

Partners for HOME Senate Study Commitee

August 4, 2022



Point-in-Time Count

City of Atlanta, GA 2022



Key Findings

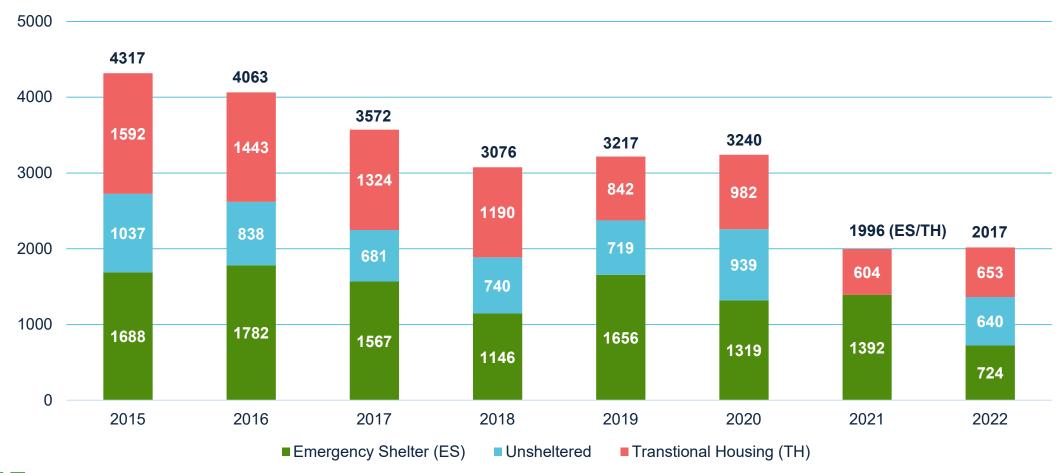
- 38% reduction in homeless population since 2020.
 - Across chronic, family, youth and veteran subpopulations.
- 37% of people surveyed struggled with mental illness.
- 32% substance use disorder.

- Reduction in chronic totals in Emergency Shelter (ES).
- Low ES utilization.
- 5,790 households consisting of 9,504 individuals housed since 2017.



Total Homeless Population

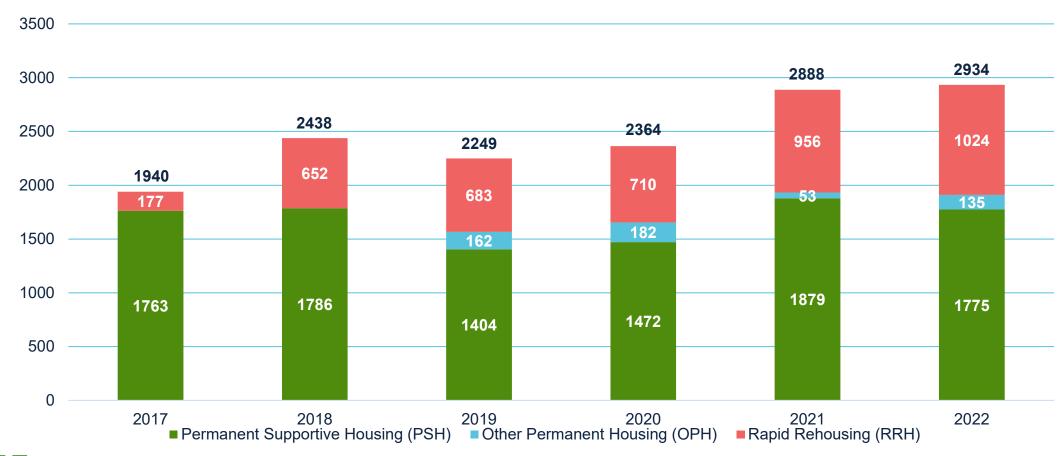
Significant reductions among sheltered and unsheltered despite increased visibility of street homelessness.





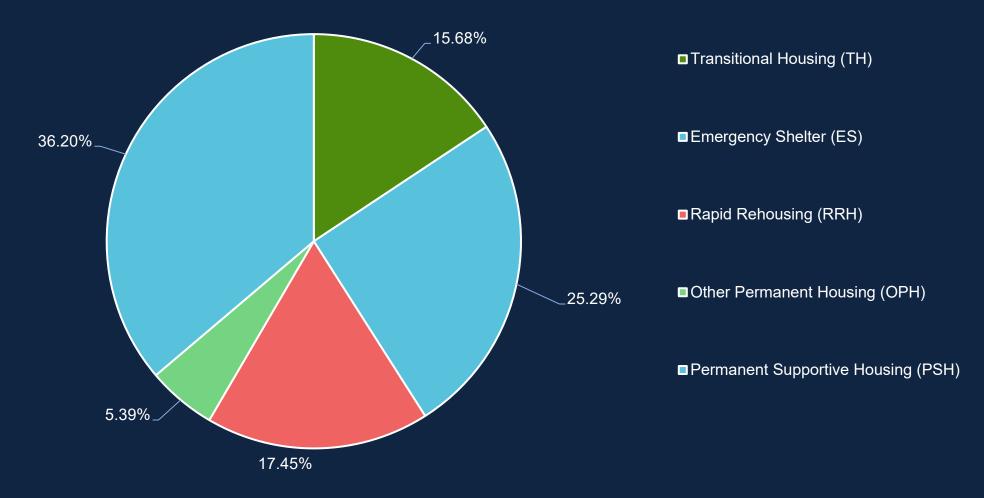
Housed by Project Type Totals

Almost 600 more households in housing over last two years. Housing surge = reduction in numbers and increase in those housed.



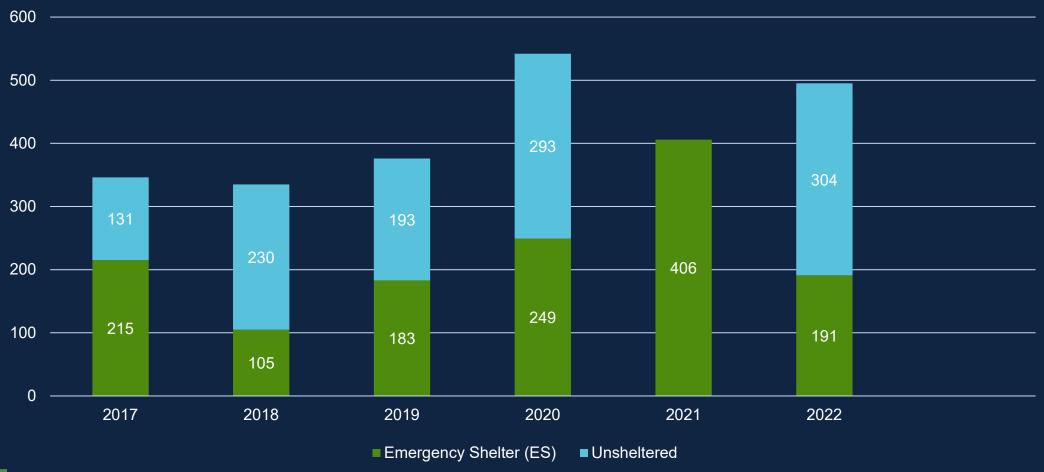


2022 Housing / Beds Available



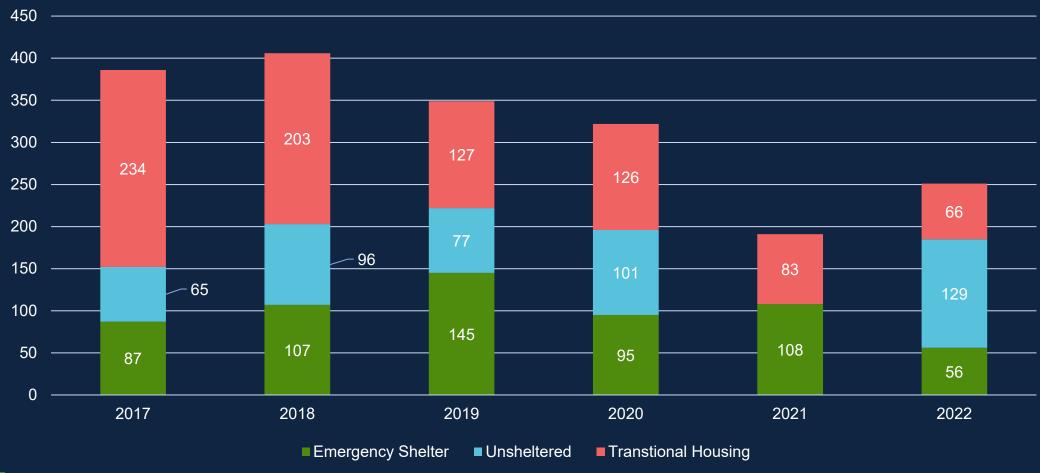


Chronic Sub-Population PIT Totals



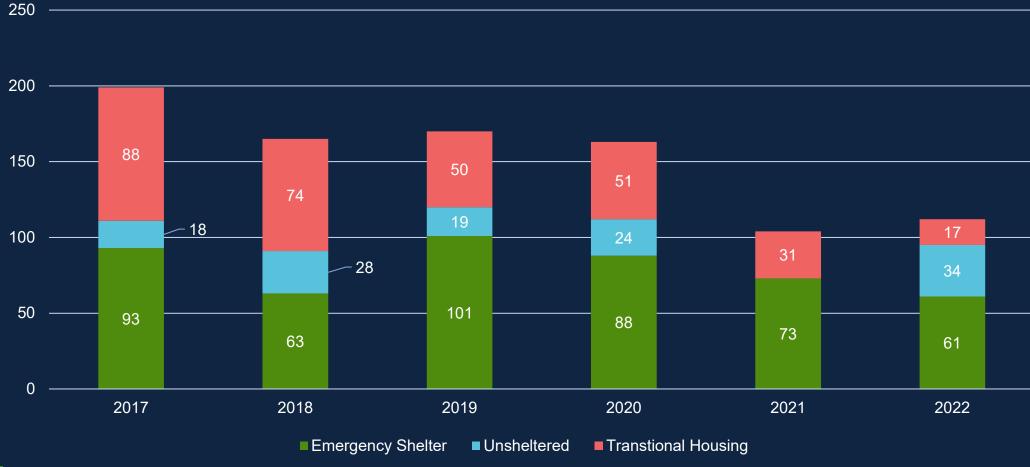


Veteran Sub-Population PIT



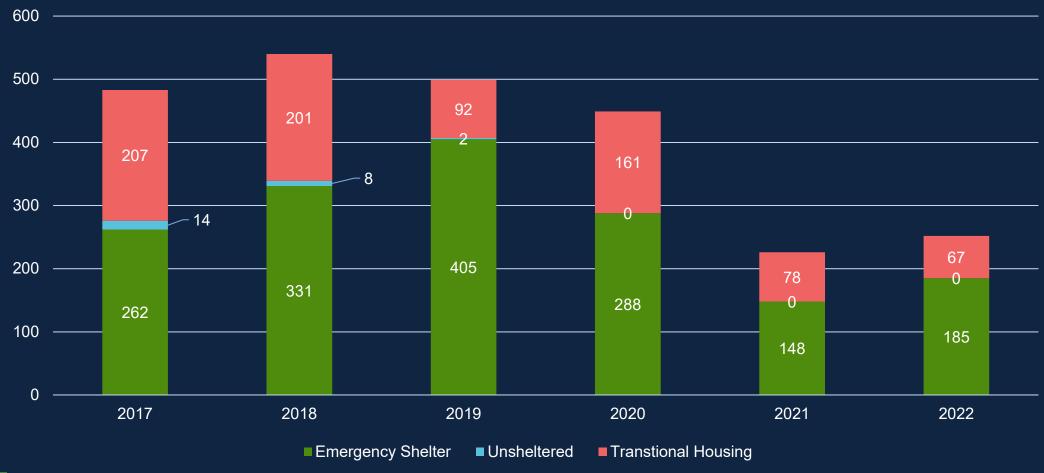


Unaccompanied Youth Sub-Population PIT (18-24)





Adults with Children PIT Population



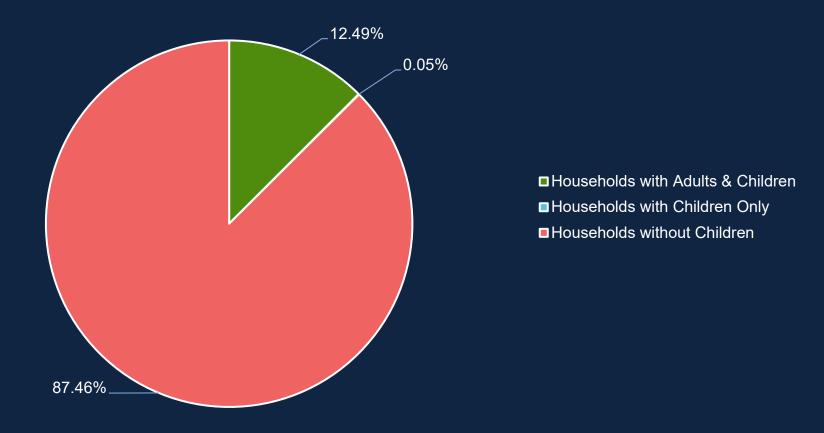


2022 Reported Subpopulations

Other Homeless Subpopulations					
	Sheltered			Unsheltere d	Total
	Emergency	Transitional	Safe Haven		
Adults with a Serious Mental Illness	290	253	0	197	740
Adults with a Substance Use Disorder	213	245	0	181	639
Adults with HIV/AIDS	39	66	0	20	125
Adult Survivors of Domestic Violence	33	3	0	18	54

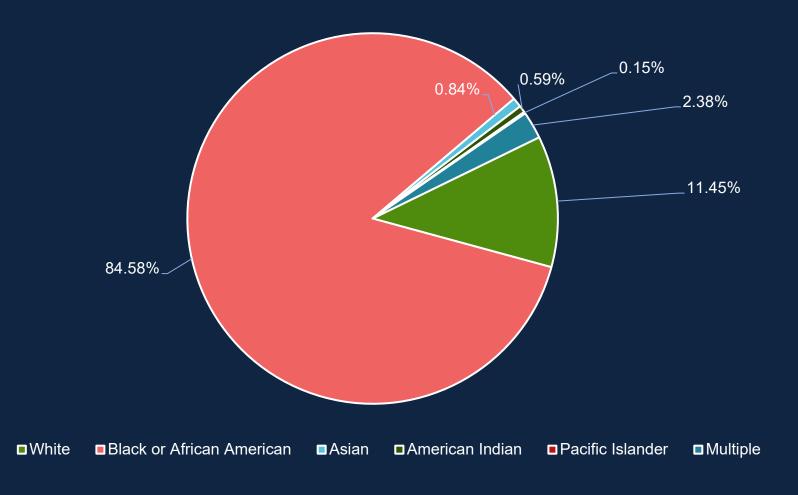


2022 Household Type





2022 Reported Race

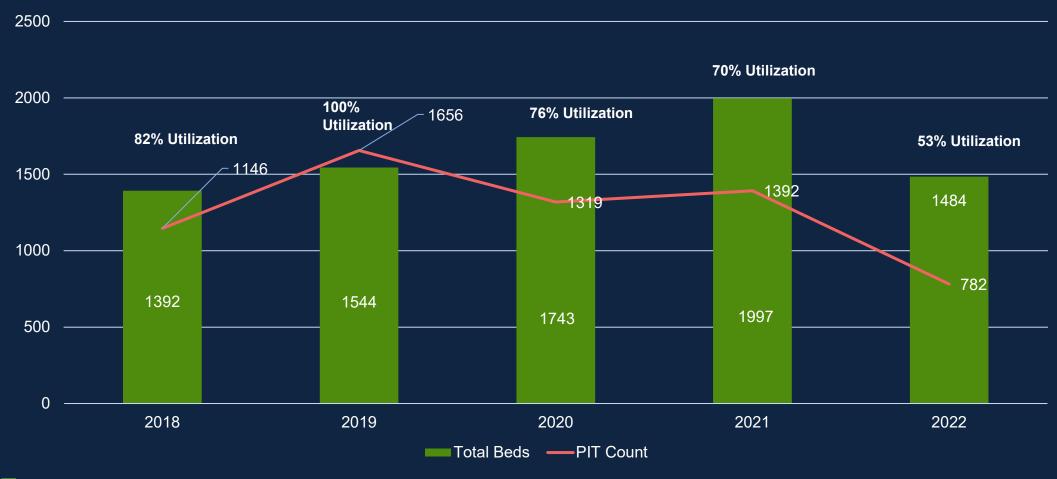




Housing Inventory Count and Utilization

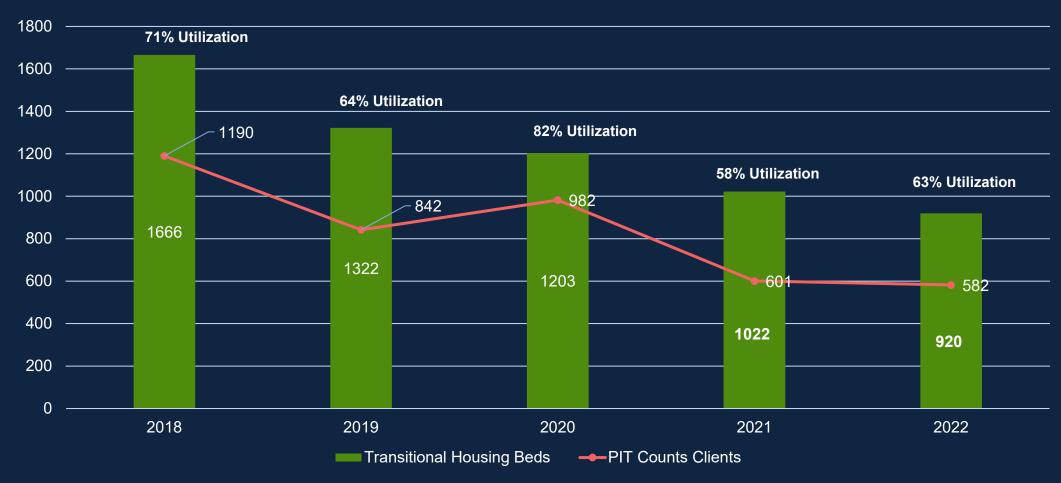
City of Atlanta, GA - 2022

HIC: Emergency Shelter Beds





HIC: Transitional Housing Beds







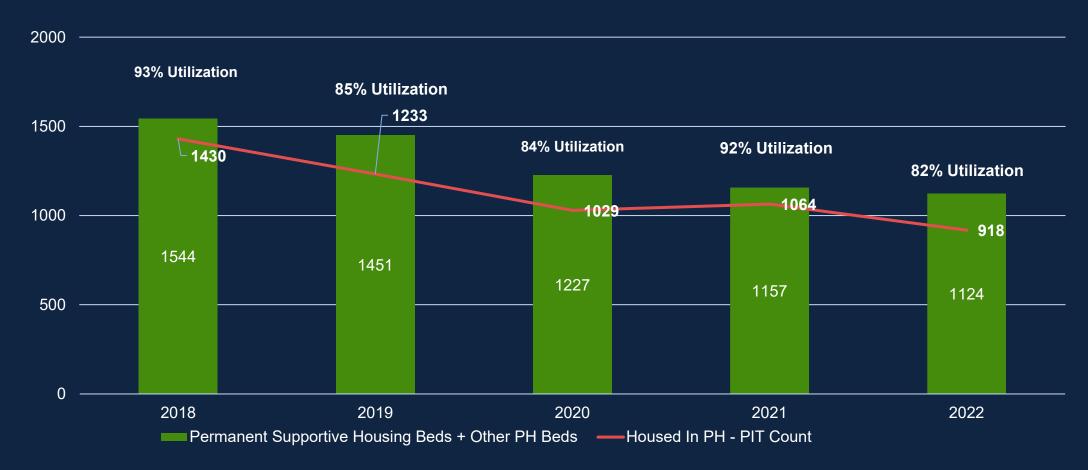
AHAR Occupancy Rates

EXHIBIT 1.4: Occupancy Rates of Programs for People in Sheltered Locations 2020–2021

	2020	2021
Total	82.1%	73.2%
Emergency Shelter (ES)	83.2%	73.7%
Safe Haven (SH)	85.9%	68.3%
Transitional Housing (TH)	78.2%	71.5%

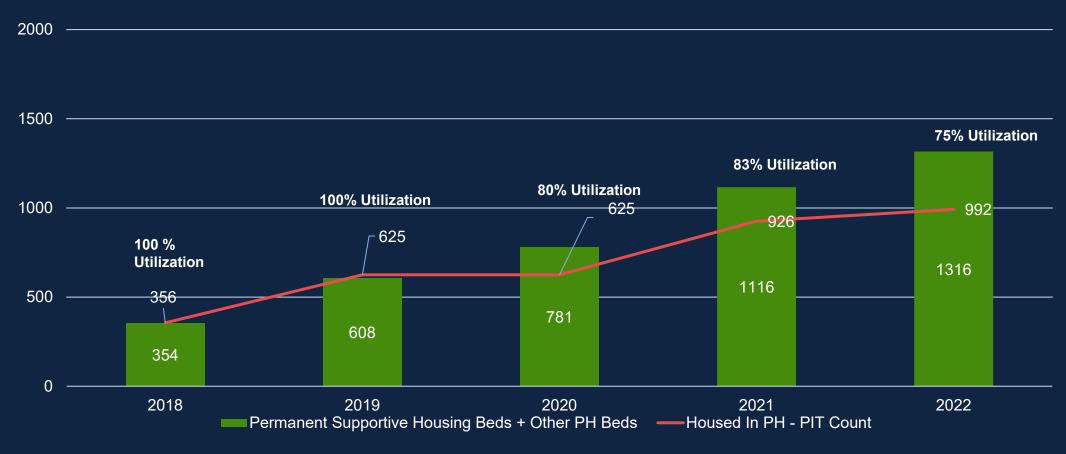


HIC: PSH + OPH Site-Based





HIC: PSH + OPH Tenant-Based





HIC: RRH

1500





Our Work: LIFT

Launched as a part of our comprehensive COVID response and recovery effort in 2020 with a goal to stably house 2,000 households impacted by homelessness during the COVID-19 pandemic. LIFT leveraged over \$24 million in public stimulus and private funding to create a coordinated investment in housing at scale.



LIFT Key Activities

- Outreach and Navigation
 Coordinated outreach teams to engage, assess, and navigate
- RRH Bridge to PSH

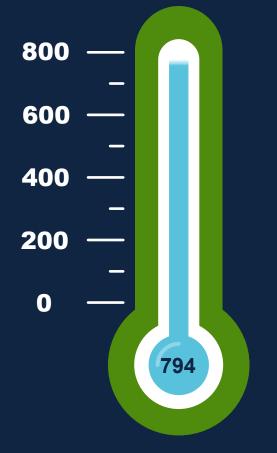
 Identifying next steps and matching housing solution to household need
- Unit Acquisition
 Finding units that accept the clients with new subsidies
- Coordinated Entry/HMIS Management
 Transfer queue to meet requirements

- Case Conferencing

 Meetings 3 times/week to ensure self-sufficiency and plan next steps
- Diversion Strategy
 Change system and issues RFPS to add capacity to system
- Eviction MoratoriumPrepare for consequences and develop prioritization of clients
- Lessons Learned
 Strategies to sustain

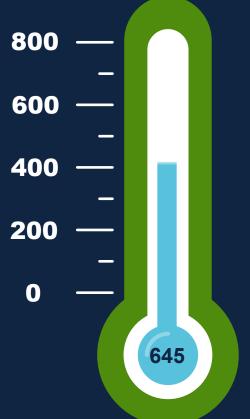
LIFT Current Status

Households Rapidly Rehoused



5% return to homelessness rate

Successful Diversion Exits



4% return to homelessness rate

Unsheltered Plan

Compassionate encampment closure strategy to address the increased visibility of unsheltered homelessness in the City.

LIFT 2.0

Hotel acquisition/leasing and housing surge strategy to end unsheltered and chronic homelessness in the City.

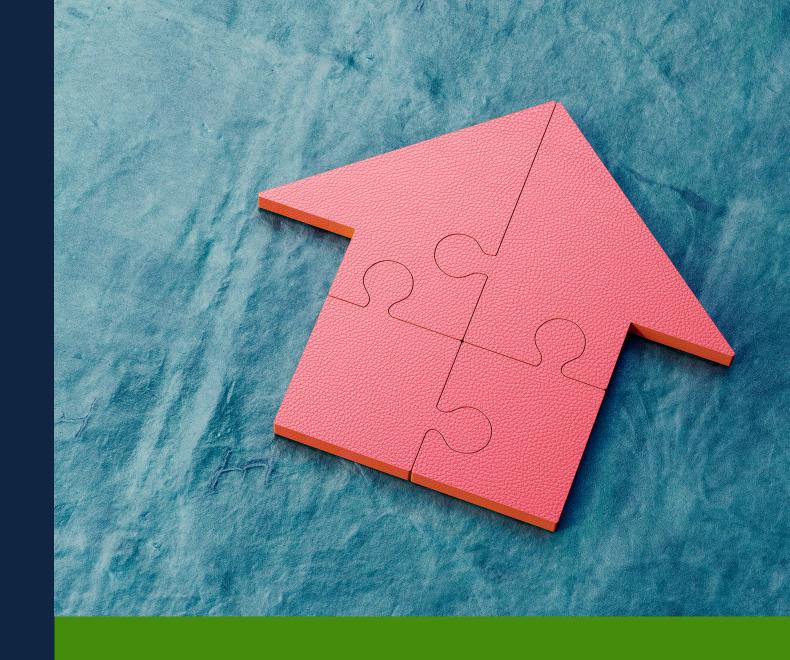
Strategic Planning

Development of a new strategic plan that will guide homeless response in the City for the next 3-5 years.



Unsheltered Homeless Plan

- Coordinated plan identifying ways to reduce unsheltered homelessness
- Includes short-term solutions that move people from streets into a bridge to permanent housing (i.e. hotel, low-barrier shelter, etc.)
- Includes long-term solutions that move people to permanent housing through rapid rehousing and permanent supportive housing interventions
- Working with Mayor's office to coordinate <u>details</u>





LIFT 2.0

- Scale the success of LIFT 1.0 using new stimulus funds
- Compassionately close encampments
- House ~1500 households over next 12 months

Committed Funding

- DFCS (P-TANF \$2.4M)
- DBHDD (SAMHSA \$4M)
- City (GF \$3.5M)
- State ARP \$6.875M
- DCA (ESG CV) \$6M
- City ARP \$6.2M
- City HOME ARP \$5.2M

Total LIFT 2.0: \$26.6M

Philanthropic Gap: ~\$8M

Hotel Partners

- Development partner closing on a 54-unit, non-congregate hotel – 7/22. Anticipated open date 12/22
- Leasing additional 175 rooms
 6/22

^{*}Persons experiencing chronic homelessness have a disabling condition



Strategic Planning

- Housing interventions to end homelessness among subpopulations
- New focus on unsheltered and encampments
- Dedicated revenue to sustain successes for current and future needs
- New corporate collaborations to invest in public-private partnerships that enhance local homeless ecosystem





Senate Bill - 659

- Successfully amended Senate bill significantly from the first House and Senate versions –
 - Defeated two versions of the bill from a Cicero backed criminalization bill diverting existing funding away from housing to pay for sanctioned encampments to Senate Study Committee on homelessness
 - Chaired by Senator Summers, reps from DCA, DBHDD and Douglas County Judge McClain; Sen Kim Jackson; no one from Cicero
- Through persistent conversations/testimony that encampments are not a real solution to the underlying issues, by our categorizing the bill as criminalizing homelessness and putting the supporters on the defensive, and by keeping the cities, counties and State informed, and by enlisting other mental health advocates
- Advocacy continues and we are meeting with legislators through the summer and tracking the work of the Study Committee
- Working at national level with NLIHC, NAEH and others

PARTNERS FOR

Questions?

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