SUSSEX COUNTY POINT IN TIME SURVEY REPORT ON HOMELESSNESS IN 2012

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Executive Summary

The 2012 Point in Time survey of the homeless population of Sussex County was conducted on January 25, 2012. Surveys were collected through various agencies such as the Division of Social Services, Project Self-Sufficiency, Newton Medical Center, Birth Haven, Samaritan Inn and Sussex County Interfaith Hospitality Network.

A total of 289 homeless people responded to the survey, 120 of which meet the new HUD definition for homelessness. Because the HUD definition no longer counts individuals receiving Temporary Rental Assistance (TRA) or Emergency Assistance (EA) as homeless, this report will discuss the total Sussex County homeless population and differentiate between HUD homeless and TRA/EA homeless where appropriate. In addition, the new definition of homelessness also caused the data to be collected differently, and there is no usable data on the duration of homelessness, with the exception of the chronically homeless.

Another issue is a lack of Spanish translators, and there were some individuals who were unable to complete the survey because of a language barrier. This means that the number of homeless individuals was undoubtedly higher than the numbers reflected in this report, but it cannot be determined how many homeless individuals were missed for this reason.

As always, getting an accurate picture of the homeless is extremely difficult because the population itself fluctuates over time and from season to season. However, the Point in Time survey is designed to capture data on the homeless population at its most vulnerable, and at a time of year when they are most likely to reach out for assistance.

In 2012, there were shifts in the contributing factors, such as the fact that the number of evictions continued to rise dramatically from 17.8% (67) in 2010 to 44.8% (175) in 2011 and 54.1% in 2012. This is the highest percentage of evictions in the last four years and represents an increase of 36.4% over 2008. In addition, the survey also seems to indicate that though the actual number of homeless individuals on the street or not knowing where they will be staying remains small (18), this was an increase to 15.0% from 1.5% in 2011.

The age group that appears most vulnerable is the group between ages 22 and 30, which comprised 27.0% of all the homeless individuals surveyed in 2012. This is down from 29.0% for the same age group in 2011, but nonetheless remains the highest age bracket. The percentage of homeless individuals under age 30 is 36.1% for the combined HUD and TRA populations.

While the numbers for the homeless over 61 remain very small, there were 12 (4.2%) in 2012 compared to 10 (2.6%) in 2011, 4 (1.1%) in 2010 and 5 (1.8%) in 2009. Considering that there were over 100 fewer individuals surveyed in 2012 than in 2011, this change is significant. It should be noted here that the oldest in this group was 69.

The number of women in the age group between 18 and 30 which had risen sharply in 2010 dropped from 37.9% to 31.2% in 2011 and 27.1% in 2012. However, it remains a very vulnerable population.

The contributing factors for this high-risk population are also of significance. 65.1% of the women in this group cited breakup of a relationship/death as a factor, followed the high cost of housing (53.5%), and those that lost jobs who couldn't find another (43.8%).

This report makes comparisons, wherever possible and meaningful, with previous point in time data in order to attempt to discern trends and gain a perspective over time. While certain conclusions can be drawn, it must always be with the understanding that no single point in time survey can be relied upon for a complete and accurate look at homelessness. However, with this understanding, trends can be observed and information can be used for human service planning.

Introduction

The 2012 Point in Time Survey of Homelessness in Sussex County was conducted on January 25, 2012.

The following report offers a snapshot of the face of homelessness as experienced by residents of Sussex County on that night.

This year's study has been complicated by the change in HUD's definition of homelessness, which no longer includes those receiving rental assistance in the calculations. Therefore, HUD numbers look very different from past years, and do not necessarily accurately reflect homelessness in Sussex County. Since by definition, those receiving rental assistance would meet the definition of homelessness if they did not have such aid, for purposes of this study, they will be included in this report. However, each group will be identified for the sake of clarity. Those meeting the HUD definition will be identified as HUD and those that are receiving temporary rental or emergency assistance will be identified as TRA. All totals will either specify the group or indicate that they are combined.

HUD has issued the final regulation to implement changes to the definition of homelessness contained in the Homeless Emergency Assistance and Rapid Transition to Housing Act. The definition affects who is eligible for various HUD-funded homeless assistance programs. The new definition includes four broad categories of homelessness:

- People who are living in a place not meant for human habitation, in emergency shelter, in transitional housing, or are exiting an institution where they temporarily resided. The only significant change from existing practice is that people will be considered homeless if they are exiting an institution where they resided for up to 90 days (it was previously 30 days), and were in shelter or a place not meant for human habitation immediately prior to entering that institution.
- People who are losing their primary nighttime residence, which may include a motel or hotel or a doubled up situation, within 14 days and lack resources or support networks to remain in housing. HUD had previously allowed people who were being displaced within 7 days to be considered homeless. The proposed regulation also describes specific documentation requirements for this category.
- Families with children or unaccompanied youth who are unstably housed and likely to continue in that state. This is a new category of homelessness, and it applies to families with children or unaccompanied youth who have not had a lease or ownership interest in a housing unit in the last 60 or more days, have had two or more moves in the last 60 days, and who are likely to continue to be unstably housed because of disability or multiple barriers to employment.
- People who are fleeing or attempting to flee domestic violence, have no other residence, and lack the resources or support networks to obtain other permanent housing. This category is similar to the current practice regarding people who are fleeing domestic violence.

HUD defines chronically homeless as those who are either (1) an unaccompanied homeless individual with a disabling condition who has been continuously homeless for a year or more, OR (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in the past three years). In 2012, this population was so small, the data has been detailed in a separate section, as no valid comparisons to previous years can be made. It should also be noted that for the purpose of this report, those who indicated either SSI (Supplemental Security Income) or SSDI (Social Security Disability Insurance) as a source of income, or indicated that alcohol or other substance abuse, medical problems/physical or developmental disability, or mental illness/emotional problems are a cause of their homelessness in combination with a qualifying duration of homelessness shall be considered to meet the HUD definition.

Due to a change in instructions on questions of duration of homelessness, there were no answers to any of these questions on 40% of the surveys received, so there is little usable data to determine the exact number of chronically homeless individuals who were surveyed. Only sixteen respondents answered with a qualifying duration of homelessness and requisite secondary factor as described above. Therefore, all data collected on the

verifiably chronically homeless has been put into a separate section for information purposes but has been excluded from all comparisons to previous years

This report contains comparisons of data on the homeless population from Point in Time surveys for the last six years where it is logical to do so.

As with all Point in Time surveys, the number of individuals responding to the survey is exactly that – a point in time. It is difficult to ascertain whether or not these numbers accurately represent the numbers of people who experience homelessness in between surveys dates, or whether or not they represent the total homeless population on that night. Thus, the actual number of homeless individuals in Sussex County is probably higher than the Point in Time count shows because there were undoubtedly homeless individuals who could be not reached.

Who Are the Homeless?

There were 289 total homeless respondents to this year's survey. Of these, 120 meet the HUD definition and 169 are receiving temporary/emergency rental assistance, hereafter referred to as TRA. 16 individuals (13.3% of HUD) of those currently homeless meet the Federal criteria for "Chronically Homeless" as defined above.

The total number of homeless individuals counted in 2012 decreased by 102 (26.1%), from the previous year but the number of TRA homeless dropped only by 12 (6.4%). Because of the change in the HUD definition, no valid conclusions can be drawn about the overall drop in the number surveyed. However, the small reduction in the TRA population may indicate that the actual homeless rate for Sussex County is dropping very slightly and very slowly.

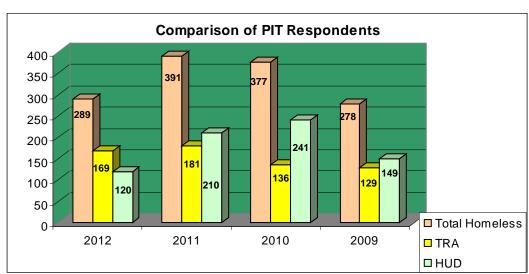


Chart 1

The number of chronically homeless surveyed in 2012 was 16. Because of the changes in definitions from previous years, data comparisons are meaningless, so 2012 data on the chronically homeless will be reported in the narrative only.

Ethnicity and Racial Background

Of those who responded to the question on their ethnicity (289), 17 (6.3%) are Latino or Hispanic. The percentage remains unchanged when sorted by either TRA or HUD. There were no Latino or Hispanic respondents among the chronically homeless. However, none of these percentages accurately captures the actual number of Latino or Hispanic homeless in Sussex County because an unknown number of non-English speaking Latinos and Hispanics did not complete the 2012 survey because of a lack of Spanish-speaking

interviewers. Given this caveat, the percentage of homeless Latino or Hispanic individuals surveyed decreased: by .8% from 2011 to 2012 for all respondents. The total Latino and Hispanic population in Sussex County as of the 2010 census was 6.4%. Unlike the last two years, there is no longer a reported disproportionate number of homeless individuals who are Latino and Hispanic.

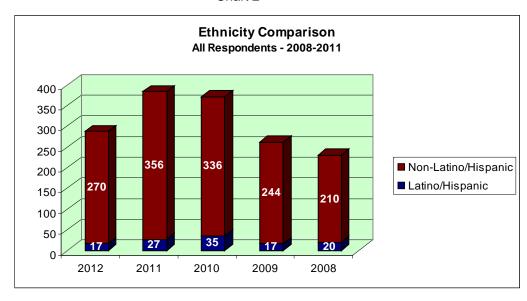
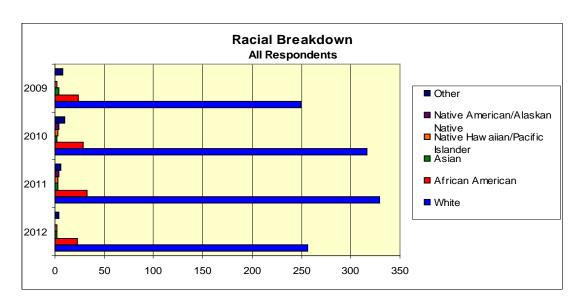


Chart 2

In 2012, 287 individuals answered the question on their racial background (see Chart 3):

- 256 (89.5%) White
- 2 (.7%) Asian
- 23 (8.0%) African American
- 2 (.7%) Native Hawaiian or Other Pacific Islander
- 4 (1.4%) Other

Chart 3



There was no significant difference in the racial background of respondents between 2008 and 2012, although several of the smallest racial groups have shown slight shifts, and the number of White homeless individuals was up by 1.8%. The percentage of White HUD homeless (84.8%) was lower than the TRA homeless (92.3%), and the percentage of White chronically homeless was 87.5% (14 of the 16 chronically homeless respondents).

Gender and Age

287 of the 289 respondents answered the question on gender. As was true ever since 2008, there were more homeless women than men responding to the survey. The percentage of women as part of the homeless population surveyed remained fairly consistent from 2006 to 2011 ranging from 58% to 68.1% (see Chart 4). There was a small decrease in the percentage of homeless women responding to the survey from 2011 to 2012, from 65.3% to 64.1% (70.8% HUD, 58.6% TRA). The percentage is slightly lower for the chronically homeless in 2012, dropping to 62.5% women. There were 3 transgendered respondents in 2012 (1.04% of the total), 2 of whom were TRA and 1 of whom was HUD.

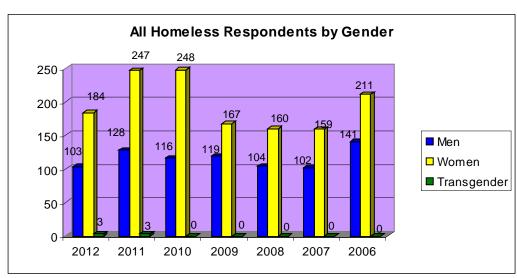


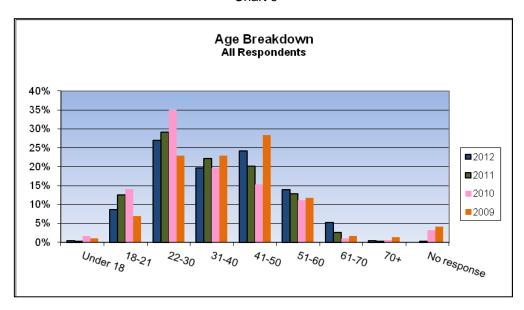
Chart 4

In 2012, there were two significant changes in the ages of homeless respondents:

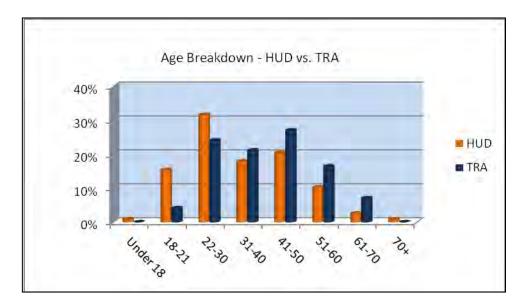
- A decrease in the 18 to age 40 brackets (64% in 2011 to 55% in 2012)
- An increase in age bracket 41-50 (20.0% in 2011 to 24% in 2012)

There was also a slight increase in the 61-70 age bracket, from 3% in 2011 to 5% in 2012.





In comparing age bracket percentages between HUD and TRA, there are a number of major variations.



49% of HUD respondents were in the under 30 age bracket, compared to only 28% of the TRA population surveyed. 39% of the age brackets between 31 and 50 were HUD homeless compared to 48% of the TRA population. The HUD group showed 16% under age 21 compared to 4% for TRA, while only 10% of HUD respondents were aged 51-60 compared to 16% for TRA in the same age bracket. The remaining difference is 7% of respondents over age 61 for TRA compared to 4% for HUD.

Age data was not included in the 2008 or 2007 reports, and in 2006, the groupings were insufficient for detailed data analysis and comparison.

Where are the Homeless?

Town of Last Permanent Address

Newton continues to have the largest percentage of respondents who stated that this was their last permanent address before becoming homeless (27.7%). However, this represents an overall decline back to pre-2009 levels. One individual lived in the Philippines and 5.2% lived in other states ranging from New York and Pennsylvania to Florida, Virginia and Maine. Another 8.3% lived in other counties in NJ. These numbers represent a drop in the percentages of individuals whose last permanent address was out of county. Once again, the percentage of homeless individuals whose last permanent address was in Sussex County rose from previous years (86.2% in 2012, 80.3% in 2011 and 75.9% in 2010).

The only statistically significant differences between HUD homeless and TRA homeless was in Franklin, where 5.2% more TRA homeless than HUD homeless had previously lived, and Vernon, where 4.2% more TRA homeless than HUD homeless had previously lived.

Table 1

		2012		2011	2010	2009
	All	HUD	TRA	-		
No response	2.4%	1.7%	3.0%	2.0%	4.8%	11.3%
Other country	.3%	.8%		.3%	.5%	.34%
Out of State	5.2%	8.3%	3.0%	7.2%	9.0%	4.45%
Out of County	8.3%	15.8%	3.0%	10.2%	14.6%	8.9%
Andover	.7%	.8%	.6%	.8%	2.65%	1.37%
Augusta				.3%		
Branchville	1.0%		1.8%	3.3%	1.6%	3.42%
Byram					.8%	.34%
Frankford	.3%	.8%		.3%		
Franklin	5.5%	2.5%	7.7%	5.6%	3.2%	5.48%
Fredon					.3%	.34%
Hamburg	5.2%	5.0%	5.3%	6.9%	2.9%	6.51%
Hampton	1.0%	.8%	1.2%	.3%		
Hardyston	.3%	.8%		.8%		
Highland Lakes	.3%	.8%		.3%	.3%	1.03%
Hopatcong	8.7%	7.5%	9.5%	6.4%	4.5%	4.79%
Lafayette	3.1%	4.2%	3.3%	1.0%	.8%	3.03%
McAfee				.3%		
Montague	1.4%		3.3%	3.6%	2.4%	1.71%
Newton	27.7%	25.8%	29.0%	48.8%	30.2%	31.51%
Ogdensburg			.6%	.3%	.8%	.34%
Sandyston	.7%	1.7%		.3%		
Sparta	.7%	1.7%	1.2%	1.8%	2.1%	.68%
Stanhope	1.4%		2.4%	1.0%	.5%	1.3%
Stillwater						
Stockholm	1.4%	.8%	1.8%	.3%		.68%
Sussex	16.6%	15.0%	17.8%	12.5%	10.3%	8.9%
Swartswood					.5%	.68%
Vernon	4.2%	1.7%	5.9%	1.5%	2.1%	2.4%
Wantage	1.4%	3.3%			3.4%	2.0%
Sussex County					2.1%	.3%

Night of January 25th – Breakdown by Town

Because TRA homeless are currently housed, the town breakdown will show HUD and TRA separately.

61.6% of HUD respondents indicated that they would spend the night of January 25th in either Newton (48.3%) or Sussex 13.3%). One respondent stated that she would not be spending the night in Sussex County.

78.7% of TRA respondents spent the night in four towns: Newton (40.2%), Hamburg (14.2%), Sussex (13.6%) and Franklin (10.7%).

Table 2

Town in Whic	h Responder	nts Will Spen	d January 25	h, 2012
	HU	JD	TRA	
No Response	3	2.5%	2	1.18%
Out of County	1	.8%		
Andover	2	1.7%	1	.6%
Branchville	5	4.2%	3	1.8%
Frankford	2	1.7%		
Franklin	2	1.7%	18	10.7%
Glenwood	1	.8%		
Hamburg	6	5.0%	24	14.2%
Hampton	2	1.7%	1	.6%
Hardyston			1	.6%
Highland Lakes	1	.8%		
Hopatcong	7	5.8%	10	
Lafayette			1	.6%
Montague			4	2.4%
Newton	58	48.3%	68	40.2%
Ogdensburg			1	.6%
Sparta	2	1.7%	1	.6%
Stanhope	1	.8%	1	.6%
Stillwater	1	.8%	1	.6%
Stockholm			2	1.18%
Sussex	16	13.3%	23	13.6%
Vernon	4	3.3%	6	3.6%
Wantage	5	4.2%	1	.6%
Unknown	2	1.7%		

Night of January 25th – Breakdown by Type of Accommodation

In order to make any reasonable comparisons to past years, HUD and TRA homeless have been grouped together. However, all categories reflect HUD homeless only except, of course, for the TRA's shown under "Other". Percentage-wise, there are very few significant changes from 2009 through 2012.

One of the two most significant changes are the dramatic increase in the percentage of homeless individuals who spent the night of the survey on the street to 4.2% (12 individuals) compared to 1 in 2011 and 4 in 2010. Combined with the 6 who didn't know where they were going to stay, there were 6.3% of the population surveyed who were staying on the street or had no place to stay compared to the previous high of 2.4% for these combined populations which occurred in 2010.

The only other significant change is the drop in the percentage of those in hotels/motels paid by agencies. This, combined with an almost 5% drop in the percentage of respondents on TRA shows that fewer homeless residents are receiving assistance.

Table 3

Where Res	spondents Will S	Spend the Night		
	2012*	2011	2010	2009
On the street	4.2%	.3%	1.1%	.3%
Don't Know	2.1%	1.3%	1.3%	.7%
Emergency shelter	4.5%	5.7%	3.2%	.7%
Transitional housing	3.8%	3.1%	5.3%	6.5%
Hotel/motel paid by agency	2.1%	10.8%	13.3%	10.6%
Temporarily with family/friends	20.1%	22.1%	27.1%	6.5%
Domestic violence shelter	.3%	.5%	1.9%	.3%
Hotel/motel individual paid for	.7%	2.3%	5.0%	1.7%
Psychiatric hospital				.3%
Jail		.3%	.3%	5.1%
Substance abuse treatment facility		.3%	4.5%	5.5%
Farm labor housing			.8%	
Medical Hospital	.3%			
Other: (see below)	45.0%	53.2%	37.4%	55.6%
Apt. paid for by agency				46.4%
Rooming/boarding house	8.3%	4.3%	1.1%	10.1%
Own apartment				1.1%
No explanation				1.1%
Temporary rental assistance	41.5%	46.3%	36.1%	
DMHS		2.3%		

*Note: For comparison purposes, HUD and TRA have been combined. However, all 2012 percentages except for TRA reflect HUD homeless only

Duration of Homelessness

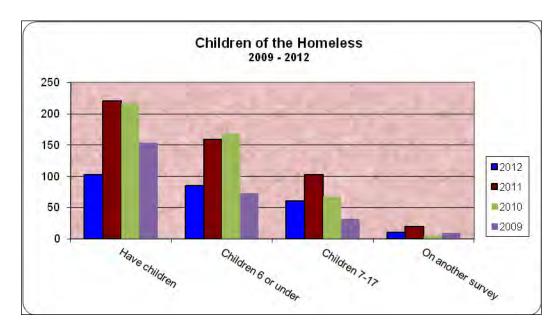
Because of the change in definitions and instructions on completing the survey, there is not enough data available to analyze or draw any conclusions about the duration of homelessness. Only 57.5% of the HUD homeless answered this question, and with such a small response, there is nothing of statistical validity to be drawn from the numbers.

Children and the Homeless

Of 275 respondents who answered the question about children, 103 total respondents have children, 46 HUD homeless and 57 TRA homeless. The percentage of respondents who have children dropped sharply from 57% in 2011 to 35.6% in 2012.

- 2009 111 aged 6 or younger and 76 between ages 7 and 17
- 2010 177 aged 6 or younger and 57 between ages 7 and 17
- 2011 159 aged 6 or younger and 103 between ages 7 and 17
- 2012 85 aged 6 or younger and 61 between ages 7 and 17 (Total HUD and TRA)
 (37 HUD 6 or younger and 40 HUD bewteen 7 and 17)

Chart 10



Not enough respondents answered the question about whether or not their children were with them during times of homelessness to make any valid analysis or presentation of data.

Sources of Income

24.2% of HUD respondents stated they had no source of income in 2012 compared to 4.3% in 2011, 3.7% in 2010 and 3.9% in 2009. However, it must be noted again that due to the change in definition, the number of homeless was 69% lower in 2012 than in 2011, and the actual numbers of individuals rose from 21 to 29. Nonetheless, this still reflects a significant proportionate change in the number of HUD homeless with no source of income.

The highest source of income for HUD homeless with only one source in 2012 was GA (7.5%) followed by wages (6.7%). In 2011, the highest single source of income was wages (38.2%), which is down from 2010 (39.6%). On a percentage basis, wages as a source of income continues to drop. Unemployment Insurance (UI) is no longer a significant source of income for those (HUD) with only one source (.8%), and much lower than 2011 (17.6%).

50 HUD respondents and 150 TRA respondents had multiple sources of income. The most common multiple source of income was Temporary Assistance for Needy Families (TANF), Medicaid and Food Stamps (10 or 8.3% of those with multiple sources of income), a drop of over 21% from the number of respondents receiving all three forms of assistance in 2011

Of those receiving TRA or Emergency Assistance, 45 (26.6%) receive a combination of TANF, Medicaid and Food Stamps, 38 (22.5%) receive GA, Medicaid and Food Stamps and 28 (16.5%) receive Supplemental Security Income (SSI), Medicaid and Food Stamps. Only 11.8% of TRA recipients have only one source of income: 12 (7.1%) receive SSI only, and 4 (2.3%) GA only.

Table 4

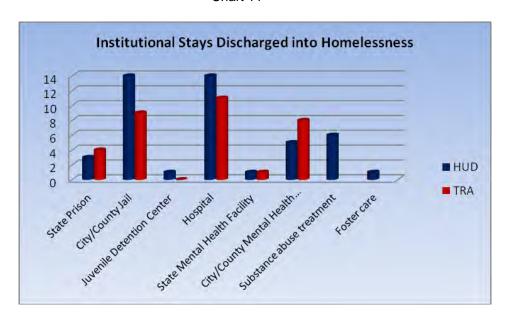
	20	12	2011	2010	2009	2008	2007	2006
Sources of Income	HUD	TRA						
SSI	8	70	86	51	47	55	81	51
SSDI	7	18	22	18	20	22		17
TANF	14	54	121	104	79	56		55
GA/PA/Welfare	18	45	116	129	119	95		
Medicaid	36	137	311	250	175	109	110	130
Medicare	5	18	15	22	11	24	168	10
Social Security	1	6	4	5	6	8		9
Wages	21	3	37	48	12	3	9	42
Unemployment	10	1	9	17	3	23		13
VA Benefits	0	0	0	1		3		4
Child support	7	3	30	28	11	2		18
Day laborer	0	1	2	2	2	12		
Food Stamps	43	137	307	254	197	127	153	122
No source of income	29	0	17	14	11	14		40
Receiving NO benefits	10	0	4	11	6	20		
Other	2	1	11	16	6	18		10

Discharged from an Institution into Homelessness in the Last Three Years

The 2012 survey question regarding institutional stays and subsequent discharge into homelessness was changed and no longer tracks the total number of institutional stays. It does track the number of those stays from which individuals were discharged into homelessness.

45 HUD and 33 TRA homeless individuals were discharged into homelessness.

Chart 11



Factors Contributing to Homelessness

In 2012, 27 total respondents (18 HUD, 9 TRA) identified a single cause. Among the HUD homeless, relationship breakup/death was cited 5 times and loss of job 3 times. Medical problems (3) and mental illness/emotional problems (2) were the most frequently cited among TRA homeless citing a single cause.

The remaining respondents all identified multiple factors contributing to their homelessness.

Major factors cited for the total population were (see Table 5 for break-down between HUD and TRA):

- Evictions 159 respondents (55.0%), an increase of 10% over those reported in 2011
- Medical problems 144 respondents (49.8%), up from 44.3% in 2011
- Mental illness/emotional problems 129 respondents (44.6%), up from (41.4% in 2011
- High cost of housing 128 respondents (44.3%), up from 40.6% in 2011
- Relationship/family break-up or death 124 respondents (42.9%), up 1% from last year's 41.9%
- Loss of job and inability to find another 123 people (42.6%), a slight rise from 41.1% in 2011

20.4% of all respondents (59) stated that alcohol or other drug abuse problems contributed to their current situation, down slightly from 24.4% in 2011.

Table 5

	20	12	2011	2010	2009	2008
	HUD	TRA	All	All	All	All
Total	120	169	391	377	292	293
Alcohol or other drug abuse	30	29	95	98	77	66
Domestic violence	26	21	75	66	44	47
Eviction/foreclosure*	40	119	181	74	98	52
Wages too low	26	17	59	43	41	37
House condemned	1	0	2		1	0
Housing costs too high	54	74	158	132	118	119
Incarceration	9	9	38	29	38	10
Loss of child support	5	14	41	10	19	10
Loss job/can't find work	48	75	160	150	110	99
Lost job/no transportation	14	26	30	24	21	12
Medical problems	23	121	119	85	84	80
Mental illness	35	94	161	108	85	85
Natural disaster	0	3	6	4	0	3
Relationship breakup/death	66	56	163	162	78	105
Utility costs too high	24	53	78	37	37	
Other	7	8	7			13

^{*}Previous years combine evictions and foreclosures – there were 6 total foreclosures in 2012

Services Received and Needed by the Homeless

The average number of services received per HUD respondent was 3.2 and for TRA respondents 5.9 for an overall average of 4.8. This is down from 5.4 in 2011, which was the highest year since 2009. The average number of services received per homeless individual in 2012 was very close to the 4.62 per individual in 2010 and 4.68 per individual in 2009 and 2008. Services needed rose slightly in number to 537 (an average of 1.9 per individual), up from 518 (an average of 1.5 per individual) in 2011. This was also slightly higher than both the 2010 level of 1.23 and the 2009 level of 1.33 per individual. HUD respondents, predictably, needed more services than TRA respondents (an average of 3.3 for HUD compared to .8 for TRA respondents).

Table 6

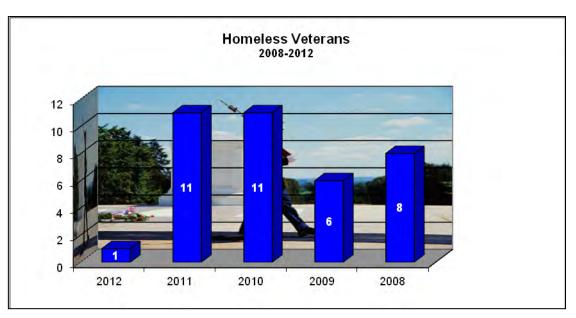
	HU	JD	TF	RA
	Received	Need	Received	Need
Mental health	45	21	83	11
Substance abuse	29	10	22	
HIV	1			
Domestic violence	21	3	17	2
Medical - Disability	14	12	76	7
Veterans	2	1		
Assistance with ID	8	2	5	
Child care	12	13	33	4
Dental	42	13	65	1
Educational training	25	34	29	7
Emergency Food	52	30	112	35
Emergency shelter	30	26	53	1
Employment assistance	26	41	43	9
Housing	29	68	158	32
Immigration	2	5		
Legal services	14	9	45	1
Medical - Routine	38	34	148	16
Transportation	24	23	107	9
Other		3	Charles delicate A	1

^{*}Note: This table shows the number of services, not the number of individuals. Many individuals received and/or needed multiple services.

Veteran Status

There was 1 HUD homeless veteran (.8%) and no TRA homeless veterans responding in 2012, which is a significant drop to an overall rate of .3% for 2012. This is down from the 2.1%-3.0% range shown in the period of 2008-2011. Veteran status was not reported in 2006 or 2007.

Chart 16



Age, Gender and Causative Factors

There were some significant findings in looking at the combined data on age, gender and causative factors. Among the HUD homeless respondents, overall the single outstanding factor was the breakup of a relationship/death. In the under 30 age bracket, this was the single most commonly cited factor contributing to homelessness. For the total HUD population under 30, 61.1% of respondents (65.1% of women and 45.5% of men) cited this as a contributing factor,

Among the 30-40 year old respondents, mental illness/emotional problems was slightly higher than for the under 30 group: 45.0% for the total age group, 53.8% for women and 35.6% for men. Relationship breakup/death was the second most cited factor: 40.0% for the total age group, 38.5 for the women and 45.5% for the men.

High housing costs was the second most common factor in the under 30 age group, with 48.1% of the total, 53.5% of women and 27.3% of men citing it. Loss of job was the third most commonly cited factor, reported by 44.4% of the total population under 30, and by 41.8% of women and 54.5% of men.

No other contributing factors stood out among any of the other HUD age brackets.

Among the TRA population under age 30, mental illness/emotional problems was the most commonly cited factor, followed by eviction, loss of job/can't find work and then relationship breakup/death. 61.7% of the total TRA population cited mental illness/emotional problems, broken down to 68.5% of women, and 41.7% of men. 59.6% of the total indicated that eviction was a factor, reported by 62.9% of women and 50.0% of men.

In all of the remaining age brackets (31-40, 41-50, 51-60), the top two causative factors were medical problems followed by evictions. In the 31-40 and 51-60 groups, the high cost of housing was third, whereas in the 41-50 group, mental illness/emotional problems was third and the cost of housing was fourth.

		31-40			41-50			51-60	
	All	Men	Women	All	Men	Women	All	Men	Women
Medical problems	69.6%	54.5&	77.3%	79.1%	75.0%	79.0%	92.3%	84.6%	100.0%
Evictions	69.6%	54.5&	77.3%	69.8%	75.0%	79.0%	69.2%	69.2%	69.2%
High cost of housing	57.6%	72.7%	64.7%				50.0%	38.5%	61.5%
Mental illness/emotional problems				55.8%	45.0%	39.1%			

Table 7 – Top 3 Causative Factors – TRA Selected Age Groups

Chronically homeless

There were only 16 respondents who met the HUD criteria for chronically homeless in 2012, so any meaningful comparison to previous years is not possible. However, data on these individuals should not be overlooked.

The chronically homeless population is much less stable than the overall HUD homeless population, with 5 (31.2%) of them staying on the street or not knowing where they will spend the night. An additional 7 were either in emergency shelter (3), transitional housing (2) or a hotel/motel paid by an agency (2), with 3 more staying temporarily with friends.

9 (56.3%) spent the night of January 25th in Newton, and 3 more (18.8%) were in Sussex. There were 2 whose last permanent address was out of state (PA and FL), and 3 out of county. 5 respondents previously lived in Newton, 2 in Hopatcong, 2 in Sussex and 1 in Franklin.

There were 6 chronically homeless men and 10 chronically homeless women. Ages ranged from 19 to 52. There were 2 individuals between the ages of 18 and 21 (12.5%), 3 (18.8%) between ages 22 and 30, 5 (31.3%) between ages 31 and 40, 5 (31.3%) between ages 41 and 50 and 1 (6.3%) over 50. 62.6% of the chronically homeless were over 30.

14 (87.5%) chronically homeless respondents are white and 2 (12.5%) are black. None are Hispanic.

There were 5 children between ages 1 and 17 (4 were 6 or under, 1 between 7 and 17) among the chronically homeless, and one had children counted on another adult survey.

8 (50%) of the chronically homeless has been homeless for more than 1 year, and 11 (68.8%) had been homeless at least four times in the last three years. For those who have been homeless less than one year, 5 of the 6 who answered the question indicated that their children had been with them the entire time they were homeless.

3 (18.8%) of the chronically homeless have no source of income. 3 respondents received TANF, Medicaid and Food Stamps, and 1 received General Assistance, Medicaid and Food Stamps. 2 are on SSI and 1 on SSDI. One is on UI and 1 is earning wages. None of those with no source of income have children.

8 chronically homeless respondents have been discharged from an institution into homelessness, with 4 being discharged from more than one institution into homelessness. There were 7 discharges from city or county jails, 3 from hospitals and 3 from private inpatient substance abuse treatment facilities.

All the chronically homeless cited more than one cause as a contributing factor to their homelessness. 8 (50%) said that alcohol or other drug abuse problems were a contributing factor. The next three most commonly reported factors, eviction, houses costs that are too high, medical problems and mental illness/emotional problems, were each cited by 7 (43.8%) respondents. 6 (37.5%) respondents reported loss of job and 5 (31.3%) cited incarceration as a contributing factor to their homelessness.

The average number of services received per individual (4.9) mirrors that of the entire population surveyed (4.8), and is higher than the HUD group as a whole (3.2). Not surprisingly, the greatest unmet need is housing (75%), with dental care and emergency shelter tied at 37.5%, followed closely by employment assistance (31.3%). 10 respondents received mental health services, 9 received emergency food, 8 received substance abuse services, and 8 received emergency shelter.

There were no chronically homeless veterans.

Conclusions

While it is difficult to draw conclusions about the state of homelessness in general from such a limited survey, especially in light of the changing definitions and instructions, there are several areas that must be highlighted.

Few meaningful comparisons to previous years can be made, but one area that does stand out is the increase in the number and percentage of respondents who are either living on the street or who didn't know where they would spend the night of the survey.

There were a couple of interesting trends in the factors contributing to the homelessness of the respondents. Among the HUD homeless, the breakup of a relationship/death was clearly the most commonly cited factor (52.5% of the total HUD population.) The second most frequent factor was the high cost of housing, cited by 41.7% of all HUD respondents.

For the TRA respondents in all age groups, eviction was cited by 57.1% of respondents, followed by medical problems (55.0%).

The total number of homeless respondents dropped back to levels more reflective of 2007 through 2009 after two spikes in 2010 and 2011. The cause for this drop cannot be determined. While it may be tempting to see it as the result of the slight upturn in the overall economy, there is no correlating increase in the number of those who list wages as a source of income and there was a slight drop in the percentages of those receiving TRA, Emergency Assistance, TANF or GA, so it is difficult to determine what factors are responsible, if 2011 and 2010 were simply anomalous years, or whether or not there were changes in the overall outreach to the shifting homeless population.

Another finding of significance is the reduction in the number and percentage of homeless children, which has dropped by 35-38% over the two previous years while the total number of homeless only dropped by about 25% for the same time period.

A further area of note is the sharp increase in the number of homeless with no source of income. By definition, these are all HUD homeless. 24.2% (29 individuals) had no source of income and of these, 3 are chronically homeless.

Overall, perhaps the most important indicator of the direction of homelessness in Sussex County is the disturbing fact that there is an increase in the number of homeless living on the street or not knowing where they will spend the night coupled with the increase in the number of the homeless with no source of income. Clearly, there is a need for employment, low cost housing and other services to move these Sussex County residents toward self-sufficiency.

Appendix A – Survey Instrument

le	County	Agency	Program_	
SAY:	STATEWIDE CONTINUUM OI Hello, I'm (Name). I'm gathering infor- using and health status.			
1. Wher	re will you spend the night of Wednes	sday,	5. How long have you been	homeless?
January	25th? (Check ONE only)		1 day to 1 week	3 months & 1 day to
	On the street, under a bridge, aband			6 months
	building, public building, car, travel bus, or camping out	ling on a	8 days to 1 month	6 months & 1 day to 12 months
	I don't have a permanent dwelling a know where I'll stay	nd I don't	1 month & 1 day to 3 months	More than 1 year
	Emergency shelter			
	Transitional housing (time-limited)		6. If you have been homeles	
	Hotel/motel paid for by agency beca don't have housing	ause you	you have children, have yo the whole time?	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Domestic violence shelter	- 7	Yes	No
	Youth shelter			
	Permanent Housing	-	7. If you have been homeles	ss less than 1 year, has
	Temporarily with friends or family		there been another time wi	thin the past 12 months
	Hotel/motel you paid for while look	ing for	when you were homeless?	1 17 24 40 40
	housing		Yes	No
	Psychiatric hospital			
	Jail		8. Have you been homeless	at least 4 times within the
	Juvenile detention center		past 3 years (since January	25, 2009)?
	Farm labor housing		Yes	No
	Medical hospital			
	Substance abuse treatment facility		9. If yes and if you have chi	
	Other. Where?		with you each time you wer	
	Olice. Where,		Yes	No
own: _	nat town will you be spending the nig		10. Which of the following or anyone in your family reapply) SSI	sources of income do you eceive? (Check ALL that
county:	State:	-	SSDI	VA Benefits
When	so was your last names and add	ofora	TANF	Child support
	re was your last permanent address b ng homeless?	erore	General /Public	Day /Temp work
Course	County:		Assistance/Welfare	10.4100.3
OWII.	County	-6	Medicaid	Food stamps
State:	Country:		Medicare	No source of incom
	many children (under 18) will be wit	h you	Social Security	Receiving NO governmental benefits
Nu	mber of children 6 Number of ars or younger 7 – 17 year		Wages	Other:
No				

2012 FINAL

2012 FINAL

ervice	Received	Need	following institutions? State prison
Mental health services	Receires	rveeu	City/County Jail
ubstance use services			Juvenile Detention Center
IIV/AIDS services			Medical Hospital (emergency room, acute medic
Oomestic violence			care)
fedical (disability)		-	State Institution for inpatient mental health
eterans services			treatment
ssistance obtaining ID			City or County institution for inpatient mental
hild care	_		health treatment
Dental care		-	Private Inpatient Substance Use institution
ducational training	_		Foster Care
mergency food or meal ssistance mergency shelter imployment assistance			19. What happened in your life that contributed to caused your current living situation? (Check ALL that apply)
lousing		-	Alcohol or drug abuse problems
nmigration services			Domestic violence
egal services	_		Eviction or at risk of Eviction
fedical (routine healthcare)			Foreclosure or at risk of Foreclosure
ransportation services			Have work but wages are too low
Other:			House condemned
			Housing costs are too high
			Incarceration
3. Have you ever served in t	he U.S. military?		Loss of child support
Yes	No		Lost job/can't find work
* ***			Lost job due to lack of transportation
			Medical problems/physical or developmental
4. What is your ethnicity?			disability
Hispanic or Latino	Not Hispar	nie or	Mental illness/emotional problems
	Latino		Natural disaster
			Relationship/family breakup or death
			Utility costs are too high
5. What category best descri			Other, Describer
ackground? (check ALL tha			
American Indian/	Native Hay or Other Pa Islander	**************************************	20. Identifier: Last Name (1st 3 Letters): First Initial:
Alaskan Native	White		Middle Initial:
Asian (India, Orient, Middle			SAV: Thank you for your time and assistance!
Asian (India,	Other		SAY: Thank you for your time and assistance!

Appendix B – Statistical Supplement HUD Homeless

Age Free Age Age														HUD	Hom	eless	by (Gend	er, A	ge ar	nd Ca	ausati	ive F	actor													
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Transgendered Homeless

	Age	# of	Alcohol/-	Domestic	Eviction	Fore-	Low	Home Con-	High	Incar-	Loss of	Lost Job	Lost Job	Medical	Mental/-	Natural	Breakup/-	High	Other
		Respon-	Drug	Violence		closure	Wages	demned	Housing	ceration	Child	No Work	No Trans.	Problem	Emotional	Disaster	Death	Utility	
		dents	Abuse						Costs		Support				Problems			Costs	
HUD	34	1	1						1			1			1		1		
TRA	23	1			1				1						1			1	
TRA	38	1		1	1		1					1		1	1				

TRA Homeless

											T	RA H	omel	ess	Respo	nde	nts b	y Ge	nder	, Age	and	Cau	sative	Fact	tor											
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Age	•		Alco	ohol/-			Evict				Low				High		Inca		Loss										Natu		Break	kup/-			Othe	r
			Drug		Viole										Hous												Emoti						Utility	1		
	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М	W	М
46		4	1	1			2	4							1	1					2	2			4	3	2	1					1	1		
47		2			1		2	1			1				2			1			1			1	2	1	1				1		2			
48		4		1			2	3				1				1		1		1	1	1			2	4	1	2			1	2		1		
49			1				1								1						1		1		2		2						1			
50		2						2														1				2		2								
51		3		1	1		1	2				1			1	2		1			1	2	1	1	1	3		2			1	1	1	2		
52		1						1		1					1						1	1	1		1	1							1			
53							2								2						1				3		1				1		2			
54		1		1				1								1						1		1		1		1				1		1		
55		3					2	3							1	1			1		1				2	2	1	2			1		1			
56		1					1								1			1			1		1		2	1	1	1					1			
57		1					1	1								1					1				1		1							<u> </u>		
58		1		1														1							1	1		1			1	1				
59		1						1							1										1	1										
60		1					2								1										2	1	1				1					1
61		3					1	2			1				1	3					1	2	1	1	1	2		1					1	2		
62		1					1	1														1			1	1	1									
63		1						1																	1	1		1			1					
64															1										1											
65	1	1					1								1										1		1			1	1					
66	1										1				1						1		1		1								1			
69		1						1																		1										