

# Cumberland County Homeless Assessment Report





#### 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 Homeless Management Information Systems (HMIS) used in New Jersey to provide a snapshot of the characteristics of homeless households that were served throughout the State. This report can serve as the foundation of a more in depth review of the population and its needs.

#### II. Data Source

This Homeless Assessment Report for Cumberland County analyzed data from the Homeless Management Information System (HMIS) administered by the New Jersey Housing and Mortgage Finance Agency (NJHMFA), the HMIS Lead Agency for the CoC. 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, 2015 – December 31, 2015, as reported in HMIS.

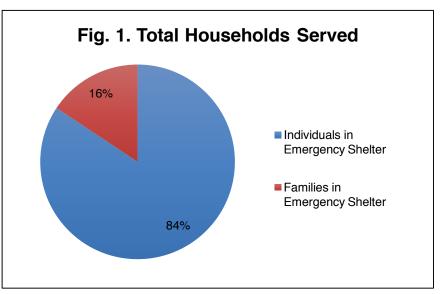
For purposes of this report, families included any persons that presented together at the HMIS participating project and would choose to be permanently housed together if that was an option. This can include, households with adults and children under the age of 18, households made of all adults, or unaccompanied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

#### **III. Findings for Total Population Served**

#### Key Findings:

- A total of 485 households were served in HMIS participating emergency shelter projects during the January 1, 2015 December 31, 2015 period
- There were 2 households identified as chronically homeless during this reporting period
- 30% of adults served either as individuals or as part of a family identified having a disabling condition
- 23% of households moved on to permanent destinations after discharge

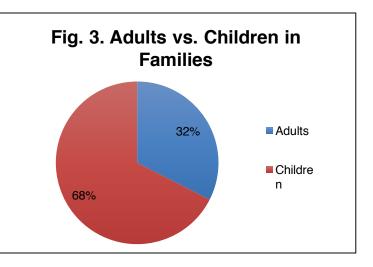
Total **Homeless Population.** A total of 485 households composed of 647 persons were housed in Cumberland County HMIS participating emergency shelter projects during the January 1, 2015 – December 31, 2015 reporting period. This is a 40% increase in the total number of households served from 2014 and a 35% increase from the 481 persons served in 2014. Out



of the households served in 2015, the large majority, 84% (409) were individuals, while the remaining 16% (76 households) were families.

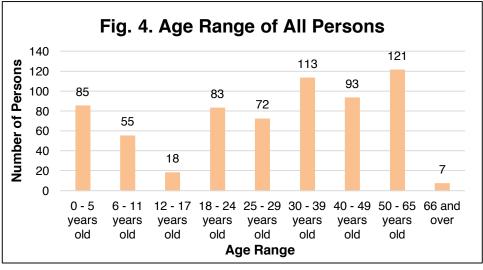
Fig. 2 Total Persons Served		
	Cumberland	New Jersey
	County	
Total Persons Served	647	24,519
Emergency Shelter	647	20,337
Individuals	409	13,108
Families	238	7,229

**Family Composition.** Of the 76 family households served throughout Cumberland County in 2015, 74 (97%) were households with adults and children under 18, while the remaining 2 (3%) were adult only households. As shown in Figure 3, children represented 68% of the persons included in adult and children families. The average size of a homeless family in 2015 was 3 and the average age of a child served was 6 years old.





Demographics. Of the total homeless population that was served in Cumberland County during 2015, the largest percent, 24%, of persons were children under the age of 18. As Figure 4 shows, the next highest age range served was persons between the ages of 18 and 29, which



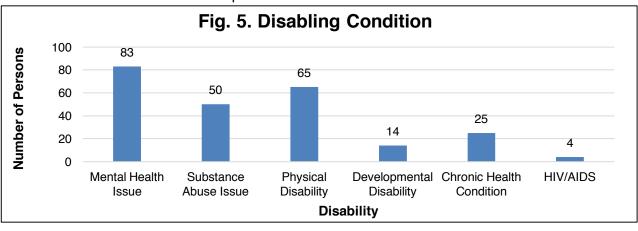
represented 24% of the total population.

Similar to the 2014 numbers, just over half (55%) of the homeless persons served in Cumberland County HMIS participating projects were male, with women representing 44% of the population.

In addition, 50% of the homeless persons served during 2015 identified their race as Black or African American, making that the largest racial subgroup. The next largest group identified as White (46%), followed by Multi-Racial with 4%. With regards to ethnicity, 18% identified themselves as Hispanic/Latino.

**Disabling Conditions**. Among all persons served in Cumberland County's HMIS emergency shelter, 23% identified having a disabling condition, this number includes 30% of adults and 3% of children.

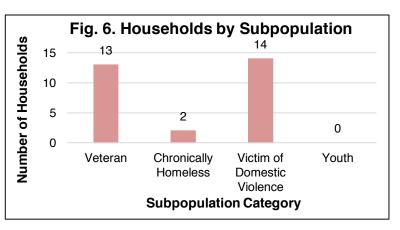
Among disabled adults, 55% reported a mental health issue, making this the most prevalent disability; representing 16% of the total adult homeless population. 44% of disabled adults also reported physical disability. Among disabled children, 75% reported a chronic health condition. Another 75% of disabled children reported a mental health issue.





**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 2015, Cumberland County projects served a

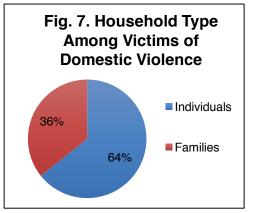
total of 2 households that were identified as chronically homeless, a



decrease of 2 households from the 4 served in 2014. 1 of the chronically homeless households was a family.

There were no youth only households, households without someone over age 18, served throughout Cumberland County HMIS projects in 2015.

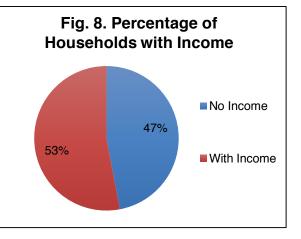
As far as veterans served, Cumberland County emergency shelter projects served a total of 13 veterans throughout 2015. 85% of veterans served were individuals and 15% were female. 15% of veterans reported having some kind of disability, with the most common disability reported being a physical disability (100%).



In addition to the chronic, youth and veteran populations, there were 14 homeless households that reported having a victim of domestic violence. 64% of these households were individuals, while the remaining 5 were families. 21% reported that the last episode of domestic violence occurred over a year ago, while 64% reported it happening within the past 3 months. 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.

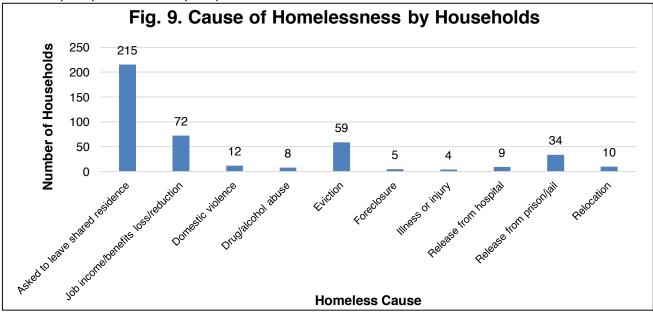
**Income and Benefits**. Among all homeless households served in emergency shelter projects during 2015, 47% had no source of income, while 12% reported receiving some form of earned income. The most common sources of cash income among households were SSI (28%) and General Assistance (13%). The average monthly income for households in emergency shelter was \$349.





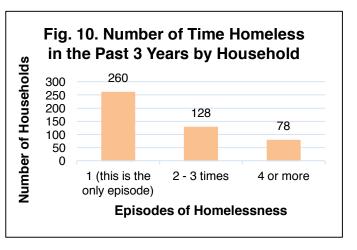
While 53% of households had some source of income, 73% of households were receiving some kind of non-cash benefit. Medicaid was the top reported non-cash benefit, reported by 59% of households, followed by Food Stamps, reported by 44%.

**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 (44%) than any other cause. As Figure 9 shows, the next most common factors were a loss or reduction in job income or benefits (15%) and eviction (12%).



The most common response for residence prior to project entry was staying or living with family or friends, with 48% of households. The next most common response was rental by client (17%) followed by place not meant for habitation (8%).

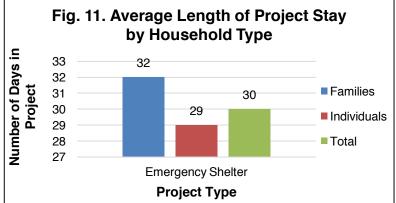
Length of Stay at Prior Residence and Episodes of Homelessness. 30% of households served during 2015 had stated they resided in their last residence for one year or longer before entering the emergency shelter project, while 11% were there one week or less. Additionally, 16% of households had experienced 4 or more episodes of homelessness in the past 3 years, while 54% of households were their experiencing first episode of homelessness prior to project entry, as shown in Figure 10.



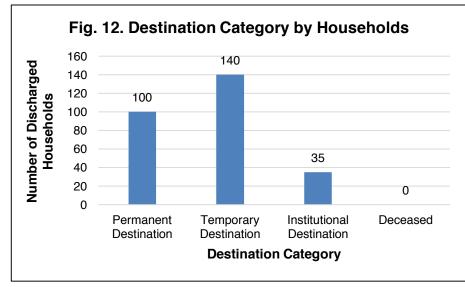
2015

### Average Length of Project Stay. When looking at total length of project stay, families seemed to have a slightly

longer length of program stay than individuals. When comparing the average length of stay in 2015 to that in 2014, the average length of stay decreased by 12 days for emergency shelter projects in 2015.



**Reason and Destination at Discharge**. A total of 444 households were discharged from emergency shelter projects during the 2015 reporting period. 34% of these households left for a housing opportunity prior to project completion, while 16% were discharged for due to non-compliance.



Due to the nature of some homeless projects, discharge information was not able to be collected for all discharged households.

23% of households discharged in 2015 moved on to permanent destinations upon discharge from the project. A permanent destination includes a unit owned or rented by a client, a permanent housing project,

or living with a family member or friend permanently. The most common permanent destination was rental by client with 13% of total households moving into a rental upon discharge. This rental could be with or without a subsidy. 32% 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 temporary destination was staying with friends and family, which was reported by 19% of households. An institutional destination, which was the destination of 8% 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. The most common institutional destination was a medical hospital with 5% of households being discharged to this location.



## Appendix A: HMIS Projects Included in Report

#### I. Emergency Shelter Projects

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