ABOUT THE RESEARCHER

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

HOUSING INSTABILITY RESEARCH DEPARTMENT (HIRD)

Vice President: Peter Connery
Department Director: Samantha Green
Project Lead: John Connery
Department Coordinator: Christina Connery
Research Analysts: Connie Chu, James Connery, Audra Eads, Kendra Fisher, Marissa Jaross, Jenna Gallant, and Javier Salcedo
Graphic Design and Layout: Michelle Luedtke and Molly Stene

LOCATIONS

Central Coast:
55 Penny Lane, Suite 101
Watsonville, CA 95076
tel 831-728-1356

Bay Area:
1871 The Alameda, Suite 180
San Jose, CA 95126
tel 408-247-8319

www.appliedsurveyresearch.org
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CENSUS COORDINATION AGENCY

Coalition of Homeless Service Providers
Katherine Thoeni, Executive Officer
Katrina Mckenzie, Administrative Coordinator
Roxanne Wilson, HMIS Data Coordinator
Janelle Delgado, Management Analyst

FUNDING FOR THE 2017 MONTEREY COUNTY CENSUS AND SURVEY PROVIDED BY:

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ADDITIONAL THANKS

FOR ADDITIONAL INFORMATION
Coalition Of Homeless Services Providers
220 12th Street, Marina, CA 93933
(831)883-3080
www.chspmontereycounty.org
Introduction

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

The biennial Point-in-Time Count is the only source of nationwide data on sheltered and unsheltered homelessness, and is required by the U.S. Department of Housing and Urban Development (HUD) of all jurisdictions receiving federal funding to provide housing and services for individuals and families experiencing homelessness.

Continuums of Care report the findings of their local Point-in-Time Census in their annual funding application to HUD, which ultimately help the federal government better understand the nature and extent of homelessness nationwide. Census data also help to inform communities’ local strategic planning, capacity building, and advocacy campaigns to prevent and end homelessness.

Monterey County worked in conjunction with Applied Survey Research (ASR) to conduct the 2017 Monterey Homeless Point-in-Time Census and Survey. ASR is a social research firm with extensive experience in homelessness enumeration and needs assessment.

The Monterey County Homeless Point-in-Time Census has two primary components: a point-in-time enumeration of unsheltered homeless individuals and families (those sleeping outdoors, on the street, in parks, or vehicles, etc.) and a point-in-time enumeration of homeless individuals and families residing in temporary shelter (e.g. emergency shelter or transitional housing).

The 2017 Monterey County Homeless Point-in-Time Census was a comprehensive community effort. With the support of approximately 43 individuals with lived experience of homelessness, 93 community volunteers, staff from various City and County departments, and law enforcement, the entire county was canvassed between the hours of 5:30 a.m. and noon on January 25, 2017. This resulted in a peer-informed visual count of unsheltered homeless individuals and families residing on the streets, in vehicles, makeshift shelters, encampments and other places not meant for human habitation. Shelters and facilities reported the number of homeless individuals and families who occupied their facilities on the previous evening.

Monterey County also conducted a specialized count of unaccompanied children and transition-age youth under the age of 25 years old. This dedicated count is part of a nationwide effort, established and recommended by HUD, to improve our understanding of the scope of youth homelessness. Trained youth enumerators who currently or recently experienced homelessness conducted the count in targeted areas where young people
experiencing homelessness were known to congregate. This is an important year for national data on young people experiencing homelessness, as HUD will use 2017 youth count results as a baseline for measuring progress toward ending youth homelessness by 2020.

In the weeks following the street count, an in-depth survey was administered to 654 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 Monterey County on a single night in January. Special attention is given to specific subpopulations, including chronically homeless individuals, veterans, families, unaccompanied children under the age of 18, and transition-age-youth between the ages of 18 and 24.

To better understand the dynamics of homelessness over time, results from previous years, including 2013 and 2015, are provided where available and applicable.

**FEDERAL DEFINITION OF HOMELESSNESS FOR POINT-IN-TIME COUNTS**

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

- Living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement; or
- With a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground.

This definition does not include individuals who were sleeping in hotel/motels, jail or prison, were couch surfing, or living in “doubled up” situations.

**PROJECT OVERVIEW AND GOALS**

In order to for the 2017 Monterey County Point-in-Time Count and Survey to best reflect the experience and expertise of the community, ASR held regular planning meetings with local community members. These community members were drawn from county and city departments, community-based service providers, and other interested stakeholders. These individuals comprised the 2017 Planning Committee, and were instrumental to ensuring the 2017 Monterey Homeless Point-in-Time Census and Survey reflected the needs and concerns of the community.

The 2017 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;

---

1 Significant deduplication efforts were made in 2017 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 A.
Introduction

- To measure changes in the numbers and characteristics of the homeless population since the 2015 Monterey County Homeless Point-in-Time Census and Survey, and to track progress toward ending homelessness;
- To increase public awareness of overall homeless issues and generate support for constructive solutions; and
- To assess the status of specific subpopulations, including veterans, families, unaccompanied children, transition-age-youth, and those who are chronically homeless.

This report is intended to assist service providers, policy makers, funders, and local, state, and federal government in gaining a better understanding of the population currently experiencing homelessness. This report also aims to aid these same groups in measuring the impact of current policies and programming, as well as planning for the future.
Point-In-Time Census

The 2017 Monterey County Homeless Point-in-Time Census and Survey included a complete enumeration of all unsheltered and publicly sheltered homeless persons. The general street count was conducted on January 25, 2017 from approximately 5:30 a.m. to noon and covered most of the 3,771 square miles of Monterey County. The shelter count was conducted on the previous evening and included all individuals staying in: emergency shelters, transitional housing facilities, and domestic violence shelters. The general street count and shelter count methodology were similar to those used in 2015, with some small improvements.

The methodology used for the 2017 Monterey County Homeless Point-in-Time Census and Survey is commonly described as a “blitz count” since it is conducted by a large team over a very short period of time. As this method is conducted in Monterey County, the result is an observation based count of individuals and families who appear to be homeless. The count is then followed by an in-person representative survey, the results of which are used to profile and estimate the condition and characteristics of the local homeless population. Information collected from the survey is used to fulfill HUD reporting requirements, and to inform local service delivery and strategic planning efforts.

In a continuing effort to improve data on the extent of youth homelessness, Monterey County also conducted a dedicated youth count similar to the one conducted in 2015. The dedicated youth count methodology was improved in 2017 to better ensure that unaccompanied children and transition-age-youth were not included in both the general street count and youth count. For more information regarding the dedicated youth count, deduplication, and project methodology, please see appendix A.
NUMBER AND CHARACTERISTICS OF HOMELESS PERSONS IN MONTEREY COUNTY

On January 25th, 2017 there were 2,837 individuals experiencing homelessness in Monterey County. This represents an increase of 23% from 2015 and the largest number recorded in the past 10 years.

Figure 1. TOTAL NUMBER OF HOMELESS INDIVIDUALS ENUMERATED DURING THE POINT-IN-TIME HOMELESS CENSUS WITH TREND


Figure 2. TOTAL NUMBER OF HOMELESS INDIVIDUALS ENUMERATED DURING THE POINT-IN-TIME HOMELESS CENSUS


LIVING ACCOMMODATIONS

Nearly a third (32%) of all individuals experiencing homelessness in Monterey County were staying in vehicles in 2017. A quarter (25%) were living on streets, while eleven percent (25%) were staying in shelters, either emergency shelters or transitional housing.

Figure 3. CURRENT LIVING ACCOMMODATIONS

Amongst all the cities in the county of Monterey, Salinas has seen the largest increase in individuals experiencing homelessness, increasing 155% since 2013. Seaside has seen a decrease of nearly 60%, while Prunedale and Pajaro saw even larger decreases (93% and 78%, respectively).

**Figure 4. TOTAL NUMBER OF HOMELESS PERSONS BY JURISDICTION AND SHELTER STATUS**

<table>
<thead>
<tr>
<th>JURISDICTION</th>
<th>UNSHELTERED</th>
<th>SHELTERED</th>
<th>TOTAL</th>
<th>15-17 % CHANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Incorporated</td>
<td>1,300</td>
<td>1,692</td>
<td>2,416</td>
<td>27%</td>
</tr>
<tr>
<td>Monterey</td>
<td>306</td>
<td>292</td>
<td>598</td>
<td>0%</td>
</tr>
<tr>
<td>Salinas</td>
<td>634</td>
<td>1,097</td>
<td>1,731</td>
<td>57%</td>
</tr>
<tr>
<td>Marina</td>
<td>68</td>
<td>51</td>
<td>119</td>
<td>37%</td>
</tr>
<tr>
<td>Seaside</td>
<td>152</td>
<td>40</td>
<td>192</td>
<td>-62%</td>
</tr>
<tr>
<td>Sand City</td>
<td>55</td>
<td>31</td>
<td>86</td>
<td>-44%</td>
</tr>
<tr>
<td>Gonzales</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>-</td>
</tr>
<tr>
<td>Pacific Grove</td>
<td>13</td>
<td>35</td>
<td>48</td>
<td>-</td>
</tr>
<tr>
<td>King City</td>
<td>4</td>
<td>0</td>
<td>4</td>
<td>-</td>
</tr>
<tr>
<td>Greenfield</td>
<td>2</td>
<td>6</td>
<td>8</td>
<td>-</td>
</tr>
<tr>
<td>Del Rey Oaks</td>
<td>55</td>
<td>111</td>
<td>166</td>
<td>102%</td>
</tr>
<tr>
<td>Carmel</td>
<td>6</td>
<td>16</td>
<td>22</td>
<td>-</td>
</tr>
<tr>
<td>Soledad</td>
<td>5</td>
<td>13</td>
<td>18</td>
<td>-</td>
</tr>
<tr>
<td>Total Unincorporated</td>
<td>330</td>
<td>419</td>
<td>749</td>
<td>2%</td>
</tr>
<tr>
<td>Pajaro</td>
<td>144</td>
<td>14</td>
<td>158</td>
<td>-94%</td>
</tr>
<tr>
<td>Prunedale</td>
<td>8</td>
<td>16</td>
<td>24</td>
<td>-</td>
</tr>
<tr>
<td>Other</td>
<td>178</td>
<td>391</td>
<td>569</td>
<td>119%</td>
</tr>
<tr>
<td>County Office of Education*</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>-100%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,630</strong></td>
<td><strong>2,113</strong></td>
<td><strong>3,743</strong></td>
<td>23%</td>
</tr>
</tbody>
</table>


*Note: % Change was not calculated when jurisdiction was below 50 individuals.*
Characteristics of Persons Experiencing Homelessness

Figure 5. TOTAL HOMELESS CENSUS POPULATION BY GENDER

2013 N=2,590; 2015 N=2,308; 2017 N=2,837

Figure 6. TOTAL HOMELESS CENSUS POPULATION BY RACE

2017 n= 2837
Note: Multiple response question. Percentages may not add up to 100 due to rounding.

Figure 7. TOTAL HOMELESS CENSUS POPULATION BY HISPANIC/NON-HISPANIC

2017 N=2,837
SUBPOPULATIONS

CHRONICALLY HOMELESS INDIVIDUALS

The Department of Housing and Urban Development 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 disability that prevents them from maintaining work or housing. This definition applies to individuals as well as heads of household who meet the definition.

There were a total of 605 individuals experiencing chronic homelessness in 2017, nearly identical to 2015 (603).

Figure 8. CHRONIC HOMELESSNESS POPULATION ESTIMATES

<table>
<thead>
<tr>
<th>Total Chronic Homeless Population: 605</th>
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<tbody>
<tr>
<td>3% Sheltered</td>
</tr>
<tr>
<td>97% Unsheltered</td>
</tr>
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Figure 9. TOTAL NUMBER OF CHRONICALLY HOMELESS INDIVIDUALS ENUMERATED DURING THE POINT-IN-TIME HOMELESS CENSUS WITH TREND

**Veterans Experiencing Homelessness**

Many U.S. veterans experience conditions that place them at increased risk for homelessness. Veterans experience higher rates of post-traumatic stress disorder (PTSD), traumatic brain injury (TBI), sexual assault, and substance abuse than non-Veterans. 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.

There were 110 veterans identified in the 2017 Homeless Census, a decrease of 22% since 2015 and slightly less than half from 2013.

**Figure 10. Total Number of Homeless Veterans Enumerated During the Point-in-Time Homeless Census with Trend**

![Graph showing the trend of homeless veterans from 2013 to 2017](image)


**Figure 11. Homeless Veteran Population Estimates**

- Total Homeless Veteran Population: 110
- 59% Sheltered
- 41% Unsheltered


**Figure 12. Total Homeless Veteran Census Population by Race**

- 2017 Homeless Census Population
- 2015 Homeless Census Population
- 2015 Monterey County General Population

![Bar chart showing the distribution of homeless veterans by race](image)

2017 n=110


Note: Multiple response question. Percentages may not add up to 100 due to rounding.
Figure 13. TOTAL VETERAN HOMELESS CENSUS POPULATION BY HISPANIC/NON-HISPANIC

2017 N=110
HOMELESS FAMILIES WITH CHILDREN

National data from 2016 suggest that 35% of all people experiencing homelessness are persons in families. Very few families experiencing homelessness are unsheltered, as public shelters serve 90% of homeless families in the United States; this is a significantly higher proportion of the population compared to other subpopulations, including unaccompanied children and transition-age-youth. Data on families experiencing homelessness suggest that they are not much different from families in poverty.

There were 160 families with 550 family members experiencing homelessness in 2017, an increase of 37% from 2015. Two thirds of families experiencing homelessness were living in shelters.

Figure 14. TOTAL NUMBER OF HOMELESS FAMILIES WITH CHILDREN ENUMERATED DURING THE POINT-IN-TIME HOMELESS CENSUS WITH TREND

![Chart showing the number of homeless families with children from 2013 to 2017]


Figure 15. HOMELESS FAMILIES WITH CHILDREN POPULATION ESTIMATES

<table>
<thead>
<tr>
<th>Total Homeless Families with Children Population: 160 families with 550 members</th>
</tr>
</thead>
<tbody>
<tr>
<td>66% Sheltered</td>
</tr>
<tr>
<td>34% Unsheltered</td>
</tr>
</tbody>
</table>

Note: There is a significant number of persons in homeless families who are in a “double-up” situation that may or may not fall within the HUD PIT count definition of homelessness that could not be identified due to their typical location on private property.

Figure 16. INDIVIDUALS IN FAMILIES WITH CHILDREN EXPERIENCING HOMELESSNESS CENSUS POPULATION BY GENDER

![Pie chart showing the gender distribution of families with children in 2017]

2017 N: 550
Figure 17. INDIVIDUALS IN FAMILIES WITH CHILDREN EXPERIENCING HOMELESSNESS CENSUS POPULATION BY RACE

<table>
<thead>
<tr>
<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>74%</td>
<td>77%</td>
</tr>
<tr>
<td>Multi-race</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>21%</td>
<td>1%</td>
</tr>
<tr>
<td>Native Hawaiian or Pacific Islander</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Asian</td>
<td>0%</td>
<td>4%</td>
</tr>
</tbody>
</table>

2017 n=550
Note: Multiple response question. Percentages may not add up to 100 due to rounding.

Figure 18. INDIVIDUALS IN FAMILIES WITH CHILDREN EXPERIENCING HOMELESSNESS CENSUS POPULATION BY HISPANIC/NON-HISPANIC

<table>
<thead>
<tr>
<th>Hispanic</th>
<th>Non-Hispanic</th>
</tr>
</thead>
<tbody>
<tr>
<td>29%</td>
<td>71%</td>
</tr>
</tbody>
</table>

2017 N=550
UNACCOMPANIED HOMELESS CHILDREN AND TRANSITION-AGE YOUTH

Due to the often hidden nature of youth homelessness, there are limited data available on unaccompanied children and transition-age-youth experiencing homelessness across the country. Unaccompanied children are youth under the age of 18 while transition-age-youth are young adults between the ages of 18-24. To get a better understanding of unaccompanied children and transition-age youth experiencing homelessness across the county, a special youth count was organized to better meet the unique challenges presented by this population. The youth count went out later in the day and relied on the knowledge of youth who had recently experienced homelessness or were currently experiencing homelessness.

2015 was the first year that Monterey County performed a dedicated and separate youth count. In 2017, that effort was expanded significantly. Working with youth specific shelters and programs across the county, multiple teams covered “hot spot” locations shared by youth experiencing homelessness, allowing them significantly increased coverage than two years previous.

There were 598 individuals experiencing homelessness under the age of 25 in Monterey County, 25% of whom were under the age of 18. The number of unaccompanied children and transition-age youth represent an increase of 121% from 2015. Caution is recommended when interpreting this result, due to the improved scale of the effort in 2017.

Figure 19. TOTAL NUMBER OF UNACCOMPANIED HOMELESS CHILDREN AND TRANSITION-AGE YOUTH ENUMERATED DURING THE POINT-IN-TIME HOMELESS CENSUS WITH TREND

![Graph showing the total number of unaccompanied homeless children and transition-age youth by year.]


Figure 20. UNACCOMPANIED HOMELESS CHILDREN AND TRANSITION-AGE YOUTH POPULATION ESTIMATES

<table>
<thead>
<tr>
<th>Total Unaccompanied Homeless Children &amp; Transition-Age-Youth Population: 598</th>
</tr>
</thead>
<tbody>
<tr>
<td>16% Sheltered</td>
</tr>
</tbody>
</table>


Note: There is a significant number of persons in homeless families who are in a “double-up” situation that may or may not fall within the HUD PIT count definition of homelessness that could not be identified due to their typical location on private property.
Homeless Survey Findings

This section provides an overview of the findings generated from the survey component of the 2017 Monterey County Homeless Point-in-Time Count and Survey. Surveys were administered to a randomized sample of homeless individuals between February 1 and February 21, 2017. This effort resulted in 654 complete and unique surveys. Based on a Point-in-Time Count of 2,837 homeless persons, with a randomized survey sampling process, these 654 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 Monterey County. In other words, if the survey were conducted again, we can be confident that the results would be within three percentage points of the current results.

In order to respect respondent privacy and to ensure the safety and comfort of those who participated, respondents were not required to complete all survey questions. Missing values are intentionally omitted from the survey results. Therefore, the total number of respondents for each question will not always equal the total number of surveys conducted.

SURVEY DEMOGRAPHICS

In order to gain a more comprehensive understanding of the experiences of individuals and families experiencing homelessness in Monterey County respondents were asked basic demographic questions including age, gender, sexual orientation, and ethnicity.

AGE

Thirteen percent (13%) of survey respondents were under the age of 25 at the time of the survey. Thirty-seven percent (37%) were between the ages of 25 and 40, 42% were between the ages of 41 and 60, and 8% were 61 years or older.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2015</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 18 Years</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>18-24 Years</td>
<td>9%</td>
<td>12%</td>
</tr>
<tr>
<td>25-30 Years</td>
<td>17%</td>
<td>14%</td>
</tr>
<tr>
<td>31-40 Years</td>
<td>30%</td>
<td>23%</td>
</tr>
<tr>
<td>41-50 Years</td>
<td>20%</td>
<td>27%</td>
</tr>
<tr>
<td>51-60 Years</td>
<td>15%</td>
<td>15%</td>
</tr>
<tr>
<td>61 Years or More</td>
<td>8%</td>
<td>8%</td>
</tr>
</tbody>
</table>

2015 n=344; 2017 n=654

**Gender and Sexual Orientation**

Over one third of survey respondents (37%) identified as female, 61% male, 2% transgender, and 1% do not identify as male, female, or transgender. Among the female population, 8% of women indicated that they were currently pregnant; 7 of the 18 pregnant respondents were under the age of 25. While there are limited national 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. Sixteen percent (16%) of homeless survey respondents identified as LGBTQ in 2017. Of those, 43% identified as bisexual, 19% lesbian, 18% gay, 5% queer, and 3% transgender.

Respondents who identified as LGBTQ were more likely to report having been the victim of domestic violence (32%), compared to 19% of respondents who did not identify as LGBTQ. Respondents who identified as LGBTQ also reported a higher incidence of HIV or AIDS related illness (4% compared to 1%).

**Figure 22. Sexual Orientation and LGBTQ Identity**

<table>
<thead>
<tr>
<th>LGBTQ Status</th>
<th>2015</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>19%</td>
<td>16%</td>
</tr>
<tr>
<td>No</td>
<td>81%</td>
<td>84%</td>
</tr>
</tbody>
</table>

**Breakout of Respondents Answering Yes**

<table>
<thead>
<tr>
<th>Category</th>
<th>2015</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gay</td>
<td>17%</td>
<td>18%</td>
</tr>
<tr>
<td>Lesbian</td>
<td>29%</td>
<td>19%</td>
</tr>
<tr>
<td>Queer</td>
<td>7%</td>
<td>5%</td>
</tr>
<tr>
<td>Bisexual</td>
<td>37%</td>
<td>43%</td>
</tr>
<tr>
<td>Transgender</td>
<td>5%</td>
<td>3%</td>
</tr>
<tr>
<td>Other</td>
<td>10%</td>
<td>16%</td>
</tr>
</tbody>
</table>

LGBTQ n: 444; Breakout n: 82 respondents offering 86 responses; LGBTQ 2017 n=654; Breakout n=103 respondents offering 106 responses.


Note: Multiple response question. Percentages may not add up to 100.
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, and that format has been adopted in these reports. When asked their ethnicity, approximately half (52%) of homeless survey respondents reported they did not identify as Hispanic or Latino. In comparison to the general population of Monterey County, a slightly lower percentage of homeless respondents identified as Hispanic or Latino (48% compared to 58%).

Figure 23. HISPANIC OR LATINO ETHNICITY

![Graph showing Hispanic/Latino and Not Hispanic/Latino percentages]

2017 n = 621
Note: Percentages may not add up to 100 due to rounding.

When asked about their racial identity, differences between the general population and those experiencing homelessness were more distinct. A much higher proportion of survey respondents identified as Black or African-American (11% compared to 2%).

Figure 24. RACE

![Graph showing race percentages]

2017 n = 617
Note: Percentages may not add up to 100 due to rounding.
INCIDENCE OF HOMELESSNESS

Unstable living conditions, poverty, housing scarcity, and many other issues often lead to individuals falling in and out of homelessness. For many, the experience of homelessness is part of a long and recurring history of housing instability. Nearly two thirds of (65%) 2017 survey respondents reported they had experienced homelessness previously.

Figure 25. FIRST TIME HOMELESS (RESPONDENTS ANSWERING "YES")

![Chart showing percentages of respondents answering "Yes" for the years 2013, 2015, and 2017.]

2013 n=404; 2015 n= 427; 2017 n= 652

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, 15% of respondents reported that they were under the age of 18, 21% reported they were between the ages of 18-24, and 64% reported they were 25 or older.

Figure 26. AGE AT FIRST EXPERIENCE OF HOMELESSNESS

![Chart showing age distribution in 2015 and 2017.]

2015 n= 427; 2017 n= 634
DURATION OF HOMELESSNESS

When asked how long they had been homeless, over half (59%) reported they had been homeless for a year or more, slightly higher than 2015, when 56% of respondents reported they had been homeless for a year or more.

Figure 27. LENGTH OF CURRENT EPISODE OF HOMELESSNESS

LIVING ACCOMMODATIONS

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

Survey respondents reported many different living accommodations prior to becoming homeless, although most lived in or around Monterey County with friends, family, or on their own in a home or apartment.

PLACE OF RESIDENCE

Knowing where individuals were living before they most recently lost their housing informs discussions regarding how local the homeless population is to the region. This information can also influence changes to available support systems if the Continuum of Care finds increasing numbers of individuals living locally before experiencing homelessness.

Eighty-three percent (83%) of respondents reported they were living in Monterey County at the time they most recently became homeless, an increase from 78% in 2015. Of those, over half (61%) had lived in Monterey County for 10 or more years. Seven percent (7%) had lived in Monterey County for less than one year.

Four percent (4%) of respondents reported that they were living out of state at the time they lost their housing, and 10% reported they were living in another county in California.

Figure 28. PLACE OF RESIDENCE AT TIME OF HOUSING LOSS

![Place of Residence Chart]

2017 n= 642

Figure 29. COUNTY OF RESIDENCE IMMEDIATELY PRIOR TO BECOMING HOMELESS THIS TIME WITH TREND

![County of Residence Chart]

2013 n: 393; 2015 n: 435; 2017 n: 642
Prior Living Arrangements

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

Forty percent (40%) of respondents reported living in a home owned or rented by friends or relatives prior to becoming homeless, slightly greater than 2015 (34%). Thirty-one percent (31%) reported living in a home owned or rented by themselves or their partner, lower than in 2015 (34%). Six percent (6%) reported they were living in jail or prison, 5% were staying in a hotel or motel, and 5% were staying in a subsidized housing or permanent supportive housing unit. Two percent (2%) of respondents reported they were in a hospital or treatment facility immediately prior to becoming homeless, 1% were in a juvenile justice facility, and 1% were in foster care.

Figure 30. HOW LONG HAVE YOU LIVED IN MONTEREY COUNTY?

Figure 31. LIVING ARRANGEMENTS IMMEDIATELY PRIOR TO BECOMING HOMELESS THIS TIME (TOP THREE RESPONSES IN 2017)
CURRENT LIVING ARRANGEMENTS

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

Over a third (39%) of survey respondents reported currently living outdoors, either on the streets, in parks, or in encampment areas. Twenty-four percent (24%) reported staying in a public shelter (emergency shelter, transitional housing facility, or an alternative shelter environment). Fourteen percent (14%) reported living in vehicles, while 13% reported that they were sleeping in public buildings, foyers, hallways, or other indoor locations not meant for human habitation, and 10% were in a hotel or motel.

Figure 32. USUAL PLACES TO SLEEP AT NIGHT

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Note: 2013 response option specified that motel/hotel was paid for by an ad agency.
PRIMARY CAUSE OF HOMELESSNESS

The primary cause of an individual’s inability to obtain or retain housing is difficult to pinpoint, as it is often the result of multiple and compounding causes.

Nearly one half (43%) of respondents reported financial issues as the primary cause of their homelessness. Thirty-eight percent (38%) reported drugs or alcohol, much higher than 23% reported in 2015. Twenty-four percent (24%) reported a fight or conflict was the primary cause of their homelessness, 20% reported divorce or separation, and 20% reported legal issues.

Figure 33. PRIMARY CAUSE OF HOMELESSNESS (TOP 5 RESPONSES IN 2017)

2011 n: 512 respondents offering 977 responses; 2013 n: 401 respondents offering 440 responses; 2015 n: 434 respondents offering 687 responses; 2017 n: 631 respondents offering 1,336 responses
Note: Legal Issue was added as a response option in 2017.
OBSTACLES TO OBTAINING PERMANENT HOUSING

Many individuals experiencing homelessness face significant barriers in obtaining permanent housing. These barriers can range from housing affordability and availability to accessing the economic and social supports (e.g., increased income, rental assistance, case management) needed to access and maintain permanent housing. An inability to find adequate housing can lead to an inability to address other basic needs, such as healthcare and adequate nutrition.

Respondents were asked what prevented them from obtaining housing. The majority (68%) reported that they could not afford rent. Over one half (55%) reported a lack of job or income, followed by 35% who reported that they had no money for moving costs, while 22% reported a lack of housing availability.

Figure 34. OBSTACLES TO OBTAINING PERMANENT HOUSING (TOP 5 RESPONSES IN 2017)

[Graph showing the percentage of respondents in 2011, 2013, 2015, and 2017 who faced various obstacles to obtaining housing.

2011 n: 495 respondents offering 1,138 responses; 2013 n: 392 respondents offering 892 responses; 2015 n: 430 respondents offering 1,021 responses; 2017 n: 628 respondents offering 1,806 responses
Note: Multiple response question. Percentages may not add up to 100.

HISTORY OF FOSTER CARE

It has been estimated that one in five former foster youth experience homelessness within four years of exiting the foster care system. 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 through programs often referred to as Transitional Housing Placement-Plus. It is hoped that these additional supports, implemented in 2012, will assist foster youth with the transition to independence and prevent them from becoming homeless.

In 2017, 13% of respondents reported a history of foster care, lower than in 2015 (16%). The percentage of youth under the age of 25 who had been in foster care was higher than adults over the age of 25; 18% compared to 12%.

Figure 35. HISTORY OF FOSTER CARE

[Bar chart showing the percentage of respondents who reported a history of foster care in 2017.

2017 n= 610

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SERVICES AND ASSISTANCE

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

GOVERNMENT ASSISTANCE

There are a variety of forms of governmental assistance available to individuals experiencing homelessness. However, knowledge of services available, understanding of eligibility requirements, and perceived stigma of receiving governmental assistance can all impact the rate at which eligible individuals access these supports.

Over half (52%) of respondents in 2017 reported they were receiving some form of government assistance.

Figure 36. PERCENT RECEIVING ANY FORM OF GOVERNMENT ASSISTANCE

![Pie chart showing the percentage of those receiving government assistance in 2015 and 2017.]

2015 n= 438; 2017 n= 642
Of those who reported they were not receiving any form of government support, the greatest percentage reported they did not think they were eligible (33%). Twenty-three percent (23%) indicated they had no identification, and 21% reported that a lack of permanent address was a barrier to receiving government assistance.

**Figure 37. REASONS FOR NOT RECEIVING GOVERNMENT ASSISTANCE**

<table>
<thead>
<tr>
<th>Reason</th>
<th>2011</th>
<th>2013</th>
<th>2015</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Don’t Think I’m Eligible</td>
<td>24%</td>
<td>31%</td>
<td>25%</td>
<td>33%</td>
</tr>
<tr>
<td>Have No Identification</td>
<td>31%</td>
<td>31%</td>
<td>11%</td>
<td>23%</td>
</tr>
<tr>
<td>No Permanent Address</td>
<td>0%</td>
<td>0%</td>
<td>18%</td>
<td>11%</td>
</tr>
<tr>
<td>Never Applied</td>
<td>26%</td>
<td>11%</td>
<td>13%</td>
<td>12%</td>
</tr>
<tr>
<td>Don’t Want Government Assistance*</td>
<td>13%</td>
<td>13%</td>
<td>11%</td>
<td>35%</td>
</tr>
</tbody>
</table>


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

"Response option changed in 2015 from “don’t need” to “don’t want.”

**SERVICES AND PROGRAMS**

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

Nearly half of respondents reported using meal services (46%). Fourteen (14%) percent of respondents reported utilizing mental health services, while one in five respondents reported using bus pass services.

**Figure 38. SERVICES OR ASSISTANCE (TOP FIVE RESPONSES IN 2017)**

<table>
<thead>
<tr>
<th>Service</th>
<th>2013</th>
<th>2015</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Free Meals</td>
<td>60%</td>
<td>62%</td>
<td>46%</td>
</tr>
<tr>
<td>Mental Health Services</td>
<td>9%</td>
<td>21%</td>
<td>14%</td>
</tr>
<tr>
<td>Bus Passes</td>
<td>10%</td>
<td>21%</td>
<td>20%</td>
</tr>
<tr>
<td>Shelter Day Services</td>
<td>34%</td>
<td>28%</td>
<td>18%</td>
</tr>
<tr>
<td>Transitional Housing</td>
<td>15%</td>
<td>23%</td>
<td>16%</td>
</tr>
</tbody>
</table>


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

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

The unemployment rate in Monterey County in January 2017 was at 11%, slightly down from 12% in 2015. It is important to recognize that the unemployment rate is not seasonally adjusted and 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 75%, a slight decrease from 87% in 2015. Forty-seven percent (47%) of unemployed respondents indicated that they were currently looking for work, 28% indicated they were currently unable to work, and a quarter (25%) of respondents were currently not looking for work. Over two thirds (72%) survey respondents had graduated high school, while 7% indicated they had a college degree. Nearly a third (28%) had not completed high school.

Income from all sources varied between those with regular employment and those who were unemployed. Nearly half (46%) of unemployed respondents reported an income of $99 or less per month, in comparison to 8% 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, 56% of employed respondents reported making $750 or more per month, while only 21% of unemployed respondents made the same amount per month.

---

**Figure 39. EMPLOYMENT AND MONTHLY INCOME**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$0-$99</td>
<td>8%</td>
<td>8%</td>
<td>35%</td>
<td>46%</td>
</tr>
<tr>
<td>$100-$449</td>
<td>6%</td>
<td>17%</td>
<td>32%</td>
<td>21%</td>
</tr>
<tr>
<td>$450-$749</td>
<td>28%</td>
<td>19%</td>
<td>19%</td>
<td>12%</td>
</tr>
<tr>
<td>$750-$1,099</td>
<td>17%</td>
<td>23%</td>
<td>10%</td>
<td>11%</td>
</tr>
<tr>
<td>$1,100-$1,499</td>
<td>22%</td>
<td>16%</td>
<td>3%</td>
<td>8%</td>
</tr>
<tr>
<td>$1,500-$3,000</td>
<td>17%</td>
<td>14%</td>
<td>%</td>
<td>2%</td>
</tr>
<tr>
<td>More than $3,000</td>
<td>3%</td>
<td>3%</td>
<td>0%</td>
<td>1%</td>
</tr>
</tbody>
</table>

2015 Employment status n = 326; Income employed n = 76, Income unemployed n = 118 2017 Employment status n = 593; Income employed n = 145, Income unemployed n = 441.


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

The average life expectancy for individuals experiencing homelessness is 25 years less than those in stable housing. Without regular access to healthcare and without safe and stable housing, individuals experience preventable illness and often endure longer hospitalizations. It is estimated that those experiencing homelessness stay four days (or 36%) longer per hospital admission than non-homeless patients.⁴

**CHRONIC HEALTH CONDITIONS**

More than half of respondents (61%) reported one or more health conditions. These conditions included chronic physical illness, physical disabilities, chronic substance use, and severe mental health conditions.

The most frequently reported health condition was drug or alcohol abuse (34%), followed by an emotional or mental health condition (20%), and then Post-Traumatic Stress Disorder (PTSD) (18%). Fourteen percent (14%) reported a chronic health problem, 8% a traumatic brain injury, and 2% reported having an AIDS or HIV related illness.

**Figure 40. HEALTH CONDITIONS**

<table>
<thead>
<tr>
<th>Condition</th>
<th>2013</th>
<th>2015</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug or Alcohol Abuse</td>
<td>16%</td>
<td>29%</td>
<td>34%</td>
</tr>
<tr>
<td>Other emotional or mental health conditions</td>
<td>16%</td>
<td>12%</td>
<td></td>
</tr>
<tr>
<td>Physical Disability</td>
<td></td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>Post-Traumatic Stress Disorder (PTSD)</td>
<td>23%</td>
<td>17%</td>
<td>18%</td>
</tr>
<tr>
<td>Chronic Health Problems</td>
<td>14%</td>
<td>19%</td>
<td>14%</td>
</tr>
<tr>
<td>Traumatic Brain Injury</td>
<td>13%</td>
<td>8%</td>
<td>8%</td>
</tr>
<tr>
<td>AIDS/HIV Related</td>
<td>&lt;1%</td>
<td>1%</td>
<td>2%</td>
</tr>
</tbody>
</table>

Note: Multiple response question. Percentages may not add up to 100.
Note: Other emotional or mental health conditions was added as a response option in 2017.

DOMESTIC/PARTNER VIOLENCE OR ABUSE

Histories of domestic violence and partner abuse are prevalent among individuals experiencing homelessness, and can be a primary cause of homelessness for many. Survivors often lack many of the financial resources required for housing due to a limited employment history or dependable income. Five percent (5%) of all survey respondents reported they were currently experiencing domestic/partner violence or abuse, a decrease from 9% in 2015. When asked about experiences throughout their lifetime, 19% reported domestic/partner violence or abuse.

Domestic violence varied by gender with 9% of female respondents reporting current experiences of domestic violence, compared to 3% of male respondents. Looking at domestic violence across the lifetime, 33% of female and 10% of male respondents reported previous experiences of domestic violence.

Figure 41. HISTORY OF DOMESTIC VIOLENCE

<table>
<thead>
<tr>
<th>19% Yes</th>
<th>75% No</th>
<th>6% Decline to State</th>
</tr>
</thead>
</table>

2017 n= 636
CRIMINAL JUSTICE SYSTEM

Homelessness and incarceration are often correlative. Individuals without stable housing coupled with food instability are at greater risk of criminal justice system involvement, particularly those with mental health issues, veterans, and youth. Individuals with past incarceration face significant barriers to exiting homelessness due to stigmatization and policies that affect both their ability to gain employment and their access to housing opportunities.⁵

INCARCERATION

When asked if they had spent a night in jail or prison in the last 12 months, one fifth (22%) of respondents experiencing homelessness reported that they had, similar to 2015 (23%). Fifteen percent (15%) of respondents reported that they were on probation or parole at the time of the survey. Similarly, 14% of respondents were on probation or parole at the time they became homeless.

Figure 42. SPENT A NIGHT IN JAIL OR PRISON IN THE LAST 12 MONTHS

2015 n= 429; 2017 n=629

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 identifies four subpopulations with particular challenges or needs. Consequently, these subpopulations represent important reportable indicators for measuring local progress toward ending homelessness.

The following sections examine each of these four subpopulations, identifying the number and characteristics of individuals included in the 2017 Monterey County Homeless Point-in-Time Count and Survey.

Of the 654 surveys completed in 2017, the results represent 142 chronically homeless individuals, 45 homeless veterans, 70 individuals in homeless families, 87 unaccompanied children and transition-age-youth. Surveys were completed in unsheltered environments and transitional housing settings.
CHRONICALLY HOMELESS INDIVIDUALS

The Department of Housing and Urban Development 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 disability that prevents them from maintaining work or housing. This definition applies to individuals as well as heads of household who meet the definition.

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

The U.S. Department of Housing and Urban Development reported that roughly 22% of the national homeless population, or 77,486 individuals, was chronically homeless in 2016. Chronic homelessness has been on the decline in recent years, as communities across the country increase the capacity of their permanent supportive housing programs and prioritize those with the greatest barriers to housing stability. While the national decrease in chronic homelessness seems promising, federal budget constraints limit the amount of money available to support housing programs and services. As a result, Opening Doors, which began with a plan to end chronic homelessness by 2016, has extended the goal to 2017.


**DEMOGRAPHICS OF CHRONICALLY HOMELESS SURVEY RESPONDENTS**

The majority of chronically homeless individuals were male (69%), higher than the non-chronically homeless population (59%). A similar percentage of chronically homeless respondents identified as Hispanic or Latino compared to non-chronically homeless respondents (47% and 48%, respectively). Five percent (5%) of chronically homeless respondents identified as veterans.

**Figure 43. RACE AMONG PERSONS EXPERIENCING CHRONIC HOMELESSNESS**

Chronic Survey Population n = 140


Note: Percentages may not add up to 100 due to rounding.
**Primary Cause of Homelessness Among Those Experiencing Chronic Homelessness**

Over half (58%) of chronically homeless survey respondents identified alcohol or drug use as the primary cause of their homelessness; this was an increase compared to 32% in 2015. Nearly a quarter (23%) of chronically homeless respondents reported mental health issues as a primary cause compared to 12% of non-chronically homeless respondents respectively.

While chronically homeless respondents reported some similarities in the initial cause of their homelessness compared to non-chronic respondents, alcohol or drug use was a much more common cause of homelessness among chronic respondents compared to non-chronic respondents.

![Figure 44. Primary Cause of Homelessness, Chronic and Non-Chronic Comparison (Top 5 Chronic Responses)](image)

Chronic Survey Population n = 143; Non-Chronic Survey Population = 488
Note: Multiple response question. Percentages may not add up to 100.

**Health Conditions Among Those Experiencing Chronic Homelessness**

The definition of chronic homelessness requires a condition that prevents an individual from maintaining work or housing, and many respondents reported experiencing multiple physical or mental health conditions. Sixty-seven percent (67%) of chronically homeless survey respondents reported alcohol or substance use. Twenty-nine percent (29%) reported an emotional or mental health disability. Twenty-two percent (22%) reported Post-Traumatic Stress Disorder (PTSD).

In general, higher rates of health conditions were reported for those who were chronically homeless compared to their non-chronically homeless counterparts.

![Figure 45. Health Conditions, Chronic and Non-Chronic Comparison](image)

Chronic Survey Population n = 143; Non-Chronic Survey Population = 511
Note: Multiple response question. Percentages may not add up to 100.
HOMELESS VETERAN STATUS

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

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

Between 2009 and 2016, there has been a 48% decrease in the number of homeless veterans across the nation. According to data collected during the national 2016 Point-in-Time Count, 39,471 veterans experienced homelessness across the country on a single night in January 2016.9

DEMOGRAPHICS OF HOMELESS VETERANS

Eighty percent (80%) of veteran survey respondents identified as male, 16% female, and 4% transgender. Thirty-two percent (32%) of veterans identified as Hispanic or Latino, less than the non-veteran respondents (49%). Sixty percent (60%) of veterans reported their racial identity as white and 10% as Black or African American.

Figure 46. RACE AMONG VETERANS

![Pie chart showing race distribution among veterans]

Veteran n = 42


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 PRIMARY CAUSE OF HOMELESSNESS AMONG VETERANS EXPERIENCING HOMELESSNESS

The most frequently cited cause of homelessness among veterans was alcohol or drug use, representing 36% of the veteran population. Thirty-one percent (31%) reported financial issues as the primary cause of their homelessness, while 28% reported mental health issues, and 25% reported incarceration.

Figure 47. PRIMARY CAUSE OF HOMELESSNESS, VETERAN AND NON-VETERAN COMPARISON

![Graph showing primary causes of homelessness among veterans and non-veterans]

Veteran Survey Population n = 36; Non-Veteran Survey Population = 595
Note: Multiple response question. Percentages may not add up to 100.

DISABLING CONDITIONS AMONG VETERANS EXPERIENCING HOMELESSNESS

A slightly higher percentage of veteran respondents reported having one or more disabling conditions, 38% compared to 37% of non-veterans. Disabling conditions among veteran survey respondents has decreased from 71% in 2015 to 38% in 2017.

Figure 48. DISABLING CONDITIONS AMONG HOMELESS VETERANS, VETERAN AND NON-VETERAN COMPARISON

![Graph showing disabling conditions among homeless veterans and non-veterans]

Veteran Survey Population n: 45; Non-Veteran Survey Population: 609
ACCESS TO SERVICES AMONG VETERANS EXPERIENCING HOMELESSNESS

Overall, the number of veterans connected to any form of government assistance was higher than the non-veteran population, 66% compared to 51%.

When asked about the specific services they are receiving, the most frequent responses were free meal services (53%), bus passes (28%), and transitional housing services (22%).

Figure 50. ACCESS TO SERVICES, VETERAN AND NON-VETERAN COMPARISON

Veteran Survey Population n = 36; Non-Veteran Survey Population n = 578

Veteran Survey Population n = 45; Non-Veteran Survey Population n = 609
Note: Multiple response question. Percentages may not add up to 100.
INCARCERATION AMONG VETERANS EXPERIENCING HOMELESSNESS

Among those who are incarcerated, veterans are more likely than non-veterans to be first time offenders, to have committed a violent offense, and to have longer prison sentences. Veterans who are incarcerated may also face the loss of various VA benefits during this time.¹⁰

A higher percentage of veterans (40%) reported having spent a night in jail in the last 12 months when compared to non-veterans (21%).

Figure 51. A NIGHT SPENT IN JAIL OR PRISON IN THE LAST 12 MONTHS, VETERAN AND NON-VETERAN COMPARISON

Veteran Survey Population n = 35; Non-Veteran Survey Population n = 594

FAMILIES WITH CHILDREN EXPERIENCING HOMELESSNESS

National data from 2016 suggest that 35% of all people experiencing homelessness are persons in families. Very few families experiencing homelessness are unsheltered, as public shelters serve 90% of homeless families in the United States; this is a significantly higher proportion of the population compared to other subpopulations, including unaccompanied children and transition-age-youth. Data on families experiencing homelessness suggest that they are not much different from families in poverty.

The risk of homelessness is highest among households headed by single women and families with children under the age of six. 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.

DEMOGRAPHIC CHARACTERISTICS AMONG HOMELESS FAMILIES WITH CHILDREN

A small number of individuals in homeless families with children participated in the Monterey County Survey, a total of 70 respondents. Eighty-four percent (84%) of survey respondents in families were female, higher than survey respondents not in families (31%). Fifty-four percent (54%) of those surveyed in families identified as Hispanic or Latino, slightly higher than those not in families (47%).

PRIMARY CAUSE OF HOMELESSNESS AMONG HOMELESS FAMILIES WITH CHILDREN

Fifty-one percent (51%) of individuals in families with children reported having experienced domestic violence, and 6% reported they were currently experiencing domestic violence at the time of the survey. Fourteen percent (14%) reported physical, emotional or sexual abuse as the primary cause of their homelessness. The most frequently reported cause was financial issues (57%), followed by alcohol or drug use (36%) and fight or conflict (23%).

Figure 52. PRIMARY CAUSE OF HOMELESSNESS, FAMILIES WITH CHILDREN AND NON-FAMILIES WITH CHILDREN COMPARISON

Individuals in Families with Children Survey Population n: 70; Non-Families with Children Survey Population n: 581
Note: Multiple response question. Percentages may not add up to 100.


13Caution should be used when interpreting these data due to small number of surveys conducted with homeless individuals in families with children
HEALTH CONDITIONS AMONG HOMELESS FAMILIES WITH CHILDREN

Among homeless families with children, Post-Traumatic Stress Disorder (PTSD) was the most frequent (40%) health condition cited. Although fewer homeless families indicated drug or alcohol abuse, homeless families were more likely to indicate chronic health problems as well as traumatic brain injuries.

Figure 53. HEALTH CONDITIONS, FAMILIES WITH CHILDREN AND NON-FAMILIES WITH CHILDREN COMPARISON

Families with Children Survey Population n: 70; Non-Families with Children Survey Population: 584
Note: Multiple response question. Percentages may not add up to 100.
UNACCOMPANIED HOMELESS CHILDREN AND TRANSITION-AGE-YOUTH

Due to the often hidden nature of youth homelessness, there are limited data available on unaccompanied children and transition-age-youth experiencing homelessness. Although largely considered an undercount, current federal estimates suggest there are 35,686 unaccompanied children and transition-age-youth on the streets and in public shelters across the country. According to the National Association for the Education of Homeless Children and Youth, there may be somewhere between 1.6 to 1.7 million experiencing some form of homelessness. Some young people experiencing homelessness have a harder time accessing services, including shelter, medical care, and employment due to the stigma of their housing situation, lack of knowledge of available resources, and a dearth of services targeted to young people.

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

According to National Network 4 Youth, half of all unaccompanied youth report mental health problems. Rates of depression, conduct disorder, and PTSD are three times as high among runaway youth as the general youth population. And suicide is the leading cause of death among street youth. Additionally, 40-50% report drug problems. Trauma and rape rates are 2-3 times higher than the general youth population. While homeless youth engage in crime as part of their survival strategy (prostitution, drug sales, forced entrance into a residence, etc.), research shows they are more likely to be the victims of crime rather than the perpetrators. Over 1/3 report exchanging sex for food, shelter or drugs. Finally, unaccompanied youth face barriers to education and employment which affects their future ability to live independently.

Monterey County implemented a dedicated youth count and survey in 2013 to improve data on unaccompanied children and youth. These efforts were replicated, with minor improvements, in 2015 and 2017. The following section provides an overview of the findings on unaccompanied children and youth identified in Monterey’s general point-in-time count, as well as in the specific youth count.

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DEMOGRAPHIC CHARACTERISTICS AMONG UNACCOMPANIED CHILDREN AND TRANSITION-AGE-YOUTH

Over two-thirds (69%) of the population of youth respondents under the age of 25 identified as male, more than the general population (60%). Three percent (3%) indicated that they do not identify as male, female, or transgender. Twenty-three (23%) of youth respondents identified as LGBTQ, higher than the adult population (15%).

Forty-nine percent (49%) of youth respondents reported they were Hispanic or Latino, similar to 47% of respondents 25 years and over. The highest reported race for youth respondents was white (65%), followed by black or African American (6%).

Figure 54. RACE AMONG UNACCOMPANIED CHILDREN AND TRANSITION-AGE-YOUTH

Under 25 n = 82


Note: Percentages may not add up to 100 due to rounding.
**Primary Cause of Homelessness Among Unaccompanied Homeless Children and Transition-Age Youths**

Homeless youth survey respondents reported some differences in cause of homelessness compared to respondents 25 years or older. Unaccompanied homeless children and transition age youth were much more likely to cite fight or conflict, legal issues, or gang violence as a cause of their homelessness.

![Figure 55: Primary Cause of Homelessness, Unaccompanied Children and Transition-Age Youth and Non-Unaccompanied Children and Transition-Age Youth Comparison](image)

Unaccompanied Children and Transition-Age Youth Survey Population \( n = 87 \); Non-Unaccompanied Children and Transition-Age Youth Survey Population \( n = 564 \)


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

**Health and Social Barriers Among Unaccompanied Homeless Children and Transition-Age Youths**

Though better than the general homeless population, health is still an issue for homeless youth. Homeless youth were more likely to indicate drug or alcohol use, but they were far less likely to report experiencing physical disability and chronic health problems.

![Figure 56: Health Conditions, Unaccompanied Children and Transition-Age Youth and Non-Unaccompanied Children and Transition-Age Youth Comparison](image)

Unaccompanied Children and Transition-Age Youth Survey Population \( n = 87 \); Non-Unaccompanied Children and Transition-Age Youth Survey Population \( n = 567 \)


Note: Multiple response question. Percentages may not add up to 100.
INSTITUTIONAL INVOLVEMENT AMONG UNACCOMPANIED CHILDREN AND TRANSITION-AGE-YOUTH

About one in five (18%) of youth respondents reported they had been in the foster care system, and 5% of all youth respondents indicated that aging out of foster care as the primary cause of their homelessness. Thirty-six percent (36%) of youth respondents indicated they spent a night in jail in the past year, compared to 20% of adult responses. Additionally, more youth (21%) were currently on probation or parole when compared to adult responses (15%).
Conclusion

Between 2015 and 2017 Monterey County and its provider partners have made significant investments and reforms to meet the needs of people experiencing homelessness, moving more people off of the streets and into housing.

The survey component continues to provide a valuable insight into the experiences of individuals experiencing homelessness throughout Monterey County. For example, in Monterey County, a disproportionate number of Black or African Americans experience homelessness. For many, the experience of homelessness is part of a long and recurring history of housing instability, exemplified by the fact that 65% of survey respondents indicated that they had previously experienced homelessness. Knowing where individuals were living before they most recently lost their housing informs discussions regarding how local the homeless population is to the region. This information can also influence changes to available support systems if the Continuum of Care finds increasing numbers of individuals living locally before experiencing homelessness, demonstrated by the 83% of survey respondents who reported living in Monterey County prior to becoming homeless. Among survey respondents, over a third (39%) of survey respondents reported currently living outdoors: either on the streets, in parks, or in encampment areas. Although pinpointing a single cause of homelessness can be difficult, financial issues and alcohol and drug use continue to be key contributing factors of homelessness in Monterey County. Many individuals experiencing homelessness face significant barriers in obtaining permanent housing. Financial obstacles (cost of rent, no income, no money for moving costs, and lack of transportation) continue to be barriers limiting individuals from obtaining housing.

There have been a number of accomplishments and improvements from 2015. The data in the 2017 Monterey County Homeless Censuses and Survey can help educate the public, service providers, and policy makers on how to best serve the homeless population and help ensure that homelessness is a rare, brief, and one-time event. Study after study shows that prevention, Housing First initiatives and supportive services are the first steps in ending homelessness, and Monterey County is working diligently to develop these systems of change. In the interim, there is a lot of work to be done to address the immediate needs of the 2,107 persons who are unsheltered and in need of assistance.
Appendix 1: Methodology

OVERVIEW
The purpose of the 2017 Monterey County Homeless Point-in-Time Census and Survey is to produce a point-in-time estimate of people who experience homelessness in Monterey County, a region that covers approximately 3,771 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 Monterey County on any given night. The subsequent survey was used to gain a more comprehensive understanding of the experiences and demographics of those enumerated on the night of the count. A more detailed description of the methodology follows.

COMPONENTS OF THE HOMELESS CENSUS METHOD
The Point-in-Time Census methodology had three primary components:

1. The general street count between the hours of 5:30am to 11:00am on January 25th – an enumeration of unsheltered homeless individuals
2. The youth street count between the hours of 4 pm and 9 pm – a targeted enumeration of unsheltered youth under the age of 25
3. The shelter count for the night of the street count – an enumeration of sheltered homeless individuals staying in emergency shelter or transitional housing programs

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
Beginning in November, regular meetings were held to prepare for the census. These meetings were hosted by the Coalition of Homeless Service Providers and were attended by a mix of county officials, local service providers, shelter staff, youth outreach teams, and others. Additional, separate meetings were held with youth shelter and program staff and, separately, veteran program staff in order to address specific concerns in counting these populations. These meetings focused on a variety of issues related to the planning process and were focused on a variety of issues, including logistics surrounding the count, volunteer and guide recruitment, outreach to subpopulations, strategies for covering geographic areas, and many more. During this process, valuable feedback and input was gathered from the community and incorporated into the planning process and count preparation.
Appendix 1: Methodology

STREET COUNT METHODOLOGY

DEFINITION

For the purposes of this study, the HUD definition of unsheltered homelessness for Point-in-Time Census is used. This definition includes individuals and families with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground. For unaccompanied children and transition-age-youth, the definition does not include couch surfing, a common sleeping accommodation in that age range.

METHODOLOGICAL IMPROVEMENTS

ASR has been working with the county of Monterey since 2005, so the count has a very established and mature methodology that is mostly unchanged on a cycle-to-cycle basis. However, there were a few methodological improvements made in Monterey County in 2017. First and foremost among those were a series of focus groups held with individuals experiencing homelessness in the county. These were designed to gather “hot spot” information – locations in the county that were known as common destinations for the population experiencing homelessness. Indicators were then placed on census tract maps, letting teams know that these areas had been designated as “hot spots.” Small improvements included an earlier start time, increased youth participation, and veteran outreach.

VOLUNTEER AND GUIDE RECRUITMENT AND TRAINING

Many individuals who live and/or work in Monterey County turned out to support the effort to enumerate the local population experiencing homelessness. More than 80 community volunteers and City and County staff registered to participate in the 2017 general street count. The volunteer recruitment effort was led by the Coalition of Homeless Services Providers (CHSP) and was greatly aided by numerous shelters and day programs from throughout the county. Extensive outreach efforts were conducted, targeting local non-profits that serve the homeless and local volunteer programs, as well as other individuals who may be interested in participating in the count.

Volunteers registered to participate, and received additional details on the count via CHSP staff.

To recruit guides, shelters and day programs from throughout the county were asked to identify individuals experiencing homelessness with considerable knowledge of where to find individuals experiencing homelessness on the street, how to find encampments, how to identify if vehicles were being used as sleeping locations, and how to identify situations where safety was a concern. Additionally, shelter and program staffs were asked to recommend guides who were reliable and interested in the process. All guides were paid for their time, earning $15 per hour worked, including a mandatory one hour training that was held in the days before the count.

SAFETY PRECAUTIONS

Safety is of the upmost importance during the count, and every effort was made to minimize potentially hazardous situations. Information regarding potentially dangerous encampment areas or other locations was shared when appropriate. Techniques for avoiding potentially
dangerous situations were shared. The observational nature of the count was emphasized and has been found to be highly successful in minimizing potentially dangerous situations in the past. Volunteers were given guidance on how to act when canvassing encampment areas as well as how to respect a population that was likely to be sleeping. Additionally, the knowledge and experience of guides are valuable for safety reasons and volunteers and teams are encouraged to listen to their guide when they give suggestions regarding safety.

**STREET COUNT DEPLOYMENT CENTERS**

For convenience, two locations were picked to act as deployment centers on the morning of the count: one in Salinas and one in Seaside. Volunteers and guides were assigned to either one of these locations based on preference and expected demand. There were 4 staff at each deployment, two from ASR and two from CHSP. Staff helped to assemble teams, assign tracts, and manage the check-in once teams returned.

**STREET COUNT TEAMS**

Teams are generally comprised of 2 individuals, one volunteer from the community and one guide, generally an individual who is currently experiencing homelessness. Each team is assigned 1-4 census tracts as their assignment, depending on the size of the tracts. They are responsible for covering all areas that are accessible by the public, including parks, streets, business fronts, and wherever the guide believes there may be individuals experiencing homelessness. Teams are encouraged to have their community volunteer drive their vehicle, while the guide acts as a navigator and enumerator during the process. All teams are given a brief refresher training before heading out into the field.

**DATA LIMITATIONS**

While efforts were made by the Monterey County Office of Education to include data on homeless children in schools, time constraints and resources limited these efforts to the Salinas area.

In the days before the count, there were significant weather impacts throughout the region. While anecdotal reports indicate that this had an impact on enumeration efforts, the true extent of that impact is unknowable.

**YOUTH STREET COUNT METHODOLOGY**

**GOAL**

The goal of the 2017 dedicated youth count was similar to that of past youth counts in 2013 and 2015, to be more inclusive of children and youth under the age of 25 experiencing homelessness. Many of these 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.

HUD has announced that the youth count in 2017 will be the “baseline” for future years, serving as a barometer to gauge the effectiveness of future efforts to end homelessness amongst children and youth. Recognizing that youth have been underrepresented in the past and need special outreach, ASR worked with Monterey County to develop a localized strategy to better include unaccompanied children and youth under 25 in the count. Just as in past
years, the goal was to improve upon the process, not just replicate what was done in past years.

**RESEARCH DESIGN**

As in 2013 and 2015, planning for the 2017 supplemental youth count included many youth homeless service providers. Local providers worked with ASR staff to conduct focus groups to identify “hot spot” locations where homeless youth were known to congregate. Service providers in Salinas and Monterey County were asked to recruit currently homeless youth to participate in the count. Rancho Cielo and Safe Place recruited more than 20 youth to work as peer enumerators, counting homeless youth in the identified areas of Monterey County on January 25, 2017. Youth workers were paid $15 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 comingle with homeless adults and are not easily identified by non-youth. Because of this difficulty, 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 4 PM to 9 PM on January 25, 2017. Youth worked in teams of two to four people, with teams coordinated and overseen by youth street outreach workers.

**SHELTER COUNT METHODOLOGY**

**GOAL**

The goal of the shelter count was to gain an accurate count of the number of homeless persons who were being temporarily housed in shelters across Monterey County.

**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**

Data was collected from shelters on the night of January 24th. The Coalition of Homeless Service Providers used the HMIS data management system to gather data on shelters in Monterey County. HMIS provides data on all individuals staying in shelters, including household status, age, gender, and race and ethnicity.
SURVEY METHODOLOGY

PLANNING AND IMPLEMENTATION

The survey of 654 homeless persons was conducted in order to yield qualitative data about the homeless community in Monterey County. These data are used for the McKinney-Vento Continuum of Care Homeless Assistance funding application and are important for future program development and planning. The survey elicited information such as gender, family status, military service, 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 shelter staff, who were trained by Applied Survey Research. 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 $7 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 2017 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 2017 Monterey County Survey was administered by the trained survey team between February 6th and March 10th. In all, the survey team collected 654 surveys.

SURVEY SAMPLING

The planning team recommended approximately 600 surveys for 2017. Based on a Point-in-Time estimate of 2,831 homeless persons, with a randomized survey sampling process, the 654 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 Monterey County.

The 2017 survey 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. Like past surveys, the 2017 survey also prioritized a peer-to-peer approach to data collection by increasing the number of currently homeless surveyors.
Appendix 1: Methodology

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 2017 Monterey County 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.
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 or family member 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 (for a cumulative total of 12 months or more).”

- **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. A health condition has an impact on housing stability or employment.

- **Emergency shelter** is the provision of a safe alternative to the streets in a shelter facility. Emergency shelter is short-term, usually for 180 days or fewer. Domestic violence shelters are typically considered a type of emergency shelter, as they provide safe, immediate housing for 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, age 18 and over.

- **Transition-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** 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.