

## **BRING LA HOME!!**

### **City of Long Beach Department of Health and Human Services**

#### **1. How many and what percent of your departments annual client load are homeless individuals and families?**

On March 12, 2003, the City of Long Beach completed its first point in time street and service based enumeration of homeless people. It was determined that 5,845 persons were homeless on that day. According to the 2000 census data, the City of Long Beach population is 461,522; Long Beach is the fifth largest city in the State of California. Given the total population, a little more than one percent of Long Beach residents are homeless. The count found 795 family units. Thirty five percent of the total counted are children under the age of 18. The 2003 Housing Activity Chart and Gaps Analysis data denote that the Long Beach Continuum of Care has 1,450 emergency and transitional shelter beds. Given these facts, it can be assumed that approximately 4,300 individuals and persons in families, including children, are living on the streets, in cars, weekly motels and other transient situations.

#### **2. What procedure does your department use to identify homeless people?**

Homelessness as defined by The Department of Housing and Urban Development includes persons residing in places not meant for human habitation, such as cars, parks, sidewalks, encampments and abandoned buildings; in an emergency shelter; in transitional or supportive housing for homeless persons who originally came from the streets or emergency shelter.

The Long Beach Continuum of Care currently funds nine outreach workers who canvass the streets, parks, riverbed and freeway underpasses and other identified locations throughout the City where the homeless reside. Outreach workers respond to calls from community members, businesses and city departments to address the needs of the chronically homeless living on the streets of Long Beach.

The City of Long Beach also operates the Multi-Service Center, an access center with 14 co-located non-profit agencies providing resources for the homeless specifically. The multi-service center provides one-stop services including case management, lifeskills, childcare, medical screenings and referrals, emergency and transitional shelter referrals and permanent housing placement. Outreach is the direct link between the streets and supportive services necessary to regain self-sufficiency and independent living. The multi-service center provides services to an unduplicated average of 136 single men and women and 64 families in a given month.

**3. How much do you estimate that your department spends each year on services related to homeless people?**

The Long Beach Continuum of Care award for 2003 was close to \$3.8 million. Previous years allocations were \$2.7 million in 2001 and \$2.9 million in 2002. The City of Long Beach, as lead agency, passes through approximately 88% of these funds to non-profit agencies, which provide homeless services citywide. Additionally, \$326,000 in Emergency Shelter Grant funds, \$250,000 annually in Community Development Block Grant funds are used for Social Service Grant Program and operation of the Multi-Service Center. Additionally, the Mayors Fund for the Homeless has raised \$395,619 since 1992, which is used for direct homeless services.

**4. What specific policies and practices produce the outcomes that your department currently achieves in preventing and eliminating homelessness?**

Homeless prevention is supported by Emergency Shelter Grant funds, of which a portion is used for eviction prevention. Also, one ESG funded program is utilized to assist families with move in deposits for permanent housing units. In 2003-2004, more than 50 families have been assisted by these funds, to obtain and maintain permanent housing stability.

The City Council approved for the Long Beach Housing Authority to set aside 20 Section 8 vouchers annually for homeless families, disabled individuals and seniors. This program was integral in placing homeless families with low earning potential into permanent housing. This would not otherwise have been possible given significant increases in the real estate market which adversely impacting availability and affordability of housing in Long Beach. This program has since been significantly reduced by the Federal government, presenting further challenges in placing low income households into long term permanent housing stability.

The Multi-Service Center (MSC) collaborative of non-profit agencies work diligently together to address the needs of homeless individuals and families, providing case management services as clients navigate through the Continuum of Care towards self sufficiency. Outreach workers have been successful with engaging the chronically homeless, offering transportation to the MSC and resources to address the immediate housing crisis. Case managers work with clients to identify emergency and transitional shelter resources. Simultaneously, mainstream resources are accessed to ensure a safety net is in place until disability/employment income and permanent housing can be secured. Permanent affordable housing remains a challenge in our community.

In 2003, the City Managers Office convened an Interdepartmental Homeless Issues Task Force, comprised of city department leadership, to address this issue directly. This group meets monthly to review current City policies, practices, pool resources and take action

to address homeless issues citywide. This group is reviewing city ordinances, developing resources for affordable housing and streamlining referrals for homeless persons to the resources currently operating throughout the city.

**5. What specific changes in resources, policies or practices on the part of your department would make it possible to reduce the number of homeless people in the community you serve?**

Additional emergency shelter is needed to address the volume of people experiencing an imminent housing crisis. The City also must diversify opportunities for permanent affordable housing, including section 8, Shelter Plus Care, Efficiency units, permanent supportive housing, low-income affordable housing projects (CHDO) and the establishment of a Housing Trust Fund. In order for these resources to have the most significant impact on reducing homelessness, the eligibility for homeless persons must be the top priority. Creative solutions will also be necessary to address the need for detoxification beds and in home case management for the chronically mentally ill. Homeless populations released from hospitals are frequently very vulnerable persons struggling with mental health and/or substance abuse issues. These issues are expensive to remedy through inpatient hospitalization but could better be addressed in less costly partnerships between hospitals and Board and Care facilities.

**6. What specific changes in resources, policies or practices on the part of other jurisdictions would reduce the number of homeless people in the community you serve?**

Medical facilities must be held more accountable for appropriate discharge planning. The healthcare system could improve initial screening of potentially homeless patients and start the discharge planning upon intake. Secondly, neighboring cities must work together to strengthen funding support and coordination of housing resources to address the regional problem of homelessness. All cities should be required to designate a percentage of funds to address homelessness so that some communities are not bearing the financial burden more than others.

**7. What additional outcomes in preventing and eliminating homelessness could be achieved if specific policies and practices that you suggest in response to questions 5 and 6 were implemented?**

The fundamental resources needed for the homeless are affordable housing units. Reviewing other large cities 10-year plan to end homelessness throughout the country, decreasing homelessness is likely when a community prioritizes permanent affordable supportive housing programs. The ideas listed in number 5 are not unique; they have been successful in other communities. Ending homelessness will require better coordination between public, private, city and county resources to address many of the systemic issues which create homelessness, namely the healthcare system and the housing market.