



Statement from Colorado Coalition for the Homeless (CCH) and Denver Metro Homeless Initiative (MDHI) on Common Sense Institute’s Flawed Annual Assessment of the Homelessness System in Denver

For the third year in a row, the “Common Sense” Institute has released a [“Snapshot of Denver’s Homeless Ecosystem”](#) outlining their flawed interpretation of Denver’s homelessness response system and City budget as well as a continued failure to account for the complexities of homelessness for those forced to experience it. In 2022, [the Colorado Coalition for the Homeless](#), [Metro Denver Homeless Initiative](#), and [Denver Department of Housing Stability](#) (HOST) all discredited the 2022 report and offered constructive feedback to CSI for how it more accurately report out on the realities of the system and numbers available, but CSI ignored those calls for accuracy.

We won’t repeat at length our former criticisms of the report’s flaws – all of which are present in the 2023 assessment – but will highlight a few of the additional errors that misinform the public on the data around homelessness in Denver including:

First, the snapshot continues to interweave Denver specific data with the homeless data for the *entire region or the entire state*. In some instances, the document utilizes only data from Denver, while in other places it uses data from the seven county Metro-Denver region. Once again, CSI’s calculations for the expenditures double and triple counts funding, include statewide funding, and has several other limitations. This leads to inflating the amount spent on homelessness in Denver or the Denver Metro Region. In several instances in the assessment, CSI cites its own flawed data as the source of spending analyses – analyses that have been refuted by service providers and experts more than once. They also claim that they provided service providers the opportunity to review the data but no one in the service provider community recalls any outreach to their agencies by CSI staff.

Secondly, on Page 7, CSI claims that “one in every 21 of Denver’s unhoused persons died in 2022.” This is a gross oversimplification that relies in part on a count of people experiencing homelessness on a single night in January, the Point in Time (PIT), and the limited death data reported out by Denver’s Office of Medical Examiner (OME). As we have pointed out repeatedly to CSI, PIT data does not represent the full population of people experiencing homelessness and the number is in fact much larger than the PIT reports. For more accurate numbers, CSI could look at MDHI’s report on the [State of Homelessness](#). The OME data is also very limiting and more accurate numbers, though still not complete, could be found in CCH’s [Annual Death Review](#). While every death of an unhoused individual is a tragedy, misrepresenting that number for shock value alone does nothing to address the systemic and dangerous issues that lead to homelessness and death. If fact, looking at more accurate numbers would suggest that while people are experiencing homelessness have shorter life spans than their housed counterparts, less than 1% of the population of unhoused individuals in Denver passed away in 2022. (MDHI reports over 28,000 people experiencing homelessness in the course of a year and CCH reports 263 deaths which is just .009% of population)

Thirdly, on page 13, the report references “participation rates” of housing. Here again, CSI misunderstands this data and part of the system. Participation rate data is required to be reported to HUD each year and is *the percent of projects that actually enter data into the Homeless Management*

Information System (HMIS). In other words, it reflects what percent of our providers are putting data in a database, not the utilization rates by people experiencing homelessness. Here are the correct utilization rates, or how many beds were actually full in that resource type, which was the intent of CSI sharing this data. This data is also *only a snapshot on a single night in January* within the Denver Metro area and is not longitudinal. Here are the rates at which these interventions were occupied on the night of the 2022 Point in Time; as well as for 2023. It is also to be noted that this data chart still cannot capture the nuance of complex systems. For instance, for the line on Permanent Supportive Housing, some of those are vouchers, so the total is likely misleadingly low due to the fact that many unhoused neighbors are in currently searching for housing that will accept the vouchers which are difficult to find in the incredibly tight housing market in the Denver Metro Area.

Housing Type 2022	Occupied	Available	Percent Utilization
Emergency Shelters	3160	4733	66.8%
Transitional Housing	1297	1960	66.2%
Safe Haven	28	63	44.4%
Permanent Supportive Housing	3836	4545	84.4%
Other Permanent Housing	1601	2502	64.0%
Rapid Rehousing	1223	1223	100.0%
Housing Type 2023	Occupied	Available	Percent Utilization
Emergency Shelters	5774	6747	85.6%
Transitional Housing	1471	2034	72.3%
Safe Haven	46	63	73.0%
Permanent Supportive Housing	4226	4573	92.4%
Other Permanent Housing	3479	3849	90.4%
Rapid Rehousing	1873	1873	100.0%

MDHI was unable to replicate many of the percentages claimed by CSI based on the official data set submitted to HUD for the 2022 Point in Time via the Housing Inventory Count (HIC).

The danger in misrepresenting “participation rates” in the way that CSI is done undermines and discredits the interventions and housing solutions that in fact, are highly successful in resolving homelessness. The data is clear, housing is the solution to homelessness and a research entity with any real interest in evidence-based solutions would have no difficulty finding the real data that makes this case. In fact, the most recent data was collected from the highly successful Denver Social Impact Bond Program right in CSI’s backyard.

[Denver SIB](#) supportive housing participants spent significantly more time in housing (560 days), compared with those who received services as usual. After accessing supportive housing, most participants stayed housed over the long term, with 86% of participants remaining in stable housing one year after entering housing, 81% after two years, and 77% after three years. Other studies have shown similar results:

- [One study](#) published in 2020 found that 86% of participants with long histories of frequent emergency room visits and arrests who have diagnoses of substance use and severe mental illness entered and remained in permanent supportive housing. By providing housing with

- voluntary services, the vast majority of high-risk individuals were housed successfully. The study analyzed service use from Santa Clara County, CA between 2015 and 2019.
- Another study from a 2017 24-month [randomized control trial](#) demonstrated that Housing First programs significantly improved the percentage of days stably housed among older homeless adults (50+) by 44% and younger homeless adults (18-49) by 40% compared with usual care.
 - A 2020 [meta-analysis](#) of permanent supportive housing (PSH) programs found that PSH interventions increased long-term (6 year) housing stability for participants with moderate and high support needs when compared with usual care.
 - A 2020 [analysis](#) of 26 studies from the US and Canada demonstrated that, compared with Treatment First, Housing First programs decreased homelessness by 88% and improved housing stability by 41%.
 - A 2020 [study](#) out of North Carolina found that housing retention was highest among housing first PSH participants at 80% (retention after 12 months plus positive exits).

Finally, CSI makes several unfounded and misunderstood claims about the system and impacts of homelessness that seem off-handed, ill-informed, and intentionally accusatory towards people experiencing homelessness. The failure of CSI to evaluate or even discuss proven solutions to these issues further demonstrates the lack of seriousness of their report.

- On Page 8, CSI states that there are “hundreds of unsheltered youths” but provides no context, no real impact analysis, and no discussion of effective interventions or solutions despite all of that information being available.
- On Page 13, CSI claims there is sufficient shelter capacity in Denver but all information available demonstrates that many shelters are at capacity requiring the opening of new shelter facilities both in response to homelessness and to the influx of migrants into the City of Denver.
- On Page 14, CSI states without explanation that costs per homelessness person at Denver Health is higher and includes longer lengths of stay without explaining the complex and complicated healthcare conditions that people experiencing homelessness endure, the failure of the system to provide adequate non-emergency places for recovery from healthcare issues, and the innovative and proven solutions being implemented to address these concerns.

For the third time in as many years, the “Common Sense” Institute has demonstrated that when it comes to accurately reporting out on homelessness and system in place to address it in Denver, it is not “common sense” that is driving the report. CSI continues to paint an inaccurate, mis-informed, and misleading picture of homelessness in the region. CCH and MDHI are proud of the work that is being done in Denver to resolve homelessness and if these proven interventions could be brought to the scale necessary to address the crisis at hand, we would see significant impact for our communities and for those that are forced to remain unhoused in Denver. Detractors like CSI serve no legitimate role in a meaningful and solutions-driven dialogue around homelessness and anyone who relies on their “findings” should take caution and ask themselves why CSI continues to push a false narrative, use misleading data, and make unverifiable claims.