



Pasadena Partnership

Pasadena Partnership to End Homelessness
pasadenapartnership.org



PASADENA HOMELESS COUNT

2019

2019 Homeless Count & Subpopulation Survey
City of Pasadena



About this Report

The City of Pasadena Department of Housing and the Pasadena Partnership to End Homelessness (Pasadena Partnership) consulted with Urban Initiatives to plan and coordinate the 2019 Homeless Count. These entities have worked together since 1992 to formulate and implement the City's Continuum of Care strategy to advance systematic solutions for individuals, families, and youth experiencing homelessness.

PASADENA PARTNERSHIP

As the principle planning entity for the Pasadena Continuum of Care, the Pasadena Partnership to End Homelessness (Pasadena Partnership) coordinates housing, services, and funding for individuals, families, and youth experiencing homelessness. The Pasadena Partnership is made up of more than 50 public and private agencies that provide supportive services and resources to people experiencing homelessness in Pasadena. As one of the 400+ designated Continuums of Care that receive federal funding from the U.S. Department of Housing and Urban Development (HUD), the Pasadena Partnership is dedicated to the promotion and implementation of evidence-based strategies to effectively prevent and end homelessness. The Pasadena Partnership has served as the primary community planning entity concerning housing and service needs for the past 20 years.

CITY OF PASADENA HOUSING DEPARTMENT

The City of Pasadena Department of Housing serves as the collaborative applicant for the Continuum of Care (CoC), the legal entity designated to submit the CoC funding application. In this role, the Department leads the Pasadena Partnership in developing policies to evaluate the various Continuum of Care programs. The City of Pasadena Department of Housing is also responsible for the administration of numerous federal entitlement and competitive grant programs including: Community Development Block Grant (CDBG), HOME Investment Partnerships (HOME), Emergency Solutions Grant (ESG) program, Housing Opportunities for Persons with AIDS (HOPWA), Housing Choice Voucher Program (HCVP), and the Continuum of Care for Homeless Assistance Programs. Lead staff involved in preparing this report include:

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URBAN INITIATIVES

Urban Initiatives is a community-based non-profit research organization that has extensive experience conducting Point-in-Time counts throughout Southern California. In addition to planning and coordinating the unsheltered count, Urban Initiatives staff and volunteers also helped with collecting data. Researchers involved in preparing this report include:

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Copies of this report can be obtained through www.pasadenapartnership.org

Acknowledgements

The Pasadena Continuum of Care (CoC), led by the City of Pasadena Department of Housing, would like to thank the 180 volunteers who contributed to the success of the 2019 Homeless Count. The participation of community volunteers, professional outreach workers, partner agencies, faith-based organizations, and local non-profits is fundamental to collecting meaningful data in an effort to further our understanding of homelessness in the City.

SPECIAL THANKS TO

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Dan Davidson, lead pastor of Rose City Church and founder of Rosebud Coffee, a non-profit organization that trains youth experiencing homelessness as baristas. Pastor Davidson is also the Chair of the Faith Community Committee of the Pasadena Partnership to End Homelessness and has successfully led the youth homeless count for the past three years.

OTHER ACKNOWLEDGEMENTS

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Introduction

The 2019 Pasadena Homeless Count was conducted on a single night, Tuesday, January 22nd, with the “night” beginning at sunset on the 22nd and ending at sunrise on the 23rd. The count takes place annually during the last ten days in January and measures the prevalence of homelessness by collecting information from people who are living in unsheltered locations (i.e. people sleeping outdoors, on the street, in parks, or vehicles, etc.) and temporary shelter (i.e. people living in emergency shelter or transitional housing). People who are living doubled-up with family or friends or who are couch surfing are not included in the count, as HUD considers these individuals to be at-risk of homelessness and not literally homeless.

WHY THE COUNT IS CONDUCTED

As the lead agency for the Pasadena Continuum of Care (CoC), the City of Pasadena is responsible for reporting the findings of the Homeless Count to the Department of Housing and Urban Development (HUD). Data from the Homeless Count is also included in the CoC’s annual funding application and is used by federal, state, and local funding agencies to allocate resources to the City.

COMPREHENSIVE COUNT

The 2019 Pasadena Homeless Count entailed over 180 volunteers canvassing the City after sunset on the evening of the 22nd (from 8:00 to 10:00 p.m.) and before sunrise the following morning (from 6:00 to 8:00 a.m.) to count the total number of people experiencing unsheltered homelessness.

Data for the sheltered count was collected for the same period of time through the Homeless Management Information System (HMIS). HMIS is a database used to confidentially

collect client-level data for people experiencing homelessness served by providers in the CoC.

In conjunction with the broader Homeless Count, the City also conducted a supplemental count of unaccompanied youth experiencing homelessness who are between the ages of 18 and 24 years old. This dedicated count is part of a nationwide effort, established and recommended by HUD, to improve the understanding and scope of youth homelessness. Trained local service providers and youth peer navigators conducted the count between 3:00 to 5:00 p.m. on January 23rd in specific areas where young people experiencing homelessness are known to congregate.

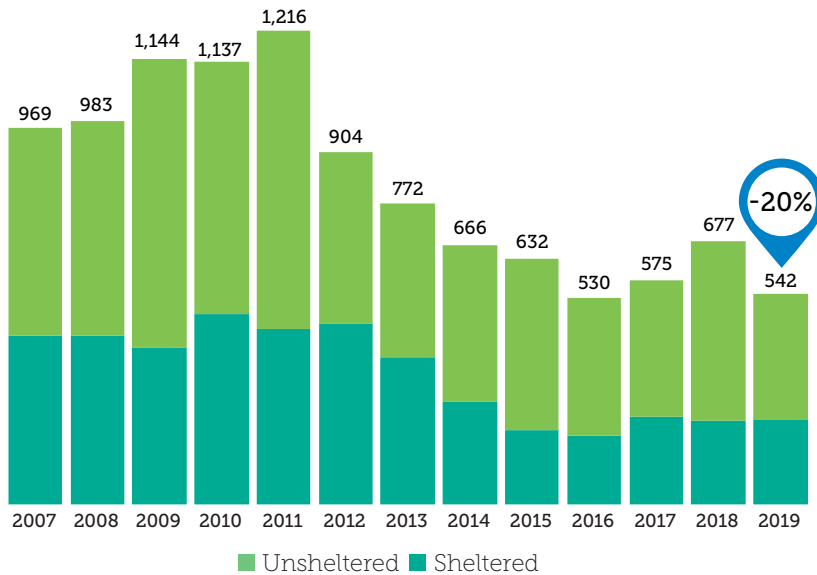
SNAPSHOT IN TIME

The Homeless Count provides a snapshot in time to quantify the size of the population experiencing homelessness at a given point during the year. Though the Homeless Count is particularly useful in tracking trends over time, it is only one of the many different data sources communities should use to assess, understand, and address the needs of those without a safe and stable home. While the methodology employed for the count was the most comprehensive approach available, no methodology allows for a 100% accurate estimate of all people experiencing homelessness. Regardless of how successful outreach efforts are, an undercount of people experiencing homelessness is possible. This is especially the case with hard-to-reach subpopulations such as unsheltered families and unaccompanied youth. The Homeless Count does not calculate the total number of people who experience homelessness over a calendar year, which is typically higher than the number of those who experience homelessness at any given time. Results may not be entirely representative of fluctuations and compositional changes in the population over time.

Executive Summary

The 2019 Homeless Count results reveal a 20% decrease in the number of people experiencing homelessness, demonstrating that continued support for strategic efforts to address homelessness has the capability to yield encouraging results.

Fewer People Experiencing Homelessness



20%

total decrease in the homeless population from 2018 to 2019

135

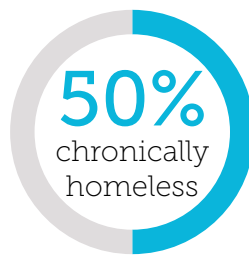
fewer people experiencing homelessness in 2019

2019 Homeless Count

542

People are experiencing homelessness on a given night

More Vulnerable Population



Housed in 2018



were placed in Rapid Rehousing or Supportive Housing

Fewer People Living on the Streets



462 → **321**
2018 → 2019
31% decrease

Aging Population



3 in 10 aged 55+

People Experiencing Homelessness are Our Neighbors

58% last housed in **Pasadena**



FEWER PEOPLE EXPERIENCING HOMELESSNESS

On the night of the 2019 Homeless Count, there were 542 people experiencing homelessness in Pasadena. This snapshot in time represents a 20% decrease from 2018 (n=677) and demonstrates that continued support for strategic efforts to address homelessness has the capability to yield encouraging results. Although the exact number of people experiencing homelessness may fluctuate on a daily basis, it provides additional information about general changes in the population over time.

The most significant decrease was among those experiencing unsheltered homelessness, dropping 31% between 2018 and 2019 (n=462 v. 321). This decline reflects the success of Pasadena and its surrounding communities at coordinating resources on a local level to better serve residents. As more nearby cities implement L.A. County-funded homelessness plans, there is greater capacity to make meaningful progress towards reducing homelessness.

Progress in Key Subpopulations

Pasadena continues to make progress in reducing the number of people experiencing homelessness in key subpopulations, including veterans, families with children, and youth. Most strikingly, there were no unsheltered families with children on the night of the count, compared to eight families in 2018. This encouraging outcome is likely due to increased funding and shelter resources for families. These findings mirror the shifts in populations that are also happening on a national level. Pasadena must continue to lead the way and advance this progress by strengthening and building upon what is working in order to make significant strides towards reducing homelessness.

Increasingly Vulnerable Population

While notable progress has been made to reduce homelessness in key subpopulations, the number of people experiencing chronic homelessness increased and now accounts for approximately 50% of the total homeless population. People experiencing chronic homelessness have a disabling condition and have experienced homelessness for more than one year. These individuals typically have complex, long-term health conditions that are further exacerbated by living on the streets without a stable home. Their higher needs also make them more visible in public spaces. To make meaningful advancements towards reducing chronic homelessness and supporting a highly vulnerable population with the greatest service needs, increased investments in proven solutions, primarily supportive housing, are critical.

Neighbors are Experiencing Homelessness

More than half (58%) of the people experiencing homelessness were Pasadena residents before they became homeless. Only 5% of the total population reported first becoming homeless outside of Los Angeles County or out of state, largely refuting the misconception that people experiencing homelessness travel from other areas or across the nation. Contrary to popular belief, people tend to continue to reside in the communities where they became homeless.¹ Of the respondents who reported eviction being the primary cause of their homelessness, 41% identified as having been evicted in Pasadena. People experiencing homelessness in Pasadena are, more often than not, our neighbors who lacked the necessary support and faced significant barriers to housing stability.

Aging on the Streets

There continues to be a growing number of older adults experiencing homelessness, which is particularly concerning given the increasingly complex needs that accompany the aging process, such as chronic medical

1. Parker, D. & Dykema, S. (2013). The reality of homeless mobility and the implications for improving care. *Journal of Community Health, 38*(4), 685-689.

conditions, functional impairments, and overarching disabilities. Three in ten people experiencing homelessness in Pasadena are aged 55 and older. This demographic shift comes as the Baby Boomer generation grows older and faces significant impediments to aging in place, such as no longer being able to work or afford a home to live in on a fixed income. Such age-related challenges inevitably increase older adults' susceptibility to falling into homelessness, often for the first time in their lives, and hinders their ability to manage living on the streets.

INVESTING IN SOLUTIONS THAT WORK

Housing Ends Homelessness

Stable housing is the foundation upon which people build their lives. Absent a safe, decent, affordable place to live, it is next to impossible to achieve good health, positive educational outcomes, or reach one's economic potential. In 2018, 149 people (122 households) who were formerly homeless in Pasadena were permanently housed through rapid rehousing or supportive housing programs in Pasadena and throughout the County. A recent influx of rapid rehousing funding to the City has enabled individuals and families with lower housing barriers to quickly regain self-sufficiency and exit homelessness to stable housing. It is critical that the City sustains and builds upon models that work by prioritizing the movement of people experiencing homelessness on the streets and in shelter settings to homes they can call their own. In order to do so, investment in more supportive housing and increasing permanent housing capacity is needed.

Evidence that Supportive Housing Works

Research continues to promote supportive housing as the most successful housing intervention at permanently ending homelessness. The U.S. Department of Housing and Urban Development, the United States Interagency Council on Homelessness, and the National Alliance to End Homelessness all endorse supportive housing as a proven, evidence-based best practice and cost-effective solution. Providing access

to permanent housing without preconditions, along with optional supportive services (Housing First), yields overwhelmingly positive results, including long-term housing stability, improved physical and behavioral health outcomes, and reduced use of crisis services such as emergency departments and jails.^{2,3} People experiencing homelessness, including those with the highest service needs, are more likely to recover and stabilize when they are provided with housing rather than remaining on the streets. Existing supportive housing projects in Pasadena, which largely serve people who formerly experienced chronic homelessness, demonstrate a 96% housing retention success rate, even among residents who have significant mental illnesses or substance use disorders. Supportive housing projects focus on ensuring tenant success by providing on-site supportive services so that residents can rebuild their lives in a safe and stable home free from the vulnerabilities of the street.

Housing Crisis Persists

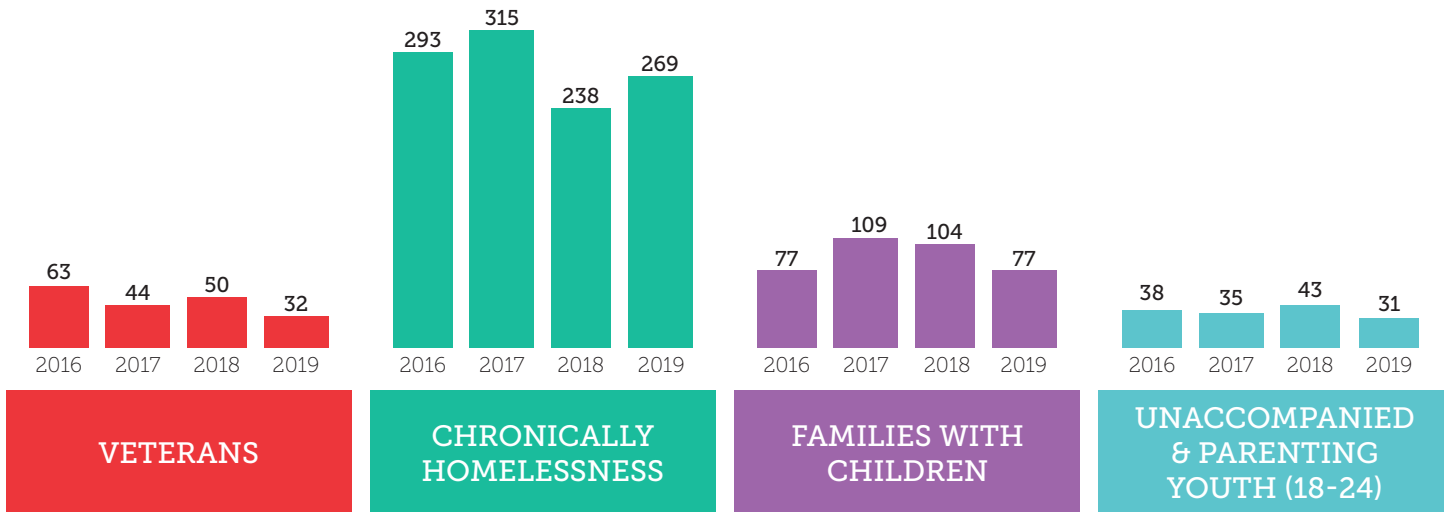
Despite initial successes in decreasing homelessness, the demand for housing far outpaces the current supply. Due to sharp rent increases in recent years, many low and middle-income households who are working can no longer afford these high rents and have fallen into homelessness.⁴ Available rental assistance vouchers have also become increasingly difficult to use in Pasadena's tight rental market, which impedes the ability of people to exit homelessness. Financial incentives continue to be offered to landlords who are interested in being a part of the solution by renting to people experiencing homelessness.

While experts assert that no more than 30% of one's income should be spent on housing, it is estimated that more than half (52%) of all Pasadena renters pay over 30% of their income to maintain their housing. Further, more than one-third of Pasadena renters' household incomes are below \$35,000/year.⁵ If we want to end the homelessness crisis, we must also examine the root causes and break the cycle that is driving the inflow.

2. Tsemberis, S. & Eisenberg, R. F. (2000). Pathways to housing: Supported housing for street-dwelling homeless individuals with psychiatric disabilities. *Psychiatric Services*, 51(4), 487-493.
3. Mackelprang, J. L., Collins, S. E., & Clifasefi, S. L. (2014). *Prehospital Emergency Care*, 18(4), 476-482.
4. Glynn, C. & Casey, A. (2018, December). Priced out: Homelessness rises faster where rent exceeds a third of income. Retrieved from https://www.zillow.com/research/homelessness-rent-affordability-22247/#_edn2
5. Dreier, P. & Maier, M. (2019, January). *Pasadena's tale of two cities*. Urban and Environmental Policy Institute, Occidental College.

Opening Doors

In 2015, the U.S. Interagency Council on Homelessness amended the document “Opening Doors: Federal Strategic Plan to Prevent and End Homelessness” to provide an updated framework to address the needs of people experiencing homelessness. The plan identifies four homeless sub-populations which have been prioritized due to their distinct barriers and needs. Below is a summary of Pasadena’s policy recommendations for each subpopulation.†



Veterans comprise approximately 6% of the total homeless population (n=32). This low number is likely attributable to the substantial commitment at the federal, state, and local level to increase opportunities for veterans to access permanent housing.

Recommendations
While Pasadena has a relatively small number of veterans experiencing homelessness, meaningful change will depend on strengthening partnerships with Veterans Affairs programs and local agencies to provide access to benefits, services and permanent housing regardless of barriers such as military discharge status.

Approximately half of the City’s homeless population is experiencing chronic homelessness (n=269). Single adults are more likely to be chronically homeless compared to families with children (57% v. 9%). This population’s substantial size mirrors national-level trends.

Recommendations
Creating opportunities to increase the supply of supportive housing, as well as prioritizing people with the highest needs for existing supportive housing units, is the most effective means of reducing chronic homelessness. Absent new supportive housing developments, significant reductions are unlikely in Pasadena’s tight rental market.

There were 23 families (77 people) with children experiencing homelessness in Pasadena, representing 14% of the total homeless population and a trending decline since 2017. Of noteworthy success, zero families were experiencing unsheltered homelessness at the time of the count, compared to eight families in 2018.

Recommendations
For many families with children, homelessness is a temporary, one-time experience that is short-lived (less than a year). Therefore, promising strategies to end family homelessness continue to focus on rapid rehousing and employment support to regain stability and promote long-term self-sufficiency.

Unaccompanied youth comprise approximately 6% of the homeless population (n=31). This number does not include youth in doubled-up or couch surfing living situations, as they do not meet HUD’s definition of homeless. This past year, federal and state agencies have placed a concerted effort to better address youth homelessness with dedicated youth-specific funding streams.

Recommendations
Critical interventions should focus on individuals exiting youth systems, including foster care and juvenile justice systems. Improved connections to housing, education, and employment opportunities are critical for youth success.

† Subpopulation counts for past years have been adjusted with the same extrapolation methodology used in the 2019 Homeless Count to account for the growing number of observation-only surveys. Please refer to Appendix A for complete methodology.

Homeless Survey Findings

To gain a comprehensive understanding of the experiences of homeless residents in Pasadena, volunteers asked all participants who were willing to engage a series of survey questions. Responses were used to estimate key characteristics of people experiencing homelessness and will inform service delivery and strategic planning efforts.

A survey was submitted for every unsheltered person counted; however, volunteers completed observation-only surveys when necessary in order to respect the privacy of participants and ensure the safety and comfort of all who participated. Observation-only surveys were also completed when people were sleeping and unable to engage. Respondents were not required to complete all questions and could decline to answer at any point during the survey. Therefore, the total number of responses for each question was not always equal to the total number of surveys conducted.

For more information on survey methodology, please see Appendix A. For complete survey findings, please see Appendix C.

SIZE

On the night of the Homeless Count, a total of 542 people were experiencing homelessness in Pasadena. Altogether, 321 people were counted by volunteers on the street and 221 people were staying in temporary shelter locations. Between 2018 and 2019, there was a 20% decrease in the total homeless population,

and a 31% decrease in the number of people living on the streets or in other unsheltered locations.

Single Individuals

Among people experiencing homelessness in Pasadena, most are single adults without children, although some people experience homelessness in couples. Individuals,⁶ including single adults and unaccompanied youth, represented approximately 86% of the total homeless population on the night of the count. Approximately two thirds were staying in unsheltered locations, reflecting the high degree of shelter need among this population. Compared to people in families with children, individuals experiencing homelessness are 1.7 times more likely to be unsheltered.⁷ Similarly, individuals are significantly more likely to experience chronic homelessness compared to families with children (57% v. 9%). In order to make considerable strides towards continuing to reduce homelessness in the community, a concerted focus on connecting single individuals to permanent housing is essential.

Households with Children

Families with children account for 14% of the population experiencing homelessness. A total of 23 households with children (77 people) were experiencing homelessness on the night of the count, all of whom were staying in sheltered locations, including emergency shelter (56%) and transitional

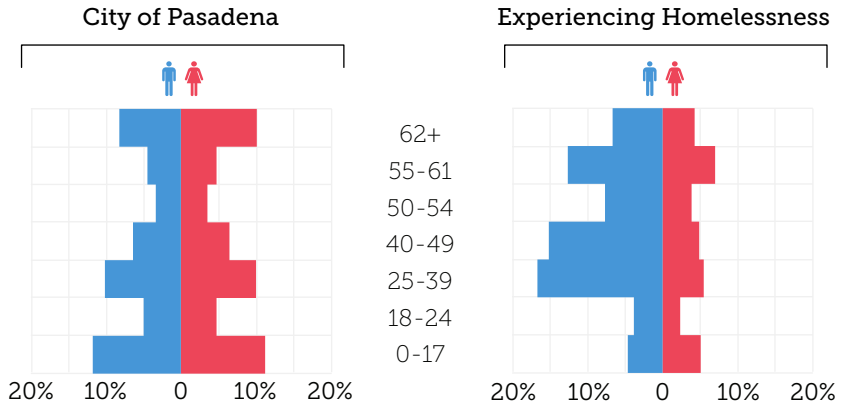
6. Per HUD's definition, "individual" refers to a person who is not part of a family with children during an episode of homelessness. Individuals may be homeless as single adults, unaccompanied youth (ages 18-24), or in multiple-adult or multiple-child households.

7. Comparison of 2019 Homeless Count Results with 2017 5-Year ACS.

Household Composition



Age & Gender



housing (44%). No families were recorded in unsheltered locations. These findings signify that encouraging headway has been made to reduce the incidence of families with children who experience unsheltered homelessness. However, local service providers have noted an increase in the number of requests for homelessness prevention assistance among families, as many continue to struggle to afford Pasadena’s high rents. Most families experiencing homelessness would benefit from short-term rapid rehousing assistance so that they can quickly transition back into a home of their own.

DEMOGRAPHICS

Basic demographic questions were asked of all respondents who were willing to participate in the full survey, including age, ethnicity, race, gender identity, and sexual orientation. This data is necessary to improve our understanding of the homeless population composition, to support how trends change over time, and to allow for examination of similarities and/or disparities among groups.

Age and Gender

There are clear differences in age groups and gender identity when comparing the homeless population and Pasadena’s general population. The most prominent disparity continues to be among older adults, specifically those between the ages of 55 and 61. Approximately 19% of people experiencing homelessness are 55-61 years old, however only 9% of the City’s general

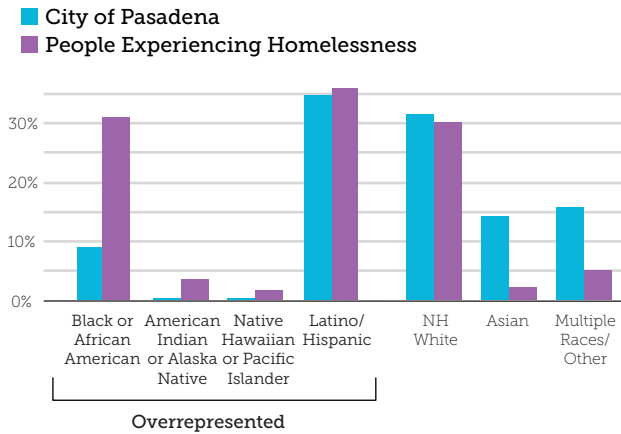
population falls into this age group. Even more alarming, the percentage of older adults aged 62 and above increases in the general population but noticeably declines for people experiencing homelessness, which suggests that people without a permanent home are more likely to have shorter life expectancies and higher premature death rates.

People within the age range of 25 to 39 are the most likely to experience homelessness (23%) among the overall homeless population and are largely overrepresented compared to the City’s general population, followed closely by people who are between the ages of 40 and 49 (21%). Although these groups account for the largest number of people who experience homelessness, they continue to fall through the cracks for resource prioritization and run a greater risk of becoming chronically homeless. The majority (67%) of people who experience homelessness in Pasadena identify as male, while 31% identify as female and 1% as transgender. Across all subpopulations, men continue to be overrepresented compared to women.

Race and Ethnicity

Homelessness impacts all races and ethnic groups but disproportionately affects minorities and communities of color. By far the most striking disparity is among Black or African Americans, who make up less than 10% of the City’s general population but account for 35% of people who experience homelessness. Other minority groups including Latino/

Race & Ethnicity ††



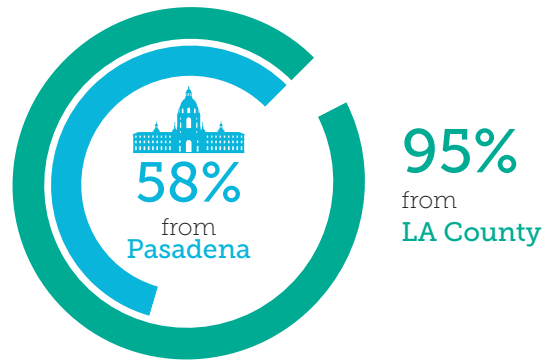
Hispanic (35% of the homeless population compared to 34% of the City’s general population), American Indian or Alaska Natives (4% v. 0%), and Native Hawaiian or Pacific Islander (2% v. 0%) are overrepresented among people who experience homelessness compared to the City’s general population, while people who identify as Non-Hispanic White (30% v. 31%), Asian (2% v. 4%), or multiple races (3% v. 16%) are underrepresented. Most minority groups in the United States experience homelessness at higher rates than their white counterparts, and therefore make up a higher share of the homeless population, and Pasadena is no exception.

In Pasadena, fewer than 3 in 1,000 people who identify as Non-Hispanic (NH) White experience homelessness, while the following groups experience homelessness at significantly higher rates:

- Black or African Americans are over 4 times more likely to experience homelessness compared to NH Whites
- American Indian or Alaska Natives are 11 times more likely
- Native Hawaiian or other Pacific Islanders are 15 times more likely

This disparity is especially prominent among families with children. Sixty-two percent of families experiencing homelessness identified as Hispanic/Latino compared to 41% of families in Pasadena. Any effort to prevent and end homelessness must address the institutional barriers that have resulted in racial

People Experiencing Homelessness are Our Neighbors



inequity, particularly among the criminal justice, employment, education, healthcare, and child welfare systems. In order to assure permanent and stable housing regardless of race or ethnic background, structural and systemic biases must be acknowledged and dismantled.

LIVING ACCOMMODATIONS

Although high rates of unsheltered homelessness persist, this does not support the fallacy that people want to sleep outdoors or prefer the streets to a permanent home. People who no longer have stable housing and are in crisis often find themselves in sheltered or unsheltered living conditions depending on personal circumstances and resource availability. The current supply of shelter beds does not meet the overall demand, and as a result people are forced to sleep outside. People may choose to forgo shelter for a multitude of factors, such as discomfort in large group settings, inability to accommodate pets/animal companions, or because the living arrangements are simply not best-suited to meet a person’s needs, particularly for people with disabling mental health conditions. Shelters can be difficult places to live, especially for people who have languished on the streets for years and have higher barriers to engagement.

Place of Residence



More than half (58%) of the people experiencing homelessness were Pasadena residents before they became homeless. People often

†† Like the US Census Bureau, HUD defines race and ethnicity as separate and distinct identities, with Hispanic or Latino origin asked as a separate question. Thus, these percentages do not add up to 100%.












Place of Stay


Sheltered

-  **34%**
emergency shelter
-  **7%**
transitional housing

Unsheltered

-  **38%**
street or sidewalk
-  **5%**
car or rv
-  **5%**
park
-  **3%**
transit center
-  **2%**
parking lot
-  **2%**
outside a church
-  **1%**
abandoned building
-  **1%**
tent, encampment or natural area
-  **1%**
under bridge, overpass, or fwy embankment

Recurrence of Homelessness

-  **52%**
reported this was their first episode of homelessness

prefer to stay in the community where they became homeless, likely because of the familiarity of surroundings, sense of belonging and personal connections, knowledge of local resources, and feeling like the area is still their home. This refutes the misbelief that people migrate to Pasadena for warmer weather or increased availability of services.

Individuals who previously resided outside of L.A. County when they became homeless account for a small fraction of the total homeless population in Pasadena (5%). Many individuals who are categorized as from "out of town" may have lost their housing in neighboring communities but grew up in or had ties to Pasadena through family or work when they lived in their home. While people from surrounding regions may spend time in the City, service providers are actively working to ensure people are reconnected with their home community.

Current Living Situation

At the time of the count, more than half (59%) of the population was experiencing unsheltered homelessness and living in areas deemed unfit for human habitation, including the streets/sidewalks, parks, cars, transit centers, abandoned buildings, and freeway embankments. Forty-one percent of people experiencing homelessness were living in sheltered locations, such as emergency shelters including hotels or motels and transitional housing.

People who are unsheltered remain the most visible face of homelessness and are more susceptible to adverse life events the longer they remain on the street. People experiencing unsheltered homelessness are more likely to endure exposure to poor weather conditions (i.e. intense cold or heat), degraded environments, exacerbated illness and related health conditions, violence, and loss of belongings. In Pasadena, there has been an increase in emergency shelter resources from both L.A. County and the State of California, which will be used to temporarily shelter individuals and families with children experiencing homelessness in motels when shelter beds are unavailable or when a traditional shelter setting does not meet individual needs. However, motel vouchers are designed to be a short-term intervention while focusing on long-term housing solutions.

DURATION & RECURRENCE OF HOMELESSNESS

More than half (52%) of the total population reported that this was their first time experiencing homelessness, and the remaining 48% reported previously experiencing homelessness one or more times. This higher percentage of first-time homeless, which includes people who have been homeless for a year or longer, signifies that the forces driving people into homelessness persist, including rising housing costs that exceed household incomes and a long-standing lack of affordable housing. Although unsheltered homelessness is down 20% in Pasadena, we are seeing the results of people who are displaced on our streets and people with higher needs are more visible than they once were.

Chronic Homelessness

The number of people experiencing chronic homelessness accounts for approximately 50% of Pasadena's homeless population. Chronically homeless individuals are people who have spent long periods of time living on the street or other places not meant for human habitation (1+ years) and have one or more disabling conditions. Seventy percent of chronically homeless individuals in Pasadena are male, and the majority (62%) were staying in unsheltered locations such as the street or sidewalk. 2019 Homeless Count data show that the incidence of chronic homelessness increases with age, peaking at 25% for groups between the ages of 55 and 61, and dropping by almost half for groups aged 62 and up (15%), which is likely attributable to increased mortality rates for older homeless adults. In fact, research indicates that people without homes have a life expectancy almost 30 years shorter than that of the typical housed population.^{8,9}

Reasons Our Neighbors Become Homeless

People who experience homelessness are not distinct and separate from the general population but have often experienced high levels of trauma or shortcomings and failures of existing systems. The pathways into homelessness are usually the result of overlapping factors that impede the ability of our neighbors to remain in stable housing.

The reasons why people end up without a secure or stable home are complex and unique to each individual; however, there are some commonalities among people who experience homelessness. Participants were asked to identify up to three primary causes of their current state of homelessness, and 30% reported a lost job as the leading cause of their housing loss. Other reported causes of homelessness included substance use (17%), a medical problem or disability (16%), a family/friend asked them to leave (15%), and eviction (14%). Often times minor setbacks can result in individuals or families finding themselves in a destabilized condition facing homelessness. A large number of our neighbors have fallen on hard times, which in turn has rendered them homeless.

History of Foster Care

Child welfare involvement is a well-documented risk factor for homelessness,¹⁰ and youth who age out of foster care continue experience homelessness at significantly higher rates than youth who have not had contact with the foster care system. These findings emphasize the need for tailored prevention and diversion strategies that include multi-sector collaboration among mainstream systems specifically targeting youth exiting foster care. Fourteen percent of the total homeless population in Pasadena reported ever having been in foster care. However, among the homeless youth population, 30% reported having been in foster care at some point.

Top Reason for Becoming Homeless



30%

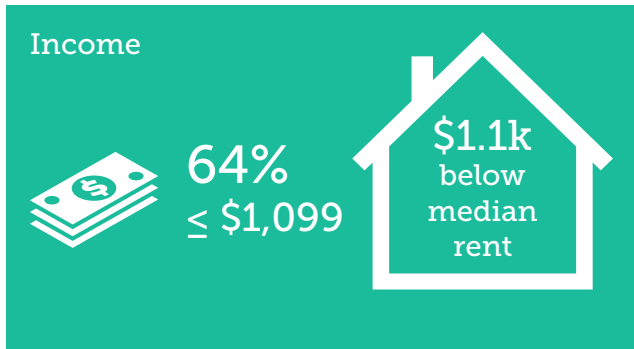
lost their job

Job loss was the most commonly reported reason for becoming homeless

8. O'Connell, J. J. (2005). *Premature mortality in homeless populations: A review of the literature*. Nashville: National Health Care for the Homeless Council, Inc.

9. Baggett et. al., (2013). Mortality among homeless adults in Boston: Shifts in causes of death over a 15-year period. *JAMA Internal Medicine*, 173(3), 189-195.

10. Dworsky, A. (2014). *Families at the nexus of housing and child welfare*. Chicago, IL: Chapin Hall at the University of Chicago.



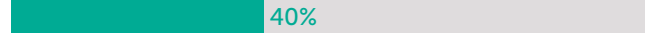
Income

Today, many households fall into homelessness because they are unable to sustain enough income to afford rising housing costs. Among people experiencing homelessness in Pasadena, 21% have incomes less than \$100/month, and 64% have incomes that amount to \$1,099 or less. Meanwhile, the median rent for a one-bedroom apartment in Pasadena is estimated to be approximately \$2,188 per month,¹¹ which puts the cost of housing far out of reach for a large majority of residents. Furthermore, many individuals who experience homelessness are unable to work due to a disability or chronic health condition and therefore do not have a steady or sufficient income to sustain housing.

HEALTH

The connections between housing and health are undeniable. Without the safety and stability of a home, it is exceptionally challenging to take care of basic health needs, let alone manage chronic or debilitating health conditions. Illness and injuries can make holding a job increasingly difficult, which can severely strain financial stability and eventually result in homelessness. Due to the competing demands in the daily lives of people experiencing homelessness, such as securing food, ensuring adequate hygiene and sanitation, and finding a place to sleep every night, medical care is often difficult to obtain or simply unattainable.

Mental Illness



Chronic Health Condition



Physical Disability



Substance Use



Developmental Disability



Health Conditions/Disabilities

People experiencing homelessness suffer from the same illnesses as people with homes but at rates three to four times that of the general population.¹² Similarly, people with disabilities are disproportionately represented among all people experiencing homelessness. During the 2019 Homeless Count, the following health conditions were reported as inhibiting the ability of respondents to hold a job and/or live in stable housing:

- 40% identified having a serious mental health condition
- 33% reported having a chronic health condition, such as diabetes, high blood pressure, seizures, respiratory problems, or arthritis
- 31% reported having a physical disability
- 28% reported having a substance use disorder
- 12% reported having a developmental disability

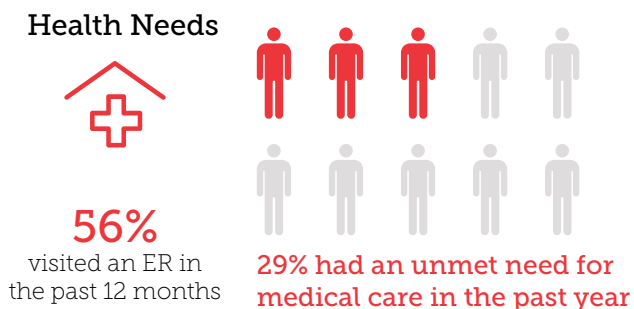
Likewise, 16% of the unsheltered population reported that their primary cause of homelessness was from a medical condition or disability. When housing is provided as a foundation, people with acute and severe health conditions can regain stability and work towards long-term recovery without the added suffering of living on the streets.

HIV

Only 4% of the total population reported ever testing positive for HIV. However, this is likely

11. Zillow. (2019, March). *Pasadena Home Prices & Values: Pasadena Rentals*. Retrieved from <https://www.zillow.com/pasadena-ca/home-values/>

12. O'Connell, J. J. (2005). *Premature mortality in homeless populations: A review of the literature*. Nashville: National Health Care for the Homeless Council, Inc.



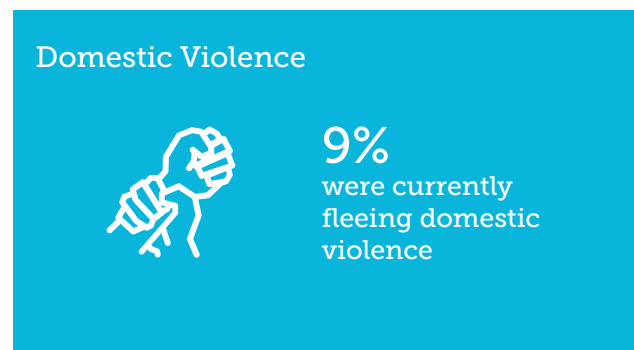
an undercount due to the stigma associated with a positive status. People experiencing homelessness often have difficulty receiving adequate health care, which is especially critical to people living with HIV who need to take their medication consistently to achieve successful outcomes.

ER Visits

In an effort to enhance the understanding of emergency healthcare utilization among people who experience homelessness, this year respondents were asked if they had visited an Emergency Room (ER) in the past 12 months and how many times. Fifty-six percent of the population reported visiting an ER in the past 12 months, of which 59% reported 1-2 visits and 41% reported 3 or more visits. Among people experiencing chronic homelessness, 59% reported visiting an ER in the past 12 months. Many people who experience homelessness may not have a regularly accessible primary care physician, which oftentimes results in increased emergency room visits and costly medical expenditures. Providing access to stable, permanent housing consistently results in improved health and reduced healthcare costs.¹³

Unmet Medical Needs

In order to assess the prevalence of unmet medical needs, participants were asked if there was a time during the last 12 months when they wanted medical care or surgery



but could not get it. Overall, 29% of the unsheltered population reported an unmet need for medical or surgical care in the preceding year. This was slightly higher (33%) for people experiencing chronic homelessness. These findings may represent conservative estimates of unmet healthcare needs given the high rates of emergency room utilization among the majority of the population in the past year.

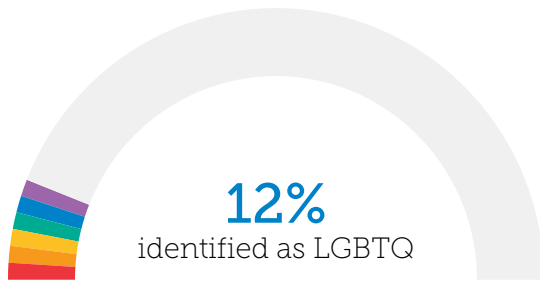
DOMESTIC VIOLENCE

In recent years, there has been an increased understanding of the connection between domestic violence and homelessness. Survivors of domestic violence may become homeless for a number of reasons, including lack of a safe place to stay after fleeing an abusive relationship or lack of sufficient financial resources to maintain housing. Beyond addressing immediate safety and housing needs, survivors of domestic violence require comprehensive, trauma-informed supportive services that promote healing from past abuse and improve economic security to move towards self-sustainability.

Currently Fleeing Domestic Violence

Among people experiencing homelessness in Pasadena, 9% reported currently fleeing domestic violence, including 6% of all men and 17% of all women who reported having experienced domestic violence. People experiencing chronic homelessness were slightly more

13. Taylor, L. (2018, June). *Housing and health: An overview of the literature*. Health Affairs Health Policy Brief.



likely to report fleeing domestic violence (15%). Many survivors face unique challenges to accessing shelter and permanent housing due to their confidentiality and safety needs.

LGBTQ POPULATION

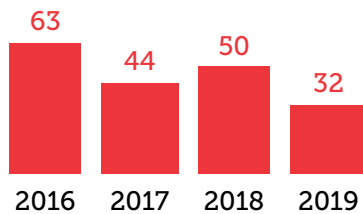
Twelve percent of people experiencing homelessness in Pasadena identified as Lesbian, Gay, Bisexual, Transgender, or Queer/Questioning (LGBTQ). Of those respondents, 38% identified as gay, 33% bisexual, 4% lesbian, 4% queer, 4% questioning, 21% transgender and 8% gender non-conforming. While there is limited data on the number of LGBTQ individuals experiencing homelessness, available data at a national level indicate that young adults between the ages of 18 and 25 who identified as LGBTQ experienced homelessness within the last 12 months at over twice the rate of their heterosexual peers.¹⁴ National survey data also indicate that LGBTQ youth make up approximately 20% of all youth experiencing homelessness, and in Pasadena 19% of all youth experiencing homelessness identified as LGBTQ. People experiencing homelessness who identify as LGBTQ face a unique set of challenges in regaining stability, including social stigma and housing and employ-

ment discrimination, among a multitude of additional barriers that may extend their homelessness.

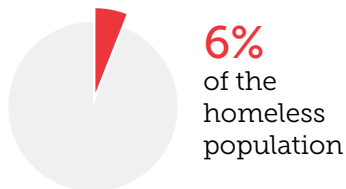
14. Morton, M. H., Samuels, G. M., Dworsky, A., & Patel, S. (2018). *Missed opportunities: LGBTQ youth homelessness in America*. Chicago, IL: Chapin Hall at the University of Chicago.

Veterans

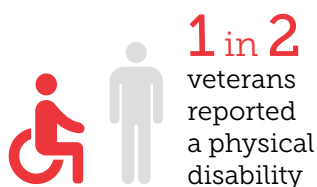
Veterans Experiencing Homelessness[†] 2016-19



Prevalence



More likely to report a physical disability



Aging Population



Approximately 6% of all people experiencing homelessness in Pasadena on the night of the 2019 Homeless Count were veterans (n=32). This low proportion is primarily attributable to an increased investment of resources to end veteran homelessness at federal, state, and local levels. In order to ensure that veterans can lead healthy, productive lives following their service, opportunities have been expanded to access permanent housing.

While veterans comprise a small proportion of the total homeless population, they experience mental health disorders, substance use disorders, post-traumatic stress disorder, and traumatic brain injuries at disproportionate rates compared to their civilian counterparts.¹⁵ These challenges are especially amplified because of the distress associated with multiple and/or extended deployments. In Pasadena, veterans experiencing homelessness were significantly more likely to report a physical disability compared to the total homeless population (48% v. 31%). Approximately 31% of veterans also reported having a serious mental health condition.

Pasadena's veteran population is considerably older than the general homeless population, with 56% aged 55+ compared to 30% of the total homeless population. As veterans continue to age, increasingly complex needs emerge, such as debilitating chronic disorders that subsequently decrease life expectancy. Despite this understanding, 44% of veterans experiencing homelessness have not received health care or benefits from a Veterans Administration (VA) medical center. Similarly, one in five veterans (20%) reported that they wanted medical care or surgery in the past year but could not get it.

Compared to the general homeless population, veterans are more likely to be living in unsheltered locations, particularly on the streets (65% v. 36%), experience multiple episodes of homelessness (68% v. 48%) and experience chronic homelessness (59% v. 50%). These critical differences contribute to veterans' increased risk of languishing on the streets, which is why they remain a key priority subpopulation for the City of Pasadena and for the U.S. Department of Housing and Urban Development and the United States Interagency Council on Homelessness.

[†] Subpopulation counts for past years have been adjusted with the same extrapolation methodology used in the 2019 Homeless Count to account for the growing number of observation-only surveys. Please refer to Appendix A for complete methodology.

15. Olenick, M., Flowers, M., & Diaz, V. (2015). US veterans and their unique issues: Enhancing health care professional awareness. *Advances in Medical Education and Practice*, 6, 635-639.

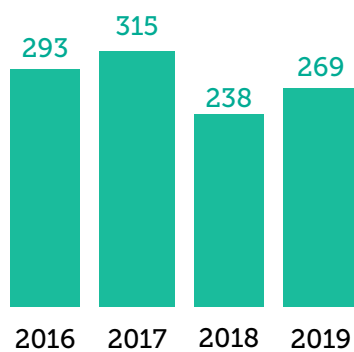
PROGRESS

Homelessness among veterans has been of major public concern for decades. Pasadena has seen a considerable decrease in the number of veterans experiencing homelessness since 2013, and these numbers continue to remain relatively low. This accomplishment is tied to increased funding and resources, particularly from the federal government, which has resulted in an increase in the number of available HUD Veteran Affairs Supportive Housing (VASH) rental assistance vouchers and the opening of designated brick-and-mortar supportive housing projects for veterans. There has been an increase in veteran supportive housing projects across the county, particularly in nearby cities within the San Gabriel Valley. Three Pasadena veterans were housed in one of these new buildings in the last quarter of 2018 alone.

While the number of veterans experiencing homelessness has declined in recent years, those who remain are at a higher risk for poor health and psychosocial disabilities compared to the general population because of their exposure to combat-related trauma and geographic dislocation during deployment.¹⁶ Particularly robust programs and supports are available for veterans experiencing homeless-

ness to ensure their unique needs are met. Continued focus and strategic collaboration among veteran agencies and homeless service providers is required to continue on the trajectory towards ending veteran homelessness.

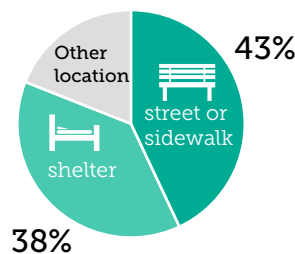
16. Tsai, J., & Rosenheck, R. A. (2015). Risk factors for homelessness among US veterans. *Epidemiologic Reviews*, 37, 177–195.

Chronic Homelessness†
2016-19**Prevalence**

1 in 2
people
experiencing
homelessness
are chronically
homeless

Mortality Rates

4-9x higher
than the general
population

**Place of Stay**

Chronically Homeless

The U.S. Department of Housing and Urban Development defines people experiencing chronic homelessness as those who have a disabling condition that prevents them from maintaining a job or stable housing and have experienced homelessness for a year or longer. People who have experienced at least four episodes of homelessness in the last three years are also considered chronically homeless, as long as those episodes cumulatively add up to at least one year.

People experiencing chronic homelessness remain one of the most vulnerable homeless subpopulations and exhibit a mortality rate four to nine times higher than the general population.¹⁷ In 2019 an estimated 269 people were experiencing chronic homelessness in Pasadena, which accounts for half (50%) of the total homeless population. The number of people experiencing chronic homelessness has increased among both the sheltered and unsheltered populations. People experiencing chronic homelessness were more likely to report sleeping on the streets compared to the overall homeless population (43% v. 36%) and were slightly more likely to report sleeping in emergency shelter (38% v. 35%). People who identify as male continue to be overrepresented among the general homeless population and are also slightly overrepresented among people experiencing chronic homelessness (73% v. 67%). As is the trend among the homeless population, people experiencing chronic homelessness are aging on the streets, with three in ten over the age of 55.

Research indicates that people experiencing chronic homelessness are more likely to engage with public crisis systems, such as the Emergency Room (ER) or criminal justice institutions, than the general homeless population.¹⁸ Fifty-nine percent of people experiencing chronic homelessness reported visiting an ER within the last 12 months, with 58% reporting one to two visits and 42% reporting three or more visits. Despite these higher ER utilization rates, one in three people (33%) reported needing medical care within the past 12 months but not being able to obtain it. Living on the streets increases susceptibility to illness and risk of chronic health conditions because people are not able to seek respite in a home or recuperate in a safe and stable environment.

† Subpopulation counts for past years have been adjusted with the same extrapolation methodology used in the 2019 Homeless Count to account for the growing number of observation-only surveys. Please refer to Appendix A for complete methodology.

17. Centers for Disease Control and Prevention. (2017, December). *National Homeless Persons Memorial Day*. Retrieved from <https://www.cdc.gov/features/homelessness/index.html>

18. United States Interagency Council on Homelessness (2018). *Homelessness in America: Focus on chronic homelessness among people with disabilities*. Retrieved from https://www.usich.gov/resources/uploads/asset_library/Homelessness-in-America-Focus-on-chronic.pdf

Among people experiencing chronic homelessness, 15% reported that they were currently fleeing domestic violence. These people typically become homeless because they no longer have a safe place to stay or are not able to remain financially stable after deciding to flee an abusive relationship.

The longer people experience homelessness, the more their health and well-being declines and the likelihood of experiencing criminal victimization and trauma increases. Similarly, social and economic isolation amplifies, interactions with law enforcement become more common, and incarceration becomes a lingering possibility. These various barriers are why the chronic homeless population continue to remain a key priority group.

Progress

While 50% of Pasadena's homeless population experiences chronic patterns of homelessness, 38% of this population are staying in emergency shelter. Although emergency shelter plays an effective role in the housing crisis response system because it enables people to sleep inside and take refuge from the streets, long-term solutions are needed to permanently end homelessness. Emergency shelter should support the flow from housing crisis to housing stability by promoting linkages to necessary supportive services and connections to appropriate permanent housing so that people can move through the system more quickly.

Growing evidence supports the investment in supportive housing projects that follow a Housing First approach, which do not have

prerequisites or barriers to housing entry, such as sobriety, substance use or mental health treatment, or service participation requirements. Once in housing, tenants are provided with ongoing intensive case management services to actively achieve their goals, maximize housing stability, and prevent returns to homelessness. Of the studies conducted on the effectiveness of Housing First, data show that participants are able to access housing faster and are more likely to remain stably housed.¹⁹ This finding holds true for both supportive housing and rapid rehousing programs. All Pasadena-funded permanent housing programs are required to implement a Housing First approach in order to follow federally-recognized best practices.

Likewise, addressing the health-related needs of people who are experiencing homelessness has long been recognized as a key component of efforts to prevent and end homelessness. It has become increasingly clear that stable housing is fundamental to both maintaining good health and minimizing the costs of preventable interactions with public systems, such as emergency room utilization and hospital admissions. As Pasadena continues to focus on housing and stabilizing the health of people experiencing homelessness, expanded efforts are being made to collaborate with local healthcare providers to promote long-term, comprehensive solutions in both the homeless and healthcare sectors.

19. National Alliance to End Homelessness (2016, April). Fact sheet: Housing First [Fact sheet]. Retrieved from <http://endhomelessness.org/wp-content/uploads/2016/04/housing-first-fact-sheet.pdf>

People in Families with Children† 2016-19



Prevalence



14%
of the
homeless
population

Households

23
families

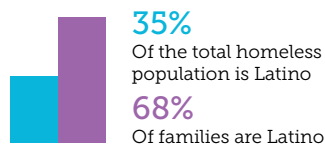


Current Living Situation



0
unsheltered
homeless
families

Latinos experience highest rates of family homelessness



Families with Children

Families with children represent a smaller proportion (14%) of the population experiencing homelessness in Pasadena. The 2019 Homeless Count identified 23 families with children experiencing homelessness (77 people), all of whom were living in sheltered locations such as emergency shelter and transitional housing. Nationally, however, people in families experiencing homelessness represent 33% of the overall homeless population.²⁰ This represents encouraging progress and demonstrates that improvements are achievable through the provision of appropriate and sufficient assistance to families.

In most ways, families experiencing homelessness are similar to other families living in poverty but who have a home. Both struggle with incomes that are far lower than the cost of housing, so minor setbacks can result in a family becoming homeless. However, some families living in poverty fall into homelessness due to unforeseen financial challenges or a lack of social support networks. For many families with children, homelessness is a temporary, one-time experience, and families are significantly less likely to be chronically homeless compared to single adults. Approximately 68% of families reported experiencing homelessness for the first time during the Homeless Count, and 92% of families had experienced homelessness for 11 months or less.

While the 2019 Homeless Count reflects progress in reducing the overall number of families with children experiencing homelessness, school districts report an increase in the number of students identified as homeless at some point in the school year.²¹ Part of this difference is accounted for in the U.S. Department of Education's more inclusive definition of homelessness, which includes those living in doubled-up arrangements with family or friends or couch surfing. These groups do not meet HUD's definition of literal homelessness used in the Pasadena Homeless Count and therefore are not included in the count results. Rather, these families are considered at-risk of homelessness and would benefit from comprehensive prevention assistance to ensure they do not enter into the homeless system.

† Subpopulation counts for past years have been adjusted with the same extrapolation methodology used in the 2019 Homeless Count to account for the growing number of observation-only surveys. Please refer to Appendix A for complete methodology.

20. U.S. Department of Housing and Urban Development (2018, December). *Annual Homeless Assessment Report to Congress*. Retrieved from <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>

21. United States Interagency Council on Homelessness (2018). *Homelessness in America: Focus on Families with Children*. Retrieved from https://www.usich.gov/resources/uploads/asset_library/Homelessness_in_America_Families_with_Children.pdf

Homelessness does not affect all people and families equally. Hispanic/Latino families with children are glaringly overrepresented in Pasadena. According to 2019 data, 66% of people in families with children experiencing homelessness identified as Hispanic/Latino, compared to only 35% of the total homeless population.²² Meanwhile, no Non-Hispanic White families with children were experiencing homelessness compared to 30% of the total homeless population. These troubling disparities must be closely examined and addressed at a systemic level in order to yield long-term solutions and equitable outcomes.

In Pasadena, the majority of assistance for families with children experiencing homelessness is through rapid rehousing programs. Rapid rehousing provides families with time-limited financial assistance to help them quickly secure housing and case management services to address barriers to long-term housing stability, including connections to employment and other services such as child care, income support and financial planning, or counseling tailored to the unique needs of the household. While a small subset of families may require more intensive or long-term support through supportive housing, rapid rehousing has proven to be an effective solution for many families experiencing homelessness. Most families who have received assistance from rapid rehousing programs have not returned to homelessness. In a systematic review of the literature on rapid rehousing outcomes, it was estimated that less than 10% of families return

to homelessness within twelve months after exiting the program.²³

Progress

Significant strides have been made in Pasadena to ensure that families experiencing homelessness have access to shelter and the appropriate resources to become self-sustaining. Zero families with children were experiencing unsheltered homelessness at the time of the count, which is a testament to the recent increase in resources to strengthen the local crisis response system including connections to rapid rehousing and emergency shelter.

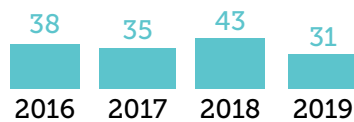
Despite this success, there has been an increase in requests for family homelessness prevention assistance across the County, including Pasadena. In response to this feedback, the County has recommended increasing its Measure H homelessness prevention allocation for families in Fiscal Year 2020, a proportion of which will serve Pasadena Families if approved. Dramatic improvements in addressing family homelessness are achievable through the continued provision of evidence-based best practices such as rapid rehousing and connections to employment programs that enhance overall earning potential.

22. This proportion represents the number of people in families who are Hispanic or Latino, while 62% of families (i.e. households) identify as Hispanic or Latino.

23. Gubits, D., Bishop, K., Dunton, L., Wood, M., Spellman, B. E., & Khadduri, J. (2018). *Understanding rapid re-housing: Systematic review of rapid re-housing outcomes literature*. U.S. Department of Housing and Urban Development: Office of Policy Development and Research.

Unaccompanied & Parenting Youth (18-24)

Unaccompanied & Parenting Youth† 2016-19

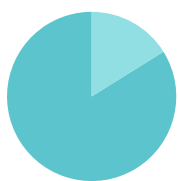


Prevalence

6%
of the
homeless
population



Household Composition



16%
parenting
youth

84%
single
individuals

Income



100%
have incomes
≤ \$750

LGBTQ



Unaccompanied homeless youth are people between the ages of 18 and 24 who are experiencing homelessness and are not accompanied by a parent or guardian. Homeless parenting youth are also between the ages of 18 and 24 but are the parents or legal guardians of one or more children (under age 18) who are sleeping with them. The U.S. Department of Housing and Urban Development does not use the U.S. Department of Education's definition of youth homelessness, which includes youth who are sharing housing with other people, commonly referred to as doubled up, or those staying with family or friends for short lengths of time, also referred to as couch surfing. Therefore, this population of at-risk youth were not counted as experiencing literal homelessness.

In Pasadena, 26 unaccompanied youth and 5 parenting youth were homeless during the 2019 Homeless Count (31 people total). While these youth make up 6% of the total homeless population in Pasadena, many have experienced significant trauma before and after becoming homeless and are particularly susceptible to negative life events and disruptive development. Thus, the City of Pasadena and HUD have placed particular emphasis on ending homelessness for this population.

Among youth experiencing homelessness, 100% reported average monthly incomes of \$750 or less. When accounting for housing costs and other expenses to meet basic needs, it is next to impossible for these young people to maintain a safe and stable place to live under such constrained financial conditions. Approximately 30% of youth experiencing homelessness also reported having been in foster care compared to 14% of the general homeless population. These findings underscore the importance of programs tailored to youth exiting the foster care system in order to intervene before continuing on a preventable path into homelessness as an adult.

An estimated 19% of youth experiencing homelessness in Pasadena identify as Lesbian, Gay, Bisexual, Transgender, Queer/Questioning (LGBTQ), compared to 12% of the total homeless population. At a national level, LGBTQ youth make up about 20% of all youth experi-

† Subpopulation counts for past years have been adjusted with the same extrapolation methodology used in the 2019 Homeless Count to account for the growing number of observation-only surveys. Please refer to Appendix A for complete methodology.

encing homelessness, and a higher proportion of the youth experiencing homelessness in large, urban communities.²⁴ In order to adequately address the unique needs and barriers to housing for LGBTQ youth experiencing homelessness, agencies should prioritize the cultivation of safe environments that provide protection against unjust or prejudicial treatment, ensure that interventions address trauma, stigma and discrimination, and provide services that are inclusive of sexual orientation and gender identity.

Pathways or risk factors that contribute to homelessness for youth include unstable family life, severe family conflict, abuse, neglect, and caregiver or youth substance use and/or mental illness.²⁵ Similarly, youth who age out of foster care face significant risks of experiencing homelessness, as well as youth who have a history of involvement with the juvenile justice system. These risks are particularly amplified among minority youth populations. An increased understanding of the trajectories related to youth homelessness, as well as risk and protective factors among youth, is necessary to create tailored prevention and diversion programs to keep youth from falling into homelessness. Even short episodes of homelessness among youth can be traumatic and have lifetime consequences, such as undermined brain development and long-term functioning.

Critical interventions for youth include homelessness prevention for those exiting the juvenile justice or foster care systems, early intervention with immediate access to emergency shelter beds, and a clear pathway

to long-term housing supports that end their homelessness. Connections to rapid rehousing, education, and employment are also central for youth success. In addition to multi-sector collaboration among mainstream systems that interface with youth, family reunification strategies to support housing stability are an effective intervention to prevent and reduce homelessness.

Progress

There continues to be a concerted effort to better understand the scope, scale, and characteristics of youth homelessness. A substantial influx of federal, state, and county resources to organizations that serve youth experiencing homelessness has occurred in recent years as a result of dedicated funding streams. This funding supports programs and services that are specific to addressing the distinct needs of youth experiencing homelessness.

In Pasadena, youth agencies have received increased funding for rapid rehousing programs that quickly move youth into permanent housing with developmentally appropriate case management that promotes education and employment support. Local youth providers have also been allocated a greater number of motel vouchers to quickly remove youth from the streets and place them into sheltered locations. Increased collaboration and coordination between agencies that serve youth experiencing homelessness has positively contributed to efforts that work to minimize the number of young people who fall through the cracks of the system.

24. United States Interagency Council on Homelessness. (2018). Homelessness in America: Focus on Youth. Retrieved from https://www.usich.gov/resources/uploads/asset_library/Homelessness_in_America_Youth.pdf

25. Gubits, D., Bishop, K., Dunton, L., Wood, M., Spellman, B. E., & Khadduri, J. (2018). *Understanding rapid re-housing: Systematic review of rapid re-housing outcomes literature*. U.S. Department of Housing and Urban Development: Office of Policy Development and Research.

Homeless Strategic Platform

To most effectively combat homelessness in Pasadena, the City's Department of Housing, as the lead agency for the Pasadena Partnership to End Homelessness, strongly encourages service providers and communities to align their programs to support evidence-based best practices that the federal government has acknowledged as effective in ending homelessness. Basic services for people experiencing homelessness are already available throughout Pasadena, including meal programs, food pantries, and clothing distribution. The City supports the following general priorities for addressing homelessness outlined below.

01

FOCUS ON STRATEGIES THAT PREVENT AND END HOMELESSNES

Permanent Housing Using the Housing First Model

Evidence continues to demonstrate that the most effective solution to ending homelessness is permanent housing. Providing access to permanent housing without preconditions, along with optional supportive services as needed (also called Housing First), can ensure that people experiencing homelessness obtain housing, even those with substance use disorders and mental health conditions. Under the Housing First service delivery model, emergency shelters and basic services are a pathway to permanent housing, providing temporary shelter and the necessary connections for housing placement.

Targeted Homelessness Prevention

Homelessness Prevention programs help support people who are at-risk of homelessness by providing temporary financial assistance and short-term case management to resolve housing crises and instability. By targeting assistance to those who are most at-risk of homelessness, programs are able to maximize the limited available resources for homelessness prevention.

Rapid Rehousing

Rapid Rehousing is a strategy informed by Housing First that quickly re-houses people experiencing homelessness through time-limited financial assistance and targeted supportive services. The goal is to minimize the harmful outcomes of homelessness by helping people regain self-sufficiency and return to stable housing as soon as possible.

Supportive Housing

Supportive Housing is an intervention best suited for people who have a disabling condition and higher service needs. These individuals need long-term support to live stably in their communities and prevent returns to homelessness. Informed by the Housing First framework, supportive housing is a proven solution for populations with higher service needs who have experienced chronic homelessness. Pasadena supportive housing projects demonstrate a 96% housing retention rate among participants, even among those with mental illness and substance use disorders.

02 WORK REGIONALLY TO SOLVE HOMELESSNESS

Homelessness knows no boundaries, so effectively combating it will require a regional response. The City continues to work with Los Angeles County and neighboring cities, Continuums of Care, and Public Housing Authorities to support the capacity building and development of resources across the region, as well as encouraging all communities to do their part to help end homelessness for their residents.

Increase Supportive Housing Opportunities in and Around Pasadena

The City of Pasadena will use its resources to expand and promote the development and production of brick-and-mortar supportive housing projects. This will include collaborating with other jurisdictions and Public Housing Authorities to use rental subsidies creatively, collaboratively, and across jurisdictional boundaries when allowable. Financial incentives continue to be offered to landlords who are willing to rent units to voucher holders experiencing homelessness in the private rental market, also known as scattered-site housing. The scattered-site housing model works to maximize available housing stock and overcome challenges such as high costs and the length of time required for new supportive housing projects to get off the ground and begin operating.

Pursue Measure H Funding for Appropriate Homeless Programs and Projects

The City of Pasadena will continue to work closely with Los Angeles County to pursue Measure H sales tax funding for programs that prevent and end homelessness. The City will advocate for a greater share of the funding and will encourage service providers to apply directly to the County for Measure H funding that is made available through any open application processes.

Methodology

The 2019 Homeless Count was a City-wide effort to count and survey all people experiencing homelessness in Pasadena. The count measured the prevalence of homelessness in the City by collecting information on people experiencing unsheltered homelessness (i.e. those sleeping outdoors, on the street, in parks, or vehicles, etc.) and temporarily sheltered homeless individuals and families (i.e. living in emergency shelter or transitional housing). An in-depth qualitative survey was used to gain a more comprehensive understanding of the experiences and demographics of those counted. A more detailed description of the methodology is summarized below.

Components

This year's count took place on a single night, January 22nd, from sunset to sunrise and has three primary components:

- **The unsheltered count**, a survey of people sleeping outdoors, on the street, in parks, or vehicles, etc. that took place between the hours of 8 to 10 p.m. and 6 to 8 a.m.. In addition, volunteers surveyed people in facilities that serve people experiencing homelessness or where homeless people congregate throughout the day, including the Pasadena libraries, on January 23rd.
- **The sheltered count**, which uses client-level data entered into the Homeless Management Information System (HMIS) database to collect information on people staying in emergency shelters and transitional housing programs; and
- **A supplemental youth count**, which surveys unaccompanied and parenting youth under age 25. The youth count took place during the afternoon of January 23rd and was led by trained youth enumerators who currently or recently experienced homelessness. The youth count was conducted in specific areas where young people experiencing homelessness are known to congregate.

The unsheltered, sheltered, and youth homeless counts were coordinated to occur within the same time period in order to minimize potential duplicate counting of people experiencing homelessness.

The Planning Process

To ensure the success of the count, many City and community agencies collaborated in community outreach, volunteer recruitment, logistical planning, methodological decision-making, and interagency coordination efforts. Urban Initiatives, a community-based research organization located in Pasadena, provided technical assistance with these aspects of the planning process. Urban Initiatives has extensive experience conducting Point-in-Time counts throughout Southern California.

Mobile Survey Format

This year, the CoC employed a mobile-enabled survey instrument that volunteers could access through their smartphone or tablet. In past years, volunteers recorded all participant responses to the survey with traditional pencil and paper, and data was input manually

before analysis could take place. The new user-friendly mobile survey recorded participant responses electronically and considerably improved the efficiency of counting efforts. The mobile survey allowed for real-time data collection and enhanced data quality because technical assistance could be immediately provided if necessary, and duplicate responses were more easily identifiable. This mobile survey format also automated the data collection process for volunteers through the use of skip-logic based on previous answers to reduce the chance of errors and further enabled staff to conduct comprehensive data analysis. Volunteer feedback was overwhelmingly supportive in response to the mobile survey platform shift, and the methodology will be carried forward in the coming years due to the overall success.

Community Involvement and Interagency Coordination

All aspects of the 2019 Homeless Count were developed in coordination with local homeless and housing service providers and advocates. The Homeless Count planning team was led by staff from the City of Pasadena Department of Housing and consultants from Urban Initiatives. The mobile survey was developed in coordination with an expert panel of service providers and past volunteers as well as the Pasadena Partnership to End Homelessness' Healthcare Committee and Planning & Research Committee. Throughout the planning process, the planning team requested the collaboration and participation of several government agencies that regularly interact with people experiencing homelessness and possess considerable expertise relevant to the count, including the Pasadena Police Department HOPE team, the Department of Public Health, and the PORT team.

UNSHeltered Count Methodology

For the purposes of the 2019 Homeless Count, the HUD definition of unsheltered homelessness was used:

- An individual or family with a primary nighttime residence that is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train stations, or camping ground.

Methodological Improvements

The 2019 unsheltered count methodology followed an established, HUD-approved methodology identical to the methodology used over the past 12 years. New this year, however, was the use of a mobile-enabled survey instrument. The survey instrument was developed in coordination with homeless service providers, the Pasadena Partnership, and past homeless count volunteers and collected demographic information on each person who was encountered (see Appendix C for the full survey). All information remained confidential.

Volunteer Recruitment and Training

Approximately 180 community volunteers and City staff registered to participate in the 2019 Homeless Count. The Pasadena Partnership to End Homelessness' Faith Community Committee and Urban Initiatives led the volunteer recruitment effort. Community volunteers served as enumerators on the night of the count, canvassing Pasadena in teams of three or four to survey individuals experiencing unsheltered homelessness. In order to participate in the count, all volunteers were required to attend two hours of training during the week prior to the count. In addition to the presentation given by Urban Initiatives and City staff, volunteers received printed instructions detailing how to survey unsheltered people experiencing homelessness.

Survey Logistics

To ensure full coverage, the City's geographic boundaries were divided into 17 zones covered by volunteers, with professional street outreach teams covering areas outside the zones, such as freeway embankments, and

parks. Volunteers were sent in teams of three to four on a single night, spanning the evening of the 22nd (from 8:00 to 10:00 p.m.) and before sunrise the following morning (from 6:00 to 8:00 a.m.). Professional teams were sent out from 6:00 to 8:00 a.m. In addition, volunteers surveyed people in facilities that serve people experiencing homelessness or where homeless people congregate throughout the day, including the Pasadena libraries, on January 23rd.

Each team received a map and a list of “hotspots,” which divided the area to be canvassed and clearly showed the boundaries of the counting area (a.k.a. zones). Volunteers were asked to canvas their entire zone, completing a survey for every person they encountered who was experiencing homelessness. While volunteers were encouraged to complete a full survey for every person they encountered, 59% of surveys conducted were based on observation alone. These “observation-only” surveys are given as an option to volunteers in order to respect the privacy of people being surveyed and to ensure the safety and comfort of volunteers who participated, as well as people who were sleeping.

Extrapolation Methodology

The steady increase in the proportion of “observation-only” surveys (38% in 2016 to 59% in 2019) has resulted in the need to use a basic extrapolation methodology to estimate population demographics. This methodology, which is approved by HUD, simply removes observation-only surveys (along with “don’t know / refused to answer” and those who dropped out of the survey) from the denominator to determine the proportion of the population with a specific characteristic and then applies that proportion to the total population experiencing homelessness to develop an extrapolated estimate.

De-duplication

While every effort is made to ensure people are only surveyed once, duplication can still occur. To help reduce duplication, individuals who complete a full survey are given a unique

identifier that prevents them from being included in the final count more than once. This identifier is created based on certain characteristics, including initials, gender, race, age, and ethnicity. For example, a person experiencing homelessness may have the following unique identifier of “WTMW62H.” This code reads that the person’s first name began with “W,” the last name began with “T,” he was male “M,” he was White “W,” he is 62 years old “62,” and Hispanic “H.” Location data and time stamps recorded through the mobile survey aided in de-duplication of observation-only surveys. Demographic data including age, race, ethnicity, place of stay, and presence of pets were combined with location data and time stamps within five minutes of each other to de-duplicate observation-only surveys. In total, 12 people were identified as duplicates and removed from the data set. In addition to these duplicates, the following surveys were not included in the final count:

- 12 people who were surveyed stayed in an emergency shelter. These people were removed from the unsheltered count because they were captured in the sheltered count.
- 12 people surveyed stayed with friends or family and therefore did not meet HUD’s definition of homelessness and were removed from the sheltered count.
- 1 individual spent the night in jail and therefore did not meet HUD’s definition of homelessness and was removed from the sheltered count.
- 3 people surveyed did not spend the night in Pasadena and therefore were not included in the count.

SHELTERED COUNT METHODOLOGY

For the purposes of the 2019 Homeless Count, the HUD definition of people experiencing sheltered homelessness was used:

- An individual or family living in a supervised publicly- or privately-operated shelter designated to provide temporary living arrangement (including congregate shelters, transi-

tional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals).

Survey information was collected from people who were temporarily sheltered on the night of January 22nd through the Homeless Management Information System (HMIS). HMIS is a database overseen by the City that is used by the majority of Pasadena's homeless service providers to confidentially store client-level data.

YOUTH COUNT METHODOLOGY

Pasadena also conducted a supplemental count of unaccompanied and parenting youth between the ages of 18 and 24. While conducting counts for people experiencing homelessness has always presented a unique set of challenges, communities have found it particularly difficult to identify youth experiencing homelessness. Often this is because youth experiencing homelessness congregate in different locations and at different times than older adults. Youth often do not want to be found due to past trauma or negative experiences with the system, and may not necessarily think of themselves as experiencing homelessness. This dedicated count is part of a nationwide effort, established and recommended by HUD, to improve the understanding and scope of youth homelessness.

Leadership Team

The 2019 Youth Count was led by Urban Initiatives, City staff, and Dan Davidson, lead pastor of Rose City Church and founder of Rosebud Coffee, a nonprofit organization that trains youth experiencing homelessness as baristas. Pastor Davidson is also the Chair of the Faith Community Committee of the Pasadena Partnership to End Homelessness and has successfully led the youth homeless count for the past three years.

Planning Process & Youth Engagement

Service providers that serve youth experiencing homelessness were engaged to provide input in the planning and coordination of the youth count. In preparation for the youth count, Rosebud Coffee, Learning Works, Youth Moving On, Hathaway-Sycamores Child and Family Services, Rose City High School, and No Future Cafe along with youth who currently or recently experienced homelessness were consulted to identify locations in Pasadena which were frequented by young people.

Youth Count Survey Logistics

People involved in planning efforts determined that youth experiencing homelessness would be more visible on the street during daylight hours, rather than in the evening when the general count was conducted. Therefore, the supplemental youth count surveyed unaccompanied and parenting youth between the ages of 18 and 24 on January 23rd from 3 to 5 p.m. Data from the supplemental youth count and unsheltered count were compared and de-duplicated using the same methodology as the unsheltered count.

Definitions

CONTINUUMS OF CARE (COC) are local planning bodies responsible for coordinating the full range of homeless services in a geographic area, which may cover a city, county, metropolitan area, or an entire state.

COORDINATED ENTRY SYSTEM is the primary point of entry for single adults, families with children and youth seeking housing and services. CES is a no-wrong-door, county-wide system in which people experiencing homelessness with the highest needs are prioritized to be matched with the available and appropriate resources. The system helps to ensure equitable, centralized, and timely access to housing resources while preserving choice and dignity.

CHRONICALLY HOMELESS INDIVIDUAL
A chronically homeless individual is has a disability and lives either in a place not meant for human habitation, a safe haven, an emergency shelter, or in an institutional care facility if the individual has been living in that facility for fewer than 90 days and was living in a place not meant for human habitation, a safe haven, or in an emergency shelter immediately before entering the institutional care facility. In order to meet HUD's "chronically homeless" definition, the individual also must have been living as described above continuously for at least 12 months or on at least four separate occasions in the last 3 years, where the total length of time is at least 12 months. Each occasion must be separated by at least 7 nights of living in a situation other than a place not meant for human habitation, an emergency shelter, or a safe haven.

CHRONICALLY HOMELESS FAMILY A chronically homeless family is a family with an adult head of household who meets the

definition of a chronically homeless individual. If there is no adult in the family, the family would still be considered chronically homeless if a minor head of household meets all the criteria of a chronically homeless individual. A chronically homeless family includes those whose composition has fluctuated while the head of household has been homeless.

EMERGENCY SHELTER is a facility with the primary purpose of providing temporary shelter for people experiencing homelessness.

HOMELESS In this survey, HUD's definition of homelessness for Point-in-Time counts was used. The definition includes:

- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals), or
- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground

It does not include individuals or people living in families who were living doubled-up, in hotels/motels, or an institutional setting.

HOMELESS MANAGEMENT INFORMATION SYSTEMS (HMIS) HMIS is a computerized data collection application designed to capture client-level information over time on the characteristics of service needs of individuals and families with children experiencing

homelessness, while also protecting client confidentiality. Using this information, HMIS generates an unduplicated count of clients served within a community's system of homeless services. Pasadena is part of the Los Angeles County HMIS Collaborative.

HOUSING FIRST is a philosophy that offers permanent, affordable housing as quickly as possible to individuals and families experiencing homelessness without preconditions. Participants are then provided with supportive services and connections to community-based supports with the goals of helping them to remain in housing and avoid returning to homelessness. Income, sobriety, participation in treatment and/or other services are not required to obtain housing.

HOPE TEAM In collaboration with the Pasadena Police Dept. & the LA County Dept. of Mental Health, one specially trained police officer and one county mental health worker provide effective & compassionate emergency response to people experiencing homelessness in crisis.

INDIVIDUALS are people who are not part of a household with minor children during their episode of homelessness. They are homeless as single adults, unaccompanied youth, or in multiple-adult households.

PARENTING YOUTH are youth between the ages of 18-24 who are the parents or legal guardians of one or more children (under age 18) who are present with or sleeping in the same place as that youth parent, where there is no person over age 24 in the household.

PEOPLE IN FAMILIES WITH CHILDREN are people who are experiencing homelessness as a part of households that have at least one adult and one child.

POINT IN TIME (PIT) COUNT is an unduplicated one-night estimate of both sheltered and unsheltered populations experiencing homelessness. The one-night counts are conducted by CoCs nationwide and occur during the last ten days in January each year.

PORT TEAM In a partnership between the Pasadena Public Health Department and Fire Department, the Pasadena Outreach Response Team (PORT) implements a field-based approach to engage, assess, and serve people living on the streets who have a mental illness, substance use disorder, or chronic health condition.

RAPID REHOUSING is a permanent housing resource which provides temporary rental assistance and supportive services to people experiencing homelessness, moving them quickly out of homelessness and into permanent housing.

SHELTERED HOMELESSNESS refers to people who are staying in emergency shelters, transitional housing programs, or motel or hotel vouchers.

SUPPORTIVE HOUSING is a housing resource designed to provide rental assistance and supportive services on a long-term basis to people who formerly experienced chronic homelessness.

TRANSITIONAL HOUSING provides people experiencing homelessness with a place to stay combined with supportive services for up to 24 months in order to help them overcome barriers to moving into and retaining permanent housing.

UNACCOMPANIED YOUTH are people between the ages of 18 and 24 who are not accompanied by a parent or guardian and are not a parent presenting with or sleeping in the same place as his/her child(ren).

UNSHeltered HOMELESSNESS refers to the condition of people whose primary nighttime location is a public or private place not designated for, or ordinarily used as, a regular sleeping accommodation for people (i.e. the streets, abandoned buildings, vehicles, or parks).

VETERAN refers to any person who served on active duty in the armed forces of the United States. This includes Reserves and National Guard members who were called up to active duty.

Appendix C

Homeless Survey & Subpopulation Data

TOTAL HOMELESS POPULATION

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	SURVEY RESPONSES				EXTRAPOLATED ESTIMATE				PROPORTION			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTALS												
People experiencing homelessness	38	183	321	542					7%	34%	59%	100%
Single individuals	4	140	321	465					11%	77%	100%	86%
People in families with children	34	43	0	77					89%	23%	0%	14%
AGE												
Under 18	23	28	0	51	23	28	0	51	61%	15%	0%	10%
18 to 24	6	8	18	32	6	8	18	32	16%	4%	6%	6%
25 to 39	5	33	83	121	5	33	85	123	13%	18%	27%	23%
40 to 49	2	26	82	110	2	26	84	112	5%	14%	26%	21%
50 to 54	1	24	36	61	1	24	37	62	3%	13%	12%	11%
55 to 61	1	38	63	102	1	38	65	104	3%	21%	20%	19%
62+	0	26	31	57	0	26	32	58	0%	14%	10%	11%
Don't know/refused to answer	0	0	8	8								
Subtotal	38	183	321	542	38	183	321	542	100%	100%	100%	100%
GENDER												
Male	12	113	227	352	12	113	240	365	32%	62%	75%	67%
Female	26	65	74	165	26	65	78	169	68%	36%	24%	31%
Transgender	0	5	0	5	0	5	0	5	0%	3%	0%	1%
Gender non-conforming	0	0	2	2	0	0	2	2	0%	0%	1%	0%
Don't know/refused to answer	0	0	18	18								
Subtotal	38	183	321	542	38	183	321	542	100%	100%	100%	100%
ETHNICITY												
Hispanic/Latino	23	71	77	171	23	71	96	190	61%	39%	30%	35%
Non-Hispanic/Non-Latino	15	112	180	307	15	112	225	352	39%	61%	70%	65%
Don't know/refused to answer	0	0	64	64								
Subtotal	38	183	321	542	38	183	321	542	100%	100%	100%	100%
RACE												
NH White	0	53	85	138	0	54	111	165	0%	29%	35%	30%
White	9	115	133	257	9	117	174	300	24%	64%	54%	56%
Black	13	55	95	163	13	56	124	193	35%	31%	39%	35%
Asian	2	4	4	10	2	4	5	11	5%	2%	2%	2%
American Indian or Alaska Native	4	1	12	17	4	1	16	21	11%	1%	5%	4%
Native Hawaiian or Pacific Islander	4	1	2	7	4	1	3	8	11%	1%	1%	2%
Multiple Races or other	5	4	16	25	5	4	21	30	14%	2%	7%	5%
Don't know/refused to answer	0	0	8	8								

*Doesn't add up to 100% because some people indicated multiple races

VETERANS

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	SURVEY RESPONSES				EXTRAPOLATED ESTIMATE				PROPORTION			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTALS												
Veterans	0	5	10	15	0	6	26	32	0%	3%	8%	6%
Not a veteran	16	147	115	278	38	177	295	510	100%	97%	92%	94%
Observation only	0	0	189	189								
Prefer not to say / don't know	22	31	3	56								
Dropped out of survey	0	0	4	4								
Subtotal	38	183	321	542	38	183	321	542	100%	100%	100%	100%
AGE												
Under 18												
18 to 24	0	0	0	0		0	0	0		0%	0%	0%
25 to 39	0	0	2	2		0	5	5		0%	20%	16%
40 to 49	0	0	3	3		0	8	8		0%	30%	24%
50 to 54	0	1	0	1		1	0	1		20%	0%	4%
55 to 61	0	3	2	5		4	5	9		60%	20%	28%
62+	0	1	3	4		1	8	9		20%	30%	28%
Not a veteran	16	147	115	278								
Observation only	0	0	189	189								
Prefer not to say / don't know	22	31	3	56								
Dropped out of survey	0	0	4	4								
Subtotal	38	183	321	542		6	26	32		100%	100%	100%
GENDER												
Male	0	5	10	15		6	26	32		100%	100%	100%
Female	0	0	0	0		0	0	0		0%	0%	0%
Transgender	0	0	0	0		0	0	0		0%	0%	0%
Gender non-conforming	0	0	0	0		0	0	0		0%	0%	0%
Not a veteran	16	147	115	278								
Observation only	0	0	189	189								
Prefer not to say / don't know	22	31	3	56								
Dropped out of survey	0	0	4	4								
Subtotal	38	183	321	542		6	26	32		100%	100%	100%
ETHNICITY												
Hispanic/Latino	0	1	2	3		1	5	6		20%	20%	20%
Non-Hispanic/Non-Latino	0	4	8	12		5	21	25		80%	80%	80%
Not a veteran	16	147	115	278								
Observation only	0	0	189	189								
Prefer not to say / don't know	22	31	3	56								
Dropped out of survey	0	0	4	4								
Subtotal	38	183	321	542		6	26	32		100%	100%	100%
RACE												
NH White	0	2	4	6		2	10	13		40%	40%	40%
White	0	3	4	7		4	10	15		60%	40%	47%
Black	0	2	4	6		2	10	13		40%	40%	40%
Asian	0	0	0	0		0	0	0		0%	0%	0%
American Indian or Alaska Native	0	0	0	0		0	0	0		0%	0%	0%
Native Hawaiian or Pacific Islander	0	0	0	0		0	0	0		0%	0%	0%
Multiple Races or other	0	0	0	0		0	0	0		0%	0%	0%
Not a veteran	16	147	115	278								
Observation only	0	0	189	189								
Prefer not to say / don't know	22	31	3	56								
Dropped out of survey	0	0	4	4								

*Doesn't add up to 100% because some people indicated multiple races

CHRONICALLY HOMELESS

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	SURVEY RESPONSES				EXTRAPOLATED ESTIMATE				PROPORTION			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTALS												
Chronically homeless	0	103	64	167	0	103	166	269	0%	56%	52%	50%
Not chronically homeless	38	80	60	178	38	80	155	273	100%	44%	48%	50%
Observation only	0	0	189	189								
Prefer not to say / don't know	0	0	8	8								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542		103	166	269	100%	100%	100%	100%
AGE												
Under 18	0	3	0	3		3	0	3		3%	0%	1%
18 to 24	0	3	1	4		3	3	6		3%	2%	2%
25 to 39	0	12	14	26		12	37	49		12%	22%	18%
40 to 49	0	19	14	33		19	37	56		18%	22%	21%
50 to 54	0	18	12	30		18	32	50		17%	19%	18%
55 to 61	0	30	14	44		30	37	67		29%	22%	25%
62+	0	18	8	26		18	21	39		17%	13%	15%
Not chronically homeless	38	80	60	178								
Observation only	0	0	189	189								
Prefer not to say / don't know	0	0	9	9								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542		103	166	269	100%	100%	100%	100%
GENDER												
Male	0	69	48	117		69	126	195		67%	76%	73%
Female	0	32	14	46		32	37	69		31%	22%	26%
Transgender	0	2	0	2		2	0	2		2%	0%	1%
Gender non-conforming	0	0	1	1		0	3	3		0%	2%	1%
Not chronically homeless	38	80	60	178								
Observation only	0	0	189	189								
Prefer not to say / don't know	0	0	9	9								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542		103	166	269	100%	100%	100%	100%
ETHNICITY												
Hispanic/Latino	0	29	23	52		29	62	91		28%	38%	34%
Non-Hispanic/Non-Latino	0	74	38	112		74	103	177		72%	62%	66%
Not chronically homeless	38	80	60	178								
Observation only	0	0	189	189								
Prefer not to say / don't know	0	0	11	11								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542		103	66	269	100%	100%	100%	100%
RACE												
NH White	0	41	15	56		73	86	159		40%	27%	32%
White	0	68	27	95		121	155	276		66%	48%	55%
Black	0	30	20	50		53	115	168		29%	36%	33%
Asian	0	3	3	6		5	17	23		3%	5%	4%
American Indian or Alaska Native	0	0	4	4		0	23	23		0%	7%	5%
Native Hawaiian or Pacific Islander	0	1	1	2		2	6	8		1%	2%	1%
Multiple Races or other	0	1	0	1		2	0	2		1%	0%	0%
Not chronically homeless	38	80	60	178								
Observation only	0	0	189	189								
Prefer not to say / don't know	0	0	16	11								
Dropped out of survey	0	0	0	0								

*Doesn't add up to 100% because some people indicated multiple races

FAMILIES WITH CHILDREN

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	SURVEY RESPONSES				EXTRAPOLATED ESTIMATE				PROPORTION			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTALS												
Persons in families with children	34	43	0	77					89%	23%	0%	14%
Single adults	4	140	321	465					11%	77%	100%	86%
Observation only	0	0	0	0								
Prefer not to say / don't know	0	0	0	0								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542	38	183	321	542	100%	100%	100%	100%
AGE												
Under 18	22	28	0	50					65%	65%		65%
18 to 24	4	2	0	6					12%	5%		8%
25 to 39	3	9	0	12					9%	21%		16%
40 to 49	2	2	0	4					6%	5%		5%
50 to 54	1	2	0	3					3%	5%		4%
55 to 61	2	0	0	2					6%	0%		3%
62+	0	0	0	0					0%	0%		0%
Single adults	4	140	321	465								
Observation only	0	0	0	0								
Prefer not to say / don't know	0	0	0	0								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542					100%	100%		100%
GENDER												
Male	13	18	0	31					38%	42%		40%
Female	21	25	0	46					62%	58%		60%
Transgender	0	0	0	0					0%	0%		0%
Gender non-conforming	0	0	0	0					0%	0%		0%
Single adults	4	140	321	465								
Observation only	0	0	0	0								
Prefer not to say / don't know	0	0	0	0								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542					100%	100%		100%
ETHNICITY												
Hispanic/Latino	21	30	0	51					62%	70%		66%
Non-Hispanic/Non-Latino	13	13	0	26					38%	30%		34%
Single adults	4	140	321	465								
Observation only	0	0	0	0								
Prefer not to say / don't know	0	0	0	0								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542					100%	100%		100%
RACE												
NH White	0	0	0	0					0%	0%		0%
White	9	28	0	37					26%	65%		48%
Black	13	13	0	26					38%	30%		34%
Asian	2	0	0	2					6%	0%		3%
American Indian or Alaska Native	4	1	0	5					12%	2%		6%
Native Hawaiian or Pacific Islander	3	0	0	3					9%	0%		4%
Multiple Races or other	3	1	0	4					9%	2%		5%
Single adults	4	140	321	465								
Observation only	0	0	0	0								
Prefer not to say / don't know	0	0	0	0								
Dropped out of survey	0	0	0	0								

*Doesn't add up to 100% because some people indicated multiple races

UNACCOMPANIED & PARENTING YOUTH (18-24)

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	SURVEY RESPONSES				EXTRAPOLATED ESTIMATE				PROPORTION			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTALS												
Unaccompanied & parenting youth	6	7	18	31	6	7	18	31	16%	4%	6%	6%
Adults & children in families	32	176	295	503					84%	96%	94%	94%
Observation only	0	0	8	8								
Prefer not to say / don't know	0	0	0	0								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542	6	7	18	31	100%	100%	100%	100%
UNACCOMPANIED YOUTH												
Unaccompanied youth	2	6	18	26					50%	4%	6%	6%
Single adults	2	134	303	439					50%	96%	94%	94%
Observation only	0	0	0	0								
Prefer not to say / don't know	0	0	0	0								
Dropped out of survey	0	0	0	0								
Subtotal	4	140	321	465					100%	100%	100%	100%
PARENTING YOUTH												
Parenting youth households	3	1	0	4					30%	8%		17%
Families w/ an adult HoH	7	12	0	19					70%	92%		83%
Observation only	0	0	0	0								
Prefer not to say / don't know	0	0	0	0								
Dropped out of survey	0	0	0	0								
Subtotal	10	13	0	23					100%	100%	0%	100%
GENDER												
Male	1	4	14	19					17%	57%	78%	61%
Female	5	2	4	11					83%	29%	22%	35%
Transgender	0	1	0	1					0%	14%	0%	3%
Gender non-conforming	0	0	0	0					0%	0%	0%	0%
Adults & children in families	32	176	303	511								
Observation only	0	0	0	0								
Prefer not to say / don't know	0	0	0	0								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542					100%	100%	100%	100%
ETHNICITY												
Hispanic/Latino	4	3	5	12	4	3	6	13	67%	43%	31%	41%
Non-Hispanic/Non-Latino	2	4	11	17	2	4	13	19	33%	57%	69%	59%
Adults & children in families	32	176	303	511								
Observation only	0	0	0	0								
Prefer not to say / don't know	0	0	2	2								
Dropped out of survey	0	0	0	0								
Subtotal	38	183	321	542	6	7	18	31	100%	100%	100%	100%
RACE												
NH White	0	1	3	4	0	1	3	4	0%	14%	19%	14%
White	1	4	5	10	1	4	6	11	20%	57%	31%	35%
Black	2	3	8	13	2	3	9	14	40%	43%	50%	46%
Asian	0	0	0	0	0	0	0	0	0%	0%	0%	0%
American Indian or Alaska Native	0	0	1	1	0	0	1	1	0%	0%	6%	4%
Native Hawaiian or Pacific Islander	2	0	0	2	2	0	0	2	40%	0%	0%	8%
Multiple Races or other	0	0	2	2	0	0	2	2	0%	0%	13%	7%
Adults & children in families	32	176	303	511								
Observation only	0	0	0	0								
Prefer not to say / don't know	1	0	2	3								
Dropped out of survey	0	0	0	0								

*Doesn't add up to 100% because some people indicated multiple races

Appendix D

Survey Instrument

2019 Pasadena Homeless Count

Your Name:

Time of Survey (Circle one): AM PM

Family? Yes (Family #:) No

1. Hello, we are conducting a survey of persons experiencing homelessness to assist you and provide better programs and services. Your participation is voluntary and your responses will be summarized and kept strictly confidential. **Can I have ten minutes of your time?**

- Yes (go to **Q8** / Full Survey)
- No (go to **Q2** / Observation Only Survey)

Observation Only Survey

2. Place of Stay

- Street or sidewalk
- Car
- RV
- Park
- Abandoned building
- Transit center (bus stop, train, etc)
- Under bridge / overpass
- Tent / encampment / natural area
- Other:

3. Hispanic or Latino?

- Yes
- No
- Don't Know

4. Race:

- White or Caucasian
- Black or African-American
- Asian or Asian American
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- Multiple races
- Don't know

5. Gender:

- Male
- Female
- Don't know

6. Approximate age (best guess):

- Age:

7. Pets:

- Yes
- No
- Don't Know

Children

Circle corresponding responses for each child.

	CHILD #					
	1	2	3	4	5	6
Gender	M	M	M	M	M	M
M = male	F	F	F	F	F	F
F = female	O	O	O	O	O	O
O = other						
Hispanic/ Latino	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Race (select all that apply)	W	W	W	W	W	W
W = white	B	B	B	B	B	B
B = black	A	A	A	A	A	A
A = Asian	AI	AI	AI	AI	AI	AI
AI = American Indian or Alaska Native	NH	NH	NH	NH	NH	NH
NH = Native Hawaiian or Pacific Islander	O	O	O	O	O	O
O = Other						

Full Survey

8. Do you have any pets living with you?

If the person drops out of the survey, please answer based on observation.

- Yes
- No
- Prefer not to say / don't know

9. What are your initials (first and last name)?"

If the person drops out of the survey, write "99"

Initials:

10. PM: Where will you sleep tonight?

AM: Where did you sleep last night?

If the person drops out of the survey, please answer based on observation.

- Street or sidewalk (go to **Q 11**)
- Car (go to **Q 11**)
- RV (go to **Q 11**)
- Park (go to **Q 11**)
- Abandoned building (go to **Q 11**)
- Transit Center (bus stop, train station, etc.) (go to **Q 11**)
- Under bridge/overpass (go to **Q 11**)
- Tent/encampment/natr'l area (go to **Q 11**)
- Emergency shelter (**end survey**)
- Motel / hotel (**end survey**)
- With friends/family(**end survey**)
- Transitional housing (**end survey**)
- House or apartment (**end survey**)
- Jail, hospital, treatment pgm(**end survey**)
- Other:

11. How old are you?

If the person drops out of the survey or responds "don't know," please answer based on observation.

Age:

12. Are you Hispanic or Latino?

If the person drops out of the survey, please answer based on observation.

- Yes
- No
- Prefer not to say / don't know

13. Which racial group do you identify with most?

If the person drops out of the survey, please answer based on observation (**check all that apply**).

- White or Caucasian
- Black or African-American
- Asian or Asian American
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- Prefer not to say / don't know
- Other:

14. What gender do you identify with?

If the person drops out of the survey, please answer based on observation.

- Male
- Female
- Transgender Male to Female
- Transgender Female to Male
- Gender non-binary
- Prefer not to say / don't know
- Other:

15. What City were you living when you most recently became homeless?

If out of state, indicate the state or country only. Enter "prefer not to say" or "dropped out" when applicable.

City or state or country:

16. Is this the first time you've been homeless?

- Yes (go to **Q18**)
- No (go to **Q17**)
- Prefer not to say / don't know (go to **Q17**)
- Dropped out of survey

17. How long have you been homeless this current time?

- Less than a month (go to **Q19**)
- 1 to 11 months (go to **Q19**)
- 1 or more years (go to **Q21**)
- Prefer not to say / don't know (go to **Q21**)
- Dropped out of survey

18. How long have you been homeless?

- Less than a month (go to **Q21**)
- 1 to 11 months (go to **Q21**)
- 1 or more years (go to **Q21**)
- Prefer not to say / don't know (go to **Q21**)
- Dropped out of survey

19. Including this time, how many separate times have you stayed in shelters or on the streets in the past three years (since January 2015)?

- Less than 4 times (go to **Q21**)
- 4 or more times (go to **Q20**)
- Prefer not to say / don't know (go to **Q21**)
- Dropped out of survey

20. In total, how long did you stay in shelters or on the streets for those times (combined)?

- Less than a month
- 1 to 11 months
- 1 or more years
- Prefer not to say / don't know
- Dropped out of survey

21. Have you served on active duty in the U.S. Armed Forces or been called into active duty in the National Guard or as a Reservist?

- Yes
- No
- Prefer not to say / don't know
- Dropped out of survey

“The next set of questions ask about sensitive topics. You don't have to answer any question that you don't want to however your answers will be combined with the answers of other people who take the survey and used to help provide better programs and services.”

22. Do any of these situations keep you from holding a job or living in stable housing?
(Read and check all that apply)

- Physical disability
- Developmental disability
- Drug or alcohol use
- Serious mental health condition
- Chronic health condition (such as diabetes, high blood pressure, seizures, respiratory problems or arthritis)
- None
- Prefer not to say / don't know
- Dropped out of survey

23. What is the primary cause of your current state of homelessness (select up to 3)?

- Alcohol or drug use

2019 Pasadena Homeless Count Survey Questions

- Aging out of foster care
- Domestic / dating violence, sexual assault, or stalking
- Eviction (go to **Q24**)
- Family/friend asked you to leave
- Fire
- Foreclosure
- Landlord raised rent
- Lost job
- Incarceration
- Medical problem or disability
- Probation / parole restrictions
- Prefer not to say / don't know
- Dropped out of survey
- Other:

24. If eviction in #23: What City were you living when you were evicted? If out of state, indicate the state or country only. Enter "prefer not to say" or "dropped out" when applicable.

City or state or country:

25. Are you experiencing homelessness because you are currently fleeing domestic violence, dating violence, sexual assault, or stalking?

- Yes
- No
- Prefer not to say
- Dropped out of survey

26. Have you stayed in a holding cell, jail or prison during the past six months?

- Yes
- No
- Prefer not to say / don't know
- Dropped out of survey

27. Have you ever tested positive for HIV?

- Yes
- No
- Prefer not to say / don't know
- Dropped out of survey

28. Did you visit an ER in the past 12 months?

- Yes (go to **Q29**)
- No (go to **Q30**)
- Prefer not to say / don't know (go to **Q30**)
- Dropped out of survey

29. If yes to #28: How many times did you visit the ER in the past 12 months?

- 1-2 times
- 3-5 times
- 6 or more times
- Prefer not to say / don't know
- Dropped out of survey

30. Have you ever received health care or benefits from a Veterans Administration medical center?

- Yes
- No
- Prefer not to say / don't know
- Dropped out of survey

31. During the past 12 months, was there a time when you wanted medical care or surgery but could not get it?

- Yes
- No
- Prefer not to say / don't know
- Dropped out of survey

32. Do you have any regular income?

- Yes
- No (go to **Q34**)
- Prefer not to say / don't know
- Dropped out of survey

33. If yes to #32: What is your average monthly income?

Enter "prefer not to say" or "dropped out" when applicable.

- Income:

34. Have you ever been in foster care?

- Yes
- No
- Prefer not to say / don't know
- Dropped out of survey

35. Do you consider yourself to be (sexual orientation):

- Heterosexual (straight)
- Gay
- Lesbian
- Bisexual
- Queer
- Prefer not to say / don't know
- Dropped out of survey

36. Do you have any children under 18 that are living with you today?

- Yes
- No
- Prefer not to say
- Dropped out of survey

Children

Circle corresponding responses for each child.

	CHILD #					
	1	2	3	4	5	6
Gender	M	M	M	M	M	M
M = male	F	F	F	F	F	F
F = female	O	O	O	O	O	O
O = other						
Hispanic/ Latino	Yes	Yes	Yes	Yes	Yes	Yes
	No	No	No	No	No	No
Race (select all that apply)						
W = white	W	W	W	W	W	W
B = black	B	B	B	B	B	B
A = Asian	A	A	A	A	A	A
AI = American Indian or Alaska Native	AI	AI	AI	AI	AI	AI
NH = Native Hawaiian or Pacific Islander	NH	NH	NH	NH	NH	NH
O = Other	O	O	O	O	O	O

Location Information

43. Which zone are you in?

- Zone 1
- Zone 2
- Zone 3
- Zone 4
- Zone 5A
- Zone 5B
- Zone 6A
- Zone 6B
- Zone 7A
- Zone 7B
- Zone 8
- Zone 9A
- Zone 9B
- Zone 10A
- Zone 10B
- Zone 11
- Zone 12
- Zone 13
- Zone 14
- Zone 15
- Zone 16
- Zone 17
- Parks
- Libraries
- Outside zones

44. What is your approximate location?

Preferred: Street address, name of library or park

Alternative: Cross streets / landmarks

Location:

Appendix E

Map of Results

2019 Homeless Count Map

(unsheltered count)

