

The United States Conference of Mayors

HUNGER AND HOMELESSNESS SURVEY

A Status Report on Hunger and Homelessness in America's Cities

A 25-City Survey / December 2014



THE UNITED STATES CONFERENCE OF MAYORS



THE UNITED STATES CONFERENCE OF MAYORS

Kevin Johnson

Mayor of Sacramento
President

Stephanie Rawlings-Blake

Mayor of Baltimore
Vice President

Mick Cornett

Mayor of Oklahoma City
Second Vice President

Helene Schneider

Mayor of Santa Barbara
Co-chair, Task Force on
Hunger and Homelessness

A.C. Wharton, Jr.

Mayor of Memphis
Co-chair, Task Force on
Hunger and Homelessness

Tom Cochran

CEO and Executive Director

The U.S. Conference of Mayors is the official nonpartisan organization of cities with populations of 30,000 or more. There are 1,393 such cities in the country today, each represented in the Conference by its chief elected official, the Mayor.

This report was prepared by City Policy Associates, Washington, D.C. At The U.S. Conference of Mayors, Assistant Director for Community Development and Housing Eugene Lowe provided direction and Gail Thomas provided assistance. This report may be downloaded at The U.S. Conference of Mayors Web site, www.usmayors.org.



Printed on Recycled Paper.

DO YOUR PART! PLEASE RECYCLE!

Contents

- Executive Summary..... 1**
- Introduction.....5**
 - Background..... 5
 - Survey Cities 5
 - Context of the 2013 Survey 6
 - Data and Analysis..... 7
- Hunger 9**
 - Need for Food Assistance..... 10
 - Availability of Food Assistance 10
 - Unmet Need for Emergency Food Assistance..... 11
 - Policies and Practices to Reduce Hunger 12
 - Exemplary Programs to Alleviate Hunger..... 12
 - Outlook for Next Year..... 18
- Homelessness 23**
 - Extent of Homelessness..... 24
 - Homelessness Among Families..... 24
 - Homelessness Among Unaccompanied Individuals..... 25
 - Number of Homeless Persons..... 25
 - Characteristics of Homeless Adults..... 26
 - Emergency Shelter and Other Housing for Homeless Persons 26
 - Unmet Need for Shelter..... 27
 - Homeless Veterans 27
 - Impact of Targeted Funding 28
 - Additional Resources Needed 32
 - Goal of Ending Veteran Homelessness by End of 2015..... 35
 - Exemplary Programs to Alleviate Homelessness Among Veterans..... 36
 - Efforts to Prevent Homelessness Resulting from Foreclosure 41
 - Policies and Practices to Reduce Homelessness..... 42
 - Exemplary Programs to Alleviate Homelessness 42
 - Outlook for Next Year..... 47
- City Profiles 49**
- Appendix A: City Data on Hunger..... 75**
- Appendix B: City Data on Homelessness..... 81**
- Appendix C: City Contacts 89**
- Appendix D: 2013 Hunger and Homelessness Information Questionnaire..... 95**
- Appendix E: List of Past Reports..... 105**

Executive Summary

This report presents the results of a survey of 25 of the cities whose mayors serve on The U.S. Conference of Mayors' Task Force on Hunger and Homelessness. Officials were asked to provide information on the extent and causes of hunger and homelessness in their cities, and the emergency food assistance and homeless services provided, between September 1, 2013 and August 31, 2014. They also were asked for their assessment of the demand for services and the resources available to them in the year ahead. This year's survey found continuing increases in demand for services and continuing shortfalls in meeting service needs. Among its key findings:

Hunger

- Seventy-one percent of the survey cities reported that requests for emergency food assistance increased over the past year. One-fourth of the cities said requests decreased, one city said they remained at the same level as the previous year. Across the survey cities, emergency food assistance requests increased by an average of 7 percent.
- Among those requesting emergency food assistance, 56 percent were persons in families, 38 percent were employed, 20.5 percent were elderly, and 7 percent were homeless.
- Low wages led the list of causes of hunger cited by the survey cities, followed by poverty, unemployment, and high housing costs.
- The cities reported a 9 percent average increase in the number of pounds of food distributed during the past year. Collectively, the survey cities distributed a total of 680 million pounds of food.
- Across the responding cities, budgets for emergency food purchases increased by 5 percent. Collectively, the survey cities' emergency food budget totaled \$624 million.
- Across the survey cities, 27 percent of the demand for emergency food assistance is estimated to have been unmet.
- In 82 percent of the responding cities, the emergency kitchens and food pantries had to reduce the quantity of food persons could receive at each food pantry visit or the amount of food offered per-meal at emergency kitchens. In 77 percent of the cities, they had to reduce the number of times a person or family could visit a food pantry each month. Also in 77 percent of the cities, facilities had to turn away people because of lack of resources.
- Providing more jobs and more affordable housing led the city officials' list of actions needed to reduce hunger, with two-thirds of the cities citing each. They were followed closely by

employment training programs, which was cited by 62.5 percent of the cities. One-third called for increasing SNAP benefits.

- Eighty-four percent of the survey cities expect requests for emergency food assistance to increase over the next year, with 19 cities expecting the increase to be moderate and two expecting it to be substantial. The remaining cities expect requests to continue at about the same level, as none expect to see a decrease in requests.
- Forty-four percent of the cities expect that resources to provide emergency food assistance will decrease over the next year, with 36 percent of the cities expecting that decrease to be moderate and 8 percent expecting it to be substantial. Forty-percent of the cities expect resources to continue at about the same level. Sixteen percent expect resources to increase moderately.

Homelessness

- Over the past year, the total number of homeless persons increased across the survey cities by an average of 1 percent, with 48 percent of the cities reporting an increase, 39 percent reporting a decrease, and 13 percent saying it stayed the same.
- The number of families experiencing homelessness increased across the survey cities by an average of 3 percent, with 43 percent of the cities reporting an increase, 35 percent reporting a decrease, and 22 percent saying the number stayed the same.
- The number of unaccompanied individuals experiencing homelessness over the past year decreased across the survey cities by an average of 0.7 percent, with 35 percent reporting an increase, 39 percent reporting a decrease, and 26 percent saying it stayed the same.
- The survey cities reported that, on average, 28 percent of homeless adults were severely mentally ill, 22 percent were physically disabled, 15 percent were victims of domestic violence, and 3 percent were HIV Positive. Eighteen percent of homeless adults were employed and 13 percent were veterans.
- City officials identified lack of affordable housing as the leading cause of homelessness among families with children. This was followed by unemployment, poverty and low-paying jobs.
- Lack of affordable housing also topped the list of causes of homelessness among unaccompanied individuals. This was followed by unemployment, poverty, mental illness and the lack of needed services, and substance abuse and the lack of needed services.
- Across the cities over the past year, an average of 22 percent of the demand for emergency shelter is estimated to have gone unmet. Because no beds were available, emergency shelters in 73 percent of the survey cities had to turn away homeless families with children. Shelters in 61 percent of the cities had to turn away unaccompanied individuals.

- During the past year, 41 percent of the survey cities adopted policies and/or implemented programs aimed at preventing homelessness among households that have lost, or may lose, their homes to foreclosure. In previous years, 53 percent of the cities had adopted such policies.
- Providing more mainstream assisted housing topped the officials' list of actions needed to reduce homelessness in their cities. Next on the list were providing more permanent supportive housing for people with disabilities and having more or better-paying employment opportunities.
- All but one of the survey cities have been successful in obtaining HUD, VA and other federal funds targeted to homeless veterans. Officials in 91 percent of the cities report their efforts to target homeless veterans with these funds have been successful in reducing the number of veterans in the homeless population. Officials in all but one of the cities say these efforts have been successful in other ways. Nearly all of the cities said more affordable housing was needed to address the current unmet need for services to veterans.
- Sixty-one percent of the cities say their experience suggests that the VA will be able to reach its goal of eliminating veterans' homelessness by the end of 2015.
- Officials in 39 percent of the cities expect the number of homeless families to increase moderately next year. Those in 30 percent expect the number to continue at about the same level, and those in 30 percent also expect it to decrease moderately.
- Officials in 43 percent of the cities expect the number of homeless unaccompanied individuals to decrease moderately next year. Officials in 30 percent expect the number to increase moderately, and those in 26 percent expect it continue at about the same level.
- Officials in 68 percent of the cities believe resources will stay at about the same level over the next year. Officials in 27 percent of the cities expect resources to provide emergency shelter to decrease over the next year, with four cities expecting the decrease to be moderate and two expecting it to be substantial. One city expects resources to increase substantially.

Introduction

Background

Since October 1982, when The U.S. Conference of Mayors and The U.S. Conference of City Human Services Officials first brought the shortage of emergency services – food, shelter, medical care, income assistance, and energy assistance – to national attention through a survey of cities of all sizes across all regions of the country, the Conference of Mayors has continued to report each year on the problems of hunger and homelessness in America’s cities. That first, groundbreaking report described increasing demand for emergency services in cities, and the cities’ inability to meet even half of that demand. Each succeeding report has updated the nation on the severity of the problems and the adequacy of the resources available to respond to them.

In September 1983, to spearhead the Conference of Mayors’ efforts to respond to the emergency services crisis, the President of the Conference appointed 20 mayors to a Task Force on Hunger and Homelessness. That first Task Force, chaired by New Orleans Mayor Ernest "Dutch" Morial, assembled a group of cities that would be the focus of the surveys to be conducted in future years – a group that would constitute the core of the cities that would provide information each year on the magnitude and causes of these problems, the local responses to them, and the national responses that city leaders believed were needed for the problems to be adequately addressed. Currently, the Task Force is co-chaired by Memphis Mayor A.C. Wharton, Jr. and Santa Barbara Mayor Helene Schneider, and its members continue to provide data each year for this annual survey and report.

Survey Cities

The 25 Task Force cities responding to this year’s survey are:

Asheville, NC – Mayor Esther Manheimer
Boston, MA – Mayor Martin Walsh
Charleston, SC – Mayor Joseph P. Riley, Jr.
Charlotte, NC – Mayor Daniel 'Dan' Clodfelter
Chicago, IL – Mayor Rahm Emanuel
Cleveland, OH – Mayor Frank G. Jackson
Dallas, TX – Mayor Mike Rawlings
Denver, CO – Mayor Michael Hancock
Des Moines, IA – Mayor Frank Cownie
Los Angeles, CA – Mayor Eric Garcetti
Louisville, KY – Mayor Greg Fischer
Memphis, TN – Mayor A.C. Wharton, Jr.
Nashville, TN – Mayor Karl Dean

Norfolk, VA – Mayor Paul D. Fraim
Philadelphia, PA – Mayor Michael A. Nutter
Phoenix, AZ – Mayor Greg Stanton
Plano, TX – Mayor Harry LaRosiliere
Providence, RI – Mayor Angel Taveras
Saint Paul, MN – Mayor Chris Coleman
Salt Lake City, UT – Mayor Ralph Becker
San Antonio, TX – Mayor Ivy Taylor
San Francisco, CA – Mayor Edwin M. Lee
Santa Barbara, CA – Mayor Helene Schneider
Trenton, NJ – Mayor Eric E. Jackson
Washington, DC – Mayor Vincent C. Gray

Context for 2014 Survey

During this year's survey period, most economic indicators reflected a healthier national economy. But despite progress on the economic front, and some progress at the local level in containing problems borne of poverty and joblessness, the scope and scale of these problems continued to strain the public and private facilities and services devoted to them.

According to the most recent report on income and poverty published by the U.S. Census Bureau, 2013 saw the first decrease in the nation's poverty rate since 2006. The Bureau's September report, based on the 2014 Current Population Survey's Annual Social and Economic Supplement, put 2013's official poverty rate at 14.5 percent, down from 15 percent the previous year, but still 2 percentage points higher than in 2007, the year before the most recent recession. With 45.3 million people in poverty, 2013 was the third consecutive year in which the number in poverty at the national level was not statistically different from the previous year's estimate.

The poverty rate for children under 18 fell from 21.8 percent in 2012 to 19.9 percent in 2013. The rate for people aged 18 to 64 was 13.6 percent, while the rate for people aged 65 and older was 9.5 percent. Neither of these poverty rates was statistically different from its 2012 estimates. Both the poverty rate and the number in poverty decreased for Hispanics in 2013.

Hispanics were the only group among the major race and ethnic groups to experience a statistically significant drop in their poverty rate and the number of people in poverty. For Hispanics, the poverty rate fell from 25.6 percent in 2012 to 23.5 percent in 2013; the number of Hispanics in poverty fell from 13.6 million to 12.7 million.

Real median household income increased in 2013 for Hispanic households, households maintained by a noncitizen, and households maintained by a householder aged 15 to 24 or aged 65 and older but, for most groups, 2013 income estimates were not statistically different from the previous year's. This is the second consecutive year that the annual change in household income was not statistically significant, following two consecutive years of annual declines in median household income.

The Bureau says that the real median earnings of men (\$50,033) and women (\$39,157) who worked full time, year round in 2013 were not statistically different from their respective 2012 medians, and that neither group has experienced a significant annual increase in median earnings since 2009. It notes, however, that the number of men and women in this category increased by 1.8 million and 1.0 million, respectively, between 2012 and 2013, suggesting that they had shifted from part-year, part-time work to full-time, year-round work.

One of the only major groups to experience higher poverty in 2013 was the group working less than full time, year round. For these workers, the poverty rate increased from 16.6 percent in 2012 to 17.5 percent in 2013. The number of those who worked less than full time, year round, however, fell from 47.1 million in 2012 to 45.4 million in 2013.

In 2013, the poverty threshold for an individual was \$11,490; for a family of four, it was \$23,550. As a measure of depth of poverty in the nation: In 2013, 19.9 million people, or 6.3 percent of all people, lived in families with an income below 50 percent of their poverty threshold; nearly one in five had a family

income below 125 percent of their threshold; one in four had a family income below 150 percent of their poverty threshold; and one in three had a family income below 200 percent of their threshold. Of the nearly 20 million people with a family income below one-half of their poverty threshold, 6.5 million were children under age 18, 12.2 million were aged 18 to 64, and 1.2 million were age 65 and older.

As a measure of the impact of government resources on the financial status of Americans: The Census Bureau calculates that, in 2013, the number of people aged 65 and older in poverty would have increased by 14.7 million if social security payments were excluded from money income. This would more than quadruple the number of elderly people in poverty. Had unemployment insurance benefits been excluded from money income, 1.2 million more people would have been counted as in poverty. Had Supplemental Nutrition Assistance Program benefits been counted as income, almost 3.7 million fewer people would have been categorized as in poverty. Taking account of the value of the federal earned income tax credit would have reduced the number of children categorized as in poverty by 2.9 million.

With relatively slow but steady post-recession economic progress continuing through 2014, the unemployment rate has dropped from last November's 7.0 percent, with 10.9 million workers unemployed, to the current 5.8 percent, with 9.1 million workers unemployed, according to the most recent Department of Labor report. In the last two months alone, 535,000 workers have been added to the employment rolls. Over the last four years, the unemployment rate has dropped 4 percentage points.

Average hourly earnings increased by 2.1 percent over the past year – barely above the rate of inflation – but the 0.37 percent increase from October to November is the largest monthly increase in more than a year and is seen as an encouraging sign by some analysts monitoring the nation's long period of wage stagnation.

At 11.1 percent, Black unemployment continues to run well above White unemployment, now at 4.9 percent, and Hispanic unemployment, now at 6.6 percent. Over the past year, the number of long-term unemployed workers – those unemployed for 27 weeks or more – declined by 1.2 million. Currently, there are 2.8 million long-term unemployed workers, and they account for 30.7 percent of total unemployment. There are currently 6.9 million involuntary part-time workers – those working part time for economic reasons – and 698,000 discouraged workers not currently looking for work because they believe no jobs are available for them. These numbers changed little over the past year.

Data and Analysis

Only cities whose mayors are members of The U.S. Conference of Mayors Task Force on Hunger and Homelessness were invited to submit information for this report. These cities do not constitute a representative sample of U.S. cities, and the data reported reflect only the experience of the cities responding to the survey. This report, therefore, should not be interpreted as a national report on the problems of hunger and homelessness.

The Task Force cities included in the survey vary greatly in size and in their approach to collecting data on hunger and homelessness. Cities were asked to provide information on the data sources they used to answer each question, and any clarifying information that would aid data analysis. Of the cities responding to this year's survey, one did not complete the section on homelessness. In some cases, cities left individual questions on the survey unanswered. In calculating survey results for an individual survey question, counts and percentages are based on the number of cities answering that question.

In addition to individual city profiles of hunger, homelessness, and demographics which follow the survey findings in this report, individual city data from the hunger and the homelessness sections of the survey are provided in Appendices A and B, respectively. A list of contacts available to provide additional information on each city's data and approach to alleviating hunger and homelessness is provided in Appendix C. This year's survey instrument is found in Appendix D to this report. A list of all past reports is found in Appendix E.

Hunger

The U.S. Department of Agriculture's most recent annual assessment of household food security in the United States found that, for 2013, an estimated 14.3 percent of American households, or 17.5 million, were food insecure at least sometime during the year. This means that they did not have access at all times to enough food for an active, healthy life for all household members. Of these, 5.6 percent, or 6.8 million households, fell into the category of very low food security, meaning that the food intake of one or more household members was reduced and their eating patterns were disrupted at times during the year because the household lacked money and other resources for food.

USDA did not find the change in food security overall from the previous year to be statistically significant. The change from 2011, however, when 14.9 percent of households were food insecure, is considered statistically significant. For the very low food insecurity category, the 2013 prevalence rate is little changed from the 5.7 percent of the previous two years.

Children and adults were food insecure at times during 2013 in 9.9 percent of households with children, meaning that 3.8 million households were unable to consistently provide adequate, nutritious food for their children. The prevalence rate in this category is little changed from the previous two years, in which 10 percent of households fell into this category.

Both children and adults experienced instances of very low food security in 0.9 percent of households – 360,000 – in 2013. USDA reports that this is a statistically significant decline from the previous year, in which 1.2 percent of households with children fell into this category.

The typical food-secure household spent 30 percent more on food in 2013 than the typical food-insecure household of the same size and household composition. For households with incomes near or below the federal poverty line, households with children headed by single women or single men, and Black- and Hispanic-headed households, rates of food insecurity were substantially higher than the national average. During the month prior to USDA's 2013 survey, 62 percent of all food-insecure households participated in one or more of the three largest federal food and nutrition assistance programs: the Supplemental Nutrition Assistance Program, National School Lunch Program, and Special Supplemental Nutrition Program for Women, Infants and Children.

USDA's report, *Household Food Security in the United States in 2013*, was published in September.

The Food Research and Action Center in Washington, D.C., a national nonprofit organization monitoring public policies on hunger and undernutrition, cites USDA and U.S. Bureau of Labor Statistics data in reporting that about one in seven people in the U.S. received benefits and about one in eight were unemployed or underemployed in August of this year. FRAC says the economic improvements are expected to slow SNAP participation, but economic hardship and need for food assistance remain relatively high. Despite growth in SNAP caseloads since the recession, FRAC reports, about one in five people eligible for the program are not served.

This section provides information on persons receiving emergency food assistance and the availability of that assistance among the Task Force survey cities between September 1, 2013 and August 31, 2014. It also includes brief descriptions of exemplary programs or efforts underway in the cities that prevent or

respond to the problems of hunger, and provides information on the survey cities' outlook on hunger in the coming year.

Need for Food Assistance

Seventy-one percent (17) of the survey cities reported that the number of requests for emergency food assistance increased over the past year, with Plano saying they remained the same, and one-fourth of the cities – Boston, Dallas, Los Angeles, Providence, San Antonio, and San Francisco – saying they decreased. Across the cities, the overall number of requests for food assistance increased by an average of 7 percent. The rate of increase ranged from 56 percent in Washington, DC, 20 percent in both Des Moines and Philadelphia, 12.5 percent in Charlotte, 11.3 percent in Phoenix, and 10 percent in Denver, to 5 percent in Louisville, 3 percent in Norfolk, and 2 percent in Charleston. The rate of decrease ranged from 18 percent in San Antonio and 7 percent in Providence, to 1.3 percent in Boston.

Among those requesting emergency food assistance, 56 percent were persons in families, 38 percent were employed, 20.5 percent were elderly, and 7 percent were homeless. (These categories are not mutually exclusive and the same person can be included in more than one.)

All but one (95 percent) of the cities reported an increase in the number of persons requesting food assistance for the first time. Among these, 70 percent (16 cities) characterized the increase in first-time requests as moderate and 30 percent (seven cities) saw it as substantial.

Increased requests for food assistance were accompanied by more frequent visits to food pantries and emergency kitchens. Seventy-eight percent (18) of the cities reported an increase in the frequency of visits to food pantries and/or emergency kitchens each month. Among these, 68 percent (13) characterized the increase in frequency as moderate and 32 percent (six) said it was substantial.

When asked to identify the three main causes of hunger in their cities, low wages was cited most frequently (by two-thirds, or 17 of the cities); this was followed by poverty (by 67 percent, or 16), unemployment (by 62.5 percent, or 15), and high housing costs (by half, or 12 of the cities). One-fourth (six) of the cities cited medical or health costs. Two cities cited lack of SNAP benefits. Cited by one city each were inadequate benefits (e.g., TANF, SSI, etc.), substance abuse, and utility costs.

Availability of Food Assistance

The survey cities reported a 9 percent average increase in the pounds of food distributed. Eighty-four percent (21) of the cities saw an increase, 16 percent (four) saw a decrease, and none said it remained the same. Collectively, in the survey cities, 680 million pounds of food were distributed over the past year.

Sixty percent (15) of the cities reported that their total budget for emergency food purchases increased over the past year, 12 percent (three cities) said it remained the same, and 28 percent (seven cities) said it decreased. Across the responding cities, the budget for emergency food purchases increased by 5 percent. Collectively, in the survey cities, the year's total emergency food budget was \$624 million.

Donations from grocery chains and other food suppliers accounted for just over half (52 percent) of the food distributed. This source was followed by purchased food, which accounted for 20 percent, and federal

emergency food assistance, which accounted for 16 percent. Donations from individuals and those from other sources each accounted for 6 percent.

Over half (52 percent, or 13) of the cities reported that they had made at least some significant changes in the type of food purchased. These changes generally involved the purchase of fresher, healthier, more nutritious foods, particularly fresh produce and foods high in protein and low in fat, sodium, and sugar. Among the changes cities have made:

In **Cleveland**, officials are now rating food by nutritional value and only purchasing foods with high ratings.

In **Des Moines**, officials have continued to increase the amount of fresh produce as a percentage of overall food distribution. Amounts were up from 15 percent last year to approximately 20 percent this year.

In **Saint Paul**, Second Harvest Heartland continues to distribute more fresh produce through its Retail Food Rescue, which rescues less than perfect but still perfectly edible and nutritious produce, meat, bakery, and dairy and deli items, and its program to capture more agricultural surplus in Minnesota.

In **Washington, DC**, a core menu was developed to guarantee the availability of staple, nutritious foods.

In contrast, **San Francisco** officials report that, due to budgetary reasons, they have had to make cuts to “menu offerings” by lowering the frequency of purchased protein items, which tend to be the most expensive items purchased. And **Trenton** officials report that they cannot provide healthy and nutritious foods due to increase in food cost and demand.

Unmet Need for Emergency Food Assistance

Over the past year, in more than four in five (82 percent, or 18) of the survey cities, emergency kitchens and/or food pantries had to reduce the quantity of food persons can receive at each food pantry visit and/or the amount of food offered per-meal at emergency kitchens. In 77 percent (17) of the survey cities, these facilities had to reduce the number of times a person or family can visit a food pantry each month. Also, in 77 percent of the cities, these facilities had to turn people away because of lack of resources.

Officials in 13 of the survey cities were able to estimate the overall demand for food assistance that went unmet during the past year; they reported that an average of 27 percent of the need went unmet. The following table shows these cities’ estimates of unmet demand for emergency food assistance:

City	Percent Unmet Need
Charlotte	10
Denver	15
Des Moines	30
Memphis	46
Norfolk	30
Philadelphia	20
Phoenix	20
Salt Lake City	27
San Antonio	38

City	Percent Unmet Need
San Francisco	37
Santa Barbara	30
Trenton	20
Washington, DC	30

Policies and Practices to Reduce Hunger

Providing more jobs and more affordable housing led the city officials' list of actions needed to reduce hunger, with two-thirds (16) of the cities calling for both. They were followed closely by employment training programs, which was cited by 62.5 percent (15) of the cities. One-third (eight) of the cities called for increasing SNAP benefits; just over one-fifth (five cities) called for substance abuse/mental health services; 17 percent (four) called for lower gas prices and/or better public transportation. In an open-ended question, four cities also called for higher wages.

Among other approaches which the cities identified: In addition to calling for a higher minimum wage, since it would allow clients to put more of their monthly budget toward their grocery expenses, **Salt Lake City** officials cited the need for more jobs with benefits, including paid sick days. **San Francisco** officials called for increasing Food Stamp benefits, increasing federal nutrition program income eligibility thresholds and aid payments to reflect regional cost of living, expanding rather than shrinking state and national income and food assistance programs, and expanding unemployment benefits.

Exemplary Programs that Respond to Hunger

Nineteen of the survey cities provided descriptions of initiatives they believe have been effective in alleviating hunger problems in their city or region. This year, many of the cities describe their efforts to provide nutritious food, including fresh produce, to both students and their families through their schools, often combining backpack programs with access to school-based food pantries for the families. Many others describe mobile food pantry programs and mobile farmer's markets in both neighborhoods and schools, often including SNAP outreach and other services. And other cities are focusing now on holistic approaches to health and nutrition, bringing service agencies together in citywide collaborative programs, and providing guides to help residents find the food assistance available to them throughout the city.

Boston: Nearly 80 percent of Boston Public School (BPS) students come from households that qualify for food assistance, so it is a priority for the City to ensure that students not only have good, fresh and healthy food available to them in the school environment, but just as importantly, that the environment the school creates around school food is safe, culturally relevant, and stigma-free. During the 2013-2014 academic year, BPS was proud to pilot the Community Eligibility Option (CEO), which provided free meals and snacks to all of Boston's 55,000-plus students, regardless of income, without requiring parents to fill out forms requesting assistance and, most importantly, without categorizing and stigmatizing students who need assistance and qualify for free or reduced meals. The CEO covered all school meals, including breakfast, lunch, morning and afternoon snacks or, for those students at after-school programs that had a dinner component (99 out of 129 schools), dinner instead of a snack. BPS saw student participation increase upwards of 11 percent. In 2014, Mayor Walsh and the school administration committed to taking school food to the next level and launched a BPS School Food Advisory Committee to engage students,

parents, chefs, and other school food advocates around ensuring that the food created for students is food that they'll eat.

Charleston: In 2014, the Lowcountry Food Bank (LCFB) piloted a highly successful farmers' market-style mobile distribution, known as Fresh for All, which provides approximately 40 pounds of food assistance to families, consisting primarily of fresh produce supplemented by select dry products. Since February 2014, the LCFB has conducted 28 distributions throughout the 10-county service area, including the City of Charleston. The distributions have provided a total of 5,796 families with 271,049 pounds of fresh produce. The Fresh for All distributions combat the lack of access that many food-insecure and low-income individuals have to healthy foods such as fresh produce. At each Fresh for All, up to 250 families (an estimated 700 individuals) are able to select approximately 40 pounds of fresh produce and other healthy foods. Produce comprises at least 80 percent of the food distributed.

The LCFB works with partner agencies to identify high-need areas to conduct each Fresh for All distribution. Due to the high need in the areas chosen, the Fresh for Alls are open to the community. The distributions allow the LCFB to provide much-needed nutritious food to families, in addition to other services such as SNAP outreach and nutrition education. The LCFB provides information and application assistance for eligible families to receive SNAP benefits which can reduce a family's food insecurity and help them consistently buy nutritious food. Because poor nutrition also results from a lack of education regarding healthy eating and how to prepare produce, the LCFB offers food samplings and recipes at each Fresh for All. And because clients may be unsure how to prepare and preserve some types of produce, the LCFB offers materials for the families to take home, such as recipes and informational flyers. Samples are also provided to introduce the families to produce they may not be familiar with or know how to prepare – butternut squash, for example.

Charlotte: Second Harvest Food Bank of Metrolina's (SHFBM) efforts in Mecklenburg County have evolved to be an effective weapon in the fight against child hunger in the area. SHFBM supports 26 Backpack Program sites across the County serving approximately 1,500 at-risk children. The Program provides backpacks of nutritious low-salt, low-sugar, low-fat foods to children in need to take home on weekends and holidays when school meals are not available to them. The children served by the Backpack Program qualify for participation in the free/reduced lunch program. Over the past several years, SHFBM has been able to work with approximately 10 high-poverty CMS elementary schools, supporting effective backpack programs to add a mobile school pantry component. Once each month of the school year, SHFBM loads a truck with 7,000-10,000 pounds of food and household items, arrives at a high-poverty school around 4:00 p.m., and sets up for a food distribution to families whose children qualify for participation in the free/reduced lunch program. Each family will receive 35-40 pounds of food; these include canned and dry food staple items such as pasta, rice, macaroni and cheese, soup, fruit, vegetables, ravioli, chicken, tuna, and beef stew. Fresh bread, eggs, produce, meat, poultry, and seafood also are included. Pantries serve an average of 200 families at each event. The combination of backpacks and mobile school pantries results in the distribution of 45,000-50,000 pounds of nutritious food to 1,500 children at risk of hunger in Mecklenburg County each month.

Chicago: The City of Chicago has continued to pursue innovative approaches to increase the amount of fresh food distributed to those in need of emergency food assistance. With this intention, the City has extended support to the Chicago Farmer's Market - Fresh Food Access and Affordability Market Program, which includes a SNAP matching coupon component. The Chicago Farmer's - Double Value Coupon

component increases the purchasing resources of SNAP program recipients by providing matching coupons redeemable only for eligible food products. This program increases the availability and affordability of healthy, sustainably-grown food for Chicago SNAP Program recipients and for underserved communities. Correspondingly, this program increases the household spending capacity of the associated clients.

Cleveland: In the last three years, Cleveland's Food Bank made a significant effort to increase access to SNAP by growing the outreach program each year to a current staff of 15 and adding a Help Center to help sign people up for SNAP over the phone. Outreach workers go to pantry programs, hot meal programs, libraries, bus stations and community centers to find people in need. They put up tents in lots in low-income neighborhoods. This year, the Food Bank received a grant for a food truck, outfitted to take applications, which can be taken to neighborhoods in all kinds of weather. With the truck, the Food Bank distributes fresh produce and signs people up for SNAP and other benefits. Last year, the Food Bank submitted 9,825 applications; this year, it submitted 12,494 applications, providing 11.6 million meals.

Dallas: The Dallas Information Exchange Portal (IEP) – iep.pccipieces.org - is one of the most exciting and ambitious efforts currently underway in the nonprofit service community in North Texas. As it is developed over the next few years, the IEP will support better health for vulnerable communities by enabling data sharing and collaboration among human service organizations, including food assistance programs, and Parkland Hospital, the primary charitable health system in Dallas. For individuals who opt to share their data, all of their service providers – e.g., from the hospital to the food pantry to the transitional housing program – can be aware of their unique health needs and the services that they are receiving. The IEP will provide common, user-friendly case management software and a secure and seamless portal for sharing information among networked agencies and between agencies and the hospital system. A primary goal is to integrate a broader range of service providers into a preventive care system that will help improve health outcomes and save lives. It will also help establish a common language among providers, facilitate cross-referrals, track clients' progress against a range of goals, and provide umbrella organizations with system-wide data that can guide future planning.

Examples of how the IEP might be used by food assistance providers include: checking in with food pantry clients about their prescriptions; making sure that they understand and follow the instructions for taking them; helping them overcome barriers to filling prescriptions; providing relevant information about managing specific diet-related conditions, like diabetes or high blood pressure; providing food that is appropriate for specific conditions, for example, low carb for diabetes or low salt for high blood pressure; avoiding providing a client with food that interacts negatively with their prescriptions; offering basic health screening, such as blood pressure monitoring, and sharing that information with the hospital; and alerting clients to potential health risks specific to them. The IEP may be the only project of its kind in the U.S. It is led by the Parkland Center for Clinical Innovation and is funded by the W.W. Caruth, Jr. Foundation at Communities Foundation of Texas. An initial cohort of direct service providers is piloting the system in 2015.

Denver: Denver Human Services (DHS) began a SNAP Into Health Initiative two years ago that has built a wide range of community partners to bring increased access to public assistance programs, healthcare, financial literacy, and nutrition to communities that need it most. DHS is providing a holistic approach to serving the communities' needs, including healthy living, health coverage, and financial self-sufficiency. The main goals of the program are to increase enrollment of those eligible for food, medical, and cash

assistance programs (such as Supplemental Nutrition Assistance Program, Medicare, and Medical Assistance); expedite the public assistance application process; provide education regarding access to healthy food, healthcare, and assistance programs; and provide additional resources to link clients to tools that promote long term self-sufficiency. In order to attain these goals, DHS has expanded its mobile unit with Hunger Free Colorado to bring application assistance into the communities; continued navigator trainings for members of the community to assist others with assistance program applications; maintained ongoing partnerships with the community to provide information and services related to healthy living; increased the availability of healthy foods (such as farm booths in food desert areas); offered free nutrition education, financial coaching, access to healthy food, and other community services; and strategically placed five kiosks throughout the community to increase enrollment and accessibility to apply for eligibility programs.

Through this initiative, DHS has joined in the battle to end hunger within the Denver community by providing a holistic approach through innovative outreach efforts. Denver's Office of Children's Affairs has also offered after-school and summer programs that provide meal sites. In addition, the MY DENVER program provides free access to recreation centers that promote healthy and active living. The majority of these sites serve low-income children that qualify for free or reduced lunch. In 2013, these programs served over 131,000 meals to Denver children. Due to the success of Denver's meal sponsorship program, the City received a grant to mentor two other metro area cities in starting and expanding their after-school and summer meals programs.

Los Angeles: Children learn better when their stomachs are full and the City's children's programs provide resources to the critically underserved population of food insecure children. One in four children in Los Angeles County are food insecure and the Los Angeles Regional Food Bank serves 150,000 unduplicated children every year in partnership with its agency network. In addition, the Food Bank's healthy after-school meal program serves nearly 2,500 children per day at 39 sites during the school year; when school is not in session, the Food Bank expands its program to provide lunch to more than 7,000 children daily (on average) at a total of 110 sites. Its Back Pack program serves 2,600 children at 13 sites weekly, providing a bag of fresh produce and enough food for six meals. The Food Bank also delivers 600 bags of produce to one school site on a bimonthly basis.

Louisville: In the Summer of 2014, Dare to Care Food Bank partnered with Louisville Metro Government to expand meal service for children to several Metro Parks community centers in challenged neighborhoods. In this partnership, Dare to Care's Community Kitchen provided nutritious, balanced, prepared meals for youth congregating at these sites. This partnership doubled the number of dinners the Community Kitchen was providing, exceeding 2,000 dinners each day. Breakfast and lunch were also provided to these sites. This partnership has continued beyond the summer and continues to extend Dare to Care's reach to children living with food hardship and insecurity.

Nashville: The School Food Pantry program is designed to increase food access for families in need and has a permanent residence within a school. Fourteen sites were operated during FY 13/14 providing over 104,000 pounds of food for families in need. This school year, we are operating 17 school pantries in Metro Davidson schools. Our objective is to place at least one in each cluster and to ensure they are housed as often as possible in a Community Achieves! school or one that offices the Cluster Support Team in order to reach the greatest number of food insecure children and their families.

Philadelphia: The Philadelphia Food Policy Advisory Council (FPAC) is creating neighborhood-specific Food Resource Guides that will include information on where to access food resources such as food cupboards, farmer's markets, SHARE Food Program host sites, after-school programs, feeding sites for seniors, summer food programs, and others. These guides will be distributed to the public via community-based service organizations, libraries, churches, and City Council offices. The guides will also be available online. FPAC is also working with soup kitchens to provide healthy food options and trainings that ranges from CPR to food safety. In the past year, Philadelphia has become more collaborative in its efforts to reduce hunger and provide healthier options to people needing assistance from food cupboards and soup kitchens. A wide range of community stakeholders is involved in these efforts, including local government agencies, corporations, television stations, emergency food providers, universities, community-based organizations, and individuals. FPAC is hopeful that this collaborative partnership will have a positive impact on reducing hunger in Philadelphia.

Phoenix: Kids' backpack programs – after-school, weekend, or for homeless children – continue to play an important role in addressing childhood hunger. In late October, the Valley of the Sun United Way, in conjunction with partners such as Arizona State University, drew attention to these programs and the issue of child hunger by attempting to beat the Guinness Book of World Records record for most Weekend Hunger Backpacks assembled. An estimated 2,000 volunteers, many of them ASU students, assembled the backpacks in just a few short minutes in hopes of breaking the record. The backpacks themselves go to Phoenix-area children struggling with weekend hunger.

Providence: The City of Providence received a CHAMPS grant from the National League of Cities to increase participation in summer meals and afterschool meals for kids. At the same time, the Food Bank received a grant from Our Family Foundation to work with the City on boosting participation at summer meal sites. The Food Bank formed a Summer Meals Advisory Committee that includes the City of Providence, USDA, the Rhode Island Department of Education, United Way 2-1-1, and Stop and Shop. This past year, the result was a 23 percent increase in participation in the program statewide.

Salt Lake City: The Utah Food Bank is using mobile pantries and mobile school pantries to provide healthy and fresh foods to clients living in pockets of poverty throughout Salt Lake City. Although there are brick-and-mortar food pantries throughout the City, many clients are unable to receive assistance from them due to their business hours or lack of transportation. By bringing a mobile food pantry into a low-income neighborhood, clients are able to receive three to five days' worth of food, with many of the items being fresh produce or culturally sensitive foods. Recently, the Food Bank has started prioritizing Mobile School Pantries and is in the process of starting them at schools in Salt Lake City in which 75-100 percent of the students are eligible for free or reduced-cost lunch. Currently, this program is operating at 14 schools, and a majority of the students attending these schools are eligible for this benefit. By providing a mobile pantry at the school, both students and their families can receive assistance. This program makes the school a center of the neighborhood and brings the community closer. Because these two programs try to be culturally sensitive with the food items distributed (based on the neighborhood demographics), impact on the individuals and households receiving assistance is greater.

San Antonio: The San Antonio Food Bank has instituted a Farm Fresh Friday program in which fresh produce is distributed to school age children on Fridays to take home for the weekend. The program works with the Boys and Girls Club of San Antonio in low-income areas to provide a 10- to 15-pound bag of produce. Currently, more than 500 bags are distributed weekly. This is considered a great way to help

families eat more nutritious meals while exposing children to produce they may not have encountered before, and to develop a culture of healthy eating.

San Francisco: Spanning almost every neighborhood across the City, the SF-Marin Food Bank Pantry Program is an extensive and innovative network of 200 weekly grocery pantries that help feed 30,000 households weekly in San Francisco. Through partnerships with community-based organizations such as non-profits, schools, and churches, the Food Bank distributed over 30 million pounds of food through its pantry network last year. Over 70 percent of the food is fresh produce, arranged farmer's market-style every week at participating community-based organizations; some are open to the public and some target specific populations. The Food Bank also trains CBOs to provide nutrition education and SNAP outreach/application assistance for these vulnerable populations. The SF-Marin Food Bank distributes significantly more food per person in poverty annually than any food bank in the country – almost 400 pounds per person. The national average for food banks is less than 100 pounds. The Food Bank was recently recognized nationally for its innovative pantries in low-income public schools, where busy families can access healthy foods while picking up or dropping off their children.

The Food Bank continues to expand its special pantry menu for distributions held in Single Room Occupancy (SRO) residences, which house the formerly homeless, including food that is easily prepared without full access to cooking facilities. It also operates several other innovative programs, including the successful Morning Snack Program, through which it offers healthy fresh produce and shelf-stable snacks to low-income schools to bridge the challenging gap between breakfast and lunch. It also operates a critical home-delivered grocery program for low-income homebound older adults. This program is the first of its kind in the City, closing a crucial gap: homebound seniors who cannot qualify for home delivered meals but who also cannot stand in line to get food at a food pantry. In collaboration with the local SNAP office, the Food Bank performs SNAP outreach to help increase SNAP usage in San Francisco in innovative ways, such as “SNAP in a Day” events where eligible participants can be issued their EBT card the same day they apply.

Washington, DC: The Capital Area Food Bank's Family Market program partners the food bank with high-needs elementary, middle, and high schools and adult education programs to distribute nutritious groceries to students and families in safe and fun environments. Monthly distributions take place in schools and combine high quality food with nutrition education. At least 50 percent of the food distributed at each Family Market is fresh produce. Healthy food is often paired with cooking demonstrations, recipe sampling, and nutritional information relevant to families of school-aged children. Families leave the monthly distributions with an average of 30 pounds of groceries to supplement and stretch food resources available to them. Schools are selected for this program in part due to location, and schools located in high-poverty food deserts are preferred locations. Many schools are located in areas where large-scale grocery stores are not easily accessible, making it a challenge for families to buy fresh fruits and vegetables.

To date, the Family Market program has distributed 1.3 million pounds of healthy groceries to local families and is able to serve just over 2,000 families each month. Participating schools are charged to create welcoming environments for distributions and to encourage families to take part. Many schools have used the Family Market program to boost parent involvement in school activities. Schools will often schedule parent-teacher meetings to precede the markets and have found this an effective way to increase attendance. Through the Family Market program, schools have additional resources to encourage parent

involvement, and families and parents are given additional resources to improve the health and wellbeing of their households.

Other Cities: Two additional cities provided brief descriptions of food bank initiatives. **Norfolk** described the Foodbank of Southeastern Virginia's effort to engage the entire region in their effort to acquire food resources, including creative ways to engage the region in providing food and funding, and tapping businesses to help meet their goals. The Foodbank addresses the needs of urban school-aged children, rural communities, senior citizens, and households throughout an extremely large service area. In **Trenton**, the Food Bank and its member agencies and other partner nonprofits are working together to address hunger by channeling more fresh produce into their food distribution, providing training and assistance with SNAP, and distributing weekend meals to children who qualify for food assistance.

Outlook for Next Year

Based on current projections of economic conditions and unemployment for their cities, officials in 84 percent of the survey cities expect requests for emergency food assistance to increase over the next year. Seventy-six percent (19) of the cities expect that increase to be moderate, and 8 percent (two) expect it to be substantial. Dallas, Los Angeles, Providence, and Saint Paul expect requests to remain at the same level. No city expects requests for emergency food assistance to decrease over the next year.

Based on the current state of public and private agency budgets, 44 percent (11) of the cities expect resources to provide emergency food assistance will decrease over the next year, with 36 percent (9) expecting resources to decrease moderately and eight percent (two) expecting them to decrease substantially. Forty percent (10) of the cities expect these resources to continue at about the same level. Asheville, Boston, Louisville, and Nashville expect a moderate increase; no city expects a substantial increase.

The cities were asked to identify what they expect will be the biggest challenge to addressing hunger in their area in the coming year. Among challenges most frequently cited were the inability of food assistance facilities to keep up with growing need due to cuts in SNAP and other benefit programs, low wages, unemployment and underemployment. Also mentioned were cutbacks in funding to food assistance programs themselves. Finally, some cities expressed concern about the lack of availability of healthy, nutritious food, and about their inability to store perishable items when they can get them.

Among the challenges cited:

- In **Boston**, food access, since much of the pantry system is still being run and managed by volunteers, creating limited accessibility and an environment in which food-insecure constituents need to seek multiple sources to supplement;
- In **Charlotte**, increased need, increased food costs, increasing nutritional quality of food provided, and potential decrease in government commodities;
- In **Denver**, having the equipment, staff and logistical ability needed to receive/distribute more perishable items, especially produce;
- In **Louisville**, continuing to procure more food and the type of food that improves public health;
- In **Memphis**, securing funds to purchase the food needed to meet the need;
- In **Norfolk**, ability to obtain enough food to meet the growing demand;

- In **Philadelphia**, not having enough resources (money and donations) to meet the ever-increasing demand for food assistance;
- In **Plano**, keeping resources increasing with demand;
- In **San Antonio**, continuing to meet the needs of food-insecure individuals and families while ensuring that they receive good, nutritious food.
- In **Santa Barbara**, sourcing healthy, sustainable food that is accessible and easy to store.
- In **Trenton**, with increasing demand and lower capacity to buy healthy foods, and with cuts to SNAP, increased pressure on food banks to meet the needs alone.

Other cities described the following challenges:

Asheville: Despite our partner's admirable efforts to keep up with the need, the gap continues to grow. Decreased federal and state funding for SNAP and Medicaid, the lack of jobs, and inadequate pay all contribute to the ever-increasing meal gap.

Charleston: One of the biggest challenges that the Lowcountry Food Bank (LCFB) will face in the coming year will be ensuring that food-insecure and low-income individuals in the City of Charleston have consistent access to the nutrients that they need to thrive. The LCFB recognizes the connection between food insecurity and poor nutrition among low-income families. The cost to purchase healthy groceries is the biggest barrier that low-income families report having in regards to making nutritious meals at home. According to Feeding America's Hunger in America 2014 study, over 50 percent of the clients that the LCFB serve live in households with an annual income of \$10,000 or less. Therefore, many of the families that the LCFB serves cannot afford to purchase healthy foods such as fresh fruits and vegetables and lean meats, which are often more expensive than highly-processed products. The lack of healthy foods, especially fresh produce, can result in malnutrition with health risks including heart disease, depression, high blood pressure, anemia, tooth decay, and diabetes.

Chicago: One of the greatest challenges to addressing hunger in Chicago will be maintaining and/or increasing the resources necessary to meet the increased demand for emergency food. In addition, reaching special target populations (such as veterans, older adults and children) will be a challenge.

Cleveland: People receiving SNAP benefits are still reeling from the benefit cut last fall, leaving them with fewer food dollars. More people are having to choose between food and medical costs and medicine than ever before, according to our recent hunger study. This is of particular concern for an aging population with inadequate savings that may be struggling to pay for several prescriptions.

Dallas: Obtaining an adequate supply and variety of healthy foods is always a challenge. Food assistance providers are becoming more aware of the complex health challenges faced by those we serve. We are particularly concerned about the very high rates of diet-related conditions like diabetes and hypertension. Given that the U.S. food supply provides an overabundance of products that can cause or aggravate these conditions, our challenge is to ensure that everyone has reasonable access to foods that will help prevent or manage them.

Des Moines: 1) Cuts to Supplemental Nutrition Assistance Program (SNAP) implemented in November 2013, combined with other economic factors, have resulted in double-digit percentage increases in food pantry requests nearly every month since. This unprecedented need has severely strained resources within

the local emergency food system. 2) Other cuts to federal, state and city budgets that result in reduced public benefits assistance and increased need. While the DMARC food pantry network receives <2 percent of revenues from public sources, cuts to other publicly-funded human service programs result in higher and more frequent usage of the local emergency food system. This in turn increases costs and stretches limited and finite resources to respond to the growing need. Additionally, ongoing workforce cutbacks by major employers are resulting in more people needing emergency food assistance. 3) Convincingly conveying to funders, community leaders, and policymakers the need for meaningful and funded policy change that provides a community-wide and systemic approach to addressing hunger in central Iowa.

Los Angeles: Employment at a living wage is the best anti-hunger/anti-poverty program there is, but stagnant wages and rising costs continue. A recent study found that rents in L.A. County reached an average of \$1,716, an almost 4 percent increase over the previous year, and nearly half of L.A. County renters are spending more than 30 percent of their income on rent, which is considered "rent-burdened." L.A. has the highest median rent burden in the nation, which means that low-income families have less to spend on food. In addition, USDA commodities through the TEFAP program again decreased over the past year, and unless USDA makes more purchases, may fall even further. Furthermore, cuts to the CalFresh/SNAP program (formerly called Food Stamps) earlier this year will have an ongoing impact, as more people who relied on this government assistance program are now joining lines at our partner pantries and kitchens. Finally, we are concerned that cutbacks by Congress to these critical programs are a harbinger of future cuts, specifically to child nutrition programs that come up for reauthorization next year. Our primary challenges are sourcing the food and funding to replace these commodities and assistance provided by these programs and meeting the growing need in Los Angeles County.

Nashville: With many people still unemployed or underemployed, and with the 5 percent increase in the Davidson County poverty population (2012 Census Data), we expect to see a continued rise in demand for food. This increase in need, coupled with our need for more refrigerated space in Second Harvest's local facility to bring in more healthy produce, as well as capacity of our current fleet to pick up and distribute food, is currently our biggest challenge in addressing hunger in our community.

Phoenix: Maintaining funding for the Arizona State budget line item for food banking and hunger, as the State faces yet more budget deficits. TEFAP and SNAP (Food Stamp) funding appear safe for now via a continuing budget resolution (CR), but that, too, could change as more debate around the federal budget heats up in 2015.

Providence: The biggest challenge remains having the ability to acquire enough food. Our distribution network of pantries and soup kitchens would be able to utilize more food if we were able to acquire it. Increased food costs and cuts to programs at the agency level (TEFAP and ESFP) have a big impact on the amount of food the network is able to acquire.

Saint Paul: Although the economic climate is improving, many Minnesota families are still struggling. Minnesotans working in low-wage jobs continue to have less financial power to secure adequate healthy food options. Consequently, many Minnesota families with children, senior citizens, and young veterans remain vulnerable to food insecurity.

Salt Lake City: Although the economy is said to be in recovery, our clients have not seen a change in their pay or cost of living. The Utah Food Bank is constantly looking for the most cost-efficient and effective ways to bring healthy food assistance to all Salt Lake City residents. The cost of maintaining and expanding our transportation fleet is our biggest challenge in addressing hunger. Without a healthy fleet of vehicles, we are unable to transport food to the areas of the City in need. It also affects what types of food we are able to distribute to clients. We work with regional and national food donors to bring healthy foods at low cost into the City.

San Francisco: The biggest challenge will be sustaining food distributions in response to the huge continued, growing demand for food assistance in San Francisco at the same time as funding for safety net programs softens. Since the recession is perceived to be over, many foundations are no longer focused on funding crucial safety net programs such as the Food Bank. This was seen in a significant drop in funding from foundations to the Food Bank last fiscal year.

Compounding this, San Francisco County stopped receiving the direct allocation of federal Emergency Food and Shelter Program funds from FEMA that has been a regular and critical source of support for emergency food assistance and shelter programs over the years. As a result of all of these funding shortfalls, the Food Bank has had to make cuts to the menu of products sent out to the more than 30,000 households served weekly through the pantry network, namely, in much-needed protein items that we were purchasing.

Since the beginning of the recession, the San Francisco-Marín Food Bank has more than doubled the number of cumulative households served annually through its network of 200 weekly community food pantries, stretching the pantry network to unsustainable levels. Meanwhile, requests for food assistance continue to increase as San Francisco residents wrestle with the aftereffects of a tumultuous economy. The rising cost of food, and cost of living in general, paired with cuts to public food assistance, and donor and partner fatigue, jeopardize the sustainability of the Food Bank's response to hunger.

Rising costs of living not only impact our participants: The Food Bank has had a number of community partners close their doors and their food programming for lack of sufficient funding to keep up with rising rents. This further burdens the network of other community partners that is already stretched beyond capacity. In a measure to address the sustainability issue for the Food Bank and the pantry network, the Food Bank has started implementing a citywide Pantry Enrollment System (PES), which limits households to attending one pantry per week. It allows participating pantries to reduce and better manage caseload, allows new households to access previously full pantries, and provides more food to the average household served. Since implementing PES, participating pantries have seen a 35 percent increase in new clients accessing Food Bank services. However, due to high demand, we are now at capacity at many of our food pantry sites due to this increase of new participants, and waiting lists exist for numerous pantries throughout the City.

Washington, DC: Our biggest challenge will be to address health needs as we provide food across greater Washington. There is a powerful connection between food and health. Food assistance partners and clients face income constraints that greatly impact health outcomes. As a result, the Washington metro area is seeing growing numbers of low-income individuals suffering from diet-related illnesses such as diabetes and hypertension.

Homelessness

Local planning organizations, or Continuums of Care, in 3,000 cities and counties across the nation conduct one-night counts of their sheltered and unsheltered homeless populations, which are reported to the U.S. Department of Housing and Urban Development each year. Based on this Point-in-Time estimate of persons homeless on a single night in January 2014, HUD reports that 578,424 people were homeless in the United States. Of these, 63 percent (or 362,163 people) were individuals and 37 percent (or 216,261 people) were in homeless families. The 194,302 homeless children and youth in this year's count represent about one-third of all homeless people. Among all homeless children and youth, 76 percent (or 149,097) were part of a homeless family.

Of the homeless individuals, 209,148 were staying in emergency shelters or transitional housing programs and 153,015 were unsheltered. Of those in families, most (191,903) were sheltered, but 24,358 were found in unsheltered locations such as under bridges, in cars, or in abandoned buildings. Two-thirds of the homeless people were over the age of 24, nearly one-quarter were under age 18, and the remaining 10 percent were between 18 and 24 years of age.

Compared to a year earlier, homelessness among individuals on a single night declined by 2 percent, or 7,408 fewer people. The overall decline was driven by 13,429 fewer individuals homeless in unsheltered locations – an 8 percent drop. The number of individuals staying in emergency shelters or transitional housing programs increased by 6,021 people – about 3 percent. The largest declines were among individuals over the age of 24. There were 2 percent fewer homeless individuals over age 24 overall, and 9 percent fewer unsheltered individuals. The number of sheltered individuals over age 24 increased by 3 percent.

About 11 percent of the homeless adults counted in January were veterans. The 49,933 counted represented a drop of 10 percent in veteran homelessness from the previous year. Over the past five years, veteran homelessness has fallen by 33 percent. This is seen as the product of a concerted joint effort by HUD and the Department of Veterans Affairs to target resources to services, including permanent supportive housing, for veterans and their families. Last October, the agencies awarded \$62 million in HUD-Veterans Affairs Supportive Housing vouchers to assist more than 9,000 homeless veterans. A second round of housing assistance, targeting 1,984 homeless veterans, was announced in December.

The HUD report also cites longer-term progress in addressing homelessness: Since 2007, an 11 percent decline in the number of people homeless on a single night, and a 32 percent decline in the number of homeless people unsheltered.

In its *State of Homelessness in America 2014*, The National Alliance to End Homelessness describes an overall decrease in homelessness as the nation continues its slow recovery from the recession, but points out that while 31 states saw a decrease in homelessness between 2012 and 2013, 20 states saw an increase. And while the national rate of homelessness fell to 19 homeless persons per 10,000 people in the general population, the Alliance reports, the rate in individual states ranges from eight in Mississippi to 106 in the District of Columbia.

Despite progress in addressing homelessness, the report states, challenges remain: “The overall economy is starting to recover, but this improvement does not appear to be penetrating lower-income populations. The

pool of people at risk of homelessness, those in poverty, those living with friends and family, and those paying over half of their income for housing, has remained high despite improvements in unemployment and the overall economy.”

A report published in November by the American Institutes for Research’s National Center on Family Homelessness says a historic high of 2.5 million children are now homeless each year in America. The Center’s calculation of child homelessness uses the McKinney-Vento definition of child homelessness and is based in part on the Education Department’s count of homeless students during the 2013 school year – more than 1.2 million – and 2013 Census data. It includes families and children living in “doubled-up” situations with families and friends, estimated to be 75 percent of homeless children nationally. According to the Center, from 2012 to 2013, child homelessness increased by 8 percent nationally and by 10 percent or more in 13 states and the District of Columbia.

This section of the report provides information on the numbers and types of people experiencing homelessness in the Task Force survey cities and on the availability of emergency shelter across these cities between September 1, 2013 and August 31, 2014. It also includes brief descriptions of exemplary programs and efforts underway in the cities that respond to the problems of homelessness, and concludes with city officials’ outlook on problems of homelessness in the coming year.

Extent of Homelessness

Over the past year, the total number of persons experiencing homelessness increased in 48 percent (11) of the survey cities responding, decreased in 39 percent (nine) of the cities, and stayed the same in 13 percent (three) of the cities – Asheville, Phoenix, and Santa Barbara. Across these cities, there was an overall increase of 1.2 percent in the total number of persons experiencing homelessness. The change ranged from a 21 percent increase in Plano, a 13 percent increase in Washington, DC, and an 11.5 percent increase in Dallas, to a decrease of 9 percent in Providence, 12 percent in Des Moines, and a 20 percent in Charlotte.

Homelessness Among Families

The survey cities reported that, over the past year, the number of homeless families increased in 43 percent (10) of the cities, decreased in 35 percent (eight) of the cities, and stayed the same in 22 percent (five) of the cities. Across the cities, there was an overall increase of 3.2 percent in the total number of families experiencing homelessness. The change ranged from an increase of 32 percent in Dallas, 25 percent in Washington, DC, and 19 percent in San Antonio, to a decrease of 11.7 percent in Los Angeles, 19 percent in San Francisco, and 27 percent in Charlotte.

Asked to identify the three main causes of homelessness among families with children, 83 percent (19) of the cities cited lack of affordable housing, 61 percent (14) cited unemployment, 52 percent (12) cited poverty, and 43 percent (10) cited low-paying jobs. Next came family disputes and domestic violence, each cited by 17 percent (four) of the cities; and eviction and substance abuse and lack of needed services, each cited by 13 percent (three) of the cities.

Homelessness Among Unaccompanied Individuals

The survey cities reported that, over the past year, the number of unaccompanied homeless individuals increased in 35 percent (eight) of the responding cities, decreased in 39 percent of the cities, and stayed the same in 26 percent (six). Across the cities, there was an overall decrease of 0.7 percent in the total number of unaccompanied individuals experiencing homelessness. The change ranged from a 14 percent increase in Norfolk and a 10 percent increase in Santa Barbara, to a 7 percent decline in Des Moines, a 10 percent decline in Asheville and a 12 percent decline in San Antonio.

When asked to identify the three main causes of homelessness among unaccompanied individuals, 74 percent (17) of the cities cited the lack of affordable housing, 52 percent (12) cited unemployment, 48 percent (11) cited poverty, 43 percent (10) cited mental illness and the lack of needed services, 43 percent also cited substance abuse and the lack of needed services, and 26 percent (six) cited low-paying jobs.

Number of Homeless Persons

The survey cities were asked to report on the number of persons who were homeless on an average night over the past year. In most cases, cities used the data from the annual Point-in-Time count they are required to submit to HUD each year. The following table shows the total of the counts provided by 23 survey cities.

Homeless Persons on Average Night in 23 Survey Cities

Household Type	On the Streets	In Emergency Shelter	In Transitional Housing
Single Adults	22,222	22,903	10,478
Persons in Families	1,559	12,924	12,826
Unaccompanied Youths	831	460	336

The cities were asked to report the number of unduplicated homeless persons in emergency shelters and transitional housing over the past year – also data they are required to report to HUD. The following table shows the totals of the counts provided by 22 of the survey cities.

Unduplicated Number of Homeless Persons over Past Year in 22 Survey Cities

Household Type	In Emergency Shelter	In Transitional Housing
Single Adults	93,610	26,841
Persons in Families	31,429	24,243
Unaccompanied Youths	2,593	390

Across the 21 survey cities able to respond to a question on permanent supportive housing, a total of 9,004 unaccompanied individuals and 3,172 persons in families entered permanent supportive housing over the past year.

Characteristics of Homeless Adults

The survey cities were asked to provide information on the characteristics of homeless adults in their cities. The cities reported that, on average:

- 28 percent of homeless adults were severely mentally ill,
- 22 percent were physically disabled,
- 18 percent were employed,
- 15 percent were victims of domestic violence,
- 13 percent were veterans, and
- 3 percent were HIV Positive.

Because these are not mutually exclusive characteristics, the same person may appear in multiple categories.

Emergency Shelter and Other Housing for Homeless Persons

The survey cities provided information on the number of beds available for homeless persons in emergency shelters, transitional housing, and permanent supportive housing. This is also information that cities provide to HUD as part of their Continuum of Care application. Twenty-three of the survey cities responded to the question. The following table shows totals of the counts provided.

Housing Type	Total Number of Beds	Number of HMIS Participating Beds	Number of New Beds Added during Past Year
Emergency Shelter	39,834	27,738	2,297
Transitional Housing	29,499	23,169	1,134
Permanent Supportive Housing	70,315	56,906	2,908

Twenty-two of the survey cities reported on adjustments which shelters made to accommodate an increase in demand over the past year. Among these, shelters in 68 percent (15) of the cities consistently had clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements. In half (11) of the cities, shelters distributed vouchers for hotel or motel stays because shelter beds were not available. In 45 percent (10) of the cities, shelters increased the number of persons or families that could sleep in a single room. In 32 percent (seven) of the cities, buildings have been converted to temporary shelters.

Among other adjustments shelters have had to make: In **Chicago** and **Phoenix** they have increased the number of beds in current facilities. In **Santa Barbara**, shelters are using mats. In **Plano**, the Samaritan Inn has a plan for expansion to try to meet the needs of homeless families. **San Francisco** has added a women-only winter shelter.

In response to a significant increase in demand for shelter from families in **Cleveland**, the Cuyahoga County Administration and Council have authorized additional funding to pay for “overflow shelter” accommodations at a local church to avoid families being turned away. The families are transported to the church at 6:00 PM and provided a meal, snacks, and cots for sleeping. They are transported back to

Coordinated Assessment & Intake in the morning where staff can work to place them in a regular shelter bed.

Unmet Need for Shelter

Seventy-three percent (16) of the survey cities report that emergency shelters had to turn away families with children experiencing homelessness because there were no beds available for them. Sixty-one percent (14) had to turn away homeless unaccompanied individuals. An average of 22 percent of the demand for emergency shelter is estimated to have gone unmet over the past year in the 21 cities able to provide an estimate. Those estimates are listed in the table below:

City	Percent Unmet Need
Asheville	0
Boston	22
Charleston	60
Charlotte	20
Cleveland	0
Denver	13
Des Moines	40
Los Angeles	52
Louisville	13
Salt Lake City	0
Nashville	25
Norfolk	27
Philadelphia	48
Phoenix	0
Plano	84
Providence	-10
Saint Paul	3
San Antonio	20
San Francisco	1
Santa Barbara	15
Washington, DC	10

Homeless Veterans

HUD's January 2014 Point-in-Time count of homeless persons in the nation identified 49,933 homeless veterans – about 11 percent of all the homeless adults in the count. Thirty-six percent of these homeless veterans were found in unsheltered locations, which is the same rate as for all homeless adults. HUD reports that most veterans experience homelessness as individuals, but 4 percent – about 1,700 – were found to be homeless as members of families with children. Female homeless veterans accounted for 10 percent of both the sheltered and unsheltered homeless veteran populations.

This year's report reflects continued progress in dealing with veteran homelessness: Between 2013 and 2014, the count dropped by 10 percent – 5,846 fewer homeless veterans. This represents the steepest one-

year decline since veteran homelessness fell by 12 percent from 2010 to 2011. Both the sheltered and unsheltered veteran populations experienced declines: Sheltered veterans showed an 8 percent drop and unsheltered veterans a 14 percent drop. Over the past five years, the number of sheltered veterans has dropped more than 26 percent; the number unsheltered has dropped nearly 42 percent.

The National Alliance to End Homelessness reports that, while the rate of veteran homelessness has fallen to 27 homeless veterans per 10,000 veterans in the general population, the rate in individual states ranges widely, from 28 in Wyoming to 156 in the District of Columbia.

In 2009, the Department of Veterans Affairs set a goal of ending homelessness among veterans by the end of 2015, and has focused funding on specific programs for veterans. HUD and VA continue to fund efforts such as the HUD-VA Supportive Housing (HUD-VASH) Program, which provides permanent, supportive housing and treatment services for homeless veterans; the VA Homeless Grant and Per Diem Program, which funds community-based agencies providing transitional housing or service centers for homeless veterans; and the Supportive Services for Veteran Families (SSVF) Program, which awards grants to private non-profit organizations and consumer cooperatives that can provide supportive services to very low-income veteran families living in or transitioning to permanent housing. This spring, First Lady Michelle Obama launched a multi-agency Mayors Challenge to End Veteran Homelessness, an effort to accelerate progress on meeting the goal of ending veteran homelessness by the end of next year, and many of the survey cities are among those that have signed on to the Challenge.

Large numbers of young veterans of the Iraq and Afghanistan in the homeless population continue to be a particular concern among veterans' advocates as combat roles in these conflicts change. The VA reported in 2012 that the number of homeless veterans in this category had increased significantly over the previous two years, in part because of more aggressive efforts to identify and assist these veterans, and in part because of combat-related problems such as post-traumatic stress disorder and substance abuse that make adjustment to civilian life more difficult. Current and projected cuts in defense spending are expected to translate into troop cuts over the next few years, making additional involuntary personnel reductions more likely. It's estimated that more than 300,000 troops are likely to separate from the military in each of the next few years.

Impact of Targeted Funding

In this year's survey, city officials were asked to describe the status of efforts to serve the homeless veterans' population in their cities. All of the survey cities except Trenton have been successful in obtaining HUD, VA and other funds targeted to homeless veterans.

Officials in 91 percent (20) of the cities report their efforts to target homeless veterans have been successful in reducing the number of veterans in the homeless population. Following are their comments on some of the programs they have used and the results they have achieved:

Boston: Increased numbers of homeless veterans have been placed in housing through the City of Boston's Homes for the Brave housing partnership. Since September of 2013, more than 400 formerly homeless veterans have been placed in housing. Because of the priority given to chronically homeless veterans for the HUD-VA VCAH program, these housing placements have included a high number of these veterans.

Charleston: With the introduction of the Supportive Services for Veteran Families program, we are better able to house homeless veterans quickly.

Cleveland: Cleveland/Cuyahoga County has improved its ability to target resources to veterans in several ways. Three mechanisms have increased veterans' awareness of resources and helped to reduce veteran homelessness:

- Coordinated Assessment and Intake has been implemented in the community. All newly homeless individuals and families come through one front door to the system. Veteran status is identified at this initial assessment. Veterans are immediately connected to the VA Homeless Outreach staff to determine needs and eligibility for VA resources.
- The Cleveland/Cuyahoga County community was awarded funding for a Veterans Coordinated Resource and Referral Center (CRRC). This center is staffed by the VA, is centrally located, and open six days a week. Any veteran needing assistance can contact the CRRC for information and referral.
- The local information and referral line, 2-1-1, has staff specifically trained to respond to veterans' requests for assistance and information.

Dallas: The Dallas Housing Authority partnered with VA to offer 100 housing vouchers for veterans.

Denver: We have used a combination of 100-day campaigns, project-based VASH vouchers in affordable housing, and targeted street outreach to veterans to reduce the homeless population.

Des Moines: It appears the veteran population in Des Moines has been steadily declining for the past two years.

Louisville: The number increased this past year due to better data collection, but decreased in the prior two years.

Nashville: Over 900 veterans or veterans and families have been successful in accessing HUD/VASH housing vouchers over the last five years. Over 300 veterans have been able to access transitional housing and exited into permanent housing through GPD programs.

Norfolk: We are on target to end veteran homelessness by December 2015.

Philadelphia: The 2014 Point-in-Time Count indicated a 19 percent decrease from the 2013 count in veterans experiencing homelessness.

Providence: There are sufficient rental vouchers, but there are challenges in housing those with less than favorable discharges.

Saint Paul: In general, homelessness in Ramsey County and the City of Saint Paul has been decreasing among both sheltered and unsheltered veterans. The Point-in-Time count data for 2014 are notable because they added a group of sheltered veterans who had not been counted in prior years, creating an apparent increase. That said, we believe that if this group of veterans had been counted previously, the downward trend would be clear and continuous.

Salt Lake City: Effectively, we have zero chronically homeless veterans.

San Antonio: The program outcomes of American GI Forum National Veterans Outreach Program, Inc. (NVOP) show that approximately 70 percent of veterans exiting transitional housing enter permanent housing. NVOP's outcomes also show that veterans participating in veteran employment and training programs are more likely to retain employment and either obtain or maintain permanent housing.

Family Endeavors began the SSVF program in 2011 and, since that time, the number of unsheltered homeless veterans and total homeless veterans has decreased, according to the Point-in-Time counts. The Family Endeavors SSVF program served 2,116 veterans and their family members in San Antonio/Bexar County in the 2013-2014 fiscal year. Eighty-three percent of those veteran households receiving homeless prevention services exited their program in permanent housing; 67 percent of veteran households receiving rapid rehousing services exited the SSVF program into permanent housing.

San Francisco: We saw a 30 percent reduction in veteran homelessness between the 2011 and 2013 bi-annual homeless counts. We conducted a three-day homeless veterans outreach and the response rate indicated that the number of homeless veterans is even lower than the 2013 count number.

Santa Barbara: We used VASH vouchers, Supportive Services for Veteran Families, and Grant per Diem programs.

Trenton: Utilizing HMIS, we are able to identify veterans and provide services such as permanent supportive housing and SSVF services.

Ninety-six percent (22) of the cities report their efforts to target homeless veterans have been successful in other ways. Their comments:

Boston: As housing placements have increased and barriers are identified, cross-agency problem solving to resolve these barriers continues to move forward. Coordination among providers has greatly improved, and linkages between housing search and outreach have been enhanced.

Charleston: We have implemented multiple outreach initiatives that target homeless veterans living unsheltered.

Charlotte: They have allowed us to focus on more outreach activities.

Chicago: The Chicago Continuum of Care (CoC) and the Jesse Brown Veterans Affairs Medical Center are partnering to create a coordinated access process for veterans in need of housing assistance. VA-contracted providers and homeless service providers will use the same standardized assessment tool and are working together to ensure that veterans are matched to appropriate housing, regardless of where they enter the system. The CoC and the VA have improved coordination and understanding of the available resources in each sector.

Cleveland: Two non-profit providers of homeless services have been awarded funds by the VA through the SSVF program. One program has been operating for the past three years; the other began services in November 2014. The SSVF program provides rental assistance, including back rent, to prevent homelessness among veterans, and to help veterans secure permanent housing in the community. In FY 2013, over 500 veteran households received housing stabilization assistance. Cuyahoga County recaptured unspent veteran assistance funds from the local Veterans' Services Commission and reallocated the funds

to other community providers serving homeless and needy veterans. These funds were leveraged with the SSFV program dollars as well as Continuum of Care permanent housing funds to assist over 150 veterans to become housed and/or maintain their housing.

Denver: We have had success in maintaining the housing of veterans once they are housed by providing case management and supportive services on site. We are seeing this as an ongoing need to maintain the housing success with the veterans and to help them retain their housing.

Des Moines: Our Mayor is involved in a challenge to end veteran homelessness.

Los Angeles: We have implemented a coordinated entry system to target veteran homelessness.

Louisville: They have been successful due to increased VASH funding, better overall coordination, and new partners.

Nashville: Our efforts to target homeless veterans have also been successful at providing VA access to homeless veterans presenting at our homeless VA walk-in clinic and contacting our VA homeless hotline. We have increased coordination of services with VBA, HUD, SSFV, employment agencies, and other community partners and outreach teams.

Norfolk: Since launching our efforts to end veteran homelessness, we have been able to reduce the processing time to house a veteran awarded a VASH voucher from 258 days to less than 21 days.

Philadelphia: Philadelphia is one of 10 communities selected by HUD and the U.S. Interagency Council on Homelessness to participate in the Dedicating Opportunities to End Homelessness Initiative, and one of cities selected to participate in the U.S. Department of Veterans Affairs' 25 Cities Initiative. Through these initiatives, Philadelphia established the goal of ending veteran homelessness by December 2015. As a result of Philadelphia's efforts, 450 veterans experiencing homelessness entered permanent housing over the last year. We have the resources in place to serve approximately 725-750 veterans experiencing homelessness over the next 14 months.

Phoenix: This year we reached functional zero for the chronically homeless veteran population.

Plano: So far, we have been successful by coordinating our approach with other service providers who specialize in working with vets.

Providence: There is a commitment to end veterans' homelessness by 2016.

Saint Paul: Efforts to end veteran homelessness serve as the vanguard of the City's efforts to end homelessness in general. More importantly, it can be said that the citizens of Saint Paul, Ramsey County, and the State of Minnesota are more aware of the needs of Minnesota's veterans – especially veterans returning from Iraq and Afghanistan. Most importantly, with this increased awareness, Minnesota citizens are willing to help.

During 2014, Minnesota Governor Mark Day, Saint Paul Mayor Chris Coleman, and Minneapolis Mayor Betsy Hodges accepted First Lady Michelle Obama's challenge to end homelessness for veterans. At the local level, this means that collaborative partners must work to end homelessness for veterans on a

veteran-by-veteran basis – engaging each veteran and his or her family with appropriate effective solutions.

Additionally, it is important to recognize the longstanding valued work of the Minnesota Assistance Council for Veterans (MACV). For years, MACV and the VA have hosted Veteran Stand Downs for homeless veterans and those veterans with barriers in their lives. Stand Downs assist veterans by coordinating numerous services in one location, making them accessible to all veterans who otherwise may not seek out services or take advantage of the benefits due to them. Moreover, Stand Downs provide opportunities for Minnesota communities to recognize Minnesota veterans.

Salt Lake City: The collaboration used to house veterans is now used for other groups.

San Antonio: NVOP’s employment and training programs show that those homeless veterans who obtain and maintain employment also obtain and maintain permanent housing. NVOP’s recent successes with its Veterans Homeownership Program show that home ownership education and assisted home ownership preparation will lead to veterans maintaining permanent housing.

San Francisco: There is an increased level of collaboration between the local VA Medical Center, local non-profits, and the City government. This has allowed for more sharing of best practices and problem solving. For example, local VA and non-profit staff have begun working together to improve and streamline the placement process for Grant Per Diem transitional housing placements for homeless veterans with acute needs that could not navigate the previous process.

Santa Barbara: We have helped veterans into transitional shelter and to participate in VA health programs (Stand Down).

Trenton: The City of Trenton is the lead entity for the Trenton/Mercer Continuum of Care and works very closely with our veteran organizations.

Washington, DC: Homelessness among veterans in the District has decreased while homelessness in general has increased.

Additional Resources Needed

In an open-ended question that asked what additional public or private resources are required to meet the city’s current unmet need for services to veterans, nearly all of the cities that responded called for more affordable housing. Several cities also highlighted the need for supportive services. Among their specific suggestions:

Asheville: We need additional affordable housing units.

Boston: The Veterans’ Services Department of the City of Boston assists all veterans in obtaining federal, state, and city benefits to which they may be entitled. Benefits are granted to qualified veterans based on eligibility provisions established by Massachusetts State Law, Chapter 115 and CMR 108. The Veterans’ Services Department assists with benefits relating to financial assistance, food, clothing, shelter, hospitalization, and reimbursement for medical care or supplies. It also provides financial, medical, and burial assistance to veterans and their dependents residing in Boston and job matching and job training

referrals to local public and non-profit agencies. Beyond these resources and benefits, we need housing units from landlords willing to rent and flexible funds to assist veterans who are not eligible for VASH or are not a priority for public and other assisted housing.

Charleston: More support from the housing sector is needed to meet the need for homeless veterans. More affordable housing is an important factor in being able to house homeless veterans stably. Partnerships and collaboration with property owners and the housing authority are also needed.

Charlotte: We need more affordable housing and additional rental subsidies.

Chicago: The City estimates that with the combination of federal resources allocated to Chicago that are targeted to housing for veterans and a new City investment that focuses on veterans who are not eligible for VA housing assistance, we are on pace to end homelessness for veterans by 2015.

Cleveland: The VA has made a commitment to end veteran homelessness and has committed significant funding to meet this goal. There are two broad areas that should be addressed for this goal to be realized: 1) Expand the VASH voucher program. VASH vouchers provide an ongoing rent subsidy to homeless veterans who meet the income and disability requirements. Increasing the overall supply of affordable housing subsidies will reach more veterans and free up other affordable housing resources currently used by veterans for the non-veteran population. 2) Many, many homeless veterans, especially those living on the streets, have a dishonorable discharge status from the service. In most cases, the discharge is related to behavioral health issues – mental illness and/or substance abuse. Many times, the behavioral health issues developed while serving. Men and women return from service with serious health issues but are prohibited from accessing services through the system that contributed to their illnesses. Until the VA recognizes its responsibility to these individuals, chronic homelessness among veterans will continue.

Dallas: The City of Dallas needs safe and affordable housing for the working poor.

Denver: We continue to raise funds for veterans and look for ways that we can complement the current structure for programming and housing that is in place for veterans today. The two things we need the most in Denver are housing and the services to go along with it. Being able to provide these in addition to what Denver already has would be a huge benefit to all homeless vets who are searching for housing.

Des Moines: We need more affordable housing.

Los Angeles: We need better inter-agency collaboration that includes local governments, service providers, and the U.S. Department of Veteran Affairs; continued expansion of the Coordinated Entry System and HMIS participation by providers; and VASH vouchers recently implemented in HMIS.

Louisville: A "move up" strategy to replace Permanent Supportive Housing units with Section 8 for more stable households would free up Permanent Supportive Housing for housing veterans with higher needs. Additional Section 8 and PSH are also needed for veterans who do not qualify for VASH.

Nashville: A stronger partnership is needed with local landlords or other affordable housing providers, particularly for one-bedroom housing units. In addition, local providers are stepping up an effort to reduce

the rate of attrition of vets from VASH-subsidized housing, which most often occurs due to nonpayment of rent and is typically associated with relapse.

Norfolk: We need additional participating landlords with quality affordable housing, and additional sources of housing subsidy funding.

Philadelphia: There is a need for permanent housing for chronically street-homeless veterans who are active in their addictions (aka "Wet" Housing). Also, there is a need for funding for supportive services for veterans who have "graduated" to their own independent apartments but continue to need case management.

Phoenix: We are in need of additional Permanent Supportive Housing and Rapid Rehousing options for veterans that do not qualify for VASH or SSVF.

Plano: We need more awareness by the public.

Providence: We need to make sure that those with less than honorable discharges have both services and rental vouchers.

Saint Paul: To end homelessness for veterans, we must roughly triple the rate of homeless veterans who obtain permanent housing each month. This will require sustained funding, the availability of targeted programs to end veteran homelessness (SSVF, HUD-VASH, etc.), and increased access to permanent supportive housing and any supports needed through other channels. Furthermore, recognizing that homeless veterans lack the knowledge of available services, the City of Saint Paul is currently working with MACV to develop a stronger street outreach to homeless veterans living in emergency shelters.

Salt Lake City: We need additional housing and case management.

San Antonio: More public dollars are needed for permanent housing for veterans, especially those with families. Private resources are needed to fill in the gap that government funding for veterans leaves, such as child care, more intensive re-entry services for female veterans, and specialized services for non-veteran members of veteran-headed households (medical services, employment and training programs for the non-veteran spouse, etc.).

San Francisco: San Francisco has exceptionally high costs for housing. Locally, we could do more to secure housing for homeless veterans if the Fair Market Rental reimbursement rate for VA Supportive Housing (HUD-VASH) and Continuum of Care (CoC) units were higher and/or if there were VASH grants made with a two- to three-year window to secure site control, so that VASH could be used in planned developments where costs can be contained.

Santa Barbara: We need more affordable housing and supportive services.

Trenton: Community Hope has received a Supportive Services for Veterans Families (SSVF) grant to serve veterans in the Trenton/Mercer County area. In addition, funding is utilized through the CoC Program grant to provide permanent supportive housing and services to veterans.

Goal of Ending Veteran Homelessness by End of 2015

Sixty-one percent (14) of the cities say their experience suggests that the VA will be able to reach its goal of eliminating veterans' homelessness by the end of 2015.

Among comments from the cities saying the goal can be reached:

Boston: We believe that Boston can achieve this goal, but it remains a challenge due to a significant number of new homeless veterans or homeless veterans from communities outside of Boston who come into our city seeking access to shelter, services, health care and housing opportunities they have difficulty finding or accessing in their home communities. We believe this to be a challenge shared by other principal cities that see higher rates of homeless veterans than suburban and rural communities.

Dallas: The 2014 Point-in-Time Count revealed 42 unsheltered veterans.

Norfolk: In the City of Norfolk we will eliminate veteran homelessness by December 2015 or sooner.

Philadelphia: The current projections indicate that Philadelphia can make substantial progress.

Salt Lake City: Salt Lake City and its partners have formed a Veterans Housing Advisory Committee to meet VA's goal.

San Antonio: The VA's investment in veteran service programs is working in line with HUD's Housing First model and DOL's employment programs, which is resulting in getting more homeless veterans off the streets and out of shelters. All current programs targeting homeless veterans have this as their goal.

Trenton: Officials say they can reach the goal if federal resources increase.

Cities that do not expect the VA to reach its goal by the end of 2015 similarly voice concern about both inadequate resources and an inadequate supply of affordable housing. They also say the system needs to be streamlined, and some expect to see more veterans in their communities, many with PTSD or other service-connected problems.

Charleston: While it is a fantastic goal to work toward, more financial resources and more affordable housing are needed in order to adequately house the number of homeless veterans in our community.

Denver: Not unless systems become more streamlined for getting the vets' vouchers for housing, and more affordable housing is built.

Los Angeles: Officials cite the size and scope of Los Angeles' very large homeless veteran population.

Louisville: We're not sure if other communities are fully on board with ending homelessness for veterans first.

Nashville: While the number of un-housed veterans has fallen across the country, a large number of men and women are leaving the military as part of troop strength reductions. Many of these veterans are

unprepared for the transition to civilian life and will be at great peril of becoming homeless if supportive services are not available to help them. Most current government programs are restricted to helping homeless people rather than providing services to prevent homelessness. The sole solution to homelessness for some veterans may not be a home. There may be underlying issues that also must be addressed if housing placements are to be successful (PTSD, addictions, unemployment). Additionally, affordable housing units in Nashville are very limited. Therefore, most local agencies responding to this survey question whether veteran homelessness will be eliminated by the end of 2015. In spite of this, the Metropolitan Homelessness Commission forges ahead to work hand-in-hand with the national Zero: 2016 effort to “Get to Zero” with veteran homelessness. The Commission is meeting with other key stakeholders (the VA, SSVF grantees) to develop a community plan, due to the VA by December 1.

Plano: Too many vets that will have late PTSD that will occur after 2015.

Providence: This goal assumes that we have a way to divert those veterans entering homelessness into permanent housing. Our system and those around the country have not reached the point where that is going to occur.

San Francisco: While San Francisco has made great strides and progress, we see a higher demand for permanent supportive housing and affordable housing from homeless veterans than the available supply.

Santa Barbara: There is greater potential for this population, however, there is a significant lack of affordable housing in Santa Barbara.

Exemplary Programs to Alleviate Homelessness Among Veterans

Eighteen of the survey cities provided descriptions of specific efforts that have been successful in alleviating homelessness among veterans. Many of the efforts described use of targeted federal funds provided through programs such as HUD-VASH, SSVF, and HUD’s Continuum of Care in their tailored approaches to homeless veterans. A number of cities describe their involvement in national initiatives such as the Mayors Challenge to End Veteran Homelessness sponsored by The White House, the multi-agency 25 Cities Initiative targeting cities with the highest concentrations of homeless veterans, and the national nonprofit Operation Stand Down which provides social services to aid veterans’ transition to civilian life.

Boston: In September 2013, City of Boston agencies launched a partnership with the U.S. Department of Veterans Affairs (VA), the Department of Housing and Urban Development (HUD), the Massachusetts Departments of Veterans’ Services (DVS) and Department of Housing & Community Development (DHCD), the Boston Housing Authority, and nonprofit agencies working with veterans to house 100 homeless veterans in 100 days. Partner agencies created a registry of homeless veterans seeking housing and identified resources for as many veterans as possible. Agencies also worked to match each veteran with support services to meet their ongoing needs, including stabilization services to maintain their housing after they move in. By the end of the 100-day period on November 30, 2013, Boston Homes for the Brave surpassed the initial goal of housing 100 veterans in 100 days. Efforts to house homeless veterans have been ongoing throughout the year. The success of this initiative served as a springboard to Boston Mayor Martin J. Walsh’s announcement on July 9, 2014 that Boston would join the National 25 Cities partnership with the VA, HUD, the Interagency Council on Homelessness, the National League of

Cities, and more than 225 other mayors across the country committed to ending veteran homelessness by the end of 2015.

Charleston: One80 Place provides food, shelter and critical supportive services to help individuals, veterans and families turn their lives around. Services include medical exams and care, counseling, and education and employment courses. The organization has dedicated space and programs for veterans. The Supportive Services for Veteran Families program operated by One80 Place works to quickly house homeless veterans and their families or prevent homelessness for those who are at imminent risk. The program partners with Family Services Inc. to find adequate and affordable housing for veterans, and case managers help families find and maintain stability in their new homes. The program continues to serve hundreds of veteran families.

Charlotte: Charlotte-Mecklenburg is implementing the Housing our Heroes initiative, a response to First Lady Michelle Obama's Mayors Challenge to end Veteran Homelessness by December 2015. Partners in this initiative include the City of Charlotte, Mecklenburg County, Salisbury VA Medical Center, Charlotte Housing Authority, Charlotte Bridge Home, and homeless services providers in the Continuum of Care. Also partnering on the initiative are Supportive Services for Veteran Families agencies. Partners began working on the initiative in July 2014 and then held a press conference on Veterans Day to solicit community support.

Chicago: The City of Chicago was selected by the Department of Veterans Affairs, the U.S. Department of Housing and Urban Development, and the United States Inter-Agency Council on Homelessness to join a national effort called the 25 Cities Initiative. The goal of this initiative is to help communities accelerate their progress in creating a coordinated assessment process for veterans and other homeless individuals and families, to identify their housing and service needs and match them to the appropriate resource when they enter the system. A community team of more than 25 non-profit providers, government agencies, and advocates completed a 100-day action plan and has embarked on a second 100-day plan on this initiative. In the first 100 days, more than 200 veterans were assessed, 59 were matched to available housing resources, and four transitioned to permanent housing. A unified data system, utilized by all partners, was built out in the Homeless Management Information System to support this initiative. A leadership team comprised of leaders from HUD, Jesse Brown VAMC, the Chicago Department of Family and Support Services, the Chicago Housing Authority, the Corporation for Supportive Housing, and the Chicago Alliance to End Homelessness guides this effort. Additionally, Mayor Rahm Emanuel signed on to the White House's Mayors Challenge to End Veteran Homelessness. With that commitment, the Mayor announced a City investment of approximately \$800,000 to support permanent supportive housing and rapid re-housing services for veterans who are not eligible for VA housing assistance. The 25 Cities partnership helps to move this effort forward.

Dallas: Dallas Housing Authority and the Veterans Administration have partnered to provide 100 housing choice vouchers to homeless veterans. The partnership allowed veterans to move into housing in as little as three weeks. Beds dedicated to veterans have been added within the past year through HUD's CoC program. CoC service providers are also providing services to veterans who may not be eligible for veterans benefits, and the City of Dallas is participating in the Mayors Challenge to End Veteran Homelessness.

Los Angeles: The Integrated Community Care Center (ICCC) pilot program, which opened its doors in June 2014, puts health, mental, and legal services under one roof to assist the homeless veteran population. Located at the U.S. Department of Veterans Affairs' West Los Angeles Medical Center Campus (WLA), in Building 402, the ICCC provides homeless veterans with same-day access to housing, primary care, mental health, and substance use treatment delivered by trans-disciplinary care teams and Enhanced Housing First teams. In addition, staff from programs such as the Department of Housing and Urban Development-VA Supportive Housing (HUD-VASH), Grant Per Diem, Homeless Veteran Supportive Employment Program, Outreach, and Community Residential Care offers services to homeless veterans in the building. The program has dedicated space for representatives from the Veterans Benefits Administration, Social Security Administration, Los Angeles County Department of Mental Health, Pro Bono Legal Services through a Medical Legal Partnership, and the Supportive Services for Veteran Families (SSVF) program.

Homeless veterans now have a consolidated one-stop location for these services instead of having to visit multiple locations across the City. This had been a barrier, as many would get lost or just not make it to their destinations. Since the facility opened, 5,000 Veterans have received assistance and 500 of these have begun screening to find permanent housing placements. Because the Veteran's Affairs Greater Los Angeles Healthcare System serves one of the largest veteran populations in the nation, it is often used as a pilot center to test new programs. In addition to the tangible services provided at the ICCC, their physical consolidation under one roof has given clients greater ease-of-access and convenience, helping to increase their overall quality of life.

Louisville: Funded by the U.S. Department of Veterans Affairs, Volunteers of America of Kentucky's Supportive Services for Veterans and Families program provides services to very low-income veteran families living in, or transitioning to, permanent housing. Services include outreach, case management, assistance in obtaining VA benefits/assistance in getting other public benefits, as well as temporary financial assistance for rent payments, utility payments, security deposits, and moving costs. The VA grant, totaling \$2 million over three years, helps approximately 125 veteran families annually to remain stably housed in the community.

Nashville: An outreach worker from Operation Stand Down Tennessee has helped many shelter and feeding programs link veterans to housing, medical care, and benefits. This agency employs veterans to assist other veterans to receive services for which they are eligible and works closely with other agencies in Nashville that are working to end homelessness in the City. Over 900 veterans or veterans and families have been successful in accessing HUD/VASH housing vouchers over the last five years. Over 300 veterans have been able to access Transitional Housing and exit into permanent housing through GPD programs. Efforts to target homeless veterans have also been successful at providing VA access to homeless veterans presenting to the Homeless VA walk-in clinic, veterans contacting the VA Homeless hotline, and increased coordination of services with VBA, HUD, SSVF, employment agencies, and other community partners and outreach teams.

Norfolk: In 2013, through the efforts of City government, the local Public Housing Authority, the regional VA Medical Center, local non-profits, and area veteran service organizations, the City launched the Housing Our Heroes initiative. As a result of this effort, the wait time for a veteran looking to use a HUD-VASH voucher to move into housing has been reduced from 258 days to under 21 days. Utilizing the resources of the non-profit community and various government agencies, the initiative has been able to

obtain or maintain housing for over 250 veteran households. In September 2014, the City's initiative conducted a three-day sweep that identified 51 veterans lacking permanent housing. These persons were assessed based on their level of vulnerability and, within three weeks, the most vulnerable household was in their new home. By the end of January 2015, the housing needs of each household are projected to be met and the City is anticipating ending veteran homelessness before the national goal of December 31, 2015.

Philadelphia: Philadelphia has a network of providers and programs that offer Department of Veterans Affairs-supported programs, including Grant and Per Diem and Supportive Services for Veterans and their Families (SSVF), as well as CoC-funded permanent supportive housing programs. In the past year, a coalition of non-profit organizations in Philadelphia began to implement \$3 million in SSVF funds, and applied for and received notification of another SSVF funding award that began on October 1, 2014. The weekly Veterans Outreach and Navigation Team (VONT) meeting promotes coordination and collaboration among 80-90 percent of all agencies serving veterans experiencing homelessness in Philadelphia.

Phoenix: Through regional efforts and a partnership with Project H3 Vets, 86 homeless veterans identified as chronically homeless in an October survey were placed in bridged or permanent housing. At a White House reception for Mayors, President Obama recognized the City of Phoenix and Mayor Greg Stanton for initiating this effort, which brought the City's chronically homeless veteran population to a functional zero. Phoenix was the first city to achieve this goal.

Saint Paul: Saint Paul's efforts are focused on Mayor Chris Coleman's commitment to end veteran homelessness by the end of 2015. As part of the federal Mayors Challenge to End Veteran Homelessness, the Mayor's commitment is shared with the Mayor of Minneapolis Betsy Hodges and Minnesota Governor Mark Dayton, and incorporated as part of Minnesota's plan to prevent and end homelessness. These efforts include improved identification of veterans and monitoring of progress through a Veteran Registry, combined with strategies to increase the rate of housing outcomes for veterans experiencing homelessness. At the same time, the Minnesota Assistance Council for Veterans (MACV) provides homeless or near-homeless veterans and their families with homelessness prevention and re-housing assistance. MACV attempts to forestall imminent homelessness for families impacted by a one-time, non-repetitive – but nonetheless consequential – event such as an illness, unemployment, or an accident. Services include rental/mortgage assistance, security/damage deposits, utility assistance and, as appropriate, transportation assistance while the veteran is being stabilized. To be eligible for assistance, a veteran must have an honorable discharge and 181 days of active duty service. The veteran must be a Minnesota resident (for a minimum of 30 days) and homeless or at imminent risk of becoming homeless, and must be motivated to make positive change. Generally, assistance is provided on a one-time basis with the payment to be sufficient to resolve the crisis.

Paramount in MACV's services delivery is outreach – to food shelves, shelters, community centers and clinics providing services to individuals and families – including regular outreach and collaboration with the Union Gospel Mission, Dorothy Day Center, and Salvation Army. As a direct result of its outreach, MACV connects with more veterans than ever before, and many veterans are referred to MACV's housing program by service organizations operating in communities surrounding MACV's regional offices. In 2013-2014, MACV's intensive case management and direct services assisted veterans and families in Ramsey County, most from Saint Paul. The average cost to prevent homelessness is \$500-700 for each

veteran served. Re-housing service costs can be much higher, depending on the individual veteran's situation. MACV's multi-faceted, comprehensive approach focuses on the unique needs of homeless veterans, veterans in crisis, and their families.

Veterans can access MACV's additional programs and services (funded by other sources) to aid in achieving long-term stability. Such services may include life skills, job training, employment assistance, transitional permanent supportive housing, and civil legal assistance. MACV's supportive, drug-free environment can also help veterans work towards full recovery. Programming and services provide for basic needs – including housing/shelter, health care, food and clothing – and provide "next steps" to assist them in developing the skills necessary to secure employment and create and sustain economic independence. In collaboration with Ramsey County HRA and the City, MACV provides supportive housing for six returning veterans. (Ramsey County HRS and NSP-1 provides funds for property acquisition while MACV provides support services). Additionally, MACV has a supportive housing unit for women veterans. During 2009-2014, the City also allocated ESG funds to MACV for homelessness prevention services as part of the City and County's efforts to end homelessness.

San Antonio: Veterans Enterprises of Texas (VETS), a social enterprise of the American GI Forum National Veterans Outreach Program, Inc. (NVOP), was founded to create jobs for disabled veterans. Founded in 1998, VETS employs up to 50 disabled veterans and non-veterans annually at fair market wages. VETS operates a box manufacturing company and the VETS Work Center, and seeks contract opportunities to create work that will be conducive to the hiring of disabled veterans. The VETS Work Center provides work opportunity in a sheltered environment for veterans with disabilities who are not ready for mainstream employment. This assists in the transformation of these veterans to reach their full potential and possibly mainstream employment. The Work Center's primary work is assembling products into kits or end-products. For example, a current contract for the U.S. Army employs the veterans to assemble commemorative boxes for retiring soldiers with a folded American flag, lapel pin, a DVD of information, and auto decals. The VETS box manufacturing company produces the box, and the disabled veterans at the VETS Work Center fold the flags and assemble the pieces.

Located in the NVOP's Residential Center for Homeless Veterans (RCV), the Work Center provides an opportunity for homeless and disabled veterans to gain employment as they progress from homelessness to transitional housing to permanent housing. A national model residential center, the RCV houses a transitional housing program (80 transitional beds) and permanent housing (160 single room occupancies). VETS is an important element in the continuum of care offered to veterans by NVOP, and it provides disabled veterans a means of recovery with pride and dignity. It is a job opportunity for disabled individuals, and it is a supportive work environment for those reintegrating into the workforce after years of homelessness. VETS was selected the U.S. Department of Housing and Urban Development (HUD) for the National Blue Ribbon Award for innovation in an enterprise community.

Family Endeavors' Supportive Services for Veteran Families (SSVF) program provides case management, homelessness prevention, and rapid re-housing services to veterans of all wars, often those with combat experience and/or post-traumatic stress disorder, and their families. Services include case management and coordination of services such as emergency financial assistance for rent, utilities, childcare, and transportation; assistance in obtaining VA and other public benefits; employment preparation, training, and job placement; and credit counseling and legal assistance. In the FY2013/14 program year, 1,363 veteran households consisting of 2,631 family members were served by the program in San Antonio and Bexar

County. Family Endeavors case managers assist each household in developing a person-centered Housing Stability plan focused on employment and self-sufficiency. The SSVF program utilizes a Housing-First model and provides financial assistance for rent, utilities, and security deposits, which gives individuals and families additional stability in addressing their other goals for increasing their self-sufficiency.

Family Endeavors' SSVF program has established and maintained effective partnerships with 200 community organizations and property managers to assist in meeting the various needs of these veteran households threatened by homelessness. Active partnerships with major organizations include the Department of Veteran Affairs, Haven for Hope, Bexar County Veterans Services Office, Texas Workforce Commission, American G.I. Forum, and the San Antonio Housing Authority. Relationships with these organizations enable case managers to expedite assistance and minimize the impact of homelessness for these veteran families. Last year, approximately 90 percent of families served secured stabilized housing, increased their household income, and reduced barriers to their increased self-sufficiency.

San Francisco: The City and County of San Francisco, the San Francisco Housing Authority, the San Francisco VA Medical Center, and several local non-profits are collaborating to open 130 units of permanent supportive housing at 250 Kearny, a recently remodeled property in the financial district of San Francisco. The property will operate with VASH, Continuum of Care, VA services, and City/County property management funds. Local veterans will be evaluated for the property using the nationally recognized VI-SPDAT scale to determine which veterans are most vulnerable and to prioritize those veterans for placement.

Santa Barbara: Santa Barbara has endorsed both Zero2016 and the Mayors Challenge to End Veteran's Homelessness. Commenting on this, Mayor Helene Schneider said: "In talking with mayors across the country who have taken the Mayors Challenge to End Veteran Homelessness, I've learned two valuable lessons: One, that focusing on ending veteran homelessness also significantly reduces homelessness among families, seniors and other people, and two, there's a significant return on our investment in creating accurate data and accountable performance measures, as they provide us with a successful system that ends the cycle of people living in the streets, emergency rooms, jail cells and emergency shelters."

Other Cities: Brief descriptions of efforts to combat veteran homelessness were provided by **Cleveland**, where the local court system has instituted a Veterans Court in which the judge has a docket comprised solely of misdemeanors committed by veterans, and in which social workers and health service professionals attend regularly to assist in linking the veteran with services and resources to prevent repeat offending; **Plano**, which has reduced chronic veteran population to effectively zero using VASH vouchers, and which now is using SSVF to target other veterans not eligible for VASH; and by **Providence**, where Operation Stand Down has a weekend program that reaches out to all homeless veterans to connect them to services and housing. Officials say the program has been successful at finding those who have fallen through the cracks of the existing homeless service system.

Efforts to Prevent Homelessness Resulting from Foreclosure

Forty-one percent (nine) of the cities have adopted policies aimed at preventing homelessness among households that have lost their homes to foreclosure during the last year; 53 percent (10) of the cities have adopted such policies in previous years.

Policies and Programs Addressing Homelessness

Asked to identify the top three actions needed to reduce homelessness, 96 percent of the cities (22) called for providing more mainstream assisted housing (e.g., Housing Choice Vouchers), 83 percent (19) of the cities cited the need for more permanent supportive housing for people with disabilities, and 70 percent (16) called for more or better-paying employment opportunities. Cited less frequently were more employment training programs, by 13 percent (three) of the cities, and better coordination with mental health service providers and more substance abuse services, each by 8 percent (two) of the cities.

Exemplary Programs to Alleviate Homelessness

Twenty survey cities described initiatives they believe have been effective in alleviating problems of homelessness in their communities. Across these initiatives are examples of how Continuum of Care and other HUD funds are being used and how Housing First and Rapid Re-housing models are being implemented.

Boston: Boston Street to Home is an initiative of the City of Boston's "Bringing Boston Home" plan. Partner agencies work to place unsheltered chronically homeless adults, many with long histories of homelessness, into permanent supportive housing or other residential settings. Working from a targeted list with experts in street outreach, supportive housing, addictions and Boston's Health Care for the Homeless Project, an outreach-to-housing model is being successfully employed to engage and house this otherwise hard-to-house cohort. As of October 2014, roughly half of the three-year target population has been housed or placed in long-term residential settings during the first year of this initiative. The project has begun implementing an assessment tool to match unsheltered adults in greatest need with the appropriate level of housing and supportive services as well.

Charleston: Family Services and the Charleston County Human Services Commission provide permanent supportive housing for chronically homeless individuals. These programs provide what officials believe to be "an amazing service" for disabled persons who have an extensive history of homeless. The supportive housing they are provided breaks the cycle of chronic homelessness, improves individuals' health, and substantially decreases their reliance on emergency rooms. Program officials say that providing housing for persons who have been living unsheltered for years is morally right and is also proving to be fiscally right, with cost savings to hospitals and jails realized when housing is provided.

Chicago: In mid-2013, the Department of Family and Support Services launched a rapid re-housing program for individuals and families living on the street or in shelters. This program provides financial assistance, housing location services, and housing stability case management services to help individuals and families quickly transition from homelessness to permanent housing. In the first year of the program, DFSS and its partners have worked to house 262 individuals and families. After an average of six months of assistance, 73 percent of households remained in permanent housing at program exit. This program model is a critical tool to help the Chicago system reduce the length of time people remain homeless by transitioning them back to housing as quickly as possible.

Cleveland: For several years, Cleveland has been a partner in the Housing First Initiative (HFI), a local effort to eliminate chronic homelessness. A goal of establishing 1,217 units of permanent supportive housing was reaffirmed in FY 2011. To date, 605 units in 10 projects have been developed. Chronic

homelessness has been reduced in our community by over 50 percent, and less than 2 percent of all residents return to homelessness.

Denver: One effort that is underway in Denver involves expanding the Street Outreach teams by adding a behavioral health component to help with the very difficult street-level mental health cases. The City is adding two behavioral health navigators to the Street Outreach teams so they can be on the street helping the outreach workers assess these very difficult cases and assisting with referral to mental health or crisis stabilization beds. By doing this, officials hope to streamline the referral process and better connect to the coordinated entry and assessment system for housing.

Los Angeles: The Homeless Family Solutions System (HFSS) is a regionally coordinated system of care for homeless families that provides Rapid Re-housing and ongoing case management to help families secure and maintain safe, stable permanent housing. The regional approach to the system helps homeless families stay in their communities, close to school, employment, family and community-based supportive services that help reduce the de-stabilizing effect of homelessness. Service providers participating in the system utilize standardized assessment tools and housing interventions that are targeted to best meet the needs of homeless families. Housing interventions are right-sized to ensure that families receive just enough assistance to help stabilize their housing crisis. Families with greater challenges to housing stability are targeted and prioritized for service enriched housing, while families with fewer challenges to housing stability are targeted for rapid re-housing programs. Regardless of the housing intervention, the system strives to rehouse all families within the shortest time period possible.

Building on the success of HFSS, a pilot Coordinated Entry System (CES) for individuals was launched in 2013 in the Skid Row area of Los Angeles and, by mid-2013, was scaled up to include seven out of eight LA County Service Planning Areas. The ultimate goal is to end homelessness for individuals while prioritizing the most vulnerable in a way that uses the resources in the most strategic fashion while creating comprehensive methodologies in each community. Los Angeles County's Coordinated Assessment System provides a single computerized portal and replaces a confusing patchwork of entry points to housing for homeless families and individuals. A community-based approach was adopted to help meet the goal of ending chronic, veteran, and family homelessness and relied heavily on the input and participation of homeless service and housing providers.

As part of this process, the community chose to redesign the HMIS system to incorporate a Coordinated Entry System and create a more effective community-based data system for the CES and HFSS. The CES creates a streamlined process through which our communities: assess, house, and retain individuals who are homeless in order to ensure all of our homeless neighbors are known and supported; target and maximize limited housing resources; and comply with the federal mandate to adopt a coordinated assessment process for housing. Through the redesign of HMIS, the Los Angeles Homeless Services Authority, as the CoC Lead, will be able to track all client assessments, housing navigation assistances, and matching of eligible housing resources or units with families and singles experiencing homelessness.

Louisville: With so little funding from HUD to address homelessness, we are looking for ways to improve our existing programs by creating a single point of entry to the emergency shelters, coupled with a community-wide coordinated assessment team for housing program referrals. The Common Assessment Team started in May 2014 and has performed approximately 1,000 client assessments and made 122 separate referrals for housing since that time. Louisville has also sought to access non-HUD CPD housing

resources including additional HCV/Sec. 8, SAMHSA/HHS resources, and a new partnership to get hospitals and managed care organizations to cover supportive housing service costs through Medicaid.

Nashville: Community partners in How's Nashville – the local version of the national 100,000 Homes Campaign – are hard at work connecting the most vulnerable homeless people to permanent solutions, with a priority on housing supports. They set shared housing placement goals in light of the federal goal to end veterans and chronic homelessness and track the community's progress towards those goals through frequent reporting of monthly housing placement and retention data. This initiative often utilizes the Housing First and Rapid Re-housing models, and has seen an 80 percent housing retention rate. The Metropolitan Homelessness Commission, the Metropolitan Development and Housing Agency (MDHA), and other How's Nashville partners have received local press coverage and national attention thanks to a broadcast on CBS's "60 Minutes." MDHA, the City's public housing agency, targets up to 18 Section 8 vouchers per month to individuals and families using a prioritized waiting list maintained by Nashville's coordinated assessment system. With help from frontline nonprofit staff, MDHA has streamlined the application process for Section 8 rental subsidies. Since June of 2013, How's Nashville has placed 733 chronic and/or vulnerable homeless persons into permanent affordable housing. The City has just been selected to participate in the Zero: 2016 effort to end homelessness among veterans by the end of 2015 and end chronic homelessness by the end of 2016.

Norfolk: During this reporting year the City of Norfolk has been deeply involved in an effort involving the development of two service coordination committees which bring together the City's human service agencies, local non-profit agencies, and the Veterans Administration to establish case conferencing and prioritization efforts for those single adults and families who become homeless. Through this process, the most vulnerable households are prioritized for housing and the case conferencing team is able to establish the support network that will provide ongoing services for the household.

Philadelphia: The City of Philadelphia's Permanent Supportive Housing Clearinghouse (CH) is a consolidation of the housing resources of the social service departments in the City. The role and purpose of the CH is to provide a streamlined, single point of access to permanent supportive housing, eliminate redundancies and multiple access points, promote coordination between housing and services, and manage new housing partnerships and resources. Resources are dedicated to households served by City social service agencies that have a services and a housing need, including individuals and families with mental illness, chronic substance abuse and related health disabilities, and those who are homeless or at the highest risk of homelessness. The CH began in 2012 and now includes access to eight programs, including the housing that is provided through a partnership with the Philadelphia Housing Authority.

Phoenix: The Maricopa Continuum of Care has begun implementation of a regional Coordinated Access System that ensures families and individuals will be served by the right intervention, quickly and effectively. Each system access point uses the same assessment tool, the VI-SPDAT, and makes decisions on which programs families and individuals are referred to based on their initial assessment score. Once the score is determined and an intervention type is identified, trained staff matches the family or individual to a program based on a comprehensive understanding of each program's specific requirements, target population, and available beds and services. Coordinated Access paves the way for more efficient homeless assistance systems by: helping people move through the system faster, reducing new entries into homelessness through diversion, improving data collection and quality, and providing accurate information on what kind of assistance consumers need.

Coordinated access is designed to quickly connect clients to the most appropriate resources, but its benefits go beyond placement efficiency. Clients in a coordinated system are interviewed and assessed less often, and receive consistent and fair services. The CoC as a whole can better allocate resources, conduct strategic planning, and transparently present critical systems information to the community and funders as a result of more comprehensive quality data. The first phase of Coordinated Access was rolled out in August 2014 with an access point for singles at the Human Services Welcome Center and an access point for families at the Family Housing Hub. More than 4,000 VI-SPDAT assessments have been conducted and the community is working to fully implement the matching and referral process. The next phase of Coordinated Access will be to finalize the referral and matching process and expand the system throughout the entire region.

Salt Lake City: In response to a Situational Assessment, Salt Lake City has developed a six-point services strategy: 1) Provide housing for the top 20 service users in order to diminish the resources directed toward these individuals; 2) Develop new permanent supportive housing projects in partnership with State of Utah, Salt Lake County, private industry, and service and housing providers; 3) Support the expansion of services in the Weigand Homeless Resource Center; 4) Conduct an evaluation of shelter services in Salt Lake City that includes zoning issues, environmental limitations, costs, partnerships, and viability of selected services with high likelihood of success; 5) SLCPD has opened a Metro Support Bureau and will continue to work on homelessness related issues; and 6) Enhance Pioneer Park neighborhood services and experiences for the homeless and non-homeless populations

San Antonio: SAMMinistries administers Prevention Services through which a family or individual facing imminent homelessness will receive one-time or short-term rental/financial assistance in order to remain in their home. Case Managers work closely with the family/individual to identify barriers that may affect their stability, identify mainstream resources that may enhance their housing stability, and work with landlords to identify affordable housing opportunities where relocation is necessary. Financial literacy and budgeting classes are offered for clients receiving assistance. Prevention Services staff conducts follow-ups at three, six, nine, 12, and 18 months with clients that received financial assistance. The follow-ups with clients have shown that Prevention Services had an impact on their housing stability, as approximately 97 percent have remained housed.

Haven for Hope is a non-profit initiative that seeks to go far beyond just feeding, clothing and sheltering people experiencing homelessness, helping individuals transform their lives and become self-sufficient on a long-term basis. In a single, central location, it serves men, women, and children experiencing homelessness. Over 35 partner agencies jointly provide services on campus, making Haven for Hope the largest transformational campus in the U.S. By improving access to resources and providing an opportunity for individuals to participate in multiple programs and activities concurrently, Haven for Hope expedites a journey towards self-sufficiency and creates a solid foundation that can be used to prevent returns to homelessness. Services are provided through a Recovery Oriented Systems of Care (ROSC) framework for coordinating multiple systems, services, and supports that are person-centered, self-directed, and designed to readily adjust to meet the individual's needs and chosen pathway to recovery. The system builds upon the strengths and resilience of individuals, families, and communities to take responsibility for their sustained health, wellness, recovery from substance use disorders, and improved quality of life.

In concurrence with ROSC, Trauma Informed Care (TIC) is a framework that guides Haven for Hope's policies, practices, and decision making to support clients' recovery from homelessness and the underlying conditions contributing to their experience of homelessness. TIC is an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma on individuals who have experienced it. TIC also emphasizes physical, psychological, and emotional safety for both consumers and providers.

San Francisco: 5th Street Apartments, located in San Francisco's South of Market Neighborhood, is a 44-unit building of permanent supportive housing for chronically homeless, transition-aged youth 18-24 years of age. Non-profit housing provider Community Housing Partnership, in partnership with the San Francisco Human Services Agency, operates the building and also provides support services to the tenants. This marks the first time that a housing facility run in collaboration with the City of San Francisco will apply its Housing First model specifically to youth. The facility provides 24/7 coverage of the front desk and on-site property management. The focus of this youth supportive housing project is on increasing tenant self-sufficiency and supporting those who can move on to other stable housing placements when possible.

The cornerstone of increasing tenant self-sufficiency is offering support services that both engage the youth and assist them in personal, financial, and educational goals. Support services include intake and assessment, outreach/engagement with tenants, case management, benefits advocacy, life/work skills programs, support groups and linkages/referrals/connection support to critical services including medical, banking, training, and work programs. The program also offers a host of social events each month to build community at the site. The social events also help to assist with life skills such as nutrition and cooking classes. Along with housing stability, this program tracks and measures tenant engagement in on-site services and linkages to off-site programs. Annual recertification of tenants will also allow for tracking percentages of tenants that maintain and increase their incomes. The program also tracks the clients who move on to other stable housing, opening up vacancies for new referrals from the target population. The program is just completing its first full year of operation and we look forward to assessing their outcomes.

Santa Barbara: Santa Barbara County's 2014 Point-in-time Count will be utilizing the VI-SPDAT to assess the health and social needs of homeless individuals and match them with the most appropriate support and housing interventions available. The most vulnerable individuals are included in biweekly housing placement discussions that include both housing and service providers. This has proven to be an effective strategy to place those most at risk of dying on the streets into a permanent supportive housing environment.

The Santa Barbara County-wide effort, C3H (Central Coast Collaborative on Homelessness), continues to make strides in its efforts to decrease homelessness in the County. The goals are to prevent homelessness; support the expansion of housing for the homeless; build a results- and data-driven culture; elevate community dialogue, support and collaboration; and encourage commitment to self-sufficiency. The strategies undertaken include housing first, housing ready and family/employer reunification. Regional coordination meetings have been set up Countywide in order to align regional partners to strategically engage in ending homelessness in their areas. And this group has endorsed both Zero: 2016 and the Mayors Challenge to End Veteran Homelessness.

Trenton: In September 2013, the first tenants at the Rescue Mission of Trenton's new Perry Street Permanent Supportive Housing complex received the keys to their apartments. Fifteen individuals who were previously homeless and who have taken affirmative steps to remake and reshape their lives received the keys to their new studio apartments. The goal of the \$3.5 million Perry Street Supportive Permanent Housing Project is to assist residents to become self-sufficient. Case management services will be available on site. The Rescue Mission of Trenton was granted \$2,736,000 in Special Needs Housing Trust Funds from the New Jersey Housing and Mortgage Finance Agency to help finance the demolition of a long-vacant existing building, and construction of a new three-story apartment building, at the corner of Perry Street and Carroll Street, a major entryway to the City of Trenton.

This was the final piece of a complex funding puzzle that includes HUD Continuum of Care funds provided by the City's Department of Health and Human Services (\$400,000), a Federal Home Loan grant (\$300,000), Regional Contribution Agreement funds provided by the City's Department of Housing and Economic Development (\$300,000), Rescue Mission sponsor equity (\$275,108), and a capital grant from Hopewell Valley Community Bank (\$3,000), which submitted the Affordable Housing Program application to the Federal Home Loan Bank. The Project also received a \$50,000 pre-development loan from the Corporation for Supportive Housing. Also crucial were the financial support of Hutchinson Industries – the Mission's most generous corporate supporter – which provided the funds to acquire the vacant building located at 503-505 Perry Street, and the willingness of Princeton Holdings, LLC (Interstate Outdoor Advertising Inc.) to convey a lot adjacent to the building (501-503 Perry Street) to the Mission for one dollar in 2003. Officials say the Rescue Mission of Trenton has received exemplary cooperation from government at all levels, and that the project is a triumph of collaboration.

Other Cities: Brief reports on successful efforts to combat homelessness were received from additional cities: In **Dallas**, the CoC has implemented the Housing First model and is expanding the Rapid Rehousing programs. **Des Moines** reports an effort to better target existing resources to chronic populations that is having a positive impact. In **Plano**, The Samaritan Inn, the only homeless program in Collin County, is implementing plans to expand its program, focusing initially on homeless families. **Providence** reports several exemplary Housing First programs run by mental health centers. These include Housing First Rhode Island run by Riverwood Mental Health, and the Home Base program run by the Providence Center, which have housed over 200 chronically homeless persons, provided wrap-around services to them, and report a housing retention rate of over 90 percent for the first year in permanent housing.

Outlook for Next Year

Based on current local projections of economic conditions, unemployment, and other factors affecting homelessness, officials in 39 percent (nine) of the cities expect the number of homeless families to increase moderately next year. Those in 30 percent (seven) of the cities expect the number to continue at about the same level, and those in another 30 percent expect the number to decrease moderately.

Officials in 43 percent (10) of the cities expect the number of homeless unaccompanied individuals to decrease moderately next year. In 30 percent (seven), they expect the number to increase moderately. Officials in 26 percent (six) of the survey cities expect it to continue at about the same level.

Given the current state of public and private agency budgets, officials in 68 percent (15) of the cities believe resources will stay at about the same level over the next year. Officials in 27 percent of the cities expect resources to provide emergency shelter to decrease over the next year, with four cities expecting the decrease to be moderate and two expecting it to be substantial. One city expects resources to increase substantially.

City Profiles

This section of the report provides individual profiles of the cities participating in the 2014 survey on hunger and homelessness. The profiles, intended to summarize for the reader the nature and extent of the problems in individual survey cities during the past year, are compilations of items selected from cities' survey responses.

Also included in the profiles are demographic data intended to provide some context for each city's response to the hunger and homelessness survey. These data items and their sources (the most recent available) are:

- Population, 2013 estimate (Source: U.S. Census Bureau, State and County QuickFacts)
- Median household income, 2008-2012 (Source: U.S. Census Bureau, State and County QuickFacts)
- Unemployment rate, October 2014 (Source: Bureau of Labor Statistics, U.S. Department of Labor, Unemployment Rates for Metropolitan Areas, December 2014)
- Persons below poverty level, percent, 2008-2012 (Source: U.S. Census Bureau, State and County QuickFacts)

As an aid in gauging the relative severity of economic problems in survey cities during the period covered by the survey, each city's profile may be compared to income, poverty, and employment indicators for the nation as a whole.

- According to the Census Bureau's September 2014 report, *Income, Poverty and Health Insurance Coverage in the United States: 2013*, the median household income in 2013 was \$51,939, and was essentially unchanged from the previous year.
- The nation's official poverty rate in 2013 was 14.5 percent, with 45.3 million people in poverty. While the poverty rate was down from 15.0 percent in 2012, the number of people living in poverty did not represent a statistically significant change from the previous year's estimate, according to the Census Bureau's September 2014 report.
- The nation's unemployment rate in November was 5.8 percent. Of the 9.1 million workers unemployed, 2.8 million (about 31 percent) had been unemployed for 27 weeks or more. The number of long-term unemployed has declined by 1.2 million over the past 12 months.

ASHEVILLE, NORTH CAROLINA

MAYOR ESTHER MANHEIMER

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • MEDICAL OR HEALTH COSTS • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • UNEMPLOYMENT

Profile of Hunger:

- Requests for emergency food assistance increased over the past year.
- Among persons requesting food assistance, 80 percent are members of families and 80 percent are employed.
- Food pantries and emergency kitchens have had to turn additional people away because of lack of resources, reduce the quantity of food received at each food pantry visit and/or the amount of food offered per-meal, and reduce the number of times a person could visit each month.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance also to increase moderately.

Profile of Homelessness:

- The number of homeless families increased by 10 percent and the number of homeless individuals decreased by 10 percent over the past year.
- Among homeless adults, 16 percent are victims of domestic violence, 40 percent are severely mentally ill, and 42 percent are veterans.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that may sleep in a single room, and consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements.
- Homeless shelters have not had to turn away either homeless families or homeless individuals because there were no beds available for them.
- For the next year, city officials expect the number of homeless families to increase moderately and the number of homeless individuals to decrease moderately; they expect resources to provide emergency shelter to continue at the same level.

POPULATION: 87,236

MEDIAN HOUSEHOLD INCOME: \$42,333

METRO UNEMPLOYMENT RATE: 4.1%

BELOW POVERTY LEVEL: 20.2%

BOSTON, MASSACHUSETTS

MAYOR MARTIN WALSH

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • HIGH HOUSING COSTS • MEDICAL OR HEALTH COSTS • UTILITY COSTS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance decreased by 1.7 percent.
- Among persons requesting food assistance, 60 percent are in families, 18 percent are employed, 14 percent are elderly, and 8 percent are homeless.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources.
- City officials estimate that 36 percent of the demand for food assistance went unmet last year.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance also to increase moderately.

Profile of Homelessness:

- The number of homeless families increased by 5.8 percent and the number of homeless individuals increased by 3.8 percent over the past year.
- Among homeless adults, 38 percent are severely mentally ill, 31 percent are physically disabled, 25 percent are employed, 12 percent are veterans, 8 percent are victims of domestic violence, and 1 percent are HIV positive.
- Shelters had to turn away both homeless individuals and homeless families with children.
- City officials estimate that 22 percent of the demand for shelter went unmet last year.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- For the next year, city officials expect the number of homeless families to increase moderately and the number of homeless individuals to continue at about the same level.

POPULATION: 645,966

MEDIAN HOUSEHOLD INCOME: \$53,136

METRO UNEMPLOYMENT RATE: 4.7%

BELOW POVERTY LEVEL: 21.2%

CHARLESTON, SOUTH CAROLINA

MAYOR JOSEPH P. RILEY, JR.

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • HIGH HOUSING COSTS • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • UNEMPLOYMENT 	<ul style="list-style-type: none"> • EVICTION • LOW-PAYING JOBS • UNEMPLOYMENT

Profile of Hunger:

- Requests for emergency food assistance increased by 2 percent over the past year.
- Among persons requesting food assistance, 69 percent are in families, 31 percent are employed, 19 percent are elderly, and 10 percent are homeless.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to decrease substantially.

Profile of Homelessness:

- The number of homeless families decreased by 3 percent and the number of homeless individuals decreased by 4 percent over the past year.
- Among homeless adults, 31 percent are veterans, 24 percent are severely mentally ill, 17 percent are physically disabled, 11 percent are employed, 11 percent are victims of domestic violence, and 1 percent are HIV positive.
- Shelters had to turn away both homeless families and homeless individuals because there were no beds available for them.
- City officials estimate that 60 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of both homeless families and homeless individuals to decrease moderately; resources to provide emergency shelter are expected to continue at about the same level.

POPULATION: 127,999

MEDIAN HOUSEHOLD INCOME: \$50,873

METRO UNEMPLOYMENT RATE: 5.6%

BELOW POVERTY LEVEL: 19.8%

CHARLOTTE, NORTH CAROLINA

MAYOR Daniel 'Dan' Clodfelter

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • HIGH HOUSING COSTS • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LOW-PAYING JOBS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS

Profile of Hunger:

- Requests for emergency food assistance increased by 10-15 percent over the past year.
- Among persons requesting food assistance, 83 percent are employed, 71 percent are in families, 16 percent are elderly, and 6 percent are homeless.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, reduce the number of times a person or family could visit each month, and turn additional people away because of lack of resources.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to remain at about the same level.

Profile of Homelessness:

- The number of homeless families decreased by 27 percent and the number of homeless individuals decreased by 8 percent over the past year.
- Among homeless adults, 20 percent are severely mentally ill, 11 percent are victims of domestic violence, 8 percent are veterans, and 2 percent are HIV positive.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; convert buildings into temporary shelters; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Shelters had to turn away both homeless individuals and homeless families because there were no beds available for them.
- City officials estimate that one-fifth of the demand for shelter went unmet.
- For the next year, city officials expect both the number of homeless families and the number of homeless individuals to decrease moderately; they expect resources to provide emergency shelter to continue at about the same level.

POPULATION: 792,862

MEDIAN HOUSEHOLD INCOME: \$52,916

METRO UNEMPLOYMENT RATE: 5.6%

BELOW POVERTY LEVEL: 16.0%

CHICAGO, ILLINOIS

MAYOR RAHM EMANUEL

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • FAMILY DISPUTES • UNEMPLOYMENT • POVERTY 	<ul style="list-style-type: none"> • DOMESTIC VIOLENCE • FAMILY DISPUTES • INSUFFICIENT INCOME

Profile of Hunger:

- Requests for emergency food assistance increased by 1.2 percent over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to continue at about the same level.

Profile of Homelessness:

- The number of homeless families stayed about the same and the number of homeless individuals increased by 5 percent over the past year.
- Among homeless adults, 33 percent are severely mentally ill, 23 percent are victims of domestic violence, 18 percent are physically disabled, 13 percent are employed, 9 percent are veterans, and 4 percent are HIV positive.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or other subpar sleeping arrangement; and increase the number of beds in current facilities.
- Shelters did not have to turn away either homeless individuals or homeless families because there were no beds available for them.
- For the next year, city officials expect the number of both homeless families and homeless individuals to increase moderately; resources to provide emergency shelter are expected to continue at about the same level.

POPULATION: 2,718,782

MEDIAN HOUSEHOLD INCOME: \$47,408

METRO UNEMPLOYMENT RATE: 6.1%

BELOW POVERTY LEVEL: 22.1%

CLEVELAND, OHIO

MAYOR FRANK G. JACKSON

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • UNEMPLOYMENT • POVERTY • COST OF MEDICINE • LOW BENEFIT LEVELS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • FAMILY DISPUTES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 8 percent over the past year.
- Among persons requesting food assistance, 60 percent are in families and 20 percent are elderly.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per meal at emergency kitchens, and reduce the number of times a person or family can visit a food pantry each month.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to continue at about the same level.

Profile of Homelessness:

- Over the past year, the number of homeless families increased by 14 percent and the number of homeless individuals increased by 1.5 percent.
- Among homeless adults, 41 percent are severely mentally ill, 23 percent are physically disabled, 15 percent are victims of domestic violence, 14 percent are veterans, 10 percent are employed, and 4 percent are HIV positive.
- To accommodate an increase in demand for shelter from families, Cuyahoga County has authorized additional funding to pay for overflow shelter accommodations at a local church.
- Homeless shelters did not turn away homeless families or homeless individuals.
- City officials estimate that none of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families and individuals to continue at about the same level; they expect resources to decrease moderately.

POPULATION: 390,113	MEDIAN HOUSEHOLD INCOME: \$26,556
METRO UNEMPLOYMENT RATE: 5.4%	BELOW POVERTY LEVEL: 34.2%

DALLAS, TEXAS

MAYOR MIKE RAWLINGS

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • MEDICAL OR HEALTH COSTS • POVERTY • DISABILITIES 	<ul style="list-style-type: none"> • LOW-PAYING JOBS • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LOW-PAYING JOBS • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT

Profile of Hunger:

- The number of requests for emergency food assistance decreased by 5.7 percent during the past year.
- For the next year, city officials expect both requests for food assistance and resources to provide food assistance to continue at about the same level.

Profile of Homelessness:

- The number of homeless families increased by 32 percent and the number of homeless individuals decreased by 5 percent over the past year.
- Among homeless adults, 64 percent are physically disabled, 43 percent are severely mentally ill, 22 percent are employed, 13 percent are veterans, 7 percent are victims of domestic violence, and 4 percent are HIV positive.
- To accommodate an increase in demand, shelters consistently had to have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements.
- Homeless shelters did not turn away either homeless families or homeless individuals.
- For the next year, city officials expect the number of homeless families and the number of homeless individuals to increase moderately, and resources to provide emergency shelter to continue at about the same level.

POPULATION: 1,257,676

MEDIAN HOUSEHOLD INCOME: \$42,436

METRO UNEMPLOYMENT RATE: 4.8%

BELOW POVERTY LEVEL: 23.6%

DENVER, COLORADO

MAYOR MICHAEL HANCOCK

REPORTED CAUSES	HUNGER		HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN		INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • POVERTY • SHELTER 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • EVICTION • EMANCIPATION FROM FOSTER CARE • UNEMPLOYMENT • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • FAMILY DISPUTES • UNEMPLOYMENT • POVERTY 	

Profile of Hunger:

- Requests for emergency food assistance increased by 10 percent over the past year.
- Among persons requesting food assistance, 53 percent are in families, 24 percent are elderly, 13 percent are employed, and 8 percent are homeless.
- City officials estimate that 15 percent of the demand for emergency food assistance went unmet over the past year.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to continue at about the same level.

Profile of Homelessness:

- The number of homeless families increased by 9 percent and the number of homeless individuals increased by 5 percent over the past year.
- Among homeless adults, 30 percent are employed, 27 percent are severely mentally ill, 22 percent are physically disabled, 15 percent are veterans, 12 percent are victims of domestic violence, and 3 percent are HIV positive.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; convert buildings into temporary shelters; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away both homeless families and homeless individuals because there were no beds available.
- City officials estimate that 13 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families to increase moderately, the number of homeless individuals to decrease moderately, and resources to provide emergency shelter to stay at about the same level.

POPULATION: 649,495	MEDIAN HOUSEHOLD INCOME: \$49,091
METRO UNEMPLOYMENT RATE: 3.7%	BELOW POVERTY LEVEL: 18.9%

DES MOINES, IOWA

MAYOR FRANK COWNIE

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • HIGH HOUSING COSTS • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES

Profile of Hunger:

- Requests for emergency food assistance increased by 20 percent over the past year.
- Among persons requesting food assistance, 82 percent are in families, half are employed, 7 percent are elderly, and 2 percent are homeless.
- City officials estimate that 30 percent of the overall demand for food assistance went unmet in the past year.
- For the next year, city officials expect requests for food assistance to increase substantially but expect resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- The number of homeless families decreased by 12.8 percent and the number of homeless individuals decreased by 7.1 percent over the past year.
- Among homeless adults, 31 percent are employed, 31 percent are physically disabled, 29 percent are severely mentally ill, 13 percent are victims of domestic violence, 7 percent are veterans, and 5 percent are HIV positive.
- To accommodate an increase in demand, shelters consistently have had clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements, and distributed vouchers for hotel or motel stays because shelter beds were not available. In addition, there was a significant expansion of the singles shelter.
- Homeless shelters had to turn away homeless families because there were no beds available but did not have to turn away homeless individuals.
- City officials estimate that 40 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families and homeless individuals to decrease moderately; they expect resources to provide emergency shelter to continue at about the same level.

POPULATION: 207,510

METRO UNEMPLOYMENT RATE: 4.0%

MEDIAN HOUSEHOLD INCOME: \$44,862

BELOW POVERTY LEVEL: 17.7%

LOS ANGELES, CALIFORNIA

MAYOR ERIC GARCETTI

REPORTED CAUSES	HUNGER		HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN		INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • HIGH HOUSING COSTS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • EVICTION • LOW-PAYING JOBS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • POVERTY 	

Profile of Hunger:

- Requests for emergency food assistance decreased by 4 percent over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- For the next year, city officials expect both requests for food assistance and resources to provide food assistance to continue at about the same level.

Profile of Homelessness

- The number of homeless families decreased by 11.7 percent and the number of homeless unaccompanied individuals increased by 2.9 percent over the last year.
- Among homeless adults, 31 percent are severely mentally ill, 24 percent are physically disabled, 16 percent are veterans, 11 percent are victims of domestic violence, and 3 percent are HIV positive.
- To accommodate an increase in demand, shelters have had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away homeless families and homeless individuals.
- City officials estimate that 52 percent of the demand for shelter went unmet.
- For the next year, officials expect the number of homeless families and the number of homeless individuals to decrease moderately; they expect that resources to provide emergency shelter will decrease substantially.

POPULATION: 3,884,307

METRO UNEMPLOYMENT RATE: 7.2%

MEDIAN HOUSEHOLD INCOME: \$49,745

BELOW POVERTY LEVEL: 21.2%

LOUISVILLE, KENTUCKY

MAYOR GREG FISCHER

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • UNEMPLOYMENT

Profile of Hunger:

- Requests for emergency food assistance increased by 5 percent over the past year.
- Food pantries and emergency kitchens had to reduce the number of times a person or family could visit each month.
- For the next year, city officials expect both requests for food assistance and resources to provide food assistance to increase moderately.

Profile of Homelessness:

- The number of homeless families increased by 9.6 percent and the number of homeless individuals decreased by 2.7 percent over the past year.
- Among homeless adults, 31 percent are severely mentally ill, 30 percent are physically disabled, 16 percent are employed, 16 percent are victims of domestic violence, 11 percent are veterans, and 1 percent are HIV positive.
- To accommodate an increase in demand, shelters had to increase the number of persons or families that can sleep in the same room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away homeless families and homeless individuals because there were no beds available for them.
- City officials estimate that 13 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families to continue at about the same level, the number of homeless individuals to decrease moderately, and resources to provide emergency shelter to continue at about the same level.

POPULATION: 609,893

METRO UNEMPLOYMENT RATE: 5.1%

MEDIAN HOUSEHOLD INCOME: \$44,111

BELOW POVERTY LEVEL: 18.2%

MEMPHIS, TENNESSEE

MAYOR A.C. WHARTON, JR.

REPORTED CAUSES	HUNGER
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none">• UNEMPLOYMENT• LOW WAGES• POVERTY

Profile of Hunger:

- Among persons requesting food assistance, 36 percent are in families, 29 percent are elderly, one-fourth are employed, and 10 percent are homeless.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens.
- Officials estimate that 46 percent of demand for food assistance went unmet over the past year.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to decrease moderately.

POPULATION: 653,450

MEDIAN HOUSEHOLD INCOME: \$36,817

METRO UNEMPLOYMENT RATE: 7.5%

BELOW POVERTY LEVEL: 26.2%

NASHVILLE, TENNESSEE

MAYOR KARL DEAN

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • HIGH HOUSING COSTS • MEDICAL OR HEALTH COSTS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • LACK OF NEEDED SERVICES FOR VARIOUS PROBLEMS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • POVERTY

Profile of Hunger:

- During the last year, requests for emergency food assistance increased by 8 percent.
- Among persons requesting assistance, 70 percent are in families, 26 percent are employed, 18 percent are elderly, and 6 percent are homeless.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- For the next year, city officials expect both requests for food assistance and resources to provide food assistance to increase moderately.

Profile of Homelessness:

- Both the number of homeless families and the number of homeless individuals increased by 5 percent over the past year.
- Among homeless adults, 19 percent are employed, 18 percent are victims of domestic violence, 14 percent are severely mentally ill, 14 percent are veterans, 8 percent are physically disabled, and 1 percent are HIV positive.
- To accommodate an increase in the demand for shelter, shelters had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; convert buildings into temporary shelters, and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- City officials estimate that 25 percent of the demand for shelter went unmet over the past year.
- For the next year, officials expect the number of both homeless families and homeless individuals to increase moderately and resources to provide emergency shelter to increase substantially.

POPULATION: 634,464

METRO UNEMPLOYMENT RATE: 5.0%

MEDIAN HOUSEHOLD INCOME: \$45,982

BELOW POVERTY LEVEL: 19.0%

NORFOLK, VIRGINIA

MAYOR PAUL D. FRAM

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • INADEQUATE BENEFITS • MEDICAL OR HEALTH COSTS 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • FAMILY DISPUTES • POVERTY

Profile of Hunger:

- During the last year, requests for emergency food assistance increased by 3 percent.
- Among persons requesting assistance, 91 percent are in families, 51 percent are employed, 9 percent are elderly, and 8 percent are homeless.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- Officials estimate that 30 percent of the demand for food assistance went unmet over the past year.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to continue at about the same level.

Profile of Homelessness:

- The number of homeless families decreased by less than 1 percent and the number of homeless individuals increased by 3 percent over the past year.
- Among homeless adults, 35 percent are severely mentally ill, 20 percent are veterans, 20 percent are victims of domestic violence, 20 percent are physically disabled, and 10 percent are HIV positive.
- To accommodate an increase in the demand for shelter, shelters have had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- City officials estimate that 27 percent of the demand for emergency shelter went unmet.
- For the next year, officials expect the number of homeless families to decrease moderately, the number of homeless individuals to continue at about the same level, and resources to provide emergency shelter to continue at about the same level.

POPULATION: 246,139	MEDIAN HOUSEHOLD INCOME: \$44,164
METRO UNEMPLOYMENT RATE: 5.3%	BELOW POVERTY LEVEL: 18.2%

PHILADELPHIA, PENNSYLVANIA

MAYOR MICHAEL A. NUTTER

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • EVICTION • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 20 percent over the past year.
- Among persons requesting food assistance, 65 percent are in families, 61 percent are elderly, 60 percent are employed, and 19 percent are homeless.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- One-fifth of the demand for emergency food assistance is estimated to have gone unmet.
- For the next year, city officials expect requests for food assistance to increase moderately while resources to provide food assistance decrease moderately.

Profile of Homelessness:

- Among homeless adults, 29 percent are severely mentally ill, 13 percent are victims of domestic violence, 11 percent are employed, 9 percent are veterans, 3 percent are HIV positive, and 3 percent are physically disabled.
- To accommodate increased demand, shelters have had to increase the number of persons or families that can sleep in a single room, and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away homeless families but not homeless individuals.
- City officials estimate there was an increase in the need for affordable housing that resulted in more low-income families requesting emergency housing.
- For the next year, officials expect the number of both homeless families and homeless individuals to increase moderately and resources to provide emergency shelter to continue at about the same level.

POPULATION: 1,553,165

METRO UNEMPLOYMENT RATE: 5.4%

MEDIAN HOUSEHOLD INCOME: \$37,016

BELOW POVERTY LEVEL: 26.2%

PHOENIX, ARIZONA

MAYOR GREG STANTON

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • EVICTION • UNEMPLOYMENT 	<ul style="list-style-type: none"> • EVICTION • DOMESTIC VIOLENCE • UNEMPLOYMENT

Profile of Hunger:

- Requests for emergency food assistance increased by 11 percent over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources and reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens.
- One-fifth of the demand for emergency food assistance is estimated to have gone unmet.
- For the next year, food bank officials expect requests for food assistance to increase moderately while resources to provide food assistance decrease moderately.

Profile of Homelessness:

- The number of both homeless families and homeless individuals remained the same over the past year.
- Among homeless adults, 26 percent are severely mentally ill, 18 percent are victims of domestic violence, 15 percent are employed, 9 percent are veterans, 5 percent are physically disabled, and 1 percent are HIV positive.
- To accommodate increased demand, shelters had to increase the number of beds.
- Homeless shelters had to turn away both homeless families and homeless individuals over the past year.
- City officials estimate that none of the demand for shelter went unmet.
- For the next year, officials expect the number of homeless families, the number of homeless individuals, and resources to provide emergency shelter all to decrease moderately.

POPULATION: 1,513,367	MEDIAN HOUSEHOLD INCOME: \$47,866
METRO UNEMPLOYMENT RATE: 5.7%	BELOW POVERTY LEVEL: 21.8%

PLANO, TEXAS

MAYOR HARRY LAROSILIERE

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • HIGH HOUSING COSTS • POVERTY 	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW-PAYING JOBS • POVERTY 	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW-PAYING JOBS • POVERTY

Profile of Hunger:

- Requests for emergency food assistance stayed the same during the last year.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens.
- For the next year, food pantry officials expect requests for food assistance to increase moderately and resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- The number of both homeless families and homeless individuals stayed the same over the past year.
- Among homeless adults, 35 percent are employed, 4 percent are veterans, 3 percent are victims of domestic violence, 2 percent are severely mentally ill, and 2 percent are physically disabled.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- Officials estimate that 84 percent of demand for emergency shelter went unmet during the past year.
- For the next year, officials expect both the number of homeless families and the number of homeless individuals to increase moderately and resources to provide emergency shelter to continue at about the same level.

POPULATION: 274,409

METRO UNEMPLOYMENT RATE: 4.8%

MEDIAN HOUSEHOLD INCOME: \$83,193

BELOW POVERTY LEVEL: 7.4%

PROVIDENCE, RHODE ISLAND

MAYOR ANGEL TAVERAS

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • HIGH HOUSING COSTS 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • PRISONER REENTRY • UNEMPLOYMENT

Profile of Hunger:

- Requests for emergency food assistance decreased by 7 percent over the past year.
- Food pantries and emergency kitchens had to turn people away because of lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- For the next year, city officials expect requests for food assistance to continue at about the same level and resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- The number of both homeless families and homeless individuals decreased by 7 percent over the past year.
- Among homeless adults, 36 percent are victims of domestic violence, 34 percent are physically disabled, 27 percent are severely mentally ill, 16 percent are employed, 9 percent are veterans, and 2 percent are HIV positive.
- Homeless shelters had to turn away homeless families.
- City officials estimate that 10 percent of the demand for shelter went unmet.
- For the next year, city officials expect that the number of homeless families, the number of homeless individuals, and resources to provide emergency shelter will decrease moderately.

POPULATION: 177,944	MEDIAN HOUSEHOLD INCOME: \$38,243
METRO UNEMPLOYMENT RATE: 6.3%	BELOW POVERTY LEVEL: 27.9%

SAINT PAUL, MINNESOTA

MAYOR CHRIS COLEMAN

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • LACK OF SNAP BENEFITS • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • DOMESTIC VIOLENCE

Profile of Hunger:

- Requests for emergency food assistance increased over the past year.
- Among people requesting emergency food assistance, 69 percent are employed and 45 percent are members of families.
- Food pantries and emergency kitchens had to reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens.
- For the next year, city officials expect both requests for food assistance and resources to provide food assistance to continue at about the same level.

Profile of Homelessness:

- The number of homeless families decreased and the number of homeless individuals stayed the same over the past year.
- Among homeless adults, 51 percent are physically disabled, 26 percent are severely mentally ill, 24 percent are employed, 22 percent are victims of domestic violence, 9 percent are veterans, and 1 percent are HIV positive.
- To accommodate an increase in demand, shelters had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; they also had to convert buildings into temporary shelters.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- City officials estimate that 3 percent of the demand for shelter went unmet.
- For the next year, city officials expect the number of homeless families, the number of homeless individuals; and resources to provide emergency shelter to continue at about the same level.

POPULATION: 294,873

METRO UNEMPLOYMENT RATE: 3.2%

MEDIAN HOUSEHOLD INCOME: \$46,305

BELOW POVERTY LEVEL: 22.8%

SALT LAKE CITY, UTAH

MAYOR RALPH BECKER

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • LOW WAGES • HIGH HOUSING COSTS • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES

Profile of Hunger:

- Requests for emergency food assistance increased by 16 percent over the past year.
- Among people requesting emergency food assistance, 74 percent are employed, one-third are in families, 23 percent are elderly, and 5 percent are homeless.
- Food pantries and emergency kitchens had to turn away additional people due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- Officials estimate that 17 percent of the demand for emergency food assistance went unmet over the past year.
- For the next year, city officials expect that requests for food assistance will increase moderately while resources to provide food assistance will stay at about the same level.

Profile of Homelessness:

- The number of homeless families increased by 3.3 percent and the number of homeless individuals decreased by 0.4 percent over the past year.
- Among homeless adults, 32 percent are victims of domestic violence, 29 percent are severely mentally ill, 13 percent are veterans, and 2 percent are HIV positive.
- Homeless shelters did not have to turn away homeless families or homeless individuals.
- For the next year, city officials expect the number of homeless families to continue at about the same level, the number of homeless individuals to decrease moderately, and resources to provide emergency shelter to continue at about the same level.

POPULATION: 191,180	MEDIAN HOUSEHOLD INCOME: \$44,510
METRO UNEMPLOYMENT RATE: 3.3%	BELOW POVERTY LEVEL: 19.4%

SAN ANTONIO, TEXAS

MAYOR IVY TAYLOR

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • DOMESTIC VIOLENCE • UNEMPLOYMENT

Profile of Hunger:

- Requests for emergency food assistance decreased over the past year by 18 percent.
- Among persons requesting food assistance, 85 percent are in families, 55 percent are elderly, 46 percent are employed, and 15 percent are homeless.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- City officials estimate that 38 percent of the demand for shelter went unmet.
- For the next year, officials expect requests for food assistance to increase moderately while resources to provide food assistance decrease moderately.

Profile of Homelessness:

- The number of homeless families increased by 19 percent and the number of homeless individuals decreased by 12 percent over the past year.
- Among homeless adults, 30 percent are severely mentally ill, 24 percent are physically disabled, 18 percent are victims of domestic violence, 17 percent are employed, 13 percent are veterans, and 12 percent are HIV positive.
- To accommodate an increase in demand, shelters had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; convert buildings into temporary shelters; and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away homeless families but not homeless individuals.
- City officials estimate that 20 percent of the demand for shelter went unmet.
- For the next year, officials expect the number of homeless families to increase moderately, the number of homeless individuals to decrease moderately, and resources to provide emergency shelter to continue at about the same level.

POPULATION: 1,409,019

METRO UNEMPLOYMENT RATE: 4.5%

MEDIAN HOUSEHOLD INCOME: \$44,937

BELOW POVERTY LEVEL: 20.1%

SAN FRANCISCO, CALIFORNIA

MAYOR EDWIN M. LEE

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • HIGH HOUSING COSTS • LACK OF FOOD STAMPS 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance decreased by 5 percent over the past year.
- Among persons requesting food assistance, 31 percent are elderly, 24 percent are in families, and 16 percent are employed.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food persons can receive at each food pantry visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- City officials estimate that 37 percent of the demand for emergency food assistance was unmet.
- For the next year, officials expect that requests for food assistance will increase substantially but that resources to provide food assistance will decrease substantially.

Profile of Homelessness:

- The number of homeless families decreased by 19 percent and the number of homeless individuals stayed the same over the past year.
- Among homeless adults, 38 percent are severely mentally ill, 24 percent are physically disabled, 20 percent are employed, 16 percent are domestic violence victims, 10 percent are veterans, and 6 percent are HIV positive.
- To accommodate an increase in demand for shelter, a women-only winter shelter was added.
- Homeless shelters had to turn away homeless families but not homeless individuals.
- Officials estimate that 1 percent of the demand for shelter went unmet during the past year.
- For the next year, city officials expect the number of homeless families, the number of homeless individuals, and resources to provide emergency shelter to continue at about the same level.

POPULATION: 837,442

METRO UNEMPLOYMENT RATE: 5.0%

MEDIAN HOUSEHOLD INCOME: \$73,802

BELOW POVERTY LEVEL: 13.2%

SANTA BARBARA, CALIFORNIA

MAYOR HELENE SCHNEIDER

	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • HIGH HOUSING COSTS 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 8 percent.
- Among persons requesting food assistance, 80 percent are in families, 70 percent are employed, 15 percent are elderly, and 12 percent are homeless.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food persons can receive at each food pantry visit and/or the amount of food offered per meal at emergency kitchens, and reduce the quantity of food persons can receive at each food pantry visit.
- City officials estimate that 30 percent of the demand for emergency food assistance has gone unmet.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to continue at about the same level.

Profile of Homelessness:

- The number of homeless families stayed the same and the number of homeless individuals increased by 10 percent over the past year.
- Among homeless adults, 30 percent are employed, 30 percent are severely mentally ill, 20 percent are physically disabled, 20 percent are victims of domestic violence, and 15 percent are veterans.
- To accommodate an increase in demand, shelters had to increase the number of persons or families that can sleep in a single room; consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements; distribute vouchers for hotel or motel stays because shelter beds were not available, and use mats.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- Officials estimate that 15 percent of the demand for shelter went unmet during the past year.
- For the next year, city officials expect the number of homeless families and the number of homeless individuals to continue at about the same level and resources to provide emergency shelter to decrease moderately.

POPULATION: 90,412

MEDIAN HOUSEHOLD INCOME: \$63,758

METRO UNEMPLOYMENT RATE: 5.4%

BELOW POVERTY LEVEL: 14.7%

TRENTON, NEW JERSEY

MAYOR ERIC E. JACKSON

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • UNEMPLOYMENT • LOW WAGES • LACK OF SNAP BENEFITS 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • SUBSTANCE ABUSE AND LACK OF NEEDED SERVICES • POVERTY 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • UNEMPLOYMENT • LACK OF PREVENTION DOLLARS

Profile of Hunger:

- Requests for emergency food assistance increased by 10-12 percent over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources, reduce the quantity of food provided during each visit and/or the amount of food offered per-meal at emergency kitchens, and reduce the number of times a person or family could visit each month.
- One-fifth of the demand for emergency food assistance is estimated to have gone unmet.
- For the next year, city officials expect that requests for food assistance will increase substantially but that resources to provide food assistance will decrease substantially.

Profile of Homelessness:

- The number of homeless families decreased and the number of homeless individuals stayed the same over the past year.
- Among homeless adults, 25 percent are severely mentally ill, 20 percent are physically disabled, 8 percent are veterans, and 4 percent are employed.
- To accommodate an increase in demand, shelters had to consistently have clients sleep on overflow cots, in chairs, in hallways, or use other subpar sleeping arrangements and convert buildings into temporary shelters.
- Homeless shelters did not turn away homeless families or homeless individuals.
- For the next year, city officials expect the number of homeless families to continue at about the same level, the number of homeless individuals to increase moderately, and resources to provide emergency shelter to decrease substantially.

POPULATION: 84,349

METRO UNEMPLOYMENT RATE: 5.1%

MEDIAN HOUSEHOLD INCOME: \$36,727

BELOW POVERTY LEVEL: 26.6%

WASHINGTON, DC

MAYOR VINCENT C. GRAY

REPORTED CAUSES	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS	HOUSEHOLDS WITH CHILDREN
	<ul style="list-style-type: none"> • HIGH HOUSING COSTS • MEDICAL OR HEALTH COSTS • POVERTY 	<ul style="list-style-type: none"> • MENTAL ILLNESS AND LACK OF NEEDED SERVICES • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT 	<ul style="list-style-type: none"> • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY

Profile of Hunger:

- Requests for emergency food assistance increased by 56 percent over the past year.
- Food pantries and emergency kitchens had to turn additional people away due to lack of resources and reduce the number of times a person or family could visit each month.
- Officials estimate that 30 percent of the demand for food assistance went unmet during the past year.
- For the next year, city officials expect requests for food assistance to increase moderately and resources to provide food assistance to decrease moderately.

Profile of Homelessness:

- The number of homeless families increased by 25 percent and the number of homeless individuals increased by 7 percent over the past year.
- Among homeless adults, 20 percent are employed, 15 percent are physically disabled, 12 percent are severely mentally ill, 8 percent are veterans, 2 percent are victims of domestic violence, and 2 percent are HIV positive.
- To accommodate an increase in demand, shelters had to convert buildings into temporary shelters and distribute vouchers for hotel or motel stays because shelter beds were not available.
- Homeless shelters had to turn away both homeless families and homeless individuals.
- Officials estimate that 10 percent of the demand for shelter went unmet.

POPULATION: 646,449

METRO UNEMPLOYMENT RATE: 4.7%

MEDIAN HOUSEHOLD INCOME: \$64,267

BELOW POVERTY LEVEL: 18.5%

Appendix A

City Data on Hunger

POUNDS OF FOOD DISTRIBUTED OVER THE PAST YEAR

City	Pounds of Food	Increase/Decrease/Same	Percent Change
Asheville	3,809,207	increased	8.2
Boston	14,635,094	increased	4.2
Charleston	2,524,353	increased	20.8
Charlotte	45,346,672	increased	12
Chicago	67,554,072	increased	2.2
Cleveland	40,676,107	increased	10
Dallas	46,612,779	decreased	-3
Denver	12,300,000	increased	1
Des Moines	2,290,432	increased	41
Los Angeles	60,678,663	increased	18.77
Louisville	18,200,000	increased	12
Memphis	5,701,742	increased	7.5
Nashville	3,552,224	increased	8
Norfolk	5,119,916	increased	3
Philadelphia	23,596,449	increased	50
Phoenix	47,589,785	increased	4.1
Plano	15,000	increased	10
Providence	4,050,107	decreased	-8
Saint Paul	83,831,394	increased	8
Salt Lake City	36,329,674	increased	5
San Antonio	52,602,447	increased	7
San Francisco	46,412,132	increased	16
Santa Barbara	8,500,000	increased	8
Trenton	2,602,314	decreased	-20
Washington, DC	45,000,000	decreased	-4.3

BUDGET FOR EMERGENCY FOOD ASSISTANCE OVER THE PAST YEAR

City	Total Budget	Increase/Decrease/Same	Percent Change
Asheville	\$528,500.00	increased	2.2
Boston	\$31,400,000.00	increased	7.5
Charleston	\$200,335.00	increased	64
Charlotte	\$4,700,000.00	same	23
Chicago	\$12,287,315.00	decreased	-60.5
Cleveland	\$20,000,000.00	increased	7.5
Dallas	\$89,404,482.00	increased	1
Denver	\$142,150,776	decreased	-4.1
Des Moines	\$1,759,035.00	increased	28
Los Angeles	\$2,611,536.00	increased	3.93
Louisville	\$33,400,000.00	increased	6
Memphis	\$6,000,000.00	increased	7.8
Nashville	\$1,730,218.00	same	
Norfolk	\$800,000.00	increased	3
Philadelphia	\$3,078,128.00	decreased	-18
Phoenix	\$3,000,000.00	same	
Plano		decreased	
Providence	\$2,289,000.00	decreased	-6
Saint Paul	\$132,823,878.00	increased	19.3
Salt Lake City	\$7,911,195.00	increased	12
San Antonio	\$111,000,000.00	increased	3
San Francisco	\$12,300,000.00	increased	2
Santa Barbara	\$550,000.00	increased	15
Trenton	\$575,000.00	decreased	-1
Washington, DC	\$3,770,500.00	decreased	-5.7

SOURCES OF FOOD DISTRIBUTED, BY PERCENT

City	Federal Emergency Food Assistance	Donations From Grocery Chains/Other Food Suppliers	Donations From Individuals	Purchased Food	Other
Asheville	11	67	2	11	9
Boston	15	50	0	35	0
Charleston	18	68	2	6	6
Charlotte	12	81	3	3	1
Chicago	20	52	1	27	0
Cleveland	20	47	4	12	17
Dallas	21	55	1	23	0
Denver	23	62	2	11	2
Des Moines	2	0	0	77	21
Los Angeles	51	41	2	6	0
Louisville	15	73	4	8	
Memphis	1	64	4	20	11
Nashville	5	46	25	24	
Norfolk	9	70	5	16	
Philadelphia	20	21	15	44	
Phoenix	18	60	6	15	1
Plano		35	40	25	
Providence	8	51	8	33	0
Saint Paul	1	83	11		
Salt Lake City	19	31	7	1	42
San Antonio	12	80	3	5	0
San Francisco	15	75	2	8	0
Santa Barbara	15	35	10	40	
Trenton	34	21	11	34	0
Washington, DC	22	45	5	18	10

NUMBER OF REQUESTS FOR EMERGENCY FOOD ASSISTANCE

City	Increased/Decreased/Stayed the Same	Percent Change
Asheville	increased	
Boston	decreased	-1.7
Charleston	increased	2
Charlotte	increased	12.5
Chicago	increased	1.2
Cleveland	increased	8
Dallas	decreased	-5.7
Denver	increased	10
Des Moines	increased	20
Los Angeles	decreased	-4
Louisville	increased	5
Nashville	increased	8
Norfolk	increased	3
Philadelphia	increased	20
Phoenix	increased	11.3
Plano	same	
Providence	decreased	-7
Saint Paul	increased	
Salt Lake City	increased	16
San Antonio	decreased	-18
San Francisco	decreased	-5
Santa Barbara	increased	8
Trenton	increased	11
Washington, DC	increased	56

PERSONS REQUESTING FOOD ASSISTANCE BY CATEGORY

City	Percent In Families	Percent Elderly	Percent Employed	Percent Homeless
Asheville	80	7.1	80	
Boston	60	14	18	8
Charleston	69	19	31	10
Charlotte	71	16	83	6
Cleveland	60	20	0	0
Denver	53	24	13	6
Des Moines	82	7	50	2
Memphis	36	29	25	10
Nashville	70	18	26	6
Norfolk	91	9	51	8
Philadelphia	65	61	60	19
Phoenix	0	0	0	0
Plano	0	0	0	0
Salt Lake City	33	23	74	5
San Antonio	85	55	46	15
San Francisco	24	31	16	
Santa Barbara	80	15	70	12

OUTLOOK FOR NEXT YEAR

City	Expected Requests for Emergency Food Assistance Over Next Year	Expected Resources to Provide Emergency Food Assistance Over Next Year
Asheville	increase moderately	increase moderately
Boston	increase moderately	increase moderately
Charleston	increase moderately	decrease moderately
Charlotte	increase moderately	same
Chicago	increase moderately	same
Cleveland	increase moderately	same
Dallas	same	same
Denver	increase moderately	same
Des Moines	increase substantially	decrease moderately
Los Angeles	same	same
Louisville	increase moderately	increase moderately
Nashville	increase moderately	decrease moderately
Philadelphia	increase moderately	decrease moderately
Phoenix	increase moderately	same
Plano	increase moderately	decrease moderately
Providence	increase moderately	decrease moderately
Saint Paul	increase moderately	decrease moderately
Salt Lake City	same	decrease moderately
San Antonio	same	same
San Francisco	increase moderately	same
Santa Barbara	increase moderately	decrease moderately
Trenton	increase moderately	decrease substantially
Washington, DC	increase moderately	same

Appendix B

City Data on Homelessness

CHANGES IN THE NUMBER OF PERSONS EXPERIENCING HOMELESSNESS OVER PAST YEAR

City	Total Persons	Percent Change	Homeless Families	Percent Change	Unaccompanied Individuals	Percent Change
Asheville	same		increased	10	decreased	-10
Boston	increased	3.8	increased	5.8	increased	3.8
Charleston	decreased	-5	decreased	-3	decreased	-4
Charlotte	decreased	-17	decreased	-27	decreased	-8
Chicago	increased	1	same		increased	5
Cleveland	increased	6	increased	14	increased	1.5
Dallas	increased	11.5	increased	32	decreased	-5
Denver	increased	7	increased	9	increased	5
Des Moines	decreased	-12	decreased	-9.8	decreased	-7.1
Los Angeles	increased	0.3	decreased	-11.7	increased	2.9
Louisville	decreased	-2	increased	9.6	decreased	-2.7
Nashville	increased	5	increased	5	increased	5
Norfolk	increased	2.96	decreased	-0.8	increased	14
Phoenix	same		same		same	
Plano	decreased	21	same		same	
Providence	decreased	-9	decreased	-7	decreased	-7
Saint Paul	decreased	-2	same		same	
Salt Lake City	increased	0.8	increased	3.3	decreased	-0.4
San Antonio	decreased	-3	increased	19	decreased	-12
San Francisco	increased	0.4	decreased	-19	same	
Santa Barbara	same		same		same	
Trenton	decreased		decreased		same	
Washington, DC	increased	12.9	increased	25.2	increased	7

NUMBER OF HOMELESS PEOPLE BY LOCATION AND CATEGORY ON AVERAGE NIGHT

City	On the Streets			In Emergency Shelter			In Transitional Housing		
	Single Adults	Persons in Families	Unaccompanied Youth	Single Adults	Persons in Families	Unaccompanied Youth	Single Adults	Persons in Families	Unaccompanied Youth
Asheville	65	0	0	200	37	3	211	15	0
Boston	180	0	19	1,511	2,207	85	685	272	33
Charleston	425	2	0	74	13	0	33	22	0
Charlotte	155	9	0	671	367	7	359	444	2
Chicago	965	14	75	1,613	248	119	1,124	2,297	155
Cleveland	28	0	0	960	88	0	565	67	0
Dallas	230	12	0	1,153	907	12	442	734	0
Denver	284	64	21	595	352	71	285	981	21
Des Moines	102	0	0	322	105	0	164	200	2
Los Angeles	13,100	1,288	580	3,404	749	26	2,272	1,622	20
Louisville	66	70	4	505	152	64	299	186	27
Nashville	207	0	8	820	228	2	319	108	0
Norfolk	27	0	0	386	15	0	24	136	0
Philadelphia	361	0	0	2,121	1,512	9	505	1,117	0
Phoenix	1,043	9	1	1,387	1,162	9	557	1,707	5
Providence	34	4	6	344	164	2	137	186	0
Saint Paul	46	19	3	431	254	27	139	459	67
Salt Lake City	105	5	0	884	478	0	294	335	2
San Antonio	922	0	0	655	374	8	268	582	0
San Francisco	3,073	33	114	1,522	353	8	571	430	0
Santa Barbara	375	25	20	290	70	5	330	24	
Trenton	33	5	0	230	163	0	168	33	0
Washington, DC	396	0	0	2,825	2,926	3	727	869	2

NUMBER OF UNDUPLICATED HOMELESS PERSONS BY LOCATION AND CATEGORY OVER PAST YEAR

City	In Emergency Shelter				In Transitional Housing			
	Single Adults	Persons in Families	Unaccompanied Youth	Total Persons in Emergency Shelter	Single Adults	Persons in Families	Unaccompanied Youth	Total Persons in Transitional Housing
Boston	10,410	4,880	1,250	16,540	3,201	497	192	3,890
Charleston	688	99		787	126	71		197
Charlotte	671	367	7	1,045	359	444	2	805
Chicago	3,417	306		3,723	2,372	6,194		8,566
Cleveland	5,316	1,633		6,949	1,410	463		1,873
Dallas	1,153	907	12	2,072	442	734		1,176
Denver	5,411	3,000	113	8,524	7,597	7,745	113	15,455
Des Moines	2,349	734	8	3,091	493	354	7	854
Los Angeles	12,319	1,676	211	14,206	3,394	1,323	33	4,750
Louisville	4,842	1,303	647	6,792	1,020	567	1	1,588
Nashville	5,753	1,702	46	7,501	1,063	484		1,547
Norfolk	814	277		1,091	43	262		305
Phoenix	8,512	2,605	197	11,314	821	1,555	16	2,392
Plano					110	120		230
Providence	2,166	805	4	2,975	318	384		702
Salt Lake City	5,110	2,583		7,693	514	532	2	1,048
San Antonio	3,447	1,651		5,098	686	922		1,608
San Francisco	8,498	1,860	15	10,373	571	430		1,001
Santa Barbara	2,000	350	2	2,352	490	40		530
Trenton	1,501	869	3	2,373	408	129	1	538
Washington, DC	9,233	3,822	78	13,133	1,403	984	23	2,410

**NUMBER OF UNACCOMPANIED INDIVIDUALS AND PERSONS IN FAMILIES
WHO ENTERED PERMANENT SUPPORTIVE HOUSING OVER PAST YEAR**

City	Unaccompanied Individuals	Families
Asheville	350	26
Charleston	6	0
Charlotte	106	16
Chicago	775	117
Cleveland	304	115
Denver	295	91
Des Moines	206	71
Los Angeles	946	33
Louisville	937	434
Nashville	630	295
Norfolk	132	32
Phoenix	3	422
Plano	702	384
Providence	111	42
Salt Lake City	906	220
San Antonio	1001	582
San Francisco	764	110
Santa Barbara	140	61
Trenton	57	0
Washington, DC	633	121

HOMELESS ADULTS BY CATEGORY

City	Percent Employed	Percent Veterans	Percent Physically Disabled	Percent HIV Positive	Percent Severely Mentally Ill	Percent Domestic Violence Victims
Asheville		42			40	16
Boston	25	12	31	1	38	8
Charleston	11	31	17	1	24	11
Charlotte		8		2	20	11
Chicago	13	9	18	4	33	23
Cleveland	10	14	23	4	41	15
Dallas	22	13	64	4	43	7
Denver	30	15	22	3	27	12
Des Moines	31	7	31	5	29	13
Los Angeles	7	16	24	3	31	11
Louisville	16	11	30	1	31	16
Nashville	19	14	8	1	14	18
Norfolk	25	20	20	10	35	20
Philadelphia	11	9	3	3	29	13
Phoenix	15	9	5	1	26	18
Plano	35	4	2	0	2	3
Providence	16	9	34	2	27	36
Saint Paul	24	9	51	0.003	26	22
Salt Lake City	0	13	0	2	29	32
San Antonio	17	13	24	12	30	18
San Francisco	20	10	24	6	38	16
Santa Barbara	30	15	20		30	20
Trenton	4	8	20	0	25	0
Washington, DC	20	8	15	2	12	2

NUMBER OF BEDS BY CATEGORY AVAILABLE FOR HOMELESS PERSONS DURING PAST YEAR

City	Total Number of Beds			Total Number of HMIS Participating Beds			Number of New Beds Added During Past Year		
	Emergency Shelter	Transitional Housing	Permanent Supportive Housing	Emergency Shelter	Transitional Housing	Permanent Supportive Housing	Emergency Shelter	Transitional Housing	Permanent Supportive Housing
Asheville	200	260	642	68	254	642	0	0	14
Boston	4675	1108	5814	3373	1101	3937	272	295	
Charleston	136	78	5	100	53	5	0	0	0
Charlotte	1127	815	896	729	723	571	89	0	76
Chicago	2064	3903	8460	1057	3556	6688	0	358	83
Cleveland	1182	734	3965	676	709	3623	58	0	214
Dallas	2466	1539	2897	0	913	2879	266	0	340
Denver	1231	2288	1048	1043	1949	1142	0	20	60
Des Moines	451	530	591	393	483	431	0	92	3
Los Angeles	4919	4900	9708	3371	3022	6513	0	0	365
Louisville	556	583	1650	509	552	1290	33	36	98
Nashville	1169	814	1400	91	412	896	0	28	0
Norfolk	429	144	297	66	109	297	0	0	12
Philadelphia	3644	1929	5502	2924	1667	4972	93	0	120
Phoenix	2722	2981	5666	2081	2374	4946	48	46	376
Plano	2	165	0	0	0	0	0	0	0
Providence	671	403	1397	551	387	1387	0	0	160
Saint Paul	736	665	2094	379	558	2075	0	0	10
Salt Lake City	1656	737	1810	1656	737	1810	0	14	70
San Antonio	1275	1114	1427	1275	1114	1427	0	0	0
San Francisco	1936	1073	7532	1443	456	6859	11	0	388
Santa Barbara	315	335	352	200	70	0	0	0	0
Trenton	275	277	746	251	277	746	0	0	97
Washington, DC	5997	2124	6416	5502	1693	3770	1427	245	422

OUTLOOK FOR NEXT YEAR

City	Expected Number of Homeless Families Over Next Year	Expected Number of Homeless Individuals Over Next Year	Expected Resources to Provide Emergency Shelter Over Next Year
Asheville	increase moderately	decrease moderately	same
Boston	increase moderately	same	
Charleston	decrease moderately	decrease moderately	same
Charlotte	decrease moderately	decrease moderately	same
Chicago	increase moderately	increase moderately	same
Cleveland	same	same	decrease moderately
Dallas	increase moderately	increase moderately	same
Denver	increase moderately	decrease moderately	same
Des Moines	decrease moderately	decrease moderately	same
Los Angeles	decrease moderately	increase moderately	decrease substantially
Louisville	same	decrease moderately	same
Nashville	increase moderately	increase moderately	increase substantially
Norfolk	decrease moderately	same	same
Philadelphia	increase moderately	increase moderately	same
Phoenix	decrease moderately	decrease moderately	decrease moderately
Plano	increase moderately	increase moderately	same
Providence	decrease moderately	decrease moderately	decrease moderately
Saint Paul	same	same	same
Salt Lake City	same	decrease moderately	same
San Antonio	increase moderately	decrease moderately	same
San Francisco	same	same	same
Santa Barbara	same	same	decrease moderately
Trenton	same	increase moderately	decrease substantially

Appendix C

City Contacts

HUNGER CONTACT	HOMELESSNESS CONTACT
Asheville, North Carolina	
Katy German Agency Relations Manager Manna Food Bank 627 Swannanoa River Rd. Asheville, NC 28805 828-299-3663 kgerman@mannafoodbank.org	Heather Dillashaw Community Development Manager City of Asheville 70 Court Plaza Asheville, NC 28801 828-259-5851 hdillashaw@ashevillenc.gov
Boston, Massachusetts	
Edith Murnane Director of Food Initiatives Mayor's Office 1 City Hall Square Boston, MA 02118 617-635-1456 food@boston.gov	Jim Greene Director, Emergency Shelter Commission Boston Public Health Commission 860 Harrison Avenue Boston, MA 02118 617- 635-4507 eshelter@bphc.org
Charleston, South Carolina	
Kelly Kelley Grants Manager Lowcountry Food Bank 2864 Azalea Drive Charleston, SC 29405 843-747-8146 kkelley@lcfbank.org	Anthony Haro Executive Director Lowcountry Homeless Coalition PO Box 20038 Charleston, SC 29413 843-723-9477 anthony@lowcountryhomelesscoalition.org
Charlotte, North Carolina	
Kathy Helms Finance Director Second Harvest Food Bank of Metrolina 500-B Spratt Street Charlotte, NC 28206 704-376-1785 kfhelms@secondharvest.org	Rebecca Pfeiffer CoC Coordinator City of Charlotte Neighborhood and Business Services 600 East Trade Street Charlotte, NC 28202 704-336-2266 rpfeiffer@charlottenc.gov
Chicago, Illinois	
Lorrie Walls Assistant Director The Chicago Department of Family & Support Services 1615 West Chicago Ave. Chicago, IL 60622 312-746-8271 lorrie.walls@cityofchicago.org	Lorrie Walls Assistant Director The Chicago Department of Family & Support Services 1615 West Chicago Ave. Chicago, IL 60622 312-746-8271 lorrie.walls@cityofchicago.org

HUNGER CONTACT	HOMELESSNESS CONTACT
Cleveland, Ohio	
Mary O'Shea Director of Advocacy Greater Cleveland Foodbank 15500 South Waterloo Road Cleveland, OH 44110 216-738-2135 moshea@clevelandfoodbank.org	Ruth Gillett Program Director Cleveland/Cuyahoga County Office of Homeless Services 310 W. Lakeside Avenue, Suite 595 Cleveland, OH 44113 216-420-6844 rgillett@cuyahogacounty.us
Dallas, Texas	
Richard Amory Director of Grants and Research North Texas Food Bank 4500 S. Cockrell Hill Rd. Dallas, TX 75236 214-270-2018 richard@ntfb.org	Shavon Moore Director, Continuum of Care Metro Dallas Homeless Alliance 2816 Swiss Avenue Dallas, TX 75204 972-638-5627 shavon.moore@mdhadallas.org
Denver, Colorado	
Andrea Albo Deputy Director of Assistance Denver Human Services 1200 Federal Boulevard Denver, CO 80204 720-944-3035 Andrea.Albo@denvergov.org	Bennie Milner Executive Director Denver's Road Home 1200 Federal Blvd Denver, CO 80204 720-944-2508 Bennie.Milner@denvergov.org
Des Moines, Iowa	
Kristine Frakes Director of Development Des Moines Area Religious Council 3816 36th St. Suite 202 Des Moines, IA 50310 515-277-6969 x16 kfrakes@dmreligious.org cmjohansen@dmgov.org	Ehren Wright Research Director Iowa Institute for Community Alliances 1111 9th Street, Suite 245 Des Moines, IA 50314 515-246-6643 ehrenwright@iowainstitute.net
Los Angeles, California	
Eli Lipmen Director of Marketing and Communications Los Angeles Regional Food Bank 1734 E. 41st St. Los Angeles, CA 90058 323-234-3030 x 134 elipmen@lafoodbank.org	Clementina Verjan Acting Director, Policy and Planning Los Angeles Homeless Services Authority 811 Wilshire Boulevard, 6th Floor Los Angeles, CA 90017 213-683-3338 cverjan@lahsa.org

HUNGER CONTACT	HOMELESSNESS CONTACT
Louisville, Kentucky	
<p>Stan Siegwald Director of Policy and Planning Dare to Care Food Bank 5803 Fern Valley Road Louisville, KY 40228 502-736-9494 Stan@daretocare.org</p>	<p>Natalie Harris Executive Director The Coalition for the Homeless 1300 S. 4th Street, Ste. 250 Louisville KY 40208 502-626-9550 nharris@louhomeless.org</p>
Memphis, Tennessee	
<p>Estella Mayhue-Greer Executive Director MidSouth Food Bank 239 South Dudley Memphis, TN 38104 901-527-0841 egreer@midsouthfoodbank.org</p>	<p>Amber Walker Communications Specialist Community Alliance for the Homeless 44 N. 2nd St., Suite 302 Memphis, TN 38103 901-527-1302 amber@cafth.org</p>
Nashville, Tennessee	
<p>Kimberly Molnar Vice President, Programs Second Harvest Food Bank of Middle Tennessee 331 Great Circle Road Nashville, TN 37228 615-627-1575 kmolnar@secondharvestmidtn.org</p>	<p>Suzie Tolmie Homeless Coordinator MDHA 701 S 6th St Nashville, TN 37206 615-252-8574 stolmie@nashville-mdha.org</p>
Norfolk, Virginia	
<p>Michael Wasserberg Director Norfolk Office to End Homelessness 232 Main Street Norfolk, VA 23510 757-664-4465 michael.wasserberg@norfolk.gov</p>	<p>Michael Wasserberg Director Norfolk Office to End Homelessness 232 Main Street Norfolk, VA 23510 757-664-4465 michael.wasserberg@norfolk.gov</p>
Philadelphia, Pennsylvania	
<p>Steveanna Wynn Executive Director SHARE Food Program, Inc. 2901 W. Hunting Park Avenue Philadelphia, PA 19129 215-223-3028 swynn@sharefoodprogram.org</p>	<p>Roberta Cancellier Deputy Director City of Philadelphia Office of Supportive Housing 1401 JFK Blvd, 10th Flr Philadelphia, PA 19102 215-686-7105 roberta.cancellier@phila.gov</p>

HUNGER CONTACT	HOMELESSNESS CONTACT
Phoenix, Arizona	
Brian Simpson Director of Communications Association of Arizona Food Banks 2100 N Central Ave, #230 Phoenix, AZ 85004 602-528-3434 brian@azfoodbanks.org	Libby Bissa Family Advocacy Center Director City of Phoenix 2120 N. Central Ave, 2nd floor Phoenix, AZ 85004 602-534-3070 libby.bissa@phoenix.gov
Plano, Texas	
Sylvia Martinez Executive Director God's Pantry 3420 E. 14 th Street, #101 Plano, TX 75074 972-633-9777 gods_pantry2014@yahoo.com	Jim Malatich Director of Operations The Samaritan Inn 1725 N. McDonald St. McKinney, TX 75071 972-632-1290 jmalatich@thesamaratininn.org
Providence, Rhode Island	
Andrew Schiff CEO Rhode Island Community Food Bank 200 Niantic Avenue Providence RI 02907 401-942-6325 aschiff@rifoodbank.org	Eric Hirsch Professor of Sociology Providence College 1 Cunningham Square Providence, RI 02918 401-865-2510 ehirsch@providence.edu
Saint Paul, Minnesota	
Joe Collins, Program Coordinator Saint Paul Department of Planning and Economic Development 25 West 4th Street Saint Paul, MN 55102 651-266-6020 joe.collins@ci.stpaul.mn.us lscheidecker@2harvest.org	Joe Collins, Program Coordinator Saint Paul Department of Planning and Economic Development 25 West 4th Street Saint Paul, MN 55102 651-266-6020 joe.collins@ci.stpaul.mn.us lscheidecker@2harvest.org
Salt Lake City, Utah	
Julie Adams-Chatterley Grant Writer & Data Specialist Utah Food Bank 3150 S 900 W Salt Lake City, UT 84119 801-887-1225 JulieAC@UtahFoodBank.org	Elizabeth Buehler Homeless Services Coordinator Salt Lake City Corporation PO Box 145488 Salt Lake City, UT 84114-5488 801-535-7122 Elizabeth.buehler@slcgov.com
San Antonio, Texas	
Stephanie Smith Director of Government Relations and Advocacy San Antonio Food Bank 5200 Old Hwy 90 W San Antonio TX 78227 210-431-8308 stesmith@safodbank.org	Melody Woosley Director City of San Antonio Dept. of Human Services 106 S. St. Mary's Street, 7th Floor San Antonio TX 78205 210-207-8134 melody.woosley@sanantonio.gov

HUNGER CONTACT	HOMELESSNESS CONTACT
San Francisco, California	
Joyce Crum Director, Housing & Homeless Human Services Agency Programs PO Box 7988 San Francisco, CA 94120-7988 415-557-6444 Joyce.Crum@sfgov.org	Joyce Crum Director, Housing & Homeless Human Services Agency Programs PO Box 7988 San Francisco, CA 94120-7988 415-557-6444 Joyce.Crum@sfgov.org
Santa Barbara, California	
Jaime Nichols Director of Operations Foodbank of Santa Barbara County 4554 Hollister Avenue Santa Barbara, CA 93110 805-697-5741 x105 jnichols@foodbanksbc.org	Sue Gray Community Development Business Manager City of Santa Barbara P.O. Box 1990 Santa Barbara, CA 93102-1990 805-564-5504 sgray@santabarbaraca.gov
Trenton, New Jersey	
Ruche Gadre Director Mercer Street Friends Food Bank 824 Silvia Street Ewing, NJ 08534 609-406-0503 rgadre@mercerstreetfriends.org	Vernett Sherrill Grants Administrator City of Trenton 319 East State Street Trenton, NJ 08608 609-815-2169 vsherrill@trentonnj.org
Washington, DC	
Paula Reichel DC Regional Director Capital Area Food Bank 4900 Puerto Rico Ave NE WashingtonDC 20017 202-644-9827 preichel@capitalareafoodbank.org	Darrell Cason Policy Analyst DC Department of Human Services 64 New York Avenue, NE Washington, DC 20002 202-671-4389 Darrell.cason3@dc.gov

Appendix D

Survey Instrument

The U.S. Conference of Mayors 2014 Status Report on Hunger and Homelessness Survey Instrument

The deadline to submit information is Friday, November 7, 2014

Contact information for the person(s) who can answer questions about the data submitted in this survey:

*** Hunger Contact Person**

Name: _____
Title: _____
Agency: _____
Address: _____
City: _____
State: _____
ZIP/Postal Code: _____
Email Address: _____
Phone Number: _____

*** Homelessness Contact Person**

Name: _____
Title: _____
Agency: _____
Address: _____
City: _____
State: _____
ZIP/Postal Code: _____
Email Address: _____
Phone Number: _____

PART I: HUNGER

Supply of Emergency Food

The following questions are addressed to the primary supplier of emergency food assistance in your city. In most cases this will be the food bank that supplies food pantries and emergency kitchens in your city. If there are multiple central distributors of emergency food assistance in your area, please distribute these survey questions to each of them and collate the results.

The year covered by this survey is September 1, 2013 – August 31, 2014. If you do not have data for this 12-month period, what 12-month period are you reporting on?

1. How many pounds of food did you distribute over the last year?

Pounds of food _____

2. Did the total quantity of food distributed ___increase, ___decrease, or ___stay the same over the last year?

2. a) If increased or decreased, by what percent? (If reporting a decrease, please put a minus sign before the number.) _____

3. What was your total budget for emergency food assistance this year? (Please include both private and public – federal, state, and local – funding.) _____

4. Did your total budget for emergency food purchases ___increase, ___decrease, or ___stay the same over the last year?

4. a) If increased or decreased, by what percent? (If reporting a decrease, please put a minus sign before the number.) _____

5. What percentage of the food you distributed came from the following sources?

(NOTE: The sum of the food distribution by source must equal 100%)

a. Federal emergency food assistance _____

b. Donations from grocery chains/other food suppliers _____

c. Donations from individuals _____

d. Purchased food _____

e. Other _____

6. Over the last year, have you made any significant changes to the types of food that you purchase?

___ Yes ___ No

6.a) If yes, please explain.

7. What do you expect will be your biggest challenge in addressing hunger in your area in the coming year?

Persons Receiving Emergency Food Assistance

8. Has the total number of requests for emergency food assistance in your city or county ___increased, ___decreased, or ___stayed the same during the last year?

8. a) If increased or decreased, by what percent? (If reporting a decrease, please put a minus sign before the number.) _____

9. If information is available: What percent of requests for emergency food assistance came from persons in the following categories? (NOTE: The categories are not mutually exclusive and the same person can be included in more than one group.)

- a. Persons in families _____
- b. Elderly persons _____
- c. Persons who are employed _____
- d. Persons who are homeless _____

10. Over the last year, has there been an increase in the *number* of persons requesting food assistance for the first time? ____Yes ____No

- 10a. If yes, would you characterize this increase as moderate or substantial?
____Moderate
____Substantial

11. Over the last year, has there been an increase in the *frequency* of persons visiting food pantries and/or emergency kitchens each month? ____Yes ____No

- 11a. If yes, would you characterize this increase as moderate or substantial?
____Moderate
____Substantial

Unmet Need for Emergency Food Assistance

12. Over the last year, have emergency kitchens and/or food pantries had to take any of the following actions? (Check all that apply)

- ____Turn additional people away because of lack of resources
- ____Reduce the quantity of food persons can receive at each food pantry visit and/or the amount of food offered per meal at emergency kitchens
- ____Reduce the number of times a person or family can visit a food pantry each month

13. Please estimate the percentage of the overall demand for emergency food assistance in your city that was unmet over the past year. (NOTE: This is the percentage of all persons needing assistance who did not receive it.) _____

Causes of Hunger

14. What are the **THREE** main causes of hunger in your city?

- ____Unemployment
- ____Low wages
- ____High housing costs
- ____Inadequate benefits (e.g., TANF, SSI)
- ____Medical or health costs
- ____Substance abuse
- ____Utility costs
- ____Lack of SNAP benefits
- ____Lack of education
- ____Poverty
- ____Other

If other, please specify.

Policy and Programs Addressing Hunger

15. What are the top **THREE** things your city needs to help reduce hunger?

- Substance abuse/mental health services
 - Employment training programs
 - More jobs
 - Utility assistance programs
 - More affordable housing
 - Increase in SNAP benefits
 - Lower gas prices/ better public transportation
 - Other
- If other, please specify.

16. Please provide a brief description (250-500 words) of an exemplary program or effort underway in your city that prevents, reduces, or otherwise responds to the problems of hunger.

Outlook for the Next Year

17. Given current projections of economic conditions and unemployment for your city, do you expect requests for emergency food assistance over the next year to:

- Continue at about the same level?
- Increase moderately?
- Increase substantially?
- Decrease moderately?
- Decrease substantially?

18. Given the current state of public and private agency budgets, do you expect resources to provide emergency food assistance in your city over the next year to:

- Continue at about the same level?
- Increase moderately?
- Increase substantially?
- Decrease moderately?
- Decrease substantially?

PART II: HOMELESSNESS

The year covered by this survey is September 1, 2012 – August 31, 2013. If you do not have data for this 12-month period, what 12-month period are you reporting on?

Persons Experiencing Homelessness

Questions 19 through 25 pertain to the number and characteristics of homeless persons in your city. The best source of information to answer these questions will be your city's Homeless Management Information System (HMIS).

19. Has the *total number of homeless persons* in your city ___increased, ___decreased, or ___stayed the same over the past year?

20. a) If increased or decreased, by what percent? (If reporting a decrease, please put a minus sign before the number.) _____

20. Has the *number of homeless families* in your city ___increased, ___decreased, or ___stayed the same over the past year?

21. a) If increased or decreased, by what percent? (If reporting a decrease, please put a minus sign before the number.) _____

21. Has the *number of homeless unaccompanied individuals* in your city ___increased, ___decreased, or ___stayed the same over the past year?

22. a) If increased or decreased, by what percent? (If reporting a decrease, please put a minus sign before the number.) _____

22. Please provide the following information to report the number of homeless persons in the following categories on an *average night* over the last year.

By Household Type: On the Streets

Single adults _____

Persons in families _____

Unaccompanied youths _____

By Household Type: In Emergency Shelter

Single adults _____

Persons in families _____

Unaccompanied youths _____

By Household Type: In Transitional Housing

Single adults _____

Persons in families _____

Unaccompanied youths _____

23. Please provide the following information to report the number of *unduplicated homeless persons* in the following categories over the past year.

By Household Type: In Emergency Shelter

Single adults _____

Persons in families _____

Unaccompanied youths _____

By Household Type: In Transitional Housing

Single adults _____

Persons in families _____

Unaccompanied youths _____

24. How many *unaccompanied individuals* entered permanent supportive housing over the past year?
Number of individuals who entered supportive housing _____

25. How many *families* entered permanent supportive housing over the past year?
Number of families who entered supportive housing _____

26. Please estimate the *percentage of homeless adults* in the following categories. (NOTE: The same person can appear in multiple categories.)

Categories of Homeless Adults

Employed _____

Veterans _____

Physically disabled _____

HIV positive _____

Severely mentally ill _____

Domestic violence victims _____

27. Please list below the number of beds available for homeless persons in each housing type during the last year. (If your city participates in the U.S. Department of Housing and Urban Development's Continuum of Care annual application process, this information is readily available on the most recent Housing Inventory Chart.)

By Housing Type: Total Number of Beds

Emergency shelter _____

Transitional housing _____

Permanent supportive housing _____

By Housing Type: Number of HMIS Participating Beds

Emergency shelter _____

Transitional housing _____

Permanent supportive housing _____

By Housing Type: Number of New Beds Added During the Last Year

Emergency shelter _____

Transitional housing _____

Permanent supportive housing _____

28. Have shelters in your city had to make any of the following changes to accommodate an increase in the demand for shelter? (Check all that apply)

___ Increase the number of persons or families that can sleep in a single room

___ Consistently have clients sleep on overflow cots, in chairs, in hallways, or other subpar sleeping arrangements

___ Convert buildings into temporary shelters

___ Distribute vouchers for hotel or motel stays because shelter beds were not available

___ Other

If other, please specify.

29. What are the **THREE** main causes of homelessness among *families with children* in your city?

- Mental illness and the lack of needed services
- Lack of affordable housing
- Low-paying jobs
- Domestic violence
- Medical or health costs
- Family disputes
- Substance abuse and lack of needed services
- Foreclosure
- Eviction
- Loss of home to fire/other disaster
- Unemployment
- Poverty
- Other

If other, please specify.

30. What are the **THREE** main causes of homelessness among *unaccompanied individuals* in your city?

- Mental illness and the lack of needed services
- Lack of affordable housing
- Foreclosure
- Eviction
- Low-paying jobs
- Domestic violence
- Family disputes
- Substance abuse and lack of needed services
- Emancipation from foster care
- Prisoner reentry
- Unemployment
- Poverty
- Other

If other, please specify.

The Unmet Need for Emergency Shelter

31. Do emergency shelters in your city have to turn away *unaccompanied individuals* experiencing homelessness because there are no beds available for them? Yes No

32. Do emergency shelters in your city have to turn away *families with children* experiencing homelessness because there are no beds available for them? Yes No

33. Please estimate the percentage of the overall demand for emergency shelter in your city that was unmet over the past year. (NOTE: This is the percentage of all persons needing assistance who did not receive it) _____

Homeless Veterans

The Department of Veterans Affairs has set a goal of ending homelessness among veterans by the end of 2015. HUD and VA continue to fund efforts such as the HUD-VA Supportive Housing Program, the VA Homeless Grant and Per Diem Program, and the Supportive Services for Veteran Families Program. Last year, HUD's Point-in-time count of homeless persons showed a drop of 72 percent in the homeless veterans population between 2011 and 2012 – the continuation of a positive year-to-year trend.

Growing numbers of young veterans in the homeless population have been a concern, however, particularly as the U.S. presence in Iraq and Afghanistan lessens and larger numbers of troops return and separate from military service.

Please describe the status of efforts to serve the homeless veterans population in your city. If possible, please include the following:

34. Has your city been successful in obtaining HUD, VA, and any other funds targeted to homeless veterans? Yes No

35. Have your efforts to target homeless veterans been successful in terms of reducing the population?
 Yes No

If yes, please explain.

36. Have your efforts to target homeless veterans been successful in other ways? Yes No
If yes, please explain.

37. What additional public or private resources are required in your city to meet the current unmet need for services to veterans?

38. Does your experience suggest that the VA's goal of eliminating veterans' homelessness by the end of 2015 will be reached? Yes No
If yes, please explain.

39. Please provide a brief description (250-500 words) of an exemplary program or effort underway in your city that prevents or responds to the problems of homeless veterans.

Policies and Programs Addressing Homelessness

40. During the last year, has your city adopted any policies aimed at preventing homelessness among households that have lost their homes to foreclosure? Yes No
If yes, please describe.

41. In previous years has your city adopted any such policies? Yes No
If yes, please explain.

42. What are the top THREE things your city needs to help reduce homelessness?

- More permanent supportive housing for persons with disabilities
- More mainstream assisted housing (e.g., Housing Choice Vouchers)
- Better coordination with mental health service providers
- More substance abuse services
- More employment training programs
- More or better paying employment opportunities
- Other

If other, please specify.

43. Please provide a brief description (250-500 words) of an exemplary program or effort underway in your city that prevents or responds to the problems of homelessness.

Outlook for the Next Year

44. Given current projections of economic conditions, unemployment, and other factors affecting homelessness in your city, do you expect the number of homeless *families* over the next year to:

- Continue at about the same level?
- Increase moderately?
- Increase substantially?
- Decrease moderately?
- Decrease substantially?

45. Given current projections of economic conditions, unemployment, and other factors affecting homelessness in your city, do you expect the number of homeless *unaccompanied individuals* over the next year to:

- Continue at about the same level?
- Increase moderately?
- Increase substantially?
- Decrease moderately?
- Decrease substantially?

46. Given the current state of public and private agency budgets, do you expect resources to provide emergency shelter in your city over the next year to:

- Continue at about the same level?
- Increase moderately?
- Increase substantially?
- Decrease moderately?
- Decrease substantially?

Methodology

47. Please describe the sources of data you used to complete this survey and provide any contextual information that you feel we should have in order to accurately report your data.

Appendix E

List of Past Reports

Since 1982 the U.S. Conference of Mayors has completed numerous reports on hunger, homelessness and poverty in cities. These reports have documented the causes and the magnitude of the problems, how cities were responding to them and what national responses were required. They include:

1. Human Services in FY82: Shrinking Resources in Troubled Times, October 1982
2. Hunger in American Cities, June, 1983
3. Responses to Urban Hunger, October, 1983
4. Status Report: Emergency Food, Shelter and Energy Programs in 20 Cities, January, 1984
5. Homelessness in America's Cities: Ten Case Studies, June, 1984
6. Housing Needs and Conditions in America's Cities, June, 1984
7. The Urban Poor and the Economic Recovery, September, 1984
8. The Status of Hunger in Cities, April, 1985
9. Health Care for the Homeless: A 40-City Review, April 1985
10. The Growth of Hunger, Homelessness and Poverty in America's Cities in 1985: A 25-City Survey, January, 1986
11. Responding to Homelessness in America's Cities, June 1986
12. The Continued Growth of Hunger, Homelessness and Poverty in America's Cities in 1986; A 25-City Survey, December, 1986
13. A Status Report on Homeless Families in America's Cities: A 29-City Survey, May, 1987
14. Local Responses to the Needs of Homeless Mentally Ill Persons, May, 1987
15. The Continuing Growth of Hunger, Homelessness and Poverty in America's Cities: 1987. A 26-City Survey, December, 1987
16. A Status Report on The Stewart B. McKinney Homeless Assistance Act of 1987, June, 1988
17. A Status Report on Hunger and Homelessness in America's Cities: 1988. A 27-City Survey, January, 1989
18. Partnerships for Affordable Housing an Annotated Listing of City Programs, September, 1989
19. A Status Report on Hunger and Homelessness in America's Cities: 1989. A 27-City Survey, December, 1989
20. A Status Report on Hunger and Homelessness in America's Cities: 1990 A 30-City Survey, December, 1990
21. A City Assessment of the 1990 Shelter and Street Night count. A 21-City Survey, June 1991
22. Mentally Ill and Homeless. A 22-City Survey, November 1991
23. A Status Report on Hunger and Homelessness in America's Cities: 1991, A 28-City Survey, December 1991
24. A Status Report on Hunger and Homelessness in America's Cities: 1992 A 29-City Survey, December 1992
25. Addressing Hunger and Homelessness in America's Cities, June 1993
26. A Status Report on Hunger and Homelessness in America's Cities: 1993 A 26-City Survey, December 1993
27. A Status Report on Hunger and Homelessness in America's Cities: 1994. A 30-City Survey, December 1994
28. A Status Report on Hunger and Homelessness in America's Cities: 1995. A 29-City Survey, December 1995
29. A Status Report on Hunger and Homelessness in America's Cities: 1996. A 29-City Survey, December 1996

30. A Status Report on Hunger and Homelessness in America's Cities: 1997, A 29-City Survey, December 1997
31. A Status Report on Hunger and Homelessness in America's Cities: 1998, A 26-City Survey, December 1998
32. A Status Report on Hunger and Homelessness in America's Cities: 1999, A 25-City Survey, December 1999
33. A Status Report on Hunger and Homelessness in America's Cities: 2000, A 29-City Survey, December 2000
34. A Status Report on Hunger and Homelessness in America's Cities: 2001, A 29-City Survey, December 2001
35. A Status Report on Hunger and Homelessness in America's Cities: 2002, A 25-City Survey, December 2002
36. A Status Report on Hunger and Homelessness in America's Cities: 2003, A 25-City Survey, December 2003
37. A Status Report on Hunger and Homelessness in America's Cities: 2004, A 27-City Survey, December 2004
38. A Status Report on Hunger and Homelessness in America's Cities: 2005, A 24-City Survey, December 2005
39. A Status Report on Hunger and Homelessness in America's Cities: 2006, A 23-City Survey, December 2006
40. A Status Report on Hunger and Homelessness in America's Cities: 2007, A 23-City Survey, December 2007
41. A Status Report on Hunger and Homelessness in America's Cities: 2008, A 25-City Survey, December 2008
42. Childhood Anti-Hunger Programs in 24 Cities, November 2009
43. A Status Report on Hunger and Homelessness in America's Cities: 2009, A 27-City Survey, December 2009
44. Strategies to Combat Childhood Hunger in Four U.S. Cities: Case Studies of Boston, New Haven, San Francisco, and Washington, D.C., November 2010
45. A Status Report on Hunger and Homelessness in America's Cities: 2010, A 29-City Survey, December 2010
46. A Status Report on Hunger and Homelessness in America's Cities: 2011, A 29-City Survey, December 2011
47. A Status Report on Hunger and Homelessness in America's Cities: 2012, A 25-City Survey, December 2012
48. A Status Report on Hunger and Homelessness in America's Cities: 2013, A 25-City Survey, December 2013



THE UNITED STATES CONFERENCE OF MAYORS

Tom Cochran

Tom Cochran, CEO and Executive Director

1620 Eye Street, NW
Washington, DC 20006
Tel: 202.293.7330
Fax: 202.293.2352

Email: tcochran@usmayors.org
usmayors.org