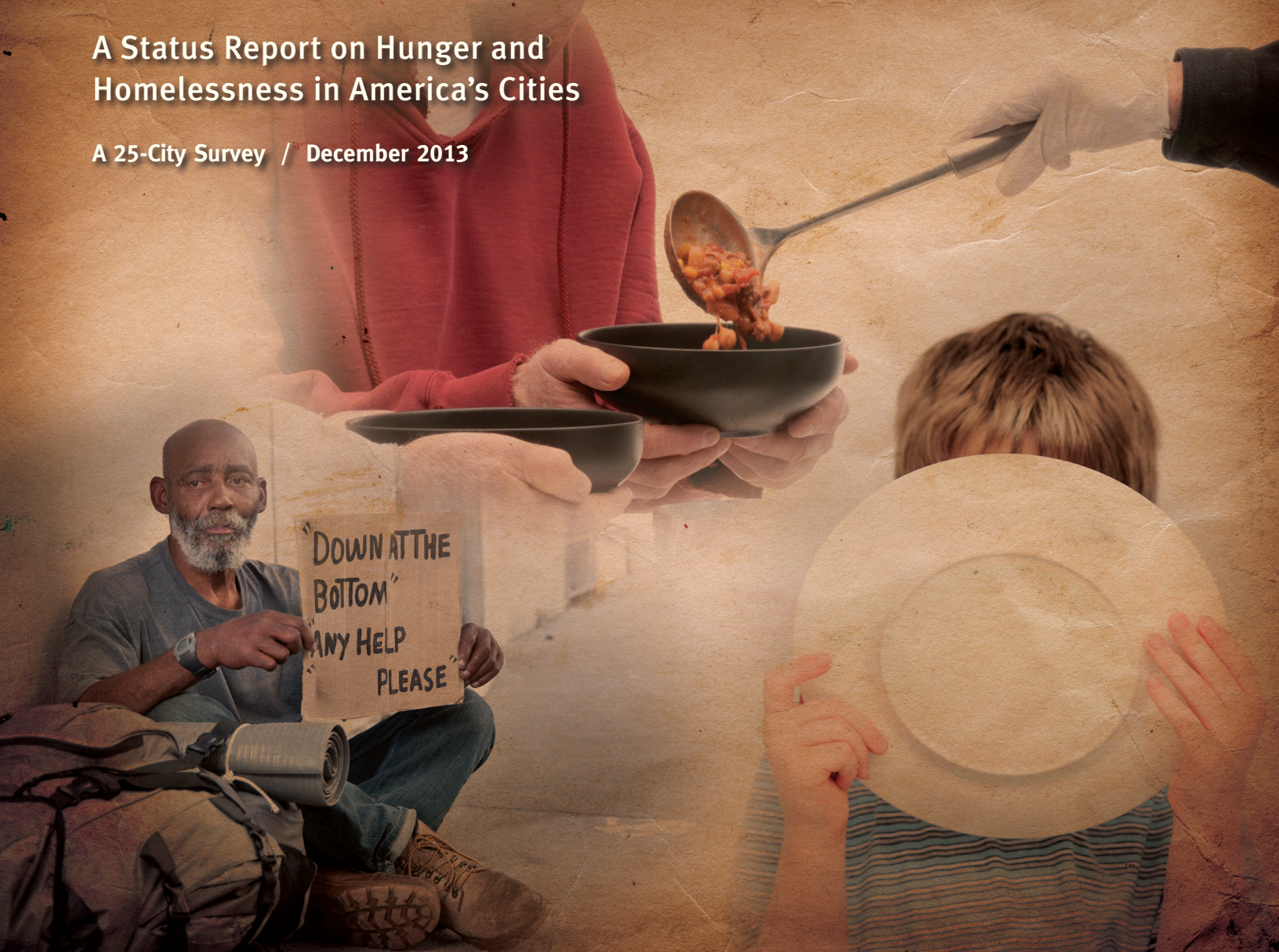


The United States Conference of Mayors

HUNGER AND HOMELESSNESS SURVEY

A Status Report on Hunger and Homelessness in America's Cities

A 25-City Survey / December 2013



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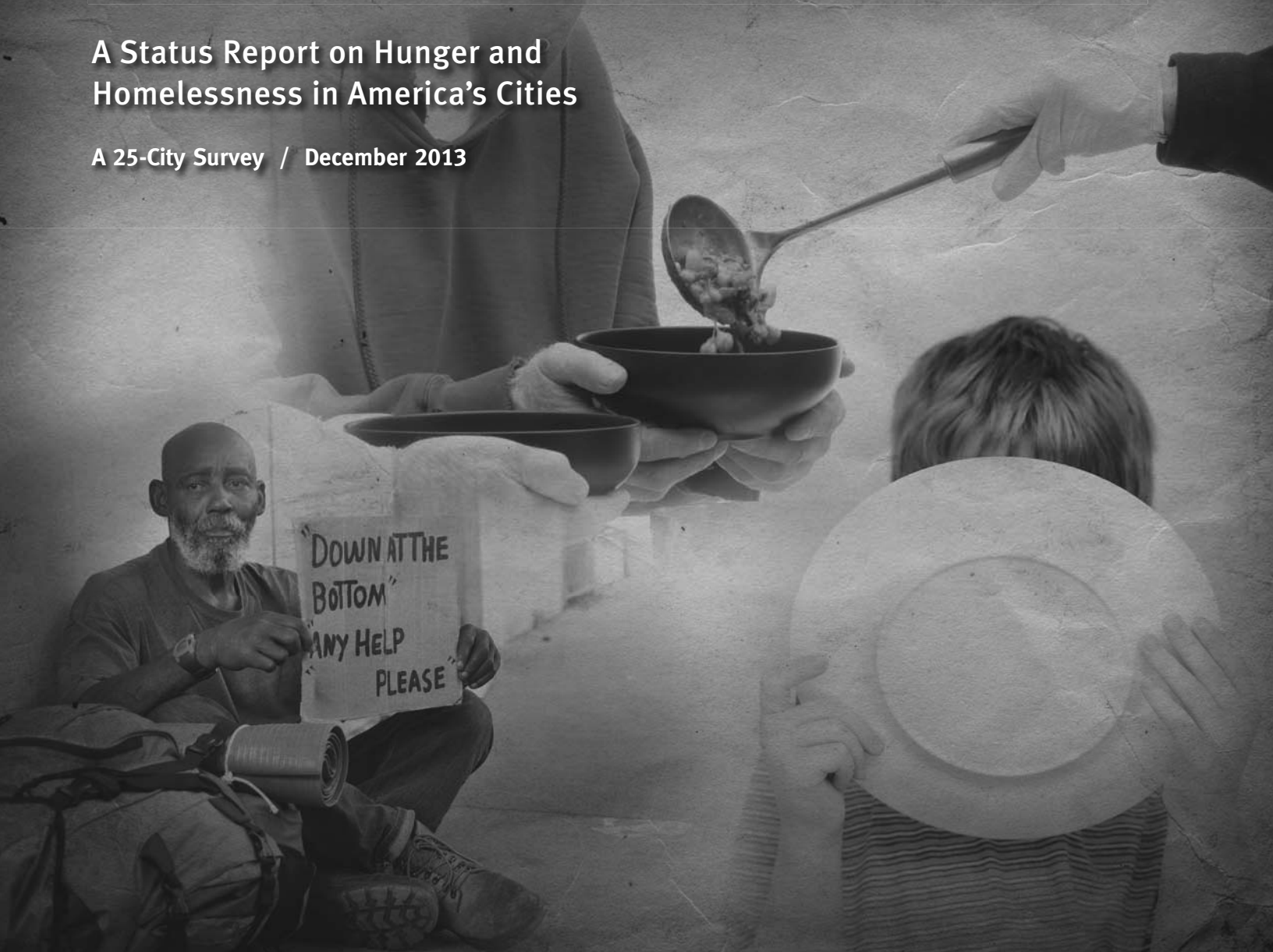
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Contents

Executive Summary	1
Introduction.....	5
Background.....	5
Survey Cities	5
Context of the 2013 Survey	6
Data and Analysis.....	7
Hunger	9
Need for Food Assistance.....	10
Availability of Food Assistance	10
Unmet Need for Emergency Food Assistance.....	16
Policies and Practices to Reduce Hunger	12
Exemplary Programs to Alleviate Hunger.....	13
Impact of SNAP Cuts	20
Outlook for Next Year.....	25
Homelessness	29
Extent of Homelessness.....	29
Homelessness among Families	30
Homelessness among Unaccompanied Individuals.....	30
Number of Homeless Persons.....	30
Characteristics of Homeless Adults.....	31
Emergency Shelter and Other Housing for Homeless Persons	31
Unmet Need for Shelter.....	32
Homeless Veterans	33
Exemplary Programs to Alleviate Homelessness among Veterans.....	39
Efforts to Prevent Homelessness Resulting from Foreclosure	44
Policies and Practices to Reduce Homelessness.....	46
Exemplary Programs to Alleviate Homelessness.....	46
Outlook for Next Year.....	53
City Profiles	55
Appendix A: City Data on Hunger.....	81
Appendix B: City Data on Homelessness.....	87
Appendix C: City Contacts	95
Appendix D: 2013 Hunger and Homelessness Information Questionnaire.....	101
Appendix E: List of Past Reports	111

Executive Summary

This report presents the results of a survey of 25 of the cities whose mayors serve on The U.S. Conference of Mayors' Task Force on Hunger and Homelessness. Officials were asked to provide information on the extent and causes of hunger and homelessness in their cities, and the emergency food assistance and homeless services provided, between September 1, 2012 and August 31, 2013. They also were asked for their assessment of the demand for services and the resources available to them in the year ahead. This year's survey found continuing increases in demand for services and continuing shortfalls in meeting service needs. Among its key findings:

Hunger

- All but four of the survey cities (83 percent) reported that requests for emergency food assistance increased over the past year. Three cities said requests remained at the same level as the previous year and one said they decreased. Across the survey cities, emergency food assistance requests increased by an average of 7 percent.
- Among those requesting emergency food assistance, 58 percent were persons in families, 43 percent were employed, 21 percent were elderly, and 9 percent were homeless.
- Unemployment led the list of causes of hunger cited by the survey cities, followed by low wages, poverty, and high housing costs.
- The cities reported a 7 percent average increase in the number of pounds of food distributed during the past year. Collectively, the survey cities distributed a total of 557 million pounds of food.
- Across the responding cities, budgets for emergency food purchases increased by less than 1 percent. Collectively, the survey cities' emergency food budget totaled \$324 million.
- Across the survey cities, 21 percent of the people needing emergency food assistance did not receive it.
- In all of the responding cities, emergency kitchens and food pantries had to reduce the quantity of food persons could receive at each food pantry visit or the amount of food offered per-meal at emergency kitchens. In 78 percent of these cities, they had to reduce the number of times a person or family could visit a food pantry each month. In two-thirds of the cities, facilities had to turn away people because of lack of resources.
- Providing more jobs topped the city officials' list of actions needed to reduce hunger, with 73 percent of the cities citing this. Cited next on the list were increasing Supplemental Nutrition

Assistance Program (SNAP) benefits (by 59 percent of the cities), providing more affordable housing (by 55 percent), and providing more employment training programs (by 45 percent).

- When asked about the impact of the cuts in SNAP benefits being considered by the Congress, the city officials said that cuts would reduce the availability of food to vulnerable people, including children and the elderly, and that demand would be even greater on other food assistance programs, which generally would not be able to respond to increased demand. Several cities discussed the negative impact that reduced SNAP benefits would have on their local economies.
- All but one of the survey cities expect requests for emergency food assistance to increase over the next year, with 12 cities (55 percent) expecting the increase to be substantial and nine (41 percent) expecting it to be moderate. One city expects requests to continue at about the same level, and no city expects to see a decrease in requests.
- Nearly three in four of the cities (72 percent) expect that resources to provide emergency food assistance will decrease over the next year, with 27 percent of the cities expecting that decrease to be substantial and 45 percent expecting it to be moderate. Two cities expect resources to continue at about the same level, two expect moderate increases in resources, and two expect substantial increases.
- The impact of cuts in SNAP benefits that have been proposed and the inability of food assistance programs to meet the increased demand that would result was identified by most of the cities as the biggest challenge they will face in addressing hunger in the coming year. Officials also voiced concern about the negative impact of cuts in U.S. Department of Agriculture commodity distribution and other food programs.

Homelessness

- Over the past year, the total number of persons experiencing homelessness increased in 52 percent of the survey cities responding, decreased in 36 percent of the cities; and stayed the same in 12 percent of the cities. Across these cities, there was an overall increase of 3 percent in the total number of persons experiencing homelessness.
- The number of families experiencing homelessness increased across the survey cities by an average of 4 percent, with 64 percent of the cities reporting an increase and two cities saying the number stayed the same. Twenty-eight percent of the cities reported a decrease.
- The number of unaccompanied individuals experiencing homelessness over the past year increased across the survey cities by an average of 4 percent, with 54 percent reporting an increase, 17 percent saying it stayed the same, and 29 percent reporting a decrease.
- City officials identified poverty as the leading cause of homelessness among families with children. This was followed by lack of affordable housing and unemployment.

- Unemployment topped the list of causes of homelessness among unaccompanied individuals, followed by lack of affordable housing and by substance abuse and the lack of needed services. Next to be cited were mental illness and the lack of needed services, and poverty.
- The survey cities reported that, on average, 30 percent of homeless adults were severely mentally ill, 17 percent were physically disabled, 16 percent were victims of domestic violence, and 3 percent were HIV Positive. Nineteen percent of homeless adults were employed and 13 percent were veterans.
- Across the survey cities over the past year, an average of 22 percent of homeless persons needing assistance did not receive it. Because no beds were available, emergency shelters in 71 percent of the survey cities had to turn away homeless families with children. Shelters in two-thirds of the cities had to turn away unaccompanied individuals.
- All but two of the survey cities have been successful in obtaining HUD, VA and other federal funds targeted to homeless veterans, and officials in about four in five of the cities (79 percent) report their efforts to target homeless veterans with these funds have been successful in reducing the number of veterans in the homeless population. Nearly all of the cities said more affordable housing was needed to address the current unmet need for services to veterans.
- Fifty-six percent of the cities say their experience suggests that the VA will be able to reach its goal of eliminating veterans' homelessness by the end of 2015.
- During the past year, 35 percent of the survey cities adopted policies and/or implemented programs aimed at preventing homelessness among households that have lost, or may lose, their homes to foreclosure. Fifty-five percent of the cities had adopted such policies in previous years.
- Providing more mainstream assisted housing topped the officials' list of actions needed to reduce homelessness in their cities. Next on the list were having more or better-paying employment opportunities, and providing more permanent supportive housing for people with disabilities.
- Officials in half of the cities expect the number of homeless families to increase over the next year, with one city expecting the increase to be substantial and the rest expecting it to be moderate. One-third expect the number will remain at about the same level, and 17 percent expect a moderate decrease.
- Officials in 46 percent of the survey cities expect the number of homeless individuals to increase over the next year, with 37.5 of the cities expecting a moderate increase and two cities expecting a substantial one. Officials in 37.5 percent of the cities expect the number will remain at about the same level, and 17 percent expect a moderate decrease.
- Officials in 62 percent of the cities expect resources to provide emergency shelter to decrease over the next year, with 14 percent expecting that decrease to be substantial and 48 percent expecting it to be moderate. One-third of the cities expect resources to continue at about the same level, and 14 percent expect a moderate increase.

Introduction

Background

Since October 1982, when The U.S. Conference of Mayors and The U.S. Conference of City Human Services Officials first brought the shortage of emergency services – food, shelter, medical care, income assistance, and energy assistance – to national attention through a survey of cities of all sizes across all regions of the country, the Conference of Mayors has continued to report each year on the problems of hunger, homelessness, and poverty in America's cities. That first, groundbreaking report described increasing demand for emergency services in cities, and the cities' inability to meet even half of that demand. Each succeeding report has updated the nation on the severity of the problems and the adequacy of the resources available to respond to them.

In September 1983, to spearhead the Conference of Mayors' efforts to respond to the emergency services crisis, the President of the Conference appointed 20 mayors to a Task Force on Hunger and Homelessness. That first Task Force, chaired by New Orleans Mayor Ernest "Dutch" Morial, assembled a group of cities that would be the focus of the surveys to be conducted in future years – a group that would constitute the core of the cities that would provide information each year on the magnitude and causes of these problems, the local responses to them, and the national responses that city leaders believed were needed for the problems to be adequately addressed. Currently, the Task Force is co-chaired by Memphis Mayor A.C. Wharton, Jr. and Santa Barbara Mayor Helene Schneider, and its members continue to provide data each year for this annual survey and report.

Survey Cities

The 25 Task Force cities responding to this year's survey are:

Asheville, NC – Mayor Esther Manheimer
Boston, MA – Mayor Thomas M. Menino
Charleston, SC – Mayor Joseph P. Riley, Jr.
Charlotte, NC – Mayor Patrick Cannon
Chicago, IL – Mayor Rahm Emanuel
Cleveland, OH – Mayor Frank G. Jackson
Dallas, TX – Mayor Mike Rawlings
Denver, CO – Mayor Michael Hancock
Des Moines, IA – Mayor Frank Cownie
Los Angeles, CA – Mayor Eric Garcetti
Louisville, KY – Mayor Greg Fischer
Memphis, TN – Mayor A.C. Wharton, Jr.
Nashville, TN – Mayor Karl Dean

Norfolk, VA – Mayor Paul D. Fraim
Philadelphia, PA – Mayor Michael A. Nutter
Phoenix, AZ – Mayor Greg Stanton
Plano, TX – Mayor Harry LaRosiliere
Providence, RI – Mayor Angel Taveras
Saint Paul, MN – Mayor Chris Coleman
Salt Lake City, UT – Mayor Ralph Becker
San Antonio, TX – Mayor Julian Castro
San Francisco, CA – Mayor Edwin M. Lee
Santa Barbara, CA – Mayor Helene Schneider
Trenton, NJ – Mayor Tony Mack
Washington, DC – Mayor Vincent C. Gray

Context for 2013 Survey

On September 17 the Census Bureau reported that the number of people in poverty went up from 46.2 million in 2011 to 46.5 million in 2012, and the national poverty rate remained at the 2011 level of 15 percent. These levels are little changed from 2010 when the number of people in poverty reached the highest level in the more than half-century that poverty estimates have been published. The poverty rate in 2012 was 2.5 percentage points higher than that reported in 2007, the year before the economic recession.

In 2012 the 9.5 million families in poverty put the family poverty rate at 11.8 percent, which is not statistically different from the previous year. About 16.1 million children were in poverty last year, as were 3.9 million people aged 65 years and older. The 2012 poverty threshold for a family of four was \$23,492.

The Census Bureau report showed median household income slipping slightly, from \$51,100 in 2011 to \$51,017 in 2012. A comparison of real household income over the past five years shows an 8.3 percent decline since pre-recession 2007. Between 2011 and 2012, the number of men working full time, year-round with earnings increased by one million; the increase for women was not statistically significant.

While the percentage of people without health insurance coverage declined to 15.4 percent in 2012 from 15.7 percent in 2011, the Bureau reported that the 48 million people without coverage in 2012 was not statistically different from the 48.6 million in 2011. The number of children younger than 18 without health insurance declined to 6.6 million (8.9 percent) in 2012 from 7.0 million (9.4 percent) in 2011. The uninsured rate for children in poverty continued to be much higher than the rate for children not in poverty: 12.9 percent compared to 7.7 percent.

On November 6 the Census Bureau reported that, using its supplemental poverty measure, which takes into account the impact of government programs designed to assist low-income families and individuals that are not included in the official poverty measure, the 2012 poverty rate was 16 percent, also unchanged from 2011. The supplemental measure deducts various expenses (such as medical, child care, and taxes) from income, reducing the amount available for basic goods purchases that include food, clothing, shelter, and utilities (FCSU) and some other needs.

While the unemployment rate has dropped from last November's 7.7 percent, with 12 million workers unemployed, to the current 7.0 percent, with 10.9 million workers unemployed, the post-recession period of relatively high unemployment continued through 2013. The number of long-term unemployed workers declined by 718,000 over the past 12 months and represents a smaller percentage of the total unemployed (37.3 percent) than a year ago.

There were 7.7 million persons employed part time for economic reasons – involuntary part-time workers – and 2.1 million persons “marginally attached to the labor force” who had wanted and looked for work. Within this group, there were 762,000 discouraged workers who were not currently looking for work because they believed no jobs were available for them. All of these numbers dropped during 2013 but continued at levels that challenged local economies.

According to RealtyTrac, a housing market data source, 58,939 U.S. properties started the foreclosure process for the first time in October of this year. This means foreclosure starts are down 34 percent from

October 2012, and October was the 15th consecutive month in which foreclosure starts have decreased on an annual basis. At the same time, there were a total of 30,023 scheduled judicial foreclosure auctions nationwide in October, up 7 percent from a year ago. October was the 16th consecutive month in which judicial foreclosure auctions have increased on an annual basis. According to RealtyTrac, a backlog of delayed judicial foreclosures is continuing to make its way through the system. For many properties now being scheduled for public auction, the foreclosure process may have started last year or earlier this year.

Data and Analysis

Only cities whose mayors are members of The U.S. Conference of Mayors Task Force on Hunger and Homelessness were invited to submit information for this report. These cities do not constitute a representative sample of U.S. cities, and the data reported reflect only the experience of the cities responding to the survey. This report, therefore, should not be interpreted as a national report on the problems of hunger and homelessness.

The Task Force cities included in the survey vary greatly in size and in their approach to collecting data on hunger and homelessness. Cities were asked to provide information on the data sources they used to answer each question, and any clarifying information that would aid data analysis.

Of the cities responding to this year's survey, two did not complete the section on hunger. In some cases, cities left individual questions on the survey unanswered. In calculating survey results for an individual survey question, counts and percentages are based on the number of cities answering that question.

In addition to individual city profiles of hunger, homelessness, and demographics which follow the survey findings in this report, individual city data from the hunger and the homelessness sections of the survey are provided in Appendices A and B, respectively. A list of contacts available to provide additional information on each city's data and approach to alleviating hunger and homelessness is provided in Appendix C.

This year's survey instrument is found in Appendix D to this report. A list of all past reports is found in Appendix E.

Hunger

In September the U.S. Department of Agriculture reported that, in 2012, 17.6 million households (14.5 percent) were food insecure at least some time during the year, meaning that they did not have access at all times to enough food for an active, healthy life for all household members. USDA says the prevalence of food insecurity has been essentially unchanged since 2008. Seven million households (5.7 percent) experienced very low food security in 2012, meaning that the food intake of one or more household members was reduced and their eating patterns were disrupted at times during the year because the household lacked money or other resources for food. This level is unchanged from 2011 and also essentially unchanged since 2008.

USDA says that “While children are usually shielded from the disrupted eating patterns and reduced food intake that characterize very low food security,” both children and adults experienced instances of very low food security in 463,000 households with children (1.2 percent) in 2012, a level essentially unchanged from 2011. Rates of food insecurity were substantially higher than the national average for households with incomes near or below the federal poverty line, households with children headed by single women or single men, and Black and Hispanic households. Food insecurity was more common in large cities and rural areas than in suburban areas and exurban areas around large cities.

This year’s USDA report, *Household Food Security in the United States in 2012*, says the typical food-secure household spent 26 percent more on food than the typical food-insecure household of the same size and household composition, including food purchased using Supplemental Nutrition Assistance Program (SNAP) benefits. (In 2011 it was 24 percent.) It also says that 59 percent of all food-insecure households participated in one or more of the three largest federal food and nutrition assistance programs during the month prior to the 2012 survey. (In 2011 it was 57 percent.) The programs are SNAP, the National School Lunch Program (NSLP), and the Special Supplemental Nutrition Program for Women, Infants and Children (WIC).

On November 8 USDA published its report on SNAP participation in 2013, which showed an increase of 1.2 percent over the previous year. In August there were 47,665,069 persons participating in the program, about 562,300 more than were benefitting a year earlier. The average household benefit in Fiscal Year 2013 was \$275.19. But despite recent growth in SNAP caseloads, participation gaps remain, according to the Food Research and Action Center (FRAC) in Washington, D.C. FRAC reports that one in four people eligible for SNAP go unserved and that nearly one in four people did not have enough money to feed themselves or their family in 2012. The recent growth in SNAP participation, FRAC has reported, is attributable to continuing unemployment and underemployment in most states and efforts to enroll more eligible people.

This section provides information on persons receiving emergency food assistance and the availability of that assistance among the Task Force survey cities between September 1, 2012 and August 31, 2013. It includes brief descriptions of exemplary programs or efforts underway in the cities which prevent or respond to the problems of hunger. Finally, it provides information on their outlook for next year.

Need for Food Assistance

Eighty-three percent (19) of the survey cities reported that the number of requests for emergency food assistance increased over the past year, with Nashville, Plano, and Saint Paul saying they remained the same, and Santa Barbara saying they decreased. Across the cities, the overall number of requests for food assistance increased by an average of 7 percent. The rate of increase ranged from 15 percent in Salt Lake City, 12 percent in Washington, DC, 11 percent in Dallas, and 10 percent in Charlotte and Trenton, to 5 percent in Cleveland and 4 percent in Louisville. Requests decreased by 5 percent in Santa Barbara.

Among those requesting emergency food assistance, 58 percent were persons in families, 43 percent were employed, 21 percent were elderly, and 9 percent were homeless. (These categories are not mutually exclusive and the same person can be included in more than one.)

Nine in 10 (91 percent) of the cities reported an increase in the number of persons requesting food assistance for the first time. Among these, 80 percent characterized the increase in first-time requests as moderate and 20 percent saw it as substantial.

Increased requests for food assistance were accompanied by more frequent visits to food pantries and emergency kitchens. Eighty percent of the cities reported an increase in the frequency of visits to food pantries and/or emergency kitchens each month. Among these, 60 percent characterized the increase in frequency as moderate and 40 percent said it was substantial.

When asked to identify the three main causes of hunger in their cities, unemployment was cited most frequently (by 86 percent of the cities); this was followed by low wages (by 64 percent), poverty (by 59 percent), and high housing costs (by 41 percent). Cited by fewer cities were lack of SNAP benefits (by 27 percent) and medical or health costs (by 18 percent). Two cities cited inadequate benefits (e.g., TANF, SSI, etc.) and one cited substance abuse.

Availability of Food Assistance

The survey cities reported a 7 percent average increase in the pounds of food distributed. More than three in four (77 percent) of the cities saw an increase, 14 percent saw a decrease, and 9 percent said it remained the same. Collectively, in the survey cities, 557 million pounds of food were distributed over the past year.

Fifty-seven percent (12) of the cities reported that their total budget for emergency food purchases increased over the past year, 14 percent (three cities) said it remained the same, and 29 percent (six cities) said it decreased. Across the responding cities, the budget for emergency food purchases increased by less than 1 percent. Collectively, in the survey cities, the year's total emergency food budget was \$325 million.

Donations from grocery chains and other food suppliers accounted for nearly half (49 percent) of the food distributed. This source was followed by federal emergency food assistance, which accounted for 19 percent, and purchased food, which accounted for 19 percent. Donations from individuals accounted for 9 percent and those from other sources accounted for 6 percent.

Over half (52 percent) of the cities reported that they had made at least some significant changes in the type of food purchased. These changes generally involved the purchase of fresher, healthier, more nutritious foods, particularly fresh produce and foods high in protein and low in fat, sodium, and sugar. **Trenton** officials report, however, that, due to limited funding, they were unable to purchase an adequate amount of fruits and vegetables, whole grain products, or protein items. Among the changes cities have made:

In **Asheville**, there has been a concerted effort to solicit more donations from local and regional farmers in order to increase fresh produce.

In **Boston**, there has been a continued increase in variety as well as the amount of fresh produce.

In **Chicago**, there has been a concerted effort to increase the amount of fresh food distributed in addition to the traditional non-perishable food items distributed to those in need of emergency food assistance. The Chicago Department of Family and Support Services recently implemented the Emergency Food Pantry Program, which offers a greater assortment of food products, such as fresh fruits and vegetables, eggs, beef, dairy products, and a variety of other perishable and non-perishable food items.

In **Cleveland**, distributing food with a high nutritional value has become a top priority of the Foodbank, which has focused on acquiring fresh produce and which has distributed nearly 12.5 million pounds of fresh fruits and vegetables during the last fiscal year.

In **Dallas**, there has been a continuous improvement in the nutritional value of food distributed.

In **Des Moines**, the community's primary food pantry network renewed its commitment to provide nutritious food for low-income consumers. This resulted in distribution of increased quantities of fresh produce, as well as healthy versions of shelf-stable items – low-fat, low-sugar, low-salt foods. Approximately 15 percent of all food distributed through this emergency food pantry network is in the form of fresh fruit and vegetables.

In **Phoenix**, officials have been purchasing more food to meet demand and receiving more fresh produce from national donors.

In **Los Angeles**, the Regional Food Bank continues to add more produce and other foods with high nutritional value.

In **Saint Paul**, Second Harvest Heartland continues to purchase food containing less sodium.

In **San Francisco**, officials have added numerous purchased products to distributions, notably protein items such as eggs and frozen meat, and grains such as pasta and rice.

Unmet Need for Emergency Food Assistance

Over the past year, emergency kitchens and food pantries in every survey city had to reduce the quantity of food persons can receive at each food pantry visit or the amount of food offered per-meal at emergency kitchens. In more than three in four (78 percent) of the survey cities, these facilities had to reduce the

number of times a person or family can visit a food pantry each month. In two-thirds of the cities, these facilities had to turn people away because of lack of resources.

Officials in 12 of the survey cities were able to estimate the overall demand for food assistance that went unmet during the past year; they reported that an average of 21 percent of the need went unmet. The following table shows these cities' estimates of unmet demand for emergency food assistance:

City	Percent Unmet Need
Boston	36
Charleston	0
Charlotte	20
Denver	15
Des Moines	18
Philadelphia	25
Phoenix	20
Salt Lake City	11
San Antonio	40
San Francisco	36
Santa Barbara	10
Trenton	20

Policies and Practices to Reduce Hunger

Providing more jobs led the city officials' list of actions needed to reduce hunger, with 73 percent (16) of the cities citing it. This was followed by increasing SNAP benefits, cited by 59 percent (13) of the cities; providing more affordable housing, cited by 55 percent (12) of the cities; and more employment training programs, cited by 45 percent (10) of the cities. Twenty-three percent (5) of the cities called for utility assistance programs, and three each called for substance abuse and mental health services and for lower gas prices and/or better public transportation.

Des Moines called for expanding the capacity of the primary food pantry network to support additional neighborhood pantry sites and increase the amount of food distributed per visit from a four-day supply of food once per month to a five-day supply of food for all members of a household. Officials there also called for the development of a comprehensive, community-wide approach that would systemically address issues of hunger and food access, noting that the Des Moines Area Religious Council (DMARC) is leading an effort and working with diverse service partners and community leaders to develop a food research and action council focused exclusively on hunger issues in Des Moines and Polk County. Finally, they called for the creation of a coordinated client intake and assessment process to identify comprehensive supportive services needs of families, to help ensure their return to stability and self-sufficiency, noting that the DMARC Food Pantry Network currently provides a coordinated intake system for food access that will be enhanced to serve as a pilot template for other basic needs assessments and referrals.

Among other approaches which the cities identified:

- **Dallas** called for better access to preventive health services.

- **Denver** called for increased accessibility to programs that promote self-sufficiency.
- **San Francisco** called for raising federal nutrition program income eligibility thresholds and aid payments to reflect the regional cost of living, expanding rather than shrinking state and national income and food assistance programs, and increasing unemployment benefits.

Exemplary Programs to Alleviate Hunger

Twenty-one of the survey cities provided descriptions of initiatives they believe have been effective in alleviating hunger problems in their cities or regions. This year, many of the survey respondents are targeting obesity problems and are creating or expanding nutrition education programs aimed at healthier meal preparation. Many described efforts to increase the nutritional value of the food that is distributed by food banks through a wide variety of delivery systems, including mobile units of various types.

Many also described efforts to increase the number of food distribution and meal sites. In **Trenton**, for example, community groups and agencies are working together to increase the number of outlets for fresh produce and increase the number of children receiving free or reduced price school breakfasts by serving the meals in targeted school classrooms. In **Providence**, grant funds are being used in two separate efforts to increase participation in summer meals and afterschool meals for kids. A Summer Meals Advisory Committee formed by the Food Bank includes the City, USDA, the Rhode Island Department of Education, United Way 2-1-1, and Stop and Shop.

Again this year, examples of exemplary programs include those of national programs such as Second Harvest, and those of state-wide food banks.

Asheville: Bounty and Soul's Fresh Produce Market began as an off-shoot of the Welcome Table in July of 2012. Starting in September, the Welcome Table ended its Wednesday lunch and fellowship and put all of its efforts into food distribution. The program is open to community members in need every Tuesday at St. James Episcopal Church. Ali Casparian, a certified holistic health coach and one of the founders of the program, gives a half-hour talk on healthy eating and then does a cooking demonstration. Bounty and Soul has expanded its Produce Market model to Blue Ridge Apartments, primarily serving 50 to 60 residents on Mondays, and has plans for a market at a local day care center in Black Mountain. People from the community can go through the market and pick from a wide variety of fruits, vegetables, and other whole foods. The market gives away about 2,000 pounds of fresh produce each week. To date, the project has given more than 70,000 pounds of produce to more than 9,000 individuals and 4,000 households. A possible expansion project, still in the incubation stage, is a food truck that will travel to communities throughout the region to provide fresh produce. The market program also introduces families to tasty, healthy options, like kale smoothies, that have five or less affordable ingredients. Casparian believes that most kids will enjoy eating healthy if they are given tasty whole food dishes. The program, he says, is more than just giving away food to families in need; it opens doors to other discussions about healthy lifestyles and community involvement.

The project began when MANNA Food Bank asked the Welcome Table if it could distribute a portion of donated produce from MANNA each week. What began as two tables of produce for 10 to 15 people each week quickly expanded to the now seven tables serving 65 to 75 community members. MANNA is currently using the Bounty and Soul produce market as a model for other projects throughout the region. MANNA distributed 2.4 million pounds of fresh produce last year, an increase of 40 percent over the

previous year. Casparian said that the project would not have been successful without the help of St. James Episcopal Church, the Black Mountain Community Garden, MANNA, and other local contributors and volunteers.

Charleston: Low-income families report that the cost to purchase healthy groceries is their biggest barrier to making nutritious meals at home. With cuts to SNAP, many family budgets are getting even tighter. In 2012, the Lowcountry Food Bank (LCFB) partnered with Share Our Strength, a national organization committed to ending childhood hunger, to launch a series of “Cooking Matters” courses to help provide a long-term solution to hunger. Each six-week Cooking Matters course empowers low-income people with the skills, knowledge, and confidence to prepare healthy and affordable meals on a budget. Led by the LCFB’s Nutrition Educator and supported by volunteer culinary and nutrition experts, course participants learn how to select nutritious, low-cost ingredients and prepare them in ways that provide the best nourishment possible. The courses serve a diverse audience of low-income families, children, and seniors. Most are enrolled in food-assistance programs such as SNAP and qualify for free/reduced-price meals at school. Many also count on food pantries when other food resources run out. The LCFB’s Cooking Matters was so successful in its first year of operation that the organization was nominated by Share Our Strength for its “Rookie of the Year” award. A letter from the co-founder of Share Our Strength reads in part: “As a 2013 award nominee, you join a distinguished group of leaders within our network who have shown extraordinary dedication and commitment to ending childhood hunger in America.”

Charlotte: In addition to being a regional distribution center for almost 600 hunger-fighting agencies, the Second Harvest Food Bank of Metrolina (SHFBM) supports five targeted programs aimed at helping specific populations: the Kids Cafe Program, the Backpack Program, the Mobile Pantry Program, Community Food Rescue, and the Second Helping Senior Box Program. In the Backpack Program, SHFBM serves children who attend low income daycare programs and children participating in the free/reduced lunch program. There are over 181,000 children living in need and at risk of hunger in the 19-county service region. The Backpack Program puts a backpack of nutritious foods directly into the hands of a hungry child to take home on weekends when school meals are not available. Backpacks generally weigh about seven pounds and contain foods such as calcium-enriched cereal bars; pudding or fruit cups; canned chicken, peaches, fruit cocktail, spaghetti, ravioli and beef stew; canned tomato, chicken noodle or vegetable beef soup; mac 'n' cheese; and peanut butter. Over the last six years, the Backpack Program has grown by 7,500 percent, from 1,277 backpacks distributed in FY 2007 to 96,326 distributed in FY 2013. SHFBM currently supports 107 Backpack Programs in 16 area counties.

Chicago: Over the past few years, The City of Chicago’s Department of Family and Support Services (DFSS) studied the nutritional benefits of fresh fruit and vegetables and prepared meals rather than processed foods. It became more and more apparent as the rate of type 2 diabetes and childhood and adult obesity increased that the current emergency food box model should be changed. With nutritional benefit as the primary determinant, and with access and cost as other important considerations, DFSS partnered with the Greater Chicago Food Depository (GCFD) to transition its Emergency Food Box Program to a Pantry Program. Under the new program, DFSS and GCFD have increased the quantity of available foods, the amount of fresh/nutritional foods, and the number of access points to secure emergency food. The Emergency Food Pantry Program provides clients with both non-perishable and perishable food items. Perishable items include bread, eggs, meat, milk, and fruits and vegetables. Additionally, the program provides an established link to easily distribute holiday food items.

Cleveland: Obesity in Ohio continues to be a widespread problem, spanning all age groups, from seniors to young children. Ohio's adult obesity rate of 30.1 percent is the 13th highest rate in the United States. The rate for children ages 10-17 is 17.4 percent, the 14th highest in the nation. Ohio also ranks high for obesity-related illnesses; it is 6th in the nation for diabetes and 15th for hypertension. The obesity problem is particularly acute for low-income people whose diets often are laden with carbohydrates, fat, and empty calories. In response, the Cleveland Foodbank has made the distribution of food with high nutritional value a top priority, with initiatives focusing on fresh fruits and vegetables as well as a Choosing Health Options Program (CHOP) that rates all distributed food products by nutritional content.

In Fiscal Year 2013 the Foodbank distributed nearly 12.5 million pounds of fresh fruits and vegetables, an increase of 800,000 pounds over the previous year. To accommodate the focus on produce, the Foodbank has broken ground on a new cooler/freezer that will double current capacity by 2014. In order to be ranked high on the CHOP nutrition scale, foods need to be low in sodium and fat, high in fiber and protein. Fresh fruits and vegetables are at the top of the scale. Anti-hunger programs know the ranking of the foods that they order, and are incentivized to order more nutritious food. Additionally, the Foodbank has hired a full time nutrition manager with the goal of improving nutrition for clients. Through classes conducted at the Foodbank, agency personnel are trained to become nutrition ambassadors within their respective communities. They learn the value of, and how to use, various kinds of produce in their hot meal programs, and learn how to provide cooking demonstrations for their clients. The Foodbank is in the process of hiring three nutrition educators with the goal of administering 175 nutrition lessons for children at Kids Café afterschool meal programs.

Dallas: Providing targeted food assistance to those adolescents who are at highest risk of hunger is challenging. The North Texas Food Bank has recently piloted two food pantry programs that approach this challenge through unconventional venues. One was tested at North Dallas High School, which serves a large number of homeless students. A survey of participants found that most needed both food and hygiene products, including infant care items. It also indicated which food items they preferred – information which will help the food bank stock pantry inventories more appropriate for these populations. The other food pantry program is a planned collaboration with the Dallas County Juvenile Department. With a grant from the county juror fund (which gives jurors the option to donate their daily stipends to youth services), a pantry will be established at the Dallas County Juvenile Justice Alternative Education Program campus. This pantry will serve an estimated 1,300 unduplicated students annually. The majority of the students are in the 8th and 9th grades (15-16 years old) and typically displaced and living in group homes or with relatives.

Denver: Denver Human Services began a “SNAP into Health” initiative two years ago through which a wide range of community partners have increased access to public assistance programs, health care, financial literacy, and nutrition in communities needing it the most. The initiative takes a holistic approach to serving the communities' needs in areas such as healthy living, health coverage, and financial self-sufficiency. The main goals of the program are to: increase enrollment of those eligible for food, medical, and cash assistance programs (such as SNAP, Medicare, and Medical Assistance); expedite the public assistance application process; provide education on access to healthy food, health care, and assistance programs; and provide additional resources to link clients to tools that promote long term self-sufficiency.

To attain these goals, Denver Human Services has implemented: a new mobile unit with Hunger Free Colorado to bring application assistance into communities; training for members of the community who help others with assistance program applications; partnerships with the community to provide information and services related to healthy living; and increased availability of healthy foods through outlets such as farmers' markets. The agency is providing nutrition education, financial coaching, access to healthy food, and other community services, and has implemented and strategically placed 10 kiosks throughout the community to increase enrollment in and accessibility to eligibility programs.

Des Moines: The Des Moines Area Religious Council (DMARC) has initiated a capital campaign that will result in relocation and expansion of the Food Pantry Network distribution center. Goals are to proactively strengthen and stabilize the emergency food system, enhance and equalize access to nutritionally sound foods, and improve community health in the Greater Des Moines/Polk County area. Through the acquisition and renovation of the property located at 1435 Mulberry Street near downtown Des Moines, this project will expand the capacity of the emergency food system and the DMARC Food Pantry Network to respond to the sustained high need for food assistance in central Iowa. In addition to housing DMARC administrative offices, the new facility will provide for up to four times the storage and food receiving and redistribution space as DMARC's present warehouse – 6,000 square feet compared to the current 1,500 square feet.

The first goal of the impact strategy is to increase and stabilize operational capacity and processes. Activities are: a) relocate to a facility that allows system-wide storage capacity to increase from a two-week supply to a 12-week supply of food inventory; b) reduce costs through expanded diversification of product sourcing and capacity to receive palletized deliveries; c) reduce food pick-up and delivery costs with a distribution center centrally located to food pantry network pantry sites; d) own rather than lease the facility; and e) maximize efficiencies and safety through use of adequate equipment for receiving, storing, staging, and loading food products. The second goal is to improve food access for consumers (to repurpose savings to increase food assistance). Activities are: a) increase food distribution from a four-day supply of food once per month to a five-day supply, which adds 350,000 meals and increases system capacity to provide 1.7 million meals annually; b) increase the number of pantry sites by 25 percent – from 13 to 16 sites; c) expand consumer access by 45 hours per week, providing 15,000 hours annually that participants will have to access pantries across the Food Pantry Network.

Los Angeles: The Food Bank's CalFresh Outreach Program increases participation in the CalFresh Program in several ways: It promotes CalFresh benefits as valuable and accessible food assistance, prescreens potential applicants before beginning the application process, completes the application with clients, scans all required documentation, submits the application packet to the Los Angeles County Department of Public Social Services (DPSS), follows up with county staff on a client's behalf, and works in partnership with DPSS to make program changes at the policy level. The Food Bank has an agreement with DPSS that provides access to status updates. From September 2012 through August 2013, the Food Bank distributed 24,471 promotional fliers, conducted 4,228 prescreening interviews, and completed 2,201 applications, with an application approval rate of 59 percent. It's estimated that approved applications to date are providing families and individuals with an average of \$5,130,469 of CalFresh benefits on a yearly basis (The average monthly CalFresh benefit is \$332 per household) and that these CalFresh benefits yield approximately 2,011,949 meals.

Louisville: In 2013, Dare to Care launched the Dare to Care "Community Kitchen" in partnership with Lift a Life Foundation. The Community Kitchen produces and delivers warm, balanced, and nutritious meals to afterschool sites that host the Dare to Care Kids Cafe program throughout Louisville. Prior to the Community Kitchen, each site was responsible for preparing meals. With this responsibility removed, additional sites can serve meals and current sites can serve meals on more evenings. After less than three full months of operation, the Community Kitchen is producing over 5,000 meals per week for the community, tripling the number of Kids Cafe meals being served to children living in food hardship.

Nashville: A School Pantry pilot program was opened in February 2013 at one location in Davidson County – John Early Middle School. The School Food Pantry program is designed to increase food access for families in need; it may have a permanent presence within a school or may operate through a mobile pantry distribution system through which food is brought to the school campus and distributed once a month. From February through June 30, 2013, over 8,500 pounds of food were distributed to families in need at this one school location. For the fall 2013 semester, seven more locations opened – at Glencliff, Maplewood, and Stratford High Schools; Dupont Hadley and McMurray Middle Schools; and Hermitage and Napier Elementary Schools.

Philadelphia: The SHARE Food Program has partnered with the Philadelphia Horticultural Society (Philadelphia Green) to match up food cupboards with local gardeners. In this program, food cupboards provide participants with locally-grown fresh produce. For many participants, the Gardening Project is their only source of fresh produce. Participants are able to purchase fresh produce for about 30 percent less than at their local grocery stores, and may participate in nutrition education classes conducted at the cupboards. To participate, an individual must do community service (a good deed) for another individual or organization.

The SHARE program has developed a farm with 9,000 square feet of raised beds, two hoop houses and a green house, and is showing people how to grow their own vegetables. Half of the food grown on the SHARE Nice Roots Farm is given to food cupboards, and 10 of the cupboards have started their own gardens with support from SHARE. In addition, Nutrition Education classes are provided at food cupboards. The SHARE Food Program has also partnered with the St. Christopher Foundation and developed the Farm to Families Program, which also provides fresh food to families. Another program, Sunday Suppers, provides suppers to families on Sunday evenings, along with programming around nutrition, parenting, budgeting, and family communication. Families receiving the Sunday meal also are given the food needed to prepare a meal during the week.

The SHARE program has partnered with Penn State Extension to provide quarterly nutrition training to participants. A six-week class works with families on purchasing affordable, healthy food and on ways to prepare food that their families will enjoy. In addition, the Greater Philadelphia Coalition Against Hunger created the Victory in Partnership (VIP) Project, a network through which local food pantries and soup kitchens within five regions of Philadelphia work together strategically to fight hunger in their communities. With funding from corporate sponsors and the William Penn Foundation, the VIP Project has provided more than 70 feeding programs with funding, kitchen equipment, training, and other tools to feed more people in need more efficiently. The Coalition has also created Green Light Pantries where people receive healthy canned fruits and vegetables and fresh produce.

Phoenix: There has been a steady increase in the number kids participating in programs designed to fight hunger, such as after-school mobile pantries and daily/weekend backpack programs. It started with the recognition that children suffering from food insecurity are more likely to struggle with obesity and perform at a lower level in school and/or have more behavioral problems. These issues create an uphill battle for these children to be successful later in life. Schools play an instrumental role in helping identify children in need. From there, food banks, the local Valley of the Sun United Way, the faith community, and smaller non-profits such as Kitchen on the Street and AZBrainFood jump in to help via: after-school and dinner meal programs (some expanding to offer hot meals) ; fresh food distributions via mobile pantries; backpack programs (Kids Cafes, weekend backpacks, etc.); and non-perishable food distributions via schools, Boys & Girls Clubs, etc.

Saint Paul: Second Harvest Heartland's Food Rescue Program diverts food that would otherwise be thrown away to people in need. On a daily basis, the Food Rescue Program's professional drivers collect produce, dairy, deli, meat, bakery and grocery items from more than 275 retail grocers. The donated items are distributed to food shelves, soup kitchens, and shelters throughout Second Harvest Heartland's 59-county service area. In the last fiscal year, more than 18 million pounds of nutritious food was distributed – an increase of 55 percent over last year.

Second Harvest Heartland initiatives also include: 1) an Apple Gleaning program through which Second Harvest has worked with generous orchard owners and volunteers to glean remaining apples from trees and ultimately distribute more than 170 tons of them; 2) a Meals for Minds program, supported by Target, which is designed to bring food to students and families in need by regularly setting up temporary food shelves at schools where the need is great; last year, the program, which works with six elementary schools in Minneapolis and Saint Paul, distributed more than 53,665 meals to families in need; 3) a Harvest to Home program which gathers and distributes crops that would otherwise go unharvested; last year, more than 4.3 million pounds of surplus produce were collected, up from 2.3 million pounds the previous year; and 4) a Pallet of the Month Club which features donations of first-run, newly-produced product on a pallet-per-month basis from nine local food manufacturers, translating into 390,000 meals a year.

Hunger-Free Minnesota's Great Corn Rescue works with partners from the agriculture industry, food industry, and Second Harvest Heartland to implement a just-in-time harvest-through-delivery system that ensures excess sweet corn does not go to waste. The corn is harvested, cooled, packed, and shipped in trucks (each carrying nearly 40,000 pounds of corn) to food banks that have pre-ordered it through the Feeding America network. The corn deliveries began the week of September 15 and continued into October. While food banks work to increase their capacity to handle and distribute fresh produce, the sophisticated logistics of managing a huge volume of surplus food is beyond the resources of a single organization. The September corn rescue included months of logistical planning following a 2012 pilot, pre-orders for corn from food banks, hydro-cooling processes, donated harvesting, delivery to repacking, volunteer labor and management of final shipments.

Salt Lake City: Managed by the Utah Food Bank, the Mobile Pantry Program is an organized method of direct distribution of food to clients when traditional food pantries are unavailable or have more clients than capacity. The program expands food capacity, removes barriers that prevent access to unserved and underserved areas, and adds flexibility in delivery of food and grocery products while maintaining an atmosphere of dignity. It will assist in reducing the impact on low-income Utahns in need of emergency food assistance if their closest food pantry is forced to shorten hours or close due to the lack of federal

funding. The program can provide a transportable food pantry to any area of the state, targeting unserved and underserved areas ranging from urban areas with high levels of poverty to rural areas which have no permanent food pantry available.

Many food pantries are a part of larger organizations, such as Community Action Programs, and with the slashing of federal funds to these agencies, their food pantries are the first to be closed. Because of these closures, the Mobile Pantry Program will increase the number of sites and amount of emergency food provided in these agencies' service areas – sometimes even on the agencies' parking lots. While the double hit of decreasing SNAP benefits and federal funding to food pantries means that the Mobile Pantry Program must increase services, the amount of assistance provided by this program, however effective and necessary, is not enough to make up for the loss of fully functioning food pantries.

San Antonio: The San Antonio Food Bank and the Goldsbury Foundation are working together through a program entitled Growing Healthy Children to fight childhood hunger while exploring new ways to effectively improve and sustain healthy lifestyles among children. On a monthly basis, the program will provide 50 pounds of fresh nutritious produce and program services to families with children enrolled in nine unique local schools. The goal is to influence lifestyles by teaching children and families how to make healthy choices, how to incorporate a daily wellness routine, and how to improve the overall health of the family unit. In addition to the food distribution, the schools in the program receive outreach materials such as informational flyers and recipes.

San Francisco: Spanning almost every neighborhood in the City, the San Francisco Food Bank Pantry Program is an extensive and innovative network of 200 weekly grocery pantries that help feed 30,000 households. Through partnerships with community-based organizations such as non-profits, schools, and churches, the Food Bank distributed nearly 30 of the 40 million pounds of food it distributed last year through its pantry network. Over 70 percent of the food is fresh produce, arranged farmers' market style every week at participating community-based organizations. Some are open to the public and some target specific populations. The Food Bank also trains CBOs to provide nutrition education and SNAP outreach/application assistance for these vulnerable populations. The San Francisco Food Bank distributes significantly more food per person in poverty annually than any food bank in the country: almost 400 pounds per person. The national average for food banks is less than 100 pounds. The Food Bank recently received national recognition for its innovative pantries in low-income public schools, where busy families can access healthy foods while picking up or dropping off their children.

Also, in the past fiscal year, the Food Bank implemented a special pantry menu for distributions held in Single Room Occupancy (SRO) residences housing the formerly homeless which includes food that is easily prepared without full access to cooking facilities. The Food Bank operates several other innovative programs, including the successful Morning Snack Program through which it offers healthy fresh produce and shelf-stable snacks to low-income schools to bridge the challenging gap between breakfast and lunch. It also operates a critical home-delivered grocery program for low-income homebound older adults. This program is the first of its type in the city, meeting the special needs of homebound seniors who cannot qualify for home-delivered meals but also cannot stand in line to get food at a food pantry. In collaboration with the local SNAP office, the Food Bank performs SNAP outreach to help increase SNAP usage in San Francisco in innovative ways – for example, “SNAP in a Day” events where eligible participants can be issued their EBT card within the day.

Santa Barbara: The Foodbank of Santa Barbara County distributes food throughout its more than 300 member agencies. Food is also directly distributed to over 20 targeted neighborhoods across the County through the Mobile Food Program and Healthy School Pantries. Emergency food, along with nutrition education and CalFresh (SNAP) outreach, is provided at these sites. Clients receive bags of fresh produce, bread, canned foods, and ERAP (USDA) commodities. The Foodbank believes that these programs are on the front lines of the fight against hunger, giving targeted food and information to those most in need of it.

Washington, DC: This fall, the Capital Area Food Bank is introducing Mobile Marketplace, a targeted food distribution initiative serving communities within the Greater Washington region where food insecurity rates are highest and households lack access to healthy foods. Mobile Marketplaces are monthly “farmers’ market” inspired, open-air distributions of fresh fruits and vegetables to families in high-need communities. Building on the achievements of similar programs bringing free produce to urban food deserts in New York and Chicago, Mobile Marketplaces will be: 1) High impact, providing a high volume of fresh produce to kids, seniors, veterans and families in need. Each monthly market can deliver 9,000 pounds of fresh produce for 300 households, or the equivalent of 7,500 meals. 2) Nutritious, with each marketplace providing families with 30 pounds of seasonal fruits and vegetables to help meet household nutritional needs. Markets encourage healthy food choices by offering recipes and demonstrations on how to prepare simple, healthy meals at home which feature market produce. 3) Needs-based, with veterans, families with children, and seniors that meet low-income guidelines qualifying for free fresh produce. The first pilot in Prince George’s County Maryland is located in a community where 24 percent of households are food insecure, 67 percent of kids qualify for free school lunch, and 35 percent of households live in poverty. 4) Collaborative, with Marketplaces powered by 20 volunteers and hosted in partnership with several local community service providers such as the Health Department to provide on-site wrap-around services.

Impact of SNAP Cuts

The House of Representatives has passed legislation that would cut the Supplemental Nutrition Assistance Program by at least \$39 billion over 10 years. The Congressional Budget Office estimates the bill would deny SNAP benefits to approximately 3.8 million low-income people in 2014 and to an average of nearly three million people each year over the coming decade. This would come on top of an across-the-board cut in SNAP benefits implemented in November which was estimated to reduce benefits to less than \$1.40 per person per meal.

The city officials in the survey were asked to describe the impact that this cut, if enacted, would have in their cities, including, if possible, their estimate of SNAP participants who would be affected. Basically, they discussed the fact that this will reduce the availability of food to vulnerable people, including children and the elderly, many of whom already don’t have enough to eat. They said that demand will be even greater on other food assistance programs and that generally those programs already have insufficient resources and will not be able to respond to increased demand. Several discussed the negative impact that reduced SNAP benefits will have on the local economy. (Note that several cities included in their discussions the impact of the SNAP benefit cut which was implemented in November, as well as the proposed SNAP cut. Because their survey responses were submitted before the November cut took effect, both cuts were viewed prospectively by many of the officials in these cities.)

Asheville: SNAP is the nation's foremost tool against hunger and hardship, particularly during recessions and periods of high unemployment. Above and beyond the negative effect on individuals, cuts of this magnitude would have concentrated negative effects in population centers, where people traditionally go to seek out jobs and support programs that are unavailable in rural areas. So not only would the cuts affect the more than 42,000 individuals in 21,000 households currently receiving food assistance in Buncombe County, they would cause more folks in need and in poverty to come to Asheville in search of assistance. We also know that any cuts to the federal SNAP program will have a direct and immediate impact on our partner emergency food organizations (pantries, shelters, and soup kitchens). During recent delays in the North Carolina benefits system, our entire 16-county network experienced a sudden increase in new clients, with partners in the Asheville area reporting a 35 percent or greater increase within the first month of delays. They took this burden without having prepared or garnered support for such an influx, but they are not prepared for the influx that would come with substantial cuts to SNAP. Our emergency food partners are in need of resources, too, and there is no way that our network could fill that gap without significant increases in funding and staffing/volunteers.

Boston: In Massachusetts, 13 percent of our population relies on SNAP to have enough to eat and many supplement these benefits with food from the Greater Boston Food Bank and its member agencies. With cuts of \$39 billion at the federal level, the 889,000 people who rely on hunger relief agencies will need even more support. This means the demand for nutritious food will increase. We will have to work harder to increase our food acquisition and distribution.

Charleston: Like many food banks across the country, one of the biggest challenges the Lowcountry Food Bank (LCFB) will face in the coming year will be cuts to the Supplemental Nutrition Assistance Program (SNAP). Deficit reduction is vital to our country's long-term economic prosperity and security, but that doesn't mean it can be undertaken without regard to the reality of hunger across our nation. Some people point to the significant work that food banks do to suggest that hunger is best solved by charities operating at the community level. Speaking from the frontlines, the LCFB is among the first to say that charities cannot do it alone. SNAP provides crucial nutritional support to literally thousands of low-income Charlestonians who would experience significant hunger and financial hardship without this safety net. According to a July 2013 USDA report, in South Carolina's Congressional District 1 (which includes the City of Charleston), almost 60 percent of households receiving SNAP benefits include a child. More than 50 percent include one employed family member, and 28.5 percent include two employed family members. SNAP is not a long-term crutch: Half of all new participants transition out of the program within nine months. SNAP also serves as an economic stimulus: As SNAP benefits are redeemed, this spending on food boosts the local economy. The USDA calculates that every \$5 in new SNAP benefits generates \$9 in total community spending. Hunger is a national problem and it requires a national response.

Charlotte: A greater number of people will be forced to get by on less food. Food costs are up eight to 15 percent over the same time last year. Already, 40 percent of the families in our area must choose between paying rent or buying food. Every cut in benefits pushes people in need closer to the brink of poverty. Not having access to enough nutritious food creates a tragic legacy for children. Without good food to grow strong bodies and minds, children who experience hunger are more likely to fall victim to illness and broken bones. They are more likely to have learning disabilities and behavioral problems, making performance in the classroom even more difficult, and causing many at-risk children to drop out of school before graduation. Hungry children are likely to become hungry adults. On the other end of the

age spectrum, seniors who do not have access to enough nutritious food are less likely to be able to continue living independently and may be forced to move to institutionalized care.

Chicago: If enacted, it is highly likely that affected SNAP participants would become dependent, or more dependent, on the emergency food network to sustain their food needs.

Cleveland: There is no way that the charitable food system can make up for cuts of this magnitude. Feeding America calculates that these cuts would be comparable to the entire network of more than 200 food banks across the country – and the thousands of pantries and programs to which they supply food – shutting down completely for a year. Our food bank and programs would be severely strained and more people would go hungry. Due to Ohio’s rejection of the Able-Bodied Adults without Dependents waiver, our city will already see an influx of childless adults who are not currently employed in our programs. Also, by eliminating categorical eligibility, low-income working families and low-income seniors in our area would lose SNAP due to having gross income or assets modestly above the SNAP income requirement. Hunger in our community would increase well beyond our ability to address it.

Dallas: The Texas Food Bank Network estimates that, over the next decade, the proposed cuts would force over 18,000 Dallas County residents out of the program and eliminate 51.3 million meals provided with SNAP assistance. This would also represent a \$117 million loss to the local retail grocery sector.

Denver: Thousands of Denver families, children, and seniors who rely on food and nutrition programs would be impacted by SNAP cuts. In addition to SNAP, there are multi-faceted resources at risk that support the fight against hunger such as: child nutrition programs, including: school lunch, school breakfast, after-school meals and snacks, and the Summer Food Service Program; WIC (the Special Supplemental Nutrition Program for Women, Infants and Children); Meals on Wheels and older adult nutrition meal sites; and The Emergency Food Assistance Program (TEFAP). While food banks will continue to receive food products already ordered, new food purchases cannot be placed until funds are restored. The SNAP cuts would continue to have negative impacts on Coloradoans already trying hard to make ends meet, with agencies and programs forced to make cuts due to strained state and local budgets.

Des Moines: The primary food pantry network of 13 pantry sites assists 33,000 individuals annually; about half are under the age of 25 years. In Des Moines, 85 percent of the families receiving food assistance are eligible for SNAP benefits, with 67 percent currently already enrolled in the program. The proposed cuts to SNAP would create an incredible burden and emergency food crisis in central Iowa, not only among low-income families and individuals, but also among the organizations striving to meet already-unprecedented emergency food needs. While the private continuum of care agencies and private sector funding in Greater Des Moines will continue to address hunger and food insecurity, these resources will fall woefully short of meeting future needs if SNAP benefits are reduced as proposed. We caution that the proposed cuts will directly impact the most vulnerable of our neighbors and citizens, those who are young, disabled, and elderly. SNAP is an essential part of the emergency food system in central Iowa, and we urge full consideration of the potential short-term and long-term implications of reducing SNAP benefits.

Los Angeles: While we don’t have numbers to predict the impact, we know that both cuts will have a drastically negative impact on Los Angeles. In an urban setting with higher-than-average living costs, the food budget is frequently the first to get cut as a family struggles to make ends meet. As it stands, SNAP

is not designed to provide enough food for the whole month, but we find that many families rely on it extensively. Even though many SNAP recipients are employed, they are often vastly underemployed, or working at minimum wage jobs that do not pay enough to make ends meet. Charities such as food banks and food pantries will not be able to absorb the resulting increase in need.

Nashville: We are preparing for a potential increase in client demand beginning in November. Please note: This is a permanent benefit cut that was scheduled to occur under stimulus legislation passed in 2009. While USDA is working with states to inform SNAP households about the scheduled cuts, many SNAP participants are unaware that the cuts are coming. Even well-informed participants may struggle to absorb the cuts in their household budget. As a result, our network should prepare for a potential increase in client demand beginning in November and help prepare clients and agencies. We cannot predict the exact impact that the SNAP cuts will have on food bank demand. We may see an immediate spike in need as SNAP participants turn to food banks to cope with unexpected benefit shortfalls. Alternately, the impact may build slowly over the coming months as SNAP households first try to cope in other ways before turning to food banks for assistance. With the scheduled SNAP cut quickly approaching, we are focused on two strategies: Working with our partner agencies to communicate the cuts to affected clients, and raising awareness about the cuts and their impact on clients and food banks and the need to protect SNAP from further cuts.

Philadelphia: The more immediate problem is effective November 1, when 472,196 Philadelphians that currently receive SNAP benefits will lose about \$20 a month in those benefits. This will put an additional burden on the agencies that provide food assistance at a time when there is already a strain on the emergency food providers. There currently is not enough food to make sure that everyone in our city has enough food to eat, and the challenge looks daunting at best. Over 110 agencies with food cupboards were interviewed for this survey and they are all stretched to the maximum. They currently take money out of their pockets or food out of their cupboards to help fill the gap, but they are struggling as the economy continues to stay the same. The community food agencies and organizations in Philadelphia are committed to doing everything possible to alleviate hunger in our community but, at the end of the day, it takes funding, food, and education to make that possible.

Phoenix: SNAP saw an automatic cut when temporary ARRA funding expired on November 1. For Arizona, this cut is estimated to be: one person: \$11; two people: \$20; three people: \$29; four people: \$36. If the House version of the Farm Bill were to pass, an estimated 125,000 Arizonans would be removed from SNAP altogether (with an estimated 40-50 percent of them living in Phoenix). Both of these actions will increase demand for food bank services to fill these gaps, yet food banks are not expected to see any increase in local or federal government funding, commodity distributions, or private donations. In all likelihood, food banks will have to further ration distributions by limiting the amount of food a household receives in order to keep pace with the increased demand. Private charity simply cannot make up the difference.

Providence: If the House proposal to cut SNAP benefits by \$40 billion over 10 years is enacted, it is expected that 14,000 people will be terminated from the program statewide, including approximately 10,000 in Providence. The emergency food programs in Providence are at capacity and will not be able to adequately serve this number of new people.

Saint Paul: Over 536,000 people in Minnesota will see a cut in their food assistance benefits beginning November 1, when a temporary boost to the Supplemental Nutrition Assistance Program (SNAP, formerly known as food stamps) expires. This federal budget cut means a \$55 million loss in food spending in Minnesota over the next year. Consequently, the federal budget just transfers the costs and burden of hunger to local governments and local charitable organizations, including local food shelves. Most critical, this federal budget further burdens low-income citizens who are already food-insecure.

Salt Lake City: In our area, families are typically large and incomes are typically low. Until the recession started in 2009, many families did not take advantage of the SNAP program. Since 2006, SNAP participation has dramatically increased, by 124 percent. Of the current 244,726 Utahans participating in SNAP, most receive \$20 to \$24 each month. Without the responsiveness of the increase in SNAP benefits during the recession, people in need and the State's economy would have been even more financially insecure. By decreasing a significant amount of funding from this efficient and effective program, those in greatest need will have to further struggle each day to receive their next meal. Another aspect to consider is that every \$5 of SNAP spent generated \$9 in economic activity (<http://www.fns.usda.gov/e-updates/stimulate-your-local-economy-increase-snap-participation>).

San Antonio: A cut of \$49 billion over 10 years will have a significant impact on our SNAP families. Currently, 33 percent of our clients are on SNAP. Weekly, we serve 58,000 individuals. Therefore, 19,140 individuals will be affected by these cuts on a weekly basis. This will mean that food banks and communities will have to find a way to make up this difference in food for these families.

San Francisco: Currently, about 48,000 people rely on SNAP benefits in San Francisco. Most of these families will see their benefits decrease as a result of the law. Any reduction in federal funding or food has a direct impact on the Food Bank and other charitable organizations because it increases demand for their services. These cuts to SNAP will take food from the refrigerators and kitchen tables of vulnerable low-income families struggling to get back on their feet. This will be devastating to San Francisco, and charities like the Food Bank cannot make up the difference.

Santa Barbara: There are 36,000 people in Santa Barbara County who are eligible for CalFresh Benefits. Although city-level information is not readily available, using the percentage of low-income in the City of Santa Barbara over the County as a whole, we can estimate 17 percent of eligible individuals reside in the City of Santa Barbara. Using this calculation, approximately 6,120 individuals will be affected by cuts. With the increase in poverty rates, this number may be even higher, as those who might once have been eligible for SNAP assistance fall just outside the new eligibility threshold.

Trenton: Cuts to SNAP at the level passed by the House would have a severe impact on the ability of emergency food providers in the City to close the food and nutrition gap. Trenton's poverty numbers are especially grim: 26.8 percent of all residents and 36.2 percent of children live below the federal poverty level, and 12.4 percent have incomes below 50 percent of the poverty level. Substantial cuts in SNAP benefits or barriers to participation will only serve to increase the number of residents who are food insecure. It is unrealistic to assume that the charity network could replace the amount of food lost. It is fair to estimate that up to 20 percent of current SNAP participants could lose benefits or see their benefits significantly reduced.

Washington, DC: More than one in five DC residents will be affected. The DC Fiscal Policy Institute estimates that 144,000 DC residents will see a decrease in aid.

Outlook for Next Year

Based on current projections of economic conditions and unemployment for their cities, officials in 96 percent of the survey cities expect requests for emergency food assistance to increase over the next year. Fifty-five percent (12) of the cities expect that increase to be substantial, and 41 percent (nine) expect it to be moderate. Dallas expects requests to remain at the same level. No city expects requests for emergency food assistance to decrease over the next year.

Based on the current state of public and private agency budgets, 72 percent (16) of the cities expect resources to provide emergency food assistance will decrease over the next year, with 45 percent (10) of the cities expecting resources to decrease moderately and 27 percent (six) expecting them to decrease substantially. Cleveland and Saint Paul expect these resources to continue at about the same level. Los Angeles and Louisville expect a moderate increase; Washington, DC expects a substantial increase.

The cities were asked to identify what they expect will be the biggest challenge to addressing hunger in their area in the coming year. Most expressed concern with the impact of scheduled and proposed cuts in SNAP benefits and the inability of food assistance programs to meet the increased demand. They also voiced concern about the negative impact of cuts in U.S. Department of Agriculture commodity distribution and other food programs.

Among the challenges cited:

- In **Boston**, the potential loss of food donations and any changes in government funding of food purchases;
- In **Charlotte**, continuing to have enough nutritious food to meet the need in our area;
- In **Chicago**, maintaining and/or increasing the resources necessary to meet the increased demand for emergency food;
- In **Dallas**, the potential increase in demand for charitable assistance that could result from scheduled and proposed SNAP cuts;
- In **Louisville**, procuring more donated food and soliciting the funds needed to purchase more food to meet the continued high level of need;
- In **Nashville**, trying to fill the gap caused by the cuts in SNAP benefits;
- In **Philadelphia**, having enough resources (money and donations) to meet the ever-increasing demand for food assistance;
- In **San Antonio**, meeting the needs of food insecure individuals and families while not rationing away nutrition – simply put, sourcing enough food to adequately nourish the community’
- In **Santa Barbara**, a decrease in access to Federal Emergency Food Assistance foods, an increase in purchased food costs, and a decrease in access to donated products;
- In **Trenton**, no lessening of demand for food and hunger prevention assistance, but cuts to SNAP and other federally-funded food and nutrition programs.

Other cities described the following challenges:

Asheville: Potential state and federal cuts to public safety net programs will have a very direct impact on the food bank network of emergency food organizations. Our partner emergency food organizations do not have enough support and funding to fill the gap that would be created by any significant cuts to the

public programs. Educating legislators and citizens about the reality of hunger in our region is more important than ever.

Charleston: Like many food banks across the country, one of the biggest challenges the Lowcountry Food Bank (LCFB) will face in the coming year will be cuts to the Supplemental Nutrition Assistance Program (SNAP). Deficit reduction is vital to our country's long-term economic prosperity and security, but that doesn't mean it can be undertaken without regard to the reality of hunger across our nation. Some people point to the significant work that food banks do to suggest that hunger is best solved by charities operating at the community level. Speaking from the frontlines, the LCFB is among the first to say that charities cannot do it alone. SNAP provides crucial nutritional support to literally thousands of low-income Charlestonians who would experience significant hunger and financial hardship without this safety net. According to a July 2013 USDA report, in South Carolina's Congressional District 1 (which includes the City of Charleston), almost 60 percent of households receiving SNAP benefits include a child. More than 50 percent include one employed family member and 28.5 percent include two employed family members. SNAP is not a long-term crutch: Half of all new participants transition out of the program within nine months. SNAP also serves as an economic stimulus: As SNAP benefits are redeemed, this spending on food boosts the local economy. The USDA calculates that every \$5 in new SNAP benefits generates \$9 in total community spending. Hunger is a national problem and it requires a national solution – one that starts with a strong federal commitment to safety net programs like SNAP.

Cleveland: The biggest challenge in addressing hunger in the coming year is the looming cuts to SNAP. Starting November 1, SNAP benefits will be cut for every household, at approximately \$10 per person per month. These cuts are in response to the expiration of the temporary boost to SNAP that was introduced by the American Recovery and Reinvestment Act of 2009. In addition, on October 1, Ohio rejected an extension of the work requirement waiver for “able-bodied adults without dependents” to only three months out of every 36-month period, unless the person is able to secure employment for 80 hours per month. This will cause an influx of clients to our pantry and hot meal programs throughout the community, since thousands of people will no longer be eligible for SNAP benefits. The Farm Bill, which authorizes SNAP benefits, will also bring cuts to the program. The Senate version proposes \$4 billion in cuts and the House version proposes \$39 billion. A conference committee has been appointed to resolve these differences, but even in the best case there will be millions of Americans affected.

Denver: Federal cuts to the SNAP benefits for clients will significantly impact our service delivery. Other budget limitations threaten cutting edge practices and strategies that support long-term self-sufficiency and healthy outcomes for families such as: outreach strategies, nutrition education, free/reduced lunch programs, and other critical tools.

Des Moines: First challenge: Proposed cuts to the Supplemental Nutrition Assistance Program (SNAP), if implemented. Second challenge: Other cuts to federal, state and city budgets that result in reduced public benefits assistance and increased need. While the DMARC food pantry network receives less than 2 percent of revenues from public sources, cuts to other publicly-funded human service programs result in higher and more frequent usage of the local emergency food system. This in turn increases costs and stretches limited and finite resources to respond to the growing need. Additionally, ongoing workforce cutbacks by major employers are resulting in more people needing emergency food assistance. Third challenge: Convincingly conveying to funders, community leaders, and policy makers the need for

meaningful and funded policy change that provides a community-wide and systemic approach to addressing hunger in central Iowa.

Los Angeles: Employment at a living wage is the best anti-hunger/anti-poverty program there is, but we continue to experience high unemployment (8.9 percent) in Los Angeles County. USDA commodities through the TEFAP program decreased over the past year, and we expect will continue to decrease over the next year. In addition to this, there have been many proposals to cut the CalFresh/SNAP program (formerly called Food Stamps). Our primary challenges are sourcing the food and funding to replace these commodities and the assistance provided by these programs, and meeting the growing need in Los Angeles County.

Phoenix: Cuts to TEFAP (federal commodities) and/or SNAP, depending on the outcome of the stalled Farm Bill, represent the biggest challenge. As it is, SNAP saw an automatic cut when temporary Recovery Act funding expired on November 1. For example, this is estimated to be a \$36 across-the-board cut for a household of four. If the House version of the Farm Bill were to pass, an estimated 125,000 Arizonans would be removed from SNAP altogether (with an estimated 40-50 percent of them living in Phoenix). This would increase demand for food bank services to fill these gaps, and, while current State budget funding for food banks is not anticipated to be cut, it is highly unlikely it would increase either. One bright spot is the 50 percent reduction of the City of Phoenix Food Tax beginning January 1, 2014.

Providence: The biggest challenge is having enough food. We have a strong distribution network and a way to get food to people. Both the Food Bank and our member agencies are finding that resources for food are getting smaller. For example, the cuts to ESFP and TEFAP have and will continue to impact the amount of food we can get out.

Saint Paul: The biggest challenge continues to be addressing the needs of hunger during these economic times. According to Feeding America, 11.2 percent of Minnesota households are food insecure, and approximately 12.6 percent of Ramsey County households (in which Saint Paul is the major city) are food insecure. The challenge will become greater with the SNAP cuts.

Salt Lake City: The lack of federal funding for emergency food pantries may force many of the food pantries in our area to either lessen hours or close down completely. The reduction of SNAP dollars per person will dramatically increase the need at our food pantries, as many of the current clients receive SNAP and still need the pantry to subsidize their food needs throughout the month.

San Francisco: The biggest challenge will be sustaining food distributions in response to the huge continued growing demand for food assistance in San Francisco at the same time that funding for safety net programs softens. Since the recession is perceived to be over, many foundations are no longer focused on funding crucial safety net programs such as the Food Bank. This was seen in a significant drop of funding from foundations to the Food Bank last fiscal year. Compounding this, San Francisco County stopped receiving a direct allocation of the federal Emergency Food and Shelter Program funds from FEMA that has been a regular and critical source of support for emergency food assistance and shelter programs over the years. As a result of all of these funding shortfalls, the Food Bank has had to make cuts to the menu of products sent out to the more than 30,000 households served weekly through the pantry network, specifically in the much-needed protein items that we were purchasing. Since the beginning of the recession, the San Francisco Food Bank has more than doubled the number of cumulative households

served annually through its network of 200 weekly community food pantries, stretching the pantry network to unsustainable levels. Meanwhile, requests for food assistance continue to increase as San Francisco residents wrestle with the aftereffects of a tumultuous economy. The rising cost of food, and cost of living in general, paired with cuts to public food assistance and donor and partner fatigue, jeopardize the sustainability of the Food Bank's response to hunger. Rising costs of living not only impact our participants: the Food Bank has seen a number of community partners forced to close their doors and end their food programming due to the lack of sufficient funding to keep up with rising rents. This further burdens the network of other community partners that is already stretched beyond capacity.

In a measure to address the sustainability issue for the Food Bank and the pantry network, the Food Bank has started implementing a citywide Pantry Enrollment System (PES), which limits households to attending one pantry per week. It allows participating pantries to reduce and better manage caseload, allows new households to access previously full pantries, and provides more food to the average household served. Since implementing PES, participating pantries have seen a 35 percent increase in new clients accessing Food Bank services. Due to high demand, however, the Food Bank is now at capacity at many of its food pantry sites due to this increase of new participants, and waiting lists exist for numerous pantries throughout the city.

A growing problem is the number of impoverished older adults living in the County, many of whom receive SSI and so are categorically ineligible to receive SNAP benefits. The Food Bank manages the federal Commodity Supplement Food Program (CSFP) distribution for low-income older adults in San Francisco. Our CSFP caseload was reduced in April 2013 due to federal costs exceeding revenue, but the waiting list continues to grow. At the same time, growing numbers of frail and homebound adults are finding themselves unable to attend traditional food pantries. Delivering groceries to their homes is an economical way to keep them healthy and aging in place, but the Food Bank struggles to raise adequate public and private funding to deliver groceries to more than a small percentage of eligible individuals.

Washington, DC: Our biggest challenge is how to position ourselves to contribute to the overall health and wellness of those in need in Greater Washington. We seek to reduce the amount of sugar and salt content in our inventory. In addition, ensuring we have sufficient transportation to provide food to those in need is a challenge.

Homelessness

Local planning organizations or "Continuums of Care" in 3,000 cities and counties across the nation conduct one-night counts of their sheltered and unsheltered homeless populations, which are reported to the U.S. Department of Housing and Urban Development each year. Based on this Point-in-Time estimate of persons homeless on a single night in January 2013, HUD reports that the 610,042 people found to be homeless that night represented a 6.1 percent reduction from January 2010, which was the year the federal government established "Opening Doors," a multi-agency strategic plan to end homelessness. Sixty-four percent of these homeless persons were individuals; 36 percent were in family households. Sixty-five percent of those experiencing homelessness were living in emergency shelters or transitional housing programs; 35 percent were living in unsheltered locations such as under bridges, in cars, or in abandoned buildings.

The January 2013 count found 57,849 homeless veterans, which represented a 24.2 percent drop from January 2010. Chronic homelessness among individuals declined by 15.7 percent during this period, homelessness among individuals declined nearly 4.9 percent, and homelessness among persons in family households declined by 8.2 percent.

The decline in veteran homelessness is largely attributed to the close collaboration between HUD and the Department of Veterans Affairs on a joint [HUD-VA Supportive Housing Program \(HUD-VASH\)](#). Since 2008, HUD reports, a total of 58,250 rental vouchers have been awarded and 43,371 formerly homeless veterans are currently in homes of their own because of this program. HUD says the decline in chronic homelessness is partially attributable to "a long-standing push to develop more permanent supportive housing opportunities for those struggling with long-term homelessness who otherwise continually cycle from shelters to the streets."

In its *State of Homelessness in America 2013*, The National Alliance to End Homelessness uses HUD's January 2012 Point-in-Time data (633,782 found homeless that year) to illustrate proportions of major homeless subpopulations: 46.5 percent non-chronic individuals, 37.8 percent people in families, and 15.8 percent chronic individuals. The report shows that, while most experiencing homelessness are sheltered in emergency shelters or transitional housing, 38 percent of those homeless in January 2012 were living unsheltered on the street or "other places not meant for human habitation."

This section of the report provides information on the numbers and types of people experiencing homelessness in the Task Force survey cities and on the availability of emergency shelter across these cities between September 1, 2012 and August 31, 2013. It also includes brief descriptions of exemplary programs and efforts underway in the cities which respond to the problems of homelessness, and concludes with city officials' outlook on problems of homelessness in the coming year.

Extent of Homelessness

Over the past year, the total number of persons experiencing homelessness increased in 52 percent (13) of the survey cities responding, decreased in 36 percent (nine) of the cities; and stayed the same in 12 percent (three) of the cities – Phoenix, San Francisco, and Santa Barbara. Across these cities, there was an overall increase of 3 percent in the total number of persons experiencing homelessness. The change ranged from a

26 percent increase in Los Angeles and a 24 percent increase in Charleston to a 14 percent decrease in Dallas and Salt Lake City and a 20 percent decrease in Des Moines.

Homelessness among Families

The survey cities reported that, over the past year, the number of homeless families increased in 64 percent (16) of the cities, decreased in 28 percent (seven) of the cities, and stayed the same in Phoenix and Santa Barbara. Across the cities, there was an overall increase of 4 percent in the total number of families experiencing homelessness. The change ranged from an increase of 33 percent in Trenton, 29 percent in Charleston, and 25 percent in Nashville, to a 20 percent decline in Salt Lake City, a 25 percent decline in Norfolk, and a 35 percent decline in Dallas.

Asked to identify the three main causes of homelessness among families with children, 68 percent (17) of the cities cited poverty, 60 percent (15) cited lack of affordable housing, and 56 percent (14) cited unemployment. Next came eviction, cited by 32 percent (eight) of the cities; family disputes, by 28 percent (seven); and domestic violence and low-paying job, each by 12 percent (three).

Homelessness among Unaccompanied Individuals

The survey cities reported that, over the past year, the number of unaccompanied homeless individuals increased in 54 percent (13) of the responding cities, decreased in 29 percent (seven) of the cities, and stayed the same in 17 percent (four). Across the cities, there was an overall increase of 4 percent in the total number of unaccompanied individuals experiencing homelessness. The change ranged from a 40 percent increase in Los Angeles and a 24 percent increase in Dallas to a 17.5 percent decline in Charlotte and a 24 percent decline in Des Moines.

When asked to identify the three main causes of homelessness among unaccompanied individuals, 60 percent (15) of the cities cited unemployment, 48 percent (12) cited both the lack of affordable housing and substance abuse and the lack of needed services, 44 percent (12) cited mental illness and the lack of needed services, and 40 percent (10) cited poverty. Low-paying jobs, eviction, and family disputes were each cited by 16 percent (four) of the cities.

Number of Homeless Persons

The survey cities were asked to report on the number of persons who were homeless on an average night over the past year. In most cases, cities used the data from the annual Point-in-Time count they are required to submit to HUD each year. The following table shows the total of the counts provided by 23 survey cities.

Homeless Persons on Average Night in 23 Survey Cities

Household Type	On the Streets	In Emergency Shelter	In Transitional Housing
Single Adults	29,994	18,393	10,785
Persons in Families	1,529	11,237	13,208
Unaccompanied Youths	943	292	438

The cities were asked to report the number of unduplicated homeless persons in emergency shelters and transitional housing over the past year – also data they are required to report to HUD. The following table shows the totals of the counts provided by 24 of the survey cities.

Unduplicated Number of Homeless Persons over Past Year in 24 Survey Cities

Household Type	In Emergency Shelter	In Transitional Housing
Single Adults	87,773	27,012
Persons in Families	31,118	25,057
Unaccompanied Youths	2,184	198

Across the 21 survey cities able to respond to a question on permanent supportive housing, a total of 7,680 unaccompanied individuals and 2,371 persons in families entered permanent supportive housing over the past year.

Characteristics of Homeless Adults

The survey cities were asked to provide information on the characteristics of homeless adults in their cities. The cities reported that, on average:

- 30 percent of homeless adults were severely mentally ill,
- 19 percent were employed,
- 17 percent were physically disabled,
- 16 percent were victims of domestic violence,
- 13 percent were veterans, and
- 3 percent were HIV Positive.

Because these are not mutually exclusive characteristics, the same person may appear in multiple categories.

Emergency Shelter and Other Housing for Homeless Persons

The survey cities provided information on the number of beds available for homeless persons in emergency shelters, transitional housing, and permanent supportive housing. This is also information which cities provide to HUD as part of their Continuum of Care application. All 25 survey cities responded to the question. The following table shows totals of the counts provided.

Housing Type	Total Number of Beds	Number of HMIS Participating Beds	Number of New Beds Added during Past year
Emergency Shelter	37,602	25,836	1,517
Transitional Housing	31,868	23,236	551
Permanent Supportive Housing	69,623	51,495	5,284

Twenty-one of the survey cities reported on adjustments which shelters made to accommodate an increase in demand over the past year. Among these, shelters in 78 percent (18) of the cities consistently had

clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements. In 61 percent (14) of the cities, shelters distributed vouchers for hotel or motel stays because shelter beds were not available. In 52 percent (12) of the cities, shelters increased the number of persons or families that could sleep in a single room. In 26 percent (six) of the cities, buildings have been converted to temporary shelters.

Among other adjustments shelters have had to make: **Asheville** has increased overflow capacity on below-freezing winter nights, and **Trenton** has increased the use of expanded shelter capacity which was previously limited to severe weather emergencies. In **Nashville**, the YWCA has had to reduce the maximum length of stay at its shelter, and the Salvation Army has begun to place families and individuals wanting transitional housing on a waiting list. The three main shelters in **Phoenix** have reduced their length of stay in order to serve more people with existing ES beds and units. Officials there indicated that these shelters have consistently maintained a waiting list of 40-60 homeless families with children for whom no beds are available.

Unmet Need for Shelter

Seventy-one percent (17) of the survey cities report that emergency shelters had to turn away families with children experiencing homelessness because there were no beds available for them. Two-thirds (16) had to turn away homeless unaccompanied individuals. Officials in 17 of the survey cities were able to estimate the overall demand for emergency shelter that went unmet during the past year – an average of 22 percent – and the following table lists these cities’ estimates of the percentage of persons needing assistance who did not receive it:

City	Percent Unmet Need
Asheville	5
Boston	25
Charleston	40
Charlotte	25
Cleveland	0
Denver	11
Des Moines	50
Los Angeles	16
Louisville	4
Nashville	30
Norfolk	34
Philadelphia	48
Phoenix	45
Providence	10
Saint Paul	8
San Antonio	10
Santa Barbara	15

Homeless Veterans

The Department of Veterans Affairs has set a goal of ending homelessness among veterans by the end of 2015. HUD and VA continue to fund efforts such as the HUD-VA Supportive Housing (HUD-VASH) Program, which provides permanent, supportive housing and treatment services for homeless veterans; the VA Homeless Grant and Per Diem Program, which funds community-based agencies providing transitional housing or service centers for homeless veterans; and the Supportive Services for Veteran Families (SSVF) Program, which awards grants to private non-profit organizations and consumer cooperatives who can provide supportive services to very low-income veteran families living in or transitioning to permanent housing.

Last year's Point-in-Time count of homeless persons showed a drop of 7 percent in the homeless veterans population between 2011 and 2012 – the continuation of a positive year-to-year trend. This year, as cited earlier in this report, HUD says a 24.2 percent drop in the number of homeless veterans has occurred between 2010 and 2013.

Large numbers of young veterans in the homeless population continue to be a particular concern among veterans' advocates, however. The VA reported a year ago that the number in this category had increased significantly over previous years, in part because of more aggressive efforts to identify and assist these veterans, and in part because of the combat-related problems such as post-traumatic stress disorder and substance abuse that make adjustment to civilian life more difficult.

The combined troop commitment in Iraq and Afghanistan continues to drop, and it's estimated that more than 300,000 troops are likely to separate from the military in each of the next few years. In addition, because of current and projected cuts in defense spending, the military is preparing for large-scale troop cuts over the next few years, and accelerating reductions in personnel could make additional involuntary personnel reductions more likely.

In this year's survey, city officials were asked to describe the status of efforts to serve the homeless veterans' population in their cities. All of the survey cities except Plano and Trenton have been successful in obtaining HUD, VA and other funds targeted to homeless veterans. Officials in nearly four in five (79 percent) of the cities report their efforts to target homeless veterans have been successful in reducing the number of veterans in the homeless population. Following are their comments on some of the programs they have used and the results they have achieved:

Asheville, Santa Barbara, and Washington, DC have used VASH vouchers and the SSVF Program, and Santa Barbara also has used the Grant and Per Diem Program.

Boston has seen a 6 percent reduction in the number of veterans in emergency shelters and a 3 percent overall decrease in the number of homeless veterans.

Charleston reports that 549 persons in veteran families being served by the SSVF Program exited to permanent housing.

Charlotte officials cite an increase in the number of VASH vouchers, prioritization of veterans, and increased outreach efforts as reasons for their success.

Cleveland says chronically homeless veterans have been targeted as part of the Housing First Initiative, which provides permanent supportive housing for long-term homeless individuals.

Louisville officials say there has been a 20 percent decrease in homeless veterans over the past year.

Nashville says its most recent Point-in-Time count indicates the number of “chronic” homeless veterans living on the streets in Nashville-Davidson County has been reduced to 67. They caution, however, that this does not include those homeless veterans who come to Nashville “day in and day out.” The need for housing is still great among those sheltered and unsheltered, as well as among at-risk veterans and veterans’ families.

Norfolk officials report that Norfolk, Virginia Beach, Chesapeake, Portsmouth and Western Tidewater have committed to housing veterans. The waitlist for the newest permanent supportive housing development, South Bay, which has 60 units of permanent supportive housing, includes a veterans’ preference.

Saint Paul reports that in 2012, the Minnesota Assistance Council for Veterans provided intensive case management and direct services to 74 veterans and families in Ramsey County, the majority of these were from Saint Paul. They point out that the average cost to prevent homelessness is \$500-\$700 for each veteran served, and that re-housing services costs can be much higher, depending on the individual veteran’s situation.

Salt Lake City officials report that they are getting close to meeting the goal of zero chronically homeless vets.

San Antonio reports that 65-70 percent of veterans leaving transitional housing are entering permanent housing.

San Francisco says there has been a 30 percent reduction of homeless veterans from 2011 to 2013, according to its Point-in-Time homeless count.

Eighty-eight percent (22) of the cities report their efforts to target homeless veterans have been successful in other ways. Their comments:

Through outreach, **Asheville** has increased the number of homeless veterans receiving VA healthcare.

In **Boston**, coordination across multiple agencies has increased throughout the Continuum of Care. Officials say that this has helped in targeting HUD-VASH resources to the chronically homeless and others in need of housing. The addition of VA Peer Specialists through the VA health care system and Massachusetts Department of Veterans Services has increased both outreach and “inreach” to veterans living on the streets or in shelters. New Supportive Services for Veterans and Families funding has helped provide critical homelessness prevention or upfront housing resources for security deposits or first and last month's rent.

In **Charleston**, Crisis Ministries currently operates 14 transitional housing beds for male veterans and 10 for female veterans, and additional beds for male veterans will open next year. This program provides services to assist these veterans in their transition into permanent housing and self-sufficiency.

Charlotte has developed a streamlined application process with permanent supportive housing providers.

Cleveland has two new VA programs for homeless veterans: the Community Resource and Referral Center (CRRC) which links veterans to health, housing, and treatment services, and the SSFV Program funded by the VA through a local non-profit.

Denver has housed 100 veterans through the “100 Veterans in 100 Days” campaign.

In **Los Angeles**, homeless veterans (3,439) currently account for 16 percent of the homeless population. The Los Angeles Business Leaders Task Force, the City of Los Angeles and Los Angeles County adopted the Home for Good Plan to end veteran and chronic homelessness by creating 1,700 permanent supportive housing units.

Louisville has increased partnerships with agencies serving veterans.

Nashville has housed over 400 homeless veterans and families through its HUD-VASH housing program in Davidson County and surrounding middle Tennessee. This signifies tremendous growth, up from 22 veterans served in 2007. There are currently 230 homeless veterans housed in VA-funded Grant and Per Diem transitional housing programs in Davidson County and surrounding middle Tennessee and Kentucky counties. Many Davidson County homeless veterans housed also benefit from VA programs in other areas outside Nashville/Davidson County.

In **Norfolk**, the commitment to housing veterans has been successful in continuing partnerships with veteran service providers and with organizations through the 100,000 Homes initiative.

Philadelphia has been designated one of 10 Designated Opportunities to End Homelessness (DOEH) communities by HUD and the U.S. Interagency Council on Homelessness. DOEH supports community leaders so that they can make greater progress in addressing homelessness. Housing targets and strategies are set using an analytic tool (Strategic Planning Guide). Philadelphia used this to project gaps and to identify housing resources to close the gaps and end chronic and veteran homelessness. In addition, Philadelphia participated in the Rapid Results Institute sponsored by Community Solutions (100,000 Homes) to build a local team to end veteran homelessness. This is leading to new housing commitments and processes to ensure that veterans are identified, targeted, and offered housing solutions more quickly. HUD-VA resources have been provided, most notably SSVF funding and a total of 460 VASH vouchers. The 2012 and 2013 Point-in-Time counts, however, indicated a 10 percent increase in homeless veterans.

In **Providence**, while more veterans have been placed in permanent housing using HUD-VASH vouchers, the overall numbers of homeless veterans have not changed much.

In **San Antonio**, employment and training programs show that those homeless veterans who obtain and maintain employment also obtain and maintain permanent housing.

San Francisco, through its partnership with and support from the 100,000 Homes campaign, has strengthened community-wide collaboration among the City, the VA, HUD, the Housing Authority, and a number of nonprofit organizations. Most recently, the group was successful in a campaign to house 100 chronically homeless veterans in 100 days—surpassing that goal and housing 110.

Santa Barbara is assisting veterans to enter transitional shelter and participating in Stand Down, the VA health program.

Additional Resources Needed

In an open-ended question that asked what additional public or private resources are required to meet the city's current unmet need for services to veterans, nearly all of the cities that responded called for more affordable housing. Several cities also highlighted the need for supportive services. Among their specific suggestions:

Boston: Definitely needed are supportive housing resources for veterans who served in the military but are not VA-eligible. Comprehensive education, employment and training, job development, and transitional employment stipends are needed for veterans needing to re-tool for the domestic job market. Mental health and substance abuse treatment are needed for veterans with behavioral health issues. Also, flexible funds are needed for chronically homeless and other veterans moving from the streets and shelters into housing, for things such as furniture, beds, etc.

Charleston: More permanent housing for veterans experiencing homelessness would help our community better meet the need. This could come in the form of VASH supportive housing, or simply more available affordable housing.

Cleveland: Additional low-income rental housing subsidies are needed to end veterans' homelessness.

Des Moines: Needed is affordable housing where substance and mental health issues and non-payment will not result in eviction.

Los Angeles: More resources for Permanent Supportive Housing with an emphasis on project-based housing for veterans are needed. Also needed are wrap-around supportive services to help re-integrate veterans into society. Individuals increase recovery from chronic health, mental health, and substance abuse challenges when they have the stability of a permanent home. The effective solution is rapid placement in affordable rental housing in the community, with linkages to supportive services.

Louisville: The number of VASH vouchers used for supportive housing should be increased. In addition, more programs to serve homeless offenders (including sex offenders) are needed.

Nashville: Our most-needed resource continues to be adequate, safe, clean, affordable housing units for homeless veterans. Meaningful employment with a living wage also is needed for vets, as are more mental health resources, including non-VA clinicians who can diagnose PTSD.

Norfolk: We need additional VASH and housing choice vouchers, increased SSVF, and grant funding to support veterans' initiatives.

Philadelphia: We need affordable housing and permanent supportive housing (VASH), including housing for those with criminal histories; services, particularly intensive case management (ACT team) and navigator services to connect veterans with housing opportunities and assist with housing retention; and furniture or a furniture bank.

Phoenix: Funding for non-VASH veterans and for the SSVF program are needed.

Providence: Expansion of outreach efforts targeted to veterans is needed. We also could use more effective measures to identify those veterans who have not identified themselves as veterans to homeless service agencies.

Saint Paul: There is an ongoing need for more supportive housing for all residents, including homeless veterans.

Salt Lake City: We need continued partnerships with the VA and service providers.

San Antonio: There is a need for more affordable permanent housing, especially for veterans with families.

San Francisco: The biggest challenge is the very costly and competitive rental market. More affordable housing for all segments of the population is needed.

Santa Barbara: More affordable housing with supportive services is needed.

Goal of Ending Veterans' Homelessness by End of 2015

Fifty-six percent (13) of the cities say their experience suggests that the VA will be able to reach its goal of eliminating veterans' homelessness by the end of 2015. Among comments from the cities saying the goal can be reached:

Boston: There is an unprecedented level of partnership on the local, state and federal levels. If the Congress increases the resources to fully fund housing, health, employment, treatment, and homelessness prevention programs in both the VA and mainstream systems of care over the next three years, veterans' homelessness can be substantially ended.

Charleston: More affordable housing units as well as a greater number of VASH supportive housing units in our community would greatly aid the VA in meeting its goal of ending veteran homelessness.

Dallas: The efforts previously described will continue, along with recruiting landlords willing to house this homeless population.

Norfolk: Norfolk and South Hampton Roads are committed to creating solutions and processes to reduce veteran homelessness. It is the City's goal to reduce barriers and to streamline services that will reduce our veteran homeless population.

Philadelphia: The current projections indicate that Philadelphia can make substantial progress.

Phoenix: We are on track to meet the goal in February 2014.

San Antonio: The VA is making a concerted effort with HUD and DOL to hit this mark by 2015. All current programs targeting homeless veterans have this as their goal.

Among the comments from the cities which do not expect the goal can be reached by the end of 2014:

Asheville: Lack of affordable housing in our community means we do not have enough affordable housing stock to meet the demand.

Cleveland: Many veterans who are homeless are not eligible for veterans' services and housing subsidies because of their discharge status. Often, a dishonorable discharge was caused by a behavioral health issue that the individual acquired during service. These veterans make up a disproportionate percentage of the chronically homeless veteran population. In addition, more affordable housing resources are needed for the honorably discharged, homeless veteran population.

Des Moines: Linear projections suggest it will not happen.

Los Angeles: While there has been an increase in targeting resources for homeless veterans, Los Angeles has a significant number of these veterans. It will take several years to eliminate veteran homelessness, but resources must continue, along with ensuring that VASH vouchers are targeted to all veterans, not only the most chronically homeless ones. Veterans comprise 16 percent of the homeless population. Increasingly, they return from service to find they do not have the support network and resources to meet their most basic needs. When their resources are depleted, these veterans end up on our streets.

Louisville: Homelessness will continue to be reduced for veterans, but not completely eliminated.

Memphis: More affordable housing units as well as a greater number of VASH supportive housing units in our community would greatly aid the VA in its goal of ending veteran homelessness.

Nashville: Additional resources are being implemented to right-size our VA Homeless Program components and partnerships with transitional, permanent, HUD, community, and landlords, so that no veteran has to sleep on the streets. Many of the issues that they face – chronic substance abuse, PTSD, criminal history, and other contributing issues of homelessness – can be mitigated somewhat. However, some agencies believe that the problem is too vast and fear that veterans placed in housing may not access the supportive services necessary to remain stable. They believe it is unrealistic that all these issues will be 100-percent solved. There are so many new veterans coming home that become homeless, and those already homeless aren't getting housed.

Providence: There are many new homeless veterans. It is not a fixed population. It is not only about finding housing for the veterans currently on the street and in the shelters.

San Francisco: San Francisco continues to struggle with cost-prohibitive rents and a high rate of veterans who move here after becoming homeless elsewhere. We are focused on project-based vouchers so that there are permanent units available for chronically homeless veterans.

Santa Barbara: Although there is a greater potential for this population, there is a lack of affordable housing with supportive services.

Exemplary Programs to Alleviate Homelessness Among Veterans

Twenty-two of the survey cities described their responses to veterans' homelessness, some briefly, others in detail. Most described ways in which they have taken advantage of targeted federal programs such as HUD-VASH and SSVF and integrated them into overall efforts to combat chronic homelessness in their cities. Many have engaged in the national multi-agency initiative, promoted through Rapid Results Housing Boot Camps, to house 100 chronically homeless persons, including veterans, in 100-day periods. **Washington, Charlotte, and Cleveland** report having taken advantage of these programs.

- In **Asheville**, the HUD-VASH coordinator and case managers partner with local faith communities to support homeless veterans' move into housing. These faith communities collect furniture and household goods for the veterans' new homes; goals are to provide a warm welcome to the veterans, ease their transition into permanent housing, and lighten the burden of the many details that go along with setting up a new household.
- In **Providence**, Operation Stand Down Rhode Island follows the "Housing First" model, providing over 40 units of permanent housing combined with a full range of services to ensure that veterans will be able to remain in their apartments. Supportive services include, but are not limited to: intensive case management, coordination of mental health and substance abuse treatment, assistance with VA benefits and employment, training, and job placement services.
- In **Santa Barbara**, service providers have been successful in combining Homeless Providers Grant and Per Diem Program and, more recently, SSVF funding for homeless prevention, and Rapid Re-Housing funding for veterans and veteran families. Collaboration between local agencies and the VA clinic has provided multiple access points for veterans seeking resources related to homelessness.

The balance of the cities provided the following descriptions of their efforts:

Boston: At the New England Center for Homeless Veterans, the Veterans Training School offers comprehensive employment assessment for veterans who are homeless, unemployed, or underemployed by providing them with intensive and individualized assessment and the tools they need to move toward self-sufficiency. The school provides: pre-vocational courses in business and computers; vocational courses in commercial driver's license, security officer training, and culinary arts; life skills courses in money management; and self-esteem classes. An Information Resource Center provides: a computer lab with Internet access, a resource library, one-on-one computer instruction, job search assistance, online application assistance, assistance in obtaining online e-mail accounts, resume writing, and JumpStart Workshops.

Charleston: Crisis Ministries recently received a \$2 million grant from the VA for Supportive Services for Veteran Families (SSVF) and has opened a new facility, Veterans Housing Services, dedicated to

providing the needed services in a central location. The goal of the program is to promote housing stability among very-low-income veteran families who reside in, or are transitioning to, permanent housing through a wide range of supportive services. Many of these veterans' families are homeless. Services include: case management, employment and education, fiduciary and rep payee services, legal services and income support, housing counseling, and financial assistance. The intended outcomes of SSVF are to reduce time spent in a shelter or in at-risk housing situations, and successful housing retention and stability.

Chicago: A team of City of Chicago and Chicago Housing Authority staff and nonprofit leaders recently capped off a 100-day collaborative effort to assist chronically homeless people in Chicago, resulting in over 400 individuals and families moving from the streets and into housing. Within this group were 243 veterans who were housed between June 1 and August 31. Many received rental assistance through the Jesse Brown VA Medical Center and Chicago Housing Authority's federal Veterans Affairs Supportive Housing (VASH) grant partnership. The achievements are the direct result of the hands-on efforts of the Department of Veterans Affairs, the City of Chicago, and over 50 private, non-profit supportive housing agencies that provided housing or conducted street and shelter outreach. Since joining the national 100,000 Homes Campaign in August 2010, Chicago has continued to identify and engage the most vulnerable and chronically homeless individuals and families, finding them a home in permanent supportive housing. The group seeks to maintain the momentum of housing placements going forward through sustained 100-day action plans.

Dallas: A collaborative effort of the Continuum of Care, Dallas Housing Authority, CitySquare, and the Veterans Affairs Department has created an awareness of veterans' homelessness and the need for action. The Collaborative has been successful in the four months since it came together. One hundred thirty veterans were successfully housed and the Collaborative will continue to serve this demographic as long as necessary. Of the veterans housed, 70 percent were classified as chronically homeless. Those housed included single men and women as well as women veterans and their children. Among Veterans Affairs Department programs supported by the community to help veterans experiencing homelessness or at-risk of homelessness are: a compensated work therapy program that provides vocational rehabilitation and a program of supported employment; a supported employment program that recruits employers and businesses to offer employment opportunities to veterans while providing coaching and ongoing support to the veteran to help maintain employment; and an annual event, hosted by the Veterans Affairs Department with support from social service providers, that enable veterans to access the service providers' treatment programs, clothing assistance, HIV testing, flu shots, haircuts, and other needed services. Currently, the Metro Dallas Homeless Alliance is in partnership with the HUD-VASH program to house an additional 75 veterans by the end of the year. This effort is a result of the 100 Homes 100 Vets program that was successful during 2013.

Denver: Denver's Road Home, the City and County of Denver's Ten Year Plan to End Homelessness, is collaborating with housing providers, non-profits, the Denver VA Hospital, and landlords in a new project from the 100,000 Homes Campaign. A team from Denver attended a Rapid Results Acceleration Boot Camp this summer to learn how to improve service delivery systems around vulnerable people. The goal of the Boot Camp is for the attendees to return to their community and create a housing placement engine of change that will align with the federal strategic goals of ending chronic and veteran homelessness. The team established an initial 100-day planning period to get in place additional partners and establish the 100-Day Campaign goals. The Campaign, begun on November 4, aims to house at least 87 chronically homeless individuals per month; 27 percent of these will be veterans. The overall campaign goal is to end

chronic homelessness and veteran homelessness in Denver by January 2016. This campaign will build on the City's successful 2012 Campaign, "100 Vets in 100 Days." Last year, 80 chronically homeless veterans were housed in 100 days and the number of days from referral to lease up was reduced by 43 percent.

Los Angeles: The Los Angeles Continuum of Care (CoC) implemented the Veterans Affairs Supportive Housing (VASH) Workgroup to build upon the collaboration initiated between the CoC providers, Public Housing Authorities, and the Veterans Administration during the Homelessness Prevention and Rapid Re-Housing (HPRP) program. This workgroup consists of veteran-specific providers and CoC point-of-entry providers including access centers, drop-in centers, street outreach teams, representatives of the VASH program from the Greater Los Angeles VA Healthcare Center, and Los Angeles County Departments providing public services. The goal is to ensure that homeless veterans are immediately identified when requesting homeless services in order to determine the appropriate interventions to meet their needs and connect them to the comprehensive array of medical, social services, and VASH vouchers available through the Veterans Administration. These efforts are consistent with the CoC's plan for the integration of all community resources in enhancing service delivery systems for specific populations of homeless persons, such as veterans. The CoC will continue to strive to improve these types of collaborations in the future, to ensure that veterans are provided with the appropriate interventions specific to their needs in order for them to be rapidly rehoused as quickly as possible.

Louisville: The Homeless Veterans Outreach Program, considered the most important program addressing homeless veterans' needs in Louisville, has four staff members who perform regular homeless outreach for veterans at the day and evening emergency shelters. They also work with the 100,000 Homes project to maintain an agreed-upon list of all homeless veterans in the community – a list used in a collective effort to place veterans in housing and connect them to needed services. The national Volunteers for America organization also operates a program in Louisville which identifies and assists veterans with families in accessing services and housing.

Memphis: Alpha Omega Veterans Services provides a range of housing options for veterans experiencing homelessness. The organization, which focuses on peer-based strategies, has a strong sense of community in its permanent housing programs and has shown strong performance in assisting veterans to obtain employment. Most of the staff members are former program participants.

Nashville: The \$3 million in Supportive Services for Veteran Families funds provided to Davidson and surrounding Middle-Tennessee Counties are key to moving veterans and their families from the streets into permanent housing. Centerstone, the national behavioral healthcare organization, provides outreach, case management, and benefit achievement assistance to eligible veterans and family members. Of the 390 families served, 90 percent achieve stable housing before program completion. Operation Stand Down Nashville, Inc. (OSDN), the most recent local recipient of SSVF assistance, is the primary nonprofit resource for veterans in Middle Tennessee, providing social services including employment readiness, placement assistance, transitional housing, and coordination of other agencies' services. Assistance provided to honorably discharged veterans includes: obtaining personal IDs; filing for VA, Social Security and Food Stamp benefits; obtaining military records; employment assistance; housing assistance; Microsoft applications training; obtaining VA medical treatment eligibility; clothing; personal care items; and much more. OSDN, where "Every day is Veterans Day," anticipates assisting over 2,000 veterans and their families during 2013.

Norfolk: The Norfolk Redevelopment and Housing Authority, in conjunction with the Hampton VA Medical Center, Norfolk Office to End Homelessness, local homeless service providers, the national 100,000 Homes initiative, and the Rapid Results Institute, has committed to housing the nation's heroes as part of the national effort to end chronic homelessness among veterans by 2015. Utilizing the HUD VASH voucher and other permanent supportive housing programs, and through coordinated ongoing case management, Team Norfolk has set the ambitious goal of housing 115 veterans locally over 100 days – an average of 35 veterans per month from September through November. Norfolk was selected by HUD to participate as one of 20 cities in this national campaign. In early August, Donnell Brown, Kimberly Thomas and Pamela Jones-Watford attended the VASH Boot Camp in Philadelphia where they trained with national leaders committed to making the veterans' housing dream a reality in Norfolk.

Philadelphia: The Philadelphia Housing Authority (PHA) and the Veterans Affairs Medical Center (VAMC) have been collaborating since 2008 in the implementation of the HUD and VA Supportive Housing (HUD-VASH) program, which provides a chronically homeless veteran with a Housing Choice Voucher (HCV) along with services from HUD-VASH case managers. 100,000 Homes held one of its Rapid Results Veterans Boot Camps in Philadelphia in early August to ramp up efforts to assist veterans experiencing homelessness. In Philadelphia, before the Boot Camp, after a veteran completed the voucher briefing and received his/her voucher, the 120-day clock for the veteran to identify a unit would start ticking. Once a unit was identified, the veteran would have to submit paperwork in order for PHA to complete an inspection to ensure the unit met Housing Quality Standards. If it did not, one or more re-inspections would be needed. The logistics involved in completing all the steps required were time consuming – and the clock would continue ticking, with the increasing likelihood a veteran would not be successful in the program. During the Boot Camp, as VA and PHA staff mapped out the process and the number of steps and amount of time involved, it became clear that something needed to change. The solution came from a PHA staff member: Pre-inspected units. With this, the concept of "See and Move In Tours" was born and is now a standard operating procedure for PHA. Now, immediately following the voucher briefing, a veteran and case manager visit units that have already passed inspection. On the first trial, PHA inspected 10 units, with eight of them passing. Five veterans with new vouchers visited the units and all signed leases immediately. Officials report that with a little innovation, amazing communication, and some determination, a process that was averaging over 90 days to complete now can take as little as two days.

Phoenix: Phoenix has a unique initiative, H3 Vets (H3 = home, health, hope), a collaborative aimed at ending chronic homelessness among veterans. In addition, Phoenix participated in the Rapid Results Institute sponsored by Community Solutions (100,000 Homes) to enhance H3 Vets, and to build an additional local team to end overall homelessness. The community has responded with service and housing commitments, and a comprehensive systems re-engineering which quickly identifies chronically homeless vets and connects them with housing and services. Since the launch of H3 Vets, the population of chronically homeless vets has declined by over 65 percent. Indeed, Phoenix is poised to get to functional zero, perhaps by the end of the year, with only 54 chronically homeless veterans remaining to be housed.

Saint Paul: The Minnesota Assistance Council for Veterans (MACV) provides homeless or near-homeless veterans and their families with homelessness prevention and re-housing assistance. MACV attempts to forestall imminent homelessness for families impacted by a one-time, non-repetitive – but

nonetheless consequential – event such as an illness, unemployment, or an accident. Services include rental/mortgage assistance, security/damage deposits, utility assistance and, as appropriate, transportation assistance while the veteran is being stabilized. To be eligible for assistance, a client must be a veteran with an honorable discharge and 181 days of active duty service. The veteran must be a Minnesota resident (for a minimum 30 days) and homeless or at imminent risk of becoming homeless, and must be motivated to make positive change. Generally, assistance is provided on a one-time basis and the payment made is considered sufficient to resolve the crisis. Paramount in MACV's service delivery is outreach – to food shelves, shelters, community centers and clinics providing services to individuals and families – including regular outreach and collaboration with the Union Gospel Mission, Dorothy Day Center, and Salvation Army in Saint Paul. As a direct result of its community education and outreach, MACV connects with more veterans than ever before, and many veterans are referred to MACV's housing program by service organizations operating in the communities surrounding MACV's regional offices. Project activities are ongoing.

Currently, an estimated 42,870 veterans live in Ramsey County. Of these, approximately 420, including nearly 120 families, will experience an episode of homelessness sometime during the year. In 2012, MACV provided intensive case management and direct services to 74 veterans and families in Ramsey County – the majority of them from Saint Paul. The average cost to prevent homelessness is \$500-700 for each veteran served. Re-housing services can be much higher, depending on the individual veteran's situation. MACV's multi-faceted, comprehensive approach focuses on the unique needs of homeless veterans, veterans in crisis, and their families. These veterans also can access MACV's additional programs and services (funded by other sources) to aid in achieving long-term stability. These services include life skills and job training, employment assistance, transitional and permanent supportive housing, and civil legal assistance. MACV offers a supportive, drug-free environment in which services help veterans reach full recovery. Programming and services provide for basic needs – including housing/shelter, health care, food and clothing – and provide “next steps” to assist them in developing the skills necessary to secure employment and create and sustain economic independence.

In 2009-2012, the City's Homelessness Prevention and Rapid Re-Housing Program allocated funds to MACV for both prevention and re-housing services. During 2010-2011, the City, MACV, and the Ramsey County Housing and Redevelopment Authority also worked together to create supportive housing for six homeless veterans returning from Iraq and Afghanistan. HRA used NSP-1 funds for property acquisition, and MACV provides ongoing support services. During 2012, MACV opened a second house to provide supportive housing for women veterans. Finally, during 2009-2013, the City has allocated some ESG funds to MACV for homelessness prevention services, and MACV continues to be a strong partner with the City/County's Heading Home Ramsey Program

San Antonio: The American GI Forum National Veterans Outreach Program (NVOP) continues to promote its housing initiative by expanding the opportunities for veterans in the area of affordable housing. With support from the Home Depot Foundation, the National Community Stabilization Trust, and Bank of America, NVOP has already started rehabilitation of homes for those veteran households pursuing affordable home ownership through the Veterans Homeownership Program (VHP). In addition, NVOP has been instrumental in strengthening community efforts in support of the program. Recently, NVOP fostered a partnership with USAA, one of the oldest military financial institutions in the country, to establish financing and homebuyer guidance for those veterans interested in homeownership. NVOP was also able to increase community involvement by developing collaborations with other non-profits, such as

Avenida Guadalupe and the Financial Empowerment Center, to educate the veteran population on the requirements and steps necessary to repair credit and develop personal budgeting plans.

With the initial selection made for the first phase of veteran homes, NVOP is in the process of assisting with resources and guidance regarding the homebuyer process and has provided case management services to those clients needing additional attention to address the blemishes on their credit reports. NVOP also has been pleased by the response to the VHP. As a result of intensive outreach efforts, contacts by interested veterans have doubled since the program's inception. Also, NVOP has recently been granted an expansion of areas in which homes are available through the program. Homes are projected to become available in Austin, San Marcos, New Braunfels, Corpus Christi, the Eagle Ford Shale area, and El Paso. In response to the demand of clients for affordable housing, NVOP intends to see the VHP continue to expand and eventually offer other permanent housing opportunities, such as multi-family units.

San Francisco: Given the high cost of housing in the San Francisco community, and the very difficult challenge homeless veterans face in trying to secure their own housing, project-based solutions have been especially effective in connecting homeless veterans to the housing and services they need, and stabilizing them on the long term. One building, Veterans Commons, has been financed with a variety of local and federal resources, and has been exemplary. It permanently houses 75 chronically homeless and disabled veterans in a supportive environment with comprehensive on-site services, including case management, mental health, and medical care. The building, which opened in November 2012, was a historic site owned by the City and for years had been used as a storage facility. The project took six years and cost approximately \$30 million. One resident described the building's residents saying: "A lot of us don't have the best social skills when it comes to doing normal things. Now we get all this help. It blows my mind." "We are the type of people who don't ask for help," he says. "Veteran Commons has done a lot for me. I can't praise them enough." The project has had exceptionally high stability rate of veterans so far. As a result of their monthly meetings, the San Francisco Homes for Heroes Team, a collaboration of local community based organizations, federal agency staff from the Department of Housing and Urban Development, the Department of Veterans Affairs, and local human services, housing authority and public health staff are exploring methods for increasing the number of project based housing units for the most vulnerable homeless veterans in the community.

Efforts to Prevent Homelessness Resulting from Foreclosure

Thirty-five percent (eight) of the cities have adopted policies aimed at preventing homelessness among households that have lost their homes to foreclosure during the last year. Fifty-five percent (12) of the cities have adopted such policies in previous years. **Charleston**, for example, has consistently sought to provide technical or financial assistance to organizations that aid persons in the prevention of homelessness and those who are facing the threat of foreclosure. In **Louisville**, bank settlement funds are being used for housing counseling, legal aid, and financial assistance. Among other cities' descriptions of their activities:

Boston: Boston has a Comprehensive Foreclosure Prevention Initiative that has continued to support robust programs and partnerships to reduce foreclosure through the Boston Home Center. This includes a regularly offered Options for Reducing Monthly Mortgage Payments Workshop, a free one-session workshop that will help homeowners learn how to prevent foreclosure, and the Don't Borrow Trouble© Foreclosure Prevention Program that has become a national model that provides consumer outreach,

information, and counseling to help Boston homeowners avoid predatory lending and foreclosure. Services include counseling, intervention, and workout strategies. The City has robust foreclosure counseling partnerships with five NGO's, including Mattapan Family Service Center/Action for Boston Community Development, the Codman Square Neighborhood Development Corporation, ESAC Boston, Nuestra Comunidad Development Corporation, and the Urban Edge Community Development Corporation.

Chicago: The City, through its Home Ownership Preservation Initiative (HOPI) collaborative, has been working for a number of years to address the myriad issues associated with foreclosure. With respect to prevention, HOPI initiatives provide for accredited housing counselor services, emergency service referrals, and outreach programming. Additionally, families and individuals renting in multi-unit housing whose owners are in the process of foreclosure can obtain information about their legal rights and resources available by calling 311 and asking to be connected with one of the Foreclosure Assistance Information for Renters (FAIR) agencies.

Los Angeles: In December 2012, the Los Angeles City Council extended, through December 31, 2013, the Foreclosure Eviction Ordinance (No. 180441) which prohibits lenders who foreclose on any rental unit in the City from evicting tenants without a legal reason permitted under the City's Rent Stabilization Ordinance (RSO). Although the RSO prohibited eviction of tenants merely due to foreclosure, prior to adoption of this Ordinance no protection existed for tenants living in properties exempt from the RSO, including single-family homes. For homeowners facing foreclosure, the City has also established a hotline which provides people with information about remediation programs.

Nashville: A number of local agencies do foreclosure counseling and in some instances provide emergency relief payments. THDA, the State housing finance agency, has a "Hardest Hit" program which targets homeowners who have become unemployed or underemployed through no fault of their own, as well as those who are on long-term disability or Social Security disability. The event must have occurred since January 1, 2008. The program was expanded to add divorce and death of spouse as hardship reasons. Locally, Hardest Hit is administered by Woodbine and AHR, but applications are submitted first by the consumer at www.KeepMyTNHome.org. United Way provides financial support for Residential Resources and for programs at Catholic Charities, Conexion Americas, Ladies of Charity Welfare Agency, Martha O'Bryan, Matthew 25, Oasis Center, Old Hickory Christian Community Outreach, Park Center, Salvation Army, St. Luke's, and the ARC of Davidson County. All of these programs either assist with foreclosure prevention or aid a family with funds to remain in housing (paying for utilities, rent,/mortgage, etc.).

Phoenix: The Neighborhood Services Department continues to offer education and outreach linking the City's hardest hit neighborhoods with the Attorney General's mortgage settlement-funded programs and the State's Hardest Hit Housing funds programs to keep families in their homes and prevent homelessness. Additionally, the Housing Department has funded two multi-family complexes providing permanent housing for the homeless through the Neighborhood Stabilization Program.

Saint Paul: For 20-plus years the City has maintained a nationally- recognized Mortgage Foreclosure Prevention Program which provides intensive case management, housing counseling, financial budget counseling, foreclosure prevention assistance (assistance with loan modifications, loan forbearances, etc.), and referrals to community resources.

San Antonio: The City has continued its Housing Counseling Foreclosure Prevention Program in partnership with HUD, Treasury, Federal Deposit Insurance Corporation (FDIC), Federal Reserve Bank, Fannie Mae, and the State and Local Foreclosure Prevention Task Force. The program provides foreclosure intervention counseling to delinquent homeowners facing foreclosure, using a Housing Counseling grant to work with FHA homeowners and area lenders on loan modifications to avoid foreclosure and prevent homelessness. Counselors work with delinquent homeowners in developing crisis budgets to qualify them for loan modifications under HUD's Home Affordable Modification Program (HAMP) and U.S. Treasury regulations for the Making Home Affordable Program. Delinquent homeowners have the opportunity to meet face to face with their lender or a HUD-approved housing counselor to complete a "workout plan," thereby avoiding possible foreclosure. The City partners with the San Antonio Board of Realtors, San Antonio Apartment Association, San Antonio Housing Authority, and Haven for Hope of Bexar to place foreclosed homeowners in suitable housing to avoid homelessness. The program utilizes Emergency Solutions Grant (ESG) funding to provide financial assistance to families to secure rental housing, if necessary.

San Francisco: The City has created the Housing Trust Fund as a set-aside from the City's General Fund, in part to provide ongoing funding for housing stabilization for individuals who are at risk of or have lost their homes to foreclosure. The Trust Fund is providing \$700,000 to fund eviction prevention counseling, rapid re-housing counseling, and tenant-based rental assistance and move-in costs to these individuals and families. Through the Fund, the City is also providing \$300,000 for expanded foreclosure counseling services and door-knocking rapid response services to all individuals receiving notices of default from the City's Assessor-Recorder's Office. In addition, the City has set aside \$500,000 for a mortgage assistance program that will complement the existing Keep Your Home California program to provide additional resources for individuals at risk of losing their homes.

Policies and Programs Addressing Homelessness

Asked to identify the top three actions needed to reduce homelessness, 88 percent of the cities (22) called for providing more mainstream assisted housing (e.g., Housing Choice Vouchers), four in five (20) called for more or better-paying employment opportunities, and 76 percent (19) of the cities cited the need for more permanent supportive housing for people with disabilities. Cited less frequently were better coordination with mental health service providers, by 24 percent (six) of the cities, and more employment training programs, by 12 percent (three) of the cities.

Exemplary Programs to Alleviate Homelessness

Twenty-two of the survey cities described initiatives they believe have been effective in alleviating problems of homelessness in their communities. Four of the cities provided brief summaries of individual programs targeting specific needs.

- In **Charleston**, Crisis Ministries' Homeless Employment and Learning Program (HELP) offers adult education, GED classes and testing, WorkKeys classes and credentialing, ServSafe training and testing, and general employment support and guidance for persons transitioning out of homelessness. These services have helped 87 percent of participants attain permanent housing over the last year; 95 percent have gained, increased, or maintained their income.

- In **Charlotte**, MeckFUSE (Frequent Users Systems Engagement) seeks out individuals who have experienced a minimum of four shelter or jail visits within a five-year period. The goal of the program is to decrease the usage of the county jail and shelters and provide access to affordable housing, substance abuse treatment, and physical and mental health services.
- In **Denver**, the Denver Housing Authority continues its commitment to Denver's Road Home, each year providing Section 8 vouchers through its local preference program, and public housing units through its Family Housing Program. Two additional service providers were added to the local preference program in 2012, one of which focuses on re-entry programs and will help address the needs of two underserved populations – single unaccompanied women who are homeless, and recently released ex-offenders.
- In **Providence**, Home Base is a two-year-old Housing First program that provides immediate access to permanent housing and wrap-around services designed to allow clients to remain in their housing. Funded by the Substance Abuse and Mental Health Services Administration and run by the Providence Center, a community mental health center, the program is serving more than 70 clients.

Other survey cities described the following efforts:

Asheville: Over the past year the City has seen an increase in families experiencing homelessness. Local faith communities that had become concerned about this increase wanted to explore ways to be part of permanent solutions – this in addition to their on-going charity work in support of emergency shelters. Over several months, a coalition of churches met with local service providers and local officials to explore ways churches could help ease family homelessness. As a result, the coalition is now using one of its sites as a pilot project that involves renovating under-used facility space. The initial renovation will produce two two-bedroom apartments for homeless families in need of affordable, permanent housing. The project, which involves the faith communities, the City, and a homeless housing provider, is scheduled for completion early in 2014. The City plans to use it as a model for additional efforts by other faith communities and non-profits.

Boston: Last year, drawing upon lessons learned from the American Recovery and Reinvestment Act's Homelessness Prevention and Rehousing Program, the Boston Continuum of Care teamed with the Massachusetts Housing and Shelter Alliance, HomeStart, the Boston Public Health Commission, Pine Street Inn, and St. Francis House to launch a multiagency Rapid Rehousing partnership that promotes more rapid exits from shelter and reduces the length of stay for homeless adults. The Emergency Solutions Grants-Rapid Rehousing program offers short- or medium-term rental subsidies, security deposits, utility assistance, and other start-up costs to individuals who need support in securing permanent housing and who would otherwise remain on the street or in emergency shelters. In FY 2013, this program rapidly housed 343 individuals. In addition to flexible ESG funds, Boston's provider agencies aligned housing search and housing retention supports, where possible, so that these resources were both timely and targeted to persons exiting homelessness.

Chicago: The Department of Family and Support Services (DFFS), along with other Chicago homeless providers and government leaders such as the Jesse Brown VAMC and Chicago Housing Authority, met in an intensive two-day boot camp intended to improve the effectiveness of homeless services providers in linking veterans and the chronically homeless to city-wide permanent supportive housing programs. At the end of the boot camp, the Chicago team established a 100-day action plan to increase the housing

placement rate to 125 per month. After 100 days, more than 400 chronically homeless individuals and families, including veterans, moved to housing from the streets.

The Corporation for Supportive Housing in Chicago manages a centralized, Web-based application process for permanent supportive housing. Priority on the list is established through the use of an evidence-based tool, the Vulnerability Index, which identifies the medical vulnerability of homeless individuals. The Center for Housing and Health in Chicago is assigned to work with DFSS homeless outreach teams, as well as outreach teams from DFSS-funded homeless delegate providers, to identify the veterans and other chronically homeless persons targeted for available permanent supportive housing units, and to help them through the housing application process and into housing.

Cleveland: The Housing First Initiative (HFI) is the City's strategy to end chronic homelessness. HFI targets persons with serious and persistent disabling conditions who have been living on the streets or in emergency shelters for a year or longer. On any given night, a significant number of long-term homeless individuals occupy Cleveland's emergency shelters. Almost all of them have behavioral or physical health disabilities. In Cleveland, over 20 percent of the long-term homeless are veterans – a higher percentage than the national average. When HFI was developed in 2001, the community adopted a goal of developing 1,000 units of permanent supportive housing to house persons with disabling conditions experiencing long episodes of homelessness. HFI is a collaboration of public sector funders, foundations, and various systems of care. Key providers include EDEN, Inc., Cleveland Housing Network, AIDS Taskforce of Greater Cleveland, Mental Health Services, Inc., and the U.S. Department of Veterans Affairs.

By the end of 2013, 610 HFI units will have been completed and occupied, with another 66 units scheduled to open in 2015. Five years of operating data from local HFI projects confirm what national studies have found: Over 78 percent of residents remain in their apartments, and almost all are engaged in services. Half the residents are volunteers, participating in educational activities, or are employed. The rate of emergency room visits and hospitalizations has been reduced substantially. Approximately 20 percent of the residents move on to more independent housing situations and/or reunite with family. A small percentage returns to shelter. As a result of the success of HFI, the local Continuum of Care was able to close a 50-bed emergency shelter for disabled men in 2011. To date, only 2 percent of persons in permanent supportive housing have returned to emergency shelters. In addition, many residents, after experiencing stability in permanent supportive housing, have chosen to pursue and obtain other permanent housing in the community.

Los Angeles: Pursuant to the goal of ending homelessness through collaboration and the retooling of the crisis response system, the Los Angeles Homeless Services Authority, in partnership with the City and County of Los Angeles, is pooling resources to fund the Family Solutions Centers (FSC). These facilities will provide coordinated entry, intake assessment, and housing and supportive services interventions to homeless families and families at-risk of homelessness across the various regions of Los Angeles County. In collaboration with mainstream resources and targeted homeless resources, this new integrated Countywide system will provide the appropriate level of services and housing to each family in need. The ultimate goals of this coordinated system will be to divert families from becoming homeless and to end families' homelessness as rapidly as possible. Los Angeles also conducts vehicular outreach to homeless families living in cars, vans, and campers, providing families with rapid re-housing support to help them return to stable living environments.

In 2013 more than 20 organizations joined together to create the Skid Row Coordinated Entry System, in alignment with the Home for Good campaign in Los Angeles. The goal of the movement is to make systematic changes in order to foster collaboration. Home for Good is a blueprint to end chronic and veteran homelessness in Los Angeles County by building the most efficient and effective system in the region's history. It's a plan meant not simply to put an end to someone's life on the street but, rather, to provide homes as a means to an individual's vital integration into our communities.

Louisville: The City's Rx: Housing program is part of the national 100,000 Homes Campaign which aims to house 100,000 vulnerable and chronically homeless individuals and families across the nation by July 2014. The program identifies persons living on Louisville's streets, ranks them according to vulnerability, and begins working to house them based on the ranking. To date, the program has housed 115 disabled, vulnerable homeless persons in permanent housing, and resources have been provided for more. It has also led to an agreed-upon list of the most vulnerable persons for all supportive housing in the community. Single Point of Entry is the City's new process for reserving a bed at any local homeless shelter. A shelter reservation can be made 365 days a year by simply contacting 637-BEDS. This process insures that shelter is reserved for those in greatest need, creates a way for institutions like hospitals and jails to prevent the release of homeless persons to the streets, and allows staff to work to prevent people from becoming homeless in the first place by making referrals to homeless prevention services in the community. Finally, because the process also includes a scan card system, the length of time for shelter check-in has been greatly reduced and the data on homeless persons served is better than ever. Single Point of Entry also provides referrals to other community services, making available more shelter for those in greatest need. The free number for reserving a bed is advertised at day shelters, night shelters, hospitals, jails, and homeless prevention agencies. Finally, the program coordinates with the 2-1-1 system to make sure it is able to make referrals as needed.

Memphis: The City was recently awarded one of five national demonstration grants to test the effectiveness of permanent supportive housing in preventing family dissolution caused by homelessness and high service needs. Officials were able to pool resources in the community to create 69 units of permanent supportive housing to dedicate to this population, and the program launched in August 2013. Work is now underway with the Department of Children's Services, schools, the mental health system, and homeless providers in new, collaborative ways. Great outcomes are expected, officials say, not just among the families, but also in creating cross-systems partnerships that could help many more families in the future.

Nashville: How's Nashville, a new community-wide housing initiative, is part of the national 100,000 Homes Campaign. The purpose of How's Nashville is to foster collaboration among stakeholders from the nonprofit, business, faith-based, private, and government sectors with the goal of improving the housing placement rate and retention of housing for individuals and families experiencing homelessness or at risk of homelessness. The local campaign team also wants to reduce street deaths by implementing permanent solutions to homelessness. Keys to success, partners believe, are working together to use available resources in a more collaborative and outcome-oriented manner, monitoring progress and becoming more data-driven, and searching for more resources using data.

The Metropolitan Homelessness Commission (MHC) launched the How's Nashville campaign in 2013. MHC provides planning and coordination and serves as the campaign's backbone organization. A steering committee composed of partners from the nonprofit, private, and government sectors oversees the

activities and programs of the campaign. Workgroups are being formed around focus areas including housing, data and cost savings, and outreach and support services. To date, the campaign has facilitated collaborations among 30 partners from the nonprofit, business, and government sectors; increased the reported average monthly housing placement rate and set Nashville on the path to end chronic homelessness within four years; created community awareness around chronic homelessness and in the process raised more than \$90,000 from private donations without a fundraising campaign; and housed close to 200 people in 100 days with the help of the Metropolitan Development and Housing Agency, Veterans Affairs, and private landlords.

Norfolk: Norfolk launched a central intake system for homeless families in January 2007. This system coordinates services for families in crisis and creates a single point of entry for those services. The City also established the Homeless Action Response Team (HART) within the Norfolk Department of Human Services to assist families in crisis. HART completes a thorough assessment of the families' strengths and needs, a risk assessment, and housing barrier screening. Social workers assist each family in the development of a service plan and provide case management services. HART also maintains the shelter waiting list for Norfolk's three shelters and provides shelter diversion, homelessness prevention, and stabilization services. Rapid Re-housing funding sources include HUD grants, TANF assistance, and other State human services-designated funding sources. In September 2012, through collaboration with regional partners, a regional central intake system for single adults was initiated. This new centralized housing intake process aimed to streamline access to permanent and transitional housing programs in the City by eliminating barriers and duplication of services. These systems will continue to evolve. A mobile central intake program for single adults was developed as a community partnership of Norfolk's Department of Human Services, Community Services Board, and Office to End Homelessness; Access Aids Care; and Virginia Supportive Housing. This program can continue to expand through 2013 with additional funding and staffing.

Philadelphia: The City of Philadelphia's Permanent Supportive Housing Clearinghouse (CH) is a consolidation of the housing resources of the social service departments in the City. The role and purpose of the CH is to provide a streamlined, single point of access to permanent supportive housing, eliminate redundancies and multiple access points, promote coordination between housing and services, and manage new housing partnerships and resources. Resources are dedicated to households served by City social service agencies which have a services and a housing need, including individuals and families suffering with mental illness, chronic substance abuse, and related health disabilities; and those who are homeless or at the highest risk of homelessness. The CH began in 2012 and now includes access to eight programs, including housing that is provided through a partnership with Philadelphia Housing Authority.

Phoenix: The City redesigned its homeless programs in 2012 and 2013 to align its priorities to those of HUD and the local region, focusing services on chronically homeless individuals and families, and youth. To that end, the Human Services Department partnered with the Housing Department to issue an RFP for ESG-funded services combined with housing vouchers. This effort, which produced contracts for outreach and re-housing services combined with Housing Choice Vouchers and Tenant-Based Rental Assistance, will provide supportive housing with wrap-around services for 24 families in each of the next three years. In addition, 45 project-based vouchers – 15 per year for three years – will be issued in conjunction with contractually-obligated wrap-around services. Further partnerships were established with the realignment of Human Services staff to provide wrap-around services in support of chronically homeless/vulnerable

families from the City's emergency shelter. These families will receive the wrap-around services while living at one of the City's Public Housing sites.

Saint Paul: The City continues to support Heading Home Ramsey—Plan to End Homelessness, which established goals to provide housing to chronic long-term homeless residents as well as develop systemic service delivery changes. Between 2005 and 2010, the City and its housing partners successfully created 894 permanent supportive housing units by financing capital developments, providing an operating subsidy, and securing rental assistance for long-term homeless residents of Ramsey County. More than 75 percent of these units are located in the City.

Having achieved the original Heading Home Ramsey housing production goals, the City continues to finance affordable housing and permanent supportive housing using a variety of funds, including CDBG, HOME, the Low Income Housing Tax Credit, and Minnesota Housing Finance Agency financing. The City honors its commitment to developing affordable housing citywide – especially during the current difficult economic times. Strong working partnerships exist with Ramsey County and 25 community agencies to provide comprehensive services that address the needs of homeless citizens. During 2012 and 2013, the City and its community partners worked together to develop new systemic protocols, such as coordinated assessment, and new protocols for Homeless Management Information Systems (HMIS). At the same time, in response to a community need, the City allocated some ESG funds for rapid re-housing services to assist medically-compromised citizens who reside in the adult emergency shelter.

This fall, the Mayor challenged Saint Paul community leaders to analyze homelessness in order to develop guiding principles for a new community response that can address the needs of homeless single adults with dignity. And in another exemplary effort, Health Care for the Homeless continues to serve approximately 3,500 unduplicated homeless residents annually in emergency shelters and drop-in centers.

San Antonio: Separate Safe Havens for men and women in San Antonio are funded by HUD in partnership with the Center for Health Care Services. Each is a 22-bed facility housing 22 homeless individuals and operating 24 hours a day, 7 days a week. Each provides a comprehensive, integrated, continuum of care that is tailored to meet the needs of the homeless mentally ill and to provide a safe environment for individuals affected with mental health and substance abuse disorders that do not initially seek assistance from mainstream services. The goal is to engage homeless individuals in their recovery by promoting self-reliance and independence through utilization of community resources and natural supports. One of the criteria for eligibility to enter Safe Haven is to meet the definition for chronic homelessness – four or more homeless episodes in the last three years or continuous homelessness over the last year. In Fiscal Year 2013, Safe Haven saw 93.33 percent of its females and 88.64 percent of its males achieve housing stability upon transitioning from the program into permanent housing. Success markers include linking the homeless mentally ill to substance abuse services. Forty-five mentally ill homeless women were served at Female Safe Haven, with 95 percent linked to substance abuse services. Male Safe Haven served 44 mentally ill homeless men, with 93.75 percent linked to substance abuse services.

San Francisco: Community Housing Partnership (CHP) will provide permanent housing to 44 transition-age youth (ages 18-24 at time of placement) in a single room occupancy hotel with integrated on-site supportive services designed to increase positive exits from supportive housing through employment. This five-year pilot program, funded by a grant from the City and County of San Francisco, is being combined with funding from HUD. The building owner completed a major rehabilitation of the building in 2013. It

has 44 SRO units, most with shared baths and a limited number with private bathrooms. The first floor includes the front desk (staffed 24/7), manager's office, tenant lounge, a large community kitchen, and laundry facilities. On-site supportive services offices are located in the building. The building will be master leased and managed by CHP. In this pilot program, CHP will also provide support services focusing on housing stability, increasing self-sufficiency, and supporting individual tenants who can move on to other stable housing – opening up units for placements of other chronically homeless young adults. Referrals, which will come from Family and Children Services Division programs, will focus on transition-age youth who are exiting the Foster Care system and those in emergency shelter programs that serve this population. Tenant engagement in services and individual tenant progress over time will be measured in the analysis of this 5-year pilot effort.

Santa Barbara: The City of Santa Barbara is actively involved in several related efforts considered exemplary: A new unified countywide effort, Central Coast Collaborative on Homelessness (C3H), is just beginning its second year. This effort is based on a collective impact model and seeks to build a results- and data-driven culture, support the expansion of housing for the homeless, prevent homelessness, and elevate community dialogue, support, and coordination. The structure includes a Policy Council of 10 elected officials to direct cost effective and efficient responses to homeless-related issues. It also includes a Coordination Committee consisting of key County department heads, the Sheriff's Office, the Santa Barbara Police Department, executive directors of the homeless shelters and housing agencies, and other local leaders who help to coordinate the implementation of prioritized solutions to homelessness set by the Policy Council. The Coordination Committee sets program priorities; prioritizes Data Collection and Evaluation efforts; encourages greater collaboration between service providers in the Housing, Shelter and Treatment continuum; empowers community members, faith organizations, business entities, and advocacy groups to participate in building solutions through Community Action Groups; and designates and directs independent staffing to facilitate and coordinate the entire collaboration. The City has recently enhanced its Restorative Policing Program, which helps chronically homeless individuals who have multiple contacts with law enforcement achieve self-sufficiency. The program, which works with clients to place them in detox, housing, or work programs, is staffed by two sworn officers, six part-time Community Service Liaisons, and three part-time Restorative Outreach Specialists.

The Restorative Court Program is a collaborative effort of the Police Department, court system, health care system, and social service agencies. It is designed to help individuals with mental illness or substance dependence, many of whom are homeless, get off the street. Through customized recovery plans, many have achieved sobriety, safe housing, and a healthy lifestyle.

In 2011, Santa Barbara County conducted its first Vulnerability Survey along with the Point in Time Count. Since then, a Housing Placement Work Group comprised of housing providers, social service agencies, and County Mental Health and Public Health Departments has been working to house individuals and families. They meet biweekly via a conference call to discuss cases and set up a support network to help keep the most vulnerable people housed.

Trenton: Working cooperatively with community partners, the Rescue Mission of Trenton has reduced client barriers to social, medical, and legal services. This year the Mission moved beyond providing for basic needs such as shelter, food, hygiene, clean clothes, and a respite from the elements for homeless persons by developing an enriched services shelter program that increases emergency service clients' access to social services, including health care. The Mission's facilities and patterns of use make it an

accessible environment in which outreach and education services can be provided to the homeless population.

The Mission recently implemented a program to connect eligible clients to income development and access to health care. Through a cooperative effort with the Mercer County Board of Social Services, Henry J. Austin Health Center, and Princeton Theological Seminary, the Mission instituted a project to increase the number of shelter clients applying for benefits. (About 63 percent of admissions report no income or benefits.) The keys to the success of this project have been in the on-site provision of services and the interagency coordination of care. A Board of Social Services social worker performs on-site intakes on Tuesday evenings, the Health Center provides medical appointments, and Seminary students assist clients with their applications that evening and return to escort them to their appointments. When benefits have been secured, the Board of Social Services and Rescue Mission staffs work to connect shelter clients experiencing homelessness with housing.

Another example of a successful partnership involves Greater Trenton Behavioral HealthCare, which sends a homeless outreach worker to the Rescue Mission each week. The Mission's Supportive Services Manager identifies clients who are in need of mental health support and medication and the outreach worker meets with them, setting up appointments for them to enroll as Greater Trenton clients and receive psychiatric care. Appropriate case management and housing options are made available to the clients once they have enrolled. This process has made it possible for many clients to move from the shelter into housing.

Outlook for Next Year

Based on current local projections of economic conditions, unemployment, and other factors affecting homelessness, officials in half (12) of the cities expect the number of homeless families to increase next year – substantially in one of these cities and moderately in the rest. Those in one-third (eight) of the cities expect the number to continue at about the same level. Those in 17 percent (four) of the cities expect the number to decrease moderately.

Officials in 45.5 percent of the cities expect the number of homeless unaccompanied individuals to increase next year, with 37.5 percent (nine) of the cities expecting the increase to be moderate and 8 percent (two) of the cities expecting it to be substantial. Officials in 37.5 percent (nine) of the survey cities expect it continue at about the same level. Four cities (17 percent) expect the number to decrease moderately.

Given the current state of public and private agency budgets, officials in 62 percent (13) of the cities expect resources to provide emergency shelter to decrease over the next year, with 48 percent (10) expecting that decrease to be moderate and 14 percent (three) expecting it to be substantial. Officials in one-third (eight) of the cities believe resources will stay at about the same level. Four cities expect resources to increase moderately.

City Profiles

This section of the report provides individual profiles of the cities participating in the 2013 survey on hunger and homelessness. The profiles, intended to summarize for the reader the nature and extent of the problems in individual survey cities during the past year, are basically compilations of items selected from cities' survey responses.

Also included in the profiles are demographic data intended to provide some context for each city's response to the hunger and homelessness survey. These data items and their sources (the most recent available) are:

- Population, 2012 estimate (Source: U.S. Census Bureau, State and County QuickFacts)
- Median household income, 2007-2011 (Source: U.S. Census Bureau, State and County QuickFacts)
- Unemployment rate, October 2013 (Source: Bureau of Labor Statistics, U.S. Department of Labor, Unemployment Rates for Metropolitan Areas, October 2013)
- Persons below poverty level, percent, 2007-2011 (Source: U.S. Census Bureau, State and County QuickFacts)

As an aid in gauging the relative severity of economic problems in survey cities during the period covered by the survey, each city's profile may be compared to income, poverty, and employment indicators for the nation as a whole.

- According to the Census Bureau's September 2013 report, *Income, Poverty and Health Insurance Coverage in the United States: 2012*, the median household income in 2012, \$51,017, was essentially unchanged from the previous year.
- The nation's official poverty rate in 2012 was 15.0 percent, with 46.5 million people in poverty. Neither number was statistically different from the previous year, according to the Census Bureau's September 2013 report.
- The nation's unemployment rate in November was 7.0 percent. Of the 10.9 million workers unemployed, 4.1 million (37.3 percent) had been unemployed for 27 weeks or more. The number of long-term unemployed has declined by 718,000 over the past 12 months.

ASHEVILLE, NORTH CAROLINA

MAYOR ESTHER MANHEIMER

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • MEDICAL OR HEALTH COSTS • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 6 percent over the past year.
- Among persons requesting food assistance, 20 percent are elderly.
- Food pantries and emergency kitchens have had to reduce the quantity of food received at each food pantry visit and/or the amount of food offered per-meal, and reduce the number of times a person could visit each month.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- Both the number of homeless families and the number of homeless individuals increased by 8 percent over the past year.
- Among homeless adults, 60 percent are victims of domestic violence, 40 percent are severely mentally ill, 20 percent are physically disabled, 20 percent are veterans, 15 percent are veterans, 10 percent are employed, and 10 percent are HIV positive.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that may sleep in a single room, and increase overflow capacities on nights that are below freezing.
- Homeless shelters had to turn away homeless families because there were no beds available for them; they have not had to turn away homeless individuals.
- For the next year, city officials expect the number of homeless families to increase moderately and the number of homeless individuals to continue at the same level; they expect resources to provide emergency shelter to continue at the same level.

POPULATION: 85,712

MEDIAN HOUSEHOLD INCOME: \$40,863

METRO UNEMPLOYMENT RATE: 5.6%

BELOW POVERTY LINE: 20.3%

BOSTON, MASSACHUSETTS

MAYOR THOMAS M. MENINO

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • HIGH HOUSING COSTS • LACK OF SNAP BENEFITS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased, by 7 percent in community meal programs and by 13 percent in food pantries.
- Among homeless people, 83 percent are in families, 65 percent are employed, and 17 percent are elderly.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family can visit a food pantry each month.
- City officials estimate that 36 percent of the demand for food assistance went unmet last year.
- For the next year, city officials expect requests for food assistance to increase substantially and resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- The number of homeless families increased by 14 percent and the number of homeless individuals increased by 13 percent over the past year.
- Among homeless adults, 28 percent are physically disabled, 19 percent are severely mentally ill, 14 percent are employed, 12 percent are veterans, 7 percent are victims of domestic violence, and 1 percent are HIV positive.
- Shelters had to turn away both homeless individuals and homeless families with children.
- City officials estimate that 25 percent of the demand for shelter went unmet last year.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- For the next year, city officials expect the number of homeless families to increase substantially, the number of homeless individuals to increase moderately, and resources to provide emergency shelter to increase moderately.

POPULATION: 636,479

MEDIAN HOUSEHOLD INCOME: \$51,739

METRO UNEMPLOYMENT RATE: 6.3%

BELOW POVERTY LINE: 21.4%

CHARLESTON, SOUTH CAROLINA

MAYOR JOSEPH P. RILEY, JR.

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • HIGH HOUSING COSTS • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • PRISONER REENTRY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • EVICTION • FAMILY DISPUTES

Profile of Hunger:

- Requests for emergency food assistance increased by 5.25 percent over the past year.
- Among persons requesting food assistance, 32 percent are in families, 30 percent are employed, 17 percent are elderly, and 2 percent are homeless.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- None of the demand for emergency food assistance is estimated to have gone unmet.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to decrease substantially.

Profile of Homelessness:

- The number of homeless families increased by 29 percent, and the number of homeless individuals increased by 2 percent over the past year.
- Among homeless adults, 33 percent are severely mentally ill, 30 percent are physically disabled, 29 percent are veterans, 25 percent are physically disabled, 14 percent are employed, and 1 percent are HIV positive.
- Shelters had to turn away homeless families and homeless individuals because there were no beds available for them.
- City officials estimate that 40 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of both homeless families and homeless individuals to continue at the same level; resources to provide emergency shelter are expected to decrease substantially.

POPULATION: 125,583

MEDIAN HOUSEHOLD INCOME: \$50,938

METRO UNEMPLOYMENT RATE: 6.0%

BELOW POVERTY LINE: 18.8%

CHARLOTTE, NORTH CAROLINA

MAYOR PATRICK CANNON

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • HIGH HOUSING COSTS • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • DOMESTIC VIOLENCE • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES

Profile of Hunger:

- Requests for emergency food assistance increased by 10 percent over the past year.
- Among persons requesting food assistance, 88 percent are in families and 12 percent are elderly.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, reduce the number of times a person or family could visit each month, and turn additional people away because of lack of resources.
- For the next year, city officials expect requests for food assistance to increase substantially but resources to provide food assistance are expected to decrease substantially.

Profile of Homelessness:

- The number of homeless families increased by 10 percent and the number of homeless individuals decreased by 17.5 percent over the past year.
- Among homeless adults, 10 percent are severely mentally ill, 7 percent are victims of domestic violence, 5 percent are veterans, and 1 percent are HIV positive.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; convert buildings into temporary shelters; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Shelters had to turn away both homeless individuals and homeless families because there were no beds available for them.
- City officials estimate that one-fourth of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families to increase moderately and the number of homeless individuals to decrease moderately; they expect resources to provide emergency shelter to decrease moderately.

POPULATION: 775,202

MEDIAN HOUSEHOLD INCOME: \$53,146

METRO UNEMPLOYMENT RATE: 7.5%

BELOW POVERTY LINE: 15.0%

CHICAGO, ILLINOIS

MAYOR RAHM EMANUEL

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • FAMILY DISPUTES • UNEMPLOYMENT • POVERTY 	<ul style="list-style-type: none"> • DOMESTIC VIOLENCE • FAMILY DISPUTES • INSUFFICIENT INCOME

Profile of Hunger:

- Requests for emergency food assistance increased by 6 percent over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- The number of homeless families increased by 11.4 percent over the past year.
- Among homeless adults, 30 percent are physically disabled, 28 percent are severely mentally ill, 20 percent are victims of domestic violence, 12 percent are employed, 6 percent are veterans, and 4 percent are HIV positive.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room.
- For the next year, city officials expect the number of both homeless families and homeless individuals to increase moderately; resources to provide emergency shelter are expected to continue at about the same level.

POPULATION: 2,714,856

MEDIAN HOUSEHOLD INCOME: \$47,371

METRO UNEMPLOYMENT RATE: 8.3%

BELOW POVERTY LINE: 21.4%

CLEVELAND, OHIO

MAYOR FRANK G. JACKSON

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • INADEQUATE BENEFITS • POVERTY 	<ul style="list-style-type: none"> • UNEMPLOYMENT • POVERTY • LACK OF RENT ASSISTANCE 	<ul style="list-style-type: none"> • UNEMPLOYMENT • POVERTY • LACK OF RENT ASSISTANCE

Profile of Hunger:

- Requests for emergency food assistance increased by 5 percent over the past year.
- Among persons requesting food assistance, 59 percent are in families and 20 percent are elderly.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources and reduce the quantity of food provided during each visit and/or the amount of food offered per meal at emergency kitchens.
- For the next year, city officials expect requests for food assistance to increase substantially and resources to provide food assistance to continue at about the same level.

Profile of Homelessness:

- Over the past year, the number of homeless families increased by 15.5 percent and the number of homeless individuals decreased by 9.4 percent.
- Among homeless adults, 24 percent are severely mentally ill, 24 percent are physically disabled, 19 percent are employed, 17 percent are veterans, 7 percent are victims of domestic violence, and 1 percent are HIV positive.
- To accommodate an increase in demand, shelters had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements, and convert buildings into temporary shelters.
- Homeless shelters did not turn away homeless families or homeless individuals.
- City officials estimate that none of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families and individuals to continue at about the same level; they expect resources to decrease moderately.

POPULATION: 390,928

MEDIAN HOUSEHOLD INCOME: \$27,470

METRO UNEMPLOYMENT RATE: 7.9 %

BELOW POVERTY LINE: 32%

DALLAS, TEXAS

MAYOR MIKE RAWLINGS

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • DISABILITIES 	<ul style="list-style-type: none"> • EVICTION • UNEMPLOYMENT • POVERTY 	<ul style="list-style-type: none"> • EVICTION • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- The number of requests for emergency food assistance increased by 11 percent during the past year.
- For the next year, city officials expect requests for food assistance to continue at about the same level and resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- The number of homeless families decreased by 35 percent and the number of homeless individuals increased by 24 percent over the past year.
- Among homeless adults, 44 percent are severely mentally ill, 22 percent are unemployed, 18 percent are veterans, 17 percent are victims of domestic violence, and 5 percent are HIV positive.
- To accommodate an increase in demand, shelters consistently had to have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements, and to distribute vouchers for hotel or motel stays because shelter beds were not available
- Homeless shelters did not turn away homeless families or homeless individuals.
- For the next year, city officials expect the number of homeless families to continue at about the same level, the number of homeless individuals to increase substantially, and resources to provide emergency shelter to decrease moderately.

POPULATION: 1,241,162

MEDIAN HOUSEHOLD INCOME: \$42,259

METRO UNEMPLOYMENT RATE: 5.9%

BELOW POVERTY LINE: 23.0%

DENVER, COLORADO

MAYOR MICHAEL HANCOCK

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • FAMILY DISPUTES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • FAMILY DISPUTES • UNEMPLOYMENT

Profile of Hunger:

- Requests for emergency food assistance increased over the past year.
- Among persons requesting food assistance, 61 percent are in families, 22 percent are elderly, and 8 percent are homeless.
- City officials estimate that 15 percent of the demand for emergency food assistance went unmet.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- The number of homeless families increased by 13 percent and the number of homeless individuals increased by 16 percent over the past year.
- Among homeless adults, 30 percent are employed, 26 percent are severely mentally ill, 23 percent are physically disabled, 12 percent are veterans, 12 percent are victims of domestic violence, and 3 percent are HIV positive.
- To accommodate an increase in the demand for shelter, shelters had to convert buildings into emergency shelters and distribute vouchers for hotel and motel stays because shelter beds were not available.
- Homeless shelters had to turn away homeless families because there were no beds available but did not have to turn away homeless individuals.
- City officials estimate that 11 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families and individuals to increase moderately and resources to provide emergency shelter to increase moderately as well.

POPULATION: 634,265

METRO UNEMPLOYMENT RATE: 6.0%

MEDIAN HOUSEHOLD INCOME: \$47,499

BELOW POVERTY LINE: 19.2%

DES MOINES, IOWA

MAYOR FRANK COWNIE

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LACK OF AFFORDABLE HOUSING • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • MEDICAL OR HEALTH COSTS • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased in the 8-10 percent range over the past year.
- Among persons requesting food assistance, 56 percent are in families, half are employed, 7 percent are elderly, and 4 percent are homeless.
- For the next year, city officials expect requests for food assistance to increase substantially but expect resources to provide food assistance will decrease substantially.

Profile of Homelessness:

- The number of homeless families decreased by 18.3 percent and the number of homeless individuals decreased by 23.8 percent over the past year.
- Among homeless adults, 28 percent are victims of domestic violence, 42 percent are severely mentally ill, 22 percent are employed, 16 percent are physically disabled, 12 percent are veterans, and 1 percent are HIV positive.
- To accommodate an increase in demand, shelters consistently have had clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements, and distributed vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away homeless families because there were no beds available but did not have to turn away homeless individuals.
- City officials estimate that half of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families and homeless individuals to decrease moderately; they expect resources to provide emergency shelter to decrease moderately as well.

POPULATION: 206,688

METRO UNEMPLOYMENT RATE: 4.0%

MEDIAN HOUSEHOLD INCOME: \$44,997

BELOW POVERTY LINE: 16.9%

LOS ANGELES, CALIFORNIA

MAYOR ERIC GARCETTI

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • EVICTION • LOW-PAYING JOBS 	<ul style="list-style-type: none"> • EVICTION • FAMILY DISPUTES • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to increase moderately as well.

Profile of Homelessness

- The number of homeless families decreased by 23 percent and the number of homeless unaccompanied individuals increased by 40 percent over the last year.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away homeless families and homeless individuals.
- City officials estimate that 16 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families to decrease moderately, the number of homeless individuals to increase moderately, and resources to provide emergency shelter to decrease substantially.

POPULATION: 3,857,799

METRO UNEMPLOYMENT RATE: 8.6%

MEDIAN HOUSEHOLD INCOME: \$50,028

BELOW POVERTY LINE: 20.2%

LOUISVILLE, KENTUCKY

MAYOR GREG FISCHER

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • SUBSTANCE ABUSE 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 4 percent over the past year.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to increase moderately as well.

Profile of Homelessness:

- The number of homeless families increased by 11 percent and the number of homeless individuals increased by 2 percent over the past year.
- Among homeless adults, 28 percent are severely mentally ill, 11 percent are employed, 10 percent are victims of domestic violence, 9 percent are physically disabled, 8 percent are veterans, and 1 percent are HIV positive.
- To accommodate an increase in demand, shelters had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; distribute vouchers for hotel or motel stays because shelter beds were not available; and increase the number of shelter beds.
- Homeless shelters had to turn away homeless families and homeless individuals because there were no beds available for them.
- City officials estimate that 4 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families to increase moderately, the number homeless individuals to continue at about the same level, and resources to provide emergency shelter to decrease moderately.

POPULATION: 605,110

METRO UNEMPLOYMENT RATE: 7.6%

MEDIAN HOUSEHOLD INCOME: \$43,680

BELOW POVERTY LINE: 17.5%

MEMPHIS, TENNESSEE

MAYOR A.C. WHARTON, JR.

REPORTED CAUSES	HOMELESSNESS	
	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • FAMILY DISPUTES • UNEMPLOYMENT • POVERTY

Profile of Homelessness:

- The number of homeless families decreased by 5 percent and the number of homeless individuals remained the same over the past year.
- Among homeless adults, 30 percent are severely mentally ill, 12 percent are veterans, 10 percent each are employed, victims of domestic violence, and physically disabled, and 5 percent are HIV positive.
- To accommodate an increase in the demand for shelter, shelters had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements, and to distribute vouchers for hotel or motel stays because shelter beds are not available.
- Homeless shelters did not have to turn away homeless individuals but did have to turn away homeless families.
- For the next year, city officials expect the number of homeless families to decrease moderately and the number of homeless individuals to continue at about the same level. They expect resources to provide emergency shelter to decrease substantially.

POPULATION: 655,155

METRO UNEMPLOYMENT RATE: 9.5%

MEDIAN HOUSEHOLD INCOME: \$37,072

BELOW POVERTY LINE: 26.0%

NASHVILLE, TENNESSEE

MAYOR KARL DEAN

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • HIGH HOUSING COSTS • MEDICAL OR HEALTH COSTS 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • DOMESTIC VIOLENCE • POVERTY

Profile of Hunger:

- During the last year, requests for emergency food assistance were at the same level as the previous year.
- Among persons requesting assistance, 21 percent are employed, 9 percent are elderly, and 9 percent are homeless.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- For the next year, city officials expect requests for food assistance to increase substantially and resources to provide food assistance to be reduced moderately.

Profile of Homelessness:

- The number of homeless families increased by one-fourth and the number of homeless individuals increased by 3 percent over the past year.
- Among homeless adults, 57 percent are employed, 35 percent are severely mentally ill, 30 percent are victims of domestic violence, 15 percent are veterans, and 7 percent are HIV positive.
- To accommodate an increase in the demand for shelter, shelters had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; reduce the maximum length of stay at a shelter; and put families and individuals wanting transitional housing on a waiting list.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- City officials estimate that 30 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of both homeless families and homeless individuals to increase moderately and resources to provide emergency shelter to continue at about the same level.

POPULATION: 624,496

METRO UNEMPLOYMENT RATE: 6.6%

MEDIAN HOUSEHOLD INCOME: \$46,141

BELOW POVERTY LINE: 18.2%

NORFOLK, VIRGINIA

MAYOR PAUL D. FRAM

REPORTED CAUSES	HOMELESSNESS	
	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none">• MENTAL ILLNESS AND LACK OF NEEDED SERVICES• LACK OF AFFORDABLE HOUSING• UNEMPLOYMENT	<ul style="list-style-type: none">• MENTAL ILLNESS AND LACK OF NEEDED SERVICES• LACK OF AFFORDABLE HOUSING• UNEMPLOYMENT

Profile of Homelessness:

- The number of homeless families decreased by one-fourth and the number of homeless individuals increased by 12 percent over the past year.
- Among homeless adults, 9 percent are veterans, 10 percent are severely mentally ill, 9 percent are victims of domestic violence, and 2 percent are HIV positive.
- To accommodate an increase in the demand for shelter, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away homeless individuals but did not have to turn away homeless families.
- City officials estimate that 34 percent of the demand for emergency shelter went unmet.
- For the next year, city officials expect the number of homeless families and homeless individuals to decrease moderately and resources to provide emergency shelter to decrease moderately as well.

POPULATION: 245,782

MEDIAN HOUSEHOLD INCOME: \$43,914

METRO UNEMPLOYMENT RATE: 6.0%

BELOW POVERTY LINE: 17.1%

PHILADELPHIA, PENNSYLVANIA

MAYOR MICHAEL A. NUTTER

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • LACK OF SNAP BENEFITS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • EVICTION • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 7 percent over the past year.
- Among persons requesting food assistance, 55 percent are employed, 43 percent are in families, 28 percent are elderly, and 15 percent are homeless.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- One-fourth of the demand for emergency food assistance is estimated to have gone unmet.
- For the next year, city officials expect requests for food assistance to increase substantially while resources to provide food assistance decrease moderately.

Profile of Homelessness:

- The number of homeless families increased by 1 percent and the number of homeless individuals stayed the same over the past year.
- Among homeless adults, one-third are severely mentally ill, 11 percent are victims of domestic violence, 11 percent are veterans, 10 percent are employed, 3 percent are HIV positive, and 2 percent are physically disabled.
- To accommodate increased demand, shelters have had to increase the number of persons or families that can sleep in a single room, and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away homeless families but not homeless individuals.
- City officials estimate that 48 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families and homeless individuals to increase moderately and resources to provide emergency shelter to continue at about the same level.

POPULATION: 1,547,607

METRO UNEMPLOYMENT RATE: 7.6%

MEDIAN HOUSEHOLD INCOME: \$36,957

BELOW POVERTY LINE: 25.6%

PHOENIX, ARIZONA

MAYOR GREG STANTON

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • UNEMPLOYMENT • EVICTION • LACK OF FINANCIAL RESOURCES 	<ul style="list-style-type: none"> • UNEMPLOYMENT • EVICTION • LACK OF FINANCIAL RESOURCES

Profile of Hunger:

- Requests for emergency food assistance increased by 6 percent over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- One-fifth of the demand for emergency food assistance is estimated to have gone unmet.
- For the next year, food bank officials expect requests for food assistance to increase moderately while resources to provide food assistance decrease substantially.

Profile of Homelessness:

- The number of homeless families and homeless individuals remained the same over the past year.
- Among homeless adults, 35 percent are severely mentally ill, 19 percent are victims of domestic violence, 15 percent are employed, 11 percent are physically disabled, 8 percent are veterans, and 1 percent are HIV positive.
- To accommodate increased demand, shelters had to increase the number of persons or families that can sleep in a single room, and to reduce the length of stay in order to serve more people with existing emergency shelter beds and units.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- City officials estimate that 45 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families to continue at about the same level and the number of homeless individuals to decrease moderately; resources to provide emergency shelter are expected to continue at about the same level.

POPULATION: 1,488,750

METRO UNEMPLOYMENT RATE: 6.8%

MEDIAN HOUSEHOLD INCOME: \$48,596

BELOW POVERTY LINE: 20.3%

PLANO, TEXAS

MAYOR HARRY LAROSILIERE

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • MEDICAL OR HEALTH COSTS • POVERTY 	<ul style="list-style-type: none"> • EVICTION • FAMILY DISPUTES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • EVICTION • FAMILY DISPUTES • UNEMPLOYMENT

Profile of Hunger:

- Requests for emergency food assistance stayed the same during the last year.
- Among persons requesting food assistance, 30 percent are employed, 30 percent are elderly, and 20 percent are homeless.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens.
- For the next year, food pantry officials expect requests both for food assistance and resources to provide food assistance to increase substantially.

Profile of Homelessness:

- The number of homeless families and homeless individuals increased over the past year.
- Among homeless adults, 31 percent are employed, 19 percent are victims of domestic violence, 15 percent are severely mentally ill, 9 percent are physically disabled, and 7 percent are veterans.
- Homeless shelters had to turn away both homeless families and homeless individuals.

POPULATION: 272,068

METRO UNEMPLOYMENT RATE: 5.9%

MEDIAN HOUSEHOLD INCOME: \$82,901

BELOW POVERTY LINE: 7.1%

PROVIDENCE, RHODE ISLAND

MAYOR ANGEL TAVERAS

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • HIGH HOUSING COSTS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 6 percent over the past year.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- For the next year, city officials expect a moderate increase in requests for food assistance but a substantial decrease in resources to provide food assistance.

Profile of Homelessness:

- The number of homeless families decreased by 1 percent and the number of homeless individuals decreased by 6 percent over the past year.
- Among homeless adults, 26 percent are victims of domestic violence, one-fourth are employed, 24 percent are severely mentally ill, 16 percent are physically disabled, 9 percent are veterans, and 1 percent are HIV positive.
- To accommodate an increase in the demand for shelter, shelters had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; and convert buildings into temporary shelters.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- City officials estimate that 10 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families and of homeless individuals to stay at about the same level, and resources to provide emergency shelter to increase substantially.

POPULATION: 178,432

METRO UNEMPLOYMENT RATE: 8.6%

MEDIAN HOUSEHOLD INCOME: \$38,922

BELOW POVERTY LINE: 27.7%

SAINT PAUL, MINNESOTA

MAYOR CHRIS COLEMAN

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • HIGH HOUSING COSTS • LACK OF SNAP BENEFITS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance stayed the same over the past year.
- Among people requesting emergency food assistance, 69 percent are employed and 45 percent are members of families.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens.
- For the next year, city officials expect requests for food assistance to increase substantially and resources to provide food assistance to continue at about the same level.

Profile of Homelessness:

- The number of homeless families increased by 8 percent and the number of homeless individuals increased by 7 percent over the past year.
- Among homeless adults, 55 percent are severely mentally ill, 20 percent are employed, 19 percent are veterans, 17 percent are victims of domestic violence, and 1 percent are HIV positive.
- To accommodate an increase in demand, shelters had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; they also had to convert buildings into temporary shelters.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- City officials estimate that 8 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of both homeless families and homeless individuals to increase moderately; resources to provide emergency shelter are expected to continue at about the same level.

POPULATION: 290,770

METRO UNEMPLOYMENT RATE: 4.1%

MEDIAN HOUSEHOLD INCOME: \$45,939

BELOW POVERTY LINE: 22.5%

SALT LAKE CITY, UTAH

MAYOR RALPH BECKER

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • INADEQUATE BENEFITS • MEDICAL OR HEALTH COSTS • LACK OF SNAP BENEFITS 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 15 percent over the past year.
- Among people requesting emergency food assistance, one-fourth are in families, 23 percent are elderly, 17 percent are employed, and 5 percent are homeless.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- Eleven percent of the demand for emergency food assistance is estimated to have gone unmet.
- For the next year, city officials expect that requests for food assistance will increase substantially while resources to provide food assistance decrease moderately.

Profile of Homelessness:

- The number of homeless families decreased by 20 percent and the number of homeless individuals decreased by 10 percent over the past year.
- To accommodate an increase in the demand for shelter, shelters had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; they also had to convert buildings into temporary shelters.
- Homeless shelters did not have to turn away homeless families or homeless individuals.
- For the next year, city officials expect the number of homeless families to continue at about the same level, the number of homeless individuals to increase moderately, and resources to provide emergency shelter to decrease moderately.

POPULATION: 189,314

METRO UNEMPLOYMENT RATE: 4.0%

MEDIAN HOUSEHOLD INCOME: \$44,501

BELOW POVERTY LINE: 17.9%

SAN ANTONIO, TEXAS

MAYOR JULIÁN CASTRO

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • FAMILY DISPUTES • SUBSTANCE ABUSE AND THE LACK OF NEEDED SERVICES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • EVICTION • FAMILY DISPUTES • UNEMPLOYMENT

Profile of Hunger:

- Requests for emergency food assistance increased over the past year.
- Among persons requesting food assistance, 85 percent are in families, 55 percent are elderly, 46 percent are employed, and 10 percent are homeless.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- City officials estimate that 40 percent of the demand for shelter went unmet.
- For the next year, city officials expect requests for food assistance to increase substantially but resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- The number of homeless families and the number of homeless individuals both increased by 11 percent over the past year.
- Among homeless adults, one-third are employed, one-third are severely mentally ill, 29 percent are physically disabled, 30 percent are employed, 26 percent are veterans, 6 percent are victims of domestic violence, and 1 percent are HIV positive.
- To accommodate an increase in demand, shelters had to increase the number of persons or families that can sleep in a single room, consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- City officials estimate that 10 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families to increase moderately, the number of homeless individuals to continue at the same level, and resources to provide emergency shelter to decrease moderately.

POPULATION: 1,382,951

METRO UNEMPLOYMENT RATE: 5.8%

MEDIAN HOUSEHOLD INCOME: \$43,961

BELOW POVERTY LINE: 19.2%

SAN FRANCISCO, CALIFORNIA

MAYOR EDWIN M. LEE

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • HIGH HOUSING COSTS • LACK OF SNAP BENEFITS 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 9 percent over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food persons can receive at each food pantry visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- City officials estimate that 36 percent of the demand for emergency food assistance was unmet.
- For the next year, city officials expect that requests for food assistance will increase substantially but resources to provide food assistance will decrease substantially.

Profile of Homelessness:

- The number of homeless families increased by 8 percent and the number of homeless individuals decreased by 0.3 percent over the past year.
- Among homeless adults, 36 percent are severely mentally ill, 22 percent are employed, 19 percent are physically disabled, 14 percent are domestic violence victims, 10 percent are veterans, and 8 percent are HIV positive.
- To accommodate an increase in demand for shelter, a seasonal family shelter became a year-round program.
- Homeless shelters did not turn away homeless families or homeless individuals.
- For the next year, city officials expect the number of both homeless families and homeless individuals to continue at about the same level; resources to provide emergency shelter are expected to increase moderately.

POPULATION: 825,863

METRO UNEMPLOYMENT RATE: 6.2%

MEDIAN HOUSEHOLD INCOME: \$72,947

BELOW POVERTY LINE: 12.3%

SANTA BARBARA, CALIFORNIA

MAYOR HELENE SCHNEIDER

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • HIGH HOUSING COSTS • LACK OF SNAP BENEFITS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • EVICTION • POVERTY

Profile of Hunger:

- Requests for emergency food assistance decreased by 5 percent.
- Nine percent of the persons requesting food assistance are elderly.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources and reduce the quantity of food persons can receive at each food pantry visit.
- City officials estimate that 10 percent of the demand for emergency food assistance has gone unmet.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to continue to decrease moderately.

Profile of Homelessness:

- The number of homeless families and individuals stayed the same over the past year.
- Among homeless adults, 32 percent are severely mentally ill, 27 percent are employed, 23 percent are physically disabled, 19 percent are victims of domestic violence, and 14 percent are veterans.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; distribute vouchers for hotel or motel stays because shelter beds were not available; and use mats.
- Homeless shelters had to turn away both homeless families and individuals because beds were not available.
- City officials estimate that 15 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families and individuals to increase moderately and resources to provide emergency shelter to decrease moderately.

POPULATION: 89,639

MEDIAN HOUSEHOLD INCOME: \$63,401

METRO UNEMPLOYMENT RATE: 6.1%

BELOW POVERTY LINE: 14.2%

TRENTON, NEW JERSEY

MAYOR TONY MACK

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 10 percent over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- One-fifth of the demand for emergency food assistance is estimated to have gone unmet.
- For the next year, city officials expect requests for food assistance to increase moderately but resources to provide food assistance to decrease substantially.

Profile of Homelessness:

- The number of homeless families decreased by one-third and the number of homeless individuals increased by 9 percent over the past year.
- Among homeless adults, 22 percent are severely mentally ill, 9 percent are employed, 9 percent are physically disabled, 6 percent are veterans, 5 percent are victims of domestic violence, and 1 percent are HIV positive.
- To accommodate an increase in demand, shelters had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; they also increased use of expanded shelter capacity which previously was limited to severe weather emergencies.
- Homeless shelters did not turn away homeless families or homeless individuals.
- For the next year, city officials expect the number of homeless families to increase moderately, the number of homeless individuals to increase substantially, and resources to provide emergency shelter to decrease moderately.

POPULATION: 84,477

METRO UNEMPLOYMENT RATE: 6.6%

MEDIAN HOUSEHOLD INCOME: \$37,219

BELOW POVERTY LINE: 25.6%

WASHINGTON, DC

MAYOR VINCENT C. GRAY

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LOW-PAYING JOBS • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • EVICTION • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 12 percent over the past year.
- For the next year, city officials expect resources to provide food assistance to increase substantially.

Profile of Homelessness:

- The number of homeless families increased by 7.4 percent and the number of homeless individuals increased by 8.5 percent over the past year.
- Among homeless adults, 23 percent are severely mentally ill, 20 percent are employed, 18 percent are physically disabled, 15 percent are victims of domestic violence, 12 percent are veterans, and 5 percent are HIV positive.
- To accommodate an increase in demand, shelters had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; convert buildings into temporary shelters; and distribute vouchers for hotel or motel stays because shelter beds were not available
- Homeless shelters had to turn away both homeless families and homeless individuals.
- For the next year, city officials expect the number of homeless families, the number of homeless individuals, and resources to provide emergency shelter to continue at about the same level.

POPULATION: 632,323

METRO UNEMPLOYMENT RATE: 5.9%

MEDIAN HOUSEHOLD INCOME: \$61,835

BELOW POVERTY LINE: 18.2%

Appendix A

City Data on Hunger

POUNDS OF FOOD DISTRIBUTED OVER THE PAST YEAR

City	Pounds of Food	Increase/Decrease/Same	Percent Change
Asheville	3,520,775	increased	10
Boston	15,000,000	increased	9.1
Charleston	2,000,000	same	
Charlotte	37,363,273	increased	3
Chicago	66,043,881	increased	4.1
Cleveland	36,600,000	increased	3.4
Dallas	5,739,240	increased	9
Des Moines	1,272,227	increased	14.5
Los Angeles	53,425,562	increased	10.5
Louisville	16,231,287	same	
Nashville	3,274,149	increased	11
Philadelphia	14,312,713	decreased	-32
Phoenix	45,704,555	decreased	0
Plano	94,404	increased	30
Providence	4,407,170	increased	5
Saint Paul	76,000,000	increased	6
Salt Lake City	36,329,674	increased	6
San Antonio	49,225,291	increased	5
San Francisco	40,085,524	decreased	-2
Santa Barbara	947,256	increased	4
Trenton	2,655,423	increased	8
Washington, DC	47,000,000	increased	42

BUDGET FOR EMERGENCY FOOD ASSISTANCE OVER THE PAST YEAR

City	Total Budget	Increase/Decrease/Same	Percent Change
Asheville	1,319,604	decreased	-14
Boston	9,000,000	increased	13.7
Charleston	121,827	increased	27
Charlotte	1,311,484	decreased	-40
Chicago	31,233,415	increased	10
Cleveland	18,500,000	increased	7.6
Dallas	87,722,611	increased	5
Denver		increased	1
Des Moines	1,374,831	increased	11
Louisville	31,500,000	increased	5
Nashville	1,883,024	same	
Philadelphia	3,794,771	decreased	-32
Phoenix	2,100,000	same	
Plano		increased	7
Providence	2,446,295	decreased	-7
Salt Lake City	7,911,195	increased	12
San Antonio	108,000,000	increased	16
San Francisco	12,100,000	decreased	-4
Santa Barbara	98,241	decreased	-19.3
Trenton	575,825	increased	2
Washington, DC	4,000,000	same	

SOURCES OF FOOD DISTRIBUTED, BY PERCENT

City	Federal Emergency Food Assistance	Donations From Grocery Chains/Other Food Suppliers	Donations From Individuals	Purchased Food	Other
Asheville	14	57	3	22	4
Boston	13	50		37	
Charleston	24	69	2	5	
Charlotte	13	79	4	3	1
Chicago	14	26	1	11	48
Cleveland	19	33	3	22	23
Dallas	21	44	3	32	
Denver	24	55	2	19	
Des Moines	1	1	0	78	20
Gastonia	5	55	29	10	1
Los Angeles	44	48	2	6	0
Louisville	22	66	4	8	0
Minneapolis	16	64	2	18	
Nashville	5	38	25	29	3
Norfolk	10	73	5	12	
Philadelphia	30	27	5	38	
Phoenix	18	62	5	14	1
Portland	15	50	5	30	0
Saint Paul		62	16		22
Salt Lake City	20	70	8	2	
San Antonio	35	25	20	20	0
San Francisco	15	72	2	11	0
Trenton	40	15	12	33	0
Washington, DC	10	60	0	30	

NUMBER OF REQUESTS FOR EMERGENCY FOOD ASSISTANCE

City	Increased/Decreased/Stayed the Same	Percent Change
Asheville	increased	6
Boston	increased	
Charleston	increased	5.25
Charlotte	increased	10
Chicago	increased	6
Cleveland	increased	5
Dallas	increased	11
Denver	increased	
Des Moines	increased	9
Los Angeles	increased	
Louisville	increased	4
Nashville	same	
Philadelphia	increased	7
Phoenix	increased	6
Plano	same	
Providence	increased	6
Saint Paul	same	
Salt Lake City	increased	15
San Antonio	increased	
San Francisco	increased	9
Santa Barbara	decreased	-5
Trenton	increased	10
Washington, DC	increased	12

PERSONS REQUESTING FOOD ASSISTANCE BY CATEGORY

City	Percent In Families	Percent Elderly	Percent Employed	Percent Homeless
Asheville		20		
Boston	83	17	65	
Charleston	32	17	30	2
Charlotte	88	12		
Cleveland	59	20		
Denver	61	22		8
Des Moines	56	7	50	4
Nashville		9	21	9
Philadelphia	43	28	55	15
Plano		30	30	20
Saint Paul	45		69	
Salt Lake City	25	23	17	5
San Antonio	85	55	46	10
Santa Barbara		9		

OUTLOOK FOR NEXT YEAR

City	Expected Requests for Emergency Food Assistance Over Next Year	Expected Resources to Provide Emergency Food Assistance Over Next Year
Asheville	increase moderately	decrease moderately
Boston	increase substantially	decrease moderately
Charleston	increase moderately	decrease substantially
Charlotte	increase substantially	
Chicago	increase moderately	decrease moderately
Cleveland	increase substantially	same
Dallas	same	decrease moderately
Denver	increase substantially	decrease moderately
Des Moines	increase substantially	decrease substantially
Los Angeles	increase moderately	increase moderately
Louisville	increase moderately	increase moderately
Nashville	increase substantially	decrease moderately
Philadelphia	increase substantially	decrease moderately
Phoenix	increase moderately	decrease substantially
Plano	increase substantially	increase substantially
Providence	increase moderately	decrease substantially
Saint Paul	increase substantially	same
Salt Lake City	increase substantially	decrease moderately
San Antonio	increase substantially	decrease moderately
San Francisco	increase substantially	decrease substantially
Santa Barbara	increase moderately	decrease moderately
Trenton	increase moderately	decrease substantially
Washington, DC		increase substantially

Appendix B

City Data on Homelessness

CHANGES IN THE NUMBER OF PERSONS EXPERIENCING HOMELESSNESS OVER PAST YEAR

City	Total Persons	Percent Change	Homeless Families	Percent Change	Unaccompanied Individuals	Percent Change
Asheville	increased	8	increased	8	decreased	-10
Boston	increased	16	increased	14	increased	13
Charleston	increased	24	increased	29	increased	2
Charlotte	decreased	-6	increased	10	decreased	-17.5
Chicago	decreased	-11	increased	11.4		
Cleveland	decreased	-4	increased	15.5	decreased	-9.4
Dallas	decreased	-14	decreased	-35	increased	24
Denver	increased	15	increased	13	increased	16
Des Moines	decreased	-20	decreased	-18.3	decreased	-23.8
Los Angeles	increased	26	decreased	-23	increased	40
Louisville	increased	2	increased	11	increased	2
Memphis	decreased	-2	decreased	5	same	
Nashville	increased	5	increased	25	increased	3
Norfolk	increased	8.66	decreased	-25	increased	12
Philadelphia	decreased	-1	increased	1	same	
Phoenix	same		same		same	
Plano	increased		increased		increased	
Providence	decreased	-6	decreased	-1	decreased	-6
Saint Paul	increased	8	increased	8	increased	7
Salt Lake City	decreased	-14.1	decreased	-20.3	decreased	-10
San Antonio	increased	11	increased	11	increased	11
San Francisco	same		increased	8	decreased	-0.3
Santa Barbara	same		same		same	
Trenton	increased	12	increased	33	increased	9
Washington, DC	increased	8.5	increased	7.4	increased	8.5

NUMBER OF HOMELESS PEOPLE BY LOCATION AND CATEGORY ON AVERAGE NIGHT

City	On the Streets			In Emergency Shelter			In Transitional Housing		
	Single Adults	Persons in Families	Unaccompanied Youth	Single Adults	Persons in Families	Unaccompanied Youth	Single Adults	Persons in Families	Unaccompanied Youth
Asheville	57	0	0	199	44	7	218	48	0
Boston	193	0	192	1377	2957	14	955	383	19
Charleston	205	0	0	103	6	0	20	22	0
Charlotte	283	0	0	714	234	4	293	888	2
Chicago	1197			106	202		624	1399	
Cleveland	77	0	0	842	288	7	585	311	0
Denver	266	59	20	556	323	67	267	900	20
Des Moines				308	115	3	188	224	2
Los Angeles	19790	1286	581	2672	1373	43	2401	1483	53
Louisville	63	0	0	553	206	10	314	289	0
Memphis	156	0	0	356	105	0	639	560	0
Nashville	250	0	0	1030	174	4	490	144	1
Norfolk	35	0	0	361	0	0	64	86	0
Philadelphia	526	0	0	1823	1394	21	600	1181	1
Phoenix	1486	89	6	1431	740	6	493	1600	13
Providence	109	8	0	562	286	46	170	228	24
Saint Paul	53	8	10	374	226	23	212	503	6
Salt Lake City				32	34	14	322	321	293
San Antonio	1243	0	0	647	383	1	178	432	4
San Francisco	3073	33	114	1412	385	11	560	438	0
Santa Barbara	375	25	20	285	70	5	330	24	
Trenton	45	21	0	197	141	0	137	126	0
Washington, DC	512	0	0	2453	1551	6	725	1618	0

NUMBER OF UNDUPLICATED HOMELESS PERSONS BY LOCATION AND CATEGORY OVER PAST YEAR

City	In Emergency Shelter				In Transitional Housing			
	Single Adults	Persons in Families	Unaccompanied Youth	Total Persons in Emergency Shelter	Single Adults	Persons in Families	Unaccompanied Youth	Total Persons in Transitional Housing
Asheville	1500	150	28	1678	400	150	0	550
Boston	11510	5521	635	17666	3522	810	35	4367
Charleston	946	98	0	1044	104	34	0	138
Charlotte	714	234	4	952	293	888	2	1183
Chicago	1049			1049	3060	4996		8056
Cleveland	4634	1487	121	6242	1248	522	0	1770
Dallas	1114	556	13	1683	538	636	4	1178
Denver	5057	2753	108	7918	7100	7105	108	14313
Des Moines	689	802	10	1501	474	485	10	969
Los Angeles	2831	780	42	3653	2078	1942	12	4032
Louisville	4875	1071	580	6526	871	496	0	1367
Memphis	3013	612	0	3625	1006	1129	0	2135
Nashville	7100	1644	36	8780	743	268	10	1021
Norfolk	361	0	0	361	64	86	0	150
Philadelphia	6437	4638	328	11403	904	1936	0	2840
Phoenix	7066	3688	219	10973	442	587	1	1030
Providence	2337	1138	6	3481				0
Saint Paul	374	226	23	623	296	411	0	707
Salt Lake City	1212	768	5	1985	212	503	6	721
San Antonio	3540	1465	0	5005	146			146
San Francisco	8225	1744	11	9980	635	765	1	1401
Santa Barbara	1920	339	2	2261	560	438	0	998
Trenton	1443	569	0	2012	488	40		528
Washington, DC	9826	835	13	10674	406	265	9	680

**NUMBER OF UNACCOMPANIED INDIVIDUALS AND PERSONS IN FAMILIES
WHO ENTERED PERMANENT SUPPORTIVE HOUSING OVER PAST YEAR**

City	Unaccompanied Individuals	Persons in Families
Asheville	100	6
Boston	539	45
Charleston	1	
Charlotte	169	32
Chicago	1697	288
Cleveland	303	84
Dallas	448	98
Des Moines	86	127
Los Angeles	71	31
Louisville	188	51
Memphis	152	7
Nashville	444	122
Norfolk	109	29
Philadelphia	533	327
Phoenix	403	144
Plano		10
Providence	77	11
San Antonio	801	637
San Francisco	848	13
Santa Barbara	155	48
Trenton	63	44
Washington, DC	493	217

HOMELESS ADULTS BY CATEGORY

City	Percent Employed	Percent Veterans	Percent Physically Disabled	Percent HIV Positive	Percent Severely Mentally Ill	Percent Domestic Violence Victims
Asheville	10	15	20	10	40	60
Boston	14	12	28	1	19	7
Charleston	14	29	25	1	33	10
Charlotte		5		1	10	7
Chicago	12	6	30	4	28	20
Cleveland	19	17	24	1	24	7
Dallas	22	18		5	44	17
Denver	30	12	23	3	26	12
Des Moines	22	12	16	1	42	28
Los Angeles	8	13	20	1	33	10
Louisville	11	8	9	1	28	10
Memphis	10	12	10	5	30	10
Nashville	57	15	18	7	35	30
Norfolk	0	9	0	2	10	9
Philadelphia	10	11	2	3	33	11
Phoenix	15	8	11	1	35	19
Plano	31	7	9		15	19
Providence	25	9	16	1	24	26
Saint Paul	20	19		1	55	17
San Antonio	33	26	29	1	33	6
San Francisco	22	10	19	8	36	14
Santa Barbara	27	14	23	0	32	19
Trenton	9	6	9	1	22	5
Washington, DC	20	12	18	5	23	15

NUMBER OF BEDS BY CATEGORY AVAILABLE FOR HOMELESS PERSONS DURING PAST YEAR

City	Total Number of Beds			Total Number of HMIS Participating Beds			Number of New Beds Added During Past Year		
	Emergency Shelter	Transitional Housing	Permanent Supportive Housing	Emergency Shelter	Transitional Housing	Permanent Supportive Housing	Emergency Shelter	Transitional Housing	Permanent Supportive Housing
Asheville	207	280	530	91	250	530	0	0	100
Boston	4403	1403	5421	3710	1101	3837	0	0	393
Charleston	120	34	5	120	34	5	6	0	0
Charlotte	1038	1013	820	775	863	522	114	0	161
Chicago	2260	3381	7745	1501	2776	7745	50	84	256
Cleveland	1193	930	3911	822	873	3120	0	0	95
Dallas	2150	1590	2557	0	952	1944	0	0	580
Denver	1231	2248	1143	1043	1929	1082	200	73	69
Des Moines	508	438	588	479	358	407	48	69	44
Los Angeles	4372	5040	10742	2070	2995	4220	550	0	771
Louisville	692	600	1660	603	600	1327	69	0	79
Memphis	451	1544	803	80	86	25	26	95	108
Nashville	1211	798	1260	72	423	785	113	53	213
Norfolk	498	151	428	349	125	428	0	0	6
Philadelphia	3428	1998	5409	2634	1686	4879	200	0	462
Phoenix	2556	3079	4847	1716	2335	3615	0	87	675
Plano		200							
Providence	678	465	1582	585	410	1417	21	0	33
Saint Paul	616	606	1717	616	606	1717	50	0	8
Salt Lake City	1771	781	1590	1771	781	1590	0	0	5
San Antonio	1313	742	1525	1151	622	1525	0	0	0
San Francisco	1907	1073	7427	1403	696	5940	70	90	284
Santa Barbara	315	335	352	200	70	0	0	0	24
Trenton	332	357	268	251	325	168	0	0	63
Washington, DC	4352	2782	7293	3794	2340	4667	0	0	855

OUTLOOK FOR NEXT YEAR

City	Expected Number of Homeless Families Over Next Year	Expected Number of Homeless Individuals Over Next Year	Expected Resources to Provide Emergency Shelter Over Next Year
Asheville	increase moderately	same	same
Boston	increase substantially	increase moderately	increase moderately
Charleston	same	same	decrease substantially
Charlotte	increase moderately	decrease moderately	decrease moderately
Chicago	increase moderately	increase moderately	same
Cleveland	same	same	decrease moderately
Dallas	same	increase substantially	decrease moderately
Denver	increase moderately	increase moderately	increase moderately
Des Moines	decrease moderately	decrease moderately	decrease moderately
Los Angeles	decrease moderately	increase moderately	decrease substantially
Louisville	increase moderately	same	decrease moderately
Memphis	decrease moderately	same	decrease substantially
Nashville	increase moderately	increase moderately	same
Norfolk	decrease moderately	decrease moderately	decrease moderately
Philadelphia	increase moderately	increase moderately	same
Phoenix	same	decrease moderately	same
Providence	same	same	same
Saint Paul	increase moderately	increase moderately	same
Salt Lake City	same	increase moderately	decrease moderately
San Antonio	increase moderately	same	decrease moderately
San Francisco	same	same	increase moderately
Santa Barbara	increase moderately	increase moderately	decrease moderately
Trenton	increase moderately	increase substantially	decrease moderately
Washington, DC	same	same	same

Appendix C

City Contacts

HUNGER CONTACT	HOMELESSNESS CONTACT
Asheville, North Carolina	
Katy German Data Coordinator Manna Food Bank 627 Swannanoa River Rd. Asheville, NC 28801 828-299-3663 kgerman@mannafoodbank.org	Heather Dillashaw Homeless Initiative Coordinator City of Asheville Address: - P. O. Box 7148 Asheville, NC 28801 828-259-5851 hdillashaw@ashevillenc.gov
Boston, Massachusetts	
Edith Murnane Director of Food Initiatives Mayor's Office 1 City Hall Square Boston, MA 02118 617-635-1456 edith.murnane@cityofboston.gov	Jim Greene Director, Emergency Shelter Commission Boston Public Health Commission 860 Harrison Avenue Boston, MA 02118 617-534-2718 jgreene@bphc.org
Charleston, South Carolina	
Lucy Lytle Resources Development Manager Lowcountry Food Bank 2864 Azalea Drive Charleston, SC 29405 843-747-8146 llytle@lcfbank.org	Anthony Haro Executive Director Lowcountry Homeless Coalition PO Box 20038 Charleston, SC 29413 843-723-9477 anthony@lowcountryhomelesscoalition.org
Charlotte, North Carolina	
Kathy Helms Manager of Agency Services and Programs Second Harvest Food Bank of Metrolina 500-B Spratt Street Charlotte, NC 28206 kfhelms@secondharvest.org 704-375-9639 ext 15	Rebecca Pfeiffer CoC Co-Chair City of Charlotte 600 East Trade Street Charlotte, NC 28202 rpfeiffer@charlottenc.gov 704-336-2266
Chicago, Illinois	
Lorrie Walls Assistant Director The Chicago Department of Family & Support Services 1615 West Chicago Ave. Chicago, IL 60622 312-746-8271 lorrie.walls@cityofchicago.org	Lorrie Walls Assistant Director The Chicago Department of Family & Support Services 1615 West Chicago Ave. Chicago, IL 60622 312-746-8271 lorrie.walls@cityofchicago.org

HUNGER CONTACT	HOMELESSNESS CONTACT
Cleveland, Ohio	
Mary O'Shea Director of Advocacy & Public Education Cleveland Foodbank 15500 South Waterloo Road Cleveland, OH 44110 216-738-2135 moshea@clevelandfoodbank.org	William Resseger Executive Assistant Department of Community Development 320 City Hall Cleveland, OH 44114 216-664-2351 bresseger@city.cleveland.oh.us
Dallas, Texas	
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Denver, Colorado	
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Appendix D

Survey Instrument

The U.S. Conference of Mayors 2013 Status Report on Hunger and Homelessness Survey Instrument

The deadline to submit information is Friday, November 1, 2013

Contact information for the person(s) who can answer questions about the data submitted in this survey:

*** Hunger Contact Person**

Name: _____
Title: _____
Agency: _____
Address: _____
City: _____
State: _____
ZIP/Postal Code: _____
Email Address: _____
Phone Number: _____

*** Homelessness Contact Person**

Name: _____
Title: _____
Agency: _____
Address: _____
City: _____
State: _____
ZIP/Postal Code: _____
Email Address: _____
Phone Number: _____

PART I: HUNGER

Supply of Emergency Food

The following questions are addressed to the primary supplier of emergency food assistance in your city. In most cases this will be the food bank that supplies food pantries and emergency kitchens in your city. If there are multiple central distributors of emergency food assistance in your area, please distribute these survey questions to each of them and collate the results.

The year covered by this survey is September 1, 2012 – August 31, 2013. If you do not have data for this 12-month period, what 12-month period are you reporting on?

1. How many pounds of food did you distribute over the last year?

Pounds of food _____

2. Did the total quantity of food distributed ___ increase, ___ decrease, or ___ stay the same over the last year?

2. a) If increased or decreased, by what percent? _____

3. What was your total budget for emergency food assistance this year? (Please include both private and public – federal, state, and local – funding.) _____

4. Did your total budget for emergency food purchases ___ increase, ___ decrease, or ___ stay the same over the last year?

4. a) If increased or decreased, by what percent? _____

5. What percentage of the food you distributed came from the following sources?

(NOTE: The sum of the food distribution by source must equal 100%)

a. Federal emergency food assistance _____

b. Donations from grocery chains/other food suppliers _____

c. Donations from individuals _____

d. Purchased food _____

e. Other _____

6. Over the last year, have you made any significant changes to the types of food that you purchase?

___ Yes ___ No

6.a) If yes, please explain.

7. What do you expect will be your biggest challenge in addressing hunger in your area in the coming year?

Persons Receiving Emergency Food Assistance

8. Has the total number of requests for emergency food assistance in your city or county ___ increased, ___ decreased, or ___ stayed the same during the last year?

8. a) If increased or decreased, by what percent? _____

9. If information is available: What percent of requests for emergency food assistance came from persons in the following categories? (NOTE: The categories are not mutually exclusive and the same person can be included in more than one group.)

- a. Persons in families _____
- b. Elderly persons _____
- c. Persons who are employed _____
- d. Persons who are homeless _____

10. Over the last year, has there been an increase in the **number** of persons requesting food assistance for the first time? _____ Yes _____ No

10a. If yes, would you characterize this increase as moderate or substantial?

_____ Moderate

_____ Substantial

11. Over the last year, has there been an increase in the **frequency** of persons visiting food pantries and/or emergency kitchens each month? _____ Yes _____ No

11a. If yes, would you characterize this increase as moderate or substantial?

_____ Moderate

_____ Substantial

Unmet Need for Emergency Food Assistance

12. Over the last year, have emergency kitchens and/or food pantries had to take any of the following actions? (Check all that apply)

_____ Turn additional people away because of lack of resources

_____ Reduce the quantity of food persons can receive at each food pantry visit and/or the amount of food offered per meal at emergency kitchens

_____ Reduce the number of times a person or family can visit a food pantry each month

13. Please estimate the percentage of the overall demand for emergency food assistance in your city that was unmet over the past year. (NOTE: This is the percentage of all persons needing assistance who did not receive it.) _____

Causes of Hunger

14. What are the **THREE** main causes of hunger in your city?

_____ Unemployment

_____ Low wages

_____ High housing costs

_____ Inadequate benefits (e.g., TANF, SSI)

_____ Medical or health costs

_____ Substance abuse

_____ Utility costs

_____ Lack of SNAP benefits

_____ Lack of education

_____ Poverty

_____ Other

_____ If other, please specify.

Policy and Programs Addressing Hunger

15. What are the top **THREE** things your city needs to help reduce hunger?

- ☐ Substance abuse/mental health services
 - ☐ Employment training programs
 - ☐ More jobs
 - ☐ Utility assistance programs
 - ☐ More affordable housing
 - ☐ Increase in SNAP benefits
 - ☐ Lower gas prices/ better public transportation
 - ☐ Other
- ____ If other, please specify.

16. The House of Representatives has passed legislation that would cut the Supplemental Nutrition Assistance Program by at least \$39 billion over 10 years. The Congressional Budget Office estimates the bill would deny SNAP benefits to approximately 3.8 million low-income people in 2014 and to an average of nearly 3 million people each year over the coming decade. And, this would come on top of an across-the-board cut in SNAP benefits set to be implemented in November which is estimated to reduce benefits to less than \$1.40 per person per meal.

Please describe the impact that this cut, if enacted, would have in your city, including your estimate of SNAP participants who would be affected, if possible.

17. Please provide a brief description (250-500 words) of an exemplary program or effort underway in your city which prevents, reduces, or otherwise responds to the problems of hunger.

Outlook for the Next Year

18. Given current projections of economic conditions and unemployment for your city, do you expect requests for emergency food assistance over the next year to:

- ☐ Continue at about the same level?
- ☐ Increase moderately?
- ☐ Increase substantially?
- ☐ Decrease moderately?
- ☐ Decrease substantially?

19. Given the current state of public and private agency budgets, do you expect resources to provide emergency food assistance in your city over the next year to:

- ☐ Continue at about the same level?
- ☐ Increase moderately?
- ☐ Increase substantially?
- ☐ Decrease moderately?
- ☐ Decrease substantially?

PART II: HOMELESSNESS

The year covered by this survey is September 1, 2012 – August 31, 2013. If you do not have data for this 12-month period, what 12-month period are you reporting on?

Persons Experiencing Homelessness

Questions 20 through 27 pertain to the number and characteristics of homeless persons in your city. The best source of information to answer these questions will be your city's Homeless Management Information System (HMIS).

20. Has the ***total number of homeless persons*** in your city ___ increased, ___ decreased, or ___ stayed the same over the past year?

20. a) If increased or decreased, by what percent? _____

21. Has the ***number of homeless families*** in your city ___ increased, ___ decreased, or ___ stayed the same over the past year?

21. a) If increased or decreased, by what percent? _____

22. Has the ***number of homeless unaccompanied individuals*** in your city ___ increased, ___ decreased, or ___ stayed the same over the past year?

22. a) If increased or decreased, by what percent? _____

23. Please provide the following information to report the number of homeless persons in the following categories on an ***average night*** over the last year.

By Household Type: On the Streets

Single adults _____

Persons in families _____

Unaccompanied youths _____

By Household Type: In Emergency Shelter

Single adults _____

Persons in families _____

Unaccompanied youths _____

By Household Type: In Transitional Housing

Single adults _____

Persons in families _____

Unaccompanied youths _____

43. Please provide the following information to report the number of ***unduplicated homeless persons*** in the following categories over the past year.

By Household Type: In Emergency Shelter

Single adults _____

Persons in families _____

Unaccompanied youths _____

By Household Type: In Transitional Housing

Single adults _____

Persons in families _____

Unaccompanied youths _____

25. How many ***unaccompanied individuals*** entered permanent supportive housing over the past year?

Number of individuals who entered supportive housing _____

26. How many ***families*** entered permanent supportive housing over the past year?

Number of families who entered supportive housing _____

27. Please estimate the ***percentage of homeless adults*** in the following categories. (NOTE: The same person can appear in multiple categories.)

Categories of Homeless Adults

Employed _____

Veterans _____

Physically disabled _____

HIV positive _____

Severely mentally ill _____

Domestic violence victims _____

2. Please list below the number of beds available for homeless persons in each housing type during the last year. (If your city participates in the U.S. Department of Housing and Urban Development's Continuum of Care annual application process, this information is readily available on the most recent Housing Inventory Chart.)

By Housing Type: Total Number of Beds

Emergency shelter _____

Transitional housing _____

Permanent supportive housing _____

By Housing Type: Number of HMIS Participating Beds

Emergency shelter _____

Transitional housing _____

Permanent supportive housing _____

By Housing Type: Number of New Beds Added During the Last Year

Emergency shelter _____

Transitional housing _____

Permanent supportive housing _____

29. Have shelters in your city had to make any of the following changes to accommodate an increase in the demand for shelter? (Check all that apply)

____ Increase the number of persons or families that can sleep in a single room

____ Consistently have clients sleep on overflow cots, in chairs, in hallways, or other subpar sleeping arrangements

____ Convert buildings into temporary shelters

____ Distribute vouchers for hotel or motel stays because shelter beds were not available

____ Other

____ If other, please specify.

30. What are the **THREE** main causes of homelessness among *families with children* in your city?

- ☐ Mental illness and the lack of needed services
- ☐ Lack of affordable housing
- ☐ Low-paying jobs
- ☐ Domestic violence
- ☐ Medical or health costs
- ☐ Family disputes
- ☐ Substance abuse and lack of needed services
- ☐ Foreclosure
- ☐ Eviction
- ☐ Loss of home to fire/other disaster
- ☐ Unemployment
- ☐ Poverty
- ☐ Other

If other, please specify.

31. What are the **THREE** main causes of homelessness among *unaccompanied individuals* in your city?

- ☐ Mental illness and the lack of needed services
- ☐ Lack of affordable housing
- ☐ Foreclosure
- ☐ Eviction
- ☐ Low-paying jobs
- ☐ Domestic violence
- ☐ Family disputes
- ☐ Substance abuse and lack of needed services
- ☐ Emancipation from foster care
- ☐ Prisoner reentry
- ☐ Unemployment
- ☐ Poverty
- ☐ Other

If other, please specify.

The Unmet Need for Emergency Shelter

32. Do emergency shelters in your city have to turn away *unaccompanied individuals* experiencing homelessness because there are no beds available for them? ☐ Yes ☐ No

33. Do emergency shelters in your city have to turn away *families with children* experiencing homelessness because there are no beds available for them? ☐ Yes ☐ No

34. Please estimate the percentage of the overall demand for emergency shelter in your city that was unmet over the past year. (NOTE: This is the percentage of all persons needing assistance who did not receive it) _____

Homeless Veterans

The Department of Veterans Affairs has set a goal of ending homelessness among veterans by the end of 2015. HUD and VA continue to fund efforts such as the HUD-VA Supportive Housing Program,

the VA Homeless Grant and Per Diem Program, and the Supportive Services for Veteran Families Program. Last year, HUD's Point in Time count of homeless persons showed a drop of 72 percent in the homeless veterans population between 2011 and 2012 – the continuation of a positive year-to-year trend.

Growing numbers of young veterans in the homeless population have been a concern, however, particularly as the U.S. presence in Iraq and Afghanistan lessens and larger numbers of troops return and separate from military service.

Please describe the status of efforts to serve the homeless veterans population in your city. If possible, please include the following:

35. Has your city been successful in obtaining HUD, VA, and any other funds targeted to homeless veterans? ☐ Yes ☐ No

36. Have your efforts to target homeless veterans been successful in terms of reducing the population?

☐ Yes ☐ No

If yes, please explain.

37. Have your efforts to target homeless veterans been successful in other ways? ☐ Yes ☐ No

If yes, please explain.

38. What additional public or private resources are required in your city to meet the current unmet need for services to veterans?

39. Does your experience suggest that the VA's goal of eliminating veterans' homelessness by the end of 2015 will be reached? ☐ Yes ☐ No

If yes, please explain.

40. Please provide a brief description (250-500 words) of an exemplary program or effort underway in your city which prevents or responds to the problems of homeless veterans.

Policies and Programs Addressing Homelessness

41. During the last year, has your city adopted any policies aimed at preventing homelessness among households that have lost their homes to foreclosure? ☐ Yes ☐ No

If yes, please describe.

42. In previous years has your city adopted any such policies? ☐ Yes ☐ No

If yes, please explain.

43. What are the top THREE things your city needs to help reduce homelessness?

☐ More permanent supportive housing for persons with disabilities

☐ More mainstream assisted housing (e.g., Housing Choice Vouchers)

☐ Better coordination with mental health service providers

☐ More substance abuse services

- ☐ More employment training programs
- ☐ More or better paying employment opportunities
- ☐ Other
- ☐ If other, please specify.

44. Please provide a brief description (250-500 words) of an exemplary program or effort underway in your city which prevents or responds to the problems of homelessness.

Outlook for the Next Year

45. Given current projections of economic conditions, unemployment, and other factors affecting homelessness in your city, do you expect the number of homeless *families* over the next year to:

- ☐ Continue at about the same level?
- ☐ Increase moderately?
- ☐ Increase substantially?
- ☐ Decrease moderately?
- ☐ Decrease substantially?

46. Given current projections of economic conditions, unemployment, and other factors affecting homelessness in your city, do you expect the number of homeless *unaccompanied individuals* over the next year to:

- ☐ Continue at about the same level?
- ☐ Increase moderately?
- ☐ Increase substantially?
- ☐ Decrease moderately?
- ☐ Decrease substantially?

47. Given the current state of public and private agency budgets, do you expect resources to provide emergency shelter in your city over the next year to:

- ☐ Continue at about the same level?
- ☐ Increase moderately?
- ☐ Increase substantially?
- ☐ Decrease moderately?
- ☐ Decrease substantially?

Methodology

48. Please describe the sources of data you used to complete this survey and provide any contextual information that you feel we should have in order to accurately report your data.

Appendix E

List of Past Reports

Since 1982 the U.S. Conference of Mayors has completed numerous reports on hunger, homelessness and poverty in cities. These reports have documented the causes and the magnitude of the problems, how cities were responding to them and what national responses were required. They include:

1. Human Services in FY82: Shrinking Resources in Troubled Times, October 1982
2. Hunger in American Cities, June, 1983
3. Responses to Urban Hunger, October, 1983
4. Status Report: Emergency Food, Shelter and Energy Programs in 20 Cities, January, 1984
5. Homelessness in America's Cities: Ten Case Studies, June, 1984
6. Housing Needs and Conditions in America's Cities, June, 1984
7. The Urban Poor and the Economic Recovery, September, 1984
8. The Status of Hunger in Cities, April, 1985
9. Health Care for the Homeless: A 40-City Review, April 1985
10. The Growth of Hunger, Homelessness and Poverty in America's Cities in 1985: A 25-City Survey, January, 1986
11. Responding to Homelessness in America's Cities, June 1986
12. The Continued Growth of Hunger, Homelessness and Poverty in America's Cities in 1986; A 25-City Survey, December, 1986
13. A Status Report on Homeless Families in America's Cities: A 29-City Survey, May, 1987
14. Local Responses to the Needs of Homeless Mentally Ill Persons, May, 1987
15. The Continuing Growth of Hunger, Homelessness and Poverty in America's Cities: 1987. A 26-City Survey, December, 1987
16. A Status Report on The Stewart B. McKinney Homeless Assistance Act of 1987, June, 1988
17. A Status Report on Hunger and Homelessness in America's Cities: 1988. A 27-City Survey, January, 1989
18. Partnerships for Affordable Housing an Annotated Listing of City Programs, September, 1989
19. A Status Report on Hunger and Homelessness in America's Cities: 1989. A 27-City Survey, December, 1989
20. A Status Report on Hunger and Homelessness in America's Cities: 1990 A 30-City Survey, December, 1990
21. A City Assessment of the 1990 Shelter and Street Night count. A 21-City Survey, June 1991
22. Mentally Ill and Homeless. A 22-City Survey, November 1991
23. A Status Report on Hunger and Homelessness in America's Cities: 1991, A 28-City Survey, December 1991
24. A Status Report on Hunger and Homelessness in America's Cities: 1992 A 29-City Survey, December 1992
25. Addressing Hunger and Homelessness in America's Cities, June 1993
26. A Status Report on Hunger and Homelessness in America's Cities: 1993 A 26-City Survey, December 1993
27. A Status Report on Hunger and Homelessness in America's Cities: 1994. A 30-City Survey, December 1994
28. A Status Report on Hunger and Homelessness in America's Cities: 1995. A 29-City Survey, December 1995
29. A Status Report on Hunger and Homelessness in America's Cities: 1996. A 29-City Survey, December 1996

30. A Status Report on Hunger and Homelessness in America's Cities: 1997, A 29-City Survey, December 1997
31. A Status Report on Hunger and Homelessness in America's Cities: 1998, A 26-City Survey, December 1998
32. A Status Report on Hunger and Homelessness in America's Cities: 1999, A 25-City Survey, December 1999
33. A Status Report on Hunger and Homelessness in America's Cities: 2000, A 29-City Survey, December 2000
34. A Status Report on Hunger and Homelessness in America's Cities: 2001, A 29-City Survey, December 2001
35. A Status Report on Hunger and Homelessness in America's Cities: 2002, A 25-City Survey, December 2002
36. A Status Report on Hunger and Homelessness in America's Cities: 2003, A 25-City Survey, December 2003
37. A Status Report on Hunger and Homelessness in America's Cities: 2004, A 27-City Survey, December 2004
38. A Status Report on Hunger and Homelessness in America's Cities: 2005, A 24-City Survey, December 2005
39. A Status Report on Hunger and Homelessness in America's Cities: 2006, A 23-City Survey, December 2006
40. A Status Report on Hunger and Homelessness in America's Cities: 2007, A 23-City Survey, December 2007
41. A Status Report on Hunger and Homelessness in America's Cities: 2008, A 25-City Survey, December 2008
42. Childhood Anti-Hunger Programs in 24 Cities, November 2009
43. A Status Report on Hunger and Homelessness in America's Cities: 2009, A 27-City Survey, December 2009
44. Strategies to Combat Childhood Hunger in Four U.S. Cities: Case Studies of Boston, New Haven, San Francisco, and Washington, D.C., November 2010
45. A Status Report on Hunger and Homelessness in America's Cities: 2010, A 29-City Survey, December 2010
46. A Status Report on Hunger and Homelessness in America's Cities: 2011, A 29-City Survey, December 2011
47. A Status Report on Hunger and Homelessness in America's Cities: 2012, A 25-City Survey, December 2012



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