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The Homeless Management Information System

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Summary

Beginning in 1998, Congress directed the Department of Housing and Urban Development (HUD) to develop a process for collecting data on the homeless. Together with local communities, HUD began in 2001 to implement a Homeless Management Information System (HMIS). The process is ongoing, with the first Annual Homeless Assessment Report (AHAR) expected in early 2006. This report, which describes previous attempts to count the homeless, the development of HMIS, and its current progress, will be updated as events warrant.

Introduction

Our knowledge of the number and characteristics of the homeless is uncertain due to the transient nature of the population. Although attempts to count and describe the homeless have been made in recent decades, no systematic method for tracking the homeless has existed until now.¹ In response to a directive from Congress, the Department of Housing and Urban Development (HUD) began to develop a system to track the homeless in 2001, with the goal of full implementation by 2004. The HUD plan calls for local communities and their homeless service providers to gather information about homeless individuals, and enter and store the information in databases at the local level. This data collection, organization, and storage system has been termed the Homeless Management Information System (HMIS).

¹ As defined by the McKinney-Vento Homeless Assistance Act (P.L. 100-77), a homeless person is "(1) an individual who lacks a fixed, regular, and adequate nighttime residence; and (2) an individual who has a primary nighttime residence that is — (A) a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill); (B) an institution that provides a temporary residence for individuals intended to be institutionalized; or (C) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings."

Two types of organizations are required to participate in HMIS: those that receive funding through the Housing Opportunities for Persons with AIDS (HOPWA) program,² and those that receive Homeless Assistance Grants. The Homeless Assistance Grants are part of the McKinney-Vento Homeless Assistance Act (P.L. 100-77)³, and consist of both formula grants, which are distributed through the Emergency Shelter Grants program, and competitive grants, which are available through the Shelter Plus Care program, Supportive Housing Program and Section 8 Moderate Rehabilitation Assistance for Single Room Occupancy Dwellings program.⁴

The three competitive Homeless Assistance Grants are awarded through the Continuum of Care (CoC) system.⁵ CoCs are local boards formed by communities — typically cities, counties, or combinations of both — made up of representatives from nonprofit service providers, advocacy groups, local government, and other interested organizations.⁶ Local boards identify the needs of the homeless in their communities and ensure that they receive the appropriate mix of prevention activities, emergency services, transitional housing, supportive services, and permanent housing. Local homeless services providers submit requests for funding to their local boards, which in turn submit a single consolidated application to HUD. In FY2004, 444 CoCs received funding from HUD.⁷ Together, the CoC system covers approximately 93% of the country's population.⁸ HUD has charged CoCs with implementing HMIS and receiving data from all participating local service providers.

Existing Data About the Homeless

Previous attempts have been made both to arrive at an accurate count of the number of homeless in the United States and to describe their characteristics. Beginning in the mid-1990s, HUD asked CoCs to provide a count of the sheltered homeless in their annual grant applications. In 2003, it broadened the requirement and asked CoCs to provide information on subpopulations of homeless, including the number of chronically homeless, those with mental illness and HIV/AIDS, and victims of domestic violence. For the 2005 count, HUD provided more specific guidance, directing CoCs to conduct a one-night count during the month of January of both clients who used homeless services

² For more information on HOPWA, see CRS Report RS20704, *Housing Opportunities for Persons with AIDS (HOPWA)*, by Maggie McCarty.

³ P.L. 100-77 is codified at 42 U.S.C. §§11301-11435 (2003).

⁴ For more information see CRS Report RL30442, *Homelessness: Recent Statistics, Targeted Federal Programs, and Recent Legislation*, by Libby Perl.

⁵ HUD implemented the CoC system in 1994.

⁶ States may also constitute CoCs to coordinate funding in sparsely populated areas.

⁷ "Report to Congress: Fourth Progress Report on HUD's Strategy for Homeless Data Collection, Reporting and Analysis," Department of Housing and Urban Development, March 2005, p. 5, available at [http://www.hud.gov] (hereafter 2005 Report to Congress).

⁸ Conversation with Mike Roanhouse, HUD Special Needs Assistance Programs, November 3, 2005.

and those who were on the street.⁹ HUD has not publicly released the results of the most recent count; however, one newspaper contacted all CoCs in the country to obtain their 2005 data, and reported that the aggregate number of homeless counted was 727,304.¹⁰

The Urban Institute has twice estimated the number of homeless in the country, first in 1989 and again in 2000. The 1989 study collected data during a seven-day period in March 1987, and estimated that the number of homeless for that period ranged between 500,000 and 600,000.¹¹ The researchers used this seven-day estimate to project that approximately 1 million individuals were homeless at some time during 1987. The Urban Institute released its second estimate in 2000, using data collected in 1996 (by the Census Bureau) to estimate the number of all the homeless who used services during two weeks of the year. In a seven-day period during the fall of 1996, 444,000 clients used homeless assistance services, and in a seven-day period during the winter, the number was 842,000. The researchers used these numbers to estimate that in 1996, between 2.3 million and 3.5 million individuals were homeless at any given time.¹²

Several organizations have also collected information to describe the characteristics of the national homeless population. Using the data collected in 1996, the Urban Institute published demographic, income, and other information.¹³ The U.S. Conference of Mayors has issued an annual report since 1984 in which between 25 and 30 large cities survey their social service providers' efforts to combat hunger and homelessness and provide housing.¹⁴ Finally, in 2000 the Census Bureau conducted a one-day survey of homeless individuals at shelters across the country, a one-day survey of those who use soup kitchens and mobile food vans, and a one-day survey of homeless people found at outdoor locations. Based on these surveys, Census wrote a report describing basic characteristics such as location, gender, race, and age of the homeless.¹⁵

The HMIS initiative differs from these previous efforts to count the homeless and gather information. Instead of sampling only certain communities, or counting the homeless on only one night, CoCs gather information from all homeless assistance providers on all homeless individuals who use their services. Once communities have

¹² Martha Burt and Laudan Y. Aron, *America's Homeless II: Population and Services*, The Urban Institute: February 1, 2000, available at [http://www.urban.org].

¹³ Martha R. Burt, Laudan Y. Aron, et. al., "Homelessness: Programs and the People They Serve," Urban Institute, August 1999, available at [http://www.urban.org].

¹⁴ The most recent U.S. Conference of Mayors report, the *USCM-Sodexho USA Hunger and Homelessness Survey 2004*, was published in December 2004 and is available online at [http://www.usmayors.org].

¹⁵ Annetta C. Smith and Denise I. Smith, "Emergency and Transitional Shelter Population: 2000," U.S. Census Bureau, October 2001. The report is available from the Census Bureau website [http://www.census.gov].

⁹ "HUD's Homeless Assistance Programs: A Guide to Counting Unsheltered Homeless People," Department of Housing and Urban Development, October 2004, p. 1.

¹⁰ Martin Kasindorf, "Search Produces a Wealth of Data Despite Some Holes in the Canvass," *USA Today*, October 11, 2005.

¹¹ Martha R. Burt and Barbara E. Cohen, *America's Homeless: Numbers, Characteristics, and Programs that Serve Them*, (Washington, D.C.: The Urban Institute Press, July 1989), 32.

fully implemented HMIS, annual counts of sheltered homeless populations may no longer be necessary since HMIS allows CoCs to pinpoint the number of homeless on a given day. Counting homeless populations on the street might continue to be important, however, as their use of services is unknown.¹⁶

Development of the HMIS Network

Congressional Direction. Beginning in 1998, Congress asked HUD to count the homeless and gather data about both their characteristics and the use of homeless assistance services. The FY1999 HUD spending bill, P.L. 105-276, set aside up to 1% of the total appropriation for Homeless Assistance Grants for systems to track the homeless. The law referred to the House Appropriations Committee report (H.Rept. 105-610), which specifically described the type of data that HUD should collect, including an unduplicated count of the homeless; characteristics such as age, race, sex, disability status, health status, and income; types of services received; and outcomes. The report stated that the information would allow HUD to better assess the quality of service programs.

Congress provided further direction in the HUD Appropriations Act for FY2001, P.L. 106-410. The law made Supportive Housing Program funds available for local CoCs to implement management information systems.¹⁷ The Conference Report (H.Rept. 106-988) directed HUD to work with local jurisdictions to develop a system to collect data, and to be ready to analyze the data within three years of passage of the appropriations bill. The report also required HUD to report within six months to Congress on its strategy for accomplishing the data collection. The act once again allocated funds to pay for data collection, this time setting aside 1.5% of the total appropriation of \$1.02 billion. Congress has continued to allocate funds for homeless data collection in spending bills from FY2002 to FY2006.

HUD Actions. In the time since Congress directed HUD to implement a system to count the homeless and collect information on their characteristics, HUD has issued five annual reports to Congress updating its progress. In the first report, dated August 2001, HUD stated that it would help CoCs collect homelessness data through four means:¹⁸

(1) flexibly implementing the new Homeless Management Information System (HMIS) eligible activity under the Supportive Housing Program in the 2001 McKinney-Vento competition; (2) initiating a comprehensive technical assistance program to help local jurisdictions collect unduplicated client-level data by 2004; (3) developing an approach to obtaining meaningful data for an Annual Homeless

¹⁶ "A Guide to Counting Unsheltered Homeless People," Department of Housing and Urban Development, October 2004, p. 11.

¹⁷ The provision allowing HMIS funding from the Supportive Housing Program is codified at 42 U.S.C. §11383(a)(7) (2003). HUD enumerated the ways in which CoCs may use SHP funds for management information systems in the Federal Register, volume 69, no.146, July 30, 2005, p. 45890.

¹⁸ "Report to Congress: HUD's Strategy for Homeless Data Collection, Analysis and Reporting," Department of Housing and Urban Development, August 2001, p. 1, available at [http://www.hud.gov].

Assessment Report from a nationally representative sample of jurisdictions, and (4) analyzing the most viable approaches to obtaining homeless client-level reporting.

Since issuing its 2001 report to Congress, HUD has initiated a number of activities to follow through on its pledge to assist CoCs. It specified that CoCs may use Supportive Housing funds for computer hardware, software, and personnel to manage and operate information systems, analyze HMIS data, and produce reports. HUD technical assistance teams hold training sessions for CoCs across the country. In 2004 and 2005, HUD sponsored national conferences in which it provided sessions on a wide range of topics including data entry, strategies for including data on domestic violence clients and the chronically homeless, and how to use HMIS to evaluate program performance and improve services to the homeless. HUD established a website — HMIS.Info — where information about HMIS implementation across the country may be disseminated.¹⁹ Since October 2004, the HMIS.Info site has published a newsletter, managed a list serv, and hosted conference calls. In addition, a number of publications on implementing management information systems are available on the HMIS.Info website.

HMIS Data and Technical Standards. On July 30, 2004, HUD released its final notice on HMIS data and technical standards that local CoCs are expected to follow when they collect information about their homeless clients.²⁰ The standards describe two levels of data collection — universal data, which homeless service providers must collect from all clients, and program-specific data, which only programs that receive certain types of funding must collect, but that other programs are encouraged to collect as well.

Universal data elements include name, date of birth, race, ethnicity, gender, veteran's status, Social Security Number, prior residence, and disabling conditions.²¹ Program-specific data must be collected by programs with certain eligibility guidelines like income, health status, or domestic violence status. In general, all programs that receive funds under the McKinney-Vento Homeless Assistance Act and HOPWA are required to provide program-specific data; this requirement is not new, as HUD already requires them to provide this information in their Annual Progress Reports.²² Included in program-specific data elements are amount and sources of income, receipt of non-cash benefits, physical and developmental disabilities, HIV status, mental illness, substance abuse status, and domestic violence status.²³

Due to the sensitive nature of much of the information that homeless service providers must collect, some groups raised privacy concerns to HUD, particularly those that provide services to domestic violence victims during the comment period on the proposed data and technical standards. Although HUD acknowledged the sensitivity of certain information, it concluded that CoCs could collect the information in such a way that would protect the identity of those in the system, and it included privacy and security standards in the data and technical standards that all organizations must follow. In

¹⁹ The website may be found at [http://www.hmis.info].

²⁰ Federal Register vol. 69, no. 146, July 30, 2004, pp. 45888-45934.

²¹ Ibid., p. 45905.

²² Federal Register volume 69, pp. 45913-45914.

²³ Ibid., p. 45914.

addition, due to local communities' privacy concerns, HUD determined that it would not attempt to establish a national database, and would instead aggregate information from local CoCs, with personal identifiers removed, in order to analyze data.²⁴

Status of HMIS Implementation

At the local level, CoCs have several options for implementing and maintaining their HMIS databases. Not all CoCs are implementing their own HMIS. Some are collaborating to create a multi-jurisdictional HMIS. Others are planning to aggregate all data from individual CoCs at the state level. And 23 states have decided to implement a state-level HMIS.²⁵ Local initiatives also differ in their methods of incorporating service providers into HMIS. Local CoCs may use one central HMIS, into which all service providers input client information. Another option is to allow service providers to use different database systems, but to have technical specialists available at the CoC level to merge all data into one unified system. Under this approach, homeless service providers that already have systems in place do not need to change in order to comply with HMIS requirements. A third option is to use side-by-side systems where individual service providers enter data into their own systems, and also enter data into a CoC-wide HMIS.

As part of the collection of data through HMIS, HUD has announced that it will release its first Annual Homeless Assessment Report (AHAR) sometime early in 2006.²⁶ The purpose of the report is to obtain an unduplicated count of the homeless, look at patterns of service usage, and determine service needs.²⁷ According to HUD, the report will analyze data collected in 80 communities, representing 71 CoCs throughout the country, that have already implemented their HMIS. Communities represented in the first report are geographically diverse — they include central cities, urban counties, cities of more than 50,000, and rural areas.

HUD's initial goal was that every CoC implement an HMIS by October 2004. According to HUD's 2005 Report to Congress, as of March 2005, 60% of CoCs had implemented an HMIS, 36% had decided to implement an HMIS and were in the process of setting it up, 3% were still considering HMIS implementation, and 1% had not yet considered implementation.²⁸

²⁴ "Report to Congress: Progress on HUD's Strategy for Improving Homeless Data Collection, Reporting and Analysis," Department of Housing and Urban Development, May 2003, p. 12, available at [http://www.hud.gov].

²⁵ 2005 Report to Congress, p. 12.

²⁶ *HMIS.Info Newsletter*, October 2005, p. 1, [http://www.hmis.info]. HUD has contracted with Abt Associates and the University of Pennsylvania to collect data from local HMIS, analyze the data, and write the report.

²⁷ "The Annual Homeless Assessment Report: Frequently Asked Questions," Department of Housing and Urban Development, September 2003, p. 1, available at [http://www.hud.gov].

²⁸ 2005 Report to Congress, p. 5.