

## OFFICE OF HOMELESSNESS PREVENTION

DIVISION OF HOUSING & COMMUNITY RESOURCES

ANNUAL REPORT-2022





State of New Jersey Department of Community Affairs 101 South Broad Street PO Box 806 Trenton, NJ 08625-0806

JACQUELYN A. SUÁREZ Acting Commissioner

November 13, 2023

#### ANNUAL REPORT OF OFFICE OF HOMELESSNESS PREVENTION FOR THE YEAR OF 2022 TRANSMITTED TO THE SECOND ANNUAL SESSION OF THE TWO HUNDRED TWENTIETH LEGISLATURE

Mr. President, Mr. Speaker, and Members of the Legislature:

In accordance with the provisions of P.L. 2019 C.73 (C.52:27D-287.5), I hereby present the annual report for the Office of Homelessness Prevention for the calendar year of 2022.

This document provides a summary of the prevalence and incidence of both homelessness and persons at risk-of homelessness in the State of New Jersey and the factors that contribute to those situations.

I look forward to continuing to work with you as we address housing insecurity and the complexities of poverty and economic development in our State.

Respectfully submitted,

Jacquelegn a. Suary

Jacquelyn Suárez Acting Commissioner Department of Community Affairs



PHILIP D. MURPHY Governor

TAHESHA L. WAY Lieutenant Governor

## Table of Contents

04 Foreward

**14** Introduction

**38** Demographics & trends

**110** NJ Counts: a 7 year look

122 Conclusions **05** Acknowledgements

**22** Definitions & Measurement of homelessness

**92** Causes of homelessness

**114** Benchmarking performance

### Foreward

As the Office of Homelessness Prevention (OHP) embarks on a new year, it is essential to reflect on the progress made and the challenges that persist in addressing homelessness in New Jersey in 2022.

This report provides a comprehensive analysis of the current state of homelessness in our communities, delving into the complex and interrelated factors that contribute to housing insecurity and both episodic and persistent homelessness. By examining data from various sources, this report offers crucial insights into the demographics, regional variations, and systemic inequalities that underlie the issue of homelessness in our state.

Before delving further, it is important to recognize the tremendous efforts and dedication of the service providers, government employees, volunteers, and advocates who work tirelessly to support and empower individuals and families experiencing homelessness to exit that situation. Your unwavering commitment has positively impacted countless lives in the past year, and we must interpret the data in this report as a signal of the tremendous work you have done and continue to do. It is my hope that the findings herein should serve as a catalyst for continued improvement, collaboration, and innovation in addressing housing insecurity in our communities to make homelessness in New Jersey rare, brief in duration, and non-reoccurring.

Most importantly, I also acknowledge the tremendous resilience and strength demonstrated by individuals and families at risk of or currently experiencing homelessness. Despite facing significant challenges, you continue to persevere and strive for a better future. The State of New Jersey remains unwavering in its commitment to ending homelessness and supporting all its residents in finding safe, affordable housing and thriving communities to call home.

As we move forward, let this report serve as both a testament to the progress made and a call to action for continued collaboration, innovation, and determination in our collective efforts to combat homelessness. By working together, we can create lasting change and ensure that every New Jersey resident has access to the stable, secure housing they deserve.

Respectfully yours,

Dr. Michael Callahan, MSW, LCSW Director Office of Homelessness Prevention

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#### New Jersey Housing and Mortgage Finance Agency

Office of the Executive Director Melanie Walter, Esq., Executive Director

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Catherine Brewster, Director Cinthia Gonzalez, HMIS Project Manager Jaclyn Robinson, HMIS Technical Assistant/Trainer Kayla Phillips, HMIS Technical Assistant/Trainer Vanessa Gerena, HMIS Help Desk/Data Quality Specialist

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#### Division of Family and Community Partnerships

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#### Office of Housing

KerryAnne Henry, Assistant Director

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#### Monarch Housing Associates

Taiisa Kelly, CEO Nadine Azari Ending Homelessness Team

#### Continuums-of-Care (CoCs)

NJ-500 - Atlantic City & County CoC NJ-501 - Bergen County CoC NJ-502 - Burlington County CoC NJ-503 - Camden City/Camden Cumberland Gloucester Cape May Counties CoC NJ-504 - Newark/Essex County CoC NJ-506 - Jersey City/Bayonne/Hudson County CoC NJ-507 - New Brunswick/Middlesex County CoC NJ-508 - Monmouth County CoC NJ-509 - Morris County CoC NJ-510 - Lakewood Township/Ocean County CoC NJ-511 - Paterson/Passaic County CoC NJ-512 - Salem County CoC NJ-513 - Somerset County CoC NJ-514 - Trenton/Mercer County CoC NJ-515 - Elizabeth/Union County CoC NJ-516 - Warren Sussex Hunterdon Counties CoC

#### **Community Partners**

Affordable Housing Alliance - Monmouth AIDS Resource Foundation for Children Alternatives - Somerset Anchor House Anderson House - Hunterdon Arm In Arm Inc. Atlantic City Rescue Mission - Atlantic Atlantic County DFCD AtlantiCare Beacon of Hope Inc. , Burlington Belmont Homes Housing Program - Burlington BEOF Community Action Partnership - Hudson

OHP would like to especially recognize the continued partnership of the following organizations and entities:

**Better Tomorrows** Bridges Outreach, Inc **Bridgeway Inc - Sussex Bridgeway Inc - Union** Burlington County Community Action Program (BCCAP) **Burlington County Department of Human Services** Camden City - Camden Camden Coalition of Healthcare Providers **Camden County Board of Social Services** Camden County CPAC - Camden **Camden County OEO** Cape Counseling Services - Cape May Cape May County Board of Social Services Care Plus NJ **Career Opportunity Development - Atlantic** Casa PRAC Inc. Cumberland Catholic Charities - Cumberland Catholic Charities - Middlesex **Catholic Charities - Union** Catholic Charities, Mercer County Leasing Catholic Charities (DOC) Atlantic - Cape May **Catholic Charities Burlington BHS Catholic Charities Burlington ECS** Catholic Charities Diocese of Camden Catholic Charities Diocese of Metuchen Catholic Charities Diocese of Metuchen, Somerset Catholic Charities Essex **Catholic Charities Essex Services** Catholic Charities Gloucester **Catholic Charities Hudson** Catholic Charities Mercer BHS **Catholic Charities Mercer ECS** Catholic Charities Monmouth ECS Catholic Charities SSVF **Catholic Family and Community Services - Passaic Center For Family Resources - Passaic Center for Family Services** Center for Food Action - Passaic

OHP would like to especially recognize the continued partnership of the following organizations and entities:

Circle of Life - Essex City of Atlantic City City of Elizabeth City of Jersey City City of Newark **City of Trenton City of Summit** Coming Home of Middlesex County Communities of Faith for Housing **Community Access Unlimited** Community Affairs and Resource Center Inc. Monmouth Community Asset Preservation Corporation **Community Hope Comprehensive Behavioral Health Care Covenant House - Atlantic County** Covenant House - Essex County Crawford House - Somerset **Collaborative Support Programs of New Jersey CUMAC** - Passaic **Cumberland County Department of Human Services Cumberland County Guidance Center** East Orange Community Development Corp. Essex East Orange Hospital - Essex Easter Seal Society of NJ - Warren Easter Seals - Essex Easter Seals - Monmouth Elizabeth Coalition to House the Homeless **Emergency Housing & Advocacy** Ending Homelessness Group Essex County Division of Community Action **Essex Newark Legal Services Eva's Village** Fairmont Health Services Family Promise - Union Family Promise of Burlington County Family Promise of Essex County Family Promise of Hudson County Family Promise of Hunterdon County

OHP would like to especially recognize the continued partnership of the following organizations and entities:

Family Promise of Monmouth County Family Promise of Morris County Family Promise of Southwest New Jersey Family Promise of Sussex County Inc. Family Promise of Warren County **FISH Hospitality** Garden State Episcopal CDC - Hudson Garden State Home **Gloucester Division Of Social Services** Good News Home Inc - Hunterdon Greater Bergen Community Action Inc. H.E.L.P Center HABcore Haven Adolescent Community Respite Center Healthcare Commons Heart of Hannah - Passaic Helping Arms - Mercer Helping the Homeless III - Essex Hetrick Martin Institute - Essex Hispanic Multi-Purpose Ctr. - Passaic HomeFront - Mercer Homefirst Interfaith Housing and Family Services Homeless Solutions House of Faith Inc House of Hope of Ocean County Inc. Housing & Community Development Network on New Jersey Hudson County Welfare and Social Services Hudson Housing Resource Ctr. Hunterdon County Division of Social Services Hunterdon Helpline Integrity Inc. - Essex Interfaith Hospitality - Hunterdon Interfaith Neighbors Inc. - Monmouth Irvington Neighborhood Improvement Corp (INIC) - Essex Isaiah House Jersey City Medical Center - Hudson Jewish Family Service & Children, Center of Clifton-Passaic Jewish Family Services - Atlantic Jewish Family Services - Central New Jersey

OHP would like to especially recognize the continued partnership of the following organizations and entities:

Joseph's House of Camden Just Believe Inc. - Ocean La Casa de Don Pedro - Essex Legacy Treatment Services Let's Celebrate-Hudson LGBT R.A.I.N. Foundation, Essex LifeTies Market Street Mission-Monmouth Market Street Mission-Morris Mental Health Association of Essex & Morris County Mental Health Association of Monmouth County Mercer County Board of Social Services Monmouth County Department of Social Services Monmouth County Dept of Community Development Monmouth County DSS RRH EFSP & SSH Montclair Emergency Services for the Homeless Inc Montclair Neighborhood Development Corp - Essex Morris County DHS Office of Temp. Assistance Mrs Wilson's Alfre Inc New Community Corp - Essex New Destiny Family Success Center, Passaic New Jersev AIDS Services New Jersey Coalition to End Homelessness **New Jersey SHARES** New Jersey Shelter Providers Consortium **New Jersey SHARES** New Life CDC New Point Behavioral Newark Beth Israel Medical Center, Essex **Newark Community Solutions** Newark Emergency Services for Families - Essex **Newark Transitional Living - Essex** Newark YMCA Newly Destined Inc - Essex NJ-211 NJ Association on Correction NJ Community Development Corp. - Passaic NJD Veterans Affairs - Camden

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Passaic County Department of Human Services Passaic YMCA Paterson Task Force Paterson YMCA-Passaic Patriot First - Essex Peace House - Essex People First Plainfield Action Services, Union Positive Health Care Inc. - Essex Preferred Behavioral Health Group - Ocean **PROCEED Inc. - Union Project Live - Essex Project PAUL - Monmouth Reformed Church of Highland Park Real House Inc - Essex** Rescue Mission-Mercer **Richard Hall CMHC** Robins' Nest Inc **Roots and Wings - Morris** Rural Development Corp. - Cumberland Rutgers, The State University Salem County Board of Social Services Salem County IAC Salvation Army Montclair Corp. - Essex Salvation Army Newark - Essex Salvation Army Union Samaritan Inn - Sussex SCUCS Servicios Latinos - Burlington Sierra House - Essex So. Jersey Behavioral Health Resources Soldier On Somerset County Board of Social Services St. James Social Services Agency - Essex St. Joseph Regional Medical Center - PATH St. Joseph's Home - Hudson St. Paul's CDC St. Peter's Haven - Passaic

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Straight and Narrow - Passaic Strengthen Our Sisters Supportive Housing Association of New Jersey Sussex Division of Social Services The Apostle's House The Center in Asbury Park Inc. Monmouth The Gateway Family YMCA - Union The Restoration Center - Essex The Veterans Multi-Service Center The Waterfront Project Township of Bloomfield Tri-County Comm. Action Partnership Parvins Branch - Cumberland **Trinity Episcopal Church Turning Point Atlantic Turning Point Community Services Inc. - Essex UBHC Rutgers - Middlesex** Union Organization for Social Service-Camden County United Community Corporation **United Passaic Organization - Passaic** United Way of Hudson Urban League - Essex **Urban League - Union** Urban Renewal Corp Village Resources of Mercer Visions and Pathwavs VOA Atlantic County VOA Delaware Vallev VOA Greater New York Warren County Div of Temporary Assistance & Social Services WomenRising - Hudson

## 1. Introduction

### Purpose of report

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The Homelessness Prevention & Services Ecosystem: a definition

**Executive Summary**: Scope of homelessness in New Jersey

Note on data

## **1a. Purpose of this report**

#### The authority for this report is P.L.2019, C.73 C.52:27D-287.5.

This report is produced for all stakeholders throughout the State to better understand the scope of homelessness and efforts working toward its ending and prevention throughout our communities in New Jersey.

Overall, the intent of this report is to provide a comprehensive overview of New Jersey's Homelessness Prevention and Services Ecosystem (HPSE), the persons accessing that ecosystem, and to highlight the importance of continued efforts to address homelessness and housing insecurity in our State. It is written in non-technical language and is intended for both technical and general audiences.

#### How this report differs from traditional reports on homelessness?

Some readers may be familiar with the annual Point-in-Time County (also known as NJ Counts), which is an annual cross-sectional count of persons experiencing unsheltered and sheltered homelessness on a night in January. This report differs from that report in that it takes a longitudinal view of the total populations experiencing homelessness, those at-risk of homelessness, and those in permanent and other supportive housing programs in New Jersey over the course of one year (2022).

In adding these populations not traditionally counted and expanding the scope of what is reportable, it is the intent of OHP to bring both the magnitude of housing insecurity in our state and the unprecedented system response to meet that need in the past year into its proper relief.

By better understanding the challenges and opportunities for improving the HPSE using a systems-thinking approach grounded by data-driven policy and decision-making, we can work towards creating a more effective, equitable, and efficient system to support those who are experiencing homeless and at-risk of homelessness to obtain and maintain stable, permanent, and appropriate housing.

# 1b. The New Jersey Homelessness Prevention & Services Ecosystem (NJ HPSE)

This report provides an in-depth analysis of homelessness prevention and service utilization within the state, encompassing influential factors, demographic characteristics of individuals accessing services, the effectiveness of distinct service delivery systems, and OHP's strategic initiatives to enhance utilization and outcomes for those experiencing or at risk of homelessness in the forthcoming year.

We refer to the entire system in this report, including its components and participants, as the **New Jersey Homelessness Prevention and Service Ecosystem (NJ HPSE or HPSE)**. A visual representation of the NJ HPSE can be found in Figure 1, below, and a high-level flow map of the process by which most persons traverse this ecosystem can be viewed in Figure 2 on the next page.



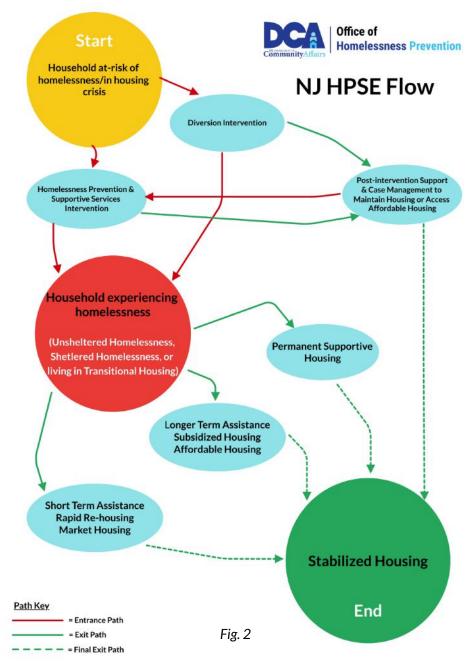
Fig. 1

Importantly, this report goes beyond traditional annual homelessness evaluations, like the Point-in-Time Count, to provide a more comprehensive understanding of homelessness in New Jersey. It includes not only individuals experiencing homelessness in 2022, but also those at risk of homelessness and those in permanent housing programs who have faced homelessness in the past.

OHP's approach aims to better understand the causes of homelessness and the ways people overcome it. By considering data from before a household becomes homeless and after they've experienced homelessness, we can promptly identify risk factors, barriers to stable housing, and develop more effective, targeted interventions. This broader analysis is essential for addressing the unique needs of each population group within the Homelessness Prevention and Support Effort (HPSE).

Our primary goal at OHP is to offer insights and recommendations based on robust data and analytics for preventing and eliminating homelessness in New Jersey. By acknowledging the diverse experiences of individuals and tailoring strategies and resources accordingly, we can work towards eradicating homelessness in our state.

## **1b. The New Jersey Homelessness Prevention & Services Ecosystem (NJ HPSE)(con't)**



As illustrated in Figure 2 and consistent with the discussion above, the journey of a household through the New Jersey Homelessness Services & Prevention Ecosystem (HPSE) often begins with a housing crisis and concludes with stable housing. However, thanks to the various interventions within the ecosystem, many households accessing the HPSE manage to avoid experiencing homelessness altogether.

A brief overview of the ecosystem's network entities is provided on the following page.

## 1b. The New Jersey Homelessness Prevention & Services Ecosystem (NJ HPSE) (con't)

- Persons experiencing homelessness or at-risk of homelessness: These are the individuals who are directly impacted by homelessness, meaning they are at-risk of homelessness, currently experiencing homelessness, or have exited homelessness to housing and require support from the other entities in the ecosystem to maintain that housing.
- Government and government agencies: These are the official organizations that create policies, allocate funds, and oversee programs to address homelessness at the local, state, and federal levels.
- Faith-based organizations: These are religious groups and entities that offer support and services, such as shelters, food, and counseling, to people experiencing homelessness.
- Businesses & employers: These are companies in New Jersey that help by offering jobs, job training, or other resources to those who are experiencing homeless or at risk of becoming homeless.
- **Community-based organizations**: These are local, non-government groups and non-profits that provide support and services to those experiencing homelessness, such as housing assistance, rental assistance, job training, emergency shelter, and case management.
- Housing entities & landlords: These are organizations and individuals that provide housing, such as public housing authorities, affordable housing developers, and private landlords. They play a crucial role in offering stable and safe housing options to people experiencing homelessness.
- Volunteers & peer supports: These are individuals who donate their time and skills to support the work of organizations addressing homelessness. Peer supports are people with lived experience of homelessness who offer guidance and encouragement to others going through similar situations.
- Advocacy groups: These are organizations that work to raise awareness about homelessness, influence policy, and protect the rights of people experiencing homelessness.
- Healthcare providers: These are doctors, nurses, mental health professionals, and other healthcare workers and entities who offer medical and mental health care to people experiencing homelessness.

Conceptualizing this system as an ecosystem is important because it recognizes that homelessness is a complex issue in New Jersey that requires a collaborative and holistic approach to work toward its functional end.

By understanding the roles and relationships of different entities and visualizing those data, we can develop more effective solutions and better allocate resources to address and prevent homelessness in New Jersey. As OHP expands its data sourcing to all elements in the ecosystem in future reporting, we hope to bring even more robust information to the public on homelessness and housing insecurity in the state.

## **1c. Executive Summary: Scope and significance of homelessness in New Jersey in 2022**

Below is a comprehensive overview of the HPSE in the State of New Jersey in 2022. It highlights the significant efforts made in the past year to provide assistance to individuals at-risk of homelessness, as well as those already experiencing homelessness. The data encompasses a wide range of services, including eviction diversion initiatives, homelessness prevention programs, street outreach programs, homelessness hotlines, emergency shelters, CODE BLUE programs, and permanent housing support providers. Furthermore, it examines the year-over-year changes in unsheltered and sheltered homelessness, permanent housing programs, and transitional housing. With detailed statistics on the number of distinct persons served, the data below provides valuable insights into the progress made in addressing homelessness in New Jersey and the effectiveness of various programs in helping vulnerable populations in 2022.

#### Prevention & Support Services for Persons At-Risk of Homelessness In 2022 in the State of New Jersey:

- 92,778 distinct persons received services in the Homelessness Prevention and Supportive Services Ecosystem (HPSE) to prevent an episode or experience of homelessness, a 27% increase from 2021 (72,785).
- 57,302 (62% of total # of distinct persons in this category) were newly admitted into the HPSE in 2022 for prevention and support services.

#### Examples of services these persons accessed:

- DCA's Eviction Diversion Initiative for persons facing eviction.
- DCA's Homelessness Prevention Program
- NJ 211 to be referred to housing support providers.

Importantly, the number of programs servicing this population increased by 11% (428 in 2022, up from 387 in 2021), with a total increase of 33% (105 additional programs) since 2019.

#### **Unsheltered Homelessness**

- 11,265 distinct persons experienced at least one day of unsheltered homelessness in 2022, a 20% increase from 2021 (9,358).
- 4,120 distinct persons (37%) of all persons experiencing unsheltered homelessness in 2022 reported being stably housed in 2021.

#### Examples of services persons experiencing unsheltered homelessness accessed:

- Department of Human Services' Programs for Assistance in the Transition from Homelessness (PATH) Outreach
- City of Newark's Homeless Outreach Team (HOT) Street Team

#### NJ HPSE: Homelessness & Risk of Homelessness in New Jersey (2021 & 2022)

# of distinct persons by year accessing prevention & other services in New Jersey in 2021 & 2022.

Population Type	2021	2022	YoY Change?
Persons Experiencing Sheltered Homelessness	14,146	16,566	17%
Persons Enrolled in Permanent Housing Programs	11,130	12,062	8%
Persons Accessing Prevention of Homelessness & Support Services Programs	72,785	92,778	27%
Persons Accessing Transitional Housing Programs	2,614	2,659	2%
Persons Experiencing Unsheltered Homelessness	9,358	11,265	20%
able: OHP/DCA + Source: NJ HMIS & DCA OHP	Table 1		

# **1c. Executive Summary: Scope and significance of homelessness in New Jersey in 2022 (con't)**

#### Sheltered Homelessness in Emergency Shelters

- 16,566 distinct persons experienced sheltered homelessness in emergency shelters in 2022, a 17% increase from 2021 (14,146).
- 1,361 distinct persons (8%) accessed emergency shelters in 2022 directly due to engagement with outreach service providers for persons experiencing unsheltered homelessness.
- 49% of persons (8,095 distinct persons) accessing emergency shelters had also accessed a homelessness prevention or supportive services program in 2022.
- 10% of persons admitted into emergency shelter in 2022 (1,652 persons) met the HUD criteria for Chronic Homelessness at the time of admission.

#### Examples of services these persons accessed:

- DHS's CODE BLUE Emergency Warming Center programs.
- DCA's Another Chance program for returning citizens leaving incarceration.
- City of Trenton's Emergency COVID Shelter program.

#### **Permanent Housing Programs**

- 12,062 distinct persons were placed or remained successfully housed in permanent housing programs in 2022, an 8% increase from 2021 (11,130).
- 11% of persons in permanent housing programs in 2022 (1,373 distinct persons) had previously accessed the emergency shelter system also in 2022.

#### Examples of services and programs these persons accessed:

- DCA's Shelter Plus Care programs.
- DMHAS Subsidized Housing programs.
- Continuum-of-Care permanent housing programs and projects.

#### **Transitional Housing**

- 2,659 distinct persons were temporarily housed in transitional housing programs in 2022, a 2% increase from 2021 (2,614).
- 20% of persons utilizing a transitional housing program (539 distinct persons) in 2022 had also accessed the emergency shelter system in 2022 prior to enrollment.

#### Examples of services these persons accessed:

- Transitional Housing programs for persons in recovery.
- Hope for Veterans transitional program @ VA Hospital Lyons Campus.
- DMAVA Veterans Haven programs.



## 1d. A note on data

The majority of datasets utilized in this report were obtained on January 3rd, 2023, in order to comply with the local deadline for generating this report.

Due to the nature of New Jersey Homeless Management Information System (NJ HMIS) data entry, where some member organizations tend to upload data in bulk on a bi-weekly or monthly basis, the metrics in this report might display a slight variation (typically an increase) compared to the same All System Report covering all of 2022 if it were generated today.

Although this discrepancy is minimal (less than 1% in most instances), it is crucial to recognize the importance of prompt and precise data submissions to NJ HMIS in shaping our comprehension of the present state of homelessness and the efficacy of intervention measures in New Jersey.

Similarly, we would like to clarify that while we are reporting on distinct persons accessing the entire ecosystem, in many cases, a person that accessed one facet of the HPSE (e.g., Emergency Shelter), often accessed other components of the ecosystem in their journey to stabilized housing.

As the OHP and NJ HMIS' collaborative efforts to tackle this urgent issue continue, we urge all stakeholders in the HPSE to comply with established deadlines for data submission. Doing so will help guarantee that our assessments and recommendations rely on the most exhaustive and current information accessible. By upholding a stringent and punctual approach to data collection and reporting, we can strengthen our joint ability to devise focused, evidence-based strategies to address homelessness and enhance the lives of those impacted by housing insecurity in our communities.

2. Definitions & Measurement Of Homelessness In New Jersey Definitions of homelessness

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Sources of data

Methods of data collection

Limitations of data collection

OHP ANNUAL REPORT - 2022

## 2a. What is homelessness?

Broadly defined, homelessness is a state of having no stable or regular place of residence. As we will explore in this report, homelessness in New Jersey can take many forms and can affect people of all ages, genders, and backgrounds.

This report uses standard HUD definitions of homelessness and both the HUD and OHP definitions for at-risk of homelessness (see next pages) for the purposes of analysis.

Importantly, conceptualizing the New Jersey Homelessness Prevention and Services Ecosystem (NJ HPSE) with the broadest categories possible for both risk of homelessness and homelessness is crucial for several reasons:

- Comprehensive understanding: Utilizing broader categories allows for a more complete picture of the various factors that contribute to homelessness and the risk of homelessness in our state. This comprehensive understanding is essential for effectively targeting prevention and intervention efforts.
- Inclusivity: A broader conceptualization of risk and homelessness categories ensures that no group or individual is overlooked or excluded from the analysis. It acknowledges the diverse needs and circumstances of those at risk of or experiencing homelessness, which can lead to more targeted and effective support.
- Identifying trends and patterns: Broad categories help reveal overarching trends and patterns in the risk factors and causes of homelessness. This can inform policymakers and service providers on where to focus their efforts and resources to prevent and address homelessness in New Jersey most effectively.
- Flexibility in program design: By considering a wide range of risk factors and homelessness categories, policymakers and service providers can design more flexible and adaptable programs. This allows for the development of tailored solutions that address the unique needs of various populations and communities across the state.
- Enhancing collaboration: A comprehensive understanding of the issue facilitates collaboration among different stakeholders in the HPSE, especially the healthcare, business, and law enforcement components of the ecosystem. This collaboration is vital for creating a cohesive and coordinated approach to addressing homelessness.
- Evaluating effectiveness: Broad categories provide a foundation for evaluating the effectiveness of current programs and interventions. By examining the impact on various populations and risk factors, stakeholders in the HPSE can identify areas of success and areas where improvements are needed, leading to more effective strategies and interventions.

<u>Note</u>: For the purposes of this report, "homeless", and program types servicing only persons meeting homelessness criteria use the Federal definitions (see next pages) to ensure validity and reliability across programs for the purposes of cross-comparison.

## 2a. What is homelessness? (con't)

In plain language, some common types of homelessness\* and definitions include:

- Street or unsheltered homelessness: This refers to individuals who are living on the streets or in other public spaces, such as parks or under bridges.
- Sheltered homelessness: This refers to individuals who are staying in shelters, such as emergency shelters or in some types of transitional housing programs.
- **Doubled-up homelessness**: This refers to individuals who are temporarily staying with friends or family because they do not have a permanent place to live.
- **Couch surfing**: This refers to individuals who are moving from one temporary living situation to another, often staying with friends or family for short periods of time. For the purposes of this report, since we are using HUD homelessness criteria for reporting purposes, someone that is coach surfing and accessing services is considered atrisk of homelessness, not homeless.
- Vehicle homelessness: This refers to individuals who are living in their cars or other vehicles because they do not have a permanent place to live.

(\*For a more technical and nuanced definition of homelessness, to include HUD categories of homelessness, which is used for program and project eligibility, please see the Federal Definitions sections, below.)

Importantly, homelessness in New Jersey also has a temporal component and context. These types are:

- **Temporary homelessness**: This type of homelessness is typically short-term and may occur when someone is in between housing situations or is unable to afford their current living situation.
- Chronic homelessness: This type of homelessness refers to individuals who have been continuously homeless for at least one year, or who have experienced homelessness four or more times in the past three years, and have a disabling condition.
- **Episodic homelessness**: This type of homelessness refers to individuals who experience periods of homelessness interspersed with periods of housed living.

As this report explores the causes of homelessness across various categories, genders, races, and ages in the state during the past year, **an approachable plain language definition for persons at-risk of homelessness in New Jersey** could be:

Individuals or families who are not currently experiencing homelessness, but face circumstances or challenges that
put them at a higher likelihood of losing their housing in the near future. Common causes that may place someone at
risk of homelessness in New Jersey include financial instability, job loss, unexpected expenses, lack of affordable
housing, mental or physical health issues, addiction, domestic violence, or the loss of support from friends or family.
Being at risk of homelessness means that without proper support or assistance from prevention services to address
these risk factors, these individuals may find themselves without a stable place to live.

<u>Note</u>: While the plain language definitions of these terms aid understanding for the general reader, for the purposes of this report, a person "at-risk of homelessness" meets either the HUD or OHP definitions of at-risk of homelessness" and is known to the NJ HPSE or receives services through program services category called Prevention & Support Services for Persons At-Risk of Homelessness (see next pages for additional information).

## 2a. Definitions: At-risk of homelessness (HUD)

24 CFR Part 576.2 of the HUD ESG Interim Rule and 24 CFR 578.3 of the CoC Interim Rule defines At Risk of Homelessness. The definition in the Rule is detailed and should be reviewed for specific details about the definition.

For HUD funded programs, At risk of homelessness means:

- (1) An individual or family who:
- (i) Has an annual income below 30 percent of median family income for the area, as determined by HUD (50% AMI for ESG-CV projects);
- (ii) Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the "homeless" definition in this section; and
- (iii) Meets one of the following conditions:
  - (A) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;
  - (B) Is living in the home of another because of economic hardship;
  - (C) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance;
  - (D) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by Federal, State, or local government programs for low-income individuals;
  - (E) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit in which there reside more than 1.5 persons reside per room, as defined by the U.S. Census Bureau;
  - (F) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or
  - (G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved consolidated plan;
- (2) A child or youth who does not qualify as "homeless" under this section, but qualifies as "homeless" under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or
- (3) A child or youth who does not qualify as "homeless" under this section, but qualifies as "homeless" under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

## 2a. Definitions: At-risk of homelessness (OHP)

OHP PPB #23-02 defines At Risk of Homelessness for its Diversion and Rural & Suburban Outreach programs and program components.

For the OHP funded programs identified above, At risk of homelessness means an individual or the head of household is currently experiencing at least one (1) of the following risk factors for homelessness and are eligible for services to assist in stabilizing their housing situation and circumstances:

1. An individual or family that does not have sufficient resources or support networks immediately available to prevent them moving to an emergency shelter or another place defined in Category 1 of the HUD "homeless" definition.

2. Families with children or unaccompanied youth who are unstably housed and likely to continue in that state.

3. People who are trading sex for housing.

4. People who are losing their primary nighttime residence, which may include a motel or hotel or a doubled-up situation, within 14 days and lack resources or support networks to remain in housing.

5. People who are staying with friends but cannot stay there for longer than 14 days.

6. People who are being trafficked.

7. People who left or are leaving home because of physical, emotional, or financial abuse or threats of abuse and have no safe, alternative housing.

#### **Income Limitations**

There is not a rigid income cap for providing services through the OHP programs identified above, but DCA/OHP expects that most consumers will be in households at or below 120% of AMI.

## 2a. Definitions: Homelessness

On December 5, 2011, The Homeless Emergency Assistance and Rapid Transition to Housing: Defining "Homeless" Final Rule was published in the Federal Register. This rule defines four categories of homelessness and the corresponding recordkeeping requirements. Review the full Homeless Definition Final Rule for details about the definition and record keeping requirements. Note the related Defining Chronically Homeless Final Rule published December 4, 2015 for additional information.

#### HUD's 4 categories of homelessness are as follows:

#### Homeless Category 1: Literally Homeless (§ 578.3)

- An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
- Has a primary nighttime residence that is a public or private place not meant for human habitation; or
- Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
- Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.
- Note: An individual or family only needs to meet one of the three subcategories to qualify as Homeless Category 1: Literally Homeless.

#### Homeless Category 2: Imminent Risk of Homelessness (§ 578.3)

- An individual or family who will imminently lose their primary nighttime residence, provided that:
- Residence will be lost within 14 days of the date of application for homeless assistance;
- No subsequent residence has been identified; and
- The individual or family lacks the resources or support networks needed to obtain other permanent housing.
- Note: Includes individuals and families who are within 14 days of losing their housing, including housing they own, rent, are sharing with others, or are living in without paying rent.

#### Homeless Category 3: Homeless Under Other Federal Statutes (§ 578.3)

- Unaccompanied youth under 25 years of age, or families with Category 3 children and youth, who do not otherwise qualify as homeless under this definition, but who:
- Are defined as homeless under the other listed federal statutes;
- Have not had a lease, ownership interest in permanent housing during the 60 days prior to the homeless assistance application;
- Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and
- Can be expected to continue in such status for an extended period of time due to special needs or barriers
- Note: HUD has not authorized any CoC to serve the homeless under Category 3. HUD determines and approves the use of CoC Program funds to serve this population based on each CoC's Consolidated Application. See 24 CFR 578.89. Individuals and families that qualify as homeless under Category 3 may be served by the ESG program if they meet required eligibility criteria for certain ESG components.

## 2a. Definitions: Homelessness (con't)

Homeless Category 4: Fleeing/Attempting to Flee Domestic Violence (§ 578.3)

- Any individual or family who:
- Is fleeing, or is attempting to flee, domestic violence;
- Has no other residence; and
- Lacks the resources or support networks to obtain other permanent housing

Note: For the purposes of this definition, "Domestic Violence" includes dating violence, sexual assault, stalking, and other dangerous or life-threatening conditions that relate to violence against the individual or family member that either takes place in, or him or her afraid to return to, their primary nighttime residence (including human trafficking).

## 2a. Definitions: Chronic Homelessness

The definition of Chronic Homelessness used in this person is the same as the HUD definition, below.

The definition of chronically homeless is a homeless individual with a disability as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who:

- · Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and
- Has been homeless and living as described for at least 12 months<sup>\*</sup> or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described.
- An individual who has been residing in an institutional care facility for less, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility<sup>\*\*</sup>; or
- A family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

## 2a. Definitions: Other definitions having to do with homelessness used in this report

**Continuum of Care (CoC):** The group organized to carry out the responsibilities required under 24 CFR Part 578 and is composed of representatives of organizations, including nonprofit homeless service providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless individuals to the extent these groups are represented within the geographic area and are available to participate.

#### New Jersey has sixteen (16) CoC's, shown on the map below:



NJ's 21 counties grouped by CoC membership Map: DCA/OHP • Source: HUD



## 2a. Definitions: Other definitions having to do with homelessness used in this report\*

**Centralized or Coordinated Assessment System (Coordinated Entry):** A centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. The system covers the geographic area, is easily accessible and should ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs.

**Diversion**\*\*: Homelessness diversion programs are proactive, solution-focused interventions designed to prevent individuals and families from entering the homelessness services system. These programs aim to help people facing housing crises by identifying alternative housing arrangements, providing no or low-barrier financial assistance, and offering mediation and problem-solving support. The goal is to address the immediate housing needs of those at risk, while also connecting them with appropriate resources and services to promote long-term stability.

**Disability:** A person is considered to have a disability if the disability meets all of the following four criteria: 1. is expected to be of long, continuing, or indefinite duration; 2. substantially impedes the individual's ability to live independently; 3. could be improved by the provision of more suitable housing conditions; and 4. is one or more of the following: (a) physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury; and/or (b) developmental disability (please review full definition); and/or (c) the disease of acquired immunodeficiency syndrome or any condition arising from the etiologic agency for acquired immunodeficiency syndrome.

**Emergency Shelter (ES):** Emergency shelter means any facility, the primary purpose of which is to provide a temporary shelter for the homeless in general or for specific populations of the homeless and which does not require occupants to sign leases or occupancy agreements. Any project funded as an emergency shelter under a Fiscal Year 2010 Emergency [Shelter] grant may continue to be funded under ESG.

**Emergency Solutions Grant (ESG):** HUD program that provides funding to: (1) improve the number and quality of emergency shelters for homeless individuals and families; (2) help operate these shelters; (3) provide essential social services to shelter residents; and (4) prevent families and individuals from becoming homeless.

**Fair Market Rent (FMR):** Published annually by HUD to establish estimates of gross rent, taking into account both rent and the cost of necessary utilities (e.g., water and power), excluding option utilities (e.g., cable, internet). FMRs vary depending upon the geographic area in which the housing unit is located.

**HMIS Lead:** The eligible applicant designated by the CoC, in accordance with the CoC Program Interim Rule, to manage the CoC's HMIS on the CoC's behalf. In the State of New Jersey, NJ HMIS at HMFA is the HMIS Lead for 14 of the 16 CoC's in the State.

\*All Definitions in this section are HUD defined, unless otherwise specified. \*\*OHP, not HUD, definition.

## 2a. Definitions: Other definitions having to do with homelessness used in this report (con't)

Homeless Management Information System (HMIS): A local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Each CoC is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards. There are 3 different HMIS systems utilized in the state, operated by NJ HMFA, the Bergen County CoC, and the Middlesex County CoC.

**Homelessness Prevention (HP):** A component of ESG assistance programs where funds are provided to individuals and families who meet the "at risk of homelessness" definition or who meet the criteria in paragraphs (2), (3), or (4) of the "homeless" definition in 24 CFR 576.2 and have an annual income below 30% of the median family income as determined by HUD, and lack the resources to obtain permanent housing. See 24 CFR 576.103 of the ESG Interim Regulations.

**Homelessness Prevention Services Ecosystem (HPSE)\*:** is the network of organizations, people, and processes in the State of New Jersey that work together to deliver a service or set of services to prevent a person from experiencing homelessness and/or rapidly exit persons that are experiencing homelessness. It includes all of the components that are necessary to deliver the service, such as the service providers, the infrastructure that supports the service, and the various roles and functions that are required to make the service work. NB: this is an OHP, not HUD definition.

**Housing First:** A model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions (such as sobriety or a minimum income threshold).

Joint Transitional Housing and Permanent Housing-Rapid-Re-housing (Joint TH and PH-RRH): Commonly referred to as "TH-RRH", this combines two existing program components: transitional housing and permanent housing-rapid rehousing-in a single project to serve individuals and families experiencing homelessness. Program participants chose the type of housing that best fits their needs that will result in obtaining or maintaining permanent housing.

**Permanent Supportive Housing (PSH):** A CoC program component type providing indefinite leasing or rental assistance combined with supportive services for disabled persons experiencing homelessness so that they may live independently.

**Prevention & Support Services for Persons At-Risk of Homelessness (OHP)\*:** a combined services category created for the purposes of this report that aggregates utilization data based upon persons in the HPSE whose profile met either the OHP or HUD definitions of "at-risk" of homelessness. Examples of programs servicing this population include Case Management, Diversion, Eviction Diversion, Homeless Hotlines, Referral and Placement Services, SSVF Prevention Programs, Supportive Case Management

#### \*OHP, not HUD, definition

# 2a. Definitions: Other definitions having to do with homelessness used in this report (con't)

**Project Based Rental Assistance (PBRA):** A rental assistance model in which a recipient or subrecipient contracts for a particular unit or property and the program participant enters into a lease with the property owner. If the participant moves, the PBRA stays with the unit for the next eligible program participant.

**Rapid Re-Housing (RRH):** A permanent housing solution emphasizing housing search and relocation services and short- and medium-term rental assistance to move homeless persons and families (with or without a disability) as rapidly as possible into housing.

**Rental Assistance (HUD):** Cost category that, if eligible may be budgeted under the PH and TH program components and may be tenant-based (TBRA), sponsor-based (SBRA), or project-based (PBRA), depending upon the component type.

**Rental Assistance (OHP):** Refers to various forms of financial support provided to individuals and families who struggle to afford housing costs and are at-risk of homelessness that are assisted using non-HUD or New Jersey State funds. Examples of state rental assistance programs include: Temporary Rental Assistance (TRA) through the Department of Human Services (DHS); the State Rental Assistance Program (SRAP) - A state-funded program that offers rental assistance to low-income residents, including the elderly, disabled, and families; Emergency Rental Assistance Program (ERAP) - A program that provides temporary rental assistance and housing stabilization services to households experiencing financial hardship due to the COVID-19 pandemic.

**Safe Haven:** A type of supportive housing designed to serve hard-to-reach homeless persons with severe mental illness who come primarily from the streets and have been unable or unwilling to participate in housing or supportive services. While no longer an eligible new component of the CoC Program, these types of projects continue to be eligible for renewal of leasing, operating, supportive services, rental assistance, HMIS and project administrative costs under 24 CFR 578.33(d)(1), so long as the project continues to serve the same population and the same number of program participants or units in the same type of housing as identified in their most recently amended grant agreement signed before August 31, 2012.

**Street Outreach (SO) & Outreach Services (OS):** Essential services related to reaching out to all unsheltered individuals and families experiencing homelessness with the CoC's geographic area, including those least likely to request assistance. Services include connection to emergency shelter, housing, critical/crisis services, and urgent, non-facility-based care.

**Supportive Services Only (SSO):** A CoC program component type that allows recipients and subrecipients to provide supportive services to homeless individuals and families not residing in housing operated by the recipient or subrecipient.

**Transitional Housing (TH):** Designed to provide homeless individuals and families with the interim stability and support to successfully move to and maintain permanent housing.

Source: https://files.hudexchange.info/resources/documents/Virtual-Binders-Glossary-of-Terms.pdf

## 2b. Source of data on and for homelessness

#### New Jersey Homelessness Management Information System (NJ HMIS)

The New Jersey Homeless Management Information System (NJ HMIS) is the centralized homelessness database used by the State of New Jersey, 14 of the 16 Continua-of-Care<sup>\*</sup> in the State, and service providers in the HPSE to collect information on the homeless population in New Jersey.

NJ HMIS is administered by the New Jersey Housing and Mortgage Finance Agency (NJ HMFA). NJ HMIS collects data on various characteristics of homeless individuals, including age, gender, race, and disability status. This information is then used to track individuals over time and provide services that meet their specific needs. The NJ HMIS is a powerful tool for collecting and analyzing data on the homeless population, and data from NJ HMIS is aggregated and analyzed further by OHP using additional tools that offer a range of functionalities, including data visualization, statistical analysis, predictive modeling, and machine learning.

#### **Advantages**

One advantage of the NJ HMIS is that it allows for a comprehensive understanding of the homeless population. By collecting data on various characteristics of homeless individuals, the NJ HMIS can identify trends and patterns in the population, such as changes in the number of homeless individuals over time or the demographics of the homeless population. Additionally, the NJ HMIS allows service providers to track individuals over time and ensure that they receive the services they need to move out of homelessness.

#### Limitations

However, the NJ HMIS has some limitations. One limitation is that it is a voluntary system, which means that not all individuals experiencing homelessness are included in the database. Additionally, some individuals atrisk may be hesitant to provide personal information, which can limit the accuracy of the data collected. Finally, the HMIS is limited to data on individuals who access homeless services, which may not represent the entire homeless population.

\*The two CoCs not utilizing NJ HMIS do upload contact information & universal data elements (UDE) into NJ HMIS so that state government entities have access.

## 2b. Sources of data on and for homelessness (con't)

#### Point-in-Time Count (PIT Count - NJ Counts)

The Point-in-Time (PIT) Count is another method used to collect data on the homeless population. The PIT Count is, most often, a one-night survey that provides a snapshot of the homeless population in a specific geographic area in the State. During the PIT Count, volunteers go out into the community and count the number of homeless individuals they see and interface with. The volunteers also collect data on various characteristics of homeless individuals, such as age, gender, and disability status.

In New Jersey, the PIT Count is named NJCounts and is coordinated on a single day across the State allowing for comparable data across all communities from year to year. Monarch Housing Associates has coordinated NJCounts since 2014 as commissioned by the New Jersey Housing and Mortgage Finance Agency (NJHMFA).

Data, reports, and surveys used in prior NJCounts can be found at: <u>https://monarchhousing.org/nj-counts/</u>.

#### **Advantages**

One advantage of the PIT Count is that it provides a snapshot of the homeless population in a specific geographic area. This information can be used to identify areas where homeless individuals are concentrated and to target resources to those areas. Additionally, the PIT Count is often conducted in conjunction with outreach efforts, which can help connect homeless individuals with services they need.

#### Limitations

However, the PIT Count also has limitations. One limitation is that it only provides a snapshot of the homeless population on a single night, which may not be representative of the entire homeless population. Additionally, the PIT Count may miss some homeless individuals who are hidden or difficult to count, such as those who are sleeping in cars or abandoned buildings. Lastly, as has been stated above, the PIT Count only collects information on persons experiencing unsheltered and sheltered homelessness, leaving out a large cross section of persons in or accessing the NJ HPSE.

# **2c. Methods of data collection on and for homelessness**

#### Data sources

As outlined above, the primary data sources for this report were:

- 1. NJ HMIS
- 2. NJ Counts 7 Year Data

#### **NJ HMIS Data Process**

The step-by-step process used to pull and clean NJ HMIS data is available in Appendix A.

A condensed version of the process is as follows:

A standardized report framework was created using HMIS ReportBuilder for 2021 and 2022. The datasets were cleaned, and several features, such as ZIP codes, date and time entries, and demographic data, were standardized. Calculated fields, such as distinct persons, households, encounters, programs, and providers, were created for each year's dataset. The processed data was uploaded to Tableau Cloud for visual cross-tabulation and manipulation. Separate workbooks were produced for each year, and calculations were verified using Excel & R. Visualizations were created using Python's "datawrapper" and "matplotlib" libraries.

#### NJ Counts Data Process

The step-by-step process used to pull and clean NJ Counts data is available on page 110.

A condensed version of the process is as follows:

Department staff standardized and cleaned individual-level survey data, assigning an "Unknown" label to missing entries. Municipality and county names were standardized, while homelessness reasons, prior residence, and agency categories were condensed. Central coordinates of municipalities were added for mapping purposes

# 2d. Limitations of methods of data collection on and for homelessness

This are several limitations, based upon the datasets and systems used for this report:

#### Data quality

The accuracy and completeness of the data used for analysis is crucial. If the data is incomplete or inaccurate, it can lead to incorrect conclusions and misguided decisions.

Across the State, a major initiative of OHP and NJ HMIS @ NJ HMFA is to improve provider-level data capture and to assist local Continuums-of-Care in enforcing higher data standards across the services ecosystem.

A key factor in the timeliness of this report (i.e., why it was issued in 2023 versus late December in 2022), is the laborious process of cleaning data from the HPSE in order to produce a reliable and factual product.

#### Limited data sources

Peering into homelessness services rely on data from a variety of sources, including government agencies, nonprofits, and community organizations. Presently, not all entities servicing persons at-risk of homelessness or experiencing homelessness in the State are not statutorily required to participate in NJ HMIS or to provide OHP & DCA with data on homelessness populations. Similarly, of those entities required to report to OHP, data utilization agreements (DUAs) are, as of this writing, not yet fully executed.

#### **Resource constraints**

Data analytics can require significant resources, including funding, personnel, and technological infrastructure. These resources may not always be available to organizations working to address homelessness, especially at the local and county-levels of government.

#### **Privacy concerns**

In order to accurately track and analyze homelessness data, it is often necessary to collect personal information from individuals experiencing homelessness. This can raise concerns about privacy and the security of sensitive data.

The data presented in this report is presented as aggregate data (especially having to do with demographics) in order to protect the privacy of those accessing the HPSE. Across both the government and healthcare sectors, using aggregate data can be one way to protect personally identifiable information (PII) while still allowing for data analysis. Aggregate data refers to data that has been compiled and summarized, so that individual data points are not identifiable. This can be achieved by aggregating data at a higher level, such as by grouping data by zip code rather than by individual address.

Using aggregate data can help to protect PII by making it more difficult to identify specific individuals within the data. However, it is important to be mindful of the potential for re-identification, particularly if the data includes unique or rare characteristics that could be used to differentiate individuals within the aggregate data. For this purpose, any data in this report that could potentially unmask a system user has been deliberately withheld.

3. Demographics & Trends Of Homelessness In New Jersey System utilization & trends

**Population demographics** 

Special population characteristics

А

В

С

OHP ANNUAL REPORT - 2022

# **3a. HPSE System Utilization**

Below is a comprehensive overview of the HPSE in the State of New Jersey in 2022. It highlights the significant efforts made in the past year to provide assistance to individuals at-risk of homelessness, as well as those already experiencing homelessness. The data encompasses a wide range of services, including eviction diversion initiatives, homelessness prevention programs, street outreach programs, homelessness hotlines, emergency shelters, CODE BLUE programs, and permanent housing support providers. Furthermore, it examines the year-over-year changes in unsheltered and sheltered homelessness, permanent housing programs, and transitional housing.

Total NJ HPSE Utilization in 2022: 119,041 distinct persons accessed services in the NJ HPSE in 2022.

#### Prevention & Support Services for Persons At-Risk of Homelessness In 2022 in the State of New Jersey:

- **92,778** distinct persons received services in the Homelessness Prevention and Supportive Services Ecosystem (HPSE) to prevent an episode or experience of homelessness, a 27% increase from 2021 (72,785).
- 57,302 (62%) of persons accessing the HPSE for prevention services were newly admitted into the HPSE.

#### Examples of services these persons accessed:

- DCA's Eviction Diversion Initiative for persons facing eviction.
- DCA's Homelessness Prevention Program
- NJ 211 to be referred to housing support providers.

Importantly, the number of programs servicing this population **increased this year by 11%** (428 in 2022, up from 387 in 2021), with a total increase of 33% (**105 additional programs**) since 2019.

#### **Unsheltered Homelessness**

- **11,265** distinct persons experienced at least one day of unsheltered homelessness in New Jersey in 2022, a 20% increase from 2021 (9,358).
- 4,120 distinct persons (37%) of all persons experiencing unsheltered homelessness in 2022 were stably housed in 2021.

#### Examples of services persons experiencing unsheltered homelessness accessed:

- Department of Human Services' Programs for Assistance in the Transition from Homelessness (PATH) Outreach
- City of Newark's Homeless Outreach Team (HOT) Street Team

#### NJ HPSE: Homelessness & Risk of Homelessness in New Jersey (2021 & 2022)

# of distinct persons by year accessing prevention & other services in New Jersey in 2021 & 2022.

Population Type	2021	2022	YoY Change?
Persons Experiencing Sheltered Homelessness	14,146	16,566	17%
Persons Enrolled in Permanent Housing Programs	11,130	12,062	8%
Persons Accessing Prevention of Homelessness & Support Services Programs	72,785	92,778	27%
Persons Accessing Transitional Housing Programs	2,614	2,659	2%
Persons Experiencing Unsheltered Homelessness	9,358	11,265	20%

Table: OHP/DCA + Source: NJ HMIS & DCA OHP

Table 1

# **3a. HPSE System Utilization**

#### Sheltered Homelessness in Emergency Shelters

- **16,566** distinct persons experienced sheltered homelessness in emergency shelters in 2022, a 17% increase from 2021 (14,146).
- 1,361 distinct persons (8% of total) accessed emergency shelters in 2022 due to engagement with outreach service providers for persons experiencing unsheltered homelessness.
- 49% of persons (8,095 distinct persons) accessing emergency shelters had also accessed a homelessness prevention or supportive services program in 2022.
- 10% of persons admitted into emergency shelter in 2022 (1,652 persons) met the HUD criteria for Chronic Homelessness at the time of admission.

#### Examples of services these persons accessed:

- DHS's CODE BLUE Emergency Warming Center programs.
- DCA's Another Chance program for returning citizens leaving incarceration.
- City of Trenton's Emergency COVID Shelter program.

#### **Permanent Housing Programs**

- **12,062** distinct persons were placed or remained successfully housed in permanent housing programs in 2022, an 8% increase from 2021 (11,130).
- 11% of persons in permanent housing programs in 2022 (1,373 distinct persons) had previously accessed the emergency shelter system also in 2022.

#### Examples of services and programs these persons accessed:

- DCA's Shelter Plus Care programs.
- DMHAS Subsidized Housing programs.
- Continuum-of-Care permanent housing programs and projects.

#### **Transitional Housing**

- **2,659** distinct persons were temporarily housed in transitional housing programs in 2022, a 2% increase from 2021 (2,614).
- 20% of persons utilizing a transitional housing program (539 distinct persons) in 2022 had also accessed the emergency shelter system in 2022 prior to enrollment.

#### Examples of services these persons accessed:

- Transitional Housing programs for persons in recovery.
- Hope for Veterans transitional program @ VA Hospital Lyons Campus.
- DMAVA Veterans Haven programs.

# **3a. System utilization - by County**

#### **In-system: Counties**

21

The total system utilization for any population or cause (e.g., Prevention, Permanent Housing, or Unsheltered Services, etc.), broken out by County can be seen in Table 3, below.

#### NJ HPSE - Distinct Persons In-system - 2022 & 2021 - By County

Number of distinct persons accessing services for both homelessness and risk of homelessness.

#### Rank of County by total # of distinct persons in-system

1

County	# of distinct persons in- system (2022)	# of persons in- system (Rank)	# of distinct persons in- system (2021)	Change	YoY Change	% of persons in- system due to risk of homelessness?	% of persons in- system for unsheltered homelessness?	% of persons in- system for sheltered homelessness?
ATLANTIC	4,362	10	5,187	-825	-16%	73.67%	4.64%	15.23%
BERGEN	2,348	15	1,510	838	55%	93.95%	2.14%	*
BURLINGTON	7,398	6	8,768	-1,370	-16%	73.42%	0.04%	16.29%
CAMDEN	6,567	8	6,627	-60	-1%	37.61%	25.15%	18.45%
CAPE MAY	1,008	18	996	12	1%	62.25%	0.35%	31.60%
CUMBERLAND	3,577	12	3,406	171	5%	79.23%	0.50%	15.83%
ESSEX	22,715	1	22,400	315	1%	54.83%	17.35%	14.33%
GLOUCESTER	3,295	14	2,476	819	33%	80.74%	4.29%	9.00%
HUDSON	15,339	2	17,047	-1,708	-10%	68.43%	9.84%	13.55%
HUNTERDON	736	19	687	49	7%	49.75%	2.75%	19.50%
MERCER	9,653	5	9,267	386	4%	66.09%	3.91%	16.50%
MIDDLESEX	4,820	9	3,787	1,033	27%	82.19%	5.49%	8.48%
MONMOUTH	11,969	4	13,150	-1,181	-9%	84.30%	3.58%	5.28%
MORRIS	3,560	13	4,299	-739	-17%	67.41%	5.48%	15.89%
OCEAN	4,046	11	3,772	274	7%	74.60%	7.89%	11.43%
PASSAIC	12,354	3	12,623	-269	-2%	84.62%	3.00%	4.06%
SALEM	649	21	457	192	42%	83.23%	6.04%	5.44%
SOMERSET	2,001	16	1,792	209	12%	56.65%	1.29%	14.54%
SUSSEX	1,573	17	1,649	-76	-5%	81.01%	0.84%	8.41%
UNION	7,005	7	8,353	-1,348	-16%	68.88%	4.97%	10.60%
WARREN	692	20	617	75	12%	77.48%	4.48%	7.13%

NB: Some persons were admitted/enrolled/discharged from programs in multiple counties due to the nature of the CoC regional system.

Table: DCA/OHP • Source: NJ HMIS

# 3a. System utilization - by County (con't)

#### Insights from the total in-system utilization census (Table 3, previous page) for 2022 include:

- Essex, Hudson, and Passaic counties had the highest number of individuals in the system, while Salem, Warren, and Hunterdon had the lowest.
- Bergen and Gloucester counties experienced the most significant year-over-year (YoY) increase, 55% and 33% respectively, largely driven by the number of persons accessing supports for the prevention of homelessness.
- Atlantic, Burlington, and Union counties faced the largest YoY decreases, each with a 16% reduction. in the total number of distinct persons in-system.
- The percentage of persons in the system due to the risk of homelessness was highest in Bergen, Passaic, and Monmouth counties.
- Unsheltered homelessness was most prevalent in Camden, Essex, and Hudson counties, while sheltered homelessness was most common in Cape May, Cumberland, and Morris counties.
- The top three counties with the highest number of persons in the system (Essex, Hudson, and Passaic) have a combined total of 50,408 distinct individuals, accounting for around 42% of the statewide total in system census.
- Salem County experienced a notable 42% YoY increase in the number of persons in the system, despite having the lowest overall in-program census in the state.
- The proportion of persons in the system due to the risk of homelessness is relatively high in several counties with lower overall counts, such as Hunterdon (49.75%), Somerset (56.65%), and Sussex (81.01%).
- Camden County stands out with a high percentage of persons in the system for unsheltered homelessness (25.15%), significantly higher than most other counties.
- Some counties exhibit low percentages of sheltered homelessness. Passaic County, for instance, has only 4.06% of persons in the system for sheltered homelessness despite being the third-highest in overall count.

# **3a. System utilization - New Admissions**

#### **New Admissions**

A total of 70,204 distinct persons were newly admitted to the services ecosystem in 2022. This is a state-wide increase of 26% over 2021 where 55,830 distinct persons were newly admitted into the HPSE for any purpose.

#### NJ HPSE - Distinct # of Persons Admitted - 2022 & 2021 - By County

Number of distinct persons admitted into NJ HPSE in 2022 with YoY Change from 2021.

21

County	# of distinct individuals admitted (2022)	Rank - # of distinct individuals admitted	# of distinct individuals admitted (2021)	Change from 2021	% YoY Change (from 2021)	% of 2022 admissions for risk of homelessness?	% of 2022 admissions for unsheltered homelessness?	% of 2022 admissions for sheltered homelessness?
ATLANTIC	2,794	11	3,347	-553	-17%	71.8%	3.91%	21.38%
BERGEN	2,271	14	1,444	827	57%	97.1%	1.18%	*
BURLINGTON	6,095	4	6,549	-454	-7%	78.0%	0.03%	15.91%
CAMDEN	3,030	10	3,815	-785	-21%	44.0%	8.62%	33.63%
CAPE MAY	865	18	820	45	5%	69.9%	0.30%	28.66%
CUMBERLAND	1,671	15	1,479	192	13%	66.1%	0.71%	31.01%
ESSEX	13,769	1	14,567	-798	-5%	63.5%	11.04%	18.09%
GLOUCESTER	2,383	12	1,696	687	41%	87.7%	*	10.63%
HUDSON	7,530	2	8,109	-579	-7%	59.5%	9.12%	25.17%
HUNTERDON	499	21	463	36	8%	48.6%	1.51%	25.33%
MERCER	6,899	3	6,086	813	13%	69.5%	3.30%	20.93%
MIDDLESEX	4,253	8	3,284	969	30%	88.2%	3.41%	7.50%
MONMOUTH	4,230	7	5,098	-868	-17%	77.3%	4.01%	12.47%
MORRIS	2,283	13	3,160	-877	-28%	69.4%	3.12%	20.01%
OCEAN	3,366	9	3,061	305	10%	81.1%	3.53%	13.56%
PASSAIC	4,832	5	7,185	-2,353	-33%	89.7%	0.55%	5.95%
SALEM	536	20	392	144	37%	90.9%	0.18%	6.28%
SOMERSET	1,546	16	1,338	208	16%	69.1%	1.67%	15.68%
SUSSEX	1,359	17	1,396	-37	-3%	85.8%	0.26%	8.88%
UNION	4,690	6	5,593	-903	-16%	73.9%	3.62%	13.61%
WARREN	566	19	477	89	19%	91.1%	1.54%	5.32%

NB: Some persons were admitted/enrolled/discharged from programs in multiple counties due to the nature of the regionalized CoC system. Additionally, some data for Bergen and Gloucester counties were not available at time of report.

Table: DCA/OHP • Source: NJ HMIS

# 3a. System utilization - New Admissions (con't)

#### New Admissions - By County

As shown in Table 4, above, the dataset reveals insights into the number of distinct individuals admitted to the homelessness support system across New Jersey counties in 2021 and 2022. Key observations include:

- Essex, Hudson, and Mercer counties had the highest number of distinct individuals admitted in 2022, while Hunterdon, Salem, and Warren had the lowest.
- Bergen and Middlesex counties experienced the most significant YoY increases in admissions, at 57% and 30%, respectively.
- Passaic and Morris counties faced the largest YoY decreases in admissions, at -33% and -28%, respectively.
- The proportion of 2022 admissions due to the risk of homelessness was highest in Bergen, Passaic, and Warren counties.
- Camden, Essex, and Hudson counties had the highest percentages of admissions for unsheltered homelessness in 2022.
- Camden, Cumberland, and Cape May counties exhibited the highest proportions of admissions for sheltered homelessness in 2022.

## When comparing admissions data with total in-system utilization data, several patterns and relationships emerge across New Jersey counties:

- High in-system utilization and high admissions: Essex, Hudson, and Mercer counties have high numbers of distinct individuals both in the system and admitted in 2022. This suggests a consistently high demand for homelessness support services in these areas.
- High in-system utilization but low admissions: Passaic County ranks third in total in-system utilization but experienced a significant decrease in admissions (-33% YoY). This indicates that although there is a high demand for support services, comparatively fewer new individuals are entering the system compared to the previous year.
- Bergen County stands out with a high percentage (97.1%) of admissions due to the risk of homelessness, which is consistent with its high proportion (93.95%) of in-system utilization due to the risk of homelessness. This indicates a strong focus on homelessness prevention and support services in Bergen County.
- Camden, Essex, and Hudson counties have high percentages of admissions and in-system utilization for unsheltered homelessness. This suggests a pressing need to address unsheltered homelessness in these areas.
- Cape May, Cumberland, and Morris counties show high proportions of both admissions and in-system utilization for sheltered homelessness. This indicates a need to focus on both the delivery and the capacity of emergency shelter services in these areas.
- Significant year-over-year changes: Counties with notable YoY changes in admissions, such as Bergen, Gloucester, and Salem, indicate that local circumstances and needs can change rapidly. Local agencies in these areas should monitor trends closely to respond effectively to shifts in demand.

# **3a. System utilization - 1 Year System Stayers**

#### System Stayers - 1 Year

In 2022, the New Jersey Homelessness Prevention and Supportive Services Ecosystem (HPSE) saw a significant increase in the number of one-year system stayers, with 23,462 distinct persons remaining in the same program from the previous year. This represents a 27% year-over-year (YoY) change compared to the 18,546 individuals in 2021.

#### NJ HPSE: 1 Year System Stayers - By Population

# & % of persons in-system in same program from prior year

	2022	2021	YoY Change?
# of distinct persons	23462	18546	27.0%
% System Stayers Enrolled in Permanent or Transitional Housing?	15.91%	15.51%	0.4%
% System Stayers Enrolled in On-going Prevention Programs?	65.11%	63.58%	1.5%
% of System Stayers Accessing Emergency Shelter in prior year?	10.77%	13.30%	-2.5%

Table: OHP/DCA • Source: NJ HMIS

Table 5

The distribution of system stayers across various programs in 2022 revealed that 15.91% were enrolled in permanent or transitional housing, a slight increase of 0.4% from 2021. Furthermore, 65.11% of system stayers were enrolled in on-going prevention programs, marking a 1.5% increase from the previous year. Notably, the percentage of system stayers accessing emergency shelter in the prior year decreased by 2.5%, from 13.30% in 2021 to 10.77% in 2022.

These trends indicate that while the overall number of individuals remaining in the same program for a year increased, there was a shift towards preventive measures and stable housing options, and a decrease in the reliance on emergency shelters for persons requiring longer, multi-year intervention to work toward housing stabilization.

A by-county breakout of total system stayers can be found on the following page in Table 6.

# 3a. System utilization - 1 Year System Stayers - By County (con't)

#### System Stayers - 1 Year - By County

Table 6, below, shows the by county breakout of one-year System Stayers.

#### NJ HPSE - Distinct # of System Stayers - 2022 & 2021 - By County



County	# of distinct persons - 1-year Stayers	# of stayers rank (by person)	# of distinct persons - 1-year Stayers (2021)	YoY difference	YoY Change Rank	YoY Change - %
ATLANTIC	790	10	890	-100	15	-11%
BERGEN	79	19	48	31	5	65%
BURLINGTON	1,298	8	1,824	-526		-29%
CAMDEN	1,680	4	1,007	673		67%
CAPE MAY	76	20	107	-31		-29%
CUMBERLAND	302	14	448	-146	21	-33%
ESSEX	5,743	1	3,846	1,897	6	49%
GLOUCESTER	342	13	368	-26	14	-7%
HUDSON	2,406	3	1,953	453	11	23%
HUNTERDON	148	17	120	28	10	23%
MERCER	1,631	5	1,146	485	7	42%
MIDDLESEX	462	12	342	120	8	35%
MONMOUTH	1,432	7	1,642	-210	16	-13%
MORRIS	1,128	9	611	517	3	85%
OCEAN	474	11	575	-101		-18%
PASSAIC	3,478	2	1,867	1,611	2	86%
SALEM	95	18	42	53	1	126%
SOMERSET	280	15	260	20	13	8%
SUSSEX	278	16	220	58	9	26%
UNION	1,580	6	1,349	231	12	17%
WARREN	53	21	63	-10	17	-16%

NB: Some persons were admitted/enrolled/discharged from programs in multiple counties due to the nature of the regionalized CoC system.

Table: DCA/OHP · Source: NJ HMIS

Table 6

# **3a. System utilization - Discharges**

#### **Discharges**

62,401 distinct persons were discharged from programs in 2022. This is a 23% increase from the number of total system discharges in 2021(50,583).

Importantly, the category of Temporary and Permanent Housing Situations is inclusive of all discharges from the system to housing destinations. Examples of a discharge to housing destinations include (but are not limited to) a person in emergency shelter renting a market-rate apartment, a person experiencing unsheltered homelessness leveraging a Rapid Re-housing program to lease a unit, and a veteran leaving a transitional housing program to permanent supportive housing utilizing the HUD-VASH program.

The category of Unknown/No Data is inclusive of persons that were automatically discharged from programs, persons with whom contact was lost, and persons that were discharged, but there was no data on destination disposition.

Persons falling into the discharges to institutional settings include those that were discharged to in-patient hospital or healthcare programs, and the discharged to homelessness category includes those that were discharged from programs to street homelessness and emergency shelter. The "Other" category includes any other destination of discharge that either: 1) does not fall within the other categories; or 2) used self-defined destination values that were not easily aggregated at the State and County levels.

The distribution of 2022 discharges by county, can be seen in Table 7, below:

COUNTY	Unknown/No data	Homeless Situations	Institutional Setting	Other Destination	Temporary and Permanent Housing Situations	# of distinct persons discharged
ATLANTIC	0.14%	9.33%	2.14%	26.81%	61.59%	2,531
BERGEN	*	*	*	*	*	2,047
BURLINGTON	57.55%	12.66%	0.36%	1.72%	27.72%	5,473
CAMDEN	7.93%	9.99%	3.31%	34.38%	44.40%	2,683
CAPE MAY	66.60%	19.16%	1.78%	2.93%	9.53%	840
CUMBERLAND	41.05%	0.90%	1.66%	23.72%	32.67%	1,389
ESSEX	52.39%	10.47%	1.29%	6.73%	29.12%	13,708
GLOUCESTER	55.17%	1.47%	0.82%	19.44%	23.10%	2,245
HUDSON	18.47%	11.61%	0.94%	31.09%	37.89%	7,550
HUNTERDON	45.18%	3.41%	2.01%	5.82%	43.57%	464
MERCER	42.64%	6.03%	1.09%	25.45%	24.79%	4,071
MIDDLESEX	*	*	*	*	*	3,879
MONMOUTH	32.24%	7.73%	1.04%	23.79%	35.20%	3,756
MORRIS	52.11%	11.87%	0.84%	15.48%	19.70%	2,120
OCEAN	54.35%	4.57%	0.25%	19.00%	21.82%	2,846
PASSAIC	80.62%	2.90%	0.90%	4.82%	10.76%	3,387
SALEM	71.02%	1.25%	0.18%	3.58%	23.97%	547
SOMERSET	41.50%	7.76%	1.12%	10.60%	39.02%	1,597
SUSSEX	21.42%	5.91%	0.32%	2.16%	70.18%	1,421
UNION	47.62%	10.65%	0.54%	6.98%	34.21%	4,215
WARREN	82.64%	1.16%	0.50%	2.15%	13.55%	579

#### NJ HPSE: 2022 Discharges by Destination Category

\*Discrete discharge data not available for Bergen & Middlesex Counties at time of writing Table: OHP/DCA • Source: NJ HMIS Table 7

# **3a. System utilization - Discharges (con't)**

#### Some insights from discharge data include:

- Discharge Outcomes: Counties with higher in-system utilization may not necessarily have a higher percentage of people discharged to temporary and permanent housing situations. For example, Essex County has the highest number of people in the system, but it ranks only 10th in terms of the percentage of people discharged to temporary and permanent housing situations. This could indicate potential bottlenecks in the system or a need for more effective programs and resources in these areas.
- Successful Interventions: Sussex County has a relatively low in-system utilization rank (17th), but it ranks 1st in terms of the percentage of people discharged to temporary and permanent housing situations. This might suggest that the interventions in Sussex County are effectively helping people exit homelessness.
- Unsheltered Homelessness: By comparing the percentage of people in the system for unsheltered homelessness with the percentage of people discharged to homeless situations, we can assess the effectiveness of the system in addressing unsheltered homelessness. For example, Camden County has a high percentage of persons in the system for unsheltered homelessness (25.15%), but it ranks 3rd in terms of people discharged to temporary and permanent housing situations. This could indicate that the County's interventions may be making strides in addressing unsheltered homelessness effectively.
- High Utilization, Lower Discharge Rates: Some counties, like Passaic, have a high in-system utilization rank (3rd), but a low rank in terms of people discharged to temporary and permanent housing situations (18th). This discrepancy may suggest that the interventions and resources in Passaic County might not be as effective in helping individuals exit homelessness, or that data is not being accurately captured at the time of discharge, and that further investigation into the programs and resources is warranted.
- Housing stability: Counties with a higher percentage of people discharged to temporary and permanent housing situations seem to have better outcomes in terms of reducing homelessness. For example, Sussex has the highest percentage (78%) of people discharged to temporary and permanent housing situations, which may contribute to a lower rate of increase in in-system utilization (only -3% YoY change in admitted individuals).
- Relationship Between In-System Utilization and Discharge Outcomes: Comparing in-system utilization and discharge outcomes can provide insights into the effectiveness of the HPSE. For example, Burlington County had a high number of persons in-system (7,398) but only 32% of persons discharged to temporary and permanent housing situations, indicating potential challenges in moving individuals from the system to stable housing.

# **3a. System utilization - Discharges (con't)**

#### **Discharges - Data Quality**

From discharge destination data, we can see that there are numerous issues with accurate discharge reporting throughout the system. While automatic discharges account for some of the unknown discharge destination due to the type of programs and projects providing services (e.g., Outreach Services), as does potential data mapping issues (i.e., for Bergen and Middlesex Counties, which utilize their own HMIS systems and are uploaders to NJ HMIS for required field mappings only) neither reason can totally account for the large disparities across the state with discharge destination visibility.

Of particular note should be the year-over-year changes many communities have experienced in the various discharge destination categories.

With regards to exits to Temporary and Permanent Housing destinations, there were numerous improvements over the past year:

COUNTY	Unknown/No data	Homeless Situations	Institutional Setting	Other Destination	Temporary and Permanent Housing Situations	# of distinct persons discharged
ATLANTIC	0.14%	9.33%	2.14%	26.81%	61.59%	2,531
BERGEN	*	*	*	*	*	2,047
BURLINGTON	57.55%	12.66%	0.36%	1.72%	27.72%	5,473
CAMDEN	7.93%	9.99%	3.31%	34.38%	44.40%	2,683
CAPE MAY	66.60%	19.16%	1.78%	2.93%	9.53%	840
CUMBERLAND	41.05%	0.90%	1.66%	23,72%	32.67%	1,389
ESSEX	52.39%	10.47%	1.29%	6.73%	29.12%	13,708
GLOUCESTER	55.17%	1.47%	0.82%	19.44%	23.10%	2,245
HUDSON	18.47%	11.61%	0.94%	31.09%	37.89%	7,550
HUNTERDON	45.18%	3.41%	2.01%	5.82%	43.57%	464
MERCER	42.64%	6.03%	1.09%	25.45%	24.79%	4,071
MIDDLESEX	*	*	*	*	*	3,879
MONMOUTH	32.24%	7.73%	1.04%	23.79%	35.20%	3,756
MORRIS	52.11%	11.87%	0.84%	15.48%	19.70%	2,120
OCEAN	54.35%	4.57%	0.25%	19.00%	21.82%	2,846
PASSAIC	80.62%	2.90%	0.90%	4.82%	10.76%	3,387
SALEM	71.02%	1.25%	0.18%	3.58%	23.97%	547
SOMERSET	41.50%	7.76%	1.12%	10.60%	39.02%	1,597
SUSSEX	21.42%	5.91%	0.32%	2.16%	70.18%	1,421
UNION	47.62%	10.65%	0.54%	6.98%	34.21%	4,215
WARREN	82.64%	1.16%	0.50%	2.15%	13.55%	579

#### NJ HPSE: 2022 Discharges by Destination Category

\*Discrete discharge data not available for Bergen & Middlesex Counties at time of writing.

Table: OHP/DCA + Source: NJ HMIS

# **3a. System utilization - Discharges to Housing - by County**

#### **Discharges to Housing Destinations**

As Table 8 shows, below, shows the percentage of individuals in each county who have reached a temporary or permanent housing situation in 2022 and 2021, as well as the year-over-year change.

Some counties experienced an increase in the percentage of individuals reaching a housing situation upon exit, while others experienced a decrease. Salem County had the highest year-on-year change, with a 16.87% increase, while Burlington County had the largest decrease, with a 17.99% drop.

As a reminder, this category is inclusive of discharges to temporary housing (e.g., veterans receiving services at DMAVA's Veterans Haven) to market-rate housing obtained by persons formerly the HPSE using their own means and increased income without a subsidy.

#### NJ HPSE: Discharges to Housing Destinations (2021 & 2022)

% of all persons in HPSE discharged from system to housing destinations

COUNTY	Destination: Temporary and Permanent Housing Situations - 2022	Destination: Temporary and Permanent Housing Situations - 2021	YoY Change?
ATLANTIC	61.59%	54.44%	7.15%
BERGEN	*	*	*
BURLINGTON	27.72%	45.71%	-17.99%
CAMDEN	44.4%	52.28%	-7.88%
CAPE MAY	9.53%	18.29%	-8.76%
CUMBERLAND	32.67%	37.85%	-5.18%
ESSEX	29.12%	38.48%	-9.36%
GLOUCESTER	23.1%	24.05%	-0.94%
HUDSON	37.89%	39.45%	-1.56%
HUNTERDON	43.57%	46.79%	-3.21%
MERCER	24.79%	24.43%	0.36%
MIDDLESEX	*	*	*
MONMOUTH	35.2%	42.95%	-7.75%
MORRIS	19.7%	23.43%	-3.73%
OCEAN	21.82%	29.45%	-7.62%
PASSAIC	10.76%	14.62%	-3.86%
SALEM	23.97%	7.1%	16.87%
SOMERSET	39.02%	43.25%	-4.23%
SUSSEX	70.18%	68.55%	1.64%
UNION	34.21%	44.89%	-10.68%
WARREN	13.55%	23.37%	-9.81%

\*Discrete discharge data not available from Bergen & Middlesex Counties at time of report. Table: OHP/DCA - Source: NJ HMIS

Table 8

# **3a. System utilization - Discharges to Housing - by County (con't)**

#### **Discharges to Housing Destinations (con't)**

- Overall, there was an increase in the percentage of individuals who reached a temporary or permanent housing situation from 2021 to 2022.
- Salem County had the highest year-on-year change in the percentage of individuals reaching a housing situation, with a 16.87% increase, while Burlington County had the largest year-on-year decrease, with a 17.99% drop.
- Importantly, as shown in Table 8.1, below, the most common discharge destination is rental housing without ongoing housing subsidies, accounting for 44.73% of discharges. The second most common destination is rental with an other type of on-going subsidy supporting that housing placement (10.9%).

#### NJ HPSE: Distribution of Destinations within Temporary and Permanent Housing Destinations

% of persons discharged to sub-destination within 2022 discharge category.

Destination	% of discharges to Housing Sub-Destination		
Host Home (non-crisis)	0.58%		
Hotel or motel paid for without emergency shelter voucher	3.74%		
Moved from one HOPWA funded project to HOPWA PH	0.01%		
Moved from one HOPWA funded project to HOPWA TH	0.00%		
Owned by client, no ongoing housing subsidy	1.39%		
Owned by client, with ongoing housing subsidy	0.53%		
Permanent housing (other than RRH) for formerly homeless persons	0.81%		
Rental by client in a public housing unit	2.06%		
Rental by client, no ongoing housing subsidy	44.73%		
Rental by client, VASH housing subsidy	1.67%		
Rental by client, with GPD TIP housing subsidy	0.03%		
Rental by client, with HCV voucher (tenant or project based)	4.65%		
Rental by client, with other ongoing housing subsidy	10.90%		
Rental by client, with RRH or equivalent subsidy	3.23%		
Residential project or halfway house with no homeless criteria	0.46%		
Staying or living with family, permanent tenure	6.88%		
Staying or living with family, temporary tenure (e.g., room, apartment or house)	6.49%		
Staying or living with friends, permanent tenure	1.89%		
Staying or living with friends, temporary tenure (e.g., room, apartment or house)	8.04%		
Transitional housing for homeless persons (including homeless youth)	1.92%		

Table: OHP/DCA • Source: NJ HMIS

Table 8.1

# **3a. System utilization - Discharges to Unknown Destination - by County**

#### **Discharges to Unknown Destinations**

As shown in Table 9, below, provides information on the percentage of individuals in each county whose destination is unknown or has no data available in 2022 and 2021, along with the year-on-year change. Some counties experienced a significant decrease in the percentage of individuals with an unknown/no data destination, while others had a significant increase. Burlington County had the highest year-on-year increase, with a 17.85% rise, while Salem County had the highest year-on-year decrease, with a 14.78% drop.

COUNTY	Desintation: Unknown/No data - 2022	Destination: Unknown/no data - 2021	YoY Change?
ATLANTIC	0.14%	19.55%	-19.40%
BERGEN	*	*	*
BURLINGTON	57.55%	39.70%	17.85%
CAMDEN	7.93%		7.93%
CAPE MAY	66.60%	60.76%	5.83%
CUMBERLAND	41.05%	30.02%	11.03%
ESSEX	52.39%	36.23%	16.16%
GLOUCESTER	55.17%	54.78%	0.40%
HUDSON	18.47%	19.89%	-1.42%
HUNTERDON	45.18%	35.73%	9.45%
MERCER	42.64%	36.33%	6.31%
MIDDLESEX	*	*	*
MONMOUTH	32.24%	23.12%	9.12%
MORRIS	52.11%	46.77%	5.34%
OCEAN	54.35%	39.59%	14.77%
PASSAIC	80.62%	72.72%	7.90%
SALEM	71.02%	85.80%	-14.78%
SOMERSET	41.50%	40.06%	1.44%
SUSSEX	21.42%	22.08%	-0.66%
UNION	47.62%	34.40%	13.22%
WARREN	82.64%	69.47%	13.17%

#### NJ HPSE: Discharges to Unknown Destinations (2021 & 2022)

\*Discrete discharge data not available from Bergen & Middlesex Counties at time of report. Table: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

#### Table 9

# **3a. System utilization - Discharges to Homeless Destinations - by County**

#### **Discharges to Homeless Destinations**

Table 10, below, provides information on the percentage of individuals in each county who were discharged to homeless situations in 2022 and 2021, along with the year-on-year change. Some counties experienced a decrease in the percentage of individuals discharged to homeless situations, while others had an increase.

Cape May County had the highest year-on-year increase, with a 15.46% rise, while Gloucester County had the highest year-on-year decrease, with an 8.75% drop. Overall, the changes in the percentage of individuals discharged to homeless situations were relatively small in most counties, with only a few counties experiencing significant year-on-year changes.

COUNTY	Destination: Homeless Situations - 2022	Destination: Homeless Situations - 2021	YoY Change
ATLANTIC	9.33%	9.96%	-0.63%
BERGEN	*	*	*
BURLINGTON	12.66%	9.08%	3.57%
CAMDEN	9.99%	7.80%	2.18%
CAPE MAY	19.16%	3.70%	15.46%
CUMBERLAND	0.90%	1.80%	-0.91%
ESSEX	10.47%	11.54%	-1.07%
GLOUCESTER	1.47%	10.22%	-8.75%
HUDSON	11.61%	10.28%	1.33%
HUNTERDON	3.41%	4.88%	-1.47%
MERCER	6.03%	5.09%	0.94%
MIDDLESEX	*	*	*
MONMOUTH	7.73%	9.72%	-1.99%
MORRIS	11.87%	10.70%	1.17%
OCEAN	4.57%	4.52%	0.06%
PASSAIC	2.90%	4.72%	-1.82%
SALEM	1.25%	1.85%	-0.60%
SOMERSET	7.76%	7.28%	0.47%
SUSSEX	5.91%	7.17%	-1.26%
UNION	10.65%	11.26%	-0.62%
WARREN	1.16%	1.05%	0.10%

#### NJ HPSE: Discharges to Homeless Situations (2021 & 2022)

\*Discrete discharge data not available for Bergen & Middlesex Counties at time of writing. Table: OHP/DCA • Source: NJ HMIS Table 10

# **3b. Population Demographics: Chronic Homelessness**

7,489 distinct persons in-system in 2022 met the HUD criteria for Chronic Homelessness at the time of their admission. This is an increase of 4% (2021: 7183 distinct persons) over the number of persons meeting the HUD Chronic Homelessness criteria in-system at their time of admission in 2021.

County	# of distinct persons chronically homeless at time of admission (2022)	# of distinct persons in-system (2022)	% of persons chronically homeless in- system?	Chronicity Ranking
ATLANTIC	501	4,362	11%	2
BERGEN	45	2,348	2%	19
BURLINGTON	313	7,398	4%	14
CAMDEN	667	6,567	10%	4
CAPE MAY	44	1,008	4%	13
CUMBERLAND	53	3,577	1%	21
ESSEX	1,257	22,715	6%	7
GLOUCESTER	151	3,295	5%	11
HUDSON	1,580	15,339	10%	3
HUNTERDON	33	736	4%	12
MERCER	467	9,653	5%	10
MIDDLESEX	178	4,820	4%	17
MONMOUTH	620	11,969	5%	9
MORRIS	411	3,560	12%	1
OCEAN	218	4,046	5%	8
PASSAIC	709	12,354	6%	5
SALEM	10	649	2%	20
SOMERSET	78	2,001	4%	15
SUSSEX	88	1,573	6%	6
UNION	262	7,005	4%	16
WARREN	18	692	3%	18

#### NJ HPSE - Chronic Homelessness - 2022

21

Rank - Highest to Lowest % of

Chronicity

1

Table: DCA/OHP · Source: NJ HMIS

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Table 11
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# **3b. Population Demographics: Chronic Homelessness (con't)**

#### Chronic Homelessness - Year-over-Year Change

As Tables 11, above, and 12, right, show, across the State there was an overall increase in the number of distinct persons that were considered chronically homeless at time of admission insystem in 2022.

In 12 out of the 21 counties in the State, the number of persons that were chronically homeless and were receiving services increased from that same period the year prior.

This increase was most acutely observed in Salem County, with a 67% increase from 2021 in the number of persons meeting chronic homeless criteria in-system in 2022.

In the 9 counties where chronic homelessness decreased from 2021, the largest observed decrease took place in Cumberland County, with a decrease of 25% in chronic homelessness from 2021.

#### NJ HPSE - YoY Change - Chronic Homelessness (2021-2022)



67

County	# of distinct persons in- system - chronically homeless - 2022	# of distinct persons in- system - chronically homeless - 2021	YoY Change (# of persons chronically homeless in- system at time of admission)	% Change - YoY
ATLANTIC	501	428	73	17%
BERGEN	45	38	7	18%
BURLINGTON	313	302	11	4%
CAMDEN	667	597	70	12%
CAPE MAY	44	57	-13	-23%
CUMBERLAND	53	71	-18	-25%
ESSEX	1,257	1	-20	-2%
GLOUCESTER	151	137	14	10%
HUDSON	1,580	1	141	10%
HUNTERDON	33	34	-1	-3%
MERCER	467	535	-68	-13%
MIDDLESEX	178	170	8	5%
MONMOUTH	620	548	72	13%
MORRIS	411	352	59	17%
OCEAN	218	172	46	27%
PASSAIC	709	672	37	6%
SALEM	10	6	4	67%
SOMERSET	78	96	-18	-19%
SUSSEX	88	91	-3	-3%
UNION	262	305	-43	-14%
WARREN	18	19	-1	-5%

Table: DCA/OHP • Source: NJ HMIS

#### Table 12

# **3b. Population Demographics: Unsheltered Homelessness**

Across the State, **11,265** distinct persons were experiencing unsheltered homelessness and were engaged by service providers to effect entry into shelter. This is a 20% increase over the number of distinct persons experiencing unsheltered homelessness in 2021 (**9,358**).

#### NJ HPSE - Unsheltered Homelessness (2022)

# of distinct persons receiving services for unsheltered homelessness in 2022.

County	# of distinct persons receiving services for unshletered homelessness (2022)	Rank (# of distinct persons experiencing unsheltered homelessness)	
ATLANTIC	214	11	
BERGEN	51	13	
BURLINGTON	3	21	
CAMDEN	1,888	2	
CAPE MAY	4	20	
CUMBERLAND	19	18	
ESSEX	4,506	1	
GLOUCESTER	146	12	
HUDSON	1,794	3	
HUNTERDON	22	17	
MERCER	426	5	
MIDDLESEX	281	9	
MONMOUTH	468	4	
MORRIS	244	10	
OCEAN	345	8	
PASSAIC	389	7	
SALEM	40	14	
SOMERSET	27	16	
SUSSEX	15	19	
UNION	394	6	
WARREN	32	15	

Table: DCA/OHP • Source: NJ HMIS

lable 13

# **3b. Population Demographics: Unsheltered Homelessness (con't)**

Table 13, above, shows the distribution of individuals encountered by county. Importantly, the census of unsheltered persons will naturally be higher in some communities given both the targeted services designed to search for and engage these neighbors being more robust in some communities (e.g., in Atlantic, Essex, Camden, Hudson, and Passaic Counties) and the higher visibility and likelihood of engagement in urban settings.

In 12 of the 21 counties, the number of persons experiencing unsheltered homelessness increased from 2021. As Table 14 demonstrates, below, eight of the 12 counties (Atlantic, Essex, Middlesex, Monmouth, Ocean, Somerset, Union, and Warren) saw increases beyond that of the overall State increase (20%) in unsheltered homelessness.

County	# of distinct persons experiencing unshletered homelessness - 2022	# of distinct persons experiencing unshletered homelessness - 2021	YoY Increase (# of persons)	% increase - YoY
ATLANTIC	214	98	116	118%
BERGEN	51	63	-12	-19%
BURLINGTON	З	8	-5	-62%
CAMDEN	1888	1,829	59	3%
CAPE MAY	4	9	-5	
CUMBERLAND	19	38	-19	-50%
ESSEX	4506	3,307	1,199	36%
GLOUCESTER	146	148	-2	-1%
HUDSON	1794	1,626	168	10%
HUNTERDON	22	20	2	10%
MERCER	426	381	45	12%
MIDDLESEX	281	224	57	25%
MONMOUTH	468	362	106	29%
MORRIS	244	292	-48	-16%
OCEAN	345	256	89	35%
PASSAIC	389	411	-22	-5%
SALEM	40	43	-3	-7%
SOMERSET	27	1	26	2600%
SUSSEX	15	21	-6	-29%
UNION	394	231	163	71%
WARREN	32	26	6	23%

#### NJ HPSE - Unsheltered Homelessness - By County - YoY Change (2021 - 2022)

Table: DCA/OHP • Source: NJ HMIS

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Table 14
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# **3b. Population Demographics: Sheltered Homelessness in Emergency Shelters**

In 2022, 16,566 distinct persons experienced sheltered homelessness in emergency shelters and received at least one episode of services in the HPSE, up 17% from 2021 (14,146 distinct persons). Additionally, in 2022, emergency shelter and safe haven programs provided 39,057 service encounters to these persons, also up 17% from 2021, where 33,512 service encounters were observed. Sheltered homelessness data for Bergen County was not available at the time of report.

Sheltered homelessness in emergency shelters refers to a situation where a person experiencing homelessness has access to some form of emergency housing, such as a homeless shelter, emergency motel voucher, or safe haven. Sheltered homelessness in emergency shelters is distinct from unsheltered homelessness, which refers to a situation where a person does not have access to any form of temporary or emergency housing and is living on the streets or in other places not intended for human habitation.

County	# of distinct persons (2022)	# of distinct persons (2021)	YoY Increase - # of distinct persons	% increase - YoY
ATLANTIC	702	621	81	13%
BURLINGTON	1,370	1,129	241	21%
CAMDEN	1,385	1,246	139	11%
CAPE MAY	365	269	96	36%
CUMBERLAND	599	458	141	31%
ESSEX	3,722	3,542	180	5%
GLOUCESTER	306	277	29	10%
HUDSON	2,470	1,860	610	33%
HUNTERDON	156	111	45	41%
MERCER	1,799	1,534	265	17%
MIDDLESEX	434	425	9	2%
MONMOUTH	691	530	161	30%
MORRIS	708	598	110	18%
OCEAN	500	398	102	
PASSAIC	527	572	-45	-8%
SALEM	36	9	27	300%
SOMERSET	305	228	77	34%
SUSSEX	151	100	51	51%
UNION	841	793	48	6%
WARREN	51	64	-13	-20%

#### NJ HPSE - Sheltered Homelessness - By County (2022 & 2021)

Table: DCA/OHP · Source: NJ HMIS · Created with Datawrapper

YoY % increase

25%

#### Table 15

# **3b. Population Demographics: Sheltered Homelessness in Emergency Shelters (con't)**

#### % increase - # of encounters % increase - # of encounters ATLANTIC 117% BURLINGTON 32% CAMDEN 15% CAPE MAY 38% CUMBERLAND 27% ESSEX 8% GLOUCESTER 7% HUDSON 24% HUNTERDON MERCER 1% -2% MIDDLESEX MONMOUTH 47% MORRIS 5% OCEAN PASSAIC -11% SALEM 300% SOMERSET SUSSEX UNION -10% WARREN

NJ HPSE - YoY Change - # of Encounters - Sheltered Homelessness - 2022

Chart: DCA/OHP · Source: NJ HMIS · Created with Datawrapper

Fig. 2

Table 15 and Figure 2, above, shows the by County breakout of sheltered homelessness and service encounters in 2022.

Importantly, shelters in New Jersey provide a range of services to people experiencing homelessness, often including temporary housing, meals, access or referral to healthcare and social services, and case management. Emergency shelter programs in the NJ HPSE are operated by non-profit organizations, faith-based groups, and some government entities. Throughout the State, emergency shelter programs are targeted at specific populations, such as families, youth, or individuals with specific needs, such as physical or mental health issues.

# **3b. Population Demographics: Sheltered Homelessness in Emergency Shelters (con't)**

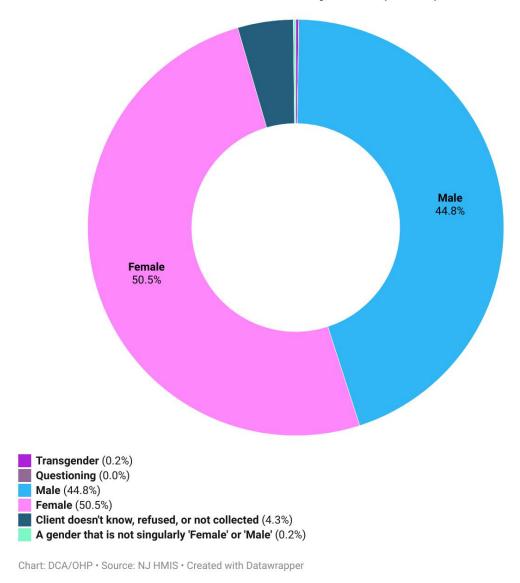
Table 15 and Figure 2, above, shows the by County breakout of sheltered homelessness and service encounters in 2022.

While shelters in New Jersey provide a vital source of support and assistance for people experiencing homelessness, as observed in bed count inventories in 2022, they are often over capacity and may not be able to meet the full range of needs of those who rely on them.

In all cases, sheltered homelessness is a temporary solution, and as is evidenced in the year-over-year increase from 2021 in sheltered homelessness, people who are experiencing sheltered homelessness often face challenges in transitioning to more stable housing.

## **3b. Population Demographics: Gender**

In 2022, 60,570 distinct persons in-system in the HPSE identified as Female, 53,749 as Male, 272 as Transgender, 220 as a gender that is not singularly "Female" or "Male", and 9 identified as Questioning. Gender data was not collected, refused, or not known for 5,185 persons.



#### NJ HPSE - Gender - Persons In-system (2022)

Fig. 3

Figure 4, right, and Table 16, next page, shows the distribution of gender categories across various counties in New Jersey. It includes the percentages of females, males, TQIA+ individuals, and those who did not provide information, refused, or had unknown gender data.

For instance, in Atlantic County, 49.33% identified as female, 49.46% as male, 0.34% as TQIA+, and 0.87% had unknown or unreported gender data.

The data follows a similar pattern across all counties in New Jersey, with varying percentages for each gender category.

NJ HPSE: In-system Gender Distribution - By County Male Female Client doesn't know, refused, or not collected TQIA+ BURLINGTON ATLANTIC BERGEN CUMBERLAND CAMDEN CAPE MAY ESSEX GLOUCESTER HUDSON 7% HUNTERDON MERCER MIDDLESEX 5% MONMOUTH MORRIS OCEAN 12% PASSAIC SALEM SOMERSET 12% SUSSEX UNION WARREN Chart: OHP/DCA · Source: NJ HMIS · Created with Data Fig. 4

#### NJ HPSE: In-system Gender Distribution - By County

% of missing gender data

19.1%

0.9%

County	Female	Male	TQIA+	Client doesn't know, refused, or not collected
ATLANTIC	49%	49%	0%	1%
BERGEN	45%	44%	0%	11%
BURLINGTON	49%	43%	1%	8%
CAMDEN	50%	48%	0%	1%
CAPE MAY	44%	50%	1%	6%
CUMBERLAND	56%	42%	0%	2%
ESSEX	48%	43%	1%	7%
GLOUCESTER	46%	35%	1%	19%
HUDSON	42%	54%	0%	4%
HUNTERDON	47%	46%	1%	7%
MERCER	55%	42%	0%	2%
MIDDLESEX	52%	41%	1%	7%
MONMOUTH	54%	44%	0%	1%
MORRIS	44%	50%	1%	5%
OCEAN	49%	41%	0%	9%
PASSAIC	53%	43%	0%	3%
SALEM	51%	37%	0%	12%
SOMERSET	41%	41%	0%	18%
SUSSEX	55%	41%	0%	4%
UNION	55%	41%	0%	3%
WARREN	47%	41%	0%	12%

TQIA+ = Transgender, Questioning, Intersex, A gender not singularly "Male" or "Female" Table: OHP/DCA - Source: NJ HMIS - Created with Datawrapper

#### Table 16

There are several interesting aspects of 2022 NJ HPSE gender data:

- The percentages of females and males in each county tend to be relatively close, indicating a balanced distribution of gender across New Jersey's counties.
- TQIA+ representation varies across counties, though it remains a small percentage in each case. This could reflect differences in TQIA+ populations or reporting practices across regions.
- The percentage of clients who did not provide information, refused, or had unknown gender data varies significantly among counties. For example, Gloucester (19.05%) and Somerset (17.72%) have much higher rates compared to Union (3.23%) and Monmouth (1.26%). This could indicate varying levels of data collection practices, privacy concerns, or community engagement in different counties.

Overall, the data provides insights into the gender distribution across New Jersey counties and highlights potential areas for further investigation regarding TQIA+ representation and data collection practices.

NJ HPSE: Gender Distribution Across Project Category -Statewide

.34% 58.34%		
Project Type Accessed	Gender	
Emergency Shelter	Female	40.73%
	Male	58.34%
	Client doesn't know, refused, or not collected	0.34%
	TQIA+	0.58%
Permanent & Transitional Housing	Female	48.93%
	Male	48.88%
	Client doesn't know, refused, or not collected	1.65%
	TQIA+	0.53%
Prevention of Homelessness	Female	54.45%
	Male	42.33%
	Client doesn't know, refused, or not collected	2.85%
	TQIA+	0.37%
Street Outreach for Unsheltered Homelessness	Female	
	Male	51.78%
	Client doesn't know, refused, or not collected	19.92%
	TQIA+	0.35%

TQIA+ = Transgender, Questioning, Intersex, A gender that is not singularly "Male" or "Female" Table: OHP/DCA - Source: NJ HMIS - Created with Datawrapper

#### Table 17

In Table 17, above, the gender distribution across various homelessness programs reveals some interesting points:

With Emergency Shelter, Males represent a higher proportion (58.34%) compared to females (40.73%). TQIA+ individuals account for a small portion (0.58%) of overall census.

In Permanent & Transitional Housing category, female (48.93%) and male (48.88%) representation is almost equal. TQIA+ individuals make up a small fraction (0.53%) of the total census.

For Prevention of Homelessness projects, females have a higher proportion (54.45%) compared to males (42.33%).

With Street Outreach for Unsheltered Homelessness projects, males have a higher proportion (51.78%) compared to females (27.95%). Additionally, a significant percentage of individuals (19.92%) have unknown, refused, or uncollected gender information.

These insights suggest that males are more likely to access emergency shelters and street outreach programs, while females have a higher representation in prevention of homelessness programs. The gender distribution in permanent & transitional housing programs is nearly equal between males and females. TQIA+ individuals consistently represent a small percentage across all program types in the aggregate.

Figure 5, below, presents the percentage of each gender category accessing different homelessness programs:

#### Insights include:

- Men are most likely to receive help through street outreach programs for those experiencing unsheltered homelessness.
- Women are more likely to participate in programs aimed at preventing homelessness compared to other groups.
- TQIA+ individuals have the highest rate of accessing both emergency shelters and permanent or transitional housing programs.

These observations highlight the different needs and support services accessed by various gender categories in addressing homelessness in New Jersey.

# Prevention of Homelessness Permanent & Transitional Housing Emergency Shelter Street Outreach for Unsheltered Homelessness

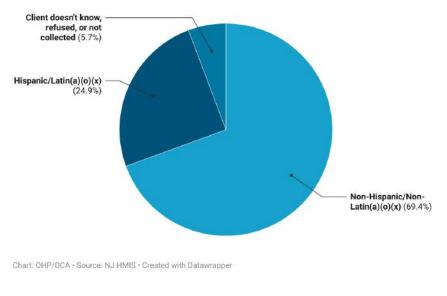
#### NJ HPSE: Gender category access across different homelessness project types

Chart: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

Fig. 5

# **3b. Population Demographics: Ethnicity**

In 2022, 30,069 distinct persons affirmed Hispanic/Latin(a)(o)(x) ethnicity, 83,942 persons declined Hispanic/Latin(a)(o)(x) ethnicity, and 6,922 did not know, refused, or the data were not collected.







Across the State, 25% of persons in the HPSE in 2022 affirmed Hispanic and/or Latin(a)(o)(x) ethnicity.

As Table 19 shows, next page, the percentage of Hispanic/Latin(a)(o)(x) populations varies significantly across counties, with the highest representation in Monmouth (45.13%) and the lowest in Salem (9.76%).

Non-Hispanic/Non-Latin(a)(o)(x) populations dominate in all counties, with the highest percentage in Sussex (80.95%) and the lowest in Monmouth (51.98%).

The percentage of clients with uncollected, refused, or unknown ethnicity data also varies across counties. Gloucester (21.30%) and Ocean (13.28%) have relatively higher rates, while Hudson (3.15%) and Sussex (3.31%) exhibit the lowest rates.

# **3b. Population Demographics: Ethnicity (con't)**

#### NJ HPSE: In-system (2022) Ethnicity Distribution across Counties

% affirming Hispanic/Latin(a) (o)(x) ethnicity

45.13%

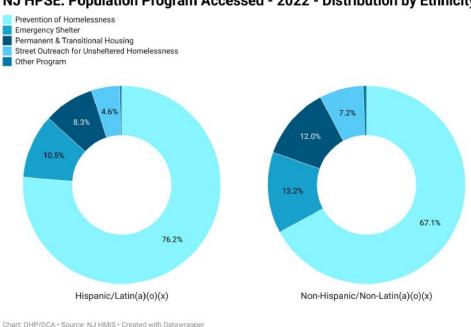
9.63%

	County	Hispanic/Latin(a)(o)(x)	Non- Hispanic/Non- Latin(a)(o)(x)	Client doesn't know, refused, or not collected
1	ATLANTIC	15.31%	83.98%	0.70%
2	BERGEN	25.72%	62.16%	12.12%
3	BURLINGTON	10.87%	85.22%	3.91%
4	CAMDEN	17.85%	78.09%	4.06%
5	CAPE MAY	14.69%	78.01%	7.30%
6	CUMBERLAND	33.15%	62.11%	4.74%
7	ESSEX	13.75%	75.20%	11.05%
8	GLOUCESTER	9.63%	69.07%	21.30%
9	HUDSON	33.44%	63.41%	3.15%
10	HUNTERDON	14.75%	78.82%	6.43%
11	MERCER	21.29%	72.83%	5.87%
12	MIDDLESEX	26.77%	64.78%	8.46%
13	MONMOUTH	45.13%	51.98%	2.89%
14	MORRIS	26.27%	68.00%	5.73%
15	OCEAN	16.67%	70.05%	13.28%
16	PASSAIC	30.76%	63.70%	5.54%
17	SALEM	9.76%	74.85%	15.40%
18	SOMERSET	17.43%	75.67%	6.90%
19	SUSSEX	15.74%	80.95%	3.31%
20	UNION	33.00%	62.62%	4.38%
21	WARREN	11.80%	77.70%	10.50%

Table: OHP/DCA · Source: NJ HMIS · Created with Datawrapper

Table 19

# **3b. Population Demographics: Ethnicity (con't)**



NJ HPSE: Population Program Accessed - 2022 - Distribution by Ethnicity

NJ HMIS • Created with Datawrapper

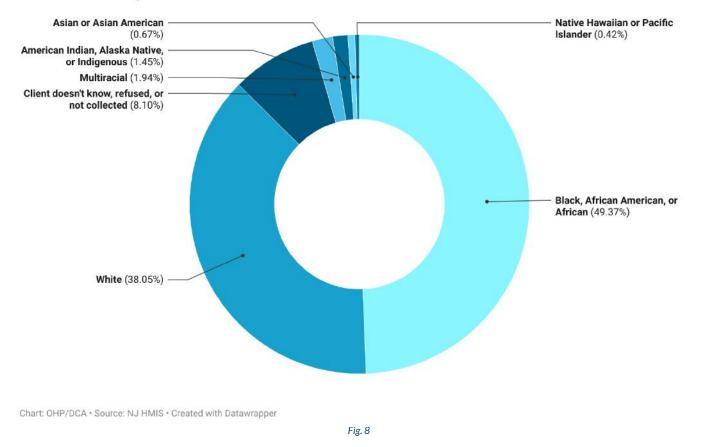


Figure 5 presents the percentage distribution of Hispanic/Latin(a)(o)(x) and Non-Hispanic/Non-Latin(a)(o)(x) populations accessing different types of homelessness programs. The programs include Emergency Shelter, Other Program, Permanent & Transitional Housing, Prevention of Homelessness, and Street Outreach for Unsheltered Homelessness.

Some key observations from the dataset are:

- For both Hispanic/Latin(a)(o)(x) and Non-Hispanic/Non-Latin(a)(o)(x) populations, the majority accessed services for the Prevention of Homelessness (76.23% and 67.07% respectively).
- A higher percentage of Non-Hispanic/Non-Latin(a)(o)(x) individuals accessed Emergency Shelter (13.23%) compared to Hispanic/Latin(a)(o)(x) individuals (10.49%).
- Permanent & Transitional Housing services were utilized more by Non-Hispanic/Non-Latin(a)(o)(x) individuals (11.96%) than Hispanic/Latin(a)(o)(x) individuals (8.32%).
- Street Outreach for Unsheltered Homelessness was accessed more by Non-Hispanic/Non-Latin(a) (o)(x) individuals (7.18%) than Hispanic/Latin(a)(o)(x) individuals (4.63%).
- The "Other Program" category had the least utilization for both ethnic groups, with 0.55% for Non-Hispanic/Non-Latin(a)(o)(x) and 0.33% for Hispanic/Latin(a)(o)(x).

# **3b. Population Demographics: Race**



#### NJ HPSE: In-system 2022 - Racial Distribution - Statewide

Figure 8 above, presents the percentage distribution of different racial groups within the State's homelessness prevention & services ecosystem. The racial categories include American Indian, Alaska Native, or Indigenous; Asian or Asian American; Black, African American, or African; Client doesn't know, refused, or not collected; Multiracial; Native Hawaiian or Pacific Islander; and White.

#### Key observations from the dataset are:

- The largest racial group accessing HPSE programs is Black, African American, or African, representing 49.37% of the total population.
- The second-largest racial group is White, with 38.05% of the total population.
- The racial groups with the smallest representation are Asian or Asian American (0.67%) and Native Hawaiian or Pacific Islander (0.42%).
- The Multiracial group accounts for 1.94% of the population, while American Indian, Alaska Native, or Indigenous individuals represent 1.45%.
- 8.10% of the data falls under the "Client doesn't know, refused, or not collected" category.

# **3b. Population Demographics: Race**

#### NJ HPSE: Racial distribution of individuals accessing programs

% of total in-system population in county HPSE

80.2%

0.0%

County	American Indian, Alaska Native, or Indigenous	Asian or Asian American	Black, African American, or African	Client doesn't know, refused, or not collected	Multiracial	Native Hawaiian or Pacific Islander	White
ATLANTIC	1.04%	1.52%	51.85%	1.40%	3.37%	0.29%	40.52%
BERGEN	1.01%	1.72%	34.71%	20.80%	2.77%	0.50%	38.49%
BURLINGTON	0.89%	0.51%	52.36%	9.39%	4.04%	0.51%	32.29%
CAMDEN	1.31%	0.56%	59.71%	4.71%	1.77%	1.40%	30.55%
CAPE MAY	1.07%	0.20%	16.31%	8.89%	3.52%	0.10%	69.92%
CUMBERLAND	0.96%	0.16%	44.40%	4.67%	2.61%	0.49%	46.69%
ESSEX	1.91%	0.26%	70.82%	12.02%	1.46%	0.56%	12.97%
GLOUCESTER	0.57%	0.27%	36.45%	21.45%	2.16%	0.27%	38.82%
HUDSON	1.73%	1.47%	45.50%	5.07%	1.11%	0.26%	44.86%
HUNTERDON	0.40%	1.34%	24.06%	8.42%	1.74%	0.40%	63.64%
MERCER	0.73%	0.52%	62.90%	7.91%	1.03%	0.33%	26.58%
MIDDLESEX	1.45%	1.57%	44.41%	11.06%	2.17%	0.22%	39.12%
MONMOUTH	0.87%	0.40%	29.20%	3.93%	1.99%	0.13%	63.47%
MORRIS	1.20%	1.14%	27.38%	9.77%	2.45%	0.54%	57.51%
OCEAN	0.77%	0.29%	22.93%	14.53%	2.70%	0.22%	58.56%
PASSAIC	2.72%	0.57%	45.08%	8.97%	2.02%	0.46%	40.18%
SALEM	0.76%		36.23%	16.89%	2.28%		43.84%
SOMERSET	0.49%	1.09%	42.26%	21.97%	1.88%	0.20%	32.11%
SUSSEX	0.44%	0.19%	12.19%	4.66%	2.30%	0.06%	80.16%
UNION	1.44%	0.39%	53.88%	7.95%	1.36%	0.24%	34.74%
WARREN	0.57%	0.29%	19.20%	14.33%	1.58%		64.04%

Table: OHP/DCA · Source: NJ HMIS · Created with Datawrapper

Table 20

Table 20, above, presents the racial distribution of individuals accessing the HPSE in various counties in New Jersey.

Some interesting observations from this data are:

- Essex County has the highest percentage of Black, African American, or African individuals accessing homelessness programs (70.82%).
- Sussex County has the highest percentage of White individuals accessing homelessness programs (80.16%).
- Passaic County has the highest percentage of American Indian, Alaska Native, or Indigenous individuals accessing homelessness services programs (2.72%).

Middlesex County has the highest percentage of Asian or Asian American individuals accessing homelessness programs (1.57%).

Bergen County has the highest percentage of Client doesn't know, refused, or not collected responses (20.80%).

Burlington County has the highest percentage of Multiracial individuals accessing homelessness programs (4.04%).

Camden County has the highest percentage of Native Hawaiian or Pacific Islander individuals accessing homelessness programs (1.40%).

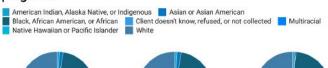
Salem County has a relatively high percentage of individuals with unknown or uncollected race data (16.89%), which might indicate a need for better data collection or reporting in this county.

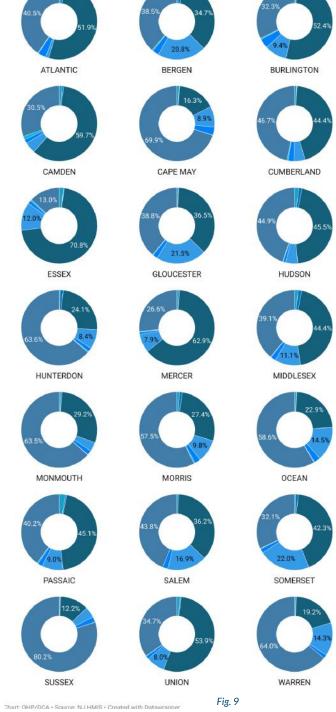
Hudson County has a relatively balanced distribution between White (44.86%) and Black, African American, or African (45.50%) individuals accessing homelessness programs, reflecting a more diverse population in need of support.

Cape May County a high percentage of White individuals accessing homelessness programs (69.92%) but a very low percentage of Black, African American, or African individuals accessing these programs (16.31%). This contrasts with Essex County, which has a much higher percentage of Black, African American, or African individuals accessing homelessness programs (70.82%) and a lower percentage of White individuals (12.97%).

Figure 9, right, depicts these distributions graphically.

#### NJ HPSE: Racial distribution of individuals accessing programs





Race	Type of Project Accessed	% of total population in HPSE accessing service	% of racial category accessing service in 2022
American Indian, Alaska Native, or Indigenous	Street Outreach for Unsheltered Homelessness	1.83%	11.13%
	Prevention of Homelessness	1.22%	61.48%
	Permanent & Transitional Housing	1.32%	10.27%
	Emergency Shelter	1.89%	17.12%
Asian or Asian American	Street Outreach for Unsheltered Homelessness	0.59%	7.51%
	Prevention of Homelessness	0.68%	72.20%
	Permanent & Transitional Housing	0.33%	5.38%
	Emergency Shelter	0.79%	14.91%
Black, African American, or African	Street Outreach for Unsheltered Homelessness	45.67%	7.48%
	Prevention of Homelessness	48.54%	65.87%
	Permanent & Transitional Housing	61.63%	12.87%
	Emergency Shelter	56.58%	13.78%
Client doesn't know, refused, or not collected	Street Outreach for Unsheltered Homelessness	25.72%	29.06%
	Prevention of Homelessness	6.42%	60.16%
	Permanent & Transitional Housing	3.42%	4.93%
	Emergency Shelter	3.48%	5.85%
Multiracial	Street Outreach for Unsheltered Homelessness	0.78%	3.46%
	Prevention of Homelessness	1.92%	70.27%
	Permanent & Transitional Housing	1.99%	11.19%
	Emergency Shelter	2.29%	15.08%
Native Hawaiian or Pacific Islander	Street Outreach for Unsheltered Homelessness	0.29%	5.97%
	Prevention of Homelessness	0.34%	58.77%
	Permanent & Transitional Housing	0.52%	13.56%
	Emergency Shelter	0.71%	21.70%
White	Street Outreach for Unsheltered Homelessness	25.11%	5.53%
	Prevention of Homelessness	40.87%	74.60%
	Permanent & Transitional Housing	30.79%	8.65%
	Emergency Shelter	34.26%	11.23%

#### NJ HPSE: Utilization of various services related to homelessness across different racial categories

Table: OHP/DCA + Source: NJ HMIS + Created with Datawrapper

Table 21

Table 21, above, provides information on the utilization of various services related to homelessness across different racial categories.

The dataset presents two key metrics for each service and racial group:

- % of total population accessing service: This percentage represents the proportion of a particular racial/ethnic group accessing a specific service relative to the total population accessing that service.
- % of racial category accessing service: This percentage represents the proportion of a particular racial/ethnic group accessing a specific service relative to the total population of that racial/ethnic group.

# **3b. Population Demographics: Race (con't)**

From the data in Table 21 (previous page), we can draw several insights:

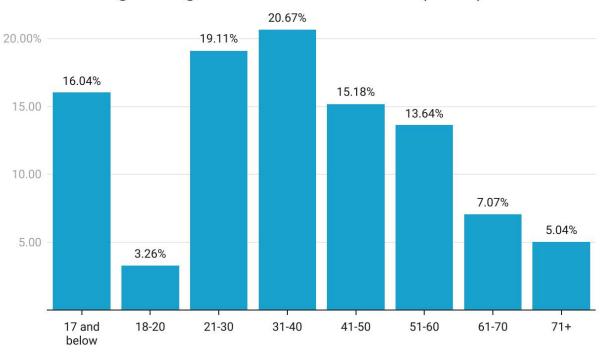
- Different racial groups have varying levels of access to services related to homelessness, highlighting disparities in service utilization.
- White individuals have the highest percentage of access to Prevention of Homelessness (74.60%) and are the most represented group in this service category. However, they have lower access percentages in other categories, such as Street Outreach for Unsheltered Homelessness (5.53%) and Permanent & Transitional Housing (8.65%).
- Black, African American, or African individuals have higher access percentages across most service categories, particularly in Permanent & Transitional Housing (12.87%) and Emergency Shelter (13.78%). However, they have a lower percentage of access to Prevention of Homelessness (65.87%) compared to White individuals.
- Asian or Asian American individuals generally have low service utilization percentages across all categories, with the highest being in Prevention of Homelessness (72.20%). This could indicate a lack of culturally appropriate services or other barriers to access for this group.
- American Indian, Alaska Native, or Indigenous individuals show relatively higher access percentages in Emergency Shelter (17.12%) and Street Outreach for Unsheltered Homelessness (11.13%), but lower percentages in Prevention of Homelessness (61.48%) and Permanent & Transitional Housing (10.27%).
- Native Hawaiian or Pacific Islander individuals have the lowest representation among all racial groups, with the highest percentage of access in the Prevention of Homelessness category (58.77%).
- Multiracial individuals have the highest percentage of access to Prevention of Homelessness (70.27%) among all categories, but lower access percentages in other categories such as Emergency Shelter (15.08%) and Permanent & Transitional Housing (11.19%).
- There is a significant portion of data where the client's race is unknown, refused, or not collected, particularly in the Street Outreach for Unsheltered Homelessness category (29.06%). This highlights the need for better data collection practices to understand and address the needs of different racial/ethnic groups experiencing unsheltered homelessness in the State.

# **3b. Population Demographics: Race (con't)**

In addition to the insights mentioned previously, we can also draw the following insights from the dataset shown in Table 21 (see page 55):

- In the Street Outreach for Unsheltered Homelessness category, Black, African American, or African individuals have the highest percentage of access (7.48%), while Multiracial individuals have the lowest (3.46%).
- Asian or Asian American individuals have a relatively high percentage of access to Prevention of Homelessness (72.20%), but they have lower access percentages in other categories, such as Permanent & Transitional Housing (5.38%) and Emergency Shelter (14.91%).
- Native Hawaiian or Pacific Islander individuals have a higher percentage of accessing Emergency Shelter (21.70%) compared to their access in other categories, such as Street Outreach for Unsheltered Homelessness (5.97%) and Permanent & Transitional Housing (13.56%).
- The dataset shows that different racial groups have varying needs when it comes to addressing homelessness, with some groups having a higher demand for prevention services, while others may require more support in terms of emergency shelters or permanent and transitional housing.
- Overall, there seems to be a higher percentage of access to Prevention of Homelessness services across all racial groups in New Jersey, indicating that there may be a stronger focus on preventing homelessness rather than addressing the immediate needs of those who are already homeless.





### NJ HPSE: Age Range at time of admission (2022)

Chart: OHP/DCA · Source: NJ HMIS · Created with Datawrapper

Fig. 10

Figure 10, above, represents the age distribution of individuals at the time of admission to homelessness-related services in 2022. It shows the percentage of individuals within each age range accessing these services.

Due to unique services available to persons aged 18-20 in the HPSE (e.g., permanent and transitional housing programs for aging-out foster system children), the range presented above, and following, is not uniformly sized,

### In summary:

17 and below: 16.04% of the individuals accessing services are aged 17 or younger.\* 18-20: 3.26% of the individuals accessing services are aged between 18 and 20 years old. 21-30: 19.11% of the individuals accessing services are aged between 21 and 30 years old. 31-40: 20.67% of the individuals accessing services are aged between 31 and 40 years old. 41-50: 15.18% of the individuals accessing services are aged between 41 and 50 years old. 51-60: 13.64% of the individuals accessing services are aged between 51 and 60 years old. 61-70: 7.07% of the individuals accessing services are aged between 61 and 70 years old. 71+: 5.04% of the individuals accessing services are aged 71 years old or older.\*\*

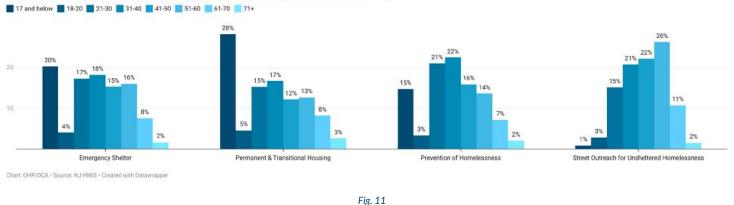
\* This figure includes both children that were members of households experiencing homelessness (or at risk of homelessness) and unaccompanied youth (see Family demographics in later pages).

\*\*Due to default age entries for Street Outreach programs defaulting to 121 years old, persons having this age value (121) were excluded from this calculation.

# **3b. Population Demographics: Age (con't)**

Some insights that can be drawn from Figure 10 include:

- The age groups with the highest percentage of individuals accessing services in 2022 are 31-40 years old (20.67%) and 21-30 years old (19.11%).
- The age group with the lowest percentage of individuals accessing services is 18-20 years old, with only 3.26%.
- A significant percentage of individuals accessing services are minors (17 and below), at 16.04%.
- There is a steady decrease in the percentage of individuals accessing services as age increases, from the 31-40 age group onwards.



### NJ HPSE: % of population in service type by Age Range (Admitted in 2022)

Figure 11, above, presents the percentage of individuals in each age group accessing different types of homelessness-related services

Some insights from this dataset include:

- The highest percentage of individuals aged 17 and below access Permanent & Transitional Housing (28.14%), followed by Emergency Shelter (20.23%).
- Individuals aged 31-40 are the most likely to access Prevention of Homelessness services (22.41%).
- For individuals aged 41-60, Street Outreach for Unsheltered Homelessness is the most accessed service, with 22.09% for the 41-50 age group and 26.19% for the 51-60 age group.

• In general, the percentage of individuals accessing Emergency Shelter, Permanent & Transitional Housing, and Prevention of Homelessness services decreases as age increases, especially for individuals aged 61 and above.

# **3b. Population Demographics: Age (con't)**

# NJ HPSE: % of service type accessed by individuals in each age group (2022 Admissions)

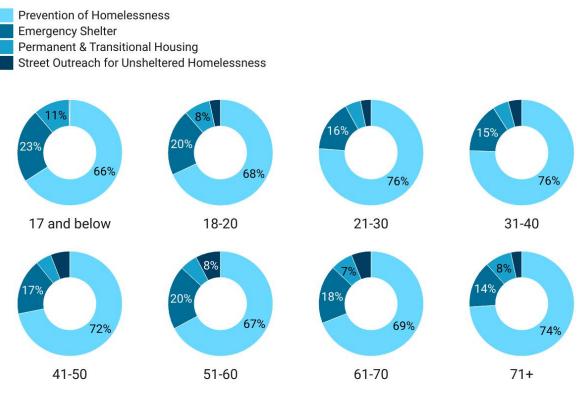


Chart: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

### Fig. 12

Figure 12, above, presents the distribution of services accessed by different age groups. Some insights from these data include:

• The majority of individuals in every age group access Prevention of Homelessness services, with the highest percentage (76.22%) in the 21-30 age group.

• Emergency Shelter services are most accessed by individuals aged 17 and below (22.73%), followed by the 51-60 age group (19.73%).

• Permanent & Transitional Housing services are least accessed by all age groups, with the 71+ age group having the highest percentage (8.21%).

• Street Outreach for Unsheltered Homelessness is the least accessed service by the 17 and below age group (0.22%), but the percentage increases as age increases, peaking at 7.68% for the 51-60 age group.

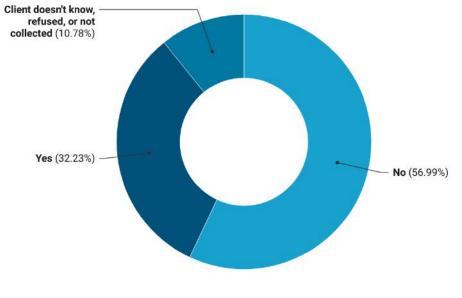
# **3b. Population Demographics: Age (con't)**

In addition to the previous insights, the following observations can be made from the program access distribution data:

- The 21-30 and 31-40 age groups have a very similar distribution across the different services, with both groups primarily utilizing Prevention of Homelessness services (76.22% and 75.62%, respectively). This suggests that programs aimed at preventing homelessness might be particularly accessible to these groups and that a there is a high need for these programs in these age cohorts to prevent homelessness.
- The proportion of individuals using Emergency Shelter services increases steadily with age from the 21-30 age group (15.68%) to the 51-60 age group (19.73%), and then slightly declines for the older age groups. This indicates that middle-aged individuals may more easily access shelter programs, that they have a greater need for immediate shelter services versus other sheltering options, or that younger and older individuals may not be accessing these services due to preferences.
- Street Outreach for Unsheltered Homelessness services usage increases with age up to the 51-60 age group (7.68%), and then declines in the older age groups. This may indicate that older individuals are more likely to experience unsheltered homelessness, but the need for street outreach services may decline as they age further.
- The 17 and below age group relies heavily on Prevention of Homelessness services (65.97%), but also has a relatively high proportion using Emergency Shelter services (22.73%). This suggests that although prevention efforts are essential for this age group, there is still a substantial need for immediate shelter services for both households with children and unaccompanied youth in New Jersey.
- The 71+ age group has a unique distribution of service usage, with a higher percentage accessing Permanent & Transitional Housing services (8.21%) compared to other age groups, and a lower percentage using Emergency Shelter services (14.43%). This may indicate that older adults have a unique housing, prevention, and other services profile that needs to be taken into consideration for program development to reduce the incidence and risk of homelessness within the age cohort.

## **3c. Special Population Characteristics: Disability**

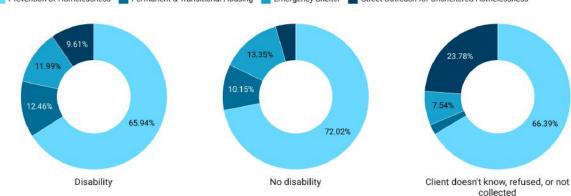
As shown in Figure 15, below, 33.23% of persons receiving services in the NJ HPSE in 2022 had a disabling condition at the time of admission.



### NJ HPSE: % in-system with disabling condition (2022)

Chart: OHP/DCA · Source: NJ HMIS · Created with Datawrapper

Fig. 15



### NJ HPSE: Differences in program access by disability status

📒 Prevention of Homelessness 📕 Permanent & Transitional Housing 📕 Emergency Shelter 📕 Street Outreach for Unsheltered Homelessness

Chart: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

Fig. 16

# **3c. Special Population Characteristics: Disability** (con't)

As shown in Figure 16, above, there are some unique observations regarding the percentage of persons with disabilities, without disabilities, and those with uncollected or unknown disability status across various service categories:

### • Persons with disabilities:

- Most frequently utilize Prevention of Homelessness services (65.94%)
- Least frequently utilize Street Outreach for Unsheltered Homelessness services (9.61%)
- Persons without disabilities:
- Most frequently utilize Prevention of Homelessness services (72.02%)
- Least frequently utilize Street Outreach for Unsheltered Homelessness services (4.47%)
- Persons with uncollected or unknown disability status:
- Most frequently utilize Prevention of Homelessness services (66.39%)
- Least frequently utilize Permanent & Transitional Housing services (2.29%)

Prevention of Homelessness services is the most popular service category for all three groups, however, clients with disabilities have a higher rate of using Emergency Shelter and Permanent & Transitional Housing services compared to clients without disabilities.

Clients with uncollected or unknown disability status have the highest rate of using Street Outreach for Unsheltered Homelessness services compared to the other two groups, indicating both trouble capturing this data point and an opportunity for improvement.

# **3c. Special Population Characteristics: Domestic Violence Survivors**

NJ HPSE: Distributions of persons affirming domestic violence survivorship at time of admission into system (2022)

Gender	Race	Ethnicity	# of people affirming domestic violence survivorship?
Female	American Indian, Alaska Native, or Indigenous	Hispanic/Latin(a)(o)(x)	10
		Non-Hispanic/Non-Latin(a)(o)(x)	23
	Asian or Asian American	Hispanic/Latin(a)(o)(x)	5
		Non-Hispanic/Non-Latin(a)(o)(x)	20
	Black, African American, or African	Client doesn't know, refused, or not collected	10
		Hispanic/Latin(a)(o)(x)	150
		Non-Hispanic/Non-Latin(a)(o)(x)	1,376
	Client doesn't know, refused, or not collected	Client doesn't know, refused, or not collected	17
		Hispanic/Latin(a)(o)(x)	42
		Non-Hispanic/Non-Latin(a)(o)(x)	18
	Multiracial	Hispanic/Latin(a)(o)(x)	22
		Non-Hispanic/Non-Latin(a)(o)(x)	67
	Native Hawaiian or Pacific Islander	Hispanic/Latin(a)(o)(x)	7
		Non-Hispanic/Non-Latin(a)(o)(x)	8
	White	Client doesn't know, refused, or not collected	7
		Hispanic/Latin(a)(o)(x)	465
		Non-Hispanic/Non-Latin(a)(o)(x)	987
Vale	American Indian, Alaska Native, or Indigenous	Hispanic/Latin(a)(o)(x)	6
		Non-Hispanic/Non-Latin(a)(o)(x)	6
	Asian or Asian American	Non-Hispanic/Non-Latin(a)(o)(x)	11
	Black, African American, or African	Client doesn't know, refused, or not collected	2
		Hispanic/Latin(a)(o)(x)	35
		Non-Hispanic/Non-Latin(a)(o)(x)	248
	Client doesn't know, refused, or not collected	Client doesn't know, refused, or not collected	4
		Hispanic/Latin(a)(o)(x)	7
		Non-Hispanic/Non-Latin(a)(o)(x)	3
	Multiracial	Client doesn't know, refused, or not collected	1
		Hispanic/Latin(a)(o)(x)	9
		Non-Hispanic/Non-Latin(a)(o)(x)	12
	Native Hawaiian or Pacific Islander	Hispanic/Latin(a)(o)(x)	4
		Non-Hispanic/Non-Latin(a)(o)(x)	2
	White	Hispanic/Latin(a)(o)(x)	80
		Non-Hispanic/Non-Latin(a)(o)(x)	197
FQIA+	Black, African American, or African	Hispanic/Latin(a)(o)(x)	2
		Non-Hispanic/Non-Latin(a)(o)(x)	11
	Client doesn't know, refused, or not collected	Hispanic/Latin(a)(o)(x)	1
	Multiracial	Hispanic/Latin(a)(o)(x)	3
		Non-Hispanic/Non-Latin(a)(o)(x)	1
	Native Hawaiian or Pacific Islander	Non-Hispanic/Non-Latin(a)(o)(x)	1
	White	Client doesn't know, refused, or not collected	1
		Hispanic/Latin(a)(o)(x)	4
		Non-Hispanic/Non-Latin(a)(o)(x)	19

Table: OHP/DCA - Source: NJ HMIS - Created with Datawrapper

Table 22

# **3c. Special Population Characteristics: Domestic Violence Survivors (con't)**

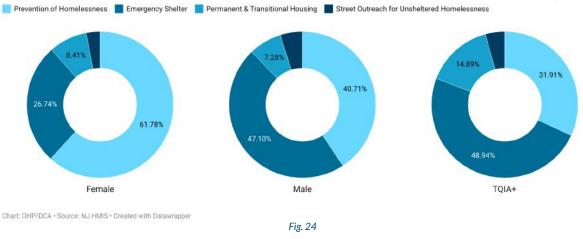
Table 22, above, represents the number of people affirming domestic violence survivorship that were admitted into the NJ HPSE in 2022, broken down by gender, race, and ethnicity.

The following insights can be understood from this breakout of the dataset of persons admitted in 2022 that affirmed survivorship status:

- Female domestic violence survivors:
  - The majority of female survivors are Black, African American, or African with Non-Hispanic/Non-Latin(a)(o)(x) ethnicity (1,376).
  - The second-largest group is White with Non-Hispanic/Non-Latin(a)(o)(x) ethnicity (987).
- The third-largest group is White with Hispanic/Latin(a)(o)(x) ethnicity (465).
- Male domestic violence survivors:
- The largest group of male survivors is Black, African American, or African with Non-Hispanic/Non-Latin(a)(o)(x) ethnicity (248).
- The second-largest group is White with Non-Hispanic/Non-Latin(a)(o)(x) ethnicity (197).
- The third-largest group is White with Hispanic/Latin(a)(o)(x) ethnicity (80).

### • TQIA+ domestic violence survivors:

- The majority of TQIA+ survivors are Black, African American, or African with Non-Hispanic/Non-Latin(a)(o)(x) ethnicity (11).
- The second-largest group is White with Non-Hispanic/Non-Latin(a)(o)(x) ethnicity (19).
- The third-largest group is White with Hispanic/Latin(a)(o)(x) ethnicity (4).



### NJ HPSE: Type of service accessed by persons affirming DV survivorship (2022 Admissions)

# **3c. Special Population Characteristics: Domestic Violence Survivors (con't)**

Figure 24, above, represents the percentage of domestic violence survivors accessing different types of services, broken down by gender. Here are some insights from the data:

- Female domestic violence survivors:
- Primarily access Prevention of Homelessness services (61.78%).
- Secondarily access Emergency Shelter services (26.74%).
- Least likely to access Street Outreach for Unsheltered Homelessness services (3.07%).

### Male domestic violence survivors:

- Primarily access Emergency Shelter services (47.10%).
- Secondarily access Prevention of Homelessness services (40.71%).
- Least likely to access Permanent & Transitional Housing services (7.28%).
- TQIA+ domestic violence survivors:
- Primarily access Emergency Shelter services (48.94%).
- Secondarily access Prevention of Homelessness services (31.91%).
- Least likely to access Permanent & Transitional Housing services (14.89%).
- Female survivors have a more balanced distribution between Emergency Shelter and Prevention of Homelessness services compared to male and TQIA+ survivors. This could indicate that female survivors are utilizing a wider variety of services or that there are more tailored resources available to them.
- Male survivors have a higher percentage of using Emergency Shelter services compared to other groups, which might suggest that they have a more immediate need for temporary housing or face barriers to accessing other types of services.
- TQIA+ survivors have the highest percentage of accessing Permanent & Transitional Housing services among all groups, which could indicate that they are more successful in securing stable housing or that there are targeted programs available for this population.
- Prevention of Homelessness services are consistently accessed across all gender groups, highlighting the importance of such programs for domestic violence survivors.

# **3c. Special Population Characteristics: Families**

### NJ HPSE: Individuals and families experiencing homelessness or receiving homelessness prevention assistance (2022 HPSE Admissions)

The given data presents a breakdown of households experiencing homelessness or receiving homelessness prevention assistance in New Jersey based on their household type at the time of admission in 2022.

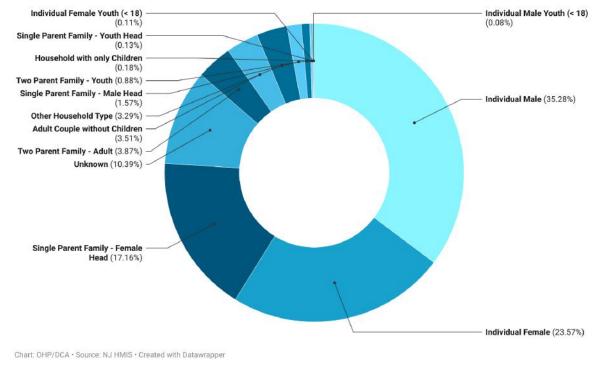


Fig. 17

72,467 households were newly admitted or re-admitted into the NJ HPSE in 2022. Figure 17, above, presents a breakdown of individuals and families experiencing homelessness in New Jersey based on their household type at the time of homelessness admission in 2022:

- Unknown households represent 10.39% of the total number of households entering the HPSE.
- Individual males make up the largest group (35.28%) among the known household types, followed by individual females (23.57%).
- Single-parent families with a female head are the most common family type in the system (17.16%).
- Two-parent families with adult heads account for 3.87% of the total households, while two-parent families with youth heads represent only 0.88%.
- Single-parent families with male heads account for 1.57%, and those with youth heads represent 0.13% of the total households.
- Other household types make up 3.29% of the total households.
- Adult couples without children constitute 3.51% of the households in the HPSE.
- Households with only children make up 0.18% of the total households.

# **3c. Special Population Characteristics: Families** (con't)

NJ HPSE: Households experiencing homelessness or receiving homelessness prevention assistance in New Jersey by county and household type at the time of admission in 2022

Cinala

County	Adult Couple without Children	Household with only Children	Individual Female	Individual Female Youth (< 18)	Individual Male	Individual Male Youth (< 18)	Other Household Type	Single Parent Family - Female Head	Single Parent Family - Male Head	Single Parent Family - Youth Head	Two Parent Family - Adult	Two Parent Family - Youth	Unknown
ATLANTIC	2.42%	0.77%	28.58%	0.03%	42.58%		0.70%	16.40%	1.47%	0.13%	3.67%	0.51%	2.74%
BERGEN	3.51%	0.29%	27.97%	0.08%	37.81%	0.04%	7.19%	12.17%	1.67%	0.20%	3.51%	1.02%	4.53%
BURLINGTON	5.47%	0.12%	22.26%	0.07%	26.98%	0.07%	4.05%	18.69%	2.02%	0.10%	5.54%	1.10%	13.54%
CAMDEN	1.55%	0.18%	23.40%	0.04%	45.70%	0.04%	1.16%	11.84%	1.09%	0.25%	1.76%	0.95%	12.05%
CAPE MAY	8.46%	0.10%	26.27%		42.79%		4.18%	8.46%	1.99%		2.69%	0.80%	4.28%
CUMBERLAND	3.86%	0.06%	23.96%	0.18%	31.99%	0.12%	4.11%	18.57%	0.92%		3.55%	1.35%	11.34%
ESSEX	2.14%	0.07%	24.57%	0.09%	38.49%	0.06%	2.71%	18.58%	1.63%	0.13%	2.77%	0.58%	8.19%
GLOUCESTER	5.49%	0.16%	25.05%	0.04%	26.76%	0.04%	20.20%	11.01%	1.35%	0.08%	3.26%	0.72%	5.84%
HUDSON	1.98%	0.08%	22.24%	0.08%	40.56%	0.08%	2.63%	16.05%	0.85%	0.03%	3.77%	0.53%	11.11%
HUNTERDON	4.15%	0.20%	30.83%		38.74%		4.94%	8.89%	0.59%	0.40%	2.37%	0.79%	8.10%
MERCER	2.17%	0.23%	24.71%	0.39%	31.21%	0.19%	2.64%		2.12%	0.18%	3.73%	0.68%	10.35%
MIDDLESEX	4.28%	0.24%	24.19%	0.02%	31.30%	0.11%	5.70%	17.67%	1.49%	0.15%	4.39%	1.18%	9.28%
MONMOUTH	4.90%	0.06%	22.06%		38.46%		2.46%	17.28%	1.91%	0.16%	3.87%	1.95%	6.90%
MORRIS	3.85%	0.15%	21.37%	0.07%	43.14%		4.54%	10.41%	0.69%		3.56%	0.73%	11.50%
OCEAN	6.41%	0.16%	25.71%	0.62%	35.10%	0.32%	4.57%	12.56%	1.16%	0.08%	4.65%	1.08%	7.55%
PASSAIC	3.00%	0.38%	23.18%	0.02%	27.57%	0.02%	5.15%	18.75%	1.39%	0.25%	2.87%	0.63%	16.78%
SALEM	5.56%	0.54%	29.21%		27.42%		9.50%	14.70%	2.51%	0.18%	6.09%	0.90%	3.41%
SOMERSET	2.59%		24.74%		26.55%	0.06%	3.37%	14.25%	1.10%	0.06%	2.40%	0.39%	24.48%
SUSSEX	7.72%	0.08%	20.76%		20.91%	0.08%	3.09%	16.67%	2.55%	0.23%	9.57%	1.23%	17.13%
UNION	3.76%	0.16%	22.56%	0.04%	31.74%	0.10%	4.49%	18.34%	1.69%	0.14%	4.93%	0.99%	11.07%
WARREN	7.29%	0.16%	28.21%		36.77%		8.08%	10.30%	1.11%		3.80%	0.32%	3.96%

Table: OHP/DCA + Source: NJ HMIS + Created with Datawrapper

Table 22

Table 22, above, presents a breakdown of individuals and families experiencing homelessness or receiving homelessness prevention assistance in New Jersey by county and household type at the time of admission in 2022.

### Some key observations from the data are:

- Individual males make up a significant portion of the homeless population in most counties, with the highest percentage in Morris (43.14%) and Camden counties (45.70%).
- Individual females account for a substantial portion of the HPSE population as well, with the highest percentage in Hunterdon (30.83%) and the lowest in Sussex (20.76%).
- Single-parent families with female heads are a considerable portion of the homeless population in most counties. The highest percentage is in Mercer (21.41%) and the lowest in Cape May (8.46%).
- Two-parent families with adult heads accessing the system have varying percentages across the counties. The highest percentage is in Sussex (9.57%) and the lowest in Camden (1.76%).
- Unknown households make up a significant portion of the homeless population in some counties, with the highest percentage in Somerset (24.48%) and the lowest in Atlantic (2.74%).

# **3c. Special Population Characteristics: Families** (con't)

### NJ HPSE: Types of projects accessed by different household types (2022 Admissions)

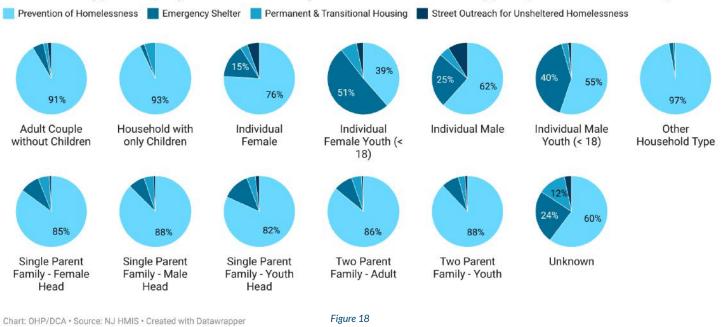


Figure 18, above, illustrates some key insights from the data on project types accessed by household types experiencing or at-risk of homelessness in 2022:

- Prevention of Homelessness services were the most accessed by most individual and family types, indicating the importance of programs aimed at preventing homelessness from occurring or escalating.
- Emergency Shelter services were the second most accessed resource by many individual and family types, highlighting the critical role of immediate shelter support for those experiencing homelessness.
- Street Outreach for Unsheltered Homelessness was most accessed by Individual Males (8.91%) and Individual Females (5.57%), showing that this type of project is particularly relevant for single adults who are unsheltered.
- Unaccompanied Youth (<18 years old), both male and female, had a higher percentage of accessing Emergency Shelter services compared to their adult counterparts. This emphasizes the need for safe and supportive shelter options for young people experiencing homelessness in the State.

# **3c. Special Population Characteristics: Families** (con't)

Additional insights on households from Figure 18, above, include:

- Permanent & Transitional Housing programs were accessed more by Single Parent Families (both male and female-headed) and Two Parent Families compared to individual adults, suggesting that these housing options may be more suited to families or those with children or especially helpful and/or targeted for their stabilization.
- Other Household Types had the highest percentage (96.96%) of accessing Prevention of Homelessness services, indicating that this diverse group might have unique needs that can be addressed through prevention programs.
- While the Unknown category had the highest percentage of accessing Emergency Shelter services (24.12%) among all groups, there is still a considerable percentage (60.16%) accessing Prevention of Homelessness services. This highlights the need for more accurate data collection and identification to better understand and address the needs of individuals experiencing homelessness.
- The Individual Female Youth (< 18) group had the highest percentage (51.04%) of accessing Emergency Shelter services among all categories, which may indicate a significant vulnerability among young female individuals experiencing homelessness in the state and a need for targeted support and resources.
- Adult Couples without Children and Households with only Children had a very low percentage of accessing Street Outreach for Unsheltered Homelessness (1.64% and 0% respectively), suggesting that these groups might be less likely to experience unsheltered homelessness or that existing outreach efforts are not adequately reaching them.
- The relatively high percentage of Two Parent Family Youth (87.93%) and Single Parent Family Youth Head (81.73%) accessing Prevention of Homelessness services could indicate that these young families are at higher risk of becoming homeless and may benefit from early intervention and support.
- For families with children, regardless of the family type, there is a higher percentage of accessing Permanent & Transitional Housing services compared to individual adults. This may suggest that these housing options are more targeted towards families, and additional resources might be needed for individual adults experiencing homelessness.
- The Unknown category had a considerably high percentage of accessing both Emergency Shelter (24.12%) and Permanent & Transitional Housing (12.49%) services. This highlights the need for improved data collection and identification methods to better understand the needs of this group and allocate resources accordingly.

## **3c. Special Population Characteristics: Children**

In 2022, 10,497 distinct children (meaning under 18 years old) were admitted to services in the HPSE. Table 23, below, shows the distribution of children admitted to services in the HPSE in 2022 by county:

County	# of distinct children	% of total children admitted into HPSE in 2022
ATLANTIC	142	1.34%
BERGEN	50	0.47%
BURLINGTON	1,062	10.00%
CAMDEN	598	5.63%
CAPE MAY	83	0.78%
CUMBERLAND	323	3.04%
ESSEX	1,549	14.59%
GLOUCESTER	238	2.24%
HUDSON	929	8.75%
HUNTERDON	62	0.58%
MERCER	1,300	12.25%
MIDDLESEX	312	2.94%
MONMOUTH	548	5.16%
MORRIS	364	3.43%
OCEAN	574	5.41%
PASSAIC	1,034	9.74%
SALEM	44	0.41%
SOMERSET	184	1.73%
SUSSEX	347	3.27%
UNION	852	8.03%
WARREN	21	0.20%

# NJ HPSE: # of children & distribution by county of distinct children admitted in 2022\*

\*Due to some children being admitted into services in more than one county, by-county breakout may exceed total State aggregation.

Table: OHP/DCA · Source: NJ HMIS · Created with Datawrapper

### Table 23

# **3c. Special Population Characteristics: Children**

From the data presented in Table 23, above, Here are comparative insights drawn from the number of admissions and the percentage of total child admissions into the system in 2022 for each county:

### Highest Child Admissions:

- Essex County has the highest number of child admissions (1,549) and the highest percentage of total child admissions into the system (14.59%).
- Mercer County is the second highest with 1,300 child admissions, accounting for 12.25% of total child admissions.
- Passaic County ranks third with 1,034 child admissions, representing 9.74% of total child admissions.

### Lowest Child Admissions:

- Warren County has the lowest number of child admissions (21) and the lowest percentage of total child admissions (0.20%).
- Salem County is the second lowest with 44 child admissions, accounting for 0.41% of total child admissions.
- Bergen County ranks third lowest with 50 child admissions, representing 0.47% of total child admissions.

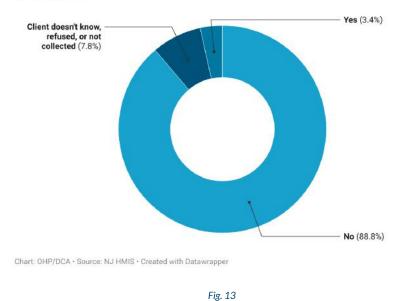
### Middle Range Child Admissions:

- Camden and Ocean counties have a relatively similar percentage of total child admissions, 5.63% and 5.41% respectively, placing them in the middle range for child admissions.
- Monmouth County also falls in the middle range with 5.16% of total child admissions.

It is important to note that these insights are based solely on the provided data and do not consider factors like population size, demographics, or socio-economic differences between the counties, which could influence the interpretation of the results.

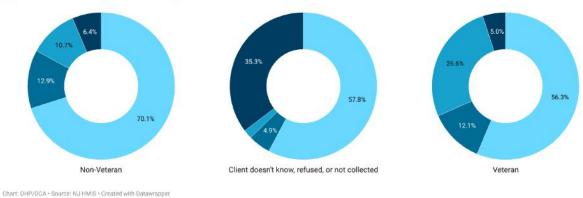
## **3c. Special Population Characteristics: Veterans**

In 2022, there were 4,140 distinct veterans receiving services in the NJ HPSE--a little over 3% or 3 out of every 100 persons accessing services in the HPSE.



### NJ HPSE: % of persons affirming Veteran status at admission

NJ HPSE: Veteran and Non-Veteran Program-type Utilization





# **3c. Special Population Characteristics: Veterans** (con't)

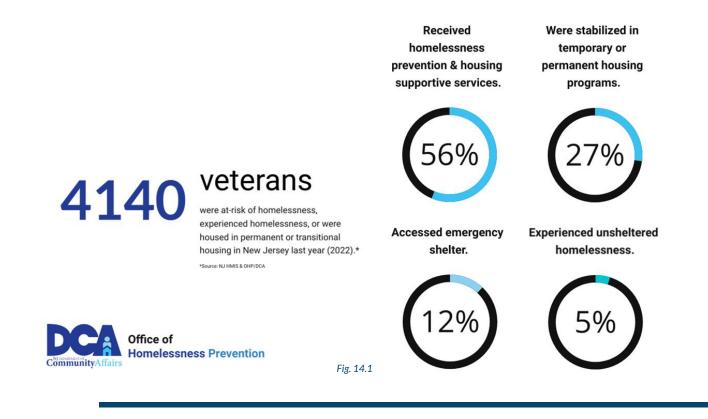
As shown in Figures 13 & 14, above:

Non-veterans (no) primarily access Prevention of Homelessness services (70.08%), followed by Emergency Shelter (12.86%), Street Outreach for Unsheltered Homelessness (6.37%), and Permanent & Transitional Housing (10.68%). This suggests that homelessness prevention programs are the most utilized service for this population.

For individuals with unknown or unreported veteran status (Client doesn't know, refused, or not collected), there is a higher reliance on Street Outreach for Unsheltered Homelessness services (35.34%) compared to other categories. This could indicate that this group experiences more unsheltered homelessness, this data point is consistently not collected by service providers in this category, or that this cohort faces barriers to accessing other services due to lack of information or willingness to disclose their veteran status.

Veterans (yes) have a different distribution of service utilization compared to non-veterans. While they also primarily use Prevention of Homelessness services (56.32%), they have a significantly higher proportion accessing Permanent & Transitional Housing services (26.60%) compared to non-veterans.

This may be due to the availability of specialized housing programs for veterans (e.g., NJ DMAVA & VA Veterans Havens). Emergency Shelter services are also utilized (12.05%), while Street Outreach for Unsheltered Homelessness services are less utilized (5.03%).



# 4. Causes of homelessness in New Jersey

Statewide causes of homelessness

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В

С

Causes of homelessness by county

Causes of homelessness by demographic category

OHP ANNUAL REPORT - 2022

## 4a. Causes of homelessness - Statewide

### NJ HPSE: Cause of Homelessness - 2022 Admissions

Self-reported cause of homelessness at time of admission into NJ HPSE

1	Asked to Leave Shared Residence	23.62%
2	Eviction	16.44%
3	Other Reasons	12.82%
4	Job Income Loss/Reduction	8.63%
5	Relocation	6.88%
6	Household Breakup / Death in Household	4.40%
7	Release from Prison/Jail	4.20%
8	Domestic Violence	4.07%
9	Drug/Alcohol Abuse	3.94%
10	Unknown	3.13%
11	Benefits Loss/Reduction	2.26%
12	Natural Disaster	1.75%
13	Illness	1.58%
14	Release from Hospital	1.40%
15	Rent Increase / Insufficient Income	1.24%
16	Foreclosure - Rented Property	0.80%
17	Foreclosure - Owned Property	0.66%
18	Substandard Housing	0.61%
19	Release from Psych. Facility	0.59%
20	Mental Illness	0.56%
21	Injury	0.42%

### Homeless Cause

Table: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

### Table 24

Table 24, above, lists various self-reported causes of homelessness, along with the total percentage of cases attributed to each cause, of persons admitted to the NJ HPSE in 2022.

# 4a. Causes of homelessness - Statewide (con't)

### NJ HPSE: Cause of Homelessness Comparision -2021 & 2022

Self-reported cause of homelessness at time of admission into NJ HPSE

Homeless Cause (at admission)	2022	2021	Change?
Asked to Leave Shared Residence	23.62%	26.65%	-3.03%
Benefits Loss/Reduction	2.26%	3.99%	-1.73%
Domestic Violence	4.07%	4.41%	-0.35%
Drug/Alcohol Abuse	3.94%	4.74%	-0.80%
Eviction*	16.44%	11.56%	4.89%
Foreclosure - Owned Property	0.66%	0.46%	0.20%
Foreclosure - Rented Property	0.80%	0.60%	0.20%
Household Breakup / Death in Household	4.40%	3.60%	0.79%
Illness	1.58%	1.56%	0.02%
Injury	0.42%	0.47%	-0.05%
Job Income Loss/Reduction	8.63%	8.79%	-0.16%
Mental Illness	0.56%	0.78%	-0.22%
Natural Disaster	1.75%	2.15%	-0.39%
Other Reasons	12.82%	13.11%	-0.29%
Release from Hospital	1.40%	1.54%	-0.14%
Release from Prison/Jail	4.20%	4.91%	-0.70%
Release from Psych. Facility	0.59%	0.68%	-0.08%
Relocation	6.88%	5.89%	0.99%
Rent Increase / Insufficient Income	1.24%	0.88%	0.36%
Substandard Housing	0.61%	0.57%	0.04%
Unknown	3.13%	2.68%	0.45%

\*NB: New Jersey had a statewide eviction moratorium from March 1, 2020 through January 1, 2022 Table: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

### Table 25

Table 25, above, shows the causes of homelessness at admission for the years 2022 and 2021.

Some insights gleaned from the data comparing the causes of homelessness at admission for the years 2022 and 2021 can be found on the next page:

# 4a. Causes of homelessness - Statewide (con't)

- Decrease in "Asked to Leave Shared Residence": There is a notable decrease in the percentage of people becoming homeless due to being asked to leave a shared residence, dropping from 26.65% in 2021 to 23.62% in 2022.
- Evictions on the rise: Evictions have increased significantly as a cause of homelessness, rising from 11.56% in 2021 to 16.44% in 2022, which may indicate growing housing instability or the effects of the ending of state's eviction moratorium.
- Benefits Loss/Reduction decline: There has been a decline in homelessness caused by benefits loss/reduction, falling from 3.99% in 2021 to 2.26% in 2022. This could be attributed to improvements in social welfare programs or changes in eligibility criteria.
- Increase in "Relocation": The percentage of people becoming homeless due to relocation has increased from 5.89% in 2021 to 6.88% in 2022, suggesting that more people may be facing housing challenges when moving to new locations.
- Decrease in "Release from Prison/Jail": There is a slight decrease in homelessness due to release from prison/jail, from 4.91% in 2021 to 4.20% in 2022. This could be a result of improved reentry programs or other support measures for individuals leaving incarceration.
- Drug/Alcohol Abuse and Domestic Violence: Both drug/alcohol abuse and domestic violence have slightly decreased as causes of homelessness between 2021 and 2022.
- Rent Increase / Insufficient Income: The percentage of people becoming homeless due to rent increase or insufficient income has increased from 0.88% in 2021 to 1.24% in 2022. This highlights growing affordability issues in the housing market.

## 4b. Causes of homelessness - Counties

Tables 26 & 27 below, show the percentage of people experiencing homelessness due to various causes across different counties in New Jersey that were admitted into the HPSE in 2022:

### NJ HPSE: Cause of homelessness at time of admission (2022) - By County (Atlantic - Hudson)

Self-reported cause of homelessness at time of admission into NJ HPSE.

Cause of Homelessness (2022)	ATLANTIC	BERGEN	BURLINGTON	CAMDEN	CAPE MAY	CUMBERLAND	ESSEX	GLOUCESTER	HUDSON
Asked to Leave Shared Residence	18.07%	21.61%	32.38%	19.87%	25.70%	17.66%	25.56%	31.59%	17.27%
Benefits Loss/Reduction	2.17%	0.65%	1.26%	18.68%	4.44%	4.26%	3.05%	0.91%	2.27%
Domestic Violence	4.87%	5.48%	4.88%	3.90%	2.80%	2.99%	2.83%	9.09%	2.63%
Drug/Alcohol Abuse	9.99%	1.61%	1.36%	3.61%	2.10%	0.45%	4.07%	3.86%	1.88%
Eviction	17.29%	17.74%	22.26%	14.39%	22.66%	19.11%	13.27%	20.23%	11.24%
Foreclosure - Owned Property	0.91%	1.29%	1.16%	0.84%	1.87%	0.09%	0.43%	2.27%	0.32%
Foreclosure - Rented Property	0.70%	1.29%	1.61%	0.81%	1.64%	0.91%	1.04%	0.91%	0.25%
Household Breakup / Death in Household	3.30%	6.13%	2.87%	3.81%	2.34%	1.81%	4.58%	2.27%	2.32%
Illness	1.82%	0.97%	1.86%	1.45%	0.93%	5.25%	1.70%	1.59%	1.10%
Injury	0.78%	0.97%	0.35%	0.61%	0.93%	1.54%	0.36%	0.45%	0.30%
Job Income Loss/Reduction	9.73%	8.06%	6.24%	8.29%	6.07%	16.85%	9.58%	5.68%	10.21%
Mental Iliness	0.43%	6.13%	0.30%	0.48%	1.40%	0.09%	0.57%	0.68%	0.43%
Natural Disaster	1.22%	0.97%	1.96%	0.61%	0.47%	1.09%	2.02%	0.68%	1.22%
Other Reasons	9.25%	12.90%	6.65%	7.65%	7.24%	12.41%	10.84%	8.41%	29.32%
Release from Hospital	1.65%	0.65%	1.36%	1.74%	3.27%	1.18%	1.53%	1.14%	0.93%
Release from Prison/Jail	5.00%	1.94%	1.86%	6.26%	8.64%	1.81%	6.39%	1.59%	5.06%
Release from Psych. Facility	1.26%		0.81%	0.74%	0.93%	0.72%	0.57%	0.45%	0.16%
Relocation	5.60%	3.55%	6.85%	3.81%	1.40%	6.07%	6.89%	3.41%	7.40%
Rent Increase / Insufficient Income	1.48%	1.61%	0.86%	0.55%	1.40%	0.63%	0.76%	0.23%	1.39%
Substandard Housing	0.56%	0.65%	1.26%	0.06%	1.40%	0.09%	0.58%	0.68%	0.19%
Unknown	3.91%	5.81%	1.86%	1.84%	2.34%	4.98%	3.40%	3.86%	4.12%

\*No data available on cause in County.

Table: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

Table 26

# 4b. Causes of homelessness - Counties (con't)

NJ HPSE: Cause of homelessness at time of admission (2022) - By County (Hunterdon - Warren)

Self-reported cause of homelessness at time of admission into NJ HPSE.

Course of

Cause of Homelessness (2022)	HUNTERDON	MERCER	MIDDLESEX	MONMOUTH	MORRIS	OCEAN	PASSAIC	SALEM	SOMERSET	SUSSEX	UNION	WARREN
Asked to Leave Shared Residence	11.64%	25.64%	23.30%	23.94%	22.19%	20.63%	24.75%	22.12%	12.69%	26.89%	22.18%	27.33%
Benefits .oss/Reduction	1.71%	1.62%	1.53%	1.19%	1.80%	3.72%	2.03%	2.65%	1.51%	3.15%	4.06%	0.00%
Domestic /iolence	5.48%	4.19%	6.46%	8.65%	4.62%	6.56%	3.57%	6.19%	5.16%	9.96%	2.81%	10.47%
Drug/Alcohol Abuse	20.21%	4.35%	2.55%	6.31%	8.11%	2.45%	5.12%	2.65%	1.72%	0.91%	1.72%	0.58%
Eviction	12.33%	15.39%	16.84%			18.10%		16.81%		7.05%	15.67%	26.74%
Foreclosure - Dwned Property	1.71%	0.35%	0.68%	1.22%	1.35%	1.58%	0.55%	0.88%	1.29%	0.91%	0.57%	1.74%
Foreclosure - Rented Property	0.34%	0.48%	0.68%	0.56%	0.75%	1.03%	1.43%	*	1.94%	0.33%	1.72%	1.16%
Household Breakup / Death n Household	4.45%	2.60%	6.29%	4.05%	5.60%	3.79%	6.05%	5.31%	2.80%	7.80%	2.55%	4.07%
liness	1.71%	2.54%	2.21%	2.26%	1.65%	2.29%	1.58%	0.88%	1.29%	7.22%	2.71%	0.58%
njury	*	0.73%	0.34%	0.63%	0.56%	0.32%	0.40%	0.88%	*	1.24%	0.52%	0.00%
lob Income .oss/Reduction	9.25%	7.81%	11.05%	9.24%	10.51%	8.77%	9.85%	6.19%	7.10%	22.32%	9.58%	4.65%
vental Illness	*	0.83%	1.53%	0.63%	1.39%	0.63%	0.79%	0.88%	0.65%	1.33%	0.57%	1.16%
latural Disaster	4.11%	0.98%	1.02%	0.71%	1.73%	0.63%	4.04%	*	1.94%	0.50%	6.45%	1.74%
ther Reasons	5.48%	9.68%	10.54%	8.02%	10.63%		10.91%		10,11%	2.32%	9.32%	5.81%
telease from Iospital	1.71%	1.52%	0.34%	0.78%	1.05%	0.87%	0.74%	1.77%	1.29%	0.25%	1.35%	1.16%
telease from Prison/Jail	6.16%	9.49%	3.06%	3.86%	2.67%	1.90%	3.30%	0.88%	2.37%	0.41%	3.70%	2.91%
Release from Psych. Facility	1.03%	0.63%		0.41%	0.49%	0.47%	0.26%	0.88%	0.43%	0.33%	0.78%	1.74%
Relocation	6.16%	6.03%	5.44%	4.90%	7.92%	2.61%	6.39%	8.85%	5.59%	0.83%	10.20%	2.91%
Rent Increase / nsufficient ncome	2.40%	0.67%	1.19%	1.37%	2.07%	1.50%	0.87%	1.77%	*	4.40%	0.73%	0.58%
Substandard Iousing	0.34%	1.27%	0.51%	0.22%	0.83%	0.40%	0.69%	2.65%	*	0.91%	0.16%	1.16%
Jnknown	3.77%	3.21%	4.42%	6.87%	1.13%	7.11%	2.46%	3.54%	28.82%	0.91%	2.65%	3.49%

Table: OHP/DCA - Source: NJ HMIS - Created with Datawrapper

Broken out by county in Tables 26 & 27, the prevalence of certain causal factors for homeless are brought into sharper relief:

- "Asked to Leave Shared Residence" is a prominent cause of homelessness in most counties, with Burlington and Gloucester counties having the highest percentages (32.38% and 31.59%, respectively).
- "Domestic Violence" as a cause of homelessness is notably higher in Salem (10.47%), Sussex (9.96%), and Monmouth (8.65%) counties compared to other counties.
- "Drug/Alcohol Abuse" is a significant cause of homelessness in Hunterdon County (20.21%), which is much higher than in other counties.
- "Eviction" is a major factor in Warren (26.74%), Cape May (22.66%), and Burlington (22.26%) counties.

Table 27

# 4b. Causes of homelessness - Counties (con't)

- "Job Income Loss/Reduction" is especially high in Sussex County (22.32%) compared to other counties.
- Hudson County has a notably high percentage of homelessness due to "Other" reasons (29.32%), which is significantly higher than in other counties.
- "Release from Prison/Jail" is a significant cause of homelessness in Mercer County (9.49%) compared to other counties.
- "Relocation" is a major factor in Union County (10.20%) compared to other counties.
- Somerset County has an unusually high percentage of homelessness due to "Unknown" reasons (28.82%).

# Further insights and inferences to be made from a statewide and cross-county comparison of data on causes of homelessness include:

- Housing-related issues, such as eviction and foreclosure, are the primary drivers of homelessness across the state. This suggests that policies and interventions (such as the DCA's Comprehensive Eviction Diversion and Defense program) aimed at preventing evictions and foreclosures could have a significant impact on reducing homelessness into 2023.
- "Benefits Loss/Reduction" is particularly high in Camden County (18.68%) compared to other counties, suggesting that social safety nets might need reinforcement in that area.
- "Foreclosure Owned Property" is more prominent in Cape May (1.87%) and Gloucester (2.27%) counties compared to other counties, indicating a potential issue with housing stability.
- "Household Breakup / Death in Household" is notably higher in Sussex (7.80%) and Hudson (7.55%) counties, suggesting that family-related challenges contribute to homelessness in these areas.
- "Illness" is a significant cause of homelessness in Cumberland County (5.25%), which is much higher than in other counties. This may indicate a need for improved healthcare access and support for individuals facing health challenges.
- "Natural Disaster" has a higher impact on homelessness in Union (6.45%) and Hunterdon (4.11%) counties compared to other counties, pointing to the impact of Hurricane Ida in these regions.
- "Release from Psychiatric Facility" is more prevalent as a cause of homelessness in Salem (1.74%) and Camden (0.74%) counties, suggesting that housing supports for persons exiting mental health support and services may need improvement in those areas.
- "Rent Increase / Insufficient Income" is particularly high in Sussex County (4.40%), indicating that affordable housing and income support might be areas of concern.

# 4c. Causes of homelessness - Gender

### NJ HPSE: Causes of homelessness - By Gender (2022 Admissions)

Self-reported causes of homelessness for persons admitted into the NJ HPSE in 2022.

Gender	Female	Male	TQIA+
Asked to Leave Shared Residence	25.61%	22.33%	28.68%
Benefits Loss/Reduction	2.12%	2.40%	1.47%
Domestic Violence	7.12%	1.28%	9.56%
Drug/Alcohol Abuse	2.28%	5.28%	1.47%
Eviction	18.05%	15.36%	15.44%
Foreclosure - Owned Property	0.79%	0.56%	
Foreclosure - Rented Property	0.91%	0.72%	
Household Breakup / Death in Household	4.13%	4.66%	2.21%
Illness	1.58%	1.59%	0.74%
Injury	0.26%	0.55%	
Job Income Loss/Reduction	7.76%	9.43%	7.35%
Mental Illness	0.49%	0.61%	
Natural Disaster	2.29%	1.37%	0.74%
Other Reasons	12.40%	13.13%	11.76%
Release from Hospital	0.82%	1.87%	1.47%
Release from Prison/Jail	1.04%	6.72%	4.41%
Release from Psych. Facility	0.47%	0.69%	
Relocation	6.88%	6.94%	10.29%
Rent Increase / Insufficient Income	1.41%	1.11%	2.21%
Substandard Housing	0.81%	0.46%	
Unknown	2.76%	2.95%	2.21%

Table: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

### Table 28

Table 28, above, presents cause of homelessness information, broken out by three gender categories:

- 1. Female
- 2. Male
- 3. TQIA+ (as above and in earlier analyses, TQIA+ is a combined category inclusive of persons identifying as Transgender, Questioning, Intersex, A gender neither wholly "Male" nor "Female".)

# 4c. Causes of homelessness - Gender (con't)

Given the information presented in Table 28, above, we can make the following inferences about the causes of homelessness among different gender categories:

- Asked to Leave Shared Residence: TQIA+ individuals experience the highest rate (28.68%) of homelessness due to being asked to leave a shared residence, suggesting that discrimination or lack of acceptance may be a factor. This highlights the need for increased awareness, safe housing options, and support for TQIA+ individuals facing housing instability.
- Benefits Loss/Reduction: Males experience the highest rate (2.40%) of homelessness caused by benefits loss or reduction. This could suggest a need for better access to social support systems and improved benefits management for men in need.
- **Domestic Violence**: TQIA+ individuals experience the highest rate (9.56%) of homelessness due to domestic violence, with the Female rate (7.12%) also substantially higher than the Male rate. This highlights the importance of providing resources and support for victims of domestic violence across all gender categories, with a particular focus on marginalized populations.
- Drug/Alcohol Abuse: Males face the highest rate (5.28%) of homelessness caused by drug and alcohol abuse in the state, indicating both the need for targeted substance abuse treatment and mental health services for men experiencing homelessness but also the conceptualization of substance abuse services as homelessness prevention.
- Eviction: Females experience the highest rate (18.05%) of homelessness due to eviction, suggesting that targeted interventions aimed at preventing evictions and providing legal support might be particularly beneficial for reducing homelessness experienced by women.
- Foreclosure: Rates of homelessness due to foreclosures, both owned and rented, are relatively low across all gender categories, but still indicate a need for housing stability and foreclosure prevention initiatives.
- Household Breakup / Death in Household: Males experience the highest rate (4.66%) of homelessness caused by household breakup or death in the household. This suggests a need for support services and resources for men facing sudden housing instability due to personal loss.
- Job Income Loss/Reduction: Males face the highest rate (9.43%) of homelessness caused by job income loss or reduction, emphasizing the role that economic development initiatives play in homelessness prevention in New Jersey.

## 4c. Causes of homelessness - Gender (con't)

- Mental Illness: While mental illness as a cause of homelessness is relatively low across all gender categories, as will be shown below in later pages, for persons affirming an active mental health condition or diagnosis at the time of admission into the HPSE, it plays a significant factor in homelessness risk.
- Natural Disaster: Rates of homelessness caused by natural disasters are relatively low across all gender categories, but still warrant continued investment in disaster preparedness and recovery resources. Notably, however, Females expressed the highest rate of homelessness caused by disaster (2.29%).
- Release from Prison/Jail: Males experience the highest rate (6.72%) of homelessness after release from prison or jail, suggesting the continued need for re-entry programs, housing options, and support services targeting men having prior justice-involvement.
- Rent Increase / Insufficient Income: TQIA+ individuals experience the highest rate (10.29%) of homelessness due to rent increases or insufficient income, emphasizing the need for affordable housing initiatives and rent control measures for marginalized populations.

# 4c. Causes of homelessness - Racial Breakout

#### NJ HPSE: Causes of Homelessness - Statewide - By Race

Self-reported causes of homelessness at time of admission (2022)

Race	American Indian, Alaska Native, or Indigenous	Asian or Asian American	Black, African American, or African	Client doesn't know, refused, or not collected	Multiracial	Native Hawaiian or Pacific Islander	White
Asked to Leave Shared Residence	21.09%	17.81%	26.64%	13.30%	27.22%	31.94%	20.89%
Benefits Loss/Reduction	1.36%	2.43%	2.15%	1.74%	1.86%	2.78%	2.48%
Domestic Violence	2.49%	5.26%	3.35%	9.71%	5.36%	2.78%	4.49%
Drug/Alcohol Abuse	2.27%	2.83%	3.01%	2.07%	2.89%	4.86%	5.41%
Eviction	20.18%	12.15%	16.48%			13.89%	16.73%
Foreclosure - Owned Property	0.45%		0.49%	0.76%	0.82%		0.89%
Foreclosure - Rented Property	1.13%	0.40%	0.90%	0.33%	0.62%		0.71%
Household Breakup / Death in Household	2.04%	2.43%	4.43%	3.71%	4.74%	4.17%	4.51%
Illness	1.59%	1.62%	1.15%	0.65%	1.24%	1.39%	2.21%
Injury	0.23%	1.21%	0.38%	0.44%	0.62%		0.43%
Job Income Loss/Reduction	5.44%	12.55%	8.18%	6.65%	6.39%	5.56%	9.56%
Mental Illness	0.23%	0.40%	0.44%	0.98%	0.82%	1.39%	0.66%
Natural Disaster	1.36%	1.21%	2.00%	2.40%	0.62%		1.49%
Other Reasons	25.62%	19.43%	12.28%	14.39%	10.93%	14.58%	12.63%
Release from Hospital	0.91%	2.02%	1.22%	0.55%	1.86%	0.69%	1.69%
Release from Prison/Jail	3.17%	4.05%	5.28%	3.38%	3.51%	5.56%	2.95%
Release from Psych. Facility	0.45%	2.43%	0.50%	0.65%	0.62%		0.67%
Relocation	6.35%	7.29%	6.99%	6.98%	7.22%	5.56%	6.69%
Rent Increase / Insufficient Income	1.59%	2.02%	0.94%	0.87%	1.44%	1.39%	1.58%
Substandard Housing		0.40%	0.78%	0.33%	0.62%		0.43%
Unknown	2.04%	2.02%	2.38%	16.47%	3.30%	3.47%	2.90%

Table: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

### Table 29

**Table 29**, above, describes the causes of homelessness in New Jersey among persons admitted into the HPSE in 2022, organized by race. It highlights the percentage of individuals within each racial group who have experienced homelessness due to various self-reported reasons.

The dataset shows that different factors contributing to homelessness have varying impacts across different racial/ethnic groups. This suggests the importance of considering racial and ethnic diversity when designing interventions and resources to address homelessness.

# 4c. Causes of homelessness - Racial Breakout (con't)

- Asked to Leave Shared Residence: Native Hawaiian or Pacific Islander individuals face the highest rate of homelessness (31.94%) caused by being asked to leave a shared residence. This suggests a need for increased support and resources for this demographic group.
- Benefits Loss/Reduction: White individuals experience the highest rate (2.48%) of homelessness due to benefits loss or reduction. Improved access and outreach for entitlement and benefits management might be particularly beneficial for this demographic group.
- **Domestic Violence**: The group with the highest rate of homelessness caused by domestic violence is the "Client doesn't know, refused, or not collected" category (9.71%), strongly indicating the need for better data collection in this area. Among the known racial groups, Multiracial individuals experience the highest rate (5.36%) of homelessness causes by Domestic Violence.
- Drug/Alcohol Abuse: White individuals face the highest rate (5.41%) of homelessness due to drug and alcohol abuse.
- Eviction: American Indian, Alaska Native, or Indigenous individuals experience the highest rate (20.18%) of homelessness caused by eviction, followed by Black, African American, or African individuals (16.48%). Interventions aimed at preventing evictions and providing legal support might be particularly micro-targeted to be beneficial for these groups.
- Foreclosure: Black, African American, or African individuals experience the highest rates of homelessness due to foreclosure, both owned (0.49%) and rented (0.90%). Initiatives aimed at housing stability and foreclosure prevention should be targeted to support this demographic group.
- Household Breakup / Death in Household: Black, African American, or African individuals face the highest rate (4.43%) of homelessness caused by household breakup or death in the household.
- Job Income Loss/Reduction: White individuals experience the highest rate (9.56%) of homelessness caused by job income loss or reduction. This highlights the need for job training, placement programs, and economic development initiatives targeting this racial group.
- Mental Illness: Native Hawaiian or Pacific Islander individuals face the highest rate (1.39%) of homelessness due to mental illness. This emphasizes the need for improved access to mental health care resources and support for individuals facing housing instability, particularly for this demographic group.

# 4c. Causes of homelessness - Racial Breakout (con't)

- Natural disasters: Native Hawaiian or Pacific Islander populations have the highest percentage of homelessness due to natural disasters (14.58%), while the multiracial group has the lowest percentage (0.62%). This could indicate that certain populations might be more vulnerable to or disproportionately affected by natural disasters across the state.
- Other reasons: American Indian, Alaska Native, or Indigenous populations show the highest percentage of homelessness due to "other reasons" (25.62%). It is essential to further investigate these reasons to better understand the specific challenges faced by this group and provide tailored support.
- Release from institutions: Black, African American, or African populations show the highest percentage of homelessness due to release from prison/jail (5.28%), while Asian or Asian American populations show the highest percentage of homelessness for release from psychiatric facilities (2.43%).

## 4c. Causes of homelessness - Ethnicity

## NJ HPSE: Homelessness causes at time of admission (2022) - by Ethnicity

Ethnicity	Hispanic/Latin(a)(o)(x)	Non-Hispanic/Non- Latin(a)(o)(x)
Asked to Leave Shared Residence	22.97%	24.15%
Benefits Loss/Reduction	2.39%	2.23%
Domestic Violence	4.35%	3.76%
Drug/Alcohol Abuse	3.24%	4.20%
Eviction	15.16%	16.92%
Foreclosure - Owned Property	0.31%	0.75%
Foreclosure - Rented Property	0.64%	0.84%
Household Breakup / Death in Household	3.55%	4.66%
Illness	1.23%	1.69%
Injury	0.29%	0.45%
Job Income Loss/Reduction	9.02%	8.57%
Mental Illness	0.54%	0.56%
Natural Disaster	1.97%	1.70%
Other Reasons	13.55%	12.62%
Release from Hospital	1.21%	1.47%
Release from Prison/Jail	3.78%	4.41%
Release from Psych. Facility	0.58%	0.60%
Relocation	10.19%	6.01%
Rent Increase / Insufficient Income	1.46%	1.18%
Substandard Housing	0.54%	0.61%
Unknown	3.04%	2.61%

Table: OHP/DCA • Source: NJ HMIS • Created with Datawrapper

### Table 30

Table 30, above, describes the causes of homelessness in New Jersey among persons admitted into the homelessness prevention and services ecosystem in 2022, organized by ethnicity.

The dataset shows that different factors contributing to homelessness have varying impacts across different ethnic groups and is, as above, further indicative of considering racial and ethnic diversity when designing interventions and resources to address homelessness.

# 4c. Causes of homelessness - Ethnicity (con't)

Some key comparative insights on causes of homelessness between ethnic categories include:

- Asked to Leave Shared Residence: Non-Hispanic/Non-Latinx individuals had a slightly higher percentage of being asked to leave a shared residence (24.15%) compared to Hispanic/Latinx individuals (22.97%).
- Benefits Loss/Reduction: Non-Hispanic/Non-Latinx individuals (2.23%) had a slightly lower percentage of experiencing benefits loss/reduction as a cause of homelessness compared to Hispanic/Latinx individuals (2.39%).
- **Domestic Violence:** Hispanic/Latinx individuals (4.35%) had a slightly higher percentage of experiencing domestic violence as a cause of homelessness compared to Non-Hispanic/Non-Latinx individuals (3.76%).
- Drug/Alcohol Abuse: Hispanic/Latinx individuals (3.24%) had a slightly lower percentage of experiencing drug/alcohol abuse as a cause of homelessness compared to Non-Hispanic/Non-Latinx individuals (4.20%).
- Eviction: Non-Hispanic/Non-Latinx individuals (16.92%) had a slightly higher percentage of experiencing eviction as a cause of homelessness compared to Hispanic/Latinx individuals (15.16%).
- Foreclosure Owned Property: Non-Hispanic/Non-Latinx individuals (0.75%) had a slightly higher percentage of experiencing foreclosure on an owned property as a cause of homelessness compared to Hispanic/Latinx individuals (0.31%).
- Foreclosure Rented Property: Non-Hispanic/Non-Latinx individuals (0.84%) had a slightly higher percentage of experiencing foreclosure on a rented property as a cause of homelessness compared to Hispanic/Latinx individuals (0.64%).
- Household Breakup / Death in Household: Non-Hispanic/Non-Latinx individuals (4.66%) had a slightly higher percentage of experiencing a household breakup or death in the household as a cause of homelessness compared to Hispanic/Latinx individuals (3.55%).
- Illness: Hispanic/Latinx individuals (1.23%) had a slightly lower percentage of experiencing illness as a cause of homelessness compared to Non-Hispanic/Non-Latinx individuals (1.69%).
- Job Income Loss/Reduction: Hispanic/Latinx individuals (9.02%) had a slightly higher percentage of experiencing job income loss/reduction as a cause of homelessness compared to Non-Hispanic/Non-Latinx individuals (8.57%).

## 4c. Causes of homelessness - Chronic homelessness

# NJ HPSE: Cause of homelessness - Chronically homeless at time of admission (2022)

Homeless Cause (2022 Admissions)	Not Chronically Homeless	Chronically Homeless
Asked to Leave Shared Residence	24.19%	20.38%
Benefits Loss/Reduction	2.16%	2.92%
Domestic Violence	4.12%	3.98%
Drug/Alcohol Abuse	3.53%	7.95%
Eviction	16.92%	12.39%
Foreclosure - Owned Property	0.68%	0.38%
Foreclosure - Rented Property	0.82%	0.49%
Household Breakup / Death in Household	4.05%	5.72%
Illness	1.44%	2.77%
Injury	0.39%	0.61%
Job Income Loss/Reduction	8.64%	8.71%
Mental Illness	0.47%	1.36%
Natural Disaster	1.86%	0.80%
Other Reasons	12.61%	14.96%
Release from Hospital	1.32%	1.86%
Release from Prison/Jail	4.12%	4.85%
Release from Psych. Facility	0.50%	1.29%
Relocation	7.04%	5.00%
Rent Increase / Insufficient Income	1.26%	1.17%
Substandard Housing	0.65%	0.19%
Unknown	3.21%	2.23%

Table: OHP/DCA · Source: NJ HMIS · Created with Datawrapper

### Table 31

**Table 31**, above, describes the causes of homelessness in New Jersey among persons admitted into the homelessness prevention and services ecosystem in 2022, organized by chronic homelessness status (for definitions, please see section 2, above).

The dataset shows that different factors contributing to homelessness have varying impacts across persons experiencing homelessness for the first time and those experiencing chronic homelessness. Insights from this dataset and table can be viewed below:

# 4c. Causes of homelessness - Chronic homelessness (con't)

The following insights can be drawn from the dataset on the causes of homelessness among nonchronically homeless and chronically homeless individuals in 2022:

- Asked to Leave Shared Residence: Non-chronically homeless individuals (24.19%) were slightly more likely than chronically homeless individuals (20.38%) to have been asked to leave a shared residence as a cause of homelessness.
- Benefits Loss/Reduction: Chronically homeless individuals (2.92%) were slightly more likely than non-chronically homeless individuals (2.16%) to have experienced benefits loss/reduction as a cause of homelessness.
- **Domestic Violence**: There was a slight difference in the percentage of non-chronically homeless individuals (4.12%) and chronically homeless individuals (3.98%) who experienced domestic violence as a cause of homelessness.
- Drug/Alcohol Abuse: Chronically homeless individuals (7.95%) were more likely than nonchronically homeless individuals (3.53%) to have experienced drug/alcohol abuse as a cause of homelessness.
- Eviction: Non-chronically homeless individuals (16.92%) were slightly more likely than chronically homeless individuals (12.39%) to have experienced eviction as a cause of homelessness.
- Foreclosure Owned Property: Non-chronically homeless individuals (0.68%) were slightly more likely than chronically homeless individuals (0.38%) to have experienced foreclosure on an owned property as a cause of homelessness.
- Foreclosure Rented Property: Non-chronically homeless individuals (0.82%) were slightly more likely than chronically homeless individuals (0.49%) to have experienced foreclosure on a rented property as a cause of homelessness.
- Household Breakup / Death in Household: Chronically homeless individuals (5.72%) were more likely than non-chronically homeless individuals (4.05%) to have experienced a household breakup or death in the household as a cause of homelessness.
- Illness: Chronically homeless individuals (2.77%) were more likely than non-chronically homeless individuals (1.44%) to have experienced illness as a cause of homelessness.

### 4c. Causes of homelessness - Chronic homelessness (con't)

- Injury: Chronically homeless individuals (0.61%) were more likely than non-chronically homeless individuals (0.39%) to have experienced injury as a cause of homelessness.
- Job Income Loss/Reduction: There was no significant difference in the percentage of nonchronically homeless individuals (8.64%) and chronically homeless individuals (8.71%) who experienced job income loss/reduction as a cause of homelessness.
- Mental Illness: Chronically homeless individuals (1.36%) were more likely than non-chronically homeless individuals (0.47%) to have experienced mental illness as a cause of homelessness.
- Natural Disaster: Non-chronically homeless individuals (1.86%) were slightly more likely than chronically homeless individuals (0.80%) to have experienced a natural disaster as a cause of homelessness.
- Other Reasons: Chronically homeless individuals (14.96%) were more likely than non-chronically homeless individuals (12.61%) to have experienced other reasons as a cause of homelessness.
- Release from Hospital: Chronically homeless individuals (1.86%) were more likely than nonchronically homeless individuals (1.32%) to have been released from a hospital as a cause of homelessness.
- Release from Prison/Jail: Chronically homeless individuals (4.85%) were more likely than nonchronically homeless individuals (4.12%) to have been released from prison/jail as a cause of homelessness.
- Release from Psych. Facility: Chronically homeless individuals (1.29%) were more likely than nonchronically homeless.

Overall, the data shows that both non-chronically homeless and chronically homeless individuals experience similar causes of homelessness such as being asked to leave shared residence, experiencing benefits loss/reduction, and domestic violence.

However, there are differences in the prevalence of specific causes of homelessness, with chronically homeless individuals being more likely to experience drug/alcohol abuse, mental illness, and release from hospital, prison/jail, or psychiatric facilities as a cause of homelessness. On the other hand, non-chronically homeless individuals are more likely to experience eviction, relocation, and substandard housing as a cause of homelessness in New Jersey.

### 5. NJCounts (Point-in-Time Count): a 7 year look

## Statewide cross-sectional census of homelessness

Methodology

### Findings

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OHP ANNUAL REPORT - 2022

### 5a. NJ Counts (PIT Count): Background

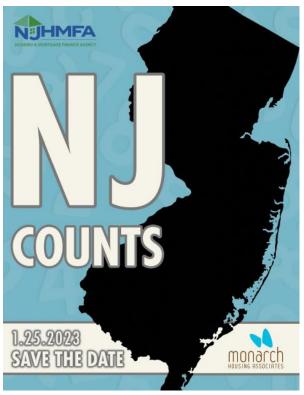
**NJCounts** is the annual Point-in-Time (PIT) Count of individuals and families experiencing homelessness in New Jersey.

As required by the U.S. Department of Housing and Urban Development, the count takes place during the last 10 days of January and identifies those persons residing in emergency shelters, transitional housing programs, safe havens and living on the streets or other locations not fit for dwelling.

In New Jersey, NJCounts is coordinated on a single day across the state allowing for comparable data across all communities from year to year. The count is conducted using an in-person survey tool, informed and co-developed by persons with lived experience of homelessness and housing insecurity.

Monarch Housing Associates has coordinated NJCounts since 2014 as commissioned by the New Jersey Housing and Mortgage Finance Agency (NJHMFA). Monarch partners with local governments, service providers, community advocates and volunteers to conduct NJCounts to collect critical data that assists communities in developing a deeper understanding of the need as they work to end homelessness.

Data, reports, and surveys used in prior NJCounts can be found at: <u>https://monarchhousing.org/nj-counts/</u>.



### 5b. NJ Counts (PIT Count)-a 7 year look: Methodology

#### Cleaned PIT Count Homelessness Data (2015-22)

To present a comprehensive view of PIT Count data from 2015 to 2022, survey data was standardized and cleaned by the Department at the individual-level data for key variables by DCA's data staff.

- All entries with missing data, or "Unknown, N/A, etc." tags were given a standard "Unknown" label.
- Municipality and county names were standardized to full official names
- Homelessness Reasons, Prior Permanent Residence, Agency, were condensed and standardized to a reasonable number of major categories
- Coordinates were added for the center of the municipality the individual was counted in (for mapping purposes)

#### **PIT Count Homelessness Statistics**

Statistics for every county and municipality on the number homeless, homelessness rates, and prehomelessness (number of homeless persons reporting their last permanent address was in a particular municipality) were based on three-year averages (to smooth out anomalies in single-year counts-i.e., the impact of pandemic on counting).

**Sender, retainer, and receiver** designations were assigned for each county, based on the percentage difference in the number of residents experiencing homeless and the number living in the municipality before the person experienced homelessness.

- Senders are counties where the number of persons with a permanent address there before becoming homeless exceeds the number currently homeless and resident there by at least 10%.
- **Receivers** are counties where the number of persons with a permanent address there before becoming homeless falls below the number currently homeless and resident there by at least 10%
- Retainers are counties where those numbers are within 10% of each other.

As Table 32, below, shows, at the county level, no county falls within the Sender designation.

### 5c. NJ Counts (PIT Count)-a 7 year look: Findings

NJCounts - 7 Year Analysis - By County

County	Number Homeless (2015-17 Avg)	Number Homeless (2020-22 Avg)	Number Homeless Rank	Change in Number Homeless (Avgs)	Change in Number of Homeless Rank (7 year)	Population (2020-21 Avg)	Homelessness Rate	Homelessness Rate - Rank	Status
Atlantic	612	476	9	-136	14	274,579	1.7%	2	Receive
Bergen	333	320	13	-13	5	954,297	0.3%		Receive
Burlington	1,014	621	5	-393	21	463,066	1.3%	6	Receive
Camden	796	705	4	-91	10	523,488	1.3%	5	Receive
Cape May	139	116	19	-24	6	95,369	1.2%	8	Receive
Cumberland	247	145	18	-102	11	153,738	0.9%	12	Retaine
Essex	2,036	2,063	1	27	2	858,475	2.4%	1	Receive
Gloucester	306	155	17	-152	15	303,542	0.5%	19	Retaine
Hudson	900	845	3	-55	8	712,559	1.2%	9	Receive
Hunterdon	232	185	15	-47	7	129,382	1.4%	4	Receive
Mercer	682	495	8	-187	17	386,329	1.3%	7	Receive
Middlesex	1,245	1,006	2	-238		861,358	1.2%	10	Receive
Monmouth	939	599	6	-340		644,259	0.9%	13	Receive
Morris	653	355	12	-298		509,991	0.7%	17	Receive
Ocean	469	406	11	-64	9	643,911	0.6%		Receive
Passaic	550	448	10	-102	13	520,609	0.9%	15	Receive
Salem	41	33	21	-8	4	64,953	0.5%	20	Retaine
Somerset	314	316	14	2		345,331	0.9%	14	Receive
Sussex	281	107	20	-174	16	144,813	0.7%	16	Receive
Jnion	524	569	7	46	1	573,232	1.0%	11	Retaine
Warren	261	158	16	-102	12	110,163	1.4%	3	Receive

Table 32

Insights from the aggregated 7-year NJCounts data include:

• Essex County has the highest homelessness rate: Essex County has the highest homelessness rate in the state, with a rate of 2.40%. This is significantly higher than the state average of 1.02%.

- The number of homeless individuals has decreased in some counties: While the overall trend in New Jersey is an increase in homelessness, some counties have seen a decrease in the number of homeless individuals. For example, Bergen County has seen a decrease in homelessness by 13 individuals.
- Hunterdon County has a high homelessness rate despite a relatively low population: Hunterdon county has a homelessness rate of 1.43%, which is the fourth highest in the state, despite having a relatively low population of 129,382.
- Receiver status: Most counties in New Jersey are labeled as "Receiver," which means they have a higher than average homelessness rate compared to the rest of the state. The exception is Salem County, which is labeled as a "Retainer" since it has a lower than average homelessness rate compared to the rest of the state.

6. Benchmarking performance: leveraging systemsthinking to reduce homelessness. Introduction

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Performance Snapshot -2022

OHP ANNUAL REPORT - 2022

### 6a. Benchmarking performance: Introduction

Throughout this report, the majority of data presented have had to do with inputs and outputs of the NJ HPSE, but not outcomes. In the discussion and analysis that follows, we will outline some of the metrics tracked by OHP to benchmark HPSE performance.

#### Leveraging systems-thinking

Systems thinking is a way of understanding and addressing complex problems by looking at the relationships and interactions between different parts of a system rather than focusing on individual parts in isolation. In the context of homelessness in New Jersey, systems thinking can be a powerful tool for understanding and addressing the complex and interconnected factors that contribute to homelessness.

One key aspect of systems thinking is the recognition that problems such as homelessness are often caused by a combination of structural and individual factors. Structural factors refer to the larger societal and economic conditions that contribute to homelessness, such as a lack of affordable housing, inadequate income support, and a lack of access to healthcare and mental health services. Individual factors, on the other hand, can include personal challenges such as mental illness, substance abuse, and trauma. As seen from the data and analysis presented earlier in this report, both micro and macro level factors influence not only who is experiencing homelessness in our state, but also, who are those that are at-risk.

To address homelessness effectively, it is necessary to understand how these structural and individual factors interact and how they contribute to homelessness. This requires a holistic and comprehensive approach that takes into account the complexity of the problem.

Another important aspect of systems thinking is the recognition that homelessness is not just an individual problem, but a community one as well. This means that addressing homelessness requires a collective effort and a willingness to address the root causes of homelessness at the local, county, state, and federal levels. Acknowledging this fact is key and the reason that OHP refers to this interconnected whole at the homelessness prevention and services ecosystem (HPSE).

#### Applying systems thinking

One way to apply systems thinking to addressing homelessness is to use a systems mapping approach. This involves creating a visual representation of the different factors that contribute to homelessness and how they interact with each other. This can help to identify the key drivers of homelessness and the most effective points for intervention. The preceding report and its visualizations and data are part of OHP's system mapping work in 2022.

As the office increases its data footprint and sources of collection into 2023, future reports will be much more robust.

### 6a. Benchmarking performance: Introduction (con't)

#### Systems dynamics

Another way to apply systems thinking to homelessness is to use a systems dynamics approach. This involves using machine learning and statistical modeling to simulate the complex interactions between different factors and predict how they might change over time. This can help to identify the most effective interventions for addressing homelessness and to understand how different interventions might interact with each other. As of this writing, OHP & its parent organization DCA have already begun laying the groundwork and infrastructure for this venture.

#### **Benchmarking performance**

As demonstrated throughout the nation with Community Solution's Built-for-Zero framework, system throughput to housing is a key performance indicator (KPI) for both homelessness prevention and homelessness exit activities.

Throughput is a term that refers to the rate at which individuals or units pass through a system. In the context of ending homelessness, throughput refers to the rate at which homeless individuals are able to move through the homelessness service system and into stabilized housing.

The concept of throughput is important in ending homelessness because it highlights the need to create an efficient and effective system for addressing homelessness. A system with high throughput is one that is able to quickly and effectively move homeless individuals through the system and into stable housing. This can be important because long periods of homelessness can have negative impacts on an individual's physical and mental health, as well as their prospects for achieving stability and self-sufficiency.

#### **Throughput rate**

Throughput rate, also known as "flow rate", is the rate at which production (of either a good or service) occurs over a known period of time. Applied to homelessness and housing systems, the service is understood as the coordinated movement of a household or individual from the beginning of the system (e.g., Calling NJ 211 or walking into a County Welfare Agency or Coordinated Entry Hub to signal homelessness or risk of homelessness) to the end of the system (i.e., becoming housed and/or no longer at immediate risk of homelessness).

The throughput formula, derived from Little's Law, is as follows:

#### TH = I/T

#### Where:

- **TH** = Throughput (or the average output of a service for a period of time)
- I = Inventory (or end point of system/resource that is created)
- **T** = Time (how long it takes to create the inventory/process)

### 6a. Benchmarking performance: Introduction (con't)

#### Key metrics using this framework for the NJ HPSE

As the state deploys additional resources and programs over the next year that are aligned with the United States Interagency Council on Homelessness' federal strategic plan (https://www.usich.gov/all-in/) to reduce unsheltered homelessness in New Jersey, key gauges to understand and reinforce efforts across New Jersey are necessary to measure both the rate at which persons experiencing homelessness are being housed and the levels of equilibrium between inflows into the HPSE and outflows to housing destinations.

As such, the following metrics are used by OHP as gauges for these two measures:

1. Inflow/Outflow Ratio (IR):

 $IR = \frac{\# of \ distinct \ persons \ admitted}{\# of \ distinct \ persons \ discharged}$ 

2. Inflow/Outflow Ratio to Housing Destination (IRH):

IRH = # of distinct persons admitted # of distinct persons discharged to housing

3. 12-month Housing Throughput (MHT):

MHT = total # of persons discharged to temporary & permanent housing in one year

In the following pages, we will present and discuss current system performance, using the measures above.

### 6b. Benchmarking performance: System throughput

NJ HPSE - Inflow/Outflow - 2022 - # of distinct persons

All System - 2022

County	Inflow	In-system	Outflow	Outflow to Temp or Perm Housing Exit
ATLANTIC	2794	4362	2531	1,730
BERGEN*	2271	2348	2047	*
BURLINGTON	6095	7398	5472	1,761
CAMDEN	3030	6567	2683	1,276
CAPE MAY	865	1008	840	91
CUMBERLAND	1671	3577	1389	511
ESSEX	13769	22715	13708	4,528
GLOUCESTER	2383	3295	2245	536
HUDSON	7530	15339	7550	3,467
HUNTERDON	499	736	464	217
MERCER	6899	9653	4071	1,246
MIDDLESEX*	4253	4820	3879	*
MONMOUTH	4230	11969	3756	1,558
MORRIS	2283	3560	2120	513
OCEAN	3366	4046	2846	687
PASSAIC	4832	12354	3387	393
SALEM	536	649	547	134
SOMERSET	1546	2001	1597	659
SUSSEX	1359	1573	1421	1,104
UNION	4690	7005	4215	1,597
WARREN	566	692	579	82

\*Discrete discharge data for these counties not available at time of report. Table: OHP/DCA · Source: NJ HMIS · Created with Datawrapper

#### Table 33

As shown in Table 33, above, system throughput to housing is quite variable throughout New Jersey.

Similarly, the data above underscores the importance of standardized data collection in NJ HMIS and the need for improved reporting standards and data governance across agencies in the NJ HPSE.

A discussion of the data in Table 33 follows:

## 6b. Benchmarking performance: System throughput (con't)

Some insights that can be drawn from this dataset include:

- Inflow is greater than outflow in most counties: In most counties, the number of individuals entering the homeless system (inflow) is greater than the number of individuals exiting the system (outflow). This indicates that the homeless system in New Jersey is struggling to keep up with the demand for services.
- Outflow to housing exit is relatively low: The number of individuals exiting the homeless system and moving into housing (outflow to housing exit) is relatively low compared to the overall outflow. This suggests that there is a shortage of affordable housing options for individuals exiting the homeless system and that data quality initiatives need to be leveraged to improve insights.
- Essex County has the highest inflow and in-system counts: Essex County has the highest inflow and in-system counts, indicating a high demand for homeless services in the county.
- Hunterdon County has a low inflow and in-system count: Hunterdon County has a relatively low inflow and in-system count.
- Camden County has a high in-system count compared to inflow and outflow: This may suggest that individuals are staying in the homeless system for longer periods of time in this County.
- Passaic County has a high outflow count compared to inflow and in-system counts, but a relatively small number of persons exiting to housing outcomes.
- Sussex County has a high outflow to housing exit ratio: Sussex County has a high outflow to housing exit ratio, indicating that a relatively high number of individuals exiting the homeless system in this county are able to secure housing.
- The majority of outflows are to an unknown destination: The dataset shows that the majority of outflows (outflow to unknown) are to an unknown destination, which suggests a lack of data on where individuals are going after exiting the homeless system. This highlights the need for more comprehensive data collection and reporting on housing outcomes for individuals experiencing homelessness.
- Inflow and in-system counts are higher in more populous counties: In general, more populous counties tend to have higher inflow and in-system counts, which suggests that the demand for homeless services is greater in these areas.

# 6b. Benchmarking performance: System throughput (con't)

#### NJ HPSE - System Performance - Throughput Metrics

1.23 2 12.3

County	I/O Ratio - Baseline	I/O Ratio - Housing Exit	Monthly Throughput - Temporary and Permanent Housing Situations (persons per month)	25% improvement (persons per month housed)	50% improvement (persons per month housed)	To Achieve Parity with 2022 Admissions (persons per month housed)
ATLANTIC	1.10	1.62	144	180	216	233
BERGEN*	1.11	*	*	*	*	189
BURLINGTON	1.11	3.46	147	183	220	508
CAMDEN	1.13	2.37	106	133	160	253
CAPE MAY	1.03	9.51	8	9	11	72
CUMBERLAND	1.20	3.27	43	53	64	139
ESSEX	1.00	3.04	377	472	566	1,147
GLOUCESTER	1.06	4.45	45	56	67	199
HUDSON	1.00	2.17	289	361	433	628
HUNTERDON	1.08	2.30	18	23	27	42
MERCER	1.69	5.54	104	130	156	575
MIDDLESEX*	1.10	*	*	*	*	354
MONMOUTH	1.13	2.72	130	162	195	353
MORRIS	1.08	4.45	43	53	64	190
OCEAN	1.18	4.90	57	72	86	281
PASSAIC	1.43	12.30	33	41	49	403
SALEM	0.98	4.00	11	14	17	45
SOMERSET	0.97	2.35	55	69	82	129
SUSSEX	0.96	1.23	92	115	138	113
UNION	1.11	2.94	133	166	200	391
WARREN	0.98	6.90	7	9	10	47

\*Discrete discharge data for these counties not available at time of report. Table: DCA/OHP + Source: NJ HMIS + Created with Datawrapper

Table 34

As shown in Table 34, above, the I/O ratio measure indicates the balance between homelessness inflows and outflows in a county.

Lower values of the I/O ratio indicate that more people are exiting the homelessness prevention & services ecosystem, than entering it, which is a positive sign, however, this ratio needs to be contextualized with its partner, I/O Ratio to Housing Exit, which signals the success of a system to exit persons at-risk of homelessness and experiencing homelessness to stabilized housing outcomes.

A discussion of the data in Table 34 follows:

## 6b. Benchmarking performance: System throughput (con't)

Some insights that can be drawn from this dataset presented above in Table 34 include:

- Above State Average: Several counties such as Cape May, Gloucester, Mercer, Morris, Ocean, and Passaic have housing exit I/O ratios that are above the state average, indicating that they may need additional resources beyond most other counties in the state to improve in terms of homelessness exits to permanent housing situations.
- Improvement: The columns for 25% improvement, 50% improvement, and total parity indicate the potential improvements in the monthly throughput that could be achieved by implementing various strategies. Given the large amount of destination data that is unknown throughout the state, for many counties, a targeted data improvement initiative could potentially demonstrate an overall system picture that is higher performing than currently benchmarked.
- Below State Average: Counties such as Atlantic, Burlington, Camden, Cumberland, Essex, Hudson, Middlesex, Somerset, Union, and Bergen have housing exit I/O ratios below the state average, indicating that alignment of resources and providers in the regional HPSEs were leveraged to improve their efforts to help people transition from homelessness to permanent housing situations. Additionally, cultivating cross-talk and coaching between county systems with high and low I/O ratios may substantially improve outcomes.
- Moderating & Mediating Factors: While I/O Ratios are good measures of system performance, a key reminder is that the providers in this system, the persons at its center, and the funders underwriting its interventions are very much dependent upon an available and accessible affordable housing stock to exit persons from their systems successfully. Later this year, OHP, in partnership with other state departments and agencies, will be producing some additional materials that map out the moderating and throttling effects of the current housing landscape in New Jersey has on exiting persons from homelessness and sustaining those exits.

### 7. Conclusions & The year behind & ahead.

Conclusion

Α

В

C

OHP: the year before

OHP: the year ahead

OHP ANNUAL REPORT - 2022

### 7a. Conclusion

In conclusion, the current state of homelessness in New Jersey presents a complex and multifaceted challenge that demands a comprehensive and collaborative approach. The data analyzed in this report reveals several key insights that can inform our understanding of the issue and guide future efforts to address it:

- The demographic profile of individuals experiencing homelessness in New Jersey varies across counties, with notable disparities in the racial and ethnic composition, gender, and age distribution of the homeless population. This underscores the need for targeted and tailored interventions that consider the unique needs and contexts of different communities.
- The high rates of eviction, job income loss, and individuals being asked to leave shared residences as causes of homelessness indicate that economic factors, housing affordability, and social support networks play a critical role in the prevalence of homelessness in the state. Addressing these underlying issues will be crucial to preventing and alleviating homelessness.
- The data on causes of homelessness also highlights the importance of addressing mental health, substance abuse, and other health-related factors in any comprehensive plan to reduce homelessness. Collaborative efforts between healthcare providers and homelessness service organizations will be essential in this regard.
- The integration of individuals with lived experience of homelessness into policy-making and service delivery processes is vital to ensuring that the perspectives and insights of those directly affected by housing insecurity are considered in the development and implementation of effective interventions that can be micro-targeted at the local levels.
- Building collaborative networks that involve municipal, county, faith-based organizations, landlords, businesses, and healthcare providers is crucial to creating a holistic ecosystem that addresses homelessness and its underlying causes.
- Enhancing the capacity for data analysis and collaboration among stakeholders can help identify trends, monitor progress, and inform targeted and evidence-based interventions to address homelessness in New Jersey. By developing robust systems for data collection, sharing, and analysis, stakeholders in the NJ HPSE will be better equipped to identify gaps in service provision, track the effectiveness of interventions, and allocate resources efficiently.
- GINI index data (statistical dispersion for inequality) for the counties with both the highest rates of unsheltered homelessness and poorest throughput to housing outcomes indicates that income inequality may strongly contribute to the prevalence of homelessness in certain areas. Addressing systemic inequalities and promoting economic opportunities for vulnerable populations will be an important part of any long-term strategy to prevent and reduce homelessness in the state.

### 7a. Conclusion (con't)

- Further, the GINI index data for the counties in question indicates that income inequality may strongly contribute to the prevalence of homelessness in certain areas. Addressing systemic inequalities and promoting economic opportunities for vulnerable populations will be an important part of any long-term strategy to prevent and reduce homelessness in the state.
- A comparison of 2022 homelessness data with 2010 and 2020 Census data on housing vulnerabilities reveals that the issue of housing insecurity has evolved over the past decade, and will likely continue to do so in New Jersey. This highlights the need for ongoing monitoring, evaluation of historical programs, and adaptation of strategies and interventions to ensure their continued relevance and effectiveness into 2030.
- Exploring additional quantitative measures, such as rent metrics and other housing affordability indicators, can provide a more nuanced understanding of the factors contributing to homelessness in New Jersey. This information can be used to inform targeted policy actions and investments in affordable housing and homelessness prevention initiatives.

In light of these findings, it is clear that addressing homelessness in New Jersey requires a comprehensive, data-driven, and collaborative approach that involves stakeholders at multiple levels and sectors. By integrating the insights and expertise of individuals with lived experience, fostering partnerships between state agencies, and leveraging the resources and capacities of municipal, county, faith-based organizations, landlords, businesses, and healthcare providers, it is possible to create a more effective and responsive system for preventing and addressing homelessness in the state so that all our neighbors, regardless of situation, circumstances, or background, have a home to call their own.

### 7b. OHP: The Year Behind

Importantly, many of the trends and data points shared in this report were modeled and observed in the late summer of 2022 by the OHP data team. In communicating many of the findings to leadership within the state, these insights allowed for the rapid intervention, supports design, increased cross-sector/government collaborations, and resource allocations to address housing insecurity and the micro-targeting of novel prevention of homelessness programs in the state.

#### **Diversion Expansion**

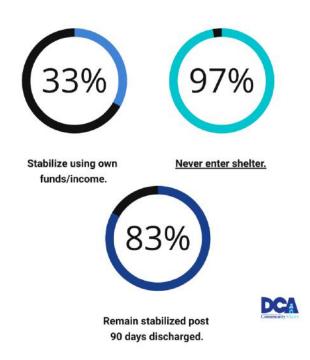
With the sunset of many COVID programs and funding streams in the NJ HPSE, an imperative to reduce the inflow into the system was made apparent in mid 2022. Through a nearly \$5 million dollar expansion of OHP's Homelessness Diversion Pilot program, over 1400 households were diverted from entering the shelter system and allowed for non-scalable programs or those with limited resources (e.g., emergency shelter) to be accessed by individuals with higher housing crisis acuity, all the while maintaining and facilitating a rapid exit from housing crisis for those with lower acuity and demographic characteristics supportive of a rapid, low-cost intervention.

Given that inflow affects all parts of the system downstream, in mid 2021, OHP piloted its Diversion program - a low-barrier (meaning no AMI limitation) & rapid housing stabilization case management that is tied with flexible financial assistance to help persons rapidly stabilize their housing.

To date, OHP Diversion has <u>prevented</u> 1442 households of over 1600 people from entering the system at an average cost of <u>less than \$760 per</u> <u>household</u>.

Other key outcomes can be seen, right:

In Newark, the initial pilot (@MHA Inspire) was so successful that resources were increased in FY23 to an additional two programs (@Bridges & @UCC) to over \$1.15 million in program funding from DCA.



#### Addressing Rural and Suburban Unsheltered Homelessness

As the data presented earlier evidenced, on average in 2022, 5% of persons accessing the NJ HPSE in a county were experiencing unsheltered homelessness over the course of a year. However, a deep dive into datasets and program participant profiles in the more rural counties and areas of the state signaled a paucity of robust resources to engage with these persons. Similarly, downstream participant data from persons accessing emergency shelter in these counties (e.g., Hunterdon and Salem) strongly indicated that the longer time a person reported that they spent in unsheltered conditions, the longer

### 7b. OHP: The Year Behind (con't)

dwell time in shelter would be required to discharge that person into a sustainable housing destination.

Given this finding, OHP rapidly conceptualized its Rural and Suburban Outreach & Engagement Program and deployed \$2 million dollars in funding to the most rural counties in the state to built the requisite infrastructure and program capacity to bolster existing programs in these areas (e.g., PATH). In many cases, the deployment of this funding and the programmatic supports effectively doubled the amount of professional mobile case management and targeted services to address unsheltered homelessness in these areas.

#### **Data for Impact**

In 2022, with a significant number of individuals accessing the system for prevention and support services, it became imperative to concentrate a portion of OHP's efforts on aligned departmental initiatives on eviction prevention, rental assistance, and utility assistance for those on the brink of homelessness. This tactical focus played a pivotal role in curbing the influx of people entering homelessness in 2022 and supporting the impact of OHP's sister offices.

Leveraging the expertise of OHP's enhanced data capacities and team, a powerful synergy was forged with the Office of Eviction Prevention, Office of Housing, Office of Community Resources, and Office of Housing Production, as well as other partners within the Division of Housing and Community Resources. By harnessing the power of data science, these collaborative efforts successfully connected over 1 million distinct New Jersey residents to programs designed to bolster their housing stability and security.

This impactful collaboration not only strengthened the support network for vulnerable populations but also demonstrated the remarkable potential of data-driven decision-making in addressing and mitigating the complex issue of homelessness.

#### Applying startup culture to homelessness prevention

OHP's startup culture and innovation mindset is changing the way homelessness is conceptualized and addressed across the state. By adopting an agile approach and methodology, OHP is demonstrating that, with coaching and technical assistance, organizations in the NJ HPSE can quickly identify and scale effective interventions, and adapt to changing circumstances, even in environments of resource scarcity through data-driven resource optimization. Similarly, OHP's cross-sector collaboration fosters a comprehensive and coordinated approach, leveraging diverse stakeholders' strengths and resources.

Similarly, OHP's embrace of cutting-edge technology, such as data analytics and machine learning, provides deeper insights into homelessness causes and patterns, leading to targeted prevention and intervention strategies. OHP's creative problem-solving processes encourage unconventional and transformative strategies to combat homelessness and fully embraces the totality of housing insecurity in New Jersey with data being the prime component to scoping policy and programmatic responses to that social problem.

### 7c. OHP: The Year Ahead

The data presented in this report on homelessness and those at-risk of homelessness in New Jersey highlight the complexity and multifaceted nature of this issue. Clearly, from the findings above, it is evident that various factors contribute to homelessness through the state, and that these factors disproportionately impact different populations.

In order to create an actionable roadmap for change, it is essential to address the unique challenges faced by each group, as well as the overarching systemic issues contributing to homelessness in the state.

Following the analysis above, OHP's plan for the year ahead (2023) outlines four key areas of focus for its operations:

- Systems Data Improvement, Analytic Capacity, and Collaboration
- Integration of Persons With Lived Experience & Expertise into Design, Delivery, and Data Communication
- Increase Prevention & Services Collaboration Between State Agencies in New Jersey
- After-Action Review & Lessons Learned from COVID programming

#### 1. Systems Data Improvement, Analytic Capacity, and Collaboration

In order to effectively address homelessness in New Jersey, it is essential to improve the quality and accessibility of data by all persons and entities in the ecosystem, as well as the capacity to analyze and use this information for decision-making.

OHP will take the following steps to achieve this goal in the year ahead:

1a. Establish a centralized homelessness datalake and dashboarding platform: Create a centralized and stakeholder accessible datalake and dashboard that consolidates data on homelessness from various sources in New Jersey, such as the New Jersey Homeless Management Information System (NJ HMIS), census data, local surveys, and other state homelessness data sources. This repository will enable stakeholders to access and share up-to-date information, facilitating informed decision-making.

Status: In-progress as of March 2023

1b. **Strengthen data collection and reporting**: Standardize data collection methods and reporting formats across all organizations involved in addressing homelessness in New Jersey and work with partners at NJ HMIS @ NJ HMFA to established an enhanced data governance framework. This will ensure consistency and accuracy in the data being used to inform policy and service delivery decisions. Provide training and resources to support organizations in their data collection efforts, and encourage regular data audits to maintain the integrity of the data.

Status: In-progress as of April 2023

1c. Enhance HPSE analytic capacity: Invest in building the capacity of stakeholders to analyze and interpret data on homelessness. This will be achieved through training programs, workshops, and the development of user-friendly data visualization tools that allow users to explore trends and patterns. Additionally, support collaboration between researchers, practitioners, and policymakers to translate data insights into actionable recommendations.

*Status*: Grant programs (Data-driven Decision Making - Organizational Enhancement Program & Datadriven Decision Making - Organizational Change Program) currently open for RFP.

*Data-Driven Decision Making - Organizational Enhancement Program*: The intent of this funding is to build data analytics and data-driven decision-making capacity throughout the State of New Jersey's homelessness prevention service ecosystem (HPSE) at the organizational and Continuum-of-Care levels of service for entities working with persons experiencing homelessness and those at-risk of homelessness.

The funding from this grant will be utilized by the 16 CoC's in New Jersey to hire data analyst personnel, purchase analytics and technology infrastructure, and support data strategic planning activities across the state.

*Data-Driven Decision Making - Organizational Change Program*: the awardee of this grant will be expected to develop, deploy, and execute a 12-week long, cohort-based organizational development curriculum that trains Continuum-of-Care leadership teams (awardees of the FY23 Data-Driven Decision-Making Organizational Enhancement Program – Track 1) on the following topics:

- Incorporating Data Driven Decision Making in multi-stakeholder organization business processes and operations.
- An introduction to the PPDAC (Problem, Plan, Data, Analysis, and Conclusion) and CRISP-DM (Cross Industry Standard Process for Data Mining) business data process frameworks.
- Leveraging business intelligence and data visualization tools (e.g., Tableau, Qlik, PowerBI, Google Data Studio, etc.) in business process and program evaluation.
- Sourcing techniques for primary data (from NJ HMIS and other locally used case management tools) and secondary datasets (e.g., US Census/ACS, CMS/Medicaid, and open-source data).
- Using data to develop KPIs and/or OKRs for CoC organizational planning enhancement and leveraging data for system equity and outcome evaluations.
- Leveraging all-source data and mixed-methods analysis to support community homelessness prevention efforts (e.g., establishing persons with lived experience and expertise feedback loops, Built for Zero or systems modeling frameworks, Continuum-of-Care by-name initiatives).

Programs expected to be executed on or about June 2023.

1d. **Promote information sharing and collaboration**: Establish forums, meetings, or online platforms where stakeholders can share insights, best practices, and challenges related to addressing homelessness. Encourage the development of partnerships between organizations to leverage resources and expertise, and foster a collaborative approach to problem-solving.

*Status*: Pilot initiatives started March 2023 in City of Newark and City of Atlantic City for cross-data matching (with OHP TA & support) to align homelessness prevention efforts of CoC, municipal government, law enforcement, community-based organizations, and other statekholders to reduce both time to signal of homelessness and time to service.

Currently OHP's data team is working with the City of Newark's Office of Homelessness Services for total integration of OHP's funded diversion programs with a web-based referral platform for real time connection between persons accessing services at the 110 William St. office and persons engaged by the City's Homeless Outreach Team to expedite diversion services for constituents in need.

Similarly, OHP is working with the City of Atlantic City's Human Services, Office of Emergency Management, and Police Department on a data integration process and platform to connect officials doing homelessness outreach and safety patrolling on the Atlantic City Boardwalk to facilitate the rapid resource connection and service coordination for persons experiencing a housing crisis.

Expansion of collaborative data effort to rural counties in New Jersey aligned with OHP's Rural and Suburban Outreach program pilot in Summer 2023.

#### 2. Integration of Persons with Lived Experience and Expertise Across NJ HPSE

To ensure that policy actions and service delivery are tailored to the needs of those experiencing homelessness, especially as the data in the report signal significant differences in the challenges to become housed across diverse groups experiencing homelessness, it is crucial to involve individuals with lived experience in the system and interventional decision-making, design, and data processes.

OHP will take the following steps to achieve this goal in the year ahead:

2a. Establish advisory groups and boards: Create advisory groups consisting of individuals who have experienced homelessness to inform policy and service delivery decisions in all 16 of New Jersey's CoCs and 21 of New Jersey's counties. These groups will provide invaluable insights into the barriers faced by those experiencing homelessness and suggest practical solutions based on their personal experiences.

*Status*: OHP has engaged with Monarch Housing Associates to help assist in the formation and execution of these advisory bodies. Statewide project kicked off in late March 2023.

2b. Facilitate peer support and mentorship: Work with nascent advisory boards and NJ CoCs to develop and incorporate peer support and mentorship programs, especially for those desiring to work in the homelessness services space, through the Housing and Homelessness Case Management Institute soon to be established through the Division oHousing and Community Resources at DCA. These programs can provide valuable emotional and practical support to those navigating the complexities of homelessness and can create opportunities for personal growth and skill development.

#### Expected start: Q3 2023

2c. Create opportunities for shared learning and dialogue around equity: OHP will organize events and activities that bring together individuals with lived experience, policymakers, service providers, and other stakeholders to discuss issues related to homelessness and have purposive conversations on equity in the HPSE. OHP will partner with providers and other entities throughout the state to host community forums that facilitate open dialogue and knowledge sharing to work towards a mixedmethods evaluative framework to measure impact on system equity.

*Status*: OHP has begun the first of its Equity Fridays talks, starting in February 2023. Expansion and growth of this effort will be aligned with the PWLEE Advisory Board creation line-of-effort.

#### 3. Increase Prevention & Services Collaboration Between State Agencies in New Jersey

3a. Conceptualize and implement focused and location-specific inter-agency technical assistance initiatives on homelessness in the state: OHP will organize an initial meeting for cabinet-level leadership of the state's departments to give leadership a targeted briefing on the materials in this report and suggested areas of collaborative effort to reduce homelessness in the state based upon trending data.

Following this meeting, and agreed upon task organization, OHP will convene a 2nd meeting with members of the Governor's Taskforce on Homelessness to inform the creation of a roadmap to guide deployments of inter-agency technical assistance teams using the following framework:

#### Month 1-2:

- Convene representatives from state agencies, local governments, non-profit organizations, and community groups to form a cross-agency working group to conceptualize technical assistance initiatives for addressing homelessness in targeted regions.
- Develop a shared vision for ending homelessness in the state and identify target areas for focused and location-specific inter-agency technical assistance initiatives.

#### Month 3-4:

- Develop a comprehensive plan for each targeted area, with input from all working group members.
- Assign specific tasks and responsibilities to each working group member based on their areas of expertise and resources.
- Set a deadline for completing the technical assistance plans and scheduling the launch of the targeted technical assistance strategies in each identified region.

### Month 5-6:

- Launch targeted and location-specific technical assistance initiatives in the identified regions, such as training sessions for service providers, coordinated entry integration across state programs, and outreach campaigns to raise awareness of available resources.
- Monitor progress and adjust technical assistance strategies as needed to ensure that they are effective in addressing the needs of individuals and families experiencing homelessness in each identified region.

### Month 7-8:

- Evaluate the effectiveness of the technical assistance initiatives on reducing homelessness in the identified regions.
- Use the findings to refine the technical assistance plans and make any necessary changes for future technical assistance initiatives.

### Month 9-10:

- Share best practices and lessons learned from the technical assistance initiatives across all stakeholders, including state agencies, local governments, non-profit organizations, and community groups.
- Develop a roadmap for scaling up successful technical assistance initiatives statewide to make a significant impact on reducing homelessness in New Jersey.

### 4. After-Action Review & Lessons Learned from COVID homelessness programming & interventions

In addition to the above technical assistance collaboration, OHP will also facilitate an ecosystem-wide after-action review and evaluation process to ensure that both the institutional knowledge developed during the COVID crisis and the flexible operational and innovation lessons to rapidly deliver homelessness services in a crisis are not forgotten.

The following framework will be used in furtherance of this goal:

**4a. Appoint a central task force**: Solicit and establish a dedicated task force consisting of representatives from various stakeholder groups in the HPSE, including government agencies, healthcare providers, housing entities, and community-based organizations. The task force will lead the initiative and coordinate efforts to gather insights and best practices from the COVID crisis.

**4b. Conduct a comprehensive review of COVID programs:** Task the central task force with conducting a thorough review of the policies, programs, and interventions implemented during the COVID crisis to address homelessness. This review should identify successful strategies and lessons learned, as well as challenges and areas for improvement.

**4c. Organize cross-sector workshops:** OHP will host a series of workshops, webinars, or virtual roundtables that bring together representatives from different stakeholder groups for the HPSE to share their experiences, challenges, and successes during the COVID crisis. Encourage open dialogue, knowledge sharing, and collaborative problem-solving.

**4d. Develop a knowledge repository:** OHP will create a centralized, easily accessible repository of information and resources related to the COVID crisis, programming and materials developed and rapidly scaled, and their on-going impact on homelessness in New Jersey. This repository should include case studies, best practices, research findings, and other relevant data to support evidence-based decision-making.

**4e. Implement a rapid response training program:** Based on the insights gathered from the review and workshops, OHP will design and implement a training program for stakeholders that focuses on building capacity to rapidly respond to homelessness. This program should include modules on crisis management, data-driven decision-making, and cross-sector collaboration to further support parallel OHP efforts on-going in the ecosystem.

Status: To be started mid-Q3

## **Appendix A**



### Except where noted (see NJCounts data), this report was compiled using data extracted from NJ HMIS using the following process:

- A standardized report framework was created using HMIS ReportBuilder and saved to ExportBuilder as "OHP Client Insights All Features ADM & DIS".
- Two extracts for 2021 (1/1/2021 12/31/2021) and 2022 (1/1/2022 through 12/31/2022) were generated from NJ HMIS using the saved report from HMIS ReportBuilder for All Agency Programs (all non-training programs in the database).
- For both years, Roster Date Range was set to In-Program.
- Dates were set as identified above.
- The two extracts were exported from NJ HMIS as CSV files and imported to Tableau PrepBuilder 2022.4.
- The following features (i.e., columns) were standardized and cleaned in each dataset as follows:
  - Program entries with null (empty) county data were adjusted to their respective county of operations.
  - ZIP Codes were standardized to 5-digit format to protect PII.
  - Date and time entries were standardized to mm/dd/yyyy format.
  - Gender, Ethnicity, and Racial data were condensed and standardized to a reasonable number of major categories.
  - All entries with missing or refused client-level data, e.g., "None, N/A, Unknown, Not asked, etc." values, were given a standard "Client doesn't know, refused, or not collected" label.
- The following calculated fields were created for each year's dataset:
  - # of distinct persons: a distinct count of the PersonalID field in each dataset.
  - For insight into the logic used by PersonalID on the AWARDS platform, please go to: <u>https://awards.clickhelp.co/articles/#!user-guide/hmispinassignmentrules</u>.
  - # of distinct households: a distinct count of the Global Household ID field in each dataset.
  - # of encounters: a distinct count of the Encounter Record value in each dataset.
  - # of programs: a distinct count of the Program Name field in each dataset.
  - # of providers: a distinct count of the Program Division field in each dataset.
- Following these operations, two extracts were created and uploaded to DCA/OHP's Tableau Cloud instance for visual cross tabulation and manipulation of the data.
- Separate workbooks were produced and saved in the instance for each year, to ensure continuity and preserve opportunity for further analysis.
- Calculations were cross referenced and verified using Excel & R.
- Visualizations were produced via CSV extracts of workbook data using the "datawrapper" and "matplotlib" libraries in Python.





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