



2013 Sacramento Countywide HOMELESS COUNT REPORT

Prepared by Sacramento Steps Forward

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This report was prepared by Sacramento Steps Forward, a 501(c)(3) nonprofit organization that leverages public and private resources to ensure that individuals and families experiencing homelessness or the risk of homelessness are able to access housing services and resources on their path to economic stability.

Graphic design by 3Fold Communications.

2013 Sacramento Countywide Homeless Count Report

DATA

Summary Results

Sacramento Steps Forward (SSF) presents the following findings from the 2013 Point-in-Time Homeless Count. Held during the evening of January 24, 2013, the Homeless Count consisted of two distinct components: a sheltered count of persons living in emergency shelters and transitional housing and an unsheltered count and survey of persons living in places not meant for human habitation. The PIT count tracks the total number of homeless persons, the type of living situation, and subpopulation characteristics, including the number of long-time, disabled homeless persons, or the chronically homeless*. As the table below shows, of the 2,538 people counted, 786, or 31%, were without shelter, while the remaining 69% were in emergency shelters or transitional housing programs.

Summary Results

Characteristic	Emergency Shelters	Transitional Housing	Unsheltered	Totals
Chronically Homeless*	147	0	285	432
Other Homeless	661	944	501	2,106
Total Homeless	808	944	786	2,538

^{*}A chronically homeless person is an unaccompanied homeless individual with a documented disabling condition who has either been continuously on the street or in an emergency shelter for a year or more, or has had at least four episodes of homelessness in the past three years. A chronically homeless family is a family with an adult member who meets the definition of a chronically homeless person.

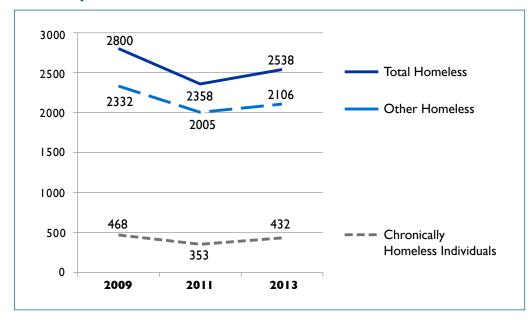
Sacramento's emergency shelter system is comprised of approximately 20 programs. The majority of beds for individuals are provided by three large shelters. There are also three large shelters for families with children. In addition, there are four seasonal shelter programs operating only during the winter months. Sacramento also has approximately 20 transitional housing programs, comprised of a small group of large programs (100 beds or more) and 10 to 15 smaller ones. For both emergency shelters and transitional housing, there is a combination of programs serving broad populations (men, women, families) and targeted programs (Veterans, mental health, HIV+, etc.). Sacramento's unsheltered homeless population sleeps in parks and recreational areas, as well as in downtown, midtown, and residential neighborhoods. While there are more visible concentrations of homeless people within the urban core and adjacent areas, there are people sleeping in places not meant for human habitation throughout the County.

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Summary Trends Over Time

With the 2013 Point-in-Time Count, Sacramento saw an increase in total homelessness and in chronic homelessness. Homelessness increased by 180 persons (7.6%), from 2,358 in 2011 to 2,538 in 2013. Chronic homelessness increased by 79 people (22.4%), from 353 in 2011 to 432 in 2013. However, if we look back further and compare the 2013 count results to 2009, a different picture emerges: compared to 2009, total homelessness actually decreased by 262 people (9.4%), from 2,800 in 2009; and chronic homelessness decreased by 36 people (7.7%) from 468.

Summary Trends Over Time



We have seen a consistent decrease in unsheltered homeless persons: In 2013, 786 unsheltered persons were counted, down from 955 in 2011(a 17.7% reduction) and 1,194 in 2009 (at 34.2% reduction). While this downward trend is noteworthy, it should also be noted that counting homeless persons sleeping in places not meant for human habitation is inherently difficult and we can assume that not every unsheltered person was in fact counted.

Subpopulation Characteristics

The Point-in-Time Count also tracks subpopulation characteristics, as presented in the table below. In addition to the significant increase in chronic homelessness discussed previously, the other population to increase significantly over prior years is homeless families, with a 32.6% increase since 2011 and a 47.5% increase since 2009. Baseline data first collected in 2013 includes chronically homeless families and Transition Age Youth. The data on chronically homeless families is considered baseline in this report, because we counted no chronically homeless families in the 2011 count, which was held right after HUD expanded its definition of chronic homelessness to include families (i.e., even though the definition was in force in 2011, its application in our system lagged behind the official start date). Data on Transition Age Youth (TAY), age 18-24, was collected for the first time this year. TAY experiencing homelessness are a potential pipeline into adult chronic homelessness; collecting data is a first step in assessing the needs of this subpopulation.

Subpopulation Characteristics & Trends Over Time

Characteristic	2009	2011	2013	% Change 2011-2013
Chronically Homeless Individuals	468	353	432	+22.4%
Persons in Chronically Homeless Families**	_	_	8	Baseline
Persons in Homeless Families	543	604	801	+32.6%
Veterans	426	297	302	+2.0%
Severely Mentally III	753	619	677	+9.4%
Chronic Substance Abuse	1,345	967	993	+2.7%
Persons with HIV/AIDS	60	50	39	-22.0%
Victims of Domestic Violence	699	516	504	-2.3%
Transition Age Youth in Households (age 18–24)***	_	_	85	Baseline
Unaccompanied Transition Age Youth (age 18–24)***	_	_	141	Baseline

^{**} Starting in 2011, the Federal definition of chronic homelessness expanded to include families. No chronically homeless families were identified in 2011.

Italicized percentages: the population size is so small the percent change over time should not be considered meaningful

^{*** 2013} is the first year that Transition Age Youth age 18-24 have been tracked in the Point-in-Time Count

Methodology – Understanding the Numbers

Readers should keep the following methodological factors and other considerations in mind to more fully understand the 2013 Point-in-Time Count data: the nature of percentages and the value of longitudinal comparisons, definition of key terms and concepts, and system effects. These impacts are discussed in detail below:

- Understanding percentages: When discussing small numbers, the addition of a few people can
 make the percentages seem like an extreme increase in categories. To fully interpret this report and
 data, we encourage the reader to also look at the raw numbers that are used to derive these
 percentages.
- Comparing data over time: It is also important to review our homeless count numbers over
 time. The current count indicates a sharp spike in total homelessness and chronic homelessness when
 compared to the previous count data from 2011. However, when we review these numbers over
 a longer time period, going back to the 2009 count, these increases disappear. This longer-range
 comparison, coupled with the shorter-term, gives us a better understanding homelessness in our
 community.
- What is transitional housing?: Transitional housing residents are considered homeless for the purpose of the Point-in-Time Count. There programs provide participants with stable housing and an array of services geared to moving them to self-sufficiency within up to two years. Some transitional housing programs are site-based, while others provide housing in leased apartments throughout the community, where participants "transition in place," taking over responsibility for rent payments for their apartments at the end of the program. We point this out here because transitional housing is a far more stable living situation than an emergency shelter or on the street, but these households are still counted as homeless. Traditional transitional housing programs are no longer considered to be a best practice by the U. S. Department of Housing and Urban Development (HUD), where other types of housing programs, such as permanent housing and rapid rehousing, are favored. This is noteworthy, because alignment with HUD's preferences will position Sacramento to be competitive nationally and to receive increased funding. SSF is educating the provider community on this important shift, part of Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act goals discussed in the Solutions Section of this report.
- Improved data quality: In Summer 2012, the Sacramento CoC transitioned to a new Homeless Management Information System (HMIS) software that includes **new features designed to improve data quality**. Intake screens in the new system require input, removing the option of skipping questions. In addition, built-in audit reports are able to capture the Don't Know and Refused data so users have the option to adjust these responses when appropriate. These changes are relevant to our data on subpopulation characteristics, such as chronic homelessness, because in previous counts, we were using a system where users did not need to capture this data to complete intakes, and they also did not have a mechanism for monitoring their own data quality.

- How we counted the Winter Sanctuary Program: In 2013, our Winter Sanctuary guests were considered part of the sheltered population, rather than unsheltered as was the case in the 2011. This shift was made based on direction from HUD, as more and more communities across the country began partnering with the faith community to shelter people in churches, synagogues, and other houses of worship. What was considered a place not meant for human habitation in 2011 became a recognized emergency shelter option in 2013. This significant shift in categories increased our shelter capacity by 100 beds (96 were full on count night) and should be kept in mind when considering the decrease in the number of people counted as literally homeless on the streets.
- Impact of changing system capacity: Sacramento's system of emergency shelters and transitional housing operates near, at, and even over capacity throughout the year. When capacity increases, so does the number of homeless persons counted. For example, between 2011 and 2013, a new transitional housing program opened, adding 105 beds (33 units) for families to the system. Every year that the inventory of emergency shelter and transitional housing beds increases, the sheltered point-intime count also increases.

ANALYSIS

Sacramento Steps Forward and its partners have thoroughly reviewed the 2013 Point-in-Time Count data. The remainder of this report presents our assessment of environmental factors that have likely contributed to the increases in overall homelessness, chronic homelessness, and family homelessness since the last count in 2011, followed by a "Call to Action" and our recommended solutions to end homelessness.

Examining recent environmental conditions closely is critical to understanding the increases in homelessness in the current count period. Although causal relationships cannot be demonstrated between these environmental conditions and the Point-in-Time Count increase in households experiencing homelessness, they can be considered important precipitating factors. The factors identified by SSF and our key partners are (I) Sacramento's weak economic climate, (2) decreased public funding for support services and anti-poverty assistance programs and the dismantling of these systems (3) diminishing housing resources, and (4) state and local criminal justice and law enforcement initiatives with unanticipated impacts on Sacramento's count of homeless persons.

Sacramento's Weak Economic Climate

a. Unemployment

The severe economic recession of the past few years has caused high, sustained unemployment rates, leading to a marked increase nationally in the number of people seeking emergency shelter and other homeless services. Sacramento's unemployment rates during this period were higher than State and national averages. Finding employment in a harsh economic climate of ongoing layoffs and company downsizing is even more difficult for those workers with less experience or those who have been out of work for a considerable period of time, as they find themselves competing with highly educated and skilled displaced workers.

A recent Brookings Institution study (2012) reports a very weak economy in Sacramento during the count period: "With a concentration in State government services that faced steep cuts in 2011, Sacramento is highly weighted with City, County, State and Federal government employees. Whenever government has to make budget cuts, Sacramento is impacted more than other areas of the State." The study also indicates that a key problem is the ever-expanding government sector competing with the region's private sector and industry. A compounding factor is that too many local businesses have become dependent on government contracts. After enjoying over a decade of rapid growth from 1993 – 2007, the study found, "Sacramento suffered declines in employment and output in 2007-2008, and steeper losses in 2008-2009. Unlike the nation, however, recovery continues to be slow and elude the metro area."

An Urban Institute brief (2013) also explores public-sector employment trends during and after the recession, finding that nationally "even as the private sector has slowly recovered, public sector job losses, particularly in state and local government, have continued to mount." The study also found that government job losses "hit the young, the less educated, and women the hardest."

b. Foreclosures

In addition to dismal unemployment rates, Sacramento also continues to struggle with high rates of foreclosure. In the first quarter of 2012, Sacramento had the sixth highest rate of foreclosure nationally among metropolitan areas with 200,000 people or more, according to Irvine-based research company RealtyTrac. One in 77 homes in the region had a foreclosure filing during the period (Sacramento Business Journal, April 2012).

In addition to households that lose their primary residence to foreclosure, foreclosure on homes and properties tenants are renting also occurs. According to the National Low Income Housing Coalition (NLIHC) report "Renters in Foreclosure" (2012), "renters make up 40% of families affected by foreclosure." In these cases, households are evicted even when they are paying their rent on time. In its report, the NLIHC shares findings of two studies linking foreclosure-displaced renters and homelessness: Eight percent of households served by Boston's Homeless Prevention and Rapid Rehousing Program reported they were seeking assistance because they had lost their homes to foreclosure, and 32% of this group reported they were formerly renters. The NLIHC report also quoted Hennepin County, Minnesota Commissioner Gail Dorfman's testimony before Congress in 2010 that 10% of families in local homeless shelters were renters from foreclosed properties. Families displaced by foreclosures then face the challenge of finding other housing they can afford, often leaving them homeless for at least some period of time and increasing the amount of community assistance needed (compared to prevention).

Decreased Funding for Support Services and Public Anti-Poverty Programs

During these tough economic times, support services to families were also being decreased, including rental and food assistance, child care, and physical and mental health care. At the State level, California faced significant funding shortfalls, forcing deep budget cuts in these critical support services. At the same time, individual charitable giving to emergency shelters and homeless services has decreased substantially in the recession's wake. Compounding state and charitable funding shortages is a decade-long era of shrinking County budgets, further eroding local government's ability to provide safety-net programs aimed at ending the ever-changing face of homelessness. This decrease in funding for support services hit when Sacramento was least able to cope with the loss, when coupled with the unemployment crisis discussed in Section 1. Households struggling with unemployment encountered a fragmented, overburdened and underfunded public safety-net system at a time when individuals and the community most desperately needed these resources.

Another factor contributing to homelessness in recent years, or at least halting our progress on ending homelessness, has been a lack of new California Mental Health Services Act (MSHA) and other funding. This funding was vital to the early success of Sacramento's 10 Year Plan to End Chronic Homelessness by enabling 515 chronically homeless individuals to move to new or leased permanent supportive housing between 2007 and 2009. MHSA funds are a tremendous resource in Sacramento and throughout the State, but this funding only goes so far and is simply not enough to fully meet the need, particularly during tough economic times.

The need for mental health services among Sacramento's homeless population is greater than the general population: According to the California Department of Mental Health, the estimated prevalence of severe mental illness in adults in Sacramento County was 6.79% in 2000 (the most recent data available on the department's website), while the 2013 PIT Count found that 26.7% of the homeless population suffers from severe mental illness. In addition, chronic substance abuse affects 39.1% of homeless persons (these percentages can, and often do, overlap). Recent efforts on the part of the federal Substance Abuse and Mental Health Services Administration (SAMHSA) to convene a policy academy around this important issue are addressed in the Solutions Section later in this report.

Another factor that contributes to homelessness is the egregious practice of patient "dumping." On March 1, 2013, The Sacramento Bee published the first in a series of articles about one Nevada mental hospital's practice of busing psychiatric patients to other states, essentially dumping them and their not insignificant needs on other jurisdictions' doorsteps. The practice came to light after a schizophrenic homeless man was sent by bus from a Las Vegas mental hospital to Sacramento, without any local connections or supports waiting for him. This patient arrived suicidal and confused at a Sacramento homeless services complex in February. Subsequent investigation revealed that the Rawson-Neal Mental Hospital in Las Vegas and its umbrella agency, Southern Nevada Adult Mental Health Services, have bused roughly 1,500 patients to cities and towns across the nation since 2008, including 500 patients sent to California; at least 10 of these patients were bused without any family, friends or housing at their destinations.

Diminishing Housing Resources

Housing programs are competing for scarcer funding at the federal, state, regional and local levels. Current cuts to the Housing Choice Voucher Program and administrative resources for public housing authorities due to Sequestration will mean significantly reduced resources in this region, and may lead to even greater increases in homelessness.

A significant loss to our community was the end of the Homelessness Prevention & Rapid Re-Housing Program (HPRP), funded by the American Recovery and Reinvestment Act. Sacramento's HPRP focused on rapidly transitioning households out of homelessness and preventing at-risk households from entering homelessness. HPRP presented Sacramento County with ambitious goals, short timelines, and little structural framework to draw from. These services were provided with a very coordinated and collaborative approach using common tools and practices and a single point of entry to streamline the process. In slightly more than two years of operation, the program exceeded expectations. The original goal was to house or assist 1,800 households over the course of the program, but this goal was met only 15 months into the program. At the completion of the program in May 2012, the original goal was surpassed by 601 households for a total of 2,401 households consisting of 6,100 individuals assisted. The overall decrease in homelessness in the 2011 Count time period may have been attributable in part to this innovative one-time program. Sacramento received approximately \$11 million in various public and private funds to implement this program.

Another negative impact on affordable housing was the abolishment of redevelopment agencies throughout California on February 1, 2012, and a "slow-down" in the pipeline to develop permanent supportive housing, a critical strategy for reducing chronic homelessness. Redevelopment funding was one avenue that provided for the development of both affordable housing and permanent supportive housing because California's redevelopment agencies were required to provide 20% of their tax increment funds to support affordable housing activities. This funding loss greatly compromises the development of new supportive housing and creates additional demand for shrinking public and other funding.

Criminal Justice System and Law Enforcement Impacts

a. Prison Realignment in California

In 2011, Governor Brown Jr. signed Assembly Bill (AB) 109 and AB 117, historic legislation to reduce the number of inmates in the State's 33 prisons to 137.5% of design capacity by June 27, 2013, as ordered by the specially-convened three-judge Court and affirmed by the U.S. Supreme Court. Since October 2011, almost 50,000 released prison inmates have been returning to the communities where they committed their crimes, which may not necessarily be their homes. According to the Sacramento Sheriff's Department Reentry Council, more than

half of inmates report they will be homeless upon release. The unexpected numbers of homeless people in Community Release have local mental health and housing officials across the State trying to find quick solutions for an issue that often takes a year or more to resolve.

b. Local Anti-Camping Ordinance

Additionally, stricter enforcement of Sacramento's anti-camping ordinance, given a severe shortage of affordable housing and a "crack-down" on street feeding, could be an exacerbating factor in our numbers going up. Prior to the significant increase in enforcement of the ordinance in the past year, as well as enforcement of park curfews and more frequent warrant sweeps, many chronically homeless individuals had remained for the most part "hidden" in our community. With no place left to go, local ordinance enforcement efforts may have led to an increase in chronically homeless people who have entered our emergency shelter and transitional housing systems, where they are more likely to be counted than when they were living on the street.

SACRAMENTO'S CALL TO ACTION

Our community must come together to mobilize resources and public will to combat the rise in homelessness in Sacramento. The combined effects of the many factors discussed above have put pressure on the most vulnerable members of our community: people with chronic behavioral health and physical health issues, and those in families trying to obtain or maintain employment, support their children, and deal with severe economic stressors. During the time period of this count both of these population groups (the disabled and families) have been impacted by dwindling public resources and support, lack of employment opportunities, the ever-present risk of losing stable housing, and heightened competition for scarce affordable housing units. It is important to understand that this is a long and protracted economic recession and we are just beginning to turn the corner, with economic indicators such as the housing market only just starting to move in an upward direction. So many people in our community have been "clinging by their fingernails" to maintain a fragile housing and support system over a very long period of time, and, make no mistake, real and lasting "recovery" will take time. This Call to Action by Sacramento Steps Forward challenges everyone who lives, works or recreates in our community to become part of the solution to the complex issue that we call "homelessness." In combination, the national, state, and local opportunities discussed in the final section of this report really can end homelessness in Sacramento.

SOLUTIONS TO HOMELESSNESS IN SACRAMENTO National Opportunities

- a. Support returning levels of Housing and Urban Development and Health and Human Services

 Departments funding to previous *funding levels to provide adequate housing and services* for those at risk of becoming homeless and those who are experiencing homelessness.
- b. Request a *quick resolution of Sequestration funding reductions that impact people living in*poverty and at risk of homelessness, such as Housing Choice Vouchers (formerly "Section 8")

 and Meals on Wheels and many other Federal programs that provide critical support to families and individuals here in Sacramento.

State Opportunities

- a. Form a *California Interagency Council on Homelessness* to coordinate resources, including housing, to end homelessness across the State. Support a dedicated funding mechanism to fund affordable housing for Californians, such as an *Affordable Housing Trust Fund*.
- b. Increase the State's investment in behavioral health services and publicly funded programs that lift individuals and families out of poverty.

County and City Initiatives and Opportunities

Continue to build the capacity of the new private/public non-profit agency Sacramento Steps Forward to coordinate and maximize the use of potential new resources and lead the following initiatives:

- a. Support the **2013 One Day to Prevent Homelessness Campaign** to fund the work of Sacramento Steps Forward. When last conducted in 2010, this campaign raised \$400,000 and leveraged millions of federal dollars. The 2013 campaign will leverage diverse funding sources, including government, to maximize our community's investment in ending homelessness.
- b. Development and implementation of a **new 10 Year Plan to End Homelessness**. The new plan should be data- driven and based on best practices, targeting funding to populations particularly impacted, such as the chronically homeless and families. *Kaiser Permanente has already committed \$15,000 toward coordination of this planning effort.*
- c. Homeless Youth and Young Adult Initiative. Sacramento Steps Forward launched a Youth Initiative in 2013 to begin working towards the goal of ending youth homelessness in five years. The initial focus of the SSF Homeless Youth and Young Adult Initiative is Transition Age Youth (TAY), young adults between 18 and 24. Sacramento does not have an adequate supply of age and culturally appropriate emergency shelters or transitional housing. The baseline data on TAY provides opportunity to review systems within our region to improve supports for these young people in their transition into stable adulthoods. Although the needs of housing insecure TAY are similar to other housing insecure populations, the opportunity to interrupt cycles of poverty and eradicate chronic homelessness exists in developing a culturally relevant, TAY friendly, coordinated community strategy.

- d. Homeless Employment Initiative. Building on the success of the inaugural 2012 Homeless Employment Summit, Sacramento Steps Forward launched an Employment Initiative in 2013. The initiative supports efforts to increase employment for homeless persons by outlining and examining system alignment, increasing service integration, and expanding the utilization of data to support evidence-based policy-making. Employment initiatives will examine best practices, create and support local and regional partnerships to meet the workforce needs of high demand sectors and work to support industries with high growth potential.
- e. **SSF & Drexel University Collaboration**. SSF collaborated with Drexel University's Masters of Business Administration (MBA) students to develop innovative plans for implementation of the agency's Youth and Employment Initiatives. The students competed to create the winning innovative business plan in these focus areas to address homelessness. The first-place group submitted two innovative solutions that can be viewed at this video link: Drexel University Presentation.
- f. Implementation of Year- Round "Sanctuary." Expansion of this winter overflow program for single adults to year-round operations, and to include families, allows the community to be a part of the solution by providing housing opportunities to both families and individuals every night of the year throughout our community.
- g. Support **Safe Ground** as part of the solution to ending homelessness by providing a pathway to self-sufficiency. Safe Ground has been endorsed by both the Mayor of Sacramento and the Sacramento Steps Forward and Continuum of Care Boards as a part of the solution to end homelessness in Sacramento. The clinical structure and physical layout of the design have advanced a great deal since its initial concept and we believe it deserves a second look as part of our community's solution to end homelessness.
- h. Formation of a *Homeless Joint Powers Authority* to allow jurisdictions across the region to plan, focus and leverage dollars together to end homelessness across the region; homelessness does not end at the county line and neither should our response to it. This structure will reduce and eliminate duplication and will begin the cooperative process of looking at all problems through a regional lens.
- i. Create an *Emergency Shelter Fund*. Foundation funders are urged to seed a funding pool dedicated to innovation in the area of emergency housing. This fund will allow our community to immediately adopt and implement inventive strategies to house people in a flexible way that meets their needs and returns them to permanent housing and stability quickly. This fund can support many new ideas not currently funded through mainstream governmental resources. The Sacramento Region Community Foundation has already held some exciting preliminary talks around this very concept over the past six months.
- j. Continued participation in the *Chronic Homelessness Policy Academy*. Led by the Substance Abuse and Mental Health Services Administration (SAMHSA), the federal government has formed a Policy Academy in each of the four States with the highest incidence of chronic homelessness, including California. The goal of these Academies is to convene each State's "best and brightest" on the topic of homelessness to form a "think tank" that will develop innovative strategies and identify funding mechanisms to increase the production of permanent supportive housing, with the goal of decreasing chronic homelessness.

- k. Implementation of Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act Goals. Local implementation of this new legislation will result in the creation of a more efficient and flexible response to homelessness in Sacramento. Some key HEARTH features include: (1) a coordinated entry and assessment system that is easier to navigate and moves people as quickly as possible to their best-fit intervention; (2) a new and expanded definition of homelessness; (3) new data requirements, assuring that our investments are data-driven and evidence-based; (4) a new Federal Strategic Plan to End Homelessness, Opening Doors, that sets national goals to end chronic and Veteran homelessness within five years, and family, child and youth homelessness within ten; and (5) the streamlining of homeless programs into one Continuum of Care Program, providing communities with greater flexibility for how funds can be invested. As we move towards alignment with these HEARTH features and goals, SSF and the community will continue to increase system capacity, in order to move individuals and families into permanent stable housing as quickly as possible.
- I. At the intersection of federal and state policy and local implementation, *Health Care Reform* has the potential to provide increased behavioral health service dollars and leverage funding to create additional permanent supportive housing for the chronically homeless population in "Home Health" models. California's network of Federally Qualified Health Centers (FQHCs) already plays an integral role in meeting the behavioral and physical health care needs of chronically homeless persons: nearly three-fourths of all FQHC patients live below the Federal Poverty Level and almost all FQHCs serve homeless persons. Sacramento must be vigilant in identifying the potential benefits of Health Care Reform to the homeless persons and the system of care.

Sacramento Steps Forward thanks the community for this opportunity to present the 2013 Sacramento Countywide Homeless Count Report. We believe that homelessness is a community issue, and that no one organization can end homelessness alone. We look forward to reaching out to the community at large and working with diverse sectors to implement the opportunities discussed above. Our goal is to be a catalyst for innovative and creative solutions that are cost effective and data-driven to end homelessness in the Greater Sacramento Region.

CONTRIBUTORS

MKS Consulting/Focus Strategies — Lead researcher MKS Consulting/Focus Strategies participated in every phase of the 2013 PIT Count, from project planning and implementation to post-count reporting.

Community Link — Community Link provided support on count preparations and logistics. The Hands On Sacramento program recruited over 400 volunteers who were deployed in teams throughout the County to conduct the count.

Sacramento County Geographic Information System — The Department provided technical support in the creation of map materials and staffed a map command center the night of the count.

Sacramento County Department of Human Assistance — The Department supported the count in a variety of ways, including reserving the DHA Bureau from which the count was staged and providing transportation for Homeless Liaisons. The Department's Program Integrity Division provided two law enforcement officers to assist with outreach to all the jurisdictions with which we partnered in preparation for and on count night. They also staffed a law enforcement command center the night of the count.

Homeless Liaisons — Residents from several transitional and permanent supportive housing projects volunteered to accompany the count teams in the field. Liaisons came from Quinn Cottages, Serna Village, and Mather Community Campus.

Local Law Enforcement and Park Rangers — Jurisdictions across the County supported the count by providing information in mapping sessions and by designating representatives to assist volunteer teams in the field on count night.

Shelter and Housing Providers — Providers supported the count in a variety of ways, including volunteering in large numbers on count night and providing clean, quality data for the sheltered portion of the count.

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APPENDICES

Appendix I: Methodology and Background Information

Focus Strategies

The 2013 Sacramento County Point-in-Time (PIT) count uses a public places count with sampling methodology, which is one of only two general methodologies appropriate for a jurisdiction of the size and urbanization of Sacramento County. The public places with sampling methodology counts visibly homeless people in public places and then uses a statistical process to account for the geography not visited on the night of the count. This count integrates an interview with counted people to extrapolate characteristics of the unsheltered population.

Typically, homeless count enumerations undercount homeless people, because it is not possible to locate and count everyone (for example, people may be inside abandoned buildings, commercial buildings, or terrain too rough to cover completely on foot). Some homeless people may live and function entirely outside the knowledge of law enforcement, soup kitchens, or homeless services; these people are likely to not be counted during a one-day count using any methodology. An advantage to the geographic sampling methodology is that there is some information available about the extent of likely undercount from this methodology. In 2006, New York City conducted a study designed to test the accuracy of the geographic sampling methodology; they found that this approach successfully counted 85% of the total unsheltered homeless population during the Point-in-Time count.²

In the methodology used in Sacramento County since 2007, detailed information on known sleeping locations for homeless people is collected from local stakeholders and map boundaries are drawn to capture these spots and the areas immediately surrounding these locations. Each area was designated as a high-density or low-density area based on the density of homeless people expected to be found. High density areas were those areas that are likely to have at least 10 homeless people at the time of the count and can be fully covered by a team during the count timeframe; the remainder of the areas was designated low density.

Trained volunteers were sent to all of the high density areas and to a representative sample of low density areas. In addition to the mapped locations, an additional effort was made in Sacramento County to count and survey homeless people along the riverbanks. After the count, a statistical process is applied to the count of the low density sample areas to account for areas not covered, and added to the count of the high; the sum is the countywide unsheltered count.

Using the data from the street count, the total derived number of unsheltered individuals for 2013 reported to HUD is 786. A total of 735 persons and sleeping locations (e.g. tents or vehicles) were observed during the count. A valid statistical technique was applied to the tally observed to generate an estimate of the total unsheltered population. The total number reported is higher than those directly observed because the methodology extrapolation process adds people for the lower density areas of the County that could not be covered. Only 51 people were added to the count as a result of this process, reflecting a relatively low number of areas not surveyed by count teams and a low number of homeless people in low density areas.

Concurrent with the count, surveys were administered to counted persons (adults only) who were awake, willing, and able to participate. The survey collected additional information on where the respondent was living,

I The other is a service-site based two stage cluster sample design, such as used by Alameda County. See http://www.everyonehome.org/resources_homeless_count_I_meth.html for more information.

demographics for the respondent and his/her family, disabilities, and the length of time that the person has been homeless. In the analysis, only unsheltered respondents are included (subpopulation data on sheltered homeless is collected separately in the sheltered portion of the count). The data was cleaned and used to establish the proportions of the unsheltered homeless population that meets the various subpopulation characteristics. Detailed information about how the data was parsed and analyzed is presented in Appendix D. These proportions are then projected across the whole counted population, to compute the count of unsheltered homeless persons in each subpopulation.

Appendix 2: 2013 HUD Tables, Parts I & 2

Part I: HUD's Final Table 2013

2013 Homeless Populations

		Sheltered	Unsheltered		
Persons in Households with at least one Adult and one Child	Emergency	Transitional	Safe Haven		TOTAL
Number of Households	108	140	0	I	249
Number of Persons (Adults and Children)	373	423	0	5	801
Number of Persons (Age 18 or under)	239	250	0	4	493
Number of Persons (Age 18 to 24)	28	57	0	0	85
Number of Persons (Over Age 24)	106	116	0	I	223

Persons in Households with only Children					
Number of Households	4	0	0	2	6
Number of One-Child Households	4	0	0	I	5
Number of Multi-Child Households	0	0	0	I	ı
Number of Children in Multi-Child Households	0	0	0	3	3

Subtotal Households with Children	112	140	0	3	255
Subtotal Persons in Households with Children	377	423	0	9	809

Persons in Households without Children						
Number of Households**	410	460	0	721	1,591	
Number of Persons (Adults)	431	521	0	777	1,729	

Number of Persons (Age 18 to 24)	14	73	0	54	141
Number of Persons (Over Age 24)***	417	448	0	723	1,588

All Households/All Persons						
TOTAL HOUSEHOLDS	522	600	0	724	1,846	
TOTAL PERSONS	808	944	0	786	2,538	

² For details on the NYC count, see http://www.nyc.gov/html/dhs/downloads/pdf/hope08_results.pdf.

Part 2: HUD's Final Table 2013

2013 Homeless Subpopulations

	Sheltered*	Unsheltered	TOTAL
Chronically Homeless Individuals	147	285	432
Chronically Homeless Families	3	0	3
Persons in Chronically Homeless Families	8	0	8
Veterans	166	136	302
Female Veterans	18	3	21
Severely Mentally III	351	326	677
Chronic Substance Abuse	523	470	993
Persons with HIV/AIDS	15	24	39
Victims of Domestic Violence	220	284	504



Sacramento Countywide Homeless Street Count 2011 Summary Report

- Chronic Homelessness in Sacramento Has Decreased 50.8% Since 2007
- 15.8% Decrease in Overall Homelessness Since 2009

Count Results:

The Sacramento County Department of Human Assistance Homeless Programs (DHA) and Sacramento Steps Forward (SSF) present the following findings from the 2011 Point-in-Time Homeless Count. Held during the evening of January 27, 2011, the Homeless Count consisted of two distinct components: an unsheltered count and survey of persons living in places not meant for human habitation and a sheltered count (persons living in emergency or transitional housing). The 2011 Homeless Count findings are:

2011 Homeless Count Results

	Emergency Shelters	Transitional Housing	Unsheltered	Totals	% Change Since 2009
Chronically Homeless*	Ш	0	242	353	-24.6%
Other Homeless	473	819	713	2005	-14.0%
Total Homeless	584	819	955	2358	-15.8%

Using a formula created by the Corporation for Supportive Housing and the Urban Institute, it is estimated that the number of homeless people over the course of 2011 is 3961.

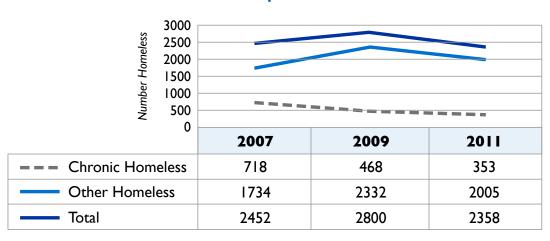
- Approximately 60% of the homeless counted were sheltered and 40% were on the streets.
- This year's data shows a 20.0% decrease in unsheltered homeless since the last Homeless Count, from 1194 in 2009 to 955 in 2011.
- Approximately 15% of the homeless population met HUD's definition of a chronically homeless individual.
- This year's data also shows an increase in family homelessness of 11.2% since the last

Homeless Count, from 543 in 2009 to 604 in 2011.

In addition to the substantial decrease of 50.8% in chronic homelessness between 2007 and 2011, this year's Homeless Count also found a 15.8% decrease in overall homelessness since 2009.

Since 2007, Sacramento County has employed a statistically reliable research-based method of counting that is approved by the Federal Department of Housing & Urban Development. Below is a year-to-year comparison of the 2007, 2009, and 2011 Homeless Counts.

Homeless Count Year-to-Year Comparison



^{*}A chronically homeless person is an unaccompanied homeless individual with a documented disabling condition who has either been continuously on the street or in an emergency shelter for a year or more, or has had at least four episodes of homelessness in the past three years.

As the chart above indicates, chronic homelessness in Sacramento has decreased steadily since 2007. The 2007 Homeless Count corresponded to the launch of the Ten Year Plan to End Chronic Homelessness and provided baseline data to evaluate progress in housing the chronically homeless. 515 chronic homeless individuals moved to new or leased permanent supportive housing from 2007 through

2009. The decrease in the number of chronically homeless individuals may be attributable to these intervention strategies. In addition, Homeless Prevention & Rapid Re-Housing programs funded by federal ARRA "stimulus" grants assisted over 1800 households from October 2009 through January 2011 and the overall decrease in homelessness may be attributable to this new effort.

Population Characteristics:

To provide population characteristics for those in shelters, data was pulled from the Homeless Management Information System (HMIS) and/or from questionnaires and case notes administered by shelter and housing staff. Homeless people counted on the street were asked a series of questions in interviews. The characteristics of the 2011 homeless population in Sacramento County include:

Characteristic	Number	% of Total	% Change Since 2009
Chronically Homeless Individuals	343	14.6%	-24.6%
Chronically Homeless Families**	0	0.0%	_
Veterans	297	12.6%	-30.3%
Severely Mentally III	619	26.3%	-17.8%
Chronic Substance Abuse	967	41.0%	-28.1%
Persons with HIV/AIDS	50	2.1%	-16.7%***
Victims of Domestic Violence	516	21.9%	-26.2%***
Unaccompanied Children (under 18)	27	1.1%	-22.9%***

^{**} Starting in 2011, the federal definition of chronically homeless has changed to include families. However, no homeless families meeting the criteria were identified this year.

Event Coordination and Participants:

The 2011 Homeless Count was a collaborative effort between homeless service providers, law enforcement agencies, County park rangers, DHA, and approximately 400 volunteers. Consulting services were provided by MKS Consulting. The volunteer ranks included 20 currently homeless persons that participated as liaisons for the count teams. All counters and survey takers attended a mandatory training on how to conduct the count and administer the survey. Count teams were assigned their count areas and dispatched between 8:00 PM and 9:00 PM and the count occurred between 8:30 PM and 12:30 AM. This year, 95 law enforcement officers participated, accompanying count teams in the field. Overall, count teams reported having a good experience in their after-count debriefing.

Future Efforts:

Sacramento Steps Forward is committed to aiding community planning efforts to end homelessness with continued reliable counts of homeless populations and needs. The next homeless count will occur in late January 2013. Information and results from this year's count will be reviewed and recommendations will be made for the next event.

For Additional Information:

For additional information, including access to the full *Sacramento Homeless Count 2011 Summary Results*, *Methodology & Technical Report*, please visit DHA at http://www.dhaweb.saccounty.net/ or Sacramento Steps Forward at http://www.sacramentostepsforward.com/.

^{***} Italicized percentages: the population size is so small the percent change over time should not be considered meaningful.



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