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## 11/24/2015 - How Data is Ending Chronic Homelessness in Maine

By Cullen Ryan

In rural Maine, as I imagine it is in other rural areas, it has been difficult to track down our chronically homeless population. Bouncing through small shelters several months at a time, people remained homeless for years, while not appearing "chronic" to any one shelter. The result: Our shelter system was becoming congested with people homeless for very long periods of time, using beds night after night. We invented an approach to more easily identify and target the people staying the longest, and the results are impressive.



The Maine Statewide Homeless Council decided to focus on identifying "long term stayers," defined as people staying over 180 cumulative days in shelters (or outdoors) within a 365 day period. This was not about diverging from the Federal definition of chronic homelessness, but about using a lower threshold of days, pulled from our data systems, as a strong indicator for who was chronically homeless or at risk of becoming chronically homeless.

From July of 2012 to June of 2013, Maine's Homeless Management Information System data showed 262 long term stayers across the state. Just 262 people? We could house that many people if we all did our part across the state. We could end chronic homelessness.

### Focusing on the Long Term Stayers

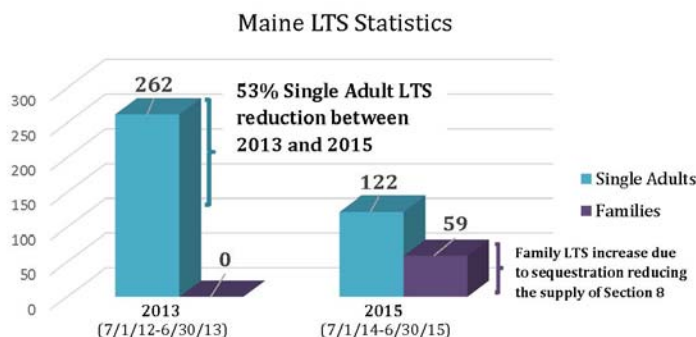
Maine's largest emergency shelter, the Oxford Street Shelter, is located in Portland. It shelters some 2,200 single adults each year. Most end their homelessness very quickly – 33 percent pass through in one to three days; 80 percent pass through within two months. But a small group of long term stayers – 5 percent or less – stay night after night, using most of the beds, and contributing to the need for three very expensive overflow shelters.

In 2013, the shelter spent the year rapidly re-housing a record 700 people with shorter stays in an effort to empty out the shelter. And it made no difference; numbers actually increased, and the shelter continued utilizing three overflow shelters consistently.

In 2014, the shelter targeted the 116 long term stayers almost exclusively. By June, they had housed 22 and closed one of three overflows. It has never reopened. By November, they had housed 66, and largely closed the second overflow shelter. The shelter had brought their long term stayers down to 2.5 percent of the population. Shelter numbers declined every month for 11 months in a row. Even after the effort stalled for six months, long term stayers increased only slightly.

### Community-wide efforts create state-wide results

Last April, Portland's Emergency Shelter Assessment Committee voted unanimously to reenergize the effort and focus on a community-wide campaign to house the remaining long term stayers. Oxford Street Shelter staff would conduct the initial triage, and the goal was to have additional staff engage this population, house them, and support them in the community.



Soon nine organizations committed staffing resources, with multiple funding sources for service delivery.

This collective community effort in Portland was unprecedented and results showed immediately:

- Nine agencies committed 9.5 staff positions to the effort.
- Staff met weekly to work with one list of 70 long term stayers.
- In the first six months, 42 long term stayers were housed.
- The community is engaged, the pace is picking up, and the commitment is growing.
- The group is on track to house every long term stayer by the end of January, close the overflow shelter, and continue progress from there.

We've seen similar progress across the state. Our number of single adult long term stayers decreased 53% between July 2013 and July 2015. Through focused, committed efforts, Maine has been able to house a large percentage of individuals experiencing chronic homelessness. The momentum continues to build as we work to house the remaining individuals.

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Cullen Ryan is the Executive Director of [Community Housing of Maine](#), which is focused on advocacy, supportive housing, and creating community inclusion for homeless and special needs populations.

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