Annual Report on the State Of Homelessness in Erie-Niagara Metropolitan Area



2014 Erie County

"Ending Homelessness does not mean that nobody will become homeless, but that effective systems will be in place to help people become housed again rapidly."

-Nan Roman President, National Alliance To End Homelessness

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Key Findings

- This is our first report featuring combined statistics since we merged with Niagara County 2 years ago. 7,948 people experienced homelessness in the Erie-Niagara region from October 1 2013 to September 30, 2014 (federal fiscal year). This will serve as a baseline for future reports.
- 6,126 people in Erie County and 1,888 people in Niagara County experienced homelessness (66 were served in both counties).
- An estimated 1,115 people in the Erie-Niagara Region are homeless on any given night, 940 people in Erie County and 175 people in Niagara County.
- There was an increase of 372 people experiencing homelessness in Erie County that can be attributed to more single individuals, including unaccompanied youth experiencing homelessness and the effectiveness of street outreach activities in identifying those in need.
- The number of persons in families entering shelters DECREASED by 8%.
- An estimated 508 families, mostly single mothers, entered shelters.
- 26.6% of those experiencing homelessness were children under the age of 18 and half of these children are not yet school age.
- The average length of stay in shelters has dropped by 33% in the past three years from 36 days to 24 days thereby reducing the trauma caused by homelessness
- The most logical way to reduce homelessness is to serve those entering shelters multiple times.
 117 people in household with children and 564 adult individuals experienced two or more episodes of homelessness in the past two years. The Coordinated Entry system needs to target this population for increased services in order to reduce homelessness.
- There were fewer Veterans identified in HMIS last year, 240 than the previous year, 257. The number of female homeless Veterans was the same at 41. This data is incomplete because the VA has its own database.
- More people are entering Transitional Housing directly from shelters, which is a positive trend.
- As a Continuum of Care, all of the providers are making substantial progress towards ending
 Veterans homelessness and chronic homelessness. Ending homelessness does not mean that no
 one will ever experience homelessness again but that effective systems will be put in place to
 house people again rapidly.
- As more Rapid Re-housing funds become available, the funds need to be made available to individuals as well as families.

Recommendations

- There is tremendous need for safe affordable rental housing in the community. In addition to overall affordable housing, Erie-Niagara region can use 500 single room occupancy units for individuals.
- The number of homeless households with children decreased slightly last year. Emergency Solutions Grant (ESG) funds and CoC funds could be used for Rapid-Rehousing. National research has indicated this model is successful in working with homeless families as most people need only modest and short-term assistance. The Coordinated Entry system needs to target this population for increased services and/or transitional housing in order to reduce homelessness.
- The HAWNY staff will continue to research cost effective prevention strategies.
- Expand the HMIS coverage rate and improve data quality to obtain a more comprehensive and reliable data system. The trend in decision making and planning is to base funding decisions on data. The more accurate and complete our data becomes the better planning and decision – making this community will have.
- Continue to refine the Coordinated Entry/Assessment process to ensure it adequately addresses the needs of those experiencing homelessness.
- As funding is reduced, we need to better coordinate available resources from federal, state, local and the private sector to end homelessness. CDBG, HOME, general funds and tax credits must be utilized for homeless populations.
- More Living Wage jobs are needed in order to stem the rise of poverty and, as a result, homelessness.
- Now that the Continuum of Care includes Erie, Niagara, Genesee, Orleans and Wyoming counties we need to develop partnerships to effectively assist those experiencing homelessness and address the unique needs of those living in rural communities.

Introduction

The Homeless Alliance of Western New York is the designated Continuum of Care (CoC) agency for Erie County. As such, it is responsible for compiling the annual Continuum of Care grant from the Department of Housing and Urban Development (HUD). In July 2013, the Niagara County CoC merged with the Erie County CoC. By the end of 2013, most providers were officially entering data into HMIS. This report covers the time period from 10/1/13 to 9/30/14.

In 2014, this grant awarded **\$9.3 million** in funding for new and renewed projects to homelessness alleviation agencies throughout Erie County. All agencies awarded homeless funds from the Continuum of Care grant, or through the Emergency Solutions Grant funds awarded by Erie County, the City of Buffalo and the Town of Tonawanda, are required to input client data into a centralized Homeless Management Information System (HMIS) that the Homeless Alliance of WNY maintains.

This report uses the 2014 Annual Homeless Assessment Report (AHAR) year (10/1/2013-10/1/2014) as the time frame and is mostly reliant on data from the Homeless Management Information System (HMIS), known in Buffalo as Buffalo Area Service Network (BAS-Net). This timeframe corresponds to the federal fiscal year, used because many homelessness alleviation providers use funds from the federal government. This time period is also used because the annual Erie and Niagara County homelessness data is submitted to HUD to produce a national homelessness report for this time period.

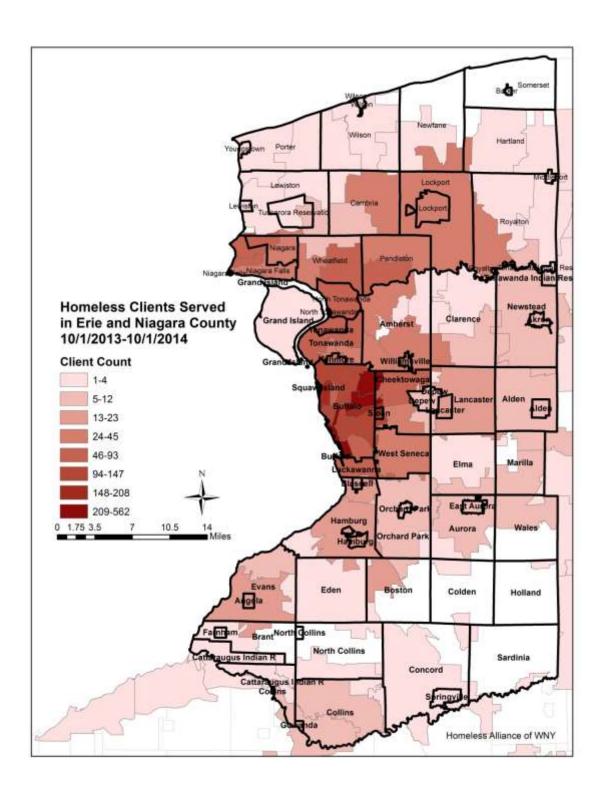
Not all agencies in the community are required to use HMIS. Some choose to use it voluntarily and others choose not to participate in the system. As a result, estimation is necessary to discern some of the figures in this report. Estimations are noted where they appear. Additional data was gathered from the annual Point-in-Time count, Housing Inventory Chart, unsheltered street counts, non-HMIS participating providers, and the Erie and Niagara Counties' Departments of Social Services.

Definition of Key Terms

- 1. **Homeless Management Information System (HMIS):** HMIS is a software application designed to record and store client-level information on the characteristics and service needs of homeless persons. In Erie County, this system is also called Buffalo Area System Network (Bas-Net).
- 2. **Point-in-Time (PIT) Counts:** One-night counts of both sheltered and unsheltered homeless populations. The one-night counts are reported on CoC applications and reflect a single night during the last week in January. In addition, we conducted a second Point-in-Time count on July 22, 2014.
- 3. **Children:** All persons under the age of 18.
- 4. **Unaccompanied Youth:** Unaccompanied individuals under the age of 25.
- 5. **Sheltered:** A homeless person who is in an emergency shelter, transitional housing, or safe haven program for homeless persons.
- 6. **Unsheltered:** A homeless person who is living in a place not meant for human habitation, such as the streets, abandoned buildings, vehicles, parks, and train stations.

- 7. **Emergency Shelter (ES)** Housing in which homeless persons can access shelter immediately and reside in for up to 30 days. The primary function is to assist individuals in identifying causes of homelessness, accessing services, and securing the next appropriate level of housing.
- 8. Code Blue: Seasonal shelter beds for days that are below 20 degree Fahrenheit.
- 9. **Transitional Housing (TH)** Housing in which homeless persons can live for up to 24 months and receive supportive services that will enable them to move to permanent housing and to live independently. The program must include housing placement assistance.
- 10. **Permanent Supportive Housing (PSH)** Housing in which homeless persons with a disability live without a limit on the length of stay. Supportive services are provided and rent cannot exceed 30% of a person's monthly income. Programs may be a single site, scattered sites, or clustered units and includes rental assistance programs (formerly known as Shelter Plus Care).
- 11. **Safe Haven (SH)** –Safe Havens are specialized housing programs for the very hard to serve homeless and chronically homeless who are seriously and persistently mentally ill. A SH can be either transitional or permanent housing. It serves persons who may or may not be willing to engage in treatment.
- 12. **Chronic Homelessness:** A chronically homeless person is defined as a homeless adult (single or with family) with a disabling condition who has either been continually homeless for a year or more or who has had at least four episodes of homelessness in the past 3 years. To be considered chronically homeless, a person must have been on the streets or in emergency shelter (e.g. not in transitional or permanent housing) during these episodes.
- 13. **Adult Only Household:** Single adult persons or adults with adult companions that do not have a child in their household.
- 14. **Household with Children and Adults**: A person in any household with at least one adult and one child present regardless of whether the child(ren) is present for the full program stay.
- 15. **Household with only Children**: A person in any household in which all persons are younger than age 18.
- 16. **Unknown Household Type**: Households that cannot be classified in cases when one or more persons are missing dates of birth. Note that in instances when the household already contains at least one known adult and one known child, the household type can be determined and categorized as a Household with Children and Adults.

Erie Niagara Metro Area



SECTION 1: Overall Homelessness in the Erie Niagara Metro Area (combined statistics)

Total Estimates

	2014 HMIS	2014 Estimated Total Count
	ПІЛІЭ	Total Count
Total	4,432	7,948
Erie County	4,046	6,126
Niagara County	452	1,888
Both	66	66

There were a total of 7,948 people who experienced homelessness in the Erie Niagara Metro area. This includes Erie and Niagara Counties in a de-duplicated count imputing. 66 people received services in both counties.

Table 1: Total Estimated Count of Homeless

	Current Bed Inventory	HMIS coverage Rate*	Dedicated Chronically Homeless Beds
Emergency Shelter	592	67%	N/A
Rapid Rehousing	105	100%	N/A
Transitional Housing	504	87%	N/A
Permanent Supportive Housing	993	78%**	103
Safe Haven	16	100%	N/A
TOTAL	2,210	87%	103

Table 2: Homeless Provider Coverage

Point in Time

	Unsheltered Homeless Count	Sheltered Homeless Count	Total
January 30, 2013	98	886	984
January 29, 2014	64	936	1,000

Table 3: Point in Time Counts 2013 and 2014

HUD requires each CoC across the nation to conduct an annual point in time count of both the sheltered and unsheltered homeless during the last ten days of January. Homeless outreach workers and community volunteers went to soup kitchens, homeless encampments, under bridges and other places where the homeless are known to congregate to conduct the counts. The data collected was entered into HMIS to ensure an unduplicated count.

^{*}Denominator does not include statutory exclusions from HMIS, such as domestic violence shelters.

^{**}The only provider that is not participating in HMIS is the HUD-VASH (Veterans Affairs Supportive Housing), which has 223 beds.

Point in time numbers are a one day snapshot of the homeless population. Due to the severity of the weather conditions in the winter in Western New York, January is probably not the best time of the year to do a count. The number of unsheltered homeless in January is most likely to be lower than during other times of the year. We estimated on any given night, about 1,115 people experience homelessness, 940 in Erie County and 175 in Niagara County.

HMIS Data

Individuals who experienced Homelessness recorded in HMIS	Total
Adults	3,081
Children	1,187
Missing Information	164
TOTAL	4,432

Table 4: Homeless Client Coverage

Of those who experienced homelessness in the Erie Niagara Metro area, we recorded a total of 4,432 clients, 3,474 households (both with and without children) which included 3,081 adults and 1,187 children in our HMIS system, including 356 people under the age of 18 who were unaccompanied. 430 families, defined as a household with both a child and a custodial adult, experienced homelessness in 2014. Not all shelter and service providers input data into HMIS, so we consider this the minimum of people who experienced homelessness.

<u>Gender</u>

Adults experiencing homelessness	Total	%	Without Children	%	With Children and Adults	%
Male	1,937	63%	1,847	71.7%	90	18%
Female	1,138	37%	722	28%	416	82%
Transgendered	6	0.2%	6	0.2%	0	0%
Total	3,081		2,575		506	

Table 5: Adults Experiencing Homelessness

Gender is not evenly distributed among those experiencing homelessness among adults. A homeless adult with children is significantly more likely to be female. A homeless adult without children is significantly more likely to be male.

<u>Age</u>

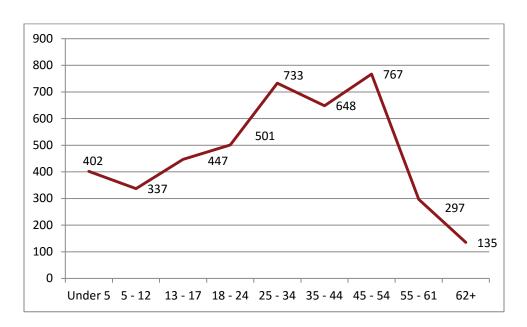


Figure 1: Age Distribution of all Homeless Persons

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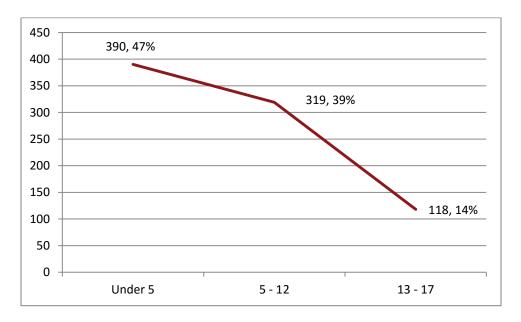


Figure 2: Age Distribution of Children

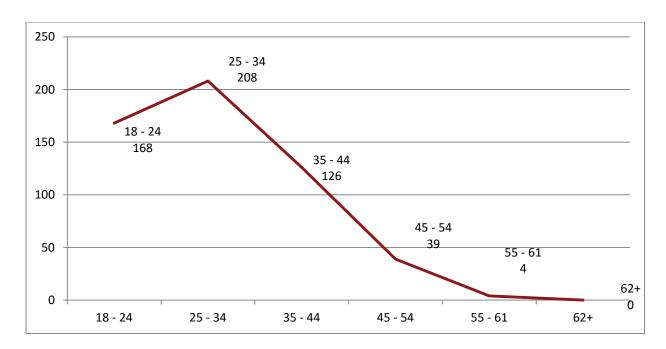


Figure 3: Age Distribution of Adults in Households with Children

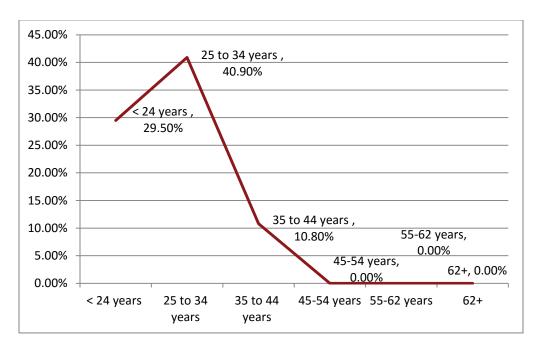


Figure 4: Women of all Races and Marital Statuses who Became Pregnant (by age)

We notice two peaks in the homeless population: 25-34 and 45-54. This population distribution has been consistent in Erie County since 2012

There is nothing atypical about the age of homeless parents of small children relative to the general population. The peak in age for homeless parents corresponds with the peak in age for women in the United States who become parents. Policymakers seeking to end family homelessness should examine the role that having small children plays in contributing to housing instability. Possible contributors could include the intersection of childcare expenses, low wages, and being rent-burdened.

Just under half of all homeless children in adult-child households are not yet school age.

Ethnicity and Race

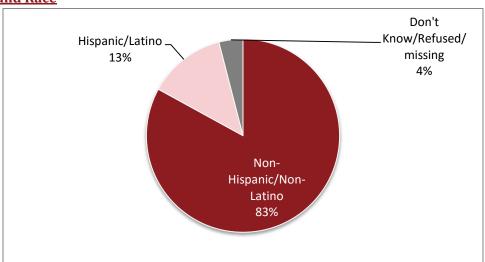


Figure 5: Ethnic Distribution of People Experiencing Homelessness

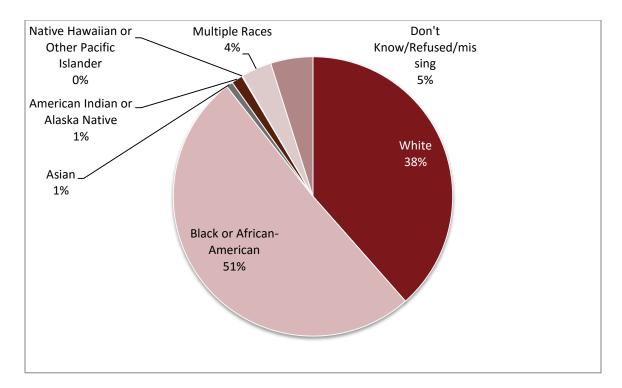
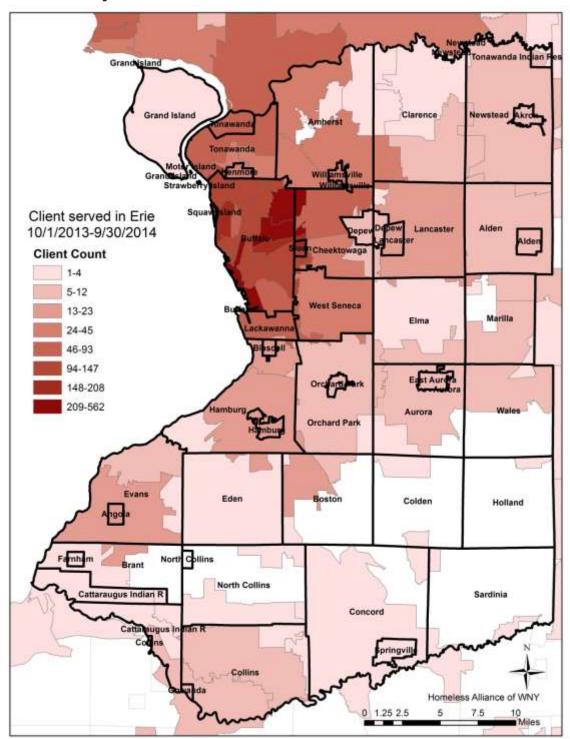


Figure 6: Racial Composition of People Experiencing Homelessness

Racial and ethnic minority populations are overrepresented in the homeless population relative to both the general populations of the counties they come from and the populations of those in poverty. 54% of those in poverty in the combined counties are white, while only 38% of the homeless are. 31% of the impoverished population in the two county region are African American, but 51% of the homeless are. 10% of the impoverished population in the two county region are Hispanic, but 13% of the homeless are.¹

 $^{^{\}rm 1}$ Data from 2013 US Census estimates for Erie and Niagara Counties.

Erie County



SECTION 2: Erie County Poverty Brief

Below is a brief overview of general poverty in Buffalo and Erie County. The population of the very poor serves as a comparison group to those experiencing homelessness as many demographic characteristics are very similar.

Poverty is the Root Cause of Homelessness

- ▶ 30.7% of people in Buffalo and 14.6% of people in Erie County live below the poverty line².
- Of persons below the poverty line aged 25 or above:
 - 42.5% did not graduate from high school
 - 23.6% have a high school diploma/GED
 - 21.8% have some college or associate's degree
 - 9.6% have a bachelor's degree or higher
- ▶ 42.7% of female-headed households in Buffalo live below the poverty level, 30.2% in Erie County.
- ▶ 26.7% of families live below the poverty level in Buffalo and 10.9% in Erie County.
- ▶ 52.2% of the children who live in poverty in Buffalo are young children (age below 5), 26.5% in Erie County.

Table 6 illustrates the extent of poverty among Buffalo's women and children:

NUMBER OF RELATED CHILDREN UNDER 18 YEARS	Number of Female Head of Households	Percentage Below Poverty
No children	7,302	17.7%
1 or 2 children	1,3870	48.5%
3 or 4 children	3,460	65%
5 or more children	558	87.8%

Table 6: Female Households by Number of Children- ACS 2009-2013 5-year Estimates

- ▶ 56.4% (34,435) of renters in Buffalo pay more than 30% of their income for rent.
- Buffalo's unemployment rate is 8.2%, slightly higher than all of our neighboring cities, and much higher than the national rate of 6.2%

 $^{^{2}}$ Data shown in this section is from American Community Survey 2009-2013 5 years estimates except where stated

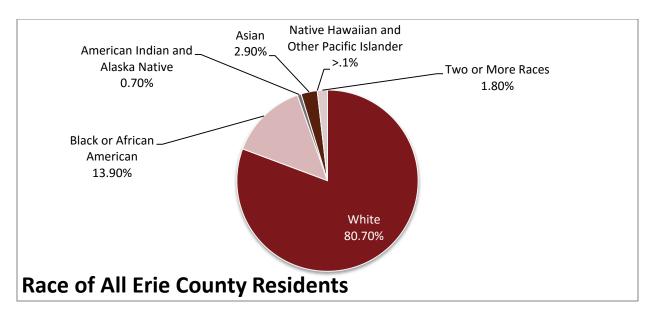


Figure 7: Racial Composition of all Persons in Erie County

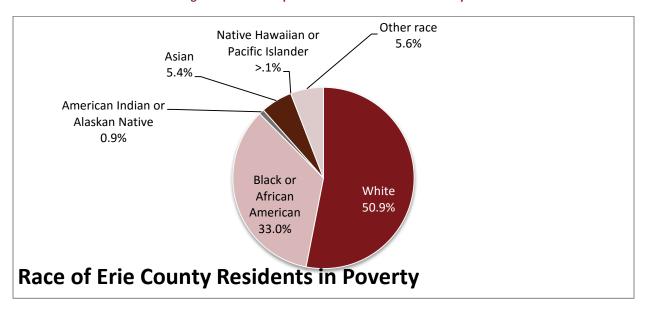


Figure 8: Racial Composition of Those in Erie County Living in Poverty

Poverty is not evenly distributed among the population of those in Erie County. Of those who experience poverty in Erie County:

- 50.9% are White (9.3% of all whites are in poverty)
- 33% are Black or African American (36.9% of all African Americans are in poverty)
- .9% are American Indian or Alaskan Natives (26.2% of all American Indians are in poverty)
- 5.4% are Asian (30.4% of all Asians are in poverty)
- 5.6% identify as another race (46.8% of those who identify as another race are in poverty)
- 11.9% identify as Hispanic or Latino of any race (38% of all Hispanic or Latino people are in poverty)

• 56.2% were female, 43.8% were male (15.8% of all females are in poverty, 13.3% of all males are in poverty)

Housing affordability is usually considered to be no more than 30% of rent compared to a household's income. Although Buffalo's owner occupied units are considered to be very affordable compared to the national market, the majority (56.4%) of renters in Buffalo are paying more than 30% of their income. Based on fair market rent reported by HUD, a two-bedroom apartment costs \$768 including utilities. To find such an apartment that would meet living standards is not easy. To afford it is a much bigger problem. A single individual would need to earn at least \$16/hr, which is 78% more than the current NYS minimum wage of \$9.00 (as of January 1, 2015). A single parent working full time in a minimum wage job could easily fall into homelessness.

SECTION 3: Overview of Homelessness in Erie County

This chapter presents the 2014 estimates of homelessness as well as the capacity of homeless services for sheltering and housing those who experience homelessness in Erie County. The latest point-in-time count was conducted on January 29th, 2014. The annual count is based on both HMIS data and count of homeless persons in non-participating programs.

Point In Time Count (PIT)

HUD requires each CoC across the nation to conduct an annual point in time count of both the sheltered and unsheltered homeless during the last ten days of January. On July 22, 2014, the CoC chose to voluntarily count unsheltered clients. Homeless outreach workers and community volunteers went to soup kitchens, homeless encampments, under bridges, and other places where the homeless are known to congregate to conduct the counts. The data collected was entered into HMIS to ensure an unduplicated count.

Erie County	Unsheltered Homeless Count	Sheltered Homeless Count	Total
January 26, 2011	178	760	938
October 26, 2011	135	N/A	N/A
January 26, 2012	106	804	910
July 26, 2012	131	N/A	N/A
January 30, 2013	98	750	848
January 29, 2014	64	784	848
July 22, 2014	119	N/A	N/A

Table 7: Point in Time Counts in Last 3 Years

Point in Time numbers are a one day snapshot of the homeless population. Outreach teams, volunteers, and shelter staff interview every homeless person that they can find in an attempt to construct a one count. Due to the severity of the weather conditions in the winter in Western New York, January is probably not the best time of the year to do a count in Erie County. The number of unsheltered homeless in January is most likely to be lower than during other times of the year. **Knowing this, we estimate there to be 940 people homeless on any given night in Erie County.**

Annual Homeless Count

This chapter includes information entered into HMIS from Emergency Shelters, Transitional Housing programs, Safe Havens, Code Blue, Outreach programs and programs that provide services only. The total unduplicated count of homeless persons entered into HMIS during this time period was 4,448*. As discussed in the introduction, there are programs that do not enter data into HMIS. In order to get a total number of homeless in a given time period, we have to estimate the numbers served by non-participating HMIS programs. The total estimated unduplicated homeless count is 6,126 (see appendix

two for details of the estimation). While more clients have been served, we are seeing decreases in lengths of stay, and thus higher turnover.

*The number shown here is different from the 4,046 number in the previous chapter and in the appendix. The 4,448 includes some shelters who participate in HMIS during parts of the year and domestic violence victims who were assisted by rapid rehousing program.

Comparison of Bed Inventory³

There are five types of housing programs in the Erie County.

	Current Bed Inventory	HMIS coverage Rate	Dedicated Chronically Homeless Beds
ES	540	61.7%	N/A
RRH	105	100%	N/A
TH	433	88.3%	N/A
PSH	959	78%	103
Safe Haven	16	100%	N/A
TOTAL	1,973	86%	103

Table 8: Bed Inventory Comparison- HMIS Participation

Domestic Violence providers are not allowed to enter data into HMIS currently. Some faith based providers and the Veteran's Affairs do not have the capacity or willingness to be able to enter into HMIS. HAWNY is working with them in an effort to obtain as much information as possible.

Program Type	2012 HMIS Count	2012 Estimated Total Count	2013 HMIS Count	2013 Estimated Total Count	2014 HMIS Count	2014 Estimated Count
Total Unique Homeless	3,465	5,681	3,948	5,754	4,448	6,126
Persons						
Emergency Shelter	2,316	4,558	2,481	4,710	2,839	4,996
Transitional Housing	642	768	713	775	539	602
Safe Haven	22	22	22	22	23	23
SSO	712	712	1,266	1,266	1,337	1,337
Outreach	137	137	223	223	389	389
Jan. and Jul. Unsheltered count	226 (Jan & Jul)	226	98 (Jan)	98	177 (Jan + July)	177

Table 9: Overall Homeless Population in HMIS and Total Estimation for 2012, 2013, and 2014

³ These are numbers of beds in the CoC by housing type; this is not a count of people. HMIS coverage is the percentage of beds that are entered into HMIS of those which are eligible to be entered. Domestic violence specific beds are not HMIS eligible and thus not included in the coverage rate calculation.

Numbers for each program type are de-duplicated within the programs. Total number of homeless is also de-duplicated for all the homeless programs. For example, if someone used the emergency shelter and later was admitted to transitional housing, he/she will be counted in both ES and TH categories. However, he/she will only be counted as one person in the total number and in that particular category. For example if someone used one emergency shelter then went to another emergency shelter, it will only be counted as one person in the ES category.

Household Composition (HMIS)

2013	Total	Without Children	With Children and Adults	With Only Children	Unknown HH Type
Households	2,909	2,233 (76%)	422 (14%)	198 (7%)	56 (2%)
Persons	3,844*	2,248 (58%)	1,340 (35%)	199 (5%)	57 (2%)

Table 10: Homeless Persons Household Composition 2013

^{*}Does not include unsheltered clients, which is why total is different in Table 9.

2014	Total	Without Children	With Children and Adults	With Only Children	Unknown HH Type
Households	3,393	2,492 (74%)	481 (14%)	274 (8%)	146 (4%)
Persons	4,448	2,510 (56%)	1,481 (34%)	277 (6%)	180 (4%)

Table 11: Homeless Persons Household Composition 2014

Household composition has not changed in percent, but it has changed the number of people experiencing homelessness as recorded in our HMIS system:

- This increase in HMIS figures is due to better data collection and increased participation of family shelters in HMIS.
- The overall number of persons in families experiencing homelessness has decreased.
- 78 more unaccompanied youth experienced homelessness
- More single adults experienced homelessness.

A majority of homeless households are adult-only (74%). When the unit of measure changes from household to person, it remains a majority but a smaller one (56%) as families have more people in them to weigh the percentage.

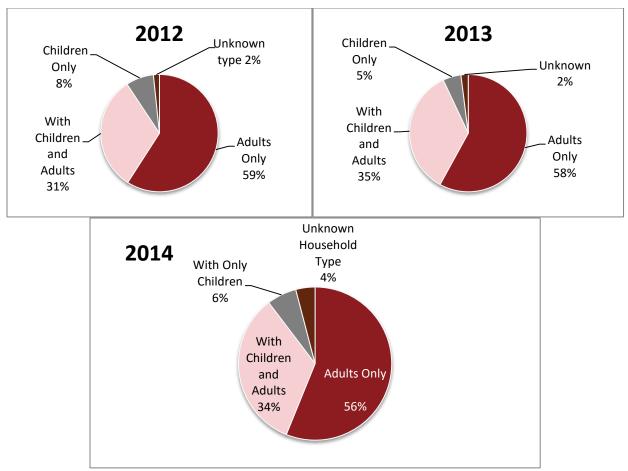


Figure 9: Homeless Persons by Household Type 2012, 2013, 2014

Gender for Homeless Adults

	Total	%	Without Children	%	With Children and Adults	%
Male	1,785	58%	1,694	68%	89	16%
Female	1,276	42%	810	32%	454	84%
Transgendered	5	0.16%	5	0.2%	0	0%
Don't Know/Refused	1	0.03%	1	0.04%	0	0%
Subtotal	3,067		2,510		543	

Table 12: Homeless Adults- Gender

Females were likely to be under counted because there are a significant number of beds that serve only women and/or female heads of households, such as domestic violence programs that do not report into HMIS. The majority of homeless individual adults are males and the majority of homeless families are female heads of household.

Age

1,024 children under the age of 18 were homeless last year, comprising 26.6% of the homeless population. 34% of the homeless children were young children who were less than 5 years old. The numbers of homeless adults aged 55 or above dramatically drop off, especially those aged 62 and older. This may be due to becoming eligible for social security benefits, senior and subsidized housing, or the increased likelihood of death on streets. HUD and CoC now define homeless youth as being up to the age of 24. HUD defines homeless youth ages 13-17 as households with only children. The number of homeless youth (18-24) totaled 507, or a 6% decrease in the total proportion of homeless population from last year though the number of those experiencing homelessness, in the aggregate, increased.

	Total	Without Children	With Children & Adults	With Children Only	Unknown
Under 5	424	0	413	10	1
5 – 12	401	0	382	16	3
13 – 17	386	0	136	250	0
18 – 24	507	338	164	0	5
25 – 34	723	507	211	0	5
35 – 44	642	514	126	0	2
45 – 54	770	729	39	0	2
55 – 61	300	296	4	0	
62+	126	126	0	0	
Don't		<u> </u>			
Know/Missing	170	0	7	1	162
Total	4,448	2,510	1,482	277	180

Table 13: Homeless Population- Age by Household Types

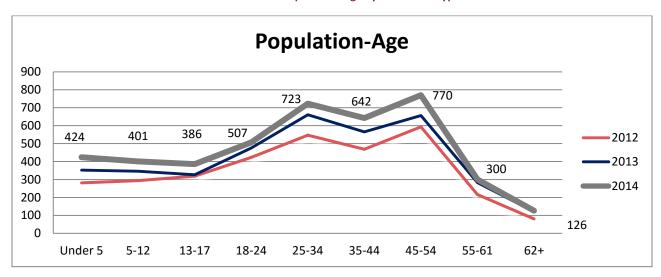


Figure 10: Homeless Population- Age (2012-2013 comparison)

Single adults or households with two adults were evenly distributed between 18-54, slightly leaning towards the 45-54 age group with a fair drop off after the age of 54. However, families with children were most likely to be young single mothers aged between 18-34, with children under 12.

Race

The racial composition of those experiencing homelessness differs significantly from both the population of Erie County residents and those residents experiencing poverty. Notably, African Americans are overrepresented, being 50% of the homeless population, 33% of the population in poverty, and 13.9% of the general population. This is worth considering when making broader policies for the region at large as different racial groups experience very different levels of affluence.

	All ⁴	In Poverty ⁵	Homeless ⁶
White	80.7%	50.9%	37.0%
Black or African American	13.9%	33.0%	52.0%
American Indian or Alaskan Native	0.7%	0.9%	1.0%
Asian	2.9%	5.4%	1.0%
Native Hawaiian or Pacific Islander	0.0%	0.0%	0.0%
Other race	1.8%	5.6%	4.0%

Table 14: Overall, Poverty, and Homeless Population Comparison by Race

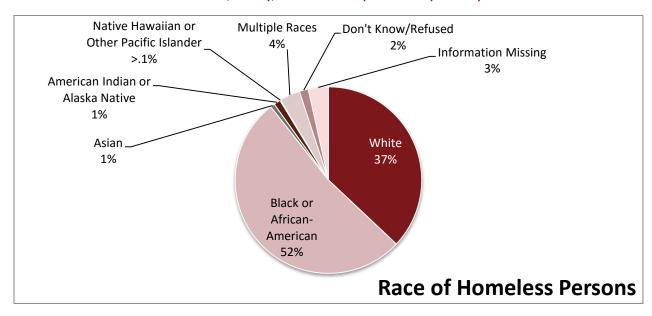


Figure 11: Homeless Population- Race
Note: Hispanic/ Latino is considered an ethnicity, not a race

⁴ American Community Survey Five-Year Estimates, 2009-2013

⁵ American Community Survey Five-Year Estimates, 2009-2013

⁶ Buffalo Area Service Network Data, 10/1/2013-10/1/2014

Ethnicity

Of those in Erie County who live below the poverty line, 11.9% are Hispanic. This approximately matches the ethnic composition of the homeless population. Hispanics are over-represented in the homeless population compared to the general population of Erie County, whose ethnic background is 4.9% Hispanic.⁷

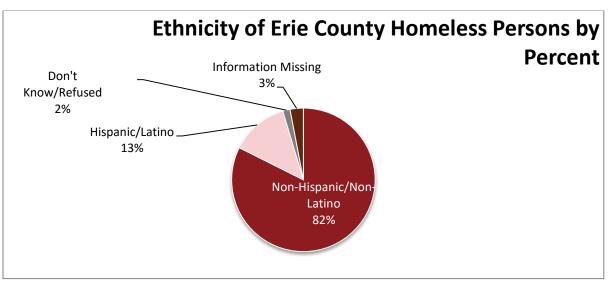


Figure 12: Homeless Population- Ethnicity

Prior Living Situation and Reasons of Homelessness

The reasons for homelessness are computed by people who cited those listed below as a cause. If a person experienced multiple episodes of homelessness with different causes, they would count twice. If all episodes of homelessness had the same cause, it would count in the category once.

Reason of Homelessness	Count	%
Family Issues: Domestic Violence /Conflict with Legal Guardian or Parent/Divorce or Separation/ Death of Family Member/Emancipation/Neglect	290	8%
Household disputes (not DV)	488	14%
Doubled Up	145	4%
Health: Mental Health/ Medical Condition/Substance Abuse	582	17%
Economic Reasons: Loss of Job or income/ loss of public assistance/ loss of transportation/ no affordable housing/unemployment/	414	12%
Eviction or Other Housing-Specific Problems Eviction, foreclosure, problems with landlord	764	22%
Habitability Problems Utility arrears, substandard housing, fire or disaster, health and safety violations	213	6%
Other: Criminal activity, "other", release from institution, relocation from outside WNY	580	17%

Table 15: Homeless Population- Reason for Homelessness

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⁷ American Community Survey 5 year estimates 2009-2013

The chart below details the prior living situations of people seeking assistance in HUD-funded facilities. It it worth noting that the prior living situation often means the circumstances of the night immediately preceding the shelter stay. For insatnce, if a client was staying with their sister as a result of an eviction, it would be recorded as "Staying with family or friend." It is common for people in doubled-up situations to need to leave as a result of clauses in leases preventing over-occupancy of dwellings. In addition, it's not uncommon for clients to transfer between shelters during an episode of homelessness. Thus, this chart glosses over some of the complexities of individual homelessness situations, but also reveals the way that social networks are used to cope with homelessness.

Prior Living Situation	2013	Percentage	2014	Percent
Stay with family or friend	903	31%	889	29%
Emergency Shelter	626	21%	752	24%
Rental by Client	488	17%	489	16%
Place not meant for habitation	354	11%	454	15%
Institutions	281	10%	311	10%
Other*	304	10%	211	7%

Table 16: Homeless Population-Prior Living Situation

Disabling Conditions

Overall, 52% of homeless persons do not have a disability and 43% have one or more disabling conditions (5% data errors/missing). The most common disability types were mental illness (29%) and substance abuse (30%).

Disability Types	Counts	Percentage
Mental Illness	1,264	29%
Substance Abuse	1,325	30%
Chronic Health Condition	100	2%
HIV/AIDS and Related Diseases	13	.002%
Developmental Disability	253	6%
Physical Disability	581	13%

Table 17: Homeless Population-Disability Types

Zip Code of Last Permanent Address

The zip code of their last permanent address refers to the last address where the client lived for more than 90 days. To use the previous example of a client who was evicted and then stayed with their sister, this would be the zip code of their former apartment, not their sister's domicile. Maps reflecting the

^{*}Other includes: owned by client, permanent housing, transitional housing, don't know, refused and missing data.

homeless count based on Zip Codes can be found in Appendix Four-Map 1 and Map 2. Full tables elaborating on where clients resided in the aggregate categories can be found in Appendix Five.

There are total 4,344 valid answers on this question. 92% are from New York State.

State	Total persons	Percent of Reported
New York	4,015	92%
Outside New York	327	9.17%

Table 18: Homeless Population-State Residency Based on Zip Code of Last Permanent Address

Of all clients who reported residing in New York State, 90% were from Erie County. The chart below shows all clients with origins in the Continuum of Care (after the merger on April 1, 2015).

County	Total persons	Percent
Erie	3,626	90%
Niagara	138	3%
Wyoming	15	0.4%
Genesee	16	0.4%
Orleans	5	0.1%
Other	215	5%

Table 19: Homeless Population- County Residency Based on Zip Code of Last Permanent Address

Of all Clients who reported residing in Erie County, 86% were from the City of Buffalo.

City	Total persons	Percent
Buffalo	3,194	88%
Cheektowaga	88	2%
Amherst	79	2%
Lackawanna	70	2%
Tonawanda	51	1%
Rest of Erie County	149	4%

Table 20: Homeless Population-Town Residency Based on Zip Code of Last Permanent address

These were the 15 most frequent zip codes in Buffalo

Zip Code of Last Permanent Address (976)					
Zip Code	Total	Percent of reported			
14215	541	17%			
14211	424	13%			
14203	362	11%			
14213	204	6%			
14212	194	6%			
14208	145	5%			
14207	142	4%			
14206	131	4%			
14214	126	4%			
14201	125	4%			
14202	119	4%			
14209	111	3%			
14220	98	3%			
14216	97	3%			
14209	96	3%			

Table 21: Homeless Population- Most Frequent Zip Code of Last Permanent Address

Education

There are 4,460 valid answers in HMIS for adults who answered their highest education level. The educational attainment of homeless persons is similar to the educational attainment of the part of Erie County's general population living in poverty (see Page 15). With that said, the less educated are overrepresented, especially those who did not graduate high school. There is a slightly higher risk of becoming homeless for those who finished less schooling.

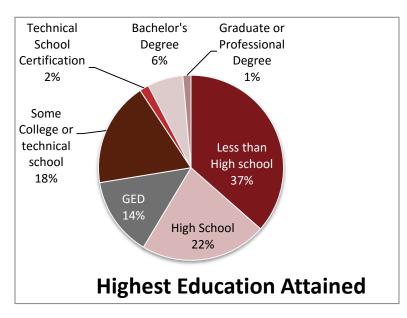


Figure 13: Homeless Population- Adult's Highest Education Attained

3.2 Emergency Shelter

	2012	2013			2014
	Persons	Persons	Households	Persons	Households
Total Client served in HMIS	2,316	2,481	1,947	2,839	2,367
Adult Only HH	1,331	1,490	1,477	1,572	1,557
With children and adult HH	720	744	232	880	279
Children only HH	235	189	188	242	242
Unknown Type	30	58	50	145	134
Total Estimated Clients Served	4,558	4,710	3,462	4,996	3,540
Estimated Adult Only HH	2,686	2,771	2,749	2,819	2,790
Estimated with children and adult HH	1,637	1,750	525	1,602	508
Estimated children only HH	235	189	188	242	242

Table 22: ES- Total Clients Served

<u>Emergency Shelter (ES)</u> – Emergency shelter is housing that homeless persons can access immediately and reside in for up to 30 days. However, it is possible for clients to stay longer in some cases if a shelter is willing to house them. The primary function is to assist individuals in identifying causes of homelessness, accessing services, and securing the next appropriate level of housing. Code Blue and Department of Social Service Hotel placements are included in this category.

All demographic data below is based on the shelters who participate in HMIS. The percent of providers who participate in HMIS from emergency shelters is lower than other categories of service providers. There are several reasons for this. Non-HUD funding sources are more common for emergency shelters than other types of providers and smaller operations are more common as well. It is unfortunate that the data coverage is less because the homeless residing in emergency shelters are one of the most important populations to gather data from to design better service delivery. Greater collaboration among emergency shelter providers is needed in the future.

Gender of Adults in ES

Gender is disproportionately represented among household types in Emergency Shelters. The majority of adult individuals are male while the majority of adults in families are female. Specifically the head of households are disproportionately female. This chart relies upon self-report; transgendered clients would thus need to identify themselves as such (as opposed to saying they are male or female).

	Total	Without Children	%	With Children and Adults	%
Male	1,230	1,168	74%	62	19%
Female	672	400	25%	267	81%
Transgendered	3	3	0.2%	0	0%
Subtotal	1,906	1,572		329	

Table 23: ES- Adult Gender Distribution

<u>Age</u>

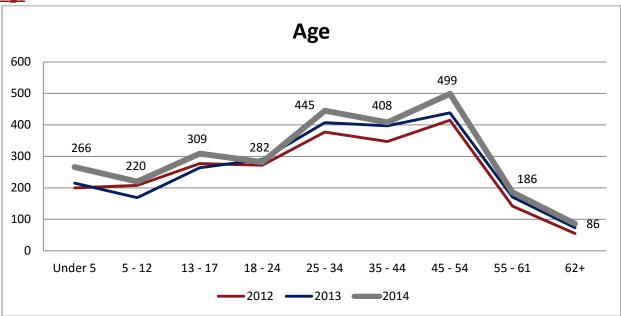


Figure 14: ES- Age Distribution comparison for 2012, 2013, and 2014

The age distribution of clients in Emergency shelters has not changed much since 2012. This could be a result of the relatively brief time frame (three years), which would not really show large structural changes in the homeless population until later. The height of the line reflects increasing numbers of clients in HMIS-participating shelters.

Race

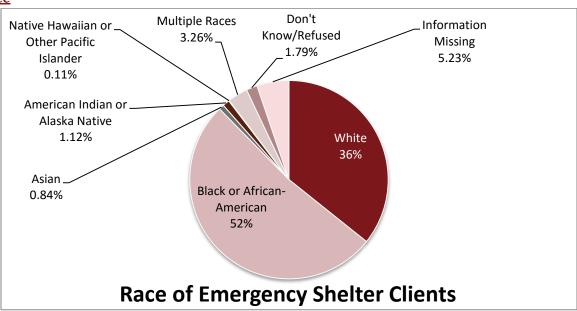


Figure 15: ES-Race

Ethnicity

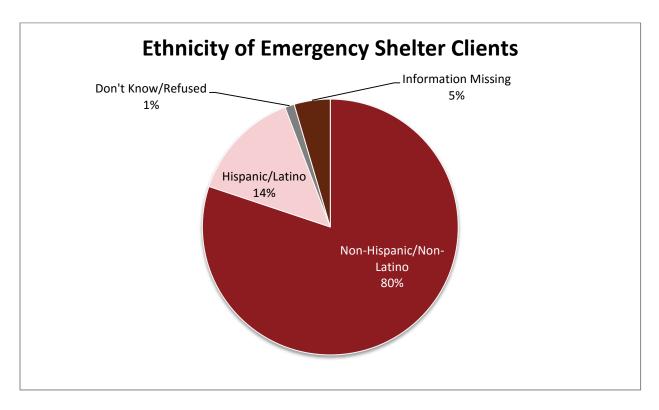


Figure 16: ES-Ethnicity

Disabilities

57% of the clients who stayed in emergency shelters do not have a disability and 37% have at least one long-term disability. For those who have a disability, 52% have two or more conditions. Of those who experienced a disability, 64% experienced mental illness. Percentages in the chart below reflect percent of total clients.

Disability Type	Count	Percentage
Mental Illness	673	24%
Substance Abuse	593	21%
Chronic Health Condition	46	2%
HIV/AIDS and Related Diseases	7	.0027%
Developmental Disability	150	5%
Physical Disability	354	12%
Total clients who have at least one disability	1,056	

Table 24: ES- Disability Types

Last Prior living situations

Prior Living Situation	2013	2014	2014 Percentage
Double up	818	712	25%
Rental by Client	322	305	16%
Institutions	241	256	12%
A different Emergency Shelter	232	305	16%
Place not meant for habitation	118	161	6%
Other	232	120	4%

Table 25: ES-Last Prior Living Situation

Length of Stay

The majority of clients who stayed in Emergency Shelters remained for less than 30 days (71%). The average length of stay (LOS) for persons who left the shelter is 24 days, and the median LOS is only 11 days. CoC is working towards shorter shelter stays with the goal that clients would be placed into permanent housing as soon as possible. Children-only households tend to stay in shelters for a very short period of time, while adults and adults with children tend to stay around 30 days. It is worth noting that the average length of stay by household type did not change from 2013, but overall lengths of stay did change. This reflects a different distribution of single adults versus families, an increase in homeless youth, and the corresponding lengths of stay.

	<30 days	30-60 Days	61-180 days	181-365 days	Over 1 year	Average
Adults Only	72%	16%	10%	1.0%	0.19%	26
Children Only	98%	2%	0%	0.41%	0%	7
Families	56%	27%	17%	0%	0%	32
Unknown	95%	3%	1%	0%	0%	5

Table 26: ES- Length of Stay

Clients who left the program at the end of the report period					
	Average	Median			
2012	36	19			
2013	29	13			
2014	24	11			

Table 27: ES-Length of Stay 2012, 2013, 2014

This chart demonstrates that the continuum has been successful in its efforts to abbreviate clients' stays in homelessness. The average length of stay, and the median, are far below the national average and

have been decreasing consistently over the past three years. This means that the trauma of homelessness has also become, in general, a shorter experience.

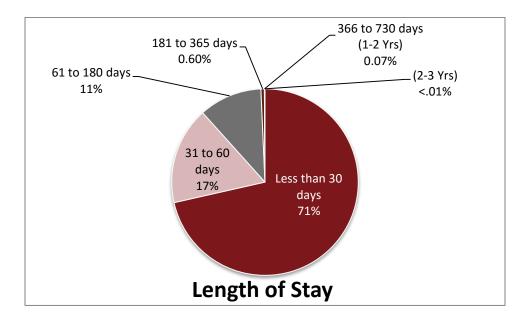


Figure 17: ES- Length of Stay

Destinations

Compared to last year, we have more records reported as "other destinations" (including other, deceased, don't know, refused) and have less identified destinations. Destinations of permanent housing decreased by 1% and temporary destinations decreased by 7%. 39% of the temporary destinations were to transitional housing for homeless persons, which is a positive outcome for clients. Much work needs to be done. Emergency Shelters in this CoC will attempt to have less than 30% of clients leave care and go to unknown destinations. We will also try to place clients into permanent housing and other appropriate destinations.

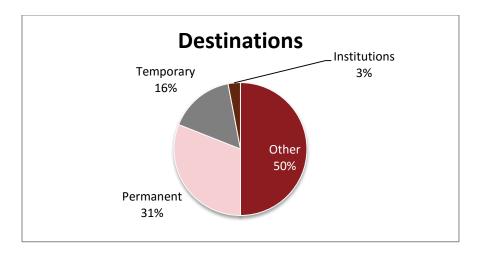


Figure 18: ES-Destinations

Income or Non-Cash Benefits

Among adults that reported an income at entry into a shelter 40% (723) had no income, 53% (953) had some sort of income, and 7% of the data was missing or reported as didn't know. It is worth noting that 14% of shelter clients were employed – and still experienced a financial crisis severe enough to land them in homelessness.

Most frequent Income Sources	Count	%
SSI/SSDI	448	28%
Earned Income	226	14%
General Assistance	190	12%
TANF	177	7%

Table 28: ES- Frequent Income Sources

For those adults that reported non-cash benefits at the initial intake, 62% were receiving non-cash benefits and 31% were not, with 7% of the data missing. 60% individuals were receiving food stamps and 52% were receiving Medicaid/Medicare.

3.3 Transitional Housing

	2012	2013		2014	
	Persons	Persons	Households	Persons	Households
Total Clients served in HMIS	642	713	494	539	384
Adult Only	289	362	357	270	268
With Children and Adults	306	326	114	231	85
With Children Only	38	21	21	25	25
Total Estimated Clients Served	768	775	551	602	425
Estimated Adult Only	350	419	413	304	302
Estimated with Children and Adults	380	334	117	273	92
Estimated With Children Only	38	21	21	25	25

Table 29: TH- Total Clients Served

<u>Transitional Housing</u> (TH) – Transitional Housing is a place where homeless persons can live for up to 24 months and receive supportive services that will enable them to move to permanent housing and live more independently. A transitional housing program must include housing placement assistance.

Gender of Adults in Transitional Housing

Overall, the gender of transitional housing participants was fairly evenly distributed: 46% were males and 54% were female. However, if we divide them by Household types, they are very disproportionate. For adults in families, 100% are female head of households. For individuals, 61% were males and 39% were females. There was 1 male and 2 females in unknown household types (missing data).

	Total	%	Adult Only	%	With Children and Adults	%
Male	166	46%	165	61%	0	%
Female	193	54%	104	39%	87	%
Transgendered/Other	1	<1%	0	0%	0	0%
Subtotal	360		270		87	

Table 30: TH- Adult Gender Distribution

Age

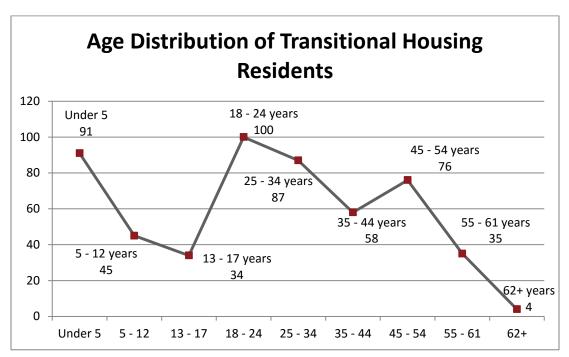


Figure 19: TH-Age Distribution

Age Number of Persons in Households						
	Total	Without Children	With Children and Adults	With Only Children	Unknown HH Type	
Under 5	91	0	91	0	0	
5 - 12	45	0	43	0	2	
13 - 17	34	0	9	25	0	
18 - 24	100	60	38	0	2	
25 - 34	87	53	33	0	1	
35 - 44	58	49	9	0	0	
45 - 54	76	69	7	0	0	
55 - 61	35	35	0	0	0	
62+	4	4	0	0	0	
Don't Know/Refused	9	0	1	0	8	
Information Missing	0	0	0	0	0	
Age Error (Negative Age or 100+)	0	0	0	0	0	
Total	539	270	231	25	13	

Table 31: TH- Age by Household Type

Race

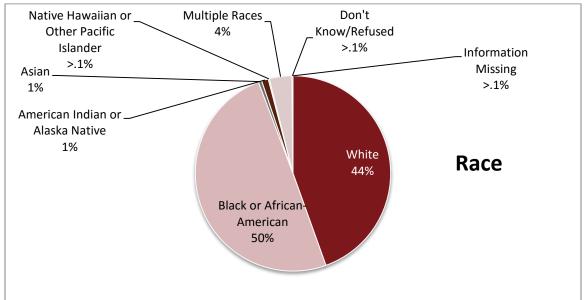


Figure 20: TH-Race

Compared to 2013 data: Black or African American: 49%, White: 42%, Asian: 1%, Native Hawaiian or Pacific Islander: 1%, American Indian or Alaskan Native: 1%, Multiple Races: 5%, Don't know or Missing: 1%.

Ethnicity

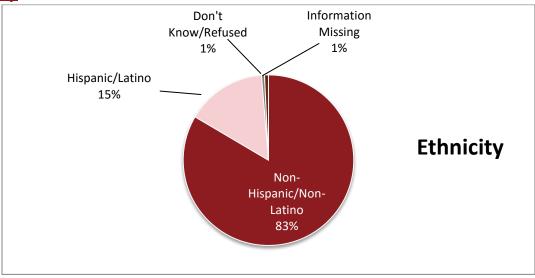


Figure 21: TH-Ethnicity

Contrasted to 2013's ethnicity percentages: Non-Hispanic/Non-Latino 79%, Hispanic/Latino 20%, Don't know or refused: 1%.

Disabilities

55.5% of adult transitional housing participants did not have a disability (compare to 2013, 61%), and 43% have one or more disabiling condition(s) (compare to 2013, 39%). Clients may have one or more disability, which is why the total of the second column is higher than 232.

	Total	Percent of Total Transitional Housing Clients
Mental Illness	171	31.7%
Alcohol Abuse	99	18.4%
Drug Abuse	113	21%
Chronic Health Condition	10	1.9%
HIV/AIDS and Related Diseases	0	0.0%
Developmental Disability	38	7.1%
Physical Disability	37	6.9%
Total Clients who Have at least 1 disability	232	43%

Table 32: TH- Disability Types

Prior Living Situation: As Measured By Household (3 year trend)

2012	Percent	2013	Percent	2014	Percent
12	28.57%	26	37.68%	24	58.54%
1	2.38%	4	5.80%	5	12.20%
0	0.00%	3	4.35%	3	7.32%
0	0.00%	2	2.90%	0	0.00%
1	2.38%	1	1.45%	0	0.00%
22	52.38%	21	30.43%	4	9.76%
2	4.76%	3	4.35%	4	9.76%
1	2.38%	2	2.90%	0	0.00%
1	2.38%	1	1.45%	0	0.00%
2	4.76%	6	8.70%	1	2.44%
	12 1 0 0 1 22 2 1	12 28.57% 1 2.38% 0 0.00% 0 0.00% 1 2.38% 22 52.38% 2 4.76% 1 2.38% 1 2.38%	12 28.57% 26 1 2.38% 4 0 0.00% 3 0 0.00% 2 1 2.38% 1 22 52.38% 21 2 4.76% 3 1 2.38% 2 1 2.38% 1	12 28.57% 26 37.68% 1 2.38% 4 5.80% 0 0.00% 3 4.35% 0 0.00% 2 2.90% 1 2.38% 1 1.45% 22 52.38% 21 30.43% 2 4.76% 3 4.35% 1 2.38% 2 2.90% 1 2.38% 1 1.45%	12 28.57% 26 37.68% 24 1 2.38% 4 5.80% 5 0 0.00% 3 4.35% 3 0 0.00% 2 2.90% 0 1 2.38% 1 1.45% 0 22 52.38% 21 30.43% 4 2 4.76% 3 4.35% 4 1 2.38% 2 2.90% 0 1 2.38% 1 1.45% 0

Table 33: TH- Last Prior Living Situation by Household (3 Year Trends)

The above tables 33, shows the respective percentages coming from various types of prior residences by date of program entry as measured in households. 2012 means that a client entered a transitional housing project client entered between 10/1/2011-9/30/2012, 2013 means that a client entered between 10/1/2012-9/30/2013, and 2014 means that a client entered between 10/1/2013 and 9/30/2014. This table demonstrates that the Continuum of Care's efforts to ensure clients are coming to transitional housing through the homelessness system are working. There is a clear trend towards an increasing proportion of clients entering transitional housing from emergency shelters or street. This is likely to continue increasing as transitional housing agencies use the Coordinated Entry process.

Length of Stay

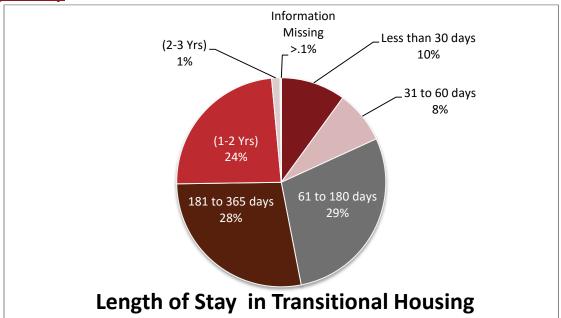


Figure 22: TH-Length of Stay for All Clients

	Clients Who Left				
LOS Type	Median	Average			
2012	173 days (5 months)	267 days (8 months)			
2013 186 days (6 months)		238 days (8 months)			
2014	191 days (8 months)	242 days (8 months)			

Table 34: TH- Average Length of Stay for Leavers 2012, 2013, 2014

	Clients Who Stayed			
LOS Type	Median	Average		
2012	152 days (5months)	230 days (7 months)		
2013	131.5 days (4 months)	205 days (7 months)		
2014	223 days (7 months)	254 days (8months)		

Table 35: TH- Average Length of Stay for Stayers 2012, 2013. 2014

The number of days spent in transitional housing increased by approximately half a week for those who left within the report year. This increase may not be very significant since transitional housing programs are meant to have lengths of stay that are months long in order to deal with the severe and entrenched problems the clients are experiencing.

Destinations

The HUD benchmark for exits to permanent housing has now increased to 80%. Permanent destinations includes owned by client (with or without subsidy), rental by client (with or without subsidy), PSH for homeless persons, and living with family or friends in a permanent way. Temporary destinations include emergency shelters, transitional housing for homeless persons, staying with friends of family temporarily, safe havens, place not meant for human habitation, or a hotel/motel. Institutional destinations include foster care, psychiatric facilities, substance abuse or detoxification facility, hospital, jail, or prison. Other includes deceased, don't know/refused, information missing, and all circumstances not listed above.

2012	2013	2014
57%	66%	66%

Table 36: Percentage of Exit to Permanent Housing Comparison

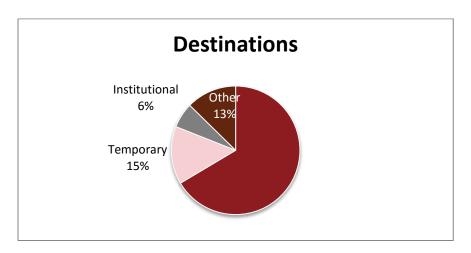


Figure 23: TH-Destinations

Income or Non-Cash Benefits

Among adults, 21% (76) had no income when they entered the program and 79% (283) had some sort of income.

Most Frequent Income Sources	Count	Percentage
General Assistance	106	30%
Earned Income	91	25%
SSI/SSDI	78	22%
TANF	74	21%
Other	40	11%

Table 37: TH- Frequent Income Sources

For those adults that reported non-cash benefits at entry, 75% were receiving non-cash benefits and 24% were not, with 1% missing data. 46% of individuals were receiving food stamps and 39% were receiving Medicaid/Medicare.

3.4 Permanent Housing Interventions

RAPID REHOUSING

Rapid re-housing refers to a permanent housing intervention for those who experience homelessness that takes a family or individual out of shelter and supports them in their own apartment while providing necessary supportive services. The amount of money that the housing voucher covers is designed to gradually decrease as the recipient gets back on their feet. For instance, a family may receive a fully subsidized apartment for the first month, pay 30% of their rent the next month, 45% of their rent the month after that, and so forth.

Rapid re-housing is a relatively new part of the housing inventory in Erie County, and the program ran from 7/16/2013 to 11/16/2014 for city of Buffalo and town of Tonawanda funded ESG programs and are ongoing for Erie County ESG funded programs. Vouchers were designed to be used for ten months in the city-funded ESG due to funding limitations for programs funded by city and town. Erie County's ESG funded programs permitted a funding period of up to two years. For the purposes of this report, the operating duration of the city of Buffalo is used. The below statistics vary from the rest of this report, in that instead of following the federal fiscal year, it is reporting on all clients who received assistance during the city of Buffalo ESG program's duration.

The rapid rehousing programs were funded through a combination of Emergency Solution Grants allocated from the City of Buffalo, City of Tonawanda, and the County of Erie. These were known as BRAP – Buffalo Rapid rehousing Program. Agencies who administered this program include Catholic Charities, Crisis Services, and the Lt. Colonel Matt Urban Human Services Center. All providers participated in HMIS. Rapid rehousing clients who qualified for services during the 2014 federal fiscal year were included in the count of aggregate homeless. However, most of these clients were duplicate recipients of other services, as they were recruited from shelters first. The Supportive Services for Veterans program also offered rapid rehousing services in two programs; eligibility requirements were different and some clients received homeless prevention services. This will be discussed in the Veteran's section.

Total Clients Served					
Persons Households					
Total	656	310			
Adult Only	152	145			
With Children and Adults	493	155			

Table 38: RRH- Total Clients Served

Length of Stay

Two-thirds of clients had left by the end of the city program year. Of these clients, the average length of stay was 166 days⁸ (approximately five and a half months) and the median length of stay was 133 (approximately four and a half months) days. The city-funded program's intervention framework was intended to be 10 months maximum; the county-funded intervention was intended to have a maximum of two years, but few actually stayed that long. Nearly half (49%) exited by the time six months had elapsed; 76% of all clients exited by the time the first year was over.

	Total	Percent
Less than 30 days	58	8.84%
31 to 60 days	87	13.26%
61 to 180 days	187	28.51%
181 to 365 days	168	25.61%
366 to 730 days (1-2 Yrs)	156	23.78%
Total	656	100.00%

Table 39: RRH- Length of Stay

Age and Gender of Clients

The age and gender break down of rapid-rehousing clients is below. We did not include child-only households due to low numbers. There was a rapid rehousing program through Compass House; but it was underutilized. We are currently partnering with Compass House and the University at Buffalo to determine why this is the case. Providers suspect that the circumstances of unaccompanied youth homelessness may make meeting HUD eligibility requirements particularly taxing. We're working to determine if this is in fact the case, and what sort of permanent housing interventions would best serve members of that population who needed it.

The gender breakdown of adults in households with both children and adults is not surprising, given that most families that experience homelessness are headed by single females.

Adult members of households	Total	Without Children	With Children and Adults
Male	95	66	29
Female	246	85	159
Transgendered	1	1	0
Other	0	0	0
Don't Know/Refused/Information Missing	0	0	0
Subtotal	342	152	188

Table 40: RRH- Adult Gender Distribution

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⁸ BRAP programs were 172 days, and town/county ESG programs were 152 days of those who had left.

	Total	Without Children	With Children and Adults
Under 5	136	0	134
5 - 12	125	0	124
13 - 17	49	0	46
18 - 24	93	40	53
25 - 34	125	36	87
35 - 44	53	20	33
45 - 54	51	37	14
55 - 61	15	14	1
62+	5	5	0
Don't Know/Refused	2	0	1
Information Missing	2	0	0
Age Error (Negative Age or 100+)	0	0	0
Total	656	152	493

Table 41: RRH- Age Distribution by Household Type

Race and Ethnicity of Clients

The breakdown of race and ethnicity served by the rapid rehousing programs was representative of the homeless population at large: over half being African-American, with a slightly higher percentage of Hispanic/Latino clients served than are represented in the overall homeless population.

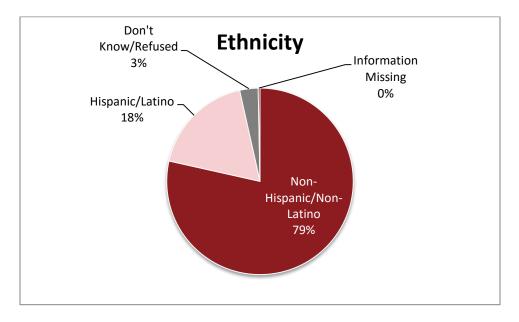


Figure 24: RRH- Ethnicity

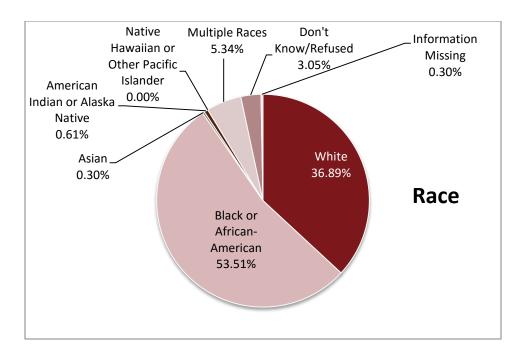


Figure 25: RRH- Race

Domestic Violence Experiences

Unlike the general homeless population, which is served in part by shelters that do not report to HMIS, Rapid Re-housing projects were entirely in HMIS. This means that we have a better sense of how many rapid rehousing clients experienced domestic violence, as domestic violence experiences was not a criteria for a client to be systemically excluded from HMIS. With that said, we found that 37% of clients reported experiencing domestic violence. Over two-thirds of those clients experienced it within the last three months prior to entry into homelessness. National statistics on homelessness and domestic violence vary, but for the general population, the CDC estimates that 35.6% of women and 28.5% of men will experience intimate partner violence in their lifetime. This highlights the need for housing programming to be sensitive to the needs of those who have experienced domestic violence, as the CDC notes that the consequences of domestic violence can be both immediate and long-lasting.

⁹ One of Erie County's programs targeted families that had experienced domestic violence.

Prevalence and Characteristics of Sexual Violence, Stalking, and Intimate Partner Violence Victimization— National Intimate Partner and Sexual Violence Survey, United States, 2011 http://www.cdc.gov/violenceprevention/pdf/nisvs_executive_summary-a.pdf

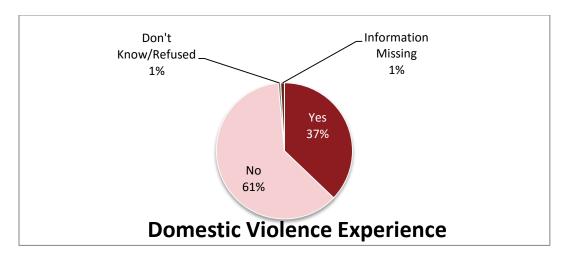


Figure 26: RRH- Those who Experienced Domestic Violence

	Total	Without Children	With Children and Adults
Less than 3 Months	61.42%	64.71%	60.00%
3 to 6 Months Ago	7.09%	7.84%	6.67%
6 to 12 Months Ago	8.66%	9.80%	8.00%
More than a year Ago	14.17%	9.80%	17.33%
Don't Know/Refused	4.72%	3.92%	4.00%
Information Missing	3.94%	3.92%	4.00%
TOTAL	100.00%	100.00%	100.00%

Table 42: RRH- Time when Domestic violence occurred

Disability

Nearly three-quarters of clients (74.5%) reported that they did not have any disabling conditions. This is significantly higher than the emergency shelter and general homeless population, each which reported 52% of clients who did not experience a disability. As a disability can be a requirement for some transitional housing programs, it is possible that rapid re-housing programs were taking clients that did not otherwise meet disability eligibility requirements for other interventions. This may change with coordinated entry, as some disabled clients may become prioritized for rapid rehousing as national research suggests that disabled clients can thrive in this type of intervention, and transitional housing beds are often at capacity.

	All Persons	Adults	Children	Unknown
Not Disabled	489	202	285	2
Disabled	146	121	25	0
Missing	21	19	0	2
TOTAL:	656	342	310	4

Table 43: RRH- Disabilities

All Clients	All Persons	Percent of total disabled clients	Percent of Total Clients
Mental Illness	65	44.52%	9.91%
Alcohol Abuse	22	15.07%	3.35%
Drug Abuse	29	19.86%	4.42%
Chronic Health Condition	15	10.27%	2.29%
HIV/AIDS and Related Diseases	0	0.00%	0.00%
Developmental Disability	31	21.23%	4.73%
Physical Disability	69	47.26%	10.52%

Table 44: RRH- Disability Types for All Clients

Adults	Adults	Percent of total disabled adults	Percent of Total adults
Mental Illness	59	48.76%	17.25%
Alcohol Abuse	22	18.18%	6.43%
Drug Abuse	29	23.97%	8.48%
Chronic Health Condition	13	10.74%	3.80%
HIV/AIDS and Related Diseases	0	0.00%	0.00%
Developmental Disability	13	10.74%	3.80%
Physical Disability	68	56.20%	19.88%

Table 45: RRH- Disability Types for Adults

Children	Children	Percent of total disabled children	Percent of Total Children
Mental Illness	6	24.00%	2.11%
Alcohol Abuse	0	0.00%	0.00%
Drug Abuse	0	0.00%	0.00%
Chronic Health Condition	2	8.00%	0.70%
HIV/AIDS and Related Diseases	0	0.00%	0.00%
Developmental Disability	18	72.00%	6.32%
Physical Disability	1	4.00%	0.35%

Table 46: RRH- Disability Types for Children

More time is needed to determine the success of the program as a housing intervention. As it concluded in December of 2014, not enough time has elapsed to see how many people re-entered homelessness. National research is also forthcoming.

PERMANENT SUPPORTIVE HOUSING

	2012		2013		2014
	Persons	Persons	Households	Persons	Households
Total	876	895	818	829	784
Adult Only	748	791	779	786	779
 With Children and Adults 	124	104	39	41	14
Total Estimated Clients Served	1,100	1,094	984	1,167	1,046
 Estimated Adult Only 	884	963	936	1,014	1,004
 Estimated with Children and 	216	131	48	151	51
Adults					

Table 47: PSH- Total Clients Served

<u>Permanent Supportive Housing (PSH)</u> - Permanent supportive housing is a type of housing in which homeless persons with a disability may live without a limit on the length of stay. Supportive services are provided and rent cannot exceed 30% of a person's monthly income. Programs may be a single site, scattered sites, or clustered units and PSH includes rental assistance programs (formerly known as Shelter Plus Care).

This year, the number of individuals and families who stayed in permanent housing programs has slightly decreased. Last year, PSH programs were able to serve more people because more residents from PSH were successfully graduated into the Section 8 program. This year, fewer people being served reflects less turnover in the PSH beds. As predicted, the availability of Section 8 vouchers in the future will be very limited. To be able to successfully transition permanent housing program residents, we need more long term subsidies like Section 8 that prioritize persons who experienced homelessness.

Gender

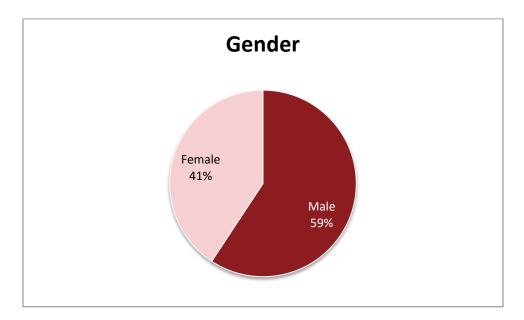


Figure 27: PSH-Gender

Age

	Total	Without Children	With Children and Adults
Under 5	7	0	7
5 - 12	8	0	8
13 - 17	10	0	10
18 - 24	47	42	5
25 - 34	124	120	4
35 - 44	168	166	2
45 - 54	277	272	4
55 - 61	146	145	1
62+	41	41	0
Don't Know/Refused	1	0	0
Information Missing	0	0	0
Total	829	786	41

Table 48: PSH- Age by Household Type

The age of individuals and families who are participating in the permanent housing programs is concentrated between the age of 45-54 and drops quickly after 55.

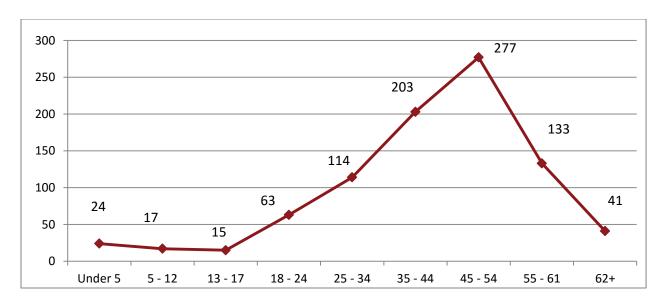


Figure 28: PSH-Age

Race and Ethnicity

The majority of participants are white (52%), while the homeless population majority is African American.

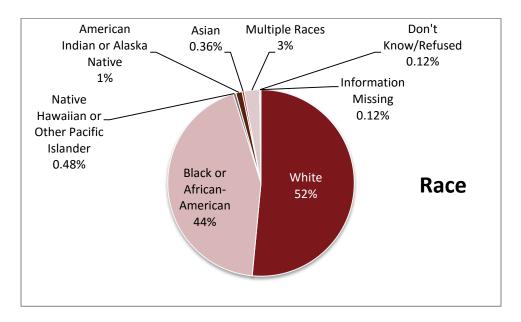


Figure 29: PSH - Race

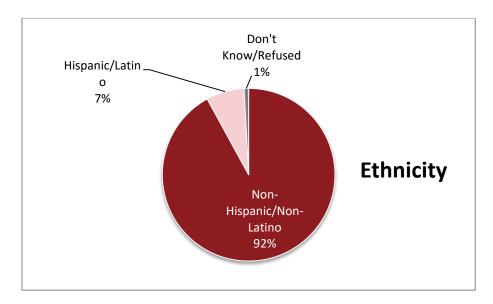


Figure 30: PSH- Ethnicity

Notably, there is no change in the ethnic composition from 2013 to 2014. This likely reflects very high retention rates – the metric is measuring most of the same people twice.

Disabling Condition

To be eligible for permanent supportive housing, the participant must have a diagnosed disability. The 4% who do not report disabilities are the children of a household head who is the target of the services. 793 participants have a disability. 47% of the participants have three or more disabilities. 82% of the participants have mental illness and 49% have substance abuse issues.

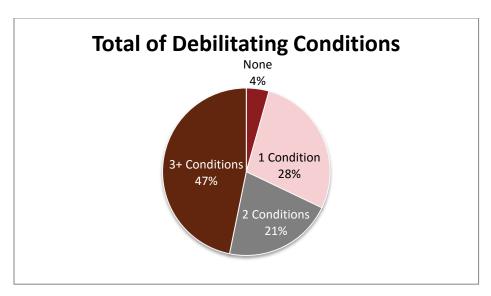


Figure 31: PSH- Disabling Condition

Type of Disability	Total Number of People Experiencing Condition	Percent of total PSH Participants Experiencing Condition
Mental Illness	705	85%
Alcohol Abuse	321	39%
Drug Abuse	338	41%
Chronic Health Condition	27	3.3%
HIV/AIDS and Related Diseases	2	0.2%
Developmental Disability	25	3%
Physical Disability	144	17%

Table 49: PSH- Disability Type

Note: Since it is possible for a client to experience multiple conditions simultaneously, the total percentage exceeds 100%.

Prior Living Situation

Most PSH participants (72%) were either in emergency shelters or unsheltered before coming into permanent supportive housing. Places not meant for human habitation include the streets, abandoned houses/buildings, cars, under bridges, etc. This is a requirement for entry into PSH.

Prior Living Situation	Count	Percent
Emergency Shelter	503	61%
Transitional housing for homeless persons	97	12%
Place not meant for habitation	106	13%
Institutional Settings	31	3.7%
Hotel/Motel	12	1.4%
Others	55	6.6%

Table 50: PSH- Prior Living Situation

Income or Non-Cash Benefit

95% of the adults who participated in PSH during this report period had cash income. Cash income includes earned income, SSI, SSDI, general assistance, etc.

Most frequent income sources	Total	Percentage
SSI/SSDI	603	73%
General Assistance	229	28%
Earned Income	113	14%
TANF or Equivalent	57	7%
Unemployment Insurance	18	2%
Other Source	67	8%

Table 51: Frequent Income Sources

Of those individuals that receive non-cash benefits 95% received SNAP or food stamps, and 79% received Medicare/Medicaid.

Length of Stay for Clients who Left the Program

145 participants' exited permanent supportive housing during 2014 and 684 remained in PSH. 89% of participants who exited a PSH program during this time period stayed more than six months, exceeding the HUD benchmark of 80% of PSH participants remaining in permanent housing for more than six months. PSH programs have great success in stabilizing participants in housing.

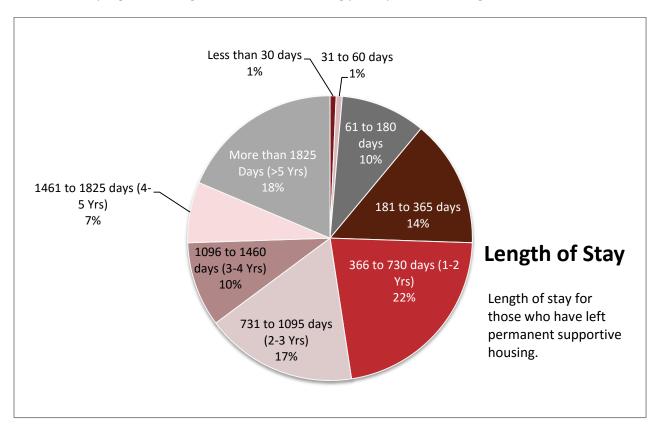
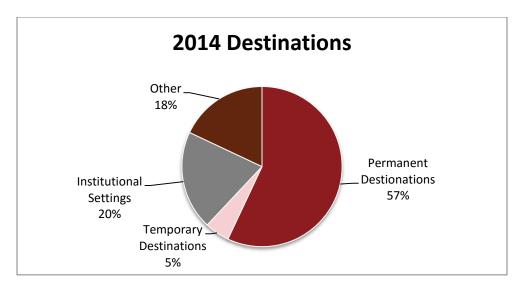


Figure 32: PSH- Length of Stay

Destinations

57% of the clients who exited permanent supportive housing programs left successfully for other permanent housing destinations, a decrease of 14% from 2013, which experienced increase of 13% from 2012. The percentage of "other" destinations increased to 2012 levels of 18%, though it is worth noting that nearly have of the "other" category (11/24) were clients who left the program as they passed away. Temporary destinations (those which entail a return to homelessness) decreased 2%, and institutional settings increased to 20% from 10%. The decrease in permanent destinations may be in part due to a decrease in the availability of Section 8 vouchers from the year before.



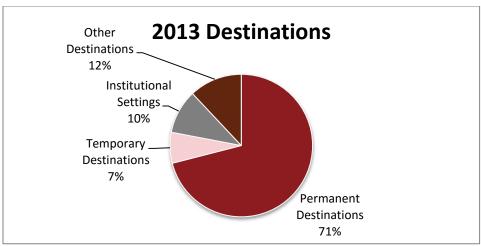


Figure 33: PSH-Destinations

3.5 Chronically Homeless

In 2010, the definition of chronically homeless expanded from only unaccompanied individuals to include homeless families where at least one adult member has met all the other chronically homeless standards. Such standards include:

- must has a disabling condition
- has either been continuously homeless for a year or more
 OR has had at least four (4) episodes of homelessness in the past three (3) years

HUD established a goal to end chronic homelessness by 2017. To do this, HUD encouraged existing

There were 339 people who experienced chronic homelessness during 2014. Of these, 121 achieved some sort of permanent housing and exited homelessness.

permanent supportive housing programs to take the chronically homeless using the housing first model¹¹. We started the conversation about the new strategy in late 2013. In 2014, Buffalo's Continuum of Care started to house chronically homeless in the existing PSH by prioritizing those who are most vulnerable when beds turned over. We are planning to add 80 new beds for the chronically homeless in

late 2014 to 2015. We are expected to see a significant drop in the chronically homeless population in 2015 and we hope to end chronic homelessness in 2016.

There were 339 people who experienced chronic homelessness during 2014. All of these clients were single, unaccompanied adults. Of these, 121 achieved some sort of permanent housing and exited homelessness. This represents an increase from the previous year of approximately 28 more chronically homeless individuals in total, but as 65 were housed in 2013, an increase in 57 clients who were housed. Outreach efforts, and efforts of identification, have improved in the last year. It is not clear if this increase is due to a better understanding of the nature of homelessness, improved targeting and assistance by our region's outreach workers, or an absolute increase in those who could be considered chronically homeless.

With the increase in PSH beds dedicated to serving those experiencing chronic homelessness, there should be a significant decrease in this population in 2015.

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¹¹ Housing First is an approach to ending homelessness that centers on providing people experiencing homelessness with housing as quickly as possible, and then providing other therapeutic services as needed.

Gender

The majority of people in the chronically homeless population are male (80%).

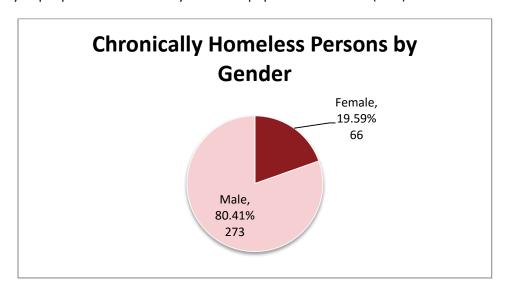


Figure 34: Chronically Homeless- Gender

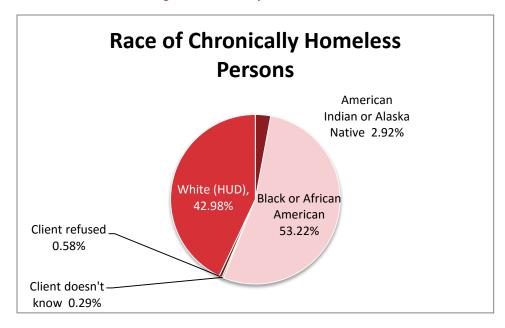


Figure 35: Chronically Homeless-Race

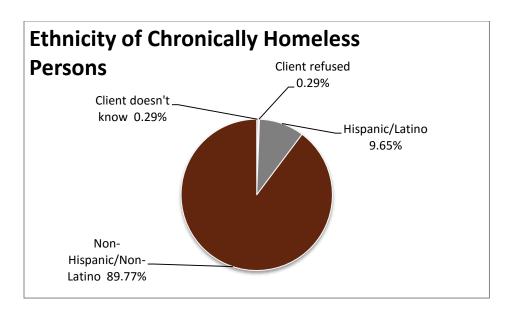


Figure 36: Chronically Homeless- Ethnicity

White people are slightly overrepresented in the chronically homeless population, relative to the general homeless population and under-represented relative to the general population of Erie County. African Americans are overrepresented relative to the general population of Erie County, however they are close to the proportion of African Americans in the homeless population.

Disabilities

A majority (63%) of the chronically homeless have more than one disability condition¹². 97% had mental health problems¹³.

Type of Disability	Percent of Clients Experiencing it
Alcohol Abuse	42.48%
Both Alcohol and Drug Abuse	39.23%
Chronic Health Condition	16.22%
Developmental	19.47%
Drug Abuse	40.41%
Dual Diagnosis	0.29%
HIV/AIDS	9.44%
Mental Health Problem	97.94%
Other	1.47%
Physical	31.27%
Physical/Medical	22.71%
Vision Impaired	0.88%

Table 52: Chronically Homeless- Disabling Conditions

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 $^{^{12}}$ In 2013, 69% of the chronically homeless had more than one disability condition.

¹³ In 2013, 82% of clients had mental health problems.

Age Distribution of Chronically Homeless

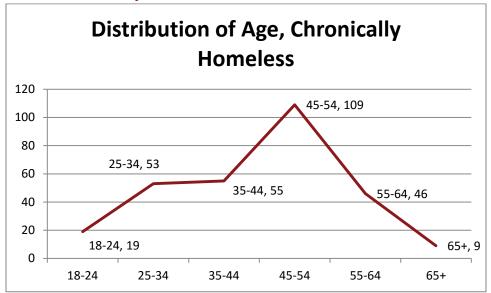


Figure 37: Chronically Homeless-Age Distribution

The age distribution of chronically homeless individuals matches the distribution of those in permanent supportive housing.

Veteran Status

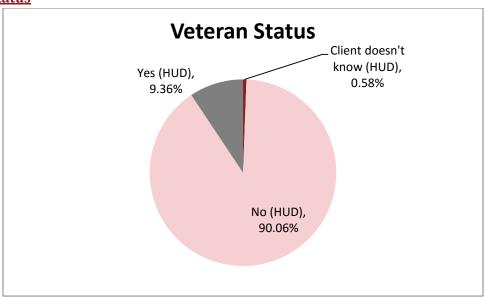


Figure 38: Chronically Homeless-Veteran Status

Ninety percent of the chronically homeless clients in HMIS were not veterans. 32 (9.36% of chronically homeless clients) did report being veterans. This number could be an undercount, as some clients are served by Veteran's affairs that do not ever access services by an HMIS-participating provider.

Education Level

Highest Level of Education	Total
Less than High School Diploma/GED	41.89%
High School Diploma or Equivalent	30.38%
Some College	13.86%
Client doesn't know/ Refused	6.49%
College Degree	5.01%
Graduate/Professional Degree	1.18%
Technical School Certification	0.88%
Some Technical School	0.29%

Table 53: Chronically Homeless- Education Level

Nearly 42% of chronically homeless people never finished high school. With that said, it is worth noting that education levels are all represented in this population.

3.6 Pattern of Homelessness

Unlike other ways of describing homelessness in this report, there are no standardized HUD definitions for "repeated homelessness" and "newly homelessness". Despite this, CoCs use these concepts for planning purposes. In this report we will provide the methods that we believe will best help our planning process and most meaningfully help us understand the issues.

Full coverage of HMIS and correct data are crucial to the accuracy of tracking the patterns of homelessness. However, about half of the emergency shelter beds are not participating in HMIS. This may significantly affect the analysis.

Repeated homelessness in this section includes:

- A person that has been homeless during the prior two years (10/1/2011-9/30/2013) and entered the homeless system again within this report period (10/1/2013-9/30/2014)
- A person that has multiple entries in this report period and between each homeless episode has at least a 30 days' interval.

There are 3,224 unduplicated homeless clients who entered ES, TH or SH this year, and there are 762 clients who fit the definition above¹⁴. **The recidivism rate is 23.6%.** This is unchanged from the previous year's recidivism rate. Of the 762 clients who fit the definition above, 198 (26.0%) also were considered repeat homeless clients in 2013. 67 of these clients meet the HUD definition of "chronically homeless" and are being prioritized for housing accordingly. Repeated homelessness is a consideration for prioritization in the recently-implemented coordinated entry process.

The below chart demonstrates the relative family composition of repeat and one-time homeless. Families are slightly overrepresented in the one-time homeless category, being 34% of the aggregate but nearly 40% of one-time homeless. They are underrepresented in the repeated category, as only 5 people were members of repeatedly recidivating households. This suggests that single people without children may be more likely to return to homelessness. We'll need to continue watching this trend to understand why.

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 $^{^{14}}$ For 2012, we only used the first bullet point as definition, and the rate was 19%. In 2013, if we only considered the first definition, the rate is at 19% as well. The rate drops to 18% in 2014.

Total People in Households	First time Homeless	Repeated Homelessness	Repeats from last year's repeated homelessness
Household with Adults	902	117	5
and children	39.6%	15.4%	3%
Household with only	1,128	564	166
adults	49.6%	74%	88.8%
Household with only	245	81	16
children	10.8%	10.6%	8.2%

Table 54: Comparison of Household Composition for Various Types of Recidivism

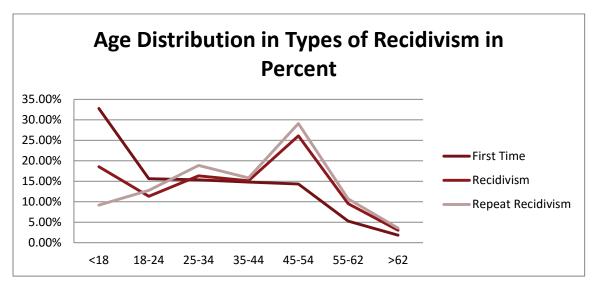
Single adults make up the largest proportion of any homeless repeat-type group, but they are increasingly represented among those who recidivated for the first or second time. There were 117 people in families that recidivated once; 89 of them were members of families with female single parents (76%). Only three families (with five people total¹⁵) experienced repeat recidivism, and all were single female parent families. Households with adult and children have the lowest recidivism rate, about 11.48% for one year rates, and 2.67% for two year rates.

Household Type	First time	% of total family type	Recidivism	% of total family type	Repeated Recidivism	% of Family Type
Adult Only	1,128	66.67%	564	33.33%	166	9.81%
Single Adult	1,117	66.53%	562	33.47%	166	9.89%
Couple With No Children	11	84.62%	2	15.38%		0.00%
Adult and Children	902	88.51%	117	11.48%	5	0.40%
Female Single Parent	687	88.53%	89	11.47%	5	0.64%
Two Parent Family	177	89.39%	21	10.61%		0.00%
Male Single Parent	31	100.00%	0	0.00%		0.00%
Couple With No Children	11	84.62%	2	15.38%		0.00%
Grandparent(s) and Child	5	83.33%	1	16.67%		0.00%
Other Relative	2	100.00%	0	0.00%		0.00%
Non-custodial Caregiver(s)	0	0.00%	6	100.00%		0.00%
Unaccompanied Youth	245	75.15%	81	24.85%	16	4.91%

Table 55: Recidivism Rates among Household Types

Another way to look at the recidivism rates is to compare how many people in a particular family type enter a repeat episode of homelessness. Table 55 is effectively a change in the denominator from the previous chart, which presumed a policy design focused on the nature of the homeless episode. This chart would be more useful to those agencies whose programming focuses on family type. Single adults have the highest recidivism rate with 33.47%.

¹⁵ These households include three single mothers and the children of two mothers who also experienced repeated recidivism. The children of the third mother did not accompany her in all episodes of homelessness.



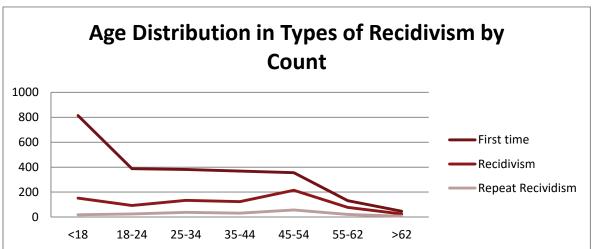


Figure 39: Repeated Homeless-Age Distribution of Households with Only Adults

The above charts show the relative age distribution among the types of recidivism, first in percent and then by raw numbers. There is a spike in the 45-54 age group in both recidivism groups. Whereas for the first time homeless, the largest group represented are children.

Gender in Recidivism						
	One-time Homeless	% of Gender	Recidivism	% of Gender	Repeat Recidivism	% of Gender
Female	1,196	81.6%	270	18.4%	41	2.8%
Male	1,290	70.5%	540	29.5%	156	8.5%
Transgender male to female	2	66.7%	1	33.3%	1	33.3%
Other	9	81.8%	2	18.2%	0	0.0%

Table 56: Recidivism- Gender

Males are more likely to recidivate than females. Males are disproportionately represented in the single adult category for all homeless, which has the highest recidivism rate.

Does the client have a disabling condition?	First-time Homeless	One year Recidivism	Two year recidivism
Missing Data	10.2 %	1.72%	1.02%
No	60.39%	52.52%	40.91%
Yes	29.41%	45.76%	58.08%
Grand Total	100.00%	100.00%	100.00%

Table 57: Recidivism- Disabling Conditions

45.76% of all recidivating adults reported having at least one disability. This is significantly higher than first time homeless clients, of whom only 29.41% report a disability. We see an even higher rate of disability in individuals with repeated episodes of homelessness; for those who recidivated in both 2013 and 2014, the rate is 58%.

Destinations of Homeless Clients

This chart below shows how many clients recidivated. Percentages reflect the number of all people who reported the destination type. For instance, of the 2426 people who reported a destination to permanent housing, 174 (7.2%) came back.

Client Destination When Exit	Client Count	# Returned	Percent
Permanent	2,426	174	7.2%
Client didn't know/Other	3,457	422	12.2%
Emergency Shelter	425	68	16.0%
Institution	255	43	16.9%
Places Not Meant for Habitation	8	4	50.0%
Temporarily with Family/Friends	419	80	19.1%
Transitional Housing	323	62	19.2%
Safe Haven	4	0	0.0%

Table 58: Recidivism- Destinations

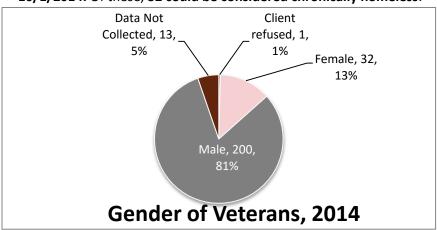
Of those who went to permanent housing, 7.2% returned to homelessness. These 174 clients who returned, only 136 people recorded a permanent housing prior to the return. This suggests that those who return to homelessness experienced housing instability: they did not simply exit to one situation and return to homelessness, but that they exited homelessness to changing circumstances.

3.7 Homeless Veterans

Data regarding the homeless veteran population is limited because the agencies associated with the Veterans Administration (VA) use a database called HOMES (VA Homeless Operation Management Evaluation System) rather than HMIS. Locally, 223 Veteran Households had VASH (Veteran Affairs Supportive Housing Program) vouchers for rent subsidies. In this section we will only present veterans that have been served by HMIS participating homeless providers. HMIS data on veterans shows that, of the 240 veterans¹⁶ entered into the database, 32 were female veterans and 200 were male veterans. The total number of veteran identified, 240, in HMIS is lower than last year at a 7% decrease.

Gender

There were 240 self-reported homeless veterans who received HUD funded services from 10/1/2013-10/1/2014. Of these, 32 could be considered chronically homeless.



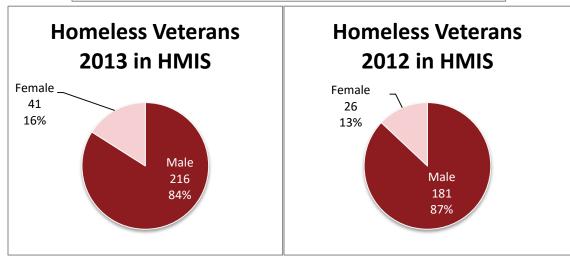


Figure 40: Homeless Veterans-Gender

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¹⁶ 2013 number: 257 veterans

Female veterans are slightly overrepresented in this population, as the general military population includes 9% females¹⁷, whereas 13% of veterans presenting to HMIS-participating facilities were female.

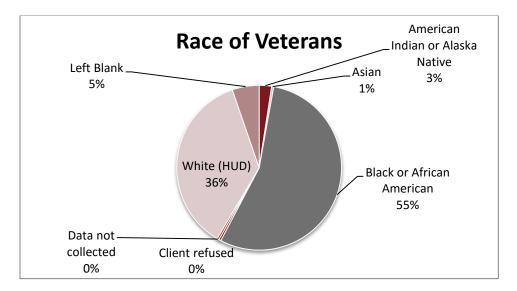


Figure 41: Homeless Veterans-Race

African-Americans are severely overrepresented in the homeless population. While comprising less than 15% of the veteran population, they are 55% of the homeless veteran population in HMIS.¹⁸ African Americans are also overrepresented relative to the homeless population at large.

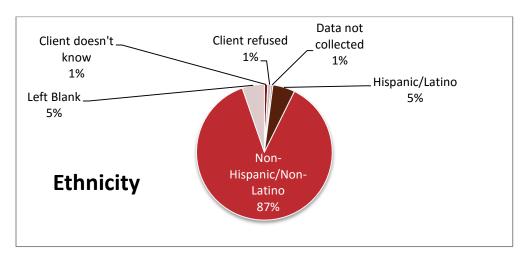


Figure 42: Homeless Veterans- Ethnicity

The percentage of Hispanic and Latino homeless veterans is slightly less than the general population of veterans (5% versus 6%).

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¹⁷ http://www.va.gov/vetdata/docs/Quickfacts/Homepage_slideshow_12_31_14.pdf

¹⁸ http://www.va.gov/vetdata/docs/Quickfacts/Homepage_slideshow_12_31_14.pdf

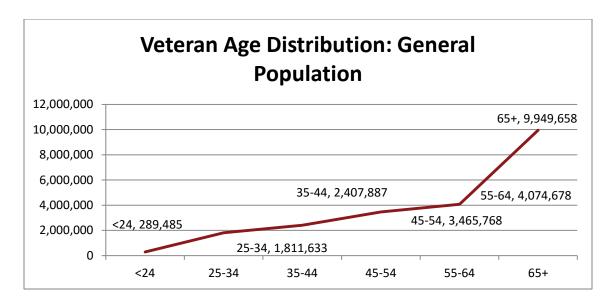


Figure 43: Veteran Age Distribution in Overall Population

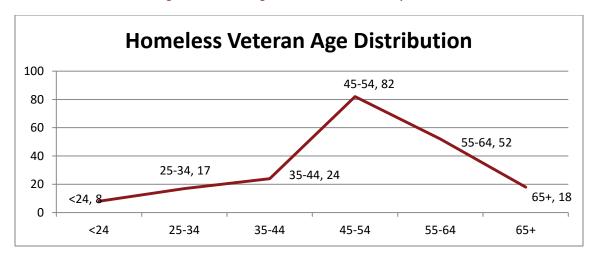


Figure 44: Veteran Age Distribution in Homeless Population

The distribution of ages for homeless veterans in HMIS most closely resembles that of chronically homeless persons and is very different than that of the general population of veterans at large. This is interesting – suggesting that perhaps veterans who become homeless may have more in common with other homeless people than veterans.

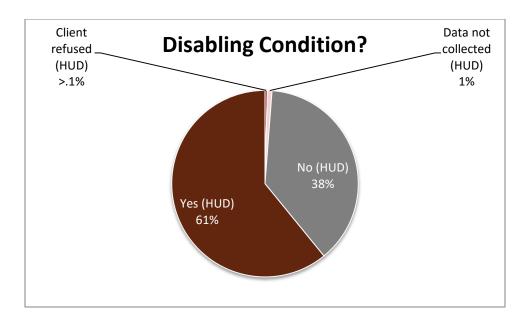


Figure 45: Homeless Veterans- Disabling Condition

Type of Disability	Total	Percent of total veterans
Alcohol Abuse (HUD)	48	20.00%
Both Alcohol and Drug Abuse (HUD)	46	19.17%
Chronic Health Condition (HUD)	23	9.58%
Developmental (HUD)	21	8.75%
Drug Abuse (HUD)	50	20.83%
HIV/AIDS (HUD)	15	6.25%
Mental Health Problem (HUD)	110	45.83%
Physical	63	26.25%
Vision Impaired	1	0.42%

Table 59: Homeless Veterans- Disability Types

Military veterans report disability at a higher rate than the general homeless population. The most common disability experienced was mental illness.

Supportive Services for Veteran's Families Programs

The Veterans' Affairs also provided supportive services to veteran families in the 2014 federal fiscal year. These included rapid rehousing and prevention services (such as assisting with a month's rent to prevent eviction). This program served 120 people in 86 households. 100 clients reported being homeless at project entry; the remainder identified as "not homeless" or did not respond. The Veteran's Affairs program differs from the HUD-funded program in that the primary eligibility is whether or not one served in the armed forces; HUD-funded interventions focus on the previously described four-category homelessness definition.

Veteran Family Composition	Total	Without Children	With Children and Adults
Adults	102	84	18
Children	18	0	18
Don't Know/Refused	0	0	0
Missing Information	0	0	0
TOTAL	120	84	36

	Total	Without Children	With Children and Adults
Households	86	75	10

Table 60: Homeless Veterans- Supportive Services Use

Not all of these clients were homeless. The program offered prevention services to those who were threatened with homelessness. It offered rapid rehousing services to those who were homeless. Of those who were homeless, the average length of stay in the program for was 138 days.

	Not homeless	Homeless	No response
Number of Clients	14	100	0 6

	Not Homeless	Homeless Clients	No response	
Female	2		27	2
Male	12		73	3

Table 61: Supportive Services Use for Veterans Threatened with Homelessness

3.8 Homeless or At Risk Homeless Children in School

The Department of Education tracks both at risk of homeless and homeless students. Most statistics from the Department of Education did not separate these two populations. For this section, "homeless" includes "at risk". School districts do not enter data into HMIS.

Table 62 below shows homeless or at risk homeless students enrolled in Erie County School Districts across past 4 years. This data was collected by the New York State Education Department in the Student Information Repository System (SIRS). The Buffalo City School District has the highest number of homeless children, 1391, much higher than last year. This year charter schools are included in the SIRS report. A total of 97 homeless or at risk of homeless students are identified from the charter schools within Erie County.

School District	10-11	11-12	12-13	13-14 ¹⁹
AKRON CENTRAL SCHOOL DISTRICT	4	2	<4	0
ALDEN CENTRAL SCHOOL DISTRICT	0	0	0	0
AMHERST CENTRAL SCHOOL DISTRICT	10	13	<4	12
BUFFALO CITY SCHOOL DISTRICT	810	1,033	909	1,391
CHEEKTOWAGA CENTRAL SCHOOL DISTRICT	32	37	41	47
CHEEKTOWAGA-MARYVALE UNION FREE SCHOOL DISTRICT	16	20	17	26
CHEEKTOWAGA-SLOAN UNION FREE SCHOOL DISTRICT	2	10	12	<4
CLARENCE CENTRAL SCHOOL DISTRICT	15	12	20	16
CLEVELAND HILL UNION FREE SCHOOL DISTRICT	18	23	26	28
DEPEW UNION FREE SCHOOL DISTRICT	23	12	13	9
EAST AURORA UNION FREE SCHOOL DISTRICT	0	0	<4	<4
EDEN CENTRAL SCHOOL DISTRICT	20	10	15	30
EVANS-BRANT CENTRAL SCHOOL DISTRICT (LAKE SHORE)	25	22	48	69
FRONTIER CENTRAL SCHOOL DISTRICT	23	9	12	14
GRAND ISLAND CENTRAL SCHOOL DISTRICT	3	2	11	7
HAMBURG CENTRAL SCHOOL DISTRICT	3	1	<4	<4
HOLLAND CENTRAL SCHOOL DISTRICT	5	11	<4	<4
IROQUOIS CENTRAL SCHOOL DISTRICT	6	7	116	22
KENMORE-TONAWANDA UNION FREE SCHOOL DISTRICT	122	131	<4	104
LACKAWANNA CITY SCHOOL DISTRICT	2	7	5	10
LANCASTER CENTRAL SCHOOL DISTRICT	3	16	0	5
NORTH COLLINS CENTRAL SCHOOL DISTRICT	0	0	39	0
ORCHARD PARK CENTRAL SCHOOL DISTRICT	28	21	8	17
SPRINGVILLE-GRIFFITH INSTITUTE CENTRAL SCHOOL DISTRICT	12	6	6	<4
SWEET HOME CENTRAL SCHOOL DISTRICT	8	7	30	33
TONAWANDA CITY SCHOOL DISTRICT	10	19	61	42
WEST SENECA CENTRAL SCHOOL DISTRICT	53	66	18	39
WILLIAMSVILLE CENTRAL SCHOOL DISTRICT	11	7	<4	19

Table 62: Homeless or At Risk Homeless Children by School Districts (Data Source: http://www.nysteachs.org/infotopic/statistics.html)

 $^{^{19}}$ SIRS doesn't present the specific data if a district has less than 4 homeless students. So we are labeling it as "<4" in our report.

Appendix One: HMIS

Appendix One: HMIS

What is HMIS?

A Homeless Management Information System (HMIS) is a software application designed to record and store client-level information on the characteristics and service needs of homeless persons. HMIS is typically a web-based software application that homeless assistance providers use to record client and program level data, coordinate client services, and to manage their operations, to better serve the homeless. In Buffalo and Erie County, HMIS is also referred to as BAS-Net (Buffalo Area Services Network). BAS-Net was launched in 2005 by the Homeless Alliance of WNY (HAWNY). HAWNY is tasked with managing the system, and is funded by a grant from the Department of Housing and Urban Development (HUD). Erie County chose to use a web-based solution, Service Point for HMIS. Any homeless service provider (except domestic violence shelters) receiving funding through HUD's Continuum of Care (CoC) Homeless Assistance Programs, the Emergency Solutions Grant (ESG) program, Supportive Services for Veteran Families (SSVF), and Solutions to End Homelessness Program (STEHP) is required to enter information into BAS-Net. Further, HUD requires that certain data elements are collected (and entered) by all programs using HMIS. HAWNY, the lead agency for the CoC in Erie County, is mandated to submit reports to HUD using HMIS as the data source. All client information is collected only with the client's permission that data may be used for research purposes without releasing personal information.

A core value of BAS-Net is informed consent. Client-level data is only entered into HMIS when there is a signed release of information form in the client's file that permits both data collection and use for research purposes as aggregate data. An unwillingness to sign the release of information form cannot be used as grounds to refuse housing or services to a person for which they would otherwise be eligible.

Can HMIS provide a number of homeless persons without duplication? How are clients counted?

Yes, an unduplicated count is possible. The system automatically assigns a unique ID number for each new person that is created. The system allows users from different agencies to search for a client by their ID, name, or Social Security Number (SSN). If the client is already in the system, only the name, the last 4 digits of the SSN and the date of birth will appear on the screen; information will be updated, but a new unique ID number will not be created. In this report, all the client counts are based on the unique ID and only counted once unless otherwise noted. Each time a person, enters a program or exits a program, case workers have the responsibility to record the entry and exit dates as well as other HUD required data elements needed to update the record.

A data quality report is run periodically to identify any records that appear to be duplicates. The deduplication process is used when two unique ID numbers have been assigned to the same person. This usually means merging the two records into one record if in both records the client's name, SSN and other demographic information are exactly the same. However, if the Social Security Numbers are slightly different but the name and other information are matched, the records won't be merged until it is certain which one is the real SSN.

Appendix One: HMIS

• Data export methodology--De-duplicated count with exception

Data exported for this report is mostly from the answers inputted when clients entered a program. If there are different answers in different entries, only the latest answer will be included in this report. For example, client A had a source of income when he first came into an emergency shelter, but six months later he was accepted to a transitional housing program no longer with an income. Client A will then be counted twice in both categories and only information from the transitional housing program will be presented in the Overall Homeless section.

What are the challenges of using HMIS data?

As with any database, if good data is entered in, then good data will result for reporting purposes. Data entered into BAS-Net is physically entered by service providers and the information is usually self-reported by the client. Homelessness is often a disorienting experience and important dates and information may unintentionally be inaccurate or vague. We highlight this only to emphasize that HMIS is administrative data that is self-reported and subject to human error. HAWNY is continuously improving its data quality activities to ensure that HMIS data is as complete and error-free as possible. HAWNY expects HMIS users to meet the HUD benchmark for data quality – data for 95% of HUD required data elements is entered completely and accurately.

Appendix Two: Estimated Homeless Count Methodology

Erie Niagara Metro Area Aggregate

ADJUSTED BY DATA SOURCE	
Source To	tal
HMIS minus RRH	4,432
Haven House ES/TH deduplicated*	504
Little Portion Friary*	431
Faith-Based Fellowship**	60
Altamont Program –ES**	129
Temple of Christ*	552
Back to Basics**	30
Hotels**	93
Red Cross**	17
St. Luke's Estimate***	50
Altamont TH Estimate***	34
Left NYS**	3
Unsheltered Count	177
Niagara DSS Assistance to Permanent	841
Housing	
PASSAGE (DV)***	36
Lockport Cares*	256
Niagara Gospel Rescue Mission*	179
Carolyn House DV*	32
YWCA niagara DV total deduplicated*	79
Vanessa Scott-God's Woman*	13
TOTAL	7,948

^{*}Self-Report by Agency

^{**}Erie County Department of Social Services

^{***}Estimate based on bed and average area utilization rates

Erie County Homelessness Aggregate

Source	Total
HMIS minus RRH	4,046
Haven House ES/TH deduplicated*	504
Little Portion Friary*	431
Faith-Based Fellowship**	60
Altamont Program –ES**	129
Temple of Christ*	552
Back to Basics**	30
Hotels**	93
Red Cross**	17
St. Luke's Estimate***	50
Altamont TH Estimate***	34
Left NYS**	3
Unsheltered Count	177
TOTAL	6,126

^{*}Self-Report by Agency

^{**}Erie County Department of Social Services

^{***}Estimate based on bed and average area utilization rates

Appendix Three: List of Providers

Emergency Shelters

Participating in HMIS

- Buffalo City Mission
- Buffalo City Mission Code Blue
- Child and Family Services-Casey House
- Code Blue Cornerstone
- Community Missions of Niagara Frontier
- Compass House Emergency Shelter
- Cornerstone-Emergency shelter
- Family Promise
- Lt. Colonel Matt Urban Human Service Center Hope House
- Salvation Army Emergency Family Shelter
- TSI Emergency Housing Service

Not Participating in HMIS

- Altamont House
- Faith Based Fellowship
- Haven House DV Emergency Shelter
- Little Portion Friary *
- Lockport Cares
- Niagara Gospel Rescue Mission*
- St. Luke's Mission of Mercy/Code Blue
- Temple of Christ My Place Home*
- Crisis Services after hour program
 *Now Participating in HMIS

Transitional Housing Programs

Participating in HMIS

- American Red Cross
- Buffalo City Mission Discipleship Program
- Buffalo City Mission Journey Transitional Housing Program
- Cazenovia Visions Place Expanded MICA
- Cazenovia Visions Place Supportive Housing Program II
- Cornerstone-Transitional
- DePaul HUD Transitional-Supportive Housing Program IV
- Gerard Place
- Hispanic United of Buffalo
- Teaching and Restoring Youth (TRY)
- The Crib
- United Church Home, Inc
- YWCA of WNY Scattered Sites
- YWCA of WNY- Amherst

Not Participating in HMIS

- Altamont House Veterans GPD Program
- Haven House
- YWCA Niagara
- YWCA Niagara- Carolyn's House

Safe Haven - Participate in HMIS

Lake Shore Safe Haven

Outreach Homeless - Participate in HMIS

- Matt Urban Outreach
- Lake Shore McKinney (formerly PATH)

SSO -Participate in HMIS

- NLS Homeless Task Force
- Harbor house
- YWCA of Tonawanda

Permanent Supportive Housing

Participate in HMIS

- Buffalo Federation of Neighborhood Centers Shelter Plus Care II & III
- Buffalo Federation of Neighborhood Centers Shelter Plus Care IV
- Cazenovia Chronic Homeless Program
- Cazenovia Supportive Housing Program VI
- Cazenovia Supportive Living II
- Cazenovia Supportive Housing Program VIII
- Cornerstone Permanent Supportive Housing
- Cornerstone PSH
- Housing Options Made Easy Shelter Plus Care I
- Housing Options Made Easy Shelter Plus Care V
- Housing Options Made Easy Supportive Housing Program I
- Lake Shore Shelter Plus Care I
- Lake Shore Shelter Plus Care II and III
- Lake Shore Supportive Housing Program VII
- DePaul McKinley Square Supportive Housing Program IX
- DePaul Shelter Plus Care I
- DePaul Shelter Plus Care II and III
- DePaul Shelter Plus Care IV
- Matt Urban Housing First
- Restoration Society Supportive Housing Program III
- Southern Tier Environments for Living Shelter Plus Care III
- Spectrum Supportive Housing Program V
- Spectrum Supportive Housing VI
- TSI Shelter Plus Care I

Appendix Three: List of Providers

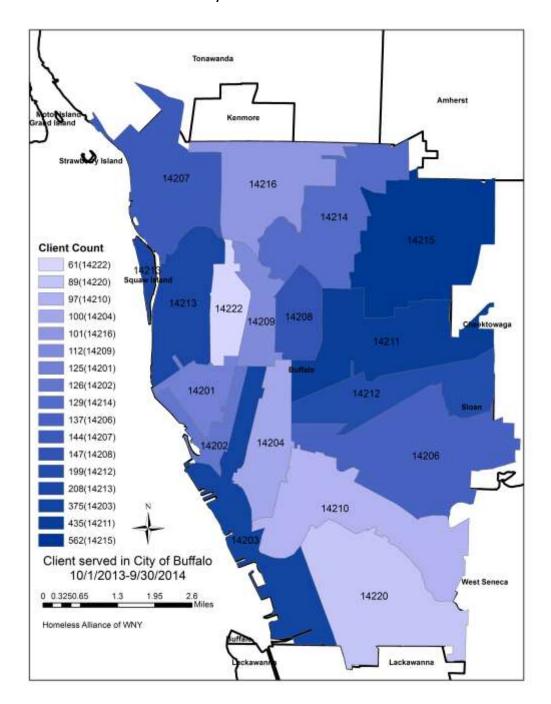
- TSI Supportive Housing Program I
- TSI Supportive Housing Program VIII
- WNY Veterans Housing Coalition S+C VI

Do Not Participate in HMIS

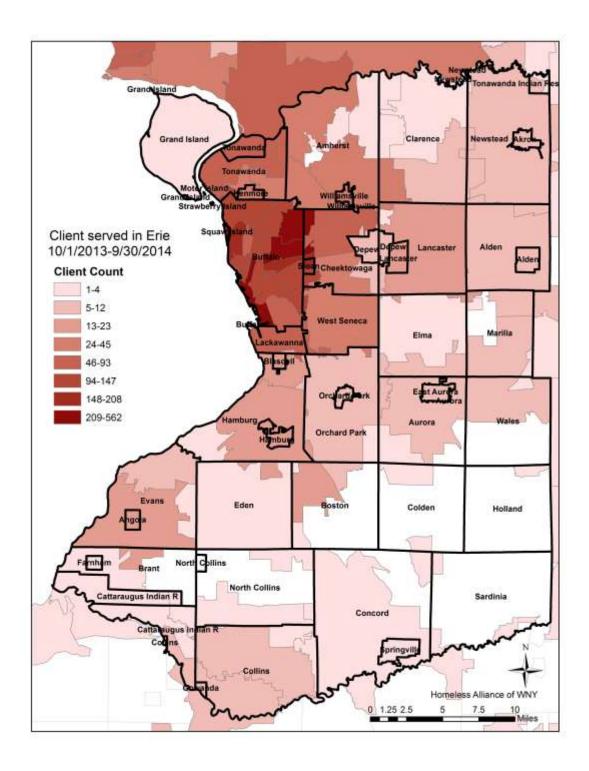
• VA - Homeless Veterans – VASH

Appendix Four: Maps

Homeless Clients from City of Buffalo Served in 2014



Homeless Clients from Erie County Served in 2014



Appendix Five: Zip Code Tables

Last permanent address from clients who are assisted in Erie County by states

State	Total persons	Percent	State	Total persons	Percent
New York	4,015	92.43%	Tennessee	3	0.07%
Florida	59	1.39%	Nevada	3	0.05%
Pennsylvania	36	0.83%	Idaho	2	0.05%
Puerto Rico	27	0.62%	Illinois	2	0.05%
Ohio	25	0.58%	Indiana	2	0.05%
Georgia	24	0.55%	Iowa	2	0.05%
North Carolina	16	0.37%	Kentucky	2	0.05%
Alabama	15	0.35%	Louisiana	2	0.05%
Connecticut	13	0.28%	Maryland	2	0.05%
Michigan	13	0.28%	Minnesota	2	0.05%
California	12	0.27%	Oklahoma	2	0.02%
New Jersey	10	0.23%	Rhode Island	2	0.02%
Missouri	7	0.16%	Utah	2	0.02%
South Carolina	7	0.16%	Arizona	1	0.02%
Washington	7	0.16%	Arkansas	1	0.02%
Texas	6	0.14%	Maine	1	0.02%
Colorado	5	0.12%	Montana	1	0.02%
Mississippi	5	0.12%	Nebraska	1	0.02%
Massachusetts	4	0.09%	Oregon	1	0.02%
Delaware	3	0.07%	Wisconsin	1	0.02%
	Total			4,344	100.00%

Zip Code by County of New York State Originating Clients

County	Total persons	Percent	County	Total persons	Percent
Erie	3,626	90.30%	Washington	3	0.07%
Niagara	138	3.44%	Albany	2	0.05%
Monroe	39	0.97%	Delaware	2	0.05%
Chautauqua	21	0.52%	Essex	2	0.05%
Bronx	19	0.47%	Herkimer	2	0.05%
Cattaraugus	16	0.40%	Jefferson	2	0.05%
Genesee	16	0.40%	Madison	2	0.05%
Wyoming	15	0.37%	Ulster	2	0.05%
Onondaga	14	0.35%	Chemung	2	0.05%
Kings	11	0.275	Cortland	2	0.05%
New York City	11	0.27%	Franklin	1	0.02%
Queens	10	0.25%	Greene	1	0.02%
Broome	8	0.20%	Nassau	1	0.02%
Oneida	6	0.15%	Orange	1	0.02%
Orleans	5	0.12%	Ostego	1	0.02%
Livingston	4	0.10%	Renessler	1	0.02%
Westchester	4	0.10%	Richmond	1	0.02%
Seneca	4	0.10%	Saratoga	1	0.02%
Tompkins	4	0.10%	Schenectady	1	0.02%
Alleghany	3	0.07%	Steuban	1	0.02%
Clinton	3	0.07%	Suffolk	1	0.02%
Dutchess	3	0.07%	Tioga	1	0.02%
Ontario	3	0.07%	Yates	1	0.02%
Total					100.00%

Zip Code By City of Erie County Originating Clients

City	Total persons	Percent	City	Total persons	Percent
Buffalo	3,194	88.09%	Bowmansville	3	0.08%
Cheektowaga	83	2.29%	Springville	3	0.08%
Amherst	79	2.18%	Clarence Center	2	0.06%
Lackawanna	70	1.93%	East Amherst	2	0.06%
Tonawanda	51	1.41%	Eden	2	0.06%
Lancaster	23	0.63%	Elma	2	0.06%
Hamburg	20	0.55%	Getzville	2	0.06%
Angola	13	0.36%	Grand Island	2	0.06%
Depew	12	0.33%	Lake View	2	0.06%
Derby	11	0.30%	West Falls	2	0.06%
Alden	9	0.25%	Farnham	1	0.02%
East Aurora	9	0.25%	Glenwood	1	0.02%
Orchard Park	8	0.22%	Lawtons	1	0.02%
Clarence	7	0.19%	North Evans	1	0.02%
Akron	5	0.14%	Sardinia	1	0.02%
Collins	5	0.14%			
Total					100.00%