

Missing the Foundation

Understanding Homelessness
in Spokane County

2015



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Introduction

Addressing homelessness in Spokane County is a priority for many local agencies and non-profit organizations. Homelessness is a complex issue—rooted in social inequities, such as poverty, lack of affordable housing and low-level education. Many organizations support the homeless by providing housing and other social services as well as assisting families and individuals experiencing poverty in an effort to prevent homelessness. The purpose of this report is to describe the homeless population in Spokane County and bring clarity to the complex web of services that are provided locally, as well as identify unmet needs of the homeless population in an effort to direct future prevention and intervention services.



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Defining Homelessness

In order to understand homelessness in the county, it must first be defined. Several definitions of homelessness are used by different agencies to qualify individuals and families for support services. The most commonly-used definition of homelessness, put forth by the U.S. Department of Housing and Urban Development (HUD), refers to individuals or families living in a place not meant for habitation, safe haven or emergency shelter, transitional housing, or is being evicted within a week with no subsequent residence identified.

Another common definition of homelessness is that of the U.S. Department of Education. It considers the same individuals and families homeless as does HUD, but has a broader definition to include those who are unstably housed or doubling up with other families.

Determining the number of homeless individuals and families is challenging due to the different definitions utilized by service providers and the inherent transient nature of homeless persons. What follows is an overview of the different methods used in Spokane County to attempt to assess the size of the homeless population.



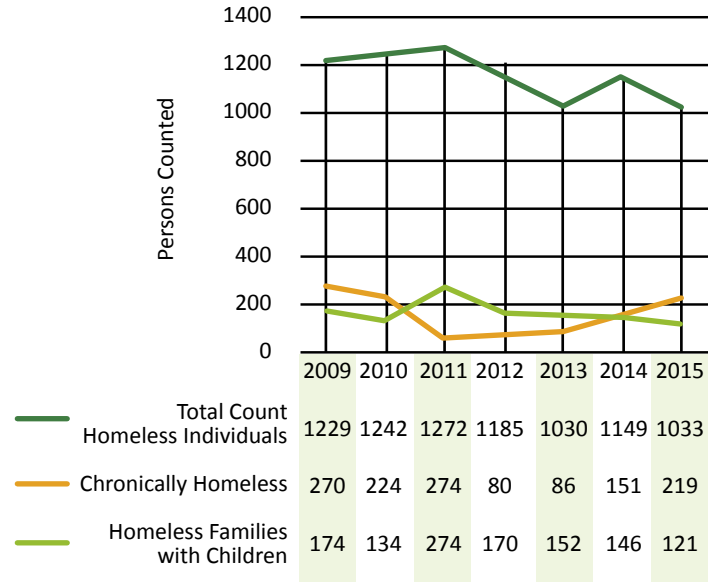
Spokane County Homeless Population

Point-in-Time Count

One widely used measure of homelessness in Spokane County is the one-day Point-in-Time (PIT) count conducted by the City of Spokane. As a recipient of funding for homelessness services, the city is required by federal and state governments to conduct a PIT count of homeless persons each year. The count is conducted across the county during one of the last 10 days of January. The last Spokane County PIT count was conducted on Thursday, January 29, 2015. The count serves as a snapshot of persons who were either sheltered (living in a supervised, temporary housing facility) or unsheltered (having a primary residence out of doors or in a place not suitable for sleeping, including cars, parks, abandoned buildings, bus or train stations, airports, and campgrounds).

Examining trends in PIT count data for the past seven years shows a decrease in the number of homeless individuals from 1,149 in 2014 to 1,033 in 2015. A total of 772 households were counted in 2015 including families

Figure 1. Point-in-Time Count, Spokane County



Source: Spokane Regional Point-in-Time Count, 2015

“On January 29, 2015, staff from homeless housing and service providers, outreach professionals, faith-based organizations, volunteers, and city and county staff conducted the annual county-wide ‘Point-in-Time Count’ to identify homeless persons in the community. A total of 30 different agencies participated to find and survey homeless persons in the county.”

- City of Spokane -

with children, adult-only families, and other households. The number of homeless families with children appears to have decreased slightly each year from 2011 to 2013, rising again in 2014 before decreasing in 2015. Spokane County’s trend in total homelessness is similar to national data that shows a decrease in homelessness each year since 2005.

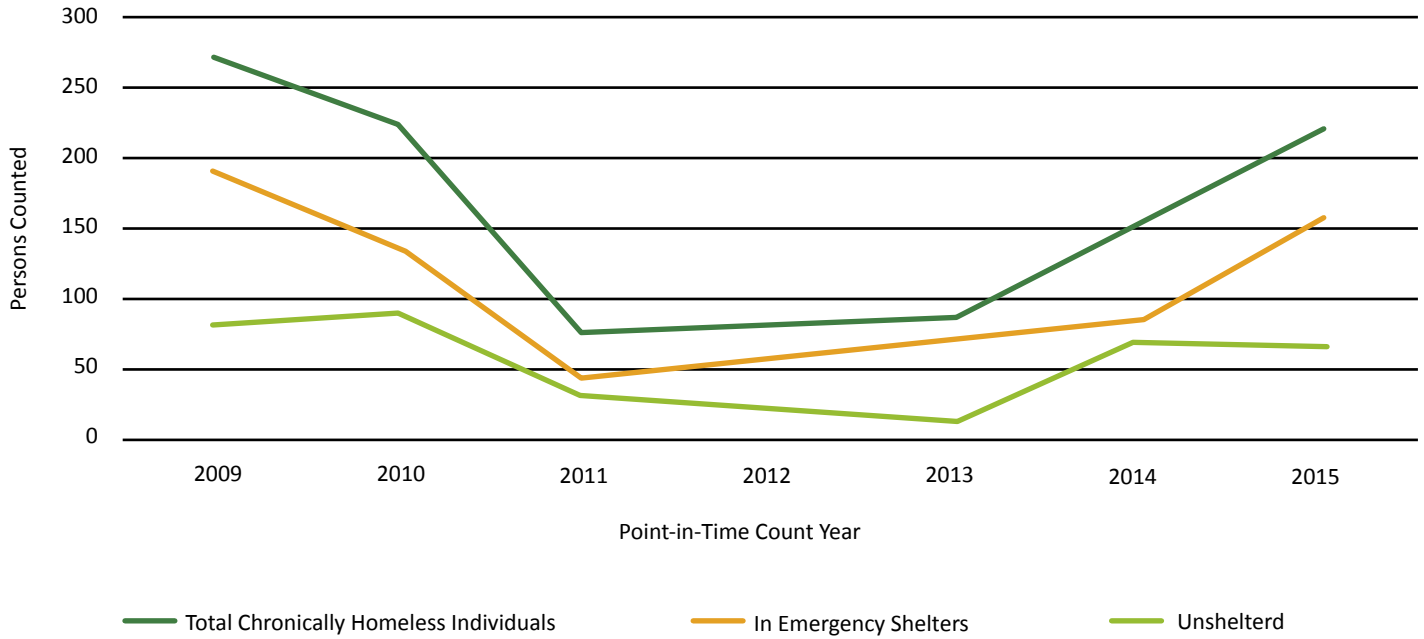
The PIT also provides specific counts of various homeless subpopulations including chronically homeless, homeless families with children and homeless veterans. The numbers of chronically homeless persons rose since 2011, while the number of homeless families with children declined. These trends reflect local efforts that have prioritized ending homelessness for families by targeting services to homeless families with children.

Table 1. PIT Count, Chronically Homeless Individuals, Spokane County

	2009	2010	2011	2012	2013	2014	2015
Chronically Homeless in Emergency Shelters	190	136	45	59	74	85	156
Chronically Homeless Unsheltered	80	88	29	21	12	66	63
Total Chronically Homeless Individuals	270	224	74	80	86	151	219

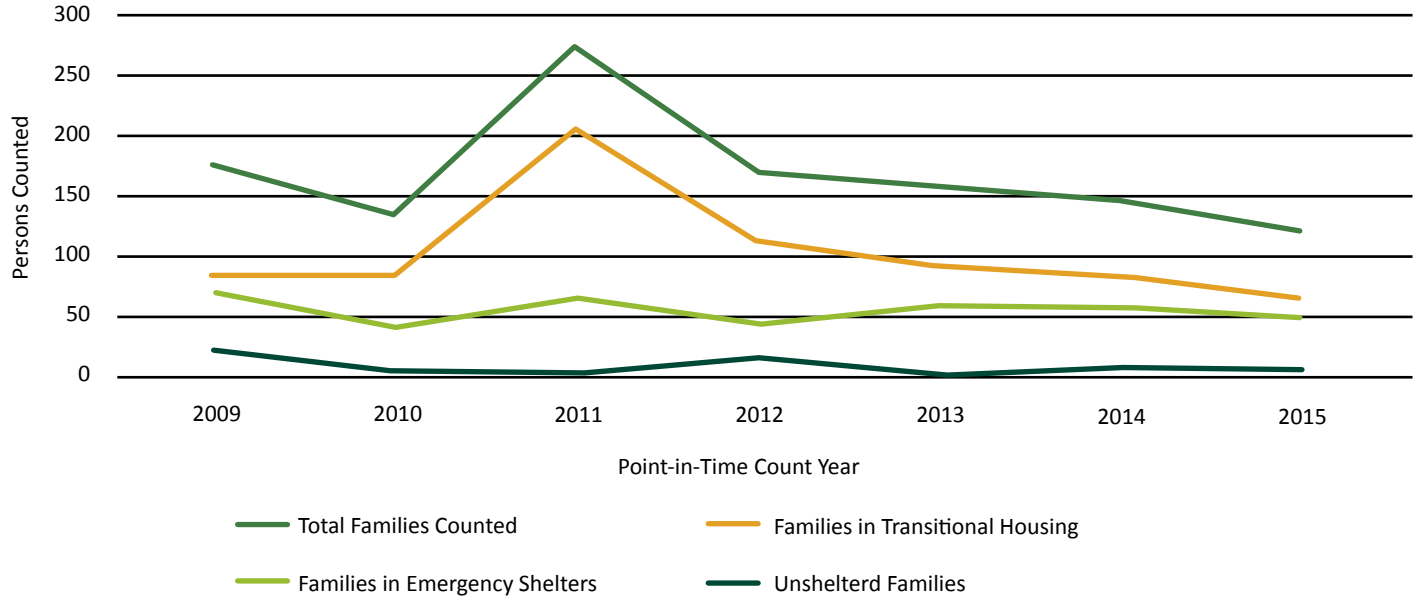
Table was adapted from: 2015 Spokane Regional Point-in-Time Count Executive Summary

Figure 2. Point-in-Time Count: Chronically Homeless Individuals, Spokane County



Source: Spokane Regional Point-in-Time Count, 2015

Figure 3. Point-in-Time Count: Families with Children, Spokane County



Source: Spokane Regional Point-in-Time Count, 2015

Table 2. PIT Count, Homeless Families with Children, Spokane County

	2009	2010	2011	2012	2013	2014	2015
Families in Emergency Shelters	70	42	63	46	58	58	50
Families Unsheltered	21	7	6	12	2	6	6
Families in Transitional Housing	83	85	205	112	92	82	65
Total Families Counted	174	134	274	170	152	146	121

Table was adapted from: 2015 Spokane Regional Point-in-Time Count Executive Summary

What does it mean to be chronically homeless?

An individual is chronically homeless if he or she:

- Is homeless and lives in a place not meant for human habitation, in a safe haven, or in an emergency shelter AND
- Has been homeless and living or residing in a place not meant for human habitation, in a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last three years, AND
- Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability.

A family is chronically homeless if:

- The head of household (adult or minor) meets all of the criteria above, including a family whose composition has fluctuated while head of household has been homeless.

Other considerations

Those who have been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days AND were previously living in a place not meant for human habitation, a safe haven, or emergency shelter, also meet the standard (this is assuming that the disabling condition standard has also been met).

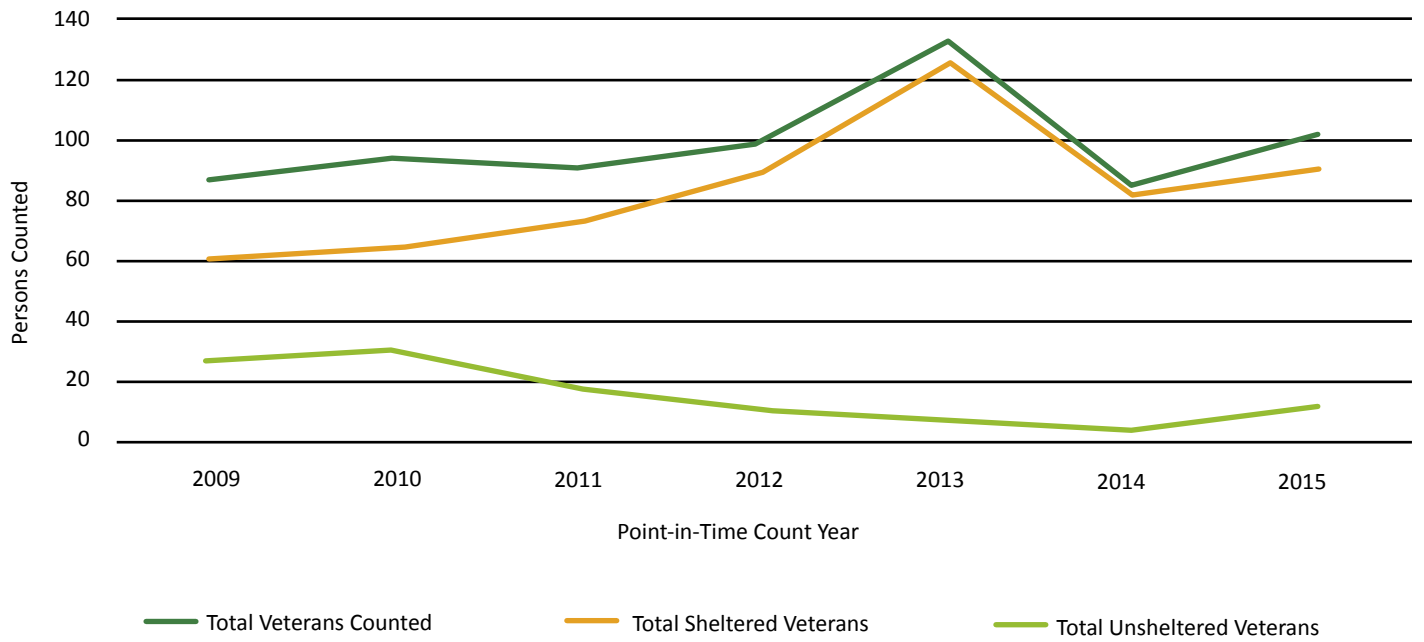
Source: HUD Definition



Although there continues to be an increase in the number of homeless veterans in Spokane County, the distribution of those who are sheltered versus unsheltered improved. Approximately 10% were unsheltered in 2015, compared to approximately 30% in 2009. The City of Spokane established a priority of ending veteran homelessness in the city by the end of 2015 and will measure their success in meeting that goal through the 2016 PIT count. Ending

homelessness for veterans is also a top priority of the U.S. Department of Veterans Affairs (VA) and many other local agencies, including Goodwill Industries of the Inland Northwest and Volunteers of America Eastern Washington and Northern Idaho. Increased attention and local efforts to eliminate veteran homelessness have proven effective as witnessed in trends over the past seven years.

Figure 4. Point-in-Time Count: Homeless Veterans, Spokane County



Source: Spokane Regional Point-in-Time Count, 2015

Table 3. PIT Count, Homeless Veterans, Spokane County

	2009	2010	2011	2012	2013	2014	2015
Homeless Veterans in Emergency Shelters	60	64	73	89	125	82	91
Homeless Veterans Unsheltered	27	29	18	10	7	3	10
Total Homeless Veterans	87	93	91	99	132	85	101

Table was adapted from: 2015 Spokane Regional Point-in-Time Count Executive Summary

We believe access to housing is a basic human right, and homelessness contradicts the right to safe and adequate shelter.

- The City of Spokane -



Although the PIT count provides a useful account of homelessness and is consistently implemented across the nation, it is thought by many to grossly underestimate the homeless population. One limitation of the methodology is that it only counts the homeless population for one night during the year, overlooking those who were unable or unwilling to be found. It also leaves out the number of homeless individuals on different days or different times of the year. Most service providers believe the actual number of homeless persons in Spokane County at any given time to be much higher than the PIT count suggests; local service providers estimate as many as 5,000 people are homeless in Spokane County at any given time.

Another limitation of the PIT count methodology is that it does not account for the large number of people in Spokane County who are unstably housed—those who are at the brink of homelessness or doubled-up with individuals or families. While it is difficult to know how many Spokane County residents are doubled-up for financial reasons, other data sources such as data from available Spokane County students provide a glimpse into this issue and the number of families who are doubled-up in Spokane County. Tellingly, researchers who collected national data on families entering homeless services found that being doubled-up with family and friends is often a precursor to entering a shelter, suggesting that families unstably housed or doubled-up are at risk of becoming homeless.¹

Spokane County Homeless Student Population: Office of Superintendent of Public Instruction

Another measure of homelessness in Spokane County is of homeless students as determined by Washington State Office of Superintendent of Public Instruction (OSPI). OSPI defines homelessness broadly, including those who are doubled-up or unstably housed with other families. This definition was established by the McKinney-Vento Act (the first federal legislative response to homelessness providing services for housing, education, job training, and health care²) and is consistently used by educational institutions across the country. In Washington state, schools gather information about homelessness through a liaison who regularly surveys families about their housing status³.

Figure 5 (pg. 13) provides insight into the number and percentage of K-12 students in Spokane County identified as homeless from 2010-2014. While increases were seen from 2010-2012, they were non-significant. Homelessness remained close to 4% of the total student population from 2012-2014. The reason for the modest increase is not known. It could, at least partially, be attributed to changes in the quality of the data collected over time; homelessness could have been underestimated in earlier years. It is important to note that this data shows that there are approximately 3,000 students in Spokane County affected

by homelessness—much higher than the 1,149 homeless individuals of all ages who were counted that same year by the PIT count.

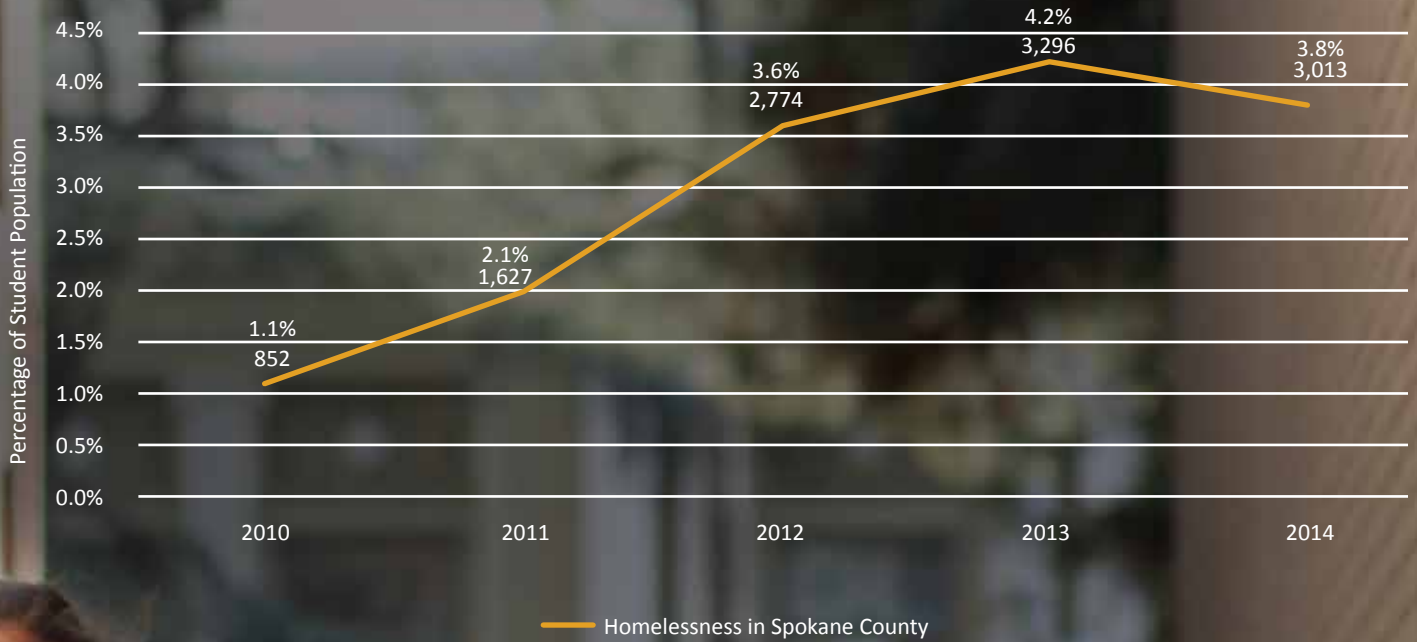
Of the 3,013 homeless students identified in Spokane County in 2014: 76.2% (2,297 students) were doubled-up; 17.3% (522) lived in shelters; 3.4% (104) were unsheltered, living on the streets or areas deemed not suitable for living; and 3% (90) lived in hotels or motels. By examining student homelessness it becomes clear that the PIT count is underestimating the number of homeless individuals and families in need in Spokane County. The measure of student homelessness also provides direction to agencies that are looking to reduce the effect of homelessness on individuals and families by identifying an under-served area in need of intervention—doubled-up students and families. Agencies working to reduce these numbers should also note that these vulnerable students, even perhaps more so than adults, are most likely experiencing stressors related to financial hardship and the impact of being homeless, including stress, anxiety, depression and others. Addressing these variables as part of any intervention is crucial.

McKinney-Vento Act defines homeless children as “individuals who lack a fixed, regular and adequate nighttime residence.” The act provides examples of children who would fall under this definition:

- Children and youth sharing housing due to loss of housing, economic hardship or a similar reason
- Children and youth living in motels, hotels, trailer parks, or campgrounds due to lack of alternative accommodations
- Children and youth living in emergency or transitional shelters
- Children and youth abandoned in hospitals
- Children and youth awaiting foster care placement
- Children and youth whose primary nighttime residence is not ordinarily used as a regular sleeping accommodation (e.g. park benches, etc.)
- Children and youth living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations
- Migratory children and youth living in any of the above situations



Figure 5. K-12 Student Homeless Population, Spokane County



Source: OSPI, CEDARS Data Base

Figure 6. 2014 Spokane County Homelessness by Type (Grades K-12)

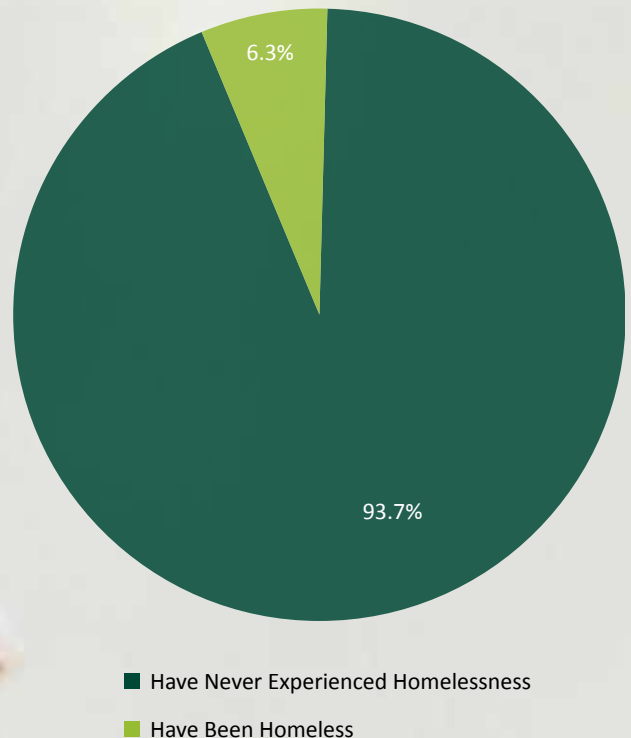


Source: OSPI, CEDARS Data Base, 2014

Spokane County Adult Population Who Have Experienced Homelessness

Data from the Behavioral Risk Factor Surveillance System (BRFSS) provides another perspective on homelessness. BRFSS is a national system of telephone surveys that collect health-related data at the state and local levels. It is a widely-used, reliable source for examining Americans' health-related risk factors, chronic health conditions and use of preventive services. Survey results show that in 2011 (the most-recent year homelessness was addressed in BRFSS), 6.3% of adults had been homeless at a minimum of once in their adult life—either living on the streets or in a shelter. This suggests that homelessness affects a larger percentage of the population than what is estimated at a given time. It also indicates that an even larger number of individuals remain vulnerable to repeated experiences of homelessness or poverty and are at potential risk for associated negative health outcomes. Applying this statistic locally shows that approximately 23,285 adults in Spokane County were impacted by homelessness at least once during their adult life.

Figure 7. Percent of Population Having Experienced Homelessness During Adulthood, WA State, 2011



Source: BRFSS, 2011

Who Are Spokane's Homeless?

The following demographic information reflects the characteristics of the applicants of the Homeless Management Information System (HMIS). The HMIS is used by state and federally-funded service providers to collect data about the use of housing assistance and services by people who are homeless or at risk of homelessness. Programs and services in the HMIS include:

- Emergency shelter
- Transitional housing
- Homeless prevention/rapid re-housing
- Permanent supportive housing
- Other supportive services

The following information represents the most recent enrollment into projects in the HMIS system in 2014. Each time an individual or family enrolls in a project that is

tracked through the HMIS system they were entered into the HMIS database. The following information reflects only the most recent enrollment entry. If there were multiple entries were in the system for one person in 2014, only the most recent entry was used for this report. However, it is possible that individuals are represented multiple times if they chose to remain anonymous and were entered multiple times anonymously, or under their name and anonymously on a separate occasion.

Table 4 displays the demographics for the individuals and families who applied for services, catalogued by the HMIS system in 2014.

Living arrangements prior to being eligible for services were also recorded in the HMIS system. Prior residences, presented in Figure 8 (pg. 16), included places not meant for habitation (23.3%), emergency shelters (19.3%) and doubled-up (18.3%).

Table 4. Demographics of Individuals and Families in the HMIS System

Single adults (without children) total number: 3,433 Age Range 18-97 years old (average age 43 year)		Adult heads of households with children (heads of family households) total number: 1,018 Age Range 18-73 years old (average age 34 year)	
Race and Ethnicity	White: 79.0% Black: 7.9% Native American and Alaskan Native: 7.2% Asian or Pacific Islander: 1.4% Hispanic: 5.8% 2 or more races: 4.0%	Race and Ethnicity	White: 73.1% Black: 5.5% Native American and Alaskan Native: 4.8% Asian or Pacific Islander: 2.4% Hispanic: 7.4% 2 or more races: 5.2%
Gender	Male: 63.4% Female: 36.5% Transgender: 0.1%	Gender	Male: 17.1% Female: 81.4% Transgender: 0.0%
Veteran Status	Yes: 15.3% No: 79.5%	Veteran Status	Yes: 6.6% No: 90.2%
Disability Status	Yes: 59.3% No: 36.8%	Disability Status	Yes: 37.9% No: 59.9%
Children heads of households with children (individuals or child-only families without adults) total number: 74 Age Range 13-18 years old (average age 16 year)			
Race and Ethnicity	White: 62.2% Black: 2.7% Native American and Alaskan Native: 17.6% Asian or Pacific Islander: 1.4% Hispanic: 14.9% 2 or more races: 8.1%	Gender	Male: 44.6% Female: 44.6% Transgender: 2.8%

Ages were calculated based on the date the report was run on October 2015. The ages at the time of enrollment are over-estimated by 9-21 months. Percentages for non-response are not include in the table above, but account for the remaining percentages for gender, veteran status and disability status.

Figure 8. Residence Prior to Enrolling in HMIS-Related Services, City of Spokane



Source: City of Spokane HMIS System

Other demographics about Spokane County's homeless population can be found by examining the Spokane County Healthy Youth Survey (HYS) data. Students are asked questions about their behaviors, health and family. This data shows that 23.6% of homeless youth had mothers who did not finish high school, compared to 7.1% for those who were housed. Similarly, 20.7% of homeless youth had fathers who did not finish high school compared to 8.7% for their housed peers. This suggests that parents who did not graduate high school are at risk of becoming homeless, as are their children. This is most likely due to

the well-documented relationship between education and experiences of poverty.

Additional information gathered about homeless youth shows that their parents were more likely than their housed peers to be veterans and to have served in a warzone. The large percentage of homeless youth with veteran parents demonstrates there may be more of a homeless veteran population in need of services than is currently being captured through the PIT count. Veteran parents of homeless youth are therefore a population in need of further intervention and services.



Figure 9. 8th, 10th, 12th Grade Homeless Parent Education, Spokane County, 2014

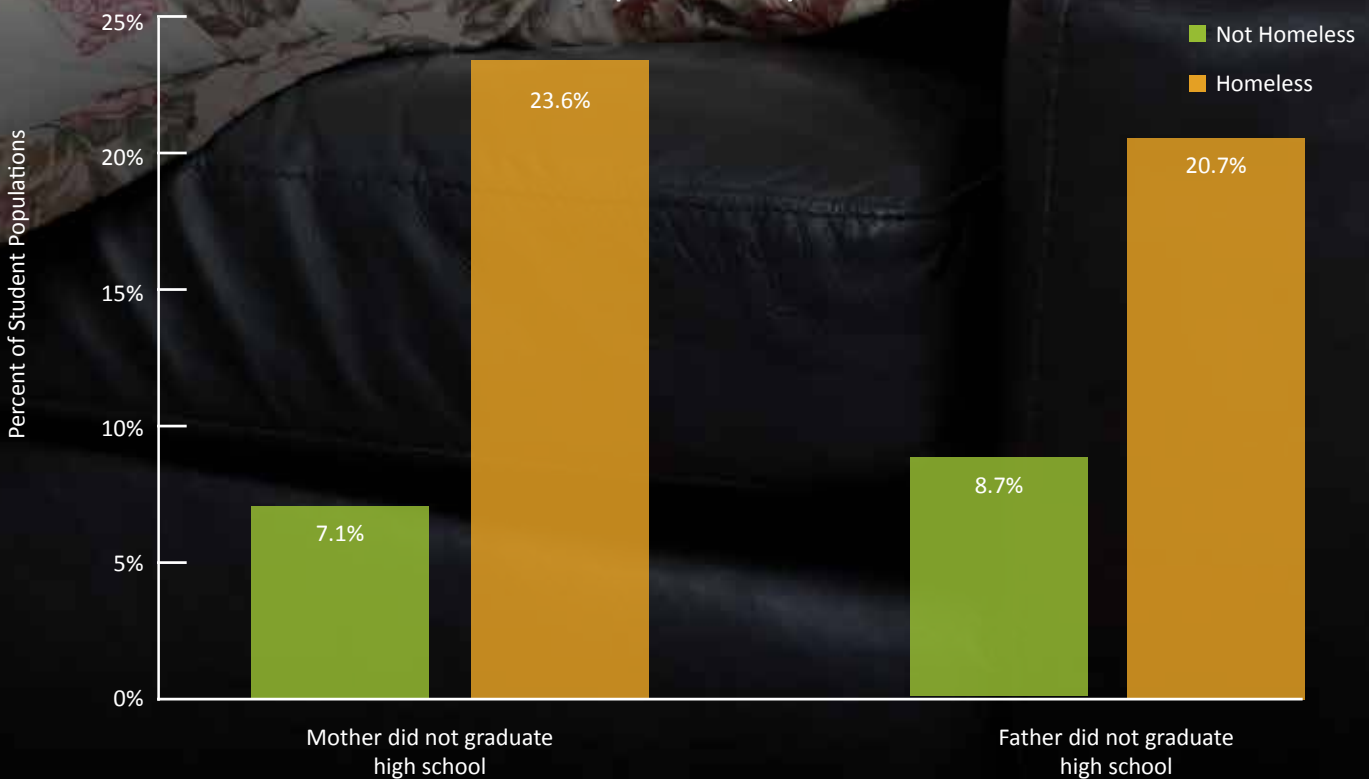
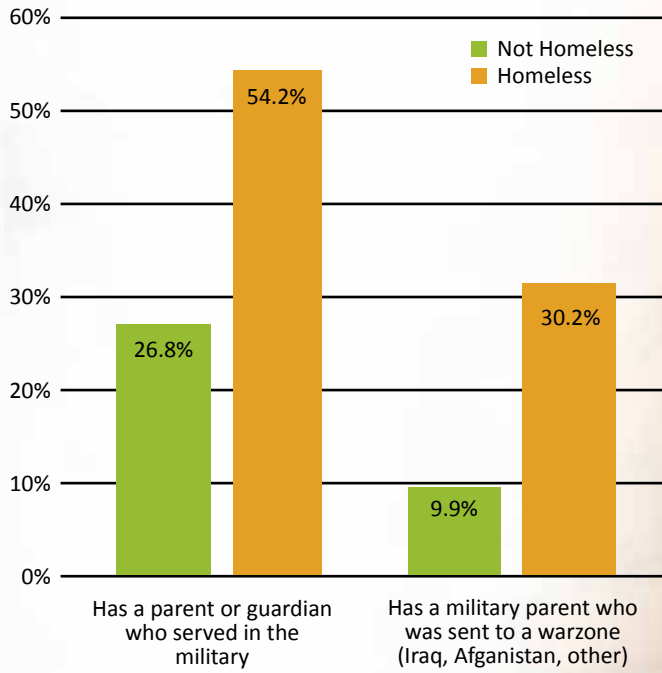


Figure 10. 8th, 10th, 12th Grade Homeless Youth with Veteran Parents, Spokane County



Source: Healthy Youth Survey, 2014

Another important characteristic of the student homeless population is the ages or grades of the homeless children. While percentages varied slightly each year, roughly half the distribution was in elementary school and the other half were in 6th through 12th grades. This data brings important clarity to the misperception that homeless youth are primarily high school students who are couch surfing.

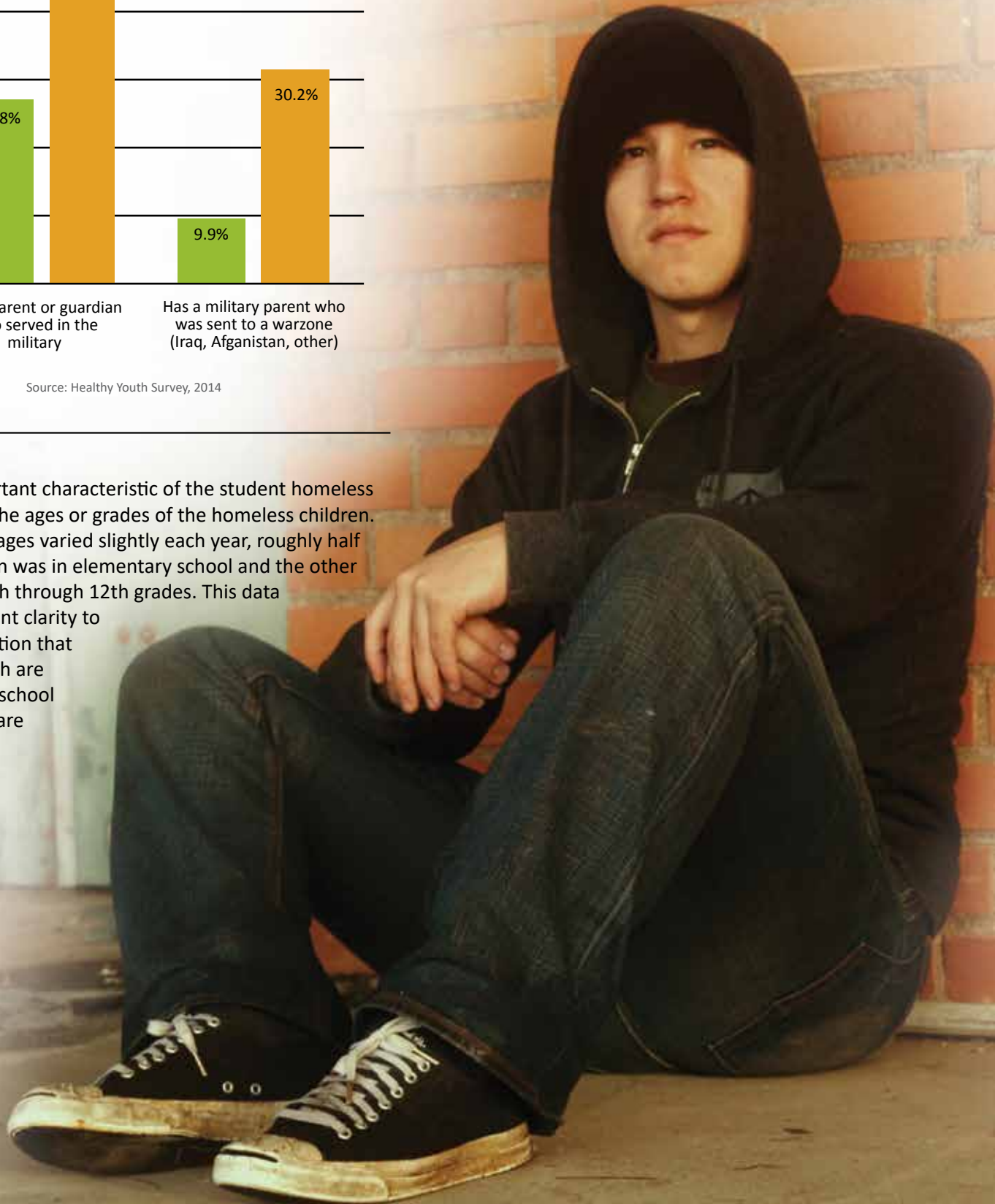
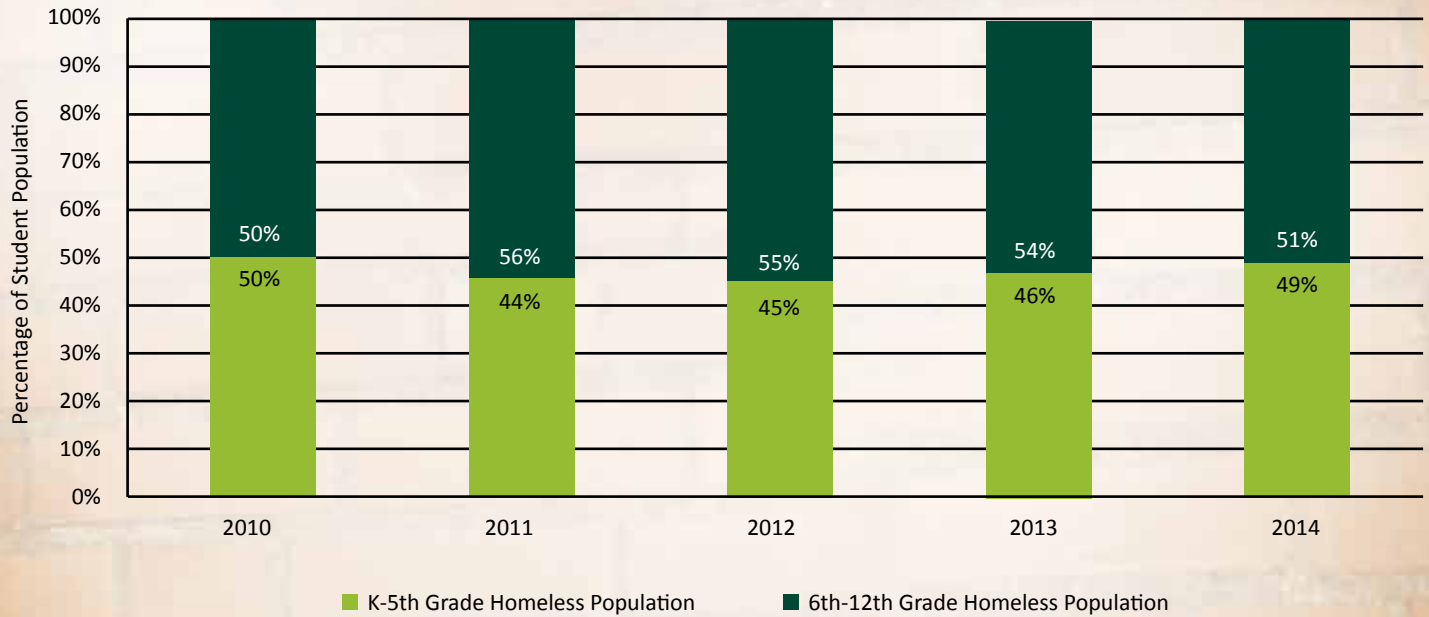


Figure 11. Distribution of Homeless Population K-12th Grade, Spokane County



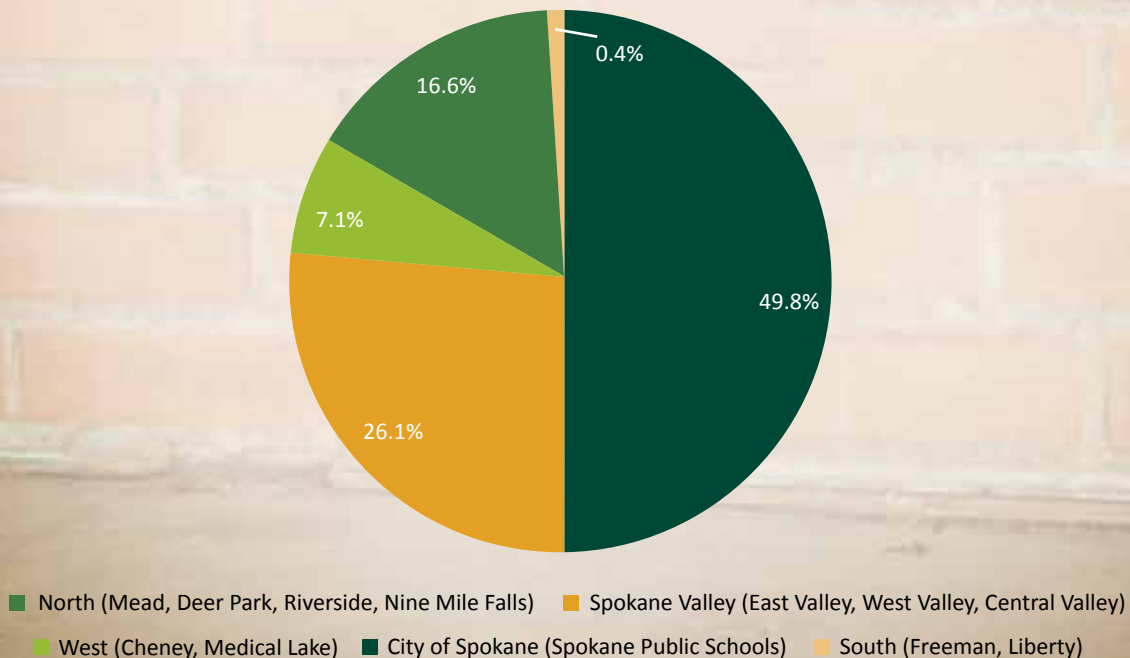
Source: OSPI, CEDARS Data Base, 2014

Where Are Spokane’s Homeless?

Spokane County’s homeless populations are scattered across the county with no region unaffected. While each region of the county experiences homelessness, one way to look at the distribution of homelessness is by the percentage of homeless students who attend schools in each region. From this perspective, a majority (49.8%) of

homeless students attend Spokane Public Schools, in the city of Spokane. This is followed by 26.1% attending Spokane Valley school districts (East Valley, West Valley, Central Valley), 16.6% attending northern districts (Mead, Deer Park, Nine Mile Falls and Riverside), 7.1% from the western districts of Cheney and Medical Lake, and finally 0.4% from the southern districts (Freeman and Liberty).

Figure 12. Percentage of Total Spokane County Homeless Population

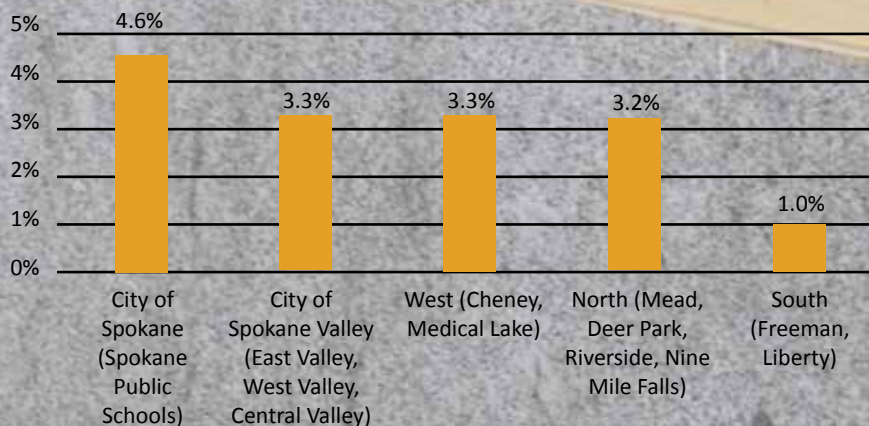


Source: OSPI, CEDARS Data Base, 2014

The distribution of homelessness across the county is helpful in determining where homeless students are located regionally with a vast majority residing in the city of Spokane. However, it fails to account for the size of the district and the proportion of students within the district who are homeless. From this perspective, Spokane Public Schools has a slightly larger rate of homelessness at 4.6%

of their student population, while Spokane Valley, the western region (Cheney and Medical Lake), and the northern region (Mead, Deer Park, Riverside and Nine Mile Falls) have a rate of 3.3% of the student population experiencing homelessness. The southern region (Liberty and Freeman districts) have a much smaller rate of homelessness at 1.0% of its student population.

**Figure 13. Distribution of Homeless Population K-12th Grade
Spokane County, 2014**



Source: OSPI, CEDARS Data Base, 2014



Root of Homelessness: Poverty and Other Risk Factors

The causes of homelessness are complex and often interrelated.

Factors associated with homelessness include⁴:

- Lack of, or difficulties accessing, social supports and services
- Personal catastrophic events
- Domestic violence
- Drug and alcohol use
- Debilitating illness
- Discrimination
- Racism

Though individual circumstances and characteristics may contribute, research consistently points to two key factors as roots of homelessness: **poverty** and lack of **affordable housing**^{4,5}. Spokane County's PIT count provides similar information about why county residents become homeless. Of the 772 homeless households in Spokane County in 2015, 400 of them identified lack of income or loss of job and 142 identified lack of affordable housing as the primary reason they became homeless—the top two reasons for becoming homeless, consistent with the literature.

Figure 14. Point-in-Time Reasons for Homelessness, 2015



Source: Spokane Regional Point-in-Time Count, 2015

Another group of individuals at risk for becoming homeless, and thus susceptible to related negative health and behavioral outcomes, are those who suffer from severe mental illness. According to BRFSS 2013, 5% of Spokane County’s population suffers from severe mental illness, resulting in an estimated 23,970 individuals at greater risk for becoming homeless. According to PIT data in 2015, 25% of homeless individuals in the county experienced severe mental illness, an increase since 2009. Officials from the City of Spokane attribute mentally ill persons being put in jeopardy to the closing of mental health hospitals across the nation in the 1990s. They also state that community supports for those who suffer from severe mental illness are inadequate and unsuccessful in ensuring the stability of the population⁶. One major issue for those experiencing severe mental illness is lack of affordable housing, as many mentally ill individuals are only able to live off of federal Supplemental Security Income (SSI). Affordable rent for persons on SSI is considered \$216 per month, well below the Fair Market Rent rate as determined by HUD’s Office of Policy Development and Research. Fair market rates vary throughout the country based on a number of determining factors, such as local economic conditions and housing demand, but on average, for a one bedroom apartment, the rate in Spokane County is set at \$788 per month—a huge discrepancy and financial burden for those on a fixed income. More information about the affordability of housing can be found in the housing section of this report.

Survivors of domestic violence are also at greater risk for homelessness. National Alliance to End Homelessness attributes domestic violence as being the immediate cause of homelessness for many women. Domestic violence

survivors are often financially dependent on their abusers, placing them at risk for homelessness if they leave their abuser, since they often lack steady income, employment, and/or credit history. They may also suffer from resulting mental health problems that put them at even greater risk including anxiety, panic disorder, depression, and are more prone to substance abuse⁸. In 2012, there were 3,548 victims of domestic violence among Spokane County residents; a rate of 7.5 per 1,000 people. The 2015 PIT count found that approximately 1 out of every 5 homeless people reported experiences of domestic violence.

Additional information about the homeless population and experiences of domestic violence can be obtained from BRFSS (2011) data. While domestic violence may not be caused by homelessness or be the root cause of homelessness, levels of domestic violence experienced by homeless individuals, especially women, are disproportionately high. Nearly half of those who were homeless during their adult life were physically hurt by a partner and received injuries from an intimate partner as a result of physical violence.

Another potential cause of homelessness is chronic substance use. Again, while not all substance users are homeless and not all homeless are substance users, substance users are at increased risk of homelessness and substance use is disproportionately higher among homeless populations⁹. Eighteen percent of households identified in the PIT count experienced chronic substance use compared to just 5.8% of the entire population of Spokane County who self-report as heavy alcohol users and 1.7% who report that they were illicit narcotic users.

Figure 15. Point-in-Time Count, Mental Illness

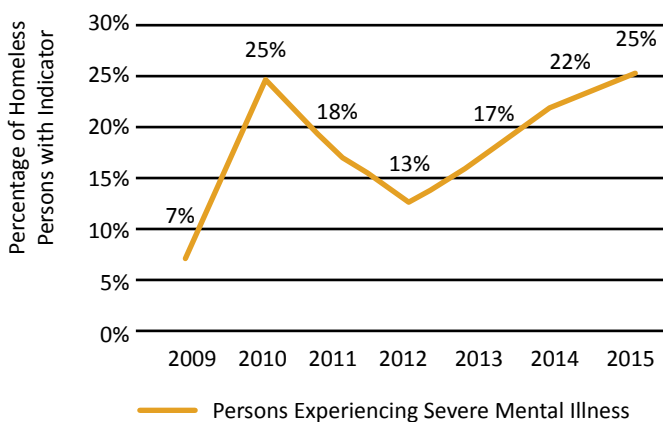
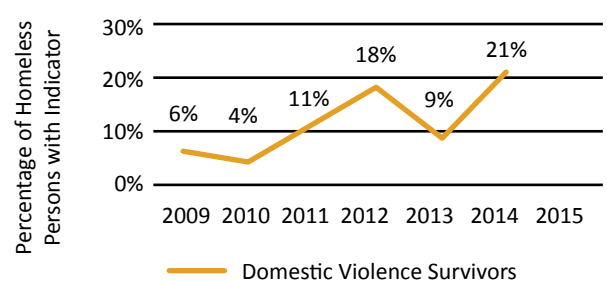
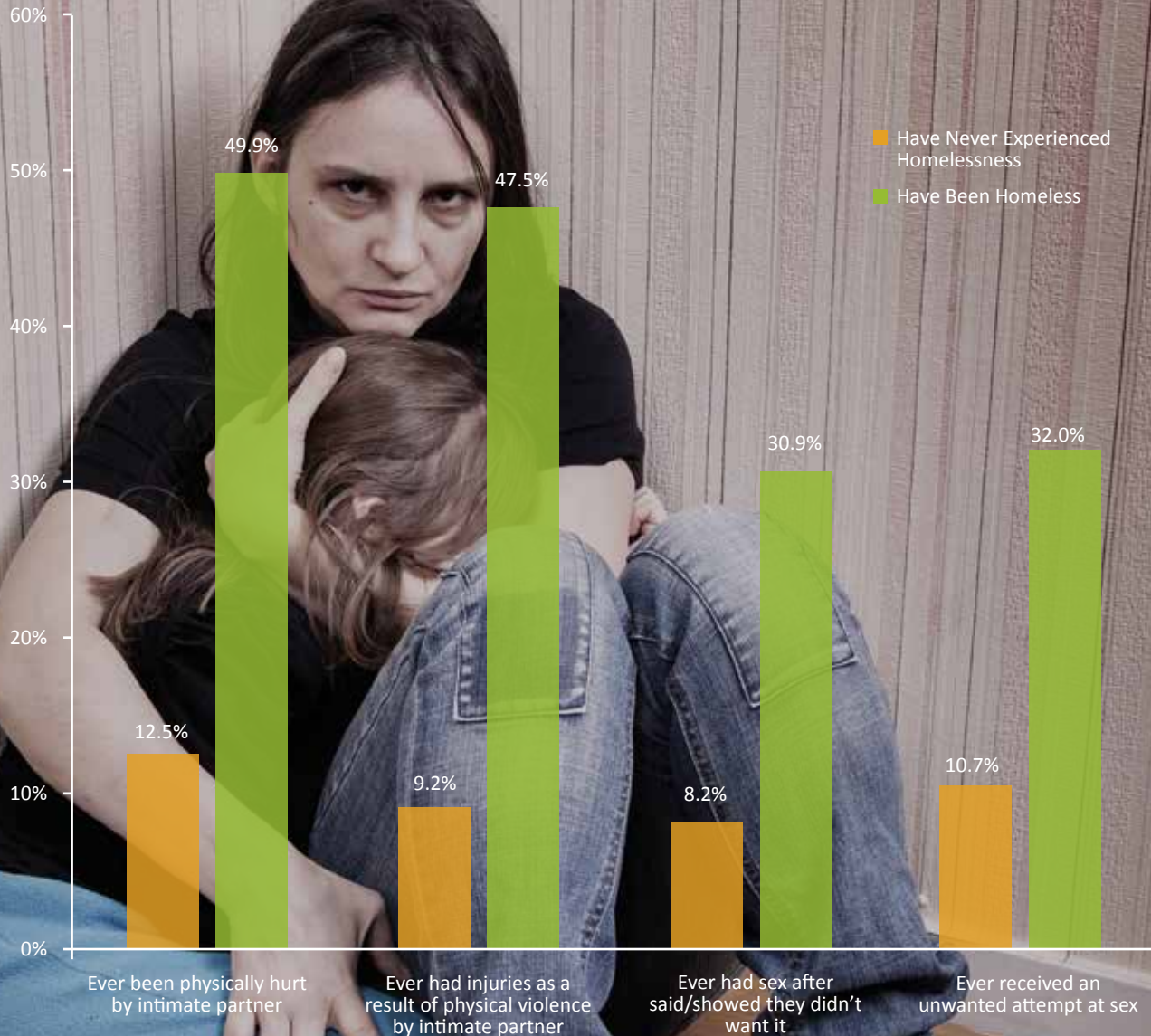


Figure 16. Point-in-Time Count, Domestic Violence



Source: Spokane Regional Point-in-Time Count, 2015

Figure 17. Experiences of Domestic and Sexual Violence and Homelessness
WA State, 2011



Source: BRFSS, 2011

Summary

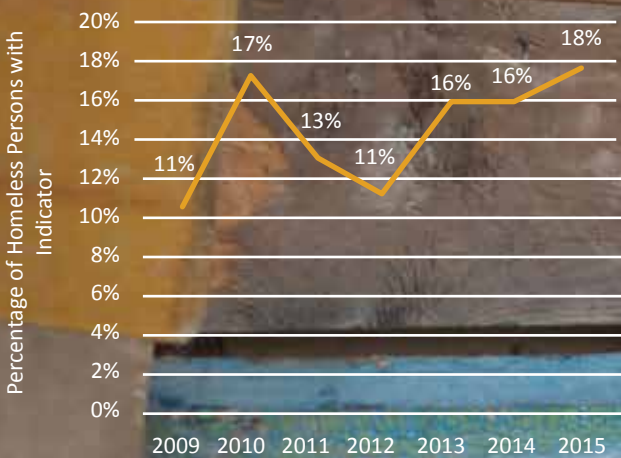
In sum, the data clearly shows there are multiple factors contributing to homelessness and it shows that disparities among the homeless population are indicators of larger social inequalities.

“In most cases, to be homeless in America is not a sign of laziness or incapacity, but an indicator of people who

struggle immensely, both physically and emotionally, to survive against the odds.”⁹

To have broader, long-term impact, agencies must help individuals while also addressing the upstream societal problems at the foundation of the homelessness problem; poverty and lack of affordable housing.

Figure 18. Point-in-Time Count: Homeless Persons with Chronic Substance Abuse



Source: Spokane Regional Point-in-Time Count, 2015

Homelessness and poverty are inextricably linked. People who are poor are frequently unable to pay for necessities such as housing, food, child care, health care and education. Being poor can mean a person is one illness, one accident, or one paycheck away from living on the streets.

- Homelessness Resource Center SAMHSA.GOV -

Poverty in Spokane County

Poverty is often considered a root cause of homelessness.

In 2013, approximately 1 in 6 individuals (17.1%) in the county lived below 100% Federal Poverty Level (FPL) and 36.6% lived below 200% FPL. The proportion of Spokane County residents living in poverty (below 200% FPL) was significantly higher than the statewide proportion (31.1%). Table 5 provides the percentage of the population living at various poverty levels. Table 6 provides additional information about the maximum income level for various household sizes to be classified at different FPLs.

Table 5. Population Living At or Below Various Federal Poverty Levels (FPL), 2013

Poverty Level	% County	% WA State
50% FPL	8.3% (38,289)	6.4%
100% FPL	17.1% (81,977)	18.3%
125% FPL	22.9% (109,782)	22.7%
185% FPL	34.3% (164,433)	28.6%
200% FPL	36.6% (175,459)	31.1%
300% FPL	55.1% (264,148)	47.3%

Source: U.S. Census Bureau, American Community Survey, 2013. Table B17002. Population Estimates based on 2013 US Census population of Spokane County: 479,398.

Table 6. Federal Poverty Levels (FPL) by Household Size

Household Size	50%	100%	125%	185%	200%	300%
1 person	\$5,885	\$11,770	\$14,713	\$21,775	\$23,540	\$35,310
2 people	\$7,965	\$15,930	\$19,913	\$29,471	\$31,860	\$47,790
3 people	\$10,045	\$20,090	\$25,113	\$37,167	\$40,180	\$60,270
4 people	\$12,125	\$24,250	\$30,313	\$44,863	\$48,500	\$72,750
5 people	\$14,205	\$28,410	\$35,513	\$52,559	\$56,820	\$85,230
6 people	\$16,285	\$32,570	\$40,713	\$60,255	\$65,140	\$97,710
7 people	\$18,365	\$36,730	\$45,913	\$67,951	\$73,460	\$110,190
8 people	\$20,445	\$40,890	\$51,113	\$75,647	\$81,780	\$122,670

Table 7. Individuals Living at or Below 100% FPL by Age Group, 2013

Poverty Level	% Spokane County	Confidence Interval	% WA State
<18 Years	20.0%	(16.7-23.3)	18.8%
18-64 Years	18.5%	(17.0-20.0)	13.8%
65+ Years	6.8%	(5.2-8.4)	8.1%

Source: U.S. Census Bureau, American Community Survey, 2013. Table S1701.

Table 8. Individuals within Race and Hispanic Ethnicity Categories Living at or Below 100% FPL, 2009-2013

Poverty Level	% Spokane County	Confidence Interval	% WA State
Total all races	15.4%	(14.9-15.9)	13.2%
White	14.0%	(13.5-14.5)	11.6%
Black	35.3%	(27.5-43.1)	25.0%
AI/AN	28.6%	(21.9-35.3)	26.4%
Asian	20.5%	(15.4-25.6)	12.1%
NH/OPI	38.0%	(19.6-56.4)	16.5%
Some other race	32.9%	(25.0-40.8)	31.4%
Hispanic ethnicity	26.3%	(22.7-29.9)	27.1%

AI/AN=American Indian/Alaska Native. NH/OPI=Native Hawaiian/Other Pacific Islander
Source: U.S. Census Bureau, American Community Survey, 2009-2013. Table S1701

Table 9. Families with Children Living at or Below 100% FPL, 2013

Poverty Level	% Spokane County	Confidence Interval	% WA State
All Families	18.4%	(15.4-21.4)	15.5%
Married Couple Families	9.3%	(6.6-12.0)	7.3%
Single Mothers	40.0%	(32.5-47.5)	39.4%

Source: U.S. Census Bureau, American Community Survey, 2013. Table S1702.

The population living in poverty at or below 100% FPL is broken down in Table 7 by age group and Table 8 by race and ethnicity. The types of family households with children who are living at or below 100% poverty are also broken down in Table 9. This table shows that 40% of single mothers in Spokane County are living at or below 100% of the poverty level, placing them at risk for homelessness.

Cost of Basic Needs in Spokane County

In order to fully comprehend the impact of the high levels of poverty in Spokane County, it is essential to understand the cost of housing and the cost of basic needs for its individuals and families. The following breakdown of the cost of basic needs is based on a family of four consisting of two parents between 20 to 50 years of age and two children, one 4-5 years of age, and one 6-8 years of age. The total basic needs costs equated to 180% FPL for a household of four in 2013—meaning that for a family of four to make ends meet (enough to cover the cost of their basic needs), they must make \$43,650 per year. Approximately 1 in 3 Spokane County households do not have enough income to meet the cost of their basic needs.

Cost-Per-Month for Basic Needs for a Family of Four, Spokane County, 2014

Food	\$870
Housing	\$702
Utilities	\$153
Transportation	\$262
Child Care	\$1,088
Health Care	\$212
Personal and Household Expenses	\$330
Total	\$3,617

When family and individual finances are stretched too thin and individuals cannot meet the cost-per-month to cover these basic needs, not only can individuals face homelessness, they can also experience stress from not being able to pay bills or face possible eviction or foreclosure. Again, these stressors must be considered as agencies develop interventions.

More detail about this methodology can be found in Appendix A. Additional information about the availability of affordable housing is also available in the housing section of this report.

Another data source, Spokane Regional Health District's (SRHD) Quality of Life survey, recently polled Spokane County's population about their experiences and asked them to reflect and report on their financial situations. As the survey was randomized by household address, it did not reach homeless residents, but important information was gleaned about residents' perceptions of financial stress. Thirty-four percent of residents reported their financial situation as "fair" or "poor," while 18% rated their financial situation "much worse" or "somewhat worse" than it was 12 months ago. Additionally, 14% have trouble paying bills every month and another 15% have trouble paying their bills a few times a year. Residents' perceptions of their financial situations and the thought that their finances are declining and considered "fair" or "poor" directly reflects how residents feel about their ability to meet their financial needs.

Cost of Basic Needs for Households on Fixed Incomes

An additional population struggling to afford the rising cost of basic needs, relative to income, is individuals on fixed incomes, including the elderly and disabled. Wider Opportunities for Women's Elder Economic Security Initiative™ provides a conceptual model and tools to estimate the cost of basic needs for the elderly. Their publication specific to Washington state, the 2014 Elder Economic Security Standard™ Index for Washington, takes into account elderly living alone or as couples, as well as owning a home, renting or having other assisted living costs. For the full cost of basic needs tables for Spokane County, see Appendix A.

As with basic needs costs for a family, these costs for an elder individual or couple are also rising drastically—20% and 24% per year for the past three years respectively. While SSI rates are also increasing at a rate of 7% per year, it is difficult to survive on the average social security payment of \$733¹⁰ per month. Since SSI is the only source of income for roughly 1 out of 5 retired individuals in Washington state, this poses a major economic issue and increases the need to support basic cost of needs including placing an importance on affordable housing for the elderly population and those on fixed incomes.

Hear My Story: Spokane Single Father

I am a father of three children ages 4, 9 and 11. I have had the children on my own for more than seven years. I am unable to maintain employment at this time for a number of reasons. One reason is the need for me to be available 24/7 throughout a six-week medical treatment process for my son and various doctor appointments. Because of this, over the last two months, I lost my job and subsequently, my home. We are "couch surfing" at the moment.

I get up at 5:30 a.m. each day to get all three children showered, dressed and ready for school. My 4-year-old daughter is enrolled in a Head Start program. She is only able to attend part-time because state assistance won't allow full-time without employment. My 9-year-old daughter and 11-year-old son are both enrolled full-time in a public school. I drive them more than 15 miles into town so that they can attend the schools in which they have been enrolled for the past few years. Recently, we had to live in vehicles, use gas station bathrooms and take shelter in hospital waiting rooms for the night. I try to keep the kids' lives as normal as possible during this difficult time. There seems to be an incredible amount of help, housing and other assistance for women with children. As a man and a father, I am not looking for handouts or avenues that lead to freeloading. I pride myself on being able to hold my own and raise my children in an environment where they are shown life morals and learn to have faith in themselves, in their goals, in each other and in their community. I am looking for help, just a foot in the right direction. I can't get child care or a house without a job, but I also can't find a job without having child care and a house to provide shelter for my kids while I'm at work. There are so many variables to these kinds of situations that no one person's struggle is ever the same as another's. After calling numerous agencies, every number I called led me back to "emergency housing" and a three to five month waiting list, while I personally have to focus on the next three to five days.

**Cost-Per-Month for Basic Needs for an Elder Person
(age 65+), Spokane County, 2014**

**Cost-Per-Month for Basic Needs for an Elder Couple
(both age 65+), Spokane County, 2014**

	Homeowner w/o Mortgage	Renter, One Bedroom	Owner w/ Mortgage
Food	\$252	\$252	\$252
Housing <i>(inc. utilities, taxes & insurance)</i>	\$404	\$585	\$1,157
Transportation	\$265	\$265	\$265
Health care	\$414	\$414	\$414
Miscellaneous	\$267	\$267	\$267
Total	\$1,602	\$1,783	\$2,355

	Homeowner w/o Mortgage	Renter, One Bedroom	Owner w/ Mortgage
Food	\$463	\$463	\$463
Housing <i>(inc. utilities, taxes & insurance)</i>	\$404	\$585	\$1,157
Transportation	\$410	\$410	\$410
Health care	\$828	\$828	\$828
Miscellaneous	\$421	\$421	\$421
Total	\$2,526	\$2,707	\$3,279



Summary

The cost of basic needs is too high for about 1 in 3 Spokane County residents who live in poverty (those at 180% FPL or under, as determined by the cost of basic needs calculation). For residents on a fixed income, or solely living on SSI (equating to less than 100% FPL), their ability to meet the cost of basic needs is even more dire. The high cost of basic needs in Spokane County has a direct relationship to poverty and hardship experienced by residents. There are an extensive number of agencies (government and private) who work to assist households in meeting basic costs of living, some of which are reviewed in the services section of this report. While preventive efforts provide temporary relief to residents—sometimes preventing them from becoming homeless—the underlying issues of poverty and the high cost of basic needs must be addressed at a societal level to have a broader impact on preventing homelessness.

Lack of Affordable Housing in Spokane

Lack of adequate and affordable housing is a significant problem throughout many communities across the United States, especially for low-income families and individuals, and is considered a root cause of homelessness. Since the early 1980s, federal housing authorities suggested that

30% of a household’s income is the threshold under which housing is considered “affordable.” This 30%-of-income standard says that non-housing needs, i.e. costs for basic necessities such as clothing, food and other non-housing monthly bills not including rent, mortgage, property taxes, and the like, can be met with 70% of a household’s annual income. It also suggests that when housing costs are at or less than 30% of a household’s income, the household’s ability to save for future needs or emergencies becomes easier. When costs become larger than 30%, however, saving is significantly harder and meeting basic needs with the left-over income becomes more difficult.

In 2013 in Spokane County, 54% of renters were spending equal to or more than 30% of their household income on their rental, compared to 49.1% and 48.5% of renters in the state of Washington and across the United States respectively. Examining trends since the year 2000, the availability of affordable housing has decreased. Compared with Washington state and U.S. benchmarks, Spokane County had a greater percentage of the population paying more for their housing—potentially putting nearly half of Spokane County’s renter population at risk for becoming homeless or experiencing financial hardship.

During 2013, the share of renters who were paying 30% or more of their household income for rent in:

Spokane County was 54.0%, *increasing* from 51.4% in 2000.
 Washington state was 50.9%, *increasing* from 43.3% in 2000.
 The U.S. was 51.5%, *increasing* from 41.3% in 2000.

Data Source: U.S. Census, ACS Table: GCT2515

Severe Housing Problems

High housing costs are considered to be one part of a severe housing problem throughout the country. Severe housing problems are defined as experiencing at least one of four issues¹¹:

- Overcrowding
- High housing costs
- Lack of kitchen
- Lack of plumbing facilities

Many residents experience severe housing problems based on limited availability and affordability of housing. In Spokane County, 16% of households had at least 1 of these 4 severe housing problems, faring slightly better than Washington state at 18%. Housing quality will not be addressed in this assessment, although the City of Spokane assists with single-family rehabilitation (approximately \$1.5 million in 2015) and multifamily rental rehabilitation and construction (approximately \$800,000 in 2015).

There are also a number of agencies and policies that aim to support local housing needs.

Public Housing Authority (PHA), are independent entities that offer three main rental housing assistance programs: public housing, Housing Choice Vouchers and project-based vouchers/multifamily housing. Specific eligibility requirements vary by program or PHA, but HUD requires that PHAs serve the lowest-income households in their jurisdictions and ensure that households spend no more than 40% of their income in rent. With some exceptions, PHA assistance is permanent as long as recipients remain low-income and comply with program rules. See Appendix B for more information about PHAs.

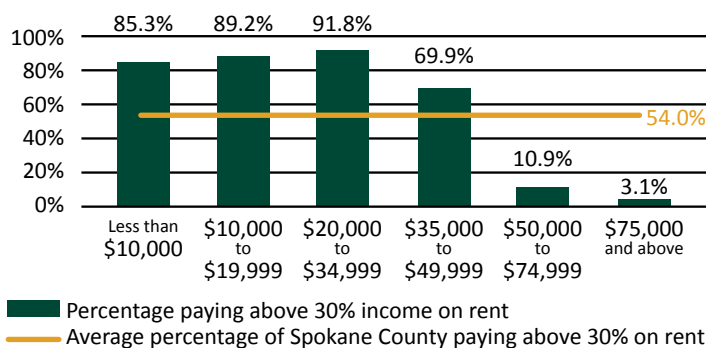
The local PHA, Spokane Housing Authority (SHA), was created in 1972 by the City of Spokane to serve Spokane, Lincoln, Pend Orielle, Stevens, Ferry and Whitman counties. SHA annually provides housing assistance to

over 5,000 low-income households through a combination of tenant-based rental assistance, SHA-owned apartment communities and scattered-site housing. They use a variety of local, state and federal investment and lending strategies, with an annual budget of \$27 million.

Congress created the federal Low-Income Housing Tax Credit (LIHTC) program to encourage the development of multi-family rental housing that is affordable for low- and moderate-income households. Developers receive tax credits in exchange for providing housing to households with incomes up to 60% of the median for their jurisdiction. Properties are privately-owned and managed and landlords screen and select tenants. In some cases, individual tenants or housing providers may use assistance from PHAs or from others to rent LIHTC units.

Spokane Low Income Housing Consortium (SLIHC) is another organization that actively works toward affordable housing in Spokane County. There are a number of others who are working on the issue of affordable housing, see Appendix D.

Figure 19. Percentage of Renters Paying More than 30% on Rent by Income, Spokane County, 2013



Source: U.S. Census, ACS Table: C25074, 2013)

Rental Problems

Housing issues specifically relating to the rental market in Spokane County that impact homeless individuals and families include landlord-imposed restrictions, high turnover and vacancies. The 2014 American Community Survey (ACS) by the U.S. Census Bureau found that the rental vacancy rate in Spokane County was 5.5% for all types of rentals. Further exploration reveals that for low-income housing, the vacancy rate was 2.4%. Given the relatively low vacancy rate for low-income housing, the cost of higher-priced rentals could be contributing to the higher vacancy rates for these units. Theoretically, this problem could be addressed by making some of these higher-priced rentals available for lower-income demographics. This would lower the vacancy rate of higher-priced rentals and address the community's need for adequate and affordable housing in all parts of Spokane County.

Establishing housing is challenging for low-income residents for many reasons—landlords often use pre-determined criteria to screen applicants making it difficult for many residents to establish housing¹². Landlords have relative freedom in selecting this criteria, as long as it does not violate the Fair Housing Act or discrimination laws. Common information used to screen potential tenants includes credit history, rental history, evictions, criminal records, employment, income, and social security information. Tenant screening poses problems for homeless individuals and those at risk of becoming homeless. Landlords often require a credit and background check, prior addresses, employment status, and income information as criteria for selecting tenants. These criteria directly impact those at risk of becoming homeless, especially those who are re-entering society from jail or incarceration and do not qualify for housing or jobs because of their criminal history. It also impacts those who are under financial stress because of a lost job—unable to verify employment status. When moving to find work, households struggle with affording application fees, deposits and other move-in costs and may not be able to afford them until starting employment, leaving them with limited options for establishing housing.

Landlords often screen individuals before accepting them as tenants primarily to protect their investment, trying to screen out tenants at risk for not paying their rent, committing crimes, or damaging their property. There are however, measures in place that protect landlords and encourage them to rent to those who may be considered “higher risk” tenants such as master leasing. Master leasing operates by allowing organizations, such as Volunteers of America (locally), to sign the lease and become the official lease holder, then subletting housing to clients. VOA pays the rent every month and charges the

clients up to 30% of their monthly income. In some circumstances if a client cannot pay, the rent is still paid in full and the organization would work out a payment plan with the client. Some landlords will waive the background check because the organization is the lease holder and responsible for making sure the apartment is ready for the next tenant to move in (with exceptions that are still required by landlord tenant laws). The organization or lease holder is also responsible for damages that happen due to the occupancy, protecting the landlords.

Summary

An important step in addressing homelessness in Spokane County is to increase the availability of adequate and affordable housing. The cost of housing in Spokane County has a direct contribution to the level of homelessness. With 1 in 3 persons spending more than 30% of their monthly income on housing many individuals are at-risk for becoming homeless because their finances are stretched too thin. While many agencies in Spokane County are addressing housing, there are often long waiting lists based on level of need, forcing individuals and families to wait for housing or double-up with families and friends, disqualifying them for many housing programs based upon their definition of being “homeless.” Funds for preventing homelessness by making housing more affordable are also scarce, for more information see the *Prevention Funding* section of this report.

Title VIII of the Civil Rights Act of 1968 (Fair Housing Act) prohibits discrimination in the sale, rental and financing of housing based on race, color, national origin, sex, familial status, religion, disability, or presence of children under the age of 18. The Act grants exemptions to owner-occupied buildings with four or fewer units, single-family housing sold or rented without the assistance of a broker and housing owned and operated by private organizations or clubs that restrict occupancy to members. Presidential Executive Order 11063 extends these protections by prohibiting discrimination in the sale, leasing, rental, or disposition of properties owned, operated or funded by the federal government.

Impact of Homelessness on Health and Well-Being

Homelessness is considered by some to be a public health crisis¹³. Homeless people are at greater risk for a number of poor health outcomes, including infectious diseases like tuberculosis¹⁴, chronic disease, poor mental health, and substance use¹⁵. Aside from health, homelessness impacts other aspects of quality of life—economic well-being, educational attainment, public safety—and must be addressed through the collaborative efforts of multiple stakeholders.

Health Impact

According to BRFSS 2011 data, Washington adults who experienced homelessness as an adult had significant differences in a number of health outcomes, including poor overall health, high blood pressure, high cholesterol, limitations due to joint symptoms, health problems requiring equipment and overall limited activity. While this information does not tell us that homelessness caused these differences in outcomes, it does show a relationship between experiencing homelessness and differences in outcomes as compared to their peers, suggesting some type of relationship. Adults who experienced homelessness had higher rates of each outcome as compared to those who did not. Specific to ability to see a healthcare provider, significant differences were also found between those who experienced homelessness and those who did not, due to cost and lack of healthcare coverage.

Adults who experienced homelessness were three times as likely to experience depression and had over 30 times the rate of serious mental illness.

Additionally, they were more likely to be heavy alcohol or tobacco users.

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Figure 20. Adult Health Outcomes and Homelessness, WA State, 2011

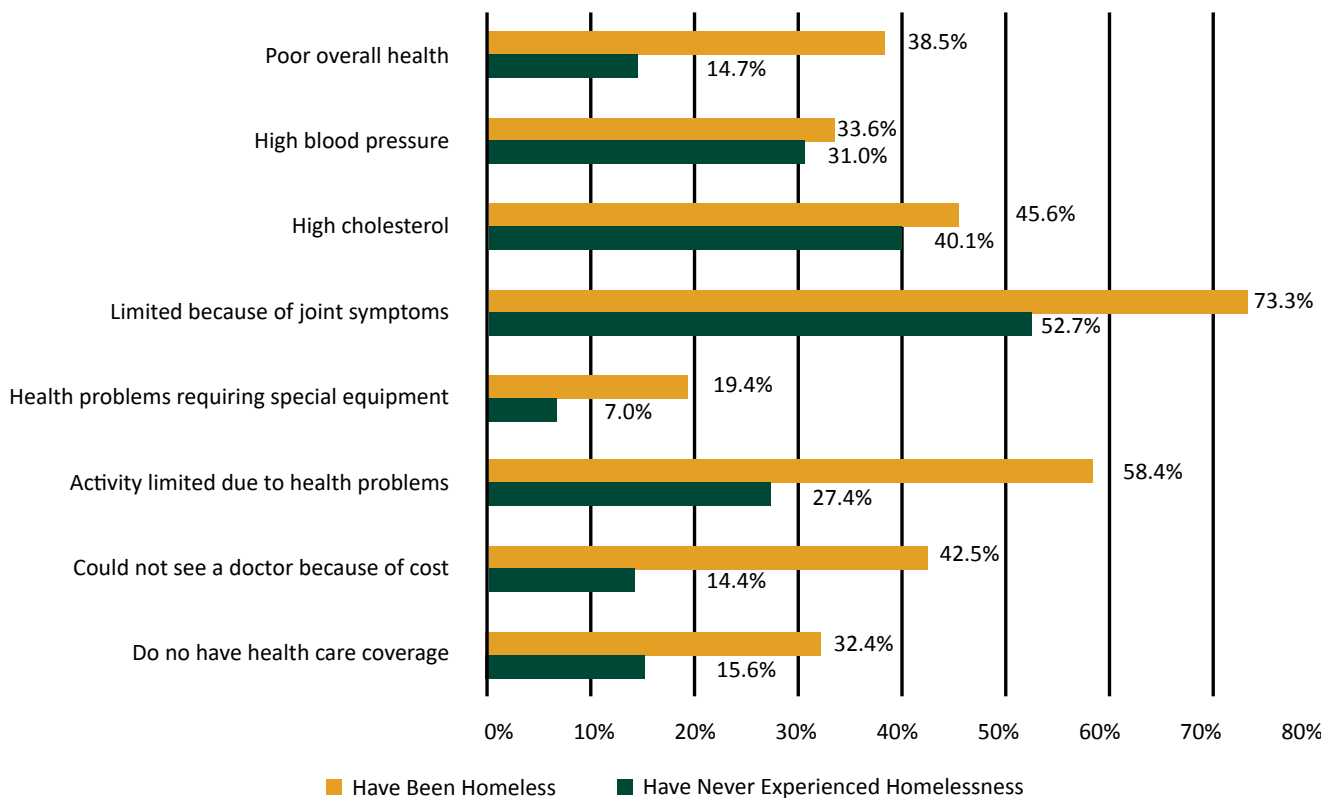


Figure 21. Adult Mental Health and Homelessness, WA State, 2011

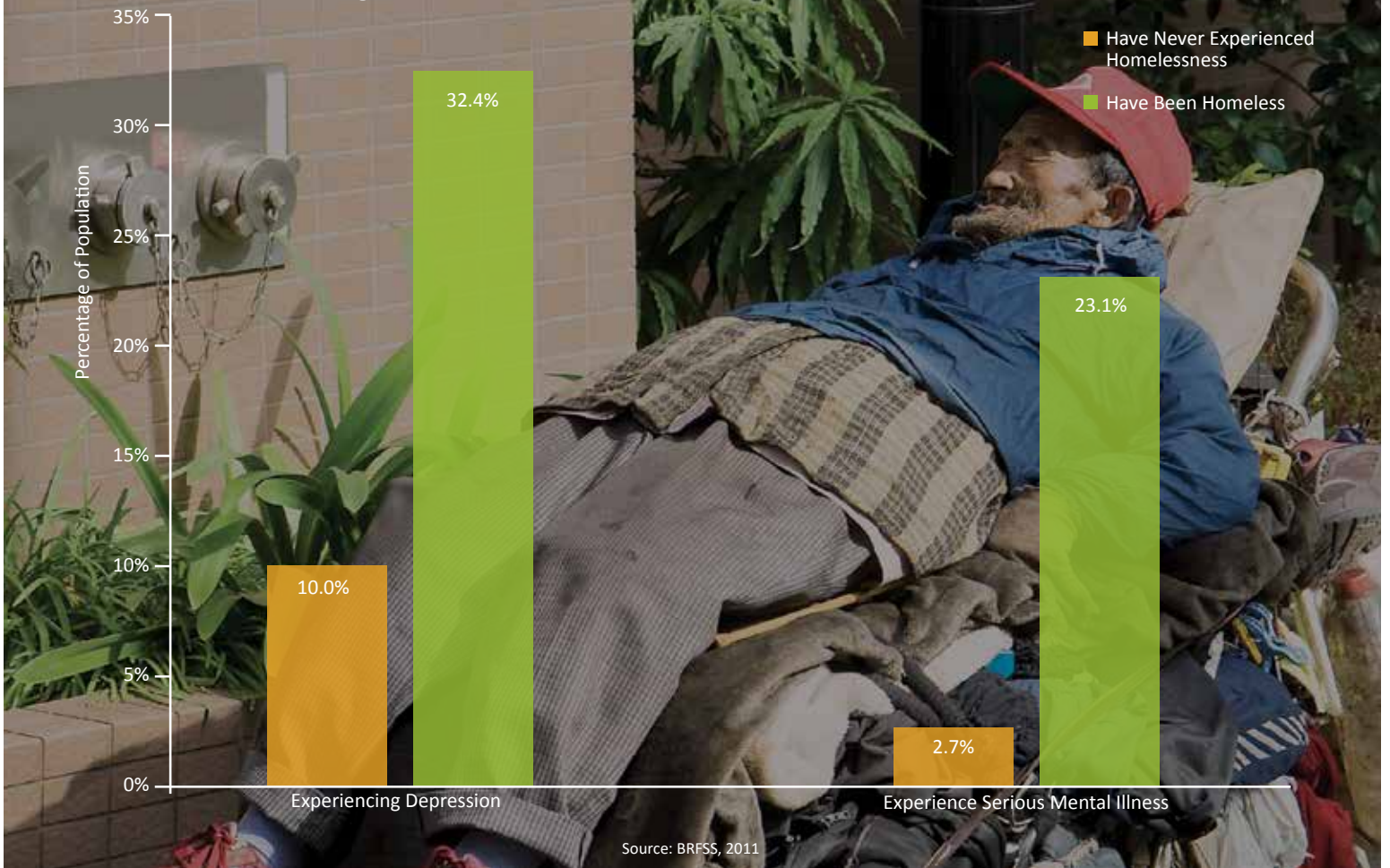
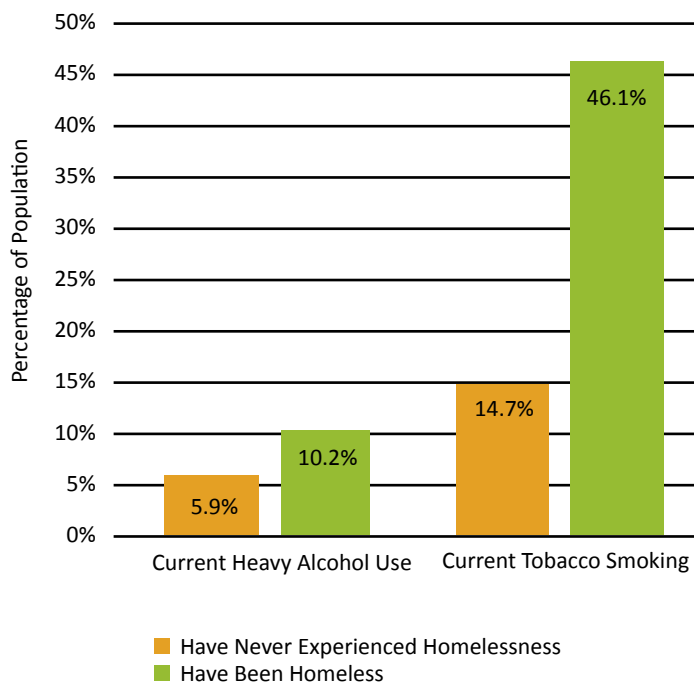


Figure 22. Adult Alcohol and Tobacco Use and Homelessness, WA State, 2011



Youth Health Impact

The 2014 HYS provided information about the impacts of being homeless on Spokane County youth. While a causal relationship cannot be determined, analysis between homeless youth and their housed peers revealed significant differences in health outcomes, suggesting a relationship between homelessness and numerous health outcomes.

In the area of mental health, homeless youth were less likely to feel that they could go to their parents for help with a personal problem. They were also more likely to suffer from learning disabilities, not look forward to the future and feel alone in life.

Homeless youth were more likely than their housed peers to have felt sad or hopeless almost every day, for two weeks or more in a row, affecting their usual activities (44.9% compared to 32.9% respectively). Homeless students were more likely to have considered, planned or attempted suicide. Of note, the instances of these mental health behaviors (depression, suicide consideration, planning and attempts) were alarmingly high for the general youth population as well. While general youth levels were high, they were disproportionately so for homeless youth. These findings shine a spotlight on the need for mental health services for all youth, adolescents and families.

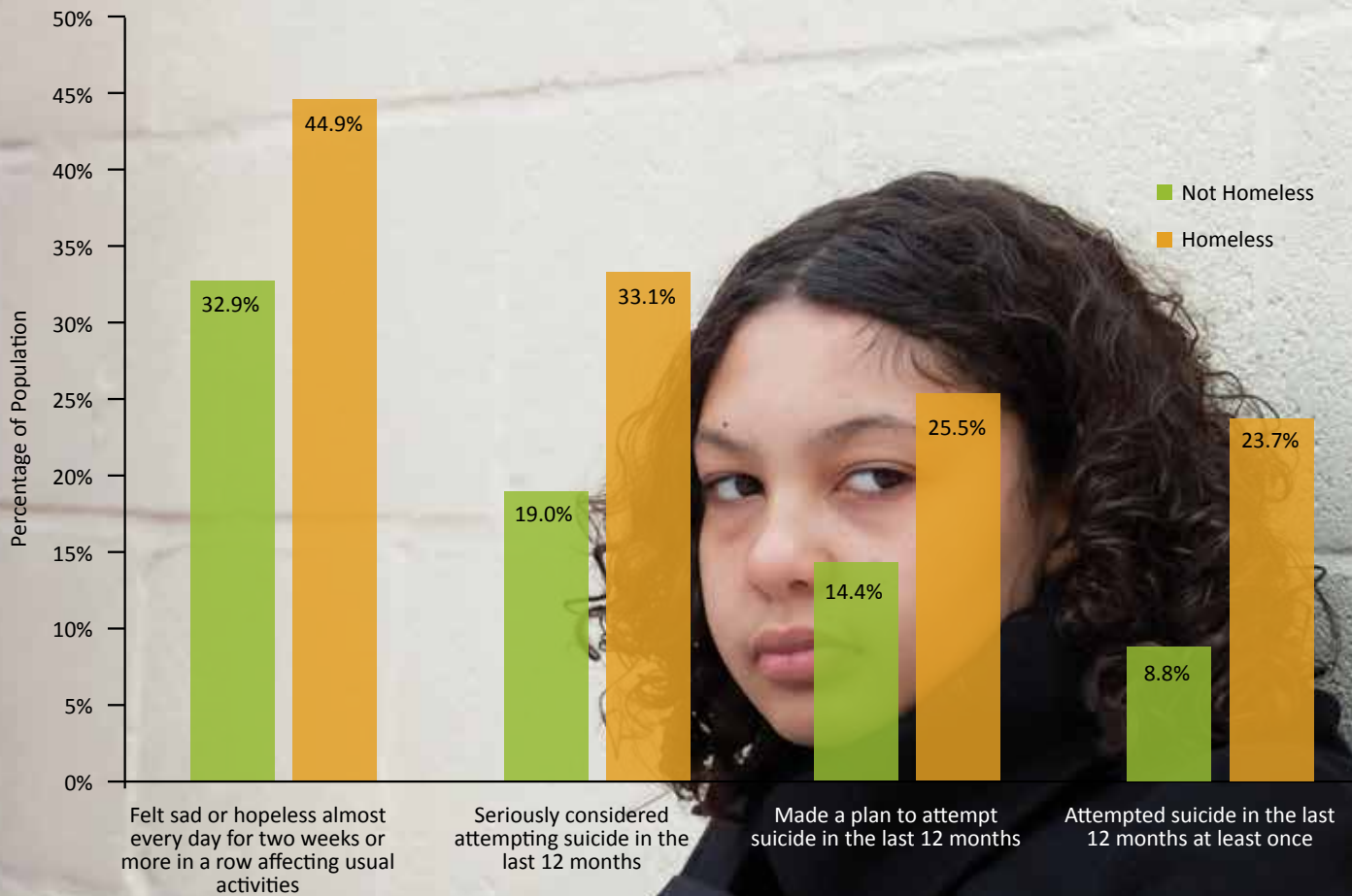
Table 10. Homeless Student (8th, 10th, 12th Grade) Mental Health Outcomes, Spokane County

	Homeless	Not Homeless
Can go to mother or father for help with a personal problem	41%	82%
Have long-term emotional problems or learning disabilities	23%	12%
Do not look forward to the future	14%	3%
Feel alone in life	10%	5%

Source: U.S. Table was adapted from: Hilton & Trella, 2015. Data Source: Spokane County

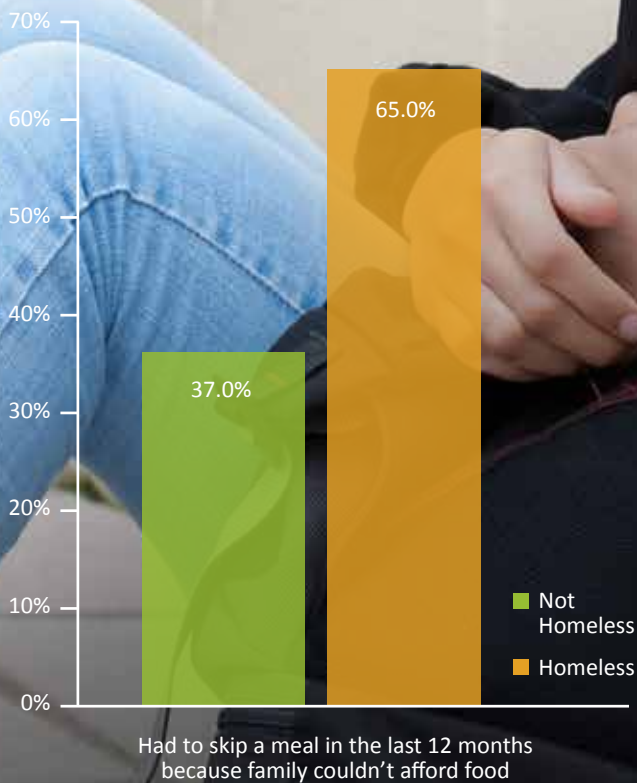


Figure 23. 8th, 10th, 12th Grade Student Mental Health Outcomes, Spokane County, 2014



Source: Healthy Youth Survey, 2014

Figure 24. 8th, 10th, 12th Grade Student Food Security, Spokane County, 2014

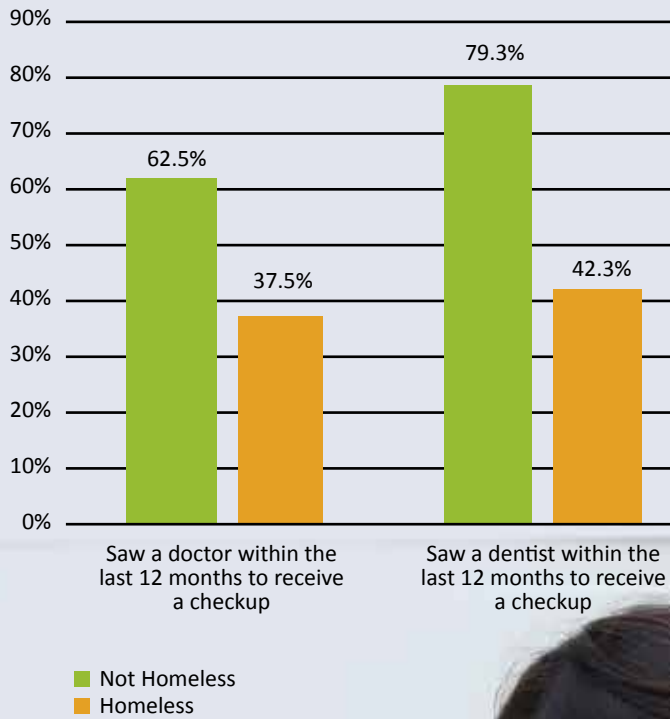


Source: Healthy Youth Survey, 2014

The impact of homelessness also affects physical health and behavior. One area of importance is food insecurity, measured by lack of access to enough nutritionally-adequate food to live an active, happy life¹⁶. Feeding America found that 74,710 people in Spokane County are food insecure (nearly 15.6% of the total population). According to the 2014 HYS, homeless youth are also more likely than their housed peers to have skipped a meal in the past 12 months because their family could not afford it.

Differences are also seen in access to health care. Similar to adults who experienced homelessness and the low likelihood of insurance, homeless youth are less likely than their housed peers to have seen a doctor or a dentist in the last 12 months for a checkup.

Figure 25. 8th, 10th, 12th Grade Student Health Care, Spokane County, 2014



Source: Healthy Youth Survey, 2014

Educational Impacts

In addition to the health impacts of homelessness, there are also effects on academic performance. The literature suggests that homeless students are more likely to suffer from a disrupted education due to mobility (changing schools throughout the year). According to the National Coalition for the Homeless, homeless families move due to time limits in temporary housing and to find employment or safe and affordable housing. Officials also found that children change schools because their temporary or new accommodations are not located in their original school district.

In Spokane County, 48.2% of homeless youth moved schools at least once during the year, while only 16.5% of their housed peers moved schools throughout the year. Table 11 displays the percentage of housed and homeless students who experienced a number of moves ranging from none to four or more during the 2014 school year, showing the significant differences in the number of moves for homeless versus housed students.

Each time a child moves schools their education is disrupted, losing an estimated three to six months of progress with each move. Homeless children are at risk of performing poorly in school as a result of their high

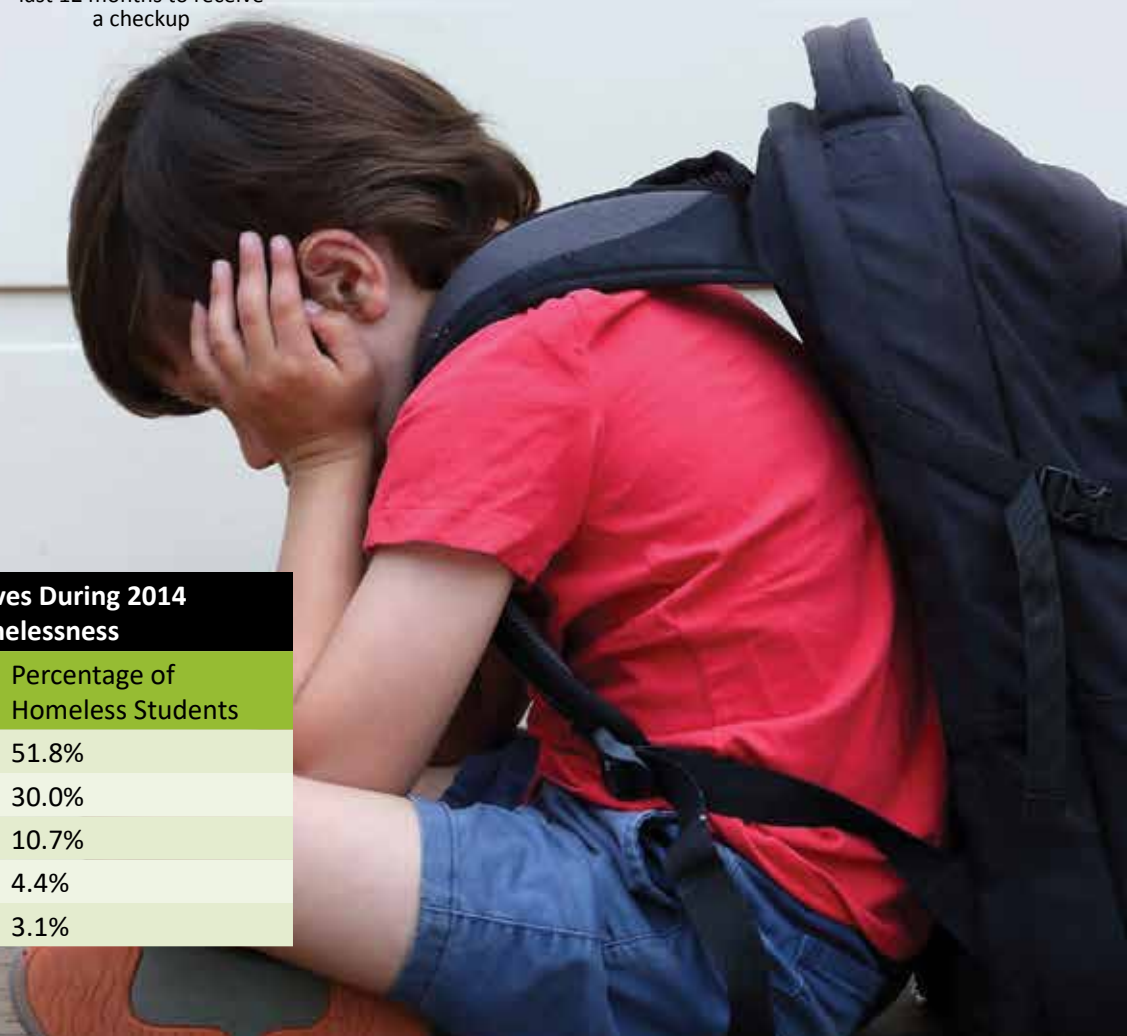


Table 11. Number of Moves During 2014 School Year by Homelessness

	Percentage of Housed Students	Percentage of Homeless Students
0	83.5%	51.8%
1	13.7%	30.0%
2	2.3%	10.7%
3	0.4%	4.4%
4 or more	0.2%	3.1%

Source: OSPI, CEDARS Data

mobility, placing them at a disadvantage of graduating from high school and escaping poverty without adequate education and corresponding opportunities.

The impact of homelessness on education can also be seen locally. Homeless youth had significantly lower grade point averages (GPA) than their housed peers as seen in Figure 26.

Homeless youth were also more likely to self-report that they perform poorer in school, with 56% of homeless students reporting that they received mostly Cs through mostly Fs, compared to 26% of their housed peers. Homeless youth were also less likely to report that their parents asked them if they had finished their homework (55%) than their housed peers at 83%, potentially due to

the different priorities of homeless families seeking basic needs.

Higher graduation rates are a priority for the education system and community. Spokane County fairs slightly better than the state graduation rates in general and for low-income and homeless students. However, there are disparities in graduation rates for both low-income and homeless students with only 1 out of 2 homeless students graduating high school and approximately 3 out of 4 low-income students, compared with approximately 4 out of 5 of the general student population. Youth who do not graduate high school are at a distinct disadvantage, again putting them at risk for continued poverty in adulthood and homelessness.

Figure 26. 8th, 10th, 12th Grade Student GPA, Spokane County, 2014

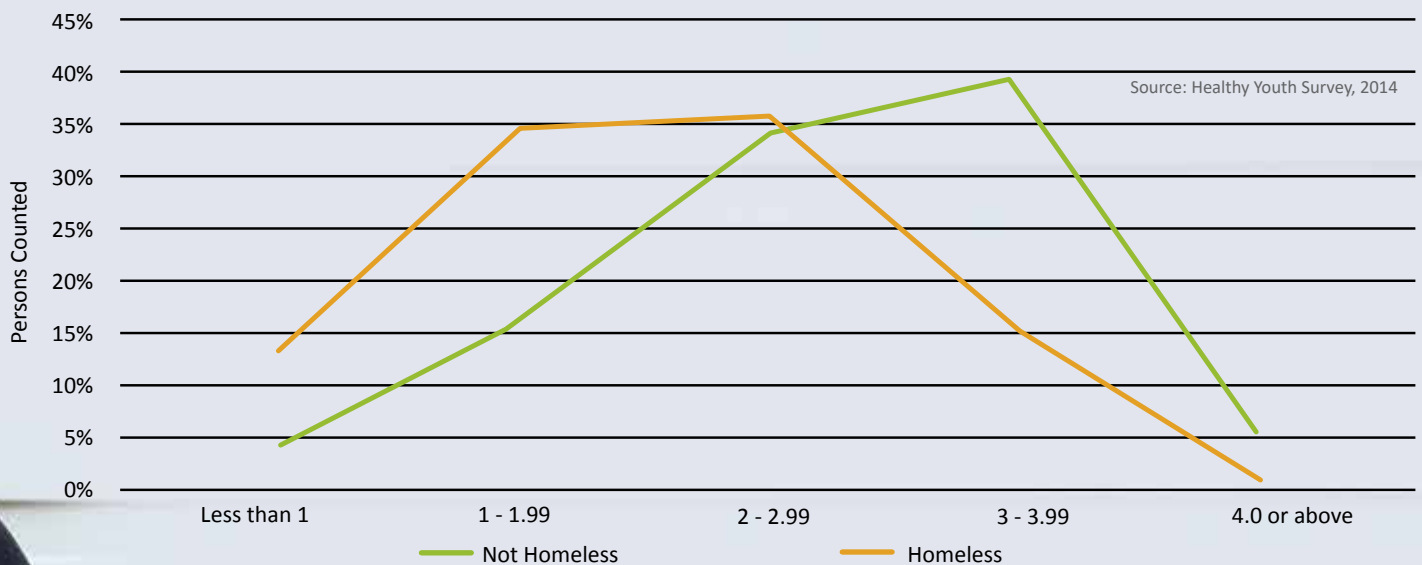


Table 12. Homeless Student (8th, 10th, 12th Grade) Educational Outcomes, Spokane County, 2014

Household Size	Homeless	Not Homeless	Financially Unstable	Financially Stable
Perform poorly in school (mostly Cs-mostly Fs)	54%	26%	43%	24%
Received mostly Fs during last school year	18%	3%	8%	2%
Received mostly As during the last year	17%	42%	28%	43%
Parents ask if student finished homework	55%	83%	75%	84%

Table was adapted from: Hilton & Trella, 2015. Data Source: Spokane County Healthy Youth Survey: 2014

Table 13. Graduation Rates: Class of 2014

	Total	Low-Income Students	Homeless Students
National	81%	73%	25%
Washington State	77%	66%	46%
Spokane County	82%	72%	52%

Table was adapted from: Hilton & Trella, 2015. Data Source: OSPI

Economic Impacts: Monetary Cost of Supporting the Homeless

When individuals and families become homeless, many systems end up paying associated costs including housing, health care, education and more. Capturing all of the economic impacts of homelessness is beyond the scope of the current report so a brief glimpse into the costs are provided in three examples related to housing, health care and education.

Housing: In 2014 Spokane city and county governments spent approximately \$7 million from local, state and federal funds on housing and services targeting the chronically homeless, homeless veterans, and homeless individuals and families with disabilities. This funding was contracted out to a number of agencies working to house the homeless. Apart from the \$7 million of government funding each respective agency utilizes funds from other sources. The total cost of providing housing services in Spokane County is unknown.

Health care: There are numerous costs to the healthcare system to support homelessness. For example, in 2014 (over an 11-month period) Providence Sacred Heart Medical Center's emergency room experienced 473 encounters from homeless individuals for only the top 14 primary diagnostic codes. These encounters averaged a direct cost (the cost of time in the ER) to the hospital of \$185 with a total cost of \$87,572. These costs do not reflect the amount that would have been billed for these services, considerably higher than the direct cost. The top diagnostic codes documented were: depressive disorder, nondependent drug abuse, amphetamine abuse,

schizophrenia, issue repeat prescription, psychosis, drug abuse, suicidal ideation, alcohol withdrawal, cellulitis of leg, drug psychoses, manic-depressive, pain in limb, schizoaffective type, and neurotic disorders. Without a regular healthcare provider, homeless individuals use the emergency room, a very costly and inefficient use of the healthcare system. Many of these diagnoses fall under categories treated through the mental health and substance treatment systems.

Education: The U.S. Department of Education and the McKinney-Vento Act require that homeless students must be provided transportation to stay at their original school. Due to the lack of affordable or available housing in some school districts, families are sometimes forced to move to a new area. Keeping students in their school by providing transportation becomes complicated, creating a web of bus routes and other forms of transportation across the county. For example, Spokane Public Schools (SPS) transported 241 students identified as homeless at the beginning of the 2014-15 school year from their current residence to keep them in their original school. This number rose to 387 homeless students (who may or may not be the same students from earlier in the year) in January reaching 503 homeless students by the end of the year. SPS paid \$8,173 in cab costs, \$7,595 in mileage reimbursement, \$30,850 in STA bus passes, and \$775,815 for regular, specialized, additional bus routes for a total of \$822,433 to transport students. Considering the importance of keeping students in the same school for academic performance, the effort is necessary, but costly.



Hear my Story: Morgan

In 2007, the economy crashed. Everyone felt the impact; some felt it more than others. Morgan was one of those greatly impacted. Her mom lost her job and consequently lost their apartment. They lived in their car for several days after which they had to move into a shelter to be eligible for assistance. During this time Morgan was still in high school and for five months had difficulty getting there. The family only had one car and the windshield wipers didn't work, making it impossible to drive if it was raining or snowing. Morgan had several mental health diagnoses that made attending her mainstream high school (Lewis and Clark High School) very difficult. She was overwhelmed and could no longer take it. Morgan was then accepted into MAP, an alternative high school in the area where she excelled and received her high school diploma.

Morgan graduated in 2012 and wanted to go to college. She started at Spokane Falls Community College, but her diagnoses and a major life event prohibited her from completing more than one quarter.

After her life got back on track and her diagnoses were under control again, she looked for work. She went to WorkSource every day for 30 days and finally

landed a job as the "Sample Lady" at Walmart. She loved her job. She was learning and growing. She was happy. Due to the medications she was taking and her diagnoses, she received Social Security Income (SSI). However, once you start reporting your income, you initially lose your SSI dollar for dollar. Once you are self-sufficient, you lose it altogether, cold turkey. That is a terrible shock to an individual's income status. The amount of food assistance also goes down. Morgan's job was only part-time and she would have to be able to work 60+ hours a week to afford her rent and her medications without SSI. As a result Morgan had to resign from her job or she'd lose her benefits and she could no longer afford her medications and her rent, let alone food and other bills.

Today, she is working toward finding a way to give people in her position a hand up, not a hand out. She is a strong advocate for people who are, and have been, in her position. Anyone who has met Morgan has seen the passion and the drive this woman has for life. She had roadblock after roadblock thrown her way, and instead of giving up and admitting defeat, she took life by the horns and is taking the world by storm.

*By Amy Eagon,
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The Homeless Support System: Federal, State and Local

Homelessness is a result of the complex interplay of multiple factors from individual characteristics or behaviors to community-based services and resources to broader societal supports, such as government funding and policies. The housing system is complex—an understanding of that system is necessary in order to understand and evaluate how the community is responding to the needs of homeless and at-risk individuals and families.

Federal Supports

Housing and Urban Development

HUD’s mission is to create strong, sustainable, inclusive communities and quality affordable homes for all. HUD is working to strengthen the housing market to bolster the economy and protect consumers; meet the need for quality affordable rental homes; utilize housing as a platform for improving quality of life; build inclusive and sustainable communities free from discrimination; and transform the way HUD does business¹⁷. Their goal is also to help communities strengthen system-level coordination and build on lessons learned from years of practice and research to invest in proven solutions, such as rapid re-housing (RRH).

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) provides funds administered by HUD under the McKinney-Vento Homeless Assistance Act. The HEARTH Act also directs HUD to utilize a definition for “chronically homeless” that better targets persons with the longest histories of homelessness and the highest level of need.

HUD funds received by the City of Spokane and Spokane County are for the:

- Continuum of Care (CoC) program for permanent supportive housing, emergency shelter, transitional housing, and RRH families.
- Emergency Solutions Grant program for outreach, shelter and RRH.
- Home Investment Partnerships Program (HOME).
 - » New construction of multi-family housing
 - » Rehabilitation of housing
 - » Acquisition of existing housing
 - » Down payment assistance
 - » Tenant-based rental assistance

- Veterans Affairs Supportive Housing (VASH) program to assist with rent and permanent housing.
- Housing Opportunities for Persons with AIDS (HOPWA).
- Community Development Block Grant (CDBG) funds, which serve persons at 80% Average Median Income (AMI) and pay for services, operations, rehabilitation and acquisition of property.

HUD’s timetable to end homelessness is by:

- 2015 for veterans
- 2016 for those chronically homeless
- 2020 among families with children

A national goal of HUD was to implement a coordinated assessment system that serves all populations in a community by December 31, 2014. A coordinated, integrated system would ensure homeless and/or at-risk families as well as vulnerable homeless individuals are being discharged from healthcare institutions where they are provided the appropriate level of care, at the right level of intensity, and in a coordinated and timely manner, ultimately leading to improved housing outcomes for these individuals.

CDBG	Community Development Block Grant
CHG	Consolidated Homeless Grant
CoC	Continuum of Care
HEARTH	Homeless Emergency Assistance and Rapid Transition to Housing
HEN	Housing & Essential Needs
HCES	Homeless Coordinated Entry System
HFCA	Homeless Families Coordinated Assessment
HHAA	Homeless Housing Assistance Act
HMIS	Homeless Management Information System
HOME	Home Investments Partnership Program
HOPWA	Housing Opportunities for Persons with AIDS
HUD	Housing and Urban Development
RRH	Rapid Re-Housing
SHCA	Singles Homeless Coordinated Assessment
SPDAT	Service Prioritization Decision Assistance Tool
SSVF	Support Services for Veterans’ Families
VASH	Veterans Affairs Supportive Housing



United States Department of Veteran Affairs

Veterans are eligible for a variety of benefits from the VA, including HUD-VASH funds for permanent housing, foreclosure assistance, and home loans. Grant per diem (GPD) programs provide transitional housing for veterans funded through the VA and managed by Health Care for Homeless Veterans. Currently, there are three grant per diem programs in town managed by Volunteers of America (VOA) and Pioneer Human Services. There are also two Support Services for Veterans' Families grants in the Spokane area. They are funded by the VA and are managed through a partnership between Goodwill Industries and VOA with the Responsible Renters program instructed by a team member from Transitions.

Continuum of Care

The CoC initiative is designed to promote community-wide commitment to the goal of ending homelessness (including

unaccompanied youth and families. CoC provides funding for efforts to quickly re-house homeless individuals and families while minimizing the trauma and dislocation caused. It also promotes access to and utilization of mainstream programs that support the homeless and encourage self-sufficiency.

More broadly, the program is designed to:

- Promote community-wide planning and strategic use of resources to address homelessness
- Improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness
- Improve data collection and performance measurement
- Allow each community to tailor its program to the particular strengths and challenges within that community





Washington State Supports

Homelessness Housing and Assistance Act

The Washington State Department of Commerce oversees the Homelessness Housing and Assistance Act (HHAA) [RCW 43.185C] passed in 2005, requiring counties to have a plan to reduce homelessness, conduct an annual PIT count of homeless persons, report progress implementing plans annually to Commerce, and collect client data used to measure program and county performance in an HMIS.

The HHAA designates a portion of the fees captured when documents are recorded, primarily through the recording of mortgages to be forwarded to the state with a percentage retained for local use. The funds are designated to address homelessness by assisting low-income persons only (those earning less than 50% of the AMI). One of the most flexible funding sources to local communities, HHAA funds provide an opportunity to leverage other funding sources and to implement innovative practices.

State-administered funds are for the Consolidated Homeless Grant (CHG) and Housing and Essential Needs (HEN) programs. The CHG program is designed to support an integrated system of housing assistance to prevent homelessness and quickly re-house households who are unsheltered. This grant provides resources to address the needs of people who are homeless or at risk of homelessness. CHG provides funding for operations, facility support, homeless prevention, RRH, rental assistance for all households, and rental assistance for Temporary Assistance for Needy Families, also known as TANF. The definition of homeless used by the Department of Commerce **can be broader** than the HUD definition.

The HEN program serves clients eligible for Washington State Department of Social and Health Services (DSHS) Medical Care Services. HEN may provide assistance with rent and utility payments, personal health and hygiene items, cleaning supplies, and bus passes.

Statewide Housing Locator

House Bill 2048 passed in 2012 requires that an Interested Landlord List be established and available to households eligible for public rental assistance dollars. The intent is to connect private landlords who do not traditionally receive these housing dollars with eligible clients. Jointly, Spokane County and the City of Spokane work to encourage all landlords across Spokane County to register at housingsearchnw.org to increase the likelihood of being a recipient of public rental assistance dollars. In addition, Spokane County and the City of Spokane hold bi-annual meetings to receive feedback from local landlords on the functionality and/or any challenges with housingsearchnw.org.

Washington State Department of Social and Health Services

DSHS provides some additional support to people through their Home and Community Services division, which promotes, plans, develops and provides long-term care services for persons with disabilities and the elderly who may need state Washington Medicaid funds to help pay for them. DSHS helps individuals and families stay in their homes by providing support services or assistance for identified needs, like behavioral health, economic assistance, and much more. DSHS has multiple contracts with various agencies to provide these services.

The Affordable Care Act in Washington

The passage of the Patient Protection and Affordable Care Act in 2010 presented an unrivaled opportunity for change and infusion of resources in Washington state. The state embraced new opportunities to expand coverage and access, participating in Medicaid expansion and launching a fully-operational Health Benefit Exchange in October 2013. Since January 1, 2014, Washington state added 550,000 new Medicaid adult enrollees alone. The state will take a lead role to:

- Reorient payment toward value rather than volume
- Incentivize care delivery redesign
- Create regionally-centered organizations that support necessary linkages and alignment around community health improvement and cross-sector resource sharing
- Build robust health information technology and exchange infrastructure throughout the state

Recognizing health is largely influenced by factors outside the healthcare system, the state created locally-governed public-private partnership organizations that support

communities, sectors and systems in nine newly-designated regional service areas that also serve as new Medicaid procurement areas. These Accountable Communities of Health align state and community priorities and encourage cross-sector resource sharing and funding strategies. The Spokane region currently includes six counties: Adams, Lincoln, Ferry, Pend Oreille, Stevens and Spokane.

The Health Homes Care Coordination initiative supports high-risk/high-utilizers of Medicaid to improve health and healthcare outcomes and reduce costs. Washington state will proceed with submitting a "1115 Global Waiver" to implement a Medicaid benefit for tenancy support services in Permanent Supportive Housing to support wraparound services and case management. Managed care organizations and federally qualified health centers could use Medicaid for supportive housing efforts. If approved by the Centers for Medicare and Medicaid Services, also known as CMS, the 1115 waiver would allow the state flexibility to invest federal savings in activities that support Medicaid clients, providers and communities.



APPROVED

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The concept of a community health home in a transformed system would encourage Medicaid, managed care organizations, behavioral health organizations, providers, and others to work together with social services, public health, local and county governments, housing, education, early learning, philanthropy, consumers, businesses, tribes, and others to improve the triple aim—better care, better health and lower costs.

Local Supports

CoC Advisory Committee

The City of Spokane and Spokane County joined to create one CoC advisory committee with the City of Spokane providing facilitation. Homeless planning organizations participate on this committee. It recently finalized a 2015-2020 strategic plan, *End and Prevent Homelessness*, with the primary goals of retooling the homeless response system to end veteran, chronic and family homelessness. On the website: static.spokanecity.org/documents/chhs/plans-reports/planning/2015-2020-strategic-plan-to-end-homelessness.pdf the plan can be found.

Joint Homeless Coordinated Entry System and HMIS

The City of Spokane and Spokane County have a unique, integrated and cooperative joint Homeless Coordinated Entry System (HCES) with built-in linkages and cross-referral. This system was born out of the responsive decision by the state Department of Commerce to recognize the vast differences between the needs of the City of Spokane and Spokane County, thus funding was split in this county, allowing each municipality to focus funding and service delivery.

Spokane County's online portal went live in 2009. The brief screening at spokanecountyhprp.com assesses eligibility (singles and families) for county Homeless Prevention (HP) and RRH. Eastern Washington 2-1-1 provides phone accessibility to the content for those with limited internet accessibility and those that require interpreters. This component intersects and provides linkages to the city coordinated assessments for all singles and households as they are the "door" in the county for most of the shelters and housing beds and slots.

The Spokane City Homeless Families Coordinated Assessment (HFCA) was added in 2012, designed to assess families and link them with emergency shelter, transitional housing, permanent supportive housing, RRH; provide resource referrals; or divert families from entering the homeless shelter system. Intakes are conducted at the Salvation Army main office, but are also available at satellite locations (Catholic Charities, Spokane Neighborhood Action Program ((SNAP)) and VOA). This component intersects and facilitates assessment via spokanecountyhprp.com when the assessment staff

identifies applicability. If a single person inadvertently accesses the HFCA, then information is provided to link the client with the singles assessment system.

The Spokane City Singles Homeless Coordinated Assessment (SHCA) was added in 2014, designed to assess singles and link them with emergency shelter, transitional housing, permanent supportive housing, or RRH, and provide resource referrals. SHCA is operated by SNAP. Individuals can access the system through Better Health Together, Catholic Charities, Community Health Association of Spokane (also known as CHAS), Frontier Behavioral Health, Goodwill Industries, New Horizons, Transitions, VOA, and YWCA. This component intersects and facilitates assessments via spokanecountyhprp.com when the assessment staff identifies applicability. If a family inadvertently accesses the SHCA, the client is linked instead with the HFCA.

Added in December 2014, the City of Spokane Service Prioritization Decision Assistance Tool is used to serve those who are at highest need, for both the HFCA and SHCA populations, and takes into account that there are not enough resources to serve everyone. Criteria are based on a vulnerability index rating and the target population that resources serve, such as single males or females, households with or without children, disabled, or veteran. Data from these intake systems are sent to the local HMIS.

In 2015, a mobile application, or app, was designed for this joint HCES which provides a direct link to the spokanecountyhprp.com. The app is free and available on all three mobile platforms (Android, Apple and Windows). The election to pursue an app was a responsive decision based on data indicating that 65% of homeless youth have smartphones.

The City of Spokane oversees the HMIS, whereby all programs receiving municipally-administered homeless housing funds input client-level information. In 2015, the city started investing more in its HMIS program, allowing for the hire of additional staff. With additional resources, the CoC's HMIS program will be better able to support regional strategic planning, direct client services, and the overall effort to meet the needs of those facing homelessness and our partner agencies that serve them. They are looking to expand the capabilities of the HMIS as well as include new agency partners in the data collection, reporting, and planning efforts.

Use of HHAA Funds

The 2015 HHAA state re-allocated funds back to the county went primarily to agencies providing emergency shelter services. In addition, funds went toward:

- Homeless Prevention – Spokane County, in partnership with SNAP, provides past-due rent and current and near-future rent for households in danger of eviction and without any other resources to retain housing stability. Clients must have documentation of pending eviction, meet low-income standards, and live in Spokane County, exclusive of the city.
- Re-Entry Initiative Program - Spokane County, in partnership with SNAP, implemented a Re-Entry Initiative program, to house homeless persons exiting correctional and qualified mental health institutions to homelessness. To be eligible, one must be exiting an eligible institution, such as Spokane County jails or prison work releases, and meet the definition of homeless and low-income by HUD standards.

In 2010, the City of Spokane opted to establish its own HHAA program, thereby becoming an eligible recipient of the city's share of the generated revenue. These funds, along with some of the city's general funds in its Human Services department, are also allocated in a competitive process.

Funding Allocation Processes

In 2014, the city and county spent approximately \$7 million on homeless housing and services, which is contracted out to a number of agencies working to house Spokane's homeless.

The Consolidated Homeless Housing Grant Program combines federal (HUD), state (CHG), and local (HHAA, Human Services) homeless resources into a single grant opportunity coordinated by the city. The program supports an integrated system of housing assistance to prevent homelessness and quickly re-house households who are unsheltered. This is a competitive granting process for funding emergency shelter, transitional housing, rental assistance, permanent supportive housing, support services, and the centralized individual and family coordinated intake systems. The city evaluates their projects through performance measures drawn from the HMIS, which has extensive data entry and reporting tools.

The city also focuses on housing rehabilitation and acquisition to increase the number of units available in the city. For example, the city awards HOME funds as low-interest, deferred loans to for-profit, non-profit, and Community Housing Development Organization project sponsors. HOME funds must assist in the acquisition, construction and rehabilitation of low-income rental

housing. HOME funds serve as "gap financing", leveraging other sources of financing.

Spokane County elects to administer the state CHG program via non-profit housing organization(s) by sub-contract. Homeless Prevention is available to beneficiaries living inside of Spokane County, exclusive of the City of Spokane. RRH monies are available to beneficiaries that had a last-known permanent address in Spokane County, exclusive of the City of Spokane. Both programs require documentation of homelessness and financial eligibility to participate. All homeless housing programs administered by Spokane County capture follow-up data at interval(s) after program funding has ended, to learn if the household was successful in remaining stably housed. All households are required to work with a housing specialist to establish a household budget and make progress on a Housing Stability Plan. They are also offered the Responsible Renters Program training opportunity free of charge.

Veteran Homelessness

Veteran's Services has been a department of Spokane County since 1952. Originally known as the Veteran's Aid Bureau, the office administered the "Soldiers and Sailor's Relief Fund" which can be traced back to the 1890s. Each county in Washington state is responsible for providing emergency financial services to indigent wartime veterans, widows and their families. Funding for these programs is mandated by law and comes from a small portion of each county's property tax revenues.

The Spokane County Veteran's Services Office is a public agency not affiliated with the VA. It is operated and owned by Spokane County and is governed by local, yet nationally chartered veteran's organizations, known as a Central Relief Committee. Leadership and administration is provided by a director, who is appointed by the Spokane County Commissioners. Veteran's Services provides counseling and emergency financial aid to honorably discharged, indigent veterans and their families for rent, utilities, food, gas, and limited prescription assistance.

In February 2015, the City of Spokane began working on the Homes for Spokane's Heroes Initiative as part of the national Mayors Challenge to End Veteran Homelessness. A leadership team was formed with staff from Goodwill Industries, Heath Care for Homeless Veterans, Spokane Housing Authority, and Volunteers of America. The team developed a plan and commitment to house 150 homeless veterans by September 2015 and recently successfully housed 177. The efforts will continue until every homeless veteran is off the streets and housed. One of the next steps includes the development of a master list identifying each veteran in need of housing. To aid in outreach, a community hotline (509-828-2449) was set up to refer any

person (or household) who has served in the armed forces and is homeless or at risk of becoming homeless. The city has also been awarding a \$100 incentive to new landlords who work with their partners and rent to homeless veterans. The incentive program runs through the end of October 2015. More information can be obtained at HousingVeterans@giin.org.

Meeting Local Need with Targeted Housing Availability

The local need for supporting our homeless population is extensive. It is complicated by funding and housing limitations resulting from state and federal criteria that must be met for target populations.

As described earlier, the Spokane city and county government have been working on centralizing intake systems for those who are homeless. Much progress has been made to make it a seamless system, although it remains population-based. Intake services are coordinated through agencies or through the county-wide on-line intake that connects with the agencies for the following populations:

- Veterans (primarily through Goodwill Industries)
- Single individuals (primarily through SNAP)
- Households with children (primarily through Salvation Army)
- Individuals and families experiencing domestic violence (primarily through the YWCA)

Based on the January 2014 PIT count, there are approximately 1,100 homeless persons at any given time in Spokane County, not including those that are doubled up with other families or are simply not identified as homeless. The CoC service providers estimate homelessness throughout the year may be as high as

5,000 persons. Many CoC clients require services over an extended period, which limits the availability of some services for new clients.

In seeking housing services, individuals and families are assessed by SNAP and the Salvation Army respectively, completing an intake assessment in order to determine their level of need. The individuals and families scoring 5 or under on the 25 point assessment are deemed to be ineligible for housing services. Those who score a 6 or higher are considered to be eligible and are then put into the HMIS system. When services are available, the person/family with the highest score is considered to be in the most immediate need and is referred for housing services. If there are multiple individuals/families with the same score, those with other priority risk factors, such as fleeing domestic violence, are referred first. When housing services have space for an individual or family, they contact the Salvation Army or SNAP to refer someone who is in the eligible pool in the HMIS system, realizing there is a waiting list of individuals and families who are also eligible and awaiting services. It is unclear how many applicants who are ineligible for services are seeking housing assistance or other support as they are not all entered into the database.

Funded by local, state, and federal funds, there are a variety of housing and support services in the Spokane area designed to meet the needs of homeless persons. In January 2014, there were a total of 2,379 annual beds for homeless persons within CoC agencies. These beds are categorized as: emergency shelters (676 beds), transitional housing (761 beds), and RRH units (225 beds). In addition, there were a total of 717 permanent supportive housing beds for disabled persons. See Appendix C.



Limited Homeless Prevention Funding

Unfortunately, resources to combat Spokane County's housing insecurity issues are scarce, leaving many families on the brink of homelessness with few places to turn for assistance. Homelessness prevention resources in the area are unable to meet current demands, especially for financial resources to help people stay in their homes or to secure new housing when they are facing eviction. The Spokane-area CoC does not have approval from HUD (the primary funder of homeless services) to use federal homeless services funding for prevention, severely limiting the ability to provide prevention services. Use of HUD funds for homelessness prevention is only allowed for CoC areas designated as "high performing areas," based on low numbers of homeless persons. Between 2009 and 2012, the City of Spokane devoted approximately \$1.5 million of federal economic stimulus funds toward homelessness prevention, primarily in the form of rental assistance. This temporary funding stream is no longer available. The City of Spokane also recently devoted some funding (through Emergency Solutions Grants) for prevention services, however, this funding is now being used for RRH services for families who are already homeless.

Spokane County offers limited homelessness prevention services through the CHG and HHAA funding streams serving families below 30% of the AMI and below 50% of the AMI, respectively, which has shown to prevent homelessness in the past. Assuming these families maintain housing and do not enter the shelter system, Spokane County's investment in prevention will result in substantial social and economic returns.

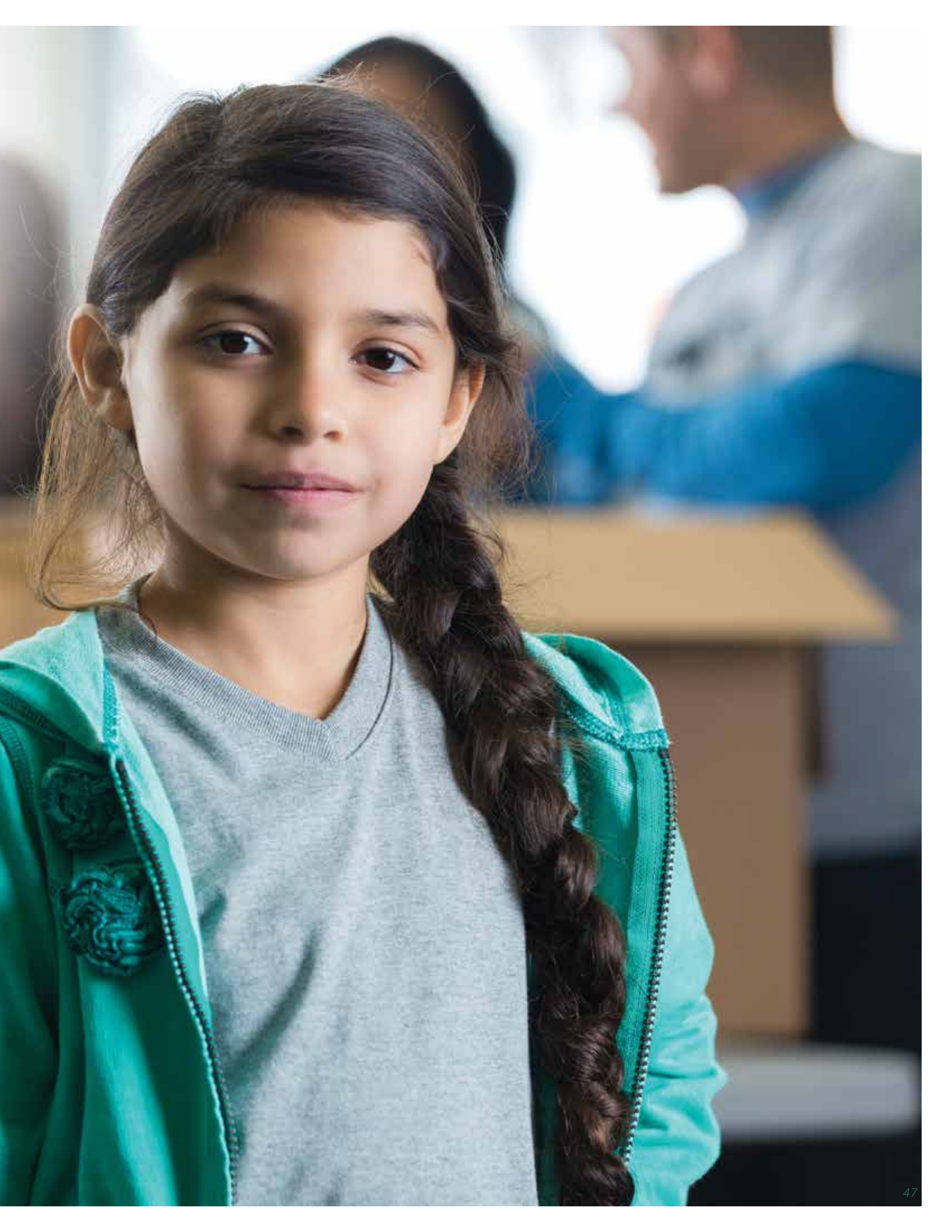
Other homelessness prevention efforts seen throughout the county can be seen by the numerous agencies offering assistance with utilities and other home costs. One local example of support is provided by Avista. The five-state utility operator estimated that in its Spokane

County service area, residents living at or below 125% FPL totals 35,070, or 20.7%, of Avista's total Spokane County customers. Avista and its partners provide a number of financial assistance programs so households retain their utilities or re-establish service after a disruption.

Additionally, the programs can help pay ongoing heating costs or assist families who have a hard time paying utility bills. This allows families to better meet their other basic household expenses, such as food, prescriptions, rent or child care.

Devoting resources to people who currently have housing when there are so many families who are already homeless creates policy and ethical dilemmas over prevention versus intervention. It is also difficult to prove it was the financial assistance that prevented their homelessness.

There are several homeless prevention-related services offered in the Spokane area that do not include direct financial assistance to individuals or families. Responsible renter and tenant education programs are offered by SNAP and Catholic Charities. SNAP and the Gonzaga University Law Clinic also offer foreclosure prevention services which help lower-income area residents through legal assistance and negotiations with banks. The Northwest Justice Project, the Center for Justice, and the Gonzaga University Law Clinic all offer housing-related legal services for area residents facing eviction. Assistance may include advocating for tenant rights and enforcement of eviction-related laws pertaining to eviction timelines. In some cases these organizations may be involved in mediation efforts between landlords and tenants to prevent or delay evictions¹. Spokane County also has numerous agencies that provide support services to help households meet their needs, other than housing, but again the need is great. See Appendix C for support services.



Recommendations

During the compilation of this assessment, interviews were conducted with housing service providers. Many of them had recommendations for improving the system to support the homeless population. Following are the common themes heard in the interviews:

- Identify funds that do not need to follow the HUD homeless definition, such as through the Department of Commerce, and use the funds more broadly to help address housing instability to prevent homelessness.
- Continue developing cross-system data sharing to “case manage” the same client across systems as a means to more effectively use funding streams. Data sharing could occur between healthcare insurers, mental health providers, Head Start offices, emergency rooms, schools, and the HMIS.
- Align city and county housing allocation cycles to assist community agencies in their applications for funding.
- Advocate for the City of Spokane to complete and maintain the inventory of rental housing across the county for use by agencies working to find vacancies in geographic areas.
- Strengthen the work of the City of Spokane in pursuing HUD’s mandated Affirmatively Furthering Fair-Housing initiative to eliminate racially-and-ethnically-concentrated areas of poverty by expanding placement of affordable housing throughout the county, increase equal access to community assets, and reduce factors that contribute to disproportionate housing problems for protected classes.
- Continue discussions around applying for federal HUD designation as a “Moving to Work” area and a “High Performing Community,” allowing federal funds to be used for homeless prevention activities:
 - » Designating SHA as a “Moving to Work” designee would require the following objectives to be met: reduce cost and improve cost effectiveness in federal expenditures; provide incentives to families with children where the head of household is working, seeking work, or is preparing to work by participating in job training, educational programs, or programs that assist people in obtaining employment and becoming economically self-sufficient; and increase housing choices for low-income families. Achieving this designation will likely be a major challenge since designees can only be authorized through an act of Congress (HUD, 2015). The leadership and

involvement of elected officials representing the area will be essential. The potential benefits may be worth the effort as the designation would dramatically increase policymakers’ and service providers’ resources and flexibility to address housing and homelessness issues in the area.

- » Achieving “High Performing Community” designation from HUD requires the CoC to meet certain performance benchmarks related to minimizing lengths of stay within services, reducing overall rates of homelessness and/or minimizing numbers of clients who experience homelessness multiple times, and maintaining high service coverage rates (National Alliance to End Homelessness, 2012). This designation is typically achieved in areas where homelessness is declining and where federal funding can be diverted to prevention services, which does not apply to Spokane County at this time.
- Support further development of HMIS to include additional information on those persons who apply for housing services, but are ineligible, in order to help determine community need.
- Assess the use of the housing intake assessment tool as a mechanism to refer eligible and ineligible individuals to community partners. The tool identifies individuals’ veteran status, disabilities, income, health insurance, chronic health conditions, HIV/AIDS status, mental health, substance abuse, domestic violence, dental health, pregnancy status, past relation to social services or justice system, and more.

In addition to supporting these recommendations, SRHD recommends consideration of the model practice strategies contained in Appendix B. These were reviewed and rated by an expert panel nationally, based on their ability to effectively increase access to housing in a community. While many of the strategies are already being implemented in Spokane County, others may be warranted to create the comprehensive set of services and resources needed to address the complex nature of homelessness.

In 2015, the Washington State Legislature passed two bills that have been signed by Governor Jay Inslee. The first, Senate Bill 5405, creates the Office of Homeless Youth Prevention and Protection Programs within the Department of Commerce. The goals of the office are to: (1) Decrease the number of homeless youth and young adults by identifying programs that address the initial causes of homelessness; and (2) Increase permanency rates among homeless youth by decreasing the length and occurrences of youth homelessness caused by a youth’s

separation from family or a legal guardian. SRHD sees the implementation of this legislation as an opportunity to bring additional focus and resources to prevent the significant trauma that homelessness imposes on youth and their communities.

The second bill, House Bill 2263, provides local governments with options to strengthen their communities through services and facilities for people with mental illness, developmental disabilities, and other vulnerable populations. County legislative authorities are authorized to implement 0.1 percent sales and use tax in order to fund housing and related services. A city legislative authority may implement the whole or remainder of the tax if the county has not opted to implement the full tax within two years. The funds must be used for constructing affordable housing units and facilities providing

housing-related services, mental and behavioral health-related services, or the operations and maintenance costs of newly constructed affordable housing, facilities providing housing-related services, or evaluation and treatment centers. SRHD encourages Spokane County and the City of Spokane to seriously consider this authority and opportunity to support current housing and support service efforts, including addressing the significant shortage of affordable housing in our community and improving access to mental health and behavioral health-related services.

The implementation of these bills has the potential to move the needle on the homeless problem across Washington state and build upon the valuable work of homeless advocates in Spokane County.



Conclusion

The extent of the homeless problem in Spokane County is unknown, but the challenge is evident to the number of agencies who are working diligently to support this population. With one-third of our population living at or below 200% FPL, we will continue to have a large homeless population, unless we try new solutions. In addition, while mental health, substance use, domestic violence, disabilities, and other factors can contribute to living in poverty and being homeless, these factors are further exacerbated after becoming homeless.

One psychological theory that puts homelessness into perspective is Maslow's Hierarchy of Needs¹⁸. Maslow stated that people are motivated to meet their needs based on a hierarchy. When one is met, a person strives to meet the next need; when one is compromised, it sets the individual back to working on a previous need at the expense of the

other areas. Maslow stated that every person has the desire to move up the hierarchy toward self-actualization, but suggested that life events disrupt an individual's progress causing an individual to regress and change the need that they were working to fulfill. This theory is useful in developing an understanding towards the homeless population. When an individual is worried about meeting their basic biological and physiological needs of shelter, food, warmth, health and safety, they cannot pursue other areas of their life, such as education, work and family. This hierarchy can serve as an important reminder of the levels of support needed for homeless persons, starting from the bottom up.

Until Spokane County's residents have their basic needs met, life remains very difficult with little hope for the future or for better days to come.





Appendix A: Cost of Basic Needs Methodology

The SRHD publication *Facing Spokane Poverty* (2002) details an approach to measuring poverty by examining the cost of basic needs in our community. Because poverty remains a concern in our community, SRHD updated the cost of basic needs information in the recent *Spokane County Demographics and Social Characteristics* report (2015) using the same methodology. The cost of basic needs is based on a family of four consisting of two parents between 20 to 50 years of age and two children: one 4-5 years of age, and one 6-8 years of age. The total basic needs costs equate to 180% FPL for a household of four in 2013.

Food costs are estimated by the U.S. Department of Agriculture and are available by age group and four food plans (cnp.usda.gov). This analysis used the low-cost food plan as a sustainable measure of basic food needs and assumed that all meals and snacks were purchased at a store and prepared at home. Food costs for a family of four in December 2014 were \$869.77 per month.

Utility costs were a combination of energy and telephone services. Telephone service was based on the basic plan with no additional amenities. According to CenturyLink, a plan with basic telephone service in Spokane County for 2014 starts at \$35.00 per month. Energy costs were updated using a cost of living calculator from the American Institute for Economic Research (aier.org). Energy costs increased to \$118, reflecting cost-of-living increases.

Housing cost was based on a two-bedroom apartment in Spokane County. According to Spokane/Kootenai Real Estate Research Committee, Spokane County Apartment

Market, the average rent rate for a two-bedroom apartment in Spokane County was \$702 in 2013.

Transportation costs were based on a family having one older car and using public transportation. An assumption was made that there was no car payment. Only one child bus pass was accounted for since children six years and younger ride free. The cost of gas was calculated for driving 20 miles per day at 20 miles per gallon at \$3.74 per gallon for gasoline in June 2014 (spokanegasprices.com). The cost for insurance was based on only having liability coverage for a 1994 car. A minimal amount of maintenance was also allotted.

Child care cost was reported by ChildCare Aware of Washington Family Center. The information reported for Spokane County for child care cost identifies two children (one pre-school child 2 ½ to 5 years of age and one school age child >6 years of age), in a family of four. The cost for child care refers to the average rates for a network center.

Health insurance was evaluated and calculated expecting a family of four (two adults, two children) to live below 200% of FPL in 2014 with no health insurance offered by their employer.*

*Washington State Department of Social and Health Services (DSHS) provides health and dental insurance through the Apple Health program. Eligibility for Apple coverage is based on income as compared the Federal Poverty Level (FPL). Options for Apple Health coverage in Spokane County for a family of four living at 165% FPL were identified using the health insurance exchange atwahealthplanfinder.org. Monthly premiums varied depending on coverage options. Expenses for basic needs for health care were calculated using a monthly premium for a family plan with a low deductible and low co-pay, two outpatient visits per person with an estimated co-pay of \$5, two prescriptions per person with an estimated co-pay of \$5, and meeting the annual deductible for the family of \$500.

Personal and household expenses were calculated as 10% of the cost per month for basic needs for a family of four in Spokane County.

Appendix B: Public Housing Authority

Understanding Public Housing Authority Assistance Programs

Public Housing Authorities (PHAs) are independent entities that operate subsidized rental housing programs serving low-income individuals and families. PHA housing is intended to avoid situations believed to negatively impact health and well-being, such as over-crowding, unsafe living conditions, high rent burdens, and frequent moves. HUD provides funding, technical assistance and oversight to approximately 3,300 PHAs nationwide, including 36 in Washington state. Each PHA serves clients within a designated geographic area and is responsible for a range of activities including identifying eligible households, maintaining waiting lists, managing public housing properties, inspecting voucher-subsidized units and making rent payments to landlords.

Specific rent, income or other eligibility requirements vary, but HUD requires that PHAs serve the lowest-income households in their jurisdictions and ensure that each household spend no more than 30% to 40% of its income on rent. With some exceptions, housing assistance is permanent as long as the recipient household remains eligible and in compliance with program rules. Housing is not available for everyone who qualifies for assistance, and PHAs maintain waiting lists for each program or property. In the Housing Choice Voucher (HCV) program, vouchers are awarded through a lottery.

PHAs provide three main types of housing assistance: 1

Housing Choice Vouchers

HCV or “Section 8” vouchers pay a portion of the rent for privately-owned housing units that meet certain size, quality, and maximum rent guidelines. Voucher holders sign a lease with a landlord who also enters into a contract with a PHA. Households must have an income below 30% to 50% of AMI to qualify. Assisted households and PHAs each pay their portions of monthly rent to the landlord. Vouchers are portable to allow recipients to move to a wider range of neighborhoods than would be possible with place-based assistance.

Public Housing

Public housing units are owned and managed by PHAs. Assisted households sign a lease with a PHA and pay rent directly to the PHA each month. Public housing is place-based in that subsidies are tied to specific properties that different households may rent over time. Households must have incomes below 80% of AMI to qualify for public housing, but PHAs often give preference to households that are homeless or have incomes below 30% of AMI.

Project-Based Vouchers

Project based vouchers, sometimes called HUD multi-family housing or project-based Section 8, pay a portion of the rent for housing units in properties that have received financing from HUD or have contracts with PHAs to provide housing to low-income households. Property owners may be PHAs, non-profit organizations or service providers, and generally hire private management companies to maintain the rental properties. Project-based voucher housing may serve specific populations, such as seniors or people with disabilities. Households must have incomes below 30% to 50% of AMI to qualify for project-based housing.

Appendix C: Homeless Resources

Housing and Support Services

EMERGENCY SHELTERS

Catholic Charities

- House of Charity
- St. Margaret's Shelter

Gift of Mary

Hearth Homes Emergency Shelter

Spokane Neighborhood Action Program

- Family Emergency

Family Promise of Spokane

The Salvation Army

- Family Emergency Center
- Sally's House
- Stepping Stones Emergency Housing
- Warming Centers

Truth Ministries

Union Gospel Mission Crisis Shelters

Volunteers of America

- Crosswalk
- Hope House Women's Shelter
- Warming Center

YWCA

- Domestic Violence Emergency Shelter
- Valley Domestic Violence Shelter

YFA Connections Residential Crisis Services

TRANSITIONAL

Catholic Charities

- Hanson House
- House of Charity
- St. Margaret's

Community Detox of Spokane

Excelsior Youth Center

Field of Diamonds House of Blessings Transitional Living

Hearth Homes Transitional Housing

New Horizons Transition House

Pioneer Human Services Victory House (veterans)

Spokane Housing Authority Phoenix Apartments

Spokane Neighborhood Action Program

- City Transitional
- Comprehensive

The Salvation Army Stepping Stones Transitional Housing

Transitions

- Miryam's House
- Transitional Living Center

Union Gospel Mission

- Anna Ogden Home
- Men's Freedom Bound

Volunteers of America

- Alexandria's House Transitional Housing
- Aston-Bleck Apartments
- Eagle's Rest (veterans)
- Independent Youth Housing Program (IYHP)
- Rest and Recoup House (veterans)

YWCA Alternatives to Domestic Violence Transitional Housing

RAPID RE-HOUSING

Catholic Charities

- Partnership Rehousing
- Ending Family Homelessness
- St. Margaret's

Goodwill Industries

- Supportive Services for Veteran Families
- Priority I and II Prevention

Spokane Neighborhood Action Program (SNAP)

- City Transitional
- Homerun
- Neighborhood Initiative

Spokane Center for Independent Living

Spokane City Moving Forward

Spokane Housing Authority

- Continuum of Care
- HOME Tenant-Based Rental Assistance
- Hotspotters pilot

The Salvation Army

- Homeless Essential Needs
- Transition in Place

Volunteers of America Health, Housing, Homeless (3) pilot

PERMANENT &/or SUPPORTIVE HOUSING

Catholic Charities

- Agnes Kehoe
- SMS Good Grounding
- Father Bach Haven
- Sharon Lord
- Catholic Charities Partnership
- Summit View
- Walnut Corners
- Housing First Pilot

Hutton Settlement

Inland Empire Residential Resources

NeighborWorks® America Chartered Member Community Frameworks

New Horizons

Revive

Salem Arms Community Housing

- Elm Street
- Scattered Sites Permanent Housing

Spokane Neighborhood Action Program (SNAP)

- Avondale
- Riverwalk

Spokane Housing Authority (SHA)

Own and manage 851 units:

- Tenant-based
- Valley 206 Apts Veteran and Non-Veteran
- Pearl Apts

Spokane Housing Ventures

- Bel Franklin
- El Estero Apts
- Catherine Johnson Court
- Casas Salvadas
- Wilton apts

Spokane Low Income Housing Consortium

Transitions

- Miryam's House
- Strong Families
- Transitional Living Center
- Transitions Family

Volunteers of America

Community-Based Housing

- Lloyd Apts
- Housing Options for Support Services
- Home Front
- Hope House

YWCA Good Grounding

SUPPORT SERVICES

Aging and Long Term Care of Eastern Washington

American Red Cross

ARC of Spokane

Better Health Together

Boys and Girls Club Spokane

Catholic Charities of Spokane

Community Health Association of Spokane (CHAS)

Children's Home Society of Washington

City of Spokane – Community Outreach

Community Minded Enterprises

Cup of Cool Water

East Central Community Center

Empire Health Foundation

Family Promise of Spokane

Frontier Behavioral Health

Fulcrum Institute

Goodwill Industries

Greater Valley Support Network

Homeless Education and Resource Team (HEART) Liaisons

Lutheran Community Services - Inland Northwest

Native Project

Northeast Community Center

Northwest Fair Housing Alliance

Northwest Justice Project

Passages Family Support

Peaceful Valley Homefront

Providence Health & Services

Skills'Kin

Spokane Homeless Coalition

Spokane Neighborhood Action Program

Spokane Valley Community Center

The Light House of Hope

St. Joseph Family Center

Sustainable Resources Inland Northwest

The Prevention Center

The Salvation Army of Spokane

Transitions Women's Hearth

Union Gospel Mission

Vanessa Behan Crisis Nursery

Volunteers of America

Washington Information Network 2-1-1

West Central Community Center

YMCA of the Inland Northwest

YWCA

Other Affordable Housing Funders and Builders (not inclusive)

- Building Changes
- Habitat for Humanity
- Impact Capital
- Inland Empire Residential Resources
- Rebuilding Together Spokane
- Spokane Baptist Association Homes
- Spokane Urban Ministries
- Washington Community Reinvestment Association (WCRA)
- Washington State Housing Finance Commission (WSHFC)

Appendix D: Community Housing and Support Projects

There are a number of pilot projects, strategic plans, and efforts taking place in Spokane County to increase availability of affordable housing and supportive services for target populations as well as ways to reduce costs to other systems serving the chronically homeless. The following efforts were identified during this assessment and are listed alphabetically:

Catholic Charities currently has 100 units under construction for permanent supportive housing for homeless single adults. They have plans to build an additional 50 units for singles and couples in Spokane County in 2016 and 50 units of housing for homeless families in Spokane Valley. Both projects will be permanent supportive housing.

The **City of Spokane Community**, Housing and Human Services Department contracted with non-profit agencies to implement the following pilot projects:

- The 2012-2015 H3 (Health, Housing and Homelessness) pilot project seeks to reduce re-hospitalizations and improve health outcomes for medically vulnerable homeless individuals by finding suitable housing and providing wraparound client services. By working within the Providence medical system, individuals are identified with medical need and must have housing when released, either through local housing agencies or family members. In 2015, over 40 clients have been served. In 2012 and 2013, the City of Spokane and Empire Health Foundation jointly funded this project and contracted with VOA to implement. In 2014 and 2015, the funds went to Better Health Together, a regional non-profit health care organization, to administer the project.
- Hot Spotters are individuals that are high utilizers of the emergency room and emergency management system (EMS), although not all homeless. This pilot is based on the Camden, New Jersey model and uses community health workers and housing support to reduce service use. In 2012 and 2013, this project was completely funded by city Human Services, who contracted to another agency. For 2014 and 2015, the project is funded by the city, Empire Health Foundation, and Spokane's Health Sciences and Services Authority with the funds contracted to Better Health Together. In 2015, this effort is serving about 33 clients, with 23 requiring higher levels of assistance from three full-time community health workers staffing the program and Spokane Housing Authority assisting with housing.
- The Strong Families Initiative is the development and implementation of a multi-system approach to

serve a subset of high risk homeless families whose children have been or are at-risk of being placed in out-of-home care through the child welfare system. Community-linked services are provided to selected families through the implementation of supportive housing services. Expected outcomes are a reduction in child welfare system contacts, child maltreatment and child removals, and foster care placements. This program is a partnership between the City of Spokane, DSHS, and Spokane Housing Authority, working closely with community housing providers and other service providers to bring a holistic approach to affordable housing and services to support independence and family cohesion.

The **Commonwealth Agency** was recently advised that its Palouse Trails project (120 units) has been moved from the Waiting List for Low-income Housing Tax Credits and is under review. These units will provide set-asides for large households and people with disabilities. Commonwealth expects to start construction in late fall 2015. Located on the Palouse Highway, Commonwealth believes these units will round out its affordable housing on the South Hill.

The **Inland NW Fuller Center** has the mission to provide affordable home ownership and economic development for the disadvantaged through tiny homes. The Center is currently building their first tiny house model and fundraising to build additional units. The grand plan calls for the creation of several "villages" made up of an assortment of tiny homes for homeless individuals and families. The organization is faith based and tiny home "villages" are planned to be located on various church properties with the church being a center piece of the community. The funding is expected to primarily come from the churches.

Revive currently has four housing units (males only) available that can house up to 20 people. They accept vouchers from the Washington State Department of Corrections (DOC) to house individuals who have been incarcerated and who are now returning to the community. They serve the individuals coming out of state and federal prisons, not county jails, which make them ineligible for funding aimed at county prison populations (including all SNAP housing). Revive has plans to add housing for women, women with families, veterans, and LGBTQ populations with a target date of spring 2016. They will immediately be opening three separate apartments for women, but all other housing will be dependent on funding from the DOC.

Spokane County is piloting two projects:

- A RRH project for households identified by Central Valley School District (CVSD) and Cheney School District staff is showing some results. The Homeless Education and Resource Team (HEART) school staff identifies the homeless students and families and the non-profit housing organization(s) contracted with the County work to get the family into housing within the school district. The pilot started in CVSD's 2014-2015 school year with funds for 10 homeless and 20 doubled up families. The pilot starts in Airway Heights this 2015-2016 school year. This project is funded with local HHAA funds and could easily be replicated in other low-income areas.
- Spokane County is one of three pilot communities for a unique service-only grant called Bringing Recovery Into Diverse Groups through Engagement & Support (BRIDGES), funded via a partnership through the federal Substance Abuse Mental Health Services Administration and the state Division of Behavioral

Health and Recovery agency. The project benefits individuals who experience behavioral health disorders and chronic homelessness by facilitating access to evidence-based Permanent Supportive Housing and Supported Employment through engagement and support. BRIDGES utilizes Peer Navigators to assist with enrollment in Medicaid and mainstream benefits and connects individuals with treatment services. Spokane County sub-contracts these services to a local non-profit housing/social service organization.

Spokane Housing Authority (SHA) owns and manages 851 units. When available, the 125 units through Public Housing are available through the waiting list process. Availability of the other 726 units is listed through Housing Search Northwest or other rental websites. SHA receives HUD funding through the VASH, HOPWA, and TBRA programs. This year they launched a new system to use a point-based system which takes financial need, disability,



and number of children in a household, and other factors into account to more fairly award housing assistance.

Going forward, SHA plans to:

- Connect mainstream Housing Choice Voucher rental assistance resources to local service providers serving those experiencing homelessness in order to provide affordable permanent housing and reduce the overall homeless population. This year's vouchers were awarded to YWCA, Transitions, Department of Social and Health Services, Aging and Long-Term Care, World Relief, Volunteers of America, Spokane Public Schools, and others
- Connect health and education services to affordable housing to address two specific issues that create risk in maintaining stable housing

Create 750 additional affordable housing units located areas of opportunity, including access to transportation, employment, healthcare, shopping and services.

Spokane Low Income Housing Consortium (SLIHC)

provides a collective voice for the long-term availability of affordable housing for our Spokane community residents of low income. Members work together to ensure the long-term availability and maximum use of safe, affordable housing in the community. Over the last 25 years, SLIHC has gone from ten founding members owning 77 affordable rentals to 40+ members providing over 3,700 affordable rentals and more than 2,000 homeownership opportunities.

Transitional Programs for Women's (previously known as Transitions) mission is to work to end poverty and homelessness for women and children in Spokane County. They currently provide both transitional and permanent housing, planning to break ground in 2017 to build 24 one, two, or three bedroom cottages on their four acres of property. These additional units will allow them to expand the number of women and families they can serve. The cottages will be covered by a 1.1 million dollar capital campaign which they have already launched.

VOA, in partnership with Catholic Charities, are currently building a 50-unit permanent supportive housing project for chronically homeless and disabled singles. They are investigating a partnership to also build 8-10 units of transitional housing for single young adults.

Homeless Prevention and Support Collaboratives

- **Greater Spokane Valley Network's Hand and Heart** program works with the Central Valley School District's Homeless Education and Resource Team (HEART) staff to match student and family need with resources in the community. They use a web-based application to communicate need out to those who are members of the program. A small emergency fund can be accessed, if needed. Most recently, on behalf of the Greater Valley Support Network and at the request of two Spokane Valley council people, SLIHC submitted requests to amend provisions in the City's Comprehensive Plan that will expand affordable housing options in Spokane Valley.
- **Priority Spokane** is a unique collaboration of organizations working to create a vibrant future for Spokane County. By focusing efforts on a few priorities associated with economic vitality, education, the environment, health, and community safety, Priority Spokane aims at creating a thriving community for all who live and work here. Since 2009, strategies have been focused on improving the high school graduation rate. Most recently, the focus has moved toward improving mental health by stabilizing young families who are homeless as identified through the school system.
- The **Spokane Homeless Coalition** is a collaborative effort of the individuals and organizations/agencies addressing the challenges of homelessness in the communities of the greater Spokane region. Through education, legislative advocacy, mutual support and a sharing of resources, the coalition strives to prevent homelessness, as well as create the ability of the communities to respond to individual needs.
- **THEZONE** project aims at helping the communities of Greater Hillyard and northeast Spokane reach their full potential. With collaboration between the community and agencies, THEZONE works to move the needle forward in areas of education, economy, and health. THEZONE is in the process of applying for Promise Zone HUD designation. The director of THEZONE development is staff of Spokane Public schools.



Appendix E: Access to Housing Model Practice Strategies

Excerpted from *County Health Rankings and Roadmaps What Works* (countyhealthrankings.org)

Scientifically Supported:

- **Housing Choice Voucher Program (Section 8):** Under Section 8, eligible low and very low-income families are awarded vouchers to help cover the costs of rental housing. Residents pay 30%-40% of their income on rent and a local public housing agency contracts with the landlord to pay the remainder (US HUD-Vouchers).
- **Housing First Program:** Housing First addresses chronic homelessness by providing RRH as well as support services like crisis intervention, needs assessment, and case management. The program can serve various populations, but most often serves individuals who are chronically homeless and have persistent mental illness or problems with substance abuse and addiction. Clients may receive housing regardless of substance use (SAMHSA-NREPP).
- **Moving to Opportunity (MTO):** The MTO was a demonstration program sponsored by HUD from 1994 to 1998. The program provided housing vouchers, counseling, and assistance to low-income families in various parts of the country to help them move from low poverty neighborhoods (US HUD-Sanbonmatsu 2011).

Some evidence:

- **Service-Enriched Housing:** Service-enriched housing is permanent, basic rental housing in which social services are available onsite or by referral. Housing can be nonprofit, private, government assisted, unsubsidized, mixed income or any combination of these.
- **CDBGs:** CDBGs fund local community development activities such as affordable housing, anti-poverty programs, and infrastructure development. CDBG funds are available to designated "entitlement" communities such as central cities of Metropolitan Statistical Areas (MSAs), metropolitan cities with populations of at least 50,000, and qualified urban counties with populations of 200,000 or more. States may also distribute funds to other communities (US HUD-CDBG).
- **Community Land Trusts (CLTs):** CLTs are private, non-profit organizations that purchase land to lease to low and middle income residents for housing use. Home owners on CLT-owned land are required to sell the home back to the CLT or to another low-income resident at an affordable price (CLT Network).
- **Inclusionary Zoning:** Inclusionary zoning is a type of incentive zoning. Inclusionary zoning requires developers to reserve a proportion of housing units for low-income residents. Inclusionary zoning programs may be based on mandatory requirements or development incentives such as density bonuses.
- **Low-income Housing Tax Credits (LIHTCs):** LIHTCs provide funding for the development costs of low-income housing by allowing a taxpayer to take a federal tax credit equal to a large percentage of the cost incurred for developing low-income units in a rental housing project (US HUD-LIHTC).



Expert opinion:

- **Tax Increment Financing (TIF):** TIF districts are created to generate revenue to eliminate blight and stimulate economic development in a particular area. The tax “base” is defined by the district’s property values before improvements are made. As properties are improved, the increase in their values raises tax revenue; some or all tax revenue above the base rate is reinvested into affordable housing in the district. Affordable housing reinvestments are most common in urban and suburban TIFs (CDFA-TIF).
- **HUD’s HOME Investment Partnership Program (HOME):** HOME provides formula grants to states and localities to fund activities that build, buy, and/or rehabilitate affordable housing for rent or homeownership or to provide direct rental assistance to low-income households (US HUD-HOME).
- **Housing Trust Funds:** Housing trust funds work to facilitate affordable, quality housing by creating or maintaining low-income housing; subsidizing rental housing; assisting homebuyers through down payment support, counseling, or interest subsidies; supporting non-profit housing developers; and providing “gap financing.”
- **Land Banking:** Land banks acquire, hold, manage, and develop properties such as vacant lots, abandoned buildings, or foreclosures to transition them to productive uses, often affordable housing developments.
- **The Low Income Home Energy Assistance program (LIHEAP):** LIHEAP helps low-income households meet their home energy needs. LIHEAP focuses on helping vulnerable households, those with at least one member that is young, disabled, or elderly, and high burden households, those with the lowest incomes and highest home energy costs. LIHEAP is administered by the Office of Community Services, Administration for Children and Families, in the Department of Health and Human Services; states and territories can apply for block grants (US DHHS-LIHEAP).
- **Housing Mediation Services:** Housing mediation services facilitate mediation between tenants and landlords to resolve conflict and prevent eviction. These services are available to everyone, but are most often used by low-income individuals and those with persistent mental illness.

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p. 41 SAN DIEGO (July 17, 2009) Staff members from Naval Medical Center, San Diego provide medical care to homeless veterans during the 22nd annual Homeless Veterans Stand Down. (U.S. Navy photo)

p. 42 Petr Kratochvil,

p. 42 Chuck Kennedy - President Barack Obama's signature on the health insurance reform bill at the White House, March 23, 2010. (Official White House Photo by Chuck Kennedy)

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