



Alameda County

HOMELESS COUNT & SURVEY

COMPREHENSIVE REPORT

2019



APPLIED SURVEY RESEARCH

Applied Survey Research (ASR) is a social research firm dedicated to helping people build better communities by collecting meaningful data, facilitating information based planning, and developing custom strategies. The firm was founded on the principle that community improvement, initiative sustainability, and program success are closely tied to assessment needs, evaluation of community goals, and development of appropriate responses.

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EVERYONE HOME

EveryOne Home is leading the collective effort to end homelessness in Alameda County. We're building momentum, using data to improve our efforts and aligning resources for long-term solutions. By emphasizing an efficient regional response, EveryOne Home envisions that by 2023, no person will need to sleep on the street because they have a place to call home.

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ASPIRE CONSULTING LLC

Aspire Consulting LLC empowers communities to refine its programs and housing crisis response system to be housing-focused, oriented to outcomes, effective, efficient, and well-coordinated. Focal points of Aspire Consulting LLC's work include: training and project management for measuring and improving outcomes; staff training, retreats, and learning collaboratives to align organizational culture and practices toward housing first, low barrier approaches; planning and launching coordinated entry systems; optimizing rapid rehousing services; and training diverse community stakeholders about the cultural shift to be more permanent housing and outcome-focused. Aspire Consulting LLC also has many years of experience in Point-in-Time Counts, Homeless Management Information Systems, Homeless and Caring Court, and 100 Day Challenge performance improvement initiatives. Kathie Barkow is the founder and principal consultant of Aspire Consulting LLC.

ALAMEDA COUNTY HOUSING AND COMMUNITY DEVELOPMENT DEPARTMENT

Trevor Mells, HMIS Team Lead



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Acknowledgments

The *EveryOne Counts! 2019 Homeless Count and Survey* planning team, consisting of EveryOne Home, ASR, and Aspire Consulting LLC, would like to thank the many individuals and organizations for their time and commitment to this project. This year, recruitment and training efforts yielded an extraordinary community response, resulting in a 68% increase in volunteer and guide participation over the last biennial count in 2017. There were 164 trained guides with current and past experience of homelessness and 489 volunteers from many segments of our communities who, together, canvassed all of Alameda County's census tracts during the early morning hours of January 30, 2019. We would like to express our deep gratitude to the teams of guides and surveyors with lived experience of homelessness, including youth, for their outstanding fieldwork and invaluable insight in ensuring the accuracy of the count, and for sharing their first-hand knowledge of encampments, communities living in vehicles, and locations where unsheltered youth reside.

As in 2017, our non-profit partners, city and county employees, and local law enforcement teams assisted with many aspects of the Point-in-Time Count, including planning meetings; conducting a pre-count survey of people living in tents and vehicles; offering special outreach on count day; supporting the youth count; and assisting us in successfully implementing the housing survey on the streets and in shelters and transitional housing programs.

In addition, hundreds of incredible community members answered the call to volunteer in the early hours of the morning. These volunteers were partnered with guides to methodically cover their assigned census tracts, conduct the visual tally, and submit their results. Thank you to each volunteer for showing up and getting this work done to measure our efforts.

EveryOne Home and the Alameda County Continuum of Care (CoC) provided oversight for the *EveryOne Counts! 2019 Homeless Count and Survey*. We thank the members of the HUD Continuum of Care Committee for their input and guidance. We are also very grateful to the jurisdictional partners who worked closely with our team to ensure communities were well represented in the planning efforts and data collection activities.

Trevor Mells of Alameda County Housing and Community Development Department led the sheltered count, collecting the HUD-required data from agencies that utilize the countywide Homeless Management Information System as well as those that do not.

Special thanks to the following programs, jurisdictions, and individuals, who went above and beyond in providing support, resulting in the critical success of *EveryOne Counts! 2019*:

TRAINING AND DEPLOYMENT SITES

- Allen Temple Baptist Church
- Asbury United Methodist Church
- City of Hayward
- City of Livermore
- First Congregational Church of Berkeley
- Oakland City Hall
- St. Vincent de Paul Community Center
- Covenant House Oakland
- Youth Uprising

PRE-COUNT OF VEHICLES AND TENTS

- Berkeley Food & Housing Project
- Building Futures
- CAREavan, City of Union City
- City of Alameda
- City of Fremont
- CityServe of the Tri-Valley
- Downtown Streets Team, Hayward
- Operation Dignity
- ROOTS Clinic

GUIDE RECRUITMENT AND SUPPORT

- Abode Services
- Bay Area Community Services – STAIR Center, Berkeley, and Oakland Community Cabins
- Bananas Inc.
- Building Futures
- CAREavan, City of Union City
- CityServe of the Tri-Valley
- Consumer Advisory Board, Alameda County Health Care for the Homeless
- Downtown Streets Team – Hayward, Berkeley, and Oakland
- Homeless Action Center
- Housing Consortium of the East Bay
- Joe Camarillo, City of San Leandro Police Department
- Lava Mae Oakland
- Operation Dignity – Oakland Community Cabins
- Parent Voices Oakland
- Peter Radu, Health, Housing & Community Services Department, City of Berkeley
- Talia Rubin, Community Housing Services Division, City of Oakland
- Candice Elder, The East Oakland Collective
- UC Berkeley Outreach Team

SPECIAL OUTREACH TEAMS

- Alameda County Health Care for the Homeless
- Berkeley Food & Housing Project Outreach Team
- Building Futures' Outreach Team
- City of Dublin
- City of Emeryville
- City of Livermore Police Department
- City of Oakland
- City of Pleasanton
- City of Alameda
- ROOTS Clinic
- The East Oakland Collective
- San Leandro Police Department
- Veteran Affairs' Outreach Team

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- Kevin Coleman, Covenant House Oakland
- Laurie Flores, City of Fremont
- Ola Colemon, East Oakland Community Project
- Omar Rascón, Alameda County Health Care for the Homeless
- Terry Kalahar, Homeless Action Center

YOUTH COUNT

- Beyond Emancipation
- C'Mone Falls, Alameda County Social Services Agency
- Colette (Coco) Auerswald, UC Berkeley School of Public Health
- Covenant House Oakland
- Ja'nai Aubry, Family Violence Law Center
- Jasmine Gonzalez, Our Kids
- Jessica Blakemore, ALL IN Alameda County/Interagency Children's Policy Council
- Julie Hadnot, ALL IN Alameda County/Interagency Children's Policy Council
- MISSEY
- REACH Ashland Youth Center
- UC Berkeley Suitcase Clinic
- VOICES Youth Center
- YEAH! Covenant House
- Youth Action Board
- Youth Uprising

Special acknowledgement to Lateefah Simmon, BART Board of Directors for District 7, Karen Bastin, BART Customer Services Manager, and Todd Morgan, BART Assistant Treasurer, for facilitating the procurement of \$5 BART cards used as Youth Count and survey incentives.

SHELTERED COUNT

- 24 Hour Oakland Parent / Teacher Children's Center
- A Safe Place
- Abode Services
- Bay Area Community Services
- Berkeley Food & Housing Project (BFHP)
- Building Futures
- Building Opportunities for Self-Sufficiency (BOSS)
- City of Fremont Winter Shelter
- CityTeam International
- Covenant House Oakland
- Dream Catcher Covenant House
- Dorothy Day House
- East Oakland Community Project (EOCP)
- Family Emergency Shelter Coalition (FESCO)
- Livermore Homeless Refuge
- Oakland Catholic Worker
- Operation Dignity
- Ruby's Place
- Safe Alternatives to Violent Environments (SAVE)
- Salvation Army
- Second Chance
- Shepherd's Gate
- St. Mary's Center
- St. Vincent de Paul
- Tri-Valley Haven
- YEAH! Covenant House

TRANSITIONAL HOUSING PROGRAMS

- Abode Services
- Berkeley Food and Housing Project (BFHP)
- Building Opportunities for Self-Sufficiency (BOSS)
- City of Oakland/Bay Area Community Services (BACS)
- Covenant House Oakland
- East Oakland Community Project (EOCP)
- FESCO Family Emergency Shelter Coalition
- First Place for Youth
- Fred Finch Youth Center (FFYC)
- Oakland Elizabeth House
- Operation Dignity
- Shepherd's Gate
- Women's Daytime Drop-In Center

SURVEY TRANSLATION

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- Hada Gonzalez, Eden I&R
- Jasmine Gonzalez
- Sandra Noorzoy, Eden I&R



Introduction

Every two years, during the last ten days of January, communities across the country conduct comprehensive counts of the local population experiencing homelessness in order to measure the prevalence of homelessness in each community.

The Point-in-Time Count is required by the U.S. Department of Housing and Urban Development (HUD), but more importantly also informs local strategic planning, investment, capacity building, and advocacy campaigns to prevent and end homelessness.

The Alameda County Continuum of Care worked in conjunction with ASR to conduct the *EveryOne Counts! 2019 Homeless Count and Survey*. ASR is a social research firm with extensive experience in homeless enumeration and needs assessment that has worked with Alameda County on the *EveryOne Counts! Homeless Count and Survey* since 2017.

In order for the *EveryOne Counts! 2019 Homeless Count and Survey* to best reflect the experience and expertise of the community, EveryOne Home held planning meetings with local community members, including people with lived experience of homelessness, city and county departments, community-based service providers, and other interested stakeholders. These partners were instrumental to ensuring the *EveryOne Counts! 2019 Homeless Count and Survey* reflected the needs and concerns of the community while accomplishing several important project goals:

- To preserve current federal funding for homeless services and to enhance the ability to raise new funds;
- To measure changes in the numbers and characteristics of the homeless population since the EveryOne Counts! 2017 Homeless Count and Survey, and to track progress toward ending homelessness;
- To improve the ability of policy makers and service providers to plan and implement services that meet the needs of the local population experiencing homelessness;
- To increase public awareness of overall homeless issues and generate support for constructive solutions; and
- To assess the status of specific subpopulations, including veterans, families, unaccompanied children, transition-age youth, and those experiencing chronic homelessness.

The *EveryOne Counts! 2019 Homeless Count and Survey* consisted of four primary components: (1) the general street count, an observation-based enumeration of unsheltered persons between the hours of approximately 5:00 a.m. and 10:00 a.m.; (2) the youth count, a targeted enumeration of unsheltered youth under the age of 24 between the hours of approximately 2:30 p.m. and 7:30 p.m.; (3) the sheltered count, an enumeration of persons residing in emergency shelter, safe haven, and transitional housing facilities the night before the general street count; and (4) the survey, an in-person survey of a randomized sample of unsheltered and sheltered persons conducted by trained peer surveyors and program staff in the weeks following the general street count.

On January 30, 2019, every census tract in Alameda County was covered with the support of 164 individuals with lived experience of homelessness and 489 community volunteers, staff from various city and county departments, and law enforcement. This resulted in a peer-informed visual count of individuals and families residing on the streets and in vehicles, makeshift shelters, encampments, and other places not meant for human habitation. Emergency shelter, safe haven, and transitional housing facilities also reported the number of individuals and families who occupied their facilities on the night prior to the morning of the count.

A specialized count of unaccompanied children and transition-age youth under the age of 25 was conducted on the same day. This dedicated count was designed to improve the understanding of the scope of youth homelessness. Trained youth enumerators who currently or recently experienced homelessness conducted the count in specific areas where young people experiencing homelessness were known to congregate. The dedicated youth count methodology was improved in 2019 to screen for age and to better ensure unaccompanied children and transition-age youth were not included in both the general street count and youth count.

In the weeks following the street count, an in-depth survey was administered to a sample of 1,681 unsheltered and sheltered individuals and families experiencing homelessness. The survey gathered basic demographic details as well as information on residency, housing history, personal characteristics, and intersections with the service system.

This report provides data regarding the number and characteristics of people experiencing homelessness in Alameda County on a single night, January 29, 2019. Special attention is given to specific subpopulations defined by HUD, including persons experiencing chronic homelessness, veterans, families, unaccompanied children under the age of 18, and transition-age youth between the ages of 18 and 24. This report is intended to assist service providers, policy makers, funders, and local, state, and federal governments in gaining a better understanding of the population currently experiencing homelessness, measuring the impact of current policies and programming, and planning for the future.

To better understand the dynamics of homelessness over time, results from the previous count in 2017 are provided where available and applicable.

FEDERAL DEFINITION OF HOMELESSNESS FOR POINT-IN-TIME COUNTS

In this study, the HUD definition of homelessness for the Point-in-Time Count is used. This definition includes individuals and families:

- Living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement; or
- 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.

For more information regarding the count and dedicated youth count, de-duplication, and project methodology, please see *Appendix A: Methodology*.

Alameda County

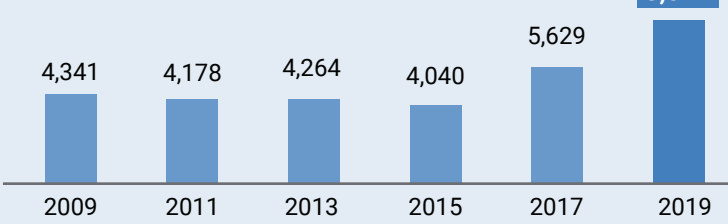
2019 EveryOne Counts

Homeless Point-in-Time Count & Survey

Every two years, during the last 10 days of January, communities across the country conduct comprehensive counts of people experiencing homelessness in order to measure the prevalence of homelessness in each local community.

The 2019 Alameda County EveryOne Home Point-in-Time Count was a community-wide effort conducted on January 30th, 2019. In the weeks following the street count, a survey was administered to **1,681** unsheltered and sheltered individuals experiencing homelessness in order to profile their experience and characteristics.

Homeless Census Population

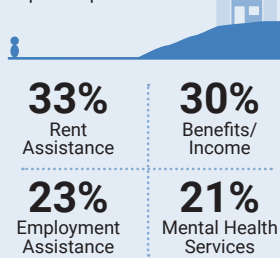


Sheltered/ Unsheltered Population



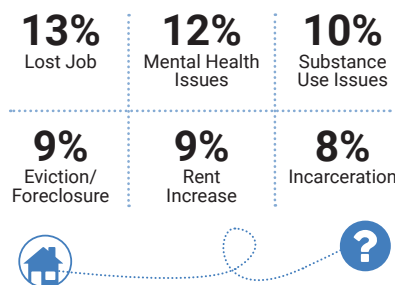
What Might Have Prevented Homelessness

Top 4 Responses



Primary Causes of Homelessness

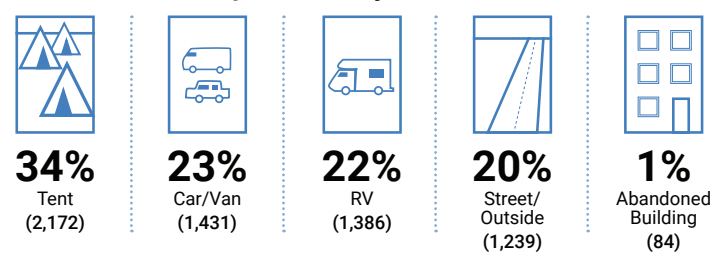
Top 6 Responses



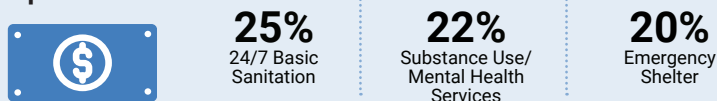
Sheltered/Unsheltered Population by City



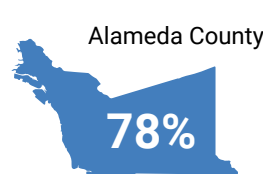
Unsheltered Population by Location



How New Money Should Be Spent



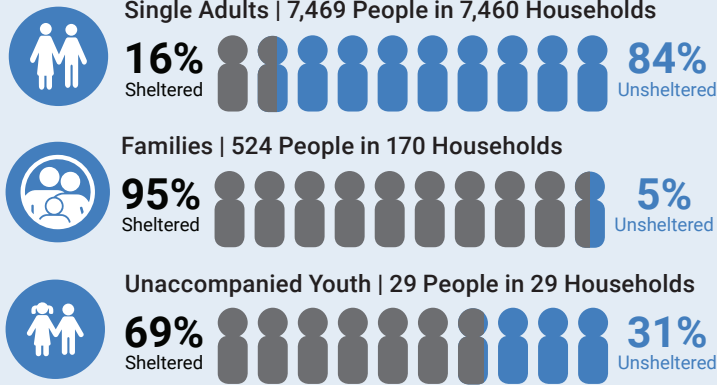
Residence Prior to Homelessness



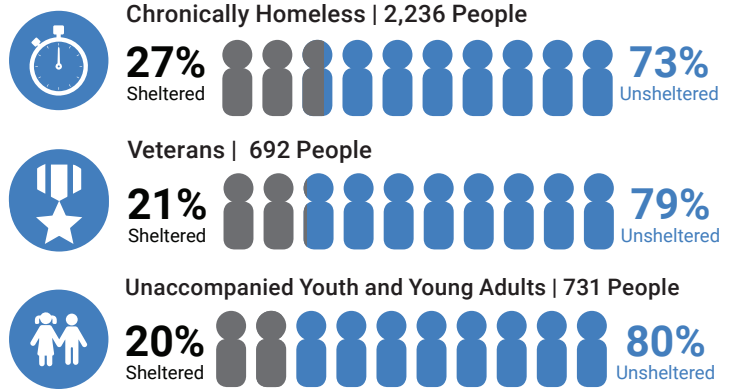
Length of Time in Alameda County



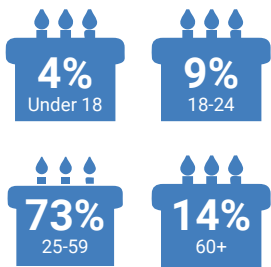
Household Breakdown



Subpopulations



Age

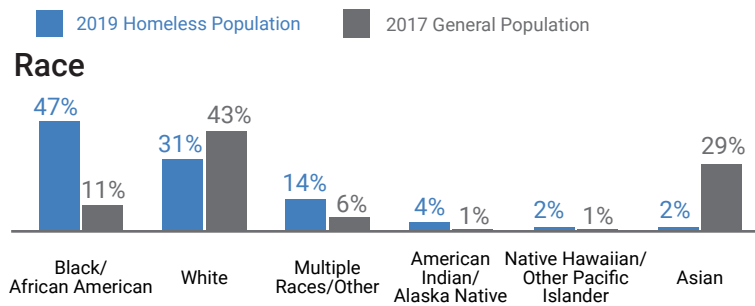


LGBTQ+ Status

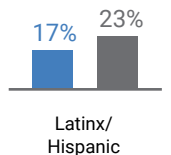
14% of survey respondents identified as LGBTQ+.



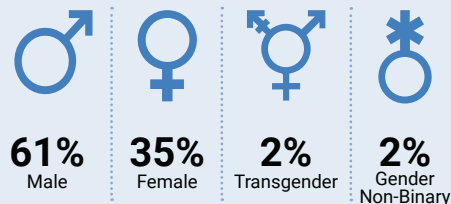
Race and Ethnicity Compared to General Population



Ethnicity



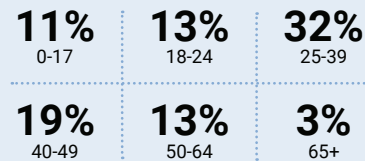
Gender



First Episode of Homelessness



Age at First Episode of Homelessness



Not Interested in Housing

3% of survey respondents said they were not interested in Independent, Affordable Rental Housing or Housing with Supportive Services.

Health Conditions⁺

Current health conditions reported by survey respondents.



39%
Psychiatric/Emotional Conditions



30%
Alcohol & Drug Use



30%
Post-Traumatic Stress Disorder



26%
Chronic Health Problems



24%
Physical Disability



13%
Traumatic Brain Injury



5%
HIV/AIDS Related Illness

Disabling Conditions

42% of survey respondents reported having at least one disabling condition.



A disabling condition is defined by HUD as a developmental disability, HIV/AIDS, or a long-term physical or mental impairment that impacts a person's ability to live independently, but could be improved with stable housing.

Point-in-Time Count: Key Data Findings

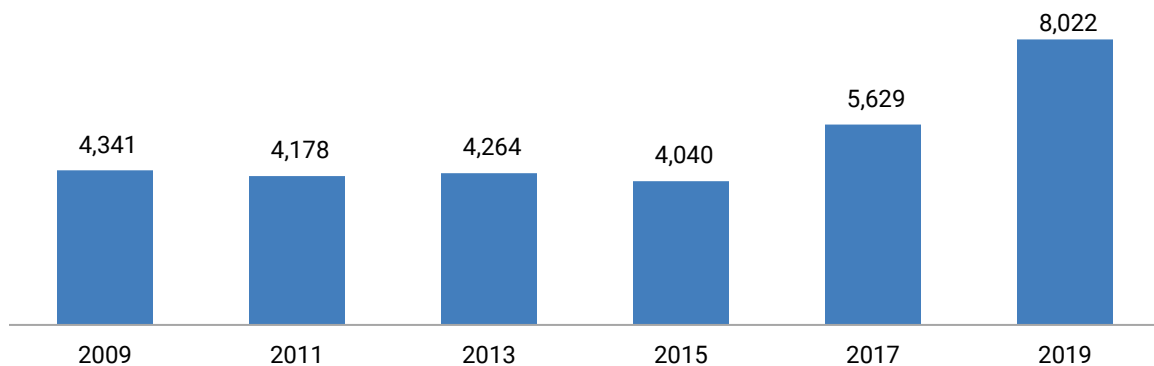
The *EveryOne Counts! 2019 Homeless Count and Survey* includes a complete enumeration of all people who were unsheltered and people who were residing in a publicly or privately funded emergency shelter, safe haven, or transitional housing facilities. The general street count was conducted on January 30, 2019 from approximately 5:00 a.m. to 10:00 a.m. The weather was seasonally normal with no rain. The shelter count was conducted on the previous evening and included all individuals staying in emergency shelter, winter shelter, safe haven, and transitional housing facilities. The general street count and shelter count methodologies were similar to those used in 2017, with some improvements.

NUMBER AND CHARACTERISTICS OF PERSONS EXPERIENCING HOMELESSNESS IN ALAMEDA COUNTY

TOTAL POPULATION AND TREND DATA

A total of 8,022 individuals experiencing homelessness were counted on January 30, 2019, an increase of 2,393 individuals (+43%) from 2017.

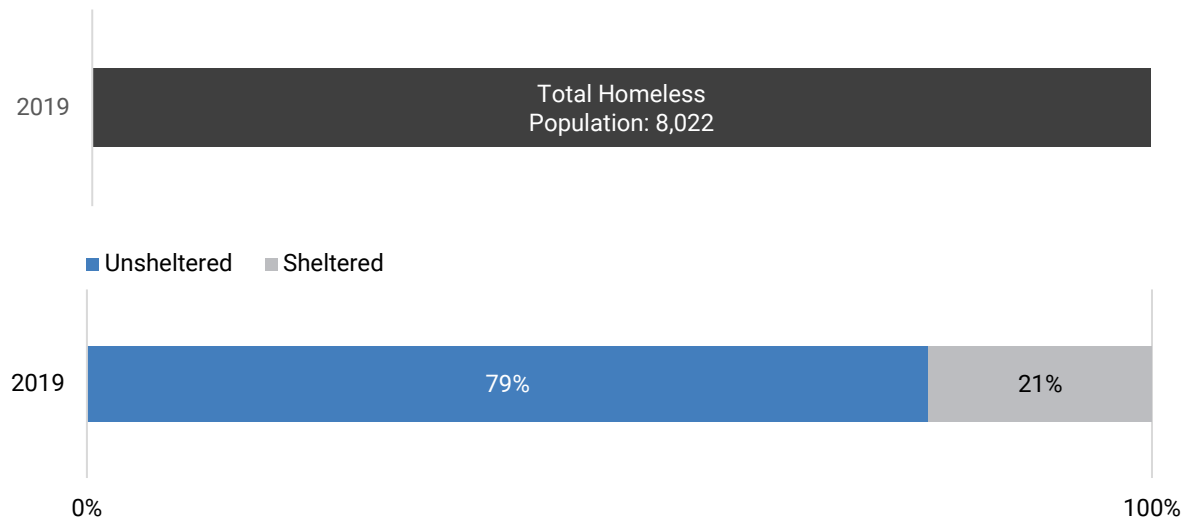
FIGURE 1. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS IN ALAMEDA COUNTY DURING THE POINT-IN-TIME COUNT



SHELTERED AND UNSHELTERED STATUS

While the number of individuals served by shelters decreased slightly (-3%) between 2017 and 2019, there was an increase of 2,449 unsheltered individuals (+63%). In 2019, 79% of the people experiencing homelessness in Alameda County were unsheltered compared to 69% in 2017.

FIGURE 2. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS BY SHELTER STATUS

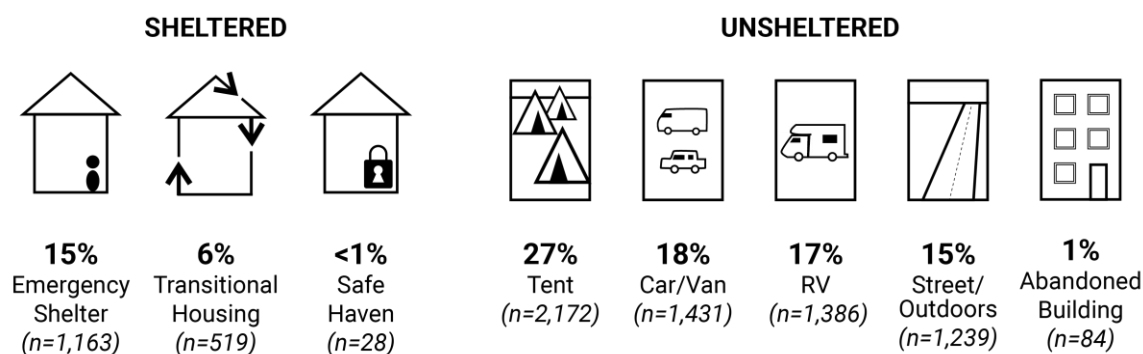


	2009	2011	2013	2015	2017	2019
Sheltered	2,800	2,106	1,927	1,643	1,766	1,710
Unsheltered	1,541	2,072	2,337	2,397	3,863	6,312
Total	4,341	4,178	4,264	4,040	5,629	8,022

Over one-third (35%) of the population were residing in vehicles. An additional 27% were residing in tents or makeshift shelters and 15% were identified sleeping on the streets and in other outdoor locations. One percent (1%) were identified in non-residential buildings.

Since 2017, the total number of individuals living in unsheltered locations increased by 63% (2,449 individuals). While the number of individuals sleeping on the streets and other outdoor locations decreased by 21% (331 individuals), the number of individuals sleeping in tents increased by 162% (1,342 individuals). The total number of persons residing in their vehicles increased by 124% (1,558 individuals), with the number of persons residing in RVs increasing by 146% (823 individuals) and the number of persons residing in cars or vans increasing by 106% (735 individuals).

FIGURE 3. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS BY LOCATION



HOUSEHOLD STATUS AND AGE

Persons in families with at least one adult and one child under age 18 represented approximately 7% of the overall population experiencing homelessness in Alameda County, a notable decrease (-26%) over 2017. Most persons in families (95%) were enumerated in county shelters and transitional housing programs.

Ninety-three percent (93%) of the population experiencing homelessness were single individuals. Eighty-four percent (84%) of single individuals were unsheltered.

FIGURE 4. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS BY HOUSEHOLD TYPE, AGE, AND SHELTER STATUS

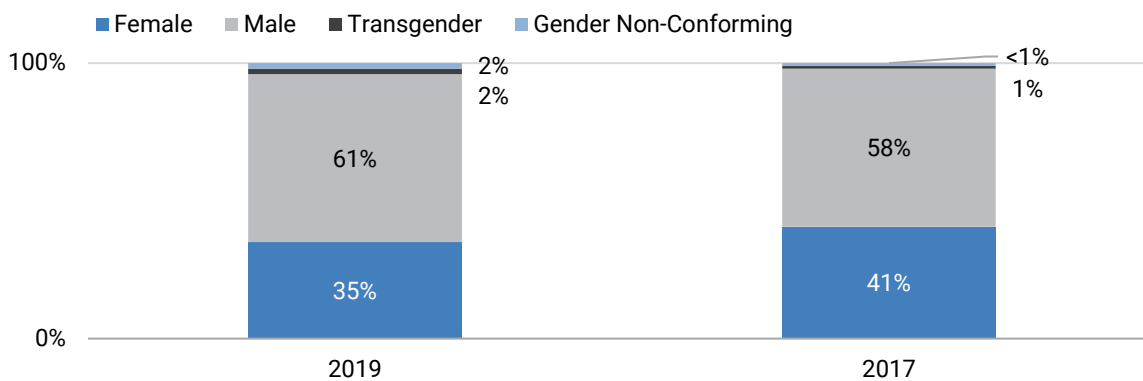
POPULATION	UNSHELTERED	SHELTERED	TOTAL	TOTAL PERCENT
Persons in Families with Children	27	497	524	7%
Children under 18	14	286	300	4%
Youth 18-24	1	34	35	<1%
Adults 25+	12	177	189	2%
Single Individuals	6,285	1,213	7,498	93%
Children under 18	9	20	29	<1%
Youth 18-24	579	139	718	9%
Adults 25+	5,697	1,054	6,751	84%

Note: Single Individuals include couples without children and unaccompanied children and youth without a parent or guardian.

HOUSEHOLD STATUS AND GENDER

Overall, 61% of the population experiencing homelessness in Alameda County identified as male, 35% as female, 2% as transgender, and 2% as gender non-conforming.

FIGURE 5. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS BY GENDER



2019 n= 8,022; 2017 n= 5,629

Gender varied by household type. Sixty-three percent (63%) of single individuals identified as male, while 64% of people in families, including children, identified as female.

FIGURE 6. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS BY HOUSEHOLD TYPE, GENDER, AND SHELTER STATUS

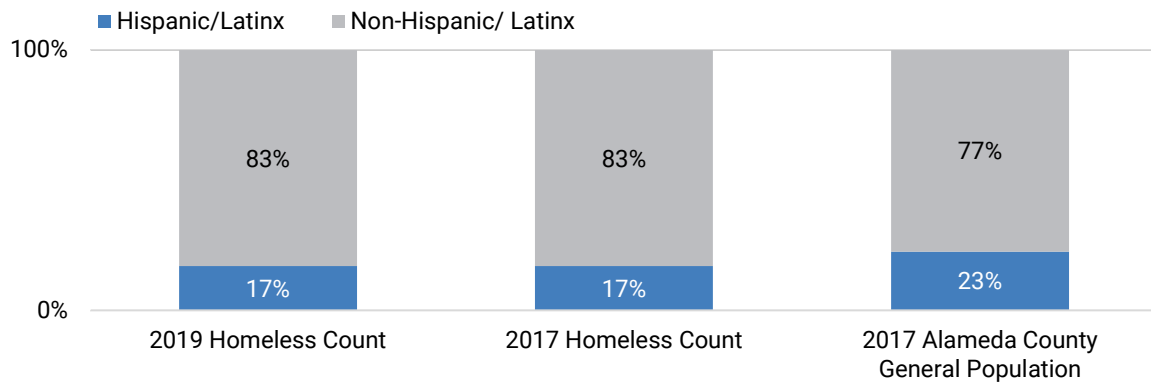
POPULATION	UNSHELTERED	SHELTERED	TOTAL	TOTAL PERCENT
Persons in Families	27	497	524	7%
Male	11	177	188	2%
Female	16	320	336	4%
Transgender	0	0	0	0%
Gender Non-Conforming	0	0	0	0%
Single Individuals	6,285	1,213	7,498	93%
Male	3,937	785	4,728	59%
Female	2,076	417	2,493	31%
Transgender	114	8	122	2%
Gender Non-Conforming	158	3	161	2%

Note: Single Individuals include couples without children and unaccompanied children and youth without a parent or guardian.

ETHNICITY AND RACE

The U.S. Census Bureau as well as HUD report race and ethnicity separately. In 2019, 17% of individuals experiencing homelessness identified as Hispanic/Latinx.

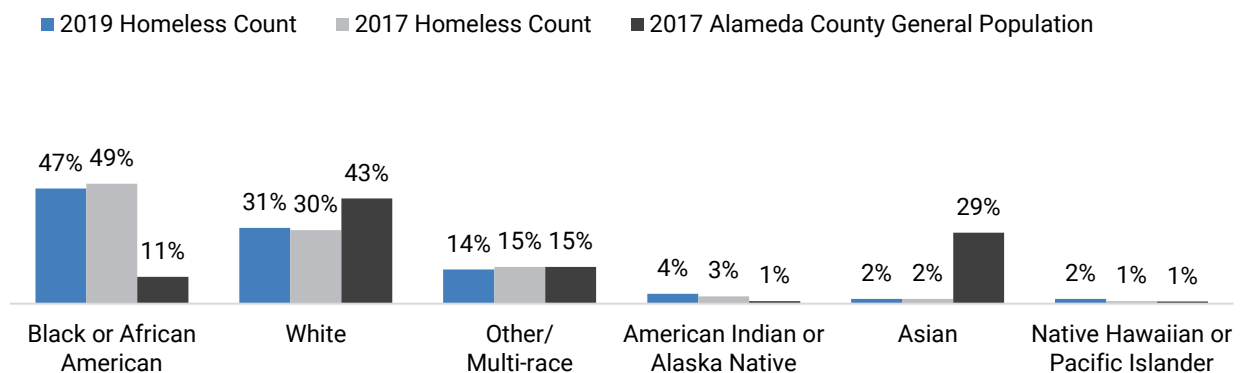
FIGURE 7. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS BY HISPANIC/LATINX ETHNICITY



2019 Homeless Count n=8,022; 2017 Homeless Count n=5,629; 2017 General Population n=1,629,615

Individuals identifying as Black/African American were overrepresented in the population experiencing homelessness. An estimated 47% of persons experiencing homelessness identified as Black/African American compared to 11% of the county’s overall population. Alternatively, 2% of those counted identified as Asian compared to 29% of the general population.

FIGURE 8. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS BY RACE



2019 Homeless Count n=8,022; 2017 Homeless Count n=5,629; 2017 General Population n=1,629,615

Note: Percentages may not add up to 100 due to rounding.

GEOGRAPHIC DISTRIBUTION

Similar to 2017, the population of individuals experiencing homelessness in Alameda County was concentrated in the urban centers. Over half (51%) were enumerated in Oakland, followed by 14% in Berkeley. Eight percent (8%) of those experiencing homelessness were located in Fremont and 6% were in Hayward.

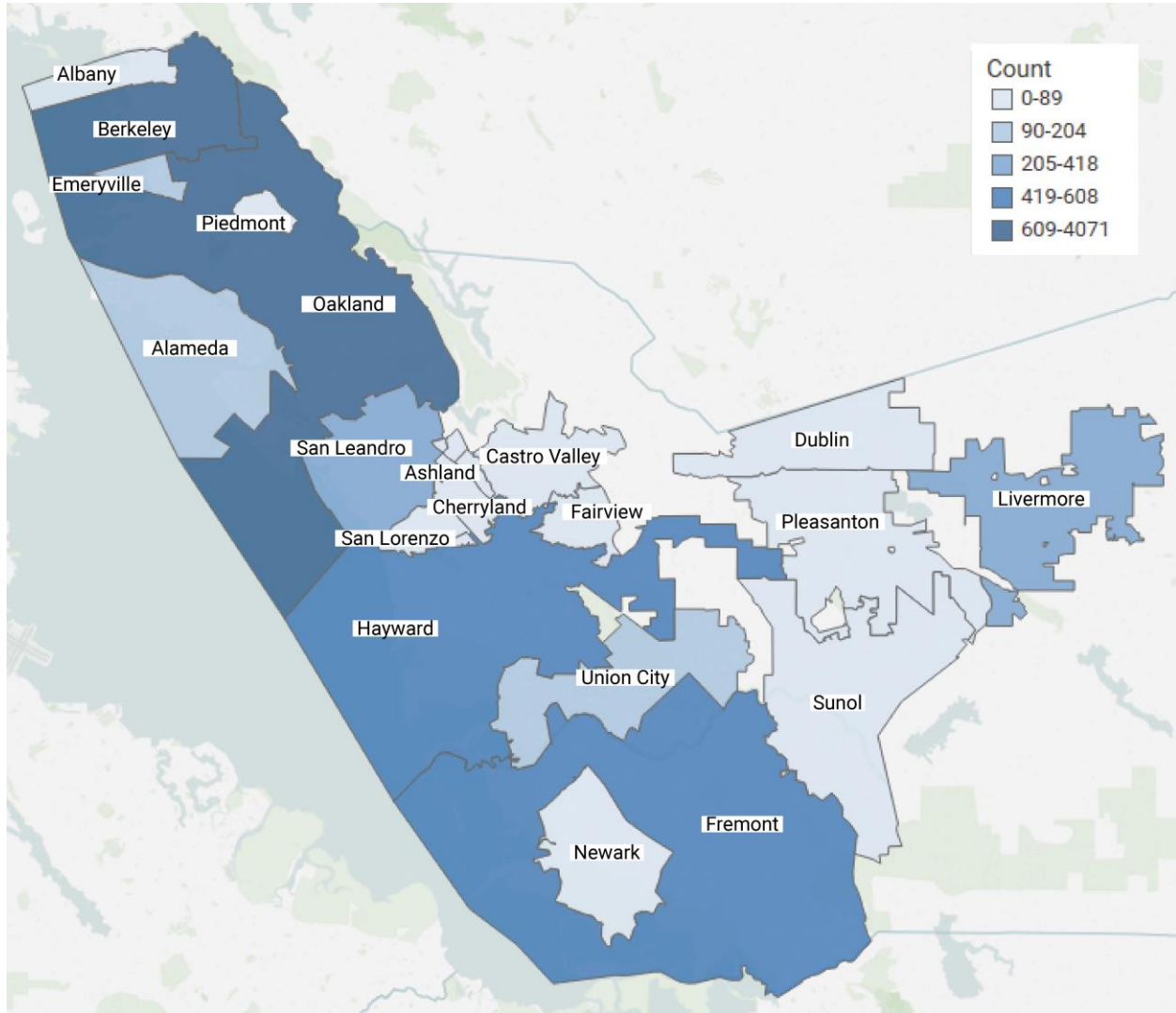
With the exception of Albany and Piedmont, increases in the number of unsheltered individuals experiencing homelessness were observed in every jurisdiction within Alameda County.

FIGURE 9. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS BY JURISDICTION AND SHELTER STATUS

Jurisdiction	2017			2019		
	Sheltered	Unsheltered	Total	Sheltered	Unsheltered	Total
Alameda	94	110	204	99	132	231
Albany	0	66	66	0	35	35
Berkeley	308	664	972	295	813	1,108
Dublin	0	21	21	0	8	8
Emeryville	0	29	29	0	178	178
Fremont	197	282	479	123	485	608
Hayward	84	313	397	115	372	487
Livermore	102	141	243	85	179	264
Newark	42	28	70	30	59	89
Oakland	859	1,902	2,761	861	3,210	4,071
Piedmont	0	0	0	0	0	0
Pleasanton	0	18	18	0	70	70
San Leandro	54	55	109	74	344	418
Union City	0	40	40	0	106	106
Unincorporated	26	194	220	28	321	349
Total	1,766	3,863	5,629	1,710	6,312	8,022

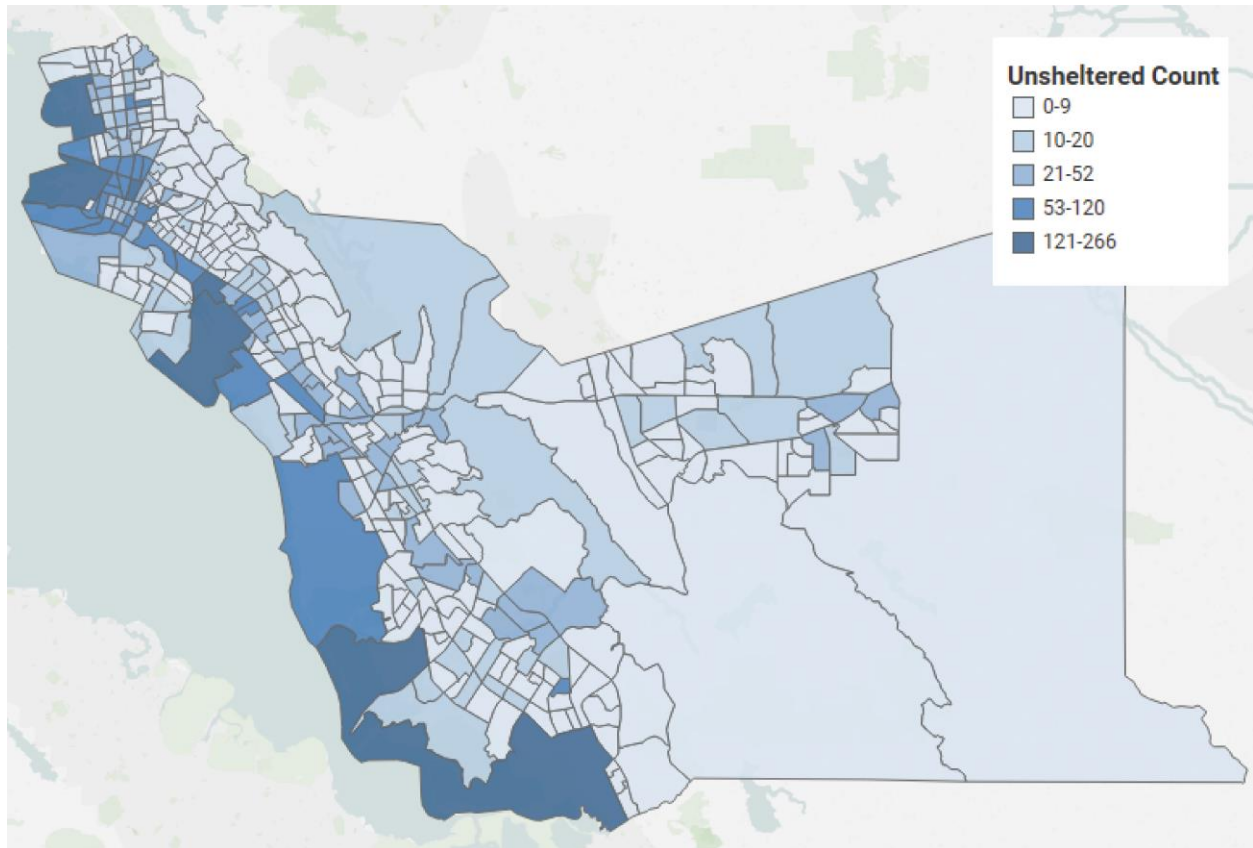
The following map of the Point-in-Time Count population illustrates the jurisdictions with the highest density of individuals experiencing homelessness.

FIGURE 10. TOTAL NUMBER OF PERSONS EXPERIENCING HOMELESSNESS BY JURISDICTION



On January 30, 2019, volunteers and guides were assigned to count every census tract in Alameda County on to ensure full coverage. Census tract level data provides a more nuanced understanding of where individuals were located on the morning of the count.

FIGURE 11. TOTAL NUMBER OF UNSHELTERED PERSONS BY CENSUS TRACT



SUBPOPULATIONS

Home, Together: The Federal Strategic Plan to Prevent and End Homelessness outlines national objectives and evaluative measures for ending homelessness in the United States. To adequately address the diversity within the population experiencing homelessness, the federal government identifies four subpopulations with particular challenges or needs. Consequently, these subpopulations represent important reportable indicators for measuring local progress toward ending homelessness. Additional detail on families, unaccompanied children and transition-age youth, veterans, chronically homeless, and veteran populations are provided in the *Subpopulation* section of this report.

REPORTED SUBPOPULATIONS

Unaccompanied children and transition-age youth represented 9% of the overall population in 2019, a decrease from 18% in 2017. This decrease may be attributed, in part, to a shift in the methodology used to estimate the number of unaccompanied children and transition-age youth experiencing homelessness as well as the challenges in enumerating this population. Please reference *Appendix A* for more information. Additionally, please note that unaccompanied children and transition-age youth may also be referred to as unaccompanied youth and young adults.

In 2019, 7% of the overall population experiencing homelessness were persons in families with children under the age of 18 (524 individuals). This was a decrease from 2017, when families represented 13% of the population (711 individuals). This may be due in part to challenges in enumerating unsheltered families; for more information about limitations of methodology, please reference *Appendix A*.

Twenty-eight percent (28%) of the population were identified as chronically homeless in 2019, similar to the 29% in 2017. Nine percent (9%) of the population were identified as veterans; while this was consistent with the percentage of the population identified as veterans in 2017, the number of veterans increased by a total of 161 individuals.

Adults with serious mental illness comprised nearly one-third (32%) of the population in 2019 compared to 29% in 2017. The percentage of adults living with HIV/AIDS remained consistent with prior years (3%).

FIGURE 12. FEDERALLY REPORTED SUBPOPULATIONS

	2015		2017		2019	
	#	%	#	%	#	%
Persons in Families with Children	985	24%	711	13%	524	7%
Unaccompanied Youth and Young Adults	299	7%	991	18%	731	9%
Chronically Homeless	689	17%	1,652	29%	2,236	28%
Veterans	388	10%	531	9%	692	9%
Adults with Serious Mental Illness	714	18%	1,622	29%	2,590	32%
Adults with HIV/AIDS	68	2%	157	3%	207	3%
Total Homeless Population	4,040		5,629		8,022	



Survey Findings

This section provides an overview of the findings generated from the survey component of the *EveryOne Counts! 2019 Homeless County and Survey*. Surveys were administered to a randomized sample of homeless individuals between February 1 and 28, 2019. This effort resulted in 1,681 complete and unique surveys.

Based on a Point-in-Time Count of 8,022 homeless persons, with a randomized survey sampling process, these 1,681 valid surveys represent a confidence interval of +/- 2% with a 95% confidence level when generalizing the results of the survey to the entire estimated population of individuals experiencing homelessness in Alameda County. In other words, if the survey were conducted again, we can be 95% certain that the results would be within two percentage points of the current results.

In order to respect respondent privacy and to ensure the safety and comfort of those who participated, respondents were not required to complete all survey questions. Missing values were intentionally omitted from the survey results. Therefore, the total number of respondents for each question will not always equal the total number of surveys conducted. For more information regarding the survey methodology, please see *Appendix A: Methodology*.

Note on 2017 Comparison Data: Beginning in 2019, "Refuse" was included as an answer choice for all survey questions while it was previously included for select questions. Consequently, caution is advised in comparing trend data where 2017 "Refuse" data are noted as unavailable.

LIVING ACCOMMODATIONS

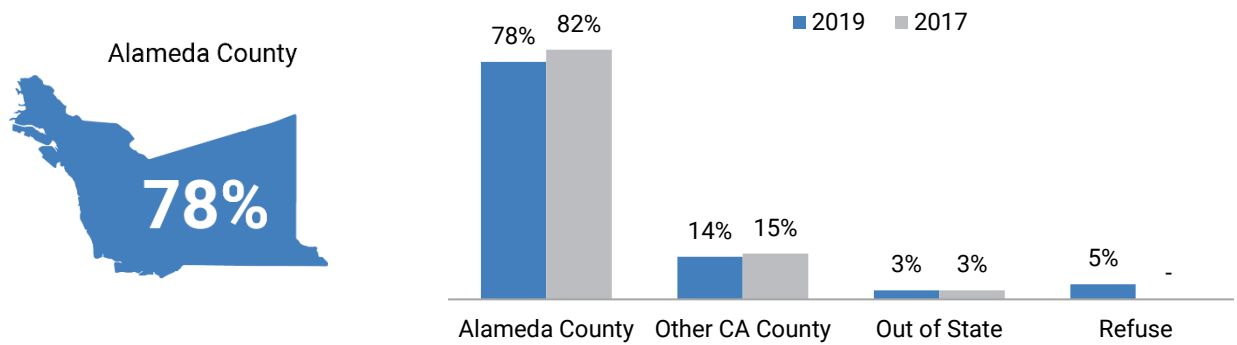
Where individuals lived prior to experiencing homelessness and where they have lived since impacts the way they seek services, as well as their ability to access support from friends or family. Previous circumstances can also point toward gaps in the system of care and opportunities for systemic improvement and homelessness prevention.

PLACE OF RESIDENCE

Knowing where individuals were living prior to their housing loss informs discussions regarding how local the homeless population is to the region. This information can also influence changes to available support systems if Alameda County finds increasing numbers of individuals living locally before experiencing homelessness.

Seventy-eight percent (78%) of respondents reported living in Alameda County at the time they most recently became homeless. Fourteen percent (14%) reported living in another county in California; this included 4% from San Francisco and 2% from Contra Costa County. Three percent (3%) reported living out of state at the time they lost their housing.

FIGURE 13. PLACE OF RESIDENCE AT TIME OF HOUSING LOSS

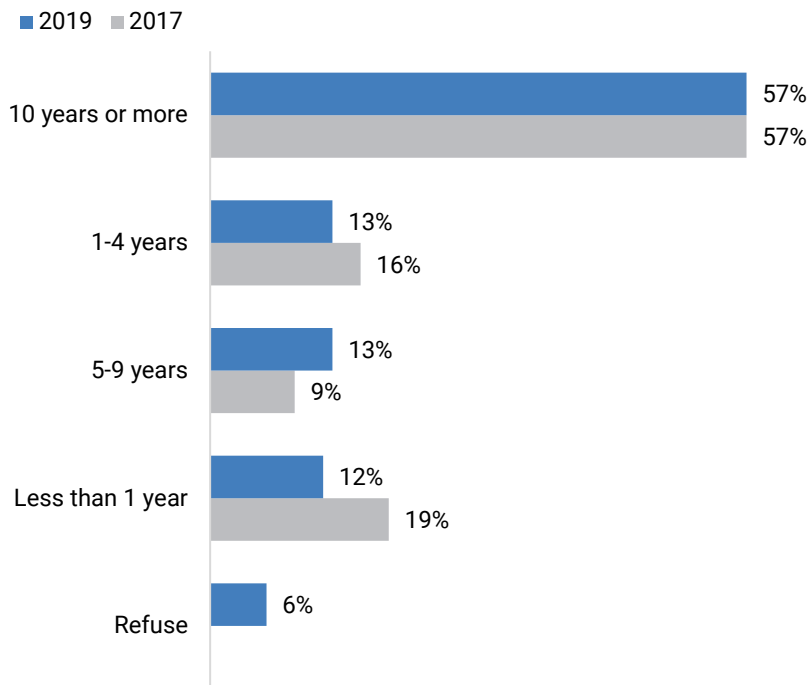


2019 n=1,633; 2017 n=1,191

Note: Percentages may not add up to 100 due to rounding.

In total, 57% of respondents reported they had been living in Alameda for 10 years or more (this included individuals who were born or grew up in the county). Approximately 12% of the population had been living in Alameda County for less than one year.

FIGURE 14. LENGTH OF TIME SPENT IN ALAMEDA COUNTY

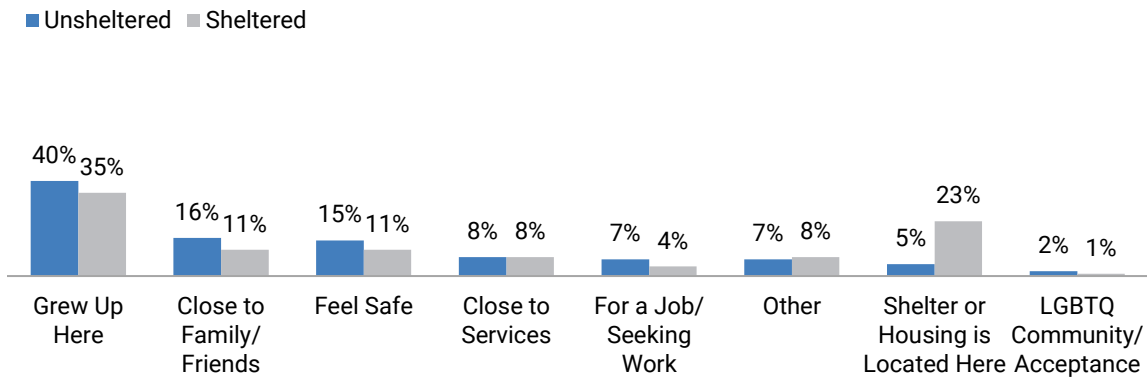


2019 n=1,546; 2017 n=1,171

Note: Percentages may not add up to 100 due to rounding.

Respondents were asked why they stay in their current location. Responses varied among sheltered and unsheltered respondents. Among unsheltered respondents, 40% reported that they grew up in the area or considered the area their home and 16% reported they stayed in the location because it was close to friends or family. Among sheltered respondents, 35% stayed there because they grew up in the area or considered the area their home, and 23% reported staying in the location because shelter or housing programs were located there. Eight percent (8%) of both sheltered and unsheltered respondents reported staying in a location because it was close to services.

FIGURE 15. REASON FOR STAYING IN CURRENT LOCATION (SPECIFIC PLACE)



Unsheltered n=1,224; Sheltered n=458

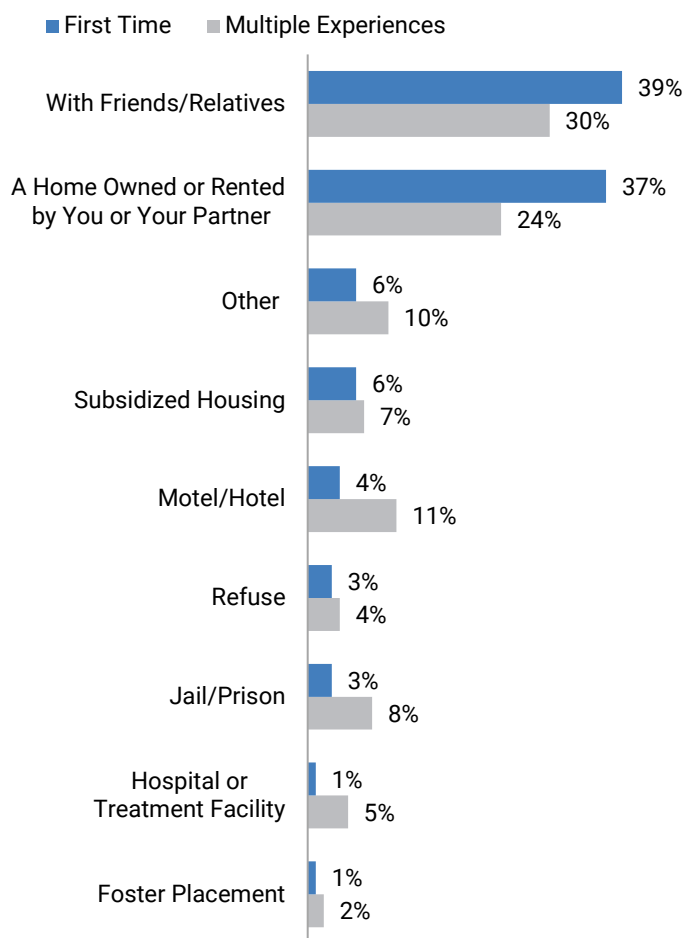
Note: Multiple response question, percentages will not add up to 100.

PRIOR LIVING ARRANGEMENTS

Similar to previous place of residence, the type of living arrangements maintained by individuals before experiencing homelessness provides a look into what types of homeless prevention services might be offered to help individuals maintain their housing.

Where individuals were living varied slightly by whether or not it was the first time they were experiencing homelessness. Respondents experiencing homelessness for the first time reported higher rates of living in either a home owned or rented by themselves or a partner, or with friends or relatives immediately prior to experiencing homelessness. While these same living arrangements were the most frequently cited among respondents with multiple experiences of homelessness, these respondents reported higher rates of staying in a motel or hotel, jail or prison, or hospital or treatment facility immediately prior to their current episode of homelessness.

FIGURE 16. LIVING ARRANGEMENTS IMMEDIATELY PRIOR TO EXPERIENCING HOMELESSNESS BY FIRST-TIME HOMELESSNESS



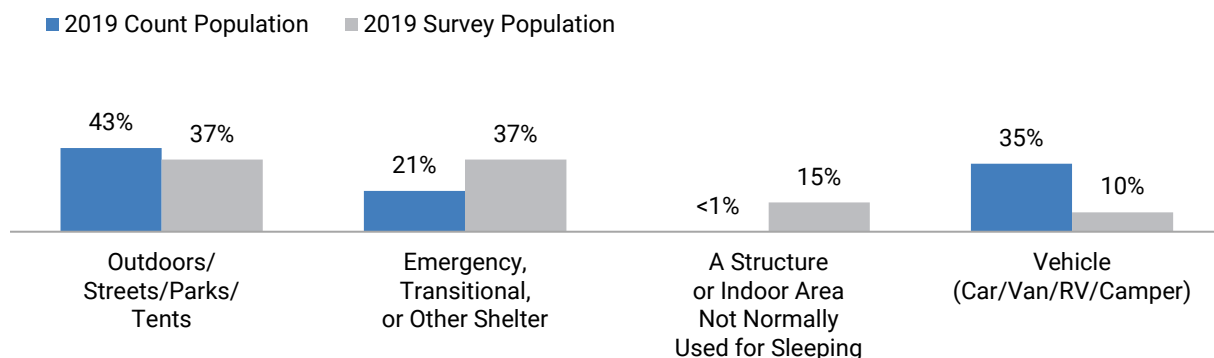
2019 First Time n=492; Multiple Experiences n=1,013
 Note: Percentages may not add up to 100 due to rounding.

CURRENT LIVING ARRANGEMENTS

Understanding the types of places individuals experiencing homelessness are sleeping can help inform local outreach efforts. While basic information on where individuals were observed during the general street count effort was collected, survey respondents were also asked about their living arrangements on the night of the count.

When asked about their living arrangements, 37% of survey respondents reported sleeping outdoors, either on the streets, in parks, or encampments. Another 37% reported staying in an emergency, transitional, or other type of shelter. Fifteen percent (15%) reported staying in a structure or indoor area not intended for human habitation, 10% were residing in a motel or hotel, and 10% were in a vehicle.

FIGURE 17. CURRENT LIVING ARRANGEMENTS



2019 Count Population n=8,022; 2019 Survey Population n=1,682
 Note: Percentages may not add up to 100 due to rounding.

DURATION AND RECURRENCE OF HOMELESSNESS

Unstable living conditions, poverty, housing scarcity, and many other issues often lead to individuals falling into homelessness. For some, the experience of homelessness is part of a long and recurring history of housing instability. While there is research that demonstrates how housing instability has many of the same effects as literal homelessness, particularly on families and children, extended periods of homelessness can affect a person’s ability to obtain housing and employment and lead to increased health risks.¹ The length of time individuals remain on the street can also indicate the strain on the homeless assistance and housing systems.

Thirty-one percent (31%) of 2019 survey respondents reported experiencing homelessness for the first time.

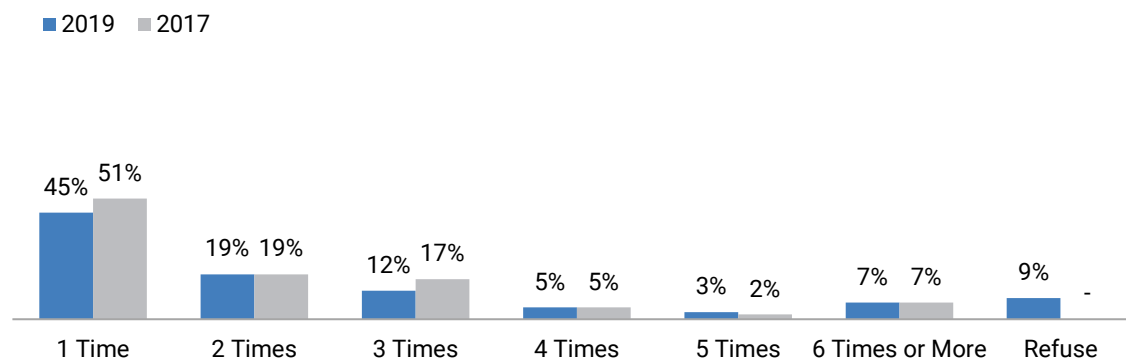
FIGURE 18. EXPERIENCING HOMELESSNESS FOR THE FIRST TIME



2019 n=1,628

Some individuals who experience homelessness will cycle in and out of stable housing. Over one-quarter (27%) of respondents reported experiencing homelessness three or more times in past three years.

FIGURE 19. NUMBER OF EPISODES OF HOMELESSNESS IN THE PAST THREE YEARS



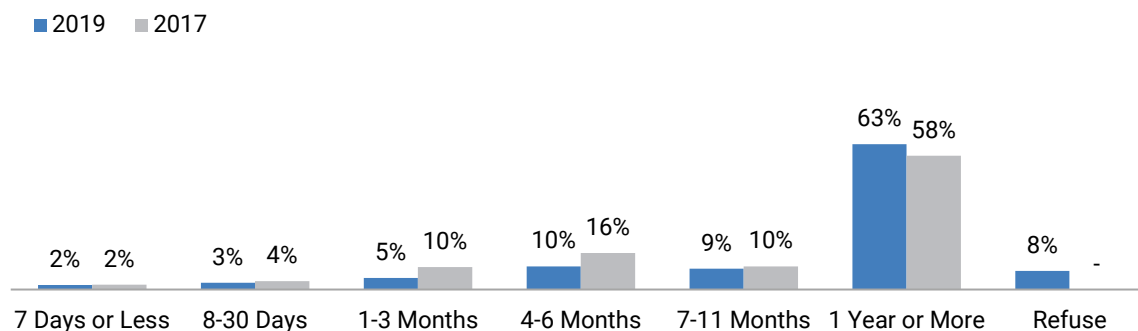
2019 n=1,637; 2017 n=1,185

Note: Percentages may not add up to 100 due to rounding.

¹ Buckner, J.C. (2008). Understanding the impact of homelessness on children: Challenges and future research directions. American Behavioral Scientist 51 (6), 721-736.

The majority (63%) of survey respondents reported their current episode of homelessness lasting for one year or longer. Two percent (2%) of respondents reported experiencing homelessness for one week or less.

FIGURE 20. LENGTH OF CURRENT EPISODE OF HOMELESSNESS



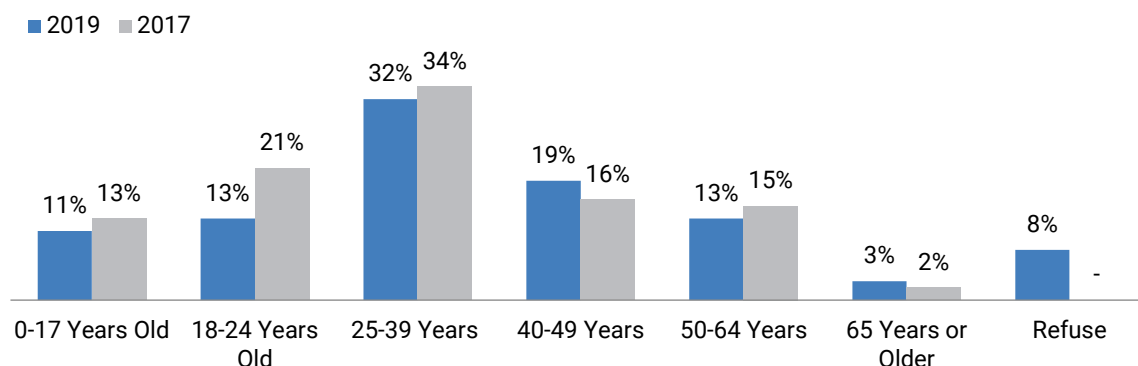
2019 n=1,638; 2017 n=1,184

Note: Results for 'Refuse' are unavailable for 2017 as this answer choice was added to this survey question beginning in 2019.

Respondents were asked the age at which they first experienced homelessness. This question provides some insight into how homelessness and housing instability affect the population over their lifetime. Eleven percent (11%) of respondents first experienced homelessness as a child under the age of 18, 13% first experienced homelessness as a young adult between the ages of 18 and 24, and over two-thirds (68%) reported their first time experiencing homelessness occurring over the age of 24. Among those who first experienced homelessness at age 25 and older, 16% reported first experiencing homelessness at age 50 or older.

In comparison, 4% of persons identified in the count were under the age of 18, 9% were between the ages of 18 and 24, 73% were between the ages of 25 and 59, and 14% were age 60 or older.

FIGURE 21. AGE AT FIRST EXPERIENCE OF HOMELESSNESS



2019 n=1,647; 2017 n=1,046

Note: Percentages may not add up to 100 due to rounding.

Note: Results for 'Refuse' are unavailable for 2017 as this answer choice was added to this survey question beginning in 2019.

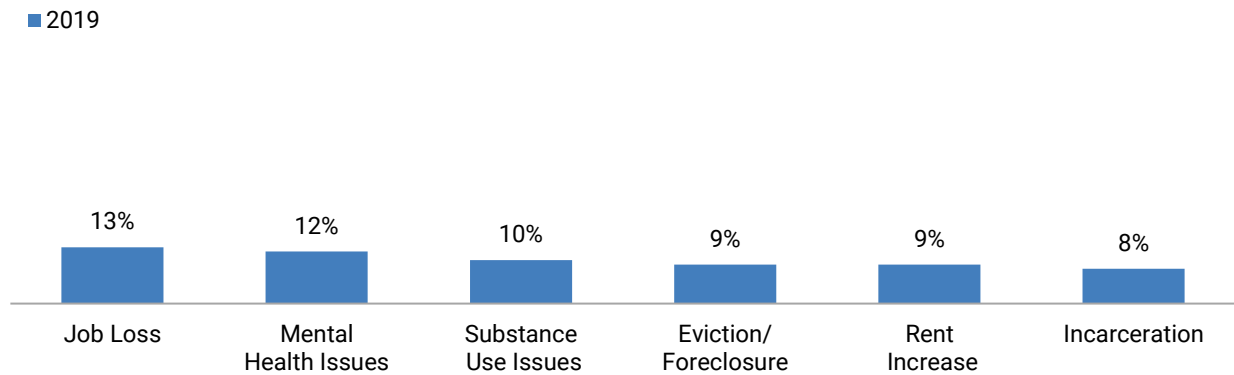
PRIMARY CAUSE OF HOMELESSNESS

The primary cause of an individual’s inability to obtain or retain housing is often difficult to pinpoint, as it is often the result of multiple and compounding causes. An inability to secure adequate and affordable housing can also lead to an inability to address other basic needs, such as health care and adequate nutrition.

When asked to identify the primary event or condition that led to their current homelessness experience, from a limited list of predominantly personal reasons, 31% cited economic factors such as job loss (13%), eviction or foreclosure (9%), and rent increase (9%). Over one-fifth (22%) cited behavioral health issues such as mental health (12%) and substance use (10%).

Although not among the most frequent responses, other reported causes of homelessness included family or friends could not afford to let them stay (7%) and family or domestic violence (6%).

FIGURE 22. PRIMARY CAUSE OF HOMELESSNESS (TOP SIX RESPONSES)



2019 n=1,655

Note: Multiple response question, percentages will not add up to 100.

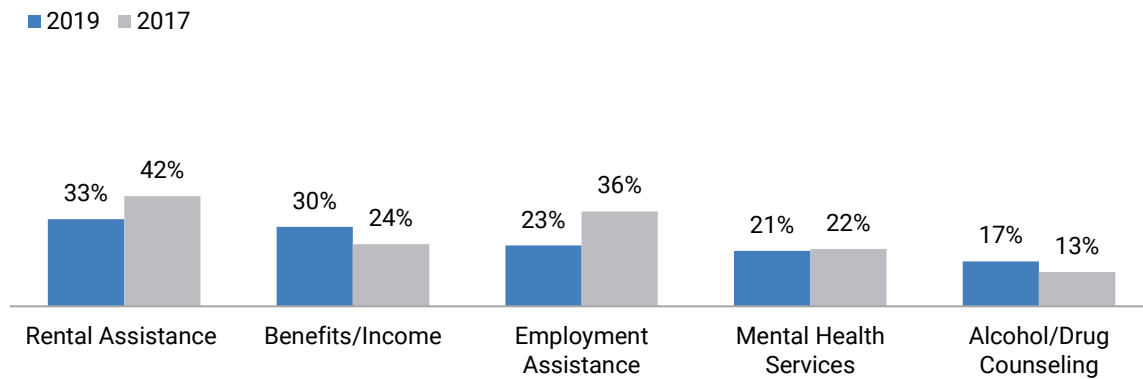
SUPPORT THAT MIGHT HAVE PREVENTED HOMELESSNESS

Many individuals experiencing homelessness face significant barriers in retaining permanent housing. These barriers can range from housing affordability and availability to accessing the economic and social supports (e.g., increased income, rental assistance, and case management) needed to access and retain permanent housing.

When asked what might have helped them retain their housing, respondents most often cited income-related resources (59%) including benefits, increased income, employment assistance, and child support. Thirty-eight percent (38%) cited the need for behavioral health services (i.e., mental health and substance use counseling) while 33% reported that rental assistance would have prevented their current homelessness.

Other supports cited in 2019 included legal assistance (14%); help obtaining resources after leaving a hospital, treatment, jail, or prison facility (11%); and family counseling (10%).

FIGURE 23. SUPPORT THAT MIGHT HAVE PREVENTED HOMELESSNESS (TOP FIVE RESPONSES)



2019 n=1,658; 2017 n=1,185

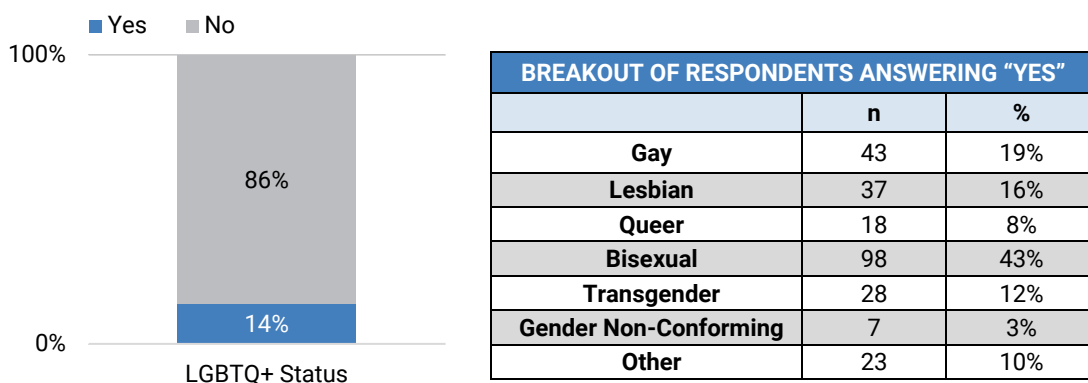
Note: Multiple response question, percentages will not add up to 100.

SEXUAL ORIENTATION AND GENDER IDENTITY

While limited data are available on the number of lesbian, gay, bisexual, transgender, and queer (LGBTQ+) individuals experiencing homelessness, available data suggest that LGBTQ+ individuals experience homelessness at higher rates – especially among those under the age of 25.^{2,3}

Fourteen percent (14%) of survey respondents identified as LGBTQ+ in 2019. Of those, 43% identified as bisexual, 19% as gay, 16% as lesbian, 12% as transgender, and 8% as queer. Ten percent (10%) of LGBTQ+ respondents reported an unspecified identity.

FIGURE 24. SEXUAL AND GENDER IDENTITY



LGBTQ+ 2019 n=1,682, Breakout n=229 respondents offering 254 responses

Note: Multiple response question, percentages will not add up to 100.

² True colors. (2017). Our Issue. 40% of Youth Experiencing Homelessness Identify as Lesbian, Gay, Bisexual, or Transgender (LGBT). Retrieved 2017 from <https://truecolorsfund.org/our-issue/>

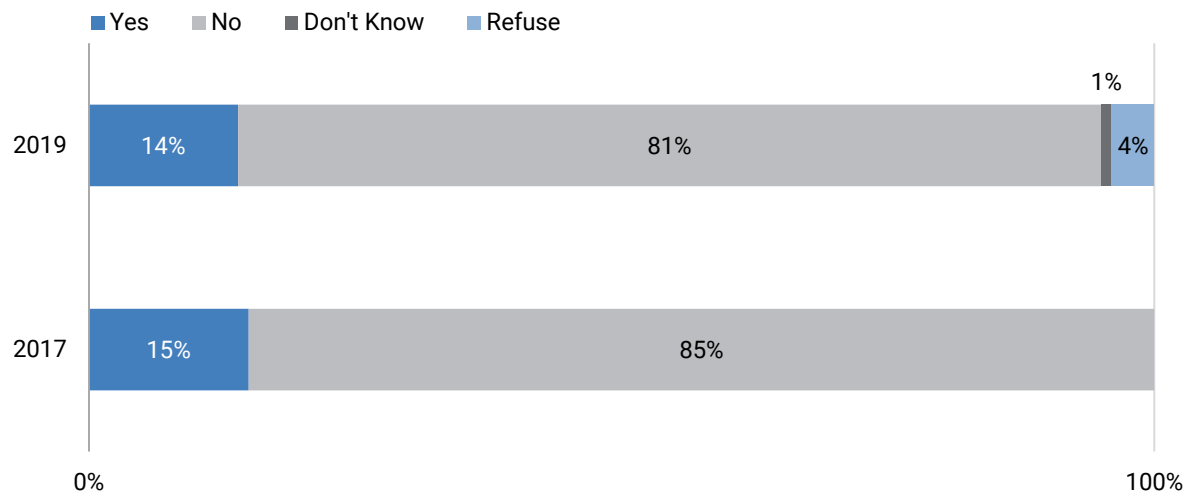
³ National Coalition for the Homeless. LGBT Homelessness. Retrieved 2017 from <http://nationalhomeless.org/issues/lgbt/>

FOSTER CARE SYSTEM

It has been estimated that one in five former foster youth experience homelessness within four years of exiting the foster care system.⁴ In California, foster youth are eligible to receive services beyond age 18. Transitional housing and supportive services for youth aged 18-24 are provided through programs often referred to as Transitional Housing Placement-Plus (THP+).

In 2019, 14% of respondents reported a history of foster care. Eighteen percent (18%) of youth under age 25 reported that aging out of the foster care system was the primary cause of their current homelessness.

FIGURE 25. HISTORY OF FOSTER CARE



2019 n=1,657; 2017 n=1,190

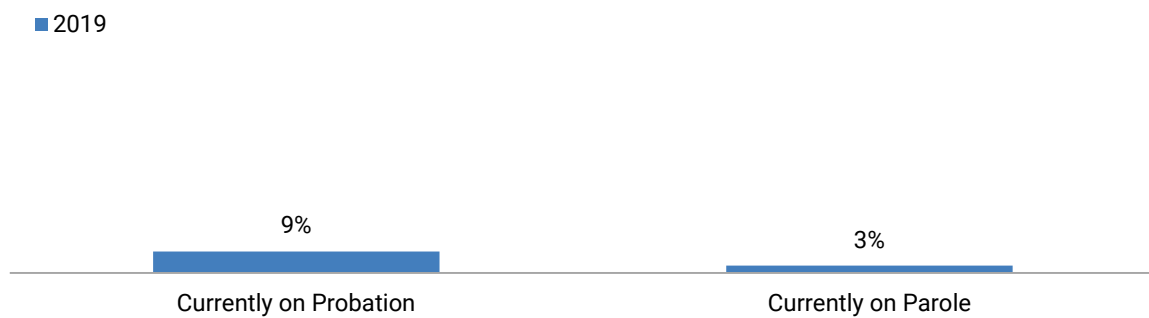
⁴ Fernandes, A.L. (2007). Runaway and homeless youth: Demographics, programs, and emerging issues. Congressional Research Services, January 2007. Retrieved from <http://www.endhomelessness.org/content/general/detail/1451>.

CRIMINAL JUSTICE SYSTEM

Homelessness and incarceration are often correlative. Individuals without stable housing are at greater risk of criminal justice system involvement, particularly those with mental health issues, veterans, and youth. Individuals with past incarceration face significant barriers to exiting homelessness due to stigmatization and policies affecting their ability to gain employment and access housing opportunities.⁵ A recent study found that formerly incarcerated people were almost ten times more likely to experience homelessness than the general public.⁶

Nine percent (9%) of respondents reported being on probation at the time of the survey; 3% reported being on parole.

FIGURE 26. CRIMINAL JUSTICE INVOLVEMENT



2019 Probation n=1,611; Parole n=1,537

⁵ Greenberg, GA, Rosenheck, RA. (2008). Jail Incarceration, Homelessness, and Mental Health: A National Study. *Psychiatric Services*, 2008 Feb;59(2): 170-7.

⁶ Couloute, L. (2018). Nowhere to Go: Homelessness among formerly incarcerated people. Prison Policy Initiative, August 2018.

SCHOOL ENROLLMENT

Communities across the country are becoming increasingly aware of the number of students in schools and colleges experiencing homelessness. A recent study of community college students across the nation showed roughly 14% were experiencing homelessness.⁷ Enrollment in school not only points to the resiliency and drive of the people but also can help to identify institutions with the potential to provide outreach and support to individuals experiencing homelessness in the community.

At the time of the survey, 5% of respondents were enrolled in some type of schooling. Surveys were only conducted with heads of households; therefore, many school-age children are not represented in the survey results.

FIGURE 27. SCHOOL ENROLLMENT

School Enrollment	2017		2019	
	%	n	%	n
Enrolled	8%	90	5%	87
Not Enrolled	92%	1,009	92%	1,523
Refuse	-	-	2%	41

2019 n=1,651; 2017 n=1,099

Note: Percentages may not add up to 100 due to rounding.

⁷ Wisconsin Hope Lab. (2017). Hungry and Homeless in College: Results from a National Study of Basic Needs Insecurity in Higher Education. Retrieved from <http://wihopelab.com/publications/hungry-and-homeless-in-college-report.pdf>.

HEALTH

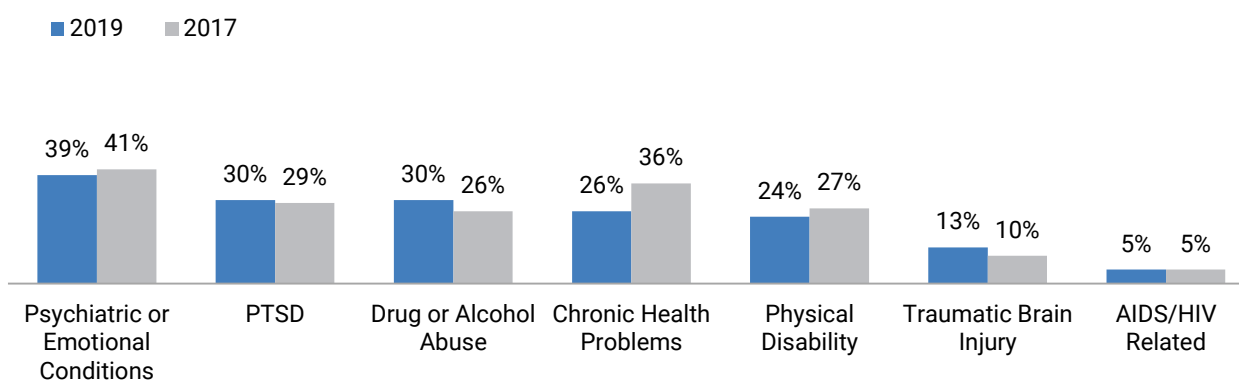
The average life expectancy for individuals experiencing homelessness is up to 36 years shorter than the general population.⁸ Without regular access to health care and without safe and stable housing, individuals experience preventable illness and often endure longer hospitalizations. It is estimated that those experiencing homelessness stay four days (or 36%) longer per hospital admission than patients not experiencing homelessness.⁹

HEALTH CONDITIONS

The most frequently reported health condition among survey respondents was psychiatric or emotional conditions (39%), followed by post-traumatic stress disorder (30%) and drug or alcohol abuse (30%). Twenty-six percent (26%) reported chronic health problems, 24% reported a physical disability, 13% reported a traumatic brain injury, and 5% reported living with an AIDS or an HIV-related condition.

Forty-two percent (42%) of respondents reported at least one of these conditions was disabling, preventing them from maintaining work or housing. Twenty percent (20%) reported living with three or more disabling conditions.

FIGURE 28. HEALTH CONDITIONS



2019 n=1,682; 2017 n=1,129

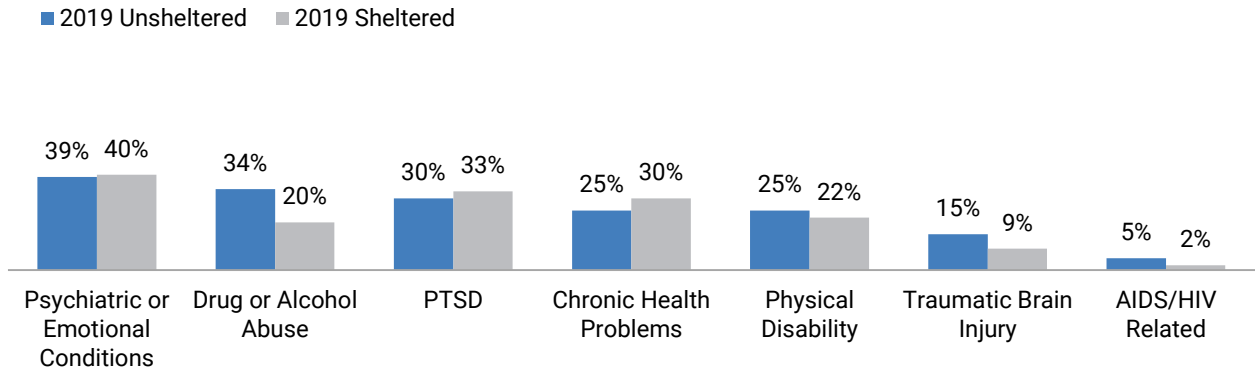
Note: Multiple response question, percentages will not add up to 100.

⁸ Koachanek, M.A., et al. (2017). Mortality in the United States, 2016. NCHS Data Brief, no. 293. Hyattsville, MD: National Center for Health Statistics.

⁹ Sharon A. Salit, M. E. (1998). Hospitalization Costs Associated with Homelessness in New York City. New England Journal of Medicine, 338, 1734-1740.

Prevalence of reported health conditions were relatively similar between unsheltered and sheltered survey respondents, with the exception of drug and alcohol abuse and traumatic brain injury. The most frequently reported conditions across both populations remained psychological or emotional conditions and post-traumatic stress disorder.

FIGURE 29. HEALTH CONDITIONS BY SHELTER STATUS



Unsheltered n=1,224; Sheltered n=458

Note: Multiple response question, percentages will not add up to 100.

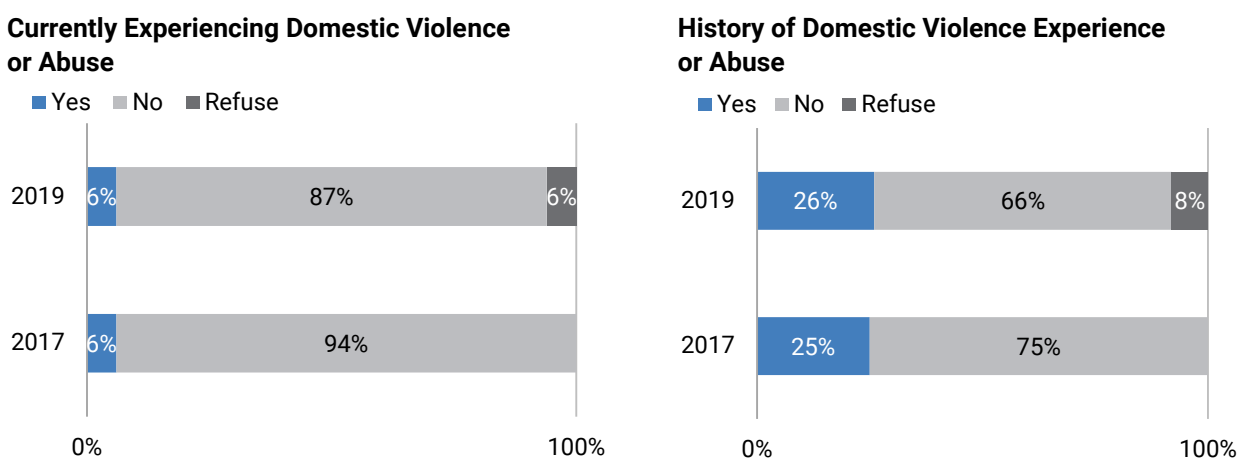
DOMESTIC/PARTNER VIOLENCE OR ABUSE

Histories of domestic violence and partner abuse are prevalent among individuals experiencing homelessness and can be the primary cause of homelessness. Survivors often lack the financial resources required for housing, as their employment history or dependable income may be limited.

Six percent (6%) of survey respondents reported currently experiencing domestic violence or abuse. There was no difference observed between unsheltered and sheltered respondents (6% each). Domestic violence did vary by gender, as 4% of male respondents reported current experience compared to 10% of females. While there were very few transgender and gender non-conforming respondents, 8% and 3% reported currently experiencing domestic violence, respectively.

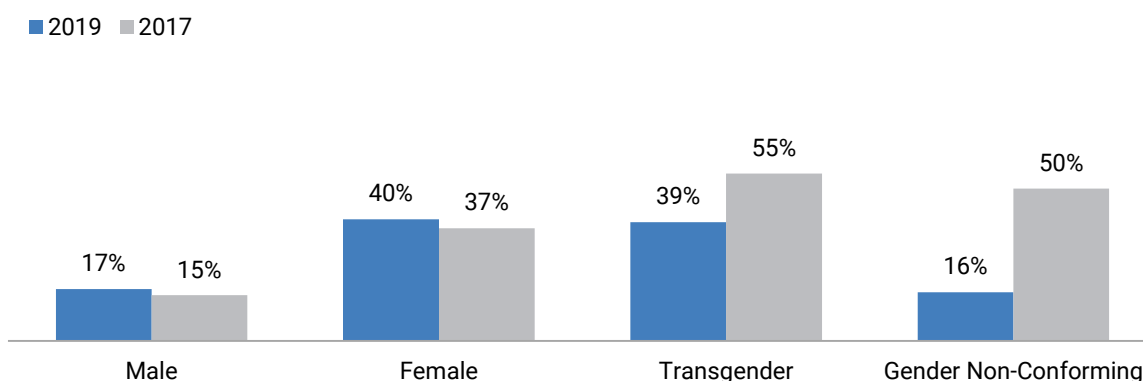
Twenty-six percent (26%) of respondents reported a history of ever experiencing physical, emotional, or sexual abuse by a relative or by a person with whom they have lived, such as a spouse, partner, sibling, parent, or roommate. This also varied by gender, with 17% of male, 40% of female, 39% of transgender, and 16% of gender non-conforming respondents experiencing domestic violence in their lifetime.

FIGURE 30. DOMESTIC VIOLENCE



Current Experience 2019 n = 1,599, 2017 n = 1,095; Lifetime experience 2019 n = 1,620, 2017 n = 1,074

FIGURE 31. HISTORY OF DOMESTIC VIOLENCE EXPERIENCE BY GENDER



2019 Male n=941, Female n=609, Transgender n=26, Gender Non-Conforming n=38; Alameda 2017: Male n= 592, Female n=492; Transgender n=11; Gender Non-Conforming n=2

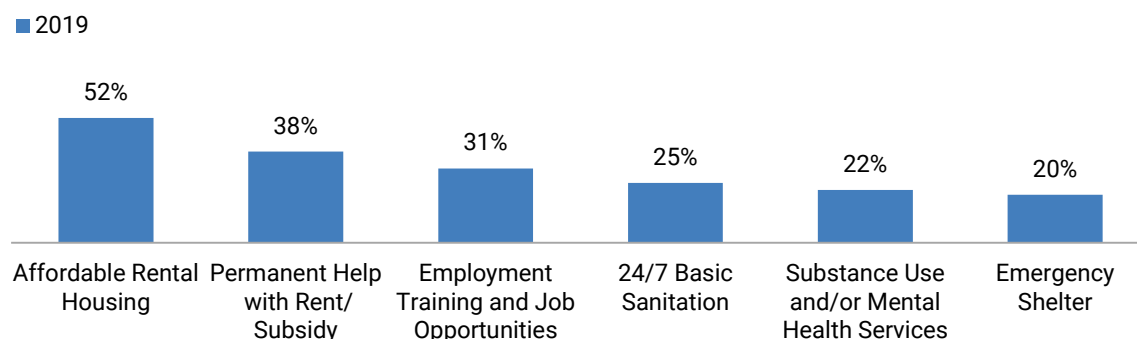
SERVICES AND ASSISTANCE

Alameda County provides services and assistance to those currently experiencing homelessness through federal and local programs. Government assistance and homeless services work to enable individuals and families to obtain income and support. However, many individuals and families do not apply for services, as many believe that they are ineligible for assistance. Connecting homeless individuals and families to these support services creates a bridge to mainstream support services and can prevent future housing instability.

RECOMMENDED USES FOR SPENDING NEW MONEY TO END HOMELESSNESS

Survey respondents were asked to identify uses for funding to end homelessness in Alameda County if new money became available. Over half (52%) of respondents identified affordable rental housing and over one-third (38%) identified permanent help with rent. Employment training and job opportunities (31%), 24/7 basic sanitation services (25%), behavioral health services (22%), and emergency shelter (20%) were also among the top recommendations.

FIGURE 32. HOW ANY NEW FUNDING TO END HOMELESSNESS IN ALAMEDA COUNTY SHOULD BE SPENT (TOP SIX RESPONSES)

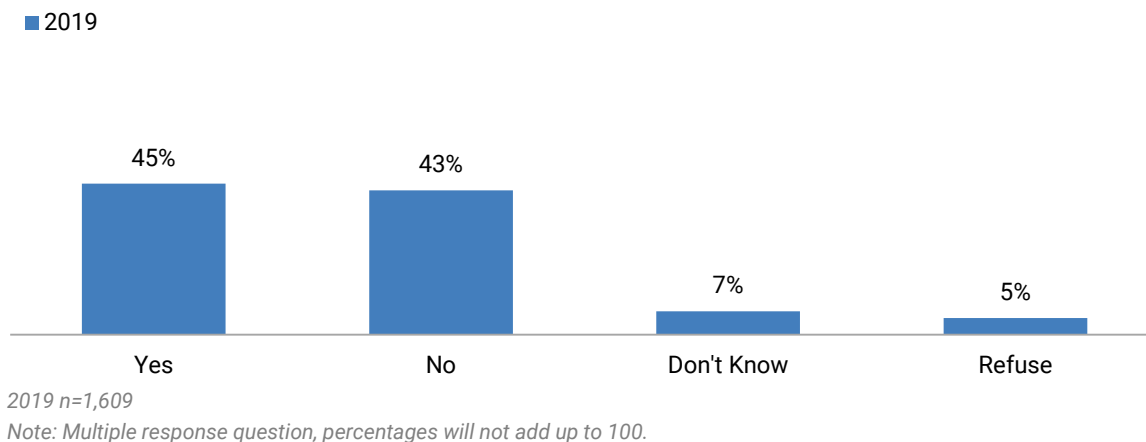


2019 n=1,649 respondents providing 4,788 responses
 Note: Multiple response question, percentages will not add up to 100.

COORDINATED ENTRY

Coordinated entry is the front door of Alameda County’s Housing Crisis Response System that is designed to problem-solve, assess, and match people to available resources and to ensure that individuals with the highest needs are prioritized. When asked whether they had accessed coordinated entry, less than half (45%) of respondents reported that they had been told to call 211, talked to an outreach worker, or visited a Hub/Housing Resource Center to access housing or services. Seven percent (7%) were unsure whether they had used coordinated entry.

FIGURE 33. COORDINATED ENTRY USE

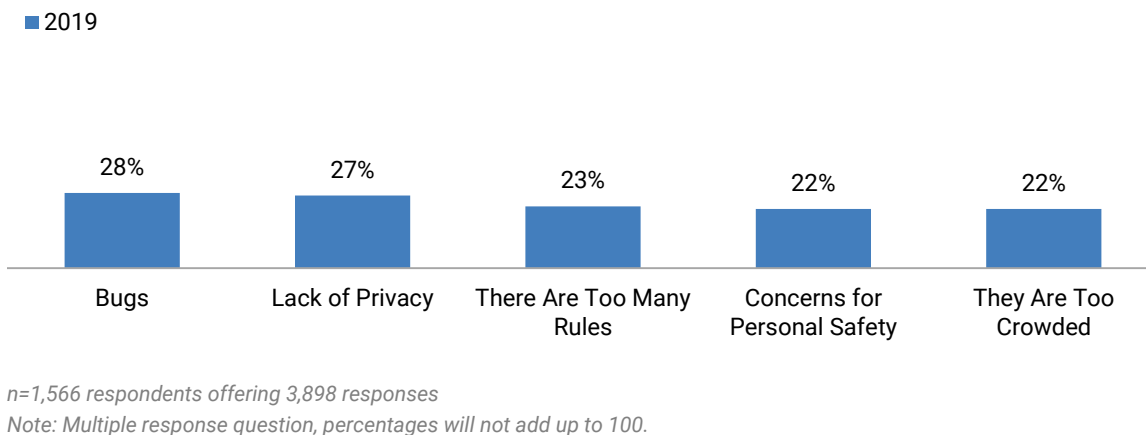


SHELTER SERVICES

Emergency shelters provide a safe, short-term alternative to the streets for people experiencing homelessness by providing support for immediate, basic needs as well as linkages to other support services and longer-term housing opportunities.

When asked what prevents them from using shelter services, survey respondents cited a number of reasons. Twenty-eight percent (28%) said they do not use them because of bugs, 27% cited a lack of privacy, 23% cited too many rules, and 22% each cited crowding and concerns for personal safety.

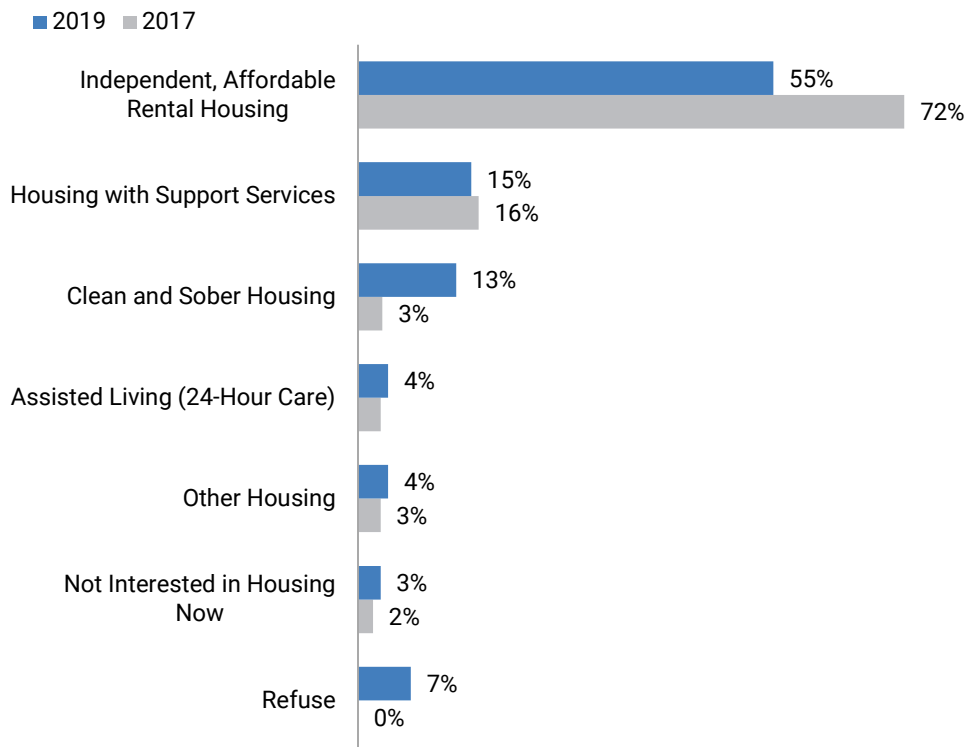
FIGURE 34. REASONS FOR NOT USING SHELTER SERVICES (TOP FIVE RESPONSES)



INTEREST IN HOUSING

While it is often believed that people experiencing homelessness do not want housing and choose to live on the street, just 3% of respondents reported they were not interested in housing. The majority were interested in independent affordable housing (55%); however other respondents wanted housing with support services (15%), clean and sober housing (13%), and assisted living with 24-hour care (4%).

FIGURE 35. TYPES OF HOUSING WANTED



2019 n=1,635; 2017 n=1,169

Note: Percentages may not add up to 100 due to rounding.



Subpopulations

Home, Together: The Federal Strategic Plan to Prevent and End Homelessness outlines national objectives and evaluative measures for ending homelessness among all populations in the United States.

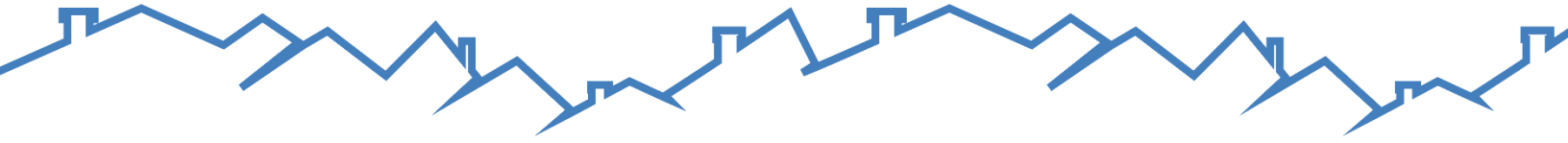
In order to adequately address the diversity within the population experiencing homelessness, the federal government identifies four subpopulations with particular challenges or needs, including:

- Families with children;
- Unaccompanied children and transition-age youth;
- Persons experiencing chronic homelessness; and
- Veterans

Consequently, these subpopulations represent important reportable indicators for measuring local progress toward ending homelessness.

The following sections examine each of these four subpopulations, identifying the number and characteristics of individuals included in the *EveryOne Counts! 2019 Homeless Count and Survey*. Additional details on the number and characteristics of single individuals 25 years and older are also presented in this section, as it is the largest population of persons experiencing homelessness in Alameda County.

Of the 1,681 surveys completed in 2019, the results represent 1,112 single unsheltered adults 25 years and older, 115 individuals in homeless families, 124 unaccompanied children and transition-age youth, 377 chronically homeless individuals and 157 homeless veterans. Surveys were completed in unsheltered environments, emergency shelters, and transitional housing settings.



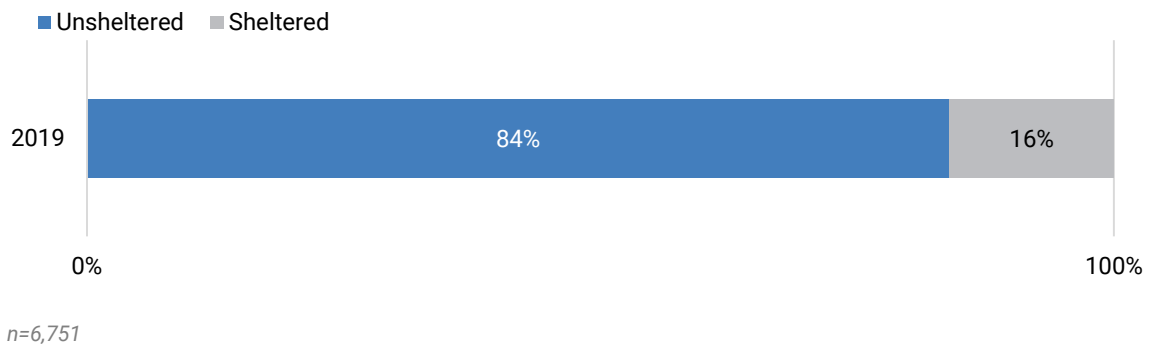
SINGLE ADULTS 25 YEARS AND OLDER

The largest number of people experiencing homelessness are adults over the age of 24 in households without children. This population is often referred to as single adults age 25 years and older, though it may include married or non-married couples and multi-adults households. It is often assumed that this population has high medical and mental health needs, yet data suggests that most of this population does not.¹⁰

NUMBER OF SINGLE ADULTS 25 YEARS AND OLDER

In 2019, single adults age 25 years and older comprised 84% of the population experiencing homelessness in Alameda County (6,751 individuals). Unsheltered single adults 25 years and older represented 90% of the total unsheltered population (5,697 individuals).

FIGURE 36. SHELTER STATUS OF SINGLE ADULTS 25 YEARS AND OLDER EXPERIENCNG HOMELESSNESS



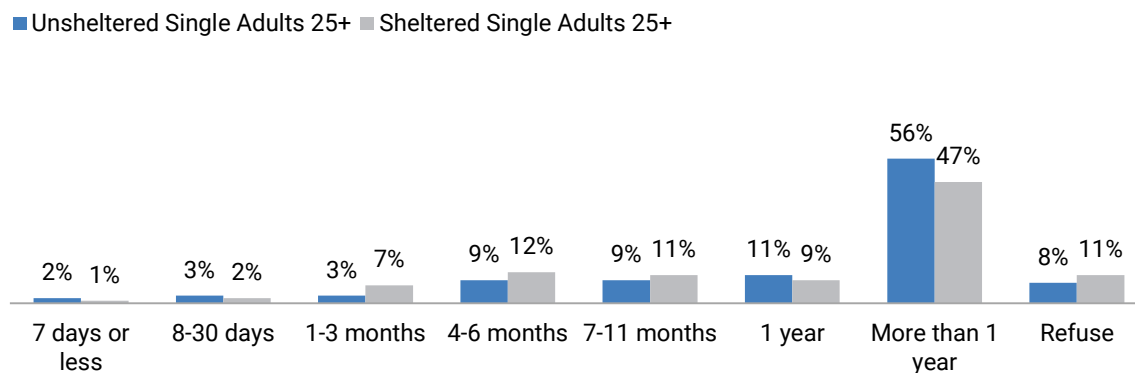
¹⁰ NAEH. (July 2016). End Single Adult Homelessness, Retrieved 2017 from http://www.endhomelessness.org/page/-/files/End%20Single%20Homelessness_Final.pdf

LENGTH OF HOMELESSNESS AMONG SINGLE ADULTS 25 YEARS AND OLDER

Rate of first-time homelessness were similar between unsheltered and sheltered single adults age 25 and older, 31% compared to 33%.

Over half (56%) of unsheltered single adults age 25 and older reported experiencing homelessness for more than one year, compared to 47% of sheltered single adults.

FIGURE 37. LENGTH OF CURRENT EPISODE OF HOMELESSNESS AMONG SINGLE ADULTS 25 YEARS AND OLDER

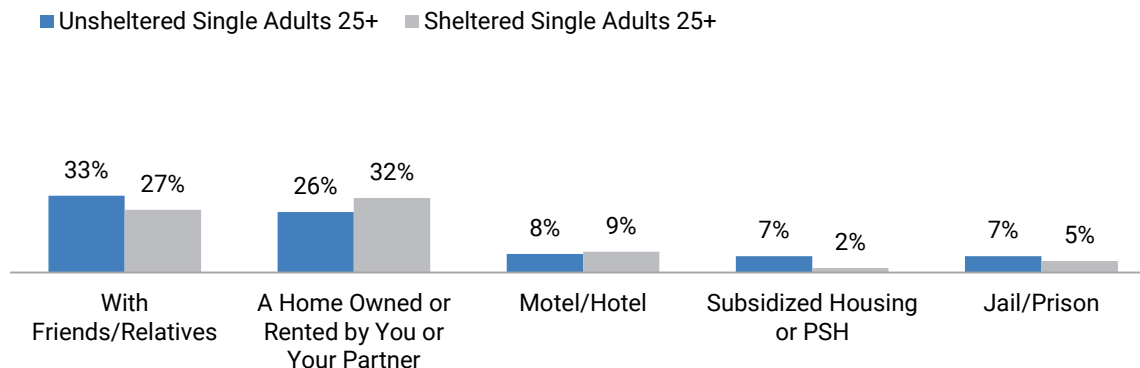


Unsheltered Single Adults 25+ n= 1,101, Sheltered Single Adults 25+ n=327
 Note: Percentages may not add up to 100 due to rounding.

PRIOR LIVING SITUATION OF SINGLE ADULTS 25 YEARS AND OLDER

Unsheltered single adults age 25 and older most frequently reported staying in a home owned or rented by friends or relatives; sheltered single adults age 25 and older most often reported staying in a home owned or rented by themselves or their partner prior to experiencing homelessness.

FIGURE 38. LIVING ARRANGEMENTS IMMEDIATELY PRIOR TO BECOMING HOMELESS AMONG SINGLE ADULTS 25 YEARS AND OLDER (TOP FIVE RESPONSES)

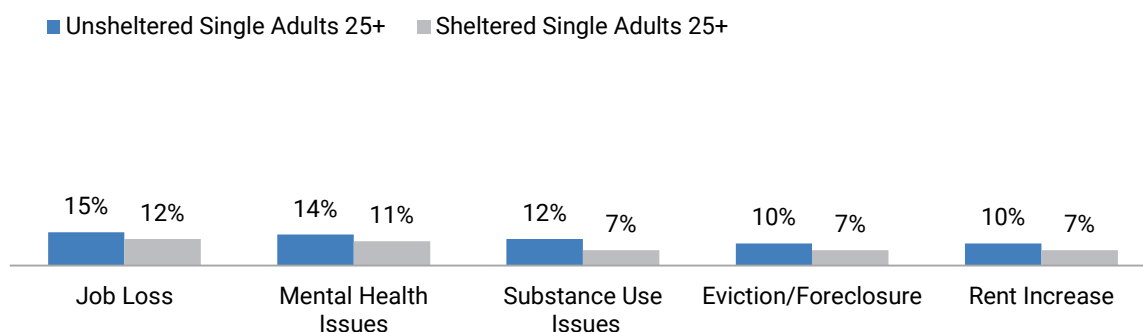


Unsheltered Single Adults 25+ n= 1,088, Sheltered Single Adults 25+ n=326

PRIMARY CAUSE OF HOMELESSNESS AND PREVENTIVE SERVICES NEEDED AMONG SINGLE ADULTS 25 YEARS AND OLDER

The most frequently reported cause of homelessness was job loss, by 15% of unsheltered single adults 25 and older and 12% of sheltered single adults 25 and older. Fourteen percent (14%) of unsheltered and 11% of sheltered single adults 25 years or older reported mental health issues as the primary cause of their homelessness. Twelve percent (12%) of unsheltered and 7% of sheltered single adults 25 years or older cited substance use issues as the primary cause.

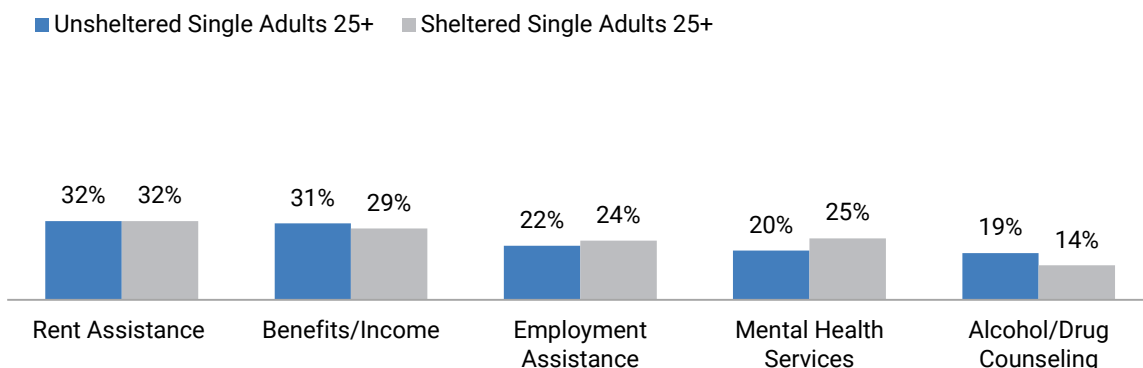
FIGURE 39. PRIMARY CAUSE OF HOMELESSNESS AMONG SINGLE ADULTS 25 YEARS AND OLDER (TOP FIVE RESPONSES)



Unsheltered Single Adults 25+ n= 1,096, Sheltered Single Adults 25+ n=325
 Note: Multiple response question, percentages will not add up to 100.

Nearly one-third (32%) of both unsheltered and sheltered single adults 25 years and older most frequently reported that rental assistance would have helped to prevent their housing loss. Unsheltered and sheltered single adults 25 years and older reported needing similar types of support overall.

FIGURE 40. SUPPORT NEEDED TO PREVENT HOUSING LOSS AMONG SINGLE ADULTS 25 YEARS AND OLDER (TOP FIVE RESPONSES)

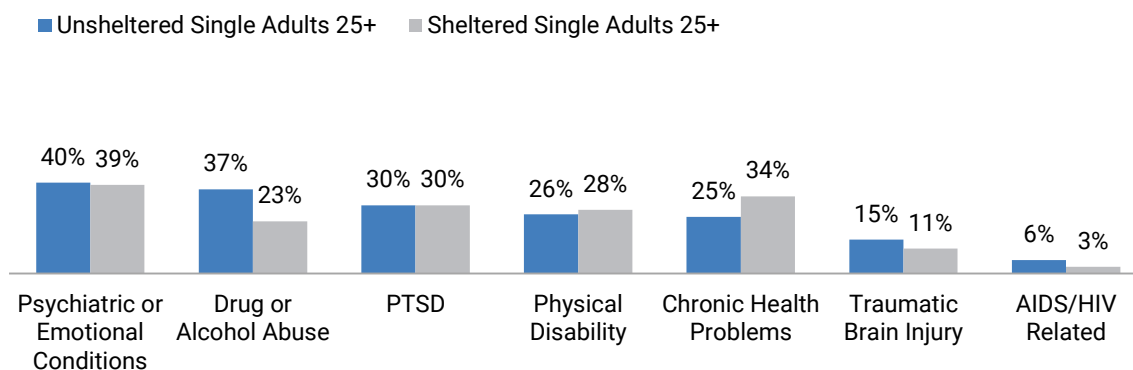


Unsheltered Single Adults 25+ n= 1,098 offering 2,449 responses, Sheltered Single Adults 25+ n=325 offering 730 responses
 Note: Multiple response question, percentages will not add up to 100.

HEALTH CONDITIONS AMONG SINGLE ADULTS 25 YEARS AND OLDER

Overall, unsheltered and sheltered single adults 25 years and older reported similar rates of living with various health conditions (62% and 59%, respectively). Unsheltered single adults 25 years and older most often reported psychiatric or emotional problems (40%), drug or alcohol abuse (37%), PTSD (30%), and physical disability (26%). Sheltered single adults 25 years and older most often reported psychiatric or emotional conditions (39%), chronic health problems (34%), PTSD (30%), and physical disability (28%).

FIGURE 41. HEALTH CONDITIONS AMONG SINGLE ADULTS 25 YEARS AND OLDER



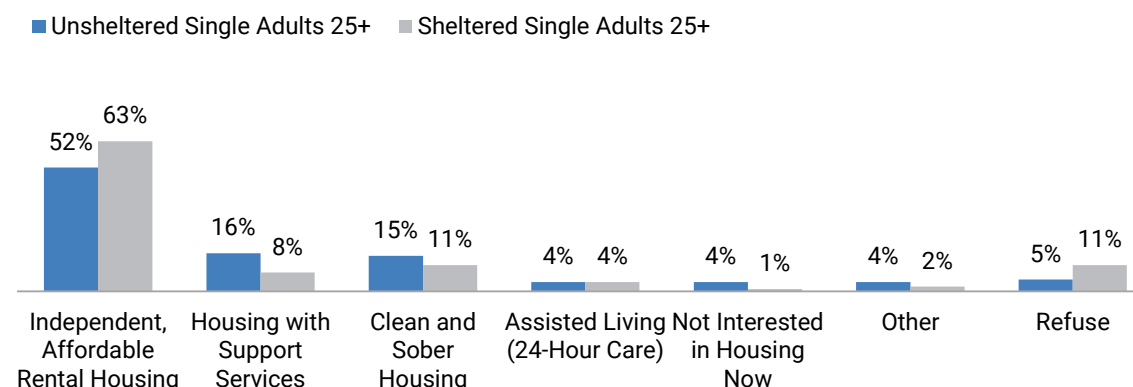
Unsheltered Single Adults 25+ n= 1,112, Sheltered Single Adults 25+ n=330

Note: Multiple response question, percentages will not add up to 100.

HOUSING INTEREST AMONG SINGLE ADULTS 25 YEARS AND OLDER

The percentage of unsheltered single adults 25 years and older who reported they were not currently interested in housing was 4%, compared to 1% of sheltered single adults 25 years and older. The majority of both unsheltered and sheltered single adults 25 years and older reported interest in independent affordable rental housing.

FIGURE 42. TYPES OF HOUSING WANTED AMONG SINGLE ADULTS 25 YEARS AND OLDER



Unsheltered Single Adults 25+ n= 1,080, Sheltered Single Adults 25+ n=323

Note: Multiple response question, percentages will not add up to 100.

Note: 3% of the population reported they were interested in another type of housing, not listed in closed ended response options.



FAMILIES WITH CHILDREN

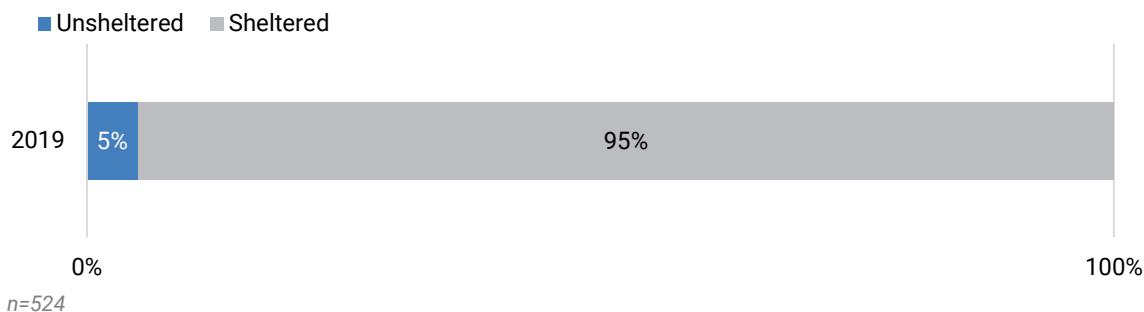
National data from 2017 indicate that 33% of all people experiencing homelessness are persons in families.¹¹ Very few families experiencing homelessness are unsheltered, as public shelters serve 90% of families experiencing homelessness in the United States; this is a significantly higher proportion of the population compared with other subpopulations, including unaccompanied children and transition-age youth.

Nationally, the majority of families experiencing homelessness are households headed by single women and families with children under the age of six.¹² Children in families experiencing homelessness have increased incidence of illness and are more likely to have emotional and behavioral problems than children with stable living accommodations.¹³

HOMELESS FAMILIES WITH CHILDREN

There were 170 families consisting of 524 individuals counted in 2019. The number of people in families with children represented 7% of the county’s overall homeless population. Children under 18 represented 57% of those in families.

FIGURE 43. SHELTER STATUS OF FAMILIES WITH CHILDREN EXPERIENCING HOMELESSNESS



¹¹ U. S. Department of Housing and Urban Development. (2017). The 2017 Annual Assessment Report (AHAR) to Congress. Retrieved 2018 from <https://www.hudexchange.info/resources/documents/2017-AHAR-Part-1.pdf>

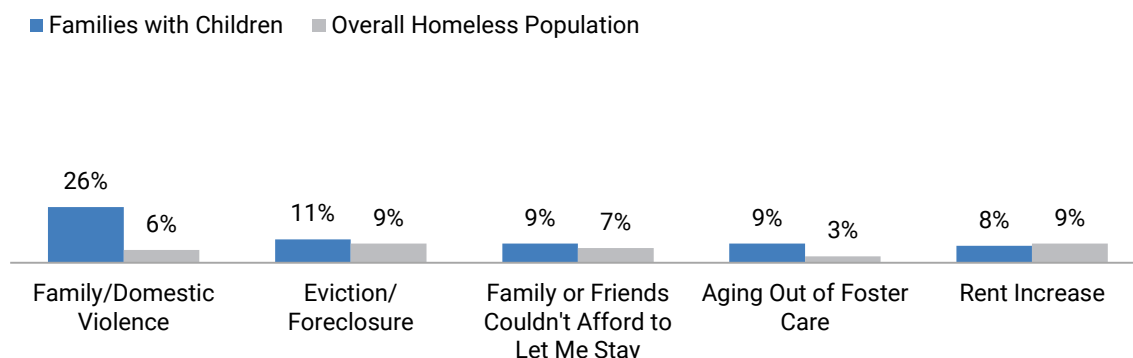
¹² U. S. Department of Health and Human Services. (2007). Characteristics and Dynamics of Homeless Families with Children. Retrieved 2015 from <http://aspe.hhs.gov/>

¹³ U.S. Interagency Council on Homelessness. (2015). Opening Doors. Retrieved 2015 from <http://www.usich.gov/>

PRIMARY CAUSE OF HOMELESSNESS AMONG HOMELESS FAMILIES WITH CHILDREN

The most frequently reported cause of homelessness among individuals in families with children was family or domestic violence (26%). Eleven percent (11%) reported eviction or foreclosure, 9% reported friends or family could not afford to let them stay with them, 9% reported aging out of foster care, and 8% reported a rent increase as the primary cause of their homelessness.

FIGURE 44. PRIMARY CAUSE OF HOMELESSNESS AMONG FAMILIES WITH CHILDREN

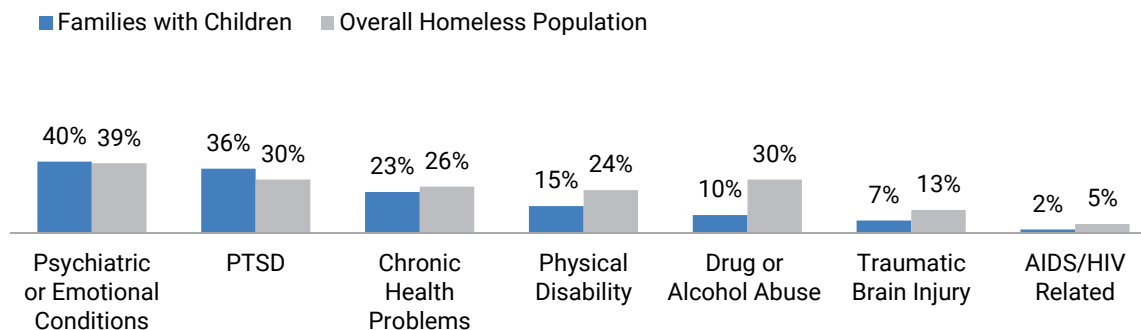


Families with Children n=113, Overall Homeless Population n=1,655
 Note: Multiple response question, percentages will not add up to 100.

HEALTH CONDITIONS AMONG HOMELESS FAMILIES WITH CHILDREN

Forty percent (40%) of family respondents reported experiencing psychiatric or emotional conditions. Thirty-six percent (36%) reported PTSD, 23% reported chronic health problems, 15% reported physical disability, 10% reported drug or alcohol abuse, 7% reported a traumatic brain injury, and 2% reported living with an AIDS or an HIV related condition. Compared to all respondents, families with children reported higher rates of PTSD and notably lower rates of drug or alcohol abuse and physical disabilities. It is important to recognize that all data are self-reported.

FIGURE 45. HEALTH CONDITIONS AMONG FAMILIES WITH CHILDREN



Families with Children n=115, Overall Homeless Population n= 1,682
 Note: Multiple response question, percentages will not add up to 100.



UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH

Due to the nature of youth homelessness, limited data are available on unaccompanied children and transition-age youth experiencing homelessness. Young people experiencing homelessness have a harder time accessing services, including shelter, medical care, and employment. This is due to the stigma of their housing situation, lack of knowledge of available resources, and a dearth of services targeted to young people.¹⁴

Although largely considered an undercount, nationwide estimates from 2017 suggest there are at least 40,799 unaccompanied children and transition-age youth on the streets and in public shelters, an increase of 14% over 2016.¹⁵ This increase may be due, in part, to the focus on unaccompanied youth during the 2017 Point-in-Time Count, which served as a nationwide baseline year.

In 2012, the U.S. Interagency Council on Homelessness amended the federal strategic plan to end homelessness to include specific strategies and supports to address the needs of unaccompanied homeless children and transition-age youth. As part of this effort, the U.S. Department of Housing and Urban Development placed increased focus on gathering data on unaccompanied homeless children and transition-age youth during the Point-in-Time Count.

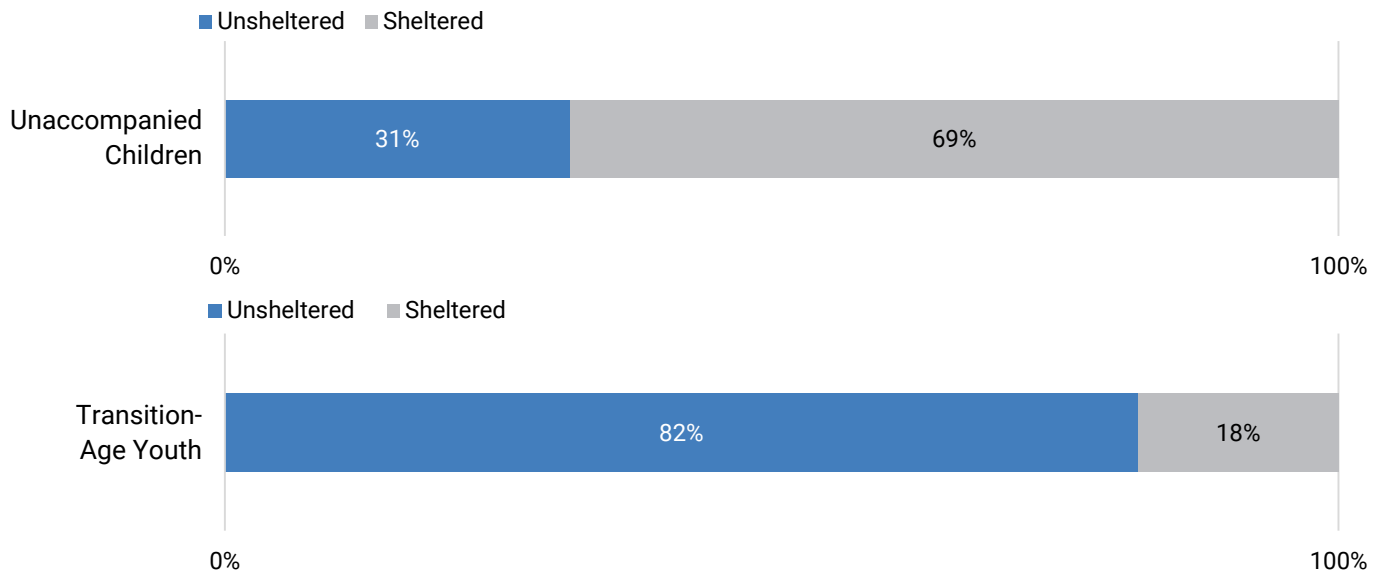
¹⁴ National Coalition for the Homeless. (2011). Homeless Youth Fact Sheet. Retrieved 2011 from <http://www.nationalhomeless.org>.

¹⁵ U. S. Department of Housing and Urban Development. (2017). The 2017 Annual Assessment Report (AHAR) to Congress. Retrieved 2018 from <https://www.hudexchange.info/resources/documents/2017-AHAR-Part-1.pdf>

UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH

Transition-age youth, young people between the ages of 18 and 24 years old, represented 9% of the overall population experiencing homelessness in Alameda County (702 individuals). Unaccompanied children, under age 18, represented less than 1% of the population (29 individuals).

FIGURE 46. SHELTER STATUS OF UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH EXPERIENCING HOMELESSNESS

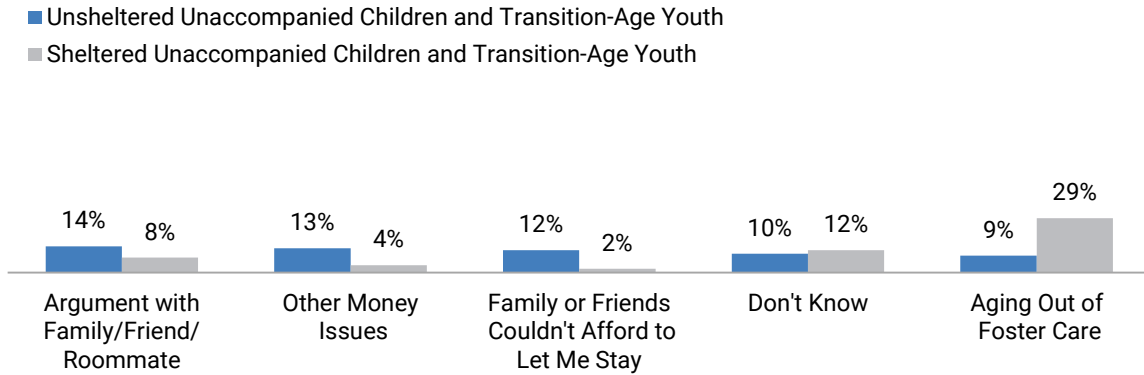


Unaccompanied Children n=29; Transition-Age Youth n=29

PRIMARY CAUSE OF HOMELESSNESS AMONG UNACCOMPANIED HOMELESS CHILDREN AND TRANSITION-AGE YOUTH

An argument with a family, friend, or roommate was the most frequently cited cause of homelessness among unsheltered unaccompanied youth (14%), compared to aging out of foster care among sheltered youth (29%). Unsheltered youth also more frequently attributed their homelessness to a family member or friend who could not afford to let them stay with them (12% compared to 2%).

FIGURE 47. PRIMARY CAUSE OF HOMELESSNESS AMONG UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH



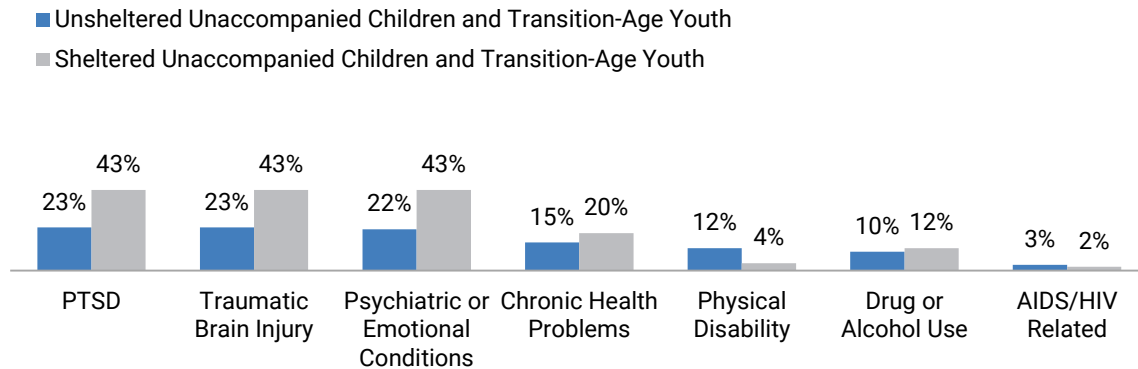
Unsheltered Unaccompanied Children and Transition-Age Youth Survey Population n=69; Sheltered Unaccompanied Children and Transition-Age Youth Survey Population n=51

Note: Multiple response question, percentages will not add up to 100.

HEALTH CONDITIONS AMONG UNACCOMPANIED HOMELESS CHILDREN AND TRANSITION-AGE YOUTH

Though generally healthier than the adult homeless population, health is still an issue for young people experiencing homelessness. Forty-three percent (43%) of sheltered youth reported living with psychiatric or emotional conditions compared to 22% of unsheltered youth; 43% of sheltered youth reported PTSD as compared to 23% of unsheltered youth.

FIGURE 48. HEALTH CONDITIONS AMONG UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH



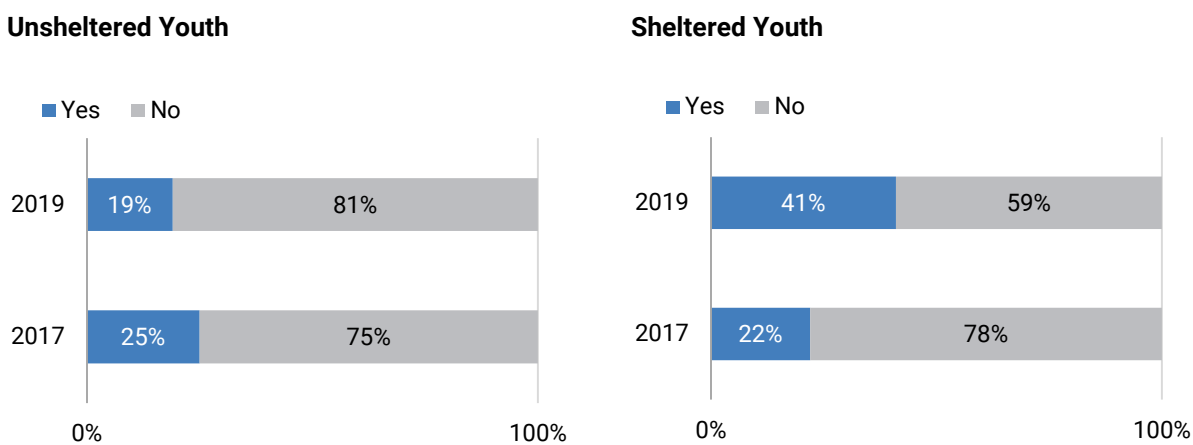
Unsheltered Unaccompanied Children and Transition-Age Youth Survey Population n=73, Sheltered Unaccompanied Children and Transition-Age Youth Survey Population n=51

Note: Multiple response question, percentages will not add up to 100.

SEXUAL ORIENTATION AMONG UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH

LGBTQ+ youth remain overrepresented in the population experiencing homelessness; an estimated 40% of youth experiencing homelessness identify as LGBTQ+.¹⁶ Overall, 28% of unaccompanied children and transition-age youth identified as LGBTQ+ compared to 12% of adults age 25 and older. Nineteen percent (19%) of unsheltered unaccompanied children and transition-age youth identified as LGBTQ+, compared to 41% of sheltered youth.

FIGURE 49. LGBTQ+ STATUS AMONG UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH



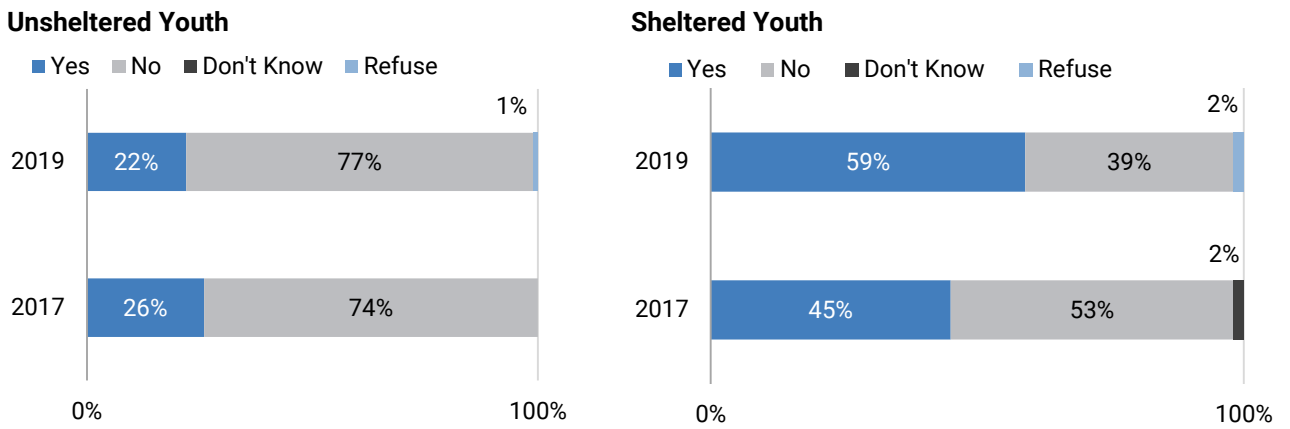
2019 Unsheltered n=73, Sheltered n=51; 2017 Unsheltered n=88, Sheltered n=58

¹⁶ True Colors Fund. (2017). Our Issue. Retrieved 2017 from <https://truecolorsfund.org/our-issue/>

FOSTER CARE AMONG UNACCOMPANIED HOMELESS CHILDREN AND TRANSITION-AGE YOUTH

Twenty-two percent (22%) of unsheltered unaccompanied children and transition-age youth reported a history of foster care, compared to 59% of sheltered youth.

FIGURE 50. HISTORY OF FOSTER CARE AMONG UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH



2019 Unsheltered Unaccompanied Children and Transition-Age Youth Survey Population n=73, Sheltered Unaccompanied Children and Transition-Age Youth Survey Population n=51; 2017 Unsheltered Unaccompanied Children and Transition-Age Youth Survey Population n=84, Sheltered Unaccompanied Children and Transition-Age Youth Survey Population n=53



INDIVIDUALS EXPERIENCING CHRONIC HOMELESSNESS

HUD defines a person experiencing chronic homelessness as someone who has experienced homelessness for a year or longer—or who has experienced at least four episodes of homelessness totaling 12 months in the last three years—and also has a disabling condition that prevents them from maintaining work or housing. This definition applies to individuals as well as heads of household who meet the definition.

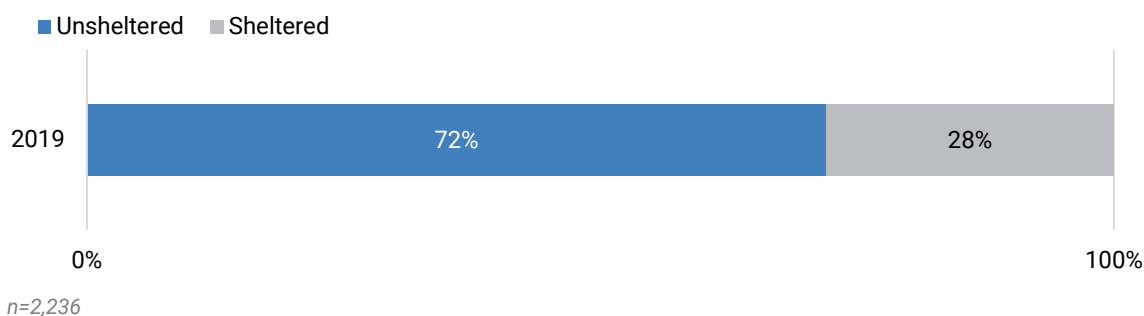
The chronically homeless population represents one of the most vulnerable populations on the street; the mortality rate for those experiencing chronic homelessness is four to nine times higher than that of the general population.¹⁷ Data from communities across the country reveal that public costs incurred by those experiencing extended periods of homelessness include emergency room visits, interactions with law enforcement, incarceration, and regular access to social supports and homeless services. These combined costs are often significantly higher than the cost of providing individuals with permanent housing and supportive services.

In 2017, HUD reported that 86,962 individuals, representing 24% of the overall homeless population, were experiencing chronic homelessness nationally.¹⁸ Chronic homelessness has been on the decline in recent years as communities across the country increase the capacity of their permanent supportive housing programs and prioritize those with the greatest barriers to housing stability.

NUMBER OF PERSONS EXPERIENCING CHRONIC HOMELESSNESS

In total, 2,236 individuals were experiencing chronic homelessness in Alameda County in 2019. Of those, 2,103 were single individuals and 61 were heads of households with children under 18 years of age in Alameda County.

FIGURE 51. SHELTER STATUS OF PERSONS EXPERIENCING CHRONIC HOMELESSNESS



¹⁷ United States Interagency Council on Homelessness. (2010). Supplemental Document to the Federal Strategic Plan to Prevent and End Homelessness: June 2010. Retrieved 2017 from https://www.usich.gov/resources/uploads/asset_library/BkgrdPap_ChronicHomelessness.pdf

¹⁸ Department of Housing and Urban Development. (2017). Annual Assessment Report to Congress. Retrieved 2018 from <https://www.hudexchange.info/resources/documents/2017-AHAR-Part-1.pdf>

SINGLE INDIVIDUALS EXPERIENCING CHRONIC HOMELESSNESS

An estimated 2,103 single individuals were experiencing chronic homelessness in 2019. This constitutes a 26% increase over the number of single individuals experiencing chronic homelessness in 2017. Seventy-seven percent (77%) of individuals experiencing chronic homelessness in 2019 were unsheltered, while 23% were residing in emergency shelter and safe haven programs.

In 2019, single individuals experiencing chronic homelessness represented 26% of the overall population experiencing homelessness in Alameda County.

FAMILIES WITH CHILDREN EXPERIENCING CHRONIC HOMELESSNESS

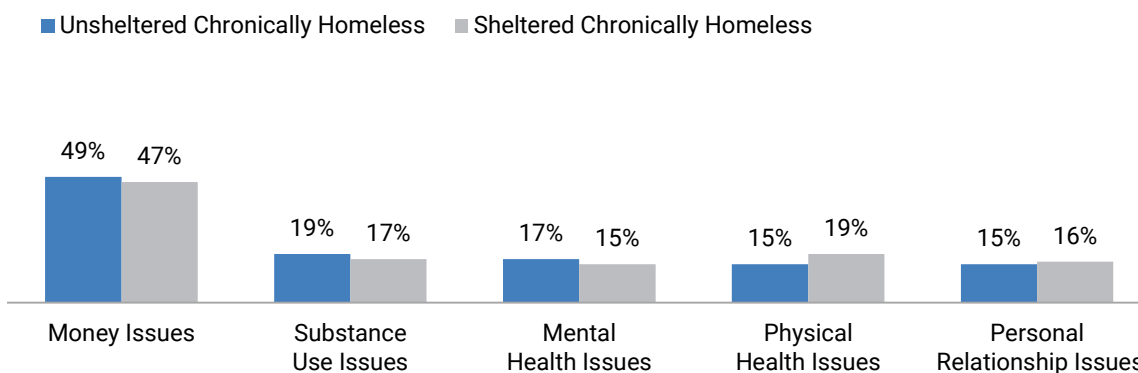
In 2019, 61 families were experiencing chronic homelessness, including 61 heads of household and 72 family members for a total of 133 people. The majority (98%) were identified in emergency shelters. Thirty-six percent (36%) of family households were experiencing chronic homelessness in 2019, compared to 12% in 2017.

PRIMARY CAUSE OF HOMELESSNESS AMONG THOSE EXPERIENCING CHRONIC HOMELESSNESS

Nearly half of both unsheltered and sheltered survey respondents experiencing chronic homelessness identified money issues as the primary cause of their homelessness (49% and 47% respectively). Sheltered respondents experiencing chronic homelessness were more likely to report a physical health issue as the primary cause of their homelessness than unsheltered respondents experiencing chronic homelessness; unsheltered respondents experiencing chronic homelessness were slightly more likely to report substance use or mental health.

While chronically homeless respondents reported some differences in the initial cause of their homelessness compared to non-chronic respondents, they reported encountering similar barriers to permanent housing.

FIGURE 52. PRIMARY CAUSE OF HOMELESSNESS AMONG CHRONICALLY HOMELESS PERSONS



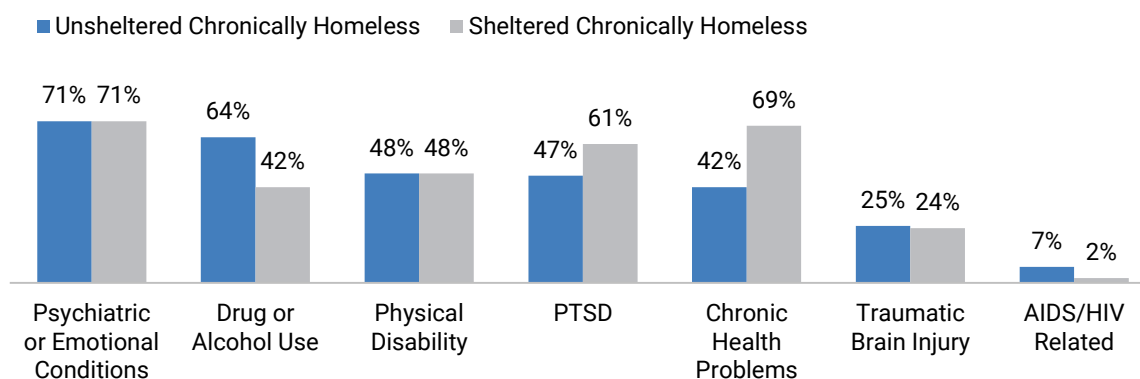
*Unsheltered Chronic n=332 respondents offering 441 responses, Sheltered Chronic n=131 respondents offering 174 responses
Note: Multiple response question, percentages will not add up to 100.*

HEALTH CONDITIONS AMONG PERSONS EXPERIENCING CHRONIC HOMELESSNESS

The definition of chronic homelessness requires a condition that prevents an individual from maintaining work or housing. The definition requires that only one be limiting, however, many survey respondents experiencing chronic homelessness reported experiencing multiple physical or mental health conditions. The following data report all conditions regardless of severity. It is important to recognize that all survey data are self-reported and influenced by participant's self-awareness and knowledge of a diagnosis.

Seventy-one percent (71%) of both unsheltered and sheltered survey respondents experiencing chronic homelessness reported living with psychiatric or emotional conditions. Sixty-nine percent (69%) of sheltered respondents experiencing chronic homelessness reported a chronic health problem or medical condition, compared to 42% of unsheltered respondents experiencing chronic homelessness. Sixty-four percent (64%) of unsheltered and 42% of sheltered respondents experiencing chronic homelessness reported drug or alcohol use, and 47% and 61% (unsheltered and sheltered, respectively) reported living with PTSD. Twenty-five percent (25%) of unsheltered and 24% of sheltered respondents experiencing chronic homelessness reported traumatic brain injury, and 7% and 2% (unsheltered and sheltered, respectively) reported living with AIDS/HIV related conditions.

FIGURE 53. HEALTH CONDITIONS AMONG CHRONICALLY HOMELESS PERSONS



*Unsheltered Chronic n=315, Sheltered Chronic n=62
 Note: Multiple response question, percentages will not add up to 100.*

In general, higher rates of health conditions were reported for those who were experiencing chronic homelessness when compared to their non-chronically homeless counterparts. For example, 48% of individuals experiencing chronic homelessness reported having a physical disability compared to 18% of non-chronically homeless individuals.



VETERANS

Many U.S. veterans experience conditions that place them at increased risk for homelessness, including higher rates of PTSD, traumatic brain injury, sexual assault, and substance abuse. Veterans experiencing homelessness are more likely to be unsheltered, and often remain unsheltered for extended periods of time.

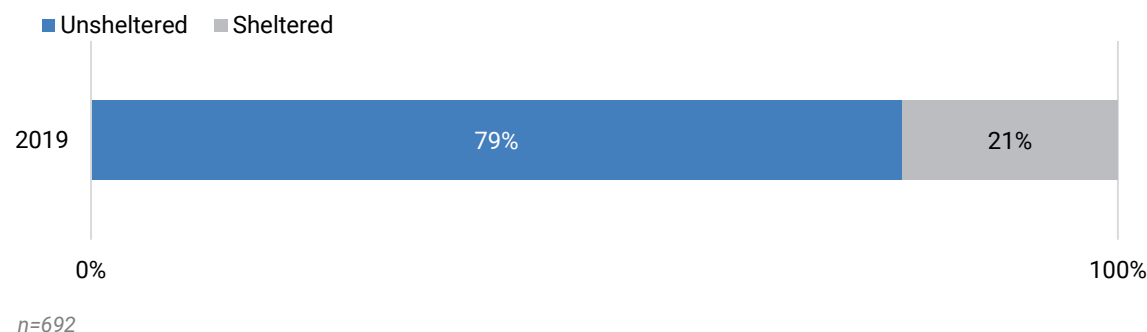
The U.S. Department of Veterans Affairs (VA) provides a broad range of benefits and services to veterans of the U.S. Armed Forces. These benefits can involve different forms of financial assistance, including monthly cash payments to disabled veterans, health care, education, and housing benefits. In addition to these supports, the VA and HUD partner to provide additional housing and support services to veterans currently experiencing homelessness or at risk of experiencing homelessness.

According to data collected nationally during the 2017 Point-in-Time Count, 40,056 veterans experienced homelessness on a single night in January.¹⁹

HOMELESS VETERANS

In total, 692 veterans were experiencing homelessness in 2019. Of those, 690 were single individuals and the remaining two were in families with children. Seventy-nine percent (79%) of veterans were unsheltered in 2019. In 2019, veterans represented 9% of the adult population, similar to 2017 (10%).

FIGURE 54. SHELTER STATUS OF VETERANS EXPERIENCING HOMELESSNESS

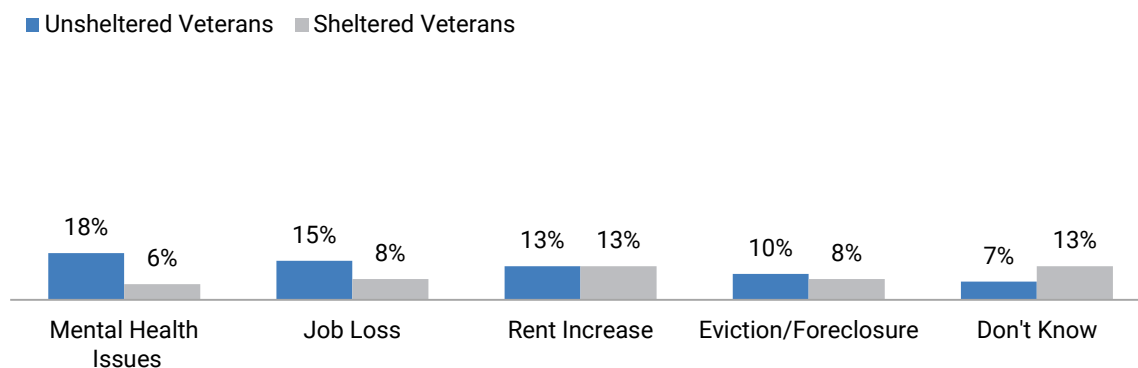


¹⁹ HUD. (2017). Annual Assessment Report to Congress. Retrieved from <https://www.hudexchange.info/resources/documents/2014-AHAR-Part1.pdf>.

PRIMARY CAUSE OF HOMELESSNESS AMONG VETERANS

Unsheltered veterans most frequently cited mental health issues as the primary cause of their homelessness (18%), while sheltered veterans most frequently cited a rent increase (13%). Unsheltered veterans attributed their homelessness to job loss at nearly twice the rate as sheltered veterans (15% and 8% respectively). Ten percent (10%) of unsheltered veterans and 8% of sheltered veterans reported their homelessness was the result of eviction or foreclosure. Seven percent (7%) of unsheltered veterans and 13% of sheltered veterans reported their homelessness was the result of "Don't Know".

FIGURE 55. PRIMARY CAUSE OF HOMELESSNESS AMONG VETERANS

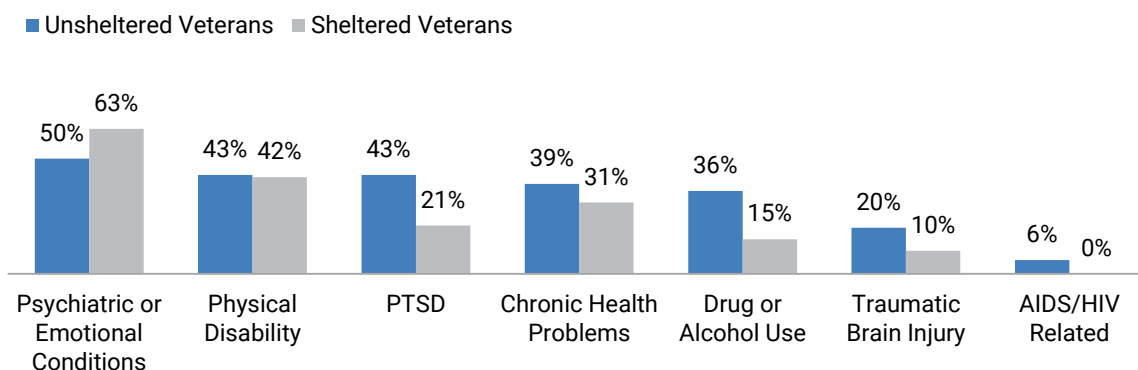


*Unsheltered Veterans Survey Population n=108 respondents, Sheltered Veterans Survey Population n=48 respondents
Note: Multiple response question, percentages will not add up to 100.*

HEALTH CONDITIONS AMONG VETERANS EXPERIENCING HOMELESSNESS

A slightly higher percentage of sheltered veteran respondents reported having one or more health conditions, 79% compared to 73% of unsheltered veterans. Sheltered veterans reported higher rates of psychiatric or emotional conditions compared to unsheltered veterans (63% and 50% respectively).

FIGURE 56. HEALTH CONDITIONS AMONG VETERANS



*Unsheltered Veterans n=109, Sheltered Veterans n=48
Note: Multiple response question, percentages will not add up to 100.*



Appendix A: Methodology

OVERVIEW

The purpose of the *EveryOne Counts! 2019 Homeless Count and Survey* was to produce a point-in-time estimate of people experiencing homelessness in Alameda County, a region which covers approximately 738 square miles. The results of the street and youth counts were combined with the results from the sheltered count to produce the total estimated number of persons experiencing homelessness in Alameda County on a given night according to the HUD definition of homelessness for the Point-in-Time Count. The subsequent, in-depth qualitative survey was used to gain a more comprehensive understanding of the experiences and demographics of those enumerated. A more detailed description of the methodology follows.

COMPONENTS OF THE POINT-IN-TIME COUNT METHOD

The Point-in-Time Count methodology used in 2019 had four primary components:

- i. General street count: an observation-based enumeration of unsheltered individuals between the hours of approximately 5:00 a.m. and 10:00 a.m.;
- ii. Youth count: a targeted enumeration of unsheltered youth under the age of 25 between the hours of approximately 2:30 p.m. and 7:30 p.m.;
- iii. Sheltered count: an enumeration of individuals residing in emergency shelter, safe haven, and transitional housing facilities on the night before the street count; and
- iv. Survey: an in-person survey of a randomized sample of unsheltered and sheltered individuals conducted by trained peer surveyors and program staff in the weeks following the general street count.

The Planning Process

To ensure the success and integrity of the count, many county and city departments and community-based agencies collaborated on community outreach, volunteer and guide recruitment, logistical plans, methodological decisions, interagency coordination efforts, and the inclusion of non-traditional programs such as Community Cabins and safe parking programs. ASR provided technical assistance for these aspects of the planning process while EveryOne Home convened stakeholders, provided project management support for implementing the methodology, and facilitated the training of volunteers and guides. This planning began in October of 2018.

Community Involvement

Local homeless and housing service providers, advocates, and people experiencing homelessness were valued partners in the planning and implementation of the count. Thanks to local efforts, the count included enumerators with a diverse range of knowledge, including expertise on areas frequented by persons experiencing homelessness, persons living in vehicles, and persons residing in encampments. Community partners were also key in recruiting individuals with lived experience of homelessness to participate in the street count and survey efforts. In 2019, a temporary position of Guide Recruitment

Lead was added. This position was key to increasing guide recruitment by 60% over 2017, and in the hiring and training of 164 guides with lived experience of homelessness for the general street count.

STREET COUNT METHODOLOGY

Goal

The goal of the general street count was to obtain an accurate count of persons sleeping outdoors and in vehicles, tents, or other places not meant of human habitation throughout Alameda County.

Definition

For the purposes of this study, the HUD definition of unsheltered homeless persons was used, as required for the federal Point-in-Time Count:

- 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.

Research Design

The methodology used for the *EveryOne Counts! 2019 Homeless Count and Survey* is commonly described as a “blitz count” since it is conducted by a large team of people over a very short period of time. For the general street count, every census tract in the county was canvassed in an observation-based count of individuals and families who appeared to be experiencing homeless.

In order to minimize potential duplicate counting, the timing of the general street count was coordinated to take place before most shelters released persons who slept there the previous night. General street count teams were also instructed to prioritize covering areas immediately surrounding any shelters in their assigned count location to eliminate any potential double-counting of individuals. The majority of general street count activities took place between 5:00 a.m. and 10:00 a.m., with teams in urban areas encouraged to complete their routes by 8:00 a.m. due to the higher density and mobility of the population experiencing homelessness in these areas.

Street count teams were generally comprised of at least one guide with lived experience of homelessness and up to three community volunteers. Guides assisted the team in navigating their assigned count area, identifying locations where unsheltered individuals were likely to be encountered while providing additional support in identifying people experiencing homelessness for inclusion in the tally. Volunteers assisted with transporting the team through their count area and performing the tally. Guides were compensated \$15 per hour for their time spent in the field on the day of the count and an additional \$15 for attending an in-person training session in advance of count day.

Census tracts served as the method of organizing the general street count; their boundaries are based on population density and determined by the federal government. Depending on the size and density of the census tracts, each team was assigned up to three contiguous census tract maps. Teams were instructed to canvas all accessible streets, roads, and highways within the boundaries of their assigned census tracts by foot, car, or a combination of both. Teams were asked to cover the entirety of their count assignment during the established hours of the street count, and to communicate with deployment center staff if they required additional assistance or time.

All street count teams were equipped with their assigned census tract map areas, tally sheets, training guidelines, deployment center staff contact information, and other supplies by ASR staff. ASR staff also verified that at least one person on each team had a cell phone available for use during the count and recorded their contact information on a volunteer deployment log.

In performing the tally, teams were instructed not to initiate direct contact with, or to otherwise disturb, people experiencing homelessness who were observed during the count. Leveraging the expertise of their guide and other team members, count volunteers were instructed to only observe and record basic demographic and location information.

Upon completion of their count assignment, teams returned to the deployment center to submit their tally sheets and maps and to debrief with deployment center staff. ASR staff reviewed all maps to verify that every accessible road and area within the map assignment had been covered, as well as all tally sheets to ensure information was recorded accurately.

Methodological Improvements

The 2019 street count methodology followed the established, HUD-approved methodology implemented in the 2017 count, with some key improvements.

To improve the local accuracy of the multiplier used to estimate the number of persons residing in tents and vehicles, a pre-count survey (*Multiplier for Persons in Vehicles and Tents*) was implemented countywide in December 2018. While general street count teams are typically able to observe a vehicle or structure that is being inhabited, they are not always able to accurately determine the number of persons residing in these locations through pure observation. Prior to the count, local outreach teams conducted a tally of persons residing in three different vehicle types (cars, vans, and RVs) as well as tents and improvised structures. The average household sizes of people identified residing in each of these location types during the pre-count survey were subsequently applied to tallies where the number of persons was unknown. In 2017, this multiplier was determined by survey responses only, which often resulted in a small sample of respondents, particularly among those residing in vehicles.

Additionally, gender for the unsheltered population was estimated using self-reported information from the survey in order to increase accuracy. In 2017, gender totals for the unsheltered population were determined using observation data collected from the general street count tally. In 2019, observational gender data from the tally sheet were used for deduplication purposes only.

Volunteer and Guide Recruitment and Training

Many individuals who live and/or work in Alameda County supported the county's effort to enumerate the local homeless population as volunteers. On the morning of January 30, 2019, nearly 500 volunteers and service providers participated in the general street count. An additional 164 individuals who were currently or had recently experienced homelessness served as guides to street count teams.

Extensive outreach efforts were conducted by EveryOne Home, including outreach to local non-profits serving people experiencing homelessness, local volunteer programs, and jurisdictional partners. Local shelters and service providers recruited and recommended the most knowledgeable and reliable individuals to participate in the count as guides. Additionally, the hiring of a Guide Recruitment Lead resulted in the increased participation, coordination, and training of guides throughout Alameda County. Volunteer recruitment goals were reached in December 2018.

In order to participate in the count, all volunteers and guides were requested to attend an hour-long training before the count. In addition to sharing a YouTube training for volunteers via email, in-person trainings were held and conducted by EveryOne Home in multiple locations throughout the county. Training covered all aspects of the count, including the definition of homelessness, how to identify individuals experiencing homelessness, potential locations where individuals experiencing homelessness may be located, how to safely and respectfully conduct the count, how to use the tally count sheets to accurately record observations, how to use the census tract maps to ensure the entirety of the assigned area was covered, and other tips to help ensure an accurate count.

On the morning of the count, all volunteers and guides received a brief refresher training conducted by ASR staff prior to forming teams and receiving their count assignment. The refresher training reiterated the instructions for navigating the census tract maps and recording observations on the tally sheet as well as essential safety protocols.

Deployment Site	# Census Tracts	RECRUITING GOAL		ACTUAL TURNOUT	
		# Guides	# Volunteers	# Guides	# Volunteers
Oakland	78	55	138	55	151
East Oakland	65	33	81	17	57
Total Oakland	143	88	219	72	208
North County	39	25	63	25	52
Mid County	70	34	85	30	104
East County	42	18	44	17	50
South County	66	29	73	20	75
Total	360	194	484	164	489

Safety Precautions

Every effort was made to minimize potentially hazardous situations. In census tracts with a high concentration of homeless encampments or with access restrictions, specialized outreach teams with knowledge of these specific areas were identified and assigned to these locations. Enumeration teams were advised to take every safety precaution possible, including bringing flashlights and maintaining a respectful distance from those they were counting.

Street Count Deployment Centers

To achieve complete coverage of the county within the early morning timeframe, the planning team identified six areas for the placement of dispatch centers on the morning of the count: Berkeley (North County), Downtown Oakland, East Oakland, Hayward (Mid-County), Livermore (East County), and Fremont (South County). Deployment centers were supported by staff from ASR and EveryOne Home, who were responsible for greeting volunteers and guides; facilitating the refresher training and deployment process; distributing count instructions, maps, and supplies to enumeration teams; and collecting and reviewing data from returning teams.

Volunteers selected their preferred deployment center at the time of registration based on their familiarity with the area or their convenience. The planning team determined the enumeration routes and assigned them to the deployment center closest or most central to the coverage area to facilitate the timely deployment of enumeration teams into the field.

YOUTH COUNT METHODOLOGY

Goal

The goal of the dedicated youth count was to improve the representation of unaccompanied children and transition-age youth under the age of 25 experiencing homelessness during the 2019 Point-in-Time Count. Many unaccompanied children and transition-age youth experiencing homelessness do not use existing homeless services and often stay in locations that are difficult to find or are separate from the unsheltered adult population. In addition, youth experiencing homelessness are generally difficult for adult street count volunteer to identify using observational methods, as young people frequently “hide in plain sight.” Therefore, traditional street count efforts are not as effective in reaching and counting youth.

Definition

For the purposes of the count, the HUD definition of unaccompanied youth was used. This definition includes children under the age of 18 and transition-age youth between the ages of 18 and 24 who are not accompanied by a parent or guardian, and who are also not parents presenting with or sleeping in the same place as their own child(ren). Unaccompanied youth include single youth, youth couples, and groups of youth presenting together as a household.

Research Design

The 2019 youth count methodology was comprised of two primary components:

- i. Youth street count: A street-based questionnaire of unsheltered and unaccompanied children and transition-age youth conducted in specific areas throughout Alameda County by teams comprised of young people (age 18-24) with lived experience of homelessness and service providers; and
- ii. Youth count sites: A site-based questionnaire of unsheltered and unaccompanied children and transition-age youth conducted at specific service locations throughout Alameda County.

As in 2017, planning for the 2019 youth count included homeless youth service providers and youth with lived experience of homelessness. Participation of local youth service providers increased in 2019 to include an array of organizations representing the geographic diversity of the region as well as the population of young people experiencing homelessness.

A focus group was held in January 2019 with young people currently experiencing homelessness to identify “hot spot” locations that would be covered on the day of the youth street count where youth experiencing homelessness were known to congregate. It was also determined that youth experiencing homelessness would be more prominent on the street during the late afternoon and early evening hours rather than in the early morning when the general street count was conducted.

Service providers recruited youth with lived experience of homelessness and knowledge of where to locate other young people experiencing homelessness to serve as youth guides for the youth count. Covenant House Oakland, Youth UpRising (East Oakland), UC Berkeley Suitcase Clinic, YEAH! Covenant House, REACH Ashland Youth Center, Beyond Emancipation, VOICES Youth Center, and the Alameda County Youth Action Board led the recruitment of youth guides and of their staff to accompany and transport youth guides during the count. Youth guides were compensated \$15 per hour for their time, including time spent in training immediately prior to deployment.

The youth street count was conducted from approximately 2:30 p.m. to 7:30 p.m. on January 30, 2019. Youth street count teams comprised of at least one service provider staff member and between one and three youth guides administered the Youth Count Screening Tool to unsheltered young people in pre-identified areas of Alameda County. The Youth Count Screening Tool contained questions pertaining to young people’s age, gender identity, and current housing situation. Youth guides and service provider staff were trained to administer the questionnaire to any young person under the age of 25 who they believed to be unsheltered, and to provide young people who completed the questionnaire a \$5 BART ticket as a thank you gift for their participation. Youth street count teams were also provided tally sheets to count any young person who was believed to be unsheltered but who was unable to complete the Youth Count Screening Tool due to refusal, safety concerns, or other circumstances.

Additionally, service provider staff from MISSSEY, Our Kids, Youth UpRising, and REACH Ashland Youth Center administered the Youth Count Screening Tool to young people at their service locations during regular hours of operation. These locations were strategically selected in order to ensure youth who were less likely to be encountered via street outreach were included in the count.

Methodological Improvements

In 2019, the youth count methodology changed from an observation-based enumeration to a survey-based enumeration in order to improve the accuracy of the youth count and gain a better understanding of how young people experience housing crises in Alameda County.

Previously, youth count teams performed a visual tally similar to general street count teams, only focused on unsheltered youth under 25 years old. The methodology was updated to incorporate the Youth Count Screening Tool, a brief questionnaire designed to collect more detailed information on young people's living situation. The Youth Count Screening Tool was administered by youth street count teams and selected youth count site locations to every unsheltered youth encountered. Youth street count teams were also able to count youth using a tally sheet if the team believed the youth was unsheltered but was unable to complete the Youth Count Screening Tool.

While the Youth Count Screening Tool also collected information on young people experiencing housing instability, only data reported by young people who met the definition of the Point-in-Time Count are included in this report.

Street Count De-Duplication

Data from the youth count and general street count were compared and de-duplicated by assessing location, gender, and age. In total, five persons under the age of 25 were identified as duplicates and removed from the data set.

SHELTERED COUNT METHODOLOGY

Goal

The goal of the sheltered count is to gain an accurate count of persons temporarily housed in emergency shelter, safe haven, and transitional housing facilities across Alameda County. These data are vital to gaining an accurate, overall count of the homeless population and understanding where homeless persons receive shelter.

Definition

For the purposes of this study, the HUD definition of sheltered homelessness for the Point-in-Time Count was used. This definition includes individuals and families living in a supervised publicly or privately-operated shelter designated to provide temporary living arrangements.

Research Design

The occupancy and demographic information of people occupying emergency shelter, safe haven, and transitional housing facilities in Alameda County was collected for the night of January 29, 2019. All data for sheltered persons were gathered by Alameda County Department of Housing and Community Development lead staff either directly from the program or from Alameda County's Homeless Management Information System.

ENUMERATION CHALLENGES AND LIMITATIONS

Even though the Point-in-Time Count is most likely an undercount of the homeless population, the methodology employed—coupled with the housing survey—is still one of the most comprehensive approaches available. There are many challenges in any homeless enumeration, especially when implemented in a community as large and diverse as Alameda County. Point-in-Time Counts are “snapshots” that quantify the size of the population experiencing homelessness at a given point during the year. Hence, the count may not be representative of fluctuations and compositional changes in the homeless population seasonally or over time.

Regardless of how successful outreach efforts are, an undercount of the homeless population will result, especially of hard-to-reach subpopulations such as unsheltered families, unaccompanied youth, and limited English-language speakers. For a variety of reasons, unsheltered persons generally do not wish to be seen and make concerted efforts to avoid detection. Alternatively, persons residing in emergency shelter, safe haven, and transitional housing programs are much easier to enumerate due to the facility of collecting information directly from program site locations.

The methods employed in a non-intrusive visual homeless enumeration, while academically sound, have inherent biases and shortcomings. Even with the assistance of dedicated homeless service providers and persons with lived experience of homelessness, the methodology cannot guarantee 100% accuracy. Many factors may contribute to missed opportunities, such as the difficulty of identifying persons who are sleeping in vans, cars, recreational vehicles, abandoned buildings, or structures unfit for human habitation as well as families with children experiencing homelessness, who often seek opportunities to stay on private property rather than sleep on the streets.

SURVEY METHODOLOGY

Planning and Implementation

A survey of 1,681 unique individuals experiencing homelessness was conducted between February 1 and 28, 2019 to yield qualitative data about people experiencing homelessness in Alameda County. Data collected through the survey effort were used to estimate characteristics such as gender, race, and ethnicity of the unsheltered population by applying percentages of respondents to the number of individuals tallied during the street count. These data are also used for the McKinney-Vento Continuum of Care Homeless Assistance funding application as well as for the local development, planning, and evaluation of the community's rehousing efforts.

The survey elicited information such as gender, family status, military service, duration and recurrence of homelessness, nighttime accommodations, causes of homelessness, and health conditions through open-ended, closed-ended, and multiple response questions. Specific demographic characteristics such as ethnicity, race, health conditions, and subpopulations, were defined by and in compliance with HUD. Other research questions were formulated through community input, such as questions pertaining to residency and coordinated entry. The survey data bring greater perspective to current issues of homelessness and to the provision and delivery of services.

Surveys were conducted by peer survey workers with lived homeless experience. Training sessions were facilitated by ASR and EveryOne Home staff immediately following the general street count. Potential interviewers were led through a comprehensive orientation that included project background information as well as detailed instruction on respondent eligibility, interviewing protocol, and confidentiality. Peer survey workers were compensated at a rate of \$7 per completed survey.

It was determined that survey data would be more easily obtained if a thank you gift was offered to respondents in appreciation for their time and participation. Socks were provided as an incentive for participating in the 2019 homeless survey. The socks were easy to distribute, had wide appeal, and could be provided within the project budget. The incentives proved to be widely accepted among survey respondents. A thank you gift of a \$5 gift card was provided to adult survey respondents in emergency shelter and transitional housing programs and to youth survey respondents.

Survey Sampling

Based on a Point-in-Time Count estimate of 8,022 homeless persons, with a randomized survey sampling process, the 1,681 valid surveys represented a confidence interval of +/- 2% with a 95% confidence level when generalizing the results of the survey to the estimated population of individuals experiencing homelessness in Alameda County.

The 2019 survey was administered in shelters, transitional housing facilities, and on the street. Unsheltered survey quotas were developed based on the previous count year's unsheltered data and established for each jurisdiction within Alameda County. In order to ensure the representation of emergency shelter and transitional housing residents, survey quotas were created for each housing program to reach individuals and heads of family households living in these programs.

Strategic attempts were also made to reach individuals in various geographic locations and of various subset groups such as unaccompanied youth, racial and ethnic groups, veterans, domestic violence survivors, and families. One way to increase the participation of these groups was to recruit peer survey workers. As in 2017, *EveryOne Counts!* prioritized a peer-to-peer approach to data collection by increasing the number of surveyors currently experiencing homelessness.

In order to increase randomization of sample respondents, peer survey workers were trained to employ an "every third encounter" survey approach. Surveyors were instructed to approach every third person they considered to be an eligible survey respondent. Emergency shelter and transitional housing staff administering the survey to program residents were also instructed to survey every third head of household. If the person declined to take the survey, the surveyor could approach the next eligible person they encountered. After completing a survey, the randomized approach was resumed.

Data Collection

Care was taken by interviewers to ensure that respondents felt comfortable regardless of the street or shelter location where the survey occurred. During the interviews, respondents were encouraged to be candid in their responses and were informed that these responses would be framed as general findings, remain confidential, and would not be traceable to any single individual. Respondents were also allowed to skip or refuse to answer any question that made them uncomfortable or for which they were unwilling to share

Data Analysis

The survey requested respondents' initials and date of birth so that duplication could be avoided without compromising the respondents' anonymity. Upon completion of the survey effort, an extensive verification process was conducted to eliminate duplicates. This process examined respondents' date of birth, initials, gender, ethnicity, length of homelessness, and consistencies in patterns of responses to other survey questions.

SURVEY CHALLENGES AND LIMITATIONS

The 2019 Alameda County Homeless Survey methodology relies heavily on self-reported data collected from peer surveyors and program staff. While self-report allows individuals to represent their own experiences, self-reported data are often more variable than clinically reported data. However, using the peer-to-peer interviewing methodology is believed to enable respondents to be more candid with their answers and to help reduce the uneasiness of revealing personal information. Further, service providers recommended individuals who would be the best suited to conducting interviews and these individuals received comprehensive training about how to conduct interviews. The service providers and/or county staff who collected completed surveys also reviewed the surveys to ensure quality responses. Surveys that were considered incomplete or containing false responses were not accepted.

It is important to recognize that variations between survey years may result from shifts in the demographic profiles of surveyors, accessibility to certain populations, and changes to the survey instrument. While every effort was made to collect surveys from a random and diverse sample of unsheltered and sheltered individuals, the hard-to-reach nature of the population experiencing homelessness prevents a true random sampling. Recruitment of diverse and geographically dispersed surveyors was prioritized; however, equal survey participation across all populations may be further

limited by the participation and adequate representation of subpopulations in planning and implementation processes. This includes persons living in vehicles, unsheltered families, and limited English-language speakers.

It is for these reasons that Point-in-Time Count data should be used in conjunction with other community sources of data on individuals and families experiencing homelessness to gather a comprehensive understanding of the community.



Appendix B: Definitions and Abbreviations

Chronic homelessness – Defined by HUD as an unaccompanied individual or head of a family household with a disabling condition who has either continuously experienced homelessness for a year or more, or has experienced at least four episodes of homelessness totaling 12 months, in the past three years.

Disabling condition – Defined by HUD as a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, PTSD, or brain injury that is expected to be long-term and impacts the individual’s ability to live independently; a developmental disability; or HIV/AIDS.

Emergency shelter – The provision of a safe alternative to the streets, either in a shelter facility or through the use of stabilization rooms. Emergency shelter is short-term, usually for 180 days or fewer. Domestic violence shelters are typically considered a type of emergency shelter, as they provide safe, immediate housing for survivors and their children.

Family – A household with at least one adult and one child under the age of 18.

Homeless – Under the Category 1 definition of homelessness in the HEARTH Act, includes individuals and families living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements, or 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.

HUD – Abbreviation for the U.S. Department of Housing and Urban Development.

Precariously housed – A person who is staying with the household because they have no other regular or adequate place to stay due to a lack of money or other means of support.

Sheltered homeless individuals – Individuals who are living in emergency shelters or transitional housing programs.

Single individual – Refers to an unaccompanied youth or adult. The individual may be an unaccompanied child under the age of 18 living without a parent or guardian over the age of 18, or an adult who is part of a collection of adults living together as a household without any minor children living with them.

Transition-age youth – Young people between the ages of 18 and 24 years old who are not accompanied by a parent or guardian and are not a parent presenting with or sleeping in the same place as their own child(ren).

Transitional housing – Housing in which homeless individuals may live up to 24 months and receive supportive services that enable them to live more independently. Supportive services – which help promote residential stability, increased skill level or income, and greater self-determination – may be provided by the organization managing the housing, or coordinated by that organization and provided by other public or private agencies. Transitional housing can be provided in one structure or several structures at one site, or in multiple structures at scattered sites.

Unaccompanied children – Children under the age of 18 who are not accompanied by a parent or guardian and are not a parent presenting with or sleeping in the same place as their own child(ren).

Unsheltered homeless individuals – Individuals who are living on the streets, in abandoned buildings, storage structures, vehicles, encampments, or any other place unfit for human habitation.

Appendix C: Point-in-Time Count Results

The following tables include the *EveryOne Counts! 2019 Homeless Count and Survey* data submitted to HUD for individuals experiencing homelessness in Alameda County. Data are reported by three household types (households with at least one adult and one child, households with no children, and households with only children) and by shelter status (sheltered and unsheltered). Specific data on veteran households, youth and young adult households, and various subpopulations are also reported and included in the tables found in this section.

ALL HOUSEHOLDS

HOUSEHOLDS WITH AT LEAST ONE ADULT AND ONE CHILD

	Sheltered	Unsheltered	Total
Total number of households	161	9	170
Total number of persons	497	27	524
Number of children (under 18)	286	14	300
Number of young adults (18-24)	34	1	35
Number of adults (over 24)	177	12	189
Gender (adults and children)			
Female	320	16	336
Male	177	11	188
Transgender	0	0	0
Gender Non-Conforming	0	0	0
Ethnicity (adults and children)			
Non-Hispanic/Non-Latinx	377	21	398
Hispanic/Latinx	120	6	126
Race (adults and children)			
White	92	9	101
Black or African-American	288	12	300
Asian	0	0	0
American Indian or Alaska Native	13	0	13
Native Hawaiian or Other Pacific Islander	20	0	20
Multiple Races	84	6	90

Chronically Homeless			
Total number of households	60	1	61
Total number of persons	130	3	133

HOUSEHOLDS WITHOUT CHILDREN

	Sheltered	Unsheltered	Total
Total number of households	1184	6276	7460
Total number of persons	1193	6276	7469
Number of youth adults (age 18-24)	139	579	718
Number of adults (over age 24)	1054	5697	6751
Gender			
Female	404	2071	2475
Male	778	3933	4711
Transgender	8	114	122
Gender Non-Conforming	3	158	161
Ethnicity			
Non-Hispanic/Non-Latinx	1022	5199	6221
Hispanic/Latinx	171	1077	1248
Race			
White	308	2099	2407
Black or African-American	705	2774	3479
Asian	35	91	126
American Indian or Alaska Native	43	242	285
Native Hawaiian or Other Pacific Islander	16	91	107
Multiple Races	86	979	1065
Chronically Homeless			
Total number of persons	487	1615	2102

HOUSEHOLDS WITH ONLY CHILDREN

	Sheltered	Unsheltered	Total
Total number of households	20	9	29
Total number of children (persons under age 18)	20	9	29
Gender			
Female	13	5	18
Male	7	4	11
Transgender	0	0	0
Gender Non-Conforming	0	0	0
Ethnicity			
Non-Hispanic/Non-Latinx	9	7	16
Hispanic/Latinx	11	2	13

Race			
White	6	2	8
Black or African-American	7	6	13
Asian	0	0	0
American Indian or Alaska Native	3	0	3
Native Hawaiian or Other Pacific Islander	1	0	1
Multiple Races	3	1	4
Chronically Homeless			
Total number of persons	0	1	1

VETERAN HOUSEHOLDS

VETERAN HOUSEHOLDS WITH AT LEAST ONE ADULT AND ONE CHILD

	Sheltered	Unsheltered	Total
Total number of households	1	1	2
Total number of persons	2	3	5
Total number of veterans	1	1	2
Gender (veterans only)			
Female	0	1	1
Male	1	0	1
Transgender	0	0	0
Gender Non-Conforming	0	0	0
Ethnicity (veterans only)			
Non-Hispanic/Non-Latinx	1	1	2
Hispanic/Latinx	0	0	0
Race (veterans only)			
White	1	0	1
Black or African-American	0	1	1
Asian	0	0	0
American Indian or Alaska Native	0	0	0
Native Hawaiian or Other Pacific Islander	0	0	0
Multiple Races	0	0	0
Chronically Homeless			
Total number of households	0	0	0
Total number of persons	0	0	0

VETERAN HOUSEHOLDS WITHOUT CHILDREN

	Sheltered	Unsheltered	Total
Total number of households	146	544	690
Total number of persons	146	694	840
Total number of veterans	146	544	690
Gender (veterans only)			
Female	9	73	82
Male	137	445	582
Transgender	0	5	5
Gender Non-Conforming	0	21	21
Ethnicity (veterans only)			
Non-Hispanic/Non-Latinx	137	446	583
Hispanic/Latinx	9	98	107
Race (veterans only)			
White	38	180	218
Black or African-American	91	223	314
Asian	3	5	8
American Indian or Alaska Native	6	27	33
Native Hawaiian or Other Pacific Islander	1	11	12
Multiple Races	7	98	105
Chronically Homeless			
Total number of persons	27	197	224

YOUTH HOUSEHOLDS

UNACCOMPANIED YOUTH HOUSEHOLDS

	Sheltered	Unsheltered	Total
Total number of unaccompanied youth households	120	588	708
Total number of unaccompanied youth	143	588	731
Number of unaccompanied children (under 18)	20	9	29
Number of unaccompanied (18-24)	123	579	702
Gender (unaccompanied youth)			
Female	56	246	302
Male	73	302	375
Transgender	4	16	20
Gender Non-Conforming	0	24	24
Ethnicity (unaccompanied youth)			
Non-Hispanic/Non-Latinx	101	489	590
Hispanic/Latinx	42	99	141

Race (unaccompanied youth)			
White	28	120	148
Black or African-American	82	341	423
Asian	5	9	14
American Indian or Alaska Native	15	18	33
Native Hawaiian or Other Pacific Islander	2	9	11
Multiple Races	11	91	102
Chronically Homeless			
Total number of persons	0	64	64

PARENTING YOUTH HOUSEHOLDS

	Sheltered	Unsheltered	Total
Total number of parenting youth households	19	1	20
Total number of persons in parenting youth households	43	2	45
Total parenting youth (youth parents only)	19	1	20
Total children in parenting youth households	24	1	25
Number of parenting youth under 18	0	0	0
Number of children with parenting youth under 18	0	0	0
Number of parenting youth ages 18-24	19	1	20
Number of children with parenting youth age 18-24	24	1	25
Gender (youth parents only)			
Female	18	1	19
Male	1	0	1
Transgender	0	0	0
Gender Non-Conforming	0	0	0
Ethnicity (youth parents only)			
Non-Hispanic/Non-Latinx	19	1	20
Hispanic/Latinx	0	0	0
Race (youth parents only)			
White	0	0	0
Black or African-American	15	1	16
Asian	0	0	0
American Indian or Alaska Native	1	0	1
Native Hawaiian or Other Pacific Islander	0	0	0
Multiple Races	3	0	3
Chronically Homeless			
Total number of households	1	0	1
Total number of persons	2	0	2

ADDITIONAL HOMELESS POPULATIONS

	Sheltered	Unsheltered	Total
Adults with Serious Mental Illness	563	2027	2590
Adults with Substance Use Disorder	343	1554	1897
Adults with HIV/AIDS	38	169	207
Victims of Domestic Violence (optional)	122	385	507

Appendix D: Adult Survey & Youth Screening Tool

2019 Alameda County Housing Survey
 Interview Date: _____ Neighborhood or City: _____

Section A: Demographics

1. What are your initials? First _____ Middle _____ Last _____ (b1)

2. What is your birth date? Month _____ Day _____ Year _____

3. Which of the following best represents how you think of your gender? Male Female Gender non-conforming Refuse

4. Are you Hispanic or Latino? Yes No Don't know Refuse

5. Which racial group do you identify with most? (Share all that apply) White Black or African American Asian American Indian or Alaska Native Other Native Hawaiian or Pacific Islander Refuse

6. Do you consider yourself? Straight Bisexual Gay Lesbian Other Refuse

7. Are you currently pregnant? Yes No Don't know Refuse

8. Have you ever been in foster care? Yes No Don't know Refuse

9. Are you currently enrolled in school? Yes No Refuse

Section B: Veteran Status

1. Have you served in the U.S. Armed Forces? (Army, Navy, Air Force, Marine Corps, or Coast Guard) Yes No Don't know Refuse

2. Were you ever called into active duty as a member of the National Guard or as a Reservist? Yes No Don't know Refuse

3. Have you ever received health care or benefits from a VA (Veterans Administration) center? Yes No Don't know Refuse

4. Is anyone else in your household a veteran? Yes No Don't know Refuse

Section C: Accommodation

1. Where were you staying on the night of Tuesday, January 29th? (Shade 1) Backyard or storage structure A place in a house not normally used for sleeping Emergency shelter (Kitchen, foyer, hallway) or unconverted garage Outdoors/trees/parks Van Motel/hotel/cor Camp/RV Abandoned building/spot Tent Encampment Other: _____

1a. How many people, including yourself, usually stay inside your tent, car, van, or RV/camp? # people _____

2. Has the time you have been homeless? 7 days or less 8-30 days 1-3 months 3-6 months 7-11 months More than 1 year Refuse

3. How long have you been homeless this current time? (Shade 1) 1 time 2 times 3 times 4 times 5 or more times Refuse

4. How many times have you been homeless in the past 3 years, including this current time? (Shade 1) 1 time 2 times 3 times 4 times 5 or more times Refuse

5. Have you been living in an emergency shelter and/or encampment, abandoned buildings, etc.) for the past year (12 months) or more? Yes No Refuse

6. In addition to night now, how long would you stay you stayed in these areas or places (omit 11/13/2017) Days _____ Weeks _____ Months _____ Years _____

7. How old were you the first time you experienced homelessness? 0-15 years 16-24 years 25-39 years 40-49 years 50-64 years 65 or older Refuse

Section D: Household Members

1. How many people are in your household, including yourself? (b1)

2. Do you have any children under age 18? Yes No Don't know Refuse

3. Are you the biological or legal father of any child living with you? Yes No Don't know Refuse

4. Do you live alone or with other household members? Yes No Don't know Refuse

5. How are they related to you? Child Spouse Non-married partner Other family member Other non-family member

6. How old are they? Under 18 18-24 25 or older

7. How do they identify their gender? Male Female Transgender Gender Non-Conforming

8. Are they Hispanic or Latino? Yes No Don't know

9. Which racial group do they identify with most? (Shade all that apply) Black or African American Asian American Indian or Alaska Native Native Hawaiian or Pacific Islander Other Don't know

Shade Circles Like This → Net Like This →

Section E: Residency

1. Immediately before you became homeless, what type of place were you living in? (Shade 1)

A home owned or rented by you or your partner Juvenile justice facility Motel/hotel

A home owned or rented by friends/relatives Foster care placement Other: _____

Hospital or treatment facility Jail or prison Refuse

Subsidized housing or permanent supportive housing

2. At the time you most recently became homeless, what county were you living in? (Shade 1)

Alameda County Santa Clara County Other County in CA

San Francisco San Mateo County Out of State

Marin County Contra Costa County Refuse

3. How long have you lived in Alameda County? (Shade 1)

Less than 6 months 6 months to 1 year 1-4 years 5-9 years 10+ years Refuse

4. Which city in Alameda County do you consider your home? (Shade 1)

Albany Berkeley City of Alameda Dublin Emeryville Refuse

Fremont Hayward Livermore Newark Oakland None/Other

Piedmont Pleasanton San Leandro Union City Unincorporated area

5. What is the primary reason you stay in this location? (Shade 1)

I grew up here/it's my home Shelter/housing program

For a job/seeking work Access homeless services and/or benefits

Family/friends are here Access to VA services or clinic

LGBTQ community/acceptance Other: _____

Feel safe here

Section F: Prevention

1. What do you think is the primary event or condition that led to your homelessness? (Shade 1)

Aging out of foster care Eviction/Foreclosure Argument with family/friend/roommate

Incarceration Family or friends couldn't afford Death of a parent/spouse/child

Mental health issues To let me stay Divorce/Separation/Break-up

Physical health issues Job loss Family/Domestic Violence

Substance use issues Other money issues Other: _____

2. What could have prevented you from experiencing homelessness? (Shade all that apply)

Mental health services Conflict resolution with roommate Benefits/income

Employment assistance Adequate retirement income Mortgage assistance

Transportation assistance Help paying health care bills/insurance Child support

Alcohol/drug counseling Legal assistance Other: _____

Family counseling Help obtaining resources after leaving Refuse

Food assistance Hospital/call/prison/juvenile justice facility Don't know

Landlord mediation Landlord mediation

3. If you could get into any kind of housing right now, what kind would you like best? (Shade 1)

Assisted living (24-hour care) Other: _____

Clean and sober housing Not interested in housing now

Housing with support services Refuse

Independent, affordable rental housing

Section H: Health and Housing

1. Do you experience any of the following:

a. Any chronic health problem or medical condition (diabetes, cancer) Yes No Refuse

b. Post-traumatic Stress Disorder (PTSD) Yes No Refuse

c. Any psychiatric or emotional conditions (depression, schizophrenia) Yes No Refuse

d. A physical disability (including vision or hearing loss) Yes No Refuse

e. A traumatic brain injury to your brain from a bump, blow, or wound to the head? Yes No Refuse

f. Drug or alcohol abuse (including prescription drugs not prescribed for you) Yes No Refuse

g. An AIDS or an HIV related illness? Yes No Refuse

2. Does it keep you from holding a job, living in stable housing or taking care of yourself?

Yes No Refuse

Yes No Refuse

Yes No Refuse

Yes No Refuse

3. If you live with a spouse, a significant other or parent, do any of the following conditions prevent them from maintaining work or housing? (Shade all that apply)

Not Applicable Psychiatric or emotional condition HIV/AIDS

Chronic health problem Drug or alcohol abuse PTSD

Physical disability Traumatic brain injury Other: _____

Refuse

4. Are you currently experiencing home/domestic violence or abuse? (Including physical, emotional, or sexual abuse)

Yes No Refuse

5. Have you ever been physically, emotionally, or sexually abused by a relative, or another person you have stayed with (spouse, partner, sibling, parent, roommate)?

Yes No Refuse

Section I: Services and Assistance

1. If new money came into Alameda County to end homelessness, how should it be spent? (Choose top 3)

24/7 basic sanitation (toilets, showers, garbage) Employment training and job opportunities Affordable rental housing for very low income

Daytime drop-in centers Permanent help with rent/subsidy Assisted living/24-hour care

Emergency shelter Short-term financial assistance (back rent, credit repair, unpaid bills, and housing) Domestic violence shelters

Family reunification Safe parking for persons living in vehicles Short-term help with rent obtaining ID, etc.) Substance use and/or mental health services Housing with supportive services

Other: _____

2. What prevents you from using shelter services? (Shade all that apply)

Bugs Can't accept my pet Nowhere to store my stuff

Can't stay with my friends Far away Germs They are full

Can't stay with my partner/family Hours of operation Too crowded

Concerns for personal safety (violence, sexual assault) Lack of privacy Too many rules

Curfew Not enough staff Refuse

Section J: Coordinated Entry

1. Have you used Coordinated Entry? For example, have you been told to call 211, talk to an outreach worker, or visited a Hub/Housing Resource Center to access housing or services?

Yes No Don't know Refuse



2019 Alameda County Everyone Counts! Youth Count Screening Tool

Source: Street Survey Site

Interview Date: _____	Neighborhood or City: _____
Interviewer Name: _____	Interview Location: _____

1. What are your initials?

First _____ Middle _____ Last _____

2. What is your birth date?

Month _____ Day _____ Year _____

3. Which of the following best represents how you think of your gender?

- Male Female
- Transgender Male to Female
- Transgender Female to Male
- Gender non-conforming Refuse

4. Where did you stay last tonight? (Shade 1)

- Your home/apartment Van
- A friend's home/apartment Tent or encampment
- Couchsurfing Outdoors/streets/parks
- Motel/hotel Abandoned building or squat
- Emergency shelter Hospital
- Transitional housing Jail/juvenile detention/prison
- Backyard or storage structure Foster care placement
- Automobile/car Drug/alcohol treatment/detox center
- Camper/RV Other: _____
- Public facility (train station, transit center, bus stop)

5. Can you live where you stayed last night for the next 14 days?

- Yes
- No
- Don't know

6. Did you stay alone last night or with other people?

- With other people Alone (Please skip to Question 8)

7. Who did you stay with last tonight?

(shade all that apply and write how many people you will be staying with, for example if you will be staying with your mom and little sister please bubble parent and write in 1, then bubble sibling and write in 1)

<input type="radio"/> Parent or legal guardian(s)	
<input type="radio"/> Other adult family member(s)	
<input type="radio"/> Sibling(s) under the age of 18	
<input type="radio"/> My own child(ren) under 18	
<input type="radio"/> Friends	
<input type="radio"/> Roommates	
<input type="radio"/> Other: _____	

8. Have you accessed services at any of the following locations today?

- MISSEY
- Youth Uprising
- REACH Ashland Youth Center
- Our Kids, HCSA

Day	Month	Year	Initials	City	
<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	Office Use Only

Appendix E: Survey Results

The following tables include the aggregate results of select questions asked of individuals experiencing homelessness in Alameda County during the *EveryOne Counts! 2019 Homeless Survey*.

Section A: Demographics		Count	N %
Do you identify as LGBTQ+?	Yes	229	14%
	No	1453	86%
	Total	1682	100%
<i>Breakout of Respondents Identifying as LGBTQ+</i>	Bisexual	98	43%
	Lesbian	37	16%
	Gay	43	19%
	Transgender	38	12%
	Queer	18	8%
	Other	23	10%
	Total	229	100.0%
Are you currently pregnant?	Yes	35	6%
	No	575	92%
	Don't know	6	1%
	Refuse	9	1%
	Total	625	100%
Have you ever been in foster care?	Yes	238	14%
	No	1341	81%
	Don't know	10	1%
	Refuse	68	4%
	Total	1657	100%
Are you currently enrolled in school?	Yes	87	5%
	No	1523	92%
	Total	1651	100%

Section C: Accommodation		Count	N %
Where were you staying on the night of January 29, 2019?	Outdoors, streets, parks, encampments	625	37%
	Structure indoor area	261	15%
	Motel/hotel	176	10%
	Vehicle	162	10%
	Emergency transition or other shelter	458	27%
	Total	1682	100%
Is this the first time you have been homeless?	Yes	502	31%
	No	1037	64%
	Refuse	89	5%
	Total	1628	100%
How long have you been homeless this current time?	7 days or less	31	2%
	8-30 days	42	3%
	1-3 months	82	5%
	4-6 months	165	10%
	7-11 months	150	9%
	1 year	169	10%
	More than 1 year	861	53%
	Refuse	138	8%
	Total	1638	100%
In addition to right now, how long would you say you have stayed in these kinds of places total in the past 3 years?	Less than a year	362	29%
	1-3 years	423	34%
	4 years or more	477	38%
	Total	1262	100%

Section D: Cause and Prevention		Count	N %
What do you think is the primary event or condition that led to your homelessness?	Job loss	222	13%
	Eviction/Foreclosure	152	9%
	Incarceration	135	8%
	Substance use issues	167	10%
	Physical health issues	91	5%
	Divorce/Separation/Break-up	58	4%
	Rent increase	150	9%
	Argument with family/friend/roommate	85	5%
	Family/domestic violence	97	6%
	Mental health issues	201	12%
	Aging out of foster care	57	3%
	Family or friends couldn't afford to let me stay	115	7%
	Death of a parent/spouse/child	71	4%
	Other money issues	133	8%
	Other	84	5%
	Don't know	117	7%
		Total	1655
What resources might have helped you remain in your housing?	Rent assistance	549	33%
	Employment assistance	378	23%
	Benefits/income	492	30%
	Mental health services	341	21%
	Food assistance	143	9%
	Transportation assistance	144	9%
	Legal assistance	233	14%
	Alcohol/drug counseling	281	17%
	Family counseling	169	10%
	Conflict resolution with roommate	136	8%
	Help paying health care bills/insurance	99	6%
	Help obtaining resources after leaving institution	183	11%
	Landlord mediation	74	4%
	Don't know	132	8%
	Mortgage assistance	72	4%
	Child support	52	3%
	Adequate retirement income	54	3%
	Other	71	4%
	Refuse	92	6%
	Total	1658	100%

If you could get into any kind of housing right now, would kind would you like best?	Independent, affordable rental housing	896	55%
	Housing with support services	242	15%
	Assisted living (24-hour care)	62	4%
	Clean and sober housing	213	13%
	Not interested in housing now	54	3%
	Other: _____	59	4%
	Refuse	109	7%
	Total	1635	100%

Section E: Residency		Count	N %
In what county were you living at the time you most recently became homeless?	San Francisco	64	4%
	Other County in CA	71	4%
	Out of State	53	3%
	Alameda County	1267	78%
	Contra Costa County	36	2%
	Marin County	10	1%
	San Mateo County	21	1%
	Santa Clara County	32	2%
	Refuse	79	5%
	Total	1633	100%
How long have you lived in Alameda County?	Less than 6 months	63	4%
	6 months to 1 year	117	8%
	1-4 years	196	13%
	5-9 years	202	13%
	10+ years	882	57%
	Refuse	86	6%
	Total	1546	100%
What was the primary reason you stay in this location?	For a job/seeking work	104	6%
	To access VA services or clinic	14	1%
	Family/friends are here	236	15%
	To access homeless services and/or benefits	114	7%
	LGBTQ+ community/acceptance	27	2%
	I grew up here/it's my home	626	38%
	I feel safe here	222	14%
	Shelter/housing program	161	10%
	Other: _____	122	8%
	Total	1626	100%

Immediately before you became homeless, what type of place were you living in?	A home owned or rented by you or your partner	434	26%
	A home owned or rented by friends/relatives	525	32%
	Motel/hotel	133	8%
	Other: _____	135	8%
	Jail or prison	98	6%
	Subsidized housing or permanent supportive housing	101	6%
	Refuse	113	7%
	Hospital or treatment facility	55	3%
	Foster care placement	34	2%
	Juvenile Justice Facility	13	1%
	Total	1641	100%

Section G: Criminal Justice		Count	N %
Are you currently on probation?	Yes	137	9%
	No	1330	83%
	Don't know	36	2%
	Refuse	108	7%
	Total	1611	100%
Are you currently on parole?	Yes	52	3%
	No	1354	88%
	Don't know	26	2%
	Refuse	105	7%
	Total	1537	100%

Section H: Domestic Violence		Count	N %
Are you currently experiencing home/domestic violence or abuse?	Yes	99	6%
	No	1399	87%
	Refuse	101	6%
	Total	1599	100%
Have you ever been physically, emotionally or sexually abused by a relative, or another person you have stayed with?	Yes	420	26%
	No	1072	66%
	Refuse	128	8%
	Total	1620	100%

Section I: Services and Assistance		Count	N %
If new money came into Alameda County to end homelessness, how should it be spent?	24/7 Basic sanitation	405	25%
	Safe parking for persons living in vehicles	170	10%
	Emergency shelter	324	20%
	Daytime drop-in centers	236	14%
	Permanent help with rent/subsidy	632	38%
	Affordable rental housing	850	52%
	Shared housing	97	6%
	Assisted living/24-hour care	81	5%
	Housing with supportive services	318	19%
	Domestic violence shelters	99	6%
	Employment training and job opportunities	506	31%
	Substance use and/or mental health services	368	22%
	Family reunification	168	10%
	Short-term financial assistance	260	16%
	Short-term help with rent	165	10%
	Other	109	7%
Total	1649	100%	
What prevents you from using shelter services?	They are full	250	16%
	Germs	299	19%
	Bugs	434	28%
	They are too crowded	345	22%
	Concerns for personal safety	350	22%
	There are too many rules	359	23%
	They are too far away	126	8%
	There is nowhere to store my stuff	305	19%
	I can't stay with my partner/family	166	11%
	I can't stay with my friends	149	10%
	They don't accept my pet	164	10%
	Don't accept my gender or sexual orientation	43	3%
	Refuse	288	18%
	Total	1566	100%
Have you used Coordinated Entry?	Yes	729	45%
	No	686	43%
	Don't know	115	7%
	Refuse	79	5%
	Total	1609	100%



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Appendix G: Figure Sources

All Point in Time Count Data 2017-2019: The figure source for the data is *Applied Survey Research, (2017-2019) Alameda Homeless Census and Survey.*

All Homeless Survey Findings 2017-2019: The figure source for the data is *Applied Survey Research, (2017-2019) Alameda Homeless Census and Survey.*

All Subpopulation Data 2017-2019: The figure source for the data is *Applied Survey Research, (2017-2019) Alameda Homeless Census and Survey.*

All Point in Time Count and Survey Data 2009-2015: The figure source for the data is *Focus Strategies. (2009 – 2015). Alameda Countywide Homeless Count and Survey Report.*

All U.S. Census Data: The figure source for the data is *U.S. Census Bureau. (May 2017). American Community Survey 2017 1 Year Estimates, Table DP05: ACS Demographic and Housing Estimates. Retrieved from <http://factfinder2.census.gov>.*



Alameda County

HOMELESS COUNT & SURVEY

COMPREHENSIVE REPORT

2019