



SAN FRANCISCO



HOMELESS

POINT-IN-TIME COUNT & SURVEY

COMPREHENSIVE REPORT

2015

REPORT PRODUCED BY ASR

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Applied Survey Research (ASR) is a nonprofit, 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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SHELTERS

AIDS Housing Alliance · Asian Women's Shelter · Central City Hospitality House · Compass Family Center · Dolores Street Community Services · Hamilton Family Emergency Center · Hamilton Family Residences · Huckleberry House · La Casa de Las Madres · Larkin Street Youth Services · Multi-Service Center South · Next Door · North Beach Citizens · Providence · Raphael House · Rosalie House · San Francisco Interfaith Council Winter Shelters · SFHOT Stabilization Rooms · St. Joseph's Family Shelter · The Sanctuary

SAFE HAVEN

Swords to Plowshares

TRANSITIONAL HOUSING PROGRAMS

Brennan House · Compass Family Services Clara House · Hamilton Transitional Housing Program · Larkin Street Youth Services Transitional Housing Programs · SafeHouse for Women · Salvation Army Transitional Housing Programs · Swords to Plowshares Transitional Housing · HealthRIGHT360 Transitional Housing Programs

JAIL

San Francisco County Jail

HOSPITALS

California Pacific Medical Center · Kaiser Permanente · San Francisco General Hospital · St. Francis Hospital · St. Mary's Hospital · Veterans Administration Hospital

RESIDENTIAL FACILITIES

Community Awareness and Treatment Services · Department of Public Health · Harbor Light Center · HealthRIGHT360 Programs · SFGH Psychiatric Inpatient · Swords to Plowshares DeMontfort House · Veterans Administration Programs · Cameo House

RESOURCE CENTERS

Multi-Service Center South · A Woman's Place · United Council of Human Services

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Acknowledgments





Introduction

Every two years, during the last 10 days of January, communities across the country conduct comprehensive counts of their homeless populations in order to measure the prevalence of homelessness in each community. Communities collect information on individuals and families sleeping in emergency shelters and transitional housing, as well as people sleeping on the streets, in cars, in abandoned properties, or in other places not meant for human habitation.

These biennial Point-in-Time counts of sheltered and unsheltered homeless persons are required by the U.S. Department of Housing and Urban Development (HUD) of all jurisdictions receiving federal Homeless Assistance Grant funding to provide housing and services for homeless individuals and families. Currently the San Francisco Continuum of Care receives more than \$20 million in federal funding, a key resource for the county's homeless services.

Each community reports the findings of the Point-In-Time Count in its annual funding application to HUD, and the data collected through Point-in-Time counts help the federal government to better understand the nature and extent of homelessness nationwide. The biennial Point-in-Time counts are the primary source of nationwide data on sheltered and unsheltered homeless persons.

San Francisco has worked in conjunction with Applied Survey Research (ASR) to conduct the 2015 San Francisco Homeless Count & Survey. ASR is a nonprofit social research firm with extensive experience in homeless enumeration and research.

The San Francisco homeless count had two primary components: a Point-in-Time enumeration of unsheltered homeless individuals and families (those sleeping outdoors, on the street, in parks, in vehicles, etc.) and a Point-in-Time enumeration of homeless individuals and families who have temporary shelter (those staying in an emergency shelter, transitional housing, or using stabilization rooms).

The 2015 San Francisco Point-in-Time Count was a city-wide effort. With the support of 483 community volunteers, staff from various City departments and the San Francisco Police Department, the entire city was canvassed between the hours of 8PM and midnight on January 29, 2015. This resulted in a 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 same evening.

San Francisco conducted a dedicated count of unaccompanied children and youth under the age of 25 in the two hours prior to the general unsheltered count. This dedicated count was part of a nationwide effort, established and recommended by HUD, to understand the scope of youth homelessness. The youth count was conducted between the hours of 5PM and 9PM, slightly earlier in the evening when unaccompanied children and transitional-age-youth were more likely to be visible. The count was conducted by trained youth enumerators who were or had recently experienced homelessness.¹

In the weeks following the street count, an in-depth survey was administered to 1,046 unsheltered and sheltered homeless individuals of all ages. 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 San Francisco on a single night. Special attention is given to four subpopulations including persons experiencing chronic homelessness, veterans, families with children, unaccompanied children under the age of 18, and unaccompanied youth between the ages of 18-24, also known as Transitional-Age-Youth (TAY).

To better understand the dynamics of homelessness over time, results from previous years, including 2011 and 2013, are provided where available and applicable.

FEDERAL DEFINITION OF HOMELESSNESS FOR POINT-IN-TIME COUNTS

In this study, HUD's definition of homelessness for Point-in-Time counts was used. The 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.

This narrow definition of homelessness is in contrast to the considerably broader definition adopted by the City and County of San Francisco. The definition of homelessness in San Francisco expands HUD's definition to include individuals who are "doubled-up" in the homes of family or friends, staying in jails, hospitals, and rehabilitation facilities, families living in Single Room Occupancy (SRO) units, and in substandard or inadequate living conditions including overcrowded spaces. While these data are beyond the scope of this project, information on those residing in jails, hospital, and rehabilitation facilities were gathered and is included in this report where applicable.

¹ Significant deduplication efforts were made in 2015 to ensure unaccompanied children and youth were not captured in both the youth and general street count efforts. For more information on these efforts and the overall count methodology, please see Appendix 1.

PROJECT PURPOSE AND GOALS

The 2015 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 2013 San Francisco Homeless Count & 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 under 18, transitional-age-youth, and those who are chronically homeless.

This report is intended to assist service providers, policy makers, funders, and local, state, and federal government, helping them to gain a better understanding of the population currently experiencing homelessness, measure the impact of current policies and programming, and plan for the future.

Introduction



Point-in-Time Count

The 2015 Point-in-Time Count included a complete enumeration of all unsheltered and publicly sheltered homeless persons. The general street count was conducted on January 29, 2015 from approximately 8PM to midnight and covered all 47 square miles of San Francisco. The shelter count was conducted on the same evening and included all individuals staying in emergency shelters, transitional housing facilities, domestic violence shelters, jails, hospitals and treatment facilities. The general street count and shelter count methodology were similar to those used in 2013.

In a sustained effort to improve data on the extent of youth homelessness, San Francisco conducted a dedicated youth count similar to the one conducted in 2013. While youth under the age of 25 are included in the general count efforts, traditional outreach strategies tend to undercount unsheltered homeless youth. Dedicated teams of youth peers assist with concentrated outreach to unaccompanied children and transitional-age-youth residing on the street. The dedicated youth count methodology was altered in 2015 to better ensure unaccompanied children and transitional-age-youth were not included in both the general street count and youth count.

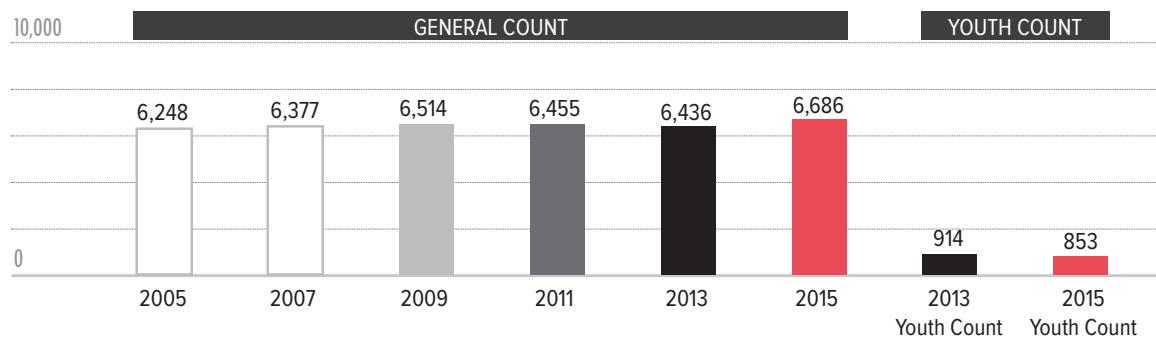
While San Francisco has worked to improve data on unaccompanied children and youth, there are still challenges and limitations to this study. Point-in-Time counts are conducted in an effort to quantify the size of the population experiencing homelessness on a single night and may not adequately represent fluctuations in the size and make up of the population. Visual street counts, such as those conducted in San Francisco, are limited by the amount and quality of data that can be collected, while maintaining the privacy and anonymity of those counted. Visual counts inherently contain some measure of error due to inherent biases and shortcoming of visual classification. Additionally, Point-in-Time counts are limited in their ability to reach certain populations that remain out of public view, these include individuals residing in their vehicles, on private property, and homeless families with children. For additional information please see Appendix 1.

NUMBER AND CHARACTERISTICS OF HOMELESS PERSONS IN SAN FRANCISCO

The number of individuals counted in the 2015 general street count and shelter count was 6,686. Compared to 2013, this was an increase of 250 individuals. The supplemental youth count found an additional 853 unaccompanied children and transitional-age-youth, a decrease of 61 individuals from 2013. When the youth count and general count are combined, the total number of unsheltered and sheltered persons in San Francisco on January 29, 2015, was 7,539. This combined count shows a 2% increase (189 individuals) in homelessness since 2013.

A ten-year trend of comparable Point-in-Time data from general count efforts (excluding the targeted youth count) identified a 7% increase in the number of persons experiencing homelessness in San Francisco between 2005 and 2015.

FIGURE 1. SAN FRANCISCO POINT-IN-TIME HOMELESS COUNT UNSHELTERED AND SHELTERED POPULATION TREND



Source: Applied Survey Research. (2015). San Francisco Homeless Count. Watsonville, CA.

Applied Survey Research. (2013). San Francisco Homeless Count. Watsonville, CA.

Applied Survey Research. (2011). San Francisco Homeless Count. Watsonville, CA.

Applied Survey Research. (2009). San Francisco Homeless Count. Watsonville, CA.

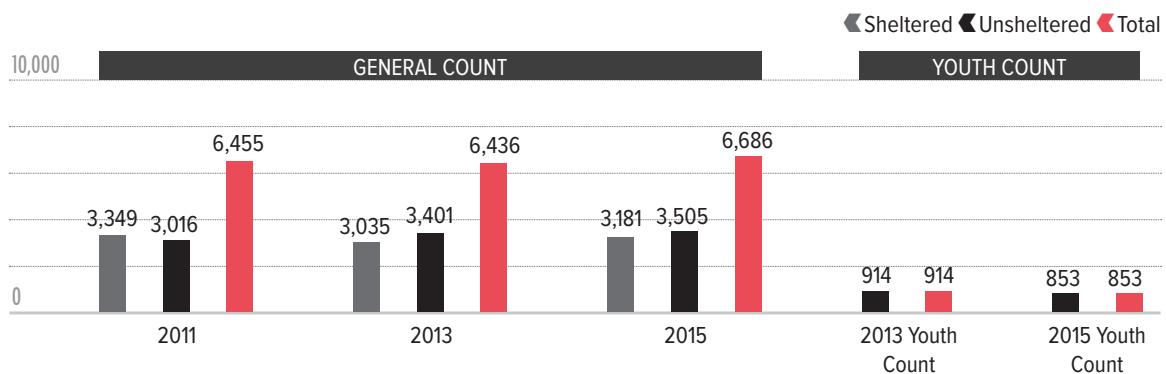
Applied Survey Research. (2007). San Francisco Homeless Count. Watsonville, CA.

Applied Survey Research. (2005). San Francisco Homeless Count. Watsonville, CA.

In 2013, San Francisco adopted a new best practice for the Point in Time Homeless Count: The Youth Count. The Youth Count is conducted on the same date as the Homeless Count, and it is a supplemental count in the areas where homeless youth tend to congregate, which is conducted by homeless youth peers. The Youth Count methodology is intended to improve the quality of data about homeless youth, as this population can be especially difficult for volunteers to identify. For the first time in 2015, the Youth Count was also conducted in the evening, like the general count to maximize deduplication.

Combined data from both the general count and dedicated youth count showed 58% of the population was unsheltered, this was a slight decrease from 59% in 2013. Dedicated youth counts have affected the number of unsheltered persons enumerated in 2013 and 2015, as these counts target unaccompanied children and youth living in unsheltered locations.

FIGURE 2. TOTAL NUMBER OF HOMELESS INDIVIDUALS ENUMERATED DURING THE SAN FRANCISCO POINT-IN-TIME HOMELESS COUNT



Source: Applied Survey Research. (2015). San Francisco Homeless Count. Watsonville, CA.
Applied Survey Research. (2013). San Francisco Homeless Count. Watsonville, CA.
Applied Survey Research. (2011). San Francisco Homeless Count. Watsonville, CA.

Note: Sheltered and unsheltered totals include non-HUD defined facilities including jails, hospitals, and treatment centers.

Point-in-Time Count

San Francisco's Point-in-Time Count includes a count of people staying in institutions and settings that fall outside the federal definition of homelessness. Of the 3,181 included in the shelter count, 24% (764 people) were counted in residential programs, jails and hospitals.

FIGURE 3. SAN FRANCISCO HOMELESS POINT-IN-TIME COUNT RESULTS BY SETTING (2015)

	SINGLE ADULTS 25 YEARS AND OLDER	UNACCOM- PANIED CHILDREN AND YOUTH UNDER 25	PERSONS IN FAMILIES	TOTAL	% OF TOTAL
Shelter Count	2,378	206	597	3,181	42%
Emergency shelter and safe havens	1,194	68	337	1,599	21%
Transitional housing	162	32	226	420	6%
Resource centers	204	6	0	210	3%
Stabilization rooms	180	4	4	188	2%
Residential Programs	373	96	30	499	7%
Jail	242	0	0	242	3%
Hospitals	23	0	0	23	<1%
Street Count	2,962	1,363	33	4,358	58%
General Count	2,962	513	30	3,505	47%
Youth Count	0	850	3	853	11%
Total	5,340	1,569	630	7,539	100%
Percent	71%	21%	8%	100%	-

Source: Applied Survey Research. (2015). San Francisco Homeless Count. Watsonville, CA.

Note: Street Count includes individuals, persons in families, as well as those residing in cars, vans, RVs, and encampments.

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

Note: Social workers or appropriate staff counted patients who identified as homeless in local hospitals and treatment centers. The San Francisco Jail reference reported housing status to determine homeless status.

Point-in-Time Count

Persons in families with children represented roughly 9% of the total population counted in the Point-in-Time Count, while roughly 91% were single individuals without families (including unaccompanied children and transitional-age-youth). In total, 6% of those counted on January 29, 2015 were under the age of 18, 20% were between the ages of 18 and 24 and 74% were over the age of 25.

FIGURE 4. HOMELESS CENSUS RESULTS BY HOUSEHOLD SOURCE, FAMILY STATUS & AGE GROUP (2015)

	CHILDREN UNDER 18	YOUTH 18-24	ADULTS 25+	TOTAL	% OF TOTAL
Sheltered Count	327	233	2,621	3,181	42%
General Count	327	233	2,621	3,181	42%
Persons in family households	318	36	243	597	8%
Persons in non-family households	9	197	2,378	2,584	34%
Street Count	136	1,249	2,973	4,358	58%
General Count	47	485	2,973	3,505	47%
Persons in family households	16	3	11	30	<1%
Persons in non-family households	31	482	2,962	3,475	46%
Youth Count	89	764	0	853	11%
Persons in family households	1	2	0	3	<1%
Persons in non-family households	88	762	0	850	11%
Total	463	1,482	5,594	7,539	100%
Percent	6%	20%	74%	100%	-

Source: Applied Survey Research. (2015). San Francisco Homeless Count. Watsonville, CA.

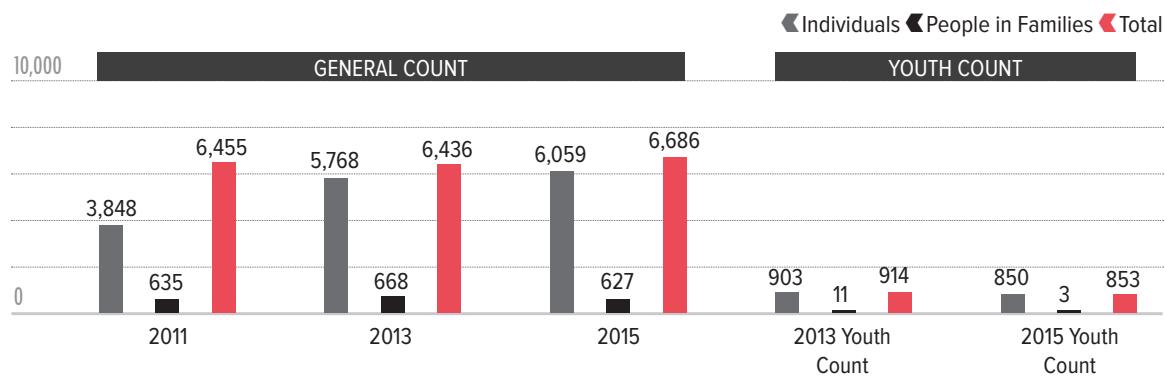
Note: Street Count includes individuals, persons in families, as well as those residing in cars, vans, RVs, and encampments.

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

Point-in-Time Count

Trend data showed that the distribution of single individuals compared to people in families has remained relatively consistent over time.

FIGURE 5. FAMILY STATUS OF TOTAL HOMELESS INDIVIDUALS ENUMERATED DURING THE SAN FRANCISCO POINT-IN-TIME HOMELESS COUNT



Source: Applied Survey Research. (2015). San Francisco Homeless Count. Watsonville, CA.

Applied Survey Research. (2013). San Francisco Homeless Count. Watsonville, CA.

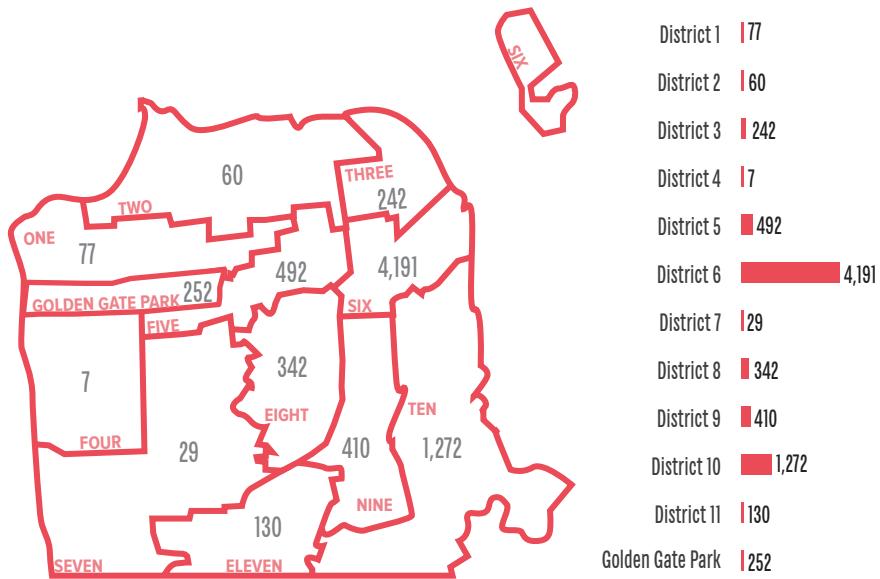
Applied Survey Research. (2011). San Francisco Homeless Count. Watsonville, CA.



TOTAL NUMBER OF UNSHELTERED AND SHELTERED HOMELESS PERSONS BY DISTRICT

The 2015 San Francisco Homeless Count data are presented below, organized by the 11 County Supervisor Districts in San Francisco. As in previous years, District 6 had the greatest number of unsheltered homeless individuals.²

FIGURE 6. UNSHELTERED AND SHELTERED GENERAL COUNT RESULTS BY DISTRICT (2015)



Source: Applied Survey Research. (2015). San Francisco Homeless Count. Watsonville, CA.

Note: This table excludes scattered site and confidential location shelter data.

Note: Golden Gate Park is in Districts 1 and 5.

² Due to public safety concerns after a recent shooting, changes were made during the Point-in-Time Count to one count area. As a result of these changes, a portion of a single map area, one precinct in District 10, was not covered by the general count. The area was enumerated by youth count team members earlier in the evening, however their focus was on children and young adults under age 25 only. While this omission may have contributed to the decreased count in the Bayview, it does not account for the overall decrease in District 10. A comparison with previous years' data show a difference of 40 individuals.

FIGURE 7. TOTAL UNSHELTERED AND SHELTERED SAN FRANCISCO HOMELESS POINT-IN-TIME GENERAL COUNT POPULATION BY DISTRICT AND FAMILY STATUS (2013 AND 2015)

DISTRICT	2013				2015			
	INDIVIDUALS	PERSONS IN FAMILIES	TOTAL PERSONS	% OF TOTAL	INDIVIDUALS	PERSONS IN FAMILIES	TOTAL PERSONS	% OF TOTAL
1	95	21	116	2%	48	29	77	1%
2	20	0	20	<1%	60	0	60	1%
3	190	0	190	3%	242	0	242	4%
4	136	0	136	2%	7	0	7	<1%
5	107	52	159	2%	192	118	310	5%
6	2,576	462	3,038	47%	3,487	349	3,836	57%
7	19	0	19	<1%	29	0	29	<1%
8	95	0	95	1%	163	20	183	3%
9	400	107	507	8%	313	63	376	6%
10	1,914	16	1,930	30%	1,255	17	1,272	19%
11	52	0	52	1%	123	7	130	2%
Confidential/ Scattered Site Locations in San Francisco	20	10	30	<1%	11	24	35	1%
Golden Gate Park	144	0	144	2%	129	0	129	2%
Total	5,768	668	6,436	100%	6,059	627	6,686	100%
% of Total	90%	10%	100%	-	91%	9%	100%	-

Source: Applied Survey Research. (2015). San Francisco Homeless Count. Watsonville, CA.
Applied Survey Research. (2013). San Francisco Homeless Count. Watsonville, CA.

Note: 2013 data were recoded to show separate data on Golden Gate Park, in 2013 these data were shown with data in Districts 1 and 5.

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

Note: Golden Gate Park is in Districts 1 and 5.

Note: District 10 data includes 2 individuals enumerated by a youth count team. The youth count team included youth as well as adult volunteers and was the only team to cover one precinct in the district.

Based on the 2015 General Count, 57% of the unsheltered homeless population was identified in District 6. The neighborhoods located in District 6 include Tenderloin and South of Market (SoMa). Nineteen percent (19%) of the unsheltered population was identified in District 10, which includes the Bayview neighborhood. While the number of individuals counted in the Bayview decreased between 2013 and 2015, the district represented the second densest population of unsheltered homeless persons in San Francisco on January 29, 2015.

Point-in-Time Count

Dedicated youth count efforts were focused in specific neighborhoods of San Francisco where unaccompanied children and youth are known to congregate. Youth count efforts resulted in unaccompanied children and youth counted in Districts 5, 6, 8, and 9 as well as areas of Golden Gate Park. In comparison to 2013 data, the greatest decrease in the youth count number was seen in Golden Gate Park.³

FIGURE 8. TOTAL UNSHELTERED AND SHELTERED SAN FRANCISCO HOMELESS POINT-IN-TIME YOUTH COUNT POPULATION BY DISTRICT AND FAMILY STATUS (2013 AND 2015)

DISTRICT	2013				2015			
	INDIVIDUALS	PERSONS IN FAMILIES	TOTAL PERSONS	% OF TOTAL	INDIVIDUALS	PERSONS IN FAMILIES	TOTAL PERSONS	% OF TOTAL
1	0	0	0	0%	0	0	0	0%
2	4	0	4	0%	0	0	0	0%
3	203	0	203	22%	0	0	0	0%
4	0	0	0	0%	0	0	0	0%
5	82	0	82	9%	182	0	182	21%
6	219	0	219	24%	352	3	355	42%
7	0	0	0	0%	0	0	0	0%
8	68	0	68	7%	159	0	159	19%
9	53	11	64	7%	34	0	34	4%
10	4	0	4	<1%	0	0	0	0%
11	0	0	0	0%	0	0	0	0%
Confidential/ Scattered Site Locations in San Francisco	63	0	63	7%	0	0	0	0%
Golden Gate Park	207	0	207	23%	123	0	123	14%
Total	903	11	914	100%	850	3	853	100%
% of Total	99%	1%	100%	-	100%	0%	100%	-

Source: Applied Survey Research. (2013). San Francisco Homeless Count. Watsonville, CA.

Note: 2013 data were recoded to show separate data on Golden Gate Park, in 2013 these data were shown with data in Districts 1 and 5.

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

Note: Golden Gate Park is in Districts 1 and 5.

Note: District 10 data does not include 2 individuals enumerated by a youth count team. The youth count team was the only team to cover one precinct in the district and included youth as well as adult count volunteers.

³ Reductions in the youth count of Golden Gate Park are largely the result of deduplication effort. For more information on deduplication efforts, please see Appendix 1.

Point-in-Time Count



Homeless Survey Findings

The methodology used for the 2015 homeless count is described by HUD as a “blitz count” in that it is conducted by numerous people over a very short period of time in an effort to avoid duplicate enumeration. As this method is conducted in San Francisco, the result is an observation-based count of individuals and families who appear to be homeless. The count is followed by a face-to-face representative survey. The survey sample is then used to profile and estimate the condition and characteristics of San Francisco’s homeless population and subpopulations for the purposes of HUD reporting and local service delivery and strategic planning.

This section provides an overview of the findings generated from the 2015 San Francisco Homeless Survey. Surveys were administered to a randomized sample of homeless individuals between February 1 and February 19, 2015. This effort resulted in 1,027 complete and unique surveys. Based on the Point-in-Time Count of 7,539 homeless persons, with a randomized survey sampling process, these 1,027 valid surveys represent a confidence interval of +/- 3% with a 95% confidence level when generalizing the results of the survey to the estimated population of homeless individuals in San Francisco. In other words, if the survey were conducted again, we can be confident that the results would be within three percentage points (3%) of the current results for countywide data.

To ensure the safety and comfort of those who participated, respondents were not required to complete all survey questions. Missing values have been intentionally omitted from the survey results; therefore, the total number of respondents for each question does not always equal the total number of surveys.

Survey coordinators worked to ensure a representative sample, garnering information from subpopulations that are often hidden or hard to reach. Efforts were made to target respondents based on living accommodation, age, and neighborhood.

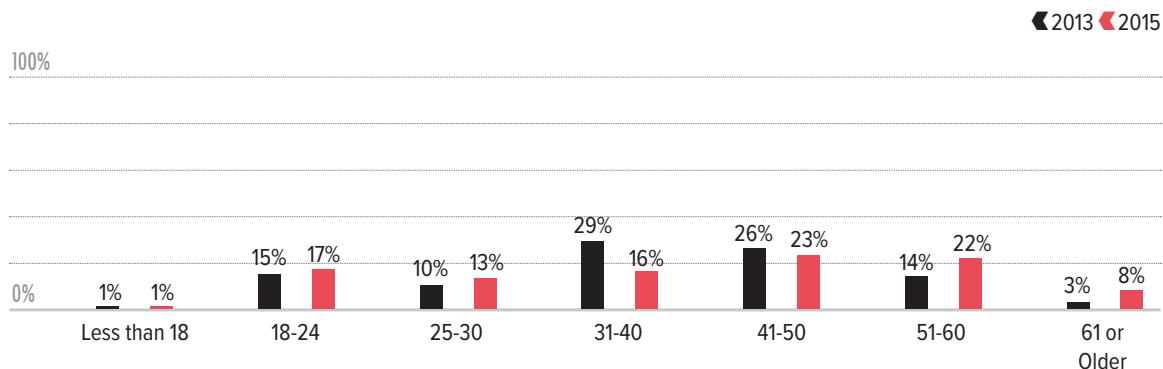
SURVEY DEMOGRAPHICS

To gain a more comprehensive understanding of the experiences of homeless residents in San Francisco, respondents were asked basic demographic questions, including age, gender, sexual orientation, and ethnicity.

AGE

Eighteen percent (18%) of survey respondents were under the age of 25 at the time of the survey. Twenty-nine percent (29%) were between the ages of 25 and 40, 45% were between age 41 and 60. Eight percent of respondents were 61 years or older at the time of the study.

FIGURE 9. AGE

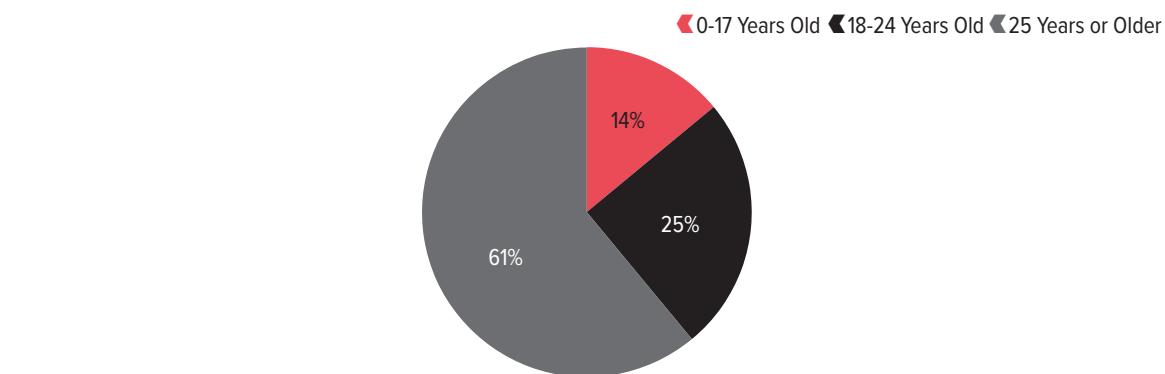


2013 n:924; 2015 n:1,012

*Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.
Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA*

In an effort to better understand the experiences and age distribution of those experiencing homelessness, respondents were asked how old they were the first time they experienced homelessness. In response, 14% reported they were under the age of 18, 25% reported they were between the ages of 18-24, and 61% reported they were over the age of 25.

FIGURE 10. AGE AT FIRST EXPERIENCE OF HOMELESSNESS



2015 n:990

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

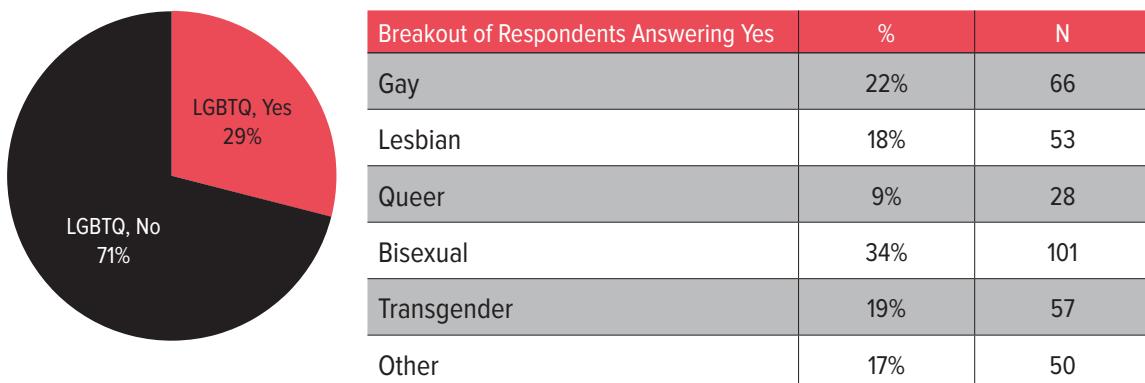


GENDER AND SEXUAL ORIENTATION

One third of survey respondents (33%) identified as female, 61% male, 5% transgender and less than 1% reported an alternative gender identification. While there are limited data on the number of Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) individuals experiencing homelessness, available data suggest LGBTQ individuals experience homelessness at higher rates, especially those under the age of 25. It is estimated that 15% of San Francisco's population identifies as LGBTQ.⁴ Twenty-nine percent (29%) of homeless survey respondents identified as LGBTQ in 2015. Of those, 34% identified as bisexual, 22% gay, 18% lesbian, 19% transgender and 9% queer. Seventeen percent (17%) of LGBTQ respondents reported an alternative gender identity.

Respondents who identified as LGBTQ were more likely to report they were experiencing homelessness for the first time (32%). They were also more likely to have been without housing for less than a year (57%). Overall, they were less likely (26% vs. 37%) to report a chronic health or mental health condition. A lower percentage of LGBTQ respondents reporting drug or alcohol abuse (29%), compared to 40% of respondents who did not identify as LGBTQ. However, LGBTQ respondents reported a higher incidence of HIV or AIDS related illness (13% compared to 4%).

FIGURE 11. SEXUAL ORIENTATION AND LGBTQ IDENTITY



LGBTQ n:1,027; Breakout n: 300 respondents offering 355 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

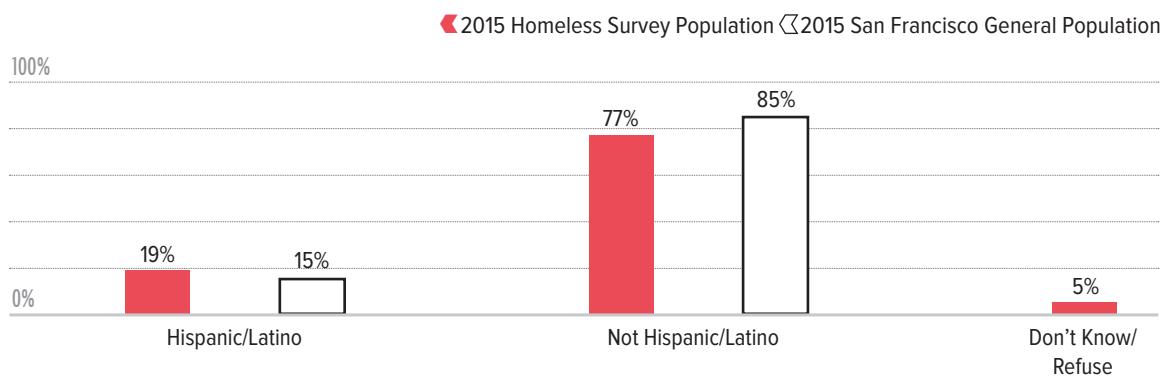
Note: Multiple response question. Percentages may not add up to 100 due to rounding.

⁴ City and County of San Francisco, Office of the Controller (2013). 2013 City Survey Report. [Data set] Retrieved from <http://co.sfgov.org/webreports/details.aspx?id=1572>. Calculated by San Francisco Human Services Agency May 29, 2013.

RACE/ETHNICITY

The U.S. Department of Housing and Urban Development (HUD) gathers data on race and ethnicity in two separate questions, similar to the U.S. Census. When asked if they identified as a Hispanic or Latino ethnicity, the majority (77%) of homeless survey respondents reported they did not identify as Hispanic or Latino. In comparison to the general population of San Francisco, a slightly higher percentage of homeless respondents identified as Hispanic or Latino (19% compared to 15%).

FIGURE 12. HISPANIC OR LATINO ETHNICITY

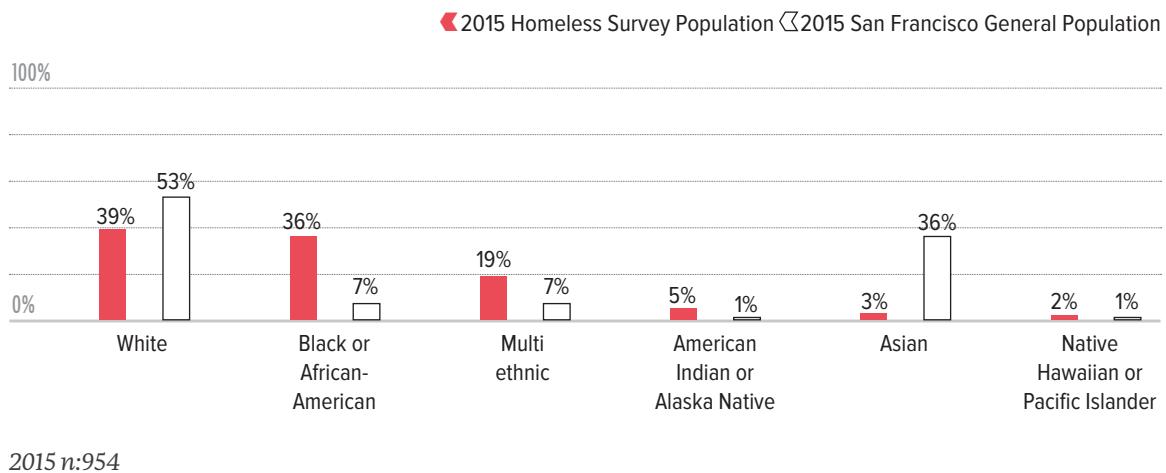


2015 n:993

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.
U.S. Census Bureau. (April 2015). American Community Survey 2011-2013 3-Year Estimates. Table DP05: ACS Demographic and Housing Estimates. Retrieved from <http://factfinder2.census.gov>.

When asked about their racial identity, differences between the general population and those experiencing homelessness were more distinct. A much higher population of survey respondents identified as Black or African-American (36% compared to 7%). A lower percentage of homeless respondents identified as Asian (3%), compared to 36% of the general population.

FIGURE 13. RACE



2015 n:954

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.
U.S. Census Bureau. (April 2015). American Community Survey 2011-2013 3-Year Estimates. Table DP05: ACS Demographic and Housing Estimates. Retrieved from <http://factfinder2.census.gov>.

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

HISTORY OF FOSTER CARE

It has been estimated that one in four former foster youth experience homelessness within four years of exiting the foster care system.⁵ In the State of California, foster youth are now eligible to receive services beyond age 18. Transitional housing and supportive services for youth 18-24 are provided for the youth through these programs often referred to as Transitional Housing Placement-Plus. It is hoped that these additional supports, implemented since 2012, assist foster youth with the transition to independence and prevent them from becoming homeless.

In 2015, 21% of respondents reported a history of foster care, higher than in both 2013 and 2011 (18% and 13% respectively). The percentage of youth under the age of 25 who had been in foster care was much higher than adults over the age of 25, 27% compared to 19%.

Based on Point-in-Time data, this is an estimated 389 youth. Nine percent (9%) of youth with an experience of foster care reported they were living in foster care immediately before becoming homeless, and a very small percentage reported aging out of foster care as the primary cause of their homelessness (4%).

Respondents were not asked where they were living while in care. However 56% of youth with a foster history reported they were living in San Francisco at the time they became homeless, an estimated 228 youth.

FIGURE 14. HISTORY OF FOSTER CARE



2015 n:896

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

⁵ United States Interagency Council on Homelessness. (2012). Amendment 2012, *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*. Washington: D.C.



LIVING ACCOMMODATIONS

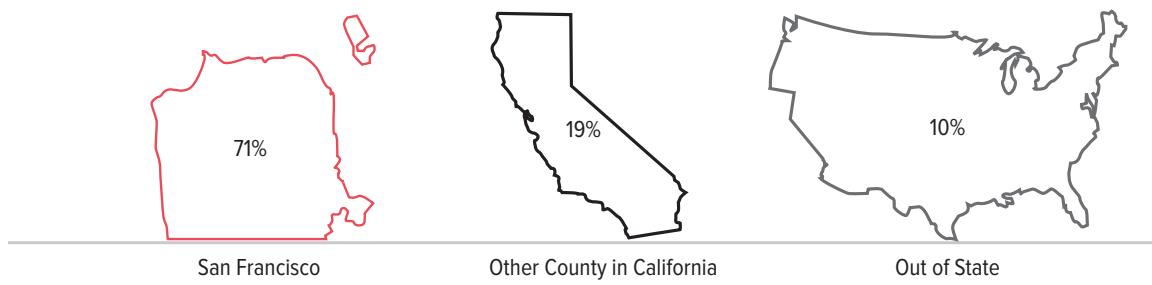
The way in which an individual seeks services as well as their ability to access support from friends or family is affected by where they lived prior to experiencing homelessness. Previous circumstances can also point to gaps in the system of care and opportunities for systemic improvement and homeless prevention. Survey respondents reported many different living accommodations prior to becoming homeless, although most lived in or around the San Francisco Bay Area with friends, family, or on their own in a home or apartment.

PLACE OF RESIDENCE

Seventy-one percent (71%) of respondents reported they were living in San Francisco at the time they most recently became homeless, an increase from 61% in 2013. Of those, nearly half (49%) had lived in San Francisco for 10 years or more. Eleven percent (11%) had lived in San Francisco for less than one year.

Ten percent (10%) of respondents reported they were living out of state at the time they lost their housing. Nineteen percent (19%) reported they were living in another county in California. Six percent (6%) reported they were living in Alameda County at the time, 3% San Mateo, 2% Marin, 2% Contra Costa and 1% Santa Clara County.

FIGURE 15. PLACE OF RESIDENCE AT THE TIME OF HOUSING LOSS



2015 n:961

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Of those who were living in California (not including San Francisco), the most commonly reported reason for moving to San Francisco included looking for work (29%), accessing homeless services or benefits (25%), or family and/or friends lived in San Francisco (16%). An additional 7% reported moving to San Francisco to access Veterans Affairs (VA) services.

Among respondents who were living out of state, 30% reported they were visiting or passing through and decided to stay, 19% were looking for work, 17% to access homeless services or benefits, and 14% for the LGBTQ acceptance and community. Nine percent (9%) reported they came because friends or family lived in the area.

FIGURE 16. PRIMARY REASON FOR COMING TO SAN FRANCISCO BY RESIDENCE AT THE TIME OF HOUSING LOSS

	OTHER COUNTY IN CALIFORNIA	OUT OF STATE	TOTAL
For a job/seeking work	29%	19%	25%
LGBTQ community/acceptance	8%	14%	11%
Was traveling/visiting and remained here	8%	30%	17%
To access VA services or clinic	7%	2%	5%
Family/friends are here	16%	9%	13%
To access homeless services and/or benefits	25%	17%	22%
Other	7%	8%	7%

2015 n:468

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

PRIOR LIVING ARRANGEMENTS

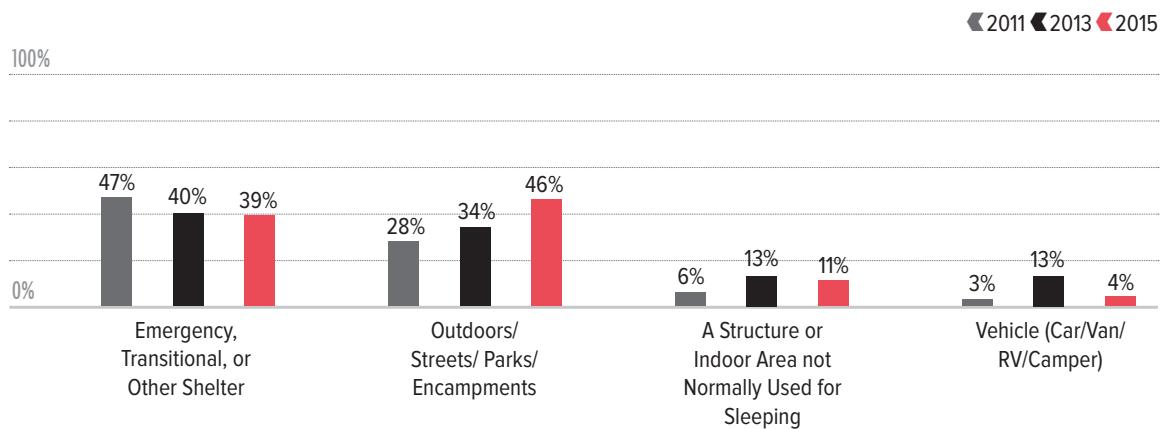
Thirty-seven percent (37%) of respondents reported staying with friends or family immediately prior to becoming homeless, similar to 2013 (38%). Thirty percent (30%) reported living in a home owned or rented by themselves or their partner, down from 35% in 2013. Seven percent (7%) reported they were living in subsidized or permanent supportive housing. Six percent (6%) were staying at a motel or hotel.

Seven percent (7%) of respondents reported they were in a jail/prison facility immediately prior to becoming homeless. Four percent (4%) were in a hospital or treatment facility, 2% were in foster care, and less than 1% were in a juvenile justice facility.

CURRENT LIVING ARRANGEMENTS

Nearly half of survey respondents reported currently living outdoors, either on the streets, in parks or encampment areas (46%). Thirty-nine percent (39%) reported staying in a public shelter (emergency shelter, transitional housing facility or alternative shelter environment). Eleven percent (11%) of respondents reported they were sleeping in public buildings, foyers, hallways or other indoor areas not meant for human habitation. Four percent (4%) reported staying in their vehicles.⁶

FIGURE 17. USUAL PLACES TO SLEEP AT NIGHT



2011 n:1,006; 2013 n:943; 2015 n:1,027

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2011). San Francisco Homeless Survey. Watsonville, CA.

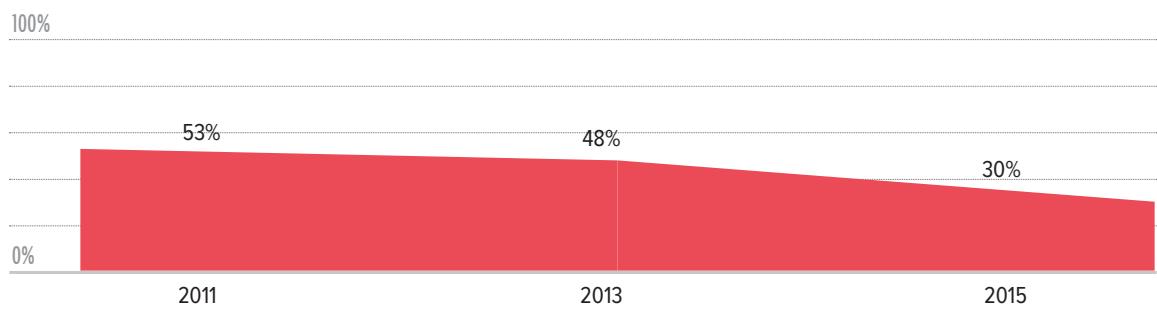
Note: Shelter category includes those who reported staying in motel/hotel.

⁶ Accessing individuals residing in vehicles for the San Francisco Homeless Census and Survey has been a challenge of this project. In 2015, surveyors were asked to outreach to individuals in vehicles, however this outreach resulted in a small number of completed surveys.

DURATION AND RECURRENCE OF HOMELESSNESS

Unstable living conditions often lead to individuals falling in and out of homelessness. Less than one-third (30%) of 2015 respondents reported they were experiencing homelessness for the first time. This was lower than in previous years.

FIGURE 18. FIRST TIME HOMELESSNESS (RESPONDENTS ANSWERING 'YES')?



2011 n:541; 2013 n:454; 2015 n:1,022

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2011). San Francisco Homeless Survey. Watsonville, CA.

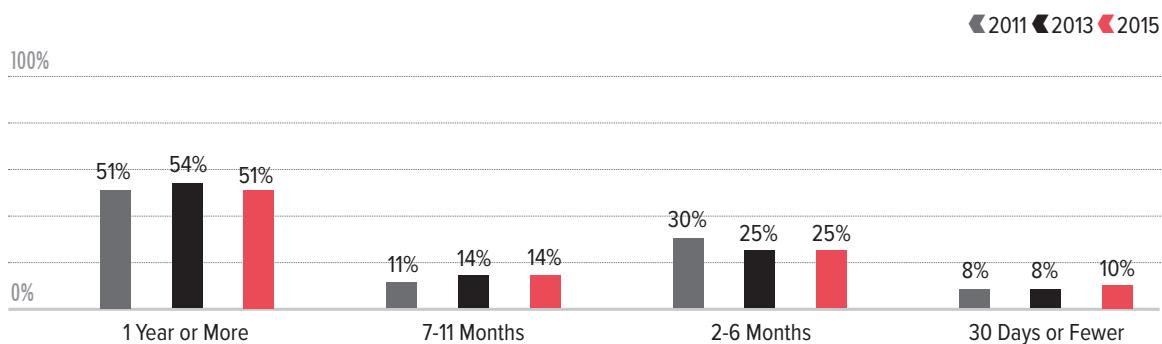
DURATION OF HOMELESSNESS

For many, the experience of homelessness is part of a long and recurring history of housing instability. Respondents were asked about their current experience or episode of homelessness. More than half of survey respondents (51%) reported they had been homeless for a year or more, a slight decrease from 2013 (54%) but similar to 2011 (51%). One in ten had been homeless for less than one month, slightly higher than in 2013 (8%).

RECURRENCE OF HOMELESSNESS

Twenty-five percent (25%) of respondents reported they had experienced homelessness four or more times in the past year. When asked how many times they had been homeless in the past three years, 34% reported they had been homeless four or more times. This was lower than in 2013, when 41% of respondents reported 4 incidents of homelessness in the previous three years.

FIGURE 19. LENGTH OF CURRENT EPISODE OF HOMELESSNESS



2011 n:950; 2013 n:944; 2015 n:1,007

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

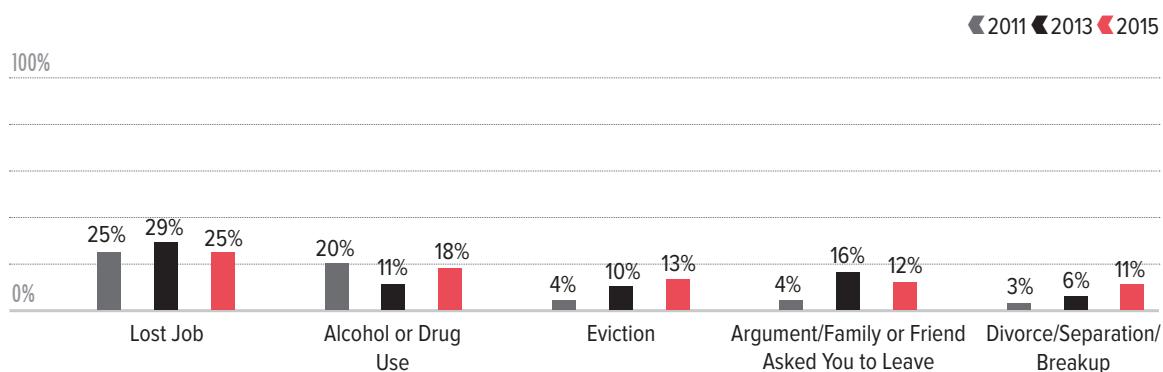
Source: Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2011). San Francisco Homeless Survey. Watsonville, CA.

PRIMARY CAUSE OF HOMELESSNESS

The primary cause of an individual's homelessness is not always clear. It is often the result of multiple and compounding causes. One quarter (25%) of respondents reported job loss as the primary cause of their homelessness. Eighteen percent (18%) reported drugs or alcohol, higher than 11% reported in 2013. Twelve percent (12%) reported an argument with a family member who asked them to leave, 11% reported divorce or separation, and 5% reported domestic violence. Thirteen percent (13%) of respondents reported eviction as the primary cause of their homelessness, 3% reported their landlord raised their rent, and 2% reported foreclosure.

FIGURE 20. PRIMARY CAUSE OF HOMELESSNESS (TOP FIVE RESPONSES IN 2015)



2011 n:1,008 respondents; 2013 n:931 respondents offering 1,057 responses; 2015 n:993 respondents offering 1,267 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2011). San Francisco Homeless Survey. Watsonville, CA.

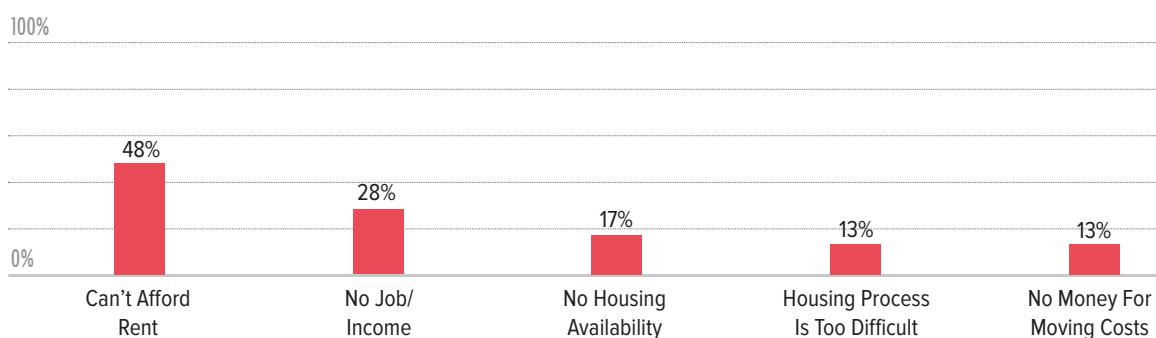
Note: Multiple response question (years 2011, 2015). Percentages may not add up to 100 due to rounding.

Note: Caution should be used when comparing data across years due to changes in question format.

OBSTACLES TO OBTAINING PERMANENT HOUSING

Respondents were also asked what prevented them from obtaining housing. The greatest percentage (48%) reported they could not afford rent. Twenty-eight percent (28%) reported a lack of job or income. Most other respondents reported a mixture of other income or access related issues, such as the lack of available housing (17%), difficulty with the housing process (13%), or an eviction record (6%). Twelve percent (12%) of respondents reported that a criminal record prevented them from obtaining housing, and 8% reported a medical illness. Eight percent (8%) of respondents reported they did not want housing.

FIGURE 21. OBSTACLES TO OBTAINING PERMANENT HOUSING (TOP FIVE RESPONSES IN 2015)



2015 n:965 respondents offering 1,809 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

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

SERVICES AND ASSISTANCE

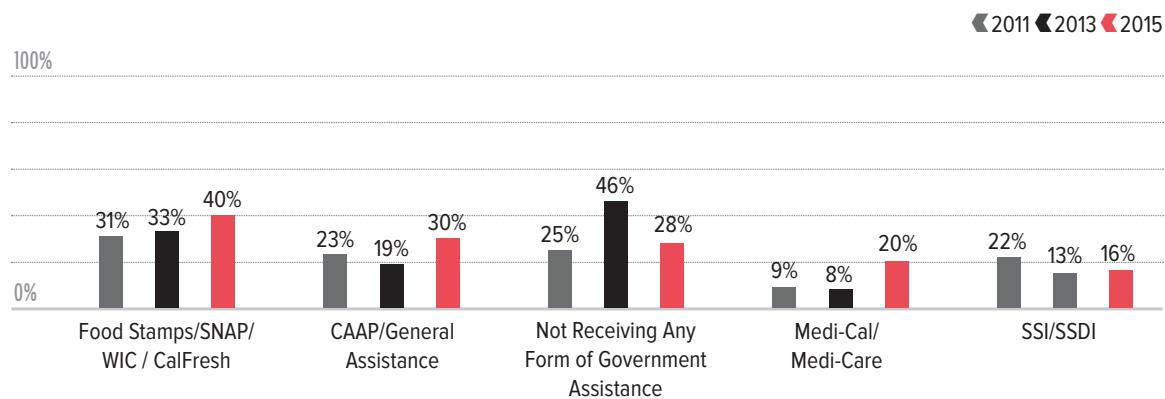
Through federal and local programs, San Francisco provides services and assistance to those currently experiencing homelessness. Government assistance and homeless services work to enable individuals and families to obtain benefits and support. However, many individuals and families do not apply for services. Many believe that they do not qualify or are ineligible for assistance.

GOVERNMENT ASSISTANCE

Nearly three-quarters (72%) of respondents in 2015 reported they were receiving some form of government assistance, up from 54% in 2013. The largest percentage of respondents (40%) reported receiving CalFresh (food stamps) and/or WIC (women, infants, and children food assistance), a slight increase from 2013.

Thirty percent (30%) of respondents in 2015 reported receiving County Adult Assistance Program (CAAP)⁷ or General Assistance (GA), up from 19% in 2013. 16% SSI, SSDI, or non-veteran disability benefits, up from 13% in 2013. Twenty percent (20%) reported they were receiving Medi-Cal/MediCare, more than double the 8% of respondents in 2013. Fewer than 3% of respondents reported receiving CalWORKs or Temporary Assistance for Needy Families (TANF).

FIGURE 22. GOVERNMENT ASSISTANCE (TOP FIVE RESPONSES IN 2015)



2011 n:928 respondents offering 1,219 responses; 2013 n:917 respondents offering 1,182 responses; 2015 n:886 respondents offering 1,317 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2011). San Francisco Homeless Survey. Watsonville, CA.

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

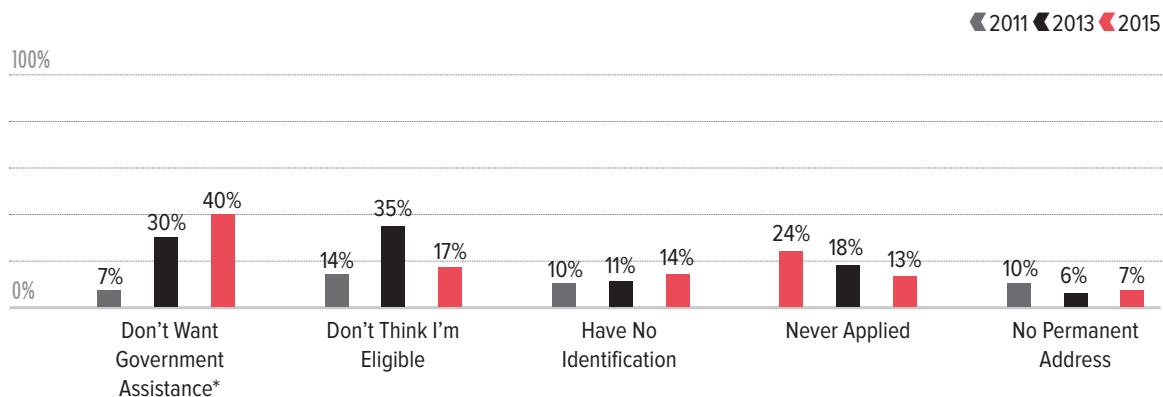
Note: Eligibility for assistance varies by program, percentages are calculated out of the total population of respondents.

⁷ County Adult Assistance Program (CAAP) is a local form of General Assistance (GA). This is a safety net program for indigent adults that provides a cash grant. In exchange, able-bodied recipients are expected to perform Workfare community service. If participating in Workfare, recipients also receive a Muni fast pass or tokens.

Of those who reported they were not receiving any form of government support, the greatest percentage reported they did not want assistance (40%). Seventeen percent (17%) did not think they were eligible for services, 13% reported they had never applied, 4% had applied and were waiting for a response, and 5% reported they had been turned down.

Respondents also reported challenges applying for services; 14% reported they did not have the required identification, 7% reported no permanent address to use on applications and 6% reported the paperwork was too difficult. Fewer than 3% reported they did not know where to go to seek assistance.

FIGURE 23. REASONS FOR NOT RECEIVING GOVERNMENT ASSISTANCE (TOP FIVE RESPONSES IN 2015)



2011 n:230 respondents offering 301 responses; 2013 n:406 respondents offering 515 responses; 2015 n:224 respondents offering 275 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2011). San Francisco Homeless Survey. Watsonville, CA.

Note: Between 2011 and 2013 the response option changed from "do not need" to "do not want."

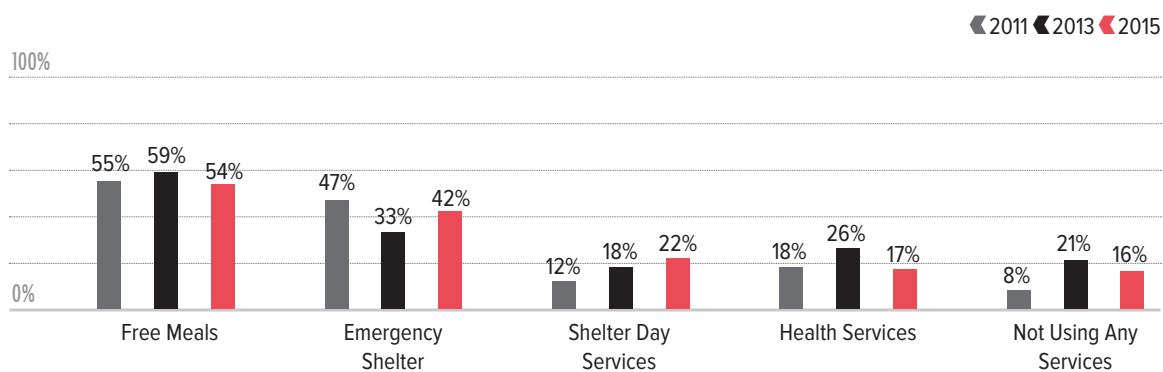
Note: Multiple response question. Percentages may not add up to 100 due to rounding.

SERVICES AND PROGRAMS

More than half of respondents reported using meal services (54%), a slight decrease from 2013 (59%). The use of emergency shelter services increased slightly with 42% of 2015 respondents using emergency shelter services, compared to 33% in 2013. Twenty-two (22%) percent of respondents reported using shelter day services.

Seventeen percent (17%) of respondents reported using health services, 11% mental health services, and 9% behavioral health services (drug and alcohol counseling). Sixteen percent (16%) of respondents reported they were not using any services.

FIGURE 24. SERVICES OR ASSISTANCE (TOP FIVE RESPONSES IN 2015)



2011 n:978 respondents offering 2,047 responses; 2013 n:896 respondents offering 1,992 responses; 2015 n:956 respondents offering 1,967 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2011). San Francisco Homeless Survey. Watsonville, CA.

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

EMPLOYMENT AND INCOME

While the majority of homeless survey respondents reported being unemployed, some had part-time or full-time work. Many were receiving an income, either public or private. However, data suggest that at the time of the survey respondents reported employment and income were not enough to meet basic needs.

EMPLOYMENT

The unemployment rate in San Francisco in January 2015 was low at 4%, down from 7% in 2013.⁸ It is also important to recognize that the unemployment rate represents only those who are unemployed and actively seeking employment. It does not represent all joblessness, nor does it address the types of available employment. The unemployment rate for homeless respondents was 89%, an increase from 62% in 2013. Eleven percent (11%) of respondents reported working full-time, part-time, or with seasonal, temporary, or casual employment.

Of those who were unemployed, the primary barriers to employment included basic resources such as the lack of a permanent address (28%) and clothing or shower facilities (13%). Seventeen percent (17%) of respondents reported a disability prevented them from employment, 20% drug or alcohol use and 9% mental health concerns. Ten percent (10%) reported they were unable to obtain work due to their criminal record.

Trend data showed alcohol or drug use and the need for clothing/shower facilities have both remained one of the top five responses since 2011. While the lack of a phone was the top need in 2013, it was not one of the top 5 responses in 2015. Disability and age appeared as one of the top 5 responses for the first time in 2015.

FIGURE 25. OBSTACLES TO OBTAINING EMPLOYMENT (TOP FIVE RESPONSES IN 2015)

2011	2013	2015
Need Education/Training (27%)	No Phone (28%)	No Permanent Address (28%)
No Permanent Address (22%)	Need Education/Training (28%)	Alcohol or Drug Use (20%)
Need Clothing/Shower Facilities (17%)	Need Clothing/Shower Facilities (27%)	Disability (17%)
No Jobs (16%)	Alcohol or Drug Use (25%)	Age (14%)
Alcohol or Drug Use (14%)	No Jobs (24%)	Need Clothing/Shower Facilities (13%)

2011: 931 respondents offering 2,046 responses; 2013: 560 respondents offering 1,624 responses; 2015: 882 respondents offering 1,752 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2011). San Francisco Homeless Survey. Watsonville, CA.

Note: Response options changed between 2011 and 2013.

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

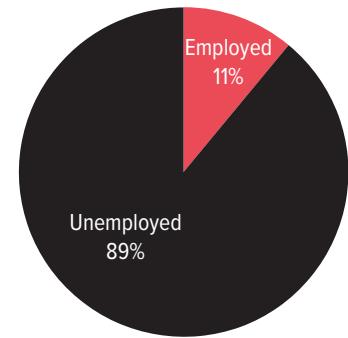
⁸ State of California Employment Development Department. (2013). Unemployment Rates (Labor Force). Retrieved 2013 from <http://www.labormarketinfo.edd.ca.gov>

INCOME

Income, from all sources, varied between those with regular employment and those who were unemployed. Forty-eight percent (48%) of unemployed respondents reported an income of less than \$99 per month, in comparison to 14% of those who were employed. Unemployed income is typically from government services, benefits, recycling, or panhandling. Overall income for those with employment was higher than those without. For example, 23% of employed respondents reported making between \$100-\$449 per month, and an additional 19% were making \$450-\$749. However, only 15% of employed respondents reported making more than \$1,499.

FIGURE 26. EMPLOYMENT AND MEAN MONTHLY INCOME

	EMPLOYED		UNEMPLOYED	
	%	n	%	n
\$0-\$99	14%	15	48%	413
\$100-\$449	23%	24	16%	139
\$450-\$749	19%	20	12%	107
\$750-\$1,099	16%	17	17%	142
\$1,100-\$1,499	12%	12	4%	34
\$1,500-\$3,000	14%	14	2%	18
More than \$3,000	2%	2	1%	7



2015 employment status n:964; Income employed n:104; Income unemployed n:860

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

In addition to overall income, respondents were asked specifically about income from panhandling. Forty-four percent (44%) of respondents reported panhandling in 2015, compared to 34% of 2013 respondents.

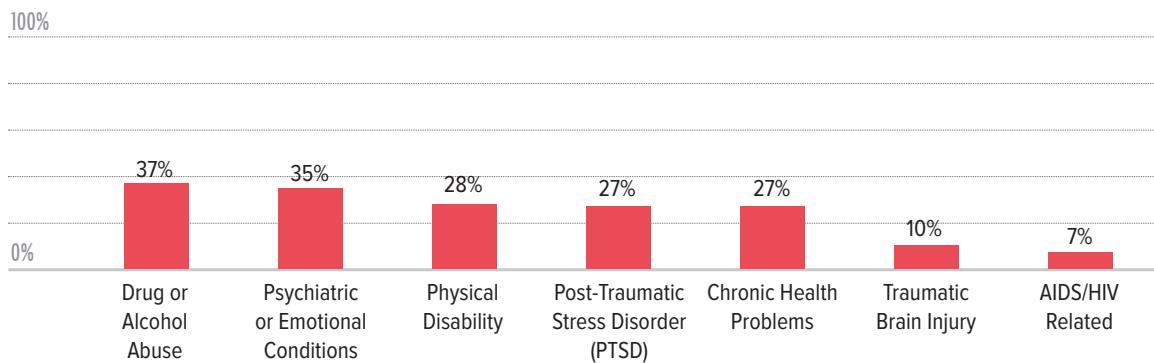
HEALTH

CHRONIC HEALTH CONDITIONS AND DISABILITIES

More than two-thirds of respondents (67%) reported one or more health conditions, higher than in 2013 (63%). These conditions included chronic physical illness, physical disabilities, chronic substance abuse and severe mental health conditions. Thirty-four percent (34%) of survey respondents with these conditions reported their condition limited their ability to take care of personal matters or get or keep a job, similar to 2013.

The most frequently reported health condition was drug or alcohol abuse (37%), followed by psychiatric or emotional conditions (35%). Twenty-eight percent (28%) reported a physical disability. Seven percent (7%) of respondents reported having AIDS or an HIV related illness.

FIGURE 27. HEALTH CONDITIONS



Drug or alcohol abuse n:980; Psychiatric or emotional conditions n:965; Physical disability n:965; Post-traumatic stress disorder (PTSD) n:977; Chronic health problems n:974; Traumatic Brain Injury n:964; AIDS/HIV related n:951

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

FOOD SECURITY

Food insecurity is associated with adverse health outcomes. It is associated with the increased prevalence of chronic health conditions, and prevents those already ill from improving health outcomes.⁹ Respondents were asked if they had experienced a food shortage at any time in the four weeks prior to the survey. Fifty-eight percent (58%) reported experiencing a food shortage.

⁹ Weiser, S. et al.(2013). Food Insecurity is associated with greater acute care utilization among HIV-infected homeless and marginally housed individuals in San Francisco. (2013). J Gen Intern Med. 28(1), 91–98.

DOMESTIC/PARTNER VIOLENCE OR ABUSE

The U.S. Department of Housing and Urban Development (HUD) recommends asking about physical, emotional, or sexual abuse over a lifetime. Eight percent (8%) of all survey respondents reported they were currently experiencing domestic/partner violence or abuse, an increase from 5% in 2013. When asked about experiences across the lifetime, 30% reported domestic violence.

Domestic violence varied by gender, with 11% of female respondents reporting current experiences of domestic violence, compared to 5% of men. When analyzed by gender, 40% of women reported experiencing domestic violence previously, as did 22% of men.¹⁰ Among respondents who reported any experience of domestic violence, 9% reported it was the primary cause of their homelessness. Fifteen percent (15%) of female respondents reported domestic/partner violence as a primary cause of their homelessness; however, when looking at homeless respondents in families, that percentage increased to 27%. In fact, domestic violence was the most frequently cited cause of homelessness among survey respondents living in families.

FIGURE 28. HISTORY OF DOMESTIC VIOLENCE (LIFETIME)



Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

¹⁰Overall survey response rates are high, however the percentage of respondents who refused to answer current domestic violence was 5% among men and 21% among women. Seven percent (7%) of men declined to answer lifetime violence, as did 20% of women.



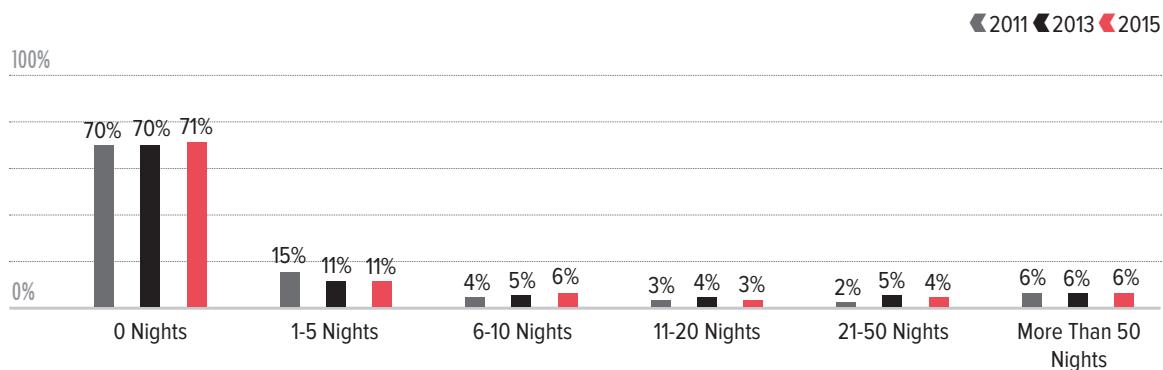
CRIMINAL JUSTICE

Individuals recently released from the criminal justice system often face housing challenges that may contribute to their homelessness.

INCARCERATION

Seventeen percent (17%) of respondents reported they were on probation or parole at the time of the survey, similar to 2013. Eighteen percent (18%) of 2015 respondents reported they were on probation or parole at the time they became homeless. As in previous years, 29% of survey respondents had spent at least one night in jail or prison in the 12 months prior to the survey, and about 11% had been incarcerated for five days or fewer.

FIGURE 29. NIGHTS SPENT IN JAIL OR PRISON IN THE YEAR PRIOR TO THE SURVEY



2011 n:766; 2013 n:953; 2015 n:931

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2013). San Francisco Homeless Survey. Watsonville, CA.

Source: Applied Survey Research. (2011). San Francisco Homeless Survey. Watsonville, CA.



HUD Defined Subpopulations

Opening Doors: Federal Strategic Plan to Prevent and End Homelessness outlines national objectives and evaluative measures for ending homelessness in the United States. In order to adequately address the diversity within the population experiencing homelessness, the federal government identified four subpopulations with particular challenges or needs. The following sections looks at each of these populations to identify the number of people counted during the Point-in-Time Count on January 29 and the characteristics of each population.

The following section details the number and characteristic of individuals included in the San Francisco Point-in-Time Count and Survey who meet the definition of each subpopulation. Survey data are extrapolated to the Point-in-Time Count population in order to estimate the number of people with a given characteristic.

Of the 1,027 surveys completed in 2015, the results represent 256 chronically homeless individuals, 138 homeless veterans, 22 individuals in homeless families,¹¹ and 174 unaccompanied children and transitional-age-youth. Surveys were completed in unsheltered environments and transitional housing settings.

The extrapolated population estimate data presented in this section include individuals found in residential programs, jails and hospitals. These estimates were developed in order to asses the need for particular types of services and programs in the City of San Francisco.

¹¹ Homeless families continue to be underrepresented in San Francisco Homeless Survey data. The majority of homeless families in San Francisco are currently residing in shelters and transitional housing facilities. As a result homeless families are difficult to reach. San Francisco Homeless Service Agency continues to improve data collection partnerships with transitional housing providers and other family serving shelters and agencies.

CHRONIC HOMELESSNESS

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 in the last three years and also has a condition that prevents them from maintaining work or housing. This definition applies to individuals as well as adult household members.

The chronically homeless population represents one of the most vulnerable populations on the street. The mortality rate for those experiencing chronic homelessness is four to nine times higher than the general population. Data from communities across the country have shown that the public costs incurred for 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.

The United States Interagency Council on Homelessness (USICH) reported that roughly 15% of the national homeless population was chronically homeless in 2014.¹² Chronic homelessness has been on the decline in recent years, as communities across the country increase the capacity of permanent supportive programs and prioritize those with the greatest barriers to housing stability. While the decrease in national chronic homelessness seems promising, federal budget constraints have limited the amount of money available to support housing programs and services. As a result, Opening Doors, which began with a goal of ending chronic homelessness by 2015, has extended the plan to 2017.¹³

PREVALENCE OF CHRONIC HOMELESSNESS

The number of chronically homeless individuals and families in San Francisco continues to decline. In 2015, 25% of survey respondents were chronically homeless, compared to 31% in 2013. Based on Point-in-Time Count data, it was estimated there were 1,745 chronically homeless individuals and 18 chronically homeless families living in San Francisco on January 29, 2015.

12 U.S. Interagency Council on Homelessness. (2015). Annual Update 2014. Retrieved 2013 from <http://www.usich.gov/>
13 Cavallaro, E. (2015). Ending Chronic Homelessness, Now in 2017. National Alliance to End Homelessness. Retrieved 2015 from <http://www.endhomelessness.org>



HUD Defined Subpopulations

FIGURE 30. CHRONIC HOMELESSNESS POPULATION ESTIMATES



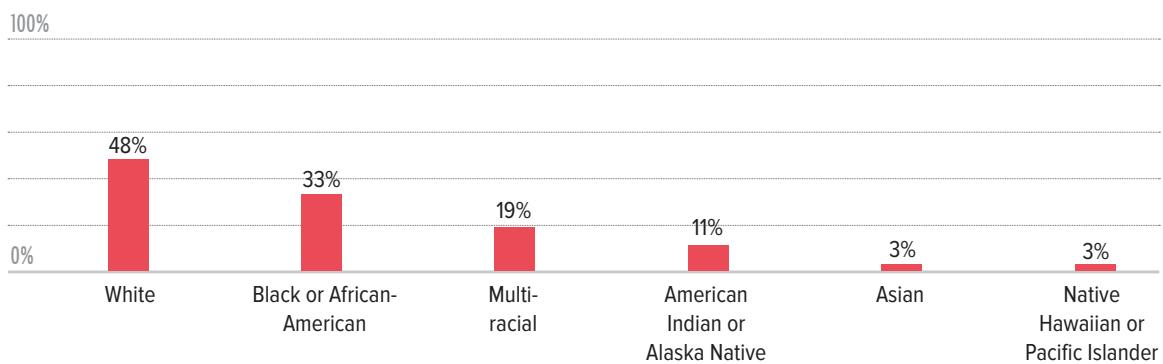
Source: Applied Survey Research. (2015). San Francisco Homeless Count and Survey. Watsonville, CA.

Note: 171 chronically homeless individuals were residing in institutional settings that fall outside HUD Point-in-Time Count definition of homelessness. 1,574 Chronically homeless individuals were reported to HUD in 2015. One chronically homeless family with 3 individuals was identified in a location that falls outside of HUD definition of homelessness. Seventeen families with 55 individuals were reported to HUD in 2015.

DEMOGRAPHICS OF CHRONICALLY HOMELESS SURVEY RESPONDENTS

The majority of chronically homeless individuals were male (68%), slightly higher than the non-chronically homeless population (59%). A higher percentage of chronically homeless respondents identified as Non-Hispanic/Latino, 83% compared to 74% of the non-chronic. Fourteen percent (14%) of chronically homeless respondents identified as veterans.

FIGURE 31. RACE AMONG PERSONS EXPERIENCING CHRONIC HOMELESSNESS



2015 n:249

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

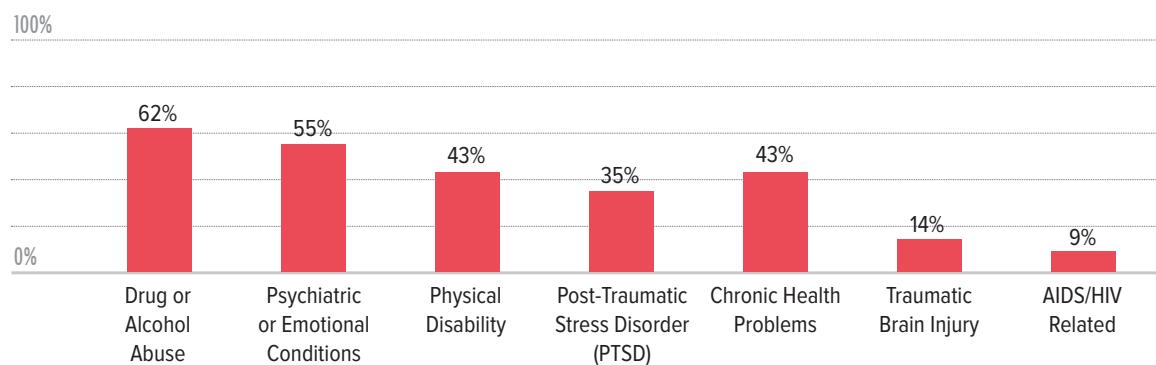
Note: Multiple response question. Percentages may not add up to 100 due to rounding.

HEALTH CONDITIONS AMONG PERSONS EXPERIENCING CHRONIC HOMELESSNESS

While the definition of chronic homelessness requires a condition that prevents an individual from maintaining work or housing, many respondents reported experiencing multiple physical or mental health conditions. Sixty-two percent (62%) of chronically homeless survey respondents reported alcohol or substance abuse. Fifty-five percent (55%) reported a psychiatric or emotional condition. Forty-three percent (43%) reported a chronic physical condition. Thirty-five percent (35%) reported Post Traumatic Stress Disorder (PTSD).

While it is expected that chronically homeless respondents would have higher rates of physical and mental health conditions, some conditions were similar between the chronic and non-chronic populations. Nine percent (9%) of chronically homeless respondents reported AIDS or an HIV related illness, as did 6% of the non-chronic population. Other conditions, such as alcohol or drug abuse were more common among the chronic population; 62% compared to 28% of those not experiencing chronic homelessness.

FIGURE 32. HEALTH CONDITIONS AMONG PERSONS EXPERIENCING CHRONIC HOMELESSNESS



Drug or alcohol abuse n:253; Psychiatric or emotional conditions n:252; Physical disability n:248; Post-Traumatic Stress Disorder (PTSD) n:254; Chronic health problems n:252; Traumatic Brain Injury n:246; AIDS/HIV related n:243

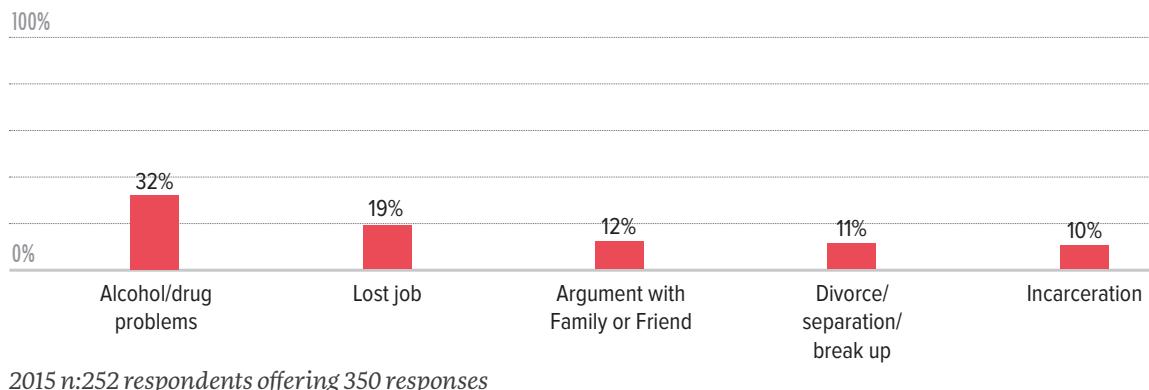
Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

PRIMARY CAUSE OF HOMELESSNESS AMONG THOSE EXPERIENCING CHRONIC HOMELESSNESS

Nearly one-third of chronically homeless respondents reported alcohol or substance abuse as the primary cause of their homelessness; this was in contrast to 14% among non-chronic respondents. Fewer chronically homeless respondents reported economic factors as the primary cause of their homelessness. For example, 19% reported job loss as a primary cause compared to 27% of non-chronic respondents.

While chronically homeless respondents reported differences in the initial cause of their homelessness compared to non-chronic respondents, they reported similar things were preventing them from obtaining permanent housing. The most common responses remained the inability to afford rent (54%), lack of employment (38%) and the difficulty of the housing process (18%). Chronically homeless differed from non-chronic respondents in the percentage that did not want housing, 11% compared to 6%.

FIGURE 33. PRIMARY CAUSE OF HOMELESSNESS (TOP FIVE RESPONSES) AMONG PERSONS EXPERIENCING CHRONIC HOMELESSNESS



2015 n:252 respondents offering 350 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

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

ACCESS TO SERVICES AMONG PERSONS EXPERIENCING CHRONIC HOMELESSNESS

A higher percentage of chronically homeless respondents reported they were not using any local homeless services such as food, shelter or health services, 18% compared to 15% of those who were not chronically homeless. They also reported slightly higher use of free meal services (61% compared to 51%). More than twice the percentage of chronically homeless respondents reported using health services, 29% compared to 14% of those who were not chronically homeless.

Twenty percent (20%) of chronically homeless respondents reported they were not receiving any form of government assistance, a decrease from 38% in 2013. Forty-one percent (41%) reported receiving food stamps; followed by 32% who receiving General Assistance, and 25% were receiving SSI/SSDI. Thirty-two percent (32%) reported receiving Medi-Cal/MediCare benefits, double what was reported in 2013 (15%). Service providers presume this increase is largely due to the implementation of the Affordable Care Act/Health Reform.

Of chronically homeless respondents who were not receiving services, 35% reported did not want government assistance. This was lower than the non-chronic population at 41%. Seventeen percent (17%) reported the paperwork was too difficult, 11% reported they had never applied and 15% reported their lack of address prevented them from receiving services. Thirteen percent (13%) did not think they were eligible for government assistance.

INCARCERATION AMONG PERSONS EXPERIENCING CHRONIC HOMELESSNESS

A slightly higher percentage of chronically homeless respondents reported they had spent one or more nights in jail or prison in the 12 months prior to the survey, 33% compared to 28% of non-chronic respondents. Eight percent (8%) reported they had spent more than 50 nights in jail or prison in the year prior to the survey.

HOMELESS VETERAN STATUS

Many U.S. veterans experience conditions that place them at increased risk for homelessness. Veterans have 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 include 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 have partnered to provide additional housing and support services to veterans currently experiencing homelessness or in danger of becoming homeless.

Between 2009 and 2014, nationwide data show there has been a 33% decrease in the number of homeless veterans. According to data collected during the national 2014 Point-in-Time Count, 49,933 veterans experienced homelessness on a single night in January 2014.¹⁴

NUMBER OF HOMELESS VETERANS

The estimated number of homeless veterans in San Francisco decreased between 2013 and 2015. There were an estimated 598 veterans in 2015, compared to 716 in the previous count. The City of San Francisco has made efforts to identify and serve homeless veterans living in San Francisco. Forty-six percent (46%) of veterans identified in the Point-in-Count were identified in City shelters or VA facilities.

FIGURE 34. HOMELESS VETERAN POPULATION ESTIMATES



Source: Applied Survey Research. (2015). San Francisco Homeless Count and Survey. Watsonville, CA.

Note: 93 Veterans were identified in locations that falls outside of HUD definition of homelessness including county jails and the VA hospital. In 2015, 557 veterans met the HUD definition of homelessness.

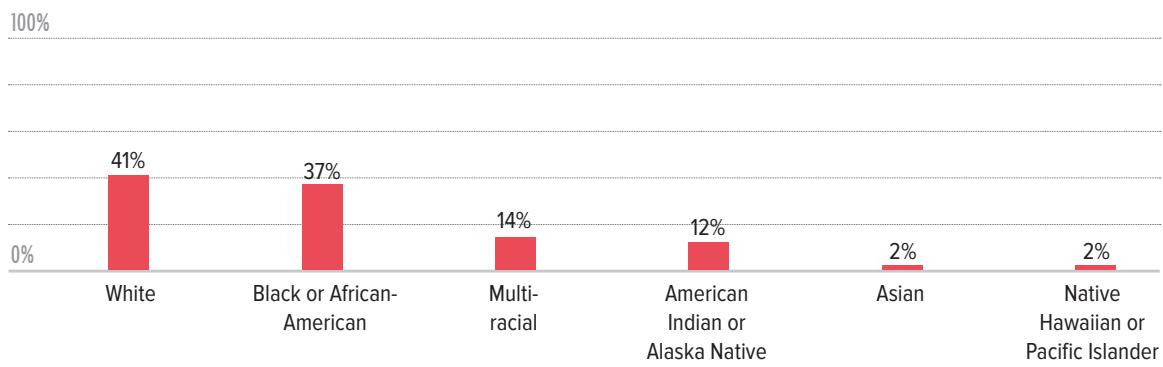
¹⁴ Department of Housing and Urban Development. (2015). Annual Assessment Report to Congress. Retrieved 2015 from <https://www.hudexchange.info/resources/documents/2014-AHAR-Part1.pdf>



DEMOGRAPHICS OF HOMELESS VETERANS

Eighteen percent (18%) of veteran respondents were female and nearly 4% reported they were transgender. Twenty percent (20%) of veterans identified as Hispanic or Latino. Forty-one percent (41%) of veterans reported their racial identity as White/Caucasian, 37% as Black/African-American ,and 12% as Indian or Alaskan Native.

FIGURE 35. RACE AMONG HOMELESS VETERANS



2015 n:132

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

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

Seventy-two percent (72%) of homeless veterans were living in San Francisco at the time they most recently became homeless, similar to the non-veteran population. Nine percent (9%) of veterans reported living in Alameda County when they became homeless, followed by Marin, Contra Costa, and San Mateo County, each representing 3% of veteran respondents.

The greatest percentage of veterans reported prior to becoming homeless they were living in a home owned or rented by themselves or a partner (32%), slightly higher than the non-veteran population (29%). Veterans more often reported they were in jail or prison just prior to becoming homeless, 11% compared to 7% of non-veterans. Ten percent (10%) reported they were in a hospital or treatment facility, compared to 3% of non-veterans.

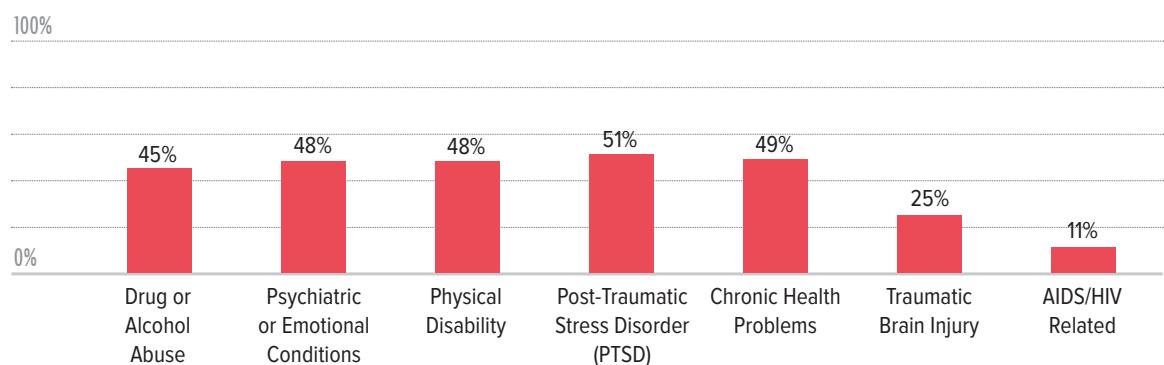
LENGTH OF HOMELESSNESS AMONG VETERANS

Fewer veteran respondents reported they were experiencing homelessness for the first time, 25% compared to 31% of the non-veteran population. When asked about the length of their current episode of homelessness, 10% of veterans reported they had been on the street for a week or less, and 51% reported they had been on the street continuously for a year or more.

HEALTH CONDITIONS AMONG HOMELESS VETERANS

A slightly higher percentage of veteran respondents reported having one or more disabling conditions, 37% compared to 33% of non-veterans. Forty-nine percent (49%) of veterans reported chronic health problems compared to 23% of non-veterans. Fifty-one percent (51%) of veterans reported having PTSD, 48% reported a psychiatric or emotional condition. Forty-eight percent (48%) had a physical disability. One quarter of veterans reported Traumatic Brain Injury (TBI) compared to 8% of the non-veteran population. Veterans reported higher rates of substance abuse (45% compared to 36%).

FIGURE 36. HEALTH CONDITIONS AMONG HOMELESS VETERANS



Drug or alcohol abuse n:128; Psychiatric or emotional conditions n:126; Physical disability n:130; Post-Traumatic Stress Disorder (PTSD) n:131; Chronic health problems n:130; Traumatic Brain Injury n:126; AIDS/HIV related n:127

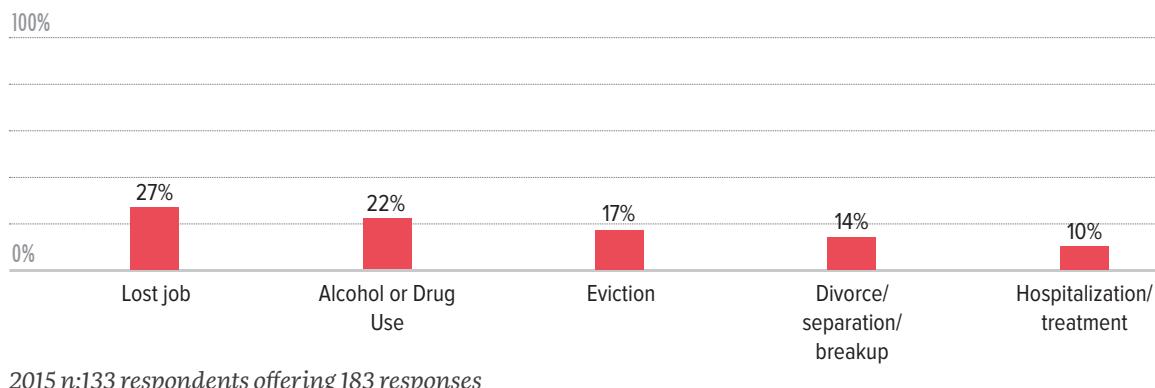
Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

The number of chronically homeless veterans in San Francisco decreased between 2013 and 2015. It was estimated that 208 veterans were chronically homeless in San Francisco in January of 2015, this was down from an estimated 260 individuals in 2013.

PRIMARY CAUSE OF HOMELESSNESS AMONG HOMELESS VETERANS

The most frequently cited cause of homelessness among veterans was job loss (27%), similar to the non-veteran population. Twenty-two percent (22%) of veterans reported drug or alcohol abuse as the primary cause of their homelessness, 6% reported mental health issues and 14% reported divorce or separation.

FIGURE 37. PRIMARY CAUSE OF HOMELESSNESS (TOP FIVE RESPONSES) AMONG HOMELESS VETERANS



Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

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

ACCESS TO SERVICES AMONG HOMELESS VETERANS

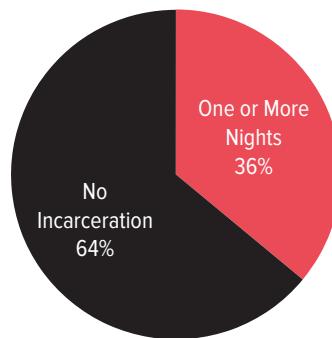
Overall, the number of veterans connected to any form of government assistance was higher than the non-veteran population 91%, compared to 69%. The percentage of veterans receiving mainstream or civilian benefits was lower than non-veterans; however, many veterans were connected to VA benefits.

Thirty-two percent (32%) of homeless veterans reported they were receiving VA disability compensation, 21% reported receiving another form of VA benefit. Nineteen percent (19%) of veteran respondents reported they were receiving Medi-Cal/MediCare. Twenty-three percent (23%) were receiving SSI/SSDI.

INCARCERATION AMONG HOMELESS VETERANS

A higher percentage of veteran respondents reported they had spent one or more nights in jail or prison than non-veterans, 36% compared to 29%.

FIGURE 38. SPENT A NIGHT IN JAIL OR PRISON IN THE LAST 12 MONTHS AMONG HOMELESS VETERANS



2015 n:121

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

HOMELESS FAMILIES WITH CHILDREN

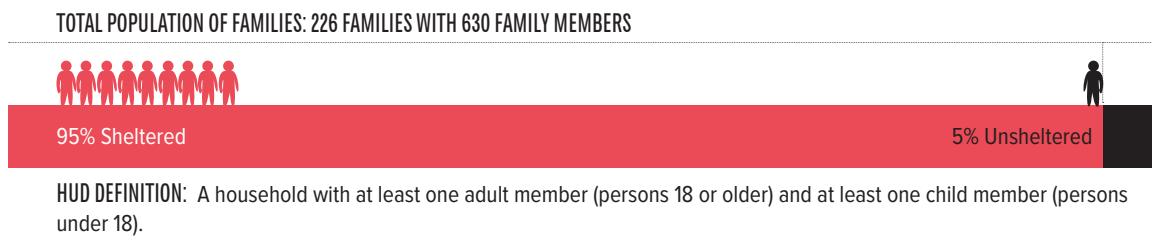
National data from 2014 suggest that 37% of all people experiencing homelessness are persons in families. Very few families experiencing homelessness are unsheltered. Public shelters serve 90% of homeless families in the United States, a significantly higher proportion of the population compared to other subpopulations, including unaccompanied youth. Data on homeless families suggest that they are not much different from families in poverty.

The risk of homelessness is highest among single female-headed households and families with children under the age of 6.¹⁵ Children in families experiencing homelessness have increased incidence of illness and are more likely to have emotional and behavioral problems than children with consistent living accommodations.¹⁶

NUMBER OF HOMELESS FAMILIES WITH CHILDREN

Data from the San Francisco Point-in-Time Count showed a slight decrease in the number of homeless individuals in families. There were 630 persons in families identified during the 2015 count, down from 679 in 2013. Ninety-five percent (95%) of families identified during the Point-in-Time Count were staying in City shelters or residential facilities.

FIGURE 39. HOMELESS FAMILIES WITH CHILDREN POPULATION ESTIMATES



Source: Applied Survey Research. (2015). San Francisco Homeless Count & Survey. Watsonville, CA.

Note: Thirty individuals in families were counted in Residential programs, these fall outside the definition of homelessness for HUD. In 2015, 600 individuals in families met the HUD definition of homelessness.

CHARACTERISTICS OF HOMELESS FAMILIES WITH CHILDREN

A small number of homeless families with children participated in the San Francisco Survey, 22.¹⁷ Eighty-two percent (82%) of survey respondents in families were female, much higher than survey respondents not in families (32% female). Twenty-seven percent (27%) of those surveyed identified as Hispanic or Latino.

¹⁵ U. S. Department of Health and Human Services. (2007). Characteristics and dynamics of homeless families with children. Retrieved 2013 from <http://aspe.hhs.gov/>

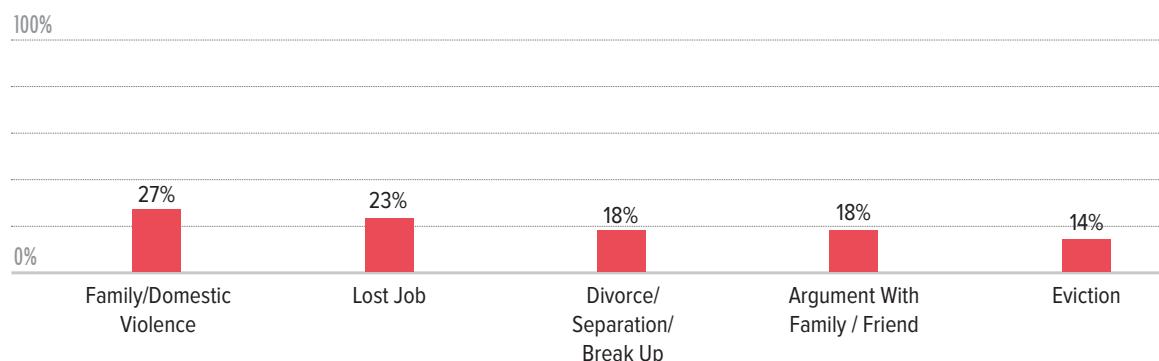
¹⁶ U.S. Interagency Council on Homelessness. (2013). Opening Doors. Retrieved 2013 from <http://www.usich.gov/>

¹⁷ Caution should be used when interpreting these data, due to the small number of surveys conducted with homeless households with children.

PRIMARY CAUSE OF HOMELESSNESS FOR HOMELESS FAMILIES WITH CHILDREN

Nearly half of respondents in families with children reported having experienced domestic violence (46%). Five percent (5%) reported they were experiencing domestic violence at the time of the survey. Twenty-seven percent (27%) of family householders interviewed reported domestic violence was the primary cause of their homelessness. This was the most frequently reported cause, followed by job loss (23%), divorce/separation (18%), or an argument with a friend or family member who asked them to leave (18%).

FIGURE 40. PRIMARY CAUSE OF HOMELESSNESS (TOP FIVE RESPONSES) AMONG HOMELESS FAMILIES WITH CHILDREN



2015 n:22 respondents offering 30 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

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

LENGTH OF HOMELESS AMONG FAMILIES WITH CHILDREN

Sixty-four percent (64%) of survey respondents in families reported they were experiencing homelessness for the first time, compared to 30% of single individuals. About two-thirds (64%) had been without housing for more than 6 months. Nearly half of respondents reported they were living with a friend or family member when they became homeless (48%).

GOVERNMENT ASSISTANCE FOR HOMELESS FAMILIES WITH CHILDREN

More than half of respondents in families reported receiving CalWORKs/TANF (63%), 47% received CalFresh/food stamps, and 42% were receiving Medi-Cal/MediCare.

2015 SAN FRANCISCO HOMELESS YOUTH COUNT SUMMARY: UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH

There are limited data available on homelessness among unaccompanied children and transitional-age-youth. National estimates from 2014 showed unaccompanied children and transitional-age-youth represented 8% of the homeless population.¹⁸ Homeless youth have a harder time accessing services, including shelter, medical care, and employment.¹⁹

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 transitional-age-youth. As part of this effort, the U.S. Department of Housing and Urban Development placed increased interest on gathering data on unaccompanied homeless children and youth during Point-in-Time counts.

The City and County of San Francisco implemented a dedicated youth count and survey in 2013 to improve data on unaccompanied children and youth in San Francisco. These efforts were replicated, with minor improvements, in 2015. The following section provides an overview of the findings. More information regarding the youth study can be found in the 2015 San Francisco Homeless Unique Youth Count & Survey.

NUMBER OF UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH

In 2015, 1,441 transitional-age-youth and 126 unaccompanied children were identified in the Point-in-Time Count.²⁰ This was slightly lower than in 2013, when 1,768 transitional-age-youth and 134 unaccompanied minors were included in the count. Variation in the youth population may be a result of the outreach and deduplication efforts implemented in 2015.²¹ Ninety-three percent (93%) of the unaccompanied children and 86% of transitional-age-youth population counted on January 29, 2015 were unsheltered.

FIGURE 41. UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH POPULATION ESTIMATES



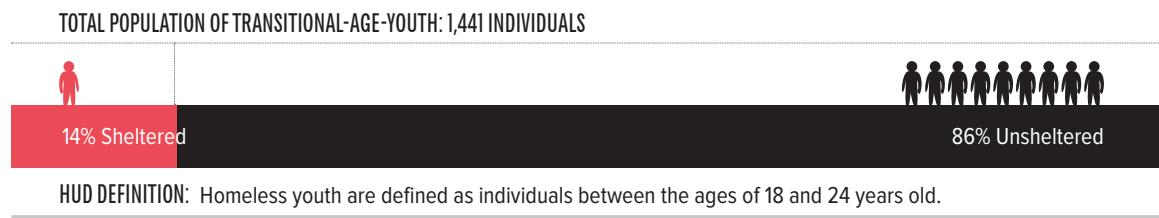
¹⁸ Department of Housing and Urban Development. (2015). Annual Assessment Report to Congress. Retrieved 2015 from <https://www.hudexchange.info/resources/documents/2014-AHAR-Part1.pdf>

¹⁹ National Coalition for the Homeless. (2011). Homeless Youth Fact Sheet. Retrieved 2011 from <http://www.nationalhomeless.org>.

²⁰ While San Francisco has improved data on the extent of homelessness among unaccompanied children and transitional-age-youth, data are still limited. The following data are estimated based on the visual street count (general and youth count efforts) and survey data. The exact age of children included in the count is unknown and outreach to children under the age of 18 is limited. However, available data suggest that unaccompanied minors range in age from roughly 14 years to 17 years old.

²¹ For additional information on youth count methods and deduplication efforts please see Appendix 1.

HUD Defined Subpopulations



Source: Applied Survey Research. (2015). San Francisco Homeless Count and Survey. Watsonville, CA.

Note: Ninety-three transitional age youth (18-24) and three unaccompanied children were counted in residential programs that fall outside the definition of homelessness for HUD. In 2015, 1,348 youth and 125 unaccompanied children met the HUD definition of homelessness.

Note: Data on parenting transitional-age-youth were not included in this section, as they were included in data on homeless families with children.

Unaccompanied children and transitional-age-youth are enumerated through the shelter count, general street count and dedicated youth street count. More than half (54%) of unaccompanied children and transitional-age-youth were identified through dedicated youth Point-in-Time Count efforts. It is important to note the youth count is conducted by peer youth enumerators who themselves have or are experiencing homelessness. These youth have a clearer understanding of where homeless youth reside and what distinguishes them from other unaccompanied children and transitional-age-youth seen on the street.

FIGURE 42. HOMELESS CENSUS RESULTS BY AGE GROUP (2015)

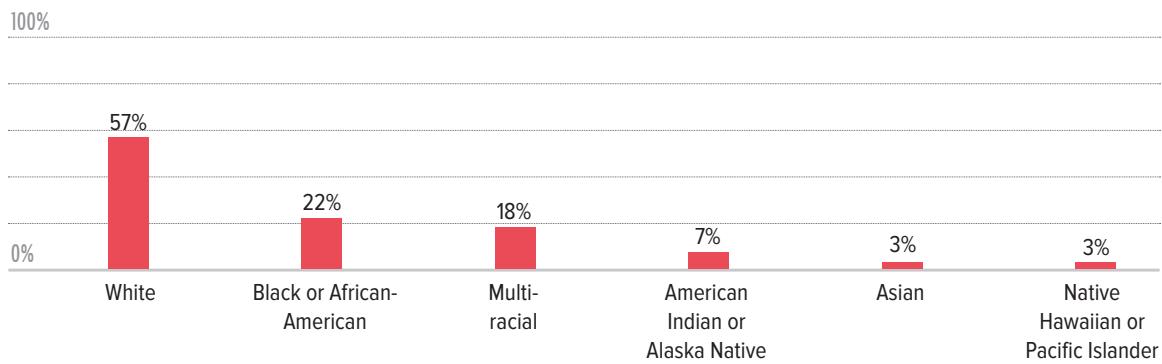
	CHILDREN UNDER 18	YOUTH 18-24
Sheltered Count	9	197
Street Count	119	1,244
General Count	31	482
Youth Count	88	762
Total	128	1,441

Source: Applied Survey Research. (2015). San Francisco Homeless Count. Watsonville, CA.

DEMOGRAPHIC CHARACTERISTICS AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH

Slightly more than half the population of youth respondents under age 25 identified as male (58%), similar to the general population. Eight percent (8%) of youth identified as transgender, higher than the older population of respondents (4%). Nearly half (48%) of youth respondents identified as LGBTQ. A slightly higher percentage of youth identified as Hispanic/Latino (22%) than respondents 25 years and over (18%). Fifty-seven percent (57%) of youth identified their race as White, 22% identified as Black or African American, and 18% as Multi-racial.

FIGURE 43. RACE AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH



2015 n:161

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

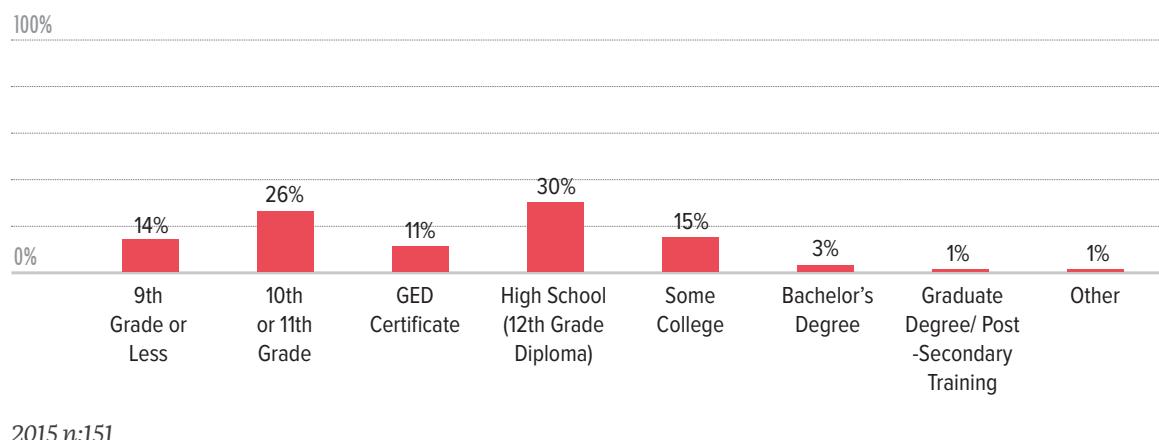
Note: Multiple response question. Percentages may not add up to 100 due to rounding.

More than half of youth survey respondents reported they were living in San Francisco at the time they most recently became homeless (56%). Nineteen percent (19%) moved to San Francisco from out of state, compared to 8% of respondents over age 25.

EDUCATIONAL ATTAINMENT AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH

Nearly all youth respondents were over the age of 18, yet 40% had not completed high school or received a GED. Thirty percent (30%) had completed high school, 3% had completed college, and 1% held a graduate degree. Ten percent (10%) of youth reported they were currently enrolled in school.

FIGURE 44. EDUCATION ATTAINMENT AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH



Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

INSTITUTIONAL INVOLVEMENT AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH

More than one quarter of youth survey respondents reported they had been in the foster care system (27%). Less than 2% of youth felt aging out of foster care was the primary cause of their homelessness. Fifty-nine percent (59%) of youth with a history of foster care reported they were living in San Francisco when they became homeless.

Thirty-three percent (33%) of youth reported they had been involved with the justice system before turning 18. Nineteen percent (19%) were on probation or parole at the time of the survey, yet only 16% reported being on probation or parole prior to experiencing homelessness. Eight percent (8%) of youth reported incarceration was the primary cause of their homelessness and 15% reported their criminal record was preventing them from obtaining work or housing.

FIGURE 45. HISTORY OF FOSTER CARE AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH



2015 n:160

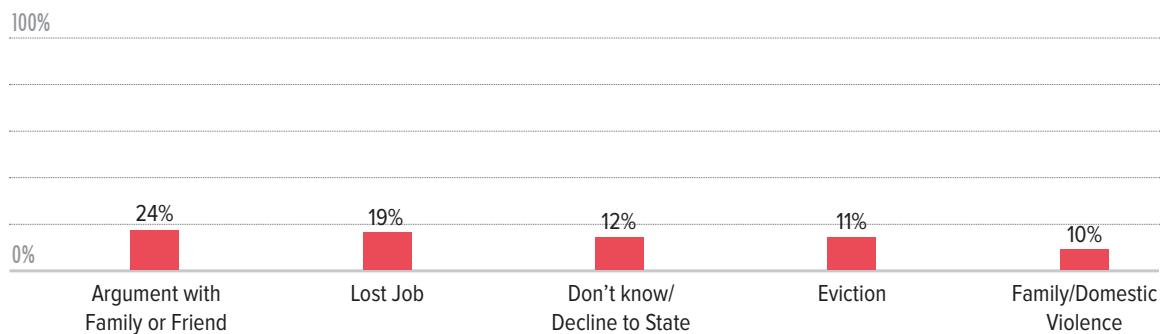
Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.



PRIMARY CAUSES OF HOMELESSNESS AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH

Homeless youth survey respondents reported similar causes of homelessness to those 25 and older. Just under one quarter (24%) of youth reported an argument with a family or friend who asked them to leave. Similar to homeless families, a higher percentage of youth respondents (10%) reported domestic violence as the primary cause of their homelessness, as compared to those ages 25 and older (4%).

FIGURE 46. PRIMARY CAUSE OF HOMELESSNESS (TOP FIVE RESPONSES) AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH



2015 n:170 respondents offering 224 responses

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

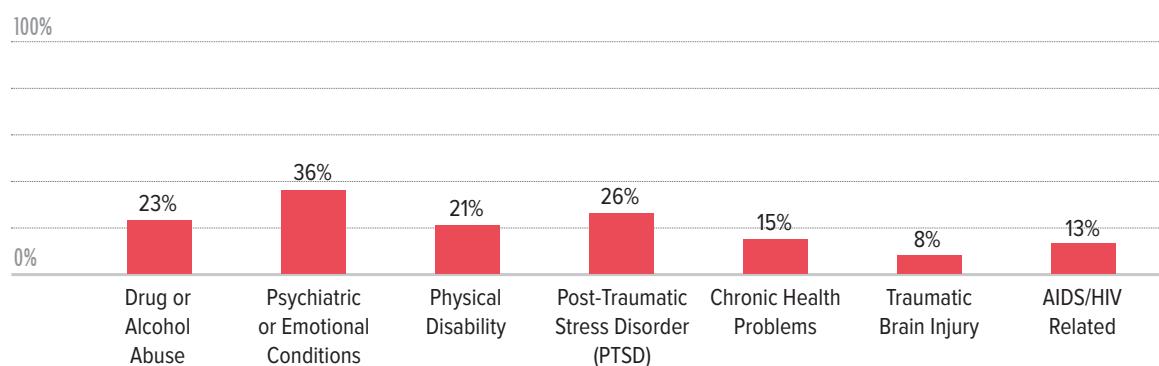
Note: Multiple response question. Percentages may not add up to 100 due to rounding.

HEALTH AND SOCIAL BARRIERS AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH

Though better than the general homeless population, health is still an issue for homeless youth. Fifty-five percent (55%) of youth reported their physical health was “good” or “very good.” This was lower than in 2013 (69%). However, 45% reported that it was “fair” or “poor.” Fifteen percent (15%) of youth reported they were receiving Medi-Cal/MediCare.

Twenty-two percent (22%) of youth reported one or more health conditions. Thirty-six percent (36%) reported psychiatric or emotional conditions, 21% reported a physical disability. Twenty-three percent (23%) reported drug or alcohol abuse. Fifteen percent (15%) of youth reported a chronic health condition. Youth respondents had higher rates of HIV/AIDS than their older peers, 13% compared to 6%.

FIGURE 47. HEALTH CONDITIONS AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH



Drug or alcohol abuse n:163; Psychiatric or emotional conditions n:165; Physical disability n:164; Post-Traumatic Stress Disorder (PTSD) n:166; Chronic health problems n:164; Traumatic Brain Injury n:165; AIDS/HIV related n:165

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

SERVICES AND SOCIAL SUPPORT NETWORKS AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH

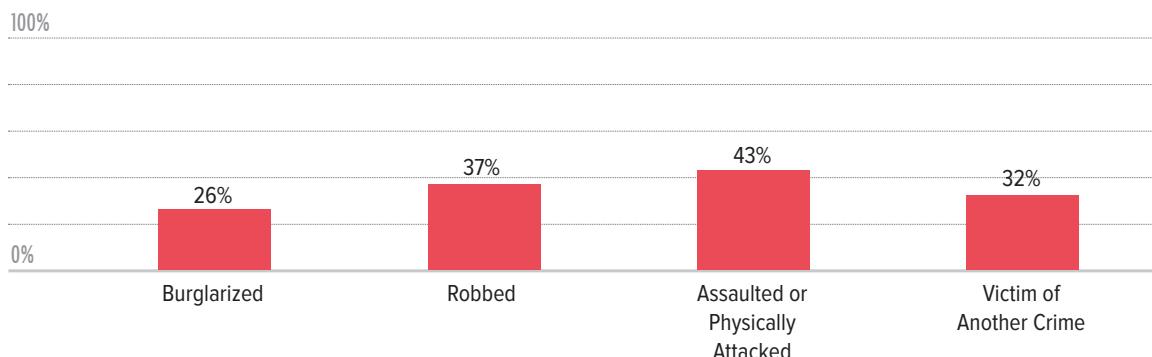
Twenty-five percent (25%) of homeless youth survey respondents reported having a supportive adult in the Bay Area. Twenty-five percent (25%) of youth reported they had stayed with a friend or family member at least one night in the two weeks prior to the survey; however, 63% reported they did not usually stay with the same person. Thirty-nine percent (39%) of youth reported using emergency shelter services, and 21% reported using shelter day services. Fourteen percent (14%) reported using transitional housing services.

Half of youth respondents (50%) reported using youth specific services “often” or “always.” Forty-nine percent (49%) of youth reported receiving CalFresh/food stamps. Fifty-nine percent (59%) of youth reported using meal services. However, 75% reported food was one of their current needs. Sixteen percent (16%) reported they had a job, paid internship, or other type of employment and 9% were using employment services.

EXPERIENCES OF VIOLENCE AND CRIME AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH

Twenty-five percent (25%) of youth survey respondents reported they did not feel safe in their current living situation, compared to 10% of youth in 2013. Fifty-four percent (54%) reported their safety had been threatened in the past 30 days, an increase from 40% in 2013. When youth were asked about specific experiences of violence, 47% reported they has been assaulted or physically attacked in the year prior to the survey.

FIGURE 48. EXPERIENCES WITH CRIME IN THE PAST 12 MONTHS AMONG UNACCOMPANIED CHILDREN AND TRANSITIONAL-AGE-YOUTH



2015 burglarized n: 147; 2015 robbed n: 147; 2015 assaulted n:145; 2015 victim of another crime n:142

Source: Applied Survey Research. (2015). San Francisco Homeless Survey. Watsonville, CA.

Note: Burglarized means that you were not present at the time.

2015 SAN FRANCISCO HOMELESS UNIQUE YOUTH COUNT & SURVEY

The above section provides an overview of what was found in the 2015 San Francisco Homeless Unique Youth Count & Survey. The full report contains additional information on the number of unaccompanied children and youth counted in the Point-in-Time Count as well as additional information gathered in the youth focused survey effort. The report can be accessed online at www.sfgov.org.

HUD Defined Subpopulations



Conclusion

The relatively stable size of the general homeless population and new findings on the number of unaccompanied children and youth obscure the fact that many individual lives have been changed for the better through San Francisco's homeless initiatives. It is important to consider the results of the 2015 count within the context of local efforts to move individuals and families out of homelessness through the provision of housing and support services. Since 2004, San Francisco has continued several ambitious initiatives to reduce the size of the homeless population, including the 5-Year Strategic Plan Toward Ending Homelessness and the 10-Year Plan to End Chronic Homelessness. Over 25,000 homeless people have left the streets or shelter system for permanent housing since January 2004, with the assistance of the programs outlined below.

CARE NOT CASH AND HOUSING FIRST

Care Not Cash is a program that offers housing/shelter and support services as a portion of an individual's County Adult Assistance Program (CAAP) benefits. CAAP is San Francisco's cash aid program for adults without dependent children. In addition to the population impacted by Care Not Cash, the Human Services Agency's master leasing program, called Housing First, also provides permanent housing for homeless single adults referred by emergency shelters and community-based agencies. The number of individuals placed into housing between January 1, 2004 and January 31, 2015 was 6,499 adults.

SAN FRANCISCO LOCAL OPERATING SUBSIDY AND HUMAN SERVICES AGENCY HOUSING PROGRAMS

San Francisco operates a permanent supportive housing program for formerly homeless families and single adults. Referrals are made from local non-profits serving homeless households. Between 2007 and 2015, 408 single individuals were placed into housing in this program. Also, 1,013 people in 309 families were placed into housing before Jan 31, 2015.

CONTINUUM OF CARE RENTAL ASSISTANCE

San Francisco has housed 1,215 homeless people – 744 individuals and 471 individuals in 160 families with federal Continuum of Care funding, also known as Shelter + Care.

DIRECT ACCESS TO HOUSING (DAH)

The Department of Public Health operates the Direct Access to Housing Program (DAH), which provides permanent supportive housing to formerly homeless persons with disabilities referred through the public healthcare system. Since its inception in 1999, the DAH Program has housed approximately 3,900 people in the 1,725 units it has secured over the course of this time.

VETERANS AFFAIRS SUPPORTIVE HOUSING (VASH)

Veterans Affairs Supportive Housing (VASH) is a permanent housing program targeted to the most vulnerable veterans in the community. This program places homeless veterans with disabilities in permanent housing with ongoing comprehensive support services provided by the Department of Veterans Affairs. In order to meet the unique challenge of San Francisco's very expensive and competitive housing market, a special collaboration of the San Francisco Housing Authority, the City and County of San Francisco, and the Department of Veterans Affairs has been convened to increase the number of veterans placed in housing. As of January 2015, 660 veterans were placed in VASH housing.

HOMEWARD BOUND

The Homeward Bound Program (HBP) reunites homeless persons living in San Francisco with family and friends living elsewhere. Homeless clients who request to return home through this program must be living in San Francisco, and be medically stable enough to successfully travel to the destination. HBP staff directly contact the client's family member or friend at the point of destination to ensure that the client will have a place to reside and have ample support to assist in establishing stabilized housing and transition from homelessness. A total of 8,737 homeless individuals have been assisted by this program since February 2005.

RAPID REHOUSING AND HOMELESS PREVENTION RENTAL ASSISTANCE

Since 2006, San Francisco has provided short and medium term rental assistance to homeless families to help them transition from shelter and transitional housing to independent housing. This program has served 1,023 families with short or medium term rental assistance since 2006. San Francisco has also provided thousands of households with legal services, case management, or rental assistance to prevent homelessness.

San Francisco's legal and rental assistance for homeless and at-risk families and single adults was augmented significantly from 2009-2012 with federal American Recovery and Reinvestment Act resources. The Homeless Prevention and Rapid Rehousing Program in San Francisco served 4,346 people in 2,573 households. While the San Francisco Homeless Prevention and Rapid Rehousing Program was a success, the funding has been discontinued nationally with the end of the American Recovery and Reinvestment Act in 2012.

In addition to the programs noted above, a wide variety of housing placement services are offered by San Francisco nonprofit service providers; providing the supportive services needed for homeless people to access the housing they need.



CONCLUSION

Through innovative and effective housing programs and services, San Francisco remains committed to moving homeless persons into permanent housing. The completion of the 2015 Homeless Point-in-Time Count provides required data for federal funding for the San Francisco Continuum of Care (CoC). The San Francisco CoC, known as the Local Homeless Coordinating Board, is a network of local homeless service providers that collaboratively plan, organize, and deliver housing and services to meet the needs of homeless people as they move toward stable housing and maximum self-sufficiency. These Homeless Assistance Grant funds (more than \$26 million annually) provide much-needed resources to house and serve the local homeless population studied in this report.

The data presented in the 2015 Homeless Point-in-Time Count & Survey report will continue to be used by planning bodies of the City and County of San Francisco and other organizations to inform additional outreach, service planning, and policy decision-making over the next two years as they continue to address homelessness.

Conclusion

Appendix 1: Overview

The purpose of the 2015 San Francisco Homeless Point-in-Time Count & Survey was to produce a point-in-time estimate of people who experience homelessness in San Francisco, a region which covers approximately 47 square miles. The results of the street count were combined with the results from the shelter and institution count to produce the total estimated number of persons experiencing homelessness in San Francisco on a given night. 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 had three primary components:

- The general street count between the hours of 8 PM to midnight – an enumeration of unsheltered homeless individuals
- The youth street count between the hours of 5 PM and 9 PM – a targeted enumeration of unsheltered youth under the age of 25
- The shelter count for the night of the street count – an enumeration of sheltered homeless individuals.

The unsheltered and sheltered homeless counts were coordinated to occur within the same time period in order to minimize potential duplicate counting of homeless persons.

THE PLANNING PROCESS

To ensure the success of the count, many City and community agencies collaborated in community outreach, volunteer recruitment, logistical planning, methodological decision-making, and interagency coordination efforts. Applied Survey Research (ASR), a non-profit social research firm, provided technical assistance with these aspects of the planning process. ASR has over 16 years of experience conducting homeless counts and surveys throughout California and across the nation. Their work is featured as a best practice in HUD's publication: *A Guide to Counting Unsheltered Homeless People*.

COMMUNITY INVOLVEMENT

Local homeless service providers and advocates have been active and valued partners in the planning and implementation of this and previous homeless counts. The planning team invited public input on a number of aspects of the count. The Local Homeless Coordinating Board (LHCB), the lead entity of San Francisco's Continuum of Care, was invited to comment on the methodology, and subsequently endorsed it. The LHCB was also the primary venue to collect public feedback.

INTERAGENCY COORDINATION

The planning team was comprised of staff from the Human Services Agency's Housing and Homeless Division, a Local Homeless Coordinating Board Policy Analyst, and consultants from Applied Survey Research. In the early stages of the planning process, the planning team requested the collaboration, cooperation, and participation of several government agencies that regularly interact with homeless individuals and possess considerable knowledge and expertise relevant to the count. In 2014, the planning team organized planning meetings which included representatives of the San Francisco Police Department, the Department of Public Health, the Recreation and Park Department, the Department of Public Works, the Mayor's Office, the Office of the City Administrator, and the Homeless Outreach Team (SF HOT). The planning team requested the participation and input of these agencies in four key areas related to the unsheltered count: the recruitment and mobilization of volunteers among City staff, the identification of "hotspots" for homelessness throughout San Francisco, the recruitment of staff to enumerate homeless individuals in City parks, and the provision of volunteer safety training and security detail on the night of the count. The planning team convened a series of more detailed meetings with the partners to coordinate the logistics of the general street count, youth count, and the park count.

GENERAL STREET 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 station, airport, or camping ground.

METHODOLOGICAL IMPROVEMENTS

The 2015 street count methodology followed a mature, HUD approved methodology used in the 2007, 2009, 2011 and 2013 counts, with the addition of dedicated youth outreach in 2013 and 2015. In 2007-2011, all areas of San Francisco were fully canvassed by adult community volunteers and service providers, with no additional outreach by youth. In 2013, the dedicated youth outreach helped to develop a clearer picture of the extent of youth homelessness. Changes were made to the youth count in 2015, to improve these efforts and those changes are detailed to follow.

VOLUNTEER RECRUITMENT AND TRAINING

Many individuals who live and/or work in San Francisco turned out to support San Francisco's effort to enumerate the local homeless population. More than 500 community volunteers and City staff registered to participate in the 2015 general street count. The Human Services Agency (HSA) spearheaded the volunteer recruitment effort. Extensive outreach efforts were conducted, targeting local nonprofits that serve the homeless and local volunteer programs.

Project Homeless Connect publicized the count and promoted volunteer participation through an e-mail to its volunteer base and an event posting on its website. The Local Homeless Coordinating Board (LHC), the Continuum of Care's oversight body for San Francisco, also promoted community participation in the count at all general meetings and subcommittee meetings for several months leading up to the count. The LHC also posted an announcement and additional information about the count on its website and on the Craigslist website.

The planning committee sent a press release informing the community about the count and making an appeal for volunteer participation approximately two weeks before the count. Volunteers registered to participate, and received additional details on the count via a dedicated SFGOV email account monitored and staffed by Applied Survey Research (ASR) support staff.

Hundreds of volunteers served as enumerators on the night of the count, canvassing San Francisco in teams to visually count homeless persons. City staff supported each of the four dispatch centers, greeting volunteers, distributing instructions, maps, and equipment to enumeration teams, and collecting data sheets from returning teams.

In order to participate in the count, all volunteers were required to attend an hour of training immediately before the count on January 29, 2015, from 7 to 8 PM. In addition to the presentation given by the lead staff at the dispatch center, volunteers received printed instructions detailing how to count unsheltered homeless persons.

SAFETY PRECAUTIONS

Every effort was made to minimize potentially hazardous situations. Parks considered too big or densely wooded to inspect safely and accurately in the dark on the night of the count were enumerated by teams of SF Parks and Recreation staff, Police Officers and SF HOT staff during the dawn hours of January 30. However, the majority of parks deemed safe were counted by volunteers on the night of the count. San Francisco Police Department officers provided a safety briefing to the volunteers and provided security at the dispatch centers throughout the night. Law enforcement districts were notified of pending street count activity in their jurisdictions. Additional safety measures for the volunteers included the deployment of an experienced SF HOT outreach worker with teams enumerating high density areas and the provision of flashlights and fluorescent safety vests to walking enumeration teams. No official reports were received in regards to unsafe or at-risk situations occurring during the street count in any area of San Francisco.

STREET COUNT DISPATCH CENTERS

To achieve complete coverage of San Francisco within the four-hour timeframe, the planning team identified four areas for the placement of dispatch centers on the night of the count – the Downtown, Mission, Sunset, and Bayview Districts. Volunteers selected their dispatch center at the time of registration, based on familiarity with the area or convenience. The planning team divided up 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

Volunteers canvassed routes of approximately 6 to 30 blocks in teams of two to six volunteers. Walking teams canvassed routes in commercial areas and other locations known to include sizable homeless populations, while driving teams counted more sparsely populated and residential areas by a combination of driving and walking. Each team received a map, which demarcated the area to be canvassed and clearly showed the boundaries of the counting area. Two smaller inset maps showed the approximate location of the route within the broader context of San Francisco and pinpointed the location of known hotspots for homelessness. Dispatch center volunteers provided each team with tally sheets to record the number of homeless persons observed and 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.

As in previous years, teams canvassing densely populated areas with known large populations of homeless persons were accompanied by experienced outreach workers from SF HOT, a trained outreach team that works with the local homeless population year-round. SF HOT members provided volunteers with valuable guidance on where and how to look for homeless persons and assisted the team in determining whom to count. Teams in the southeast corridor of San Francisco were accompanied by workers from the Community Ambassadors Program (CAP), a multiracial and bilingual public safety group. Members of these two organizations helped teams through their intimate knowledge of the areas.

YOUTH STREET COUNT METHODOLOGY

GOAL

The goal of the 2015 dedicated youth count was similar to that of the initial 2013 youth count. The count was developed in order to be more inclusive of homeless children and youth, under the age of 25. 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.

In 2013, HUD asked communities across the county to increase their efforts to include youth in their Point-in-Time Counts. The planning team recognized that homeless youth have traditionally been underrepresented in the San Francisco Point-in-Time Counts and worked with ASR to develop a localized strategy to better include unaccompanied children and transitional age youth in the count. In 2015, the goal was to not only reproduce the work that was accomplished in 2013 but to improve upon the process.

RESEARCH DESIGN

As in 2013, planning for the 2015 supplemental youth count included many youth homeless service providers. Local providers identified locations where homeless youth were known to congregate.

In 2015, rather than having youth teams enumerate in identified “Hot Spots” the teams were asked to identify map areas covered in the general count. As in 2013, the locations corresponded to areas in the neighborhoods of the Haight, Mission, Tenderloin, Union Square, Castro, SoMa, the Panhandle, Golden Gate Park and the Embarcadero. Additional outreach was achieved in 2015, and the youth count extended to areas of the Bayview. Service providers familiar with the map areas identified in each neighborhood were asked to recruit currently homeless youth to participate in the count.

Larkin Street for Youth Services, At the Crossroads, Homeless Youth Alliance and Young Community Developers, Inc. recruited more than 75 youth to work as peer enumerators, counting homeless youth in the identified areas of San Francisco on January 29, 2015. Youth workers were paid \$11 per hour for their time, including the training conducted prior to the count. Youth were trained on where and how to identify homeless youth as well as how to record the data.

It has been recognized by the Department of Housing and Urban Development as well as the United States Interagency Council on Homelessness that youth do not commonly congregate with homeless adults and are not easily identified by non-youth. For this reason, they have accepted and recommended that communities count youth at times when they can be seen, rather than during general outreach times.

DATA COLLECTION

It was determined that homeless youth would be more prominent on the street during daylight hours, rather than in the evening when the general count was conducted. The youth count was conducted from approximately 5 PM to 9 PM on January 29, 2015. Youth worked in teams of two to four, with teams coordinated by youth street outreach workers.

SHELTER AND INSTITUTION COUNT METHODOLOGY

GOAL

The goal of the shelter and institution count was to gain an accurate count of persons temporarily housed in shelters and other institutions across San Francisco. These data were vital to gaining an accurate overall count of the homeless population and understanding where homeless persons received shelter.

DEFINITION

- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals)

RESEARCH DESIGN

The homeless occupancy of the following shelters and institutions was collected for the night of January 29, 2015. While HUD does not include counts of homeless individuals in hospitals, residential rehabilitation facilities, and jails in the reportable numbers for the Point-in-Time Count, these facilities are included in San Francisco's sheltered count because these individuals meet San Francisco's local definition of homelessness and the numbers provide important supplemental information for the community and service providers in their planning efforts.

The following facilities participated in the count:

- Residential Facilities:
- Mental Health Facilities and Substance Abuse Treatment Centers: The Department of Public Health and local agencies assisted in collecting counts of self-identified homeless persons staying in various facilities on the night of January 29, 2015. These Point-in-Time Count numbers included inpatient psychiatric services, Acute Diversion Units, medically-assisted and social model detoxification facilities, and residential drug treatment facilities.
- Jail: The San Francisco Sheriff's Department provided a count of the number of homeless persons in the County Jail on the night of January 29, 2015.
- Hospitals: The San Francisco Hospital Council assisted with the coordination of obtaining count numbers from the hospitals. Staff from individual hospitals collected the number of persons who were homeless in their facilities on the night of January 29, 2015. The numbers reported for the hospitals did not duplicate the inpatient mental health units.

A designated staff person provided the count for each of these facilities; clients were not interviewed. For the emergency shelters, transitional housing programs, resource centers, and stabilization rooms, all persons in the facility on the night of the count were included in the Point-in-Time Count because these are homeless-specific programs. For the hospitals and treatment centers, social workers or appropriate staff counted patients who identified as homeless. The San Francisco County Jail referenced booking cards to determine homeless status.



CHALLENGES

There are many challenges in any homeless enumeration, especially when implemented by volunteer enumerators in a community as large and diverse as San Francisco. 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.

While the risk of an undercount is much greater, it is also important to recognize that the count is conducted over the span of a few hours and people may be counted twice as they travel from one location of the city to another.

POINT-IN-TIME UNDERCOUNT

For a variety of reasons, homeless persons generally do not want 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.

In a non-intrusive visual homeless enumeration, the methods employed, 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 makeshift shelters.

The Local Homeless Coordinating Board, along with community members, expressed concerns about the undercount of homeless families in the Point-in-Time Count and with the use of HUD's definition of homelessness. Therefore the information below is meant to provide supplemental data and be used for informational purposes.

The San Francisco Unified School District (SFUSD) employs a broader definition of homelessness in its recordkeeping. It includes youth living in shelters, single room occupancy hotels, transitional housing, the streets, cars, doubled-up, and other inadequate accommodations. SFUSD estimates that there were 2,209 school-aged youth enrolled in the district on January 29, 2015, down from 2,357 in January 2015. The largest number of children were in temporarily doubled-up situations (1,327), meaning they were staying with other friends or families.

Compass Connecting Point (CCP) is the central intake point for families facing homelessness or a housing crisis in San Francisco. CCP provides housing search services and manages the waitlist for family three to six month shelter placement. On January 27, 2015, CCP reported that 93 families seeking three to six month shelter placement had been assessed in-person for shelter eligibility and been placed on the waitlist, and an additional 74 families were called to start the assessment process (167 total families seeking shelter). Of the 93 families on the waitlist for whom there was additional data, three were living in three to six month family shelter (3%) and chose to get on the waitlist for a subsequent similar placement, of the 90 living outside the three to six month family shelter programs, 44 were living with friends and family and 21 were staying in an overnight shelter. Also, it's noteworthy that three families reported sleeping on the street.

In addition, HSA has considered other unsheltered count methodologies, in the interest of decreasing the subjectivity involved in the count and attaining a more accurate number. One approach that has been considered is conducting interviews of all persons observed during the street count to determine whether they self-identify as homeless. Covering the entire City using this approach would require significantly more volunteers or a multiple-night count. A multiple-night count is a more expensive approach and would require additional resources. Moreover, a multiple-night count would require a methodology to eliminate duplicate counting of individuals. In addition, interviewing raises concerns about disturbing the privacy of homeless persons and compromising the safety of volunteer enumerators.

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.

SURVEY METHODOLOGY

PLANNING AND IMPLEMENTATION

The survey of 1,027 homeless persons was conducted in order to yield qualitative data about the homeless community in San Francisco. 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, length and recurrence of homelessness, usual 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 homeless workers and Community Ambassadors Program team members, who were trained by Applied Survey Research and HSA. Training sessions led potential interviewers through a comprehensive orientation that included project background information and detailed instruction on respondent eligibility, interviewing protocol, and confidentiality. Homeless workers were compensated at a rate of \$5 per completed survey.

It was determined that survey data would be more easily collected if an incentive gift was offered to respondents in appreciation for their time and participation. Socks were given as an incentive for participating in the 2015 Homeless Survey. The socks were easy to obtain and distribute, were thought to have wide appeal, and could be provided within the project budget. This approach enabled surveys to be conducted at any time during the day. The gift proved to be a great incentive and was widely accepted among survey respondents.

SURVEY ADMINISTRATION DETAILS

- The 2015 San Francisco Homeless Survey was administered by the trained survey team between February 1 and February 19, 2015.
- In all, the survey team collected 1,027 unique surveys.

SURVEY SAMPLING

The planning team recommended approximately 1,000 surveys for 2015. Based on a Point-in-Time estimate of 7,529 homeless persons, with a randomized survey sampling process, the 1,027 valid surveys represent a confidence interval of +/- 3% with a 95% confidence level when generalizing the results of the survey to the estimated population of homeless individuals in San Francisco.

The 2007 survey was a service-based approach which focused on surveying individuals in drop-in-centers and free meal sites. The 2009 survey was an entirely street-based approached which focused survey efforts on outdoor and street locations. The 2013 and 2015 survey was an integration of the two previous approaches and was administered in both transitional housing facilities and on the street. In order to assure 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. Individuals residing in emergency shelters were reached through street surveys during the day when emergency shelters were closed.

Strategic attempts were made to reach individuals in various geographic locations and of various subset groups such as homeless youth, minority ethnic groups, military veterans, domestic violence victims, and families. One way to increase the participation of these groups was to recruit peer survey workers. The 2013 and 2015 survey also 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 encountered whom 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. It is important to recognize that while efforts are made to randomize the respondents, it is not a random sample methodology.

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 one individual.

DATA ANALYSIS

To avoid potential duplication of respondents, 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, and length of homelessness, and consistencies in patterns of responses to other questions on the survey.

SURVEY CHALLENGES AND LIMITATIONS

The 2015 San Francisco Homeless Survey did not include an equal representation of all homeless experiences. For example, a greater number of surveys were conducted among transitional housing residents than in previous years. However, this provided an increased number of respondents living in families and provided a more comprehensive understanding of the overall population.

There may be some variance in the data that the homeless individuals 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 City and County staff members recommended individuals who would be the best to conduct interviews and they received comprehensive training about how to conduct interviews. The service providers and City staff also reviewed the surveys to ensure quality responses. Surveys that were considered incomplete or containing false responses were not accepted.



Appendix 2: Definitions & Abbreviations



- **Chronic homelessness** is defined by the U.S. Department of Housing and Urban Development, the U.S. Department of Health and Human Services, and the U.S. Department of Veterans Affairs as “an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more, or has had at least four episodes of homelessness in the past three years.”
- **Disabling condition**, for the purposes of this study, is defined as a physical disability, mental illness, depression, alcohol or drug abuse, chronic health problems, HIV/AIDS, Post-traumatic Stress Disorder (PTSD), or a developmental disability.
- **Emergency shelter** is the provision of a safe alternative to the streets, either in a shelter facility, or through the use of stabilization rooms. Emergency shelter is short-term, usually for 90 days or fewer. Domestic violence shelters are typically considered a type of emergency shelter, as they provide safe, immediate housing for victims and their children.
- **Family** is defined as a household with at least one adult and one child under 18.
- **Homeless** under the category 1 definition of homelessness in the Homeless Emergency Assistance and Rapid Transition to Housing (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** is the abbreviation for the U.S. Department of Housing and Urban Development.
- **Sheltered homeless individuals** are those homeless individuals who are living in emergency shelters or transitional housing programs.
- **Single individual** refers to an unaccompanied adult or youth.
- **Transitional-Age-Youth (TAY)** refers to an unaccompanied youth aged 18-24 years.
- **Transitional housing** facilitates the movement of homeless individuals and families to permanent housing. It is 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** refers to children under the age of 18 who do not have a parent or guardian present.
- **Unsheltered homeless individuals** are those homeless individuals who are living on the streets, in abandoned buildings, storage structures, vehicles, encampments, or any other place unfit for human habitation.



SAN FRANCISCO

HOMELESS

POINT-IN-TIME COUNT & SURVEY

COMPREHENSIVE REPORT

2015

