



Data Analysis and Recommended Solutions for the City of Lebanon's Unhoused Population

Report for the Lebanon City Council
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The City of Lebanon, like many cities nationwide, is experiencing a housing crisis . . . a humanitarian crisis. Despite 380 units of rental housing completed and ready for occupancy in 2022ⁱ, the supply of rental housing has not kept pace with the demand, resulting in lower vacancy rates, higher rents, and a competitive rental market that does not meet the needs of our most vulnerable residents.

Lebanon has . . .

- a rental housing vacancy rate of less than 0.5%. A healthy rental market has a vacancy rate of 5%.
- a shortage of affordable housing options compared to market rate housing options [Of the 380 rental units completed in 2022, only 44 units (Heater Landing) are affordable for low-income households.]
- residents with poor credit or no credit, criminal records, and eviction histories that interfere with their ability to obtain housing.
- residents with mental health conditions and substance use disorders that interfere with their ability to maintain housing.
- residents who have physical disabilities and cannot find accessible housing.

The above factors have resulted in an increase in the number of people who are unhoused or precariously housed in Lebanon. Recognizing the need to identify housing solutions, the City Council directed city administration to collect and analyze appropriate data, to inform a future discussion of possible funding, development and operating models and options for shelter solutions for the unhoused.

Data Collection/Analysis

The Point-in-Time (PIT) count is a national, HUD-required count of sheltered and unsheltered people experiencing homelessness on a single night in late January. The intention is that each count is planned, coordinated, and carried out locally on an annual basis.

The NH Department of Health and Human Services, Bureau of Homeless Services (BHS; formerly named Bureau of Housing Supports) is the Homeless Management Information System (HMIS) Lead for the Continuums of Care (CoC) in NH. BHS contracts with the Institute for Community Alliances (ICA) to be the HMIS System Administrator in NH. PIT count planning is the responsibility of each Continuum of Care. There are three CoC's in NH: the Manchester CoC, the Greater Nashua CoC, and the Balance of State CoC. In the Balance of State, BHS coordinates with local groups conducting homeless outreach for the PIT count. Data is recorded and submitted to ICA via Google Forms. Emergency Shelters and Safe Havens submit their PIT count information through HMIS.

PIT count data gets reported to HUD by CoC's. There is no HUD requirement that the PIT count data be broken down by county; however, BHS has manually sorted the PIT reports from the HMIS System Administrator by county. Through 2020, BHS released reports of the number of sheltered and unsheltered individuals by county.ⁱⁱ

Beginning with the PIT count in January 2021, reports have been broken down by CoC's instead of counties. HUD releases annual reports of sheltered and unsheltered counts for NH as a whole, as well as

for each CoC.ⁱⁱⁱ Annual reports of the State of Homelessness in New Hampshire, produced by the New Hampshire Coalition to End Homelessness, also shifted to data broken down by CoC's with the 2020 report.^{iv}

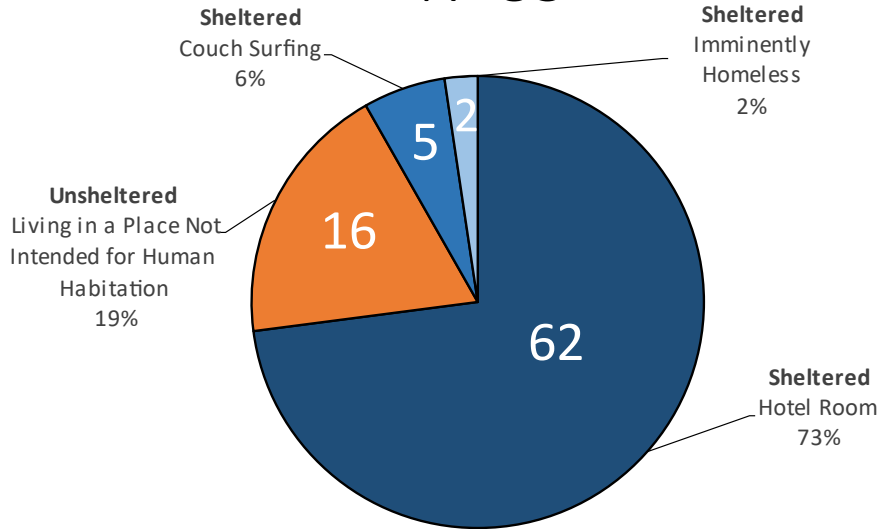
County-specific data was minimally useful in making assumptions about data for the Lebanon area. CoC-specific data is barely useful at all. Lebanon Human Services met with Melissa Hatfield, BHS Director, in an attempt to locate Lebanon-specific data from past PIT counts. Although the PIT count survey asks individuals, "In which New Hampshire town and county did you stay the night of the PIT count?", that data point was not required by HUD and was therefore not consistently collected by volunteers and included in the data set released by ICA to BHS.

PIT Count, January 2023

Under the leadership of LISTEN Community Services and Lebanon Human Services, this year's PIT count was conducted by local service providers and volunteers (including City of Lebanon employees) for the night of 1/25/23. Two-person teams conducted street outreach at known locations in the greater Lebanon area where people experiencing homelessness have been previously known to stay. Service providers also conducted outreach at area hotels. This year's PIT count was the most well-organized count conducted during the last 10 winters in Lebanon. Eighty-five (85) unduplicated individuals representing seventy-one (71) unique households were counted. PIT counts are generally known to be an under-representation of the unsheltered and sheltered populations experiencing homelessness, but the 2023 data is the best local data we have to analyze.

Where Did You Stay Last Night?

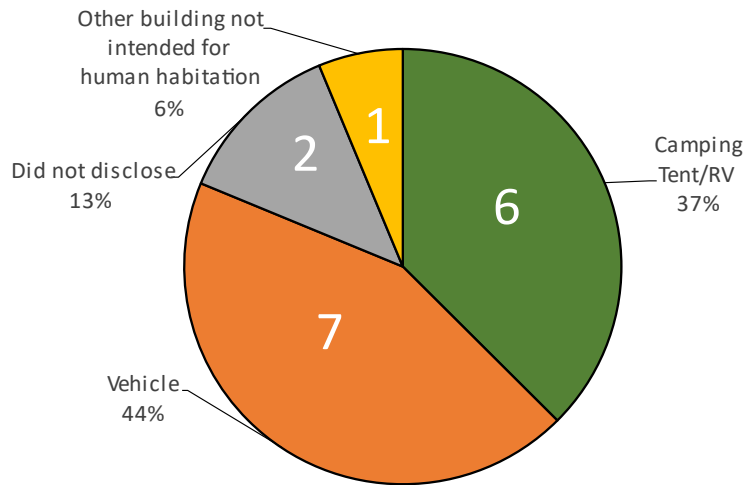
N=85



2023 PIT Count Data Slide 1

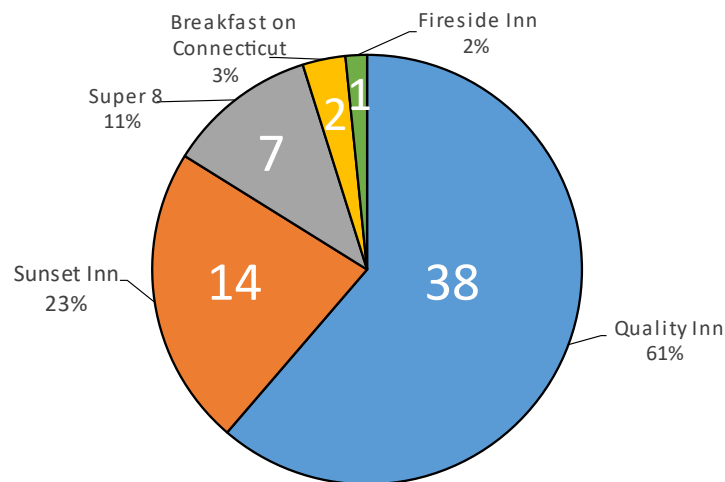
Location. PIT Count volunteers asked individuals where they slept on the night of January 25, and eighty-one percent (81%) of the individuals counted were sheltered in a hotel room, couch surfing, or were imminently homeless. It is probable that many more individuals were couch surfing in Lebanon on January 25 than were counted as that population was “hidden” from our team of volunteers. Sixteen (16) individuals were staying in places not meant for human habitation, such as in their vehicle (7), camping in either a tent or RV (6), or an unheated shed/garage (1); two individuals did not disclose where they stayed but indicated they were unsheltered.

Where Did You Stay Last Night? (Unsheltered=16)



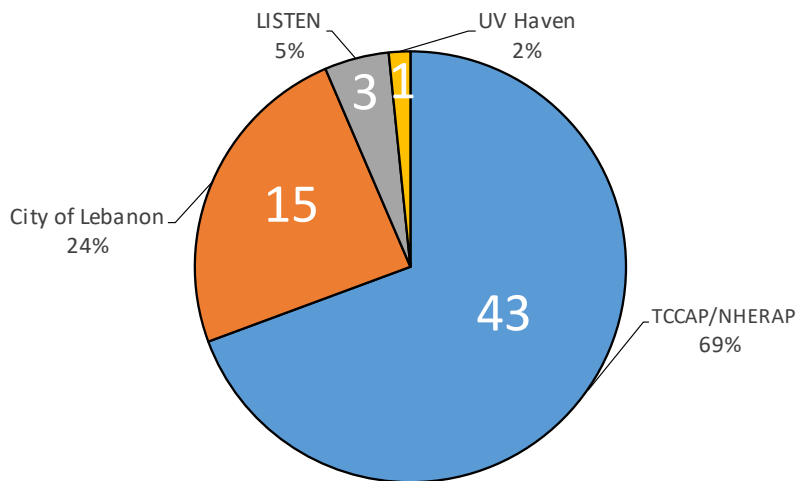
2023 PIT Count Data Slide 2

Where Did You Stay Last Night? (Sheltered/Hotel Guests=62)



2023 PIT Count Data Slide 3

Who Paid for Your Hotel Stay? (Sheltered/Hotel Guests=62)



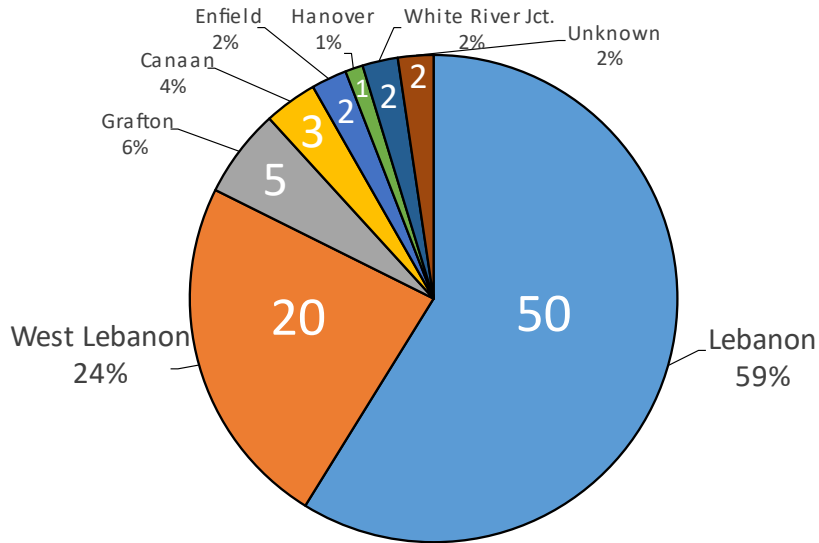
2023 PIT Count Data Slide 4

The majority of the individuals counted during the PIT Count were staying in hotels paid for by either the City or another social service organization. Of note, the hotel program funded by NHERAP and managed by Tri-County CAP was ongoing but not accepting new clients at the time of the PIT count. Sixty-nine percent (69%) of the individuals staying in hotel rooms on January 25 were funded by NHERAP. That program has since ended for all individuals except families with children.

Individuals in non-Lebanon hotels were counted when the agency that paid for the stay was either the City of Lebanon or a social service agency located in Lebanon. For instance, seven guests at the Super 8 in White River Junction were counted in the PIT Count because their stay was being paid for by the City of Lebanon.

Demographics. Most of the individuals (83%) interviewed by the team of volunteers during the PIT count reported that they were members of the Lebanon/West Lebanon community. Fifty-nine percent (59%) of households were single males, twenty-seven percent (27%) were single females, and five were couples. There were five families with children, including one family with children who were staying in their vehicle. Individuals were disproportionately male compared to the area's general population. There were at least four Veterans counted, and seven individuals reported that they were fleeing domestic violence.

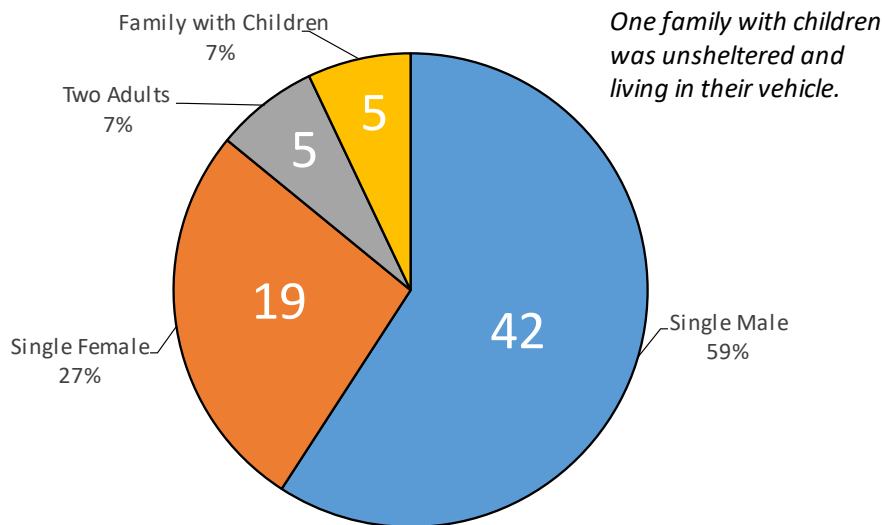
What Town Are You From?



2023 PIT Count Data Slide 5

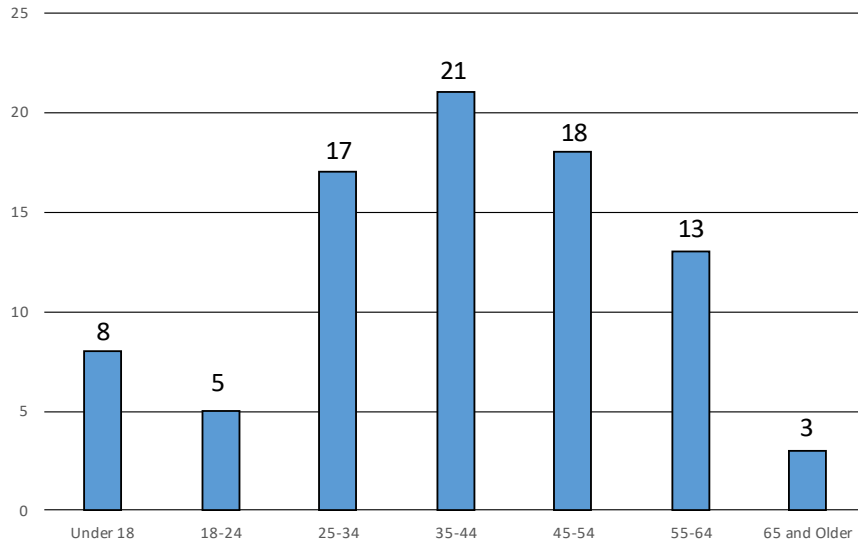
Household Composition

n=71



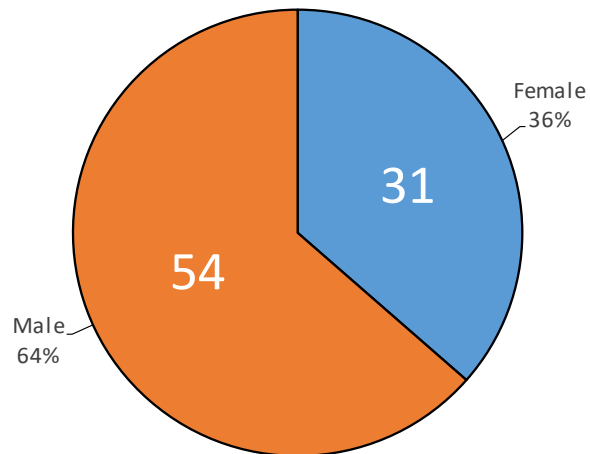
2023 PIT Count Data Slide 6

Age Range



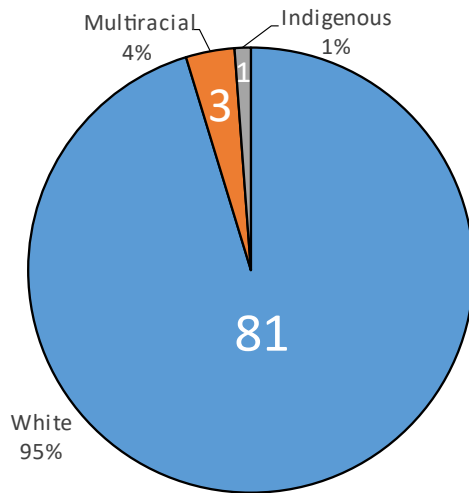
2023 PIT Count Data Slide 7

Gender



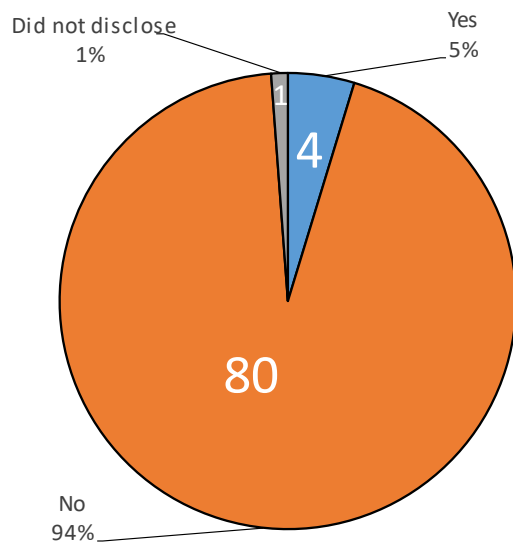
2023 PIT Count Data Slide 8

Race



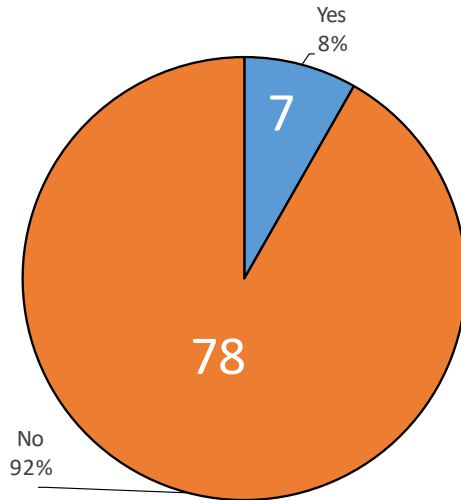
2023 PIT Count Data Slide 9

Veterans



2023 PIT Count Data Slide 10

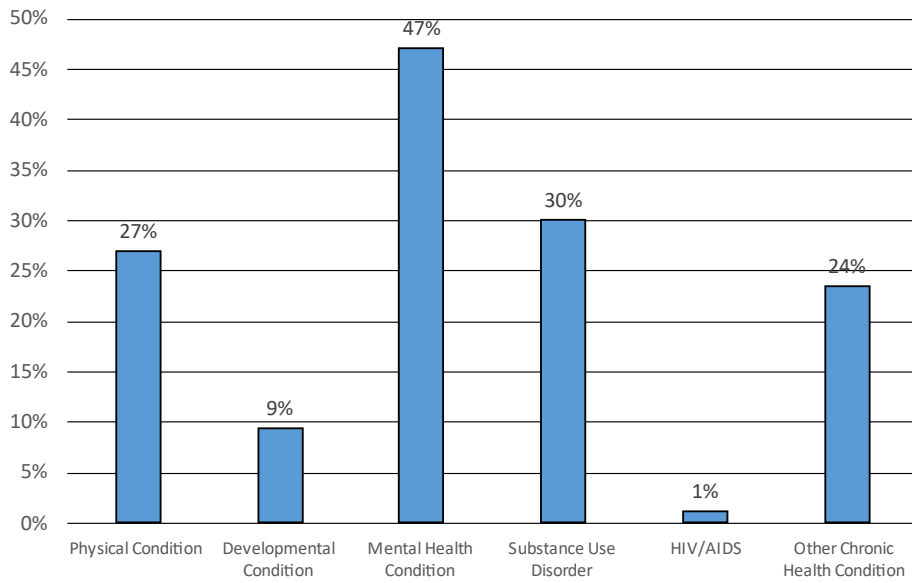
Currently Fleeing Domestic Violence



2023 PIT Count Data Slide 11

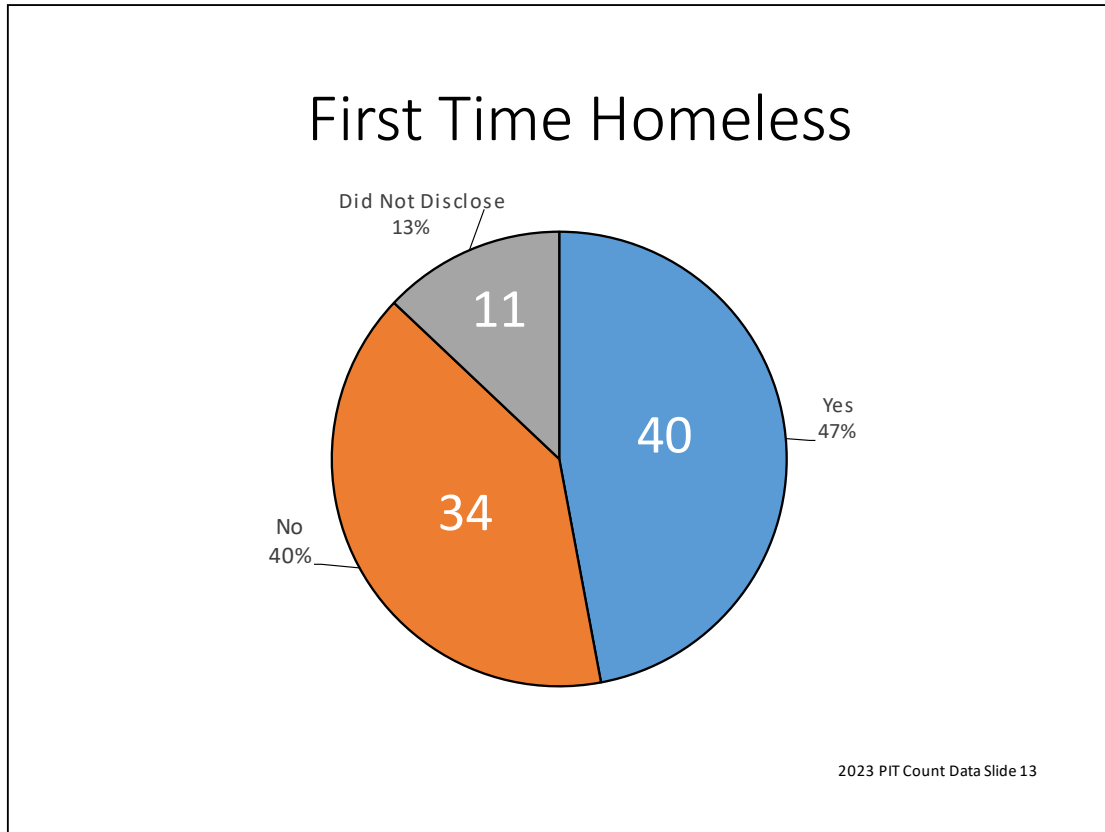
Risk factors. Individuals were asked to self-report whether they had risk factors for homelessness, including physical, developmental, mental health, or other chronic health condition(s), a substance use disorder, and/or HIV/AIDS. Individuals could report any and all that applied. Fifty-nine (59) individuals (69%) self-reported at least one health-related risk factor for homelessness. Due to the sensitivity and stigma surrounding the risk factors, it is likely that these conditions were underreported. The most commonly reported risk factor was a mental health condition, which forty-seven percent (47%) of individuals reported. Substance use disorders (30%) and physical conditions (27%) were also common among the individuals interviewed.

Risk Factors



2023 PIT Count Data Slide 12

Without accurate historical data to compare to, it is difficult to draw conclusions; however, the Housing First committee was surprised to learn that 40 individuals reported that this was their first time being unhoused. This high level of first-time homelessness may be a reflection of the current tight rental market.



What does the data tell us?

- There were a significant number of *unsheltered individuals* (16) on January 25.
- The number of *sheltered individuals receiving emergency shelter in hotels/motels* (62) on January 25 was nearly four times greater than the number of unsheltered. Without federal and state funding for the motel program, more people might have been *unsheltered*.
- Those surveyed were predominantly from Lebanon.
- Roughly 50% of people surveyed were experiencing homelessness for the first time.
- The most common self-reported risk factors were mental health, substance use, and physical conditions.

The Need

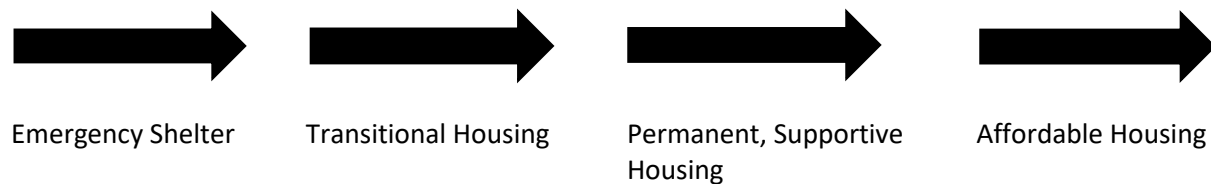
The National Alliance to End Homelessness defines Housing First as a model of homeless assistance that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their

quality of life. This approach is guided by the belief that people’s basic needs must be met before they can attend to other things, such as getting a job, budgeting properly, and engaging in treatment for mental health and substance use disorders.

To address the housing risk factors identified in the data above, we need temporary, short-term, long-term, and permanent housing options for adults with mental health conditions, substance use disorders, physical health conditions and limited mobility. Housing options need to address all three legs of the housing stool – *physical units, rental subsidies, and supportive services*. Case management services can assist adults with mental health conditions to remain housed despite behavioral challenges and interpersonal conflict with neighbors. Recovery friendly housing for adults with substance use disorders is not just sober housing. It’s supportive housing based on the understanding that abstinence alone doesn’t address substance use disorder. Relapse can be common, and someone’s housing shouldn’t be at risk if someone relapses during their recovery from substance use. Lastly, ground-floor or universal access housing can meet the needs of Lebanon residents with limited mobility who need safe places to live.

System of Care

Lebanon needs a healthy and robust system of care to provide housing options along a continuum, from temporary emergency shelter to permanent, affordable housing.



Emergency shelter (e.g. congregate shelters, micro-dwellings, hotels/motels) provides immediate physical shelter for people experiencing homelessness. It’s a harm reduction strategy to prevent loss of life during severe weather, and also to prevent substance use as a coping mechanism to manage bodily pain associated with outdoor camping. The intention is that shelter stays are brief, with frequent bed turnover so that others can access this option. But given the shortage of other housing options to move on to, shelter stays have increased in duration. In Fiscal Year (FY) 2023 [July 1, 2022-current], the average length of stay at the Haven’s family shelter has been 102 days, compared to 86 days in FY 2022. Since July 1, 2022, the average length of stay at the Haven’s adult shelter has been 183 days, compared to 149 days in FY 2022 and 140 days in FY 2021. The Claremont shelter’s average length of stay in calendar year 2022 was 69 days for folks who exited into permanent housing situations. However, this data point does not tell the full story. Lebanon Human Services recently sponsored a family at the Claremont shelter for 360 days until they secured permanent affordable housing.

Using hotels/motels as a means of temporary emergency shelter has been a welfare practice that saves lives during cold weather months when shelter beds are unavailable, and bridges short-term gaps until

permanent housing is secured. The hotel/motel option was relied upon during the COVID-19 pandemic and funded by federal, state, and municipal dollars. While this shelter option undoubtedly saved lives during the last two winters, it is neither a cost-effective nor sustainable model for emergency shelter.

Lebanon, with approximately 15,000 residents, is among the largest communities in New Hampshire without a homeless shelter. The two nearest shelters are in White River Junction and Claremont. The Upper Valley Haven provides shelter for up to 20 individuals at the Hixon House Adult Shelter, and up to 8 families (46 beds) at the Byrne House Family Shelter. The Claremont shelter, run by Southwestern Community Services, provides shelter for up to 15 men and up to 25 women/children (total of 40 beds). Human Services regularly makes referrals to both shelters, but beds are unavailable more often than not.

Investment in building and operating shelter(s) in Lebanon would be far more cost-effective than providing temporary emergency housing in hotels/motels. For example, the Claremont shelter charges the City of Lebanon \$20/day for a single adult and \$30/day for a family. Lebanon hotels/motels have charged the City of Lebanon \$159 plus tax per night or \$179 plus tax for a handicap accessible room. To illustrate this point, the City of Lebanon would pay the Claremont shelter a total of \$10,800 for a family to reside at the shelter for 360 days. In contrast, the City of Lebanon would pay a hotel/motel \$62,107 for the same family's lodging for 360 days. In addition, hotel/motel expenses are not inclusive of supportive services that, if provided, are provided by outside agencies at additional cost to those agencies.

There are other challenges with using hotels/motels for temporary emergency shelter. There are times of the year when there are no vacancies, such as Dartmouth College commencement weekend and peak foliage weeks. Hotel/motel staff are not trained in trauma-informed practices and can be insensitive to working with the population of unhoused people. Use of hotels/motels should be reserved for unhoused residents of Lebanon who are not appropriate for congregate shelter, such as those with physical disabilities for whom the shelter environment is not accommodating, those with traumatic histories and mental health conditions who are triggered by living in close proximity to others, and those with criminal records involving violent and/or sexual offenses.

Even when communities have shelter services, high barriers to entering emergency shelter programs deter many individuals and families from seeking services. Sobriety requirements, criminal background checks, "no pets allowed", "no couples placed together", limits on personal belongings, and early curfews screen out many households in need of emergency shelter. Creating a low-barrier environment means removing as many entry requirements as possible and responding to the individual needs and concerns of people seeking shelter. Low-barrier shelters emphasize welcoming guests in as they are and focusing on harm reduction, while having clear and simple behavioral expectations that apply to anyone residing in the shelter. These expectations are based on maintaining a safe environment for all shelter guests. And creative problem-solving, such as allowing couples to bunk together and offering storage space for personal belongings, leads to lower threshold options that encourage people to come inside.

The Haven and Claremont shelters are not low-barrier shelters in the strictest sense of the definition, but they have lower thresholds in terms of alcohol and drug use. Drugs and alcohol are not permitted on shelter property, and a violation of this rule can result in immediate termination from the program. The response to alcohol and drug use off site, however, is grounded in a "low threshold/more tolerant"

approach. If someone returns to the adult shelter under the influence, an assessment is done for safety and ability to be respectful of other guests and staff. Substance misuse-related behavior that poses a safety risk to self, others, or property will likely result in being asked to leave the shelter. A disruptive episode that is out of character for the individual is assessed through a lens of exploring supports and treatment options, as well as the individual's ability to engage in treatment. To that end, the Haven will hold a shelter bed for someone in the adult shelter who goes into residential treatment for 14 days or is hospitalized for an overdose or to detox. The seasonal shelter run by the Haven prior to the pandemic allowed guests who are under the influence but emphasized appropriate behavior in the communal space and lack of safety violations. In the family shelters, guests risk losing their shelter bed if they engage in substance use off site and return to the shelter under the influence. The presence of children is the rationale for this "higher threshold/less tolerant" approach.

Micro-dwellings provide a shelter option for unhoused individuals who have not had successful experiences living in congregate care settings. A micro-dwelling offers privacy and far less social stimulation for the resident but does not mean they are on their own without support. In fact, many developers of micro-dwellings require that supportive social services be attached to the physical dwellings, so that immediate needs of residents are addressed while developing long-term housing solutions.

In the Upper Valley, unhoused members of the community have been matched with individuals who wish to support them with a space to park a mobile micro-dwelling. Ideal spaces are those within walking distance to services and public transportation. Several faith-based organizations have offered space for a micro-dwelling in their respective parking lots, but these offers typically run afoul of local zoning ordinances as well as building and fire codes. Additional efforts should be proposed to modify zoning to allow micro-dwellings. Inspection and approval of micro-dwellings for life safety is also critical.

The City of Burlington, VT, invested \$1.6 million in federal pandemic aid to create the low-barrier Elmwood Community Shelter (ECS) on city-owned land (a former parking lot). With capacity for 35 individuals, ECS offers 25 single-unit pods and 5 double-units that can accommodate two residents. The prefabricated pods have one or two single beds, a small refrigerator, heat, air conditioning, and electricity. Residents share bathroom facilities and a central community space where meals are served. Champlain Housing Trust manages the project for the City of Burlington. ECS does not require that residents be sober or compliant with mental health or substance use disorder treatment; however, use of alcohol or drugs is prohibited on site. ECS provides specialized support services to ECS residents with mental health and medical conditions, substance use disorder, and other challenges to accessing traditional shelter options.

Transitional housing provides a time-limited, supportive environment for people to live in while they try to obtain permanent, affordable housing. Transitional housing offers more independence to tenants than communal shelter environments but has some structure to support tenants as they develop or improve their functional living skills. Some transitional housing programs are population-specific (e.g. WISE will soon be offering transitional housing for their shelter guests; West Central Behavioral Health currently offers transitional housing for individuals diagnosed with Severe and Persistent Mental Illness).

Other transitional housing programs, such as LISTEN’s pilot program, are targeted at helping hotel/motel guests transition into permanent housing.

Current transitional housing options in Lebanon total 6; 4 units for WISE [opening soon], 1 two-bedroom unit for WCBH, and 1 one-bedroom unit for LISTEN. WCBH is actively working on additional transitional housing units to meet the needs of their clientele. While Headrest offers a 90-day, low-intensity residential program for individuals with substance use disorders, Lebanon does not have recovery friendly transitional housing that graduates of the residential program can transition to.

Permanent, supportive housing is an evidence-based option for people experiencing chronic homelessness to move from sheltered or unsheltered homelessness into permanent, affordable housing with supportive services. Twin Pines Housing (TPH) partners with the Upper Valley Haven to provide 18 one-bedroom units in Lebanon at 10 Parkhurst Street. In 2017, Lebanon’s Housing First coalition brought community partners together to engage in problem-solving for the individuals living in an encampment on city-owned land in West Lebanon. Parkhurst Community Housing was born out of community collaboration and opened in the summer of 2018.

Recognizing the need for additional permanent, supportive housing for the chronically homeless, and building off the success of Parkhurst Community Housing, TPH is developing a similar project at 747 Hartford Avenue in White River Junction. This project will also include 18 units of permanent, affordable housing, with supportive services provided by both the Haven and TPH. Whereas 10 Parkhurst Street was an existing apartment building that was renovated to meet project needs, 747 Hartford Avenue will bring 18 units of additional housing to the Upper Valley.

Affordable housing

Lebanon has a variety of rental housing options (e.g. single room occupancy (SROs); studio, 1-bedroom, 2-bedroom, and 3-bedroom units; single-family homes; duplexes), but affordability is a major concern. Affordable housing is generally defined as housing, rental or owner-occupied, that costs no more than 30% of one’s gross income. Rental cost is defined as rent plus utilities. Ownership cost is defined as monthly principal, interest, taxes and insurance.^v

Home prices and market rate rents have risen drastically in recent years. Some landlords have sold their rental properties for maximum profit, while other landlords have renovated their units and significantly increased the rent. The demand for housing has also created an environment in which landlords can be choosy about who they rent to. Applicants with poor landlord references, criminal records, and well short of “required income 3X the rent” cannot compete for housing in this market.

The supply of affordable rental housing has not kept pace with the supply of market rate rental housing. As noted earlier in this report, of the 380 units added to Lebanon’s rental housing inventory in the past 12 months, only 44 units are classified as affordable housing. To date, Lebanon has 568 units of subsidized and affordable housing. This includes Lebanon Housing Authority’s Heater Landing development which added 44 affordable, tax-credit units in November 2022. Unless the supply of

subsidized and affordable housing increases, more low-income and fixed-income residents are going to struggle with housing costs and may begin to experience housing instability and homelessness.

SROs (single room occupancy) are a housing option aimed at residents with low or minimal incomes. SRO units offer single bedrooms with shared bathroom/kitchen/living areas. They are typically the least expensive form of non-subsidized housing and can be transitional or permanent in nature. In 2013, weekly rents for Lebanon SROs ranged from \$120-170. In 2023, weekly rents range from \$170-205, making rent unaffordable for someone on Supplemental Security Income of \$800-900 per month. Lebanon had approximately 70 SRO units but lost 8 units at 14 Bank Street on 4/1/23.

Long-term rental assistance, such as Section 8 Housing Choice Vouchers (HCVs), helps address the affordability of permanent housing. HCVs allow very low-income households to choose and lease safe and affordable privately-owned rental housing. Lebanon Housing Authority (LHA) has a total of 166 HCVs per its contract with HUD. Currently, 142 HCVs are utilized. 5 HCVs have been issued and the recipients are searching for housing. Steven Stancek, Leased Housing Officer at LHA, explained the reason for the discrepancy between 166 available HCVs and 147 utilized/issued. “That is because the expected calendar year appropriation is approximately \$1,200,000 and at current spending levels, LHA is expecting to exceed its Annual Budget Authority which limits further issuance of new HCVs. In anticipation of HCV turnovers due to sickness, death, evictions, etc., LHA will continue to issue a modest number of additional HCVs through the 2023 year.”

HCVs are less effective in tight rental markets. Property owners can raise rents above subsidy levels or choose not to rent to voucher holders. To mitigate this challenge, LHA created a Section 8 Landlord Incentive Program (LIP) in 2022. The LIP is available to any landlord-owner who leases a rental unit to new admission participants, current participants relocating in the community, or current participants who are at risk of lapsing leases. The LIP pays an incentive payment equivalent of \$100 monthly for the term of any initial 12-month contract on behalf of a newly admitted HCV participant or relocating current HCV participant, and for a renegotiated lapsing lease renewal. Said payments are disbursed in an aggregate sum of \$1,200 at time of contract signing.

According to Steven Stancek, since the August 2022 implementation of the LIP, only a half-dozen payments have been disbursed. Many households issued HCVs in 2022 and searching for units opted to apply and wait for the opening of LHA’s Heater Landing, which ultimately leased up 15 HCV participants. LHA did not receive any payments from the LIP due to a conflict of interest as part owner and manager of the complex. In general, landlord reaction to the LIP has been lukewarm. Owners having rental turnovers are aggressively increasing rents by more than \$100 per month in many cases and have quickly reached beyond current LHA Payment Standards, even at 120% of HUD Fair Market Rents for Lebanon.^{vi}

FY 2023 Fair Market Rents/Payment Standards for Grafton County, NH [LHA approved Payment Standards in brackets]						
	Date Effective	0 BR	1 BR	2 BR	3 BR	4 BR
HUD	10/01/2022	898	1020	1343	1714	2057
LHA	10/01/2022	[1077]	[1224]	[1611]	[2056]	[2468]

HUD picks up the additional cost of the LHA payment standards subject to prior approval, such as a reasonable accommodation for a disabled person or family. To achieve program-wide approval of the higher payment standards, LHA took advantage of 2 waivers made available to Public Housing Authorities through the Federal CARES Act and American Rescue Plan Act. The current waiver expires on 12/31/23.

LHA is currently operating the Section 8 HCV Program at 100% of Budget Authority but is anticipating issuance of more HCVs in the next several months to allow for participant turnover. There is concern that turnover of Section 8 apartments won't necessarily be reoccupied by new HCV participants given the rate and scope of market rent increases and, in some cases, sales of properties to new out-of-town owners. It is expected that newly issued and searching HCVs will continue to experience great difficulty in finding apartments that can be approved by the Section 8 HCV Program.^{vii}

Recommendations

After analyzing the 2023 Point-in-Time data and the current system of care in Lebanon, the following recommendations, many of which are grounded in best practice^{viii}, are offered for the Council's consideration:

- Locate a site for a 2023-2024 seasonal shelter that can provide life-saving shelter for up to **15 individuals**. Apply for funding to add sprinklers to meet life safety codes and to make other upgrades as needed. Showers and lockers for overnight guests as well as the larger community of unhoused individuals. Contract with the Haven to operate the seasonal shelter.
- Develop a year-round, low-barrier emergency shelter for **20 individuals**. Some pets allowed. Showers and lockers for overnight guests as well as the larger community of unhoused individuals. Location close to public transportation and services. Contract with a social service agency to operate the shelter.
- Develop an additional year-round emergency shelter for **10 individuals and 4 families**. Some pets allowed. Showers and lockers for overnight guests as well as the larger community of unhoused individuals and families. Replicate the Haven's shelter model in a location close to public transportation and services. Contract with a social service agency to operate the shelter.
- Develop a site(s) for micro-dwellings/pods for **5-10 individuals**. Replicate emerging best practice models for micro-dwellings/pods on a small scale for Lebanon. Contract with a social service agency to operate these shelters as emergency or transitional housing based on individual needs.
- Develop additional SRO units for **20 individuals**. Weekly rents need to be capped to be affordable for people living on SSI incomes of \$800-900 per month.
- Develop additional Transitional Housing units – substance use recovery friendly units for **8 individuals**, mental health friendly units for **8 individuals**, family friendly units for **4 families**.

- Develop additional permanent, supportive housing for **20 individuals**.
- Incentivize leasing to low-income households with housing barriers by providing landlords additional financial incentives and ensuring the availability of supportive services for tenants.
- Partner with developers to build workforce housing with a goal of 20% of all new rental units being affordable for households earning less than 50% of the area medium income (AMI) for Lebanon (\$73,704).

Lebanon cannot and should not be the only municipality in lower Grafton County to assess homelessness and develop housing solutions. To this end, it is recommended that the City of Lebanon contract with Parker Advisors^{ix} to provide a regional assessment of homelessness in the Upper Valley and recommend regional solutions. Parker Advisors recently conducted a Homelessness Needs Assessment and Action Plan for the City of Montpelier, VT, and welcomes the opportunity to work with the City of Lebanon.

Endnotes

ⁱ Summit on Juniper, 309 units; 195 Mechanic Street, 27 units; Heater Landing, 44 units.

ⁱⁱ <https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/documents2/pit-2020.pdf>

ⁱⁱⁱ https://files.hudexchange.info/reports/published/CoC_PopSub_State_NH_2021.pdf
https://files.hudexchange.info/reports/published/CoC_PopSub_CoC_NH-500-2021_NH_2021.pdf
https://files.hudexchange.info/reports/published/CoC_PopSub_State_NH_2022.pdf
https://files.hudexchange.info/reports/published/CoC_PopSub_CoC_NH-500-2022_NH_2022.pdf

^{iv} <https://www.nhceh.org/wp-content/uploads/2022/01/2020-State-of-Homelessness-in-NH-Report-Online-Final-compressed-1.pdf>
https://www.nhceh.org/wp-content/uploads/2022/09/2022-NHCEH-Full-Report-6.2.2022_compressed.pdf

^v <https://www.nhhfa.org/housing-terms/>

^{vi} <https://www.lebanonhousing.org/notices.aspx>

^{vii} <https://www.lebanonhousing.org/section8.aspx>

^{viii} <https://www.nhceh.org/research/best-practices/>

^{ix} Parker Advisors, LLC; Daniel Towle, Founder & President; Montpelier, VT