

City of Savannah, Georgia
ALLOCATION PLAN FOR
HOME INVESTMENT
PARTNERSHIP-
AMERICAN RESCUE PLAN
(HOME-ARP)

(Final)

Date: January 12, 2023

Background

As part of the American Rescue Plan (ARP), the City of Savannah was allocated \$3,100,743 in HOME Investment Partnership (HOME) funds to assist individuals or households who are homeless or, at risk of homelessness and other vulnerable populations. The purpose of HOME-ARP funds is to reduce homelessness and increase housing stability, and the funds may be used for housing development, rental assistance, supportive services, and non-congregate shelter. In order to receive its HOME-ARP allocation, the City of Savannah must develop and submit a HOME-ARP Allocation Plan to the U.S. Department of Housing and Urban Development (HUD). The City of Savannah has developed this Allocation Plan using the template provided by HUD. More information about HOME-ARP may be found at: <https://www.hudexchange.info/programs/home-arp/>.

References to “the ARP” mean the HOME-ARP statute at section 3205 of the American Rescue Plan Act of 2021 (P.L. 117-2).

Consultation

Before developing the HOME-ARP Allocation Plan, at a minimum, a participating jurisdiction (PJ) must consult with: Continuum of Care (CoC) providers serving the jurisdiction’s geographic area; homeless service providers; domestic violence service providers; veterans’ groups; public housing agencies (PHAs) (including statewide or regional PHAs) and CoC; public agencies that address the needs of the qualifying populations; and public or private organizations that address fair housing, civil rights, and the needs of persons with disabilities.

The City of Savannah met with the CoC Lead Agency and the Public Housing Authority, on December 6, 2021, to develop strategies for determining the needs of qualifying populations to be served with HOME ARP funds. As a result of that meeting, HOME-ARP Surveys were developed and disseminated electronically and in hardcopy from January 10th to February 14th, 2022, with the intent of determining the unmet housing needs, barriers and gaps within our current shelter, housing inventory and service delivery system. A total of 290 HOME-ARP surveys were completed by homeless service providers, Continuum of Care agencies, persons experiencing homelessness, and the public.

Homeless service providers had the opportunity to attend three two-hour meetings specifically for agencies and stakeholders over three days in June 2022 – all were hosted by the City of Savannah at Pennsylvania Avenue Resource Center (PARC). Meeting dates and times for discussion of homeless services were Monday June 13, from 9:00 am to 12:30 pm, Tuesday June 14, from 9:00 am to 11am, and Wednesday June 15, from 9:00 am to 11 am.

The City has a close working relationship with the Continuum of Care and the Chatham-Savannah Authority for the Homeless (CSAH), the Housing Authority of Savannah (HAS) and with service providers in the Chatham Savannah Continuum of Care. The City leveraged these relationships to identify unmet needs and collaboratively develop an allocation plan to address the service

gaps in the Continuum of Care through a series of formal and informal consultations before and during development of this HOME-ARP Allocation Plan.

Public Participation

The City of Savannah's consultation process for HOME-ARP Allocation Plan was conducted concurrently with the jurisdiction's five-year consolidated plan process between April and September 2022. This process enabled the same level of public participation for HOME-ARP Allocation Plan and the Consolidated Plan.

In accordance with the City's Public Participation Plan and to broaden public participation the notice of initial public hearing was published as a 3" x 7" color display ad in the Main Section of the Savannah Morning News on April 8, 2022. The notification also provided contact information to request special accommodations for persons with disabilities. Additionally, the notice invited written comments to be submitted to the Human Services Director through May 6, 2022.

The initial public hearing was held Wednesday, April 20, 2022 from 6 p.m. to 7:30 p.m. at the Coastal Georgia Center, 305 Fahm Street in Savannah. The presentation identified the amount and eligible uses of HOME-ARP funding along with a description of Qualified Populations eligible for HOME-ARP programs and services.

The subsequent draft HOME-ARP Allocation Plan was made available for public review and comment for no less than 15 days, beginning with a public notice published in the Savannah Morning News on October 16, 2022. The notice provided opportunities to review the draft Allocation Plan in person at 5513 Abercorn Street during regular business hours and in digital form on the City's Human Services website. Written comments from the public were also invited to be submitted by mail to the Director of Housing and Neighborhood Services.

Agency	Type of Agency	Method of Consultation	Feedback
Chatham-Savannah Authority for the Homeless (CSAH)	Lead Applicant, Continuum of Care GA-507 serving Chatham County and the City of Savannah. CSAH is also a Homeless Services and Housing Provider.	Public meetings, email, bi-weekly CoC/United States Interagency Council on Homelessness (USICH) meetings. Individual consultation on specific questions by email and in-person meetings. HCD Public Meetings June 13-15 and written comments during plan development August through October 2022.	Provided Point-In-Time and Housing Inventory Counts to support gap analysis in the Continuum of Care. Identified the need for permanent supportive housing and housing needs by household type. Recommended Improvements to Coordinated Entry and identification of available resources in ‘real time,’ Highlighted the challenge to provide Rapid Rehousing in Savannah/Chatham due to high housing costs. Identified need for increased street outreach personnel and extended hours to 11pm to build trust with unsheltered persons. Characteristics of housing instability for intervention before becoming homeless. Recommended rehousing of population housed through CV-EHV. Priority needs of HOME-ARP Qualified Populations, CSAH advocated against preferences for any HOME-ARP Qualified Populations or sub-populations. Identification of potential Permanent Housing acquisition for Cove at Dundee PSH and potential development of Permanent Housing on City-owned property at 916 Martin Luther King Avenue. Identified the difficulty housing homeless households <i>without income</i> more difficult than households <i>with income</i> that can be allocated to the 30% income rent payment.

The Salvation Army	Homeless Shelter and Service Provider	HCD public meetings June 13-15, bi-weekly CoC/USICH meetings, and HOME-ARP Survey.	Highlight the need for respite care for medically fragile and recently discharged from hospital. Str
Union Mission, Inc	Homeless Service Provider of Transitional Shelter for women and families. Also a Domestic Violence service provider.	CoC/USICH meetings bi-weekly January through July 2022. City staff meet with Union Mission ED and staff during Site Visit August 23, 2022. HCD Public Meetings June 13-15	Need for Unified Case Management. Need for day shelter identified and under program development. Program focus includes self-sufficiency to address the barriers to households with zero income. Special need types: Only ES in GA-507 for unaccompanied homeless females, also for victims of Domestic Violence. Transitional Housing only with 90 day maximum stay. Shortage of Permanent Housing/Rapid Rehousing is a gap for transitioning from TH to PH/PSH. Key supportive services needed are Mental Health/Behavioral Health – all resources developed by Union Mission (no state resources from GA DBHDD). Housing for HIV/AIDs in scattered site units.
Inner City Night Shelter, Inc	Homeless services and shelter provider.	Public meetings, bi-weekly CoC/USICH meetings. HCD Public Meetings June 13-15	Need more liaisons for outreach to homeless. Better integrations of homeless resources to improve access to the diverse range of resources.
Park Place Outreach, Inc.	Homeless services and shelter for unaccompanied homeless youth.	Surveys, Public meetings, bi-weekly CoC/USICH meetings, HCD Public Meetings June 13-15	Increasing space of 12 bed facility for homeless/runaway youth ages 11 to 17 is an alternative to foster care/detention. Better coordination is needed with schools to identify at-risk youth and creative outreach strategies for doing so. Also need better strategies for connecting with parents of youth at risk for homelessness.
Family Promise of the Coastal Empire	Homeless services, temporary and permanent	Survey, Public meetings, bi-weekly CoC/USICH meetings. HCD Public Meetings June 13-15	Strategies for rehousing in permanent housing with agency role as sponsor of tenant to build landlord acceptance of homeless as responsible tenants. In many cases Family Promise acts as a ‘sponsor’ and

	supportive housing provider.		signs the initial lease. The lease is transferred to the tenant after being stabilized in the housing. Family Promise also utilizes a homeless prevention and shelter diversion strategy to keep families housed in place and out of the “homeless system.”
Greenbriar Children’s Center, Inc.	Non Profit	Survey, HCD Public Meetings June 13-15.	Stressed the importance of family preservation, which requires rapid rehousing options for access to permanent housing.
Old Savannah City Mission	Non Profit	Survey, web-published program descriptions and data consulted prior to plan development.	Community meeting noted this agency’s Permanent Supportive Housing model. The agency also addresses drug and alcohol abuse in its Emergency Shelter program as a root cause of homelessness among men.
United Ministries of Savannah	Non Profit Faith Based	Survey, HCD Public Meetings June 13-15.	Faith-based agencies aren’t usually integrated into the coordinated entry system. Need for day shelter where homeless can access resources for ID, summer cooling and winter warming options.
Wesley Community Centers of Savannah, Inc	Non-Profit Faith Based	Survey, website and program reports consulted prior to plan development.	Wesley Community Center, Family Life Center, and Lady Bamford Early Learning Center are a key resource for childcare and early learning for children from homeless and low-income households.
SAFE Shelter for Domestic Violence	Non Profit Domestic Violence Agency	Agency reports/website, Survey, HCD Public Meetings June 13-15.	Shelter space often at capacity. Cases of Domestic Violence increased due to pandemic. Women and children, and some men are victims of DV. Transportation is often a barrier for many survivors. Needs highlighted for this population include legal services for Protective Orders and children DV victims.
Housing Authority of Savannah	Public Housing Authority	Public Housing agency and Housing Voucher provider.	Ongoing need for increased landlord participation/acceptance of vouchers.

Savannah Baptist Center	Non Profit Faith Based agency	Organization web site and review of program data consulted prior to plan development.	Not full-time staffing, as result, program resources not integrated with Continuum of Care resources inventory.
Social Apostate / Catholic Charities	Non Profit Faith Based agency	Organization web site and review of program data consulted prior to plan development.	Resources include basic needs – soup kitchen, thrift store, and groceries. Key resource available is assistance with obtaining vital documents such as birth certificates at no expense to homeless and employment resources.
LIFE (Living Independence for Everyone)	Non Profit Assisting Disabled Persons	Survey and community meetings. Statewide Independent Living Council of Georgia web site.	GA Dept. of Community Affairs State Homeless & Special Needs Housing Home Access Program
Changing Homelessness	Non Profit Homeless Agency in FL and GA	Annual reports and program documentation related to Veterans Affairs Supportive Housing (HUD-VASH) program in coastal Georgia.	Supportive Services for Veteran Families (SSVF) program administration and coordination of services in 17 counties throughout Florida and Georgia, including GA-507.
Georgia Dept. of Education	State Government Agency	2020-2021 Statewide Data on Homeless Youth consulted prior to plan development.	2020-2021 Annual Report McKinney-Vento Education for Homeless Children and Youth (EHCY). Black students and students with disabilities experienced high rates of homelessness.
Veterans Administration Savannah Vet Center	Federal Government Agency	Website accessed for literature and guidance consulted prior to plan development: https://www.va.gov/homeless/homeless-coordinators.asp https://www.va.gov/homeless/promising-practices.asp	Resources available to Veterans families regardless of discharge type without having a service-connected disability. Promising practices for homeless vets. VA also supports landlord outreach strategies and a “Rapid Resolution” program to divert at risk veterans away from the homeless ‘system’ by coordinating alternative housing solutions, even if they are temporary.
Georgia Dept. of Behavior Health and Developmental Disabilities	State Government Agency	Direct outreach by email and review of programs (such as HUD 811) as they apply to those homeless with behavioral health and supportive service needs of homeless populations. It is estimated up	Identified a policy framework for provision of Permanent Supportive Housing to enable independent living, a foundation for housing first strategies when addictive behaviors are an underlying factor of homelessness. Also, how

		to 2 in 3 homeless have a behavioral health or developmental disability.	expansion of Medicaid under the Affordable Care Act would expand supportive services for behavior health and could provide supportive services to 1 in every 3 homeless persons.
U.S. Interagency Council on Homelessness (USICH) and House America	Federal Government	Bi-weekly House America workshops and best-practice webinars related to HOME ARP funding and House America goals for participating local governments were utilized in development of this plan.	Key focus is on re-housing populations in temporary and emergency housing (Emergency Rental Assistance, Emergency Housing Vouchers) during the Covid pandemic to permanent housing acquired or constructed with HOME-ARP funding. The Chatham/Savannah Continuum of Care board was expanded in July 2022 to include additional agencies in line with the USICH model. USICH strategies for Data and Equity were employed in development of needs assessment and gap analysis for this HOME-ARP plan.
U.S. Department of Health & Human Services	Federal Government Agency	Substance Abuse and Mental Health Services Administration Homelessness Programs and Resources were utilized in development of this plan.	SAMHSA's formula and discretionary grant programs support many types of behavioral health treatments and recovery-oriented services. SAMHSA's services increase access to disability income benefits for eligible adults who are experiencing or at risk for homelessness. African American Behavioral Health Center of Excellence (AABH-COE) mission is to help transform behavioral health services for African Americans and that this group is disproportionately impacted by homelessness and adverse behavior health outcomes.

Needs Assessment and Gaps Analysis

Introduction

City of Savannah is served by one Continuum of Care, GA-507, which serves all of Chatham County. About one-half of the County's population resides in the City of Savannah. The Chatham-Savannah Authority for the Homeless is the HUD Collaborative Applicant for the Chatham Savannah Continuum of Care, providing lead on Homeless Management Information System (HMIS) and Coordinated Entry for 25 programs that collectively provided services to 4,789 unduplicated individuals experiencing homelessness in 2021.

The purpose is to identify gaps and barriers in community homelessness services, the results of an analysis of the current GA-507 Continuum of Care system for the homeless population in Chatham County and the City of Savannah. The CoC is a coordinated, community-based approach of identifying needs and building a system of housing and services to address those needs. The CoC consists of individuals and organizations committed to impacting and ending homelessness in the community.

Current System of Care

The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 is the federally mandated legislation that governs Housing and Urban Development (HUD) funding to states and communities. OPENING DOORS is the strategic plan that accompanies the HEARTH Act that guides the work of federal agencies as it relates to preventing and ending homelessness. HUD, through its Continuum of Care programs, places priorities on certain activities at the state and community level, to restructure their crisis response system to embrace coordinated access and rapidly house homeless persons.

Performance criteria against which states and communities are judged and obtain funding for include:

- Number of people who become homeless
- Length of time homeless
- Returns to homelessness
- Jobs and income
- Thoroughness in reaching homeless population

The system of care for the homeless in Chatham County is similar to the structure of systems of care for the homeless in many urban cities around the country. There are emergency shelters with length of stay up to 90 days, transitional housing, and permanent supportive housing units. Shelter stays are often supplemented with case management services (e.g., referrals, assistance with subsidies) that may vary by shelter depending on staffing and availability. The Chatham-Savannah CoC employs a "Housing First" strategy to move clients directly from the street or shelters and into affordable housing or permanent supportive housing as quickly as possible.

The Housing First approach to homelessness prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions (within limits) to quickly connect individuals and families experiencing homelessness to permanent housing by minimizing barriers to entry. In general, the intent of Housing First is that unsheltered homeless persons should not be deemed ineligible for housing due to existing behavioral health and special needs of the person or household.

The Chatham County CoC uses a single point of entry called the Coordinated Entry System (CES). CES is a hybrid approach incorporating one central access point supplemented with outreach navigators that will meet persons experiencing homelessness in sheltered and unsheltered locations as needed to provide a variety of avenues in which all segments of the population, including those at risk of homelessness, can connect with and have access to housing and support services.

One of the main purposes of CES is to ensure that people with the most severe service needs and levels of vulnerability are prioritized for housing and homeless assistance. The CES utilizes an assessment decision tool to direct and prioritize access to shelter and housing generally based on the chronic nature and length-of-time homeless.

Homelessness in Chatham County and the City of Savannah

Homelessness is a condition that often begins with a household crisis. For households at risk of homelessness, an unresolved crisis often results in displacement from housing. Such displacement places the household in a dynamic condition of moving towards a stable and permanent housing situation. The Point in Time Count provides an annual snapshot of people who are experiencing homelessness and progress toward exiting this condition.

Point in Time Counts

Chatham County’s most recent Point in Time Count took place in January 2021 by participating social service agencies offering overnight emergency beds, transitional housing, and supportive services.

Sheltered, Unsheltered and Totals, 2021

Sheltered	Unsheltered	Total
321	227	548

The Chatham County CoC covers the entire City of Savannah. Roughly one half of Chatham County residents reside within the City of Savannah. However, most of homeless population, homeless camps, shelters, and service providers located in Savannah.

CoC providers of emergency shelter and transitional beds are improving their services and housing opportunities, including.

- Opening a Day Shelter where homeless can access resources.
- Adding Permanent Housing for Homeless and Supportive Services
- Parkers Place, non-congregate Emergency shelter for homeless women

Emergency Shelter and Transitional Beds, PIT Counts 2017-2021

Beds	2017	2021	Difference
Emergency Shelter	346	281	-65
Transitional Housing	393	304	-89
Totals	739	585	-154

The inventory of Emergency Shelter beds and Transitional shelter beds declined by a total of 154 beds from 2017 to 2021.

The declining need for shelter beds corresponded to the downward trend in the number of homeless persons in shelter beds from 2017 to 2021.

Individuals Experiencing Homelessness, PIT Counts 2017-2021

Individuals	2017	2021	Difference
Emergency Shelter	244	131	-113
Transitional Housing	319	190	-129
Totals	563	321	-242

Analysis

The decrease in shelter and transitional beds reflected an outcome of the CoC's strategy to prioritize permanent housing over shelter beds. This strategy did not decrease in emergency shelter capacity because the number of unsheltered homeless similarly trended downward during this period by approximately 37%. (136 persons).

Trends in Total Homeless

The table below shows how the total number of persons experiencing homelessness from 363 during the 2017 Point in Time count to 227 in 2021 even as emergency shelter and transitional housing beds also decreased.

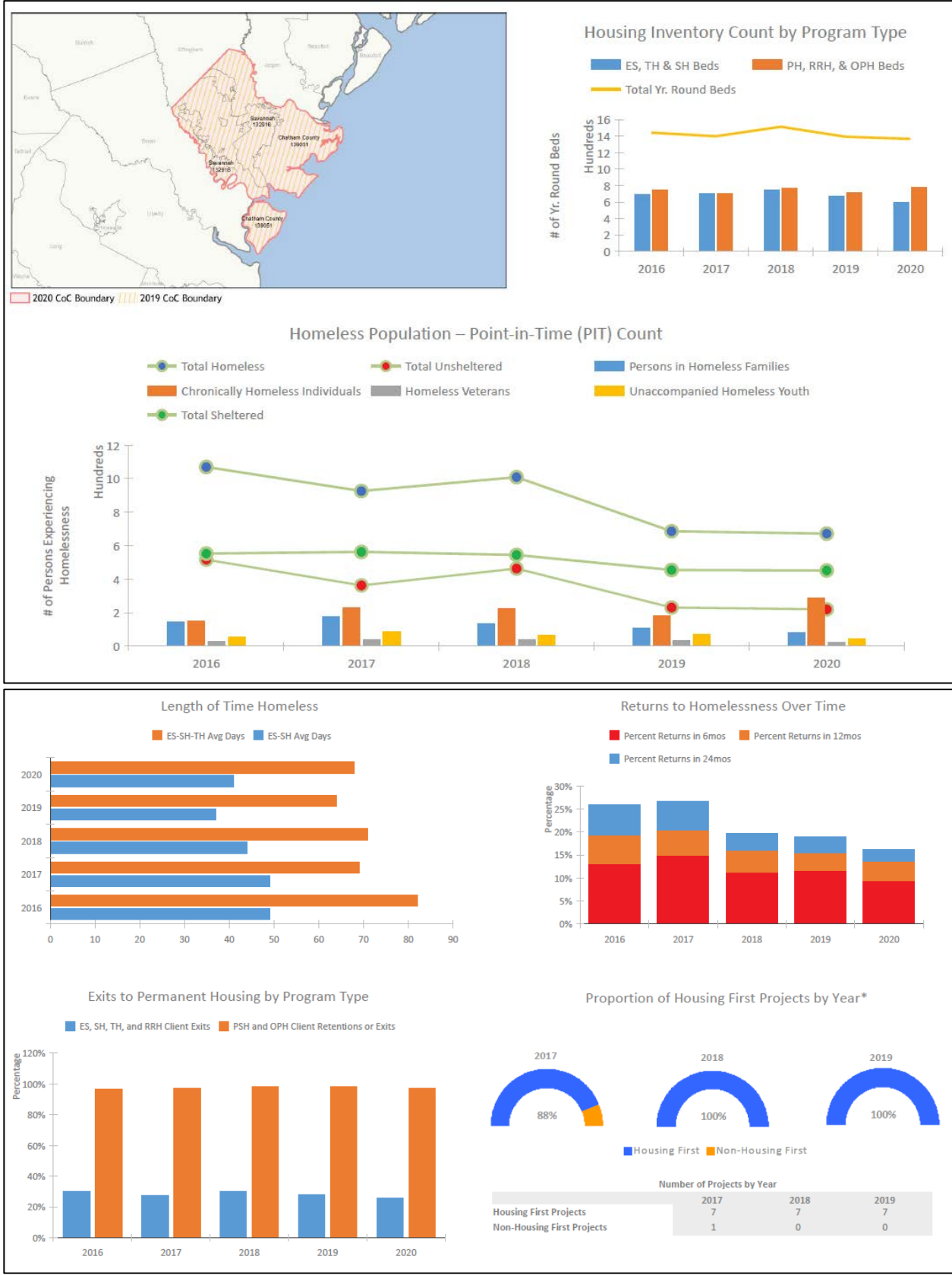
Sheltered and Unsheltered, PIT Counts 2017-2021

Persons	2017	2021	Difference
Sheltered	563	321	-242
Unsheltered	363	227	-136
Totals	926	548	-378

The decline in both unsheltered and sheltered persons may plausibly be attributed to a 54% increase (188 beds added) to Permanent Supportive Housing from CoC providers. The CoC network thus appears to be effective in managing a mix of emergency and permanent accommodations in a coordinated effort to assist people out of homelessness.

Permanent Supportive Housing	2017	2021	Difference
Beds	346	534	+188

Chatham-Savannah Continuum of Care System Performance



2021 Housing Inventory Count

The Chatham County CoC monitors the available capacity of housing units, housing beds and emergency shelter beds for assisting people experiencing homelessness.

Housing Inventory, January 2021

Type of Assistance	HIC Beds	PIT	Utilization
Emergency shelter	281	133	47%
Transitional housing	304	188	62%
Permanent supportive housing	761	690	91%
Rapid re-housing	0		
Other permanent housing	0		
Totals	1346	1011	75%

HMIS/CSAH-CoC-507

There are 761 permanent housing beds in Chatham County. Of these, 534 are designated as Family Beds in 242 designated Family Units. On average, each Family Unit contains 2.2 beds.

The balance of 227 permanent housing beds are designated “Adults Only.” The HMIS tables provided for this analysis do not specify how many housing units contain these 227 beds, however a summary by project type is a useful guide.

Six permanent housing programs/facilities serving only adult households contain 78 of the 227 adult beds. 70 of these 78 beds (90%) were utilized during the 2021 PIT/HIC. These are:

- Cove of Dundee Village 2-PSH
- Cove of Dundee-PSH
- Union Mission Daniel- Flagg Villas
- Union Mission Phoenix House DCA
- Union Mission-H & ETC Eagles Landing
- EOA/Housing Authority SRO Section 8

Four permanent housing programs/facilities provide both Family Units and Adults Only Units.

The following program/facilities contain 129 adult only beds and 369 family beds with an overall utilization of 95% during the 2012 PIT/HIC:

- Build A Bridge Foundation LEAP Program
- Chatham Savannah Authority for the Homeless 54 unit S+C
- Housing Authority of Savannah Shelter + Care
- Union Mission-H & ETC Dutchtown/SRO Apartments

Three permanent housing programs/facilities providing only Family Units contain 185 Family Beds with and overall utilization of 80%. are:

- EOA Austin House (PSH) (25% utilization with 10 of 40 beds occupied)
- EOA Savannah-Chatham Peeler Home (62% with 5 of 8 beds occupied)
- Housing Authority/VASH (97% utilization with 133 of 137 beds occupied)

As of the 2021 HIC submission there were 13 dedicated beds for unaccompanied youth from Park Place Outreach. Eight of these are in Emergency Shelter and five are classified as Transitional Housing. These youth beds were at 85% capacity during the 2021 PIT count, with 11 unaccompanied youth (age 24 and under) housed in emergency and transitional shelter. Of these, three unaccompanied youth, age 18 years or younger were housed in emergency shelter and transitional housing beds.

The national trend for CoCs is to increase availability of permanent supportive housing (PSH) units. This may be accomplished through production or acquisition units and through conversion of transitional housing units (by definition lengths of stay up to 2 years). Guidance from HUD and USICH indicate PSH is more effective in addressing the complex needs of persons experiencing homelessness, especially those that have been chronically homeless.

Permanent housing units may correspond to service provider specializations such as veterans, families with children, homeless individuals with serious mental illness, HIV/AIDS, and chronically homeless persons. However, permanent supportive services are often available independently of the housing provider to enable more housing choice.

Persons experiencing homelessness are typically classified by household type and individually. Household types include Adults only, Adult and Child, and households with Only Children. The 2021 only made these classifications for 184 sheltered households because of limitations due to the COVID pandemic. 83% (153 households) of the sheltered households were Adults only, 28 households were Adult and at least one Child, three households were Children Only (age 24 and younger). Households are further classified if they are chronically homeless. The 2021 PIT identified 20 Chronically Homeless households with a total of 32 people among them. Four of these were family households with 16 people among them.

The PIT data also provides details about the characteristics of homeless individuals. The 2021 data also had gaps in these data for unsheltered and Transitional Housing populations. The sub-population data for 2019 did fully classify both sheltered and unsheltered populations as follow: 51% with Chronic Substance Abuse, 26% with mental illness, 10% Unaccompanied Youth, 9% Victims of Domestic Violence, 5% Veterans, and 2% HIV/AIDS.

Persons experiencing homelessness, 2019 (ES, TH, Unsheltered)

Population	Number
Chronic Homeless	294
Unaccompanied Youth (age 24 or under)	72
Families with children	182
Veterans	33
HIV/AIDS	11
Domestic Violence	60

Community Survey Results

The purpose of the Provider Survey was to capture information regarding the importance of specific factors that providers believed contributed to homelessness, and 2) to capture information regarding areas of system improvement.

Of the responses from the community were 60 residents living in the City of Savannah, 12 from greater Chatham County 46 employees of non-profit and government organizations, and five not in any of the aforementioned categories. *See* “Community Survey” in the Appendix.

Affiliations of Community Survey Respondents

Type of Service	Responses
Homeless Services	17
Domestic Violence Services	6
Veterans Group	9
Civil Rights Organization	2
Fair Housing Organization	3
Disability Organization	11
Other	40

The causes of homelessness are complicated, often with multiple factors contributing to a particular person or family becoming homeless. The factor that is usually identified most often in research and community needs assessments is housing affordability. The same holds true with the results of the community surveys conducted in Chatham County.

The condition leading to homelessness characterized by respondents as a shortage of affordable housing and corresponding need for more production of affordable units.

From your perspective, what are the most pressing needs of people experiencing or at-risk of homelessness, in Savannah?	Count	Percent
Production of Affordable Housing	68	55%
Supportive Services	60	48%
Homeless Prevention Services and Housing Counseling Services	57	46%
Non-Congregate Shelter (with private units/rooms as temporary shelter)	43	35%
Short-term Rental Assistance	33	27%

Beyond increasing the supply of affordable housing, three of the next four most common responses identified a need for housing intervention with supportive services, housing counseling, emergency shelter and short-term rental assistance.

Based on your knowledge, please identify the population with the highest OVERALL NEED and most underserved.	Count	Percent
Families	52	42%
Single Adults	34	27%
Veterans	16	13%
Unaccompanied Youth	7	6%
Victims of Domestic Violence	7	6%
Other	8	6%

What do you feel are the top five most important unmet housing and service needs do you see among HOME ARP "Qualifying Populations" in Savannah?	Count	Percent
Employment Services	79	64%
Mental Health Resources	76	61%
Job Training	71	57%
Transportation	65	52%
Case Management	59	48%
Legal Assistance (to obtain and retain housing)	45	36%
General Housing Information	42	34%
Food Pantry	34	27%
Adult Education	32	26%
Medical Resources	32	26%
Dispossessory Warrant assistance	21	17%
Food Stamps	15	12%
Identification Services	14	11%
Clothing	10	8%
Other	6	5%
Storage	4	3%

Based on your knowledge, please identify the population with the highest OVERALL NEED and most underserved.	Count	Percent
Families	52	42%
Single Adults	34	27%
Veterans	16	13%
Unaccompanied Youth	7	6%
Victims of Domestic Violence	7	6%
Other	8	6%

Based on your knowledge, please identify the population with the highest need of HOUSING RESOURCES	Count	Percent
Extremely low-income 30% area median income or lower	44	35%
Homeless Individuals	30	24%
Individuals at-risk of homelessness	27	22%
Senior citizens	7	6%
Persons with disabilities	6	5%
Domestic violence/human trafficking victims	5	4%
Other	3	2%
Unaccompanied youth 18-24 years old	2	2%

What do you feel are limitations to housing options in the City of Savannah?	Count	Percent
High rents	94	76%
Lack of accessible housing units	65	52%
Poor credit	56	45%
Security deposit too high	48	39%
Lack of vacant housing units	44	35%
Criminal records	39	31%
Legal issues	17	14%
Other	11	9%

What do you feel are the top five most important unmet housing and service needs do you see among HOME ARP "Qualifying Populations" in Savannah?	Count	Percent
Employment Services	79	64%
Mental Health Resources	76	61%
Job Training	71	57%
Transportation	65	52%
Case Management	59	48%
Legal Assistance (limited to ability to obtain and retain housing)	45	36%
General Housing Information	42	34%
Food Pantry	34	27%
Adult Education	32	26%
Medical Resources	32	26%
Dispossessory Warrant assistance	21	17%
Food Stamps	15	12%
Identification Services	14	11%
Clothing	10	8%
Other	6	5%
Storage	4	3%

What Essential Services gaps do you see within the current shelter and housing inventory, as well as the service delivery system in Savannah?	Count	Percent
Utilities Assistance (gas, electric, water, sewage)	78	63%
Mentorship Program (i.e., Life skills training)	72	58%
Public Transportation costs	65	52%
Public Computer and Wi-Fi access	53	43%
Food Banks/Meals	44	35%
Hotel/Motel vouchers	39	31%
Clothing	22	18%
Storage Options	17	14%
Other	9	7%

What Housing/Shelter gaps do you see within the current shelter and housing inventory, as well as the service delivery system in Savannah?	Count	Percent
Homeless Prevention Services (Short Term Rental Assistance)	75	60%
Rapid Rehousing (Housing Relocation and Stabilization Services)	70	56%
Permanent Supportive Housing	70	56%
Transitional Housing	60	48%
Emergency Shelters	54	44%
Cold Weather Shelters	51	41%
Other	8	6%

What Supportive Services gaps do you see within the current shelter and housing inventory and the service delivery system in Savannah?	Count	Percent
Mental Health Services	85	69%
Wrap-around Services	67	54%
Substance Use Disorder Services	61	49%
Health Services	54	44%
Other	7	6%

Client Survey Results

224 surveys were completed by current and formerly homeless persons. Two thirds of respondents were males and one-third were females.

Gender	Count	Percent
Male	139	62%
Female	85	38%
Other	0	0%

Among those surveyed, homelessness appears to increase with age. The significant drop (by 2/3) in in homelessness for the cohort 61 and older appears to be correlated with increased housing options for seniors.

Age	Count	Percent
46-60	84	38%
31-45	74	33%
21-30	30	14%
61+	29	13%
12-20	5	2%

The majority of homeless households (70%) are individuals. Similarly, 70% of homeless person in GA-507 are men. The male-dominated nature of the homeless population has historically underserved homeless women with shelter. To address this disparity, a new non-congregate shelter open was completed in September 2022.

What are the general ages of the people who live with you?	Count	Percent
Adults 18+ without children	114	70%
18 and under	26	16%
Senior adults 65+	14	9%
Adults 18+ with children	10	6%

Compared to Savannah population overall, both African Americans and White/Caucasians are proportionally represented among the homeless population.

Race	Count	Percent
Black or African American	110	50%
White or Caucasian	94	42%
Hispanic or Latino	5	2%
American Indian or Alaska Native	0	0%
Asian	1	0%
Native Hawaiian or other Pacific Islander	3	1%
Multiple Races/Other	9	4%

The question of income highlights a significant challenge for housing the 29% of homeless persons with no income. Additionally, the second largest source of “income” is food assistance, which also is unlikely to be a significant factor in securing permanent housing. The next three most common sources of income are significant factors in securing permanent housing.

What sources of income do you receive? (If applicable, select all that apply)	Count	Percent
None	82	29%
Food Stamps	52	18%
SSI	49	17%
Employment Income	41	14%
SSDI	15	5%
Other	14	5%
Social Security	9	3%
VA Benefits	9	3%
Child Support	7	2%
General Public Support	4	1%
Spousal Support	3	1%
Unemployment Income	2	1%
TANF	0	0%
Retirement Benefits	0	0%

The Continuum of Care supports self-sufficiency as a critical component of moving those experiencing homelessness into stable housing. SSDI and VA benefits often provide supportive services for those with behavioral health, mental health, and physical disabilities.

If you can pay rent, what is your affordable range per month?	Count	Percent
\$ 0 - \$ 400	138	64%
\$ 401 - \$ 800	52	24%
\$ 801 - \$1,200	9	4%
\$1,201 - \$1,600	2	1%
No response	16	7%

For individuals experiencing homelessness, financial considerations of household income and credit are significant barriers for attaining stable housing. Secondary concerns are related to mental health, behavioral health, addiction, and criminal history.

What makes it difficult for you to get or keep housing? (Select all that apply):	Count	Percent
Low household income	102	20%
No household income	51	10%
Bad credit	37	7%
Mental health	31	6%
Other	31	6%
Medical issues	29	6%
Lost job	23	5%
Criminal record	23	5%
Drug/Alcohol abuse	21	4%
Bad rental history/issues with landlord(s)	17	3%
Relocation	17	3%
No rental history	14	3%
Legal issues	13	3%
Minimum wage job	12	2%
Loss of family member through death	12	2%
Illness	12	2%
Stolen belongings	12	2%
Domestic violence	9	2%
Loss of partner through death or divorce	9	2%
Injury	8	2%
Release from prison/jail	5	1%
Natural disaster	5	1%
Racial or ethnic discrimination	4	1%
Foreclosure	4	1%
Release from hospital	3	1%
Aged out of foster home	2	0%
Large family 5+	0	0%
Release from psychiatric facility	0	0%

Consistent with the Community Survey, access to housing that is affordable and available is severely limited in the Savannah metropolitan area.

Barriers in my community that make it difficult to get or keep housing: (Select all that apply):	Count	Percent
No housing is affordable to me	29	19%
Other	24	16%
Landlords won't work with people with bad credit	18	12%
No section 8 or other subsidized housing available	18	12%
The housing system is difficult to navigate	16	11%
No housing available to rent	14	9%
Landlords won't work with people with criminal records	9	6%
No transportation to get to work	7	5%
Loss of housing in my community	6	4%
No housing for seniors Other	5	3%
Landlords won't rent to youth	2	1%
No jobs in my community	1	1%
Landlords discriminate based on race/ethnicity	1	1%

About one in every five persons experiencing homelessness have received assistance in the form of case management. Follow-up is needed regarding assistance classified as Other while most types of assistance is being accessed at relatively low rates. The final question reveals that most 5 of every 6 clients had moderate or extreme difficulty accessing housing assistance.

What type of housing assistance have you received?	Count	Percent
Other	105	36%
Case management	57	19%
Mental health services	29	10%
Back rent to prevent eviction	17	6%
Resource and referrals to reach my goals	11	4%
Legal services	10	3%
Short-term rent assistance	10	3%
Long-term rent assistance	8	3%
Budgeting assistance/budget coaching	7	2%
Deposit to get into a new house	7	2%
Transportation service	7	2%
Advocacy by caseworker	6	2%
Landlord/tenant information	5	2%
Financial management training	5	2%
Job skills development training	5	2%
First month's rent to get into a new house	4	1%

How difficult was it to access housing assistance?	Count	Percent
Extremely difficult	123	60%
Moderately difficult	49	24%
Not difficult	34	17%

In addition to asking what housing assistance has been received among those surveyed, respondents were asked what types of assistance would be most helpful to those experiencing homelessness. 13% believe case management is helpful. Consistent with this need, as noted above, 19% have received this form of assistance. There is more demand for cash and financial benefits for deposits, rent down-payment, which appears to be more difficult to access.

What type of housing assistance would have been helpful?	Count	Percent
Case management	70	13%
Deposit to get into a new house	56	11%
Other	45	9%
First month's rent to get into a new house	44	8%
Transportation service	36	7%
Short-term rent assistance	32	6%
Back rent to prevent eviction	31	6%
Mental health services	31	6%
Long-term rent assistance	29	5%
Legal services	26	5%
Budgeting assistance/budget coaching	24	5%
Resource and referrals to reach my goals	24	5%
Landlord/tenant information	22	4%
Advocacy by caseworker	20	4%
Financial management training	20	4%
Job skills development training	19	4%

Service Provider Interviews

Staff from homeless service providers were invited to a series of community meetings to provide stakeholder input to supplement quantitative data. The principal goal was to identify strengths, gaps and barriers in service delivery.

Areas of opportunity for improvement include prevention for households at-risk of becoming homeless, quickly re-housing those are homeless, and assisting those placed in housing to maintain their housing and live productive lives.

Provider agencies that participated included:

Current System of Care to End Homelessness in Chatham County and City of Savannah

Many of the providers described opportunities to improve current Coordinated Entry System.

Not all resources are visible within the Coordinated Entry System database because not all agencies have access to the resource database. Faith based community service agencies don't have resources or technical assistance to bridge this divide. Similarly, not all agencies are fully

engaged with logging data into HMIS. Services providers agreed that the communication between CES and providers could be improved, for example, the availability of all shelter beds.

The City of Savannah is funding a new day center in where homeless persons can access computers to apply for jobs and access other resources available through the center. A new Emergency Shelter for women experiencing homelessness opened in September. The City is also supporting adoption of the USICH framework by expanding and rebranding the Continuum of Care system, including funding a full-time staff position to support the expanded CoC Board.

Strengths of the Existing System

The use of Tiny Homes in a co-housing arrangement with supportive services has been extremely successful for addressing homelessness among homeless veterans in Savannah. There is an opportunity acquire such units, now under development by the Chatham Savannah Authority for the Homeless, with HOME-ARP funds for permanent supportive housing.

The Continuum of Care system utilizes HUD's system performance data and continues to improve use of data to evaluate system performance and the most productive pathways out of homelessness. Participants agreed improved data quality and entry assessments are a priority for the Continuum of Care network. Some providers expressed a perception that intake assessments could be manipulated to prioritize worthy cases that otherwise may not be prioritized by the intake assessment tool. over the prioritization of clients for

Areas In Need of Improvement

The greatest challenge for assisting households facing homelessness is availability of permanent housing, with or without supportive services. The Continuum of Care has a Rapid Re-housing strategy in areas of the County with housing available for Rapid Rehousing, however the cost and availability of housing in Savannah is extremely limited. In many cases, available housing units are in substandard condition and not suitable for housing.

A couple of providers identified the need for improved training and education of front line and front desk staff regarding what is available to persons and where to direct them for help.

There is also a need for more prevention activities to "plug the hole" for persons becoming homeless and generally more safe places to get people off the streets.

Actions to Improve the System

Improved participation of all agencies serving persons at risk or experiencing homelessness

Resources to help the faith-based community improve their use of HMIS

More support for affordable housing developments, including housing options appropriate for veterans.

Concentrate efforts across organizations and systems to increase the availability of affordable rental housing stock, including the use of agencies using a master lease agreement with landlords to act as sponsors of formerly homeless households until such time that the household can take possession of the lease.

HOME-ARP ELIGIBLE POPULATIONS

Homeless as defined in 24 CFR 91.5

The 2021 homeless Point In Time (PIT) count documented 548 homeless -- 321 sheltered persons and 227 unsheltered persons. 32 Chronically homeless persons are currently in emergency shelter. This is lower than expected based on the historic trend. However, the pandemic created barriers to locating homes persons, while others may have found alternative, non-congregate shelter options available through state and local programs.

Due to COVID-19, the 2021 PIT count only captured the aggregate total for unsheltered homeless – 227 persons, without identifying the number of chronically homeless and other characteristics of the unsheltered homeless population in 2021 PIT.

The Continuum of Care engaged with 1,038 unsheltered homeless persons through street outreach in 2021. Emergency shelter was provided to 1,247 persons (unduplicated) during 2021. The number of homeless students in the Savannah Chatham Public School System has increased by 25% over the past five years to 1,046 students.

Among the sheltered homeless documented in the 2021 Point In Time count, 102 people were counted in 28 family households (with at least one adult and one child) that were housed in emergency and temporary shelter. Four of these family households are chronically homeless, one more than in 2020. The total number of chronically homeless in shelters dropped from 74 in 2020 to 32 in 2021. 749 persons experienced first-time homelessness during 2021.

Most homeless individuals documented in the PIT count have special needs.

The 28 sheltered family households include: 55 children under the age of 18. There were also three households with only children under 18 years of age and one household with parenting youth, age 18-24, and two children.

The 2021 count identified three clusters of special needs populations among the sheltered homeless populations – Severely mentally ill (48 persons), Chronic substance Abuse (57 persons), and Victims of Domestic Violence (27 persons). Smaller special needs populations included in the 2021 count of sheltered homes were Veterans (6 persons), and unaccompanied youth (11 persons)

At Risk of Homelessness as defined in 24 CFR 91.5

An at-risk population can be defined as one that is housed but in need of assistance to remain housed. Housing characteristics linked to increased risk of homelessness among extremely low-income households (ELI \leq 30% AMI) is severe housing cost burden, when 50% or more of household income goes to housing costs, and overcrowding, when occupancy is more than 1.51 persons per room.

The 2013-2017 ACS/CHAS data estimates 6,760 ELI households in the City of Savannah are severely cost burdened and overcrowded, and at risk for becoming homeless. Of this total, 5,405 live in rental property, 1,355 are in owner-occupied homes.

Other households at risk of homelessness need not be low income. Any household is at risk when the loss of housing is imminent, no appropriate subsequent housing has been identified, and the household has no financial resources or support networks to assist with maintaining current housing or obtaining other housing. A person or household that experiences a sudden, unexpected, and significant loss in income, is within 14 days of eviction, or is living in housing that has been condemned by housing officials, is also deemed to be at-risk.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice

Chatham County, which includes the City of Savannah, has 2,750 violence incidents per 100,000 population. With Savannah's current population of 134,959 at this rate predicts 3,710 incidents of family violence per year.

In Savannah, SAFE Shelter is a private non-profit organization and United Way Agency that provides shelter and supportive services to all victims of domestic violence at no cost. If the agency's 48-bed facility is at capacity, SAFE Shelter will temporarily house families in a nearby hotel. In 2020, SAFE Shelter assisted more than 1,300 victims, including about 500 children.

For children, the impact of exposure to intimate partner violence is long-lasting and significant. From 2013 to 2017, children were present in 34% of family violence incidents in Judicial District One within the State of Georgia, including Chatham County. Children were victims in 19% of reported family violence during this period.

Dating Violence: According to the Centers for Disease Control and Prevention's Youth Risk Behavior Surveillance System and the National Intimate Partner and Sexual Violence Survey, nearly 1 in 11 female and approximately 1 in 14 male high school students report having experienced physical dating violence in the last year.

This data should be considered an undercount of the true number of incidents. Due to the intimate nature of family violence, cultural practices and social stigma, family violence is often not reported.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability, as defined by HUD in the Notice

HUD defines these populations as individuals and households who do not qualify under any of the populations above but meet one of the following criteria:

- (1) Other Families Requiring Services or Housing Assistance to Prevent Homelessness is defined as households who have previously been qualified as "homeless" as defined in 24 CFR 91.5, are **currently housed due to temporary or emergency assistance**, including financial assistance, services, temporary rental assistance or some type of

other assistance to allow the household to be housed, **and who need additional housing assistance or supportive services to avoid a return to homelessness.**

(2) At Greatest Risk of Housing Instability is defined as household who meets either paragraph (i) or (ii) below:

(i) has annual income that is less than or equal to 30% of the area median income, as determined by HUD and is experiencing severe cost burden (i.e., is paying more than 50% of monthly household income toward housing costs);

(ii) has annual income that is less than or equal to 50% of the area median income, as determined by HUD, AND meets one of the “At risk of homelessness” definition established at 24 CFR 91.5

(1) Specifically includes currently housed, but at risk because of special needs. Eligibility under this provision may enable targeted cohorts within the special needs population in Savannah – forty-eight (48) with severe mental illness, forty-seven (47) with chronic substance abuse, and twenty-seven (27) victims of domestic violence. This track for prioritization is necessary balance to Coordinated Entry, which will otherwise prioritize thirty-two (32) chronic homeless persons. This notwithstanding, without the use of preferences, services must be provided on a first come first serve basis using project specific waiting lists. Any priority must not violate fair housing law.

(2)(i) The Estimated Population of 2(i) $\leq 30\%$ AMI and Severe Cost Burden is 4,925 people in renter households and 1,230 people living owner households

(2)(ii) There are 18,160 households with annual incomes at, or below 50% of the area median income (AMI). Based on the VAD housing survey, approximately 30%, or 5,480 are likely at risk under this definition.

Veterans and Families that include a Veteran Family Member that meet the criteria for one of the qualifying populations described above are eligible to receive HOME-ARP assistance. The 2021 CoC system performance measurements indicate 240 veterans experience homeless in Chatham County each year and eleven (11) veterans become homeless.

AVAILABLE RESOURCES

The Chatham Savannah Continuum of Care currently has 57 programs available to eligible populations in the chart below. Eleven emergency Shelter programs, four ESG-CV programs, eleven transitional housing programs, two TBRA programs, seven supportive services only programs, nine permanent supportive housing programs, two homeless prevention programs, and six other programs offering supportive services or other assistance, such as employment and early childhood education.

	Program Name	Service
1	Savannah CoC CE Basic Project	Coordinated Entry
2	United Ministries Emmaus House Soup Kitchen (ES-507)	Emergency Shelter
3	Safe Shelter - HIC	Emergency Shelter
4	Salvation Army Emergency Shelter (ES-507)	Emergency Shelter
5	Family Promise Savannah IHN (ES-507)	Emergency Shelter
6	Inner City Night Shelter Safe Haven DCA (ESG-ES-507)	Emergency Shelter
7	Union Mission Grace House DCA (ESG-ES-507)	Emergency Shelter
8	Inner City Night Shelter Sojourner DCA (ESG-ES-507)	Emergency Shelter
9	Union Mission Magdalene Project (ES-507)	Emergency Shelter
10	Park Place OR Basic Center (ES-507)	Emergency Shelter
11	Inner City Night Shelter Save Haven 2 (ES-507)	Emergency Shelter
12	CSAH PATH Hotel/Motel (ES-507)	Emergency Shelter
13	Salvation Army Savannah ES (Savannah-ESG-CV)	Emergency Shelter-CV
14	Inner City Night Shelter ES (Savannah ESG-CV)	Emergency Shelter-CV
15	Park Place ES Males (ESG-CV-507)	Emergency Shelter-CV
16	Park Place RRH DCA (ESG-CV-501)	Emergency Shelter-CV
17	Union Mission Phoenix House DCA (HOPWA-FBH-507)	FBH
18	Family Promise Savannah Homeless Prev (HP-507)	Homeless Prevention
19	Park Place OR - Basic Center (PREV-507)	Homeless Prevention
20	Wesley CC Savannah Family Advocacy Crisis Intervention	Other
21	Salvation Army Savannah Project Share (Other-507)	Other
22	Salvation Army Material Assist External (Other-507)	Other
23	George Leile Visions, Inc. - ESG Service Project	Other
24	Build A Bridge	Other
25	Wesley Savannah Lady Bamford ECE (Other-507)	Other
26	HAS Shelter + Care (CoC-PSH-507)	Perm. Supportive Hsg
27	Chatham Savannah Auth City 54 S+C PSH (CoC-507)	Perm. Supportive Hsg
28	Union Mission Dutchtown/SRO Apts. (GA 507 PSH)	Perm. Supportive Hsg
29	Cove at Dundee Village 2 PSH (CoC-507)	Perm. Supportive Hsg
30	Union Mission Eagles Landing SHP (PSH-507)	Perm. Supportive Hsg
31	Cove at Dundee PSH (CoC-507)	Perm. Supportive Hsg
32	Union Mission Daniel Flagg Villas (PSH-507)	Perm. Supportive Hsg
33	Union Mission Perm Housing DCA (HOPWA-PHP-501)	Perm. Supportive Hsg
34	EOA - Austin House (PSH-507)	Perm. Supportive Hsg
35	Chatham Savannah Auth Homeless UCM Out (SO-507)	Street Outreach
36	Chatham Savannah Auth Homeless PATH (HHS-SO-507)	Street Outreach

37	Park Place OR Street Outreach	Street Outreach
38	Legal Representation Project (SSO-507)	Supportive Svcs Only
39	Chatham Savannah Authority PATH Peer Special (SSO-507)	Supportive Svcs Only
40	Union Mission Supportive Services Only (HPA-SSO-507)	Supportive Svcs Only
41	CSAH Project 10 (Sso-507)	Supportive Svcs Only
42	Union Mission STMRUA (HPA-SSO-507)	Supportive Svcs Only
43	Union Mission - Culinary Art (SSO-507)	Supportive Svcs Only
44	Union Mission Supp Services DCA (HOPWA-SSO-501)	Supportive Svcs Only
45	Union Mission Tip 1 Chatham DCA (HOPWA-TBRA-507)	TBRA
46	Union Mission TIP 2 - Glynn DCA (HOPWA-TBRA-501)	TBRA
47	Salvation Army Savannah CSRC (TH-507)	Transitional Housing
48	Union Mission Beyond Grace (TH-507)	Transitional Housing
49	Salvation Army Savannah Transitional (TH-507)	Transitional Housing
50	Family Promise Sav IHN Transitional Hsg (TH-507)	Transitional Housing
51	Inner City Night Shelter Prison Reentry Men (TH-507)	Transitional Housing
52	Union Mission Prison Re-entry Program (TH-507)	Transitional Housing
53	Salvation Army Savannah Re-Entry (TH-507)	Transitional Housing
54	Inner City Night Shelter ABIDE (TH-507)	Transitional Housing
55	Park Place Outreach TLP (TH-507)	Transitional Housing
56	Inner City Night Shelter Residential TH (TH-507)	Transitional Housing
57	Union Mission Parker's Place Women TH	Transitional Housing

UNMET HOUSING AND SERVICES NEEDS OF QUALIFYING POPULATIONS

Homeless as defined in 24 CFR 91.5

The most significant unmet housing need for homeless persons in Savannah is the availability of permanent housing. Best practice for ending chronic homelessness is rehousing in permanent housing, with supportive services if needed. However, the high cost of housing is a barrier to expanding the Continuum of Care's Rapid Rehousing strategy for exiting homelessness

In contrast, shelter capacity has increased due to declining homeless trend and new transitional housing for single women. Service providers also highlighted the need for respite care for the elderly and homeless released from hospital. CoC agencies should consider repurposing excess emergency shelter or non-congregate shelter for respite care.

The unmet services need among the homeless, especially for chronically homeless households are the supportive services necessary to support stable tenure. The largest cohorts are those with severe mental illness and behavioral health (includes addictions).

Chatham Savannah Authority for the Homeless Unmet Housing Needs Assessment 2022

USICH/CoC permanent supportive, transitional housing and shelter needs based on current data.

Summary of Housing Needs

1. Housing for families = 80 (could house 320-350 people)
2. Housing for single adults = 75-100 (could potentially house (based on configuration) 150 people)
3. Emergency Shelter with Transitional or temporary housing access= 50-100

Detailed by Housing Need of Eligible Populations

50 Dwelling Units for Families with Children (without qualifying disabilities)

- 2 and 3 bedroom and/or Cottage Court – transitional and/or permanent supportive housing depending on agency program
- If in a Cohousing community setting- a community building for access to group meetings for budget counseling, mobile healthcare, supportive services, workforce development, parenting classes, perhaps childcare and a playground/outdoor area.
- Maximum rents not to exceed \$750 for three bedrooms with opportunities to offer rental assistance for the first 90 days (for those without income upon entry to program- gives time to stabilize for those experiencing homelessness).
- Opportunities to house homeless households with \$0 income and no qualifying disabilities at intake is vital to success. A mixture of housing opportunities is needed.
- Eligibility requirements often create barriers. Mixed funding where some units have eligibility requirements, and some do not, is vital.

30 Dwelling Units for Families with Children (with qualifying disability and some income)

- 2 and 3 bedrooms

50 Dwelling Units for single adults (males and females)

Permanent supportive and/or transitional housing

- SRO, Studio or shared dwelling unit for no more than two people
- New units coming online from Union Mission (Parkers House for Women) is a 90-day program.
- Units could be for Prison re-entry individuals must ensure the 1000-ft standard for schools, playgrounds, and churches.
- Consider 50% for prison re-entry and 50% for those without criminal backgrounds.

20 Dwelling Units of Permanent Supportive Housing for single persons with disabilities

25-50 Dwelling Units for Veteran housing opportunity

- Rents could be secured through Grant Per Diem stipends, or HUD VASH
- Cove at Dundee when complete will house 45 veterans and already included in HMIS data
- 433 people identified as Veterans.

Emergency Crisis shelter (wet shelter access): 50 -100 beds (with potential to transition to a support program in CoC)

Projected Impact: 50% Reduction in overall homeless population county-wide

Source: Chatham Savannah Authority for the Homeless 2022

At Risk of Homelessness as defined in 24 CFR 91.5

Extremely low income households with extreme cost burden and overcrowding are at high risk for homelessness because they face considerable difficulty of finding safe, decent, accessible and affordable rental housing. The lack of affordable rentals is most acute for the extremely low-income households, for persons with disabilities and special needs. Citizens re-entering the community after incarceration are challenged to find housing and at high risk for becoming homeless. A significant percentage of the re-entry population need behavior health or mental health services.

Critical service needs identified for these populations are tenant rights education, landlord-tenant mediation and anti-eviction legal assistance, and home modifications for persons with disabilities. Senior residents of owner-occupied homes are particularly vulnerable to housing code violations and critical home repairs, as they are often unable to keep up with home maintenance.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice

The most urgent need for those fleeing victimization by intimate partners, sexual assault, and human trafficking is rapid rehousing (RRH). CoC partner Union Mission opened new transitional housing for single women in September 2022, filling a significant gap for single women in this population. This Transitional Housing provides a secure location for up to 90 days. About one third of domestic violence occurs in family households and families in need of permanent housing need of a Rapid Rehousing solution. Service needs identified included assistance for homeless women with children, especially domestic violence, and services for children (homelessness prevention, family outreach and intervention).

Service needs are specialized for this group. For example, CoC partner S.A.F.E. Shelter services include: 24-hour emergency shelter, 24-hour crisis line, children's program, referral & advocacy services, three daily meals, clothing and personal care needs. Outreach services provided include Assistance with Temporary Protective Orders, Courtroom advocacy, Legal Assistance referrals, and Follow-up services for qualified clients leaving shelter services, including, home visits that are supportive to housing stability. In 2019, more than 1,300 victims, including about 500 children, received services from S.A.F.E. Shelter.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability as defined by HUD in the Notice

Nearly half of homeless persons have one or more special needs related to mental illness, addictive behavior, or domestic abuse. Delivering supportive services and housing assistance before they become homelessness can reduce the number falling into homelessness. Similarly, supportive services to the re-entry population is known to be effective.

GAPS IN SHELTER AND HOUSING INVENTORY

Shelter and Housing Inventory: The most notable gap is implementation of the CoC's rapid rehousing pathway out of homelessness. A rapid rehousing strategy relies on adequate availability of housing options. Significant barriers to implementation are cost and availability of rental housing. The poor condition of aging rental housing often disqualifies otherwise affordable units that are available in the market because they do not meet housing quality requirements for HUD assistance.

Moreover, an effective rehousing strategy requires an ongoing landlord outreach program to identify a range of available units to meet the needs of different household circumstances. The 2021 Housing Savannah Action Plan recognized that the existing Housing Choice Voucher (HCV, formerly known as "Section 8") programs face landlord resistance to HCV programs, A

stigma around homeless and special needs households further disincentive landlord participation. A proven solution to this barrier is an outreach team dedicated to identifying rental housing available for occupancy to increase housing options for every qualified population. A partnership with similar programs by the Veterans Administration and the Housing Authority of Savannah's landlord outreach is both effective and efficient.

Expanding affordable rental options for Rapid Rehousing may be further assisted by a non-profit agency acting as sponsor to take out the initial lease until the household is stable and lease subsequently transferred to the assisted householder. One CoC agency, Family Promise of Savannah, has successfully implanted such a strategy to permanently place formerly homeless households in stable housing.

Another strategy to increase the supply of quality permanent and supportive housing is to acquire more permanently affordable housing with HOME-ARP funds.

A series of consultations with CoC service providers consistently highlights the benefits of an effective homeless prevention strategy. Keeping households at risk of homelessness from becoming so is clearly one of the most cost effective and beneficial interventions a Continuum of Care can provide. For example, reducing evictions is very effective when cash assistance can instantly end an eviction case while supportive services and case management can stabilize at-risk households in place.

Community re-entry from institutional settings – prison or hospital -- requires attentive support to ensure successful transition. The Georgia Department of Behavioral Health (DBHDD) has experience transitioning institutionalized populations into supportive housing. The agency's policy on supportive housing is a useful framework for supportive housing:

Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) policy on Housing needs and supportive services for people living with developmental disabilities, mental illness, addictive diseases, and HIV/AIDS states access to safe, decent, and affordable housing is a key element to recovery, independence and community integration:

1.) Housing is essential to recovery and independence. Essential elements of recovery include self-direction and empowerment, emphasizing strengths and hopes. Recovery and independence are holistic concepts that address all aspects of life. Access to safe, secure, and affordable housing facilitates access to supports, services and interaction with the broader community.

2.) Informed choice must anchor the selection of any housing option. Informed choice means that full information is provided to allow an individual and/or family members to make an educated and individualized decision about housing options that are the most likely to foster a successful life in the community.

3.) *Access to a full continuum of housing options is fundamental to informed choice. Informed choice is maximized when a full continuum of options is available to every person seeking housing. Informed choice requires information about settings; facilitation of visitation to a variety of potential settings; and opportunities to meet with persons in the community. Additionally, informed choice includes the ability to move within the housing continuum.*

4.) *Successful living arrangements are integrated in local communities. Integration in the community begins with the preferences and choices of each individual and extends to the availability of social, educational, recreational and work opportunities. Integration emphasizes the ability to interact with disabled and non-disabled persons in activities such as shopping, worship, recreation, social and community events and cultural enjoyment.*

PRIORITY NEEDS OF QUALIFYING POPULATIONS

Each Qualifying Population has specific needs for supportive services. Likewise, the funding sources are specific and may require legislative action, including expansion of Medicaid under the Affordable Care Act.

Of the 473,000 Georgians that Medicaid expansion could cover, about 240,000 make too little to get financial help to buy health insurance on the Marketplace and don't currently qualify for Medicaid. Georgians in the coverage gap earn less than the federal poverty line, about \$16,500 for a family of two or \$20,800 for a family of three.

Closing the coverage gap can significantly strengthen behavioral health treatment and services in Georgia. About 25 percent of uninsured Georgians who would qualify for Medicaid expansion coverage suffer from mental illness or substance abuse. States that closed their coverage gap expanded treatment services to more people with mental illness or substance use disorders.

METHODOLOGY

The determination of needs and gaps in the CoC system is based on best practice for ending chronic homelessness, research on special needs of sub-populations for Domestic Violence, Behavioral Health, Mental Illness and Prison Reentry, analysis of CoC HMIS data, including Point in Time, Housing Inventory Count, CoC system performance measures, and consultation with CoC agencies and the public. In addition, the analysis uses American Communities Survey Data (ACS) with Comprehensive Housing Affordability (CHAS) data to identify and estimate households at risk of homelessness. This data has been populated into the Needs Assessment and Gap Analysis tool. Additionally, the jurisdiction has participated in the House America Initiative and developed goals for Re-Housing and New Housing that are consistent with related calculations. the HOME-ARP funding is a rare opportunity to quickly add permanently affordable supportive housing to enable households to rapidly re-house from homelessness within the next 36 months.

HOME-ARP Activities

The City of Savannah Department of Human Services procures public services through competitive request for proposals (RFP) for programs and services whereby agencies propose solutions at fixed price contract. City policy for M/WBE contractors apply.

The PJ will not administer any programs or services funded with HOME-ARP.

Use of HOME-ARP Funding

	Funding Amount	Percent of the Grant	Statutory Limit
Supportive Services	0%		
Acquisition and Development of Non-Congregate Shelters			
Tenant Based Rental Assistance (TBRA)	0%		
Development of Affordable Rental Housing	100%		
Non-Profit Operating			5%
Non-Profit Capacity Building			5%
Administration and Planning			15%
Total HOME-ARP Allocation	100%		

The PJ proposes to distribute funds to non-profit agencies serving Qualified Populations through the Continuum of Care to acquire, own, operate, and manage permanent housing for which supportive services will be available. The housing and supportive services will target the needs of Qualified Populations in accordance with HOME-ARP funding. Acquisition of permanent housing to expand the pathway out of homelessness is a unique opportunity of HOME-ARP and the PJ expects to allocate most, if not all, of its HOME-ARP grant to this activity. Through a competitive RFP, the PJ will fund a minimum of two permanent housing projects to ensure housing options are available and accessible to all Qualified Populations. To facilitate the development of such housing, and to reduce the cost of its development, the PJ expects that this housing will be developed on property owned by the PJ—removing the need for and cost of acquiring property.

RATIONALE FOR PROPOSED ACTIVITIES

The primary gap identified in the needs assessment and gaps analysis is the need for permanent housing and supportive services. This is evidenced by the high utilization rate of existing Permanent Supportive Housing inventory from the 2021 HIC/PIT survey. Additionally, three large sub-populations of special needs cohorts within the sheltered homeless population highlight the needs to be addressed by this allocation plan.

HOME-ARP Housing Goals

Based on current market conditions and housing cost estimates, the PJ estimates it could fund acquisition of 32 units of recently constructed housing by non-profit agencies serving the Jurisdiction's homeless population. These units will be different housing types and locations to address the specific needs of Qualified Populations in need of permanent housing and supportive services. To facilitate the development of such housing, and to reduce the cost of its development, the PJ expects that this housing will be developed on property owned by the PJ—removing the need for and cost of acquiring property.

The rental housing production goal has been developed to address re-housing needs of currently sheltered homeless in the jurisdiction's population served by the Continuum of Care, and to current unmet need for permanent and supportive housing among sheltered homeless to facilitate exiting temporary shelter for permanent housing with available supportive services.

Preferences, Referrals, and Limitations

Preferences

The PJ and HOME-ARP grantees will NOT give preference to any HOME-ARP Qualifying Population or sub-populations. Any use of the Continuum of Care Coordinated Entry System also will not preference any Qualified Population or sub-populations, including no preference to be given for chronically homeless and/or length of time homeless. PJ and HOME-ARP grantees will ensure compliance with Section IV.C.2 of the Notice.

Referrals

All HOME-ARP grantees will be required to use the Continuum of Care Coordinated Entry system for referrals and all qualified populations will be included in the CE process.

Limitations

No HOME-ARP qualified population or sub-population will be limited or in access to HOME-ARP rental housing. HOME-ARP Qualified persons and/or households will be served on a first-come basis. To the extent demand exceeds supply of HOME-ARP units, project-specific wait lists will be utilized.