

Riverside County 2014 Homeless Veterans Count and Survey



March 2014

Acknowledgements

The County of Riverside and the V.A.L.O.R. Task Force wishes to thank all of the individuals and organizations that contributed to the preparation, implementation and success of the V.A.L.O.R. 2014 Point-In-Time (PIT) Enumeration of Homeless Veterans. Such an endeavor would not have been possible without the collaboration and efforts of more than three dozen veterans' service and support organizations, faith- and community-based organizations, county departments, city governments, homeless service providers, law enforcement personnel and elected officials. Your hard work, time and dedication to ending homelessness among veterans in Riverside County are greatly appreciated.

Special Thanks

- Special thanks to the Riverside County Board of Supervisors and their staff for their support and assistance with planning, organizing and implementing the 2014 PIT Enumeration of Homeless Veterans.
- Special thanks to representatives of the following V.A.L.O.R. Initiative partner organizations that participated in regular project planning, organizing and implementation meetings of the 2014 PIT Homeless Veterans Count Planning Group:

County of Riverside Dept. of Public Social Services Homeless Programs Unit
County of Riverside Dept. of Mental Health HHOPE Homeless Outreach
County of Riverside Dept. of Veterans' Services
City of Riverside Development Dept. and Homeless Outreach Team
Housing Authority of the County of Riverside
Lighthouse Social Service Centers
Office of Supervisor Kevin Jeffries, District 1
Office of Supervisor John Tavaglione, District 2
Office of Supervisor Jeff Stone, District 3
Office of Supervisor John J. Benoit, District 4
Office of Supervisor Marion Ashley, District 5
United States Veterans Initiative, Inc. 'US Vets'
VA Loma Linda Homeless Outreach and HUD-VASH Team

- Special thanks to the more than 150 agency and program staff and community volunteers from all across Riverside County who canvassed areas identified as "green count zones" the morning of January 29th to implement the homeless veterans count and subpopulation survey.
- Special thanks to the following local government and municipal agencies that contributed staff time, resources, and office space for planning, training and deployment activities to help make the 2014 PIT Enumeration of Homeless Veterans a success:

City of Beaumont/Beaumont PD	City of Palm Springs
City of Blythe	City of Perris
City of Coachella	City of Rancho Mirage
City of Eastvale	City of Riverside
City of Hemet / Hemet PD	City of Temecula
City of Indio / Indio PD	City of Wildomar
City of Jurupa Valley	County Dept. of Public Social Services
City of La Quinta	County Dept. of Mental Health
City of Lake Elsinore	County Dept. of Veterans' Services
City of Menifee	Housing Authority-County of Riverside
City of Moreno Valley	Coachella Valley Association of Govts
City of Murrieta / Murrieta PD	Lake Elsinore Unified School District
City of Palm Desert	Riv. County Information & Technology

- Special thanks to the following community agencies and organizations that contributed staff time, resources, and office space for planning, training and deployment activities to help make the 2014 Point-In-Time Enumeration of Homeless Veterans a success:

ABC Recovery Center, Indio
 Animal Friends of the Valley, Wildomar
 Arlington Temporary Assistance
 Blythe Harmony Kitchen
 Coachella Valley Rescue Mission
 Community Connect '211'
 County of Riverside Information Technology 'RCIT'
 Family Services Association - James A. Venable Center
 Hemet Public Library
 HOPE Pantry-Lake Elsinore
 Indio Police Department
 Lake Elsinore School District
 March Air Reserve Base
 Martha's Village & Kitchen
 Menifee Valley Community Pantry
 Murrieta Public Library
 Murrieta Police Department
 Second Harvest Food Bank
 The Salvation Army, Hemet
 Veterans' Services

- Special thanks to the staff of the County of Riverside Department of Public Social Services Homeless Programs Unit whose tireless effort to organize and coordinate all of the planning and implementation activities made the 2014 PIT Enumeration of Homeless Veterans a success:

Susan von Zabern, Director
Anna Martinez, Assistant Director, Self-Sufficiency Division
Jill Kowalski, Homeless Programs Unit Administrative Manager
Elizabeth Calanche, Administrative Services Analyst II
Tiffany Nelson, Office Assistant II
Ryoko Yamasaki, HMIS Administrative Services Analyst II
Jennifer Rosales, HMIS Office Assistant III

- Special thanks to our research consultants, the Institute for Urban Initiatives, for their expertise and guidance through the entire Point-In-Time Count and Subpopulation Survey process, including methodology development and implementation, planning coordination and guidance, and production of the final report.

Joe Colletti, PhD, Executive Director
Don Smith, Project Director
Sofia Herrera, PhD, Research Director
Thelma Herrera, Graphic Designer

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I. Executive Summary

The total number of veterans who were counted in the Riverside County 2014 Homeless Veterans Count is 290—173 were unsheltered and 117 were sheltered. The following table compares the number of veterans counted in 2014 to the number of veterans counted as part of the 2013 homeless count.

Table 1. Total Number of Veterans

Location:	2014		2013	
	#	%	#	%
Unsheltered	173	60	181	64
Sheltered: Emergency Shelter	36	12	27	9
Sheltered: Transitional Housing	81	28	77	27
Total:	290	100	285	100

A. Findings

1. Findings for Unsheltered Veterans

As noted in the table above, there were 173 unsheltered veterans in 2014 compared to 181 in 2013 which represents a slight decrease—8 veterans or 4%. For a comparison of the number of veterans counted in 2014 to the number counted in 2013 by city, see Appendix A.

Findings include a breakdown of the 173 unsheltered veterans by subpopulations required by the U.S. Department of Housing and Urban Development (HUD) and other subpopulations not required. Data was collected through the homeless count and subpopulation survey.

Table 2. Breakdown of Unsheltered Veterans by Subpopulations

Subpopulation:	#	%
HUD-Required:		
Chronically Homeless Individuals*	98	57
Chronically Homeless Families	0	0
Persons with HIV/AIDS*	10	6
Persons with Mental Health Problems*	48	28
Persons with Drug or Alcohol Problems*	67	39
Victims of Domestic Violence*	28	16
Women	15	9

Youth Ages 18 – 24*	0	0
Non-HUD Required:		
Men	158	91
Persons with Chronic Health Conditions*	78	45
Persons with Developmental Disabilities	21	12
Persons with Physical Disabilities	68	39
Persons released from Correctional Institutions*	38	22

*see Appendix B – I for a breakdown for each of these subpopulations by the data that was collected through the homeless count and subpopulation survey

2. Findings for Sheltered Veterans

Findings include a breakdown of the 117 sheltered veterans by subpopulations required by HUD and other subpopulations not required. Data was collected through the Homeless Management Information System (HMIS).

Table 3. Breakdown of Sheltered Veterans by Subpopulations

Subpopulation:	#	%
HUD-Required:		
Chronically Homeless Individuals	0	0
Chronically Homeless Families	0	0
Persons with HIV/AIDS	2	1
Persons with Mental Health Problems	9	8
Persons with Drug or Alcohol Problems	12	10
Victims of Domestic Violence	3	3
Women	4	3
Youth Ages 18 - 24	2	1
Non-HUD Required:		
Men	113	97
Persons with Chronic Health Conditions	0	0
Persons with Developmental Disabilities	0	0
Persons with Physical Disabilities	0	0
Persons released from Correctional Institutions	<i>This information is not collected in HMIS</i>	

B. Recommendations

Ending homelessness among Veterans by the end of 2015 is a national priority. Therefore, the recommendations in this report focus on ending homelessness among Veterans in Riverside County during the next two years.

Ending homelessness among veterans by 2015 became a national priority after Secretary of Veterans Affairs Eric K. Shinseki unveiled the department’s comprehensive plan to end homelessness among veterans in five years at the National Summit on Ending Veterans Homelessness in November 2009. The following year, the U.S. Interagency Council on Homelessness (USICH) released *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (Opening Doors)*, listed preventing and ending homelessness among veterans in five years as a primary goal. The approach to prevent and end homelessness in *Opening Doors* includes focusing on several subpopulations that helps stakeholders in jurisdictions such as Riverside County realize that the task of preventing and ending homelessness is possible.

The following recommendations focus on various subpopulations of veterans.

Recommendation #1: Prevent and End Homelessness among Unsheltered Women Veterans

Of the 173 unsheltered veterans, 15 or 9% were women. The following table provides a breakdown of the subpopulation data that was collected for all veterans separating out women and men. The comparative data by gender reveals that a high percentage of men among veterans have several circumstances and impediments that likely contributed, and continue to contribute, to their state of homelessness. The comparison, however, reveals that a greater percentage of women among veterans have several circumstances and barriers that likely contributed, and continue to contribute, to their state of homelessness. Such circumstances and barriers include mental health and drug and alcohol problems, physical and developmental disabilities, domestic violence history, and chronic homelessness and health conditions.

Table 4. Comparison of Unsheltered Women and Men

Subpopulations:	Women		Men	
	#	%	#	%
HUD-Required:				
Chronically Homeless Individuals	12	80	86	54
Chronically Homeless Families				
Persons with HIV/AIDS	2	13	8	5
Persons with Mental Health Problems	5	33	43	27
Persons with Drug or Alcohol Problems	7	47	60	38
Victims of Domestic Violence	10	67	18	11
Youth Ages 18 - 24	0	0	0	0
Non-HUD Required:				
Persons with Chronic Health Conditions	8	53	70	44
Persons with Developmental Disabilities	6	40	15	10
Persons with Physical Disabilities	6	40	62	39
Persons released from Correctional Institutions	6	40	32	20

Also, of the 15 women who were veterans, 11 or nearly three-fourths (73%) were located in the cities of Palm Springs and Riverside.

Action Steps

In order to prevent and end homelessness among veterans who are women, the following actions should be taken

- a. A meeting that includes veteran housing and service providers and other housing and service providers that focus on women should be initiated for the purposes of developing a specific plan to prevent and end homelessness among women who are veterans;
- b. The plan should include targeted street outreach to women who are veterans and
 - a housing first approach for women veterans who are chronically homeless;
 - a rapid re-housing approach for women veterans who are not chronically homeless;
 - a concentrated effort within the cities of Palm Springs and Riverside.
- c. Set a benchmark of no women veterans living on the streets in three years in order to align with the national priority to end homelessness among veterans;
- d. Develop a plan to end homelessness for any women veteran who becomes homeless within 30 days in order to align with the national priority within the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) which was signed into law in May, 2009;
- e. Make the creation, development, and implementation of the plan known to all public and private stakeholders throughout the County.

Recommendation #2: Prevent and End Homelessness among Unsheltered Senior Veterans

Of the 173 unsheltered veterans, 39 or 23% were seniors, age 62 and over. The following table provides a breakdown of the subpopulation data that was collected for all veterans separating out seniors as compared to the total population. The comparative data reveals that a high percentage of veterans have several circumstances and impediments that likely contributed, and continue to contribute, to their state of homelessness. The comparison, however, reveals that a smaller percentage of seniors among veterans have several circumstances and barriers that likely contributed, and continue to contribute, to their state of homelessness. Lessor circumstances and barriers include mental health and drug and alcohol problems, physical disabilities, domestic violence history, and chronic homelessness and health conditions.

Table 5. Comparison of Unsheltered Seniors and All Unsheltered Veterans

Subpopulations:	Unsheltered Seniors		All Unsheltered Veterans	
	#	%	#	%
HUD-Required:				
Chronically Homeless Individuals	21	54	98	57
Chronically Homeless Families				
Persons with HIV/AIDS	4	10	10	6
Persons with Mental Health Problems	9	23	48	28
Persons with Drug or Alcohol Problems	12	31	67	39
Victims of Domestic Violence	6	15	28	16
Non-HUD Required:				
Persons with Chronic Health Conditions	15	39	78	45
Persons with Developmental Disabilities	5	13	21	12
Persons with Physical Disabilities	14	36	68	39
Persons released from Correctional Institutions	7	18	38	22

Action Steps

In order to prevent and end homelessness among veterans who are seniors, the following actions should be taken

- a. A meeting that includes veteran housing and service providers and other housing and service providers that focus on seniors should be initiated for the purposes of developing a specific plan to prevent and end homelessness among seniors who are veterans;
- b. The plan should include targeted street outreach to seniors who are veterans and
 - a housing first approach for senior veterans who are chronically homeless;
 - a rapid re-housing approach for seniors veterans who are not chronically homeless.
- c. Set a benchmark of no senior veterans living on the streets in three years in order to align with the national priority to end homelessness among veterans;
- d. Develop a plan to end homelessness for any senior veteran who becomes homeless within 30 days in order to align with the national priority within the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) which was signed into law in May, 2009;
- e. Make the creation, development, and implementation of the plan known to all public and private stakeholders throughout the County.

Recommendation #3: Prevent and End Homelessness among Veterans with HIV/AIDS

Of the 173 unsheltered veterans, 10 or 6% had been diagnosed with AIDS or have been tested positive for HIV. Nine or 90% of them were chronically homeless. Other circumstances and

barriers that likely contributed, and continue to contribute, to their state of chronic homelessness include

- 70% (7) had a mental health condition;
- 70% (7) had a drug or alcohol problem.

Action Steps

In order to prevent and end homelessness among veterans who have HIV/AIDS, the following actions should be taken

- a. A meeting that includes veteran housing and service providers and other housing and service providers that focus on persons with HIV/AIDS should be initiated for the purposes of developing a specific plan to prevent and end homelessness among persons with HIV/AIDS who are veterans;
- b. The plan should include targeted street outreach to veterans with HIV/AIDS and
 - a housing first approach for all veterans with HIV/AIDS;
- c. Set a benchmark of no veterans with HIV/AIDS living on the streets by the end of the year to align with the national priority to end homelessness among veterans;
- d. Develop a plan to end homelessness for any senior veteran who becomes homeless within 30 days in order to align with the national priority within the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) which was signed into law in May, 2009;
- e. Make the creation, development, and implementation of the plan known to all public and private stakeholders throughout the County.

II. Background Information

In 2009, the Obama Administration identified ending homelessness among U.S. Military Veterans by 2015 as a national priority. In 2010, the U.S. Department of Veterans Affairs (VA) began implementing a comprehensive plan to meet this national goal which has resulted in a 24% reduction in homelessness among Veterans in the first three years.

To meet the mission objectives of ending Veteran homelessness by 2015, VA targeted a select number of Continuum of Care (CoC) communities throughout the country, including Riverside County, to conduct a special point-in-time (PIT) enumeration of homeless veterans in 2014. Collecting accurate data on the numbers and demographics of veteran individuals and families experiencing homelessness is a critical part of VA planning and program development to end homelessness. Accurate data on Veteran homelessness will assist VA to:

- Understand changes in trends among homeless populations;
- Adjust the types of programs and services available according to need and use resources as efficiently as possible;
- Justify requests for additional resources and/or programming modifications;
- Comply with reporting requirements for HUD, the VA, other funders, and local stakeholders;
- Raise public awareness about the issue of homelessness; and
- Measure the progress of VA towards preventing and ending Veteran homelessness.

To that end, VA contracted with the Riverside County Department of Public Social Services (DPSS) to conduct the 2014 point-in-time (PIT) count of homeless veterans. The 2014 PIT Count of Homeless Veterans will enable VA, the U.S. Department of Housing and Urban Development (HUD) and the County of Riverside to assess the current size and characteristics of our homeless veteran population in order to seek the additional resources needed to achieve the goal of preventing and ending homelessness among veterans in Riverside County by the end of 2015.

The DPSS Homeless Programs Unit (HPU) worked in consultation with the Institute for Urban Initiatives (Urban Initiatives) along with community stakeholders and volunteers from throughout Riverside County to collect accurate data on the numbers and subpopulation demographics of veteran individuals and families experiencing homelessness in Riverside County, at a point-in-time that occurred during a discreet period of time within the final ten (10) days of January, 2014.

When was the homeless veterans count conducted?

The Riverside County point-in-time (PIT) count of homeless veterans was conducted on Wednesday, January 29th, 2014.

Who was counted?

Those individuals who have served on active duty in the Armed Forces of the United States and who on the day of the point-in-time count fell within the HUD definition of a homeless person which includes individuals and families:

- (i) “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”; or
- (ii) “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).”

Who was not counted?

Per HUD instructions, people residing in the following settings were not included in the PIT count:

- Persons residing in permanent supportive housing programs, including persons housed using HUD Veterans Affairs Supportive Housing (VASH) vouchers.
- Persons staying in projects with beds/units not dedicated for persons who are homeless.
- Persons temporarily staying with family or friends (“doubled-up” or “couch surfing”)
- Persons residing in institutions such as jail, correction facilities, hospital beds, and detox centers.

Who carried out the count?

The 2014 PIT count of homeless veterans was conducted under the auspices of the Veterans Assistance Leadership of Riverside County (V.A.L.O.R.) Task Force, created by the County Board of Supervisors to honor, support and assist veterans with quality of life issues such as homelessness, healthcare, education and job training.

DPSS worked with staff representatives from each of the Board of Supervisors offices to establish a PIT Veterans Count Planning Group among the V.A.L.O.R. partners to plan and implement count activities. The V.A.L.O.R. PIT Veterans Count Planning Group included representatives from VA Loma Linda, U.S. Vets, Inc., Lighthouse Social Service Centers, the City of Riverside, the Housing Authority of the County of Riverside and the County Departments of Mental Health and Veterans Services. Over 150 volunteers were engaged in planning and day-of-count activities throughout the county including local military veterans and reservists, members of veterans’ service and support organizations, city and county staff members, homeless service providers, former and currently homeless individuals and other community volunteers.

III. Methodology

The 2014 PIT Enumeration of Homeless Veterans involved conducting a “one-day, point-in-time” unduplicated count and subpopulation survey of unsheltered and sheltered homeless military veterans in every city and unincorporated area in Riverside County. The unduplicated count and survey of homeless veterans consisted of two components: 1) a street count and survey of unsheltered veterans; and 2) a sheltered count of veterans through HMIS.

In order to complete the count and subpopulation survey of homeless veterans, the following activities were conducted: 1) Organizing the count and survey project; 2) Coordinating the count and survey at the local level; and 3) Implementing the count and survey of homeless veterans throughout the county.

1. Organizing the Count and Survey Project

Organizing the 2014 homeless veterans count and survey project consisted of the following activities: a) dividing the county into organizational planning districts; b) dividing the planning districts into implementation areas; and c) dividing the implementation areas into count zones.

a. Dividing the County into Organizational Planning Districts

The County was divided into five organizational planning districts based on the Board of Supervisors district boundaries:

District 1: Encompasses the cities of Canyon Lake, Lake Elsinore, Wildomar, and most of the City of Riverside, along with the unincorporated communities of Gavilan Hills, Good Hope, Lake Hills, Lake Mathews, Mead Valley, Meadowbrook, Temescal Valley, and Woodcrest.

District 2: Encompasses the cities of Corona, Eastvale, Jurupa Valley, Norco and portions of the City of Riverside, along with the unincorporated communities of Coronita, El Cerrito, Highgrove and Home Gardens.

District 3: Encompasses the cities of Hemet, Murrieta, San Jacinto and Temecula, along with the unincorporated communities of Aguanga, Anza Valley, Cahuilla, East Hemet, Gilman Hot Springs, Idyllwild, Lake Riverside, Mountain Center, Pine Cove, Pine Meadow, Pinyon Communities, Poppet Flats, Rancho California, Soboba Hot Springs, Valle Vista and Winchester.

District 4: Encompasses the cities of Blythe, Cathedral City, Coachella, Desert Hot Springs, Indian Wells, Indio, La Quinta, Palm Desert, Palm Springs, and Rancho Mirage, along with the unincorporated communities of Bermuda Dunes, Chiriaco Summit, Colorado River communities, Desert Center, Desert Edge, Desert Palms, Indio Hills,

Mecca, Mesa Verde, North Shore, Oasis, Ripley, Sky Valley, Thermal, Thousand Palms, and Vista San Rosa.

District 5: Encompasses the cities of Banning, Beaumont, Calimesa, Menifee, Moreno Valley and Perris, along with the unincorporated communities of Cabazon, Homeland, Lakeview, Nuevo, Perris Valley, and Romoland.

b. Dividing Planning Districts into Implementation Areas

The five Organizational Planning Districts were divided into Implementation Communities made up of incorporated cities and/or unincorporated jurisdictions. Each of the Implementation Communities were divided into Implementation Areas which were designated as Red, Yellow, or Green Areas as defined below.

- **Red Areas** are defined as implementation areas where there are no homeless persons to be found as determined by local community representatives.
- **Yellow Areas** are defined as implementation areas in which homeless persons have been identified however local representatives have determined that it may be too difficult and/or unsafe for volunteer to conduct the count.

A special committee on “Challenging to Reach Locations” was established to determine if a designated yellow area may include homeless veterans and to organize special count teams to ensure that veterans were counted in these areas. Participants in this effort included homeless veteran outreach workers from the VA, US Vets, Lighthouse Social Service Centers, and the County Departments of Mental Health (DoMH) and Veterans Services, along with general homeless outreach workers from the City of Riverside and DoMH, DPSS and Housing Authority staff, law enforcement personnel, and formerly homeless veterans.

- **Green Areas** are defined as implementation areas where homeless persons can be found as determined by local community representatives. Specific effort shall be made to identify locations where homeless veterans are known to reside and/or spend time.

c. Dividing Implementation Areas into Count Zones

Implementation Areas designated as Green Areas were divided into Count Zones which included specific locations where homeless individuals are known to reside and/or spend time. A specific effort was made to identify areas where homeless veterans are specifically known to reside and/or spend time. Teams of counters were deployed to designated count zones within each of the Green Areas. Teams of counters were not deployed to Red Areas.

2. Coordinating the count and survey at the local level

Coordinating the count included implementing the following activities in each organizational Planning District: a) engaging community key persons at the local level; b) distinguishing implementation communities and areas within the planning district; c) identifying places where homeless people live/spend time within the identified green areas; d) Identifying places where homeless veterans receive services in the community; and e) raising public awareness and community involvement in the count.

a. Engaging Community Key Persons

Community Key Persons were identified for each Planning District consisting of representatives from public and private organizations who are knowledgeable about homelessness and where homeless persons, particularly veterans, live and spend time in their communities. Key persons included representation from veterans' service and support organizations along with representatives of local government, law enforcement, social service providers, nonprofit and faith-based organizations and current and formerly homeless veterans.

b. Distinguishing Implementation Areas within the Planning District

Community Key Persons from each Planning District helped to distinguish Implementation Areas where homeless people can be found. Implementation Areas included quadrants or sections of a city or unincorporated area or an entire neighborhood which were designated as Green Areas. Conversely, those sections where homeless persons were known not to live or spend time were designated as Red Areas. Key Persons also helped identify challenging to reach locations where homeless people live within their communities which were designated as Yellow Areas.

c. Identifying verifiable places where homeless people live/congregate

Community Key Persons from each Planning District helped to identify specific locations in implementation communities where homeless people live and/or congregate within the designated Green Areas. Such places included abandoned buildings, commercial areas, parks, sidewalks, vacant lots and vehicles. Known encampments were also specifically identified within Green Areas. A specific effort was made to identify where homeless veterans are known to reside and spend time.

d. Identifying places where homeless people receive social services

Community Key Persons from each Planning District also identified non-residential locations where homeless veterans go to receive social services and other forms of assistance. Such programs included public and private veterans' service providers and support organizations as well as locations that serve meals, distribute packaged food and/or clothing, and provide shower or laundry services.

e. Raising public awareness and community involvement

The primary purpose of raising public awareness and community involvement was to recruit volunteers to help implement the count in each planning community. Volunteers were recruited through the V.A.L.O.R. Initiative partners and participants from a wide-range of sources including: Veterans service and support groups, VA Loma Linda, city and county employees, homeless service providers, other social service agencies, non-profit organizations, faith-based institutions, local businesses, civic organizations, educational institutions, currently and formerly homeless individuals and other interested community stakeholders. Volunteers from the 2013 PIT Homeless Count were also recruited to participate in the 2014 PIT Veterans Count. A targeted effort was made to engage community members who are veterans, staff and participants in Veterans service and support organizations and currently and formerly homeless Veterans.

Community involvement included local representatives participating in planning district meetings and serving on volunteer count teams on the day of the count. Flyers and other materials were developed for distribution at community meetings and forums, media outlets and various public facilities, service locations, churches, college campuses and other public locations. A project website was established with general project information and volunteer outreach materials. Volunteer registration was accepted on the web site throughout the months leading up to the day of the count.

3. Implementing the count and survey throughout the County

The PIT Count of Homeless Veterans was carried out on Wednesday, January 29th, 2014. Implementing the unduplicated count of homeless veterans consisted of two components: a) a street count of unsheltered veterans; and b) a count of sheltered veterans through HMIS.

a. Implementing the unsheltered count of homeless veterans

The unsheltered count was conducted during the early morning daylight hours, between 6:00am and 10:00am on the designated day of the count. Two central deployment centers were established, one in western county at U.S. Vets, Inc. at March Air Reserve Base and one in eastern county at ABC Recovery Center in Indio, from which day-of-count activities were coordinated for the entire county. In addition, local deployment operations were coordinated by city representatives in the cities of Riverside, Beaumont, Blythe, Cabazon, Coachella, Hemet, La Quinta, Lake Elsinore, Murrieta, Rancho Mirage, Temecula, and Wildomar.

On the day-of-the-count, street count teams were formed and included a cross-section of volunteers including military veterans, military reservists, veterans' service staff, city and county staff, homeless service providers, former and currently homeless individuals and other community volunteers. These street count teams visited their assigned count zones and used a homeless count instrument to record required information collected from each homeless veteran encountered. The point-in-time count and subpopulation survey was conducted using a

single instrument designed to gather information from each homeless veteran encountered creating an identifier string in order to avoid duplication and capture subpopulation information required by VA or HUD, including veteran’s status.

The instrument included the following question in regards to identifying veterans status – “Have you served on active duty in the U.S. Armed Forces or been called into active duty as a member of the National Guard or as a Reservist?” If the individual encountered responded no to this question, no additional information was collected and that person was not included in the homeless veteran count. During the enumeration, counters collected the following information from every homeless veteran encountered: first initial of first name, first initial of last name, gender, ethnicity,¹ age by code,² and state born. If the same person is encountered again, counters would establish the same code; however this person will only be counted once in the final tally.

The information collected from each veteran encountered was then entered into a database and used to create an identifier code for each person. For example, a homeless person may have the following code of "WTM56CA." This means that this person's first name began with "W", last name began with "T", he was male (M), his ethnicity code was “5” which is White, his age code was “6” which means in the age range of 50-61, and he was born in California.

First Initial	Last Initial	Gender	Ethnicity	Age Code	State Born
W	T	M	5	6	CA

If the same identifier appears more than once, it is assumed that this is the same person and the person will only be counted once. An example to illustrate how this process works to avoid duplication is noted in the table below. Numbers 6 and 7 (shaded in gray) would be considered the same person. If for some reason here was doubt that numbers 6 and 7 were the same person, other data collected on the same two people would be used to address the doubt.

Number of Person	First Initial	Last Initial	Gender	Ethnicity	Age Code	State Born
1	J	H	F	5	6	CA
2	H	T	M	4	7	CA
3	R	K	F	4	5	TX
4	K	N	M	1	4	CA
5	F	A	M	2	3	CA
6	J	F	M	5	5	CA
7	J	F	M	5	5	CA

¹ The code for ethnicity included: 1=African American or Black; 2=American Indian or Alaskan Native; 3=Asian or Pacific Islander; 4=Hispanic or Latino; 5=White; and 6=Other.

² The code for age included: 1=under age 18; 2=18-24; 3=25-29; 4=30-39; 5=40-49; 6=50-61; 7=62-69; 8=70-79; and 9=80+.

8	S	G	F	4	2	NY
9	D	T	M	5	6	CA
10	O	R	M	1	7	CA

The collection of this data also provided the opportunity to break down the number of homeless veterans counted by gender, ethnicity, age range, and state born. Thus, the questions serve two purposes—basic demographic information and the prevention of duplication.

In addition to the identifier information, the count instrument was also designed to collect VA and HUD required subpopulation information for all homeless veterans encountered on the day-of-the-count, as identified in the 2014 HUD PIT Count Guidance. In addition to veteran’s status, the count instrument also included questions to identify: families with children, chronically homeless individuals, chronic substance abusers, persons dealing with mental illness, persons with HIV/AIDS, and victims of domestic violence.

b. Implementing the sheltered count

Point-in-time count and subpopulation information for veterans sleeping in emergency shelters (including seasonal shelters) and transitional housing on the designated night of the count was generated through the County of Riverside’s Homeless Management Information System (HMIS). In addition, any veteran staying in a hotel or motel room as a result of receiving a voucher from a social service agency was included in the count. All programs included in the above categories that are identified in the County’s Housing Inventory Chart (HIC) were included in the sheltered count. Any agencies listed on the HIC that are not participating in HMIS used the count/survey instrument described above to collect the required information from their program participants.

IV. Unsheltered Count

There were 173 unsheltered veterans. The following table lists the cities and communities in which the total number of veterans was counted.

City/Community	#	%
Aguanga	1	.6
Banning	2	1.2
Beaumont	2	1.2
Blythe	14	8.1
Cabazon	3	1.7
Cathedral City	1	.6
Coachella	5	2.9
Corona	5	2.9
E Hemet/Valle Vista	6	3.5
Hemet	11	6.4
Idyllwild	4	2.3
Indio	9	5.2
Jurupa Valley	6	3.5
La Quinta	2	1.2
Lake Elsinore	7	4.0
Lakeland Village	4	2.3
Mead Valley	3	1.7
Menifee	1	.6
Moreno Valley	10	5.8
Norco	4	2.3
Palm Springs	10	5.8
Perris	8	4.6
Rancho Mirage	1	.6
Riverside	45	26.0
San Jacinto	2	1.2
Temecula	4	2.3
unknown	3	1.7
Total:	173	100.0

A. Pre-determined Demographics

The following sub-section provides a breakdown of the total number of unsheltered veterans by pre-determined demographics that helped provide a unique identifier (as described on page 16) in order to prevent duplication. Demographics include:

Gender

- Of the 173 unsheltered veterans,
 - 158 or 91% were men and
 - 15 or 9% were women.

Hispanic/Latino

- Of the 173 unsheltered veterans, 29 or 17% were Hispanic/Latino.

Race

- Of the 173 unsheltered veterans,
 - 25 or 14.5% were African American or Black;
 - 5 or 2.9% were American Indian or Alaskan Native;
 - 0 or 0% were Asian;
 - 3 or 1.7% were Native Hawaiian or Pacific Islander;
 - 108 or 62.4% were White;
 - 28 or 16.2% were multiple races or other;
 - 4 or 2.3% were unknown.

Age

- Of the 173 unsheltered veterans,
 - 0 or 0% were youth between the ages of 18 – 24;
 - 39 or 22.6% were seniors age 62+.

State Born

- Of the 173 unsheltered veterans,
 - 85 or 49.1% were born in California;

- 9 or 5.2% were born in Texas.

Note: the number of veterans born in all other states was 2.9% or less.

B. HUD Required Subpopulations

The following sub-section provides a breakdown of the 173 unsheltered veterans by various questions that were used to determine the total number of veterans for several subpopulations required by HUD.

1. Substance Abusers: (Do you have a drug or alcohol problem)?

- 67 or 39% stated “yes.”

2. Mentally Ill: (Do you feel you have a mental health problem)?

- 48 or 28% stated “yes.”

3. Persons with HIV/AIDS: (Have you been diagnosed with AIDS or have you tested positive for HIV)?

- 10 or 6% stated “yes.”

4. Victims of Domestic Violence: (Have you ever been a victim of domestic or intimate partner violence)?

- 28 or 16% stated “yes.”

5. Chronically Homeless³

³ An unsheltered adult was considered chronically homeless is the person fit within HUD’s definition of chronic homelessness which includes if the person had been living in an emergency shelter and/or on the streets or in abandoned buildings for the past year or more and/or if the person had been living in an emergency shelter and/or on the streets or in abandoned buildings four times or more during the last three years. In addition, according to HUD, the person must have a disabling condition which for the purposes of this survey included mental health problems, drug or alcohol problem, physical disability, developmental disability, chronic health condition, and/or HIV/AIDS. A family was considered chronically homeless if, according to HUD, there was at least one adult that fit within the definition of chronic homelessness described in the footnote above.

- 98 or 57% were either homeless one year or more and/or homeless four times or more in three years and had a disabling condition.

A breakdown of the total number of unsheltered veterans by chronic homelessness was also required by HUD and provided specific criteria in order to determine if an individual or family is chronically homeless.

The first two questions focus on length of times homeless which are

- Have you been living in an emergency shelter and/or on the streets or in abandoned buildings, for the past year or more?
- Have you been living in an emergency shelter and/or on the streets four or more separate times in the last three years?

If a veteran answered “yes” to one of these two questions, he or she was considered chronically homeless if the person also stated “yes” to at least one of the following “disabling condition” questions.

The disabling condition questions included mental health problems, drug or alcohol problem, physical disability, developmental disability, and/or HIV/AIDS. The questions used to determine a disabling condition included:

- Do you have a drug or alcohol problem?
- Do you feel you have a mental health problem?
- Have you been diagnosed with AIDS or have you tested positive for HIV?
- Do you have a physical disability?
- Do you have a developmental disability?

NOTE: There are two other subpopulations required by HUD which are unaccompanied youth under age 18 and youth age 18 – 24. There were no veterans under age 18. The minimum age for joining any branch of the U.S. military is 17. A 17 year old can enlist at this age, but must complete high school before entering into any training. Seventeen-year-olds also must have the consent of their parents in writing on a form provided by the recruiter.

C. Non-HUD Required Subpopulations

The following sub-section provides a breakdown of the total number of unsheltered veterans by various questions that were used to determine the total number of veterans for several subpopulations not required by HUD.

1. **Persons Released from Correctional Institutions:** (During the last 12 months, were you released from a correctional institution such as a prison or jail after serving a court-order sentence?)
 - 38 or 22% of veterans were released from a correctional institution such as a prison or jail after serving a court-order sentence during the last 12 months.
2. **Persons with Physical Disabilities:** (Do you have a physical disability?)
 - 68 or 39% of veterans had a physical disability.
3. **Persons with Developmental Disabilities:** (Do you have a developmental disability?)
 - 21 or 12% of veterans had a developmental disability.
4. **Persons with a Chronic Health Condition:** (Do you have a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis?)
 - 78 or 45% of veterans had a chronic health condition.

Veterans who answered “yes” were also asked “is this condition expected to be long-continuing or of indefinite duration and to impede your ability to live independently.”

- Of those who answered “yes,” 50 or 29% also stated that their condition was expected to be long-continuing or of indefinite duration and to impede your ability to live independently.

V. Sheltered Count

A. HUD Required Subpopulations

The following sub-section provides a breakdown of the 116 sheltered veterans by various questions that were used to determine the total number of veterans for several subpopulations required by HUD.

1. **Substance Abusers:** (Do you have a drug or alcohol problem)?
 - 12 or 10% stated “yes.”
2. **Mentally Ill:** (Do you feel you have a mental health problem)?
 - 9 or 8% stated “yes.”
3. **Persons with HIV/AIDS:** (Have you been diagnosed with AIDS or have you tested positive for HIV)?
 - 2 or 1% stated “yes.”
4. **Victims of Domestic Violence:** (Have you ever been a victim of domestic or intimate partner violence)?
 - 3 or 3% stated “yes.”
5. **Chronically Homeless⁴**
 - 0 or 0% were either homeless one year or more and/or homeless four times or more in three years and had a disabling condition while living on the streets and/or in an emergency shelter.

⁴ A sheltered adult was considered chronically homeless if the person was in an emergency shelter and if the person fit within HUD’s definition of chronic homelessness. The definition includes if the person had been living in an emergency shelter and/or on the streets or in abandoned buildings for the past year or more and/or if the person had been living in an emergency shelter and/or on the streets or in abandoned buildings four times or more during the last three years. In addition, according to HUD, the person must have a disabling condition which for the purposes of this survey included mental health problems, drug or alcohol problem, physical disability, developmental disability, chronic health condition, and/or HIV/AIDS. A family was considered chronically homeless if, according to HUD, there was at least one adult that fit within the definition of chronic homelessness described in the footnote above.

VI. Next Steps

Ending homelessness among Veterans by the end of 2015 is a national priority. Therefore, next steps in this report focus on ending homelessness among Veterans in Riverside County during the next two years.

Ending homelessness among veterans by 2015 became a national priority after Secretary of Veterans Affairs Eric K. Shinseki unveiled the department's comprehensive plan to end homelessness among veterans in five years at the National Summit on Ending Veterans Homelessness in November 2009. The following year, the U.S. Interagency Council on Homelessness (USICH) released *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (Opening Doors)*, listed preventing and ending homelessness among veterans in five years as a primary goal. The approach to prevent and end homelessness in *Opening Doors* includes focusing on several subpopulations that helps stakeholders in jurisdictions such as Riverside County realize that the task of preventing and ending homelessness is possible.

The following recommendations focus on various subpopulations of veterans.

Recommendation #1: Prevent and End Homelessness among Unsheltered Women Veterans

Of the 173 unsheltered veterans, 15 or 9% were women. The following table provides a breakdown of the subpopulation data that was collected for all veterans separating out men and women. The comparative data by gender reveals that a high percentage of men among men have several circumstances and impediments that likely contributed, and continue to contribute, to their state of homelessness. The comparison, however, reveals that a greater percentage of women among women have several circumstances and barriers that likely contributed, and continue to contribute, to their state of homelessness. Such circumstances and barriers include mental health and drug and alcohol problems, physical and developmental disabilities, domestic violence history, and chronic homelessness and health conditions.

Table 4. Comparison of Unsheltered Women and Men

Subpopulations:	Women		Men	
	#	%	#	%
HUD-Required:				
Chronically Homeless Individuals	12	80	86	54
Chronically Homeless Families				
Persons with HIV/AIDS	2	13	8	5
Persons with Mental Health Problems	5	33	43	27
Persons with Drug or Alcohol Problems	7	47	60	38
Victims of Domestic Violence	10	67	18	11
Youth Ages 18 - 24	0	0	0	0
Non-HUD Required:				
Persons with Chronic Health Conditions	8	53	70	44
Persons with Developmental Disabilities	6	40	15	10
Persons with Physical Disabilities	6	40	62	39
Persons released from Correctional Institutions	6	40	32	20

Also, of the 15 women who were veterans, 11 or nearly three-fourths (73%) were located in the cities of Palm Springs and Riverside.

Action Steps

In order to prevent and end homelessness among veterans who are women, the following actions should be taken

- f. A meeting that includes veteran housing and service providers and other housing and service providers that focus on women should be initiated for the purposes of developing a specific plan to prevent and end homelessness among women who are veterans;
- g. The plan should include targeted street outreach to women who are veterans and
 - a housing first approach for women veterans who are chronically homeless;
 - a rapid re-housing approach for women veterans who are not chronically homeless;
 - a concentrated effort within the cities of Palm Springs and Riverside.
- h. Set a benchmark of no women veterans living on the streets in three years in order to align with the national priority to end homelessness among veterans;
- i. Develop a plan to end homelessness for any women veteran who becomes homeless within 30 days in order to align with the national priority within the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) which was signed into law in May, 2009;
- j. Make the creation, development, and implementation of the plan known to all public and private stakeholders throughout the County.

Recommendation #2: Prevent and End Homelessness among Unsheltered Senior Veterans

Of the 173 unsheltered veterans, 39 or 23% were seniors. The following table provides a breakdown of the subpopulation data that was collected for all veterans separating out seniors compared to the total population. The comparative data reveals that a high percentage of veterans have several circumstances and impediments that likely contributed, and continue to contribute, to their state of homelessness. The comparison, however, reveals that a smaller percentage of seniors among veterans have several circumstances and barriers that likely contributed, and continue to contribute, to their state of homelessness. Lessor circumstances and barriers include mental health and drug and alcohol problems, physical disabilities, domestic violence history, and chronic homelessness and health conditions.

Table 5. Comparison of Unsheltered Seniors and All Unsheltered Veterans

Subpopulations:	Unsheltered Seniors		All Unsheltered Veterans	
	#	%	#	%
HUD-Required:				
Chronically Homeless Individuals	21	54	98	57
Chronically Homeless Families				
Persons with HIV/AIDS	4	10	10	6
Persons with Mental Health Problems	9	23	48	28
Persons with Drug or Alcohol Problems	12	31	67	39
Victims of Domestic Violence	6	15	28	16
Non-HUD Required:				
Persons with Chronic Health Conditions	15	39	78	45
Persons with Developmental Disabilities	5	13	21	12
Persons with Physical Disabilities	14	36	68	39
Persons released from Correctional Institutions	7	18	38	22

Action Steps

In order to prevent and end homelessness among veterans who are seniors, the following actions should be taken

- f. A meeting that includes veteran housing and service providers and other housing and service providers that focus on seniors should be initiated for the purposes of developing a specific plan to prevent and end homelessness among seniors who are veterans;
- g. The plan should include targeted street outreach to seniors who are veterans and
 - a housing first approach for senior veterans who are chronically homeless;

- a rapid re-housing approach for seniors veterans who are not chronically homeless.
- h. Set a benchmark of no senior veterans living on the streets in three years in order to align with the national priority to end homelessness among veterans;
 - i. Develop a plan to end homelessness for any senior veteran who becomes homeless within 30 days in order to align with the national priority within the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) which was signed into law in May, 2009;
 - j. Make the creation, development, and implementation of the plan known to all public and private stakeholders throughout the County.

Recommendation #3: Prevent and End Homelessness among Veterans with HIV/AIDS

Of the 173 unsheltered veterans, 10 or 6% had been diagnosed with AIDS or have been tested positive for HIV. Nine or 90% of them were chronically homeless. Other circumstances and barriers that likely contributed, and continue to contribute, to their state of chronic homelessness include

- 70% (7) had a mental health condition;
- 70% (7) had a drug or alcohol problem.

Action Steps

In order to prevent and end homelessness among veterans who have HIV/AIDS, the following actions should be taken

- f. A meeting that includes veteran housing and service providers and other housing and service providers that focus on persons with HIV/AIDS should be initiated for the purposes of developing a specific plan to prevent and end homelessness among persons with HIV/AIDS who are veterans;
- g. The plan should include targeted street outreach to veterans with HIV/AIDS and
 - a housing first approach for all veterans with HIV/AIDS;
- h. Set a benchmark of no veterans with HIV/AIDS living on the streets by the end of the year to align with the national priority to end homelessness among veterans;
- i. Develop a plan to end homelessness for any senior veteran who becomes homeless within 30 days in order to align with the national priority within the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) which was signed into law in May, 2009;
- j. Make the creation, development, and implementation of the plan known to all public and private stakeholders throughout the County.

Appendix A:
A comparison of the number of unsheltered veterans
counted in 2014 to the number counted in 2013 by jurisdiction

Jurisdiction	2014 Veterans Count	2013 Homeless Count
Cities:		
Banning	2	1
Beaumont	2	1
Blythe	14	11
Calimesa	0	0
Canyon Lake	0	0
Cathedral City	1	6
Coachella	5	1
Corona	5	8
Desert Hot Springs	0	0
Eastvale	0	0
Hemet	11	12
Indian Wells	0	0
Indio	9	22
Jurupa Valley	6	6
Lake Elsinore	7	12
La Quinta	2	1
Menifee (also Sun City)	1	1
Norco	4	5
Palm Desert	0	1
Palm Springs	10	5
Perris	8	5
Rancho Mirage	1	0
Riverside	45	63
San Jacinto	2	1
Temecula	4	4
Wildomar	0	5
Incorporated total:	149	177
Unincorporated Areas:		
Aguanga	1	0
Anza	0	0
Cabazon	3	0
East Hemet/Valle Vista	6	0
Homeland	0	0
Idyllwild	4	0
Lakeland Village	4	1

Meadowbrook	0	2
Mead Valley	3	0
Mecca	0	0
Romoland	0	0
Sage	0	0
Thermal	0	0
Thousand Palms	0	0
Unincorporated total:	21	3
Unknown	3	0
Total:	173	180

Appendix B: Women Veterans (Unsheltered)

9% of Unsheltered Veterans were Women

Of the 173 unsheltered veterans, 15 or 9% were women. A breakdown of these 15 veterans by the information gathered through the survey questions include:

- **Hispanic/Latino**

7% or (1) was Hispanic/Latino;

- **Race/Ethnicity**

20% (3) were African American or Black; 7% (1) was American Indian or Alaskan Native; 0% (0) was Asian; 0% (0) was Native Hawaiian or Pacific Islander; 33% (5) were White; and 33% (5) were multiple races or Other;

- **Age**

0% (0) was ages 18 – 24; 7% (3) were ages 25 - 29; 27% (4) were between the ages of 40 - 49; 60% (9) were between the ages of 50 – 61; and 7% (1) was age 62+;

- **State Born**

60% (9) were born in California;

- **Chronically Homeless**

80% (12) were chronically homeless;

- **Homeless One Year or More**

87% (13) were homeless one year or more;

- **Homeless at Least Four Times in Last Three Years**

60% (9) were homeless at least four times in the last three years;

- **Physical Disability**

40% (6) had a physical disability;

- **Developmental Disability**

40% (6) had a developmental disability;

- **Chronic Health Condition**

53% (8) had a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis;

- **HIV/AIDS**

13% (2) had been diagnosed with AIDS or had tested positive for HIV;

- **Mental Illness**

33% (5) had a mental health condition;

- **Substance Abuse**

47% (7) had a drug or alcohol problem;

- **Domestic Violence**

67% (10) had been a victim of domestic or intimate partner violence;

- **Released from Prison**

40% (6) were released from a correctional institution such as a prison or jail after serving a court-ordered sentence during the past 12 months.

Appendix C: Chronically Homeless Veterans (Unsheltered)

57% of Unsheltered Veterans were Chronically Homeless

Of the 173 unsheltered veterans, 98 or 57% were chronically homeless. A breakdown of these 98 veterans by the information gathered through the survey questions include:

- **Gender**

88% (86) were men and 12% (12) were women;

- **Hispanic/Latino**

8% or (8) were Hispanic/Latino;

- **Race/Ethnicity**

15% (15) were African American or Black; 4% (4) were American Indian or Alaskan Native; 0% (0) was Asian; 1% (1) was Native Hawaiian or Pacific Islander; 63% (62) were White; and 14% (14) were multiple races or Other; (note: responses were not recorded for 2 veterans or 2%);

- **Age**

0% (0) was ages 18 – 24; 4% (4) were ages 25 - 29; 10% (10) were between the ages of 30 – 39; 20% (19) were between the ages of 40 - 49; 44% (45) were between the ages of 50 – 61; and 22% (21) were age 62+;

- **State Born**

52% (51) were born in California;

- **Homeless One Year or More**

95% (93) were homeless one year or more;

- **Homeless at Least Four Times in Last Three Years**

66% (65) were homeless at least four times in the last three years;

- **Physical Disability**

63% (62) had a physical disability;

- **Developmental Disability**

16% (16) had a developmental disability;

- **Chronic Health Condition**

61% (60) had a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis;

- **HIV/AIDS**

9% (9) had been diagnosed with AIDS or had tested positive for HIV;

- **Mental Illness**

43% (42) had a mental health condition;

- **Substance Abuse**

61% (60) had a drug or alcohol problem;

- **Domestic Violence**

26% (25) had been a victim of domestic or intimate partner violence;

- **Released from Prison**

27% (26) were released from a correctional institution such as a prison or jail after serving a court-ordered sentence during the past 12 months.

Appendix D: Persons with HIV/AIDS (Unsheltered)

6% of Unsheltered Veterans were Persons with HIV/AIDS

Of the 173 unsheltered veterans, 10 or 6% were persons who have been diagnosed with AIDS or have been tested positive for HIV. A breakdown of these 10 veterans by the information gathered through the survey questions include:

- **Gender**

80% (8) were men and 20% (2) were women;

- **Hispanic/Latino**

10% or (1) was Hispanic/Latino;

- **Race/Ethnicity**

0% (0) were African American or Black; 0% (0) was American Indian or Alaskan Native; 0% (0) was Asian; 0% (0) was Native Hawaiian or Pacific Islander; 60% (6) were White; and 40% (4) were multiple races or Other;

- **Age**

0% (0) was ages 18 – 24; 0% (0) was ages 25 - 29; 10% (1) was between the ages of 30 - 39; 30% (3) were between the ages 40 – 49; 20% (2) were between the ages of 50 – 61; and 40% (4) was age 62+;

- **State Born**

70% (7) were born in California;

- **Chronically Homeless**

90% (9) were chronically homeless;

- **Homeless One Year or More**

90% (9) were homeless one year or more;

- **Homeless at Least Four Times in Last Three Years**

70% (7) were homeless at least four times in the last three years;

- **Physical Disability**

100% (10) had a physical disability;

- **Developmental Disability**

70% (7) had a developmental disability;

- **Chronic Health Condition**

100% (10) had a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis;

- **Mental Illness**

70% (7) had a mental health condition;

- **Substance Abuse**

70% (7) had a drug or alcohol problem;

- **Domestic Violence**

40% (4) had been a victim of domestic or intimate partner violence;

- **Released from Prison**

40% (4) were released from a correctional institution such as a prison or jail after serving a court-ordered sentence during the past 12 months.

Appendix E: Persons released from Correctional Institutions (Unsheltered)

22% of Unsheltered Veterans were Persons released from Correctional Institutions

Of the 173 unsheltered veterans, 38 or 22% were persons who were released from a correctional institution such as a prison or jail after serving a court-ordered sentence during the last 12 months. A breakdown of these 10 veterans by the information gathered through the survey questions include:

- **Gender**

84% (32) were men and 16% (6) were women;

- **Hispanic/Latino**

18% or (7) were Hispanic/Latino;

- **Race/Ethnicity**

16% (6) were African American or Black; 0% (0) was American Indian or Alaskan Native; 0% (0) was Asian; 0% (0) was Native Hawaiian or Pacific Islander; 58% (22) were White; and 24% (9) were multiple races or Other; (note: an answer for one person was not recorded);

- **Age**

0% (0) was ages 18 – 24; 3% (1) was ages 25 - 29; 10% (4) were between the ages of 30 - 39; 24% (9) were between the ages 40 – 49; 45% (17) were between the ages of 50 – 61; and 18% (7) was age 62+;

- **State Born**

55% (21) were born in California;

- **Chronically Homeless**

68% (26) were chronically homeless;

- **Homeless One Year or More**

90% (34) were homeless one year or more;

- **Homeless at Least Four Times in Last Three Years**

61% (23) were homeless at least four times in the last three years;

- **Physical Disability**

45% (17) had a physical disability;

- **Developmental Disability**

16% (6) had a developmental disability;

- **Chronic Health Condition**

58% (22) had a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis;

- **HIV/AIDS**

11% (4) had been diagnosed with AIDS or had tested positive for HIV;

- **Mental Illness**

37% (14) had a mental health condition;

- **Substance Abuse**

50% (19) had a drug or alcohol problem;

- **Domestic Violence**

24% (9) had been a victim of domestic or intimate partner violence.

Appendix F: Seniors (Unsheltered)

23% of Unsheltered Veterans were Seniors

Of the 173 unsheltered veterans, 39 or 23% were seniors. A breakdown of these 39 veterans by the information gathered through the survey questions include:

- **Gender**

97% (32) were men and 3% (1) was a woman;

- **Hispanic/Latino**

10% or (4) were Hispanic/Latino;

- **Race/Ethnicity**

8% (3) were African American or Black; 3% (1) was American Indian or Alaskan Native; 0% (0) was Asian; 3% (1) was Native Hawaiian or Pacific Islander; 64% (25) were White; and 18% (7) were multiple races or Other; (note: an answer for two persons were not recorded);

- **State Born**

28% (11) were born in California;

- **Chronically Homeless**

54% (21) were chronically homeless;

- **Homeless One Year or More**

74% (29) were homeless one year or more;

- **Homeless at Least Four Times in Last Three Years**

56% (22) were homeless at least four times in the last three years;

- **Physical Disability**

36% (14) had a physical disability;

- **Developmental Disability**

13% (5) had a developmental disability;

- **Chronic Health Condition**

39% (15) had a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis;

- **HIV/AIDS**

10% (4) had been diagnosed with AIDS or had tested positive for HIV;

- **Mental Illness**

23% (9) had a mental health condition;

- **Substance Abuse**

31% (12) had a drug or alcohol problem;

- **Domestic Violence**

15% (6) had been a victim of domestic or intimate partner violence.

- **Released from Prison**

18% (7) were released from a correctional institution such as a prison or jail after serving a court-ordered sentence during the past 12 months.

Appendix G: Persons with a Mental Health Problem (Unsheltered)

28% of Unsheltered Veterans were Persons with a Mental Health Problem

Of the 173 unsheltered veterans, 48 or 28% were persons with a mental health problem. A breakdown of these 48 veterans by the information gathered through the survey questions include:

- **Gender**

90% (43) were men and 10% (5) were women;

- **Hispanic/Latino**

15% or (7) were Hispanic/Latino;

- **Race/Ethnicity**

15% (7) were African American or Black; 4% (2) were American Indian or Alaskan Native; 0% (0) was Asian; 13% (6) were Native Hawaiian or Pacific Islander; 60% (29) were White; and 17% (8) were multiple races or Other; (note: an answer for one person was not recorded);

- **Age**

0% (0) was ages 18 – 24; 6% (3) were ages 25 - 29; 12% (6) were between the ages of 30 - 39; 17% (8) were between the ages 40 – 49; 46% (22) were between the ages of 50 – 61; and 19% (9) was age 62+;

- **State Born**

58% (28) were born in California;

- **Chronically Homeless**

88% (42) were chronically homeless;

- **Homeless One Year or More**

85% (41) were homeless one year or more;

- **Homeless at Least Four Times in Last Three Years**

52% (25) were homeless at least four times in the last three years;

- **Physical Disability**

56% (27) had a physical disability;

- **Developmental Disability**

23% (11) had a developmental disability;

- **Chronic Health Condition**

60% (29) had a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis;

- **HIV/AIDS**

15% (7) had been diagnosed with AIDS or had tested positive for HIV;

- **Substance Abuse**

60% (29) had a drug or alcohol problem;

- **Domestic Violence**

31% (15) had been a victim of domestic or intimate partner violence.

- **Released from Prison**

29% (14) were released from a correctional institution such as a prison or jail after serving a court-ordered sentence during the past 12 months.

Appendix H: Persons with a Drug or Alcohol Problem (Unsheltered)

39% of Unsheltered Veterans were Persons with a Drug or Alcohol Problem

Of the 173 unsheltered veterans, 67 or 39% were persons with a drug or alcohol problem. A breakdown of these 67 veterans by the information gathered through the survey questions include:

- **Gender**

90% (60) were men and 10% (7) were women;

- **Hispanic/Latino**

13% or (9) were Hispanic/Latino;

- **Race/Ethnicity**

13% (9) were African American or Black; 3% (2) were American Indian or Alaskan Native; 0% (0) was Asian; 12% (8) were Native Hawaiian or Pacific Islander; 63% (42) were White; and 18% (12) were multiple races or Other; (note: an answer for two persons were not recorded);

- **Age**

0% (0) was ages 18 – 24; 5% (3) were ages 25 - 29; 12% (8) were between the ages of 30 - 39; 22% (15) were between the ages 40 – 49; 43% (29) were between the ages of 50 – 61; and 18% (12) was age 62+;

- **State Born**

54% (28) were born in California;

- **Chronically Homeless**

90% (60) were chronically homeless;

- **Homeless One Year or More**

84% (56) were homeless one year or more;

- **Homeless at Least Four Times in Last Three Years**

61% (41) were homeless at least four times in the last three years;

- **Physical Disability**

54% (36) had a physical disability;

- **Developmental Disability**

13% (9) had a developmental disability;

- **Chronic Health Condition**

60% (40) had a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis;

- **HIV/AIDS**

10% (7) had been diagnosed with AIDS or had tested positive for HIV;

- **Mental Illness**

43% (29) had a mental health condition;

- **Domestic Violence**

22% (15) had been a victim of domestic or intimate partner violence.

- **Released from Prison**

28% (19) were released from a correctional institution such as a prison or jail after serving a court-ordered sentence during the past 12 months.

Appendix I: Persons with a Chronic Health Condition (Unsheltered)

45% of Unsheltered Veterans were Persons with a Chronic Health Condition

Of the 173 unsheltered veterans, 78 or 45% were persons with a chronic health condition. A breakdown of these 78 veterans by the information gathered through the survey questions include:

- **Gender**

90% (70) were men and 10% (8) were women;

- **Hispanic/Latino**

8% or (6) were Hispanic/Latino;

- **Race/Ethnicity**

17% (13) were African American or Black; 4% (3) were American Indian or Alaskan Native; 0% (0) was Asian; 0% (0) was Native Hawaiian or Pacific Islander; 64% (50) were White; and 14% (11) were multiple races or Other; (note: an answer for one person was not recorded);

- **Age**

0% (0) was ages 18 – 24; 3% (2) were ages 25 - 29; 5% (4) were between the ages of 30 - 39; 24% (19) were between the ages 40 – 49; 49% (38) were between the ages of 50 – 61; and 19% (15) was age 62+;

- **State Born**

53% (41) were born in California;

- **Chronically Homeless**

77% (60) were chronically homeless;

- **Homeless One Year or More**

82% (64) were homeless one year or more;

- **Homeless at Least Four Times in Last Three Years**

62% (48) were homeless at least four times in the last three years;

- **Physical Disability**

63% (49) had a physical disability;

- **Developmental Disability**

14% (11) had a developmental disability;

- **HIV/AIDS**

10% (8) had been diagnosed with AIDS or had tested positive for HIV;

- **Mental Illness**

37% (29) had a mental health condition;

- **Substance Abuse**

51% (40) had a drug or alcohol problem;

- **Domestic Violence**

19% (15) had been a victim of domestic or intimate partner violence.

- **Released from Prison**

28% (22) were released from a correctional institution such as a prison or jail after serving a court-ordered sentence during the past 12 months.