



Dream Homes Community Center

To: Mayor Mark Boughton and the Common Council
From: Karl Myers, on behalf of the Dream Homes Community Center collaborative
Re: October 28, 2008 monthly report

I. Program Synopsis

Per the proposal endorsed by Mayor Boughton and the Common Council, the Dream Homes Community Center (DHCC) is a collaborative effort of 3 agencies: Housing Authority of the City of Danbury, The Association of Religious Communities, and We CAHR. The collaborative has financial and in-kind partners, to date: The City of Danbury, Mc Cue Mortgage, an Anonymous Donor, Housing Authority, ARC & We CAHR, Town of New Fairfield, and the Town of Ridgefield, HUD-CDBG and HUD HMIS Grant, DSS Beyond Shelter CT Grant.

Dream Homes works with 3 populations:

- 1) Point of Entry for persons who are homeless
- 2) Rentals
- 3) First-time Home ownership

All three of the above components are a part of Dream Homes. The Point of Entry is not a separate program; rather, it is 1 of the 3 components of Dream Homes ~ per the proposal passed by Mayor Boughton and the Common Council.

The collaborative Leadership Team shares responsibilities for leadership, decision-making, risk-taking, and fundraising. This report is submitted by Karl Myers on behalf of the collaborative Leadership Team, which also includes: Rev. Phyllis J. Leopold, Jean Bowen, Patricia Tomka, and Carolyn Sistrunk.

In addition to the Leadership Team, salaried professionals implement the program:

Program Director (full-time): Karl Myers

Housing Advocate for Persons with Disabilities (part-time): Jeanne Braude-Magi

I. Operations

- No new information in this area.

II. Outreach & Education

- DHCC along with the Hispanic Center will be holding a tenants and landlord “Know Your Rights” workshop on Thursday November 6 starting at 6:30pm at West Conn’s Warner Hall.
- DHCC will be hosting a Legislative Breakfast to discuss housing issues on Tuesday November 18th at 7:30am at the Greenery Café 115 Main Street Danbury.
- DHCC was invited to speak at the Morris Ave School on October 30th on the rental portion of the program.
- DHCC Program Director was invited to speak at a Sociology Class at West Conn on October 20, 2008 on the 2007 HMIS Data Report.

B) Regional

- The New Milford Emergency Shelter will open November 9th for the season. They will also be participating in HMIS and designed an intake form to capture the universal data elements for HMIS.

C) Community Involvement

- No new information in this area.

III. Point of Entry

- MCCA has been given the paperwork to sign up on HMIS for their shelter program and for their transitional housing program. Timeline for implementation is TBD.
- DHCC presented the 2007 HMIS Data Report to the full Housing Partnership on October 8th.

HUD Annual Progress Report (HUD-40118)
September 1 to September 30, 2008
All Danbury CoC Agencies using HMIS

HUD Annual Progress Report (HUD-40118)

Report Options:

Provider Group: Unduplicated

Provider:

This provider AND its children. This provider ONLY.

Operating Year Date Range: to (mm/dd/yyyy)

Legal Adult Age: (as defined by foster care law in your state)

Or

2. Persons Served during the operating year.	Number of Singles Not in Families	Number of Adults in Families	Number of Children in Families	Number of Families
a. Number on the first day of the operating year.	<u>375</u>	<u>17</u>	<u>31</u>	15
b. Number entering program during the operating year.	<u>18</u>	<u>5</u>	<u>5</u>	4
c. Number who left the program during the operating year.	<u>240</u>	<u>3</u>	<u>3</u>	2
d. Number in the program on the last day of the operating year. (a+b-c=d)	153	19	33	17
3. Project Capacity.	Number of Singles Not in Families	Number of Adults in Families	Number of Children in Families	Number of Families
a. Number on last day (from 2d, columns 1 and 4)	153			17
4. Non-homeless persons. (Sec. 8 SRO projects only)				

How many income-eligible non-homeless persons were housed by the SRO program during the operating year?	<u>102</u>
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5. Age and Gender. Of those who entered during the operating year, how many people are in the following age and gender categories?

	Age	Male	Female	Other/Not given
Single Persons (from 2b, column 1)	a. 62 and over	0	0	0
	b. 51 - 61	<u>2</u>	0	0
	c. 31 - 50	<u>7</u>	<u>2</u>	0
	d. 18 - 30	<u>5</u>	<u>2</u>	0
	e. 17 and under	0	0	0
	Not given	0	0	0
Persons in Families (from 2b, columns 2 & 3)	f. 62 and over	0	0	0
	g. 51 - 61	0	0	0
	h. 31 - 50	<u>1</u>	<u>3</u>	0
	i. 18 - 30	0	<u>1</u>	0
	j. 13 - 17	<u>2</u>	0	0
	k. 6 - 12	<u>2</u>	0	0
	l. 1 - 5	<u>1</u>	0	0
	m. Under 1	0	0	0
	Not given	0	0	0

6 - 10. Participants who entered during the operating year.

6a. Veterans Status.

A veteran is anyone who has ever been on active military duty status.	1
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6b. Chronically Homeless.

How many participants were chronically homeless individuals?	0
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7. Ethnicity.

a. Hispanic or Latino	<u>2</u>
b. Non-Hispanic or Non-Latino	<u>21</u>

8. Race.

a. American Indian or Alaskan Native	0
b. Asian	<u>1</u>
c. Black or African American	0
d. Native Hawaiian or Other Pacific Islander	0
e. White	<u>21</u>
f. American Indian/Alaskan Native & White	0
g. Asian & White	0
h. Black/African American & White	0
i. American Indian/Alaskan Native & Black/African American	0
j. Other Multi-Racial	0
k. Other/Unknown (all that do not match)	1

9a. Special Needs.

	All	Chronic
a. Mental illness	<u>4</u>	0

b. Alcohol abuse	0	0		
c. Drug abuse	0	0		
d. HIV/AIDS or related diseases	0	0		
e. Developmental disability	0	0		
f. Physical disability	1	0		
g. Domestic violence	1	0		
h. Other (please specify)	0	0		
9b. Disabled.				
How many of the participants are disabled?		<u>4</u>		
10. Prior Living Situation. Participants slept in the following places the week prior to entering.				
	All	Chronic		
a. Non-housing (street, park, car, bus station, etc.)	<u>1</u>	0		
b. Emergency shelter	<u>1</u>	0		
c. Transitional housing for homeless persons	<u>1</u>			
d. Psychiatric facility	0			
e. Substance abuse treatment facility	0			
f. Hospital	0			
g. Jail/prison	0			
h. Domestic violence situation	0			
i. Living with relatives/friends	<u>3</u>			
j. Rental housing	<u>3</u>			
k. Other (please specify)	<u>14</u>			
11. Amount and Source of Monthly Income at Entry and Exit. Participants who left during the operating year.				
Amount	A. Monthly Income at Entry		B. Monthly Income at Exit	
	All	Chronic	All	Chronic
a. No Income	<u>133</u>	<u>17</u>	<u>113</u>	<u>16</u>
b. \$1-150	<u>1</u>	0	<u>2</u>	0
c. \$151 - \$250	<u>3</u>	<u>1</u>	<u>8</u>	<u>1</u>
d. \$251 - \$500	0	0	<u>1</u>	<u>1</u>
e. \$501 - \$1000	<u>3</u>	0	<u>6</u>	0
f. \$1001 - \$1500	<u>2</u>	0	<u>2</u>	0
g. \$1501 - \$2000	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>
h. \$2000 +	0	0	0	0
Source	C. Income Sources at Entry		D. Income Sources at Exit	
	All	Chronic	All	Chronic
a. Supplemental Security Income (SSI)	<u>11</u>	<u>4</u>	<u>13</u>	<u>4</u>
b. Social Security Disability Insurance (SSDI)	<u>2</u>	<u>2</u>	<u>5</u>	<u>2</u>
c. Social Security	0	0	0	0
d. General Public Assistance	0	0	0	0
e. Temporary Aid to Needy Families (TANF)	<u>1</u>	0	<u>1</u>	0
f. State Children's Health Insurance Program (SCHIP)	0	0	0	0

g. Veterans benefits	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
h. Employment Income	<u>15</u>	<u>6</u>	<u>17</u>	<u>7</u>
i. Unemployment Benefits	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>
j. Veteran's Health Care	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
k. Medicaid	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
l. Food Stamps	<u>7</u>	<u>2</u>	<u>15</u>	<u>3</u>
m. Other (please specify)	<u>82</u>	<u>29</u>	<u>96</u>	<u>29</u>
n. No financial resources	<u>133</u>	<u>17</u>	<u>113</u>	<u>16</u>

12a. Length of Stay in Program. Participants who left during the operating year.

	All	Chronic
a. Less than 1 month	<u>17</u>	<u>0</u>
b. 1 to 2 months	<u>30</u>	<u>5</u>
c. 3 - 6 months	<u>57</u>	<u>9</u>
d. 7 months - 12 months	<u>139</u>	<u>43</u>
e. 13 months - 24 months	<u>0</u>	<u>0</u>
f. 25 months - 3 years	<u>0</u>	<u>0</u>
g. 4 years - 5 years	<u>0</u>	<u>0</u>
h. 6 years - 7 years	<u>0</u>	<u>0</u>
i. 8 years - 10 years	<u>0</u>	<u>0</u>
j. over 10 years	<u>0</u>	<u>0</u>

12b. Length of Stay in Program. Participants who did not leave during the operating year.

	All	Chronic
a. Less than 1 month	<u>6</u>	<u>0</u>
b. 1 to 2 months	<u>23</u>	<u>4</u>
c. 3 - 6 months	<u>32</u>	<u>6</u>
d. 7 months - 12 months	<u>55</u>	<u>15</u>
e. 13 months - 24 months	<u>33</u>	<u>7</u>
f. 25 months - 3 years	<u>18</u>	<u>2</u>
g. 4 years - 5 years	<u>3</u>	<u>1</u>
h. 6 years - 7 years	<u>1</u>	<u>1</u>
i. 8 years - 10 years	<u>1</u>	<u>0</u>
j. over 10 years	<u>0</u>	<u>0</u>

13. Reasons for Leaving. Participants who left during the operating year.

	All	Chronic
a. Left for a housing opportunity before completing program	<u>3</u>	<u>0</u>
b. Completed program	<u>5</u>	<u>2</u>
c. Non-payment of rent/occupancy charge	<u>0</u>	<u>0</u>
d. Non-compliance with project	<u>0</u>	<u>0</u>
e. Criminal activity / destruction of property / violence	<u>0</u>	<u>0</u>
f. Reached maximum time allowed in project	<u>0</u>	<u>0</u>
g. Needs could not be met by project	<u>3</u>	<u>0</u>
h. Disagreement with rules/persons	<u>3</u>	<u>0</u>

i. Death		0	0	
j. Other (please specify)		<u>46</u>	<u>12</u>	
k. Unknown/disappeared		<u>183</u>	<u>43</u>	
14. Destination. Participants who left during the operating year.				
		All	Chronic	
PERMANENT (a - h)	a. Rental house or apartment (no subsidy)	<u>5</u>	<u>1</u>	
	b. Public Housing	0	0	
	c. Section 8	0	0	
	d. Shelter Plus Care	0	0	
	e. HOME subsidized house or apartment	0	0	
	f. Other subsidized house or apartment	0	0	
	g. Homeownership	0	0	
	h. Moved in with family or friends	0	0	
TRANSITIONAL (i - j)	i. Transitional housing for homeless persons	0	0	
	j. Moved in with family or friends	<u>3</u>	<u>1</u>	
INSTITUTION (k - m)	k. Psychiatric hospital	0	0	
	l. Inpatient alcohol/drug treatment facility	<u>2</u>	0	
	m. Jail/prison	0	0	
EMERGENCY SHELTER (n)	n. Emergency shelter	0	0	
OTHER (o - q)	o. Other supportive housing	0	0	
	p. Places not meant for human habitation (e.g. street)	<u>2</u>	<u>2</u>	
	q. Other (please specify)	<u>22</u>	<u>4</u>	
UNKNOWN	r. Unknown	<u>209</u>	<u>49</u>	
15. Supportive Services. Participants who left during the operating year.				
NOTE: The below services were given to participants who left during the operating year. Add the following counts into the appropriate category for question 15.				
	Service	Service Code	All	Chronic
1.	Meals	BD-5000	<u>8</u>	<u>3</u>
2.	Homeless Shelter	BH-1800.8500	<u>137</u>	<u>37</u>
3.	Housing Search and Information	BH-3900	<u>1</u>	<u>1</u>
4.	Bathing Facilities	BM-6500.6500-150	<u>8</u>	<u>4</u>
5.	Laundry Facilities	BM-6500.6500-450	<u>1</u>	<u>1</u>
6.	Temporary Mailing Address	BM-6500.6500-850	<u>2</u>	<u>1</u>
7.	Bus Fare	BT-8300.1000	<u>1</u>	<u>1</u>
8.	Adult Education	HH-0500	<u>1</u>	0
9.	Emergency Medical Care	LD	<u>1</u>	<u>1</u>
10.	Substance Abuse Services	LX	<u>3</u>	<u>2</u>
11.	Employment	ND	<u>1</u>	0
12.	Comprehensive Job Assistance Centers	ND-1500	<u>1</u>	0
13.	Job Search/Placement	ND-3500.3600	<u>2</u>	<u>2</u>
14.	Food Stamps	NL-6000.2000	<u>2</u>	0
15.	Social Security Disability	NS-1800.8000	<u>1</u>	0

16.	Social Health Insurance	NS-8000	<u>1</u>	<u>0</u>
17.	Case/Care Management Referrals	PH-2400.1300	<u>17</u>	<u>5</u>
18.	Mental Health Care and Counseling	R	<u>1</u>	<u>0</u>
19.	Community Mental Health Agencies	RM-6500.1500	<u>2</u>	<u>2</u>

Needs/Service Report
January 1, 2008 to September 30,2008

Note: DHCC combined data from all Danbury HMIS agencies to create this report.

NEED COUNT January 1,2008 to September 30,2008						
Danbury CoC						
NEED COUNT						
<u>Need Type</u>	<u>Total</u>	<u>Pending</u>	<u>Fully Met</u>	<u>Partially Met</u>	<u>Unmet</u>	<u>Follow Up Pending</u>
Homeless Shelter (BH-1800.8500)	<u>3514</u>	<u>0</u>	<u>3498</u>	<u>0</u>	<u>16</u>	<u>0</u>
Food Stamps (NL-6000.2000)	<u>78</u>	<u>3</u>	<u>67</u>	<u>0</u>	<u>7</u>	<u>1</u>
Social Health Insurance (NS-8000)	<u>62</u>	<u>2</u>	<u>58</u>	<u>0</u>	<u>2</u>	<u>0</u>
Employment (ND)	<u>35</u>	<u>0</u>	<u>17</u>	<u>0</u>	<u>15</u>	<u>3</u>
Rental Deposit Assistance (BH-3800.7250)	<u>34</u>	<u>0</u>	<u>14</u>	<u>0</u>	<u>20</u>	<u>0</u>
Transitional Housing/Shelter (BH-8600)	<u>33</u>	<u>1</u>	<u>18</u>	<u>0</u>	<u>13</u>	<u>1</u>
Meals (BD-5000)	<u>29</u>	<u>0</u>	<u>10</u>	<u>0</u>	<u>0</u>	<u>19</u>
Housing Counseling (BH-3700)	<u>24</u>	<u>0</u>	<u>24</u>	<u>0</u>	<u>0</u>	<u>0</u>
Public Housing (BH-7000.4600-600)	<u>24</u>	<u>10</u>	<u>2</u>	<u>0</u>	<u>10</u>	<u>2</u>
Section 8 Housing Choice Vouchers (BH-7000.4600-700)	<u>20</u>	<u>4</u>	<u>5</u>	<u>0</u>	<u>10</u>	<u>1</u>
Bathing Facilities (BM-6500.6500-150)	<u>20</u>	<u>0</u>	<u>9</u>	<u>0</u>	<u>0</u>	<u>11</u>
Social Security Disability (NS-1800.8000)	<u>19</u>	<u>2</u>	<u>14</u>	<u>0</u>	<u>2</u>	<u>1</u>
Supportive Housing (BH-8400)	<u>18</u>	<u>4</u>	<u>5</u>	<u>0</u>	<u>9</u>	<u>0</u>
SSI (NL-1000.8100)	<u>17</u>	<u>0</u>	<u>17</u>	<u>0</u>	<u>0</u>	<u>0</u>
Case/Care Management Referrals (PH-2400.1300)	<u>12</u>	<u>0</u>	<u>3</u>	<u>0</u>	<u>0</u>	<u>9</u>
Substance Abuse Treatment Programs (LX-8450)	<u>11</u>	<u>0</u>	<u>9</u>	<u>0</u>	<u>2</u>	<u>0</u>
Food Pantries (BD-1800.2000)	<u>10</u>	<u>0</u>	<u>5</u>	<u>0</u>	<u>4</u>	<u>1</u>

Domestic Violence Shelters (BH-1800.1500-100)	<u>10</u>	<u>0</u>	<u>5</u>	<u>0</u>	<u>4</u>	<u>1</u>
Medicaid (NL-5000.5000)	<u>10</u>	<u>0</u>	<u>9</u>	<u>0</u>	<u>1</u>	<u>0</u>
Laundry Facilities (BM-6500.6500-450)	<u>9</u>	<u>0</u>	<u>2</u>	<u>0</u>	<u>0</u>	<u>7</u>
TANF (NL-1000.8500)	<u>9</u>	<u>0</u>	<u>9</u>	<u>0</u>	<u>0</u>	<u>0</u>
Community Mental Health Agencies (RM-6500.1500)	<u>9</u>	<u>1</u>	<u>5</u>	<u>0</u>	<u>2</u>	<u>1</u>
Comprehensive Job Assistance Centers (ND-1500)	<u>7</u>	<u>0</u>	<u>3</u>	<u>0</u>	<u>1</u>	<u>1</u>
Clothing (BM-6500.1500)	<u>6</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>6</u>
Temporary Mailing Address (BM-6500.6500-850)	<u>6</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>6</u>
Temporary Financial Assistance (BR)	<u>6</u>	<u>0</u>	<u>6</u>	<u>0</u>	<u>0</u>	<u>0</u>
Mental Health Care and Counseling (R)	<u>6</u>	<u>0</u>	<u>5</u>	<u>0</u>	<u>1</u>	<u>0</u>
Single Room Occupancy Housing (BH-7000.4600-800)	<u>5</u>	<u>0</u>	<u>3</u>	<u>0</u>	<u>2</u>	<u>0</u>
Hotels/Motels (PL-4500.3000)	<u>5</u>	<u>0</u>	<u>5</u>	<u>0</u>	<u>0</u>	<u>0</u>
Hospital Based Outpatient Services (LN-3000)	<u>4</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>4</u>
Substance Abuse Services (LX)	<u>4</u>	<u>2</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>1</u>
Low Income/Subsidized Private Rental Housing (BH-7000.4600-450)	<u>3</u>	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1</u>
Bus Fare (BT-8300.1000)	<u>3</u>	<u>0</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>2</u>
Personal Health Care Advocate Services (LH-6520)	<u>3</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>3</u>	<u>0</u>
Unemployment Insurance (NS-9000)	<u>3</u>	<u>0</u>	<u>3</u>	<u>0</u>	<u>0</u>	<u>0</u>
Child Advocacy Centers (FT-3000.1450)	<u>2</u>	<u>0</u>	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>
WIC (NL-6000.9500)	<u>2</u>	<u>0</u>	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>
Medicare (NS-8000.5000)	<u>2</u>	<u>0</u>	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>
Child Care Centers (PH-1600.1500-140)	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>2</u>
Mental Health Facilities (RM)	<u>2</u>	<u>0</u>	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>
Outpatient Mental Health Care (RP)	<u>2</u>	<u>0</u>	<u>1</u>	<u>0</u>	<u>1</u>	<u>0</u>
Homeless Motel Vouchers (BH-1800.8500-300)	<u>1</u>	<u>0</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>
Veteran Homes (BH-8400.9000)	<u>1</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Gas Money (BT-8300.2500)	<u>1</u>	<u>0</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>
Identification Cards (DF-7000.3300)	<u>1</u>	<u>0</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>
Legal Services (FT)	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1</u>	<u>0</u>
Vocational Education (HH-9000)	<u>1</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
College/University Registration and Enrollment (HL-1700)	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1</u>
Veterans Administration Hospitals (LL-3000.9000)	<u>1</u>	<u>0</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>

Supportive Substance Abuse Services (LX-8470)	1	0	0	0	1	0
Veteran/Military Health Insurance (NS-8000.9000)	1	0	1	0	0	0
Alcohol Dependency Support Groups (PH-5000.0500-070)	1	0	1	0	0	0
Inpatient Mental Health Facilities (RM-3300)	1	0	1	0	0	0
Checking/Savings Accounts (TF-2100.1450)	1	0	0	0	1	0
Totals	4093	33	3848	0	128	82

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Zip Code Report
January 1, 2008 to September 30,2008

<u>Zip Code</u>	<u>City</u>	<u>State</u>	<u>Number of Persons</u>	<u>Zip Code</u>	<u>City</u>	<u>State</u>	<u>Number of Persons</u>
06810/06811	Danbury	CT	271	06082	Enfield	CT	1
06776	New Milford	CT	59	06031	Falls Village	CT	1
06702	Waterbury	CT	41	06755	Gaylordsville	CT	1
06801	Bethel	CT	30	06340	Groton	CT	1
06804	Brookfield	CT	18	18201	Hazelton	PA	1
06512	New Haven	CT	8	92543	Hemet	CA	1
06854	Norwalk	CT	8	11550	Hempsted	NY	1
06877	Ridgefield	CT	7	12531	Holmes	NU	1
06488	Southbury	CT	7	07306	Jersey City	NJ	1
01104	SpringField	Ma	6	06351	Jewet City	CT	1
06606	Bridgeport	CT	5	06419	Killingworth	CT	1
12601	Poughkeepsie	NY	5	81050	La Junita	CO	1
06790	Torrington	CT	5	06759	Litchfield	CT	1
30301	Atlanta	GA	4	40211	Louisville	KY	1
10512	Carmel	NY	4	24501	Lynchburg	VA	1
06450	Meridan	CT	4	24572	Madison Hieghts	VA	1
06470	Newtown	CT	4	10541	Mahopac	NY	1
06902	Stamford	CT	4	33052	Marathon	FL	1
06825	Fairfield	CT	3	37127	Marsfreesboro	TN	1
06770	Naugatuck	CT	3	06050	New Britian	CT	1
06069	Sharon	CT	3	16101	New Castle	PA	1
38015	Burlison	TN	2	06057	New Hartford	CT	1
12522	Dover Plains	NY	2	06320	New London	CT	1
06029	Ellington	CT	2	06777	New preston	CT	1

06112 Hartford	CT	2	06740 Newtown	CT	1
25701 Huntington	WV	2	01060 Northampton	Ma	1
90631 La Harbra	CA	2	37137 Nunnelly	TN	1
06468 Monore	CT	2	10026 NYC	NY	1
06812 New Fairfield	CT	2	13669 Ogensbury	NY	1
32822 Orlando	FI	2	06477 Orange	CT	1
06482 Sandy Hook	CT	2	12563 Patterson	NY	1
04479 Sangerville	ME	2	06480 Portland	CT	1
06484 Shelton	CT	2	06896 Redding	CT	1
06226 Willimantic	CT	2	24007 Roanoke	VA	1
28401 Wilmington	NC	2	06067 Rocky Hill	CT	1
93309 Bakersfield	CA	1	30165 Rome	GA	1
10509 Brewster	NY	1	31401 Savannah	GA	1
06752 Bridgewater	CT	1	13460 Sherburne	NY	1
10457 Bronx	NY	1	06784 Sherman	CT	1
06019 Canton	CT	1	33711 St Petersburg	FL	1
28401 Cape Fear	NC	1	10591 Tarrytown	NY	1
06410 Cheshire	CT	1	10591 Tarrytown	NY	1
12047 Cohes	NY	1	74101 Tulsa	OK	1
06415 Colchester	CT	1	06492 Wallingford	CT	1
78403 Corpus Christi	TX	1	06793 Washington	CT	1
37725 Dandridge	TN	1	06880 Westport	CT	1
07869 Dover	NJ	1	03470 Winchester	NH	1
21222 Dundallias	Md	1	11377 Woodside	NY	1
06118 East Hartford	CT	1			

HMIS Data Analysis

Total clients entered into HMIS by *all* Danbury CoC agencies: 1932
 Identified as Chronically Homeless: 497
 Identified as Military Veteran: 111
 Pregnant: 86
 Unemployed at time of entry: 1138
 Homelessness Primary Reason:

Unemployed	254	Domestic Violence Victim	26
Substance Abuse	168	Loss of Job	17
Family Breakup	184	Criminal Activity	12
Out of Jail/Prison	156	New to Area	17
Legal Eviction	112	Family Abuse	10
Family Friend Eviction	76	Health/Safety	11
Left Voluntarily	68	Underemployment/Low Income	5
Mental Health	39	Physical Illness	5
Lack of Income	32	Disaster Victim	2

Mental Illness	28	Loss of Transportation	8
Expenses Exceed Income	29	Mortgage Foreclosure	9
Release from Institution	24	Substandard Housing	7
Medical Condition	15	Loss of Child Care	1
Divorced/Separated	28	No Reason Entered	563
No Affordable Housing	19	Loss of Public Assistance	2
		Disaster Victim	5
		Total	1932

Dream Homes Community Center Collaborative
Preventing Homelessness and Rental Issues

Total number of new clients served by the collaborative **this month:** 8

Race/Ethnicity

White 7 Black 1 Native American Asian Hispanic/Latino Other

Family Information

Total Families: Female Male Minors/ Parents (under 18)
Total Singles: 8 Female 3 Male 5 Minor (under 18)

Age

0-5 6-12 13-17 18-20 21-25 3 26-34
35-49 3 50-64 2 65+

Education Level

No High School Some High School High School Diploma/GED
Some College/Degree Graduate School Unknown

Income Information

Employed 3 SAGA Child Support
SSI SSDI 1 Unemploy. Comp
Veteran None 5 TFA Other

Housing Issues

Disaster Victim Deinstitutionalized Lockout
Legal Eviction 8 Out of Jail/Prison Left Voluntarily
Fmly/Friend Eviction Other

Contributing Factors

Substance Abuse Expenses Exceed Income 8 Unemployed

Physical Illness ____
Family Abuse _____

New to Area _____
Mental Illness _____

Divorced/Separated ____
Other _____

IV. **First Time Home Ownership/Housing**

- No new information in this area.