



# 2016 Winter PIT Count Report

Fredericksburg Regional  
Continuum of Care



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## I. Introduction

Communities across the country need to address homeless issues through government agencies and non-profit organizations working together as a Continuum of Care (CoC). As part of its Continuum of Care application for homelessness funding, HUD requires that jurisdictions across the nation conduct a statistically reliable and unduplicated count of the homeless for one overnight period during the last 10 days of January. The Fredericksburg Regional CoC conducts a Winter PIT count each year, for both sheltered and unsheltered populations, to more accurately track the number and the needs of the region's homeless population.

The PIT count is planned, coordinated, and carried out locally, and the information gathered enables our community to better allocate housing resources and services in order to prevent and end homelessness. The PIT Count is the only opportunity throughout the year for most communities to take a comprehensive look at the total homeless population, and is especially crucial in assessing the needs of the unsheltered homeless.

## II. Data Collection and Methodology

### Count Requirements/Data

In their Point-In-Time Count, CoC's must count and report all individuals and families who meet the criteria in paragraph (1) (i) of the homeless definition in 24 CFR 91.5 of HUD's Homeless Definition Rule on the night designated for the count. This includes individuals and families who are:

- **Sheltered**, or "living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals)," or
- **Unsheltered**, "with a primary nighttime residences that is a public or private place not designated for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground."

The PIT is an important tool in collecting data on the number, characteristics, and service needs of individuals, families, and unaccompanied children experiencing homelessness throughout the region. The resulting data is a critical component of local homeless planning and program development. Accurate data helps communities to:

- Understand changes in trends among homeless populations;
- Adjust the types of programs and services available according to need in order to use resources as efficiently as possible;
- Justify requests for additional resources and/or programming modifications;
- Comply with reporting requirements from HUD, other funders, and local stakeholders;
- Raise public awareness about the issue of homelessness; and
- Measure community progress toward preventing and ending homelessness.

Nationally, the PIT count process is used as the primary data source for federal agencies to understand homelessness trends and track progress against the goals and objectives contained in [Opening Doors](#), the Federal Strategic Plan to End Homelessness. Additionally, the Congressionally-mandated Annual Homeless Assessment Report (AHAR) is prepared using PIT and Homeless Management Information System (HMIS) data.

### 2016 Winter PIT Count Background

The CoC annual Point-In-Time (PIT) Count provides a snapshot of homeless households in Planning District 16. The 2016 Count reveals important demographic and other information about families and individuals who were homeless on the night of the count, and was carried out with the help of government agencies, community-based organizations, and local volunteers.

On Thursday, January 28, 2016, members of the Fredericksburg Regional Continuum of Care (CoC) conducted its local PIT count of the homeless population. During this 24-hour window, service providers and volunteers visited emergency shelters, outdoor locations, and other service agencies to gather information from people who are homeless and near-homeless in PD16, which includes the City of Fredericksburg and the Counties of Caroline, King George, Spotsylvania, and Stafford. McKinney-Vento homeless liaisons (social workers) from the region's school districts also coordinated with CoC to calculate the number of homeless children enrolled in schools.

In addition to counting homeless individuals and families, the surveys also provide information on the needs and characteristics of the population to better provide services in the future. Engaging homeless persons to provide personal information can be challenging, but in 2016 the CoC was able to offer incentives for completing the surveys through the generosity of the community. These incentives included:

- 300 FRED bus passes
- 10 \$5 Wal-Mart gift cards
- Hygiene Kits
- 12 cases of water
- 13 Chic-Fil-A coupons
- 1 case of reusable water bottles

The Community stepped up to assist the CoC in the PIT Count effort. Volunteers assisted with surveying individuals throughout various homeless services organizations and other community sites.

### III. Key Findings – Total Homeless Population

2016 Winter PIT Summary Table for Submission to HUD

Fredericksburg Regional CoC 2015 Point-In-Time Results - January 28, 2016				
<i>Persons in Households with at Least One Adult and One Child (Under age 18)</i>	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Number of Households	14	8	0	22
Number of Persons (Adults and Children)	55	27	0	82
Number of Persons (Under age 18)	39	18	0	57
Number of Persons (18-24)	0	1	0	1
Number of Persons (Over age 24)	16	8	0	24
<b>Persons in Households with Only Children</b>				
<i>Persons in Households with Only Children</i>	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Number of Households	0	0	0	0
Number of Persons (Unaccompanied Children Only)	0	0	0	0
<b>Persons in Households without Children</b>				
<i>Persons in Households without Children</i>	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Number of Households	90	0	28	118
Number of Persons (18-24)	10	0	7	17
Number of Persons (Over age 24)	83	0	27	110
<b>All Households / All Persons</b>				
<i>All Households / All Persons</i>	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Total Households	104	8	28	140
Total Persons	148	27	34	209
Number of Persons (Under age 18)	39	18	0	57
Number of Persons (18-24)	10	1	7	18
Number of Persons (Over age 24)	99	8	27	134

## Executive Summary

Overall, the number of homeless persons counted in PD16 decreased by 8 persons from 2015 to 2016. This decrease isn't largely significant, but several factors are to be considered when reviewing this data. The CoC has expanded its canvassing efforts, meaning more area is being covered and still less persons experiencing homelessness are being discovered. Another factor is that our community has enhanced central intake efforts in the areas of prevention and diversion, the community is beginning to benefit from these efforts.

Compared to 2015, the number of households with children in emergency shelters has decreased (by 4 households). This number fluctuates from year to year, but remains roughly the same. This indicates a lack of progress in securing stable housing for families which has the potential to be concerning, but it is important to remember that our community has a consistent number of households it is able to serve through shelter.

The percentage of respondents claiming that they had been homeless less than a year is around 19% (41 out of 209 persons), though the percentage of those reporting that they were experiencing their first case of homelessness is less than 10% (19 persons). The number of chronically homeless individuals (definition on page 9) saw a significant decrease, from 42 in 2015 to 13 in 2016. These metrics indicate modest progress in housing those most vulnerable, though there is a long way to go.

There are 13 individuals who identify as homeless veterans—remaining the same compared to 2015. The CoC had been determined in supporting the efforts of the federal “Opening Doors” strategic plan and its goal to end veteran homelessness, and has continued its efforts of maintaining this functional end. Agencies such as the Hunter Holmes McGuire VA Medical Center, Quin Rivers (with its Supportive Services for Veteran Families program), and other local nonprofits are collaborating to permanently house these 13 individuals (and any others that require housing assistance in the area).

The number of school-aged children who were defined as homeless under the Department of Education has increased over the past year (from 883 to 927). These families with children are frequently forced to double up with friends/family or live in hotels and motels, due to lack of other options. CoC agencies continue to coordinate efforts to identify and re-house families with children through collaborative efforts by Hope House, Thurman Brisben Center, Empowerhouse, and Micah Ecumenical Ministries.

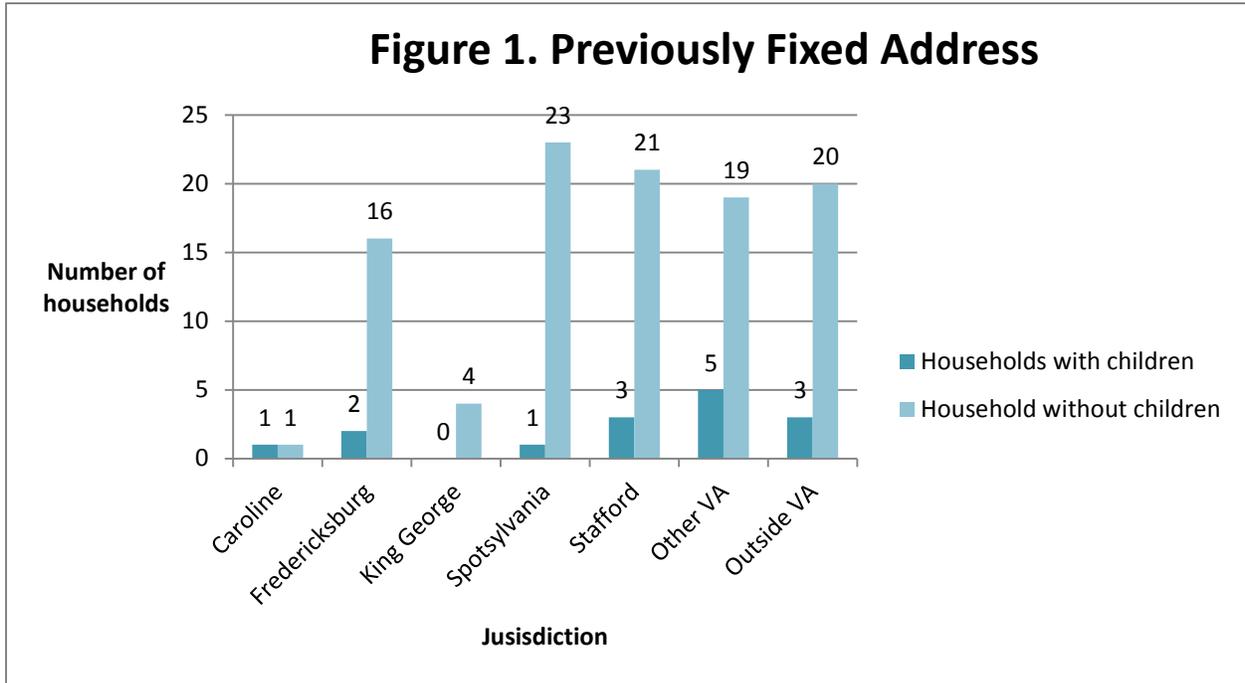
The number of homeless respondents that reported “Eviction/Foreclosure” as contributing to their homelessness dropped significantly; in this year’s PIT count just 7 persons reported this answer (excluding any persons that failed to answer this question). 46 persons reported “Unemployment” as contributing to their homelessness. The choice of “Unemployment” is associated with other contributing factors such as substance abuse, low wages, eviction, illness, and criminal background. Although there are job opportunities, this may be an indication that the jobs available to these individuals do not allow them to provide stable housing for themselves or their families. A small portion of persons interviewed during this count indicated that they receive some kind of income. The Fair Market Rent (FMR) rate (“the 40th percentile of gross rents for typical, non-substandard rental units”) in the City of

Fredericksburg is \$1,230 for a one-bedroom apartment. Therefore, an income of anything less than that could not realistically sustain an acceptable standard of living, let alone provide housing. Relocation to one of the more rural counties in the George Washington region, such as Caroline or King George (with one-bedroom FMRs of \$838 and \$766, respectively), is an option—though these counties do not have the service infrastructure that is critical for supporting individuals who may have needs such as mental health, substance abuse, domestic violence, or counseling assistance. With such low incomes, these individuals would still struggle to just pay rent. The CoC will be exploring solutions to these affordable housing challenges with its new Housing Committee.

In 2016, homeless service providers throughout the region continue to collaborate and refine a system that aids individuals and families on all points along the homeless services spectrum. In July 2014, the Central Virginia Housing Coalition (CVHC) began serving as the community’s “Central Intake” agency—providing intake, assessment, and referrals to guide persons to the most appropriate resources. In this effort, CVHC provides diversion and prevention services for those individuals who are not literally homeless but are considered “at-risk”. Agencies such as the Thurman Brisben Center (TBC) provide emergency shelter and rapid re-housing (RRH) resources with services that promote self-sufficiency for those individuals and families who need assistance. CVHC provides “Housing Locator” services for these specific state-funded agencies, in order to build relationships with landlords and make the rental process more fluid. With its Journey program, Micah Ecumenical Ministries provides permanent supportive housing opportunities for formerly chronically homeless individuals. Hope House and Empowerhouse provide formerly homeless families with critical RRH assistance, case management, and other supports during their transition into permanent housing (particularly for families who have histories with domestic violence).

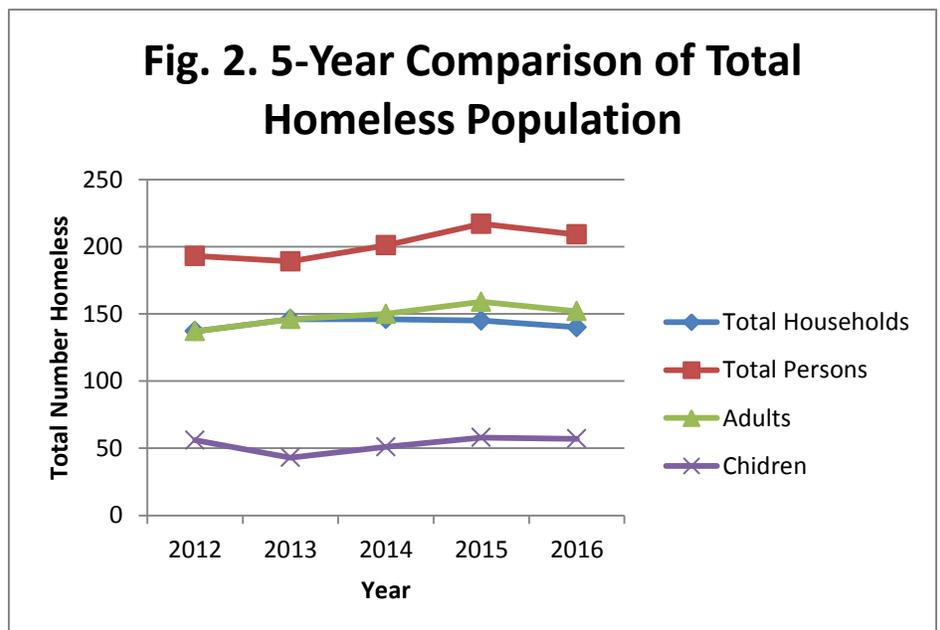
## Homeless by Previously Fixed Address

The 2016 PIT Survey included two questions to help identify the jurisdiction in which a respondent was permanently housed before becoming homeless. The first question asked for the actual jurisdiction name and a follow up question asked for a specific zip code of the person’s last previous fixed address. Some respondents answered both questions. Some only chose to provide the jurisdiction name.



## Trends in Total Homeless Population

Figure 2 shows a 5-year comparison of our community’s overall trends for the homeless population. The overall population begins with total households, and is broken down by number of persons, and then further broken down by number of adults compared to children. As displayed in Fig. 2, numbers have fluctuated in the past five years. This fluctuation in overall number can be attributed to several factors.



Some factors include changes in defining what is meant by “homeless”, differing surveying techniques (The CoC has experimented with both paper/electronic surveys), expansion of canvassing areas in the region, and the continuous development of a functional central intake system. Although there appears to be an increase in certain areas, the number of Total Households experiencing homelessness has decreased over the last five years. Specifically, homelessness in each category has decreased from numbers captured in 2015 compared to 2016.

## Households

Ending homelessness among households with children, particularly for those households living on the streets or other places not meant for human habitation (unsheltered families), is a specific HUD priority. In “Opening Doors” (2010), HUD states that the federal government intends to “Prevent and end homelessness for families, youth, and children in ten years” (by 2020).

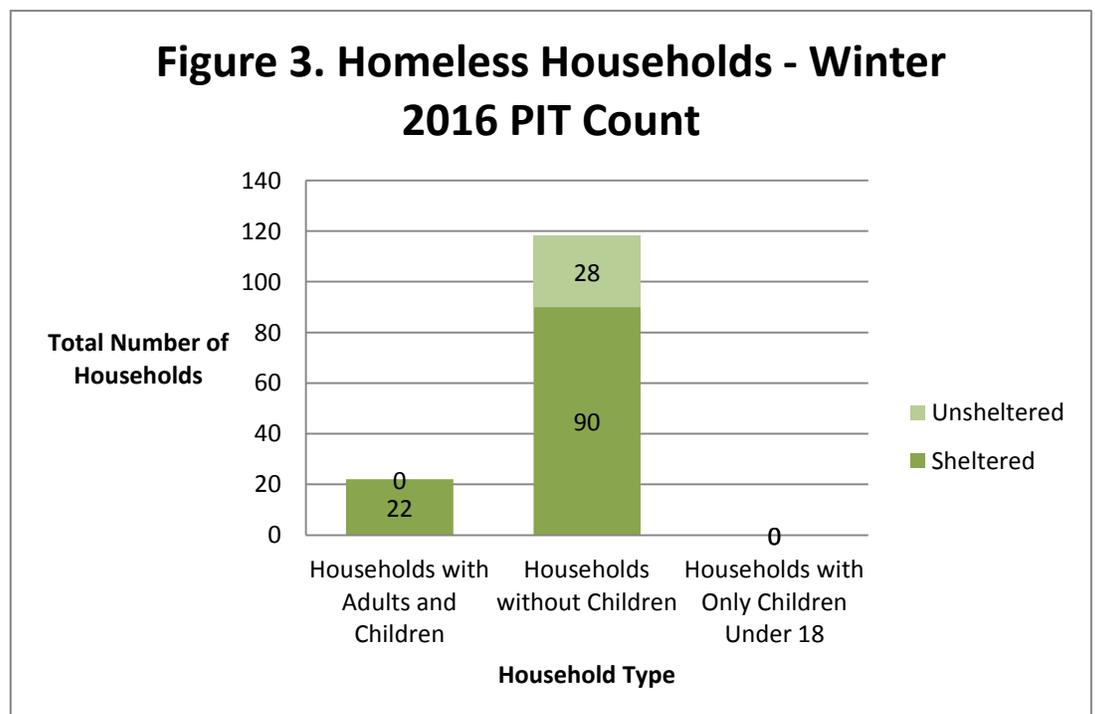
In this report, ‘household’ means “any group of persons who, if they were able to attain permanent housing, would choose to live together; and, shared the same sleeping arrangements on the night of the count.” Below, you will see three different types of households being discussed: households with adults and children under (‘families’), households without children (‘individuals’), and households with only children under 18 (‘unaccompanied youth’).

Figure 3 provides a comparison of the number of families/individuals sheltered vs. unsheltered during the 2016 Winter PIT Count.

Of the 140 homeless households counted in PD 16 in January 2016, 22 (15.7%) were families with at least one child under the age of 18 and one adult. These families included 82 persons altogether, all falling under the ‘sheltered’ category.

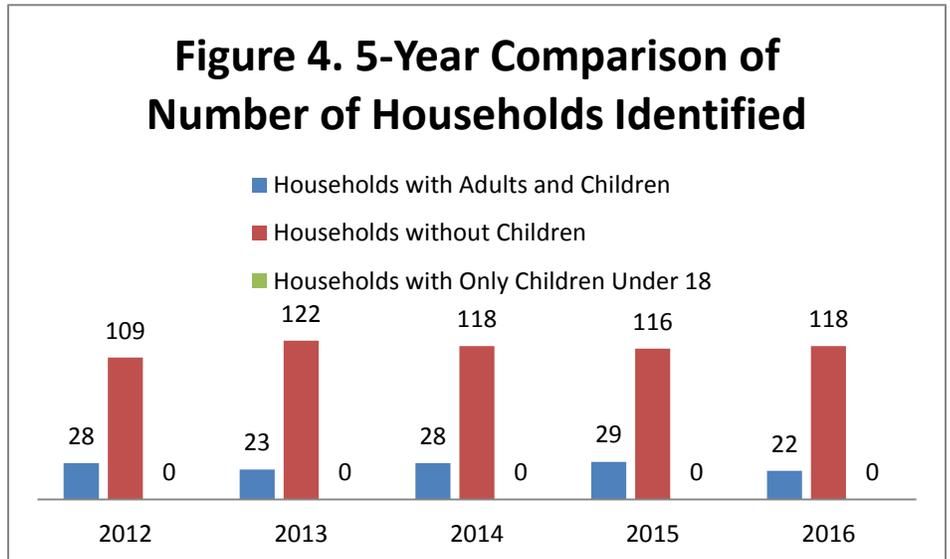
118 (84.3%) of these households were

individuals. Of these 118 individuals, 90 (76.3%) were sheltered and 28 (23.7%) were unsheltered.



Although the composition among categories fluctuates, the overall number of households experiencing homelessness decreased from 145 households in 2014 to 140 households in 2016.

Figure 4 shows household data over a five year period. The CoC has continued to develop a crisis response system which enables the community to consistently maintain the number of households discovered throughout each year.



The CoC is committed to preventing these families from becoming literally homeless with its Prevention and Diversion programs administered by CVHC (Central Virginia Housing Coalition). HUD defined ‘unaccompanied youth’ (Households with only children) data is represented in figure 3 and figure 4. The number of reported HUD homeless ‘households with only children’ has consistently remained at zero for each PIT count.

### HEARTH Act Defined Homeless

The HEARTH Act of 2009 expanded the HUD (US Department of Housing and Urban Development) definition of homelessness to include situations where a person is at imminent risk of homelessness or where a family or unaccompanied youth is living in unstable conditions. Imminent risk includes situations where a person must leave his or her current housing within the next 14 days with no other place to go and no resources or support networks through which to obtain housing.

The CoC recognizes that many families are homeless or living in unstable conditions (doubled up or in hotels/motels), which is represented by the number of homeless children identified through the Department of Education.

The Department of Education (DOE)’s Education for Homeless Children and Youth Program defines the term “homeless children and youth” in accordance with the McKinney-Vento Act, which identifies individuals who lack a fixed, regular, and adequate nighttime residence as homeless.

McKinney-Vento liaisons within the School Districts have identified unaccompanied youth under the Department of Education definition of homelessness, however the location of residence (*e.g.*, sheltered,

unsheltered, stably housed, etc.) for the children could not be verified on the night of the PIT count and therefore cannot be included in the report submitted to HUD.

Jurisdiction	Children: defined as homeless under the DOE*
Caroline	45
Fredericksburg	112
King George	55
Spotsylvania	412
Stafford	303
Other VA	0
Outside VA	0
Total:	927

\* The category, “children who are defined as homeless under the DOE,” includes all children who have been identified as homeless by PD16 School District McKinney-Vento liaisons (social workers) since the start of the 2015-2016 school years. This is a cumulative number, not a single night count.

#### IV. Subpopulations - Findings for Chronic and Veteran Homelessness

##### Chronic Homelessness

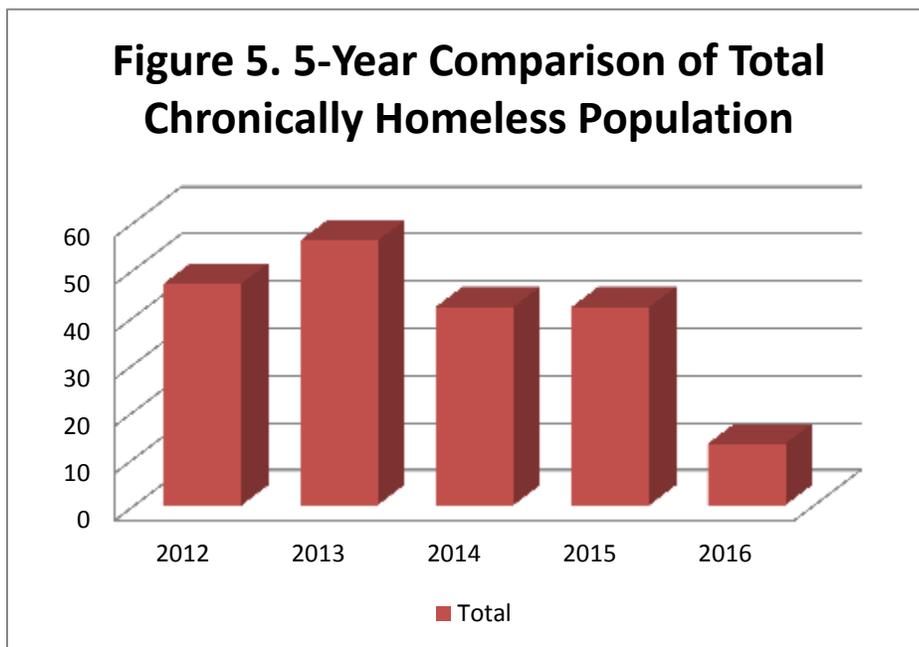
As of January 2016, those considered “chronically homeless” by HUD are,

- (1) A homeless individual with a disability, who:
  - Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter
  - Has been homeless (as described above) continuously for at least 12 months or on at least 4 separate occasions in the last 3 years where the combined occasions must total at least 12 months
    - ❖ Occasions are separated by a break of at least 7 nights
    - ❖ Stays in institution of fewer than 90 days does not constitute a break
- (2) An individual who has been residing in an institutional care facility for fewer than 90 days and meets all of the criteria in paragraph (1) of this definition, before entering that facility; or
- (3) A family with an adult head of household (or if there is not adult in the family, a minor head of household) who meets all the criteria in paragraphs (1) and (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

*Of the 209 HUD homeless:*

	2016
Total chronically homeless individuals	13
Chronically homeless adults	13
Chronically homeless children	0
Chronically homeless veterans	3

Figure 5 shows the total number of persons experiencing chronic homelessness over the past five years. The CoC has come a long way in improving the community crisis response system, as well as identifying those who are 'literally homeless'. Overall there have been decreases, but the most significant decrease is seen from 2015 to 2016.

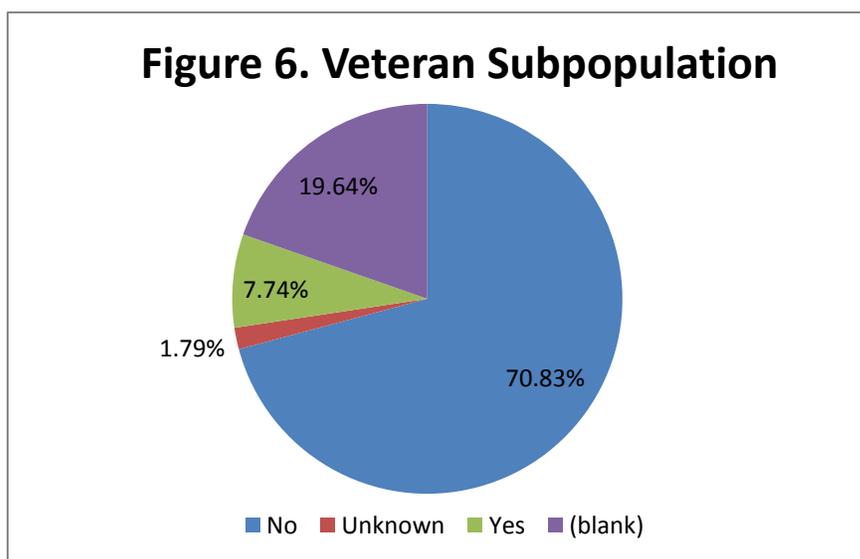


The total number of chronically homeless persons decreased significantly from 2015 (42 persons) to 2016 (13 persons). The CoC has remained consistent with its efforts to move long-standing street homeless into permanent housing and to rapidly re-house chronically homeless families with children. Micah Ecumenical Ministries maintains permanent supportive housing beds with accompanying case management and other supports for this subpopulation. The decrease in the number of chronically homeless can be attributed to the fact that the definition of “chronic homelessness” has been changed as of 2016, as well as PD 16s increased central intake and crisis response efforts.

## Veterans

In past years, data on the number of veterans experiencing homelessness often differed across data sources (e.g., HUD PIT, VA CHALLENGE). This inconsistency was largely because of different methodological approaches to collecting the information. In 2011, HUD and the VA agreed to use the HUD PIT count as the definitive federal estimate of veteran homelessness.

Figure 6 shows percentages of the veteran subpopulation based on the

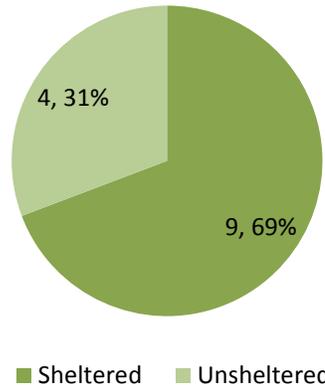


answers provided during the 2016 PIT Count. Figure 7 shows a comparison of sheltered vs. unsheltered veterans, based on the persons who responded 'yes' to whether or not they are a veteran (13 persons).

13 HUD homeless veterans were captured in the 2016 count; this number remained the same compared to 2015. In previous years this number has been much higher; thanks to the work of veteran services agencies such as the VA in Richmond and Quin Rivers

the CoC has been able to effectively maintain a functional end to veteran homelessness. The VA provides VA Supportive Housing (VASH) vouchers, which can provide housing assistance for homeless veterans. The VA also provides weekly outreach services at Micah Ecumenical Ministries to better connect homeless veterans with resources including medical care and mental health services. Quin Rivers administers its Supportive Services for Veteran Families (SSVF) program to provide supportive services to very low-income homeless veteran families living in or transitioning to permanent housing. In this program, some veterans who are not eligible for VA benefits are still eligible to receive assistance. The CoC is confident that with collaboration between the VA, Quin Rivers, and non-profit organizations such as Micah, the community's 13 identified homeless veterans will be stably housed.

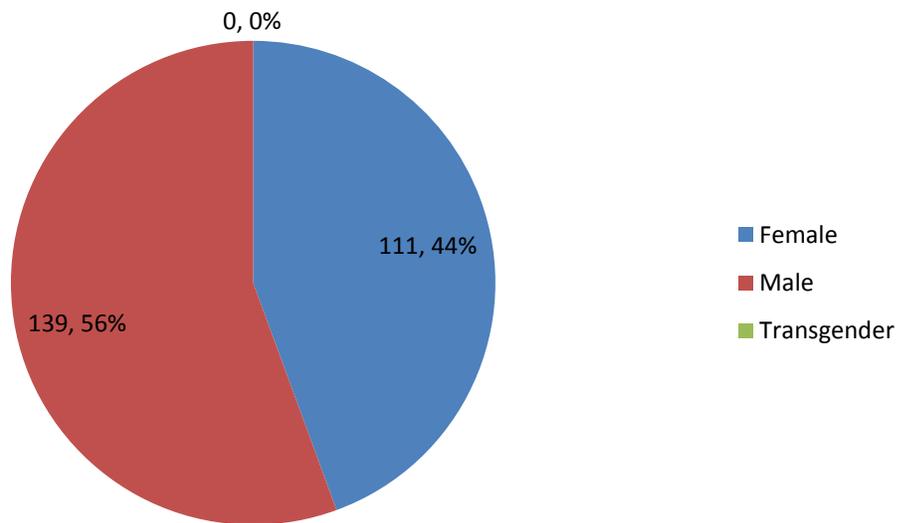
**Figure 7. 2016 Sheltered vs Unsheltered Veterans**



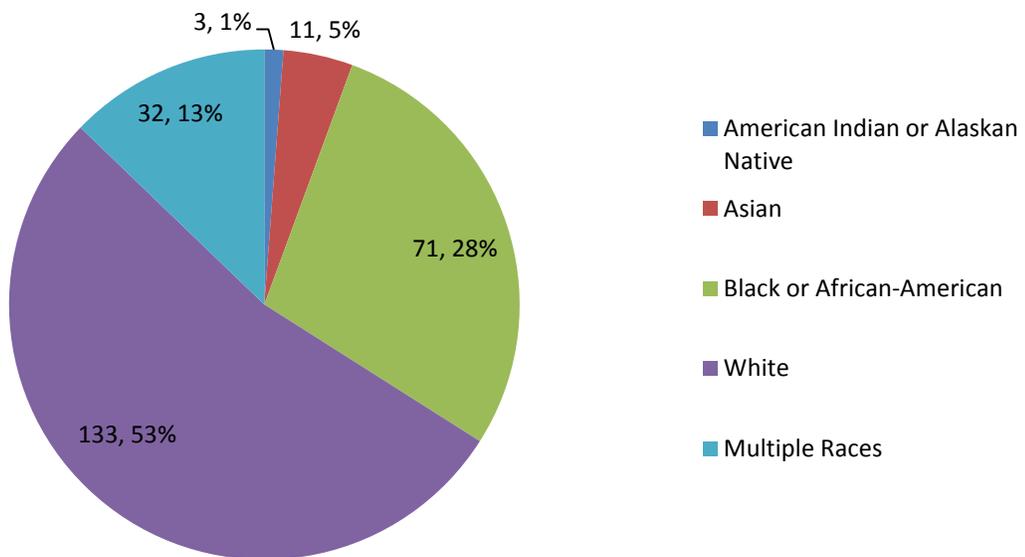
## V. Appendix

### Additional 2016 Data and Characteristics

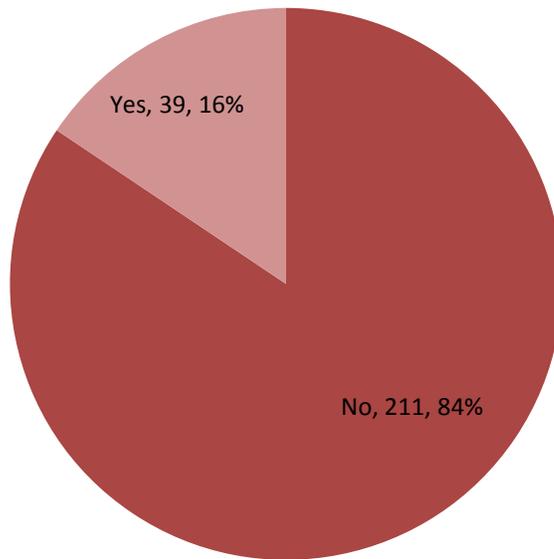
#### What is your gender?



#### Primary Race



## Are you Hispanic or Latino?



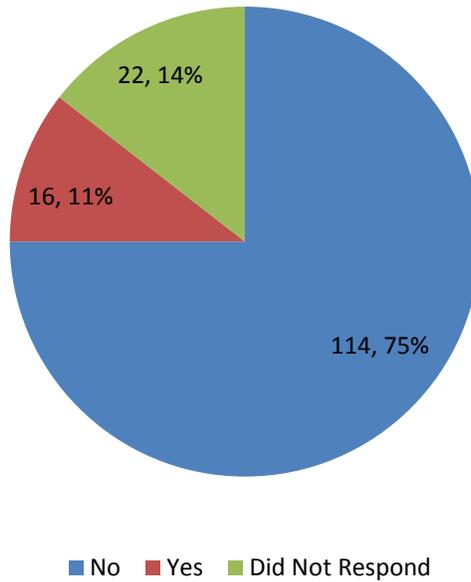
## Age

	2016
Minimum	1
Maximum	76
Average	35
Median	35

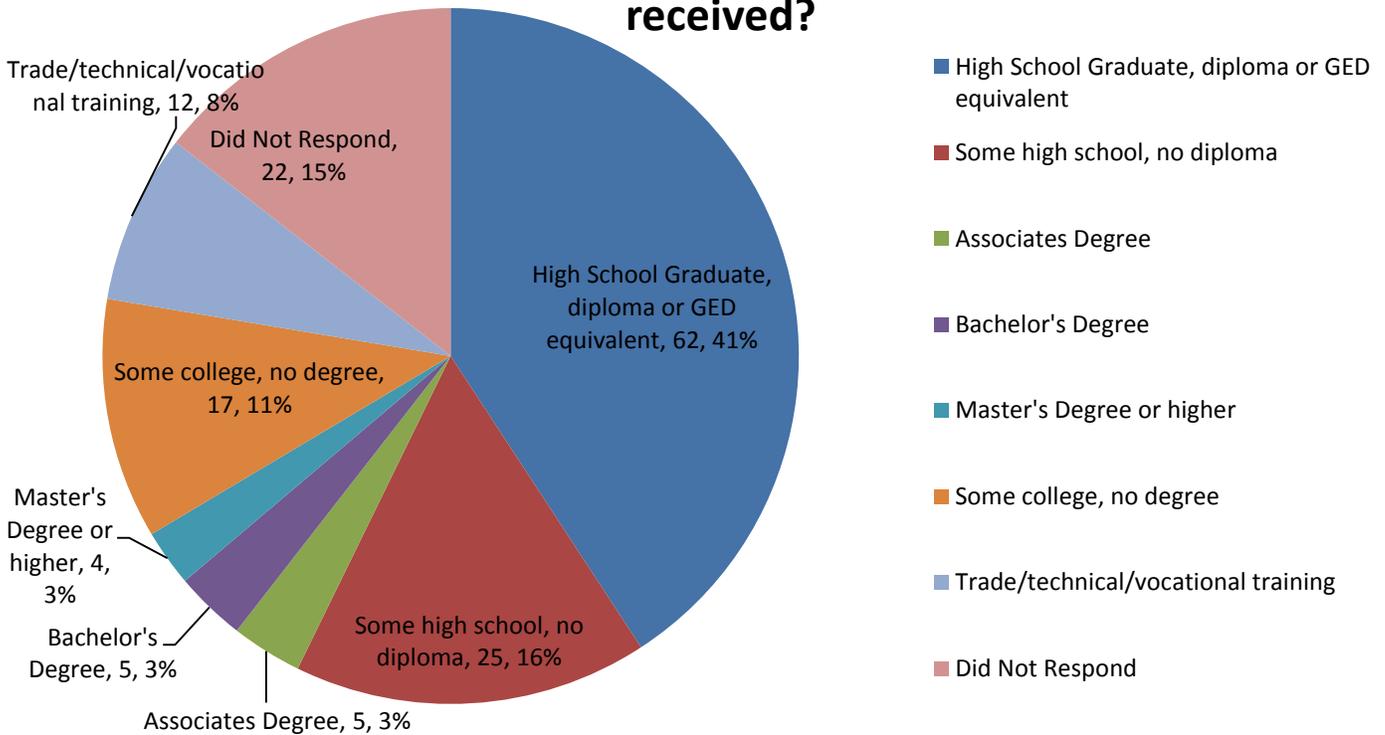
\* Under this category, any persons (4 persons total) who provide the answer 'unknown' for the 2016 Winter PIT count is excluded from this data.

The following questions were answered by adults **ONLY**:

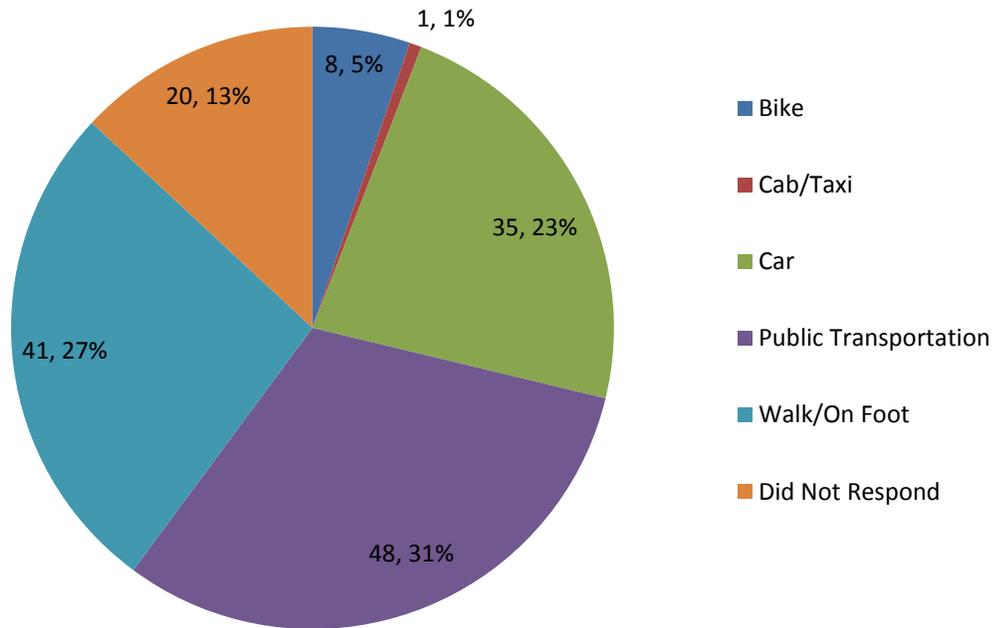
### Have you ever been in foster care?



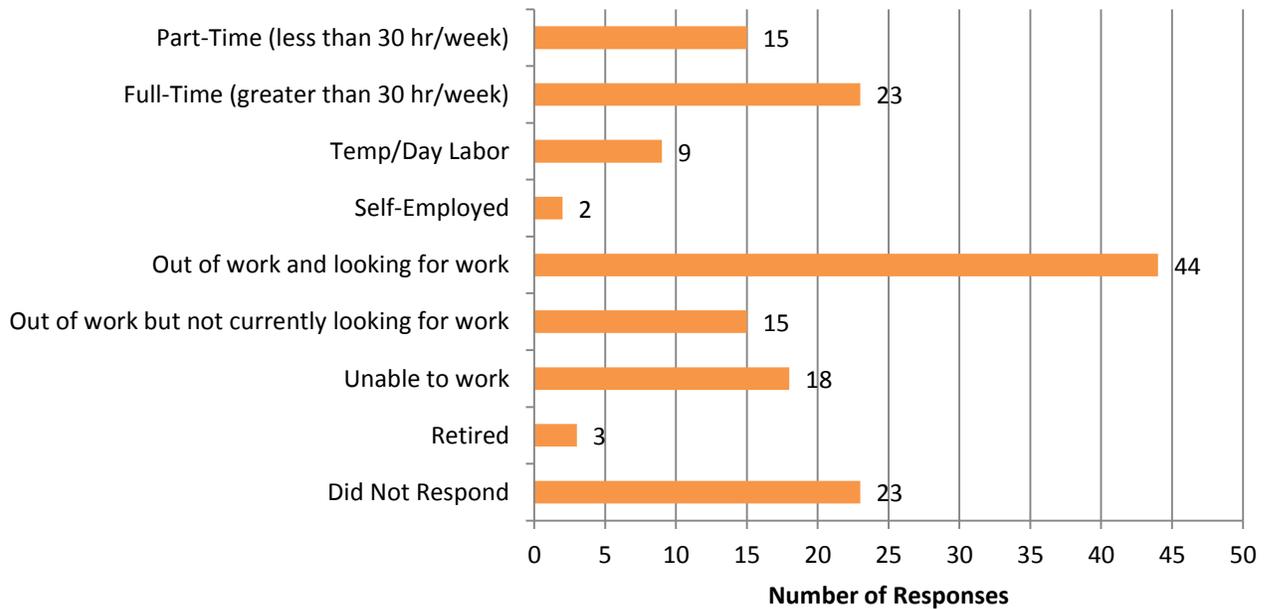
### What is the highest degree of level of school you have completed? If currently enrolled, highest degree received?



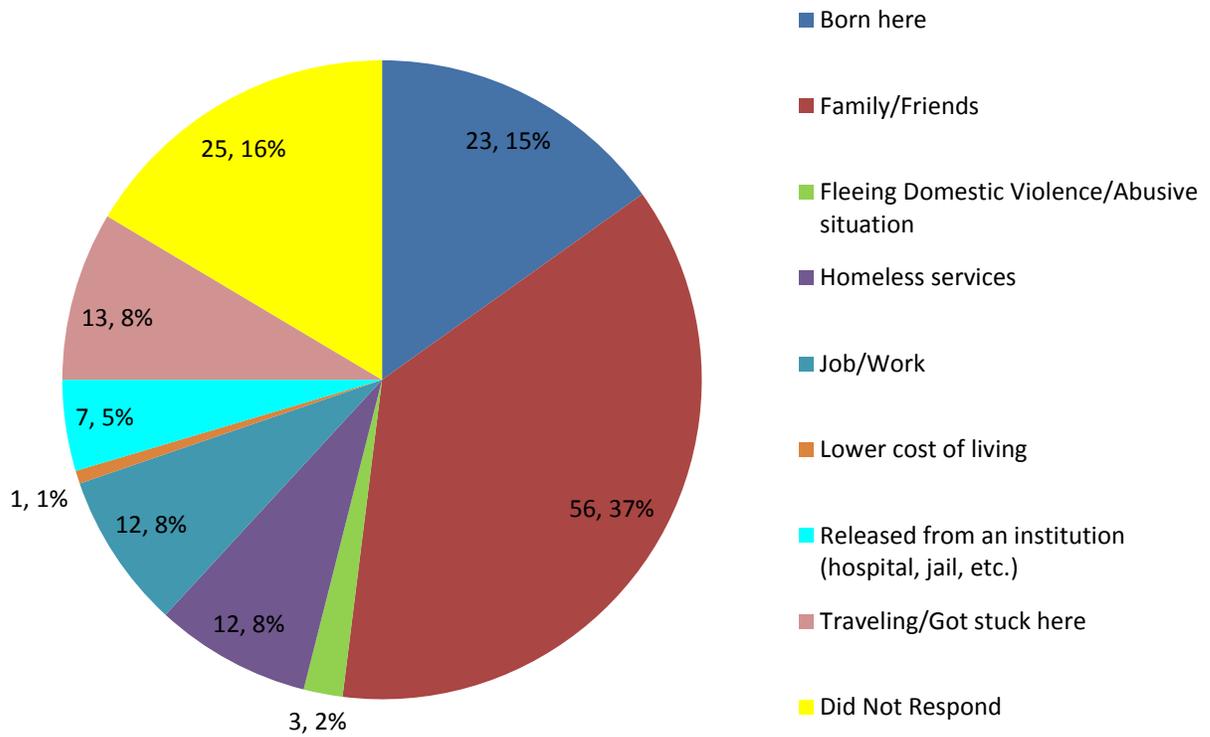
## What is your primary means of transportation?



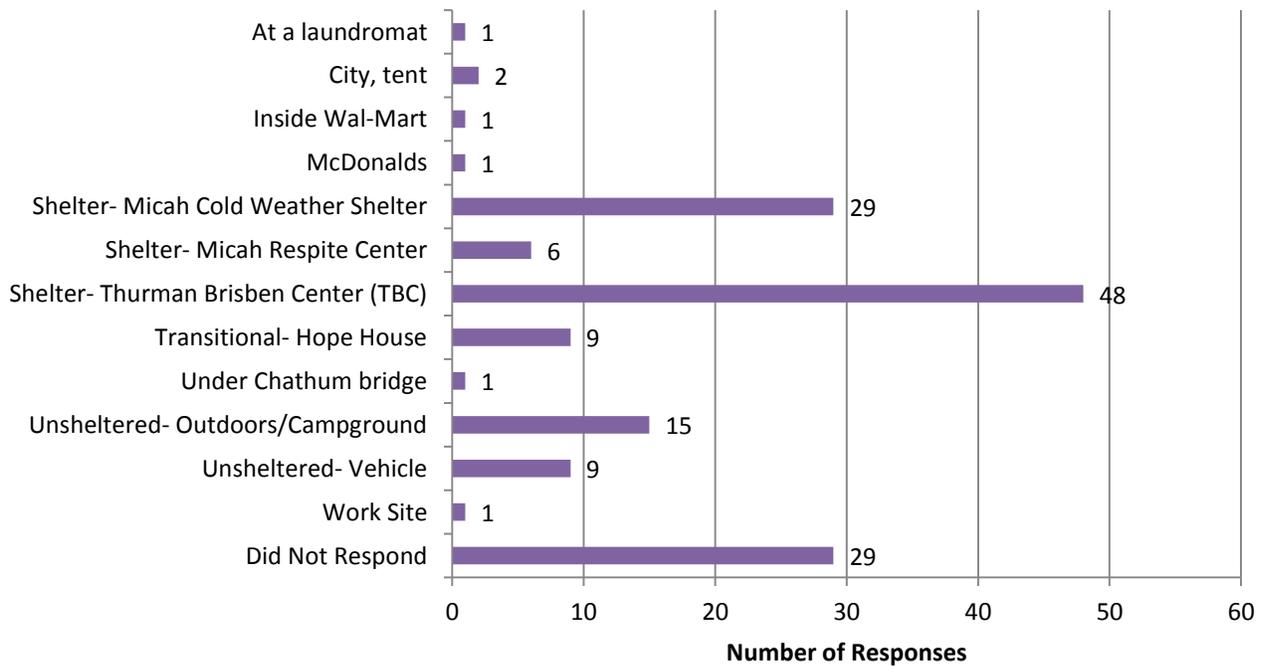
## What best describes your current employment status?



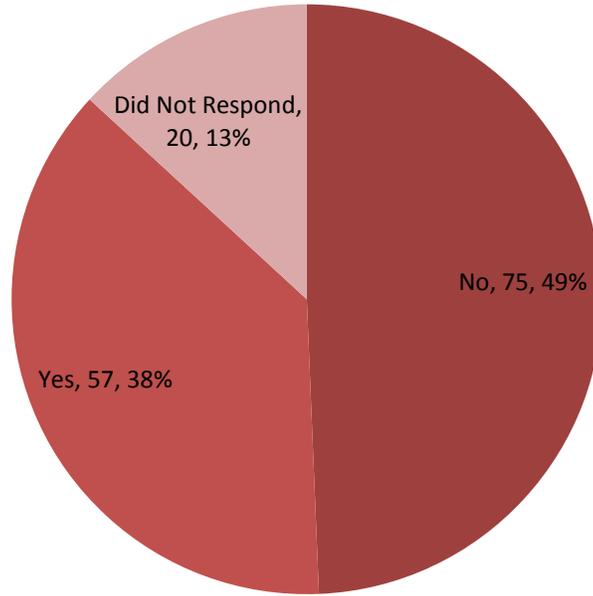
## Reasons for coming to the area (PD16)?



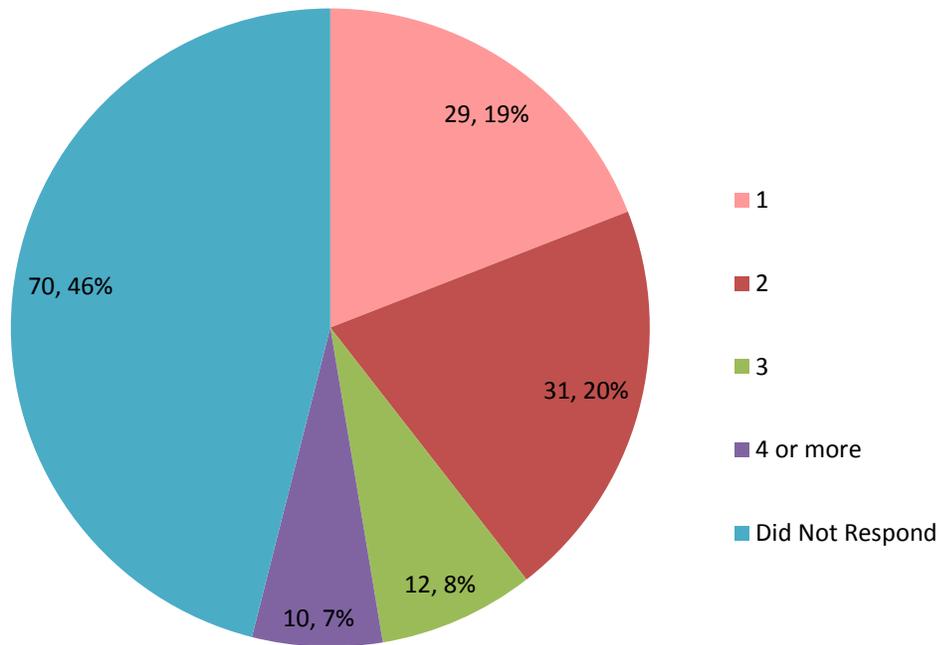
## Where did you sleep last night?



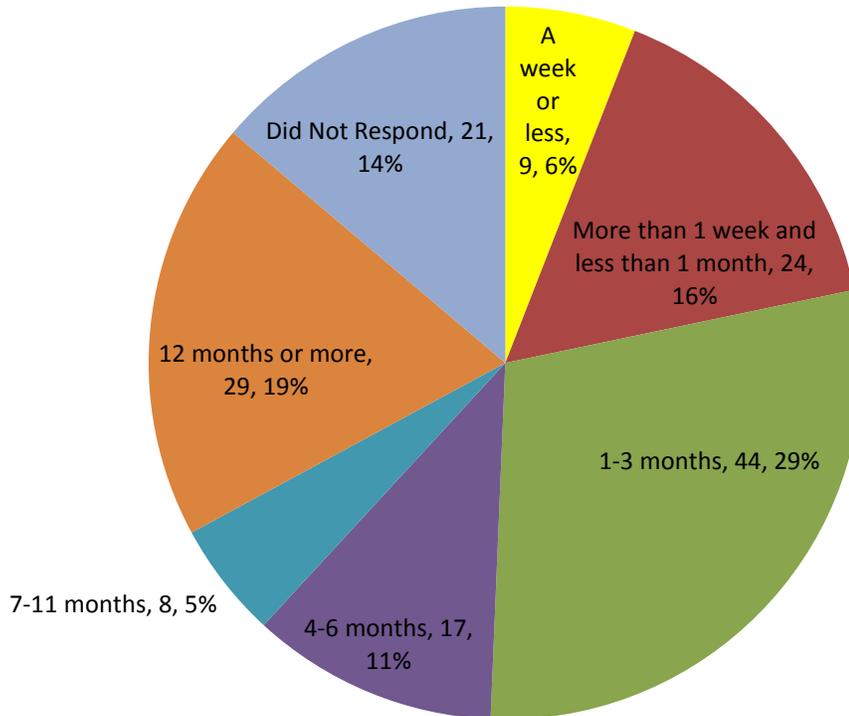
### Is this the first time you have been homeless?



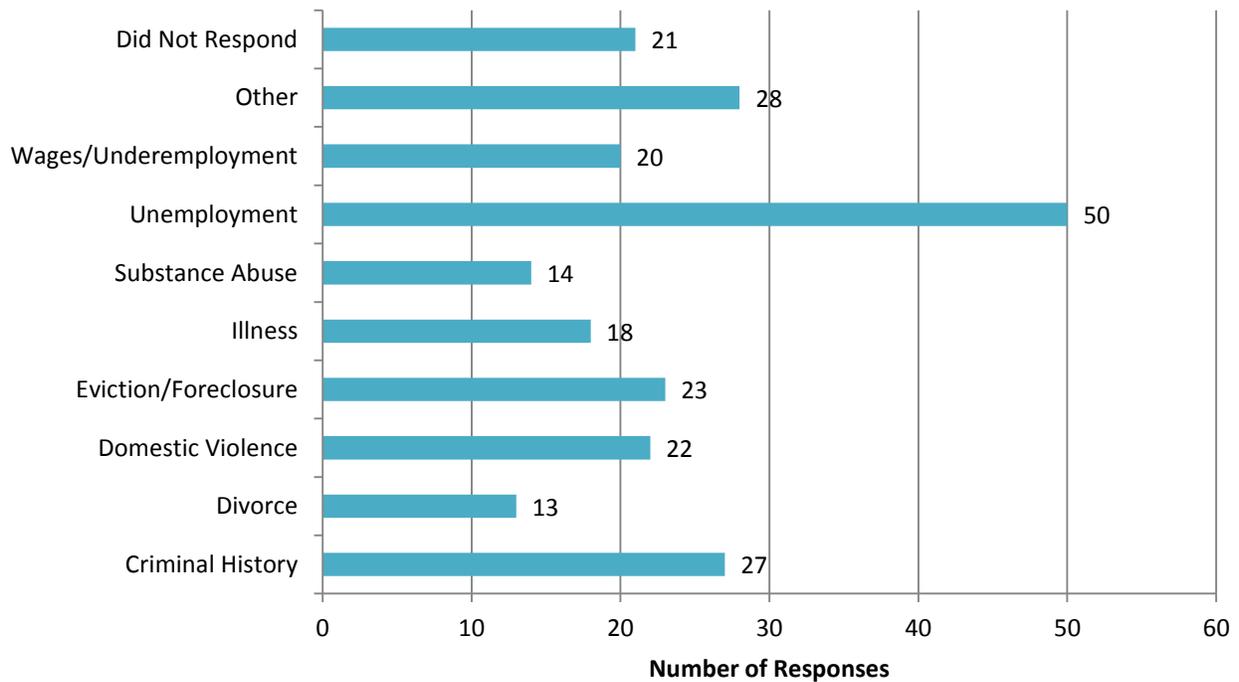
### Including this time, how many separate time have you been homeless in the past three years?



## How long have you been on the street or in a shelter this time? (Length of time homeless)

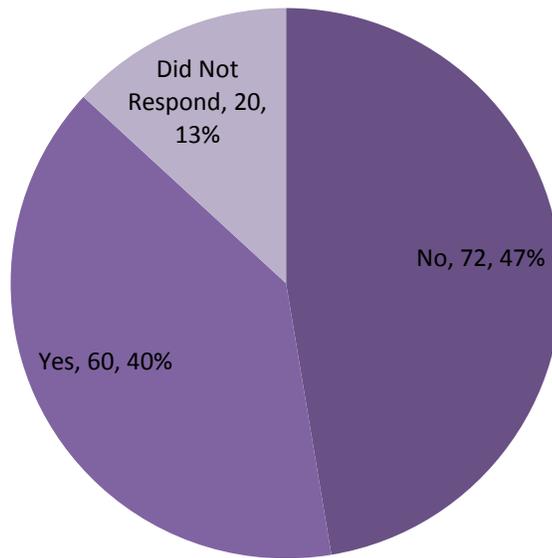


## What factors contributed to becoming homeless?



\*In this section, those being interviewed were able to pick more than one answer.

## Do you have a steady monthly income?



### Services

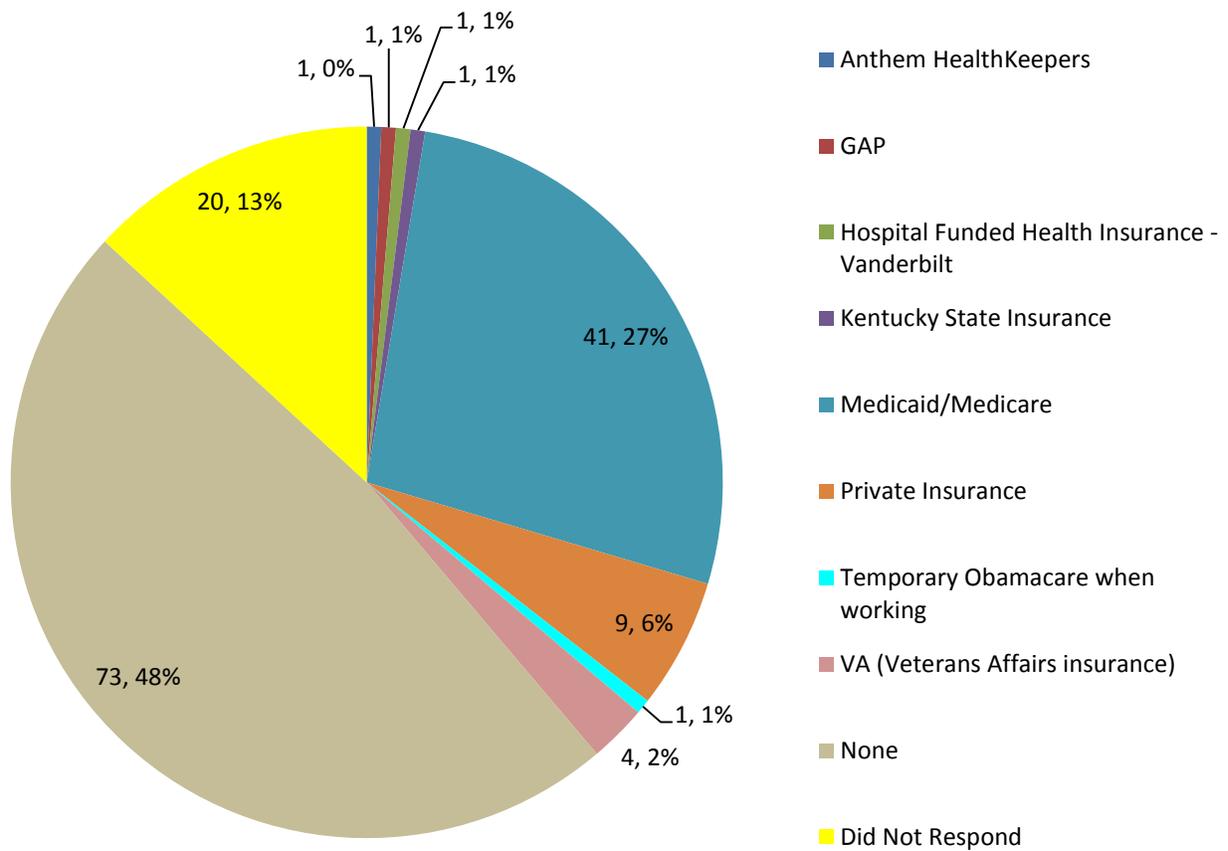
This table shows the number of persons that report whether they **HAVE** or **NEED** the following services. These are not exclusive categories - respondents are able to choose more than one.

	HAVE	NEED
Emergency Shelter	89	16
Permanent Housing	2	109
Legal Aid	3	30
Substance Abuse Services	10	8
Mental Health Services	29	16
Domestic Violence	3	4
Child Care	11	9
Food	85	22
Transportation	36	64
Access To Showers	98	14
Disability Services	12	21
Dental	15	79
Medical	37	59
HIV/AIDS/STD Services	4	4
Employment	34	61
Food Stamps	65	36
Cell Phone Service	77	27
Recreational Activities	35	25

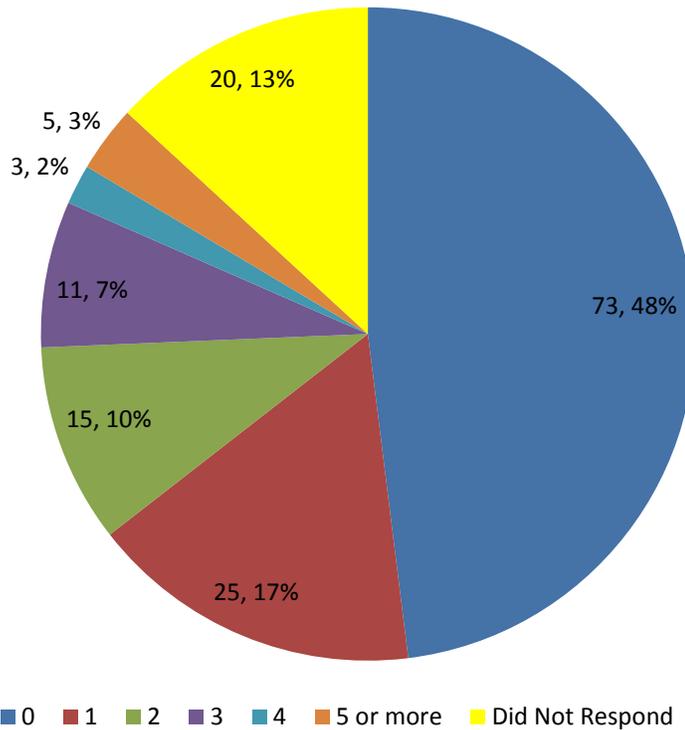
### Where respondents go when they need to see a doctor?

	2016
Hospital/ER	31.55%
Moss Free Clinic	10.12%
Primary Care Physician	12.50%
Urgent Care	3.57%
RACSB	2.38%
VA Clinic – Richmond	1.79%
Nowhere	8.93%

### What kind of health insurance do you have, if any?



## How many times have you been to the Emergency Room in the past three months?



## How many times have you been an inpatient in the hospital in the past year?

