

2018

"A HOME FOR ALL OF OUR NEIGHBORS"

Council on Homelessness *Annual Report*





Florida's Council on Homelessness

June 30, 2018

Governor Rick Scott
400 South Monroe Street
Tallahassee, Florida 32399-0001

Dear Governor Scott,

On behalf of the Florida Council on Homelessness, its members and state agency partners, I submit the "Council on Homelessness 2018 Report" for your consideration.

In accordance with state law, the Council has prepared recommendations for reducing homelessness in our state. The report also summarizes the extent of homelessness and characteristics of the men, women, and children who do not have a home; and outlines best practices for ending homelessness.

The 2018 Report shows that Florida's rate of "literal homelessness" continues to decline. This is due to an improving economy, increased use of best practices and enhanced capacity at the local level, and an increase in housing set aside for the use of homeless and special needs households.

However, homelessness by a broader definition—including those couch-surfing with family friends, living in motels, etc.—among school children and their families continues to increase. This is due primarily to the lack of housing affordable to low-wage earning families. If not addressed, this trend could lead to an increase in the number of people experiencing "literal homelessness" as well.

But, Florida's success to date demonstrates that homelessness is not an intractable issue—with targeted efforts we can continue to work toward a time when all Floridians have a home.

The recommendations in this report are designed to build upon the success Florida has achieved in recent years. The factor that most influences the declining rate of homelessness is the growing number of affordable housing options for homeless, special needs, and extremely low-income households. The Council encourages intensifying efforts to ensure there is an adequate supply of affordable housing for Florida's most vulnerable households. The continuation of flexible funding, supporting local initiatives, and providing services to households with extremely low incomes are all recommendations also made in this report.

There is no doubt that effective private and public collaboration at the State and local levels, combined with strong community participation, are key to solving homelessness. The Council appreciates your continued support of these efforts.

Sincerely,

A handwritten signature in blue ink, appearing to read "Shannon Nazworth".

Shannon Nazworth

Chairperson for the Council on Homelessness



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IN 2001

the State of Florida created an interagency Council on Homelessness and implemented what has become **a national best practice.**

INTRODUCTION

Executive Summary



In 2001, the State of Florida created an interagency Council on Homelessness and implemented what has become a national best practice. The purpose of the Council is to develop policy and make recommendations on how to reduce homelessness throughout the state.

Pursuant to section 420.622(9), Florida Statutes, the Council on Homelessness submits its annual report to the Florida Governor and Legislature summarizing recommended actions to reduce homelessness, as well as data concerning those persons currently experiencing homelessness in Florida.

Consistent with a positive five-year trend, Florida continues to make significant progress in reducing the number of persons experiencing literal homelessness. While this reduction is partially due to improved economic conditions, it is also due to the rising use of best practices, targeted use of funding, and collaborations across multiple sectors.

However, there is still work ahead to make Florida a leading state in ensuring that homelessness is rare, brief, and nonrecurring. Of particular importance throughout the state, and emphasized clearly in this report, is the dire need for more affordable housing, especially housing targeting those who are homeless, those with special needs, and those with extremely low incomes.

On one day and one night in January 2018, Florida communities identified 29,717 persons who were living on the streets, in the woods, or in emergency shelters. Those numbers included 2,515 homeless veterans, 8,300 persons in homeless families, and 5,230 chronically homeless and disabled persons. These were persons meeting the U.S. Department of Housing and Urban Development (HUD) definition of homelessness. Further, for school year 2016-2017, Florida's public schools identified 76,211 students as homeless, including those families that had lost their housing and were staying in motels or with family and friends (living arrangements that do not fit into the HUD definition of "homelessness").

In this report, the Council provides an overview of the causes and characteristics of homelessness in Florida including extensive data on subpopulations, geographic areas, and trends. In addition, a review of best practices is offered. Using this data, the report provides specific recommendations for State action, as summarized in the following pages. Updates on progress related to the 2017 Council Recommendations are provided in Appendix I, page 44.

INTRODUCTION

Overview of 2018 Recommendations

The Council on Homelessness submits its recommendations for State action to reduce the number of Floridians who are without a home. These interrelated recommendations are:

Appropriate 100 percent of Affordable Housing Trust Fund monies for affordable housing.

The Council recommends utilizing all the Sadowski Affordable Housing Trust Fund resources for affordable housing, with more focus on meeting the housing needs of extremely low-income, homeless, and special needs households. The Council also recommends supporting efforts to “stop the sweeps” of Housing Trust Fund dollars so that 100 percent of those monies will be appropriated for housing every year going forward.

Continue strengthening the capacity of homeless Continuums of Care by continuing appropriations for CoC Lead Agency Staffing Grants and reestablishing funding for Challenge Grants.

Homeless Continuums of Care (CoCs) are responsible for creating a plan to prevent and end homelessness in their local geographic area, implementing that plan, collecting and using data to assess needs and effectiveness of programs, and coordinating local community stakeholders toward the goals of the plan.



This work is challenging and cannot be executed without the support of the State of Florida. The Council recommends that the State appropriate funding for both CoC Staffing Grants and Challenge Grants.

Embrace best practices and incentivize the use of best practices at the local level.

Best practices for effectively ending homelessness include:

1. Housing First programs and policies geared at helping households move into stable permanent housing as quickly as possible, followed by the provision of appropriate support services.
2. Permanent supportive housing for chronically homeless households and those with the greatest needs.
3. Rapid Re-housing for households with moderate to serious need.
4. Diversion programs directed towards those for whom the homeless system does not offer the best solution and Prevention services to keep people at imminent risk of homelessness stably housed.
5. Coordinated Entry to ensure data-sharing and appropriate prioritization for housing interventions.
6. A focus on system wide performance outcomes so the system works well to effectively end homelessness for the community.

Appropriate funding to match, dollar-for-dollar, the Title IX resources to the Department of Education to fund services that assist homeless school children with priority to supplement transportation.

Due to the increasing numbers and needs of homeless school children, as defined by the Florida Department of Education (FDOE), the Council recommends that the State appropriate funding to provide a dollar-for-dollar (1:1) match for federal Title IX resources to address the needs of homeless school children, with a priority to supplement transportation of school children to their schools of origin.

Revise Florida Statutes 420.621-626.

Florida Statutes governing the State Office on Homelessness and the programs administered under the Office's purview have become antiquated and are inconsistent with federal law governing homelessness grant funding programs, which provide the majority of funding for Florida's programs that seek to prevent and end homelessness. The proposed statutory revisions will conform state law to current federal law and grant program definitions, as well as clarify statutory responsibilities, for local homeless CoC Lead Agencies. The revisions will also preserve financial and programmatic accountability provisions in state law for programs administered by the State Office on Homelessness.



THESE RECOMMENDATIONS

relate to creating more affordable and supportive housing to address the **fundamental driver of homelessness.**

RECOMMENDATIONS

2018 Council Recommendations

The Council on Homelessness submits its recommendations for state action to continue reducing the number of Floridians who are without a home. These recommendations relate to creating more affordable and supportive housing to address the fundamental driver of homelessness, building stronger CoCs, and increasing the capacity of the Council to lead state efforts to reduce homelessness.

These interrelated recommendations, and a detailed account of what they mean, are:

1 **Appropriate 100 percent of Affordable Housing Trust Fund monies for affordable housing.**

The Council recommends utilizing all Sadowski Affordable Housing Trust Fund resources for affordable housing, with an increasing focus on the housing needs of extremely low-income, homeless, and special needs households.

As outlined in this report, the lack of an adequate supply of affordable housing is a fundamental driver of enduring homelessness in Florida. The housing trust fund monies have been utilized successfully in the past to create new affordable and permanent supportive housing for those who are homeless and have special needs.

Appropriating 100 percent of affordable housing trust fund monies, and targeting resources for homeless households, is critical to effectively ending homelessness in Florida. Homeless households must have access to appropriate affordable housing to recover from homelessness.

The Council also recommends supporting efforts to “stop the sweeps” of Sadowski Affordable Housing Trust Fund monies. In recent years, Housing Trust Funds have been appropriated for a variety of purposes other than affordable housing. In 2017, roughly \$180 million was swept from this trust fund to be used for other reasons by the State. Supporting efforts to stop the sweeps of Housing Trust Funds will accelerate progress in reducing homelessness and providing safe affordable housing for Floridians.



2 Continue strengthening the capacity of homeless Continuums of Care by reestablishing funding for Challenge Grants and continuing appropriations for Continuum of Care Lead Agency Staffing Grants.

Homeless CoCs are responsible for creating a plan to prevent and end homelessness in their local geographic area, implementing that plan, collecting and using data to assess needs and effectiveness of programs, and directing local community stakeholders toward the goals of the plan. This work is challenging and cannot be executed without the support of the State of Florida.

For the past several years, the State provided support to CoCs through two primary funding streams—through Challenge Grants and Staffing Grants. In addition, the State provides pass-through funding for certain homelessness prevention activities, Emergency Solution Grant (ESG) programs, and technical assistance for CoCs. The CoC lead agencies have utilized State funding to prevent and reduce homelessness and as leverage for federal funding of more than \$83 million annually.

The Council recommends that the State appropriate funding for both the CoC Staffing Grant and Challenge Grant, the latter having been left out of legislation for the 2018-2019 year as a funding stream. The special feature entitled “Continuums of Care and the Importance of Challenge Grants” on page 22 gives a more detailed account of the need for Challenge Grant funding in our state’s efforts to effectively end homelessness.

3 Embrace best practices and incentivize the use of best practices at the local level.

Best practices for effectively ending homelessness include:

1. Housing First programs and policies geared at helping households move into stable permanent housing as quickly as possible, followed by the provision of appropriate support services,
 2. Service providers that offer employment and training opportunities for individuals experiencing, or at risk of experiencing, homelessness,
 3. Permanent Supportive Housing for chronically homeless households and those with the greatest needs,
 4. Rapid Re-housing for households with moderate to serious need;
 5. Diversion of those for whom the homeless system does not offer the best solution,
 6. Prevention Services to keep people at imminent risk of homelessness stably housed,
 7. Coordinated Entry to ensure data-sharing and appropriate prioritization for housing interventions,
 8. Data-driven decision making to ensure that resources are being used effectively and efficiently, and
 9. A focus on system-wide performance outcomes so the system works well to effectively end homelessness for the community.
- The Council recommends the following specific State actions:
10. Reestablish funding for the DEO homeless training and technical assistance efforts, formerly funded through the Challenge Grant appropriation, which in turn has been funded from the Housing Trust Fund in the past;
 11. State agencies represented on the Council on Homelessness, as well as the Office on Homelessness, should take a leadership role in modeling and sharing these best practices at the state level to ensure that all entities using state resources to end homelessness are implementing best practices;
 12. The Office on Homelessness should continue to use a system to gather data, assemble performance outcome measures, and accurately report on statewide progress toward the goals adopted by the Council;
 13. The Office on Homelessness should continue to incentivize the adoption of best practices at the local level by incorporating best practices and housing outcome performance measures into funding application processes and monitoring for grants managed by the Office;
 14. Local CoC organizations should incentivize the adoption of best practices at the service provider level by incorporating best practices and housing outcome performance measures into funding application processes for grants managed by the local CoC.

4 Appropriate funding sufficient to match, dollar for dollar, the Title IX resources to the Department of Education to fund services that assist homeless school children with priority to supplement funding for transportation of students.

Due to the increasing numbers and needs of homeless school children, as defined by the FDOE, the Council recommends that the State appropriate funding to provide a dollar-for-dollar (1:1) match for federal Title IX resources to address the needs of homeless school children.

The priority to supplement transportation costs is related to the federal McKinney-Vento Act requirement that homeless school children continue to attend their school of origin, even when their residence has moved to another zone or district. For schools to access this federal funding, the school must guarantee that students will remain at their school of origin regardless of their changing residences. When the children move from district to district, keeping them at their school of origin puts a financial strain on that school district. Transportation costs can skyrocket but that transportation must be provided with extremely limited funding. Unfortunately, this creates an incentive to use cost-saving strategies, which can keep students on buses for many hours daily, potentially further reducing the likelihood of success at school and at home due to limited time for sleeping, studying, and extracurricular activities.

5 Revise Florida Statutes 420.621-626.

Florida Statutes governing the State Office on Homelessness and the programs administered under the Office's purview have become antiquated and are inconsistent with federal law governing homelessness grant funding programs, which provide the majority of funding for Florida's programs that seek to prevent and end homelessness. The proposed statutory revisions will conform state law to current federal law and grant program definitions, as well as clarify statutory responsibilities for local homeless CoC Lead Agencies, while preserving financial and programmatic accountability provisions in state law for programs administered by the State Office on Homelessness.



HOMELESSNESS INCLUDES

families with children, young adults,
couples, single men and women, and
unaccompanied youth.

HOMELESSNESS & SOLUTIONS

Homelessness and Solutions in Florida

WHAT IS “HOMELESSNESS”?

The word “homeless” often brings a particular image to mind. Typically, this image is an unkempt man, apparently living on the streets, and assumed to be struggling with mental health and substance abuse issues. While that stereotype represents reality for a relatively small percentage of people who are homeless, the faces, ages, and situations of those who are homeless are widely varied. Homelessness includes families with children, young adults, couples, single men and women, and unaccompanied youth.

One type of homelessness is “unsheltered”, which refers to people who live in places not meant for human habitation—on the streets, in cars, wooded areas, or abandoned buildings. Others are “sheltered” but are still homeless because they are staying in homeless shelters or transitional housing until they find stable permanent housing of their own.

Still others that experience an eviction or similar crisis may have natural support networks and can avoid a homeless shelter by staying with family or friends, even though they cannot afford to find their own housing. These households are sometimes referred to as “doubled-up” due to their economic and housing crisis. Some of these home-sharing arrangements are relatively stable; in other cases, people may be “couch-surfing,” moving from one place to another in quick succession. Further, some people who do not have their own permanent housing live in motels and similar places that are overcrowded, ill-equipped, and impermanent.



When we speak of people who are “literally” homeless, we are referring to people that meet the HUD definition of homelessness; the phrase includes those who are unsheltered plus those staying in emergency or transitional shelters. People who are at risk of homelessness, doubled-up or couch-surfing, paying to stay in motels, or living in substandard housing are not literally homeless.

Because of the many ways “homelessness” presents itself, it is challenging to agree upon a definition of homelessness.

For instance, the federal statutes and the Florida statutes have different definitions (see Appendix IX, page 65), so a household may be considered homeless under the Florida definition but not under some federal definitions. Further, different types of funding address specific categories of homelessness. As an example, when public schools use funding to address homelessness, those resources can be used for families that are doubled-up; many other programs that address family homelessness will serve families that are unsheltered or in temporary shelters, but not those who are doubled-up.

In this report, a conservative version of the HEARTH Act definition of homelessness is reflected in the Point in Time (PIT) Count numbers, which are presented in Appendix II on page 46. The broader FDOE definition of homelessness for children is reflected in the tables

presented in Appendix III on page 54.

Because these two data sets are based on different definitions, measured at different times, and for different populations, the data should not be combined and will not be consistent. Each set of data can be useful in its own way and for specified purposes.

Recommended Revisions to the Florida Statutes on Homelessness

The Council on Homelessness recommends support for the revision of Florida Statutes related to homelessness, the State Office on Homelessness, funding for homeless programs, and local CoCs (i.e., F.S. 420.621-420.6275). A primary intent of the proposed revision is to align state law with federal law and federal grant requirements, update definitions, and preserve the authority of the State Office on Homelessness to effectively and efficiently administer programs and funds received to prevent homelessness.

By conforming state and federal law, the State can more effectively ensure that homeless-related programs are utilizing best practices, measuring performance well, and serving local communities. In addition, the challenges related to definitions, described above, will be remediated. The recommended statute revision will further advance the work of the Council on Homelessness and position the State to effect further reductions in homelessness.

There are four broad categories of homelessness set forth in the federal Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009, which is the primary federal program specific to homelessness and HUD funded homeless programs. The full statutory definition¹ is provided in Appendix IX; below is a paraphrased summary of the federal definition of homelessness:

- 1 An individual or family who lacks a fixed, regular, and adequate nighttime residence – living in a place not meant for human habitation, in a shelter or similar program, or, in specified circumstances, in an institution;
- 2 An individual or family who will imminently lose housing, under certain circumstances;
- 3 Under certain circumstances, unaccompanied youth or families with children who are consistently unstably housed and likely to continue in that state; and,
- 4 People who are fleeing or attempting to flee domestic or intimate partner violence and lack the resources to obtain other permanent housing.



The Florida Statutes and the FDOE use an overlapping but broader definition. This definition defines a person as homeless if they lack a fixed, regular, and adequate nighttime residence, including those who are:

- 1 Sharing the housing of others due to loss of housing, economic hardship, or similar reason;
- 2 Living in motels, hotels, trailer parks, and camping grounds, due to the lack of adequate alternative housing;

- 3 Living in emergency or transitional shelters;
- 4 Abandoned in hospitals or awaiting foster care placement;
- 5 Living in a public or private place not meant for regular sleeping accommodations;

- 6 Living in cars, parks, abandoned buildings, bus or train stations, substandard housing, or similar settings; and,
- 7 Migratory children living in any of the above circumstances.

WHY IS HOMELESSNESS IMPORTANT TO ADDRESS?

The Economics of Addressing Homelessness

The primary costs of homelessness to local communities and the State are not the costs of operating emergency shelters and providing meals. Rather, homelessness affects local economies in ways that are much less obvious. Homelessness significantly increases community costs borne by local governments, the State, and taxpayers in terms of emergency response teams, crisis stabilization units, uninsured emergency and inpatient medical care, and law enforcement involvement. Further, the presence of street homelessness may impact businesses by reducing foot traffic, tourism, downtown redevelopment, and property values.

There is also the “opportunity lost” cost associated with the inability of homeless persons to meet their full potential while striving to survive on our streets. Studies show homeless students have a far worse educational attainment than stably housed peers; impacting both costs to our public school systems and the outcomes of our students (see chapter entitled “Florida Department of Education—Homeless Education Program” on page 31 for more information about these students).

Chronic homelessness, in particular, results in especially high community costs. People who are chronically homeless are those who have experienced long-term homelessness and have a disability. A recent study² of 107 chronically homeless individuals living in Central Florida estimated the community costs of \$31,065 per person per year, for an annual cost for these 107 individuals totaling over \$3.3 million. In contrast, providing those same individuals with appropriate housing and services in the form of permanent supportive housing would cost approximately \$10,000 per year per person, one third of the cost of managing their homelessness.

Based on this analysis, appropriate housing and services for only 107 chronically homeless individuals would save Central Florida communities over \$2 million in a single year. These estimates of costs and savings are very similar to the results of dozens of studies in communities across the nation, which further validates the conclusion that appropriate housing for these individuals is a significant community benefit. Further, it is likely that these cost savings estimates are conservative, since they do not take into account the more abstract effects of homelessness on tourism, businesses, and schools.



“Appropriate housing and services for only 107 chronically homeless individuals would save Central Florida communities over \$2 million in a single year.”

Another aspect to consider when addressing the costs of homelessness is to examine how wisely we use homeless-specific funding. Funding to address homelessness is scarce and it is incumbent upon the State, local governments, and homeless-serving organizations to invest in programs that are both effective and efficient.

Historically, communities have invested significant resources in addressing the needs of people who are homeless through emergency shelters, meal programs, clothing and transportation services, and so on; as well as through programs

that offer services and transitional housing. While these programs do address needs, they do not tend to help people move out of homelessness rapidly or in a cost-effective manner. This type of investment deals with the population’s symptoms of homelessness, it does not seek to cure them of their homelessness entirely.

In the past few decades, extensive research on the efficiency and effectiveness of homeless initiatives have taught us a better way to use resources. It is well documented that the best approach for most households is to help them move into rental units as quickly as possible through a combination of limited rental assistance funding as well as providing limited services after the household has moved into their new home.

This approach, often referred to as Rapid Re-Housing, is much more effective than emergency shelter or transitional housing. Further, it is also less costly per household compared to other approaches. In one study by the National Alliance to End Homelessness³, Rapid Re-Housing was more effective in helping people move out of homelessness, did so more quickly, and was more efficient than other approaches. The cost of rapidly re-housing a household was 40% of the cost of emergency shelter and 18% of the cost of transitional programs.

States and communities that are most effective in reducing homelessness are those that support Rapid Re-Housing for households with less severe needs and Permanent Supportive Housing for those who have more serious disabilities. This approach will be discussed in more detail in the “Building Systems” section of this report on page 39. On the following page, one of the three high-cost, high-need pilot programs funded by Florida Housing

Finance Corporation is discussed in its own Special Feature. For more information on all of these permanent supportive housing pilot programs—Pinellas, Coalition Lift, and Village on Wiley—see Appendix IV on page 57.

The Human Side of Homelessness

Beyond the significant economic costs of homelessness in our communities, there are lives at stake. The experience of homelessness is traumatic and daily survival is a challenge. People who are homeless are less likely to connect with community health care resources, engage fully in employment and education, and have stable relationships with friends and family. Homelessness exacerbates pre-existing health problems, reduces the speed and likelihood of recovery, and exposes people to more health threats.⁴ Children who experience homelessness develop more slowly, have more health issues, and are less likely to achieve in school.⁵





Residents enjoying their new home in Village on Wiley.

The Solution that Saves—Village on Wiley

The Solution that Saves is part of a statewide pilot to assess the cost effectiveness of providing Permanent Supportive Housing to high risk individuals who are high utilizers of crisis services such as the healthcare, criminal justice, and emergency assistance systems. Permanent Supportive Housing is the national best practice of linking affordable housing with voluntary, person-centered support services to help chronically homeless individuals access and maintain stable housing and increase their quality of life.

Ability Housing's Village on Wiley provides 43 units of affordable and supportive housing to these high-risk persons in Duval County. The Solution That Saves has 90 pilot participants that were identified by area hospitals, service providers, and law enforcement as those individuals cycling repeatedly through their systems and for whom homelessness or housing instability was a key factor to their utilization of services.

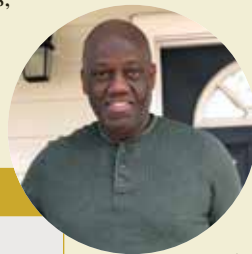
The Solution That Saves' Year One interim findings (which includes data on 53 pilot participants) demonstrate a total costs savings of 50% across all systems. Hospitals saw a 63% reduction in costs, law enforcement saw a greater than 80% reduction in cost, and emergency assistance providers saw an 88% reduction in costs. Including the cost of housing and services, the

community saved \$2,458,992 in one year providing housing to 53 of its most vulnerable citizens compared to the year prior when the participant's homelessness was maintained.

The following shows the data gathered from project partners including: The Jacksonville Sheriff's Office, Baptist Medical Center, St. Vincent's Health Services, UF Health, Duval County Health Department, the Agency for Health Care Administration, Changing Homelessness, Gateway Community Services, LSF Health Systems, The Regional Veterans System, Renaissance Behavioral Health Systems, and River Region Human Services.

The pilot study is in its second year and will continue to provide cost analysis data for the state of Florida. The hope is that this data will lead to an increase in affordable and supportive housing in all communities. The solution has saved – not only lives and quality of life, but also community resources.

David A. was one of the first to move into Village on Wiley in November 2015. The 53-year-old former Marine was



David says, "My life is so much better, I am thankful every day for this home."

homeless off and on for over 10 years. Today he says, "I have found stabilization, I have a place to call home, my own regular doctors, and I got married in September of 2017."

"I am thankful to Ability Housing; without them I would still be living on the streets. I have learned to be more responsible, I pay rent which is a big responsibility," he says.

Another change David has experienced is having a regular doctor: "Being more stable means I no longer use the emergency room like before. When I was homeless I would go to the emergency room to just get off the street. It was just a way to get by," he says.

PRE-HOUSING	POST-HOUSING
Arrests/days in jail	
37 arrests/1,386 days	10 arrests/145 days
Homeless services	
\$33,057	\$3,902
Hospital visits	
328	129
Emergency room visits	
202	55
Hospital costs	
\$4,011,184	\$1,471,374

WHAT CAUSES HOMELESSNESS?

Because homelessness is a complex social problem, there is no simple list of causes. We can, however, identify contributing factors, prioritize those factors, and consider how to address those issues in ways that reduce homelessness.

Understanding homelessness requires consideration of societal factors that intensify or perpetuate homelessness, as well as personal issues that contribute to the risk of a person becoming homeless. The systemic causes of homelessness are, however, often overlooked while personal issues tend to be overemphasized.

It is true, for instance, that mental health and substance abuse issues are more prevalent in homeless populations than they are in the general population. However, that fact should not lead one to the conclusion that behavioral health issues cause homelessness. In fact, the overwhelming majority of people struggling with mental health and/or substance abuse issues are not homeless.⁶ Further, the majority of people who become homeless do not have behavioral health issues (see Appendix II, Table 3 on page 48). As discussed below, inadequate access to health care is a factor that exacerbates homelessness, but mental health issues and substance abuse do not directly cause it.

For elected officials, policymakers, and planners, it is especially critical to recognize the societal and systemic issues that contribute to homelessness. To reduce homelessness, state and local governments must address the big picture issues that exacerbate or perpetuate homelessness.

Below is a discussion of the three primary factors that contribute to homelessness in Florida: (1) lack of access to housing, (2) need for employment and income opportunities, and (3) inadequate access to health care.

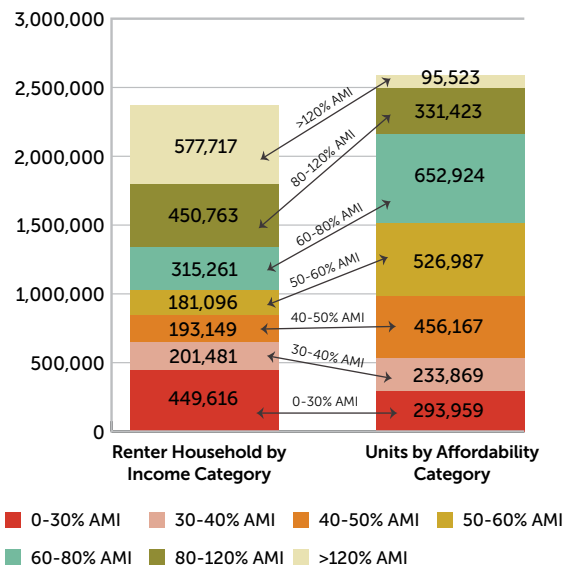
Scarcity of Affordable Housing

The scarcity of affordable housing is the primary factor causing and perpetuating homelessness in Florida. Most people who become homeless in Florida have extremely low incomes making it difficult to maintain stable rental housing. Multiple studies reflect the critical shortage of housing for households with low income.

The 2016 *Rental Market Study*⁷ by the University of Florida’s Shimberg Center for Housing Studies (one of the most recent and comprehensive studies currently available) reports that there are only 32 affordable rental units available⁸ for every 100 extremely low income (ELI) renter household statewide.⁹ Due to the lack of affordable housing¹⁰ for these households, they must pay a staggering percentage of their income toward housing costs alone. Among the key findings of the *Rental Market Study* are the following (see Figure 1 below for a visual of this information).

- At the 0-30 percent Area Median Income (AMI) and 30-40 percent AMI levels, there are more renter households than affordable units.
- For the 60-80 percent and 80-120 percent AMI levels, the number of affordable and available units exceeds the number of renter households.
- Florida has only 32 affordable and available rental units for every 100 households with incomes of 0-30 percent AMI, a deficit of 309,971 units.

FIGURE 1
Affordable Units and Renter Households by Income Level, Florida, 2010-2014 5-Year Estimate



Shimberg Center analysis of American Community Survey PUMS—Affordable Units and Renter Households by Income Level, 2010-2014, 5-Year Estimate.

The *Rental Market Study* reports that 71 percent of renter households with income at or below 30 percent AMI are “cost burdened,” meaning they pay more than 40 percent of their income for rent. Among those who have household income up to 50 percent of the AMI, 78 percent of households are cost burdened.

The level of burden varies among counties and across income brackets. The *Rental Market Study* indicates that Miami-Dade and Monroe Counties have the highest percentage of cost-burdened households at 45 percent. For ELI households, the most severe situation exists in Orange County, where 80 percent of these households pay more than 40 percent of their income for housing.

According to the 2018 *Florida Housing Coalition Home Matters*¹¹ report, more than 900,000 households in Florida are “severely cost burdened,” paying more than 50% of their income for housing costs. The vast majority are households with very low incomes, including seniors, workers in the service industry, and people with disabilities.

A household trying to work its way out of homelessness is seeking rental housing in these tight rental markets—a daunting task even for those who have not experienced homelessness and have higher incomes. Access to affordable housing for people recovering from homelessness is ensured only by increasing the stock of housing for ELI households. This need can be met primarily through housing assisted with subsidies, such as those made available through the appropriation of Affordable Housing Trust Fund monies. Repeated “sweeps” and redirection of Affordable Housing Trust Fund resources has only contributed to this crisis in Florida.

The need for affordable housing is particularly acute for ELI households earning 30% or less of the AMI, including those who are disabled and surviving on disability income alone. According to the *Rental Market Study*, there are no areas in Florida where adequate affordable housing exists for these special populations.

To address this critical need, it’s necessary that new affordable housing stock is created. Just as importantly, that stock must include set-asides for ELI households as well as Permanent Supportive Housing for households that require consistent support to maintain their housing.



“Florida has only 32 affordable and available rental units for every 100 households with incomes of 0–30 percent AMI, a deficit of 309,971 units.”

With due recognition of the challenges faced by households that include wage-earners, the difficulty is even more severe for special needs households. A single, disabled individual whose sole source of disability income is Social Security Income (SSI) receives a total of \$750 monthly. Because market-rate affordable housing does not exist for a household living solely on SSI, subsidized affordable housing must be created to meet this need.

For people surviving on SSI or similar levels of income, the primary sources of independent affordable housing come from deeply subsidized units or housing vouchers. For a person whose only income is SSI, an affordable rent is no more than \$250 per month. The scarcity of deeply subsidized housing units and housing vouchers cannot be overemphasized. For those without significant financial supports from friends or families, individuals living with a serious disability are at the greatest risk of homelessness and, if they become homeless, have the most difficulty exiting homelessness.

Need for Employment and Better Income Opportunities

Over the past several years, literal homelessness in Florida has declined steadily and, some years, significantly. This reduction is due, in large part, to an improved economy and job growth. This is good news for our state and for those who have been literally homeless. To see continued declines in literal homelessness, it is important to recognize the critical importance of adequate household income and employment.

*Out of Reach 2017*¹² reports that a household earning minimum wage in Florida needs to work 102 hours per

week to afford an average two-bedroom apartment or 82 hours per week for a one-bedroom apartment. Even for those who are working multiple jobs, being able to afford housing in Florida is challenging. Working 40 hours a week, a household would need to earn almost \$21 an hour to afford the average two-bedroom apartment. Most low-income workers earn minimum wage, which is just over \$8 per hour, or 38% of the income required to afford a home.

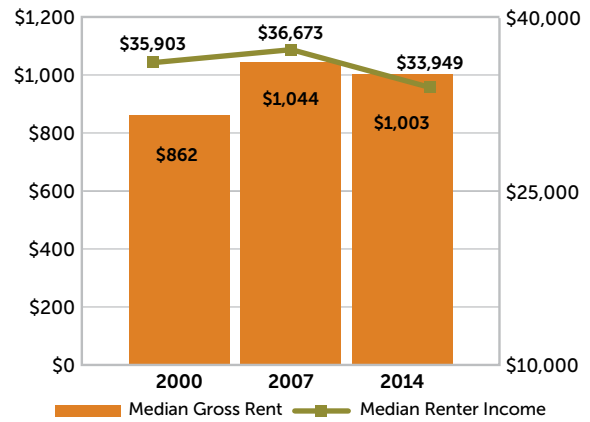
These facts are further intensified by the United Way’s ALICE Report,¹³ which notes that the struggle is getting even worse for working households. Consistently low wages, along with periods of underemployment or unemployment, mean that tens of thousands of households are one paycheck away from homelessness. The United Way reports that the ALICE “household survival budget” costs have increased about 20% from 2007 to 2015, during a time when low-wage employment dominated the job market. Figure 2 illustrates how median income has not kept up with the ultimate rise in median gross rent prices.

Inadequate Access to Physical and Behavioral Health Care

The lack of access to health care affects homelessness in several ways. First, a health emergency and related uninsured health costs can cause a person to become homeless. Not only does a health problem often result in the loss of employment and income but medical debt can quickly exhaust all financial resources.¹⁴ Without support systems and safety nets, a household can become homeless because of a health issue. Second, uninsured physical health costs for those who are chronically homeless in Florida communities sap community resources. Because people who are homeless are less likely to access primary health care and address health concerns early, health issues often escalate. Uninsured emergency room visits and inpatient stays skyrocket. Third, like physical health costs, treatment for mental health and substance abuse issues among those who are homeless is often limited to crisis response and emergency services. Ultimately, people who are uninsured and homeless cycle in and out of crisis and health systems, resulting in high community costs but few, if any, improvements in health or preventative care.

FIGURE 2

Median Gross Rent vs. Median Income (2014 \$), Florida, 2007-2014



Shimberg Center analysis of American Community Survey PUMS—Median Gross Rent vs. Median Income (2014 \$), FL, 2007-2014.



Continuums of Care and the Importance of Challenge Grants

The State of Florida Challenge Grants, administered through the Department of Children and Families (DCF), have been an important source of flexible funding for CoCs across the state. The grant was funded from 2001 to 2011 through the Local Government Housing Trust Fund (LGHTF) but was eliminated in 2012 due to sweeps of the bulk of affordable housing trust fund revenues.

In 2014 the Legislature recognized the critical need for homeless Challenge Grants and once more began to appropriate funding for this vital component of our communities' CoCs. As of fiscal year 2017-2018, the recurring and non-recurring funding for Challenge Grants was \$5 million. However, although DCF provided budget authority for the Challenge Grants for this fiscal year, no proviso language appeared in the budget to allow the transfer of source funding from the LGHTF. Therefore, homeless CoCs throughout the state will have \$5 million fewer resources to address homelessness in the 2018-2019 fiscal year.

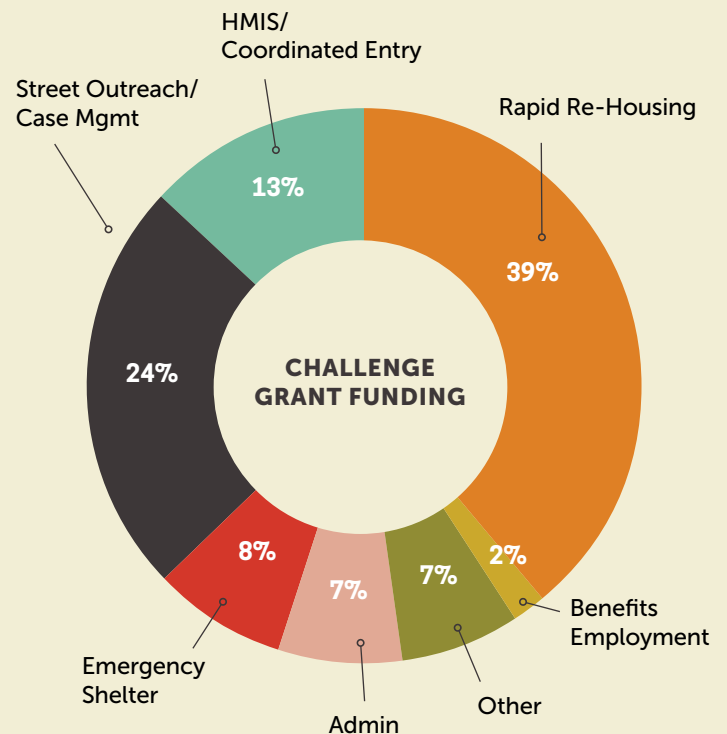
The Challenge Grants have been a pivotal source of funding for Rapid Re-Housing programs statewide, as well as homelessness prevention, outreach, coordinated entry, and other critical supports and services in the CoCs. Since its re-institution in 2014, the CoCs have worked tirelessly to leverage Challenge Grant funding to house individuals and families and connect those households to supports for stability and self-sufficiency.

Challenge Grants are a critical component in overall system performance in our continuums as well as a critical piece in ensuring we move ever forward toward the goal of making homelessness rare, brief, and non-recurring.

One of Florida's CoC's is bracing for a cut in Challenge grants. Without this support, 25 chronically homeless people will be affected immediately and the numbers will grow dramatically

throughout the year. These are zero income and disabled people, with mental health issues who need support and housing or they will be on the street. This is just a snapshot of what will happen throughout our state. Our Continuum of Care Lead Agencies and the provider networks they support cannot overstate what a critical part of the homeless system of care this funding supports.

The Council is strongly recommending that these Challenge Grants be re-established (see recommendation #2 or page 10).



THE FEDERAL LANDSCAPE AND HOMELESSNESS

Making homelessness in Florida rare, brief, and non-recurring depends in large part on federal funding for programs specific to homelessness, affordable housing, and services. While the administration's proposed FY2018 federal budget reflected enormous cuts to important programs, the final budget enacted by Congress through the Omnibus spending bill in March 2018 saves critical life-saving programs and, in some cases, slightly increases funding for those programs.

HUD CoC funding in FY2018 will increase over 2017 by 5.5 percent, which in most cases will preserve key CoC programs such as Rapid Re-Housing and Permanent Supportive Housing. The funding remains highly competitive, however, and the level of increase is barely enough to maintain current capacities, due to increasing fair market rents in local communities, rents that have increased by much more than 5 percent. Similar small increases (5 to 10 percent) will be seen in the areas of Veterans Administration Supportive Housing (VASH) vouchers, Housing Choice Vouchers, Community Development Block Grants (CDBG), Education for Homeless Children and Youth (EHCY), and the VA's Supportive Services for Veteran Families program. HOME funds were always increased by a small percentage.

The HOME Investment Partnerships Program provides non-amortized, low interest loans to developers for acquisition and/or new construction or rehabilitation of affordable rental housing to low income families. However, these increases come after years of decreased funding, resulting in funding levels equivalent to those of a decade or so ago.

Unfortunately, there were virtually no federal funding increases for certain Health and Human Services programs that intersect with homelessness. Those important programs include Projects for Assistance in Transition from Homelessness (PATH), which helps connect homeless persons with disabling mental health issues to services and housing, as well as homeless programs administered by the federal Substance Abuse and Mental Health Services Administration (SAMHSA).

The federal spending bill also preserved funding for the United States Interagency Council on Homelessness (USICH), which leads up federal initiatives under Opening Doors, the federal strategic plan to prevent and end homelessness. Opening Doors is currently being updated and will affect priority-setting across federal agencies, among states, and in local communities. USICH provides a model for statewide Councils addressing homelessness as well as providing research support, best practices, and assistance in leveraging federal initiatives in state and local contexts.



WHAT IS A HOMELESS CONTINUUM OF CARE?

Throughout this report, the terms CoC and CoC Lead Agency are used. These terms have different meanings in different contexts, so a brief explanation is offered here.

Generally speaking, a CoC is made up of all stakeholders in a geographic area that are working together to address homelessness with a focus on persons experiencing “literal” homelessness. The CoC comprises not only homeless-serving nonprofits but also the philanthropic sector, businesses, local governments, housing developers, realtors, health care systems, and more.

Each homeless CoC is specific to a particular geographic area, much like a catchment area. The geographic areas for the CoCs are agreed upon by the local communities and HUD. The State of Florida also recognizes CoC geographic areas consistent with HUD’s strategy. The Florida CoC geographic areas are provided in Appendix VI (page 60) and the contacts for each CoC are presented in Appendix VII (page 61).

As required by the federal HEARTH Act,¹⁵ the CoC establishes a local planning body to organize and deliver housing and services to meet the needs of people who are homeless as they move to stable housing and maximum self-sufficiency. The planning body is typically a CoC Board or CoC Council comprising community leaders, as well as representatives of multiple stakeholder groups.

The CoC also designates a “CoC Lead Agency.”¹⁶ The CoC Lead Agency provides staff leadership for the system, submits funding applications on behalf of the CoC to HUD and the State of Florida, and has a wide range of daunting responsibilities to ensure that the local system is effectively ending homelessness.

The State of Florida supports the important work of these Lead Agencies annually through CoC Staffing Grants. Without a CoC Lead Agency, local organizations that serve the homeless, local governments, and other groups would likely be working at cross-purposes, in silos, without shared data, and without a common vision, plan, or agreed upon expected outcomes and standards.

HUD requires every CoC to operate a Homeless Management Information System (HMIS) to serve as the

local central repository of individual-level data of persons experiencing homelessness, as well as track program results. HMIS provides not only demographics about homelessness, but also reports on the effectiveness of individual programs, and the extent to which the homeless response system as a whole is working to make homelessness rare, brief, and non-recurring.

Therefore, the CoC must designate an “HMIS Lead” which, in most communities, is the same organization as the CoC Lead Agency. The HMIS Lead is responsible for ensuring that the CoC’s HMIS is managed well, has a large quantity of high quality data, and operates according to HUD requirements.

WHAT DOES THE DATA TELL US ABOUT HOMELESSNESS IN FLORIDA?

A common source of data about literal homelessness is the annual PIT count required by HUD. HUD requires each Homeless CoC to conduct an annual count of homeless persons (as defined by HUD) on a single night during the last 10 days of January. In Florida, the CoC Lead Agencies coordinate these efforts, which are known as the PIT Counts.

The objective of the PIT Count is to produce an unduplicated count, or relatively reliable estimate, of the number of homeless individuals in the community on a single night. HUD provides specific guidance to ensure that PIT Counts are reasonably comprehensive and that they provide a count of homeless individuals without duplication errors so that the same person is not counted more than once.

In addition to producing a count of people who are homeless, PIT Counts also collect demographic data and additional information about the person’s experience with homelessness. This allows CoCs and other agencies to examine trends for subpopulations, such as families with children and veterans.

Many communities extract counts of people in shelters and similar programs from the local CoC’s HMIS. People who are homeless but not sheltered are also identified using methods such as personal interviews at campsites and day centers.

Understanding PIT Counts

Conducting a PIT Count is challenging: it requires many volunteers and a great deal of coordination, mapping, and data entry. While PIT Counts provide valuable information, it is understood that they're likely undercounts of homelessness due to the inherent difficulty of locating every homeless person in a community.

Additionally, even with the CoCs' great efforts, the results from year to year can be influenced by various factors, some of which are outside the control of the CoCs. For example, in January 2018 the hurricane season affected PIT Counts in some communities because households that were temporarily sheltered by FEMA in motels were homeless according to the HUD definition and therefore included in PIT Counts. The Mid Florida CoC reported that 18% of those identified as homeless in the PIT count were persons displaced by Hurricane Irma or Maria.

The PIT Count provides a "one-day snapshot" of the persons experiencing homelessness on a given night, and should not be interpreted as a measure of the number of people who experience homelessness over the course of a year. It is estimated that over the course of a year the number of people who experience homelessness is three to four times the number identified in the PIT¹⁷, because people move in and out of homelessness during the year.

In the following sections, we describe homelessness based on PIT data. First, overall homelessness is summarized. Then, separate sections address homelessness among veterans, chronically homeless households, and families with children. The reports are supplemented by feature stories highlighting local CoC initiatives. The detailed PIT Count data on CoCs, including specific subpopulations, homeless characteristics, and more are provided in Appendix II, Tables 1-7 starting on page 46.

SPECIAL

FEATURE

Naomi's House Offers Bridge Shelter

In the Fall of 2016, a member of the Community Church of Vero Beach's Mission Board realized an uncomfortable truth about their community: options were available for a woman who was experiencing homelessness and was fleeing domestic violence, had a substance abuse disorder, was a veteran, or was accompanied by children. Options were also available for a single male who was experiencing chronic homelessness. However, if an unaccompanied, single woman was not struggling with a substance abuse disorder or mental health diagnosis, there was nowhere to find safe and stable shelter in the Vero Beach community. The Community Church set out to change that uncomfortable truth. With this goal in mind, a local real estate agent and member of the Community Church found a property that could address this gap. The property consisted of two duplexes (four total units) and could house up to 16 women when totally operational. Treasure Coast Homeless Services Council, Inc. was approached by the Community Church of Vero Beach's Mission Board in November 2016 with the details of the property and high hopes: "What if we could

raise \$450,000 in the next 90 days to purchase a unit to assist single women without children. Could you manage it? Do you think it would help?"



Treasure Coast Homeless Services Council, Inc. offered to provide \$100,000 in matching funds if the remainder could be raised. During the next 90 days, \$375,000 was raised from the faith community and private donors and Naomi's House was off the ground!

On February 24, 2017, the Treasure Coast Homeless Services Council became the proud owner of this shelter for unaccompanied women. The project offers a safe place for women to stay while they gain employment, increase their incomes, and save funds to relocate to a permanent housing placement. During their stay, these women find the safety and stability they need to deal with their barriers to long-term housing.

Overall Homelessness

In Figure 3 below, the graph shows five years of PIT data for Florida tracked and reported by the CoCs. Over the past five years, homelessness in Florida has declined steadily from 41,542 identified as homeless in January 2014 to 29,717 in January 2018, a reduction of more than 28 percent.

This trend is likely the result of economic improvement and job growth, increasing investments to improve homeless response systems, and increased adoption of best practices, especially Rapid Re-Housing. The dramatic reduction in homelessness in Florida is even more striking based on a ten-year timeframe, over which time homelessness decreased more than 46 percent, down from 55,559 in 2009.

The PIT Counts for each CoC are presented in Appendix II on page 46. Statewide total homelessness declined by 7.5 percent from 2017 to 2018. However, the decrease is not uniform across the state, as shown in Appendix II Table 1 (page 46). Of the 27 CoCs, 19 reported decreases in homelessness from 2017 to 2018, and 8 reported increases. It should be noted that, although CoCs are required to follow specific HUD standards for the PIT Counts, the methodology and coverage may vary from year to year in some geographic areas due to changing resources.

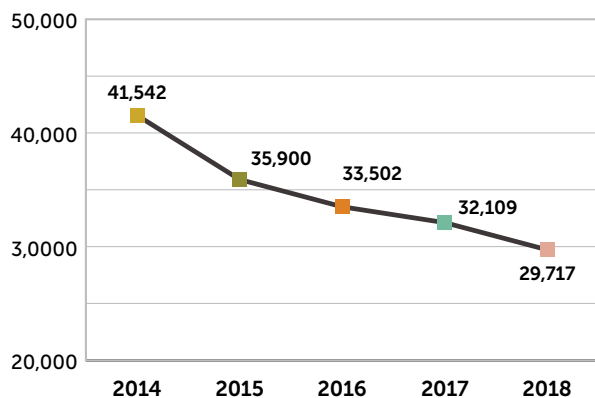
Of those identified as homeless in the one-day PIT Count, 12,123 people were “unsheltered”—living on streets, in cars, in tents, in abandoned buildings, or in other places not meant for human habitation. The remaining 17,594 were staying in emergency shelters or transitional programs, temporary shelters but not permanent housing.

In Florida, the percentage of people who are homeless and sleeping outdoors is 40 percent, as compared to the national average of 35 percent.¹⁸ The sheltered and unsheltered counts for each CoC are presented in Appendix II, Table 2 (page 41). The percentages of unsheltered homelessness vary widely across CoC geographic regions, from a low of 11% to a high of 85%. Four CoCs report unsheltered homeless rates of higher than 80%.

Veteran Homelessness

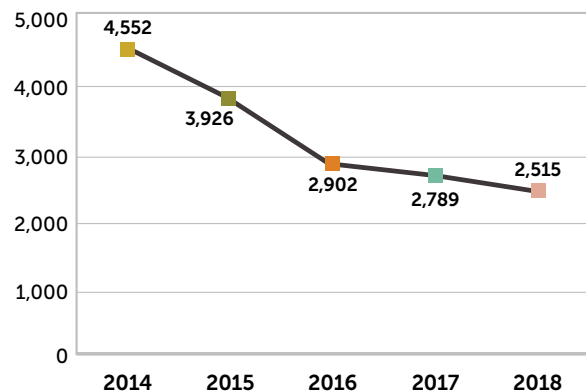
As with total homelessness and consistent with national data, Florida reports a steady decline in homelessness among veterans. Indeed, homelessness among veterans is dropping more rapidly than homelessness in other subpopulations. From 2014 to 2018, overall homelessness declined by about 28 percent, while veteran homelessness dropped 45 percent. Although the changes in veteran homelessness varied across CoCs, as shown in Appendix II Table 5 (page 51), Florida’s attention

FIGURE 3
Total Homelessness



Total homelessness in Florida, as measured by Point in Time Counts, 2014-2018

FIGURE 4
Veteran Homelessness



Homelessness among veterans in Florida, as measured by Point in Time Counts, 2014-2018

to reducing homelessness among veterans is yielding demonstrable results.

Effectively ending homelessness among veterans has been a high priority for the nation and Florida. While Florida has not yet ended veteran homelessness, the progress has been significant and rapid. To date, three Florida CoC communities have been certified by USICH as having effectively ended veteran homelessness in their communities: The Volusia/Flagler CoC, the Lee County CoC, and the Charlotte County CoC. Numerous additional communities are currently working through the certification process and expect to be celebrating an effective end to veteran homelessness sometime during 2018.

It is not an easy task to acquire certification by USICH as having effectively ended veteran homelessness. The community must submit data, systems documentation, and other proof that the following criteria are met:¹⁹

- The community has identified all veterans experiencing homelessness.
- The community provides shelter immediately to any veteran experiencing unsheltered homelessness who wants it.

- The community provides service-intensive transitional housing only in limited instances.
- The community has capacity to assist veterans to swiftly move into permanent housing.
- The community has resources, plans, partnerships, and system capacity in place should any veteran become homeless or be at risk of homelessness in the future.

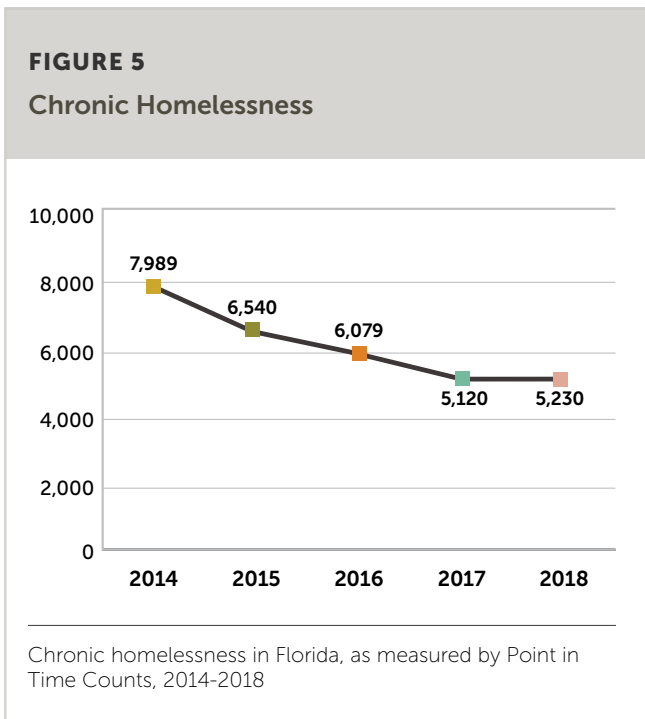
Chronic Homelessness

Persons who are identified as “chronically homeless” are those who have been homeless for longer than a year and have a disabling condition.²⁰ People who have been homeless a long time and have disabling conditions tend to be the most frequent utilizers of community emergency services and costly community resources. Many are also among the most medically vulnerable of people who are homeless due to serious medical conditions.

For both these reasons—the vulnerability and community cost of the chronically homeless population—helping chronically homeless people move out of homelessness and into permanent housing is one of the nation’s and Florida’s top priorities. Although this group accounts for less than 18 percent of those who are homeless in Florida, when a typical taxpayer, business owner, or tourist thinks about the word “homeless,” chronically homeless individuals are most likely to come to mind.

After multiple years of reflecting significant decreases in chronic homelessness, the number increased slightly this year. From 2017 to 2018, statewide chronic homelessness is reported to have increased by 2 percent. Again, as with the other subpopulation reports, changes in chronic homelessness vary widely among CoCs. Ten CoCs reported decreases in chronic homelessness while seventeen reported increases.

This statewide increase in reported chronic homelessness is discouraging but the increase was relatively small and the numbers, as a whole, have continued trending downward. At the same time, it must be recognized that the remaining 5,000 plus chronically homeless individuals are estimated to result in costs exceeding \$157,000,000





Karis Village Offers Permanent Supportive Housing

Located in the Goulds neighborhood, Karis Village is among Miami-Dade County's newest supportive housing communities. The property was developed by Carrfour Supportive Housing, in partnership with the Green Mills Group, and financed in large part with tax credits provided by the Florida Housing Finance Corporation. Karis Village has been certified by the Florida Green Building Coalition and is outfitted with low VOC paint, solar panels, low-flow bathroom fixtures, and Energy Star-certified kitchen appliances, light fixtures, and ceiling fans.

Karis Village offers 88 apartments, a playground, community room, exercise room, and computer lab. Residents include formerly homeless veterans, with approximately half the units set aside for at-risk veterans transitioning out of unstable living situations; the remaining units are available for families and low-income households. Rental subsidies and services for veterans are provided by VASH vouchers through the Housing Authority of the City of Miami

Beach and HUD. Coordinated referrals are made in partnership with the Miami VA and the Miami-Dade County Homeless Trust.

Miami-Dade County has been working hard to bring an end to veteran homelessness and Karis Village is one of three new permanent housing projects that have come online in the past several months to meet this need for housing. Of Karis Village's 88 units, 74 are earmarked for tenants earning at or slightly below 60% of HUD's AMI, or roughly \$31,700 a year, while the remaining 14 units are reserved for those earning at or slightly below 33% of the AMI, or about \$17,500 a year.

Karis Village offers a variety of on-site supportive services aimed at helping residents achieve independence. Some of these services include employment assistance and counseling, health and wellness services, and case management as well as pre- and post-homebuyer education and financial literacy education.



annually in community and emergency services related to managing, rather than ending, homelessness among this special population.²¹

Homelessness Among Families with Children

Homeless families with minor children living on the streets, in shelters, or in transitional programs represents about 28 percent of homelessness (as defined by HUD) in Florida. Nationally, family homelessness is 33 percent of the total homeless population.²² However, despite Florida’s family homelessness numbers being better than other states, reducing family homelessness must continue to be a priority.

Children who experience housing instability are more likely to have emotional and physical health issues, and are less likely to participate and excel in school.²³ Further, the experience of homelessness makes it more challenging for the head of household wage-earner to become or stay employed, precipitating a downward spiral making it even more difficult to recover housing and family stability.

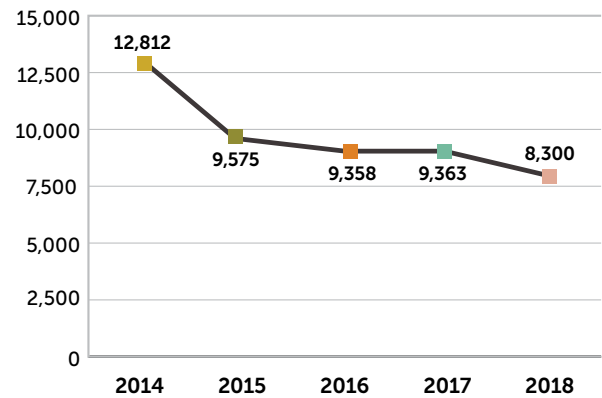
Figure 6 presents PIT Counts of the total number of persons in literally homeless families for the last five years. The change from 2014 to 2018 represents a 35 percent decrease in literal family homelessness, outpacing the reduction in overall literal homelessness, which over the same period was 28 percent.

This significant improvement in the levels of literal family homelessness, which mirrors national outcomes, is, again, likely the result of economic improvement and job growth, increasing investments to improve homeless response systems, and adoption of best practices, especially Rapid Re-Housing. Figure 7 presents PIT counts of the total number of households within the category of literal family homelessness. The typical homeless family (as defined by HUD) comprises 3.4 household members.

However, it must be noted that the picture is not as positive for families with children meeting a broader definition of homelessness (such as those used by the State of Florida and Florida’s Department of Education). When using definitions that aren’t based on HUD or account for more than just “literally” homeless families, the statistics for family homelessness have been steadily increasing, not decreasing, over the past five years. This

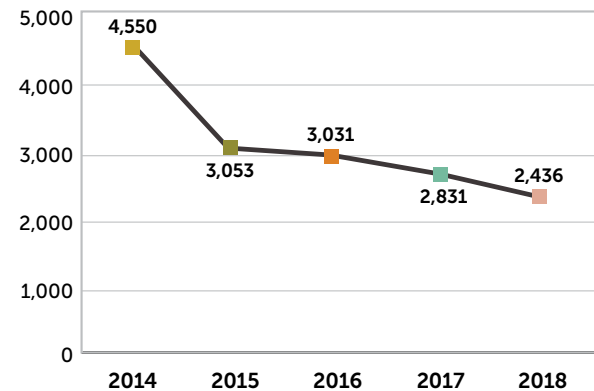
point will be discussed in greater detail in the following section entitled, “Florida Department of Education–Homeless Education Program” starting on page 31.

FIGURE 6
Persons in Literally Homeless Families



Total number of persons with at least one adult and one child in Florida, as measured by Point in Time Counts, 2014-2018

FIGURE 7
Literally Homeless Households



Total number of households with at least one adult and one child in Florida, as measured by Point in Time Counts, 2014-2018

“IN THE 2016-2017 SCHOOL YEAR,

public schools identified **7,411 students** who were staying in homeless shelters (i.e. literally homeless [by HUD’s definition]) and more than **56,000** that were sharing housing with family or friends [(homeless by the state’s definition)]. **The change in metrics and definitions makes an almost 8-fold difference in describing family homelessness.”**

FLORIDA DEPARTMENT OF EDUCATION

Homeless Education Program

As noted previously, family homelessness is defined and described in different ways. For instance, the annual CoC PIT Counts identify families that meet HUD criteria for being “literally homeless.” These families are staying in emergency shelters, transitional programs, or in places not meant for human habitation and are important for assessing a community’s need for sheltered spaces for families.

In the education arena, homelessness is defined in a broader way and by a different method of data collection. Families lose housing most frequently due to eviction, foreclosure, or other economic hardship. They can also lose housing because of a natural or man-made disaster or domestic violence. In any case, the family loses legal hold on their space. They are residing in a place by the grace and mercy of friends or relatives or by their last dollars, in a shelter, or on the streets. It doesn’t matter to the children. Their world just turned upside down. Most times their school is the only space that looks familiar and “belongs” to them.

Even if children have a roof over their heads, the space is not theirs and they are homeless. These circumstances can have a long-lasting detrimental impact on the social-emotional development and educational progress of children. Once housing is lost, especially if lost for economic reasons such as loss of employment, it usually takes a long time for the family to gather the financial resources necessary to regain access to their own housing. Families in this situation can become mobile and have difficulty staying together.

The importance of this difference is highlighted in Tables 1 and 2 in Appendix III (pages 54 and 56), provided by the Florida Department of Education (FDOE). In the 2016-2017 school year, public schools identified 7,411 students who were staying in homeless shelters (i.e. literally homeless) and more than 56,000



that were sharing housing with family or friends. The change in metrics and definitions makes an almost 8-fold difference in describing family homelessness. Figure 8 below illustrates the identification of the total number of homeless students in Florida over the last five school-years as reported by the FDOE.

One thing we know for sure is that, for children and youth who lose their housing, the experience is traumatic. Loss of housing requires most of a child’s attention and emotional energy just to try to understand what is happening to them and their family. They suddenly move in with another family or to a motel or worse. Family routines are different, their neighborhood relationships, the foundation of childhood security, are gone and the third primary source of emotional security and relationships, their school, is threatened.

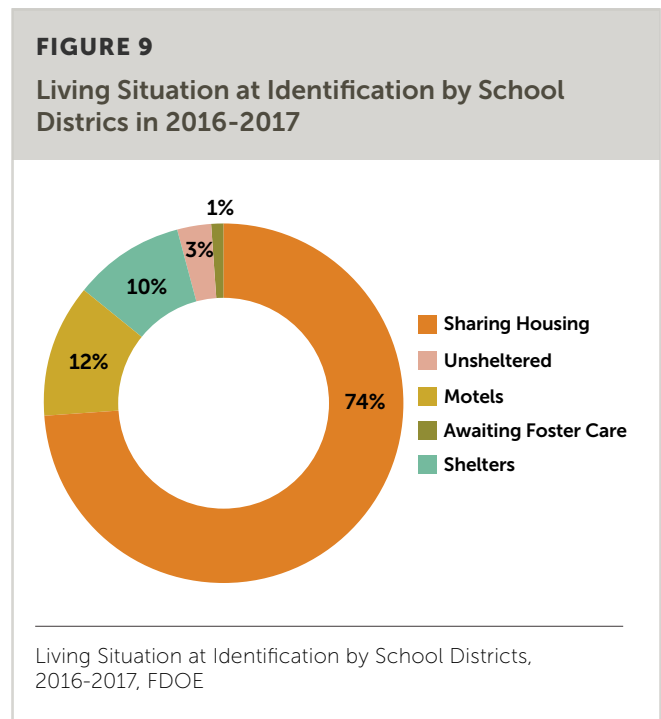
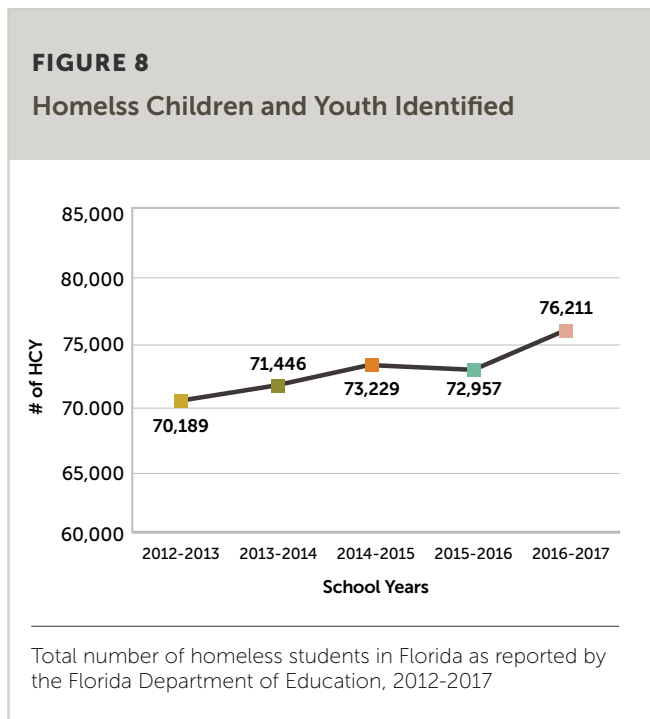
While some are more resilient than others, children do not have the life experience to process this event effectively. The result is doubly detrimental because this age is the time of their lives for setting a foundation of knowledge and skills for life. The academic performance of children and youth who also change schools due to loss of housing tends to drop sharply.

The focus and attention of children are important

commodities in the most stable of times. For the over 76,000 Florida children and youth identified by school districts as homeless and unstably housed in 2016-2017 (see Appendix III, page 54), those commodities, especially in the classroom, are at a premium.

In 2017, the Shimberg Center for Housing Studies and Miami Homes for All released *Homelessness and Education in Florida: Impacts on Children and Youth*.²⁴ Some of the report’s key findings include the following:

- Homeless students were absent for an average of 15 days in 2015-16, compared to 11 days for housed/free-reduced lunch students and 8 days for housed/full price lunch students.
- Passing rates for Florida’s English language arts, math, and science tests were much lower for homeless students than for housed students.
- In 2015-2016, 16 percent of homeless students were suspended from school at least once.
- The gaps between homeless and housed students would be larger without the array of services that schools provide, including enrollment assistance,



transportation to the school of origin, academic support, school supplies, and clothing and hygiene items.

- The lack of affordable housing for ELI families and developmentally appropriate housing options for unaccompanied youth is a root cause of students' homelessness.

The report includes policy recommendations based on the report findings and best practices from across the country. Most recommendations focus on increasing the supply of affordable housing for ELI families. The report also calls for providing families with temporary financial support and other bridges to permanent housing, encouraging business and philanthropy to support schools' assistance programs for homeless students, and increasing developmentally appropriate shelter, housing, and host home programs for unaccompanied youth.

The Education of Homeless Children and Youth

The McKinney-Vento Homeless Assistance Act (MVA), the driving policy for homeless education, is incorporated into the Federal education code as Title IX, Part A of the Every Student Succeeds Act (ESSA)²⁵. The basic tenants of the MVA are that homeless children and youth:

- Have equal access to the same free, appropriate public education, including a public pre-school education, as other children and youths;
- Have barriers to identification of homeless children and youth, their attendance and participation in school, and their academic achievement identified and removed;
- Are assured that they will not be separated from the mainstream school environment; and
- Have access to the educational and related services that they need to enable them to meet the same challenging State academic standards to which all students are held.

The FDOE's Strategic Plan²⁶ assures the academic progress of all students, including those experiencing homelessness. It is within the context of this vision that

Florida's schools and school districts work to identify and support homeless children and youth. FDOE's Homeless Education Program (HEP)²⁷ works with school districts to assure that homeless children and youth in Florida are consistently identified, enrolled quickly in eligible schools and programs that are in their best interest, and are fully participating and achieving in available education programs.

All school districts emphasize the achievement of three outcomes in their program:

1. Identification of all homeless children and youth in their community,
2. Identification and removal of all barriers to regular school attendance and full participation in school programs and activities, and,
3. Continuing academic progress of students experiencing homelessness.

While all public school districts are required to comply with the MVA, Congress provides no direct funding. The bulk of funding comes from a set-aside of Title I, Part A (TIPA) funds at the local level. These set-asides range from less than one percent of the total TIPA allocation to five percent. Congress does provide funds to expand and enhance local school district efforts through a competitive procurement process, however. Fifty-two school districts were awarded these funds for three-year projects ending June 30, 2018. Awards range from \$25,000 to \$125,000, depending on the number of homeless children and youth identified by the school district.

The MVA requires each school district to designate a Homeless Education Liaison to coordinate its implementation. Florida's Homeless Liaisons are greatly resourceful in their ability to garner tangible support within the school district and from their communities. These liaisons are responsible for the following:

1. Referrals of homeless students and their families to available housing, health, mental health, and substance abuse services.
2. Assistance for unaccompanied youth to complete the types of tasks typically done by parents.



Homeless Families Pilot in Santa Rosa County

Florida Housing Finance Corporation, in collaboration with community partners in Santa Rosa County, launched a pilot program in January 2018 that will provide short-term rental housing assistance and housing stability services to homeless families that have school age children. Key community partners include Opening Doors, the Santa Rosa County School District, Family Promise of Santa Rosa County, the Milton Housing Authority, and the FDOE HEP. The intended households are interested families that have been identified as likely to be able to remain stably housed after the pilot's assistance ends.

The pilot in Santa Rosa is "One Family, One Year, One Home." The goals are to increase student attendance and academic achievement, facilitate housing stability, and assist families with increasing family income and resources. Families will be identified and prescreened for eligibility by the Santa Rosa County School District's HEP. Opening Doors will further assess the family, enter or update the family's needs and services information into their HMIS, and refer the family to the Milton Housing Authority for final eligibility determination for the short-term rental assistance. The local partnership will then assist the family to locate and rent eligible units and, afterward, remain stably housed.

Florida Housing approved \$750,000 in HOME funds to provide rental security deposits as well as up to 12 months of rental assistance to the eligible families. Eligible families will also be provided housing stability services including case management, life skills training, and financial workshops by Family Promise of Santa Rosa, Inc. The allocation is expected to serve 25 families per year and a total of 75 families over three years. The amount of rental assistance per family will depend on the unit's rental rate and the amount a family can contribute toward the rent.

The pilot is targeted toward rural or small communities because unstably housed families in those areas tend to have fewer formal resources or housing options than families living in larger communities. Rural families' children are also at greater risk of having to leave their schools because of lack of temporary housing options and the inability to access permanent rental housing. Homeless school liaisons in rural counties report that in many areas of their district, there are little or no rental housing options, and when there are options, families often cannot afford the move-in expenses and rent. More information will be released after The University of West Florida conducts their evaluation of the pilot.

3. Assistance in obtaining documentation for school enrollment, including medical records.
4. Verifying unaccompanied homeless high school graduates' independent status so they can qualify for college financial aid.

Partnerships can be formidable as they are guaranteeing that as many students as possible are identified and have the material, supplies, school uniforms, shoes, and other clothing, hygiene products, and academic support to be successful in their education. Partnerships, as well as funds, are essential resources for successful HEPs. School district Homeless Liaisons develop relationships with organizational partners with specific purposes in mind:

- Identification of homeless children and youth.
- Identification and removal of barriers to regular school attendance.
- Supporting academic achievement for students.

The challenges facing school districts in achieving educational outcomes for their homeless children and youth are:

- housing stability, availability, and affordability;

- employment for parents and guardians;
- basic needs such as clothing and food, and materials and equipment needed for participation in athletics and afterschool activities;
- resources to cover the excess cost of transportation for homeless students who remain in the schools they were attending when they became homeless (school of origin);
- capacity to assure that school staff and community partners are trained to identify families, children, and youth experiencing homelessness;
- social work and case management capacity to identify and address issues that threaten regular school attendance;
- capacity to recruit, train, and manage mentors;
- postsecondary education (technical college, college, university) preparation and guidance for unaccompanied homeless youth;
- lack of clarity of the statutory definition and parameters of homelessness for the purpose of the state tuition and fee exemption for public postsecondary education (s.1009.25(1)(f), F.S.).





Statewide Training and Technical Assistance

FLORIDA HOUSING COALITION

Since 2015, the Florida Housing Coalition (FHC) has served as the designated statewide provider of training and technical assistance to Florida communities working to make homelessness rare, brief, and nonrecurring. In this work, the FHC convenes local governments, service and housing providers, CoC Lead Agencies, and the private sector to explore a myriad of approaches to reducing homelessness and how to effectively implement evidence-based best practices in their communities.

This program, which is administered by Florida's DEO, has been funded modestly for three years by the Legislature, as a set-aside from the LGHTF. Unfortunately, the necessary funding proviso language was not in place in the State budget for the upcoming year (2018-2019).

The FHC's statewide training and technical assistance program has reached thousands of people, each of the 27 CoCs in the state, and virtually every county. The breadth and depth of the assistance is made possible through the multifaceted design of the program.

For example, in addition to offering six regional and statewide assemblies on best practices, in 2017-2018 the FHC presented 19 webinars and made 25 site visits to local communities across the state. Assemblies included a statewide gathering of CoC Lead Agencies and SAMH Managing Entities, as well as workshops for local governments addressing homelessness and others on best practices for coordinated entry.

The webinar offered a 7-part series on Case Management²⁸ in the homeless assistance system, which provided training to more than 400 case managers across the state. Other webinars include a 3-part series on supportive housing, Rapid Re-Housing, and coordinated entry. Webinars also covered topics such as housing coordination between managing entities and CoCs, as well as applying for funding from Florida Housing Finance Corporation and HUD. In addition, impactful publications have been produced and shared at no cost to local communities; these publications

include the Landlord Collaboration Guidebook and the Case Management Guidebook²⁹.

Beyond assemblies, workshops, webinars, and local visits, FHC also provided a hotline and email platform for specific questions about ESG funds, Challenge, HUD CoCs, CoC governance, collaborative efforts, housing coordination, effective sheltering, coordinated entry, and more. Over the course of the year, hundreds of services/housing/CoC organizations accessed this assistance for specific help with tough issues they face every day as they work to reduce homelessness and help people remain stably housed.

FLORIDA SUPPORTIVE HOUSING COALITION

In the 2017-2018 fiscal year, the Florida Supportive Housing Coalition (FSHC) launched the Supportive Housing Community Dialogue Technical Assistance Program. This program is a local face-to-face facilitated program which brings together county and city leaders, local CoCs, Public Housing Authorities, private businesses, Managing Entities, service providers, developers, local state agency representatives, and other stakeholders interested in developing supportive housing for persons with special needs and those experiencing homelessness.

This initiative aimed to demonstrate in many communities that, collectively, they are able to access the resources and expertise needed to develop supportive housing. The Dialogues provided a road map for how the resources and expertise are assembled utilizing case studies from other successful efforts in our state. FSHC launched its Supportive Housing Community Dialogue Technical Assistance Program in the spring of 2018. Initially funded by the 2017 Legislature and through the assistance of additional funding from DCF, FSHC will have facilitated seven community dialogues by the summer of 2018. The Supportive Housing Community Dialogue Technical Assistance Program is administered by the Florida Housing Finance Corporation. This is made possible by State Housing Trust Fund monies appropriated by the Legislature.

The Challenges of Providing Transportation to Homeless Children and Youth to Assure School Stability and Academic Progress

(From Homelessness and Education in Florida: Impacts on Children and Youth, Shimberg Center for Housing Studies, University of Florida, 2017)

School districts are responsible for providing transportation to the school of origin if students' nighttime residence is outside of the school of origin attendance zone. Transporting homeless students back to the school of origin is a provisional solution to the longer term challenge of providing stability to students. It involves trade-offs. On one hand, transporting students to schools of origin prevents the frequent school changes that negatively impact a child's attendance and performance. On the other hand, long and complicated routes to school impose time and financial costs on both students and school districts.

Districts use a variety of methods to comply with the transportation requirements of McKinney-Vento. Where possible, the district accommodates homeless students with access to school bus transportation. Districts may add a bus stop to an existing route, or students may ride buses to a nearby school or other meeting point and then change for the longer trip to the school of origin.

When school bus transportation is not feasible, schools may provide a gas card or mileage reimbursement to the parent for

the extra cost of driving the child to school, or provide public transit passes or reimbursement for older students in urban districts. In other cases, however, the districts hire private van or car services to transport students. The use of services outside of busing is particularly costly for districts and are over and above any extra bus stops or routes that were added to serve students traveling to their school of origin.

Florida schools have an advantage over many other states in coordinating transportation: large, countywide school districts. The state's 2.7 million students are served by just 67 county-level districts. In most cases, students do not leave their districts, and transportation is coordinated within the district. In a small number of cases, however, students will cross county lines to return to their schools of origin. Based on conversations with county liaisons, these transfers are most common across the Orange-Osceola border in Central Florida and in southwest Gulf counties (Sarasota, Charlotte, Lee, and Collier). Cross-county transfers are particularly challenging. They require buses to travel to county lines to swap students, while school bell times and holidays vary across districts.

Examples of School Districts Taking Action to Meet Needs of Homeless Children and Youth

Madison County	Lafayette County	St. Johns County	Collier County
<p>The United Methodist Women (UMW) of Madison County supports the local HEP with donations as needs arise and supplies vouchers for homeless families and their children to shop at the UMW thrift store.</p>	<p>Through community and faith-based collaboration, this county's sending home weekend food backpacks to 23 students. The majority of these students are in their HEP, though others who are not homeless, but still need the food assistance, are included. The weekend food backpacks are a great help for these students and their families.</p>	<p>By increasing community awareness about the children and youth experiencing homelessness in the community, a new advocacy group formed – Mission to End Student Homelessness (MESH). MESH collaborates with other community groups and supports the county's unaccompanied high school students.</p>	<p>Transportation routers in Collier County worked overtime after Hurricane Irma. They did an incredible job of getting students, who had scattered all over the county, to school in the face of so many challenges, not the least of which was finding drivers and then scheduling and arranging routes that avoided streets and roads that were impassible. Add to that the high mobility of families displaced by hurricanes. It was demanding. The District Homeless Liaison said, "I truly do not know how they do it. But they have my sincere thanks and appreciation for doing everything in their power to ensure that students experiencing homelessness were able to get to school as quickly as possible from wherever they were. I applaud them!!!"</p>

ADDRESSING HOMELESSNESS EFFECTIVELY

means that every community has a system in place to ensure that homelessness is **prevented when possible.**

Building Systems to Make Homelessness Rare, Brief, and Nonrecurring

WHAT IT MEANS TO MAKE HOMELESSNESS RARE, BRIEF, AND NONRECURRING

Addressing homelessness effectively does not mean that no one will ever be homeless in Florida. Rather, it means that every community has a system in place to ensure that homelessness is prevented when possible, but when it is not preventable, the system will ensure that homelessness is rare, brief, and non-recurring. The goal is to reduce homelessness to such a low rate that anyone who becomes homeless in a community can move back into affordable housing in 30 days or less with the help of a coordinated system.

According to USICH,³⁰ the system that every community should have in place must be able to:

- Quickly identify and engage people who are homeless or at risk of homelessness;
- Intervene to prevent homelessness and divert people from entering the homeless system;
- Provide immediate access to shelter while permanent housing and support services are identified.



Systems Approach to Addressing Homelessness

In the past, many assumed that the best response to homelessness was a shelter, while others argued that wraparound services or prevention was the answer. We have determined that the solution is to create a system that has appropriately sized elements that will ensure households move out of homelessness and into their own housing as quickly as possible.

Effectively addressing homelessness requires a coordinated system with multiple key components. An effective system requires both (1) an “entry door” into the system – through outreach, coordinated entry, and shelter, and (2) an “exit door” out of homelessness and the homeless system and into affordable rental units – through Rapid Re-Housing and Permanent Supportive Housing.

Local communities and CoCs, incentivized by State support, must ensure that each element works well and has the right-sized level of resources invested. For instance, a community with a large shelter and many services but inadequate Rapid Re-Housing and Permanent Supportive



Housing will have difficulty reducing homelessness. Likewise, a community with housing options but no outreach, shelter, or coordinated entry will also have trouble helping people move out of homelessness as quickly as possible because it will be difficult to locate those dealing with homelessness in the first place.

Below is a summary of the essential key components of an effective homeless response system, as well as some infrastructure requirements that facilitate the coordination

of the system.³¹ In addition to this conceptual summary, feature stories are presented below to provide examples of local CoCs incorporating these components and building their systems.

KEY COMPONENTS OF THE SYSTEM

Outreach & Coordinated Entry – Outreach is a strategy that involves engaging with unsheltered homeless people in whatever location they naturally stay (e.g. in campsites or on the street), building trust through assertive engagement, and offering access to appropriate housing interventions. Coordinated Entry is a standardized community-wide process to outreach, identify, and triage homeless households, and then prioritize and refer them for housing and services. This process consists of utilizing a common tool to assess the level and type of needs (entering the household information into the local HMIS), providing appropriate referrals, and prioritizing access to housing interventions and services to help them move out of homelessness as quickly and stably as possible.

Prevention & Diversion – Prevention provides services and financial assistance to prevent someone from becoming homeless. The assistance is targeted to keep people in their current housing situation. Examples of homelessness prevention include mediation with landlords and payment of past-due rent. Diversion is a strategy that prevents homelessness for people at the point when they are seeking shelter. Effective diversion helps the individual or family stay housed where they currently reside or helps them identify immediate alternate housing arrangements. When necessary, diversion may help by connecting the household with services, mediation, and/or financial assistance to keep them from entering the homeless system. Note that diversion is different from prevention, in that diversion catches the person at the point they are about to enter shelter and diverts them to another solution. Homelessness prevention, on the other hand, assists the household prior to, and not yet at risk to, entering the homeless system.

Emergency Shelter – A facility operated to provide temporary shelter for homeless people. Effective emergency shelters do not have barriers to entry (such as a sobriety requirement) and should be focused on

connecting people with housing options to help them return to affordable rental units. An undue focus on services in shelter is not the best use of resources because services are much more effective following the return to housing rather than before. According to HUD, the average length of stay in emergency shelter prior to moving into permanent housing should not exceed 30 days.

Rapid Re-Housing— A housing intervention designed to move a household into permanent housing (e.g. a rental unit) as quickly as possible, ideally within 30 days. Rapid Re-Housing typically provides (1) help identifying appropriate housing; (2) financial assistance (deposits and short-term or medium-term rental assistance for 1-24 months), and (3) support services for as long as needed and desired, up to a certain limit. This is the best way to help households with moderate to high barriers to housing.

Permanent Supportive Housing— Safe and affordable housing for people with disabling conditions, with legal tenancy housing rights and access to flexible support services. Permanent supportive housing should prioritize people who are chronically homeless with the longest terms of homelessness and the highest level of vulnerability/acuity in terms of health and service

needs. This is the best way to help households with the greatest barriers to housing stability and the greatest needs for long-term assistance, such as those who are chronically homeless.

SYSTEM INFRASTRUCTURE

Homeless Management Information System (HMIS) – A web-based software solution and database tool designed to capture and analyze client-level information including the characteristics, service needs, and use of services by persons experiencing homelessness. HMIS is an important component of an effective Coordinated Entry System, CoC planning efforts, and performance evaluation based on program outcomes.

Continuum of Care (CoC) – A local planning body required by HUD to organize and deliver housing and services to meet the needs of people who are homeless as they transition into stable housing and maximum self-sufficiency. The terms “CoC Governing Body” or “CoC Board” have similar meanings. In some contexts, the term “continuum of care” is also used to refer to the system of programs addressing homelessness.





Update on Coordinated Entry Systems in Florida

Coordinated entry is a standardized community-wide process to outreach, identify, and triage homeless households, and then prioritize and refer them for housing and services. It is an intervention meant to help those who are homeless or at risk of becoming homeless into stable housing as quickly as possible (for a definition, see the glossary on page 67).

The effective implementation of coordinated entry is required for any CoC that accesses HUD funding, which includes every CoC in Florida. HUD issued guidance and specific requirements for Coordinated Entry Systems, and all CoCs created such systems to comply with the requirement as of January 2018. To a great extent, the requirement for coordinated entry was an unfunded mandate from HUD,

though there were limited funds made available to assist with coordinated entry in some communities.

In Florida the successful implementation of Coordinated Entry Systems varies across CoCs. Generally speaking, the higher functioning Coordinated Entry Systems are those in the larger, higher-capacity, better-funded CoC Lead Agencies. CoCs in more rural and geographically dispersed areas have had a greater challenge due to the lack of funding, limited staff, and the heterogeneous nature of the populations served. Additional funding, training, and technical assistance are needed to help all CoCs effectively implement coordinated entry.

In virtually all Florida CoCs, the

common assessment tools are versions of the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT), which is used widely nationally. In addition, CoCs have integrated their Coordinated Entry Systems with their HMIS, consistent with best practices. Similarly, most CoCs have implemented weekly or biweekly “By Name List” meetings, or Registry Meetings, for the Lead Agency and providers to review the list of homeless households prioritized by need and help those at the top of the list move as rapidly into housing as possible.

While coordinated entry is a work in progress for all CoCs, the dedication and hard work of CoC Lead Agencies and their community partners have made substantial headway this past year toward their goals.

DCF Substance Abuse and Mental Health Housing Coordination with Continuums of Care

In 2016, under the leadership of Assistant Secretary John Bryant, the Substance Abuse and Mental Health (SAMH) program office launched a housing coordination effort across Florida. The goal of this effort was to increase and improve collaboration and coordination between SAMH providers and CoC Lead Agencies to identify safe, affordable, and stable housing for their shared high risk and high need populations. Along with housing coordination it is also crucial that a coordinated effort be made between CoCs and providers to ensure that these individuals receive the necessary support services for their health, stability, and self-sufficiency in their communities.

The priority in this initiative is to identify individuals with substance abuse and/or mental health diagnoses who are currently experiencing homelessness or are at the greatest risk of homelessness. SAMH providers and CoCs share a small but high-cost, high-need population that require housing and services. It is critical for these two systems to collaborate and coordinate funding, prioritize need related to acuity of individuals, and navigate housing and service options that best meet their need.

COLLABORATING TO CREATE A PATH TO HOUSING

Lutheran Services Florida Health Systems (LSFHS), the SAMH Managing Entity for Northeast Florida, is exploring new and innovative approaches to coordinating efforts on behalf of the people they serve in their region. The LSFHS Housing Department has worked diligently to develop relationships with each of the seven CoC systems throughout the 23-county region it serves.

In 2017, LSFHS needed two new PATH providers to ensure all areas of their region were covered. PATH programs are tasked to identify, engage, and house homeless individuals with substance abuse and mental health disorders. After surveying the areas and the needs, they approached two entities that were not typical SAMH community providers. These entities were Lead Agencies for their respective CoCs. LSFHS realized that Mid Florida Homeless Coalition CoC and The United Way of Suwannee Valley CoC were uniquely positioned in these areas for the task of serving individuals experiencing homelessness in their communities. With the strengths of the

Managing Entity and the Lead Agencies behind these PATH programs, there has been a powerful impact on individuals in both the SAMH and Homeless Service Systems.



Appendix I: Updates on 2017 Council Recommendations

2017 RECOMMENDATION ONE

- Support the Council's four goals focused on ending homelessness, as well as the Council's Action Plan to meet these goals. The Council has adopted four aspirational goals for Florida, modeled after the goals outlined in the federal strategic plan to end homelessness.
- Prevent and end homelessness among veterans by the end of 2017;
- Achieve the goal of ending chronic homelessness by the end of 2018;
- Prevent and end homelessness for families, youth, and children by the end of 2020; and
- Set a path to ending all types of homelessness in Florida.

UPDATE

Through support of the Office on Homelessness, CoC Lead Agencies, Florida Housing Finance Corporation, and other programs, the State supported the Council's four goals to effectively end homelessness for the most part. Key areas of support, and areas that lack support, are detailed in recommendation updates below.

2017 RECOMMENDATION TWO

Appropriate 100 percent of affordable housing trust fund monies for affordable housing. The Council recommends utilizing all Sadowski Affordable Housing Trust Fund resources for affordable housing, with an increasing focus on the housing needs of ELI, homeless, and special needs households.

UPDATE

For the upcoming 2018-2019 fiscal year, the State appropriated only approximately 39 percent of projected affordable housing trust fund monies for affordable housing and homelessness efforts. The appropriation included allocations for the State Apartment Incentive Loan (SAIL), State Housing Initiative Partnership Program (SHIP), and additional programs. However, a larger percent of trust fund money was set aside for higher-income housing projects.

2017 RECOMMENDATION THREE

Continue strengthening the capacity of homeless CoCs by continuing to appropriate funding for CoC Lead Agency's Staffing Grants and Challenge Grants.

UPDATE

The State continued appropriating funding of \$3,000,000 for CoC Lead Agency Staffing Grants. However, because necessary proviso language was not included in the final budget, Challenge Grants were not funded for the 2018-2019 fiscal year. The loss of Challenge Grant funding represents a reduction, compared to 2017-2018, of \$5,000,000 that could have been used to reduce homelessness in Florida. It is unclear, currently, as to how large of an impact this loss of funding will have on CoCs across the state and the ultimate goal of ending homelessness in the 2018-2019 year. Though it is unclear as of yet, the loss of this amount of money, and the flexibility of spending that this specific grant allows, is expected to have a major impact on CoCs and their goals for the 2018-2019 year.

2017 RECOMMENDATION FOUR

Embrace best practices and incentivize the use of best practices at the local level, including: (1) housing first; (2) Permanent Supportive Housing; (3) Rapid Re-Housing; (4) diversion; (5) prevention; (6) coordinated entry; (7) data-driven decision making; and (8) a focus on system-wide performance outcomes. Four critical actions should be pursued toward this end:

- The Legislature should continue funding the DEO homeless training and technical assistance efforts, funded from the Challenge Grant appropriation.
- The state agencies represented on the Council on Homelessness, as well as the Office on Homelessness, should take a leadership role in modeling and sharing best practices for ending homelessness at the state level to ensure that all entities that utilize state resources are implementing best practices.
- The Office on Homelessness should create a system by which the Office will gather data, assemble performance outcome measures, and accurately measure statewide progress toward the goals adopted by the Council, as well as local CoC efforts to meet those goals.
- The Office on Homelessness should incentivize the adoption of best practices at the local level by incorporating best practices into funding application processes for grants managed by the Office.

UPDATE

For fiscal year 2018-2019, the State discontinued \$200,000 in funding for training and technical assistance for Florida communities and CoCs by failing to include the required proviso language in the budget process. During the past year, the Office on Homelessness successfully restructured contracting processes and deliverables to further incentivize best practices. The Office on Homelessness has been able to reallocate some older funds that it originally could not have used in an attempt to make up for some of this loss.

2017 RECOMMENDATION FIVE

Support the Office on Homelessness and the Council on Homelessness to implement Senate Bill 1534 and the Council Action Plan to prevent and end homelessness by providing additional resources to the DCF Office on Homelessness toward meeting its legislative mandates and goals.

UPDATE

The Office on Homelessness is currently working with the DCF Office of Information and Technology to ensure that critical data elements are collected from CoCs statewide for review. The Office continues to work with DCF Leadership to secure necessary resources to work with statewide providers toward the goal of effectively ending homelessness.



Appendix II: Continuum of Care Point in Time Counts

TABLE 1: Total Homelessness, 2014-2018

CoC #	Continuum of Care (CoC) Geographic Area	2014	2015	2016	2017	2018
FL-500	Manatee, Sarasota Counties CoC	1,377	1,198	1,468	1,447	1,192
FL-501	Hillsborough County CoC	1,944	1,931	1,817	1,549	1,795
FL-502	Pinellas County CoC	3,391	3,387	2,777	2,831	2,612
FL-503	Polk County CoC	536	464	635	512	552
FL-504	Flagler, Volusia Counties CoC	1,633	1,325	1,005	753	683
FL-505	Okaloosa, Walton Counties CoC	1,577	683	629	401	495
FL-506	Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla Counties CoC	805	863	869	1,072	909
FL-507	Orange, Osceola, Seminole Counties CoC	2,254	2,112	1,613	2,074	2,053
FL-508	Alachua, Bradford, Gilchrist, Levy, Putnam Counties CoC	1,256	870	844	819	756
FL-509	Indian River, Martin, St. Lucie Counties CoC	2,591	2,412	2,382	1,732	1,542
FL-510	Clay, Duval, Nassau Counties CoC	2,049	1,853	1,959	1,869	1,794
FL-511	Escambia, Santa Rosa Counties CoC	843	1,014	798	758	632
FL-512	St. Johns County CoC	1,401	1,161	1,064	445	342
FL-513	Brevard County CoC	1,477	1,072	827	845	734
FL-514	Marion County CoC	918	787	823	725	571
FL-515	Bay, Calhoun, Gulf, Holmes, Jackson, Washington Counties CoC	268	317	310	336	381
FL-517	Desoto, Glades, Hardee, Hendry, Highlands, Okeechobee Counties CoC	1,346	1,218	1,071	609	453
FL-518	Columbia, Hamilton, Lafayette, Suwanee Counties CoC	1,070	1,115	1,145	502	493
FL-519	Pasco County CoC	3,356	1,019	1,055	2,512	1,356
FL-520	Citrus, Hernando, Lake, Sumter Counties CoC	511	731	595	635	711
FL-600	Miami-Dade County CoC	4,156	4,152	4,235	3,721	3,516
FL-601	Broward County CoC	2,766	2,615	2,302	2,450	2,318
FL-602	Charlotte County CoC	511	562	388	222	164
FL-603	Lee County CoC	871	614	439	431	728
FL-604	Monroe County CoC	678	615	575	631	973
FL-605	Palm Beach County CoC	1,596	1,421	1,332	1,607	1,309
FL-606	Collier County CoC	361	389	545	621	653
Totals		41,542	35,900	33,502	32,109	29,717

TABLE 2: Sheltered and Unsheltered, 2018

CoC #	Continuum of Care (CoC) Geographic Area	Sheltered	Unsheltered	% Unsheltered	Total
FL-500	Manatee, Sarasota Counties CoC	740	452	38%	1,192
FL-501	Hillsborough County CoC	1,155	640	36%	1,795
FL-502	Pinellas County CoC	1,647	965	37%	2,612
FL-503	Polk County CoC	418	134	24%	552
FL-504	Flagler, Volusia Counties CoC	277	406	59%	683
FL-505	Okaloosa, Walton Counties CoC	83	412	83%	495
FL-506	Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla Counties CoC	810	99	11%	909
FL-507	Orange, Osceola, Seminole Counties CoC	1,693	360	18%	2,053
FL-508	Alachua, Bradford, Gilchrist, Levy, Putnam Counties CoC	323	433	57%	756
FL-509	Indian River, Martin, St. Lucie Counties CoC	513	1,029	67%	1,542
FL-510	Clay, Duval, Nassau Counties CoC	1,365	429	24%	1,794
FL-511	Escambia, Santa Rosa Counties CoC	445	187	30%	632
FL-512	St. Johns County CoC	178	164	48%	342
FL-513	Brevard County CoC	481	253	34%	734
FL-514	Marion County CoC	300	271	47%	571
FL-515	Bay, Calhoun, Gulf, Holmes, Jackson, Washington Counties CoC	109	272	71%	381
FL-517	Desoto, Glades, Hardee, Hendry, Highlands, Okeechobee Counties CoC	69	384	85%	453
FL-518	Columbia, Hamilton, Lafayette, Suwanee Counties CoC	90	403	82%	493
FL-519	Pasco County CoC	253	1,103	81%	1,356
FL-520	Citrus, Hernando, Lake, Sumter Counties CoC	449	262	37%	711
FL-600	Miami-Dade County CoC	2,486	1,030	29%	3,516
FL-601	Broward County CoC	1,449	869	37%	2,318
FL-602	Charlotte County CoC	78	86	52%	164
FL-603	Lee County CoC	524	204	28%	728
FL-604	Monroe County CoC	761	212	22%	973
FL-605	Palm Beach County CoC	458	851	65%	1,309
FL-606	Collier County CoC	440	213	33%	653
Totals		17,594	12,123	41%	29,717

Appendix II: Continuum of Care Point in Time Counts

TABLE 3: Homeless Population Characteristics, 2017-2018

The 27 local CoC planning agencies have reported the following information on the makeup of the homeless population in Florida. They captured this information from direct interviews or from agency data on persons experiencing homelessness served as entered into the HMIS. The current 2018 data is compared to reported 2017 data. Reported characteristics are based on self-reports made by individuals and may not have been verified by other means.

Gender	2017 Number	2017 Percentage	2018 Number	2018 Percentage
Female	12,109	37.8%	11,307	38.1%
Male	19,844	61.8%	18,309	61.6%
Transgender	77	0.2%	67	0.2%
No identification/ Gender Nonconforming	79	0.2%	34	0.1%
Total	32,109	100%	29,717	100%

Age Range	2017 Number	2017 Percentage	2018 Number	2018 Percentage
Under 18	5,605	17.5%	5,532	18.6%
18-24	2,572	8.0%	1,981	6.7%
Over 24	23,932	74.5%	22,204	74.7%
Total	32,109	100%	29,717	100%

Ethnicity	2017 Number	2017 Percentage	2018 Number	2018 Percentage
Hispanic/Latino	4,731	14.7%	4,098	13.8%
Non-Hispanic/Latino	27,378	85.3%	25,619	86.2%
Total	32,109	100%	29,717	100%

Household Type	2017 Number	2017 Percentage	2018 Number	2018 Percentage
People in households with at least one adult and one child	9,363	29.2%	8,300	27.9%
People in households without children	22,268	69.3%	20,973	70.6%
People in households with only children	478	1.5%	444	1.5%
Total	32,109	100%	29,717	100%

Race: Population Category	2017 Number	2017 Percentage	2018 Number	2018 Percentage
American Indian or Alaska Native	278	0.9%	242	0.8%
Asian	122	0.4%	110	0.4%
Black or African-American	11,944	37.2%	11,663	39.2%
Multiple Races	1,132	3.5%	980	3.3%
Native Hawaiian or Pacific Islander	108	0.3%	93	0.3%
White	18,525	57.7%	16,629	56.0%
Total	32,109	100%	29,717	100%

Military Vets: Served/Active Duty	2017 Number	2017 Percentage	2018 Number	2018 Percentage
Yes	2,789	8.7%	2,515	8.5%
No	29,320	91.3%	27,202	91.5%
Total	32,109	100%	29,717	100%

Other Characteristics: Condition	2017 Number	2017 Percentage	2018 Number	2018 Percentage
Chronic Substance Misuse	4,266	13.3%	4,202	14.1%
Severely Mentally Ill	4,747	14.8%	4,804	16.2%
HIV/AIDS	358	1.1%	377	1.3%
Survivors of Domestic Violence	2,959	9.2%	1,682	5.6%
Total	12,330	38.4%	11,605	37.2%

Note: because individuals can fall under multiple categories, the totals provided in the "Other Characteristics" chart will include duplications.

Appendix II: Continuum of Care Point in Time Counts

TABLE 4: Chronic Homelessness, 2014-2018

CoC #	Continuum of Care (CoC) Geographic Area	2014	2015	2016	2017	2018
FL-500	Manatee, Sarasota Counties CoC	270	219	311	285	250
FL-501	Hillsborough County CoC	409	315	254	235	262
FL-502	Pinellas County CoC	489	633	607	690	434
FL-503	Polk County CoC	114	100	88	77	84
FL-504	Flagler, Volusia Counties CoC	198	301	210	85	90
FL-505	Okaloosa, Walton Counties CoC	436	305	306	92	119
FL-506	Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla Counties CoC	220	134	81	112	151
FL-507	Orange, Osceola, Seminole Counties CoC	125	212	106	182	272
FL-508	Alachua, Bradford, Gilchrist, Levy, Putnam Counties CoC	471	395	265	284	272
FL-509	Indian River, Martin, St. Lucie Counties CoC	131	131	77	134	64
FL-510	Clay, Duval, Nassau Counties CoC	431	353	337	286	327
FL-511	Escambia, Santa Rosa Counties CoC	184	219	216	132	78
FL-512	St. Johns County CoC	65	121	35	42	65
FL-513	Brevard County CoC	120	159	193	153	116
FL-514	Marion County CoC	95	66	201	137	173
FL-515	Bay, Calhoun, Gulf, Holmes, Jackson, Washington Counties CoC	36	25	30	38	98
FL-517	Desoto, Glades, Hardee, Hendry, Highlands, Okeechobee Counties CoC	117	227	335	283	259
FL-518	Columbia, Hamilton, Lafayette, Suwanee Counties CoC	621	209	279	34	38
FL-519	Pasco County CoC	1,204	433	404	418	495
FL-520	Citrus, Hernando, Lake, Sumter Counties CoC	10	38	23	40	36
FL-600	Miami-Dade County CoC	732	526	472	294	384
FL-601	Broward County CoC	525	444	430	581	641
FL-602	Charlotte County CoC	156	156	76	29	45
FL-603	Lee County CoC	281	180	90	65	132
FL-604	Monroe County CoC	116	148	125	83	62
FL-605	Palm Beach County CoC	396	452	455	252	164
FL-606	Collier County CoC	37	39	73	77	119
Totals		7,989	6,540	6,079	5,120	5,230

TABLE 5: Homelessness Among Veterans, 2014-2018

CoC #	Continuum of Care (CoC) Geographic Area	2014	2015	2016	2017	2018
FL-500	Manatee, Sarasota Counties CoC	170	152	161	149	108
FL-501	Hillsborough County CoC	236	313	181	172	171
FL-502	Pinellas County CoC	550	589	380	329	281
FL-503	Polk County CoC	40	44	42	35	26
FL-504	Flagler, Volusia Counties CoC	135	110	36	52	44
FL-505	Okaloosa, Walton Counties CoC	211	117	37	27	30
FL-506	Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla Counties CoC	108	113	117	110	108
FL-507	Orange, Osceola, Seminole Counties CoC	299	320	231	218	181
FL-508	Alachua, Bradford, Gilchrist, Levy, Putnam Counties CoC	229	217	123	126	114
FL-509	Indian River, Martin, St. Lucie Counties CoC	118	68	50	72	61
FL-510	Clay, Duval, Nassau Counties CoC	224	184	130	125	121
FL-511	Escambia, Santa Rosa Counties CoC	100	167	112	117	103
FL-512	St. Johns County CoC	48	24	36	40	30
FL-513	Brevard County CoC	333	193	160	187	169
FL-514	Marion County CoC	71	95	108	72	69
FL-515	Bay, Calhoun, Gulf, Holmes, Jackson, Washington Counties CoC	31	40	39	34	34
FL-517	Desoto, Glades, Hardee, Hendry, Highlands, Okeechobee Counties CoC	50	0	12	16	18
FL-518	Columbia, Hamilton, Lafayette, Suwanee Counties CoC	209	139	140	43	41
FL-519	Pasco County CoC	369	114	100	215	186
FL-520	Citrus, Hernando, Lake, Sumter Counties CoC	27	62	49	57	45
FL-600	Miami-Dade County CoC	317	236	157	167	120
FL-601	Broward County CoC	229	247	210	197	189
FL-602	Charlotte County CoC	63	65	65	55	40
FL-603	Lee County CoC	120	62	19	13	18
FL-604	Monroe County CoC	92	93	87	87	67
FL-605	Palm Beach County CoC	151	157	115	65	130
FL-606	Collier County CoC	22	5	5	9	11
Totals		4,552	3,926	2,902	2,789	2,515

Appendix II: Continuum of Care Point in Time Counts

TABLE 6: Family Homelessness: Total Persons in Families with Children, 2014-2018

CoC #	Continuum of Care (CoC) Geographic Area	2014	2015	2016	2017	2018
FL-500	Manatee, Sarasota Counties CoC	246	220	249	245	238
FL-501	Hillsborough County CoC	501	568	533	479	602
FL-502	Pinellas County CoC	526	484	394	365	359
FL-503	Polk County CoC	85	116	218	170	198
FL-504	Flagler, Volusia Counties CoC	462	395	256	198	199
FL-505	Okaloosa, Walton Counties CoC	1,021	117	108	154	147
FL-506	Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla Counties CoC	126	238	234	262	269
FL-507	Orange, Osceola, Seminole Counties CoC	864	720	576	732	713
FL-508	Alachua, Bradford, Gilchrist, Levy, Putnam Counties CoC	122	82	248	120	113
FL-509	Indian River, Martin, St. Lucie Counties CoC	1,231	1,113	1,457	982	688
FL-510	Clay, Duval, Nassau Counties CoC	674	499	493	425	384
FL-511	Escambia, Santa Rosa Counties CoC	122	140	183	139	165
FL-512	St. Johns County CoC	339	264	283	150	123
FL-513	Brevard County CoC	434	456	322	262	213
FL-514	Marion County CoC	354	168	173	126	129
FL-515	Bay, Calhoun, Gulf, Holmes, Jackson, Washington Counties CoC	44	45	44	51	68
FL-517	Desoto, Glades, Hardee, Hendry, Highlands, Okeechobee Counties CoC	517	598	470	232	161
FL-518	Columbia, Hamilton, Lafayette, Suwanee Counties CoC	418	239	260	130	106
FL-519	Pasco County CoC	1,663	227	262	1,696	552
FL-520	Citrus, Hernando, Lake, Sumter Counties CoC	164	245	181	191	285
FL-600	Miami-Dade County CoC	1,311	1,432	1,053	1,175	1,091
FL-601	Broward County CoC	738	516	458	413	462
FL-602	Charlotte County CoC	246	249	165	57	34
FL-603	Lee County CoC	171	94	129	114	305
FL-604	Monroe County CoC	84	53	78	50	249
FL-605	Palm Beach County CoC	269	201	324	326	345
FL-606	Collier County CoC	80	96	207	119	102
Total		12,812	9,575	9,358	9,363	8,300

TABLE 7: Point in Time Counts by County, 2014-2018

County	2014	2015	2016	2017	2018	County	2014	2015	2016	2017	2018
Alachua	1,516	636	777	702	641	Lee	871	638	439	431	728
Baker	N/C	N/C	N/C	N/C	N/C	Leon	805	808	768	1,022	903
Bay	253	308	310	316	372	Levy	N/C	13	14	38	26
Bradford	N/C	0	N/C	6	33	Liberty	N/C	2	1	N/C	N/C
Brevard	1,567	1,178	827	845	734	Madison	N/C	1	8	N/C	N/C
Broward	2,738	2,624	2,302	2,450	2,318	Manatee	494	308	497	570	545
Calhoun	N/C	6	N/C	4	0	Marion	918	787	823	725	571
Charlotte	511	548	388	222	164	Martin	567	504	610	498	311
Citrus	188	180	224	175	169	Miami-Dade	4,156	4,152	4,235	3,721	3,516
Clay	102	147	76	84	62	Monroe	678	615	575	631	973
Collier	361	389	545	621	653	Nassau	93	140	99	142	92
Columbia	473	538	596	292	352	Okaloosa	904	592	464	302	322
DeSoto	340	333	270	178	104	Okeechobee	158	158	128	73	50
Dixie	N/C	N/C	N/C	N/C	N/C	Orange	1,701	1,396	1,228	1,522	1,539
Duval	1,801	1,566	1,784	1,643	1,640	Osceola	278	372	175	239	226
Escambia	862	884	745	693	598	Palm Beach	1,559	1,421	1,332	1,607	1,309
Flagler	188	105	104	75	62	Pasco	3,305	1,045	1,055	2,512	1,356
Franklin	N/C	23	4	N/C	N/C	Pinellas	3,391	3,387	2,777	2,831	2,612
Gadsden	N/C	9	42	25	6	Polk	536	464	635	512	552
Gilchrist	N/C	0	N/C	1	0	Putnam	49	26	53	72	56
Glades	96	96	85	44	36	St. Johns	1,401	1,161	1,064	445	342
Gulf	2	0	N/C	N/C	2	St. Lucie	976	1,096	1,016	642	784
Hamilton	102	114	114	44	N/C	Santa Rosa	N/C	130	53	65	34
Hardee	124	124	96	81	82	Sarasota	891	943	971	877	647
Hendry	138	138	107	61	45	Seminole	275	344	210	313	288
Hernando	77	218	143	189	182	Sumter	59	68	30	29	48
Highlands	495	483	385	172	136	Suwannee	308	350	367	142	141
Hillsborough	2,291	1,931	1,817	1,549	1,795	Taylor	N/C	N/C	28	N/C	N/C
Holmes	N/C	0	N/C	2	3	Union	N/C	N/C	N/C	N/C	N/C
Indian River	1,048	812	756	592	447	Volusia	1,445	1,222	901	678	621
Jackson	13	3	N/C	14	2	Wakulla	N/C	N/C	10	25	0
Jefferson	N/C	4	8	N/C	N/C	Walton	N/C	91	165	99	173
Lafayette	60	68	68	24	N/C	Washington	N/C	0	N/C	N/C	2
Lake	187	265	198	242	312	Totals	41,351	35,964	33,502	32,109	29,717

Appendix III: Homeless Students in Public Schools

TABLE 1: FDOE-Reported Homeless Students, 2016-2017

District Name	Living Situation at the Time the Student Was Identified as Homeless					Total Homeless	Total Non-Homeless	UHY Pre K-12	UHY 9-12
	Shelters	Sharing Housing	Unsheltered	Motels	AFC				
ALACHUA	113	629	22	68	<11	840	30,127	93	70
BAKER	0	<11	0	<11	0	11	5,361	0	0
BAY	50	1,272	62	189	<11	1,583	28,663	174	94
BRADFORD	0	156	<11	14	0	180	3,538	14	14
BREVARD	140	1,764	111	228	19	2,262	76,405	223	179
BROWARD	402	1,797	96	442	<11	2,741	286,751	325	240
CALHOUN	<11	64	<11	0	0	71	2,424	21	<11
CHARLOTTE	59	306	29	61	<11	458	16,777	67	49
CITRUS	133	376	24	31	28	592	16,674	46	43
CLAY	34	460	16	42	<11	557	39,360	64	28
COLLIER	88	686	22	37	67	900	48,601	302	165
COLUMBIA	51	360	25	53	15	504	10,425	24	16
DADE	1,425	5,945	274	400	<11	8,045	367,870	258	223
DESOTO	0	226	29	<11	0	263	5,152	14	14
DIXIE	<11	56	<11	<11	0	67	2,310	0	0
DUVAL	268	2,728	15	323	15	3,349	141,697	371	201
ESCAMBIA	151	1,365	0	102	0	1,618	41,894	72	39
FLAGLER	37	454	18	39	<11	550	13,779	55	33
FRANKLIN	<11	252	24	<11	0	286	1,236	42	17
GADSDEN	<11	265	26	<11	<11	307	6,077	<11	<11
GILCHRIST	<11	<11	<11	<11	0	<11	3,058	<11	0
GLADES	<11	35	<11	<11	0	49	1,893	14	12
GULF	0	<11	<11	0	0	<11	2,128	<11	<11
HAMILTON	0	344	0	20	0	364	1,531	<11	<11
HARDEE	<11	155	0	0	0	160	5,696	15	14
HENDRY	80	430	<11	13	18	545	8,002	35	25
HERNANDO	58	486	16	46	<11	612	23,743	105	66
HIGHLANDS	30	449	<11	<11	0	492	13,065	18	<11
HILLSBOROUGH	443	2,139	106	507	16	3,211	234,268	204	152
HOLMES	0	74	0	<11	0	76	3,617	<11	<11
INDIAN RIVER	81	165	<11	44	<11	302	18,916	12	<11
JACKSON	<11	94	12	<11	<11	124	7,215	16	<11
JEFFERSON	0	<11	0	<11	0	<11	880	<11	<11
LAFAYETTE	0	87	79	0	0	166	1,187	<11	<11
LAKE	77	1,937	41	263	77	2,395	43,921	153	105

COUNCIL ON HOMELESSNESS

LEE	132	1,007	55	297	<11	1,499	100,059	35	28
LEON	249	557	17	43	0	866	36,515	132	71
LEVY	20	194	<11	<11	<11	227	5,895	<11	<11
LIBERTY	0	25	0	0	0	25	1,652	0	0
MADISON	0	86	69	<11	0	159	2,904	<11	<11
MANATEE	117	1,571	41	166	12	1,907	50,306	193	96
MARION	177	1,915	38	280	16	2,426	46,272	517	125
MARTIN	161	270	13	30	<11	477	20,065	94	28
MONROE	63	255	30	<11	<11	360	9,173	20	13
NASSAU	34	433	64	35	0	566	11,837	108	35
OKALOOSA	94	301	<11	42	241	686	34,223	57	36
OKEECHOBEE	0	486	0	<11	0	487	6,860	17	13
ORANGE	300	3,947	60	1,792	31	6,130	209,264	195	160
UCP	0	<11	0	<11	0	<11	838	0	0
OSCEOLA	67	2,273	97	897	<11	3,341	66,958	60	46
PALM BEACH	343	3,199	131	308	330	4,311	207,355	262	164
SOUTH TECH	<11	<11	0	<11	0	12	1,612	0	0
PASCO	214	1,399	75	238	50	1,976	78,677	323	201
PINELLAS	651	2,772	65	493	38	4,019	108,801	456	331
POLK	291	2,489	83	468	0	3,331	103,733	389	305
POLK-Lake Wales	6	176	39	15	0	236	4,137	25	0
PUTNAM	93	549	31	27	<11	701	11,430	125	59
ST. JOHNS	113	677	25	70	<11	886	41,167	165	88
ST. LUCIE	46	584	19	88	<11	742	42,499	120	68
SANTA ROSA	13	1,000	36	46	<11	1,101	28,303	86	59
SARASOTA	185	493	20	80	16	794	45,273	96	91
SEMINOLE	64	1,160	18	292	<11	1,539	71,816	104	73
SUMTER	<11	119	<11	16	<11	144	9,388	<11	0
SUWANNEE	17	435	<11	11	<11	469	6,418	48	28
TAYLOR	<11	81	27	14	0	126	3,035	18	<11
UNION	0	68	0	0	0	68	2,579	0	0
VOLUSIA	181	1,787	60	282	<11	2,318	67,539	248	176
WAKULLA	0	51	<11	<11	0	61	5,534	13	11
WALTON	0	192	13	<11	<11	218	9,851	21	16
WASHINGTON	<11	190	<11	<11	0	199	3,398	<11	<11
DEAF/BLIND	<11	<11	<11	<11	0	18	618	<11	<11
WASH SPECIAL	0	0	0	0	0	0	289	0	<11
FL VIRTUAL	<11	29	12	18	0	60	9,018	<11	0
FAU LAB SCH	0	<11	0	0	0	<11	2,570	0	0
FSU LAB SCH	0	<11	0	0	0	<11	2,446	0	0
FAMU LAB SCH	<11	<11	0	<11	<11	19	530	<11	0
UF LAB SCH	0	0	0	0	0	0	1,189	0	0
STATE TOTAL	7,411	56,384	2,267	9,043	1,106	76,211	2,985,429	6,714	4,191
% of Total	9.7%	74.0%	3.0%	11.9%	1.5%			8.8%	5.5%
				% of Total Students		2.6%	9-12% of UHY		62.4%

LEGEND

Shelters = Living in emergency or transitional shelters

Sharing = Sharing the housing of other persons due to loss of housing, economic hardship or a similar reason; "doubled-up"

Unsheltered = Living in cars, parks, campgrounds, public spaces, abandoned buildings, substandard housing, bus or train stations

Motels = Living in hotels or motels

AFC = Awaiting Foster Care placement (this category was dropped from the Federal definition of homelessness on 12/15/2016)

UHY = Homeless AND NOT in the physical custody of a parent or legal guardian, i.e., an Unaccompanied Homeless (Child or) Youth

Appendix III: Homeless Students in Public Schools

TABLE 2: FDOE-Reported Homeless Students, 2012-2013 through 2016-2017

District Name	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	District Name	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
ALACHUA	551	809	683	785	840	MANATEE	1,791	1,854	1,864	1,581	1,907
BAKER	262	112	93	41	11	MARION	2,421	2,373	2,685	2,494	2,426
BAY	1,626	1,184	1,437	1,506	1,583	MARTIN	125	157	179	265	477
BRADFORD	143	194	254	212	180	MONROE	343	382	456	387	360
BREVARD	1,645	1,690	1,845	1,973	2,262	NASSAU	331	428	484	445	566
BROWARD	2,185	2,323	2,270	2,262	2,742	OKALOOSA	538	533	487	849	686
CALHOUN	57	60	76	99	71	OKEECHOBEE	495	573	468	375	487
CHARLOTTE	493	519	508	436	458	ORANGE	7,234	6,736	6,800	6,853	6,130
CITRUS	303	312	341	600	592	UCP	NA	NA	NA	NA	<11
CLAY	1,379	1,110	1,102	840	557	OSCEOLA	3,156	4,941	4,675	3,562	3,341
COLLIER	1,123	849	779	808	900	PALM BEACH	3,107	2,991	3,750	3,759	4,311
COLUMBIA	578	549	588	553	504	SOUTH TECH	NA	NA	NA	NA	12
DADE	6,475	3,252	4,031	6,103	8,046	PASCO	1,904	2,071	2,190	2,092	1,976
DESOTO	367	402	368	329	263	PINELLAS	3,076	3,038	3,764	3,509	4,019
DIXIE	29	28	62	44	67	POLK	2,547	3,767	3,389	3,856	3,331
DUVAL	1,896	2,111	2,163	2,256	3,348	LAKE WALES	187	246	258	705	236
ESCAMBIA	1,621	2,054	1,938	1,869	1,618	PUTNAM	734	808	674	275	701
FLAGLER	517	522	616	509	550	ST. JOHNS	679	803	809	816	886
FRANKLIN	230	279	225	268	286	ST. LUCIE	466	543	650	718	742
GADSDEN	586	699	529	519	307	SANTA ROSA	1,703	1,776	1,696	1,312	1,101
GILCHRIST	<11	14	<11	<11	<11	SARASOTA	917	924	884	867	794
GLADES	17	24	61	63	49	SEMINOLE	2,235	2,034	1,992	1,898	1,539
GULF	35	20	15	16	<11	SUMTER	156	174	153	144	144
HAMILTON	218	234	251	335	364	SUWANNEE	344	298	354	355	469
HARDEE	128	125	200	192	160	TAYLOR	88	123	94	127	126
HENDRY	195	450	309	424	545	UNION	124	130	121	116	68
HERNANDO	521	443	585	522	612	VOLUSIA	2,195	2,261	2,322	2,171	2,318
HIGHLANDS	385	461	461	461	492	WAKULLA	56	56	40	54	61
HILLSBOROUGH	3,170	3,233	3,813	3,316	3,210	WALTON	230	313	294	241	218
HOLMES	96	102	104	94	76	WASHINGTON	121	138	190	200	199
INDIAN RIVER	278	434	360	311	302	SCHOOL DEAF/ BLIND	14	12	20	16	18
JACKSON	152	113	143	140	124	FL VIRTUAL	38	34	61	98	60
JEFFERSON	<11	<11	<11	<11	<11	FAU— LAB SCHOOL	<11	<11	<11	<11	<11
LAFAYETTE	217	207	208	199	166	FSU— LAB SCHOOL	<11	<11	<11	0	<11
LAKE	2,908	3,229	2,416	2,433	2,395	FAMU— LAB SCHOOL	<11	11	<11	<11	19
LEE	1,446	1,313	1,256	1,293	1,499	UF LAB SCH	0	0	0	0	0
LEON	470	702	797	866	866						
LEVY	217	157	216	190	227						
LIBERTY	52	52	50	47	25						
MADISON	263	534	244	150	159						
						TOTALS	70,189	71,446	73,229	72,957	76,211

Appendix IV: Florida Housing Finance Corporation Permanent Supportive Housing Pilot Projects Updates

In 2013, the Legislature provided a special \$10M appropriation to Florida Housing Finance Corporation (Florida Housing) to fund Permanent Supportive Housing for persons with special needs (persons with disabilities, survivors of domestic violence, and youth aging out of foster care).

Based on Florida Housing’s work with State agencies and supportive housing and homelessness stakeholders, it was decided that the state should pursue a pilot to develop Permanent Supportive Housing intended for chronically homeless persons with significant needs. Because of their lack of housing and stability of services, these individuals become high utilizers of crisis and acute healthcare services and may cycle in and out of correctional facilities, residential care, or institutional settings.

Florida Housing required that each pilot site be in a community with a comprehensive and coordinated approach to identifying, assessing, prioritizing, and serving chronically homeless persons with significant needs. The other key requirement was that each pilot site partner with qualified researchers to conduct a Florida-specific cost/benefits study to evaluate the impact of the Permanent Supportive Housing on a resident’s quality of life and on

cost savings at the local, state and federal level. The data collection and analysis will occur for at least 2 years after the initial lease-up of each pilot site.

Key objectives of the Permanent Supportive Housing for Chronically Homeless Individuals with Significant Needs Pilot:

- Assist each tenant in maintaining stable housing and accessing appropriate healthcare and supportive services;
- Improved physical and behavioral health for each tenant;
- Increased income and self-sufficiency for each tenant;
- Reduced emergency room use, hospital days, psychiatric inpatient admissions, or involvement with the criminal justice and corrections systems;
- Improve quality of life for each tenant;
- Save local, state, and federal resources.

In January 2014, Florida Housing issued a request for applications for a competitive funding opportunity. In May of 2014, Florida Housing selected three applicants to be pilot sites:

Coalition Lift, Miami-Dade

Applicant – Carrfour Supportive Housing in partnership with Camillus House, Citrus Health Network, and the Miami-Dade Homeless Trust; 28 one-bedroom units and 6 efficiency units



Appendix IV: Florida Housing Finance Corporation Permanent Supportive Housing Pilot Projects Updates

Pinellas Hope V, Clearwater-Pinellas

Applicant – Catholic Charities Housing, Inc.;
45 efficiency units

Village on Wiley, Jacksonville-Duval

Applicant – Ability Housing; 43 one-bedroom units

UPDATE AS OF MAY 2018:

Coalition Lift in Miami-Dade opened its doors in the beginning of May 2017 and is completing its first full year of operations. The development serves formerly chronically homeless individuals that were identified as the highest utilizers of publicly funded emergency services in Miami-Dade County. Coalition Lift convened



an advisory council to determine the most eligible populations in the county to more effectively and efficiently serve those in need.

Carrfour Supportive Housing, Citrus Health Network, Camillus House and the Miami-Dade Homeless Trust partnered to identify potential residents, and continue to share staff and resources to facilitate optimal housing and community stability for Permanent Supportive Housing residents. With the assistance from the Behavioral Science Research Corporation, the pilot site is completing its first year of post-housed data collection for the required cost-benefits evaluation. The preliminary cost-benefits results

and analysis should be available late in 2018.

Pinellas Hope V in Pinellas County is the successor of a different program, Pinellas Hope, that made its start in December 2007 as a temporary emergency shelter for over 250 homeless men and women, located in Clearwater on 20 acres provided by Bishop Robert N. Lynch and the Diocese of St. Petersburg. In 2017, through the Florida Housing Pilot Project funding, a 45-unit development was added and fully leased in June 2017.

Catholic Charities, Diocese of St. Petersburg employs two intensive case managers to coordinate support services for the Permanent Supportive Housing tenants. Catholic Charities also continues to work closely in 2018 with the Homeless Leadership Board and Homeless Street Outreach Teams in Pinellas County to coordinate the identification, assessment, and housing of the CoC's high-cost/high-needs chronically homeless individuals.

Village on Wiley in Duval County is in its third year of operations after opening in the Fall of 2015. Of the 43 households living in the apartment community, 39 are participating in the pilot evaluation; an additional 47 persons residing at other Ability Housing properties or scattered site housing are also participating in the evaluation which is now in its second year. Local data from the last two years is demonstrating an improved quality of life, including health outcomes and reduced costs to the healthcare and criminal justice systems.

All applicants are working with their pilot-approved cost/benefits studies' research teams. Florida Housing's Board makes funds available every year to support the cost of each pilot site's cost/benefits study. Meanwhile, DCF and the Agency for Health Care Administration have been very helpful to Florida Housing and the pilot sites in addressing operations or research issues.

The interim findings from last year show a total costs savings of \$2,458,992 across publicly funded systems and crisis services utilized by participants.

Appendix V: Continuum of Care Funding from Federal and State Sources

CoC #	CoC	Total Funding Award	HUD CoC	State Total	State Challenge	State HUD-ESG	State Staffing	State TANF-HP
FL-500	Manatee Sarasota CoC	\$1,403,524.85	\$ 874,382.00	\$529,142.85	\$158,500.00	\$227,500.00	\$107,142.85	\$36,000.00
FL-501	Hillsborough CoC	\$6,730,436.85	\$6,317,794.00	\$412,642.85	\$118,000.00	\$187,500.00	\$107,142.85	
FL-502	Pinellas CoC	\$4,674,662.85	\$4,075,020.00	\$599,642.85	\$205,500.00	\$227,500.00	\$107,142.85	\$59,500.00
FL-503	Polk CoC	\$2,284,993.45	\$1,863,611.00	\$421,382.45	\$158,500.00	\$129,939.60	\$107,142.85	\$25,800.00
FL-504	Flagler Volusia CoC	\$1,950,862.85	\$1,359,720.00	\$591,142.85	\$205,500.00	\$227,500.00	\$107,142.85	\$51,000.00
FL-505	Okaloosa Walton CoC	\$1,165,061.85	\$622,419.00	\$542,642.85	\$205,500.00	\$200,000.00	\$107,142.85	\$30,000.00
FL-506	Franklin Gadsden Jefferson Leon Liberty Madison Taylor Wakulla CoC	\$1,793,897.40	\$1,353,425.00	\$440,472.40	\$205,500.00	\$97,829.55	\$107,142.85	\$30,000.00
FL-507	Orange Osceola Seminole CoC	\$8,093,163.85	\$7,550,681.00	\$542,482.85	\$205,500.00	\$199,740.00	\$107,142.85	\$30,100.00
FL-508	Alachua Bradford Gilchrist Levy Putnam CoC	\$1,265,534.75	\$695,392.00	\$570,142.75	\$205,500.00	\$227,499.90	\$107,142.85	\$30,000.00
FL-509	Indian River Martin St. Lucie CoC	\$2,268,218.85	\$1,675,076.00	\$593,142.85	\$258,500.00	\$227,500.00	\$107,142.85	
FL-510	Clay Duval Nassau CoC	\$5,113,347.85	\$4,478,205.00	\$635,142.85	\$258,500.00	\$227,500.00	\$107,142.85	\$42,000.00
FL-511	Escambia Santa Rosa CoC	\$1,364,711.85	\$757,069.00	\$607,642.85	\$258,500.00	\$200,000.00	\$107,142.85	\$42,000.00
FL-512	St. Johns CoC	\$570,870.85	\$128,228.00	\$442,642.85	\$118,000.00	\$187,500.00	\$107,142.85	\$30,000.00
FL-513	Brevard CoC	\$ 1,150,159.85	\$689,017.00	\$461,142.85	\$118,000.00	\$200,000.00	\$107,142.85	\$36,000.00
FL-514	Marion CoC	\$791,543.85	\$289,901.00	\$501,642.85	\$158,500.00	\$200,000.00	\$107,142.85	\$36,000.00
FL-515	Bay Calhoun Gulf Holmes Jackson Washington CoC	\$548,190.85	\$52,548.00	\$495,642.85	\$158,500.00	\$200,000.00	\$107,142.85	\$30,000.00
FL-517	Desoto Glades Hardee Hendry Highlands Okeechobee CoC	\$674,400.85	\$181,258.00	\$493,142.85	\$158,500.00	\$227,500.00	\$107,142.85	
FL-518	Columbia Hamilton Lafayette Suwanee CoC	\$932,814.85	\$350,172.00	\$582,642.85	\$205,500.00	\$227,500.00	\$107,142.85	\$42,500.00
FL-519	Pasco CoC	\$1,404,172.85	\$896,530.00	\$507,642.85	\$158,500.00	\$200,000.00	\$107,142.85	\$42,000.00
FL-520	Citrus Hernando Lake Sumter CoC	\$951,340.85	\$402,698.00	\$548,642.85	\$205,500.00	\$200,000.00	\$107,142.85	\$36,000.00
FL-600	Miami Dade CoC	\$31,182,674.85	\$30,682,032.00	\$500,642.85	\$158,500.00	\$200,000.00	\$107,142.85	\$35,000.00
FL-601	Broward CoC	\$10,351,420.85	\$9,807,278.00	\$544,142.85	\$205,500.00	\$200,000.00	\$107,142.85	\$31,500.00
FL-602	Charlotte CoC	\$842,740.85	\$207,098.00	\$635,642.85	\$258,500.00	\$227,500.00	\$107,142.85	\$42,500.00
FL-603	Lee CoC	\$2,063,674.85	\$1,739,532.00	\$324,142.85	\$118,000.00	\$63,000.00	\$107,142.85	\$36,000.00
FL-604	Monroe CoC	\$1,161,869.85	\$533,727.00	\$628,142.85	\$258,500.00	\$227,500.00	\$107,142.85	\$35,000.00
FL-605	Palm Beach CoC	\$5,665,292.85	\$5,357,650.00	\$307,642.85	\$158,500.00		\$107,142.85	\$42,000.00
FL-606	Collier CoC	\$511,293.85	\$286,151.00	\$225,142.85	\$118,000.00		\$107,142.85	
TOTALS		\$96,910,880.0	\$83,226,614.00	\$13,684,266.00	\$5,000,000.00	\$4,940,509.05	\$2,892,856.95	\$850,900.00

State HUD-ESG = Federal Emergency Solutions Grant (ESG) funding allocated to the State of Florida by the Department of Housing and Urban Development, to be used for homeless-related housing interventions, outreach, shelters, and more

State TANF-HP = Federal Temporary Assistance to Needy Families (TANF) funding that is allocated to the State of Florida, which is utilized for Homelessness Prevention (HP) services

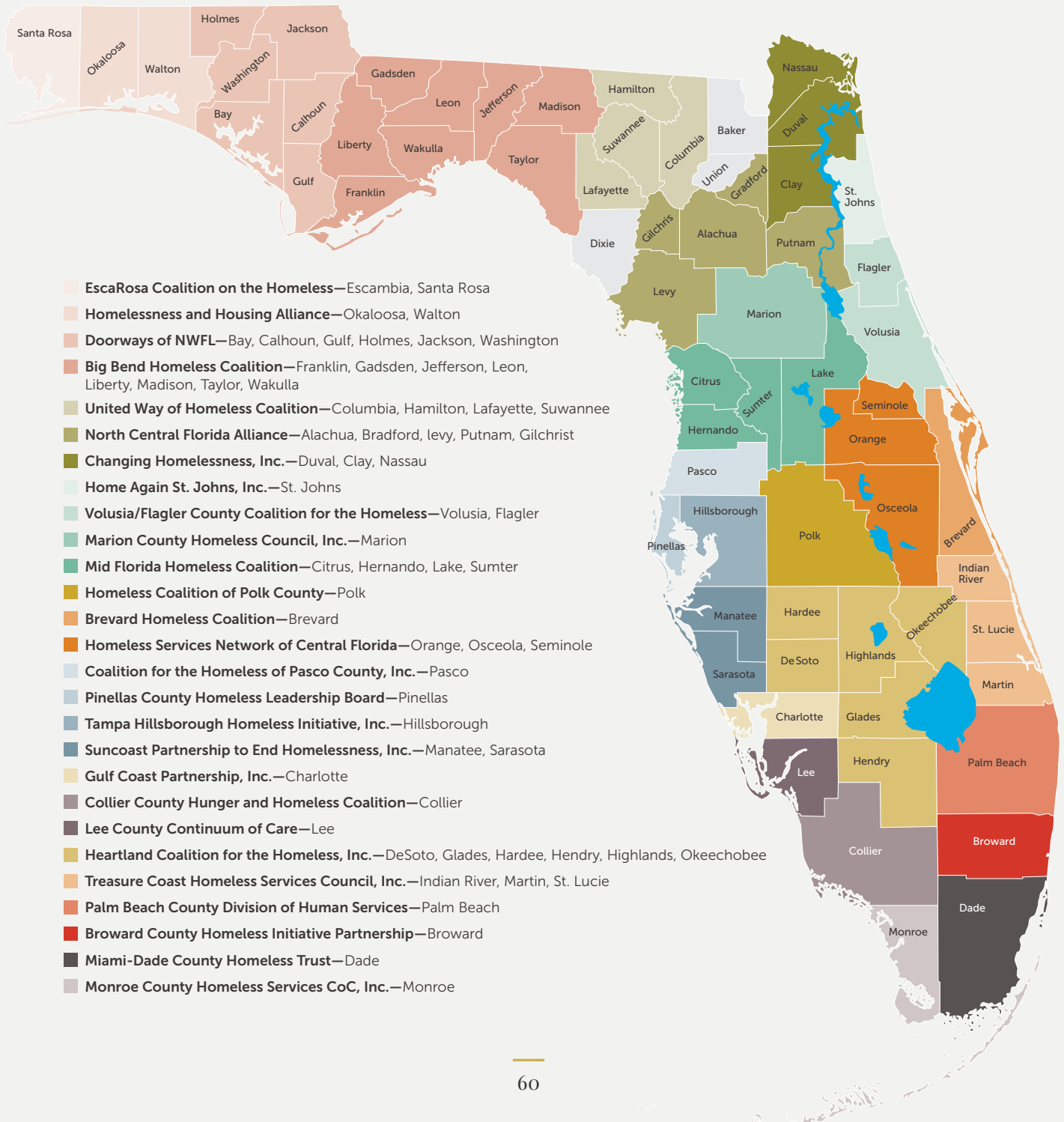
State Staffing = Funding appropriated by the State of Florida legislature to build capacity in local homeless Continuums of Care (CoCs)

State Challenge = Funding appropriated by the State of Florida legislature, and allocated from the Local and State Government Housing Trust Fund, to provide a variety of homelessness-related services and housing

HUD-CoC = Federal Continuum of Care funding granted to local homeless Continuums of Care (CoCs) on a competitive basis to coordinate programs, provide housing interventions, and collect and manage data related to homelessness

Note: State funding reflects FY2017-2018 levels. HUD-CoC funding reflects HUD-CoC awards for the 2017 competition, some of which may not be contracted until 2018-2019.

Appendix VI: Continuum of Care Geographic Areas and Designated Lead Agencies



Appendix VII: Continuum of Care Contacts

CoC#	Contact	Continuum of Care	Counties Served
FL-500	Ed DeMarco, CEO P: 941-955-8987 F: 941-209-5595 ed@suncoastpartnership.org www.suncoastpartnership.org	Suncoast Partnership to End Homelessness, Inc. 1750 17th Street, Bldg. K-1 Sarasota, FL 34234	Manatee, Sarasota
FL-501	Antoinette Hayes-Triplett, CEO P: 813-223-6115 F: 813-223-6178 triplett@thhi.org www.thhi.org	Tampa Hillsborough Homeless Initiative, Inc. 601 East Kennedy Boulevard, 24th Floor Tampa, FL 33602	Hillsborough
FL-502	Susan Myers, CEO P: 727-582-7916 F: 727-528-5764 susanmyers@pinellashomeless.org www.pinellashomeless.org	Pinellas County Homeless Leadership Board 647 1st Avenue North St. Petersburg, FL 33701	Pinellas
FL-503	Laura Lee Gwinn, Executive Director P: 863-687-8386 F: 863-802-1436 lgwinn@polkhomeless.org www.polkhomeless.org	Homeless Coalition of Polk County 328 W Highland Drive Lakeland, FL 33813	Polk
FL-504	Jeff White, Executive Director P: 386-279-0029 F: 386-279-0028 jwhite@vfcch.org www.vfcch.org	Volusia/Flagler County Coalition for the Homeless, Inc. <i>Mailing Address:</i> P.O. Box 309 Daytona Beach, FL 32115-0390 <i>Physical Address:</i> 324 North Street Daytona Beach, FL 32114	Volusia, Flagler
FL-505	Sarah Yelverton, Executive Director 850-409-3070 sarah@hhalliance.org www.hhalliance.org	Homelessness and Housing Alliance P.O. Box 115 Ft. Walton Beach, FL 32549	Okaloosa, Walton
FL-506	Mia Parker, Executive Director P: 850-487-0325 F: 850-488-1616 mparker@bigbendcoc.org www.bigbendcoc.org	Apalachee Regional Planning Council (Big Bend) 2507 Callaway Road, Suite 200 Tallahassee, FL 32303	Leon, Franklin, Gadsden, Liberty, Madison, Taylor, Jefferson, Wakulla
FL-507	Martha Are, Executive Director P: 407-893-0133 F: 407-893-5299 martha.are@hsncfl.org www.hsncl.org	Homeless Services Network of Central Florida 4065 L.B. McLeod Road Unit 4065-D Orlando, FL 32811	Orange, Osceola, Seminole
FL-508	Dana Clayton, Interim President & CEO 352-331-2800 director@ncfalliance.org www.ncfalliance.org	United Way of North Central Florida (North Central Florida Alliance) 6031 NW 1st Place, Gainesville, FL, 32607	Alachua, Putnam, Bradford, Levy, Gilchrist

Appendix VII: Continuum of Care Contacts

CoC#	Contact	Continuum of Care	Counties Served
FL-509	Louise Hubbard, Executive Director P: 772-778-4234 F: 772-567-5991 irhslh@aol.com www.tchelpspot.org	Treasure Coast Homeless Services Council, Inc. 2525 St. Lucie Avenue Vero Beach, FL 32960	Indian River, Martin, St. Lucie
FL-510	Dawn Gilman, CEO P: 904-354-1100 F: 866-371-8637 dgilman@changinghomelessness.org www.changinghomelessness.org	Changing Homelessness, Inc. 660 Park Street Jacksonville, FL 32204	Duval, Clay, Nassau
FL-511	John Johnson, Executive Director P: 850-439-3009, ext. 106 F: 850-436-4656 john.johnson@ecoh.org www.ecoh.org	Opening Doors Northwest Florida, Inc. <i>Mailing Address:</i> (EscaRosa Coalition on the Homeless) P.O. Box 17222, Pensacola, FL 32522 <i>Physical Address:</i> 3702 N. Pace Boulevard, Pensacola, FL 32505	Escambia, Santa Rosa
FL-512	John Eaton, Director 904-819-4425 John.eaton@flaglerhospital.org	Flagler Hospital (Home Again St. Johns) 400 Health Park Boulevard St. Augustine, FL 32086	St. Johns
FL-513	Mark Broms, Executive Director 321-652-2737 mbromsg@gmail.com www.brevardhomelesscoalition.org	Brevard Homeless Coalition c/o Space Coast Health Foundation 6905 N Wickham Road, Suite 301 Melbourne, FL 32940	Brevard
FL-514	Karen Hill, Executive Director P: 352-732-1380 F: 352-622-2975 karen@mchcfl.org www.mchcfl.org	Marion County Homeless Council, Inc. 108 N. Magnolia Avenue, Suite 202 Ocala, FL 34475	Marion
FL-515	Yvonne Petrasovits, Executive Director 850-481-5446 director@doorwaysnwfl.org www.doorwaysnwfl.org	Doorways of NWFL P.O. Box 549 Panama City, FL 32402-0549	Bay, Calhoun, Gulf, Holmes, Jackson, Washington
FL-517	Brenda Gray, Executive Director P: 863-453-8901 F: 863-453-8903 brendagr@highlandshomeless.com www.highlandshomeless.com	Heartland Coalition for the Homeless, Inc. <i>Mailing Address:</i> P.O. Box 1023, Avon Park, FL 33826-1023 <i>Physical Address:</i> 1535 State Road 64 West, Avon Park, FL 33825	DeSoto, Glades, Hardee, Hendry, Highlands, Okeechobee
FL-518	Rita Dopp, Executive Director P: 386-752-5604 F: 386-752-0105 rita@uniteddsv.org www.uniteddsv.org	United Way of Suwannee Valley (United Way of Homeless Coalition) 871 SW State Road 47 Lake City, FL 32025-0433	Columbia, Hamilton, Lafayette, Suwannee

COUNCIL ON HOMELESSNESS

CoC#	Contact	Continuum of Care	Counties Served
FL-519	Don Anderson, CEO P: 727-842-8605 F: 727-842-8538 don@pascohomelesscoalition.org www.pascohomelesscoalition.org	Coalition for the Homeless of Pasco County, Inc. 5652 Pine Street New Port Richey, FL 34652	Pasco
FL-520	Barbara Wheeler, Executive Director P: 352-860-2308 F: 352-600-3374 mfhc01@gmail.com www.midfloridahomeless.org	Mid Florida Homeless Coalition 104 E Dampier Street Inverness, FL 34450	Citrus, Hernando, Lake, Sumter
FL-600	Victoria Mallette, Executive Director P: 305-375-1491 F: 305-375-2722 vmallette@miamidade.gov www.homelesstrust.org	Miami-Dade County Homeless Trust 111 NW 1st Street, Suite 27-310 Miami, FL 33128	Miami-Dade
FL-601	Rebecca McGuire, Executive Director P: 954-357-6167 F: 954-357-5521 RMcguire@broward.org www.broward.org/homeless	Broward County Homeless Initiative Partnership 115 S. Andrews Avenue., Room A-370 Ft. Lauderdale, FL 33301	Broward
FL-602	Angela Hogan, CEO P: 941-626-0220 F: 941-347-8154 ahogan@gulfcoastpartnership.org www.gulfcoastpartnership.org	Gulf Coast Partnership, Inc. 408 Tamiami Trail, Unit 121 Punta Gorda, FL, 33950	Charlotte
FL-603	Jeannie Sutton, Grants Coordinator P: 239-533-7958 F: 239-533-7955 jsutton@leegov.com www.leehomeless.org	Lee County Continuum of Care 2440 Thompson Street Fort Myers, FL 33901	Lee
FL-604	Mark Lenkner, Interim Executive Director 305-440-2315 mark.lenkner@monroehomelesscoc.org www.monroehomelesscoc.org	Monroe County Homeless Services CoC, Inc. P.O. Box 2410 Key West, FL 33045	Monroe
FL-605	Georgiana Devine, Program & Contract Manager P: 561-355-4778 F: 561-355-4801 gdevine@pbcgov.org www.homelesscoalitionpbc.org	Palm Beach County Division of Human Services 810 Datura Street, Suite 350 West Palm Beach, FL 33401	Palm Beach
FL-606	Christine Welton, Executive Director P: 239-263-9363 F: 239-263-6058 executivedirector@collierhomelesscoalition.org www.collierhomelesscoalition.org	Hunger & Homeless Coalition of Collier County P.O. Box 9202 Naples, FL 34101	Collier

Appendix VIII: Council on Homelessness Members

Agency	Represented By
Agency for Health Care Administration	Molly McKinstry
CareerSource Florida, Inc.	Warren Davis
Department of Children and Families	Ute Gazioch
Department of Corrections	Jenny Nimer
Department of Economic Opportunity	Isabelle Potts
Department of Education	Skip Forsyth
Department of Health	Patricia Boswell
Department of Veterans' Affairs	Alene Tarter
Florida Association of Counties	Claudia Tuck
Florida Coalition for the Homeless, Inc.	Eugene Williams
Florida Housing Finance Corporation	Bill Aldinger
Florida League of Cities	Rick Butler
Florida Supportive Housing Coalition	Shannon Nazworth
Ex-Officio Appointees	Represented By
Children's Home Society Pensacola	Lindsey Cannon
US Department of Veteran Affairs	Nikki Barfield
Governor's Appointees	
Andrae Bailey	
Steve Smith	

Appendix IX: Definitions of “Homeless”

FEDERAL DEFINITION OF “HOMELESS” (24 CFR 578.3)

1. Homeless means:

- a. An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
- b. An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- c. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or
- d. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

2. An individual or family who will imminently lose their primary nighttime residence, provided that:

- a. The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
- b. No subsequent residence has been identified; and
- c. The individual or family lacks the resources or support networks, e.g. family, friends, faith-based

or other social networks, needed to obtain other permanent housing;

3. Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

- a. Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
- b. Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
- c. Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction; histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or

Appendix IX: Definitions of “Homeless”

detention for criminal activity, and a history of unstable employment; or

4. Any individual or family who:

- a. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual’s or family’s primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- b. Has no other residence; and
- c. Lacks the resources or support networks, e.g. family, friends, and faith-based or other social networks, to obtain other permanent housing.

- g. Is a migratory individual who qualifies as homeless because he or she is living in circumstances described in paragraphs (a)-(e).

The terms do not refer to an individual imprisoned pursuant to state or federal law or to individuals or families who are sharing housing due to cultural preferences, voluntary arrangements, or traditional networks of support. The terms include an individual who has been released from jail, prison, the juvenile justice system, the child welfare system, a mental health and developmental disability facility, a residential addiction treatment program, or a hospital, for whom no subsequent residence has been identified, and who lacks the resources and support network to obtain housing.

STATE OF FLORIDA DEFINITION OF “HOMELESS” (F.S. 420.621(5))

- a. “Homeless,” applied to an individual, or “individual experiencing homelessness” means an individual who lacks a fixed, regular, and adequate nighttime residence and includes an individual who:
 - b. Is sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason;
 - c. Is living in a motel, hotel, travel trailer park, or camping ground due to a lack of alternative adequate accommodations;
 - d. Is living in an emergency or transitional shelter;
 - e. Has a primary nighttime residence that is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings;
 - f. Is living in a car, park, public space, abandoned building, bus or train station, or similar setting; or

Appendix X: Glossary

■ **Affordable Housing** – In general, housing for which the tenants are paying no more than 30% of their income for housing costs, including utilities. Affordable housing may either be subsidized housing or unsubsidized market housing. A special type of affordable housing for people with disabilities who need services along with affordable housing is “Permanent Supportive Housing.”

■ **Area Median Income (AMI)** – The household in a certain region that is in the exact middle in terms of income compared to other households will set the AMI for their region (the household size is a factor taken into account; there are different AMIs for households of different sizes in the same region). This number is calculated every year by HUD. HUD focuses on a region, rather than a single city, because families and individuals are likely to look outside of cities to surrounding areas when searching for a place to live.

■ **Chronically Homeless** – In general, a household that has been continually homeless for over a year, or one that has had at least four episodes of homelessness in the past three years, where the combined lengths of homelessness of those episodes is at least one year, and in which the individual has a disabling condition.

■ **Continuum of Care (CoC)** – A local geographic area designated by HUD and served by a local planning body, which is responsible for organizing and delivering housing and services to meet the needs of people who are homeless as they move to stable housing and maximum self-sufficiency. The terms “CoC Governing Body” or “CoC Board” have the same meanings. In some contexts, the term “continuum of care” is also sometimes used to refer to the system of programs addressing homelessness. The geographic areas for the Florida CoCs are provided in Appendix VI.

■ **CoC Lead Agency** – The local organization or entity that implements the work and policies directed by the CoC. In Florida, there are 27 CoC Lead Agencies, serving

64 of 67 Florida counties. The CoC Lead Agency typically serves as the “Collaborative Applicant,” which submits annual funding requests for HUD CoC Program funding on behalf of the CoC. The contacts for the CoC Lead Agencies are provided in Appendix VII.

■ **Coordinated Entry System** – A standardized community-wide process to perform outreach and identify homeless households, enter their information into HMIS, use common tools to assess their needs, and prioritize access to housing interventions and services to end their homelessness. Sometimes referred to as a “triage system” or “coordinated intake and assessment.”

■ **Council on Homelessness** – The Council on Homelessness was created in 2001 to develop policies and recommendations to reduce homelessness in Florida. The Council’s mission is to develop and coordinate policy to reduce the prevalence and duration of homelessness, and work toward ending homelessness in Florida.

■ **Diversion** – A strategy that prevents homelessness for people seeking shelter by helping them stay housed where they currently are or by identifying immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. This strategy is used in order to keep individuals from entering the homelessness system in their county.

■ **Effectively End Homelessness** – Effectively ending homelessness means that the community has a comprehensive response in place to ensure that homelessness is prevented whenever possible, or if it cannot be prevented, it is a rare, brief, and non-recurring phenomenon. Specifically, the community will have the capacity to: (1) quickly identify and engage people at risk of or already experiencing homelessness; (2) intervene to prevent the loss of housing and divert people from entering the homelessness services system; and (3) when homelessness does occur, provide immediate access to

Appendix X: Glossary

shelter and crisis services, without barriers to entry, while permanent stable housing and appropriate supports are being secured, and quickly connect people to housing assistance and services—tailored to their unique needs and strengths—to help them achieve and maintain stable housing. (Source: USICH)

- **Emergency Shelter** – A facility operated to provide temporary shelter for people who are homeless. HUD’s guidance is that the lengths of stay in emergency shelter prior to moving into permanent housing should not exceed 30 days.
- **Emergency Solutions Grant (ESG)** – HUD funding that flows through state and certain local governments for street outreach, emergency shelters, rapid re-housing, homelessness prevention, and certain HMIS costs.
- **Extremely Low-Income (ELI)** – Household income that is 30 percent or less of the AMI of the community.
- **Florida Housing Finance Corporation** – Florida Housing was created by the Florida Legislature more than 25 years ago to help Floridians obtain safe, decent, affordable housing that might otherwise be unavailable to them. The corporation provides funds for the development of housing.
- **The Homeless Emergency and Rapid Transition to Housing (HEARTH) Act** – Federal legislation that, in 2009, amended and reauthorized the McKinney-Vento Homeless Assistance Act. The HEARTH/McKinney-Vento Act provides federal funding for homeless programs, including the HUD ESG funds and the HUD CoC Grant funding.
- **Homeless** – There are varied definitions of homelessness. Generally, “homeless” means lacking a fixed, regular, and adequate nighttime residence and living in temporary accommodations (e.g., shelter) or in places not meant for human habitation. Households fleeing domestic violence and similar threatening conditions are also considered homeless. For purposes of certain programs and funding, families with minor children who are doubled up with family or friends for economic reasons may also be considered homeless, as are households at

imminent risk of homelessness. See Appendix IX.

- **Homeless Management Information System (HMIS)** – A web-based software solution and database tool designed to capture and analyze client-level information including the characteristics, service needs, and use of services by persons experiencing homelessness. HMIS is an important component of an effective Coordinated Entry System, CoC planning efforts, and performance evaluation based on program outcomes.
- **Homelessness Prevention** – Short-term financial assistance, sometimes with support services, for households at imminent risk of homelessness and who have no other resources to prevent homelessness. For many programs, the household must also be extremely low income, with income at or less than 30% AMI, to receive such assistance.
- **Housing or Permanent Housing** – Any housing arrangement in which the person/tenant can live indefinitely, as long as the rent is paid and lease terms are followed. Temporary living arrangements and programs – such as emergency shelters, transitional programs, and rehabilitation programs – do not meet the definition of housing.
- **Housing First Approach** – An approach to ending homelessness that centers on providing people experiencing homelessness with housing as quickly as possible and, once the person is housed, then providing services to help the person remain stably housed. This approach is consistent with what most people experiencing homelessness need and want. Housing first is recognized as an evidence-based best practice, is cost effective, and results in better outcomes as compared to other approaches. The Florida Legislature encourages CoCs to adopt the housing first approach to reduce homelessness.
- **Housing Trust Funds** – Florida’s Sadowski Act Trust Fund receives funding from dedicated revenue from real estate doc stamps. In Florida, the Housing Trust Funds are used for affordable housing when appropriated for that use by the State Legislature. Housing Trust Funds may also be funded by general revenue and government bonds.

■ **The Department of Housing and Urban Development (HUD)** – HUD provides funding to states and local communities to address homelessness. In addition, this department supports fair housing, community development, and affordable housing, among other issues.

■ **HUD CoC Funding** – Funding administered by HUD through local CoC Collaborative Applicant (i.e., CoC Lead Agency) entities. Eligible uses for new projects include permanent supportive housing, rapid re-housing, coordinated entry, HMIS, and CoC planning.

■ **Office on Homelessness** – Created in 2001, the Office on Homelessness was established as a central point of contact within state government on matters related to homelessness. The Office coordinates the services of the various state agencies and programs to serve individuals or families who are homeless, or are facing homelessness. Office staff work with the Council on Homelessness to develop state policy. The Office also manages targeted state grants to support the implementation of local homeless service CoC plans. The Office is responsible for coordinating resources and programs across all levels of government, and with private providers that serve people experiencing homelessness.

■ **Outreach** – A necessary homeless system component that involves interacting with unsheltered people who are homeless in whatever location they naturally stay (e.g., in campsites, on the streets), building trust, and offering access to appropriate housing interventions.

■ **Permanent Supportive Housing (PSH)** – Safe and affordable housing for people with disabling conditions, legal tenancy housing rights, and access to individualized support services. PSH that is funded through HUD CoC funding should prioritize people who are chronically homeless with the longest terms of homelessness and the highest level of vulnerability/acuity in terms of health issues and service needs.

■ **Point in Time (PIT) Count** – HUD requires CoCs to count the number of people experiencing homelessness in their geographic area through the Point in Time (PIT) Count on a given day. Conducted by most CoCs during the last ten days in January, the PIT Count includes people served in shelter programs every year, with every other year also including people who are unsheltered. Data collected during the PIT Counts is critical to effective

planning and performance management toward the goal of ending homelessness for each community and for the nation as a whole. A one-night snapshot of homelessness in a specific geographic area, the PIT Count data are presented in Appendix II.

■ **Rapid Re-Housing (RRH)** – A housing intervention designed to move a household into permanent housing (e.g., a rental unit) as quickly as possible, ideally within 30 days of identification. Rapid Re-Housing typically provides (1) help identifying appropriate housing; (2) financial assistance (deposits and short-term or medium-term rental assistance for 1-24 months), and (3) support services as long as needed and desired, up to a certain limit.

■ **Services or Support Services** – A wide range of services designed to address issues negatively affecting a person’s quality of life, stability, and/or health. Examples include behavioral health counseling or treatment for mental health and/or substance abuse issues, assistance increasing income through employment or disability assistance, financial education, assistance with practical needs such as transportation or housekeeping, and connections to other critical resources such as primary health care.

■ **Sheltered/Unsheltered Homelessness** – People who are in temporary shelters, including emergency shelter and transitional shelters, are considered “sheltered.” People who are living outdoors or in places not meant for human habitation are considered “unsheltered.”

■ **Transitional Program** – A temporary shelter program that allows for moderate stays (3-24 months) and provides support services. Based on research on the efficacy and costs of this model, this type of program should be a very limited component of the housing crisis response system, due to the relative costliness of the programs in the absence of outcomes that exceed rapid re-housing outcomes. Transitional housing should be used only for specific subpopulations such as transition-age youth, where research has shown it is more effective than other interventions.

■ **United States Interagency Council on Homelessness (USICH)** – A federal Council that co-ordinates the federal response to homelessness, working in partnership with Cabinet Secretaries and senior leaders from nineteen federal member agencies.

Appendix XI: References

- ¹ See 24 CFR 578.3, available at https://www.ecfr.gov/cgi-bin/text-idx?SID=615dc8ff6d6ba4aca55e267140352478&mc=true&node=pt24.3.578&rgn=div5#se24.3.578_13.
- ² Shinn, Gregory A. "The Cost of Long-Term Homelessness in Central Florida." Central Florida Commission on Homelessness. 2014. Available at <http://rethinkhomelessness.org/wp-content/uploads/2014/11/Eco-Impact-Report-LOW-RES.pdf>.
- ³ National Alliance to End Homelessness. "Rapid Re-Housing: A History and Core Components." 2014. Available at <http://www.endhomelessness.org/library/entry/rapid-re-housing-a-history-and-core-components>.
- ⁴ National Health Care for the Homeless Council. "Homelessness & Health: What's the Connection?" 2011. Available at http://www.nhchc.org/wp-content/uploads/2011/09/HIn_health_factsheet_Jan10.pdf.
- ⁵ American Institutes for Research. "America's Youngest Outcasts: A Report Card on Child Homelessness." 2014. Available at <http://www.air.org/sites/default/files/downloads/report/Americas-Youngest-Outcasts-Child-Homelessness-Nov2014.pdf>. In this report, Florida is ranked #33 among the states in terms of child homelessness and responses.
- ⁶ It is estimated that there are 784,558 adults with serious mental illnesses in Florida. (Source: Florida Department of Children and Families. "Substance Abuse and Mental Health Services Plan 2014-2016." 2013. Available at <http://www.dcf.state.fl.us/programs/samh/publications/2014-2016%20SAMH%20Services%20Plan.pdf>.) Even if all adults identified as homeless in the 2016 Point in Time Counts were seriously mentally ill, which is not true, that would indicate that 97% of people with serious mental illness were housed – not homeless – in Florida. As reported in Appendix II Table 3, fewer than 18 percent of people who are homeless report substance abuse or mental health issues.
- ⁷ Shimberg Center for Housing Studies, University of Florida. "2016 Rental Market Study." July 2016. Available at http://www.floridahousing.org/FH-ImageWebDocs/Newsroom/Publications/MarketStudies/2016/Full%20RMS%20final%20rev09_16.pdf.
- ⁸ It should be noted that the Shimberg study defines "affordable" as any housing for which the household would pay housing costs no more than 40% of its household income. A more common criterion for "affordable" is that housing costs are equal or less than 30% of household income. Under that definition, Florida has only 22 affordable units for every 100 households with extremely low income.
- ⁹ "Extremely low income" (ELI) is defined as having household income at or below 30% of the community's Area Median Income (AMI).
- ¹⁰ Affordable housing, as used here and in the Shimberg study, includes both unsubsidized market-rate rental units and rental housing that has been subsidized through government programs.
- ¹¹ Florida Housing Coalition. "Home Matters." 2018. Available at http://www.flhousing.org/?page_id=5915.
- ¹² National Low Income Housing Coalition. "Out of Reach 2017." 2017. Available at http://nlihc.org/sites/default/files/oor/OOR_2017.pdf.
- ¹³ United Way of Florida. "ALICE Florida: 2017 Update." 2017. Available at http://www.uwof.org/sites/uwof.org/files/17UW%20ALICE%20Report_FL%20Update_2.14.17_Lowres.pdf. "ALICE" is the acronym for "Asset Limited, Income Constrained, Employed."
- ¹⁴ In 2007, 62% of personal bankruptcies were caused by medical debt. See study cited in National Health Care for the Homeless Council. "Homelessness & Health: What's the Connection?" 2011. Available at http://www.nhchc.org/wp-content/uploads/2011/09/HIn_health_factsheet_Jan10.pdf.
- ¹⁵ The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 is the primary federal law governing federal programs related to homelessness. The HEARTH Act amended and reauthorized the McKinney-Vento Homeless Assistance Act, the initial overarching federal homelessness legislation. The provisions of the HEARTH Act provisions are reflected in 24 CFR 578 and other federal statutes. See https://www.ecfr.gov/cgi-bin/text-idx?SID=8ed95da3254c35cd41c95dfdd2aa239a&mc=true&tpl=/ecfrbrowse/Title24/24cfrv3_02.tpl#0.
- ¹⁶ The terms "CoC Lead Agency" and "Collaborative Applicant" are often used interchangeably in Florida. The Collaborative Applicant is the CoC-designated organization, sometimes called the CoC Lead Agency, that submits funding proposals to HUD on behalf of the CoC. A Collaborative Applicant may be either a local government or a local non-profit organization. Further,

- in most communities the Lead Agency also assumes the responsibilities of the local “Homeless Coalition” described in State Statute, but in some communities these responsibilities are divided between different entities. See F.S. 420.623 and 420.624, available at http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0400-0499/0420/0420PARTVIContentsIndex.html.
- ¹⁷ See United States Department of Housing and Urban Development. “The 2017 Annual Homeless Assessment Report (AHAR) to Congress, Part 1: Point-in-Time Estimates.” See also “The 2017 Annual Homeless Assessment Report (AHAR) to Congress, Part 2: Point-in-Time Estimates.” December 2017. Available at <https://www.hudexchange.info/resources/documents/2017-AHAR-Part-1.pdf> and <https://www.hudexchange.info/resources/documents/2017-AHAR-Part-2.pdf>.
- ¹⁸ See United States Department of Housing and Urban Development. “The 2017 Annual Homeless Assessment Report (AHAR) to Congress, Part 1: Point-in-Time Estimates.” December 2017. Available at <https://www.hudexchange.info/resources/documents/2017-AHAR-Part-1.pdf>.
- ¹⁹ United States Interagency Council on Homelessness. “Criteria and Benchmarks for Achieving the Goal of Ending Veteran Homelessness.” February 2017. Available at https://www.usich.gov/resources/uploads/asset_library/Vet_Criteria_Benchmarks_V3_February2017.pdf.
- ²⁰ The HUD definition is more specific than this general description. HUD requires documentation that the person (1) has a disabling condition and (2) has been homeless either continuously for at least one year or on at least four occasions in the previous three years where the combined length of homelessness in those occasions is at least twelve months. See <https://www.hudexchange.info/resources/documents/Defining-Chronically-Homeless-Final-Rule.pdf>.
- ²¹ This estimate is based on a cost of \$30,000 per chronically homeless person annually. This cost estimate is conservative, given the research reports summarized previously in this report.
- ²² See United States Department of Housing and Urban Development. “The 2017 Annual Homeless Assessment Report (AHAR) to Congress, Part 1: Point-in-Time Estimates.” December 2017. Available at <https://www.hudexchange.info/resources/documents/2017-AHAR-Part-1.pdf>.
- ²³ American Institutes for Research. “America’s Youngest Outcasts: A Report Card on Child Homelessness.” 2014. Available at <http://www.air.org/sites/default/files/downloads/report/Americas-Youngest-Outcasts-Child-Homelessness-Nov2014.pdf>.
- ²⁴ See http://www.shimberg.ufl.edu/publications/homeless_education_fla171205RGB.pdf.
- ²⁵ See <https://www.gpo.gov/fdsys/pkg/BILLS-114s1177enr/pdf/BILLS-114s1177enr.pdf>.
- ²⁶ See <http://www.fldoe.org/policy/state-board-of-edu/strategic-plan.html>.
- ²⁷ See <http://www.fldoe.org/policy/federal-edu-programs/title-x-homeless-edu-program-hep.html>.
- ²⁸ Florida Housing Coalition’s Case Management webinar series and other past webinars are available at <http://www.flhousing.org/training-3/past-trainings-on-homelessness/>.
- ²⁹ Florida Housing Coalition’s Landlord Collaboration Guidebook and Case Management Guidebook are available at <http://www.flhousing.org/publications/>.
- ³⁰ United State Interagency Council on Homelessness. “What Does Ending Homelessness Mean?” 2017. Available at https://www.usich.gov/opening-doors_.
- ³¹ Florida Housing Coalition. “Building an Effective Homeless Crisis Response System.” March 2017. Available at <http://www.flhousing.org/wp-content/uploads/2017/03/Building-an-effective-homeless-crisis-response-system.pdf>.