



Department of Health and Human Services

Interagency Commission on Homelessness

2022 Annual Report



Department of Health and Human Services
Services to End and Prevent Homelessness
401 Hungerford Drive, 5th Floor
Rockville, Maryland 20850
www.montgomerycountymd.gov/Homelessness
HousingforAll@montgomerycountymd.gov
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INTERAGENCY COMMISSION ON HOMELESSNESS MEMBERSHIP

Amanda S. Chesney, Catholic Charities of the Archdiocese of Washington

Raymond L. Crowel, Psy.D., Department of Health and Human Services (DHHS)

Christopher Dickersin-Prokopp, Capital One

Councilmember Evan Glass, Montgomery County Council

Jeff Goldman, (Chair) Public Representative

Asmara G. Habte, Mayor's Office, City of Rockville

Courtney Hall, Interfaith Works

Amanda J. Harris, DHHS, Services to End and Prevent Homelessness

Connor Hegel, SMYAL-Supporting and Mentoring Youth Advocates and Leaders

Manuel Hidalgo, Shepherd's Table

Terence D. Hill, Public Representative

Ebony Alyse Grey, (Co-Chair) Housing Urban Development

Kathryn Kelly, M.D., Kelly Collaborative Medicine

Captain Robin Lewis, Montgomery County Sheriff's Office

Sharan London, Office of the County Executive

Aseem Nigam, Department of Housing and Community Affairs

Ruschelle Reuben, Montgomery County Public Schools

Stan Seidel, Maryland Department of Veterans Affairs

Karishma Sheth, EveryMind

Susie Sinclair-Smith, Montgomery County Coalition for the Homeless

Angela Talley, Department of Corrections and Rehabilitation

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OVERVIEW

The Interagency Commission on Homelessness (ICH) was established by the Montgomery County Council in 2014 and began its work in 2015 to promote efforts to end and prevent homelessness in Montgomery County. The mission of the ICH is to:

- promote a community-wide goal to end and prevent homelessness,
- develop and implement a strategic plan,
- educate the community about homelessness,
- promote partnerships to improve the County's ability to prevent and end homelessness,
- monitor programs that are components of the Continuum of Care (CoC),
- make recommendations to the County Executive and County Council to improve the CoC, and
- establish procedures for effective coordination of the CoC.

The ICH has also been designated as the Governing Board of the CoC.

The CoC is Montgomery County's local homeless program planning network. It is a public- private partnership that includes County and other government agencies, non-profit service providers, landlords and others who have a role in preventing and ending homelessness. The purpose of the CoC is to coordinate the implementation of a housing and service system within the Montgomery County CoC geographic area that meets the needs of individuals and families experiencing or at risk of homelessness. The Montgomery County CoC provides a full continuum of housing services to homeless persons including:

- outreach and engagement,
- emergency and transitional shelter,
- rapid re-housing,
- permanent supportive housing, and
- prevention strategies.

STRATEGIC DIRECTION

On November 2, 2022, the ICH voted to recommit to the goal of ending homelessness for all populations by the end of 2025. Montgomery County is working in partnership with [Built for Zero \(BfZ\)](#), an international movement of more than 100 communities working to end homelessness in a measurable and equitable way, to be one of the first communities to end homelessness for all populations. Ending homelessness does not mean that no one will ever experience homelessness, but that all efforts are made to prevent homelessness whenever possible, and when

prevention isn't possible, people are rapidly connected to permanent housing that best meets their unique needs.

BfZ defines ending homelessness for all by reaching “functional zero” for all subpopulations. Functional zero simply means that the number of households actively experiencing homelessness must be **less than or equal to the monthly rate at which households achieve stable housing.**



For a community to achieve functional zero across all populations, they must meet additional indicators to ensure that homelessness is *rare, brief, and one-time only* for all households.

Rare:

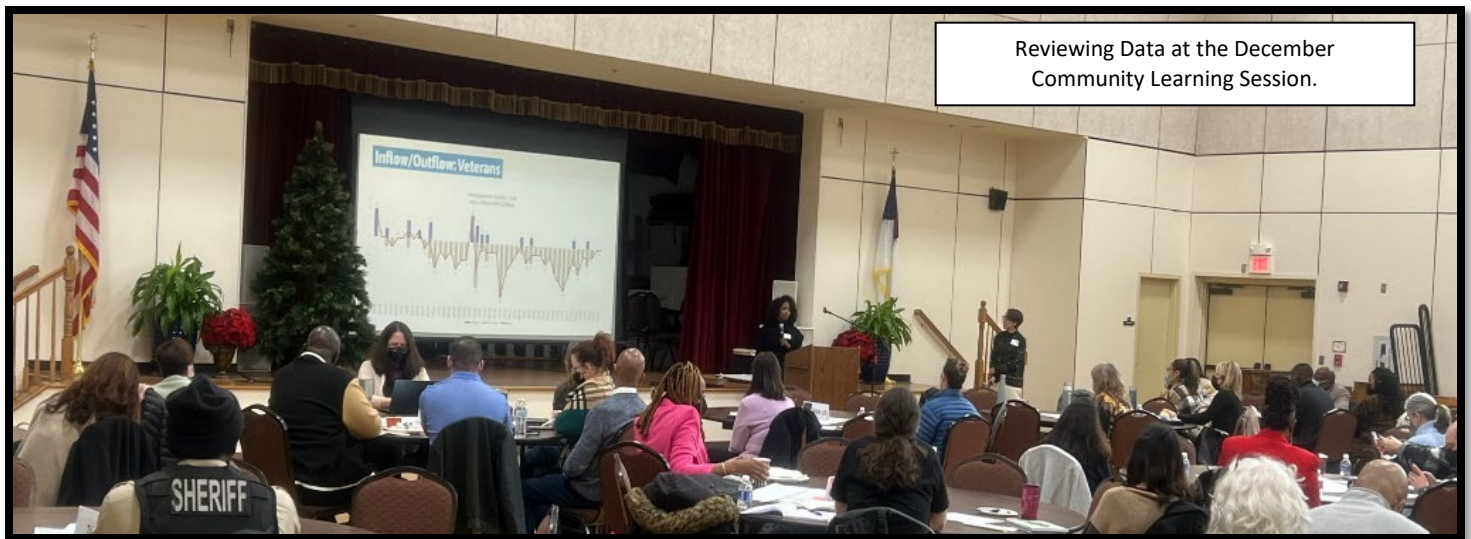
- The community has met and sustained functional zero measures for youth, families, and single adults (including veterans and chronically homelessness individuals).

Brief:

- Individuals spend 45 days or less on average on a community's active by-name list (real time list of all individuals experiencing homelessness).

One-time Only:

- No more than 5% of positive exits result in a return to the homelessness system within 2 years of exit from the homeless system (e.g., subsidy or services).



Throughout the fall, Montgomery County's Services to End and Prevent Homelessness (SEPH) in their role as the data lead for the CoC, convened a series of learning sessions with community members, homeless services providers, and other stakeholders of the ICH. The purpose of the convening was to review our progress toward the goal of making homelessness rare, brief, and one-time only. On December 14, the ICH, CoC, people with lived experience of homelessness, housing advocates, elected officials, and other systems of care convened to launch our efforts to achieve the benchmarks outlined by BfZ.



County Council Member Will Jawando sharing remarks at the December Learning Session.

Using the framework and strategies of ICH's Strategic Plan to End Homelessness, the ICH will establish or assign existing committees and work groups to oversee the action plans developed for each subpopulation (youth, families, Veterans, vulnerable adults, and seniors). In alignment with the BfZ approach, the action plans will be mapped out in six-month increments with milestones to benchmark progress at each six-month mark. The full CoC will convene quarterly to review progress on achieving the milestones. The milestones to be met by June 2023 are as follows:

- **Veterans:** No more than 7 Veterans experiencing homelessness (down from 10)
- **Youth:** A fully operational Coordinated Entry System specific for youth
- **Families:** An average length of time from identification to move-in of 45 days
- **Seniors:** Decrease the number of seniors entering homelessness by 50% (from 6 to 3)
- **Vulnerable Adults:** An average length of time from assigned to house of 45 days
- **Other Adult-Only Households:** House 350 individuals

In January 2020, the ICH launched the [3-Year Strategic Plan to End Homelessness](#). The plan consists of six primary strategies:

1. Reduce Racial Disparities Across the System,
2. Build and Support Strong and Adaptable Programs,
3. Build and Support Affordable Housing Solutions within the Homeless Continuum,
4. Coordinate Effectively Across Other Systems of Care,
5. Increase and Diversify Funding, and
6. Educate and Advocate for Change.

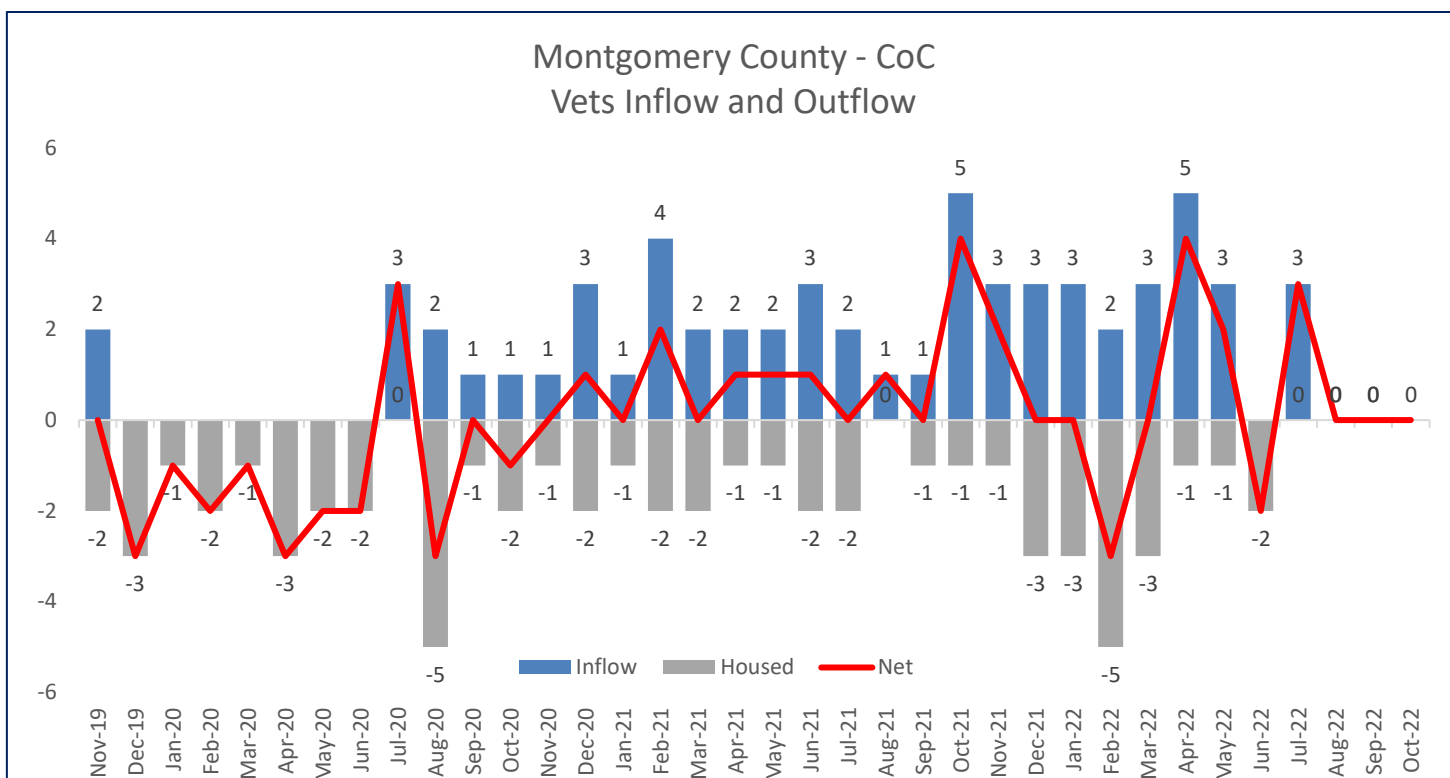
The ICH and its partners have achieved many of the objectives articulated in the plan which is scheduled to end in 2023. The Strategy and Planning Committee will use the next year to conduct an environmental scan in preparation of initiating a new three-year plan. A lot has changed since January 2020, and while the strategies for the ICH are unlikely to change, the priorities and action items need to align with a new normal.

Status Report on Previous Initiatives and Subpopulations

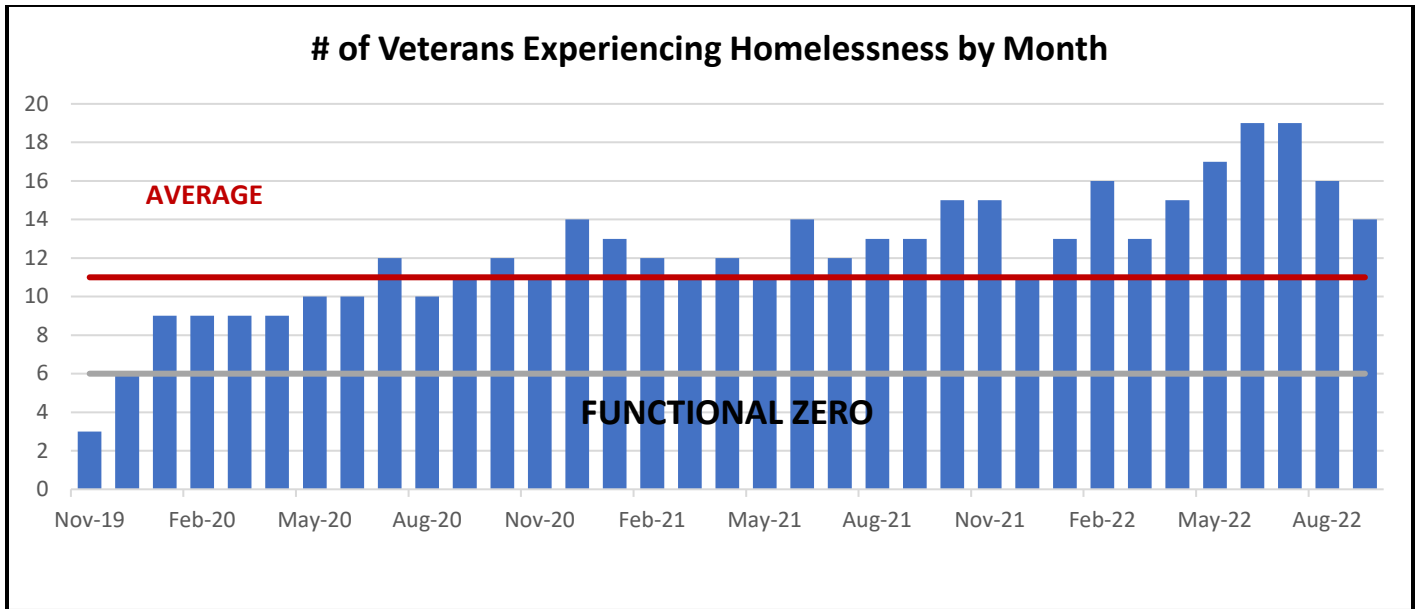
Veterans

In December 2015, Montgomery County was one of the first four jurisdictions in the Country to effectively end Veteran homelessness.

This success was confirmed by the U.S. Department of Housing and Urban Development (HUD), the U.S. Interagency Council on Homelessness, and the Community Solutions **Built forZero (BFZ)** campaign. At this time, “functional zero” was defined as having no more than 6 Veterans experiencing homelessness at any given time. For the last three years, the average number of Veterans experiencing homelessness each month has increased to eleven. For this reporting period, the number of unhoused Veterans has increased above the average. As of this day, December 15, 2022, the active number of Veterans has decreased down to 10. The focus continues prioritizing Veterans for permanent housing placements and moving as quickly as possible to end their homelessness. Since January 2015, we have ended homelessness for 227 Veterans.



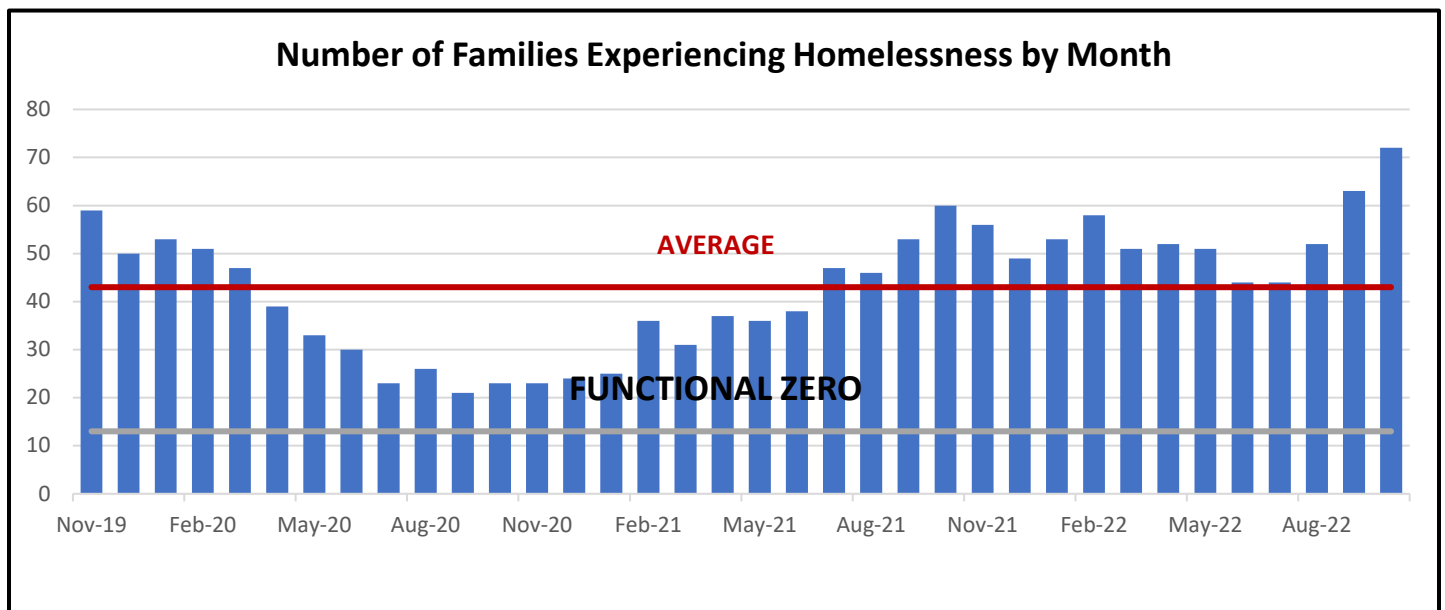
The charts below show the effectiveness of the CoC at serving Veterans. The first chart displays the number of Veterans entering and exiting homelessness each month. The goal is for the number of exits (outflow) to exceed the number of entries (inflow). The second chart shows the number of Veterans actively experiencing homelessness each month. The goal is for the active number to be equal to or less than functional zero.



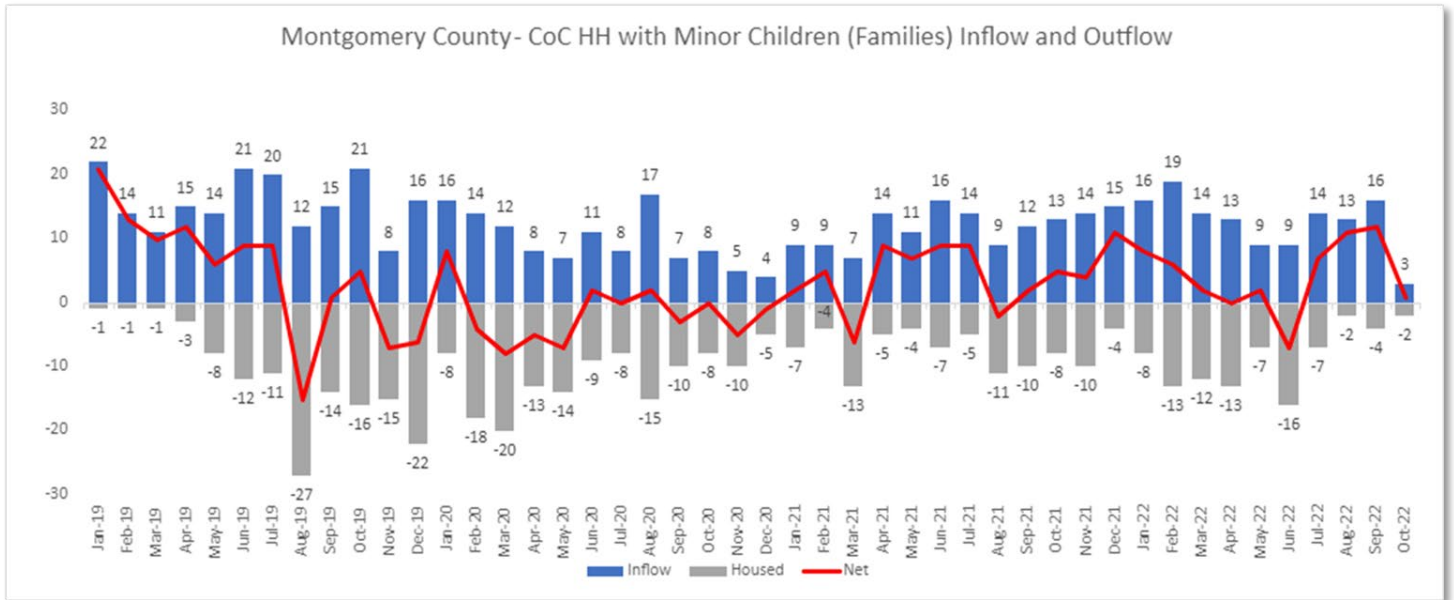
Families

In July 2018, the ICH launched the *@HomeTogether* Initiative to end and prevent homelessness for families with children by the end of 2020.

As detailed in the monthly census chart below, the number of families experiencing homelessness significantly decreased in early 2020. The low census coincides with the beginning of the pandemic as well as state and federal eviction moratoriums. Over the last couple of years, the number of families entering homelessness has increased in part due to the challenging housing market and bureaucratic delays, particularly in issuing federal tenant- and project-based vouchers. It is also possible that families who faced eviction earlier in the pandemic, stayed with family and friends temporarily and now have exhausted all other resources. The SEPH data team is digging into the data to better answer the question of why.

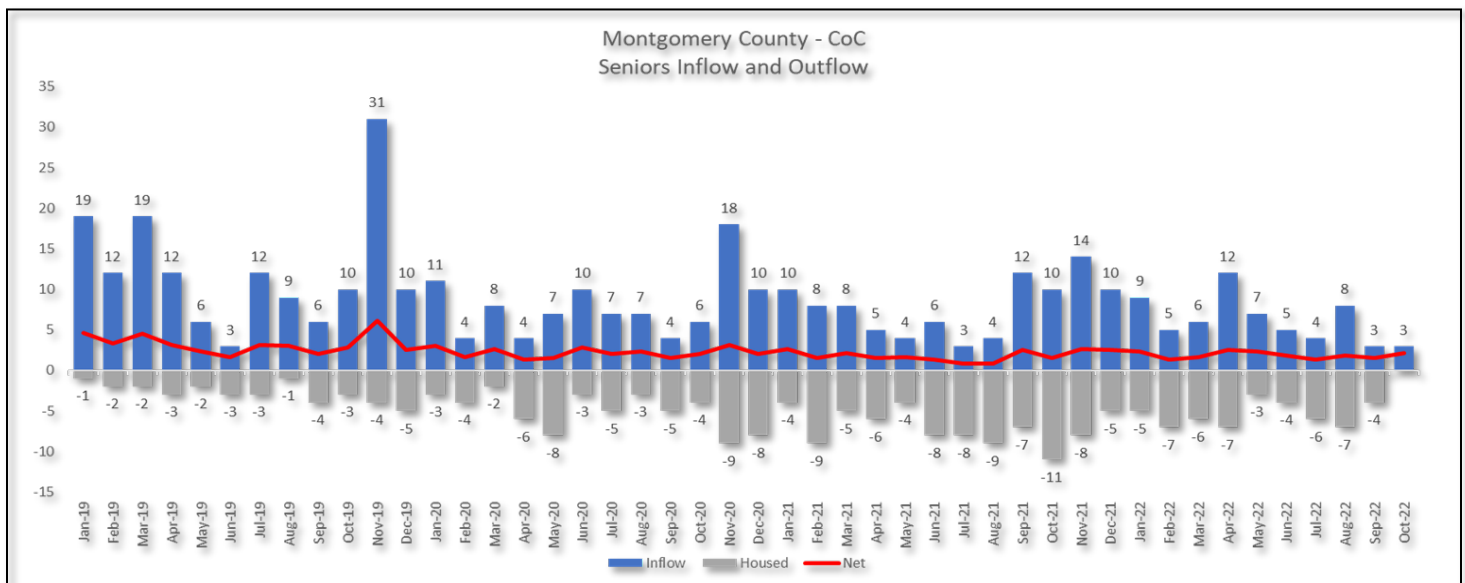


The monthly inflow and outflow chart below explains that inflow has increased and simultaneously the number of families housed each month has slowed down.



Seniors

Montgomery County ICH was one the first communities to specifically set a goal to reach functional zero for seniors. Seniors or older adults are defined as those age 62 years or older. Between January 1, 2020, and December 1, 2022, 652 seniors were served in emergency services. The CoC is not yet tracking the number of seniors actively experiencing homelessness by month, but below is the monthly inflow and outflow chart. The CoC is very close to reaching functional zero for seniors as the number of entries and exits are close to equal.



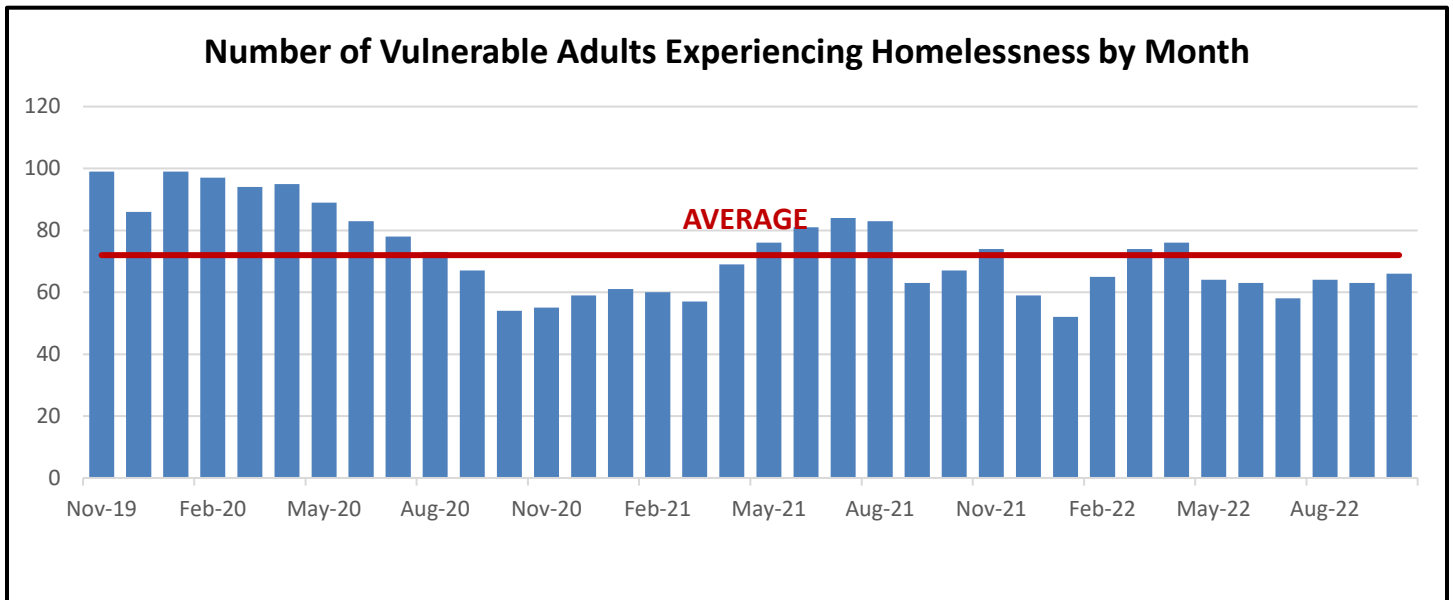
Vulnerable Adults

The *Inside (not Outside)* Initiative is Montgomery County’s campaign to end chronic homelessness.

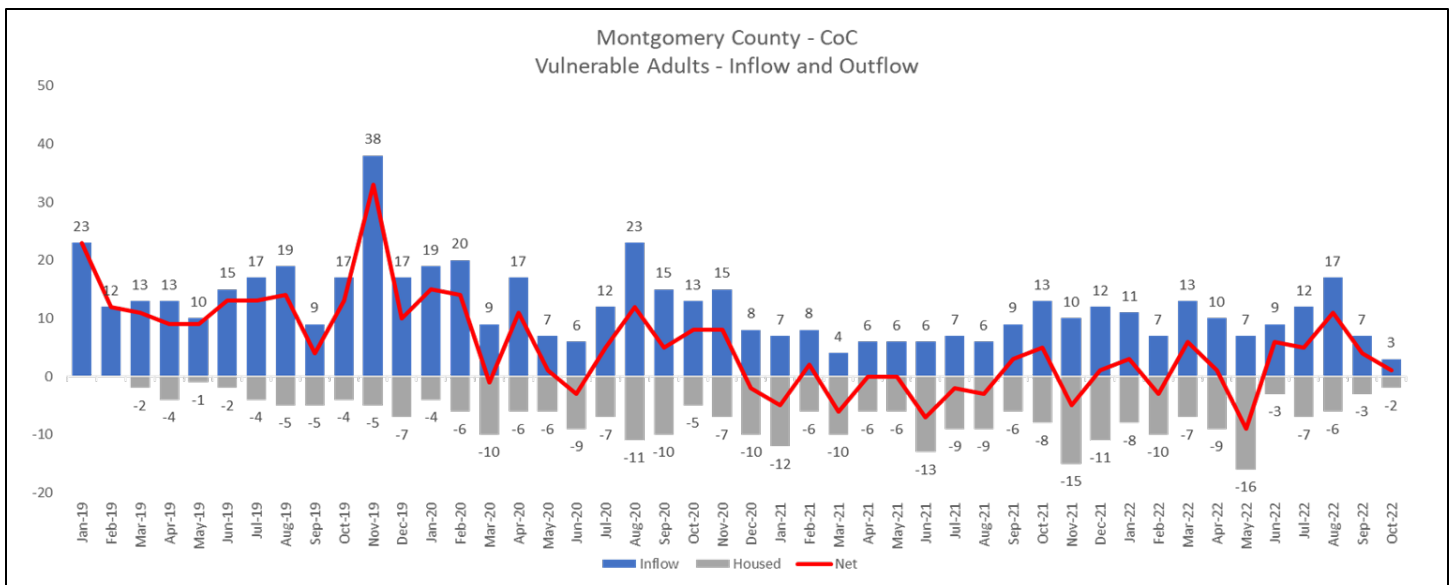
In January 2016, Montgomery County CoC committed to the ambitious goal of ending long-term homelessness for people with disabilities. To date, more than 450 chronically homeless adults have been housed through this initiative.

In February 2019, the ICH decided to shift the prioritization of permanent supportive housing from chronic to other vulnerable populations. The **Inside (not Outside)** Initiative resulted in a significant number of people with long histories of homelessness placed in permanent housing but had unintended consequences. Most notably, highly vulnerable individuals who did not meet the federal definition of chronic homelessness due to an inability to verify the length of time homeless were stuck waiting on the Coordinated Entry List while others with lower acuity were placed in high intensity permanent supportive housing. To most effectively allocate resources, the Coordinated Entry System now prioritizes all vulnerable adults for permanent supportive housing.

The charts below detail the census of unhoused vulnerable adults by month and the number of placements in permanent supportive housing. Of note, in 2022, the monthly census of vulnerable adults has been below the average of 72. This may be attributable to an increase in the available of permanent supportive housing (PSH) both through new programming and freeing up units by graduating households from PSH to subsidy only.



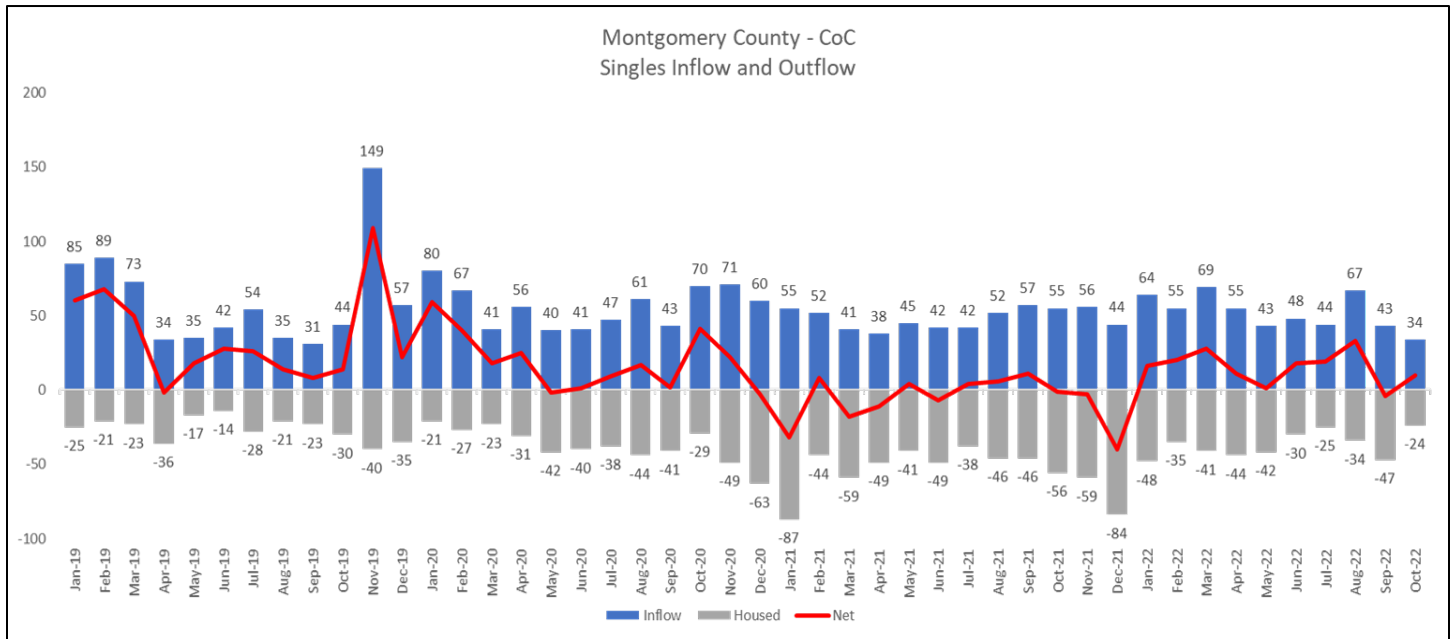
When reviewing the inflow and outflow of vulnerable adults, it is within the last six months that the strain of the housing market and other factors are leading to fewer people exiting homelessness. The inflow has also spiked from the low numbers seen in 2021.



All Adult-Only Households (Singles or Individuals)

This population makes up the highest percent of the overall number of people experiencing homelessness and often receiving the smallest allocation of resources. Montgomery County is fortunate to have multiple options for adult-only households including both permanent and time-limited housing subsidies or other financial benefits. That said, the CoC is far from reaching the functional zero number of 73 for this population.

The chart below highlights the improvements in the monthly inflow versus outflow for households without children. In the last year, on average 49 new individuals enter the homelessness continuum each month and 41 were placed in permanent housing.



PROGRAM HIGHLIGHTS

Homeless | Eviction Prevention

Services to End and Prevent Homelessness (SEPH) partnered with the Department of Housing and Community Affairs (DHCA) to deploy a progressive engagement approach to eviction/homeless prevention. The first step in preventing eviction is offering housing counseling services and landlord mediation. Several nonprofit partners received funding through DHCA to conduct outreach and engagement to tenants with rent delinquencies and facilitated repayment plan agreements. Despite our best efforts, some tenants will inevitably have court action taken against them for nonpayment of rent. For these tenants, legal assistance has been provided. Finally, for households most at risk of homelessness as a result of eviction, financial assistance is provided to tenants.

Throughout the pandemic, the ICH ensured that all eviction prevention efforts were based on equity principles by targeting outreach and housing counseling services to neighborhoods most at risk of homelessness and prioritized financial assistance to those households at imminent risk of eviction. Research has shown that low income, single parent households of color experience higher rates of eviction than their counterparts.

To date, \$91.6 M has been distributed to 11,811 households to prevent eviction. Unfortunately, the federal rent relief funds are nearly all expended. Many households have returned for additional assistance as they continue to struggle to find work and maintain the rent. For others, financial assistance is not enough to stave off the eviction. There is a rise in tenant holding over cases. In Maryland, a landlord does not have to provide a reason for not renewing the lease and either change the lease terms to month to month or issue a notice to vacate. If the tenant refuses to leave, they may be evicted as “a tenant holding over”. In addition, rent increases are forcing families to

seek more affordable units. For these reasons, the ICH will continue to define housing stabilization services for the future to include both longer term financial assistance for those with the greatest need and intensive prevention case management. In 2023, SEPH will be piloting two new programs to further prevent homelessness:

- The first is a medical rent relief program which will cover a household's rent for up to 9 months when the family is unable to pay rent due to a time-limited medical issue.
- The second is a prospective rent pilot. This will enable us to pay up to 3 months of prospective rent after we have either stopped an eviction or helped a family relocate to more affordable housing. This provides an additional safety net for a household that has recently experienced a housing crisis.

Homeless Street Outreach

Reducing unsheltered homelessness remains a top priority for the ICH. Street outreach teams have reported an increase in the number of people sleeping outside despite an expansion of street outreach capacity. Montgomery County is not alone, as the number of people unsheltered has increased across the nation, particularly on the West Coast. In response, the federal Department of Housing and Urban Development (HUD) released a 2022 Continuum of Care Supplemental to Address Unsheltered and Rural Homelessness (Special NOFO). The Special NOFO awards funding for communities "to implement coordinated approaches -- grounded in Housing First and public health principles -- to reduce the prevalence of unsheltered homelessness, and improve services, health outcomes, and housing stability among highly vulnerable unsheltered individuals and families. HUD expects applicant communities to partner with health and housing agencies to leverage mainstream housing and healthcare resources."¹

The ICH voted to apply for this Special NOFO and create an Unsheltered Allocation Committee to review and rank project applicants. This committee included representation from libraries, police, regional services, urban districts, and people with lived experience. Two projects were submitted to HUD through the Special NOFO.

- The first is a partnership between Bethesda Cares, The Coordinating Center, Mary's Center, and the Housing Opportunities Commission (HOC) that if awarded would provide comprehensive street outreach and low barrier, housing first permanent supportive housing specifically for unsheltered individuals. This unique model pulls from the strengths of each of the partner organizations with Bethesda Cares and The Coordinating Center using Critical Time Intervention to help people transition from the streets to homes. Mary's Center, a federally qualified health center, will provide somatic, behavioral health, and dental care through street outreach and for households placed in PSH. HOC in partnership with SEPH applied for Stability Vouchers² through HUD. These vouchers will cover a significant portion of the housing costs of this new PSH project.
- The second project if awarded funding will provide the CoC with a Street Outreach Program Manager to coordinate services within the Montgomery County Department of Health and Human Services as well as police, fire and rescue, libraries, businesses, etc. to improve the outreach and engagement of individuals experiencing unsheltered homelessness.

County Rental Assistance Program and Other Housing Subsidies

The County Rental Assistance Program (RAP) is a permanent shallow subsidy for households with at least one member with a disability or over 54 years old. Applicant must currently be experiencing homelessness or at imminent risk. Over the last few years, the ICH has advocated for an increase in funding for the program. Since 2020, the budget for RAP has doubled. This year, County Executive Marc Elrich approved an increase to the maximum benefit from \$400 to \$503 to better align with rising rent costs. RAP has been a useful tool for households graduating from rapid rehousing or other time-limited housing subsidies whose income remains too low to sustain housing on their own.

¹ https://www.hud.gov/program_offices/comm_planning/coc/specialCoCNOFO

² <https://www.hud.gov/sites/dfiles/PIH/documents/2022-24pihnotice.pdf>

The ICH Partnerships and Funding Committee has been working to improve the partnership between the CoC and the two local public housing authorities, HOC and Rockville Housing Enterprise. Over the last year, SEPH collaborated with HOC to issue 118 Emergency Housing Vouchers³. The Emergency Housing Vouchers were released by HUD to communities in response to the pandemic. Most of the 118 vouchers went to households graduating from permanent supportive housing who no longer needed intensive support services but still needed a housing subsidy. The remaining vouchers were issued to households through the CoC Coordinated Entry System, a change from the previous HOC policy of pulling referrals from their waitlist. HUD also invited public housing authorities to apply for Stability Vouchers. Both HOC and Rockville Housing Enterprise applied and agreed to fill new vouchers with referrals from Coordinated Entry.

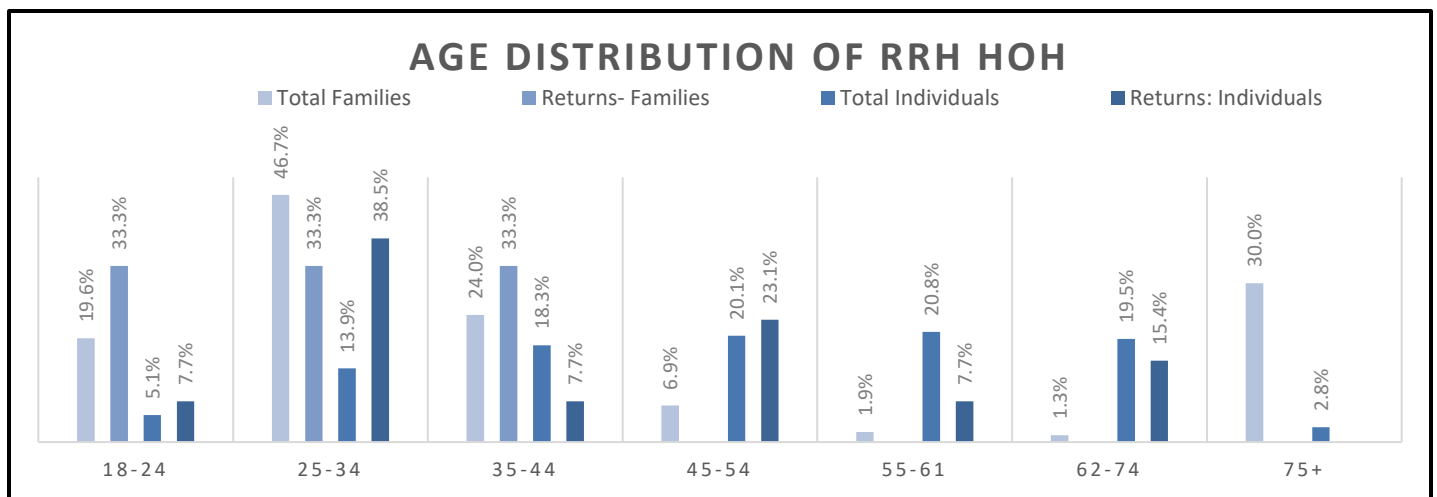
Rapid Rehousing and Short-term Housing Resolution Program

Expanding rapid rehousing (RRH) was identified as a goal in the ICH Strategic Plan to End Homelessness. The CoC received pandemic relief funding from the HUD Emergency Solutions Grant for this purpose. Building off the success of the COVID programs, an additional \$2.5M was included in the FY23 County budget. RRH provides a time-limited housing subsidy (typically 12 months) and intensive support services to help households exit homelessness to permanent housing. The CoC met its goal of expanding the number of RRH units by 350. Using the local common assessment tool, approximately 85% of families with children and half of all adult-only households could benefit from RRH. Not only does an investment in RRH lead to shorter lengths of time homeless for all households but also increases exits to permanent housing. Looking at the period between January 2020 and December 2022, less than 5% of households previously enrolled in RRH have returned to homelessness after exiting RRH. The charts below show who is being served through RRH and who is returning.

| Rapid Rehousing Program Demographics (January 1, 2020 – December 1, 2022) | |
|---|---|
| Total Households Served: 1,236 | Total Households Returning to Homelessness After 24 Months: 52 |

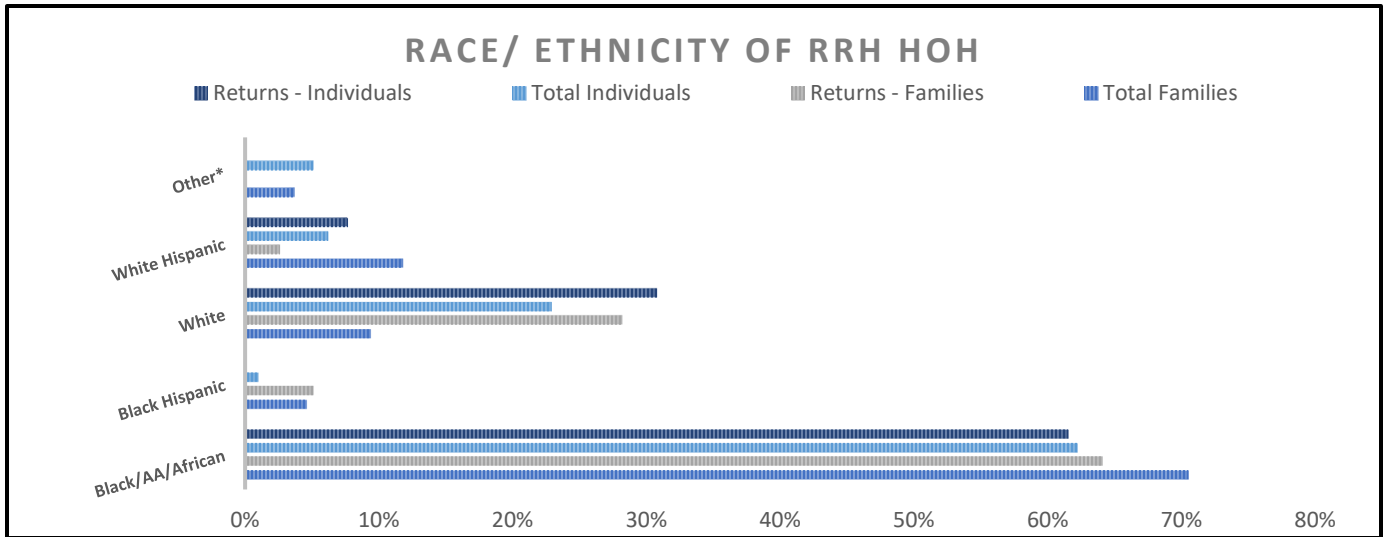
The chart below demonstrates that families where the head of household is between 35 and 44 years of age disproportionately return to homelessness whereas older families are less likely to return. For individuals, people under 35 years old are more likely to return to homelessness.

When reviewing race/ethnicity of RRH participants, white non-Hispanic individuals and families return to homelessness at a disproportionately higher rate. White Hispanic and Black/African American families are less likely to return to homelessness. This data is unexpected given national research on how homelessness impacts people of color and warrants further exploration.



³ <https://www.hud.gov/ehv>

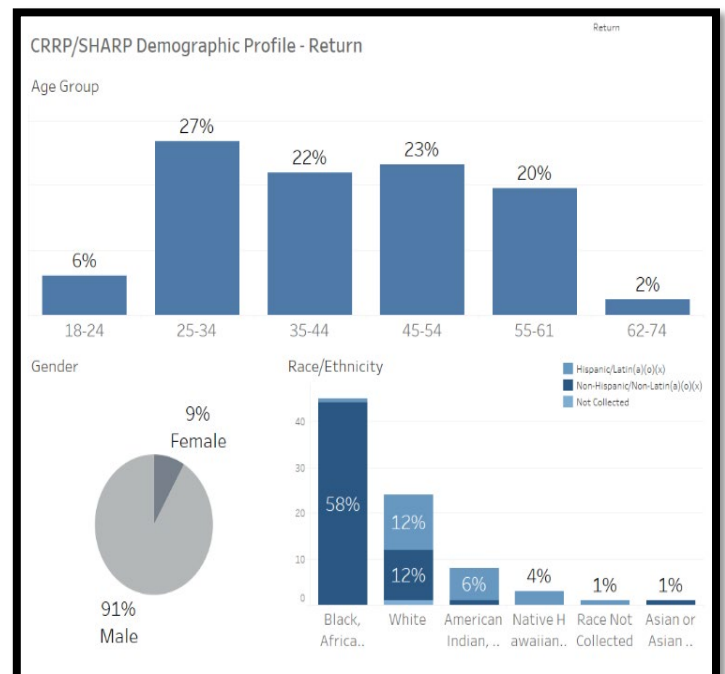
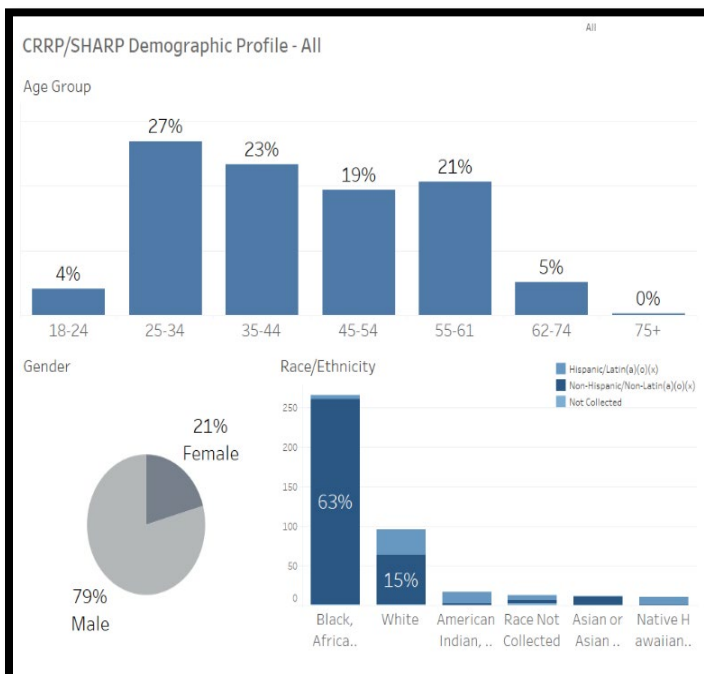
The flexibility of other federal pandemic relief funding created opportunities for the CoC to develop new programs to address the growing population of people experiencing homelessness for the first time with minimal need for on-going support services. The Short-Term Housing Resolution Program or SHaRP provides a six-month deep housing subsidy for households exiting homelessness. All participants must have a minimum six-month lease.



Eligibility is open to anyone in the CoC interested in participating but income cannot exceed 50% AMI. To date (through December 12, 2022) 411 households have been served through SHaRP. Of the 411 served, 19% have returned to homelessness since exiting with the program and 14% are currently experiencing homelessness. The remaining households returned to homelessness but quickly exited back to permanent housing.

The first iteration of SHaRP did not include any support services once in housing. While 81% of SHaRP participants maintain their housing, the ICH is looking for ways to decrease the rate of returns. Beginning in calendar year 2023, the SHaRP housing subsidy will be extended to 12 months and include voluntary housing stability services.

The charts below detail the demographics of who has been served through SHaRP and those who returned to homelessness after receiving the benefit.

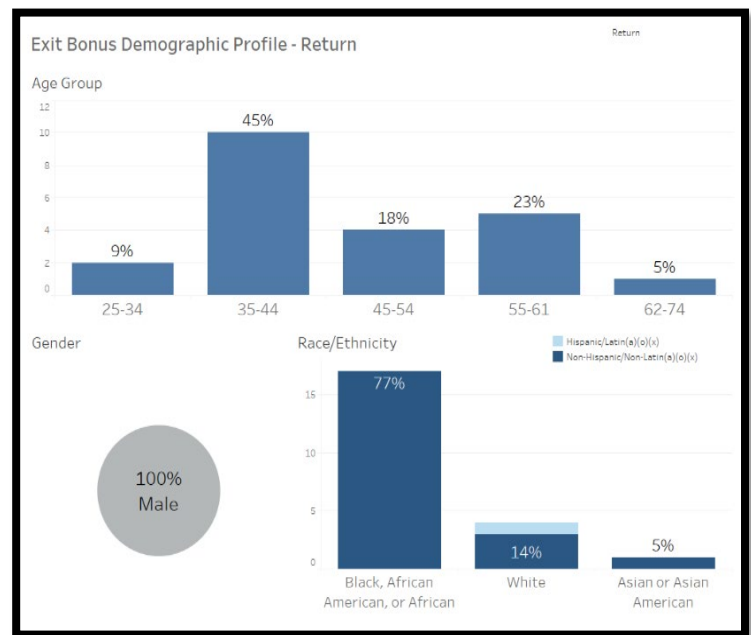
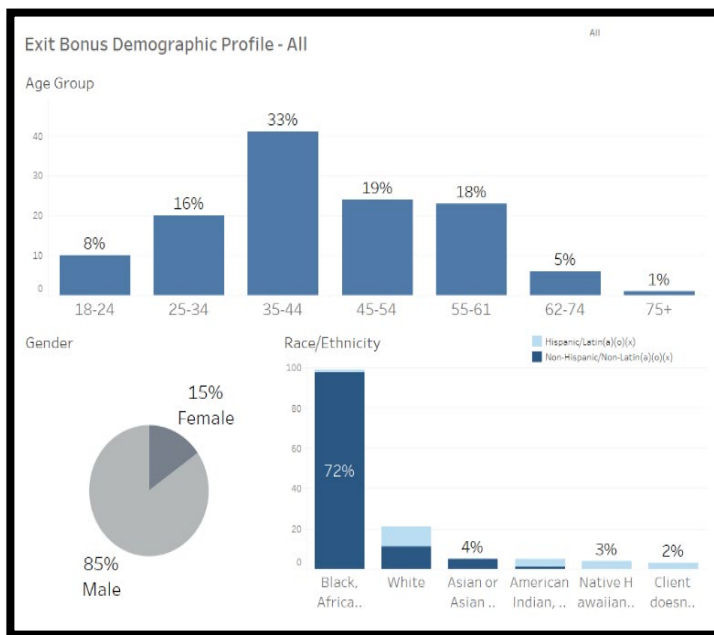


Direct Cash Assistance Programs:

Exit Bonus

Exit Bonus Program offers \$5,000 as a one-time direct cash assistance payment to single adults and \$8,000 to households with minor children exiting emergency shelter. Participants must agree not to return to shelter for at least twelve months and complete a monthly survey. This program was originally designed for newly homeless individuals, less than 6 months, with no known substance or mental health challenges. Eligibility guidelines have been updated to exclude the newly homeless criteria to open the program to those with low needs but have been in shelter longer than 6 months. The CoC follows each program participant for at least 12 months and conducts regular surveys to assess their housing stability, food security, income, and other quality of life indicators including general wellbeing, use of substances, and feelings about the future.

To date, 125 households have been served through the Exit Bonus program with a 17.6% return rate. The charts below display the demographics of program participants.



MoCo Boost – A Guaranteed Income Pilot

In December 2021, as a solution to assist families in permanently exiting poverty, the Montgomery County Council unanimously voted to approve a special appropriation to the FY22 Operating Budget for a Guaranteed Income Pilot Program⁴. Guaranteed Income (GI) is a type of cash transfer program that provides continuous unconditional cash transfers to individuals or households. The pilot program is a public-private partnership that will honor a household's resilience by placing trust in their ability to make their own decisions on what is best for their path forward. MoCo Boost is the first of its kind in the State of Maryland and is supported by the Montgomery County Council, Department of Health and Human Services, Meyer Foundation, Montgomery County Collaboration Council, and UpTogether.

MoCo BOOST is an initiative to provide \$800 a month to 300 Montgomery County households for 24 months. There are no restrictions on what participants can do with the money received through the pilot. One hundred of the 300 participants were selected from the homeless CoC. Recognizing that households served in Rapid Rehousing (RRH),

⁴ https://www2.montgomerycountymd.gov/mcgportalapps/Press_Detail.aspx?Item_ID=39676

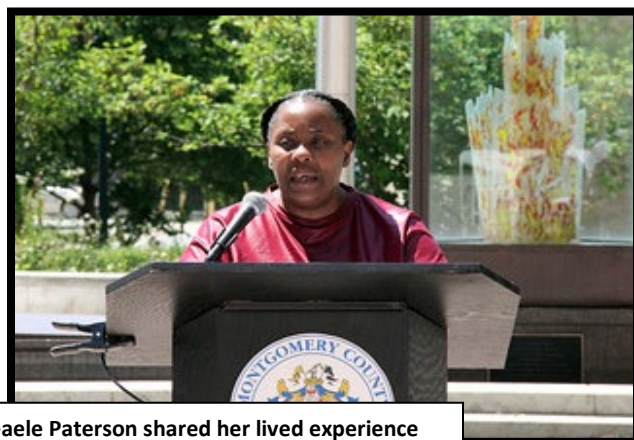
Exit Bonus, and Rapid Resolution (ShaRP) are more likely to return to homelessness compared to those households served in Permanent Supportive Housing, this became the pool of participants for selection. Of the 100 slots, 35 were families with children who either had a length of stay in rapid rehousing greater than 12 months or had exited RRH within the last 12 months without an ongoing housing subsidy. The remaining 65 slots were designated for individuals currently in a rapid rehousing program for more than one year or exited RRH, Exit Bonus, or SHaRP within the last 12 months. The last household was enrolled in the pilot late this fall.

For more information about MoCo Boost, visit their website at <https://mocoboost.org/>.

COMMUNITY OUTREACH AND PUBLIC ENGAGEMENT

The ICH was involved in a variety of community outreach events to engage the public. Due to restrictions on and potential risk posed by public gatherings because of COVID-19, some planned events were postponed until 2023. Most notably, the **Nadim Khan Memorial Homeless Resource Day** has been postponed until the spring of 2023.

Public engagement events in 2022 include the following:



At the 2022 Community Memorial Service, Micheaele Paterson shared her lived experience working with the Continuum of Care to end homelessness for her family.

The fourth annual **Community Memorial Service** was held June 15, 2022. This event brings County officials, nonprofit leaders and people experiencing homelessness to honor and remember the lives lost in the homelessness continuum in the last year. This year the community recognized the passing of 53 formerly homeless individuals and 7 unhoused neighbors. Three people with recent lived experience of homelessness shared their stories of resilience.



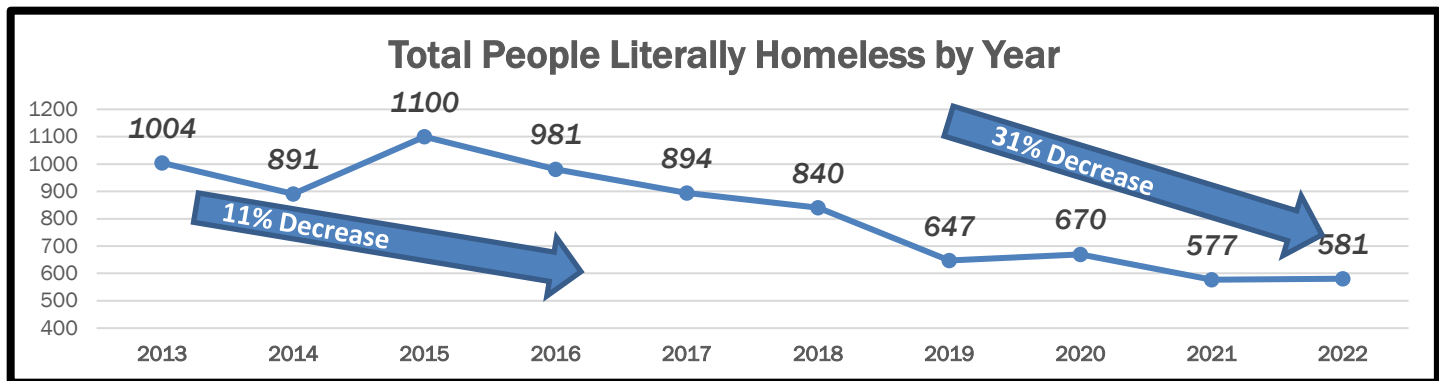
Housing Initiative Program staff members, Joy Pitt, LaToya Douglas, and Saran Diallo sharing remarks at the Landlord Appreciation Event.

ICH and SEPH staff sponsored a **Landlord Appreciation Event** for landlords who have partnered with the CoC to house those in our community experiencing a housing crisis. The event highlighted four dedicated landlords and the SEPH team presented them with awards. Representatives from the Office of Landlord and Tenant Affairs were also in attendance and provided helpful information to guests.

Representatives of the ICH engaged a variety of stakeholder groups by providing education on issues surrounding homelessness. These groups include the Montgomery Cares Advisory Board, Commission on Human Rights, funding collaboratives, multiple civic associations, the Renter’s Alliance, and many others.

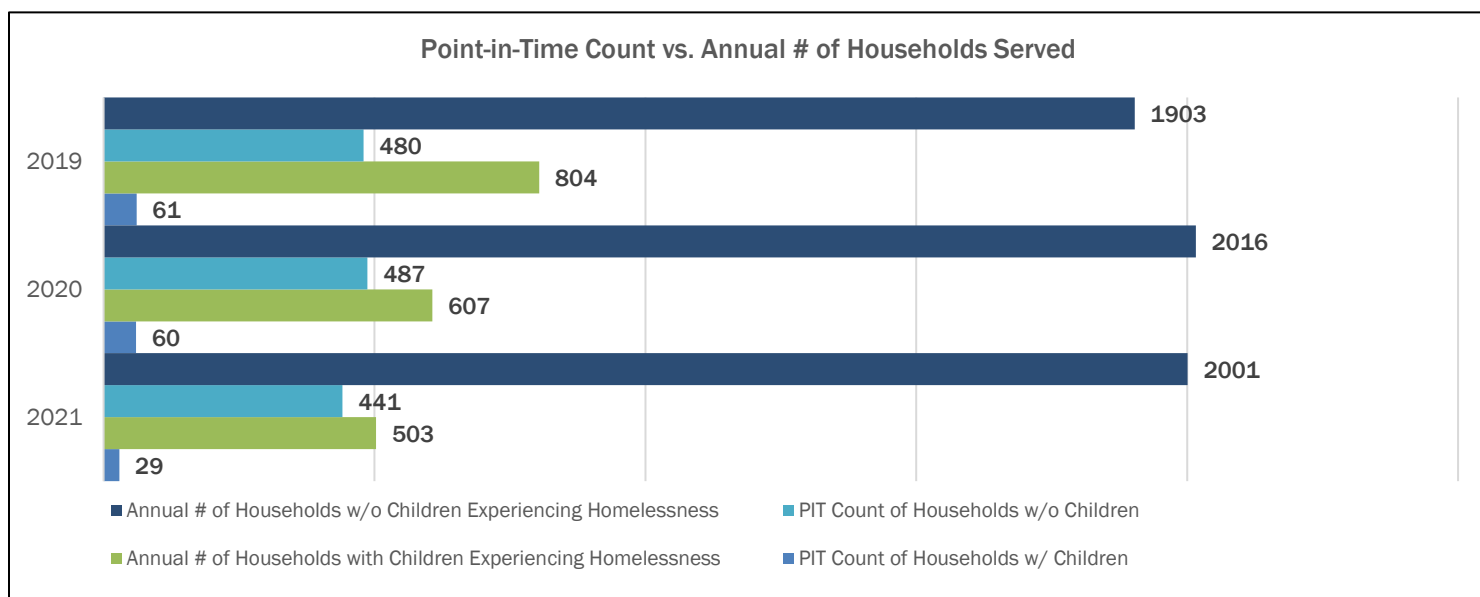
DATA AND TRENDS REGARDING HOMELESSNESS IN MONTGOMERY COUNTY

Point-in-Time Count



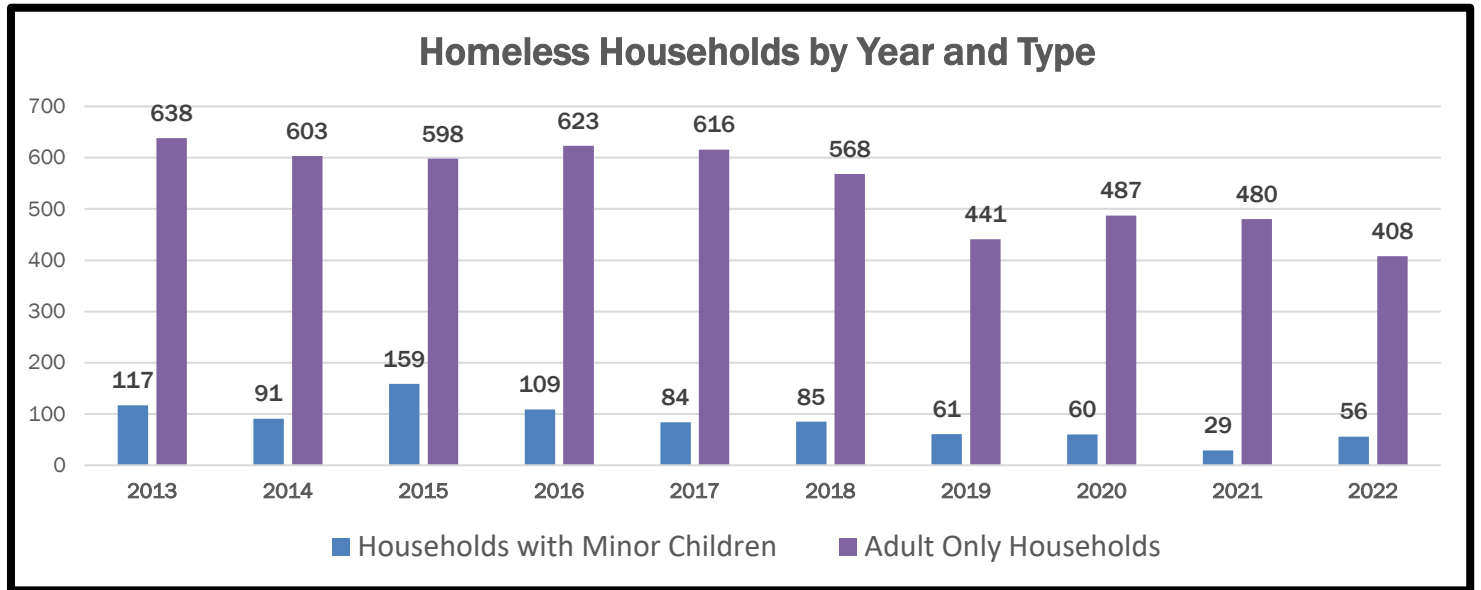
Montgomery County’s homeless Point-in-Time survey was conducted on January 26, 2022. A total of 581 homeless persons were counted that day, an increase of 0.6% from 2021 and a decrease of 13% from 2020 count. The greatest one-year decrease occurred between 2018 and 2019 of 22%. In the last ten years, overall homelessness has decreased by 41%, including a 36% reduction in single individuals and a 50% decline in family homelessness. The most significant decreases have occurred in the last five years and can be attributed to a population specific approach that seeks to connect households who become homeless to the most appropriate housing intervention, targeting prevention resources to those most likely to become homeless and implementing homeless diversion or rapid exit from shelter for those households newly entering the system.

While the Annual Point-in-Time survey highlights trends in homelessness, it does not tell the whole story. The snapshot provided by the Point-in-Time count has the potential to minimize the prevalence of homelessness in our communities. Another way to measure success in the goal of ending homelessness is to review the annual number of households served by the homeless continuum. The chart below shows the contrast of the Point-in-Time count and the number of households who experience homelessness each year. Of note, the number of families entering the homeless continuum has decreased by 37% from 2019 to 2021. Although the number of individuals has increased slightly, the substantial expansion of year-round shelter beds would have predicted a steeper rise in the number served annually. In 2021, the Point-in-Time count was less than 20% of the number of households who experienced homelessness within the year.



Life Experiences and Vulnerabilities (Subpopulations)

The effects of the pandemic are illustrated by the high percent of households reporting vulnerabilities, specifically serious mental illness, and co-occurring disorder. Of all the individuals surveyed during this year’s enumeration, 34% reported having a serious mental illness and 14% reported a co-occurring disorder. Throughout the pandemic, community behavioral providers primarily focused on telehealth with minimum face-to-face services and treatment. Many individuals with behavioral health challenges who are experiencing homelessness struggle to access treatment through traditional methods. Treatment is best provided when the services go to where people are including emergency shelter and on the streets.



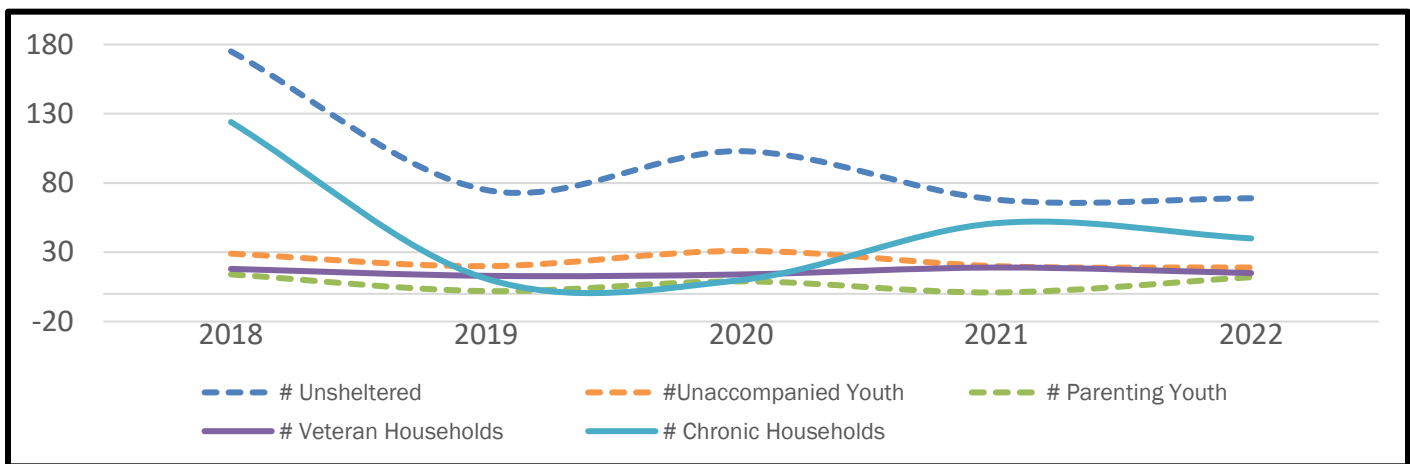
In addition, there was a prevalence of individuals reporting physical disability, chronic health conditions, and being formerly institutionalized. The percent of individuals reporting a physical disability, or a chronic health condition has been high for the last two years. In 2021, 25% of individuals reporting a physical disability compared to 22% in 2022. There is a similar trend for those reporting a chronic health condition at 16% in 2021 compared to 13% in 2022. While it is not clear the cause, the rise in health issues and physical disabilities may be related to the pandemic policy of issuing early release for incarcerated individuals. It is notable that 13% of individuals reported entering homelessness after being formerly institutionalized in the 2022 enumeration.

| Households with Children | | |
|--|------------------|------------|
| Vulnerability/ Experience | # Self Reporting | % Of Total |
| Substance Use Disorder | 37 | 9% |
| Serious Mental Illness | 138 | 34% |
| Co-Occurring Disorder | 58 | 14% |
| HIV/AIDS | 6 | 1% |
| Domestic Violence History (any time in the past) - DVH | 50 | 12% |
| Domestic Violence (this episode) -DVC | 20 | 5% |
| Physical Disability | 91 | 22% |
| Chronic Health Condition | 52 | 13% |
| Limited English | 32 | 8% |
| Foster Care (5) | 23 | 6% |
| Formerly Institutionalized | 51 | 13% |

The pandemic has had similar effects on the life experiences and vulnerabilities of adults in households with children. Over the past 2 years, the percent of adults in families reporting serious mental illness is high at 17% in 2021 and 11% in 2022. Episodes of domestic violence are also on the rise. In 2021, 47% of adults in families reported a history of domestic violence and 32% report a current episode of domestic violence. In 2022, 43% of adult in families report a history of domestic violence and 13% report a current episode. Victim service providers have seen lower numbers of people seeking emergency shelter due to violence in the home. They suspect the isolation experienced in the pandemic and the economic pressures on families has contributed to low rates of reporting. This may also explain the high rate of families with a history of domestic violence.

| Adults in Households with Children | | |
|--|------------------|------------|
| Vulnerability/ Experience | # Self Reporting | % Of Total |
| Substance Use Disorder | 1 | 1% |
| Serious Mental Illness | 8 | 11% |
| Co-Occurring Disorder | 0 | 0% |
| HIV/AIDS | 0 | 0% |
| Domestic Violence History (any time in the past) - DVH | 30 | 43% |
| Domestic Violence (this episode) -DVC | 9 | 13% |
| Physical Disability | 4 | 6% |
| Chronic Health Condition | 1 | 1% |
| Limited English | 3 | 4% |
| Foster Care (5) | 1 | 1% |
| Formerly Institutionalized | 0 | 0% |

Montgomery County has made it a priority to focus on certain subpopulations (chronic, Veteran, and the unsheltered) who tend to have the most significant needs. In the last 5 years, the CoC has reduced unsheltered homelessness by 48% and chronic homelessness by 68%. It should be noted that chronic status is based on self-report and has not been verified to meet the federal definition of chronic. See chart below.

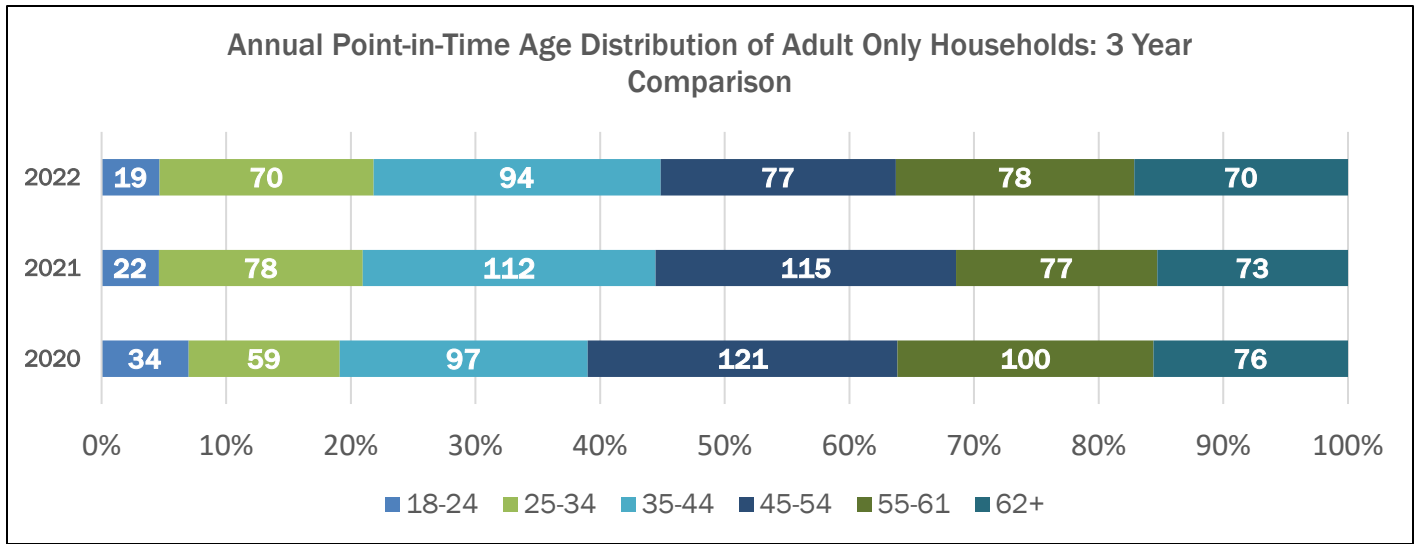


Age Distribution of Adult Only Households

There continues to be many older adults entering the homeless system. More than half (55%) of all adults without children are over 45 years old, 36% are over 55, and 17% are 62 years or older. The growing number of older adults in the homeless continuum is concerning. Research states that people experiencing homelessness die an average of 30 years younger than the average person in the United States. This means that individuals with a history of homelessness age at an increased rate, so those 45 years old may have similar health issues as someone in their 70s. Interestingly the

pandemic has led to an increase in the number of people under 45 years old entering homelessness often for the first time. Between 2020 and 2022, the number of adults under 45 has risen by 15%.

Year-Round and Winter Inventory of Beds



The CoC continues to provide emergency shelter to households with minor children through 3 year-round family shelters, one domestic violence (DV) shelter, and limited hotel subsidies used as overflow. During hypothermia, additional overflow shelter is provided via a non-profit organization. During this year’s enumeration, a total of 48 households with minor children were residing in emergency, overflow shelter, or DV shelter and 8 households in transitional housing.

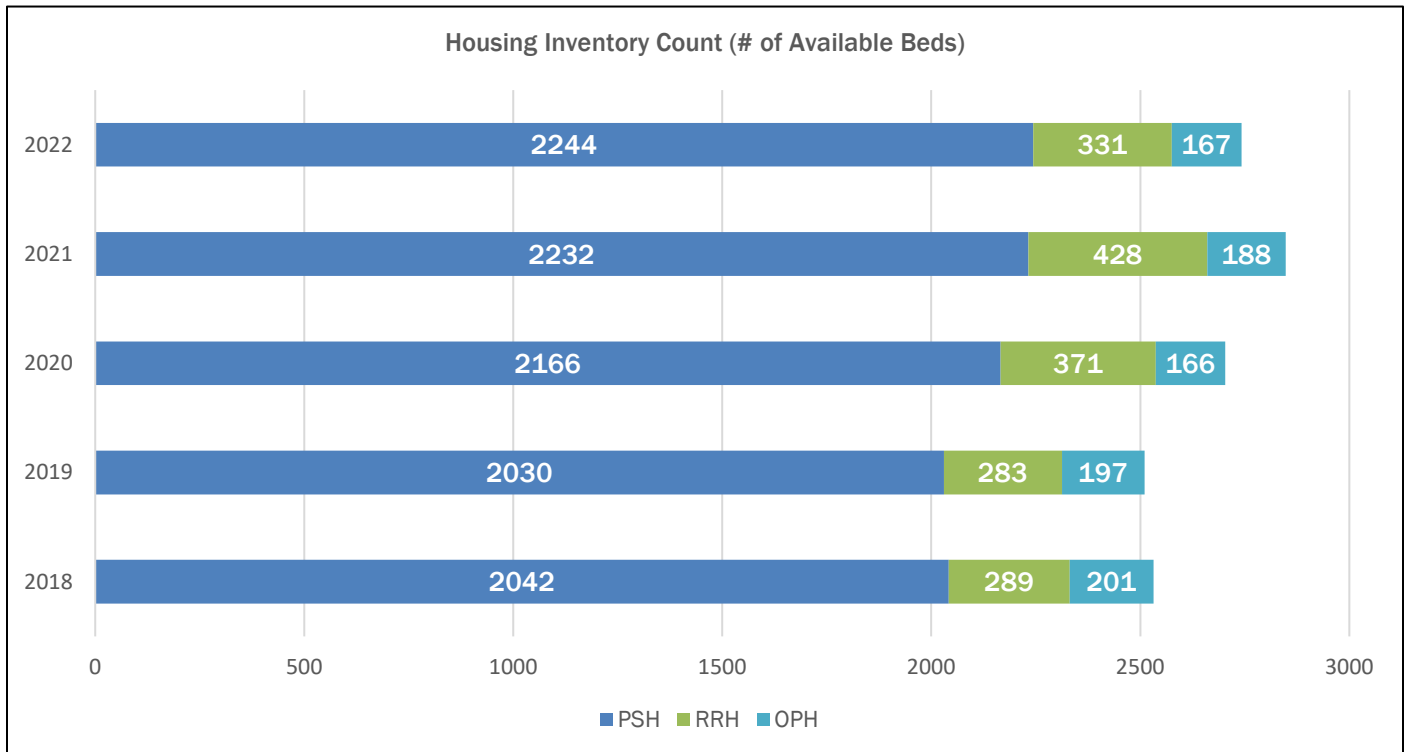
Emergency shelter capacity for adults without children has increased to 300 for year-round capacity. This includes the DV shelter with 5 beds designated for this household type, 3 designated as medical beds, and 2 designated for older adults or people with disabilities. Due to the pandemic, the CoC has changed the shelter strategy to increase the number of year-round beds. Additionally, rented hotel space has been used to create 100 non-congregate shelter beds for vulnerable adults. On the day of the 2022 enumeration, there were 295 emergency shelter and overflow beds occupied by single adults: a decrease of 21% from 2021.

In early 2022 but after this year’s enumeration, Montgomery County increased the number of medical beds in shelter as well as 18 beds in the new Montgomery County Medical Respite Program. This is in direct response to the growing number of people with serious medical conditions and the increase in hospital discharges to shelter.

| MONTGOMERY COUNTY’S YEAR-ROUND AND WINTER INVENTORY OF BEDS | | | |
|--|-------------------------|-----------------------|------------|
| | Year-Round Beds for | | |
| | Households w/o Children | Households w/children | Total Beds |
| COVID19 Social Distancing Expansion of shelters, Seasonal, and Overflow | 73 | 73 | 146 |
| Year- Round Emergency Shelter Bed | 323 | 113 | 436 |
| Transitional / Haven Beds | 53 | 23 | 76 |
| TOTALS | 449 | 209 | 653 |

Permanent Housing Inventory Count

From 2018 to 2022, the number of units of permanent housing in Montgomery County increased by 8% from 2532 to 2742. Unfortunately, the number of permanent housing units decreased by 4% from the 2021 enumeration. The drop in permanent housing is attributed to a decline in the number of people housed in Rapid Rehousing program on the day of the enumeration. The housing market has become tougher to navigate even with a housing voucher. With the end of pandemic eviction protections and rent stabilization efforts, landlords are responding by raising rents, not renewing existing leases, and increasing barriers to housing despite Montgomery County laws on source of income protection and “ban-the-box” on criminal histories. On average, it is taking four months from the time of intake into Rapid Rehousing to signing a lease. Because Maryland does not have “just cause eviction” legislation, many households in permanent supportive housing must relocate due to a non-renewal of their leases. This puts additional strain on the housing locator network as vacancy rates are incredibly low.

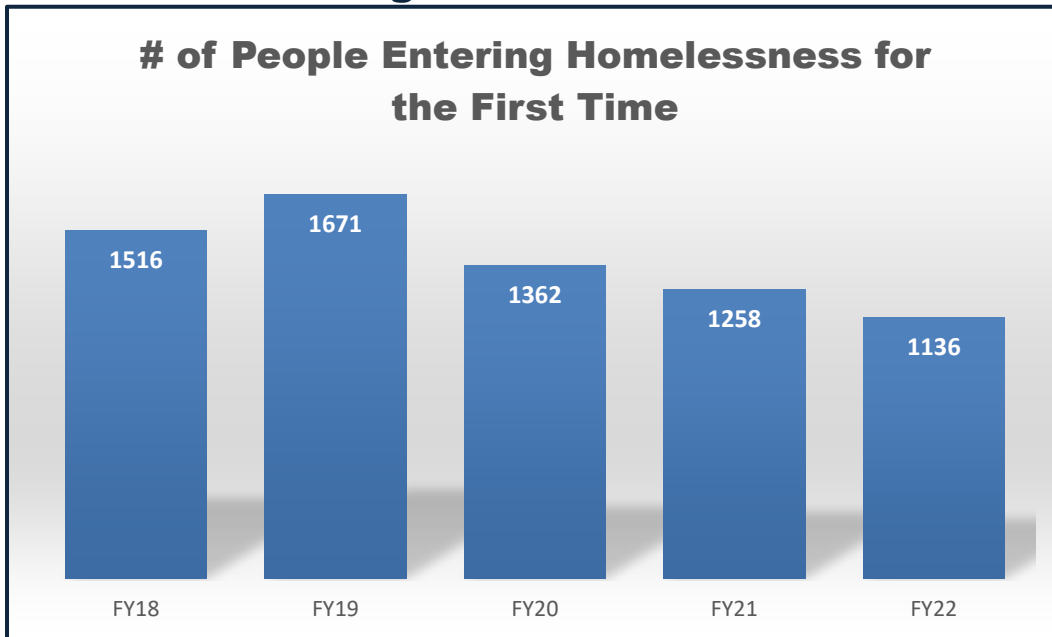


Nonetheless, the CoC remains optimistic about continuing to increase the number of permanent housing units. Montgomery County was awarded funding through the federal Department of Housing and Urban Development (HUD) for a site-based permanent supportive housing program for ten individuals with tri-morbidity of somatic, mental health and substance use challenges. Since 2018, Montgomery County has participated in the state Department of Health Assistance in Community Integration Services (ACIS) pilot that uses the 1115 Medicaid Waiver to pay for supportive services. The CoC has requested an increase of 100 ACIS slots for individuals with high needs.

SYSTEM PERFORMANCE

In alignment with the Built for Zero framework and HUD’s requirements, the ICH also measures success by monitoring overall system performance. All measures are put in the context of making homelessness a rare, brief, and one-time only experience. Data is collected and reported to HUD annually based on the federal fiscal year. Despite the impact of the pandemic, the CoC has largely maintained the gains made over the past few years.

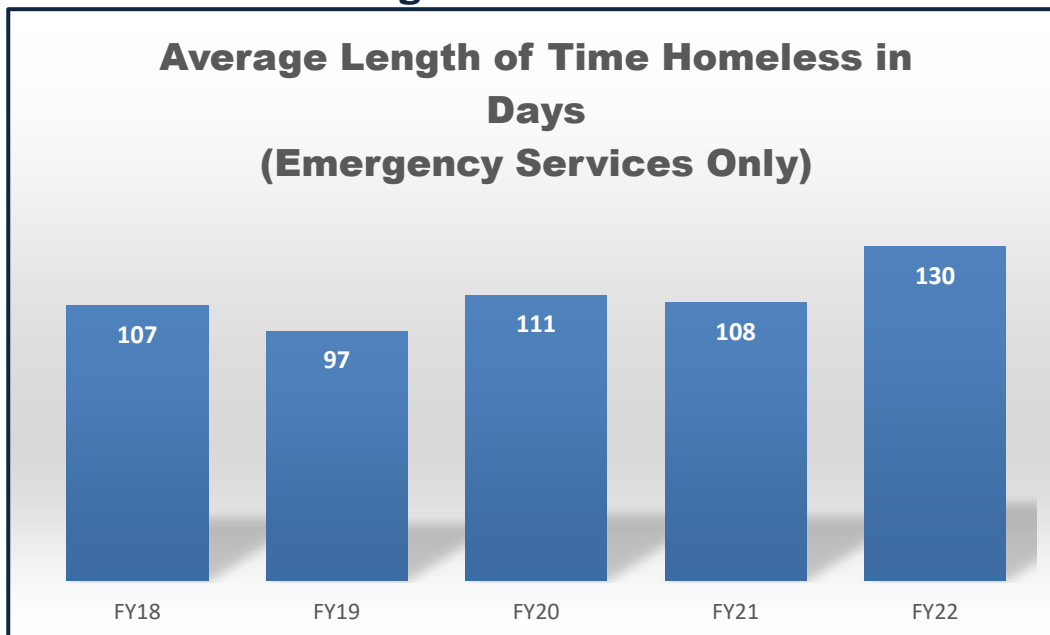
Making homelessness RARE



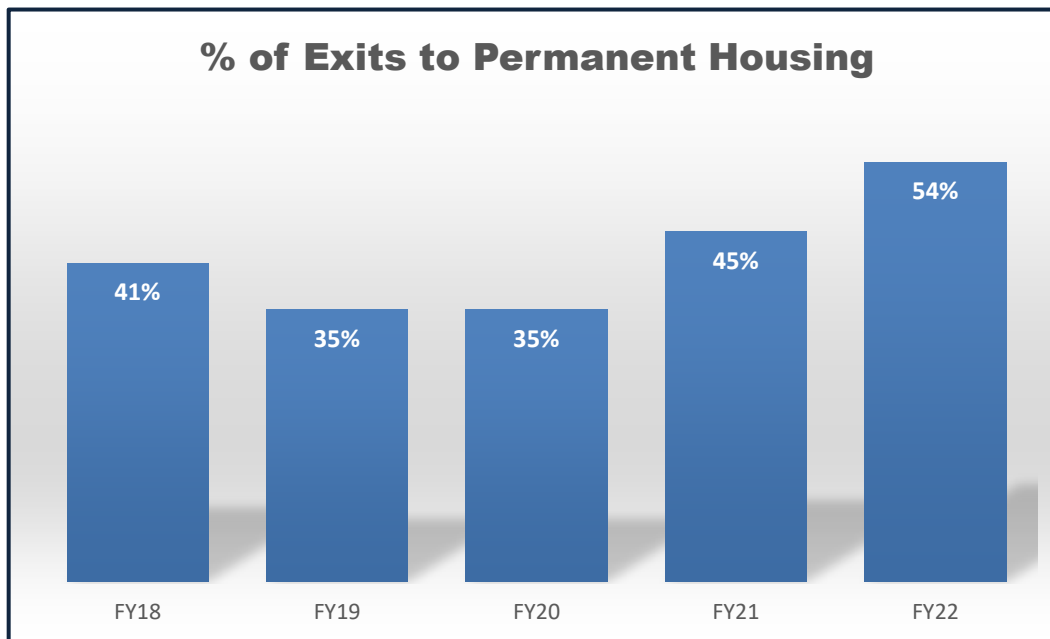
5-Year Trend: 25% Decrease

The Federal FY22 system performance data showed a decline in the number of people entering homelessness for the first time. This can be attributed to CoC's targeted outreach and prioritization of eviction prevention services to neighborhoods with the greatest community-level risk factors for homelessness as well as the implementation of a centralized shelter intake and homeless diversion program for adult-only households. Between FY20 and FY22, the number of people entering homelessness for the first time decreased by 17% despite the lifting of most the pandemic related tenant protections.

Making homelessness BRIEF



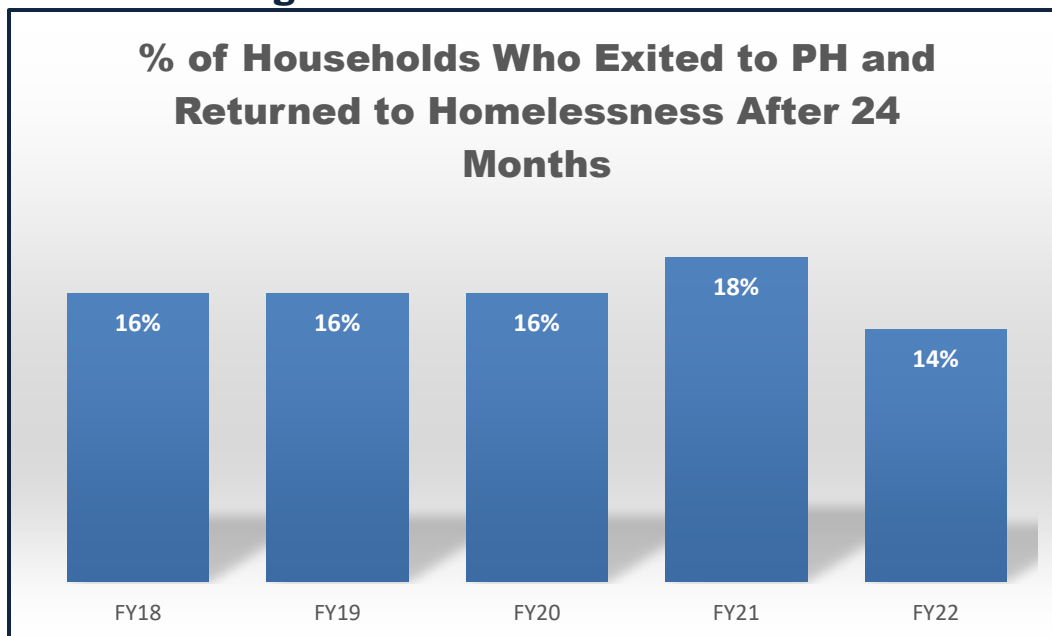
5-Year Trend: 18% Increase



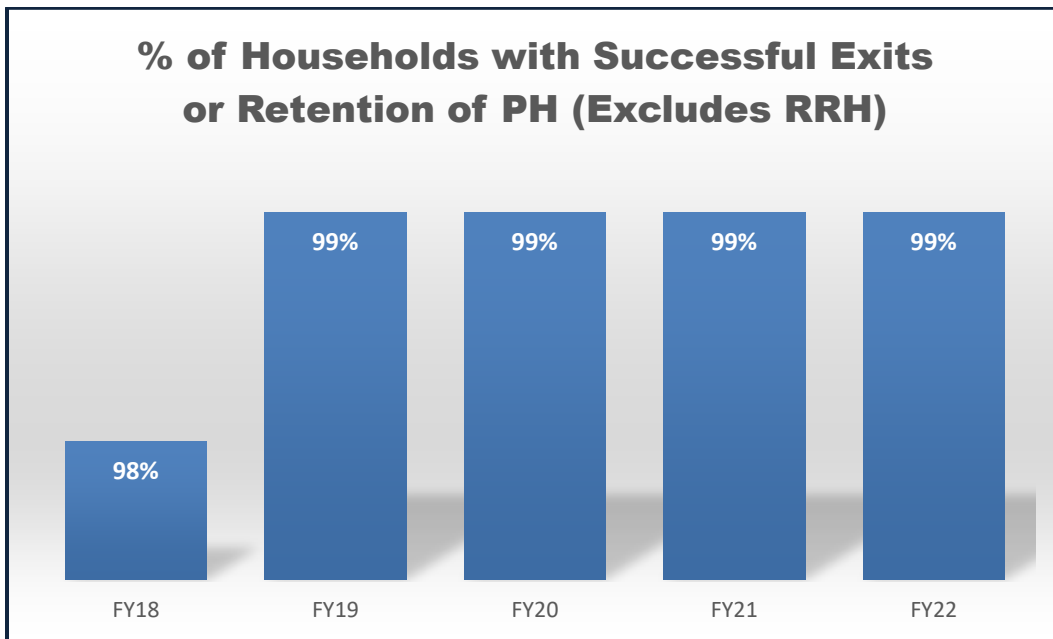
5-Year Trend: 32% Increase

With the advent of new programs like Exit Bonus and SHaRP, more households have housing options available to them. This is evidenced by the increase in the percent of households exiting to permanent housing. Between FY20 and FY22, the percent of exits to permanent housing more than doubled at 54%. Unfortunately, the length of time people in emergency shelter experience homelessness increased by more than 20 days. The CoC is also seeing delays in getting people leased up after acceptance into a housing program. The housing market is tight with extremely low vacancies rates, rising rents, and lack of access for households exiting homelessness. There continues to be stigma associated with homelessness and fear that households from the CoC will not make good tenants. Other strategies are being developed including more efficient ways to secure identification documents to speed up the housing process to meet the Built for Zero goal of reaching an average length of time of 45 days or less.

Making homelessness **ONE-TIME ONLY**



5-Year Trend: 13% Decrease



The CoC continues to maintain a very high level of housing retention. The commitment to rehouse and transfer households to a program that is better equipped to serve them allows the CoC to avoid termination and eviction for most participants. Last year, the CoC saw an increase in the number of households returning to homelessness from a permanent destination, but this performance measure is now trending in the right direction with a 22% decrease from FY21 to FY22. SEPH was able to incorporate feedback from the program participants and CoC line staff to make adjustment to the new programming to reduce the likelihood for returns. The ICH is hopeful that the program adjustments, improved care coordination with other systems, and benefits of the Guaranteed Income Pilot will bring this measure closer to the Built for Zero goal of a 5% or less return rate.

GAPS IN THE CONTINUUM OF CARE

The Montgomery County CoC has developed a diverse range of services to end and prevent homelessness in the County, yet gaps remain. Many of the gaps identified have either been a direct result of the pandemic or been exacerbated by COVID-19. These include:

- **Insufficient care coordination with other systems of care:** The CoC serves many households with significant behavioral and physical health challenges in permanent housing programs. To ensure housing stability, individuals need to receive community-based health services including Assertive Community Treatment, crisis services, and home health care. As a result of the pandemic, other systems of care have shifted to primarily telehealth services. Individuals in permanent housing do not have adequate technology or capacity to be successful with only telehealth services.
- **Dearth of affordable housing and housing vouchers for extremely low-income homeless individuals and families** (i.e., households at or below 30% of the area medium income). The average rent in the County has increased by over 25% in the past year making access to housing even more limited.
- **Lack of access to affordable and market rate housing:** The ICH recognizes that households experiencing homelessness face many barriers to accessing housing. People experiencing homelessness are disproportionately people of color, particularly Black or African American. They are denied housing based on poor credit, criminal backgrounds, and poor rental history, all exacerbated by structural racism. Unfortunately, the route to investigating these denials is too cumbersome for many individuals.
- **Lack of services to meet the needs of a growing aging population in permanent housing programs:** While permanent supportive housing and rapid rehousing provide wraparound support services, the ICH has seen a

need for a higher level of medical care to allow people to age in place. Often older adults in permanent housing not only have somatic needs but also struggle with behavioral health challenges as well. Where in-home care exists, formerly homeless older adults unable to access services due to the complexity of needs.

FUNDING RECOMMENDATIONS

In support of the CoC's Ten-Year Plan to End Homelessness, the ICH recommends the following:

- Increasing the housing supply by funding the development of deeply affordable housing to extremely low-income families (those below 30% of area median income) who do not have high service needs.
- Provide \$2 million in additional funding for all scattered site Permanent Supportive Housing programs to account for the significant increases in rents.
- Provide \$10 million in funding for Eviction/Homeless Prevention to partially replace the loss of federal funding and meet the demand as evictions in the County are increasing.
- Provide \$750,000 in funding to DHHS, Aging and Disability Services for therapeutic home care support in shelters and previously homeless clients in permanent supportive housing (PSH). This request will be a nontraditional approach to providing an equitable opportunity for this vulnerable population to age in place with support, decrease hospitalizations and overuse of emergency room visits, and avoid an increase in homelessness among our seniors and individuals with significant medical and psychiatric conditions.
- Execute on the opportunity to use federal COVID funding to purchase a hotel portfolio to re-imagine as extremely affordable micro-units. Many individuals experiencing homelessness have regular income but are unable to find housing that is affordable to them. By providing micro units at an extremely affordable rate these individuals will be able to self-resolve and end their experience with homelessness. The ICH envisions a facility with individual, furnished unit with private bathrooms and limited kitchen facilities. Community space can be programmed by partner nonprofits to bring community-based services to the residents. With the facilities already identified, minimal investment is needed to prepare for this new use.

LEGISLATIVE OR REGULATORY CHANGES REQUESTED

The ICH recommends stronger fair housing policy and legislation that protects individuals and families experiencing or at risk of homelessness against discrimination based on criminal history, bad credit and poor rental history. Montgomery County has made great strides in promoting equity in housing by protecting against discrimination based on source of income, but people are still denied housing based on poor credit, criminal backgrounds, and poor rental history which are all exacerbated by structural racism. Unfortunately, the route to investigate these denials is too cumbersome for many individuals. By limiting a landlord or property manager's ability to automatically deny applicants, we can begin to address the significant disparities Black households experience in obtaining and sustaining permanent housing as evidenced by the high rates of Black people (60%) in the homeless continuum.

- Support "just cause" eviction legislation at the state level
- Advocate that HOC review eligibility criteria on criminal backgrounds and rental history
- Develop an independent pathway to investigate housing discrimination and illegal practices at housing complexes that is not client driven

To increase the availability of affordable housing, the ICH encourages the commitment of dedicated, set aside units

or a local homeless preference in multifamily housing developments using federal, state, or local financing and public housing authorities.

CONCLUSION

The Montgomery County CoC's goal is to end homelessness for all in our community by making homelessness a rare, brief, and one-time only experience. While resources have been abundant due to the pandemic, many have already expired or will soon be fully expended. Unfortunately, the need of people experiencing and at risk of homelessness will continue for years to come. The ICH urges the County to continue its commitment to end and prevent homelessness through strategic investment in critical resources. Such strategic investment produced a more effective system that ultimately succeeded in ending Veteran homelessness and reducing chronic homelessness by more than 90%, despite the impact of COVID-19. To sustain these gains, improve overall system performance, and mitigate the likely rise in homelessness, additional targeted funding will likely be needed to create an end to all forms of homelessness.

There is reason to be optimistic that Montgomery County will reach functional zero for all populations. In December 2022, the U.S. Interagency Council on Homelessness released the new [ALL IN: Federal Strategic Plan to Prevent and End Homelessness](#) and the Biden Administration has made ending homelessness a "top priority". Unprecedented federal resources are being deployed to local communities and states including housing vouchers and funding for CoC services. This new plan, unlike all proceeding plans, details the role the federal government plays in breaking down and rebuilding inequitable and ineffective systems that create and exacerbate the prevalence of homelessness. The road ahead is long and hard, but with collaboration and funding from local, state, and federal government, we can do it. We will end homelessness for all in Montgomery County by the end of 2025.