

Connecticut Counts

2016 Report on Homelessness in Connecticut

May, 2016

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This report can be downloaded for free at: www.cceh.org

The Connecticut Coalition to End Homelessness

The Connecticut Coalition to End Homelessness, in partnership with members and communities throughout the state, creates change through leadership, advocacy, and building the capacity of members and the field to respond to environmental challenges. Our collective mission is to prevent and end homelessness in Connecticut.

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Support

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- BH Care
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- Northwest Mental Health Authority
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- Rushford Center
- Supportive Housing WORKS
- St. Vincent DePaul Mission of Bristol, Inc.
- Thames River Community Service, Inc.
- United Way of Southeastern CT
- Western CT Mental Health Network
- Windham Regional Community Council

Questions

Any questions about the content of this report can be directed to Brian Roccapiore at broccapiore@cceh.org

Introduction

Thank you for your interest in efforts to end homelessness in Connecticut. Data is an increasingly important driver of our efforts to end homelessness: the 2016 Point-in-Time count provides critical information.

The 2016 count of both sheltered and unsheltered homelessness took place in the middle of Connecticut's efforts to achieve major milestones in ending homelessness across our state. Governor Dannel P. Malloy, providers across Connecticut, and many of our partners embraced the goals of Zero: 2016 – to end veteran homelessness in Connecticut and to end chronic homelessness (the long-term homelessness of people with disabilities) by the end of 2016.

Homeless providers are working together with state and federal colleagues like never before to coordinate efforts, de-duplicate services, and target resources to reach those most in need, first. Through this great teamwork, we have secured a major victory: the federal government confirmed in February, 2016 that our state was the second in the nation to functionally end veteran homelessness.

This means that we have built a system to house and provide supports as needed to all veterans long homeless, and to secure housing for any veteran newly identified as homeless in 90 days or less. We would like to ensure that no veteran will ever face homelessness again, but this is an impossible task. The unpredictability of life, economic or personal upheaval, can result in homelessness for many people at any time. By building a system that is flexible, adequately resourced, and data-driven, we can stay responsive to changing conditions and be ready to serve any veteran in need going forward.

Building on this momentum, we are making great strides to end chronic homelessness. As with veterans, the real work lies not in imagining that there is one finish line we can cross and be “done.” Rather, we have our eyes on the real prize: building a homelessness response system that meets the dynamic conditions of human need. The 2016 Point-in-Time count reflects that our efforts are working – Connecticut experienced a 20 percent decrease in chronic homelessness since just 2015, and we are on track to end chronic homelessness in our state this year!

We are grateful to the many sponsors, listed on the facing page, who make possible the Point-in-Time Count. This effort involves dozens of providers and hundreds of volunteers who step up to help. We thank all of them – for taking part in the count, and for working every day with those experiencing homelessness to meet their needs and help them forge paths to housing.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jim Kpm Bth".

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Summary

Key Findings

On the night of January 26th, **3,911** persons were homeless in Connecticut. A 3.4% decrease from last year, and a 13% decrease since 2007.

2016 represents the **lowest total ever** in a statewide CT PIT count.

The percentage of people experiencing chronic homelessness, long term homelessness and living with a severe disability, continues to decline to its lowest point ever, dropping **20%** since 2015.

Only **45** veterans were identified in emergency shelters, **a 44% decrease** since 2015; 128 veterans in transitional housing, **dropping 20%** since 2015.

673 people were estimated to be unsheltered.

Purpose

Since 2005, the U.S. Department of Housing and Urban Development (HUD) has required communities to count and report the number of people experiencing homelessness on one night during the last ten days of January. This year in Connecticut the night of the count was January 26th.

The Connecticut Coalition to End Homelessness (CCEH) continues to lead communities across the state in conducting annual homelessness counts, mobilizing non-

profits, local and state government agencies, and hundreds of private citizen volunteers to gather critical data in order to inform efforts to prevent and end homelessness.

Every other year, HUD requires communities to conduct unsheltered counts of people living in a place unfit for human habitation (such as in abandoned buildings, under bridges, or in parks). This year, HUD required only a sheltered count. However the State of Connecticut elected to conduct an unsheltered count to provide more information on homelessness in our state.

To assist in this process, CCEH was able to identify resources to supply our volunteers with an optional mobile application that allowed for real time data entry from the field and eliminated the need for paper surveys. Volunteers conducted approximately 20% of the unsheltered surveys using this tool.

Section 1: CT PIT 2016 – Total numbers

About *CT PIT 2016*

Since 2005, HUD has required applicants for federal homeless assistance grants to count and report the number of people experiencing homelessness in their communities on one night during the last ten days of January.

Homeless Point-in-Time counts across the country are used as a primary data source to inform federal funding for programs and services to end homelessness and to track progress against established goals.

Chronic Homelessness Definition Change

In December of 2015, HUD published the Final Rule on Defining “Chronically Homeless,” providing a final federal definition of the population of people experiencing chronic homelessness.

Under the new definition, to be considered chronically homeless a person must have a disability and (a) have experienced homelessness, as defined as living in a place not meant for human habitation, in an emergency shelter, or a safe haven for the last 12 months continuously, or (b) have experienced homelessness on at least four occasions in the last three years where those occasions cumulatively total at least 12 months.

Previously, HUD had not defined what constitutes an “episode” for eligibility purposes, leaving local Continua of Care and providers to develop their own criteria. Under

the new definition, HUD now states that someone can be chronically homeless under the episodic criteria so long as they have experienced homelessness in **any** 12 months in the last three years across at least **four** episodes, regardless of the length of any particular episode.

The shift in definition is HUD’s intent to prioritize households who have been homeless for very long periods of time and who may require more consistent engagement and assistance to exit homelessness. The Final Rule clarifies the definition in a way that gets closer to the originally intended target population – the subset of people with high service needs and disabilities who, if not provided with intensive housing assistance and supportive services, would likely remain homeless.

Findings

Statewide, **3,911** people were experiencing homelessness on the night of January 26th, 2016: **2,370** in emergency shelter, **868** in transitional housing, and **673** unsheltered. This represents an overall **decrease of 3.4% statewide from last year, and a 13% decrease since 2007.**

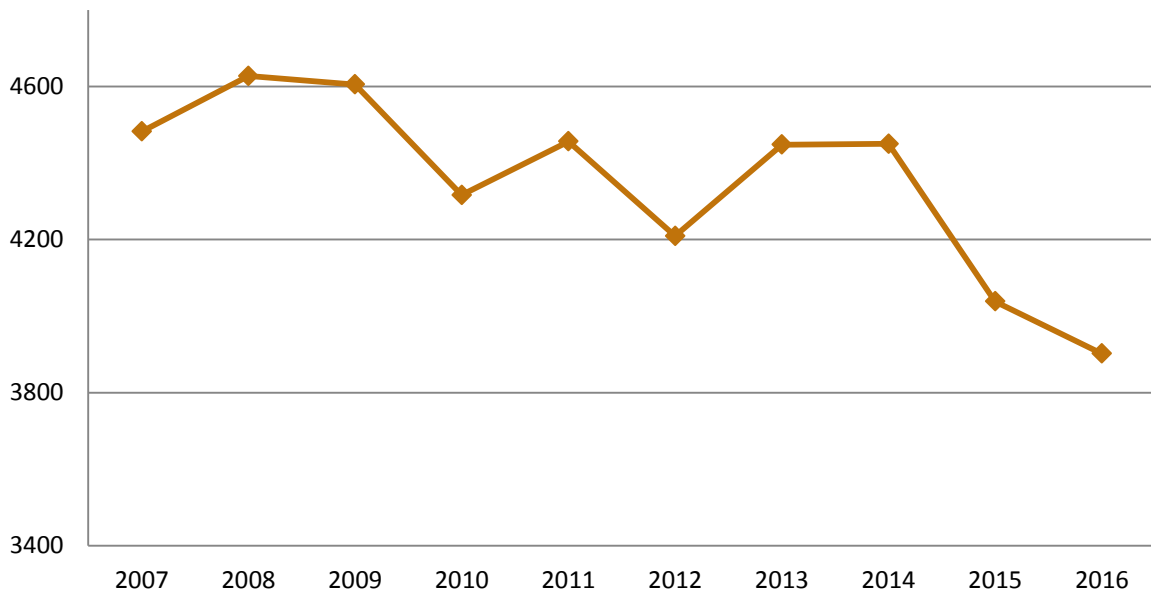
CT PIT 2016 is the lowest total number of persons ever counted during a Point-In-Time count in Connecticut (Figure 1).

Table 1 illustrates the distribution of the various populations, both sheltered and unsheltered, who were counted for *CT PIT 2016*.

Table 1

Population	Number of Persons
Sheltered	
Adults in Families	506
Children in Families	820
Adult Individuals	1,904
Unaccompanied Youth	8
Unsheltered	
Adults in Families	3
Children in Families	3
Adult Individuals	667
Unaccompanied Youth	0
Total Persons	3,911

Figure 1 – Total Homeless Population Since 2007



Individuals

Statewide **2,571** individuals (over the age of 18 without an accompanying minor) were homeless on the night of *CT PIT 2016*. This is a 5% decrease from last year. The total number of sheltered individuals decreased in Connecticut, while the unsheltered number slightly increased. Homelessness among sheltered individuals decreased 10% (218 persons), and increased 12% (72 persons) among those who were unsheltered. While the much warmer weather may have contributed to higher numbers in the unsheltered population, coordinated efforts across the state at housing the longest-term, most vulnerable homeless are clearly having an impact at reducing homelessness among individuals. Figure 2 illustrates this reduction.

There were also **eight** unaccompanied youth identified in projects on the night of *CT PIT 2016*.

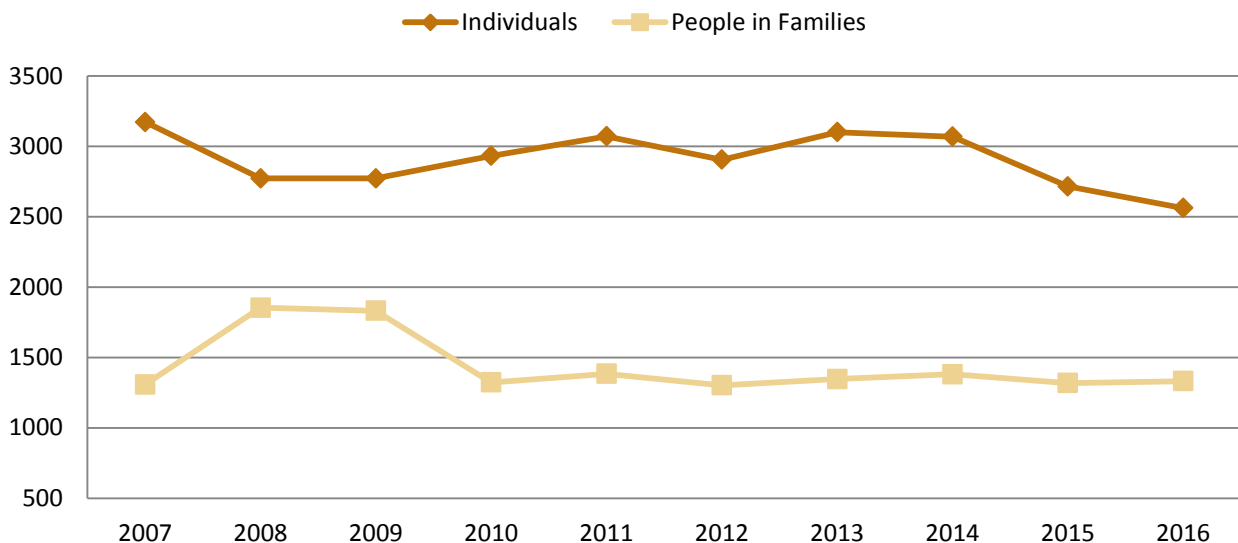
In 2015 Connecticut conducted its first-ever count of homeless and housing unstable youth, using a best practice methodology distinct from HUD's Point-in-Time count. That count estimated there were 3,000 unaccompanied youth (age 24 and under) experiencing homelessness in our state. Plans for the next youth-specific count are currently underway, and the state is anticipating the enhanced effort to take place in 2017. Please find the full 2015 youth count report at www.cceh.org.

Families

There were **1,332** people in families experiencing homelessness this year. The total number of families identified during *CT PIT 2016* was seven lower than last year. The family sizes were slightly larger, however, accounting for the overall increase of 13 people.

Figure 2 illustrates the overall picture of family homelessness identified during *CT PIT 2016*.

Figure 2



Veterans

Veterans counted as homeless in the PIT **decreased 23%** from 2015. Overall, the 216 veterans experiencing homelessness represented 5.5% of the total homeless population. Twenty-one percent of veterans were in emergency shelter, 59% were in transitional housing (used as interim housing), and 20% were unsheltered.

In 2013, the year the Reaching Home Veterans Workgroup first convened to initiate the statewide effort to effectively end veteran homelessness in Connecticut, 340 self-reported veterans were identified during the PIT count, **36% more than were counted in 2016**. Even more remarkable is the **reduction by more than 90%** in individuals self-reporting as veterans experiencing chronic homelessness, from **129** in 2013 to only **11** in 2016. In addition, the number of unsheltered veterans **dropped 42%** since 2013. (Please note: for purposes of the PIT count, veteran status is self-reported, not verified.)

Connecticut has built an enhanced homeless response system for veterans, through which we are quickly identifying veterans experiencing homelessness throughout the state, ensuring they are offered adequate shelter, rapidly providing them with interim housing (when necessary), and helping them secure permanent housing with appropriate supports within 90 days.

As noted above, 59% of self-reported veterans counted in this year's PIT count are in transitional housing. Although these units are still considered "transitional housing" for the purposes of the PIT as defined by HUD, veteran providers in Connecticut converted them into interim housing in 2015, providing

veterans with the opportunities and encouragement needed to obtain permanent housing within 90 days. Only 128 self-reported veterans were in transitional housing, i.e., interim housing, a **20% decrease since 2015**. Now that veterans are rapidly moving on from these units, providers have increased capacity, allowing them to serve not only numerous veterans who are not literally homeless, but also those facing housing instability or other challenges.

Thanks to enhanced outreach efforts, only 45 self-reported veterans were in an emergency shelter, a **44% decrease since 2015**. Self-reported veterans are rapidly engaged by coordinated outreach teams and verified veterans are offered interim housing (when necessary) and connected to the assistance needed to achieve stable, permanent housing within 90 days.

Temperature and Unsheltered Count Correlation

A variety of factors can influence the number of people staying in a place not meant for human habitation on the night of the count. Historically, CT PIT counts have shown that colder temperatures directly correlate to lower numbers of identified individuals outside. The evening low temperature during CT PIT 2016 was 25° warmer than the night of the count in 2015.

Section 2: CT PIT 2016 – Sheltered

Findings

Statewide, **3,238** people were in a homeless shelter or transitional housing on the night of *CT PIT 2016*. Emergency shelters accounted for 2,370 people, and transitional housing for 868. These numbers represent an overall decrease of 5% statewide from last year: 2% for people in shelter and 13% for people in transitional housing. Table 3 illustrates the total sheltered population for *CT PIT 2016*.

In segmenting the data by population and program type, however, not all groups show a decrease. While the number of individuals in emergency shelter decreased 7% since *CT PIT 2015*, the number of families increased 7%, the number of children, 8%.

The number of individuals in transitional housing decreased 19%; and the number of families decreased 10%. The reductions are due, in part, to a re-allocation of resources from transitional housing to other homeless

assistance programs, reducing the number of available transitional beds (Please see Additional Information on p. 10 for more on this). See Table 2 for a comparison of how the various sheltered populations have changed from *CT PIT 2015* to *CT PIT 2016*.

There were eight unaccompanied homeless youth (under age 18) in shelter this year, and no parenting youth under age 18.

Appendix A contains a full set of tables outlining the sheltered population by Continuum of Care, and sub-regions of the CoC's.

Table 2

Population	Percent Change from 2015-2016
Individuals ES	-7%
Individuals TH	-19%
Families ES	7%
Families TH	-10%
Children ES	8%
Children TH	-6%

Table 3

	Emergency Shelter	Transitional Housing	Total
Total Persons	2,370	868	3,238
Individuals	1,486	418	1,904
Families	290	157	447
Children*	550	278	828

*Includes 8 unaccompanied youth under 18

Sheltered Subpopulations

Chronic Homelessness

Of the 1,486 individual adults and 334 adults in families in emergency shelter, 263 were identified as chronically homeless. This represents 11% of all 2,410 adults in shelter.

Of the 876 people in families in emergency shelter, 28 were identified as part of chronically homeless families. This represents 2% of all 1,326 sheltered people in families.

Section 4 of this report outlines, in detail, the total Subpopulations captured on the night of *CT PIT 2016*. It should be noted that the PIT count methodology relies on “self-report” to estimate chronic homelessness. HUD requires rigorous documentation of disability and history of homelessness for chronic homelessness. Not all those who self-report chronic homelessness will be documented as such to HUD’s standard.

Veterans

On the night of *CT PIT 2016*, a total of 173 self-reported veterans were in an emergency shelter or transitional housing. This represents 7% of the total adult sheltered population. Table 4 shows the distribution of veterans in ES and TH projects. Please see page 7 for more information.

Table 4

Project Type	Number of Veterans
Emergency Shelter	45
Transitional Housing	128

Domestic Violence

Victims of domestic violence account for 19% of the adults in shelter or transitional housing. The total number of people who indicated they had experienced domestic violence, 466, is a 4% decrease since last year’s count of domestic violence survivors.

Health and Safety Concerns

The number of adults who self-reported a severe mental illness increased this year from 374 to 442, or 18% of this year’s sheltered adult population.

Eight percent (186 total) of adults in shelter indicated they had a severe drug or alcohol problem that impairs their ability to live independently.

Adults reporting a diagnosis of HIV or AIDS increased 23% this year. One hundred people, or 4% of sheltered adults, comprise this subpopulation.

Table 5 provides a snapshot of the total of all health and safety categories for the statewide sheltered population.

Additional Information

The numbers for the sheltered homeless population tend to reflect the current system capacity to provide emergency shelter and transitional housing beds. The addition or removal of a project can have a profound impact on various populations and subpopulations in the sheltered category.

Both the Balance of State (BOS) and Opening Doors Fairfield County (ODFC) Continua of Care aligned themselves with the HUD priorities to repurpose transitional housing projects for permanent housing solutions. As such, the total number of transitional housing beds decreased 13% across the state.

Please see **Appendix A** of this report for a community-level breakdown of the sheltered population.

Methodology – Sheltered Count

Consistent and rigorous methodology ensures that the Connecticut PIT data are reliable and comparable across years and can be used to design effective interventions to help people experiencing homelessness. Connecticut has implemented a consistent and uniform statewide methodology for CT PIT implementation since 2008.

For a detailed description of the sheltered count methodology, please see **Appendix C**.

Table 5

Severe Mental Illness		Chronic Substance Abuse		HIV/AIDS	
Number of Adults	Percent of Adults*	Number of Adults	Percent of Adults*	Number of Adults	Percent of Adults*
442	18%	186	8%	100	4%

* These columns represent percent total of adults and adults in families in shelter or transitional housing (2,410)

Section 3: CT PIT 2016 – Unsheltered

Background

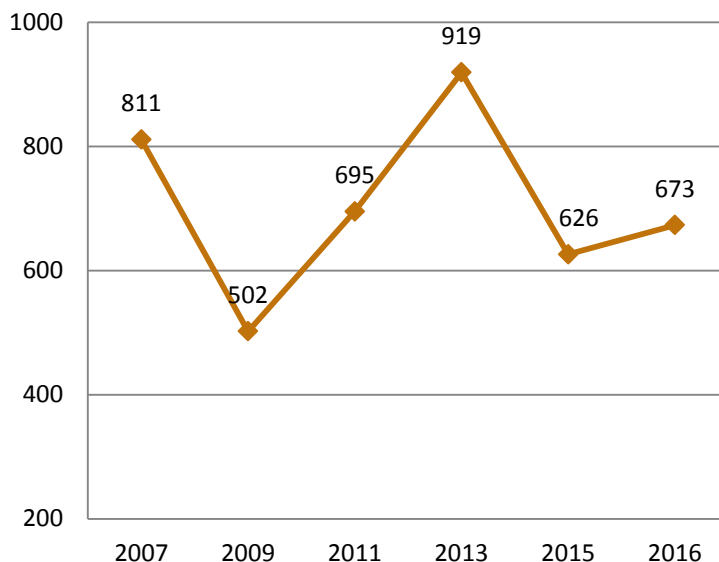
Every other year, HUD requires communities to conduct unsheltered counts of people living in a place unfit for human habitation (such as in abandoned buildings, under bridges, or in parks). This year, HUD required only a sheltered count. The State of Connecticut decided, however, to conduct an unsheltered count as well in this off year to enhance the information available to understand homelessness in our state. The following unsheltered methodology section, as well as the more in-depth methodology explanation in **Appendix C**, clearly outlines the steps that were taken to create the statistically reliable number of unsheltered individuals.

The low temperatures surrounding *CT PIT 2016* were 25 degrees warmer than the previous year, which was one of the most severe winters in the history of Connecticut. In 2015, the extreme weather conditions likely drove many homeless individuals to seek alternate indoor locations, especially emergency shelter. Supporting this hypothesis, the total unsheltered population increased in *CT PIT 2016*, while the overall population of individuals experiencing homelessness decreased.

Table 6

Total Persons	673
Individuals	667
Families	2
Children	3

Figure 3: Total Unsheltered Population



Findings

Statewide, **673** persons were living on the streets or in other places not intended for human habitation on the night of January 26th. Table 6 shows the breakdown of the total unsheltered population in the state. Among them were only two unsheltered families, which included three children. This represents a decrease from last year's unsheltered count of 11 families with 20 children. The total number of people experiencing unsheltered homelessness is marginally higher than the last unsheltered count in 2015, but is down 17% since 2007.

Unsheltered persons were much more likely to be adults without children, comprising 99% of those found sleeping on the streets. Only six people were counted in families with children. Of the total unsheltered adults, 22 were youth ages 18-24. **Appendix B** contains a full set of tables outlining the unsheltered population.

There were no unaccompanied children under the age of 18 found unsheltered anywhere in the state on the night of the count.

For complete data tables on the unsheltered population, please see **Appendix B**.

Unsheltered Subpopulations

Chronic Homelessness

Of the 670 adults who were living on the streets or other places not intended for human habitation, 185 self-identified as chronically homeless. **Neither of the unsheltered families identified during CT PIT 2016 were chronically homeless.**

Veterans

Statewide, 43 self-reported veterans experiencing homelessness were estimated to be living on the streets or in other places not intended for human habitation.

There were **no unsheltered veteran families** identified *CT PIT 2016*. Five unsheltered veterans were self-identified as experiencing chronic homelessness.

Please see page 7 for more information.

Domestic Violence

Across the state, 71 unsheltered adults stated they had experienced domestic violence.

Health and Safety Concerns

One in four unsheltered adults (171 total) self-reported having a severe mental illness.

Eighteen percent, 123 total, of unsheltered adults reported having a Chronic Substance Abuse issue.

Persons self-reporting a diagnosis of HIV/AIDS have historically been the smallest homeless subpopulation, and this trend continues into 2016. Three unsheltered individuals reported being diagnosed with HIV/AIDS – a 57% decrease from the seven identified in the previous unsheltered count.

Table 7 shows the total of health and safety concerns of the statewide unsheltered population.

Additional Data

For a community breakdown of the unsheltered population, see **Appendix B** of this report.

Methodology – Unsheltered Count

The unsheltered homeless count followed the same methodology as the counts conducted in 2011, 2013, and 2015. The process uses the U.S. Census block identification combined with areas in which persons experiencing homelessness were located in the previous unsheltered count.

For a detailed description of the unsheltered count methodology, please see **Appendix C**.

Table 7

Severe Mental Illness		Chronic Substance Abuse		HIV/AIDS	
Number of Adults	Percent of Adults*	Number of Adults	Percent of Adults*	Number of Adults	Percent of Adults*
171	26%	123	18%	3	0.4%

*These columns represent percent of total unsheltered adults (670)

Section 4: CT PIT 2016 – Subpopulations

Introduction

HUD asks that Continua of Care provide data for ten subpopulations of people experiencing homelessness. These categories not only help estimate the level of need for services targeted to these specific groups, they also track the progress toward ending homelessness for groups with the greatest need.

The categories for the 2016 Point-in-Time Count are:

- Chronically Homeless Individuals
- Chronically Homeless Families
- Total Persons in Chronically Homeless Families
- Chronically Homeless Individual Veterans
- Chronically Homeless Veteran Families
- Total Persons in Chronically Homeless Veteran Families
- Adults with a Serious Mental Illness

- Adults with a Substance Use Disorder
- Adults with HIV/AIDS
- Survivors of Domestic Violence

Data collected on PIT surveys inform the totals for each of the subpopulations (See Table 8). This year there were increases in some of the subpopulations and decreases in others when compared to *CT PIT 2015*. The continued reduction in chronic homelessness is in a small part due to the chronic homelessness definition changes, but can mostly be attributed to a concerted effort by communities to prioritize for permanent housing the most vulnerable individuals and families experiencing homelessness.

Table 8: Subpopulations

Subpopulation	Sheltered	Unsheltered	Total
Chronically Homeless Individuals	254	185	439
Total Chronically Homeless Families	9	0	9
Total Persons in Chronically Homeless Families	28	0	28
Chronically Homeless Individual Veterans	6	5	11
Chronically Homeless Veteran Families	0	0	0
Total Persons in Chronically Homeless Veteran Families	0	0	0
Adults with a Serious Mental Illness	442	171	613
Adults with a Substance Use Disorder	186	123	309
Adults with HIV/AIDS	100	3	103
Adult Survivors of Domestic Violence	466	71	537

Chronically Homeless

The HUD definition of chronic homelessness is a person or family experiencing literal homeless either continuously for at least one year or for four episodes in the past three years totaling at least 12 months. This status must be coupled with a disabling condition of indefinite duration that impairs ability to live independently. HUD asks for the chronically homeless information to be segmented by Individuals, Families, and Veterans. See Figure 4 for a chart of chronic homelessness in Connecticut since 2007.

Individuals

The total number of individual adults estimated to be chronically homeless on the night of *CT PIT 2016* was **439**. This represents 17% of the total number of homeless individuals in Connecticut. This number represents a substantial decrease (**20%**) in chronically homeless adult individuals identified in the 2015 count.

Families

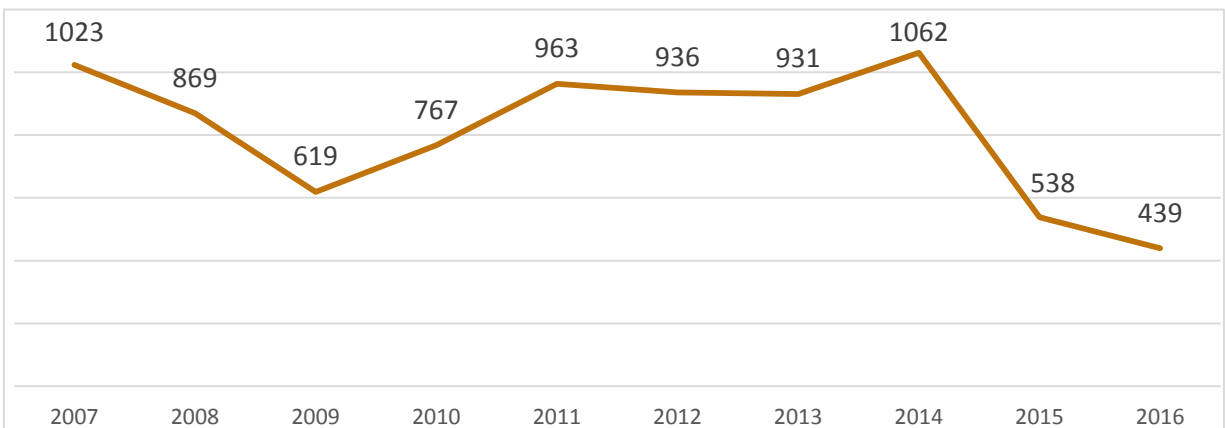
On the night of *CT PIT 2016*, Connecticut had an estimated **nine** chronically homeless families comprising **28** people. In order to count as a family, there must be one or more dependent children under the age of 18 accompanying the adult head of household. This represents 5% of the total number of homeless families in Connecticut.

Veterans

Eleven self-reported individual veterans were experiencing chronic homelessness on the night of *CT PIT 2016*, **over a 91% decrease** since the inception of the statewide effort to effectively end veteran homelessness in 2013. As noted, veteran and chronic homelessness status is not verified for the *PIT*. **There were no chronically homeless veteran families** identified in projects or unsheltered.

The state has the resources and systems in place to rapidly house any veteran experiencing chronic homelessness. Continued outreach efforts are made to those who are refusing the permanent housing interventions offered.

Figure 4 – Total individual adults experiencing chronic homelessness



Serious Mental Illness

The number of people who self-reported a serious mental illness was 613, or 20% of homeless adults. Table 9 shows the total of health and safety concerns of the statewide population.

Chronic Substance Abuse

This year, 309 people self-reported a chronic substance abuse problem, which represents 10% of homeless adults.

HIV/AIDS

The rate of people experiencing homelessness who also report being HIV positive or having AIDS has increased by 17%. This year, 103 people indicated they had these diagnoses. This represents 3% of homeless adults.

Domestic Violence

The number of people who reported being a survivor of domestic violence decreased this year. A total of 537 people reported they were domestic violence survivors; however, the survey did not ask follow-up questions regarding when the trauma occurred, or if it was directly related to the experience of homelessness. The 537 represents 17% of homeless adults.

Table 9

Severe Mental Illness		Chronic Substance Abuse		HIV/AIDS	
Number of Adults	Percent of Adults*	Number of Adults	Percent of Adults*	Number of Adults	Percent of Adults*
613	20%	309	10%	103	3%

*These columns represent percent of the total adult homeless population (3,071)

Appendix A: CT PIT 2016 Sheltered Tables

Appendix A: Table 1.

Total Persons, Families Counted in Emergency Shelters and Transitional Housing Statewide

Population	Number of Persons	Percent of Total Persons
Children in Families	820	25.3%
Adults in Families	506	15.6%
Single Adults	1904	58.8%
Unaccompanied Children under 18	8	0.2%
Total Persons	3238	100.0%

Number of Families	447
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Appendix A: Table 2a.

Number of Persons in Emergency Shelter and Transitional Housing, by Continuum of Care (CoC)

State / Continuum of Care / Subcontinuum	Children in Families	Adults in Families	Single Adults	Unaccompanied Youth under 18	Total Persons
Balance of State	604	361	1533	1	2499
Opening Doors Fairfield County	216	145	371	7	739
State Total	820	506	1904	8	3238

Appendix A: Table 2b.

Number of Persons in Emergency Shelters and Transitional Housing, by Subcontinuum (SubCoC)

BOS: Bristol	6	4	16	0	26
BOS: Danbury	16	11	94	0	121
BOS: Hartford	125	69	489	0	683
BOS: Middlesex	23	11	46	0	80
BOS: New Britain	27	22	95	1	145
BOS: New Haven	138	84	298	0	520
BOS: Norwich/New London Co.	84	46	127	0	257
BOS: Waterbury	39	25	84	0	148
BOS: Remainder	146	89	284	0	519
ODFC: Bridgeport	108	71	158	0	337
ODFC: Norwalk	35	24	96	0	155
ODFC: Stamford-Greenwich	73	50	117	7	247

Appendix A: Table 3a.

Percent of Persons in Emergency Shelters and Transitional Housing, by CoC

State / Continuum of Care / Subcontinuum	Percent of Children in Families	Percent of Adults in Families	Percent of Single Adults	Percent of Unaccompanied Youth under 18	Percent of Total Persons
Balance of State	73.7%	71.3%	80.5%	12.5%	77.2%
Opening Doors Fairfield County	26.3%	28.7%	19.5%	87.5%	22.8%
State Total	100.0%	100.0%	100.0%	100.0%	100.0%

Appendix A: Table 3b.

Percent of Persons in Emergency Shelters and Transitional Housing, by SubCoC

BOS: Bristol	0.7%	0.8%	0.8%	0.0%	0.8%
BOS: Danbury	2.0%	2.2%	4.9%	0.0%	3.7%
BOS: Hartford	15.2%	13.6%	25.7%	0.0%	21.1%
BOS: Middlesex	2.8%	2.2%	2.4%	0.0%	2.5%
BOS: New Britain	3.3%	4.3%	5.0%	12.5%	4.5%
BOS: New Haven	16.8%	16.6%	15.7%	0.0%	16.1%
BOS: Norwich/New London Co.	10.2%	9.1%	6.7%	0.0%	7.9%
BOS: Waterbury	4.8%	4.9%	4.4%	0.0%	4.6%
BOS: Remainder	17.8%	17.6%	14.9%	0.0%	16.0%
ODFC: Bridgeport	13.2%	14.0%	8.3%	0.0%	10.4%
ODFC: Norwalk	4.3%	4.7%	5.0%	0.0%	4.8%
ODFC: Stamford-Greenwich	8.9%	9.9%	6.1%	87.5%	7.6%

Appendix A: Table 4.

Number of Families in Emergency Shelters and Transitional Housing, by CoC

State / Continuum of Care / Subcontinuum	Number of Families	Percent of Total Families
Balance of State	327	73.2%
Opening Doors Fairfield County	120	26.8%
State Total	447	100.0%

Appendix A: Table 4b.

Number of Families in Emergency Shelters and Transitional Housing, by SubCoC

Subcontinuum	Number of Families	Percent of Total Families
BOS: Bristol	4	0.9%
BOS: Danbury	11	2.5%
BOS: Hartford	68	15.2%
BOS: Middlesex	9	2.0%
BOS: New Britain	18	4.0%
BOS: New Haven	69	15.4%
BOS: Norwich/New London Co.	45	10.1%
BOS: Waterbury	21	4.7%
BOS: Remainder	82	18.3%
ODFC: Bridgeport	53	11.9%
ODFC: Norwalk	23	5.1%
ODFC: Stamford-Greenwich	44	9.8%

Appendix A: Table 5a.

Regional Breakdown of Chronically Homeless (CH) Single Adults in Adults in Shelter, by CoC

State / Continuum of Care / Subcontinuum	Number of CH Single Adults	Percent of All Sheltered CH Single Adults in State	Percent of Each Region's Total Single Adults
Balance of State	213	83.9%	13.9%
Opening Doors Fairfield County	41	16.1%	11.1%
State Total	254	100.0%	13.3%

Appendix A: Table 5b.

Regional Breakdown of Chronically Homeless (CH) Single Adults in Adults in Shelter, by SubCoC

BOS: Bristol	1	0.4%	6.3%
BOS: Danbury	20	7.9%	21.3%
BOS: Hartford	61	24.0%	12.5%
BOS: Middlesex	5	2.0%	10.9%
BOS: New Britain	13	5.1%	13.7%
BOS: New Haven	46	18.1%	15.4%
BOS: Norwich/New London Co.	14	5.5%	11.0%
BOS: Waterbury	6	2.4%	7.1%
BOS: Remainder	48	18.9%	16.9%
ODFC: Bridgeport	9	3.5%	5.7%
ODFC: Norwalk	18	7.1%	18.8%
ODFC: Stamford-Greenwich	14	5.5%	12.0%

Appendix A: Table 6a.

Regional Breakdown of Chronically Homeless (CH) Families in Shelter, by CoC

State / Continuum of Care	Number of CH Families	Percent of All Sheltered CH Families in State	Percent of Each Region's Total Families
Balance of State	4	44.4%	1.2%
Opening Doors Fairfield County	5	55.6%	4.2%
State Total	9	100.0%	2.0%

Appendix A: Table 6b.

Regional Breakdown of Chronically Homeless (CH) Families in Shelter, by SubCoC

BOS: Bristol	0	0.0%	0.0%
BOS: Danbury	0	0.0%	0.0%
BOS: Hartford	0	0.0%	0.0%
BOS: Middlesex	2	22.2%	22.2%
BOS: New Britain	1	11.1%	5.6%
BOS: New Haven	0	0.0%	0.0%
BOS: Norwich/New London Co.	0	0.0%	0.0%
BOS: Waterbury	2	22.2%	9.5%
BOS: Remainder	1	11.1%	1.2%
ODFC: Bridgeport	4	44.4%	7.5%
ODFC: Norwalk	1	11.1%	4.3%
ODFC: Stamford-Greenwich	1	11.1%	2.3%

Appendix A: Table 7a.

Adults with Health and Safety Concerns: Numbers and Percent of Region's Adults, by CoC

State / Continuum of Care / Subcontinuum	Severe Mental Illness		Chronic Substance Abuse		HIV-AIDS	
	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
Balance of State	356	18.8%	151	8.0%	68	3.6%
Opening Doors Fairfield County	86	16.7%	35	6.8%	32	6.2%
State Total	442	18.3%	186	7.7%	100	4.1%

Appendix A: Table 7b.

Adults with Health and Safety Concerns: Number and Percent of Region’s Adults, by SubCoC

Subcontinuum	Severe Mental Illness		Chronic Substance Abuse		HIV-AIDS	
	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
BOS: Bristol	5	25.0%	1	5.0%	0	0.0%
BOS: Danbury	26	24.8%	6	5.7%	10	9.5%
BOS: Hartford	103	18.5%	70	12.5%	22	3.9%
BOS: Middlesex	10	17.5%	3	5.3%	0	0.0%
BOS: New Britain	21	17.9%	21	17.9%	5	4.3%
BOS: New Haven	57	14.9%	22	5.8%	3	0.8%
BOS: Norwich/New London Co.	31	17.9%	6	3.5%	2	1.2%
BOS: Waterbury	19	17.4%	4	3.7%	17	15.6%
BOS: Remainder	92	24.7%	21	5.6%	4	1.1%
ODFC: Bridgeport	36	15.7%	16	7.0%	13	5.7%
ODFC: Norwalk	18	15.0%	9	7.5%	0	0.0%
ODFC: Stamford-Greenwich	31	18.6%	10	6.0%	8	10.2%

Appendix A: Table 8a.

Adult Survivors of Domestic Violence in Emergency Shelter or Transitional Housing, by CoC

State / Continuum of Care	Number of Survivors	Percent of All Sheltered Adults in Region
Balance of State	356	18.8%
Opening Doors Fairfield County	110	21.3%
State Total	466	19.3%

Appendix A: Table 8b.

Adult Survivors of Domestic Violence in Emergency Shelter or Transitional Housing, by SubCoC

BOS: Bristol	2	10.0%
BOS: Danbury	16	15.2%
BOS: Hartford	58	10.4%
BOS: Middlesex	4	7.0%
BOS: New Britain	30	25.6%
BOS: New Haven	49	12.8%
BOS: Norwich/New London Co.	58	33.5%
BOS: Waterbury	25	22.9%
BOS: Remainder	111	29.8%
ODFC: Bridgeport	38	16.6%
ODFC: Norwalk	19	15.8%
ODFC: Stamford-Greenwich	45	26.9%

**Appendix A: Table 9a.
Veterans in Emergency Shelter and Transitional Housing, by CoC**

State / Continuum of Care	Number of Veterans	Percent of Statewide Sheltered Veterans
Balance of State	131	75.7%
Opening Doors Fairfield County	42	24.3%
State Total	173	100.0%

**Appendix A: Table 9b.
Veterans in Emergency Shelter and Transitional Housing, by SubCoC**

BOS: Bristol	0	0.0%
BOS: Danbury	4	2.3%
BOS: Hartford	22	12.7%
BOS: Middlesex	1	0.6%
BOS: New Britain	5	2.9%
BOS: New Haven	33	19.1%
BOS: Norwich/New London Co.	11	6.4%
BOS: Waterbury	1	0.6%
BOS: Remainder	54	31.2%
ODFC: Bridgeport	39	22.5%
ODFC: Norwalk	0	0.0%
ODFC: Stamford-Greenwich	3	1.7%

**Appendix A: Table 10a.
Chronically Homeless Veterans in Emergency Shelter and Transitional Housing, by CoC**

State / Continuum of Care	Number of Veterans	Percent of All Sheltered Veterans in Region
Balance of State	6	4.6%
Opening Doors Fairfield County	0	0.0%
State Total	6	3.5%

Appendix A: Table 10b.

Chronically Homeless Veterans in Emergency Shelter and Transitional Housing, by SubCoC

Subcontinuum	Number of Veterans	Percent of All Sheltered Veterans in Region
BOS: Bristol	0	0.0%
BOS: Danbury	0	0.0%
BOS: Hartford	2	9.1%
BOS: Middlesex	0	0.0%
BOS: New Britain	0	0.0%
BOS: New Haven	3	9.1%
BOS: Norwich/New London Co.	0	0.0%
BOS: Waterbury	0	0.0%
BOS: Remainder	3	5.6%
ODFC: Bridgeport	0	0.0%
ODFC: Norwalk	0	0.0%
ODFC: Stamford-Greenwich	0	0.0%

Appendix B: CT PIT 2016 Unsheltered Tables

**Appendix B: Table 1.
Total Unsheltered Persons, Families Counted Statewide**

Population	Number of Persons	Percent of Total Persons
Children in Families	3	0.4%
Adults in Families	3	0.4%
Single Adults	667	99.1%
Unaccompanied Children under 18	0	0.0%
Total Persons	673	100.0%

Number of Families	2
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**Appendix B: Table 2a.
Number of Unsheltered Persons, by Continuum of Care (CoC)**

State / Continuum of Care / Subcontinuum	Children in Families	Adults in Families	Single Adults	Unaccompanied Youth under 18	Total Persons
Balance of State	3	3	511	0	517
Opening Doors Fairfield County	0	0	156	0	156
State Total	3	3	667	0	673

**Appendix B: Table 2b.
Number of Unsheltered Persons, by Subcontinuum (SubCoC)**

BOS: Bristol	0	0	17	0	17
BOS: Danbury	0	0	4	0	4
BOS: Hartford	0	0	24	0	24
BOS: Middlesex	0	0	52	0	52
BOS: New Britain	0	0	13	0	13
BOS: New Haven	0	0	105	0	105
BOS: Norwich/New London Co.	0	0	31	0	31
BOS: Waterbury	0	0	56	0	56
BOS: Remainder	3	3	209	0	215
ODFC: Bridgeport	0	0	45	0	45
ODFC: Norwalk	0	0	49	0	49
ODFC: Stamford-Greenwich	0	0	62	0	62

Appendix B: Table 3a.
Percent of Unsheltered Persons, by CoC

State / Continuum of Care / Subcontinuum	Percent of Children in Families	Percent of Adults in Families	Percent of Single Adults	Percent of Unaccompanied Youth under 18	Percent of Total Persons
Balance of State	100.0%	100.0%	76.6%	–	76.8%
Opening Doors Fairfield County	0.0%	0.0%	23.4%	–	23.2%
State Total	100.0%	100.0%	100.0%	–	100.0%

Appendix B: Table 3b.
Percent of Unsheltered Persons, by SubCoC

BOS: Bristol	0.0%	0.0%	2.5%	–	2.5%
BOS: Danbury	0.0%	0.0%	0.6%	–	0.6%
BOS: Hartford	0.0%	0.0%	3.6%	–	3.6%
BOS: Middlesex	0.0%	0.0%	7.8%	–	7.7%
BOS: New Britain	0.0%	0.0%	1.9%	–	1.9%
BOS: New Haven	0.0%	0.0%	15.7%	–	15.6%
BOS: Norwich/New London Co.	0.0%	0.0%	4.6%	–	4.6%
BOS: Waterbury	0.0%	0.0%	8.4%	–	8.3%
BOS: Remainder	100.0%	100.0%	31.3%	–	31.9%
ODFC: Bridgeport	0.0%	0.0%	6.7%	–	6.7%
ODFC: Norwalk	0.0%	0.0%	7.3%	–	7.3%
ODFC: Stamford-Greenwich	0.0%	0.0%	9.3%	–	9.2%

Appendix B: Table 4.
Number of Unsheltered Families, by CoC

State / Continuum of Care	Number of Families	Percent of Total Families
Balance of State	2	100.0%
Opening Doors Fairfield County	0	0.0%
State Total	2	100.0%

Appendix B: Table 4b.
Number of Unsheltered Families, by SubCoC

Subcontinuum	Number of Families	Percent of Total Families
BOS: Bristol	0	0.0%
BOS: Danbury	0	0.0%
BOS: Hartford	0	0.0%
BOS: Middlesex	0	0.0%
BOS: New Britain	0	0.0%
BOS: New Haven	0	0.0%
BOS: Norwich/New London Co.	0	0.0%
BOS: Waterbury	0	0.0%
BOS: Remainder	2	100.0%
ODFC: Bridgeport	0	0.0%
ODFC: Norwalk	0	0.0%
ODFC: Stamford-Greenwich	0	0.0%

Appendix B: Table 5a.
Regional Breakdown of Unsheltered Chronically Homeless (CH) Single Adults in Adults, by CoC

State / Continuum of Care / Subcontinuum	Number of CH Single Adults	Percent of All Unsheltered CH Single Adults in State	Percent of Each Region's Total Single Adults
Balance of State	143	77.3%	28.0%
Opening Doors Fairfield County	42	22.7%	26.9%
State Total	185	100.0%	27.7%

Appendix B: Table 5b.
Regional Breakdown of Unsheltered Chronically Homeless (CH) Single Adults in Adults, by SubCoC

BOS: Bristol	3	1.6%	17.6%
BOS: Danbury	1	0.5%	25.0%
BOS: Hartford	4	2.2%	16.7%
BOS: Middlesex	25	13.5%	48.1%
BOS: New Britain	3	1.6%	23.1%
BOS: New Haven	28	15.1%	26.7%
BOS: Norwich/New London Co.	6	3.2%	19.4%
BOS: Waterbury	12	6.5%	21.4%
BOS: Remainder	61	33.0%	29.2%
ODFC: Bridgeport	10	5.4%	22.2%
ODFC: Norwalk	12	6.5%	24.5%
ODFC: Stamford-Greenwich	20	10.8%	32.3%

**Appendix B: Table 6.
Unsheltered Chronically Homeless (CH) Families**

State	Number of CH Families
State Total	0

**Appendix B: Table 7a.
Adults with Health and Safety Concerns: Numbers and Percent of Region's Adults, by CoC**

State / Continuum of Care	Severe Mental Illness		Chronic Substance Abuse		HIV-AIDS	
	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
Balance of State	135	26.3%	105	20.4%	3	0.6%
Opening Doors Fairfield County	36	23.1%	18	11.5%	0	0.0%
State Total	171	25.5%	123	18.4%	3	0.4%

**Appendix B: Table 7b.
Adults with Health and Safety Concerns: Number and Percent of Region's Adults, by SubCoC**

Subcontinuum	Severe Mental Illness		Chronic Substance Abuse		HIV-AIDS	
	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults	Number of Adults	Percent of Adults
BOS: Bristol	4	23.5%	2	11.8%	0	0.0%
BOS: Danbury	1	25.0%	1	25.0%	0	0.0%
BOS: Hartford	3	12.5%	2	8.3%	0	0.0%
BOS: Middlesex	19	36.5%	20	38.5%	2	3.8%
BOS: New Britain	3	23.1%	3	23.1%	0	0.0%
BOS: New Haven	28	26.7%	21	20.0%	1	1.0%
BOS: Norwich/New London Co.	7	22.6%	5	16.1%	0	0.0%
BOS: Waterbury	10	17.9%	9	16.1%	0	0.0%
BOS: Remainder	60	28.3%	42	19.8%	0	0.0%
ODFC: Bridgeport	6	13.3%	5	11.1%	0	0.0%
ODFC: Norwalk	10	20.4%	6	12.2%	0	0.0%
ODFC: Stamford-Greenwich	20	32.3%	7	11.3%	0	0.0%

**Appendix B: Table 8a.
Unsheltered Adult Survivors of Domestic Violence, by CoC**

State / Continuum of Care / Subcontinuum	Number of Survivors	Percent of All Unsheltered Adults in Region
Balance of State	59	11.5%
Opening Doors Fairfield County	12	7.7%
State Total	71	10.6%

**Appendix B: Table 8b.
Unsheltered Adult Survivors of Domestic Violence, by SubCoC**

BOS: Bristol	2	11.8%
BOS: Danbury	0	0.0%
BOS: Hartford	2	8.3%
BOS: Middlesex	7	13.5%
BOS: New Britain	1	7.7%
BOS: New Haven	19	18.1%
BOS: Norwich/New London Co.	3	9.7%
BOS: Waterbury	3	5.4%
BOS: Remainder	22	10.4%
ODFC: Bridgeport	4	8.9%
ODFC: Norwalk	3	6.1%
ODFC: Stamford-Greenwich	5	8.1%

**Appendix B: Table 9a.
Unsheltered Veterans, by CoC**

State / Continuum of Care	Number of Unsheltered Veterans	Percent of Statewide Unsheltered Veterans
Balance of State	32	74.4%
Opening Doors Fairfield County	11	25.6%
State Total	43	100.0%

Appendix B: Table 9b.
Veterans in Emergency Shelter and Transitional Housing, by SubCoC

Subcontinuum	Number of Veterans	Percent of Statewide Veterans
BOS: Bristol	0	0.0%
BOS: Danbury	0	0.0%
BOS: Hartford	2	4.7%
BOS: Middlesex	4	9.3%
BOS: New Britain	0	0.0%
BOS: New Haven	9	20.9%
BOS: Norwich/New London Co.	2	4.7%
BOS: Waterbury	3	7.0%
BOS: Remainder	12	27.9%
ODFC: Bridgeport	3	7.0%
ODFC: Norwalk	5	11.6%
ODFC: Stamford-Greenwich	3	7.0%

Appendix B: Table 10a.
Unsheltered Chronically Homeless Veterans, by CoC

State / Continuum of Care / Subcontinuum	Number of Veterans	Percent of All Unsheltered Veterans in Region
Balance of State	3	9.4%
Opening Doors Fairfield County	2	18.2%
State Total	5	11.6%

Appendix B: Table 10b.
Unsheltered Chronically Homeless Veterans, by SubCoC

BOS: Bristol	0	0.0%
BOS: Danbury	0	0.0%
BOS: Hartford	0	0.0%
BOS: Middlesex	1	25.0%
BOS: New Britain	0	0.0%
BOS: New Haven	2	22.2%
BOS: Norwich/New London Co.	0	0.0%
BOS: Waterbury	0	0.0%
BOS: Remainder	0	0.0%
ODFC: Bridgeport	1	33.3%
ODFC: Norwalk	0	0.0%
ODFC: Stamford-Greenwich	1	33.3%

Appendix C: Count Methodologies

Sheltered Data Methodology

Consistent and rigorous methodology ensures that the Connecticut PIT data are reliable and comparable across years, and can be used to design effective interventions to help people experiencing homelessness. Connecticut has implemented a consistent and uniform statewide methodology for CT PIT implementation since 2008.

The Sheltered Count comprised the collection of three main components: demographic or characteristic data on adults in emergency shelters and transitional housing projects; client population counts among shelters, transitional housing projects, rapid rehousing projects, permanent supportive housing projects, and shelters dedicated to serving survivors of domestic violence; and bed and unit inventory for all project types.

Collecting Client Demographics

Information on key demographic characteristics is collected from all adults staying in Connecticut's emergency shelters and transitional housing projects on the night of the count. All required data elements collected for the purposes of CT PIT have been aligned with the everyday intake assessment that all emergency shelters and transitional housing projects use to enter clients. If data were properly and fully entered for all active emergency shelter clients on the night of the count, shelters had no additional demographic data to collect. For clients staying in Department of Veterans Affairs or domestic violence projects that do not or cannot participate in CT HMIS, demographic data was collected by survey.

Following CT PIT 2013, local university partner Dr. Stephen Adair, Professor of Sociology at Central Connecticut State University, conducted tests to assess the validity of extrapolating CT HMIS client data out to remaining non-CT HMIS participating shelters and transitional housing programs. The intention of extrapolation testing was to inform future counts as to whether or not extrapolation processes can reliably and significantly substitute where paper surveys were not completed. Results showed that extrapolation would be able to yield valid and reliable results. Just over 90 percent of eligible homeless projects in the state participate in CT HMIS. Because the vast majority of these projects enter client data into the statewide data system, a simple methodology was developed to extrapolate answer rates from participating projects to those that do not participate.

Additionally, this process is used to extrapolate information from records that are incomplete using calculations based on the number of adults compared to the number of useable surveys. A more detailed explanation of this follows.

Calculations for Subpopulations

HUD requires reporting on critical subpopulations. These categories include chronic homelessness among individuals, families, unaccompanied youth; adults with a serious mental illness; adults with a substance abuse; domestic violence; adults with HIV/AIDS; and chronic homelessness among veteran

individuals and veteran families.

For the 2016 Point-in-Time Count, HUD provided a new standard for calculating chronicity. As of January 15, 2016 in order to be chronically homeless a person must have a continuous length of time homeless of 1 year or longer—OR four or more episodes of homelessness in the last three years that total 12 months or longer—AND a qualifying disability that is of long/indefinite duration and substantially impairs a person’s ability to live independently. The qualifying disabilities are: Physical Disability, Developmental Disability, Mental Health Condition, HIV/AIDS, Chronic Health Condition, and Substance Abuse. The only question that doesn’t ask the duration/severity follow up question about impairment is HIV/AIDS. Having this diagnosis is enough with the time or episode qualification. The duration/severity follow up question to Developmental Disability is not required by HUD, however in CT, the answers to this question reflect an inconsistent level of understanding surrounding what it means to have a developmental disability. Because of this, the duration/severity follow up question must be included in the calculation to avoid over-inflation of the results.

The HIV/AIDS subpopulation comes from adults who answered “yes” to having an HIV or AIDS diagnosis. Again, there is no requirement for any follow up questions regarding the severity or expected duration for this category.

Adults with a Serious Mental Illness data comes from all adults who answered “yes” to “Do you have a mental health problem?” and “yes” to the follow up question asking “Is this expected to be of long-continued and indefinite duration and substantially impairs your ability to live independently?”

Adults with a Substance Use Disorder data comes from all adults who answered “Alcohol Abuse,” “Drug Abuse,” or “Both Alcohol and Drug Abuse” to “Do you have any substance abuse issues?” and “yes” to the follow up question asking “Is this expected to be of long-continued and indefinite duration and substantially impairs your ability to live independently?”

Victims of Domestic Violence are people who answered “yes” to “Are you a victim of domestic violence?” or were in an emergency shelter or transitional housing project for domestic violence victims. Also, the calculation is only for adults who identify as Female or Transgender. Past data analysis indicated a high false positive rate when men were included in the calculation.

Chronically homeless veteran individuals or veteran families subpopulation data comes from those who answered “yes” to “Have you ever served in the US Armed Forces (Army, Navy, Air Force, Marines, or Coast Guard)?” or “Were you ever called into active duty as a member of the National Guard or as a Reservist?” and self-reported as chronically homeless as described previously.

Extrapolation of HMIS Data to Inform Subpopulations

Although data quality in CT HMIS improves dramatically each year with extensive validation programming aimed at preventing incomplete or missing data, some extrapolation is necessary to

account for imperfect data quality. The comprehensive methodology at calculating the subpopulations is as follows:

PIT 2016 Subpopulation Calculations

Chronic Homeless Sub Pop

Individual and Family surveys are separated based on the response to the question “If yes, HOW MANY children are staying with you tonight?”

Emergency Shelter Programs Only

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Meet the criteria for CH
- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”
- Substantive answer to either question:
 - Have you been continuously homeless for a year or more?
 - In the last three years, HOW MANY TIMES have you been homeless?
- Substantive answer to one of the questions:
 - Do you have HIV or AIDS?
 - Do you have a Physical Disability?
 - Do you have a Developmental Disability?
 - Do you have a Chronic Health Condition?
 - Do you have a Mental Health Problem?
 - Do you have any Substance Abuse Issues?

Rate for extrapolation:

Surveys Included / Surveys Useable

Extrapolation:

Individuals: Rate * Number of Adults (from PIT population count)

Families: Rate * Number of Adults (from PIT population count) * Average family size (from PIT population count)

DV Sub Pop

Emergency Shelter and Transitional Housing Programs Only

Programs classified as serving DV are excluded from the surveys used for the **Rate** calculation and the population is added back at 100%

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Have a Yes answer to the questions:
 - We are conducting a survey that helps advocates obtain funding to end

- homelessness. Would you like to participate?
- Are you a victim of Domestic Violence?
- Answered the question “How do you identify your GENDER?” as Female or Transgender

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”
- Have a Yes or No answer to the question “Are you a victim of Domestic Violence?”
- Answered the question “How do you identify your GENDER?” as Female or Transgender

Rate for extrapolation:

$$\text{Surveys Included} / \text{Surveys Useable}$$

Extrapolation:

$(\text{Rate} * \text{Number of Adults (from PIT population count excluding DV programs)}) + \text{Number of Adults from PIT population count in DV Programs}$

HIV Sub Pop

Emergency Shelter and Transitional Housing Programs Only
 Programs classified as serving HIV are excluded from the surveys used for the **Rate** calculation and the population is added back at 100%

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Have a Yes answer to the questions:
 - We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?
 - Do you have HIV or AIDS?

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”
- Have a Yes or No answer to the question “Do you have HIV or AIDS?”

Rate for extrapolation:

$$\text{Surveys Included} / \text{Surveys Useable}$$

Extrapolation:

$(\text{Rate} * \text{Number of Adults (from PIT population count excluding HIV programs)}) + \text{Number of Adults from PIT population count in HIV Programs}$

Substance Abuse Sub Pop

Emergency Shelter and Transitional Housing Programs Only

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”
- Answered the question “Do you have any Substance Abuse Issues?” as any of Yes, Alcohol Abuse, Drug Abuse, Both Alcohol and Drug
- Have a Yes answer to the question “If yes, is this a long-term Substance Abuse Problem that impairs your ability to hold a job or live independently?”

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”
- Answered the question “Do you have any Substance Abuse Issues?” as any of Yes, Alcohol Abuse, Drug Abuse, Both Alcohol and Drug, No

Rate for extrapolation:

Surveys Included / Surveys Useable

Extrapolation:

Rate * Number of Adults (from PIT population count)

Mental Illness Sub Pop

Emergency Shelter and Transitional Housing Programs Only

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”
- Have a Yes answer to the questions:
 - Do you have a Mental Health Problem?
 - If yes, is this a long-term Mental Health Problem that impairs your ability to hold a job or live independently?

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”
- Have a Yes or No answer to the questions:
 - Do you have a Mental Health Problem?
 - If yes, is this a long-term Mental Health Problem that impairs your ability to hold a job or live independently?

Rate for extrapolation:

Surveys Included / Surveys Useable

Extrapolation:

Rate * Number of Adults (from PIT population count)

Chronic Homeless Veteran Sub Pop

Individual and Family surveys are separated based on the response to the question “If yes, HOW MANY children are staying with you tonight?”

Emergency Shelter Programs Only

Surveys Included (Numerator):

Surveys that meet the following criteria:

- Meet the criteria for CH
- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”
- Have a Yes answer to the question “Have you served in the U.S. MILITARY?”

Surveys Useable (Denominator):

Surveys that meet the following criteria:

- Have a Yes answer to the question “We are conducting a survey that helps advocates obtain funding to end homelessness. Would you like to participate?”
- Have a Yes answer to the question “Have you served in the U.S. MILITARY?”
- Substantive answer to either question:
 - Have you been continuously homeless for a year or more?
 - In the last three years, HOW MANY TIMES have you been homeless?
- Substantive answer to one of the questions:
 - Do you have HIV or AIDS?
 - Do you have a Physical Disability?
 - Do you have a Developmental Disability?
 - Do you have a Chronic Health Condition?
 - Do you have a Mental Health Problem?
 - Do you have any Substance Abuse Issues?

Rate for extrapolation:

Surveys Included / Surveys Useable

Extrapolation:

Individuals: Rate * Number of Adults (from PIT population count)

Families: Rate * Number of Adults (from PIT population count) * Average family size (from PIT population count)

Data Collection Methodology for the Connecticut 2016 Point-In-Time Unsheltered Homeless Count

Prepared for Connecticut Coalition to End Homelessness (CCEH)

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Table 1: Overview of the Number of Block Groups, Number of Surveys Completed, and Statistical Projection by Region for 2016 Point-in-Time Count of the Unsheltered Homeless in Connecticut

A. Region	B. Total number of blocks	C. Number of blocks canvassed	D. Number of yrs blocks	E. Number of yrs blocks from 2015 count	F. Newly designated blocks	G. Number of blocks for sampling	H. Number of sampled blocks	I. Number of total surveys	J. Number of surveys in sampled blocks	K. Number of surveys in desig. blocks	L. Statistical projection	M. Total number
Bridgeport	194	57	33	33	0	161	24	25	4	21	20	45
Bristol	43	12	6	4	2	37	6	12	1	11	5	17
Greater Danbury	49	19	13	11	2	36	6	0	0	0	4	4
Hartford	96	32	19	13	6	77	13	15	4	11	9	24
Hartford - North	71	11	6	1	5	65	5	10	0	10	9	19
Hartford - West	205	15	0	0	0	205	15	0	0	0	28	28
Hartford - East	109	17	9	4	5	100	8	0	0	0	14	14
Litchfield	143	30	20	15	5	123	10	29	1	28	17	46
Manchester	48	14	8	8	0	40	6	4	2	2	5	9
Meridan	147	12	1	1	0	146	11	1	0	1	20	21
Middletown	118	29	13	13	0	105	16	39	0	39	13	52
New Britain	60	15	7	6	1	53	8	6	0	6	7	13
New Haven	105	39	28	28	0	77	11	95	24	71	10	105
New Haven - East	83	15	10	10	0	73	5	4	0	4	10	14
New Haven - North/S	173	16	3	3	0	170	13	0	0	0	23	23
New Haven - West	105	11	3	3	0	102	8	2	0	2	14	16
Norwalk-Fairfield Co	240	42	4	4	0	236	38	20	8	12	29	49
Norwich-New London	187	44	18	14	4	169	26	10	6	4	21	31
Stamford-Greenwich	137	39	21	16	5	116	18	48	10	38	14	62
Tolland	98	11	4	4	0	94	7	0	0	0	13	13
Waterbury	82	20	9	9	0	73	11	47	1	46	9	56
Windham	88	8	1	1	0	87	7	0	0	0	12	12
Totals	2581	508	236	201	35	2345	272	367	61	306	306	673

The 2016 point-in-time count of the unsheltered homeless in Connecticut largely canvassed the same census block groups that had been covered in 2015. There were a few minor exceptions to this as regional coordinators were able to make some modifications where they considered it likely to find an unsheltered homeless person. Reusing most of the same block groups simplified the preparations for the count as a new random sample did not have to be drawn and the maps for canvassing could be reused. This decision likely had little impact on the overall validity of this count, but any minor problems associated with reusing the same sampled blocks would continue to multiply if the same sampled blocks continued to be canvassed in future years.

In 2016, the canvassers also used a GPS tracking device to record the census block where a homeless

person completed the survey. This change was, in part, an effort to correct the problem found in previous surveys, which was that in a small number of cases, the canvasser made an error in recording the correct census tract number. The use of the GPS in this year's survey proved problematic, as nearly a quarter of the surveys had an incorrect census block number. In all cases, this error could be corrected and the eventual census block number was recorded into the data file.

For the 2016 PIT count, regional coordinators for the 2 Continuum of Care (CoC) regions, 12 Balance of State (BOS) regions that were formerly CoCs, and 11 BOS regions were given a list of census block groups that were canvassed as a designated or a sampled block in 2015. The regional coordinators were able to add additional census blocks to the designated blocks if they thought they would be likely to find an unsheltered homeless person. On the night of the count, coordinators and/or volunteer canvassers could also intentionally seek and survey unsheltered homeless outside of the designated blocks, so long as this was noted on the survey. Completed surveys from such blocks were treated as if they had been collected in a designated block.

The aim of this methodology is to encourage the coordinators and the canvassers to seek out people and regions with intentionality to find as many unsheltered homeless people as possible, and then to sample randomly the remaining regions in the state. Surveys completed by a homeless person in a sampled region are used to make projections for the geographic parts of the state that are not canvassed.

The methodology for the point-in-time (PIT) count of the unsheltered homeless population in Connecticut in 2016 used the same sampled blocks that were used in 2015, which followed the design used in 2011 and 2013.

Table 1 provides an overview of the number of block groups, the number of blocks canvassed, the number of surveys completed, the statistical projections, and estimates of the total number of unsheltered homeless for Connecticut in 2016.

A total of 367 surveys were completed; 306 were completed from the designated blocks and 61 from the sampled blocks. Based on the sample, an additional 306 homeless people were projected across the state in the uncanvassed census blocks. The total count of the unsheltered homeless in 2016 was 673.

Across the state, 236 (of 2581) census blocks were identified as designated blocks. This left 2345 blocks from which a sample would be drawn. In each of the 11 original BOS regions, 7.5 percent of the total census blocks were sampled using a generated list of random numbers for the 2015 count and reused this year. In each of the 11 other regions, 15 percent of the total census blocks were sampled. In future counts, this distinction regarding the percentage of blocks sampled may need to be modified, as it represents the continuation of the tradition represented by the CoCs. In 2016, 272 of the 2345 blocks were canvassed on the night of the count as part of the sample. In all, 508 blocks were canvassed.

The PIT count for 2016 saw a slight increase in the number of unsheltered homeless compared to 2015. In 2016, 306 surveys were completed from the 236 designated blocks – an average of 1.3 surveys per

designated block. This is similar to 2015, in which 267 surveys were completed from the 223 designated blocks – an average of 1.2 surveys were completed per each designated block. Also, there was a small change in the counts from the sampled blocks. In 2016, 61 surveys were completed from the 272 sampled blocks – an average of .22 per block; whereas in 2015, 72 surveys were completed from the 269 sampled blocks -- an average of .27 per block

The overall count in 2015 of the unsheltered homeless in 2015 was 606, which was significantly less than the count in 2013 of 1036. On the night of the count in 2015, the weather had been especially cold and the snow was deep, and it was speculated that this may have contributed to the lower count. The weather in 2016, however, was not especially cold or snowy, so perhaps real gains have been made since 2013 in reducing the number of the unsheltered homeless.

As in previous years, the statistical projection was based on an averaging across the regions and thus projections are not sensitive to variations in local conditions, housing markets, rates of poverty, social services, or innovative programs. The projections almost certainly overly “homogenize” the results across the state.

In the 2016 unsheltered PIT count, 272 blocks were sampled for canvassing out of a population of 2345 non-designated blocks. In 26 of these 272 blocks (.0956), at least one unsheltered homeless person was surveyed. The interpolated median number of homeless people surveyed in these 26 blocks was 1.54. To obtain the statistical projection, the number of blocks in each region that were not canvassed was multiplied by .0956 and by 1.55 (or .1476) (Note: A multiplier of .240 (61/254) would also be logically defensible as the mean number of surveys per sampled block. The mean, however, is skewed by a couple of blocks in which a large number of surveys were completed. The multiplier of .240 would significantly increase the total number in the statistical projection. Using an interpolated median for the multiplier is more conservative and consistent with the practice used in 2011 and 2013.).

Detailed information on the calculations for Table 1:

Column B lists the total number of census blocks found in each region based on the configuration used in the 2010 US Census.

Column C identifies the total number of block groups that were canvassed in each region. The number is equal to the sum of columns D and H.

Column D is the number of designated blocks in each region and is the sum of columns E and F.

Column E is the total number of blocks that a homeless person was found in 2015 and was carried over by the regional coordinators into the 2016 count.

Column F is the newly designated blocks by the regional coordinator. Blocks selected to be canvassed on the night of the count are included in this column.

Column G is the total number population of blocks that are subject to canvassing based on the random

sample of blocks in each region. It is equal to the number in column B minus the number in column D.

Column H lists the number of sampled blocks. The value was determined by multiplying the number in Column E times .075 in each BOS region and by .15 in each CoC region (or previous CoC region and then rounding to the nearest whole number.

Column I is the total number of surveys completed. Column J is the number collected from the sampled blocks and K is the number from the designated blocks. The total in column I is equal to number in J plus K.

Column L contains the statistical projections, which estimates the number of unsheltered homeless that would have been found in each region if all the block groups in each region were canvassed. The value is equal to the value in column G – column H times 1.476.

Column M is the total number of homeless by adding the totals in column L plus column I.

Notes: The totals in column K and L are both equal to 306 – this is coincidental. The numbers are all recorded as whole numbers. Excel may carry hidden decimal places resulting in some small discrepancies in the total columns that might appear here and in the subpopulations.

Notes on the Subpopulations

All numbers for subpopulations were based on cross-tabulation tables created in SPSS. The tables crossed the various subpopulations by region and by whether or not the surveys were collected in a designated or a sampled block. Rates for the various subpopulations were determined based on the totals from the survey and then multiplied by the projected number for the region to determine the projected number for the region.

Many of the surveys were not complete and a large portion of the results for the subpopulation questions are missing. For the subpopulations, rates were determined from the crosstabulation tables. These rates were then multiplied by the number of missing cases plus the number projected

This method was modified a bit for the age groups 18-24 and 25 and over, as an age undetermined category is provided. For reporting, all projected and missing cases are reported as undetermined.

A challenge for some of the subpopulations is that HUD requests some information for households and some for all adult persons. Although there are only a small number of households with more than one adult, this created a challenge to quantify properly as it appears (cannot be sure) that in all cases with more than one adult, both adults were surveyed. It would be helpful if this item could be clarified in future surveys.

As for the overall count, using the same multiplier in all regions for the projected and missing values overly ‘homogenizes’ the projected count, because the conditions of the homeless may vary from place

to place, but for most of the subpopulations there were insufficient number of cases to presume that individualized rates for each region would produce a reliable projection

There were no households in the count that did not include someone 18 or over, i.e. no unaccompanied minors.