
How's Nashville
Vulnerability Index Results
As of December 3, 2013

From May 29-31, 2013, the Metropolitan Homelessness Commission organized a Registry Week as the launching point for the *How's Nashville* campaign. Between the hours of 3:30am and 7:30am, 20 teams made up over 100 community volunteers canvassed the streets and campsites of Nashville, TN. Specialized teams also targeted the Nashville Rescue Mission the week prior and Room in the Inn's Respite program. The volunteer teams used Community Solutions' **Vulnerability Index** to survey and create a by-name list of individuals experiencing street homelessness who are most at risk of premature death.

The *How's Nashville* movement brings together 30 community partners from the nonprofit, business, and government sectors to implement permanent supportive housing for people who are vulnerable and have experienced long-term homelessness (most fit the federal definition of chronic homelessness). Ever since, community partners have continued to survey people who stay in shelters, campsites, and in the streets, thereby systematically gathering the names, pictures, and dates of birth of individuals and also capturing data on their health status, institutional history (jail, prison, hospital, and military), length of homelessness, patterns of shelter use, and previous housing situation. These data were collected by use of a 41-item questionnaire.

The Vulnerability Index continues to be used by *How's Nashville* partners to identify people who have been homeless the longest and are the most vulnerable. This list is now being used to target new and available housing and service resources to the most vulnerable in an effort to reduce chronic homelessness in Nashville.

The Vulnerability Index is based on research by Dr. Jim O'Connell, which shows certain medical conditions place a homeless individual at a higher risk than others for dying if they remain on the streets.

Results

- 1,028 individuals experiencing homelessness were identified and surveyed in Nashville, including in shelters, in campsites, on the street.
- 604 (59%) were found to have health conditions associated with a high mortality risk and thus, were considered vulnerable.

At-Risk Indicators (results show % of vulnerable population)

Indicator	Number
At-Risk Tri-Morbid	183 (30.4%)
At-Risk ER or Hospitalized Over 3X	169 (28%)
At-Risk ER over 3X	120 (20%)
At-Risk Age Over 60	69 (11.5%)
At-Risk HIV/AIDS	34 (5.7%)
At-Risk Liver Disease	66 (11%)
At-Risk Kidney Disease	30 (5%)
At-Risk Cold/Wet Weather Injury	93 (15.4%)

Age of all surveyed

- 282 (27.5%) were 55 years or older.
- Average age for all surveyed is 47 years.
- The oldest respondent was 79 years old.
- The youngest respondent was 12 years old.

Age of vulnerable surveyed

- 207 (20.2%) were 55 years or older.
- Average age for people considered vulnerable is 49 years.

Chronic/Vulnerable

- 306 individuals were listed as chronic only (excluding anyone who is vulnerable).
- 514 individuals were listed as chronic and vulnerable.
- 90 individuals were listed as vulnerable only (excluding anyone who is chronic).

Tri-Morbid (co-occurring mental health and substance issues plus a chronic medical condition)

- 296 (28.7%) individuals were listed as vulnerable and tri-morbid.

Years Homeless

- The average years homeless for the vulnerable population is 5.7 years.
- The average years homeless for the Non-Vulnerable population is 4.1 years.
- The average years homeless for tri-morbid population 6.5 years.

Service Needs (Total Surveyed)

- 418 (40.6%) people reported a dual diagnosis of mental illness and substance abuse.
- 232 (22.5%) people reported only substance abuse.
- 191 (18%) people reported only signs or symptoms of mental illness.

Veterans (Total surveyed)

- 141 (13.7%) surveyed were veterans.
- 102 of the Veterans met criteria for “vulnerable.”

Youth & Foster Care (Total surveyed)

- 159 (15.4%) respondents reported having a history of foster care.
- 93 respondents who reported having a history of foster care were vulnerable.
- 50 respondents were under 25 years old.
- The youngest respondent was 12 years old.
- 11 respondents under the age of 25 had increased mortality risks specific to that age group. (Youth risk factors are HIV/AIDS, drink alcohol everyday for past 30 days, injection drug use.)

Inpatient Hospitalizations (Total surveyed)

- A total of 1,185 inpatient hospitalizations were reported in the past year at an average annual cost of \$1,732,470. This assumes 1 day per hospitalization at cost of \$1,462 per day (Kaiser Fam, 2010).

Emergency Room Visits (Total surveyed)

- A total of 1702 ER visits were reported by all respondents in the last 3 months for an annual cost of \$3,404,000. This assumes \$500 cost per ER visit.

Health Insurance (Total surveyed)

- Medicaid – 234
- Medicare – 111
- Private – 7
- Other – 76
- No insurance – 488 (47%)

Penal System Impacts (Total surveyed)

- 793 (77%) report a history of jail time.
- 305 (29.7%) report a history of prison time.

Income Source

- 226 individuals report working “on the books.”
- 107 individuals report having SSDI/SSA income.
- 181 individuals report having SSI income.
- 410 individuals were considered vulnerable without SSI/SSDI.
- 20 receive VA disability.
- 442 receive Food Stamps.
- 138 individuals report working “off the books.”
- 122 individuals report income from panhandling.
- 44 individuals report income from recycling.
- 14 individuals report income from sex or drug trade.

Violence

- 373 (36.2%) report being a victim of a violent attack since becoming homeless.

Brain Injury

- 304 (29.5%) report suffering from a brain injury.

How's Nashville is a community-wide, collaborative, and inclusive effort to end chronic homelessness in Nashville within this decade. It was launched by the Metropolitan Homelessness Commission in 2013. The *How's Nashville* campaign is driven by community partners that meet regularly to work on the initiative's goals and monitor its progress.

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