



2021

CT Point-in-Time Count Report



OUR MISSION:

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

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

Homeless “Point-in-Time Counts” across the country are used as one of the primary data sources to inform federal funding for programs and services to end homelessness and to track progress against established goals.

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Dear Friends,

The Connecticut Coalition to End Homelessness (CCEH) is pleased to share the findings for the federally mandated Point-in-Time (PIT) count that took place during this unprecedented year. This report shows the number of people in our state who experienced homelessness on a single night in January. The count includes two main groups: those who were sheltered and those who were unsheltered, meaning living in places not meant for human habitation such as in cars, under bridges, or on the streets.

The total number of people experiencing homelessness, both sheltered and unsheltered, for the 2021 PIT (Tuesday, January 26, 2021) has once again declined when compared to last year's total; there was an 11% decrease over the past year for a total of 2,594 people. This is the eighth year in a row that the state's PIT numbers have declined when comparing counts from the date of PIT year-over-year. This is indeed good news and coincides with our year-round data that is showing a 16% overall decline in homelessness in our state.

The unsheltered numbers, however, have increased this year. Why? One potential reason is that this year HUD allowed states and Continuums of Care (CoCs) to leverage data in the Homeless Management Information System (HMIS) due to the COVID-19 safety concerns over canvassing the state with volunteers. This resulted in more accurate data since the unsheltered counts were based on records in the statewide database and verified by professional outreach staff who work with this population on a year-round basis.

Historically, the criteria defined by the U.S. Department of Housing and Urban Development (HUD) are narrow and do not include anyone who has experienced homelessness outside of this 24-hour window. Given that this is a transient population, this affects the count.

For example, in previous years, individuals known to be unsheltered by professional outreach staff but who were not sighted by the volunteers on the night of PIT were not included in the count per HUD guidance. This year, the outreach staff updated records in the HMIS resulting in a more complete and accurate count. Another factor that affected the count was the snow that fell across the state on the night of PIT, and many who usually sleep outside sought shelter in one of the hotels or motels that opened during COVID-19 to assist with the decompression of shelters. This meant that those individuals were not included in the PIT count as unsheltered but were considered sheltered because they had a roof over their head on the night of PIT even though many of them returned to the streets the following night. This example again reflects the fluctuation due to the guidance. Although the HUD guidelines were followed this year, the increase in the unsheltered count is likely because professionals confirmed who was unsheltered on the night of the count using data in the HMIS.

Assessing our unsheltered homeless population this way is like comparing the student population in a school each year by taking attendance on a single day. There are many factors that could affect those numbers, including if there was a snow day, a holiday, or if the flu was going around and many students called out ill. While it serves as a benchmark, it does not tell the whole story. The point is that while the PIT has value for a one-night annual comparison, it does not accurately represent the holistic picture of homelessness for this transient population whose totals can fluctuate throughout the year, particularly for the unsheltered. CCEH is collaborating with providers across the state to develop a standardized and complete means to record the unsheltered population and will be updating our dashboards to reflect these numbers throughout the year.



As always, we are thankful for all the providers and frontline staff who tirelessly support this population each day. The COVID-19 pandemic certainly introduced unparalleled challenges as well as opportunities to revise and pivot, often on short notice, how to best serve and protect those experiencing homelessness in our state. They are the true heroes in this story.

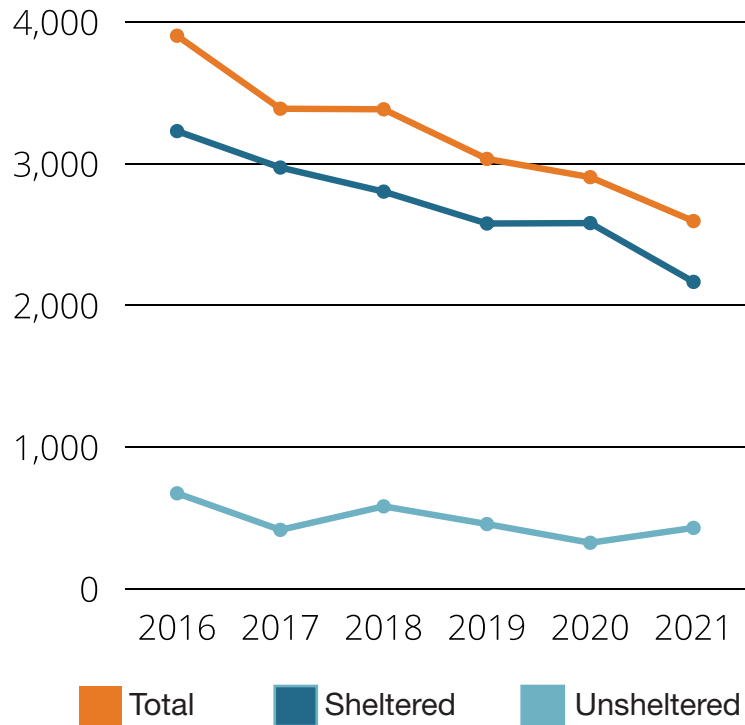
We are also grateful for the support of our sponsors and funders who invest in the PIT count each year. A special thanks to the Connecticut Department of Housing, the Connecticut Department of Mental Health and Addiction Services, and the Hartford Foundation for Public Giving.

In gratitude,

A handwritten signature in black ink that reads "Linda Casey". The signature is written in a cursive, flowing style.

Linda Casey, MS, MPH
Director of HMIS and Strategic Analysis

**Figure 1: 2021 PIT
 Overall Homeless Population**



Overall Homeless Population

2,594

2021 PIT Total

-10.7%

Change from 2020

Overview

The results from this year's PIT show a decline in both the sheltered individual and family populations yet showed an increase in the unsheltered individual population. No families were found to be unsheltered. This marks the eighth year in a row that the overall PIT count has declined in our state.

Since 2007, PIT tallies have shown a decline in the single-night counts of homelessness in our state by 42%. Family homelessness declined by 24% and there was a 31% decline in children experiencing homelessness on the night of PIT year over year.

This year's unsheltered PIT count, however, reflects a 32% increase in this population. The unsheltered population cannot be compared to previous years' results as we leveraged a different methodology due to safety concerns over COVID-19. This year we used data in our Homeless Management Information System (HMIS). The unsheltered data is managed by professional outreach teams who are familiar with this population and engage with them year-round. The method employed this year provided accurate data on demographics, disabling conditions, and chronic homelessness since it is entered and verified by outreach staff throughout the year. Given the restrictions in the HUD reporting requirements for the unsheltered, it is likely that these numbers are often under-representations of this population in the PIT.

Key Findings

Overall, **there was an 10.7% decline in homelessness** when compared to the previous year's data on a single night in January. **We identified 2,594 people experiencing homelessness** on the night of Tuesday, January 26, 2021.

Visit cceh.org/data/interactive/PITresults for an interactive dashboard to review all PIT results since 2016.

Figure 2.1: Race
Overall Homeless Population

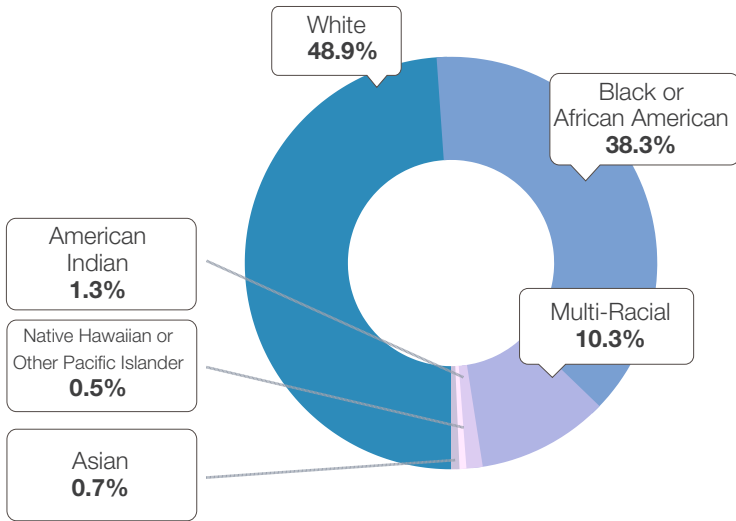


Figure 2.2: Ethnicity
Overall Homeless Population

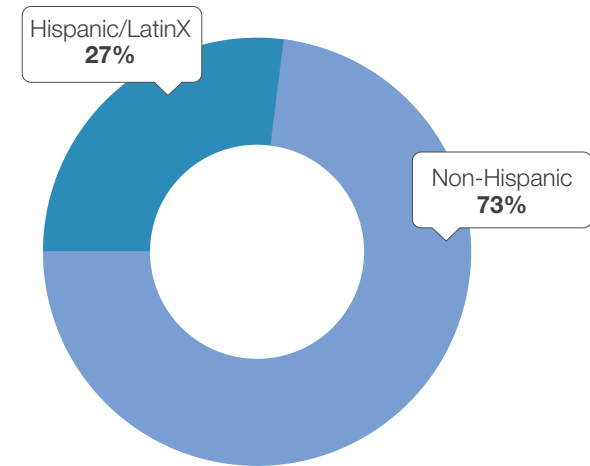


Figure 2.3: Age
Overall Homeless Population

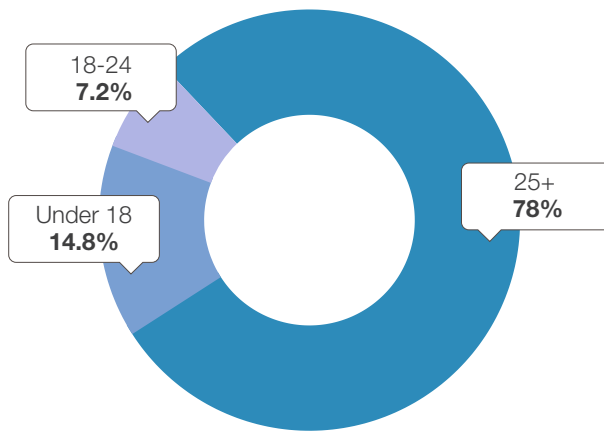


Figure 2.4: Gender
Overall Homeless Population

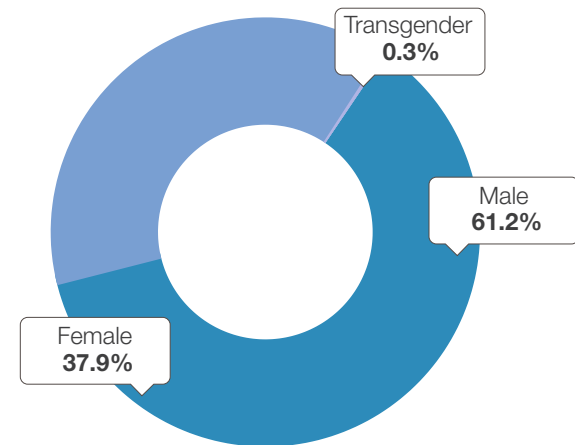


Figure 3: Individual Adults

2016-2021

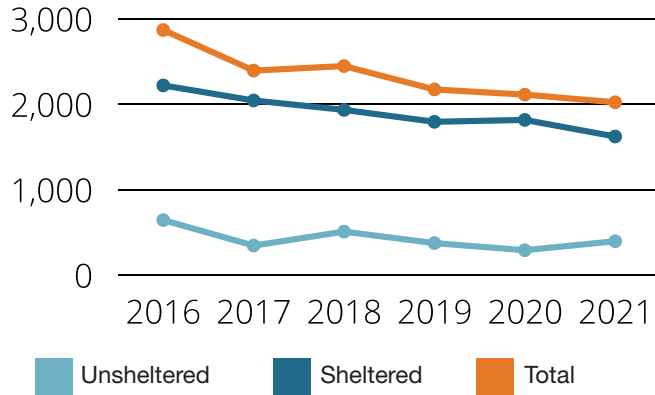


Figure 4: People Experiencing Chronic Homelessness

2020-2021

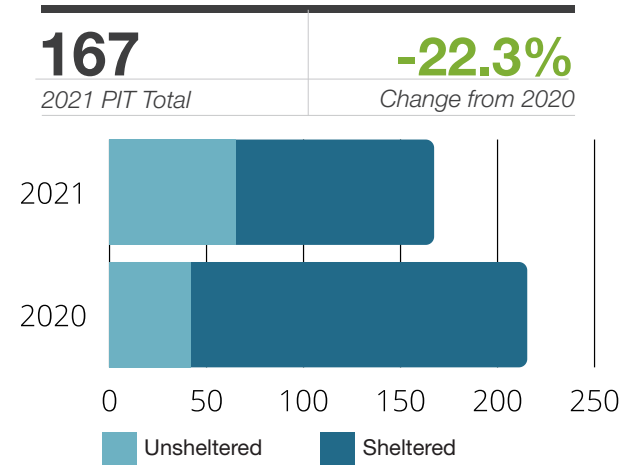
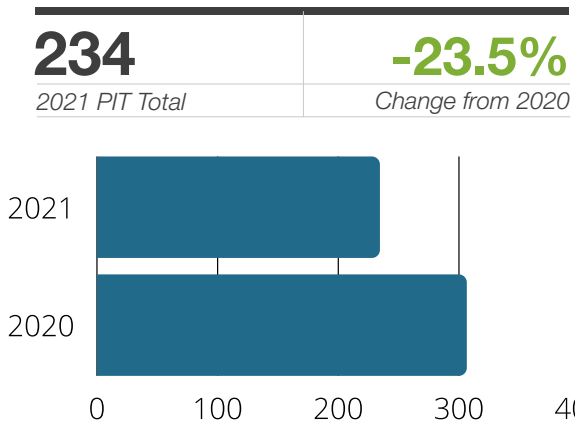


Figure 5: Families

2020-2021



*There were no unsheltered families found on the night of this year's count.

Figure 6: Veterans

2020-2021

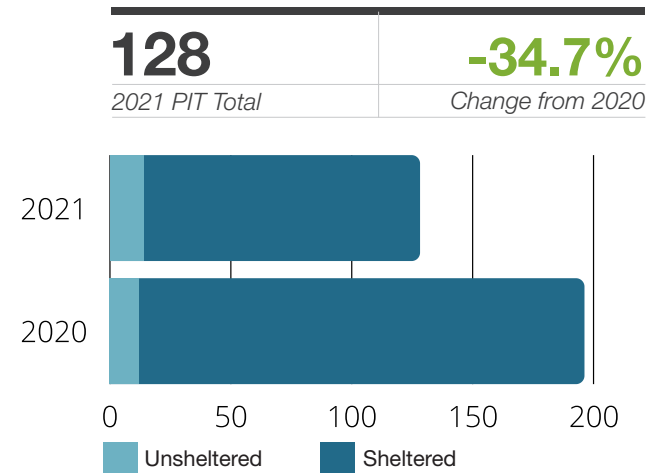


Figure 7: Domestic Violence Survivors

2020-2021

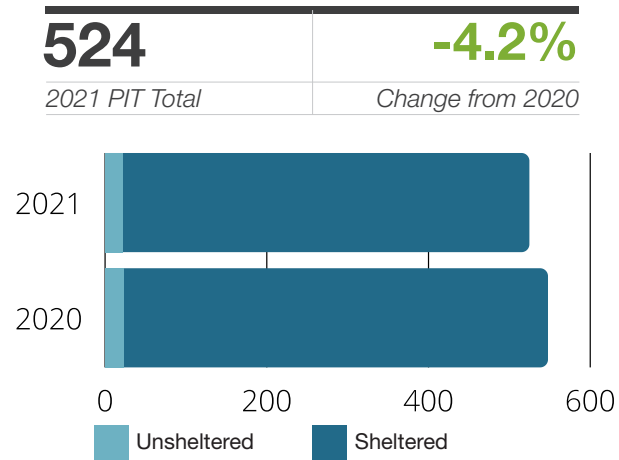


Figure 8: People with Chronic Substance Use Issues

2020-2021

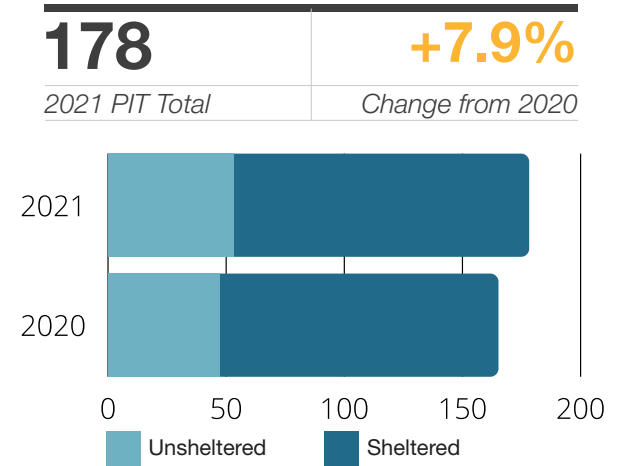


Figure 9: People with Mental Illness

2020-2021

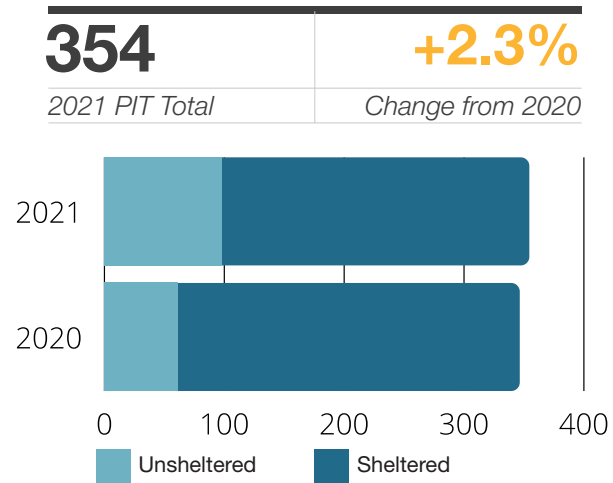
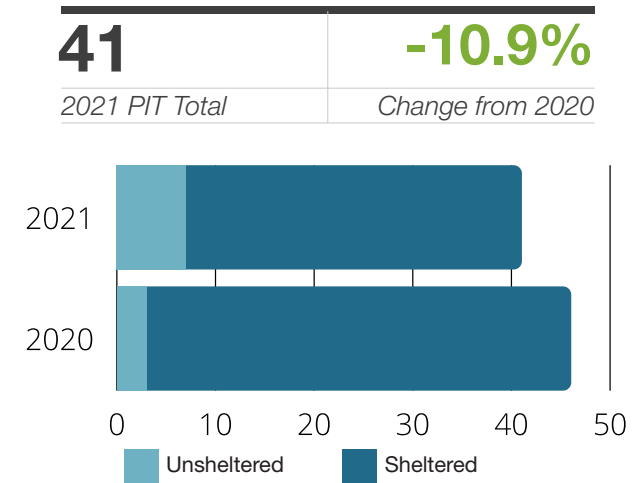


Figure 10: People Living with HIV/AIDS

2020-2021



Point-in-Time Count 2021: Methodology

The methodology for the sheltered count remained the same as in past years and involved a count of everyone who stayed in a shelter or COVID-funded hotel/motel on the night of January 26. Due to the COVID-19 pandemic, HUD provided options on how to conduct this year's unsheltered count, including foregoing an unsheltered count altogether.

In previous years, the unsheltered count involved volunteers canvassing pre-identified areas and conducting surveys of those who were unsheltered on the night of PIT. This year, CCEH and both of the state's Continuums of Care (CoCs) opted to pilot a HUD-approved data-driven approach that leveraged our year-round outreach staff to provide updates on the unsheltered homeless using records in our statewide database, the Homeless Management Information System (HMIS). This year's count reflects actual numbers from our HMIS and did not include any statistical sampling of areas to account for the high-probability or low-probability of finding homeless individuals in certain geographic regions. CCEH believes this is a more accurate method of counting this population. The final numbers include extrapolation for missing demographic data, including race, ethnicity, and gender, which aligns with HUD standards.

The outreach workers verified who was unsheltered on the night of the PIT in the two weeks following the count. Anyone who slept in a shelter, or COVID-funded hotel or motel on the night of the count, was not included in the unsheltered count but was included in the sheltered count. CCEH collaborated with regional coordinators to verify the unsheltered counts and worked with the Veterans Administration (VA) to confirm the veteran counts. Please contact CCEH if you are interested in reading the full detailed methodology.

Definitions and Acronyms

Chronically Homeless (CH)

People who are chronically homeless have experienced homelessness for at least a year – or repeatedly – while struggling with a disabling condition such as a serious mental illness, substance use disorder, or physical disability.

Continuum of Care (CoC)

A regional or local planning body that coordinates housing and services funding for homeless families and individuals.

Coordinated Access

A standardized assessment and referral process to access community resources within a geographic region for people experiencing a housing crisis or homelessness. Connecticut has seven regional Coordinated Access Networks.

Department of Housing and Urban Development (HUD)

The U.S. government agency which supports the housing market and homeownership.

Domestic Violence (DV)

A felony or misdemeanor crime of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

Emergency Shelter (ES)

A facility whose primary purpose is to provide temporary or transitional shelter for people experiencing homelessness.

Episode

A period of homelessness.

Family

A household with at least one adult and one minor.

Individual

A person 18 years of age or older who presents for services alone.

Projects for Assistance in Transition from Homelessness (PATH)

Provides assistance to individuals who are homeless or at risk of homelessness and have serious mental illnesses.

Provider

An agency which offers services to people experiencing homelessness.

Safe Haven

A form of supportive housing that serves hard-to-reach homeless persons with severe mental illness who are on the street and have been unable or unwilling to participate in supportive services.

Self-Reported

Identifying as having a certain condition or status. The condition or status is not necessarily verified with documentation.

Serious Mental Illness

A diagnosable mental, emotional, or behavioral disorder that meets criteria to determine functional impairment.

Severe Disability

Refers to at least one of the following disabilities that impairs the ability to live independently: physical disability, developmental disability, mental health condition, HIV/AIDS, chronic health condition, or substance abuse.

Subpopulation

A specific demographic characteristic within the entire population.

Transitional Housing (TH)

A supportive, temporary accommodation meant to bridge the gap from homelessness to permanent housing by offering structure, supervision, support (for addictions and mental health, for instance), life skills, and, in some cases, education and training.

Unaccompanied Homeless Youth

An individual person under the age of 25 experiencing homelessness.

Unaccompanied Minor

An individual person under the age of 18 experiencing homelessness.

Unsheltered

Living in a place not meant for human habitation.

Veteran

A person who served in the US military.

Acknowledgements

We would like to recognize the State of Connecticut Department of Housing, State of Connecticut Department of Mental Health and Addiction Services, Housing Innovations, CT HMIS Steering Committee, HUD Continuum of Care, Nutmeg Consulting, and the professional Street Outreach, PATH workers, and Homeless Service Provider agencies and staff who made this year's CT PIT Count possible.

We are grateful to everyone for their hard work and wish to thank the following agencies for providing regional coordination this year:

- Access Community Action Agency
- BHcare
- Capital Region Mental Health Center
- Catholic Charities of Fairfield County
- Columbus House, Inc.
- The Connection, Inc.
- CT Department of Mental Health & Addiction Services
- CT Department of Veterans' Affairs
- Emerge, Inc.
- Hartford Healthcare
- Inspirica, Inc.
- Pacific House
- Recovery Network of Programs
- Salvation Army Waterbury
- Supportive Housing Works
- United Way of Southeastern CT
- Windham No Freeze

About Us

CCEH represents more than 100 members – emergency shelter providers, transitional housing providers, community and business leaders, and strategic partners – who share the goal of ending homelessness. In partnership with communities throughout the state, CCEH advances this goal through leadership, community organizing, advocacy, research, and education.

Contributing Staff

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Questions

Any questions about the content of this report can be directed to Linda Casey at lcasey@cceh.org.



CONNECTICUT COALITION to
END HOMELESSNESS

Our collective mission is to prevent and end homelessness in Connecticut.

THANK YOU TO OUR FUNDERS!

