



# Marin County

HOMELESS COUNT & SURVEY

COMPREHENSIVE REPORT

2019



## ABOUT THE RESEARCHER

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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## SUGGESTED CITATION

Jaross, M., Kwak, Y., & Gallant, J. (2019). Marin County Homeless Count and Survey Comprehensive Report 2019. *Applied Survey Research*.

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# Acknowledgements

The considerable talents and efforts of many individuals helped ensure the success of this endeavor. Marin County and ASR would like to thank the many service providers who facilitated the process of homeless peer enumeration by recruiting count workers, assisting in the administration of surveys, and opening the doors of their facilities to host training sessions, deploy count workers, and distribute surveys. Finally, Marin County and ASR would like to thank the homeless count and survey workers, as well as the survey respondents, whose efforts are reflected throughout the findings of this report.

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Marin County Community Development Agency	Side by Side Transitional Age Youth
Marin County Council of Mayors and Councilmembers	

## TRAINING, DEPLOYMENT, & SURVEY DISTRIBUTION SITES

Marin City Health and Wellness Center  
*Special thanks to Dominique McDowell*

City of San Rafael  
*Special thanks to Andrew Hening and Lynn Murphy*

Homeward Bound of Marin, Novato  
*Special thanks to LaSaunda Tate*

Ritter Center, San Rafael  
*Special thanks to Sara Hunt*

St. Vincent de Paul Society of Marin, San Rafael  
*Special thanks to Howard Schwartz*

Richardson Bay Regional Agency  
*Special thanks to Bill Price*

## YOUTH COUNT AND SURVEY COORDINATORS

Side by Side TAY Space  
*Special thanks to Laura Taylor*

Marin County Office of Education  
*Special thanks to Karen Allen*



# Introduction

Every two years, during the last ten days of January, communities across the country conduct comprehensive counts of community members experiencing homelessness. Point-in-Time Counts measure the prevalence of homelessness in each community and collect information on individuals and families residing in emergency shelters and transitional housing, as well as on people sleeping on the streets, or in cars, abandoned properties, or other places not meant for human habitation.

The Point-in-Time Count is the only source of nationwide data on sheltered and unsheltered homelessness and is required by HUD of all jurisdictions receiving federal funding to provide housing and services for individuals and families experiencing homelessness. Currently, the Marin County Continuum of Care (CoC) receives approximately \$4.5 million dollars annually in federal funding, a key source of funding for the county's homeless services.

Continuums of Care report the findings of their local Point-in-Time Count annually to HUD. This information ultimately helps the federal government to better understand the nature and extent of homelessness nationwide. Point-in-Time Census and Survey data also help to inform communities' local strategic planning, capacity building, and advocacy campaigns to prevent and end homelessness.

Marin County worked in conjunction with Applied Survey Research (ASR) to conduct the 2019 Marin Homeless Point-in-Time Count and Survey. ASR is a social research firm with extensive experience in homeless enumeration and needs assessment that has worked with Marin County on their Point-in-Time Counts since 2015.

The Marin Homeless Point-in-Time Count consists of two primary components: (1) a point-in-time enumeration of unsheltered homeless individuals and families, such as those sleeping outdoors, on the street, or in parks, tents, or vehicles, and (2) a point-in-time enumeration of homeless individuals and families residing in temporary shelter, including emergency shelters or transitional housing facilities.

The 2019 Marin County Homeless Point-in-Time Count was a comprehensive community effort. With the support of 33 individuals with lived experience of homelessness and 116 community volunteers, the entire county was canvassed between the hours of 5:00 AM and 9:00 AM on January 28, 2019. This resulted in a peer-informed, visual count of unsheltered homeless individuals and families residing on the streets, in vehicles, makeshift shelters, encampments, and other places not meant for human habitation. Shelters and facilities reported the number of homeless individuals and families who occupied their facilities on the night of January 27.

The Point-in-Time Count also included a specialized count of unaccompanied children and transition-age youth under the age of 25. This dedicated count is part of a nationwide effort established and recommended by HUD to improve our 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.<sup>1</sup> The results of this effort contribute to HUD's initiative to measure progress toward ending youth homelessness by 2020.

In the weeks following the count, an in-depth survey was administered to 360 unsheltered and sheltered individuals of all ages who were homeless the night of the count. The survey gathered basic demographic details as well as information on service needs and utilization.

This report provides data regarding the number and characteristics of people experiencing homelessness in Marin County on a single night in January. Special attention is given to specific subpopulations, including chronically homeless, veterans, families, unaccompanied children under the age of 18, transition-age youth between the ages of 18 and 24, and older adults 60 and older.

To better understand the dynamics of homelessness over time, results from 2015 and 2017 are provided where available and applicable.

## **PROJECT OVERVIEWS AND GOALS**

In order for the 2019 Marin Point-in-Time Count and Survey to best reflect the experience and expertise of the community, ASR held planning meetings with local community members. These community members were drawn from city and county departments, community-based service providers, and other interested stakeholders. These individuals comprised the 2019 Planning Committee and were instrumental to ensuring the 2019 Marin Homeless Point-in-Time Count and Survey reflected the needs and concerns of the community.

The 2019 Planning Committee identified several important project goals:

- To preserve current federal funding for homeless services and to enhance the ability to raise new funds;
- To improve the ability of policy makers and service providers to plan and implement services that meet the needs of the local homeless population;
- To measure changes in the numbers and characteristics of the homeless population since the 2017 Marin Homeless Point-in-Time Count and Survey, and to track progress toward ending 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 who are chronically homeless.

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.

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<sup>1</sup> Significant deduplication efforts were made in 2019 to ensure unaccompanied children and youth were not captured in both the youth and general unsheltered count efforts. For more information on these efforts and the overall count methodology, please see Appendix 1.

## **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.

# Marin County

## Homeless Count & Survey

### 2019 Executive Summary

Every two years, during the last 10 days of January, communities across the country conduct comprehensive counts of the local homeless populations in order to measure the prevalence of homelessness in each local Continuum of Care.

The 2019 Marin County Point-in-Time Count was a community-wide effort conducted on January 28<sup>th</sup>, 2019. In the weeks following the street count, a survey was administered to 360 unsheltered and sheltered individuals experiencing homelessness in order to profile their experience and characteristics.

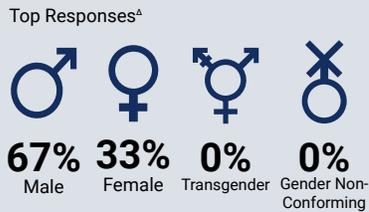
#### Census Population: Longitudinal Trend



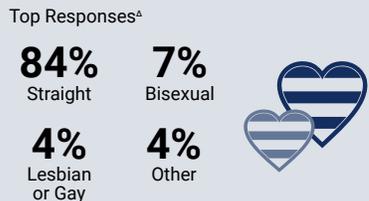
#### Residence Prior to Homelessness



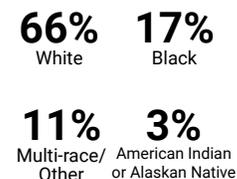
#### Gender



#### Sexual Orientation



#### Race



#### Ethnicity



#### Length of Time in Marin County



#### Children



19% of survey respondents have children under age 18.

#### Foster Care



#### Justice System Involvement



28% of survey respondents spent one or more nights in jail/prison in the past year.

#### 2019 Sheltered/ Unsheltered Population



#### Subpopulation\* Data

##### Chronically Homeless | 257 Individuals



##### Veterans | 99 Individuals



##### Families | 54 Families with 147 Members



##### Unaccompanied Children | 8 Individuals



##### Transition-Age Youth | 99 Individuals



##### Older Adults | 320 Individuals

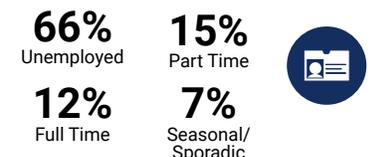


#### Educational Attainment



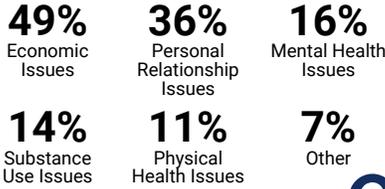
39% of survey respondents have at least some college education.

#### Employment Status



## Primary Event or Condition That Led to Homelessness\*

Top 6 Responses<sup>Δ</sup>



## Domestic Violence

**7%** reported they were currently experiencing domestic violence.



## First Episode of Homelessness

**30%** indicated their current episode of homelessness was their first. **55%** of those respondents were homeless for one year or more.

## Age at First Episode of Homelessness



## Ways to Obtain Permanent Housing\*

Top 4 Responses<sup>Δ</sup>



## Duration of Current Episode of Homelessness



## Self-Reported Health\*

Current health conditions that may affect the housing stability or employment of those experiencing homelessness.



**42%**  
Psychiatric/Emotional Conditions



**35%**  
Post-Traumatic Stress Disorder



**29%**  
Chronic Health Problems



**28%**  
Alcohol & Drug Use



**25%**  
Physical Disability



**14%**  
Traumatic Brain Injury



**1%**  
HIV/AIDS Related Illness

## Disabling Conditions

**38%** 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.

## Interest in Permanent Housing



**92%** of survey respondents said they would like affordable permanent housing if it became available soon.

## Government Services and Assistance

**58%** of survey respondents reported receiving government benefits.



## Services Requested\*

Top 6 Responses<sup>Δ</sup>



## Services Currently Accessing\*

Top 6 Responses<sup>Δ</sup>



## \*Subpopulation Definitions

### Chronically Homeless

An individual with one or more disabling conditions or a family with a head of household with a disabling condition who:

- » Has been continuously homeless for 1 year or more and/or;
- » Has experienced 4 or more episodes of homelessness within the past 3 years.

### Veterans

Persons who have served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty.

### Families

A household with at least one adult member (persons 18 or older) and at least one child member (persons under 18).

### Unaccompanied Youth & Young Adults

Youth under the age of 18 and young adults ages 18 through 24 (TAY) who are experiencing homelessness and living without a parent or legal guardian.

+ Multiple response question, results may not add up to 100%.

Δ Only displaying top responses, all response data will be available in full report.

Note: Some percentages may not add up to 100% due to rounding.

The complete comprehensive report includes a more detailed profile of the characteristics of those experiencing homelessness in Marin County. It is available at [housingfirst.marinhhs.org](http://housingfirst.marinhhs.org)

Source: Jaross, M., Kwak, Y., & Gallant, J. (2019). Marin County Homeless Count and Survey Comprehensive Report 2019. Applied Survey Research.





# Point-In-Time Count

The 2019 Marin County Homeless Point-in-Time Count and Survey included a complete enumeration of all unsheltered and publicly sheltered homeless persons. The general unsheltered count was conducted on January 28, 2019 from approximately 5:00 AM and 9:00 AM and covered all 828 square miles of Marin County.<sup>2</sup> The shelter count was conducted on the previous evening and included all individuals staying in emergency shelters, transitional housing facilities, and domestic violence shelters. The general unsheltered and shelter count methodology were similar to those used in 2017.

The methodology used for the 2019 Marin County Homeless Point-in-Time Count and Survey is commonly described as a “blitz count” since it is conducted by a large team over a very short period of time. The count is conducted early in the morning before individuals sleeping outside have woken up and moved from their sleeping areas and before those in shelters have left. The result is an observation-based count of individuals and families who appear to be homeless.

The count is then followed by an in-person, representative survey, the results of which are used to profile and estimate the condition and characteristics of the local homeless population. Information collected from the survey is used to fulfill HUD reporting requirements and to inform local service delivery and strategic planning efforts.

In a continuing effort to improve data on the extent of youth homelessness, Marin County also conducted a dedicated youth count. The dedicated youth count methodology was improved in 2019 to better ensure unaccompanied children and transition-age youth were not included in both the general unsheltered and youth count and to ensure that all youth were homeless per HUD’s definition on the night of the count. For more information regarding the dedicated youth count, deduplication, and project methodology, please see Appendix 1.

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<sup>2</sup>Volunteers covered all publicly accessible roads and additional areas identified as “hot spots” in the planning process.

## NUMBER AND CHARACTERISTICS OF HOMELESS PERSONS IN MARIN COUNTY

Figure 1. TOTAL NUMBER OF HOMELESS PERSONS, WITH TREND

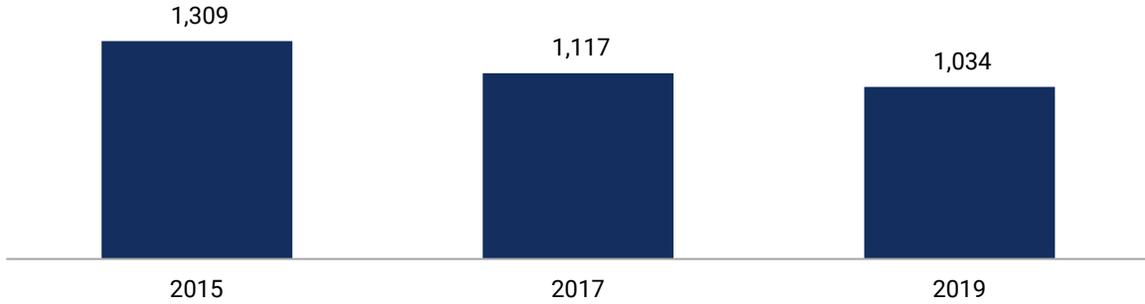
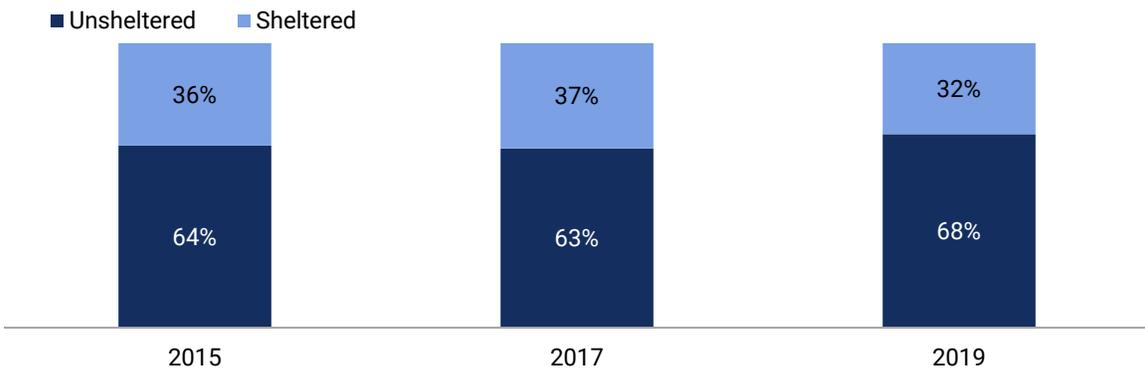
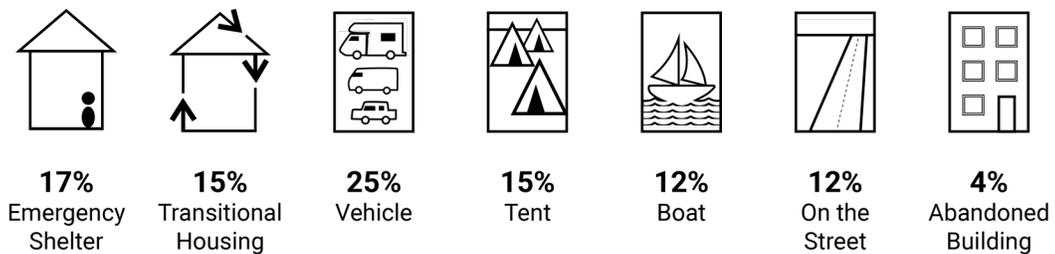


Figure 2. TOTAL HOMELESS COUNT POPULATION, BY SHELTER STATUS



	2015	2017	2019	17-19 % CHANGE
Sheltered	474	409	326	↓ 20%
Unsheltered	835	708	708	0%
<b>Total</b>	<b>1,309</b>	<b>1,117</b>	<b>1,034</b>	<b>↓ 7%</b>

Figure 3. PLACE OF RESIDENCE ON THE NIGHT OF THE COUNT



2019 n= 1,034

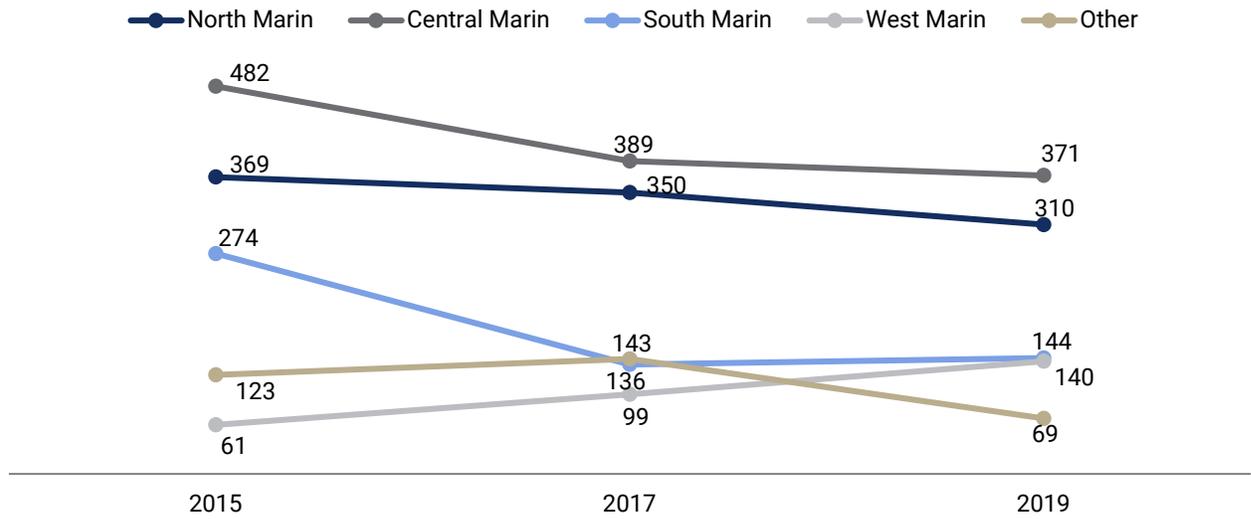
The number of those experiencing unsheltered homelessness continued to decrease in all regions of the county except for West Marin and South Marin: West Marin saw a population increase of 41 people since 2017, which may be in part due to increased outreach efforts and specialized teams familiar with the communities conducting the count in this region. With the planned closure of the rotating shelter in 2017, the sheltered number decreased by 20% from 2017 to 326 persons in 2019. Although the sheltered number decreased, the unsheltered number did not increase.

Figure 4. TOTAL HOMELESS COUNT POPULATION, BY JURISDICTION AND SHELTER STATUS

JURISDICTION	UNSHelterED			SHELTERED			TOTAL		
	2015	2017	2019	2015	2017	2019	2015	2017	2019
<b>North Marin</b>	<b>112</b>	<b>169</b>	<b>147</b>	<b>257</b>	<b>181</b>	<b>163</b>	<b>369</b>	<b>350</b>	<b>310</b>
Novato	112	169	147	257	181	163	369	350	310
<b>Central Marin</b>	<b>388</b>	<b>304</b>	<b>277</b>	<b>94</b>	<b>85</b>	<b>94</b>	<b>482</b>	<b>389</b>	<b>371</b>
San Anselmo	13	2	20	0	0	0	13	2	20
San Rafael	255	233	161	94	85	94	349	318	255
Corte Madera	11	26	39	0	0	0	11	26	39
Fairfax	17	13	5	0	0	0	17	13	5
Larkspur	3	2	28	0	0	0	3	2	28
Mill Valley	30	11	8	0	0	0	30	11	8
Unincorporated Central Marin	59	17	16	0	0	0	59	17	16
<b>South Marin</b>	<b>274</b>	<b>136</b>	<b>144</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>274</b>	<b>136</b>	<b>144</b>
Sausalito	62	36	25	0	0	0	62	36	25
Richardson Bay Anchor Outs	183	86	103	0	0	0	183	86	103
Belvedere	18	0	0	0	0	0	18	0	0
Unincorporated South Marin	11	14	16	0	0	0	11	14	16
<b>West Marin</b>	<b>61</b>	<b>99</b>	<b>140</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>61</b>	<b>99</b>	<b>140</b>
Unincorporated West Marin	61	99	140	0	0	0	61	99	140
<b>Other</b>	<b>--</b>	<b>--</b>	<b>--</b>	<b>123</b>	<b>143</b>	<b>69</b>	<b>123</b>	<b>143</b>	<b>69</b>
Domestic Violence Shelter*	--	--	--	82	89	69	82	89	69
Rotating Shelter*	--	--	--	41	54	0	41	54	0
<b>Total</b>	<b>835</b>	<b>708</b>	<b>708</b>	<b>474</b>	<b>409</b>	<b>326</b>	<b>1,309</b>	<b>1,117</b>	<b>1,034</b>

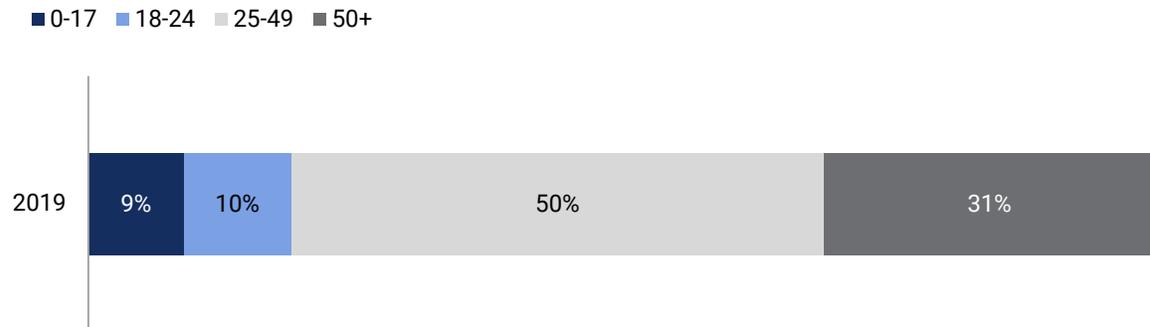
Note: Locations of domestic violence shelters remain undisclosed, and the 2017 and 2019 reports separate out the domestic violence shelters into their own category. The 2015 sheltered numbers listed do not match the 2015 report, which incorrectly placed several Novato facilities in San Rafael. In 2019, areas previously categorized as unincorporated were assigned to Unincorporated West Marin to more accurately reflect their locations.

Figure 5. TOTAL HOMELESS COUNT POPULATION, BY COUNTY REGION



Age can be an indicator of services needed. Nineteen percent (19%) of the population experiencing homelessness was under age 25, 50% were age 25 through 49, and 31% were age 50 and older. Marin County has more of those who are older and are more likely to experience physical health problems or cognitive decline.

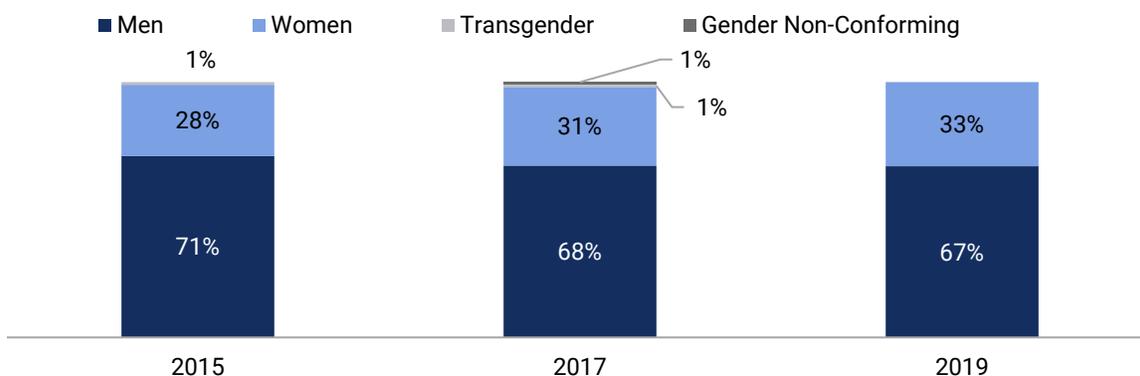
Figure 6. TOTAL HOMELESS COUNT POPULATION, BY AGE



2019 N=1,034

The gender of those experiencing homelessness in Marin County remained similar to 2017, with two-thirds (67%) of the population identifying as men and 33% identifying as women.

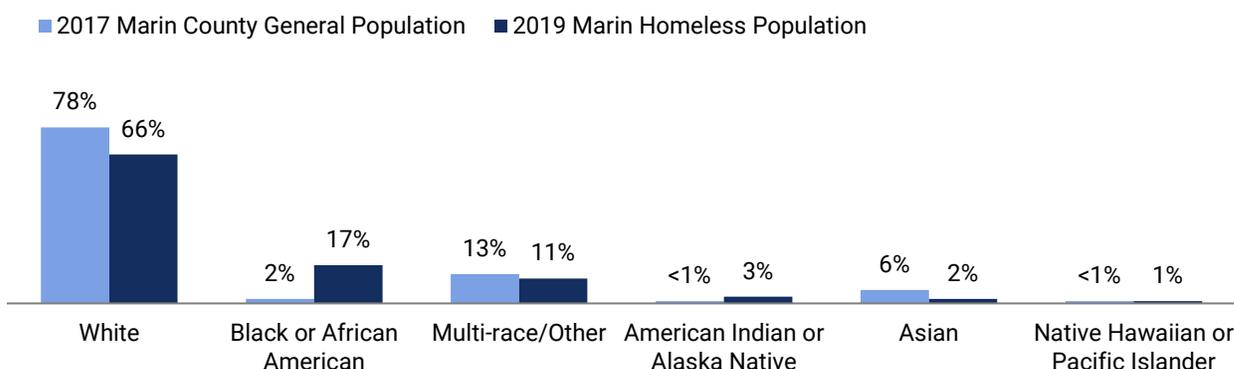
Figure 7. TOTAL HOMELESS COUNT POPULATION, BY GENDER



2015 N=1,309; 2017 N=1,117; 2019 N=1,034  
 Note: Percentages may not add to 100 due to rounding.

In comparison with the general population of Marin County, those identifying as Black or African American were significantly overrepresented in the population experiencing homelessness: while only 2% of the general population identified as black or African American, 17% of those experiencing homelessness identified as such. Similar to the 2015 and 2017 counts, 19% of those enumerated identified as Hispanic/Latinx, compared to 16% of the general Marin County population.<sup>3</sup>

Figure 8. TOTAL HOMELESS COUNT POPULATION, BY RACE<sup>4</sup>

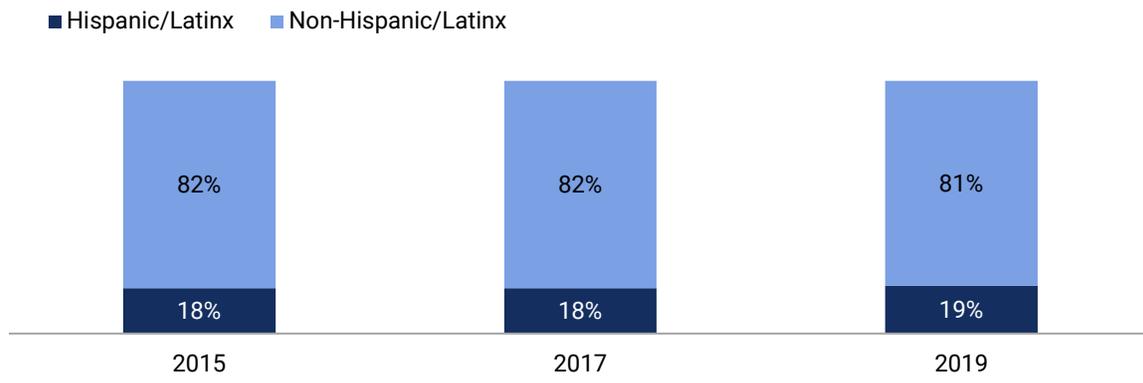


2019 N=1,034  
 Note: Percentages may not add to 100 due to rounding.

<sup>3</sup> U.S. Census Bureau. (2019). American Community Survey 2017 5-Year Estimates. Table DP05: ACS Demographic and Housing Estimates. Retrieved May 2019 from <http://factfinder2.census.gov>.

<sup>4</sup> U.S. Census Bureau. (2019). American Community Survey 2017 5-Year Estimates. Table DP05: ACS Demographic and Housing Estimates. Retrieved May 2019 from <http://factfinder2.census.gov>.

Figure 9. TOTAL HOMELESS COUNT POPULATION, BY ETHNICITY



2015 N=1,309; 2017 N=1,117; 2019 N=1,034

## POINT-IN-TIME COUNT: SUBPOPULATIONS

### CHRONICALLY HOMELESS

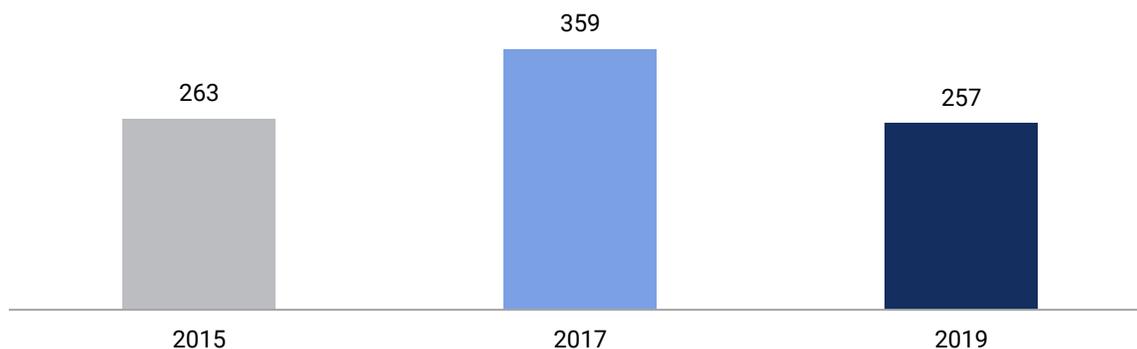
The U.S. Department of Housing and Urban Development (HUD) defines a chronically homeless individual as someone who has experienced homelessness for a year or longer—or who has experienced at least four episodes of homelessness totaling 12 months in the last three years—and also has a disabling condition that prevents them from maintaining housing. This definition applies to individuals as well as to heads of households with children who meet the definition.

The chronically homeless population represents one of the most vulnerable populations in the community; the mortality rate for those experiencing chronic homelessness is four to nine times higher than that of the general population.<sup>5</sup> 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 2018, HUD reported that 88,640 individuals, representing 24% of the overall homeless population, were experiencing chronic homelessness. 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.<sup>6</sup>

One-quarter (25%) of those in Marin experiencing homelessness were categorized as chronically homeless, a decrease from 32% of the population in 2017. While the national number increased in 2017, the percentage of those experiencing chronic homelessness in Marin County decreased by 28% in 2019; it is estimated that 257 individuals were experiencing chronic homelessness in January 2019.

Figure 10. CHRONICALLY HOMELESS CENSUS, WITH TREND

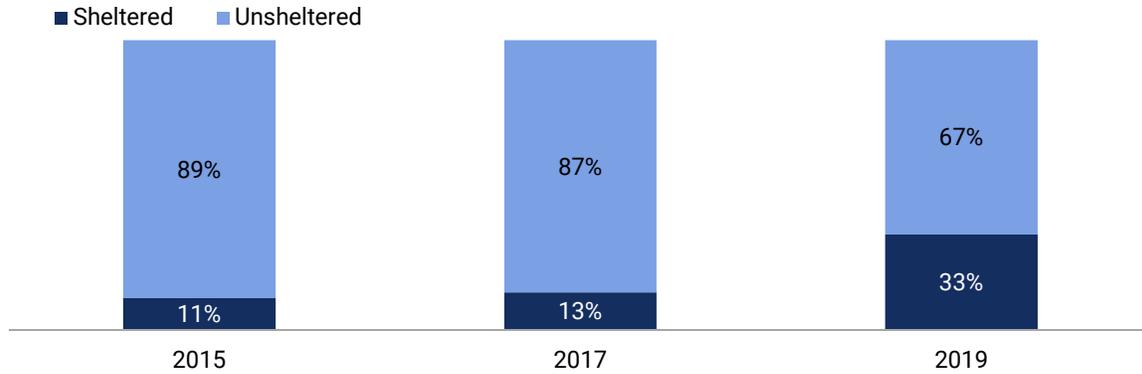


<sup>5</sup> United States Interagency Council on Homelessness. (2010). Supplemental Document to the Federal Strategic Plan to Prevent and End Homelessness: June 2010. Retrieved 2017 from [https://www.usich.gov/resources/uploads/asset\\_library/BkgrdPap\\_ChronicHomelessness.pdf](https://www.usich.gov/resources/uploads/asset_library/BkgrdPap_ChronicHomelessness.pdf)

<sup>6</sup> U.S. Department of Housing and Urban Development. (2018). Annual Assessment Report to Congress. Retrieved 2019 from <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>

Along with a total decrease in those experiencing chronic homelessness, the proportion of those who were unsheltered decreased from 87% in 2017 to 67% in 2019.

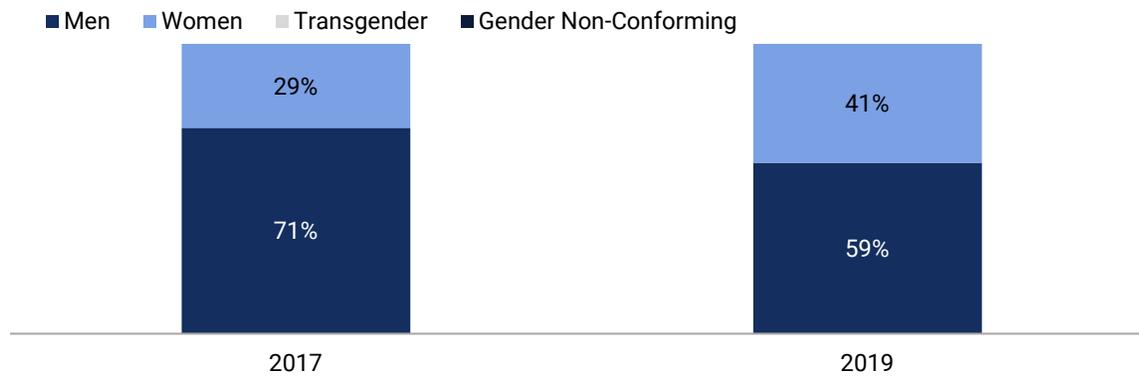
Figure 11. CHRONICALLY HOMELESS CENSUS, BY SHELTER STATUS



	2015	2017	2019	17-19 % CHANGE
Sheltered	30	42	86	↑ 105%
Unsheltered	233	287	171	↓ 40%
<b>Total</b>	<b>263</b>	<b>359</b>	<b>257</b>	<b>↓ 28%</b>

The majority (59%) of the population experiencing chronic homelessness identified as men in 2019, but women made up a larger portion of the population in 2019 (40%), up from 29% in 2017.

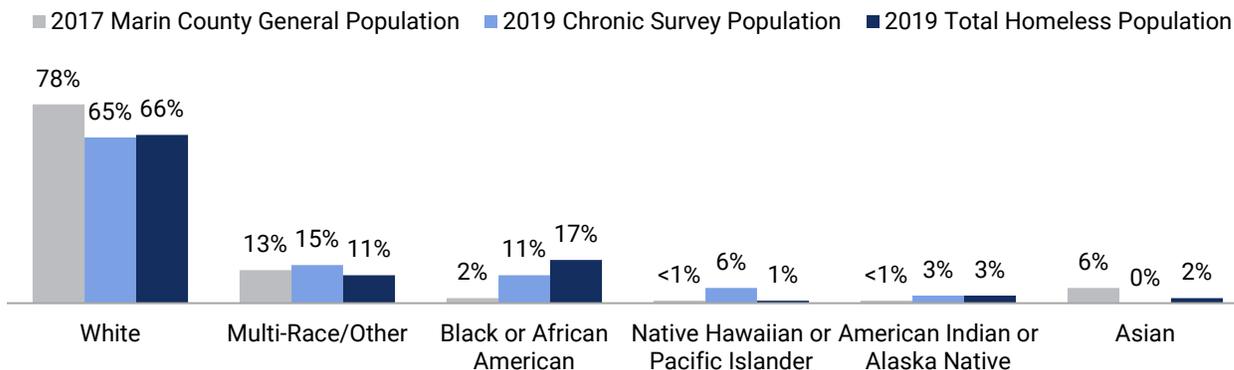
Figure 12. CHRONICALLY HOMELESS CENSUS, BY GENDER



2017 Chronic n=196; 2019 Chronic n=75

Similar to the entire population experiencing homelessness, people of color were disproportionately represented in the chronically homeless population. Approximately two-thirds (65%) identified as white, compared to 78% of the general population of Marin County, with 15% identifying as multiple races or “Other,” and 11% identifying as Black or African American. Those identifying as Hispanic or Latinx increased to 14% of the chronically homeless population, compared to 16% of the general Marin County population.<sup>7</sup>

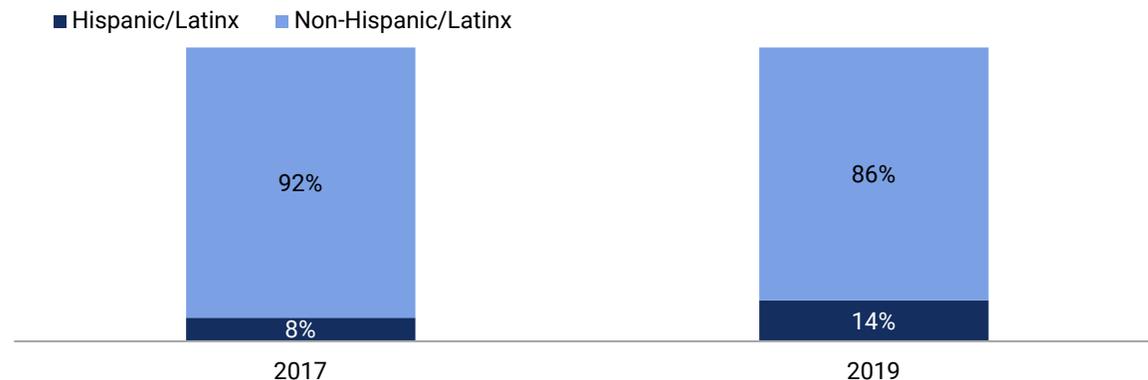
Figure 13. CHRONICALLY HOMELESS CENSUS, BY RACE



2019 Chronic n=72

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

Figure 14. CHRONICALLY HOMELESS CENSUS, BY ETHNICITY



2019 Chronic n=70

<sup>7</sup> U.S. Census Bureau. (2019). American Community Survey 2017 5-Year Estimates. Table DP05: ACS Demographic and Housing Estimates. Retrieved May 2019 from <http://factfinder2.census.gov>.

## VETERANS

Many U.S. veterans experience conditions that place them at increased risk for homelessness. Veterans experience higher rates of post-traumatic stress disorder (PTSD), traumatic brain injury (TBI), sexual assault, and substance abuse. Veterans experiencing homelessness are more likely to live on the street than in shelters, and often remain on the street 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.

The number of veterans in Marin County in 2019 increased slightly to 99 individuals from 94 in 2017, or 10% of the population experiencing homelessness. Overall, veteran homelessness has increased 50% since 2015, although more veterans are being sheltered (19% in 2019 up from 13% in 2017).

Figure 15. TOTAL NUMBER OF VETERANS, WITH TREND

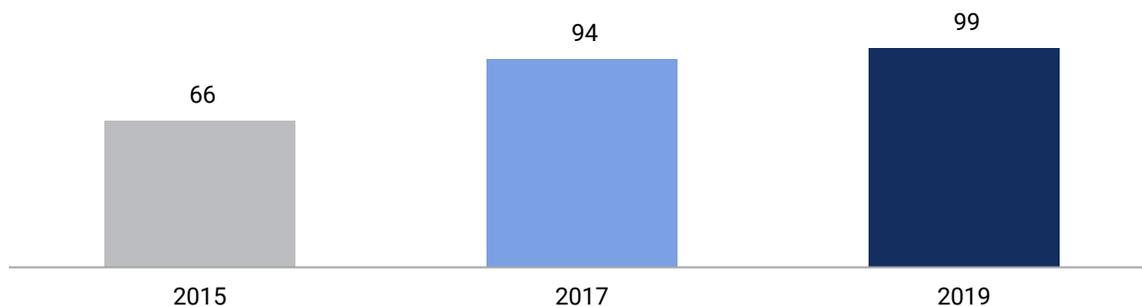
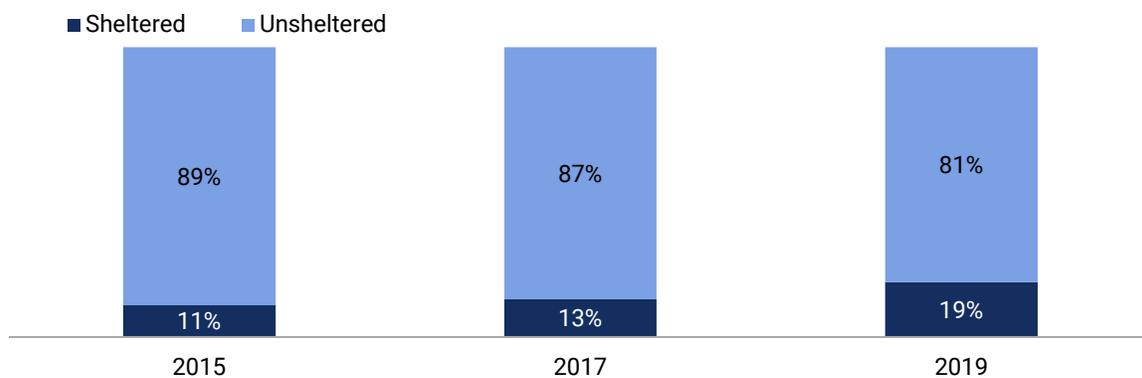


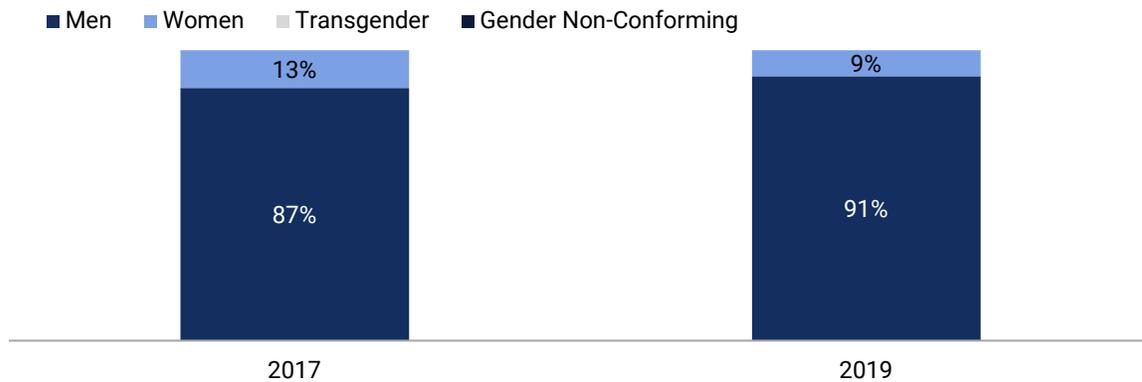
Figure 16. VETERAN CENSUS, BY SHELTER STATUS



	2015	2017	2019	17-19 % CHANGE
Sheltered	25	27	19	↓ 30%
Unsheltered	41	67	80	↑ 19%
<b>Total</b>	<b>66</b>	<b>94</b>	<b>99</b>	<b>↑ 5%</b>

The number of women veterans decreased slightly from 13% in 2017 to 9% in 2019.

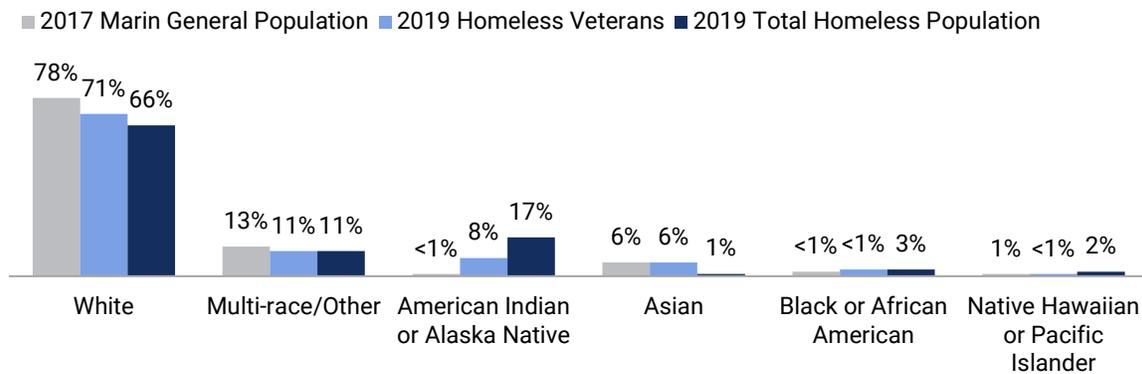
Figure 17. VETERAN CENSUS, BY GENDER



2017 Veterans n=94; 2019 Veterans n=99

Veterans experiencing homelessness more closely mirrored the racial makeup of Marin County’s general population than other subpopulations, with 71% identifying as white and 13% as multi-race or other. However, those identifying as American Indian or Alaska Natives were overrepresented in the homeless veteran population: 8% of homeless veterans identified as American Indian or Alaska Native and less than 1% of the general population identified as such. Additionally, 10% of homeless veterans identified a Hispanic or Latinx in 2019, compared to 16% of the general Marin County population.<sup>8</sup>

Figure 18. VETERAN CENSUS, BY RACE

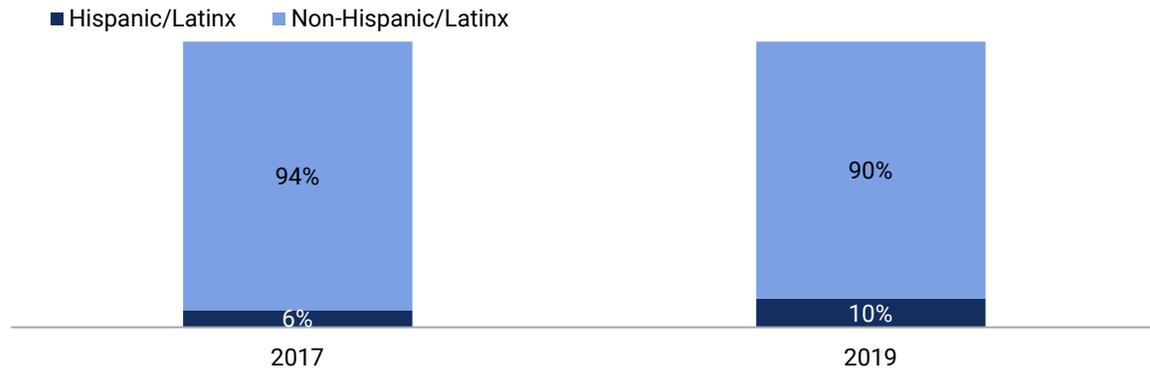


2019 Veterans n=99

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

<sup>8</sup> U.S. Census Bureau. (2019). American Community Survey 2017 5-Year Estimates. Table DP05: ACS Demographic and Housing Estimates. Retrieved May 2019 from <http://factfinder2.census.gov>.

Figure 19. VETERAN CENSUS, BY ETHNICITY



2019 Veterans n=99

## FAMILIES WITH CHILDREN

National data from 2018 suggest that 33% of all people experiencing homelessness are persons in families.<sup>9</sup> Very few families experiencing homelessness are unsheltered, as public shelters serve 90% of homeless families in the United States; this is a significantly higher proportion of the population compared with other subpopulations, including unaccompanied children and transition-age youth. Data on families experiencing homelessness suggest that they are not much different from other families living in poverty.

Nationally, the majority of homeless families are households headed by single women and families with children under the age of six.<sup>10</sup> 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.<sup>11</sup>

There is also a significant population of precariously housed families in “doubled-up” situations who cannot be counted for the Point-in-Time Count. These families may be staying with other families or may be unsheltered on private property and may not fall within the definition of homelessness used for the Point-in-Time Count.

Fifty-four families with 147 family members were enumerated in Marin County in 2019. Fifty of these families were sheltered, with four families counted on the street.

Figure 20. FAMILIES WITH CHILDREN CENSUS

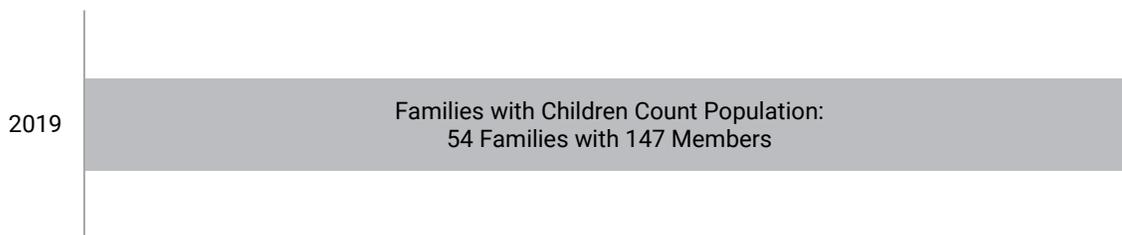
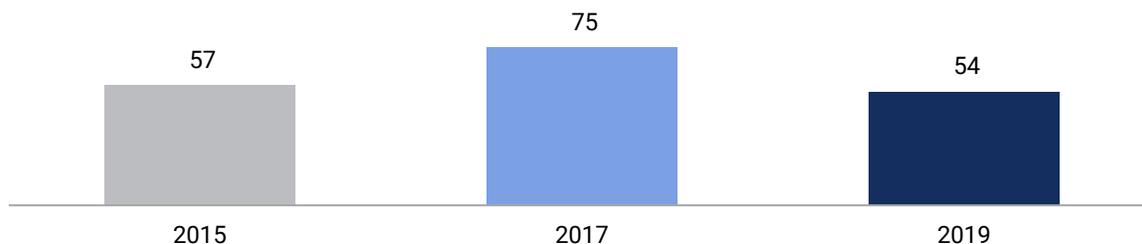


Figure 21. FAMILIES WITH CHILDREN CENSUS, WITH TREND

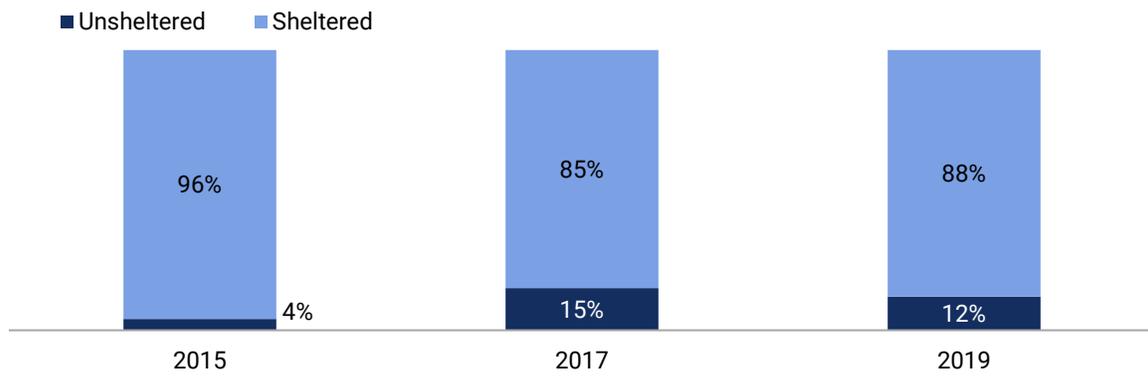


<sup>9</sup> U.S. Department of Housing and Urban Development. (2018). The 2018 Annual Assessment Report (AHAR) to Congress. Retrieved 2019 from <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>

<sup>10</sup> U. S. Department of Health and Human Services. (2007). Characteristics and Dynamics of Homeless Families with Children. Retrieved 2015 from <http://aspe.hhs.gov/>

<sup>11</sup> U.S. Interagency Council on Homelessness. (2015). Opening Doors. Retrieved 2015 from <http://www.usich.gov/>

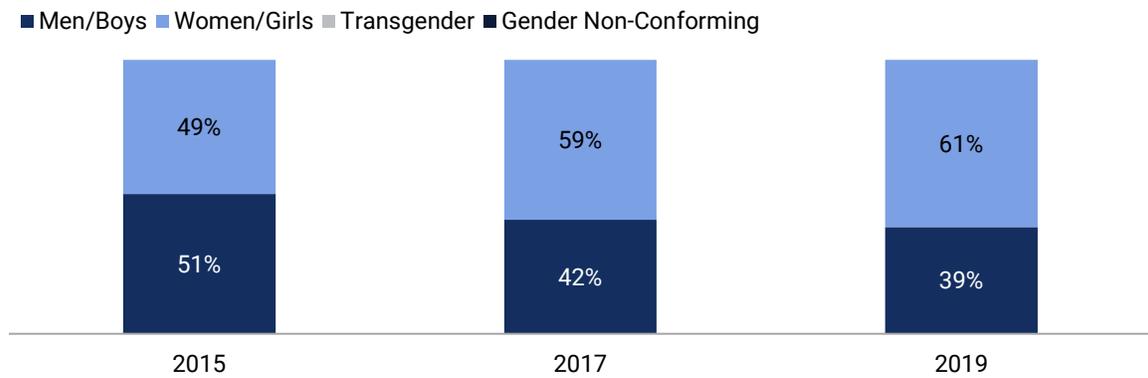
Figure 22. INDIVIDUALS IN FAMILIES WITH CHILDREN CENSUS, BY SHELTER STATUS



2015 Family n=203; 2017 Family n=200; 2019 Family n=147

	2015	2017	2019	17-19 % CHANGE
Sheltered	55	67	50	↓ 25%
Unsheltered	2	8	4	↓ 50%
<b>Total</b>	<b>57</b>	<b>75</b>	<b>54</b>	<b>↓ 28%</b>

Figure 23. INDIVIDUALS IN FAMILIES WITH CHILDREN CENSUS, BY GENDER

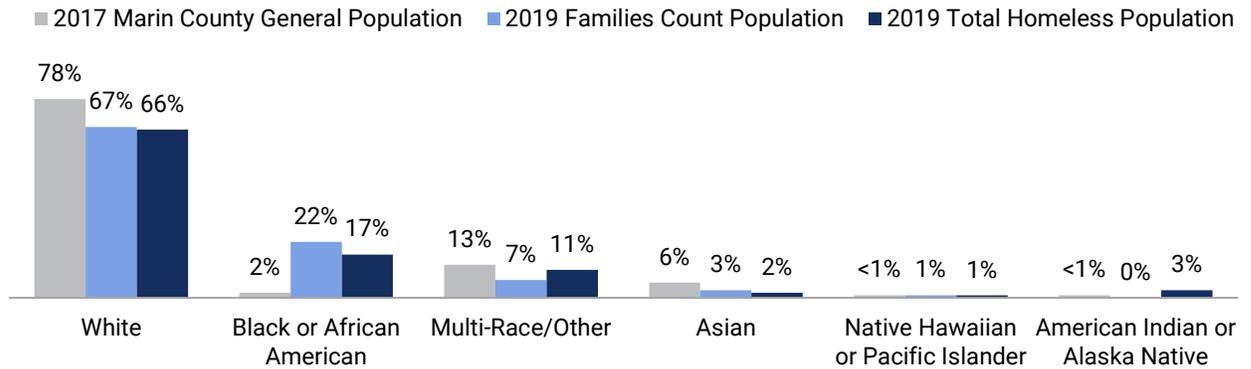


2015 Family n=194; 2017 Family n=200; 2019 Family n=147

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

Individuals in homeless families with children were more likely to be people of color than the general population of Marin County. Twenty-two percent (22%) of individuals in families experiencing homelessness identified as Black or African American, compared with 2% of the general Marin County population. Those in families identifying as Hispanic or Latinx remained similar to 2017, with 44% identifying as Hispanic/Latinx, significantly higher than the 16% of the general Marin County population.<sup>12</sup>

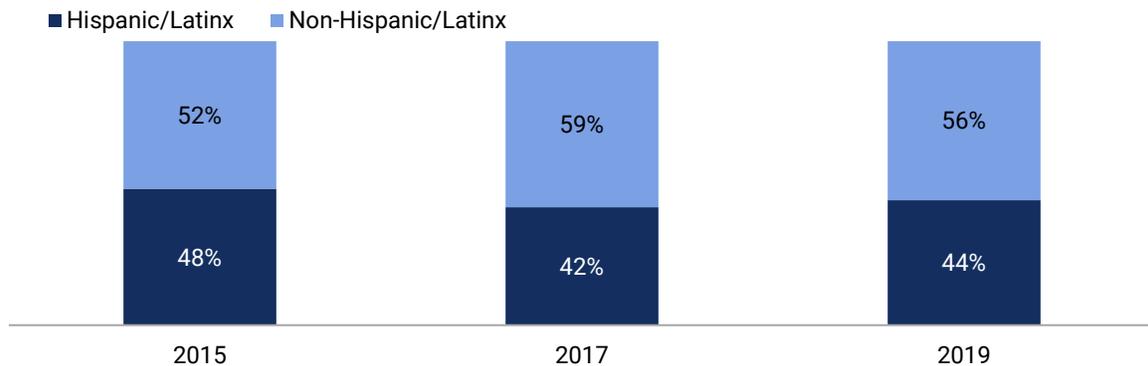
Figure 24. INDIVIDUALS IN FAMILIES WITH CHILDREN CENSUS, BY RACE



2019 Family n=147

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

Figure 25. INDIVIDUALS IN FAMILIES WITH CHILDREN CENSUS, BY ETHNICITY



2015 Family n=194; 2017 Family n=200; 2019 Family n=147

<sup>12</sup> U.S. Census Bureau. (2019). American Community Survey 2017 5-Year Estimates. Table DP05: ACS Demographic and Housing Estimates. Retrieved May 2019 from <http://factfinder2.census.gov>.

## UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH

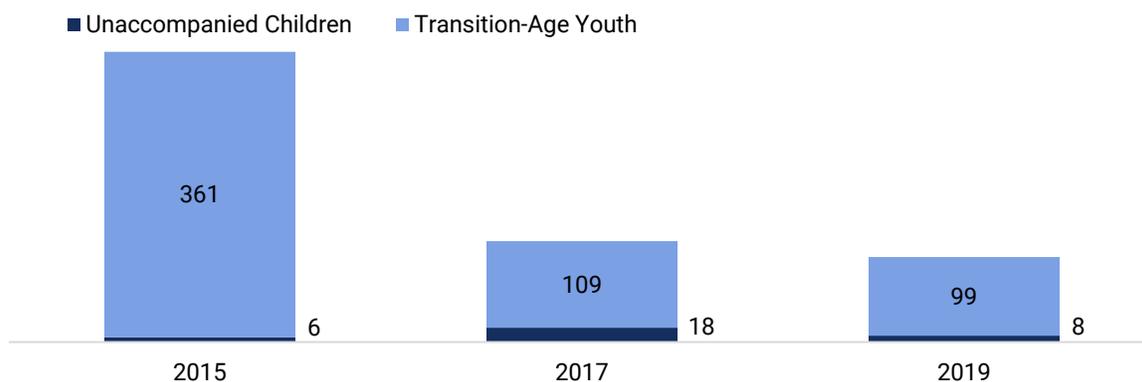
Due to the often hidden nature of youth homelessness, limited data are available on unaccompanied children and transition-age youth experiencing homelessness. Although largely considered an undercount, nationwide estimates from 2018 suggest there are at least 36,361 unaccompanied children and transition-age youth on the streets and in public shelters, a decrease of 11% from 2017.<sup>13</sup> This decrease may be due, in part, to the increased focus on youth since the 2017 count.

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.<sup>14</sup> Similar to families experiencing homelessness, many unaccompanied children and transition-age youth are precariously housed (“doubled-up” or couch surfing) and cannot be counted in the point-in-time count.

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, HUD placed increased focus on gathering data on unaccompanied homeless children and transition-age youth during the Point-in-Time Count.

There were 8 unaccompanied children and 99 unaccompanied transition-age youth (age 18-24) enumerated, accounting for 10% of the population experiencing homelessness in Marin County. Similar to years past, 6% of homeless children and transition-age youth were sheltered, with 94% unsheltered.

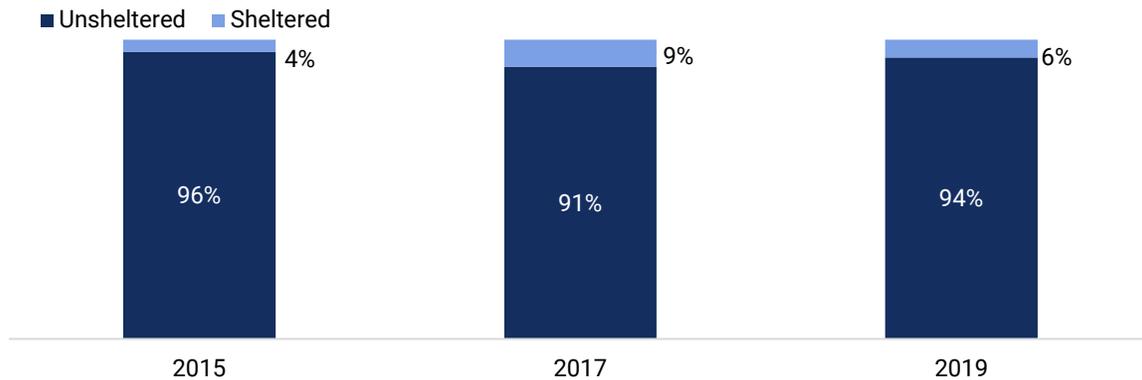
Figure 26. UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH CENSUS, WITH TREND



<sup>13</sup> U.S. Department of Housing and Urban Development. (2018). The 2018 Annual Assessment Report (AHAR) to Congress. Retrieved 2019 from <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>

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

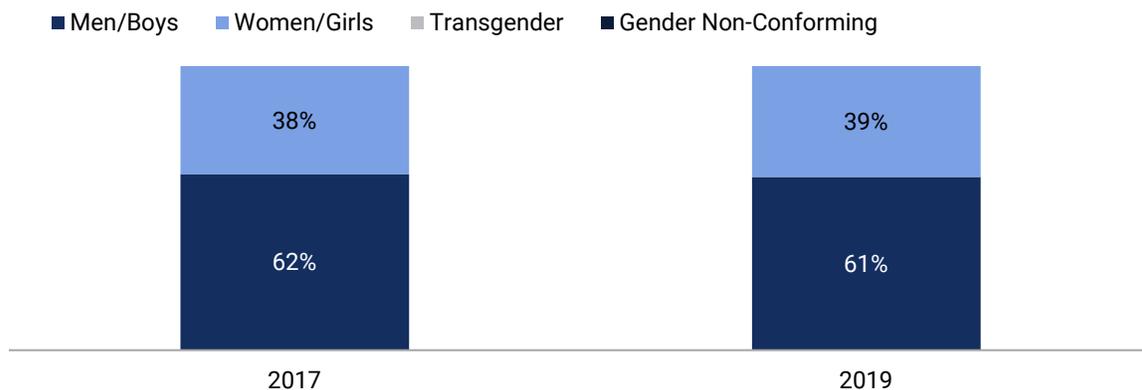
Figure 27. UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH CENSUS, BY SHELTER STATUS



	2015	2017	2019	17-19 % CHANGE
Sheltered	16	12	6	↓ 50%
Unsheltered	351	115	101	↓ 12%
<b>Total</b>	<b>367</b>	<b>127</b>	<b>107</b>	<b>↓ 16%</b>

Sixty-one percent (61%) of homeless unaccompanied children and transition-age youth identified as men/boys, with 39% identifying as women/girls. No individuals identified as transgender or gender non-conforming.

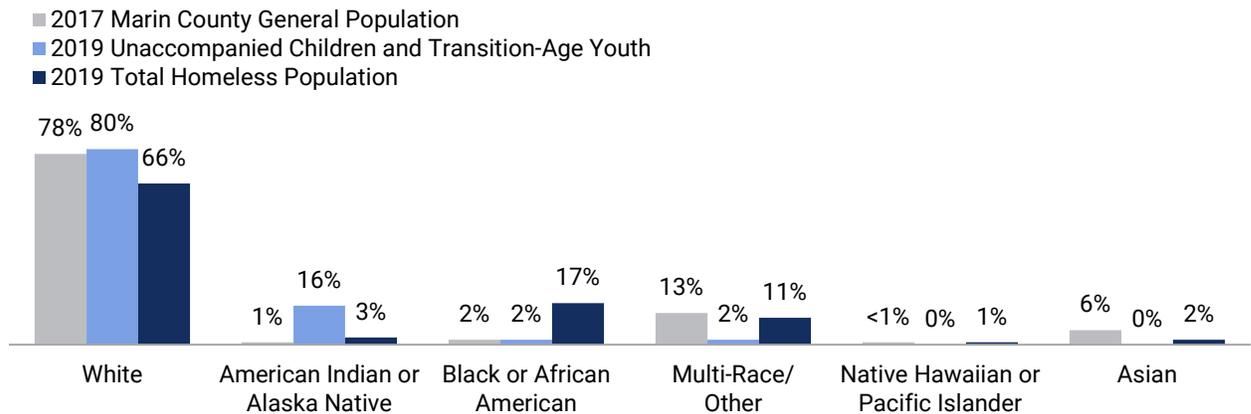
Figure 28. UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH CENSUS, BY GENDER



2017 Unaccompanied Children and Transition-Age Youth (UC/TAY) n=127; 2019 UC/TAY n=107

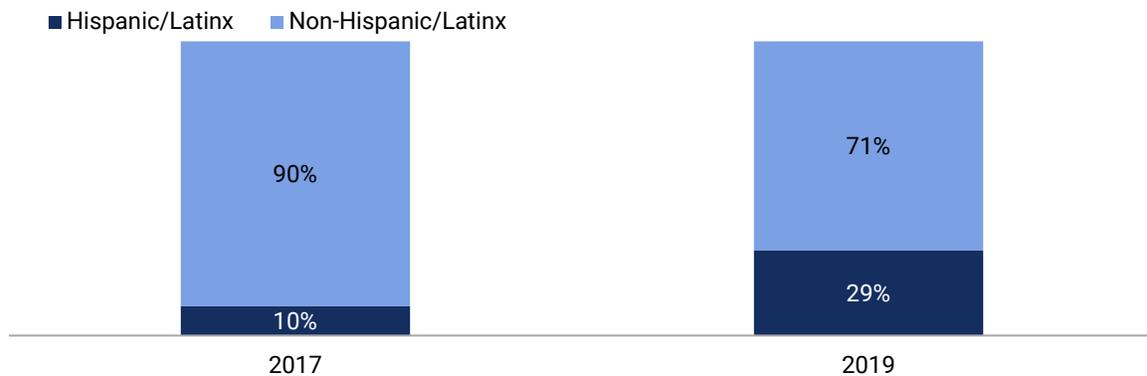
Unaccompanied children and transition-age youth were the only subpopulation to have a higher percentage identify as white (80%) than the general Marin County population (78%). However, an overrepresented number of youth identified as American Indian or Alaska Native, with 16% identifying as American Indian or Alaska Native and only 1% of the general Marin County population. An increased number of youth identified as Hispanic or Latinx, with 29% in 2019 compared to 10% in 2017.

Figure 29. UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH CENSUS, BY RACE



2019 Unaccompanied Children and Transition-Age Youth n=107  
 Note: Percentages may not add to 100 due to rounding.

Figure 30. UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH CENSUS, BY ETHNICITY



2017 Unaccompanied Children and Transition-Age Youth (UC/TAY) n=127; 2019 UC/TAY n=107

## OLDER ADULTS AGE 50+

Growth of older adults experiencing homelessness has risen in accordance with the overall growth of the population in the U.S. Because older adults experiencing homelessness have unmet mental health, substance use, and physical health needs, their mortality rates are higher than that of the general population.<sup>15</sup> Additionally, older adults living in shelters have higher rates of geriatric conditions than their non-homeless peers, which indicates a need for specialized care.<sup>16</sup>

While older adults have not been identified as a specific subpopulation of interest by HUD, Marin County recognized the growing trend and initiated an effort to gather additional information on the population. The following section details the characteristics of adults ages 50 and older experiencing homelessness in Marin County.

In 2019 there were 320 older adults experiencing homelessness, comprising 31% of the entire population experiencing homelessness. Two-thirds (66%) were unsheltered and 34% were sheltered.

Figure 31. OLDER ADULT CENSUS

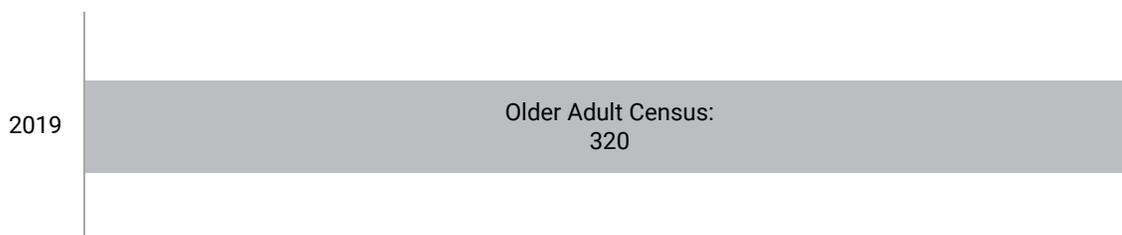


Figure 32. OLDER ADULT CENSUS, BY SHELTER STATUS



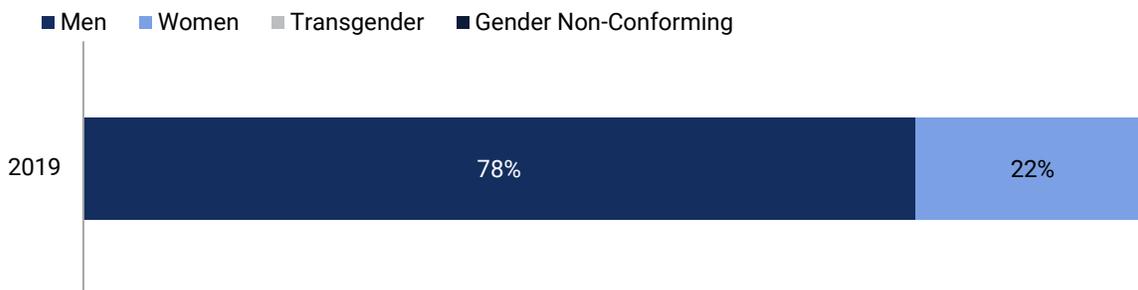
2019 Older Adults n=320

<sup>15</sup> CSH & Hearth (2011). Ending Homelessness among Older Adults and Elders through Permanent Supportive Housing. Retrieved 2017 from <http://www.csh.org/>

<sup>16</sup> Rebecca T. Brown, Kaveh Hemati, Elise D. Riley, Christopher T. Lee, Claudia Ponath, Lina Tieu, David Guzman, Margot B. Kushel, Geriatric Conditions in a Population-Based Sample of Older Homeless Adults, *The Gerontologist*, Volume 57, Issue 4, August 2017, Pages 757–766, <https://doi.org/10.1093/geront/gnw011>

The older adult population predominantly identified as men (78%), with 22% identifying as women and none identifying as transgender or gender non-conforming.

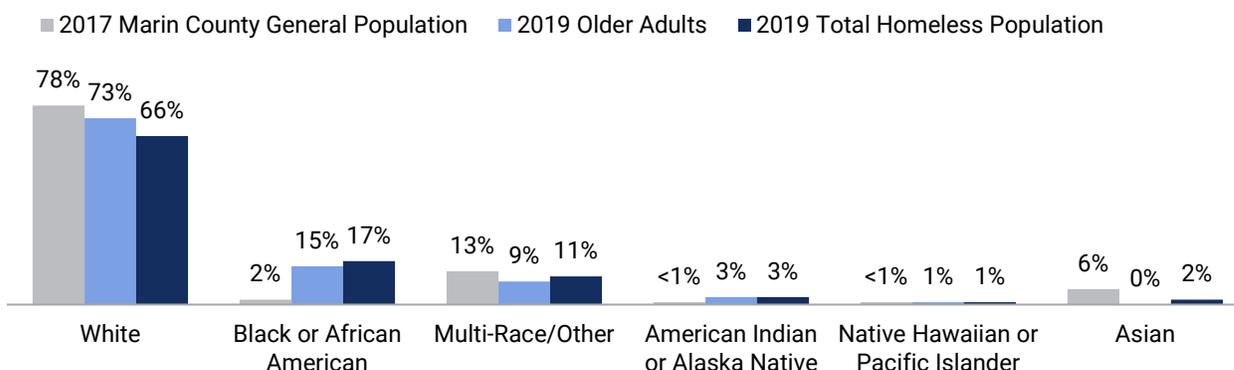
Figure 33. OLDER ADULT CENSUS, BY GENDER



2019 Older Adults n=320

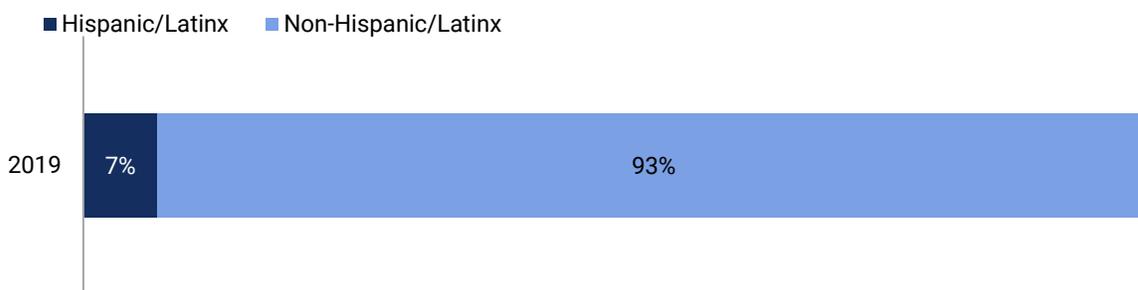
Black or African Americans were overrepresented in the older adult population, representing 15% of the population, while 73% of older adults identified as White. Seven percent (7%) of older adults identified as Hispanic or Latinx, compared to 16% of the general Marin County population.<sup>17</sup>

Figure 34. OLDER ADULT CENSUS, BY RACE



2019 Older Adults n=320

Figure 35. OLDER ADULT CENSUS, BY ETHNICITY



2019 Older Adults n=320

<sup>17</sup> U.S. Census Bureau. (2019). American Community Survey 2017 5-Year Estimates. Table DP05: ACS Demographic and Housing Estimates. Retrieved May 2019 from <http://factfinder2.census.gov>.



# Homeless Survey Findings

This section provides an overview of the findings generated from the survey component of the 2019 Marin County Homeless Point-in-Time Count and Survey. Surveys were administered to a randomized sample of homeless individuals between January 28 and February 15, 2019. This effort resulted in 360 complete and unique surveys.

Based on a Point-in-Time Count of 1,034 homeless persons, with a randomized survey sampling process, these 360 valid surveys represent a confidence interval of +/- 4% with a 95% confidence level when generalizing the results of the survey to the entire estimated population of homeless persons in Marin County. In other words, if the survey were conducted again, we can be 95% certain that the results would be within 4 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*.

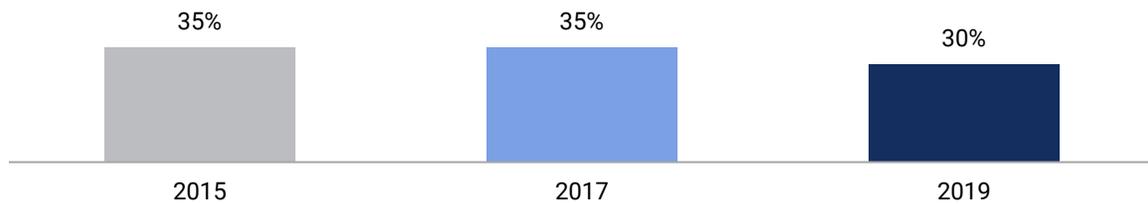
## DURATION AND RECURRENCE OF HOMELESSNESS

Unstable living conditions, poverty, housing scarcity, and many other issues often lead to individuals to have multiple episodes of homelessness. For many, the experience of homelessness is part of a long and recurring history of housing instability.

### DURATION OF HOMELESSNESS

Many individuals who experience homelessness will do so numerous times and for varying lengths of time. Thirty percent (30%) of respondents reported their current episode of homelessness was their first, a decrease from 35% in both 2015 and 2017.

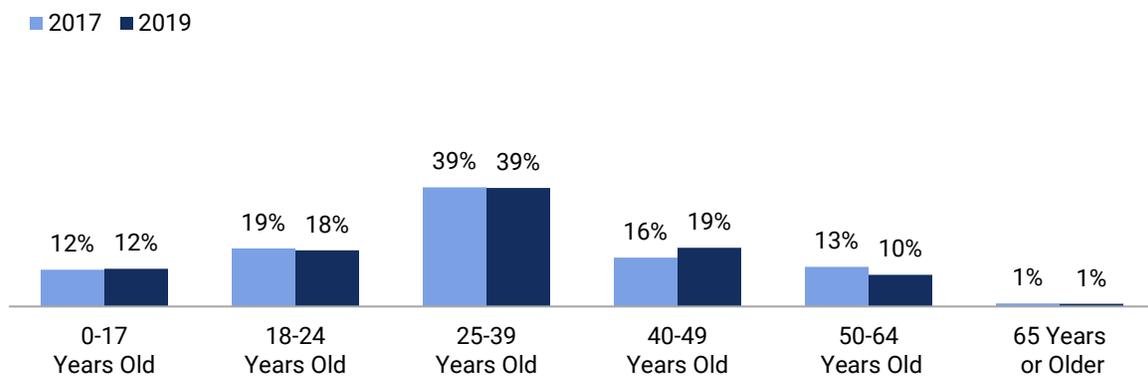
Figure 36. FIRST TIME HOMELESS (RESPONDENTS ANSWERING “YES”)



2015 n=357; 2017 n=444; 2019 n=351

Thirty-nine percent (39%) of survey respondents reported becoming homeless for the first time between 25 and 39 years old, while 31% reported becoming homeless for the first time before age 25.

Figure 37. AGE AT FIRST EXPERIENCE OF HOMELESSNESS

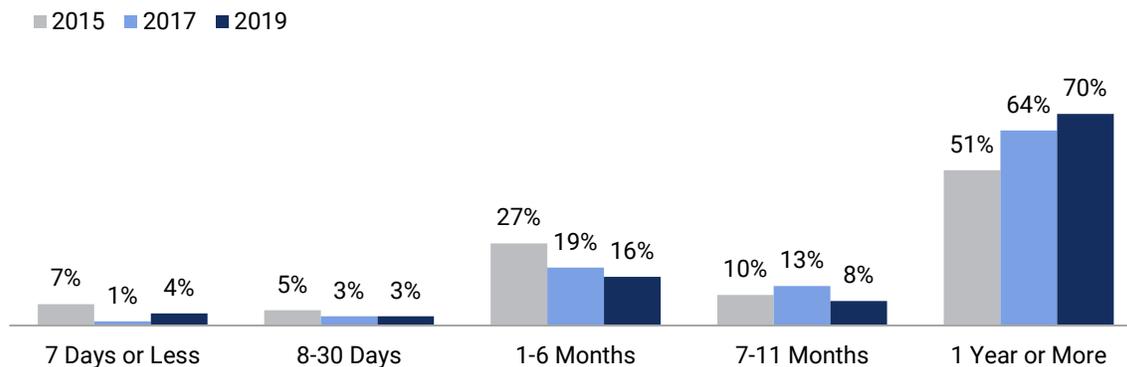


2017 n=426; 2019 n=348

## RECURRENCE OF HOMELESSNESS

Many individuals who experience homelessness will do so numerous times. As people cycle in and out of stable housing, it becomes important to keep track of the number of times they experience literal homelessness. Seventy percent (70%) of survey respondents reported they had been homeless for a year or more in 2019, a significant increase from 51% in 2015 and 64% in 2017.

Figure 38. LENGTH OF CURRENT EPISODE OF HOMELESSNESS



2015 n=352; 2017 n=438; 2019 n=355

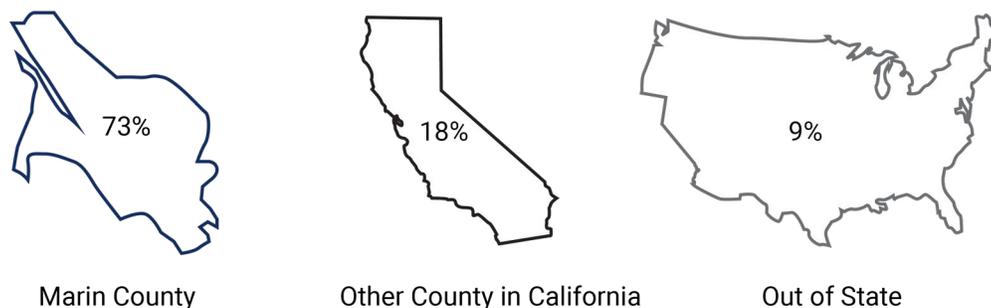
## LIVING ACCOMMODATIONS

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 to gaps in the system of care and to 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 the Continuum of Care finds increasing numbers of individuals living locally before experiencing homelessness. In 2019, 73% of individuals experiencing homelessness in Marin County reported living in Marin at the time of their most recent housing loss.

Figure 39. PLACE OF RESIDENCE AT TIME OF HOUSING LOSS

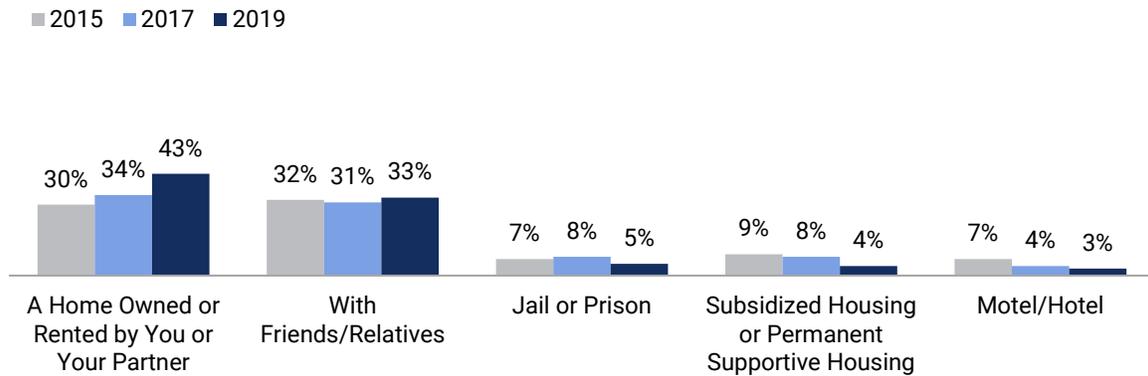


2015 n=334; 2017 n=436; 2019 n=356

### PRIOR LIVING ARRANGEMENTS

The type of living arrangements maintained by individuals before experiencing homelessness can influence what types of homeless prevention services might be offered to help individuals maintain their housing. Prior to becoming homeless, 43% of respondents were living in their own home, a 9% increase from 2017. This could be attributable to broader issues with housing affordability.

Figure 40. LIVING ARRANGEMENTS IMMEDIATELY PRIOR TO BECOMING HOMELESS (TOP 5 RESPONSES)

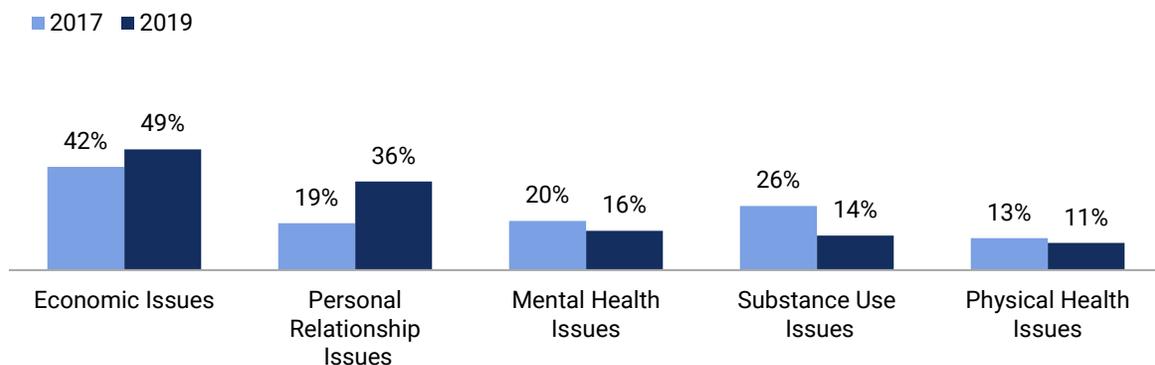


2015 n=318; 2017 n=427; 2019 n=343

### 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 inter-related causes. An inability to secure adequate housing can also lead to an inability to address other basic needs, such as healthcare and adequate nutrition. Nearly half (49%) of respondents reported that economic issues such as rent increases or a lost job as the primary cause of their homelessness.

Figure 41. PRIMARY CAUSE OF HOMELESSNESS

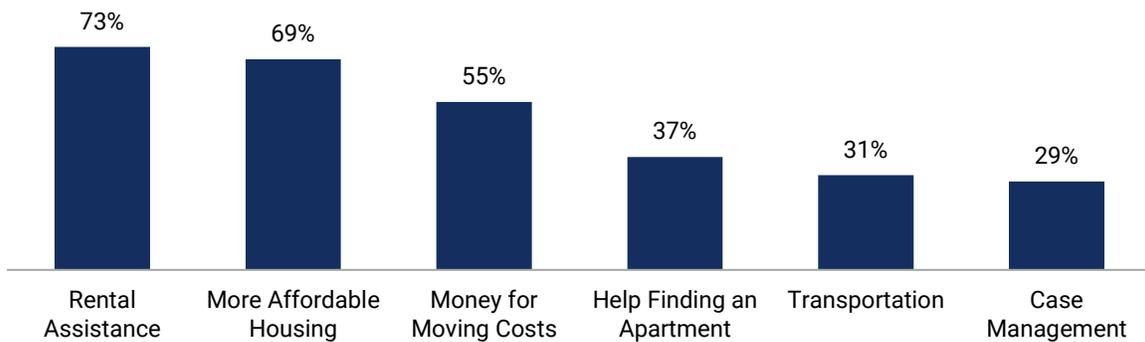


2017 n=431; 2019 n=353

## OBTAINING PERMANENT HOUSING

Many individuals experiencing homelessness face significant barriers in obtaining 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 maintain permanent housing. As can be expected in a region with high rents and low vacancy rates, 73% of respondents reported needing rental assistance to obtain permanent housing. Furthermore, 69% needed more affordable housing and 55% needed money for moving costs to move into permanent housing.

Figure 42. ASSISTANCE NEEDED TO OBTAIN PERMANENT HOUSING



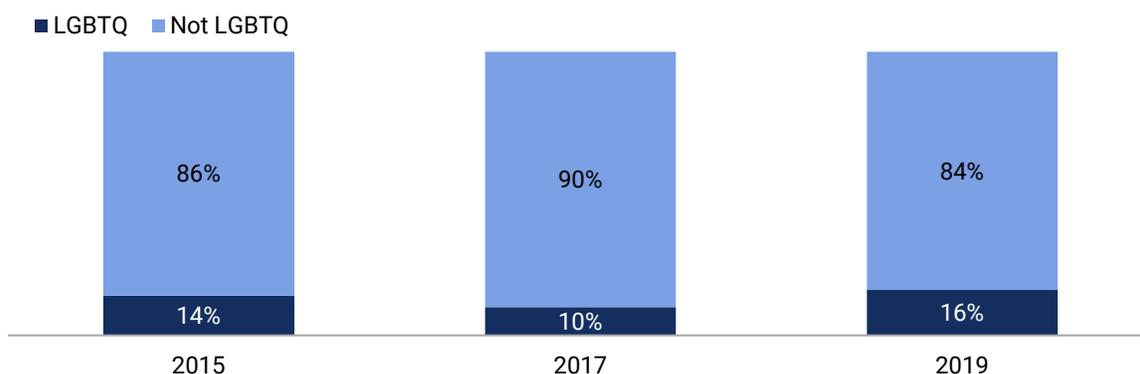
2019 n=347

Note: Multiple response question. Percentages may not add up to 100.

## LGBTQ+

While there is little data on Lesbian, Gay, Bisexual, Transgender, Queer/Questioning (LGBTQ+) individuals experiencing homelessness, what is known suggests those identifying as LGBTQ+, particularly youth, experience homelessness at higher rates than those who identify as heterosexual. LGBTQ+ persons face social stigma, discrimination, and rejection, which impact their housing and social support network. They may have great difficulty finding shelters where they are safe and accepted. Additionally, LGBTQ+ individuals experiencing homelessness are at a heightened risk of violence, abuse, and exploitation compared to their heterosexual peers.<sup>18</sup> In 2019, 16% of respondents identified as LGBTQ+. Of those individuals, 45% reported identifying as bisexual, 28% as other, and 17% as gay.

Figure 43. SEXUAL ORIENTATION AND GENDER IDENTITY



BREAKOUT OF LGBTQ+ RESPONDENTS						
	2015		2017		2019	
Gay	19%	10	20%	9	17%	10
Lesbian	27%	14	20%	9	9%	5
Queer	8%	4	0%	0	2%	1
Bisexual	23%	12	42%	19	45%	26
Transgender	15%	8	0%	0	7%	4
Gender Non-Conforming	*	*	<1%	1	0%	0
Other	21%	11	18%	8	28%	16

2015 LGBTQ+ n=362, Breakout n=52 respondents offering 59 responses; 2017 LGBTQ+ n=457; Breakout n= 45 respondents offering 45 responses; 2019 LGBTQ+ n=360; Breakout n=58 respondents offering 63 responses

Note: Multiple response question. Percentages may not add up to 100.

\* Gender non-conforming was not reported prior to 2017.

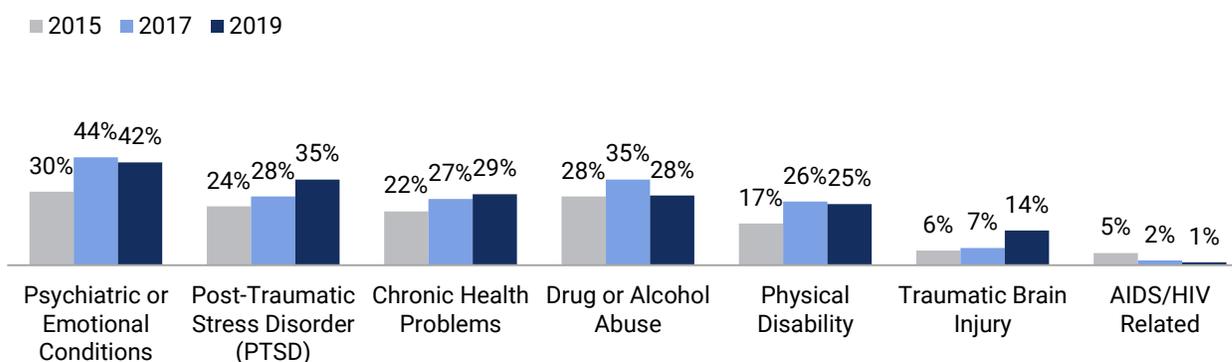
<sup>18</sup> National Coalition for the Homeless. LGBTQ Homelessness. <http://nationalhomeless.org/issues/lgbt/>

## HEALTH

The average life expectancy for individuals experiencing homelessness is 25 years less than those in stable housing.<sup>19</sup> Without regular access to healthcare 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 stably housed patients.<sup>20</sup>

In 2019, 38% of respondents reported having a disabling condition that prevented them from working or maintaining stable housing. Two-thirds (66%) of respondents reported experiencing at least one health condition, with 42% reporting a psychiatric or emotional condition, 35% reporting Post-Traumatic Stress Disorder, and 29% reporting chronic health problems. Furthermore, 1% of survey respondents reported being pregnant or having recently impregnated someone else, a slight decrease from 3% in 2017. Nearly two-thirds (65%) of respondents had medical insurance at the time of the survey.

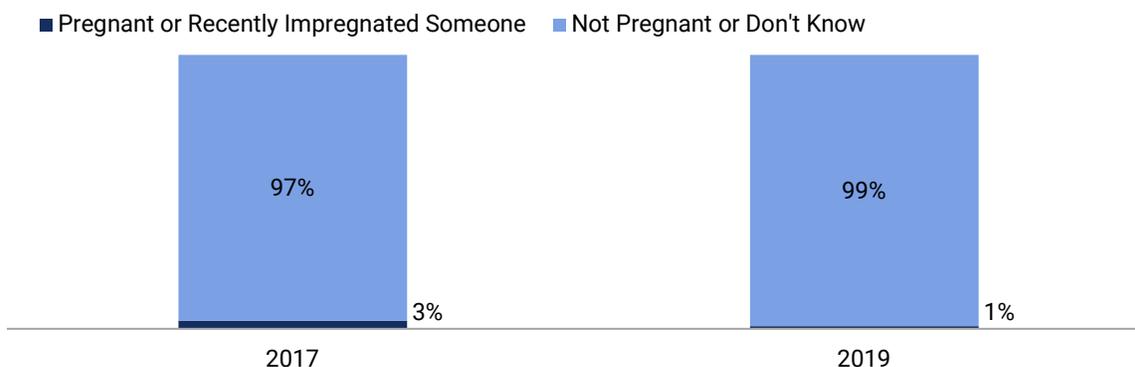
Figure 44. HEALTH CONDITIONS



2015 n=348; 2017 n=445; 2019 n=360

Note: Multiple response question. Percentages may not add up to 100.

Figure 45. PREGNANCY STATUS

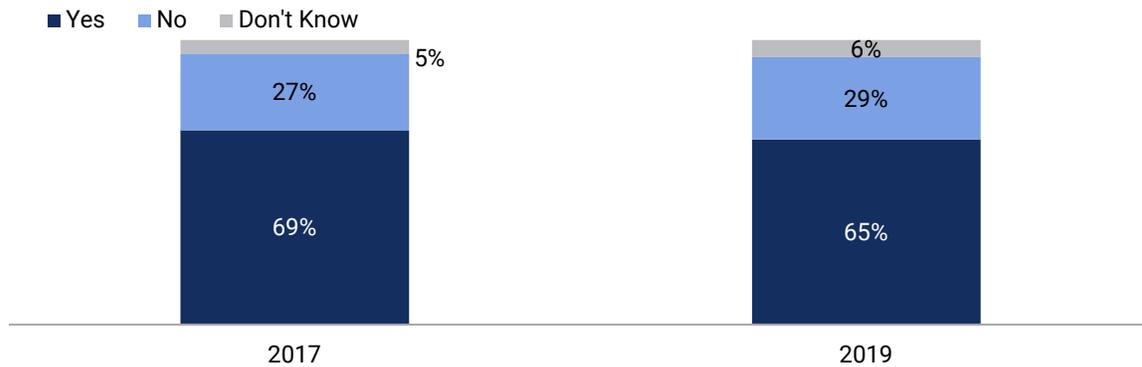


2017 n=434; 2019 n=356

<sup>19</sup> O'Connell, J.J. (2005). Premature Mortality in Homeless Populations: A Review of the Literature. Nashville: National Health Care for the Homeless Council, Inc. Retrieved 2019 from <http://sbdww.org/wp-content/uploads/2011/04/PrematureMortalityFinal.pdf>.

<sup>20</sup> Sharon A. Salit, M. E. (1998). Hospitalization Costs Associated with Homelessness in New York City. New England Journal of Medicine, 338, 1734-1740.

Figure 46. MEDICAL INSURANCE



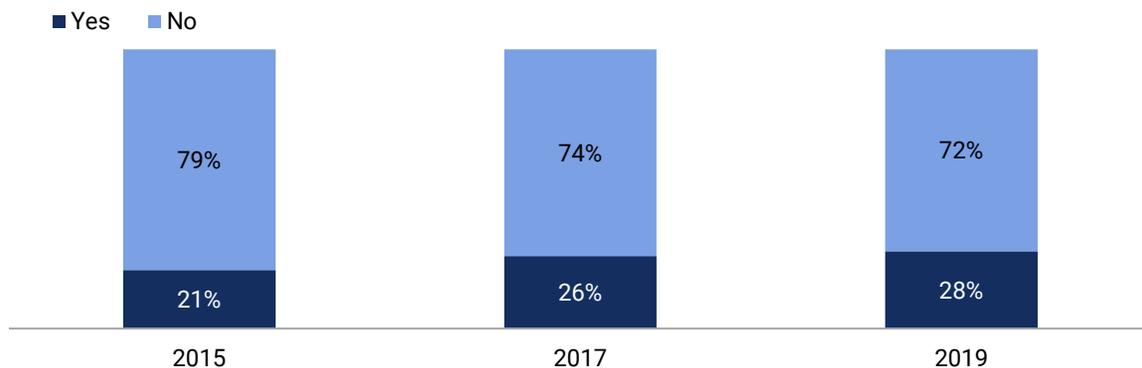
2017 n=408; 2019 n=344

### 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.<sup>21</sup>

Twenty-eight percent (28%) of respondents had spent a night incarcerated in the past year, a slight increase from 26% in 2017. Conversely, the number of those on probation or parole decreased slightly to 18% in 2019 from 20% in 2017. Of those who were justice system involved, 29% reported accessing re-entry services.

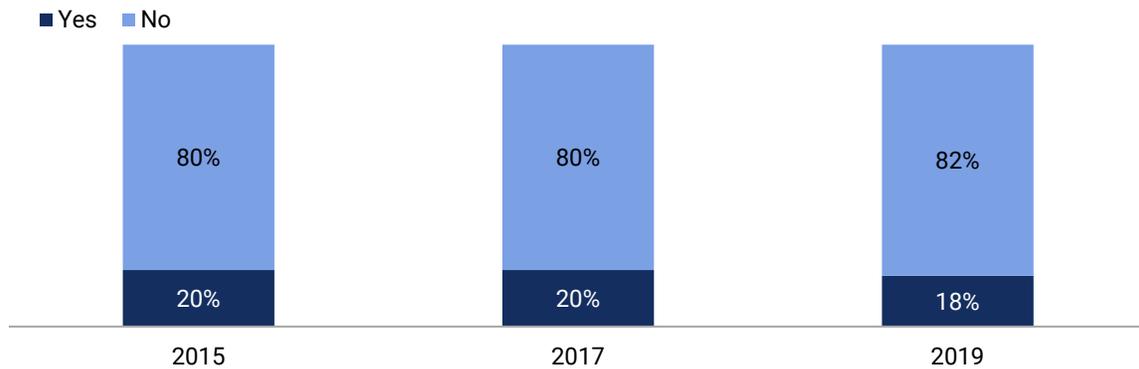
Figure 47. INCARCERATED AT LEAST ONE NIGHT IN THE LAST 12 MONTHS



2015 n=343; 2017 n=444; 2019 n=347

<sup>21</sup> Greenberg, GA, Rosenheck, RA. (2008). Jail Incarceration, Homelessness, and Mental Health: A National Study. *Psychiatric Services*, 2008 Feb; 59(2): 170-7.

Figure 48. CURRENTLY ON PROBATION OR PAROLE

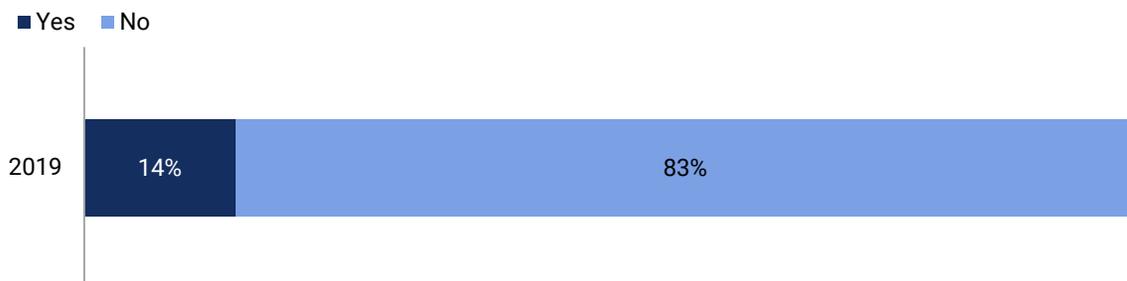


2015 n=335; 2017 n=444; 2019 n=339

## FOSTER CARE

Nationally, it is estimated that at least one-third of foster youth experience homelessness after exiting care.<sup>22</sup> In the state of California, many foster youth are eligible to receive extended care benefits as they transition into adulthood, up until their 21st birthday. Implemented since 2012, the aim of extended foster care is to assist foster youth with the transition to independence and prevent them from experiencing homeless. In Marin County, 14% of those experiencing homelessness had a history of foster care in Marin or other counties.

Figure 49. HISTORY OF FOSTER CARE



2019 n= 353

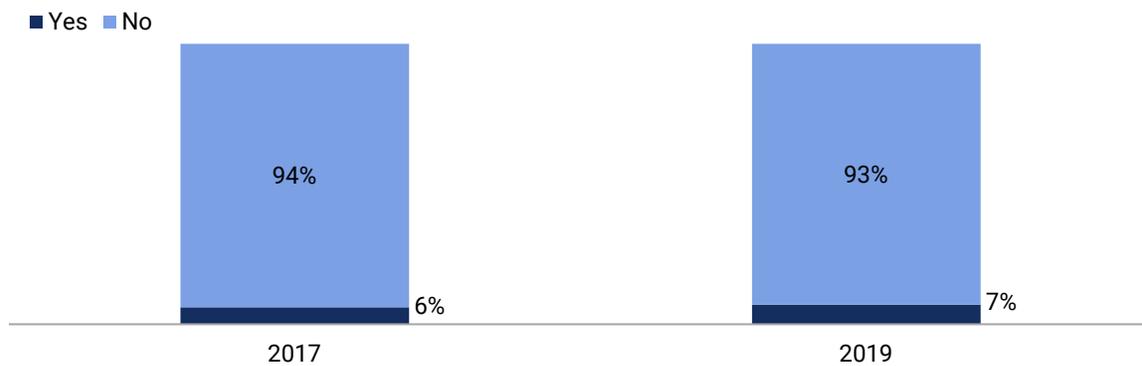
<sup>22</sup> Dworsky, A.; Napolitano, L.; and Courtney, M. (2013). Homelessness during the Transition from Foster Care to Adulthood. Congressional Research Services, Am J Public Health. 2013 December; 103(Suppl 2): S318–S323. Retrieved 2018 from 10.2105/AJPH.2013.301455.

## DOMESTIC VIOLENCE OR ABUSE

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

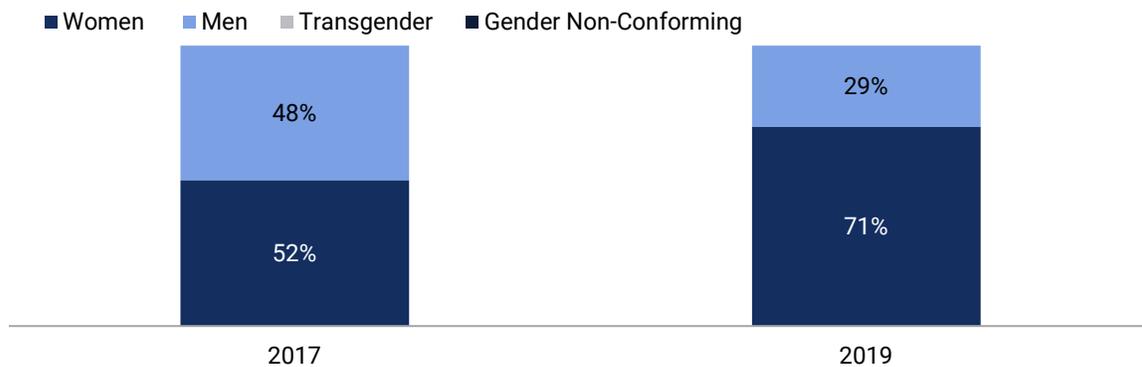
Seven percent (7%) of survey respondents reported they were currently experiencing domestic violence or partner abuse.<sup>23</sup> Of those individuals, 71% were women and 29% were men. Additionally, 38% of those experiencing domestic violence or abuse had children under age 18, but only 11% had their children living with them.

Figure 50. EXPERIENCING DOMESTIC VIOLENCE OR ABUSE



2017 n=398; 2019 n=331

Figure 51. DOMESTIC VIOLENCE OR PARTNER ABUSE BY GENDER, WITH TREND

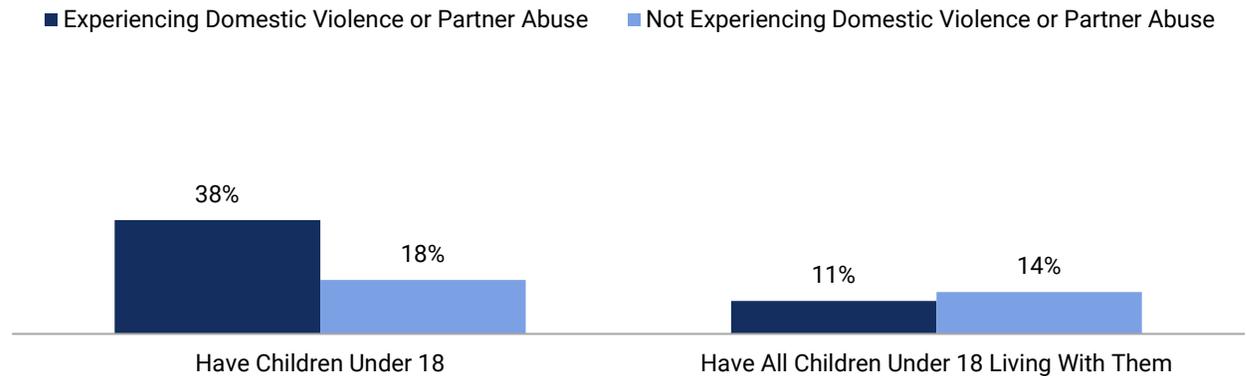


2017 n=21; 2019 n=24

Note: Please use caution when interpreting results due to small sample size.

<sup>23</sup> These data include only those currently experiencing domestic violence or partner abuse, not those who have a history of domestic violence.

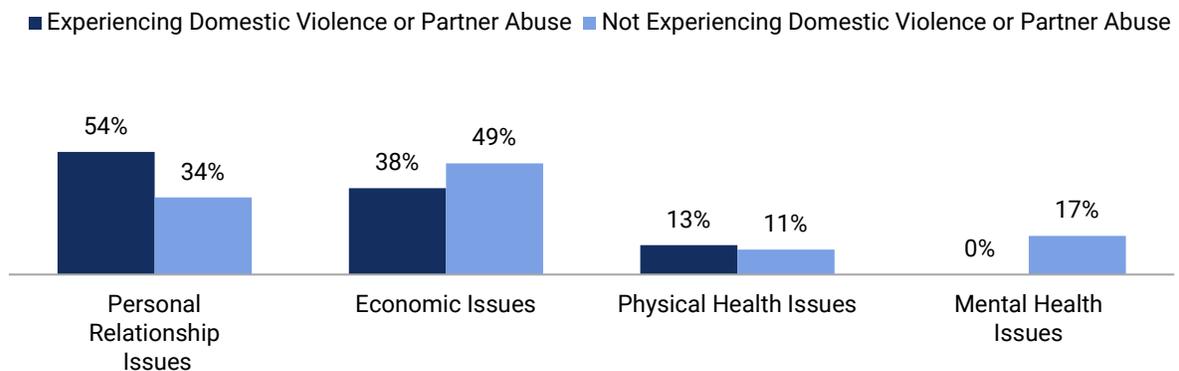
Figure 52. CHILDREN UNDER 18, DOMESTIC VIOLENCE AND NON-DOMESTIC VIOLENCE COMPARISON



*Experiencing Domestic Violence or Partner Abuse n=21; Not Experiencing Domestic Violence or Partner Abuse n=323  
 Note: Please use caution when interpreting results due to small sample size.*

Respondents experiencing domestic violence regarded the cause of their homelessness differently than those not experiencing domestic violence. Over half (54%) of respondents experiencing domestic violence cited personal relationship issues as their primary cause of homelessness, much higher than the 34% of those not experiencing domestic violence. Likewise, those experiencing domestic violence were less likely to assert that economic issues were the cause of their homelessness (38% vs. 49%).

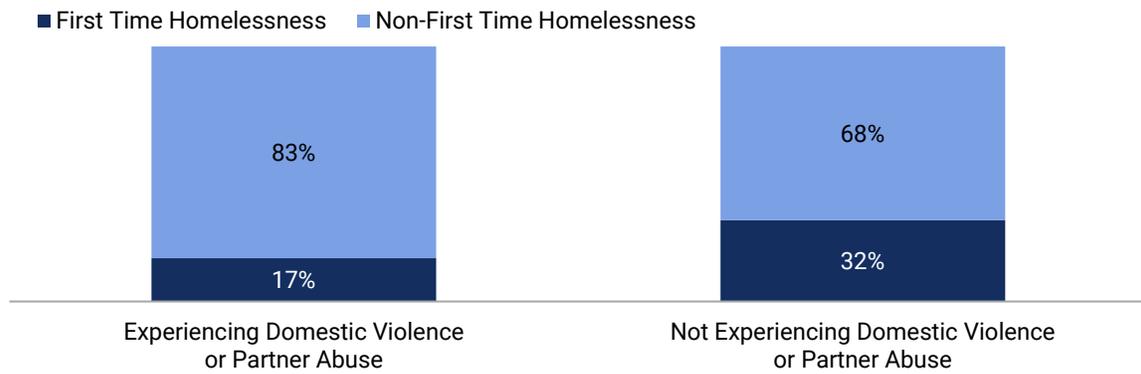
Figure 53. PRIMARY CAUSE OF HOMELESSNESS, DOMESTIC VIOLENCE AND NON-DOMESTIC VIOLENCE COMPARISON



*2019 Experiencing Domestic Violence or Partner Abuse n=24; Not Experiencing Domestic Violence or Partner Abuse n=336  
 Note: Please use caution when interpreting results due to small sample size.*

Domestic violence victims were less likely to be experiencing homelessness for the first time than those who had not experienced domestic violence. This raises questions of how continued personal relationships can contribute to housing instability over time.

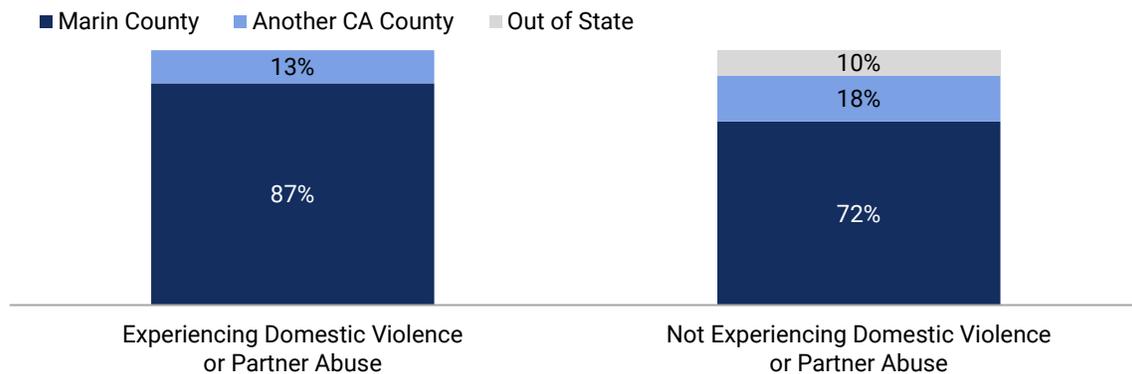
Figure 54. FIRST TIME HOMELESSNESS, DOMESTIC VIOLENCE AND NON-DOMESTIC VIOLENCE COMPARISON



2019 Experiencing Domestic Violence or Partner Abuse n=24; Not Experiencing Domestic Violence or Partner Abuse n=327  
 Note: Please use caution when interpreting results due to small sample size.

A larger percentage of those experiencing domestic violence were living in Marin County at the onset of their current episode of homelessness than those who did not experience domestic violence; 87% of those experiencing domestic violence were living in Marin County before experiencing homelessness compared to 72% of those who had not experienced domestic violence.

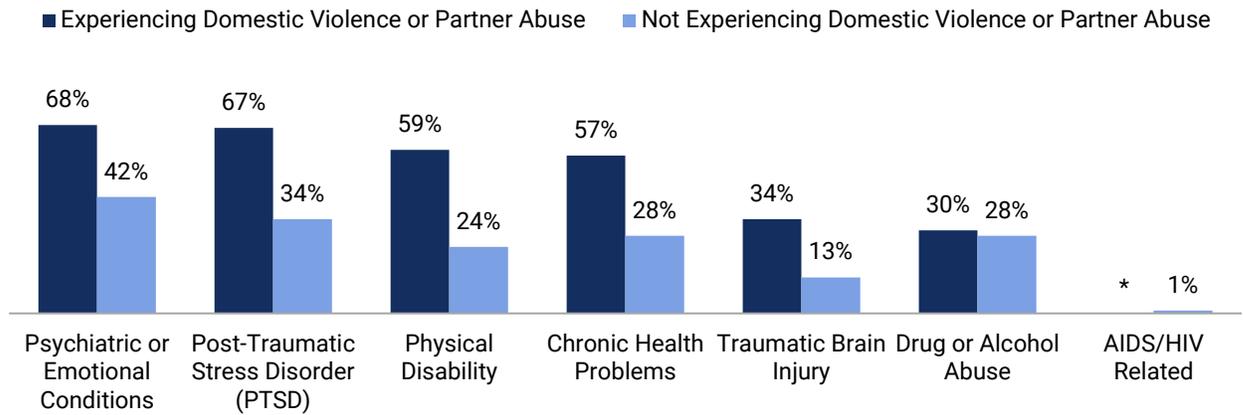
Figure 55. RESIDENCE AT ONSET OF CURRENT HOMELESS EPISODE, DOMESTIC VIOLENCE AND NON-DOMESTIC VIOLENCE COMPARISON



2019 Experiencing Domestic Violence or Partner Abuse n=23; Not Experiencing Domestic Violence or Partner Abuse n=333  
 Note: Please use caution when interpreting results due to small sample size.

Those experiencing domestic violence had much higher rates of suffering from health conditions than those not experiencing domestic violence. The most frequent condition experienced by those experiencing domestic violence was psychiatric or emotional conditions (68%), followed by Post-Traumatic Stress Disorder (67%), and physical disabilities (59%).

Figure 56. HEALTH CONDITIONS, DOMESTIC VIOLENCE AND NON-DOMESTIC VIOLENCE COMPARISON



2019 Experiencing Domestic Violence or Partner Abuse n=24; Not Experiencing Domestic Violence or Partner Abuse n=336

Note: Multiple response question. Percentages may not add up to 100.

\* Suppressed due to small sample size.

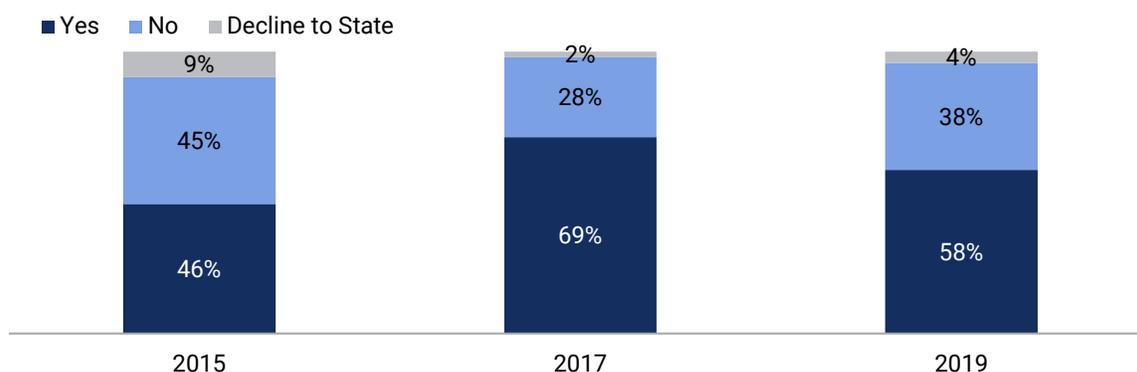
## SERVICES AND ASSISTANCE

Marin 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.

### GOVERNMENT ASSISTANCE

There are various forms of government assistance available to individuals experiencing homelessness. However, usage of these supports is impacted by knowledge of services available, understanding of eligibility requirements, and the perceived stigma of receiving governmental assistance. Over half (58%) of respondents were receiving some type of government assistance, a decrease from 69% in 2017.

Figure 57. RECEIVING GOVERNMENT ASSISTANCE



2015 n=321; 2017 n=415; 2019 n=328

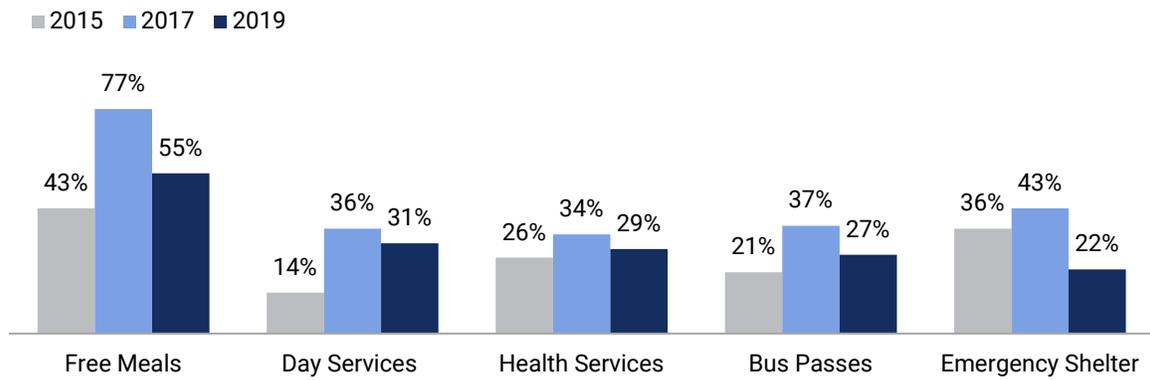
Note: Percentages may not add up to 100 due to rounding.

### SERVICES AND PROGRAMS

In addition to government assistance, there are numerous community-based services and programs made available to individuals experiencing homelessness. These services range from day shelters and meal programs to job training and healthcare.

All service usage declined from 2017 to 2019; in a drop in services from 77% in 2017, only 55% of respondents were accessing free meals. This decrease in usage may be due to the closure of a meal-providing day shelter. Thirty-one percent (31%) were accessing shelter day services (e.g., showers, mail, etc.), 29% were accessing health services, and 27% were accessing bus passes. Emergency shelter usage dropped from 43% in 2017 to 22% in 2019, which could be attributed to the closing of the REST rotating shelter after the 2017 Point-in-Time Count. When asked what services they would most like to access, 42% of respondents requested housing placement assistance, followed by free meals (38%), bus passes (38%), and emergency shelter (34%).

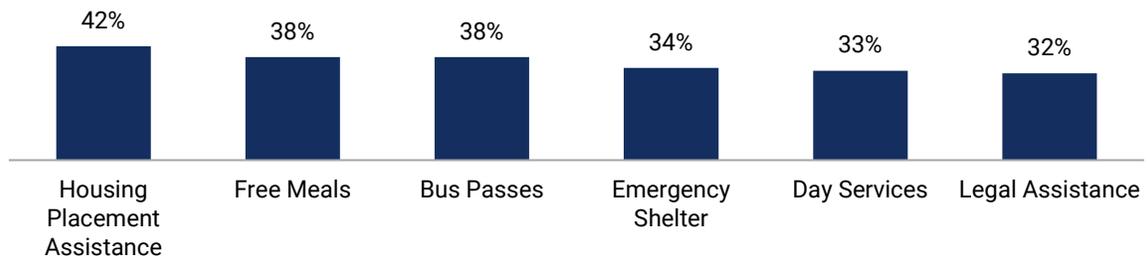
Figure 58. SERVICES OR ASSISTANCE RECEIVED (TOP 5 RESPONSES)



2015 n=350 respondents offering 768 responses; 2017 n=439 respondents offering 1,326 responses; 2019 n=334 respondents offering 849 responses

Note: Multiple response question. Percentages may not add up to 100.

Figure 59. SERVICES OR ASSISTANCE REQUESTED (TOP 6 RESPONSES)



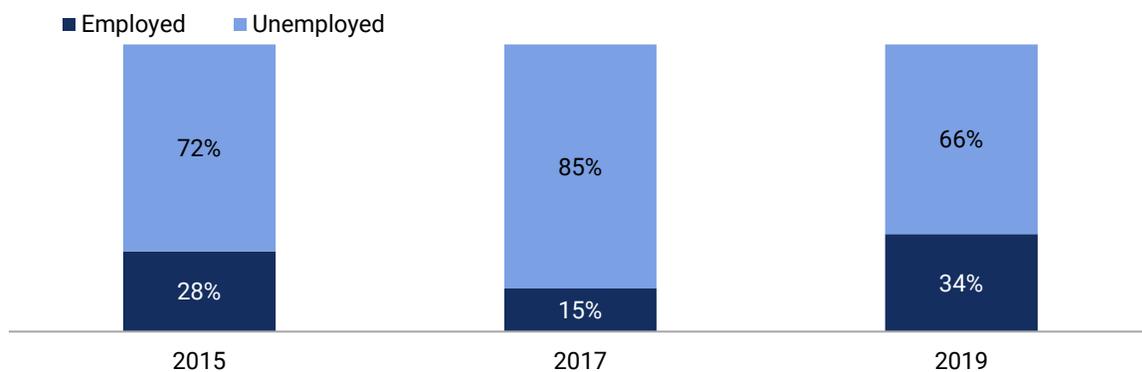
2019 n=284 respondents offering 953 responses

Note: Multiple response question. Percentages may not add up to 100.

## EMPLOYMENT AND EDUCATION

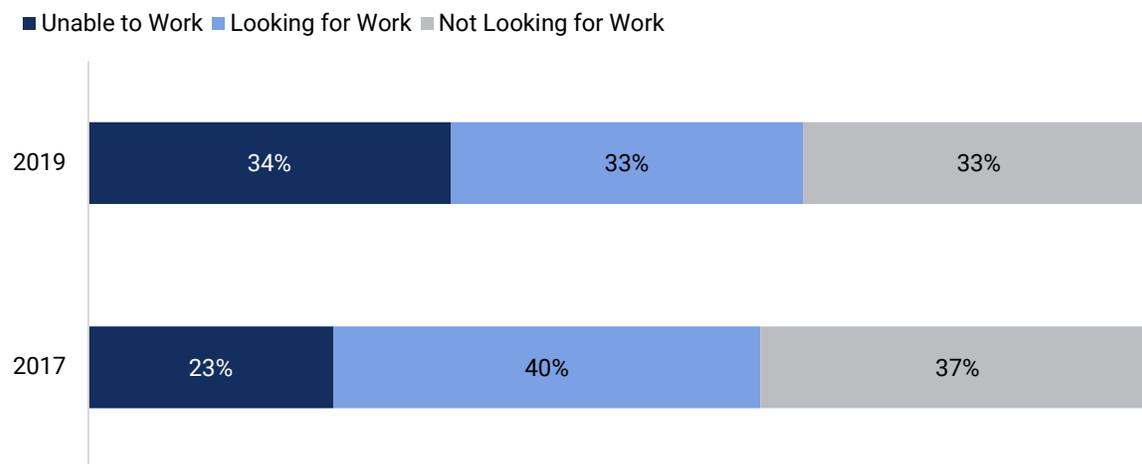
While the majority of survey respondents reported being unemployed, just over one-third (34%) reported part-time or full-time work, a significant increase from 15% of respondents reporting employment in 2017, which may be a reflection of a stronger economy and rise in housing costs. Of those who were unemployed, one-third (33%) each said they were unable to work, looking for work, and not looking for work.

Figure 60. EMPLOYMENT STATUS



2015 n=303; 2017 n=428; 2019 n=341

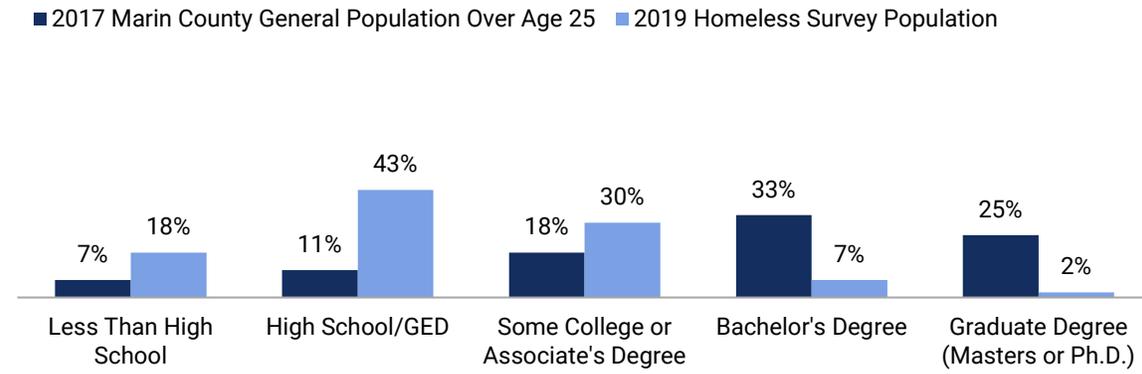
Figure 61. JOB SEARCH STATUS IF UNEMPLOYED



2017 n=339; 2019 n=214

Educational attainment can be a contributing factor in poverty and homelessness. Nearly one-fifth (18%) of respondents had no high school credential and 43% had a high school diploma or a GED. In the general population of Marin County over the age of 25, 7% had no high school credential and 11% had a high school diploma or a GED.

Figure 62. EDUCATIONAL ATTAINMENT<sup>24</sup>



2019 n=340

<sup>24</sup> U.S. Census Bureau. American Community Survey 2013-2017 5-Year Estimates. Table S1501: Educational Attainment. Retrieved June 2019 from <https://factfinder.census.gov/>



# Homeless Survey Findings: 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:

1. Chronic homelessness among people with disabilities;
2. Veterans;
3. Families with children; and
4. Unaccompanied children and transition-age youth.

Consequently, these subpopulations represent important reportable indicators for measuring local progress toward ending homelessness. In addition to these four federally identified subpopulations, Marin County collects and reports on data pertaining to homeless older adults.

The following sections examine each of these subpopulations, identifying the number and characteristics of individuals included in the 2019 Marin County Homeless Point-in-Time Count and Survey.



## CHRONICALLY HOMELESS

The U.S. Department of Housing and Urban Development (HUD) defines a chronically homeless individual 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 housing. This definition applies to individuals as well as to heads of households with children who meet the definition.

The chronically homeless population represents one of the most vulnerable populations in the community; the mortality rate for those experiencing chronic homelessness is four to nine times higher than that of the general population.<sup>25</sup> 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 2018, HUD reported that 88,640 individuals, representing 24% of the overall homeless population, were experiencing chronic homelessness. 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.<sup>26</sup>

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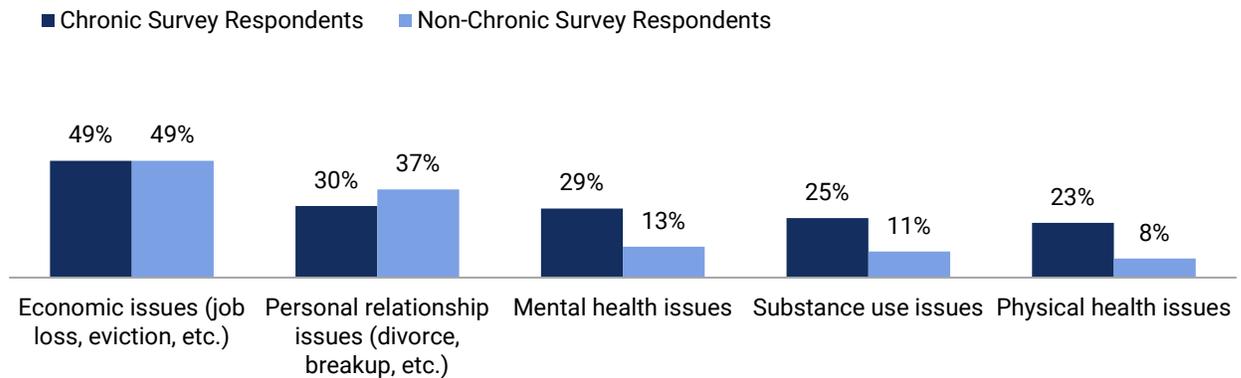
<sup>25</sup> United States Interagency Council on Homelessness. (2010). Supplemental Document to the Federal Strategic Plan to Prevent and End Homelessness: June 2010. Retrieved 2017 from [https://www.usich.gov/resources/uploads/asset\\_library/BkgrdPap\\_ChronicHomelessness.pdf](https://www.usich.gov/resources/uploads/asset_library/BkgrdPap_ChronicHomelessness.pdf)

<sup>26</sup> U.S. Department of Housing and Urban Development. (2018). Annual Assessment Report to Congress. Retrieved 2019 from <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>

### PRIMARY CAUSE OF HOMELESSNESS

Nearly half (49%) of respondents who were chronically homeless reported economic issues as the primary cause of their homelessness, similar to non-chronically homeless respondents. The biggest difference between chronically homeless and non-chronically homeless respondents was regarding physical health issues: 23% of chronically homeless respondents, but only 8% of non-chronically homeless respondents, identified physical health issues as the primary cause of their homelessness.

Figure 63. PRIMARY CAUSE OF HOMELESSNESS, CHRONIC AND NON-CHRONIC COMPARISON



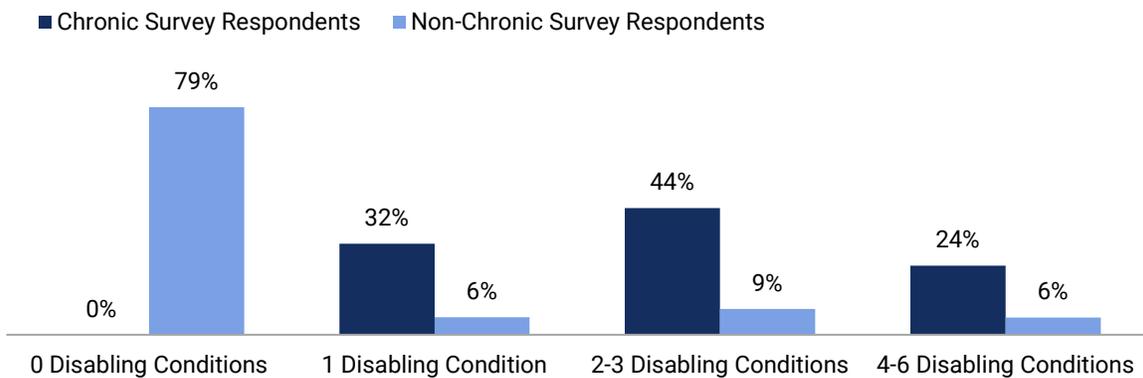
2019 Chronic n=77, Non-Chronic n=276

Note: Multiple response question. Percentages may not add up to 100.

### HEALTH STATUS

To meet the definition of chronic homelessness, an individual must be experiencing at least one disabling condition (a health condition that prevents stable housing); however, 68% of chronically homeless respondents reported more than one disabling condition, and nearly one-quarter (24%) reported four to six disabling conditions.

Figure 64. NUMBER OF DISABLING CONDITIONS, CHRONIC AND NON-CHRONIC COMPARISON

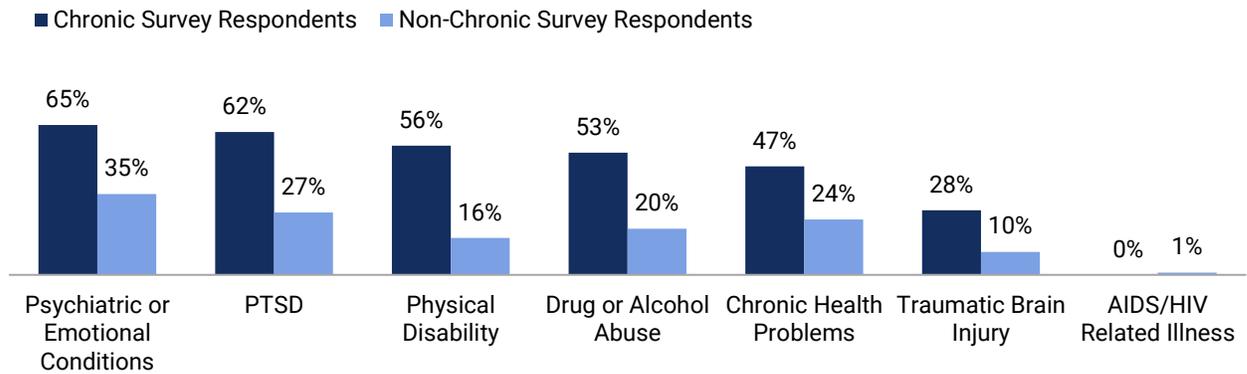


2019 Chronic n=79, Non-Chronic n=281

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

Chronically homeless respondents reported markedly higher prevalence of health conditions than non-chronically homeless respondents, except in the case of an AIDS/HIV related illness. Nearly two-thirds (65%) of chronically homeless respondents reported a psychiatric or emotional condition, followed by 62% reporting Post-Traumatic Stress Disorder (PTSD).

Figure 65. HEALTH CONDITIONS, CHRONIC AND NON-CHRONIC COMPARISON



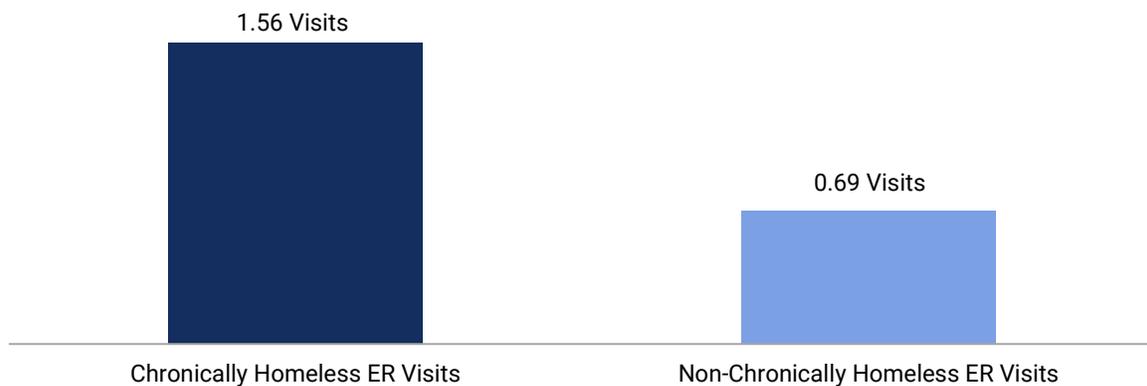
2019 Chronic n=79, Non-Chronic n=281

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

### EMERGENCY ROOM USE

Those experiencing chronic homelessness used the emergency room more than non-chronically homeless respondents. Over the past three months, those experiencing chronic homelessness used the emergency room an average of 1.56 times. Non-chronically homeless respondents reported using the emergency room 0.69 times over the past three months.

Figure 66. AVERAGE EMERGENCY ROOM VISITS IN LAST 3 MONTHS, CHRONIC AND NON-CHRONIC COMPARISON

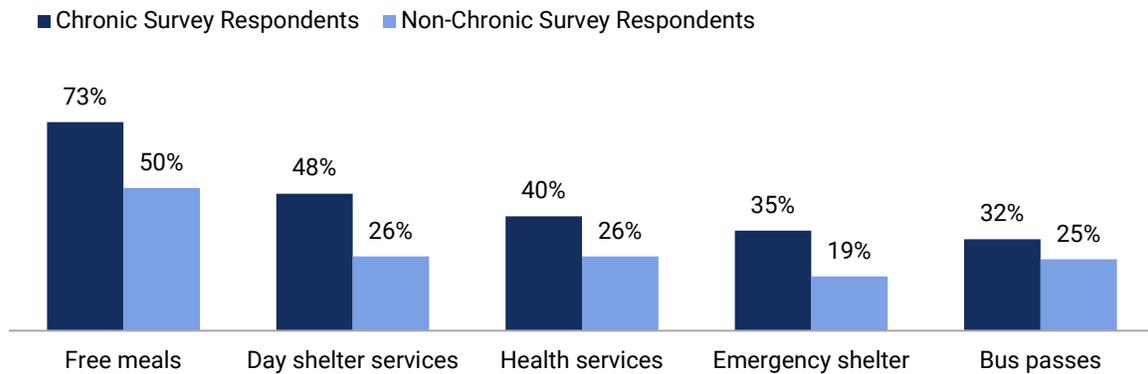


2019 Chronic n=64, Non-Chronic n=224

## ACCESS TO SERVICES

Overall, those experiencing chronic homelessness accessed more services than non-chronically homeless survey respondents. Nearly three-quarters (73%) of chronically homeless respondents reported accessing free meals in comparison with 50% of non-chronically homeless respondents. Further, those experiencing chronic homelessness were higher utilizers of day shelter, health, and emergency shelter services.

Figure 67. SERVICES USED, CHRONIC AND NON-CHRONIC COMPARISON (TOP 5 RESPONSES)

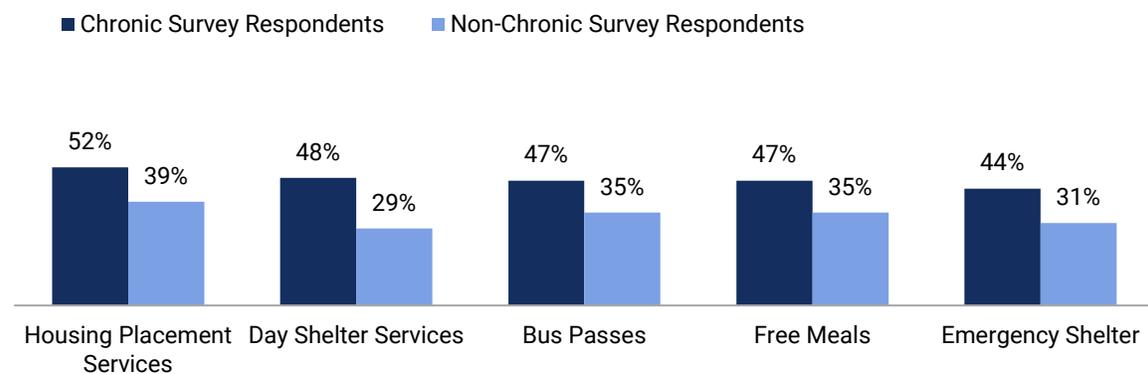


2019 Chronic n=77, Non-Chronic n=257

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

When asked which services they would like to access, just over half (52%) of chronically homeless survey respondents indicated they would like housing placement services. In addition, 48% requested day shelter services, 47% requested bus passes and free meals, and 44% wanted access to emergency shelter.

Figure 68. INTEREST IN SERVICES, CHRONIC AND NON-CHRONIC COMPARISON (TOP 5 RESPONSES)



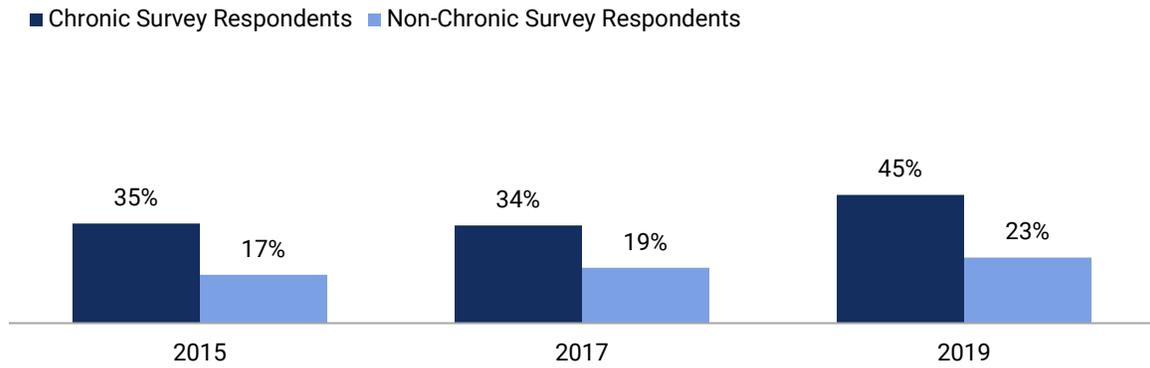
2019 Chronic n=64, Non-Chronic n=220

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

## INCARCERATION

The percentage of those experiencing chronic homelessness who have spent a night in jail or prison in the past year increased to 45% in 2019 from 34% in 2017. The percentage of non-chronically homeless respondents incarcerated in the past year also increased in 2019.

Figure 69. INCARCERATED IN THE PAST YEAR, CHRONIC AND NON-CHRONIC COMPARISON



2019 Chronic n=78, Non-Chronic n=269



## VETERANS

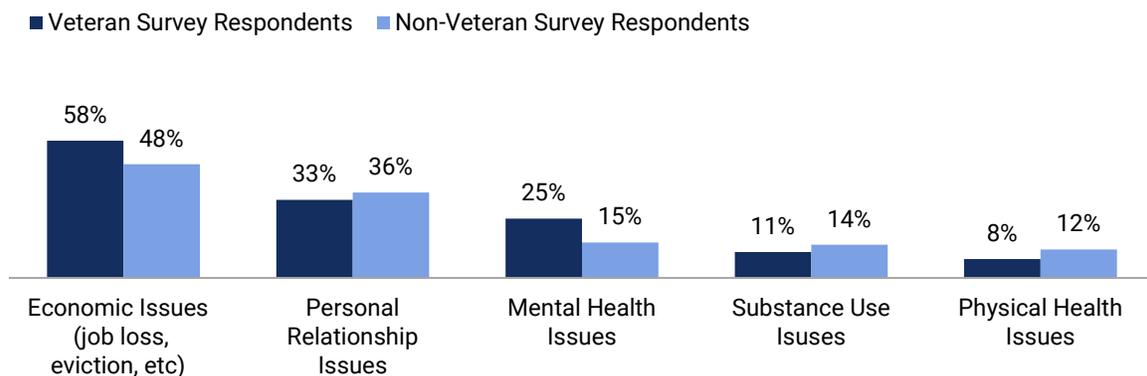
Many U.S. veterans experience conditions that place them at increased risk of homelessness. Veterans experience higher rates of post-traumatic stress disorder (PTSD), traumatic brain injury (TBI), sexual assault, and substance abuse. Veterans experiencing homelessness are more likely to live on the street than in shelters and often remain on the street for extended periods of time.<sup>27</sup>

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.

## PRIMARY CAUSE OF HOMELESSNESS

The majority (58%) of veterans reported that economic issues such as job loss or eviction led to their homelessness, which was higher than 48% of non-veteran respondents. Additionally, one-third (33%) of veterans reported that personal relationship issues were the primary cause of their homelessness. One-quarter (25%) indicated mental health issues were the primary cause, higher than 15% of non-veterans.

Figure 70. PRIMARY CAUSE OF HOMELESSNESS, VETERAN AND NON-VETERAN COMPARISON



2019 Veterans n=36, Non-Veterans n=317

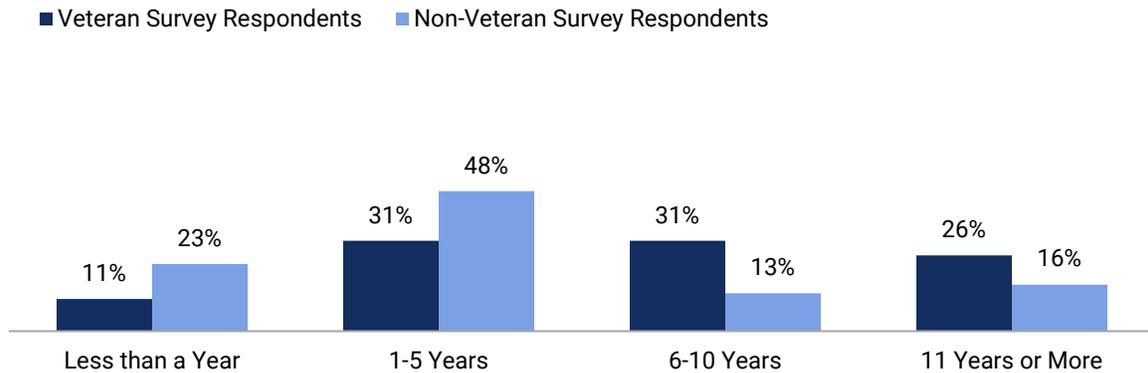
Note: Multiple response question. Percentages may not add up to 100.

<sup>27</sup> 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](https://www.usich.gov/resources/uploads/asset_library/BkgrdPap_ChronicHomelessness.pdf)

### LENGTH OF HOMELESSNESS

Veterans were more likely to be homeless for longer periods of time than non-veterans. More than half (57%) of veteran respondents reported being homeless for more than six years in total compared to 29% of non-veterans.

Figure 71. TOTAL LENGTH OF HOMELESSNESS, VETERAN AND NON-VETERAN COMPARISON

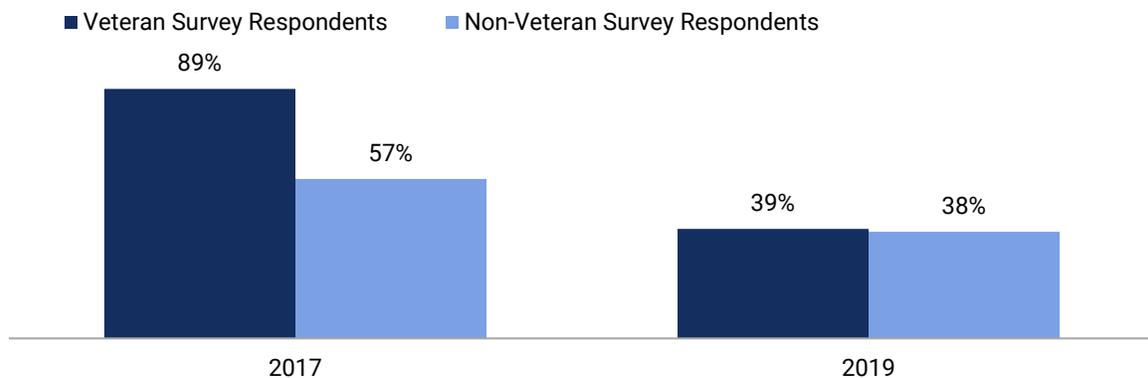


2019 Veterans n=35, Non-Veterans n=313  
 Note: percentages may not add up to 100 due to rounding.

### HEALTH STATUS

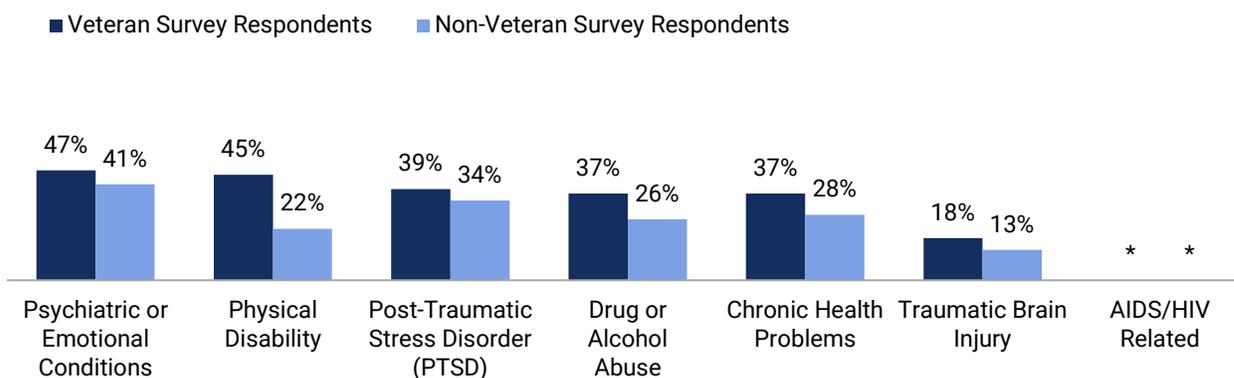
In a steep drop from 89% in 2017, 39% of veteran respondents reported having at least one disabling condition (a health condition that prevents stable employment or housing). Although veterans did report similar rates of disabling conditions as non-veterans, they experienced more non-disabling health conditions: most notably, 45% of veteran respondents reported a physical disability in comparison with 22% of non-veteran respondents.

Figure 72. DISABLING CONDITIONS, VETERAN AND NON-VETERAN COMPARISON



2019 Veterans n=38, Non-Veterans n=322

Figure 73. HEALTH CONDITIONS, VETERAN AND NON-VETERAN COMPARISON



2019 Veterans n=38, Non-Veterans n=322

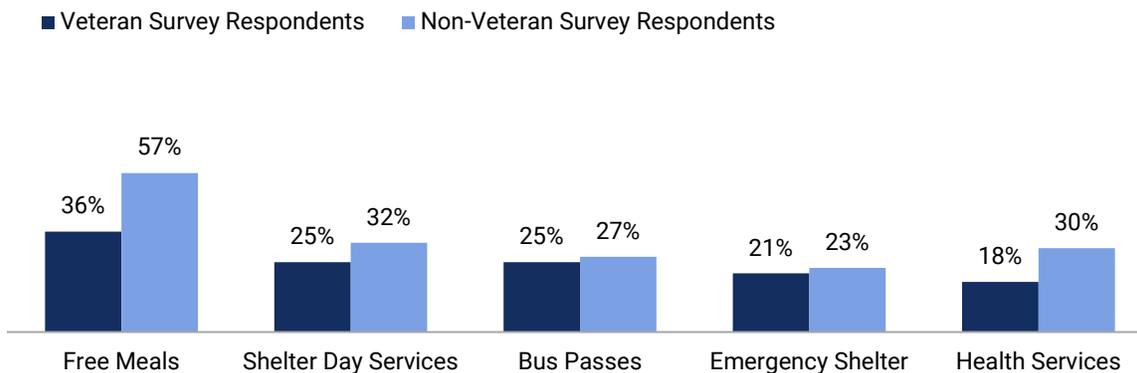
Note: Multiple response question. Percentages may not add up to 100.

\* Suppressed due to small sample size.

### ACCESS TO SERVICES

Overall, veterans accessed community, non-governmental services at a lower rate than non-veterans: 61% of veterans were accessing at least one service compared to 76% of non-veterans. The biggest discrepancy was in relation to accessing free meals, with 36% of veterans and 57% of non-veterans reporting use of the service. Although a lower percentage of veterans (18%) were using health services than non-veterans (30%), this may be due in part to the availability of health services through the Veterans Affairs Administration, which is categorized as a governmental service.

Figure 74. ACCESS TO NON-GOVERNMENTAL SERVICES, VETERAN AND NON-VETERAN COMPARISON (TOP 5 RESPONSES)

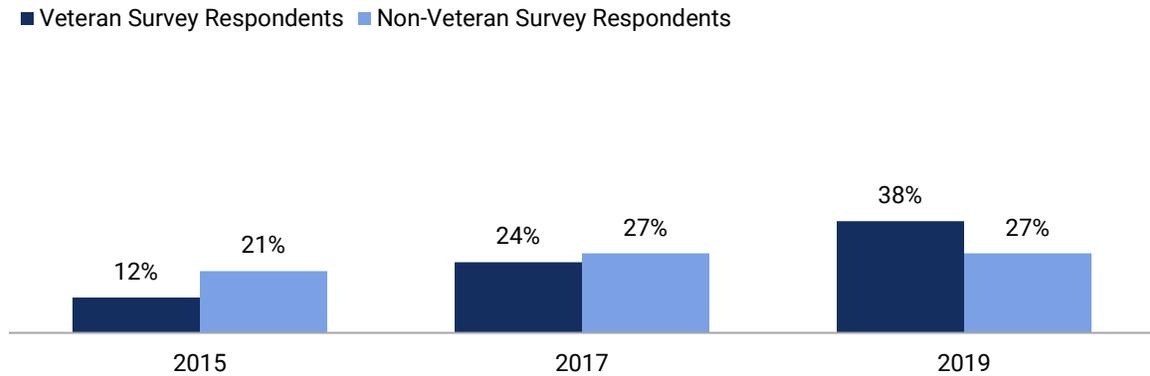


2019 Veterans n=28, Non-Veterans n=306

## INCARCERATION

Nationally, among those who are incarcerated, veterans are more likely than non-veterans to be first time offenders, to have committed a violent offense, and to receive longer prison sentences.<sup>28</sup> Veterans who are incarcerated may also face the loss of various VA benefits during this time.<sup>29</sup> In 2019, 38% of veteran survey respondents reported being incarcerated at least one night in the past year, a marked increase from 24% in 2017 and 12% in 2015.

Figure 75. INCARCERATED IN THE PAST YEAR, VETERAN AND NON-VETERAN COMPARISON



2015 Veterans n=17, 2015 Non-Veterans n= 326; 2017 Veterans n=45, Non-Veterans n=399; 2019 Veterans n=20, Non-Veterans n=231

<sup>28</sup> Bronson, J., et al. (2015). Veterans in Prison and Jail, 2011-2012. Retrieved 2019 from <http://www.bjs.gov/index.cfm?ty=pbdetail&iid=5479>.

<sup>29</sup> Military Benefits. (2014). Incarcerated Veterans. Retrieved 2017 from <http://www.military.com/benefits/veterans-benefits/incarcerated-veterans.html>.



## FAMILIES WITH CHILDREN

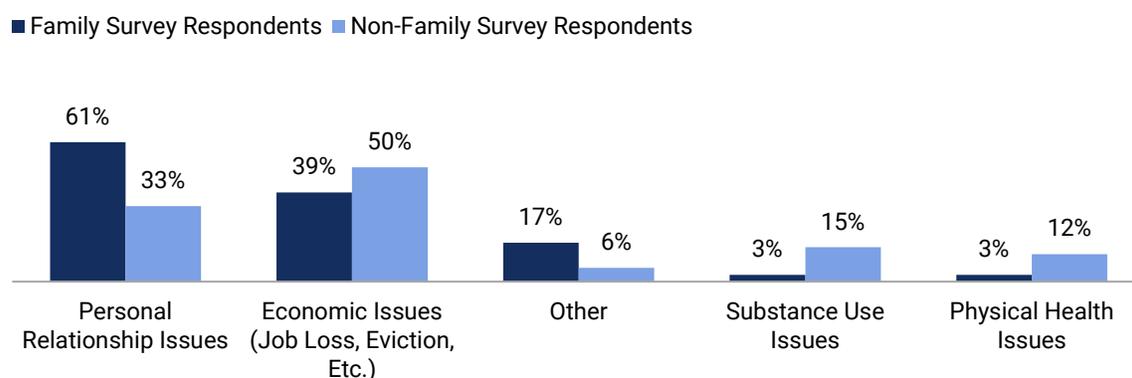
National data from 2018 suggest that 33% of all people experiencing homelessness are persons in families.<sup>30</sup> Very few families experiencing homelessness are unsheltered, as public shelters serve 90% of homeless families in the United States; this is a significantly higher proportion of the population compared with other subpopulations, including unaccompanied children and transition-age youth. Data on families experiencing homelessness suggest that they are not much different from other families living in poverty.

Nationally, the majority of families experiencing homelessness are households headed by single women and families with children under the age of six.<sup>31</sup> 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.<sup>32</sup>

## PRIMARY CAUSE OF HOMELESSNESS

The primary cause of homelessness varied considerably between family and non-family survey respondents. Nearly twice as many family respondents attributed their homelessness to personal relationship issue as non-family respondents (61% and 33%, respectively). Furthermore, few family respondents identified substance use (3%) or physical health issues (3%) as their primary cause of homelessness, lower than non-family respondents.

Figure 76. PRIMARY CAUSE OF HOMELESSNESS, FAMILY AND NON-FAMILY COMPARISON



2019 Family n=36, Non-Family n=317

Note: Multiple response question. Percentages may not add up to 100.

<sup>30</sup> U.S. Department of Housing and Urban Development. (2018). The 2018 Annual Assessment Report (AHAR) to Congress. Retrieved 2019 from <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>

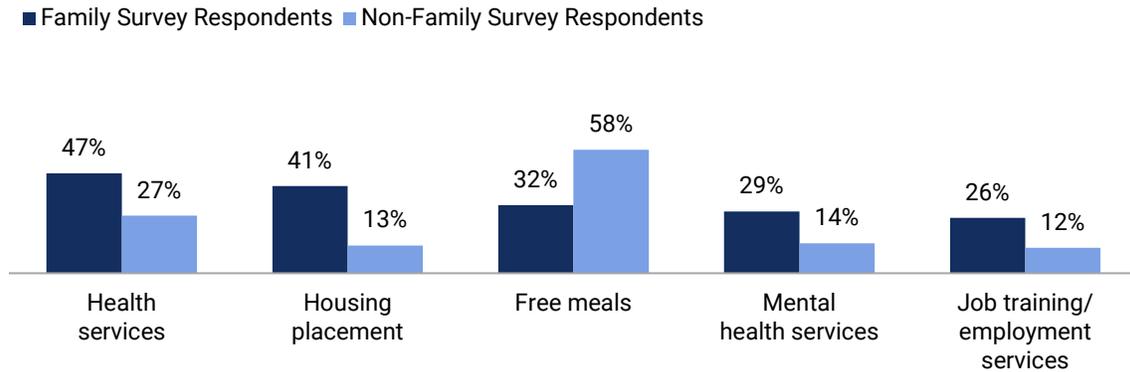
<sup>31</sup> U. S. Department of Health and Human Services. (2007). Characteristics and Dynamics of Homeless Families with Children. Retrieved 2015 from <http://aspe.hhs.gov/>

<sup>32</sup> U.S. Interagency Council on Homelessness. (2015). Opening Doors. Retrieved 2015 from <http://www.usich.gov/>

## ACCESS TO SERVICES

Overall, 91% of family respondents accessed at least one service in comparison to 73% of non-families. Just under half (47%) of family respondents accessed health services, 41% were accessing housing placement services, and 32% accessed free meals. In contrast, 58% of non-family respondents accessed free meals.

Figure 77. ASSISTANCE ACCESSED, FAMILY AND NON-FAMILY COMPARISON



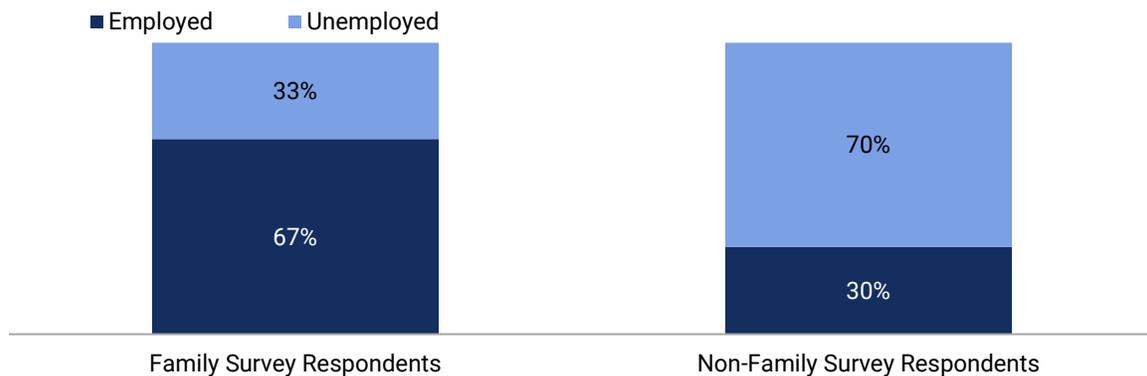
2019 Family n=34, Non-Family n=300

Note: Multiple response question. Percentages may not add up to 100.

## EMPLOYMENT

Those in families with children were more likely to be employed than non-families: two-thirds (67%) of family respondents reported employment in contrast to 30% of non-family respondents.

Figure 78. EMPLOYMENT STATUS, FAMILY AND NON-FAMILY COMPARISON

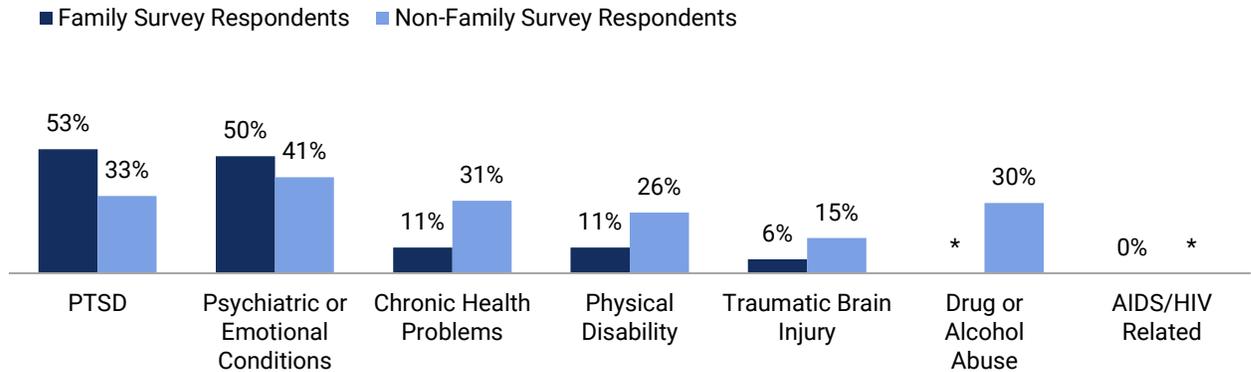


2019 Family n=36, Non-Family n=305

## HEALTH CONDITIONS

Respondents in families with children had fewer disabling conditions than non-families but higher rates of mental health conditions: one-third (33%) of family respondents reported a disabling condition (a health condition that prevents steady work or stable housing) compared to 39% of non-family respondents. More than half (53%) of respondents in families with children reported Post-Traumatic Stress Disorder (PTSD), higher than 33% of non-families. Additionally, 50% of family respondents reported a psychiatric or emotional condition.

Figure 79. HEALTH CONDITIONS AMONG HOMELESS FAMILIES WITH CHILDREN, FAMILY AND NON-FAMILY COMPARISON



2019 Family n=36, Non-Family n=324

Note: Multiple response question. Percentages may not add up to 100.

\* Suppressed due to small sample size.



## UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH

Due to the often hidden nature of youth homelessness, limited data are available on unaccompanied children and transition-age youth experiencing homelessness. Although largely considered an undercount, nationwide estimates from 2018 suggest there are at least 36,361 unaccompanied children and transition-age youth on the streets and in public shelters, a decrease of 11% from 2017.<sup>33</sup> This decrease may be due, in part, to the increased focus on youth since the 2017 count.

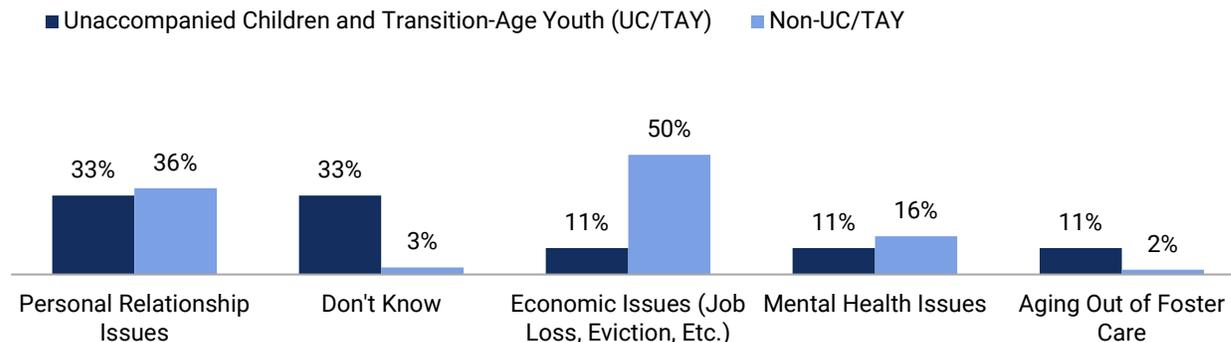
Young people experiencing homelessness have a harder time accessing services, including shelter, medical care, and employment. This is due to the stigma of their housing situation, lack of knowledge of available resources, and a dearth of services targeted to young people.<sup>34</sup>

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, HUD placed increased focus on gathering data on unaccompanied homeless children and transition-age youth during the Point-in-Time Count.

### PRIMARY CAUSE OF HOMELESSNESS

One-third (33%) of unaccompanied children and transition-age youth identified personal relationship issues as the primary cause of their homelessness, including arguments with family or friends. An additional 33% could not identify the cause of their homelessness.

Figure 80. PRIMARY CAUSE OF HOMELESSNESS, UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH (UC/TAY) AND NON-UC/TAY COMPARISON (TOP 5 RESPONSES)



2019 Unaccompanied Children and Transition-Age Youth (UC/TAY) n=9, Non-UC/TAY n=344

Note: Multiple response question; percentages may not add up to 100. Please use caution when interpreting results due to small sample size.

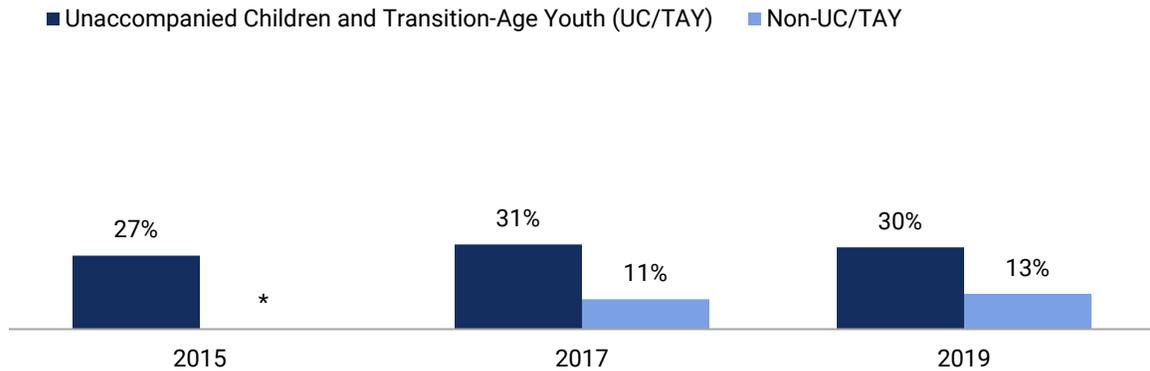
<sup>33</sup> U.S. Department of Housing and Urban Development. (2018). The 2018 Annual Assessment Report (AHAR) to Congress. Retrieved 2019 from <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>

<sup>34</sup> National Coalition for the Homeless. (2011). Homeless Youth Fact Sheet. Retrieved 2011 from <http://www.nationalhomeless.org>.

### FOSTER CARE EXPERIENCE

Similar to the 2017 results, 30% of unaccompanied children and transition-age youth had experience in the foster care system compared to 13% of adults over 25.

Figure 81. HISTORY OF FOSTER CARE, UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH (UC/TAY) AND NON-UC/TAY COMPARISON



2015 Unaccompanied Children and Transition-Age Youth (UC/TAY) n= 30; 2017 UC/TAY n= 45, Non-UC/TAY n=393; 2019 UC/TAY n=10, Non-UC/TAY n=343

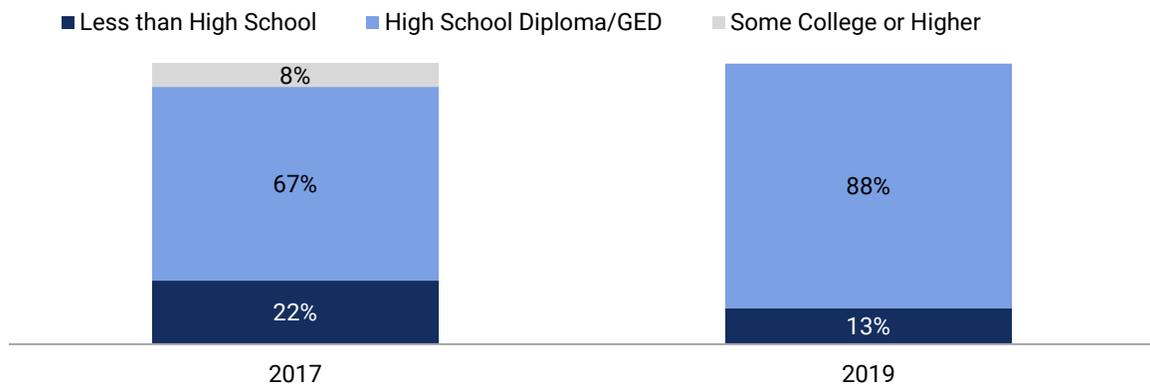
\* Data unavailable

Note: Please use caution when interpreting results due to small sample size.

### EDUCATIONAL ATTAINMENT

In 2019, 88% of unaccompanied children and transition-age youth had a high school credential, 0% had attended any college, and 13% had less than a high school credential.

Figure 82. EDUCATIONAL ATTAINMENT



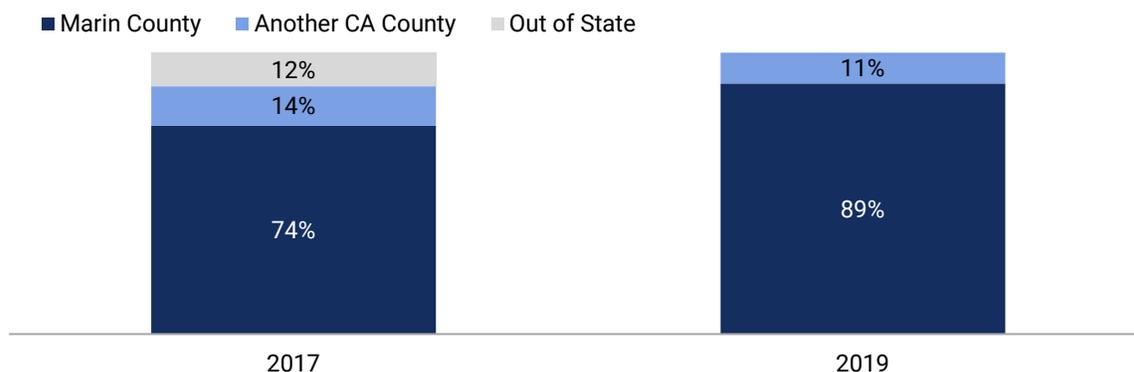
2017 Unaccompanied Children and Transition-Age Youth (UC/TAY) n= 45; 2019 UC/TAY n=8

Note: Please use caution when interpreting results due to small sample size. Percentages may not add up to 100 due to rounding.

## PLACE OF RESIDENCE

Eighty-nine percent (89%) of unaccompanied children and transition-age youth survey respondents were living in Marin County at the time they became homeless this current time, 11% were living in another California county, and none were living out of state.

Figure 83. PLACE OF RESIDENCE AT ONSET OF CURRENT HOMELESS EPISODE



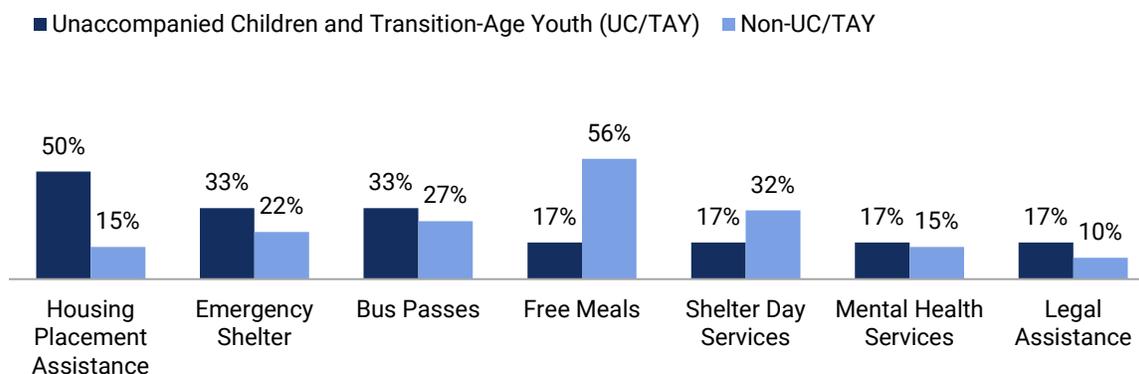
2017 Unaccompanied Children and Transition-Age Youth (UC/TAY) n=43; 2019 UC/TAY n=9

Note: Please use caution when interpreting results due to small sample size.

## ACCESS TO SERVICES

When asked about services they currently access, 50% of unaccompanied children and transition-age youth reported they were receiving assistance with housing placement compared to 15% of adults over age 25. An additional third (33%) reported accessing both emergency shelter and bus passes. Youth respondents were less likely to receive free meals (17%) than those over age 25.

Figure 84. ACCESS TO SERVICES, UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH (UC/TAY) AND NON-UC/TAY COMPARISON (TOP 7 RESPONSES)



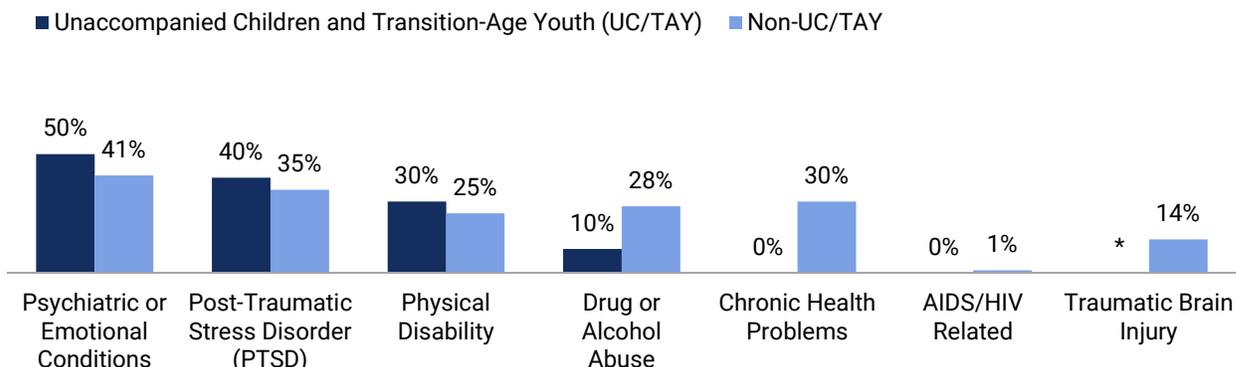
2019 Unaccompanied Children and Transition-Age Youth (UC/TAY) n=6, Non-UC/TAY n=328

Note: Please use caution when interpreting results due to small sample size.

## HEALTH STATUS

While unaccompanied children and transition-age youth had higher rates psychiatric or emotional conditions and Post-Traumatic Stress Disorder, they had lower rates of drug or alcohol abuse, chronic health problems, and traumatic brain injury than those age 25 and over.

Figure 85. HEALTH CONDITIONS, UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH (UC/TAY) AND NON-UC/TAY COMPARISON



2019 Unaccompanied Children and Transition-Age Youth (UC/TAY) =10, Non-UC/TAY n=350

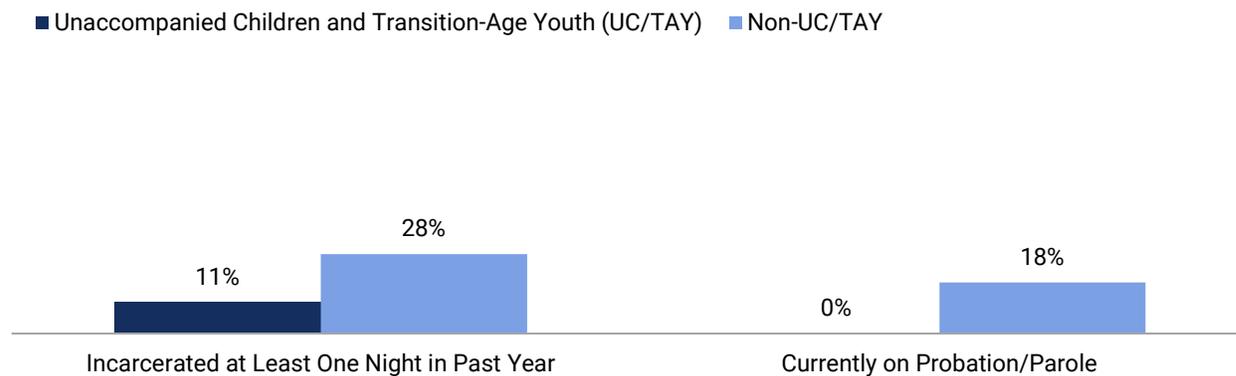
Note: Multiple response question. Percentages may not add up to 100. Please use caution when interpreting results due to small sample size.

\* Suppressed due to small sample size.

## INCARCERATION

Eleven percent (11%) of unaccompanied children and transition-age youth experiencing homelessness had spent a night in jail or prison in the past year, lower than 28% of adults over age 25. No unaccompanied children or transition-age youth experiencing homelessness (0%) reported being on probation or parole.

Figure 86. INCARCERATION AND PROBATION/PAROLE, UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH (UC/TAY) AND NON-UC/TAY COMPARISON



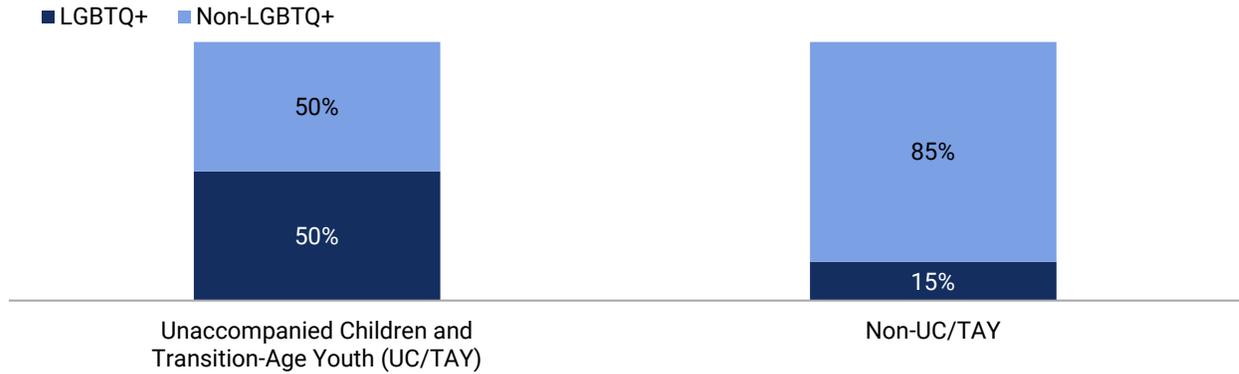
2019 Unaccompanied Children and Transition-Age Youth (UC/TAY) =8-9, Non-UC/TAY n=243-269

Note: Multiple response question. Percentages may not add up to 100. Please use caution when interpreting results due to small sample size.

## SEXUAL ORIENTATION AND GENDER IDENTITY

Half (50%) of unaccompanied homeless children and transition-age youth respondents reported identifying as LGBTQ+ in comparison with 15% of adults over 25 experiencing homelessness.

Figure 87. IDENTIFYING AS LGBTQ+, UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH (UC/TAY) AND NON-UC/TAY COMPARISON



2019 Unaccompanied Children and Transition-Age Youth (UC/TAY) n=10, Non-UC/TAY n=350  
Note: Please use caution when interpreting results due to small sample size.



## OLDER ADULTS AGE 60+

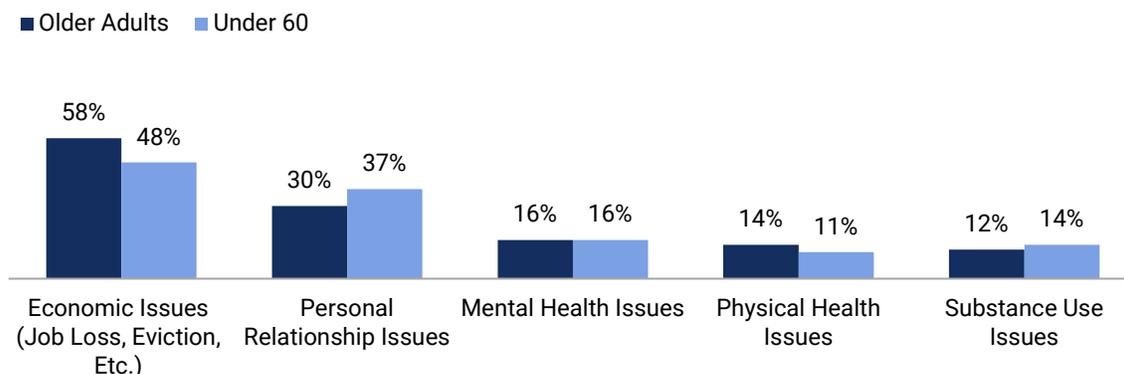
The number of older adults experiencing homelessness has risen in accordance with the overall growth of the older adult population in the U.S. Because older adults experiencing homelessness have unmet mental health, substance use, and physical health needs, their mortality rates are higher than that of the general population.<sup>35</sup> Older adults experiencing homelessness face different challenges than younger populations and may benefit from targeted services.

While homeless older adults have not been identified as a specific subpopulation of interest by the federal government, Marin County recognized the growing trend and initiated an effort to gather additional information on the population. The following section details the characteristics of adults age 60 and older experiencing homelessness in Marin County.<sup>36</sup>

### PRIMARY CAUSE OF HOMELESSNESS

Older adults and those under age 60 identified similar causes of homelessness. Fifty-eight percent (58%) of older adults cited economic issues, 30% cited personal relationship issues, and 16% reported mental health issues as the primary cause of their homelessness.

Figure 88. PRIMARY CAUSE OF HOMELESSNESS, OLDER ADULT AND UNDER 60 COMPARISON



2019 Older Adults n=57, Under 60 n=296

Note: Multiple response question. Percentages may not add up to 100.

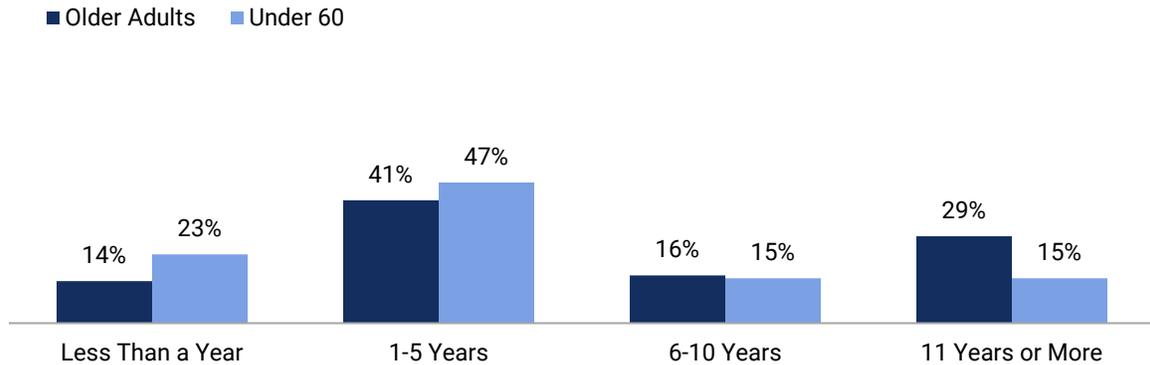
<sup>35</sup> CSH & Hearth (2011). Ending Homelessness among Older Adults and Elders through Permanent Supportive Housing. Retrieved 2017 from <http://www.csh.org/>.

<sup>36</sup> This section prioritizes populations aged 60+ based on the age when older adult programs begin and the federal definition of "older American". The previous section on older adults includes census data for those age 50+.

### LENGTH OF HOMELESSNESS

Older adults were almost twice as likely to be likely to be homeless for 11 years or more than those under age 60, (29% and 15%, respectively). Eighty-six percent (86%) of older adults reported being homeless for one year or more compared to 77% of those under age 60.

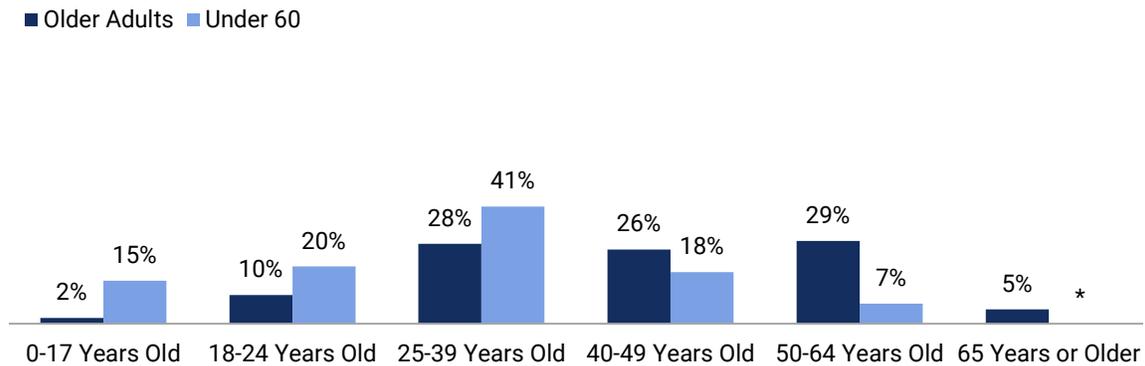
Figure 89. TOTAL LENGTH OF HOMELESSNESS, OLDER ADULT AND UNDER 60 COMPARISON



2019 Older Adults n=56, Under 60 n=292  
 Note: Percentages may not add up to 100 due to rounding.

Forty percent (40%) of respondents over age 60 first experienced homelessness before age 40, and 12% first experienced homelessness under age 25. Consequently, 12% of older adults have experienced homelessness intermittently for at least 35 years.

Figure 90. AGE AT FIRST EXPERIENCE OF HOMELESSNESS, OLDER ADULT AND UNDER 60 COMPARISON

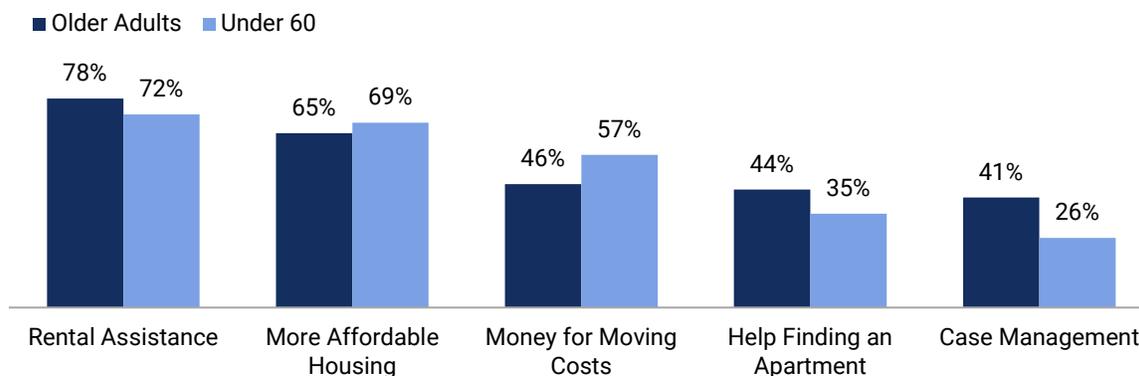


2019 Older Adults n=58, Under 60 n=290  
 \* Not applicable

## PERMANENT HOUSING

Similar to those under age 60, over three-quarters (78%) of older adults cited the need for rental assistance in order to obtain housing. Sixty-five percent (65%) also reported needing more affordable housing, and 46% reported needing money for moving costs. The vast majority (91%) of older adults identified the help they need to get into permanent housing, with 13% of older adult respondents reporting they chose to be homeless.

Figure 91. OBTAINING HOUSING, OLDER ADULT AND UNDER 60 COMPARISON (TOP 5 RESPONSES)



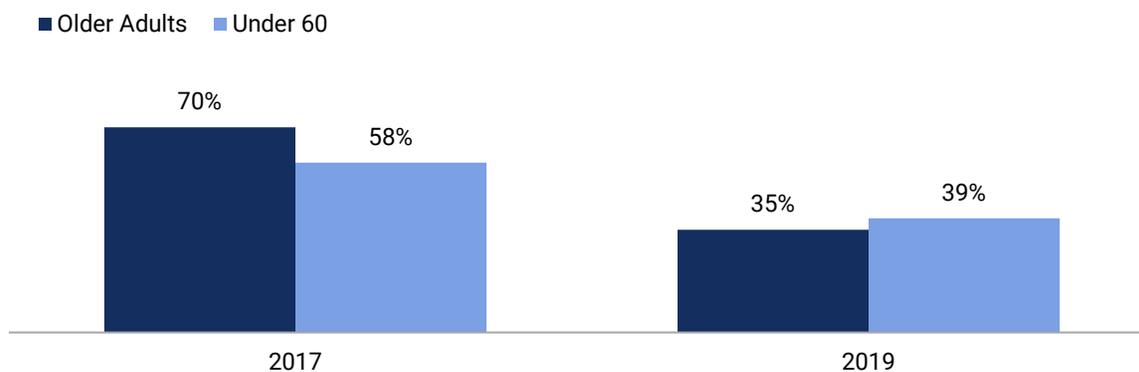
2019 Older Adults n=54, Under 60 n=293

Note: Multiple response question. Percentages may not add up to 100.

## HEALTH CONDITIONS

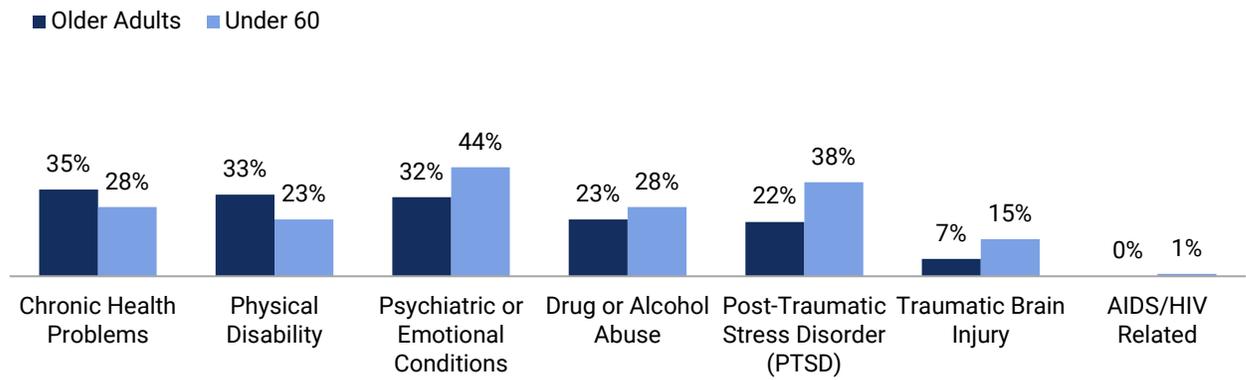
Approximately one-third (35%) of older adult respondents reported at least one disabling condition (a health condition preventing them from steady work or stable housing), a steep decline from 70% in 2017. Additionally, 35% of older adults reported a chronic health problem compared to 28% of those under age 60, and one-third (33%) of older adults reported a physical disability compared to 23% of those under 60. However, older adults were less likely to report a psychiatric or emotional condition, drug or alcohol abuse, or post-Traumatic Stress Disorder than those under 60. Older adults received health care at similar locations as those under age 60, with 47% using community clinics, 35% using the emergency room, and 16% using free clinics.

Figure 92. AT LEAST ONE DISABLING CONDITION, OLDER ADULT AND UNDER 60 COMPARISON



2017 Older Adults n=57, Under 60 n=374; 2019 Older Adults n=60, Under 60 n=300

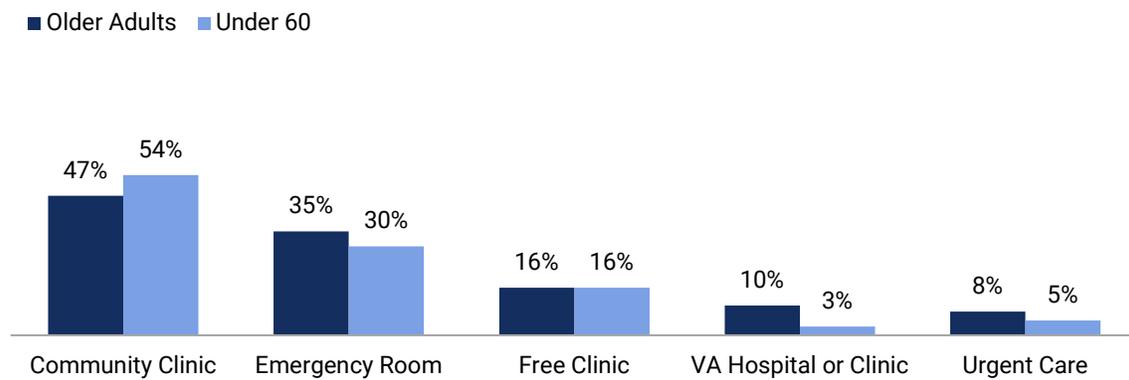
Figure 93. HEALTH CONDITIONS, OLDER ADULT AND UNDER 60 COMPARISON



2019 Older Adults n=60, Under 60 n=300

Note: Multiple response question. Percentages may not add up to 100.

Figure 94. USUAL PLACE TO RECEIVE CARE, OLDER ADULT AND UNDER 60 COMPARISON



2019 Older Adults n=51, Under 60 n=275



# Conclusion

The 2019 Marin County Homeless Count and Survey was performed using HUD-recommended practices for counting and surveying those experiencing homelessness. The 2019 Point-in-Time Count identified 1,034 persons experiencing homelessness in Marin County. This represents a decrease of 7% from the count conducted in 2017.

Marin County has implemented a system-wide approach to ending homelessness that includes adopting a Housing First model, prioritizing the most vulnerable people for housing, sharing data and working collaboratively client by client, and expanding cross-sector partnerships with nonprofits, hospitals, law enforcement, cities, and other partners.

Marin implemented the Housing First approach, an evidence-based practice, because it is the most effective way to address homelessness. Housing First recognizes a person's housing need first, then surrounds them with support necessary to achieve stability and independence.

Between the 2017 and 2019 Point-in-Time Counts, Marin housed 109 of the most vulnerable chronically homeless residents of Marin under the new system-wide approach, with a 94% housing retention rate. These placements, combined with a shift to housing-focused shelter at Homeward Bound's Mill Street Center emergency shelter, a diversion program at the St. Vincent de Paul Society of Marin, a modified Assertive Community Treatment case management team at the Ritter Center, and a partnership between the Marin County Health and Human Services and Marin Housing Authority, contributed to the decreases in homelessness seen in this report.

The 2019 Marin County Homeless Count and Survey revealed a diverse population with many different trends and needs. There are many valuable insights into the population experiencing homelessness in Marin County for both the general population and subpopulations:

## General Population Experiencing Homelessness

- A 20% decrease in persons enumerated in shelters and a 0% change in those who were unsheltered.
- 31% of those experiencing homelessness were over the age of 50, and 19% were under age 25.
- Those who are Black or African American were overrepresented in the population: 2% of the general population but 17% of the homeless population identified as Black or African American.
- First time homelessness decreased from 35% in 2017 to 30% in 2019.
- 70% of survey respondents had experienced homelessness for one year or more.
- Nearly three-quarters (73%) of survey respondents were living in Marin County when they began experiencing homelessness.
- Economic issues were the most frequently cited cause of homelessness (49%)
- 73% cited a need for rental assistance to get into permanent housing.

- 28% had spent at least one night in jail or prison over the past year.
- 14% had a history of foster care.
- 71% of those currently experiencing domestic violence were women.
- 42% desired housing placement assistance.
- 34% worked at least part time.

#### Chronically Homeless

- Those experiencing chronic homelessness decreased 28% to 257 individuals, with a 105% increase in sheltered and 40% decrease in unsheltered persons.
- The percentage of women increased to 41% of the chronically homeless population.
- 23% of chronically homeless respondents but only 8% of non-chronically homeless respondents identified physical health issues as the primary cause of their homelessness.
- Those experiencing chronic homelessness used the emergency room an average of 1.56 times over the past three months, while non-chronically homeless respondents reported using the emergency room 0.69 times over the past three months.
- 52% of chronically homeless survey respondents indicated they would like housing placement services.
- The percentage of those experiencing chronic homelessness who have spent a night in the jail or prison in the past year increased to 45% in 2019 from 34% in 2017.

#### Veterans

- More veterans are being sheltered: 19% were sheltered in 2019, up from 13% in 2017.
- 57% of veteran respondents reported being homeless for more than six years in total compared to 29% of non-veterans.
- 45% of veteran respondents reported a physical disability in comparison with 22% of non-veteran respondents.
- 38% of veteran survey respondents reported being incarcerated at least one night in the past year, a marked increase from 24% in 2017 and 12% in 2015.

#### Families with Children

- The number of families experiencing homelessness decreased 28% from 2017.
- 22% of homeless individuals in families identified as Black or African American compared with 2% of the general Marin County population.
- Nearly twice as many family respondents attributed their homelessness to personal relationship issue (61%) as non-family respondents (33%).
- 91% of family respondents accessed at least one service in comparison to 73% of non-families.
- 67% of family respondents reported employment in contrast to 30% of non-family respondents.
- More than half (53%) of respondents in families with children reported Post-Traumatic Stress Disorder (PTSD), higher than 33% of non-families.

#### Unaccompanied Children and Transition-Age Youth

- There were 8 unaccompanied children and 99 unaccompanied transition-age youth (age 18-24) enumerated, accounting for 10% of the population experiencing homelessness in Marin County.

- An increased number of youth identified as Hispanic or Latinx, with 29% in 2019 compared to 10% in 2017.
- 30% of unaccompanied children and transition-age youth had experience in the foster care system compared to 13% of adults over 25.
- Eighty-nine percent (89%) of unaccompanied children and transition-age youth survey respondents were living in Marin County at the time they became homeless this current time.
- Youth respondents were less likely to receive free meals (17%) than those over age 25.
- Half (50%) of unaccompanied homeless children and transition-age youth respondents reported identifying as LGBTQ+ in comparison with 15% of adults over 25 experiencing homelessness.

#### Older Adults

- Older adults comprised 31% of the population experiencing homelessness.
- 66% were unsheltered and 34% were sheltered.
- Black or African Americans were overrepresented in the homeless older adult population, representing 15% of the population, while 73% of older adults identified as White.
- 7% of older adults identified as Hispanic or Latinx, fewer than the 19% of the general population experiencing homelessness.
- 58% of older adults cited economic issues as their primary cause of homelessness.
- Older adults were almost twice as likely to be homeless for 11 years or more (29%) than those under age 60 (15%).
- 12% of older adults have experienced homelessness off and on for at least 36 years.

In summary, there are still many challenges to overcome in achieving the goal of eliminating homelessness in Marin County and in helping individuals and families experiencing homelessness access necessary services and support.

The 2019 Marin County Homeless Count and Survey provides valid and useful data that help create a more comprehensive profile of those experiencing homelessness. The dissemination and evaluation of this effort will help the Continuum of Care and all Marin County stakeholders continue to produce and refine constructive and innovative solutions to end homelessness and make it a rare, brief, and one-time occurrence. Through innovative and effective housing programs and services, Marin County remains committed to moving homeless persons into permanent housing.

Data presented in the 2019 Marin County Homeless Count and Survey report fulfills federal reporting requirements for the Continuum of Care, and will continue to inform additional outreach, service planning, and policy decision-making by local planning bodies over the next year as Marin County continues to address homelessness.



# Appendix A: Methodology

## OVERVIEW

The purpose of the 2019 Marin County Homeless Point-in-Time Count and Survey was to produce a point-in-time estimate of people experiencing homelessness in Marin County, a region which covers approximately 828 square miles. The results of the street counts were combined with the results from the shelter count to produce the total estimated number of persons experiencing homelessness in Marin County on a given night, using 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 counted. A more detailed description of the methodology follows.

## COMPONENTS OF THE HOMELESS COUNT METHOD

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

- 1) General street count: an enumeration of unsheltered homeless individuals between the hours of 5:00AM to 9:00AM;
- 2) Youth street count: a targeted enumeration of unsheltered homeless youth under the age of 25 between the hours of 3:00 PM and 7:00 PM;
- 3) Shelter count: an enumeration of sheltered homeless individuals on the night before the street count;
- 4) Survey: an in-person survey of unsheltered and sheltered individuals conducted by peer surveyors in the weeks following the general street count; and
- 5) Marin County Office of Education count: an enumeration of families previously identified as unsheltered.

The general street count was designed to take place before most shelters released persons who slept at the shelter the previous night. In areas with shelters, the immediate area surrounding the shelter was prioritized to eliminate potential double counting of individuals.

## THE PLANNING PROCESS

To ensure the success and integrity of the count, many county and community agencies collaborated on community outreach, volunteer recruitment, logistical plans, methodological decisions, and interagency coordination efforts. ASR provided technical assistance for these aspects of the planning process. ASR has over 19 years of experience conducting homeless counts and surveys throughout California and across the nation. Their work is featured as a best practice in the HUD publication, *A Guide to Counting Unsheltered Homeless People*, as well as in the Chapin Hall at the University of Chicago publication, *Conducting a Youth Count: A Toolkit*.

## COMMUNITY INVOLVEMENT

Local homeless and housing service providers and advocates were valued partners in the planning and implementation of this count. Thanks to local efforts, the count included enumerators with a diverse range of knowledge, including expertise regarding areas frequented by homeless individuals, individuals 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.

## UNSHeltered Count Methodology

### DEFINITION

For the purposes of this study, the HUD definition of unsheltered homeless persons was used:

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

### METHODOLOGICAL IMPROVEMENTS

The 2019 street count methodology followed an established, HUD-approved methodology used in the 2015 and 2017 counts, with the addition of dedicated youth outreach in each of those years.

### VOLUNTEER AND GUIDE RECRUITMENT AND TRAINING

Many individuals who live and/or work in Marin County supported the county's effort to enumerate the local homeless population. In 2019, 116 community volunteers and 33 homeless guides participated in the general street count on January 28, 2019.

Extensive outreach efforts were conducted, including to local non-profits and volunteer agencies that serve individuals experiencing homelessness. Local shelters and service providers recruited and recommended the most knowledgeable and reliable homeless individuals to participate in the count. Homeless guides were paid \$15 for attending an hour-long training as well as \$15 per hour worked on the day of the count.

Volunteers and guides served as enumerators on the morning of the count, canvassing the county in teams to visually count homeless persons. County and ASR staff supported each of the three dispatch centers (Marin City, San Rafael, and Novato), greeting volunteers and guides, distributing instructions, maps, and supplies to enumeration teams, and collecting data sheets from returning teams.

In order to participate in the count, all volunteers and guides were requested to attend an hour-long training before the count. Trainings were held in multiple locations throughout the county. Training covered all aspects of the count, including the definition of homelessness, how to identify homeless individuals, potential locations where homeless individuals might be located, how to safely and respectfully conduct the count, how to use the tally count sheets and maps to ensure the entirety of the assigned area was covered, as well as other tips to help ensure an accurate count.

### SAFETY PRECAUTIONS

Every effort was made to minimize potentially hazardous situations. Law enforcement agencies were notified of pending street count activity in their jurisdictions. In census tracts with a high concentration of homeless encampments, specialized teams with knowledge of those encampments were identified and assigned to those areas. 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 DISPATCH CENTERS

To achieve complete coverage of the county within the morning timeframe, the planning team identified five areas for the placement of dispatch centers on the morning of the count: Marin City, San Rafael, and Novato. Volunteers selected their dispatch 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 dispatch center closest or most central to the coverage area to facilitate the timely deployment of enumeration teams into the field.

## LOGISTICS OF ENUMERATION

On the morning of the street count, teams of two or more persons were created to enumerate designated areas of the county for the street count. Each team was generally composed of at least one trained volunteer and one trained homeless guide, and provided with their assigned census tract maps, tally sheets, training guidelines, and other supplies.

All accessible streets, roads, parks, and highways in the enumerated tracts were traversed by foot or car. Homeless enumerators were instructed to include themselves on their tally sheets for the street count if they were not going to be counted by the shelter count. Dispatch center volunteers provided each team with tally sheets to record the number of homeless persons observed in addition to basic demographic and location information. Dispatch center volunteers also verified that at least one person on each team had a cell phone available for their use during the count and recorded the number on the volunteer deployment log sheet. Teams were asked to cover the entirety of their assigned areas.

## MARIN COUNTY OFFICE OF EDUCATION COUNT

In the days following the January 28 Point-in-Time Count, Adopt A Family of Marin and representatives from Kentfield, San Rafael, Larkspur-Corte Madera, and Dixie school districts contacted households known to have recently experienced homelessness or those vulnerable to homelessness (i.e., doubled up or in a hotel/motel). They called those who qualified to ascertain where they stayed on the night of January 27.

Representatives attempted to contact a total of 28 households, with 14 confirming their sleeping location on the night of the Point-in-Time Count. All but one household were in a doubled-up situation, motel/hotel, or in shelter. One individual age 18-24 was added to the Point-in-Time Count results after screening for duplication.

## ADDITIONAL ENUMERATIONS

Many people experiencing homelessness in Marin County reside in cars, vans, and RVs. To more accurately count the number of people living in vehicles on the night of January 27, several police departments enumerated vehicles overnight before the beginning of the street count. To avoid duplication with the general unsheltered count beginning at daybreak, the vehicular count ended at 5:00 AM, and the last four digits of all vehicle license plates were recorded so vehicles could be de-duplicated with data from the general street count. Additionally, special teams covered individuals living on vessels in Richardson Bay and those in the coastal regions of western Marin.

## SUPPLEMENTAL YOUTH UNSHELTERED COUNT METHODOLOGY

### GOAL

The goal of the 2019 dedicated youth count was to improve representation of unaccompanied homeless children and youth under the age of 25 in the Point-in-Time Count. Many homeless children and youth do not use homeless services, are unrecognizable to adult street count volunteers, and may be in unsheltered locations that are difficult to find. Therefore, traditional street count efforts are not as effective in reaching youth.

### RESEARCH DESIGN

As in all years, planning for the 2019 supplemental youth count included homeless youth service providers and youth with lived experience of homelessness. Local service providers identified locations where homeless youth were known to congregate and recruited youth currently experiencing homelessness with knowledge of where to locate homeless youth to serve as guides for the count. Late afternoon and early evening enumeration were the ideal times recommended by advocates to conduct the youth count.

A focus group was held with currently and previously homeless youth to identify areas to canvass for the supplemental youth count. Side by Side Transitional Age Youth took the lead on recruiting four youth to work as peer enumerators in addition to three youth service provider staff members who accompanied and transported the youth around the county. These teams counted homeless youth in the identified areas of Marin County on January 28, 2019.

Youth workers were paid \$15 per hour for their time, including time spent in training prior to the count. Youth and youth service provider staff members were trained on where and how to identify homeless youth as well as how to record the data.

### DATA COLLECTION

It was determined that homeless youth would be more prominent on the street during daylight hours rather than in the early morning when the general count was conducted. The youth count was conducted from approximately 3:00 PM to 7:00 PM on January 28, 2019. Youth worked in teams of two to four, with teams coordinated by youth street outreach workers.

Both HUD and the United States Interagency Council on Homelessness recognize that youth do not commonly congregate with homeless adults and are not easily identified by non-youth. For this reason, these agencies accept and recommend that communities count youth at times when they can be seen rather than during traditional enumeration times.

### STREET COUNT DE-DUPLICATION

Data from the supplemental youth count and general street count were compared and de-duplicated by assessing location, gender, and age. In total, 2 persons under the age of 25 were identified as duplicates and removed from the data set.

## SHELTER COUNT METHODOLOGY

### GOAL

The goal of the shelter and institution count is to gain an accurate count of persons temporarily housed in shelters and other institutions across Marin 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 Point-in-Time Counts was used. This definition includes individuals and families living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement.

### RESEARCH DESIGN

The homeless occupancy of shelters in Marin County was collected for the night of January 27, 2019. All shelter data were gathered either directly from the shelter or from Marin County's Homeless Management Information System.

### CHALLENGES

There are many challenges in any homeless enumeration, especially when implemented in a community as large and geographically diverse as Marin County. Point-in-Time Counts are "snapshots" that quantify the size of the homeless population 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.

For a variety of reasons, homeless persons generally do not wish to be seen and make concerted efforts to avoid detection. Regardless of how successful outreach efforts are, an undercount of the homeless population will result, especially of hard-to-reach subpopulations such as families and youth.

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, the methodology cannot guarantee 100% accuracy. Many factors may contribute to missed opportunities, for example:

- It is difficult to identify homeless persons who may be sleeping in vans, cars, recreational vehicles, abandoned buildings, or structures unfit for human habitation.
- Homeless families with children often seek opportunities to stay on private property, rather than sleep on the streets, in vehicles, or in makeshift shelters.

Even though the Point-in-Time Count is most likely to be an undercount of the homeless population, the methodology employed—coupled with the homeless survey—is the most comprehensive approach available and results in a minimum number of persons experiencing homelessness at a single point in time.

## **SURVEY METHODOLOGY**

### **PLANNING AND IMPLEMENTATION**

A survey of 360 unique individuals experiencing homelessness was conducted between January 28 and February 15, 2019 to yield qualitative data about people experiencing homelessness in Marin County. These data are used for the McKinney-Vento Continuum of Care Homeless Assistance funding application and are important for future program development and planning.

The survey elicited information such as gender, family status, military service, duration and recurrence of homelessness, nighttime accommodations, causes of homelessness, and access to services through open-ended, closed-ended, and multiple response questions. 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, Marin staff, and community partners. 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 an incentive 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.

### **SURVEY SAMPLING**

Based on a Point-in-Time Count estimate of 1,034 homeless persons, with a randomized survey sampling process, the 360 valid surveys represented a confidence interval of +/- 4% with a 95% confidence level when generalizing the results of the survey to the estimated population of individuals experiencing homelessness in Marin County.

The 2019 survey was administered in shelters, transitional housing facilities, and on the street. In order to ensure the representation of transitional housing residents, who can be underrepresented in a street-based survey, survey quotas were created 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 homeless youth, minority ethnic groups, military veterans, domestic violence survivors, and families. One way to increase the participation of these groups was to recruit peer survey workers. Since 2009, the ASR survey methodology has prioritized a peer-to-peer approach to data collection by increasing the number of currently homeless surveyors.

In order to increase randomization of sample respondents, survey workers were trained to employ an “every third encounter” survey approach. Survey workers were instructed to approach every third person they considered to be an eligible survey respondent. If the person declined to take the survey, the survey worker 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, would be kept confidential, and would not be traceable to any single individual.

### 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 Marin County Homeless Survey did not include an equal representation of all homeless experiences. For example, a smaller number of surveys were conducted among transition-age youth than in previous years.

There may be some variance in the data that individuals experiencing homelessness self-reported. However, using a peer interviewing methodology is believed to allow the respondents to be more candid with their answers and may help reduce the uneasiness of revealing personal information. Further, service providers and county staff members recommended individuals who would be the best suited to conducting interviews and these individuals received comprehensive training about how to conduct interviews. Service providers and county staff also reviewed the surveys to ensure quality responses. Surveys that were considered incomplete or containing false responses were not accepted.



# 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, post-traumatic stress disorder, 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** – Temporary accommodation for people experiencing homelessness, 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** – An unaccompanied adult over the age of 18.

**Transition-age youth** – Young people between the ages of 18 and 24 years old who are not accompanied by a parent or guardian.

**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.



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# Marin County

HOMELESS COUNT & SURVEY

COMPREHENSIVE REPORT

2019