

The 2014 Annual Homeless Assessment Report (AHAR) to Congress

NOVEMBER 2015

PART 2:

Estimates of Homelessness in the United States



The U.S. Department of
Housing and Urban Development
OFFICE OF COMMUNITY PLANNING AND DEVELOPMENT

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Foreword



It is my pleasure to submit to Congress the U.S. Department of Housing and Urban Development's (HUD) 2014 Annual Homeless Assessment

Report (AHAR) Part 2. The AHAR provides national estimates of homelessness in the United States. Like previous annual reports, this report is the second part in a two-part series, supplementing the Part 1 report that was published in October 2014. This report augments our understanding of homelessness by including 1-year, national estimates of people in shelter and in-depth information about their characteristics and service-use patterns. This year, we include a new section about people who double up, or have other precarious housing situations to further our understanding of homelessness and housing instability.

HUD has released the AHAR each year since 2007, giving policymakers and local service providers the information needed to serve this vulnerable population.

At the federal level, HUD and its partner agencies on the U.S. Interagency Council on Homelessness are using the AHAR to track progress against the goals set forth by *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*. At the local level, stakeholders are using the AHAR to inform their policy decisions and benchmark their service systems against the national estimates presented in the report. With the knowledge gained through this report, we are on the path to ending homelessness in the United States.

The report shows a nationwide decline in homelessness since HUD began tracking this information in 2007. This reduction of 6.3 percent is substantial—more than 100,000 fewer people homeless in shelter since 2007. Within the past year, we have seen an increase in the number of people who used shelter programs by 4.6 percent. This increase, however, occurred in conjunction with a 10 percent reduction in the number of people homeless in unsheltered locations. This progress is attributable to the hard work of local homeless service providers nationwide.

HUD and other federal agencies have continued to target resources and emphasize evidence-based interventions to support this work. A Housing First approach and targeted efforts to end homelessness among subpopulations resulted in a 33 percent decline in one-night counts of homelessness among Veterans and a 21 percent decline among chronically homeless individuals from 2010 to 2014. As the national economy continues to improve, we must remember those nearly 1.5 million Americans with no place to call home and judge our nation's prosperity by the number of Americans sleeping in shelters or on the streets.

Ending homelessness as we know it is the ultimate goal. To achieve this goal, we need a continued bipartisan commitment to break the cycle of homelessness among our most vulnerable citizens and prevent others from falling into homelessness. Congress must maintain its support of practices and program models that are making a measurable difference, moving our citizens out of shelters and off the streets and into stable housing. With new findings on how to achieve housing

stability for homeless families with children, we can combat the recent 4.4 percent increase in annual sheltered homelessness among this subpopulation. Finally, we must continue to press for comprehensive and accurate data that can be harnessed by policymakers and homeless services providers to advance the most effective approaches to ending homelessness.

This report shows substantial progress toward ending a social wrong that deprives people of their full potential. Ending homelessness means more than providing a roof over people's heads. It means giving people the opportunity to address their challenges in a stable and secure environment, providing families with a place to raise their children, and ensuring that our nation's Veterans can heal in their own home.



Secretary Julian Castro

U.S. Department of Housing
and Urban Development

Key Terms

Please note: Key terms are used for AHAR reporting purposes and accurately reflect the data used in this report. Definitions of these terms may differ in some ways from the definitions found in the McKinney-Vento Homeless Assistance Act (McKinney-Vento) and in HUD regulations.

Children are people under the age of 18.

Chronically Homeless Individual refers to an individual with a disability who has been continuously homeless for 1 year or more or has experienced at least 4 episodes of homelessness in the last 3 years. By definition, only an adult can be categorized as chronically homeless.

Chronically Homeless People in Families refers to people in families in which the head of household has a disability and has either been continuously homeless for 1 year or more or has experienced at least four episodes of homelessness in the last 3 years.

Continuums of Care (CoC) are local planning bodies responsible for coordinating the full range of homelessness services in a geographic area, which may cover a city, county, metropolitan area, or an entire state.

Domestic Violence Shelters are shelter programs for people who are homeless and are domestic violence victims.

Emergency Shelter is a facility with the primary purpose of providing temporary shelter for homeless people.

Family refers to a household that has at least one adult and one child. It does not include households composed only of adults or only children.

Homeless Management Information System (HMIS) is a software application designed to record and store client-level information on the characteristics and service needs of homeless people. Each CoC maintains its own HMIS, which can be tailored to meet local needs, but must also conform to HUD's HMIS Data and Technical Standards.

HMIS Data provide an unduplicated count of people who are homeless in shelter and information about their characteristics and service-use patterns over a one-year period of time. These data are entered into each CoC's HMIS at the client level but are submitted in aggregate form for the AHAR.

Homeless describes a person who lacks a fixed, regular, and adequate nighttime residence.

Household Type refers to the composition of a household upon entering a shelter program. People enter shelter as either an individual or as part of a family with children, but can be served as both individuals or family members during the AHAR reporting year. However, the estimates reported in the AHAR adjust for this overlap and thus provide an unduplicated count of homeless people.

Housing Inventory Count (HIC) is produced by each CoC and provides an annual inventory of beds in the CoC.

Individual refers to a person who is not part of a family with children during an episode of homelessness. Individuals may be homeless as single adults, unaccompanied youth, or in multiple-adult or multiple-child households.

Living Arrangement before Entering Shelter refers to the place a person stayed the night before the first homeless episode captured during the AHAR reporting year. For those that were already in shelter at the start of the reporting year, it refers to the place they stayed the night before beginning that current episode of homelessness.

Minority refers to people who self-identify as being a member of any racial or ethnic category other than white, non-Hispanic/Latino. This includes African Americans, Asians, Hispanics/Latinos, American Indians, and people of multiple races. This report uses the term "Hispanic" to refer to people who self-identify their ethnicity as Hispanic or Latino.

Multiple Races refers to people who self-identify as more than one race.

One-Year Shelter Count is an unduplicated count of homeless people who use an emergency shelter or transitional housing program at any time from October through September of the following year. The 1-year count is derived from communities' administrative databases, or HMIS.

Other One Race refers to a person who self-identifies as being one of the following races: Asian, American Indian, Alaska Native, Native Hawaiian, or other Pacific Islander.

Permanent Supportive Housing (PSH) is a program designed to provide housing (project- or tenant-based) and supportive services on a long-term basis to formerly homeless people. McKinney-Vento-funded programs require that the client have a disability for program eligibility, so the majority of people in PSH have disabilities.

People in Families are people who are homeless as part of households that have at least one adult and one child.

Point-in-Time (PIT) Count is an unduplicated 1-night estimate of both sheltered and unsheltered homeless populations. The 1-night count is conducted according to HUD standards by CoCs nationwide and occurs during the last week in January of each year.

Principal City is the largest city in each metropolitan or micropolitan statistical area. Other smaller cities may qualify if specified requirements (population size and employment) are met.

Safe Havens are projects that provide private or semi-private long-term housing for people with severe mental illness and are limited to serving no more than 25 people within a facility. People in safe havens are included in the 1-night PIT count but are not included from the 1-year shelter count.

Sheltered Homeless People are people who are staying in emergency shelters or transitional housing programs.

Total U.S. Population refers to people who are housed (including those in group quarters) in the United States, as reported in the American Community Survey (ACS) by the U.S. Census Bureau.

Total U.S. Poverty Population refers to people who are housed in the United States that fall below the national poverty line, as reported in the American Community Survey (ACS) by the U.S. Census Bureau.

Transitional Housing is a type of shelter program in which homeless people may stay and receive supportive services for up to 24 months.

Unaccompanied Children are people who are not accompanied by adults or in a multi-child household during their episode of homelessness and who are under the age of 18.

Unaccompanied Youth are people who are not part of a family with children during their episode of homelessness and who are between the ages of 18 and 24.

Unduplicated Count of Sheltered Homelessness is an estimate of people in shelter that counts each person only once, even if the person enters and exits the shelter system multiple times throughout the year within a CoC.

Unsheltered Homeless People are people whose primary nighttime residence is a public or private place not designated for or ordinarily used as a regular sleeping accommodation for people (for example, the streets, vehicles, or parks).

Veteran refers to any person who served on active duty in the armed forces of the United States. This also includes Reserves and National Guard members who were called up to active duty.

Victim Service Provider refers to private nonprofit organizations whose primary mission is to provide direct services to victims of domestic violence, dating violence, sexual assault, or stalking. This term includes rape crisis centers, domestic violence programs battered women's (shelters and non-residential), domestic violence transitional housing programs, and other related advocacy and supportive services programs.



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PIT data estimate the number of people homeless in shelter and on the street on a single night during the year.

HMIS data estimate the number of people homeless in shelter at any time during the year.

Since 2007, the U.S. Department of Housing and Urban Development has released an annual report on the extent of homelessness in the United States—the Annual Homeless Assessment Report (AHAR). The report documents how many people are using shelter programs for homeless people and how many people are in unsheltered locations often referred to as “the street.” The AHAR is submitted each year to the U.S. Congress, and its contents are used to inform federal, state, and local policies to prevent and end homelessness.

This report is the second part of a two-part series. The first part is called *The 2014 Point-in-Time Estimates of Homelessness: Part 1 of the 2014 Annual Homeless Assessment Report (AHAR) to Congress* and was published in October 2014. The Part 1 report provides estimates of homelessness based on the Point-in-Time (PIT) count data gathered by communities throughout the country in the last 10 days of January. The estimates are provided at the national-, state-, and CoC-levels.

Part 2 of the 2014 AHAR builds on the Part 1 report by adding 1-year estimates of sheltered homelessness based on data from Homeless Management Information Systems (HMIS). The HMIS estimates provide detailed demographic information about people who use the nation's shelters during a 12-month period.

New to the 2014 AHAR are a discussion of domestic violence victims in the homeless shelter system and a discussion of various types of housing instability in the U.S.

Types of AHAR Estimates and Data Sources: PIT Count and HMIS

The estimates presented throughout this report are based primarily on aggregate information submitted by hundreds of communities nationwide about the homeless people they encounter and serve.

There are two types of estimates: 1-night counts based on PIT data and 1-year counts based on HMIS data (See Exhibit A).

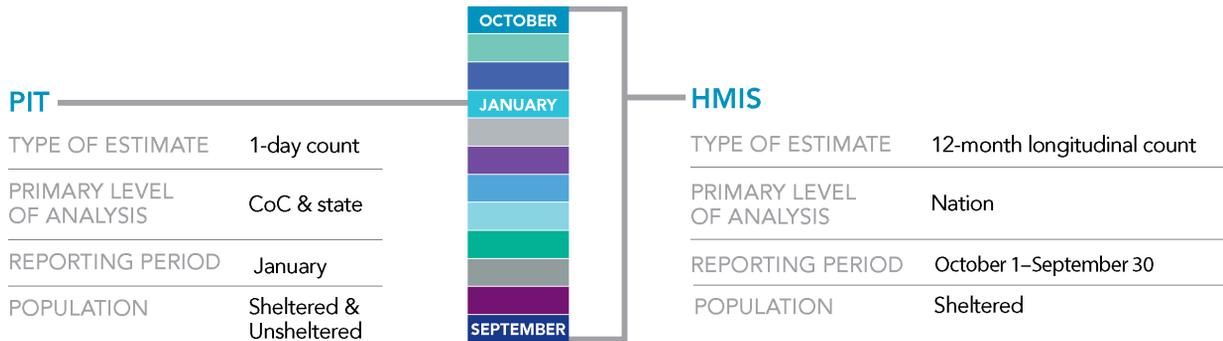
PIT Count

The PIT counts offer a snapshot of homelessness—of both sheltered and unsheltered homeless populations—on a single night. The 1-night counts are conducted by CoCs in late January¹ and reported to HUD as part of their annual applications for McKinney-Vento funding. In addition to the total counts of homelessness, the PIT counts provide an estimate of the number of homeless people within particular subpopulations, such as chronically homeless people and Veterans. Typically, CoCs conduct a PIT count in shelters every year and a street count at least every other year. In 2014, PIT estimates were reported by 414 CoCs, 78 percent of which (323 CoCs) conducted an unsheltered count. For the remaining 91 CoCs, which only conducted a sheltered count, the results of their prior year unsheltered counts roll over into 2014.

Communities across the nation typically conduct their PIT counts during a defined period of time (e.g., dusk to dawn) on a given night to minimize the risk of counting any person more than once. Many CoCs also collect identifying information to unduplicate their counts of unsheltered homeless people.

¹ Some CoCs are given permission to conduct counts outside of the last 10 days of January for good cause.

EXHIBIT A: Comparison of Data Sources PIT and HMIS



For the 2014 AHAR Part 1, 414 CoCs in the United States reported PIT estimates of homeless people in their communities, covering virtually the entire United States. HUD has standards for conducting the PIT counts, and CoCs use a variety of approved methods to conduct the counts. Researchers review the data for accuracy and quality prior to creating the PIT estimates for this report. The previously reported PIT estimates are subject to change if communities adjust their counting methods.

PIT counts are particularly useful because they account for both sheltered and unsheltered homeless people. However, these counts may over-represent frequent and long-term users of shelters, who are more likely to be present on the night of the PIT count. Conversely, the PIT count may under-represent infrequent and short-term users of shelters. The PIT count also has little detail on the characteristics of homeless people and their patterns of homelessness.

HMIS

The 1-year HMIS estimates provide unduplicated counts of homeless people who use an emergency shelter, transitional housing facility, or PSH program at any time from October through September of the following year. These 1-year estimates provide information about the self-reported demographic characteristics of sheltered homeless people and their patterns of service use. The 12-month counts of sheltered homelessness are produced using HMIS data from a nationally representative sample of communities. Data are collected separately by project type (emergency shelter, transitional housing, and permanent supportive housing) and for individuals, people in families, and Veterans. While the data do not include 1-year estimates for homeless youth and chronically homeless persons at this time, HUD plans on updating its AHAR data collection requirements to include further data on these subpopulations. HUD anticipates these changes to be first reported in the 2017 AHAR.

For the 2014 AHAR, the estimates were derived from aggregate HMIS data reported by 387 CoCs nationwide, representing 96 percent of all CoCs nationwide. The data are unduplicated, offering information on 1,177,448 people served by CoCs, and are weighted to provide a statistically reliable estimate of the *total number of people who access shelter throughout the year* (1,488,465 people in 2014). Excluded from the HMIS-based estimates are people in unsheltered locations, in programs targeting domestic violence victims, and in Safe Havens.

In combination, the PIT and HMIS estimates provide a comprehensive picture of homelessness in the United States that includes counts of people on the street as well as information on people who use the shelter system. The PIT estimate of homelessness will be smaller than the annual HMIS estimate because the PIT count data capture homelessness on a single night, whereas HMIS estimates capture anyone that enters the shelter system at any point during the year.

Exhibit B shows the trends in the PIT and HMIS counts since the first AHAR was released in 2007, and places them in a larger policy context.

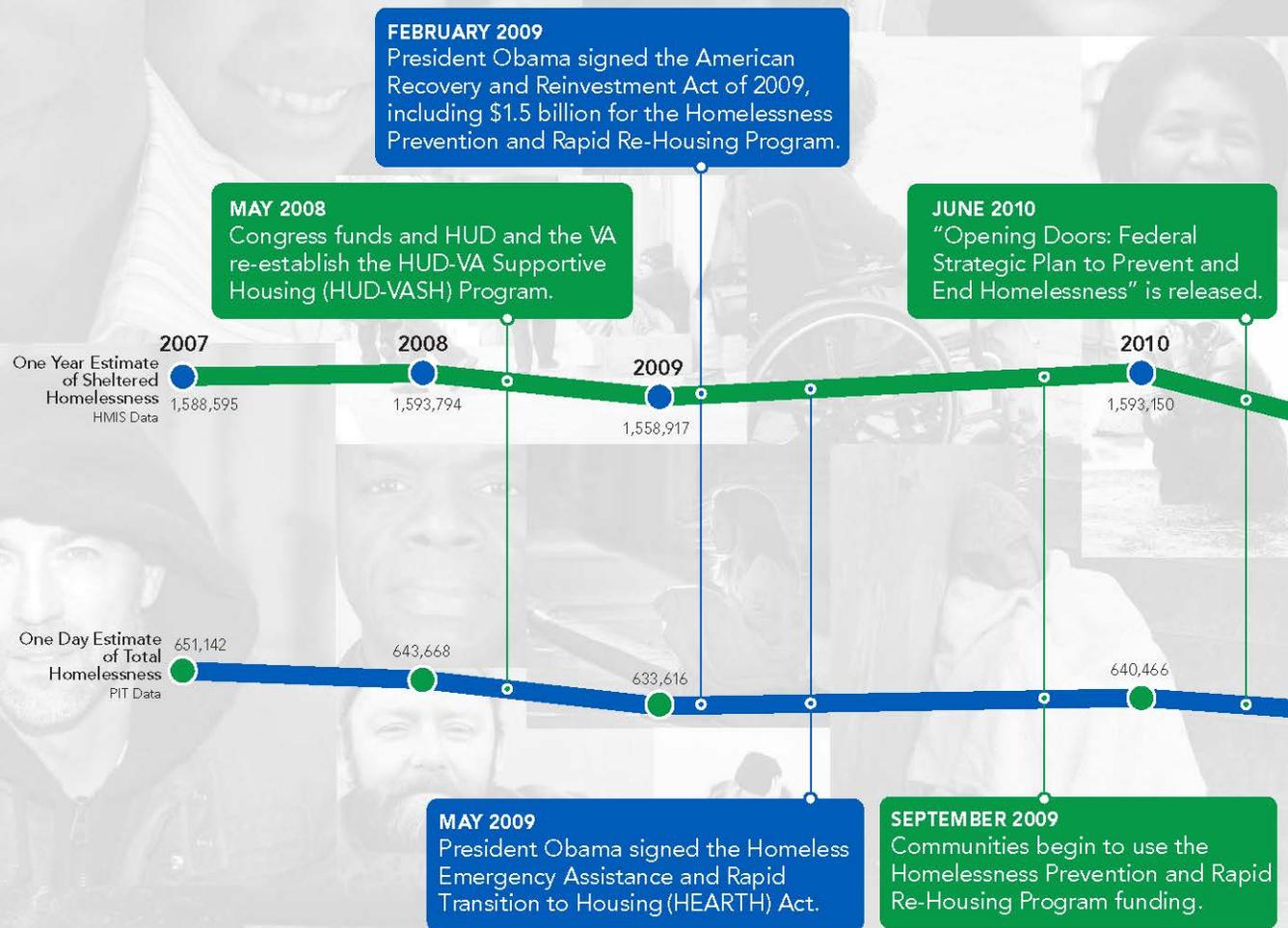
Supplemental Data Sources

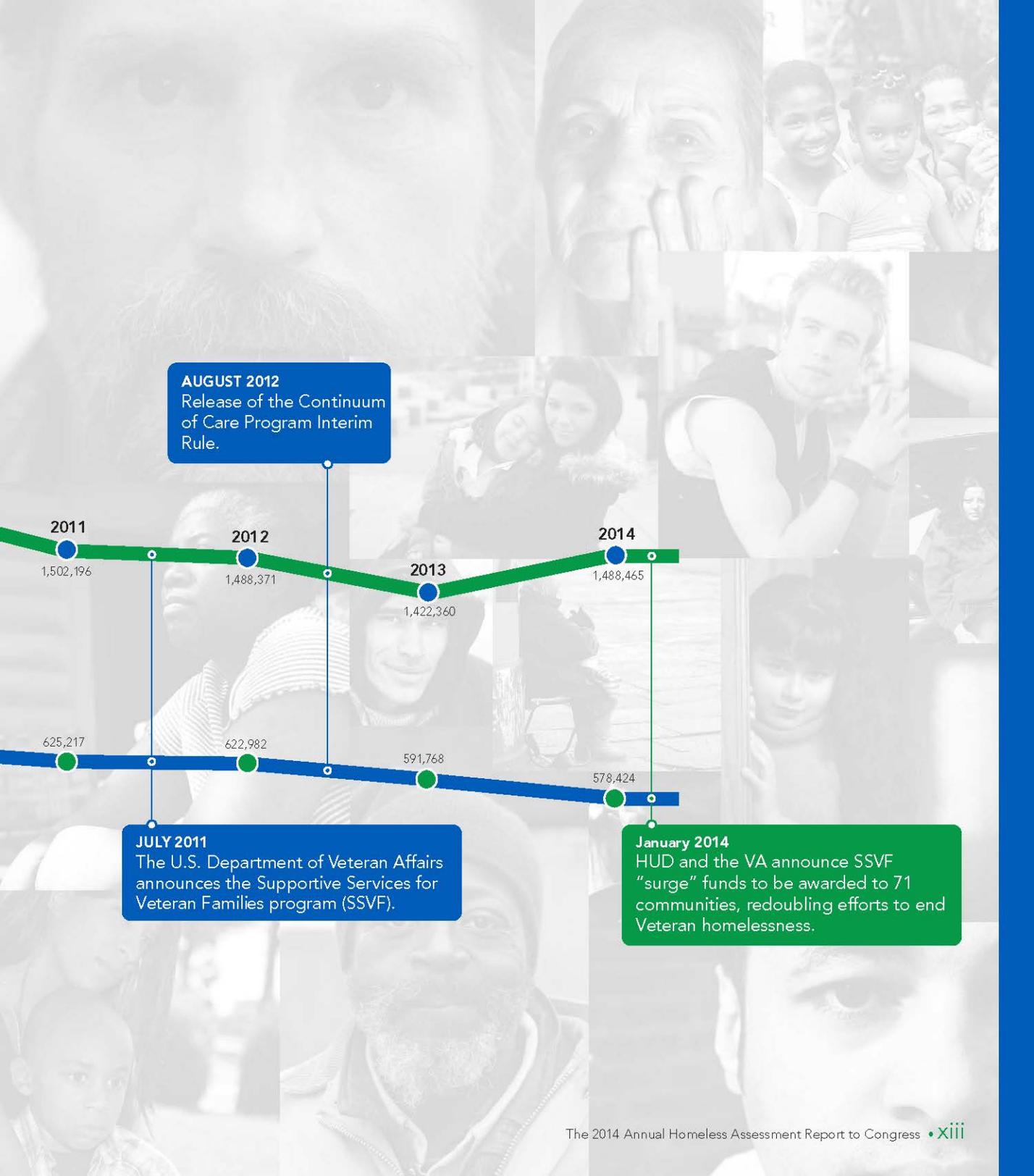
Two other data sources are used in sections 1 through 7 in the 2014 AHAR: Housing Inventory Count (HIC) data and U.S. Census Bureau's American Community Survey (ACS) data. The HIC data provide an inventory of beds for people who are homeless and thus describe the nation's capacity to house homeless people. The HIC data are compiled by CoCs and represent the inventory of beds that are available for people who are homeless during a particular year.

ACS data are used to provide a profile of the total U.S. population and U.S. subpopulations, including households in poverty. The AHAR uses ACS data on gender, age, ethnicity, race, household size, disability status, and geographic location to serve as a comparison to the nationally representative HMIS data. The ACS data come in several forms. This report uses the 1-year Public Use Microdata Sample (PUMS) that corresponds most closely to the HMIS data for any given year.

The 2014 AHAR compares the estimate of homelessness with ACS data about all people in housing units or group quarters in the U.S. Through this comparison, the report provides a picture of how people who are homeless differ from, or are similar to, the broader population. This report on homelessness also compares the homeless population with the U.S. poverty population. Most homeless people are poor, so differences between all people who are poor and people who are homeless may highlight subgroups at greatest risk of becoming homeless.

EXHIBIT B: Policy Context Surrounding Trends in Homelessness
PIT and HMIS 2007–2014





AUGUST 2012

Release of the Continuum of Care Program Interim Rule.

2011

1,502,196

2012

1,488,371

2013

1,422,360

2014

1,488,465

625,217

622,982

591,768

578,424

JULY 2011

The U.S. Department of Veteran Affairs announces the Supportive Services for Veteran Families program (SSVF).

January 2014

HUD and the VA announce SSVF "surge" funds to be awarded to 71 communities, redoubling efforts to end Veteran homelessness.

Data Notes

Information on people's characteristics and patterns of homelessness collected as part of CoCs' PIT counts and HMIS records are generally self-reported. This information may be collected using a standard survey or intake form. Some HMIS data may reflect additional supporting documentation if the information is necessary to establish eligibility for services.

PIT and HMIS data quality has improved considerably since HUD began to compile these data resulting in more reliable estimates of homelessness. PIT count methodologies have become more robust. HMIS bed-coverage rates have increased sharply over time and rates of missing data have declined.

Not all information presented in the narrative in this report is reflected in the exhibits. For example, the exhibits may present the percentage of homeless people within a particular category, while the narrative highlights the percentage change over the years.

The supporting HMIS data used to produce the 2014 figures in the report can be downloaded from HUD's Resource Exchange at <http://www.hudexchange.info/>. Those tables are:

1. 2014 AHAR HMIS Estimates of Homelessness.xlsx
2. 2014 AHAR HMIS Estimates of Homeless Veterans.xlsx
3. 2014 AHAR_HMIS Estimates of People in PSH.xlsx
4. 2014 AHAR_HMIS Estimates of Veterans in PSH.xlsx

The AHAR estimation methodology and underlying assumptions for the information presented in this report are consistent with past reports, thus making data comparable over time and across AHAR reports. For more details, the 2014 AHAR Data Collection and Analysis Methodology can be downloaded from: <http://www.hudexchange.info/>.

Broader Perspectives on Housing Instability and Homelessness

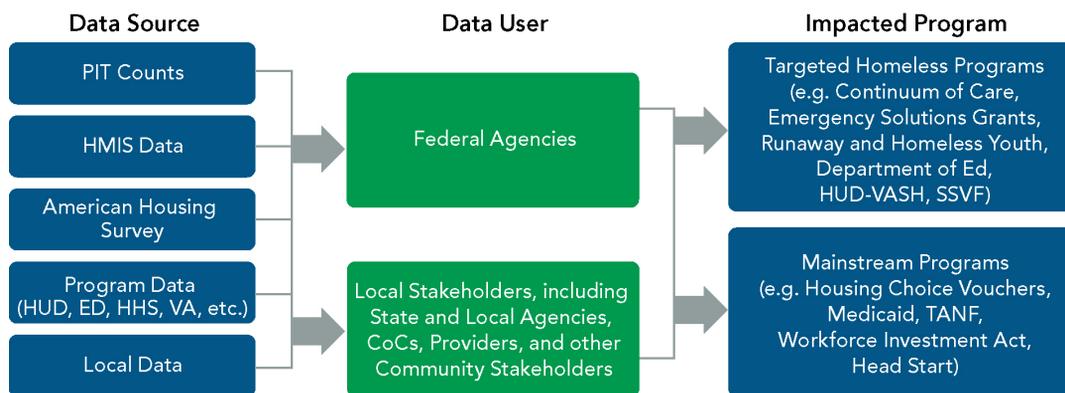
For more than a decade, HUD has supported local efforts to collect information about people experiencing homelessness. Together, the PIT count and HMIS data present a detailed picture of who is experiencing homelessness in emergency shelter, transitional housing, or in unsheltered locations; what their demographic characteristics are; and how they utilize residential services available for homeless people.

HUD and its federal partners use many other data sources to get a full picture of homelessness and housing instability, including data collected and reported by other federal agencies as well as national and local studies and evaluations. Each of these data sources provides an important perspective on homelessness. For example, the American Housing Survey (AHS) estimates the number of people who are living in overcrowded situations or living with other people temporarily. HUD produces annual reports on housing needs that use the AHS to track how many renters with very low incomes and no housing assistance have severe rent burdens or live in substandard housing. The Department of Veterans Affairs data provides crucial information about

Veterans experiencing homelessness that is not captured in the PIT count.

The AHS for 2013 included supplemental questions on the *reasons* people were living with other people temporarily. This report includes a new section that draws on those data to add to the picture of the housing instability experienced by households throughout the country, and it highlights findings on housing instability from the *Worst Case Housing Needs: 2015 Report to Congress*, which uses the 2013 AHS supplemental data. This section also draws on data from the Department of Education on students in public schools who are reported as being homeless, including those who are living with other people because of the loss of housing or economic hardship.

Federal agencies use data to inform a broad set of policy solutions across many different programs to meet the goals of ending homelessness set forth in *Opening Doors*. Ending homelessness cannot rely solely on programs that are targeted to persons experiencing homelessness. HUD and its federal partners recognize that homelessness, housing affordability, health care, service needs, and employment are closely linked, and the mainstream programs that address these needs have a substantial role in ending homelessness.



Domestic Violence Victims in the U.S. Shelter System

Communities throughout the United States serving people who are homeless may also dedicate resources to serving any number of subpopulations. Among these homeless subpopulations are people experiencing domestic violence. While not all people who experience domestic violence use homeless shelters, shelters can serve as a resource for people in crisis seeking a safe refuge.

Domestic violence shelters operated by victim service providers are prohibited from reporting client information into HMIS. Clients accessing these shelter projects require anonymity to protect themselves from their abusers. Thus, the HMIS data used as the basis for the AHAR Part 2 report exclude information on people who use such shelters. The Point-in-Time (PIT) count, another supplementary data source for the AHAR Part 2, makes the reporting of people in domestic violence shelters optional, and that information is not collected systematically.² However, the Housing Inventory Count (HIC) can offer an understanding of how many people who are homeless and domestic violence victims may be missed by the national homeless counts in this report.

The HIC contains information on all the projects and beds available to people experiencing homelessness, including beds designated for domestic violence victims. Projects may identify a specific target population on the HIC. A population is considered a “target population” if the project intends that at least 75 percent of its total clients will be in that subpopulation.³ Exhibit C displays the bed and point-in-time counts reported in the 2014 HIC.

Based on the 2014 HIC, 56,016 beds were targeted to domestic violence victims (DV), representing 7.3 percent of all beds serving the homeless population. These beds can be for individuals or families with children. Of beds that serve families, 12.8 percent are beds targeted to DV clients. Of beds that serve individuals, 2.2 percent are DV beds.

The share of beds in each Continuum of Care (CoC) dedicated to domestic violence victims varies by the type of geography the CoC serves. CoCs are divided into three geographic categories: major city CoCs (N=48); smaller city, county, and regional CoCs (N=324); and Balance of State (BoS) or statewide CoCs (N=42).⁴ The share of the total bed inventory for the homeless population targeted to domestic violence victims in smaller city, county, and regional CoCs is 7.3 percent in 2014, matching the national average. Major city CoCs devoted a smaller share of their total bed inventory to DV beds (4.3%), while the BoS or statewide CoCs (often rural areas) devoted more than two times as much of their bed inventory to domestic violence victims (16.7%) compared to the national average.

² Based on the 2014 optional PIT count of the homeless subpopulation “victims of domestic violence,” 51,908 people were reported as homeless and a victim of domestic violence, with 82.6 percent located in sheltered locations (emergency shelters, transitional housing, and safe havens) and the remaining 17.4 percent in unsheltered locations.

³ <https://www.hudexchange.info/resources/documents/Notice-CPD-13-011-2014-HIC-and-PIT-Data-Collection-Notice.pdf>

⁴ Major city CoCs cover the 50 largest cities in the U.S.; Smaller city, county and regional CoCs are jurisdictions that are neither one of the 50 largest cities nor Balance of State or Statewide CoCs; Balance of State or statewide CoCs are typically composed of multiple rural counties or represent an entire state.

All states in the U.S. have some of their homeless bed inventory targeted for domestic violence victims. In 2014, shares of the state-level total bed inventory that are DV beds range from 1.4 percent in the District of Columbia and 2.6 percent in Nevada to 20 percent in South Dakota. In addition to South Dakota, five other states had more than 15 percent of their local bed inventory targeted to domestic violence victims: Wyoming (18.1%), Mississippi (17.9%), New Mexico (17.4%), Iowa (17.3%), and Alaska (16%).

According to the National Intimate Partner and Sexual Violence Survey (NISVS) report, nearly 10 million people in the U.S. experienced physical violence by an intimate partner in 2010.⁵ Many people escaping domestic violence seek refuge outside of the homeless services system, and those who use homeless shelters may use either shelters designated for domestic violence victims or shelters available to a broader population. The HIC offers an enumeration of shelter beds designated for domestic violence victims and provides a more complete picture of homelessness in America.

EXHIBIT C: Domestic Violence Beds and Bed-Use by Household Type and CoC Type, HIC 2014

Type	DV Beds	Total Beds	% DV Beds	# of CoCs
Total	56,016	772,788	7.3	414
Bed-Use By Household Type				
Individuals	8,979	406,208	2.2	323
Families	47,037	366,580	12.8	392
Bed-Use By CoC Type				
Major City CoCs	15,848	364,824	4.3	48
Smaller City, County, & Regional CoCs	21,497	296,204	7.3	324
Balance of State & Statewide CoCs	18,671	111,760	16.7	42

Note 1: Total beds include year-round beds from Emergency Shelter, Transitional Housing, Rapid Rehousing, Permanent Supportive Housing, Safe Havens, and Other Permanent Housing projects.

Note 2: Includes Puerto Rico and U.S. Territories

⁵ http://www.cdc.gov/violenceprevention/pdf/nisvs_report2010-a.pdf

How to Use this Report

The 2014 AHAR Part 2 is intended to serve as a data reference guide. It begins with a new section, using the AHS 2013 supplemental data, looking at additional forms of homelessness and housing instability. The rest of the report is divided into seven sections, by each subpopulation of people experiencing homelessness:

1. All homeless people,
2. Homeless individuals,
3. Homeless people in families with children,
4. Unaccompanied children and youth,
5. Homeless Veterans,
6. Chronically homeless people, and
7. Formerly homeless people in permanent supportive housing (PSH).

The sections begin with a summary of the PIT count data and an analysis by state of people who are homeless on a single night in January 2014. The HMIS data on people who were in homeless shelters at some time during the year follow. These one-year estimates include information on the gender, age, ethnicity, race, household size, disability status, geographic location, characteristics by geography, living situation before entering shelter, length of shelter stay, and bed-use patterns. HMIS data are not available for unaccompanied children and youth or for chronically homeless people. PIT count data are not available for people in PSH.

This report is intended for several audiences: Members of Congress, staff at local service providers and CoCs, researchers, policy-makers, and advocates. These audiences may have various reasons for reading this report, but all audiences can find answers to questions that can be useful to them. For example:

At the national level, Congress and policymakers can mark progress on the nation's *Opening Doors* initiative to prevent and end homelessness. Key stakeholders can also identify which sub-populations require more attention in this effort and which groups are improving at a slower rate than others.

At the state level, policymakers and state-level CoCs can determine how they compare to other states and the District of Columbia on a range of important measures. The report shows which states experienced substantial changes in their homeless populations compared to other states, and these comparisons can foster collaborations and propel efforts towards ending homelessness.

At the local level, community leaders and local service providers can determine how their community compares to the nation. This comparison can highlight ways in which the community's homeless population is similar or different from the national profile of homelessness.

This report can address many questions that may be of interest across all audiences. Some examples are:

1. How many people are homeless in the U.S. in any given year? How has this changed over time?
2. Are women more likely to become homeless than men? How many people are homeless as individuals, and how many are homeless in families with children?
3. How many children are homeless in the U.S.?
4. What is the race and ethnicity of people who are homeless in the U.S.?
5. What is the rate of disability among people who are homeless?
6. Where do homeless people stay before they enter the shelter system?
7. How long do people stay in shelter?
8. How many U.S. Veterans are homeless? How has that number changed over time?
9. How many people are chronically homeless in the U.S.?
10. How many people are in a permanent supportive housing program? Where were they living beforehand? Where did they go once they left?



Key Findings

Homelessness in the United States

One-Night Estimates

- On a single night in January 2014, 578,424 people were homeless in the United States, an 11.2 percent decrease since January 2007. This decline was driven by a 31.7 percent reduction in the number of homeless people living on the street or in other unsheltered locations. However, during this same time period, the number of homeless people in shelters increased by 2.5 percent. Between 2013 and 2014, the 2.3 percent decline in homelessness was also driven by a decline in unsheltered homelessness (a 10% drop) that outweighed the increased in sheltered homelessness (a 1.6% rise).
- Together, California and New York accounted for more than a third of all homeless people in the United States in 2014.
- In 2014, at least 90 percent of the local homeless population was staying in sheltered rather than unsheltered locations in 18 states and the District of Columbia. Nationally, about seven in ten homeless people were staying in shelter.

One-Year Estimates

- In 2014, an estimated 1.49 million people used a shelter program at some point during the reporting year, a 4.6 percent increase since 2013. This marked the first year sheltered homelessness has grown in the U.S. since 2010. Yet in spite of this short-term increase, the number of sheltered homeless people is 6.3 percent less than it was in 2007, when HUD began tracking this information.
- Between 2007 and 2014, the number of adults entering shelter after staying on the street or in other places not meant for human habitation increased by 48.3 percent.

- Minorities are among the populations most vulnerable to falling into homelessness. One in 138 people identifying as minorities, including one in 69 African Americans, stayed in a homeless shelter in 2014. Adults with disabilities are also at great risk of falling into homelessness, with one in 81 staying in a homeless shelter in 2014.
- Sheltered homelessness has declined in principal cities by 14.1 percent between 2007 and 2014, yet people in these cities are still at great risk of falling into homelessness. One in 33 people in principal cities stayed in a homeless shelter in 2014. However, between 2007 and 2014, the number of people using shelters increased by 19.6 percent in suburban and rural areas while the total population of all people in those areas declined by 24.6 percent.

Homeless Individuals

One-Night Estimates

- On a single night in January 2014, 362,163 people were homeless as individuals. This represents 62.6 percent of all homeless people in the United States.
- Between 2007 and 2014, the number of homeless individuals dropped by 12.9 percent. Declines occurred in both sheltered and unsheltered homelessness, but the largest decline was among individuals staying in unsheltered locations.
- In January 2014, about three in five homeless individuals were staying in shelter, while about two in five were living on the street or in other unsheltered locations.

- The vast majority (86.3%) of homeless people found in unsheltered locations in 2014 were homeless as individuals rather than in families; 52.1 percent of homeless people in shelter were homeless as individuals. California accounted for about a quarter (25.4%) of all homeless individuals and 44 percent of all unsheltered homeless individuals in the nation.
- In six states—Nevada, California, Arkansas, Mississippi, South Carolina, and Georgia—more than three-quarters of all homeless people counted in January 2014 in those states were homeless as individuals rather than in families. Most states (90%) had more than half of all homeless people homeless as individuals within their state.

One-Year Estimates

- An estimated 948,127 individuals used a shelter program in the United States in 2014 over the course of a year. The number of homeless individuals in shelter increased by 4.4 percent between 2013 and 2014; however, it has decreased by 11.7 percent since 2007.
- While still a small share of the overall population of individuals using shelter, both the number and share of elderly individuals in shelter continued to increase between 2013 and 2014.
- Although minorities living in poverty as individuals increased substantially between 2007 and 2014, minorities in shelter programs as individuals declined by 13.1 percent over the same period. The share of sheltered individuals identifying as white and not Hispanic increased from 42.6 to 47.8 percent since 2007.
- The share of sheltered individuals with a disability increased from 40.4 percent in 2007 to 46.6 percent in 2014.

- The number of individuals using shelter programs in suburban and rural areas increased 7.3 percent between 2007 and 2014, while the number of individuals using shelters in cities dropped by 16.9 percent.

Homeless Families with Children

One-Night Estimates

- On a single night in January 2014, 216,261 people in families with children were homeless in 67,613 family households in the United States. About 37 percent of all homeless people on a single night were in families.
- Between 2013 and 2014, the number of homeless people in families with children dropped by 2.7 percent (5,936 fewer people). The number of homeless family households with children dropped by 4.7 percent (3,347 fewer households).
- In 2014, 88.7 percent of all people who were homeless in families with children on a single night stayed in shelter programs. More than half of all states had at least 90 percent of their families with children homeless population in shelter.
- Since 2007, the number of sheltered people in families with children on a single night increased by 7.6 percent, while the number of unsheltered dropped by 57.4 percent.
- New York and Massachusetts had notable increases in sheltered homelessness among families with children, both between 2013 and 2014 and over the six-year period between 2007 and 2014. Unsheltered family homelessness increased substantially over the same period in several states—Utah, Idaho, and Montana.

One-Year Estimates

- In 2014, 517,416 people in 160,301 family households used shelter programs at some point during the reporting year. People in families with children comprised 34.8 percent of the total sheltered homeless population, essentially unchanged from the previous year.
- After a decline of 12.6 percent (71,620 fewer people) between 2010 and 2013, the number of people in families with children using shelters increased by 4.4 percent (21,702 more people) between 2013 and 2014.
- While blacks or African Americans comprised 48.3 percent of people in families with children using shelters in 2014, their share of sheltered people in families with children increased by 5.8 percent between 2007 and 2014.
- In 2014, 21 percent of sheltered adults in families with children had a disability, which is 2.5 times higher than the share with a disability among all adults in U.S. families with children.
- Between 2007 and 2014, the number of people in families with children using shelters increased in suburban and rural areas (48.1% rise) and decreased in cities (5% drop).
- Women make up nearly 80 percent of adults in sheltered families with children, but the share of men rose from 18 percent to 21.7 percent between 2007 and 2014.

Unaccompanied Homeless Children and Youth

One-Night Estimates

- 45,205 unaccompanied children and youth were homeless on a single night in January 2014; 86.1 percent were youth ages 18 to 24, and 13.9 percent were children under 18.

- Less than half (45.6%) of unaccompanied homeless youth were on the streets or in other unsheltered locations on a single night in January, while a larger share (59.3%) of unaccompanied homeless children were unsheltered.
- Almost all homeless children were accompanied by their families, whereas the majority of homeless youth were unaccompanied. Only 4.6 percent of homeless children were unaccompanied, while about two-thirds (66.4%) of homeless youth were unaccompanied.
- The number of unaccompanied homeless youth staying in unsheltered locations declined 3.9 percent (728 fewer youth), while the number in sheltered locations increased 1.2 percent (240 more youth).

Homeless Veterans

One-Night Estimates

- On a single night in January 2014, 49,933 Veterans were homeless in the United States, representing 8.6 percent of all homeless people and 11.3 percent of all homeless adults.
- More than 6 in 10 homeless Veterans were using shelter programs in 2014, and nearly 4 in 10 were in unsheltered locations. A larger share of homeless Veterans were unsheltered (35.9%) compared to all homeless people (30.7%).
- Fewer Veterans were homeless in January 2014 than in 2013. Veteran homelessness declined by 10.5 percent or 5,846 fewer Veterans. Just more than half of this decline was attributable to the decrease in the unsheltered population (2,985 fewer people).

- Between 2009 and 2014, Veteran homelessness dropped 32.6 percent, or 24,117 fewer Veterans. The decline in unsheltered homeless Veterans (41.6% or 12,756 fewer Veterans) was larger than the decline in sheltered Veterans (26.2% or 11,361 fewer Veterans).

One-Year Estimates

- 131,697 Veterans were in shelter programs in the United States at some time between October 1, 2013 and September 30, 2014. The number of Veterans using shelter programs at some time over the course of a year dropped by 12 percent since 2009, totaling 17,938 fewer Veterans.
- The share of sheltered Veteran in a racial minority group in 2014 was over two times larger than the share among the U.S. Veteran population (47.6% versus 20.7%).
- The majority (73.8%) of sheltered homeless Veterans were concentrated in principal cities in 2014, while the majority of all U.S. Veterans (83.7%) and Veterans in poverty (74.1%) were living in suburban and rural areas.
- In 2014, over 95 percent of sheltered Veterans were homeless as individuals.

Chronically Homeless Individuals

One-Night Estimates

- On a single night in January 2014, 84,291 people were chronically homeless as individuals in the United States, representing about a quarter (23.3%) of all homeless individuals. Most chronically homeless individuals (63%) were found on the street or in other unsheltered locations.
- Between January 2007 and January 2014, the number of chronically homeless individuals declined by 30 percent. Over this same time period, the proportion of homeless individuals who were chronically homeless fell from 29 percent to 23.3 percent.
- The number of chronically homeless individuals using shelter programs rose by 6.1 percent (1,785 more people), while the number in unsheltered locations fell by 6.9 percent (3,949 fewer people).
- In 19 states, less than half of all chronically homeless individuals were sheltered in 2014. Only three states sheltered at least 90 percent of their chronically homeless individuals: Maine, Nebraska, and Rhode Island.

People in Permanent Supportive Housing (PSH)

One-Year Estimates

- 285,403 people in the United States were living in permanent supportive housing in 2014. Almost two-thirds of PSH residents are individuals rather than people in families with children, and the share of people using PSH who are individuals has been increasing over time, though only slightly from 2013 to 2014.
- The number of PSH beds continued to rise, reaching 300,282 in 2014, a 5.6 percent increase from 2013.
- The share of long-term stayers (more than five years) in PSH rose from 18.3 percent in 2010 to 24.1 percent in 2014. The share of short-term stayers (a year or less) in PSH dropped from 31 percent in 2010 to 24.2 percent in 2014.
- People in families with children who moved out of PSH were more likely to move into another housed situation than were individuals who exited PSH (79% versus 59.5%). A slightly larger share of people in families with children who exited PSH to other housing moved into rental housing than did individuals (56.9% versus 55.1%), while a larger share of individuals who exited PSH to other housing went to stay with friends than did people in families with children (11.5% versus 6.8%).
- The number of Veterans using PSH increased 40.5 percent, from 22,338 in 2010 to 31,393 in 2014. However, this does not include many of the Veterans served by the HUD-VA Supportive Housing (VASH) program.

Interpretation of the Findings

Part 2 of the AHAR amplifies and supplements each year's point in time counts by permitting us to understand more about people who become homeless over the course of a year and their patterns of use of the homeless services system. This information is important to signal needed adjustments to policy as the nation strives to end homelessness for various target groups. With this eighth annual report on homelessness, we can continue to observe how homelessness has evolved since the end of the Great Recession.

The U.S. is well under way toward meeting the goal of ending Veteran homelessness, with a remarkable 10 percent decline just between 2013 and 2014. With strong evidence that permanent supportive housing ends homelessness for Veterans with high needs for services and their families, policy makers across the executive and legislative branches committed themselves to the HUD-VASH program. The Supportive Services for Veteran Families program has helped an even larger number of Veterans transition to permanent housing.

As always, the AHAR makes a distinction between family homelessness and individual homelessness, with people homeless as members of families with children comprising 35 percent of all sheltered homeless people, and about the same percentage of all those homeless on a single night in January. (Most homeless families are found in shelter rather than in places not suitable for human habitation.) With 160,000 sheltered homeless families, family homelessness is a tragedy but also a solvable problem.

The shift away from the use of transitional housing for families continues, as the number of beds for families in transitional housing drops and communities adopt rapid re-housing approaches.

However, longer lengths of stay in emergency shelters have persisted since the end of the Recession, with the average number of nights family members spend in shelter reaching 81 in 2014. Rents have been rising, and families may be having difficulty finding a place they can afford, especially if they are trying to leave shelter without a rent subsidy. And the persistent poverty of many American families may mean that it also is hard to find relatives or friends willing to host a family leaving shelter.

Family homelessness increased between 2013 and 2014, as measured by both the one-year estimates and the point-in-time counts. Increases in both the number of homeless families and lengths of stay for families in shelter may reflect the drop in the availability of housing subsidies following the sequestration of funds for housing assistance in 2013. New evidence from a rigorous study of interventions for homeless families confirms the importance of housing subsidies for preventing and ending family homelessness.

Despite the end of the Recession, the share of homeless families found in suburban and rural areas rather than in central cities continues to increase. That shift in the geography of family homelessness may simply track the long-term suburbanization of poverty. But family homelessness, like individual homelessness, continues to be largely a big city phenomenon.

Among people homeless as individuals, the long-term trend that persisted between 2013 and 2014 is a drop in the numbers staying on the street rather than in shelters. Increased availability and better targeting of permanent supportive housing evidently is playing a role in reducing the unsheltered population and, in particular, the number of individuals who have chronic patterns of homelessness.

Lengths of stay for individuals who use emergency shelters continue to grow. The longer stays for individuals may show that outreach programs are reaching higher-needs individuals and bringing them indoors. If the supply of permanent supportive housing, both project-based and scattered-site, continues to grow, the nation will be able to see significant declines in chronic homelessness over time.

Youth homelessness is another focus of federal policy. The AHAR helps us to better understand patterns for people who become homeless from birth through age 24. Nearly all children under 18 who become homeless do so with a parent. However, three of every five children who do become homeless on their own are unsheltered and, therefore, at high risk of exposure to violence.

Among youth between the ages of 18 and 24 who experience homelessness, about two-thirds are homeless on their own, while one-third are homeless with other family members and are usually themselves the parent. Policies for homeless youth should be appropriate to that stage of development but necessarily are very different for unaccompanied youth and for families with both a young parent and young children.

Programs that target victims of domestic violence are not permitted to report data on their clients to HMIS in order to protect their anonymity and safety from abusers. This report includes information on the numbers of beds in such shelters and thus provides some indication of how many people experiencing homelessness the AHAR data may miss.

Programs targeting victims of domestic violence have only 7 percent of the entire inventory of beds for people experiencing homelessness. When victims of domestic violence use emergency shelters for homeless people, they may go to general-purpose shelters rather than to shelters specifically for domestic violence victims. In addition, most of those who experience domestic violence do not turn to the homeless services system for a place to stay.

Homelessness is not the only form of housing instability, and federal and local policy-makers use other information besides the one-night counts and the HMIS-based information to understand fully the nature of housing instability and housing needs. A special supplement of the American Housing Survey (AHS) for 2013 collected information on people who were living in a household and moved out. AHS survey questions then asked the reasons for leaving someone else's housing unit in order to explore which of these residents might have unstable housing. Tabulations of these data are presented in a new section of this report. Successive AHARs have shown that many people who become homeless do so after living with family or friends rather than in their own housing units. However, it has proven difficult to predict whether any particular individual or family will become homeless, and "doubling up" of this nature does not necessarily mean that someone will eventually stay in shelter or on the streets.

