



Pasadena Partnership

Pasadena Partnership to End Homelessness
pasadenapartnership.org



PASADENA HOMELESS COUNT

2016

2016 Homeless Count & Subpopulation Survey
City of Pasadena



About this Report

The City of Pasadena 2016 Homeless Count was coordinated by Urban Initiatives in partnership with the City of Pasadena, City of Pasadena Housing Department, and the Pasadena Partnership to End Homelessness (Pasadena Partnership). These entities have worked together since 1992 to formulate and implement the city's Continuum of Care system for homeless individuals and families.

URBAN INITIATIVES

Urban Initiatives is a non-profit, non-partisan organization that consists of several community-based and faith-based institutes that respond to the economic, housing, and social needs of neighborhoods, cities, and counties from local community, regional, national, international, and faith-based perspectives. Researchers involved in preparing this report include:

Joe Colletti, PhD, Project Director
Sofia Herrera, PhD, Project Associate Director
Mark Bradshaw, MDiv, Project Assistant
Susan Washington, MA, Project Assistant
David Kim, MA Project Assistant

PASADENA PARTNERSHIP

As the principal planning entity for the Pasadena Continuum of Care, the Pasadena Partnership to End Homelessness (Pasadena Partnership) coordinates housing, services, and funding for homeless families and individuals.

CITY OF PASADENA HOUSING DEPARTMENT

The City of Pasadena Housing Department serves as the Collaborative Applicant for the Continuum of Care, the legal entity designated to submit the CoC application. In addition, the City of Pasadena leads the Pasadena Partnership in developing policies for and evaluating the various Continuum of Care programs. Lead staff involved in preparing this report include:

Anne Lansing, Project Planner & Pasadena Partnership Board Member
Anna Jacobsen, Planning Associate on Homeless Issues
Onik Nazarian, HMIS Analyst

Copies of this report can be obtained through the following websites:
www.pasadenapartnership.org and www.urban-initiatives.org

Acknowledgements

Students and staff from Fuller Theological Seminary's Office for Urban Initiatives along with 102 other volunteers from faith-based organizations and the community at large participated in the 2016 Homeless Count by forming teams to count on the streets and in facilities. Students also helped with gathering data, entering data, and Office for Urban Initiatives staff contributed to writing this report.

SPECIAL THANKS TO

The Pasadena Public Health Department, the Pasadena Police Department, particularly the Homeless Outreach Psychiatric Evaluation (HOPE) Team and Park Safety Specialists, the Los Angeles County Department of Mental Health, Youth Moving On, and Union Station Homeless Services' CES Outreach Team from Union Station. These groups were instrumental in planning and/or conducting the street count.

Contents

7

Executive Summary

- 7 Impact of Outreach & Housing First
- 8 Pasadena's Call to Action
- 10 Opening Doors: Progress & Recommendations Summary

11

Definitions

13

Background Information

- 13 When the Count Was Conducted
- 13 Who Was Counted
- 13 Who Carried Out the Count

15

Methodology

17

Homeless Survey Findings

- 17 Age
- 17 Gender
- 17 Ethnicity & Race
- 17 Health
- 18 Domestic Partner Violence or Abuse
- 18 Criminal Justice System
- 18 Last Permanent Residence

21

Homeless Subpopulations

23

Homeless Veterans

- 23 Progress
- 24 Recommendations

27

○ Chronically Homeless

28 Progress

28 Recommendations

31

○ Homeless Families with Children

31 Progress

31 Recommendations

33

○ Unaccompanied Homeless Youth

33 Progress

33 Recommendations

35

Appendix A: Survey Data

36 Total

37 Homeless Veterans

38 Chronically Homeless

39 Homeless Families With Children

40 Unaccompanied Homeless Youth

41

Appendix B: Survey Instrument

43

Appendix C: Map of Results

Executive Summary

Although homelessness is increasingly visible in Pasadena, the 2016 Homeless Count revealed a continued decrease in number. On the day of Pasadena's 2016 Homeless Count 530 people were homeless, 16% fewer than in 2015 (n=632). For those living on the streets, the decrease was even sharper; between 2015 and 2016 there was a 20% decrease in unsheltered homelessness (442 in 2015 and 352 in 2016). This decrease in the street count, however, is partially due to the fact that the Bad Weather Shelter was open during the 2016 count and closed during the 2015 count (accounting for a decrease of 42 individuals in the street count).

While the number of people who are homeless in Pasadena has fallen, their significant needs make them more visible to the public. Of the 530 homeless in 2016, nearly half (42%) are chronically homeless, up by 14% from 2015 (198 compared to 225). In addition to extended lengths of homelessness, other significant needs include chronic health conditions (29%), mental illness (28%), a history of domestic violence (28%), and physical disabilities (26%). These physical and psychological problems make it especially difficult to permanently house these individuals.

IMPACT OF OUTREACH & HOUSING FIRST

In the past, people experiencing homelessness had to navigate an uncoordinated set of programs that did not always offer permanent solutions to ending their homelessness. Since 2011, however, the Pasadena Partnership has focused on developing a crisis response system that focuses on a coordinated Housing First approach that emphasizes rapid connections to permanent housing.

Housing First is a simple philosophy that offers permanent, affordable housing as quickly as possible to homeless individuals and families. Once in a program, case managers work to engage participants in voluntary supportive services and connect them to community-based supports with the goal of helping them to remain housed. Income, sobriety, participation in treatment and/or other services are not required as a condition for getting housing. In Pasadena, Housing First programs have shown promising results; over 88% of program participants do not return to homelessness.

BASICS OF THE COUNT

The 2016 Homeless Count was conducted on a single day, Wednesday, January 27th, 2016, and consisted of two primary components:



Unsheltered Count

The unsheltered count is a targeted survey of homeless individuals and families most commonly considered homeless (those sleeping outdoors, on the street, in parks or vehicles, etc.). Beginning in 2013, a greater effort was made to identify youth under age 25 because of HUD's guidance and emphasis on this population.



Sheltered Count

The sheltered count combined data collected through the Homeless Management Information System (HMIS) and surveys of those organizations that do not participate in HMIS. It included homeless individuals and families who have temporary shelter, including those staying in emergency shelter, transitional housing, or those using hotel/motel vouchers. This year, changes in the sheltered count reflected changes in shelter designations and listed shelters rather than capacity or usage.

Key to the success of this new service model has been developing a Coordinated Entry System that focuses on street outreach for the hardest to reach, service-resistant population. Through the Coordinated Entry System the most vulnerable homeless individuals and families are matched with available and appropriate housing resources. This year, outreach workers have worked to develop partnerships with the Pasadena Police Department HOPE team officers, veteran service providers, hospitals, and business districts to ensure full community coverage. As a result, 56 individuals were placed in permanent housing through the Coordinated Entry System in 2015.

The effects of these new policies are clear: homelessness has consistently decreased in Pasadena since 2011. A linear forecast trend based on the old service model estimated that 1,543 would have been homeless by 2016, as opposed to the 530 that were reported homeless during this year's count. As a result 66% fewer homeless were counted in 2016 than were expected under business-as-usual predictions, representing a 56% reduction

from 2011 (n=1,216).

PASADENA'S CALL TO ACTION

While Pasadena has made enormous strides in addressing the needs of the homeless population, housing the chronically homeless remains a tremendous challenge. Rental vouchers play a critical role in housing this population; however, with high rents and low vacancy rates, finding a unit that will accept a voucher is difficult. When a household fails to successfully find a unit within the time frame allowed by the program, vouchers must be returned and provided to another household.

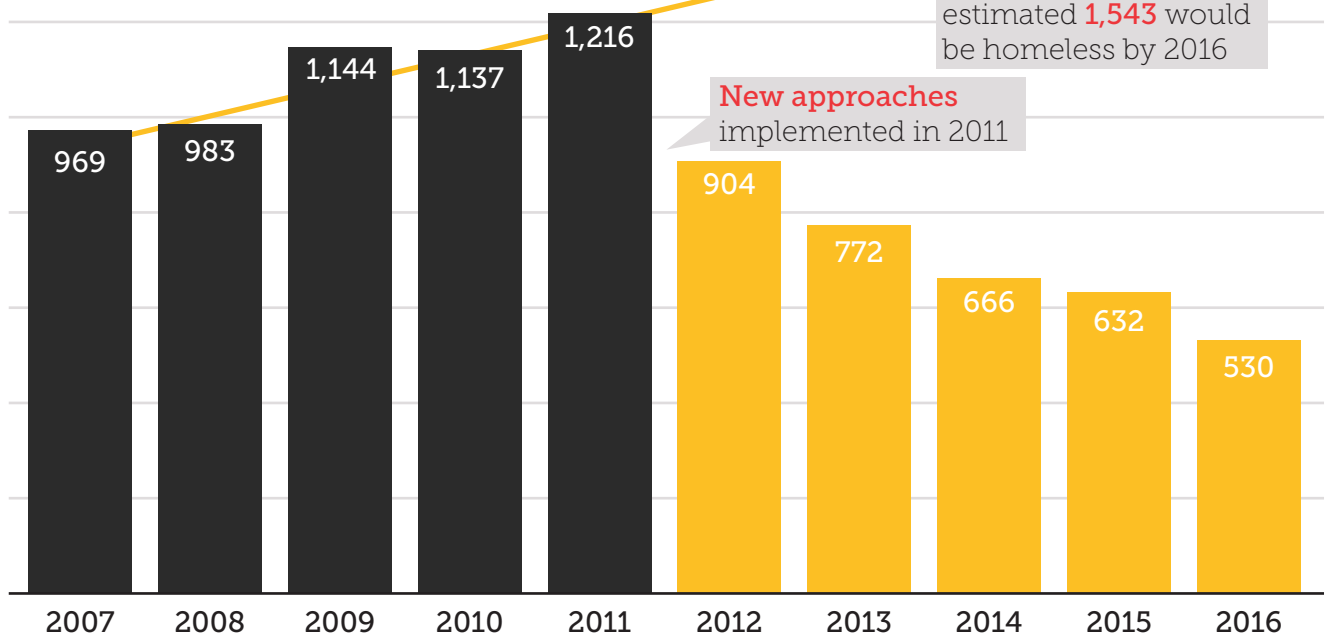
Thus, to continue to effectively reduce homelessness, the City of Pasadena is actively seeking out partnerships with landlords and property owners willing to commit a unit to our efforts to end homelessness. If you are a property owner, property manager, realtor, or locator interested in learning more about partnering with us, please contact Anne Lansing, City of Pasadena Housing Department, at (626) 744-6701 or alansing@cityof-pasadena.net.

FIGURE 1: TOTAL HOMELESS POPULATION: 530

66% fewer homeless counted in 2016 than were predicted by business as usual projections.

Linear forecast trend estimated **1,543** would be homeless by 2016

New approaches implemented in 2011



Homelessness in Pasadena is on a downward trend. Despite this gain, the population's significant needs make them more visible to the public than ever before.

Total

530

people
are homeless
on a given night

Percent Decrease

-16%

over this time last year

The Solution

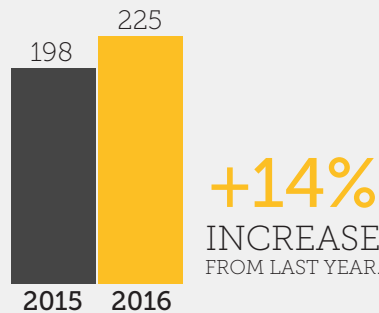
Since 2011, Pasadena has focused on developing a crisis response system that focuses on a coordinated Housing First approach that emphasizes rapid connections to permanent housing. This approach has ensured that over 88% do not return to homelessness.

Unsheltered

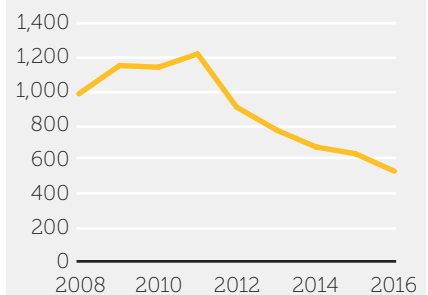
 66%

Includes:
On the street
Abandoned buildings
Cars, vans, RVs
Encampment areas

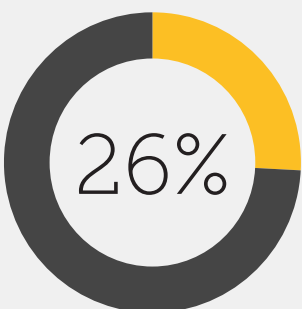
Chronic Homelessness



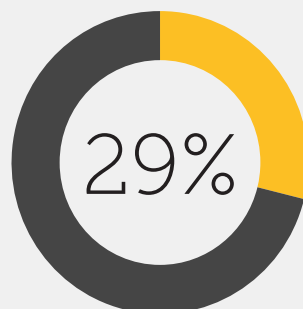
Downward Trend



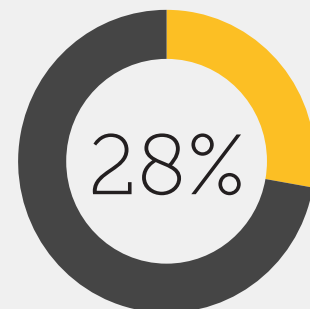
Physical Disabilities



Chronic Health Cond.



Mental Illness



Opening Doors

PROGRESS & RECOMMENDATIONS SUMMARY

In June 2010, the United States Interagency Council on Homelessness released *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*, a comprehensive plan to prevent and end homelessness in the United States. The plan identifies four homeless subpopulations with particular challenges or needs: chronically homeless persons, veterans, families, and unaccompanied children and youth. Below is a summary of Pasadena's progress and policy recommendations for each subpopulation. Additional analysis is provided in Section 6-10 (pages 21-33).



END VETERAN HOMELESSNESS BY 2015

PROGRESS Though homelessness among veterans did not end in 2015, the City of Pasadena has made significant progress in achieving this goal. Since 2011, the number of homeless veterans has decreased by 51 percent (89 in 2011 and 44 in 2016).

RECOMMENDATIONS The major obstacle to housing veterans is the lack of rental housing open to housing vouchers. The City of Pasadena's partnership with UCLA's Anderson School of Management to develop a landlord outreach campaign will help to overcome this obstacle. In addition, continuing to prioritize HUD-VASH vouchers for chronically homeless veterans and SSVF vouchers for non-chronically homeless veterans and their families, as well as other permanent housing for veterans, will help to ensure the goal of ending veteran homelessness is achieved.



END CHRONIC HOMELESSNESS BY 2017

PROGRESS While substantial progress has been made, the City of Pasadena will not be able to end chronic homelessness by 2017. Nearly half (42%) of the homeless population in Pasadena is chronically homeless, up by 14% from 2015 (198 compared to 225).

RECOMMENDATIONS The most effective means of reducing homelessness among the chronically homeless population will come through increasing the supply of permanent supportive housing using a Housing First approach, as well as continued outreach to the most service-resistant populations.



END FAMILY HOMELESSNESS BY 2020

PROGRESS Pasadena is on-track towards achieving the goal of ending family homelessness by 2020. Since 2013 there has been a significant downward trend in the number of people in homeless families, accounting for a 71 percent decrease during that time.

RECOMMENDATIONS Continue to implement rapid re-housing programs to help families obtain permanent housing as quickly as possible.



END UNACCOMPANIED YOUTH HOMELESSNESS BY 2020

Unaccompanied youth are persons under age 25 who are not accompanied by a parent or guardian and are not parents with child(ren).

PROGRESS Pasadena is on-track towards ending homelessness among unaccompanied youth by 2020, with the number of unaccompanied youth relatively low and stable (31 in 2013 and 36 in 2016).

RECOMMENDATIONS Strategies to end youth homelessness include focusing on reunifying unaccompanied youth with immediate family or other familial supports (if safe and appropriate), as well as prioritizing unaccompanied homeless youth for Rapid Re-Housing and unaccompanied chronically homeless youth for Permanent Supportive Housing using a Housing First approach.

Definitions

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

CHRONICALLY HOMELESS INDIVIDUAL A chronically homeless individual is a homeless individual with a disability who lives either in a place not meant for human habitation, a safe haven, or in an emergency shelter, or in an institutional care facility if the individual has been living in the facility for fewer than 90 days and had been 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 combined occasions total length of time is at least 12 months. Each period separating the occasion must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in 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 homeless persons.

HOMELESS In this study, 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 persons living in families who were living in "double ups," hotels/motels, or an institutional setting.

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.

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

OTHER PERMANENT HOUSING is housing with or without services that is specifically for formerly homeless people, but that does not require people to have a disability.

PARENTING YOUTH are people under 25 who are the parents or legal guardians of one or more children 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.

RAPID RE-HOUSING is a housing model designated to provide temporary housing assistance to people experiencing homelessness, moving them quickly out of homelessness and into permanent housing.

PERMANENT SUPPORTIVE HOUSING is designated to provide housing and supportive services on a long-term basis for formerly homeless people, who have disabilities.

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

SHELTERED HOMELESS PEOPLE are individuals who are staying in emergency shelters, transitional housing programs, or receiving motel or hotel vouchers.

TRANSITIONAL HOUSING PROGRAM provides homeless people 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 (UNDER 25) are people under age 25 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 HOMELESS PEOPLE are people who stay in places not meant for human habitation, such as the streets, abandoned buildings, vehicles, or parks.

Background Information

The 2016 Homeless Count is a one-night count and survey of Pasadena's sheltered and unsheltered homeless population. Since 2005, the Department of Housing and Urban Development (HUD) has asked all jurisdictions receiving Continuum of Care funding to conduct this count biennially during the last 10 days in January. The City of Pasadena, however, conducts the count annually in order to gain a better understanding of the population currently experiencing homelessness, measure the impact of current policies, and plan for the future.

WHEN THE COUNT WAS CONDUCTED

The homeless count was conducted on January 27, 2016. The count was carried out on the streets during the day from 6:00 to 8:00 am and during the evening from 8:00 to 10:00 p.m. Data for shelters and transitional housing programs was collected through the Homeless Management Information System (HMIS) as well as through individual and/or organizational surveys of those organizations that do not participate in HMIS.

WHO WAS COUNTED

An individual or family was considered homeless, and thus counted, if he/she met HUD's definition of homelessness. This definition includes individuals and families:

Living in a place not meant for human habitation, such as cars, parks, sidewalks, and abandoned buildings;

Living in an emergency shelter including those persons who received a voucher for a motel;

Living in a transitional housing program who originally came from the streets or an emergency shelter.

HUD does not consider the following persons to be homeless—persons who are “doubled up,” or persons who are “near homelessness—but considers them to be at-risk of homelessness. Such persons were not included in the city's homeless count per HUD's requirements.

The City of Pasadena, like many other largely populated cities, has a substantial number of households that are at-risk of homelessness. According to the U.S. Census Bureau, in 2014, there were approximately 15,000 residents who were members of a household whose income was \$15,000 a year or less. Of these households, approximately half (8,000 residents) were members of a household whose income was less than \$10,000. The Census Bureau also noted, in the 2014 American Community Survey, that 14.6 percent of Pasadena residents or approximately 21,000 residents lived below poverty level.

Many of these persons can become homeless because of social structural issues such as increases in rent, loss of job, and rising health care costs. In addition, personal experiences such as domestic violence, physical disabilities, mental illness, and substance abuse can cause members of a low income household or

an entire household to become homeless as well. Often, one or more of these experiences factor into a household's homeless experience.

WHO CARRIED OUT THE COUNT

The City of Pasadena Housing Department and the Pasadena Partnership to End Homelessness consulted with Urban Initiatives, a community-based non-profit research organization, to plan and coordinate the count (see www.urban-initiatives.org). Urban Initiatives also enlisted students and staff from Fuller Theological Seminary's Office for Urban Initiatives along with other volunteers from congregations and faith-based organizations and the community at large. Volunteers participated in the count by forming teams to canvass the city in order to count on the streets and in facilities. Office for Urban Initiatives staff and volunteers also helped with gathering data, entering data, and contributed to writing this report.

The Housing Department oversees the development of the Consolidated Plan, Homeless Continuum of Care System, and the City of Pasadena 10-Year Strategy to End Homelessness. In addition, the Department implements housing and community development programs and the provision of financial assistance to create and preserve affordable housing throughout the city. The City of Pasadena Housing Department 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.

The Pasadena Partnership to End Homelessness (Pasadena Partnership) is made up of more than 50 public and private agencies that provide community services to residents including homeless persons. The Pasadena Partnership (formerly the Pasadena Housing and Homeless Network or PHHN) has served

as the primary community planning entity concerning housing and homeless needs and services throughout the past 20 years. Such planning includes the Consolidated Plan, City of Pasadena 10-Year Strategy to End Homelessness, and every Continuum of Care application submission to HUD since 1995.

The Institute for Urban Initiatives is a community-based 501(c)(3) non-profit research agency that has completed many housing and homeless assessments including several homeless counts for cities and counties throughout California. It is closely affiliated with Fuller Theological Seminary's Office for Urban Initiatives.

Together, the aforementioned agencies coordinated a community-wide effort of approximately 70 volunteers that culminated in a homeless count on January 28, 2016. Volunteers counted persons on the streets.

Methodology

The 2016 Homeless Count was a city-wide effort that divided the city into 18 zones in which homeless people were counted. The count was carried out in the streets from 6:00 to 8:00 am and from 8:00 – 10:00 p.m. during the evening within each zone. The count was also conducted in facilities that serve homeless persons or where homeless persons congregate throughout the day and evening. In addition, professional outreach teams also canvassed areas of the City not readily accessible to the average volunteer.

The count instrument that was used required counters to collect the following information from every homeless adult encountered: first initial of first name, first initial of last name, gender, race¹, age by code², and state born as noted below (see Appendix B for survey instrument). All information remained confidential.

This enumeration activity created an identifier that prevents a person from being included in the final count more than once. During the enumeration, counters record the initials, gender, race, age, and state born of each individual homeless person encountered. If the same person was encountered again, counters would establish the same identifier. As a result, this person would be counted only once in the final tally.

This information was gathered each time a person was encountered, loaded into a database, and used to code each person. For example, a homeless person may have the following code of "WTMW6CA. This meant that this person's first name began with "W", his last name began with "T", he was male "M", he was White "5", "6" which means he is between 50 and 61 years old, and "CA" born in

FIGURE 2: EXAMPLE OF BASIC HOMELESS COUNT DATA

PERSON #	FIRST INITIAL	LAST INITIAL	GENDER	RACE	AGE	STATE BORN
1	J	H	F	5	6	CA
2	H	T	M	4	7	CA
3	R	K	F	4	5	TX
4	K	N	M	1	4	CA
5	F	A	M	3	3	CA
6	J	F	M	5	5	CA
7	J	F	M	5	5	CA
8	S	G	F	4	2	NY
9	D	T	M	5	6	CA
10	O	R	M	5	7	CA

1. The code for race was 1=African American or Black; 2=American Indian or Native; 3=Asian; 4=Native Hawaiian or Pacific Islander; 5=White; 6=Multiple races or other; 7=Don't know; 8=Refused to Answer

2. The code for age included 1=under age 18; 2= age 18-24; 3=age 25-29; 4=30-39; 5=40-49; 6=50-61; 7=62-69; 8=70-79; and 9=80+

California.

An example to illustrate how the process described above worked can be found within Figure 2 (page 15). In this example, numbers 6 and 7 would be considered the same person. As such, this person's responses would only be counted once in the final count. If for some reason there were doubt that numbers 6 and 7 were the same person, other collected data would be used to verify whether they were in fact the same person (including veteran status and number of children).

Homeless Survey Findings

To gain a more comprehensive understanding of the experiences of homeless residents in the City of Pasadena, the 2016 Homeless Count Count asked all respondents a series of basic demographic questions. What follows is a summary and basic analysis of these questions.

AGE

Overall, the age composition of the homeless population is similar to that of the City of Pasadena. Adults who are homeless (25-61), however, represent a greater proportion of the homeless population when compared to the City as a whole (67% compared to 56%).¹ This is especially true for the unsheltered population (71% adults). Not surprisingly, the sheltered homeless population has higher shares of children under 18, which are mostly families in Transitional Housing programs as well as those receiving motel or hotel vouchers.

GENDER

Compared to the City of Pasadena as a whole, males are much more likely to be homeless than females:

- 65.9% are male (compared to 49.8% of the general Pasadena population)
- 33.9% are female (compared to 50.2% of the general Pasadena population)
- 0.2% are transgendered (this gender category is not captured by the US Census Bureau)

ETHNICITY & RACE

The racial and ethnic composition of the homeless population mirrors trends among homeless populations the country with African Americans largely overrepresented. Other minority groups, however, including Hispanics/Latinos and Asians, are much less likely to experience homelessness.

- 53% are White (compared to 62% of the general Pasadena population)
- 40% are African American (compared to 11% of the general Pasadena population)
- 26% are Hispanic/Latino (compared to 34% of the general Pasadena population)
- 1% are Asian (compared to 15% of the general Pasadena population)

HEALTH

Homeless people suffer from the same illnesses experienced by people with homes, but at rates three to six times higher than the general population. As a result, the average life expectancy for people experiencing homelessness is 25 years less than those in stable housing.²

During the 2016 Homeless Count, 29% of respondents reported chronic health conditions, 28% reported mental health problems, 26% reported physical disabilities, and 12% reported substance use disorders. Only 1% of respondents reported having AIDS or an HIV-related illness.

1. American Community Survey, U.S. Census Bureau, 2010-2014
2. National Health Care for the Homeless Council, 2006



DOMESTIC PARTNER VIOLENCE OR ABUSE

Domestic violence is the immediate cause of homelessness for many women. Survivors of domestic violence are often isolated from support networks and financial resources by their abusers, which puts them at risk of becoming homeless.³ In Pasadena, almost a third of all persons experiencing homelessness (28%) reported domestic partner violence or abuse over their lifetime.

CRIMINAL JUSTICE SYSTEM

Individuals recently released from the criminal justice system often face housing challenges that may contribute to their homelessness. While information about the sheltered population's history with the criminal justice system is not collected, 18 percent (63 persons) of the unsheltered population reported spending at least one night in jail or prison in the 12 months prior to the survey.

LAST PERMANENT RESIDENCE

The ability to seek support from friends or family is affected by where an individual lived prior to becoming homeless. Almost half (43%) of the total homeless population were living in Pasadena when they became homeless. Another third (37%) were living in Los Angeles County. A fifth of respondents (20%) indicated that they were living outside of Los Angeles County when they became homeless.

3. National Alliance to End Homelessness, 2016

Homeless Survey Findings

TOTAL HOMELESS POPULATION: 530



66% Unsheltered
(n=352)

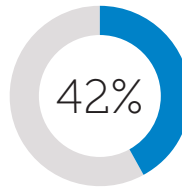
Includes:
On the street
Abandoned buildings
Cars, vans, RVs
Encampment areas



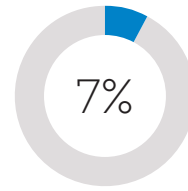
34% Sheltered
(n=178)

Includes:
Emergency shelters
Transitional housing
Hotel/motel vouchers

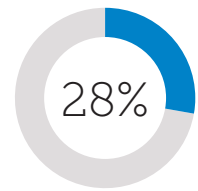
CHRONICALLY HOMELESS



VETERANS

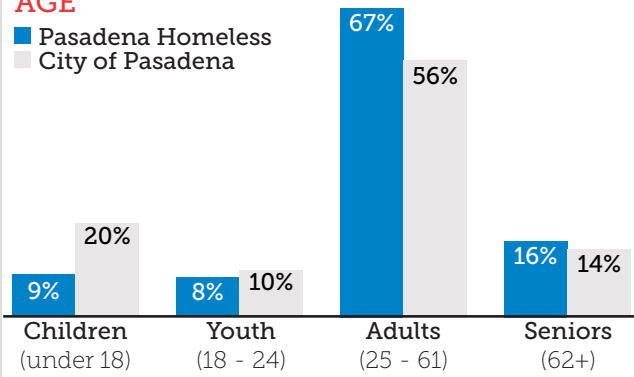


VICTIMS OF DOMESTIC VIOLENCE



AGE

■ Pasadena Homeless
■ City of Pasadena



GENDER

Pasadena Homeless

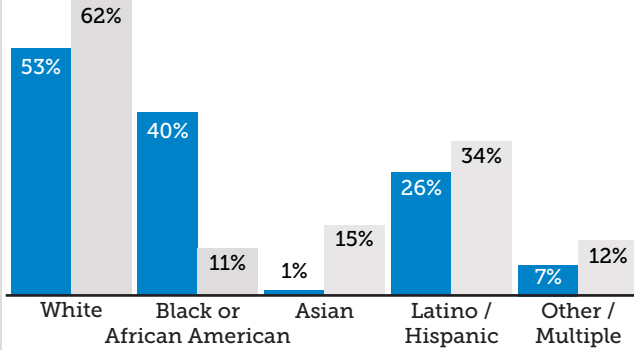


City of Pasadena



RACE & ETHNICITY

■ Pasadena Homeless
■ City of Pasadena



• 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%.

HEALTH

Chronic Health Condition



Mental Illness



Physical Disabilities



Developmental Disabilities



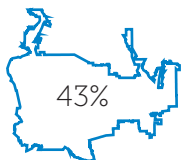
Substance Use Disorder



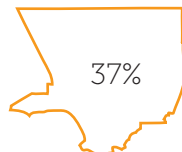
HIV/AIDS



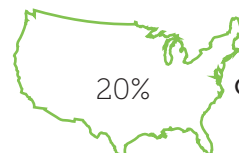
PLACE OF RESIDENCE AT TIME OF HOUSING LOSS



PASADENA



OTHER LA COUNTY



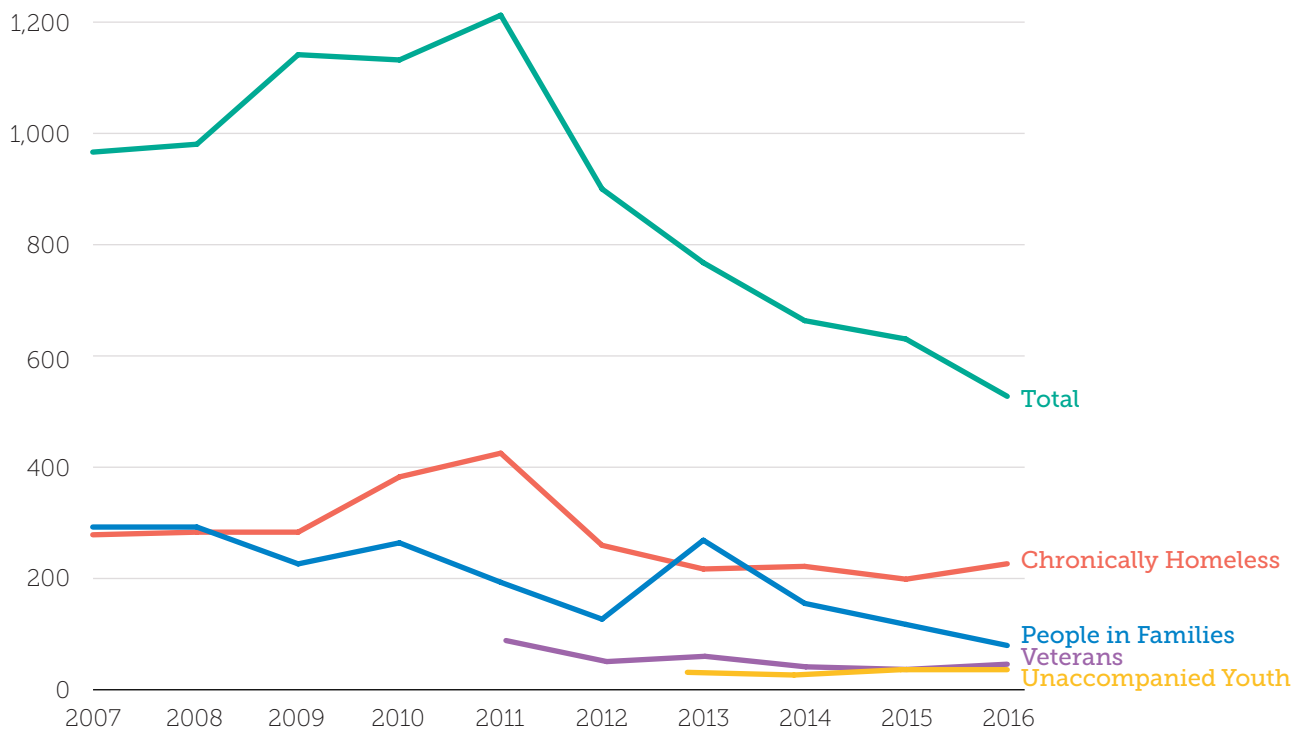
OUTSIDE LA COUNTY

Homeless Subpopulations

In June 2010, the United States Interagency Council on Homelessness released *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*, a comprehensive plan to prevent and end homelessness in the United States. The plan, which was amended in June 2015 to reflect lessons learned, identifies four homeless subpopulations with particular challenges or needs: chronically homeless persons, veterans, families, and unaccompanied children and youth.

The following sections provide metrics to gauge Pasadena's progress towards ending homelessness among each subpopulation. Of the 530 people identified as homeless during the 2016 Homeless Count, 225 were chronically homeless, 44 were veterans, 77 were people in families, and 36 were unaccompanied youth (under age 25). As indicated by Figure 3, while the number of chronically homeless persons has risen in recent years, the number of persons in families has fallen, and the number of veterans and unaccompanied youth and children has remained low and relatively flat.

FIGURE 3: SUBPOPULATION TRENDS



Homeless Veterans

During Pasadena's 2016 Homeless Count, 44 veterans experiencing homelessness were identified, representing 8 percent of the total homeless population. Almost half (48%) are chronically homeless and many face significant barriers including chronic health conditions (41%), physical disabilities (41%) and substance use disorders (30%).

Historically, veterans have been largely overrepresented in the U.S. homeless population. After controlling for poverty, age, race and geographic variation, female Veterans have been found to be three times more likely to become homeless than non-veterans and males were found to be two times more likely. Veterans' high incidences of mental illness, substance abuse, post-traumatic stress disorder (PTSD), Traumatic Brain Injury (TBI) and substance use disorders, along with weaker family ties, leaves them more at-risk for homelessness than the general population.¹

Veterans experiencing homelessness are more likely to live on the street than in shelters and more often remain on the street for extended periods of time. In Pasadena, this is certainly true, with 70 percent (31 individuals) of Veterans living on the street. These differences from the general homeless population make veterans more vulnerable to death on the streets.

Veterans' increased risk and vulnerability

have made their subpopulation a key priority for HUD and the City of Pasadena for the past five years and the Federal Strategy to End Homelessness set the goal of ending Veteran Homelessness by 2015.

PROGRESS

Homelessness among veterans did not end in 2015, however the City of Pasadena has made significant progress in achieving this goal. Since 2011, the number of homeless veterans has decreased by 51 percent (89 in 2011 and 44 in 2016).

In Pasadena, veteran outreach efforts have been led by New Directions, a veteran's service provider that can also serve veterans who received a less-than-honorable discharge. Under New Direction's leadership a bi-weekly coordinating meeting has focused on individual outreach and developing a by-name list of veterans, the goal of which is to have every veteran on the list matched with a housing resource. Attendees include the Coordinated Entry System lead, Union Station Homeless Services, Veteran's Affairs (VA) case managers (providers of outreach and case management), the Pasadena Housing Department (provides HUD Veteran Affairs Supportive Housing (VASH) vouchers and other homeless resources), the Department of Mental Health (provides outreach), Battle Buddies (provides outreach

1. Fargo, J et al. Prevalence and Risk of Homelessness Among US Veterans. 2012.

and veteran support), and other non-profits serving veterans through outreach, case management and housing provision. To date, between VASH and New Direction's special programs, enough resources have been identified to match all veterans to a housing voucher. As with chronic homelessness, the major obstacle to housing these veterans is the lack of rental housing open to housing vouchers.

The goal of these efforts is to achieve and sustain "functional zero" for veterans. Functional zero simply means that as veterans become homeless, the homeless response system is able to assure that their homelessness is rare, brief, and non-recurring. This means that every Veteran has access to the supports they need and want to avoid staying on the street and move quickly to permanent housing.

The results of these efforts are self-evident: since 2011, the overall number of veterans experiencing homelessness in Pasadena has decreased by 51 percent (falling from 89 in 2011 to 44 in 2016). Most of this decrease occurred between 2011 and 2014, with homelessness among veterans remaining relatively low and stable since then (6 veterans identified in 2015 and 41 in 2014). By comparison, between 2011 and 2015 there was a nationwide decrease of 27 percent in the number of homeless veterans.

RECOMMENDATIONS

Landlord Outreach. As with chronic homelessness, the major obstacle to housing these veterans is the lack of rental housing open to housing vouchers. The City of Pasadena's partnership with UCLA's Anderson School of Management to develop a landlord outreach campaign will help to overcome this obstacle.

Prioritize Veterans for Vouchers. The HUD-Veterans Affairs Supportive Housing (HUD-VASH) program combines Housing Choice Voucher rental assistance for homeless veterans with case management and clinical services provided by the department of Veter-

ans Affairs. In addition, the Department of Veterans' Affairs (VA) Supportive Services for Veteran Families (SSVF) program is designed to assist homeless persons and very low-income households among veterans. Continuing to prioritize HUD-VASH vouchers for chronically homeless veterans and SSVF vouchers for non-chronically homeless veterans and their families, as well as other permanent housing for veterans will help to ensure the goal of ending veteran homelessness is achieved.

Homeless Veterans

Since 2011, the number of homeless veterans in Pasadena has decreased by 51% (falling from 89 in 2011 to 44 in 2016). This decrease is largely the result of a concerted effort to increase outreach and prioritize housing for homeless veterans.

HOMELESS VETERANS: 44



70% Unsheltered
(n=31)

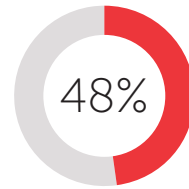
Includes:
On the street
Abandoned buildings
Cars, vans, RVs
Encampment areas



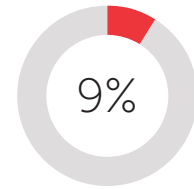
30% Sheltered
(n=13)

Includes:
Emergency shelters
Transitional housing
Hotel/motel vouchers

CHRONICALLY HOMELESS

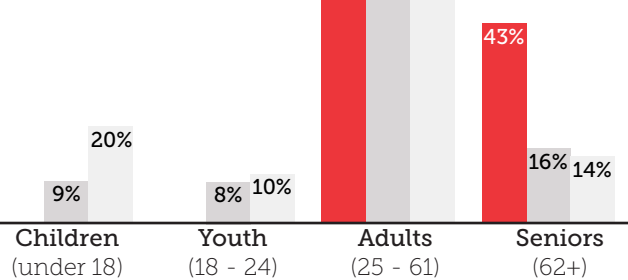


VICTIMS OF DOMESTIC VIOLENCE



AGE

■ Homeless Veterans
■ Total Homeless
■ City of Pasadena



GENDER

Homeless Veterans

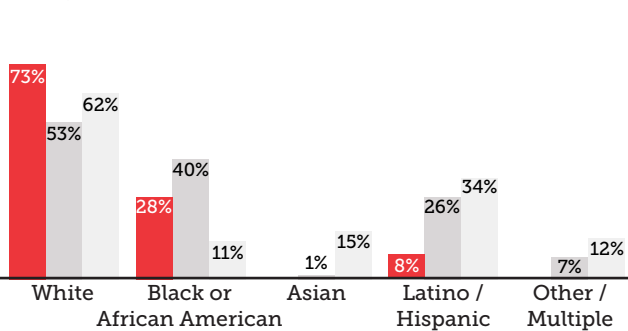


City of Pasadena



RACE & ETHNICITY

■ Homeless Veterans
■ Total Homeless
■ City of Pasadena



• 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%.

HEALTH

Chronic Health Condition



Mental Illness



Physical Disabilities



Developmental Disabilities



Substance Use Disorder



HIV/AIDS



Chronically Homeless

In 2016, the Homeless Count identified 212 adult individuals and 13 persons in families experiencing chronic homelessness. Chronically homeless individuals and families have both a disability (including serious mental illness, chronic substance use disorders, or chronic medical issues) and extended periods of homelessness (see sidebar for complete HUD definition). This represents 42% of the homeless population in Pasadena. While this number is substantially higher than the national average (17%), it is not surprising as more than half of all people experiencing chronic homelessness in the U.S. are in four states: California, Florida, New York and Texas.¹

People experiencing chronic homelessness are one of the most vulnerable homeless populations and exhibit a mortality rate four to nine times higher than the general population. In Pasadena, the chronically homeless population faces disabling health conditions at much higher rates than the general homeless population:

- 66% have physical disabilities (compared to 26% of the total homeless population)
- 61% have chronic health conditions (compared to 29% of the total homeless)

1. United States Interagency Council on Homelessness (USICH), *Opening Doors*, 2015; National Alliance to End Homelessness, *The State of Homelessness in America*, 2015.

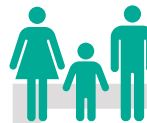
CHRONIC HOMELESSNESS (CH) DEFINED

In December 2015, HUD released a new, finalized, definition of chronic homelessness.



CH Individual

A chronically homeless individual is a homeless individual with a disability who lives either in a place not meant for human habitation, a safe haven, or in an emergency shelter, or in an institutional care facility if the individual has been living in the facility for fewer than 90 days and had been 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 the "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 combined occasions total length of time is at least 12 months. Each period separating the occasion must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in a safe haven.



CH Family

A CH 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 CH individual. A CH family includes those whose composition has fluctuated while the head of household has been homeless.

population)

- 48% struggle with mental illness (compared to 28% of the total homeless population)
- 33% have developmental disabilities (compared to 13% of the total homeless population)
- 26% have substance use disorders (compared to 12% of the total homeless population)

Research from across the country has shown that these individuals are intensive and costly users of health and criminal justice services. The combined costs of these services are often significantly higher than the costs of providing permanent supportive housing.

PROGRESS

Because of this population's significant vulnerabilities and high public service costs, the federal strategic plan to end homelessness identifies ending chronic homelessness by 2017 as one of its four key goals.

While substantial progress has been made, it is clear that the City of Pasadena will not be able to end chronic homelessness by 2017. As previously noted, nearly half (42%) of the homeless population in Pasadena is chronically homeless, up by 14% from 2015 (198 compared to 225). This population's in share, however, is partially due to the decreasing total number of people who are homeless.

Some barriers to making more significant strides in reducing chronic homelessness in Pasadena include federal budget constraints limiting the amount of money available to support housing programs and services, public support of brick-and-mortar permanent housing projects, and a tight rental market that makes using a permanent supportive housing rental voucher difficult.

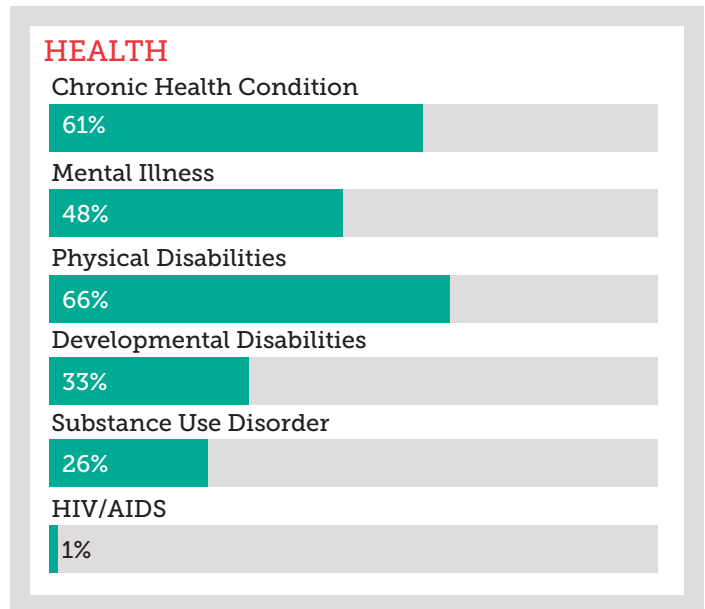
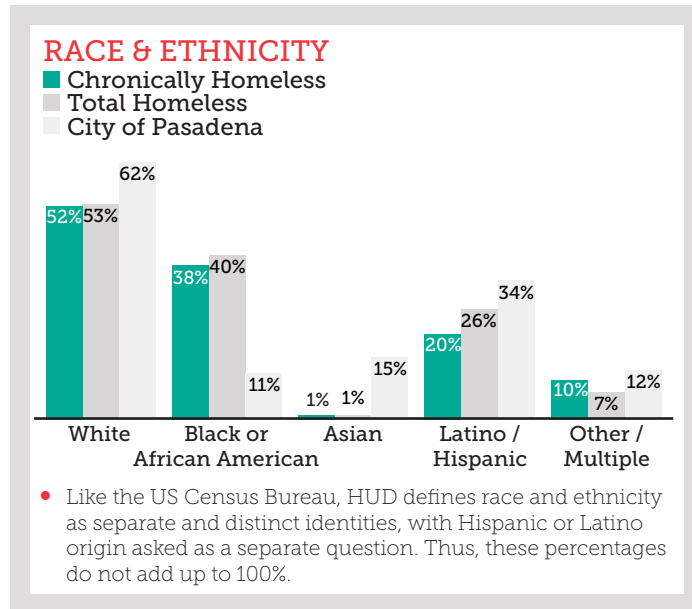
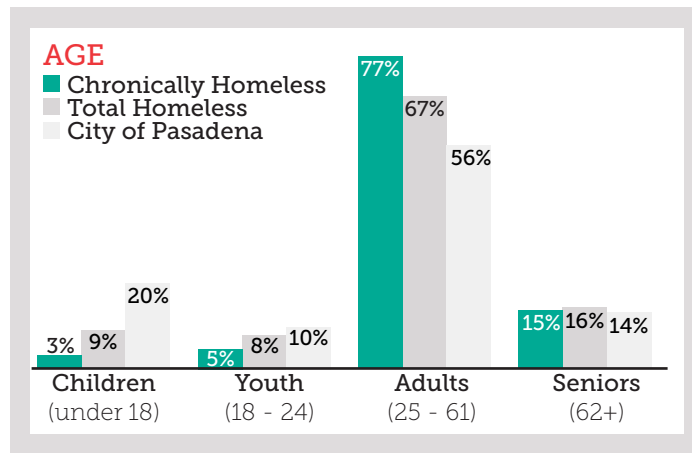
RECOMMENDATIONS

For people experiencing chronic homelessness, the research is overwhelmingly clear that permanent supportive housing using a Housing First approach is the solution. Thus looking forward, the most effective means of reducing homelessness among the chronically

homeless population will come through increasing the supply of permanent supportive housing using a Housing First approach, as well as continued outreach to the most service-resistant populations.

Chronically Homeless

Nearly half (42%) of the homeless population in Pasadena is chronically homeless, up by 14% from 2015 (198 compared to 225). This population faces disabling health conditions at much higher rates than the general homeless population



Homeless Families with Children

Families with children represent a much smaller proportion of the homeless population in Pasadena than nationally. The 2016 Homeless Count identified 26 families with children experiencing homelessness (77 persons), representing 14.5% of the total homeless population. Nationally, however, persons in families experiencing homelessness represent 36.5% of the overall homeless population.¹

In most ways, families experiencing homelessness share the same characteristics as other families living in poverty. However, families experiencing homelessness have less access to housing subsidies than low-income families who remain housed and have weaker social networks. Further, these families' homelessness has a significant correlation with family separations, including foster care and involvement with child welfare services.² Because this population is so vulnerable, it has been a focus of Opening Door's Federal Strategy to End Homelessness, with the goal of preventing and ending family and youth homelessness by 2020.

PROGRESS

The majority of assistance for families who are homeless in Pasadena is through rapid re-housing programs. Rapid re-housing

provides families with time-limited financial assistance to help them quickly secure housing and supports to address barriers to long-term housing stability, including connections to employment and services tailored to the unique needs of the household.

Pasadena is on-track towards achieving the goal of preventing and ending family and youth homelessness by 2020. Rapid re-housing has proven to be a permanent solution for many homeless families in Pasadena. Most families who have received assistance from rapid re-housing programs have not returned to homelessness. Consequently, since 2013 there has been a significant downward trend in the number of people in homeless families, accounting for a 71 percent decrease during that time.

RECOMMENDATION

Continue to implement rapid re-housing programs for non-chronically homeless families.

1. HUD 2015 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations

2. USICH, Opening Doors, 2015.

Homeless Families with Children

PERSONS IN HOMELESS FAMILIES WITH CHILDREN: 77



4% Unsheltered
(n=3)

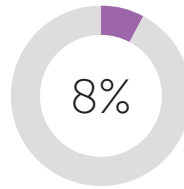


96% Sheltered
(n=74)

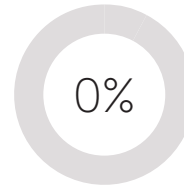
Includes:
On the street
Abandoned buildings
Cars, vans, RVs
Encampment areas

Includes:
Emergency shelters
Transitional housing
Hotel/motel vouchers

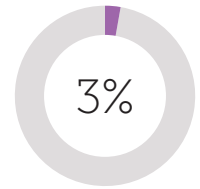
CHRONICALLY HOMELESS



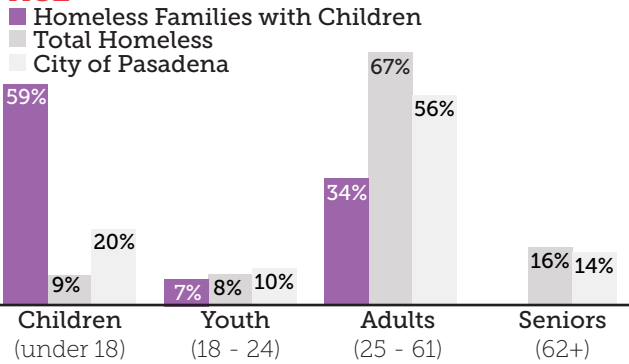
VETERANS



VICTIMS OF DOMESTIC VIOLENCE



AGE



GENDER

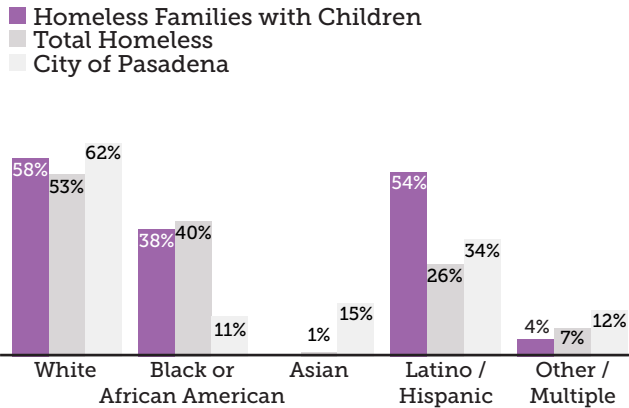
Persons in Homeless Families with Children



City of Pasadena



RACE & ETHNICITY



• 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%.

HEALTH

Chronic Health Condition



Mental Illness



Physical Disabilities



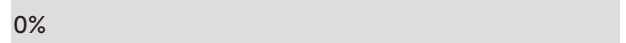
Developmental Disabilities



Substance Use Disorder



HIV/AIDS



Unaccompanied Homeless Youth (0-24)

In 2015, HUD updated the definition of unaccompanied youth; unaccompanied youth are persons under age 25 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). In Pasadena, 38 unaccompanied youth were homeless during the 2016 Homeless Count.

In 2015, the U.S. Interagency Council on Homelessness amended the federal strategic plan to end homelessness to include specific strategies and support to address the needs of these unaccompanied homeless youth, with the goal of ending youth and family homelessness by 2020. As part of this effort, the City of Pasadena has conducted dedicated youth counts since 2013.¹

PROGRESS

Since Pasadena first began tracking unaccompanied homeless youth, the number of youth has slightly increased, which may partially be accounted for by the increased focus on a youth count. In 2013, there were 31 unaccompanied homeless youth identified and in 2016, there were 38 identified. Despite this slight increase, Pasadena is on track with the federal strategic plan to end homelessness' goal of ending homelessness among unaccompanied youth by 2020.

RECOMMENDATIONS

Strategies to ensure that Pasadena ends youth homelessness by 2020 include focusing on reunifying unaccompanied youth under age 18 with immediate family or other familial supports (if safe and appropriate), as well as prioritize unaccompanied homeless youth for Rapid Re-Housing and unaccompanied chronically homeless youth for Permanent Supportive Housing using a housing first approach.

1. HUD, AHAR Part 1, 2015.

Unaccompanied Homeless Youth

UNACCOMPANIED HOMELESS YOUTH: 38



87% Unsheltered
(n=33)

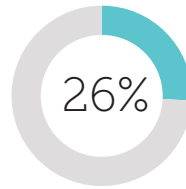
Includes:
On the street
Abandoned buildings
Cars, vans, RVs
Encampment areas



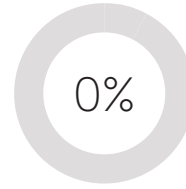
13% Sheltered
(n=5)

Includes:
Emergency shelters
Transitional housing
Hotel/motel vouchers

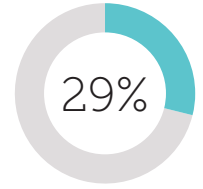
CHRONICALLY HOMELESS



VETERANS

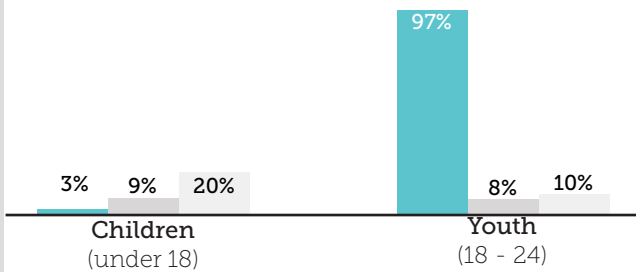


VICTIMS OF DOMESTIC VIOLENCE



AGE

■ Unaccompanied Homeless Youth
■ Total Homeless
■ City of Pasadena



GENDER

Unaccompanied Homeless Youth

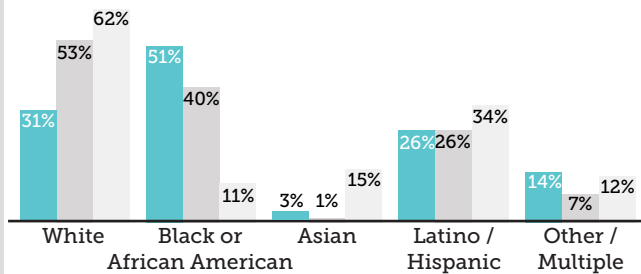


City of Pasadena



RACE & ETHNICITY

■ Unaccompanied Homeless Youth
■ Total Homeless
■ City of Pasadena



• 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%.

HEALTH

Chronic Health Condition



Mental Illness



Physical Disabilities



Developmental Disabilities



Substance Use Disorder



HIV/AIDS



Appendix A

Homeless Survey & Subpopulation Data

TOTAL HOMELESS POPULATION

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	NUMBER				PERCENT			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTAL								
Households	47	82	350	479	10	17	73	100
Persons	78	100	352	530	15	19	66	100
AGE								
Children (Under 18)	27	13	2	42	35	14	1	9
Youth (18-24)	7	3	32	42	9	3	10	8
Adults (25-61)	41	63	232	336	53	67	71	67
Seniors (62+)	3	15	60	78	4	16	18	16
Don't know/refused to answer	0	6	26	32				
SUBTOTAL	78	100	352	530	100	100	100	100
GENDER								
Female	33	47	94	186	58	51	27	36.3
Male	45	45	248	326	42	49	72	63.5
Transgender	0	0	1	1	0	0	0.3	0.3
Don't know/refused to answer	0	8	9	17				
SUBTOTAL	78	100	352	530	100	100	100	100
ETHNICITY								
Non-Hispanic/Non-Latino	49	55	249	353	64	61	80	74
Hispanic/Latino	28	35	64	127	36	39	20	26
Don't know/refused to answer	1	10	39	50				
SUBTOTAL	78	100	352	530	100	100	100	100
RACE								
White	39	59	131	229	55	65	48	53
Black or African American	27	28	118	173	38	31	43	40
Asian	0	0	3	3	0	0	1	1
American Indian or Alaska Native	1	3	2	6	1	3	1	1
Native Hawaiian or Other Pacific Islander	1	0	2	3	1	0	1	1
Multiple Races	3	1	17	21	4	1	6	5
Don't know/refused to answer	7	9	79	95				
SUBTOTAL	78	100	352	530	100	100	100	100
SURVEY								
Chronically Homeless	23	47	154	224	29	47	44	42
Chronic Health Conditions	16	42	98	156	21	42	28	29
HIV/AIDS	0	3	3	6	4	7	1	2
Physical Disabilities	10	38	91	139	13	38	26	26
Developmental Disabilities	6	17	48	71	8	17	14	13
Mental Illness	19	44	84	147	24	44	24	28
Substance Use Disorders	7	7	49	63	9	7	14	12
Veterans	4	9	31	44	5	9	9	8
Victims of Domestic Violence	12	35	102	149	15	35	29	28
Persons Released from Jail*			63				18	

*Not captured for sheltered population

HOMELESS VETERANS

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	NUMBER				PERCENT			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTAL								
Households	4	9	31	44	9	21	70	100
Persons	4	9	31	44	9	21	70	100
AGE								
Children (Under 18)	0	0	0	0	0	0	0	0
Youth (18-24)	0	0	0	0	0	0	0	0
Adults (25-61)	3	4	17	24	75	50	57	57
Seniors (62+)	1	4	13	18	25	50	43	43
Don't know/refused to answer	0	1	1	2				
SUBTOTAL	4	9	31	44	100	100	100	100
GENDER								
Female	0	0	3	3	0	0	10	7
Male	4	9	28	41	100	100	90	93
Transgender	0	0	0	0	0	0	0	0
Don't know/refused to answer	0	0	0	0				
SUBTOTAL	4	9	31	44	100	100	100	100
ETHNICITY								
Non-Hispanic/Non-Latino	4	3	30	37	100	60	97	92.5
Hispanic/Latino	0	2	1	3	0	40	3	7.5
Don't know/refused to answer	0	4	0	4				
SUBTOTAL	4	9	31	44	100	100	100	100
RACE								
White	2	9	18	29	50	100	67	73
Black or African American	2	0	9	11	50	0	33	28
Asian	0	0	0	0	0	0	0	0
American Indian or Alaska Native	0	0	0	0	0	0	0	0
Native Hawaiian or Other Pacific Islander	0	0	0	0	0	0	0	0
Multiple Races	0	0	0	0	0	0	0	0
Don't know/refused to answer	0	0	4	4				
SUBTOTAL	4	9	31	44	100	100	100	100
SURVEY								
Chronically Homeless	1	3	17	21	25	33	55	48
Chronic Health Conditions	1	4	13	18	25	44	42	41
HIV/AIDS	0	0	0	0	0	0	0	0
Physical Disabilities	2	3	13	18	59	33	42	41
Developmental Disabilities	0	0	4	4	0	0	13	9
Mental Illness	0	1	8	9	0	11	26	20
Substance Use Disorders	0	0	13	13	0	0	42	30
Victims of Domestic Violence	0	1	3	4	0	11	10	9
Persons Released from Jail*			4				13	

*Not captured for sheltered population

CHRONICALLY HOMELESS

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	NUMBER				PERCENT			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTAL								
Households	21	42	154	217	10	19	71	100
Families with Children	3	3	0	6	50	50	0	100
Persons	24	47	154	225	11	21	68	100
Persons in Families	5	8	0	13	38	62	0	100
Single Individuals	19	39	154	212	9	18	73	100
AGE								
Children (Under 18)	2	3	1	6	8	6	1	3
Youth (18-24)	1	1	9	11	4	2	6	5
Adults (25-61)	21	35	118	174	88	74	77	77
Seniors (62+)	0	8	26	34	0	17	17	15
Don't know/refused to answer	0	0	0	0				
SUBTOTAL	24	47	154	225	100	100	100	100
GENDER								
Female	5	22	52	79	21	48	34	35
Male	19	24	102	145	79	52	66	65
Transgender	0	0	0	0	0	0	0	0
Don't know/refused to answer	0	1	0	1				
SUBTOTAL	24	47	154	225	100	100	100	100
ETHNICITY								
Non-Hispanic/Non-Latino	19	32	126	177	79	73	82	80
Hispanic/Latino	5	12	28	45	21	27	18	20
Don't know/refused to answer	0	3	0	3				
SUBTOTAL	24	47	154	225	100	100	100	100
RACE								
White	15	24	62	101	63	52	49	52
Black or African American	8	18	48	74	33	39	38	38
Asian	0	0	1	1	0	0	1	1
American Indian or Alaska Native	1	3	1	5	4	7	1	3
Native Hawaiian or Other Pacific Islander	0	0	0	0	0	0	0	0
Multiple Races	0	1	14	15	0	2	11	8
Don't know/refused to answer	0	1	28	29				
SUBTOTAL	24	47	154	225	100	100	100	100
SURVEY								
Chronic Health Conditions	10	29	99	138	42	62	64	61
HIV/AIDS	0	1	1	2	0	2	1	1
Physical Disabilities	8	28	112	148	33	60	73	66
Developmental Disabilities	6	13	55	74	25	28	36	33
Mental Illness	14	26	68	108	58	55	44	48
Substance Use Disorders	2	11	45	58	8	23	29	26
Veterans	1	3	18	22	4	6	12	10
Victims of Domestic Violence	6	24	71	101	25	51	46	45
Persons Released from Jail*			32				21	

*Not captured for sheltered population

HOMELESS FAMILIES WITH CHILDREN

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	NUMBER				PERCENT			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTAL								
Households	14	11	1	26	54	42	4	100
Persons	45	29	3	77	58	38	4	100
AGE								
Children (Under 18)	27	13	1	41	60	57	33	59
Youth (18-24)	5	0	0	5	11	0	0	7
Adults (25-61)	12	10	2	24	27	43	67	34
Seniors (62+)	1	0	0	1	2	0	0	1
Don't know/refused to answer	0	6	0	6				
SUBTOTAL	45	29	3	77	100	100	100	100
GENDER								
Female	30	16	1	47	67	55	33	61
Male	15	13	2	30	33	45	67	39
Transgender	0	0	0	0	0	0	0	0
Don't know/refused to answer	0	0	0	0				
SUBTOTAL	45	29	3	77	100	100	100	100
ETHNICITY								
Non-Hispanic/Non-Latino	23	10	2	35	51	34	100	46
Hispanic/Latino	22	19	0	41	49	66	0	54
Don't know/refused to answer	0	0	1	1				
SUBTOTAL	45	29	3	77	100	100	100	100
RACE								
White	20	19	1	40	53	68	33	58
Black or African American	16	8	2	26	42	29	67	38
Asian	0	0	0	0	0	0	0	0
American Indian or Alaska Native	0	0	0	0	0	0	0	0
Native Hawaiian or Other Pacific Islander	0	0	0	0	0	0	0	0
Multiple Races	2	1	0	3	5	4	0	4
Don't know/refused to answer	7	1	0	8				
SUBTOTAL	45	29	3	77	100	100	100	100
SURVEY								
Chronically Homeless	6	0	0	6	13	0	0	8
Chronic Health Conditions	3	0	1	4	7	0	33	5
HIV/AIDS	0	0	0	0	0	0	0	0
Physical Disabilities	0	0	0	0	0	0	0	0
Developmental Disabilities	3	0	0	3	7	0	0	4
Mental Illness	5	0	0	5	11	0	0	6
Substance Use Disorders	3	0	0	3	7	0	0	4
Veterans	0	0	0	0	0	0	0	0
Victims of Domestic Violence	2	0	0	2	4	0	0	3
Persons Released from Jail*			0				0	

*Not captured for sheltered population



UNACCOMPANIED HOMELESS YOUTH

TH = Transitional Housing ES = Emergency Shelter U = Unsheltered

	NUMBER				PERCENT			
	TH	ES	U	TOTAL	TH	ES	U	TOTAL
TOTAL								
Households	2	3	33	38	5	8	87	100
Persons	2	3	33	38	5	8	87	100
AGE								
Children (Under 18)	0	0	1	1	0	0	3	3
Youth (18-24)	2	3	32	37	100	100	97	97
SUBTOTAL	2	3	33	38	100	100	100	100
GENDER								
Female	1	1	9	11	50	33	29	31
Male	1	2	22	25	50	67	71	69
Transgender	0	0	0	0	0	0	0	0
Don't know/refused to answer	0	0	2	2				
SUBTOTAL	2	3	33	36	100	100	100	100
ETHNICITY								
Non-Hispanic/Non-Latino	1	2	25	28	50	67	76	74
Hispanic/Latino	1	1	8	10	50	33	24	26
Don't know/refused to answer	0	0	0	0				
SUBTOTAL	2	3	33	38	100	100	100	100
RACE								
White	0	2	9	11	0	67	30	31
Black or African American	0	1	17	18	0	33	57	51
Asian	1	0	0	0	50	0	0	3
American Indian or Alaska Native	1	0	0	1	50	0	0	3
Native Hawaiian or Other Pacific Islander	0	0	4	4	0	0	0	0
Multiple Races	0	0	4	4	0	0	13	12
Don't know/refused to answer	0	0	3	3				
SUBTOTAL	1	2	33	36	100	100	100	100
SURVEY								
Chronically Homeless	0	0	10	10	0	0	30	26
Chronic Health Conditions	0	1	9	10	0	33	27	26
HIV/AIDS	0	0	0	0	0	0	0	0
Physical Disabilities	0	0	9	9	0	0	27	24
Developmental Disabilities	0	1	9	10	0	33	27	26
Mental Illness	0	1	8	9	0	33	24	24
Substance Use Disorders	0	0	8	8	0	0	24	21
Veterans	0	0	0	0	0	0	0	0
Victims of Domestic Violence	0	0	11	11	0	0	33	29
Persons Released from Jail*			11				33	

*Not captured for sheltered population

Appendix B

Survey Instrument

Your Name: _____
Date: _____

Pasadena 2016 Homeless Count

Zone: _____
Location: _____

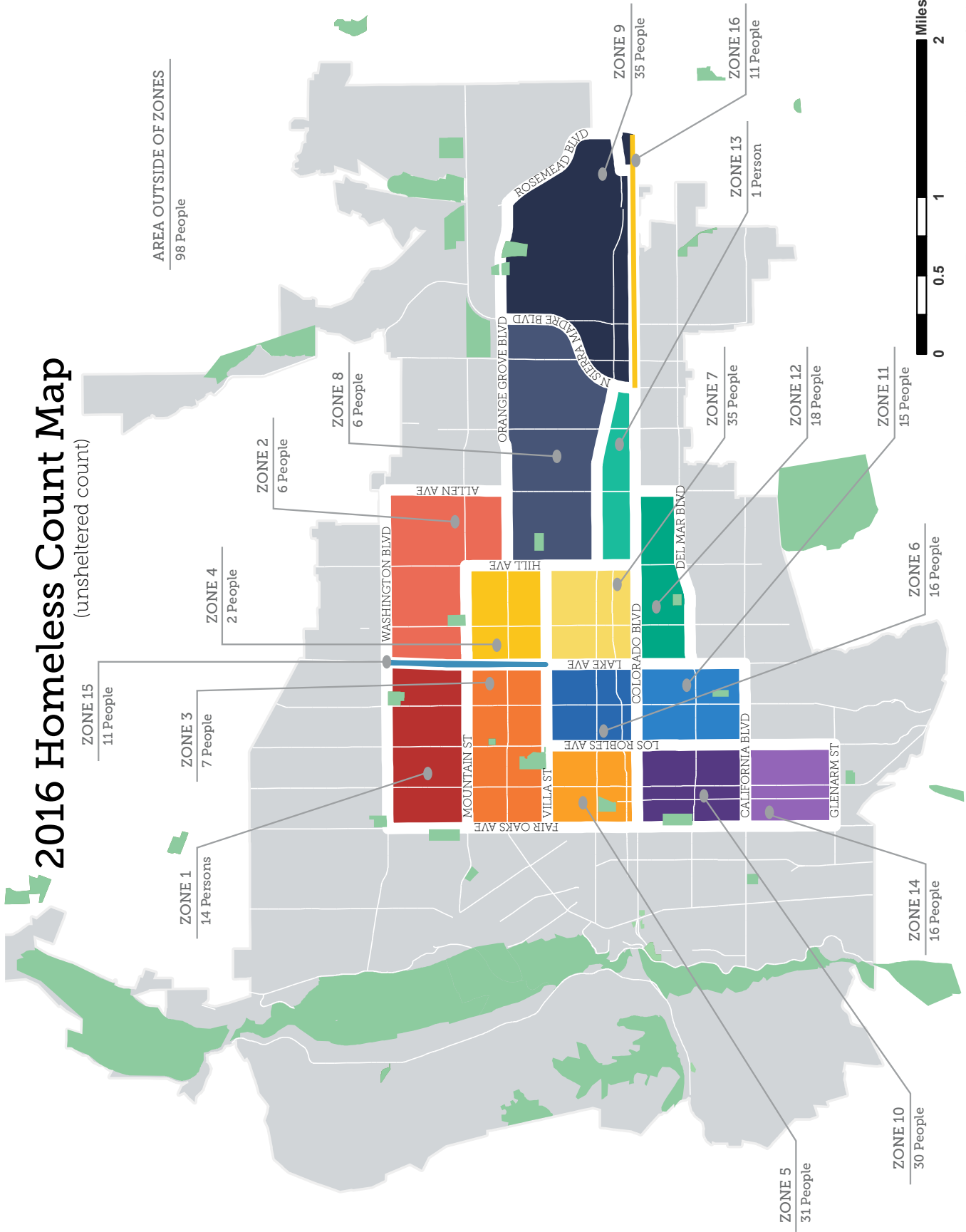
Questions: (NOTE: if person is sleeping or you feel unsafe complete gray shaded questions based on observation)	Person 1		Spouse/ Partner 2		Person 3		Spouse/ Partner 4		
	Y	N	Y	N	Y	N	Y	N	
1. Did you sleep outdoors in an abandoned building, park, tent, canopy, box, or vehicle last night? (note: do not count person if slept in a shelter or transitional housing)	Y	N	Y	N	Y	N	Y	N	
2. First initial of First Name Only									
3. First initial of Last Name Only									
4. Gender: M=Male; F=Female; T=Transgender	M	F	T	M	F	T	M	F	T
5. Are you Hispanic or Latino?	Y	N	Y	N	Y	N	Y	N	
6. What is Your Race (read race code at bottom of page)									
7. Age: record number for age group: 1=(under 18) 2=(18-24) 3=(25-39) 4=(40-49) 5=(50-61) 6=(62-69) 7=(70+)									
8. State Born (if born in another country abbreviate country)									
9. What city were you living in when you became homeless?									
10. Have you been living in a shelter and/or on the streets or in abandoned buildings for the past year or more?	Y	N	Y	N	Y	N	Y	N	
11. Have you stayed in a shelter or lived on the streets at least 4 separate times in last 3 years including now?	Y	N	Y	N	Y	N	Y	N	
12. If yes, was combined length of time 12 months or more?	Y	N	Y	N	Y	N	Y	N	
13. Do You Have a Permanent Physical Disability?	Y	N	Y	N	Y	N	Y	N	
14. Do You Have a Permanent Developmental Disability?	Y	N	Y	N	Y	N	Y	N	
15. Do You Have an On-going Drug or Alcohol Problem that limits your ability to live independently?	Y	N	Y	N	Y	N	Y	N	
16. If yes, has it continued for a long time or indefinitely?	Y	N	Y	N	Y	N	Y	N	
17. Do You Feel You Have a Serious Mental Health Problem that limits your ability to live independently?	Y	N	Y	N	Y	N	Y	N	
16. If yes, has it continued for a long time or indefinitely?	Y	N	Y	N	Y	N	Y	N	
19. Have a Chronic Health Condition such as Diabetes, Heart Trouble, High Blood Pressure, Seizures, Hepatitis, Respiratory Problems, Epilepsy, Tuberculosis, or Arthritis?	Y	N	Y	N	Y	N	Y	N	
20. If yes, has it continued for a long time or indefinitely & impede your ability to live independently?	Y	N	Y	N	Y	N	Y	N	
21. Has a healthcare provider ever told you that you ever had a traumatic injury to your brain?	Y	N	Y	N	Y	N	Y	N	
22. Ever Been Diagnosed w/AIDS or Tested Positive for HIV?	Y	N	Y	N	Y	N	Y	N	
23. Have you served on active duty in the U.S. Armed Forces or called into active duty in National Guard or a Reservist?	Y	N	Y	N	Y	N	Y	N	
24. Has a healthcare provider ever said you have Post-traumatic stress disorder (PTSD)?	Y	N	Y	N	Y	N	Y	N	
25. Ever Been a Victim of Intimate Partner/Domestic Violence?	Y	N	Y	N	Y	N	Y	N	
26. During the Last 12 Months, Were You Released from Jail or Prison After Serving a Court-Ordered Sentence?	Y	N	Y	N	Y	N	Y	N	
27. How much is your monthly income? 1=\$1,000 or less; 2=more than \$1,000-\$1,500; 3=more than \$1,500-\$2,000; 4=more than \$2,000-\$2,500; 5=more than \$2,500-\$3,000; 6=more than \$3,000-\$3,500; 7=more than \$3,500									
28. How many kids under Age 18 are living with you today?									
29. How many children are female?									
30. How many children are male?									
31. How many children are Hispanic or Latino?									
32. How many children are African American or Black?									
33. How many are American Indian or Alaskan Native?									
34. How many children are Asian or Pacific Islander?									
35. How many children are White?									
36. How many children are multiple races or other?									
Race: 1=African American or Black; 2=American Indian or Alaskan Native; 3=Asian; 4=Native Hawaiian or Pacific Islander; 5=White									
6=Multiple Races or Other; 7=don't know; and 8=refused to answer									

Appendix C

Map of Results

2016 Homeless Count Map

(unsheltered count)



The maps and associated data are provided without warranty of any kind. Any resale of this information is prohibited. Copyright 2016, City of Pasadena.