



CHARLOTTE-MECKLENBURG POINT IN TIME COUNT REPORT

2009-2014

Prepared by UNC Charlotte Urban Institute on behalf of the Charlotte-Mecklenburg Coalition for Housing. Funding for this report provided by the Foundation For The Carolinas.

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Mecklenburg County Community Support Services

Cover photo: Michella Palmer, a Medical Outreach Coordinator with Urban Ministry Center conducts a survey for the homeless count in Charlotte.

Photographer: Mary Gaertner.

Key Definitions

Chronically Homeless

An unaccompanied individual with a disability who has either been continuously homeless for 1 year or more or has experienced at least four episodes of homelessness in the last 3 years. If an adult member of a family meets these criteria, the family is considered chronically homeless. ●

Continuum of Care (CoC)

Local planning bodies responsible for coordinating the full range of homelessness services in a geographic area, which may cover a city, county, metropolitan area, or even an entire state. ●

Emergency / Seasonal Housing

A facility with the primary purpose of providing temporary shelter for homeless persons. ●

People in Families

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

Housing First

The direct placement of homeless people into permanent housing.

Individuals

Includes single adults and adult couples unaccompanied by children.

Permanent Supportive Housing

Designed to provide housing and supportive services on a long-term basis for homeless people with a disability. ●

Point in Time Count

An unduplicated one-night count of both sheltered and unsheltered homeless populations. ●

Rapid Re-Housing

A program that provides financial assistance and services to prevent individuals and families from becoming homeless and helps those who are experiencing homelessness to be quickly re-housed and stabilized. This is considered permanent housing.

Transitional Housing Program

A program that provides temporary housing and supportive services for 24 months with the intent for the person to move towards permanent housing.

Sheltered Homeless People

People who are staying in emergency shelters, transitional housing programs, or safe havens. ●

Unaccompanied Children and Youth

People who are not part of a family during their episode of homelessness and who are under the age of 25. ●

Unsheltered Homeless People

People who do not have a permanent nighttime residence and therefore sleep in makeshift residences such as public transportation, parks, and abandoned buildings. ●

Vulnerability Index

A tool for identifying homeless individuals at a heightened risk for mortality.

● = Official definition of the U.S. Department of Housing and Urban Development (HUD)

Executive Summary

The Point in Time (PIT) Count is federally-mandated research to determine the prevalence and characteristics of persons experiencing homelessness in the United States. The PIT Count helps communities better understand who is facing homelessness on a given night so that they can advocate for additional federal, state, and local resources to provide services for the homeless population. This report highlights the findings from the 2014 Charlotte-Mecklenburg PIT Count and provides a longitudinal examination of PIT data from 2009 to 2014. To provide context to the changes seen in the PIT data, this report includes a section on national and local changes happening around homelessness funding, policies, and programs.

The findings provided in this report are estimates of how

On a single night in January 2014 in Charlotte-Mecklenburg

2,014 People were identified as homeless	8% Of homeless people were unsheltered
99% Of homeless families were sheltered	164 Unsheltered people
157 Homeless veterans	100% Of unaccompanied children and youth were sheltered
81% Of homeless people were African-American	49 Unsheltered people identified as vulnerable
203 People were chronically homeless	60% Of chronically homeless population were sheltered

EXECUTIVE SUMMARY

many people in Charlotte-Mecklenburg are homeless on a given night. While the data presented may be an undercount of those experiencing homelessness, it is a useful tool to gauge changes in the homeless population over time.

The PIT Count in Mecklenburg County occurred the night of Wednesday, January 29, 2014. That night, 2,014 people were identified as homeless.

In Charlotte-Mecklenburg Since 2009 Since 2013

Overall homeless population	↓ 19% From 2,481 to 2,014	↓ 17% From 2,418 to 2,014
Families with children	↑ 57% From 522 to 820	↓ 27% From 1,122 to 820
Individuals	↓ 40% From 1,959 to 1,185	↓ 8% From 1,290 to 1,185
Unaccompanied children and youth	↓ 44% From 16 to 9	↑ 50% From 6 to 9
Veterans	↓ 10% From 174 to 157	↑ 31% From 120 to 157
Chronically homeless	↓ 23% From 262 to 203	↑ 44% From 141 to 203
Unsheltered	↓ 70% From 550 to 164	↓ 42% From 283 to 164

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Introduction

The Point in Time Count (PIT) is federally mandated by the U.S. Department of Housing and Urban Development for all communities receiving federal funds through the McKinney-Vento Homeless Assistance Grants Program. The PIT Count takes an unduplicated census of homeless people – sheltered or not – on a given night in January. There are two components to the PIT Count: a sheltered count of how many people are in shelters (transitional, emergency, and seasonal shelter) and an unsheltered count of how many people are living in places unfit for human habitation (streets, camps, abandoned buildings).

The North Carolina Coalition to End Homelessness administers the collection of PIT Count data in North Carolina. Service providers and volunteers with the Homeless Services Network conduct the PIT Count locally. Megan Coffey of Mecklenburg County Community Support Services coordinated the sheltered count. Liz Clasen-Kelly of the Urban Ministry Center and Alisha Pruett of Asheville Buncombe Community Christian Ministry coordinated the unsheltered count.

Point in Time Count Methodology

While the federal government mandates the PIT reporting requirements for both the unsheltered and sheltered counts, the methodology for conducting the unsheltered count is up to each individual community to develop and implement.

UNSHELTERED COUNT

The unsheltered count portion of the PIT Count attempts to estimate the number of unsheltered persons living in places unfit for human habitation on a given night in January such as streets, cars, abandoned buildings, and camps.

2009-2013

Prior to 2014, the unsheltered count used estimates provided by the Charlotte-Mecklenburg Police Department since police officers are often the most familiar with the locations of homeless people within their service areas. The police reported on known homeless persons living in places unfit for human habitation. Excluded from the unsheltered count were the North Tryon, Central, and Metro service areas, since the persons identified in those areas were often simultaneously being served in shelters. In addition, outreach volunteers interviewed people experiencing homelessness in uptown Charlotte and at a local soup kitchen the following day to collect demographic data.

2014

In 2014, the unsheltered methodology was expanded to include a larger outreach effort by service providers and volunteers in conjunction with the police force and members of the greater community. The PIT Count occurred from sundown on the night of Wednesday, January 29, 2014 until sunrise the following day. Prior to the Count, an article was printed in *The Charlotte Observer* highlighting the PIT Count, and in response, community members responded with locations where they believed there might be homeless persons. Police officers also provided information for each of their districts on where homeless people might reside. Nearly 100 volunteers (including police officers) were organized to cover each police district and went out the night of the PIT Count to identify (and count) people experiencing homelessness. The Count included the collection of required demographic data, self-reported data to assess vulnerability and whether a homeless person had been discharged from the criminal justice, behavioral health, or health care systems within 30 days of becoming homeless (asked as part of the sheltered count) or in the past thirty days (asked as part of the unsheltered count).

POINT IN TIME COUNT METHODOLOGY

SHELTERED COUNT

The sheltered count provides census data on all individuals and families sleeping in homeless shelters on the night of the count, which includes emergency shelters, transitional housing, and safe havens. According to the U.S. Department of Housing and Urban Development (HUD) guidelines¹, emergency shelters can also include domestic violence shelters and rooms paid for at hotels, motels, or apartments to serve homeless people. The sheltered count excludes persons who are precariously housed, such as staying with family or friends, living in a motel, living in permanent housing units, receiving temporary assistance while living in conventional housing, or staying at a hospital, residential treatment facility, foster care, or detention facility. The sheltered count also includes the collection of required demographic data, self-reported data related to vulnerability and whether a homeless person had been discharged from the criminal justice, behavioral health, or health care systems within 30 days of becoming homeless (sheltered count) or within the past thirty days (unsheltered count).

All homeless shelter providers in the Charlotte-Mecklenburg Continuum of Care (CoC) are required to submit their census data to the PIT coordinator, who then compiles the data and submits it to the North Carolina Coalition to End Homelessness. The CoC recently transitioned to the Carolina Homeless Information Network (CHIN) Homeless Management Information System (HMIS) database in 2013 and hopes to use this data tool for future PIT reporting. However, since this is the first year of agencies using the CHIN system and not all agencies have fully transitioned to CHIN, the numbers presented here and reported as part of the official Point in Time Count were submitted by each individual agency to the PIT coordinator.

LIMITATIONS

There are several limitations to the 2014 Count, as well as the PIT Count overall. Given its limitations, the Count should not be viewed as an exact number, but rather an estimate that can be used to examine characteristics of the Charlotte-Mecklenburg homeless population and trends over time.

Undercount. The PIT Count is a useful tool in understanding homelessness at a point in time but does not capture all the people who:

- experience periods of homelessness over the course of a year
- are living in motels, staying with family/friends, in jail or in a treatment facility
- unsheltered but not visible on the day of the count

SUMMARY OF LIMITATIONS

- Count is a one night estimate and longitudinal analyses should be viewed as general trends
- Undercount of people experiencing homelessness
- Changes in 2014 unsheltered count methodology
- Self-reported data have reliability issues and not all people answer these questions
- Evolving housing type definitions

¹ https://www.onecpd.info/resources/documents/counting_sheltered.pdf

POINT IN TIME COUNT METHODOLOGY

Weather. The 2014 PIT Count occurred during atypically cold weather for the Charlotte region resulting in many otherwise unsheltered individuals seeking protection from the winter weather in a warming station provided by the Red Cross. This was helpful in capturing data on some unsheltered homeless individuals; however the weather also prevented some areas of the county from being reached. It is difficult to assess the exact impact the weather had on the final count number.

Methodology changes. Because of the methodological changes in the 2014 PIT Count, caution should be used in interpreting changes over time. The 2014 PIT Count is the first year where volunteer outreach groups were used for the unsheltered count instead of solely using information from the police force. The increased effort to locate and count unsheltered individuals may account for the rise in unsheltered family homelessness, veteran homelessness, and chronic homelessness since 2013.

Data requirements and definitions might change from year to year as the PIT Count data collection requirements expand and strengthen. For example, unaccompanied children and youth were not considered a separate family type in 2009 and 2010 but then considered a separate family type as of 2011. In 2014, transgender was added as an option for gender choice. Prior to 2014, race and ethnicity information were not collected.

Self-reported data. The following data are self-reported:

- Serious mental illness
- Substance abuse
- HIV/AIDS
- Survivors of domestic violence
- Discharged from a system within 30 days of becoming homeless
 - Criminal justice system (jails, prisons)
 - Behavioral health system (mental health/substance use)
 - Health care system (hospitals)

These self-reported data items are not federally required to be reported, but are included in the Charlotte-Mecklenburg PIT Count of unsheltered and sheltered people. Self-reported data should not be viewed as an exact number. Individuals may choose whether or not to answer these highly personal questions or to do so truthfully. Therefore, the numbers provided in this report are only reflective of those who chose to answer these questions. Due to the potential inaccuracies of self-reported data, the findings provided in this report regarding self-reported data should be used with caution.

POINT IN TIME COUNT METHODOLOGY

Changes in categorization of housing types. Changes at the agency level for how units are categorized also had an impact on findings. For 2014, Charlotte Family Housing changed how it reported its units. In 2013 the majority of their units were classified as transitional shelter, but in 2014 many of these units were reclassified as rapid rehousing, resulting in a drop in the number of people reported in transitional housing from 2013-2014.

Unaccompanied children and youth. Unaccompanied children and youth are typically undercounted. This population is harder to count because they tend to not reside in the same areas as older adults experiencing homelessness, may not self-identify as homeless, stay on friends' couches, or try to blend in.

National Policy Context

In the last five years, federal policy governing the national response to homelessness has shifted from a focus on programs that manage the problem of homelessness to local systems that prevent and end the problem of homelessness.

- ***Homeless Emergency Assistance and Rapid Transition (HEARTH) Act of 2009.*** The HEARTH Act reauthorized McKinney-Vento Homeless Assistance Programs that provide funding to states and local communities to address homelessness. The Act requires local Continuums of Care to incorporate a number of changes that will impact local service-delivery including:
 - **System responses instead of program responses to homelessness.** As a system, communities that receive federal funding will have to coordinate their response to homelessness and use system and program level data to inform decision-making.
 - **Measuring outcomes instead of reporting activities.** Communities that receive federal funding will be expected to show progress on key outcomes including the reduction in overall homelessness, the reduction of people who return to homelessness, increased access to housing and services through outreach, and job and income growth.
 - **Permanent housing instead of shelter.** Funding decisions will be weighted toward housing solutions, specifically Permanent Supportive Housing opportunities for chronically homeless individuals and families and rapid re-housing opportunities for those who are not chronically homeless.
- ***Opening Doors: Federal Strategic Plan to End and Prevent Homelessness.*** In 2010, the United States Interagency Council on Homelessness launched the Federal Strategic Plan to Prevent Homelessness “as a roadmap for joint action” by 19 member agencies and state and local partners. The plan established the following goals:
 - Finish the job of ending chronic homelessness in five years.
 - Prevent and end homelessness among veterans in five years.
 - Prevent and end family homelessness in 10 years.
 - Set a path toward ending all types of homelessness.

The plan also established strategies for meeting its goals including increased leadership, collaboration, and civic engagement; increased access to and provision of stable and affordable housing; expanding opportunities for sustainable employment; improving health by linking health care with homeless assistance and housing programs; and, transforming homeless service systems into crisis response systems that prevent homelessness and return people quickly to stable housing.

Local Context

The Charlotte-Mecklenburg community has been active in its efforts to end and prevent homelessness. From January 2009 – January 2014, there were a number of initiatives, developments, and programs that address homelessness in the Charlotte-Mecklenburg community and help provide context for the PIT Count findings.

COMMUNITY COORDINATION AND COLLABORATION

- ***Ten-Year Plan to End and Prevent Homelessness and the Charlotte-Mecklenburg Coalition for Housing.*** In June and July of 2010, the Charlotte City Council and Mecklenburg Board of County Commissioners appointed members to the Charlotte-Mecklenburg Coalition for Housing (CMCH) Board to oversee a ten-year plan to end and prevent homelessness. The goals of this Board include moving homeless families and individuals into appropriate and safe permanent housing as soon as possible; linking chronic homeless to housing, treatment and services through intensive outreach and engagement; and promoting housing stability for those families and individuals most at risk of becoming homeless. The CMCH Board is supported by the City of Charlotte’s Director of Neighborhood and Business Services, Mecklenburg County’s Director of Community Support Services and the Charlotte Housing Authority’s Chief Executive Officer. The Coalition also developed a relationship with the UNC Charlotte Urban Institute and the Institute for Social Capital to partner on data, research and evaluation work.
- ***100 Homes in 100 Days.*** The 100 homes campaign is part of a national effort to permanently house 100,000 of the country’s most vulnerable homeless individuals. Locally, our community set the goal to house 100 homeless individuals in 100 days. The term “housed” in this case refers to an individual in permanent housing or permanently living with family/friends. Since May 2013, and over the course of 200 days, the Charlotte community surpassed its goal and housed 312 chronically homeless persons. Contributing to the achievement of this goal was a commitment that all new Veterans Affairs Supportive Housing (VASH) vouchers would go to chronically homeless veterans and that all new units at McCreesh Place (a supportive housing community) would be prioritized for chronically homeless men. In Charlotte, this effort is a collaboration between the Veterans Administration, the City of Charlotte, Mecklenburg County and local service providers in conjunction with the national 100,000 Homes Campaign, which is working to find permanent homes for our country’s most vulnerable populations.
- ***Community Partnership.*** The CMCH and the Homeless Services Network have developed a collaborative working relationship to support community engagement and advocacy on affordable housing and homelessness issues and research and evaluation of the community’s homelessness and affordable housing efforts.

LOCAL CONTEXT

- **Charlotte Family Housing.** In 2011, Family Promise of Charlotte, Charlotte Emergency Housing, and the Workforce Initiative for Supportive Housing merged to create Charlotte Family Housing (CFH), so as to better serve families experiencing homelessness through a continuum of housing, support services and advocacy.

PERMANENT SUPPORTIVE HOUSING

- **Permanent Supportive Housing (PSH).** The community is using a system-wide Housing First model which creates permanent supportive housing for a household that is homeless or at risk of homelessness and has a condition of disability such as mental illness, substance abuse, chronic health issues or other conditions that create multiple and serious ongoing barriers to housing stability. PSH units are provided through community agencies such as Moore Place, MeckFUSE, and scattered-site programs run through Supportive Housing Communities, Shelter-Plus-Care, VASH and Urban Ministry Center.
- **Shelter Plus Care.** The Shelter Plus Care HUD program administered by Mecklenburg County has increased the number of subsidized housing placements. Prior to 2013, 200 people were typically served through the Shelter Plus Care, however the case load was able to be increased to 250 due to HUD funding, improved outreach, and streamlined application procedures.
- **McCreesh Place.** McCreesh Place was developed in 2003 by St. Peter's Homes to provide 64 single room occupancy rental units that serve people at less than 30% area median income (AMI). In 2011 McCreesh Place completed phase II which added 26 additional units that serve people between 0-41% AMI. The building is located at 2120 N. Davidson Street, Charlotte, and provides permanent supportive housing for residents with disabilities and who are formerly homeless. Supportive Housing Communities also holds a master lease for scattered-site apartments throughout the community.

McCreesh Place



Image of McCreesh Place. Retrieved March 28, 2014 from <http://www.cha-nc.org>

Moore Place



Image of Moore Place. Retrieved March 28, 2014 from <http://www.cha-nc.org>

LOCAL CONTEXT

- **Moore Place.** Located at 929 Moretz Avenue, Charlotte, Moore Place was developed in 2012 by The Urban Ministry Center (UMC) to provide 85 units that would serve homeless individuals at less than 25% AMI, following a housing first program. In conjunction with Homeless Services, Moore Place provides wraparound services to chronically homeless adults and is the first permanent supportive housing development that follows the “housing first” model. UMC also provides permanent housing through scattered site apartments located throughout the community.
- **Veterans.** The Veteran’s Administration is part of the community’s systems approach to ending and preventing homelessness and through the Acceleration to Housing initiative has streamlined application processes so that the community is better able to utilize its allotted VASH vouchers. In 2013 Charlotte received 40 vouchers and utilized all of them.

PREVENTION & RAPID RE-HOUSING

- **Homeless Prevention and Rapid Re-Housing Program.** The Charlotte-Mecklenburg community received \$1.9M in Homeless Prevention and Rapid Re-housing Program (HPRP) funds from 2009-2012. These funds helped coordinate the community around a system to use the funds for prevention and rapid re-housing response. Crisis Assistance Ministry, the Workforce Initiative for Supportive Housing (WISH), now a part of Charlotte Family Housing, and other community partners were recognized by HUD for successful collaboration strategies. The programs continue with support from other funding sources.
- **Low Barrier Rapid Re-Housing initiatives.** The Charlotte-Mecklenburg community shifted to funding rapid re-housing initiatives with low barriers to program entry, which help families successfully exit homelessness and maintain permanent housing by integrating employment assistance, case management and housing services. The Men’s Shelter of Charlotte and the Salvation Army of Greater Charlotte’s Center of Hope are currently engaged in low-barrier rapid re-housing programs, and after one year, report promising outcomes regarding housing stability and recidivism.

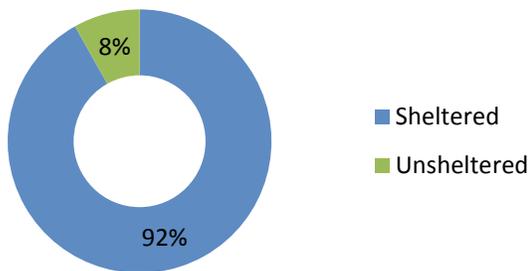
Family Placed in Housing through the Salvation Army of Greater Charlotte Center for Hope



Image of Mom and Son. Photo courtesy of The Salvation Army of Greater Charlotte.

PIT Count Overview

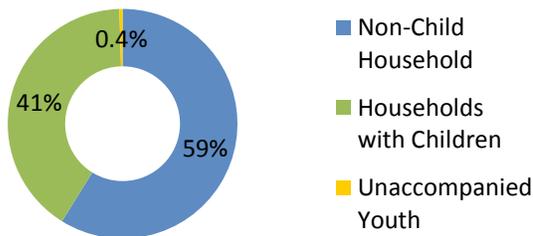
Total Homeless Population by Shelter Type, 2014



OVERALL

- The 2014 count identified **2,014** homeless persons on the night of January 29th.
- There was a **17%** decrease in homeless persons from 2013 to 2014 and a **19%** decrease from 2009 to 2014.
- Unsheltered homeless persons decreased by **42%** and sheltered homelessness decreased by **13%** from 2013 to 2014.

Persons by Household Type, 2014



HOUSEHOLD TYPE

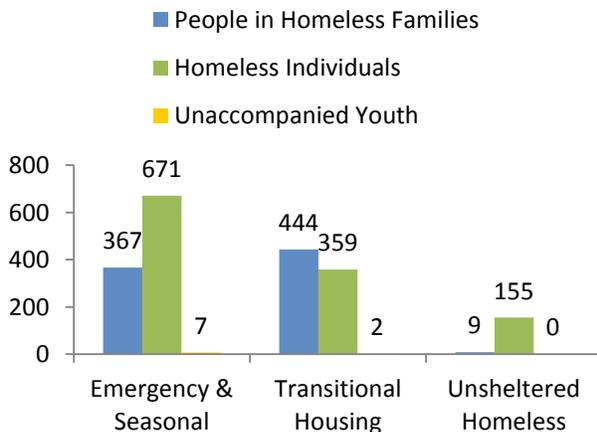
Families

- There were **820** homeless people in **280** families, representing **41%** of all homeless people on a single night.
- This represents a **27%** decrease from 2013 and a **57%** increase from 2009.
- 99%** of families were sheltered.

Individuals

- 1,185** people were homeless as individuals, representing about **59%** of all homeless people on a single night.
- This represents an **8%** decrease from 2013 and a **40%** decrease from 2009.
- 87%** of individuals were sheltered.

Homeless Families and Shelter Type, 2014

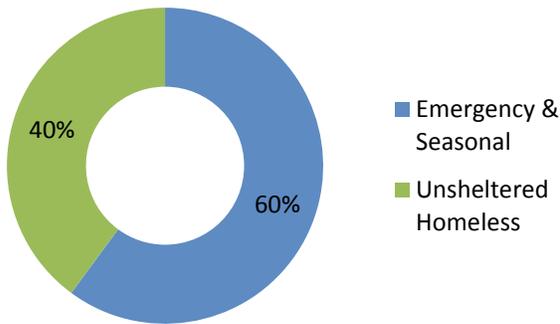


Unaccompanied Children and Youth

- There were **9** unaccompanied homeless children and youth on a single night in January 2014.
- 100%** of the unaccompanied children and youth were sheltered in 2014.

PIT COUNT OVERVIEW

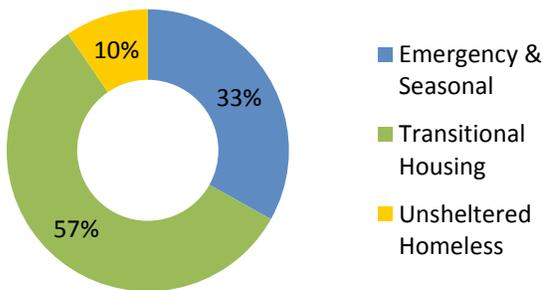
Chronically Homeless Persons, 2014



CHRONICALLY HOMELESS

- **203** people identified as chronically homeless.
- This is a **44%** increase from 2013, but a **23%** decrease since 2009.

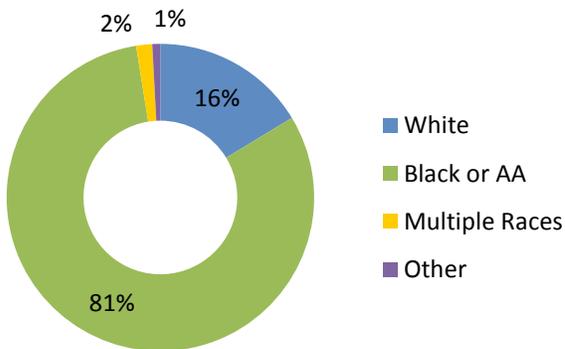
Homeless Veterans by Shelter Type, 2014



HOMELESS VETERANS

- There were **157** homeless veterans in Mecklenburg County. Homeless veterans accounted for nearly **11%** of all homeless adults.
- This represents a **31%** increase from 2013 and a **10%** decrease from 2009.

Homeless Persons by Race, 2014

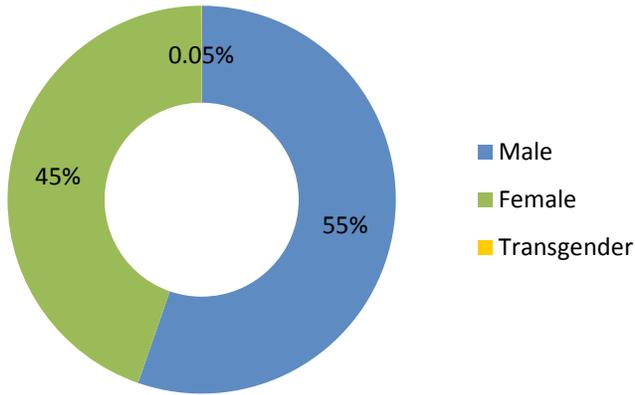


RACE

- **81%** (or **1,634** people) of the total homeless population were Black or African-American.
- **3%** of all homeless people on a single night were of Hispanic/Latino descent.
- **72%** (or **118** people) of the unsheltered homeless population were Black or African-American.

PIT COUNT OVERVIEW

Homeless Persons by Gender, 2014

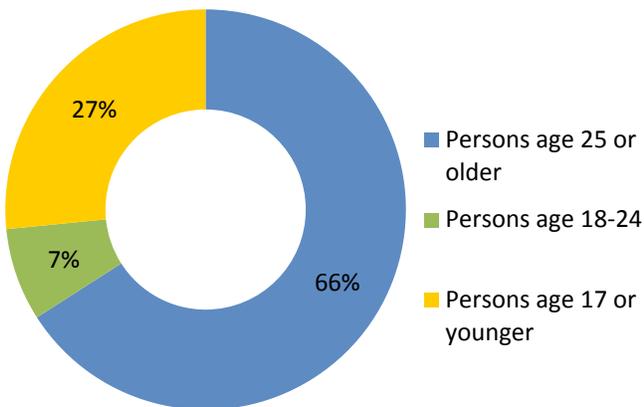


GENDER

- **55%** of all homeless people were male in 2014.
- **69%** of people in homeless families were women.
- **73%** of homeless individuals were male.

Note: Data prior to 2014 not complete for gender.

Homeless Persons by Age, 2014



AGE

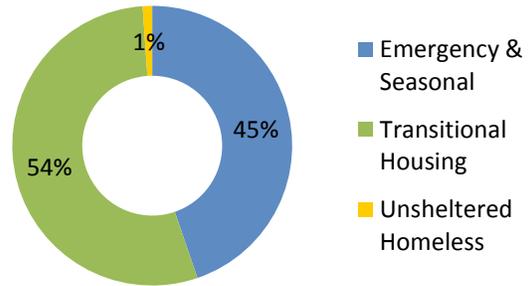
- **27%** (or **535** people) of all homeless people on a single night in January 2014 were under the age of 18.
- The majority of homeless people (**66% or 1,328 people**) were age 25 or older.

Families

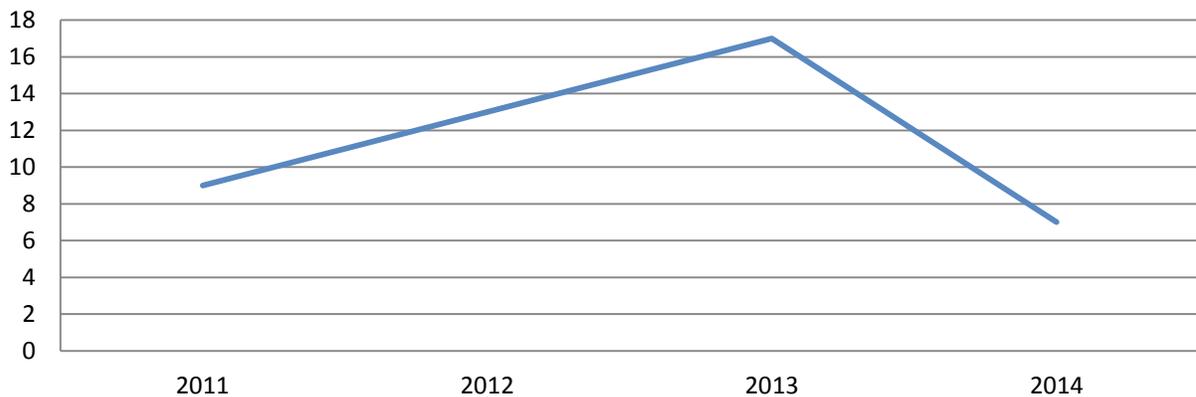
On a Single Night in January 2014

- There were 820 homeless people in 280 families, representing 41% of all homeless people on a single night.
- People in families comprised 44% of the total sheltered homeless population.
- People in families were much more likely to be sheltered (99%) than unsheltered (1%), but the number of unsheltered people in families increased for the first time in five years.
- A total of seven people in families were identified as chronically homeless and living in emergency and seasonal shelters (see note below). There were no unsheltered chronically homeless families.

People in Homeless Families by Shelter Type, 2014



Total People in Chronically Homeless Families, 2011-2014



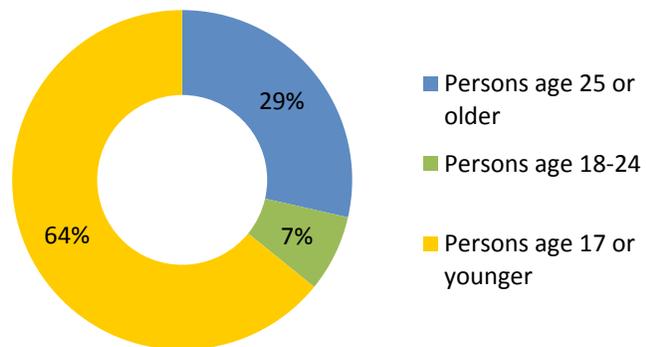
Note: Data on chronically homeless families were not collected by HUD prior to 2011. Chronically homeless families in transitional housing are not included.

FAMILIES

Age of Homeless People in Families, 2014

- 64% of all homeless people in families were under the age of 18.
- 7% of all homeless people were between the ages of 18 and 24.
- 29% of homeless people in families were 25 years or older.
- The majority of homeless children and youth (98% or 526 people) were part of a homeless family.

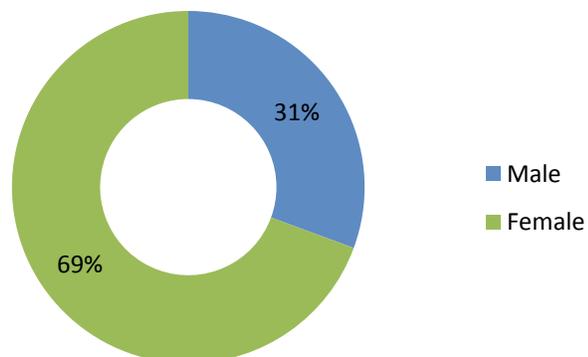
Age of People in Homeless Families, 2014



Gender of Homeless People in Families, 2014

- 69% or 569 people in homeless families were females.
- 31% of homeless people in families were males.
- While both genders were more likely to be counted in shelters, 56% of females were in transitional housing compared to 51% of males. A higher proportion of males (48%) were counted in emergency shelters than females (43%).

Total People in Homeless Families by Gender, 2014



Note: Data prior to 2014 not complete for gender.

FAMILIES

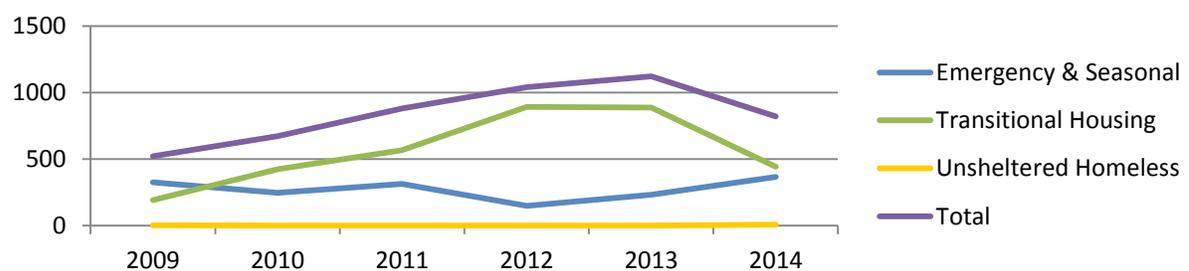
Since 2013²

- The number of homeless families declined by 76 households or 21% (from 356 families in 2013 to 280 in 2014).
- The number of homeless people in families decreased by 27% (from 1,122 people in 2013 to 820 in 2014). This decrease was due largely to the change in the number of people in families in transitional housing, which decreased by 50% (from 888 people in 2013 to 444 in 2014).
- The number of unsheltered people in families increased from zero unsheltered persons in 2013 to 9 people in 2014.
- The number of sheltered people in families declined by 28%, almost the same proportion of reduction in the number of homeless people in families (from 1,122 people in 2013 to 811 people in 2014).
- The number of people in families identified as chronically homeless declined by 59% (from 17 people in 2013 to 7 people in 2014).

Since 2009³

- The number of homeless people in families increased by 57% (from 522 people in 2009 to 820 people in 2014).
- The proportion of homeless families increased by 56% during the same time period (from 179 families in 2009 to 280 families in 2014).
- Although people in families are less likely to be unsheltered, their number tripled (from 3 people in 2009 to 9 people in 2014).
- The number of sheltered people in families increased 56% (from 519 people in 2009 to 811 people in 2014).

People in Homeless Families by Shelter Type, 2009-2014



² Given changes in methodology for the unsheltered count from 2013-2014, comparisons should be interpreted with caution. Additionally, due to Charlotte Family Housing's transition to reporting its transitional housing units as rapid re-housing or other unit types, the decrease in transitional housing should be interpreted with caution.

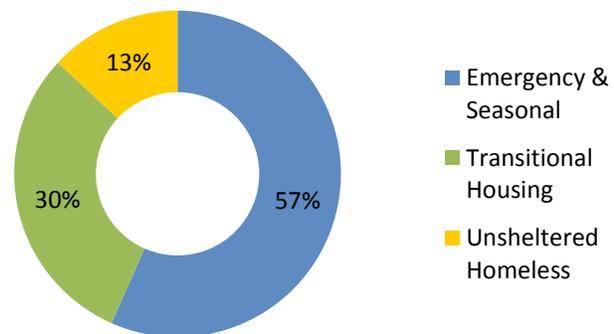
³ *Ibid.*

Individuals

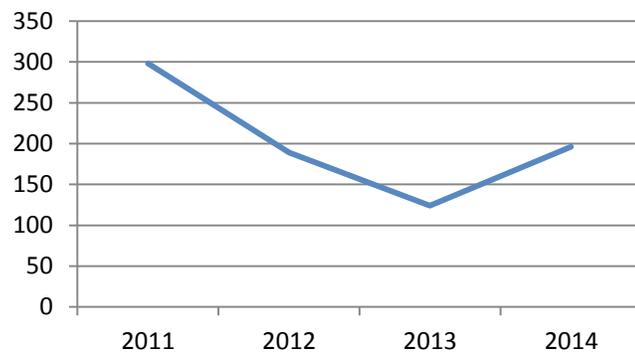
On a Single Night in January 2014

- 1,185 people were homeless as individuals in Mecklenburg County, representing about 59% of all homeless people on a single night.
- Homeless individuals comprised 56% of the total sheltered homeless population.
- Homeless individuals were much more likely to be sheltered (87%) than unsheltered (13%). Of those sheltered, 65% were in emergency and seasonal shelters and 35% were in transitional housing.
- There were 196 individuals identified as chronically homeless, representing about 17% of the total number of homeless individuals, or nearly 10% of all homeless people on a single night.
- 59% of individuals (115 people) identified as chronically homeless were counted in emergency and seasonal shelters and about 41% (81 people) were counted in unsheltered locations.

Homeless Individuals by Shelter Type, 2014



Chronically Homeless Individuals, 2011-2014



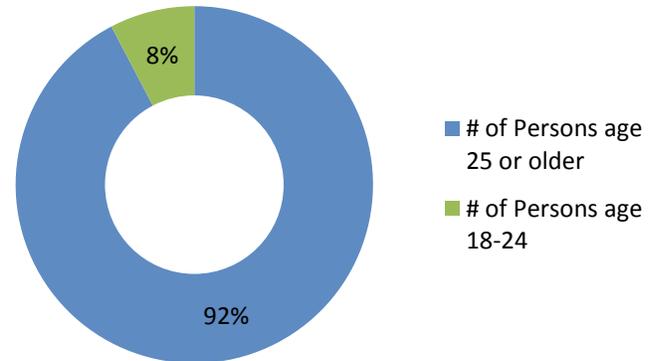
Note: Data on chronically homeless individuals were not collected by HUD prior to 2011. Chronically homeless individuals in transitional housing were also not included.

INDIVIDUALS

Age of Homeless Individuals, 2014

- 92% of all homeless individuals were 25 years or older.
- About 8% of homeless individuals were between the ages of 18 and 24.

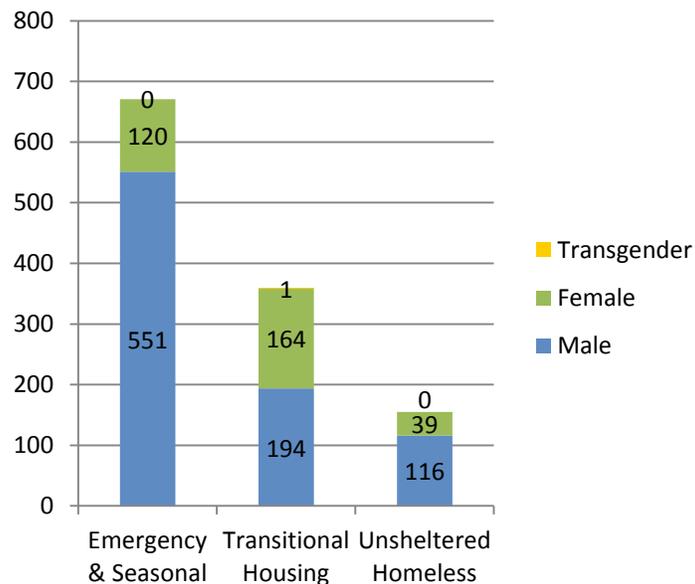
Age of Homeless Individuals, 2014



Gender of Homeless Individuals, 2014

- 73% (or 861 people) of homeless individuals were males and 27% (or 323 people) were females.
- One person was identified as transgender.
- Males were more likely to be in emergency and seasonal shelters (64% or 551 people) than in transitional housing (23% or 194 people) or in unsheltered locations (13% or 116 people).
- Females were more likely to be counted in transitional housing (51% or 164 people) than in emergency and seasonal shelters (37% or 120 people) or in unsheltered locations (12% or 39 people).

Gender of Homeless Individuals by Shelter Type, 2014



Note: Data prior to 2014 not complete for gender

INDIVIDUALS

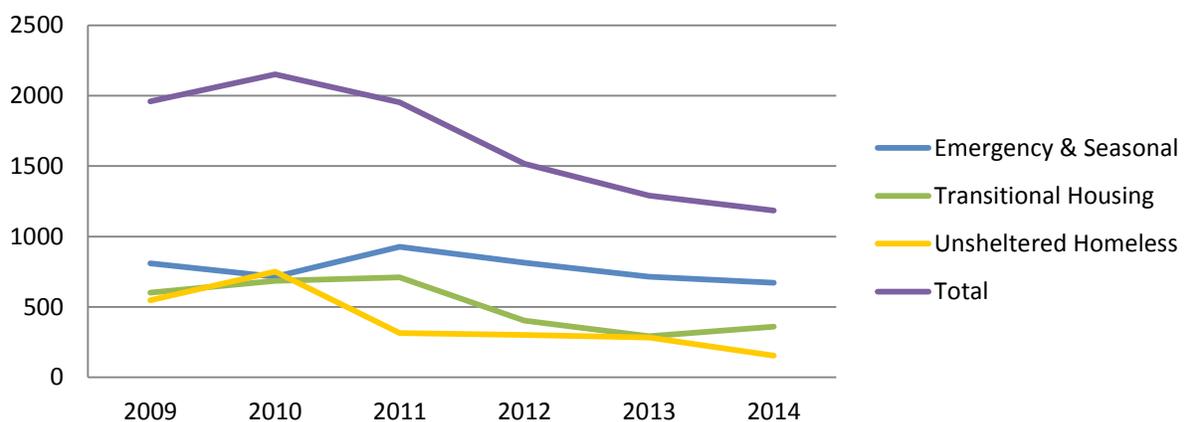
Since 2013⁴

- The number of homeless individuals decreased by 8% (from 1,290 people in 2013 to 1,185 people in 2014).
- The number of unsheltered homeless individuals decreased by 45% (from 283 individuals in 2013 to 155 individuals in 2014).
- The number of sheltered homeless individuals increased by 2% (from 1,007 individuals in 2013 to 1,030 individuals in 2014).
- The number of homeless individuals in emergency and seasonal shelters declined by 6% (from 714 individuals in 2013 to 671 individuals in 2014) while their number in transitional housing increased by 23% (from 293 individuals in 2013 to 359 individuals in 2014).

Since 2009⁵

- Individual homelessness on a single night declined by 40% (from 1,959 individuals in 2009 to 1,185 individuals in 2014).
- The number of unsheltered homeless individuals decreased by 72% (from 547 individuals in 2009 to 155 individuals in 2014) and the number of sheltered individuals decreased by 27% (from 1,412 individuals in 2009 to 1,030 individuals in 2014).
- The number of homeless individuals in emergency and seasonal shelters declined by 17% (from 810 individuals in 2009 to 671 individuals in 2014).
- The number of homeless individuals in transitional housing saw a reduction of 40% (from 602 individuals in 2009 to 359 individuals in 2014).

Homeless Individuals by Shelter Type, 2009-2014



⁴ Given changes in methodology for the unsheltered count from 2013-2014, comparisons should be interpreted with caution.

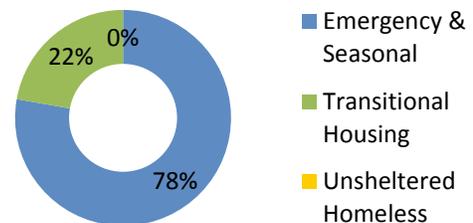
⁵ Ibid.

Unaccompanied Children and Youth

On a Single Night in January 2014

- There were 9 unaccompanied homeless children and youth on a single night in January 2014, less than 1% of the total homeless population. Seven unaccompanied children and youth were females.
- None of the unaccompanied children and youth were unsheltered in 2014. Seven of the unaccompanied homeless children and youth were in emergency and seasonal shelters while the remaining two were in transitional housing.

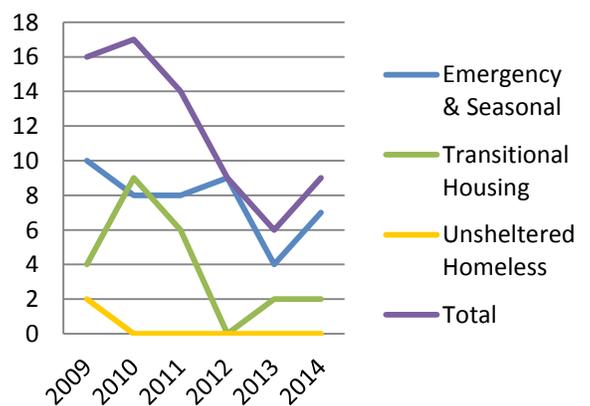
Unaccompanied Homeless Children and Youth, 2014



Since 2013⁶

- The number of unaccompanied children and youth increased by 50% (from 6 children in 2013 to 9 children in 2014). The number of female unaccompanied children and youth increased by 75% (from 4 children in 2013 to 7 children in 2014).
- The number of unaccompanied children and youth in emergency and seasonal shelters increased by 3 children (75%).
- The number of unaccompanied children and youth in transitional housing stayed the same (2 children) as well as the number of unsheltered unaccompanied children and youth (zero children).

Unaccompanied Homeless Children and Youth, 2009-2014



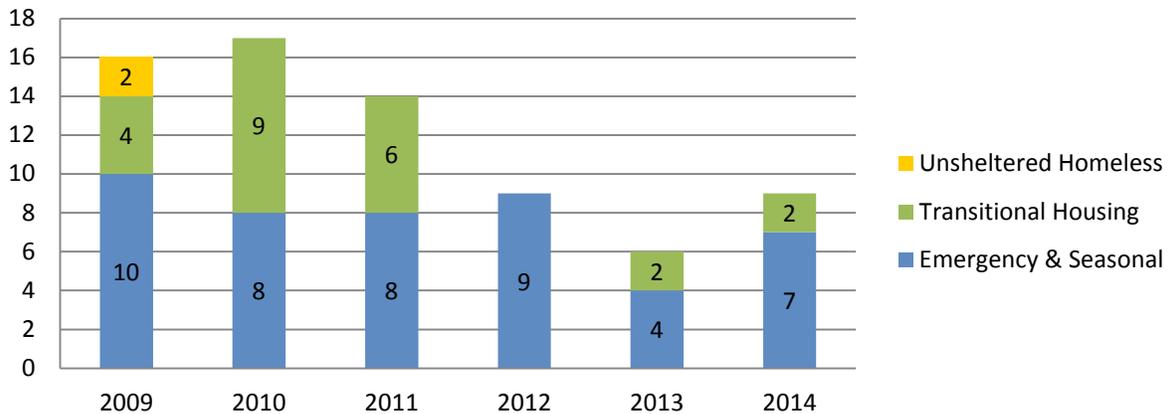
⁶ Given changes in methodology for the unsheltered count from 2013-2014, comparisons should be interpreted with caution.

UNACCOMPANIED CHILDREN AND YOUTH

Since 2009⁷

- The number of unaccompanied homeless children and youth on a single night decreased by 44% (from 16 children in 2009 to 9 children in 2014).
- There were two unsheltered unaccompanied children and youth in 2009, and that number has remained at zero children for the past five years.
- The number of sheltered unaccompanied children and youth decreased by 36% (from 16 children in 2009 to 9 children in 2014).
- The number of unaccompanied children and youth in emergency and seasonal shelters declined by 30% (from 10 children in 2009 to 7 children in 2014).
- The number of unaccompanied children and youth in transitional housing decreased by 50% (from 4 children in 2009 to 2 children in 2014).

Unaccompanied Homeless Children and Youth, 2009-2014



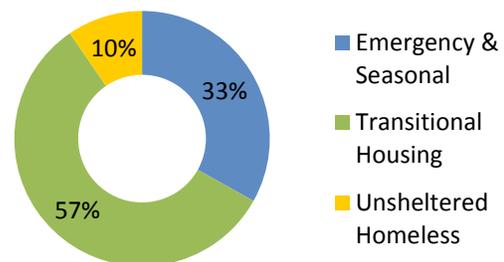
⁷ Given changes in methodology for the unsheltered count from 2013-2014, comparisons should be interpreted with caution.

Veterans

On a Single Night in January 2014

- There were 157 homeless veterans in Mecklenburg County. Homeless veterans accounted for nearly 11% of all homeless adults.
- Homeless veterans comprised about 8% of the total sheltered homeless population.
- The majority of homeless veterans (90% or 142 people) were in emergency shelters (33%) or transitional housing (57%). The remaining 10% were in unsheltered locations.
- 14% of homeless veterans were female (22 people).

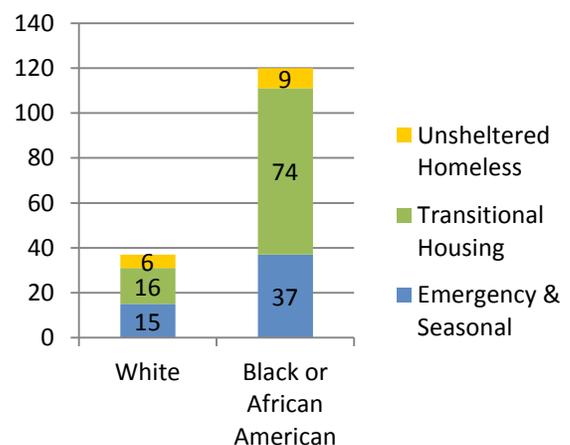
Total Homeless Veterans by Shelter Type, 2014



Race and Ethnicity of Homeless Veterans, 2014

- 76% (120 people) of homeless veterans were Black or African-American and 24% were White.
- Black or African-American homeless veterans were more likely to be in transitional housing (62% or 74 people) than in emergency and seasonal shelters (31% or 37 people).
- About 43% of White homeless veterans were in transitional housing. About the same proportion (41%) are in emergency and seasonal shelters.
- 6 of the 37 White homeless veterans (16%) were counted in unsheltered locations, while 9 of the 120 Black or African-American veterans (8%) were counted in unsheltered locations.

Number of Homeless Veterans by Race and Shelter Type, 2014

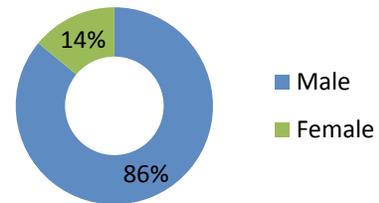


VETERANS

Gender of Homeless Veterans. 2014

- 86% (135 people) of homeless veterans were males and 14% (22 people) were females.
- 90% of homeless male veterans (121 people) and 95% of homeless female veterans (21 people) were sheltered.
- 100% of sheltered homeless female veterans were in transitional housing compared to 57% of male veterans (69 people).

Homeless Veterans by Gender, 2014



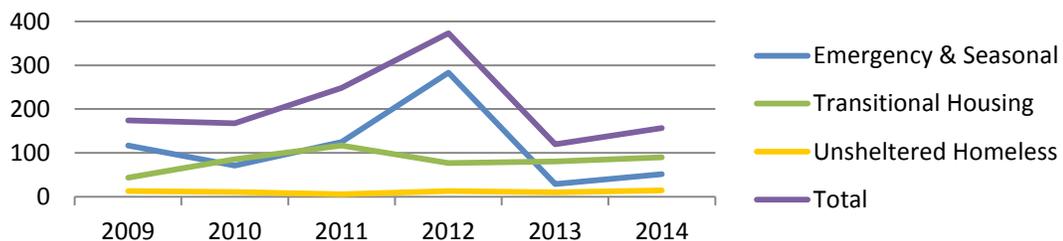
Since 2013⁸

- The number of homeless veterans increased by 31% (from 120 people in 2013 to 157 people in 2014).
- The number of unsheltered veterans increased by 50% (from 10 people in 2013 to 15 people in 2014) and the number of sheltered veterans increased by 29% (from 110 people in 2013 to 142 people in 2014).
- The number of homeless individual veterans in emergency and seasonal shelters increased by 79% (from 29 people in 2013 to 52 people in 2014). The number of veterans in transitional housing also increased, but at a smaller margin of 11% (from 81 people in 2013 to 90 people in 2014).

Since 2009⁹

- The number of homeless veterans decreased by 10% (from 174 people in 2009 to 157 people in 2014).
- The number of sheltered homeless veterans decreased by 12% (from 161 people in 2009 to 142 people in 2014).
- The number of unsheltered veterans increased by 15% (from 13 people in 2009 to 15 people in 2014).
- The number of homeless veterans counted in emergency and seasonal shelters decreased by 65 people, or 56%, while the number of veterans in transitional housing increased by 46 people, or 105%.

Total Homeless Veterans, 2009-2014



⁸ Given changes in methodology for the unsheltered count from 2013-2014, comparisons should be interpreted with caution.

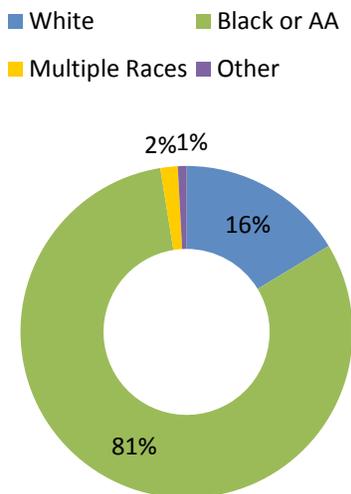
⁹ Ibid.

Racial and Ethnic Composition

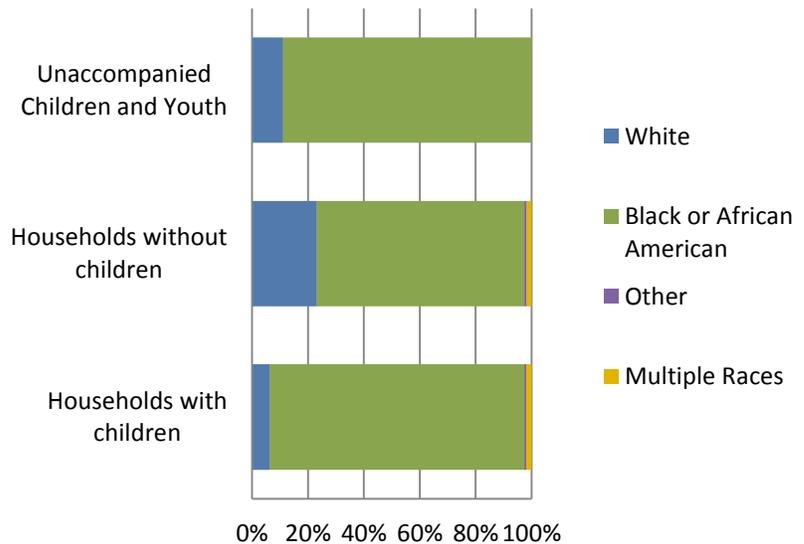
On a Single Night in January 2014

- Approximately 81% of the total homeless population was Black or African-American (1,634 people). This is disproportionately high considering only 30% of the general population in Mecklenburg County are Black or African-American, according to the 2010 US Census.
- Whites comprised about 16% of the homeless population (329 people) but 55% of the general population, according to the 2010 U.S. Census.
- 57 homeless people were of Hispanic/Latino descent, representing about 3% of the homeless population on a single night. In comparison, the Latino population comprises 12% of the Mecklenburg County population, according to the 2010 U.S. Census.

Homeless People by Race, 2014



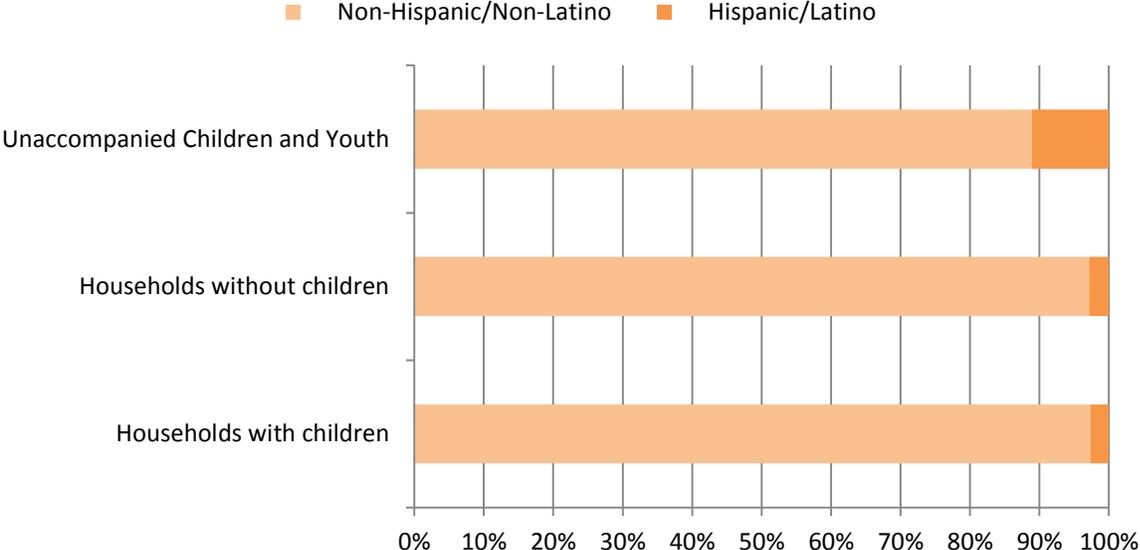
Homeless People by Race and Family Type, 2014



Note: Race/Ethnicity data not collected prior to 2014.

RACIAL AND ETHNIC COMPOSITION

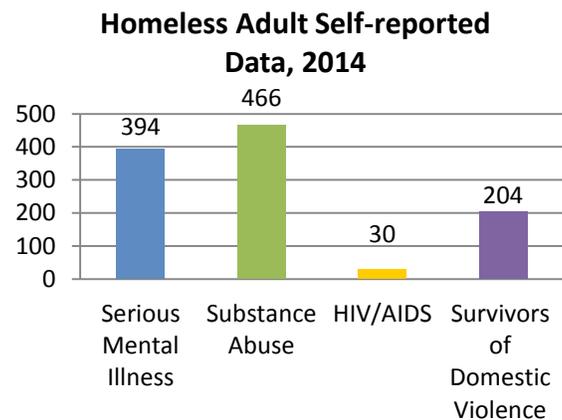
Homeless People by Ethnicity and Family Type, 2014



Self-Reported Data

On a Single Night in January 2014

- There were 466 homeless adults who reported substance abuse, representing 32% of the homeless adult population or 23% of the total homeless population.
- There were 394 homeless adults who reported having a serious mental illness, about 27% of all homeless adults.
- Self-reported domestic violence survivors comprised 14% of the total homeless adult population.
- About 2% of all homeless adults reported having HIV/AIDS.
- Homeless adults with at least one of these disabling conditions were much more likely to be sheltered than unsheltered (87% sheltered compared to 13% unsheltered).
- 85% (335 people) of those who reported having a serious mental illness, 83% (388 people) of those who reported substance abuse, 93% (28 people) of those reporting HIV/AIDS and 100% (204 people) of those reporting domestic violence were counted in emergency, seasonal or transitional housing.



Since 2013¹⁰

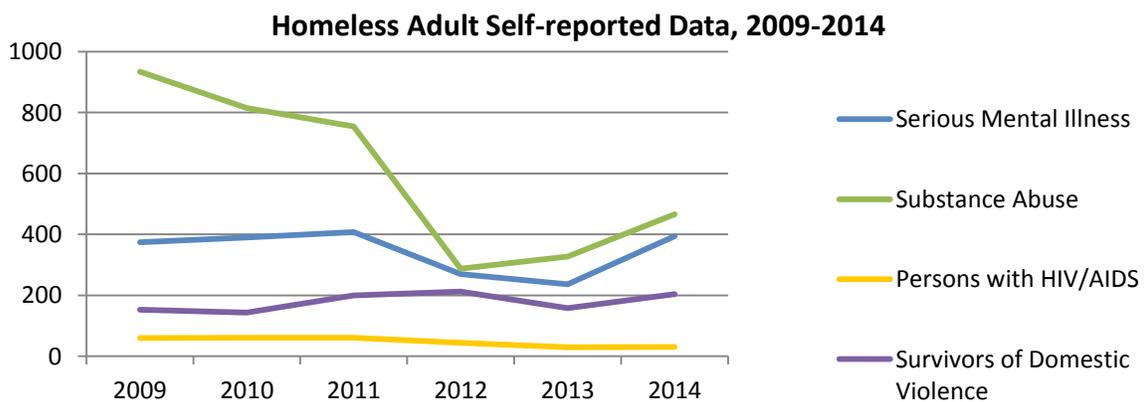
- The self-reported data increased across the board: 67% increase in those reporting a serious mental illness (from 236 people in 2013 to 394 people in 2014); 43% increase in those who reported a substance abuse (from 327 people in 2013 to 466 people in 2014); 29% increase in those who reported domestic violence (from 158 individuals in 2013 to 204 individuals in 2014); and 3% increase in those reporting HIV/AIDS (from 29 people in 2013 to 30 people in 2014).
- The number of homeless individuals counted in unsheltered locations increased for those who reported a serious mental illness (168% or 37 people), substance abuse disorder (179% or 50 people), and HIV/AIDS (from zero in 2013 to 2 people in 2014). Since 2013, the number of homeless individuals counted in unsheltered locations who are survivors of domestic violence decreased by 100% (from 16 individuals in 2013 to zero in 2014).

¹⁰ Given the nature of self-reported data and changes in methodology for the unsheltered count from 2013-2014, comparisons should be interpreted with caution.

SELF-REPORTED DATA

Since 2009¹¹

- The proportion of the homeless population self-identifying as mentally ill increased from 15% of the homeless population in 2009 to 20% of the homeless population in 2014. Similarly, the proportion of the homeless population that self-identified as survivors of domestic violence increased from 6% in 2009 to 10% in 2014.
- Homeless adults reporting substance abuse declined by 50% (from 934 people in 2009 to 466 people in 2014). The number of homeless adults who reported having HIV/AIDS declined by a similar margin, 49% (from 59 people in 2009 to 30 people in 2014).
- The number of sheltered homeless adults who reported a serious mental illness declined by 2% (or by 8 people), while unsheltered adults reporting mental illness increased by 90% (from 31 people in 2009 to 59 people in 2014).
- The number of sheltered homeless adults reporting substance abuse declined by 53% (from 824 people in 2009 to 388 people in 2014), while the number of unsheltered homeless adults reporting substance abuse also decreased, by 29% (from 110 people in 2009 to 78 people in 2014).
- The number of domestic violence survivors who were counted in sheltered locations increased by 40% (from 146 people in 2009 to 204 people in 2014), but the number of domestic violence survivors counted in unsheltered locations decreased by 100% (from 6 people in 2009 to zero in 2014).
- The number of sheltered persons reporting having HIV/AIDS decreased by 48% (from 54 people in 2009 to 28 people in 2014). The number of unsheltered persons reporting having HIV/AIDS also decreased (from 5 people in 2009 to 2 people in 2014, a 60% decline).



Note: These items are self-reported and are not mutually-exclusive.

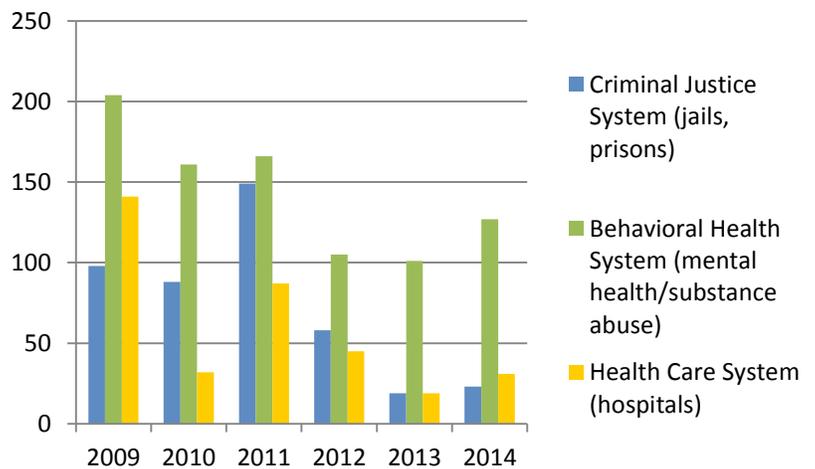
¹¹ Given the nature of self-reported data and changes in methodology for the unsheltered count from 2013-2014, comparisons should be interpreted with caution.

Self-Reported Institutional Discharges¹²

On a Single Night in January 2014

- There were 181 homeless adults who reported having been discharged from the criminal justice, behavioral health, or health care systems.
- Homeless adults reporting they had been discharged from an institution comprised 9% of the total homeless population and 12% of all homeless adults.
- The behavioral health system was the most cited institution to be discharged from (127 people reported being discharged from a behavioral health system versus 23 from the criminal justice system and 31 from the health care system).

Number of Homeless Adults Self-Reporting Being Discharged from an Institution in Past 30 Days or 30 Days prior to Becoming Homeless



Note: These items are self-reported and are not mutually-exclusive.

¹² Discharge data is collected differently for unsheltered and sheltered counts. For the unsheltered count a person is asked if they were discharged from an institution within 30 days. The sheltered count asks whether a person was discharged from an institution 30 days prior to becoming homeless.

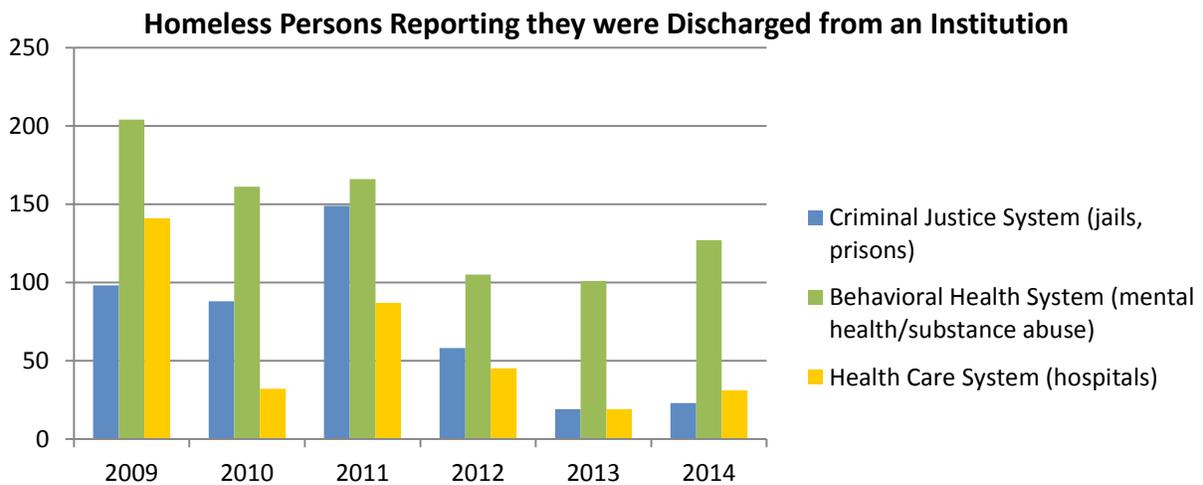
SELF-REPORTED INSTITUTIONAL DISCHARGES

Since 2013¹³

- The number of reports of being discharged from an institution increased by 30% (from 139 people in 2013 to 181 in 2014).
- Homeless adults discharged from the criminal justice system increased by 21% (from 19 people in 2013 to 23 people in 2014).
- The number of homeless adults discharged from the behavioral health system increased by 26% (from 101 people in 2013 to 127 in 2014).
- Homeless adults discharged from the health care system increased by 63% (from 19 people in 2013 to 31 people in 2014).

Since 2009¹⁴

- The number of reports of being discharged from an institution decreased by 59% (from 443 people in 2009 to 181 people in 2014).
- The number of homeless adults reporting being discharged from the criminal justice system declined by 77% (from 98 people in 2009 to 23 people in 2014).
- The number of reports of being discharged from the behavioral health system reduced by 38% (from 204 people in 2009 to 127 people in 2014).
- Homeless adults discharged from the health care system declined by 78% (from 141 people in 2009 to 31 people in 2014).



Note: These items are self-reported and are not mutually-exclusive.

¹³ Given the nature of self-reported data and changes in methodology for the unsheltered count from 2013-2014, comparisons should be interpreted with caution.

¹⁴ *Ibid.*

Vulnerability Index

The vulnerability index is a tool for identifying homeless individuals at a heightened mortality risk. Charlotte-Mecklenburg uses the criteria identified by the 100,000 Homes Campaign,¹⁵ which is based upon the research of Drs. Jim O'Connell and Stephen Hwang with the Boston Health Care for the Homeless Program. The vulnerability index looks at those who have been homeless for 6 months or more and whether they experienced the following:

- More than three hospitalizations or emergency room visits in a year
- More than three emergency room visits in the previous three months
- Aged 60 or older
- Cirrhosis of the liver
- End-stage renal disease
- History of frostbite, immersion foot, or hypothermia
- HIV+/AIDS
- Tri-morbidity: co-occurring psychiatric, substance abuse, or chronic medical condition

During Charlotte's unsheltered count, volunteers administer a survey to the individuals they encounter experiencing homelessness, asking them to self-report the information above. A score of 1 or above on the index indicates that a person is vulnerable and at increased mortality risk. Because this data is self-reported, it should not be viewed as an exact number of those who are vulnerable, but is useful in identifying and reaching out to vulnerable homeless individuals.

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unsheltered homeless individuals had a vulnerability index score of 1 or above on the night of the official 2014 PIT Count.

¹⁵ For more information: <http://100khomes.org/resources/about-the-vulnerability-index>