

Appendix B (August 2012 Revision)

Major Assumptions Used in Estimating Needs for Housing Assistance during the Plan Timeframe

Overview

1. Currently available Connecticut data about homelessness is used to estimate needs during the initial 5-year plan timeframe of 2012-2016. The primary sources of data used were the 2010, 2011 and 2012 Statewide Point in Time (PIT) Homeless Counts, and 2010 and 2011 annual homelessness data through the Connecticut Homelessness Management Information System (HMIS). Where Connecticut data is not available, national data is used to help form estimates.
2. Based on national research about the dynamics of homelessness, the plan assumes that many households will be homeless for a short time and will exit homelessness without receiving additional housing assistance. Others will be able to exit (or exit more quickly) with short-term housing assistance.
3. Our estimates assume that by 2012 we begin to prevent homelessness for a growing number of households who would have become homeless. While prevention efforts were already underway in 2010 and 2011 through programs such as the federal Homelessness Prevention and Rapid Re-Housing Program (HPRP), the impact of these efforts appears to have been largely offset by the rising numbers of people who were at risk of homelessness during the economic downturn. We do not have state or national data to determine the net effect of these prevention strategies.
4. The plan primarily focuses on the goals of ending or reducing chronic homelessness and homelessness among families with children, youth and Veterans. As part of this focus, we have identified the need for a supportive housing among both persons currently experiencing chronic homelessness and among non-chronically homeless adults without children who have health-related vulnerabilities (estimated at 10%), in order to prevent their entry into chronic homelessness. This includes homeless adults with disabilities, older adults and vulnerable youth. Because non-chronically homeless adults without children represent the largest number of homeless households, there will be only modest reductions in the total number of households without children experiencing homelessness each year in Connecticut as result of this new supportive housing.
5. The unaccompanied homeless youth population includes children and youth under 18 who are not residing with their legal guardians and young adults ages 18-21 who are not residing with families and who are experiencing poverty and homelessness. At this point in time, there is limited data on the number of unaccompanied youth. For that reason, we are not yet able to accurately project housing assistance needs among this population.
6. A chronically homeless adult is defined here as an unaccompanied homeless individual (18 or older) with a disabling condition who has either been continuously homeless for a year or more OR has had at least four episodes of homelessness in the past three years.

Dynamics of Homelessness

We developed estimates of needs for housing assistance over the initial 2012-2016 timeframe of the Opening Doors-CT plan based on several assumptions. These assumptions were incorporated into a set of Excel spreadsheets, or “timelines”, to calculate our housing estimates. These timelines appear in Attachments C-F of this Appendix. There were separate spreadsheets developed for families, chronically homeless adults (and adults at risk of chronic homelessness), and Veterans (while there is a separate sheet for Veterans, the numbers for Veterans are also incorporated within the other three spreadsheets). In each spreadsheet, we estimated the number of households entering homelessness and exiting homelessness, and the impact of interventions – such as shelter and transitional housing only, prevention assistance, rapid re-housing, permanent supportive housing, and targeted affordable housing

– on these entries and exits. The methodology and assumptions we used in deriving these estimates are described below. The assumptions are also summarized on Attachment B.

ENTRIES INTO HOMELESSNESS

The timelines include estimates of the number of households who are homeless at the beginning of the year and the number who become homeless during the year. The total of these two numbers is the estimated number of households who experience homelessness during the year.

1. **Estimated number homeless beginning of year – 2010:** For 2010 the estimate of the number of households homeless at the beginning of the year is based on the point in time (PIT) count of sheltered persons conducted during January 2010 combined with the 2009 PIT count of unsheltered persons (the 2010 PIT count did not include unsheltered persons).
2. **Number entering homelessness** is the number of households who enter homeless shelters or transitional housing programs during the year, who were not homeless at the time of the PIT count. It includes all households who become homeless after living in housing or after discharge from an institutional setting. This includes households homeless for the first time as well as those who have prior episodes of homelessness if they become homeless again after losing housing or leaving institutional settings.

Our estimates for 2010 and 2011 are based on the number of households who used shelter and transitional housing during those years (based on CT HMIS data for the federal fiscal years), minus the number of households who were homeless at the beginning of each year (based on that year's PIT). We used this information as the basis for estimating the number of households who will enter homelessness in each year of the plan (unless prevented, as described further below). The number of households projected to be homeless in FFY2012 plus the number of households expected to enter homelessness during 2013 - 2016 equals the total number of households who will need assistance in the first 5 years of the plan.

These estimates of households entering homelessness do not include people who are doubled up if they do not enter homeless shelters or transitional housing or if they have never become unsheltered (e.g., living outdoors, in cars, etc.).

The wide disparity between the number of households using shelters over the course of the year and the number using shelters at a given point in time (a 3 to 1 ratio) is due in part to shelter capacity limits (i.e., a fixed number of available shelter beds) and to time limits on length of stay in many shelters. The number of people entering shelter is limited by the number of shelter beds available. Several shelters reported that they were operating over capacity in 2010.

We do not have data that allows us to estimate the impact of the current economic downturn on the number of homeless families and adults without children. We do know that the number of sheltered people experiencing homelessness over the course of the year increased 8% from 2010 to 2011.

Historically, CT HMIS has not yielded reliable data on the number of adults experiencing chronic homelessness over the course of the year. Therefore, our projections assume that the number of new entrants into chronic homelessness is largely offset by the number of people who leave chronic homelessness due to incarceration, hospitalization, or death. In our projections, we have used the CT point in time figure for 2010 as our starting point and that of 2011 as our end point to estimate the number of new entrants into chronic homelessness. We have also assumed that up to 10% of non-chronically homeless individuals without children are at risk of chronic homelessness, and have estimated the need for permanent supportive housing to prevent their entry into chronic homelessness.

PREVENTION OF HOMELESSNESS

We assume that well-targeted and effective prevention strategies could begin to reduce the number of family and Veteran households who experience homelessness and reduce the number of homeless adults who become chronically homeless. Prevention assistance is targeted to persons facing housing instability who are at risk of losing their housing and require temporary assistance to prevent this or to move to another home. This may take the form of housing assistance (such as rent or utility arrears, security deposits, or short-term rental assistance), legal or mediation services, moving assistance, credit repair, counseling, and other supports.

Assuming the availability of resources for prevention strategies, we estimate the following:

1. For **families with children**, we estimate that 7% of those who would otherwise become homeless during the year could instead be assisted through prevention interventions in 2012 and they do not become homeless. For each following year, we estimate that up to 15% of families (who would otherwise enter homelessness) could receive prevention assistance and do not become homeless.

In addition, we estimate that up to 10% of homeless families who otherwise would have entered the shelter system would be prevented from doing so if they were the recipient of supportive or affordable housing assistance in a prior year which has prevented their return to homelessness. (The provision of supportive and affordable housing is described below under Exits from Homelessness.)

2. For adults without children experiencing **chronic homelessness**, we estimate that up to 40% who would otherwise enter homelessness during the year would be prevented from doing so if they were the recipient of supportive housing assistance in a prior year which has prevented their return to homelessness.

Chronic homelessness can also be prevented through 1) better discharge planning to facilitate direct access to supportive housing when homeless people with disabilities leave hospitals, treatment facilities, or jails/prisons, and through 2) outreach efforts that help homeless adults with disabilities access supportive housing directly from the streets or shelter. Prevention of this kind has been assumed within the permanent supportive housing figures for Other Adults without Children.

3. For **Veterans**, we estimate that 7% of those who would otherwise become homeless could instead be assisted through prevention interventions in 2012 and they do not enter homelessness. For each following year, we estimate that up to 15% of Veterans (who would otherwise enter homelessness) would receive prevention assistance each year and do not become homeless.

In addition, we estimate that up to 20% of Veterans who otherwise would have entered the shelter system would be prevented from doing so if they were the recipient of supportive or affordable housing assistance in a prior year which has prevented their return to homelessness.

In order to keep the focus on targeted households, the prevention figure for **Other Adults without Children** on the Connecticut Statewide summary table reflects only the need among those adults who are Veterans. This is estimated at 95% of the Veterans prevention figure; the remaining 5% are assumed to be Veteran families.

Without an adequate supply of affordable housing for families and individuals with the lowest incomes, it is very difficult to target available housing resources more narrowly to those who will become homeless in order to prevent homelessness. If affordable housing is only available to households who are in shelters, it may create unintended consequences, including incentives for households in precarious housing situations (e.g. doubled up or living in hotels) to enter shelters to get housing assistance. Another unintended consequence could be a reduction in the number of households who leave shelters quickly without assistance if the household determines it is in their best interest to stay in shelter or transitional housing in order to qualify for affordable housing assistance.

EXITS FROM HOMELESSNESS

1. **HOUSEHOLDS LEAVING HOMELESSNESS WITH SHELTER OR TRANSITIONAL HOUSING ONLY.** National research and Connecticut data indicate that more than half of all homeless people exit homelessness quickly after short stays in shelter, and typically without receiving any housing assistance.¹ The reported reasons for exits are varied: moved in with family/friends; secured their own housing; reached time limits on shelter length of stay; failed to comply with program regulations; relapse; etc. Most will not return to homelessness within the next year or two, but some may have additional episodes of homelessness during the year or in future years if they are unable to maintain housing, especially if affordable housing options are not available.

Close to 1,535 families and 9,850 single adult households in Connecticut used shelters and transitional housing programs during the course of a year in FFY11, based on HMIS data. The vast majority exited without additional housing assistance of any kind.

Seventy-six percent (76%) of persons in households with children and 49% of adults without children who used shelters in FFY2011 were new to shelter. This is consistent with national data. HUD's March 2010 report, "Costs Associated with First-Time Homelessness for Families and Individuals" indicates that, for the communities studied, 58-72% of first time homeless families used emergency shelter only once in the 18-month period of the study; 50%-65% of first time homeless adults without children used emergency shelters only.²

- a. **Families:** During the plan timeframe, we estimate that at least 45% of families entering homelessness during the year will exit shelters and transitional housing quickly without additional housing assistance, often with support from family, friends, and other community resources. We also estimate that as many as 20% of families experiencing homelessness at a point in time will exit homelessness without additional housing assistance after extended stays in transitional housing programs.

The actual percentage of families that exited shelters without housing assistance in 2010 is estimated at about 64%. Many of these families likely returned or will return to homelessness (CT HMIS data found that 10% of homeless adults in families served by homeless shelters in 2010 were also served by Connecticut shelters in 2009). With effective prevention, rapid re-housing, and housing assistance, the number of families churning through the shelter system will drop over time.

- b. **Chronically homeless adults.** We estimate that 5% of homeless adults experiencing chronic homelessness will leave homelessness due to incarceration, hospitalization, death, or other factors.
- c. **Veterans:** Currently, many homeless Veterans (a group that includes a mix of adults without children, families, and chronically homeless persons) are served in transitional housing programs that receive VA funding, and these programs are effective for many people. We estimate that about 20% of Veteran households who become homeless each year will utilize shelters or transitional programs only briefly and exit homelessness without additional housing assistance. We also estimate that approximately 15% of those homeless at a point in time will exit homelessness without additional housing assistance after extended stays in transitional housing programs.

¹ "Housing assistance" can range from short-term assistance (e.g., funding for security deposit, payment of back rent or utilities, moving cost assistance, help with paying rent for a month or two), to medium term (rental assistance from several weeks to several months), to long-term (such as provision of an ongoing rental subsidy or access to housing with affordable rents). Assistance may also include help in finding and securing housing and supportive services or case management that support housing stability.

² Spellman, Brooke, et.al. March 2010. "Costs Associated With First-Time Homelessness for Families and Individuals," U.S. Department of Housing and Urban Development.

HOUSING ASSISTANCE

2. **HOUSEHOLDS LEAVING HOMELESSNESS WITH RAPID-REHOUSING ASSISTANCE (one time, short-term or medium-term assistance).** Many people can exit homelessness with one-time or short-term assistance (e.g., money to pay rental deposits or other move-in costs associated with moving from shelter to permanent housing; this may include a month or two of rental assistance) and in some cases medium term assistance (several weeks to several months) that will allow an individual or family to obtain needed housing quickly. Assistance may include help in finding and getting housing and time-limited supportive services or case management that facilitates linkages to ongoing support in the community, as needed. The availability of employment opportunities and effective supports in the community would enhance the ability of assisted households to maintain stability without long-term housing assistance.

Assuming the availability of resources for rapid re-housing strategies, we estimate the following:

- a. **Families:** We estimate that up to 35% of families that enter homelessness could exit quickly with rapid re-housing assistance.
- b. **Veterans:** We estimate that 15% of homeless Veteran households could exit homelessness with rapid re-housing assistance.

In order to keep the focus on targeted households, the rapid re-housing figure for **Other Adults without Children** on the Connecticut Statewide summary table reflects only the need among those adults who are Veterans. This is estimated at 95% of the Veterans prevention figure; the remaining 5% are assumed to be Veteran families.

3. **HOUSEHOLDS LEAVING HOMELESSNESS WITH PERMANENT SUPPORTIVE HOUSING.** Permanent supportive housing is affordable housing where tenants can access supportive services aimed at helping them maintain housing stability and achieve personal goals in areas such as health, employment, and community integration. Supportive housing includes units located at a single site (i.e., multiple units located at a single building or apartment development) or can be scattered throughout the community. It can be created through the construction or acquisition of buildings or through access to existing housing through tenant-based subsidies or other funding mechanisms.

During the plan's timeframe, some supportive housing opportunities will become available through anticipated turnover as current tenants move out of existing supportive housing. We estimate that 7% of existing supportive housing units turn over each year, based on recent experience and data. Households who move out are most likely to do so within the first year or two, so turnover rates are higher in new projects. In older supportive housing projects, turnover rates are often lower as more units are occupied by long-term tenants who are less likely to move out.

- a. **Families.** Most homeless families do not need supportive housing if they have access to affordable housing and effective support services in the community. However, research indicates that some homeless families have long and protracted spells of homelessness, and that others return to homelessness after being rehoused. The size of this subgroup is not known, but the data suggest that families who experience repeated spells of homelessness are likely to have greater needs than the "typical" homeless family served in the emergency shelter and transitional housing system. Heads of household in some of these families may qualify as chronically homeless, and often face challenges related to substance use and/or mental health disorders, as well as trauma resulting from being a victim of physical violence and/or sexual abuse.³

³ Corporation for Supportive Housing, "The Role of Permanent Supportive Housing in Ending Family Homelessness", January 2008, Accessed March 16, 2011 at <http://www.csh.org/document/docWindow.cfm?fuseaction=document.viewDocument&documentid=957&documentFormatId=2006>

We estimate that approximately 11% of homeless families need supportive housing.⁴ This includes families that have experienced multiple episodes of homelessness, and some families that include a parent with a disability (e.g. mental illness or complex and poorly managed health conditions), and some homeless families involved with the child welfare system who have high needs for ongoing supportive services.

- a. **Chronically homeless adults.** Virtually all chronically homeless adults need supportive housing. Given the extraordinarily high costs of health care and other public expenditures for emergency responses to chronic homelessness, supportive housing is a cost-effective solution.
- b. **Adults without children who are not chronically homeless.** For individuals with disabilities or other health challenges who need more intensive support services linked to housing to achieve and maintain stability, permanent supportive housing is appropriate. Currently, over a third of all existing supportive housing in Connecticut is serving homeless individuals with disabilities, without limiting eligibility to persons who are chronically homeless. Adding additional units of supportive housing for homeless individuals with disabilities, and targeting supportive housing opportunities based on health-related vulnerability or avoidable health care costs is a cost-effective strategy to prevent people from becoming chronically homeless.

We estimate that 10% of homeless adults without children who are not chronically homeless need permanent supportive housing, based on health-related vulnerability and the potential for avoidable health care costs. This includes some homeless adults with HIV/AIDS or other disabilities (such as mental illness, chemical dependency or other chronic conditions), some unaccompanied transition-age youth (age 18-24), and some homeless adults over the age of 50, with some adjustment for overlap between these groups.

- c. **Veterans.** Some Veterans with disabilities have experienced chronic homelessness and others face significant barriers to housing stability because of mental illness, including PTSD, and other challenges. These Veterans need supportive housing. We estimate that 35% of homeless Veterans will need permanent supportive housing during the plan's timeframe. This includes households served through HUD-VASH vouchers, through newly created permanent supportive housing that carries other subsidies, and through turnover in these subsidies and units.
4. **HOUSEHOLDS LEAVING HOMELESSNESS WITH DEEPLY AFFORDABLE HOUSING.** People experiencing homelessness generally have incomes below 30% of area median income; most have incomes below 15% of area median income (about half of the federal poverty level).⁵ Housing that is affordable to households at this extreme poverty income level requires some form of public subsidy to either write down the cost of the rent or to cover the difference between 30-40% of tenant income and actual rent. New housing resources may include rental assistance vouchers and the development of permanent housing which is subsidized and available to households with no or limited incomes. In some cases the housing will be connected to service coordination or mainstream employment and youth programs, or coupled with the provision of time-limited services that help tenants connect to ongoing community supports.

Strategies to increase access to mainstream housing programs and to create additional affordable housing will help to meet the affordable housing needs for homeless households who do not need supportive housing and do not exit homelessness quickly on their own or with rapid re-housing assistance.

⁴ CT 2009 PIT found that 10% of sheltered adults in families were chronically homeless, but also found that at least 13% had been without a permanent place to live at least 3 or more times previously in the past three years. A 2010 HUD cost study found that families with repeated stays in homeless programs also tended to have high rates of involvement with the with the child welfare system or criminal justice system. US Department of Housing and Urban Development, "Costs Associated with First-Time Homelessness for Families and Individuals", 2010.

⁵ 6% of Connecticut children under age 18 live in families with incomes less than 50% of federal poverty level, as defined by the US Office of Management and Budget. In 2009, a 50% poverty threshold for a family of 2 adults and 2 children was \$10,878. Source: Annie E Casey Foundation, Kids Count Data Center, "Data Across States", <http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?ind=45>

- a. **Families:** Most homeless families have characteristics that are not substantially different from other poor families who are not homeless – and for the vast majority of homeless families, a housing subsidy or access to deeply affordable housing will prevent or end their homelessness. We estimate that close to 10% of homeless families with children will need affordable housing alone (i.e., exclusive of rapid re-housing or other housing assistance) in order to exit homelessness during the plan’s timeframe. A portion of this need can be met by removing barriers and improving access to existing housing programs, but achieving the plan’s targets will also require the creation of additional housing affordable to families at the lowest income levels who are homeless or at imminent risk of homelessness.
- b. **Veterans:** We estimate that 10-20% of homeless Veterans need access to affordable housing in order to exit homelessness.

In order to keep the focus on targeted households, the deeply affordable housing figure for **Other Adults without Children** on the Connecticut Statewide summary table reflects only the need among those adults who are Veterans. This is estimated at 95% of the Veterans prevention figure; the remaining 5% are assumed to be Veteran families).

5. **NUMBER LEAVING HOMELESSNESS:** The number of households leaving homelessness is the sum of all households exiting homelessness through the means described above.

CONNECTICUT STATEWIDE
Estimated Needs for Housing Assistance Over Five-Year Timeframe - Opening Doors Connecticut

Estimated needs for housing assistance, by type, among targeted households who will experience homelessness (unless prevented)	2012-2016					
	Families with Children	Chronically Homeless Adults without Children	Other Adults without Children [^] (Vets + Prevention of Chronic Homelessness)	Total Targeted Households	Total Veterans ^{^^} (included within other columns)	Total Unaccompanied Youth ^{^^^} (included within other columns)
Prevention Strategies*	520		240	760	250	TBD
Rapid Re-Housing*	920		160	1,080	170	TBD
Deeply Affordable Housing**	360		310	670	330	TBD
Permanent Supportive Housing	590	1,770	3,410	5,770	610	TBD
<i>Estimated need that could be met through turnover of existing supportive housing units</i>	(400)	(800)	(1,230)	(2,420)	(380)	
<i>Need for new Supportive Housing</i>	190	970	2,180	3,340	230	
Estimated Total Target Households Needing Housing Assistance 2012-2016	2,390	1,770	4,120	8,280	1,360	TBD
<i>Estimated Persons in these households</i>	6,840	1,770	4,120	12,730	1,480	TBD

*Does not assume permanent rent subsidies connected with prevention and rapid re-housing.

**Deeply affordable housing refers to subsidized rental housing that is affordable to persons living in deep poverty and targeted to households experiencing homelessness. Affordable housing and permanent supportive housing options can take the form of scattered subsidized apartments or the development of buildings through new construction or rehabilitation. The affordable housing numbers presented here do not include rent subsidies needed to prevent homelessness or that may be used in conjunction with rapid re-housing or permanent supportive housing. These numbers also do not encompass the need for affordable housing among low income households who are not experiencing homelessness. Significantly increasing the availability of rental housing that is affordable to households with the lowest incomes would be the most effective strategy for preventing and ending homelessness. The need for affordable housing in Connecticut is much larger than the number of affordable housing units needed to serve households who have become homeless.

[^]The permanent supportive housing figures for "other adults without children" represent approximately 10% of estimated total adults without children who will experience homelessness (if not prevented). Does not include chronically homeless adults. Includes persons with behavioral health and primary health care needs, older adults, and vulnerable youth. The provision of supportive housing is a means to better address the housing and service needs of vulnerable adults and is a means to prevent chronic homelessness. If these units are provided, it is possible that fewer units of permanent supportive housing will be needed than estimated above in the Chronically Homeless Adults column. However, because we do not have reliable full-year data on the number of adults without children who experience chronic homelessness over the course of the year, the projections above are already fairly conservative.

Most homeless adults without children do not need permanent supportive housing. The majority exit homelessness quickly, often with support from family, friends, and other community resources, but many do return. Effective prevention, rapid re-housing, and affordable housing assistance could further reduce the number of individuals experiencing or returning to homelessness. In order to keep the focus on targeted households, the prevention, rapid re-housing, and deeply affordable housing numbers in this column reflect only the need among Other Adults without children who are Veterans.

^{^^} 5% of homeless Veteran households are estimated to be families with children. 30% of homeless Veteran households are estimated to be chronically homeless adults. The number of permanent supportive housing units for Veterans assumes that 5% of these units would be for Veteran families; of the remainder, 60% would be for chronically homeless Veteran adults and 40% would be for other homeless Veteran adults without children needing supportive housing and not yet chronically homeless.

^{^^^} The unaccompanied homeless youth population includes children and youth under 18 who are not residing with their legal guardians and young adults ages 18 through 21 who are not residing with families and who are experiencing poverty and homelessness. Obtaining accurate data on the prevalence and service needs of unaccompanied homeless youth is difficult. A Homeless Youth Study, in the planning stages, will conduct key-informant interviews with youth identified by community partners as "homeless, unaccompanied, and/or throw-away" and service providers currently working with this group. Using the qualitative information collected from the key informants, a quantitative measure will be constructed to "count" the challenges, resources, and needs of this group in an attempt to describe the experience of these young people and affect policy.

Opening Doors - Connecticut

Summary of Major Assumptions to be Used in Estimating Needs for Housing Assistance

	Families with Children	Chronically Homeless Adults without Children	Other Adults without Children	Veterans (Homeless households headed by a Veteran; includes households with and without children)
Starting Point in Time (2010)	451	767	2,244	461
2010 Annual	1,169	1,080	8,286	800
Number entering homelessness unless prevented (2010 annual minus 2010 PIT)	718	313	6,042	339
% who are Families	100%	0%	0%	15%
Prevention/Diversion through short and medium term interventions				
% expected to receive this assistance in 2012	7%	n/a		7%
Annual increase ("ramp up")	7%	n/a		7%
% that could potentially be prevented/diverted from entering homelessness with this assistance if resources were available	15%	n/a		15%
Prevention through long-term interventions (returns to shelter prevented through permanent supportive housing and permanent affordable housing)				
% that could potentially be prevented from entering or re-entering homelessness due to placement in permanent supportive hsg or permanent affordable housing	10%	40%		20%
Exits with shelter or transitional housing only				
% entering homelessness who are likely to exit after brief stays with shelter or transitional housing only	45%	0%		20%
estimated % in 2010	64%	n/a		70%
% homeless at beginning of year leaving with shelter or transitional only after extended stays	20%	5%		15%
Exits with Housing Assistance				
Rapid Re-housing				
% expected to receive this assistance in 2012	9%	n/a		9%
Annual increase ("ramp up")	3%	n/a		2%
% that could potentially exit homelessness with this assistance if resources were available	35%	n/a		15%
Permanent Supportive Housing				
% of homeless households who need Permanent Supportive Housing (PSH)	11%	100%	10% includes people with health and behavioral health challenges, older adults, vulnerable youth who do not exit with other types of assistance	35%
Number of existing PSH units (2011)	995	1,579	2,051	131
PSH turnover rate	7%	7%	7%	15%
Affordable Housing				
Affordable Housing need / target population(s)	10% Families who do not exit homelessness on their own or with other types of assistance	n/a		10-20% Veterans who do not exit homelessness on their own or with other types of assistance

Reductions in homelessness over timeframe of CT Plan

10 year plan	5-Year Plan Timeframe											
	Year											
Families with children	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Estimated number homeless beginning of year (PIT)	451	484	449	459	440	366	300	242	191	144	96	48
<i>Add:</i>												
Number entering homelessness	718	1,051	896	698	539	539	539	539	539	539	539	539
Number expected to enter homelessness during the year (if not prevented)	718	1,051	1,018	918	718	718	718	718	718	718	718	718
Number prevented from becoming homeless	-	-	71	129	108	108	108	108	108	108	108	108
Number prevented from returning to homelessness	-	-	51	92	72	72	72	72	72	72	72	72
<i>Subtract:</i>												
Number leaving homelessness	686	1,086	887	717	613	604	596	590	587	587	587	587
Number leaving with shelter or transitional only after brief stays	460	823	448	314	242	242	242	242	242	242	242	242
Number leaving with shelter or transitional only after extended stays	90	97	49	8	-	-	-	-	-	-	-	-
with rapid rehousing	66	96	164	191	189	189	189	189	189	189	189	189
with permanent supportive housing	70	70	153	131	110	101	93	86	83	83	83	83
New PSH units needed (subsidies or new units)	-	-	78	52	29	19	10	3	-	-	-	-
PSH turnover	70	70	75	79	81	82	83	83	83	83	83	83
with permanent affordable housing	-	-	73	73	73	73	73	73	73	73	73	73
<i>Balance:</i>												
Projected number homeless at end of year	484	449	459	440	366	300	242	191	144	96	48	0
Number experiencing homelessness during the year	1,169	1,535	1,345	1,157	979	904	839	781	730	682	635	587

Reductions in homelessness over timeframe of CT Plan

5 years

Chronically Homeless Adults without Children	5-Year Plan Timeframe						
	Year						
	2010	2011	2012	2013	2014	2015	2016
Estimated number homeless beginning of year (PIT)	767	964	936	784	594	399	201
<i>Add:</i>							
Number entering chronic homelessness	314	251	220	188	188	188	188
Number expected to enter chronic homelessness during the year (if not prevented)	314	314	314	314	314	314	314
Number prevented from becoming chronically homeless due to short-term interventions	-	-	-	-	-	-	-
Number prevented from returning to homelessness due to long-term interventions	-	63	94	126	126	126	126
<i>Subtract:</i>							
Number leaving homelessness	117	279	373	378	383	386	390
Number leaving with shelter or transitional only after brief stays	-	-	-	-	-	-	-
Number leaving with shelter or transitional only after extended stays	38	48	47	39	30	20	10
with rapid rehousing	-	-	-	-	-	-	-
with permanent supportive housing	79	230	326	339	353	366	380
New PSH units needed (subsidies or new units)	-	112	194	194	194	194	194
PSH turnover	79	118	132	146	159	173	186
with permanent affordable housing	-	-	-	-	-	-	-
Projected number chronically homeless at end of year	964	936	784	594	399	201	-
Number experiencing chronic homelessness during the year	1,081	1,215	1,156	972	782	588	390

Reductions in homelessness over timeframe of CT Plan

PREVENTION OF CHRONIC HOMELESSNESS - 5 YR		5-Year Plan Timeframe					
Adults without children who are not chronically homeless	Year						
	2010	2011	2012	2013	2014	2015	2016
Estimated number homeless beginning of year (PIT)	2,244	2,101					
<i>Add:</i>							
Number entering homelessness	6,042	6,534					
Number expected to enter homelessness during the year (if not prevented)	6,042	6,534					
Number prevented from becoming homeless	-	-					
Number prevented from returning to homelessness	-	-					
<i>Subtract:</i>							
Number leaving homelessness	6,184	6,656					
Number leaving with shelter or transitional only after brief stays	5,264	5,675					
Number leaving with shelter or transitional only after extended stays	224	210					
with rapid rehousing	552	597					
with permanent supportive housing	144	174	765	709	670	644	618
New PSH units needed (subsidies or new units)	-	28	579	488	421	369	320
PSH turnover	144	146	186	220	250	275	298
with permanent affordable housing	-	-					
<i>Balance:</i>							
Projected number homeless at end of year	2,101	1,979					
Number experiencing homelessness during the year	8,286	8,635					

Reductions in homelessness over timeframe of CT Plan

5 years

5-Year Plan Timeframe

Veterans	Year						
	2010	2011	2012	2013	2014	2015	2016
Estimated number homeless beginning of year (PIT)	461	438	330	116	30	2	-
<i>Add:</i>							
Number entering homelessness	340	299	258	238	221	221	221
Number expected to enter homelessness during the year (if not prevented)	340	340	340	340	340	340	340
Number prevented from becoming homeless	-	24	48	51	51	51	51
Number prevented from returning to homelessness	-	17	34	51	68	68	68
<i>Subtract:</i>							
Number leaving homelessness	363	407	472	323	249	223	221
Number leaving with shelter or transitional only after brief stays	239	122	93	73	57	46	44
Number leaving with shelter or transitional only after extended stays	69	66	49	17	5	0	-
with rapid rehousing	31	34	35	36	33	33	33
with permanent supportive housing	24	185	230	132	90	79	79
New PSH units needed (subsidies or new units)	-	140	161	55	11	-	-
PSH turnover	24	45	69	77	79	79	79
with permanent affordable housing	-	-	65	65	65	65	65
<i>Balance:</i>							
Projected number homeless at end of year	438	330	116	30	2	-	-
Number experiencing homelessness during the year	801	737	588	354	251	223	221