Cumberland County Homeless Assessment Report

2013

I. Introduction

In 2012, the U.S. Department of Housing and Urban Development released the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Interim rules. These interim regulations require a high level of planning and coordination among all Continuums of Care (CoCs) throughout the Country. As with any planning process, data analysis of the needs and outcomes of the current system is essential to facilitate meaningful planning.

In order to assist the Continuums of Care throughout New Jersey with this data analysis, this report uses information from the New Jersey Homeless Information System (HMIS) to provide a snapshot of the characteristics of homeless households in the Cumberland County. This report can serve as the foundation of a more in depth review of the population and its needs. Communities in New Jersey are well positioned to move towards data driven planning with the wealth of information available through HMIS.

II. Data Source

This Homeless Assessment Report for Cumberland County analyzed data from the Homeless Management Information System (HMIS) administered by New Jersey Housing and Mortgage Finance Agency (NJHMFA), the HMIS Lead Agency. In New Jersey, NJHMFA utilized software developed by Foothold Technology as the primary HMIS system for the state. The projects included in this report were all Emergency Shelter, Transitional Housing and Safe Haven projects (if available in the community) that were classified as "Homeless Only".

The Homeless Assessment Report is based on information about unduplicated homeless families and individuals who used available emergency shelter, transitional housing and safe haven projects during the yearlong reporting period January 1, 2013 – December 31, 2013, as reported in HMIS.

For purposes of this report, families included any persons that presented together at the HMIS participating project and would choose to be permanently housed together if that was an option. This can include, households with adults and children under the age of 18, households made of all adults, or unaccompanied youth (under age 18) that present together.
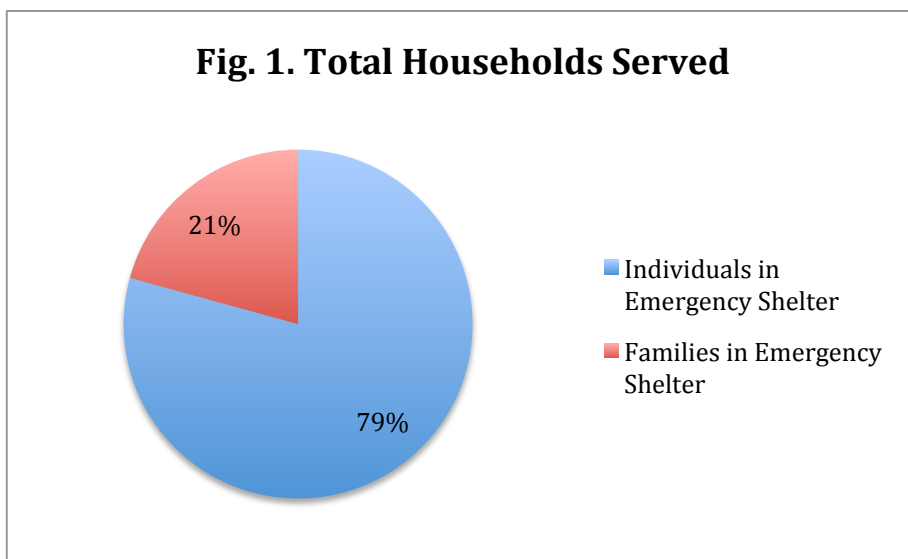
III. Findings for Total Population Served

Key Findings:
- A total of 381 households were served in HMIS participating emergency shelters during the January 1, 2013 – December 31, 2013 period
- Only 1 household was identified as chronically homeless during this reporting period
- 26% of all adults served either as individuals or as part of a family identified having a disabling condition
- 51% of the total population served was under age 30
- 22% of the households were discharged to a permanent destination after leaving the project
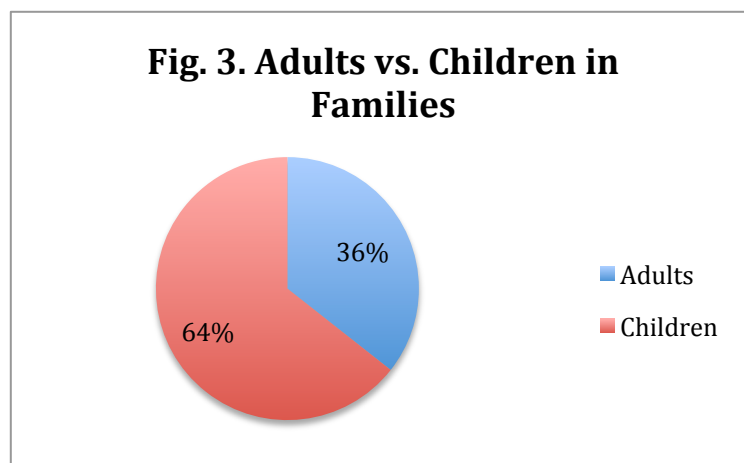
Total Homeless Population. A total of 381 households composed of 536 persons were housed in Cumberland County HMIS participating emergency shelters during the January 1, 2013 – December 31, 2013 reporting period. This is a 12% increase in total households served from 2012. Out of the households served in 2013, the majority, 79% (302)

Fig. 1. Total Households Served

- Individuals in Emergency Shelter
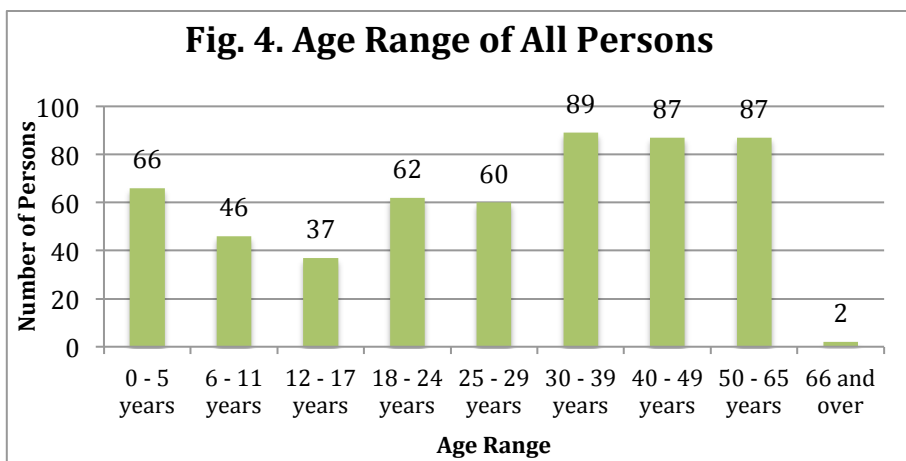- Families in Emergency Shelter

21%
79%

were individuals, while the remaining 21% (79 households) were families. As shown in Figure 1, the most served population was individuals in emergency shelter, which made up 79% of the total population served. The 536 persons served throughout Cumberland County HMIS projects made up 2% of New Jersey's total homeless population served in HMIS projects in 2013.

Figure 2. Total Persons Served		
	Cumberland County	**New Jersey**
Total Persons Served	536	23,949
Emergency Shelter	536	19,208
Individuals	302	12,639
Families	234	6,569

Family Composition. Of the 79 family households served throughout Cumberland County in 2013, 72 (91%) were households with adults and children under 18, 5 (6%) were adult only households while the remaining 5 were youth only households. As shown in Figure 3, children represented 64% of the persons included in adult and children families. The average size of a homeless family in 2013 was 3 and the average age of a child served was 7 years old.

Fig. 3. Adults vs. Children in Families

- Adults
- Children

36%
64%

Demographics. Of the total homeless population that was served in Cumberland County during 2013, **t**he largest percent, 28%, were children under the age of 18. As Figure 4 shows, the next highest age range served was persons between 18 and 29 years (23%), making 51% of the total population served under the age of 30.

Fig. 4. Age Range of All Persons

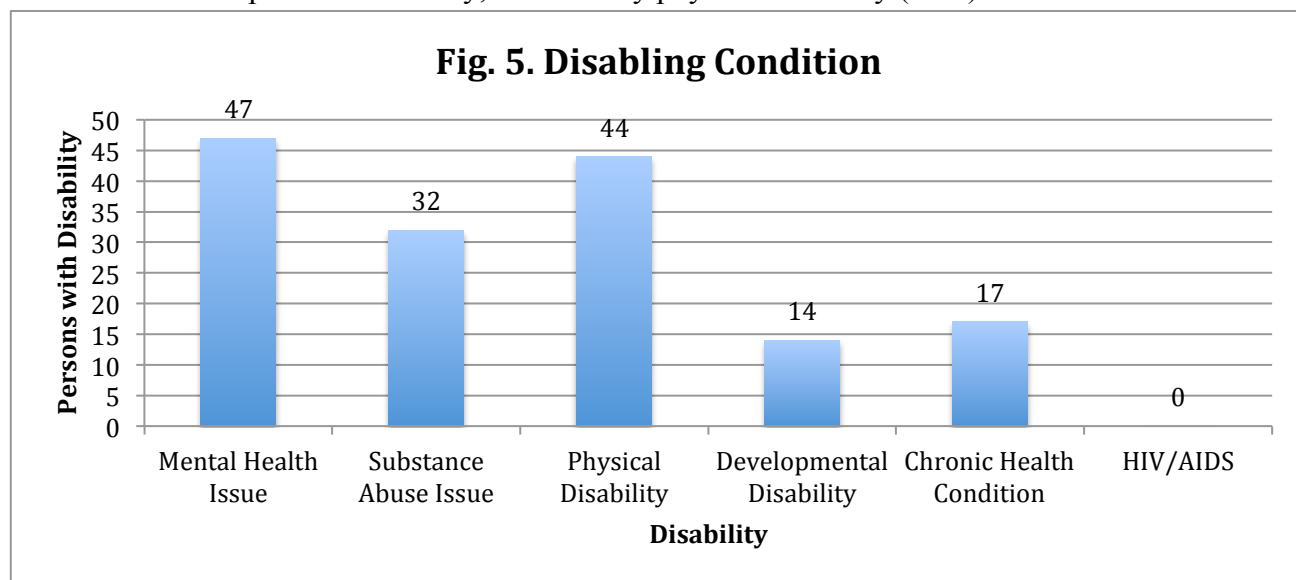| Age Range	Number of Persons
0 - 5 years	66
6 - 11 years	46
12 - 17 years	37
18 - 24 years	62
25 - 29 years	60
30 - 39 years	89
40 - 49 years	87
50 - 65 years	87
66 and over	2

Similar to the 2012 numbers, more than half (57%) of the homeless persons served in Cumberland County HMIS participating projects were male, with women representing 43% of the population.

In addition, Black and African-American and White were both listed as the leading races among homeless persons served in 2013, with 47% of the population identifying each race. This was following by Multi-Racial with 3%. With regards to ethnicity, 21% identified themselves as Hispanic/Latino.
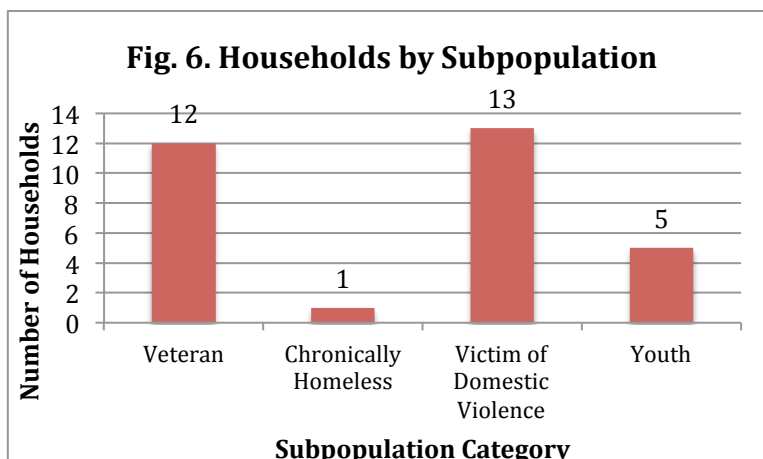
Disabling Conditions. Among all persons served throughout Cumberland County's HMIS emergency shelters, 20% identified having a disabling condition, this number includes 26% of adults and 4% of children.

Among disabled adults, 46% reported mental health issues making this the most prevalent disability. 42% of disabled adults also reported a physical disability. Among disabled children, 83% identified a developmental disability, followed by physical disability (33%).

Fig. 5. Disabling Condition

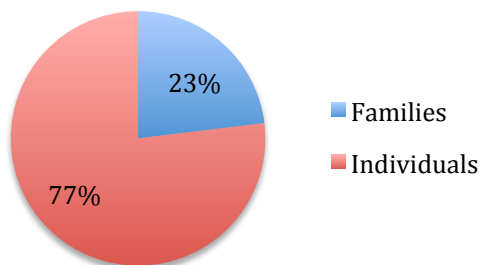| Disability	Persons with Disability
Mental Health Issue	47
Substance Abuse Issue	32
Physical Disability	44
Developmental Disability	14
Chronic Health Condition	17
HIV/AIDS	0

Subpopulation Characteristics. In its plan, *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*, the United States Interagency Council on Homelessness (USICH) has prioritized ending youth, veteran and chronic homelessness across the Country. In 2013, Cumberland County served only 1 household that was identified as chronically homeless in emergency shelters. This household was an individual being served in the emergency shelter.

Fig. 6. Households by Subpopulation

Youth only households, households without someone over age 18, represented only 1% of the total households served throughout Cumberland HMIS projects. These households were composed of 3 individual youth and 5 persons in youth only households.

As far as veterans served, Cumberland County served a total of 12 veterans throughout 2013. 75% of veterans served were individuals and 25% were female. 25% of veterans reported having some kind of disability, with the most common disability reported being chronic health condition and physical disability representing 40% each.

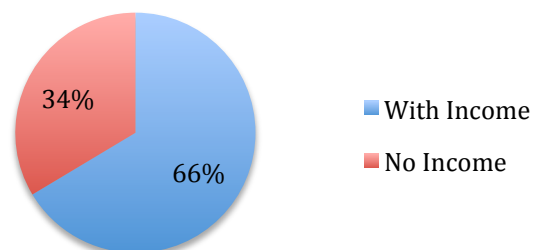**Fig. 7. Household Type Among Victims of Domestic Violence**

In addition to the chronic, youth and veteran populations, there were 13 homeless households that reported having a victim of domestic violence. 77% of these households were individuals, while the remaining 3 were families. 69% reported that the last episode of domestic violence occurred within the past 3 months, while another 15% reported it happening more than a year ago. As a note, while there are victims of domestic violence being served in HMIS participating agencies, due to federal regulations, Domestic Violence specific projects are not able to enter data into HMIS, so the number of victims served in those projects are not included in this report.
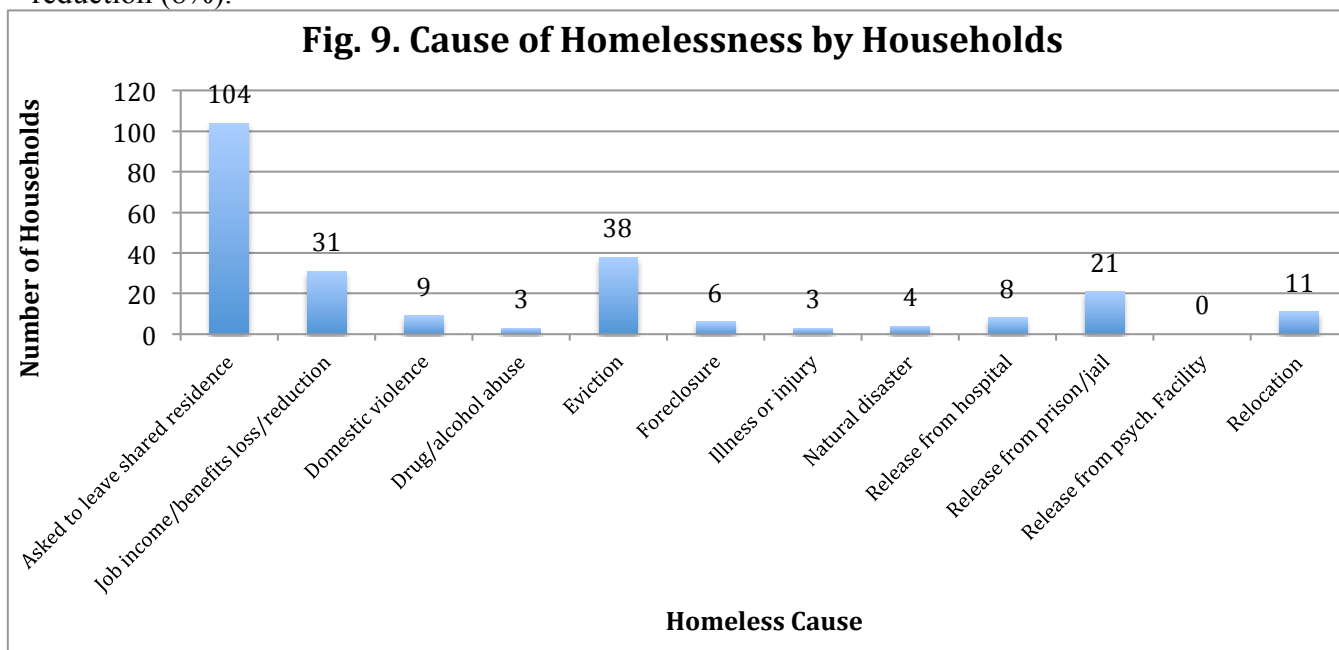
Income and Benefits. Among all homeless households served in emergency shelters during 2013, 34% had no source of income, while 10% reported receiving some form of earned income. The most common source of cash income among households was SSI (36%) and General Public Assistance with 27% of total households reporting this form of income. The average monthly income for households in emergency shelter was $320.
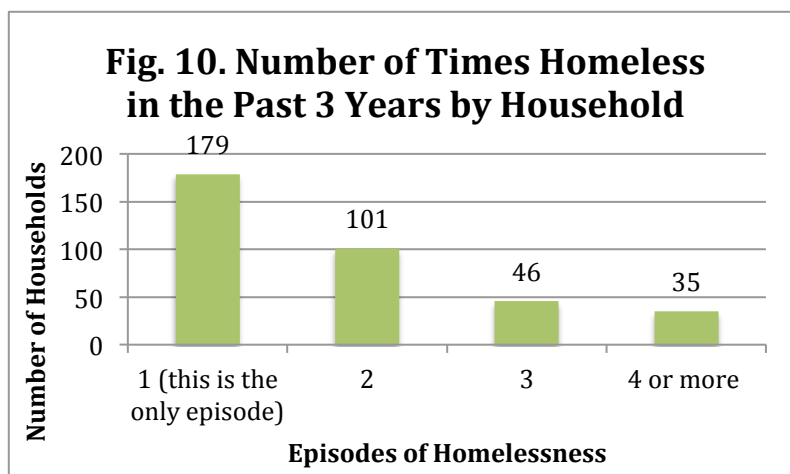
Fig. 8. Percentage of Households with Income

While 34% of households had no source of income, 45% of households were not receiving some kind of non-cash benefit. Food Stamps was the top reported non-cash benefit, which was reported by 53% of the households. Another 45% of households were connected to Medicaid benefits.

Cause of Homelessness and Residence Prior to Project Entry. When asked what the primary factor was that contributed to, or caused, their homelessness, more households attributed their homelessness to being asked to leave a shared residence (27%) than any other cause. As Figure 9 shows, the next most common factors were eviction (10%) and job income or benefit loss or reduction (8%).

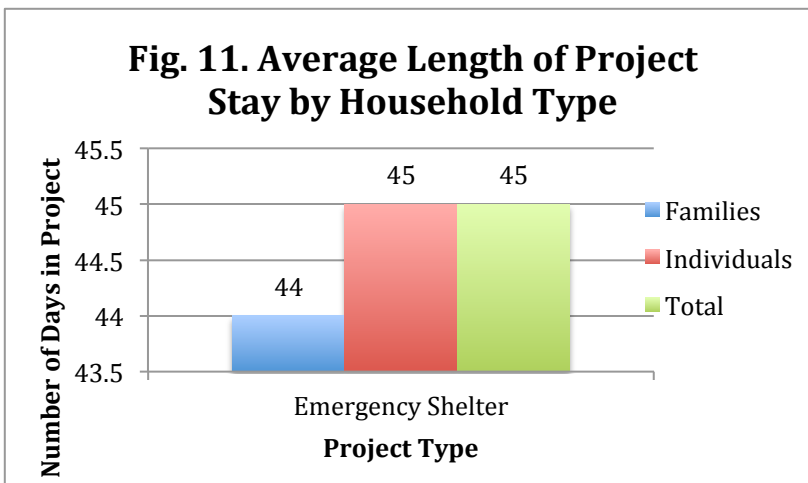**Fig. 9. Cause of Homelessness by Households**

These causes of homelessness coincide with the common response for residence prior to project entry with 46% of households staying or living with family or friends prior to project entry. The next most common response was rental by client (13%) followed by hotel or motel (8%).

Length of Stay at Prior Residence and Episodes of Homelessness. 37% of the households served during 2013 had resided in their last residence for one year or longer before entering the emergency shelter project. Another 13% were staying in their residence for a week or less before entering the project. When looking at the number of times the household had been homeless in the past 47% of households were experiencing their first episode of homelessness, as seen in Figure 10.
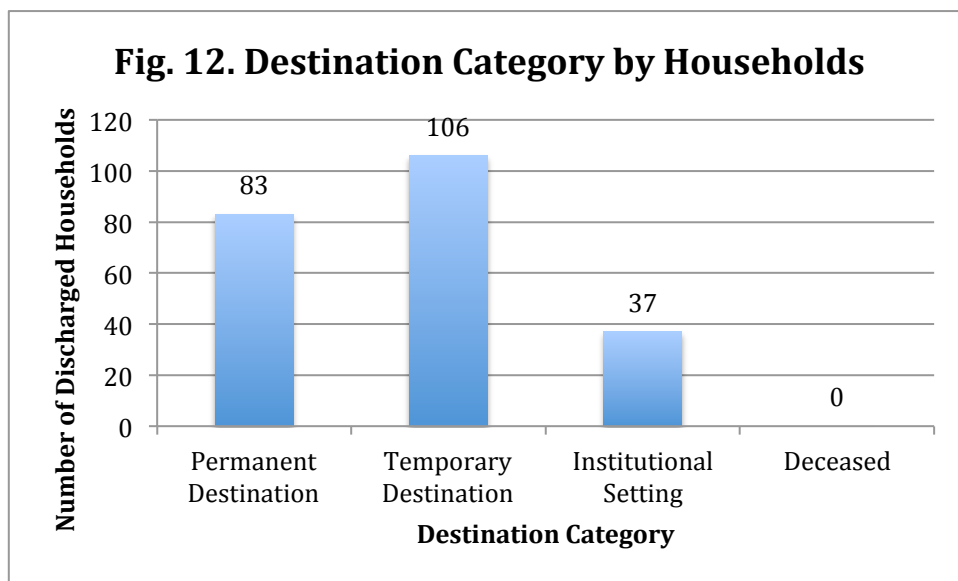
Fig. 10. Number of Times Homeless in the Past 3 Years by Household

Average Length of Project Stay. When looking at total length of project stay families and individuals were enrolled in emergency shelter projects for on average 45 days.

Fig. 11. Average Length of Project Stay by Household Type

Reason and Destination at Discharge. A total of 381 households were discharged from emergency shelter projects during the 2013 reporting period. 30% of these households left the project for a housing opportunity before completing the project while another 11% were discharged from the project due to non-compliance.

Fig. 12. Destination Category by Households

22% of households discharged in 2013 moved on to permanent destinations upon discharge from the project. A permanent destination includes a unit owned or rented by a client, permanent housing project, or living with a family member or friend permanently. The most common permanent destination was rental by client with 11% of total discharges. This rental could be with or without a subsidy. 28% of households moved on to a temporary destination at discharge, which could include an emergency shelter, hotel or motel, place not meant for habitation, staying with a family member or friend temporarily, safe haven, or transitional housing for homeless persons. The most common form of temporary housing as a destination was staying with family or friends temporarily, which was the destination of 21% of the households served. An institutional destination, which was the destination of 10% of households, includes hospitals (psychiatric or non-psychiatric), a halfway house, jail or prison, foster care, long-term care facility or a substance abuse treatment facility. 4% of households discharged moved on to either jail or prison or medical hospital, making these the most common institutional destination reported.

Appendix A: HMIS Projects Included in Report

I. Emergency Shelter Projects

Agency	Project Name
Rural Development Corp.	RDC Cumberland Family Shelter
Tri-County Community Action Partnership Parvins Branch	TCCAP Hotel/Motel