

The United States Conference of Mayors — Sodexho

HUNGER AND HOMELESSNESS SURVEY

A Status Report on Hunger and Homelessness in America's Cities

A 23-City Survey, December 2007



Celebrating **75** Years

THE UNITED STATES CONFERENCE OF MAYORS

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Executive Summary

To assess the status of hunger and homelessness in America's cities during 2007, The U.S. Conference of Mayors surveyed 23 major cities whose mayors are members of its Task Force on Hunger and Homelessness. The survey sought information and estimates from each city on (1) the demand for emergency food assistance, emergency shelter and transitional housing; (2) the capacity to meet that demand; (3) the causes of hunger and homelessness; (4) efforts underway in each city to combat these problems; (5) the economic or social conditions that exacerbate these problems; and (6) the outlook for 2008.

This year, the Conference of Mayors made several important changes to its Hunger and Homelessness Survey Questionnaire aimed at increasing the quality of the data collected and improving the accuracy of survey results. The revised survey is more rigorous, relying less on open-ended responses and more on data-driven ones.

Among the report's major findings are the following:

- The major causes of hunger in survey cities are poverty, unemployment and high housing costs. The hunger crisis is exacerbated by the recent spike in foreclosures, the increased cost of living in general, and increased cost of food.
- Sixteen cities (80 percent) reported that requests for emergency food assistance increased during the last year. Among fifteen cities that provided data, the median increase was 10 percent.
- Cities also reported that they are not meeting the need for emergency food assistance. Across the survey cities, 17 percent of all people in need of food assistance and 15 percent of households with children are not receiving it. Nineteen cities expect demand for food assistance to increase in 2008.
- The most common cause of homelessness among households with children is the lack of affordable housing. Among households with children, other common causes of homelessness are poverty and domestic violence. Among single individuals, the most common causes are mental illness and substance abuse.
- During the last year, members of households with children made up 23 percent of persons using emergency shelter and transitional housing programs in survey cities, while single individuals made up 76 percent. Only one percent of persons in these programs were unaccompanied youth.
- Six cities reported an increase in the overall number of homeless persons accessing emergency shelter and transitional housing programs during the last year. Ten cities cited a specific increase in households with children. Seven cities reported a decrease in the number of individuals accessing emergency shelter and transitional housing programs.
- Disability is more prevalent among homeless singles than among adults in households with children. Rates of disability (mental illness, substance abuse, HIV/AIDS, physical and developmental disabilities) were approximately three times greater for singles than for adults in households with children.

- The average length of stay for persons in emergency shelter and transitional housing decreased from 2006. Cities reported that for households with children, the average length of a single stay was 5.7 months in 2007. For singles, the average length of a single stay was reported as 4.7 months. In 2006, cities reported that an average length of stay was 8 months for both populations.
- Cities also reported that they are not meeting the need for providing shelter for homeless persons. Twelve cities (52 percent) reported that they turn people away some or all of the time.

Background

History of This Report

In October 1982, The U.S. Conference of Mayors and The U.S. Conference of City Human Services Officials brought the shortage of emergency services – food, shelter, medical care, income assistance, and energy assistance – to national attention through a 55-city survey. This ground-breaking survey showed that the demand for emergency services had increased in cities across the nation and that on average only 43 percent of that demand was being met. Since that time the Conference has done numerous reports on hunger, homelessness and poverty in cities. These reports have documented the causes and magnitude of these issues, how cities were responding to them and what national responses were needed. (A complete list of past reports can be found in Appendix A.)

To spearhead the Conference's efforts to respond to the emergency services crisis, the President of the Conference of Mayors appointed 20 mayors to a Task Force on Hunger and Homelessness in September, 1983. The initial Task Force was chaired by New Orleans Mayor Ernest "Dutch" Morial. Currently, the 25-member task force is co-chaired by Des Moines Mayor Frank Cownie and San Francisco Mayor Gavin Newsom. All 25 member cities were asked to complete the 2007 Hunger and Homelessness Survey. Twenty-three cities responded to the survey:

- Boston, MA
- Charleston, SC
- Charlotte, NC
- Chicago, IL
- Cleveland, OH
- Denver, CO
- Des Moines, IA
- Detroit, MI
- Kansas City, MO
- Los Angeles, CA
- Louisville, KY
- Miami, FL
- Nashville, TN
- Philadelphia, PA
- Phoenix, AZ
- Portland, OR
- Providence, RI
- Salt Lake City, UT
- San Francisco, CA
- Santa Monica, CA
- Seattle, WA
- St. Paul, MN
- Trenton, NJ

A complete list of these cities and their mayors is provided in Appendix B.

Changes to This Year's Report

This year, The U.S. Conference of Mayors made several important changes to its survey questionnaire. The goals of making these changes were to increase the quality of the data collected and improve the reliability and accuracy of survey results. The survey now asks respondents to quantify the number of persons experiencing hunger and homelessness in their cities, their characteristics, and the types of services they receive. The changes to the survey reflect the fact that, particularly for homelessness, many cities now have administrative databases that give them much more detailed information about the characteristics of homeless persons and their patterns of service use. Many of the questions that were asked in previous surveys were retained in this year's survey in

order to preserve continuity and allow comparisons to previous reports. A copy of the survey is provided in Appendix C.

The Data in This Report

This report provides an analysis of the scale of the hunger and homelessness problems in a group of American cities and the efforts these cities are making to address those problems. The report is based on data collected from The U.S. Conference of Mayors Hunger and Homelessness Information Questionnaire, completed by cities between October 26 and November 26, 2007. Surveyed cities were asked to report data on persons receiving emergency food assistance and homeless shelter for the period of November 1, 2006 through October 31, 2007. Data were supplemented with information on population, poverty, median house values and income from the U.S. Census.

Limitations of This Study

The cities that were asked to submit data for this study were selected because their mayors belong to the Conference of Mayors Hunger and Homelessness Task Force. These cities do not constitute a representative sample of U.S. cities, and this report should not be interpreted as a national report on hunger and homelessness. The data are only representative of the 23 cities that responded to the survey.

In addition, cities have different capabilities to produce the data in the survey. While The U.S. Conference of Mayors is moving toward a more data-driven approach to collecting information on hunger and homelessness, the Conference acknowledges that transition to a more rigorous approach takes time. To address this concern, several of the more data-intensive questions in the survey were made optional. Instructions provided with the survey guided respondents to complete these questions only if they had client-tracking or other administrative databases capable of producing accurate, unduplicated results.¹ As a result, many cities did not provide information for a number of the survey questions. To illustrate this varying level of data, we have noted throughout the report the number of cities that responded to key questions on hunger and homelessness.

The overall response rate to the survey was 92 percent. While all 23 cities responded to the homelessness portion of the survey, only nineteen of them responded to questions in the hunger section of the survey, making the response rate for this section 76 percent.² The lower response rate for the hunger portion of the survey could be attributed to the lack of centralized data on hunger, as well as the result of the new survey containing an increased number of hunger questions. The research team made multiple efforts to increase the response rate through follow-up emails and phone calls to cities that did not initially submit data. In some instances these efforts led to additional survey submissions.

¹ *Unduplicated* means that persons who used multiple programs during the time period would only be counted once for each program. For example, someone who stayed in an emergency shelter every day for one month would only be counted once in an unduplicated count. To produce an unduplicated count, it is necessary for cities to have a city-wide administrative data source that collects personally identifying information on clients served.

² Additionally, one city responded to three questions in the hunger portion of the survey. For these questions, we have noted that the number of cities reporting was 20 instead of 19.

Two other caveats should be considered when reviewing the data in this report. First, cities used different approaches to respond to survey questions. Many used administrative databases or client-level tracking systems, but others used a variety of methods. Some of these included extrapolating from major research studies, using information submitted in recent grant applications, or relying on information from only one source, e.g., one shelter or one emergency food assistance program. Because respondents used varying methods for collecting the data presented here, readers should use caution when interpreting the data.

Second, the cities surveyed for this report vary considerably, making it difficult to draw comparisons between them. Populations of the surveyed cities range from 83,000 to almost 4 million. The cities also range in geographic size from 8 square miles to 475 square miles and are located in different regions of the country. Some cities are large urban centers like Los Angeles and Philadelphia, while others are smaller edge cities like Santa Monica and Trenton. These factors affect a city's level of hunger and homelessness, as well as the efforts needed to address these issues.

A list of contacts for each city is provided in Appendix D. Please contact these individuals for more information on each city's data and its approach to alleviating hunger and homelessness.

Organization of This Report

The report proceeds in three sections. Section 1 presents the findings from the Hunger portion of the survey. Section 2 presents the findings from the Homelessness portion of the survey. Section 3 provides individual profiles of hunger and homelessness for each city that participated in the 2007 survey.

1. Hunger

Hunger remains a significant problem in the United States. In 2005, an estimated 12.6 million households nationally were food insecure at some time during the year, meaning that a lack of resources prevented them from providing enough food for all members of the household. Food insecurity is more prevalent in large cities and rural areas than in suburbs.¹ In addition, households that have low-incomes, low levels of education, are headed by a single female, are headed by black, Hispanic or Native Americans, rent their homes, live in the central city of a metropolitan area, have three or more children, are unemployed, have a disabled household member, or are non-citizens are more likely than others to be food insecure.²

Individuals and families facing food insecurity rely on community-based direct providers and federal assistance programs. Local governments and non-profit agencies operate emergency assistance programs like food pantries, emergency kitchens and home-delivered meal programs. These programs rely on donated food, as well as USDA commodities distributed through The Emergency Food Assistance Program (TEFAP). Other food assistance is available through federal programs, including the National School Lunch Program (NSLP), the Food Stamp Program (FSP), and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).

Increases in the price of heating oil, gasoline and rents have resulted in record numbers of individuals and families seeking food assistance during the last year. At the same time, the availability of food assistance has decreased due to a sharp drop in the supply of commodity foods from the federal Agriculture Department's Bonus Commodity Program and a decrease in donations from supermarkets brought about by improved inventory tracking. The combination of increased demand and decreased supply has led food banks across the country to report critical shortages.³

This section presents a 19-city overview of the results from the Hunger section of the U.S. Conference of Mayors Hunger and Homelessness Survey. The Hunger portion of the survey consisted of a mix of open-ended and data-driven questions relating to the causes of hunger, the demand for emergency food assistance, persons who used emergency food assistance programs, the capacity to provide emergency food assistance, and the unmet need for food assistance in these cities during the last year.

Causes of Hunger

Officials in the survey cities were asked to choose the three main causes of hunger from the following list:

- Unemployment and other employment related problems
- High housing costs
- Poverty or lack of income

¹ Mark Nord, Margaret Andrews, and Steven Carlson. *Measuring Food Security in the U.S.: Household Food Security in the United States, 2005*, (Washington, D.C.: U.S. Department of Agriculture, Economic Research Service, 2005), 4-12.

² Judi Bartfeld, Rachel Nunifon, Mark Nord and Steven Carlson. *What Factors Account for State-to-State Differences in Food Security?*, (Washington, D.C.: U.S. Department of Agriculture, Economic Research Service, 2006), 5.

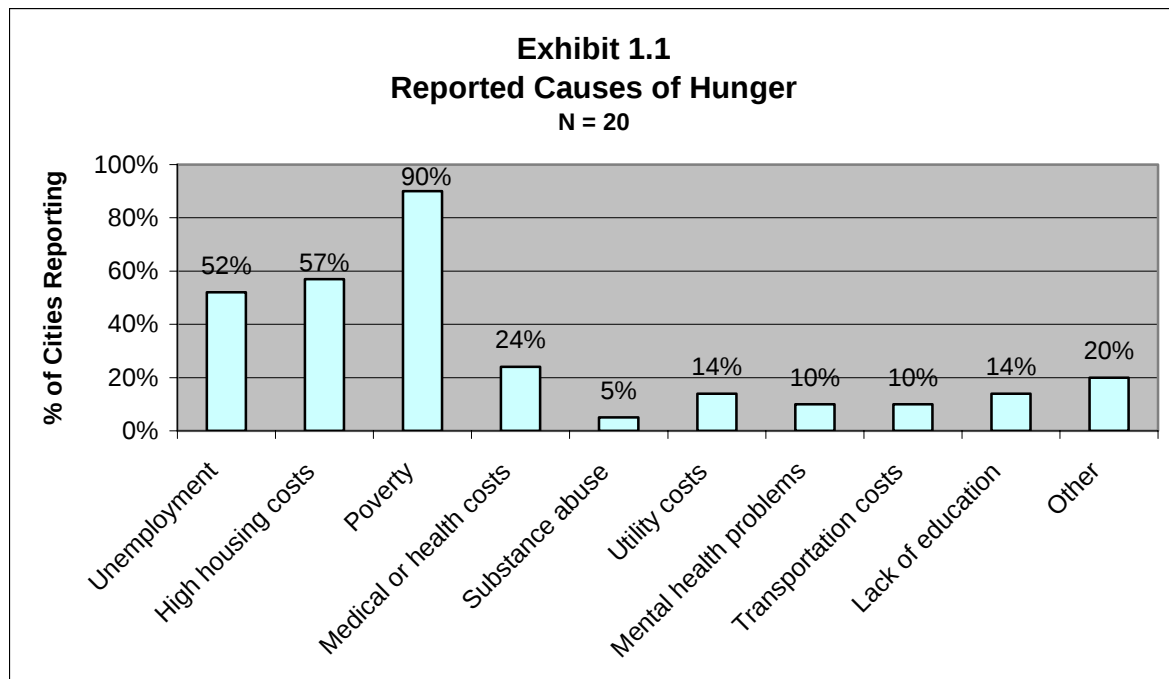
³ Katie Zezima. "Food Banks, in a Squeeze, Tighten Belts." *The New York Times*. 30 November 2007.

- Medical or health costs
- Substance abuse
- Utility costs
- Mental health problems
- Transportation costs
- Lack of education
- Other (specify)

The results for this question are presented in Exhibit 1.1. Economic issues such as poverty, high housing costs and unemployment were the most commonly cited causes of hunger. Social problems like substance abuse and mental illness were the least commonly cited causes. Several cities chose the “Other” response category. The causes specified by those who chose this category included the high cost of living, homelessness, and a lack of public support for emergency food assistance programs.

Economic issues such as poverty, high housing costs and unemployment were the most commonly cited causes of hunger.

Cities were also asked if any economic or social issues had exacerbated the hunger crisis during the past year. Several cities took this opportunity to describe the economic situations in their cities and challenges to meeting the increasing demand for food assistance. Cities cited the foreclosure crisis, the high cost of food, high cost of gasoline, an increase in undocumented families, an increase in people in serious debt, an increase in addictions, the overall increased cost of living, and decreased benefits provided through public assistance or other mainstream programs. Several cities also noted that Food Stamp benefit levels are not keeping up with the increasing price of food. Families often run out of Food Stamps well before the month is over and are forced to turn to emergency food assistance programs.

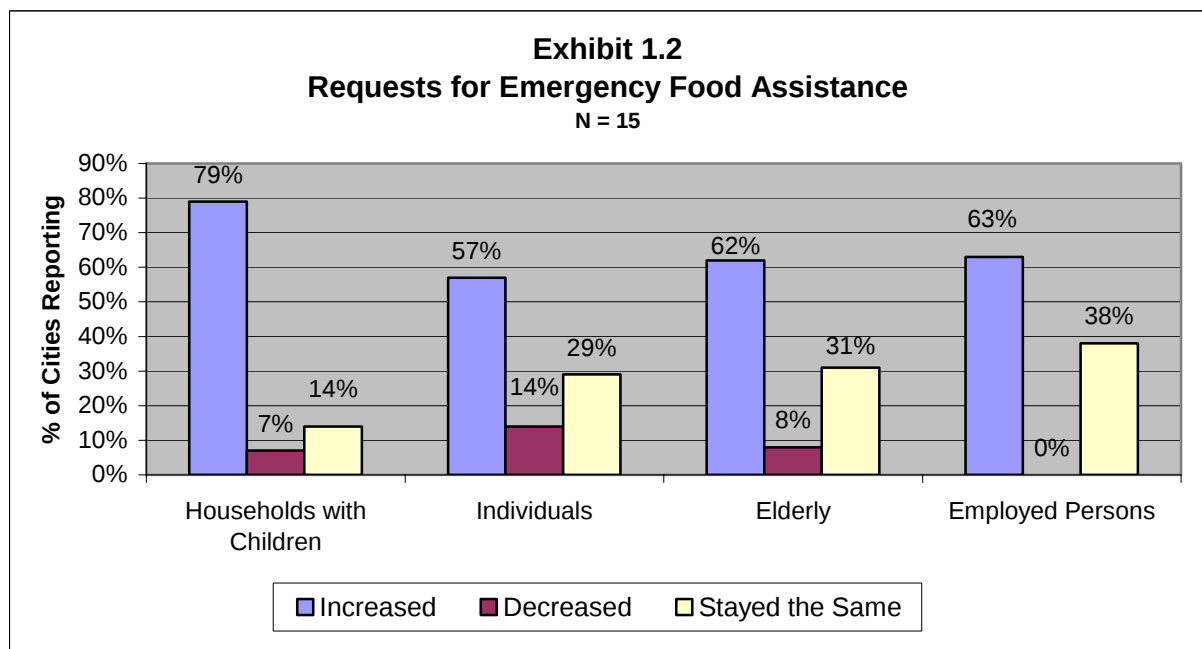


Persons who Accessed Emergency Food Assistance Programs & the Demand for Emergency Food Assistance

When asked if the total number of requests for emergency food assistance increased, decreased or stayed the same during the last year, 16 cities (80 percent of respondents) reported an increase, one city reported that requests had decreased, and three cities reported that requests have stayed the same.

On average across the 15 cities that responded, the total number of emergency food assistance requests was reported to have increased by 12 percent over the past year. The maximum increase, reported by Detroit, was 35 percent, while the only city reporting a decrease, Portland, reported a decrease of 6 percent. The median increase was 10 percent.

While requests increased overall, they did not increase evenly across all populations. The majority of cities reported an increase in requests for food assistance across all four subpopulations: households with children, individuals, the elderly and employed persons. However, 11 cities reported an increase for households with children while only eight cities did so for individuals. Exhibit 1.2 presents these results.



A number of cities reported that there were notable changes in the characteristics of persons receiving emergency food assistance during the last year. Louisville, Los Angeles and Boston reported seeing more elderly people seeking emergency food assistance than in previous years. San Francisco, Los Angeles, Salt Lake City and Boston all reported seeing more families in need. Louisville reported seeing more single-parent families, and Nashville and Detroit reported seeing more working families. The working poor were among the populations cited by Trenton, Denver and Philadelphia. Trenton, Denver and Nashville reported seeing more first-time recipients and having clients that they had not seen in many years return for assistance.

Cities were asked to provide an unduplicated count of persons who received food assistance during the last year across all food pantries, emergency kitchens, free or reduced-price lunch programs, home-delivered meal programs, Food Stamps or other food assistance programs. Cities were asked to report unduplicated counts separately for each program type. This new question was optional because it relied on data collected in a centralized, client-level tracking system or from separate administrative databases for each food assistance program. Because of the nature of the data needed to respond to this question, many cities did not respond or provided duplicated data.

For those cities that submitted at least partial data for this question, we calculated the percentage of each city's total population that received food assistance. On average, 19 percent of reporting cities' total populations used Food Stamps over the last year; 8 percent used food pantries; 2 percent used emergency kitchens; 6 percent benefited from free or reduced-price lunches, and less than one percent received a home-delivered meal.

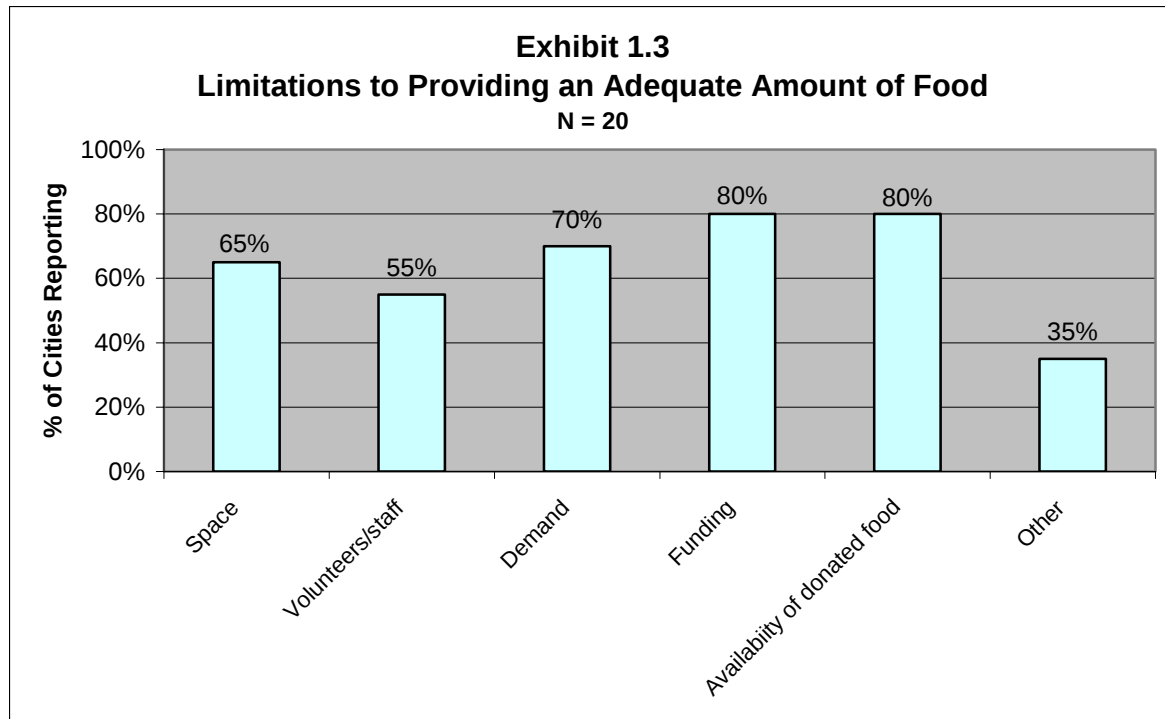
Cities were also asked to discuss patterns of demand for emergency food assistance. Fourteen cities reported that demand for emergency food assistance fluctuates by season. Eight of these cities noted that demand increases during the winter months. They attributed this spike in demand to increased utility costs. The rest of the cities reported that demand increases during the summer when children are out of school and access to school-based meal programs is limited. One city reported spikes in demand during both the winter and summer seasons.

The Capacity to Provide Emergency Food Assistance

Based on survey data from 15 cities, food pantries provided a total of 65,282,510 meals (an average of 4,352,167 meals per city) to needy residents during the last year. This equates to 117,674,805 pounds of food, or an average of 7,844,987 pounds per city.

Although the survey also asked cities to report this information for emergency kitchens as well as food pantries, much of the data received was not reliable, and therefore, is not included in this report. As cities capture more accurate data on the amount of food distributed, this information will be reported in future years.

Despite providing millions of pounds of food to needy residents during the last year, cities faced a number of limitations in providing an adequate amount of food. These are presented in Exhibit 1.3. All cities that responded to this question cited limitations.



The most commonly cited limitations to providing an adequate amount of food were funding and the availability of donated food or commodities. Fourteen cities cited meeting the demand for food assistance as a limitation to providing adequate food, and thirteen cities cited a lack of space. Seven cities cited “Other” limitations and specified the cost of maintaining food equipment, transportation, the availability of USDA Food Assistance Program resources, and struggles with partnering agencies.

To address these limitations, cities have undertaken a number of innovative efforts. For example, to increase financial resources available to emergency food programs, Detroit described expanding fundraising efforts to a national level and targeting businesses as a source of funds. Several cities have implemented rapid food distribution programs in which perishable and non-perishable food is taken to agencies for immediate distribution. A number of cities also implemented food recovery programs, which “rescue” already cooked unserved food from restaurants, hotels and events to distribute to needy residents.

The Unmet Need for Emergency Food Assistance

Unmet need is the percentage of people in need of emergency food assistance that do not receive it. Thirteen of the 19 survey cities reported that they could not meet the demand for emergency food assistance in their communities during the last year. An average of 17 percent of all people in the 13 survey cities who needed emergency food assistance did not receive it; 15 percent of households with children who needed assistance did not receive it. In addition to these 13 cities, other cities said that there is an unmet need, but were not able to quantify it or did not track this information. Salt Lake City was the only city to report that it met 100 percent of the need for emergency food assistance during the last year.

An official from Los Angeles, a city that reported it does not meet 21 percent of the demand for food assistance, summarized his community's hunger crisis this way:

Emergency food assistance facilities have to turn away people. According to the LA Regional Foodbank, over 30 percent of their food pantries have had to turn clients away and pantries that don't turn clients away are providing less food. In 2002, a food pantry would provide an average of eight to ten different USDA commodities per distribution. This holiday season, food pantries are providing three USDA commodities. Food pantries are tasked to serve more clients with the same amount of resources they had six years ago.

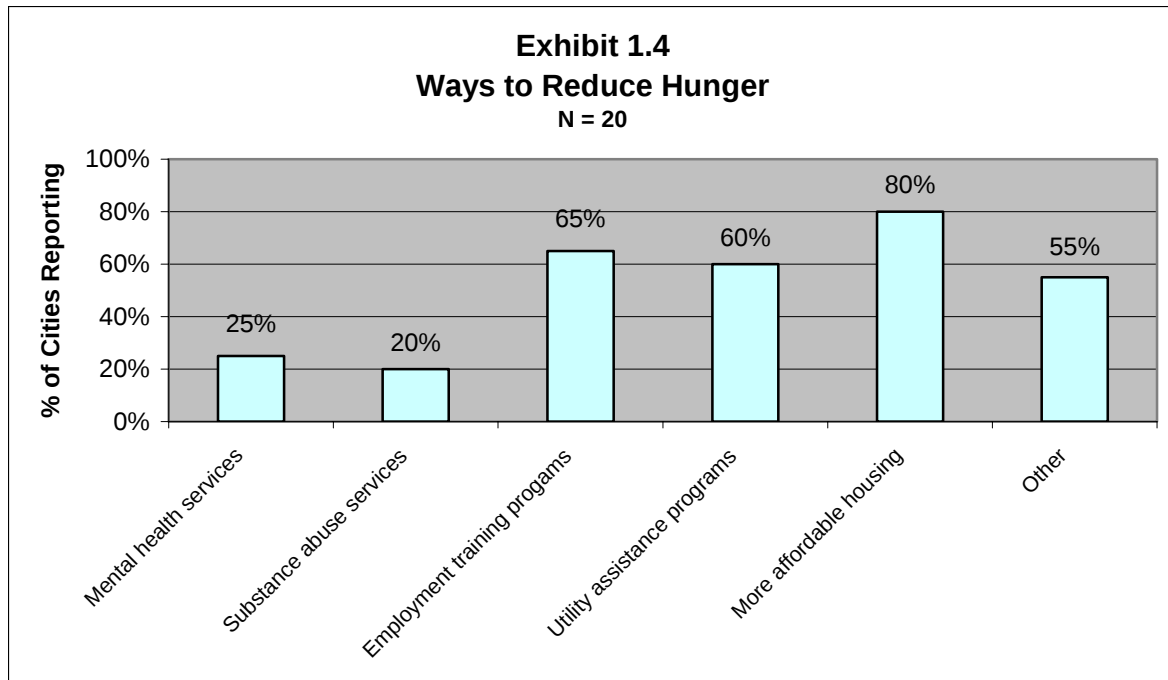
Twenty-one percent of the overall demand for emergency food assistance goes unmet. Pantries report needing an average of 661 additional pounds of food weekly, enough to distribute 35 more boxes weekly in order to meet the demand for food assistance. The 500 food pantries served by the Foodbank need an additional 9.8 million pounds of food annually in order to meet the current demand for food assistance. An estimated additional 1 million pounds of food is needed [for] soup kitchens and shelter programs, since some of these programs also report food shortages.

All responding cities reported that they expected requests for emergency food assistance to continue to increase in 2008. Eighteen of these cities expected an increase specifically among households with children. Officials in these cities pointed to economic conditions and the rising cost of living as the primary reasons to expect an increase in requests for food assistance.

City officials were also asked to choose the top three things their city needs to reduce hunger from the following list:

- Mental health services
- Substance abuse services
- Employment training programs
- Utility assistance programs
- More affordable housing
- Other (specify)

The results from the 20 cities that responded to this question are presented in Exhibit 1.4.



The most commonly cited way to reduce hunger was through building more affordable housing. City officials also reported that employment training programs and utility assistance programs were essential to eliminating hunger. Among responses in the “Other” category, officials listed educational opportunities, improved health care, increased government funding/support, more volunteerism, living wage, and affordable health care as keys to eliminating hunger.

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Hunger Findings

The findings from the Hunger portion of the survey are consistent with results from prior years. For example, 74 percent of survey cities reported that requests for emergency food assistance increased in 2006, compared to 80 percent of survey cities (16 cities) reporting an increase in 2007. Seventy percent of survey cities reported that requests for emergency food assistance increased specifically among households with children in 2006, compared to 79 percent (11 cities) reporting the same finding in 2007. However, the level of unmet need for food assistance decreased from 23 percent in 2006 to 17 percent in 2007 (among the 13 cities that provided data).

Overall, it appears that the need for emergency food assistance programs is continuing to increase and that cities are facing many challenges in responding to the demand for assistance. However, cities are also making progress toward eliminating hunger by increasing capacity at current programs, advocating for funding, and implementing creative responses to the problem. City’s specific efforts in these areas are detailed in the City Profile section of this report.

2. Homelessness

The majority of individuals and families experiencing homelessness are located in urban areas. According to the Annual Homelessness Assessment Report to Congress, there were an estimated 334,744 sheltered homeless persons on an average day between February 1 and April 30, 2005.¹ Seventy-five percent of sheltered homeless persons resided in central cities.² High poverty rates and the lack of affordable housing in cities may contribute to an increased rate of homelessness. In addition, individuals and families experiencing homelessness often relocate to cities to utilize the greater number of supportive services there. Cities have a greater number of emergency and transitional shelters, as well as permanent housing options for disabled persons. The availability of federal housing assistance programs, such as the Housing Choice Voucher program, sometimes is greater in cities. Homeless persons and families may also have greater access to mental health and substance abuse services, education and employment opportunities, and food assistance programs in cities.

This section presents the results from the Homelessness section of the U.S. Conference of Mayors Hunger and Homelessness Survey. The Homelessness portion of the survey consisted of 19 open-ended and data-driven questions. For purposes of the survey, homeless persons are defined as those who reside in shelters, on the streets, in cars, or in other locations not intended as residences. This section provides a 23-city overview of the causes of homelessness, the demand for homeless assistance programs, persons who experienced homelessness, and the capacity to provide shelter or housing for homeless persons.

Causes of Homelessness

Officials in survey cities were asked to choose the three main causes of homelessness among households with children and among singles and unaccompanied youth from the following list:

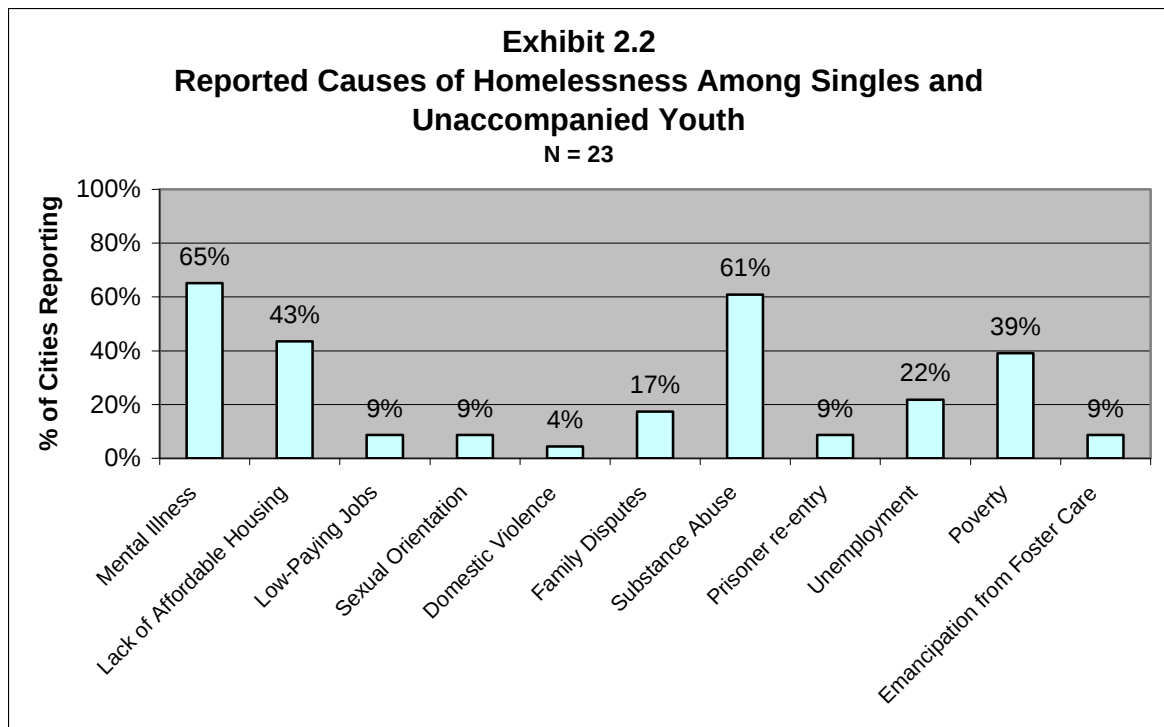
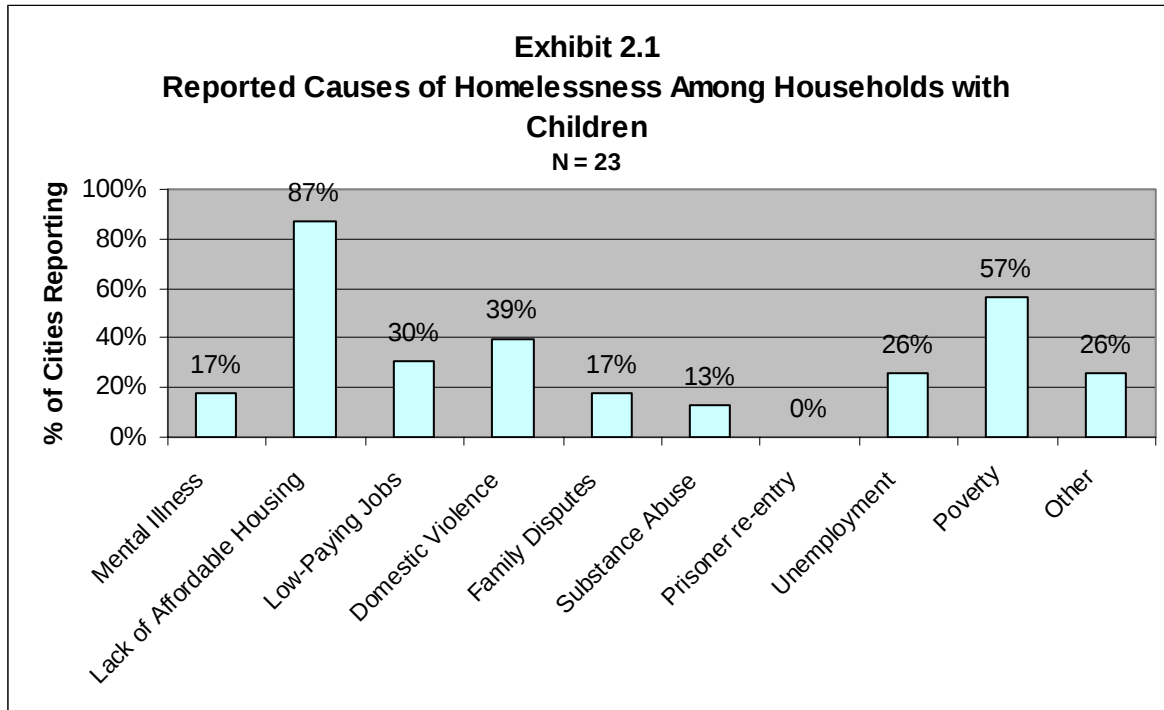
- Mental illness and the lack of needed services
- Lack of affordable housing
- Low-paying jobs
- Domestic violence
- Family disputes
- Substance abuse and the lack of needed services
- Prisoner re-entry
- Unemployment
- Poverty
- Sexual orientation (only presented for singles)
- Emancipation from foster care (only presented for singles)
- Other (specify)

Exhibit 2.1 presents the results for households with children and Exhibit 2.2 the results for singles and unaccompanied youth. The differences between the two groups are striking. For singles, cities most often cited disabilities as primary causes of homelessness; for households with children, they cited economic issues. Lack of affordable housing was cited by 20 cities (87 percent of respondents) as a primary cause of family homelessness. The next most commonly reported cause was poverty, cited by 13 cities (57 percent), followed by domestic violence, cited by 9 cities (39 percent). Cities

¹ U.S. Department of Housing and Urban Development. *The Annual Homeless Assessment Report to Congress*, (Washington, D.C.: U.S. Department of Housing and Urban Development, 2007), 22.

² *Ibid.*, 44.

reported mental illness as the most common cause of homelessness for singles (15 cities, or 65 percent of respondents), closely followed by substance abuse (14 cities, or 61 percent). By contrast, less than 20 percent of respondents believed that mental illness or substance abuse were principal causes of family homelessness.



Persons Experiencing Homelessness

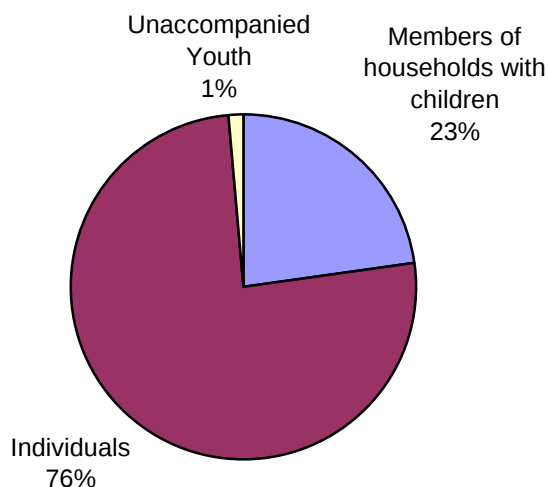
According to the survey data, 193,183 unduplicated persons used emergency shelter and/or transitional housing programs over the past year in the 21 survey cities with available data. This is an unduplicated count of persons, meaning that if someone returns to the same emergency shelter each day for two months during the last year, he would only be counted once.

During the last year, members of households with children made up approximately 23 percent of persons using emergency shelter and transitional housing programs; individuals made up approximately 76 percent; and unaccompanied youth made up just 1 percent. These results are presented in Exhibit 2.3. The proportion of single individuals contrasts with some estimates that have reported an equal number of singles and persons in families within the homeless population. In addition, these numbers only represent shelter use in urban areas.

Suburban and rural areas tend to have a greater focus on providing housing and services to homeless families.³ However, these numbers reflect shelter use over an entire year and not on a single night. Because single persons tend to have shorter stays in homeless shelters, there is a higher turnover rate, meaning that over the course of a year a singles shelter can serve more people than a family shelter. The longer the reporting period, the greater the ratio of singles to families.

During the last year, members of households with children made up approximately 23 percent of persons using emergency shelter and transitional housing programs; individuals made up approximately 76 percent; and unaccompanied youth made up just 1 percent.

Exhibit 2.3
Sheltered Homeless Persons in Survey Cities
N = 21



³ Yvonne Vissing. *Out of Sight, Out of Mind: Homeless Children and Families in Small-Town America*, (Lexington, KY: The University Press of Kentucky, 1996).

When asked if the total number of people accessing emergency shelter and transitional housing programs increased, decreased or stayed the same during the last year, six survey cities reported an increase while five cities reported a decrease. Ten cities reported a specific increase in the number of households with children accessing these programs.⁴ This category also had the largest percentage change since 2006. Detroit, St. Paul and Boston reported significant increases of 15 percent, 14 percent and 13 percent respectively in the number of households with children using emergency shelter and transitional housing programs.

Six cities reported an increase in the number of individuals accessing emergency shelters and transitional housing programs during the last year. Seven cities reported a decrease in this population.⁵ Salt Lake City and Detroit reported an increase of ten percent among individuals, while Portland reported a 12 percent decrease in this population. Over the past year, four cities reported an increase in unaccompanied youth, three cities reported a decrease in this population, and another three cities reported that the percentage of unaccompanied youth stayed the same.⁶ The number of unaccompanied youth seemed to fluctuate more than other homeless subpopulations. Louisville reported an increase in unaccompanied youth of 33 percent, Seattle reported a decrease in unaccompanied youth of 43 percent, and Kansas City reported a decrease of 28 percent.

We divided the number of sheltered homeless persons in each city by each city's overall population to calculate a rate of homelessness. We found that, in the majority of cities surveyed, one to three percent of the city's population used a homeless shelter or transitional housing program over the past year.

Many cities reported that demand for shelter fluctuated by season. Of the 21 cities that experienced fluctuations, 14 reported increased demand for shelter in the winter months. Two of these cities attributed this fluctuation to individuals migrating from colder regions to take advantage of their mild weather. In addition, five cities cited higher shelter use among families with children in the summer months. City officials believe this pattern results from families being more mobile in the summer months because their children are not attending school.

Cities were also asked to provide data on the characteristics of persons using emergency shelter and transitional housing during the past year. Two tables (one for members of households with children and one for individuals and unaccompanied youth) asked cities to report the ages, gender, ethnicity, race, employment status, veteran status, disabling conditions and number of victims of domestic violence among the sheltered homeless population. This new question was optional because it relied on data collected from a Homeless Management Information System (HMIS)⁷ or other client-level administrative database. However, not all cities have functional HMIS systems, have a year's worth of data in their HMIS, or have unduplicated data. Therefore, many cities were not able to provide this

⁴ Fourteen cities provided data for this question. Ten cities, 71 percent, reported an increase in the number of households with children accessing emergency shelter and transitional housing programs.

⁵ Fourteen cities provided data for this question. Six cities, 43 percent, reported an increase in the number of individuals accessing emergency shelter and transitional housing programs while seven cities, 50 percent, reported a decrease.

⁶ Ten cities provided data for this question.

⁷ An HMIS is a computerized data application that facilitates the collection of information on homeless individuals and families using residential or other homeless assistance services and stores that data in an electronic format.

information. Sixteen cities completed the tables, but only a few completed both tables. A number of cities provided partial responses or only completed portions of each table.⁸

Exhibit 2.4 provides detailed demographic characteristics of sheltered homeless people in the survey cities. According to the survey data, nearly 85 percent of members of households with children are under age 35. This contrasts sharply with the proportion of singles and unaccompanied youth under age 35. Almost three-quarters of singles in these cities are over 35 years old, though very few in either group are elderly (62 or older).

Exhibit 2.4		
Demographic Characteristics of Sheltered Homeless Persons as Reported by Cities^a (N = 16)		
Characteristic	% Members of Households with Children^b	% Singles and Unaccompanied Youth^b
Age		
Under 5	25.4%	< 1%
5 – 17	35.2%	1.3%
18 – 34	23.5%	24.8%
35 – 61	15.7%	68.2%
62 and over	1.6%	5.4%
Gender (Adults only)		
Male	35.0%	67.5%
Female	65.0%	32.5%
Ethnicity		
Non-Hispanic/Latino	76.0%	87.2%
Hispanic/Latino	24.0%	12.8%
Race		
American Indian or Alaska Native	4.0%	2.5%
Asian	2.0%	1.6%
Black or African-American	47.0%	45.7%
Native Hawaiian or Other Pacific Islander	1.0%	< 1%
White	47.0%	50.0%
Employed Persons (Adults only)	17.4%	13.0%
Veterans (Adults only)	2.8%	16.9%
Victims of Domestic Violence (Adults only)	12.1%	7.2%
Disability Status (Adults only)		
Mental health	7.9%	22.4%
Substance abuse	9.6%	37.1%
Persons with HIV/AIDS	< 1%	1.6%
Physical disability	3.9%	11.9%
Developmental disability	0.8%	3.7%

^a The number of cities reporting data on each of the characteristics presented in the exhibit was not consistent. For Members of Households with Children, 12 cities reported Age, 16 cities reported Gender, 15 cities reported Ethnicity, 16 cities reported Race, 15 cities reported Employment and Veterans Status, 14 cities reported Victims of Domestic Violence, and 14 cities reported Disability Status. For Singles and Unaccompanied Youth, 14 cities reported Age, 16 cities reported Gender, 16 cities reported Ethnicity, 16 cities reported Race, 15 cities reported Employment and Veterans Status, 14 cities reported Victims of Domestic Violence, and 15 cities reported Disability Status.

^b Totals may exceed 100 percent due to rounding. For Race, several cities reported clients in multiple categories and therefore the totals exceed 100 percent.

⁸ Although these tables requested information on a year's worth of unduplicated data, we suspect that many cities that did provide data, provided demographic information from a specific point-in-time or based their responses on estimates.

More than two-thirds of sheltered singles and unaccompanied youth in the survey cities are male. Among adults in households with children, the opposite is true: only 35 percent of this population is male. As might be expected, a higher percentage of singles are veterans and a higher percentage of adults in households with children are victims of domestic violence.

Rates of disability were substantially higher among single adults than among adult members of households with children. According to the survey data, approximately 22 percent of sheltered single adults have a mental health issue, compared to less than 8 percent of adults in households with children. Similarly, approximately 37 percent of single adults have a substance abuse issue, compared to less than 10 percent of adults in households with children. In fact, rates of disability were three times higher for single adults than adults in households with children.

A number of cities reported that there were notable changes in the characteristics of persons experiencing homelessness during the last year. For example, three cities reported that there was an increase in the number of families with children in the homeless system, while one city reported a decrease in this population. Five cities reported an increase in the number of single clients; three of these cities cited an increase in single women. Four cities reported an increase in the number of mentally or physically disabled people seeking shelter. Two cities reported an increase in the number of first-time homeless persons. Seven cities reported that there were no significant changes during the last year; and one city did not respond to this question.

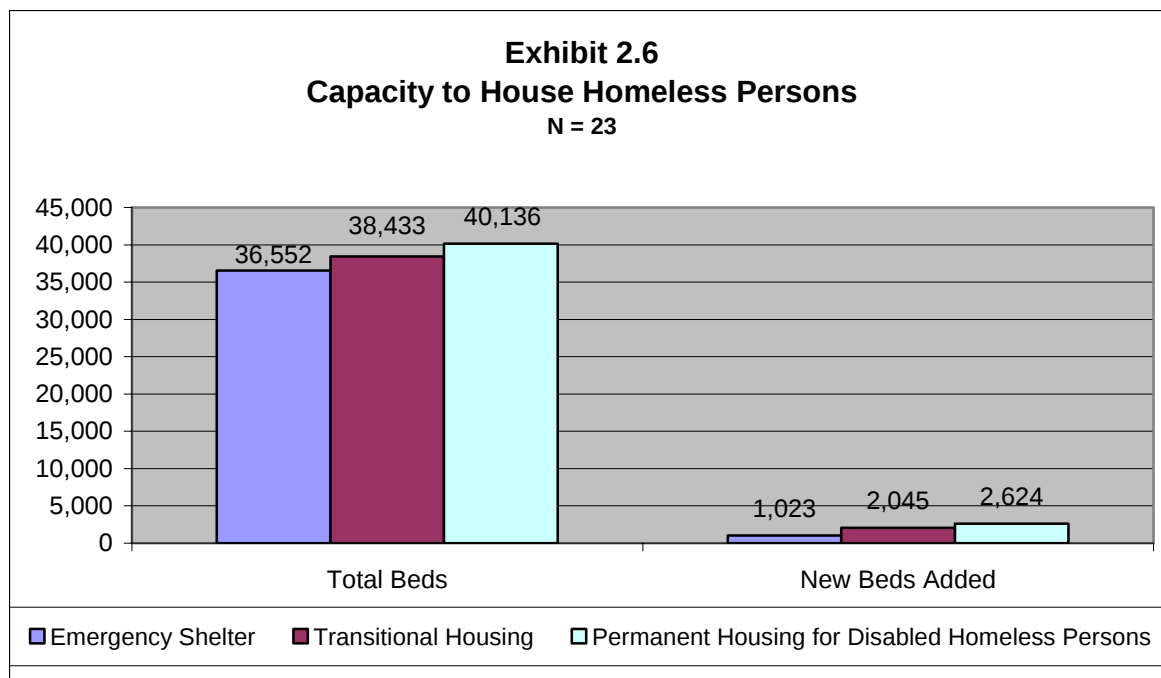
The survey also asked cities to provide the average length of a single homeless stay for both members of households with children and single individuals and unaccompanied youth. Results for the average length of stay for the 19 cities that reported these data are summarized in Exhibit 2.5.

Exhibit 2.5			
Average Lengths of Stay for Households with Children and Singles During the Last Year			
(N = 19)			
	Average Length of Stay	Shortest Average Length of Stay	Longest Average Length of Stay
Households with Children	5.7 months	24 nights	18 months
Singles and Unaccompanied Youth	4.7 months	21 nights	11 months

Several cities noted that they do not collect length of stay data separately for households with children and individuals. For those that do, the average length of a single homeless stay for households with children was 5.7 months; the average length of a single homeless stay for singles and unaccompanied youth was 4.7 months. For households with children, average lengths of stay ranged from 24 nights in Cleveland to eighteen months in Santa Monica. For singles and unaccompanied youth, average stays ranged from 21 nights in Cleveland to more than 11 months in Nashville.

The Capacity to House Homeless Persons

Exhibit 2.6 presents the number of emergency, transitional and permanent beds available in survey cities during the last year. The exhibit also shows the number of new beds added during the last year.



A total of 115,121 emergency shelter, transitional housing and permanent housing beds are available for homeless persons in the twenty-three survey cities. In addition, cities reported a total of 27,792 units are available. Units are distinct living areas (e.g., apartments) with multiple beds that are typically used to house families. Approximately 35 percent of beds in the survey cities are in permanent housing programs. In fact, there are more permanent housing beds and new beds added during the last year than emergency shelter or transitional housing. This could be due in part to the U.S. Department of Housing and Urban Development's (HUD's) recent emphasis on providing permanent housing for disabled homeless persons. Permanent housing includes a number of different HUD-funded programs (Shelter Plus Care, Section 8 Mod Rehab Single Room Occupancy and the Permanent Housing component of the Supportive Housing Program) as well as other programs that may be funded at the state or local level. A total of 5,692 beds were added during the last year across all three categories; this represents 5 percent of all beds in 2007.

The Unmet Need for Housing Homeless Persons

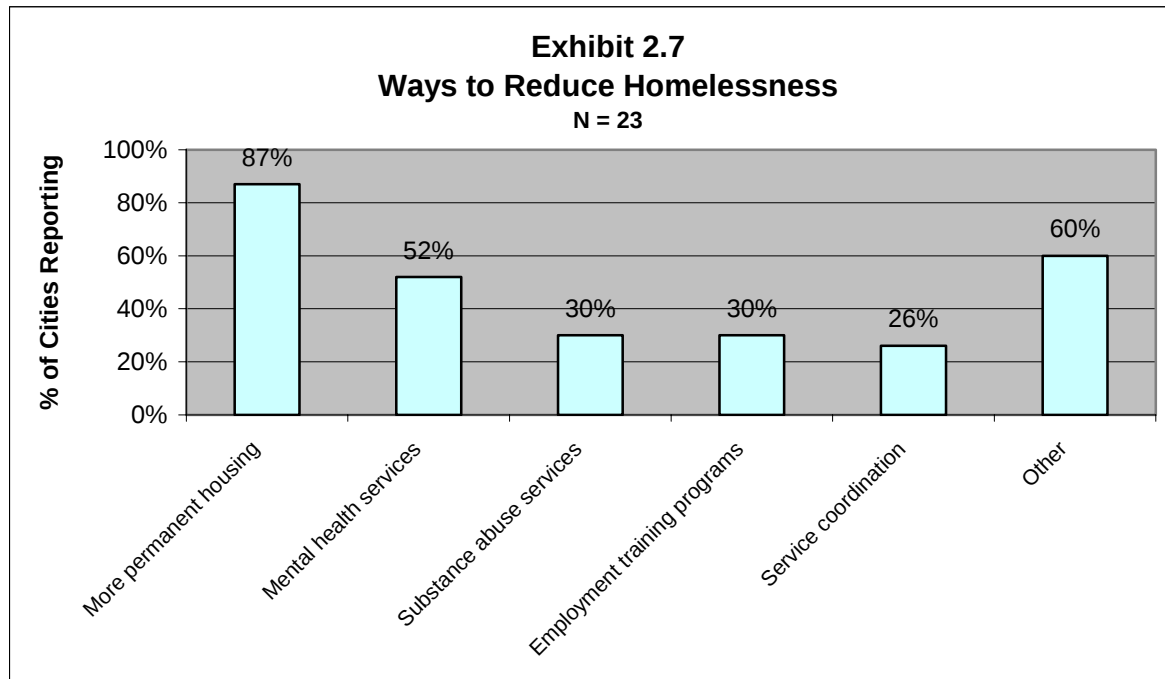
Many cities reported that they have to turn away persons experiencing homelessness because of a lack of resources. Fifty-two percent (12) of the 23 cities noted that they turn people away because of a lack of capacity all or some of the time. Some of these cities reported sending people to other cities or counties when facilities are full, prolonging hospital stays when shelter space is not available, or creating waitlists for shelters. The remaining 11 cities do not turn people away. Some of these cities, such as Charlotte, created a temporary overflow system to meet the increased demand during the last year. Others, such as Miami, have policies that no family will be turned away.

Fifteen of the survey cities predict that requests for emergency shelter will increase in 2008. All reported that there would be increases in requests from households with children. Officials in these cities cited the foreclosure crisis, increases in poverty, and a pattern of steady increases in the numbers of homeless families entering the homeless system during the year as reasons to expect an increase in requests for emergency shelter in 2008.

City officials were also asked to choose the top three things their city needs to reduce homelessness from the following list:

- More permanent housing
- Mental health services
- Substance abuse services
- Employment training programs
- Service coordination
- Other (specify)

The results from the 23 cities that responded to this question are presented in Exhibit 2.7.



The most commonly cited way to reduce homelessness was to increase the amount of permanent housing. City officials also reported that mental health services, substance abuse programs and employment training programs were critical to addressing homelessness. Among responses in the “Other” category, officials listed more rental housing subsidies, more housing vouchers, more affordable housing, additional funding, housing retention and eviction services, and jobs that pay a living wage as keys to ending homelessness.

Homelessness Findings

Findings from the Homelessness portion of the survey are generally consistent with findings from the 2006 Hunger and Homelessness Survey, with some important differences.

Survey cities in 2006 estimated that households with children made up approximately 30 percent of the homeless population compared to an estimated 23 percent in 2007. Rates of disability also differed between 2006 and 2007. In 2006, cities reported that persons with mental illness represented approximately 16 percent of the homeless population. This included both individuals and adults in households with children. In 2007, cities reported that approximately 22 percent of single adults and 8 percent of adults in households with children had mental health issues. Additionally, in 2006, cities

reported that persons with substance abuse issues represented 26 percent of the homeless population. In 2007, survey cities estimated that 37 percent of single adults and 10 percent of adults in households with children had substance abuse issues. Finally, the average lengths of stay in emergency and transitional housing programs differed slightly from 2006 to 2007. In 2006, cities reported that the average length of time people remain homeless was 8 months. This included both individuals and households with children. In 2007, cities reported the average length of a single homeless stay for singles was 4.7 months, and for households with children was 5.7 months.

Although homelessness remains a serious problem, there are several promising findings from the 2007 survey data. First, the majority of survey cities reported that the demand for shelter among homeless individuals either decreased or stayed the same over the past year. Second, the percentage of cities reporting that they had to turn people away from emergency shelters decreased from 77 percent in 2006 to 52 percent in 2007.

More information on cities' efforts toward reducing homelessness is provided in the City Profile section.

3. City Profiles

This section of the report includes profiles of the cities that participated in the 2007 U.S. Conference of Mayors Survey on Hunger and Homelessness. The data included in the profiles are self-reported. These profiles were compiled by reviewing survey responses and selecting information, such as exemplary programs and the main causes of hunger and homelessness, to inform the reader about each city's efforts to reduce hunger and homelessness.

In an effort to contextualize each city's response to hunger and homelessness, additional data were included in each city profile: total population, geographic area, per capita income, median house value, and the percent of persons below the poverty level. The data are as follows¹:

- Total population (Source: U.S. Census Bureau, 2006 American Community Survey)
- Geographic area (Source: U.S. Census Bureau, 2000 Census of Population and Housing)
- Per capita income (Source: U.S. Census Bureau, 2006 American Community Survey)
- Median house value (Source: U.S. Census Bureau, 2006 American Community Survey)
- Percent below the poverty level (Source: U. S. Census Bureau, 2000 Census of Population and Housing)

Several cities did not complete the Hunger section of the survey, or did not provide complete responses to many narrative questions regarding exemplary programs or innovative efforts. Therefore, some city profiles include only information on cities' efforts to reduce homelessness.

¹ Data for Louisville are from the ESRI Market Profile for 2007.



BOSTON, MASSACHUSETTS

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• HIGH HOUSING COSTS • POVERTY • HIGH UTILITY COSTS	• LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • POVERTY	• MENTAL ILLNESS • LACK OF AFFORDABLE HOUSING • POVERTY
NUMBER OF PEOPLE SERVED	-	4,040	2,636
DEMAND	INCREASED	DECREASED	INCREASED

BOSTON'S EFFORTS TO REDUCE HUNGER

In Boston, the demand for food assistance has increased during the last year among families with children and the elderly. During the winter months, when heating costs are highest, there is a significant spike in demand for emergency food assistance. In the summer, when schools are out of session and families do not have access to school breakfast and lunch programs for their children, there is an increased demand for food at summer youth programs, food pantries, and community centers.

The City of Boston has numerous efforts in place to respond to increasing demand and meet the needs of its residents. For example, the mayor's Summer Hunger grants provide emergency food agencies with additional resources to meet increased demand for food during the summer months. In addition, during the last year Boston's Faith Pentecostal Church greatly expanded its food distribution efforts in the Franklin Hill neighborhood after realizing it was significantly underserved. In November 2007, the church's pantry distributed almost 19,000 pounds of food to neighborhood residents, more than twice its usual monthly total. The church anticipates continuing to distribute this increased amount of food, reaching double the households previously served.

BOSTON'S EFFORTS TO REDUCE HOMELESSNESS

The City of Boston works closely with numerous state and non-profit agencies to combat homelessness. Currently, two exemplary projects are targeting resources toward homelessness prevention activities. The first is the Boston Homelessness Prevention Clearinghouse, funded by the Phyllis Fireman Charitable Foundation, developed two years ago. The purpose of the clearinghouse is to help households who are at risk of losing their housing, by connecting them with services, benefits, case management, and funds to address arrears.

A second initiative, recently launched by Mayor Menino, is the Boston Common Ground Housing Initiative, designed to increase housing opportunities for unsheltered, long-term homeless individuals living in the vicinity of the Boston Common. The initiative is led by the Mayor's Emergency Shelter Commission and the Boston Housing Authority (BHA). More than 50 volunteers of BHA staff and homeless outreach workers divided into eight daytime street teams and two night time mobile outreach teams to identify homeless people who could use housing assistance. The new initiative has reached out to 250 homeless persons and collected about 150 applications thus far.

MAYOR: MAYOR THOMAS M. MENINO

GEOGRAPHIC AREA: 48 SQUARE MILES

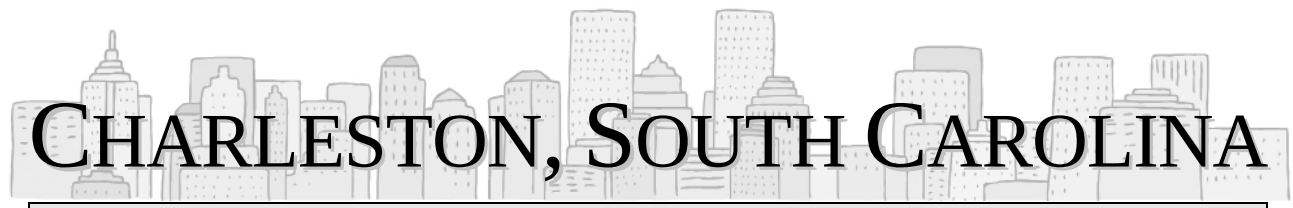
MEDIAN HOUSE VALUE: \$432,800

TOTAL POPULATION: 575,187

PER CAPITA INCOME: \$29,243

PERCENT BELOW POVERTY LINE: 19.5%

CITY WEBSITE: [HTTP://WWW.CITYOFBOSTON.GOV/](http://www.cityofboston.gov/)



CHARLESTON, SOUTH CAROLINA

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	NOT AVAILABLE	• MENTAL ILLNESS • SUBSTANCE ABUSE • PRISONER RE-ENTRY	• LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • ADEQUATE, AFFORDABLE HEALTH CARE
NUMBER OF PEOPLE SERVED	-	1,479	179
DEMAND	NOT AVAILABLE	NOT AVAILABLE	NOT AVAILABLE

CHARLESTON'S EFFORTS TO REDUCE HOMELESSNESS

In the last year, Charleston has experienced an increase in the number of mentally and physically ill people seeking homeless services; an increase in the number of men and women ages 18-35; and an increase in the number of sex offenders seeking shelter. In fact, providers report that the majority of emergency shelter clients are physically or mentally ill or prisoners re-entering the community. Local advocates attribute the demand for shelter in Charleston to the lack of homeless services in other cities and towns in the state and the lack of housing options for special populations, including sex offenders.

Charleston's emergency shelters operate at full capacity most nights, indicating a likely need for more shelter beds. Shelters receive frequent calls from hospitals and social workers seeking placement; one provider reported that clients are often discharged directly from hospitals or institutions into emergency shelters. If emergency shelters are full, clients are referred to another shelter or program. Hospital stays are often extended or individuals stay with relatives or in motels while they wait for shelter beds to become available. To reduce homelessness, advocates say that Charleston needs more permanent housing, improved service coordination, and less duplication of services.

To better meet the demand for shelter beds, Crisis Ministries, the largest homeless shelter and provider of supportive services in South Carolina, is currently building a Transitional Living Center (TLC) for homeless families. The TLC is located within one block of the main shelter and will provide a home-like environment for up to four families. Over the course of a typical year, the TLC is expected to house 25 families, which could include as many as 75 children. The facility has a shared kitchen where families can prepare and eat their meals together, as well as a staff office to provide supportive services on site. Families living at the TLC facility will receive training to develop skills in household management, budgeting, and positive parenting. Literacy training, employment training, GED preparation, and employment assistance will also be provided to help the adults obtain and maintain gainful employment. The goal of the TLC program is to provide a positive environment in which homeless families can stabilize, heal, and strengthen. By living in a nurturing environment away from a traditional shelter setting, families will get a reprieve from the challenges of congregate living and are expected to function more positively as a result.

MAYOR: MAYOR JOSEPH P. RILEY, JR.
GEOGRAPHIC AREA: 97 SQUARE MILES
MEDIAN HOUSE VALUE: \$249,300

TOTAL POPULATION: 99,997
PER CAPITA INCOME: \$29,338
PERCENT BELOW POVERTY LINE: 19.1%

CITY WEBSITE: [HTTP://WWW.CHARLESTONCITY.INFO/](http://www.charlestoncity.info/)



CHARLOTTE, NORTH CAROLINA

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • HIGH HOUSING COSTS • POVERTY	• MENTAL ILLNESS • FAMILY DISPUTES • SUBSTANCE ABUSE	• LACK OF AFFORDABLE HOUSING • DOMESTIC VIOLENCE • FAMILY DISPUTES
NUMBER OF PEOPLE SERVED	-	7,308	2,190
DEMAND	INCREASED	NOT AVAILABLE	NOT AVAILABLE

CHARLOTTE'S EFFORTS TO REDUCE HUNGER

In an effort to overcome a lack of funding, inadequate staffing, and a reduction in donated food and commodities, five hunger prevention agencies in Charlotte collaborated to form The Nutrition Coalition. Participating agencies include: Friendship Trays, a private meals-on-wheels program; The Gleaning Network, which harvests surplus produce from local farms; Community Food Rescue, a fresh and perishable food recovery program; the Culinary School of Charlotte, which provides classes in food preparation and career development in the food industry for low-income, at-risk individuals; and Loaves & Fishes, Charlotte's network of 16 food pantries. The Nutrition Coalition advocates for additional resources for hungry people and educates the general public about local hunger issues.

CHARLOTTE'S EFFORTS TO REDUCE HOMELESSNESS

Adopted in October 2006, Charlotte's ten-year plan to end homelessness focuses on providing better services and more housing for chronically homeless people. The plan focuses on increasing housing subsidies and more effectively preventing homelessness – two high priority issues identified through a strategic needs assessment process.

Officials in Charlotte have documented that shelter demand varies by season and that single individuals and families with children use shelters differently. For example, demand increases among single men in the winter months, with more than 200 individuals seeking shelter at the Emergency Winter Shelter in Charlotte. Among families with children, demand for shelter increases in the spring and summer months because an alternative seasonal sheltering program closes in April. Also, city officials believe that many families relocate to the area prior to schools starting in August and that this may contribute to the increased need for shelter during the summer months. One initiative that works towards combating the increase in shelter usage focuses exclusively on homelessness prevention. Run by Crisis Assistance Ministries, the program provides emergency financial assistance to residents experiencing a housing crisis, mainly families with children. Typically, assistance is provided when the family has received an eviction notice or has utility bills that are past due. Officials hope that programs like this will help those experiencing a housing crisis to maintain their home and avoid ending up in shelter.

MAYOR: MAYOR PATRICK MCCRORY

GEOGRAPHIC AREA: 242 SQUARE MILES

MEDIAN HOUSE VALUE: \$164,300

TOTAL POPULATION: 648,387

PER CAPITA INCOME: \$29,825

PERCENT BELOW POVERTY LINE: 10.6%

CITY WEBSITE: [HTTP://WWW.CHARMECK.ORG/](http://www.charmeck.org/)



HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • POVERTY • LACK OF EDUCATION	• LACK OF AFFORDABLE HOUSING • FAMILY DISPUTES • POVERTY	• LACK OF AFFORDABLE HOUSING • FAMILY DISPUTES • POVERTY
NUMBER OF PEOPLE SERVED	-	NOT AVAILABLE	NOT AVAILABLE
DEMAND	INCREASED	NOT AVAILABLE	NOT AVAILABLE

CHICAGO'S EFFORTS TO REDUCE HUNGER

The city of Chicago is facing increased demand for food assistance at a time when the amount of donated and commodity foods is declining. This has resulted in several hunger agencies turning away clients and reducing their hours and days of distribution.

Two exemplary programs in Chicago work to combat hunger experienced by city residents: the Chicago Community Kitchen and the Producemobile Program. The Chicago Community Kitchen's program, run by the Greater Chicago Food Depository (GCFD), simultaneously provides meals to hungry children and trains unemployed adults interested in working in the food service industry. While receiving training in the culinary arts, students in the Community Kitchen program create more than 2,000 meals a day that are distributed through the Food Depository Kids Cafés. The Producemobile program, also run by GCFD, delivers donated fresh fruits and vegetables directly to hungry people across Chicago.

CHICAGO'S EFFORTS TO REDUCE HOMELESSNESS

The City of Chicago has an extensive service delivery system to help meet the needs of its homeless population. One example of this system is the Homelessness Prevention Call Center, launched in early 2007. The Call Center is a collaboration of several City agencies, Catholic Charities, and several other major homelessness prevention providers. Its goal is to improve access to the types of emergency resources necessary to prevent households from becoming homeless. Chicagoans who call 311, the City's non-emergency help line, requesting short-term financial assistance to avoid eviction or utility shut-off are transferred to the Call Center, which screens the callers for eligibility for assistance programs and connects them with appropriate resources to help them address their situations.

A new component of Chicago's service delivery system is the Rental Housing Support Program. In 2006, the Illinois General Assembly enacted legislation approving a real estate transaction fee to generate additional funds for housing subsidy programs. Chicago's Low-Income Housing Trust Fund receives a percentage of these new funds and anticipates using them to fund the program, which will make available 740 rental housing vouchers specifically designated for homeless persons. The City has already identified service providers that will provide case management to help homeless families and individuals who receive rental subsidies under the Program retain their housing and access supportive services as needed.

MAYOR: MAYOR RICHARD M. DALEY	TOTAL POPULATION: 2,749,283
GEOGRAPHIC AREA: 227 SQUARE MILES	PER CAPITA INCOME: \$24,219
MEDIAN HOUSE VALUE: \$277,900	PERCENT BELOW POVERTY LINE: 19.6%
CITY WEBSITE: HTTP://WWW.EGOV.CITYOFCHICAGO.ORG/	



HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• POVERTY • UNEMPLOYMENT	• LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE • POVERTY	• LACK OF AFFORDABLE HOUSING • DOMESTIC VIOLENCE • POVERTY
NUMBER OF PEOPLE SERVED	-	11,164	1,939
DEMAND	STAYED THE SAME	NOT AVAILABLE	NOT AVAILABLE

CLEVELAND'S EFFORTS TO REDUCE HOMELESSNESS

The most common characteristic of Cleveland's homeless population is poverty. Individuals and families who experience homelessness lack the financial resources to pay for rental housing. More rental housing subsidies, more employment opportunities with a living wage, and more substance abuse services would help reduce homelessness in Cleveland.

There are multiple efforts in Cleveland to link homeless persons to the services needed to address the causes of their homelessness. All shelter programs have staff dedicated to helping residents find appropriate services and gain access to mainstream benefits like TANF and Food Stamps. Various service providers also assign staff to the main shelters to assure ease of access and make referrals more efficient. A number of agencies also have outreach workers that try to encourage persons living on the streets to access supportive services. Additionally, Cleveland has a network of community-based homeless prevention programs that provide a variety of services, including: outreach to households facing eviction; landlord/tenant mediation with funds for arrearages; first month's rent/security deposit; utility assistance; and legal services targeted to persons facing the loss of subsidized housing.

Cleveland has made significant efforts to address the special needs of certain subpopulations of homeless people. For example, in response to the considerable increase in the number of ex-offenders returning to Cleveland from prison, the City has engaged the community in an extensive planning effort to develop effective re-entry strategies that include housing options other than shelters. A collaborative effort among the City, the State of Ohio, and an experienced non-profit provider has resulted in the considerable expansion of a residential program to help ex-offenders transition back into the community.

The First Call for Help phone assistance service tracks the availability of shelter beds and refers persons to the three large publicly funded shelters when smaller non-profit shelters are full. A second program, the Housing First Initiative, is a local effort to create 1,000 additional units of permanent supportive housing targeted to long-term homeless individuals. To date, 417 units are occupied or under development. Heading Home, a City and County sponsored affordable housing and homeless prevention plan was completed in February 2007, after a two-year community-based strategic planning process.

MAYOR: MAYOR FRANK G. JACKSON

GEOGRAPHIC AREA: 78 SQUARE MILES

MEDIAN HOUSE VALUE: \$90,400

TOTAL POPULATION: 406,427

PER CAPITA INCOME: \$15,635

PERCENT BELOW POVERTY LINE: 26.3%

CITY WEBSITE: [HTTP://WWW.CITY.CLEVELAND.OH.US/](http://www.city.cleveland.oh.us/)



HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• HIGH HOUSING COSTS • TRANSPORTATION COSTS • POVERTY	• MENTAL ILLNESS • LOW-PAYING JOBS • UNEMPLOYMENT	• LACK OF AFFORDABLE HOUSING • FAMILY DISPUTES • POVERTY
NUMBER OF PEOPLE SERVED	-	59,363	12,117
DEMAND	INCREASED	NOT AVAILABLE	NOT AVAILABLE

DENVER'S EFFORTS TO REDUCE HUNGER

In the past year, Denver has seen a steep increase in the number of persons served by food pantries and emergency kitchens, with an increased demand for food assistance crossing all categories – individuals, households with children, and elderly persons. Moreover, officials estimate that approximately 17 percent of people who need food do not access emergency food assistance services. Among households with children, approximately 10 percent of the demand for emergency food assistance goes unmet.

The City of Denver has developed a Hunger Task Force and has several key programs that address the issue of hunger. Metro CareRing, an emergency assistance service supported by a partnership of church congregations, other religious groups, individuals, businesses, and foundations, provides emergency food and other services to 30,000 people in metro Denver annually. The Food Bank of the Rockies (FBR) provides food supplies to more than 1,000 hunger-relief programs across Northern Colorado and Wyoming. Last year, FBR distributed more than 22 million pounds of food, enough to provide almost 47,000 meals each day to children, seniors, and families in need. Denver also has an active Meals on Wheels program in which dieticians create nutritionally balanced meals for seniors.

DENVER'S EFFORTS TO REDUCE HOMELESSNESS

Denver has several programs in place to prevent and respond to homelessness, including the Delores Project, the Crossing, Denver Street Outreach, Denver Housing First, and the Gateway Hotel. The Colorado Coalition for the Homeless (CCH) Family Support Program provides emergency shelter services and case management, along with access to other emergency resources such as rental assistance, child care, and medical services. The Program offers early intervention to children in homeless families with the goal of meeting their physical, emotional, and educational needs. The CCH Family Support program also includes a transitional housing component to support families who have worked their way out of homelessness and are living in CCH's properties.

The Delores Project is an overnight shelter housing adult women who might otherwise have to sleep on the street or in other circumstances that put them at great risk. The program maintains minimal requirements for admission and participation in order to reach women who are chronically homeless, have mental disabilities, or who face serious barriers to stability.

MAYOR: MAYOR JOHN W. HICKENLOOPER	TOTAL POPULATION: 566,974
GEOGRAPHIC AREA: 153 SQUARE MILES	PER CAPITA INCOME: \$26,548
MEDIAN HOUSE VALUE: \$236,100	PERCENT BELOW POVERTY LINE: 14.3%
CITY WEBSITE: HTTP://WWW.DENVERGOV.ORG	



HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • MEDICAL COSTS • MENTAL ILLNESS	• MENTAL ILLNESS • DOMESTIC VIOLENCE • SUBSTANCE ABUSE	• MENTAL ILLNESS • DOMESTIC VIOLENCE • SUBSTANCE ABUSE
NUMBER OF PEOPLE SERVED	-	2,436	3,632
DEMAND	INCREASED	INCREASED	INCREASED

DES MOINES' EFFORTS TO REDUCE HUNGER

Officials report an increased demand for food during the winter months, which they attribute to high utility costs. Barriers to providing enough food to meet the demand in Des Moines include limited space, a shortage of volunteers and staff, limited funding, and a decrease in the availability of donated foods and commodity foods. Additionally, officials noted that a lack of transportation to food assistance facilities is a barrier to providing adequate assistance.

One program in Des Moines working toward eliminating hunger is the Des Moines Public Schools Summer Food Service Program. This program addresses the need for nutritional meals when school is not in session by offering free meals to all children 18 years of age or under during the summer. All 29 locations serve lunch, and some sites serve both breakfast and lunch.

DES MOINES' EFFORTS TO REDUCE HOMELESSNESS

Des Moines is focused on developing a comprehensive, collaborative approach to ending homelessness. This is evident not only in the city's ten-year plan to end homelessness, but also in specific efforts to raise awareness about homelessness and to foster collaboration between City agencies working with homeless persons. For example, Des Moines recently implemented a formal process to assist individuals released from foster care, hospitals, and other facilities in finding adequate housing. Every November, more than 1,000 people sleep outside during Reggie's Sleepout to raise both money and awareness about this placement project. On October 30, 2007, Mayor Frank Cownie hosted a Homelessness Summit co-sponsored by the United States Interagency Council on Homelessness, the Downtown Alliance, the United Way of Central Iowa, and the City of Des Moines. This meeting included tours of local homelessness facilities as well as lectures by experts in the homelessness field.

The City of Des Moines has also been successful in fostering collaboration between the City's Police Department and the homeless services network. The Neighborhood Based Services Delivery Team and Mobile Crisis Unit of the Des Moines Police Department work to move people to a service provider before enforcing loitering or anti-vagrancy laws. On October 30, 2007 Mayor Frank Cownie hosted a Homelessness Summit co-sponsored by the United States Interagency Council on Homelessness, the Downtown Alliance, the United Way of Central Iowa, and the City of Des Moines. This meeting included tours of local homelessness facilities as well as lectures by experts in the homelessness field.

MAYOR: MAYOR FRANK COWNIE	TOTAL POPULATION: 196,857
GEOGRAPHIC AREA: 76 SQUARE MILES	PER CAPITA INCOME: \$23,215
MEDIAN HOUSE VALUE: \$114,800	PERCENT BELOW POVERTY LINE: 11.4%
CITY WEBSITE: HTTP://WWW.CI.DES-MOINES.IA.US/	



HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • HIGH HOUSING COSTS • POVERTY	• MENTAL ILLNESS • SEXUAL ORIENTATION • EMANCIPATION FROM FOSTER CARE	• LACK OF AFFORDABLE HOUSING • LOW -PAYING JOBS • DOMESTIC VIOLENCE
NUMBER OF PEOPLE SERVED	-	3,635	1,103
DEMAND	INCREASED	INCREASED	INCREASED

DETROIT'S EFFORTS TO REDUCE HUNGER

Officials in Detroit report that unemployment caused by the downsizing of the manufacturing industry has exacerbated the hunger crisis. Over the past year, the City has seen an increase in the number of working families and unaccompanied children seeking emergency food assistance.

Due to a lack of resources, emergency food assistance facilities have had to reduce the number of days and/or hours of operation. In response, most agencies in Detroit have expanded their fundraising efforts nationally in order to be able to better meet the demand. In addition, agencies have begun to enter into more partnerships with private businesses to raise funds. Detroit's current budget allocated to hunger initiatives is \$500,000.

DETROIT'S EFFORTS TO REDUCE HOMELESSNESS

Detroit has established a formal committee, Detroit's Team to End Chronic Homelessness, to help respond to the problems of homelessness in the city. The City of Detroit also developed and approved a ten-year plan to end homelessness in October 2006. Expected outcomes from these initiatives include a decrease in evictions and foreclosures, an increase in the number of individuals entering viable housing following discharge from prison or institutions of care, and higher rates of retention in employment programs.

In accordance with the ten-year plan, Detroit has implemented discharge plans to ensure that individuals released from foster care, hospitals, prisons, and psychiatric facilities are not released into homelessness. For example, the Michigan Department of Human Services has established the Youth in Transition Program to prepare eligible foster-care teens for living independently. The program provides educational support, job training, self-esteem counseling, and other support services. Recognizing that housing is the greatest barrier to successful re-entry of returning prisoners, the Michigan Prison Reentry Initiative works with local communities to develop a Comprehensive Prisoner Re-entry Plan. The State Mental Health Code requires that community mental health services programs produce a plan for community placement and aftercare services so patients avoid precarious housing situations upon discharge.

MAYOR: MAYOR KWAME M. KILPATRICK

GEOGRAPHIC AREA: 139 SQUARE MILES

MEDIAN HOUSE VALUE: \$91,700

TOTAL POPULATION: 834,116

PER CAPITA INCOME: \$13,977

PERCENT BELOW POVERTY LINE: 26.1%

CITY WEBSITE: [HTTP://WWW.CI.DETROIT.MI.US/](http://www.ci.detroit.mi.us/)



KANSAS CITY, MISSOURI

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• POVERTY • MEDICAL COSTS • LACK OF EDUCATION	• MENTAL ILLNESS • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE	• MENTAL ILLNESS • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE • POVERTY • UNDER-EMPLOYMENT
NUMBER OF PEOPLE SERVED	-	1,183	1,326
DEMAND	NOT AVAILABLE	DECREASED	DECREASED

KANSAS CITY'S EFFORTS TO REDUCE HUNGER

City officials estimate that approximately 38 percent of residents in need of emergency food assistance in Kansas City do not receive it. The key challenges to meeting the demand for food assistance are space, lack of volunteers, and limited funding. In addition, a growing concern for the city is the recent decrease in food donations.

Despite these challenges, Kansas City recently started a program to address the issue of weekend hunger among children. City officials noticed that hunger is one factor affecting performance in school during the week. The BackSnack program provides backpacks full of food to low-income children for the weekend, until weekday school meals are available again. Since the program's inception in 2004, teachers and administrators have reported that behavior problems have decreased, attendance has gone up, and academic performance has improved. Additionally, the relationship between school administrators and parents of low-income children as strengthened as a result of the program.

KANSAS CITY'S EFFORTS TO REDUCE HOMELESSNESS

Kansas City reported a 28 percent decrease in the number of homeless unaccompanied youth between 2006 and 2007. This significant decrease could be attributed to the efforts of a program called reStart, which works to move youth in crisis into stable living environments, and also to the city's proactive approach to discharge planning for children aging out of foster care.

The reStart program operates the only shelter for runaway and homeless youth ages 12-18 in the urban core of Kansas City. It works to reunite youth with their families, diverting them from the juvenile justice system. Youth shelter and outreach staff are available for parents, guardians, and youth workers in need of information about youth services or referrals. The program offers a range of services, including participation in Safe Place, a national program that helps youth get off the streets; transportation to jobs and school; outreach and case management; a 24-hour crisis line for youth; twice weekly Teen Talks at branches of the Kansas City Public Library on topics such as HIV/AIDS, self-esteem, goal-setting, and peer pressure; and weekly therapy groups, family counseling, and crisis intervention.

MAYOR: MAYOR MARK FUNKHOUSER	TOTAL POPULATION: 432,773
GEOGRAPHIC AREA: 312 SQUARE MILES	PER CAPITA INCOME: \$24,180
MEDIAN HOUSE VALUE: \$130,200	PERCENT BELOW POVERTY LINE: 14.3%
CITY WEBSITE: HTTP://WWW.KCMO.ORG/	



LOS ANGELES, CALIFORNIA

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• HIGH HOUSING COSTS • POVERTY • HIGH COST OF LIVING	• SUBSTANCE ABUSE • UNEMPLOYMENT • EVICTION	• DOMESTIC VIOLENCE • FAMILY DISPUTES • EVICTION
NUMBER OF PEOPLE SERVED	-	6,370	1,590
DEMAND	INCREASED	NOT AVAILABLE	NOT AVAILABLE

LOS ANGELES' EFFORTS TO REDUCE HUNGER

Despite the increased need for food assistance in Los Angeles during the last year, there has been an 11 percent decrease in food received, largely a result of a reduction in USDA commodities provided through the Emergency Food Assistance Program. As a result, emergency food assistance facilities in Los Angeles have had to turn people away and provide less food to the clients they continue to serve.

The Los Angeles Regional Foodbank has developed several innovative programs to combat hunger. One new pilot program aims to increase the amount of fresh produce that member agencies can access. The Foodbank's Agency Delivery Program and Rapid Food Distribution program have helped the Foodbank distribute approximately 5 million pounds of perishable foods over the past year. In 2007, the Los Angeles Regional Foodbank launched a Children's Backpack program, which provides groceries every other week to 450 children monthly. Each backpack contains food for six meals (two breakfasts, two lunches and two dinners), vouchers for the purchase of fresh produce, dairy, bread, and nutrition education information.

LOS ANGELES' EFFORTS TO REDUCE HOMELESSNESS

The City of Los Angeles has taken several steps to reduce homelessness. City officials created an Affordable Housing Trust Fund that funds permanent housing for homeless persons and families. Established by the City and County of Los Angeles as a Joint Powers Authority, the Los Angeles Homeless Services Authority (LAHSA) coordinates programs and services to homeless individuals and families throughout the region. LAHSA manages the annual HUD competitive Continuum of Care application process and works collaboratively with the City and County to coordinate planning and develop programs and services throughout the Los Angeles Continuum.

Currently, LAHSA funds 25 programs that provide support services to City of Los Angeles residents. Through LAHSA and the Los Angeles City Housing Department, programs are designed to provide rent subsidies and prevent eviction. Also, during the winter months (December to March), LAHSA opens up its winter shelter programs, which provide 1,110 to 1,800 beds each year, depending on available funding. In 2006, there were 8 winter shelter programs with over 830 beds in the City of Los Angeles.

MAYOR: MAYOR ANTONIO VILLARAIGOSA	TOTAL POPULATION: 3,773,846
GEOGRAPHIC AREA: 469 SQUARE MILES	PER CAPITA INCOME: \$24,349
MEDIAN HOUSE VALUE: \$614,300	PERCENT BELOW POVERTY LINE: 22.1%
CITY WEBSITE: HTTP://WWW.CI.LA.CA.US/	



LOUISVILLE, KENTUCKY

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • POVERTY • LACK OF EDUCATION	• LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE • UNEMPLOYMENT	• LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE • UNEMPLOYMENT
NUMBER OF PEOPLE SERVED	-	9,300	1,633
DEMAND	INCREASED	DECREASED	INCREASED

LOUISVILLE'S EFFORTS TO REDUCE HUNGER

During the last year, Louisville experienced a slight increase in the number of school children receiving free or reduced-price lunches, with just over 55 percent participating in these programs in 2006 to 2007. Overall, the city saw an increase of 5 percent in the number of persons in need of emergency food assistance, and officials predict that demand will increase in future years.

The City of Louisville has made substantial efforts to reduce hunger, and along with aid to homeless and other non-profit agencies, provides \$52,000 to the Dare to Care Food Bank. The Food Bank partners with 26 non-profit distribution centers around the city and provides free delivery of food its network agencies in and around Louisville Metro, including the city's Community Action Partnership sites. Dare to Care also provides nutritious weekend snacks to elementary school children in 14 area schools, while Kentucky Harvest provides the service in two schools. Each school identifies the children at greatest risk for hunger and provides them with a backpack filled with nutritious snacks to take home. Another Dare to Care program, Patrol Against Hunger, is a collaboration with Louisville Metro Police. Beat officers identify homebound seniors at risk for food insecurity and deliver a 30-pound box of nonperishable food to these seniors each month.

LOUISVILLE'S EFFORTS TO REDUCE HOMELESSNESS

During the past year, city officials have documented an increase in the number of families with children using homeless programs. To address the increase in demand, Louisville is focusing efforts on homelessness prevention. The City has set up two prevention systems to alleviate housing crises and provide services to the entire metro area. The first, the Neighborhood Place system, is a partnership of eight local sites and offers a one-stop-shop approach to services, including emergency financial assistance, homeless assessment/case management services, mental health services, and federal poverty programs. The second, run by Community Ministries, is primarily a faith-based system that provides services such as emergency financial assistance, food baskets, and clothes to persons in crisis. Together, these two programs assist thousands of Louisville individuals and families to prevent evictions, utility cut-offs, and other crises that can lead to homelessness.

MAYOR: MAYOR JERRY ABRAMSON

GEOGRAPHIC AREA: 386 SQUARE MILES

MEDIAN HOUSE VALUE: \$136,869

TOTAL POPULATION: 715,196

PER CAPITA INCOME: \$30,058

PERCENT BELOW POVERTY LINE: 11.9%

CITY WEBSITE: [HTTP://WWW.LOUISVILLEKY.GOV/](http://www.louisvilleky.gov/)



HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• POVERTY • SUBSTANCE ABUSE • MENTAL ILLNESS	• MENTAL ILLNESS • SUBSTANCE ABUSE • POVERTY	• LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY
NUMBER OF PEOPLE SERVED	-	365	735
DEMAND	INCREASED	NOT AVAILABLE	NOT AVAILABLE

MIAMI'S EFFORTS TO REDUCE HUNGER

The City of Miami operates an Indoor Meal Program that coordinates all community-based emergency food assistance efforts throughout the city. There has been a slight increase in the number of requests for food during the past year, and an estimated 10 percent of persons in need of emergency food assistance in Miami do not receive it. Demand for food increases during the winter months, probably due to an influx of individuals from northern states seeking a warmer climate. According to officials, the top three things needed to reduce hunger in the city are: more mental health services, more substance abuse services, and more affordable housing.

MIAMI'S EFFORTS TO REDUCE HOMELESSNESS

The City of Miami is part of the Miami-Dade Continuum of Care system, which works to screen, shelter, and provide services for all homeless persons in need. The Continuum serves a large number of single individuals with substance abuse issues, as well as parents who have mental health problems. However, a substantial share of both populations is employed. City officials believe that more permanent housing, increased mental health services, and more employment training programs would help reduce homelessness in Miami.

One notable change during the past year is the increase in the number of illegal laborers seeking shelter. Officials also note that shelter demand is dictated by the weather and that demand is greater in years when a hurricane hits Florida or when the northern states experience harsh winters. To respond to increased demand, the city has implemented a late-night outreach program that targets chronically homeless individuals and persons sleeping on the streets. This program allows the city to reach out to persons in need who otherwise would not come into a shelter or seek services during the day.

The Miami-Dade County Homeless Trust is another partner working to end homelessness in the city. The organization is currently working with the Florida Department of Corrections, the Florida Department of Children and Families, and the 11th Judicial Circuit to finalize a discharge protocol targeting homeless inmates and mentally challenged individuals being released from institutions.

MAYOR: MAYOR MANUEL A. DIAZ

GEOGRAPHIC AREA: 36 SQUARE MILES

MEDIAN HOUSE VALUE: \$315,900

TOTAL POPULATION: 358,091

PER CAPITA INCOME: \$17,911

PERCENT BELOW POVERTY LINE: 28.5%

CITY WEBSITE: [HTTP://WWW.MIAMIGOV.COM/CMS](http://www.miamigov.com/cms)



NASHVILLE, TENNESSEE

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • HIGH HOUSING COSTS • POVERTY	• MENTAL ILLNESS • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE	• MENTAL ILLNESS • LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT
NUMBER OF PEOPLE SERVED	-	9,688	1,525
DEMAND	INCREASED	DECREASED	INCREASED

NASHVILLE'S EFFORTS TO REDUCE HUNGER

The Homeless Power Project, a local homeless advocacy group says: "There are not enough places for 3 meals a day, 7 days a week; 365 days a year ... There is never enough food with food stamps for the month, even if you eat beans and cornbread." Multiple economic and social issues exacerbate the hunger crisis in the City of Nashville. Some providers explain that seasonal workers and persons moving to Nashville seeking a better life often cannot find full-time employment that pays enough to support themselves and their families. One provider, Second Harvest, reports that working families and grandparents raising grandchildren need food assistance because of parents' addiction problems.

Second Harvest has many programs serving different populations in need. For example, Senior Helpings is a collaborative grant to three nonprofit agencies that provide 150 senior households with monthly food and personal care items. Kids Café and its Backpack Program provide breakfast and dinners for children to take home. A third program, Nashville's Table, collects approximately 90,000 pounds of perishable food monthly for distribution to nonprofit agencies.

NASHVILLE'S EFFORTS TO REDUCE HOMELESSNESS

The Mayor's Commission to End Chronic Homelessness has provided a dedicated funding source for the past three years to expand services such as intensive case management and expedited access to benefits. However, even with these resources, agencies in the City of Nashville frequently need to turn homeless persons away because they are at full capacity.

Several successful programs have been developed in Nashville to combat homelessness. For example, Renewal House provides a long-term residential recovery program for homeless mothers with substance abuse issues and their children. The transitional housing program is coupled with a structured but individualized program that integrates addiction recovery, parenting and basic life skills development, and employment. Nashville has also been successful at providing medical care to homeless people in the city through the Metro Public Health Department's Downtown Clinic. Two nurse practitioners and a half-time physician provide medical services, daily access to a dentist, and weekly access to a psychiatrist.

MAYOR: MAYOR KARL DEAN

GEOGRAPHIC AREA*: 473 SQUARE MILES

MEDIAN HOUSE VALUE: \$153,200

TOTAL POPULATION: 553,988

PER CAPITA INCOME: \$24,920

PERCENT BELOW POVERTY LINE: 13.3%

CITY WEBSITE: [HTTP://WWW.NASHVILLE.GOV/](http://www.nashville.gov/)

*INCLUDES DAVIDSON COUNTY



PHILADELPHIA, PENNSYLVANIA

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • POVERTY • HIGH UTILITY COSTS	• MENTAL ILLNESS • SUBSTANCE ABUSE • POVERTY	• LACK OF AFFORDABLE HOUSING • POVERTY • EVICTION
NUMBER OF PEOPLE SERVED	-	8,103	5,289
DEMAND	INCREASED	DECREASED	INCREASED

PHILADELPHIA'S EFFORTS TO REDUCE HUNGER

Although a higher percentage of people using food assistance programs were employed this year compared to last, a weak economy, increasing costs of rent, food, and utilities, low wages, and many elderly people supporting themselves contribute to a high demand for emergency food assistance in Philadelphia. An estimated 37 percent of persons who need emergency food assistance do not receive it, including 24 percent of households with children. Of the 198 food pantries interviewed for this survey, 58 percent said they generally did not have enough food to meet the current demand.

SHARE is the primary non-profit organization that distributes food in Philadelphia. Through a recent partnership with Philadelphia Green, the two organizations are working to match local food cupboards with local gardeners, providing access to fresh produce not available at corner stores. In addition to SHARE, several other organizations are working toward increasing the availability of healthy and nutritious food. One program, the Urban Nutritional Initiative, is a university-community partnership that encourages children from kindergarten through high school to strive to improve community nutrition and wellness. The program operates out of the West Philadelphia University City High School and engages students in the process of planting and growing vegetables that are then sold at a local market.

PHILADELPHIA'S EFFORTS TO REDUCE HOMELESSNESS

One of the primary goals of Philadelphia's ten-year plan to end homelessness is to implement successful strategies to deter people from entering the homeless system. One key homeless prevention initiative is the Housing Retention Program, which assists households facing a housing crisis. Eligible households receive rent, mortgage and/or utility assistance from four primary providers, located throughout the city. In the program's first year of operation, over 300 households received assistance. On average, recipients received \$1,200 to help them maintain their current housing situation.

In keeping with the City's ten-year plan to end homelessness, efforts have also focused on increasing the percentage of persons who are employed at the time they leave the homeless system. For example, though the City's and Doe Fund's Ready, Willing and Able (RWA) program, people in the homeless services system are employed cleaning the City's largest park and maintaining two other Park Districts. RWA participants also provide maintenance services at several City-owned emergency housing facilities.

MAYOR: MAYOR JOHN F. STREET

GEOGRAPHIC AREA: 135 SQUARE MILES

MEDIAN HOUSE VALUE: \$115,500

TOTAL POPULATION: 1,448,394

PER CAPITA INCOME: \$18,924

PERCENT BELOW POVERTY LINE: 22.9%

CITY WEBSITE: [HTTP://WWW.PHILA.GOV/](http://www.phila.gov/)



HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • POVERTY • TRANSPORTATION COSTS	• PRISONER RE-ENTRY • UNEMPLOYMENT • EVICTION	• DOMESTIC VIOLENCE • UNEMPLOYMENT • EVICTION
NUMBER OF PEOPLE SERVED	-	NOT AVAILABLE	NOT AVAILABLE
DEMAND	DECREASED	NOT AVAILABLE	NOT AVAILABLE

PHOENIX'S EFFORTS TO REDUCE HUNGER

Limitations to providing adequate food assistance in Phoenix include decreased funding, inadequate space, and fewer donated foods and commodities. In an effort to maximize resources and meet increased demand, the United Food Bank (UFB) and the Department of Nutrition at Arizona State University collaborated to develop a tracking system for donated and purchased food.

Recently implemented in the Phoenix region, the Nutrient Tracking and Enhancement System (NTES) is a computerized nutrient data bank that monitors the amount of food distributed and the nutritional value of these foods. Linked to the current inventory data base, NTES tracks the weights of donated foods by brand name or food category, as well as the amount of protein and key vitamins and minerals each food contains as predictors of overall nutrient quality. This enables staff at United Food Bank to make targeted, nutritionally appropriate food purchases, to request specific surplus government commodity foods in order to "balance" the nutrient profile of UFB inventory, and to develop targeted food donation campaigns that underscore the nutrient needs of the food bank. The system also allows staff to determine the final nutrient content for each meal provided by the food bank.

PHOENIX'S EFFORTS TO REDUCE HOMELESSNESS

Officials report that there are approximately 7,000 to 10,000 homeless persons on any given night in the Maricopa County region. The City targets its resources toward funding prevention, outreach, and multiple shelter programs throughout the county. Still, officials think more effort needs to be devoted towards preventing people from entering the system.

The regional Continuum of Care, which provides a wide range of housing and services for homeless persons, can house only approximately two-thirds of the region's homeless population in emergency, transitional, and permanent supportive housing programs. This leaves approximately 3,000 without shelter on a nightly basis. The City has remained committed to implementing ongoing quality improvements each year. For example, the City has recently expanded capacity at three programs. In May 2007, the Phoenix City Council approved the Watkins Overflow Shelter Program to provide housing and services year-round. In addition, the Watkins Overflow Casework team is now permanently located at the facility. The team facilitates immediate placement into shelter and provides transportation to alternative housing options.

MAYOR: MAYOR PHIL GORDON	TOTAL POPULATION: 1,429,637
GEOGRAPHIC AREA: 475 SQUARE MILES	PER CAPITA INCOME: \$23,076
MEDIAN HOUSE VALUE: \$244,200	PERCENT BELOW POVERTY LINE: 15.8%
CITY WEBSITE: HTTP://WWW.PHOENIX.GOV/	



PORTLAND, OREGON

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• HIGH HOUSING COSTS • POVERTY • MEDICAL COSTS	• LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY	• LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY
NUMBER OF PEOPLE SERVED	-	2,088	1,101
DEMAND	DECREASED	DECREASED	DECREASED

PORTLAND'S EFFORTS TO REDUCE HUNGER

During the last year, emergency food assistance programs in Portland distributed more than 8.5 million pounds of food to city residents. Despite this assistance, hunger advocates cite lack of space, volunteers/staff, funding and the decreased availability of donated food and commodities as the key limitations they face in providing an adequate amount of food to residents in need. They report that more affordable housing, living wage jobs, and affordable health care are the top three things the city needs address to reduce hunger.

An innovative program that recently expanded its efforts to combat hunger in Portland is the Sisters of the Road. In 1986, the Sisters first converted a storefront into the Sisters of the Road Café. The café, featuring seating for 29, provides low cost meals in a dignified setting to homeless persons and the general public. This year, the Sisters opened the Personalist Center in the space next to the café, with a new indoor waiting area, a revamped mail and hygiene center, an open-access telephone for customer use, and an expanded barter program.

PORTLAND'S EFFORTS TO REDUCE HOMELESSNESS

The City of Portland works to end homelessness through strategies and benchmarks outlined in its ten-year plan to end homelessness, launched in December 2004. The plan focuses on ending chronic homelessness, and includes specific strategies and year-by-year goals tracked by the Coordinating Committee to End Homelessness. In addition to the chronically homeless, target populations include youth aging out of foster care, people with chronic mental illness, and ex-offenders.

An innovative community-wide effort currently underway in Portland is the Short-term Rent Assistance fund. Following an extensive community process, the city of Portland, Multnomah County, and the Housing Authority of Portland recently streamlined what had been a complex array of short-term rental assistance programs. The new model consolidates six different funding sources and three administrative entities into one and is used by more than a dozen agencies county-wide. The rent assistance model supports flexibility, requires success, and makes housing first and homelessness prevention a priority. Nearly \$2 million is available annually through this streamlined model for agencies and individuals who need rent assistance.

MAYOR: MAYOR TOM POTTER	TOTAL POPULATION: 539,950
GEOGRAPHIC AREA: 134 SQUARE MILES	PER CAPITA INCOME: \$27,429
MEDIAN HOUSE VALUE: \$266,800	PERCENT BELOW POVERTY LINE: 13.1%
CITY WEBSITE: HTTP://WWW.PORTLANDONLINE.COM/	



PROVIDENCE, RHODE ISLAND

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• HIGH HOUSING COSTS • POVERTY • LACK OF PUBLIC SUPPORT	• FAMILY DISPUTES • POVERTY • EMANCIPATION FROM FOSTER CARE	• LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • POVERTY
NUMBER OF PEOPLE SERVED	-	2,067	752
DEMAND	INCREASED	INCREASED	INCREASED

PROVIDENCE'S EFFORTS TO REDUCE HUNGER

Despite increased demand for emergency food assistance, especially among working families, donations for food assistance programs have recently decreased in Providence. To help reduce hunger, city officials cite a need for more mental health services, substance abuse services and employment training programs.

Two innovative programs run by the Rhode Island Community Food Bank promote nutrition through food assistance. First, the Raising the Bar on Nutrition program enhances the nutritional value of the foods available at the Food Bank through cooking demonstrations and discussions with Dr. Mary Flynn, a Food Bank Board Member. Second, the Common Sense Cooking program presents a series of 12 television segments, developed in conjunction with RI PBS network. Each segment is 2-5 minutes long and provides tips for preparing low-cost, nutritious meals for a family. A companion website, www.rifoodbank.org, features each segment as well as recipes, shopping tips, and nutritional information.

PROVIDENCE'S EFFORTS TO REDUCE HOMELESSNESS

Because Rhode Island is a very small state, the majority of persons and families experiencing homelessness statewide come to Providence for services, including meals, day and night shelter, housing assistance, case management, health care, and employment and job training programs. In the last few months, there has been a dramatic increase in the number of single women seeking shelter in the city. The number of homeless families has also increased since last year, with 50 percent more families seeking shelter than in the previous year. Also, during the last year, one of the state's largest shelters closed, resulting in the loss of 110 shelter beds.

To accommodate the influx of homeless persons and the loss of shelter beds, the City has developed several programs. The first, Providence's Housing First Pilot program, helps long-term homeless individuals maintain housing. During its first year, the program has shown reductions in the costs associated with homelessness averaging almost \$9,000 annually for each individual participating in the program. A second program, the First Step Shelter Program, provides shelter, intensive case management and support services for homeless persons for up to 90 days. The program links homeless adults to benefits, services, and housing programs that will eventually help them move toward self-sufficiency.

MAYOR: MAYOR DAVID N. CICILLINE

GEOGRAPHIC AREA: 18 SQUARE MILES

MEDIAN HOUSE VALUE: \$266,400

TOTAL POPULATION: 170,435

PER CAPITA INCOME: \$17,975

PERCENT BELOW POVERTY LINE: 29.1%

CITY WEBSITE: [HTTP://WWW.PROVIDENCERI.COM/](http://www.providenceri.com/)



SALT LAKE CITY, UTAH

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• POVERTY • MEDICAL COSTS • HIGH UTILITY COSTS	• LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • SUBSTANCE ABUSE	• LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • DOMESTIC VIOLENCE
NUMBER OF PEOPLE SERVED	-	3,443	787
DEMAND	INCREASED	INCREASED	DECREASED

SALT LAKE CITY'S EFFORTS TO REDUCE HUNGER

Hunger advocates in Salt Lake City noted an increase in the number of families with children requesting emergency food assistance during the last year. Emergency food programs do not turn anyone away, but resources have been stretched more than usual during the past year.

Salt Lake City has made substantial efforts to reduce hunger despite a very limited budget – just \$51,000 in local discretionary revenue allocated to emergency kitchens and the Utah Food Bank during the last year. The Utah Food Bank operates Kid's Café, a meal program that provides weeknight dinner meals to low-income youth and offers nutrition classes to help children and their families learn to lead healthier lives. The 17 Kid's Café sites include elementary schools and after-school programs in which at least 50 percent of the children qualify for free or reduced price school lunches and breakfasts. Kid's Café provided 101,393 meals to children during the last year.

SALT LAKE CITY'S EFFORTS TO REDUCE HOMELESSNESS

While officials saw a significant increase in the number of individuals using emergency shelter and transitional housing programs during the last year, the number of families with children declined. There have also been several notable changes in the characteristics of the homeless population compared to previous years. Among singles, there has been a decrease in the percentage of clients who are veterans. There has also been an increase in the proportion of clients identifying themselves as African-American. Among households with children, the number of clients reporting that they are victims of domestic violence has decreased.

As part of Salt Lake City's ten-year plan to end homelessness, a group of social service agencies in the city has collaborated to provide housing and services to chronically homeless individuals. Advocates estimate that chronically homeless clients make up 12 percent of the homeless population in Salt Lake City. Two new projects, the Grace Mary Manor and the Sunrise Metro apartments, have added 184 new beds for chronically homeless single adults. Another initiative led by The Road Home, Utah's largest provider of shelter and services for the homeless, will provide housing for approximately 200 homeless families and singles in downtown Salt Lake City. The project broke ground in September 2007 and is expected to be ready for occupancy by early 2009.

MAYOR: MAYOR ROCKY ANDERSON

GEOGRAPHIC AREA: 109 SQUARE MILES

MEDIAN HOUSE VALUE: \$215,000

TOTAL POPULATION: 180,298

PER CAPITA INCOME: \$24,609

PERCENT BELOW POVERTY LINE: 15.3%

CITY WEBSITE: [HTTP://WWW.CI.SLC.UT.US/](http://www.ci.slc.ut.us/)



SAN FRANCISCO, CALIFORNIA

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• HIGH HOUSING COSTS • POVERTY • HIGH COST OF LIVING	• MENTAL ILLNESS • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE	• LACK OF AFFORDABLE HOUSING • DOMESTIC VIOLENCE • POVERTY
NUMBER OF PEOPLE SERVED	-	8,612	1,179
DEMAND	INCREASED	NOT AVAILABLE	NOT AVAILABLE

SAN FRANCISCO'S EFFORTS TO REDUCE HUNGER

Because of the high cost of living in San Francisco, need is assessed using a threshold of 150 percent of the federal poverty rate. According to the 2000 Census, that puts nearly 150,000 San Francisco residents at or near the poverty line and thus at risk of hunger. City officials estimate that approximately 20 percent of people who need food do not access emergency food assistance services in San Francisco. Among the 80 percent who do access food assistance, the level of access ranges from weekly grocery pick up to a once yearly meal – with most needing more assistance than they receive. Among households with children, approximately 50 percent of the demand for emergency food assistance is unmet.

The Food Security Task Force, established by San Francisco's Board of Supervisors, provides guidance on hunger and food security issues in the city. This group secured a \$1 million federal grant to improve access to Food Stamps in San Francisco and continues to seek new sites in the community to start and expand food programs.

SAN FRANCISCO'S EFFORTS TO REDUCE HOMELESSNESS

Over the past year, San Francisco has seen an increase in the number of people experiencing homelessness who have multiple medical diagnoses, such as high blood pressure, diabetes, morbid obesity, and cancer. The City has also seen more disabled individuals who use wheelchairs and/or are incontinent. While there have not been dramatic changes in the population of homeless families, the City continues to see a large number of families who are undocumented and/or who have a history of domestic violence. The most significant change has been that the city's Centralized Intake Agency has seen many more families who have previously had no contact with the emergency services system.

To address these issues, San Francisco recently expanded efforts to target services to those homeless adults who most frequently utilize the city's public health system – often persons with co-occurring mental health issues, alcohol and substance abuse problems, and/or chronic medical conditions. One program is the Direct Access to Housing Program for Chronic Alcoholics. The program provides 62 units of permanent supportive housing and on-site wrap around support to chronically homeless adults with long-term, disabling addictions to alcohol.

MAYOR: MAYOR GAVIN NEWSOM	TOTAL POPULATION: 744,041
GEOGRAPHIC AREA: 47 SQUARE MILES	PER CAPITA INCOME: \$41,734
MEDIAN HOUSE VALUE: \$806,700	PERCENT BELOW POVERTY LINE: 11.3%
CITY WEBSITE: HTTP://WWW.CLSF.CA.US/	



SANTA MONICA, CALIFORNIA

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • HIGH HOUSING COSTS • HOMELESSNESS	• MENTAL ILLNESS • LACK OF AFFORDABLE HOUSING • SUBSTANCE ABUSE	• LACK OF AFFORDABLE HOUSING • UNEMPLOYMENT • POVERTY
NUMBER OF PEOPLE SERVED	-	782	142
DEMAND	INCREASED	INCREASED	INCREASED

SANTA MONICA'S EFFORTS TO REDUCE HUNGER

Even for working families, city officials explain, the high cost of living in Santa Monica makes it difficult to buy food. Families who do make enough to afford to live in the city usually do not qualify for food stamps. For those who do qualify, the purchasing power of food stamps has decreased over the years. City officials believe the hunger crisis has been exacerbated by increased gasoline prices and by undocumented residents not applying for public assistance out of fear of being deported. An estimated 18 percent of persons who need emergency food assistance do not receive it, including 12 percent of households with children.

The City of Santa Monica has made substantial efforts to reduce hunger with \$101,000 in local discretionary revenue allocated to hunger initiatives each year. The Westside Food Bank provides food to approximately 30 agencies, 21 of which serve needy families and individuals in the city of Santa Monica. The Food Bank turns every dollar donated or granted into almost five pounds of food – which translates into approximately 1.6 million pounds of food annually for city residents. The Food Bank uses cash donations to purchase additional fresh produce for distribution, including produce from local farmers' markets.

SANTA MONICA'S EFFORTS TO REDUCE HOMELESSNESS

The City of Santa Monica works closely with non-profit agencies and service providers to help end homelessness. The City provides funding to eight agencies and 21 programs to serve Santa Monica's homeless people. Recently, the City has developed an innovative program to assist homeless residents: the Chronic Homelessness Project.

Started as a pilot in 2004, the Chronic Homelessness Project uses a team comprised of the city's police, paramedics, city officials, and local non-profit service providers to engage chronically homeless persons in Santa Monica who live on the streets and are the least successful in accessing services. The Project focuses on high users of police, paramedic and emergency room resources and coordinates case management, advocates for needed resources, identifies and addresses barriers to success, evaluates project outcomes, and enlists community support to assist this population. As of September 2007, 144 chronically homeless people had been enrolled in the project and 78 people (54 percent) had been moved off of the streets and into housing.

MAYOR: MAYOR HERB KATZ	TOTAL POPULATION: 88,244
GEOGRAPHIC AREA: 8 SQUARE MILES	PER CAPITA INCOME: \$57,230
MEDIAN HOUSE VALUE: \$1,000,000+	PERCENT BELOW POVERTY LINE: 10.4%
CITY WEBSITE: HTTP://WWW.SMGOV.NET/	



SEATTLE, WASHINGTON

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• HIGH HOUSING COSTS • POVERTY • MEDICAL COSTS	• MENTAL ILLNESS • SUBSTANCE ABUSE • POVERTY • FAMILY DISPUTES • EMANCIPATION FROM FOSTER CARE	• LACK OF AFFORDABLE HOUSING • POVERTY • FAMILY CRISIS AND DISPLACEMENT
NUMBER OF PEOPLE SERVED	-	2,703	1,657
DEMAND	STAYED THE SAME	DECREASED	DECREASED

SEATTLE'S EFFORTS TO REDUCE HUNGER

Officials believe the hunger crisis has been exacerbated by the increased cost of living in Seattle. They specifically pointed to high housing costs as affecting a household's ability to afford food. A recent report on hunger in Seattle found that between 12.5 percent and 19.7 percent of Seattle residents experience some degree of food insecurity. City officials cite employment training programs, more affordable housing, increased awareness of good nutrition education, and access to food programs and benefits as the top things the city needs to reduce hunger.

City officials note the amount of donated food has decreased over the last year; however, meal programs are intensifying efforts to "recover food" which would otherwise be thrown away from hotels, restaurants, and other businesses. The city is also doing its part to assist chronically ill adults and homebound seniors. In 2005, the city appropriated \$200,000 to pilot a home grocery delivery program administered jointly by six community-based service agencies. The program helps homebound residents maintain their independence while assuring that they receive a healthy and nutritious diet. It emphasizes supplementing diets with fresh fruits and vegetables that these populations would not ordinarily be able to afford. The agencies provided more than 84,000 home deliveries in the program's first year of operation.

SEATTLE'S EFFORTS TO REDUCE HOMELESSNESS

During the past year, Seattle experienced a slight decline in the number of homeless persons residing in emergency shelter and transitional housing programs. Despite this, demand for shelter during the winter months (October through April) continues to increase. City officials cited the top three things needed to reduce homelessness as more permanent housing, service coordination, and an increase in federal housing resources.

Recent efforts directed at combating homelessness in Seattle include a new investment in Housing First for chronically homeless individuals with a focus on veterans. In addition, The Committee to End Homelessness Governing Board has established benchmarks to track progress toward its goal of ending homelessness by 2014. Examples of these benchmarks include tracking the number of people entering the homeless system for the first time, the length of time a household stays in shelter before moving to permanent housing, and the percentage of people moving to housing that do not return to the homeless system.

MAYOR: MAYOR GREG NICKELS	TOTAL POPULATION: 562,106
GEOGRAPHIC AREA: 84 SQUARE MILES	PER CAPITA INCOME: \$38,648
MEDIAN HOUSE VALUE: \$447,800	PERCENT BELOW POVERTY LINE: 11.8%
CITY WEBSITE: HTTP://WWW.SEATTLE.GOV/	



ST. PAUL, MINNESOTA

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	NOT AVAILABLE	• MENTAL ILLNESS • SEXUAL ORIENTATION • POVERTY	• LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • DOMESTIC VIOLENCE
NUMBER OF PEOPLE SERVED	-	3,892	1,191
DEMAND	NOT AVAILABLE	INCREASED	INCREASED

ST. PAUL'S EFFORTS TO REDUCE HOMELESSNESS

During the last year, St. Paul experienced an increase in the number of persons using emergency shelters and transitional housing. This increase was especially notable among households with children, which increased by 14 percent. Officials noted that demand for shelter in St. Paul fluctuates by season. For families, demand peaks from May through October, whereas for singles the demand peaks in the winter months and tapers off by May 1st each year. In addition, during the last year officials documented several changes in the characteristics of persons experiencing homelessness. For example, more people came from state systems and institutions without adequate discharge plans than the year before. Also, a significant number of people requesting shelter were former tenants of foreclosed rental properties. The city expects that this population will increase over the next year, as more properties enter foreclosure and low-income tenants are suddenly evicted in spite of paying rent.

Despite increases in demand for shelter, St. Paul continues to make progress toward increasing capacity and implementing its ten-year plan to end homelessness. Since the plan's adoption in 2005, the city has added 40 emergency shelter spaces for single women and 60 units of affordable supportive housing for homeless people. The City plans to hire a Homeless Coordinator in the near future to implement its ten-year plan.

St. Paul provides a coordinated single access point to emergency shelter and follows a philosophy of "housing first with services" approach. In an effort to expand the services component, St. Paul has begun a Police/Community Social Services cross-training program that makes personnel in both fields aware of the resources and obligations to the other. As a result of this shared knowledge, in many instances St. Paul police officers are able to route a homeless individual directly to appropriate supportive services instead of incarcerating them or placing them in a detoxification program.

MAYOR: MAYOR CHRIS COLEMAN

GEOGRAPHIC AREA: 53 SQUARE MILES

MEDIAN HOUSE VALUE: \$209,800

TOTAL POPULATION: 272,217

PER CAPITA INCOME: \$23,675

PERCENT BELOW POVERTY LINE: 15.6%

CITY WEBSITE: [HTTP://WWW.STPAUL.GOV/](http://www.stpaul.gov/)



TRENTON, NEW JERSEY

HIGHLIGHTS FROM THIS YEAR'S SURVEY			
DURING THE LAST YEAR...	HUNGER	HOMELESSNESS	
	INDIVIDUALS & HOUSEHOLDS WITH CHILDREN	INDIVIDUALS & UNACCOMPANIED YOUTH	HOUSEHOLDS WITH CHILDREN
REPORTED CAUSES	• UNEMPLOYMENT • HIGH HOUSING COSTS • POVERTY	• MENTAL ILLNESS • LACK OF AFFORDABLE HOUSING • FAMILY DISPUTES	• LACK OF AFFORDABLE HOUSING • LOW-PAYING JOBS • POVERTY
NUMBER OF PEOPLE SERVED	-	1,325	1,134
DEMAND	STAYED THE SAME	INCREASED	INCREASED

TRENTON'S EFFORTS TO REDUCE HUNGER

Even though many Trenton residents receive food stamps or public assistance, food prices escalate more rapidly than these benefits. Housing costs also continue to increase, and often low-income working people use their entire income to pay for rent and utilities. As a result, they are forced to turn to emergency assistance programs for food. The city's primary food distribution program, Mount Carmel Guild, reported seeing clients who were helped as far back as ten years ago returning for assistance. The Mount Carmel Guild provides approximately 3 bags of food to each client each month. Still, it estimates that 10 percent of the demand is not being met.

City programs are currently undertaking a number of efforts to meet the demand and provide an adequate amount of food to needy residents. The Mercer Street Friends Center has recently increased capacity and supplements food bags with food from the State Food Purchasing Program and the Emergency Food Assistance Program. To meet the needs of the increasing numbers of clients with diabetes, hypertension, and high blood pressure, the Mount Carmel Guild stocks a section of its pantry with sugar-free and low-sodium foods. Other programs employ registered dieticians.

TRENTON'S EFFORTS TO REDUCE HOMELESSNESS

Officials have noticed that demand for shelter and other homeless services fluctuates by season. For example, during the winter months (November - April), there is an increased demand among single adults seeking shelter. Officials speculate that this trend is related to utility costs during the winter months, which make it more difficult for friends and family members to provide for their guests' needs. In addition, city officials have documented an increase in the number of male-headed and two-parent households accessing the homeless system. They attribute these changes to increases in the number of men obtaining custody of their children and young couples not earning enough income to maintain their households.

Despite increases in demand, Trenton continues to make progress toward increasing capacity and implementing its recently-adopted ten-year plan to end homelessness, which targets the chronically homeless population. In collaboration with a number of partners, the city will fund 50 new units of housing specifically for the chronically homeless population. Implementation is scheduled for January 2008.

MAYOR: MAYOR DOUGLAS H. PALMER

GEOGRAPHIC AREA: 8 SQUARE MILES

MEDIAN HOUSE VALUE: \$126,300

TOTAL POPULATION: 83,581

PER CAPITA INCOME: \$15,933

PERCENT BELOW POVERTY LINE: 21.1%

CITY WEBSITE: [HTTP://WWW.CI.TRENTON.NJ.US/](http://www.ci.trenton.nj.us/)

Appendix A

List of Past Reports

List of Past Reports

Since 1982 the U.S. Conference of Mayors has completed numerous reports on hunger, homelessness and poverty in cities. These reports have documented the causes and the magnitude of the problems, how cities were responding to them and what national responses were required. They include:

- Hunger in American Cities, June, 1983
- Responses to Urban Hunger, October, 1983
- Status Report: Emergency Food. Shelter and Energy Programs in 20 Cities, January, 1984
- Homelessness in America's Cities: Ten Case Studies, June, 1984
- Housing Needs and Conditions in America's Cities, June, 1984
- The Urban Poor and the Economic Recovery, September, 1984
- The Status of Hunger in Cities, April, 1985
- Health Care for the Homeless: A 40-City Review, April 1985
- The Growth of Hunger. Homelessness and Poverty in America's Cities in 1985: A 25-City Survey, January, 1986
- Responding to Homelessness in America's Cities, June 1986
- The Continued Growth of Hunger. Homelessness and Poverty in America's Cities in 1986; A 25-City Survey, December, 1986
- A Status Report on Homeless Families in America's Cities: A 29-City Survey, May, 1987
- Local Responses to the Needs of Homeless Mentally Ill Persons, May, 1987
- The Continuing Growth of Hunger, Homelessness and Poverty in America's Cities: 1987. A 26-City Survey, December, 1987
- A Status Report on The Stewart B. McKinney Homeless Assistance Act of 1987, June, 1988
- A Status Report on Hunger and Homelessness in America's Cities: 1988. A 27-City Survey, January, 1989
- Partnerships for Affordable Housing an Annotated Listing of City Programs, September, 1989
- A Status Report on Hunger and Homelessness in America's Cities: 1989. A 27-City Survey, December, 1989

- A Status Report on Hunger and Homelessness in America's Cities: 1990 A 30-City Survey, December, 1990
- A City Assessment of the 1990 Shelter and Street Night count. A 21-City Survey, June 1991
- Mentally Ill and Homeless. A 22-City Survey, November 1991
- A Status Report on Hunger and Homelessness in America's Cities: 1991, A 28-City Survey, December 1991
- A Status Report on Hunger and Homelessness in America's Cities: 1992 A 29-City Survey, December 1992
- Addressing Hunger and Homelessness in America's Cities, June 1993
- A Status Report on Hunger and Homelessness in America's Cities: 1993 A 26-City Survey, December 1993
- A Status Report on Hunger and Homelessness in America's Cities: 1994. A 30-City Survey, December 1994
- A Status Report on Hunger and Homelessness in America's Cities: 1995. A 29-City Survey, December 1995
- A Status Report on Hunger and Homelessness in America's Cities: 1996. A 29-City Survey, December 1996
- A Status Report on Hunger and Homelessness in America's Cities: 1997, A 29-City Survey, December 1997
- A Status Report on Hunger and Homelessness in America's Cities: 1998, A 26-City Survey, December 1998
- A Status Report on Hunger and Homelessness in America's Cities: 1999, A 25-City Survey, December 1999
- A Status Report on Hunger and Homelessness in America's Cities: 2000, A 29-City Survey, December 2000
- A Status Report on Hunger and Homelessness in America's Cities: 2001, A 29-City Survey, December 2001
- A Status Report on Hunger and Homelessness in America's Cities: 2002, A 25-City Survey, December 2002
- A Status Report on Hunger and Homelessness in America's Cities: 2003, A 25-City Survey, December 2003
- A Status Report on Hunger and Homelessness in America's Cities: 2004, A 27-City Survey, December 2004

- A Status Report on Hunger and Homelessness in America's Cities: 2005, A 24-City Survey, December 2005
- A Status Report on Hunger and Homelessness in America's Cities: 2005, A 23-City Survey, December 2006

Appendix B

Survey Cities & Mayors

Survey Cities & Their Mayors

City	Mayor
BOSTON, MA	MAYOR THOMAS M. MENINO
CHARLESTON, SC	MAYOR JOSEPH P. RILEY, JR.
CHARLOTTE, NC	MAYOR PATRICK MCCRORY
CHICAGO, IL	MAYOR RICHARD M. DALEY
CLEVELAND, OH	MAYOR FRANK G. JACKSON
DETROIT, MI	MAYOR KWAME M. KILPATRICK
DENVER, CO	MAYOR JOHN W. HICKENLOOPER
DES MOINES, IA	MAYOR FRANK COWNIE
KANSAS CITY, MO	MAYOR MARK FUNKHOUSER
LOS ANGELES, CA	MAYOR ANTONIO R. VILLARAIGOSA
LOUISVILLE, KY	MAYOR JERRY ABRAMSON
MIAMI, FL	MAYOR MANUEL A. DIAZ
NASHVILLE, TN	MAYOR KARL DEAN
PHILADELPHIA, PA	MAYOR JOHN F. STREET
PHOENIX, AZ	MAYOR PHIL GORDON
PORTLAND, OR	MAYOR TOM POTTER
PROVIDENCE, RI	MAYOR DAVID N. CICILLINE
ST. PAUL, MI	MAYOR CHRIS COLEMAN
SALT LAKE CITY, UT	MAYOR ROCKY ANDERSON
SAN FRANCISCO, CA	MAYOR GAVIN NEWSOM
SANTA MONICA, CA	MAYOR HERB KATZ
SEATTLE, WA	MAYOR GREG NICKELS
TRENTON, NJ	MAYOR DOUGLAS H. PALMER

Appendix C

2007 Hunger and Homelessness Information Questionnaire

**2007 Status Report on Hunger and
Homelessness
Information Questionnaire**

U.S. Conference of Mayors

CITY: _____

Contact information for the person(s) who can answer questions about the data submitted in this survey:

	Hunger Contact Person	Homelessness Contact Person
Name:		
Title:		
Agency:		
Address:		
Phone Number:		
Fax Number:		
Email Address:		

2007 Status Report on Hunger and Homelessness Information Questionnaire

This year, The U.S. Conference of Mayors has made several important changes to this questionnaire that will inform the 2007 Status Report on Hunger and Homelessness. The goals of making these changes are to increase the quality of the data collected and improve the reliability and accuracy of survey results. Because the Status Report is a highly visible document and fills a unique gap in the current research on hunger and homelessness, it was important to The U.S. Conference of Mayors to preserve continuity from previous years while still advancing a more rigorous approach to collecting data. In general, the revised survey is more data-driven and relies on objective information generated from client-tracking systems and other administrative databases.

2007 Status Report on Hunger and Homelessness Information Questionnaire

The survey is divided into four sections: Questions on Hunger, Questions on Homelessness, Questions on Housing and The Outlook for 2008. Instructions are provided for each question. The year for which survey information is requested is November 1, 2006 through October 31, 2007. This is referred to as “the last year” in the survey questions.

Part 1: HUNGER

In this section, *emergency food assistance* refers to food provided by community food-assistance programs, such as food pantries, emergency kitchens or other direct providers of emergency food assistance.

PERSONS IN NEED OF EMERGENCY FOOD ASSISTANCE

1a. Has the total number of requests for emergency food assistance in your city increased, decreased, or stayed the same during the last year? By what percentage?

1b. (Optional) If your city has more detailed data available (i.e. from a client-tracking system or other administrative database), please provide the number of unduplicated persons who received food assistance during the last year from the programs listed in the table below. Also provide the percentage change from 2006.

This question asks for an unduplicated count of persons who received food assistance during the last year, meaning that persons that used multiple programs would only be counted once in the total column and once within each program type.

	Number of Persons During the Last Year	% Change from 2006
Food Pantries		
Emergency Kitchens		
Free or Reduced Lunch		
Home-delivered Meals		
Food Stamps		
Other food assistance programs (please specify):		
TOTAL		

2. In the table below, please provide the percentage of requests for food assistance during the last year from the categories in the table. The categories are not mutually exclusive. In the third column, note whether the percentage of requests from each of these groups increased, decreased or stayed the same during the last year.

Requests from...	%	Increase/Decrease/Stayed the Same
Households with Children		
Individuals		
Elderly		
Persons Employed		
TOTAL		

3. Please explain the data sources or basis for your figures in questions 1a (and 1b, if applicable) and 2 and elaborate if desired.

2007 Status Report on Hunger and Homelessness Information Questionnaire

THE CAPACITY TO PROVIDE EMERGENCY FOOD ASSISTANCE

4. In the table below, please provide the number and quantity of food assistance provided during the last year.

	Number of Facilities During the Last Year	Meals Served During the Last Year	Pounds of Food Distributed During the Last Year
Food Pantries			
Emergency Kitchens			
TOTAL			

5. What are the limitations to providing an adequate amount of food in your city? (check all that apply)

- | | |
|---|--|
| ☐ Space | ☐ Availability of donated |
| ☐ Volunteers/staff | food/commodities |
| ☐ Demand | ☐ Other (specify) |
| ☐ Funding | |

Please describe efforts undertaken to address these limitations.

FUNDING FOR EMERGENCY FOOD ASSISTANCE

6. How much local discretionary revenue is allocated to hunger initiatives each year (total dollar amount)?

THE UNMET NEED FOR EMERGENCY FOOD ASSISTANCE

7. Do emergency food assistance facilities in your city have to turn away people because of lack of resources? If yes, please explain.

8. Please estimate the percentage of the overall demand for emergency food assistance in your city that goes unmet: (e.g., we can only meet 80% of the need, so 20% of persons who need assistance do not receive it.)

9. Please estimate the percentage of the overall demand by households with children for emergency food assistance in your city that goes unmet:

10. Please explain the data sources or basis for your responses to questions 7-9 and elaborate if desired.

THE CAUSES OF HUNGER

11. What are the three main causes of hunger in your city?

- | | | |
|---|--|---|
| ☐ Unemployment and other employment related problems | ☐ Medical or health costs | ☐ Transportation costs |
| ☐ High housing costs | ☐ Substance abuse | ☐ Lack of education |
| ☐ Poverty or lack of income | ☐ Utility costs | ☐ Other (specify) |
| | ☐ Mental health problems | |

2007 Status Report on Hunger and Homelessness Information Questionnaire

12. Please explain the data sources or basis for your response to question 11 and elaborate if desired.

13. What are the top **three** things your city needs to help reduce hunger?

- | | |
|---|--|
| ☐ Mental health services | ☐ Utility assistance programs |
| ☐ Substance abuse services | ☐ More affordable housing |
| ☐ Employment training programs | ☐ Other (please specify): |

EFFORTS UNDERWAY IN YOUR CITY

14. Please describe an exemplary program or effort underway in your city which prevents or responds to the problems of hunger.

15. Please describe efforts underway to ensure food provided through emergency food assistance programs in your city is nutritionally balanced.

HUNGER ISSUES IN YOUR CITY

16. Does the demand for emergency food assistance fluctuate by season in your city? If so, please explain.

17. Have there been any notable changes in the characteristics of persons receiving emergency food assistance in your city during the last year? If so, please explain.

18. Are there any particular economic or social issues that exacerbated the hunger crisis in your city during the past year?

Part 2: HOMELESSNESS

In this section, *homeless persons* are defined as those who reside in shelters, on the streets, in cars, or in other locations not intended as residences. *Unaccompanied Youth* are defined as children under age 18 who are not accompanied by an adult.

PERSONS EXPERIENCING HOMELESSNESS

19. In the table below, please provide the number of unduplicated persons who used emergency shelter and/or transitional housing programs during the last year. Also provide the percentage change from 2006.

This question asks for an unduplicated count of persons who used emergency shelter and/or transitional housing programs during the last year, meaning that persons that used multiple programs would only be counted once.

	Number of Sheltered Persons During the Last Year	% Change from 2006
Members of Households with Children		
Individuals		
Unaccompanied Youth		
TOTAL		

2007 Status Report on Hunger and Homelessness Information Questionnaire

19a. (Optional) If your city has more detailed data available (i.e. from a Homeless Management Information System or other administrative database), please use the tables below to describe the characteristics of persons using emergency shelter and transitional housing over the past year.

Instructions for completing these tables are attached in a separate document.

Members of Households with Children		
	Number	Percent
Age (adults and children)		
Under 5		
5-17		
18-34		
35-61		
62 and over		
TOTAL		
Gender (adults only)		
Male		
Female		
TOTAL		
Ethnicity (adults and children)		
Non-Hispanic/Latino		
Hispanic/Latino		
TOTAL		
Race (adults and children)		
African Indian or Alaska Native		
Asian		
Black or African-American		
Native Hawaiian or Other Pacific Islander		
White		
TOTAL		
Characteristics (adults only)		
Persons Employed		
Veterans		
TOTAL		
Disability Status (adults only)		
Mental health		
Substance abuse		
Persons with HIV/AIDS		
Physical disability		
Developmental disability		
TOTAL		
Victims of domestic violence (adults only)		

2007 Status Report on Hunger and Homelessness Information Questionnaire

Singles and Unaccompanied Youth		
	Number	Percent
Age		
Under 5		
5-17		
18-34		
35-61		
62 and over		
TOTAL		
Gender		
Male		
Female		
TOTAL		
Ethnicity		
Non-Hispanic/Latino		
Hispanic/Latino		
TOTAL		
Race		
African Indian or Alaska Native		
Asian		
Black or African-American		
Native Hawaiian or Other Pacific Islander		
White		
TOTAL		
Characteristics		
Persons Employed		
Veterans		
TOTAL		
Disability Status		
Mental health		
Substance abuse		
Persons with HIV/AIDS		
Physical disability		
Developmental disability		
TOTAL		
Victims of Domestic Violence		

20. Please describe the methodology and data sources used to complete question 19 (and 19a, if applicable) (e.g., HMIS, provider surveys, other administrative data, grant reporting information, etc.).

21. Have there been any notable changes in the characteristics of persons experiencing homelessness in your city during the last year? If so, please explain.

22. What is the average length of a single homeless stay for members of **households with children** in your city? Please explain the methodology and data sources used to calculate this.

23. What is the average length of a single homeless stay for **single individuals and unaccompanied youth** in your city? Please explain the methodology and data sources used to calculate this.

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THE CAPACITY TO HOUSE HOMELESS PERSONS

24. In the table below, list the number of beds and units available for homeless persons during the last year in each category. Of the total number of beds, list the number of new beds added during the last year. If your city participates in the U.S. Department of Housing and Urban Development's Continuum of Care annual application process, this information is readily available in the most recent Housing Inventory Chart (Exhibit 1, Chart I).

Housing Type	Total Number of Beds	Total Number of Units	Of the Total Number of <u>Beds</u> , the Number of New Beds Added During the Last Year
Emergency Shelter			
Transitional Housing			
Permanent Housing designated for disabled homeless persons			
TOTAL CAPACITY			

FUNDING FOR HOMELESSNESS

25. How much local discretionary revenue is allocated to homeless initiatives each year (total dollar amount)?

THE UNMET NEED FOR HOUSING HOMELESS PERSONS

26. Do emergency shelters in your city have to turn away persons experiencing homelessness because of lack of resources? Please include information on what happens to homeless **households with children** that cannot be accommodated in shelters.

27. Please explain the data sources or basis for your response to question 26 and elaborate if desired.

THE CAUSES OF HOMELESSNESS

28. What are the **three** main causes of homelessness among **households with children** in your city?

- | | | |
|---|--|--|
| ☐ Mental illness and the lack of needed services | ☐ Domestic violence | ☐ Prisoner re-entry |
| ☐ Lack of affordable housing | ☐ Family disputes | ☐ Unemployment |
| ☐ Low-paying jobs | ☐ Substance abuse and lack of needed services | ☐ Poverty |
| | | ☐ Other (specify) |

29. What are the **three** main causes of homelessness among **singles and unaccompanied youth** in your city?

- | | | |
|---|--|--|
| ☐ Mental illness and the lack of needed services | ☐ Domestic violence | ☐ Unemployment |
| ☐ Lack of affordable housing | ☐ Family disputes | ☐ Poverty |
| ☐ Low-paying jobs | ☐ Substance abuse and lack of needed services | ☐ Emancipation from foster care |
| ☐ Sexual orientation | ☐ Prisoner re-entry | ☐ Other (specify) |

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30. Please explain the data sources or basis for your response to questions 28 and 29 and elaborate if desired.

31. What are the top **three** things your city needs to help reduce homelessness?

- | | |
|---|---|
| ☐ More permanent housing | ☐ Employment training programs |
| ☐ Mental health services | ☐ Service coordination |
| ☐ Substance abuse services | ☐ Other (specify): |

EFFORTS UNDERWAY IN YOUR CITY

32. Please describe briefly an exemplary program or effort underway in your city which prevents or responds to the problems of homelessness.

33. Has your city developed a ten-year plan to end homelessness? If so, does this plan focus on any specific subpopulation, such as the chronic homeless or households with children? What year was the plan adopted? Are there efforts in place to track progress against plan goals?

HOMELESSNESS ISSUES IN YOUR CITY

Please respond to at least two questions from numbers 34 through 38.

34. Does the demand for shelter fluctuate by season in your city? If so, please explain.

35. Does your city have any policies, such as anti-vagrancy laws or loitering laws, which are commonly enforced against homeless persons? If so, please explain.

36. What is your city's approach to providing supportive services, such as employment, health care, substance abuse treatment, etc. for the homeless?

37. Does your city have a plan in place to ensure that individuals released from foster care, hospitals, prisons, psychiatric facilities or other institutions are not discharged into homelessness? If so, please explain. If not, what is your city's approach for dealing with this issue?

38. What is your city's approach to preventing homelessness?

Part 3: HOUSING

39. During the last year, has the number of **households with children** on the Section 8/Housing Choice Voucher waiting list increased, decreased or stayed the same? By what percentage? During the last year, has the number of **households with children** on your city's public housing waiting list increased, decreased or stayed the same? By what percentage?

40. During the last year, has the number of disabled **singles and unaccompanied youth** on the Section 8/Housing Choice Voucher waiting list increased, decreased or stayed the same? By what percentage? During the last year, has the number of disabled **singles and unaccompanied youth** on your city's public housing waiting list increased, decreased or stayed the same? By what percentage?

Part 4: THE OUTLOOK FOR 2008

41. Do you expect the demand for emergency food assistance in your city to increase, decrease, or stay the same during 2008?

42. Do you expect the demand for emergency food assistance specifically by **households with children** in your city to increase, decrease, or stay the same during 2008? Please explain.

43. Do you expect requests for emergency shelter in your city to increase, decrease, or stay the same during 2008?

44. Do you expect requests for emergency shelter specifically by homeless **households with children** to increase, decrease, or stay the same during 2008? Please explain.

Appendix D

Hunger and Homelessness Contacts by City

Hunger and Homelessness Contacts by City

Hunger Contact	Homelessness Contact
BOSTON, MASSACHUSETTS	
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CHICAGO, ILLINOIS	
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Hunger Contact		Homelessness Contact	
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PHILADELPHIA, PENNSYLVANIA			
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Hunger Contact		Homelessness Contact	
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Hunger Contact	Homelessness Contact
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