



**2014 STATE OF
HOMELESSNESS
ANNUAL REPORT**
for the
Detroit Continuum
of Care
January – December 2014





HOMELESS ACTION NETWORK OF DETROIT (HAND)

The Homeless Action Network of Detroit (HAND) serves as the lead entity for the Continuum of Care for the cities of Detroit, Hamtramck, and Highland Park, Michigan. We work with a wide range of organizations including service providers, community development organizations, and local, state, and federal government entities to find and implement solutions to homelessness in our community.

HAND manages annual funding applications to the state and federal government, resulting in more than \$25 million in homelessness programming coming to our community on an annual basis. HAND is also a core resource for all-things data related on homelessness. We oversee and manage our community’s Homeless Management Information System (HMIS), ensuring we have accurate information on who is homeless in our community, what their needs are, and what efforts are working to address those needs.

HAND also works with our community partners and elected officials to advocate for policy solutions to end poverty and homelessness. We’re working to raise awareness locally, across the State of Michigan, and at the federal level, about what our community needs to end homelessness.

In all that we do, we are guided by the following purpose and values:

OUR PURPOSE

Providing leadership to address homelessness.

OUR VALUES

- **Collaboration:** We promote partnerships and consensus
- **Competence:** We advance knowledge and expertise
- **Commitment:** We live it and expect it
- **Performance:** We support outcome-driven best practices
- **Integrity:** We strive to be fair and transparent
- **Advocacy:** We create awareness and promote policy solutions

This report provides a look at the state of homelessness in our community during the past year. For more information, please visit our website at www.handdetroit.org.

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OUR VISION

Our vision is that every individual and family in our community has a home that is decent, safe and affordable, and that they receive every support needed in order to remain housed. This vision is grounded in the belief that through our commitment to working together, being open to new ways of thinking and acting, and having this shared vision, we can - and will - move forward together to achieve real change in our community.

HOMELESSNESS IN DETROIT: OVERALL PICTURE

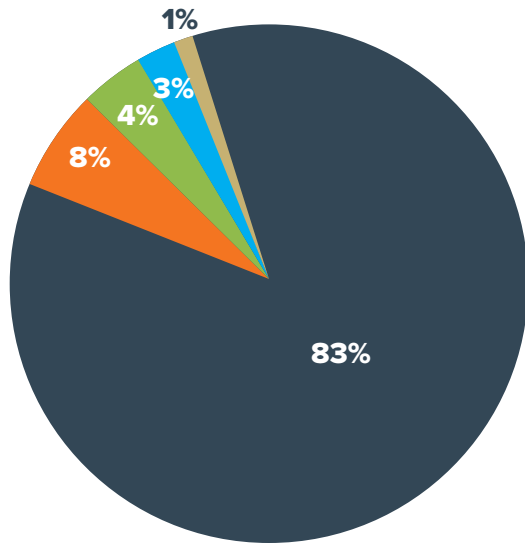
| CLIENT CHARACTERISTICS | OVERALL HOMELESS ¹ | SINGLE ADULT | ADULTS IN FAMILIES | CHILDREN IN FAMILIES | UNACCOMPANIED YOUTH UNDER 18 | CHRONICALLY HOMELESS |
|--|-------------------------------|---------------|--------------------|----------------------|------------------------------|----------------------|
| TOTAL IN HMIS-ACCOUNTING FOR 90% OF OVERALL HOMELESS IN THE DETROIT CONTINUUM ² | 15,717 | 11,178 | 2,166 | 2,947 | 64 | 3,300 |
| MALE | 62% | 72% | 21% | 49% | 30% | 73% |
| FEMALE | 37% | 27% | 79% | 51% | 70% | 26% |
| TRANSGENDER | 1% | 1% | 0% | 0% | 0% | 1% |
| UNDER 17 | 18% | | | 100% | 100% | 1% |
| AGE 18-24 | 11% | 11% | 29% | | | |
| AGE 25-54 | 52% | 63% | 65% | | | |
| AGE 55+ | 19% | 26% | 6% | | | |
| AVERAGE AGE | 36 | 44 | 33 | 7 | 16 | 47 |
| WHITE | 9% | 10% | 3% | 2% | 2% | 10% |
| AFRICAN AMERICAN | 89% | 89% | 96% | 97% | 97% | 89% |
| OTHER | 2% | 1% | 1% | 1% | 1% | 1% |
| FIRST TIME HOMELESS | 37% | 31% | 47% | | 55% | 16% |
| VETERANS | 7% | 9% | 3% | | | 38% |
| OBTAINED GED OR HIGH SCHOOL DIPLOMA³ | 27% | 42% | 38% | 1% | 6% | 40% |
| SOME COLLEGE³ | 15% | 19% | 24% | 1% | | 20% |

¹ Overall Homelessness may be lower than the combined categories as categories are not mutually exclusive.
² See page 21 for details on data limitations. ³ Highest level of education attained

HOMELESS FAMILY CHARACTERISTICS

Over the course of 2014, we served **1,969** families

Composition of Homeless Families



57% of homeless adults in families who responded to the employment question were unemployed at the time they became homeless.

47% of homeless families reported being homeless for the first time in 2014.

13% of homeless families were homeless either multiple times or longer than one year.

- Female Single Parent
- Two-Parent Families
- Male Single Parent
- Other Family Composition
- Grandparents, Foster Parents, or Non-Custodial Caregivers



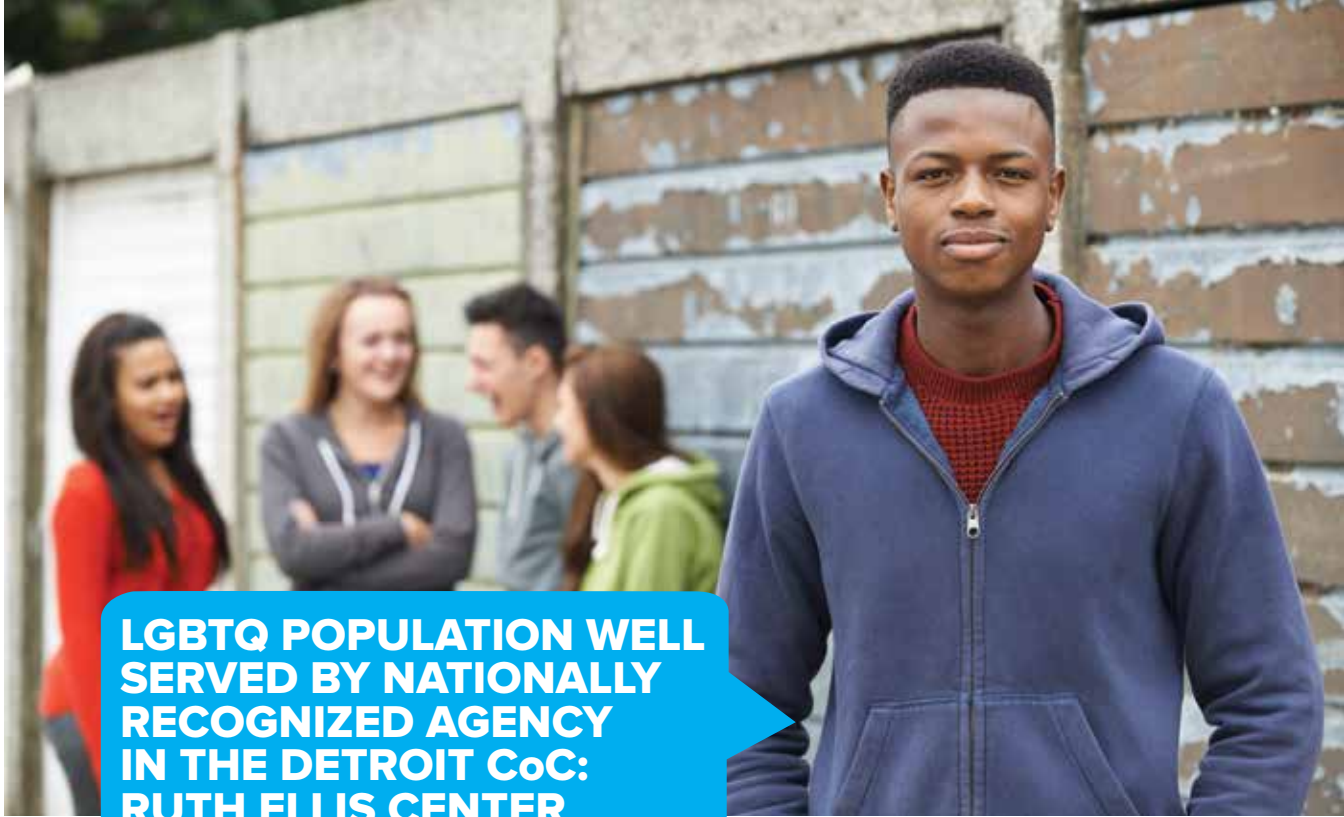
RAPID REHOUSING A PROMISING STRATEGY IN DETROIT CoC

RAPID REHOUSING: 2014 Budget for RRH 2,003,028

| | |
|--------------|------------------|
| City ESG | 1,868,826 |
| 2014 MSHDA | 134,202 |
| TOTAL | 2,003,028 |

541 PERSONS EXITED TO PERMANENT HOUSING

| | |
|--|------------|
| Average Cost per Bed | \$2,646.00 |
| Average Cost per Exit to Permanent Housing | \$3,697.00 |
| Permanent Housing Destination Rate | 92% |



LGBTQ POPULATION WELL SERVED BY NATIONALLY RECOGNIZED AGENCY IN THE DETROIT CoC: RUTH ELLIS CENTER

The Ruth Ellis Center (REC) was formed in 1999 in response to a severe act of violence against a gay youth who was experiencing homelessness. Concerned community members recognized the prevalence of violence and victimization against LGBTQ youth that often leads to and is a result of homelessness.

Their mission is to provide short-term and long-term residential safe space and support services for runaway, homeless and at-risk lesbian, gay, bi-attractional, transgender and questioning youth (LGBTQ).

In 2013¹, seven unique youth who identify as LGBTQ and are in the Foster Care system lived at Ruth’s House, a state-licensed Child Caring Institution, Intensive Treatment Unit. The length of stay ranged from two to twelve months and a total of 877 bed-nights of residential service were provided. Second Stories Drop In Center: A total of 508 unique youth came to the center and benefitted from a total of 4,750 service contacts including safety-net services, peer support groups, HIV testing and case management. Second Stories Outpatient Mental Health Services: 47 youth enrolled in some form of mental health services in 2013¹; including youth in individual, family and group therapy, and participation in psycho-educational peer programs.

¹ Most recent data available at this time for the Ruth Ellis Center.

YOUTH

The data presented here provides information on homeless youth under the age of 18 and young people ages 18-24. For the purposes of this report, an “unaccompanied youth” is a young man or woman under the age of 18 who is not in the care of a parent or guardian. The youth may also be the head of a household if he/she is a teen parent.

BASIC DEMOGRAPHICS

64 unaccompanied youth served by our homeless service providers.

1 was age 11-14 • **63** were ages 15-17

1,247 young people ages 18-24 were served by our homeless service providers.

70% were females and **30%** were males.

97% were Black or African American and **2%** were White

EXTENT OF HOMELESSNESS

55% reported being homeless for the first time in 2014

29% reported that they had been homeless 1-2 times in the past

LIMITATIONS ON YOUTH DATA

The total number of young people, who experience homelessness, may be an undercounting of the actual number of young people who find themselves without stable housing. A young person who was “couch surfing” -- that is, staying temporarily with friends or family – would not have been considered homeless by the definition in place at that time. Therefore, the many young people who were “couch surfing” are not included in these numbers of homeless youth. In reality, though, these young people need the same types of services and stable housing as other homeless youth.



CHRONICALLY HOMELESS

A person is considered “chronically homeless” if he/she has been homeless 4 or more times in the past 3 years or has been homeless for one year continuously and has been diagnosed with a disability. A family is also considered chronically homeless if the head of household meets the requirements of the definition above. These individuals and families are often targeted for intensive housing and supportive services, as they have significant barriers to housing, such as poor rental histories, no income, untreated mental health and/or substance abuse issues, chronic physical health concerns, unemployment, and more.



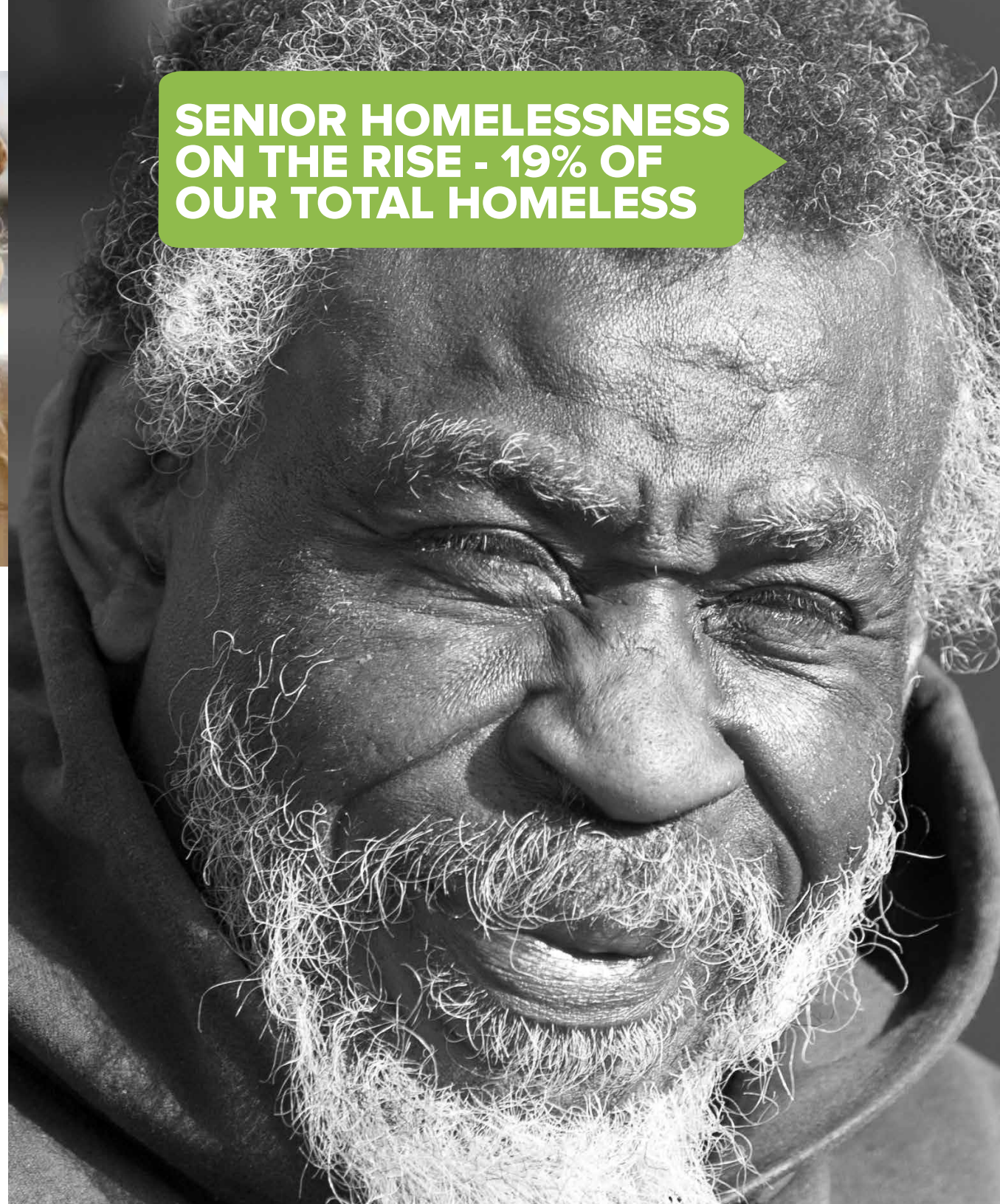
SENIOR HOMELESSNESS ON THE RISE - 19% OF OUR TOTAL HOMELESS

BASIC DEMOGRAPHICS

- Over the course of 2014, a total of **3,300** people were identified as being chronically homeless.
- **73%** of the chronically homeless were males while **26%** were females.
- The average age for females was **43**.
- The average age for males was **49**.
- **89%** of chronically homeless clients were Black/African American, **10%** were White.

EMPLOYMENT & EDUCATION

- **73%** of people who were chronically homeless and responded to the employment question were unemployed. **7%** responded that they were employed. **20%** did not respond to these questions.
- **40%** of chronically homeless adults had a high school diploma or GED.
- **20%** of chronically homeless adults had some college education.



3-YEAR DATA COMPARISON

The table below shows a comparison of homeless data over the past three years.

| COMPARISONS | 2012 | 2013 | Change/ Trends 2012-2013 | 2014 | Change/ Trends 2013-2014 |
|---|--------|--------|--------------------------------|--------|--------------------------------|
| Total number of homeless | 19,714 | 16,201 | -17.8% | 15,717 | -3% |
| Number of singles | 13,321 | 12,117 | -9.0% | 11,178 | -7.8% |
| Number of adults in families | 2,586 | 2,124 | -17.8% | 2,166 | +2% |
| Number of children in families | 3,716 | 2,742 | -26.2% | 2,947 | +7.5% |
| Number of unaccompanied youth ¹ | 170 | 62 | -63.5% | 64 | +3% |
| Chronically homeless ² | 3,457 | 3,468 | +1% | 3,300 | -4.8% |
| Single Veterans | 1,814 | 1,681 | -7% | 1,030 | -39% |
| Veterans in Families | 110 | 102 | -1% | 75 | -26% |
| ADDITIONAL TRENDS | 2012 | 2013 | 2014 | | |
| Unemployment at program entry (Singles) | 86% | 64% | 58% | | |
| Unemployment at program entry (Family adults) | 77% | 58% | 57% | | |
| First Time Homeless (Singles) | 31% | 31% | 31% | | |
| First Time Homeless (Families) | 51% | 48% | 47% | | |

¹ See page 7 for a discussion on youth homelessness. ² See page 8 for a discussion on trends in chronic homelessness.

REDUCTION IN HOMELESS NUMBERS

The total number of people who were homeless in 2014 is reported as **15,717**, which is a decrease of almost 500 people between 2013 and 2014. However over the last three years, homelessness in Detroit has decreased by 20%. We are excited about this downward trend as we continue to embrace HUD's goal of ending homelessness. Some of the reasons for this decrease include:

REDUCTION IN VETERAN HOMELESSNESS

In 2014, the Department of Housing and Urban Development (HUD) and the Veterans Administration (VA) continued their focus on ending homelessness amongst our nations veterans. Over the past year, we have had an increase in funding targeted toward housing veterans. Our aggressive approach towards ending veteran homelessness has caused our numbers to decrease from 1,783 homeless veterans in 2013 to 1,105 homeless veterans in 2014.

REDUCTION IN PROGRAMS REPORTING IN THE HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

The numbers presented in this report are based on the data that is reported in the HMIS. Over the past year, three large shelters have either closed or drastically reduced their capacity. The closure or restructuring of these programs is likely also a contributing factor to the overall decrease in the number of people who were homeless in 2014.

OTHER REASONS WHY THE NUMBERS ARE DECLINING:

Recognizing that, like any trends in human service data, the reasons for a decrease in our homeless numbers are multi-faceted. Nonetheless, we are excited to see an overall reduction in the numbers served in 2014, as this may be telling us that our efforts to increase the housing resources, like offering clients more housing vouchers, is working. Also, Permanent Supportive Housing programs, like our Moving-Up program, engages homeless clients and provides them with housing and support services aimed at helping them to maintain housing long term. With efforts like these in place, we are effectively targeting our resources and it is having a positive impact.

One promising practice that could be affecting the downward trend in the number of people experiencing homelessness is the implementation of the Coordinated Assessment Model (CAM). Preliminary data indicates that length of stay in shelters is decreasing as a result of the CAM. Stay tuned for the 2015 State of Homelessness Report when more comprehensive data about the CAM will be available.

2014 ACCOMPLISHMENTS

77% (1,006) of persons who exited a Transitional Housing program exited to a permanent housing destination

- **Why this matters:** Persons who are in transitional housing programs are considered homeless, and they often face barriers preventing them from accessing permanent housing that will end their homelessness. Our community has done well to assist these individuals and families to move from homelessness to housing.
- This is an improvement over last year, in which 76% of person in a TH program exited to permanent housing.

92% (2,045) of persons served in a Permanent Supportive Housing (PSH) program either retained their housing in that program, or exited to another permanent housing destination

- **Why this matters:** Persons who are served in PSH have significant barriers to housing, and are often chronically homeless. That the vast majority of these individuals and families have been able to retain their housing is a testimony to the strength of our PSH programs in ensuring these programs provide ongoing, wrap-around supports to help keep these individuals and families housed.
- In 2013, 95% of persons served in PSH retained their housing or moved to other permanent housing. That the 2014 rate is slightly lower may be indicative that our PSH programs are doing a better job of targeting their housing to those most in need, and with the most barriers to housing stability. This should continue to become clearer as our Coordinated Assessment Model continues to unfold in 2015.

We helped 1,909 people move from an Emergency Shelter to a permanent housing destination.

92% of persons served by a Rapid Re-Housing (RRH) program exited to a permanent housing destination.

- **Why this matters:** RRH programs are relatively new in our community, but are gaining increasing traction at the federal and local level. The data thus far demonstrates that these programs – which provide short to medium term rental assistance and case management assistance – are successful in helping to end homelessness for individuals and families.

85% (93) of persons who were exited from a Street Outreach program exited to a sheltered destination.

- Of these individuals, 65 people exited to a permanent housing destination.
- **Why this matters:** Persons who are homeless on the street are incredibly vulnerable to illness, injury, and even death. Our community's ability to move these individuals into even a temporary placement such as an emergency shelter or a transitional housing program is an important first step in providing safety from the elements, with the intent to eventually move the individual into permanent housing.

904 adults increased their monthly income while receiving services.

- Average increase in income was \$622 a month

There were 678 fewer homeless veterans reported in 2014 than in 2013. This is another exciting success for our community, as it demonstrates that programs such as Supportive Services for Veteran Families (SSVF) are working to help prevent veterans from becoming homeless.



DETROIT CoC SPECIAL INITIATIVES-2014

HAND is excited about several special initiatives that were started, or continued, in our Continuum in 2014. These include:

25 CITIES

Over the summer and fall of 2014, the Detroit Continuum of Care participated in a national initiative called “25 Cities”. This initiative – lead by the Department of Veterans Affairs (VA), the Department of Housing & Urban Development (HUD), and the U.S. Interagency Council on Homelessness (USICH) – provided technical assistance to 25 communities across the country to help them accelerate their pace in housing homeless veterans and people who are chronically homeless. The Corporation for Supportive Housing (SCH) Michigan office played a significant role in providing leadership to this initiative in Detroit. The 25 Cities initiative helped Detroit lay a groundwork for Zero: 2016.

THE 25 CITIES INITIATIVE ACCOMPLISHED THE FOLLOWING IN THE DETROIT CoC:

- Jump-started the community’s common assessment tool
- More than 600 individuals were assessed using the community’s common assessment tool, providing us with information on the type of housing intervention best suited for that individual
- Implemented weekly case conferencing meetings amongst front-line staff working to house people; these meetings proved invaluable for improving communication amongst staff from different organizations, reducing barriers to housing, and prioritizing people for housing
- Housing Choice Vouchers (HCV) were dedicated for this initiative
- Accelerated our timeline for the implementation of the CoC’s coordinated assessment system (known locally at the Coordinated Assessment Model, or CAM)
- Forged new partnerships and relationships with the local VA Medical Center staff
- 60 people were housed!

**THERE WERE 2,947
HOMELESS CHILDREN
IN DETROIT IN 2014**

DETROIT ZERO: 2016

WHAT IS ZERO: 2016 AND WHY IS THE DETROIT CONTINUUM OF CARE A PART OF IT?

Zero: 2016 is a national initiative that 71 communities across the country are participating in to end veteran's homelessness by the end of 2015 and chronic homelessness by the end of 2016. These efforts are coordinated and supported by Community Solutions.

The Detroit Continuum of Care (CoC) has signed on to the Zero: 2016 initiative because we believe homelessness is a solvable community problem, and we are dedicated to implementing the systems-wide changes necessary to solve this problem.

HOW DO WE KNOW IF WE ARE REACHING THOSE GOALS?

In order to know if we are on track for ending veteran's homelessness by the end of 2015 and chronic homelessness by the end of 2016, we need to understand how many veterans are and will experience homelessness in the coming year, and how many people are or will experience chronic homelessness throughout 2015 and 2016. These are tough questions to answer given the often fluid nature of a person's homelessness. However, through conversations with various stakeholders, by combing through the best data we have in our HMIS, and consulting with national experts, our community is embracing the following "Take-Down Targets" for veteran and chronic homelessness:

- 1,519 homeless veterans to be housed by December 2015 (as of January 2015)
- At the time of the report the chronic homeless target to be housed was undetermined

HOW WILL WE DO THIS?

Ending homelessness among veterans and those experiencing chronic homeless will not be easy. We believe we can do this though, by targeting our housing and services resources, prioritizing for placement into housing those most in need, and better aligning the services being provided. On the ground, this take the form of organizations doing things differently, serving a different population than who they have typically served in the past, communicating differently with other stakeholders, and being willing to address and resolve the barriers that prevent people from getting housed.

This is not the effort of just one organization or one federal department. This is our community's effort to end homelessness for veterans and those who are chronically homeless.

HOW WILL WE KNOW IF WE ARE MAKING PROGRESS?

As the data lead for Zero: 2016, HAND will post regular data reports on our website (www.handetroit.org) on the progress we're making against our goals.

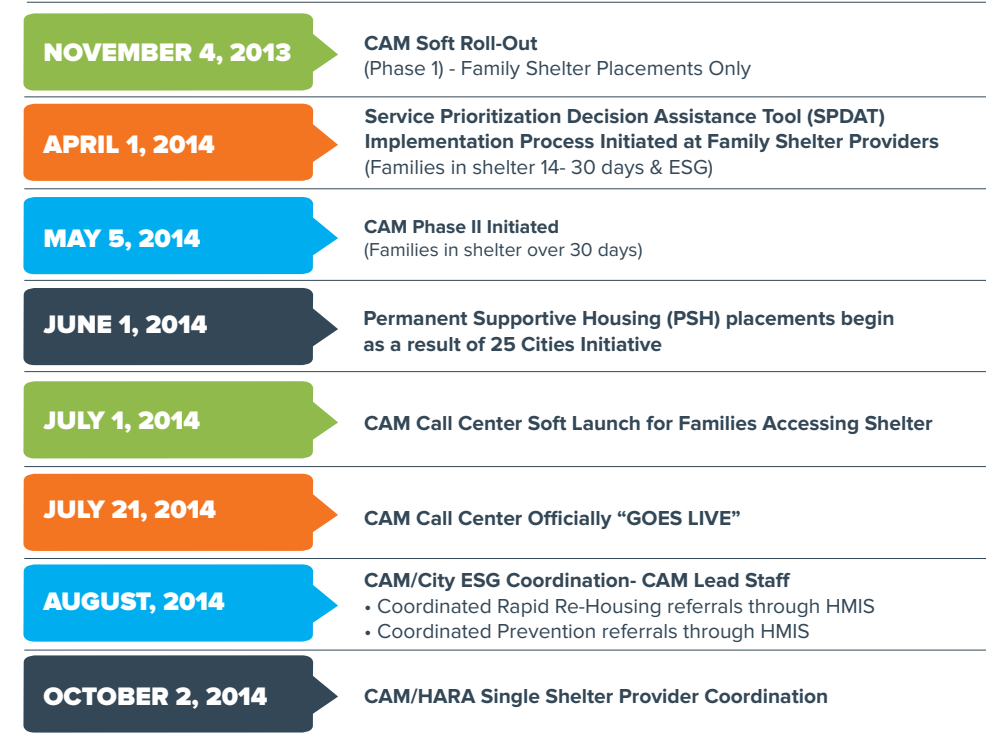
WHAT DOES "GETTING TO 0" REALLY MEAN?

Ending homelessness does not mean that people will never experience homelessness again. Life is too unpredictable for that, and unplanned events like illness, violence, loss of job, fires, or other circumstances may lead to a person becoming homeless. When this happens, our goal is that our community will have a system in place to respond to this person's need, so that his/her homelessness is brief and non-recurring. Additionally, to every extent possible, we will try to prevent homelessness before it ever occurs.

COORDINATED ASSESSMENT MODEL (CAM) IN THE DETROIT CONTINUUM

A REVIEW OF CAM IN 2014

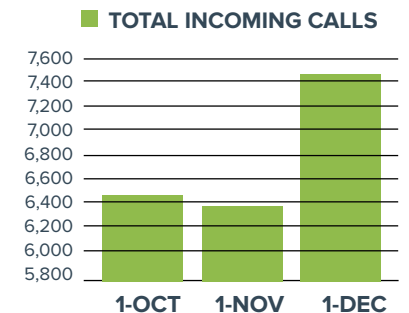
The Coordinated Assessment Model (CAM) had a soft-launch through the local Housing Assessment and Resource Agency (HARA) in the winter of 2013. Official in-reach into Emergency Shelters began in the spring of 2014. The timeline below demonstrates the evolution of the coordinated process in Detroit.



CAM Call Center:

What going "LIVE" really meant in 2014

During the initial launch of the CAM Call Center, we tracked calls through our HMIS Call Point module only for clients which identified as having a housing crises. However as months passed on we realized the importance of tracking ALL the calls coming into the line seeking housing assistance.



CAM ASSESSMENT – THE EVOLUTION OF THE SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL IN DETROIT

The Service Prioritization Decision Assistance Tool otherwise known as the SPDAT was implemented in Detroit in the spring of 2014. The tool is accompanied by a pre-screen or Vulnerability Index- SPDAT (VI-SPDAT) that can be completed to determine if a full SPDAT requires completion (or not) for a client in need of housing assistance. The tool is primarily used to give a recommendation for the level of housing supports potentially needed which helps with prioritizing clients for services, leveraging resources and providing a clear and fair entry point for access to available units in our continuum. The tool is scored which indicates one of the following three outcome categories:

| NO HOUSING SUPPORTS (NHS) | RAPID RE HOUSING (RRH) | PERMANENT SUPPORTIVE HOUSING (PSH) |
|---|---|--|
| Generally high functioning individuals with shorter periods of homelessness. Needs are not as complex in most of the SPDAT categories. Are most likely to solve their own homelessness, perhaps with very brief financial assistance, shallow subsidy, access to apartment listings and the like. | With some supports, though not as intensive as Permanent Supportive Housing (PSH), the individuals can access and maintain housing. The focus of the supports will more likely be on a smaller number of SPDAT components. Support services do not last as long as Permanent Supportive Housing (PSH) supports. | These are individuals with more complex needs who are likely to benefit from Permanent Supportive Housing (PSH) including intensive case management supports. Scores in the SPDAT are likely to be higher (3s and 4s) in many of the components. |

WHO IS USING THE TOOL IN DETROIT?

With hopes to expand the use of the tool to ALL sectors of housing and services in Detroit we were successful in implementing its use with the following areas in 2014:

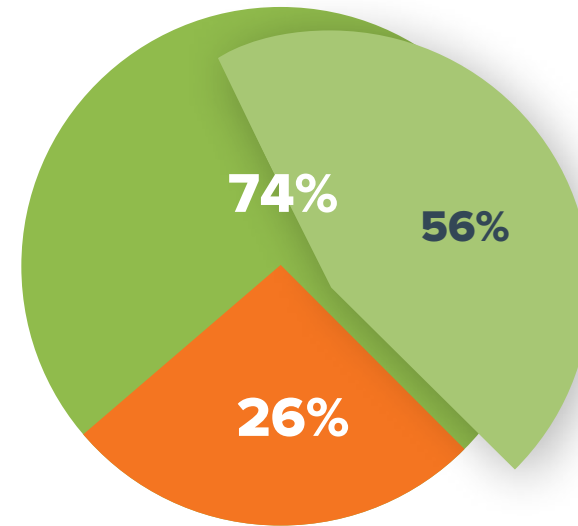
| SHELTERS | COORDINATED ASSESSMENT STAFF | STREET OUTREACH STAFF |
|-------------------|------------------------------|-----------------------------|
| (VI – SPDAT only) | (VI – SPDAT and Full SPDAT) | (VI – SPDAT and Full SPDAT) |

WHAT THE VI- SPDAT AND FULL SPDAT HAS TOLD US IN DETROIT-

From the spring of 2014 through the end of the year this new assessment tool has provided a significant amount of data on clients that are experiencing homelessness in Detroit.

Shelters in Detroit completed approximately 1,156 VI SPDAT's from April – December 2014 –

VI SPDAT Outcome

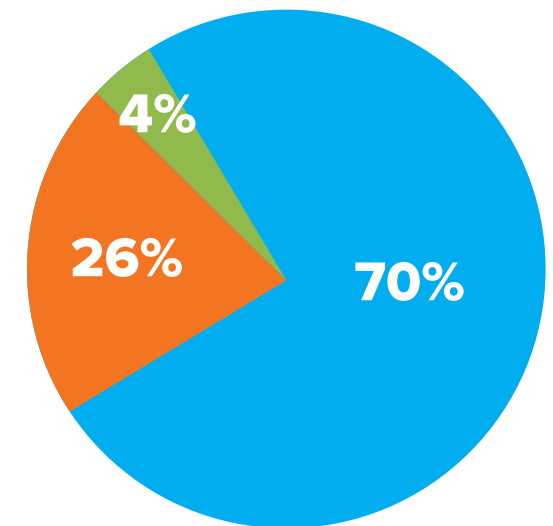


The most common reasons for the full SPDAT not getting completed:

- Client no longer in shelter
- Client unable to be located

- NO HOUSING SUPPORT
- REFERRED FOR FULL SPDAT
- FULL SPDAT'S COMPLETED

FULL SPDAT OUTCOME



- 29% of full SPDATS were completed on families
- 71% of full SPDATS were completed on singles

- NO HOUSING SUPPORT
- RAPID REHOUSING
- PERMANENT SUPPORTIVE HOUSING

STREET COURT DEMANDING JUSTICE FOR ALL - IN DETROIT CoC



Street Outreach Court – Detroit (SOCD) is a local program of the 36th District Court. It operates under the authority and discretion of the 36th District Court, state and local Prosecutors, Municipal Parking Department, Defense Counsel, and Non Profit Service Providers. SOCD offers homeless or near-homeless individuals who are committed to making life changes the opportunity to resolve certain outstanding civil infractions, traffic, ordinance, and misdemeanor offenses that hinder their progress toward self-sufficiency.

Neighborhood Legal Services Michigan (NLSM) is one of the non-profit providers that recommend their clients for relief to Street Outreach Court-Detroit. NLSM has been a partner with Street Outreach Court – Detroit from the onset of its existence. NLSM was instrumental in assisting with the development of the guidelines and client entry criteria for the SOCD program via 36th District Court and have been partners for the last three years assisting clients with their outstanding civil infractions, traffic, ordinance, and misdemeanor offenses.

Removal of these types of issues places clients in better positions to either obtain or maintain jobs or housing and in general improves the quality of the client's life. The SOCD program through the court is an invaluable service that has saved clients tens of thousands of dollars over the course of the last three years and given them the opportunity to be relieved of both financial and mental stresses that have prohibited them from obtaining or maintaining both housing and jobs.

“DATA IS ONE OF THE MOST POWERFUL TOOLS WE HAVE IN OUR TOOLKIT TO END HOMELESSNESS”

– Mark Johnston, Retired Assistant Secretary U.S. Department of Housing & Urban Development
Office of Community Planning and Development

Appendix 1:

What is HMIS?

Background of the Homeless Management Information System

The Homeless Management Information System (HMIS) is a web-based database used by service organizations to collect and record information on the people they serve. This information is collected for people who are homeless and at-risk of homelessness.

Data Included in This Report

This report gives a review of data collected through the HMIS during the past year. Based on our estimates, the data in this report represents approximately 90% coverage of the homeless clients in Detroit's Continuum of Care from January 1, 2014 through December 31, 2014.

Data Limitations

The data in this report is not intended to provide a complete count of the homeless population due to the following:

1. The vast majority of homeless providers in Detroit use this system; however, there may be some organizations or programs that do not report into the HMIS.
2. Due to federal statutes, domestic violence programs are prohibited from using the HMIS, and therefore their data is not included here.
3. The data for this report was pulled from the HMIS using several different report queries. As each query may have pulled the data slightly differently from the system, there may not always be a one-to-one match of data among the graphs and tables.

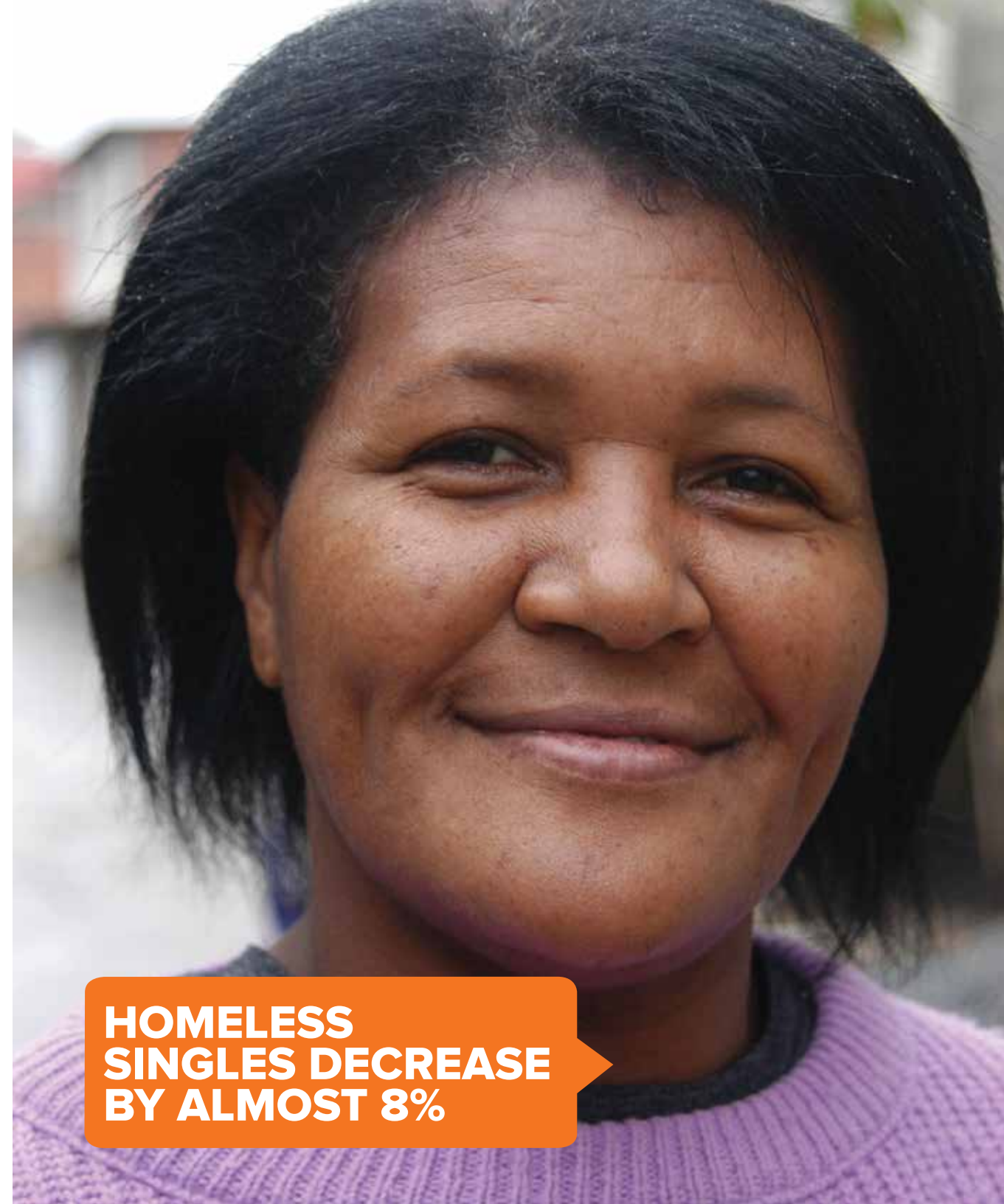
Appendix 2:

Agencies Using the System

Over the course of 2014, there were 33 agencies actively entering data into the HMIS. These agencies are listed here.

| | |
|--|--|
| Alternatives for Girls | Lutheran Social Services |
| Blue Water Center for Independent Living | Mariner's Inn |
| Cass Community Social Services | Matrix Human Services |
| Community Social Services of Wayne County | Michigan Veterans Foundation |
| Coalition on Temporary Shelter | Neighborhood Legal Services Michigan |
| Community & Home Supports | Neighborhood Service Organization |
| Covenant House | New Day Multi-Purpose Center |
| Detroit Central City Community Mental Health | Operation Get Down |
| Gateway Detroit East Community Health | Perfecting Community Development Corporation |
| Detroit Rescue Mission Ministries | Positive Images |
| Development Centers, Inc. | Southwest Counseling Solutions |
| Effective Alternative Community Housing | St. John's Community Center |
| Emmanuel House | The Salvation Army |
| NOAH Project | Traveler's Aid Society of Metro Detroit |
| Freedom House | United Community Housing Coalition |
| Faith Love N Kindness | Volunteers of America |
| Love Outreach | |

HAND continues to work to implement HMIS data collection and reporting at additional agencies and within additional programs, to help ensure we have the most complete, robust data possible.



**HOMELESS
SINGLES DECREASE
BY ALMOST 8%**



Mission:
PROVIDING LEADERSHIP TO ADDRESS HOMELESSNESS

handetroit.org