# HOMELESSNESS IN ALABAMA

Certified Public Manager® Program
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*Photo courtesy of Joe Songer / AL.com*

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## TABLE OF CONTENTS

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## INTRODUCTION

According to the American Aid Foundation (2016), seven out of ten people are one paycheck away from being homeless. Homeless people and those at-risk of becoming homeless take many forms and exist in many different types of living arrangements. According to the U.S. Department of Housing and Urban Development (HUD), in 2015 there were 3,970 individuals reported as homeless in Alabama, made up of various segments of the population including those with mental illness, domestic violence victims, veterans, families, and children. While

*The cover photo, taken by Joe Songer/al.com, depicts three individuals living in the steel girders that support the Elton B. Stephens Expressway in Birmingham.*

many were in shelters, some were found living on the streets or in places not fit for habitation such as cars or abandoned and condemned homes (hudexchange.info/grantees, 2015).

The CPM Solutions Homelessness in Alabama Team was tasked with investigating the homeless situation in Alabama, researching causes, trends, statistics, and then developing strategies and making recommendations to be considered to reduce the number of homeless individuals in Alabama.

## BACKGROUND

In order to identify solutions for ending homelessness in Alabama, it is important to understand key background information, such as how homelessness is defined, who coordinates and provides services, what has been done to solve the homelessness problem and current resources available in Alabama, as well as where Alabama stands on a national level.

### DEFINING HOMELESSNESS

HUD is the primary funder of federal programs focused on homeless individuals and families. The federal agency serves over 1 million people through emergency, transitional, and permanent housing programs each year and has definitions of the various stages of homelessness.

HUD defines the criteria for homelessness in four distinct categories:

1. Literally homeless – individuals or families who lack a fixed, regular, and adequate nighttime residence (e.g. those living in shelters or public and private places not meant for human habitation such as tents, under bridges, or in abandoned or condemned buildings)

2.  Imminent risk of homelessness – individuals or families who will immediately lose their primary nighttime residence within 14 days of applying for assistance and no subsequent residence or support network can be identified

3.  Homeless under other federal statutes – Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as literally homeless in accordance with HUD but does under other federal statutes

4.  Fleeing or attempting to flee domestic violence – individuals or families who are fleeing or attempting to flee domestic violence and have no other residence or support network

HUD and its award recipients use these definitions to determine who is eligible to receive services under its grant programs. (hudexchange.info/resources/documents/Homelessdefinition_recordkeepingRequirementsand criteria.pdf).

## CONTINUUMS OF CARE (COCS)

HUD funds local homeless assistance and prevention networks called Continuums of Care (CoCs). These organizations are regional service providers and the principle administrators of homeless services in Alabama. The Continuum of Care (CoC) Program is designed to promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and state and local governments to quickly re-house homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effect



*Homeless individual living in a tent in the Mobile area. Photo courtesy of Vincents Photographs.*

utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing

homelessness (hudexchange.info/programs/coc, 2014).

CoCs work with other non-profit, faith-based, and public service providers in order to best assist the homeless population in the geographic areas they serve.

There are currently nine CoCs in the State of Alabama recognized by HUD that represent a territory in Alabama. (See Figure A) Each state has a Balance of State CoC that administers programs in territories not covered by the CoCs. The Alabama Rural Coalition for the Homeless (ARCH) serves as the Balance of State organization for Alabama and covers a 42 county territory.
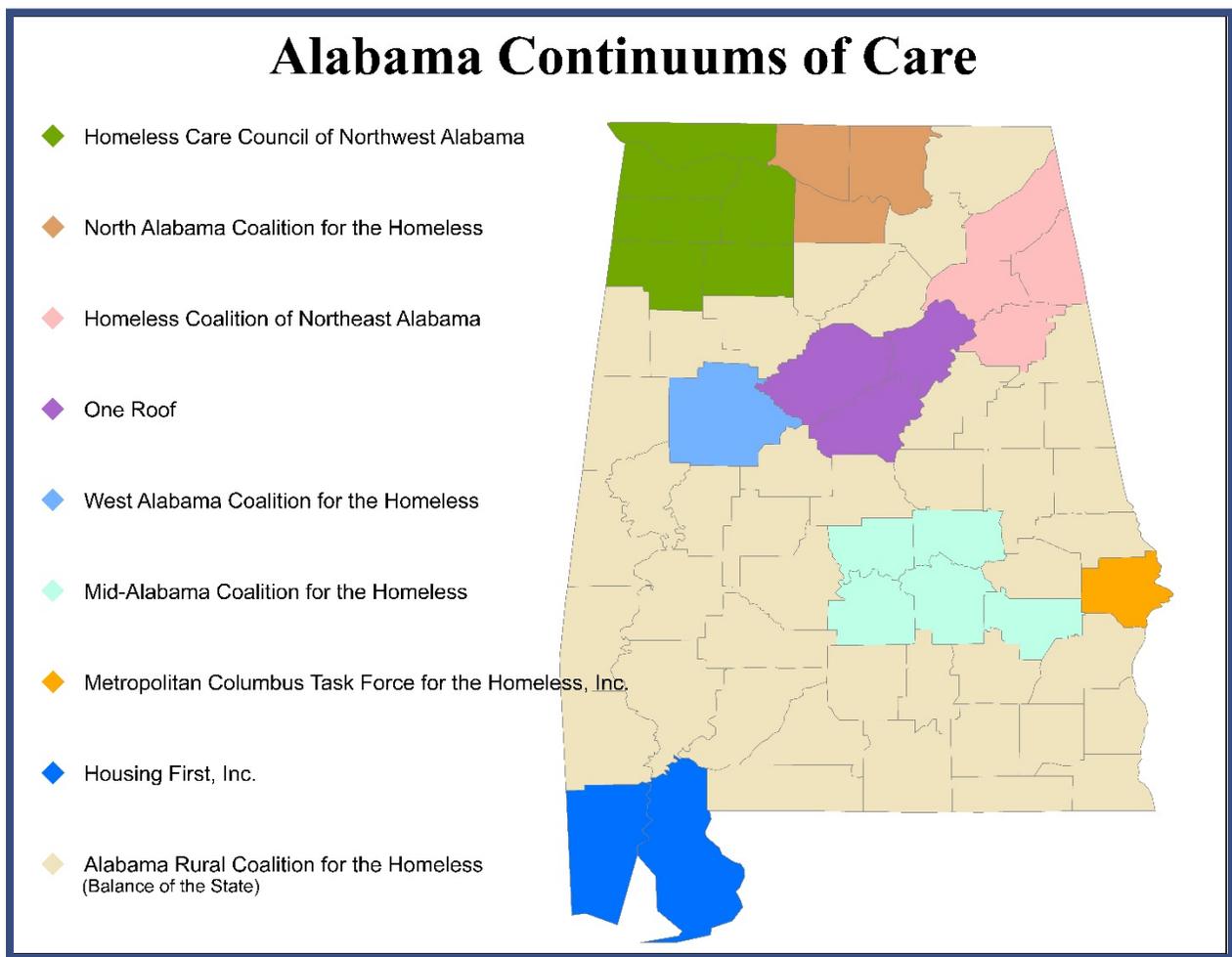


**Figure A: Alabama's Network of Continuums of Care**

Individuals and families experiencing homelessness need tailored services to address their individual barriers and obstacles to housing, which is provided through these CoCs who are most familiar with the resources available and the homeless population in their regional territories.

## POINT-IN-TIME COUNT

The point-in-time count is a one-day snapshot of sheltered and unsheltered homeless individuals in a given area. HUD requires that the CoCs in each state conduct the annual count. The point-in-time count is held in January each year and is used to measure the extent of homelessness in each geographic region covered by the CoCs as well as statistics related to the homeless population in that area, such as race, gender, and familial status.

Coordinated by the CoCs, each region's point-in-time count is conducted through non-profit service providers, shelters, hospitals, and other volunteers. The Birmingham / Jefferson County area requested close to 100 volunteers for their 2016 point-in-time count in order to accurately capture the number of people experiencing homelessness in their CoC territory. Once collected, the data gathered during the point-in-time counts are reported to HUD by the CoCs (One Roof, 2016).

The point-in-time count presents a one-day snapshot for a year's worth of data, and some of that data is based on the availability of volunteers who can gather information or willingness of service organizations to report that data. In rural populations, it is especially difficult to get an accurate account of homeless individuals. However, the point-in-time count is the most reliable data available in determining the number of homeless individuals in a given area and the data that HUD uses when reporting homelessness figures for each state.

## GOVERNOR'S STATEWIDE INTERAGENCY COUNCIL ON HOMELESSNESS

On August 11, 2005, Governor Bob Riley signed Executive Order No. 31 which created the Governor's Statewide Interagency Council on Homelessness (digital.archives.alabama.gov). The Council was formed to develop and implement a plan that would prevent and end homelessness in Alabama.  The Council partnered with the U.S. Interagency Council on Homelessness because both Councils recognized that collaboration among government agencies, the private industry, and service providers was needed in order to effectively end homelessness in Alabama.  The lead agency that was appointed for the Council was the Governor's Office of Faith-Based and Community Initiatives.  The agency was required to provide staff and administrative support for the Council (Governor's Statewide Interagency Council, 2006).

The Council presented a blueprint of its Ten-Year Plan to prevent and end Homelessness in Alabama to Governor Bob Riley in June 2006.  The plan sought to collect, evaluate and utilize data on homelessness in Alabama to better update and prepare the Council of policy recommendations needed to address homelessness in the state.  The blueprint was intended to be a guide for future decision-making and policy recommendations of the Governor's Statewide Interagency Council on Homelessness.

## WHERE ALABAMA FALLS

In January of 2015, the point-in-time count determined that 3,970 people were homeless in Alabama. Of those, 607 were chronically homeless people, meaning they were individuals with a disabling condition who have been homeless for more than a year or who have had at least four episodes of homelessness within the last three years. There were 474 veterans reported, and 228 were unaccompanied youth, which are defined as single, unaccompanied individuals age 25 years old or younger. From the point-in-time count, 2,592 of the homeless people were identified in the major metropolitan areas of Huntsville, Birmingham, Montgomery, and Mobile (hudexchange.info/2015). (See Figure B)



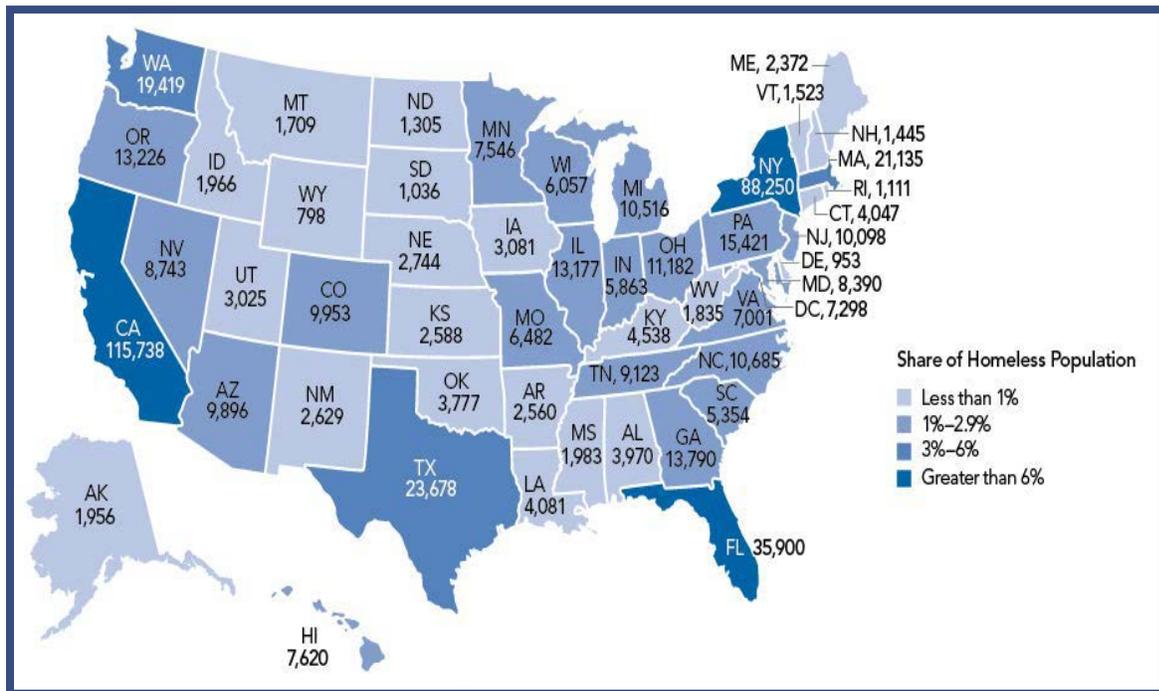**Figure B: Alabama's FY2015 Homelessness Snapshot**



**Figure C: Estimates of Homeless People, By State 2015**

In 2015, 74 percent of homeless individuals were living in emergency shelter or transitional housing while only 26 percent were unsheltered. There was not a significant discrepancy in the race of homeless individuals and families in Alabama, which was made up of 52 percent African-

American, 46 percent white, and two percent other races or ethnicities. Sixty-one percent of the homeless population were male, and 39 percent were female. Twelve percent were reported to be victims of domestic violence, and 19 percent reported chronic substance abuse. Twenty-six percent were found to be severely mentally ill (hudexchange.info/2015).

Nationwide, the January 2015 point-in-time count identified 564,708 people that were homeless on a single night.  According to the state estimates from the point-in-time count, Alabama was one of 25 states that each accounted for less than 1 percent of all homeless people.  These 25 states collectively accounted for 11 percent of homelessness nationwide. (See Figure C)

In order to compare Alabama to other states around the country and establish benchmarks, states similar in population density were used for comparison. Those states included Louisiana, Kentucky, Missouri, West Virginia, Washington, and Wisconsin. (See Figure D)
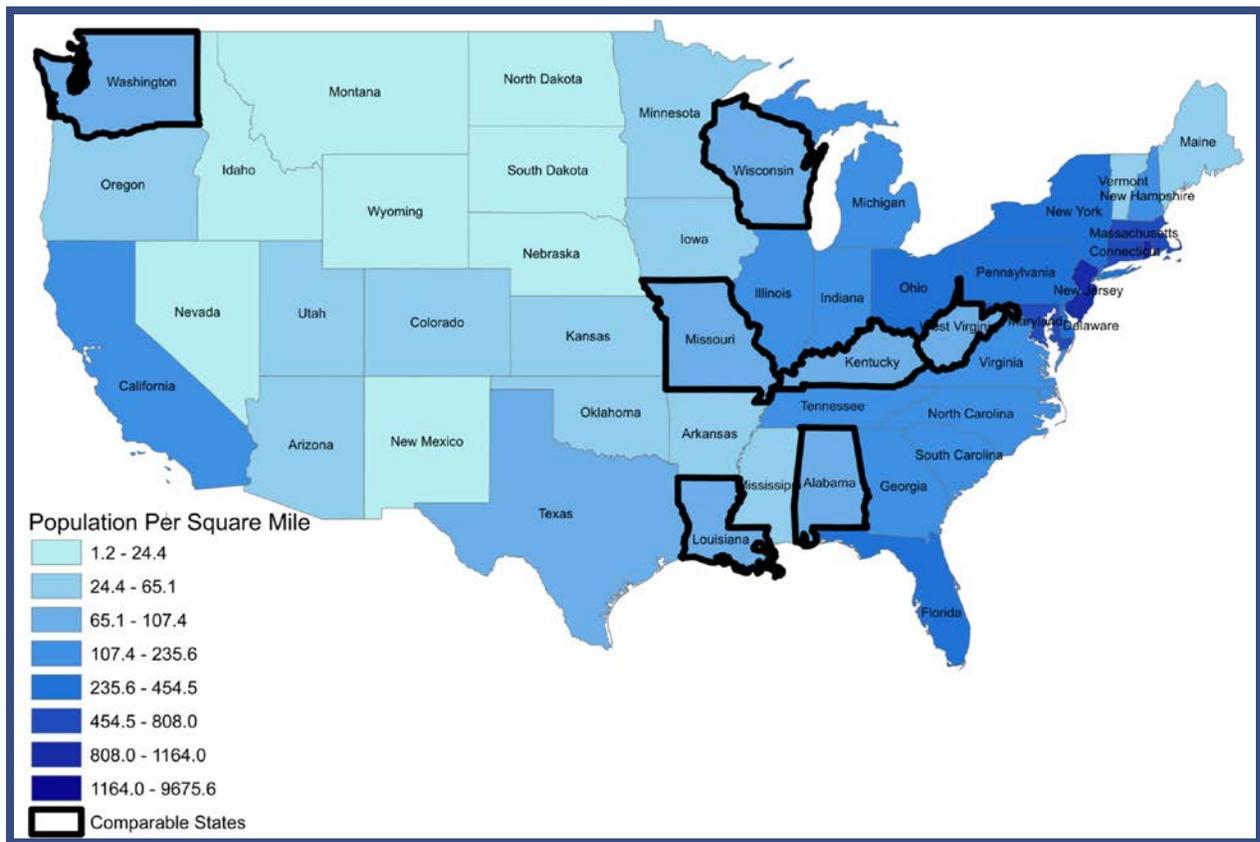


**Figure D: Population per square mile (State-To-State Comparison)**

Of those states, the overall number of homeless people has declined in the last five years. Alabama decreased its homeless population by approximately 34 percent between 2010 and 2015, according to the annual point-in-time counts released by HUD.
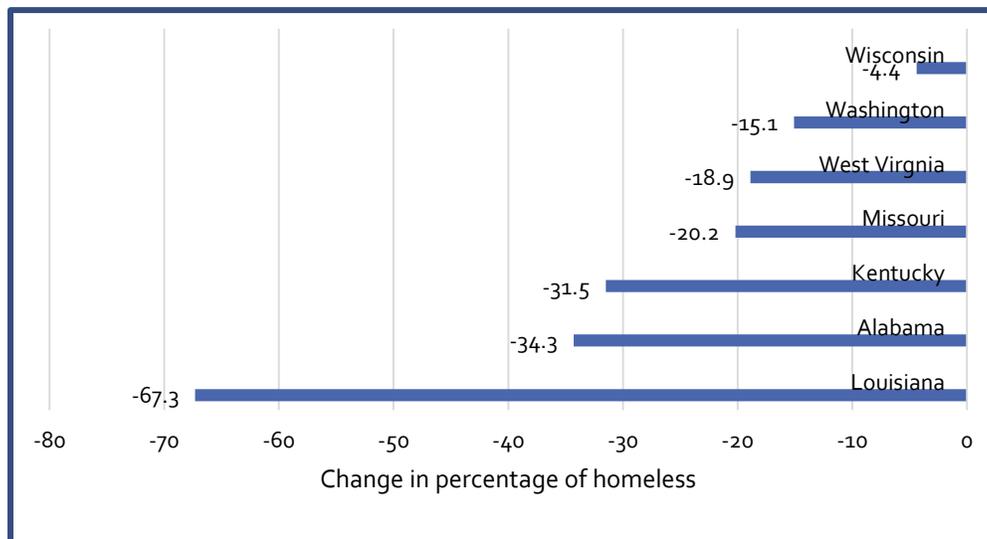


**Figure E: Change in Total Homelessness, 2010-2015 (State to State Comparison)**

Utilizing the state-to-state comparison, Louisiana's program reduced homelessness by 67 percent over the five-year period, nearly double the reduction that Alabama saw.

## CURRENT RESOURCES

Many of the resources available have helped contribute to Alabama's decrease in its homeless population. HUD and the U.S. Department of Health and Human Services provide the majority of funding for homelessness projects which is distributed to the state, cities and counties, as well as various service providers. However, the level of federal funding for several programs in Alabama has decreased over the last five years.

### *CONTINUUM OF CARE (COC) PROGRAM*

Funded and administered by HUD, the Continuum of Care (CoC) Program funds efforts to end homelessness through states, local governments, and non-profit providers. As the biggest source of funding for most of the CoCs, Alabama received $14,627,367 in 2015 under the CoC Program. Organizations and programs receiving funding in Alabama include Montgomery's Transitional Housing Program for Family Violence Victims, ARCH's Project Changing Lives, Mental Health Center of Madison County's Shelter Plus Care, and Noah's Ark Child and Family Treatment Center in Birmingham (hudexchange.info/grantees, 2016).

## EMERGENCY SOLUTIONS GRANT (ESG)

The Emergency Solutions Grant (ESG) is a program funded by HUD that provides funding for states and municipalities to administer programs involving street outreach, emergency shelter, homelessness prevention, rapid re-housing, and HMIS database costs. The ESG program provides funding to entitlement cities and counties as well as state formula allocations. In 2016, the state of Alabama received $2.4 million to be distributed competitively to CoCs and service providers by ADECA. However, applicants have a cap of $200,000 per grant recipient (ADECA, 2015).

## HOME INVESTMENT PARTNERSHIPS PROGRAM (HOME)

The Home Investment Partnerships Program (HOME) is a federal assistance program funded by HUD that provides grants to state and local governments for building or buying affordable housing for low-income Americans. State and large local governments receive an annual allocation, with Alabama's allocation being administered by ADECA. Alabama received a $8,121,529 allocation in 2016. Service providers and CoCs will be competitively selected to administer programs by ADECA and entitlement municipalities (hudexchange.info/grantees, 2016).

## HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA)

The Housing Opportunities for Persons with AIDS (HOPWA) is a HUD-funded program that provides grants to states, local governments, and non-profit service providers to provide affordable housing assistance and supportive services for low-income people with HIV or AIDS and their families. Local governments and service providers received allocations directly from HUD, with ADECA administering the state of Alabama's allocation, which was $1,530,814 in 2016 (hudexchange.info/grantees, 2016).

## SOAR TECHNICAL ASSISTANCE

The SOAR (SSI/SSDI Outreach, Access, and Recovery) Technical Assistance program provides outreach, access, and recovery assistance with the Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) application process. Only about 28 percent of individuals are approved for these benefits upon initial application. For homeless individuals with no assistance during the application process, approval for benefits drops to 10 to 15 percent. The Substance Abuse and Mental Health Services Administration (SAMHSA), a branch of the U.S. Department of Health and Human Services (HHS), provides funding to train case managers, establish application processes, and provide technical assistance in order to increase access to SSI and SSDI benefits for those eligible who are homeless or at risk of being

homeless and have a mental illness, medical impairment, and/or substance use disorder. In Alabama, the SOAR funding is administered by the Alabama Department of Mental Health (ADMH) (SAMHSA, 2016).

## PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH)

Projects for Assistance in Transition from Homelessness (PATH) is administered by SAMHSA and provides funding for services to homeless individuals with serious mental illness. PATH funds are distributed to each state, which awards funds to local governments and non-profit organizations to implement programs focused on supportive services, community mental health, screening and diagnostic treatment, case management services, and other housing and mental health services. The state of Alabama received an allocation of $613,000 through the ADMH in 2015 which served a total of 1,403 people (SOAR Works, 2015).

## HOMELESS CONNECT EVENTS

Some of the resources available through this federal funding include homeless connect events, which are conducted throughout the state by CoCs and other service providers. These events provide a one-day, one-stop-shop for the community's homeless population to gain access to vital services such as haircuts, dental and health care, legal services, applying for federal assistance, and state ID cards. For example, in coordination with area non-profit service providers, the Mid-Alabama Coalition for the Homeless (MACH) organized River Region Connects in July of 2016 at the Cramton Bowl Multiplex. Transportation was provided to homeless individuals in the area to attend the event and receive much-needed services.

## 2-1-1 CONNECTS ALABAMA

2-1-1 Connects Alabama is also a vital resource available to the homeless population in Alabama. 2-1-1 Connects Alabama is a free service that allows homeless individuals seeking assistance to be connected to homeless shelters, utility assistance, food pantries, clothing, healthcare, rent payment assistance, and low income and subsidized private rental housing information. There are more than 800 health and human services providers and 1,700 service locations accessible through 2-1-1 (Alabama 2-1-1, 2016).

## PROBLEMS

After interviewing several subject matter experts, including CoCs and other non-profit and public service providers, the biggest barrier to ending homelessness is the lack of affordable housing. According to the Out of Reach report issued by the National Low Income Housing Coalition (NLIHC) (2016), Alabama is experiencing a shortage of homes, with many too

expensive or not fit for families. The average household in Alabama spends half of its income on rent, leaving little money for essentials such as utilities, food, and health care. It is increasingly difficult for service providers to assist with supportive services such as social security benefits, substance abuse treatment, or mental health care when individuals and families do not have permanent housing.

Another problem service providers face is lack of funding to put towards affordable housing programs and other supportive services. The State of Alabama provides no direct funding to programs focused on homelessness.

The ESG Program requires a 100 percent match, and applicants to the CoC Program must provide at least 25 percent of award funds requested (ADECA, 2015). Many CoCs and other service providers have to rely on other grant funding, donations, and in-kind contributions in order to qualify to apply for federal grants.

As mentioned in the Background Section, Governor Bob Riley issued Executive Order No. 31, which created the Governor's Statewide Interagency Council on Homelessness. The Council was made up of representatives of state and federal agencies, statewide associations, and non-profit and faith-based service providers with the Governor's Office of Faith-Based and Community Initiatives as the lead organization. The goal of the Council was to develop and implement a plan to end homelessness in Alabama, and a Blueprint Towards a Ten-Year Plan to End Homelessness was drafted by the Council (digital.archives.alabama.gov).

The Council presented its first statewide data report on homelessness in 2007 and hoped that the information would assist stakeholders in their efforts to address the complex issue of homelessness. According to the report, there were 5,391 homeless Alabamians on any given night in 2007. The report also listed several causes of homelessness such as mental illness, substance abuse and victims of domestic violence (Rendell, J. & Norling, G., 2007).

However, there was never a dedicated funding source allocated to carry out homelessness initiatives and no plan was ever developed by the Council. On February 12, 2015, Governor Robert Bentley signed Executive Order No. 2 which rescinded several executive orders, including Executive Order No. 31, as well as, dissolved the Interagency Council on Homelessness.

## FINDINGS AND RECOMMENDATIONS

While there are many problems that contribute to the homeless situation in Alabama, there are ways to reduce and ultimately end homelessness in our state. There are four items that have been recommended to assist service providers, government officials, CoCs, and the general public in the fight to end homelessness.

## OPTIMIZE SOURCES OF AFFORDABLE HOUSING

One of the recommended measures is to optimize sources of affordable housing through the creation of a sustainable revenue stream for programs targeted for the homeless. This can be accomplished through the reintroduction and passage of the Alabama Housing Trust Fund.

The Alabama Affordable Housing Act, passed in 2012, was designed to create, retain, and maintain affordable housing throughout Alabama (AL Code § 24-10-4, 2012). However, the bill was only legislative and lacked a dedicated revenue source. House Bill 341, proposed in 2016, would increase the fee for recording certain mortgages, deeds of trust, contracts of conditional sale, and other similar instruments to 30 cents per $100 of indebtedness from the previous 15 cents. Similar to those in Georgia and Florida, the mortgage record tax would be a one-time filing fee upon purchase or refinance of certain mortgages. Additional proceeds from the increased fees would go to the Alabama Housing Trust Fund and the Alabama Homebuyer's Initiative, which provides assistance to homebuyers with private mortgage insurance (PMI). Increasing the amount of money available to pay for PMI insurance up front would increase the number of people willing and able to purchase homes, which stimulates economic growth (LIHCA, 2016).

The Alabama Housing Trust Fund would be administered by ADECA and be distributed to non-profit organizations, counties, municipalities, and public housing authorities to fund programs to increase production and maintenance of affordable housing units for families at or below 60 percent of the median family income.

Unfortunately, House Bill 341 was tabled during the 2016 legislative session. It is recommended that this bill be reintroduced and lobbied for through organizations such as the Alabama Association of Realtors, the Home Builders Association of Alabama, local governments, non-profit service providers, and CoCs.

Based on Alabama home sales alone, the additional revenue generated from House Bill 341 would have been nearly $12 million for homelessness programs and new home purchases in 2015. From 2012 through 2014, home sales would have generated an average of $9.5 million per year (University of Alabama, 2016). The programs currently administered in the state through federal funding have contributed to the decrease in the homeless population in Alabama over the last five years. However, an additional source of revenue that can be used as leverage when applying for federal funding will enhance current programs, provide for more affordable housing, and lead to a significant reduction in the homeless population in Alabama.

## ESTABLISH A STATEWIDE SYSTEM

Another recommendation is to establish a statewide system with one governing board. A collaborative effort was made with the establishment of the Governor's Statewide Interagency Council on Homelessness. However, little was accomplished under this Council and it was eventually dissolved.

One of the reasons Louisiana has been so successful at reducing homelessness is because of the statewide collaboration and coordination among its CoCs and service providers. Louisiana currently operates an interagency council that is administered under the Louisiana Housing Corporation and is made up of various non-profit service providers, CoCs, and relevant government agencies. The council meets quarterly and has procured a non-profit organization to manage the state Housing Management Information System (HMIS), which is a system that tracks services provided to clients by the various agencies and CoCs. Each CoC has regional HMIS contacts, but the centralized system helps to keep accurate and timely records and holds local providers accountable.

Alabama's governing council could include all nine of the CoCs, relevant state agencies such as ADECA and ADMH, non-profit service providers, the HUD regional coordinator, a representative from the Alabama Alliance to End Homelessness, local government representatives, and the Governor's Office of Faith-Based and Community Initiatives.

A governing board would help by presenting a united front to gain awareness from government officials and the public as well as providing shared resources and lessons learned from service providers and CoCs.

## IMPLEMENT A COORDINATED ASSESSMENT

Another recommendation is to implement a Community Connections Network (CCN) or Coordinated Assessment by each CoC. HUD mandated that CoCs and other service providers implement a coordinated assessment in 2013. This coordinated assessment provides a community resource database that brings services to families and individuals who are homeless or at risk of being homeless. The coordinated assessment provides an easily accessible, standardized assessment tool which allows service providers to respond effectively and timely to households, individuals, and families seeking information and assistance for housing and community services. Through a collaboration of service providers, government jurisdictions, and housing organizations, these organizations are connected through a database so that clients only have to fill out one assessment form for multiple services, streamlining the process.

The coordinated assessment utilizes the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) to measure individuals and families' vulnerability to housing instability, allowing service providers to prioritize services needed for individuals experiencing homelessness or those at-risk of experiencing homelessness (HUD Exchange, 2013).

While required by HUD, there is no deadline for implementation, so many of the CoCs have not yet initiated this process. However, those that have implemented a coordinated assessment have seen the benefits of streamlining the process and providing quicker and easier services to clients. Service providers also receive more points of federal grant applications for providing a coordinated assessment. A coordinated assessment will link families and individuals with the most appropriate assistance they need in preventing and ending homelessness.

## ENHANCE COMMUNITY ENGAGEMENT

The final recommendation is to enhance community engagement through a statewide campaign of promoting awareness, educating stakeholders and the community, and encouraging volunteers.

Also, there should be increased leadership, collaboration, and civic engagement through the promotion of collaborative leadership at state and local levels of government and across all sectors, public, private and non-profit. The creation of the governing board will help encourage awareness among government officials. The inclusion of both public and private organizations in promoting awareness will also assist in creating new funding sources for homeless programs.

Educating stakeholders and the general public about community resources and how best to access those resources is another important aspect of a statewide campaign to engage the community. Increasing awareness of resources such as 2-1-1 Connects and homeless connect events would help get assistance to those in need.

Engaging the community to help encourage volunteers is another strategy. Volunteers are needed to assist in the point-in-time count or to help work with the homeless across the state and those facing homelessness due to loss of a job, mental illness, or other contributing factors.

## CONCLUSION

The recommendations discussed in this white paper are proposed suggestions that can help further reduce and/or prevent the number of homeless individuals in Alabama. Although there have been efforts made in the past that were not adequately funded or did not meet expectations, the *Homelessness in Alabama* project team believes that this is an issue that can

be resolved by utilizing one or more of the recommendations presented. There are many capable service providers with the expertise to deliver the appropriate services to homeless individuals and those at-risk of being homeless if they have the tools and resources necessary. While it is evident that homelessness is a problem in Alabama, it is not insurmountable with other collaborative initiatives and level funding.

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