



A HOME FOR EVERYONE

Briefing



- Oct. 25 **"Wave of evictions leaves renters few options in record-setting apartment market"** - *The Oregonian*
- Oct. 23 **"A third Portland homeless camp? Welcome to Hazelnut Grove"** - *The Oregonian*
- Oct. 24 **"No place to call home: The problem with Section 8"** - *KGW*
- Oct. 18 **"56 Homeless People Died on Portland's Streets in 2014"** - *Oregon Public Broadcasting*
- Oct. 12 **"As homeless students rise, schools seek help"** - *KOIN*
- Oct. 8 **"Rising rents, lack of affordable housing causes jump in homeless students statewide"** - *The Oregonian*
- Oct. 1 **"Oregon schools report near 9% jump in homeless students"** - *KATU*
- Sept. 18 **"Study: Portland's Got the Nation's Fastest-Rising Rents"** - *The Portland Mercury*
- Sept. 21 **"Will Portland Rents Rise as High as San Francisco's?"** - *Willamette Week*
- Sept. 30 **"Portland's Rent Spike Spreads East, Pressuring Low-Income Residents"** - *Willamette Week*
- Aug. 21 **"Lack of affordable housing pushing families into homelessness"** - *KATU*
- June 10 **"Pay Up or Get Out: Uncapped Rent Increases Are Displacing Portland's Most Vulnerable"** - *Portland Mercury*



Who Experiences Homelessness?



A HOME FOR EVERYONE



Unsheltered
1,887

HUD Homeless
3,801

Broadest Definition
16,344 (estimate)

Unsheltered
1,887



Emergency
Shelter
872



Transitional
Housing
1,042





Adult Women – 31%

Families with Children - 17%

African Americans – 24%

Communities of Color – 41%

Over 55 – 20%

Youth Under 24 – 7%

Veterans – 12%



The Challenges Faced by People Experiencing Homelessness



Health

Disabled – 57%

Chronically Homeless – 48% (unsheltered)

Co-Occurring Disorders (psych, substance, chronic medical)– 36%

2008 Vulnerability Survey

Average Age of Death: 45

Domicile Unknown 2015



Trauma

Domestic Violence: 45% of Women, 46% Youth

2015 PIT, Slavin 2001

One in four women are homeless due to violence

Jasinski, et. al 2005

PTSD: 63% of Male and 77% of Female Iraq and
Afghanistan Homeless Veterans Tsai, 2012 (n 100)

Traumatic Brain Injury: As high as 53%

Hwang, University of Toronto, 2009



Lack of Income

TANF for three person family is \$506, a 29% decline in value since 1996 (CBPP, 2015)

TANF covers just 59% of Fair Market Rent for a 2 bedroom apartment (CBPP, 2013)

TANF puts a family of 3 at just over 30% of the federal poverty level

SSI benefit is \$733/month, and puts a single person household at 70% of federal poverty level

Full time minimum wage is \$19,420, less than FPL for family of 3, 65% of minimum wage jobs are part time.

The real wages of low-wage households declined 5.6% in four years.



Barriers to Housing

Criminal Justice Involvement: 25 – 50%

Health Care for the Homeless, 2013

Past Evictions and Poor Credit

Rents up 15% since last year, vacancy rates below 3%

Unlawful Discrimination



Length of Homelessness

Less than 6 months: 33%

Less than a year: 50%

More than two years: 27%



Where are homeless people from?

80% have been in Multnomah County longer than 2 years

Of the 20% here less than 2 years, 12% (224) were homeless when they came to Multnomah County

What brought them here?

Family & Friends: 37%, Job Opportunities 16%, Services & Resources 13%



The AHFE Approach



Shared Vision & Values

The Vision:

No one should be homeless. Everyone needs a safe, stable place to call home.

Guiding Values:

Prioritize the most vulnerable -- Promote racial and ethnic justice --
Hold the programs we fund accountable and using data to make
decisions -- Engage and involve the community --Strengthen system
capacity and increase leveraging opportunities



A Comprehensive Plan

Six Key Focus Areas to Prevent and End Homelessness:

1. Housing • 2. Income & Benefits • 3. Health • 4. Survival & Emergency Services • 5. Access to Services • 6. Systems Coordination



Shared Governance

A Home for Everyone

Executive Committee

(Multnomah County, Portland, Gresham, Home Forward, Meyer Memorial Trust, Portland Leadership Foundation)

Coordinating Board

(Majority Culture Providers, Culturally Specific Providers, Housing, Faith, Business, Public Safety, Education, DV, Consumers, Advocates)

CCEH

(Consumers, Providers)

Funding Adv. Committee

(CB Members)

Data & Eval.

(CB Members & Staff)

System Adv. Groups

(HYOC, HFSC, DV)

Ad Hoc Policy Committees

(Housing, Health Care, Employment, Veterans, Safety Off the Streets)





Board Members

Michael Anderson-Nathe, Health Share of Oregon
Raihana Ansery, Portland Business Alliance
Alexandra Appleton, Community Member
Carolyn Bateson, U.S. Dept. of Veterans Affairs
Israel Bayer, Street Roots
Kris Billhart, Volunteers of America
Ed Blackburn, Central City Concern
Stacy Borke, Transition Projects Inc.
Beth Burns, p:ear
Lee Po Cha, IRCO & Asian Family Services
Julia Delgado, Urban League of Portland
Jean DeMaster, Human Solutions
Rene DuBoise, Department of Human Services
Susan Emmons, Northwest Pilot Project
Maurice Evens, Community Member
Shane Kinnison, Front Line - Gresham
Brad Malsin, Beam Development
Monique Manconi, Still Life
Alexa Mason, Portland Rescue Mission

Andrew McGough, Worksystems Inc.
Victor Merced, Hacienda CDC
Matt Morton, NAYA Family Center
Anne O'Malley, Mercy Corps - ROAR
Arthur Rios Sr., Community Representative
Shannon Singleton, JOIN
Nicole Stein, Umpqua Bank
Martha Strawn Morris, Gateway Cener
Cheryl Thompson, Community Member
Derald Walker, Cascadia Behavioral Healthcare
Sara Westbrook, Portland Police Bureau
Marisa Zapata, Portland State University

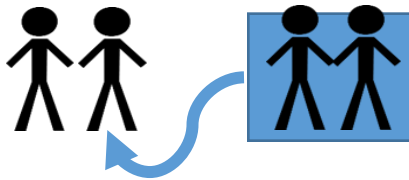


Data: Evaluating Need, What We Invest and What We Achieve

The basic model

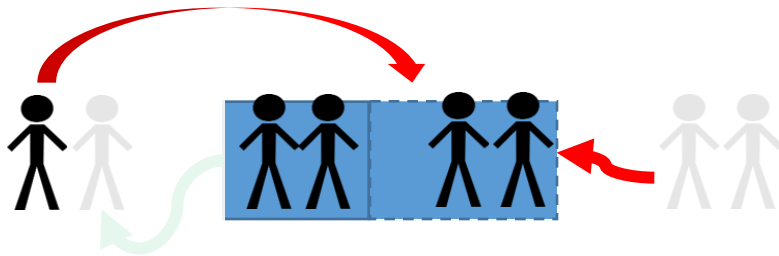


Single point-in-time



Outflow:

- Permanent housing
- “Self-resolved”/unknown

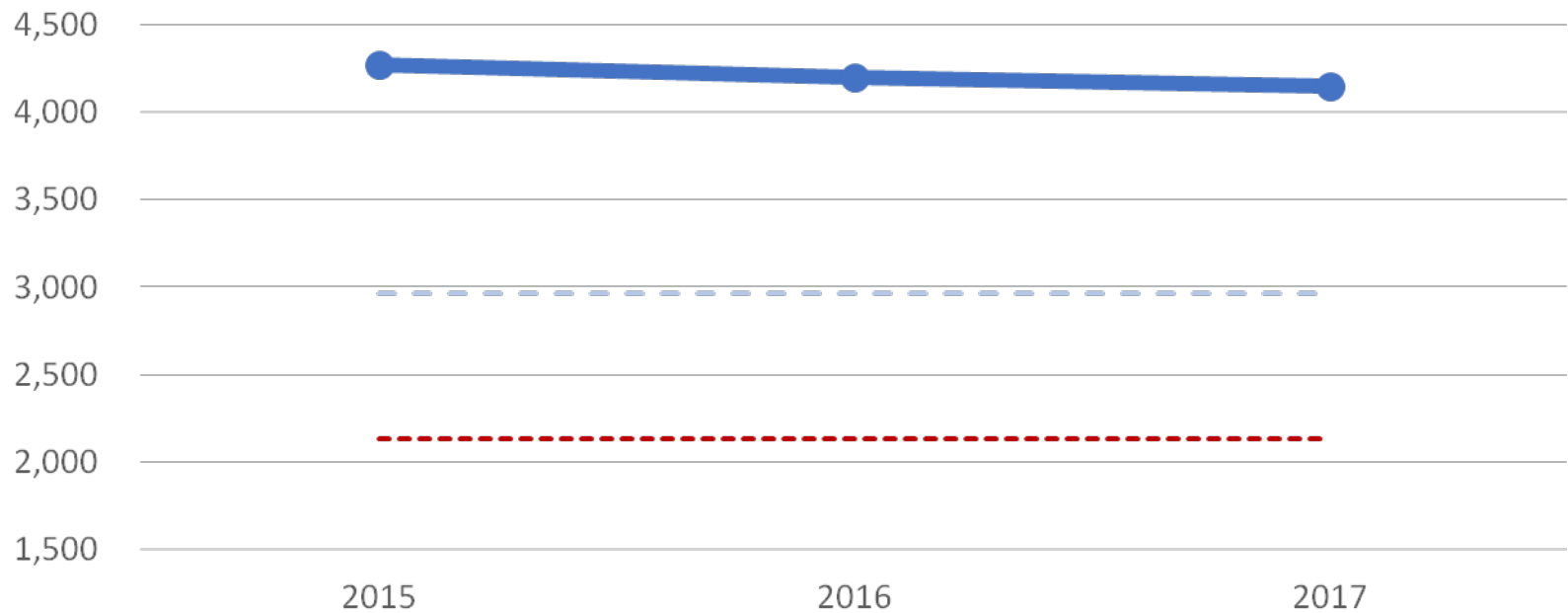


Inflow:

- Newly homeless
- Return to homelessness

Status Quo

Permanent housing placement and unmet housing need among people experiencing homelessness in Multnomah County (annual, estimated)



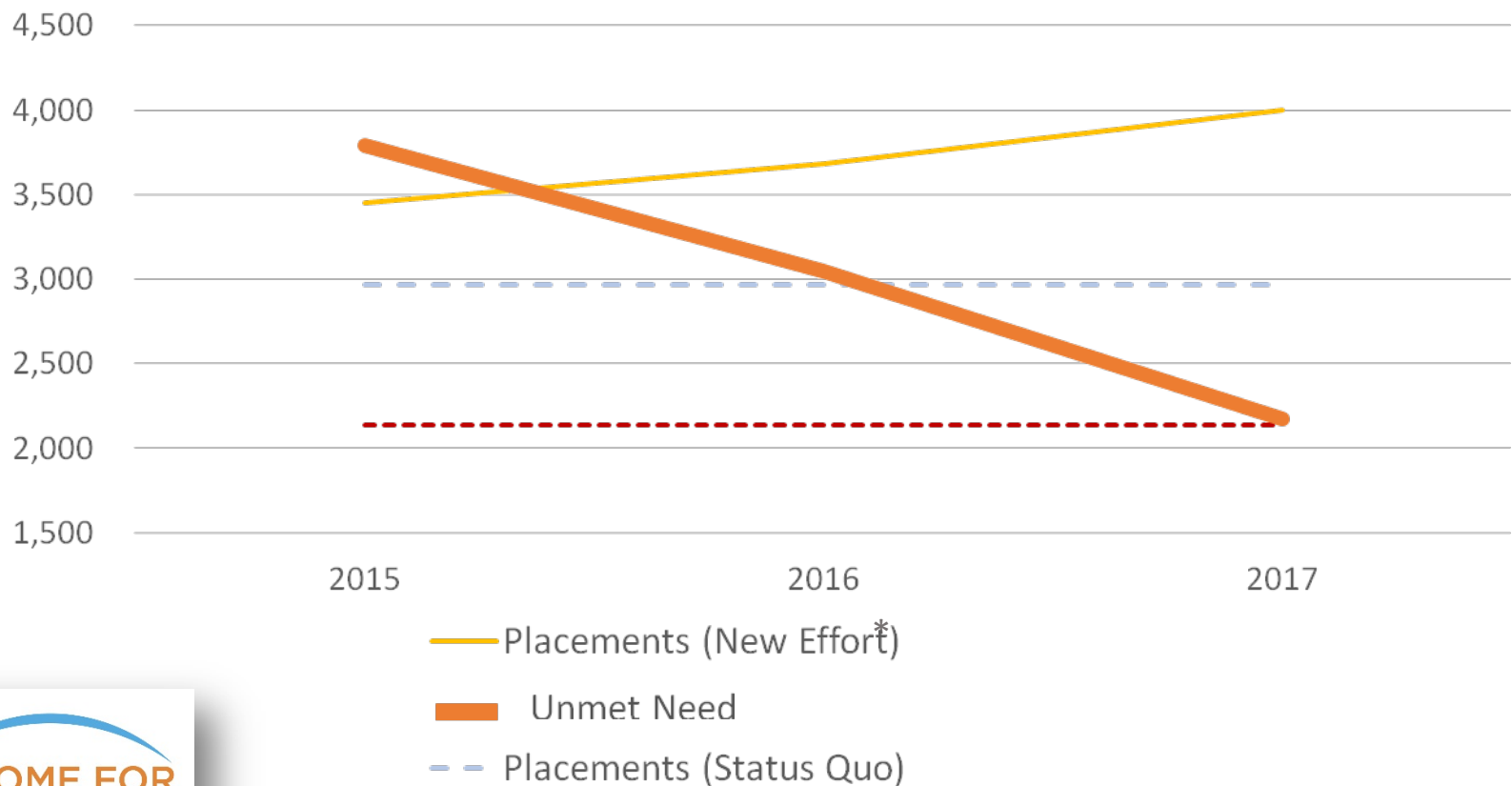
—●— Unmet Need (Status Quo)

- - - Placements (Status Quo)

- - - Planning Goal (Reduce Unmet Need by Half)

Retention + Additional Placement

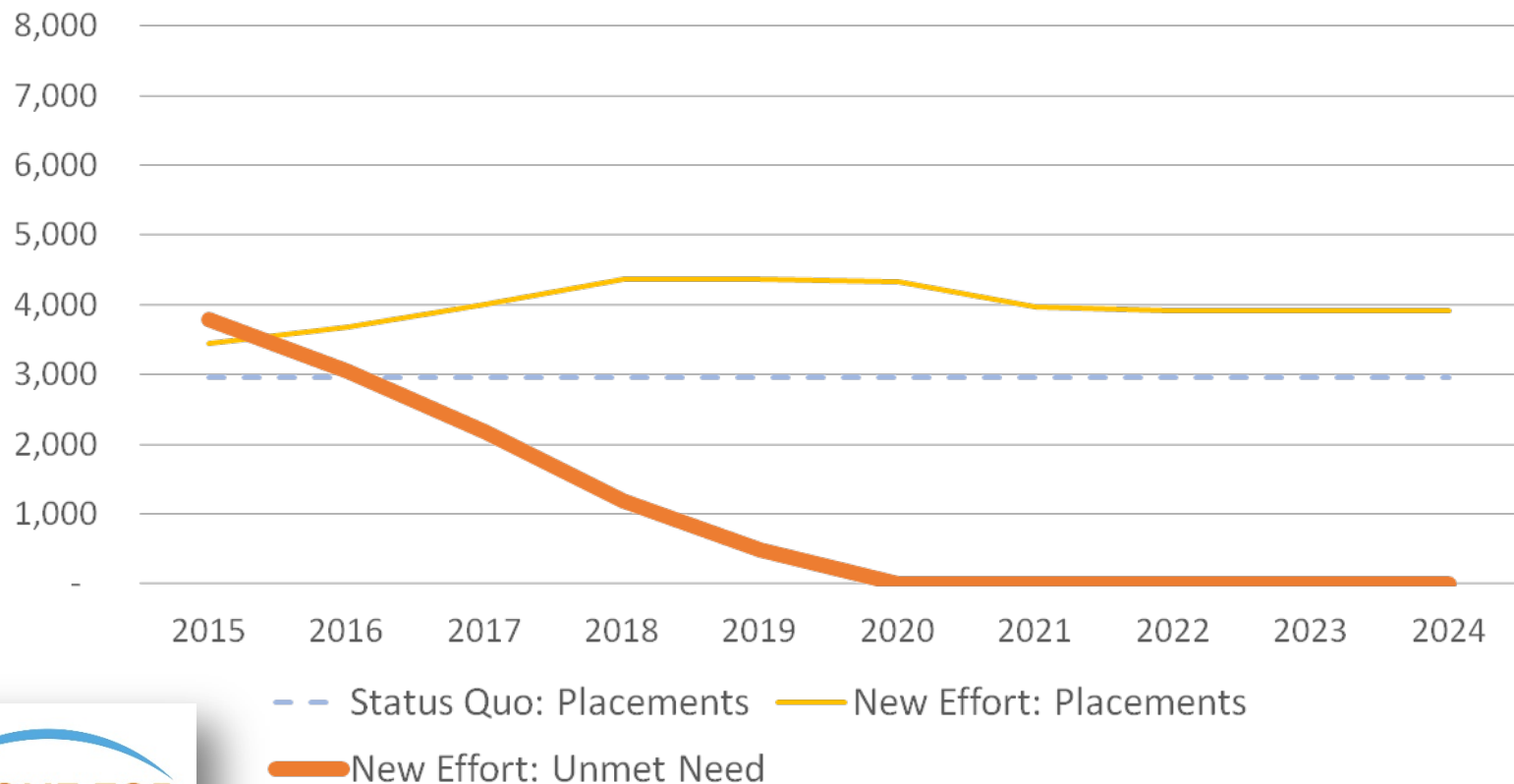
Permanent housing placement and unmet housing need among people experiencing homelessness in Multnomah County (annual, estimated)



*Assumes reduce rate of return to homelessness to 15%

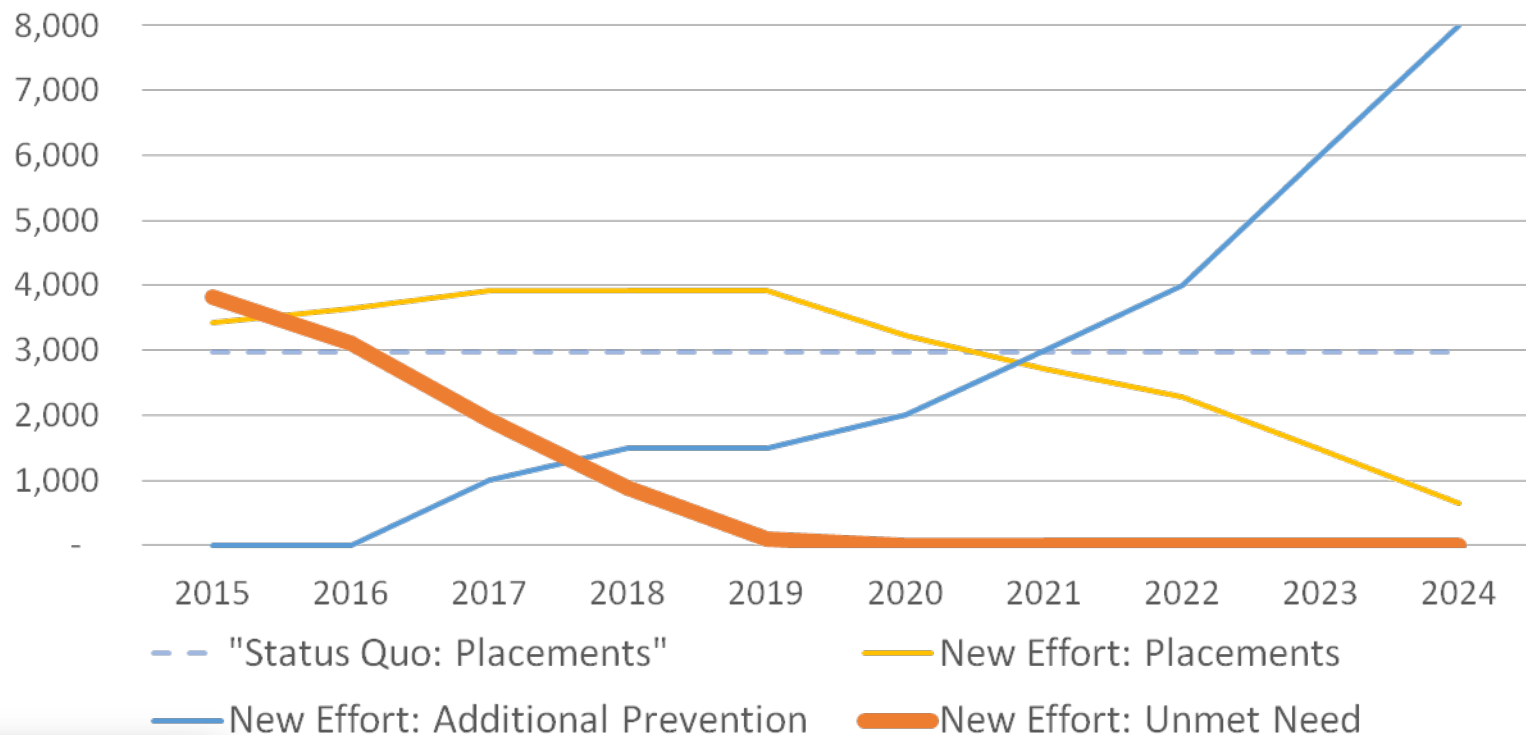
New effort: placement only

Permanent housing placement and unmet housing need
among people experiencing homelessness in
Multnomah County (annual, estimated)



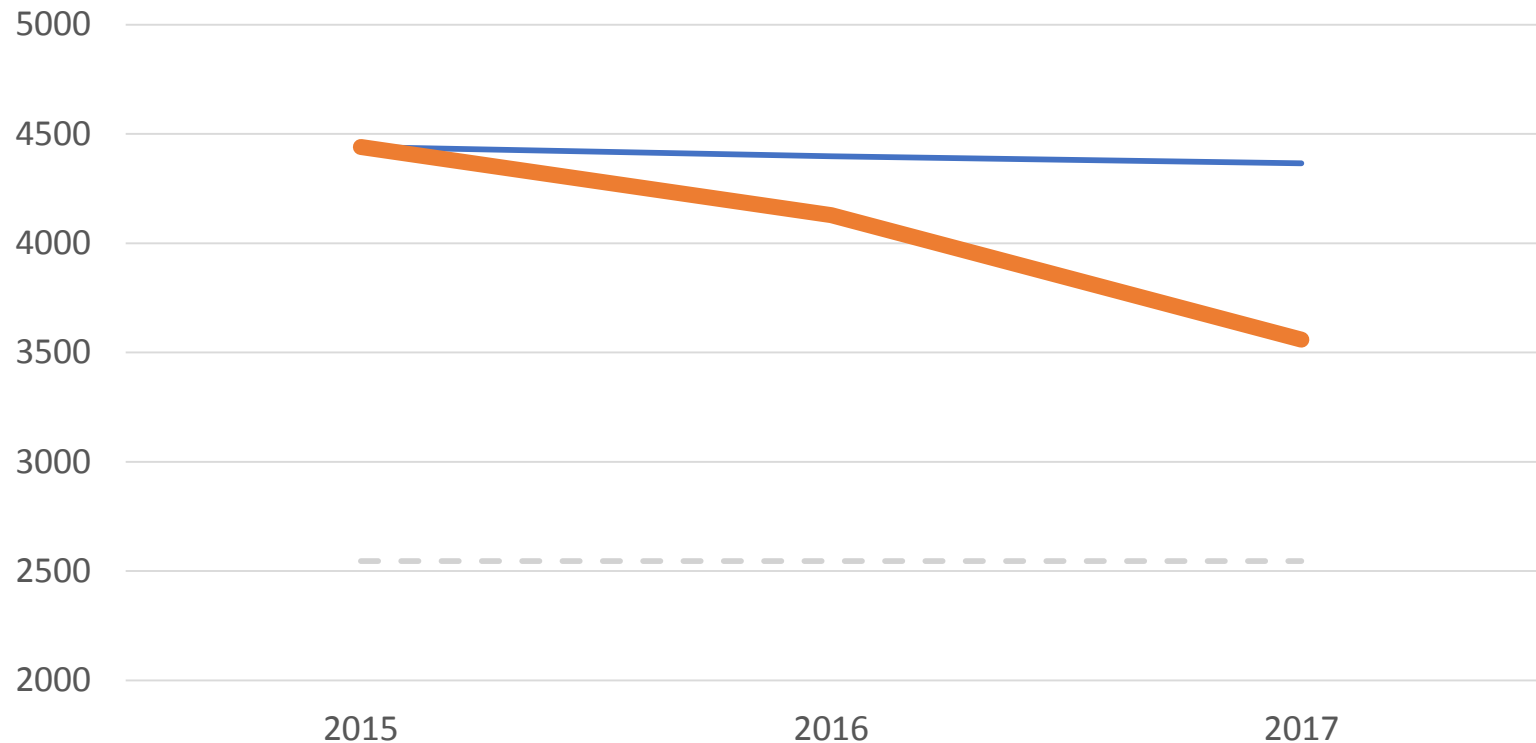
New effort: placement + prevention

Permanent housing placement and unmet housing need among people experiencing homelessness in Multnomah County (annual, estimated)



Planning scale: Safety off of the streets

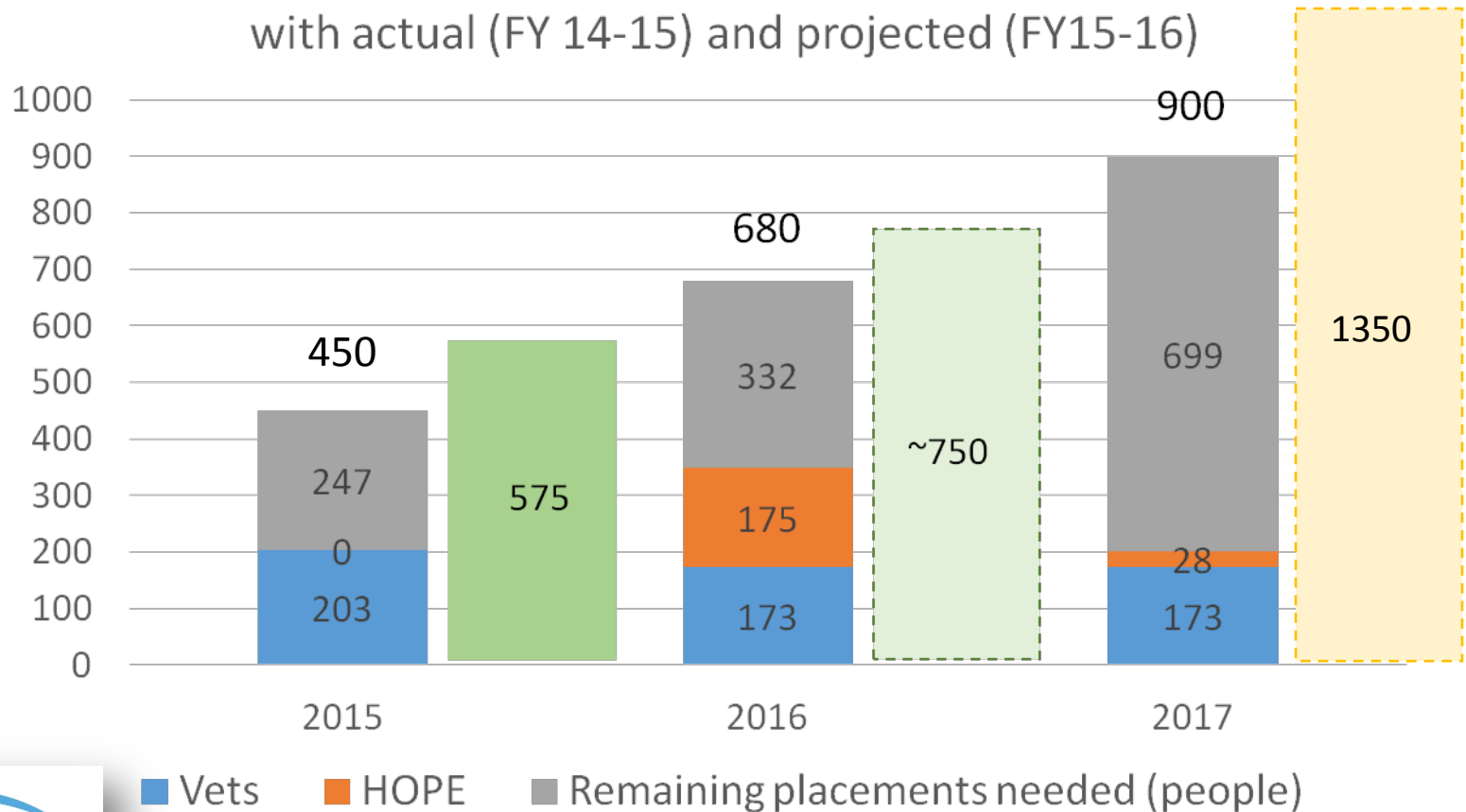
Estimated people experiencing homelessness in
Multnomah County (Point-in-time)



- Current Capacity: Shelter/Transitional Hsg
- Status Quo: PIT
- New Effort: PIT

New effort: Actual & projected

Additional required placements above FY 2013-14
baseline (annual, estimated),
with actual (FY 14-15) and projected (FY15-16)



15-16 Financial Recommendations

Fiscal Year 2015-2016 Resource Needs to Expand Placement and Improve Retention			
INVESTMENT TYPE	AMOUNT	HOUSEHOLDS ASSISTED	
Long Term Rent Assistance & Support	HUD "HOPE" Grant	130 Chronically Homeless	
Veterans Flexible Rental/Client Assistance	\$500,000	173 Veterans	
Local Long & Short term Rent Assistance	\$1,200,000	230	
Section 8 Vouchers	\$450,000	60	
Housing Retention Rent Assistance	\$400,000	106+ Households Retained	
Housing Placement & Retention Support Services	\$1,200,000	Housing & Landlord Recruitment Staffing	
Income Acquisition	\$1,050,000	All populations	
Mobile Mental Health & Addictions, Counseling Services	\$550,000	Highly Vulnerable	
Evaluation & Training	\$70,000		
Unit Development	\$10,000,000	250 units	
Unit Set Aside	30%-50% of publicly funded units	125-210 units	
TOTAL NEW/REPR. RESOURCE NEED:	\$15 million		

Summary of Policy Recommendations

Veterans	Housing	Safety off the Streets	Workforce & Economic Opportunity	Health
Landlord Access: Increase pool of partner landlords, non-profit and for-profit, through outreach and improved incentives	System Design: Develop shared standards for housing placement and retention services: flexible, mobile, culturally specific	System Design: Improve data sharing, implement coordinated access, and shared standards for service delivery	Alignment: Align DHS TANF-JOBS program, career track employment, housing, and community-based, culturally specific support	Discharge Planning: Ensure hospitals do not discharge into homelessness
Flexible Local Resources: Provide flexible local resources to facilitate the full utilization of VA housing resources	Local Housing Funding: Affirm 30% set-aside in urban renewal areas, dedicate 30-50% of all new locally funded units to households exiting homelessness, establish homeless preference at Home Forward	Facilitate Siting: Reduce legal and practical barriers to siting safety off the streets options, including shelter, transitional campgrounds	Bring Housing to Workforce: Provide people currently engaged in career-track training through the Economic Opportunity Program (EOP) with access to housing assistance	Mobile Health Services: Bring health care services to community based settings
Home Forward Initiatives: Project base VASH vouchers, create veterans preference for Section 8, allow S+C recipients to transition to Sect. 8 when appropriate	Housing Access/Retention: Reduce screening barriers; increase standard to evict, fair housing/legal assistance, landlord incentives; apply equity lens	Shelter Diversion: Allow flexible funds to be used for prevention, relocation to out of state housing, and opportunistic housing placements	Bring Workforce to Housing: Expand access to employment and career-track resources to support more people served by homeless services providers	Increase Recuperative Care Options: Create more options for people leaving hospitals, mental health and addictions facilities
VA Resource Streamlining: Streamline transition from SSVF to VASH; VSOs to advocate for status change & benefit eligibility; support VASH lease-up	State & Federal Funding Changes: Support increased federal and state funding (e.g. \$100 million/ EHA/SHAP); remove barriers to development (e.g. inclusionary zoning) and inflexible federal regulations	Mobile Supports Attached to SoS Options: Bring housing placement and support services to shelters, rest areas, and other SoS options lacking those services	Engagement and Evaluation: <ul style="list-style-type: none"> Strengthen partnerships with private-sector employers (e.g. tax credit) Better connect innovative employment strategies (e.g. social enterprises) to mainstream resources 	Improved Information: Ensure health care providers are doing housing assessments at intake and ongoing.
Data Integration: Improve data integration between VA and local data systems	Alignment: DHS, employment, benefits, health-care, and criminal justice systems require alignment to housing agenda		Board Comment: <i>Some on coordinating board asked for more emphasis on alternative employment strategies (e.g. social enterprises, self-employment)</i>	Expand Permanent Supportive Housing: Annually set aside 25% of publicly funded housing for PSH, 80-100 units, recapture savings for additional PSH
Training: Improve training of local providers to identify eligibility for VA assistance.	Evaluation: Develop and implement a framework for ongoing evaluation of AHFE			Alignment: Use health care Community Benefit \$, Flexible Services \$, and Medicaid for PSH & housing



Key Strategies: Housing

Rents for 2 bedrooms range from \$821 to \$2335 per month. State of Housing Report

There is not a single neighborhood in Portland where a family of three earning 30% of AMI (\$20,000) can find a 2 bedroom rental unit that is affordable to them (\$502/month) . State of Housing Report 2015.

There are no neighborhoods where the average African American or Native American household can afford to rent a 2 bedroom apartment. State of Housing Report 2015.



- **Increase investments in deeply affordable housing**
 - TIF Lift/Demo Tax/County GF: \$5 mill./Housing Choice Vouchers
- **Decrease the cost of developing affordable housing**
 - PHB Cost Containment Strategies/County & City GF -Innovation Funding
- **Support access to and retention of housing**
 - Assertive Engagement
 - Retention support/financial incentives/landlord support/tenant protections





Key Strategies: Income

130,000 people in Multnomah County live below the poverty line (17%)

13% of Oregon households earn less than \$15,000/yr.

Supplemental Security Income (SSI): \$733/month

Full time minimum wage: \$19,240/yr., but most work less than full time



- **Expand access to disability benefits specialists**
 - 82% of BEST/Benefits Recovery clients received benefits, the majority for mental health disability.
- **Better Align Employment Training and Housing Supports**
 - Bring workforce to housing and housing to workforce
- **Social Enterprise & Non-Traditional Employment**
 - Self Employment, Street Roots, New City Kitchen, Day Labor





Key Strategies: Health

People who are homeless have high rates of both chronic disease and acute illnesses, with many of these conditions associated with and/or exacerbated by their living situations. Kaiser FF, 2014



- **Discharge Planning**
 - Prevent hospital discharges into homelessness
- **Expand Permanent Supportive Housing**
 - HOPE & Unity Center Housing Strategy
- **Improve Health & Housing Alignment**
 - Health and housing partnerships for high health care utilizers
- **Expand Mobile Mental Health**
 - Intensive Street Engagement





Key Strategies: Veterans

422 veterans were homeless on one night in January of 2015.



- **Expand pool of available landlords**
 - Outreach, incentives, and supports
- **Improve inter-agency collaboration**
 - VA, Home Forward, City of Portland, Multnomah County
- **Flexible funding to fully leverage federal investments**
 - Local GF used to place Section 8 vouchers, pay move-in expenses
- **Improve Intake and Data**
 - Registry, ongoing housing work-group to assign veterans





Key Strategies: Safety Off the Street

Even if we are successful in reducing homelessness by 50%, we will still need 650 additional SOS options for women and disabled individuals.

AHFE SOS Workgroup, 2015



- **Connect SOS to housing placement**
 - Dignity Village, R2D2, Winter Shelter
- **Expand public safety social service partnerships**
 - Walking beats and Intensive Street Engagement
- **Expand shelter options for most vulnerable**
 - SF “Reception Center”, Unity, Eugene Camping, Traditional Facilities





Outcomes in 2014-2015

3500 people housed – up 17% in 1 yr.

680 families

1600 HH without children

75% of households retained their housing at 12 months

Ending Veterans Homelessness



2015-2016 New Resources & Outcomes

- **Homeless Families:**

- Year-Around Shelter for 130 people (no turn away)
 - 248 additional families placed/retained
 - (200 dedicated housing choice vouchers)

- **Homeless Youth:**

- 100 additional youth into permanent housing
 - 80 additional pregnant and parenting youth into housing



- **Disabled Adults:**

- 75 additional people receive disability benefits

- 50 additional severely disabled adults receive housing

- 50 additional severely disabled receive mental health

- **Women:**

- 125 year around emergency shelter beds

- 35 additional women placed in housing



- **Veterans:**

- Shelter capacity for 22 veterans

- 180 additional housing placements/retentions

- **East County:**

- \$130,000 set aside for East County services

- **Housing Development:**

- 125 additional units for households homeless/at risk of homelessness



State of Emergency

Rents up 30% in five years, wages for low-wage workers down 5.6%

Shelter use up 42% & newly homeless up 5%

Rates of homelessness among most vulnerable have spiked





AHFE Recommendations for 2016/17

Goals:

1350 additional placements

1000 additional preventions

10% improvement in housing retention (to 85%)

650 additional safe sleeping options

250 units for homeless/at risk of homeless households

Resources Needed:

\$12.5 million for housing placement, retention, and support services

\$2.5 million for prevention

\$5 million for safe sleeping options

\$10 million for development

A Home for Everyone



For more information:
multco.us/housing-and-homelessness

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