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The U.S. Conference of Mayors is the official nonpartisan organization of cities with populations of 30,000 or more. There are 1,139 such cities in the country today, each represented in the Conference by its chief elected official, the Mayor.

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The United States Conference of Mayors-Sodexho, Inc. Hunger and Homelessness Survey 2005 was prepared by Eugene T. Lowe, Assistant Executive Director for Housing and Community Development, with the assistance of Conference of Mayors staff members Art Slater, James Welfley and Terri Beard. A copy may be obtained from the USCM website at usmayors.org.
December 15, 2005

Mayor Beverly O’Neill
President, United States Conference of Mayors
333 W. Ocean Boulevard
Long Beach, CA  90802

Dear Mayor O’Neill:

Today, as Co-chairs of the U.S. Conference of Mayors Task Force on Hunger and Homelessness, we submit the U.S. Conference of Mayors/Sodexho Survey on Hunger and Homelessness. In our society, the issues of hunger and homelessness are intertwined and ignore barriers such as age, sex, race or religious belief. In particular, this year natural disasters affected not only the Gulf Coast states, but people nationwide, as our cities opened their arms to provide food, shelter, and care to victims of hurricanes Katrina and Rita.

We are pleased to submit this report, which provides an up-to-date snapshot of those most in need in our country, as well as the steps our nation’s mayors are taking to end hunger and homelessness. America’s mayors are committed to ending homelessness in our country within the next decade. We commit to working with our local community leaders and with our state and federal partners to end the national disgrace of hunger and homelessness in the richest nation on earth, and to providing all of our citizens with the dignity of food and shelter.

Sincerely,

Paul D. Pate      Gavin Newsom
Mayor        Mayor
City of Cedar Rapids     City of San Francisco
www.cedar-rapids.org      www.sfgov.org
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Summary

To assess the status of hunger and homelessness in America’s cities during 2005, The U.S. Conference of Mayors surveyed 24 major cities whose mayors were members of its Task Force on Hunger and Homelessness. The survey sought information and estimates from each city on 1) the demand for emergency food assistance and emergency shelter and the capacity of local agencies to meet that demand; 2) the causes of hunger and homelessness and the demographics of the populations experiencing these problems; 3) exemplary programs or efforts in the cities to respond to hunger and homelessness; 4) the availability of affordable housing for low income people; and 5) the outlook for the future and the impact of the economy on hunger and homelessness.

Among the findings of the 24-city survey:

HUNGER

- Officials in the survey cities estimate that during the past year requests for emergency food assistance increased by an average of 12 percent, with 76 percent of the cities registering an increase. Requests for food assistance by families with children increased by an average of 7 percent. Requests for emergency food assistance by elderly persons increased by an average of 13 percent during the last year, with 76 percent of the cities reporting an increase.

- On average, 18 percent of the requests for emergency food assistance are estimated to have gone unmet during the last year. For families alone, 18 percent of the requests for assistance are estimated to have gone unmet. In 43 percent of the cities, emergency food assistance facilities may have to turn away people in need due to lack of resources.

- Fifty-four percent of the people requesting emergency food assistance were members of families - children and their parents. Forty percent of the adults requesting food assistance were employed.

- The overall level of resources available to emergency food assistance facilities increased by 7 percent during the last year in the cities registering an increase. Forty-eight percent of the survey cities reported that emergency food assistance facilities are able to provide an adequate quantity of food. Eighty-three percent of the cities’ emergency food assistance facilities have had to decrease the number of bags of food provided and/or the number of times people can receive food. Of these cities, 63 percent have had to increase the limit of food provided. Eighty-three of the survey cities reported that the food provided is nutritionally balanced.

- In 87 percent of the cities, families and individuals relied on emergency food assistance facilities both in emergencies and as a steady source of food over long periods of time.

- Unemployment and other employment-related problems lead the list of causes of hunger identified by the city officials. Other cited, in order of frequency, include high housing costs,
poverty or lack of income, medical or health costs, mental health problems, substance abuse, transportation costs, high childcare costs, lack of education, and utility costs.

**HOMELESSNESS**

- During the past year, requests for emergency shelter increased in the survey cities by an average of 6 percent, with 71 percent of the cities registering an increase. Requests for shelter by homeless families alone increased by 5 percent, with 63 percent of the cities reporting an increase.

- An average of 14 percent of the requests for emergency shelter by homeless people overall and 32 percent of the requests by homeless families alone are estimated to have gone unmet during the last year. In 88 percent of the cities, emergency shelters may have to turn away homeless families due to lack of resources; in 79 percent they may also have to turn away other homeless people.

- People remain homeless an average of seven months in the survey cities. Eighty-seven percent of the cities said that the length of time people were homeless increased during the last year.

- Lack of affordable housing leads the list of causes of homelessness identified by the city officials. Other causes cited, in order of frequency include low-paying jobs, mental illness and the lack of needed services, substance abuse and the lack of needed services, domestic violence, unemployment, poverty, and prisoner re-entry.

- An average of 22 percent of homeless people in the cities are considered mentally ill; 30 percent are substance abusers; 15 percent are employed; and 11 percent are veterans.

- In 57 percent of the cities, families may have to break up in order to be sheltered. In 48 percent of the cities families may have to spend their daytime hours outside of the shelter they use at night.

- Requests for assisted housing by low-income families and individuals increased in 86 percent of the cities during the last year.

**IMPACT OF HURRICANES KATRINA AND RITA**

- Survey cities say that evacuees from Hurricanes Katrina and Rita have not had a significant strain on their resources, but are concerned that a lack of federal commitment to the evacuees, many of whom may continue to reside in their communities, may eventually reduce resources devoted to the hungry and homeless.
• Although it is difficult to say how much, survey cities believe that the impact of Hurricanes and Rita will be felt by them in 2006, as evacuees staying in their communities continue to need social services, food, and housing.

• Survey cities say that the federal government’s policy for the evacuees from Hurricanes Katrina and Rita should be extended to homeless people, especially making housing available within a relatively short time, and eliminating red tape for other social services.

THE OUTLOOK

• Officials in 90 percent of the responding cities expect requests for emergency food assistance to increase during 2006. Eighty-six percent expect that requests for emergency food assistance by families with children will increase during 2006. Officials in 93 percent of the cities expect that requests for emergency shelter will increase next year. Ninety-five percent expect that requests by homeless families will increase.
Introduction

In October 1982, The U.S. Conference of Mayors and The U.S. Conference of City Human Services Officials brought the shortage of emergency services -- food, shelter, medical care, income assistance, energy assistance to national attention through a 55-city survey. That survey showed that the demand for emergency services had increased in cities across the nation, and that on average only 43 percent of that demand was being met. Since that time the Conference has done numerous reports on hunger, homelessness and poverty in cities. These reports have documented the causes and the magnitude of the problems, how cities were responding to them and what national responses were required. They include:

- Hunger in American Cities, June, 1983
- Responses to Urban Hunger, October, 1983
- Homelessness in America's Cities: Ten Case Studies, June, 1984
- Housing Needs and Conditions in America's Cities, June, 1984
- The Urban Poor and the Economic Recovery, September, 1984
- The Status of Hunger in Cities, April, 1985
- Health Care for the Homeless: A 40-City Review, April 1985
- Responding to Homelessness in America's Cities, June 1986
- Local Responses to the Needs of Homeless Mentally Ill Persons, May, 1987
- Partnerships for Affordable Housing an Annotated Listing of City Programs, September, 1989
- A City Assessment of the 1990 Shelter and Street Night count. A 21-City Survey, June 1991
- Mentally Ill and Homeless. A 22-City Survey, November 1991
- Addressing Hunger and Homelessness in America's Cities, June 1993
To spearhead the Conference's efforts to respond to the emergency services crisis in cities, the President of The Conference of Mayors appointed 20 mayors to a Task Force on Hunger and Homelessness in September, 1983. That Task Force was chaired by New Orleans Mayor Ernest "Dutch" Morial. It is now co-chaired by Cedar Rapids Mayor Paul Pate and San Francisco Mayor Gavin Newsom and has 24 members.

Methodology

This report provides information on the current status of hunger, homelessness and the conditions which have affected them in the 24 cities whose mayors serve on the Task Force. A copy of the survey instrument sent to the cities is contained in the Appendix.

To respond to the survey, the city officials consult with and collect data from community-based provider and government agencies. The data is compiled by the individual or agency in the city government designated to be the Conference of Mayors' contact for the survey and it is reviewed by a senior-level manager before it is submitted to the Conference of Mayors.

The data was collected from the cities for the period of November 1, 2004 to October 31, 2005 during November and December, 2005. It was supplemented with data on population, poverty and unemployment available from the Bureau of the Census and the Bureau of Labor Statistics. The reader should note that in no case do the percentages reported for a survey question include a city unable to respond to that question. In a few instances percentages do not total 100 due to rounding. Tables, which provide city-specific data, appear at the back of chapters on Hunger, Homelessness and Housing.
Hunger

The Problem

Emergency Food Assistance Requests

During the last year, requests for emergency food assistance increased in 77 percent of the survey cities. Across the cities, request increased by an average of 12 percent. Increases ranged from 35 percent in Charleston, 30 percent in Detroit, 28 percent in Miami, 25 percent in Los Angeles, 15 percent in Philadelphia, 14 percent in Denver, 9 percent in Cedar Rapids, 8 percent in San Francisco, and 4 percent in Santa Monica. Requests decreased in Burlington and Seattle, but remained the same in Charlotte, Chicago and Cleveland.

Among the comments from the city officials on requests for emergency food assistance:

**Boston:** Data comes from the Greater Boston Food Bank, which receives monthly service reports from 234 sites in Boston including 93 food pantries, 17 soup kitchens, 40 shelters for homeless people, 27 permanent supportive housing programs, 4 Brown Bag programs and 31 Perishables programs (distribution of fresh foods at Boston Housing Authority sites). All 234 program sponsors submit monthly reports detailing the number of meals served and people assisted.

**Burlington:** The decline is attributable to more stringent sign-in requirements for the grocery distribution system at the Food Shelf.

**Cedar Rapids:** The number of meals served at reporting local meal sites increased by 9 percent. FY05 Linn County Homeless Data Summary Report and numbers reported to HACAP by food pantries also increased.

**Charleston:** The total number of requests for emergency food assistance has increased by approximately 35 percent based on monthly meal reports submitted by member agencies of the Low-country Food Bank.

**Chicago:** The Greater Chicago Food Depository reports the total number of requests for emergency food in Chicago fluctuated only by 1-2 percent between last year and this year, indicating that requests for emergency food in Chicago have neither increased or decreased significantly.
Cleveland: The demand for emergency food assistance has not changed significantly over the past year. It remains at about 22 percent higher than the level of requests in 2001, prior to the recession. In spite of a reported improving economy at the national level, local employment has not experienced a recovery.

Denver: Agencies indicate that they have seen an across the board increase in the number of requests they receive daily for food assistance. One day shelter in particular serving women and children indicated that food assistance is requested in over fifty percent of their daily intakes. Providers have attempted to expand their hours to meet the increased need.

Detroit: Detroit has a Community Food Bank organization, and based on the demands placed on that food bank has shown an increase in the numbers.

Louisville: Working poor, unemployed, multi-generational, single and traditional parent families have to make difficult decisions as to whether to pay for utilities, rent medicine, gas health or car insurance. Food is being pushed further down the list of priorities. Nutritional value is totally lost to fast food becoming more economical.

Miami: Emergency Food Providers in our city saw about a 28 percent increase. Due to the impact of so many storms in our City, many people have been forced out of their homes, causing them to seek temporary shelter and supplies, including food.

Nashville: Average 10 percent increase. Reasons cited included hurricane relief, high utility and gasoline costs.

Philadelphia: We conducted a survey of 120 food cupboards in November. The contributing reasons for the increase in requests for emergency food assistance were identified as: low paying jobs, unemployment and other employment-related problems, high housing cost, changes in the food stamp program, poverty or lack of income, economic downturn or weakening of the economy, utility costs, welfare reform, medical or health costs, mental health problems, and lack of access to supermarkets (heavy reliance on corner stores). Families’ income from all sources: retirement, welfare, and/or employment is not keeping up with the increase in their expenses, especially all fuel related items.

Phoenix: Requests for food assistance in the metropolitan area have increased by 9 percent this past year over the same time period the previous year. Increases are based on reports from Desert Mission Food Bank, St. Mary's/Westside Food Bank Alliance and United Food Bank, which is regional food bank warehouses based in the metropolitan Phoenix area and serve approximately 815 agencies.

Portland: According to Oregon Food Bank, food pantries in Portland distributed 6 percent more emergency food boxes than they did last year. Emergency meals provided by churches and agencies have actually decreased by 2 percent.

Providence: The response is based data from the Rhode Island Food Bank.

Salt Lake City: For 2003-04, the Utah Food Bank received 1,395,198 requests for emergency food assistance and for 2004-05 the Food Bank received 1,485,279 requests.

San Antonio: In FY 2005, the San Antonio Food Bank distributed 25 million pounds of food, compared to FY 2004 when the Food Bank distributed 22.9 pounds of food.

San Francisco: The increase is the average across all programs during the period.
Santa Monica: This reflects the increase in numbers of people coming to food pantries in Santa Monica.

Seattle: The total number of requests for food bank and meal programs varies from month-to-month. The 8 percent decrease was reported by food banks and is based on data from programs receiving City funds. Meal programs remained the same.

Emergency Food Assistance Requests by Families

The number of families with children requesting emergency food assistance increased in 58 percent of the survey cities. Across the cities the average estimated increase was 7 percent. Increases ranged from 38 percent in San Antonio, 30 percent in Detroit, 28 percent in Los Angeles, 25 percent in Miami and Providence, 19 percent in Philadelphia, 10 percent in Nashville, 6 percent in Portland and 4 percent in Santa Monica. The requests remained the same in Boston, Burlington, Cedar Rapids, Charlotte, Chicago, Cleveland and San Francisco. There was a decrease in Seattle.

Among the comments from the city officials on the number of families with children requesting emergency food assistance:

Cedar Rapids: Families requesting assistance are larger in number than in the past.

Charleston: The total number of requests for emergency food assistance by families with children has increased by approximately 30 percent based on monthly meal reports submitted by member agencies of the Low-country Food Bank.

Chicago: The number of households, including families with children requesting food assistance from food pantries citywide has remained constant.

Denver: Agencies indicate a dramatic increase in both the number of families as well as the number of larger families (four to eight members).

Detroit: The raising cost of housing and other basic living essentials has caused families to spend more money towards housing & utilities, which reserves less for food, therefore they have chosen to use food emergency programs to offset what they no longer can afford to purchase in grocery stores.

Louisville: Distribution of baby formula and diapers has increased. Several area hospital discharge new mothers with a referral to Dare-To-Care Food Bank. Local WIC programs routinely refer clients for additional assistance.

Miami: Agencies report serving families displaced by the storms that have affected our city this past year.

Nashville: Second Harvest the largest provider, reports an increase of 6 percent. ("Utilize a data collection tool that we can download data at the end of every day from all 15 sites that can give us how many people we have served, ages and the number of times that have used our services. This is how we are able to report to United Way, MDHA and any other donor and the community on our program and the service we provide").

Philadelphia: Families, two parent or single parent households, are facing reductions in the number of hours they work and a loss of health care benefits. These losses greatly impact their already limited
amount of resources. Other family members, who were able to help them in the past, are having their own difficulties paying their bills. The choices families are forced to make are almost impossible – feed my children, take them to the doctor and pay for their prescriptions, or keep a roof over their heads. Food is one of the resources that families can access without a lot of difficulty. The food cupboard system was created to help families when they experienced a crisis. Unfortunately, with the current economy the food cupboards are a maintenance program for many families.

**Portland:** According to OFB’s 2005 Hunger Factors Assessment, 38 percent of those receiving emergency food boxes are children under the age of 17, and 51 percent of all households are households with children.

**Providence:** The response is based on data from the Rhode Island Food Bank.

**San Antonio:** Results are based on survey responses from the San Antonio Food Bank and other responding food assistance agencies. The Catholic Worker House, for example, reports that in 2005 the number of families served by its program tripled over 2004.

**Santa Monica:** This reflects the increase in numbers of people coming to food pantries in Santa Monica.

**Seattle:** Of the individuals served by food banks, slightly more than 26 percent are children between the ages of 0 – 18 years of age.

### The People Requesting Food Assistance

Across the survey cities it is estimated that 54 percent of those requesting emergency food assistance were either children or their parents. In Charleston, Charlotte, Philadelphia, Phoenix, and Salt Lake City two thirds or more of those requesting food assistance were members of families with children.
Officials in the survey cities reported that 40 percent of adults requesting emergency food assistance were employed. The percentage of employed adults requesting food assistance ranged from 69 percent in Charleston, 58 percent in Cedar Rapids, 50 percent in Nashville, 45 percent in Santa Monica, 43 percent in Portland, 38 percent in Detroit, 21 percent in Denver, and 17 percent in San Francisco.

Emergency Food Assistance Requests by the Elderly

The number of elderly persons requesting emergency food assistance increased in 76 percent of the survey cities. The number remained the same in Burlington, Cedar Rapids, Phoenix, and Trenton. There was a decrease in Seattle.

Across the cities reporting increases, requests for emergency food assistance by elderly persons increased by 13 percent. Increases ranged from 48 percent in Denver, 47 percent in San Antonio, 30 percent in Detroit, 24 percent in Louisville, 22 percent in Los Angeles, 10 percent in Salt Lake City, 9 percent in Boston, and one percent in Cleveland.

Among the comments from the city officials on the number of elderly persons requesting emergency food assistance:

**Boston:** The Greater Boston Food Bank reports that the percentage of elders requesting food assistance has increased by 9 percent. The Boston Elderly Commission provides free meals to 4,167 Boston elders.

**Cedar Rapids:** Some of the rural pantries specialize in service to the elderly. In town, the elderly are linked to other services such as Meals on Wheels and Senior Dining Programs.

**Charleston:** Member agencies of the Low-country Food Bank report that 23 percent of the total population of those requesting emergency food assistance are senior citizens.

**Chicago:** This response is reflective of data collected from the Chicago Department of Human Services Community Service Centers.

**Cleveland:** Medical co-payment and prescription drug cost burdens have continued to increase.

**Denver:** Agencies indicated that the elderly (fifty-five and over) have increased their demand for food and meal assistance dramatically over the past year.

**Detroit:** Due to the raising cost in medical prescription coverage, elderly persons have found themselves making a choice between medication and food.

**Louisville:** The number of seniors has increased proportionally with Medicare and Medicaid financial cuts. Also involved is the increased financial obligations for this “fixed income” population, particularly higher utility costs, higher medication costs, and the added expense of Rx supplemental insurance. Program cuts in Adult Daycare and Home Health Care have brought a new segment of the senior population to the forefront, the Homebound Senior. The vast majority of families requesting emergency food assistance are multi-generational.
Miami: The Salvation Army & Camillus House Shelters report that the number of elderly requesting assistance has increased by 10 percent.

Nashville: Second Harvest: "We are seeing more grandparents with the responsibility of raising their grandchildren mostly because of drug abuse and parents being unable to raise their children or because of parents being incarcerated. They are on limited income themselves and now have grandchildren to raise. As the baby boomers age, we will be seeing more persons in need of food assistance."

Philadelphia: According to a survey we conducted of 120 food cupboards, there has been a significant increase in elderly persons requesting food assistance. Elderly persons living on a fixed income are unable to cope with the rising cost of goods and services. In addition, many elderly persons are taking care of their grandchildren, while not receiving any additional resources for this care.

Phoenix: More than 14 percent of those served by food banks in the metropolitan area along with the agencies they serve, are elderly. More than half, 56 percent of households seeking emergency assistance with elderly members are found to be food insecure, a number significantly higher than the rate of food insecurity of senior households in the general population (1.8 percent).

Portland: We can’t extrapolate this number from our statistics. We show a clear increase in the participation numbers for programs catering to seniors, such as Meals on Wheels, Loaves and Fishes and other programs. However, it is unclear whether these increased numbers are the result of increase hunger or a change in reporting.

Providence: Our response is based data from the Rhode Island Food Bank.

San Antonio: Almost 60 percent of the responding agencies reported an increase in food assistance requests from the elderly. The San Antonio Food Bank reports that its Project HOPE Program, which provides senior citizens living on a fixed income with supplemental staple groceries, increased enrollment by 68 percent in 2005.

Seattle: On the average, 29 percent of persons served by food banks are seniors 55 years of age or older.

Trenton: According to Mt. Carmel Guild they do not track by age but seniors do avail themselves to their food pantry.
Causes of Hunger

Officials in the survey cities say hunger is due to a member of factors, many of them are interrelated. Those most frequently identified by the survey cities in response to the survey’s open-ended question are unemployment and other employment-related problems, high housing costs, poverty or lack of income, medical of health costs, mental health problems, substance abuse, transportation costs, high childcare costs, lack of education, and utility costs.

- Twenty-one cities cited unemployment and other employment-related problems: Boston, Burlington, Cedar Rapids, Charleston, Charlotte, Chicago, Cleveland, Denver, Detroit, Louisville, Los Angeles, Miami, Nashville, Phoenix, Portland, Providence, Salt Lake City, San Antonio, Santa Monica, Seattle and Trenton.

- Sixteen cities identified high housing costs: Boston, Burlington, Cedar Rapids, Charlotte, Chicago, Los Angeles, Nashville, Phoenix, San Francisco, Santa Monica and Trenton.

- Eleven cities cited poverty or lack of income: Boston, Burlington, Cedar Rapids, Charlotte, Chicago, Los Angeles, Nashville, Phoenix, San Francisco, Santa Monica and Trenton.

- Nine cities identified medical or health costs: Boston, Cedar Rapids, Cleveland, Detroit, Louisville, Nashville, Phoenix, Portland and Salt Lake City.


- Four cities cited substance abuse: Denver, Nashville, Phoenix and Trenton.

- Four cities cited transportation costs: Cedar Rapids, Detroit, Louisville and Salt Lake City.

Los Angeles, Portland and San Antonio cited childcare costs; Nashville, San Antonio and Trenton identified lack of education; and Cedar Rapids, Denver and Louisville cited utility costs.

Capacity to Meet the Need

Emergency Food Assistance Facilities

During the last year, the number of emergency food assistance facilities increased in 32 percent of the survey cities. The increase occurred in Cedar Rapids, Charlotte, Chicago, Los Angeles, Louisville, Philadelphia, Portland and San Antonio.

Among the comments from the city officials on the number of emergency food assistance facilities:

Cedar Rapids: Faith-based organizations are adding food pantries as part of their mission. There was no change in the number of meal sites.
Charleston: Charleston has not seen any new emergency food assistance facilities constructed in the last year.

Charlotte: The total number of food pantries has risen from 44 to 53 this year.

Chicago: The Chicago Anti-Hunger Federation reports enrolling 5 new food assistance facilities and 2 daycare centers to their emergency food program.

Denver: Agencies are expressing frustration that the total number of food assistance providers has not increased even though need is increasing significantly.

Detroit: Some many agencies are mostly staffed by volunteers, and some of volunteers are elderly, which affects longer liability programs.

Louisville: The Dare To Care Food Bank has increased its Kids Cafe to offer meals at 19 sites and expanded the “Back-Pack Buddies” Program into seven schools. While the St. Boniface emergency food distribution center closed because over 400 units of the neighboring Clarksdale Public Housing Development were demolished, the resulting re-distribution of Clarksdale residents warranted a re-districting of the South Louisville Community where many moved, as well as the development of an additional Distribution Center at Temple of Faith. Distribution of food at previously existing agencies increased 35 percent, while utilization at the new agencies, pantries, on-site feeding programs, after school programs and neighborhood-based organizations was up 18 percent.

Nashville: Although Second Harvest added one food box distribution site, the number of facilities remained the same.

Philadelphia: We received about 10 to 15 requests from community groups that are interested and willing to become food cupboards. Their requests are always sparked by families coming to these organizations looking for assistance with food. They want to respond to this community need.

Phoenix: As regional food bank warehouses become more efficient at servicing agencies and more agencies are directed to food banks to get food, it would appear that the number of facilities is increasing but the Association of Arizona Food Banks and its member food banks are actually doing a better job of reaching agencies with information and programs to serve hungry people.

Portland: Two pantries and a mobile soup kitchen were added this year.

Providence: There is no new capacity.

San Antonio: In FY 2004 San Antonio Food Bank had 329 partner agencies; in 2005 there are 398.

Seattle: The number of city-funded food banks remains the same. The number of city-funded programs serving meals increased by one program.

Trenton: Catholic Charities reported that they continue to provide emergency food assistance. Food clients continue to be referred to other facilities when appropriate. Mt. Carmel Guild reported there may be more smaller church operated food pantries available.
Level of Resources Available to Emergency Food Assistance Facilities

During the last year, the level of resources such as food and/or volunteers available to emergency food assistance facilities increased by 7 percent in the cities reporting increases. The level of resources increased in 39 percent of the cities, decreased in 35 percent of the cities and remained the same in 26 percent.

Among the comments from the city officials on the level of resources available:

**Boston**: There is no comprehensive tracking for this information. Anecdotal information provided to the Greater Boston Food Bank suggests a decrease.

**Cedar Rapids**: "Food donations have remained steady. Volunteer and cash resources have declined slightly. The impact of Katrina on ‘donor fatigue’ is unknown."

**Charleston**: The level of resources on average has increased by 19 percent. Volunteer hours have increased by 35 percent. Funds have increased by 25 percent (Funding goes towards programs like the Growing Food Locally, an initiative to increase the percentage of perishable and nutritious food from 9-25 percent of hunger organization's total inventory.

**Chicago**: Emergency food resources in Chicago, in terms of the volume of food distributed, facilities and volunteer hours have remained the same. However, the availability of funding from government sources has decreased somewhat from last year.

**Cleveland**: Government funding sources have had minimal change. Private contributions since the Katrina hurricane have been significantly lower. It is too early to know when or if contributions will return to previous levels.

**Denver**: Agencies are expressing innovative ways to address the increased needs by contacting area grocers to get more food items donated and by increasing the number of volunteers that are able to assist with procurement and distribution.

**Detroit**: A lot of resources (funding and food) have been diverted to disaster relief efforts, however, volunteers are stable.
Louisville: The loss and relocation of corporate sponsors from this area has had an impact. The economic inability of remaining corporate sponsors to absorb all the needs of the community makes the pursuit of sponsorship a challenge for a non-profit organization. Donations from the private sector are down and second to national and international disasters.

Miami: We are waiting for FEMA's response for our request for financial reimbursement.

Nashville: Resources have decreased. Food donations have been declining for the past few years for various reasons: staffing responsibilities, companies making fewer mistakes and looking closer to bottom line than charitable giving. We continue to do many food drives but receive fewer products. Community Care Fellowship: "Our donor base is the same but due to the catastrophe of Katrina we have discovered that our donors and others gave money to help those who were disenfranchised and are not giving to us and other non profits at this time".

Philadelphia: There has been a 17 percent increase in volunteers- families are looking for ways to help the economically disadvantaged. There has also been an increase of 25 percent in food donations from food drives organized by corporations. Monetary donations have decreased by 20 percent. Even though we have experienced an increase in volunteers and in food donations, they are still not meeting demand.

Phoenix: Over the last year regional food banks in the metropolitan area and the agencies they serve have not seen a dramatic increase or decrease in resources. There have however been shifts in resources due to disaster relief efforts, both locally and outside the state. Forty-nine percent of food pantries and 45 percent of soup kitchens are faith-based organizations affiliated with churches, synagogues, mosques and other religious entities. More than 90 percent of food pantries and soup kitchens rely on volunteers for food distributions to the needy. Many programs rely entirely on volunteers for their work, 44 percent of pantries and 61 percent of soup kitchens have no paid staff at all.

Portland: Oregon Food Bank (OFB) has seen a slow but steady decline in the percentage of USDA food in the system this year. Last year USDA made up 17 percent of the food distributed by OFB, this year that percentage is down to 15 percent of the total distributed. There has been a remarkable surge in volunteers. Volunteers donated more than 88,793 hours of their time in 2004-2005 an increase of 26 percent over the previous year.

Providence: Federal cuts account for our response.

San Antonio: San Antonio Food Bank reported an 8 percent increase in food donations in FY 2005 over FY 2004.

Seattle: The meal programs network saw an increase in over $75,000 to operate a designated outdoor meal site in Seattle. It appears that food banks also saw an increase in the number of reported volunteer hours while there was a decreasing trend in the poundage of food and essential non-food grocery items distributed at food banks. It appears that meal programs in general have received a slight increase in food donations as well.

Trenton: According to Catholic Charities they received similar funding as in the previous reporting period. Due to increases in emergency food assistance the agency has supplemented its resources with donations when available.
Eighty-seven percent of the survey cities reported that emergency food assistance facilities were used both for emergencies and as a steady source of food over long periods of time.

Among the comments from the city officials on the use of emergency food assistance facilities:

**Boston:** A little of both but primarily for emergencies. As the cost of living in Boston increases, the assistance needed increases to longer periods of time.

**Cedar Rapids:** Some pantries limit the number of times a person can seek assistance.

**Charleston:** Local food banks and Soup Kitchens report that new people are asking for assistance as well as a steady percentage of repeat clients.

**Charlotte:** Charlotte has pantries that serve only in emergency situations (i.e. every 60 days), and also pantries that serve the same low income families on a continuous basis.

**Chicago:** Two major partners in providing emergency food assistance in Chicago, the Greater Chicago Food Depository and the Anti-Hunger Federation both report providing emergency food on an interim and long-term basis.

**Denver:** Respondent Denver agencies report that many individuals, especially the elderly consumers, use their services as an ongoing monthly supplement to their food budget. The trend with families is to utilize food assistance to stay housed by using household income for rent and utilities.

**Detroit:** We have a chronic under employment, which causes persons to depend on churches and non-profits for emergency food assistance.

**Louisville:** Assist for 1-7 days sustenance up to 4 times a year per family. The utilization of USDA/TEFAP Commodities is the first choice of food and nutritional assistance.

**Nashville:** Although the food box programs (such as that run by Second Harvest) are for emergencies only, soup kitchens in Nashville serve lunch and sometimes dinner year-round and are a steady source of food. Second Harvest (emergency only is seeing about 800 new clients a month that have never used our services before. Community Care Fellowship is surrounded by two food banks sponsored by Second Harvest Food Bank; (Martha O’Bryan and East Nashville Cooperative Ministry). We help those who have hit rock bottom and cannot get a food box from these two ministries. We will help because there are children in the home.
Philadelphia: Food cupboards are no longer used only during emergencies. Families in need are increasingly turning to them on a regular basis. In a survey of 120 cupboards, 3 percent of their clients are in need of food assistance due to an emergency situation, while 97 percent of their clients return monthly for assistance. Families are increasingly relying on the food cupboard system. This reliance allows them to use their limited monetary resources for other household expenses.

Portland: Although the vast majority of households only access emergency food assistance in times of serious need, the rise in low paying jobs coupled with increased rent and energy costs have forced some to include the emergency food box as part of their monthly food planning.
Salt Lake City: More and more working poor are receiving a substantial portion of their food from food pantries.

San Antonio: Some programs, such as Project HOPE (Healthy Options Program for the Elderly), Kids Cafe after school programs, and the Food Stamp and Nutrition Education Program aim for long term support. Food Pantries, Soup Kitchens, and Shelters provide emergency food.

Santa Monica: Chronic food insecurity has forced many families to rely on supplementary food from pantries for extended time periods.

Seattle: Many of the food banks are able to provide enough food to feed a family or individual for one or two days per week. Often times, families must make a choice between paying rent, mortgage, medical, child care, or using the food bank in such emergency situations. Food banks and meal programs are necessary for families to help make ends meet. For many homeless clients, the meals are their only source of sustenance.

Trenton: According to Catholic Charities they provide emergency food assistance to individuals and families three times per week. Clients can only receive assistance once a month. Mt. Carmel Guild reported that there is a population that finds it necessary to come for food on a regular basis.

The Quantity of Food Provided

Forty-eight percent of the cities reported that emergency food assistance programs are able to provide an adequate quantity of food; 52 percent of the cities said they are not.

Among the city officials’ comments:

Boston: Due to increased requests for emergency food assistance, the quantity and frequency of distribution per household has decreased.

Cedar Rapids: Many pantries limit the number of items or the amount a person can receive. They generally don’t offer fruits and vegetables or fresh meat.

Charleston: During the past five years, local agencies have undergone extraordinary growth to better meet the need in our community. The annual distribution has grown from less than one million pounds of food for approximately 100 agencies to 10.3 million pounds of food distributed for a network of more than 400 nonprofits and faith based organizations serving hungry families, children and elderly in 2004.
Chicago: The Greater Chicago Food Depository (GCFD) and other emergency food pantries in Chicago have an adequate supply of high-quality nutritious food to meet the need. GCFD has further expanded food distribution channels this year and hired a registered dietician/nutritionist to guide acquisition and distribution of healthful foods and to help educate Chicago communities.

Cleveland: Two years ago, the number of meals put in the food pantry bags was reduced from 4 days (12 meals) to 3 days. This has not been restored. Many families need more assistance.

Denver: Agencies report that the restrictions placed on food pantry usage as well as the schedules needed to dispense hot meals severely limit the quantity of food available to consumers. All respondents indicated that their consumers utilize both prepared meals/food stuffs.

Detroit: The demand surpasses the supply, which is largely due to diverted funding to relief efforts.

Louisville: The concept of a “Meal Box” has replaced the “Food Box”. The contents are structured to provide the makings for complete meals. The emergency food is designed for nutritional support and as a buffer for hunger relief. Family sizes have increased, with the clustering of multiple family units into a single dwelling.

Nashville: Second Harvest: Yes, in most cases. The food bank not only distributes non perishable food items that are donated, but also some perishable products through Nashville’s Table (orange juice, yogurt, milk, bread) but we also produce our own food on site through a program called Project Preserve and we also participate in a co-op program. If we do not have donated items to provide for this program than we purchase food. Community Care Fellowship give them canned vegetables, tuna fish, beef stew, soups, bread, peanut butter and jelly, spam, and canned fruit. If their food stamps have run out by the end of the month we feel that a box of food will sustain them until they get their next food stamps.

Philadelphia: In a survey we just completed in November 2005, food cupboard coordinators said they will do almost anything to provide families with some food when they come to the cupboards for assistance: they reduce the amount of food they give to a family; they spend money out of their own pockets to purchase food; and/or they depend on family and friends to make food donations to their cupboards. The cupboard coordinators in Philadelphia are a very committed group of individuals. They are unwilling to send families away from their cupboards without receiving some food.

Phoenix: Forty-three percent of pantries and 69 percent of kitchens never experienced the need to stretch food resources (reduce meal portions or reduce the quantity of food in food boxes) because of a shortage of food available to be distributed.

Portland: Emergency food assistance is not adequate to meet the need. Pantries try to provide a 3-5 day supply of food, and most limit assistance to one per household each month.
**Providence:** Our food assistance provided only the basics.

**Salt Lake City:** All requests for emergency food assistance have been met.

**San Antonio:** In Bexar County there are about 375,000 people potentially eligible for the Food Stamp Program. The National Food Bank trends predict clients on the Food Stamp Program will access emergency food four times a year. On average a person receives 107.52 pounds of food in one year. To meet these trends in Bexar County, it is projected 40 million pounds of food would be necessary to meet the need. In FY 2005 the San Antonio Food Bank distributed 25 million pounds of food.

**San Francisco:** We distribute a three day supply of food.

**Santa Monica:** Food assistance is falling short of current requests by about 15 percent.

**Seattle:** Meal programs and food banks make a real effort to cook a meal or create a food box or grocery bag of food that can be used to prepare nutritionally-balanced meals. The meal programs and food banks in the City of Seattle combine funds to make bulk purchases of nutritious foods that, alone, would not be able to purchase using their own financial resources.

**Trenton:** If any one facility could provide an adequate quantity of food it wouldn't be necessary for people to use more than one pantry a month.

Eighty-three percent of the survey cities report that emergency food assistance facilities have had to decrease the quantity of food provided and/or the number of times families or individuals can come to get food.

Among the comments of city officials:

**Cedar Rapids:** The numbers increase, but donations remain the same.

**Charleston:** The amount of food has decreased from 9,129,562 pounds to 8,271,207 pounds this year.

**Chicago:** Due to decreases in government funding of emergency food programs and the ever-increasing need for emergency food based upon local economic conditions, local food banks have rationed the quantity of food given to individuals and families.

**Denver:** Agencies cite staff and volunteer availability as deterants to food assistance provision along with the availability of food itself.

**Detroit:** Only some agencies have limited the number of times families can be distributed food.

**Los Angeles:** Although the average number of emergency food assistance facilities responding to this question stated they did not have to decrease the quantity of food provided, about a third of the agencies stated that they not only had to decrease the quantity of food but they also had to limit the number of times families had to get food.
Louisville: The number of times has not been adjusted. However, the number of items has been revised as a means to keep pace with the increased number of families and the decreased amount of food available in the emergency food resource network.

Nashville: Community Care Fellowship: "We do have a policy of giving them that one box of food at the end of the month. If they come back the first of the month we do not provide them with a box of food". Samaritan Ministry: "Sometimes smaller portions of food are served to our clients and seconds are not possible to give." The Salvation Army: “Yes, Second Harvest requires we restrict to 3 times in a 6-mo period or 6 times annually”.

Philadelphia: The food cupboard coordinators decrease the amount of food they give to families instead of turning them away.

Phoenix: Thirty-six percent of the pantries and 24 percent of the kitchens stated that they turned away clients but the reasons for turning away clients vary. Thirty-two percent of the pantries and 51 percent of the kitchens turned away clients at least once due to lack of food resources. Some turned away clients at least once because the clients were ineligible or could not prove eligibility. Forty-seven percent of the pantries and 20 percent of the kitchens turned away clients at least once because the clients misused the program or because they came too often.

Portland: Reports from pantries indicate that both strategies are being employed. Agencies are also open shorter hours and days of the week.

Providence: There is not enough food from RI food bank and donors to go around.

Salt Lake City: The community has stepped up to increase the amount of food donated to the Food Bank.

San Antonio: Agencies, like the Hispanic Religious Partnership for Community Health, report that they have limited the number of individuals it could serve because of a lack of resources.

Santa Monica: Most pantries will give less to each family to try to serve an increasing number of applicants.

Seattle: Food bank consumers who go to a food bank outside their zip code area are given food items and are asked to visit a food bank where they reside. This is done to ensure that there is enough food for families, especially ones with small children, elderly, and/or persons with disabilities, who reside in that particular neighborhood. Also food bank participants are limited to once a week service.

Trenton: According to Mt. Carmel Guild their agency has had to decrease the amount of food in each package so that they can continue to help the number of households requesting assistance. The Trenton Area Soup Kitchen reported that food pantries stretch to avoid closing before the end of the month
Sixty-eight percent of the cities which had to decrease the quantity of food report that during the last year emergency food assistance facilities have had to increase further the limit on the number of food bags provided and/or decrease further the number of times families and/or individuals can come to get food.

Among the comments of city officials:

**Boston:** We do to make sure there is enough to go around.

**Burlington:** Sign-in requirements for groceries are now more stringent at the Food Shelf.

**Cedar Rapids:** We have more demand and fewer resources.

**Charleston:** Over the past year, the number of people requesting emergency food has increased while the amount of donated food has decreased. In order to provide resources for all who request it, the amount of food given is less.

**Chicago:** Yes, agencies must use discretion in the number of times and the amount of food a client can receive in order to ensure an adequate food supply for all those who are in need.

**Cleveland:** Families can still receive food pantry assistance once a month, but the amount in each bag has been reduced.

**Denver:** Respondent Denver agencies indicate that supply of food (both hot meals as well as food stuffs provided for home preparation) has not kept up with the demand and that generally, limitations on availability have to be enforced.

**Louisville:** The nutritional balance has been compromised slightly in the past, to extend the buffer to hunger as much as possible. New levels have been established and new items have been added to the distribution.

**Nashville:** The Salvation Army: Yes. "When supplies are low, we may have to stretch out the amounts we can give."

**Philadelphia:** The food cupboard coordinators reduce the amount of food in each bag and make other adjustments as necessary in order to provide at least some food assistance to the people that come to their cupboards. It is very stressful for the coordinators to turn people away. The coordinators are always looking for creative ways to meet the increasing need; however, decreasing the amount of food per family is usually the only available option.

**Phoenix:** The majority of agencies did not report changes in guidelines. There have however been isolated agencies that either increased the number of times families could get emergency food assistance or decreased the number of times anyone could access emergency food assistance. These changes were primarily due to demand, but the latter was due to limited resources.

**San Antonio:** Corazon Ministries consistently runs out of emergency food assistance and has referred people elsewhere. They have also requested that their volunteers be more frugal with portion sizes. Other agencies have also reported the need to decrease the frequency they offer food to the community.
Santa Monica: In order to preserve the number of bags provided and maintain frequency of distributions and the number of people served, most pantries have reduced the quantity of food in each bag.

Seattle: Many of the food banks are able to provide enough food to feed a family or individual for one or two days per week. The majority of food banks are now on a “grocery shopping” model where consumers can pick what they like on the food bank line, depending on what is available on any given day.

Trenton: According to Mt. Caramel Guild since there is less food available to give to the growing number of requests, they have had to limit the number of bags and try to encourage those getting food stamps to enroll and those with subsidized housing (lower rents) to limit coming as often as before they were subsidized.

The Quality of Food Provided

Eighty-three percent of the survey cities report that emergency food assistance facilities are able to provide nutritionally balanced food.

Among the city officials’ comments:

Boston: The Greater Boston Food Bank distributes nutrient rich food to all 234 member agencies. The Greater Boston Food Bank also provides regular nutrition education to all emergency food providers.

Burlington: The food is mostly balanced, though some programs have limited proteins and perishables.

Cedar Rapids: No perishable food items (fresh fruits and vegetables) protein items (milk, meat, and eggs) are provided.

Charleston: Agencies work with local farms to increase the amount of fresh produce given to provide nutritionally balanced meals.

Charlotte: A bagging list is compiled by a registered dietician and prorated by family size.

Chicago: Food pantries in Chicago receive a range of fresh and packaged foods to meet the nutritional needs of seniors, adults and children. The Greater Chicago Food Depository, which supplies a vast majority of food banks in Chicago, utilizes a licensed nutritionist to ensure that foods meet nutritional requirements of people in need.

Cleveland: The basic bag meets minimum nutritional guidelines. However, if certain items are not available that month, the nutritional value is compromised.

Denver: Agencies overwhelmingly feel that the food stuffs available for home preparation consist primarily of canned and processed food items and that the availability of fresh fruits, vegetables and a meat product or other type of protein source is lacking.
**Detroit:** One-third of food provided is fresh produce products.

**Los Angeles:** Although most of the food assistance facilities stated that they did provide nutritionally balanced food, it really depended upon the food being donated and several stated that they could not provide food specific for people with diabetes or other special diet requirements.

**Louisville:** The foods provided in the Kids Café, soup kitchens and on-site feeding programs have maintained their high degree of nutritional balance. The sites and programs targeting the homeless have not been adjusted. The seniors’ programs have not been adjusted. The pantry programs of the neighborhoods and churches were the first to be over run by the greatest need and are the weakest nutritional link in our network.

**Miami:** They lack the resources to provide a nutritionally balance meal.

**Nashville:** Generally, yes. However, many providers would love to offer fresh foods and diary products. Second Harvest: "The Farmers Market, Master Gardeners, Produce Companies and Neighborhood Community Gardens could help drastically to provide more nutritious foods".

**Philadelphia:** Providing nutritious food to people in need is a high priority of all of the food cupboards in Philadelphia.

**Phoenix:** "Ninety-five percent of adult emergency food recipients said they were satisfied with the quality of food they received at the local charity. Ninety-four percent said they were either "somewhat satisfied" or "very satisfied" with the amount of food they receive from their local emergency food assistance facility. Ninety-four percent of emergency food recipients said that they felt they were treated with respect "all of the time" or "most of the time" by the staff members or volunteers who distribute food at local agencies.

**Portland:** Oregon Food Bank provides agencies with nutritional guidelines and food assistance providers try to make the contents as nutritionally balanced as possible. However, the network relies heavily on donations for food, making it hard to achieve “nutritional balance.” The system attempts to fill the gaps with food purchases.

**Salt Lake City:** The Food Bank hired a nutritionist who works with agencies and in-house programs to ensure that food is nutritional, as well as providing recipes and healthy ways of preparing the food. She also conducts nutrition education at agency meetings, through newsletters, classes, and one-on-one visits with elderly homebound clients.

**San Antonio:** The San Antonio Food Bank carries a variety of nutritious food, including produce. Additionally, the Food Bank employs two registered dieticians, who regularly teach classes on nutrition, food preparation, and food budgeting. Also, many agencies have a nutritionist on staff.

**San Francisco:** Last year the San Francisco Food Bank distributed 8 million pounds of fresh fruit and produce out of the 20 million total pounds given out.

**Santa Monica:** Santa Monica facilities rely on food purchases rather than on food donations, therefore allowing for greater quality control.

**Seattle:** Food programs make a real effort to provide foods that can be used to prepare nutritionally-balanced meals. The meal programs and food banks combine their funds to increase their buying power.
of specific products that are not seen in the donation stream or are too expensive to purchase on their own. One such example is protein items such as meat, fish, or poultry.

**Trenton:** According to Mt. Carmel Guild, they make every effort to provide nutritional balance food. They have a nutritional counselor who not only meets with those with special medical dietary needs but who has educated the staff. We also request donations with nutrition in mind and purchase items that provide a balanced diet.

## Funding

Approximately 33,975,165 dollars was used by the city governments to support emergency food assistance efforts during the last year.

Cities that used **locally generated funds** to support emergency food assistance efforts:

- Boston 2,469,644
- Los Angeles 2,975,856
- Louisville 51,600
- Nashville 200,000
- Portland 49,000
- San Antonio 3,426,194
- San Francisco 500,000
- Santa Monica 96,145
- Seattle 1,845,076

Cities that used **state grants** to support emergency food assistance efforts:

- Boston 4,366,004
- Philadelphia 3,967,188
- San Francisco 50,000
- Trenton 4,155,000

Cities that used **McKinney Act funds** to support emergency food assistance efforts:

- Cedar Rapids 35,330
- Nashville 152,357
- Providence 241,000
- San Antonio 5,848,783

Cities that used **Community Development Block Grant funds** to support emergency food assistance efforts:
Burlington 9,300
Chicago 1,443,000
Detroit 75,000
Providence 200,000
Salt Lake City 111,468

Cities that used **Community Services Block Grant funds** to support emergency food assistance efforts:

- Boston 340,000
- Chicago 899,566
- San Antonio 120,068

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**Unmet Need**

**Estimated Overall Demand for Emergency Food Assistance Which Goes Unmet**

An average of 18 percent of the demand for emergency food assistance is estimated to have gone unmet in the survey cities in the last year. The unmet need ranges from 43 percent in Louisville, 37 percent in San Antonio, 25 percent in Detroit and Philadelphia, 20 percent in Denver and Trenton, 15 percent in Miami and Providence, 10 percent in Santa Monica, 5 percent in Boston and Burlington, and 4 percent in Nashville.

For families alone an average of 18 percent of the demand for emergency food assistance is estimated to have gone unmet in the cities during the last year. The unmet need ranges from 37 percent in San Antonio, 30 percent in Denver and Louisville, 23 percent in Philadelphia, 15 percent in Santa Monica, 5 percent in Burlington, and 3 percent in Boston.

Among the city’s officials’ comments:

**Boston:** The data is an estimate from Project Bread.

**Burlington:** Some people are too proud to ask for assistance. Some would use assistance more often than the number of visits allowed.

**Charleston:** Soup Kitchens and other mass feeding programs do not report that individuals are turned away when seeking a meal; however, agencies that provide non-perishable food are limiting the amount and frequency of food provided.

**Denver:** Agencies cite insufficient income to provide for both housing and food as the primary cause for our resource.

**Detroit:** This is due to a lack of supply and demand along with the shift of resources to national disasters.
Louisville: This is truly an estimate. The nature of “unmet” is unknown, unreported, undocumented, inconsistent and fluctuating. Logic dictates that all hungry people are not being fed, all are not coming forward, and all are not in the “system” for not only food but other basic needs as well. Taking into account the increased percentage in the multiple ethnic populations of our service area, this estimate is probably much too low! The “unmet need” is like the iceberg … you only see or can imagine the tip of it.

Philadelphia: In order for the food cupboards to meet the increased need, they would need an increase of about 30 percent in food resources.

Phoenix: Some 138,353,737 pounds of food would be needed to meet the needs of those people living at or below 100 percent of Federal Poverty Guidelines - the most at-risk population. An additional 34,369,218 pounds of food would be needed to meet the potential demand for food for the at-risk population of "working poor".

Portland: Oregon Food Bank and its agencies do not measure unmet demand. OFB reports only that portion of need that is met, however temporarily. “Food Insecurity”, however, is measured state-wide. Food Insecurity means that a household cannot meet its food needs without relying on emergency sources of food. The most recent data released November of 2005 indicates that 11.9 percent of Oregon households are food insecure.

San Antonio: Among those providers who responded to the survey the estimated average of unmet demand by families with children was 37 percent. For example, one agency estimates 15 percent of families requesting food assistance at their location do not have their food needs met. The Community Services Block Grant Needs Assessment reports 81 percent of respondents overall require food assistance. When queried about the reasons for the limited resources agency directors cite lack of supply of food donations, inadequate funding to make purchases of food, and inconsistent availability of volunteers to make food deliveries or attend food distribution events.

Santa Monica: Pantries are reporting unmet need.

Seattle: This is not formally tracked by city-funded food banks and meal programs.

People Turned Away

Forty-three percent of the cities report that emergency food assistance facilities may have to turn away in need because of lack of resources; 57 percent report they do not.

Among the comments from the city officials on emergency food assistance facilities having to turn people away:

Boston: Project Bread, a hunger advocacy organization that funds 94 food pantries in Boston, reports that 20 out of 94 pantries reported that they had to sometimes or regularly turn people away in 2004.

Burlington: There are, however, limits on the number of visits per month.
Cedar Rapids: They do this by limiting the number they serve, the hours of service, service areas, and the number of times a person can access the program.

Charleston: Soup Kitchens and other mass feeding programs do not report that individuals are turned away when seeking a meal; however, agencies that provide non-perishable food are limiting the amount and frequency of food provided.

Chicago: Chicago’s network of emergency food providers efficiently utilize available resources. They respond to people in need, by either accommodating requests directly or by referring requests to other emergency food facilities. In addition, the City of Chicago has in place an emergency response food provision system. This system safeguards against depleted food supplies due to unforeseen natural disasters and/or an unexpected increase in requests.

Cleveland: No one is turned away. However, not everyone's needs are able to be fully met. The reduction imposed two years ago on the monthly amount of food available from pantries remains in effect. Single persons without resources can receive food stamps for only 6 months; then they are off the program for 36 months. During that time they must rely on hot meals sites, many of which are only open certain days of the week.

Denver: Agencies cite both a lack of available food resources as well as staffing patterns as reasons why limited access is problematic from time to time. The enforcement of rules is paramount to serve all consumers but the overall need outweighs the supply available.

Detroit: Agencies has been turning away people because of the supply and demand

Los Angeles: Although the majority of the facilities surveyed stated that they did not have to turn people away, about a third stated that they did have to turn people away. Others stated that they provided less food so that they could give to everyone present.

Louisville: The quantity may vary, the nutritional quality may vary, the preferred time and place of service may vary, but no one has been sent from the network without service and or resources.

Miami: The needs in our community are much greater than our resources.

Nashville: "Although several providers said no, others indicated they do have to turn people away: Community Care Fellowship: Yes. We refer those we cannot help to the Second Harvest outlets in the community". Provision: "We have had to do that twice this year. We do not have food to purchase so are dependent on Feed the Children". Nashville Rescue Mission: No. "As long as people are here during mealtimes". SAVE: "When budgeted food is spent, we have to turn away; we try to spread it out to last the full year". The Salvation Army: "Sometimes we may not have a specific type of food for special diets, and may refer them to another source".

Philadelphia: As explained above, the food cupboard coordinators will do whatever it takes not to turn people away. The families' food needs may not be adequately met, but they leave the cupboard with some food.

Phoenix: Only 17 percent of the pantries and 8 percent of the kitchens indicated that they sometimes or always had to stretch food resources.
Portland: Although the emergency food assistance facilities do not have the capacity to track actual numbers, program administrators report they occasionally turn away people in need. Unmet need may also be inferred from the fact pantries have had to cut back hours of service and limit the number of food boxes a household can receive in a year. Few people are actually turned away, because they know the limits and do not seek assistance when they have reached the household limit.

Salt Lake City: Day after day people are receiving emergency food assistance. Occasionally, a pantry or kitchen may run out of food for an evening, but there is enough to operate the next day.

San Antonio: Even though the level of resources has increased for food assistance agencies, organizations still report turning away individuals and families.

Santa Monica: In order to meet the need of a larger segment of the population, many facilities may follow stricter poverty guidelines.

Seattle: Meal programs and food banks generally do not have to turn away clients and do their best to serve everyone that comes to them for groceries or a hot meal.

Trenton: Lack of adequate agency staffing to serve the volume of clients in need. According to the Trenton Area Soup Kitchen (TASK) food pantries typically run out of food before the end of the month.

Exemplary Programs

Among the comments from the city officials on an exemplary program or effort underway that prevents or responds to the problems of hunger:

Boston: The Project Bread hotline provides a staffed phone line that residents can call to get information about food pantries and emergency feeding programs in their neighborhood. The hotline also screens people for eligibility for Food Stamps, WIC, elderly food programs, and other food resources. The hotline is a free 1-800 number and can provide information in 140 languages. Rice Sticks and Tea, the Asian Food Pantry Collaborative, is a project of the United Unitarian Ministries. It provides culturally appropriate food for 90 Asian immigrants and refugees each month.

Cedar Rapids: Freedom from Hunger food drive in its third year is an exemplary program. This effort raised over 55,000 pounds of food donations during the summer months when supplies dwindle and demand peaks.

Charleston: Crisis Ministries’ Food Rescue Program plays an important role in receiving food and supplies from across the community. The Food Rescue Program receives thousands of pounds of food and personal care items per year. Without the generous support of local grocery stores, restaurants, retail stores and other organizations, we would not be able to meet the basic need of our community’s hungry and homeless population. This refrigerated truck is driven around town to local businesses to “rescue” otherwise wasted food. Most donors would simply discard these items if we were not able to rescue them in a timely manner. The success of the Food Rescue Program is measured through the valuation of the food and items received, the number of individuals served and the nutritional quality of the
perishable food items that are saved and served in the Soup Kitchen. Using a formula, we assign per pound and per item values to the food and items that are donated. Last year, $363,000 worth of food and personal care items were donated to Crisis Ministries. In addition, over 178,000 meals were prepared and served in the Soup Kitchen. One hundred percent of the food served in the kitchen is donated. Crisis Ministries is fortunate to have a rotating corps of volunteers dedicated to serving meals and providing other support to our clients. In order to help other organizations maximize their resources, Crisis Ministries’ Food Rescue Program often drives to other human service agencies with surplus items or perishable food that we rescue and cannot serve before spoilage.

**Chicago:** The Greater Chicago Food Depository has implemented an innovative job training program, Chicago’s Community Kitchens, as a way of breaking the cycle of poverty for unemployed and underemployed people. Established in 1998, the Chicago’s Community Kitchens program is a twelve week training program to empower people desiring a life change. The program enables participants to develop the skills necessary to pursue a career in the food service industry. This program’s dual focus is to: 1) Assist unemployed or underemployed people in Cook County (which includes Chicago) in learning marketable job skills and; 2) Provide nutritious, hot meals to Chicago children enrolled in the Food Depository’s Kids Cafe after school feeding programs. Chicago Community Kitchens students undergo culinary training, sanitation class, life skills classes, and financial planning classes. Enrollees must learn hundreds of pages of college-level material, excel on tests, and complete a two-week internship with a restaurant, cafeteria, or other food service operation. The Greater Chicago Food Depository’s food bank and training facility contains a state-of-the-art kitchen with a cook chill meal production center that can produce up to 3,500 nutritious meals daily. Students not only practice more traditional culinary techniques, they also learn to operate the cook chill system, which is used by more and more hospitals, universities, and large corporations in the Chicago area. This cook chill system, which cooks stews, soups, and noodle dishes, then cools them to be packaged and refrigerated, is the device that makes it possible for students to learn culinary skills while simultaneously providing meals for hungry children. These packaged, chilled meals are transported daily to 29 Kids Café sites around Chicago. Students work with a full-time career counselor on-site to find internships and job placements. Some have gone on to work at hospital or university dining facilities; others at food service providers like SODEXHO; and still others at fine Chicago restaurants. Last year, the four graduating classes maintained a 92.5 percent job retention rate after six months.

**Denver:** Agencies cite The Denver Commission to End Homelessness, The Food Bank Of The Rockies and some grass roots provider agency efforts which are making consumer access and supply more readily available as examples of progress citywide.

**Detroit:** Gleaners Community Bank, secures food that would had normally been disposed of or wasted. They gather that food which is nutrient and wholesome, and they provide it to over 440 agencies.

**Los Angeles:** SERV CENTER is a nonprofit Catholic organization whose purpose is to offer charitable services to needy members of the community without discrimination as to race, color, religion, national origin, ancestry, or sex of any person. SERV CENTER is entirely operated by volunteers and provides assistance and loving care to individuals and families in emergency need for food, clothing, and other necessities. SERV CENTER is affiliated with St. Elizabeth Church and the Rogationist Fathers.

**Louisville:** The YUM! Brands Corporate partnership underwrites the agencies in the Dare To Care Food Bank network. YUM rebates the financial commitment of churches and community-based organizations, allowing food to flow into the extremities of the community at a systemic and re-vitalizing level. As an extension of that partnership, the Louisville Metro Police Department worked with YUM! Brand Corporate to establish the Senior Homebound Program on a test level in two police districts, and then
expanded the program throughout the entire Louisville Metro area. The Back-Pack Buddies program furnishes a backpack to every participating child. Now in seven schools, the pack is filled with food on Friday, and returned on Monday. This allows children who eat nutritious meals at school during the week to supplement with child-friendly products, thus bridging a nutritional gap over the weekend. As part of the Neighborhood Place Partnership Program, the Dare To Care Food Bank has placed shelf-stable USDA/TEFAP products at the community’s one-stop Neighborhood Place service sites. These facilities are cited throughout the community where the public may access government programs and resources, including WIC, food stamps, TANF, preventive health care, etc. Rather than refer families and individuals in a food crisis to the nearest Dare To Care Food Bank distribution center, valuable time and travel resources are saved by giving them “hold over” food supplies on-site until they are able to access the regular Dare To Care Food Bank network.

**Nashville:** "Second Harvest: We have 7 programs that address hunger every day: Emergency Food Box Program, Kids Café, Community Kitchen, Community Food Partners, Senior Helpings and Nashville’s Table and Project Preserve. Emergency Food Box Program consist of 14 agencies throughout Davidson County: East Nashville Cooperative Ministry, Martha O’Bryan Center, New Life Church, Salvation Army Magness Potter, Bethlehem Centers of Nashville, Lutheran Family Services, Progressive Baptist Church, New Song Christian Fellowship, Star Ministry, Hamilton United Methodist Church, St. Luke’s Community House, Christian Cooperative Ministry, Donelson Christian Church, and Goodlettsville Help Center. The program distributes disaster relief food boxes through the Red Cross and work with 211. Over 35,000 food boxes last year were distributed Community Kitchen provides culinary job training to men and women from low income backgrounds which allows them to break the cycle of poverty and hunger. Learning work ethics, getting them jobs and off welfare. We produce our own meals at the food bank through a program called Project Preserve produce meals for our state and now 111 food banks throughout the United States. Senior Helpings provide 50 low income homebound seniors with meals. “We provided 380 meals last year in Lawrence County through a Kids Café “Take Home Food/Backpack Program. We deliver food to over 24 cities in Middle Tennessee providing delivery service to over 100 non-profit agencies - we add 4-6 new delivery sites per year. Nashville’s Table (a local food rescue program) provides more free perishable food items”.

**Philadelphia:** The SHARE Food Program provides healthy, nutritious food at an affordable price. For 16 dollars and two hours of their time, a family can receive 35 to 40 dollars worth of food. The food package includes meat, fresh fruits and vegetables, and other staple items. Families can use their food stamps to purchase the food packages. During the months of June through November, they can purchase a farm-fresh package and use their Farmers Market’s checks as payment. The SHARE Food Program also has a required volunteer component. Therefore, when families purchase a food package, they participate in their community in a meaningful way.

**Phoenix:** An innovative program to provide more hungry people with foods they know, like, and can afford was launched by Desert Mission Food Bank in July 2005 with praise from one of the nation’s leading authorities on hunger and poverty issues. H. Eric Schockman, PhD, chairman of the National Anti-Hunger Organizations, lead the Grand Opening ceremonies for Desert Mission’s new 4th Street Market, which he sees as an attractive and creative approach to nutritional assistance. Designed to help those who may not be eligible for free food programs, 4th Street Market lets qualified low-income people choose and purchase their own groceries at reduced prices. The first of its kind in the metro Phoenix area, 4th Street Market is the newest community service for the John C. Lincoln Health Network, the only Arizona organization recognized with the coveted Foster G. McGaw Prize for excellence in community service. John C. Lincoln's Desert Mission Food Bank has long helped people in financial crisis with free emergency food boxes, said Desert Mission Food Bank administrative director Jerry Ketelhut. However, the remodeled 4th Street Market lets low-income individuals stretch
their budget and progress to greater self-sufficiency by buying groceries at prices 30 percent below local stores' averages. Not only does the 4th Street Market allow people to get foods they like and know how to prepare, but it will help families learn appetizing ways to cook foods with which they may not be familiar. Culinary students from the Art Institute of Phoenix present regular food preparation demonstrations. 4th Street Market incorporates its reduced-price groceries for sale along with all of Desert Mission's existing free food programs - emergency food bag and baby bag programs, Commodities Supplemental Foods and daily Grab-n-Go fresh fruits and vegetables.

**Portland:** Milk, ground beef, cheese, yogurt and hotdogs and much more once destined for the landfill. this high-quality, nutritious food now reaches people who are hungry through a program called Fresh Alliance. A partnership of Oregon Food Bank (OFB), Fresh Alliance is a network of regional food banks and local agencies, and leading grocery retailers. Fresh Alliance safely and effectively collects and distributes high-value, perishable food.

In the Portland area, Oregon Food Banks Fresh Alliance drivers call on grocery stores five days a week to pick up truckloads of perishable food that is nearing the date when it can no longer be sold. The drivers transport the food in refrigerated trucks to OFB where it is sorted by crews of volunteers. A typical crew will sort through nearly 8,000 pounds of nutritious meat, dairy products and juices daily which will be distributed to hunger-relief agencies usually within the next 24 hours.

Last calendar year, Fresh Alliance generated 1.74 million pounds of food that went into supplemental food programs, emergency food boxes and more. This program fills an important need for high quality, nutritious food at a time when these products are usually in short supply.

**San Antonio:** Community partnerships have demonstrated positive results in enrolling families and older adults in Food Stamp and Project HOPE Programs. Through city funds, the San Antonio Food Bank has continued to increase their Food Stamp, Nutrition Education and Project HOPE outreach. The Food Bank's staff assisted clients in completing applications that resulted in a 66 percent approval rate, compared to a 33 percent average without assistance. Between October 2004 and September 2005, 3,721 food stamp applications were completed benefiting approximately 11,260 individuals. Additionally, registered dieticians at the Food Bank educate more than 1,000 clients monthly on nutrition, food preparation, and food budgeting, helping clients make the most out of their food stamps. Project HOPE distributed supplemental food resources to over 7,100 older adults in 2005. The assistance contributed to overall food security and good health to senior citizens living on a fixed income. Over the past 3 years, Project HOPE has distributed over 1,750 tons of food to low income older adults.

**San Francisco:** For over 55 years St. Anthony Dining Room has responded to the needs of hungry San Franciscans serving an average of 2,400 meals each day. The Dining Room has also collaborated with the Department of Human Services Food Stamp office to develop the "Food Stamps in a Day" program. We discovered that many of the Dining Room guests qualify for Food Stamps.

**Santa Monica:** The Westside Food Bank distributes 1.6 million pounds of food to Santa Monica agencies, and is able to turn every donated dollar into five pounds of food.

**Seattle:** The Seattle Presbyterian Church in downtown Seattle hosts an Outdoor Meal Program, by contract with the city of Seattle, which has enabled five non-profit organizations to continue serving nutritious meals and cell phone usage to homeless and low-income persons. The Outdoor Meal Program is a partnership between the five meal organizations; the City of Seattle Human Services Department as its contractor, other city departments such as, the Mayor’s Office, City Council, Seattle Parks and Recreation, Department of Neighborhoods, the Seattle Police Department, and the Seattle Department of
Transportation; faith-based organizations including the host organization; Meals Partnership Coalition; citizens who live and work in the neighborhood, and merchants who have established businesses in the area. Although there has been significant challenges working with so many divergent views and the processes associated with good neighbor and other governmental policies, the program has been very successful in providing nutritious meals in a safe, scheduled, and clean environment to Seattle’s most vulnerable population.

**Trenton:** Mt. Carmel Guild distributes coupons to seniors to shop at the local Farmers Market. The Trenton Area Soup Kitchen has an adult education program.
## City Data on Hunger

<table>
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<tr>
<th>City</th>
<th>Percent Increase in Demand for Emergency Food</th>
<th>Percent Increase for Families' Demand for Emergency Food</th>
<th>Percent Requesting Emergency Food Assistance as Members of Families with Children</th>
<th>Level of Resources</th>
<th>Food Assistance Facilities Provide</th>
<th>Are People Being Turned Away</th>
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Homelessness

The Problem

Emergency Shelter Requests

Seventy-one percent of the survey cities report an increase in request for emergency shelter during the last year. The number remained the same in Boston, Salt Lake City, San Francisco, and Seattle. Chicago, Louisville and Santa Monica had a decline in the number of requests for shelter during the last year.

Across the survey cities, the average increase was 6 percent. The increases ranged from 30 percent in Los Angeles, 28 percent in Trenton, 22 percent in Detroit, 18 percent in Miami, 10 percent in Nashville, Providence and St. Paul, 9 percent in Charlotte, 3 percent in Cedar Rapids and Charleston, and one percent in Cleveland.

Among the comments from the city officials on the number of people requesting emergency shelter:

Boston: This response is based on data from the 2005 One Night Census in Boston.

Cedar Rapids: The number of persons served increased by 3 percent from FY04. Source: FY05 Linn County Homeless Data Summary Report.

Charleston: The increase has been mainly in the number of families and single women. The census of single men increased two years ago and has remained consistent - shelters report being at capacity 90 percent of the time.

Charlotte: Both primary shelters (men and women) have been running consistently above capacity. The demand for emergency shelter at The Salvation Army has increased by a nightly average of 31 percent.

Chicago: This information is reflective of CDHS gathered data regarding individuals and families requesting emergency shelter and other shelter-related services.

Cleveland: Shelter demand remains high, but has not increased significantly over the past year. Increased efforts at moving longer term shelter residents into housing continue to be offset by new people coming into the system. There continues to be a need to use an overflow facility to accommodate all single men seeking shelter.
Denver: Agencies cite the overall lack of affordable housing, insufficient supply of shelter beds, lack of employment available to support housing costs and increased numbers of disenfranchised citizenry as reason for this increase.

Detroit: The drastic increase in homeless persons in the City of Detroit is due to the lack of permanent low income affordable housing, and the lack of support services. Of course the economic is the largest reason and causes of increase, along with the low minimum wage affecting the nation as a whole.

Louisville: For the period of October 2004 through September 2005, Metro Human Services, through its services at Neighborhood Place sites reported a decrease in the number of homeless assessments for families seeking services from 292 to 186 (or 36 percent). The number of homeless assessments for individuals seeking services also reported a decrease from 131 to 84 (or 36 percent). Using an average family size of three people, the total number of individuals and families requesting services has decreased from 1,007 to 642 or 36 percent. The decrease for this reporting year is a larger decrease than the prior year when we reported a 25 percent decrease in homeless assessments for individuals and families. It is difficult to pinpoint the reason for the continuing decreases in the number of persons who chose to come to a Neighborhood Place site to participate in a homeless assessment. We suspect as was reported last year that many homeless families may not be requesting services because they know there are very few housing options. Section 8, which has had a waiting list topping 13,000, suspended referrals to their Homeless Assistance Program in May 2003. Public Housing, which has had a waiting of up to 2,500 since October 2003, has just begun taking new applications for families. Please keep in mind that the number of homeless individuals and families receiving homeless assessments are persons who are not in emergency shelters, either due to lack of shelter space or other barriers that prevent using a shelter. These trends do not reflect a similar decreasing pattern with requests for emergency financial assistance reported at Neighborhood Place sites. For the period of July 2004 through June 2005 there was an increase of 5.8 percent representing 29,395 households requesting help with rent and/or utilities. While the majority of the households are not homeless, many are on the brink of becoming homeless and are faced with eviction, foreclosure and/or utility cutoffs.

Miami: The increase is due to the lack of transitional and permanent housing availability.

Nashville: Operation Stand Down: "The demand has increased significantly. We do not keep data on those turned away but the number of homeless veterans is increasing. It is mainly men who are unemployed seeking housing and employment".

Phoenix: According to the CONTACS shelter hotline, the number of people requesting emergency shelter in the metropolitan area increased by 3.7 percent from October 2004 through September 2005 as compared to the previous year. The number of persons counted in emergency shelter in the annual point-in-time survey conducted on January 25, 2005 was 1,789, a decrease of 4.2 percent or 76 persons from the same survey in 2004. The number of persons counted on the streets in the annual point-in-time survey conducted on January 25, 2005 was 2,614, a decrease of 42.3 percent or 1,106 persons from the same survey in 2004. It is important to note however that the street count survey methodology changed significantly between 2004 and 2005, with the 2005 method being statistically valid. Anecdotally, emergency shelter providers reported an increase in requests for emergency shelter in 2005.

Portland: Four percent more homeless persons were served during the last year through agencies serving homeless persons. There is no citywide count of people who request emergency shelter. Annually, there is a count of homeless people who are sheltered on a specific night in November and March county-wide. Agencies also report the number turned away that one night. However, not all agencies obtain that information, some maintain a waiting list, and there is no way to track unduplicated
requests until our local Homeless Management Information System (HMIS) is full implemented. On January 26, 2005, 1,020 persons who requested shelter were unable to be accommodated, which is a 54 percent increase from March 15, 2004.

**Providence:** Our response is based on data from the Rhode Island Coalition for the Homeless.

**Salt Lake City:** According to data from The Road Home, Utah's largest shelter provider, the number of persons requesting shelter has remained essentially the same for the past four to five years, with a slight decrease of less than 1 percent between 2004 and 2005. At the same time, there has been a major focus on Housing First and placing homeless families and individuals into housing as soon as possible after they become homeless. The Road Home saw a 33 percent increase in the number of households served in housing in 2005 over 2004. Households were referred from outside agencies to The Road Home, and through the use of Tenant Based Rental Assistance, some homeless families were able to move directly to housing without having stayed in shelter.

**San Antonio:** Over 16,000 received emergency shelter during the Hurricane Katrina and Rita evacuations. The city used numerous city staff members and volunteers to register and temporarily house individuals at available space at Kelly USA (formerly Kelly Air Force Base) and other sites throughout the city.

**San Francisco:** Vacancies in the single adult shelter system have not varied substantially.

**Seattle:** We are unable to determine the number of unduplicated persons turned away because there is no centralized intake for shelter in our community. The city expects to address this with implementation of our Safe Harbors HMIS system.

**St. Paul:** In St Paul one shelter began operating year round. Our totals of identified unique homeless individuals increased as a consequence of that change.

**Trenton:** According to the city, Adult and Family Services Unit has an increase in substandard housing and in drug and alcohol addiction and mental health issues due to personal family and individual barriers, people are unable to maintain monthly rents. Catholic Charities receive numerous inquiries regarding housing needs for individuals and families; their program is always filled to capacity.
Emergency Shelter Requests by Families

Requests for emergency shelter by homeless families with children increased in 63 percent of the survey cities during the last year. Boston, Cedar Rapids, Chicago, Salt Lake City and St. Paul reported that the number of requests by homeless families remained the same. Louisville, Phoenix, San Francisco and Santa Monica said that the number declined.

Across the survey cities, the average increase in requests for emergency shelter by homeless families with children was 5 percent. The percentage of increased requests ranged from 25 percent in Denver and Nashville, 20 percent in Los Angeles and Miami, 19 percent in Trenton, 15 percent in Burlington, 10 percent in Charlotte and Providence, 5 percent in Portland, and 2 percent in Cleveland.

Among the comments from the city officials on requests for shelter by homeless families with children:

Boston: This response is based upon the number of Boston families requesting shelter from the Massachusetts Department of Transitional Assistance.

Cedar Rapids: Sixty-two percent of the local homeless population in FY05 were families with children. Source: FY05 Linn County Homeless Data Summary Report.

Charleston: Emergency shelter for women and children has remained at capacity for the city during the entire year. Usually, there are periods when shelters see a dip in census, this year did not see the dip. Crisis Ministries, Reid Christian House, and the North Charleston Shelter for Women and Children all report capacity numbers when called.

Charlotte: Our response is based on the number of families in The Salvation Army shelter, one of only two facilities able to take intact families with adolescent or older males.

Chicago: This information is reflective of persons and individuals requesting shelter services through CDHS shelter delegate agencies and community service centers.

Cleveland: Full service shelters for families are always full. The Community Women's Shelter houses families on a temporary basis until other space becomes available. It has recently been taking longer to place families in full service shelters because of the slow turnover of rooms in family shelters.

Denver: Agencies cite an increase in first time homeless families along with increasing complexity in terms of family dynamics and issues.

Detroit: There has been an influx in women with children seeking safe havens as a way to escape domestic violence situations. Also, young families are experiencing for the first time the downward shift in the economic, which has affected and disrupted their already unstable home situation.

Miami: A survey conducted by our agency has established the number of families seeking shelter has increased by 20 percent.

Nashville: "Nashville Rescue Mission increased 25 percent. Nashville Safe Haven Family Shelter increased 20 - 25 percent. "In the last 12 months we have received 726 unduplicated requests for emergency shelter; of the 726 calls about 25 percent were people that did not meet the criteria for admittance into the shelter program because they did not have children or were married couples. Of the
726 calls for shelter we were able to help 92 families including short term and transitional housing program. We had an estimated 550 calls last year).

**Phoenix:** According to the CONTACS shelter hotline, the number of families with children requesting emergency shelter in the Phoenix metropolitan area decreased by 13.8 percent from October 2004 through September 2005 as compared to the previous year. The number of families counted in emergency shelter in the annual point-in-time survey conducted on January 25, 2005 was 240, a decrease of 2.1 percent or 5 families from the same survey in 2004.

**Portland:** There was a 5 percent increase in the number of individuals in families who were served through agencies in the family and domestic violence homeless systems and by agencies that do not report homeless data to the county. Agencies say that greater numbers are seeking shelter; however, there is no citywide count of people who request emergency shelter. On January 26, 2005, families with 800 members requested shelter and were unable to be accommodated, which is a 60 percent increase from March 15, 2004.

**Providence:** Our response is based on the information from the Rhode Island Coalition for the Homeless.

**Salt Lake City:** Data from The Road Home, Utah’s largest homeless shelter, show that a total of 209 unduplicated families from both year-round and winter shelter was served during fiscal year 2004. For fiscal year 2005, the same data show an unduplicated total of 205 families served, a very slight decrease of less than 1 percent.

**San Francisco:** We have seen more public housing becoming available due to the San Francisco Housing Authority prioritizing the rehabilitation of units and bringing them back on line. This had decreased the number of vacant units available to all families including homeless families. In addition, some families have gone directly from the waiting list to a permanent housing situation without going through shelter as a result of families being prioritized on the Housing Authority wait list. As a result of these efforts and an expansion of permanent supportive housing for chronically homeless families, a number of families that were in the emergency shelter system for an extended period of time have been able to exit to permanent and more appropriate settings. Some of the families on the shelter wait list call to let us know that they secured employment and were now able to rent their own place. This takes them out of their homeless status, but in many cases their situation remains very tenuous.

**Seattle:** We are unable to determine the number of unduplicated persons turned away because there is no centralized intake for shelter in our community. The City expects to address this with implementation of our Safe Harbors HMIS system.

**St. Paul:** In St Paul we have a finite count of the number of beds available for families. That fact limits the number of families that appear in the system. It is widely believed that some do not apply for emergency shelter because of the perception that the emergency shelter spaces are full at all times.

**Trenton:** According to Mercer County Board of Social Services there was in increase in families becoming homeless due to violence by either a family member or gang related crime. Catholic Charities reported that they must maintain a long waiting list for future openings.
Length of Time People Are Homeless

People remain homeless for an average of 7 months in the survey cities. The average length of time people remain homeless is 24 months in Phoenix, 18 months in Louisville, 14 months in Boston, 12 months in Detroit, 9 months in Charleston, 6 months in Chicago, Denver, Providence, San Antonio, and San Francisco, 2 months in Salt Lake City and Trenton, and one month in Los Angeles.

Eighty-seven percent of the cities report that the length of time people are homeless increased. Thirteen percent report a decrease.

Among the explanations of the city officials on the duration of homelessness:

**Boston:** There is a significant range in times that people are homeless, along with a significant increase in families leaving shelter without having found permanent housing. However, the scarcity of affordable subsidized housing over the past several years has increased shelter stays.

**Cedar Rapids:** Most recent point in time study conducted 7/26/05 indicates that 45 percent of respondents had been homeless more than six months, compared to 30 percent in the previous survey. Source: Individual and Family Needs Survey, July 26, 2005.

**Charleston:** The number of individuals with undetermined disabilities reporting to shelters has increased over the past three years. Shelter social workers have been more successful working with the Department of Social Security in establishing who is and is not eligible for disability income; however, the process is long and the outcome is unpredictable. A person living on an income from Social Security Insurance is often unable to afford housing in the City of Charleston. Moving to an outlying area is not a solution when services are needed and transportation is an issue. Affordable housing and gentrification continue to be issues of delicate balance in the most forward thinking and compassionate cities.

**Charlotte:** We have a very limited supply of affordable housing for people getting back to some level of self sufficiency.

**Chicago:** According to studies prepared by the University of Illinois and the Chicago Coalition for the Homeless, the average length of homelessness is between 6 and 8 months in 2005.
Cleveland: For single men and women, the length of stay in shelter has been decreasing because of an increased emphasis on moving people to transitional or permanent housing. However, the family shelters are reporting longer stays because clients are face more complex challenges in locating and retaining affordable housing.

Denver: Agencies cite the difficulty of consumer's ability to access benefits, the overall lack of affordable housing resources, lack of funds to afford the first and last month rent and security deposits, and lack of affordable child care as causes responsible for this trend.

Detroit: With emergency shelter capacity at it peak, Transitional units limited, employment at its highest, and the lack of affordable housing available, individuals find themselves waiting 2-3 years for stable housing.

Los Angeles: Based on the survey responses from the service providers that responded to this question, the average amount of time has stayed the same.

Louisville: There is a waiting list of over 15,000 households for Section 8 housing and limited Shelter Plus Care slots. Until recently, public housing had also maintained a substantial waiting list due to: residents remaining in their apartments for longer periods of time, a new HOPE VI project; increased foreclosure rate on homes; and, lack of affordable rental housing units.

Miami: Families are remaining longer in shelter due to the lack of permanent housing.

Nashville: The Salvation Army reports an increase for families and single women. Nashville Safe Haven Family Shelter: "The families we admit into the program seem to be homeless longer this year. Many people are coming out of the welfare system. If we are to see this time shorten then they must received the training and be willing to accept the responsibilities that come with mainstream living".

Phoenix: Information regarding the length of time people are homeless is not collected in a way that can be aggregated for the Phoenix metropolitan area. UMOM New Day Center, the largest family shelter in the Phoenix metropolitan area reports that families are staying in their emergency shelter program an average of 82 days, a slight increase of 2.4 percent from the previous year.

Portland: We do not track length of homelessness systematically; however, we do track length of time served. In the homeless family system, the length of time served is 4.35 months. In the homeless youth system, the length of time served is 7.83 months. Using this as a proxy measure for length of homelessness, our community has experienced a decrease in time. The latest data on length of homelessness prior to receiving services was gathered through a week-long survey of providers of shelter, transitional housing, day-services, and outreach from February 25 to March 3, 2002.

Salt Lake City: Length of stay data from The Road Home, Utah's largest shelter, show that the average length of stay for all populations is 57 days, no change from fiscal year 2004. The number of families served increased while the length of stay for families decreased, due to the strategy of placing families into housing as soon as possible after becoming homeless.

San Francisco: Additional housing and a more direct referral process from the shelter system into permanent supportive housing related to the implementation of the Care Not Cash program has reduced the length of time adults receiving County Adult Assistance Programs remain homeless.
The primary reason is economic. Incomes and public assistance do not match up well with the local rental structures.

According to MCBSS this is based on the lack of suitable and affordable housing. The housing cost has increased and families are unable to afford the rental cost. According to Community Innovations, with the economy struggling and having a direct impact on employment they have been keeping families in shelters longer. According to Catholic Charities, the lack of ongoing Section 8 vouchers continue to contribute to increased of homelessness.

Case Studies of Homeless Families and Individuals

The city officials were asked to describe the conditions faced by an actual homeless family or individual in their city. Following are brief case studies of homeless families and individuals:

Boston: Mr. A is an African American man in his forties. He has been living on the streets for five years. Prior to living on the streets, he lived in emergency shelters for an unknown amount of time. He has serious mental illness and a remote history of substance abuse. He is suspicious of service providers and does not want to accept handouts. He supports himself by selling newspapers. Department of Mental Health Homeless Outreach Team members approached Mr. A and begin slowly forming a relationship, providing valued items, like an MBTA pass. They worked with Mr. A over the course of a year. meanwhile, the Director of the HOT team approached a local Safe Haven. When the Safe Haven had an opening, she arranged for it to be held for Mr. A. She presented Mr. A's case to the Safe Haven staff, who agreed to accept him into the program without requiring a formal intake. Outreach staff working directly with Mr. A asked him if he would be interested in his own room and they arranged for him to visit the room. Upon seeing it, Mr. A was allowed into the program immediately. He has been in his new room for 3 months.

Cedar Rapids: Former Madge Phillips Center resident Tracy Lee says she would like to write a book about her life. The theme would be, “What you’re born with and how you are raised is not your destiny.” Her life is a story of overcoming difficult beginnings, assisted by people at the Madge Phillips Center and many others. Raised in a small town in southwest Iowa, Tracy began life with an abusive father and lived in a series of foster homes before marrying a man who also became violently abusive. In 1990, she left her abusive husband and moved to Cedar Rapids, where she married “a very kind man” and had a daughter. But the burden of her early traumas was inescapable, and she suffered a nervous breakdown. After her second divorce, she returned to her hometown. Tracy recalls the difficult decision of leaving her family. “I wasn’t emotionally stable so I left my daughter here,” she says. “But I always kept in touch with her.” Tracy began taking college classes, but soon dropped out, struggling with depression, anxiety and debilitating fibromyalgia. “I made some poor choices trying to self-medicate myself,” she explains, “I lost my apartment and became homeless.” What followed were eight hellish months of living occasionally with friends or family members but mostly in her car, trying to find places where she could park overnight without being chased away. Last fall she returned to Cedar Rapids, and was referred to the Madge Phillips Center. “I felt comfortable from the day I moved in,” she recalls. “I had my own bedroom and was allowed to have my daughter visit. I started meeting with Carrie, the case
manager, to set goals. She helped me set up appointments to get my meds regulated and my mental health in order so I could live by myself. She also helped make arrangements for me to see my daughter regularly.” Tracy’s relationship with her daughter, now age 11, quickly blossomed, she says, and she has also developed a positive relationship with her ex-husband and his wife. This January, she moved into an apartment “with a room for my daughter,” she states proudly. “Our relationship is wonderful. We talk on the phone all the time. When she stays with me, she does her homework, we read a lot, and we cook together.” As Tracy continues to receive counseling and support, she dreams of a time when she will be able to go back to school and work. “I owe this community so much,” she says. “Where would I have been without this program? Without the wonderful staff at the Madge Phillips Center, I wouldn’t have made it. I tell people this is the best place you could ever be to get back on your feet. It’s a structured environment that let me grow.” When she is with her daughter, Tracy tries to remember some advice she read once. “The two best gifts you can give your children are roots and wings,” she says. “That’s kind of what the Madge Phillips Center did for me.”

Charleston: This year Crisis Ministries is mourning the death of a young African American woman who battled substance abuse, AIDS, and homelessness for more than 12 years. One of thousands throughout the United States; but one that brought the AIDS and homeless provider community of Charleston to a shrill debate that left advocates on all sides feeling defeated, frustrated but newly challenged to fill the gap in services that “Ms. Smith’s” life so poignantly illustrated. We will pick up her story near the end. The common thread is that of many “Ms. Smiths” all with the same theme: Worn out families who are raising babies for mothers that are sick; drug users whose spirits are tired but whose bodies won’t give up the addiction; patients who have broken appointment after appointment and are unwilling to comply with treatment take spaces for those who are sick. “Ms. Smith’s” case management notes and medical records each ended with the same theme, she was admonished, encouraged, told, cajoled, instructed, and begged to keep appointments with nurses, doctors, case managers, counselors, eligibility workers, lawyers, substance abuse professionals, and members of the faith community. Most of those professionals had grants to do good things on her behalf and were her advocates. She was court ordered to treatment a number of times and finally by a slim chance of timing died in a hospital bed not meant as a space for hospice treatment and was awaiting commitment. “Ms. Smith” and all the other sick and dying homeless Charlestonians need a place to live until they can heal or until they can die in a dignified and safe environment. Illness and end of life issues are difficult for families who are housed but for individuals who are homeless and non-compliant they become issues where groups of strangers decide where patients have the right to die. Charleston homeless providers together with the healthcare community have committed to finding the resources to assure that every citizen regardless of their disease have access to a safe, medically appropriate environment.

Chicago: CDHS case management staff assisted a 42 years old, single mother of three children who previously served her country during Operation Desert Storm and became homeless after being evicted from her apartment. She remained on active duty until diagnosed as having Epilepsy. This medical condition would prevent her from working again. Even though she was placed on medication, her seizures continued. Given her medical condition, it was not appropriate to place her family in a homeless shelter. Subsequently, the CDHS case manager placed them in a transitional housing program. The client continues to support her family on the benefits received from TANF ($409 a month) as she awaits approval of Social Security and Veterans Assistance benefits.

Denver: One of our respondents reported working with a veteran who had been homeless for many years. Once case-managed to receive entitled benefit from the Veterans Administration, he was enrolled in a housing program and with the requisite income to support housing was housed within three months.
**Detroit:** Debra, has guardianship of her granddaughter. Debra became homeless as the result of a fire which destroyed her home in 2004. Today, Debra is still homeless, working and still living in a shelter, waiting for support services in the form of rental assistance, because she knows she cannot afford the rent without some type of rental subsidy.

**Los Angeles:** A male, African American native of California is 37 years old and is separated with no children. He entered the SRS emergency program in July 2005 and remained there until September 2005 when he entered the SRS transitional program. Since enrollment, he has obtained full time employment and maintained his recovery since April 2005. He has a sponsor and is involved in the recovery fellowship. He has now been approved for housing at Ballinton Plaza. He is an example of a successful completion of the Weingart Center Association housing program via weekly case management and referral services.

**Louisville:** Natasha moved in with her Dad when she was a pre-teen, but she was soon placed in foster care because of abuse and neglect. “I had pleurisy because of his second-hand smoke,” she reflected, and named other health issues that needed attention. “I left college, so I was not eligible for the state’s Independent Living program, and then I was homeless. I stayed with boyfriends, at friends’ houses, and I stayed in my U-Haul.” National studies show that as many as 45 percent of youth who age out of foster care are homeless within a year of leaving the state’s care. Natasha, now 20, is in a HUD-funded program for homeless young adults. She is working and going to school. She wants to be a dental hygienist.

**Nashville:** There is one individual a black male, early 40’s diagnosed with schizophrenia, paranoid type and has been in our facility since June 05. He is chronically homeless and was receiving services (case management, medication management, psychiatric services and transportation). He was making progress on plans to move when he lost his Tenncare and all of his services, the case management agency he was with dropped his case. He has not (as of yet) been added to any safety net, and has been without medication or psychiatric services since August 2005. He will need services before he look for a job because of symptoms of illness gone untreated. Also it will be hard for him to get permanent housing due to him coming from transitional housing and not the streets prior to coming into the Safe Haven Program. Michelle is one of seven mothers over the past year who graduated from the Renewal House residential recovery program for homeless mothers and their children with substance abuse addictions. A crack cocaine user for 12 years, Michelle was homeless prior to coming to Renewal House, often seeking shelter in a hospital waiting room. Her children were living with their grandmother. Michelle entered the Renewal House residential program in April 2004 and graduated 12 months later in April 2005. Although she had tried seven different treatment programs in the past, she had never stayed in treatment for more than two months. None of the other programs allowed her to keep her children with her. While in the program, she renewed her certification as a Certified Nurse Technician. Like all mothers who graduate, she held a job for 90 days and established a stable permanent home for her family prior to graduation. Now Michelle, her youngest daughter and son live in an affordable housing rental apartment on the Renewal House campus.

**Phoenix:** Mr. N (Hopi/Pima) is on the staff of Native American Connections, where he serves as a Peer Support Specialist. He is a single father living with his young son at one of the agency’s permanent supportive housing communities. Just a few years ago, Mr. N was homeless, suffered from addictions, and did not have custody of his son. After successfully completing substance abuse treatment provided by the agency, he obtained housing and remained connected with the community/social support programs offered by the agency, and eventually was reunited with his son. Mr. N. has actively participated in and led traditional Native American cultural and spiritual practices within the recovery community, including participating in drumming/singing groups, leading Talking Circles, and
conducting blessing ceremonies. He has become a respected leader and mentor for many newly recovering individuals, and his growth in these roles becomes stronger with each passing day.

**Portland:** Client left her abuser spending one month in a homeless shelter. She returned to her abuser due to lack of affordable housing. Her partner continued to abuse both she and her son so she left again but returned after a month due to lack of affordable housing. After continued abuse, she left her partner a final time entering shelter and then transitional housing. This time she was able to maintain her housing situation. With support she will eventually obtain a living wage and become self-sufficient. Many women return up to seven times before making a final break from the abuser, often times due to lack of resources.

**Salt Lake City:** J. came to The Road Home Family Shelter after graduating from a drug treatment center and worked with case managers for several weeks. She has a one-year old daughter. She told her story as she began case management. J. had been married with three children at age 22, and came from both an abusive childhood home and marriage. She and her husband were arrested and convicted of distribution of meth, and as a result she was sentenced to two years in prison. Child Protective Services took her three children and placed them with her sister. Early in her prison sentence she discovered she was pregnant and later delivered a baby girl. She was forced to give up custody to her husband, who was released earlier from prison. J. made the decision to divorce her husband, worked hard in prison, and was released to an intensive in-patient treatment facility. She was able to regain custody of her baby girl, but custody of her other three children had been permanently awarded to her sister. J. was referred to The Road Home Transitional Housing through the treatment center. She received TANF assistance and was court ordered to complete day treatment and after care. After completion, J. was able to find a job as a waitress, and placed in permanent housing through the Tenant Based Rental Assistance program and continued with case management services, and was awarded a Section 8 voucher in November, 2004. She was thrilled and found housing for herself and her little girl. Since then, J. has reconciled with her family and has visitation with her other three children. She worked hard to overcome addiction and homelessness. J. has obtained her Associates Degree and is now in her final semester at the University of Utah. She plans to become a lawyer.

**San Antonio:** A single mother and her two boys, ages 4 and 6, entered the shelter after fleeing a domestic violence situation in Dallas, Texas. The client did not feel safe remaining in the Dallas metro area, so she took a Greyhound to San Antonio. She came to San Antonio because she remembered the hospitality she received ten years prior while at Lackland Air Force Base. The client had very few possessions: a purse, a tote bag and her most precious possessions of all - her two young boys. During her stay at the SAMM shelter she was able to obtain childcare for her youngest son and enrolled her oldest in a local public school. Between the hours of 8 a.m. and 3 p.m. she searched frantically for employment. Due to her Veteran status, she was able to access services at the American G.I. Forum. Initially, she utilized their computers to complete a resume and then she searched the Internet for jobs in bookkeeping. With the help of a G.I. Forum Case Manager, the client obtained temporary employment with the hope of it becoming a permanent position. After two months of working the temporary job she was hired as a full-time permanent employee. She was now able to obtain an apartment for herself and her children. The client received rent/deposit assistance from the city, furniture and other household items from the shelter and was placed on the Angel Tree Christmas listing by the American G.I. Forum. The single mother and her two children moved into their apartment with all the necessary amenities including furniture, dishes, linens, a Christmas tree and presents for everyone.

**San Francisco:** Ben is a 22 year-old male who has accessed services at the Lark Inn shelter intermittently since he was 19. Ben is originally from the Boston area. He was removed from his home at age six due to physical abuse by his father. He reported a history of more than ten foster care and
group home placements throughout his childhood and adolescence. He also reported being the victim of physical and emotional abuse in several of his placements. When he was 18, he was emancipated by the Child Welfare system in Boston and immediately became homeless.

When he first entered services at 19, Ben was completely uninterested in schooling, employment, or securing stable housing. The shelter staff made many attempts to engage with him and to work on setting some goals. After several months, Ben was eventually denied services at the Lark Inn, as he was unable to commit to a case plan and unwilling to set or follow through with any plans.

For the past several years, Ben has traveled between New York, Boston and San Francisco, unable to maintain stability in any location. He had been away from the Lark Inn for over a year when he began calling from New York to check in for a bed. Upon returning to SF and accessing a bed, Ben met with the Lark Inn Manager to discuss a longer-term plan. This time, Ben appeared highly motivated to make some changes in his life. Within two weeks, he had secured a bed at a transitional living program and obtained employment. Unfortunately, Ben soon lost his job due to poor attendance and he did not maintain his bed at the transitional living facility. He returned to the Lark Inn. He began working closely with his case manager and working with the agency’s employment services. He got a job and, with the support of staff members, for the first time in his life, he has maintained employment for nearly two months. He has expressed interest in accessing therapy and is working with his case manager to become linked with the city’s mental health system. He is also diligently pursuing his GED and is focusing on a realistic plan to stabilize housing. Although it has taken several years to fully engage Ben in this process, Larkin Street is pleased to see him taking steps to end his cycle of homelessness.

Santa Monica: Ben C. has a history of drug and alcohol use for over thirty years and battled with severe depression. After his last arrest in 2000, Ben entered a drug program in jail and after being in jail for three years, he moved into a sober living house of the CLARE Foundation. In September 2003 he started receiving services through Step Up On Second and has done exceptionally well since that time. He has stayed sober, enrolled in a peer advocacy program at the Westside Center for Independent Living in 2004 and started facilitating dual diagnosis groups at Step Up. Ben continued his progress as he moved into his own apartment in March 2005 through the Section 8 program. In May 2005 he started working 30 hours/week at a local non-profit and also does volunteer work.

Seattle: Ted moved into his Plymouth Housing Group (PHG) apartment after spending five years sleeping in a ‘green belt’ area on the easterly outskirts of the county. His health was beginning to deteriorate rapidly and, at 54, his physical problems were more similar to those of someone who was 75 years of age or older. When Ted moved into his new home, he and a PHG Housing Support Specialist acted quickly to have his most urgent medical and dental needs addressed through King County’s Public Health Department. After a few months, Ted began to feel stronger and applied to be an on-call staff person in PHG’s Property Management Department. His application was successful, and Ted took part in several months of training by PHG staff, training that related both to job readiness and property management. After one year of acting as an on-call staff, Ted was hired as a permanent, full-time Assistant Manager by Plymouth Housing Group, and has remained in that position for over one year now.

St. Paul: Freddie works day labor. He feels exploited and resents it. He tried staying in one of the shelters but he was attacked by another shelter guest with a fork. Now, he will not go back and risk a similar event. He stays outside in a camp of his choosing where he feels safer. Fred is quite intelligent and does not use alcohol. He has presented the Mayor of St. Paul written proposals of what he regards as an adequate response by the city to the challenge of homelessness. He is plagued with fears that the CIA has installed monitoring devices in his teeth. He recognizes that many homeless need mental health
treatment but does not regard himself as one of that number. His survival this winter depends upon whether or not he can overcome his fear of the other guests in the emergency shelter.

**Trenton:** A 36 year old white female who came from Pennsylvania and who has been homeless since January 2005 when her rent money was stolen; and she had to leave the hotel she had lived in for approximately 4 years. She has multiple medical problems including morbid obesity which makes it difficult for her to get around. She is further limited by her mental illness which includes depression and personality disorder.

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**The People**

It is estimated that persons considered mentally ill account for 22 percent of the homeless population in the survey cities; substance abusers account for 30 percent. Fifteen percent of the homeless in the survey cities are employed in full-or part-time jobs. Eleven percent is veterans.

**Services for Homeless People**

**Emergency Shelter Beds for Homeless People**

Across the survey cities the overall number of emergency shelter beds for homeless people estimated to have increased by 7 percent last year. The number of emergency beds increased in 26 percent of the survey cities.

Among the comments from the city officials on the number of emergency shelter beds for homeless people:

**Boston:** There are 1561 year round beds for individuals and 1200 beds (516 units) for families. These are emergency beds, year round. There are also 196 extra beds made available for individuals during the winter season. The number of emergency shelter beds for individuals has stayed the same and the number for families has increased by 5 percent.

**Cedar Rapids:** The data comes from most recent Continuum of Care Housing Activity Chart and point in time reports.

**Charleston:** There is a domestic violence shelter in North Charleston and a shelter for women and children in Summerville that can house together 18 individuals. These two shelters are relatively close to the City of Charleston.

**Cleveland:** One 23 bed facility for women and children, which does not accept public funding, was closed for financial reasons. The agency said it will compensate by utilizing beds when they are available at its transitional housing facility for emergency needs.
Denver: Two emergency cold weather shelters for the 2005-2006 year have been added and the primary day shelter has expanded to twenty-four hour operation to accommodate additional individuals seeking shelter at night.

Detroit: There has been for the last 6-7 years an unmet gap of beds and the need. Currently, our homeless citizens have no other place to find refuse besides the streets.

Louisville: These are beds for individuals.

Philadelphia: Due to a recent fire in one of the city’s shelters and strong community resistance to the opening of new shelters, the city is only able to provide 2,598 of the budgeted 2,750 beds.

Phoenix: According to the Regional Continuum of Care Homeless Population Chart, there are 1,564 emergency shelter beds in the Phoenix metropolitan area. This is a decrease of 1.92 percent or 30 beds from last year.

Portland: In coordination with the Housing Authority of Portland, the city conducts an annual survey of shelter, transitional and permanent supportive housing providers. This information was collected in June 2005 for the McKinney Continuum of Care application. In addition, the Multnomah County Department of Schools and Community Partnerships conduct a survey every fall to update shelter information for homeless families for its winter shelter resource manual.

Providence: Emergency overflow opens up seasonally.

San Antonio: Miracle Mansion, one of the City's largest shelters closed in the Winter of 2004.

San Francisco: We closed one shelter which had 115 beds.

Santa Monica: The City operates a 110-bed year-round shelter which is funded with city general funds and CDBG funds. In addition to this shelter, there are two country funded cold weather shelters on the Westside which operate from December to March

Seattle: All year-round shelter beds, including Tent City 3 and hotel/motel voucher programs, for single adults, families with children and unaccompanied youth are reported

St. Paul: Beds in St Paul are run by the County, and by area non profits. Some shelters receive assistance from the County while others do not.

Emergency Shelter Beds for Homeless Families

Across the survey cities the average increase in emergency shelter beds for homeless families was 8 percent. Cedar Rapids, Chicago, Cleveland and San Antonio said that there was a declined in emergency shelter beds for homeless families.

Among the comments from the city officials on the number of emergency shelter beds for homeless families:
Boston: There are 1200 beds (516 units) for families. This is an increase of 62 beds.

Cedar Rapids: Per most recent Continuum of Care Housing Activity Chart, number of beds used by individuals and families fluctuate on an annual basis.

Cleveland: This total does not include any of the transitional housing beds described in the previous answer.

Denver: There is only one shelter in Denver that accepts two-parent households and children of all ages. Due to this lack of emergency shelter for families in general, our city issues thousands of motel vouchers throughout the year to supplement the supply of emergency family shelter beds.

Louisville: These are beds for people in families.

Philadelphia: Due to a recent fire in one of the city’s shelters and strong community resistance to the opening of new shelters, the city is only able to provide 1,345 of the budgeted 1,621 beds.

Phoenix: According to the Regional Continuum of Care Homeless Population Chart, there are 926 emergency shelter beds specifically for homeless families in the Phoenix metropolitan area. This is an increase of 3.78 percent or 35 beds over last year.

San Antonio: Miracle Mansion, one of the City's largest shelters closed in the Winter of 2004.

Seattle: All year-round shelter beds for families, including hotel/motel voucher programs, are reported.

St. Paul: Fifty-five percent of the beds are available directly in the county facility. Up to 40 additional beds are provided by Churches in the city.

Transitional Housing Units

The number of transitional housing units increased overall by an average of 11 percent across the survey cities during the last year. Forty-eight percent of the cities registered an increase in transitional housing units: Boston, Cedar Rapids, Chicago, Denver, Louisville, Nashville, Philadelphia, Portland, San Antonio, Seattle, and Phoenix.

Among the comments from the city officials on the number of transitional housing units:

Boston: Fourteen hundred units for individuals and 225 units (548 beds) for families. Nineteen new units of transitional housing for individuals and 97 beds of transitional housing for families were brought on line over the past year.

Cedar Rapids: Data comes from 2005 Continuum of Care Housing Activity Chart. Additional beds are available at the Heart of Iowa program.

Cleveland: At this time, the community's priority is developing additional permanent supportive housing units rather than additional transitional housing.
Denver: The single respondent Denver agency indicated that the wait list(s) for transitional housing is approximately 18 months and family housing options during that period of time are limited to emergency shelter resources.

Detroit: There have never been enough Transitional units. Because the economic families has been in transitional units longer, unable to secure employment that would allow them to function independently.

Louisville: Part of the increase is due to HOME TBRA vouchers. In addition, 20 new units were developed in three different agencies.

Philadelphia: Four thousand one hundred and ninety-nine is the number of persons who can be served when the programs/facilities are at capacity. In 2005, two programs closed and two opened.

Phoenix: According to the Regional Continuum of Care Homeless Population Chart, there are 4,110 transitional housing beds in the Phoenix metropolitan area. This is a decrease of 1.44 percent or 59 beds from last year.

The number of transitional housing units specifically for homeless families increased overall by an average of 14 percent during the last year. Thirty-six percent of the survey cities registered an increase in the number of transitional housing units specifically for homeless families during the last year: Boston, Cedar Rapids, Louisville, Philadelphia, Portland, San Antonio, Seattle and Trenton.

Among the comments from the city officials on the number of transitional housing units specifically for homeless families:

Boston: This year, the city has 548 transitional beds for families, an increase of 97 beds.

Cedar Rapids: The number of beds used by families and individuals fluctuate from year to year. Data source: 2005 Continuum of Care Housing Activity Chart.

Chicago: Please note the number of permanent supportive housing units for homeless individuals and families increased between 2004 and 2005 from 4,187 units to 4,303, an increase of 2.8 percent.

Louisville: Part of the increase is due to HOME TBRA vouchers. In addition, 20 new units were developed in three different agencies.

Philadelphia: Two thousand three hundred and fourteen is the number of persons who can be served when programs/facilities are at capacity. In 2005, one program closed and one opened.

Phoenix: According to the Regional Continuum of Care Homeless Population Chart, there are 2,497 transitional housing beds specifically for homeless families in the Phoenix metropolitan area. This is a decrease of .56% or 14 beds from last year.
Single Room Occupancy Units

Single room occupancy units increased by an average of 12 percent across the survey cities. Forty-three percent reported an increase in the number of SRO units: Chicago, Detroit, Louisville, Philadelphia, Portland, San Antonio, San Francisco, Santa Monica, Seattle, and St. Paul.

Among the comments from the city officials on the number of SRO units:

**Boston:** Forty-three hundred and six SRO units in 184 licensed lodging houses; permanent supportive housing for previously homeless people with disabilities: 388 family units and 1983 units for individuals. There are also permanent supportive housing units for formerly homeless people with disabilities: 388 family units and 1983 units for individuals.

**Cedar Rapids:** There has been no change.

**Cleveland:** While the availability of SRO units remains limited, Cleveland is very successfully using scattered site rental subsidy programs to provide permanent housing for formerly homeless persons in private market units. The Shelter Plus Care Program and the Gateway Program, which uses a set aside of Housing Choice Vouchers, are currently funding over 2000 units of housing. There are also now under development three supportive housing projects to address permanent housing needs of long term homeless persons with disabilities.

**Detroit:** The city is currently working on strategies to develop more permanent supported and affordable housing units for homeless persons and families.

**Nashville:** One hundred twenty units are HUD SRO; 40 SRO units (not funded by HUD) opened in 2000 at the Nashville Rescue Mission. Including these SRO units, there are 900 units of permanent housing specifically for homeless people in Nashville.

**Philadelphia:** Total Number of permanent housing beds (including SRO units) is 6275. The 7 percent change represents a 7 percent change in permanent housing beds, there was no change in SRO units.

**Phoenix:** There are 135 SRO units specifically designated for homeless persons in the city. Phoenix does have other SRO units, but they are not targeted specifically to homeless persons. According to the Regional Continuum of Care Homeless Population Chart, there are 2,298 Permanent Supportive Housing beds in the Phoenix metropolitan area. This is a decrease of 33.1 percent or 761 PSH beds from last year. This reduction appears to be a result of a change in bed classification methods, not a loss of beds.

**Salt Lake City:** There are very few SRO units left in Salt Lake City. A fire earlier this year destroyed the Stratford Hotel, which had 49 SRO units, thereby decreasing the number of units available.

**San Antonio:** Single Room Occupancy (SRO) units are defined by the U.S. Department of Housing and Urban Development as housing units for occupancy by one person in which the Public Housing Agency (San Antonio Housing Authority) provides payment assistance for homeless persons through moderate rehabilitation and Section 8 Programs.
San Francisco: San Francisco brought several SRO Supportive Housing Buildings on line this year.

Seattle: Permanent housing (256 units) plus permanent supportive housing (1379 units) for single individuals and families are reported. In addition, there are another 429 Shelter Plus Care units in Seattle.

St. Paul: We were fortunate to have one large project come on line in the past 12 months as well as one small project expand its units. Progress in SRO units is not usually so dramatic.

Family Break-Up-A Requisite for Shelter

In fifty-seven percent of the cities, homeless families may have to break up in order to be accommodated in emergency shelters.

Among the explanations by city officials for families having to break-up in order to be sheltered:

Boston: Sometimes an adult male has to be sheltered in a single adult shelter while mother and children are in family shelter.

Cedar Rapids: When programs are operating at capacity, some families have broken up to receive shelter.

Charlotte: Very few beds exist to accommodate intact families with an adolescent or older male.

Chicago: No. However, while some shelter facilities, mainly facilities that offer single rooms, can house intact families, many cannot, especially for mothers with older children (11 years of age and above). CDHS makes every effort to increase the number of shelters that are able to accommodate two parent families by placing priority on funding for those shelter programs.

Cleveland: One shelter can accommodate two parent families. If that shelter is full, couples may have to go to separate shelters. The state shelter standards have been changed to prevent publicly funded shelters from continuing policies that separate teenage boys from their mothers.

Denver: Due to the general lack of availability of emergency shelter for two-parent families (there is one such facility in the city), most male head of households seek other shelter in order for their wife and children's needs to be accommodated.

Detroit: Some emergency shelters does not allow males, therefore, youth 12 years of age and older would be split from the family and referred to another shelter within our network of service providers.

Louisville: Male children 14 years or older must sleep in the single men's shelter. Most shelters also require homeless parents to split up according to gender.

Nashville: MAC: "It is very hard to place a family together if male children over 8; most single female households remain w/o shelter rather than having to separate from their male children." Nashville Rescue Mission: "Yes, men and older boys stay at the men’s shelter; women and younger boys and girls stay at the women’s Shelter". Nashville Safe Haven Family Shelter: "The other emergency shelter in
town requires the father and older male children to stay separate from the mother and other female or younger male children. However Safe Haven Family emergency shelter provides shelter without requiring the family to split up”.

**Phoenix:** Families do not have to break up to be accommodated in emergency shelter. Most emergency shelters in the metropolitan area accept two-parent families with children. Some domestic violence shelters are unable to accommodate older boys. These families are not split up, but rather referred to programs that can accommodate their family structure.

**Portland:** Some domestic violence shelters do not take male children age 12 and over. Additionally, one faith-based shelter for families will not allow an adult male to stay in the same room as his wife/partner and children.

**Salt Lake City:** At Utah's largest shelter, The Road Home, families can stay together, but other shelters have restrictions on adult men and male children over age 10. The Road Home is the only shelter to accept two parent families, single male headed families and male children over age 10. The Road Home Family Shelter is the only shelter to accept two parent families, single male headed families and male children over age 10.

**San Antonio:** There are programs like The Salvation Army Hope Center and the SAMM shelter that accommodate intact families. The City's Dwyer Avenue Center also provides emergency shelter for intact families.

**Santa Monica:** Although we have one mission that provides emergency shelter to families, most families in need of assistance choose to leave Santa Monica. Agencies will assist families in identifying appropriate shelters in other cities.

**St. Paul:** Those families which are "ad hoc" families often have to split up if the male is not the parent of one of the children."

**Trenton:** Although we attempt to keep a family unit together, at times if children are teenagers we may have to place the older teen with family member or friends.

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### Limitations on the Use of Shelter Facilities/Alternatives during the Day

**Officials in 48 percent of the survey cities report that homeless families may have to leave shelters in which they are staying during the day.** The rest of the survey cities homeless families do not have to leave shelters in which they are staying during the day.

Among the comments from the city officials on the necessity of leaving shelters and where homeless people go during the day:

**Boston:** Shelters are not closed during the day but families have to participate in housing search which often requires leaving the shelter during the day.
Cedar Rapids: There is lack of funding to staff most programs 24 hours a day. Women and children go to daytime shelter. Men go to library, transit center, temporary employment sites, etc.

Charleston: Families may remain in the Family Center at Crisis Ministries during the day and stay off of the streets. In addition, they are assisted with employment, housing and day care.

Cleveland: Most shelters do not require families to leave during the day. Children are expected to go to school. Adults can participate in services or seek housing and employment.

Denver: In general, shelters in Denver serving homeless families require that the families be seeking employment, benefits, housing and other available resources during the day.

Detroit: Families are encouraged to seek employment, and other benefits services while living at the shelters. During the day most school age children are in school or provide in-house childcare while the parents seek employment or skill training.

Nashville: Most programs offer nigh-time accommodation. Most people go back to the streets until they can return to the shelter. Nashville Rescue Mission: “Yes, they go to our day rooms in the basement or courtyard behind the shelter. Or any other place they desire. All children must be enrolled in school after three days at the shelter so kids are in school during the school year.” Nashville Safe Haven Family Shelter: “No, Safe Haven provides 24 hour shelter for homeless families 365 days a year. Families are not required to leave during the day”.

Phoenix: Emergency shelter programs for families offer a comprehensive array of support services to assist families in improving their quality of life and achieving stability. Services include education and job development, counseling and life skills, mental health and substance abuse treatment services, school and daycare, and a myriad of other services. These services occur both daytime and evening hours to accommodate the unique needs of each individual family.

Portland: Homeless families who stay in church-based shelters that are open only during winter months leave during the day (with one exception). These families may access day services at a downtown facility operated by the Salvation Army who receives funding from Multnomah County.

San Antonio: Programs, such as the SAMM Shelter, encourage residents to leave the shelter and seek employment during the day and enroll the children in day care and school.

Santa Monica: Individuals residing in emergency shelters are required to attend support groups, job training classes, search for work or be employed.

Seattle: Many of the shelters are located in multi-purpose buildings or locations that are utilized for other purposes during the day. Many families are participating in TANF work searches, school, working or need to address issues associated with homelessness such as seeking permanent housing, treatment, locating childcare or schools for their children, and locating meal programs and resources for their families. In addition, homeless people utilize day centers, libraries, local parks, and hang out on the streets when nothing else is available.

St. Paul: If you stay in a Church shelter, you will leave during the day and be transported to a day shelter. This same facility also serves as the drop-off/pick-up site for the school system. If you are in the Family Service Center Shelter, you do not have to leave during the day.
**Trenton:** Individual shelters are only opened from 4:00 pm to 8:00 am and during the day they go to a safe haven. Family shelters accommodate families all day long but require the families to meet their Work First New Jersey program regulations during the day.

## Funding

**Approximately 420,120,243 dollars was used by the survey cities for homeless services during last year.**

Cities that used **locally generated funds** to support homeless services:

<table>
<thead>
<tr>
<th>City</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boston</td>
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<tr>
<td>Burlington</td>
<td>15,000</td>
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<td>Cedar Rapids</td>
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<td>Phoenix</td>
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<td>San Antonio</td>
<td>1,121,060</td>
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<tr>
<td>San Francisco</td>
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<tr>
<td>Santa Monica</td>
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<tr>
<td>Seattle</td>
<td>7,489,964</td>
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<tr>
<td>St. Paul</td>
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<tr>
<td>Trenton</td>
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Cities that used **state grants** to support homeless services:

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<td>St. Paul</td>
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Cities that used McKinney Act funds to support homeless services:

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<tr>
<th>City</th>
<th>Population</th>
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<tbody>
<tr>
<td>Boston</td>
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<td>Providence</td>
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<td>Salt Lake City</td>
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<td>St. Paul</td>
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<td>Trenton</td>
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Cities that used Community Services Block Grant funds to support homeless services:

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<td>Detroit</td>
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<td>Los Angeles</td>
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<td>Louisville</td>
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<td>Salt Lake City</td>
<td>438,600</td>
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<td>San Francisco</td>
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<tr>
<td>Santa Monica</td>
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Cities that used **Community Development Block Grant funds** to support homeless services:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Seattle</td>
<td>3,713,130</td>
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</tbody>
</table>

**Unmet Need**

An average 14 percent of shelter requests by homeless people are estimated to have gone unmet throughout the survey cities. Estimates of unmet requests range from 38 percent in Phoenix, 32 percent in Burlington, 27 percent in Portland, 20 percent in Denver and Providence, 15 percent in St. Paul, 10 percent in Boston, and 5 percent in Cedar Rapids, Charleston, and Trenton.

Among the comments from the city officials on requests by all homeless people for emergency shelter which must go unmet:

**Trenton:** The city does have individuals and families who refuse the accommodation which we provide but none are turned away or denied housing.

An average 32 percent of the shelter requests by homeless families are estimated to have gone unmet during the last year in the survey cities. Estimates of unmet family requests range from 54 percent in Salt Lake City, 45 percent in Denver and Phoenix, 40 percent in San Francisco, 34 percent in Portland, 25 percent in Santa Monica, 20 percent in Nashville and Providence, 5 percent in Charleston and Trenton, and 2 percent in St. Paul.

Among the comments from the city officials on requests for emergency shelter specifically by homeless families which go unmet:

**Trenton:** Families with children are the city’s priority and we try very hard to place every homeless family. Maybe 5 percent declines our services but ultimately find family, friends or acquaintances that house them on a temporary basis.

**People Turned Away From Emergency Shelter**

In 88 percent of the survey cities, emergency shelters may have turned away homeless families due to a lack of resources:

Among the comments from the city officials:

**Boston:** Homeless families who cannot get into State-funded shelters double up with friends and family. Families also try to get into one of the 50 shelter beds state-wide that are privately funded. The City of
Boston also provides funding to Traveler's Aid Society to provide short term shelter for families who have no other options.

**Burlington:** They are accommodated in motels, safe houses, or double up.

**Cedar Rapids:** They are referred to other local programs. The Salvation Army provides limited motel vouchers when overflow occurs. In other cases these individuals double-up with family or friends.

**Charleston:** Crisis Ministries' census has been at capacity throughout the year and this necessitated turning individuals away. While compiling this report case managers on Crisis Ministries' staff reported receiving calls from eight hospitals throughout the state asking that they admit patients ready for discharge. Case managers were forced to refer to other shelters.

**Chicago:** All persons who are in need of emergency shelter have access to the 311 system which can provide homeless individuals the necessary resources for shelter placement.

**Cleveland:** Families that can not get into a full service family shelter are housed overnight at the Community Women's shelter. They are moved to a full service family shelter as soon as there is a vacancy.

**Denver:** The city and county of Denver continues to supplement emergency shelter for families through the use of emergency hotel and motel accommodations for families for whom no shelter is available on any given night. However, this can only occur for limited amounts of time.

**Detroit:** Detroit currently has approximately 15,000 homeless persons living in our City. The unmet gap of services is 11,000. That's why we're working diligently to develop long term solution to ending homelessness in the City. We need additional funding as well as housing. Nationally, there is a tremendous shortage of affordable housing units for low income and homeless individuals and families.

**Louisville:** The Coalition for the Homeless estimates that for every person who seeks emergency shelter, one is turned away. Louisville Metro Human Services assesses families and individuals unable to get into emergency shelters. Though the numbers assessed for the period of October 2004 through September 2005 decreased over last year, 186 families and 84 individuals sought services as an alternative to entering the shelters.

**Miami:** MHAP keeps a list for request from families However, most of these families could be referred to transitional & permanent housing with supportive services if they were available.

**Nashville:** Campus: "The Campus does not offer shelter through April 1-October 31. Lack of family shelters. Women Shelters that do not take male children over the age of 12 years. Room In the Inn never turns away families as long as parents follow the guidelines". The Salvation Army: "Yes at times. Only if housing is at capacity or clients do not qualify for program. They are referred to other agencies, stay in cheap hotels or on the streets".

**Nashville:** Safe Haven Family Shelter: Yes. "As stated earlier with 726 calls for shelter and only 45 beds available for families with minor children at a given time. Many families are forced to split up and stay at the separate missions. Others in the winter months stay at Room In the Inn program. Others stay in the streets or camp out in sometimes home made tents. Or they will move on to another town in hopes to find shelter for their families as a whole unit". 
"Morning Star Sanctuary: Yes. "We have to turn away families due to lack of space and failure to meet criteria; we refer them to other shelters that may be able to meet their needs or accommodate them".

Phoenix: According to the Regional Continuum of Care point-in-time shelter count conducted January 25, 2005, 133 homeless families were turned away that day because of lack of capacity. Families who are turned away from shelter are referred to the CONTACS shelter hotline and the Watkin's Emergency Shelter Program (overflow program). When eligible, families who cannot access shelter are placed in hotels until a shelter space is available. Families who do not access services end up sleeping in their car, doubling up with a friend or relative, or seeking refuge with faith-based organizations.

Portland: Most families that cannot be accommodated in emergency shelter or who do not receive vouchers for shelter in motels are living doubled up with family members or friends. Others camp outside or sleep in cars/vans. These arrangements are precarious, at best. During the winter months, there is additional space in church shelters for 42 individuals in families. If weather conditions are life threatening, families receive vouchers for motels.

Providence: People who are turned away live in cars, with other families or in the streets.

Salt Lake City: Families are put on waiting lists and must call in every day to maintain their position on the list. Some families are supported by various social service agencies at local motels for a limited time while others may stay with family or friends. During the cold winter months, from November 1 through March 31, families stay at The Road Home Community Winter Shelter in Midvale, Utah, and no families are turned away. Efforts are ongoing to place as many families as possible, as quickly as possible, into transitional or permanent housing with case management.

San Antonio: SAMMinistries, which operates one of the largest shelters in town, reports that there are occasions when it turns families away. In these instances, staff directs clients to other available shelters when beds are available. The Dwyer Overflow Shelter accommodates some of these families.

San Francisco: We average 70 families on the wait list for emergency shelter.

Santa Monica: They are referred to shelters in nearby cities. There is some assistance in the form of motel vouchers but this is a very limited resource that is primarily used to assist families/individuals that are in the final stages of obtaining permanent accommodations.

Seattle: Although the city has allocated significant resources in recent years to increase shelter capacity, local shelter providers under contract with the City continue to report turn-a-ways due to lack of resources.

St. Paul: People usually move to the Safe Waiting Program (mats on the floor) run by Catholic Charities with help from the County, the City, and private donors, or travel to the next county and their shelters, or simply disappear.

Trenton: Individuals who are turned away generally go to an overflow shelter for evening hours only. Families who are turned away are generally housed by the homeless hotline or the city of Trenton emergency placement in motels. According to Greater Trenton the only emergency shelter for adults has a limited number of beds when those beds are filled, individuals are turned away. Their only option is to stay in the street, abandon buildings, or to seek shelter in a hospital when the weather is very cold additional beds are made available by the city.
In 79 percent of the survey cities, emergency shelters may have to turn away homeless people other than families because of a lack of resources:

Among the comments from the city officials:

**Boston:** Shelters try to arrange for homeless individuals to be transported to other shelters that have openings. In the winter, shelters expand capacity so that everyone who wants to come inside can do so. However, this may mean sleeping in a cot or floor space in a shelter lobby rather than accessing a shelter bed.

**Burlington:** The youth shelter exceeds capacity. Adult shelters can generally meet the demand.

**Charleston:** Emergency shelter for men is scarce especially for short stays and for those individuals who are not willing to comply with rules of congregate living and rules because of crowding.

**Charlotte:** Both primary shelters have been operating beyond capacity for the entire year. Those turned away from the shelters often end up on the street.

**Chicago:** The City of Chicago operates an Emergency Shelter Clearinghouse, which identifies shelter bed availability in the Shelter Clearinghouse System on a 24 hour basis. At times when shelter capacity for homeless persons is insufficient to meet demand, the city expands its overflow capacity to accommodate the homeless. Additionally, during times when demand exceeds supply, shelter needs are absorbed by other shelter providers throughout the City.

**Cleveland:** It has been a community policy to accommodate all persons seeking sleeping space inside. There is currently sufficient overflow space to assure that no one has to be turned away.

**Denver:** The city continues to experience an overall lack of adequate emergency shelter for homeless females even with the current expansion of one of the two major shelters devoted solely to homeless females. An emergency cold weather shelter has been added for forty women.

**Louisville:** Many times beds are not available for single men and women, and they must sleep on mats or cannot get into the shelter at all Volunteers working with the January 2005 Street Count found 95 people on the street that night.

**Miami:** Demand exceeds supply in our city.

**Nashville:** Yes.

**Phoenix:** According to the Regional Continuum of Care point-in-time shelter count conducted January 25, 2005, 1,693 homeless single individuals were turned away from emergency shelter programs that day because of lack of capacity. Persons who are turned away from shelter due to lack of capacity are referred to the CONTACS shelter hotline and Watkins Emergency Shelter Program (overflow program). Those who do not access regular or overflow shelter end up sleeping on the streets, in river bottoms, in abandoned buildings, or other places not meant for human habitation.

**Portland:** Many who cannot be accommodated in emergency shelter are precariously doubled up with family members or friends or sleep in cars/vans. Portland has a large population of single adults who camp outside. During the winter months, there is additional space for 255 individuals.
Providence: They sleep on the floor if they have no where else to stay.

Salt Lake City: Single men and women are put on waiting lists and must call or check in every day to maintain their name on the list. During cold months, no one is turned away. Men are housed at the Community Winter Shelter in Midvale, Utah or at St. Vincent de Paul Center in Salt Lake City. Single women are provided with cots in the lobby and kitchen of The Road Home Women's Shelter.

San Antonio: "SAMMinistries, places individuals in open ""program"" beds, when normal shelter beds are full. On extremely cold nights, mats are place in the ""Banner Room"" for overnight guests. Blankets are provided for those individuals who choose to sleep outside the shelter. Many people remain on the street at night in ""safe zones"". A ""safe zone"" is private property where homeless are allowed to sleep undisturbed by police."

Santa Monica: They are placed on waiting lists and referred to other shelters outside of Santa Monica until space is made available. According to the 1999 Homeless Census, approximately 64 percent of homeless individuals sleep outdoors.

Seattle: Some shelter referral programs in our community report turn-aways due to lack of resources. These individuals seek help from other shelters, end up on the streets or they double up with family/friends, if they have this option.

St. Paul: People usually move to the Safe Waiting Program (mats on the floor) run by Catholic Charities with help from the county, the city, and private donors, or travel to the next county and their shelters, or simply disappear.

Trenton: The city has a policy that during inclement weather, no resident will be denied shelter. Residents may turn down the accommodations. According to VOA, there are indications that they stay outside in the streets in abandon buildings, and at the local train station.

Main Causes of Homelessness

A number of diverse and complex factors have contributed to the problems of homelessness in the survey cities. Many of these factors are interrelated. Listed in order of frequency, the following causes were identified by the cities in response to an open-ended question: lack of affordable housing, low paying jobs, mental illness and the lack of needed services, substance abuse and the lack of needed services, domestic violence, unemployment, poverty, and prisoner re-entry.

- Lack of affordable housing was identified as a major cause of homelessness in 19 cities: Boston, Burlington, Cedar Rapids, Charleston, Charlotte, Chicago, Cleveland, Denver, Detroit, Louisville, Nashville, Phoenix, Portland, Providence, Salt Lake City, San Francisco, Santa Monica, Seattle, and Trenton.

- Low-paying jobs were cited by 17 cities as a main cause of homelessness: Burlington, Cedar Rapids, Charleston, Charlotte, Chicago, Cleveland, Denver, Detroit, Louisville, Nashville, Philadelphia, Phoenix, Portland, Providence, Salt Lake City, San Antonio, and Seattle.
Mental illness and the lack of needed services were identified by 16 cities as a primary cause of homelessness: Boston, Burlington, Cedar Rapids, Charleston, Chicago, Cleveland, Denver, Louisville, Los Angeles, Nashville, Phoenix, Portland, St. Paul, San Antonio, Santa Monica, and Trenton.

Substance abuse and the lack of needed services were identified by 15 cities as a main cause of homelessness: Boston, Burlington, Cedar Rapids, Chicago, Cleveland, Denver, Louisville, Los Angeles, Nashville, Philadelphia, Phoenix, Portland, St. Paul, San Antonio, Santa Monica, and Trenton.

Domestic Violence was identified as a primary cause of homelessness by 12 cities: Burlington, Cedar Rapids, Charleston, Chicago, Los Angeles, Nashville, Philadelphia, St. Paul, Salt Lake City, San Antonio, Seattle and Trenton.

Unemployment was identified as a main cause of homelessness by six cities: Cedar Rapids, Los Angeles, Providence, Salt Lake City, San Antonio, and Trenton.

Poverty was cited by five cities as a main cause of homelessness: Chicago, Phoenix, St. Paul, San Antonio, and Seattle.

Prisoner re-entry was identified as a major cause of homelessness by 4 cities: Charleston, Cleveland, Phoenix, and Salt Lake City.

Exemplary Programs

Among the comments from the city officials on an exemplary program or effort underway that prevents or responds to the problems of homelessness:

Boston: The Boston Health Care for the Homeless Program is a leader locally and nationally in the delivery of health care to homeless people. Health Care for the Homeless created the nation's first and most comprehensive medical respite program for homeless adults. The 90-bed facility, the Barbara McInnis House, provides medical and nursing care for homeless individuals who are too sick for shelters or the street but not sick enough to warrant an in-patient hospital stay.

Cedar Rapids: The Linn County Continuum of Care is a broad-based 48-member community planning advisory council that focuses on homelessness, hunger, and housing.

Charleston: In October the Humanities Foundation opened North Central Apartments, 36 units for low-income elderly people. The project was funded through a variety of sources. Humanities Foundation was awarded Low-Income Housing Tax Credits for the project. Funds were also secured through the Affordable Housing Program at the Federal Home Loan Bank. The city contributed to the project through their HOME program. A grant from HUD's Continuum of Care Program allowed four of the units to be reserved for homeless people moving into permanent housing. Construction and Permanent Loans were secured from First Federal Bank. This creative use of funding resulted in a beautiful community that provides housing and services to tenants who never dreamed they could live in such a safe and decent neighborhood. FHLB and HUD's SHP both require supportive services for their tenants.
as part of the Affordable Housing Programs. Some of the services being offered through this program are: health services, meal programs, case management, cultural programs, organized social activities, budget counseling, literacy training, and utility assistance. The majority of the residents are willing to participate in these services and turnout is usually high. The Continuum of Care Supportive Services Grant provides for intensive services such as bill paying, cooking lessons, assistance with medication, transportation, rental and utility assistance. This project has been a huge success and stands as an example of how to combine public and private funding to respond to the special needs of housing elderly homeless adults.

**Charlotte:** The city and county are in the process of preparing a 10-year plan to end homelessness. A permanent site for the Emergency Winter Shelter was secured and opened on November 1st.

**Chicago:** The Chicago Department of Housing (DOH), in support of Chicago’s Plan to End Homelessness, recently awarded dollars to selected agencies as a result of two grant applications: the Housing Locator Program and the Street-to-Home Initiative. The primary goal of the Housing Locator Program is to facilitate the rapid re-housing of homeless individuals and families currently in the shelter system. While no rental subsidies were committed with this application, the program is intended to build upon the expertise and capacity of Chicago’s homeless system in easing access to permanent housing units. Housing locator staff will identify available private market rental units that are or can be made affordable to households exiting Chicago’s homeless shelters. Such individuals or families must meet the United States Department of Housing and Urban Development’s definition of homeless. Three agencies were selected to participate in the Housing Locator Program. A total of $300,000 in funding was distributed to support six housing locator staff positions. Contracts are for one-year terms, renewable up to five years based on performance outcomes. The Street-to-Home Initiative’s primary goal is to facilitate permanent housing for unsheltered homeless individuals who are currently residing in public spaces such as downtown areas and lakefront parks. Via this initiative individuals will be placed into permanent housing and will receive supportive services in an effort to retain it. Five organizations were selected to participate in this Initiative. A total of $500,000 was distributed among the agencies to provide supportive services for up to 100 individuals. Contracts are for one-year terms, renewable up to five years based on performance outcomes.

**Denver:** The Ten Year Plan to End Homelessness as implemented by the Denver Commission to End Homelessness along with the Denver Housing First Collaborative (DHFC) are working toward permanent housing solutions, is an exemplary program.

**Detroit:** The city and our local homeless network of service providers have partnered to develop solutions to the homeless issues that effects out citizens. We currently have programs like Coalition on Temporary Shelter (COTS), which has been providing emergency shelter, transitional housing, and developing permanent supportive housing units for homeless families.

**Los Angeles:** The Center for the Pacific Asian Family currently has an agreement with the Los Angeles County District Attorney's office intends to improve the response to homelessness due to domestic violence in the Asian Pacific Islander community. The CPAF hotline receives calls forwarded from the Los Angeles County Domestic Violence toll free hotlines when callers request assistance in Cantonese, Japanese, Korean, Mandarin, Tag-a-long, Thai, and Vietnamese.

**Louisville:** Kentucky’s Homeless Prevention Pilot Project requires that people leaving foster care, mental health hospitals, and correctional facilities receive discharge planning services that include housing placement and links to other programs to assist the individual with re-entry into the community. The Project will test its program in two jurisdictions: Louisville Metro/Jefferson County and
Cumberland County. Participation of persons being discharged from the institutions shall be voluntary with the goal that at least one of five persons discharged receive services. The Kentucky Cabinet for Health and Family Services and the Kentucky Justice Cabinet have designated a homelessness prevention coordinator. Ninety days prior to release of a person from a foster home, mental health facility, or correctional facility, the discharge coordinator develops a comprehensive discharge plan to address the housing, employment, health care, and other needs, subject to the consent of the person to be released. Each site collects data about the discharge plans, referrals, costs of services, and the rate of recidivism related to the homelessness prevention program. The site also submits an annual report to the Governor and a legislative committee that summarizes the data and makes recommendations to replicate the model.

Miami: The Miami Homeless Assistance Program provides outreach to the homeless and near homeless. We operate a toll-free number 15 hours per day, 7 days per week. The unique approach of hiring formerly homeless individuals, providing them with support services and training them in outreach and assessments modules resulted in helping over 29,000 people in 2005.

Nashville: Park Center: Park Center offers transitional housing on those on the streets and assist the residents meet immediate needs. Once needs are met there are options available in other portions of our housing program. Shelter plus units may be available as well as permanent housing for homeless individuals. If this is not suitable for the resident assistance with rental deposits, rent and utility deposits is provided to get them started. The resident also receives a home starter kit once they find something more permanent. Renewal House: Renewal House provides Nashville’s first, largest and most comprehensive residential recovery program that makes it possible for homeless substance-addicted mothers and their children to heal as a family, develop a drug-free lifestyle and prepare to live independently as productive members of the community. During six to 15 months, a mother and her children reside in the drug-free environment at Renewal House while the mother completes a structured program that integrates addiction recovery, parenting and employment. To graduate, a mother must have held a job for 90 days and must have arranged stable, permanent housing for her family. In its first nine years, the residential program has provided more than 170 families the opportunity for a drug-free beginning. By avoiding welfare, health care and criminal justice costs and by the contribution made to the economy from the mothers becoming employed, the program’s benefits to the community have exceeded $8 million.

Philadelphia: On October 12, 2005, Mayor John F. Street endorsed the 10 Year Plan to End Homelessness in Philadelphia, including the creation of hundreds of units of housing for homeless individuals and families, and the identification of $10 million in resources to eliminate homelessness throughout the city.
The 10 Year Plan to End Homelessness contains the following eight goals:
1. Open the “back door” out of homelessness—ensure that all Philadelphians have a decent, safe, accessible and affordable home.
2. Close the “front door” to homelessness—implement successful prevention strategies.
3. Ensure that no one in Philadelphia needs to live on the street.
4. Fully integrate all health and social services to aid in preventing and addressing homelessness.
5. Generate the political will, civic support, and public and private resources to end homelessness.
6. Build human capital through excellent employment preparation and training programs, and jobs at a livable wage.
7. Make shelters a dignified place for emergency assistance, not a destination.
8. Support families and individuals to promote long-term independence and prevent their return to homelessness.

The following are the initial commitments of funding resources toward the Plan:
§ $5 million in community behavioral health reinvestment funds to help families and individuals in emergency housing when they are suffering from mental health or drug addiction problems;
§ $2 million from NTI bond proceeds and the new Housing Trust Fund to prevent families and individuals from falling into homelessness in the first place;
§ $2 million, mostly from Federal housing funds, for new housing initiatives – 600 units of subsidized housing for homeless families over the next 2 years, and 100 beds for individuals who have been homeless for years: living on the streets or in and out of shelters, jail and hospitals; and
§ $1 million for the planning and implementation of this Plan that will be raised through grants and donations.

In the coming months, the city will work with providers, advocates, consumers, and others to develop business plans for the implementation of the eight goals outlined in the current Ten-Year Plan. This business plan will present a road map to delivery of the kinds of services, job opportunities, and housing that will make Philadelphia the first city to end homelessness.

**Phoenix:** The city of Phoenix Human Services and Police collaborated to develop and implement an innovative program to end chronic homelessness in downtown Phoenix. Recently, the program received a City of Phoenix Award of Excellence. The C.A.R.E. (Collaborative Assistance for Residential Empowerment) Connection Program is a multi-organizational effort to end chronic homelessness in the downtown area by connecting chronically homeless individuals with permanent supportive housing. The program is composed of three main activities.

1. **Care Teams -** Aggressive outreach is performed by “Care Teams” coordinated by the Strategic Outreach Officer who is a police officer specially trained to work with chronically homeless individuals. The teams are multi-organizational groups, including professionals specializing in mental health, substance abuse, case management, advocacy and law, judicial processes, and safety and law enforcement. The key to multi-organizational case management is consumer consent which allows Care Team representatives to share information and leverage resources. Once consent is accomplished, the teams form collaborative strategies to build trust and assist chronically homeless individuals, who are frequently service resistive. This is accomplished through a variety of means such as providing food, clothes, transportation, work opportunities and in general, rapport building to eliminate many of the barriers that stand in the way of connecting the consumer to services and permanent supportive housing. These teams continue to monitor and help consumers maintain their associated appointments, evaluations, meetings, etc.

2. **Connection to Care -** The traditional police response to complaints of chronically homeless
individuals engaged in “nuisance” type offenses is to conduct a “sweep” in which chronically homeless individuals are rounded up, arrested, and booked into jail. This process is cost intensive for both the law enforcement and criminal justice systems, and results in additional barriers in efforts to transition from homelessness to housing. Typically, individuals are processed in and out of jail without any beneficial services or treatment being rendered. The “Connection to Care” program seeks to approach this from a different mindset. During these events, chronically homeless individuals contacted who are engaged in “nuisance” activities are offered an opportunity to enter a diversion program which provide clothing, food, and water; and treats individuals in a positive manner rather than a punitive fashion. They are “triaged” by a variety of mental health, substance abuse, health care, and housing professionals and are provided immediate access to services in lieu of arrest. These programs connect a high proportion of service resistant, chronically homeless individuals to services and benefits, providing them avenues to transitional and permanent housing.

(3) Permanent Supportive Housing - Utilizing a “Housing First” approach, the Strategic Outreach Officer coordinates comprehensive supportive services for participants housed through the program and serves as a liaison to partnering service providers to assist participants in maintaining independence. All program participants receive assistance in attaining permanent supportive housing.

The CARE Connection program is having tremendous success engaging chronically homeless individuals who have been on the streets for years in services they have not accessed in the past. Outcomes include reconnecting with family, attaining sobriety, participating in regular mental health services, and moving into permanent supportive and affordable housing.

**Portland:** A program enabled VOA-Home Free closed their shelter in 2002 and began to provide service through mobile advocacy that houses women in motels, and provides rental assistance. This program has increased the number of women being served each year by 20 percent. In addition, the women seem to be more successful at remaining independent of their abuser.

**Salt Lake City:** During 2004/2005, the Utah Homeless Management Information System was implemented. Homeless providers throughout Salt Lake County and the State of Utah collaborated with The Road Home as the pilot location for a new state-wide client management information system. In order to provide a better planning tool, past client information was converted to the new database and staff was trained on the system. This will enable homeless providers to gather more accurate information, better analyze services and compile client demographics. The new database enabled providers to analyze data on clients who are chronically homeless, and as a result 22 new individuals and families who were chronically homeless have been provided with housing and ongoing supportive services. An additional 45 chronically homeless households were provided with ongoing housing and services. A partnership has been developed with the State of Utah, local housing authorities and service providers to continue to focus on the provision of housing and services to the chronically homeless.

**San Antonio:** In March 2005 the city utilized general funds to subcontract with three agencies to provide day center facilities and assistance for persons not in shelter. The facilities include provision of showers, clothing, access to telephone, television areas, and restrooms. Services include nutrition assistance, counseling assistance, legal aid, child care, identification recovery assistance, and assistance with making application for entitlement programs. During the seven month period beginning 3/1/05 - 9/30/05 3,609 person were provided day center services including referrals to social services (403 person) assistance with entitlement applications (514 persons). Outreach efforts provided accessibility to services for 657 persons.
**San Francisco:** Project Homeless Connect is an initiative to engage the general public towards innovative solutions to homelessness. Our goal is to consolidate available services and connect individuals to benefits, medical care, substance abuse and mental health counseling and a variety of social services which can help lead to pathways to housing and self sufficiency. Numerous city departments, non-profit agencies and over 1,000 committed San Franciscans have participated to date in this growing, grass roots program to help those individuals who need the most help. At Project Homeless Connect 7 some of the following statistics were accumulated: Total clients served: 1,320; Total clients seen at Medical: 285; Behavioral Health (Detox, maintenance, substance abuse residential treatment and mental health): 161; Vision Care / Glasses: 200; Benefits Support / Counseling: 230; Employment Services: 58; Legal: 232; Massages: 55; Foot Washing: 78; Wheelchair Repair / Replacement: 11; Free Phone calls: 436; Housing Information / Referral: 267; 137 who were sleeping on the street on Monday night were inside on Tuesday night - 117 in shelters, 20 in stabilization rooms; Total clients served: 1,133; Total clients seen at medical: 243; Dental: 71; TB Testing: 25; Prescription Glasses: 125; Detox slots: 75; Methadone maintenance: 4; Mental Health Screening: 53; Free phone calls: 308 (to 15 states); Employment & Workforce Development: 161; Apprenticeship slots: 24; Legal: 153; 126 who were sleeping on the street on Wednesday night were inside on Thursday night through a combination of shelter, stabilization units and the Salvation Army Harbor Light program.

**Santa Monica:** In July, 2004, City Human Services staff initiated the development and implementation of a collaborative pilot project to reduce the number of chronically homeless persons living on Santa Monica streets and other outdoor public places by helping them to secure housing, benefits and supportive services, including mental health treatment and/or substance abuse treatment. This pilot project is consistent with the goals of many communities which have responded to the call from the National Alliance to End Homelessness and the federal Interagency Council on Homelessness to develop plans and strategies to end chronic homelessness. The Santa Monica pilot project focused on those chronically homeless persons who have been homeless in Santa Monica for a period of years, are the most visible in the community, are high users of police, paramedic and emergency room resources, but are the least successful in accessing services in the homeless continuum of care designed to move them off the streets. A team approach was employed to effectively serve the target population. The team was comprised of representatives from city departments (Human Services, Police, Fire/Paramedics, and Resource Management/Housing), the County Department of Mental Health, and local non-profit homeless service providers. The role of the team was to develop protocols for the project, identify chronic homeless persons for consideration, develop individualized intervention/treatment plans for each client, coordinate case conferences, advocate for needed resources, identify and address barriers to success, evaluate project outcomes, and enlist community support. To date, 25 people have been enrolled in this pilot project, 10 are in permanent housing, 4 are ready to enter housing and are looking for units, 8 are homeless and in the process of engagement, 2 are in jail or in the hospital and one has passed away. A review of the demographic characteristics of the 25 participants to date reveals the following: 13 were male, 12 were female; 5 were veterans; the average age is 55.7 years, two are over 70 years of age; the total time homeless is 307 years, the average time homeless is 12 years. The pilot project has demonstrated the successful use of a multidisciplinary team to strategically assess a person’s needs and then focus resources and interventions. And while it requires additional administrative costs to plan, oversee, manage and coordinate services, the successes and lessons from the pilot effort have led participating agencies – including the city - to commit to expand the pilot in the coming year.

**Seattle:** The Compass Cascade Women’s Center, opened by the Lutheran Compass Center in 1999, provides transitional living space for 32 homeless women. It is situated in a neighborhood where residents have access to small groceries, a food bank, a park and a community garden, as well as a comprehensive family/community center. Women are able to live at the Women’s Center for up to one
year, allowing them time to obtain more permanent housing, address issues that hinder progress, and avoid returning to homelessness. The program enables women to rebuild attachments and establish support systems.

The Community Integration Project, a special program of the Center, includes formerly homeless women and volunteers who help integrate homeless women into community organizations, support groups, internships, and educational and volunteer opportunities. The goal of this project is to empower women to take control of their lives, to develop personal support systems across economic divisions, and to break free of isolation. A monthly alumnae dinner encourages graduates to stay connected with the peer-based community they developed at the Center and to maintain contact with the Community Integration staff. In addition to these formal activities, the Community Integration staff initiates contact with graduates to determine if they are still in permanent housing and make themselves available for problem solving or additional case management when necessary. Staff assesses each graduate’s housing stability and provides direct service, mediation or advocacy with landlords, benefit programs and medical providers.

**St. Paul:** “Project Hope, run by Legal Aid, provides legal advocacy to keep people in their houses and apartments. In many cases people successfully avoid evictions through advocacy or representation in court. Project Hope also provide "housing search services" to those in Emergency Shelters as well as arrange emergency funding for deposits.”

**Trenton:** The Homeless Alliance has been advertising to educate the public on what a homeless person looks like. The CEAS and CoC Committees are working with HUD to increase funds for the prevention of homelessness. Huchet House provides housing/support to pregnant women.
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## Composition of the Homeless Population

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* Cities were not able to identify all groups; therefore the “Composition of the Homeless Population” chart does not add up to one hundred percent.
## Shelter Beds, Transitional Housing Units, SRO Housing in the Survey Cities

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Housing

Assisted Housing Requests

Requests for Assisted Housing by Low-Income Families and Individuals

During the last year, requests for housing by low-income families and individuals increased in 86 percent of the survey cities.

Among the comments from the city officials on the number of requests for assisted housing by low-income families and individuals:

**Boston**: Requests for assisted housing are not tracked in any systematic way. However, there are 10,314 people on the Boston Housing Authority public housing waiting list and 4,876 on the Section 8 waiting list.

**Cedar Rapids**: The waiting list has remained constant at about 2,100.

**Charleston**: The city of Charleston Housing Authority reports that request for family housing has increased and the increase can periodically be accommodated.

**Chicago**: The Chicago Housing Authority (CHA) reports an increase in the number of walk ins and phone calls from last year requesting housing assistance by low-income families or individuals. This increase is due to the finalization of rehabilitated senior sites as well as completion of rental phases in several of the new mixed income developments.

**Cleveland**: The demand for rental assistance remains extremely high. The number of persons on the public housing waiting list declined slightly from last year. This may be because the long wait for assistance, particularly for non-elderly single persons, discourages many people from applying.

**Denver**: Agencies indicate that their consumers are increasingly displaying complex issues and that case-managed supportive housing needs are increasing for both families as well as single individuals requiring adult care services to remain independent.

**Detroit**: The local public housing authority's waiting list for Housing Vouchers has not been taking applications for the past two years. They currently have a waiting list of over 9000 persons waiting for housing assistance.
**Louisville:** There is a waiting list of over 13,000 households for Section 8 housing and limited Shelter Plus Care slots. Until recently, public housing had also maintained a substantial waiting list due to: residents remaining in their apartments for longer periods of time; a new HOPE VI project; increased foreclosure rate on homes; and lack of affordable rental housing units.

**Miami:** City residents apply for Assisted Housing through Miami-Dade County’s Housing Program.

**Nashville:** In 2004, MDHA took applications for housing assistance from 2,891 families. In 2005, the agencies took 2,973 applications. The increase was probably due to the Katrina Hurricane. We also had over 700 people applying for HOPE VI housing.

**Philadelphia:** Requests for assisted housing increased due to families and individuals becoming homeless, rent-burdened and/or living in substandard housing.

**Phoenix:** In July 2005, the city closed the Section 8 Wait List as there were 30,000 families on the List. The Housing Department has seen an increased number of families apply for the Section 8 Program and public housing. In 2004, there were 10,000 more families on the Wait List than 2003.

**Portland:** *Section 8,* according to the Housing Authority of Portland (HAP), during the one week in September 2002, when HAP accepted new applications, 8,900 households applied for Section 8 assistance- an increase of 4,900 or 98 percent-over the year 2000. Now that our waiting list has been closed for over two years, it is hard to gauge the total number of households that would request Section 8 if it were available. Still, HAP receives approximately 235 contacts a week from people requesting Section 8. **Public Housing** - In 2005, the Public Housing (PH) program made a dramatic change by eliminating the central intake office and transitioning to a site-based application and waiting list(s) system. Throughout much of the year, the PH waiting lists were closed to allow staff to make the needed changes. While the lists were closed unit turn over continued and HAP continued processing applicants from the waiting list that was established prior to closure. In August, HAP opened numerous studio and one-bedroom site based waiting lists for many PH apartment communities. In November, HAP opened numerous two-bedroom and three-bedroom site based waiting lists. Because the waiting lists for PH had been closed for the first 7 months of 2005 when the lists opened in August and November some of the waiting lists were short and therefore applicants to some PH apartment communities submitted an application and received a PH unit within a short period of time. Specific to demand since the waiting lists opened HAP receives approximately 375 inquiries (walk-in and phone) every week and receives approximately 65 application per week. HAP will be monitoring this demand closely over the next year.

**Providence:** The wait list is over 2000 for PHA.

**San Antonio:** The San Antonio Housing Authority reports that the Section 8 wait list opened from May 2005 to June 2006 and approximately 10,000 individuals submitted applications. New applications for public housing are received daily.

**San Francisco:** One reason is the influx of Katrina evacuees.

**Seattle:** For the year ending September 30, 2005, the Seattle Housing Authority received an average of about 450 housing applications per month for the Low Income Public Housing Program and the locally financed Seattle Senior Housing Program. This represents an increase of approximately 12 percent over the previous year.
**St. Paul:** This is an assumption based on the gap between the minimum wage and the entry level apartment rents. The Local HRA has not been taking applications for public housing or for Section 8 because of under-funding and full subscription of those programs. The waiting lists have been virtually static.

**Trenton:** Poor living wages, high cost of housing, drugs/alcohol and mental health concerns increase yearly and account for more requests for assisted housing.

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**Outlook**

**Expected Requests for Food and Shelter**

Requests for Emergency Food Assistance for 2006

**Ninety percent of the survey cities expect that their requests for emergency food assistance will increase in 2006.**

**During 2006 requests for emergency food assistance by families with children are expected to increase in 86 percent of the survey cities.**

Among the comments from the city officials on the demand for emergency food assistance:

**Boston:** The high heating costs this winter will put a strain on low income people, who will not be able to absorb the estimated 30 percent hike in heating costs. This will lead to an increase in people seeking emergency food to make ends meet.

**Charlotte:** Rise in poverty rate, possible decreases in federal aid such as Food Stamp Program will increase the demand for emergency food assistance.

**Chicago:** Local employment conditions, although improving somewhat, have not reached those who are living in or near poverty. A majority of the newly created jobs are low-wage and rarely offer opportunities for advancement to self-sufficiency. The rising cost of living has placed an additional burden on households already struggling to meet life’s basic necessities (e.g., food, transportation, heating). Federal budget cuts in Medicaid and Food Stamps will also likely result in an increase in emergency food requests. Finally, the city’s poverty rate of 21.1 percent is 2 percentage points higher than last year’s. As a result, more people are living at or below the poverty level which in turn increases the number of requests for emergency food. Given the current economic climate, certainly requests for emergency food amongst families with children will not decrease.
**Cleveland:** If the final budget to be passed by Congress in December includes the proposed reductions in food stamps, school lunches and other programs addressing the basic needs of the poor, it can be anticipated that the need for emergency services, including food assistance will increase. It is too early to tell whether the new prescription drug program will reduce the need for emergency food assistance for the elderly.

**Denver:** Respondents indicate that rising fuel and utility costs nationally as well as unemployment/underemployment, affordable transitional and permanent housing and food resources and the overall economic conditions nationally continue to impede progress.

**Detroit:** Our response is based on cited throughout the survey.

**Louisville:** Higher utility costs will result in people losing their housing due to inability to pay rent.

**Nashville:** Second Harvest Increase: There will be an increase because loss of TennCare and the rising number of seniors. The increase in families depends on the economy and job market. In planning ahead and doing our goals and objectives, the food bank is planning for a 9 percent increase.

**Philadelphia:** The causes of poverty and the need for food is not going away or abating but increasing. As you look to 2006 there are not indications that this will improve but rather it will be more difficult for families to survive.

**Phoenix:** Nearly 40 percent of households have at least one adult who is working. Fifty-four percent have incomes at or below poverty, and 71 percent have incomes at or below 130 percent poverty. More than one-third, 35 percent, of all adult clients do not have a high school education, thus complicating their ability to compete for most well paying jobs. Only 32 percent of the adults served have at least a high school diploma or have completed equivalent degrees, which is substantially lower than the 84 percent of adults nationally in the general population. Only 16 percent of emergency food recipients had some college education. U.S. Department of Education and Census Bureau statistics indicate a correlation between education levels and incomes. In addition to complicating a person's ability to rise out of poverty through work, the relatively low rates of education by emergency food recipients may also complicate their ability to understand, and therefore access, government assistance programs like the Food Stamp Program. Many emergency food recipients are working and still hungry. Nearly 38 percent of emergency food recipient households have at least one adult working and 6 percent have two adults in the household working. A substantial, and growing, percentage of families served by food banks are employed, have earned income, but are nonetheless food insecure and frequent, at least periodically, local hunger relief agencies for assistance.

**Portland:** Socioeconomic momentum has been picking up steam for years to further marginalize medium and low-income working class families. A decrease in the availability of health care; low paying jobs; increased housing costs and limited low income housing choices; increased child care cost that now are simply unattainable for a growing number of two income families; home energy costs that grow faster than inflation and many other economic factors lead us to the unmistakable conclusion that a growing number of Americans are turning to food assistance to meet their monthly food needs. Oregon Food Bank is developing new relationships with hunger-relief agencies in affluent communities that once appeared immune to the specter of hunger in the past. We believe this trend will continue into the future.

**Providence:** Heating costs and high rental costs are forcing people to make tough choices, leave housing and face evictions.
San Antonio: The needs assessment survey for the Community Services Black Grant was conducted during the Summer of 2005 at Food Fairs in six locations through the metropolitan area. The greatest need expressed by respondents in the surveys was the need for nutritional assistance through charitable food programs and government assisted food programs.

Santa Monica: If current trends are an indication, there will be greater demand for emergency food assistance in Santa Monica in 2006.

Seattle: A slight increase can be expected due to families being displaced and transported into Washington and nearby states as a result of Hurricanes Katrina and Rita. Food banks and other social service agencies can expect to feel the stretch as agencies do their best to assist the families to obtain shelter, food, clothing, medical and financial assistance. It can also be expected that families who are sheltering and sponsoring the displaced families will be using food banks and other means to help make ends meet in their growing household.

Trenton: According to Greater Trenton as cost of other items (heating) increases people will not have enough money to buy food. According to Catholic Charities, this reporting period has shown an increase in both the monthly and yearly totals for emergency food assistance. This trend is expected to continue.

Forecast of Requests for Emergency Shelter during 2006

Ninety-three percent of the survey cities expect that requests for emergency shelter to increase in 2006.

Ninety-five percent of the survey cities expect that requests for shelter by families to increase in 2006.

Among the comments from the city officials on the demand for emergency shelter:

Boston: The eligibility standard for access to homeless shelter has been raised from 100 percent of poverty to 130 percent of poverty. While the total number of people requesting shelter may be constant, it appears that a greater number of families requesting shelter will be accepted into shelter over the upcoming year. In addition, a new State ruling requires that the Massachusetts Department of Transitional Assistance place families in shelter pending verifications if families appear to be homeless. This may also increase the number of families accessing shelter. On the other hand, the city will launch a new Prevention Clearinghouse in the spring of 2006. The clearinghouse will prevent homelessness by providing a single point of access for prevention services. The clearinghouse will be broadly publicized and will offer case management, emergency financial assistance, and linkage to prevention resources. It is hoped that the clearinghouse will make it easier for the city’s households to access prevention services and avert homelessness.

Cedar Rapids: Surveys conducted over the past years reflect minor fluctuations from year to year, but generally steady trends.

Charleston: In the past five years the city has seen slight increases in the number of homeless people seeking services. Two outlying communities have opened shelters; however, transportation, mainstream services, and employment draw people to the city where activities are within walking distance and
public transportation is available. The city has managed to be attractive to tourism and relatively tolerant to the homeless population at the same time. Local law enforcement frequently transports individuals to shelters and directs homeless individuals and families to places where services can be found rather than arresting people for loitering.

**Charlotte:** We have a growing disparity in wages and the cost of living, a growing population and a severe lack of affordable housing.

**Chicago:** Many of the economic problems affecting the well-being of low income individuals that exist nationally are also in Chicago. These include rising heating, housing, food and transportation costs. Furthermore, the city’s 21.1 percent poverty rate increased 2 percentage points from last year. As living costs increase, and economic conditions become increasingly more challenging, lower income individuals and families are at risk of becoming homeless. The Chicago Department of Human Services, along with other government agencies, will strengthen all their homeless prevention programs to offset these conditions which make this population vulnerable to homelessness. As families living below the poverty line continue to struggle with the increasing cost of living, a declining employment base, falling wages, and the disappearance of low-paying jobs more families will be likely pushed into seeking temporary shelter arrangements. This is also partially due to an already overburdened government assistance system which is supposed to offer a “safety-net” against such dire circumstances.

**Cleveland:** Efforts to move persons from shelter to permanent housing will continue. However, the unemployment rate for our residents remains high and essentially unchanged since 2003. Persons continue to be released from prison back into the community without adequate planning or support from the criminal justice system. Significant increases in the cost of natural gas may lead to higher eviction and foreclosure rates when the winter heating bills become due. Pending congressional action to cut food stamps, rental housing vouchers and other programs addressing poverty would contribute to people's inability to afford housing.

**Denver:** Respondents serving homeless families specifically indicate that approximately fifty percent of the families they are serving are experiencing homelessness for the first time. Based on this and the factors cited elsewhere in this survey, the demand is going to continue to increase.

**Detroit:** Our response is based on fact as cited throughout the survey.

**Louisville:** There is a waiting list of over 13,000 households for Section 8 housing and limited Shelter Plus Care slots. Until recently, public housing had also maintained a substantial waiting list due to: residents remaining in their apartments for longer periods of time; a new HOPE VI project; increased foreclosure rate on homes; and lack of affordable rental housing units.

**Nashville:** Metro Action Commission - Until the economy in this country improves, we can expect more homeless families. At our agency we are assisting more working-class families who are homeless because of lack of employment. Nashville Safe Haven Family Shelter, the city’s only family shelter that accepts families with fathers, is certain there will be an increase.

**Philadelphia:** The factors leading to homelessness do not appear to be abating. The unemployment rate of five percent is expected to remain relatively unchanged during 2006. In addition, this coming winter is expected to be particularly difficult for families and individuals due to the 20 percent increase in gas/heat prices by the local utility company. The numbers of affordable housing units will continue to be insufficient to meet the demand.
Phoenix: It is anticipated that the number of people requesting food, shelter and housing assistance will increase significantly in 2006 when federal assistance to the over 600 households that relocated to Phoenix after being displaced from Hurricanes Katrina and Rita is reduced or discontinued.

Portland: Families with children generally do not access emergency shelter in Portland, based on availability of transitional housing, rent assistance, and an individual families desire to avoid shelter and instead stay with family and/or friends. Also, Portland provides emergency assistance for families through hotel/motel vouchers rather than facilities. However, with the recent changes to Section 8, continued cuts to basic housing subsidies designed to help prevent poor families from becoming homeless, we can anticipate a greater request of emergency shelter, and emergency assistance to try to fill in the gap created by these cuts. We would also expect to see an increase in the number of people (not families) who request shelter over the next one to two years, and then we should experience a decrease thereafter. As our community becomes more able to successfully transition people from the street to housing, other people who are homeless will be more likely to request services and housing. Recently with the announcement of a new program to provide significant financial assistance to chronically homeless adults, local providers reported a sharp percent increase in the number of new people who were coming to their agency to request services. Specifically with chronically homeless adults, we expect to see a sharp percent increase requesting services in the next two years as they learn about new opportunities, housing which does not mandate being clean and sober or in treatment in order to access housing, and see long time street friends getting homes.

Providence: High housing and utility costs.

Salt Lake City: During the past four to five years, data from The Road Home show that requests for shelter have remained relatively stable, with a four to five percent variation from year to year.

San Antonio: Local shelters are experiencing requests for assistance from increasing numbers of hurricane evacuees. The population of homeless single parent families (particularly women with children) is of particular concern. The number of families with children who are under employed (either less than 30 hours per week or at a minimum wage with no benefits) is on the increase making housing accessibility and retention increasingly difficult. The bottleneck in the exit from transitional into permanent housing is backing up into the emergency shelters creating necessity for extended duration of stay making the availability of shelter non-existent. This is causing an increase in the number of people, including families with children, residing outside the shelters either on the streets or in vehicles.

San Francisco: We are in the process of redesigning our Family Emergency Services System and Programs to dedicate additional resources toward rental assistance and eviction prevention.

Seattle: The annual one night count showed an increase of homeless people in the region this past year. As a result, we anticipate that the number of requests for shelter will increase in the coming year. It is not yet clear what impact the hurricanes and returning veterans will have on the city’s shelter system; however we expect an increased demand for shelter for homeless families and children.

St. Paul: The federal and state cutbacks in assistance and services will result in less income in the hands of many who are now at risk of becoming homeless. We can expect more evictions for non payment as the cutbacks go into effect.

Trenton: According to Catholic Charities, lack of affordable housing, increases in the cost of living and inadequate funding to prevent evictions and foreclosures continue to place many low-income families at risk. According to Mercer County Board of Social Services, the request for shelter for families with
children will increase due to the increase in gang violence. Parents do not feel safe in their neighborhoods.

The Effect of Hurricanes Katrina and Rita on Hunger and Homelessness

Among the comments from the city officials on the impact of Hurricanes Katrina and Rita on hunger and homelessness:

**Boston:** Two hundred and thirty people were evacuated to Camp Otis, a vacant army barracks in southern Massachusetts. Another 850 individuals came on their own to Boston and surrounding communities and registered with the American Red Cross and FEMA. One agency, Children's Services of Roxbury, was designated as a lead agency. CSR has a 800 number and all evacuees were encouraged to call the number and work with CSR to identify all services for which they are eligible. Massachusetts worked with the Registry of Motor Vehicles to arrange for Katrina victims to obtain identity cards. With Red Cross registration and identity cards, individuals were then able to apply for mainstream benefits including Food Stamps, TANF, health insurance, and SSI. It took about 6 weeks for the State to develop a housing plan. The State is accessing FEMA's Public Assistance program so that Massachusetts can offer 12 month of full rent and utilities for Katrina victims. After these 12 months, victims will still be eligible for FEMA money under the Individuals and Households Program. However, a recent FEMA announcement has called into question the continued funding of the state's public assistance effort. Before the state's housing program was announced, some Katrina families applied for and received priority status for public housing at Local Housing Authorities. This was consistent with many LHA Administrative plans but caused concerns among local homeless people, who wondered why Gulf victims could be accommodated while they could not.

**Burlington:** Burlington has seen only a limited number of evacuees. The decrease in federal resources under the current federal budget will, however, affect our ability to care for those affected here by hunger and homelessness.

**Cedar Rapids:** Several Katrina victims have relocated to Cedar Rapids and have found permanent housing at Mid America Housing Partnership. A community resource fair was held 9/19/05 to link victims with local human services.

**Charleston:** When evacuees from hurricane Katrina came to Charleston the city's usual emergency mechanisms were not in place. Of course the area's Emergency Operations Centers had not activated since the storm was not headed this way. In addition, planners had no idea of the devastation New Orleans was to face. Charleston was not contacted by the federal government to prepare for evacuees before the storm hit. In addition after the storm, evacuees were self-delivered and arrived over the course of two weeks giving officials and agencies little time to prepare. This called for a different response from one that was organized by federal systems asking for large city shelters and mass feeding systems. The city was faced with devising a way to fold nearly 100 families, who showed up on their own, into an already overburdened system for aiding families who are homeless, jobless, hungry and without resources. The Coastal Community Foundation, at Mayor Riley's request, was the lead agency in drawing together the Trident United Way, the Red Cross, Housing Authorities, the Humanities Foundation, Charleston County Human Services, local homeless shelters, and local governments. Each
of these organizations sent representatives who had full case loads to find resources for these displaced families, often to the detriment of their normal work loads and personal lives. The effort of planning and finding solutions brought our city together in a completely new way. We began seeing the need to respond in a different way than we did at traditional Emergency Operations Center Planning Meetings. We stepped to a completely new level with the added benefit that when we went home our houses were still intact. We gained a new commitment. But still we were so busy with our normal case loads that we could only do what we could do but we started looking at basic needs.

**Charlotte:** Over 4,000 people were evacuated to Mecklenburg County from the Gulf after Katrina. The federal response to support those evacuees has been less than desirable. Enormous local resources, both financial and staff were diverted to deal with this crisis.

**Chicago:** The city established a comprehensive single service center approach to address the needs of Katrina and Rita Hurricane evacuees. The city, in collaboration with federal, state, and a host of private sector organizations, served a total of 5,500 individuals. Within this group, over 2,000 families received case management services. Both the short and long-term needs of the clients were addressed. Of the families receiving case management, approximately 22 percent required and received immediate housing placement to avoid homelessness. Over 9 percent of these families obtained immediate income assistance. Approximately 6 percent received some form of medical care. Of the total families receiving case management, 84 percent requested and received emergency food assistance and 82 percent received clothing. Most of the service referrals were provided off-site and a majority will require ongoing case management. Following the closure of the main Katrina assistance center in Chicago, another 766 evacuees received on-going case management. The city was able to serve all the evacuees without depleting resources for Chicagoans in need of emergency food and shelter services.

**Cleveland:** The city did not receive any organized transfer of hurricane victims. However, 375 households with about 900 persons made their way here because of family, friends or other reasons. A well organized local effort utilizing state, local and FEMA funds were able to address critical needs. The families remaining in the city have been housed in available private market units using FEMA rental assistance payments. There was minimal impact on existing homeless services. The various hunger programs in the community that depend significantly on private contributions have seen substantial reductions in the level of donations, presumably because of money going to organizations assisting hurricane victims.

**Denver:** Respondents indicate that a large amount of the donations that are usually targeted for local non-profit organizations have been shifted to the hurricane relief efforts thereby impacting annual revenues locally.

**Detroit:** Lack of funding. Funding on a federal level has been diverted to relief efforts.

**Louisville:** Slightly more than 1000 households (3,000 individuals) registered with the Louisville Chapter of the American Red Cross as evacuees from Katrina and Rita. Though we are not sure how many continue to reside here and how many of those intend to stay into 2006, we do have concern that the hurricane evacuees may further burden the hunger and homeless services in our community. The general public is starting to lose interest in helping, which leaves local government and service providers to intervene. Simultaneously, our annual Metro United Way drive has closed with donations significantly lower than the goal, with the major reason given being donations to the hurricane survivors. Among some of the currently homeless, there is underlying anger and lack of understanding regarding why hurricane evacuees are receiving services not available to the general public in need of those same services. In addition, there is concern that many of the unskilled, low paid evacuees, who are receiving
FEMA assistance and are among the 135 families who have been placed in market-rate apartments, will become homeless when the FEMA subsidies end.

**Nashville:** To date Nashville’s service provider system has been able to serve the evacuees without an overt strain on agencies or resources. However, a negative impact in the future is expected by some.

Second Harvest - As of the week of November 3 we have distributed 725 disaster relief boxes to feed 3,965 evacuees or families hosting evacuees. We provided Red Cross with 4,814 meals and 150 daily sandwiches. Five hundred and ninety volunteers gave 2,423 hours to receive, sort and distribute incoming donations. Campus- Very little currently - As Red Cross and other agencies run out of resources, we expect to see a large impact on our services. Samaritan Ministries - our resources are not adequate to accommodate the existing homeless population in Nashville. The addition of large numbers of persons from areas affected by hurricanes Katrina and Rita has already begun to tax our resources further as we attempt to provide services to those in need. The Salvation Army greater demand for food and housing services, plus employment, We have serviced over 1,000 individuals, 500 families, and continue to do so 3 days/week. MAC - With no income coming in to maintain the housing that has been provided for evacuees, some of them will fall back into a homeless situation with no place to turn.

Nashville Safe Haven Family Shelter - The absorption of evacuees and the diversion of funds to large relief agencies have had a detrimental effect on small to midsized agencies and organizations. Funding deficiencies will effect the short and long term operation of these organizations. Unfortunately, many of the larger relief organizations will be reimbursed by governmental agencies leaving them with a surplus of donations. Small and midsized groups that lost funding due to the diversion of gifts will not have the luxury of sharing this surplus. Also, individuals have been given an inordinate amount of funding and vouchers to sustain basic needs and housing. Unfortunately much of the funding was not restricted to any specific usage. Therefore, misspending and poor budgeting is prevalent. Therefore, when the housing vouchers and monetary assistance runs out, many small to mid-sized organizations that lost funding to relief agencies will have to end up servicing former evacuees/victims.

**Philadelphia:** In response to Hurricane Katrina, Mayor John F. Street officially welcomed hurricane survivors to Philadelphia on September 2, 2005. To best meet the needs of the survivors, Mayor Street created a one-stop center that included emergency shelter and access to services provided by over 35 city, state, and federal agencies, nonprofit organizations, and private companies. This centralized and collaborative effort was officially entitled “Project Brotherly Love” (PBL). The one-stop center was in operation from September 5, 2005 to October 25, 2005. During the course of these 50 days, over 1440 individuals accessed the services at the one-stop center and over 190 individuals spent at least one night in the emergency shelter. The city worked aggressively to relocate 194 families into permanent housing throughout the Greater Philadelphia area. At this time, no families or single individuals are housed in hotel rooms. Upon relocation, all families and individuals remaining in the city will be provided with clothing, furniture, and other household items to help make their transition to their new Philadelphia residence as smooth as possible. In addition, these families will receive rental assistance for one full year through FEMA.

**Phoenix:** There are over 2,000 families that have come into Arizona from the hurricane disasters with approximately 1,600 of those arriving in the Phoenix area. Of those, 600 evacuees were officially transported here and approximately 1,000 self-evacuees found their way here on their own. Although there is not an official count, the majority of households appeared to have decided to remain here at least for now. The initial impact brought 83 agencies and organizations together under the leadership of the Governor’s Office who opened the Arizona Veterans Coliseum as a temporary shelter, which operated from September 3 – 22, 2005. Named Operation Good Neighbor, this community partnership successfully transitioned households into housing by providing job opportunities, food, transportation,
child care, case management and many other services necessary in relocating households both temporarily and permanently.

**Portland:** The evacuees have not had a direct impact on hunger and homelessness. The majority of folks that have come through the Interim Housing Center are being housed or are staying with friends/family. We have not heard of instances of people staying in shelters or hitting the streets. Our Katrina/Rita folks are also getting assistance through DHS for food stamps and if they have children, DHS is putting them on the Oregon Health Plan. The addition of Katrina/Rita evacuees to the DHS caseloads could cause an overload for case managers. Therefore, an increase of work on the same staff could decrease quality and amount of services to all folks on DHS. In terms of hunger, the Red Cross has referred over 70 families to the Oregon Food Bank network for hunger assistance. We believe these families will require food assistance for the foreseeable future. Fund Raising efforts for Oregon Food Bank general fund have been restricted due to “donor fatigue” and this has impacted our agency. Oregon Food Bank has sent six employees to respond to Hurricane Katrina and we expect this support to continue through at least the first quarter of 2006. Though not quantifiable, some donations from national donors to the national food banking network have surely been diverted to Katrina and other hurricane relief efforts.

**Salt Lake City:** Utah Governor Jon Huntsman activated community resources in response to Hurricane Katrina. A temporary shelter was established at a military facility in Salt Lake County. In addition, The Road Home staff prepared the Community Winter Shelter in anticipation of receiving evacuees. As it turned out, the military facility was adequate, the needs of the evacuees were met, and it was unnecessary to open the Community Winter Shelter. The evacuees have either found other resources or left Salt Lake County.

**San Antonio:** San Antonio received over 16,000 evacuees from Katrina and Rita into emergency shelters located throughout the community. Additional evacuees are located in 4,400 hotels and motel units throughout the metropolitan area (as many as 6,000 to 7,000 persons). Initially, evacuees went through a short intake interview for basic information and were then provided with emergency shelter assistance including bathing and restroom facilities, food, and clothing. These services and the initial health and medical services, nutrition services, transportation assistance, missing person search, shelter assistance and legal assistance were provided with funds from the city (over $6 million). Over 200 persons including families with children, utilize the emergency shelter services with an average overnight census of 164 persons staying in the shelter. Contracts with FEMA have provided: Recovery - 2,437 intakes, 988 ID’s provided and 615 birth certificates obtained over a 60 day period; Case Management - 2,428 individuals processed, 1,094 service plans developed, 2,977 referrals. 1,184 households processed including 118 with special needs household members and 208 receiving on-going case management during the period 9/15/05 - 10/25/05; Childcare - 77 total children enrolled; Head Start - total 59 children enrolled in Head Start at 26 sites in the San Antonio as of 11/14/05.

**San Francisco:** There is an increased demand for housing and food.

**Seattle:** Over the past several months food banks have reported seeing and serving more and more consumers who were affected by the recent hurricanes.

**St. Paul:** The impact of the hurricanes has been spread across the state. It has not been as great as the demand presented to us by the emptying of the refugee camps in Thailand earlier this year.

**Trenton:** According to Anchor House, most people that donated goods, services and money are donating to Katrina victims. According to Catholic Charities, a drop in private and corporate donations
has been observed by their agency. Emergency and community services struggles to meet the demand providing services to its clients with dwindling public and private resources.

**Expected Effect of Hurricanes Katrina and Rita during 2006**

Among the comments from the city officials on how hunger and homelessness will be affected by the Hurricanes Katrina and Rita during 2006:

**Boston:** Once Gulf Coast families have exhausted their Katrina/Rita benefits, they may face difficulty affording the rents in Boston, which are 3-4 times higher than rents in Louisiana and Mississippi. They will also be paying significant fuel bills for the first time. There is a concern that some families will not be able to maintain their housing once transitional housing benefits are withdrawn. However, it is not known how many families will stay in the area or move on.

**Cedar Rapids:** For the individuals who relocated, their permanent housing impact should be minimal.

**Charleston:** Many of the individuals and families who moved to the city after Katrina are committed to moving back to New Orleans as soon as they are able. Some hoped to return after the first semester of school. Those who will be forced to remain in Charleston will continue to need help from area food banks and soup kitchens and rent subsidies. It is unreasonable to assume that after suffering such loss and trauma that every family will be able to sustain their new placements without supportive services. These supportive services are the shortest of all services our community has to offer. We can offer help with utility bills, rent, food, but we do not have the man power to help with case management services to support 100 families through the trauma of losing everything and settling in a new community. The city is relying on the faith community to fill this gap. Even 100 families put serious strain on a system that is feeling the pain of increased state-wide unemployment and increased housing costs. Currently, Trident United Ways' 211 Hotline receives 15,000 calls a year for help with food and rent. They refer these calls to the appropriate agencies.

**Charlotte:** As resources fail and subsidies diminish and the trauma associated with such a disaster manifests itself, we will see a heavy impact on the services provided to the poor and homeless.

**Chicago:** Many of the individuals and families serviced have indicated that they will remain in the city. Some will remain for the immediate future; while others have expressed a desire to relocate to this area permanently. Of those that remain, ongoing referral and case management will be provided in the areas of housing placement, job search, and other long-term assistance. Individuals and families who are unable to establish a means of financial support and who do not have local sponsored support [family members, volunteer personal sponsors, etc.] will rely upon the city’s service delivery system in 2006. Furthermore, those individuals or families temporarily housed with volunteer personal sponsors or relatives will be in need of housing placement in the next year. Placement in transitional or permanent housing will be a priority for those intending to stay in the city.
**Cleveland:** The biggest immediate impact will be in the form of higher energy costs for home heating as the result of the hurricanes' effect on natural gas supplies. Many families that were barely able to afford food and shelter will now face a large additional expense. This may contribute to increased rates of foreclosure and evictions, as well as higher levels of demand at food pantries. The other potential impact may come from the Congressional leadership's efforts to use the expenditures for hurricane relief as a justification for cutting a variety of programs serving the poor throughout the country. It is not known at this time when private contributions to local hunger programs will return to pre-Katrina levels.

**Denver:** Respondents are simply afraid that hurricane relief nationally will impact individuals and families locally.

**Detroit:** There is a lack of funding. Funding on a federal level has been diverted to relief efforts.

**Louisville:** Louisville Metro government and service agencies provided a full array of health, education, housing, employment and human services to the families displaced by Katrina who relocated to our city. At the time of this report, approximately 200 children continue to be enrolled in our Public and Catholic School systems. The impact is still uncertain, though service providers have planned outreach over the Thanksgiving holidays to determine continuing needs. Thus far, these families appear to need help with health and mental health services and buying household appliances. Churches and non-profit groups were very generous in providing for immediate household needs, including furniture, bedding, kitchen items and clothing.

**Nashville:** Generally, agencies expect demands from evacuees contributing to an increase in hunger and homelessness, accompanied by a reduction in resources to serve them.

**Philadelphia:** Hunger and homelessness may be impacted in 2006 by the following: FEMA policy changes, diversion of donations to survivors of the hurricanes away from other persons experiencing hunger and homelessness, and hurricane survivors who have permanently relocated to Philadelphia who will continue to access supportive services. All of these situations will put strain on the city’s already limited resources.

**Phoenix:** It is very difficult to predict or estimate what the impact for 2006 and on-going will be. Many of the households have shown the signs of being fragile and vulnerable as they face day to day difficulties of making ends meet. With little to no support systems in place from their prior communities, faith, community and public sector assistance here in Phoenix will continue to be an on-going need. The Governor’s Office in conjunction with FEMA opened and continues to operate the Katrina Service Center located in Central Phoenix specifically to assist evacuees. This center opened with the closing of the initial temporary housing provided at the Veterans Memorial Coliseum. Since opening the doors on September 22, 2005, the center has seen a total of 3,400 evacuees or an average of 60 individual households per day, everyday.

**Portland:** Katrina/Rita evacuees are automatically granted food stamps through 12/31/05. After this date, they will have to reapply at their local office and based on their current situation, may qualify for assistance. We can't give an estimate on how many may not qualify for assistance, as each circumstance is different.

**Salt Lake City:** There has been minimal impact. Most evacuees have left the state. Others have been assimilated into normal resources.
San Antonio: Food programs, social service programs, and shelter programs are continuing to receive requests for assistance from evacuees. The effect during 2006 will directly correlate with the continuation or increase in assistance received from other resources including the federal level.

San Francisco: There will be continued to increase demand for housing and food.

Seattle: We anticipate greater demand being placed on our affordable housing stock due to the shortage of affordable housing in our city,

St. Paul: It is too early to determine what the impact will be. St Paul is distant from the impact zones of Katrina and Rita. Only 1500 have come to our state so far. Much depends upon the skill levels they possess and the support that they receive from all quarters as they begin their lives anew.

Trenton: According to Anchor House, the need will increase. Catholic Charities will continue to provide the same level of services to the best of their ability. According to City Adult and Family Services, there is a concern that funds will be used up by Hurricane victims before poverty or low-income individuals and families can utilize the services.

Influence of Federal Policy for Hurricanes Katrina and Rita Evacuees on Homelessness

Among the comments from the city officials on regarding whether federal policy for Hurricanes Katrina and Rita evacuees should be extended to all homeless people:

Boston: Boston is one of the most expensive housing markets in the country. Transitional housing assistance of 12-18 months would certainly help some homeless households stabilize after a crisis, such as house fire, sudden illness, or layoff.

Charleston: "Policies necessary to respond to individuals and families left homeless after a major natural disaster do not easily translate to solutions to homelessness that is a result of long-term extreme poverty. The phases of housing are the same - emergency shelters, transitional housing such as motels, then the move to permanent housing. Rental subsidies and case management are components that are the same but each of these elements need to be handled in a much different way. Cash payments cannot be handed directly to individuals who have lived in poverty for years and who may also be suffering from mental illness or addiction disorders. Transitions must be made in supported and culturally sensitive ways and to housing that can be sustained over time. Services must be enriched like healthcare, mental health counseling and substance abuse counseling. In addition to services, affordable housing stock must be increased in an architecturally appropriate manner that blends with existing neighborhoods. Homeless people linger in shelters in Charleston because they are sicker than in past years, disability determination is a timely process, payments are low, and affordable housing is scarce. Most of these individuals would not be helped by "Urban Homesteading" a plan mentioned in the President's September 15, 2005 speech or FEMA's direct payouts.

Charlotte: If we can rise to help those in crisis from a natural disaster we can certainly rise to help those whose personal disasters may be less news worthy but are quite real themselves.
Chicago: The HUD Katrina Disaster Housing Assistance Program comprises a substantial portion of federal policy towards Katrina and Rita evacuees and offers some promising components which could be applied to homeless families and individuals. According to the program, evacuees are given a rental subsidy based on 100 percent of Fair Market Rent in that community. Eligible families include displaced public housing residents; Section 8 voucher holders; other HUD-assisted households; and, pre-disaster homeless individuals who were directly affected by the hurricane. The 18-month limit on the housing voucher program does present some challenges in terms of transferability to the homeless population. Since the degree of employability amongst the homeless reflects a broad spectrum, upon intake, a homeless individual/family should be assessed as to their ability to work. If yes, there should be a time limit on the length of time homeless individuals who are employable are given housing vouchers. If no, then their housing situation should be re-assessed and a determination should be made whether their housing voucher could be extended. The effect of an 18-month limit on housing, a relatively short time period, may hinder a previously homeless individual/family to find affordable housing. Assurance that each homeless individual/family consents to and receives the necessary array of supportive services prior to their participation in such a program is necessary. This would require placement in a housing arrangement in close proximity to supportive services. In order that the homeless ultimately attain economic self-sufficiency and adequate adjustment, these services must accompany any type of voucher program associated with homeless placement into more stabilized housing arrangements. In other words, merely providing a voucher for homeless placement into a housing situation is not sufficient to address the supportive housing needs for those with severe psychological, substance abuse and other problems confronting homeless individuals and families.

Cleveland: Yes. The fact that the hurricane evacuees that came to Cleveland have been able to find housing within a relatively short time is largely attributable to the availability of assistance for security deposits and rental payments. While there are many factors that contribute to homelessness, the inability to afford the cost of basic rental housing is a primary cause in almost every case.

Denver: Respondent agencies feel that that anyone finding themselves homeless should be treated equally irregardless of the cause of their homelessness.

Detroit: Yes, federal policy for Hurricanes Katrina and Rita evacuees should be extended to all homeless people.

Louisville: The homeless in our city would like to have had the same attention paid to their needs. They saw the local community and the federal government mobilize to help.

Nashville: Responses were mixed, with some agencies saying that this policy need not be extended to all homeless people, and some staunch proponents of the idea. Many agencies are not fully aware of all aspects of federal policy for the hurricane evacuees. Luke 14:12 Not necessarily. I do recommend that federal policy take a serious look at the chronically homeless and determine what serves them best. Chronic homelessness has many facets and no one single solution will eradicate this condition. Morning Star Sanctuary absolutely extend to the homeless Nashville Safe Haven Family Shelter Funding should not be restricted to evacuees and those defined as chronically homeless only.

Philadelphia: Yes, the initial federal policy should be extended to all homeless people. The initial federal policy for Hurricanes Katrina and Rita survivors were created with the belief that the survivors were deserving of assistance. This belief translated into an exceptional urgency in all efforts to provide both appropriate short and long term housing solutions to the survivors. In general, survivors were not blamed for the fact that they were homeless. Given the continued existence of structural deficiencies
throughout our governmental and business institutions, there should be very few reasons why other people who find themselves homeless should not be given the same respect and assistance.

**Phoenix:** Any flexibility in policy is always helpful in assisting households in need, if the flexibility or policy change actually results in additional resources becoming available or removes major barriers that have hindered vulnerable populations. One of the major lessons learned in meeting the needs of the hurricane evacuees, is that services have to be bundled and available from a variety of perspectives. With evacuees or the homeless, it is not enough to have a housing answer if on-going income is not sufficient to sustain the housing obligation. Finding a job is wonderful, but cannot be maintained if child care is not solved for a family with children. Immediate medical care is great as was brought together for the evacuees upon their arrival, but does not assist months later if households do not have ongoing medical coverage.

**Portland:** We recommend that the amount of money that FEMA has offered to put into this crisis also be put into addressing homelessness in our cities.

**San Antonio:** Federal and state resources should be supplemented to provide resources for the community to continue and enhance services to evacuees until they are able to either return to their homes or relocate successfully.

**San Francisco:** Yes, creating flexibility within federal programs should be extended to all homeless people.

**Seattle:** Many of the DSHS rules suspended for hurricane evacuees would be extremely helpful in our efforts to provide homeless and low-income people with entitlement benefits for which they are qualified. This would allow us to house people more rapidly and improve the success of our 10-year plan to end homelessness.

**St. Paul:** Yes, many are in shelter because of affordability issues. Rental assistance would move many out of the shelters and provide them with the stability that they need before that can address the other challenges they face in their lives.

**Trenton:** According to the Trenton Area Soup Kitchen, they certainly should provide much more assistance (education, social workers, addiction specialist, mental health practitioners, medical, job training.) According to City Adult and Family Services based on case by case circumstances some situations due demand extensions, a lot of services are provided to the Hurricane victims (immediate services-food, clothing, housing) on an ongoing basis.
Most Effective Aspects of Federal Policy of Hurricanes Katrina and Rita Evacuee Policy in Dealing with Homelessness

Among the comments from the city officials on the most effective aspects of federal policy of Hurricanes Katrina and Rita Evacuees on homelessness:

**Boston:** Massachusetts was effective in streamlining the process for obtaining mainstream benefits such as SSI and Food Stamps. Ordinarily, it takes a lengthy application and protracted approval process for low income individuals to access these programs. For Katrina victims, the State set up a single processing center with representatives of different State agencies. Applications for Food Stamps, for example, were shortened, and processing was expedited.

**Charleston:** Rental subsidies such as the expansion of Section 8 program. Without Section 8 most of the individuals that leave the shelter and move to transitional housing could never hope to live in permanent housing. Also, moving individuals directly into housing with continued case management services to support them.

**Charlotte:** Finding decent housing for all of our citizens and determining a way to make it affordable to all.

**Chicago:** Offering expedited processing of transitional housing assistance to the homeless allows these individuals and families faster access to housing arrangements. By providing housing vouchers and eliminating HUD regulatory requirements which impede the ability of homeless individuals and families to obtain adequate housing, the placement of homeless persons into adequate housing would be accelerated.

**Cleveland:** Increasing the availability of rental assistance would be the most effective way of immediately reducing the need for shelters. Unfortunately, efforts to cut federal expenditures for the poor, while extending tax cuts, is likely to reduce rather than increase the availability of rental housing subsidies.

**Denver:** Most respondents felt that immediate access to shelter and services along with an ongoing waiver of federal regulations and the mindset of the goal of permanent housing as opposed to short-term and emergency shelter would be the most beneficial aspects to apply locally at all times.

**Detroit:** National attention and response as well as public awareness would be the most effective.

**Louisville:** Additional funding made available for market rate housing would greatly benefit the community, especially if some of those funds could be approved for case management with homeless families. Broader eligibility criteria for food stamps would be a true asset. There is increasing concern that as the cost of utilities increases, people will have the difficult choice of food or warmth. If we were able to offset the potential of hunger and starvation, the increased utilities would have a reduced impact.

**Nashville:** Campus: To be able to accelerate homeless people to the front of services instead of all the red tape
Renewal House: Expansion of opportunities for persons who are homeless to live in transitional housing rent-free for 12 to 18 months while they receive assistance to address physical health, mental health and
economic barriers would be effective in helping them achieve long-term self-sufficiency and housing
stability. Morning Star Sanctuary: Emergency credit cards and free hotel stays for emergency situations
such as domestic violence.

**Philadelphia:** 1. Worker Recovery Accounts would assist households experiencing unemployment in
locating jobs that pay a wage similar to or higher than their previous wages. This additional income and
support would prevent families and individuals from entering the shelter system.
2. Short-term rental assistance payments given to all persons suffering from a financial, unemployment,
medical and/or other emergency.
3. One time financial payment to assist homeless households with transportation, clothing, housing, and
food costs associated with their relocation efforts.
4. Streamlined application and disbursement processes for federal benefits to improve access to all
eligible persons.
5. Coordination of all parties providing services to homeless and near homeless individuals and families
to make the access and receipt of services easily attainable by all eligible persons, many of whom are
facing a large amount of stress.

**Phoenix:** The city did not see policy changes have an impact as much as it witnessed the power of
centralized resources. This concept was extremely successful in Operation Good Neighbor and is still
alive in the Katrina Service Center. In another example, the newly opened Human Services Campus
which serves the homeless population and specifically the Day Resource Center component of the
campus, has brought together a myriad of services and agencies with a singular and immediate focus on
the removal of barriers to the housing of a household. The success in housing the chronically homeless
through this Day Resource Center concept was shown in the pilot conducted prior to the campus
opening and will continue to be a critical ingredient.

**Portland:** We think that the immediate response and amount of money that FEMA is willing to put into
this crisis would be a continued value in addressing homelessness and hunger in our city. We also value
the coordinated response from social service agencies in our area. We think that having services in one
central area is helpful for our clients, but that is a policy that evolved from a community and agency
organized effort. It was not a policy handed down from FEMA. We believe that is why our model has
been effective in meeting the needs of our clients. In particular, DHS, Portland Public Schools, Salvation
Army, Goodwill, and community organized volunteer efforts have been instrumental in providing a
range of immediate services.

**San Antonio:** The local homeless could benefit from the provision of supports to assist persons
relocated to permanent housing to facilitate housing retention and provision of resources to relocate
those remaining in shelters into appropriate housing. Evacuees, individuals and families, including those
with special needs, are being warehoused in an air force base facility increasing their isolation and
diminishing their access to the mainstream of community and services.

**San Francisco:** The federal waivers that were provided to Katrina evacuees should be extended to all
homeless people.

**Seattle:** The minimization of paper work, alternate hours for people to sign up for benefits and an
ongoing effort to provide out-reach and information about available benefits to those in need would
assist homeless people in our city.
**St. Paul:** We need more rental assistance for the poorest of the poor in our community.

**Trenton:** More job training and housing would prove effective.
APPENDICES

- Hunger and Homelessness in America’s Cities: A Sixteen-Year Comparison
- Survey Cities And Their Mayors
- 2005 Survey Questionnaire
Hunger and Homelessness in America’s Cities:  
A Sixteen-Year Comparison

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<td>90%</td>
<td>93%</td>
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<td>Cities in which Food Assistance Facilities must turn people away</td>
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2005 Survey Questionnaire

City ____________________________________________

STATUS REPORT ON HUNGER AND HOMELESSNESS
INFORMATION QUESTIONNAIRE

Please complete the following survey and return it by NOVEMBER 28, 2005 to:

Eugene T. Lowe, Assistant Executive Director,
The U.S. Conference of Mayors
1620 Eye Street, N.W.
Washington, D.C. 20006
Phone (202) 861-6710

A report will be published based on the responses to this questionnaire. Experience has shown that such survey reports are effective when they include examples of individual city data. If, however, you want your city's answers to any questions held confidential, please specify those questions by number:

=============================================================================
NOTE: The year for which information is requested is November 1, 2004 to October 31, 2005. It is referred to as "the last year" in the survey questions. Homeless persons are defined as those who reside in shelters, on the streets, in cars or in other locations not intended as residences.
=============================================================================

HUNGER

1. THE DEMAND

A) Has the total number of requests for emergency food assistance in your city _____ increased, _____ decreased, or _____ stayed the same during the last year? By what percentage? _____ %
Please explain or expand upon your response, and include any other data which supports it.

B) Has the number of families with children requesting emergency food assistance in your city _____ increased, _____ decreased, or _____ stayed the same during the last year? By what percentage? _____ %
Please explain or expand upon your response and include any other data which supports it.

C) What percentage of those requesting emergency food assistance are members of families with children? _____ %

D) Has the number of elderly persons requesting emergency food assistance in your city _____ increased, _____ decreased, or _____ stayed the same during the last year? By what percentage? _____ %
Please explain or expand upon your response and include any other data which supports it.

E) What percentage of those adults requesting emergency food assistance are employed? _____ %

2. THE CAPACITY

A) Has the number of emergency food assistance facilities in your city _____ increased, _____ decreased or _____ stayed the same during the last year? Please explain.

B) Has the level of resources (e.g. funds, volunteers, food, etc.) available to emergency food assistance facilities in your city _____ increased, _____ decreased, or _____ stayed the same during the last year? By what percentage? _____ %
Please explain.

C) Are emergency food assistance facilities in your city used _____ for emergencies only, _____ as a steady source of food for long periods of time, or _____ both? Please explain.
D) For those who receive assistance, are emergency food assistance facilities able to provide an adequate quantity of food? _____Yes _____No. Please explain.

E) Do emergency food assistance facilities in your city have to decrease the quantity of food provided and/or the number of times families and/or individuals can come to get food? _____Yes _____No. Please explain.

   If yes, have emergency food assistance facilities had to increase the limit on the number of bags provided and/or decrease the number of times families and/or individuals can come to get food during the last year? _____Yes_____ No. Please explain.

F) Is the food provided nutritionally balanced? _____ Yes_____ No. Please explain.

3. **THE FUNDING**

During the last year, has your city government spent public funds (either locally generated revenues or federal or state grants) to support local emergency food assistance efforts? _____Yes _____No.

If Yes, please check below the funding sources used by your city government and indicate the amount spent.

<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Amount Spent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Locally generated revenues</td>
<td>$</td>
</tr>
<tr>
<td>State grants (not federal pass-through monies)</td>
<td>$</td>
</tr>
<tr>
<td>McKinney homeless assistance programs (please specify which ones on separate sheet)</td>
<td>$</td>
</tr>
<tr>
<td>Community Development Block Grant</td>
<td>$</td>
</tr>
<tr>
<td>Community Services Block Grant</td>
<td>$</td>
</tr>
<tr>
<td>Other federal funds (please specify):</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

Please comment, if needed:__________________________________________________________________________________
___________________________________________________________________________________

4. **THE UNMET NEED**

A) Do emergency food assistance facilities in your city have to turn away people in need because of lack of resources? _____Yes _____No. Please explain.

B) Please estimate the percentage of the overall demand for emergency food assistance in your city which goes unmet. _____ %
Please estimate the percentage of the demand by families with children for emergency food assistance in your city which goes unmet. _____ %

Please explain or expand upon your response, and include any data which supports it.

5. **THE CAUSES**
What are the main causes of hunger in your city?

6. **AN EXEMPLARY RESPONSE**
Please describe briefly an exemplary program or effort underway in your city which prevents or responds to the problems of hunger.

**HOMELESSNESS**

7. **THE DEMAND**

A) Has the total number of people requesting emergency shelter in your city increased, decreased, or stayed the same during the last year? By what percentage? ____%

   Please explain or expand upon your response, and include any other data which supports it.

B) Has the number of families with children requesting emergency shelter in your city increased, decreased, or stayed the same during the last year? By what percentage? ____%

   Please explain or expand upon your response, and include any other data which supports it.

C) Has the length of time people in your city are homeless increased, decreased, or stayed the same during the last year? Please explain.

D) What is the average length of time that people in your city remain homeless? ____ months.

8. **THE PEOPLE**

A) Please provide a brief case study (one paragraph) of an actual homeless individual or family in your city.

B) Please describe the characteristics of your city's homeless population on the following chart:

<table>
<thead>
<tr>
<th>Homeless Population</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members of Families with Children</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single Men</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single Women</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unaccompanied Youth (age 18 &amp; under)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>100% *</td>
</tr>
<tr>
<td>African-American</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Native American</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>100% *</td>
</tr>
</tbody>
</table>
MENTALLY ILL

Mentally Ill

Substance Abusers

Persons with AIDS or HIV-related illness

Employed

Veterans

* Please make sure that your total percentage adds up to 100%.

COMMENTS (please explain any significant changes which occurred in the composition of your city's homeless population during the last year):

C) What percentage of the homeless families in your city are headed by single parents? ___%

D) What percentage of the members of homeless families in your city are children? ___%

9. THE CAPACITY

A) Did the number of emergency shelter beds for homeless people in your city____increase, decrease, or ___stay the same during the last year? By what percentage? ___%

How many shelter beds currently exist in your city for use by homeless people? _____
If necessary, please comment.

B) Did the number of emergency shelter beds specifically for homeless families in your city ____increase, decrease, or ___stay the same during the last year? By what percentage? ___%

How many shelter beds currently exist in your city for use by homeless families? _____
If necessary, please comment.

C) Did the number of transitional housing units in your city ____increase, ____decrease, or ___stay the same during the last year? By what percentage? ____%

How many transitional units currently exist in your city? _____
If necessary, please comment.

D) Did the number of transitional housing units specifically for homeless families in your city ____increase, ____decrease, ___ or stay the same during the last year? By what percentage? ________%

How many transitional units specifically for homeless families currently exist in your city?
If necessary, please comment.

E) Did the number of SRO units or other permanent housing targeted to homeless people in your city ___increase, ___decrease, ___ or stay the same during the last year? By what percentage? ___%

How many SRO units currently exist in your city? _____
If necessary, please comment.

F) Do homeless families in your city have to break up in order to be accommodated in emergency shelters? ___Yes No. Please explain.

* Please make sure your total percentage adds up to 100%.

G) Do homeless families have to leave the shelter in which they are staying during the day? ___Yes ___No. If yes, please explain why and tell where they go during the day.
10. **THE FUNDING/RESOURCES**

During the last year, has your city government spent public funds (either locally generated revenues or federal or state grants) to support local shelters or other services specifically for homeless people? __Yes __No. If yes, please check below the funding sources used by your city government and indicate the amounts spent.

<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Amount Spent</th>
</tr>
</thead>
<tbody>
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<td>$</td>
</tr>
<tr>
<td>Substance Abuse Block Grant</td>
<td>$</td>
</tr>
<tr>
<td>Mental Health Block Grant</td>
<td>$</td>
</tr>
<tr>
<td>Other federal funds (please specify):</td>
<td>$</td>
</tr>
</tbody>
</table>

Comment:

11. **THE UNMET NEED**

A) Do emergency shelters in your city have to turn away homeless families in need because of lack of resources? Yes __No. Please explain, including information on what happens to the homeless families that cannot be accommodated in shelters.

B) Do emergency shelters in your city have to turn away other homeless people in need because of lack of resources? Yes __No. Please explain, including information on what happens to the homeless people who cannot be accommodated in shelters.

C) Please estimate the percentage of requests by all homeless people for emergency shelter in your city which goes unmet. ____%. Please explain or expand upon your response, and include any data which supports it.

D) Please estimate the percentage of requests for emergency shelter specifically by homeless families in your city which goes unmet. ____%. Please explain or expand upon your response, and include any data which supports it.

12. **THE CAUSES**

What are the main causes of homelessness in your city?

13. **AN EXEMPLARY RESPONSE**

Please describe briefly an exemplary program or effort underway in your city which prevents or responds to the problems of homelessness.
HOUSING

14. **THE DEMAND**

During the last year, did requests for assisted housing by low-income families and individuals in your city increase, decrease, or stay the same during the last year? Please explain.

THE OUTLOOK FOR THE NEXT YEAR

15. **THE OUTLOOK**

A) Do you expect the demand for emergency food assistance in your city to increase, decrease, or stay the same during 2006?

Do you expect the demand for emergency food assistance specifically by families with children in your city to increase, decrease, or stay the same during 2006? Please explain.

B) Do you expect requests for emergency shelter in your city to increase, decrease, or stay the same during 2006?

Do you expect requests for emergency shelter specifically by homeless families with children to increase, decrease, or stay the same during 2006? Please explain.

16. **THE IMPACT OF HURRICANES KATRINA AND RITA**

A) What has been the impact of Hurricanes Katrina and Rita on hunger and homelessness in your city? Please describe any impact in terms of the people affected and the services provided.

B) How will hunger and homelessness in your city be affected by Hurricanes Katrina and Rita during 2006? Again, please describe any impact in terms of the people affected and the services provided.

C) Would you recommend that the federal policy for Hurricanes Katrina and Rita evacuees be extended to all homeless people?

D) Which aspect(s) of the Hurricanes Katrina and Rita evacuee policy would be most effective for the homeless in your city? Explain.

---------------------------------------------------------------------------------------------------------------------------

Person completing form:

Name:________________________________________________________________________

Title:_______________________________________________________________________

Agency:_____________________________________________________________________

Address:_____________________________________________________________________

Telephone: __________________________ Fax: __________________________

E-Mail:______________________________________________________________________

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