

Project Homeless Connect: Milwaukee

November 18th, 2010



**PROJECT
HOMELESS
CONNECT
MILWAUKEE COUNTY**

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A great deal of thought went into choosing the particular date for the Milwaukee Project Homeless Connect event. In order to have adequate planning time and still have nice weather, it was decided to hold the event in fall. In doing some additional research, it was discovered that the National Hunger and Homelessness Awareness Week takes place the week before Thanksgiving. That seemed like the perfect opportunity in which to hold Milwaukee's inaugural Project Homeless Connect event.

On Thursday, November 18th, 2010, Project Homeless Connect: Milwaukee was held at the Tommy Thompson Youth Center on the State Fair Grounds in West Allis. The event took place from 10:00am to 2:00pm. Opening remarks were given at 9:45am to service providers, agency representatives and volunteers who assembled in the atrium of the venue. As guests filtered in, they were treated to coffee cake and coffee while they met with volunteers. Volunteers completed intakes with guests to determine what the guests' needs were. From there, volunteers proceeded to show their guest around the event, to obtain the various services and resources.

A total of 60 agencies were represented in the atrium of the building where they displayed agency information and had staff on hand to talk about services they provide. As guests moved to the north end of the building, there was a wing with several service providers and rooms where the clothing and hygiene banks were located. Included in the downstairs services were: haircuts, legal consults, emergency assistance applications, social security consults, and tax preparation.

Also stationed in the first floor of the building were a job fair and a large multi-purpose room. The guest intakes were completed in the multi-purpose room, and lunch was served and eaten there as well. During lunch, volunteers were encouraged to sit, eat, and further get to know the guests they were assisting that day.

On the second floor, there was a photography team there to help document the event. Part of this project included taking portraits of people attending the event. In addition to the photography 'studio', there were dental screenings, health screenings, AODA assessments and referrals, and HIV/STD screenings. For each of the services provided, there was a separate dormitory room that provided a measure of privacy for guests. In the parking lot of the Tommy Thompson Center, the AIDS Resource Center of Wisconsin had their mobile van where guests could participate in a needle exchange program and receive risk reduction counseling.

Intake Data from Project Homeless Connect

Use of HMIS for Data Collection and Reporting:

The Project Homeless Connect planning committee determined that the best method for data collection and reporting would be to use the existing HMIS database. To facilitate this process, the Milwaukee Continuum of Care (CoC) HMIS Coordinator tailored intake templates used by other CoC's for prior Project Homeless Connect (PHC) events. Consumer notices were posted throughout the intake room to meet state requirements for data entry into the HMIS database. Following the event, the HMIS Coordinator entered the data into a specially designed PHC assessment to record the data collected at the event. A service transaction of "Multi-Purpose Center" was entered for each guest to generate reports.

Source of Referral to Project Homeless Connect Event:

The Milwaukee Continuum of Care's first annual Project Homeless Connect served 180 total guests. Guests were invited to the event through a variety of different avenues. The planning committee's intent was to broadly advertise the event to both homeless service providers and to programs that assist clients at risk of homelessness. Announcements were made to Homeless Service Providers at CoC meetings, Transitional Housing Program meetings and Shelter Task Force meetings. Fliers were also distributed to various meal sites. Of the guests served, 98% resided within the City of Milwaukee limits, with the remaining 2% coming from Greenfield and West Allis. None of the guests reported attending a similar event in another community in the past.

<i>Source of referral</i>	<i>Number</i>	<i>Percent</i>
Emergency Shelter or Transitional Housing Case Manager	94	52%
Meal site	32	18%
Friends/word of mouth	25	14%
Flier posted at locations such as recreation center	13	7%
Other sources – including Church, Parole Officer, Social Worker, Internet, News and 211	16	9%

Age:

By gender, 63% of those served were male (113) and 47% were female (67). Over half of the clients served fell into the 31-50 years age range. Both the age and gender breakdowns mirror the 2009 PIT count in Milwaukee.

<i>Age Range:</i>	<i>18-30</i>	<i>31-50</i>	<i>51-61</i>	<i>62+</i>
Males	8%	31%	21%	2%
Females	8%	23%	6%	1%

Race and Ethnicity:

In terms of Ethnicity, 4% of the clients served were Hispanic. This is slightly lower than what was found in the 2009 PIT count where 6.5% of the clients counted were Hispanic.

<i>Race</i>	<i>Hispanic/Latino</i>	<i>Non-Hispanic/Non-Latino</i>	<i>Percent</i>
American Indian or Alaska Native		2	2%
Asian		1	1%
Black or African American	1	109	61%
Don't Know		1	1%
Native Hawaiian or Other Pacific Islander		1	1%
White	6	59	36%
Total	7	173	

Veteran Status:

Of the 180 clients served, 22, or 12%, indicated that they were veterans. Note that this number is lower than the 25% reported in the 2009 PIT survey.

Household Status:

Guests were asked to self-identify their household type. Average family size for guests who reported having minor dependents was 2.76 dependent children.

<i>Household Type</i>	<i>Number</i>	<i>Percent</i>
Single adult, no children	148	82%
Female single parent	16	9%
Male single parent	5	3%
Couple with no children	7	4%
Couple with children	4	2%

Current Living Situation:

PHC was geared towards homeless clients and guests at risk of homelessness. Of the 180 clients served, 44, or 24%, were added to the HMIS database as new clients. According to the HUD definition a homeless person is someone living in an emergency shelter, safe haven, transitional housing, or a place not meant for human habitation. A total of 147 guests (82%) served at PHC met this definition. The remaining 33 guests (18%) may have been doubled up or at risk of homelessness.

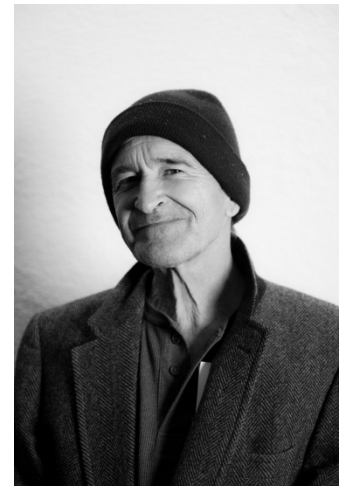
<i>Current Living Situation</i>	<i>Number</i>	<i>Percentage</i>
Emergency Shelter	56	31%
Place not meant for human habitation	32	18%
Rental apartment or house	27	15%
Transitional housing	23	13%
Friends	18	10%

<i>Current Living Situation Cont'd</i>	<i>Number</i>	<i>Percentage</i>
Family	9	5%
Safe Haven	9	5%
Substance abuse facility	4	2%
Hotel/motel	2	1%

Length of homelessness:

Of the 180 guests served, 73, or 50%, reported that their current situation was their first instance of homelessness. 35 guests (24%) had been homeless two to three times. 54 guests (36%) had been homeless four or more times or for over a year. 18 guests, or 10% of the total number of guests served, met the definition of chronic homelessness. According to HUD, a chronically homeless person is an unaccompanied homeless individual with a disabling condition who has been homeless continually for a full year or four or more times in three years.

<i>Length of stay in current situation</i>	<i>Number</i>	<i>Percent</i>
One week or less	38	21%
More than a week but less than a month	29	16%
One to three months	51	28%
More than three months, but less than one year	28	15%
One year or longer	34	19%



Primary Reason for Homelessness:

<i>Primary Reason for Homelessness</i>	<i>Number</i>	<i>Percent</i>
Addiction	8	6%
Can't find affordable housing	2	2%
Disaster (fire, flood,etc.)	1	1%
Eviction	4	3%
Family/Domestic Violence	3	2%
Jail/Prison - Criminal history	6	4%
Lifestyle Preference	1	1%
Low or no income	19	12%
Moved	2	2%
Needs Better Environment	2	2%
Physical/Mental Disabilities	27	20%
Roommate or family conflict	14	10%
Unable to Pay Rent/Mortgage	2	2%
Unemployment	46	33%

Disability Information:

The PHC intake form for 2010 asked “Do you have a disability of Long Duration” and allowed the guest to self-report this information. 113 guests, or 63%, answered this question with a “Yes.” Typically, in a homeless service provider setting, guests are asked to reveal the type of disability and whether it is self-reported or if there is a third party who has identified the disability. Due to a concern about privacy in the intake setting at the Tommy Thompson Center, this information was not gathered in 2010.

Using data that exists already in the local HMIS database allows for the collection of some disability information. The chart below reflects the disability types, as recorded in the

HMIS system, for clients who have already received homeless services in the Milwaukee CoC. The number of respondents for this sub-group of clients is 135. It is significant to note that guests can experience multiple disability issues simultaneously; therefore, the chart below is only de-duplicated within each category and not throughout.

The percentages of PHC guests and 2009 Point-in-Time respondents who have mental illness are very similar. However, the percentages of PHC clients with alcohol and drug abuse issues are found to be about 10% lower than the 2009 Point-in-Time respondents. This could be due to limitations in reporting disability due to the intake site constraints.

<i>Long Term Disability</i>	<i>Clients Served</i>	<i>Percentage</i>
Alcohol Abuse	23	17%
Developmental	4	3%
Drug Abuse	27	20%
Dual Diagnosis	1	1%
HIV/AIDS	1	1%
Mental Health Problem	60	44%
Other: Cognitive	1	1%
Other: Learning	3	2%
Other: Speech	1	1%
Physical	7	5%
Physical/Medical	28	21%
Vision Impaired	2	2%

Employment Status:

The most common reason for homelessness given by guests was “loss of employment” and this directly correlates with the employment status of the guests who attended PHC.

<i>Employment Status</i>	<i>Number</i>	<i>Percent</i>
Full Time	3	2%
Part Time	21	12%
Not a Workforce Participant	56	31%
Not Job Ready	11	6%
Unemployed and Seeking Work	82	46%
Unemployed and not seeking work	7	3%

Non-Cash Benefits:

Only 12% of guests reported that they received no mainstream (non-cash benefit) resources. The most prominent resource is Food Share, which is reported by 78% of clients. It is significant to note that only 4 of the 22 Veterans served (18%) were connected with VA medical services.

<i>Mainstream Resources</i>	<i>Unduplicated Count</i>	<i>Percent</i>
Food Share	141	141
Badgercare (Singles)	39	39
Medicaid/Medicare	62	62
Badgercare (Families)	9	9
VA Medical	4	4

<i>Mainstream Resources Cont'd</i>	<i>Unduplicated Count</i>	<i>Percent</i>
None Reported	22	22

Income Sources:

Approximately 47% of the clients served had no source of cash income. This percentage correlates with the 46% of clients who indicated that they were unemployed and actively seeking employment. 63% of guests indicated that they have a disability of long duration and yet only a small percentage of these clients were receiving disability benefits at the time of the event.

Note that clients may fall into more than one income category; therefore, percentages may be higher than 100%, and counts may be more than the total number of guests.

<i>Income Sources</i>	<i>Unduplicated Count</i>	<i>Percent</i>
Child Support	2	1%
Earned Income	25	14%
No income	84	47%
Non-Service Connected Disability	5	3%
Retirement Income From Social Security	1	1%
SSDI	26	14%
SSI	29	16%
State Caretaker Supplement (CTS)	1	1%
TANF	9	5%
Unemployment Insurance	12	6%
Veteran Disability	2	1%
Veteran's Pension	1	1%

<i>Income Sources Cont'd</i>	<i>Unduplicated Count</i>	<i>Percent</i>
Worker's Compensation	1	1%

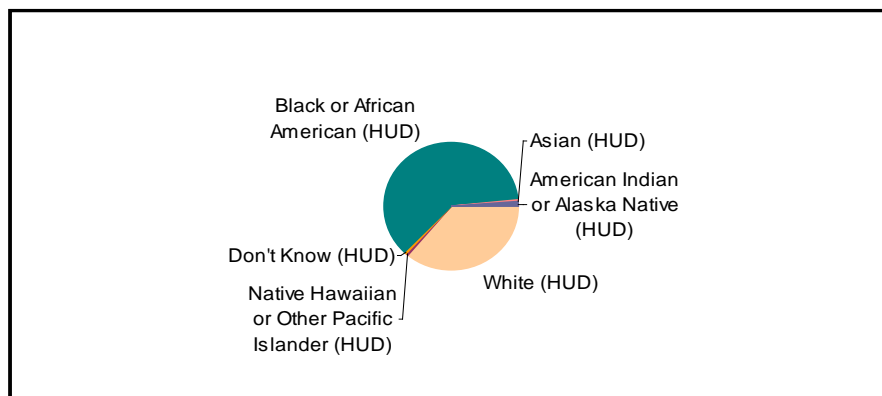
Chronically Homeless Client Information:

Separate analysis was done for the 18 clients (10%) who met the HUD definition for chronically homeless:

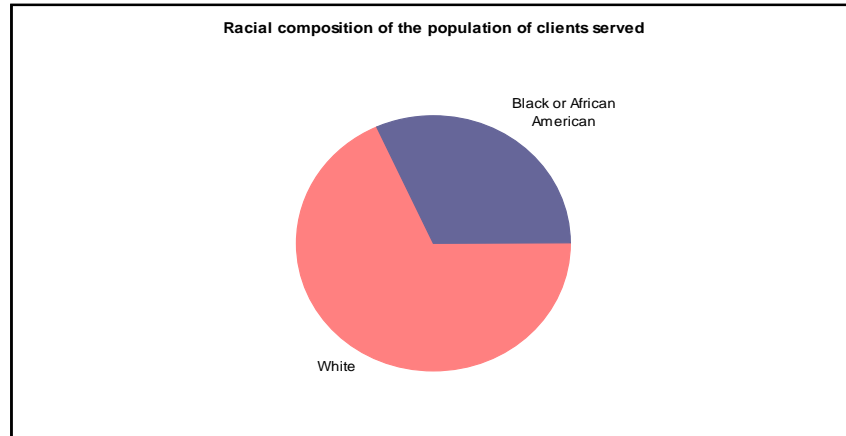
- 15 clients were male, and 3 were female
- 72% were White and 28% were Black or African American
- 3 clients were veterans
- 56% reported having a mental illness, 50% reported abusing drugs and alcohol, and 22% reported having a physical disability. Note: several disability types may be present for each individual, and disability type was unknown for 4 clients
- 50% stayed the prior night in an emergency shelter and 50% stayed the prior night in a place not meant for human habitation
- All 18 clients reported that the length of their current experience with homelessness was long term
- 4 of the chronically homeless guests (22%) were not found in the HMIS database – each of these clients reported staying in a place not meant for human habitation the prior night and learned of the event from a meal site

Of particular interest are the racial differences between the chronically homeless population and the non-chronically homeless population.

Race for all guests served:



Race for Chronically Homeless Guests:



Clients “New” to HMIS:

Separate analysis was done for clients who were newly added to the HMIS database following their participation at the 2010 Project Homeless Connect event.

- 44 new clients were added to the database
- 14 of the guests (32%) were female and 30 of the guests (68%) were male
- Racially, 50% were White and 50% were Black or African American
- Approximately 25% reported sources of cash income including disability payments, and nearly all reported sources of non-cash benefits – with Food Share being the most common non-cash benefit
- 6 of the guests (14%) were veterans
- 4 of the guests (9%) were chronically homeless

<i>Current Living Situation</i>	<i>Number</i>	<i>Percent</i>
Emergency Shelter	3	6%
Place not meant for human habitation	12	27%
Rental Apartment	13	30%
Friends/Family	14	32%
Substance abuse treatment facility	2	5%

Services Information:

Intake staff attempted to capture information about which services the guest wanted to access, and subsequently, keep track of the actual services the guest received. Instead, due to training limitations, information could only be gathered about the services that each guest requested. This provided good information in terms of planning for the 2011 event. An attempt will be made to adhere to the suggestions from both guests and volunteers, and changes will be made to the process to ensure that the services received by guests can be better tracked. Note that each guest could request as many services as he/she desired, so the totals and percentages are higher than the total number of guests served.

<i>Resource Requested</i>	<i>Number</i>	<i>Percent</i>
Clothing Bank	149	83%
Hygiene Bank	149	83%
Job Fair	113	63%
Dental Assessment	103	57%
Resource Fair	85	47%
Haircut	76	42%
Mini Health Care Assessment	70	39%
Badgercare Application	70	39%
Legal Assistance	54	30%
Birth Certificate Assistance	50	28%
Social Security Assistance	48	27%
Food Share Application	43	24%
AODA Assessment and Referral	14	8%
Homestead Tax Applications and Info	14	8%