 14%. Pg. 7
- Median age of adults was 47 years old; children's median age was 5 years old. Pg. 8
- Military veterans are homeless at a higher rate than other groups. In Smith County, 27% of our surveyed populations are classified as veterans, a 4% decrease from last year. Sadly, 36% of those identified are not receiving VA benefits. Pg. 9

Homelessness trends:

- There was a 6% increase in the number of people staying in emergency shelter, as well as an increase of 3% in the number of people living on the streets. Pg. 10
- First time homelessness increased slightly from 41% to 43%. Pg. 11
- 31% are experiencing chronic homelessness, defined as those continuously homeless for a year or more, and those experiencing homelessness at least four times in the past three years. Pg. 11
- 25% experienced homelessness two to three times in the past three years. Pg. 11
- Those experiencing homelessness this year have been homeless for an average of 162 days a great improvement over last year's 204 but still much more than the average of 90 days in 2010. Pg. 11

Reasons for homelessness:

- Lack of employment and the inability to pay rent or mortgages are the most significant reasons for becoming homeless 54% and 45%. Pg. 12
- Shortage of affordable housing. Pg. 14
- Historically, the number one reason for unemployment is lack of transportation.

Self-reported needs of those experiencing homelessness: Pg. 17

- Top five needs are basic needs (food/clothing) at 75%, transportation at 73%, job training and placement at 53%, food stamps at 51%, and case management also at 51%.
- 77% (112) report needing medical care with only 75% (85) of those receiving care, 38% from Emergency rooms.
- 72% (105) report needing dental care with only 11% (11) of those receiving care.
- 48% (65) report needing behavioral health care, 70% (45) of those received care, 45% (21) from Veterans Affairs.
- 27% (21) report needing help with addiction disorders of those 83% (18) received care, 71% (22) from Veterans Affairs.
- 2% (2) report needing care for HIV/AIDS, 100% (2) received care, one from a private doctor and the other from a community clinic.

Definitions of Terms

At Risk of Homelessness means, with respect to an individual or family, that the individual or family—

- has income below 30 percent median income for the geographic area;
- has insufficient resources immediately available to attain housing stability; and
    a. has moved frequently because of economic reasons;
    b. is living in the home of another because of economic hardship;
    c. has been notified that their right to occupy their current housing or living situation will be terminated;
    d. lives in a hotel or motel;
    e. lives in severely overcrowded housing;
    f. is exiting an institution; or
    g. otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness

Continuums of Care (CoC) are local planning bodies responsible for coordinating the full range of homeless services in a geographic area, which may cover a city, county, metropolitan area, or even an entire state. *Smith County is a member of the Texas Homeless Network Balance of State CoC*

Chronic Homelessness refers to an individual who has been continuously homeless for a year or more or has experienced at least four episodes of homelessness in the last three years and has a disability.

Emergency Shelter is a facility with the primary purpose of providing temporary shelter to homeless persons.

Homeless
- People who are living in a place not meant for human habitation, in emergency shelter, in transitional housing, or are exiting an institution where they temporarily resided. The only significant change from existing practice is that people will be considered homeless if they are exiting an institution where they resided for up to 90 days (it was previously 30 days), and were in shelter or a place not meant for human habitation immediately prior to entering that institution.
- People who are losing their primary nighttime residence, which may include a motel or hotel or a doubled up situation, within 14 days and lack resources or support networks to remain in housing. HUD had previously allowed people

who were being displaced within 7 days to be considered homeless. The proposed regulation also describes specific documentation requirements for this category.
- Families with children or unaccompanied youth who are unstably housed and likely to continue in that state. This is a new category of homelessness, and it applies to families with children or unaccompanied youth who have not had a lease or ownership interest in a housing unit in the last 60 or more days, have had two or more moves in the last 60 days, and who are likely to continue to be unstably housed because of disability or multiple barriers to employment.
- People who are fleeing or attempting to flee domestic violence, have no other residence, and lack the resources or support networks to obtain other permanent housing. This category is similar to the current practice regarding people who are fleeing domestic violence.

Individuals refer to people who are not part of a family during their episode of homelessness. They are homeless as single adults, unaccompanied youth, or in multiple adult or multiple-child households.

Permanent Supportive Housing is permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently.

Persons in Families are people who are homeless as part of households that have at least one adult and one child.

Safe Havens provide private or semi-private long-term housing for homeless people with severe mental illness and are limited to serving no more than 25 people within a facility.

Sheltered Homeless Persons are people who are staying in emergency shelters, transitional housing programs, or safe havens.

Transitional Housing Program is a type of housing where homeless people may stay and receive supportive services for up to 24 months, and which are designed to enable them to move into permanent housing.

Unsheltered Homeless Persons include people who live in places not meant for human habitation, such as the streets, campgrounds, abandoned buildings, vehicles, or parks.
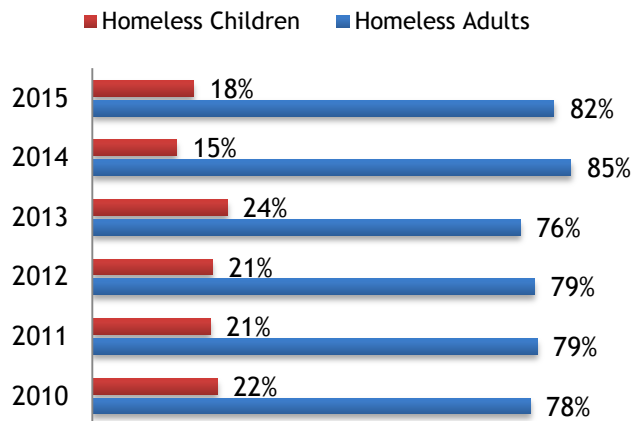
The Survey and Count

Texas Homeless Network annually coordinates a Point-in-Time (PIT) homeless survey with coalitions across 214 counties in Texas. The East Texas Human Needs Network is one of the participants covering Smith County.

The 2015 Point in Time Homeless Survey and Count took place on Thursday, January 22. Volunteers use what is known as the "known location" methodology to survey persons found at sites identified by the community to be where those suffering from homelessness are known to congregate. The resulting survey sample represents people in homeless situations and persons who are at risk of becoming homeless. This information is used by local communities in the development of short and long term strategies to alleviate homelessness.

Numbers

233 homeless persons were found on the night of January 22, 2015. Of those identified that night, 190 (82%) were adults and 43 (18%) were children.

Children and Adults Identified on the Night of the Survey

■ Homeless Children ■ Homeless Adults

| Year	Homeless Children	Homeless Adults
2015	18%	82%
2014	15%	85%
2013	24%	76%
2012	21%	79%
2011	21%	79%
2010	22%	78%

Household Types

Homelessness in Smith County affects every corner of our society; the face of homelessness is constantly evolving as new populations become at risk of becoming homeless. By looking at data from different aspects, we are able to begin to see trends emerging in certain homeless populations.

When looking at the type of family unit a person lives in, we can see an increase in the number of families with children who are homeless or at risk of becoming homeless.

Across the spectrum, single individuals represent the highest percent of respondents in our surveyed population at 73%, a decrease of 5%. Persons in households without children increased 2%. However, **homelessness in Families with children rose 3%**.

Household Types

■ Persons in Households with Children
■ Single Persons
■ Persons in Households without Children

| Year	Persons in Households with Children	Single Persons	Persons in Households without Children
2015	14%	73%	13%
2014	11%	78%	11%
2013	17%	74%	8%
2012	17%	68%	14%
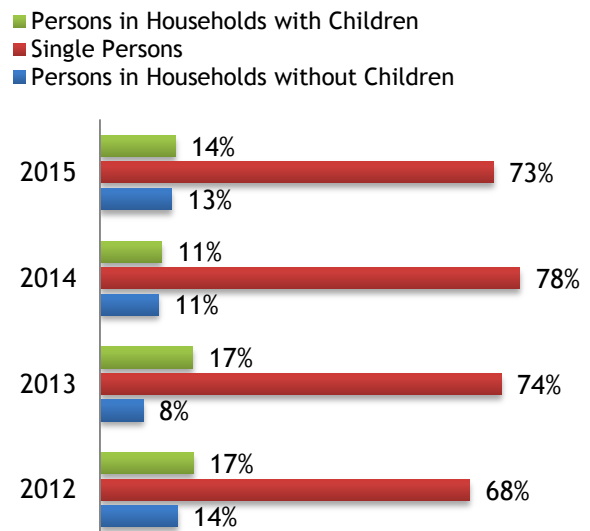
Children

Children experiencing homelessness face great challenges. High mobility, precarious living conditions, and poverty combine to present significant educational, health and emotional difficulties. Consider this:

- *At least 20% of homeless children do not attend school.* [i]
- *Within a year, 41% of homeless children will attend two different schools;*
- *28% of homeless children will attend three or more different schools.* [ii]
- *With each change in schools, a student is set back academically by an average of four to six months.* [iii]
- *Children experiencing homelessness often feel like outsiders and have difficulty maintaining friendships due to frequent moves. Their lives feel out of control, and they often experience anxiety and depression as a result.*
- *Many homeless children lack basic school supplies and a reasonable environment in which to do homework.*
- *Unaccompanied youth experiencing homelessness confront these and other challenges associated with homelessness without the support and guidance of a caring adult.*

Homeless children are truly among our nation's neediest and most at risk.

Children's Needs

Need	Value
Child Care	0.125
WIC	0.167
Health Care	0.292
SNAP	0.33
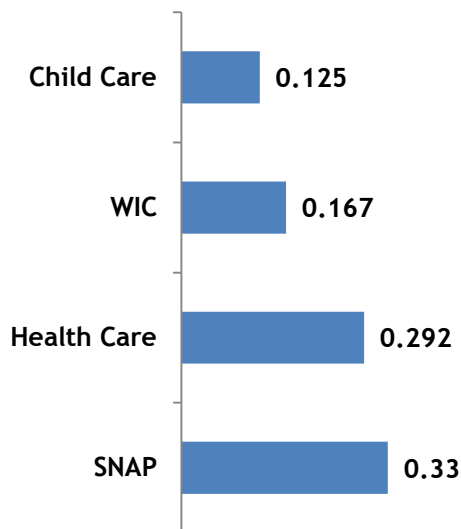
Unaccompanied Youth

Unaccompanied youth include young people who have run away from home, been thrown out of their homes, and/or been abandoned by parents or guardians. These children, under the age of 18 are separated from their parents for a variety of reasons. Over half report being physically abused at home, and over one third report sexual abuse.

In Smith County a child under 18 years of age cannot find shelter unless a victim of sexual assault, in which case shelter and services can be provided by the East Texas Crisis Center.

Demographics

Gender		Race		Ethnicity	Median Age	Child Median Age
Male	64.9%	White	55.6%	Hispanic		
Female	35.1%	Black	33.1%	8.5%	47	5
		Other	11.3%			

Veterans

The Department of Veterans Affairs (VA) is committed to ending homelessness among veterans within 5 years, but there is a subset of the homeless veteran population that is slipping through the cracks: the most vulnerable homeless veterans. These men and women face complex issues that have kept them trapped in the cycle of homelessness and in a "revolving door" of crisis service systems for decades. If we cannot create the right kinds of housing and services models for the most vulnerable now, we risk allowing the newer generation of veterans returning from current conflicts to become tomorrow's vulnerable long-term homeless veterans.

The Department of Veterans Affairs stated last year that the number of homeless veterans nationwide had dropped by over 55,000. This is partially due to new funds being initiated into communities around the nation. Unfortunately we don't see that trend in Tyler/Smith County, **at this point, 27% of our surveyed populations are classified as veterans**, a 4% decrease since last year.

Facts about the Smith County homeless veteran subpopulation:

- 36% do not receive VA benefits
- Make up 27% of the Smith County homeless population
- 59% White 35% Black
- Median age of 54
- 27% are homeless for the first time
- 39% are chronically homeless
- 32% suffer from mental illness
- 18% suffer from addiction
- 10% are employed fulltime
- 16% have Bachelor or Master degree
- 18% served in Vietnam
- 10% served in Kuwait
- 3% served in Afghanistan
- 8% served in Iraq
- Years of service ranged from 2 to 20 years. Median 3 years

Veterans are twice as likely as other Americans to become chronically homeless.[iv]
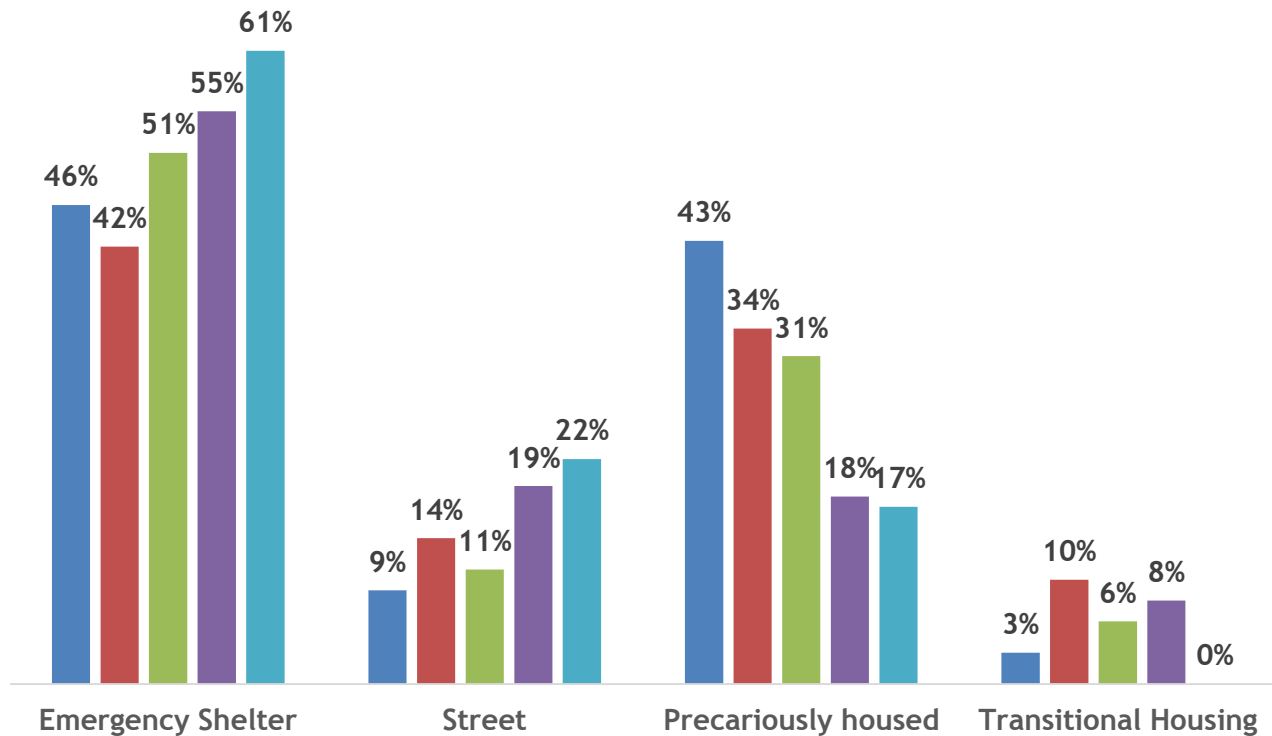
After serving and sacrificing for our country we are seeing a growing number of our veterans who find themselves and their families not only unemployed but also homeless and forgotten.

Retired Major General John T. Furlow
Veterans and Community Roundtable
City of Tyler

Last Night

Where They Stayed Last Night

■ 2011 ■ 2012 ■ 2013 ■ 2014 ■ 2015

There was a 6% increase in the number of people seeking assistance from emergency shelters; most of this can be attributed to a shift in bed assignments at the Salvation Army. They no longer have transitional housing instead, all their beds are considered emergency shelter. There was a 3% increase in the number of people staying on the streets, and an insignificant decrease in the number of people at risk of homelessness.

Smith County Inventory of Beds

An inventory of beds is conducted on the same night as the Point in Time Homeless Survey and Count.

- 334 beds were available on January 22, 2015.
- 210* beds were in Emergency Shelters (63%).
- 99 beds were in PATH's Transitional Housing program. PATH residents were not surveyed and are not reflected in the chart above.(30%).
- 25 beds were in Permanent Supportive Housing (7%) (Veterans only).

In the last year, due to increased need and funding sources, in became necessary for The Salvation Army to devote all their beds to Emergency Shelter, as a result no clients were able to receive Transitional housing services.

Length of homelessness

One objective of homeless programs is to make episodes of homelessness as short as possible. Typically, the longer an individual or family is homeless, the more services and support they will need to become stably housed, increasing both the cost and the amount of resources used per case. 2015 studies show a small increase in the number of newly homeless. Those experiencing homelessness multiple times or continuously increased by 7%. Those experiencing homelessness this year have been homeless for an average of 162 days a great improvement over last year's 204 but still much more than the average of 90 days in 2010.

Chronic vs. Episodic

CHRONIC VS. EPISODIC

- – – 1st time homeless in the past 3 years
- – – 2-3 episodes in the past 3 years
- – – Continuously homeless for a year or more
- – – At least 4 episodes in the past 3 years
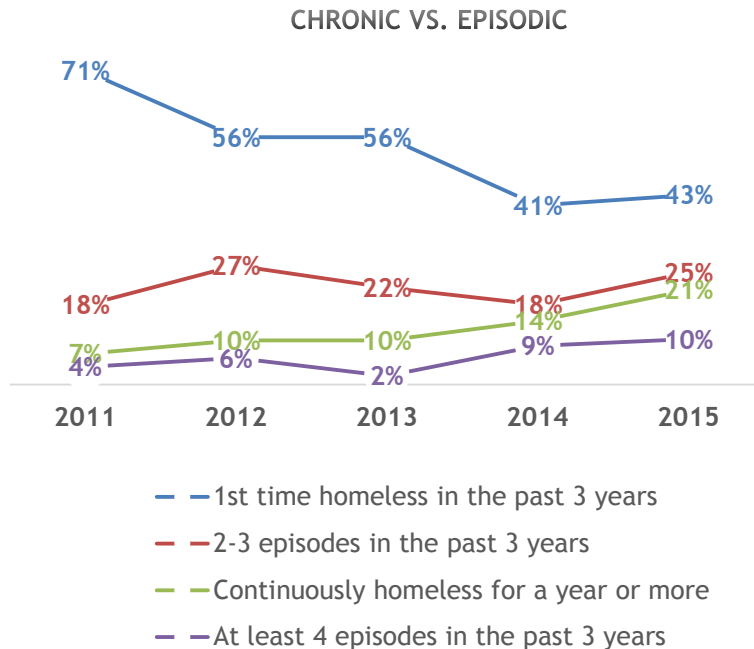
After several years of decreases in first time homelessness, we saw a slight increase from 41% to 43%. There was an increase of 7% for individuals who experienced 2 to 3 episodes of homelessness in the past 3 years. Chronic Homelessness, defined as an unaccompanied individual with a disability who has either been continuously homeless for a year or more or has experienced at least four episodes of homelessness in the last three years, has increased from a collective 23% to 31%.

Chronically homeless men and women often have multiple, co-occurring medical, mental health and substance abuse disorders, as well as other barriers to housing stability like histories of trauma and violence and of incarceration. The intensive impact this segment of homeless people have on emergency systems of care, leads them to use nearly half of the resources in the homeless services system.

Where Respondent Became Homeless

Where they lived when they became homeless

■ Tyler   ■ East Texas   ■ Texas   ■ out of state
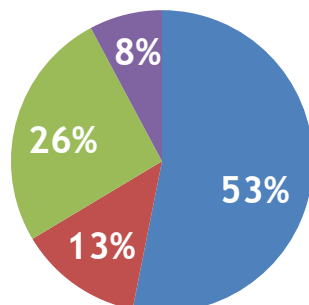
Reasons for Becoming Homeless

Lack of employment and the inability to pay rent or mortgages are the most significant reasons for becoming homeless 55% and 46%, physical/mental disabilities account for 25% of all homelessness.
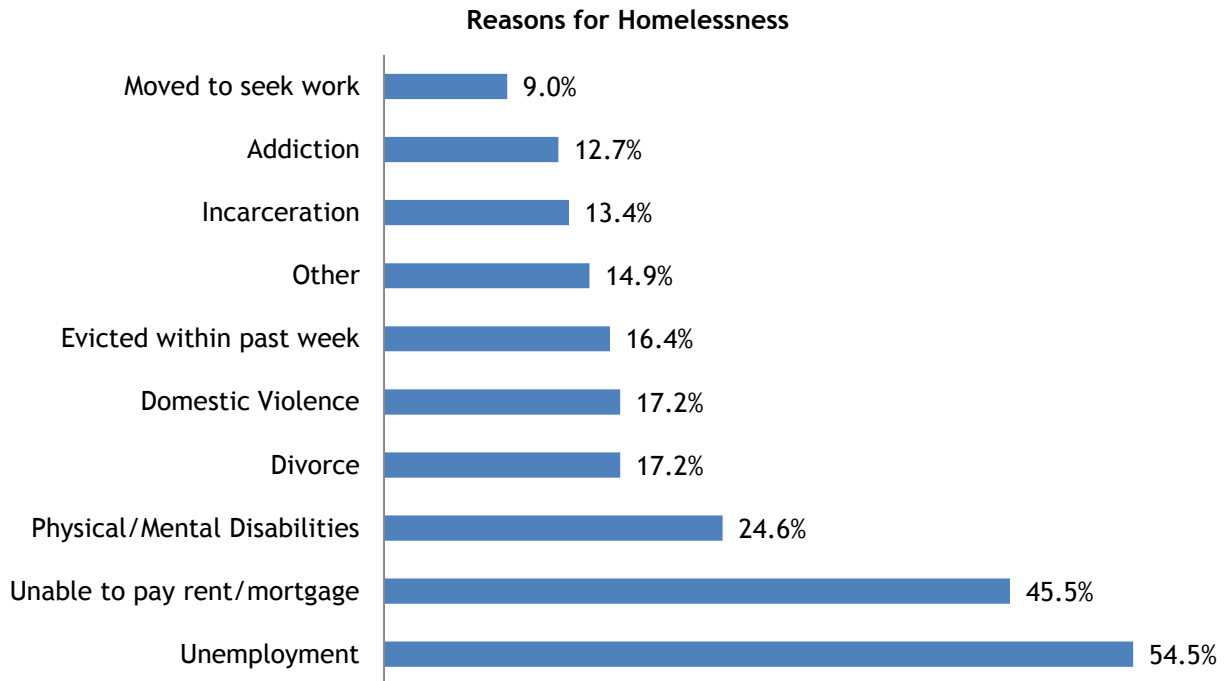
Reasons for Homelessness

Reason	Percentage
Moved to seek work	9.0%
Addiction	12.7%
Incarceration	13.4%
Other	14.9%
Evicted within past week	16.4%
Domestic Violence	17.2%
Divorce	17.2%
Physical/Mental Disabilities	24.6%
Unable to pay rent/mortgage	45.5%
Unemployment	54.5%

Poverty

The availability of resources can make a major difference between being at risk and becoming chronically homeless. Employment, insurance, and social service programs all contribute to keeping people stably housed and off the streets. The unifying condition for virtually all of Smith County's homeless population is extreme poverty.

Poverty is more than a lack of funds; it is the mental and physical state of impoverishment. Growing up in poverty has been shown to create more cases of poverty through a process called "learned helplessness." Having a support system is imperative in helping someone overcome poverty.

According to the US Census Bureau, 18.5% of Texans live at or under the poverty level. According to the US Department of Health and Human Services a family of four would have to make $2,021 a month to be above the threshold.

2015 Poverty Guidelines for the 48 Contiguous States and the District of Columbia	
Persons in family/household	**Poverty guideline**
1	$ 11,770
2	$ 15,930
3	$ 20,090
4	$ 24,250
5	$ 28,410
6	$ 32,570
7	$ 36,730
8	$ 40,890
For families/households with more than 8 persons, add $4,160 for each additional person.	

Department of Health and Human Services

Factors Contributing to Homelessness

- **Automobile related** - Broken down car, no insurance, tickets, etc.
- **Decline in Public Assistance** - Current TANF benefits and food stamps combined are below the poverty level in every state; in fact, the median TANF benefit for a family of three is approximately one-third of the poverty level. Thus, contrary to popular opinion, welfare does not provide relief from poverty.
- **Divorce** - Divorce often leaves one of the spouses homeless. Most often it's the father, but sometimes it's the mother and children or everyone involved.
- **Domestic Violence** - Battered women who live in poverty are often forced to choose between abusive relationships and homelessness.
- **Drug and Alcohol related problems** - Rates of alcohol and drug abuse are disproportionately high among the homeless population.
- **Illness** - For families and individuals struggling to pay the rent, a serious illness or disability can start a downward spiral into homelessness, beginning with a lost job, depletion of savings to pay for care, and eventual eviction.
- **Job loss** - No income to pay rent.
- **Lack of affordable housing**- The lack of affordable housing has lead to high rent burdens (rents which absorb a high proportion of income), overcrowding, and substandard housing.
- **Lack of child support** - In families where child support is ordered but not paid, the decrease in income can lead to an inability to pay rent, utilities, or both.
- **Low wages** - Declining wages have put housing out of reach for many workers: in Smith County, $15.17/hour is required to afford a three-bedroom apartment at Fair Market Rent.
- **Mental Illness** - Approximately 14% of the single adult homeless population suffer from some form of severe and persistent mental illness.
- **Physical Disabilities** - Disabled individuals may be unable to work or find appropriate employment. For those receiving SSI, they often struggle to obtain and maintain stable housing.
- **Post Traumatic Stress Disorder** - This disorder is common with veterans and those that have been in violent situations. It can make it difficult to have a stable life.
- **Poverty** - Being poor means being an illness, an accident, or a paycheck away from living on the streets.
- **Roommates** - When one or more roommates falls through with their end of the bargain, they can be a reason for others becoming homeless.
- **Severe Depression** - Can make it impossible for an individual to maintain a stable life.
- **Tragedy** - Many people just quit functioning because their families died or were killed...sometimes recently...other times 15 years ago...other times 30 years ago.

> Domestic violence is often a primary cause of homelessness among women and their children. Research has shown that housing instability and a lack of safe and affordable housing options increase the risks of homelessness for women experiencing domestic violence. Victims often have little access to money and weak support systems to rely on if and when they flee the relationship. Because of this, many victims of domestic violence are faced with the difficult decision to stay with their abusers or become homeless when they flee.
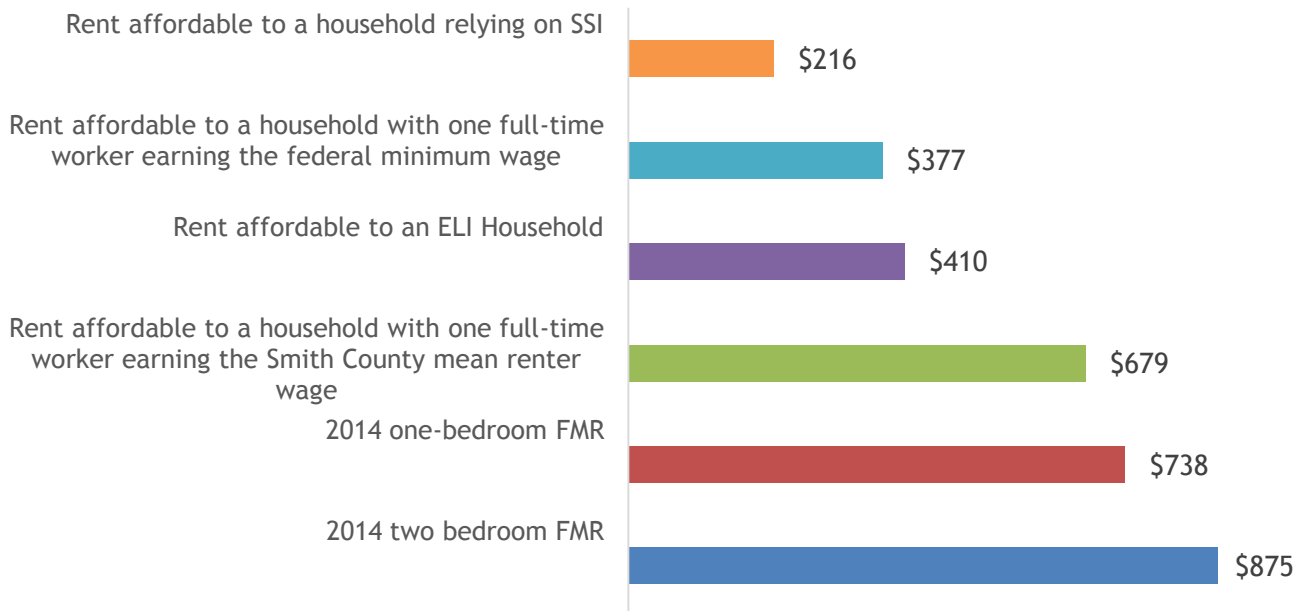>
> Stephanie Guzman
> Homeless Prevention Coordinator
> East Texas Crisis Center

Housing Affordability

According to the National Low Income Housing Coalition 2014 Out of Reach report, in Tyler and Smith County, the Fair Market Rent (FMR) for a two-bedroom apartment is $875. In order to afford this level of rent and utilities – without paying more than 30% of income on housing – a household must earn $2,917 monthly or $35,000 annually. Assuming a 40-hour work week, 52 weeks per year, this level of income translates into a Housing Wage of $16.83/hour.

In Texas, a minimum wage worker earns an hourly wage of $7.25. In order to afford the FMR for a two-bedroom apartment, a minimum wage earner must work 93 hours per week, 52 weeks per year. Or a household must include 2.3 minimum wage earners working 40 hours per week year-round in order to make the two-bedroom FMR affordable.[v]

Smith County, TX
The GAP between AFFORDABILITY and REALITY for renters

Category	Amount
Rent affordable to a household relying on SSI	$216
Rent affordable to a household with one full-time worker earning the federal minimum wage	$377
Rent affordable to an ELI Household	$410
Rent affordable to a household with one full-time worker earning the Smith County mean renter wage	$679
2014 one-bedroom FMR	$738
2014 two bedroom FMR	$875

Definitions

Affordability in this report is consistent with the federal standard that no more than 30% of a household's gross income should be spent on rent and utilities. Households paying over 30% of their income are considered cost burdened. Households paying over 50% of their income are considered severely cost burdened.

Area Median Income (AMI) is used to determine income eligibility for affordable housing programs. The AMI is set according to family size and varies by region.

Extremely Low Income (ELI) refers to earning less than 30% of AMI.

Housing Wage is the estimated full-time hourly wage a household must earn to afford a decent rental unit at HUD-estimated Fair Market Rent while spending no more than 30% of their income on housing costs.

Full-time work is defined as 2,080 hours per year (40 hours each week for 52 weeks). The average employee works roughly 34.5 hours per week, according to the Bureau of Labor Statistics.

Fair Market Rent (FMR) is the 40th percentile of gross rents for typical, non-substandard rental units. FMRs are determined by HUD on an annual basis, and reflect the cost of shelter and utilities. FMRs are used to determine payment standards for the Housing Choice Voucher program and Section 8 contracts.

Renter wage is the estimated hourly wage among renters by region, based on 2012 Bureau of Labor Statistics data, adjusted using the ratio of renter income to the overall household income reported in the ACS and projected to April 1, 2014.

Employment

Employment
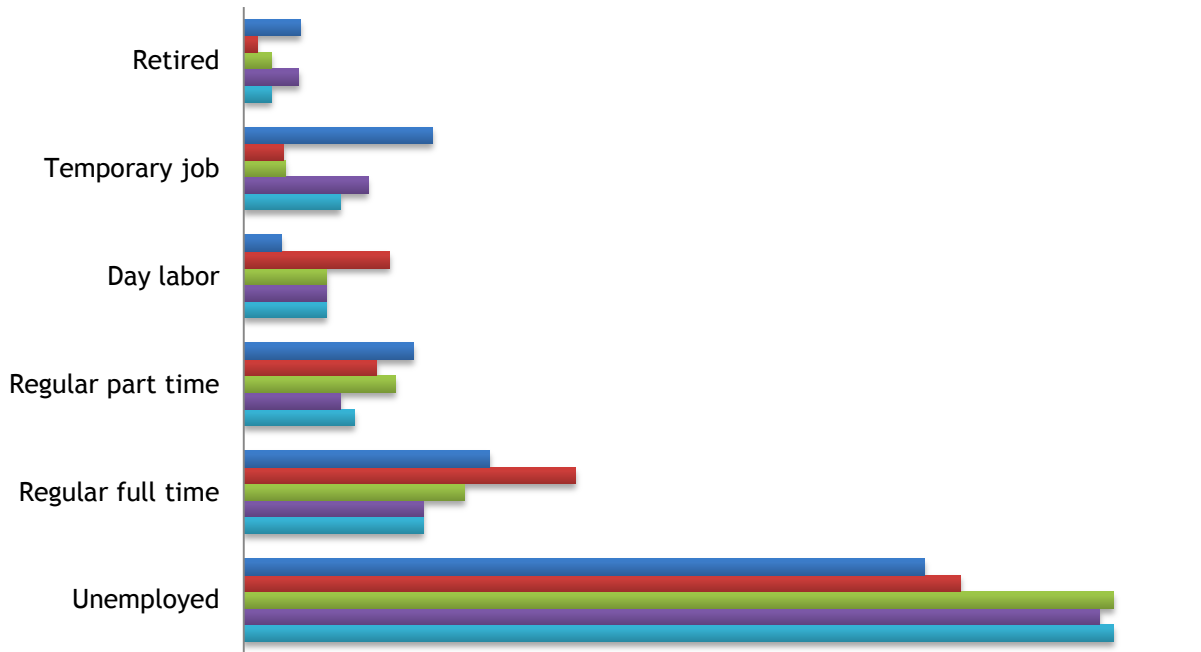
|	Unemployed	Regular full time	Regular part time	Day labor	Temporary job	Retired
2011	49%	18%	12%	3%	14%	4%
2012	52%	24%	10%	11%	3%	1%
2013	63%	16%	11%	6%	3%	2%
2014	62%	13%	7%	6%	9%	4%
2015	63%	13%	8%	6%	7%	2%

In this study, 77% of respondents indicated they were able to work; however only 34% have some form of employment, with only 16% employed fulltime.

63% were unemployed, median length of unemployment is 9.4 months, in 2013 it was 3 months.

Unemployment is the number one reason for homelessness. Historically, lack of transportation is the top reason for unemployment.

The increase in low-wage work and the number of working poor families has been accompanied by another disappointing trend. Working families have no benefits such as sick leave, vacation time, and health insurance. Without these benefits, a day of work missed is a day without pay. Many working poor parents are not paid when they take time off to care for a sick child, when they attend a funeral or when they are hospitalized. There are no funds available to sustain families during periods of unemployment, which can be frequent with the seasonal or temporary nature of many jobs of the working poor.

Education

Educational Attainment
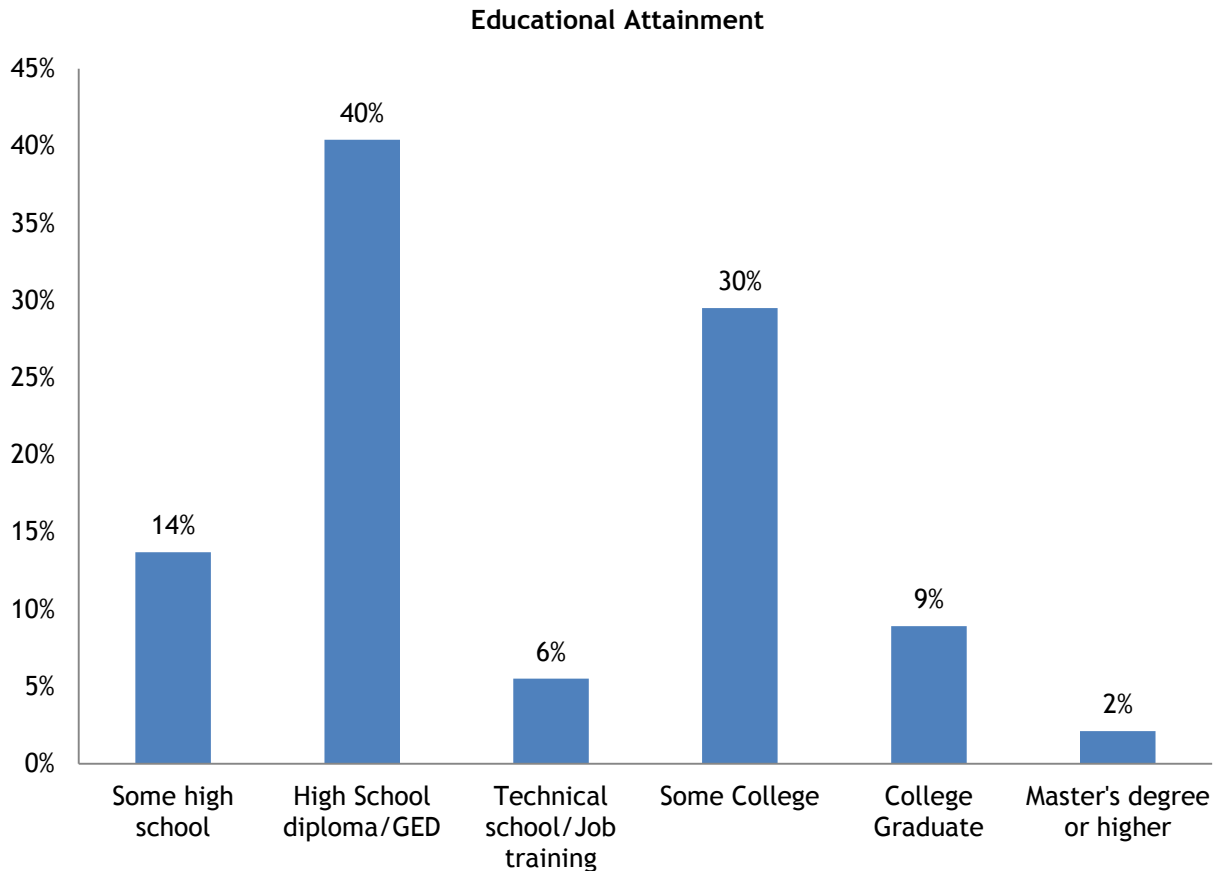
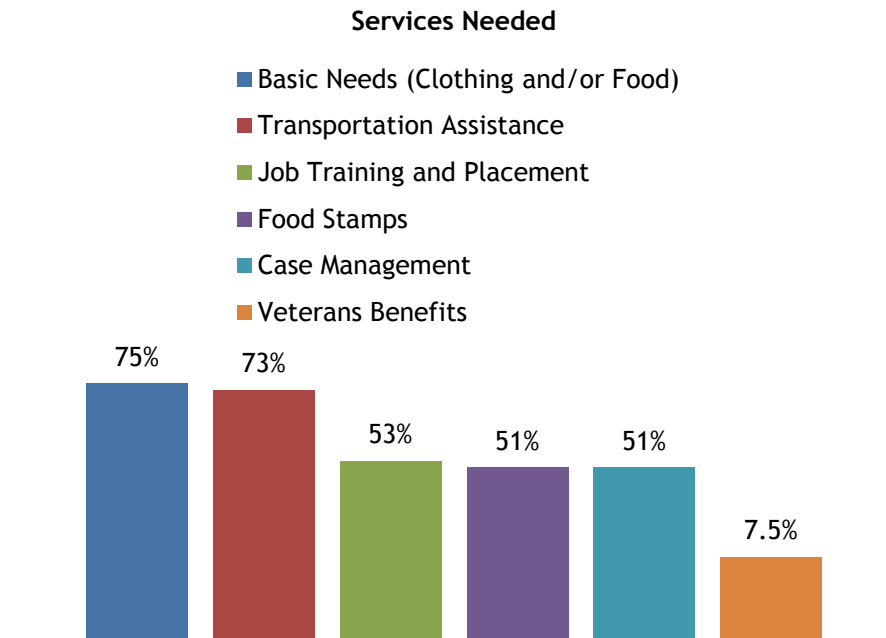40% of respondents report attaining a high school diploma.
47% have a post secondary education with 11% have a college degree or higher.

Education equates to earnings. People with a solid basic education and literacy skills work and earn more than individuals without those skills. Low educational attainment can lead to unemployment; unemployment is the number one reason for homelessness.

A lack of education limits access to living-wage jobs. Research has shown the lack of a high school diploma to be associated with homelessness for individuals and families. When people lack income to meet all of their needs, they are forced to choose between housing, utilities, transportation, childcare, healthcare, and food. The need for an educated workforce has never been greater. The majority of new jobs that will be created by 2014 will require some postsecondary education. In 1970, only 26 percent of middle-class workers had any education beyond high school. Today, nearly 60 percent of all jobs in the U.S. economy require completion of a certificate or college degree.

Fred Peters
Director – Public Affairs and Grant Development
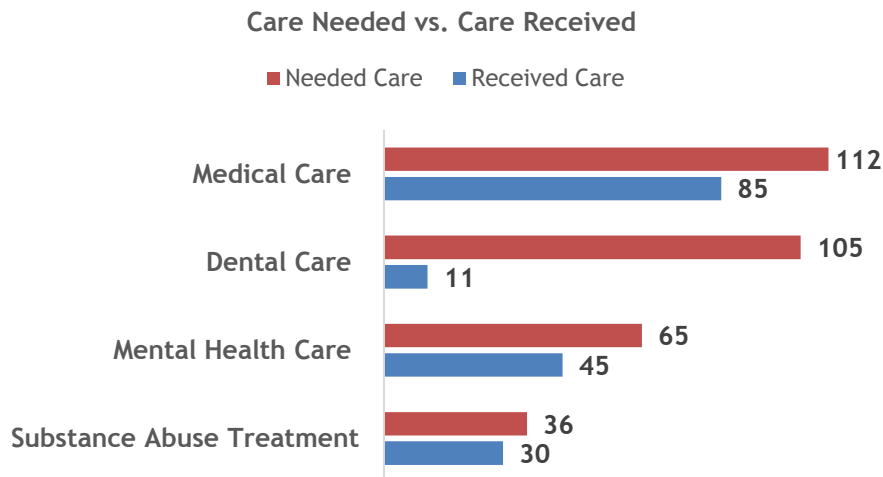Tyler Junior College

Services Needed

Services Needed

Legend:
- Basic Needs (Clothing and/or Food)
- Transportation Assistance
- Job Training and Placement
- Food Stamps
- Case Management
- Veterans Benefits

Bar chart values:
- 75%
- 73%
- 53%
- 51%
- 51%
- 7.5%

Although housing is a priority of all persons participating in our survey, the needs for transportation, job training and placement, and case management as listed in the top five. These align with the top reasons for becoming homeless. Basic needs for clothing and food are also in the top five. Agencies believe this is an issue of accessibility.
Those experiencing homelessness are very aware of what would help them get out and stay out of homelessness.

Unmet Clinical Care

Care Needed vs. Care Received

Legend:
- Needed Care
- Received Care

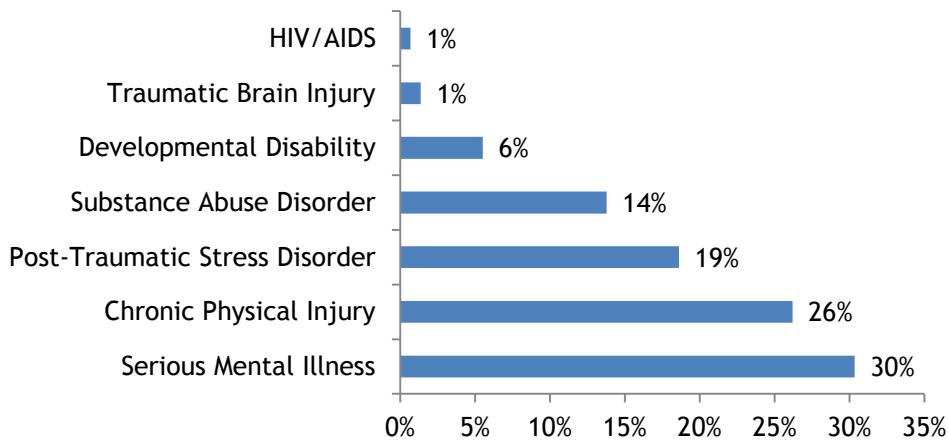| Category	Needed Care	Received Care
Medical Care	112	85
Dental Care	105	11
Mental Health Care	65	45
Substance Abuse Treatment	36	30

When asked about insurance only 24% have insurance, which most Texans can barely afford. Still, 59% of respondents who required medical care went to the emergency room.

History of Disability

Physical or Mental Disability

Category	Percentage
HIV/AIDS	1%
Traumatic Brain Injury	1%
Developmental Disability	6%
Substance Abuse Disorder	14%
Post-Traumatic Stress Disorder	19%
Chronic Physical Injury	26%
Serious Mental Illness	30%

People with Complex Health Needs

not every disability is visible

According to the Corporation for Supportive Housing (CSH), across the country, many hospital emergency departments are treating individuals who visit hospitals multiple times a year, often because of complex physical, mental, and social needs. These frequent users often experience chronic illness, mental health, and substance abuse disorders and homelessness, all of which can contribute to frequent emergency department visits. Emergency departments are a community resource and are the only health care resource that by law must serve everyone—but they also provide the most expensive health services in our communities. Frequent users' hospital visits can account for disproportionate costs and time for emergency departments, contribute to emergency department overcrowding, and drain state and county health care resources. Supportive housing can be used to address the needs of the health systems users by replacing a costly and ineffective cycle with ongoing, coordinated and multi-disciplinary care provided in more appropriate settings.

> *We must meet the person where he or she is and begin to assist in offering options for improvement.*
>
> *Waymon Stewart*
> *Andrews Center Behavioral Healthcare System*
> *Chief Executive Officer*

Responding to the needs

What is a Continuum of Care?

Updated January 2010- National Alliance to End Homelessness

A Continuum of Care (CoC) is a regional or local planning body that coordinates housing and services funding for homeless families and individuals. In 2007, 461 CoCs submitted application for federal homeless assistance funds in all 50 states, plus DC, Puerto Rico, and Guam. CoCs represent communities of all kinds, including major cities, suburbs and rural areas.

In 1995, the US Department of Housing and Urban Development (HUD) began to require communities to submit a single application for McKinney-Vento Homeless Assistance Grants in order to streamline the funding application process, encourage coordination of housing and service providers on a local level, and promote the development of Continuums of Care (CoCs). By requiring communities to submit a single application, HUD hoped to encourage a more structural and strategic approach to both housing and providing services to homeless people. A CoC would provide this more strategic system by providing homeless people with housing and services appropriate to their range of needs.

According to HUD, a CoC 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." HUD identifies four necessary parts of a continuum:
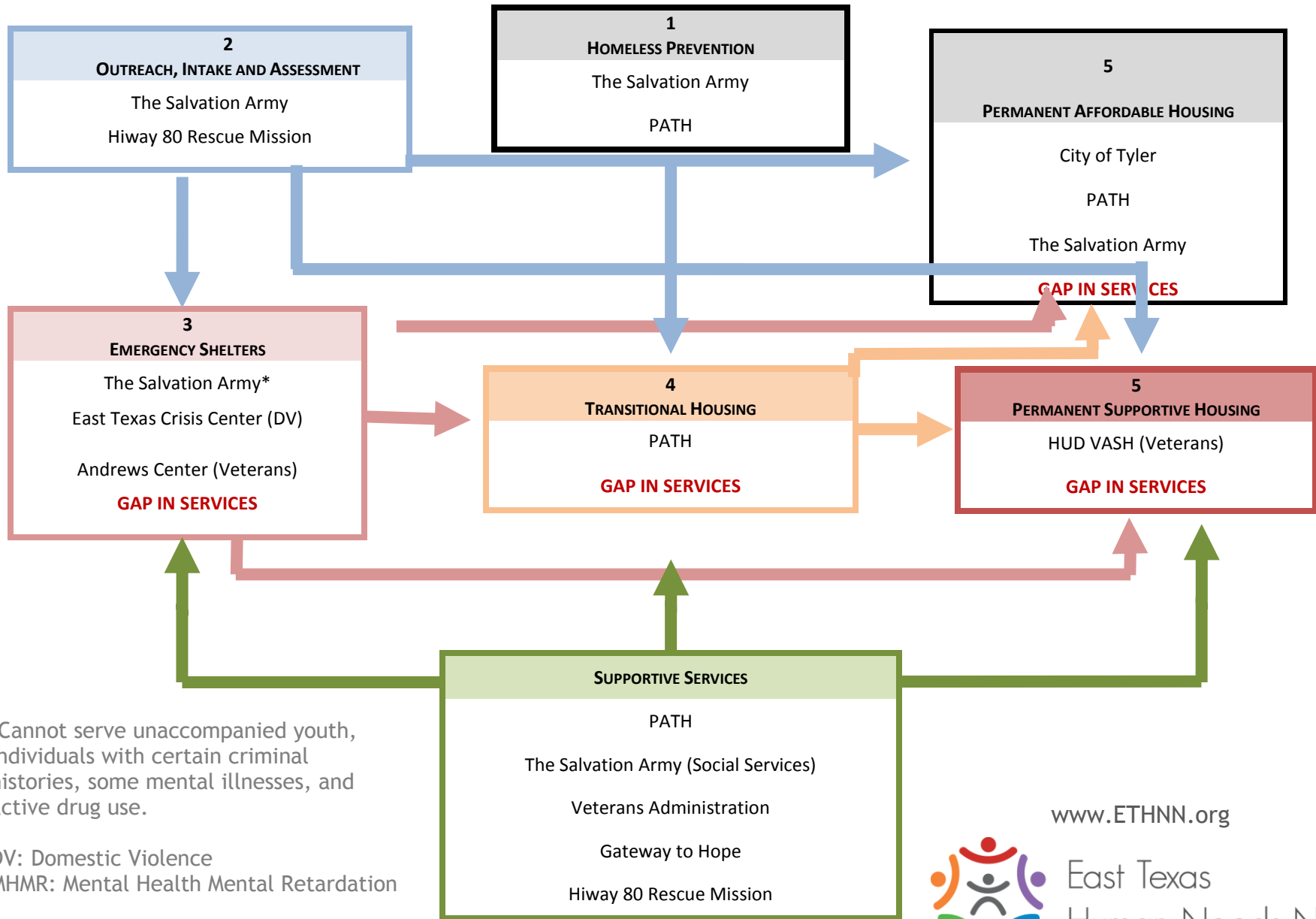
- Outreach, intake, and assessment in order to identify service and housing needs and provide a link to the appropriate level of both;
- Emergency shelter to provide an immediate and safe alternative to sleeping on the streets, especially for homeless families with children;
- Transitional housing with supportive services to allow for the development of skills that will be needed once permanently housed; and
- Permanent and permanent supportive housing to provide individuals and families with an affordable place to live with services if needed.

CoCs can track and manage the homeless community in their area. One of most important activities entrusted to CoCs is the biannual count of the homeless population and an annual enumeration of emergency systems, transitional housing units, and beds that make up the homeless assistance systems. These counts provide an overview of the state of homelessness in a CoC, and offer the information necessary to redirect services, funding, and resources as necessary. The CoC also manages these services, offering both prevention strategies and homeless assistance programs to assist those at-risk of or experiencing homelessness.

The diagram below illustrates the Tyler Continuum of Care system including gaps in services.

Tyler / Smith County – continuum of care flow of services

The diagram shows the flow of services for those experiencing homelessness or at risk of homelessness. The tables show social services agencies addressing stages of homelessness.

1
HOMELESS PREVENTION

The Salvation Army

PATH

2
OUTREACH, INTAKE AND ASSESSMENT

The Salvation Army

Hiway 80 Rescue Mission

5
PERMANENT AFFORDABLE HOUSING

City of Tyler

PATH

The Salvation Army

GAP IN SERVICES

3
EMERGENCY SHELTERS

The Salvation Army*

East Texas Crisis Center (DV)

Andrews Center (Veterans)

GAP IN SERVICES

4
TRANSITIONAL HOUSING

PATH

GAP IN SERVICES

5
PERMANENT SUPPORTIVE HOUSING

HUD VASH (Veterans)

GAP IN SERVICES

SUPPORTIVE SERVICES

PATH

The Salvation Army (Social Services)

Veterans Administration

Gateway to Hope

Hiway 80 Rescue Mission

*Cannot serve unaccompanied youth, individuals with certain criminal histories, some mental illnesses, and active drug use.

DV: Domestic Violence
MHMR: Mental Health Mental Retardation

www.ETHNN.org

East Texas
Human Needs Network

Recommendations

The East Texas Human Needs Network plan follows the models established by the Federal Strategic Plan to Prevent and End Homelessness and the Texas Interagency Council for the Homeless Annual Report and Pathways Home Addendum.

The plan presents strategies building upon the lesson that mainstream housing, health, education, and human service programs must be fully engaged and coordinated to prevent and end homelessness. Specifically our community will:

- **Enhance leadership, collaboration, and civic engagement**, with a focus on providing and promoting collaborative leadership across all sectors

    o   Implement Coordinated Access and Assessment.

    o   East Texas Human Needs Network will continue working with all housing and mainstream service providers strengthening capacity and knowledge about collaboration by engaging the community, researching the needs, and collaboratively planning interventions to prevent and end homelessness.

- **Retool the homeless response system.** By transforming homeless services to crisis response systems that prevent homelessness and rapidly return people who experience homelessness to stable housing.

    o   The HEARTH Act and federal regulations require communities to develop a mechanism for common assessment and coordinated access. Currently our community allocates housing resources on a first come-first served basis. Individuals and families take their place at the bottom of endless waiting lists, regardless of their chronicity, medical vulnerability, acuity, or ability to address their own housing stability. The result is often akin to an emergency room devoting its costliest resources to a common cold patient while leaving a late-arriving heart attack victim to fend for him or herself. Effective immediately, our community will the Vulnerability Index (VI) & Service Prioritization Decision Assistance Tool (SPDAT) allows us to assess clients' various health and social needs quickly and then match them to the most appropriate – rather than the most intensive – housing interventions available.

    o   Implement a Homelessness Management Information System HMIS. A Homeless Management Information System is a local information technology system used to collect client-level data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

- **Increase access to stable and affordable housing,** by providing affordable housing and permanent supportive housing.

    o   ETHNN will work across sectors to develop additional affordable housing and to engage those providers with the capacity to provide permanent supportive housing.

- **Implement a Housing First program.** Housing First is a simple philosophy that dictates that the most vulnerable and chronic people experiencing homelessness be offered the choice to move into permanent housing combined with available supportive services ("permanent supportive housing") right away. It discourages imposing conditions on permanent housing, whether related to health, employment or sobriety. This approach has a documented track record of ending people's homelessness while often encouraging them to make their own choices to get healthy, quit drugs and alcohol, and find employment when possible.

Resources:

United States Interagency Council on Homelessness	http://www.usich.gov/
National Alliance to End Homelessness	http://www.endhomelessness.org/
Texas Interagency Council for the Homeless	http://www.tdhca.state.tx.us/tich/
Texas Homeless Network	http://www.thn.org/
Corporation for Supportive Housing	http://www.csh.org/
National Low Income Housing Coalition	http://nlihc.org/
Texas Homeless Education Office	http://www.utdanacenter.org/theo/
National Law Center on Homelessness and Poverty	http://www.nlchp.org/
Center for Public Policy Priorities	http://forabettertexas.org/

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[i] *Author, Homeless Children: America's New Outcasts (Newton, MA: National Center on Family Homelessness, 1999).*
[ii] *Ibid.*
[iii] *Dr. Joy Rogers of the Loyola University Department of Education, Education Report of Rule 706 Expert Panel presented in B.H. v. Johnson, 715 F. Supp. 1387 (N.D. Ill. 1989), 1991.*
[iv] *National Coalition for Homeless Veterans*
[v] *National Low Income Housing Coalition*