

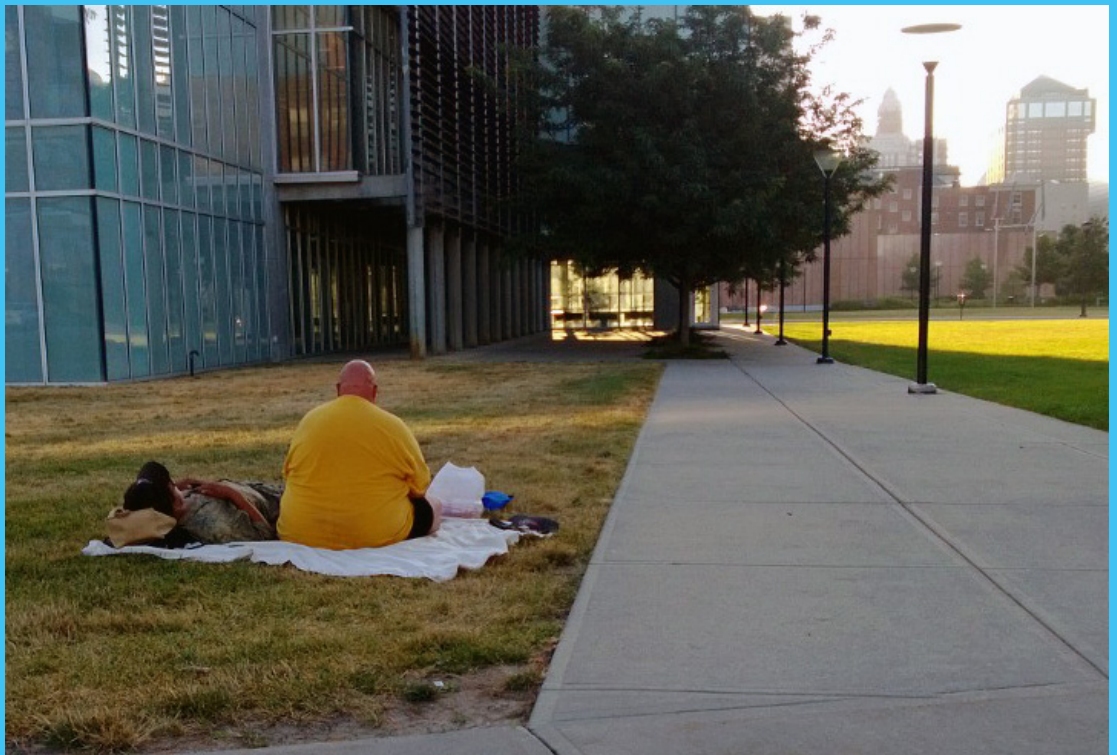


IOWANS EXPERIENCING HOMELESSNESS

January-December 2012
Snapshot of Service and Shelter Use

ica Prepared by the Iowa Institute for Community Alliances

16,238



**16,238 Iowans were homeless in 2012
and served by I-Count agencies**

I-Count is the Statewide Homeless Management Information System (HMIS) used by most homeless agencies across Iowa. Approximately 75% of Emergency and Transitional beds are included in this information network.



THESE
ARE
REAL
PEOPLE
NOT
AN
ESTIMATE

During 2012

19,786
Iowans were
at risk of
homelessness.

2,212 of whom
were in HPRP
homeless prevention

33,969
people in total
were served

16,238
Iowans were
homeless.

650 of whom
were in HPRP
rapid re-housing

Each number is an unduplicated count, although a person may be counted within multiple populations if they were in multiple populations during the year. For example, a person may have been at-risk of homelessness and then become homeless during 2012. 2,055 people overlap the two populations.

The total unduplicated population served in 2012 was 33,969.

Iowa Communities

Polk County

5,137 Homeless (down 3.6%)
2,193 At-Risk (down 42%)

Scott County

1,885 Homeless (up 0.1%)
220 At-Risk (down 11.3%)

Johnson County

998 Homeless (down 12.9%)
51 At-Risk (down 60%)

Linn County

2,210 Homeless (down 8.79%)
6,309 At-Risk (down 22.2%)

Clinton County

392 Homeless (down 13.9%)
1,650 At-Risk (down 16%)

Dubuque County

712 Homeless (down 6%)
134 At-Risk (down 47%)

The problem of homelessness is not evenly distributed across Iowa, nor is it an exclusively urban phenomena. Homeless people come from every county in Iowa, but services providers are in population centers.

The programs that participate in HMIS capture the most desperate of needs. On this page are the counties in Iowa where the most people are served.

For many people their experience involved moving back and forth between homelessness and housing instability. When people living in a shelter, transitional housing, are housed in rapid rehousing, or are living on the street and have contact with an outreach worker, we call them homeless.

Homeless

A homeless person lacked a fixed, regular, and adequate night time residence or had a primary nighttime residence that was a supervised temporary shelter or a place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

A person is considered “at-risk” of homelessness if they sought services to prevent homelessness but did not qualify as homeless. See hudhre.info for more details on the definition of homelessness.

Black Hawk County

1,145 Homeless (up 9.92%)
2,020 At-Risk (down 30.13%)

Cerro Gordo County

315 Homeless (down 16.7%)
44 At-Risk (up 131.6%)

Pottawattamie County

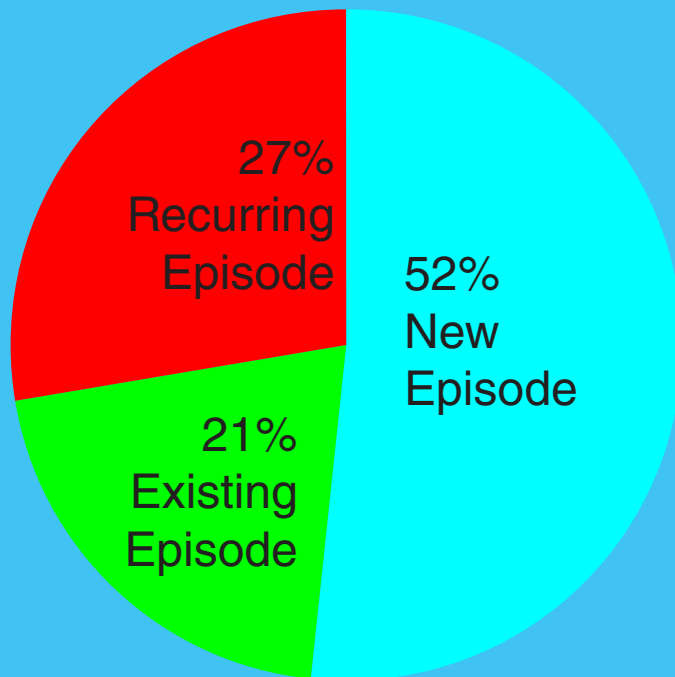
1,715 Homeless (down 3.16%)
330 At-Risk (down 5.98%)



Housing instability may involve staying with friends, family members, or casual acquaintances. It may mean diminished safety and greater vulnerability to crime. We do not directly measure people who are in these situations, but we do measure when people become homeless from doubled up situations and when they exit homelessness into doubled up situations.

In cases where housing instability means needing supplemental help to afford a place to live, we call those populations “At-Risk.” People’s coping strategies for dealing with housing instability are varied. People receive assistance in across the state as aspects of coping with the difficulties of living on the margins of material security, sometimes called hand-to-mouth or paycheck-to-paycheck. The presence of community pantries and general relief or other occasional-use services can often help a family on the boundaries of pay periods get through difficult times, or in cases of emergency situations where medical expenses would otherwise mean going without basic necessities.

Episode Type



“Its scary, real scary becasue when you have no place to go you’re stuck. Two days ago when our stuff was on the street, I felt embarrassed because I didn’t want any of my friends to see me. I also felt lost. It felyt like no one cares... It is so hard not to have a place to go”

-Karla, age 12

Journeys through homeless are all different and unique. The particular reasons for one person or another becoming homeless are unique to that person, and the solutions must also be particular to them to some degree. There are, though, similarities among the paths people take.

We analyzed the homeless journeys of Iowans as episodes, in part because it gets us past the entry-exit paradigm, where homelessness begins as a person is entered into service and ends when they exit service, even if they only exit to another program in town. The use of episodes gets us a different understanding of the experience of homelessness.

We have defined episodes of homelessness as “new,” “existing” and “recurring.” **New episodes** are instances where a homeless person has not been homeless in the last two years. These clients are new to our system, but may have been homeless elsewhere.

Existing episodes are cases where a client became homeless in the past and has not yet exited programming, or where they did exit in the last two years, but that exit was to a temporary destination.

Recurring episodes are cases where the entering client was exited from a homeless episode to a permanent destination in the last two years. Essentially, temporary destinations are those destinations where a client is expected to return to homelessness, places like single-room-occupancy hotels or unstable residence with a friend or family. Exits to a permanent destination are those cases where a client is not expected to return to homelessness. Those destinations are typically either a residence with the client's name on the lease, or living with friends or family where the situation is expected to be stable and sustainable.

We also considered whether those episodes ended this year. **Leavers** are those clients that exited service this year and **stayers** are those that continued on at the end of the year, into next year. Family membership can also really affect the experience of homelessness. We looked at the differences in episodes between those with a **family** and those who are **unaccompanied**.

Episode Type: Family and Leaver/Stayer

New	Unaccompanied	Family
Leavers	7%	10%
Stayers	21%	14%
Existing	Unaccompanied	Family
Leavers	3%	6%
Stayers	7%	5%
Recurring	Unaccompanied	Family
Leavers	6%	7%
Stayers	10%	6%

Percent of sheltered Iowans

Most Iowans, when they experience homelessness, get help and get on with their lives as quickly as they can.	Emergency		Leavers	Stayers
	Under 90 days		9%	14%
	90-360 days		1%	2%
	Over 360 days		0%	1%
	Transitional		Leavers	Stayers
	Under 90 days		11%	12%
	90-360 days		7%	10%
	Over 360 days		3%	6%
	Both		Leavers	Stayers
	Under 90 days		2%	5%
	90-360 days		3%	6%
	Over 360 days		2%	6%

How much time a person spends homeless is absolutely a vital measure. What a person believes that they can hope to accomplish in life, what their full potential looks like, referred to in academic literature as their habitus, is devastated by extended periods of homelessness. The habitus is severely injured by entering into a shelter, and so there has been an effort to divert people from shelter. But if people have to be in shelter, and sometimes they do, then it is best that the time they spend in shelter is minimal.

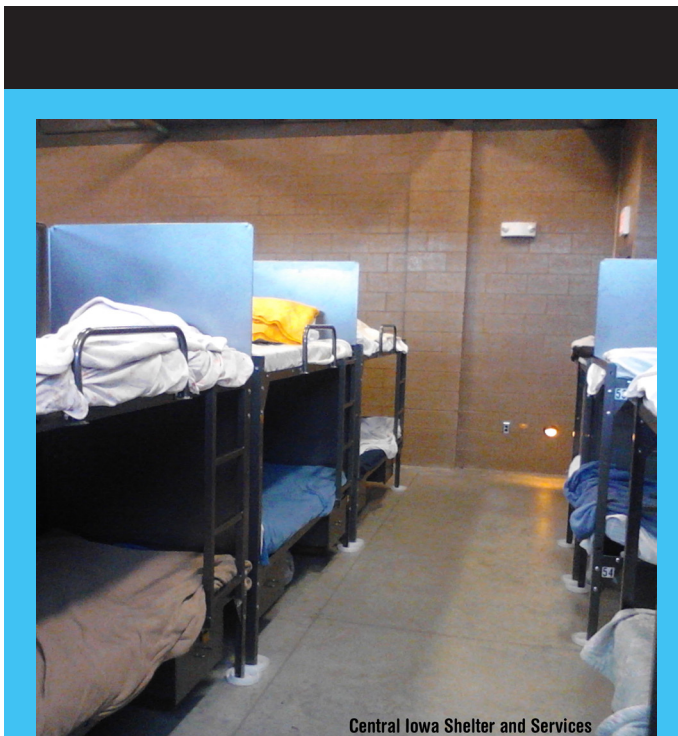
Emergency shelter is meant to provide shelter for 90 days or less, along with supportive services where possible. Transitional housing facilitates the movement of homeless persons and their families into permanent stability and independence. Some people use one or the other of those types of service, and some use both during the course of their episode.

Measuring how long a person is homeless is complex. The table above shows the percent of homeless Iowans who, over the course of their episode, were in emergency shelter, transitional housing, or both, and

Average length of episode

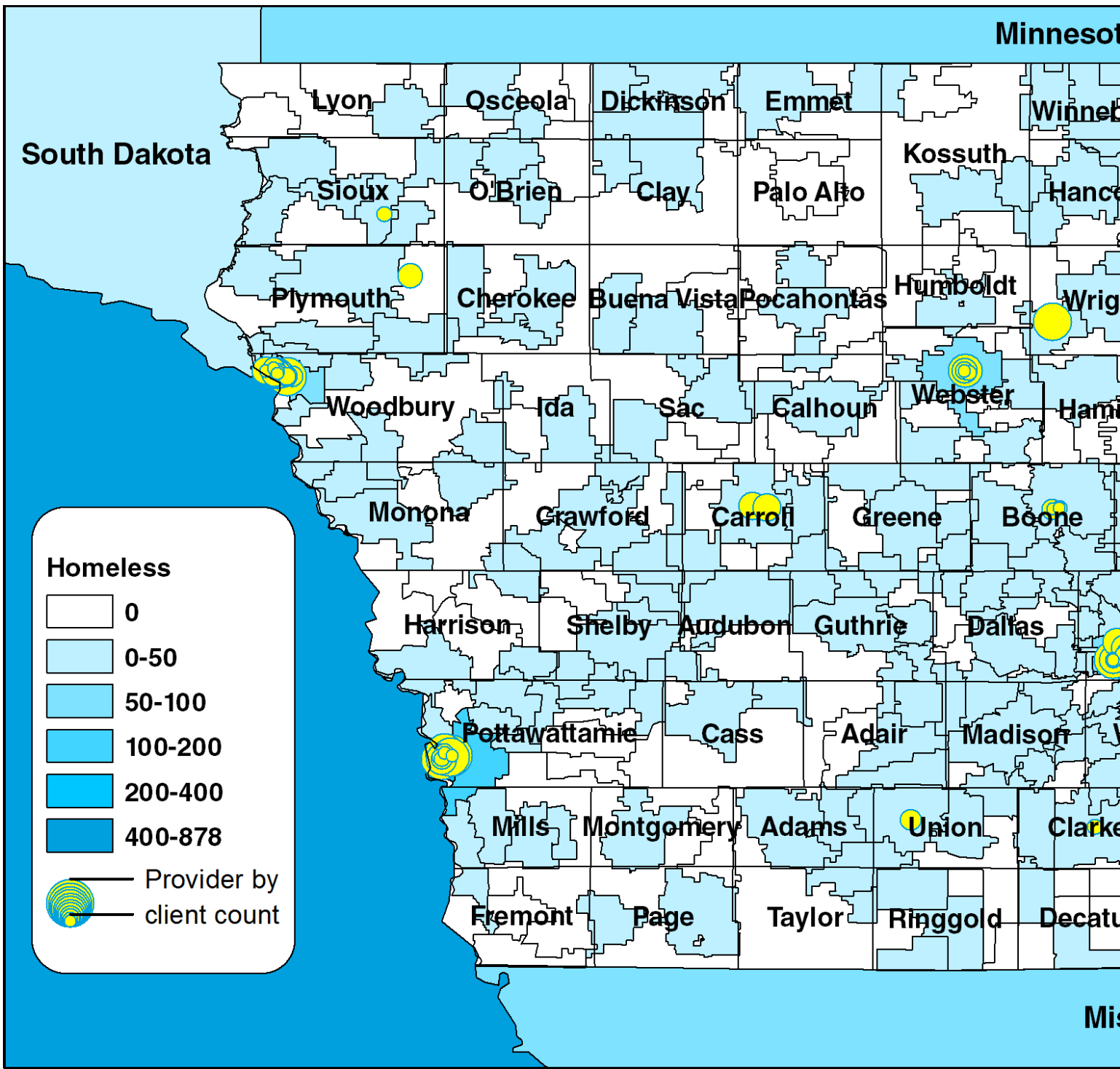
	Unaccompanied	Family
Emergency	54 days	41 days
Transitional	119 days	202 days
Both	299 days	363 days
New	52 days	53 days
Existing	366 days	419 days
Recurring	155 days	173 days

how many days they have been homeless. These ordinal categories make it clear that most homeless are homeless for a short period of time. Of course, stayers are in service a little longer than leavers, but aside from



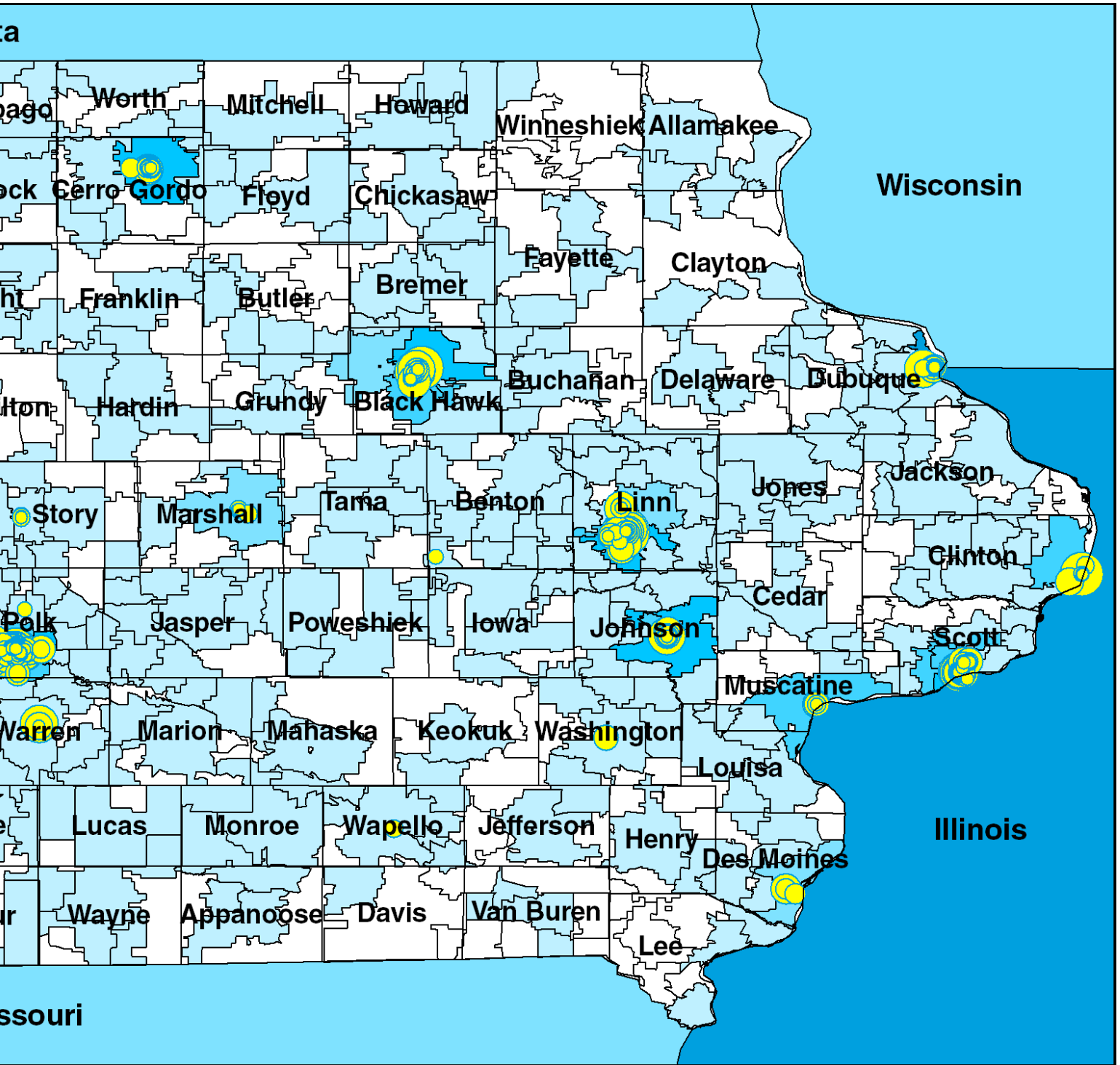
those moving from emergency into transitional, not overly so. When we consider the average length of episode, in the table on this page, it becomes clear that those who are in both emergency and transitional programming are in service considerably longer than those who are in transitional housing alone.

Last permanent zip code of people experiencing homelessness



People from every Iowa county

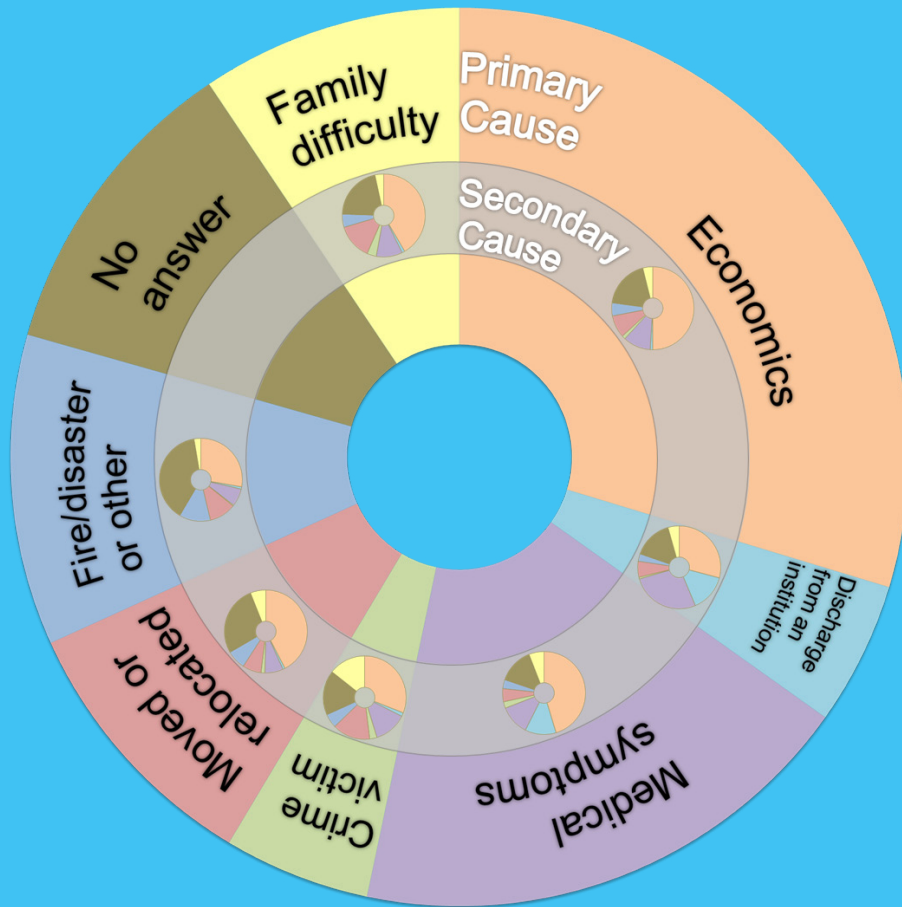
Homelessness & location of homeless service providers



experienced homeless in 2012

Causes of homelessness

59% of households report economics as the primary or secondary cause of their homelessness.



Each client entered into service is asked what is the cause of their homelessness. Each person may give two answers, a primary homelessness cause and a secondary homelessness cause. This chart shows those answers aggregated into seven categories.

The outer ring shows primary causes. The inner ring contains a small pie chart that shows the secondary causes reported among those answering each primary cause.

33% of people who gave a reason, listed economics as the reason for their homelessness.

35% of people who gave non-economic causes for their homeless, listed economics as the secondary cause. Overall, 57% of people who answered, said economics was the most important or second most important reason for their homelessness.

“Move or Relocated” is not counted as economic, but in many cases it is essentially economic. If we were to include those as economic answers, the number goes to 70% of homeless identifying economics causes for their homelessness.

Most people who become homeless are homeless for the first time and for economic reasons. They are homeless for only a short period, then they move on with their lives and are never entered into service again. This is only possible because of the full range of services in a continuum, from outreach to permanent supportive housing, and the presence of comprehensive supportive services.

Children and Families

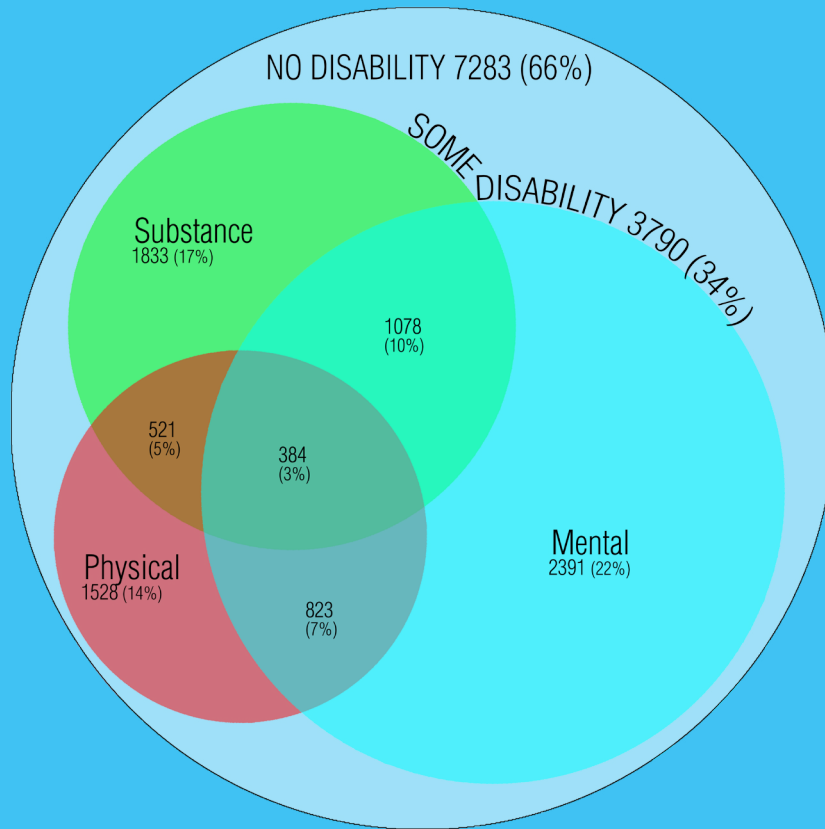


57% of households report being homeless for the first time. 72% of adults in homeless families have finished high school, have a GED or have even gone on to college. But the average head of a homeless household is a single female responsible for 2.2 kids, making on average of only \$818 per month. That’s 13.5% of the area median income.

Also, 32% of heads of households are disabled. That disability is predominantly mental health (22%) related issues or a history of substance addiction (13%) problems. Additionally 41% report a history of domestic violence.

Adults experiencing homelessness with disabilities

34% of Iowan's experiencing homelessness face some severe permanent disability, making stability harder to find.



Living in poverty is about coping mechanisms. Living homeless is about having those mechanisms fail. Many people living in poverty are in doubled-up situations, staying with friends or family. Often, homelessness means that those doubled-up situations (a coping mechanism) ceased to function.

When a coping mechanism fails, we want to understand the cause of that failure. Often it is a lack of resources like savings, friends and family, or education or skills to find a new job. In those cases service providers can step in with a little money to carry a family over to a new job, or with training.

In cases where mental illness (28% of the time) or substance addiction (22% of the time) or as is often the case, both, it is difficult to fix a broken coping mechanism. Often the disability is the reason the coping mechanism failed, and so the disability must be addressed before the person experiencing homelessness can develop new mechanisms. Often, a history of substance abuse and mental illness erodes social resources to the point where doubling up with family will never again be an option.

In these cases permanent supportive housing with supportive services is vital.

EMERGENCY SHELTER—8,321 (down 9.6% from 2011)

<18	20%	Living On Street at Intake	18%
Female	40%	First Time Homeless	43%
Minority Race	42%	Economic Cause	37%
\$0/month	62%	Medical Cause (Mental Health)	9%
Employed at Intake	21%	Some College or More	21%
Veteran Status	11%	GED or Diploma	54%
Substance Abuse	13%	Less than GED	25%
Mental Health	22%		

TRANSITIONAL HOUSING—3,827 (down 5.4% from 2011)

<18	30%	Living On Street at Intake	4%
Female	58%	First Time Homeless	52%
Minority Race	31%	Economic Cause	36%
\$0/month	54%	Medical Cause (Mental Health)	23%
Employed at Intake	28%	Some College or More	19%
Veteran Status	9%	GED or Diploma	59%
Substance Abuse	40%	Less than GED	22%
Mental Health	32%		

PERMANENT SUPPORTIVE HOUSING—1059 (up 6% from 2011)

<18	24%	Living On Street at Intake	11%
Female	47%	First Time Homeless	36%
Minority Race	28%	Economic Cause	41%
\$0/month	35%	Medical Cause (Mental Health)	20%
Employed at Intake	32%	Some College or More	18%
Veteran Status	14%	GED or Diploma	61%
Substance Abuse	32%	Less than GED	21%
Mental Health	62%		

RAPID REHOUSING—650 (down 74% from 2011)

<18	32%	Living On Street at Intake	10%
Female	55%	First Time Homeless	89%
Minority Race	48%	Economic Cause	38%
\$0/month	28%	Medical Cause (Mental Health)	13%
Employed at Intake	48%	Some College or More	19%
Veteran Status	6%	GED or Diploma	59%
Substance Abuse	1%	Less than GED	22%
Mental Health	1%		

Destination at exit

Clients exiting to a permanent destination stay in service, on average, twice as long. This is in large part because transitional programs have a higher probability of exiting clients to permanent destination compared to emergency programs.

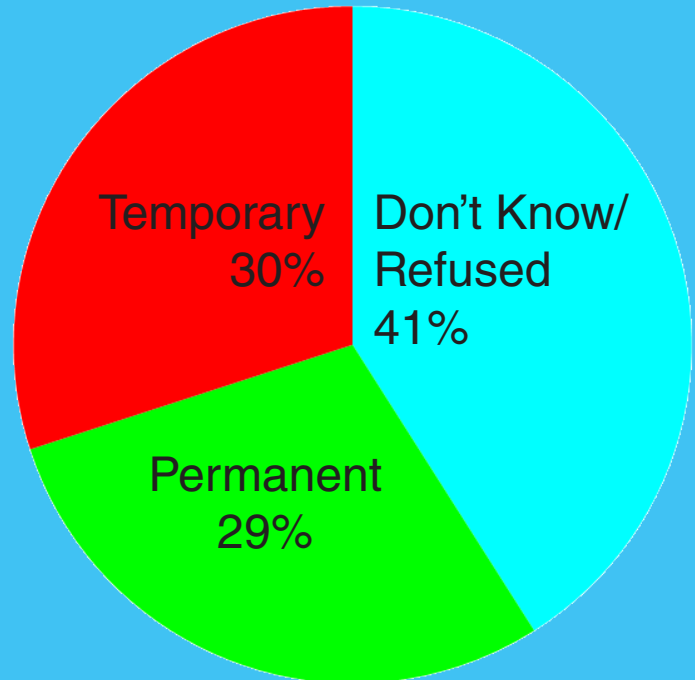
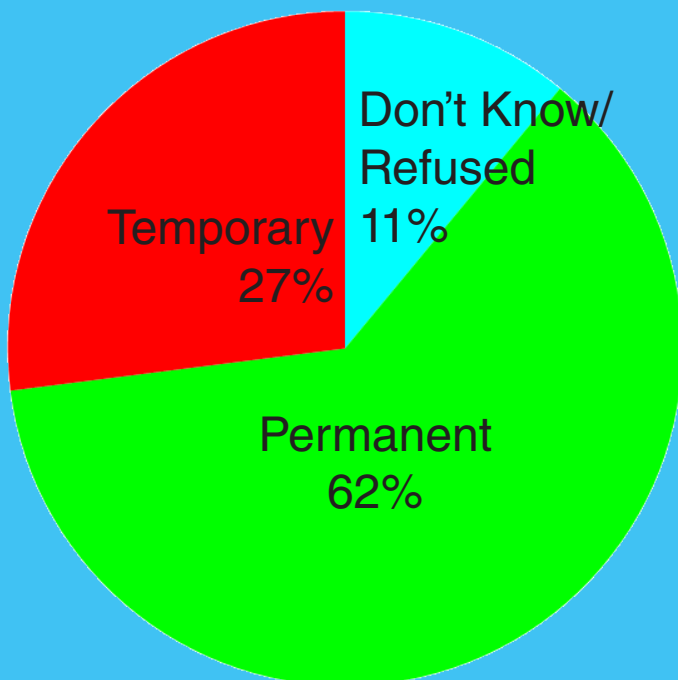
Employed homeless are 43% more likely to exit to a permanent destination, but make 17% less income than those exiting to a temporary destination.

Homeless households with children are 26% more likely to exit to a permanent destination than to a temporary destination.

Permanent destinations are those places where it is expected that the client will stay stably housed in perpetuity. Temporary destinations are those places where it is expected that the client will re-enter the HMIS system at some point in the near future. Permanent destinations tend to be places with the client's name on the lease, or stable welcoming family situations. Temporary destinations are often unstable family or friend (doubled-up) situations or places like hotels and motels.

Transitional Housing

Emergency Shelter



Housing in Iowa



Iowa has more than 400,000 families under 30% of area median income.

Most homeless families would have to spend 60%-100% of their income on housing to rent a unit that would hold their family.

There are many causes and explanations for this, but a shortage of affordable housing is chief among them. In 2012, 2,373 clients exited transitional housing and 6,261 exited emergency. 52% of those emergency shelter clients and 62% of those transitional housing clients had no source of income. The 2011 American Community Survey (census.gov) showed Iowa having only 1,760 housing units available for under \$250, which may be affordable for those with income. There were another 8,765 units that may be affordable with heavy subsidies. But two-thirds of the available housing would not be affordable to HMIS clients. Even with subsidy, those units exceeded 100% of the client's income.

This means that for most people, the best option out of homelessness is to find another person or family with whom to double-up. This is not a situation that is tenable for the health of our community. Every person deserved a home.

Military veterans

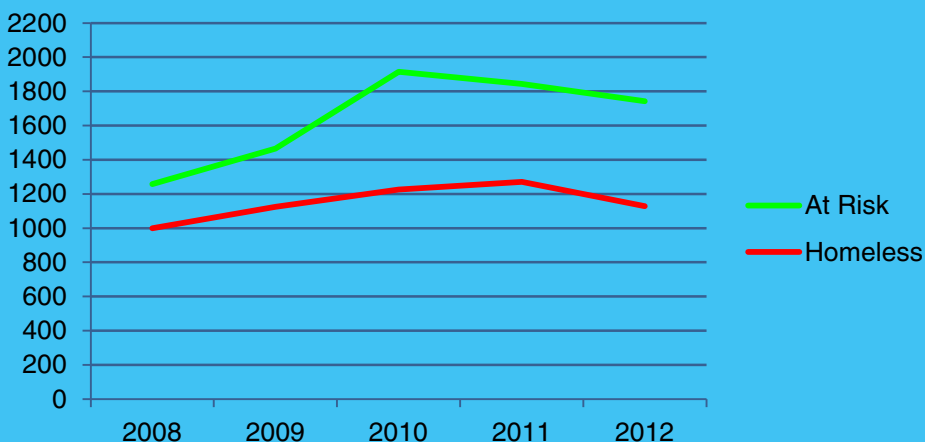


Iowa's military veterans face extensive and unique challenges to their homelessness.

The men and women who served in the Armed Forces and chose Iowa as their home afterward account for 10% of Iowa's homeless adults, 3.2% among households, 12.4% among unaccompanied, and 3.8% among at-risk populations.

The Veteran's Administration has set a goal of eliminating veteran homelessness, and they have contributed considerable resources to accomplish that goal. As a result, those veterans who are still present in the emergency shelter system are often some of the hardest to serve populations.

Count of veterans 2008-2012



Summary Analysis

This year the HPRP program ended. The drop in HPRP funding caused some of the sudden drop in at-risk populations. But, we have also seen a corresponding reduction in homeless in Iowa. The reduction of homeless Iowans is, at least in part, related to improvement in economic conditions. The impact on service provision has been that, while there has been a statewide reduction in demand, those still seeking services are more difficult clients.

Particularly in Des Moines, the reduction of people experiencing homelessness has been counterbalanced by an increase in duration of homelessness. Those that could get stable, have gotten stable. The remaining homeless population faces significant barriers including disabilities and a general lack of affordable housing statewide. This is most pronounced in urban centers, where programs operate at or near capacity most of the time.

There has also been a steady and significant decline in funding over the last few years. We have seen the elimination of all CDBG funds in Polk county and a general reduction in other funding sources statewide. We do, however, hope that the improving housing market will see an increase in the collection of title transfer fees, and that the portion of those fees that goes to homeless services will make up for some part of the reduction in federal funds.

The Iowa Institute for Community Alliances has worked in partnership with service providing agencies for more than 15 years and has been involved in the science of data collection during this period. Please contact our organization if you have any questions regarding this report or the work that we do.

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Everyone Deserves a Home

