

HOMELESSNESS IN ARIZONA ANNUAL REPORT 2017



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HOMELESSNESS IN ARIZONA

2017 ANNUAL REPORT

EXECUTIVE SUMMARY

This is the twenty-sixth Annual Report on Homelessness in Arizona prepared pursuant to A.R.S. § 41-1954(A) (19) (g). The report provides information about homelessness in Arizona, and all references to State Fiscal Year (SFY) 2017 refer to the period from July 1, 2016, through June 30, 2017. This report attempts to recognize the similarities and differences in demographic characteristics of subgroups that make up the homeless population, as well as the similarities and differences in the issues that impact homelessness in the various regions of our state. This year's report also includes numbers of individuals served in various programs throughout geographically diverse regions of the state as well as comparisons with national data. The intent of this report is to serve as an important resource for all stakeholders working to prevent and end homelessness. It is equally important as a reminder that behind each statistic is the face of a person who is striving to end his or her own homelessness.

Single, male adults constitute the largest group of homeless individuals. Lack of available healthcare has contributed significantly to their inability to overcome barriers to employment and independence. They are more likely to experience serious illness, depression, mental illness, and often self-medicate – leading to serious substance abuse issues. Families, on the other hand, tend to be younger and consist of females with young children. Families experience less physical and mental health issues or substance abuse problems, which is likely the result of more readily available healthcare. For families, the lack of safe, affordable childcare is a major barrier to stable employment income and independence.

Estimates of the number of homeless individuals in Arizona vary. During the last week of January each year, program staff and volunteers participate in the Point in Time (PIT) survey, an event where staff and volunteers count all homeless individuals in shelters and on the streets on that particular day. In 2017, PIT counts from Maricopa County, Pima County, and the rural counties estimate the number of unsheltered individuals counted statewide at 3,166 – a slight decrease from 3,244 counted in 2016.

Results in Arizona, as well as nationally, have demonstrated that housing is the foundational intervention that moves an individual or family from homelessness to self-sufficiency. Without housing programs, all other intervention programs are less effective. The 2017 Continuum of Care (CoC) reports from Maricopa, Pima, and the rural counties estimate that 37,404 individuals statewide received services in Emergency Shelters, Transitional Housing, and Permanent Supportive Housing programs during SFY 2017, which is a nine percent decrease from SFY 2016.

Phoenix and Maricopa County account for 59 percent of the state's homeless population, followed by Pima County at 27 percent. Rural counties make up the remaining 14 percent of individuals experiencing homelessness.

INTRODUCTION

The Arizona Homeless Coordination Office, within the Arizona Department of Economic Security (ADES) Division of Aging and Adult Services (DAAS), submits an annual report to the governor, the president of the Senate and the Speaker of the House on the status of homelessness and the efforts to prevent it. This report provides information on:

- Demographic characteristics and circumstances of individuals experiencing homelessness in Arizona and nationally
- Statewide progress during the past year to assist homeless individuals
- Information on current programs
- Homeless youth

The data for this report is collected from numerous sources, including the PIT shelter survey, Housing Inventory Count, 2017 aggregate data from the Homeless Management Information System (HMIS), reports from contracted service providers through the ADES Homeless Coordination Office, U.S. Census Bureau population data, and local, state, and national research reports on homelessness. Thank you to the following for collaboration in providing data for this report: Maricopa County Association of Governments Continuum of Care (CoC), Tucson Pima County CoC and the Balance of State Continuum of Care (BOSCO). Thank you to the following for their contributions to this report: the Arizona Department of Veteran Services (ADVS), the Arizona Coalition to End Homelessness (ACEH), the Arizona Department of Housing (ADOH), the Arizona Department of Education, (ADE), and Community Information and Referral.

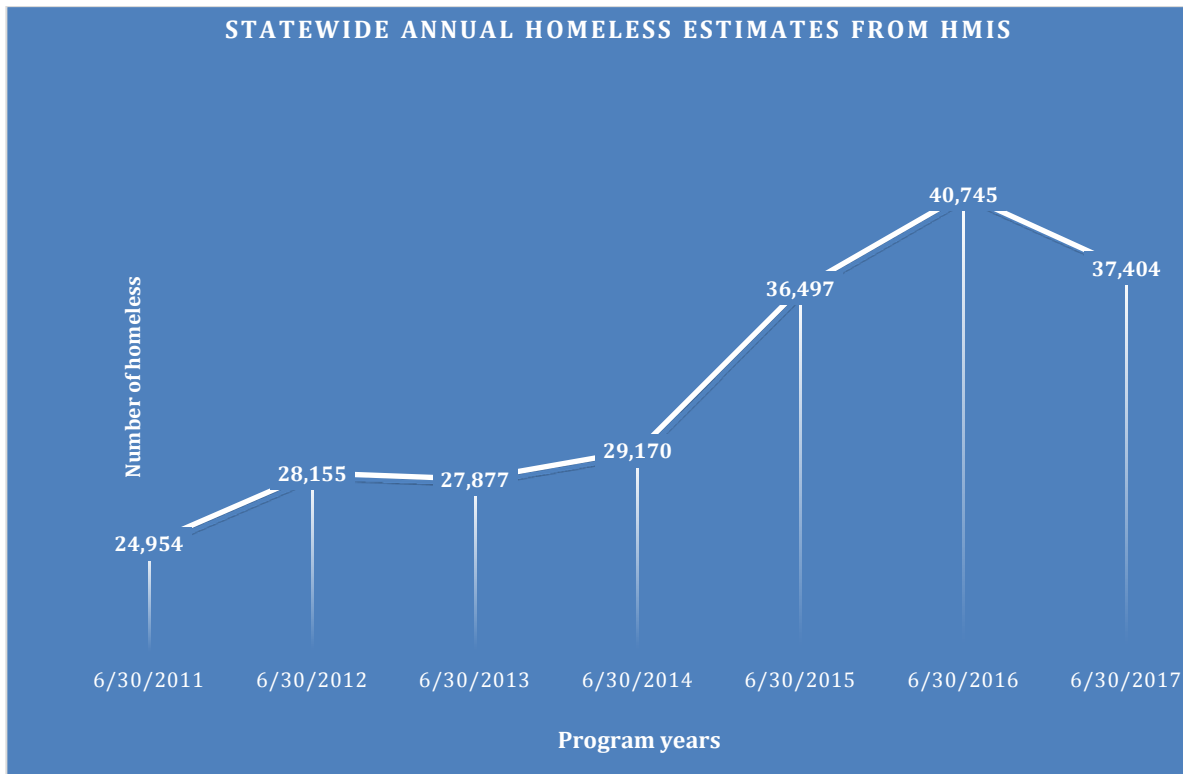
WHO IS HOMELESS IN ARIZONA

STATEWIDE DEMOGRAPHICS

The Department of Housing and Urban Development (HUD) defines homelessness as lacking a fixed, regular, and adequate night-time residence. This would include a primary night-time residence that is a public or private place and not meant for human habitation. Living in a publicly or privately operated shelter designated to provide temporary living arrangements, including congregate shelters, transitional housing, or hotels and motels paid for by charitable organizations or federal, state, or local government programs would also meet this definition. Additionally, exiting an institution where (s)he has 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 would qualify. Based on annually reported information from all three Continua of Care, approximately 37,404 adults and children experienced homelessness in Arizona during SFY 2017. Community Emergency Shelters,

Transitional Housing, and Permanent Housing programs administered these services to Arizona's homeless.

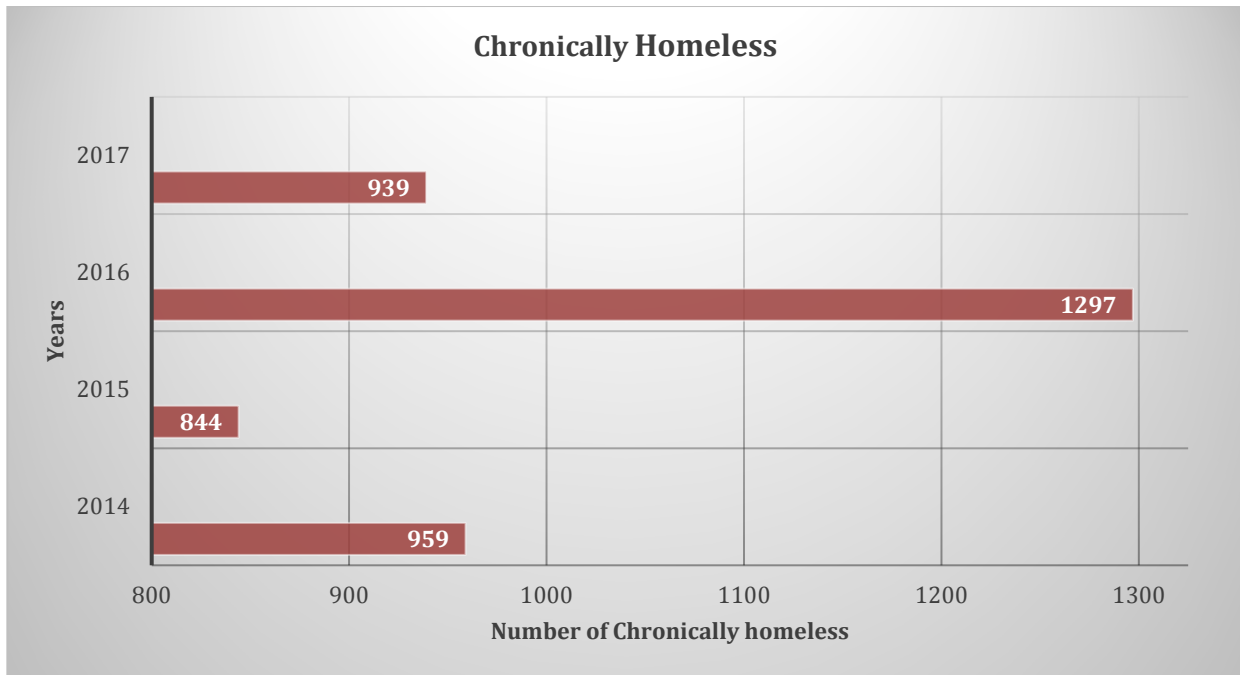
The graph illustration below displays a consistent rise in the homeless population since 2011. In 2017, however, there is a slight decrease in the total number of homeless.



VULNERABLE AND CHRONICALLY HOMELESS

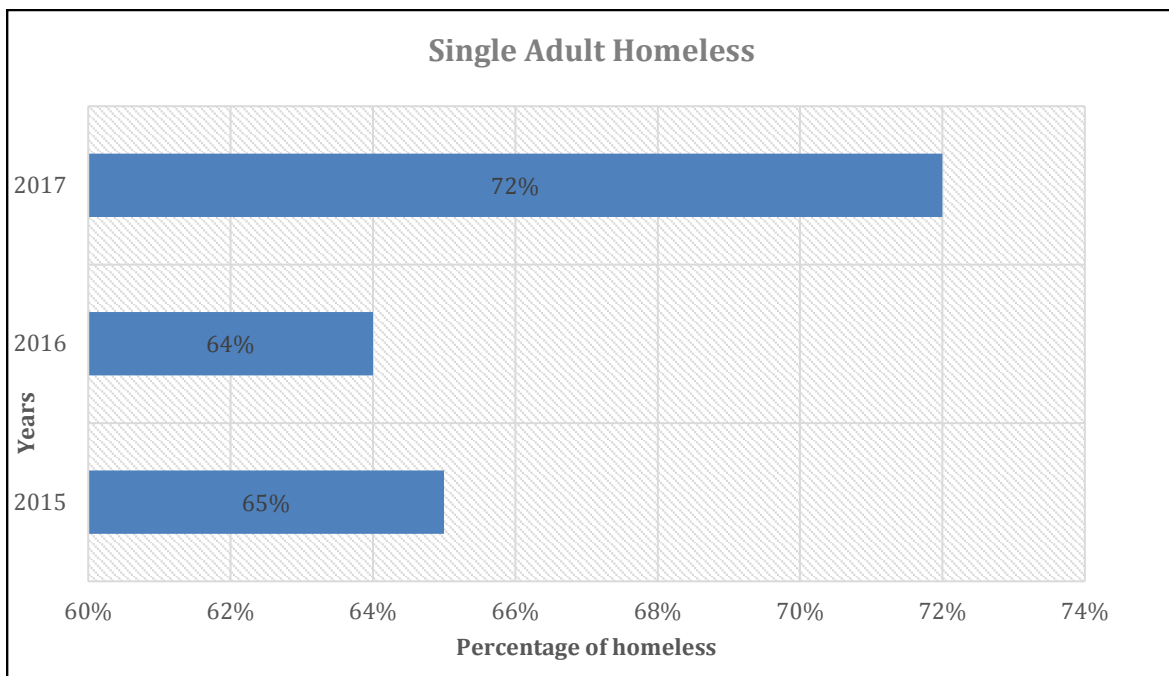
Addressing chronic homelessness is a priority focus in Arizona's efforts to end homelessness. Chronically homeless means a person has experienced homelessness more than four times in the past three years or has been homeless for one continuous year or longer. Chronically homeless individuals are the most vulnerable, the most visible on the street, and the most difficult population to serve. Many have lived on the streets for years and have difficulty transitioning to housing and reconnecting with their communities. They are predominately single and they are the highest users of emergency rooms and hospital services. They are also the most likely to die on the streets without resources and housing assistance.

The 2017 PIT survey counted 8,947 sheltered and unsheltered homeless. An estimated 15 percent (939) of the homeless identified were chronically homeless. There was a decrease in the number of chronically homeless counted in 2014 and 2015, but in SFY 2016 the number of chronically homeless increased. Overall, the number of chronically homeless has declined from 2014-2017. The graph below displays this trend over a 4-year period.



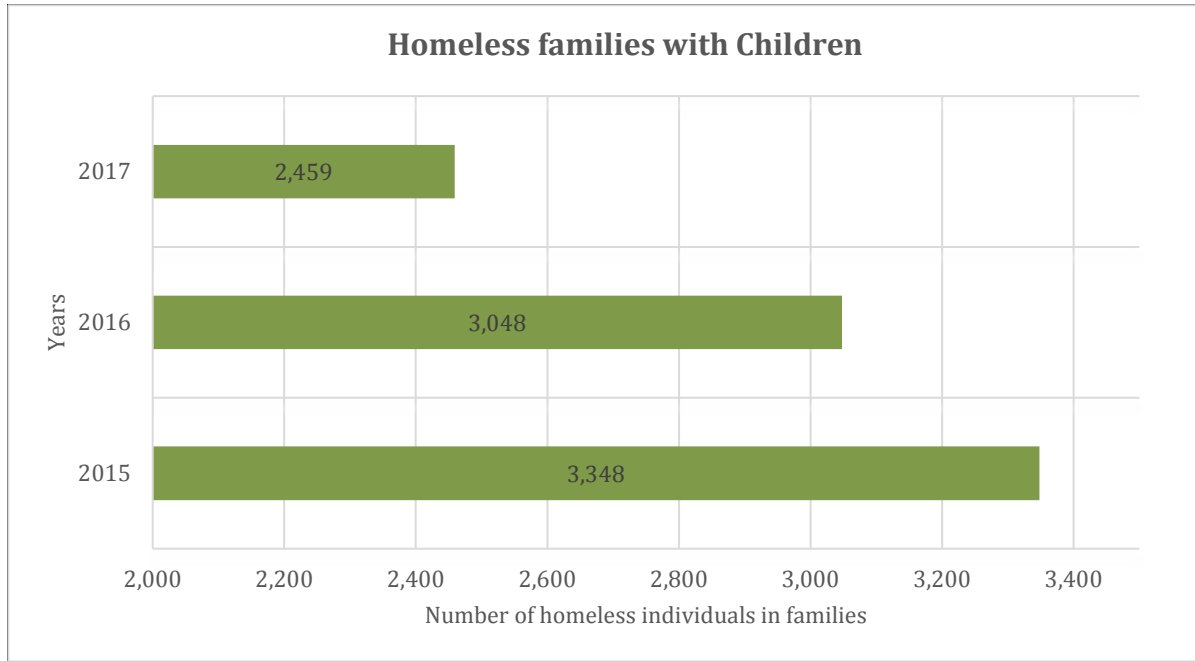
SINGLE ADULTS

The number of single adults surveyed during the PIT survey was 6,433, which accounts for 72 percent of the homeless population during the annual PIT survey. Men made up the majority of the single homeless during the PIT survey at an estimated 64 percent. The graph below illustrates that the percentage of single adults remained constant for 2015 and 2016, but the percentage of singles adults increased significantly in 2017.



HOMELESS FAMILIES WITH CHILDREN

The 2017 PIT survey counted 2,459 homeless individuals in families residing in shelters and on the streets. People in families accounted for approximately 27 percent of the total homeless counted. The number of homeless families statewide, however, has decreased since 2015, as illustrated in the graph below.



Chronic homelessness for families also presents a challenge for communities throughout Arizona. Chronically homeless families have the highest level of need in comparison to other homeless subpopulations. During their annual PIT surveys, Maricopa County reported 16 chronically homeless families with children, the rural counties reported eight, and Pima County did not report any families as chronically homeless.

VICTIMS OF DOMESTIC VIOLENCE (DV) *(Information and data provided by the ADES, Domestic Violence Program)*

Quarterly data submitted to ADES reported that 3,992 adults and 3,928 children received Emergency Shelter and Transitional Housing services from domestic violence service providers during SFY 2017. An estimated 59 percent reside in the metropolitan areas of Maricopa and Pima Counties. The average length of stay in the programs was approximately 51 days.

Of those who reported receiving public benefits, 40 percent of victims receive benefits from the Supplemental Nutrition Assistance Program (SNAP). The Arizona Health Care Cost Containment System (AHCCCS) estimates that 40 percent have health plan enrollments. Approximately four percent receive Supplemental Security Income (SSI) or Social Security Disability Income (SSDI), five percent receive Temporary Assistance to Needy Families

(TANF) Cash Assistance, and seven percent receive benefits under the Women, Infants, and Children (WIC) program.

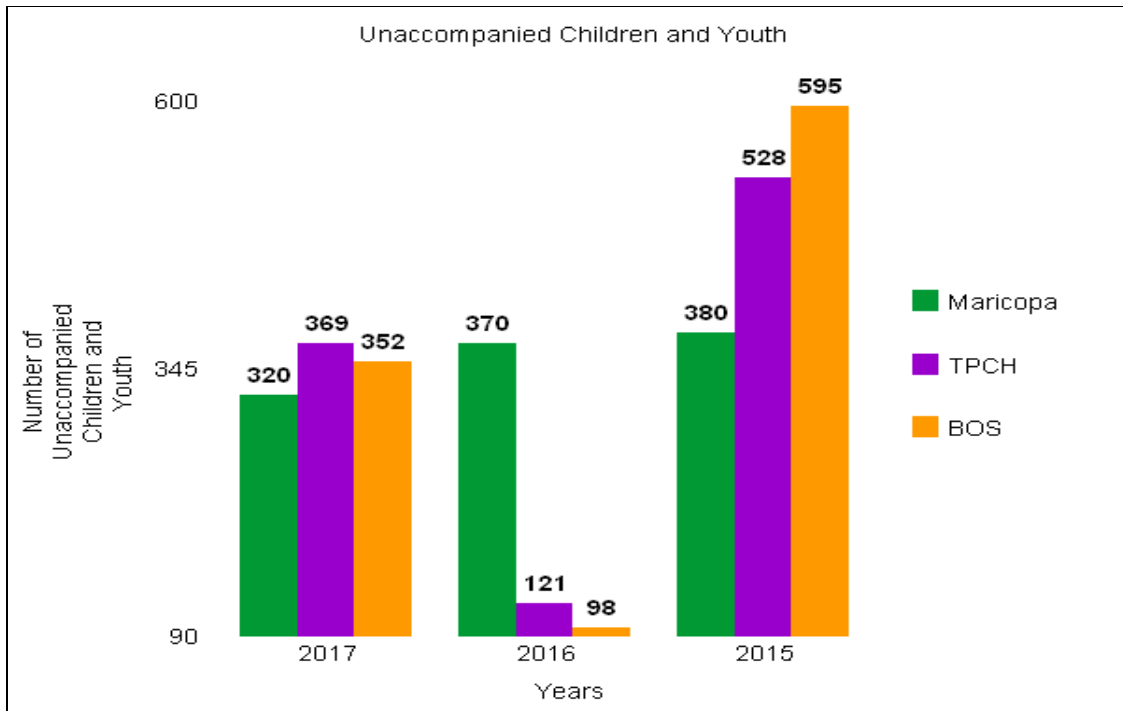
The key measure of success for those receiving Emergency Shelter and Transitional Housing is their ability to develop safety plans and increase their knowledge of the services available to them in their communities. These best-practice measures indicate they have developed skills that will keep them safe once they have left the shelter. In 2017, 90 percent reported they knew how to plan for their safety, and 91 percent had increased their knowledge of the services available to them.

The Domestic Violence Program is moving in a new direction that expands the types of services provided to victims. The traditional model of emergency shelter coupled with transitional housing had a limited focus and was based on the assumption that individuals needing services had to reside in a facility. Effective October 1, 2017, ADES began contracting with organizations to provide Mobile and Community Based services. These services provide advocacy and case management to those living in the community. The goal is to increase the amount of services available to victims.

Finally, all service providers must now develop policies and procedures that reflect trauma-informed care. The department will be developing tools to measure how effective the organizations are in delivering trauma informed care.

UNACCOMPANIED HOMELESS YOUTH AND CHILDREN

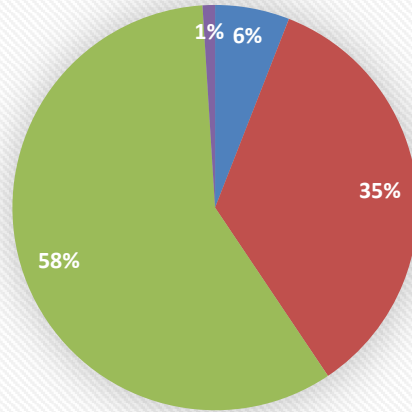
Unaccompanied homeless youth, often referred to as “*youth on their own*,” are the most difficult subpopulation of homeless individuals to quantify. This category includes young people who left home, were thrown out of their homes, or were abandoned by parents or guardians. It also includes youth who have aged out of the foster care system and have no resources or family connections on which to rely. HUD has defined individuals under the age of 18 as “children” and those between the ages of 18 and 24 as “youth.” The 2017 PIT survey counted the number of unaccompanied homeless children and youth in Maricopa County at 320, Pima County counted 369, and the rural counties identified 352. The chart below displays the number of homeless youth and children over a three-year period.



ARIZONA AND THE AGING HOMELESS POPULATION

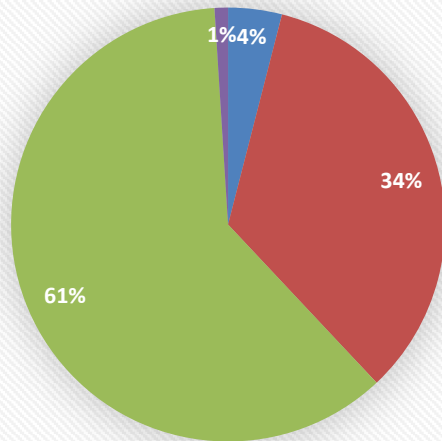
During SFY 2015, 34 percent of the adult homeless population that received homeless services in Maricopa County were aged 45 or older, and four percent were over 62 years of age. In both SFY 2016 and 2017, 35 percent of the homeless population in Maricopa was aged 45 or older and six percent were over 62. The increasing numbers of aging adults in the homeless population is both a national and state concern.

2016/2017 Homeless Age Demographics



■ Over 62 ■ Over 45 ■ 44 and under ■ Null

2015 Homeless Age Demographics



■ Over 62 ■ Over 45 ■ 44 and under ■ Null

National studies have shown a clear upward trend in the proportion of older individuals (50-64) among the homeless population. This is a concern because older homeless adults have higher rates of geriatric syndromes, including problems performing daily activities, walking, vision and hearing, as well as falls and frailty when compared to the [general population](#). Older homeless individuals also suffer higher rates of cognitive impairments compared to younger homeless individuals.

Homelessness is a reality that touches almost every system and person in society, from policymakers and businesses to neighborhoods and individuals. Theories about solutions,

stereotypes of causes, and programs to fix the homeless problem abound, but the problem remains.

VETERANS *(Information and data provided by the ADVS)*

The recent success of actions to decrease statewide veteran homelessness centers around the state's adoption of one plan to end homelessness among veterans. The ADVS developed the Arizona Action Plan to End Homelessness among veterans outlining a set of goals, strategies, and objectives to guide stakeholders in critical activities related to ending homelessness over a five-year period. ADVS is committed to successfully ending homelessness for all veterans in Arizona and establishing a replicable, national model. Former Arizona Governor, Janice K. Brewer, adopted the Action Plan as the state's official plan to end veteran homelessness in early 2011. The Action Plan was originally scheduled to run through the end of 2015; however, the directors of ADVS and ADOH met in mid-2016 to outline their strategic vision for ending veteran homelessness moving forward by proposing an update to the original Action Plan. In the fall of 2016, ADVS began reconvening key stakeholders across the state in an effort to survey the current landscape of veteran homelessness in Arizona. A draft of the updated Action Plan is available [online](#).

During the annual PIT Survey for 2017, there were 525 veterans identified as sheltered and 204 veterans identified as unsheltered. Arizona has demonstrated that ending veteran homelessness is possible. Ending veteran homelessness, or reaching Functional Zero, does not mean that no veteran will ever experience homelessness again. Functional zero is reached when the number of veterans experiencing homelessness within a community is less than the average number of veterans being connected with permanent housing each month.

WHERE DO PEOPLE EXPERIENCE HOMELESSNESS?

METROPOLITAN AREAS

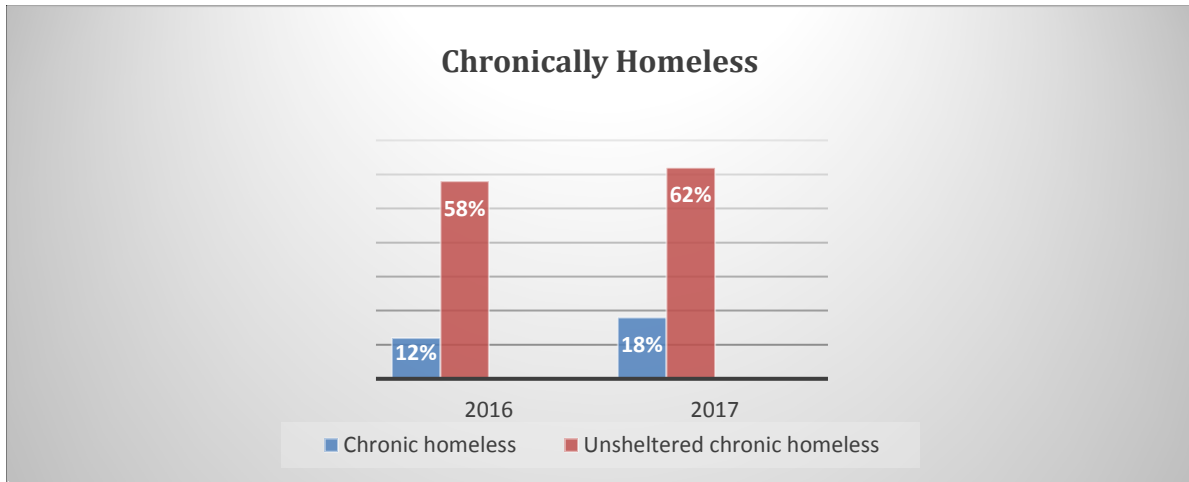
Metropolitan areas, which include Maricopa County and Pima County, account for 86 percent of all homelessness in Arizona. Urban population centers tend to have more job opportunities and services that attract individuals and families experiencing poverty and ultimately homelessness.

MARICOPA COUNTY (Information and data provided by the Maricopa Regional Continuum of Care and Community Information and Referral)

Maricopa County represents 61 percent of the state’s population and reports 54 percent of the state’s homeless population totaling 22,092 during SFY 2016 - 2017.

In Maricopa County, 67 percent of those who experienced homelessness were single adults, while 12 percent were adult members of families. The remaining 21 percent of the homeless population in Maricopa were children in families. Over 40 percent of all adults experiencing homelessness in Maricopa County self-report a serious mental illness (SMI), HIV/AIDs, or a substance use disorder.

According to the 2017 survey, there were 3,546 homeless individuals housed in shelters and 2,059 unsheltered individuals on the streets. This represents a 25 percent increase from the 2016 unsheltered total of 1,646. The survey also reported that 18 percent (1,026) of the homeless population was chronically homeless, and of those, 62 percent (701) were unsheltered. Compared to the 2016 PIT survey, the chronically homeless subpopulation has increased by 52 percent (296 sheltered and 413 unsheltered in 2016). The charts below illustrate the increase in the chronically homeless and the unsheltered homeless population.





Maricopa County’s primary coordination and planning body on issues of homelessness is the Maricopa Regional Continuum of Care (CoC) staffed by the Maricopa Association of Governments (MAG). The CoC provides policy direction and leadership on homeless issues, directs year-round planning, and submits a consolidated grant application each year to HUD to secure funding for service providers throughout the county who provide shelter and services to the homeless. Additionally, the CoC oversees the collection and distribution of data to monitor progress and inform the planning process through the Homeless Management Information System (HMIS) and the annual PIT survey. The CoC is the focal point for issues concerning homelessness in Maricopa County, where efforts focus on community awareness and dissemination of information. More importantly, the CoC provides a vehicle to initiate collaborative efforts. In support of those efforts, MAG has become the coordinating body for the Regional Heat Relief Network, bringing together municipalities and government entities, homeless service providers, faith-based groups, local businesses, and community volunteers to ensure hydration and refuge stations are available during summer months for the homeless and vulnerable throughout the county.

PIMA COUNTY *(Information and data provided by the Tucson Pima Collaboration to end Homelessness Continuum of Care)*

Pima County accounts for 15 percent of the state’s total population and 23 percent of the state’s homeless population. The frequency of homelessness in Pima County has improved from one out of every 131 persons in SFY 2013 to one out of every 180 persons during SFY 2014. The density of Pima County’s homeless population remains the highest in the state, but is much improved over the past two years and is only slightly higher than the national average.

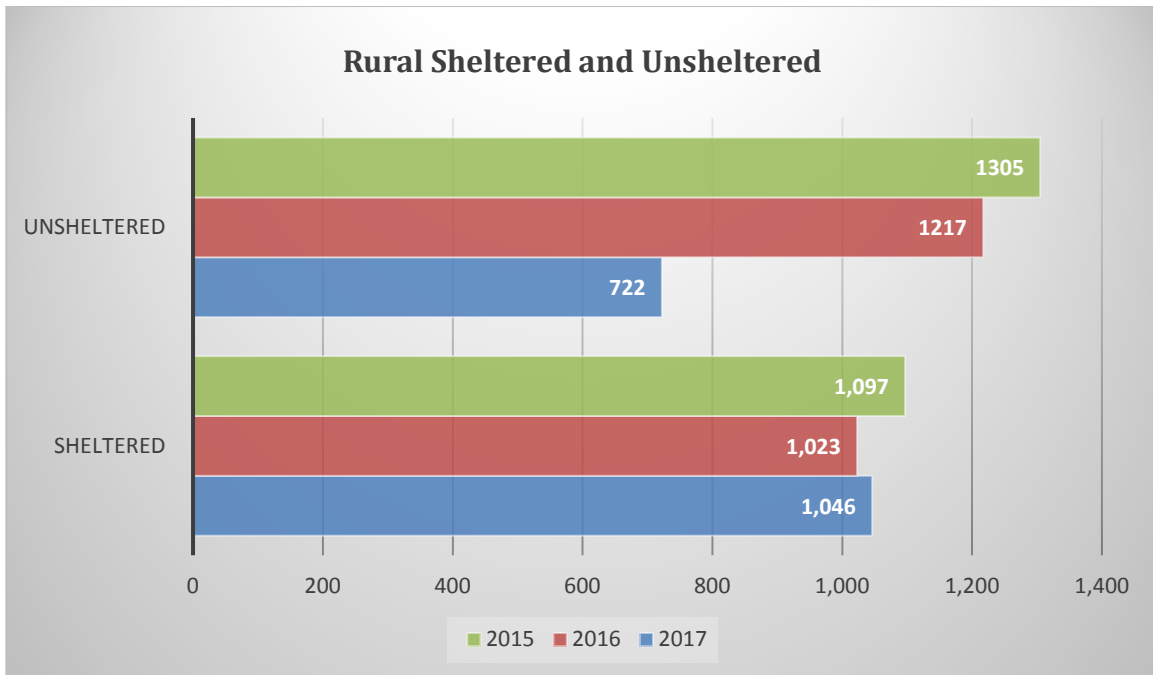
Both a system-wide Annual Progress Report (APR) and Demographics Report were produced from the Tucson/Pima County HMIS, reporting a total of 10,226 homeless persons served by those programs entering information into HMIS during the period of July 1, 2016,

to June 30, 2017. Data entered into HMIS is self-reported by the clients receiving assistance from program providers. Forty percent of the adult homeless population in Pima County were over 45 years of age. Adults with families accounted for nine percent of the adult homeless population and their mean age is between 25 and 34. Eighteen percent of all clients served identified as chronically homeless.

The Tucson Pima Collaboration to end Homelessness (TPCH) is a collection of service providers, civic, faith-based organizations, municipal entities and individuals who are interested stakeholders in the issues related to homelessness in the region. TPCH has been implementing its Coordinated Entry System using the common assessment tool known as VI-SPDAT (Vulnerability Index Service Prioritization and Decision Assistance Tool). During the reporting time period, 5,402 assessments were completed. TPCH functions as the Continuum of Care for the Pima County geographic area, including Tucson and the surrounding areas, and provides policy direction and leadership on homeless issues. TPCH is responsible for the annual planning process, as well as submitting the consolidated grant application each year to HUD in order to secure funding for service providers throughout the county. Additionally, TPCH oversees the collection and distribution of data to monitor progress and inform the planning process through HMIS and the annual Point In Time street count. TPCH's role, through community awareness, sharing of expertise and general council meetings, is to provide a vehicle for stakeholders to participate and collaborate in the planning processes and activities intended to prevent and end homelessness. The coalition also coordinates the annual TPCH Conference to provide a forum for communication, education and information sharing among stakeholders, government agencies, service providers, educators, and homeless and formerly homeless persons.

RURAL AREAS (*Information and data provided by ADOH and the Balance of State Continuum of Care (BOSCOC)*)

The rural counties – Apache, Navajo, Cochise, Coconino, Gila, Graham, Greenlee, La Paz, Mohave, Pinal, Santa Cruz, Yuma, and Yavapai – make up the area referred to as the Balance of State (BOSCOC). This combined area accounts for 25 percent of the state's population and 86 percent of the state's land mass. It is geographically, demographically, economically, and politically diverse. It includes both urban and rural counties, and resources vary greatly between counties. Based on the 2017 PIT survey for the BOS, there were 1,046 sheltered and 722 unsheltered homeless people. This is a 27 percent reduction from the SFY 2016 report. The chart below displays the changes in the sheltered and unsheltered PIT survey in rural Arizona over a three-year period.



In SFY 2017, 3,760 people were served in Emergency Shelter and Transitional Housing. Another 1,326 people were housed through permanent housing programs such as Rapid Rehousing and Permanent Supported Housing. Of this number in permanent housing, at least 420 were veterans. Based on the 2017 PIT survey results, the number of veterans in Emergency Shelter and Transitional Housing decreased significantly to 238 veterans. This is the fourth year with a reported decrease in the number of homeless veterans in the BOSCO region.

Individuals staying in Emergency Shelter, domestic violence shelters, or living in housing provided by a transitional housing program are included in the sheltered count. All people who are homeless and involved with a service agency are included in the count, regardless of whether the program received HUD funding or not. The data entered into HMIS by agencies is also included in the PIT survey. If agencies do not participate in HMIS, ADOH requests those organizations complete a brief survey giving aggregate data for the PIT survey every January.

For SFY 2017, 13 percent of the homeless individuals counted were veterans. This decrease is primarily due to the concerted efforts of the Supportive Services for Veterans Families (SSVF) and VASH voucher programs. Six percent of those in shelters are chronically homeless, while 44 percent of those unsheltered self-report as chronic. The majority of those who appear to be experiencing chronic homelessness are unsheltered males over the age of 35. Three population centers, Yuma, Prescott, and Flagstaff, have populations exceeding 200,000 and encounter larger concentrations of those experiencing homelessness while the majority of cities and towns in rural Arizona provide services in very sparsely populated areas. Geography is a major obstacle to providing coordinated services and shelter to the homeless population in the BOS. The Governing Advisory Board is looking at this and other challenges as they strive to carry out the strategic plan to end homelessness. Challenges include limited resources, low capacity, community misconceptions, as well as a lack of local champions in the BOS regions that help raise local consciousness and funding for the projects that improve a community's overall well-being.

Apache, Navajo and Gila Counties have the highest poverty rates of all 15 counties, ranging from 24 percent in Gila County to up to 33 percent for Apache County (*USDA Economic Research Report*). Unsheltered single adults account for approximately 42 percent of the households experiencing homelessness in the BOS. Adults in families account for 36 percent (654) of the homeless population and 11 percent are children in families. Of the single adult population, 62 percent are male and 37 percent are female, with Caucasian being the predominant race (69 percent) followed by Native American (15 percent). Fifty-one percent of all adults experiencing homelessness in the BOS self-report some level of mental, physical, or substance abuse disabilities.

The BOS has four Supportive Services for Veteran Families (SSVF) programs covering 11 of the 13 counties, along with 423 Veterans Affairs Supportive Housing (VASH) vouchers in Mohave, Yuma, Yavapai, Coconino, and Cochise Counties. These programs, as well as the Maricopa CoC funded projects, are actively involved in the BOSCO serving veterans and their families.

ADOH supports the continuum of care for the BOS, and duties lie with the Special Needs Housing Division. Due to the challenges of geography and diversity of homeless issues in 13 different counties, ADOH hosts quarterly meetings for the Local Coalition to End Homelessness (LCEH) to bring local stakeholders together to share information on local and statewide initiatives, and develop regional solutions and collaborations aimed at ending homelessness through creativity and focus on best practices. The LCEH is critical to coordinating local participants and resources and dealing with the unique challenges created by each of our 13 counties. Currently, there are over 200 individuals (avg. 20 per LCEH) working to create these local systems that represent a broad range of stakeholders, including, but not limited to, our funded agencies, law enforcement, veterans, institutions of higher learning, and health facilities.

Standing committees work towards bringing the Continuum into compliance with HUD requirements. The goal of these committees is to provide a framework for more local input to the planning processes and to coordinate sparse resources and funding throughout the region. All committee and Governance Advisory Board minutes are available at <https://housing.az.gov/documents-links/forms/special-needs-continuum>.

BOSCO fully launched its Coordinated Entry, a collaborative effort by providers that organizes program entry, during SFY 2015, and in April of SFY 2016, commenced data sharing for purposes of increased coordination and better participant assistance amongst service agencies. Now each LCEH works within the framework of the larger BOS to establish case conferencing and to ensure Coordinated Entry is working towards the best outcomes for those they serve. Both Coordinated Entry and data sharing is critical in creating a system that provides the appropriate intervention for each household and the BOS Continuum is moving in the right direction.

STATEWIDE INITIATIVES

ARIZONA COALITION TO END HOMELESSNESS (*Information and data provided by the Arizona Coalition to End Homelessness (AZCEH)*)

Effective July 1, 2017, the AZCEH and the Arizona Housing Alliance became the Arizona Housing Coalition – a collaborative association that leads in the efforts to end homelessness and provide safe, affordable homes for all Arizonans. With this merger comes increased collective impact as the Arizona Housing Coalition is now better positioned to meet affordable housing expansion goals and end homelessness through a stronger advocacy voice.

To accomplish the mission of supporting members, AZCEH:

- **Educates** – The Arizona Housing Coalition provides training, education, and networking opportunities for our Member Agencies. In 2016, we proudly hosted our annual Spring Healthy Communities Conference and a sold-out Ending Homelessness Conference in the fall, providing 240+ hours of training to over 1,532 professionals working to end homelessness through housing and supportive services statewide. In collaboration with the Federal Reserve Bank of San Francisco and the Hispanic Association of Real Estate Professionals, we also sponsored a forum to share ways to increase homeownership among low/moderate-income families.
- **Advocates** – AZCEH proudly hosted a successful day at the Capitol in March where nearly 50 members received training, met with their legislators to advocate for funding for the state housing trust fund, and for increased investment in funding priorities that support housing and homeless service programs. The Coalition also worked to address policy issues and proposed legislation focused on the root causes of homelessness. After months of coalition building and successful lobbying, this year's Legislature restored the lifetime limit for TANF, from 12 to 24 months, alleviating the unnecessary financial burden of so many families working to get back on their feet.
- **Collaborates** – In 2016, the Arizona Veterans StandDown Alliance (AVSA), a dba of the Arizona Housing Coalition, served 3,180 veterans and their families at ten StandDown events and resource fairs that happen annually throughout the state. Our Maricopa County StandDown, which is the largest StandDown event in the country, served 1,850 veterans and their families in February 2016, connecting them to critical services needed to ensure health and housing stability.

SPECIAL INITIATIVES

ARIZONA STANDDOWN ALLIANCE *(Information and data provided by the AVSA, a community collaboration of the Arizona Housing Coalition (AZHC))*

The Arizona Veterans StandDown Alliance is a dba of the AZHC with a mission to oversee statewide StandDown efforts. Their goal is to coordinate support by providing administrative and fiscal expertise to all StandDowns in Arizona via the AZHC 501(c) (3). AZHC also provides infrastructure support to new StandDowns as they begin the process of organizing and holding events. Our desire is to have a source of accurate data on our homeless veteran population across the state. In 2016, the Alliance assisted ten StandDowns servicing the following counties: Maricopa, Yavapai, Pima, Coconino, Pinal, Mohave, Graham, Greenlee, Santa Cruz, and Cochise. The 2017 StandDown numbers will be available in January of 2018.

Cochise County (Sierra Vista) StandDown: Cochise County held their second StandDown in August 2016 and the event drew 82 veterans. This was a 64 percent increase from 2015. Two veterans self-reported being homeless at the time of the event. Eighteen of the veterans were female.

Coconino (Flagstaff) StandDown: The fourth annual High Country StandDown was a one-day event. Under the leadership of Coconino County Supervisor, Mandy Metzger, the event successfully drew 194 veterans and their families from the greater Northern Arizona region. Thirty-two of the veterans at the event were female. Thirty of the veterans in attendance self-reported that they were currently homeless at the time of the event.

Graham and Greenlee Counties (Safford) StandDown: The 2016 StandDown event in Safford drew 48 veterans. Two of the veterans self-reported being homeless at the time of the event. Five of the veterans in attendance were female.

Pima County (Tucson) StandDown: Tucson held their annual three-day StandDown event in January 2016 at the Days Inn Motor Lodge, the ongoing home base for the event. The event hosted 193 veterans, which was an 8 percent decrease from the year prior. Eighty of the veterans in attendance self-reported being homeless at the time of the event. Fourteen of the veterans in attendance were female. Pima County also held a one-day event in June that served 125 veterans. Thirty-four self-reported being homeless at the time of the event, and fourteen of the veterans in attendance were female.

Pinal (Casa Grande) StandDown: Pinal County held its third annual StandDown on April 23, 2016. The event served an estimated 156 veterans and their family members. Twenty-four of the participants self-reported being homeless at the time of the event. Nine of the veterans in attendance were female.

Mohave (Bullhead City) StandDown: Bullhead City held its fourth annual Tri-State StandDown on March 4-5, 2015, serving 389 veterans – a 61 percent increase from the year

prior. Twenty-two veterans in attendance self-reported being homeless at the time of the event. Thirty-two of the veterans were female.

Maricopa County (Phoenix) StandDown: The annual Maricopa County StandDown was the largest event of its kind in the nation for the seventh year in a row. A total of 1,850 homeless and at-risk veterans participated in the 2016 three-day event, which took place February 7-9. Eleven percent (207) of participants were female. The Arizona StandDown is an annual event located at the Veterans' Memorial Coliseum. Over the course of this three day, two night event, homeless and at-risk veterans receive shelter beds and other basic needs such as food, clothing, shoes, hygiene products, showers, and restroom facilities. Of the participants attending, 18 percent (338) were living on the streets or emergency shelters, and nine percent (170) were living in transitional housing. Ninety-five service providers were on site to cut the red tape and deliver services quickly, efficiently, and in a veteran-centered framework. These service providers included the Phoenix VA Health Care System, Arizona Department of Transportation's Motor Vehicle Division (MVD), City of Phoenix municipal and other court systems, Social Security Administration, and ADES. On-site veterinary services offered pet boarding, spay and neuter surgeries, vaccinations, grooming and well checkups to 606 pets. Courts and legal service providers assisted 985 veterans, and MVD assisted 855 veterans. Social Security assisted 342 veterans. Valley of Sun United Way coordinated over 900 volunteers for the event. ADES assisted 142 veterans on site. Reading glasses were given to 642 veterans and clothing was distributed to 1,400 veterans. Housing service providers discussed available resources with 299 veterans on site, and 110 were deemed eligible for housing.

Santa Cruz County (Nogales) StandDown: Santa Cruz County held a resource fair with a specific veteran section that, unfortunately, only drew five veterans.

Yavapai County (Prescott) StandDown: Yavapai County held their annual StandDown event in Prescott September 23-24, 2016, and served 263 veterans. Sixty-four veterans in attendance self-reported being homeless at the time of the event. Twenty-one of the veterans were female.

PROJECT CONNECT (*Information and data provided by Valley of the Sun United Way (VSUW)*)

VSUW hosted seven Project Connect events from July 2016 through June 2017. These events served approximately 1,846 individuals who, in one day, were connected to a variety of needed services such as housing, SNAP benefits, and obtaining State IDs.

Based on self-reports, 24 percent of the Project Connect participants said they had spent the previous night in a place not meant for human habitation. Of those experiencing homelessness, 39.5 percent said this was their first time being homeless. The top three reported reasons for homelessness were loss of employment, economic instability, and medical issues. Veterans accounted for 10 percent of the Project Connect guests served. A total of 441 families participated in the events, including 427 children attending with their parent(s). More than 94 percent of participants who completed the satisfaction survey reported that their overall situation improved as a result of attending Project Connect.

Volunteers are crucial to VSUW's success. During the seven Project Connect events and Arizona StandDown, for which VSUW coordinates volunteers, 2,640 volunteers donated their time, representing various corporate partners, community groups, and individuals from all around Maricopa County.

An average of 32 service providers participated at each Project Connect event in the 2016-2017 fiscal year. Combined, these programs and services made over 8,500 service connections to guests.

Connecting individuals to services quickly is what makes Project Connect so important. People who are currently experiencing or are nearly homeless can discover and use many vital resources all in one place, in one day. People like Gina have already started to get back on their feet and are ready to unite against the cycle of poverty.



The link below talks about Gina who is a Project Connect success:

<https://vsuw.org/about-us/blog/project-connect-impact-report-july-2017>

Here are a just a few quotes from Project Connect guests:

"Project Connect is extremely helpful in meeting my needs as well as the needs of others." – J. Moran

"Thank you so much – You made another day worth living." – S. Burns

Dale, currently living in a shelter, said, "I received information that can take me from homelessness to housing!"

Evan, a guest, said, "Best thing about Project Connect is the amount of people smiling."

THE FUNDERS COLLABORATIVE AND THE TEMPORARY OVERFLOW SHELTER

The Funders Collaborative is a strategic planning committee that involves a collaboration between the Arizona Department of Economic Security, The Valley of the Sun United Way, the Arizona Department of Housing, the City of Phoenix, and the Maricopa County Human Services Department. This collaborative committee ensures that all available resources are utilized effectively and efficiently towards the goal of creating and or implementing solutions to end homelessness.

In November of 2014, The Funders Collaborative began planning the development of an alternative temporary overflow shelter to begin operation by May of 2015 that would significantly expand housing placements for the average number of people using the temporary overflow shelter. The new model identified the individuals utilizing the service,

provided assessments, professional services, and supervision. This new model utilized areas of the Lodestar Day Resource Center (LDRC) and St. Vincent DePaul's dining room to house participants. The overflow provided shelter to an average of 439 individuals nightly. The funding for the temporary shelter, however, was due to be expended by the fall of 2016 and plans were developed to phase out services.

St. Vincent DePaul, concerned about the planned phase out of the temporary shelter, contacted The Human Services Campus and offered to continue to provide the temporary overflow shelter services. Maricopa County, ADOH, ADES, and VSUW agreed to extend the service and committed to sharing the cost of the temporary overflow shelter to ensure the service would continue for the homeless.

The temporary overflow shelter, managed by St. Vincent DePaul, will continue to operate through March of 2018. St. Vincent DePaul has the capacity to house up to 250 individuals (75 women and 175 men) in a safe, indoor environment. The Funders Collaborative is in the process of preparing a new temporary shelter plan that will target individuals with high assessment scores, seniors, chronically homeless, and those with disabilities. This new approach will focus on the most vulnerable homeless that are willing to participate in services. The new plan will effectively utilize shelter as a bridge for the homeless to engage in the most appropriate housing solution for their circumstances. <https://housing.az.gov/funders-collaborative>

FOCUS STRATEGIES

The Focus Strategies concept was developed by a California-based consulting firm to help programs and communities use local data to improve efforts on addressing homelessness. In April of 2015, the Focus Strategies concept was introduced in Maricopa to address the overflow shelter on the Human Services Campus over a three-year period. The Focus Strategies concept was initiated to evaluate the operations and outcomes of the Maricopa County Rapid Rehousing program and to transition 250 single adults that were utilizing the overflow shelter into permanent housing.

The Rapid Rehousing 250 project enrolled 378 homeless individuals between July 2015 and August 2016 to determine the characteristics of those who were most likely to exit to permanent housing, and to research the factors linked to their homelessness. Three quarters of the individuals were males reporting an average age of 45 years. Of the 378 homeless enrolled, 255 received financial assistance through the RRH 250 program. On average, it took 30 days for participants to transition from program enrollment to permanent housing. The program exited 373 participants as of March 2017, and at that point, 73.4 percent of the individuals assisted were still residing in permanent housing. The RRH 250 program reported that 185 participants left the program with permanent housing; however, 45 returned to homelessness.

The RRH program reported the census at the overflow shelter decreased between 200 and 300 individuals. However, the program clearly did not result in the expected one-for-one

reduction of individuals using the shelter. The program estimates that the population was larger than originally estimated. <http://focusstrategies.net/>

APPENDICES

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C. Maricopa County HMIS attachment	

Information in the following Appendices was provided by the three CoC from data collected through their respective HMIS systems and PIT surveys. Demographic and service category counts may not tie to the total individuals served when there are multiple answers to a single question. Data reported may differ from one CoC to another based on data collection methods of the Continuum.

APPENDIX A

Maricopa County, Balance of State and Tucson/Pima PIT Data

BoS PIT data please refer to: <https://housing.az.gov/sites/default/files/documents/files/2017-PIT-BOSCOC-Narrative-Report-06-2017.pdf>

Maricopa County PIT data please refer to:
http://www.azmag.gov/Portals/0/Documents/HSCC_2017-05-18_PIT-Count-Report-Presentation.pdf?ver=2017-06-01-085540-647

Tucson Pima Coalition to end homelessness PIT data please refer to:
http://www.tpch.net/uploads/1/4/0/0/14008364/2017_pit_final_draft_to_hud...pdf

SNAPS In Focus: Ending Veteran Homelessness and What it Means
<https://www.hudexchange.info/news/snaps-in-focus-ending-veteran-homelessness-and-what-it-means-for-zero-2016-communities/>

APPENDIX B

References

Arizona Action Plan to End Homelessness Among Veterans:

<https://dvs.az.gov/sites/default/files/Arizona-Action-Plan-to-End-Homelessness-Among-Veterans-2017.pdf>

Arizona Department of Veteran's Services: <https://dvs.az.gov/homelessvets>

Balance of State committee and Governance Advisory Board minutes:

<https://housing.az.gov/documents-links/forms/special-needs-continuum>

Elder homeless

National Coalition for the Homeless: <http://nationalhomeless.org/issues/elderly/>

Federal Plan to end Homelessness: <https://www.usich.gov/opening-doors>

Focus Strategies: <http://focusstrategies.net/>

Funders Collaborative: <https://housing.az.gov/funders-collaborative>

Howden L. M. & Meyer J. A. (2011) Age and sex composition: 2010. *2010 Census Briefs, US Department of Commerce, Economics and Statistics Administration US CENSUS BUREAU* Retrieved from <https://www.census.gov/prod/cen2010/briefs/c2010br-03.pdf>