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April 20, 2022

The Honorable Board of Supervisors
County Administrative Building
1221 Oak Street
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**SUBJECT: ENDORSE THE HOME TOGETHER 2026 COMMUNITY PLAN AS A COUNTYWIDE STRATEGY
FOR ENDING HOMELESSNESS IN ALAMEDA COUNTY**

Dear Board Members:

RECOMMENDATION:

Endorse the Home Together 2026 Community Plan, which lays out goals, strategies and investments needed to dramatically reduce homelessness by centering racial equity

SUMMARY:

The Health Care Services Agency (HCSA) requests your Board endorse the Home Together 2026 Community Plan (See Attachment: Home Together 2026 Community Plan), a set of evidence-based and community-informed goals and activities that offer immediate and long-term solutions to reduce homelessness in Alameda County by 2026 and combat racial disparities in homelessness by centering equity.

On August 4, 2020, your Board adopted the Home Together Plan as a strategic framework for ending homelessness in Alameda County (Item No. 21). The Home Together Plan was largely informed by the 2020 [Centering Racial Equity in Homeless System Design](#) (CRE) report prepared by community partners, homelessness response system modeling and extensive interviews and focus groups with persons of color who have experienced homelessness in Alameda County. The process modeled the elements and needs of an optimal system to respond to homelessness while reducing racial disparities, and identified gaps in housing resources and programs.

The Home Together 2026 Community Plan, which builds on this framework includes bold, ambitious, and measurable goals for Alameda County partners, both for reducing homelessness and for achieving greater racial equity.

The Plan incorporates input from:

- A Strategic Planning Committee, jointly convened by HCSA's Office of Homeless Care and Coordination and EveryOne Home for the Continuum of Care (CoC) Leadership Board for Alameda County, representing people with lived experience of homelessness, city and county staff, service providers, nonprofit organizations, advocates and CoC Leadership Board members;

- Other key experts from County agencies and departments, City governments throughout the county; and
- Public comment that was solicited broadly through county and city networks.

The Plan also:

- Responds to time-sensitive legislated requirements for the County to receive State housing and health funding, and is informed by and consistent with other local and regional efforts to address homelessness;
- Includes an update to the Alameda County homelessness response system modeling, originally conducted in 2019-20, to explore new scenarios that include recently updated and newly anticipated shelter and housing inventory and resources;
- Defines racial equity strategies to help meet the needs of populations overrepresented in Alameda County's homeless population;
- Identifies shelter and housing inventory needed and costs required to support programs and pathways for ending homelessness for adult and family households;
- Identifies the supportive services needs of specific populations such as transition age youth, Veterans, older adults, survivors of intimate partner violence, people with behavioral health needs and people who have had involvement with the criminal justice system; and
- Lays the groundwork for companion annual or biannual action plans from other jurisdictions funding plans that will detail the specific roles of local partners in co-leading efforts to address homelessness.

County jurisdictions that have endorsed thus far include Berkeley, Dublin, Fremont, Hayward, and Pleasanton. Other cities have planned agenda items in May and June. The CoC Leadership Board endorsed the plan on April 28, 2022.

DISCUSSION/FINDINGS:

During the 2019 Homeless Point in Time Count, over 8,000 people were identified as experiencing homelessness in Alameda County, a number that grows to an estimated 15,000 people over the course of a year. More than 90% of homeless households in Alameda County are adults without minor children, including nearly 10% who are between the ages of 18 and 24. An estimated 79% people experiencing homelessness in Alameda County are unsheltered.

Homelessness occurs across the County, though it is concentrated most in North and Mid-County. More than three-fourths of people experiencing homelessness (78%) report residing in Alameda County before becoming homeless.

Dramatic racial disparities exist among those experiencing homelessness in Alameda County. African Americans experience homelessness at more than four times their representation in the population (47% vs. 11%) and Native Americans, multiracial people and Hawaiian Native/Pacific Islanders are all vastly overrepresented in homelessness. These disparities highlight the need to invest both more and differently in creating program models and pathways that meet disparate needs.

Today, only an estimated 36% of those in our county's homelessness response system can be supported by existing resources to identify housing or leave homelessness on their own. This leaves thousands of

people who remain homeless each year, joined by those who become newly homeless. Without significant effort and investment, homelessness will continue to grow in Alameda County.

Specific investments included in the Home Together 2026 Community Plan include: creating extensive new program models and pathways out of homelessness, using affordable housing dedicated for people experiencing homelessness, Supportive Housing for people who need more service-enriched programming, targeted behavioral health and substance use treatment services throughout the system of care, improved and expanded homelessness prevention, transitional housing for youth and shallow and flexible rental assistance to fill gaps for people with limited incomes, in addition to expanding current program models such as Rapid Rehousing.

Overall, increased investment in prevention and the addition of more than 24,000 additional housing opportunities in a variety of program models are needed to reach a point within five years at which the number of people who become homeless in a year and the numbers who are able to leave homelessness in that time are in balance.

Because 79% of people experiencing homelessness in Alameda County are unsheltered, the Home Together 2026 Community Plan proposes an increase in shelter in the first two years. Some added shelter will then be converted to much needed housing in later years.

The total cost of increasing the supportive services, street outreach, shelter and housing availability over five years to fully meet the need would be \$2.5 billion which represents both City and County programs and will include investments from federal, state and local partners. This includes roughly \$430 million for additional shelter, \$1.68 billion for permanent housing such as dedicated affordable housing and supportive housing, and \$388 million for prevention, rapid rehousing and shallow (more limited) subsidies within the homelessness response system. This does not include the one-time development costs for acquiring or constructing new buildings, but covers operations and services, and subsidies to help people rent existing housing. (The cost of acquiring and developing new site-based housing is sought separately through state funding competitions and local bond sources.) The endorsement of the Home Together Plan by the Board of Supervisors does not constitute a financial commitment by the County.

To reduce racial disparities and reach the goals identified in the Home Together 2026 Community Plan, the Plan recommends specific action steps in each of the following categories:

- 1. Prevent Homelessness for our Residents through targeted rental assistance;**
- 2. Connect People to Shelter and Needed Resources quickly and compassionately;**
- 3. Increase Housing Solutions through new housing and added subsidies; and**
- 4. Strengthen Coordination, Communication and Capacity, supporting our community workforce.**

Taken together, the significant increase in investment and the creation of new models and pathways out of homelessness will lead to decreases in new homelessness, improved racial equity in outcomes, shorter time being homeless, and a reduced rate at which people return to homelessness. Specific measurable targets for reducing homelessness altogether, and for achieving greater equity in results, are included in the Plan.

The Honorable Board of Supervisors

April 20, 2022

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FINANCING:

By taking this action, the Board of Supervisors is not committing or allocating any funding. There is no increase in Net County Cost as a result of this action. Future funding proposals related to the Home Together 2026 Community Plan will come forward to your Board and to City partners separately for approval and based on identified revenue.

VISION 2026 GOAL:

Supporting regional coordination and expanding local capacity to address immediate homelessness challenges meets the 10X goal pathway to **Eliminate Homelessness** in support of our shared visions of a **Thriving & Resilient Population** and **Safe and Livable Communities**.

Sincerely,

DocuSigned by:

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Colleen Chawla, Director
Health Care Services Agency

Home Together 2026 Community Plan

**A 5-year Strategic Framework
Centering Racial Equity to End Homelessness in Alameda County**

Home Together 2026 Community Plan

A 5-year Strategic Framework
Centering Racial Equity to End Homelessness in Alameda County

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Executive Summary

This **Home Together 2026 Community Plan** (the Plan) lays out the goals, strategies and investments needed to dramatically reduce homelessness in Alameda County by 2026 and combat racial disparities in homelessness by fully centering equity. The Plan's overarching goals and time frame align with [Alameda County's Vision 2026](#), which holds as one of its primary objectives to "ensure the availability of diverse and affordable housing for all residents with the goal of eliminating homelessness in Alameda County."

Alameda County

Alameda County is home to more than 1.6 million residents and includes 14 cities and six unincorporated communities. Nonprofit organizations, public entities, and a range of interested parties, including those with direct experience of homelessness, work together in a Continuum of Care (the Oakland-Berkeley-Alameda County Continuum of Care, or CoC) to seek new resources and coordinate housing and services funding for addressing homelessness. The CoC is led by a representative Leadership Board, supported by a number of committees and staffed by EveryOne Home.

The County's Office of Homeless Care and Coordination, formed in early 2020 within the Health Care Services Agency, participates in CoC Leadership and coordinates with residents, providers, other County Agencies and local jurisdictions around strategic planning and service delivery. Cities across Alameda County participate in the CoC and dedicate local resources to funding, siting and supporting shelters, housing, and services within their communities. This Plan seeks to serve as a playbook for all of these parties working together, recognizing that each jurisdiction will need to make specific decisions regarding the resources under their authority. Specific annual action plans are developed for the county and for cities in conjunction with this framework.

Foundations for This Plan

This Plan builds upon many sources and efforts, particularly the 2020 [Centering Racial Equity in Homeless System Design](#) report (CRE) prepared by partners in the Continuum of Care and informed by a homelessness response system needs analysis and focus groups with persons of color who have experienced homelessness. The CRE process modeled what an optimal system to respond to all homelessness and reduce racial disparities would look like and what gaps need to be filled. The Plan is also responsive to requirements laid out in the California Comeback Plan to draw down key state housing and health funding. It is informed by and consistent with other local and regional efforts, including the [All Home Regional Action Plan](#), [Plan Bay Area 2050](#) and local city plans to address homelessness. Companion county and city-specific implementation plans that align with the Home Together 2026 Community Plan will speak to the specific roles of local jurisdictions in co-leading efforts to address homelessness, and the key roles of county agencies, community partners and specific resources.

The community of Alameda County adopts this plan and vision at a time when the future is uncertain. New resources received, both one-time and ongoing, provide the foundation for supporting this plan and its outcomes, but alone are not enough to realize its vision. The response to COVID-19 has shown that this community can pull together and work at speeds we have not seen before, a strong foundation to build from. However, we face continuing challenges including uncertainties from COVID-

19, unpredictable housing markets, future state, federal and local budgets, and a strained public and non-profit sector with significant capacity needs. All of these challenges require continuing the current level of unprecedented collaboration and coordination, building on the progress made to unify the community response and forge an aligned response system centered in racial equity.

Homelessness in Alameda County

On any given night over 8,000 people experience homelessness in Alameda County, a number that grows to approximately 15,000 people over the course of a year. More than 90% of homeless households in Alameda County are adults without minor children.

The homeless population does not reflect the demographics of the county. Dramatic racial disparities exist in Alameda County as in the nation, in which African Americans experience homelessness at more than four times their representation in the population (47% vs. 11%). Native Americans, multiracial people and Hawaiian Native/Pacific Islanders are also vastly overrepresented in homelessness, among those newly homeless, and in the rates at which they return to homelessness even after getting housing. These disparities call out the need to invest, both more and differently, in creating solutions that meet the needs of those overrepresented. Special populations such as transition age youth, veterans, older adults, survivors of intimate partner violence, people with behavioral health needs and people who have had involvement with the criminal justice system have additional risks and vulnerabilities leading to homelessness and require targeted resources and responses specific to their needs.

Homelessness Response System Needs Analysis

A systemwide needs analysis conducted in 2019-20 and updated in 2021 points to significant gaps in the current homelessness response system in the type and availability of housing resources to help people leave homelessness. Today, only an estimated 36% of those experiencing homelessness can be supported to end their homelessness with local resources or are able to find housing on their own. Each year, thousands of people remain homeless and new people who become homeless join them. Without significant effort and investment this trajectory will continue, and homelessness will continue to grow in Alameda County.

Importantly, focus groups with local stakeholders and people of color who have experienced homelessness and research on racial equity strategies informed the needs analysis. This expertise was used to develop the proposed new program models and pathways out of homelessness through new investments at every level. Housing investments needed to address the deep disparities include:

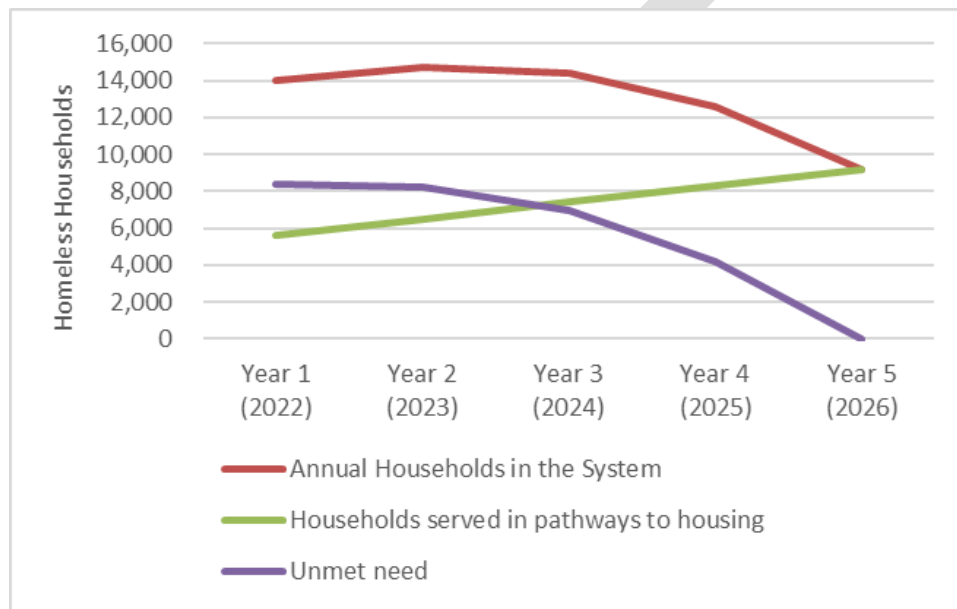
- Create significant additional affordable housing dedicated specifically for people experiencing homelessness
- Develop supportive housing for people who need increased supports, such as older and frail adults
- Grow the supply of transitional housing for youth
- Fund shallow and flexible rental assistance to fill gaps for people with limited incomes
- Expand current program models such as Rapid Rehousing and supportive housing¹
- Expand targeted behavioral health services throughout the system
- Improve and expand targeted homelessness prevention

¹ This Plan uses the term “supportive housing” to refer to all housing types that include ongoing subsidy and continuously available services, often referred to as “permanent supportive housing” or “PSH” in other contexts.

The 2021 update to the analysis explored different scenarios related to anticipated new homelessness and levels of investment to determine what will be required to fill significant system gaps. The scenario selected for this Plan seeks to reduce new entries to homelessness by prevention when possible, and to create a more robust response system with enough housing resources at the end of five years to provide a pathway out of homelessness to every person who does enter the homelessness response system.

Building a System Where People are Rehoused Quickly

Figure 1. Impact of Increased Investment on Homelessness Response System Outcomes



Source: CA-502 System Model, Abt Associates, 1/20/2022

Overall, increased investment in prevention and the addition of more than 24,000 housing opportunities in a variety of program models are needed to reach a point within five years at which the number of people who become homeless in a year and the number who are able to leave homelessness in that time are in balance. These 24,000+ interventions include everything from short-term support to prevent homelessness to ongoing rental subsidies and supportive housing with services.

In addition to the significant need for housing, because 79% of people experiencing homelessness in Alameda County are unsheltered, the Home Together 2026 Community Plan proposes a significant increase in shelter in the first two years, followed by a slow decline in shelter as more housing resources become available and less shelter is needed. Some added shelter will be able to be converted to much needed housing in later years, as has been demonstrated by successful Project Roomkey to Project Homekey transitions, which have created new permanent housing by renovating hotels used as shelters during the COVID-19 pandemic. By Year 5 the amount of shelter needed on an ongoing basis is expected to be slightly less than what is available today if all housing resources are in place.

The total cost of increasing the shelter and housing inventory over the coming five years to fully meet the need would be approximately \$2.5 billion. This includes roughly \$430 million for additional shelter capacity, \$1.68 billion for permanent housing such as dedicated affordable housing and supportive housing, and \$388 million for prevention, rapid rehousing and shallow (more limited) subsidies. This does not include the one-time development costs for acquiring or constructing new buildings, but covers operations and services, and subsidies to help people rent existing housing. The new investments should be made in alignment with the household types experiencing homelessness; roughly 10% (\$194 million) is needed for expanded inventory and resources for households with minor children, and 90% (\$2.3 billion) for the inventory and resources to serve adult only households, including transition age youth (ages 18-24 years). A range of federal, state and locally generated resources are needed to fill the gap. Without a significant federal investment in targeted Housing Choice Vouchers or similar rental assistance, meeting the dedicated affordable housing goal will be particularly challenging.

Goals and Strategies

To reach the expansion goals while decreasing racial disparities, the Home Together 2026 Community Plan recommends specific action steps in four categories:

1) Prevent Homelessness for our Residents

- a. Address racial disparities in mainstream/upstream systems to prevent racially disproportionate inflow into homelessness
- b. Focus resources for prevention on people most likely to lose their homes
- c. Rapidly resolve episodes of homelessness through Housing Problem Solving
- d. Prevent racially disproportionate returns to homelessness

2) Connect People to Shelter and Needed Resources

- a. Expand access in key neighborhoods and continue improvements to Coordinated Entry
- b. Lower programmatic barriers to crisis services such as prevention, problem solving, and shelter
- c. Prevent discharge from mainstream systems to homelessness
- d. Significantly increase the availability of shelter, especially non-congregate models, to serve vulnerable adults and families with children and to reduce unsheltered homelessness
- e. Provide accessible behavioral health services to people with serious mental illness or substance use needs and who are unsheltered, in shelter, or in supportive housing programs

3) Increase Housing Solutions

- a. Add units and subsidies for supportive housing, including new models for frail/older adults
- b. Create dedicated affordable housing subsidies for people who do not need intensive services
- c. Create shallow subsidies for those who can exit or avoid homelessness with more limited assistance
- d. Add new slots of rapid rehousing for those who can pay full rent over time
- e. Ensure new housing funding is distributed across the county according to need
- f. Reduce entry barriers to housing and ensure racial equity in referrals and placements

Estimated Number of Housing Solutions, by Type, Needed by 2026

Additional Supportive Housing Units	New Supportive Housing Units for Older/Frail Adults	New Dedicated Affordable	New Shallow Subsidies	Additional Rapid Rehousing Slots	Total Units & Subsidy Slots
4,195	3,190	10,070	5,240	1,645	24,340

Source: CA-502 System Model, Abt Associates, 1/20/22

4) Strengthen Coordination, Communication and Capacity

- a. Use data to improve outcomes and track racial equity impacts
- b. Improve messaging and information availability
- c. Build infrastructure to support new and expanded programs

Taken together, the significant increase in investment and the creation of new program models and pathways out of homelessness will lead to decreases in new homelessness, improved racial equity in outcomes, shorter lengths of time being homeless, and a reduced rate at which people return to homelessness.

The Home Together 2026 Community Plan adopts bold, ambitious, and measurable goals for Alameda County, both for reducing homelessness and for achieving greater equity. To bring these new programs and solutions into being will take every partner committing every available dollar from various sources in ways that uphold performance and invest in working and desired models. With these commitments and agreements for joint accountability we will, by 2026, be home, together.

1. Background and Introduction

This Home Together 2026 Community Plan (the Plan) lays out the goals and strategies needed to dramatically reduce homelessness in Alameda County by 2026 and combat racial disparities in homelessness through fully centering equity.

Foundations for this Plan

The Plan builds on a variety of processes and planning that occurred during the last two years, including:

- The racial equity analysis and homelessness response system modeling process detailed in the January 2020 [Centering Racial Equity in Homeless System Design](#) (CRE) report
- The Racial Equity Action Lab (convened by the Bay Area Regional Health Inequities Initiative), which centered lived expertise input and process recommendations on implementing the CRE
- The [Home Together Plan](#) framework adopted by the Alameda County Board of Supervisors in August of 2020

The Plan's overarching goals and time frame align with [Alameda County's Vision 2026](#), which holds as one of its primary objectives to "ensure the availability of diverse and affordable housing for all residents with the goal of eliminating homelessness in Alameda County." The Plan includes five-year targets for the creation of significant quantities of new housing and shelter in order to meet the unmet need of all people experiencing homelessness in Alameda County by 2026 in line with the recommendations in the CRE report. In addition, this Plan is responsive to requirements laid out in the [California Comeback Plan](#) to draw down key state housing and health funding. It is also informed by and consistent with other local and regional efforts, including the [All Home Regional Action Plan](#), and [Plan Bay Area 2050](#).

A forthcoming companion Home Together County Implementation Plan speaks to the specific role of the county in co-leading efforts to address homelessness with cities and community partners, and the roles of specific county agencies and resources. This Implementation Plan will lay out yearly goals consistent with the Plan and be used to track and report progress. Cities within Alameda County have participated in the community process to inform this overarching Plan and are encouraged to develop and adopt similar jurisdictional implementation plans to align with the Home Together 2026 Community Plan.

The initial Centering Racial Equity report and this Plan were supported by in-depth needs analyses conducted by Abt Associates, a HUD-funded technical assistance provider. The recommendations were informed by an extensive community input process which included participation from system leaders, homeless program participants, service providers and other partners in the homelessness response system. The process included research using local data and multiple focus groups with people of color who were currently or recently homeless regarding their race-impacted experiences. The CRE report resulted in recommendations for significant system additions but did not include action steps to implement the recommendations.

Updating the Homelessness Response System Needs Analysis

As the Home Together 2026 Community Plan was developed it became clear that some updating to the original needs analysis was necessary. The COVID-19 pandemic, which began shortly after the CRE report was completed, has changed the landscape of resources, and some data used from 2019 was

able to be updated with more complete information from the countywide Homeless Management Information System (HMIS). While some updates were made, there was a strong commitment to maintain the critical assumptions and decisions that were widely discussed in the CRE planning process. To consider changes and updates to the homelessness response system modeling, a planning group was jointly convened by the Alameda County Office of Homeless Care and Coordination (OHCC) and EveryOne Home (EOH), which staffs the CoC. The Strategic Planning Implementation Committee met bi-weekly from July 2021 to November 2021 to inform the Home Together 2026 Community Plan. The group included city and county staff, people with lived experience of homelessness, service providers, nonprofit organizations, advocates, and CoC Leadership Board members.² Various technical staff also met with Abt Associates, a HUD technical assistance provider, to review updates to the homelessness response system modeling.

2. Homelessness in Alameda County

Alameda County's most recently published full Point in Time Count (PIT) was conducted in 2019 and estimated a total of 8,022 persons were experiencing homelessness on a single day.³ Based on an annualization of the PIT, it is estimated that 15,786 people in 13,135 households experienced homelessness in Alameda County in 2019.⁴

Homelessness occurs across the county, though it is concentrated most in the north and mid portions.⁵ More than three-fourths of people experiencing homelessness (78%) report residing in Alameda County before becoming homeless.⁶

Table 1: Annual Estimates and Geographic Distribution of People and Households Experiencing Homelessness in Alameda County

Annual Estimates and Geographic Distribution of People & Households Experiencing Homelessness in Alameda County					
Geographic Regions in Alameda County	Estimated People Experiencing Homelessness Annually	Estimated Households Experiencing Homelessness Annually	Households with Only Adults	Households with Minor Children	Households with Only Children
Mid-County (Alameda, Hayward, San Leandro, Unincorporated)	2,920	2,430	2,221	182	27
North County (Albany, Berkeley, Emeryville)	2,605	2,167	1,981	163	24
Oakland	8,004	6,659	6,087	499	73
Tri-City (Fremont, Newark, Union City)	1,579	1,313	1,201	99	14
Tri-Valley (Dublin, Livermore, Pleasanton)	679	565	516	42	6
Total	15,786	13,135	12,005	985	144

Source: Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021.

Households of one or more adult(s) experiencing homelessness together without any minor children ("adult only") are estimated at 12,005 annually and make up 91% of households that are homeless over a year. Most such households are a single individual.

² See Appendix E for list of Home Together Contributors, including the Strategic Planning Implementation Committee.

³ Alameda County conducts a homeless Point in Time (PIT) count every two years. Due to COVID-19, the scheduled PIT count for 2021 was postponed to 2022.

⁴ EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

⁵ Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021. <https://everyonehome.org/centering-racial-equity/>

⁶ EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

Families with minor children are estimated at 985 households annually, representing 7.5% of all homelessness households.⁷ Child-only households (unaccompanied children, under age 18, who are homeless without any adults) represented less than 1% of the county's homeless population.⁸

People who identify as male make up more than 60% of the homeless population. Nearly three-fourths of the homeless population is between the ages of 25-59, though a growing percentage of people experiencing homelessness are seniors (14%) and nearly 10% are between 18 and 24, referred to as transition age youth (TAY).⁹

Table 2: Gender

Gender of people experiencing homelessness	
Male identifying	61%
Female identifying	35%
Transgender	2%
Non-binary	2%

Table 3: Age

Age of people experiencing homelessness	
Under 18	4%
18-24	9%
25-59	73%
60 and older	14%

Source: EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

Racial Disparities in the Homeless Population

While homelessness is widespread in Alameda County, it disproportionately impacts people of color, especially African Americans. The 2019 Homelessness Point in Time Count shows that people of color make up more than two out of three (69%) people experiencing homelessness in Alameda County. The groups most disproportionately affected are people identifying as Black or African American, and American Indian or Alaska Native. Black people account for 47% of the homeless population, compared to 11% of the general population in Alameda County. Native Americans make up four percent of the homeless population, compared with one percent of county residents. Homelessness also disproportionately affects Native Hawaiians/Pacific Islanders and Multiracial people in Alameda County.¹⁰

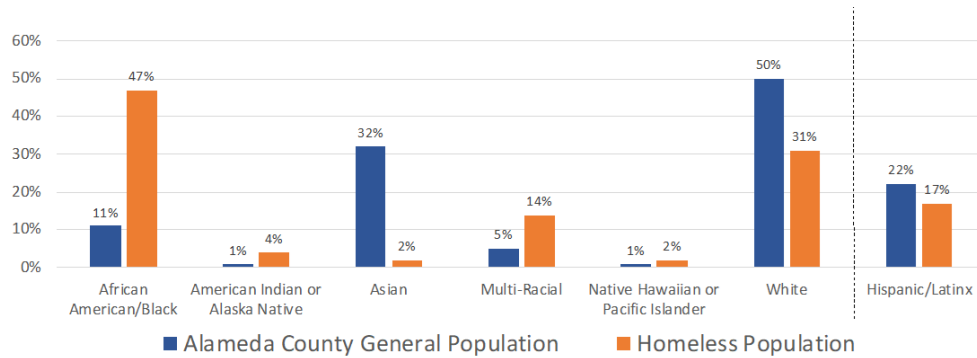
⁷ Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021. <https://everyonehome.org/centering-racial-equity/>

⁸ EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

⁹ EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

¹⁰ Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021. <https://everyonehome.org/centering-racial-equity/>

Figure 2: Racial Distribution of General Population and Homeless Population (2019)



Source: Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021.

Households with only adults are more disproportionately likely to be Black (58%) in comparison with the general population of Alameda County (11% Black).¹¹

The many specific needs and experiences of people of color experiencing homelessness are described in the CRE report, often in the words of people who have experienced homelessness. Without addressing the impact of racism in our society, homelessness will continue to disproportionately impact African Americans and other people of color. Creating a mix of housing and services in order to reduce these enormous racial disparities is a major focus of this Plan.

Special Populations

Several special populations who experience homelessness merit particular attention due to their specific or additional vulnerabilities, overrepresentation in the homeless population, and/or dedicated resources for addressing their needs. These include transition age youth, older adults, veterans, people with behavioral health needs, people impacted by intimate partner violence and people impacted by the criminal justice system. Section 5 below covers key resources available to meet the needs of these specific groups.

3. Homelessness Response System Needs Analysis and Modeling

People experiencing homelessness have a variety of needs, but the one commonality among all is the need for a home. The CRE process identified that Alameda County's homelessness response system does not have the interventions needed to permanently rehouse all people experiencing homelessness, and that reducing disparities and improving outcomes for the racial and ethnic groups most impacted by homelessness will require new types of housing programs, increasing all programs' availability, and improving program design and delivery. Opportunities identified to increase racial equity in the homelessness response system include:¹²

- Increasing the availability of homeless housing and subsidy models for people with extremely low incomes and a range of service needs;

¹¹ Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021. <https://everyonehome.org/centering-racial-equity/>

¹² Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021. <https://everyonehome.org/centering-racial-equity/>

- Creating a variety of more flexible resources, including homelessness prevention and rapid resolution resources, and targeting these resources to those who can resolve their homelessness without ongoing supports;
- Increasing access to housing and other programs by lowering entry and participation barriers that unnecessarily impact privacy or independence, and ensuring resources are spread throughout the county; and
- Communicating clearly about available resources, eligibility criteria and the process for accessing resources.

It is important to note that adding enough housing opportunities to effectively end homelessness will not address the larger crisis of affordability or meet the rental housing gap for low-income households. The need for more housing and greater affordability at a wide range of income levels is critical and remains, even if this plan is fully funded. An “optimal” homelessness response system is not necessarily an “optimal” or racially equitable housing system, which would require a much larger and more universal response, such as Housing Choice Vouchers and affordable units for everyone who is income-qualified. Stakeholders for this Plan believe that safe, stable, and affordable housing should be available to all who need it, a goal that can only be reached with a national commitment.

Building a System Where People are Rehoused Quickly

The CRE process identified a set of “pathways” in an optimal homelessness response system to allow every homeless person to end their homelessness and reduce racial disparities in homelessness. These pathways out of homelessness recognize different levels of need – from those who can resolve their homelessness on their own, to those who will need shelter, interim support and ongoing subsidies and services in order to remain housed. The pathways envisioned for adults and for families are somewhat different, based on different vulnerabilities and economic needs, but all are designed to respond to the root causes of homelessness and barriers to housing stability. Among the critical pathways envisioned is the addition of significant affordable housing targeted specifically to those who are experiencing homelessness. These resources must be available in a high-performing homelessness response system to end homelessness for Black and Native American adults, who encounter the greatest barriers to housing, are vastly over-represented among those who experience homelessness, and disproportionately return to homelessness once housed.¹³ [The original model and specific pathways for different population groups can be reviewed in the CRE report.]

The homelessness response system model used in the CRE process was updated in 2021 to inform the Home Together 2026 Community Plan. Most of the original assumptions were retained, particularly regarding the types and proportions of needed new housing and program models.

Updates to the system model included:

1. The decision to propose more shelter in addition to housing, to rapidly reduce unsheltered homelessness. This was not contemplated in the original system modeling but was highly recommended by the Strategic Planning Committee and jurisdictional partners;

¹³ For more detail about the CRE process to develop these pathways see Appendix A, C and D in the 2021 Centering Racial Equity in Homeless System Design Report. <https://everyonehome.org/centering-racial-equity/>

2. Updates to the length of time people are anticipated to spend in shelter to reflect current conditions and impacts of future investments more accurately;
3. Updates to certain cost assumptions based on current data; and
4. The decision to model for a modest decrease in new entries into homelessness by the end of the planning period, with an increased investment in prevention.

The recommendations that follow reflect the decisions above, including to work toward making prevention resources available before people lose their housing to reduce new homelessness over time. If new homelessness increases beyond the modeling predictions, the gap between what the system is able to offer and what is needed to serve all homeless households will be greater, and more costly to fill. [See [Appendix C](#) for a description of different scenarios considered and [Appendix D](#) for comprehensive system model data outputs].

Homelessness Continues to Grow Unless We Invest in Prevention and Housing

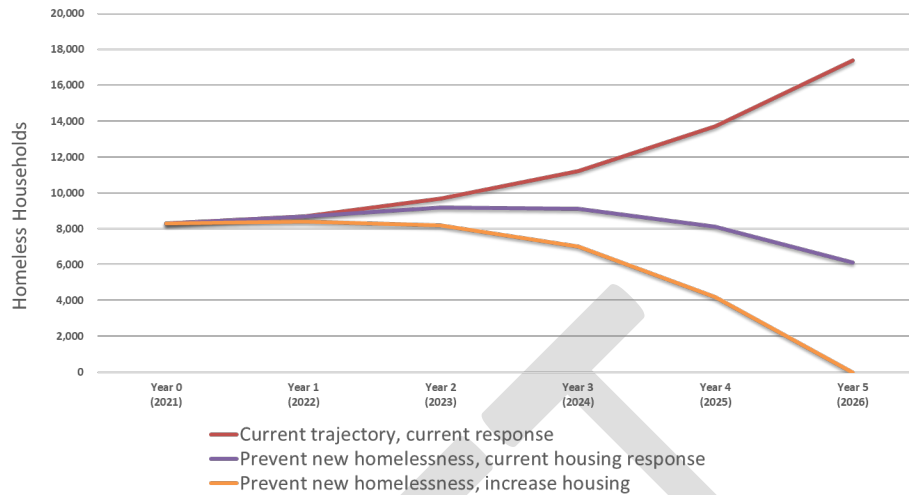
Every year new people experience homelessness in Alameda County, but the homelessness response system does not currently have enough capacity to keep up with annual inflow. This means that the increasing homeless population includes newly homeless people along with many people who became homeless in a prior year but could not get the assistance they needed to end their homelessness. In 2020 to 2021, just 36% (4,358) of adult only households experiencing homelessness exited homeless services, and 64% (7,647) remained in the homelessness response system. For households with minor children, 33% (321) of households exited the system in 2020-2021, while 67% (664) households remained.¹⁴

Figure 3 below illustrates that without significant changes in both approach and rate of investment, homelessness is likely to grow dramatically (red line). Even if the community successfully achieves a modest decrease in *new* homelessness over time, the current level of investment will not be enough to meet the need, and homelessness will remain high (purple line). However, with a significant increase in investment into the homelessness response system and a modest decrease in new homelessness, by year 5 (2026) the homelessness response system would be able to serve all of the need among homeless households, leaving no annual unmet need (orange line).¹⁵

¹⁴ HMIS Jul 1, 2020 to June 30, 2021. Data used in the CA-502 System Model, Abt Associates, 1/20/2022.

¹⁵ This is the point at which the system is right-sized, though recurring resources are still needed to address new inflow each year and to continue supporting ongoing system operations.

Figure 3. Impact of Investment Level on Unmet Need

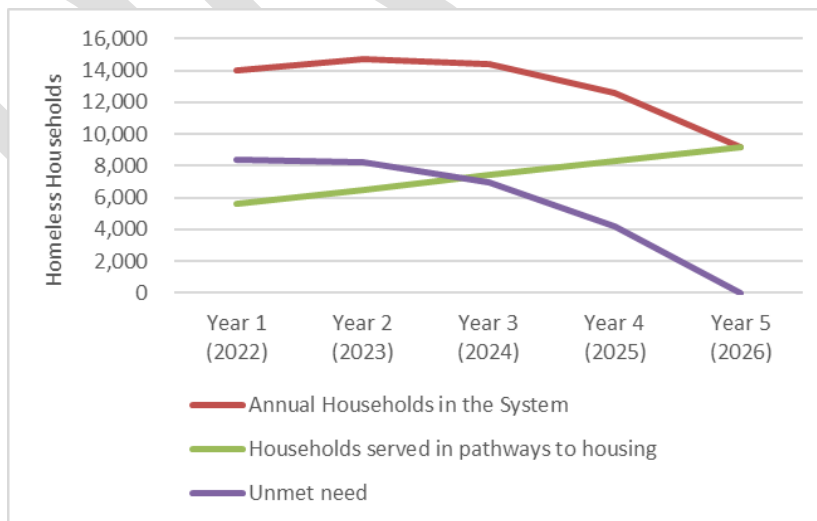


Source: CA-502 System Model, Abt Associates, 1/20/2022

Increased Investments Result in People Finding Housing Quickly, Not Remaining Homeless

Figure 4 below shows that with the modeled increase in investment and a modest decrease in new homelessness over time, in 5 years (by 2026) the total number of homeless households that need to be served annually by Alameda County's homelessness response system decreases by over 3,800 from 2021. In this scenario there is capacity to serve and assist 9,200 households into permanent housing by the homelessness response system in year 5 (2026). This is estimated to effectively eliminate unmet need (sometimes referred to as "functional zero"). Having no unmet need does not mean that new people do not continue to become homeless, but rather that for every new household that becomes homeless there are the appropriate resources available to help them back into housing within an average of 90 days.

Figure 4: Impact of Increased Investment on Homelessness Response System Outcomes



Source: CA-502 System Model, Abt Associates, 1/20/2022

Table 4 shows numerically how these decreases in inflow and increases in capacity might occur over time, until the need is equal to the resources available.

Table 4. Impact of Investments on Unmet Need Over 5 Years

5-Year Investment Impact Dashboard, All Homeless Households						
	Year 0 (2021)	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
New Homeless	4,000	4,800	5,300	5,300	4,700	4,300
Annual HH in the System	13,000	14,000	14,700	14,400	12,600	9,200
HHs Served in Pathways to Housing	4,700	5,600	6,500	7,400	8,310	9,200
Unmet Need	8,300	8,400	8,200	7,000	4,200	0
% Unmet Need	64%	60%	56%	49%	33%	0%

Source: CA-502 System Model, Abt Associates, 1/20/2022

Additions to Housing Inventory

To meet the reduction targets, a combination of new subsidy slots and housing units is needed. Table 5 below details the specific inventory growth in different program models and housing types needed to meet existing and anticipated future need among homeless households.

Table 5. 5-year Homelessness Response System Inventory Needs

5-Year Inventory Needs, All Homeless Households						
<i>Numbers below are cumulative, <u>not</u> new additions needed year over year</i>						
	Baseline Inventory (2021)	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution Slots	56	140	160	190	260	230
Crisis Response Beds (ES, TH, SH)	1,785 ¹⁶	2,760	3,410	3,140	1,810	1,390
TH for Youth	153	100	120	140	200	170
Rapid Re-Housing	535	1,180	1,370	1,560	2,180	1,940
Permanent Housing Resources						
Supportive Housing (PSH)	3,215	3,790	4,500	5,290	6,490	7,410
Supportive Housing (PSH) for Older/Frail adults	0	520	1,090	1,690	2,530	3,190
Dedicated Affordable Housing	0	1,570	3,320	5,240	7,870	10,070
Shallow Subsidies	0	830	1,740	2,750	4,090	5,240

Source: Source: CA-502 System Model, Abt Associates, 1/20/22

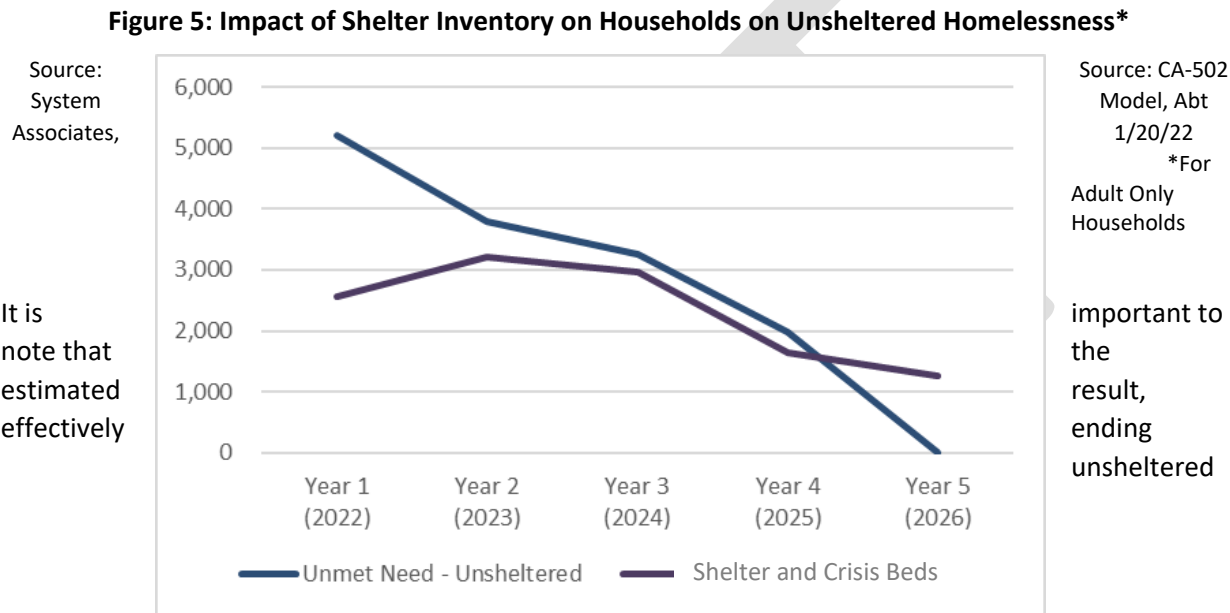
The table above also shows that in 2021 (the baseline year, or Year 0) Alameda County had 3,215 supportive housing units and 535 Rapid Rehousing slots for households experiencing homelessness,

¹⁶ Note that a decreased inventory of shelter is reflected here, and in the 2021 system modeling, to account for shelter decompression that occurred due to COVID-19 regulations.

and in order to serve all of the current and projected need of homeless households, our system will need an inventory of 25,910 permanent housing units and short and long-term subsidies by year 5 (2026) of the implementation plan.

Additions to Shelter Inventory

In addition to the significant expansion of housing resources, reducing unsheltered homelessness will require short-term growth in shelter availability. This Plan includes an immediate surge in shelter during the first two years, followed by a leveling off and then small decrease in shelter beds (purple line). This strategy, when combined with the addition of housing modeled above, results in a rapid and then sustained decline in unsheltered homelessness (blue line).



homelessness in Alameda County, only occurs when both housing and shelter capacity grow.

New Investment Needed

The total cost of scaling up both the shelter and housing inventory over the coming five years is an estimated \$2.5 billion. This includes roughly \$430 million for additional shelter capacity, \$1.68 billion for permanent housing such as dedicated affordable and supportive housing, and \$388 million for prevention, rapid rehousing and shallow (more limited) subsidies. These estimates include the ongoing operations of programs and buildings, and the services and subsidies to help people rent existing housing. They do not include the one-time development costs for constructing or acquiring new buildings.

The investments need to align with the household types in the homeless population: roughly 10% (\$194 million) for households with minor children and 90% (\$2.3 billion) for the resources to serve adult only households, including transition age youth.

Table 6. 5 Year Operations Cost for Homelessness Response System Inventory

5-Year Inventory Costs (operations only, not development)						
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)	5-Year Total
Prevention & Rapid Resolution	\$2,502,000	\$3,022,000	\$3,533,000	\$5,055,000	\$4,680,000	\$18,792,000
Crisis Response (Shelter/Interim)	\$85,667,000	\$109,121,000	\$103,566,000	\$61,480,000	\$48,402,000	\$408,236,000
Transitional for Youth	\$3,796,000	\$4,549,000	\$5,344,000	\$7,777,000	\$7,107,000	\$28,573,000
Rapid Re-Housing	\$26,166,000	\$31,374,000	\$36,824,000	\$52,978,000	\$48,683,000	\$196,025,000
Supportive Housing	\$95,786,000	\$117,213,000	\$142,068,000	\$179,312,000	\$210,917,000	\$745,296,000
Supportive Housing - Seniors & Medically Fragile	\$15,630,000	\$33,557,000	\$53,819,000	\$83,004,000	\$107,846,000	\$293,856,000
Dedicated Affordable Housing	\$33,099,000	\$72,010,000	\$116,971,000	\$180,761,000	\$238,329,000	\$641,170,000
Shallow Subsidies	\$9,050,000	\$19,666,000	\$31,881,000	\$48,613,000	\$64,196,000	\$173,406,000
Total	\$271,696,000	\$390,512,000	\$494,006,000	\$618,980,000	\$730,160,000	\$2,505,354,000

Source: Source: CA-502 System Model, Abt Associates, 1/20/22

Based on the system modeling, costs should drop substantially in years six and beyond, or whenever the unmet need is eliminated, as only those newly becoming homeless or returning to homelessness after housing need to be served.

Services Outside the Model

Although not represented in the system modeling, there are many critical services and resources that serve people during the time they are unhoused. These include Coordinated Entry, street outreach, housing navigation and landlord liaison programs, among others. These programs contribute to outcomes such as shortening the length of time that households remain homeless, improving health outcomes and behavioral health support, and increasing exits to housing. Some increases in these services are anticipated within this Plan as well.

4. Goals and Strategies

Drawing from the CRE recommendations to reduce racial disparities, the need for resources demonstrated by the system model and the feedback of people experiencing homelessness, the Home Together 2026 Community Plan calls for a focus on four primary goal areas.¹⁷ Each area below includes goals and action steps that align with the system model and overall homelessness reduction strategy.

These core goal areas largely correspond to critical system performance measures required by HUD and by the State of California, which will be tracked and reported on annually. In addition, the Alameda County community has determined to also measure its impact on rates of unsheltered homelessness and racial disparities in homelessness. Specific targets for reductions and improvements for each of the system performance measures below will be set in consultation with the community and with the State of California during FY 21-22 and adopted as an addendum to this Plan.

¹⁷ For more detail on the stakeholders involved in the CRE, the process of developing pathways and recommendations, please see the *Centering Racial Equity in Homeless System Design* report, available at <https://everyonehome.org/centering-racial-equity/>

1) Prevent Homelessness for Our Residents

Many of the people experiencing homelessness in Alameda County have been homeless for long periods of time or have had multiple episodes of homelessness. However, every year people experience homelessness for the first time and seek assistance from the homelessness response system, which lacks adequate resources to meet the needs of people who are already homeless. Data from the 2019 PIT count indicates approximately 31% of the people who are homeless at a point in time have become homeless for the first time.

Racial disparities among newly homeless households are even more extreme than among the homeless population overall, especially for African Americans, Native Americans, Native Hawaiian and Pacific Islanders and multiracial people.

Table 7. Racially Disparate Rates of New Homelessness

	African Americans	Native Americans	Multiracial	Native HI/Pacific Islander
Percent of County Population	11%	1%	5%	1%
Percent of newly homeless	58%	5%	6%	2%
Rate of new homelessness compared to population	5.3x	5x	1.2x	2x

Source: Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021.

Prevention assistance is typically administered outside the homelessness response system and covered by social service and community development funding streams. Research shows that while many low-income people experience housing crises that could lead to homelessness, people who are most likely to become homeless have specific risk factors including extremely low incomes, histories of homelessness, and living in highly impacted neighborhoods.¹⁸ To be effective, resources to prevent homelessness must target those with the greatest likelihood of becoming homeless. To reduce new incidents of homelessness, we must direct resources to those closest to becoming homeless who also lack assistance, and to those who have lost housing but can recover it with timely support.

Another contributing factor to continuing homelessness is that some households assisted into permanent housing through the homelessness response system may lose their housing again when program resources run out or circumstances change. Returns to homelessness in Alameda County are higher among African Americans and Native Hawaiian/Pacific Islanders.

Table 8. Disparities in Rates of Return to Homelessness, FFY 2019

	System Average	African Americans	Native Hawaiian/Pacific Islanders
Rate of Return to Homelessness	18%	21%	23%

Source: Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021.

¹⁸ Center for Evidence-based Solutions to Homelessness. Homelessness Prevention, A Review of the Literature. January 2019.

The Home Together 2026 Community Plan proposes to reduce the rates of return to homelessness by half, from 21% in 2022 (Year 1 of the Plan) to 9% in 2026 (Year 5 of the Plan).¹⁹ To address racial disparities in new homelessness and returns to homelessness, programs will be targeted and tailored to specific household needs and the county's providers and administrators will target and track these disparities.

Four activity areas specifically target reductions in new homelessness and returns to homelessness:

1. Address racial disparities in mainstream/upstream systems to prevent racially disproportionate inflow into homelessness

- a. Partner with school districts, social services agencies, child welfare, community health organizations and others to connect people to prevention and economic supports in a timely manner and through trusted sources.
- b. Work with criminal justice institutions to create housing planning and homelessness prevention resources.
- c. Ensure that workforce services are accessible to and structured to support people whose housing is unstable.

2. Focus resources for prevention on people most likely to lose their homes

- a. Work with government and private funders to increase targeted prevention for people most likely to become homeless. Highlight risk factors including extremely low incomes, histories of homelessness, and living in neighborhoods with high rates of poverty and evictions.
- b. Tailor outreach and prioritization to reach those at highest risk and coordinate these efforts in all areas of the county.
- c. Implement and expand shallow subsidy availability for people with fixed or limited income with housing insecurity to relieve rent burden and reduce the risk of becoming homeless.

3. Rapidly resolve episodes of homelessness through Housing Problem Solving

- a. Add resources to flexible funding pools for Housing Problem Solving, a practice of helping people newly homeless or on the verge of homelessness to identify rapid solutions to their situation with light financial support.
- b. Offer Housing Problem Solving training and funding throughout the system so that providers can quickly assist people when and where they seek help.

4. Prevent racially disproportionate returns to homelessness

To reduce disparities based on race, learnings from the CRE process demonstrate that providing ongoing or renewed support to people who have been homeless will improve equitable housing outcomes. Some specific areas highlighted as effective include:

- a. Target time-limited Rapid Rehousing resources to serve households with an ability to increase income. Given the high cost of rent in Alameda County, time-limited resources should be matched with people who have a feasible plan to pay market-rate rent or identify a replacement subsidy.

¹⁹ Source: Adult Only Household Model. CA-502 System Model, Abt Associates. 1/20/22. Note rates are for Adult Only households.

- b. Partner with educational, vocational and employment services to ensure that people moving toward employment have strong support in obtaining and maintaining employment. Build connections to educational programs with career pathways, supported employment for people who are formerly homeless, and job placement assistance for people seeking new roles.
- c. Establish a flexible funding pool for preventing homelessness, including a shallow subsidy option.
- d. Review and evaluate methods for determining types of housing placements to ensure high rates of success and avoid unsustainable housing placements.
- e. Provide additional support services, such as behavioral health care and case management, in existing sites and programs for people who have transitioned from homelessness to permanent housing.

Progress on this goal area will be tracked using two system performance measures and corresponding measures of increased racial equity.

System Performance Measure: Reduce the number who become homeless for the first time.

Racial Equity Measure: Reduce the racial disparities among people overrepresented within who becomes homeless for the first time: African Americans, Native Americans, Multi-racial people, and Native Hawaiian/Pacific Islanders.

System Performance Measure: Reduce the number of persons who return to homelessness after exiting homelessness.

Racial Equity Measure: Reduce the racial disparities among people overrepresented within who returns to homelessness: African Americans, and Native Hawaiian/Pacific Islanders.

2) Connect People to Shelter and Needed Resources

People experiencing homelessness need access to shelter and critical service supports while in crisis and while in the transition to housing. This will require expanding and supporting the network of agencies that serve as entry points for the homelessness response system and provide housing problem solving and housing navigation services. It necessitates reducing the barriers to entry to services for people experiencing homelessness. It will also require continued collaboration between local cities and the county to provide more robust and responsive services for both sheltered and unsheltered people experiencing homelessness.

In 2020 and 2021, Alameda County's homelessness response system significantly expanded access points and undertook improvements to the Coordinated Entry process which connects people experiencing homelessness to shelter and housing. Changes were made to increase the availability of Housing Problem Solving services targeting creative housing solutions and allowing Housing Resource Centers (designated access points) to support everyone who is experiencing homelessness who access their services. A separate crisis queue and process for shelter and transitional housing resources was recently established to shorten the time people in need wait for shelter. Greater transparency was built into the new process, with access points providing real-time communication to participants about available housing resources, their likelihood of receiving a match, and support to identify and pursue appropriate next steps. Continued oversight and improvement of the Coordinated Entry system is a priority for the future, and monthly Regional Housing Coordination meetings and Learning Communities are currently focused on improving coordination of care and increasing collaboration.

While this Plan focuses primarily on expanding housing availability to end homelessness, it also plans for a significant increase in shelter to provide homeless households safe places to be off the street and to connect to the rest of the homelessness response system's resources. During the 2019 PIT Count, nearly 80% of the population experiencing homelessness in Alameda County was unsheltered. During the COVID-19 pandemic the community rapidly stood up over 1,000 temporary shelter units in non-congregate settings such as hotels and trailers. People sheltered in these sites were connected to housing at much higher rates than those in traditional (congregate) shelter and unsheltered settings.²⁰

An analysis of the unsheltered population using homelessness data and health system data indicates at least 48% of unsheltered people contacted by a street outreach program have one or more vulnerabilities such as advanced age, a health or mental health condition, and/or barriers to housing like eviction history or criminal justice system contacts. Vulnerable unsheltered people in the county are also more likely to be African American than any other race or ethnic group. Shelter resources will be added to the portfolio of resources in the county for vulnerable adult only and family households, while still focusing most of the homelessness response system resources on housing additions to ensure homeless households can move quickly from shelter to housing. It is the goal of the Home Together 2026 Community Plan to gradually repurpose non-congregate shelter sites to be used as housing as the immediate need for additional shelter capacity subsides.

Behavioral health services are a critical component of service delivery in all areas of the homelessness response. Efforts are being made to increase clinical support available through Street Health, Shelter Health, and other teams as part of Health Care for the Homeless programs, in housing planning, and in tenancy sustaining services, in order to prevent returns to homelessness. Connections to mental health services are built into pathways to housing in the homelessness response system through emergency shelter, Rapid Re-Housing and supportive housing.

Five activity areas specifically help to connect people experiencing homelessness to shelter and needed resources:

1. Expand access in key neighborhoods and continue improvements to Coordinated Entry

- a. Expand neighborhood-based access points to the system's housing and shelter resources in places where people are most likely to lose housing or are currently experiencing homelessness
- b. Add access point outreach staff to connect people to these services in the field
- c. Set up monthly training for 211 operators
- d. Develop the capacity for 211 to track and follow up with people seeking resources
- e. Continue to track and evaluate the impact of updates to the Coordinated Entry System to ensure impacts are effective and support reductions in racial disparities

2. Lower programmatic barriers to crisis services such as prevention, problem solving and shelter

- a. Ensure that emergency shelters reduce unnecessary program requirements that discourage use or exclude people who need shelter

²⁰ Zeger, Cody. Evaluating Project Roomkey in Alameda County: Lessons from a Pandemic Response to Homelessness. May, 2021. Available at: <https://homelessness.acgov.org/reports>.

- b. Add additional resources such as laundry facilities, storage options, hygiene, harm reduction, health care and safety resources and available services that meet needs of sheltered and unsheltered people.
 - c. Prioritize using a harm reduction approach and making efforts to meet the specific and varied needs of people experiencing unsheltered homelessness. Improve communication to advertise the availability of resources for households experiencing homelessness
 - d. Provide training systemwide on diversity, equity, and inclusion, harm reduction, housing strategies, and other foundational topics
3. **Prevent discharge from mainstream systems to homelessness**
- b. Increase medical and mental health respite by 300 beds and include resources for rehousing. Stabilize and expand the board and care portfolio through new state funding and land trust to correspond with needs identified in the behavioral health system gaps analysis.
 - c. Implement an exit strategy for all unhoused criminal justice clients that includes shelter, housing, and supportive and behavioral health services.²¹
 - d. Connect transition age youth leaving foster care to youth-dedicated rapid and supportive housing programs through ongoing resources targeted to youth nearing exit from foster care.
4. **Significantly increase the availability of shelter, especially non-congregate models, to serve vulnerable adults and families with children and to reduce unsheltered homelessness**
- a. Add 1,625 temporary additional shelter beds to serve vulnerable adults and families with children. New shelter should be primarily non-congregate and include access to support services including behavioral health and health care to provide more supportive environments for residents.
 - b. As new housing comes online, transition non-congregate shelters into permanent housing or remove these shelter beds from the system as demand is reduced.
 - c. Ensure health and safety conditions in shelter programs through countywide standards and track and monitor input by shelter residents.
5. **Provide accessible behavioral health services to people with serious mental illness or substance use needs who are unsheltered, in shelter, or in supportive housing programs**
- a. Ensure crisis response and support is accessible for unsheltered people, and that mental health and harm reduction services are available for people in shelters and other programs in the homelessness response system.
 - b. Allocate resources towards increased behavioral and support services that will help people who are in permanent housing to maintain their housing.

Progress on this goal area will be tracked using the two measures above related to new and returning homelessness, and these two measures of reductions in unsheltered homelessness.

²¹ Evidence indicates a promising model in low-barrier non-congregate shelter for people exiting criminal justice settings, paired with housing navigation and tenant-based vouchers.

- **System Performance Measure:** Increase successful placements from street outreach to indoor locations.
- **Racial Equity Measure:** Monitor for racial disparities in placements from street outreach and address any disparities.
- **Additional Measure (Not a HUD or State Measure):** Reduce the number of people who are unsheltered at a point in time.
- **Racial Equity Measure:** Reduce the racial disparities among people overrepresented among those who are unsheltered.

3) Increase Housing Solutions

Both the homelessness response system modeling and interviews with people experiencing homelessness indicate that the single most important step to reduce homelessness dramatically and permanently is to create permanent housing opportunities for people experiencing homelessness throughout the county.

New projects to increase inventory include expansions in pathways and resources to exit homelessness such as Rapid Rehousing and supportive housing, as well as significant investment in newer program models such as dedicated affordable housing and shallow subsidies that provide people with housing that allows them independence and autonomy – a strategy recommended to be more effective in reducing racial disparities.

At publication of this Plan, a pipeline of new subsidies and housing projects in development are expected to increase available inventory by approximately 1,500 units in the first two years, but resources must be identified for thousands more units in order to achieve the inventory goals set forth in this Plan. New one-time resources are anticipated from both the federal and state governments which will assist with this goal, but ongoing local resources will be needed to meet the ambitious targets that are necessary to bend the curve.

Six activity areas are planned to grow the housing inventory and increase access to it (see table 12 below for numbers of units):

1. **Add units and subsidies for supportive housing, including new models for frail/older adults**
 - a. Expand the supply of supportive housing subsidies and units through prioritization and matching strategies, and new development funding.
 - b. Create a new model of supportive housing for older/frail adults with more intensive health service needs.
 - c. Provide services funding for supportive housing and supportive housing for frail/older adults through expansions of Medi-Cal enrollment and the California Advancing and Innovating Medi-Cal (CalAIM) program.
2. **Create dedicated affordable housing subsidies for people who do not need intensive services**
 - a. The CRE report and system model includes providing affordable housing without time limits for approximately 30% of the adult only households and 28% of family households in the homelessness response system.
 - b. Add capacity within the homelessness response system to support new dedicated affordable units including staff for a new flexible local operating subsidy program, additional Coordinated Entry staffing and lighter and variable supportive services.

3. **Create shallow subsidies for those who can exit or avoid homelessness with more limited assistance**
 - a. Develop shallow subsidies that provide fixed levels of support for those who are precariously housed or who have been previously homeless and need longer term but limited support.
4. **Add new slots of Rapid Rehousing for those who can pay full rent over time**
 - a. Couple Rapid Rehousing resources with expansions in employment programs.
5. **Ensure new housing funding is distributed across the county according to need**
 - a. The numbers of people and the significant subpopulations in each region are different. As much as possible, housing resources should be distributed based on the regional needs.
6. **Reduce entry barriers to housing and ensure racial equity in referrals and placements**

Table 9: Estimated Number of Housing Solutions, by Type, Needed by 2026

Additional Supportive Housing Needed	New Supportive Housing for Older/Frail Adults	New Dedicated Affordable	New Shallow Subsidies	Additional Rapid Rehousing slots	Total Units & Subsidy slots
4,195	3,190	10,070	5,240	1,645	24,340

Source: CA-502 System Model, Abt Associates, 1/20/22

Progress on this goal area will be tracked using two system performance measures and corresponding measures of increased racial equity.

- **System Performance Measure:** Increase the number of people exiting homelessness into permanent housing.
- **Racial Equity Measure:** Monitor for any emerging disparities and maintain racial equity within people exiting homelessness into permanent housing.
- **System Performance Measure:** Reduce the length of time persons remain homeless.
- **Racial Equity Measure:** Monitor for racial disparities in length of time homeless and address disparities.

4) Strengthen Coordination, Communication and Capacity

This plan emerges at a time of great uncertainty. While new resources to expand Alameda County's homelessness response system are anticipated, how much will become available when, and what may happen with COVID-19 and other factors which may impact homelessness, are unknown. For this reason, this Plan must be closely tracked and refined over time and its projections will be updated as new resources become available. A community-wide commitment to improve and use the community's HMIS data for tracking and accountability is a central tenet of the Plan.

Improved communication about efforts to reduce homelessness and impacts are also key to keeping the buy-in of partners and the confidence of the community. This includes expanding the range of partners from other systems of care that overlap with the homelessness response system (such as

health care, child welfare, and criminal justice), and ensuring that both housed and unhoused people have access to the best information about current and anticipated homeless resources.

Finally, the network of homeless programs and providers will have to be strengthened and will need to grow to reach the goals of the Home Together 2026 Community Plan. Alameda County benefits from a strong network of nonprofit agencies committed to addressing homelessness and delivering services and housing to those in need. But these agencies are stretched to close to capacity, are often under resourced, and do not fully represent the communities that experience homelessness. Support will be needed to help these partners recruit and retain staff. In particular, resources must be targeted to strengthen providers and partners and to expand contracts for organizations that serve, employ and are led by historically marginalized communities and Black, Indigenous and People of Color.

1. Use data to improve outcomes and track racial equity impacts

- a. Improve HMIS coverage and confidence in HMIS to be the primary method for future data tracking.
- b. Consider increasing the frequency of the PIT Count to annual (currently biennial) so that impacts to both sheltered and unsheltered homeless populations are able to be tracked and monitored more quickly.
- c. Improve tracking of resources and inventory to support ongoing evaluation and reporting.
- d. Improve data quality and regularly review system and program outcome data disaggregated by race.
- e. Work to incorporate a Results Based Accountability framework systemwide when tracking and measuring performance metrics.

2. Improve messaging and information availability

- a. Centralize homeless related resource information and provide regular system updates to a wide variety of partners.
- b. Provide an annual Home Together 2026 Community Plan update on progress and challenges with proposed modifications to the following year's action plan.
- c. Complete a full inventory of current and anticipated resources for all key partners in order to identify gaps in funding and strategies to fill these gaps.

3. Build infrastructure to support and monitor new and expanded programs

- a. Develop and strengthen career pathways in housing and service provider organizations.
- b. Provide support to service providers, clinics, outreach teams and nonprofit organizations serving homeless populations to improve their ability to hire, train and retain staff.
- c. Prioritize supporting the advancement of people with lived experience of homelessness in our county's systems of care.
- d. Expand provider networks to incorporate historically marginalized communities and more organizations led by and serving communities of color and support increased capacity within these networks.
- e. Ensure public and community agencies have staffing to meet expanded contracting and capacity needs.

- f. Ensure behavioral health services are accessible and resources are available to smaller service provider organizations.

There are no state required system performance measures that correspond to this goal area. The community will use the improved data collection process to track progress on all the other outcomes for this Plan. The partners will also track resources and investments to meet the Plan goals and to identify outstanding gap areas.

In addition, community partners will collect data to track the capacity of system partners and especially to expand resources for provider organizations serving historically marginalized communities and communities of color.

The sum of the activities undertaken in this Plan are expected to result in:

- **System Performance Measure:** Reduce the number of persons experiencing homelessness.
- **Racial Equity Measure:** Reduce the overrepresentation of African Americans, Native Americans, Multi-racial people and Native Hawaiian/Pacific Islanders among persons experiencing homelessness.

5. Specific Needs and Resources for Special Populations

Several special populations who experience homelessness merit attention due to their particular vulnerabilities, overrepresentation in the homeless population, and/or specific needs and resources for addressing their needs. These include transition age youth, veterans, older adults, people impacted by intimate partner violence, people with behavioral health needs and people impacted by the criminal justice system.

The housing pathways and resources described above are intended to meet the needs of all of Alameda County's homeless populations. Some resources are specifically targeted to certain subpopulations such as supportive housing for older/frail adults, and transitional housing for young adults in a transitional period of life.

Needs assessments conducted for each of these populations point to certain additional needs that the strategies of this Plan seek to encompass within the overall framework of increases in housing, shelter capacity and services inventory.

Transition Age Youth

Youth ages 18-24 comprised 9% of the overall population experiencing homelessness in Alameda County in the 2019 PIT count (702 individuals). Unaccompanied children, under age 18, represented less than 1% of the homeless population (29 individuals).²² These numbers represent a point in time and only include youth who were counted as sheltered in the homelessness response system or as unsheltered. During the 2019-2020 school year, public schools in Alameda County reported 4,445 homeless students, a number that includes young people under 18 who were doubled up or in hotel settings as well as those in shelter or unsheltered situations.²³

Youth who experience homelessness in Alameda County are very disproportionately African American, identify as LGBTQ and experience behavioral health issues at much higher rates than county or state residents.²⁴

²² EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

²³ Alameda County Youth Homelessness Demonstration Program. Application July, 2021.

²⁴ Alameda County Youth Homelessness Demonstration Program. Application July, 2021.

Table 4: Characteristics of Alameda County Homeless Youth

Characteristic	% of General Population	% of Homeless TAY Population
African-American	11% (Alameda County Youth)	63%
LGBTQ	10% (Alameda County)	42%
Experiencing mental health issues	25% (California)	43%

Source: Alameda County Youth Homelessness Demonstration Program. Application July, 2021.

The 2019 PIT Count shows that 82% of TAY experiencing homelessness in Alameda County are unsheltered.²⁵

Transition Age Youth (TAY) experiencing homelessness have particular needs due to their stage of development, and often include youth who have been impacted by the foster care system, the juvenile justice system, or both.

Youth report a need for greater access to all resources, increased supports to maneuver through and transition from program to program within the homelessness response system, and increased youth development trainings for service providers. Youth and providers have indicated that the homelessness response system should be improved to be more welcoming to youth, that stronger housing and employment connections for youth are needed so that youth can find and sustain housing, and that increased access to youth dedicated permanent housing and long-term subsidies would significantly build capacity to serve youth.

In work done to identify the specific needs of youth for Alameda County's application to HUD's Youth Homelessness Demonstration Program (YHDP), the following issues were identified as contributing to youth homelessness in Alameda County:²⁶

- Lack of affordable housing
- Lack of supports and resources to successfully transition out of institutional systems such as foster care and the juvenile justice system and into permanent housing
- Stigma, trauma and marginalization that creates barriers to accessing resources and maintaining housing
- Risk of return to homelessness from time-limited programs, especially for African-American and parenting youth
- Symptoms related to PTSD or other mental health issues that make it difficult to navigate the homelessness system and maintain stable housing
- Lack of safety at home or in home communities due to gender identity or sexual orientation
- High risk for commercial and sexual exploitation
- Unique challenges affecting the ability of unaccompanied immigrant youth to maintain safe and stable housing
- The impacts of racism, discrimination, and institutional racism for youth of color and Black and Native American youth in particular

²⁵ EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

²⁶ Alameda County Youth Homelessness Demonstration Program. Application July, 2021.

Resources for Youth

Currently, some shelter and housing inventory is set aside to meet young people's unique needs, and Alameda County's homelessness response system model for adult only households also includes specific pathways for TAY.²⁷

Additional resources currently available for TAY in Alameda County include the THP-Plus program and dedicated Continuum of Care grants.²⁸ The State of California requires that communities set aside at least eight to ten percent (in different funding rounds) of their Homeless Housing, Assistance and Prevention (HHAP) funds for the needs of Transition Age Youth. Alameda County and the CoC have used initial HHAP funding on increasing system access, additional interim housing, and services paired with housing subsidies dedicated to TAY.

In September 2021, the U.S. Department of Housing and Urban Development (HUD) awarded Alameda County CoC a \$6.5 million Youth Homelessness Demonstration Program (YHDP) grant. The funding will be used to create an in-depth plan and establish programs to meet the needs of youth at-risk of or experiencing homelessness and to work towards ending youth homelessness in the community.

Veterans

Historically, veterans have experienced homelessness at much higher rates than their proportion of the population. Recent resources and efforts have brought down the population of homeless veterans, however, they continue to be a significant part of the population. During the 2019 PIT Count in Alameda County, 692 veterans were experiencing homelessness, representing 9% of the county's homeless population. Of those, 690 were single individuals, and 79% of veterans were unsheltered.²⁹

Veterans experience additional needs and challenges based on their veteran status and, for many, their experiences in the military are linked to conditions such as Post-Traumatic Stress Disorder (PTSD). In the 2019 PIT Count survey, unsheltered veterans most frequently cited mental health issues as the primary cause of their homelessness (18%), while sheltered veterans most frequently cited a rent increase (13%) as the primary cause of their homelessness. Unsheltered veterans attributed their homelessness to job loss at nearly twice the rate as sheltered veterans (15% and 8% respectively).

Resources for Veterans

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 may involve different forms of financial assistance, including monthly cash payments to disabled veterans, health care, education, and housing benefits. Assistance to obtain these resources is critical, and not all veterans qualify.

In addition to these supports, the VA and HUD partner to provide targeted housing and support services to veterans currently experiencing homelessness or at risk of experiencing homelessness. These include the VASH (Veterans Affairs Supportive Housing) and SSVF (Supportive Services for Veteran Families) programs which provide permanent subsidies with services, and transitional subsidies, shallow subsidies and prevention support to veterans and their families. These resources provide a critical piece of the homelessness response system for most veterans, though some must still

²⁷ Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021. <https://everyonehome.org/centering-racial-equity/>

²⁸ Transitional Housing Program for young adults who exited foster care (including those supervised by Probation) on or after their 18th birthday and are not yet 24 years of age.

²⁹ EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

rely on general population resources as they are precluded from accessing VA supports based on discharge status or length of service.

Older Adults

Data from the 2019 PIT Count found that 14% of Alameda County's homeless population was over the age of 60. Thirteen percent (13%) of 2019 PIT Count survey respondents indicated that they were between 50 and 64 years old when they first experienced homelessness, and 3% were over the age of 65.³⁰

Recent national research predicts that the number of older adults experiencing homelessness will increase significantly over the next decade.³¹ This population has unique and often complex needs that require consideration in homelessness response system design.³² Geriatric conditions are common among older adults experiencing homelessness, and their health and risk of adverse impacts are comparable to housed adults who are 20 years older.³³ Services and housing that address geriatric conditions are needed for older homeless adults.

Resources for Older Adults

Recognizing that older adults often have additional and specific service needs, supportive housing for older/frail adults is included as a future inventory need for the homelessness response system as a more service-intensive version of supportive housing for formerly homeless adults who can no longer live independently. Stakeholders in the CRE process determined that our ideal homelessness response system should include enough inventory to serve 10% of adult only households with supportive housing for older/frail adults.³⁴ In addition, the model recognizes that many older adults live on fixed incomes which are often low and stagnant compared to housing costs. Dedicated affordable housing for older adults can ensure that many formerly homeless older adults will be able to live independently on fixed incomes. Alameda County's homelessness response system model includes pathways out of homelessness for older adults through access to dedicated affordable housing from both sheltered and unsheltered homeless living situations.

People Impacted by Intimate Partner Violence (IPV)

Histories of domestic violence and partner abuse (referred to in this plan as intimate partner violence) are prevalent among individuals experiencing homelessness and can be the primary cause of

³⁰ EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

³¹ "The Emerging Crisis of Aged Homelessness: Could Housing Solutions Be Funded by Avoidance of Excess Shelter, Hospital, and Nursing Home Costs?" (2019) | Culhane et al | University of Pennsylvania. <https://aisp.upenn.edu/wp-content/uploads/2019/01/Emerging-Crisis-of-Aged-Homelessness-1.pdf>

³² Geriatric Conditions in a Population-Based Sample of Older Homeless Adults (2017) | Kushel et al | *The Gerontologist*, Volume 57, Issue 4, August 2017, Pages 757–766. <https://academic.oup.com/gerontologist/article/57/4/757/2631974>

³³ Geriatric Conditions in a Population-Based Sample of Older Homeless Adults (2017) | Kushel et al | *The Gerontologist*, Volume 57, Issue 4, August 2017, Pages 757–766. <https://academic.oup.com/gerontologist/article/57/4/757/2631974>

³⁴ Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021. <https://everyonehome.org/centering-racial-equity/>

homelessness. Survivors of intimate partner violence (IPV) often lack the financial resources required for housing, as their employment history or dependable income may be limited.

For individuals in families with children surveyed in the 2019 PIT Count, the most frequently reported cause of homelessness was family or domestic violence (26%). Six percent (6%) of respondents from the 2019 Homeless PIT Count survey reported currently experiencing domestic violence or abuse. There was no difference observed between unsheltered and sheltered respondents (6% each). Domestic violence did vary by gender, as 4% of male respondents reported current experience compared to 10% of females. While there were very few transgender and gender non-conforming respondents, 8% and 3% reported currently experiencing domestic violence, respectively.

Twenty-six percent (26%) of 2019 PIT Count survey respondents reported a history of ever experiencing physical, emotional, or sexual abuse by a relative or by a person with whom they have lived, such as a spouse, partner, sibling, parent, or roommate. This also varied by gender, with 17% of male, 40% of female, 39% of transgender, and 16% of gender non-conforming respondents experiencing domestic violence in their lifetime.

Persons fleeing or impacted by intimate partner violence (IPV) have similar needs to others experiencing homelessness when it comes to housing and services but have other needs and circumstances that make their engagement with the homelessness response system even more challenging. Most victims of IPV often do not have access to unmonitored technology, making seeking help and client follow-ups difficult.

The COVID-19 pandemic has impacted IPV providers and programs significantly and the population fleeing violence that they serve.

- Crisis hotlines have seen a 30-70% increase in calls ³⁵
- Some providers are reporting increases of up to 150% in requests for mental health services (from 44,000 to 109,000)
- To address health concerns and follow COVID-19 protocols, shelter capacity including in domestic violence shelters has been decreased, and leaving some providers to serve between 30-50% fewer clients

These impacts have made access to the kind of support survivors need, including temporary crisis assistance, affordable housing, and supportive housing even more difficult. The Alameda County Health Care Services Agency's Office of Homeless Care and Coordination, Building Futures, Family Violence Law Center, and Eden I&R 211 have created a program design to establish a parallel and connected Coordinated Entry System for survivors of domestic violence, sexual assault, and human trafficking in Alameda County so they can better access needed support services, health care, and housing resources to begin to live a life free from abuse and homelessness.

Resources for Survivors of Intimate Partner Violence (IPV)

Resources for programs that meet the needs of survivors of IPV include dedicated shelters and transitional programs. Since COVID-19, Project Roomkey was created to use hotels to provide non-congregate shelter for people who are homeless and at high risk for complications from the disease. The Marina Village Inn in the City of Alameda provided 51 rooms of temporary shelter for women and children to allow for decompression of Domestic Violence shelters (to comply with COVID-19 protocols). These guests, as other Roomkey guests, are now prioritized for permanent housing.

³⁵ Family Violence Law Center. Presentation to the Alameda County Board of Supervisors. "Gender-Based Violence COVID-19 Coordinated Response." October 25, 2021.

The 2021 HUD-funded Emergency Housing Voucher program, also part of the COVID-19 relief effort, includes a partnership with victim services providers and a set-aside of 87 vouchers for survivors of violence. Voucher recipients will also be provided tenancy sustaining support services, including coaching for independent living and community integration. A new grant from HUD specifically for setting up Coordinated Entry to serve survivors will increase access to the rest of the homelessness response system resources.

People with Behavioral Health Needs

According to the 2019 PIT Count, adults with serious mental illness (SMI) comprised nearly one-third (32%) of Alameda County's homeless population, compared to 29% in 2017 and 18% in 2015. As reflected in the overall homeless population, close to 80% of homeless adults with SMI were unsheltered. The most frequently reported health conditions among survey respondents were psychiatric or emotional conditions (39%), followed by post-traumatic stress disorder (30%) and substance use (30%). Twelve percent (12%) of PIT Count survey respondents cited the primary event or condition that led to their current homelessness as mental health issues, and 10% said substance use issues. Twenty-one percent (21%) indicated that mental health services might have helped them retain their housing and 38% cited the need for behavioral health services (e.g., mental health and substance use counseling).

Structural racism and racial disparities in homelessness contribute to and exacerbate mental health needs. A wide body of research points to links between racial discrimination and negative effects on mental health.³⁶ Additional research also links the adverse impacts of experiencing homelessness such as stress, anxiety, isolation, and sleep loss to worsening mental health problems.³⁷ An analysis of people experiencing unsheltered homelessness in Alameda County that had encounters with street outreach indicates that nearly half (48%) are particularly vulnerable due to advanced age and/or one or more health or behavioral health conditions including mental health and substance use disorders.³⁸

California's Department of Health Care Services (DHCS) recently conducted a needs assessment for behavioral health care services statewide and surveyed consumers and family members on needed housing supports. Many of the comments corresponded closely to the Alameda County CRE report findings. Unmet needs cited as priorities included:

- Additional housing capacity, due to low vacancy rates and lack of affordability
- Additional supportive housing options for adults that provide wraparound behavioral health services, such as Full Service Partnerships
- Additional capacity in longer-term adult residential facilities, sober living and recovery residences

³⁶ American Public Health Association. Structural Racism is a Public Health Crisis. APHA Policy Statement. October 24, 2020. <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2021/01/13/structural-racism-is-a-public-health-crisis>

³⁷ Mental health problems are often a consequence—not a cause—of homelessness. KALW San Francisco. Published December 7, 2016. <https://www.kalw.org/show/crosscurrents/2016-12-07/mental-health-problems-are-often-a-consequence-not-a-cause-of-homelessness#stream/0>

³⁸ From a 2021 Analysis of SHIE and HMIS data for unsheltered persons with a street outreach contact.

- Efforts to address barriers to building or siting housing for individuals living with mental health issues and individuals living with substance use disorders (SUD), and to ensuring that housing providers are willing to accept behavioral health clients³⁹

Resources for Those with Behavioral Health Needs

Alameda County (through Alameda County Behavioral Health and Berkeley Mental Health) receives specific funding to meet the needs of homeless and formerly homeless people with behavioral health needs. This includes Mental Health Services Act (MHSA) funding, which supports 13 Full Service Partnership contracts (representing \$31m) with behavioral health providers. Full Service Partnerships provide intensive services and supports and coordinate access to housing, education, and employment for formerly homeless people with severe mental illness (SMI). The State's No Place Like Home program provides funding for housing dedicated for people with SMI and Alameda County has secured \$129m. For several years the Whole Person Care program provided significant support for housing and for navigation and tenancy sustaining services. As this resource transitions to CalAIM, Alameda County is working with health plans to continue to provide these community-based services and to provide some of the clinical and other supports for supportive housing.

People Impacted by Criminal Justice System Involvement

Nine percent (9%) of respondents to the 2019 Homeless PIT Count survey reported being on probation at the time of the survey, and 3% reported being on parole.

Homelessness and incarceration are often correlated. Individuals without stable housing are at greater risk of criminal justice system involvement, particularly those with mental health issues, veterans, and youth. Individuals with past incarceration face significant barriers to exiting homelessness due to stigmatization and policies affecting their ability to gain employment and access housing opportunities. Research has found that formerly incarcerated people were almost ten times more likely to experience homelessness than the general public.⁴⁰

Structural racism and widespread racial discrimination have resulted in stark racial disparities in the criminal justice system as people of color are more often targeted, profiled and arrested for minor offenses, especially in high poverty areas. A criminal history can be a barrier to securing both housing and employment, and rates of homelessness among people exiting jails and prisons is high as they often face significant challenges accessing safe and affordable housing.⁴¹

Focus groups of people with lived experience of homelessness convened to inform Alameda County's original homelessness response system model (detailed in the CRE report) discussed how incarceration impacted their ability to find and keep housing. While incarceration is a barrier to housing and employment for anyone, the well-documented mass incarceration of Black, Latinx, and other people of color means that incarceration is a barrier to housing that is disproportionately impacting people of

³⁹ State of California Department of Health Care Services, Assessing the Continuum of Care for Behavioral Health Services in California Data, Stakeholder Perspectives, and Implications, January 10th, 2022

⁴⁰ EveryOne Counts! Alameda County Homeless Count & Survey. Applied Survey Research (ASR). 2019.

⁴¹ National Alliance to End Homelessness. Homelessness and Racial Disparities.
<https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/inequality/>

color. Focus group participants also highlighted the impact of structural racism in systems such as mass incarceration, and how involvement in these systems makes it difficult to increase income.⁴²

Resources for Formerly Incarcerated People

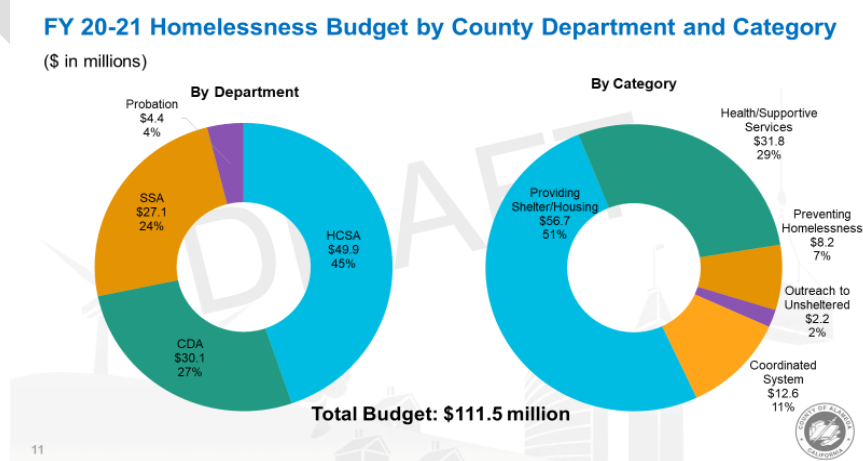
Currently, the Probation Department receives direct funding for Rapid Rehousing and transitional housing programs for people re-entering the community from incarceration (reentry).

In May 2020, the Alameda County Board of Supervisors directed the Alameda County Health Care Services Agency Behavioral Health Department to develop a plan to reduce the number of incarcerated individuals with behavioral health conditions within the jail. The multi-year plan, estimated to cost \$50 million, includes extensive stakeholder engagement, internal county department research, and consultation. One primary area of focus is to strengthen connections between and across sectors to close any gaps and improve post-release service participation. Strategies include expansion of access to urgent care and crisis services, expansion of forensic linkage programs, and development of a Transition Age Youth Full Service Partnership. The plan will prioritize the care of “high utilizers” of county behavioral health and county forensic services to ensure that justice involved people are connected to appropriate treatment and facilities, and are able to access short term housing, permanent housing and board and care facilities.

6. Resources, Gaps and Allocation Plan

Today, homelessness in Alameda County is addressed through a wide variety of both homeless-targeted and general population resources from federal, state, and local government funds as well as private sources. In FY 20-21, the estimated Maintenance of Effort (MOE) budget for funds identified and allocated toward the homelessness response system just for the county exceeded \$110 million. This does not include funding that cities invest directly in their own efforts or in nonprofit programs, nor private dollars that nonprofit organizations raise. It is estimated that all together the resources in the homelessness response system annually are closer to \$183 million, apart from one-time COVID funds.

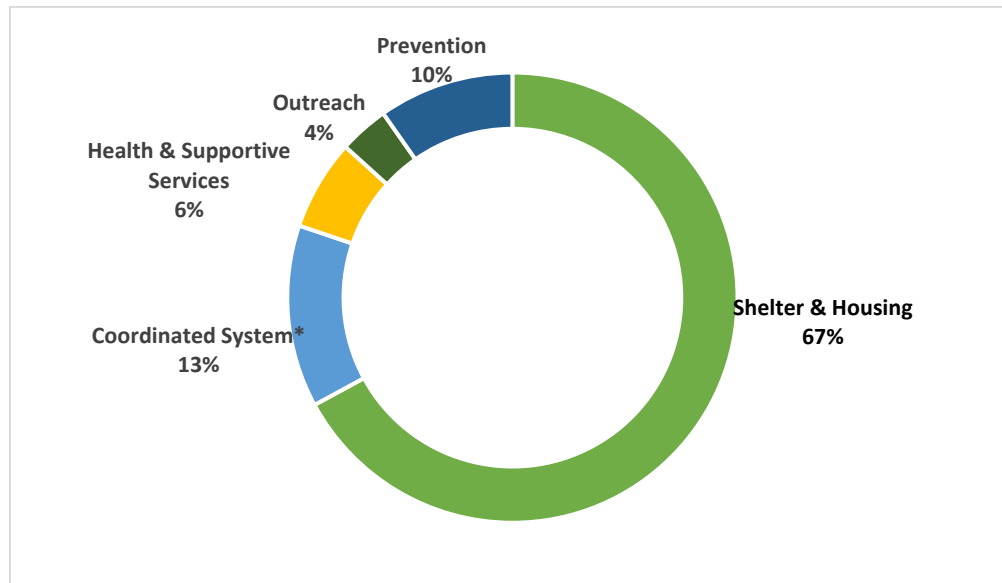
Figure 6. FY 20-21 Homelessness Budget by County Department and Category



⁴² Oakland-Berkeley-Alameda County Continuum of Care. Centering Racial Equity in Homeless System Design. January 2021. <https://everyonehome.org/centering-racial-equity/>

In FY20-21, Cities across Alameda County collectively allocated \$73 million in funding to address homelessness across the categories of shelter and housing, coordinated system, health and supportive services, outreach, and prevention.

Figure 7. FY 20-21 City Homelessness Budgets



Jurisdiction	Direct Federal/State/County	General Fund	Total FY20-21	% of Total
Oakland	\$20,220,000	\$8,130,000	\$28,350,000	15.35%
Berkeley	\$20,729,241	\$4,458,540	\$25,187,781	13.64%
Fremont	\$7,750,806	\$1,847,336	\$9,598,142	5.20%
Hayward	\$3,944,207	\$2,030,740	\$5,974,947	3.23%
Alameda	\$936,971	\$189,856	\$1,126,827	0.61%
Livermore	\$456,661	\$490,547	\$947,208	0.51%
Union City	\$190,726	\$341,132	\$531,858	0.00%
Albany	\$395,000	\$53,000	\$448,000	0.24%
San Leandro	\$258,206	\$121,000	\$379,206	0.21%
Emeryville	\$0	\$368,500	\$368,500	0.20%
Pleasanton	\$0	\$275,000	\$275,000	0.15%
Dublin	\$0	\$37,338	\$37,338	0.02%
Total City	\$54,881,818	\$18,342,989	\$73,224,807	39.64%
		County	\$111,500,000	60.36%
		All Funding	\$184,724,807	100.00%

To achieve the needed level of expansion will take a significant investment of new resources. Some of these resources could come from increases in federal supports and from state investment in expanding affordable housing and ending homelessness.

With resources from a notable budget surplus, the State of California has recently committed to a one-time investment of more than \$12 billion in homelessness and another \$10.3 billion in affordable housing.⁴³ As a result, Alameda County and the City of Oakland anticipate new funds from the state Homeless Housing, Assistance and Prevention (HHAP) grant, and potentially from Project Homekey and other new programs such as the Encampment Resolution Funds and Family Homelessness Challenge Grants.

These new funds will build on investments already in the inventory pipeline for homeless housing units from the state's No Place Like Home program and Alameda County's Measure A1, which contribute to new housing units set to open in the first few years of the Plan.

Due to the advent of COVID-19, a range of one-time funds to provide shelter and housing have also already been put to work. The federal FEMA program, state Project Roomkey and matching local funds opened hundreds of hotel rooms for people impacted by or at risk of COVID-19, and the state's Project Homekey and federal Emergency Housing Vouchers have helped transition some of these hotels to permanent housing while providing housing vouchers for 900 people experiencing homelessness. The investment from these programs has expanded capacity for more than 1,300 people in permanent housing, just from the initial allocations through 2021.

This unprecedented infusion of funding will help to jump start the Plan goals for both housing and shelter expansion, but the one-time nature of most the funding and the growing gap in the later years of the plan still leave a significant gap that will need to be filled. Locally generated resources will be needed along with sizeable expansions in federal resources. In particular, it will be extremely challenging to meet the dedicated affordable housing goal in this Plan without a significant expansion of federal Housing Choice Vouchers with specific targets for people currently experiencing and at high risk of homelessness.

In addition to the need for significantly more funding and resources to expand housing and program capacity, resources will need to be distributed throughout the County, aligned to these joint goals and with built-in accountability. In 2021, representatives from cities and county agencies proposed a method for allocating funds that pass through the county, intended for homelessness response. [See Appendix B.]

Because the county is a direct recipient of many funds and has the ability to support efforts throughout the entire geography, Alameda County and CoC partners will coordinate a countywide effort to leverage city and county resources. The cities will play a critical role, both through the provision of local, and some dedicated federal and state resources, and as overseers of land use planning for shelters and permanent housing. Together these partners will work to align efforts and stretch both the existing resources and new funding as it emerges.

Project funding through this collaborative allocation plan will be directed to programs meeting the performance goals outlined in this Plan, and programs that show a plan for targeted capacity in small, emerging and/or BIPOC led (and serving) agencies, and new innovative programs.

⁴³ Governor Newsom Signs Historic Housing and Homelessness Funding Package as Part of \$100 Billion California Comeback Plan. (July 19, 2021). <https://www.gov.ca.gov/2021/07/19/governor-newsom-signs-historic-housing-and-homelessness-funding-package-as-part-of-100-billion-california-comeback-plan/>

Completing a full inventory of current and anticipated resources is a next step to access state funding and to track investments in the Plan. Resource tracking will be reported annually. The county and city partners will create implementation plans with two-year cycles including anticipated investments and timelines for unit and program creation, which will be updated and reported during each two-year cycle.

7. Conclusion

The Home Together 2026 Community Plan is the result of bold visioning and commitment across all county stakeholders to look critically at what is happening today in Alameda County's homelessness response system, and to recognize that without significant new investment and effort, homelessness will not decrease and will in fact continue to grow. The human cost of continued widespread homelessness, and the vast racial disparities among those most impacted, are not acceptable. The situation requires unprecedented coordination, commitment, and investment.

To reverse the trend and make dramatic progress on reducing homelessness, the Home Together 2026 Community Plan adopts bold, ambitious, and measurable goals, both for reducing homelessness and for achieving greater racial equity. The Plan builds from results of system modeling and racial equity analysis to lay out new program models and pathways to help people back into housing. To bring these new programs and solutions into being will take committing every available dollar from the county and its partners in ways that uphold performance and invest in working and desired models. The countywide allocation plan envisions alignment between the county, cities, and other funders to make these investments possible.

The community adopts this Plan and vision at a time when the future is uncertain. New resources, both one time and ongoing, received in 2021 and anticipated in the future provide the foundation for achieving the Plan, but alone are not enough to realize its vision. The response to COVID-19 has shown that the community can pull together and can work at speeds we have not seen before; a strong foundation to build from. However, we face continuing challenges including uncertainties from COVID-19, unpredictable housing markets and future state, federal and local budgets, and an overtaxed public and non-profit sector with significant capacity needs.

These opportunities and challenges require sustaining a level of unprecedented collaboration and coordination, building on the progress made during the last two years and through COVID-19 to unify the community response and to build an aligned response system. With these commitments and agreements for joint accountability we will, by 2026, be home, together.

APPENDICES

- A. Glossary of Terms
- B. Detail on County Allocation Plan
- C. System Model Overview and Update
- D. System Modeling 5-Year Dashboards for Adult and Family Households
- E. Acknowledgements

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Appendix A. Glossary of Terms

Key Terms and Definitions

Adult Only Household: Represents one or more adult(s) experiencing homelessness together without minor children.

BIPOC: Black, Indigenous and people of color

Continuum of Care (CoC): A regional or local planning body that coordinates housing and services funding for homeless families and individuals.

Coordinated Entry System: Alameda County's Coordinated Entry System is used to connect residents experiencing homelessness to resources in our county's homelessness response system.

Emergency Shelter: Any facility that provides temporary shelter for people experiencing homelessness.

Homeless Management Information System (HMIS): A Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

First time homelessness (or new homelessness): A person or household who has lost housing and become homeless for the first time.

Homelessness Response System Model: A model for the optimal homelessness response system that effectively and equitably allocates resources and prioritizes investments to end homelessness.

Homeless: People who are residing in emergency shelter, transitional housing, on the street, or in another place not meant for human habitation.

Household with minor children: Represents one or more adult(s) experiencing homelessness together with minor children.

Housing Inventory Count (HIC): Required by HUD, the HIC is a point-in-time inventory of all of the dedicated beds and units within a Continuum of Care's homeless services system, categorized by type of project and population served.

Inflow: The number of people entering the homeless services system each year. Inflow is not synonymous with the number of people newly experiencing homelessness, as it also captures people with previous episodes of homelessness and homeless people with unmet needs carrying over from the previous year.

Non-congregate Shelter: Locations where each individual or household has living space that offers some level of privacy such as hotels, motels, or dormitories.

Housing Choice Vouchers: Funded by the U.S. Department of Housing and Urban Development, Housing Choice Vouchers assist low-income families, or those with disabilities, in finding safe and affordable housing in the private market. Local Public Housing Agencies issue Housing Choice Vouchers to qualified families.

Housing Navigation: Housing Navigation involves helping a household that is homeless develop a housing plan, address the barriers identified during the plan, and acquire documentation and complete forms required for housing.

Housing Pathway: The set of programs and resources expected to be used by a household experiencing homelessness in order to be temporarily sheltered and to become permanently housed. The modeling for the

Home Together 2026 Community Plan uses assumptions about a variety of different housing pathways to determine the resource needs and gaps.

Housing Problem Solving: Housing Problem Solving is an approach to help homeless households use their strengths, support networks, and community resources to find housing; a person-centered, housing-focused approach to explore creative, safe, and cost-effective solutions to quickly resolve a housing crisis.

Housing Resource Center: Dedicated Housing Resource Centers (also referred to as “Access Points”) are located throughout Alameda County and are locations where people experiencing homelessness can connect with available resources and services.

Long-Term Subsidy: A housing subsidy of long-term (more than five years) or unlimited duration that continues typically as long as the receiving household remains eligible based on income.

Older Adults: Adults aged 55 and older; also referred to as Seniors.

Permanent Supportive Housing (PSH): Permanent subsidized housing based on income and services to keep tenants in stable housing. In this Plan PSH is referred to as supportive housing.

Point in Time (PIT) Count: An unduplicated one-night estimate of both sheltered and unsheltered homeless populations (to be distinguished from the number of people experiencing homelessness annually).

Project Homekey: Through Project Homekey the state awards funding that allows municipalities to purchase and rehabilitate hotels, motels, vacant apartment buildings and other properties, and convert them into permanent, long-term housing.

Project Roomkey: Established in March 2020 as part of the state response to the COVID-19 pandemic, the purpose of Project Roomkey is to provide non-congregate shelter options for people experiencing homelessness, protect human life, and minimize strain on health care system capacity.

Racial Equity: The systemic fair treatment of people of all races that results in equitable opportunities and outcomes for everyone. All people are able to achieve their full potential in life, regardless of race, ethnicity, or the community in which they live.

Racism: A belief that [race](#) is a fundamental [determinant](#) of human traits and capacities and that racial differences produce an inherent superiority or inferiority of a particular race; behavior or attitudes that reflect and foster this belief.

Rapid Re-Housing (RRH): Time-limited rental subsidy and support services with the intention of the household taking over lease and sustaining on their own.

Sheltered homelessness: A person experiencing homelessness who is living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement.

Results Based Accountability: A framework that uses a data-driven, decision-making process to help communities and organizations identify population level results and monitor their programs' performance in order to determine how to improve their impact on the clients they serve.

Returns to homelessness: The rate at which people who have been homeless and become rehoused lose that housing and return to the homelessness response system.

Shallow Subsidy: A housing subsidy that is typically less than the amount of a full or deep subsidy such as a Housing Choice Voucher, and which is usually calculated at a flat monthly amount or a specific percent of rent. Shallow subsidies can be time limited or can be indefinite.

Street Health Outreach: Street Health Outreach teams provide access to care that meets the unique needs of people experiencing homelessness through regularly scheduled outreach services offered to unsheltered people living in homeless encampments, vehicles, and RVs. Street Health Outreach teams engage people living on the streets with highly accessible, patient-centered care. They strive to build relationships that lead to long-term health through connections to primary care, social services, housing, and other resources.

Structural Racism: A system in which public policies, institutional practices, cultural representations, and other norms work in various, often reinforcing ways to perpetuate racial group inequity.

System Performance Measure: Measures defined by HUD to evaluate and improve homeless assistance programs by understanding how programs are functioning as a whole and identifying where improvements are necessary.

Transition Age Youth (TAY): Youth between the ages of 18 and 24.

Unsheltered homelessness: A person 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.

Acronyms Used in the Home Together 2026 Plan

BIPOC: Black, Indigenous and People of Color

CoC: Continuum of Care

CRE: Centering Racial Equity (from the report [Centering Racial Equity in Homeless System Design](#))

DHCS: California's Department of Health Care Services

EOH: EveryOne Home

HCSA: Health Care Services Agency

HHAP: Homeless Housing, Assistance and Prevention Program

HIC: Housing Inventory Count

HMIS: Homeless Management Information System

HRC: Housing Resource Center

HUD: US Department of Housing and Urban Development

IPV: Intimate Partner Violence

LGBTQ: Lesbian, gay, bisexual, transgender, queer/questioning

OHCC: Alameda County's Office of Homeless Care and Coordination

PIT: Point-In-Time

PSH: Permanent Supportive Housing

PTSD: Post-traumatic stress disorder

RBA: Results Based Accountability

RRH: Rapid Re-Housing

SMI: Serious Mental Illness

SUD: Substance Abuse Disorder

TAY: Transition Age Youth

TH: Transitional Housing

THP: Transitional Housing Program

UIY: Unaccompanied Immigrant Youth

VA: U.S. Department of Veteran's Affairs

YHDP: Youth Homelessness Demonstration Program

DRAFT

Appendix B. Detail on County Allocation Plan

Framework for City-County Partnership on Resources to End Homelessness

Adopted on [February 24, 2022](#) at the joint meeting of Alameda County Board of Supervisors and Alameda County Mayors

Preamble:

The Alameda County Board of Supervisors and Mayors across the county's fourteen cities are committed to ending homelessness. We recognize that homelessness is a regional problem that requires a regional solution, with coordinated leveraging of city and county resources.

Alameda County is the jurisdiction best equipped to coordinate an overall, countywide effort, for the following reasons:

- While cities have increased local spending on homelessness to historic levels over the past several years, many of the largest sources of real and potential funding to address homelessness are administered primarily at the county level, including Continuum of Care (CoC) and other federal funding; state Homeless Housing, Assistance, and Prevention (HHAP); and other dedicated health and social services funding.
- In California, counties are the seat of the social safety net system and administer Medi-Cal, mental health, public health, and substance use disorder programs, CalFresh, and other federal and state welfare benefits. Ending homelessness, especially for people with high needs, requires a holistic, whole-person approach that draws on all these programs.
- Alameda County administers a Social Health Information Exchange and associated Community Health Record that facilitates whole-person care through data and care coordination across housing and health care providers.
- Alameda County manages the Coordinated Entry System, the federally-mandated mechanism for allocating homeless housing, shelter, and services.
- Alameda County administers the Homeless Management Information System (HMIS), the source of data for homelessness response system outcomes reporting to the federal and state governments.

The cities also play a critical role in ending homelessness through the provision of local and dedicated federal and state resources, and as overseers of land use planning for shelters and permanent housing. Cities have innovated programs and services and their capacity to fund/augment programs must be considered alongside local and regional priorities.

This document provides a framework to address shared jurisdictional priorities and resource capacity while acknowledging the county as the leader in coordinating regional funding initiatives aimed at ending homelessness. The framework is built on a countywide strategic plan to address homelessness and to reduce racial and ethnic inequities among people experiencing homelessness.

Framework:

Federal regulations and state law (AB 140) now both tie homeless funding levels to demonstrated progress toward reduction of homelessness using Federal System Performance Measures (HUD

measures). Alameda County partners plan to meet these requirements by executing the Home Together 2026 Community Plan, the Community's strategic plan to implement the recommendations in the Centering Racial Equity in Homeless System Design report.

Existing Programs/Projects:

- In order to be eligible for homelessness funding that originates or passes through Alameda County, a homelessness program must demonstrate how it meets the measurable performance goals outlined in the Home Together 2026 Community Plan. Alameda County, through its procurement mechanisms and based on funding regulations, makes the final determination of program eligibility for county-administered funding, which will be allotted to each CoC-defined region of the county proportionally to that region's share of the county's overall homeless population as per the most recent federal Point-In-Time Count (PIT).
- To best leverage city resources during each funding cycle, the county will provide to representatives from each region-city a list or "menu" of the services or programs it will be considering for county-allocated funding: specifically, the existing (or new) types of projects the county plans to invest in either because they clearly meet the recommendations in the Centering Racial Equity report/Home Together 2026 Community Plan, or because they are meeting clear performance thresholds in reducing homelessness.
- A city or region⁴⁴ can recommend programs to be considered for county-administered funds. Projects must:
 - Demonstrate how they already meet performance goals in the Home Together 2026 Community Plan; OR
 - Show a plan for targeted capacity (for small, emerging and/or BIPOC led (and serving) agencies or new, innovative programs), AND
 - Agree to:
 - Participate in county referral systems that prioritize vulnerable people for the most intensive services;
 - Use a "Housing First" approach;
 - Provide data in HMIS or, for domestic violence service providers, an equivalent data system
- Programs and referrals will reflect consumer choice and geographic ties.
- Projects currently receiving county-administered funding that meet performance benchmarks will receive priority consideration (within applicable procurement guidelines) for future County administered funding, with the goal of preventing disruptions in service. Similarly, if a city's direct allocation of state or federal resources is one-time or discontinued, projects funded by such sources that meet performance benchmarks will also receive priority consideration to prevent service disruption and any reduction in systemwide capacity.

⁴⁴ A "region" can be either:

- a. The grouping of cities and unincorporated areas of the county as currently defined by the CoC for the purposes of Coordinated Entry implementation; OR
- b. Two or more cities that, by formal MOU or contract, decide to partner together to provide a particular service or administer a particular program.

- If a program is not found to be eligible for funding or fails to meet performance benchmarks, the city and county work together on a transition plan for impacted participants.
- When measuring the performance of a candidate program/project, the county will:
 - Utilize data entered into the Homeless Management Information System (HMIS) as the chief data source.
 - Weight programs by vulnerability of the population the project serves. This could be accomplished by, among other things, cross-walking the households in the project's roster to their vulnerability score on Coordinated Entry assessments or to other information on vulnerability recorded in the Social Health Information Exchange.

New Projects/Programs:

- Cities or regions will be primarily responsible for “seed funding” for new projects. If the new project/program can meet a benchmark performance measure consistent with the Home Together 2026 Community Plan over the ensuing two years, the county agrees to prioritize it for future funding or match, if consistent with procurement requirements.
- The county agrees, at the request of the city or region, to consult with the city/region before it launches a new program, in order to confer on how that program can be best positioned to become eligible for future funding.
- If the County is successful in drawing down HHAP “bonus funding” pursuant to AB 140, the county may use some of its “bonus funds” from the state:
 - To match new city proposed programs/projects in the future;
 - To make targeted efforts to resolve encampments in the most-impacted census tracts in the county.

Appendix C. System Modeling Overview and Update

In 2019-2020 through the process of developing the Centering Racial Equity in Homeless System Design (CRE) report and recommendations for Alameda County's homelessness response system, Abt Associates, a HUD technical assistance provider, worked with local CoC stakeholders to model an optimal homelessness response system through a system modeling process. Data on system usage was analyzed and extensive focus groups were conducted with people with lived expertise and representing populations served by the homelessness response system in order to develop recommendations about pathways to housing and system inventory needs for various household types and subpopulations. More on this system modeling process and recommendations can be found in the 2021 [Centering Racial Equity in Homeless System Design](#) report and appendices.

The homelessness response system model developed for the CRE process was updated in 2021 to inform the Home Together 2026 Community Plan. Updates to the system model included:

- The decision to propose more shelter in addition to permanent housing, to rapidly reduce unsheltered homelessness. This was not addressed in the original system modeling but was highly recommended by the Strategic Planning Committee and jurisdictional partners;
- The decision to model for a decrease in new entries into homelessness by the end of the planning period, with an increased investment in prevention;
- Updates to length of time spent in shelter to more accurately reflect current conditions and impacts of future investments; and
- Updates to certain cost assumptions based on current data.

System Modeling Data Updates

In order to conduct this system modeling update, Abt Associates worked with local partners from the Alameda County CoC including the Alameda County Health Care Services Agency's Office of Homeless Care and Coordination, EveryOne Home and All Home. The table below details the indicators reviewed by the Data Committee for the 2021 modeling update and reflects any changes to the data used to inform the updated system model.

Indicator	Data Used in Original System Modeling	Data Used in 2021 Update	Data Source	Data Timeframe	Justification
Number of Homeless Households (HH) in the Homelessness Response System	12,005 Adult Only (AO) HH 985 HH with children	Same	Annualized PIT Count	2019 (PIT Count)	In original System modeling stakeholders agreed on using annualized PIT count to ensure that unsheltered were accounted for. Since more recent PIT Count data was not available, the 2019 annualized estimate was used in the system modeling update.

Indicator	Data Used in Original System Modeling	Data Used in 2021 Update	Data Source	Data Timeframe	Justification
Annual Percentage of Households Remaining Homeless	Baseline was 63% for AO and HH with minor children	AO HH: 64% HH with minor children: 67%	HMIS	Updated System Model: FY 2021 Original System Model: PIT self-reported data on length of time homeless	Rates were calculated based on numbers served (in the current data set).
HH Served That Led to an Exit From the System	37% served used for both AO and HH with minor children	AO HH: 36% HH with minor children: 33%	Updated system model: July 1, 2020 – June 20, 2021 Original system model: 2019	HMIS	From the original System Model “63% homeless more than a year” this was used to get to the 37% exited as the difference – 63% remained and the rest exited.
Annual % Increase in Homeless Households (returns to homelessness + first time homeless)	20%	20% (Year 1) 10% (Year 2) 0% (Year 3) -10% (Year 4) - 10% (Year 4)	2017 + 2019 PIT Count	County FY (July-June)	Estimate was developed for the original model, looking at the rate of PIT increase 2015-2017 (39%) and 2017-2019 (42%). This was used to estimate an annual increase of 20%. In the update, a more specific growth and decline rate were used that assumes continuing increases in the first years followed by modest declines.

Indicator	Data Used in Original System Modeling	Data Used in 2021 Update	Data Source	Data Timeframe	Justification
% of Baseline Homeless Population (HH) That are Considered First Time Homeless	AO HH: 45% HH with minor children: 43%	AO HH: 31% HH with minor children: 26%	2021 update used HMIS Original System Modeling used 2019 PIT Count data	July 1, 2020 – June 30, 2021 (HMIS) 2019	HMIS data provided a more detailed and accurate look at new homelessness.
Shelter Cost Assumptions	\$70/ bed night for congregate shelter	\$85/ bed night is used as an estimate for all shelter units	Estimate of costs taking congregate and non-congregate shelter costs into account	n/a	Congregate shelter cost estimate remains unchanged from 2019 system modeling. Non-congregate shelter is new to our homelessness response system as of 2020.
Baseline Length of Shelter Stay (LOS)	AO HH: 90 days HH with minor Children: 90 days	AO HH: 5 months HH with minor children: 7 months	For 2021 update, estimate is based on HMIS data for “leavers” For 2019 model, 90 days was an aspirational LOS	For 2021 update: July 2019 - June 2020	Changed to use more reflective LOS data instead of the target stay.
Shelter Inventory	1,335 Emergency Shelter Units	AO HH: 1648 units HH with minor children: 137 units	2021 data: 2021 HIC + additional inventory 2019 data: 2019 HIC + additional inventory	Housing Inventory Count (1/27/2021)	Includes non-congregate shelter additions. Leaves out all seasonal shelter. Reduces some of the capacity in the congregate shelters (per changes due to COVID-19). Does not include transitional housing.

Indicator	Data Used in Original System Modeling	Data Used in 2021 Update	Data Source	Data Timeframe	Justification
Housing Inventory Turnover Rate	8% turnover rate used for Permanent Supportive Housing (PSH) 5% turnover rate used for Dedicated Affordable and Shallow Subsidy programs	Same	FFY 2019	HMIS, APR report	Rates for PSH based on current information and did not change. Rates for new program models were predictions based on estimates for PSH.

System Modeling Data Update Notes

- Unless new data was available and could be justified for use, data, assumptions, and estimates used in the system modeling update maintained what was used for original Alameda County homelessness response system modeling (more detail available in the CRE report).
- All indicators used were defined for households with adults only as well as households with minor children.
- Housing inventory was only “counted” in the model when it has been occupied/leased up.
- Dashboard tables were presented in rounded numbers where possible.
- Turnover is calculated in the model and only new/recurring investments are added to the model.
- The system model only captures resources dedicated to the homelessness response system; it does not account for services and resources from behavioral health, criminal justice, child welfare systems, etc. unless resources are dedicated for individuals experiencing homelessness.

System Modeling Scenario Updates

The scenarios in the original system modeling compared two different system responses that considered anticipated need throughout the system as well as existing racial disparities. The updated system modeling used the information about current homelessness response system outcomes and the suggested pathways out of homelessness designed by the CRE process to make estimates about the programs and inventory needed to achieve an optimal homelessness response system that has the capacity to serve the needs of everyone experiencing homelessness within the next five years. The update used this information to explore three potential scenarios that respond to various external influences:

- **Scenario 1 – Steady Continued Increases in the Annual Number of People Experiencing Homelessness:** Growth at the same level as the four years prior to 2019 PIT Count (on average 20% increase in new homelessness per year). To meet the needs of all households in the homelessness response system takes a very significantly increased response.
- **Scenario 2 – Dramatic Increase in the Number of People Experiencing Homelessness:** New homelessness grows at an unprecedented rate (20% to 40%) in Year 1 of the model (2022) due

to the impacts of COVID-19 and as eviction moratoria are lifted, and then rates of inflow into homelessness continue as predicted in Scenario 1 (20% annual increase in years 2 and beyond). Meeting this need takes an extraordinary level of response that is not likely to be achievable over a five-year period.

- **Scenario 3 – Gradual Decrease in the Number of New People Experiencing Homelessness:** New homelessness experiences a similar increase to the past several years in Year 1 (2022) (a 20% increase in new homelessness), and then begins to decrease to a 10% increase in new homelessness in Year 2 (2023) and continues to decrease by -10% in Years 4 (2025) and 5 (2026). Meeting this need takes a significantly increased response including a focus on prevention, though the total resources needed are not as large as in Scenario 1 and Scenario 2.

The system modeling outputs for this Plan focus on Scenario 3 [see Appendix E. System Modeling 5-Year Dashboards for Adult and Family Households], as this scenario reflects the community's understanding of the importance of making prevention resources available before people lose their housing and addressing homelessness before it starts whenever possible to reduce the rate of new homelessness. If new homelessness increases beyond the modeling predictions, the gap between what our existing system is able to offer and what is needed to serve all homeless households in our system will be greater, and more costly to fill.

Appendix D. System Modeling 5-Year Dashboards for Adult and Family Households

The system modeling was conducted as two separate models, based on household types and different assumptions about likely pathways, and then brought together in a summarized form. Unless otherwise noted, the Home Together 2026 Community Plan presents the information in summary form covering both household types, adult only households and households with minor children.

The tables below show the initial system modeling by household type using the scenario which includes a modest projected decrease in new homelessness over 5 years and a significant increase in investment into the homelessness response system (resulting in an estimated 0% unmet need by Year 5).⁴⁵

Households with Adults Only

5-Year Inventory Needs, Households with Adults Only						
	Baseline Inventory (2021)	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	53	130	152	173	244	216
Crisis Response (ES, TH, SH)	1,648	2,562	3,221	2,964	1,652	1,253
Transitional Housing for Youth	153	104	121	138	195	173
Rapid Re-Housing	427	1,120	1,305	1,488	2,100	1,857
Supportive Housing (PSH)	2,736	3,351	4,054	4,837	6,013	6,914
Supportive Housing (PSH) for older/frail adults	0	521	1,086	1,691	2,532	3,194
Dedicated Affordable Housing	0	1,459	3,085	4,869	7,359	9,411
Shallow Subsidies	0	677	1,432	2,260	3,416	4,368
Total Permanent Housing Units Needed Annual	2,736	6,008	9,657	13,657	19,320	23,887
New Units Needed Each Year		3,272	3,649	4,000	5,663	4,567

⁴⁵ Source: Source: CA-502 System Model, Abt Associates, 1/20/22

5-Year Inventory Costs (operations only, not development), Households with Adults Only

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)	5-Year Total
HP/Rapid Resolution	\$2,340,000	\$2,818,080	\$3,303,643	\$4,799,257	\$4,375,978	\$17,636,958
Crisis Response (ES, TH, SH)	\$79,550,100	\$103,012,412	\$97,636,961	\$56,050,994	\$43,788,652	\$380,039,119
Transitional Housing for Youth	\$3,796,000	\$4,548,995	\$5,343,753	\$7,777,484	\$7,107,025	\$28,573,258
Rapid Re-Housing	\$24,920,000	\$29,907,338	\$35,124,277	\$51,057,669	\$46,504,054	\$187,513,338
Supportive Housing	\$84,780,300	\$105,643,186	\$129,828,804	\$166,235,357	\$196,878,728	\$683,366,375
Supportive Housing (PSH) for older/frail adults	\$15,630,000	\$33,557,400	\$53,819,457	\$83,003,543	\$107,846,254	\$293,856,654
Dedicated Affordable Housing	\$30,201,300	\$65,775,285	\$106,926,307	\$166,456,524	\$219,257,783	\$588,617,200
Shallow Subsidy	\$6,770,000	\$14,749,600	\$23,976,340	\$37,327,554	\$49,162,225	\$131,985,719
Total	\$247,987,700	\$360,012,295	\$455,959,543	\$572,708,383	\$674,920,700	\$2,311,588,621

5-Year Investment Impact Dashboard, Households with Adults Only

	Year 0 (2021)	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Households Returning From Previous year		21%	18%	15%	12%	9%
Increase in New Homelessness		20%	10%	0%	-10%	-10%
Number New Homeless	3,722	4,466	4,912	4,912	4,421	3,979
Annual HHs in the System	12,005	13,028	13,666	13,421	11,750	8,651
HHs Served in Pathways to Housing	4,358	5,213	6,068	6,923	7,778	8,633
Unmet Need	7,647	7,815	7,598	6,498	3,972	19
Unmet Need - Sheltered		2,605	3,799	3,249	1,986	9
Unmet Need - Unsheltered	6041	5,210	3,799	3,249	1,986	9
% Served in Pathways to Housing	36%	40%	44%	52%	66%	100%
% Unmet Need	64%	60%	56%	48%	34%	0%

Households with Adults and Children
5-Year Inventory Needs, Households with Adults and Children

	Baseline Inventory (2021)	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	3	9	11	12	13	15
Crisis Response (ES, TH, SH)	137	197	191	180	160	132
Rapid Re-Housing	108	56	64	72	79	87
PSH	479	435	444	456	473	493
Dedicated Affordable Housing	0	112	234	366	506	655
Shallow Subsidies	0	149	312	487	675	873
Total Permanent Housing Units Needed Annual	479	696	990	1,309	1,654	2,021
New Units Needed Each Year		217	294	319	345	367

5-Year Inventory Costs (Operations Only, Not Development), Households with Adults and Children

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)	5-Year Total
HP/Rapid Resolution	\$162,000	\$203,940	\$229,154	\$255,698	\$303,887	\$1,154,680
Crisis Response (ES, TH, SH)	\$6,116,850	\$6,108,467	\$5,929,370	\$5,428,668	\$4,613,010	\$28,196,365
Rapid Re-Housing	\$1,246,000	\$1,466,720	\$1,699,562	\$1,920,741	\$2,178,704	\$8,511,726
Supportive Housing	\$11,005,500	\$11,570,196	\$12,239,391	\$13,076,555	\$14,038,359	\$61,930,001
Dedicated Affordable Housing	\$2,897,440	\$6,235,187	\$10,045,047	\$14,304,037	\$19,071,578	\$52,553,289
Shallow Subsidies	\$2,279,700	\$4,916,808	\$7,904,872	\$11,285,138	\$15,033,309	\$41,419,827
Total	\$23,707,490	\$30,501,318	\$38,047,396	\$46,270,836	\$55,238,847	\$193,765,887

5-Year Investment Impact Dashboard, Households with Adults and Children

	Year 0 (2021)	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Households Returning from Previous Year		8%	8%	8%	8%	8%
Increase in New Homelessness		20%	10%	0%	-10%	-10%
Number New Homeless	256	307	338	338	304	274
Annual HHs in the System	985	997	992	939	804	591
HHs Served in Pathways to Housing	321	373	425	477	529	581
Unmet Need	664	624	567	462	275	10
% Served in Pathways to Housing	33%	37%	43%	51%	66%	98%
% Unmet Need	67%	63%	57%	49%	34%	2%

Estimates of Inventory Needs and Investment Impact by Geography

The breakdown of annual households in the homeless response system is based on the geographic distribution from the 2019 PIT count. The corresponding estimates of household composition and household needs are based on the assumptions that households in each geographic region have similar compositions and needs. In the future, additional data collection might inform a more nuanced understanding of needs in each community, for example, whether some communities have higher percentages of families with children, or whether some communities have a higher percent of people who need permanent supportive housing. This homeless response system modeling assumes the rates of inflow and rates of returns to homelessness are consistent across Alameda County's sub-geographies. Without detailed baseline inventory data disaggregated by region, it is also difficult to predict the number of additional units that would be needed in each sub-geography. The estimations below are based on an even distribution according to the 2019 PIT Count, and should not be taken as precise predictions of units needed in each jurisdiction.

Households with Only Adults

Total New Units Needed by Year 5 by Geography, Households with Only Adults						
	All CoC	East County	Mid-County	North County	Oakland	South County
PIT % by Geo.	100%	4.3%	18.5%	16.5%	50.7%	10.0%
Supportive Housing	4,178	180	773	689	2118	418
Supportive Housing (PSH) for older/frail adults	3,194	137	591	527	1619	319
Dedicated Affordable Housing	9,411	405	1741	1553	4772	941
Shallow Subsidy	4,368	188	808	721	2214	437
Total Units Needed	21,150	909	3,913	3,490	10,723	2,115

Entire CoC 5-Year Inventory Needs, Households with Only Adults						
	Year 0 (2021)	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	53	130	152	173	244	216
Crisis Response (ES, TH, SH)	1,648	2,562	3,221	2,964	1,652	1,253
Transitional Housing for Youth	153	104	121	138	195	173
Rapid Re-Housing	427	1,120	1,305	1,488	2,100	1,857
Supportive Housing	219	834	971	1,107	1,563	1,382
Supportive Housing (PSH) for older/frail adults	0	521	607	692	976	864
Dedicated Affordable Hsg	0	1,459	1,699	1,938	2,734	2,420
Shallow Subsidy	0	677	789	899	1,269	1,123
Total Shelter Inventory	1,801	2,666	3,342	3,102	1,847	1,426
Total Housing Inventory	699	4,741	5,523	6,297	8,886	7,862

East County 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	4.3%	4.3%	4.3%	4.3%	4.3%

Households returning from previous year	21%	18%	15%	12%	9%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	560	588	577	505	372
Annual Exits	224	261	298	334	371
Annual Remaining	336	327	279	171	1
% unmet need	60%	56%	48%	34%	0%

East County 5-Year Inventory Needs, Households with Only Adults

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	6	7	7	10	9
Emergency Shelter	110	139	127	71	54
Transitional Housing	4	5	6	8	7
Rapid Re-Housing	48	56	64	90	80
Supportive Housing	36	42	48	67	59
Supportive Housing (PSH) for older/frail adults	22	26	30	42	37
Dedicated Affordable Hsg	63	73	83	118	104
Shallow Subsidy	29	34	39	55	48
Total Shelter Inventory	115	144	133	79	61
Total Housing Inventory	204	237	271	382	338

Mid-County CoC 5-Year Investment Impact Dashboard, Households with Only Adults

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	18.5%	18.5%	18.5%	18.5%	18.5%
Households returning from previous year	21%	18%	15%	12%	9%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	2,410	2,528	2,483	2,174	1,600

Annual Exits	964	1,123	1,281	1,439	1,597
Annual Remaining	1,446	1,406	1,202	735	3
% unmet need	60%	56%	48%	34%	0%
Mid-County CoC 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	24	28	32	45	40
Emergency Shelter	474	596	548	306	232
Transitional Housing	19	22	26	36	32
Rapid Re-Housing	207	241	275	389	344
Supportive Housing	154	180	205	289	256
Supportive Housing (PSH) for older/frail adults	96	112	128	181	160
Dedicated Affordable Hsg	270	314	359	506	448
Shallow Subsidy	125	146	166	235	208
Total Shelter Inventory	493	618	574	342	264
Total Housing Inventory	877	1022	1165	1644	1454

North County 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	16.5%	16.5%	16.5%	16.5%	16.5%
Households returning from previous year	21%	18%	15%	12%	9%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	2,150	2,255	2,214	1,939	1,427
Annual Exits	860	1,001	1,142	1,283	1,424
Annual Remaining	1,290	1,254	1,072	655	3
% unmet need	60%	56%	48%	34%	0%
North County CoC 5-Year Inventory Needs, Households with Only Adults					

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	21	25	29	40	36
Emergency Shelter	423	531	489	273	207
Transitional Housing	17	20	23	32	29
Rapid Re-Housing	185	215	246	347	306
Supportive Housing	138	160	183	258	228
Supportive Housing (PSH) for older/frail adults	86	100	114	161	143
Dedicated Affordable Hsg	241	280	320	451	399
Shallow Subsidy	112	130	148	209	185
Total Shelter Inventory	440	551	512	305	235
Total Housing Inventory	782	911	1039	1466	1297

Oakland 5-Year Investment Impact Dashboard, Households with Only Adults

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	50.7%	50.7%	50.7%	50.7%	50.7%
Households returning from previous year	21%	18%	15%	12%	9%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	6,605	6,929	6,804	5,957	4,386
Annual Exits	2,643	3,076	3,510	3,943	4,377
Annual Remaining	3,962	3,852	3,295	2,014	9
% unmet need	60%	56%	48%	34%	0%

Oakland 5-Year Inventory Needs, Households with Only Adults

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	66	77	88	124	110
Emergency Shelter	1,299	1,633	1,503	838	635

Transitional Housing	53	61	70	99	88
Rapid Re-Housing	568	662	754	1,065	941
Supportive Housing	423	492	561	792	701
Supportive Housing (PSH) for older/frail adults	264	308	351	495	438
Dedicated Affordable Hsg	740	861	983	1,386	1,227
Shallow Subsidy	343	400	456	643	569
Total Shelter Inventory	1352	1694	1573	936	723
Total Housing Inventory	2404	2800	3193	4505	3986

South County 5-Year Investment Impact Dashboard, Households with Only Adults

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	10.0%	10.0%	10.0%	10.0%	10.0%
Households returning from previous year	21%	18%	15%	12%	9%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	1,303	1,367	1,342	1,175	865
Annual Exits	521	607	692	778	863
Annual Remaining	782	760	650	397	2
% unmet need	60%	56%	48%	34%	0%

South County 5-Year Inventory Needs, Households with Only Adults

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	13	15	17	24	22
Emergency Shelter	256	322	296	165	125
Transitional Housing	10	12	14	20	17
Rapid Re-Housing	112	131	149	210	186
Supportive Housing	83	97	111	156	138
Supportive Housing (PSH)	52	61	69	98	86

for older/frail adults					
Dedicated Affordable Hsg	146	170	194	273	242
Shallow Subsidy	68	79	90	127	112
Total Shelter Inventory	267	334	310	185	143
Total Housing Inventory	474	552	630	889	786

Households with Adults & Children

Total New Units Needed by Year 5 by Geography, Households with Adults & Children						
	All CoC	East County	Mid-County	North County	Oakland	South County
PIT % by Geo.	100%	4.3%	18.5%	16.5%	50.7%	10.0%
Supportive Housing	60	3	11	10	30	6
Dedicated Affordable Housing	655	28	121	108	332	66
Shallow Subsidy	873	38	161	144	443	87
Total Units Needed	1,588	68	294	262	805	159

Entire CoC 5-Year Investment Impact Dashboard, Households with Adults & Children					
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	100%	100%	100%	100%	100%
Households returning from previous year	8%	8%	8%	8%	8%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual HH in the System	997	992	939	804	591
Annual Exits	373	425	477	529	581
Annual Remaining	624	567	462	275	10
% unmet need	63%	57%	49%	34%	2%

East County 5-Year Investment Impact Dashboard, Households with Adults & Children					
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	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	4.3%	4.3%	4.3%	4.3%	4.3%
Households returning from previous year	8%	8%	8%	8%	8%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	43	43	40	35	25
Annual Exits	16	18	21	23	25
Annual Remaining	27	24	20	12	0
% unmet need	63%	57%	49%	34%	2%

East County 5-Year Inventory Needs, Households with Adults & Children

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	0	0	1	1	1
Emergency Shelter	8	8	8	7	6
Rapid Re-Housing	2	3	3	3	4
Supportive Housing	2	2	2	2	2
Dedicated Affordable Hsg	5	6	6	7	7
Shallow Subsidy	6	7	8	9	10
Total Shelter Inventory	8	8	8	7	6
Total Housing Inventory	16	18	20	22	24

Mid-County CoC 5-Year Investment Impact Dashboard, Households with Adults & Children

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	18.5%	18.5%	18.5%	18.5%	18.5%
Households returning from previous year	8%	8%	8%	8%	8%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	184	183	174	149	109
Annual Exits	69	79	88	98	108

Annual Remaining	115	105	85	51	2
% unmet need	63%	57%	49%	34%	2%
Mid-County CoC 5-Year Inventory Needs, Households with Adults & Children					
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	2	2	2	2	3
Emergency Shelter	36	35	33	30	24
Rapid Re-Housing	10	12	13	15	16
Supportive Housing	7	8	9	10	11
Dedicated Affordable Hsg	21	24	26	29	32
Shallow Subsidy	28	31	35	39	43
Total Shelter Inventory	36	35	33	30	24
Total Housing Inventory	67	77	86	95	105

North County 5-Year Investment Impact Dashboard, Households with Adults & Children					
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	16.5%	16.5%	16.5%	16.5%	16.5%
Households returning from previous year	8%	8%	8%	8%	8%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	164	164	155	133	98
Annual Exits	62	70	79	87	96
Annual Remaining	103	93	76	45	2
% unmet need	63%	57%	49%	34%	2%
North County CoC 5-Year Inventory Needs, Households with Adults & Children					
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	1	2	2	2	2
Emergency Shelter	33	32	30	26	22

Rapid Re-Housing	9	11	12	13	14
Supportive Housing	6	7	8	9	10
Dedicated Affordable Hsg	18	21	24	26	29
Shallow Subsidy	25	28	32	35	38
Total Shelter Inventory	33	32	30	26	22
Total Housing Inventory	60	69	77	85	93

Oakland 5-Year Investment Impact Dashboard, Households with Adults & Children

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	50.7%	50.7%	50.7%	50.7%	50.7%
Households returning from previous year	8%	8%	8%	8%	8%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	505	503	476	408	300
Annual Exits	189	216	242	268	295
Annual Remaining	316	287	234	139	5
% unmet need	63%	57%	49%	34%	2%

Oakland 5-Year Inventory Needs, Households with Adults & Children

	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	5	6	6	7	8
Emergency Shelter	100	97	91	81	67
Rapid Re-Housing	28	32	37	40	44
Supportive Housing	19	22	24	27	29
Dedicated Affordable Hsg	57	65	73	81	88
Shallow Subsidy	76	86	97	107	118
Total Shelter Inventory	100	97	91	81	67
Total Housing Inventory	184	211	236	262	287

South County 5-Year Investment Impact Dashboard, Households with Adults & Children					
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
Percent of PIT	10.0%	10.0%	10.0%	10.0%	10.0%
Households returning from previous year	8%	8%	8%	8%	8%
Increase in new homelessness	20%	10%	0%	-10%	-10%
Annual Households in the System	100	99	94	80	59
Annual Exits	37	43	48	53	58
Annual Remaining	62	57	46	27	1
% unmet need	63%	57%	49%	34%	2%
South County 5-Year Inventory Needs, Households with Adults & Children					
	Year 1 (2022)	Year 2 (2023)	Year 3 (2024)	Year 4 (2025)	Year 5 (2026)
HP/Rapid Resolution	1	1	1	1	2
Emergency Shelter	20	19	18	16	13
Rapid Re-Housing	6	6	7	8	9
Supportive Housing	4	4	5	5	6
Dedicated Affordable Hsg	11	13	14	16	17
Shallow Subsidy	15	17	19	21	23
Total Shelter Inventory	20	19	18	16	13
Total Housing Inventory	36	42	47	52	57

Appendix E. Acknowledgements

We would like to acknowledge all of those who contributed to developing the Home Together 2026 Community Plan.

First and foremost, we acknowledge all of the people whose lives have been impacted by homelessness in Alameda County and beyond. The Home Together 2026 Community Plan is a critical step towards ending homelessness and its associated adverse impacts.

Stephanie Reinauer, Joyce MacAlpine and Kristy Greenwalt with Abt Associates, a HUD technical assistance provider, conducted the initial CRE needs analysis and provided support and guidance with updating the system modeling and Home Together 2026 planning.

The process for the original CRE report which this plan operationalizes was chaired by Mayor Libby Schaaf of Oakland, Alameda County Health Care Services Agency Director Colleen Chawla, and Doug Biggs, then Chair of the EveryOne Home CoC Committee. Abt Associates and Jessica Shimmin, then with EveryOne Home, prepared the initial modeling with support from many CoC and county partners. The Racial Equity Analysis was initiated by Darlene Flynn of the Oakland Office of Racial Equity. Focus groups were spurred and supported by Susan Shelton, Alameda County Public Health staff members, and EveryOne Home. [Additional contributors to the CRE are listed in that report.] In the modeling update, Dashi Singham, Katie Haverly, Tirza White, Joanne Karchmer and Nisha Behrman all contributed significant time and thinking.

Kerry Abbott and Suzanne Warner with Alameda County's Office of Homeless Care and Coordination (OHCC) provided critical leadership, vision and guidance on the development of this Plan. Aneeka Chaudhry and Colleen Chawla provided strategic direction and presented the draft plan to key stakeholders. Jennifer Lucky of OHCC managed the plan development process and organized most of the content and text, collaborated with EveryOne Home to convene the Strategic Planning Committee and managed the system model update. Martha Elias with OHCC Provided invaluable assistance in pulling and reviewing HMIS data. Katharine Gale, consultant, made important contributions to the modeling update and assisted with the development of the Plan. Shelagh Little provided valuable editing support. Jennifer Beals designed the final version.

The Home Together 2026 Strategic Planning Committee was co-chaired by Kerry Abbott of OHCC and Chelsea Andrews of EveryOne Home and met monthly between August and November 2021, and again in February 2022, to inform the Home Together 2026 Community Plan. The Committee included homelessness service providers, people with lived experience, Healthcare for the Homeless Community Advisory Board members, racial equity advisors, homelessness and housing advocates, Youth Action Board members, city and county staff, EveryOne Home staff, CoC leadership, and Abt Associates.

Members of the Strategic Planning Committee are as follows:

First Name	Last Name	Affiliation
Kerry	Abbott	Alameda County HCSA Office of Homeless Care and Coordination, Co-Chair
Jamie	Almanza	Bay Area Community Services (BACS)
Chelsea	Andrews	EveryOne Home, Co-Chair
Erin	Armstrong	Office of Alameda County Supervisor Nate Miley

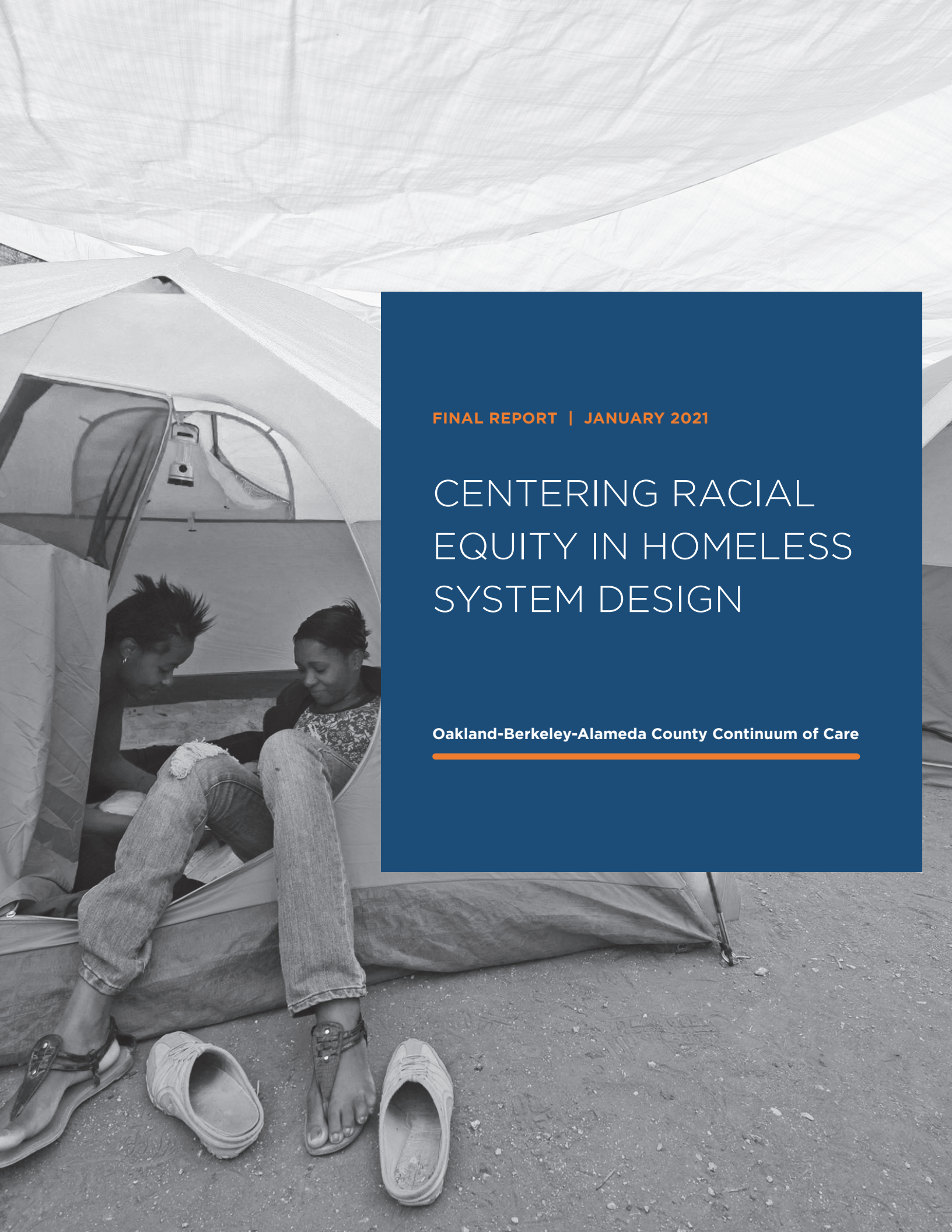
First Name	Last Name	Affiliation
Gloria	Bruce	East Bay Housing Organizations (EBHO)
Sharon	Cornu	St. Mary's Center
Ginny	De Martini	Office of Alameda County Supervisor Richard Valle
Emile	Durette	Alameda County Social Services Agency
Cathy	Eberhardt	Race Equity Action Lab Participant
Darlene	Flynn	City of Oakland
Donald	Frazier	Building Opportunities for Self-Sufficiency
Sabrina	Fuentes	Health for the Homeless Community Advisory Board
Nashi	Gunasekara	Family Violence Law Center
Katie	Haverly	EveryOne Home
Melissa	Hernandez	Office of Alameda County Supervisor David Haubert
Arlene	Hipp	EveryOne Home Emerging Leaders Program
Emma	Ishii	Office of Alameda County Supervisor Keith Carson
Jessica	Lobedan	City of Hayward
Ramiro	Montoya	East Bay Housing Organizations (EBHO)
Hanna	Moore	ALL IN Alameda County
Tunisia	Owens	Family Violence Law Center
Natasha	Paddock	Alameda County Community Development Agency, Housing and Community Development Department
Fina	Perez	Alameda County Department of Probation
Tara	Reed	Abt Associates
Jonathan	Russell	Bay Area Community Services (BACS)
Jared	Savas	Office of Alameda County Supervisor Dave Brown
Susan	Shelton	EveryOne Home Leadership Board
Lara	Tannenbaum	City of Oakland
James	Vann	Homeless Action Working Group (HAWG)
Liz	Varela	Building Futures with Women and Children
Vivian	Wan	Abode Services

Many people took the time to read the draft plan, which was posted and circulated widely for public comment, and provide thoughtful feedback and suggestions. The final version reflects many of these suggestions and others will be used in the creation of local implementation plans, annual updates and other communications stemming from the Plan's adoption.

The Health Care Services Agency team invited all county Mayors to meet and discuss the plan and received important feedback in these sessions. The City County Technical Working Group, made up of City Manager staff, city Homelessness Policy leads, and county staff from OHCC, HCD, and Supervisors' staff, met regularly to develop a shared framework for resource allocation under the plan and presented the plan and the allocation framework to joint sessions of the Board of Supervisors and the county's Mayors. These joint sessions were noticed public meetings.

Thank you to the countless other CoC partners in Alameda County for their contributions to the Home Together 2026 Community Plan, and for their dedication and tireless work towards ending homelessness in Alameda County.

DRAFT



FINAL REPORT | JANUARY 2021

CENTERING RACIAL EQUITY IN HOMELESS SYSTEM DESIGN

Oakland-Berkeley-Alameda County Continuum of Care

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CENTERING RACIAL EQUITY IN HOMELESS SYSTEM DESIGN

Introduction

Between 2017 and 2019, homelessness sharply increased by 43% in Alameda County, California. Housing market failures, homeless system challenges, and long-standing discrimination have produced a crisis in affordable housing and homelessness, which has significantly impacted low-income people and communities of color. The surge in homelessness and its disproportionate racial impacts, especially on African Americans and Native Americans, became the impetus for a revamp of the homeless system modeling process to ensure that it is restructured to employ a racial equity lens. With the goal of producing a homeless system that works better for all to end homelessness in Alameda County, this system modeling process seeks to:

- 1) Identify and address factors leading to the over-representation of people of color in the population of people experiencing homelessness.
- 2) Understand how facets of the homeless system benefit or burden people of color and pinpoint opportunities to advance racial equity within the system.
- 3) Formulate key elements of a model homeless system, including optimal types and quantities of housing units and service programs; and
- 4) Develop recommendations to more effectively and equitably allocate resources, prioritize investments, and advance proactive, targeted strategies to end and prevent homelessness.

The homeless system model provides a blueprint for effectively and equitably allocating resources and prioritizing investments to end homelessness in Alameda County.

Process & Stakeholders

The racial equity and homeless response system modeling project was made possible in Alameda County by a Federal technical assistance grant from the HUD Office of Special Needs Assistance Programs (SNAPS). Abt Associates, a HUD technical assistance provider, facilitated the process and development of the model. EveryOne Home, the Continuum of Care lead agency and collective impact backbone organization, convened the project under the leadership of three co-chairs: Colleen Chawla, Director of the Alameda County Health Care Services Agency; Libby Schaaf, Mayor of the City of Oakland; and Doug Biggs, Chair of the Continuum of Care Board.

The homeless system racial equity modeling process was collaboratively implemented over eight months. The timeline was shaped by the intention to use the system modeling and racial equity impact analysis recommendations to structure the Measure W tax measure on the November 2020 Alameda County ballot. Between October 2019 to May 2020, partners in responding to homelessness—elected officials, civil servants, local government agencies, service providers, philanthropic organizations, stakeholders, and people with lived expertise of homelessness—worked together to design a model system to end homelessness in Alameda County.

At the start of the project, a Leadership Committee was formed to consider the models' implications and viability across sectors and jurisdictions. This committee included a broad range of key stakeholders. Elected and civil servant representatives from the county and nine of the 14 cities and unincorporated areas countywide participated in the committee, including: Alameda County, and the cities of Alameda, Albany, Berkeley, Emeryville, Fremont, Hayward,

Livermore, Oakland, and San Leandro. The Leadership Committee was integral in advocating for formulating the problem of homelessness and its potential solutions through a racial equity lens. This request to focus on racial equity transformed the models. Infusing racial equity in the system model's approach to resource allocation is both an innovation in homeless system planning and a fundamental requirement for ending homelessness. The Leadership Committee regularly convened (in October 2019; January, February, and May 2020) to provide feedback into the system modeling process.

A Racial Equity Impact Analysis Team was established to develop and apply a racial equity lens in the system modeling efforts. The team included county, city, and homeless community stakeholders who worked closely and collaboratively over seven months (November 2019 to May 2020). Homeless system modeling involved two additional working groups—one focused on households with only adults and another on households with minor children. Participants in the Working Groups included community-based service providers as well as city and county departments involved in homeless housing, support services, and adjacent systems (education, re-entry, transition-aged youth, seniors/older adults, victims of domestic violence/human trafficking, and health care). Informed by Point in Time Count results on the homeless population, Homeless Management Information System (HMIS) data on service delivery, provider knowledge about service populations, and existing and potential service delivery models, the Working Groups developed program models, assembled combinations of programs (pathways) needed to end and prevent homelessness, and determined the proportion of the homeless population that would be best served through each pathway with a keen eye on ensuring racial equity in outcomes.

Infusing racial equity in the system model's approach to resource allocation is both an innovation in homeless system planning and a fundamental requirement for ending homelessness.

Racial Equity Impact Analysis

Method

Racial Equity Impact Analysis (REIA) is a data-driven, structured problem-solving approach that explores the systemic benefits and burdens on communities most impacted by racial disparities when designing and vetting potential solutions to ending and preventing homelessness. This requires:

- Focusing intentionally on race, including raising awareness of historical factors that advantage some and disadvantage others based on race.
- Using disparity data to center further investigation of root causes of disparities in the present time.
- Engaging people who have been impacted by disparities to challenge assumptions about their experience.
- Using quantitative and qualitative information to shape pro-equity programs and inventory recommendations to reduce racial disparities in outcomes.
- Implementing system-wide pro-equity programs and approaches to reduce racial disparities in outcomes.
- Ongoing evaluation and accountability through the development of equity performance measures to track progress.

The REIA framework used in this project was developed by the City of Oakland's Office of Race and Equity. More information can be found in Appendix A.

The 2019 EveryOne Counts! Report and Homeless Management Information System (HMIS) are the data sources used in discussions of population demographics and homeless system performance, respectively.

The REIA recognizes that system planning efforts often leave out the perspectives of people who are most impacted by system decisions. For this reason, the REIA team aimed to elevate the voices of people with current or former experiences of homelessness, specifically those over-represented racial groups in the homeless population. The focus groups also sought out the voices of unsheltered people living in encampments, homeless immigrants, young adults, seniors, and households with minor children.

Convening the focus groups was only possible with the help of community-based organizations in Hayward, Livermore, and Oakland, including:



Homeless Population Demographics

Each year, it is estimated that 15,786 people in 13,135 households experience homelessness in Alameda County. The 2019 Point in Time Count (PIT) provides the basis for extrapolating these annual numbers. See Appendix B for detail on the method used to derive estimates. The 2019 Point in Time Count shows that people experiencing homelessness in Alameda County tend to be from Alameda County, with 78% residing in Alameda County before becoming homeless. Men make up 61% of people experiencing homelessness, 35% identify as women, two percent identify as transgender, and two percent as gender non-binary. Seventy-three percent of people experiencing homelessness were between 25 and 59 years, with 14% aged 60 years or older, and nine percent aged 18 to 24 years. Four percent of people experiencing homelessness are younger than 18 years of age.

Households with only adults make up 91.4% of all households experiencing homelessness, an estimated 12,005 households each year. This proportion includes the estimated number of households with only adults who receive services in the domestic violence system and never receive services from the mainstream homeless response system. Ninety-five percent of households with only adults have only one member.

Households with minor children make up 7.5% of all households experiencing homelessness, an estimated 985 households each year. This proportion includes the estimated number of households with minor children who receive services in the domestic violence system and those who never receive services from the mainstream homeless response system. On average, households with minor children have three members.

Households with only minor children make up 1.1% of all households experiencing homelessness, an estimated 144 households each year. Runaway youth is one example of a household with only minor children. On average, households with only minor children have one member.

Figure 1 shows the distribution of people and households experiencing homelessness across the 14 cities and unincorporated areas of Alameda County. Homelessness is concentrated in Oakland, followed by mid-County (Alameda, Hayward, San Leandro, Unincorporated) and North County (Albany, Berkeley, Emeryville) and then the Tri-City (Fremont, Newark, Union City) and Tri-Valley (Dublin, Livermore, Pleasanton) areas.

Annual Estimates and Geographic Distribution of People & Households Experiencing Homelessness in Alameda County					
Geographic Regions in Alameda County	Estimated People Experiencing Homelessness Annually	Estimated Households Experiencing Homelessness Annually	Households with Only Adults	Households with Minor Children	Households with Only Children
Mid-County (Alameda, Hayward, San Leandro, Unincorporated)	2,920	2,430	2,221	182	27
North County (Albany, Berkeley, Emeryville)	2,605	2,167	1,981	163	24
Oakland	8,004	6,659	6,087	499	73
Tri-City (Fremont, Newark, Union City)	1,579	1,313	1,201	99	14
Tri-Valley (Dublin, Livermore, Pleasanton)	679	565	516	42	6
Total	15,786	13,135	12,005	985	144

Figure 1: Annual Estimates and Geographic Distribution of People and Households Experiencing Homelessness in Alameda County

Subpopulations

Although many homeless people have experienced domestic violence, households fleeing domestic violence make up a relatively small proportion of the overall number of households experiencing homelessness each year. The precise number of households fleeing domestic violence is unknown. The working groups, which included domestic violence victim service providers, decided to develop models inclusive of these households' needs rather than create separate models for victims fleeing domestic violence.

Veterans make up an estimated 6% of all households experiencing homelessness in a year; the majority are households with only adults. The community decided to develop the models to be inclusive of these households' needs, recognizing that there are resources dedicated to serving homeless veterans.

Homeless Transition Aged Youth aged 18 to 24 (TAY) make up 6.7% of all people experiencing homelessness. TAY is an important subpopulation with dedicated shelter and housing inventory set aside to meet young people's unique needs. The model for households with only adults includes specific pathways for TAY. TAY service providers participated in the working groups, the Racial Equity Impact Analysis (REIA) included a focus group with members of the Youth Advisory Board, and two formerly homeless TAY participated in the Leadership Committee. However, the community decided not to create a specialized model for youth. Instead, the Oakland-Berkeley-Alameda County Continuum of Care (CoC) intends to undertake a youth-focused modeling process that includes extensive youth representation.

Households experiencing chronic homelessness—defined as homeless for a year or longer with one or more disabling conditions—make up 46% of all homeless households. HMIS data shows that roughly 49% of households with only adults and 25% of households with minor children meet the definition of chronic homelessness. The model for households with minor children includes a surge strategy to quickly address all households experiencing chronic homelessness with 246 Permanent Supportive Housing units. The model for households with only adults does not include a surge because there are thousands of chronically homeless households with only adults. For this reason, the models for households with only adults are designed to effectively serve a significant proportion of households with disabilities and long durations of homelessness.

Racial Disparities in the Homeless Population

While homelessness is widespread in Alameda County, it disproportionately impacts people of color. The 2019 Point in Time count shows that people of color make up more than 2 out of 3 people (or 69%) experiencing homelessness in Alameda County.¹ The racial groups most disproportionately affected are people identifying as Black or African American, collectively referred to as Black people in this report, and American Indian or Alaska Native, collectively referred to as Native American people in this report. Black people account for 47% of the homeless population, compared to 11% of the general population in Alameda County.² Native Americans make up four percent of the

homeless population, compared with one percent of county residents. Black and Native Americans appear in the homeless population at a rate four times higher than in the general county population.

Racial Distribution of Alameda County's General Population
Compared With Alameda County's Homeless Population (2019)

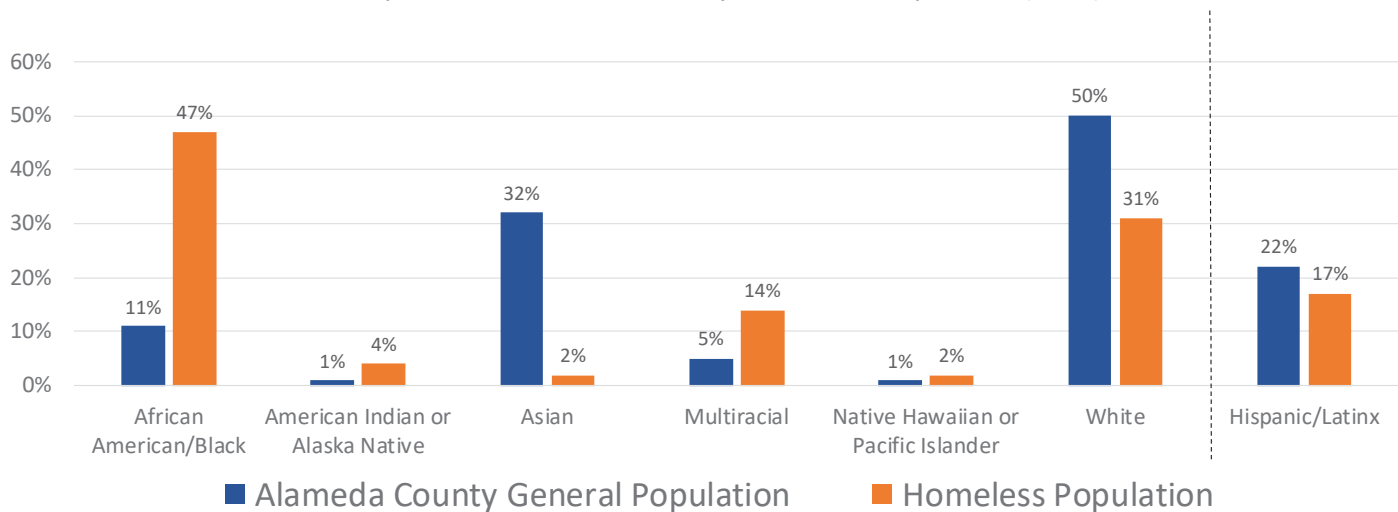


Figure 2: Racial and Ethnic Distribution of Alameda County's General Population Compared with Alameda County's Homeless Population, 2019

Native Hawaiians/Pacific Islanders and Multiracial people are also disproportionately affected. Meanwhile, Whites (who account for 31% of the homeless population, compared to 50% of the county population), Hispanic/Latinx (17% of homeless vs. 22% of county residents), and Asians (two percent of homeless vs. 32% of county residents) are under-represented in the homeless population.

Structural Racism

The over-representation of people of color among those experiencing homelessness reflects structural racism across multiple systems.³ While Black people comprise 47% of the homeless population in Alameda County, they make up 22% of people living in poverty. Native Americans account for four percent of people experiencing homelessness but one percent of people in poverty. This suggests that, beyond income and poverty, racism and systemic inequities are key factors producing disparate homeless outcomes.

Racial inequities in homelessness are deeply rooted in a “history of exclusion and dispossession, centered on race, and driven by the logic of capitalism” – which “established massive inequities in who owned land, who had access to financing, and who held political power.”⁴ Racial exclusion began with the colonization of Native Americans and dispossession of their lands, resulting in land conquest by Spanish, Mexican, and early U.S. settlers and governments. Land theft, genocide, forced assimilation, and relocation of Native Americans have led to historical trauma and deep distrust of government institutions – which has lasting impacts on current experiences of homelessness and resistance to government assistance.

Racial exclusion later took the form of discriminatory housing policies, such as racial redlining. Beginning in the 1930s, the Federal Home Owners Loan Corporation developed color-coded maps that used racial criteria to appraise the “residential security” of neighborhoods for real estate investment. The red sections of the map represented the lowest level of “residential security” and, therefore, the highest risk. Banks and insurers adopted these maps to guide their lending and underwriting decisions. Residential security maps produced racial discrimination by rationalizing social

disinvestment from these neighborhoods. Many redlined areas still align with racial/ethnic minority communities that struggle with disinvestment, high and persistent poverty, and racial segregation. Housing instability—barriers to affordable, healthy housing—and homelessness co-occur in these places and communities.

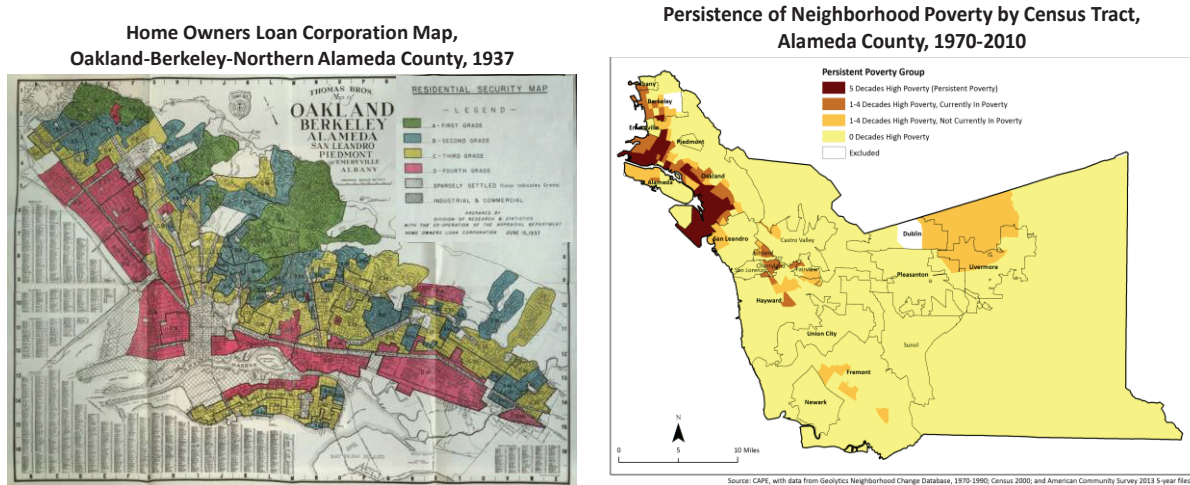


Figure 3: Home Owners Loan Corporation Map, Oakland-Berkeley-Northern Alameda County, 1937

Figure 4: Persistence of Neighborhood Poverty by Census Tract, Alameda County, 1970-2010

The redlining example raised awareness of how racism is mediated through historical and contemporary structures that include housing policies, banking systems, government institutions, and social practices. This awareness, in turn, highlighted the need for a definition of structural racism. The REIA used the Aspen Institute’s definition of structural racism:

STRUCTURAL RACISM is a system in which public policies, institutional practices, cultural representations, and other norms work in various, often reinforcing ways to perpetuate racial group inequity. It identifies dimensions of our history and culture that have allowed privileges associated with ‘whiteness’ and disadvantages associated with ‘color’ to endure and adapt over time. Structural racism is not something that a few people or institutions choose to practice. Instead it has been a feature of the social, economic and political systems in which we all exist. —*Aspen Institute*

This definition points to how systems, including the homeless system of care and other social safety net systems, reproduce racial discrimination. Many of the conclusions and recommendations in this report reflect the workings of structural racism through mutually reinforcing systems. Creating equitable outcomes will require transformations in legal, education, workforce development, and social welfare systems, among others. At this moment, partners in the homeless continuum of care are bringing an intentional focus on the workings of structural racism in the homeless system of care and changing the way the CoC does business to achieve equitable outcomes. It will not be sufficient to focus exclusively on the homeless continuum of care. Rather, it provides a starting place for willing and engaged partners to take up the challenge.

Housing and Economic Insecurity

Homelessness increased by 43% in Alameda County between 2017 and 2019. This increase took place in the context of population growth and a tight housing market. Beginning in 2010, Alameda County saw a 10.7% increase in its population⁵ and a 48% decrease in rental vacancies.⁶ The growing population and low vacancies have rapidly increased the cost of housing.

As housing costs skyrocket, low-income residents struggle to find affordable housing. The diminishing supply of affordable housing in Alameda County is a result of decades-long retrenchment in affordable housing development. From 2008-2018, Alameda County lost 80% of federal and state funding for affordable housing production and preservation.⁷ In addition, NIMBYism (or “not in my backyard” resistance) of existing homeowners and restrictive local zoning ordinances have thwarted the development of low-income, affordable housing, especially multi-family housing units. Loopholes in inclusionary zoning ordinances have also permitted developers to pay fees to avoid requirements to set aside a proportion of their housing developments as affordable for low- and very-low-income households. As a result, it is very difficult to obtain and maintain affordable housing without subsidies.

The rise in housing and rental costs has far outpaced increases in household income. From 2000 to 2015, the median rent in Alameda County increased 29%, while median renter household income increased only three percent (adjusting for inflation).⁸ Figure 5 lists monthly fair market rents (FMR) set by HUD for rental housing in Alameda County, compared with the monthly income needed for housing to be affordable at 30-50% of income.

Fair Market Rents & Income Needed to Afford Housing Costs			
Unit Size	Cost per Month (2020 FMR)	Income Needed for Housing Costs at 30% of Income	Income Needed for Housing Costs at 50% of Income
Studio	\$1,488	\$4,960	\$2,976
One bedroom	\$1,808	\$6,027	\$3,616
Two bedroom	\$2,239	\$7,463	\$4,478
Three bedroom	\$3,042	\$10,140	\$6,084
Four bedroom	\$3,720	\$12,400	\$7,440

Figure 5: Fair Market Rents & Income Needed to Afford Housing Costs

The minimum wage in Alameda County ranges from \$13.50/hour to \$16.50/hour. At these rates, gross income for full-time minimum wage employment falls between \$2,335/month and \$2,854/month. So, a family of three with the head of household earning minimum wage is severely cost-burdened. Households that depend on public benefits or Social Security have much lower incomes. In Alameda County, 71% of extremely low income (ELI) households pay more than half of their income on housing costs compared to just two percent of moderate-income households.¹³

Homeless households have extremely low incomes and often rely on public benefits, Social Security, or minimum wage employment. During federal fiscal year (FFY) 2019, 25% of adults in the homeless system had no income, and 49% had incomes between \$1 and \$1,000 when they enrolled in homeless services.¹⁴ Almost three out of four adults entering the homeless system earn \$1,000 or less per month. This means the majority of people experiencing homelessness cannot afford fair market-rate housing.

Monthly Public Benefit & Social Security Income	
Type of Benefit	Maximum per month
Alameda County GA	\$336/month maximum ⁹
CalWORKs/TANF	\$878-\$983/month maximum for family of three ¹⁰
Social Security Disability	\$1,258/month national average ¹¹
Social Security Retirement	\$1,503/month national average ¹²

Figure 6: Monthly Public Benefits and Social Security Income, 2020

Disaggregating monthly cash income by race and ethnicity shows some racial variations in income among adults entering the homeless response system (program start). The highest proportions with low monthly incomes of \$1,000 or less were reported among Multiracial (60%), Black (57%), and Native Americans (57%). Native Americans reported the greatest percentage of adults (13%), earning no income at the program start. Further exploration is warranted to understand better how factors such as age, disability, and employment shape income differences by race.

Monthly Cash Income at Program Start

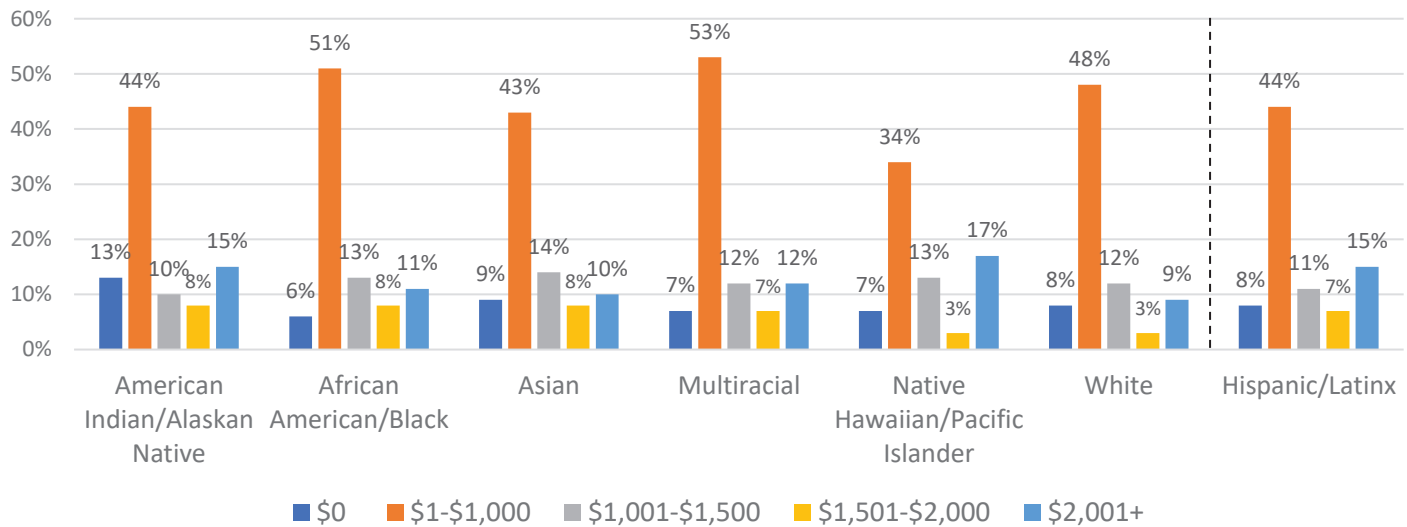


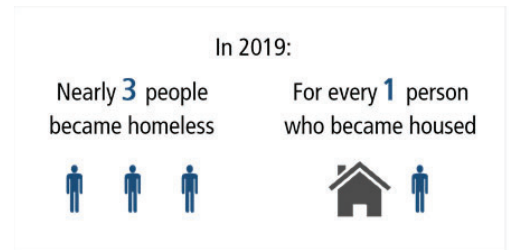
Figure 7: Monthly Cash Income of Adults at Program Start by Race and Ethnicity, Federal Fiscal Year 2019

Homeless System Performance

The following sections will explore homeless response system performance as a whole and disaggregated by race and ethnicity in each of the following areas: inflow, access to homeless system resources, permanent housing outflow, returns to homelessness, length of time homeless, and coordinated entry.

High and Racially Disproportionate Inflow into the Homeless System

Homelessness surged in Alameda County between 2017 and 2019 due to high *inflow* rates into the homeless system (people entering the homeless response system for the first time) and low rates of *outflow* (people exiting homelessness to permanent housing). During FFY 2019, a total of 3,622 people accessed homeless response system programs for the first time.¹⁵ This was a 61% increase in first-time homelessness over FFY 2018, exceeding the targeted upper limit of 2,500 persons entering homelessness that was set in the [EveryOne Home 2018 Strategic Plan Update](#).



Disaggregating the first-time homeless data by race shows that the flow of people into homelessness is racially disproportionate. In FFY 2019, Black and Native Americans entered the homeless system at five times their representation in the general county population. Black people made up 58% of people entering the homeless system for the first time, compared with 11% of the general population in Alameda County. Native Americans comprised 5% compared with one percent of the county population.

Racial and Ethnic Distribution of People Entering the Homeless System for the First Time

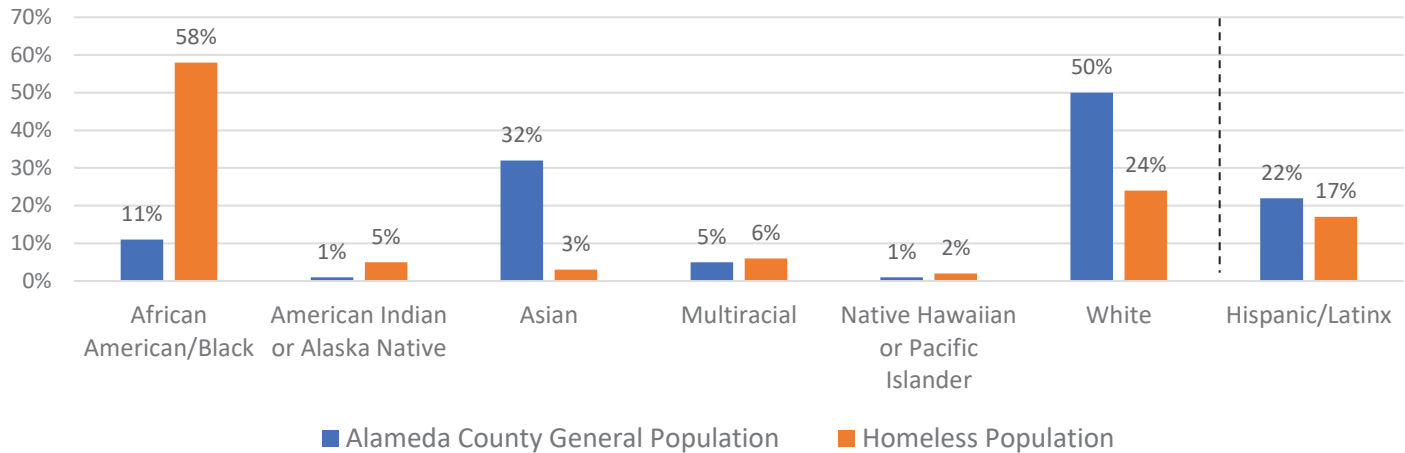


Figure 8: Racial and Ethnic Distribution of People Entering the Homeless System for the First Time, Federal Fiscal Year 2019

Access and Outflow to Permanent Housing Does Not Vary by Race

While inflow into homelessness is racially disproportionate, administrative data from the Homeless Management Information System (HMIS) shows that access to homeless system programs is roughly proportionate to the racial breakdown of the homeless Point in Time (PIT) count. People who identify as Black or African American access homeless response system programs at higher rates than their proportion of the population. Rates of access among Native Americans, Asian, and Native Hawaiian are equivalent to their population demographics. People who identify as Multiracial or White access homeless programs at lower rates than their proportion in the PIT population measures. Reasons for the variation among Black, Multiracial, and White participants in homeless programs may stem from the concentration of homeless-serving programs in Oakland and Berkeley, where according to PIT data, a greater proportion of the homeless population is Black; 70% in Oakland and 56% in Berkeley. The next step in data analysis should include further disaggregating participation and outcomes by geographic region.

System-Wide Access and Permanent Housing Outcomes by Race and Ethnicity (FFY 2019)

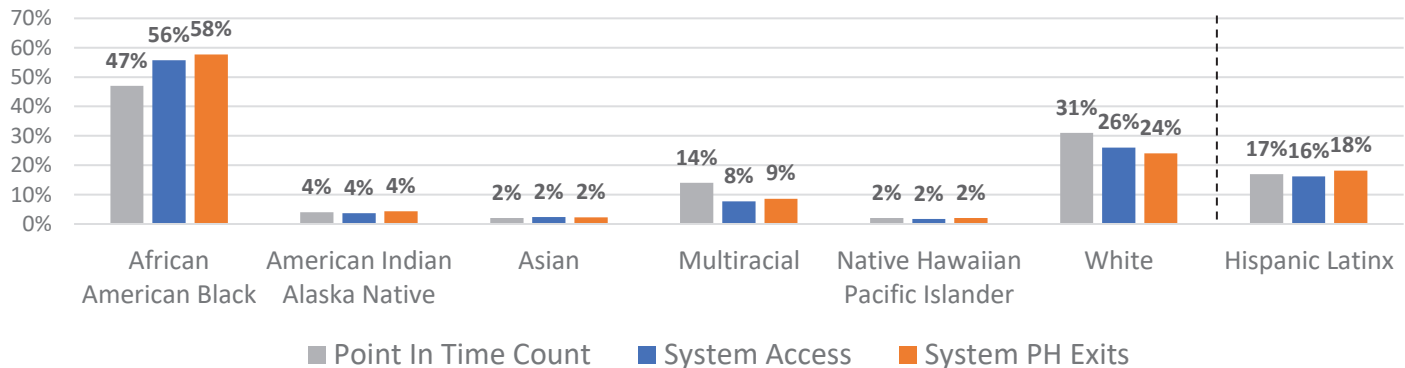


Figure 9: System-Wide Access and Permanent Housing Outcomes by Race and Ethnicity, Federal Fiscal Year 2019

The rate of exits to permanent housing lags far behind the inflow into the homeless system. In FFY 2019, a total of 1,344 persons exited the homeless response system to permanent housing destinations.¹⁶ This was a two percent increase over FFY 2018, but still far behind the goal in the *EveryOne Home 2018 Strategic Plan Update* of 2,000 persons exiting to permanent housing. In 2019, nearly three people became homeless for every person who obtained permanent housing.

While exits to permanent housing are fewer than needed, the rates at which homeless people achieve positive housing outcomes from the homeless response system does not vary by race.¹⁷ Black people make up 56% of the homeless response system participants and 58% of the exits to permanent housing. Native Americans make up four percent of the homeless response system and four percent of exits to permanent housing.

Reviewing access to and permanent housing outcomes from specific programs reveals a similar picture, with access and permanent housing outcomes remaining nearly equivalent. Transitional Housing numbers show higher participation rates for Black people and lower rates for White people. One reason for this may be because most Transitional Housing programs are located in Oakland, where Black people make up a much higher proportion of the homeless population (70%) as compared with the homeless response system overall (47%).

**Access to & Permanent Housing Outcomes from Individual Program Types
by Race/Ethnicity: Alameda County, FFY 2019**

Access and Permanent Housing Outcomes by Race and Ethnicity (FFY2019)		African American Black	American Indian Alaska Native	Asian	Multi-Racial	Native Hawaiian Pacific Islander	White	Hispanic Latinx
Point in Time Count		47%	4%	2%	14%	2%	31%	17%
System	Access	56%	4%	2%	8%	2%	26%	16%
	PH Exits	58%	4%	2%	9%	2%	24%	18%
Emergency Shelter	Access	59%	4%	2%	7%	2%	24%	16%
	PH exits	57%	5%	3%	9%	2%	23%	16%
Transitional Housing	Access	69%	3%	1%	8%	1%	17%	18%
	PH exits	68%	3%	1%	9%	1%	17%	20%
Rapid Re-Housing	Access	60%	5%	3%	7%	3%	21%	20%
	PH Exits	59%	5%	3%	6%	3%	23%	20%
Permanent Supportive Housing	Access	53%	3%	3%	9%	1%	30%	16%
	PH exits	53%	4%	3%	10%	1%	29%	18%

Figure 10: Access to and Permanent Housing Outcomes from Individual Program Types by Race and Ethnicity, Federal Fiscal Year 2019

Disproportionate Returns to Homelessness Among Black Americans, Native Americans, & Native Hawaiians/Pacific Islanders

In FFY 2019, the rate of returns to homelessness was 18%, with 312 persons returning to homelessness within two years of leaving the homeless response system for permanent housing destinations.¹⁸ Disaggregating the data by race shows that Native Hawaiian/Pacific Islander and Black people have the highest return rates to homelessness, at 23% and 21%, respectively.¹⁹ Native Americans and Multiracial people are in the middle, each with a rate of return at 17%, followed by Whites at 14%, Hispanic/Latinx at 13%, and Asians at seven percent. It should be noted that some groups have a small sample size, including Native Hawaiians/Pacific Islanders (n = 40) and Asians (n = 72).

Rate of Return to Homelessness by Race and Ethnicity (FFY 2019)

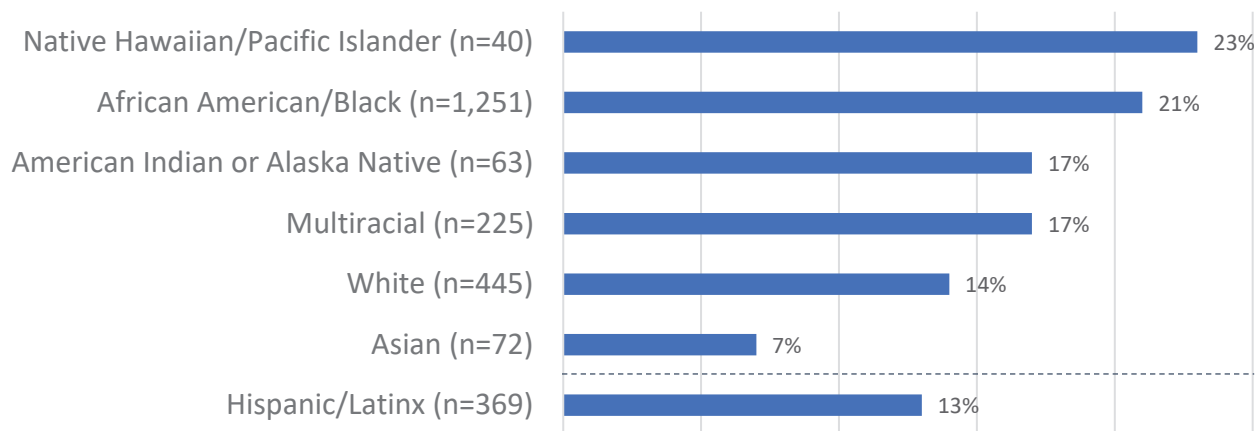


Figure 11: Rate of Return to Homelessness by Race/Ethnicity, Federal Fiscal Year 2019

The prior living situation of people returning to homelessness from permanent housing shows that a significant number of people who return to homelessness were last living in unsubsidized rental housing. This is the most frequent prior living situation for returns overall and the top prior living situation for Black, Asian, Multiracial, and White people. For Hispanic/Latinx people, unsubsidized rental housing is tied with staying or living with family as the most frequent prior living situation. For Native Americans, the most frequent prior situation is staying or living with family. Native Hawaiians/Pacific Islanders who returned to homelessness most frequently had lived in rental housing situations with a Rapid Re-Housing subsidy or another ongoing housing subsidy. The prior living situations of people who return to homelessness reflect the barriers to housing stability that formerly homeless people confront in the rental housing market. The high rate of returns from family points to the strength and strain of family networks that may be similarly vulnerable. Together, this analysis informs the homeless response system model's emphasis on ongoing forms of support linked to household income in the form of shallow and deep subsidies. These types of supports will help economically vulnerable homeless households retain permanent housing. The analysis also points to the need for changes beyond the boundaries of the homeless response system, including housing and economic policy changes that will make housing sustainable for the lowest income households.

Coordinated Entry

Coordinated entry is the front door and central organizing feature of the homeless response system. The purpose of coordinated entry is to organize “the Continuum of Care’s (CoC) system of care so that it fits together intentionally and efficiently, resulting in more efficient use of resources and improve fairness and ease of access to resources, including mainstream resources while prioritizing people who are most in need of assistance.”²⁰ In the Oakland-Berkeley-Alameda County Continuum of Care, coordinated entry occurs through the standardized processes of access, triage, housing problem solving, assessment, prioritization, and matching to resources. A custom prioritization tool identifies those “most in need” based on a combination of factors, including household size and composition, length of time homeless, health, income, housing barriers that include rental and homeownership history, law enforcement, and risk. A weighted scoring framework assigns point values to these barriers and vulnerability factors, with the highest scores indicating the most vulnerable households. These households are prioritized for the limited resources available in the homeless response system.

Prioritization determines access to housing resources. As such, it is both appropriate and necessary that prioritization works fairly across racial and ethnic groups. There have been local and national concerns over the October 2019 study by C4 Innovations that found racial disparities in the outcomes produced by a prioritization tool called the VI SPDAT, which many communities use in the U.S.²¹ Prioritization data in Alameda County does not show racial disparities. At present, the custom prioritization tool used in the Oakland-Berkeley-Alameda County Continuum of Care is producing outcomes proportionate to the population by race.

As an example, the proportion in the top five percent of the countywide By Name List (BNL) of prioritized households and the proportion on the BNL generally are within four percentage points. This is important because the top five percent of the BNL is most likely to get matched to housing resources. At the same time, the overall BNL includes anyone who is literally homeless. Native Americans, as well as Multiracial people, are represented at slightly higher rates (two to four percent) in the top five percent of the BNL as compared with BNL generally. People identifying as African American or Black, Asian, Native Hawaiian or Pacific Islander, White, or Hispanic/Latinx appear in the top five percent of the BNL at slightly lower rates than on the list generally (one to two percent). The representation of each group in the 2019 PIT Count and in HMIS gives two additional population measures as a comparison. The 2019 annual evaluation of coordinated entry explores the prioritization tool in greater detail and is available on the System Coordination Committee page of the Everyone Home website (www.everyonehome.org).

	American Indian Alaska Native	African American Black	Asian	Native Hawaiian Pacific Islander	Multi-Racial	White	Hispanic Latinx
% on BNL (4/15/2020)	2%	57%	2%	2%	6%	26%	15%
Top 5% of BNL (4/15/2020)	4%	55%	1%	1%	10%	27%	14%
All HMIS FFY2019	4%	56%	2%	2%	8%	26%	16%
2019 PIT	4%	47%	2%	2%	14%	31%	15%

Figure 12: By Name List (BNL) of prioritized households

It is essential that the homeless response system fairly and transparently allocate resources. This is even more true because the number of homeless households far exceeds the available inventory. During 2019, the homeless response system saw roughly 350 Permanent Supportive Housing (PSH) vacancies. Of those, 221 were existing units turned over, and slightly more than 125 units were added to the system. In Rapid Re-Housing (RRH) during 2019, of the 1,595 households served, 787 moved into housing. During that same period, there were as many as 9,000 homeless households in need of permanent housing. Together, the current level of permanent housing resources (PSH+RRH) in the homeless response system is enough to reach between 10-13% of the households on the prioritized BNL.

The purpose of coordinated entry is to quickly fill housing vacancies with an eligible and highly vulnerable household; too few vacancies is a significant barrier to an effective coordinated entry system. In the current homeless response system, most households will not be matched to housing resources or support services because there are not enough beds and units available. In 2020, Everyone Home's System Coordination Committee (the Coordinated Entry Policy Entity) worked with the Alameda County Office of Homeless Care and Coordination (the Coordinated Entry Management Entity) to right-size the prioritization process to the inventory of resources. At the same time, the Racial Equity Impact Analysis and system modeling provide clear direction on the types of interventions and scale of resources required to end homelessness in Alameda County.

Focus Groups

Methodology

Nine 90-minute focus groups were conducted in English and one in Spanish, with facilitators who shared the participants' racial/ethnic backgrounds. Focus groups followed a semi-structured interview guide (see Appendix A) with questions about the root causes of homelessness, barriers to obtaining housing, and homelessness prevention, crisis and interim services, housing barriers, types of housing interventions, and returns to homelessness. Several notetakers attended each focus group and used a standardized template to record the conversation, then collated their notes afterward to increase accuracy and collect verbatim quotes. Notetakers also provided observations and insights into key messages, tone, and dynamics within each focus group.

A total of 57 people shared their lived experiences to inform homeless system modeling. Focus group sites were selected to ensure representative participation across race, age, household composition, geographic regions, and sheltered, unsheltered, and formerly homeless perspectives. Participants were recruited by staff at these sites. See Appendix A for the numbers and demographics of participants by race/ethnicity, gender, age, and homelessness status. Participants were invited to speak openly about their lives, experience of homelessness, and interactions with homeless programs, services, and systems. Participants received a meal and were compensated for their time.

A sub-group of the REIA Team conducted a qualitative analysis by reading through detailed notes and using qualitative analysis software (Dedoose) to code participant quotes into themes. Reliability was increased through a standardized "codebook" that defined themes that researchers discussed and refined throughout the analysis. Key themes that emerged were integrated into findings and recommendations.

It is important to note some methodological limitations of the focus groups.²² Recruitment through existing relationships can lead to selection and convenience biases. To capture the breadth and diversity of experiences within and across racial and ethnic groups, more focus groups would have been needed. Some participants may have felt uncomfortable voicing negative perspectives about homeless programs, services, and systems, particularly if groups were located at sites where participants receive services. Qualitative analysis was also subject to researcher bias.

To reduce these biases, staff from the host organizations were absent from all or most of the focus groups. Participants were assured of confidentiality (their names would not be used in reporting). Some staff reported that multiple contacts while recruiting helped increase trust with participants. Analytic biases were mitigated by involving a diverse group of researchers who worked together to code and extrapolate findings.

Analysis of qualitative data from nine focus groups deepened understanding of how structural racism plays out across multiple systems and intersects with lived experiences of homelessness. The following themes emerged from the focus groups, including stories of resourcefulness and resilience to prevent and overcome homelessness and cope with structural barriers.

Mass Incarceration

Focus group participants described how incarceration impacted their ability to find and keep housing. While incarceration is a barrier to housing and employment for anyone who has been to prison, the well-documented mass incarceration of Black, Latinx, and other people of color means that incarceration is a barrier to housing disproportionately impacting people of color.²³

I'd been in jail for 20 years. The only way I got in [to housing] was the subsidy I got through [this program]. They had to pay double in security deposit. It made it really hard because they hold mistakes against you. I'm kind of stuck where I'm at because I know it will be a problem if I need to go anywhere else even though I have completely changed.

— Participant 24, Black man, aged 50-64

I spent 20 years in prison. Incarceration led me to become unhoused.

— Participant 53, Asian man, aged 40-49

I can't find a place [to live]. I'm an ex-felon. I've been out 30 years, but I'm still a felon.

— Participant 20, White man, aged 65+

Health

Research on the social determinants of health shows that the places where people live, work, and go to school impact their health. Awareness of the social determinants of health is particularly important in light of the history of redlining in the United States, which segregated Black, Native American, and other people of color and divested those neighborhoods of economic, educational, and social opportunity. Many participants in the racial equity focus groups described growing up in communities marked by this divestment in Oakland and broadly in Alameda County. Places with fewer opportunities are also places with poor health outcomes. Not surprisingly, poor health was a root cause of homelessness for many people in the racial equity focus groups.

I first became homeless when I was 59. I had a bad heart attack and couldn't work. I had savings, then the money ran out and I had no place to go.

—Participant 29, Black man, aged 50-64

I loved my job; I was there about 10 years... I needed back surgery, so I thought I'd have surgery and be fine, go back to work. That wasn't the case. I was out for a year. And I tried to go back to work even though I wasn't feeling good. I had my own place and worked 6 days a week. Anyway, long story, after that I went into depression, the worker's comp thing because in my mind I knew I couldn't keep my own place.

—Participant 45, White woman, aged 50-64

I learned of an illness I had from childhood that affected me. It was not my fault and it started when I was 13. I got a live-in caregiver job and when she died I had nowhere to go. I was couch surfing and there was housing with rats and roaches.

—Participant 25, Black woman, aged 65+

I had a stroke and they told me I wouldn't be able to talk or walk anymore... Since I had the stroke, I have not been able to return to work.

—Participant 39, Latino man, aged 50-64

Likewise, poor health is a consequence of homelessness that impacts communities of color over-represented in the homeless population. Across the focus groups, participants described physical health challenges, including heart conditions, back problems, joint problems, and emotional and behavioral health challenges like depression, bipolar disorder, stress, anxiety, trauma, and Post Traumatic Stress Disorder (PTSD), and substance use disorders. As both a cause or consequence of homelessness, this analysis identified poor health as a structural outcome of inequality that disproportionately impacts Black Americans, Native Americans, and other communities of color.

Education

Several participants recounted how education outcomes and housing instability are interconnected. Participants talked about the ways housing instability made it difficult to take advantage of educational opportunities, which created another barrier to employment and housing. Once again, the history of redlining is instructive in understanding the structural divestment of educational opportunities from communities of color and the reverberation of that divestment in the current homelessness crisis.

I was trying to go to school but also needed to find housing, so I went to transitional housing. I dropped out of school and [am] trying to work full time and find housing.

—Participant 1, Black man, aged 18-24

I went to Oakland Tech. Before that I was going to really good schools but got kicked out because of altercations and was being rebellious because my life was terrible. I'm the black sheep of the family so I didn't get too much support with that. In Oakland Tech I was smart as hell and was able to pass just going for two days and coming back a week later. But I wasn't able to graduate because of so many incompletes.

—Participant 2, Multiracial man, aged 25-39

I'm battling really tough depression. It's hard to concentrate on school with everything else that's going on.

—Participant 46, Latino man, aged 40-49

I didn't go to school, I didn't learn work, I am not able to pay rent because I don't work.

—Participant 44, Latino man, aged 50-64

These narratives show how housing instability and economic necessity present barriers to finishing school, which becomes a barrier to income and housing.

Immigration

Homeless Hispanic/Latinx participants talked about multiple stressors they experience, including fear of deportation, barriers to accessing help, distance from family, grief for lost family members, and discrimination.

I lost three members of my family—my mom, my grandma, and my brother. Then I lost my wife. Life is hard and it's hard being an immigrant. Being alone and far away from family.

—Participant 40, Latino man, aged 40-49

Latinos . . . [they] look at us like trash. They don't allow our backpacks. There are stereotypes specifically for Latinos.

—Participant 43, Latina man, aged 50-64

The Latin community...cannot truly stand up for themselves. They pick on the Latin community because they [Latinx] cannot go to the law enforcement. It's hard for everyone but especially females. Latin community stays within themselves.

—Participant 31, Latino man, aged 50-64

Many people are afraid of being deported for even trying to get services.

—Participant 44, Latino man, aged 50-64

In these narratives, participants describe how immigration status, distance from family, and the stigmatized stereotypes of being Latinx in U.S. American society present additional impediments to housing stability and returning to housing.

Inability to Increase Income

Structural racism creates barriers to employment and increasing income. Frequently barriers and adverse impacts carried over from one system to another, such that poor health and disabilities, mass incarceration, barriers to education, and immigration status combined to limit the focus group participants' ability to work, earn sufficient wages, and secure higher-paying jobs. Examples include:

I'm on SSI. Rent is \$1,500 a month, and I only get \$900.

—Participant 24, Black man, aged 50-64

Even if you have an income [it's hard to pay rent]. Like I have SSI plus I'm working as a crossing guard. Both of those incomes together won't do it.

—Participant 47, Multiracial woman, aged 50-64

Our income is not high enough. I'm working and my son is working too, but our income has got to be higher.

—Participant 12, Native American woman, aged 50-64

How do you get your income that high, though? What are you supposed to do to make it go higher?

—Participant 18, Latino man, aged 50-64

Within the context of structural racism, homeless participants described their ongoing struggles to earn enough to pay for housing, transportation, and other basic living costs. Many described trade-offs; needing to choose between paying for housing, food, or transportation:

Like everything is so expensive, not just rent. Just necessities and other things. It's hard to save and have money to pay your rent, utilities, and food.

—Participant 7, Native American woman, aged 18-24

If I am going to pay rent, I can't eat or buy gas. It's hard. On \$2,000 you can't make it. You need \$3,500 because rent is \$1,800 or more. You need to work three jobs and sell peanuts on your lunch break.

—Participant 14, Black man, aged 50-64

Often poverty is represented as a key feature and cause of homelessness. Importantly, the focus group showed that low incomes for many homeless households are inextricable from structural racism.

Displacement

A 2018 report from California Housing Partnership and UC Berkeley Urban Displacement Project show how the rapid increase in housing costs between 2010 and 2015 forced lower-income households of color out of cities and into more affordable suburban areas with fewer support services.²⁴ The report concluded that the result is an intensification of racial segregation and disparities across the Bay Area. Focus group participants echoed these findings, describing the pressure to leave the city or county to find affordable housing, including housing opportunities offered by the current homeless response system. For many, displacement means leaving places where they grew up, had family, community, and employment:

What we're finding is that we're going to have to leave the city and county to find an affordable place to stay. And then I'll have to find a new job. And leave our home here.

—Participant 8, Native American woman, aged 25-39

I am still looking [for housing] and two years into it.... Antioch and other places are miles away. I built a life here for myself and want to stay here. I want to be close to my son and grandsons. Nothing has come up in Oakland.

—Participant 30, Black woman, aged 65+

I was living in Oakland with my mom, but the rent got too high, so we moved to Stockton for two years. Lot of people that are from the Bay Area that are all moving out there. But it's nicer out here; I was born and raised in Oakland.

—Participant 18, Latino man, aged 50-64

They lead us on and say we got the place. Wait for us to call back and they say you don't got the place. You see on Craigslist again for a higher price. Just seem like they want us to get out of here. Gentrification is happening. They don't want us here. They want us out.

—Participant 9, Native American man, aged 18-24

Through these voices and supporting research, it becomes clear that racialized displacement is produced through the ostensibly race-neutral housing affordability pressures at work in Alameda County. For this reason, a significant finding from the REIA focus groups is recognizing the discourse of affordability as structural racism.

Distressed Networks and Supports

For families already struggling against the impacts of structural racism, focus group participants described how familial instability or the death of a family member resulted in homelessness. Several informants in the racial equity focus groups experienced familial instability as children. Their perspective shows how the impacts of structural racism are transmitted and compounded in the next generation.

I came from a broken home. When I was 8 my mom couldn't take care of four kids by herself. We bounced around shelters for years. For me, [homelessness is] based on lack of family supports.

—Participant 2, Black Male, aged 25-39

For me it's like I was in foster care so I could do my AB12 for extended foster care, but I kinda messed that up when I was 19. I had my apartment and it got hit by SWAT and I was in jail a little bit. My background and my income [are barriers]. I really don't know too many resources for people in my situation. I usually turn to someone I know before I turn to something else.

—Participant 11, Multiracial woman, aged 18-24

Particularly in the Native American and Black focus groups, participants talked about their families' cultural significance in maintaining housing and well-being. Several Black participants described the loss of both housing and cultural supports after the death of a parent or grandparent:

I first realized I was homeless when my mom and dad died when I was 40. One passed in July and one in August. I was living with my mother and father. My sister sold the house and I see for sale sign on house. I couldn't go back there, so I started sleeping my car.

—Participant 26, Black Male, aged 65+

We are lost as African Americans – and people living in this country. We don't value ourselves – the struggle and hard work. When my grandma died, all the values she tried to instill in our family went out the window. She was our Big Mama. That comes from a spiritual place – the things that bring peace and happiness – and all those things you want for your life.

—Participant 35, Black woman, aged 25-39

My parents died and the rest of the siblings sold the house. I had always had a place with my mother. I was not responsible enough to hold a job. I did the homeless thing real well. I learned how to be an addict and homeless.

—Participant 23, Black man, aged 65+

And even as participants described positive family relationships, few had family supports sufficient to end their homelessness. These stories echo the findings of the Paul et al. study of homelessness in Oakland and reinforce research findings on the racial wage and wealth gap.²⁵ Particularly in the Native American, Black, and Hispanic/Latinx focus groups, participants shared the cultural significance of family in maintaining housing and well-being. Several Black participants described the loss of both housing and cultural supports after a strong elder's death. The result that the impacts of structural racism are transmitted and compounded in the next generation. A significant finding of the equity focus groups is that over time structural racism thins the familial resources and supports that may otherwise prevent homelessness. The resulting losses are both material and cultural.

Barriers in the Housing Market

Despite the end of legal segregation and explicit housing discrimination, the deeply rooted association between race and risk persists and influences access to housing, on what terms, and where.¹³ While race-neutral at face value, credit checks, income requirements, and background checks form barriers to the housing market that disproportionately affect people of color and effectively produce housing discrimination.

I went to programs that paid first and last month rent. My credit score is bad so they don't want to help you out. Then they don't want to let people come and inspect the place. It's bad if you don't have an average credit score even if you have got money and job. Also, the application fees.

—Participant 14, Black man, aged 50-64

Like the applications they want bank statements, showing you have money saved. Some places they don't want you to leave stuff blank. I don't have a bank account so I can't put stuff there. Transportation and trying to get places. Some places want you to drop it off at the property. I had to go to Berkeley once.

—Participant 10, Native American woman, aged 25-39

Money. And, we don't have an address, we can't keep our place of living to get notified, to have our ID sent to us. It's very hard even to have your mail.

—Participant 17, Black woman, aged 50-64

The applications you fill out for apartments are really intrusive. I don't understand some questions. They want to go so deep into your life. A lot of stuff you forget, and they want to go back 10 years ago. I don't remember where I lived 10 years ago. If you leave out anything, anything minor, they turn the application down. I fill them out to the best of my knowledge, but it's not enough.

—Participant 29, Black man, Aged 50-64

I filled out an application for housing in West Oakland. I guess it was one of those income/tax-based apartments. I gave them everything, check stubs, proof of income. And they told me that I still don't make enough. Then my

five-year old son has autism – my son just got approved for SSI. When you get it, bring it in. Took too long to get started, passed me up.

—Participant 33, Black woman, aged 25-39

High rents period. Having to have five times the income. It's hard for those with bad credit, or generations of bad credit. There is nothing to build upon.

—Participant 8, Native American woman, aged 25-39

As the cost of housing has steadily increased, many landlords are seeking high incomes, strong credit, and a clean criminal background. Stories emerged within and across homeless participants about how multiple barriers – such as application fees, low incomes, poor credit, obtaining identification, and having a bank account– can converge and make it extremely difficult to find housing. These barriers disproportionately impact homeless households of color.

Lack of Deeply Affordable Housing

The racial equity focus groups identified an important gap in the homeless system services: extremely low-income households without ongoing support service needs. At present, the only deeply affordable permanent housing opportunity in the homeless system is Permanent Supportive Housing (PSH), which requires an extended length of time being homeless and a disability. Other deeply affordable housing may be reserved for seniors aged 62 and older. Participants in the REIA focus groups described the absence of resources appropriate to their circumstances as profoundly unresponsive.

What's frustrating to me is I don't have a drug problem. I'm just a mom with kids who has been in abusive relationships. I remember the lady interviewing me saying I'll score higher if I have a drug problem—I'd get right in tonight.

—Participant 8, Native American woman, aged 25-39

When you're homeless, the first thing they tell you is to call 211... We called 211. They kept saying to keep calling. They wanted to do this whole screening process. Single people with kids need to be a priority. 211 was no help whatsoever. The only way I got into [this program] was because of this one [211] operator—who said call this other number, off the record, and they will be able to help you.

—Participant 33, Black woman, aged 25-39

All I want is a home that I can bring my grandkids to ((crying)). I'm tired of having doors closed in my face. I've been filling out applications every day. And then they say you can't get in because you're not 62. Or they're telling us it's a lottery. I'm tired. I'm tired. I'm done fighting. I've been fighting to get off drugs, I'm not fighting anymore.

—Participant 47, Multiracial woman, aged 50-64

For these participants, not having a disability or support service needs became a barrier to accessing housing. Even focus group participants who welcomed support services made clear the value of their privacy and autonomy. Many participants viewed the service model offered in permanent supportive housing to be too intrusive:

I love having my own place, don't like too much intrusion unless I'm asking for it.

—Participant 26, Black man, aged 65+

A lot of people will feel good, getting some assistance and not [having support service providers] on our back...

People would feel good being independent.

—Participant 32, Latino man, aged 25-39

Further, participants framed autonomy as part of their cultural identity and an expression of resistance to past and contemporary racial injustice:

We have a distaste for social services and government. The government rounded up my grandparents like cattle. We panic because these are terrible places. It's been happening for generations. Government scares us, because of what they've done to us.

—Participant 13, Native American woman, aged 40-49

There are Latinos who are very proud and don't seek out help because of pride. There is fear to grab services because the president ["Obama"] is deporting. We know that when people get deported, they are killed there, where they go back to. I have lost friends this way.

—Participant 43, Latino man, aged 50-64

Evaluating Current Homeless Housing Interventions and Services

Focus group participants shared their experiences accessing housing and services from the homeless system and provided insight on how the system could be more responsive to their needs.

Crisis Response (shelter, safe parking, showers, bathrooms, meal programs, and street outreach)

Overall, participants were appreciative of the crisis response services available, especially:

Shelters were the main thing that supported me when I was younger.

—Participant 2, Multiracial man, aged 25-39

The [outreach] people that bring food, that really helps. They come out with resources, ponchos when it's raining. That really helps. Showers. Laundry.

—Participant 17, Black woman, aged 50-64

The people that bring food help. And outreach people do a good job. Showers and laundry are very helpful.

—Participant 21, White woman, aged 25-39

For my little family we live in an RV. We utilize the people that do the showers on Miller and E 15th. There are some places that serve hot dinner, you just gotta stand in line. Or the food bank. Or just random people come by and bring toiletries.

—Participant 8, Native American woman, aged 25-39

(What would be helpful?) Storage.

—Participant 47, Woman with Unknown Race/Ethnicity, aged 50-64; Participant 50, White Woman, aged 50-64; and Participant 52, Black man, aged 40-49

Shelter 3 days a week for the homeless, that's really, I'm grateful for it. Trinity has been closed for years. But to have the opportunity to do laundry and showers 3 days a week; it's really a benefit in my opinion.

—Participant 52, Black man, aged 40-49

At the same time, participants remarked how crisis responses, specifically shelter and transitional housing, have programmatic barriers, including limited hours, restricting access to certain populations, and prohibiting visitors:

Sometimes they try to control your visitors and they put my daughter out. I'm in transitional housing right now and can have people come a couple times a year.

—Participant 26, Black man, aged 65+

That's one thing I don't like about here is they don't let you have visitors.

—Participant 27, Black woman, aged 65+

Maybe Saint Vincent de Paul in downtown Oakland. They have clothes there and showers. SVDP also gave access to computers and everything. I wish there was a lot of places like that, especially if it was 24 hours.

—Participant 4, Black woman, aged 18-24

A lot of them won't really support the type of families we come from. A lot of us have adult kids and parents. We are non-traditional families. This is the way our people were from the beginning. Our system doesn't fit with the government funds. We can't go anywhere because he is a man not in this family anymore but he is my son and he is family. And we are not going to split up, we are going to stick together.

—Participant 8, Native American woman, aged 25-39

In addition to these barriers, participants described negative experiences in shelters, including staff favoritism, conflicts with staff and other occupants, and concerns about health and safety in shelters:

I would go back to my car before I put my kids inside a shelter. I didn't want to have a newborn in a shelter – it was filthy. There were so many beds in there. Why are they not filling these beds? What is going on? Do you choose to pick who you put in there? It was just crazy. There are people out here, and you told me you did not have any beds... Now I'm seeing all the empty beds.

—Participant 33, Black woman, aged 25-39

There are rotten apples (staff) that are at some of the shelters.

—Participant 32, Latino man, aged 25-39

People get ripped off. People steal from you. The other night, somebody took my motorcycle helmet.

—Participant 31, Latino man, aged 50-64

You've got to stay in there and do everything perfect. You have to have a sponsor. You've got to get up real early. The only thing good about a shelter is the roof and the bed.

—Participant 17, Black woman, aged 50-64

Rapid Re-Housing (RRH)

Participants in the focus groups thought Rapid Re-Housing is particularly well-suited for people who just need “some help and some time,” or those who are in a position to “get back on their feet.” RRH relieves people from worrying about rent for several months (it can “take off the stress”) and offers time to regroup, become more financially stable, and/or look for permanent housing. This aspect of RRH resonated with many focus group participants:

Something like this would do me good. I'm a commercial truck driver. It would put me in a position that would help me. I would not have to worry about rent for six months. I could get my back account, my necessities... I would be able to regroup.

—Participant 31, Latino man, aged 50-64

I think it works for this reason: It will help you get into a place you couldn't get on your income alone [while homeless]. Even if all you have leftover is \$500 dollars a month... Then you can establish you can pay the rent.

—Participant 13, Native American woman, aged 40-49

These kinds of programs work for people who are very motivated and have the wherewithal to get back on their feet.

—Participant 35, Multiracial woman, aged 25-39

Other participants reflected that while RRH may work for some, it would not work for them. For those with limited ways of increasing their income, short-term support like RRH was not appealing:

You gotta pack up again because it goes so quick. If I don't have the benefits to move on and then I'm in the same spot, (homeless). My anxiety would kick in too. It would be hard.

—Participant 26, Black man, aged 65+

When I was younger and could get an income, but now I can't... 20 years ago maybe, when I had different energy. But now, I wouldn't take that chance. If something didn't pull through to make my housing affordable, I'd have to pack up and start again. Pack up and go to a shelter.

—Participant 30, Black woman, aged 65+

So you're in a place, and your job hasn't elevated – then you're homeless again. After that, what are you going to do?

—Participant 14, Black man, aged 50-64

Back then it would been bad for me because I just needed somewhere to live. That's what most people would do. I would need something longer. Because there's a lot of people where it's a cycle that's going to happen again.

—Participant 4, Black woman, aged 18-24

Rather than rejecting Rapid Re-Housing as an intervention, the focus group participants drew attention to the challenges of using RRH effectively in a high-cost housing market. The participants point to a need to refine and target the use of RRH to households who show potential for increasing their income and to provide a backstop for households in RRH who realize they need ongoing financial or services support.

Permanent Supportive Housing

Focus group participants were enthusiastic about the long-term, deeply subsidized rent component of Permanent Supportive Housing. The ongoing support service model received mixed reviews. Some welcomed support services—particularly light touch services that helped them feel secure—while others described support services as intrusive.

It depends on what the support is. Some people need substance abuse support. Some people need health care support. Some just need help going over finances and having their ducks lined up so they are making bills.

—Participant 13, Native American woman, aged 40-49

It will put me in a basic stable environment, compared to something temporary. It would help me work on my long-term issues. Go back to the root.

—Participant 32, Latino man, aged 25-39

I need security and social services. Elders need someone in the building to make sure everything is okay. They got a desk clerk and someone that walks the grounds at night to make sure they're not abused.

—Participant 27, Black woman, aged 65+

I kinda need it (PSH) right now. I have my own apartment right now but after all the stuff I've been through. All the trauma and times- I've been hit by a car a couple of times. I'm in a good place right now but have two different forms of bipolar disorder. I think about how there are a lot of people housed without that type of support. You have to support the mind and the physical.

—Participant 2, Multiracial man, aged 25-39

Dedicated Affordable Housing

Participants discussed how dedicated affordable housing was preferred to the other housing interventions because it allowed them to pay rent and live independently from what was interpreted as required services:

I get \$1000 a month and I'm willing to put half of it down for housing. I'd jump all over this—let's do this.

—Participant 19, Latino man, aged 50-64

The idea sounds good, but what is the wait to get in to such a program that offers that kind of help? You could get on a list and wait years. You could get on a list in 2020, but you don't get in until 2024.

—Participant 14, Black man, aged 50-64

I think it would probably work in my situation. Yeah, because the other one had support and I don't want people all up in my household living.

—Participant 10, Native American woman, aged 18-24

A lot of people would feel good getting some assistance and not having people on our back. If one could feel free to make decisions [about their housing]... People feel good being independent.

—Participant 32 Latino man, aged 25-39

Discussion

Participants in the focus groups repeatedly took personal responsibility for their homelessness, describing themselves as lazy or irresponsible. Others described feeling worthless or ashamed. Yet looking across the narratives, structural patterns emerge that reflect the ways that systems work in mutually reinforcing ways to produce the racial disparities in the homeless population. Participants described structural barriers—in education, accumulated adverse health impacts, mass incarceration, and generational poverty—that precipitated homelessness. Through this analysis, it became clear that when structural racism is not pinpointed as a root of homelessness for Black, Native Americans, and people of color, it is lived and systemically constructed as a personal failure.

The disproportionate number of people of color who are experiencing homelessness results from structural racism, with origins in manifest destiny, slavery, redlining, mass incarceration, and displacement. The REIA focus groups highlighted a lifetime of racial discrimination accumulated in the experiences of homeless Black, Native American, and other people of color. These include experiences of mass incarceration, barriers to education, adverse health impacts, generational poverty, and the loss of family and other networks of social and economic support.

Participants in the racial equity focus groups frequently described family and friends as providing economic and housing stability during times of insecurity. At the same time, the cumulative impact of structural racism may thin or distress these networks and make Black, Native American, and people of color vulnerable to homelessness.

The Bay Area's housing crisis's economic features are well documented: stagnant wages, particularly for the lowest-paid workers in a high-cost, low vacancy housing market. The racial equity focus groups show that the impact of structural racism in homeless people's lives—mass incarceration, barriers to education, and adverse health impacts, to name a few—makes it difficult to increase income.

The race equity focus groups heard that race-neutral housing application requirements form barriers to accessing housing and how these requirements disproportionately impact Black and Native American people. These include, but are not limited to, credit histories, bank account information, and extended residential histories.

The race equity focus groups affirmed the Point in Time count survey finding that homeless people have ties to the communities where they experience homelessness. Many reported growing up or raising children in the communities where they are now homeless. At the same time, the high cost of housing means that like many low-income households, homeless housing programs increasingly cannot find affordable housing opportunities in Alameda County. This dynamic disproportionately displaces Black, Native American, and other households of color from Alameda County.

A third of homeless households in Alameda County report no physical or mental health conditions, but nearly 75% have monthly incomes less than one thousand dollars. While the link between homelessness and poor health is well documented, it should not be equated with intensive ongoing support service needs. Participants in the racial equity focus groups looked forward to living independently in housing they could afford, without intensive—or invasive—case management.

System Strategies to Advance Equity

The REIA found that the homeless response system does not have the interventions needed to permanently rehouse people experiencing homelessness. Reducing disparities and improving outcomes for the racial and ethnic groups most impacted by homelessness will require adding new types of programs to the homeless response system, increasing all programs' availability, and improving program design and delivery.

Opportunities to Increase Racial Equity in the Homeless Response System Model

- **Increase the availability of homeless housing for people with extremely low incomes and high service needs.** Permanent Supportive Housing (PSH) is the only form of deeply subsidized housing available in the homeless response system. Long lengths of time homeless and a disability are required to qualify for this type of housing, which includes intensive, coordinated services. PSH works very well to help formerly homeless people with disabilities and long histories of homelessness to obtain permanent housing and prevent returns to homelessness. Because PSH works well, there are very few PSH units available each year. During FFY 2019, only 221 households exited PSH, a turnover rate of just 8%.²⁶ There is not enough PSH to serve all extremely low-income, disabled households experiencing chronic homelessness. For this reason, the modeling recommends increasing the amount of PSH available in the homeless response system to accommodate 25% of households with only adults and 10% of households with minor children.

- **Develop homeless housing opportunities for people with extremely low incomes and low ongoing service needs.** The REIA focus groups identified a gap in resources for extremely low-income households with low ongoing support service needs. Structural racism has a significant economic impact due to histories of incarceration, barriers to education, and employment discrimination, among other situations. Focus group participants described a need for *Dedicated Affordable Housing*, a form of deeply subsidized housing for homeless people that does not require a disability to qualify. The model anticipates that 28% of households with only adults and 30% of households with minor children could end their homelessness with a deep housing subsidy and limited support services.
- **Develop subsidized housing models for people with low incomes.** The REIA focus groups and provider input reinforced research that shows a growing number of Alameda County households are barely making ends meet.²⁷ Focus group participants drew attention to the gap between what they can earn and high housing costs. In response, the model creates *Shallow Subsidies*. Shallow rental subsidies provide a small amount of money to bridge the gap between income and rent. The model anticipates 13% of households with only adults and 21% of households with minor children could end their homelessness with a shallow subsidy.
- **Create targeted homelessness prevention and rapid resolution resources.** To respond to the intensifying, racially disproportionate inflow of people into homelessness, the model recommends investment in prevention resources targeted toward households most at risk of becoming homeless. Prevention resources include flexible funds, which can be used for car repair, back rent or utility bills, or stabilizing an extended family unit to keep one or more household members from becoming homeless. Flexible funds should not be restricted to one-time only. Prevention also takes ongoing shallow subsidies to address the gap between a household's earned income and high housing costs. This approach recognizes persistent shortfalls in income for households living from paycheck-to-paycheck and struggling to cover housing and basic living expenditures at their earned wage levels. Targeted prevention should look for opportunities to stabilize the extended family unit or household, not just the person(s) experiencing homelessness.
- **Targeted use of temporary supports.** Both the quantitative and qualitative components of the REIA made clear that one-time or temporary supports may fall short of realizing long-term housing stability for the highest-need households served in the homeless response system. These include households with long histories of homelessness, high service needs, and extremely low-income households with limited opportunities to increase income. This challenge is particularly acute for households of color due to racism in the employment sector and accumulated structural barriers. At the same time, the homeless response system model affirms RRH as an intervention that can be successful for as many as 13% of households. For this reason, the modeling recommends targeting RRH to households that show potential to increase their income and extending the timeline from six-to-nine months to 12 months. Additionally, the model plans for backstops that will help households that try RRH only to realize they need ongoing financial or service supports.
- **Create homeless housing opportunities throughout the county.** REIA highlighted the acutely limited housing options available in Alameda County for extremely low-income people. As a consequence, quantitative and qualitative research demonstrate the mounting pressure on low-income people to find more affordable housing elsewhere. The homeless response system must not participate in displacing low-income communities of color from Alameda County. Creating homeless housing opportunities throughout Alameda County will allow participants to choose to live in the communities where they work, have social support networks, and receive services.
- **Increase access by lowering programmatic barriers to participation in crisis services.** The equity focus groups highlighted the value and need for low-barrier crisis response services. These include supports for unsheltered

households such as safe parking, laundry, hygiene services, storage, and street outreach. Lowering barriers to crisis response services also means taking a critical eye to restrictions, including but not limited to curfews, storage, and food. Likewise, ensuring that programs can accommodate a variety of family units, including adult-only households with multiple adults, such as parents and adult children, as well as partners and spouses.

- **Increase Independence and Autonomy.** Participants in the racial equity focus groups described wanting to live in environments where they could access support and retain independence and privacy. This recognition appears in the program models as an emphasis on voluntary support services provided by staff trained to understand structural racism and provide anti-racist support.
- **Improve Communication.** The REIA showed that too often, participants receive inconsistent messages and incorrect information. The homeless response system must communicate clearly and with one voice about available resources, eligibility criteria, and the process for accessing resources.

Responding to homelessness as an outcome of structural racism will change how the homeless response system engages homeless people from frontline services to management to executive decision making. The racial equity lens also clarifies that ending homelessness will require social and structural changes beyond the boundaries of the homeless response system. Even so, the homeless response system must seize this moment to implement the changes daylighted through this analysis: naming structural racism, identifying the barriers that impact homeless people of color, and implementing structural solutions.

Inventory Recommendations Households with Only Adults

The inventory recommendations for households with only adults are premised on the implementation of the REIA recommendations. These recommendations include calibrating new and existing programs to the REIA-informed program designs to reduce the barriers homeless people of color encounter in program policies and procedures. As well, the resource pathways are proportioned to respond to the needs identified in the REIA. Resource pathways are designed to ensure that the homeless response system has enough of the right resources to end homelessness for households with only adults, and particularly Black and Native American households disproportionately represented in the homeless adult population.

Homeless households with only adults include an estimated 91.4%, or 12,005 households, and are the majority of people experiencing homelessness in Alameda County. Households with only adults are disproportionately Black (58%) and Native American (three percent) as compared with the general population of Alameda County (11% Black, one percent Native American).

The diagram below illustrates resource pathways designed to respond to the root causes of homelessness and barriers to housing stability that the REIA identified. These resource pathways must be available in a high-performing homeless response system to end homelessness for Black and Native American adults, who encounter the greatest barriers to housing and disproportionately return to homelessness.

While some homeless households will stay in a Crisis Response Program—emergency shelters, safe havens, domestic violence shelters, and transitional housing—before permanently becoming permanently housed, the homeless response system in Alameda County expects to directly connect unsheltered homeless households to permanent housing without a stay in a crisis response program. Participants in the REIA focus groups highlighted the positive benefits homeless people experience from crisis services, including street outreach, mobile health clinics, laundry, showers, and meal programs. The dashed lines represent pathways for unsheltered households, and the solid lines represent pathways for

sheltered households. The model presumes that roughly 10% of households with only adults will either “self-resolve” their homelessness by finding resources in their personal networks to end their homelessness, or the system will lose touch with them.

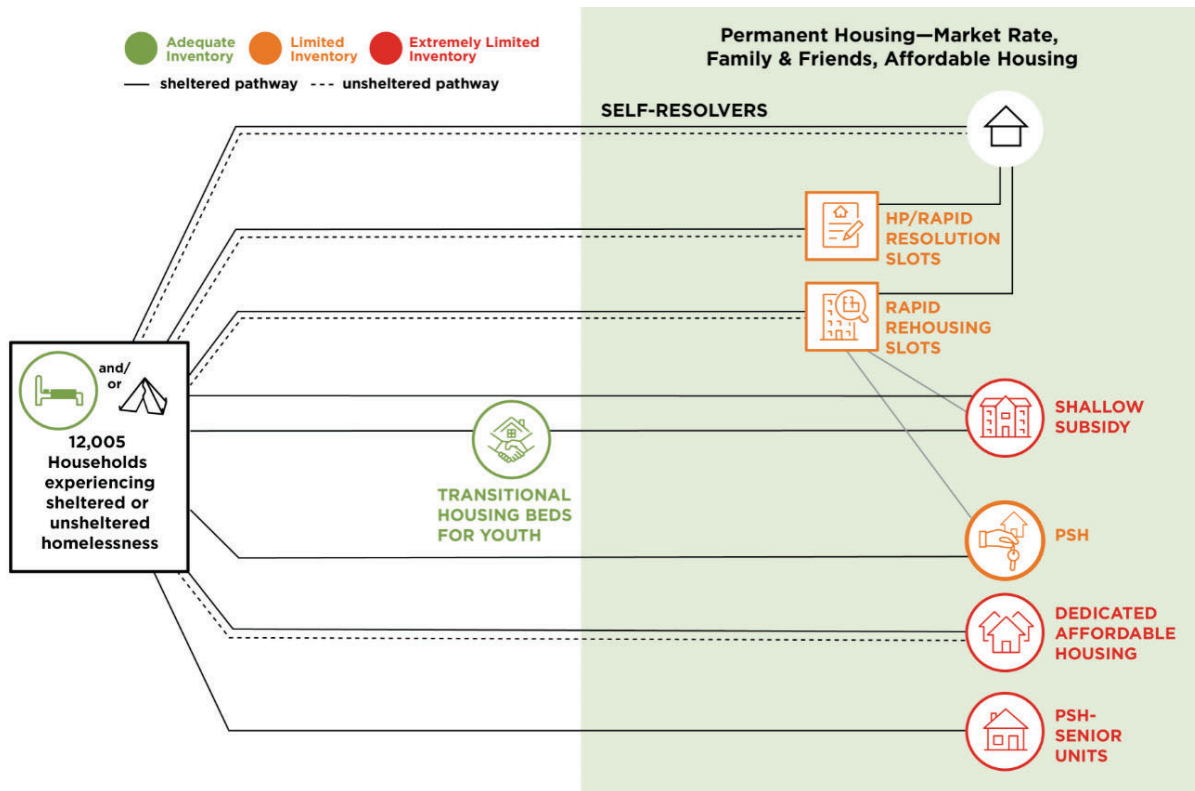


Figure 13: Resource Pathways for Households with Only Adults

The resource pathways for households with only adults are inclusive of the needs of households fleeing domestic violence and chronically homeless households. Transition Aged Youth and Seniors have unique pathways. Transition Aged Youth (TAY) aged 18-24 make up 12% of households with only adults in Alameda County. The community decided to address the needs of TAY within the system and program models generally until it is possible to do an intensive youth-focused modeling process with extensive participation from young adults aged 18-24. In the model for households with only adults, TAY will be served in the following ways:

- Homelessness Prevention/Rapid Resolution programs provide an ongoing income-contingent, long-term subsidy to people with jobs who need a subsidy to afford rent.
- Transitional Housing for Youth programs are specialized to serve young adults for 12 months in transitional housing and then through an ongoing shallow subsidy linked to the recipient's income.
- RRH programs will serve TAY who can increase their income to afford rent with an 18-month rental subsidy. This pathway presumes that TAY may find shared housing situations and/or increase their income so they can assume the full rent at the end of the subsidy period. A small percent of TAY households in RRH will need a Permanent Supportive Housing backstop because of more intensive service needs.

Seniors and adults aged 55 and older make up about 30% of households with only adults. The model anticipates that seniors will be served in the following ways:

- Dedicated Affordable Housing is responsive to older adults living independently on fixed incomes. Seniors will access Dedicated Affordable Housing from sheltered and unsheltered homeless living situations.

- PSH for Seniors is a more service-intensive version of PSH for formerly homeless adults who can no longer live independently. Because the homeless and the formerly homeless population is aging, the models presume 10% of households with only adults will need a higher level of care offered by PSH for Seniors.

Households with Only Adults: Leveling Up

Bringing the REIA-informed resource model to fruition involves “leveling up” the current system, which means reshaping the current homeless response system to match the REIA-informed system model. To do this, the community must add capacity in the areas where the system is under-resourced. Currently, the homeless response system has the greatest capacity in its Crisis Response interventions. This is not to say that the system has all the residential Crisis Response resources it will ever need to end homelessness. Instead, it is to say that bringing all the homeless response system resources into proportion with the existing amount of residential Crisis Response resources will generate flow through the system and enable the existing Crisis Response resources to function better. Indeed, at the writing of this report in August 2020, the average length of stay in a shelter is 171 days. To reach model performance level, the system must build up the permanent housing resources and homelessness prevention interventions to match the current level of residential Crisis Response capacity. Doing so will enable the residential Crisis Response resources to function at a higher level, serving four households each year for a 90-day average length of stay.

Importantly, the REIA showed that the homeless response system does not have homeless prevention and permanent housing interventions that work for the disproportionately Black and Native American households experiencing homelessness. Leveling up the under-resourced parts of the homeless response system by creating programs tailored to the root causes of homelessness among Black and Native Americans is designed to create more equitable outcomes. Leveling up the current system to realize a more effective and equitable system represents the beginning of ongoing work:

- Adding capacity in alignment with the REIA-informed inventory recommendations in the system model.
- Re-calibrating programs to the equity standards in the program models.
- Ongoing evaluation to ensure that the remodeled homeless response system is producing more equitable outcomes.
- Continuous improvement of the program and inventory models to respond to racial and ethnic disparities as they are identified.

The Level Up Calculator for households with Only Adults shows the type of resources and the number of units needed to align the homeless response system with the number of Crisis Response units currently available in the system. Crisis Response includes emergency shelters, transitional housing (excluding youth TH), safe-havens, and domestic violence shelters. Safe parking is not included because a systemwide count of inventory as not taken place.

All inventory in the Level Up Calculator is represented in units that correspond with the maximum number of households that can be served at a time. For permanent supportive housing, PSH for Seniors, Dedicated Affordable Housing, and Shallow Subsidy, the 2020 inventory in the Level Up Calculator is the number of units—new or as turnover—expected to be available over a year. The “level up cost” applies cost estimates generated by a working group of funders and providers. Aligning the homeless response system to meet adult-only households’ needs will cost an estimated \$211 million (rounded).

Level Up Calculator: Households with Only Adults

What type and amount of capacity and investment is needed to maximize existing resources and balance the system inventory?

	Ideal Ratio to Crisis Response	2020 Inventory (available units)	Ideal # Units	Additional Units Needed	Level up cost	How close is the current system to the ideal ratio?
Homeless Prevention and Rapid Resolution	25%	53	339	286	\$5,152,500	16%
Crisis Response (ES, TH, SH)	100%	1,357	1,357	0	\$0	100%
Transitional Housing for Youth	17%	103	226	123	\$4,495,583	46%
Rapid Re-Housing (RRH)	183%	278	2,488	2,210	\$49,168,792	11%
Permanent Supportive Housing (PSH)	133%	321	1,809	1,488	\$37,654,833	18%
PSH for Seniors	83%	0	1,131	1,131	\$33,925,000	0%
Dedicated Affordable Housing	233%	0	3,166	3,166	\$65,543,100	0%
Shallow Subsidy	108%	0	1,470	1,470	\$14,700,833	0%
Total		2,112	11,987	9,875	\$210,640,642	18%

Figure 14: Level Up Calculator for Households with Only Adults

The 2020 HIC provides a pre-COVID-19 point-in-time snapshot of the system inventory. At the writing of this report, the COVID-19 pandemic has necessitated decompressing congregate Crisis Response residences. Nonetheless, an Annual Performance Report of these crisis shelter programs shows that as of July 29, 2020, the number of households with only adults being served in crisis shelter programs has increased from 1,357 capacity reported in the HIC to 1,515 households. The above recommendations can be considered conservative, considering this expansion in shelter occupancy.

Households with Only Adults: Scaling Up

Once the homeless response system is proportionately aligned with the model, it can be brought to a scale capable of addressing the population needs of homeless households with only adults. The below chart shows the package of homeless prevention, crisis shelter, and permanent housing resources needed to serve each additional 100 homeless households with only adults.

The resource package describes interconnections between homelessness prevention, crisis shelter, and permanent housing resources. New resources cannot be added as modular components. An equitable and effective homelessness response requires planners, funders, providers, and elected leaders to develop a coherent and proportionate system of interrelated pathways. Permanent housing resources must accompany investments in crisis response for the system to achieve flow and perform at a higher, more equitable level.

Some of the inventory will serve multiple households. For example, each unit of emergency shelter will serve four households each year for three months each, for a combined total of 48 households annually. Because some households will use more than one, the interventions will not total 100. Cost estimates are estimated by a working group of funders and include funders' and subcontractors' administrative costs. Multi-year estimates include a three percent cost of living adjustment compounded year after year.

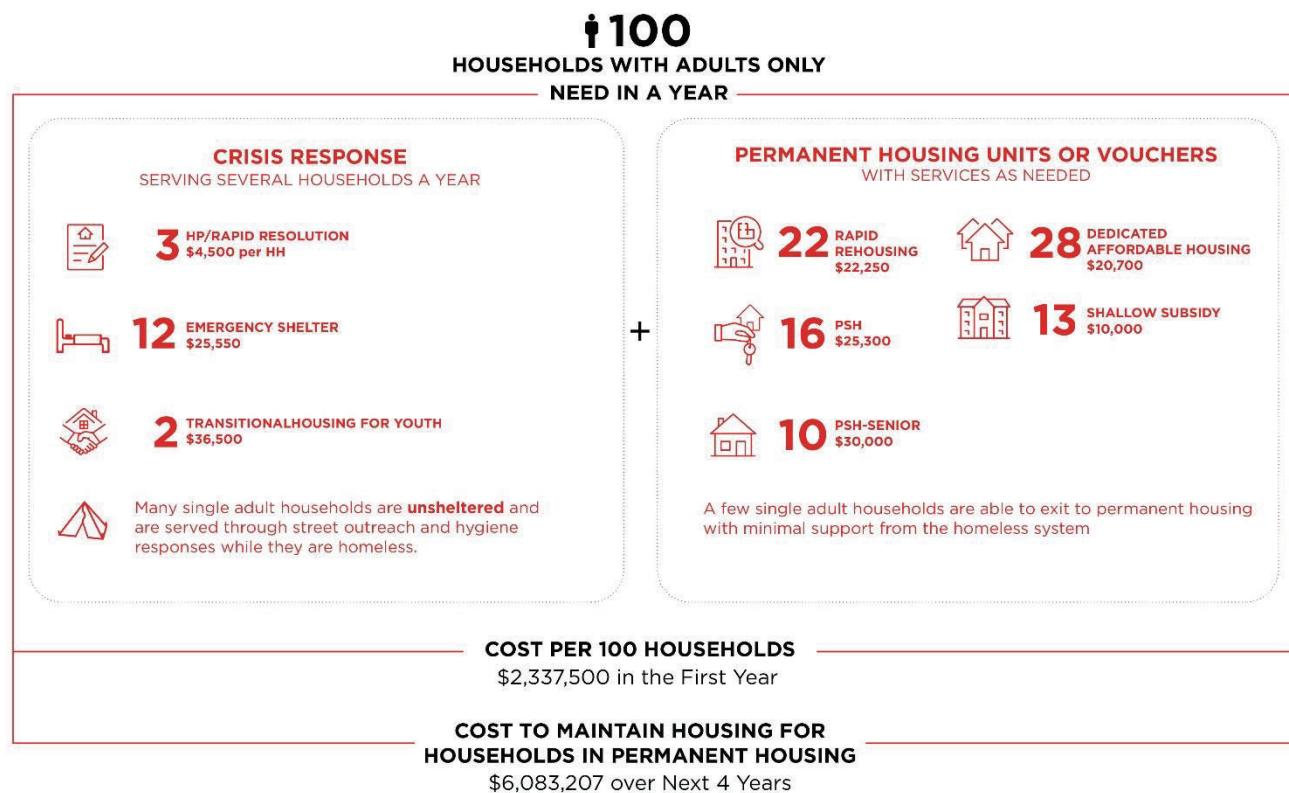


Figure 15: What 100 Households with Adults Only Need in a Year

The modeling workbook allows the community to adjust three variables: inflow into homelessness, returns to homelessness, and level of investment. The variables can be adjusted to match the current situation or project the impact of changes in these variables. Because of these inputs, the modeling workbooks are dynamic and powerful tools for planning. At the same time, it is important to notice that even as the community process worked to build the REIA into the system model structures, the modeling workbooks alone are not enough to ensure racially equitable outcomes. Ongoing evaluation and community accountability are required to fully implement the REIA recommendations throughout the system, remove barriers, identify latent or emerging racial disparities, and course-correct. This is the work ahead.

To illustrate the model's utility as a planning tool, Figure 16 assumes that the more equitable and responsive homeless system represented in the model will improve the rate of permanent housing retention, steadily reducing the 19% rate of returns to homelessness by three percent each year to seven percent over five years. The inflow of households into the homeless response system maintains at 20%, close to the inflow rate that Alameda County experienced between 2017 and 2019. Scenario 1 begins with a significant investment of \$100 million in year one and then adds \$60 million in year two, \$50 million in year three, \$30 million in year four, and \$250,000 in year five. The total combined cost of Leveling Up and Scaling Up in Figure 16 is \$1.1 billion.

Scenario 1 Investment Impact Dashboard, Households with Only Adults

	2020	2021	2022	2023	2024	2025
Returning from Previous Year		19%	16%	13%	10%	7%
Inflow		20%	20%	20%	20%	20%
Total New Investment (cumulative)		\$100,000,000	\$160,000,000	\$210,000,000	\$240,000,000	\$240,250,000
Annual HH in the System	12,005	14,925	16,218	15,765	14,926	14,742
Annual Exits	4,442	7,773	11,308	13,447	14,731	14,741
Annual Remaining	7,563	7,152	4,909	2,318	195	0
Unmet Need	63%	48%	30%	15%	1%	0%

Figure 16: Scenario 1, Investment Impact Dashboard, Households with Only Adults

Using the variables in Figure 16, the models show an increase in homelessness in year two at 16,218 households with only adults. Unmet need steadily declines year after year until reaching functional zero, no unmet need, in year five. Figure 17 describes the additional units needed each year in Scenario 1. Some of these resources will serve multiple homeless households that year, such as Homeless Prevention and Rapid Resolution, Crisis Response, and Transitional Housing for Youth. Other resources are likely to serve only one household, including Permanent Supportive Housing, PSH for Seniors, Dedicated Affordable Housing, and Shallow Subsidies.

Scenario 1 Entire CoC 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Homeless Prevention / Rapid Resolution	194	260	318	368	373
Crisis Response (ES, TH, SH)	997	1,335	1,633	1,890	1,915
Transitional Housing for Youth	155	208	255	295	298
Rapid Re-Housing (RRH)	1,672	2,237	2,736	3,166	3,208
Permanent Supportive Housing (PSH)	1,244	1,665	2,037	2,357	2,388
PSH for Seniors	777	1,041	1,273	1,473	1,492
Dedicated Affordable Housing	2,176	2,914	3,565	4,124	4,178
Shallow Subsidy	1,010	1,353	1,655	1,915	1,939

Figure 17: Scenario 1, Entire CoC 5-Year Inventory Needs, Households with Only Adults

There is good reason to think that an infusion of significant, new investment in alignment with the REIA-informed program models and inventory recommendations can produce a more equitable and effective response to homelessness. The model shows that the proportion of households that exit homelessness to permanent housing (Annual Exits/Annual HH in the System) will increase from 37% to 100% in year five. The proportion of households returning to homelessness will decrease. These outcomes—obtaining and retaining permanent housing—are directly targeted to improve outcomes among homeless Black and Native Americans, who encounter structural barriers to obtaining housing and return to homelessness at disproportionately high rates.

Yet even as the strategy in Scenario 1 supports a homeless response system that works better for the people it serves, investment alone will not end homelessness. As showing in Figure 16, an extraordinary number of adults in Alameda County, particularly Black and Native American adults, will continue to experience homelessness because of the high inflow rate. Inflow will not abate without addressing structural racism, economic inequality, and housing shortages that drive homelessness in Alameda County.

Scenario 2 provides a point of comparison. Figure 18 uses the same rate of return and inflow rate as in Scenario 1, assuming that retention will quickly improve, reducing by three percent each year to seven percent returning in the fifth year. Scenario 2 also assumes that inflow into homelessness will remain both steady and high at 20%. Finally, Scenario 2 adds \$50 million of new investment each year. The combined cost of Leveling Up and Scaling up is \$956 million over five years.

Scenario 2 Investment Impact Dashboard, Households with Only Adults						
	2020	2021	2022	2023	2024	2025
Returning from Previous Year		19%	16%	13%	10%	7%
Inflow		20%	20%	20%	20%	20%
Total New Investment (cumulative)		\$50,000,000	\$100,000,000	\$150,000,000	\$200,000,000	\$250,000,000
Annual HH in the System	12,005	14,925	17,617	20,240	21,326	22,336
Annual Exits	4,442	6,107	7,773	11,308	13,447	15,586
Annual Remaining	7,563	8,818	9,844	8,932	7,879	6,749
Unmet Need	63%	59%	56%	44%	37%	30%

Figure 18: Scenario 2, Investment Impact Dashboard, Households with Only Adults

Scenario 2 shows a homeless response system that is gradually improving. Unmet need, the proportion of all households that remain homeless from one year to the next (Annual Remaining/Annual HH in the System) declines from 63% to 30% over five years. The proportion of households that obtain permanent housing increases to 70% in year five, and housing retention improves to seven percent.

Nonetheless, the number of households experiencing homelessness increases each year (Annual HH in the System) reaches 22,336 homeless households with only adults in year five. This is an 86% increase over the total number of households estimated to experience homelessness in 2020. In Scenario 2 the system does not reach functional zero, no unmet need, in five years. Even as the homeless response system becomes more efficient, the high inflow rate and a gradual investment strategy means that households are homeless longer and more people are homeless at a point in time.

Scenario 2 Entire CoC 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Homeless Prevention / Rapid Resolution	153	165	208	235	260
Crisis Response (ES, TH, SH)	784	846	1,069	1,207	1,336
Transitional Housing for Youth	122	132	167	188	208
Rapid Re-Housing (RRH)	1,313	1,416	1,792	2,023	2,239
Permanent Supportive Housing (PSH)	977	1,054	1,334	1,506	1,666
PSH-Seniors	611	659	834	941	1,042
Dedicated Affordable Housing	1,710	1,844	2,335	2,635	2,917
Shallow Subsidy	794	857	1,084	1,223	1,354

Figure 19: Scenario 2, Entire CoC 5-Year Inventory Needs, Households with Only Adults

The side-by-side charts in Figure 20 represent the different impacts of Scenario 1 and Scenario 2 in the homeless population: annual population (blue), exits from homelessness (red), and annual remaining homelessness (green). These graphs show that significant investment early in the process can quickly turn the curve. At the same time, both scenarios indicate that thousands of adults will continue to experience homelessness each year, even after five years of aggressive investment. These households are likely to be disproportionately people of color and, in particular, Black and Native American people. Without addressing the factors driving homelessness—racism, economic inequality, and housing shortfalls—homelessness will continue to harm an extraordinary number of adults in Alameda County.

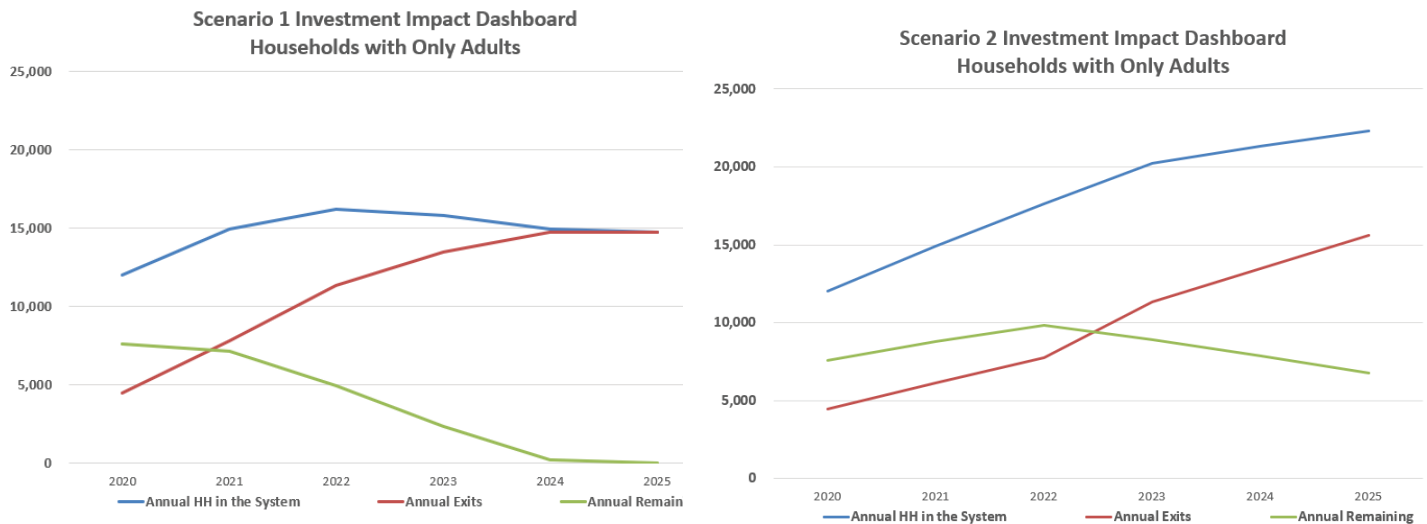


Figure 20: Investment Impact Comparison of Scenario 1 and Scenario 2 in Households with Only Adults

Households with Only Adults: Regional Models

Regional models that divide the estimated homeless population into the Continuum of Care's sub-geographic areas using the 2019 Point in Time Count can be found in the appendices. Both Scenario 1 and 2 are available for each of the five CoC sub-geographic regions. These regional estimates make three important assumptions:

1. Household compositions and needs are relatively consistent across the CoC.
2. The inflow of people into homelessness is consistent across the CoC.
3. Rates of returns to homelessness are consistent across sub-geographic regions.

At the writing of this report, the CoC does not have baseline inventory data for each region. As a result, it is difficult to provide accurate estimates of additional units needed in each region. The below table shows the additional permanent housing inventory needed in Scenario 1, which reaches functional zero. The inventory needs are divided into the five sub-geographic regions using the population distribution from the 2019 Point in Time Count.

Scenario 1 Total New Units Needed by Year 5 by Geography, Households with Only Adults						
	All CoC	East County	Mid-County	North County	Oakland	South County
PIT % by Geo.	100%	4.3%	18.5%	16.5%	50.7%	10.0%
PSH	7,671	330	1419	1266	3889	767
PSH - Seniors	5,292	228	979	873	2683	529
Dedicated Affordab	15,584	670	2883	2571	7901	1558
Shallow Subsidy	7,235	311	1338	1194	3668	723
Total Units Needed	35,781	1,539	6,619	5,904	18,141	3,578

Figure 21: Scenario 1, Total New Units Needed by Year 5 by Geography, Households with Only Adults

In the future, the Point in Time Count, HMIS, and additional data collection may provide a more detailed understanding of regional similarities and differences in the characteristics and needs of homeless households in each community, the inflow rates and returns to homelessness, and the crisis and housing resource inventories.

Inventory Recommendations Households with Minor Children

This report's inventory recommendations for households with minor children provide a blueprint of the community's best thinking toward addressing the equity gaps in the homeless response system. Based on findings from the REIA, the inventory recommendations allocate resources in ways designed to remove structural barriers and create opportunities for homeless families with minor children, and in particular the Black and Native American households over-represented in the homeless population.

Households with minor children make up 7.5% of all households experiencing homelessness, with an estimated 985 households with minor children experiencing homelessness each year in the Oakland-Berkeley-Alameda County Continuum of Care. Homeless families with minor children are disproportionately Black (55%) and Native American (5%) as compared with the general population of Alameda County (11% and one percent respectively).

Figure 22 illustrates the resource pathways for families that the community designed to be responsive to the root causes of homelessness and barriers to housing stability identified in the REIA. These resource pathways represent the community's best thinking about the resources needed to produce greater equity in a high functioning homeless response system.

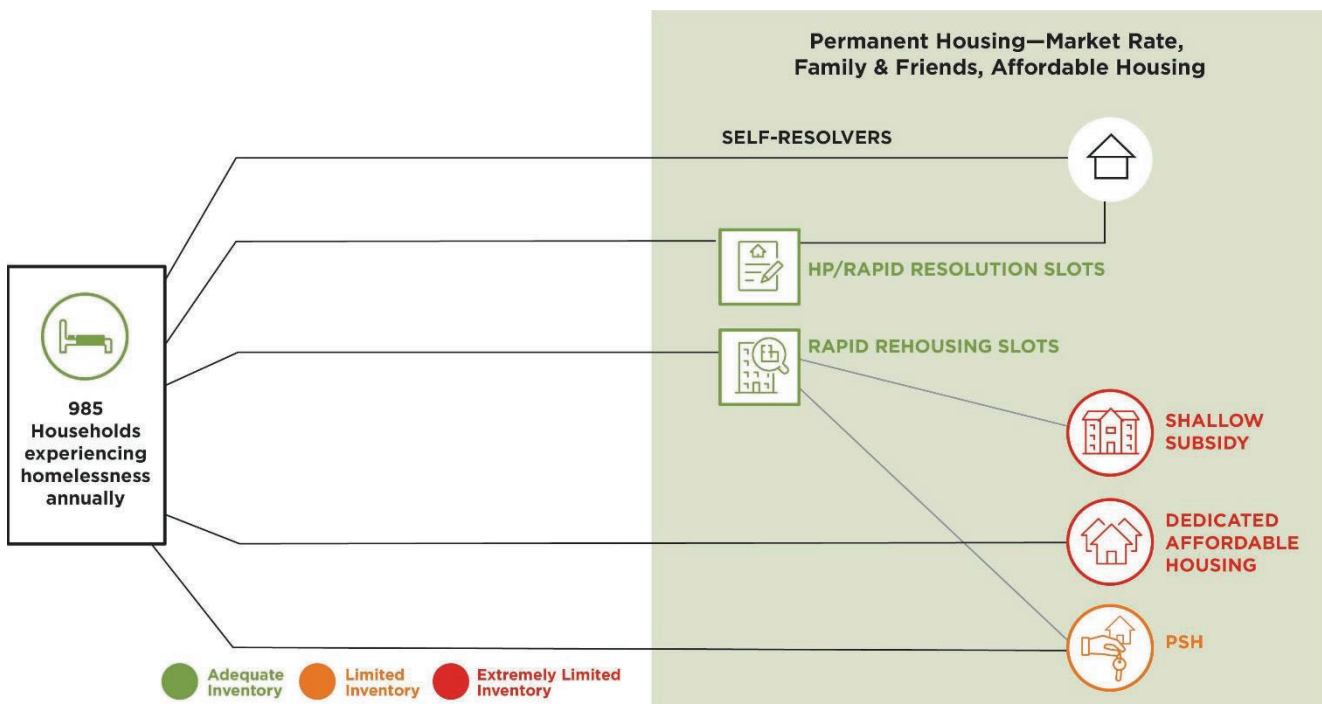


Figure 22: Resource Pathways for Households with Minor Children

The working group that focused on households with minor children began from the premise that the vast majority, if not all homeless families with minor children, would use residential crisis response programs like shelter and transitional housing if those programs are carefully calibrated to their needs. Details on the features of crisis response programs that homeless families need can be found in Appendix D. Like the pathways for households with only adults, this set of pathways assumes that 10% of households “self-resolve” their homelessness or lose contact with the system. The pathway diagram shows that Shallow Subsidies, Dedicated Affordable Housing, and Permanent Supportive Housing are the interventions that need the most significant investment.

Households with Minor Children: Leveling Up

Bringing the REIA-informed resource model to fruition involves two steps, including “leveling up” the current homeless response system to align with the model and then “scaling up” the homeless response to serve the entire population of families experiencing homelessness. Leveling up is reshaping the current system response to match the REIA-informed model system for serving families with minor children. To do this, the CoC must add capacity in the areas where the family system is under-resourced.

Currently, the systemic response to homeless families has the greatest capacity in its Crisis Response, followed closely by Rapid Re-Housing. Crisis Response includes emergency shelter, transitional housing, and domestic violence shelters. The system has a greater capacity in Crisis Response and RRH, but that does not mean that the family system has all the Crisis Response or RRH resources it will ever need to end homelessness. Instead, it is to say that building up the permanent housing and homeless prevention resources will create flow through the system and enable the existing Crisis Response and RRH resources to function more efficiently. For example, adding PSH and Dedicated Affordable Housing resources will provide a permanent housing backstop that is modeled for families with minor children in RRH. The community anticipates that this backstop will reduce the number of families that return to homelessness from RRH.

Once again, the REIA showed that the homeless response system currently does not have the kinds of homelessness prevention and permanent housing interventions that will work in the long term for homeless families that are disproportionately Black, Native American, and other people of color. These include Short Term and Ongoing Homeless Prevention and Rapid Resolution programs, Shallow Subsidies, and Dedicated Affordable Housing. Leveling up the homeless response system by creating programs tailored to the root causes of homelessness among Black and Native American families with minor children is expected to create more equitable outcomes. Adding inventory to the current system to realize a more effective and equitable system is just the beginning, however. Ongoing work includes:

- Adding capacity in alignment with the REIA-informed inventory recommendations in the system model.
- Re-calibrating existing programs and developing new programs to meet the equity standards in the program models.
- Measuring performance to verify the remodeled homeless response system produces equitable outcomes.
- Continuous improvement of the program and inventory models to respond to racial disparities and barriers as they are identified.

The Level Up Calculator shows the types and quantity of units needed to bring the systemic response to homeless families into alignment with the REIA informed model. All the numbers represent units or the maximum number of households with minor children that can be served at a given time. The 2020 Inventory for Permanent Supportive Housing (PSH), Dedicated Affordable Housing, and Shallow Subsidy are shown as the number of units—new or turnover—expected to be available over a year.

The model for households with minor children includes a surge of 246 PSH units for homeless households with minor children who have experienced long lengths of time homeless. The “Level up cost” column applies cost estimates for each intervention type that were generated by a working group of funders and providers. Aligning the homeless response system to meet the needs of homeless households with minor children, including a surge in Permanent Supportive Housing, will cost an estimated \$18 million (rounded).

Level Up Calculator: Households with Minor Children

What type and amount of investment is needed to maximize existing resources and balance the system inventory?

	Ideal Ratio to Crisis Response	2020 Inventory (available units)	Ideal # Units	Surge units for longstayers	Total additional units (level up + longstayers)	Level up cost	How close is the current system to the ideal ratio?
Homeless Prevention/Rapid Resolution	14%	3	22		19	\$336,273	14%
Crisis Response (ES and TH)	100%	159	159		0	\$0	100%
Rapid Re-Housing	68%	102	108		6	\$142,602	94%
Permanent Supportive Housing	45%	61	72	246	258	\$7,846,718	19%
Dedicated Affordable Housing	136%	0	217	0	217	\$5,609,086	0%
Shallow Subsidy	182%	0	289	0	289	\$4,423,091	0%
Total	Total Units	325	867	246	789	\$18,357,770	37%
	Total HH served	650	723	246	605		

Figure 23: Level Up Calculator for Households with Minor Children

At the writing of this report, the COVID-19 pandemic has necessitated decompressing congregate shelter and transitional housing environments. Nonetheless, an Annual Performance Report of Crisis Response programs shows that as of July 29, 2020, the number of households with minor children being served in shelters is 123, 36 households fewer than the capacity of 159 reported in the 2020 HIC. There is good reason to think that current occupancy, even with congregate decompression, is comparable to what is reported in the HIC. For one, the HIC includes all inventory, while the APR reports occupancy. Occupancy may be lower than the decompressed inventory if, for example, a shelter slot was unoccupied at the quarterly Point in Time count on July 29, 2020. The HIC includes domestic violence shelter capacity, while the APR does not include domestic violence shelter occupancy. For these reasons, it is reasonable to think that crisis response inventory for households with minor children during COVID-19 is comparable to pre-COVID-19 capacity and that the above recommendations remain accurate.

Households with Minor Children: Scaling Up

Once the homeless response system that serves homeless families with minor children is aligned with the model, it can be brought to a scale capable of addressing the needs of all households with minor children. The below chart shows the package of prevention, crisis shelter, and permanent housing resources needed to serve 100 households with minor children.

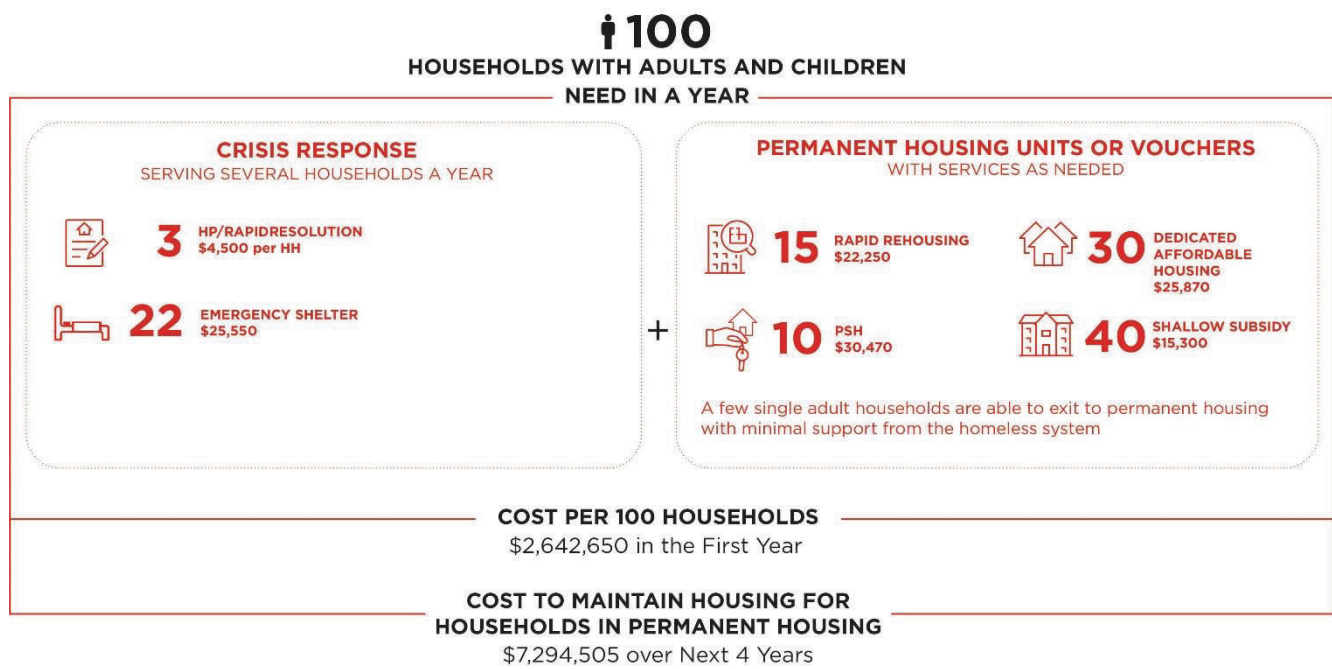


Figure 24: What 100 Households with Adults and Children Need in a Year

Importantly, homeless families need prevention, crisis response, and permanent housing resources that interconnect to meet their needs and create pathways out of homelessness. Adding resources in ways that reinforce those pathways will lead to a more effective and equitable homeless response. The 100-household package of resources describes the interrelationship between homelessness prevention, crisis shelter, and permanent housing resources that homeless families need. Planners and funders, the Continuum of Care, Alameda County, cities, and philanthropies must invest in the combined package of resources to produce a coherent system that performs efficiently and equitably.

Some of the inventory will serve multiple households. For example, each emergency shelter slot will serve four households each year for three months each, serving a total of 88 households annually. As well, some households will use more than one intervention. For this reason, the chart does not add up to 100. Cost estimates are determined by a working group of funders and service providers, describe the cost per household served, and include funders' and subcontractors' administrative costs, operating costs, but exclude capital costs. The cost to maintain housing for households in permanent housing over four years includes a three percent cost of living adjustment compounded year after year.

The modeling workbooks are powerful tools for planning because they can be adjusted to reflect different rates of inflow, returns, and investment. Still, it is critical to remember that even as the community process worked to build the REIA into the system model structures, the modeling workbooks alone are not enough to ensure racially equitable outcomes. Ongoing evaluation and community accountability are required to implement the REIA recommendations, remove barriers, identify emerging racial disparities, and course-correct. This is the work that lies ahead.

Scenario 1 Investment Impact Dashboard, Households with Minor Children						
	2020	2021	2022	2023	2024	2025
Returning from Previous Year		12%	10%	8%	6%	4%
Inflow		20%	20%	20%	20%	20%
Total New Investment (Cumulative)		\$13,000,000	\$21,000,000	\$26,000,000	\$28,000,000	\$29,000,000
Annual HH in the System	985	1,171	1,222	1,194	1,118	1,124
Annual Exits	364	618	823	1,012	1,088	1,125
Annual Remaining	621	552	399	182	30	(2)
Unmet Need	63%	47%	33%	15%	3%	0%

Figure 25: Scenario 1, Investment Impact Dashboard, Households with Minor Children

As an example, Figure 25 assumes inflow into the homeless system is realistically high, maintaining at 20%, close to the 22% inflow rate Alameda County experienced between 2017 and 2019. It also assumes that the modeled homeless system is more equitable than the current system, resulting in an improved permanent housing retention rate. The rate of returns steadily reduces by two percent each year from 12% to four percent over five years. Scenario 1 begins with a significant investment of \$13 million in year one and then adds \$8 million in year two, \$5 million in year three, \$2 million in year four, and \$1 million in year five. The total combined cost of Leveling Up and Scaling Up the response for homeless households with minor children is \$135 million (rounded) over five years.

Using the variables in Scenario 1, the CoC could see an increase in the annual number of homeless households with minor children that peaks in year two at 1,222 households. Unmet need declines year after year, achieving functional zero in five years. Figure 26 describes the additional Point in Time inventory needed each year according to the investment strategy, inflow, and returns to homelessness defined in Scenario 1. Some of these resources will serve multiple homeless families with minor children that year, such as homeless Prevention/Rapid Resolution and Crisis Response programs. Other resources are likely to serve only one household, including Permanent Supportive Housing, Dedicated Affordable Housing, and Shallow Subsidies.

Scenario 1 Entire CoC 5-Year Inventory Needs, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Homeless Prevention/Rapid Resolution	15	21	25	27	28
Crisis Response (ES,TH)	128	172	210	226	234
Rapid Re-Housing (RRH)	93	123	152	163	169
Permanent Supportive Housing (PSH)	62	82	101	109	113
Dedicated Affordable Housing	186	247	303	327	338
Shallow Subsidy	247	329	405	435	450

Figure 26: Scenario 1, Entire CoC 5-Year Inventory Needs, Households with Minor Children

Significant new investments in alignment with the REIA-informed program models and inventory recommendations are likely to produce a more equitable and effective response to homelessness. The proportion of households that exit homelessness to permanent housing (Annual Exits/Annual HH in the System) will increase from 37% to 100%. The proportion of households returning to homelessness will gradually decrease. The number of families with minor children who return to homelessness will decrease. Increasing the number of households that obtain and retain permanent housing are key performance targets that are essential to improving outcomes for homeless Black and Native American families, who encounter structural barriers to obtaining housing and return to homelessness at disproportionately high rates.

Yet even as the homeless response system becomes more effective, the number of households with minor children experiencing homelessness each year remains unacceptably high. The steady and elevated inflow rate into homelessness disproportionately impacts Black and Native American households with minor children. Changing the

inflow rate depends upon addressing structural conditions—racism, economic inequality, and housing shortages—that drive the intensification of homelessness across the CoC.

Changing the inputs in turn changes in the model changes the trajectory of homelessness. Scenarion 2 shown in Figure 27 reflects the same returns and inflow rates as Scenario 1. Scenario 2 changes the investment strategy to add \$6 million of new investment each year. The total combined cost of Leveling Up and Scaling Up in Scenario 2 is \$108 million (rounded).

Scenario 2 Investment Impact Dashboard, Households with Minor Children						
	2020	2021	2022	2023	2024	2025
Returning from Previous Year		12%	10%	8%	6%	4%
Inflow		20%	20%	20%	20%	20%
Total New Investment (Cumulative)		\$6,000,000	\$12,000,000	\$18,000,000	\$24,000,000	\$30,000,000
Annual HH in the System	985	1,171	1,345	1,523	1,719	1,857
Annual Exits	364	482	599	723	950	1,177
Annual Remaining	621	689	746	800	769	680
Unmet Need	63%	59%	55%	53%	45%	37%

Figure 27: Scenario 2, Investment Impact Dashboard, Households with Minor Children

This scenario shows annual increases in the number of households with minor children that are homeless each year (Annual HH in the System). In year five, 1,857 families experience homelessness. Unmet need or the proportion of all households that remain homeless from one year to the next (Annual Remaining/Annual HH in the System) declines from 63% to 37%. Still, it continues to impact hundreds of families each year. In sum, families will remain homeless for longer, and the number of homeless families will double in five years.

Scenario 2 Entire CoC 5-Year Inventory Needs, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Homeless Prevention/Rapid Resolution	12	15	18	24	29
Crisis Response	100	125	150	198	245
Rapid Re-Housing (RRH)	72	90	108	142	177
Permanent Supportive Housing (PSH)	48	60	72	95	118
Dedicated Affordable Housing	144	180	217	285	353
Shallow Subsidy	193	239	289	380	471

Figure 28: Scenario 2, Entire CoC 5-Year Inventory Needs, Households with Minor Children

The additional investment described in Scenario 2, if made in alignment with the REIA-informed program models and inventory needs shown above, will result in a more effective homeless response over five years. Yet even as the homeless response system becomes more effective in Scenario 2, the number of households with minor children that experience homelessness each year remains high because of the rates of inflow and unmet need. Without significant investment and addressing the root causes of homelessness—racism, economic inequality, and housing shortfalls—homelessness will continue to harm an extraordinary number of households with minor children in Alameda County.

Figure 29 shows the impact of Scenario 1 and 2 side-by-side for comparison of the annual number of homeless households with minor children (blue), the number of households that exit to permanent housing (red), and the number of households with minor children that remain homeless from one year to the next (green). These graphs show that the investment scenario matters. Significant investment early on can turn the curve of homelessness for households with minor children.

Both scenarios show that hundreds of families with minor children will continue to experience homelessness each year in Alameda County. These are likely to be disproportionately households of color, specifically Black and Native American households. Addressing the factors driving homelessness, namely structural racism, economic inequality, and housing shortages, is intrinsic to ending family homelessness.

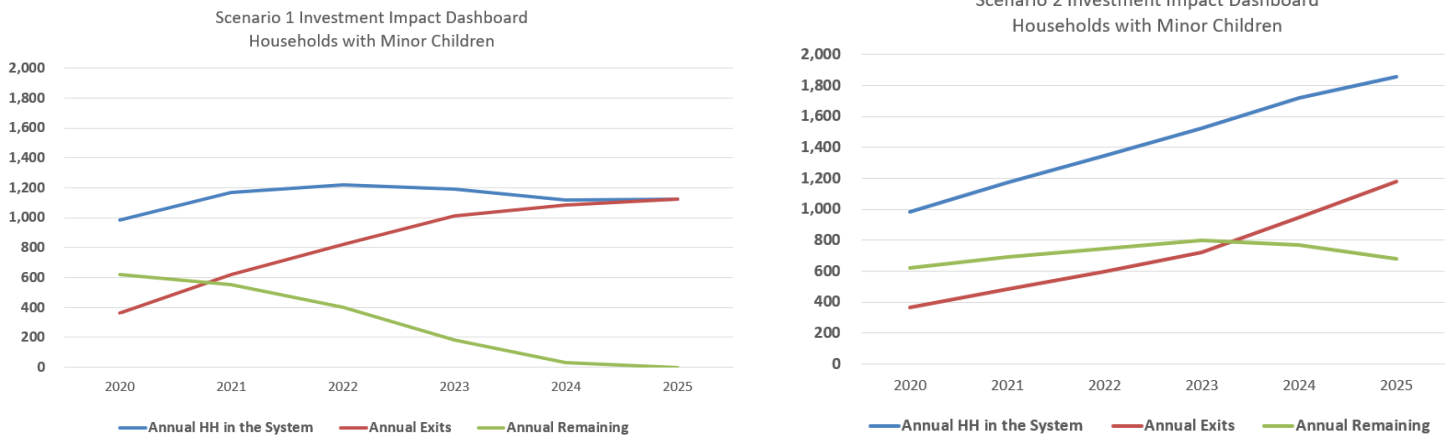


Figure 29: Investment Impact Comparison of Scenario 1 and Scenario 2 in Households with Minor Children

Households with Minor Children: Regional Models

Regional models that divide the estimated homeless population into the Continuum of Care's sub-geographic areas using the 2019 Point in Time Count can be found in the appendices. Both Scenario 1 and 2 are available for each of the five CoC sub-geographic regions. The regional estimates make three important assumptions:

1. Household compositions and needs are relatively consistent across the CoC.
2. The inflow rate into homelessness is consistent across the CoC.
3. Rates of returns to homelessness are consistent across sub-geographic regions.

At the writing of this report, the CoC does not have baseline inventory data for each region. As a result, it is difficult to provide accurate estimates of the number of additional units needed in each region. The below table shows the total additional units of permanent housing needed to serve households with minor children in Scenario 1, which reaches functional zero. The inventory needs are divided into the five sub-geographic regions using the population distribution from the 2019 Point in Time Count.

Scenario 1 Total New Units Needed by Year 5 by Geography, Households with Minor Children						
	All CoC	East County	Mid-County	North County	Oakland	South County
PIT % by Geo.	100%	4.3%	18.5%	16.5%	50.7%	10.0%
PSH	257	11	47	42	130	26
Dedicated Affordable Housing	1,285	55	238	212	652	129
Shallow Subsidy	1,712	74	317	282	868	171
Total Units Needed	3,254	140	602	537	1,650	325

Figure 30: Total New Units Needed by Year 5 by Geography, Households with Minor Children

In the future, the Point in Time Count, HMIS and additional data collection may provide a more detailed understanding of the regional similarities and differences in the characteristics and needs of homeless households in each community, the inflow rate and returns to homelessness, and the crisis and housing resource inventories.

Next Steps

The work of developing a racially equitable and effective homeless response system is only beginning. Bringing racial equity into the fabric of homeless system planning is a critical innovation. It will also take ongoing effort and determination to put racial equity at the center of every aspect of the homeless system. As a starting place, the Continuum of Care is committed to disaggregating performance outcomes by race. Consistently disaggregating performance outcomes by race will help the CoC identify and respond to racial disparities and evaluate progress toward a racially equitable system. Also, stakeholders can begin implementing the program model recommendations, deeply informed by the Racial Equity Impact Analysis. The program models' structures and practices can be developed into policies, incorporated into contracts, and measured using the Results Based Accountability framework.

A high performing and racially equitable homeless system of care will require significantly more resources to address service gaps. Stakeholders must develop coordinated funding strategies. These include creating a reliable funding source to expand permanent supportive housing, shallow subsidies, and dedicated affordable housing. The Home Together general sales tax ballot initiative that passed in November 2020, is a promising new revenue stream. The CoC, among other concerned stakeholders, will need to work closely with the Alameda County government to ensure that the funds are used in alignment with the inventory recommendations and program models developed through the REIA and system modeling process.

Additionally, the community does not have a system-wide inventory of deeply affordable housing earmarked for homeless households, though some of this type of housing exists. Adding Dedicated Affordable Housing to the HMIS and filling those units through coordinated entry will provide a way of tracking the development of this housing type and ensuring that vacancies are filled with another homeless household. Increasing the inventory of deeply affordable housing will also require obtaining and developing new housing. Strategies for adding deeply affordable housing include Low-income Housing Tax Credits and Community Land Trusts, among others.

The Racial Equity Impact Analysis focus groups can be resumed and expanded to capture insight into what works (and doesn't) for LGBTQI+ people and Native Hawaiians/Pacific Islanders, as an example of two perspectives not captured in the first round of focus groups that was cut short by the COVID-19 pandemic.

Finally, the models are dynamic and can be adjusted annually as new information about the homeless population becomes available, and as new resources are implemented. An annual process of updating the models will provide a current gaps analysis and allow the CoC to track progress toward fully implementing the models. These measures should be interpreted against racial equity performance outcomes, including but not limited to the racial and ethnic composition of inflow and returns to homelessness.

The racially equitable and effective homeless response system that is the goal of this report is best understood as an ongoing set of actions rather than a static structure. Making it a reality and keeping it going through intentional actions is the most important kind of work. That work starts now.

Acknowledgements

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Abt Associates facilitated the modeling process with sharp analysis, graphics, and an appetite for problem solving. Thank you, Joyce Probst MacAlpine, Stephanie Reinauer, Puneet Kaur, and Meghan Takashima.

The following organizations participated in the Leadership Committee:

Abode Services	City of Livermore
Alameda County Administrator's Office	City of Oakland
Alameda County District 1, Supervisor Haggerty's Office	City of San Leandro
Alameda County District 2, Supervisor Valle's Office	Consumers of Homeless Services
Alameda County District 3, Supervisor Chan's Office	Crankstart
Alameda County District 4, Supervisor Miley's Office	EveryOne Home Leadership Board
Alameda County District 5, Supervisor Carson's Office	Housing Authority of Alameda County
Alameda County Health Care Services Agency	Housing Authority of the City of Alameda
Alameda County Housing and Community Development Agency	Kaiser Permanente
Alameda County Social Services Agency	Livermore City Council
All Home	Livermore Housing Authority
ALL IN Alameda County Youth Action Board	Mayor of Fremont, Lily Mei
Bay Area Community Services	Mayor of Livermore, John Marchand
Benioff Homelessness and Housing Initiative, UCSF	Mayor of Oakland, Libby Schaaf
Berkeley Housing Authority	Veteran Affairs Network Homeless Coordinator
City of Alameda	Northern California VA
City of Albany	Oakland City Council
City of Berkeley	Oakland Housing Authority
City of Emeryville	Oakland-Berkeley-Alameda County Continuum of Care's
City of Fremont	HUD CoC Committee
City of Hayward	University of California San Francisco

Each of the following organizations contributed countless hours of staff time to develop the homeless system models in the working groups:

Abode Services	Covenant House
Alameda County Health Care Services Agency	East Oakland Community Project
Alameda County Housing & Community Development Agency	EveryOne Home Leadership Board
Alameda County Social Services Agency	Family Violence Law Center
Alameda Point Collaborative	First Five Alameda County
All Home	Housing Consortium of the East Bay
ALL IN Alameda County	LifeLong Medical Care
ALL IN Alameda County Youth Action Board	Oakland-Berkeley-Alameda County Continuum of Care
Bay Area Community Services	Roots Community Health Center
Berkeley Food and Housing Project	Ruby's Place
Building Futures	Satellite Affordable Housing Associates
City of Alameda	St. Mary's Center
City of Berkeley	South Hayward Parish
City of Fremont	Supervisor Carson's Office
City of Livermore	Supervisor Chan's Office
City of Oakland	UCSF Benioff Children's Hospital Oakland

The Racial Equity Impact Analysis and this report would not exist without the steadfast support of the City of Oakland's Office of Race and Equity, EveryOne Home Leadership Board, EveryOne Home staff on behalf of the Continuum of Care, Alameda County Health Care Services Agency's Department of Public Health and Office of Homeless Care and Coordination, Alameda County Social Services Agency, and Alameda County Supervisor Wilma Chan's Office. Specific thanks to:

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Emile Durette	Tammy Lee	Jessica Shimmin
Darlene Flynn	Alexis Lozano	Sarah Ting
Sandi Galvez	Liz Maker	
Mara Goby	Andrew Nelson	

The following organizations recruited persons with lived experience of homelessness for the Racial Equity Impact Analysis Focus Groups:

ALL IN Alameda County Youth Action Board	Intertribal Friendship House
BANANAS	Open Heart Kitchen
Bay Area Community Services	ROOTS Community Health Center
City of Livermore	St. Mary's Center

Thank you to the City of Oakland, Alameda County Department of Public Health, and Alameda County-Oakland Community Action Partnership, Open Heart Kitchen and CityServe who provided food and compensation for the focus group participants with lived experience of homelessness.

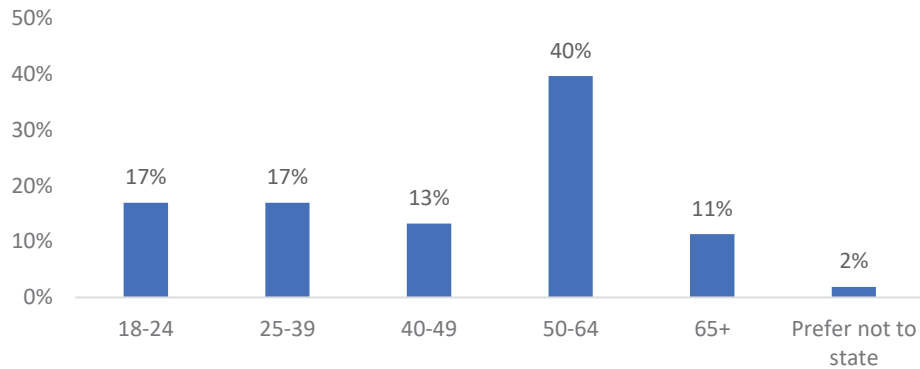
Deep and humble thanks to the people with current or former experiences of homelessness for sharing your stories in the focus groups. Your insights are the foundation of this plan.

Appendix A: Racial Equity Impact Analysis Focus Groups

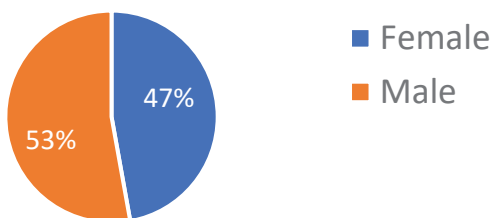
Demographics

A total of 53 individuals participated in the focus groups, provided below is more on the composition of the participants.

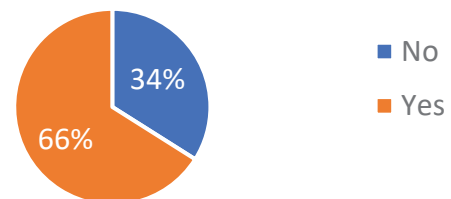
Focus Group Participant by Age



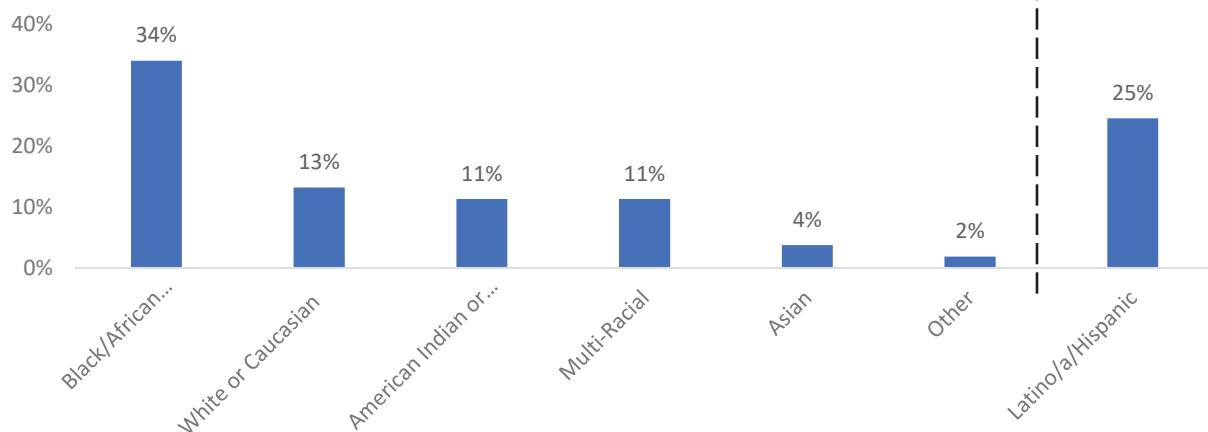
Focus Group Participants by Gender



Focus Group Participants by Current Literal Homelessness Status



Focus Group Participants by Race/Ethnicity



Systems Modeling and Equity Focus Groups Background

Focus Group Advantages

- Gather diverse opinions and ideas directly from people with first-hand knowledge of the issue. Views participants as “experts.”
- Can be lower-cost and more efficient than one-on-one interviews.
- The group dialogue can help participants to think about and recall their own experiences or viewpoints.

Focus Group Disadvantages

- Relies heavily on a non-biased facilitator with good rapport with the group
- Some individuals may dominate the discussion while others do not speak up.
- May not be able to generalize findings to the whole population (members cannot speak for everyone else in their demographic or interest group).

Key Focus group roles

Moderator

- Sets the tone of the focus group, conveys respect, and shows appreciation for the expertise of the group.
- Asks questions and guides the participants through the focus group.
- Makes sure the discussion stays on topic.

Notetaker

- Records conversation as accurately as possible using the provided note-taking template.
- If multiple notetakers there can be focus areas assigned (i.e. one person to capture themes and one to capture quotes”)
- Assists the Moderator as requested.

Observer

- Attends focus group and notes key themes from the discussion.
- Notes the focus group process and helps apply insights to future focus groups.

Logistics Support

- Before the focus group: Chooses the location, sets up the room, arranges and sets up food, brings supplies (such as name tags and flip charts).
- During the focus group: signs in participants, makes sure they fill out and hand in the demographic questionnaire, distributes incentives (gift cards).



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Focus Group Recruitment

Research Question: What ideal model of the homeless services and housing system emerges from a nuanced understanding of homeless people's experiences, and in particular the needs of over-represented groups including African Americans, Native Americans, Native Hawaiians/Pacific Islanders, and Spanish speakers

Recruitment guidelines: People currently experiencing homelessness or formerly experiencing homelessness. Homelessness is defined as staying in an emergency shelter, transitional housing for homeless people, or safe haven program, or living outside in a place not meant for people to live such as a sidewalk, bench, park, tent, abandoned building, vehicle, RV, etc.

Each group will have 8-12 participants, with the suggestion of recruiting 15 and having some not show.

Compensation:

- Snacks or light lunch
- Gift such as gift card or care package

Service Providers and Attendance: We recognize that some participants will feel more comfortable with a trusted service provider in attendance. For this reason, staff members are welcomed to attend the groups in a supportive role. Because the focus groups are intended to elicit experiences from people currently or previously experiencing homelessness, service providers must play a listening and learning role.



Homelessness and Equity Focus Group Questionnaire

Please fill out this short questionnaire. It will help us describe who was part of this discussion group. Your individual responses will NOT be shared – we'll just describe the group as a whole. Thank you!

1. What is your age?

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Younger than 18 | <input type="checkbox"/> Between 18-24 | <input type="checkbox"/> Between 25-39 | <input type="checkbox"/> Prefer not to state |
| <input type="checkbox"/> Between 40-49 | <input type="checkbox"/> Between 50-64 | <input type="checkbox"/> 65+ | <input type="checkbox"/> Don't Know |

2. With what gender do you identify?

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| <input type="checkbox"/> Transgender | <input type="checkbox"/> Queer/gender non-conforming |
| <input type="checkbox"/> Other: _____ | |

3. With what your race or ethnicity do you identify? [Mark all that apply]

- | | |
|--|--|
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Latino/a/ Hispanic (Mexican, Central/ South American) |
| <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> White or Caucasian |
| <input type="checkbox"/> Other (specify) _____ | |

4. Where have you stayed in the past 30 days? [Mark all that apply]

- | | |
|--|---|
| <input type="checkbox"/> In my own apartment/house | <input type="checkbox"/> Car/RV |
| <input type="checkbox"/> With my parent(s) indoors | <input type="checkbox"/> With other relatives indoors |
| <input type="checkbox"/> With my friend(s) indoors | <input type="checkbox"/> Foreclosed building / squat |
| <input type="checkbox"/> Drug/alcohol treatment center | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Hotel/motel | <input type="checkbox"/> Shelter |
| <input type="checkbox"/> Transitional living program | <input type="checkbox"/> Outside/tent/encampment |
| <input type="checkbox"/> Other (specify) _____ | |

5. Did you have any children under age 18 living with you in the past 30 days?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

System Modeling and Equity Focus Groups Moderator Role and Tips

Moderator Role

- Having a good moderator is key to having a successful focus group with rich and valid insights. An effective moderator:
 - Can quickly put people at ease and draw them out in a group environment.
 - Has experience leading group discussions and comfort with the focus group topic.
 - Is somebody who can relate to the participants and who participants will feel comfortable speaking openly and honestly with.
 - Can remain impartial.
 - Can encourage participation.
 - Is sensitive to gender, cultural issues and power differences among and within groups.

Moderator Tips

- Follow the focus group interview guide.
 - Increases the credibility of the research results.
 - Increases the comprehensiveness of the data and makes data collection more efficient
- Read one question at a time.
- Hold back your opinions. Your role is to moderate, not participate.
- Interrupt as little as possible
- Avoid putting words in participants' mouths. Avoid questions that are leading, meaning that they reflect your opinions or assumptions.
- Listen to responses. If something is unclear, practice reflective listening and ask a follow-up question (sometimes called "probes.")
 - Repeat the question. This gives people time to think about their responses.
 - Summarize what you've just heard. Ask participants if the summary is correct. See if others agree or disagree.
 - "I think what I heard you say is.... Did I get that right? Do others have a similar or different opinion?"
 - Follow suggested probes in the interview guide, or ask when, what, where, which and how questions. Avoid "why" questions, which can put people on the defensive.
- Encourage participation by all participants and interaction between participants.
- Maintain good eye contact with participants.



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Common Facilitation Challenges and Solutions.

- What to do if one person in group dominates
 - Redirect the conversation to other participants
 - Ask for the opinion of those who have not yet spoken up
 - Give nonverbal cues (e.g., look at other people in the room)
- What to do if nobody speaks up or certain people don't speak up
 - Ask for the opinion of those who have not yet spoken up
 - Pay attention to body language and draw out those who are silent but seem to have something to say. For example, say "Person X, you are shaking your head. What are you thinking?"
- What to do if people get off-track
 - Intervene and put this comment/idea in a "parking lot" or "bike rack"
 - Intervene and refocus the discussion
 - Take advantage of a pause and say, "Thank you for that interesting idea – perhaps we can further discuss this after the group. With your consent, I'd like to move on to another item/question."
- What to do if somebody puts somebody else down
 - Remind the group that respect was one of the ground rules of the group and that all opinions are valid and valued.
 - Remind the group to focus their responses on their own experience. Not everybody will have the same personal experience.
- What to do when you are running out of time during the focus group?
 - Prioritize questions in the guide. Ask the most important questions in each section first.
 - Note if you had to consolidate or skip questions. Sometimes participants will have already answered a later question earlier in the discussion (for example, giving recommendations when you ask them about challenges.)



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Focus Group Discussion Guide For People with Lived Expertise of Homelessness

Introduction & Purpose (4:00-4:05)

Hi. Thank you for taking the time to talk with us today.

We want to hear from you because we want to create more of what works for people experiencing homelessness to get housed and stay housed. To create a system that works, we need to be informed by you, including, because you are the experts. We especially want to know the experience of over-represented groups including (subpopulation).

We want to hear about challenges you've experienced and what works. We'll use this information to align around a plan and spend money on things that work because we need to get it right.

There are a number of people in the room who will be taking notes on what you say. There are also staff from [insert organization name e.g. Roots Community Health or St Mary's Center] and some additional people working on this project who will be observing to learn from what you say. We recognize that some participants will feel more comfortable with a trusted service provider in attendance. For this reason, staff members are welcome to attend in a supportive role. Because the focus groups are intended to elicit experiences of people currently or previously experiencing homelessness, service providers must play a listening and learning role.

You will receive a \$50 gift card to [redacted] once the session is over.

Ground Rules:

- There are no right or wrong answers.
- All responses are valued.
- It is okay to have different opinions. We do not all have to agree.
- Speak one at a time.
- We have only 90 minutes today, and we want to hear from everyone, so we may need to move on from a topic to get through the questions.
- Do not repeat what you hear today to others outside of the group. What is said in here should stay here.

Prevention & Diversion (4:05-4:20)

We'd like to start off talking about what led to you becoming homeless and what might have prevented you from becoming homeless.

What kinds of things made it hard to keep housed at that time?

What kinds of help do you think could have prevented you from becoming homelessness?

Crisis & Shelter Interim Services (4:20-4:35)

What services and supports are most helpful to you?

Prompt: These could include, but aren't limited to shelter, safe parking, showers, bathrooms, meal programs, and street outreach. They could be other things as well.

What services and supports have not been helpful to you?

(optional prompts)

- What is your experience with shelters?

- If you have lived outside, what kinds of services and supports were helpful to you? What was not helpful to you when you were living outside?
- If you have lived in a vehicle or RV, what kinds of services and supports were helpful to you? What was not helpful to you when you were living in a vehicle or RV?

Housing Barriers (4:35-4:50)

What has been hard for you as you try to find housing?

What challenges have you faced, now or earlier in your life, that you believe have led to you being homeless today?

Types of Housing Programs (4:50-5:05)

We'd like to get your thoughts about three different kinds of housing support for people experiencing homelessness.

2. The first is Rapid Re-Housing.

- Rapid Re-Housing includes short-term rental assistance with help finding a place to rent, usually lasting 6-9 months.
- Types of housing could be an SRO room, shared housing with a roommate or two, or your own place.
- It's possible that the available rental units would be outside of the City or County.
- At the end of the program, the participant(s) need to be able to pay rent on their own.
- To pay the rent on their own, participants in Rapid Re-Housing typically need to increase their income.

Based on your experience, would the short-term subsidized housing I just described work for you? Why or why not?

3. The second kind of housing is Permanent Supportive Housing.

- This is a program for people that need long-term subsidized housing with intensive services, including case management.

Based on your experience, would permanent supportive housing with intensive services work for you? Why or why not?

4. The last program is called Dedicated Affordable Housing.

- Dedicated Affordable Housing is for homeless people that have low incomes but don't need a lot of services.
- It's for individuals and families that are currently homeless, and they are required to pay a portion of their income in rent- typically somewhere between 30% and 50% of the household's monthly income.
- Examples of Dedicated Affordable Housing are Section 8.

Would this kind of permanent and affordable housing, without supportive services, work for you? Why or why not?

Maintaining Housing & No Returns to Homelessness (5:05-5:20)

Too many people who experience homelessness return to homelessness after finding housing.

If you have become homeless, gotten housing and then lost housing again, what could have kept you from becoming homeless again?

How do we improve our response so you can stay housed?

Closing (5:20-5:30)

Is there anything else you want us to know that hasn't been said today?

Do you have any questions?

Thank you so much for joining us today and sharing your experience and expertise with us.
Your feedback will be helpful with planning and improving our housing services/programs.



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Racial Equity and Systems Modeling Focus Groups Notetaking Protocol

Before the Focus Group	<ul style="list-style-type: none"> ▪ Prepare your supplies: <ul style="list-style-type: none"> ○ E-mailed copy of the Notetaking Template ○ Name tags or table tents ○ Laptop computer or hand-writing supplies ○ Flip chart, markers and tape (e.g., for “Parking Lot”; “Questions”) ▪ Check in with your facilitator and other notetakers to discuss roles ▪ Make sure everyone signs in and gets a name tag and table tent. Note the # of the participant on the questionnaire. ▪ The facilitator may want to acknowledge if notetakers, staff, or other observers will be listening/present during the group.
During the Focus Group	<ul style="list-style-type: none"> ▪ Document comments, major themes, and ideas that come up during the focus group as accurately and thoroughly as you can. ▪ Feel free to make non-verbal observations (like feel in room during particular questions/comments or questions where there was more/less response). ▪ Ensure confidentiality by referring to participants by their number or first name in your notes. ▪ Support the facilitator: <ul style="list-style-type: none"> ○ Keep the focus group on schedule (timekeeping) ○ Communicate with facilitator and participants if you need clarification of an important point. ○ Assist with arranging the room, signing people in, collecting the demographic questionnaire, and distributing/signing for gift cards. ○ Assist with checking in with participants and staff at the end of the focus group to make sure their needs (e.g. questions or concerns) have been met.
Right After the Focus Group	<ul style="list-style-type: none"> ▪ Debrief with your team ASAP (facilitator, notetakers and observers): <ul style="list-style-type: none"> ○ Discuss your notes and any areas where you feel you may have missed something. ○ Observations about the feel of the focus group, comfort level with questions, agreement, or disagreement among participants. ○ Key themes (e.g., barriers, challenges, unmet needs) or ideas (e.g., what works/doesn't work, recommendations) that came up during the group ○ Insights about the Focus Group Interview Guide or process/protocols. How was the language? How was the pacing? Does anything need to be revised? Anything major missing?



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Planning and Evaluation (CAPE) Unit

January 2020

<p>Right After the Focus Group</p> <p>(Continued)</p>	<ul style="list-style-type: none"> ▪ Review your notes: <ul style="list-style-type: none"> ○ Review, spell check, revise and add anything else you remember from the focus group discussion. ○ Identify places in your notes where you have notable questions/comments (e.g., participants seemed to be answering a different question like when people talk about what was hard when they were asked to discuss what was helpful.)
<p>Within 5 Business Days</p>	<ul style="list-style-type: none"> ▪ E-mail your notes to liz.maker@acgov.org and sarah.ting@acgov.org ▪ Discuss insights and observations at the Racial Equity and Systems Modeling Check-In




Prepared by the Community Assessment,
Planning and Evaluation (CAPE) Unit

January 2020


Focus Group Discussion For People with Lived Experience and Expertise

Notetaking Template

Information about Today's Focus Group		
Notetaker:		Focus Group Date:
Focus Group Location:		
Host Staff Present (Name and their role in the focus group):		
Racial Equity and Systems Modeling Group Members Present (Name and their role in the Focus Group):		

Discussion Item or Question	Notes
Introduction and Purpose We want to hear from you about your experiences. What challenges you've experienced and what works.	
Ground Rules <ul style="list-style-type: none"> • There are no right or wrong answers. • All responses are valued. • It is okay to have different opinions. We do not all have to agree. • Speak one at a time. • We have only 90 minutes today, and we want to hear from everyone, so we may need to move on from a topic to get through the questions. • Do not repeat what you hear today to others outside of the group. What is said in here should stay here. 	
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[illegible]

Discussion Item or Question	Notes
Prevention & Diversion	
We'd like to start off talking about what lead to you becoming homeless and what might have prevented you from becoming homeless.	
What kinds of things made it hard to keep housed at that time?	
What kinds of help do you think could have prevented you from becoming homelessness?	
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Discussion Item or Question	Notes
Crisis & Shelter Interim Services	
What services and supports are most helpful to you? Prompt: These could include, but aren't limited to shelter, safe parking, showers, bathrooms, meal programs, and street outreach. They could be other things as well.	
What services and supports have not been helpful to you? <ul style="list-style-type: none"> • Experience with shelters? • Helpful and not helpful when living outside. • Helpful and not helpful when living in a vehicle or RV. 	
Housing Barriers	
What has been hard for you as you try to find housing?	
What challenges have you faced, now or earlier in your life, that you believe have led to you being homeless today?	



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Discussion Item or Question	Notes
<p>1. Rapid Rehousing</p> <p>Based on your experience, would the short-term subsidized housing I just described work for you?</p> <p>Why or why not?</p> <ul style="list-style-type: none"> • Short-term rental assistance with help finding a place to rent, usually lasting 6-9 months. • Includes an SRO room, shared housing with a roommate or two, or your own place. • Available rental units would be outside of the City or County. • At the end of the program, the participant(s) need to be able to pay rent on their own. • Participants in Rapid Re-Housing typically need to increase their income. 	
<p>2. Permanent Supportive Housing</p> <p>Based on your experience, would permanent supportive housing with intensive services work for you?</p> <p>Why or why not?</p> <ul style="list-style-type: none"> • For people that need long-term subsidized housing with intensive services, including case management. 	



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Discussion Item or Question	Notes
<p>3. Dedicated Affordable Housing</p> <p>Would this kind of permanent and affordable housing, without supportive services, work for you?</p> <p>Why or why not?</p> <ul style="list-style-type: none"> For homeless people that have low incomes but don't need a lot of services. For individuals and families that are currently homeless, and they are required to pay a portion of their income in rent- typically somewhere between 30% and 50% of the household's monthly income. Examples of Dedicated Affordable Housing are Section 8. 	
<p>Maintaining Housing & No Return to Homelessness</p>	
<p>If you have become homeless, gotten housing, and then lost housing again, what could have kept you from becoming homeless again?</p>	
<p>How do we improve our response so you can stay housed?</p>	



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Discussion Item or Question	Notes
Closing	
Is there anything else you want us to know that hasn't been said today?	
Do you have any questions?	



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Appendix B: Method of Estimating Annual Homeless Population and Geographic Distribution

Calculating the number of units and beds needed in an ideal system begins with the annual number of households experiencing homelessness. The Oakland-Berkeley-Alameda County model will also need annual counts of different subpopulations and geographies. Unfortunately, our HMIS is not currently prepared to establish annual counts and geographic distribution because some project types and parts of the county are less covered than others. Instead, we recommend using the Point in Time Count data to estimate the number of people experiencing homelessness in a year, their geographic distribution throughout the county, and the average household size. This is the strongest approach in the short term, and going forward, we should advocate for HMIS coverage and configuration that can more readily meet these needs.

Estimating the unduplicated number of people experiencing homelessness in a year

There is no universally accepted method for estimating the unduplicated number of households or people experiencing homelessness annually. It is impossible to know the actual number of people who experience homelessness in a year, though estimating methods offer a likely range.

- Low End: 12,014 unduplicated people. This number derives from the monthly inflow rate into homelessness (4.456%) from the Point in Time count survey.
- High End: 19,000 unduplicated people. This number draws from the Housing Inventory Chart and the HMIS to understand utilization rates and the total beds available in the system.
- Middle Option: 15,786 unduplicated people. This number was reached using the weekly inflow rate from the 2019 PIT; this is the method used in the *EveryOne Home 2018 Strategic Plan Update*.
 - The weekly inflow rate from the 2019 PIT survey (1.89%) multiplied by the total Point in Time count (8,022) suggests 151.82 people become homeless each week. Multiplied by the remaining weeks in a year (51.14) produces 7,764 as the number of additional people experiencing homelessness each year. Adding in the original Point in Time count produces 15,786 as the number of unique people experiencing homelessness each year.

We recommend using 15,786 as the number of people experiencing homelessness in a year for system modeling.

Geographic distribution of people experiencing homelessness

- HMIS is not configured to provide regional or jurisdictional data. Because some areas of the county have better HMIS coverage than others, we cannot use HMIS to estimate the regional distribution of people experiencing homelessness.
- By Name List data relies on the assessment, which has not been implemented consistently throughout the county to ensure representative geographic distribution.
- The survey component of the Point in Time Count has small samples in some parts of the county, which could offer a partial and misleading understanding of the regional distribution of homelessness.
- The census portion of the 2019 Point in Time Count addressed each census tract and shelter in the county systematically, although some have concerns that the biennial PIT is an undercount.

Although the PIT data has some limitations, particularly related to counting households with minor children, it is the strongest data source currently available for understanding the geographic distribution of homelessness in Alameda County. For this reason, we recommend using the Point in Time count to estimate the proportion of people experiencing homelessness in North County, Oakland, Mid-County, East County, and South County.

Point In Time Count Geographical Distribution	% of PIT	Population Estimate (persons)
East County (Livermore, Pleasanton, Dublin)	4.3%	679
Mid County (Hayward, San Leandro, Alameda)	18.5%	2,920
North County (Berkeley, Albany, and Emeryville)	16.5%	2,605
Oakland	50.7%	8,004
South County (Fremont, Union City, Newark)	10.0%	1,579
Total	100%	15,786

Figure 33: Point in Time Count Geographical Distribution

Household Size

Average household size for families and households with adults only can be derived from various sources. Because we are using Point in Time Count data for the first two measures, we wanted to use PIT data on the average household size. While the number of members in households with minor children was close across data sources, the number of members in adult-only households of 1.001 was rather low. For this reason, we recommend using 1.05 as the number of members in adult-only households from the HMIS as seen in Stella. Stella provides dynamic visuals of CoCs' Longitudinal Systems Analysis (LSA) data to illustrate how households move through the homeless system, and to highlight outcome disparities.

Persons per household	
Adult Only Household	1.05
Households with Minor Children	3.082
Households with Only Children	1.000

Figure 34: Persons per household (size)

These household sizes and the geographic estimates of people experiencing homelessness each year will generate a more precise multiplier for converting the total number of people into the total number of households. And, while these figures provide reasonable estimates to use for planning purposes, the available data may not fully represent the number of adult-only households that include two (or more) adults, or households with only children that include two (or more) children who wish to stay together as a household as they are experiencing homelessness and/or moving into stable housing.

Household Configuration

We are confident that the PIT methodology—specifically the way it estimated households in vehicles—leads to an undercount of the total number of households with minor children. For this reason, we recommend using the ratio of adult-only households to a household with minor children from the HMIS, adjusted to account for unique households who are only served by domestic violence shelters or non-HMIS service providers: 91.4% of households are adult-only, 7.5% of households have minor children, and 1.1% in households with only children.

Household Composition	% of Households
Adult-Only Households	91.4%
Adult-Only Households (DV/non-HMIS)	
Households with Minor Children	7.5%
Households with Minor Children (DV/Non-HMIS)	
Households with Only Children	1.1%
Household Composition	100%

Figure 35: Household Configuration Percentages

91.4% of households are adult-only households with 1.001 members on average, 7.5% of households have minor children and an average of 3.082 members, and 1.1% of households have only children with one member per household.

Together, the number of household members should total 15,786 people. Using these ratios and the average household size, we can convert the estimated total number of persons experiencing homelessness into the estimated total number of households experiencing homelessness using the following formula:

$$15,786 = .914(1.05x) + .075(3.082x) + .011(1x)$$

Household configurations are regionally divided as follows:

Geographical Regions in Alameda County	Estimated People Experiencing Homelessness Annually	Estimated Households Experiencing Homelessness Annually	Households with Only Adults	Households with Minor Children	Households with Only Children
Mid-County (Hayward, San Leandro, Unincorporated)	2,920	2,430	2,221	182	27
North County (Berkeley, Albany, Emeryville)	2,605	2,167	1,981	163	24
Oakland	8,004	6,659	6,087	499	73
Tri-City (Fremont, Newark, Union City)	1,579	1,313	1,201	99	14
Tri-Valley (Dublin, Pleasanton, Livermore)	679	565	516	42	6
Total	15,786	13,135	12,005	985	144

Figure 36: Regionally-Divided Household Configurations

Notes Toward Greater Specificity in Data Collection and Reporting

Estimating the annual number of households experiencing homelessness highlights several areas where the system could develop its data collection to better support this analysis.

- Enhance HMIS capacity to report at the regional and jurisdictional levels
- Improve the HMIS coverage rate, consider ways to make HMIS participation less burdensome for providers, such as through the attendance module
- Tighten up data collection on household size and relationships on the coordinated entry assessment and/or housing assessment. This will enable the system to better understand the housing needs (one or two bedroom) of adult-only households.
- Explore how the Point in Time Count can achieve a more accurate count of households with minor children, particularly those in vehicles.
- Add a question to the Point in Time Count to better understand how many households experience more than one period of homelessness in a year.
- Program Models Matrix
- Resource list of similar program models in other communities
- List of Work Group (Adult-Only HH, HH with Minor Children and Equity) and Leadership Committee members
- Equity Analysis materials

Appendix C. Program Models for Households with Only Adults

Program Models for Single Adults		
Program Model	Description	Program Types
Prevention and Early Intervention	Services are those provided to people before they reach the front door of the homeless services system. This may include services to both those already experiencing homelessness and to those at-risk of homelessness seeking assistance.	<ul style="list-style-type: none"> ○ Crisis Hotline ○ Prevention ○ Rapid Resolution ○ Multi-Service Center
Crisis Response	Crisis response programs are intended to be time-limited and designed to be a stepping-stone to stability. They will typically last one to three months and provide access to basic needs and referrals to services that lead to long-lasting housing stability. These services should be flexible, client-centered, trauma-informed, and strengths-based. They will be “low barrier” in that they will not terminate people from programming due to unhealthy or disruptive behaviors.	<ul style="list-style-type: none"> ○ Emergency Shelter <ul style="list-style-type: none"> ● Community Cabins ● Medical Respite ● Safe Parking ● Transitional Housing ○ Transitional Housing for Youth ○ Street Outreach
Long-Term Housing	Safe and stable housing that provides supportive services and housing assistance to support people as they return to permanent housing or permanent housing supported by a mainstream system resource.	<ul style="list-style-type: none"> ○ Rapid Re-Housing ○ Permanent Supportive Housing ○ Dedicated Affordable Housing ○ PSH Seniors ○ Shallow Subsidy ○ RV Parking

Overarching Program Elements: these elements serve as a foundation for all the program models presented in this document.

- All staff working in the crisis response system are trained in structural racism and barriers to maintaining housing in Alameda County.
- Staff is trained to understand people’s circumstances in relation to their social conditions, including structural racism.
- All program information (website, outreach materials, etc.) is translated into County threshold languages.
- All program information is disseminated at strategic community touchpoints where those least likely to be connected to services frequent – (e.g., church, corner store, neighborhood, school, and place of employment).
- The hiring process for program staff at all levels ensures broad racial and ethnic diversity, including representation of all County threshold languages.
- Programs include a portion of staff with “lived experience.”
- Staff is trained in trauma-informed care.
- Client choice is honored and respected in all programs and centers. Housing assistance is client-driven and helps locate housing opportunities that fit the client’s needs (near job opportunities and family/social networks).

I. PREVENTION AND EARLY INTERVENTION SERVICES	Prevention and early intervention services are those provided to people before they enter the homeless services system. This may include services to both those already experiencing homelessness as well as to those at imminent risk.
Program Type and Description	Essential Elements
<p>Crisis Hotline</p> <p>A phone-based system that helps to connect households in a housing crisis to appropriate resources based on needs and wants</p>	<p>Refer to the <i>Overarching Program Elements</i> for considerations relevant to all program models.</p> <ul style="list-style-type: none"> ○ Well-trained staff respond to a crisis with accurate, real-time information that can be individualized to the person’s situation and the availability of resources. ○ Staff understand local programs, their target populations, and can make appropriate assignments that link households to appropriate housing resources. ○ Staff have training on domestic violence (DV), the DV system, and how to respond and appropriately connect people fleeing DV to appropriate resources. ○ Real-time assignment to shelter beds. ○ Linkage to regional street outreach teams and multi-service drop-in centers if no beds available ○ Connection to services and resources: Medi-Cal, employment, health care, food, benefits, mental health, behavioral health services, etc. <p>Population: All households in a housing crisis.</p>

<p>Prevention</p> <p>Prevent loss of housing and entry into homelessness through limited financial assistance and services</p>	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Those receiving prevention assistance have been engaged in a problem-solving conversation to determine how best to resolve the housing crisis. <ul style="list-style-type: none"> Must be designed and implemented in fidelity to models with proven effectiveness at reducing inflow—more details on effective models available here. Culturally competent prevention providers have strategies to reach people of color who are at disproportionate risk of homelessness. When appropriate for agreed upon activities, financial assistance is available up to the maximum amount established by the community. <p>Services provided:</p> <ul style="list-style-type: none"> Eviction mediation and legal services Housing navigation: on-going for up to three months. Connection to mainstream services and resources: Medi-Cal, employment, health care, food, benefits, mental and behavioral health services Domestic violence support <p>Population:</p> <p>Those who meet HUD’s definition of imminent risk of homelessness.</p>
<p>Rapid Resolution</p> <p>Problem-solving with those who report they have no place to go to avoid entry into the homelessness system</p>	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Problem-solving conversation to explore safe alternatives to homelessness; assess for safety and stability. Services to support people in the safe alternative that was identified for up to six months. <p>Services provided:</p> <ul style="list-style-type: none"> Housing problem-solving. For more details, refer to the Housing Problem Solving Policy Guide Financial assistance – flex funds Connection to services and resources: employment, health care, food, transportation, other benefits, mental health, behavioral health services, etc. Emergency hotel vouchers for people who are in the diversion process. CE assessment within 24 hours if a safe alternative is not identified or is temporary. <p>Population:</p> <ul style="list-style-type: none"> People who will be homeless tonight
<p>Multi-Service Center</p> <p>Access to prevention and diversion services.</p>	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Housing problem solvers to respond to walk-ins, including providing prevention and diversion. Connects the household to services they are eligible for (ex. SNAP, Medi-Cal, disability including SOAR) Conducts coordinated entry assessment and check if the person has been referred to housing. Health and social services on-site or direct access points for these mainstream system resources

Connection to services for people who are literally homeless	<ul style="list-style-type: none"> ○ Financial assistance – flex funds ○ Employment services including a computer lab. ○ Provide for basic needs: food, shower, laundry, hygiene kits, clothes. ○ Activities, classes, support groups for different issues and populations ○ Safe space – security, trauma-informed, no judgment. Less stigmatizing than accessing services at the shelter, especially for prevention and diversion. ○ Geographically distributed, transportation accessible ○ Opportunity for community to be involved – donations, volunteering. Create relationships, organize people. <p>Population:</p> <ul style="list-style-type: none"> ○ People in a housing crisis ○ People who are literally homeless in a shelter or unsheltered locations ○ People who are doubled up and need a safe place
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II. Crisis Response	Crisis response programs are intended to be time-limited and designed to be a stepping-stone to stability. They will typically last one to three months and provide access to basic needs and referrals to services that lead to long-lasting housing stability. These services should be flexible, client-centered, trauma-informed, and strengths-based. They will be “low barrier” in that they will not terminate people from programming due to unhealthy or disruptive behaviors.	
Program Type and Description	Essential Elements	
Emergency Shelter Emergency shelter with navigation type services (low-barrier, service-rich, housing-focused)	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> ○ The number of people and type of shelter might vary by facility, but all shelters would have some degree of privacy, no overcrowding, no bunk beds, open 24/7. ○ Low barrier (pets, possessions, partners, parking, privacy), holistic, not institutionalized. Includes locks and storage (possessions). ○ Located in communities populated by unsheltered individuals who are seeking local housing solutions. <p>Housing-focused services provided:</p> <ul style="list-style-type: none"> ○ Assessment for eligibility and referral <p>Housing navigation</p> <ul style="list-style-type: none"> ○ Staffing model/caseload size: 2:20-25 to keep shelter low barrier. ○ Other support services provided: On-site providers for income (employment/training/education), legal, transportation, life skills, and substance use. ○ Strongly coordinated with all access points (including outreach and in-reach) but also able to take walk-ins: same-day access ○ Connections to mainstream services: Screening or assessment for physical health and behavioral health (mental health and/or substance use) with limited treatment services offered on-site, Social Security eligibility and other mainstream providers able to reach and complete benefit acquisition on-site, direct referrals to treatment or care for needs related to health, mental health and/or substance use. ○ Key partners: Local City and County, CE, Permanent Housing Providers, BH/MH providers, Mainstream resource providers ○ Other essential elements: Co-located with or near multi-services center with walk-in resources and referrals, clear and transparent placement process communicated to the community and non-housing providers to include limitations and expectations. <p>Population: Homeless Single Adults, Couples, Adults without Dependents, Young Adults that don't want transitional housing.</p> <p>Community Cabin programs are expected to mirror the purpose, structure, and operations of Emergency Shelter programs. This program type was retained under system modeling to respond to jurisdictional needs.</p> <p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> ○ Safe, clean, and appropriate climate control with privacy, locks, and storage co-located in communities populated by unsheltered individuals, 24/7. ○ Housing-focused services provided: Assessment for eligibility and referral, direct connection to permanent housing, physical and behavioral health assessment, identification of barriers to placement in interim and/or permanent housing. ○ Housing navigation 	
Emergency Shelter Subcategory: Community Cabins Assessment of Housing Crisis Needs and Access		

<p>to short-term housing for stabilization and exit to emergency shelter or permanent housing.</p> <p>Focused on place-based closures of problematic encampments</p>	<ul style="list-style-type: none"> Other support services provided: Healthcare, sanitation, meals, transportation, substance use counseling. Connections to mainstream services: MH/BH assessment, SS eligibility, and other mainstream providers able to reach and connect with participants. Staffing model/caseload size: Based on population, average 1:15/20. Key partners: Local City and County, CE, Permanent Housing Providers, BH/MH providers, Mainstream resource providers Other essential elements: evaluation of local numbers and needs of unsheltered/encampment populations with the inclusion of lived expertise on specific program design, safety, direct referrals for people with urgent and high needs, communication with the community and non-housing providers (first responders, human services, etc.), warm hand-offs and follow-on care with established service provider connections (case managers, street outreach, etc.), evaluation of utilization and post-referral success, and continued outreach to local unsheltered/encampment populations who decline housing. No more than 90 days, tied to household type, vulnerability, etc. <p>Population: Single Adults, Couples, Adults without Dependents</p>
<p>Emergency Shelter Subcategory:</p> <p>Medical respite</p> <p>Emergency shelter with intensive services for medically vulnerable homeless persons who are being discharged or diverted from a hospital</p>	<p>Medical Respite programs are expected to mirror the purpose, structure, and operations of Emergency Shelter programs except as outlined below.</p> <p>Refer to the <i>Overarching Program Elements</i> for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Immediate/timely placement option for persons who do not have a medical necessity for hospital or skilled nursing facility but recuperative case services beyond what is provided in a shelter. This can include persons: <ul style="list-style-type: none"> who are unsheltered or sheltered and are identified as needing medical respite. being discharged or diverted from an inpatient hospital setting. referred from emergency departments. A clean and healthy residential environment that promotes stabilization and recovery, prevents readmission to emergency and acute care settings, and provides a bridge to more permanent housing settings. Up to a90-day length of stay. 24/7 staffing. On-site nursing staff plus medical staff site visits. Direct linkages with health care provider clinics. Linkage with standard emergency shelter resources for exits. Three meals/day. Other shelter services as outlined above – housing navigation. In-Home Supportive Services or Home Health arrangements allowed and coordinated. Persons generally stay in recuperative care for 1-6 months with an average length of stay of 90 days (Whole Person Care funding cannot be used for lengths of stays greater than 90 days).

	<p>Population: Individuals with medical or daily living needs that cannot be met in crisis housing, inclusive of young adults and people who are pregnant.</p>
<p>Emergency Shelter Subcategory:</p> <p>Safe Parking</p> <p>Safe and legal place to stay in car with connection to navigation services and basic needs</p>	<p>Safe Parking programs are expected to mirror the purpose, structure, and operations of Emergency Shelter programs. Refer to the <i>Overarching Program Elements</i> for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Some safe parking sites co-located with crisis housing or service centers, but others around the county could have mobile services come out to them. Sanitation/bathrooms; overnight security Key partners: churches, cities Connection to resources for car repair when vehicles are not running. <p>Population: People who are homeless, have a car, and would rather stay in the car than enter a shelter, inclusive of young adults.</p>
<p>Emergency Shelter Subcategory:</p> <p>Transitional Housing</p>	<p>Transitional Housing programs are expected to mirror the purpose, structure, and operations of Emergency Shelter programs. This program type was retained under system modeling for funding eligibility purposes.</p>
<p>Transitional Housing for Young Adults</p>	<p>Transitional housing for young adults aged 18-24</p> <p>Refer to the <i>Overarching Program Elements</i> for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Time-limited but with longer stays than adult transitional housing (up to 18 months). The central focus is developing life skills. Service-intensive: counseling, education, and vocational services are provided.
<p>Street Outreach</p> <p>Linkage to services and education about available resources for people who are unsheltered.</p> <p>Stabilize people and refer to shelters or respite programs.</p> <p>Build rapport and trust.</p>	<p>Refer to the <i>Overarching Program Elements</i> for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Engagement services to help people move into a shelter, connect to health care and other services, be engaged in a problem-solving and coordinated entry. Focused on developing relationships. Connection with jail, psychiatric treatment, foster care, and hospitals to avoid discharging into homelessness. Coordinate with hygiene and sanitation services provided to encampments and people who are unsheltered. Outreach workers should be aware of Public Works plans for encampment clean-up and clearance but not responsible for posting notices. Plan for places outreach workers can meet people – health clinics, churches, meal sites, other places where people will feel welcome – where coffee and snacks could be available. Mobile delivery of multi-service center services. Support services: Harm reduction, identify health and mental health crises, SOAR trained or a strong connection to SOAR services, mobilize local community resources to help people experiencing homelessness in their neighborhood. Conduct CE assessment. Meet immediate needs: food, clothes, hygiene, shelter.

	<ul style="list-style-type: none"> ○ Provide transportation through bus passes and cars for outreach workers. ○ Provide a tablet to allow real-time HMIS input. ○ Caseload ratio: 1:20 usual for Oakland; 2:60 for City of Alameda. Outreach in teams to help with relationship continuity and service coordination. ○ Available extended hours and weekends as financially feasible. <p>Staffing needs to address high turnover in these positions:</p> <ul style="list-style-type: none"> ○ Increase pay and PTO. ○ Promote self-care. ○ Support to process for secondary trauma. ○ Professional development opportunities with career paths and succession planning. <p>Population: People who are unsheltered.</p>
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III. Long-Term Housing	Safe and stable housing provides supportive services and housing assistance to support people as they return to permanent housing or permanent housing supported by a mainstream system resource.
Overarching Elements of Long-Term Housing Models	<ul style="list-style-type: none"> ○ A single point of application for housing ○ Background checks have no restrictions beyond those required by HUD. ○ Access to legal resources to address housing discrimination. ○ A community-wide, shared landlord listing established to reduce the challenge of locating units. ○ An emphasis on client choice in all aspects of housing placement. ○ Warm handoffs are provided when entering housing or transitioning from one housing program to another. ○ Whenever needed, there are connections to financial management services and training, including credit repair/credit building support; training and support with budgeting and developing long-term savings; asset-building opportunities. ○ Vocational services and employment assistance are available to assist with finding or upgrading employment. ○ If the program staff does not provide requested services, there are connections to mainstream service providers, trained in culturally relevant and trauma-informed approaches to service provision.
Program Type and Description	Essential Elements
Rapid Re-housing	Refer to the Overarching Program Elements for considerations relevant to all program models.
Time-limited rental subsidy and support services with the	<p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <p>Type of unit: any rental housing unit must meet HQS, have an appropriate rental agreement, documented relationship between a property owner and management entity.</p> <ul style="list-style-type: none"> ○ Housing-focused services provided: landlord liaison/housing search function, finding units, landlord risk-mitigation pools, housing-

intention of the household taking over lease and sustaining on own	<ul style="list-style-type: none"> focused case management, rent assistance, flex funds, inspections. Housing navigation staffing ratio of one FTE for every 20-25 households Landlord liaison/housing search staffing ratio of one FTE for every 30-40 households <ul style="list-style-type: none"> Access to public benefits assistance as needed. Other essential elements: Progressive engagement process to transition people to PSH or Dedicated Affordable Housing if needed. Target income to rent ratio at the end of the program – no more than 50% of income for rent with at least \$500/month available for non-housing & utility needs. <p>Timeframe:</p> <ul style="list-style-type: none"> Standard RRH – 6-12 months Longer-term for households who are waiting on SSDI process or have a longer-term income growth trajectory. <p>Population:</p> <p>Most useful for literally homeless households who are likely to increase household income (earned or unearned) within a defined time frame who score lower on the CE assessment</p>
<p>Permanent Supportive Housing</p> <p>Permanent subsidies based on income and services to keep tenants stable in housing</p>	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <ul style="list-style-type: none"> Type of unit: deeply subsidized – people pay 30% of income for rent; reduce reliance on tenant-based subsidies in private buildings and income project-based units; could include master lease. <p>Housing-focused services provided:</p> <ul style="list-style-type: none"> Housing navigation and landlord liaison support (for scattered-site PSH with tenant-based rent subsidies). Tenancy-sustaining support services for clients with disabilities who face challenges to getting and keeping housing, including coaching for independent living and community integration. Other support services are provided directly or through connections to mainstream service providers as appropriate to individual needs. This may include: representative payee/ money management services, intensive services to support harm reduction and engagement in care for health or behavioral health conditions with a focus on behaviors and symptoms that could impact successful tenancy/housing retention, IHHS, adult day, medical care and home health services, other public services, holistic, community partnerships Staffing 1:25 Key partners: public housing authorities, non-profit housing developers, property managers; County HCSCA/ behavioral health, Medi-Cal managed care plans Other essential elements: move-on option, fair housing/advocacy. Scattered-site programs must include a housing search/landlord liaison component (see HCSCA services description) <p>Population:</p> <p>Those experiencing chronic homelessness and/or extremely high need individuals who will need long-term services and subsidies to maintain housing.</p>

<p>Dedicated Affordable Housing</p> <p>Affordable housing resources dedicated to households experiencing or at risk of homelessness and/or seniors or people with disabilities: Includes subsidized income-based units, non-time-limited shallow subsidy, tax credit units designated for extremely low-income (ELI) households, in lieu of units</p>	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <p>Type of unit: SRO, studio, one-bedroom, could be scattered-site, or site-based; could include shared housing; could be tenant-based or project-based.</p> <ul style="list-style-type: none"> ○ Rent subsidy or subsidized/affordable unit, the subsidy could taper over time if income increases. ○ Housing-focused services provided: <ul style="list-style-type: none"> ○ Landlord liaison ○ Service coordinator caseload 1:50-60 ○ Other services: trauma-informed property management, barrier-busting, housing eligibility & housing search, landlord incentives, representative payee services. ○ Housing navigation services may be essential for the effective use of tenant-based rental assistance. ○ Other support services provided directly (often by on-site service coordinators) or through connections to mainstream service providers. ○ Connections to workforce training and other employment support. ○ Key partners: public housing authorities and non-profit housing organizations, city, state, funders. <p>Population: Extremely low-income households without complex needs who are unlikely to increase their income.</p>
<p>PSH –Seniors</p> <p>Provide a higher level of care for people who cannot meet their own needs because of physical or cognitive impairments</p>	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <ul style="list-style-type: none"> ○ Housing-focused services provided: <ul style="list-style-type: none"> ○ PSH tenancy sustaining services. ○ Landlord liaison ○ Other support services are provided directly or through connections to mainstream service providers: representative payee, ADL supports, memory care, opportunities for socialization. ○ Connected to: IHHS, Day Health. Medi-Cal, Medi-Medi ○ Staffing 1:25 ○ Key partners: Community care licensing; Social Services Agency, Center for Elders Independence, Age-Friendly Council Other essential elements: Licensed community care facilities or specially designed permanent supportive housing sites with necessary wrap-around services <p>Population: People who need a higher level of care because they cannot perform activities of daily living or they have permanent cognitive deficits with no pathway for recovery</p>

Shallow Subsidy Mitigate unaffordability in the housing market	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <ul style="list-style-type: none"> ○ Tenant based assistance could include shared housing or households willing to support the family through rapid resolution. ○ Subsidies could be shallow or deep depending on the need. ○ Housing must meet habitability or HQS standards. ○ Households can be progressively engaged to be served in PSH or dedicated affordable housing. ○ Housing assistance: Security deposit, rent and utility assistance, moving costs, start-up furniture, and household item. ○ Program staff complete re-certifications and can connect households to services if a need is identified. <p>Population: Households unlikely to increase income because of health or disability issues or educational or employment barriers, households paying more than 50% of income for rent, households that have been homeless before</p>
RV Parking Permanent, safe, affordable, legal, RV parking with utilities	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <ul style="list-style-type: none"> ○ RV can be owned by a resident of a nearby locality. ○ Meets HUD habitability standards. ○ Has utility service. ○ A lease agreement that gives full rights of tenancy ○ Housing services include housing-focused case management, rent assistance, flex funds, inspections. <p>Population: Households with an RV or who express interest in living in this type of set up. Households unlikely to increase income, which may make this a more affordable housing choice.</p>

Appendix D: Program Models for Households with Minor Children

Program Models for Families with Children		
Program Model	Description	Program Types
Prevention and Early Intervention	Services are those provided to people before they reach the front door of the homeless services system. This may include services to both those already experiencing homeless and to those at-risk of homelessness seeking assistance.	<ul style="list-style-type: none"> ○ Crisis Hotline ○ Prevention ○ Rapid Resolution ○ Emergency Resource Centers
Crisis Response	Crisis response programs are intended to be time-limited in nature and are designed to be a stepping-stone to stability. They will typically last one to three months and provide access to basic needs and referrals to services that lead to long-lasting housing stability. These services should be flexible, client-centered, trauma-informed, and strengths-based. They will be “low barrier” in that they will not terminate people from programming due to unhealthy or disruptive behaviors, rather they will work to minimize the disruption of these behaviors.	<ul style="list-style-type: none"> ○ Emergency Shelter <ul style="list-style-type: none"> ● Motel Vouchers ● Safe Parking ● Transitional Housing ○ Street Outreach
Long-Term Housing	Safe and stable housing provides supportive services and housing assistance to support people as they return to permanent housing or permanent housing supported by a mainstream system resource.	<ul style="list-style-type: none"> ○ Rapid Re-housing ○ Permanent Supportive Housing ○ Dedicated Affordable Housing ○ Shallow Subsidy

Overarching Program Elements: these elements serve as a foundation for all the program models presented in this document
<ul style="list-style-type: none"> ○ All staff working in the crisis response system are trained in structural racism and barriers to maintaining housing in Alameda County. ○ Staff is trained to understand people’s circumstances in relation to their social conditions, including structural racism. ○ All program information (website, outreach materials, etc.) is translated into County threshold languages. ○ All program information is disseminated at strategic community touchpoints where those least likely to be connected to services frequent – (e.g., church, corner store, neighborhood, school, and place of employment. ○ The hiring process for program staff at all levels ensures broad racial and ethnic diversity, including representation of all County threshold languages. ○ Programs include a portion of staff with “lived experience.” ○ Staff are trained in trauma-informed care. ○ Client choice is honored and respected in all programs and centers. Housing assistance is client-driven and helps locate clients that fit their needs (near job opportunities and family/social networks, etc.)

PREVENTION AND EARLY INTERVENTION SERVICES	Prevention and early intervention services are those provided to people before they enter the homeless services system. This may include services to both those already experiencing homelessness as well as to those at imminent risk.
Program Type and Description	Essential Elements
Crisis Hotline A phone-based system that helps to connect those in housing a crisis with resources based on needs and wants.	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Well-trained staff responds to a crisis with accurate, real-time information that can be individualized to their situation and available resources. The staff understands local programs, their target populations, and can make appropriate assignments that link households to appropriate housing resources. The staff are trained on domestic violence (DV), the DV system, and how to respond and appropriately connect people fleeing DV to appropriate resources. Real-time assignment to shelter beds. Linkage to regional street outreach teams and multi-service drop-in centers if no beds are available. Connection to services and resources: Medi-Cal, employment, health care, food, benefits, mental health, behavioral health services, etc. <p>Population: All households in a housing crisis.</p>
Prevention Program to prevent the loss of housing for those at imminent risk of homelessness	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Those receiving prevention assistance have been engaged in a problem-solving conversation to determine how best to resolve the housing crisis. <ul style="list-style-type: none"> Programs are designed and implemented in fidelity to models with proven effectiveness at reducing inflow—more details on effective models available here. Culturally competent prevention providers have strategies to reach people of color who are at disproportionate risk of homelessness. Financial assistance is provided when appropriate for agreed-upon activities up to a maximum assistance amount established by the community. <p>Services provided:</p> <ul style="list-style-type: none"> Eviction mediation and legal services. Housing navigation: on-going for up to three months. Connection to wrap-around services – food, childcare, health care, employment supports, benefits, insurance, legal services, mental and behavioral health services.

	<ul style="list-style-type: none"> Marketing of program to reach households in a housing crisis: <ul style="list-style-type: none"> McKinney-Vento liaisons Pediatricians Prenatal care Home visiting service Existing model: Family Front Door <p>Population: Those who meet HUD's definition of imminent risk of homelessness.</p> <p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Problem-solving conversation to explore safe alternatives to homelessness; assess for safety and stability. Services identified as a safe alternative to provide support for up to six months. <p>Services provided:</p> <ul style="list-style-type: none"> Housing problem-solving. For more details, refer to the Housing Problem Solving Policy Guide Financial assistance – flex funds Connection to services and resources: employment, health care, food, transportation, other benefits, mental health, behavioral health services, etc. Emergency hotel vouchers for people who are in the diversion process. CE assessment within 24 hours if a safe alternative is not identified or is temporary. Housing assistance if the household cannot stabilize in current situation. Financial assistance is provided when appropriate, for agreed upon activities up to a maximum assistance amount of <ul style="list-style-type: none"> Provide linkages to providers that have capacity to respond to referrals – very warm hand-offs. <ul style="list-style-type: none"> Health care access points (clinics, pediatricians, Help Me Grow) Childcare providers focused on homeless children. Family health services in public health department Food, transportation, mental health, and behavioral health services, etc. <p>Population: Families who report that they have nowhere to sleep tonight</p>
<p>Rapid Resolution</p> <p>Problem-solving with those who report they have no place to go to avoid entry into the homeless system</p>	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Housing-focused services provided co-located with a shelter that includes diversion, housing problem solving, landlord/housing navigation, addresses barriers (debt, legal, etc.) to promote reunification. Service location is welcoming to those in a housing crisis, and the size is adequate to support the service model. Other support services provided: education, employment, and training, flexible childcare including during appointments and employment search (on-site or vouchers), healthcare, document collection, food access, other requirements to meet CPS plans and prevent removal. Staffing model/caseload size: 1:20 max, lower depending on household composition, needs, case manager competencies (MSW, LCSW...), etc.
<p>Emergency Resource Centers</p> <p>A place to assess family needs and barriers to permanent housing, provide access to housing and mainstream resources, and provide coordination of</p>	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <ul style="list-style-type: none"> Housing-focused services provided co-located with a shelter that includes diversion, housing problem solving, landlord/housing navigation, addresses barriers (debt, legal, etc.) to promote reunification. Service location is welcoming to those in a housing crisis, and the size is adequate to support the service model. Other support services provided: education, employment, and training, flexible childcare including during appointments and employment search (on-site or vouchers), healthcare, document collection, food access, other requirements to meet CPS plans and prevent removal. Staffing model/caseload size: 1:20 max, lower depending on household composition, needs, case manager competencies (MSW, LCSW...), etc.

<p>community family services. Dedicated to homeless and housing unstable families and pregnant women</p>	<ul style="list-style-type: none"> ○ Connections to mainstream services: data sharing and coordination between family service providers, on-site staff, and clear communication and ease of access from and to referring sources (schools, CPS, community networks, etc.) ○ Provide for basic needs: food, shower, laundry, hygiene kits, clothes. ○ Key partners: WIC, Food banks, PHAs, Parks and Recreation, Libraries, Education, Faith-based providers and communities, minority community networks ○ Other essential elements: Computer labs, homework help, flexibility to meet household needs, physical and process design is adaptive to families, the inclusion of participants and families with lived experience in developing process and evaluation. <p>Population: Homeless and housing unstable families and pregnant women, inclusive of different types of family structures as defined by the family, accommodates parents and children who work at night</p>
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II. CRISIS RESPONSE	Crisis response programs are intended to be time-limited and designed to be a stepping-stone to stability. They will typically last 1-3 months and provide access to basic needs and referrals to services that lead to long-lasting housing stability. These services should be flexible, client-centered, trauma-informed, and strengths-based. They will be “low barrier” in that they will not terminate people from programming due to unhealthy or disruptive behaviors, rather will work on other strategies to ensure others in the program are not adversely impacted.
Program Type and Description	Essential Elements
Emergency Shelter	Refer to the <i>Overarching Program Elements</i> for considerations relevant to all program models.
Service-rich, housing-focused, low-barrier shelter.	<ul style="list-style-type: none"> ○ Facility-based: 24/7, economies of scale to have many families in one location so services can be efficiently provided. Space is set up so families are not separated no matter their family configuration (e.g., two-parent, multi-generational, LGBTQ+), and to not feel over-crowded or chaotic (separate wings, floors, or neighborhoods), with onsite space for support service providers ○ Provide privacy, safety, rules that support engagement with school and employment, services that support teens so they remain with their family. Low barrier and holistic, not institutionalized. ○ Space arranged to flexibly accommodate all configurations of families with children and changing family composition (e.g., including the boyfriend, the grandma, etc.), and a degree of privacy. ○ Space for pets & pet-free areas for people with allergies ○ Storage space for people’s possessions ○ Parking available for resident vehicles ○ Services provided: <ul style="list-style-type: none"> ○ Housing navigation ○ Housing-focused services: <ul style="list-style-type: none"> ● CE assessment ● Financial assistance for move-in ● Help with applications and getting on affordable housing lists. ● Problem-solving ● Link to RRH with navigation ○ Caseload 1:10 families/1:30 people with clinical support ○ Property management: 1 per facility ○ Meets Alameda County Emergency Shelter Standards for Year-Round Shelters ○ Open during the day ○ Same-day access ○ Basic needs & family support services:

	<ul style="list-style-type: none"> • Meals. • Parenting support services. • Activities for children. • Childcare for appointments, etc. • Teen supports. • Health care – children’s hospital Kerry’s kids; school-based health and mental health services. <ul style="list-style-type: none"> ○ Income supports services: CalWORKs, SOAR. ○ Legal Services: DMV, Immigration, employment & housing discrimination. ○ Strong linkages to voluntary mainstream services, which should be co-located or brought on site frequently: <ul style="list-style-type: none"> • Medical screening/triage • Behavioral health • Shelter health • Intense wrap-around services for high-needs families • Visiting health nurses • Head Start • McKinney-Vento liaison • CPS <p>Population: Families experiencing homelessness (inclusive of different types of family structures as defined by the family), pregnant women, accommodates parents and children who work at night</p>
Emergency Shelter Subcategory: Motel vouchers	<p>Refer to the <i>Overarching Program Elements</i> for considerations relevant to all program models.</p> <p>Motel Voucher programs are expected to mirror the purpose, structure, and operations of Emergency Shelter programs.</p> <ul style="list-style-type: none"> ○ Motel vouchers used in limited circumstances for overflow or special situations such as fleeing domestic violence or in cases of contagious illness. ○ Same housing navigation and other supports as an emergency shelter.

Emergency Shelter Subcategory: Safe Parking A safe and legal place to stay in a car with connection to navigation services and basic needs	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Safe Parking programs are expected to mirror the purpose, structure, and operations of Emergency Shelter programs.</p> <ul style="list-style-type: none"> Some safe parking sites co-located with crisis housing or service centers, but others around the county could have mobile services come out to them. Sanitation/bathrooms; overnight security. Key partners: churches, cities. Access to car repair assistance if needed to utilize safe parking. <p>Population: People who are homeless, have a car, and would rather stay in their car than enter a shelter.</p>
Emergency Shelter Subcategory: Transitional Housing	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Transitional Housing programs are expected to mirror the purpose, structure, and operations of Emergency Shelter programs. This program type was retained under system modeling for funding eligibility purposes.</p> <ul style="list-style-type: none"> Targeted to special populations, e.g., active CPS cases.
Street Outreach NOTE: No separate street outreach program recommended for families	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Street outreach teams should include someone knowledgeable about resources for families; the focus should be connecting families to shelters. If the family remains unsheltered, outreach should maintain contact until they are housed.</p> <ul style="list-style-type: none"> Street outreach workers should be trained in: <ul style="list-style-type: none"> problem-solving to try to identify a safe alternative to homelessness. CPS requirements for homeless families. Immigration requirements for people accessing homeless services.

III. Long-Term Housing	<p>Safe and stable housing that provides supportive services and housing assistance to support people as they return to independent permanent housing or permanent housing supported by a mainstream system resource.</p>
Overarching Elements of Long-Term Housing Models	<ul style="list-style-type: none"> A single point of application for housing. Background checks have no restrictions beyond those required by HUD. Access to legal resources to address housing discrimination. A community-wide shared landlord listing established to reduce the challenge of locating units. An emphasis on client choice in all aspects of housing placement. Warm handoffs are provided when entering housing or transitioning from one housing program to another. Whenever needed, there are connections to financial management services and training, including credit repair/credit building support; training and support with budgeting and developing long-term savings; asset-building opportunities. Vocational services and employment assistance are available to assist with finding or upgrading employment.

	If the program staff does not provide requested services, there are connections to mainstream service providers trained in culturally relevant and trauma-informed approaches to service provision.
Program Type And Description	Essential Elements
Rapid Re-housing Assist households who can increase income to find and move-in to housing with temporary financial assistance	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <p>Type of unit: any rental housing unit must meet HQS, have an appropriate rental agreement, documented relationship between the property owner and management entity.</p> <ul style="list-style-type: none"> ○ Housing-focused services provided: landlord liaison/housing search function, finding units, landlord risk-mitigation pools, housing-focused case management, rent assistance, flex funds, inspections. Connection to mainstream services—CalFresh, childcare, employment, benefits advocacy. ○ Housing assistance: Security deposit, rent and utility assistance, moving costs, start-up furniture, and household items. ○ Ability to progressively engage to Shallow Subsidy or Dedicated Affordable Housing if, after some time of RRH assistance, it is determined that the household will be unable to increase income to stabilize in housing without assistance. Also can progressively engage to PSH if a household has intensive service needs not identified when moving into RRH. ○ Housing navigation staffing ratio of one FTE for every 20-25 households. ○ Landlord liaison/housing search staffing ratio of one FTE for every 30-40 households. ○ Employment specialist using IPS evidenced-based model is one FTE for every 20-25 households (separate from care manager role). <p>Population: Most useful for literally homeless households who are likely to increase household income (earned or unearned) within a defined time frame who score lower on the CE assessment.</p>
Permanent Supportive Housing To provide families long-term, deeply supported, and affordable housing.	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <ul style="list-style-type: none"> ○ Type of unit: flexible when family size changes. ○ Site-based or scattered-site. ○ Housing-focused services provided: <ul style="list-style-type: none"> ○ PSH tenancy sustaining services. ○ Landlord liaison. ○ Staffing 1:20 for site-based, 1:15 for scattered-site case management. ○ Rental subsidy household should only pay 30% of income for rent and have a lease, risk mitigation funds, financial assistance to move-on. ○ Community living supports, tenant rights, landlord engagement (for a scattered site). ○ Other support services provided directly or through connections to mainstream service providers: wrap-around services, food,

	<p>childcare, budget, meaningful daily activities, IHOT for families, dedicated family approach, MH, employment, school, education, mobile crisis 24/7 as needed, linkage to clinical support.</p> <ul style="list-style-type: none"> Key partners: mainstream: HDCSS, BMCS, probation, child welfare, schools. Other essential elements: strong move-on policy; some level of family support if qualifying member leaves/dies. <p>Population: Those experiencing chronic homelessness and/or extremely high need individuals who will need long-term services and subsidy to maintain housing.</p>
Dedicated Affordable Housing Extremely low-income households	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <ul style="list-style-type: none"> Housing can be project-based or tenant-based. Services: service coordination to connect to mainstream services, benefits advocacy, CalFresh, educational supports Caseload ratio: 1:50 Flexible services, engagement is not required to remain in housing. Housing assistance: Security deposit, rent and utility assistance, moving costs, start-up furniture, and household items. Possible funding source: Homeless preference at housing authorities. <p>Population: Extremely low-income households without complex needs who are unlikely to increase their income.</p>
Shallow Subsidy Mitigate unaffordability in the housing market	<p>Refer to the Overarching Program Elements for considerations relevant to all program models.</p> <p>Refer to the Overarching Elements of Long-Term Housing Models for considerations for this model.</p> <ul style="list-style-type: none"> Tenant-based assistance could include shared housing or households willing to support the family through rapid resolution. Subsidies could be shallow or deep depending on the need. Housing must meet habitability or HQS standards. Households can be progressively engaged to be served in PSH or dedicated affordable housing. Housing assistance: Security deposit, rent and utility assistance, moving costs, start-up furniture, and household items. Housing must meet habitability or HQS standards. <p>Light touch services for those with minimal needs, connection to higher-touch services for those with more significant needs (including case management)</p> <p>Population: Households unlikely to increase income because of health or disability issues or educational or employment barriers. Households paying more than 50% of income for rent. Households that have been homeless before. A shallow subsidy is targeted to households employed or likely to be employed.</p>

Appendix E: CoC Sub-Geography Models, East County

East County includes Dublin, Livermore, Pleasanton, and surrounding unincorporated areas. At 2019 Point in Time Count, roughly four percent of the CoC homeless population were counted in East County. All the estimates and recommendations below are based on East County containing four percent of the CoC's homeless population. It also assumes that household compositions and needs are relatively consistent across the CoC and that inflow and returns rates are consistent across sub-geographic regions. Finally, at the writing of this report, the CoC does not have baseline inventory data for each region. This makes it difficult to provide accurate estimates of the number of additional units needed. In the future, the Point in Time Count, HMIS, and additional data collection may provide a more detailed understanding of homeless households' characteristics and needs in each community, the inflow rate and returns to homelessness, and the crisis and housing resource inventories.

Scenario 1 East County, Households with Only Adults

Scenario 1 assumes that the more equitable and responsive homeless system represented in the model will improve the rate of permanent housing retention, steadily reducing the 19% rate of returns to homelessness by three percent each year to seven percent over five years. The inflow of households into the homeless system maintains at 20%, close to the inflow rate that Alameda County experienced between 2017 and 2019. Scenario 1 begins with a significant investment of \$100 million in year one and then adds \$60 million in year two, \$50 million in year three, \$30 million in year four, and \$250,000 in year five. The total countywide cost of Leveling Up and Scaling Up in Scenario 1 is \$1.1 billion.

Scenario 1 East County 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	4%	4%	4%	4%	4%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	642	697	678	642	634
Annual Exits	334	486	578	633	634
Annual Remaining	308	211	100	8	0
% unmet need	48%	30%	15%	1%	0%
Scenario 1 East County 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	8	11	14	16	16
Emergency Shelter	43	57	70	81	82
Transitional Housing	7	9	11	13	13
Rapid Re-Housing	72	96	118	136	138
PSH	53	72	88	101	103
PSH-Seniors	33	45	55	63	64
Dedicated Affordable Hsg	94	125	153	177	180
Shallow Subsidy	43	58	71	82	83

Figure 37 Scenario 1, East County 5-Year for Households with Only Adults

Scenario 2 East County, Households with Only Adults

Scenario 2 uses the same rate of return and inflow rate as Scenario 1, assuming that retention will quickly improve, reducing by three percent each year to seven percent returning in the fifth year. Scenario 2 also assumes that inflow into homelessness will remain both steady and high at 20%. Finally, Scenario 2 adds \$50 million of new investment each year. The combined countywide cost of Leveling Up and Scaling Up in Scenario 2 is \$956 million.

Scenario 2 East County 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	4%	4%	4%	4%	4%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	642	758	870	917	960
Annual Exits	263	334	486	578	670
Annual Remaining	379	423	384	339	290
% unmet need	59%	56%	44%	37%	30%
Scenario 2 East County 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	7	7	9	10	11
Emergency Shelter	34	36	46	52	57
Transitional Housing	5	6	7	8	9
Rapid Re-Housing	56	61	77	87	96
PSH	42	45	57	65	72
PSH-Seniors	26	28	36	40	45
Dedicated Affordable Hsg	74	79	100	113	125
Shallow Subsidy	34	37	47	53	58

Figure 38: Scenario 2, East County 5-Year for Households with Only Adults

The below side-by-side charts represent the different impacts of each investment scenario in the homeless population: annual population (blue), exits from homelessness (red), and annual remaining (green). These graphs show that investment strategy impacts significant investment early in the process and can quickly turn the curve. At the same time, both scenarios indicate that hundreds of adults will continue to experience homelessness each year in East County, even after five years of aggressive investment. These households are likely to be disproportionately people of color and, in particular, Black and Native Americans. Without addressing the factors driving homelessness—racism, economic inequality, and housing shortfalls—homelessness will continue to harm an extraordinary number of adults in Alameda County.

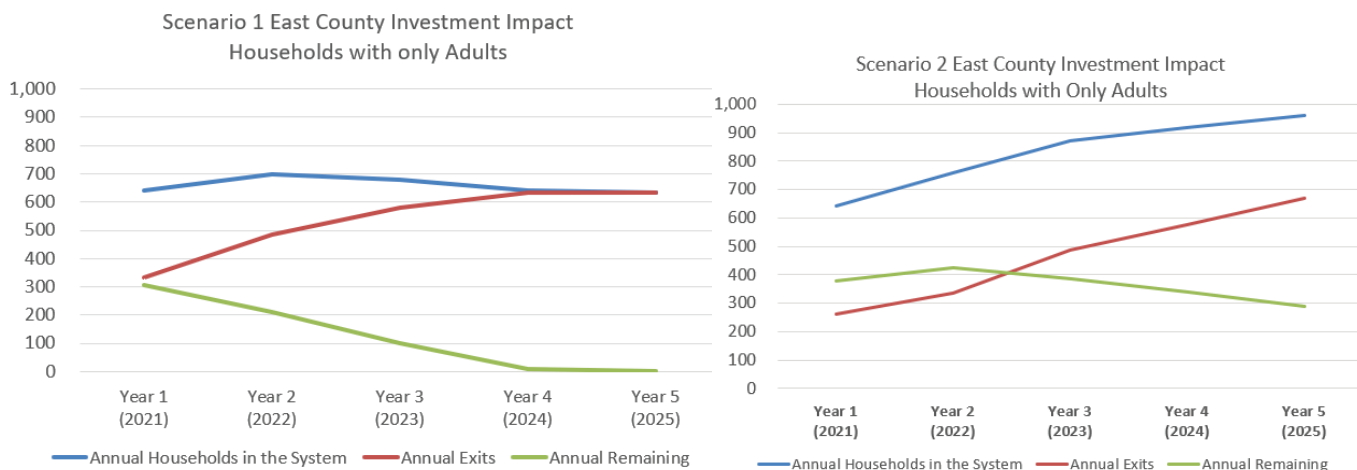


Figure 39: Scenarios 1 and 2 Compared, Households with Only Adults

Scenario 1 East County, Households with Minor Children

Scenario 1 assumes inflow into the homeless system is realistic, maintaining at 20% year after year, close to the inflow rate of 22% that Alameda County saw between 2017 and 2019. It also assumes that the modeled system will be more

equitable and effective than the current system, resulting in higher permanent housing retention rates. The rate of returns steadily reduces by two percent each year from 12% to four percent over five years. Scenario 1 begins with a significant countywide investment of \$13 million in year one, and then adds \$8 million in year two, \$5 million in year three, \$2 million in year four, and \$1 million in year five. The total countywide cost of Leveling Up and Scaling Up the response for homeless households with minor children is \$135 million (rounded) over five years.

Scenario 1 East County 5-Year Investment Impact Dashboard Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	4%	4%	4%	4%	4%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	50	53	51	48	48
Annual Exits	27	35	44	47	48
Annual Remaining	24	17	8	1	(0)
% unmet need	47%	33%	15%	3%	0%
Scenario 1 East County 5-Year Inventory Needs Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	1	1	1	1	1
Emergency Shelter	6	7	9	10	10
Rapid Re-Housing	4	5	7	7	7
PSH	3	4	4	5	5
Dedicated Affordable Hsg	8	11	13	14	15
Shallow Subsidy	11	14	17	19	19

Figure 40: Scenario 1, Households with Minor Children

Scenario 2 East County, Households with Minor Children

Scenario 2 reflects the same returns and inflow rates as Scenario 1. Scenario 2 adds \$6 million of new investment each year. The total countywide cost of Leveling Up and Scaling Up in Scenario 2 is \$108 million (rounded).

Scenario 2 East County 5-Year Investment Impact Dashboard, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	4%	4%	4%	4%	4%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	50	58	65	74	80
Annual Exits	21	26	31	41	51
Annual Remaining	30	32	34	33	29
% unmet need	59%	55%	53%	45%	37%
Scenario 2 East County 5-Year Inventory Needs, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Homeless Prevention/Rapid Resolution	1	1	1	1	1
Emergency Shelter	4	5	6	9	11
Rapid Re-Housing	3	4	5	6	8
Permanent Supportive Housing	2	3	3	4	5
Dedicated Affordable Housing	6	8	9	12	15
Shallow Subsidy	8	10	12	16	20

Figure 41: Scenario 2, Households with Minor Children

Figures 41 and 42 show the impact of Scenario 1 and 2 in East County for comparison of the annual number of homeless households with minor children (blue), the number of households that exit to permanent housing (red), and the number

of households with minor children that remain homeless from one year to the next (green). These graphs show that the investment scenario matters.

Significant investment early on can turn the curve of homelessness for households with minor children. Both scenarios show that scores of families with minor children will continue to experience homelessness each year in East County. These are likely to be disproportionately households of color, specifically Black and Native American households. Addressing the factors driving homelessness, namely structural racism, economic inequality, and housing shortages, is intrinsic to ending family homelessness.

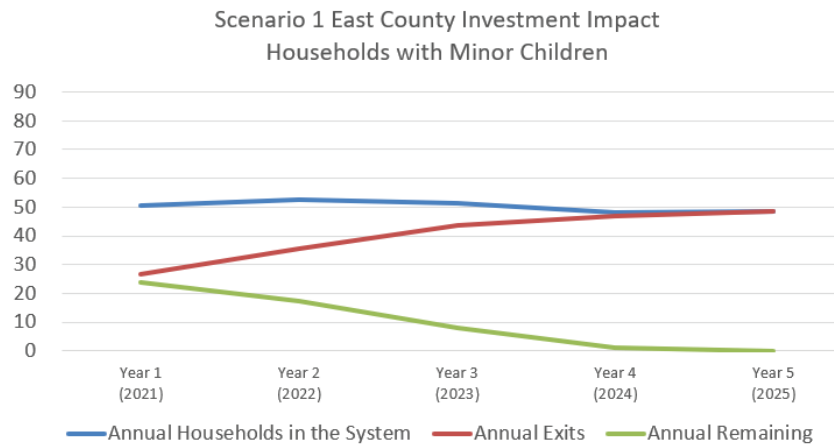


Figure 42: Scenario 1, East County Investment Impact Households with Minor Children

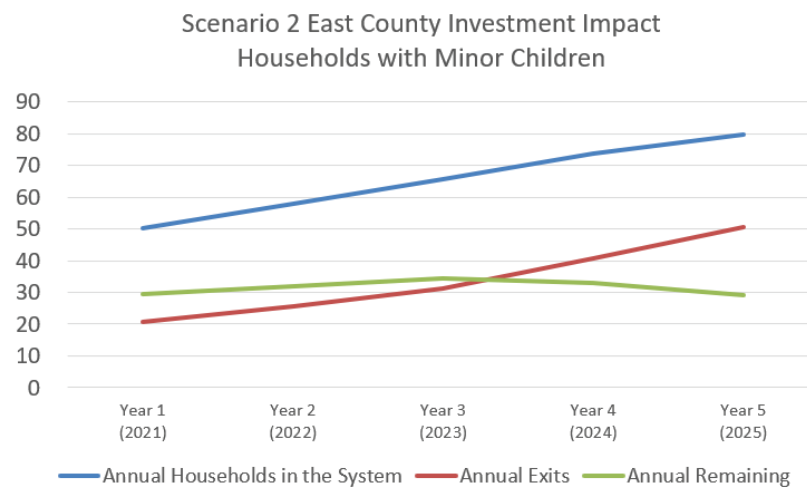


Figure 43: Scenario 2, East County Investment Impact Households with Minor Children

Appendix F: CoC Sub-Geography Models, Mid-County

Mid-County includes Alameda, Hayward, San Leandro, and the surrounding unincorporated areas including, Ashland, Castro Valley, Cherryland, Fairview, and San Lorenzo. At 2019 Point in Time Count, roughly 18.5% of the CoC homeless population were counted in Mid-County. All the estimates and recommendations below are based on Mid-County containing, 18.5% of the CoC's homeless population of households with only adults and households with minor children. It assumes that household compositions and characteristics are relatively consistent across the CoC and that inflow and returns rates are consistent across sub-geographic regions. Finally, at the writing of this report, the CoC does not have baseline inventory data for each region. This makes it difficult to provide accurate estimates of the number of additional units needed. In the future, the Point in Time Count, HMIS, and additional data collection may provide a more detailed understanding of homeless households' characteristics and needs in each community, the inflow rate and returns to homelessness, and the crisis and housing resource inventories.

Scenario 1 Mid-County, Households with Only Adults

Scenario 1 assumes that the more equitable and responsive homeless system represented in the model will improve the rate of permanent housing retention, steadily reducing the 19% rate of returns to homelessness by three percent each year to seven percent over five years. The inflow of households into the homeless system maintains at 20%, close to the inflow rate that Alameda County experienced between 2017 and 2019. Scenario 1 begins with a significant investment of \$100 million in year one and then adds \$60 million in year two, \$50 million in year three, \$30 million in year four, and \$250,000 in year five. The total countywide cost of Leveling Up and Scaling Up in Scenario 1 is \$1.1 billion.

Scenario 1 Mid-County CoC 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	19%	19%	19%	19%	19%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	2,761	3,000	2,917	2,761	2,727
Annual Exits	1,438	2,092	2,488	2,725	2,727
Annual Remaining	1,323	908	429	36	0
% unmet need	48%	30%	15%	1%	0%
Scenario 1 Mid-County CoC 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	36	48	59	68	69
Emergency Shelter	184	247	302	350	354
Transitional Housing	29	38	47	55	55
Rapid Re-Housing	309	414	506	586	593
PSH	230	308	377	436	442
PSH-Seniors	144	193	236	273	276
Dedicated Affordable Hsg	403	539	660	763	773
Shallow Subsidy	187	250	306	354	359

Figure 44: Scenario 1, Mid-County CoC, Households with Only Adults

Scenario 2 Mid-County, Households with Only Adults

Scenario 2 uses the same rate of return and inflow rate as Scenario 1, assuming that retention will quickly improve, reducing by three percent each year to seven percent returning in the fifth year. Scenario 2 also assumes that inflow into homelessness will remain both steady and high at 20%. Finally, Scenario 2 adds \$50 million of new investment each year. The combined countywide cost of Leveling Up and Scaling up in Scenario 2 is \$956 million.

Scenario 2 Mid-County 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	19%	19%	19%	19%	19%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	2,761	3,259	3,744	3,945	4,132
Annual Exits	1,130	1,438	2,092	2,488	2,883
Annual Remaining	1,631	1,821	1,652	1,458	1,249
% unmet need	59%	56%	44%	37%	30%
Scenario 2 Mid-County 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	28	31	38	43	48
Emergency Shelter	145	157	198	223	247
Transitional Housing	23	24	31	35	38
Rapid Re-Housing	243	262	332	374	414
PSH	181	195	247	279	308
PSH-Seniors	113	122	154	174	193
Dedicated Affordable Hsg	316	341	432	487	540
Shallow Subsidy	147	159	201	226	250

Figure 45, Scenario 2, Mid-County, Households with Only Adults

Figure 44 represents the different impacts of each investment scenario in the homeless population: annual population (blue), exits from homelessness (red), and annual remaining (green). These graphs show that investment strategy impacts significant investment early in the process and can quickly turn the curve. At the same time, both scenarios indicate that thousands of adults will continue to experience homelessness each year in Mid-County, even after five years of aggressive investment. These households are likely to be disproportionately people of color and, in particular, Black and Native Americans. Without addressing the factors driving homelessness—racism, economic inequality, and housing shortfalls—homelessness will continue to harm an extraordinary number of adults in Alameda County.

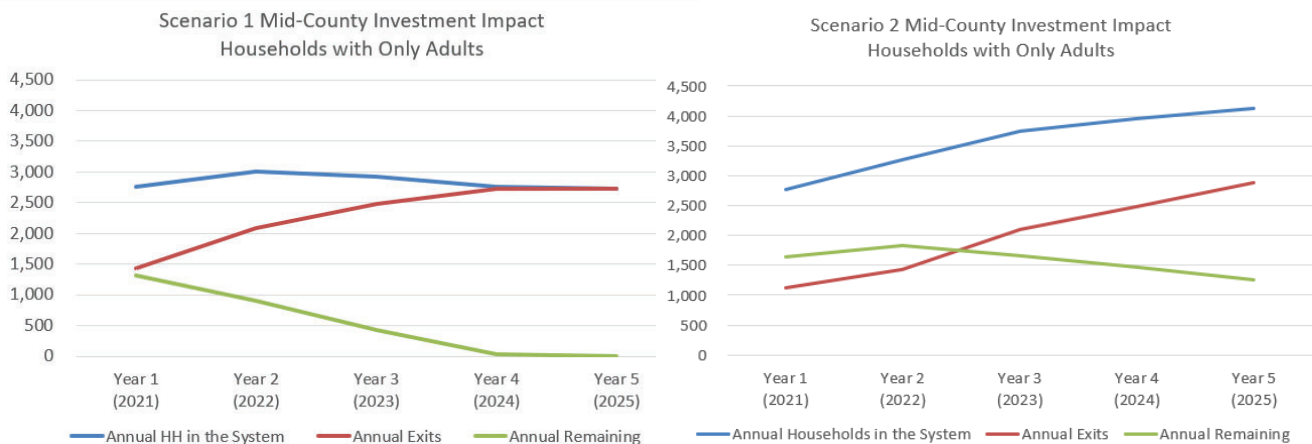


Figure 46: Comparison of Mid-County Scenarios 1 and 2

Scenario 1 Mid-County, Households with Minor Children

Scenario 1 assumes inflow into the homeless system is realistic, maintaining at 20% year after year, close to the inflow rate of 22% that Alameda County saw between 2017 and 2019. It also assumes that the modeled system will be more equitable and effective than the current system, resulting in higher permanent housing retention rates. The rate of returns steadily reduces by two percent each year from 12% to four percent over five years. Scenario 1 begins with a significant countywide investment of \$13 million in year one and then adds \$8 million in year two, \$5 million in year

three, \$2 million in year four, and \$1 million in year five. The total countywide cost of Leveling Up and Scaling Up the response for homeless households with minor children is \$135 million (rounded) over five years.

Scenario 1 Mid-County 5-Year Investment Impact Dashboard Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	19%	19%	19%	19%	19%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	217	226	221	207	208
Annual Exits	114	152	187	201	208
Annual Remaining	102	74	34	6	(0)
% unmet need	47%	33%	15%	3%	0%
Scenario 1 Mid-County 5-Year Inventory Needs Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	3	4	5	5	5
Emergency Shelter	24	32	39	42	43
Rapid Re-Housing	17	23	28	30	31
PSH	11	15	19	20	21
Dedicated Affordable Hsg	34	46	56	60	63
Shallow Subsidy	46	61	75	80	83

Figure 47: Scenario 1, Mid-County, Households with Minor Children

Scenario 2 Mid-County, Households with Minor Children

Scenario 2 reflects the same returns and inflow rates as Scenario 1. Scenario 2 adds \$6 million of new investment each year. The total countywide cost of Leveling Up and Scaling Up in Scenario 2 is \$108 million.

Scenario 2 Mid-County 5-Year Investment Impact Dashboard, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	19%	19%	19%	19%	19%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	217	249	282	318	344
Annual Exits	89	111	134	176	218
Annual Remaining	127	138	148	142	126
% unmet need	59%	55%	53%	45%	37%
Scenario 2 Mid-County 5-Year Inventory Needs, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Homeless Prevention/Rapid Resolution	2	3	3	4	5
Emergency Shelter	19	23	28	37	45
Rapid Re-Housing	13	17	20	26	33
Permanent Supportive Housing	9	11	13	18	22
Dedicated Affordable Housing	27	33	40	53	65
Shallow Subsidy	36	44	53	70	87

Figure 48: Scenario 2, Mid-County, Households with Minor Children

Figures 47 and 48 show the impact of Scenario 1 and 2 in Mid-County for comparison of the annual number of homeless households with minor children (blue), the number of households that exit to permanent housing (red), and the number of households with minor children that remain homeless from one year to the next (green). These graphs show that the investment scenario matters.

Significant investment early on can turn the curve of homelessness for households with minor children. Both scenarios show that hundreds of families with minor children will continue to experience homelessness each year in Mid-County. These are likely to be disproportionately households of color, specifically Black and Native American households. Addressing the factors driving homelessness, namely structural racism, economic inequality, and housing shortages, is intrinsic to ending family homelessness.

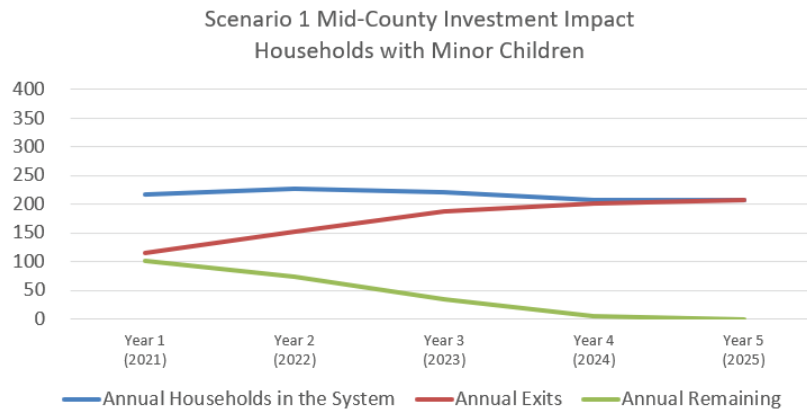


Figure 49: Scenario 1, Mid-County Investment Impact Households with Minor Children

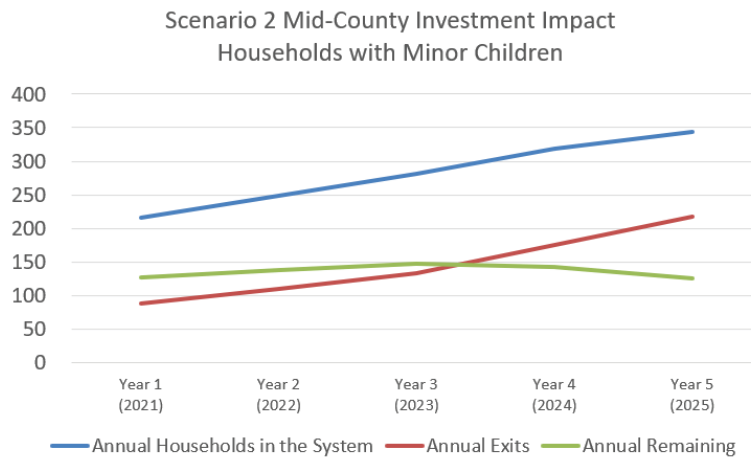


Figure 50: Scenario 2, Mid-County Investment Impact Households with Minor Children

Appendix G: CoC Sub-Geography Models, North County

North County includes Albany, Berkeley, and Emeryville. At 2019 Point in Time Count, roughly 16.5% of the CoC homeless population were counted in North County. All the estimates and recommendations below are based on North County, containing 16.5% of the CoC's homeless population of households with only adults and households with minor children. It assumes that household compositions and characteristics are relatively consistent across the CoC and that inflow and returns rates are consistent across sub-geographic regions. Finally, at the writing of this report, the CoC does not have baseline inventory data for each region. This makes it difficult to provide accurate estimates of the number of additional units needed. In the future, the Point in Time Count, HMIS, and additional data collection may provide a more detailed understanding of homeless households' characteristics and needs of homeless households in each community, the inflow rate and returns to homelessness, and the crisis and housing resource inventories.

Scenario 1 North County, Households with Only Adults

Scenario 1 assumes that the more equitable and responsive homeless system represented in the model will improve the rate of permanent housing retention, steadily reducing the 19% rate of returns to homelessness by three percent each year to seven percent over five years. The inflow of households into the homeless system maintains at 20%, close to the inflow rate that Alameda County experienced between 2017 and 2019. Scenario 1 begins with a significant investment of \$100 million in year one and then adds \$60 million in year two, \$50 million in year three, \$30 million in year four, and \$250,000 in year five. The total countywide cost of Leveling Up and Scaling Up in Scenario 1 is \$1.1 billion.

Scenario 1 North County 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	17%	17%	17%	17%	17%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	2,463	2,676	2,601	2,463	2,432
Annual Exits	1,283	1,866	2,219	2,431	2,432
Annual Remaining	1,180	810	382	32	0
% unmet need	48%	30%	15%	1%	0%
Scenario 1 North County CoC 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	32	43	52	61	62
Emergency Shelter	165	220	269	312	316
Transitional Housing	26	34	42	49	49
Rapid Re-Housing	276	369	451	522	529
PSH	205	275	336	389	394
PSH-Seniors	128	172	210	243	246
Dedicated Affordable Hsg	359	481	588	680	689
Shallow Subsidy	167	223	273	316	320

Figure 51: Scenario 1, North County, Households with Only Adults

Scenario 2 North County, Households with Only Adults

Scenario 2 uses the same rate of return and inflow rate as Scenario 1, assuming that retention will quickly improve, reducing by three percent each year to seven percent returning in the fifth year. Scenario 2 also assumes that inflow into homelessness will remain both steady and high at 20%. Finally, Scenario 2 adds \$50 million of new investment each year. The combined countywide cost of Leveling Up and Scaling up in Scenario 2 is \$956 million.

Scenario 2 North County 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	17%	17%	17%	17%	17%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	2,463	2,907	3,340	3,519	3,685
Annual Exits	1,008	1,283	1,866	2,219	2,572
Annual Remaining	1,455	1,624	1,474	1,300	1,114
% unmet need	59%	56%	44%	37%	30%
Scenario 2 North County 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	25	27	34	39	43
Emergency Shelter	129	140	176	199	220
Transitional Housing	20	22	28	31	34
Rapid Re-Housing	217	234	296	334	369
PSH	161	174	220	248	275
PSH-Seniors	101	109	138	155	172
Dedicated Affordable Hsg	282	304	385	435	481
Shallow Subsidy	131	141	179	202	223

Figure 52: Scenario 2, North County, Households with Only Adults

Figure 51 represents the different impacts of each investment scenario in the homeless population: annual population (blue), exits from homelessness (red), and annual remaining (green). These graphs show that investment strategy impacts significant investment early in the process and can quickly turn the curve. At the same time, both scenarios indicate that thousands of adults will continue to experience homelessness each year in North County, even after five years of aggressive investment. These households are likely to be disproportionately people of color and, in particular, Black and Native Americans. Without addressing the factors driving homelessness—racism, economic inequality, and housing shortfalls—homelessness will continue to harm an extraordinary number of adults in Alameda County.

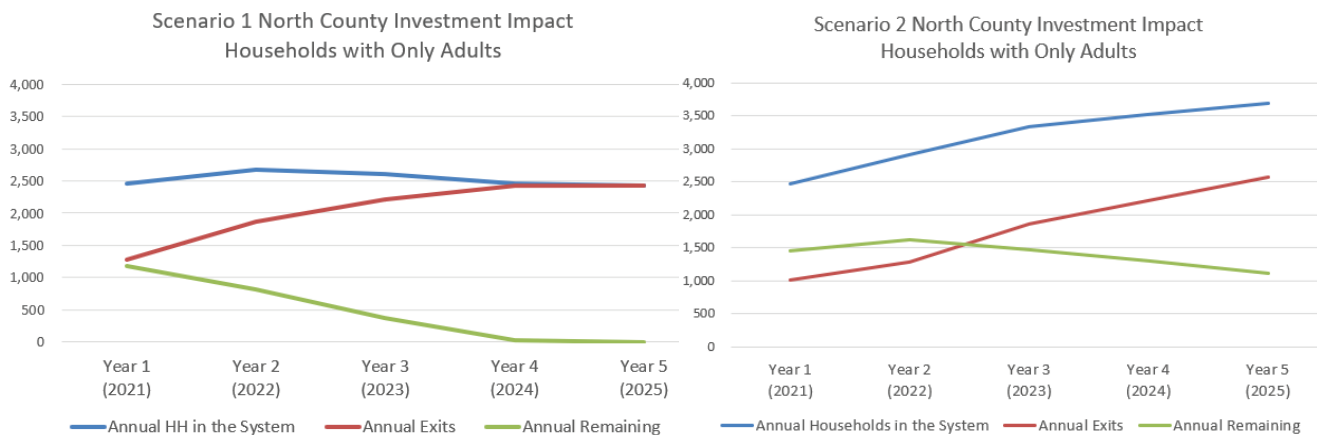


Figure 53: Scenarios 1 and 2 Comparison in North County

Scenario 1 North County, Households with Minor Children

Scenario 1 assumes inflow into the homeless system is realistic, maintaining at 20% year after year, close to the inflow rate of 22% that Alameda County saw between 2017 and 2019. It also assumes that the modeled system will be more equitable and effective than the current system, resulting in higher permanent housing retention rates. The rate of returns steadily reduces by two percent each year from 12% to four percent over five years. Scenario 1 begins with a significant countywide investment of \$13 million in year one and then adds \$8 million in year two, \$5 million in year

three, \$2 million in year four, and \$1 million in year five. The total countywide cost of Leveling Up and Scaling Up the response for homeless households with minor children is \$135 million (rounded) over five years.

Scenario 1 North County 5-Year Investment Impact Dashboard Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	17%	17%	17%	17%	17%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	193	202	197	184	185
Annual Exits	102	136	167	179	186
Annual Remaining	91	66	30	5	(0)
% unmet need	47%	33%	15%	3%	0%
Scenario 1 North County 5-Year Inventory Needs Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	2	3	4	4	5
Emergency Shelter	21	28	35	37	39
Rapid Re-Housing	15	20	25	27	28
PSH	10	14	17	18	19
Dedicated Affordable Hsg	31	41	50	54	56
Shallow Subsidy	41	54	67	72	74

Figure 54: Scenario 1, North County, Households with Minor Children

Scenario 2 North County, Households with Minor Children

Scenario 2 reflects the same returns and inflow rates as Scenario 1. Scenario 2 adds \$6 million of new investment each year. The total countywide cost of Leveling Up and Scaling Up in Scenario 2 is \$108 million (rounded).

Scenario 2 North County 5-Year Investment Impact Dashboard, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	17%	17%	17%	17%	17%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	193	222	251	284	306
Annual Exits	79	99	119	157	194
Annual Remaining	114	123	132	127	112
% unmet need	59%	55%	53%	45%	37%
Scenario 2 North County 5-Year Inventory Needs, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Homeless Prevention/Rapid Resolution	2	2	3	4	5
Emergency Shelter	17	21	25	33	40
Rapid Re-Housing	12	15	18	23	29
Permanent Supportive Housing	8	10	12	16	19
Dedicated Affordable Housing	24	30	36	47	58
Shallow Subsidy	32	39	48	63	78

Figure 55: Scenario 2, North County, Households with Minor

Figures 54 and 55 show the impact of Scenario 1 and 2 in North County for comparison of the annual number of homeless households with minor children (blue), the number of households that exit to permanent housing (red), and the number of households with minor children that remain homeless from one year to the next (green). These graphs show that the investment scenario matters.

Significant investment early on can turn the curve of homelessness for households with minor children. Both scenarios show that hundreds of families with minor children will continue to experience homelessness each year in North County. These are likely to be disproportionately households of color, specifically Black and Native American households. Addressing the factors driving homelessness, namely structural racism, economic inequality, and housing shortages, is intrinsic to ending family homelessness.

Scenario 1 North County Investment Impact
Households with Minor Children

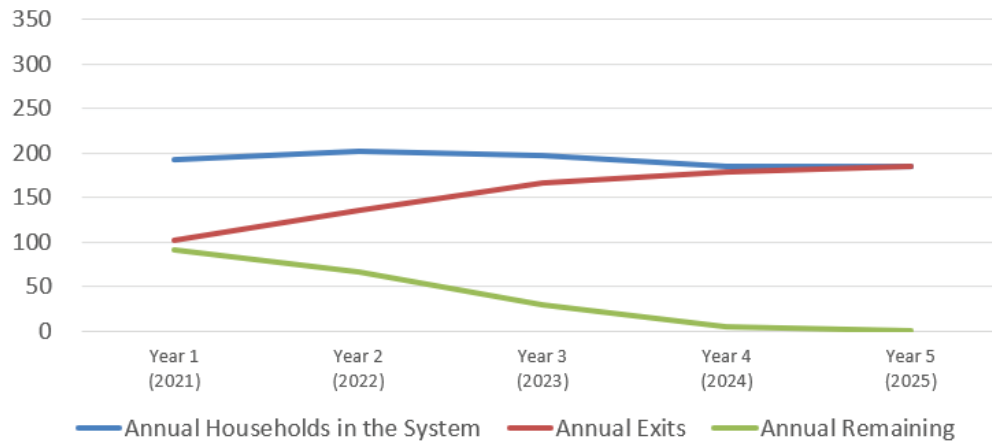


Figure 56: Scenario 1, North County Investment Impact Households with Minor Children

Scenario 2 North County Investment Impact
Households with Minor Children

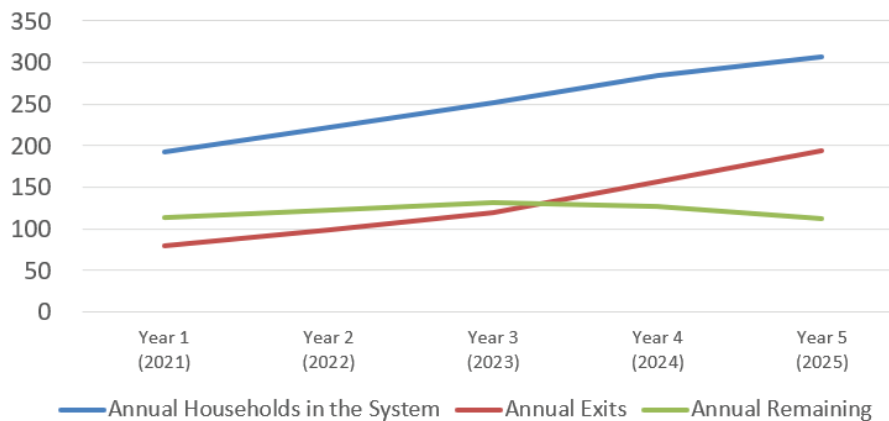


Figure 57: Scenario 2, North County Investment Impact Households with Minor Children

Appendix H: CoC Sub-Geography Models, Oakland

Oakland includes the cities of Oakland and Piedmont. At 2019 Point in Time Count, roughly 50.7% of the CoC homeless population were counted in Oakland. All the estimates and recommendations below are based on Oakland containing 50.7% of the CoC's homeless population of households with only adults and households with minor children. It assumes that household compositions and characteristics are relatively consistent across the CoC and that inflow and returns rates are consistent across sub-geographic regions. Finally, at the writing of this report, the CoC does not have baseline inventory data for each region. This makes it difficult to provide accurate estimates of the number of additional units needed. In the future, the Point in Time Count, HMIS, and additional data collection may provide a more detailed understanding of homeless households' characteristics and needs of homeless households in each community, the inflow rate and returns to homelessness, and the crisis and housing resource inventories.

Scenario 1 Oakland, Households with Only Adults

Scenario 1 assumes that the more equitable and responsive homeless system represented in the model will improve the rate of permanent housing retention, steadily reducing the 19% rate of returns to homelessness by three percent each year to seven percent over five years. The inflow of households into the homeless system maintains at 20%, close to the inflow rate that Alameda County experienced between 2017 and 2019. Scenario 1 begins with a significant investment of \$100 million in year one and then adds \$60 million in year two, \$50 million in year three, \$30 million in year four, and \$250,000 in year five. The total countywide cost of Leveling Up and Scaling Up in Scenario 1 is \$1.1 billion.

Scenario 1 Oakland 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	51%	51%	51%	51%	51%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	7,567	8,222	7,993	7,567	7,474
Annual Exits	3,941	5,733	6,818	7,469	7,474
Annual Remaining	3,626	2,489	1,175	99	0
% unmet need	48%	30%	15%	1%	0%
Scenario 1 Oakland 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	98	132	161	187	189
Emergency Shelter	505	677	828	958	971
Transitional Housing	79	105	129	150	151
Rapid Re-Housing	848	1,134	1,387	1,605	1,626
PSH	631	844	1,033	1,195	1,211
PSH-Seniors	394	528	645	747	756
Dedicated Affordable Hsg	1,103	1,477	1,807	2,091	2,118
Shallow Subsidy	512	686	839	971	983

Figure 58: Scenario 1, Oakland, Households with Only Adults

Scenario 2 North County, Households with Only Adults

Scenario 2 uses the same rate of return and inflow rate as Scenario 1, assuming that retention will quickly improve, reducing by three percent each year to seven percent returning in the fifth year. Scenario 2 also assumes that inflow into

homelessness will remain both steady and high at 20%. Finally, Scenario 2 adds \$50 million of new investment each year. The combined countywide cost of Leveling Up and Scaling up in Scenario 2 is \$956 million.

Scenario 2 Oakland 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	51%	51%	51%	51%	51%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	7,567	8,932	10,262	10,812	11,324
Annual Exits	3,096	3,941	5,733	6,818	7,902
Annual Remaining	4,471	4,991	4,528	3,994	3,422
% unmet need	59%	56%	44%	37%	30%
Scenario 2 Oakland 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	78	84	105	119	132
Emergency Shelter	397	429	542	612	677
Transitional Housing	62	67	85	95	105
Rapid Re-Housing	666	718	909	1,026	1,135
PSH	495	534	676	764	845
PSH-Seniors	310	334	423	477	528
Dedicated Affordable Hsg	867	935	1,184	1,336	1,479
Shallow Subsidy	403	434	550	620	686

Figure 59: Scenario 2, Oakland, Households with Only Adults

Figure 58 shows the different impacts of each investment scenario in the homeless population: annual population (blue), exits from homelessness (red), and annual remaining (green). These graphs show that investment strategy impacts significant investment early in the process and can quickly turn the curve. At the same time, both scenarios indicate that thousands of adults will experience homelessness each year in Oakland, even after five years of aggressive investment. These households are likely to be disproportionately people of color and, in particular, Black and Native Americans. Without addressing the factors driving homelessness—racism, economic inequality, and housing shortfalls—homelessness will continue to harm an extraordinary number of adults in Alameda County.

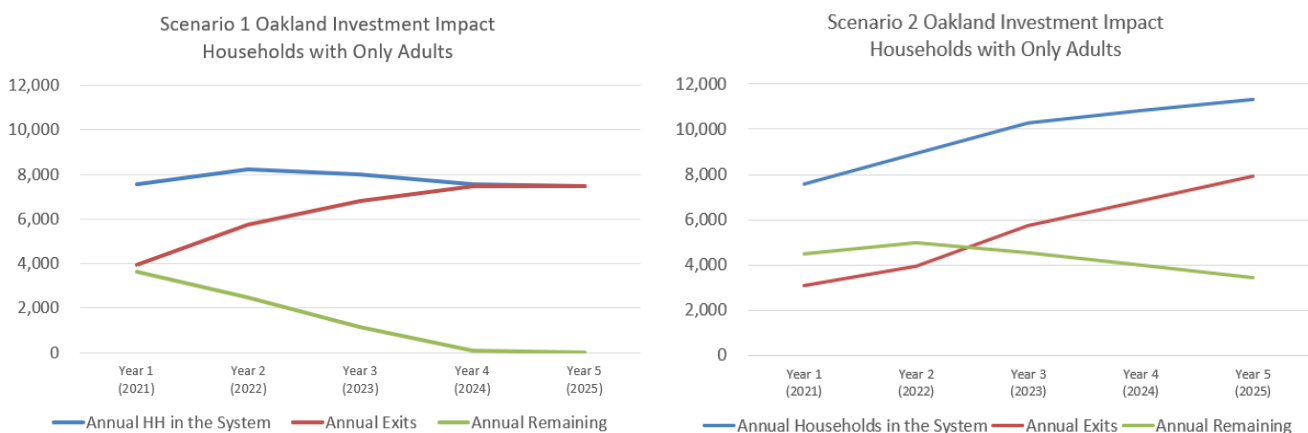


Figure 60: Scenarios 1 and 2 Compared, Oakland, Households with Only Adults

Scenario 1 Oakland, Households with Minor Children

Scenario 1 assumes inflow into the homeless system is realistic, maintaining at 20% year after year, close to the inflow rate of 22% that Alameda County saw between 2017 and 2019. It also assumes that the modeled system will be more equitable and effective than the current system, resulting in higher permanent housing retention rates. The rate of

returns steadily reduces by two percent each year from 12% to four percent over five years. Scenario 1 begins with a significant countywide investment of \$13 million in year one and then adds \$8 million in year two, \$5 million in year three, \$2 million in year four, and \$1 million in year five. The total countywide cost of Leveling Up and Scaling Up the response for homeless households with minor children is \$135 million (rounded) over five years.

Scenario 1 Oakland 5-Year Investment Impact Dashboard Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	51%	51%	51%	51%	51%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	594	619	605	567	570
Annual Exits	313	417	513	551	571
Annual Remaining	280	202	92	15	(1)
% unmet need	47%	33%	15%	3%	0%
Scenario 1 Oakland 5-Year Inventory Needs Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	8	11	13	14	14
Emergency Shelter	65	87	106	115	119
Rapid Re-Housing	47	62	77	83	86
PSH	31	42	51	55	57
Dedicated Affordable Hsg	94	125	154	166	171
Shallow Subsidy	125	167	205	221	228

Figure 61: Scenario 1, Oakland, Households with Minor Children

Scenario 2 Oakland, Households with Minor Children

Scenario 2 reflects the same returns and inflow rates as Scenario 1. Scenario 2 adds \$6 million of new investment each year. The total countywide cost of Leveling Up and Scaling Up in Scenario 2 is \$108 million (rounded).

Scenario 2 Oakland 5-Year Investment Impact Dashboard, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	51%	51%	51%	51%	51%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	594	682	772	871	941
Annual Exits	244	304	366	482	597
Annual Remaining	349	378	406	390	345
% unmet need	59%	55%	53%	45%	37%
Scenario 2 Oakland 5-Year Inventory Needs, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Homeless Prevention/Rapid Resolution	6	8	9	12	15
Emergency Shelter	51	63	76	100	124
Rapid Re-Housing	37	46	55	72	90
Permanent Supportive Housing	24	30	37	48	60
Dedicated Affordable Housing	73	91	110	144	179
Shallow Subsidy	98	121	147	193	239

Figure 62: Scenario 2, Oakland, Households with Minor Children

Figures 61 and 62 show the impact of Scenario 1 and 2 in Oakland for comparison of the annual number of homeless households with minor children (blue), the number of households that exit to permanent housing (red), and the number of households with minor children that remain homeless from one year to the next (green). These graphs show that the investment scenario matters.

Significant investment early on can turn the curve of homelessness for households with minor children. Both scenarios show that hundreds of families with minor children will continue to experience homelessness each year in Oakland. These are likely to be disproportionately households of color, specifically Black and Native American households. Addressing the factors driving homelessness, namely structural racism, economic inequality, and housing shortages, is intrinsic to ending family homelessness.

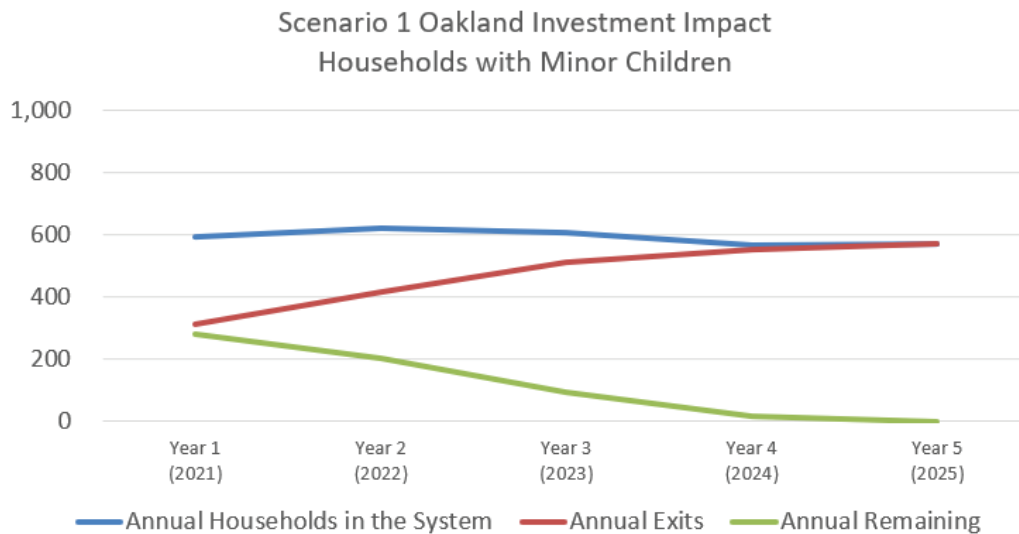


Figure 63: Scenario 1, Oakland, Investment Impact Households with Minor Children

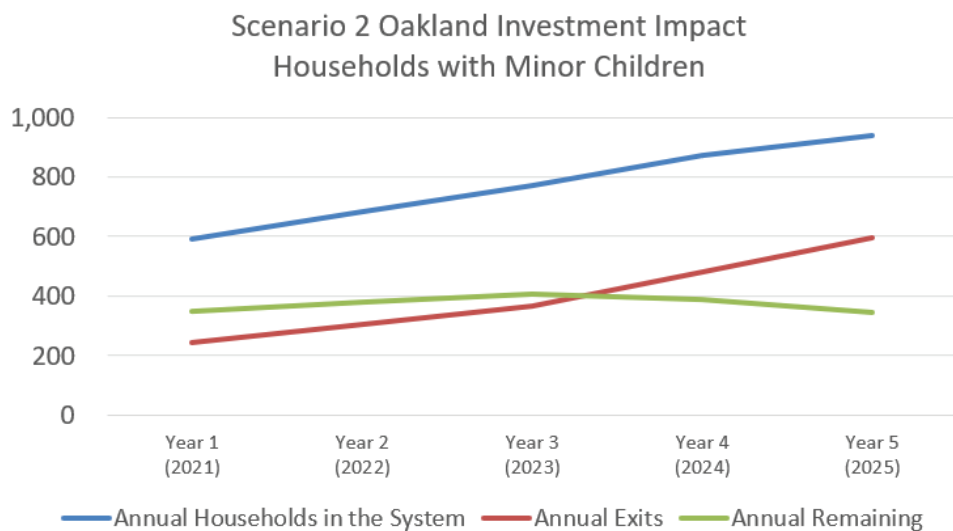


Figure 64: Scenario 2, Oakland, Investment Impact Households with Minor Children

Appendix I: CoC Sub-Geography Models, South County

South County includes Fremont, Newark, and Union City. At 2019 Point in Time Count, 10% of the CoC homeless population were counted in South County. All the estimates and recommendations below are based on South County, containing 10% of the CoC's homeless population of households with only adults and households with minor children. It assumes that household compositions and characteristics are relatively consistent across the CoC and that inflow and returns rates are consistent across sub-geographic regions. Finally, at the writing of this report, the CoC does not have baseline inventory data for each region. This makes it difficult to provide accurate estimates of the number of additional units needed. In the future, the Point in Time Count, HMIS, and additional data collection may provide a more detailed understanding of homeless households' characteristics and needs of homeless households in each community, the inflow rate and returns to homelessness, and the crisis and housing resource inventories.

Scenario 1 South County, Households with Only Adults

Scenario 1 assumes that the more equitable and responsive homeless system represented in the model will improve the rate of permanent housing retention, steadily reducing the 19% rate of returns to homelessness by three percent each year to seven percent over five years. The inflow of households into the homeless system maintains at 20%, close to the inflow rate that Alameda County experienced between 2017 and 2019. Scenario 1 begins with a significant investment of \$100 million in year one and then adds \$60 million in year two, \$50 million in year three, \$30 million in year four, and \$250,000 in year five. The total countywide cost of Leveling Up and Scaling Up in Scenario 1 is \$1.1 billion.

Scenario 1 South County 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	10%	10%	10%	10%	10%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	1,493	1,622	1,577	1,493	1,474
Annual Exits	777	1,131	1,345	1,473	1,474
Annual Remaining	715	491	232	20	0
% unmet need	48%	30%	15%	1%	0%
Scenario 1 South County 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	19	26	32	37	37
Emergency Shelter	100	134	163	189	192
Transitional Housing	16	21	26	30	30
Rapid Re-Housing	167	224	274	317	321
PSH	124	167	204	236	239
PSH-Seniors	78	104	127	147	149
Dedicated Affordable Hsg	218	291	357	412	418
Shallow Subsidy	101	135	166	192	194

Figure 65: Scenario 1, South County, Households with Only Adults

Scenario 2 South County, Households with Only Adults

Scenario 2 uses the same rate of return and inflow rate as Scenario 1, assuming that retention will quickly improve, reducing by three percent each year to seven percent returning in the fifth year. Scenario 2 also assumes that inflow into homelessness will remain both steady and high at 20%. Finally, Scenario 2 adds \$50 million of new investment each year. The combined countywide cost of Leveling Up and Scaling up in Scenario 2 is \$956 million.

Scenario 2 South County 5-Year Investment Impact Dashboard, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	10%	10%	10%	10%	10%
Returns Rate	19%	16%	13%	10%	7%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	1,493	1,762	2,024	2,133	2,234
Annual Exits	611	777	1,131	1,345	1,559
Annual Remaining	882	984	893	788	675
% unmet need	59%	56%	44%	37%	30%

Scenario 2 South County 5-Year Inventory Needs, Households with Only Adults					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	15	17	21	24	26
Emergency Shelter	78	85	107	121	134
Transitional Housing	12	13	17	19	21
Rapid Re-Housing	131	142	179	202	224
PSH	98	105	133	151	167
PSH-Seniors	61	66	83	94	104
Dedicated Affordable Hsg	171	184	234	264	292
Shallow Subsidy	79	86	108	122	135

Figure 66: Scenario 2, South County, Households with Only Adults

Figure 65 represents the different impacts of each investment scenario in the homeless population: annual population (blue), exits from homelessness (red), and annual remaining (green). These graphs show that investment strategy impacts significant investment early in the process and can quickly turn the curve. At the same time, both scenarios indicate that thousands of adults will experience homelessness each year in South County, even after five years of aggressive investment. These households are likely to be disproportionately people of color and, in particular, Black and Native Americans. Without addressing the factors driving homelessness—racism, economic inequality, and housing shortfalls—homelessness will continue to harm an extraordinary number of adults in Alameda County.

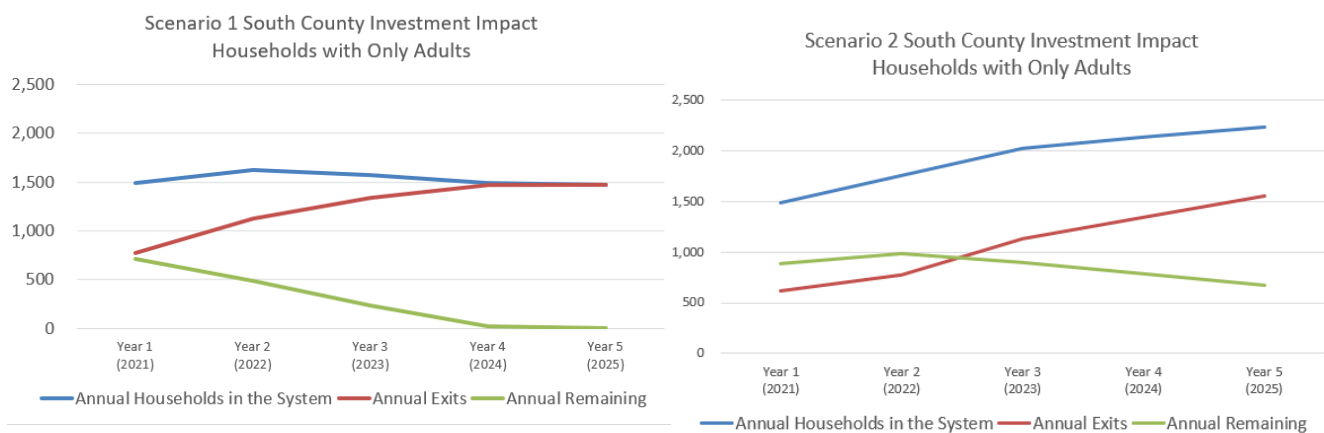


Figure 67: Scenarios 1 and 2 Compared for South County

Scenario 1 South County, Households with Minor Children

Scenario 1 assumes inflow into the homeless system is realistic, maintaining at 20% year after year, close to the inflow rate of 22% that Alameda County saw between 2017 and 2019. It also assumes that the modeled system will be more equitable and effective than the current system, resulting in higher permanent housing retention rates. The rate of returns steadily reduces by two percent each year from 12% to four percent over five years. Scenario 1 begins with a significant countywide investment of \$13 million in year one and then adds \$8 million in year two, \$5 million in year three, \$2 million in year four, and \$1 million in year five. The total countywide cost of Leveling Up and Scaling Up the response for homeless households with minor children is \$135 million (rounded) over five years.

Scenario 1 South County 5-Year Investment Impact Dashboard Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	10%	10%	10%	10%	10%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	117	122	119	112	112
Annual Exits	62	82	101	109	113
Annual Remaining	55	40	18	3	(0)
% unmet need	47%	33%	15%	3%	0%
Scenario 1 South County 5-Year Inventory Needs Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
HP/Rapid Resolution	2	2	3	3	3
Emergency Shelter	13	17	21	23	23
Rapid Re-Housing	9	12	15	16	17
PSH	6	8	10	11	11
Dedicated Affordable Hsg	19	25	30	33	34
Shallow Subsidy	25	33	41	44	45

Figure 68: Scenario 1, South County, Households with Minor Children

Scenario 2 South County, Households with Minor Children

Scenario 2 reflects the same returns and inflow rates as Scenario 1. Scenario 2 adds \$6 million of new investment each year. The total countywide cost of Leveling Up and Scaling Up in Scenario 2 is \$108 million (rounded).

Scenario 2 South County 5-Year Investment Impact Dashboard, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Percent of PIT	10%	10%	10%	10%	10%
Returns Rate	12%	10%	8%	6%	4%
Inflow Rate	20%	20%	20%	20%	20%
Annual Households in the System	117	134	152	172	186
Annual Exits	48	60	72	95	118
Annual Remaining	69	75	80	77	68
% unmet need	59%	55%	53%	45%	37%
Scenario 2 South County 5-Year Inventory Needs, Households with Minor Children					
	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)	Year 5 (2025)
Homeless Prevention/Rapid Resolution	1	2	2	2	3
Emergency Shelter	10	13	15	20	25
Rapid Re-Housing	7	9	11	14	18
Permanent Supportive Housing	5	6	7	10	12
Dedicated Affordable Housing	14	18	22	29	35
Shallow Subsidy	19	24	29	38	47

Figure 69: Scenario 2, South County, Households with Minor Children

Figures 68 and 69 show the impact of Scenario 1 and 2 in South County for comparison of the annual number of homeless households with minor children (blue), the number of households that exit to permanent housing (red), and the number of households with minor children that remain homeless from one year to the next (green). These graphs show that the investment scenario matters.

Significant investment early on can turn the curve of homelessness for households with minor children. Both scenarios show that scores of families with minor children will continue to experience homelessness each year in South County. These are likely to be disproportionately households of color, specifically Black and Native American households. Addressing the factors driving homelessness, namely structural racism, economic inequality, and housing shortages, is intrinsic to ending family homelessness.

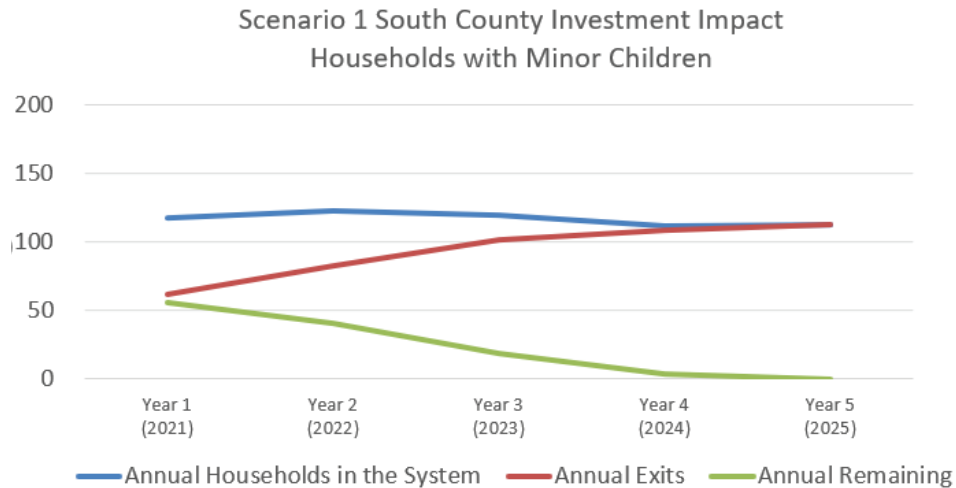


Figure 70: Scenario 1, South County, Investment Impact Households with Minor Children

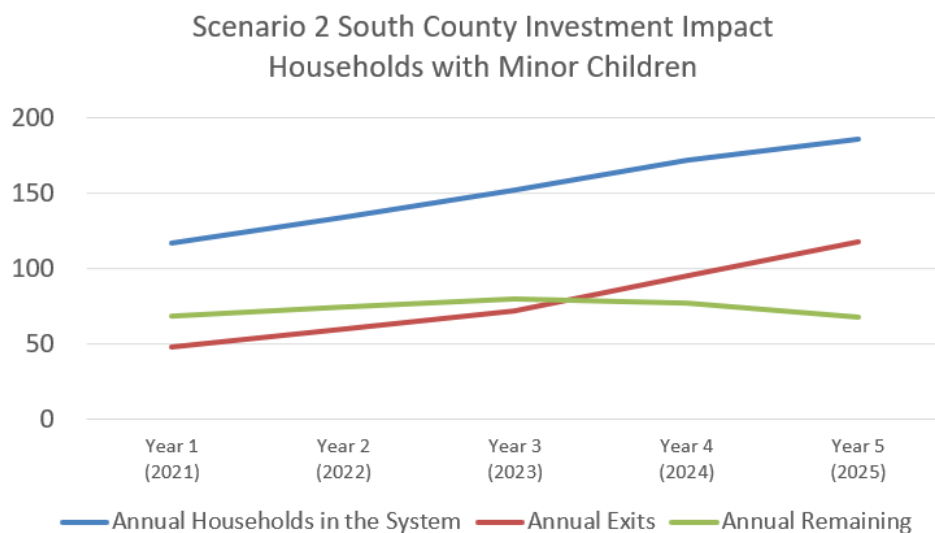


Figure 71: Scenario 2, South County, Investment Impact Households with Minor Children

Sources

- ¹ Applied Survey Research, 2019, Alameda EveryOne Home Homeless Count & Survey, Watsonville, CA.
- ² US Census Bureau. (2020, April 24). *Quick Facts Alameda County, California. Population estimates July 1, 2019* <https://www.census.gov/quickfacts/alamedacountycalifornia>
- ³ Paul, D., Knight, K., Olsen, P., Weeks, J., Yen, I., Kushel, M. (2019). Racial discrimination in the life course of older adults experiencing homelessness: results from the HOPE HOME study. *Journal of Social Distress and the Homeless*, DOI: 10.1080/10530789.2019.1702248
- ⁴ Roots, Race, and Place. <https://belonging.berkeley.edu/rootsraceplace>
- ⁵ United States Census Bureau. (2020, April 27). *Quick Facts, Alameda County CA.* <https://www.census.gov/quickfacts/alamedacountycalifornia>
- ⁶ U.S. Department of Housing and Urban Development Office of Policy Development and Research. (2019). *Comprehensive Housing Market Analysis: Oakland-Hayward-Berkeley, California.* <https://www.huduser.gov/portal/publications/pdf/OaklandCA-CHMA-19.pdf>
- ⁷ California Housing Partnership, Alameda County's Housing Emergency Update, <https://1p08d91kd0c03rlxhmhtydpr-wpengine.netdna-ssl.com/wp-content/uploads/2019/05/Alameda-HNR-2019-Final.pdf>
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- ⁹ Alameda County Social Services Agency. (2020 April 23), *Financial Assistance: General Assistance.* https://www.alamedasocialservices.org/public/services/financial_assistance/general_assistance.cfm
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- ¹¹ March average amount paid accessed 4/23/2020
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- ¹³ <https://chpc.net/housingneeds/?view=37.405074,-119.26758,5&county=California,Alameda&group=housingneed&chart=shortfall|current,cost-burden|current>
- ¹⁴ HMIS data for period 10/1/2018-9/30/2019 for all programs requiring homelessness including street outreach, Emergency Shelter, Transitional Housing, housing navigation, rapid-rehousing, and Permanent Supportive Housing. The APR supporting this table was created on April 20, 2020 using data in Q19.
- ¹⁵ Alameda County Homeless Management Information System. HUD System Performance Measure 5.2 Change in the number of persons entering ES, SH, TH and PH projects with no prior enrollments in HMIS. This value was submitted to HUD on February 28, 2020 as part of the Continuum of Care's annual reporting to the federal government. The homeless response system in Alameda County uses this measure because in this community homeless people enter permanent housing programs like Rapid Re-Housing (RRH) or Permanent Supportive Housing (PSH) directly from unsheltered living situations.
- ¹⁶ HUD System Performance Measure 7b.1 counts the number of persons in Emergency Shelter, Safe Haven, Transitional Housing, and RRH who exited to permanent housing destinations.
- ¹⁷ Program access and permanent housing outcomes data come from the Homeless Management Information System (HMIS). Point in Time Count data is included in the chart below to give some sense of population size. Discrepancies between Point in Time Count data and HMIS data may reflect the way race was sampled for the Point in Time Count. Or differences between the Point in Time Count and HMIS data may reflect a greater concentration of homeless response

system services in places like Oakland and Berkeley where a larger proportion of the homeless population is African American or Black at 70% and 56% respectively.

¹⁸ The Continuum of Care measures returns to homelessness using HUD System Performance Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness. Alameda County Homeless Management Information System. (2020, February 28). *HUD System Performance Measures*.

¹⁹ Alameda County Homeless Information System. (2020, February 13) The chart showing returns to homelessness disaggregated by race and ethnicity derives from a report that closely approximates HUD System Performance 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

²⁰ U.S. Department of Housing and Urban Development. (2018). *Coordinated entry management and data guide* <https://files.hudexchange.info/resources/documents/coordinated-entry-management-and-data-guide.pdf> p.2.

²¹ C4 Innovations. (2019). *Coordinated Entry Systems Racial Equity Analysis of Assessment Data*. https://c4innovates.com/wp-content/uploads/2019/10/CES_Racial_Equity_Analysis_2019-.pdf

²² Denzin, N.K. and Lincoln, Y.S. (eds.). *Handbook of Qualitative Research*, Sage, Thousand Oaks, 1994.

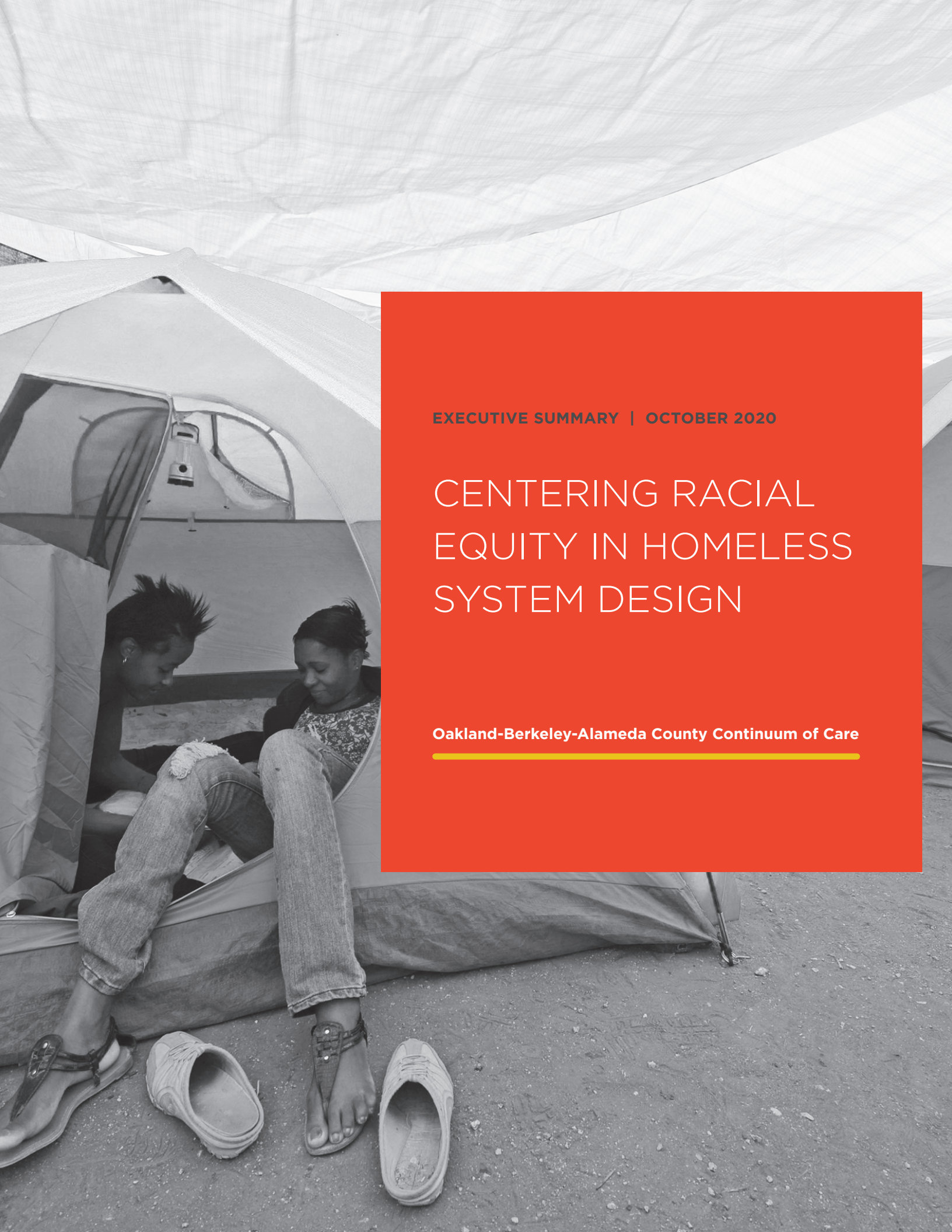
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²⁴ UC Berkeley's Urban Displacement Project and the California Housing Partnership. (2019) *Rising Housing Costs and Re-Segregation in the San Francisco Bay Area*. https://www.urbandisplacement.org/sites/default/files/images/bay_area_re-segregation_rising_housing_costs_report_2019.pdf

²⁵ Paul, D.; Knight, K.; Olsen, P.; Weeks, J.; Yen, I.; Kushel, M. (2019). Racial discrimination in the life course of older adults experiencing homelessness: results from the HOPE HOME study. *Journal of Social Distress and the Homeless*, DOI: 10.1080/10530789.2019.1702248

²⁶ An APR run on February 14, 2020 for the PSH project type during FFY 2019 shows 221 households who left PSH. Dividing the number of leavers by the 2019 PSH inventory of 2,670 units produces an 8.3% annual turnover rate. Alameda County Homeless Management Information System. (2020, February 14) *Annual Performance Report: PSH*.

²⁷ Tipping Point Community. University of California Berkeley, Othering and Belonging Institute (2020). *Taking Count: A study on poverty in the Bay Area*. <https://tippingpoint.org/wp-content/uploads/2020/07/Taking-Count-2020-A-Study-on-Poverty-in-the-Bay-Area.pdf>



EXECUTIVE SUMMARY | OCTOBER 2020

CENTERING RACIAL EQUITY IN HOMELESS SYSTEM DESIGN

Oakland-Berkeley-Alameda County Continuum of Care

Between 2017 and 2019, homelessness in Alameda County increased by 43%. This upsurge took place in the context of population growth and a tight housing market. Between 2010 and 2019, Alameda County experienced a 10.7% increase in population¹ and a 48% decrease in rental vacancies.² The growing population and low vacancy rate have rapidly escalated the cost of housing. Incomes have not kept pace. California's median rent rose 40% between 2010 and 2019, while median renter income increased only 8%.³

Yet the housing market is only part of the story. Black and Indigenous people are homeless at a rate 4 times higher than in Alameda County's general population, and more than double the rate among people in poverty. Research links the racial disparities that are evident in the homeless population to centuries of structural racism that have excluded people of color from equal access to housing, community supports, and opportunities for economic mobility.^{4,5,6} The racially disparate picture of homelessness emerging from the housing crisis in Alameda County creates an imperative to re-envision the homeless response system through a racial equity lens. The modeling working groups and Leadership Committee developed and applied a racial equity lens with the goal of producing a homeless system that works better for all to end homelessness in Alameda County. The goals of the racial equity and homeless system modeling process are to:

- 1) Identify and address factors leading to the over-representation of people of color in the population of people experiencing homelessness.
- 2) Understand how facets of the homeless response system benefit or burden people of color and pinpoint opportunities to advance racial equity within the system.
- 3) Formulate key elements of a model homeless system, including optimal types and quantities of housing units and service programs.
- 4) Develop recommendations to more effectively and equitably allocate resources, prioritize investments, and advance proactive, targeted strategies to end homelessness.

RACIAL EQUITY IMPACT ANALYSIS

The Racial Equity Impact Analysis (REIA) draws on quantitative and qualitative data to spotlight the structural barriers that are driving racial disparities in the homeless population. The findings include:

Structural racism is obscured by personal responsibility.

The racial equity focus groups highlighted a structural pattern of racism in participants' personal stories about homelessness. From a research standpoint, the impact of structural racism in informants' lives was clear, and yet it was notable how many participants took responsibility for their homelessness. Some participants described themselves as lazy or irresponsible, while others described feeling worthless or ashamed. When structural racism is not named as a central driving factor of

Black and Indigenous people are homeless at a rate 4 times higher than in Alameda County's general population, and more than double the rate among people in poverty.

homelessness for Black, Indigenous, and people of color, then it is lived, practiced, and systemically constructed as a personal failure. Ending homelessness demands a paradigm shift that enmeshes anti-racism in all aspects of the homeless housing crisis response system, from direct service interactions to data collection, from policy making and public relations to human resource practices and leadership development. This work will require collaborating with other systems to overcome structural barriers, such as those encountered in systems of law enforcement and policing, education, health care, and child welfare among other social structures.

Racism is culturally and institutionally entrenched in the United States, in California, and in Alameda County.

The disproportionate number of people of color who are experiencing homelessness is the result of structural racism, with origins in manifest destiny, slavery, redlining, mass incarceration, and displacement. The REIA focus groups highlighted a lifetime of racial discrimination accumulated in the experiences of homeless Black, Indigenous, and other people of color. These include

experiences of mass incarceration, barriers to education, adverse health impacts, and generational poverty, as well as the loss of family and other networks of social and economic support.

Structural racism impacts entire social systems, distressing the networks and supports that may otherwise prevent homelessness. Participants in the racial equity focus groups frequently described family and friends as providing economic and housing stability during times of insecurity. At the same time, the cumulative impact of structural racism may thin or distress these networks and make Black, Indigenous, and people of color vulnerable to homelessness. This insight underpins system modeling recommendations including, but not limited to, developing longer term homelessness prevention supports and reconsidering how homeless programs define and support families to include parents and adult children as well as extended family units.

Racial discrimination and economic inequality are interconnected. The economic features of the Bay Area's housing crisis are well documented: stagnant wages particularly for the lowest paid workers in a high-cost, low vacancy housing market. The racial equity focus groups show that the impact of structural racism in homeless people's lives—mass incarceration, barriers to education, and adverse health impacts to name a few—makes it difficult to increase income. This awareness supports system design recommendations including shallow subsidies and deeply affordable housing targeted to people who need a little, or a lot, of help making up the difference between income and rent. As well, the housing interventions in the model are linked to the household's income rather than a fixed length of participation in the program. Where time-limited interventions appear in the model, they frequently include a more deeply subsidized backstop.

Black and Indigenous people continue to be viewed as “high risk” tenants in the housing market. The race equity working group heard that race-neutral housing application requirements form barriers to accessing housing that disproportionately impact Black and Indigenous people. These include, but are not limited to, credit histories, bank account information, and

extended residential histories. As a result, the homeless housing crisis response system must approach “document readiness” and other application requirements as race equity issues and work to lower systemic barriers in crisis and permanent housing programs.

Homeless housing programs participate in the displacement of low-income communities of color from Alameda County. The race equity focus groups affirmed the point in time count survey finding that homeless people have ties to the communities where they experience homelessness. Many reported growing up or raising children in the communities where they are homeless now. At the same time, the high cost of housing means that, like many low-income households, homeless housing programs increasingly cannot find affordable housing opportunities in Alameda County. This dynamic disproportionately displaces Black, Indigenous, and other households of color. The racial equity analysis argues that it is critical to have homeless permanent housing resources in every city and throughout Alameda County.

If I am going to pay rent, I can't eat or buy gas. It's hard. On \$2,000 you can't make it. You need \$3,500 because rent is \$1,800 or more. You need to work 3 jobs and sell peanuts on your lunch break.

—Participant 14, African American man, aged 50–64

Low-income does not mean high service needs. While the link between homelessness and poor health is well documented, it should not be equated with intensive support service needs. A third of homeless households in Alameda County report no physical or mental health conditions, but nearly 75% have monthly incomes that are less than one thousand dollars. Participants in the race equity focus groups looked forward to living independently in housing they could afford, without intensive—or invasive—case management. For this reason, the system models recommend new forms of housing subsidies designed for formerly homeless people who need few or no ongoing supports.

PROGRAM MODEL RECOMMENDATIONS

The Racial Equity Impact Analysis (REIA) findings transformed the homeless response system design in Alameda County. One place the influence of the REIA can be seen is in the program and system process recommendations. The program models describe the optimal structures, staffing ratios, and practices that will contribute to a more equitable homeless housing crisis response. Funders and providers should look to the program models as a template for program development, contracting, monitoring, and performance evaluation. The full program models can be found in Appendix C and Appendix D of the full report. Common guidelines that underpin the transformative vision of equitable programs include:

- All staff working in the housing crisis response system are trained to understand structural racism and the barriers it imposes to maintaining housing in Alameda County. Staff are trained to recognize the roots of homelessness in discrimination, racism, and political choices, rather than individual choices and personal responsibility.
- All program information (website, outreach materials, etc.) is translated into County threshold languages.
- All program information is disseminated at strategic community touch points where those least likely to be connected to services may frequent. Such sites include churches, corner stores, neighborhoods, schools, places of employment.
- Recruitment and hiring processes for staff positions at all levels ensures diverse racial, ethnic, and linguistic representation.
- Programs include a portion of staff who have experienced homelessness.
- Staff are trained in trauma-informed care and harm reduction.
- Client choice is honored and respected in all programs and centers. Housing assistance is client-driven and helps locate housing opportunities that fit the client's needs (near job opportunities and family/social networks, etc.)
- Programs and staff will work to build on client assets, such as culture, religion, talents, and skills.

Households will need different combinations of equitable programs to end their homelessness. These combinations of interventions are called “pathways.” While one household may use only prevention, another may need

both emergency shelter and permanent supportive housing; and a third needs transitional housing, rapid re-housing, and a shallow subsidy. For this reason the models anticipate that some households will use more than one program or intervention to end their homelessness. The interventions included in the pathways are briefly summarized below. Because households may use more than one intervention, the proportions in the definitions below will not add up to 100%.



Homeless Prevention/Rapid Resolution.

Immediate services intervention to prevent or quickly resolve homelessness for households who otherwise would have become homeless. Based on the REIA, homeless prevention and rapid resolution are available more than once in a lifetime and include short-term and ongoing supports. Prevention and Rapid Resolution make up 20% of permanent housing exits for households with only adults and 10% of permanent housing exits for households with minor children.



Crisis Response.

Temporary lodging to provide for the safety and immediate needs of individuals and families experiencing literal homelessness. Literal homelessness describes people living in shelters or in places not meant for people to live like cars, streets, abandoned buildings, or tents. Crisis Response programs include emergency shelters and transitional housing programs. Crisis Response programs will serve 58% of households with only adults and 90% of households with minor children.



Transitional Housing for Youth.

Time-limited housing with services to stabilize participants and prepare them for exit to permanent housing. The average length of stay in Transitional Housing is 18 months and reserved for young adults aged 18-24. Transitional Housing for Youth will serve 2% of households with only adults.



Shallow Subsidy.

Ongoing rent assistance with no or limited services. A new program type, shallow subsidies are responsive to findings from the REIA. Shallow subsidies will serve 13% of households with only adults and 40% of households with minor children.



Rapid Re-Housing. Support with move in costs and a temporary subsidy to help households stabilize in housing before assuming the full rent themselves. In the system model Rapid Re-Housing will help 13% of households with only adults and 60% of households with minor children.



Permanent Supportive Housing. Deeply affordable permanent housing for individuals and families with a long history of homelessness and a disability. In the system model, PSH ends homelessness for 16% of households with only adults and 10% of households with minor children.



Permanent Supportive Housing-Senior Units. Deeply subsidized permanent housing with intensive services designed for seniors to support aging in place. In the system model PSH Senior Units will help 10% of households with only adults.



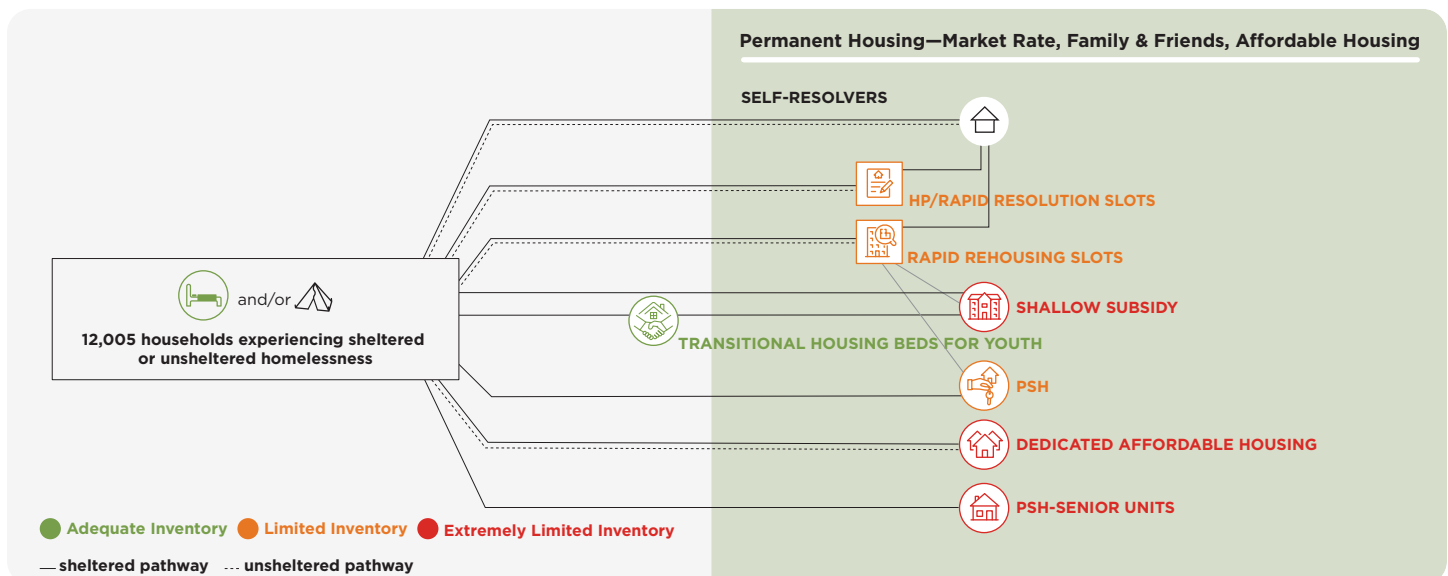
Dedicated Affordable Housing. Housing affordable to extremely low-income households experiencing homelessness with few ongoing support service needs. This new program type is responsive to findings from the REIA. In the model, dedicated affordable housing will end homelessness for 28% of households with only adults and 30% of households with minor children.

INVENTORY RECOMMENDATIONS HOUSEHOLDS WITH ONLY ADULTS

Households with only adults make up 91.4% of all households experiencing homelessness according to the 2019 Point In Time Count. An estimated 12,005 households with only adults experience homelessness in Alameda County each year. The diagram below illustrates the resource pathways that will be available in an equitable and high functioning homeless housing crisis response system to effectively end homelessness for households with only adults.

While some homeless households will stay in Emergency Shelters and Transitional Housing programs before becoming permanently housed, the homeless housing response system in Alameda County expects to directly connect unsheltered homeless households to permanent housing without a stay in shelter. Unsheltered households will benefit from crisis services including, but not limited to street outreach, mobile health clinics, laundry, showers, and meal programs. The dashed lines represent pathways for unsheltered households and the solid lines represent pathways for sheltered households. The model presumes that roughly 10% of households with only adults will either “self-resolve” their homelessness by accessing personal resources or losing touch with the homeless crisis response system.

Realizing this model will require first leveling up the existing homeless resource inventory by adding additional capacity to the interventions shown in orange



(where there is limited inventory) and red (where there is extremely limited inventory). Exact numbers of additional units and the cost of leveling up can be found in the full report. It should be noted that this diagram is based on pre-COVID-19 inventory numbers. The COVID-19 pandemic has necessitated serving fewer households with the existing shelter stock while at the same time adding shelter capacity, such as the hotel rooms made available through Project Roomkey. In fact, at the writing of this report the number of households served in shelter at a point in time has increased.

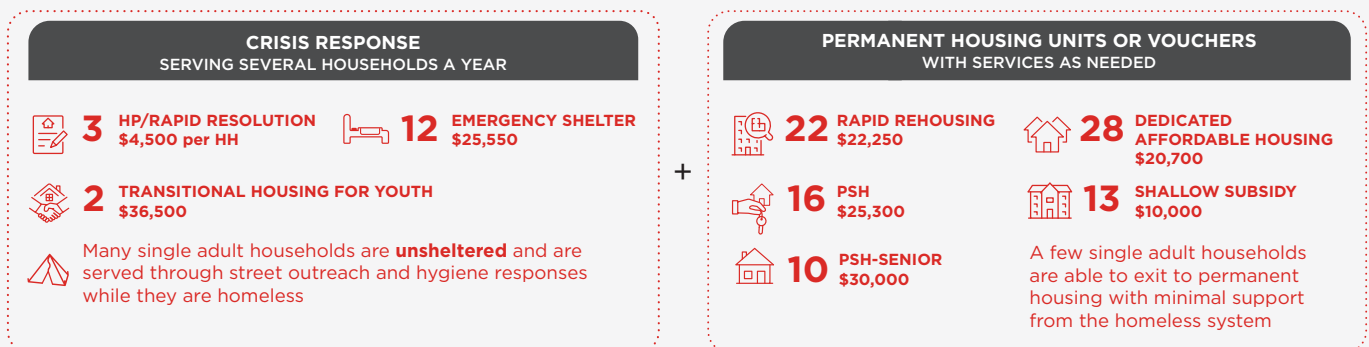
The increase in shelter capacity intensifies the message in the pathway chart: the greatest areas of need in the Continuum of Care are for permanent resources, specifically Shallow Subsidies, Permanent Supportive Housing, Dedicated Affordable Housing, and PSH-Seniors. The current homeless system has too few permanent housing resources in comparison with its Crisis Response inventory, such as emergency shelters. Continuing to add crisis beds without developing pathways to permanent housing will not end or even decrease homelessness. This does not mean that the homeless response system has all the Crisis Response resources it will ever need to end homelessness. Instead, Leveling Up the homeless response system by bringing all its resources into proportion with the existing Crisis Response inventory will generate flow through the system and enable the existing Crisis Response resources to function better.

This recommendation is consistent with findings in *The EveryOne Home Plan to End Homelessness: 2018 Strategic Update*, City of Berkeley's *1,000 Person Plan*, and the City of Oakland's *Permanent Access To Housing (PATH) Strategy*.

Once the homeless response system for households with only adults is proportionately aligned with the model, then the entire system can be brought to a scale capable of addressing the population of homeless households with only adults. The chart shows the package of homelessness prevention, crisis response, and permanent housing resources needed to serve each additional 100 homeless households with only adults. Some of the inventory will serve multiple households. For example, each emergency shelter slot will serve 4 households each year for 3 months each, a combined total of 48 households annually. As well, the model plans for some households to use more than one intervention. For these reasons the inventory will not add up to 100. The cost values were estimated by a working group of funders and service providers. Cost estimates include administrative costs of both funders and subcontractors. Multi-year estimates include a 3% cost of living adjustment compounded year after year. This package of resources describes the interrelationship between the homelessness prevention, crisis response, and permanent housing resources. New resources are not modular components. An equitable

100

HOUSEHOLDS WITH ADULTS ONLY | NEED IN A YEAR



COST PER 100 HOUSEHOLDS \$2,337,500 in the First Year

COST TO MAINTAIN HOUSING FOR HOUSEHOLDS IN PERMANENT HOUSING \$6,083,207 over Next 4 Years

and effective homelessness response requires that planners, funders, providers, and elected leaders develop a coherent system of interrelated pathways. Investments in crisis response must be accompanied by permanent housing resources for the system to achieve flow and perform at a higher, more equitable level.

INVENTORY RECOMMENDATIONS FOR HOUSEHOLDS WITH MINOR CHILDREN

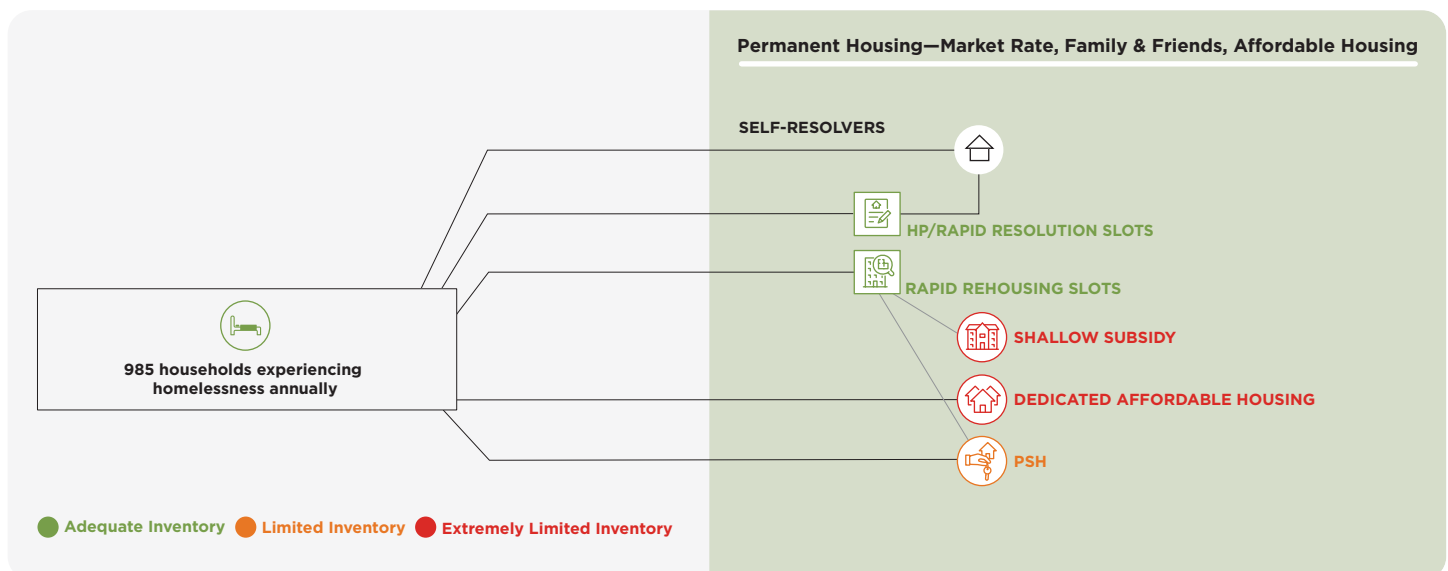
Households with minor children make up 7.5% of all households experiencing homelessness according to the 2019 Point In Time Count. An estimated 985 households with minor children experience homelessness each year. The diagram below illustrates the resource pathways that will be available in an equitable and high functioning homeless response system to effectively end homelessness for households with minor children. Although the number of unsheltered households with minor children is not insignificant in Alameda County, the working group on Households with Minor Children began from the premise that homeless households with minor children would use shelter or transitional housing if those crisis programs are carefully calibrated to the needs of families. Like the model for households with only adults, this model presumes that 10% of households “self-resolve” their homelessness or lose contact with the system.

Bringing this model into being will require first leveling up the existing homeless resource inventory by adding additional capacity to the interventions shown in orange (where there is limited inventory) and red (where there

is extremely limited inventory). It should be noted that this diagram is based on pre-COVID-19 inventory numbers. The COVID-19 pandemic has necessitated serving fewer households with the existing shelter stock while at the same time adding shelter capacity, such as the hotel rooms made available through Project Roomkey. At the writing of this report the number of households with minor children served in shelter at a point in time has remained consistent with pre-pandemic capacity.

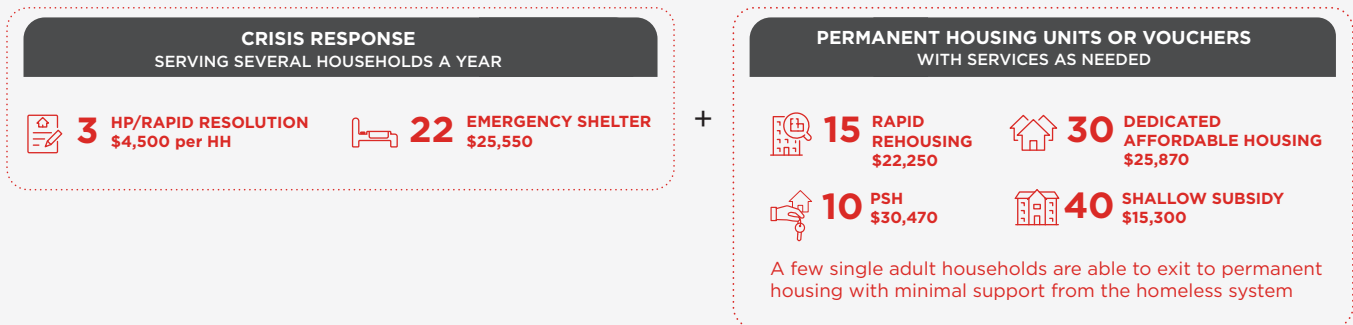
This means that Shallow Subsidies, Dedicated Affordable Housing, and Permanent Supportive Housing continue to be the areas of the system that are most in need of investment. The model plans for an initial surge in Permanent Supportive Housing resources during the leveling up phase to quickly end homelessness for the households with minor children with the longest lengths of time homeless. Exact numbers of additional units and the cost of leveling up can be found in the full report.

The current homeless system has too few permanent housing resources for households with minor children in comparison with its inventory of crisis response resources for these same families. Continuing to add crisis resources like emergency shelter without creating pathways to permanent housing will not end or even decrease homelessness. Building up the permanent resource inventory in proportion with crisis response inventory will create pathways out of homelessness for households with minor children and result in a more efficient system.



100

HOUSEHOLDS WITH MINOR CHILDREN | NEED IN A YEAR



COST PER 100 HOUSEHOLDS \$2,642,650 in the First Year

COST TO MAINTAIN HOUSING FOR HOUSEHOLDS IN PERMANENT HOUSING \$7,294,505 over Next 4 Years

Once again, bringing the homeless response system to scale requires adding capacity in the proportions of the system models. The chart above shows the package of prevention, crisis response, and permanent housing resources needed to serve each additional 100 households with minor children. Some of the inventory will serve multiple households. For example, each emergency shelter slot will serve 4 households each year for 3 months each, serving a total of 88 households annually. Additionally, some households will use more than one intervention; for instance, the model plans that some households may not be successful in Rapid Re-Housing and therefore makes available a shallow subsidy backstop. Finally, the chart takes into consideration that some households will be prevented from becoming homeless or self-resolve their homelessness without permanent housing units or vouchers. For these reasons, the number of slots needed will not add up to 100. The cost values were estimated by a working group of funders and service providers. They include administrative costs of both funders and subcontractors. Multi-year estimates include a 3% cost of living adjustment compounded year after year.

This package of resources describes the interrelationship between the homelessness prevention, crisis, and permanent housing resources. For the system to effectively end homelessness, new resources cannot be added as pick-and-choose modular components. Instead, as planners and funders, the Continuum of

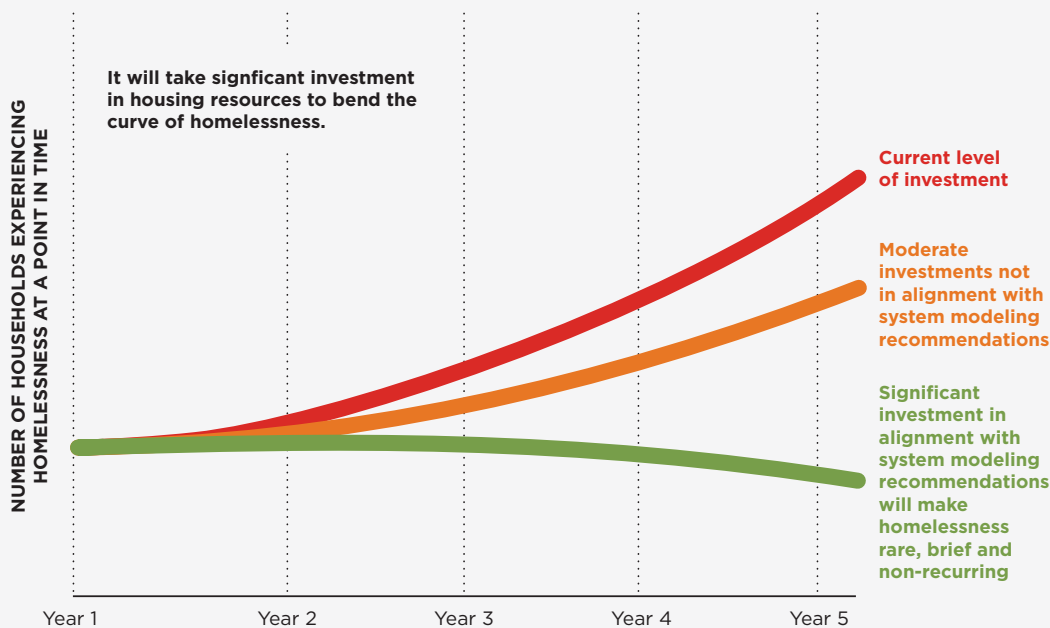
Care, Alameda County, cities, and philanthropies must invest in the combined package of resources to produce a coherent system that performs at a higher level.

PROJECTED CHANGES IN HOMELESSNESS WITH AND WITHOUT ADDITIONAL INVESTMENT

Significant investment in homeless housing and crisis response that aligns with the model will allow the system of care in Alameda County to “turn the curve” or bend the trajectory of homelessness. Without a significant increase in investment, the Continuum of Care should expect to double the number of people experiencing homelessness within 5 years. Similarly, moderate investment or selective investment in some parts of the system and not others will result in a sharp increase in the number of people experiencing homelessness.

Only significant ongoing investment that is made in alignment with interventions in the model will result in a more efficient and equitable homeless housing crisis response. In addition to the rate of investment, two variables will shape the impact of the investment: the rate of inflow into homelessness, and the rate of returns to homelessness from housed living situations. The scenario below is based on relatively favorable inputs:

- Investing at a high rate in the models, particularly by creating Permanent Supportive Housing, Dedicated Affordable Housing, and Shallow Subsidies.
- Slowing the rate of inflow into homelessness, which



will depend upon societal changes in the racial discrimination and economic inequality that is mediated through the housing market.

- Decreasing in the rate of returns to homelessness, which depends upon the homeless housing crisis response system quickly becoming more effective in sustaining permanent housing exits.

Even under such favorable conditions, the chart shows that the Continuum of Care will see no measurable decrease in homelessness for two years as the system addresses the intensification of homelessness that has taken place over the past 5 years. Homelessness will begin to decrease in the third year of sustained and significant levels of investment. By the fifth year of this investment and inflow scenario, the homeless housing crisis response system described in the model will reach a state of efficiency—both in outcomes and cost—that is marked by responding to homelessness as it happens and a corresponding decreasing investment. This strategy will not only require substantial funding and favorable social conditions, but also demand political resolve.

The work of developing a racially equitable and effective homeless response system is beginning. Bringing racial equity into the fabric of homeless system planning is a critical innovation. And, it will take ongoing effort and determination to put racial equity at the center of every aspect of the homeless response system. As a starting place, the Continuum of Care is committed to disaggregating performance outcomes by race. Consistently disaggregating performance outcomes by race will help the CoC identify and respond to racial disparities and evaluate progress toward a racially equitable system. As well, stakeholders can begin implementing the program model recommendations, which are deeply informed by the Racial Equity Impact Analysis. The structures and practices in the program models can be developed into policies, incorporated into contracts, and measured using the Results Based Accountability (RBA) framework. In short, the racially equitable and effective homeless response system that is the goal of this report is best understood as an ongoing set of actions. Making it a reality and keeping it going is critical work. That work starts now.

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 Alameda County District 1, Supervisor Haggerty's Office
 Alameda County District 2, Supervisor Valle's Office
 Alameda County District 3, Supervisor Chan's Office
 Alameda County District 4, Supervisor Miley's Office
 Alameda County District 5, Supervisor Carson's Office
 Alameda County Health Care Services Agency
 Alameda County Housing and Community Development Agency
 Alameda County Social Services Agency
 All Home
 ALL IN Alameda County Youth Action Board
 Bay Area Community Services
 Benioff Homelessness and Housing Initiative, UCSF
 Berkeley Housing Authority
 City of Alameda
 City of Albany
 City of Berkeley
 City of Emeryville
 City of Fremont
 City of Hayward
 City of Livermore
 City of Oakland
 City of San Leandro
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 Crankstart
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 Alameda County Social Services Agency
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 All Home
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 City of Alameda
 City of Berkeley
 City of Fremont
 City of Livermore
 City of Oakland
 Covenant House
 East Oakland Community Project
 EveryOne Home Leadership Board
 Family Violence Law Center
 First Five Alameda County
 Housing Consortium of the East Bay
 LifeLong Medical Care
 Oakland-Berkeley-Alameda County Continuum of Care
 Roots Community Health Center
 Ruby's Place
 Satellite Affordable Housing Associates
 St. Mary's Center
 South Hayward Parish
 Supervisor Carson's Office
 Supervisor Chan's Office
 UCSF Benioff Children's Hospital Oakland
 Youth Action Board

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CENTERING RACIAL EQUITY IN HOMELESS RESPONSE SYSTEM DESIGN

EXECUTIVE SUMMARY

For more information and to read the full report,
please visit everyonehome.org.