



Calvert - Charles - St. Mary's

Continuum of Care

Dedicated to ending homelessness.

Gaps and Needs Analysis: 2019

Like communities all across the country, Southern Maryland annually assesses both the number of persons who are experiencing homelessness as well as available resources to address their needs. The results help determine gaps and identify priorities which guide ongoing efforts to achieve the goals outlined in the Strategic Plan to Prevent and End Homelessness for Calvert, Charles and St. Mary's Counties.

While the Gap and Needs Analysis is updated each year with data on homelessness, a complete revision including the addition of new data impacting homelessness is conducted every other year. The 2019 report below updates findings from the 2018 report. Additional information can be found in Appendix A – D. Information in the report was first assessed by the Strategic Planning Committee of the Calvert-Charles-St. Mary's Continuum of Care (CoC) and then discussed with the full CoC, including those representing the local Homeless Boards of the three jurisdictions. The CoC is the primary regional body that coordinates efforts to address homelessness throughout Southern Maryland. The CoC is unique as it combines the efforts of three distinct local jurisdictions, each of whom is committed to preventing and ending homelessness in their community. See Appendix E below for more information on the CoC.

Summary Findings and Trends:

Factors impacting homelessness in Southern Maryland:

1. Southern Maryland is one of the fastest growing regions in the state (Maryland State Office of Legislative Services, January 2018).
 - Of the 24 jurisdictions in Maryland, Charles County led the state in the pace of population growth between 2000 and 2016, at 30.8%, with St. Mary's second at a rate of 30.6%. Calvert County was 5th highest in the state with a growth rate of 22.4% during this same time period.
2. The unemployment rate for Charles and Calvert, 4.4% and 4.0% respectively, is lower than the state average of 4.5%. St. Mary's County unemployment rate is 4.5% (DLLR, March 2018).
3. While the average weekly wage for St. Mary's County (\$1,216) is higher than the state average of \$1,105, the average weekly wage for Charles (\$884) and Calvert (\$997) is lower. (DLLR, Q3 2017, Employment and Wages report).
4. The cost of living in Southern Maryland continues to strain households.
 - According to data collected by the United Way (ALICE, 2017), Charles and Calvert Counties have the 3rd and 4th highest cost of living in the state, respectively.
 - This same data indicates that Charles County has the lowest housing affordability score in the state and Calvert has the third lowest.

- In Charles County the number of eviction notices fluctuated between 315 and 499 per month during the 2017-2018 school year. This is more than double the rate of the previous year (Charles County Sheriff's Office). In Calvert there were 801 evictions in 2017 (Calvert County Sheriff's Office) and St. Mary's County there were 143 evictions in 2017 (District Court of Maryland for St. Mary's County).
5. Those with behavioral health and substance abuse histories are at increased risk for homelessness. According to 2016 data from the Maryland Hospital Association on Behavioral Health in Maryland:
- A significant percent of hospital admissions in Southern Maryland involve behavioral health: 34.9% for Calvert Memorial Hospital; 35.3% for Medstar St. Mary's, and 18.2% for University of Maryland Charles Regional Medical Center (2016, Behavioral Health in Southern Maryland, Maryland Hospital Association, Infographic)
 - Between 2013 and 2014 behavioral health ER visits in Southern Maryland rose 10%; Opioid related ER visits rose 15% and heroin related visits rose 8%.
 - Behavioral Health-related 30-day readmission rates for Medstar St. Mary's Hospital (18.13%) and Medstar Southern Maryland (21.69%) are above the state average of 16.86%. (MHA, ALOS and Readmission report, 7/31/2017)
 - In March 2017, Maryland declared a State of Emergency in response to the opioid addiction crisis and the Governor committed an additional \$50 million over the next five years to strengthen enforcement, prevention and treatment.

Efforts to Address Homelessness

Since 2010, the CoC has aligned its efforts to address homelessness with the US Interagency Council on Homelessness (USICH) *Opening Doors* strategy:

1. Reduce the number of all persons who experience homelessness. By coordinating efforts and working as one CoC, Southern Maryland has seen a declining trend in the total number of homeless as defined by the US Department of Housing and Urban Development (HUD).
 - In 2019, the CoC counted 306 homeless on January 23rd as part of the annual Point In Time (PIT) survey, down 38% (492 individuals) from 2018 and down from a high of 1141 in 2014. This number includes both individuals who are sheltered in Emergency or Transitional Housing and unsheltered ("on the street") individuals.
 - Of the 306 counted in the January 2019 PIT, 37% (114 individuals) were considered unsheltered. Of those, over 50% (66 individuals) were in Charles County.
 - The Southern Maryland region had the third highest number of encampments (23) of all 16 CoCs in the state, (2018 IHC Annual Report). The region's rural geography, distance from state behavioral health providers and lack of affordable housing are considered contributing factors in addressing needs of unsheltered homeless individuals.
 - Of the 114 unsheltered homeless in our region, 14% were youth (ages 0-24). While some individuals choose not to seek shelter, the CoC has a current capacity to serve 280 individuals through emergency shelter beds available in the cold weather season.
 - Providing appropriate housing to those with serious mental illness remains a challenge. The CoC has seen the number of PIT respondents who self-disclose that they have a serious mental illness nearly double from 2016 to 2019. While those with a documented behavioral health disability may qualify for CoC housing programs, the extent of the disability may require clinical

expertise beyond those offered by current CoC housing providers. More partnerships between housing programs and clinical providers capable of serving those with serious mental illness are needed.

2. Prevent and end veteran homelessness by 2015. The CoC has a long standing focus on veterans. Veteran status is a priority for referral to housing across the Southern Maryland region.
 - Southern Maryland administers 41 federal VA Supportive Housing (VASH) vouchers which provide permanent supportive housing to veteran households.
 - In 2012, the CoC received a Supportive Services for Veteran Families (SSVF) grant to serve approximately 100 veterans each year.
 - The CoC has representation on the Veterans Committee of the Tri- County Council, where housing and other needs are addressed.
 - The number of veterans who are homeless identified during the PIT fell by 50% from 2018 to 2019. The majority of these homeless veterans are unsheltered and while consistent outreach is conducted to further engage this population in housing options, many are uninterested.
3. End chronic homelessness by 2017. Significant progress has been made in ending chronic homelessness.
 - 100% of our HUD funded programs either dedicate or prioritize beds for the chronically homeless.
 - The CoC added nearly 40 permanent supportive (PSH) beds targeted to chronically homeless, disabled households, an increase of 15% since 2013.
 - In calendar year 2018, the CoC served 367 households through our Permanent Supportive Housing (PSH) over half were chronically homeless.
 - The CoC has a long standing “move on” strategy, to help identified PSH residents exit to more independent, less intensive permanent housing. However, PSH residents do not consistently accept Section 8 when available. This causes a delay in opening up PSH beds to others.
 - Chronically homeless individuals have accounted for between 20% -25% of the total PIT for the last three years. The majority of those are unsheltered and while consistent outreach is conducted to further engage this population in housing options, many are uninterested.
4. Prevent and end homelessness among children, youth and families by 2020. More progress can be made in addressing homelessness among children, youth and families. The CoC has established Interdisciplinary Teams (IDTs) in each county to help identify those who are vulnerably housed and connect those who are experiencing the crisis of homelessness with local resources.
 - The number of homeless people in households with at least one child decreased from over 40% in 2018 and 2017 to 25% in 2019. For the first time in three years more homeless households with at least one child were sheltered than unsheltered.
 - The number of unaccompanied youth (ages 18-24) who are literally homeless has decreased from a high of 109 in the 2015 PIT count to 21 in the 2018 and 2019 PIT count.
 - The CoC also participates in Maryland’s Youth REACH count which expanded the HUD definition of literally homeless to include those youth who are unstably housed (moved multiple times within a two month period and report that they are not living with immediate family members). This survey suggests that the region has an almost equal number of youth who are unstably housed as who are literally homeless.

- The high cost of living in Southern Maryland suggests the need to have more rapid rehousing (RRH) for those who fall into homelessness due to a temporary setback.
 - The number of literally homeless in our region accounts for nearly 75% of all homeless (2019 PIT).
 - The CoC has greatly increased its capacity of RRH units in the past three years, especially with funding from the state. In 2018, 296 people were housed through RRH programs.
 - As RRH programs evolve, providers report the following challenges:
 - Transportation to where one is currently living to an available unit is often a barrier.
 - Need an increase in number of landlords willing to work with CoC service providers and households served.
 - Need an increase in the number of affordable housing units available in the region as many households want to remain living in the region.
 - Security deposits for households with poor credit history are over double the normal fee. Churches and other civic groups are strained to help offset this cost of move in.
 - Ensuring households understand that RRH rental support will end and that household income needs to increase overtime to continue housing in that unit.
 - There are not enough housing resources for single women, including single women who have left their children with family or friends until stable housing can be identified.
 - St. Mary's County recently received 80 Family Unification Program (FUP) housing vouchers. The FUP addresses needs of households whose lack of adequate housing is a primary factor in either:
 - The imminent placement of the family's child or children in out-of-home care.
 - The delay in the discharge of the child or children to the family from out-of-home care
 - Increased attention needs to be paid to identifying individuals and families at risk of homelessness.
 - In Charles County alone, over 300 individuals were identified as at risk of homelessness (July 1, 2017 –April 23, 2018), just about equal to the number of Charles County individuals deemed literally homeless in the January 2018 PIT survey.
5. Increased attention needs to be paid to the housing needs of those exiting jail, hospitals or inpatient behavioral health programs.
- In June 2016, St. Mary's County opened the first Medical Respite program for homeless in the CoC. This 6 bed facility has served 27 individuals to date, all of whom have gone onto permanent housing after recovering from acute illness.
 - The success of the Medical Respite program has encouraged expansion to other parts of the state.

Data Collection: Gap and Needs Analysis

The Gap and Needs Analysis utilizes a number of data points.

Data collection tools required by US Department of Housing and Urban Development (HUD) include those below. It is important to note that these data sources focus on those who HUD defines as literally homeless - those in emergency shelters, transitional housing, domestic violence safe houses or who are “on the street”.

- Homeless Management Information System (HMIS), a data base used by all providers who receive federal dollars and provide services to the homeless population;
- Point-In-Time (PIT) survey which provide a snapshot of the number of sheltered (those in emergency shelters, transitional housing, domestic violence safe houses) and unsheltered (those that are “on the street”) homeless individuals and families that reside in our region on one single night in January (last Wednesday in the month); and
- Housing Inventory Count (HIC), which documents beds/units available to the homeless population.
- Maryland Interagency Council on Homelessness, 2018 Report.

Data collection tools also include results of periodic studies and evaluations at the local, regional or state level. These additional data tools broaden HUD’s restricted definition of “literally” homeless and give us a sense of those who are at risk of homelessness or are vulnerably housed – one paycheck away from homelessness or those who are doubled up with friends and relatives on a temporary basis.

Our 2019 Gaps and Needs Analysis also incorporates the results of:

- YouthReach 2018 - a new collaboration with the University of Maryland School of Social Work aimed at documenting the needs of unaccompanied youth 18-25 who are homeless or at risk of homelessness.
- ALICE, a 2017 report by the United Way of Maryland documenting needs of Asset Limited, Income Constrained and Employed (ALICE) households in each county of the state. Updated data was not available in time for this report.
- Charity Tracker: database on requests for service to the region’s social service providers, some of which addresses the needs of the homeless or those at risk of homelessness.

Finally, in addition to quantitative data, service providers throughout the Southern Maryland region routinely provide qualitative input by identifying trends, challenges and potential opportunities in their programs.

The 2019 Point-in-Time Results for Southern Maryland

The Southern Maryland region counted 306 individuals that were literally homeless, as per HUD definition, during the 2019 PIT count. This includes 114 persons that were unsheltered, and 192 persons that were sheltered (emergency or transitional housing). Below is a synopsis of the regional data for 2019.

CATEGORY	SHELTERED			UNSHELTERED	TOTAL
	Emergency Shelter	Transitional Housing	Safe Haven		
Total Number of Households	135	16	0	92	243
Total Number of Persons	176	16	0	114	306
Number of Children (under age 18)	40	0	0	11	51
Number of Persons (18 to 24)	15	1	0	5	21
Number of Persons (over age 24)	121	15	0	98	234
<i>HUD Target Populations</i>					
Number of Unaccompanied Young Adults (ages 18-24)	11	1	0	4	16
Number of Unaccompanied Children (under age 18)	0	0	0	0	0
Number of Veterans	4	0	0	9	13
Number of Chronically Homeless	31	0	0	48	79

Here is a comparison of PIT data over the last five years for the total number of individuals.

YEAR	SHELTERED INDIVIDUALS			UNSHELTERED INDIVIDUALS	TOTAL
	Emergency Shelter	Transitional Housing	Safe Haven		
2019	176	16	0	114	306
2018	161	45	0	286	492
2017	146	41	0	232	419
2016	171	42	0	251	464
2015	326	86	0	569	981
2014	401	150	0	590	1,141

While the CoC works as a collaborative effort amongst the three counties, there are distinct differences in the number of homeless individuals in each jurisdiction. The table below shows 2019 PIT results by county.

COUNTY	SHELTERED INDIVIDUALS			UNSHelterED INDIVIDUALS	TOTAL
	Emergency Shelter	Transitional Housing	Safe Haven		
Calvert	52	0	0	7	59
Charles	80	16	0	66	162
St. Mary's	44	0	0	41	85

2019 Housing Inventory Count (HIC)

The HIC catalogs available beds and units dedicated to serve persons who are homeless. The inventory includes beds that are short term/emergency based and these beds are counted as part of the PIT. The HIC also includes beds the CoC uses to provide permanent housing with customized support designed to stabilize individuals and families who have experienced the crisis of homelessness. These longer term beds are not included in the PIT.

Below is a table indicating the short term/emergency beds available at the time of the PIT.

2019 Housing Inventory Count: Homeless Beds			
	Year Round Beds	Seasonal beds	Beds Occupied PIT
Emergency Shelter: Any facility, the primary purpose of which is to provide a temporary shelter for the homeless in general or for specific populations of the homeless, and which does not require occupants to sign leases or occupancy agreements	135	145	176
Transitional Housing: A project that is designed to provide housing and appropriate supportive services to homeless persons to facilitate the movement to independent living within 24 months.	24	0	16
Safe Haven: is a form of supportive housing that serves hard-to-reach homeless persons with severe mental illness who come primarily from the streets and have been unable or unwilling to participate in housing or supportive services. Currently, our region does not have any safe havens.	0	0	0

The following table shows the growth in permanent beds 2014-2019.

	2014	2015	2016	2017	2018	2019
Permanent Supportive Housing (PSH): These are community-based housing units without a designated length of stay in which formerly homeless individuals and families live as independently as possible. In 2014, the CoC adopted a policy to dedicate PSH beds to chronically homeless households.	256	252	274	281	286	290
Rapid Rehousing (RRH): These programs quickly connect families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.	4	6	6	32	74	10

Appendix D

Asset Limited, Income Constrained, Employed (ALICE) Households

In addition to working with HUD to serve those who are literally homeless or chronically homeless, the CoC also focuses on understanding and addressing the needs of the vulnerably housed in an effort to prevent homelessness from occurring.

A United Way of Maryland 2017 study examined needs of those who are **Asset Limited, Income Constrained, Employed (ALICE)**. These are households that earn more than the US poverty level but less than the basic cost of living for the community they reside in. Many of these households are one paycheck away from the crisis of homelessness, or may be temporarily doubled up with family or friends.

The United Way study also assesses each community's capacity to assist ALICE households in the areas of housing, employment and community resources. The table below summarizes the ALICE findings for the three counties in Southern Maryland. Please note, the survival budget for a family of four is consistent with HUD's 2016 Median Family Income information which can be found [here](https://www.huduser.gov/portal/datasets/il/il2017/2017summary.odn) (<https://www.huduser.gov/portal/datasets/il/il2017/2017summary.odn>).

	Percent of County below ALICE threshold	Housing Affordability Score (1-100)	Job Opportunities Score (1-100)	Community Resources Score (1-100)	Survival Budget, Single Person	Survival Budget, Family of Four
Calvert	34%	44 (poor)	52 (fair)	57 (fair)	\$31,536	\$74,280
Charles	32%	31 (poor)	56 (good)	61 (good)	\$31,536	\$74,688
St. Mary's	32%	60 (good)	48 (fair)	54 (fair)	\$25,368	\$68,652

Appendix E

About the Continuum of Care

A Continuum of Care (CoC) is a local/regional system for helping people who are homeless or at imminent risk of homelessness. There are CoCs in every state and in most communities across the country. CoCs bring together community leaders, service providers, government agency representatives, and homeless/formerly homeless individuals to ensure that appropriate housing and social services are in place to address the whole range of homeless needs in the community. A coordinated system of services is developed, appropriate for each jurisdiction, to minimize the amount of time a household has to be homeless.

CoCs are considered a “best practice” for addressing and preventing homelessness. Benefits of this approach include:

- Reduce the time an individual or family experiencing a housing crisis has to go from program to program seeking assistance;
- Provide accurate information on the number of people experiencing a housing crisis, identify key factors involved in housing instability, help determine the need for additional beds and/or support services to address and prevent a housing crisis;
- Increase coordination and reduce duplication of services by public and private providers in the region;
- Collaborative approaches to expanding funding resources to meet the growing needs of this vulnerable population.

The Calvert-Charles-St. Mary’s Continuum of Care (CoC) is the primary regional body that coordinates efforts to address homelessness throughout Southern Maryland. The CoC is unique as it combines the efforts of three distinct local jurisdictions, each of whom is committed to preventing and ending homelessness in their community. While the Board meets on a monthly basis, it has worked together to accomplish the following successes:

- Develop a Coordinated Entry System (CES) to help individuals from each of the three local jurisdictions who are experiencing a housing crisis access services and provide a consistent set of criteria to assess vulnerability and refer to housing;
- Coordinate a Homeless Management Information System (HMIS) that tracks the number of homeless in our region and the services they are provided;
- Conduct unified PIT survey effort; thus better utilizing resources.

The Calvert-Charles-St. Mary’s County Continuum of Care is open to all stakeholders in the Tri-County region interested in preventing and ending homelessness. The CCSMCoC works closely with the local Homeless Service Boards in each of the three counties and partners with local and state agencies, including: Departments of Social Services, local Housing Authorities, and many others. For more information on the Calvert-Charles-St. Mary’s Continuum of Care, contact the CoC Board Chair, Sara Martin: 301-863-8500, sara@mdmetrocast.net, www.somdhomeless.org, or the Chair of your local Homeless Service Board:

- Calvert – Reverend Margaret Van Auker: 410-326-4874, betsy.vanauker@gmail.com
- Charles – Mike Bellis: 301-609-4844, mbellis@unitedwaycharles.org and Corae Young, 301-609-9900, cyoung@lifestylesofmd.org
- St. Mary’s – Robert Frere: 240-725-5732, robert.frere@maryland.gov