



Addressing Unsheltered Homelessness in California: Spotlight on Emerging Models Funded by the Homeless Emergency Aid Program

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A report by the Division of Social Work and the Center for Health Practice, Policy & Research at the California State University, Sacramento

Prepared for the Homelessness Coordinating and Financing Council in the California Business, Consumer Services, and Housing Agency

Executive Summary

In 2018, Senate Bill 850 established the Homeless Emergency Aid Program (HEAP), which allocated \$500 million in one-time block grants to assist localities across California improve their response to homelessness. This report is the first in a series that explores how communities have leveraged HEAP funding the last two years to address specific gaps and challenges in their local homeless service systems. The purpose of this first report is to illustrate emerging and novel program models funded by HEAP that address the relatively large numbers of individuals facing unsheltered homelessness in California and the complex life and health challenges that these situations often represent. Drawing from interviews conducted with stakeholders, clients, and service providers across the state, as well as various quantitative data reported by jurisdictions, we highlight three promising service models associated with Safe Parking, Integrative Outreach Teams, and Navigation Centers that have become more prominent because of HEAP.

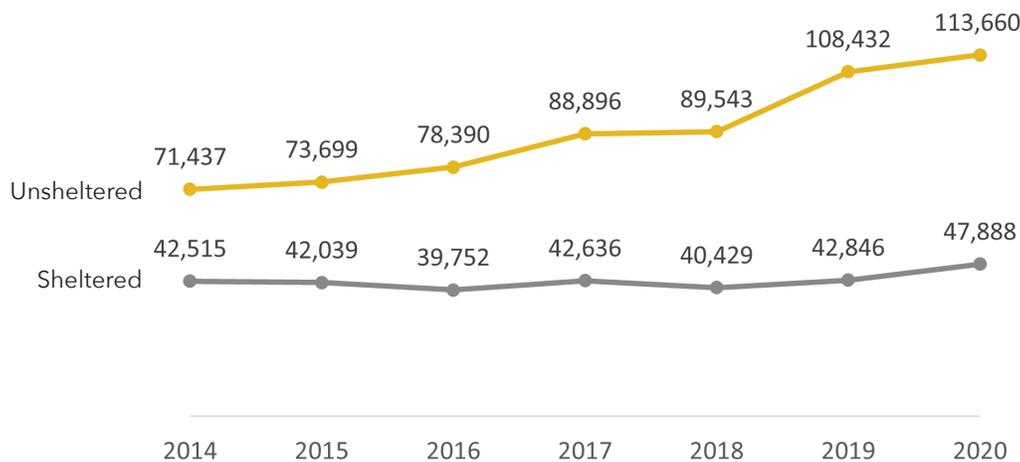
The Challenges of Unsheltered Homelessness in California

Unsheltered homelessness refers to situations in which individuals are not regularly accessing shelters or transitional housing programs and are instead often sleeping in encampments, under underpasses,

in their vehicles, or other locations not meant for human habitation. California not only has the largest number of residents facing homelessness in the US, but on any given night half of all individuals experiencing unsheltered homelessness in the country are in California. Current estimates suggest that the proportion of people experiencing unsheltered homelessness in California increased by 60% since 2014. Unsheltered homelessness, which is often associated with more complex service challenges, places individuals and households at greater risk of harm which over time can compound the difficulties to exit homelessness.

Even with recent large increases in shelter capacity in many jurisdictions across the state, the scope of unsheltered homelessness will likely continue to exceed most local homeless service systems. While the pandemic has somewhat shifted this reality, particularly given the state's efforts to repurpose some motels and hotels as temporary housing, generally jurisdictions in California only have the capacity to shelter one out of three individuals facing homelessness. Addressing the complex challenges of homelessness will require various policy efforts and goals—such as programs targeting prevention, housing affordability, as well as efforts to help households that have exited homelessness remain stably housed over time. This report calls attention for the need of specific programs and interventions that address the immediate harms and risks among people who face unsheltered homelessness on a nightly basis.

CALIFORNIA YEARLY HOMELESS ESTIMATES, 2014-2020



From HUD (2020). *2007-2020 PIT Estimates by State*. <https://www.huduser.gov/portal/sites/default/files/xls/2007-2020-PIT-Estimates-by-state.xlsx>.

Innovative HEAP-Funded Strategies for Addressing Unsheltered Homelessness

HEAP was intentionally designed to provide jurisdictions with flexible state funding to not only expand the capacity of existing local programs but also to develop and experiment with new service models. Indeed, jurisdictions were explicitly encouraged to be creative in their proposals as well as to engage with new community partners across different service sectors (e.g., housing, healthcare, behavioral health). Eligible activities included direct services (e.g., street outreach, prevention services), rental assistance or subsidies, and capital improvements (e.g., to build or rehabilitate an emergency shelter or permanent supportive housing). As a result, jurisdictions across California were able to implement new models that address unsheltered homelessness that would have not been possible without the flexible nature of the HEAP funding.

In our review of Annual Reports submitted by jurisdictions in January 2021 to the Homeless Coordinating and Financing Council we discovered a wide array of innovative service models addressing unsheltered homelessness. From this review, we identified three generalized service models emerging across several jurisdictions. In this report we elaborate on their core goals and components, as well as their on-the-ground implementation in three specific communities funded by HEAP.

Photo courtesy of Dreams for Change

Model 1: Comprehensive Safe Parking

Reducing Harm and Increasing Exits From Homelessness

As unsheltered homelessness has increased across California, communities are reporting a growing number of households using their vehicles for sleeping. Safe parking programs provide these households—many times families with children—a safe and secure nightly location to sleep in their vehicles free from harassment, criminalization, and fear of assault. But HEAP has helped fund newer models of safe parking that are enhanced in terms of providing extensive supports and access to case management services.

One particularly novel example of a comprehensive safe parking model is the Dreams for Change program in San Diego, which has been funded by HEAP since 2019. As we review in the report, the Dreams for Change program highlights how service providers have leveraged HEAP to expand their engagement with an otherwise invisible group of individuals and families living in their vehicles and who are often reluctant to access shelters or traditional social services. HEAP not only substantially increased the reach of programs like Dreams for Change, but also allowed providers to expand the cadre of support services that they can offer households. In sum, we find that safe parking programs are relatively inexpensive and easily scalable interventions that often leverage existing infrastructure in a community (such as unused parking structures during the night).



These programs not only help reduce the risks to the growing population of people living in vehicles across California, but they help many of these households get connected to services and more quickly exit homelessness altogether.

Model 2: Integrative Outreach Teams

Bringing Services to the Client

Street outreach is a common intervention implemented in some form by nearly every homeless service system in California. The intervention generally entails outreach staff engaging directly with individuals currently living in encampments, on the streets, or even vehicles, and establishing initial steps to access services. But some communities strategically used HEAP to fund more comprehensive and multidisciplinary variations of the model that we call integrative street outreach. This strategy builds on a general street outreach model by integrating team members from multiple service sectors and disciplines (i.e., clinical social workers, healthcare providers, substance use counselors and in some cases, public services). By making outreach teams a functional “front door” to different programs and services, individuals with complex needs are more likely to have success addressing those needs (i.e., accessing these services) and, in turn, be more successful transitioning out of homelessness.

In this report we review one promising example of a HEAP-funded integrative outreach model operating in Riverside County called the Homeless Encampment Action Team (HEAT), run by the Social Work Action Group (SWAG). Since 2019, this

Photo courtesy of SWAG



integrative outreach team has engaged a total 2,669 people experiencing homelessness across nine locations. Leveraging HEAP funds to increase the scope of the services that the outreach team could provide clients, the intervention has helped over a thousand individuals exit homelessness since 2019. We find that this model shows promise in addressing immediate physical or behavioral health crises while also developing rapport that can lead to eventual permanent housing. Staff noted that the flexibility of HEAP funding provided them an opportunity to bridge siloed services in ways that were not possible through other funding sources.

Model 3: Navigation Centers

Bridging Shelter and Services

While the goal of permanent housing underpins most homeless interventions, the limited capacity of supportive housing programs across most communities means that individuals with complex needs often wait a period of time before transitioning into housing. During this time they may face many challenges while on the street that could derail their plans to exit homelessness. Accordingly, navigation centers support a more structured, service-rich environment from which individuals are more likely to transition into permanent housing. Navigation centers are also low-barrier, meaning there are few requirements that individuals need to meet in order to stay at the center. Unlike traditional shelters, the navigation center is open 24 hours per day and residents may come and go as needed. In function, navigation centers are a hybrid between a traditional shelter and a service referral center; they provide unsheltered individuals immediate respite from the elements but according to several administrators, they also help individuals exit homelessness altogether.

In the report we explore this emerging hybrid shelter-service model and spotlight how the City of Hayward used HEAP funds to develop and operate a new Navigation Center. The development of the Hayward Navigation Center was completely funded by HEAP dollars. The City of Hayward was also able to leverage funds from HEAP and other sources to provide clients at the center with additional social services and rental assistance.



Photo courtesy of the City of Hayward/Bay Area Community Services

This additional funding also ensured that these services aligned with best practices when working with individuals facing complex challenges. Interventions were trauma-responsive and “fundamentally harm reduction” according to staff interviewed for this report. Indeed, staff view their work as connecting individuals to services that clients will be able to utilize beyond their residence at the Navigation Center; interventions that “build the social, natural and community supports that they need to go beyond our services.” Further, staff noted that one of the most innovative components is the flexible housing fund that clients can access up to 9 months after exiting the Navigation Center. These funds can be used to offset move-in costs, furniture, security deposits, or other barriers to permanent housing. Ultimately, staff emphasized that their navigation center is “creating an orientation toward housing and an empowerment focused model” that they hope shifts community perspectives toward permanent housing.

Recommendations

One goal of this report is to provide insight into the challenging realities of unsheltered homelessness in California and the role that HEAP has played in cultivating emerging and promising service models to address this issue. While more research is needed to evaluate and quantify the impacts of these emerging models, our interviews highlighted the potential these programs have for reducing the day-to-day harms of unsheltered homelessness. It should be noted, however, that all three models represent interventions that are typically difficult to

fund with traditional state or federal programs. The models either transcend the prescribed categories of traditional homeless services and/or they require substantial start-up costs that jurisdictions need to absorb prior to seeking external funding. Each spotlight community highlighted the importance of HEAP in these regards for being both flexible but also sizable one-time investments into a jurisdiction’s homeless service system. In short, it is clear that many of these programs would not have existed these past two years, at least in their current scale, without HEAP.

While each of the three emerging models discussed in this report highlight specific lessons learned about program development and implementation, collectively the three case studies also provide insight into the broader policy tensions, but perhaps also opportunities, of addressing unsheltered homelessness in California.

Recommendation #1: Address immediate needs without losing focus on permanent housing

The three models discussed in this report are emblematic of an emerging perspective that homeless interventions should attempt to address both immediate needs but also be proactive in terms of identifying the most direct path to permanent housing. While the program models reviewed in this report are undoubtedly focused on reducing the harms of homelessness, each is intentionally oriented toward permanent resolutions.

In short, it is clear that many communities have embraced an emerging perspective that homeless service systems should be both short-term and long-term in scope and that these are not mutually exclusive strategies.

Given the breadth of new programs that HEAP fostered, future state funding should continue to support innovative strategies to reduce the immediate harms of homelessness (i.e., provide access to shelter, clean restrooms, basic healthcare services etc.) that are also oriented toward helping individuals transition into permanent housing. However, it should be noted that many of these emerging models, like Navigation Centers, have not been extensively studied. We recommend that HCFC staff carefully assess available outcome data from these programs to investigate the relative benefits that these models might offer communities given their respective needs and resources. Information on the number of individuals helped by these interventions—in terms of successful exits to housing—as well as whether some programs may be more effective for some forms of homelessness but not others, could help jurisdictions make better informed decisions with respect to investments into their homeless service systems.

Recommendation #2: Bridge siloed services with flexible funding

Adding to the challenge of bridging immediate and long term services is the fact that many of the service sectors attempting to assist individuals facing homelessness are often siloed from each other. Services addressing behavioral health, immediate and long term health needs, substance addictions, housing, case management, among others, often represent distinct entities operating within separate systems of care. Each of the models discussed in this report reflect an effort to bridge these traditional silos and coordinate a client's needs across sectors such as housing, behavioral health support, medical needs, and other supports.

Building on the multidisciplinary momentum of some HEAP-funded initiatives, HCFC should continue to promote collaborations that bridge traditionally siloed service sectors. As part of this effort, a portion of state funds should remain as flexible as possible so that jurisdictions can combine funding from different sources to “start up” new interdisciplinary efforts that address particular community gaps in their homeless service systems. Similar to the “challenge grants” that were established in this year’s state budget for addressing issues related to encampments and family homelessness, HCFC should provide support for more interdisciplinary and integrated efforts to address a variety of challenges facing homeless service systems. However, one downside to “start up” funding is that it is often a one-time source of support; sustainability over time is also important. HCFC should explore ways to build in mechanisms for sustaining new and innovative programs that hold promise but may not align neatly within existing models or frameworks.

Recommendation #3: Unsheltered homelessness requires a range of approaches

The variety of programs funded by jurisdictions highlights the fact that there is no panacea—no single model of intervention—for addressing unsheltered homelessness. People experiencing unsheltered homelessness represent a very broad and diverse segment of Californians, requiring a range of approaches and interventions.

Given the role that HEAP played in fostering a diversity of programs, HCFC should continue to promote a wider variety of approaches to addressing unsheltered homelessness. These investments into diverse programs and strategies should reflect the unique needs of each community informed by state and local data as well as stakeholder input. In addition, HCFC should continue incentivizing jurisdictions to explicitly consider racial equity across their services and housing landscape and continue to fund programs that directly work to ensure racial equity and cultural competence. This work includes, but is not limited to, analyzing where and with whom outreach and recruitment take place, the cultural competence of organizations and staff, and outcomes of individuals within and beyond programs.

Recommendation #4: Provide support for community engagement and education

Stakeholders across every jurisdiction interviewed for this report raised the issue of local community resistance as a major obstacle to developing new programs. In particular, place-based interventions like Safe Parking Programs and Navigation Centers—programs that explicitly attempt to help individuals within specific locations—can raise significant resistance among some constituents. Stakeholders noted that there is a persistent fear among some community members that these programs may “attract more homelessness” into an area. They noted that these sentiments have motivated decisions to either relocate programs to remote parts of a county or close down some projects altogether. It is telling that administrators in some communities initially interviewed for this report asked not to be identified for fear that “broadcasting” information about their programs may result in unwanted attention and continual resistance. Nonetheless, some stakeholders have been successful in mitigating some of this resistance by engaging in specific outreach to specific constituencies. This outreach has sometimes taken the form of organizing tours of new programs as well as inviting community members to participate as regular volunteers to a program. As discussed by some administrators, such efforts have helped get more “community buy-in” for a new program or model of service in an otherwise underserved community.

Given the successes some jurisdictions have had in addressing community concerns with new programs, HCFC should explore whether these community engagement strategies could be applied in other jurisdictions. This could take the form of Technical Assistance (TA) made available by HCFC specifically around issues of community engagement and education. HCFC should also consider ways to confront some of the misconceptions and stigma surrounding homelessness that underpin some of the community resistance to new homeless service programs. For example, social researchers have pointed to a persistent misperception in the U.S. that equates homelessness with “traveling strangers”—of people external to a community tapping into local resources otherwise designated for residents.

This common conflation of homelessness and transience has perpetuated what some researchers describe as the “magnet myth” of social services—the belief that increased expenditures on social services will attract more homeless individuals into that area. This portrayal of transient homelessness is inconsistent with various findings by researchers that the majority of people facing homelessness in the U.S. have been long-time residents of the regions in which they currently reside. Indeed, a recent analysis from the state’s new Homeless Data Integration System (HDIS) suggests that the vast majority of individuals accessing homeless services in California are from the same community in which they are receiving assistance. Consequently, HCFC should promote educational campaigns that challenge the mistaken belief that the majority of individuals facing homelessness are from other jurisdictions or moving from community to community in search of more services. Such efforts may help local administrators garner community support and acceptance for more place-based interventions in their communities.

Recommendation #5: Assess how housing affordability impacts effectiveness of programs

Another enduring challenge discussed in every community is how the lack of affordable housing ultimately affects the ability of programs to help individuals exiting unsheltered homelessness. As discussed in our previous report, rising housing costs continue to be one of the strongest predictors of community-level homelessness. But interviews conducted for this report also highlight the fact that the lack of affordable housing in California makes the exit from unsheltered homelessness more difficult and prolonged. As we heard from stakeholders across the state, many programs struggle to identify affordable housing options for their clients even in situations when an individual was able to secure stable employment and substantially increase their income.

Housing affordability is a critical issue to consider given the growing interest among Californians that state dollars be invested in effective homeless programs and solutions. Accordingly, it will be important for HCFC to track the performance and outcomes of programs and ensure that resources are invested toward interventions that have measurable impacts on reducing homelessness.

But it will also be important to interpret performance metrics within the context of the broader housing affordability crisis. Even intervention approaches like Rapid Rehousing that have a strong evidence base have also been shown to be less effective in the context of tight rental market conditions. While the landscape of housing in California remains unclear, particularly in the aftermath of the pandemic, the issue of housing affordability will continue to shape the outcomes and effectiveness of local homeless service systems.

Given the growing concern and desire to track performance measures of publicly funded homeless programs, HCFC should consider and study how these metrics should be interpreted within the broader context of current and changing housing/rental market conditions. In particular, HCFC should carefully assess how housing affordability in specific localities affects the overall effectiveness of different types of programs targeting groups facing temporary and episodic homelessness. Particularly for households that experienced homelessness due to a job loss, identifying affordable housing options after securing employment will be critical to ensuring stability.

Conclusion

The above recommendations highlight only a few of the lessons and insights that will be learned from the implementation of HEAP across California over time. While addressing the complex challenges of homelessness will require various policy efforts, this report calls attention to specific programs that address the immediate harms and risks among people who face unsheltered homelessness. In this regard, initiatives like HEAP and other new state funding programs have been critically important in allowing communities to invest in models that utilize multi-pronged approaches to the immediate and long-term needs associated with people who are living in unsheltered locations. In a forthcoming report in Fall 2021, the authors will explore how HEAP has similarly helped foster new programs and interventions that are addressing the unique challenges associated with youth homelessness. Though improved service models alone cannot be the solution to the complex reality of homelessness in California, HEAP funding provided the opportunity to develop and disseminate more integrative and innovative interventions.

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About HCFC, CHPPR and Authors

About the Homeless Coordinating & Financing Council

The Homeless Coordinating and Financing Council oversees the implementation of Housing First guidelines and regulations, and identifies resources, benefits, and services to prevent and end homelessness in California.

About the Center for Health Practice, Policy & Research

The Center for Health Practice, Policy & Research (CHPPR) at California State University, Sacramento is dedicated to impacting community health by promoting collaboration, interdisciplinary practice, and innovation to reduce health inequities across California.

Authors

Arturo Baiocchi, PhD
Associate Professor
Division of Social Work
Center for Health Practice, Policy & Research
California State University, Sacramento

Susanna Curry, PhD, MSW
Assistant Professor
Division of Social Work
Center for Health Practice, Policy & Research
California State University, Sacramento

Bob Erlenbush, PhD
Senior Research Analyst and Lecturer
Division of Social Work
California State University, Sacramento

Mallory VanMeeter, MS
PhD Student and Consultant
School of Human Ecology
University of Wisconsin, Madison

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Introduction

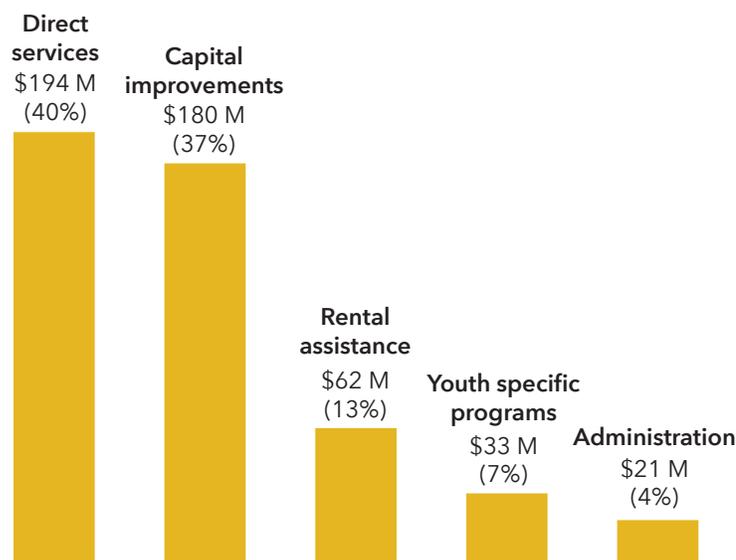
In response to the severe homelessness crisis in California, Senate Bill 850 established the Homeless Emergency Aid Program (HEAP) in 2018. HEAP allocated \$500 million in one-time block grants to localities across the state to address needs in their jurisdictions related to homelessness. These block grants were awarded to 43 Continuums of Care (CoCs)¹ and 11 large cities based on several factors including the Point-in-Time Count, which is the official estimate of homelessness periodically reported by jurisdictions.² The present report is the first in a series that explores emerging and promising models that communities funded using HEAP.

In the state’s Notice of Funding Availability for HEAP, jurisdictions were encouraged to “be creative” in their proposals and identify “programs that meet specific needs” in their respective communities. Eligible activities included direct services (e.g., street outreach, prevention services), rental assistance (e.g., one-time or temporary subsidies to help households remain housed), and capital improvements (e.g., building or rehabilitating Emergency Shelters or Permanent Supportive Housing units). At least 5% of the funds were required to be used for youth homelessness and there was a 5% cap on administrative costs. As the figure below shows, jurisdictions submitted

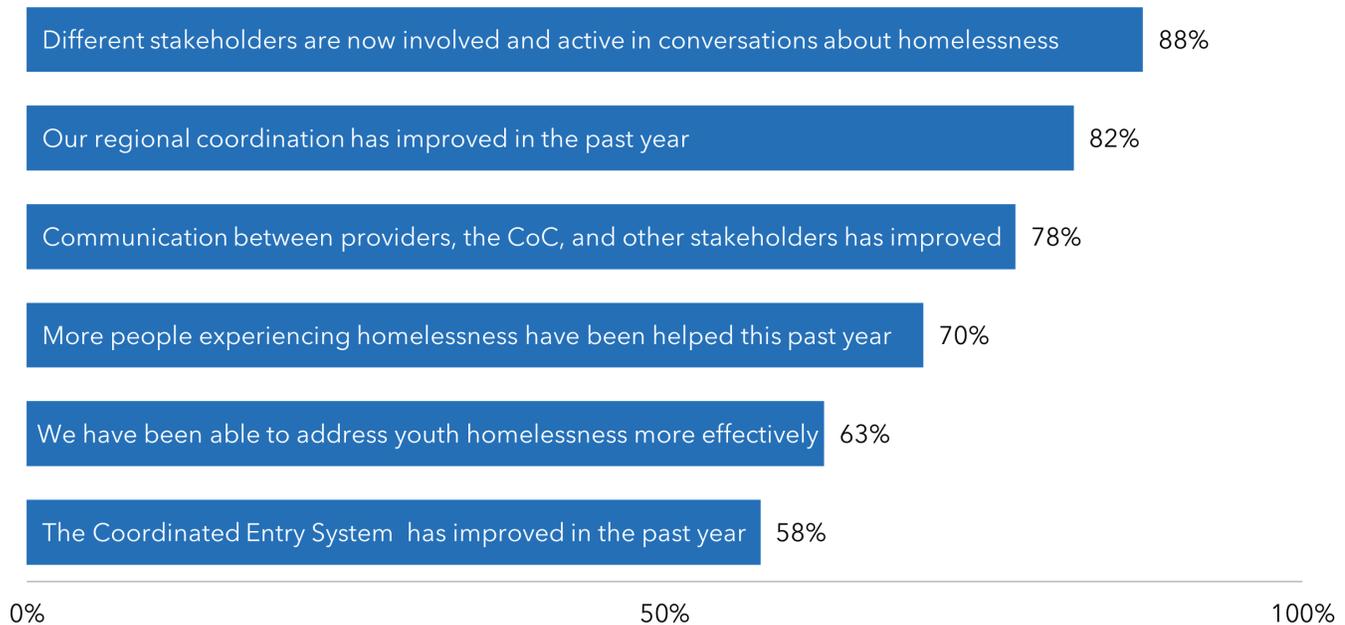
proposals that primarily focused on new capital improvements in their local homeless service systems (such as increasing shelter capacity) or expanded social services that directly assisted individuals experiencing homelessness.³ Recent reporting by the Homeless Coordinating and Financing Council (HCFC), which oversees HEAP and other new state funding, estimates that at the end of 2020 as many as 65,524 people had been assisted by HEAP-funded programs throughout the state.

In 2019, during the first year of HEAP’s implementation, HCFC commissioned faculty researchers at California State University, Sacramento to explore how jurisdictions were specifically leveraging HEAP funds to improve their local homeless service systems. Through in-depth interviews and surveys, the first HEAP evaluation report (published in April 2020) concluded that the flexibility of HEAP had allowed jurisdictions to fund various innovative efforts to substantially increase the capacity and scope of local programs, which was particularly pronounced in small and rural communities. Some communities used HEAP funding to invest in new intervention models, and particularly those that engaged in collaborations across service sectors (such as health care and social services). Other communities prioritized scaling up the capacity of traditional and existing programs in the community (such as increasing the capacity of shelters and rapid rehousing programs). Some communities similarly used HEAP funding to address specific bottlenecks in their service system, such as establishing a more responsive set of navigation services to help individuals more quickly access assistance. Though communities varied in their strategy to leverage the one-time HEAP funding, most nonetheless reported early successes in these different efforts by the end of 2019. As survey results showed at that time, most administrators managing HEAP funds in their local jurisdictions reported improvements in communication, coordination, and integration of their homeless service system, which they attributed to the expenditure of HEAP funds. Moreover, as shown in the chart, most administrators believed that more people facing homelessness had been helped in their community in the past year because of HEAP.

HEAP ALLOCATION BY CATEGORY



PERCENT OF COMMUNITIES THAT AGREE WITH HEAP OUTCOMES



This current report provides a closer look at the specific program models that were funded by HEAP, with a particular focus on interventions that were relatively new to a particular community and addressed the needs of people who are unsheltered (i.e., individuals who are not regularly staying in a shelter or transitional housing program and often face heightened risks of harm). Indeed, HEAP was intentionally designed to provide jurisdictions with flexible state funding to both expand the capacity of existing local programs and develop and experiment with new service models in response to local needs. After a review of HEAP documents including annual reports submitted in January 2021, and ongoing discussions with administrators and direct-service staff across California, we identified three models that illustrate emerging and promising interventions for addressing the complex challenges associated with unsheltered homelessness (a forthcoming report will explore HEAP-funded program models that specifically address youth homelessness). For this current report we interviewed approximately 30 representatives from Continuums of Care, city departments, program administrators, direct program staff, and clients across the state and particularly in three “spotlight” communities that strategically invested in these models. We also analyzed HEAP annual reports and other documents including government memos, program reports, and online news articles. For each of the innovative models that we identified—which included Safe Parking programs, Integrative Outreach Teams⁴, and Navigation Centers—we also reviewed the existing research literature on their implementation and impact.

Report Roadmap

In this report, we start by providing an overview of the challenge of unsheltered homelessness in California, to provide context for the need for programs that address this particular issue. We then introduce three illustrative models that utilize HEAP funds to address unsheltered homelessness in California: Safe Parking, Integrative Outreach Teams, and Navigation Centers and their core components. After each model is presented, we provide a “Spotlight” on one jurisdiction that is implementing this model. The intention is to provide readers with an in-depth understanding of the program model more generally, followed by a closer look at the role of HEAP in one specific jurisdiction’s development and implementation of the program model.



Context of Homelessness in California

According to the U.S. Department of Housing and Urban Development (HUD), approximately 162,000 Californians face homelessness each night—an estimate that represents approximately 25% of all homelessness in the U.S. This 2020 estimate is largely based on data collected in 2019, the last year in which most communities in California conducted a nightly count of individuals experiencing homelessness, and many researchers suspect that the rate of homelessness has since then increased.⁵ Indeed, prior to the pandemic, homelessness in California had been increasing since 2014. While communities across the state had been reporting notable declines in homelessness in the prior decade, those trends largely reversed by 2019.

As discussed in our previous report, the sharp increases in homelessness coincided with a growing affordability crisis in California as rising housing costs outpaced many household incomes. For example, as the below chart shows, the three metropolitan areas that have reported the largest increases in homelessness during the last five years have also reported the largest increases in median rents during this time.⁶

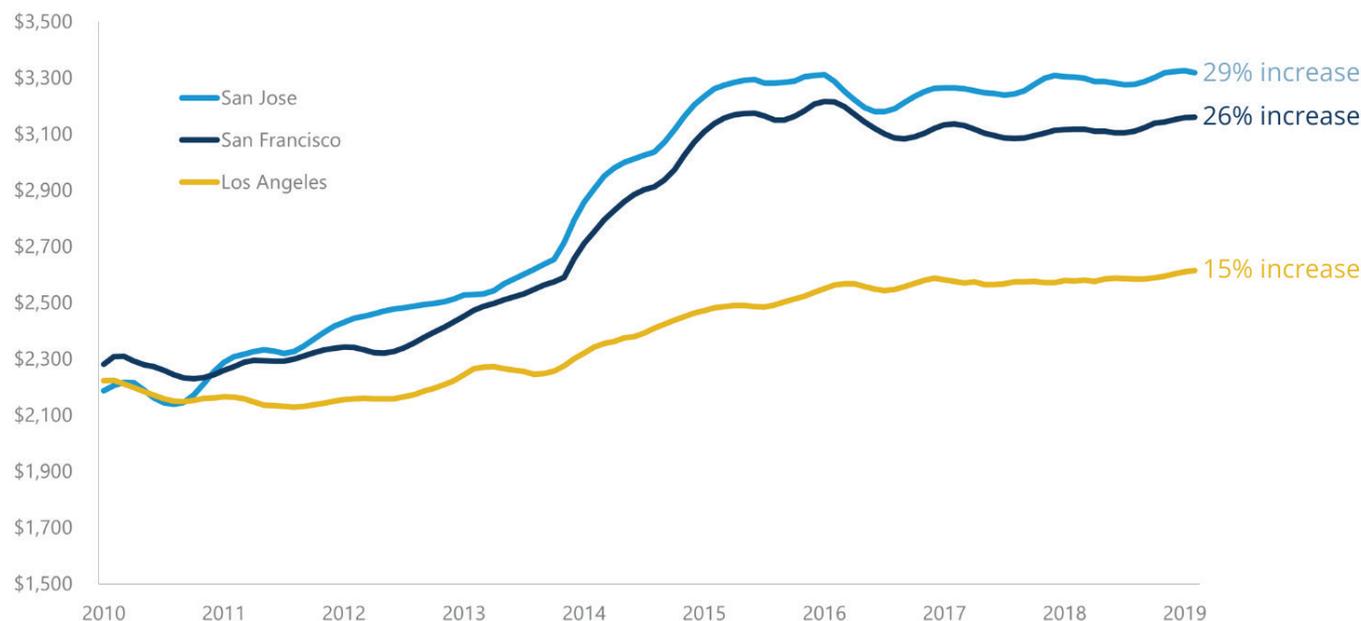
A number of recent research findings highlight the complex relationship between inequality, housing, and the growth of homelessness across the state.⁷

Before the pandemic, 2019 rental rates were on average 50% higher in California than in the rest of the country. This was reflective, in part, of the steady decline of low-cost rental units (e.g., units under \$1,000 a month) in most communities across the state during the last three decades.

Moreover, research suggests that the state's relatively high level of income inequality contributes to many households being perpetually "rent burdened;" an estimated 55% of renters were spending more than 30% of their total income on housing each month before the pandemic.⁸ Many of these households are often one financial setback from experiencing homelessness. Though the landscape of housing in California remains unclear, particularly in the aftermath of the pandemic, housing affordability will continue to shape the scope of homelessness faced by many communities.

Consideration of who is at most risk of experiencing homelessness also highlights how racial inequities across the state contribute to large disparities within the homeless population in California. It is notable, for example, that close to half of the state's homeless population identify as Black (40%) even though Black communities represent less than 7% of the total state population.⁹ Similarly, people who identify as Native Hawaiian, Asian Pacific Islander, American Indian, Alaska Native, or "Multiple Races" are also disproportionately represented among groups facing homelessness across the state.¹⁰

RISE IN MEDIAN RENT IN CALIFORNIA'S LARGEST HOUSING MARKETS, 2010 TO 2019



Large Unsheltered Homeless Population Disconnected from Services

California not only has the largest number of residents facing homelessness in the U.S., the state also has the largest number of individuals experiencing *unsheltered* homelessness on a nightly basis. Unsheltered homelessness refers to situations in which individuals are not regularly accessing shelters or transitional housing programs and are instead often sleeping in encampments, under underpasses, in their vehicles, or other locations not meant for human habitation. In contrast to many states in the U.S., the majority of individuals facing homelessness in California are unsheltered most nights; approximately 70% of homeless individuals in California were documented as sleeping outside of a shelter in 2019.¹¹ Indeed, the proportion of unsheltered to sheltered homelessness¹² in California has increased by 60% the last five years, and in most jurisdictions the proportion of unsheltered homelessness is now at least twice the national average. It is estimated that half of all people in the US experiencing unsheltered homelessness on any given night are in California.

The high rate of unsheltered homelessness in California may partly reflect the temperate climate of California (and some personal preference to avoid shelters during mild weather) but lacking shelter capacity in most communities is the more critical factor. In nearly every jurisdiction across the state, the number of individuals facing homelessness on any given night far exceeds the number of available emergency shelter beds. Generally, jurisdictions in California only have the capacity to shelter one

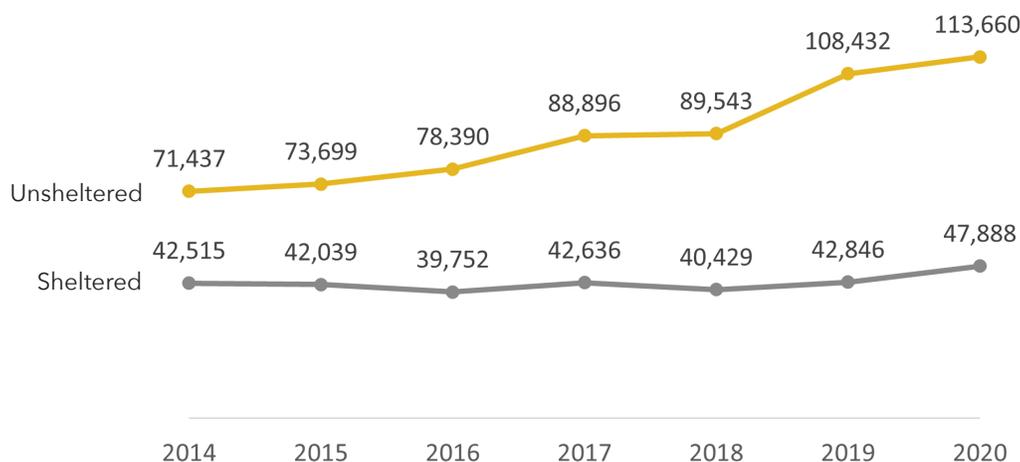
out of three individuals facing homelessness on any given night.¹³

While there is some debate as to whether increasing shelter capacity is the most appropriate policy response to homelessness, it is notable that many jurisdictions in California have leveraged HEAP to increase the number of shelter beds available in their community. Capital investments represented the largest expenditures of HEAP between 2019 and 2020 (approximate 42% of expenditures), much of which was associated with establishing new shelters or what could be described as hybrid shelter programs (like Interim or Transitional Housing, Bridge/Triage Shelters, or Navigation Centers).¹⁴ During 2019, the first year that communities received HEAP funds, the number of shelter beds increased by 23%.¹⁵ This is the largest single-year increase since the practice of tracking shelter capacity began. It should be noted that this increase occurred prior to the pandemic and Project RoomKey, which likely resulted in an even larger increase that will be reflected in the 2021 report (published later this year). However, shelter capacity in California is still insufficient given the need.

Addressing unsheltered homelessness is critically important in many communities given the clear link between the time people spend unsheltered and the elevated risks of harm that they face over time.

- Continual exposure to the elements is associated with various health conditions which worsen over time.¹⁶
- Sleeping on the streets heightens other risks of harm associated with assault and victimization.¹⁷

CALIFORNIA YEARLY HOMELESSNESS ESTIMATES, 2014-2020



From HUD (2020). *2007-2020 PIT Estimates by State*. <https://www.huduser.gov/portal/sites/default/files/xls/2007-2020-PIT-Estimates-by-state.xlsx>.

- Experiencing unsheltered homelessness can lead to increased interactions with law enforcement, including citation and arrest, a phenomenon referred to as the “criminalization of homelessness.”¹⁸
- Exiting homelessness can be a prolonged process as wait times to enter a housing program may vary anywhere from several months to several years.
- As individuals spend a longer period of time homeless they risk becoming chronically homeless, which can lead to a range of physical and mental health conditions.
- Encampments, while at times providing a sense of safety, privacy, and community among people living outdoors,¹⁹ can also be sources of tension in a community and can sometimes introduce public health concerns. These issues often lead to the involvement of law enforcement, sanitation and health departments, sometimes without support for individuals living in the encampments.

Many individuals who are unsheltered are disconnected from services and are sometimes labeled “service-resistant” without a true understanding of barriers to shelter or housing.²⁰ In fact, barriers to receiving help are often complex. Barriers to housing and other services include inability to bring pets to shelters or housing, difficulty obtaining identification documents, inability to bring possessions, inability to stay with a partner or other family member, long delays, poor communication and lack of transparency.²¹ People experiencing chronic homelessness may have also experienced barriers accessing services in the past, including challenges navigating the network of available programs, delay in service provision, and drop-offs in communication. Some individuals may have experienced trauma associated with prior service involvement, which can be misinterpreted as resistance to services. In any model addressing unsheltered homelessness, therefore, it is vital that these barriers be addressed.

Model Interventions to Address Unsheltered Homelessness

In this section of the report, we highlight three models that specifically address the needs of individuals who are unsheltered. Each of these models were funded either fully or partially by HEAP across regions of California. In each section, we draw on research literature and key informant interviews to describe the purpose of the model, core components of the model, and where HEAP funded this model. We then provide a spotlight of one community that has used HEAP funds to jump-start one of these models in their jurisdiction. We end with conclusions and recommendations regarding future state funding source development and priorities.

Model 1: The Safe Parking Solution

Reducing Harm and Increasing Exits From Homelessness

Safe Parking programs help reduce the immediate harms, dangers, and health risks associated with sleeping in a vehicle—a growing phenomenon across California. As the scope of unsheltered homelessness has steadily increased across the West Coast, some localities indicate that as many as 40% of their unsheltered households use vehicles for nighttime shelter.²² At their most basic level, safe parking programs provide these households—many times families with children—a safe and secure nightly location to sleep in their vehicles free from harassment, criminalization, as well as fear of assault.²³ These programs provide households sleeping in a vehicle while homeless a respite from the challenges of the street, access to restrooms and a meal, and a safe space from which to rebuild their financial resources to more quickly exit homelessness and transition into permanent housing.

While most safe parking programs provide access to various amenities, such as clean bathrooms and showers, they can also function as access points for some individuals to engage a broad range of resources and services that they would otherwise unlikely access. Because households sleeping in vehicles, and particularly families with children, might be reluctant to engage traditional shelter

programs or Navigation Centers,²⁴ safe parking programs represent an effective mechanism to engage a difficult-to-serve, and often invisible experience of homelessness. As the number of families with children facing homelessness has steadily increased in California, safe parking programs have helped many households exit more quickly, and safely, into housing.

As Figure 1 shows, HEAP has funded safe parking sites across nine jurisdictions (Continuums of Care or large cities) throughout California. In a survey conducted for this report, jurisdictions indicated that 14 parking sites were operational during the 2020 calendar, which collectively assisted 2,065 individuals sleeping in vehicles.²⁵ Program data provided by providers in 2020 suggests that these sites typically served between 15 to 30 households each month, and a significant percentage of these households were families with children. The average length of stay at a safe parking program was approximately 17 weeks though the period of time that households engaged these programs varied widely.

Figure 1: Counties with at least one HEAP-Funded Safe Parking Program



The Safe Parking Model: More than just Safe Parking

While safe parking programs have existed in some form for a number of years, the model is still evolving and relatively new to most communities. Consequently, there are various approaches to how localities and organizations have stood up a safe parking program in their respective communities. In some instances, there is a single organization that functions as the safe parking operator, coordinating agreements with lot owners while also providing the amenities and direct social services received by clients. In contrast, other programs are jointly coordinated between a city and/or county administration and various non-profit vendors implementing different components of a safe parking program (e.g., one vendor providing catering services, another providing case management). There is also variation in how safe parking programs are physically set up and located. Some programs are centralized and provide access to an entire parking lot to dozens of vehicles at a time. Other programs are scattered-site and offer a few designated parking spots across different lots across a community.²⁶ In some cases, individuals can stay at the site all day if desired and in other cases people can only stay at night. Some sites also allow RVs, while others just allow cars.²⁷

Across their different forms, safe parking programs can also offer a wide variety of amenities, wrap-around services and/or case management support, that serve to not only reduce the harms of homelessness but help households more quickly transition into housing. Despite these apparent differences, a general safe parking model can be conceptualized as consisting of three basic components: 1) safe, secure and accessible location, 2) enhanced amenities, and 3) case management and transitional services.

Safe, Secure and Accessible Location

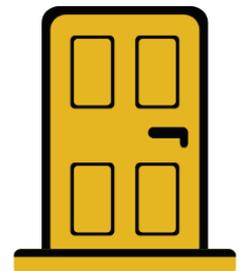
A recent meta-analysis of street victimization across the U.S. suggests that one in four individuals facing prolonged homelessness will experience an assault during the course of a year, and nearly half (40%) will be a victim of property theft.²⁸ Some organizations work directly with a municipality to temporarily repurpose a city parking lot during off-peak, underutilized, nighttime hours (e.g., 7pm-6am). Safe parking programs have also established relationships with

Safe, secure
& accessible
location



Enhanced
amenities

Case
management &
transitional
services



private organizations (such as a non-profit or faith-based organization) to use a specific lot property, either the entire lot or an underutilized portion, during designated days and times.²⁹

- While programs sometimes provide 24-hour access to their parking lot, many prefer to have an established window of time when a location is operational—often starting at night and closing early in the morning.³⁰
- Most programs require an enrollment process to ensure that continuing participants have a parking space each night during their tenure in the program, which can be several weeks or months at a time.
- Safe parking programs often provide access to a parking location that is well-lit and monitored, either by staff members or camera surveillance.

- Some programs provide additional security personnel to monitor the vehicles as well as entry points into the lot (i.e., if there are gates) though this is not universal across programs. Indeed, some programs intentionally try to avoid making clients feel overly monitored.
- Some provide signs that individuals can place on their dashboard so law enforcement knows the vehicle is part of the safe parking program.

Many safe parking programs are low-barrier, meaning that there are few restrictions to bar someone from accessing the program and its services. The goal is to make safe parking programs as accessible as possible to individuals who are most vulnerable.

“[Most] people think that safe parking is about maintaining people in their cars...but the number one goal for everyone [in my program] is really about getting them back into housing.”

Administrator of Dreams for Change

- Programs often strive to provide “welcoming access” to individuals with partners, children, pets, excessive property as well as vehicles lacking registration.³¹
- Most programs are also welcoming to individuals who may be struggling with a chemical addiction. While most prohibit the use of alcohol or drugs on the premises and may eventually ask an intoxicated person to leave the parking lot, there is also a harm reduction approach to how programs work with these individuals.

Enhanced Amenities

Most parking programs provide a number of basic and enhanced amenities to make the difficult challenges of homelessness more manageable. Some of these amenities are provided directly by the program

operator, but they can also reflect the various donations made by the broader community. Indeed, safe parking locations often become de-facto sites where community members drop-off donations (e.g., food and clothing) or volunteer their professional services (e.g., legal consultation, first aid medical services).

- While all centralized programs provide access to safe and clean bathrooms, some also provide regular access to showers. This can be facilitated with a mobile shower unit visiting the parking lot a few times a week, while other programs have invested in converting existing public bathrooms to have showers.
- Most programs provide free snack foods and water, which are often donated by an organization in the community. And some provide occasional meal services several times during the week that are either catered by a vendor or donated by a local restaurant.
- Some programs provide internet services via a secure Wi-Fi network, as well as make available charging stations for various electronics. Case workers also provide access to phones and help facilitate telecommunications with laptops and tablets.
- Because programs prohibit clients from running their cars while stationary, the use of vehicle heaters or other climate control can often drain batteries. Consequently, most safe parking programs provide clients extra blankets, jackets, as well as tarps that can help maintain the temperature within vehicles.

Case Management and Transitional Services

All Safe Parking programs are designed to address the immediate challenges associated with homelessness and most also strive to help clients identify long-term solutions to their particular housing predicament.

In other words, safe parking programs seek to both reduce the risks of living in one’s vehicle but also help clients make progress in their exit from homelessness altogether. As one program administrator described, “most people think that safe parking is about maintaining people in their cars...but the number one goal for everyone (in my program) is really about getting them back into housing.”

Consequently, most safe parking programs are staffed each night by a case manager, sometimes described as a case worker or navigator, that facilitates initial assessments during the time of enrollment. This staff member, who sometimes has a formal background and training in social work, will utilize a set of evidence-based engagement strategies to work with clients to more effectively identify potential “pathways to housing.”

- Many safe parking programs facilitate a formal intake-assessment process in which the specific challenges and circumstances of a client are evaluated. These often include using a standardized housing assessment associated with a community’s broader Coordinated Entry System—which can automatically enroll clients into a community queue for housing programs affiliated with the local Continuum of Care (CoC).
- Some programs use a broader set of assessment tools that inventory the challenges faced by clients but also their strengths and assets. Some programs use these assessments to establish diversion goals—helping some clients, typically those with fewer needs, self-resolve their homelessness without accessing a formal housing program.

- Case managers often work closely with clients to identify individualized goals and milestones during this intake process, which form the basis of the occasional “follow-ups” they perform with each client. This can mean helping clients make progress on goals to identify employment opportunities, enroll in public assistance, and engage with other service providers associated with mental health and/or substance use.
- Case managers sometimes provide financial and budget planning to help clients more efficiently manage their income. Case managers can also help clients resolve issues in their credit record.
- Case managers also function as a referral source to identify potential resources in the community that individuals could leverage to address their particular needs. These community referrals are ongoing in some cases, where the client might have many needs, or they can be “one-off” if the person just needs some general assistance identifying a specific program.

Community Spotlight: San Diego

San Diego County is located in the southwestern part of the state of California and borders Mexico. It is the second most populous county in the state. Rents and home values are high in San Diego County as they are across most of Southern California; median gross rent between 2015-2019 was \$1,658 and the median home value was \$563,700.³² The 2020 Point-in-Time Count in San Diego County found 7,638 individuals were experiencing homelessness on any given night.³³ Just over half (51.9%) were unsheltered and just under 20% were chronically homeless. Within the unsheltered population, 71% were White, 21% Black/African American, and 28% identified as Hispanic. Just as in other areas across the state, Black and Native American/American Indian individuals are overrepresented in the homeless population in San Diego.



Program Spotlight: Dreams for Change

San Diego is one region that has used HEAP funding to increase outreach to individuals and households using their vehicles for shelter. In 2018, the regional CoC (the San Diego Regional Task Force on the Homeless) identified unsheltered homelessness, specifically individuals living in cars or other vehicles, as one of the issues that members of the community wanted to better address with flexible state funding—particularly since state and federal funding for safe parking programs are largely non-existent. The HEAP application submitted by San Diego identified two non-profit organizations to expand their operations of three safe parking locations in the region, which had been at that point only supported with small local grants and some municipal funding. One of these organizations, Dreams for Change, received approximately \$160,000 to develop and operate a new safe parking location in the city limits of San Diego. Researchers for this report conducted a number of interviews with staff at this location as well as with current clients of the program.

Dreams for Change (“Dreams”) was founded during the aftermath of the 2008 economic crisis, when San Diego was grappling with a surge of new people and families experiencing homelessness, particularly many people who were homeless for the first time and who had become unemployed during the economic downturn. According to the founding director of Dreams, Dr. Teresa Smith, many service providers were at this time noticing a reluctance among people who were newly homeless to use emergency shelters and that they instead preferred to stay in their own vehicles as long as possible. While some people disliked the idea of accessing any program associated with “the stigma of homelessness,” most were more concerned about their vehicles getting vandalized, broken into, or even stolen. Moreover, a vehicle may not only represent a person’s last remaining asset of discernible value, but it often represents their most viable path out of homelessness because of its direct connection to employment. Indeed, many of these households were also still “partially connected” to the labor force—most were reapplying for jobs and some had been able to find part-time employment (particularly as the gig ‘app-ride-share’ economy grew in the ensuing years).

Accordingly, the safe parking model grew out of what founder Dr. Smith describes as an “asset-building” perspective to help this particular segment

of the population of people living in their vehicles avoid extended homelessness. The vision was to provide people sleeping in their vehicles a legal and safe location to successfully, and more quickly, exit homelessness while retaining a connection to the labor market. As she elaborated,

Because public transportation is so limited (here in Southern California) having access to a car means having access to a job or at least the possibility of a job. And helping someone maintain their vehicle is one of the key ways to keep someone connected to a job and avoid ‘street homelessness.’

Dr. Smith collaborated with faculty and students from a local law school and school of social work to ensure her new program model would adhere to best practices as well as legal ordinances. The goal was to design a program that could transform an otherwise criminalized survival strategy taken by many experiencing homelessness—of sleeping in one’s vehicle for shelter—and make it a safer and more asset-building practice.

After a decade of successfully operating two safe parking sites in San Diego, Dreams was allocated new HEAP funding in 2019 to create a new safe parking program in the Encanto neighborhood. They strategically selected the Encanto site due to its nearby parks, gas stations, access to public transportation, as well as relative proximity to major highway entrances. Nonetheless, the parking lot was not directly adjacent to a residential area—which meant the site avoided some of the potential neighborhood resistance that safe parking programs at times face.³⁴ The resulting site today provides spaces for approximately 25 vehicles each night and can accommodate both cars and RVs. The lot opens every night at 6pm at which time a mix of individuals and families living in cars and RVs drive up to their designated lots.

Interviews with both staff and clients of this new Dreams site highlighted the importance that safe parking programs be “strategically located” in the community and in proximity to community resources. Half of the respondents interviewed were currently working as a part-time worker in the gig economy (driving for Uber, Lyft, and Postmates) and discussed the convenience of the location. “It’s easy to get back here every night,” discussed one client. “I don’t use up a lot of gas driving an hour away just to find a place to sleep.”

Every client discussed that they had at least some familiarity with the area of the new Dreams location and some had even lived nearby. "It's important to help people keep connected to their communities," stressed the director, "And this is one of the shortcomings of some (safe parking) programs (in other regions)—the parking lots are located far away from where people used to live or work—so they are really requiring people to disconnect from what they used to know."

Clients also discussed that having a legal place to sleep—free from concern of violating various ordinances related to parking restrictions or vehicle habitation—was paramount. Every client discussed their fear of having their vehicles impounded due to a parking violation (and unpaid parking tickets) and the severe financial setback that this would represent to their pathway out of homelessness. As one client discussed, "I would not only lose all my stuff but also my income if my car got towed; I wouldn't be able to work anymore." Another client aptly described their time in the program as "moments in the day" in which he doesn't have "to pretend to be invisible." Accordingly, his time in the lot is a time in which he can "really rest and reset"—moments of respite and recalibration that in effect allow him to keep working during the day as an Uber driver.

Beyond decriminalizing the reality of living in one's vehicle, clients noted that the program also reduces some of the inherent risks and potential harms associated with sleeping in one's car. Because safe parking programs allow people staying in their cars to come "out of hiding," as described by one respondent, they no longer need to resort to parking in secluded and isolated locations that might otherwise put them at risk of being assaulted or burglarized.³⁵ As respondents described, many were unable to fully sleep in their vehicles until they had entered the safe parking program. A 65-year-old grandmother who has been living in her car for the past year describes that her first few weeks homeless was "a blur" because she "barely slept at all" during that time. "A couple of times I would suddenly wake up to someone trying to open the door—it was terrifying," she described. "I just never trusted the places that I found to park at night."



Photo courtesy of Dreams for Change

The ability to safely and securely rest was also discussed in terms of helping people move "beyond survival mode" and onto a more productive and proactive orientation of exiting from homelessness altogether. As one respondent explained, "I don't look homeless anymore even if I sleep in my car—I don't have to worry about where to shower. I exercise regularly, and now I work five days a week." As the director of the program similarly described, "A big misconception is that we're a program for nomadic beach people who want to live in their vans...we're really not." As she elaborated,

Everyone here has to be trying to get into housing, that's the number one goal for everyone. But they also need a safe place while they work on that because it can sometimes take a long time... We want to help people identify ways back to permanent housing, whether that means finding an affordable apartment, or a new job, or enrolling in a supportive housing program.

According to many respondents, amenities provided by Dreams also help them alleviate some of the “daily indignities” and shame of homelessness. One woman highlighted the critical importance of having access to bathrooms in particular,

You might not think it, but the biggest challenge I have during the day is finding a bathroom that I can go to. I have diabetes and so...I spend a lot of the time (during the day) searching for a bathroom. But since COVID there are almost no public bathrooms at all. And most businesses will just say that they don't have bathrooms anymore, even if you buy something. So just being able to go to a bathroom that you know will be clean and safe is important.

Another male respondent also told us, “I literally spend the whole day holding it. It can actually be painful at times...so yea, the bathrooms are really a big deal.”

While clients of the programs also discussed some of the shortcomings of the amenities provided—that the Wi-Fi was not always reliable, that the food varied in quality, and that restrooms were frequently occupied during busy periods—all nonetheless also expressed appreciation of these free resources. “You can't be picky in this situation,” discussed one respondent as he described the food. “Most of the time the food is really ‘restaurant-quality’ that you're getting for free, which means you can save your money.” As all of the clients similarly expressed, these various amenities, while imperfect at times, allowed them to save their resources and represented one “less expense” that they could defray. “You have to really think about where your money is going each day,” stated another respondent at the parking lot. “You need to be careful and budget how much money you spend on food or your medication or just a water bottle to drink.”

As noted previously, Dreams also incorporates case management services as an integral part of their work. Because most clients in the Dreams program are experiencing temporary or episodic forms of homelessness, many exit after a few months of building up their income and reserves. Accordingly, most of these clients only require some “general emotional support,” reported one staff member, of “updating a resumé” or navigating the paperwork for temporary unemployment benefits or public assistance from the county (e.g., benefits card for CalFRESH “food stamps”). Some clients also benefit

from the budgeting and “financial literacy” services provided at the parking lot, which can resemble a nightly workshop in which clients learn the basics of setting a budget and creating a saving strategy.

In contrast, staff also report that other clients (approximately a third) face more difficult and complex circumstances that require more assistance. Some of these individuals may have been homeless for quite some time, and have lived in their vehicles for multiple years. These people often have been chronically homeless due to a disability. For many people with disabilities and/or who have experienced chronic homelessness the only viable outcome of homelessness is exit to a supportive housing program—in which the case manager can help clients enroll but which will likely take many months to materialize. “Most of these clients will need supportive housing for the rest of their lives,” described one staff member, “but the wait times for these programs can be very long and sometimes we have to help people for an extended period of time.”

“Everyone here has to be trying to get into housing, that's the number one goal for everyone. But they also need a safe place while they work on that because it can sometimes take a long time.”

Program Director of Dreams for Change

In this regard, HEAP funding has been critical in terms of providing Dreams more bandwidth to evolve over time and establish more extensive wrap-around services to help clients successfully transition to these programs. This has included establishing linkages with county social services and behavioral health but also creating a new work training program for some clients who want to re-engage with the labor force. In part because Dreams had previously relied on small local grants and some local municipal funding, HEAP provided the program some much needed stability and runaway to expand beyond the “typical safe parking program,” explained one staff member. “We provide much more than just a safe place to sleep,” she explained. “For some people we can be that connection piece—back to a job, housing, and the community.”

Model 2: Integrative Outreach Solutions

Bringing Services to the Client

Integrative street outreach teams help individuals living outside quickly access a range of community resources associated with housing, health, behavioral health, chemical addiction, as well as general public services. The emphasis is on increasing the “street access” to a set of otherwise disjointed service systems. Instead of putting the onus on people experiencing homelessness to navigate these often “siloed systems” by themselves, outreach teams become a functional “front door” or gateway to different programs and services. Individuals with complex needs are more likely to be successful engaging interventions that address their needs, and in turn, be more successful transitioning out of homelessness.

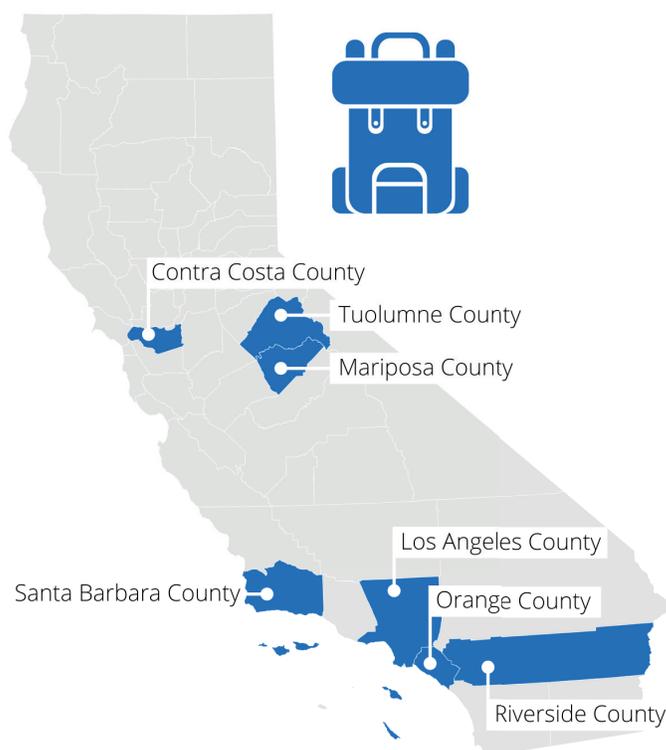
Street outreach is a relatively broad and common intervention. Not surprisingly, many jurisdictions used HEAP to fund some iteration of the outreach model; 89 outreach programs throughout California were funded by HEAP. However, seven (7) jurisdictions specifically reported leveraging HEAP to fund a more comprehensive version of the intervention that we describe here as an integrative outreach model—a model of outreach that intentionally integrates team members from multiple disciplines and agencies. In total eleven (11) integrative outreach programs were funded by HEAP. In the 2020 calendar year, these programs engaged a total of 2,879 individuals experiencing unsheltered homelessness (an average of 186 individuals per program).

The Integrative Outreach Model: Beyond a Piecemeal Approach

While definitions and particular models vary, street outreach generally refers to members of a service team going to specific locations in the community and building relationships with people experiencing homelessness. Street outreach stresses meeting clients where they are at, literally, and on their own terms, with the goal of establishing trust, rapport and, ultimately, a connection to services.

While forms of street outreach have long been an intervention deployed by various groups working with people experiencing homelessness (from homeless service providers, street medicine teams, law enforcement, and even community groups), more recently there have been efforts to improve the integration of the model.³⁶ One recurring criticism of street outreach, in particular, is that there can often be too many different outreach teams deployed in the same area, associated with a cadre of disconnected services.³⁷ While well intentioned, the deployment of different teams, each with a narrow focus of interventions, can result in a piecemeal approach to services. For individuals who have multiple needs (such as co-occurring physical and mental health issues), traditional outreach can feel like a limited and inconsistent form of support. Given that people who have experienced prolonged periods of homelessness often face interconnected challenges (i.e., housing insecurity, health and mental health challenges, and substance use), there is a growing consensus that street outreach interventions should provide more comprehensive and connected services and support. Though there have been a number of studies and reports on street outreach models,³⁸ and more recently on multidisciplinary teams and co-responder models, here we discuss an emerging street outreach strategy observed in some communities funded by HEAP that we call an *integrative street outreach model*.

Figure 2: Counties with at least one HEAP-Funded Street Outreach Program



As we discuss below, this strategy builds on a general street outreach model and integrates three general components: 1) targeted deployment, 2) active and continued engagement, and 3) integrative coordination.

Targeted Deployment

Most street outreach teams are place-based interventions, meaning that outreach workers are deployed to specific geographic locations known in the community as places where people experiencing homelessness reside or where encampments are found. Sometimes deployments to these locations are based on community reports, such as frequent “calls for service” from the community related to an encampment (i.e., tracking 311 calls), or even dispatch data related to emergency responses (e.g., tracking of 911 calls to a particular encampment site). Other times, deployment of outreach teams is

informed by community stakeholders such as local businesses, homeless service providers, as well as local public officials responding to constituent concerns.

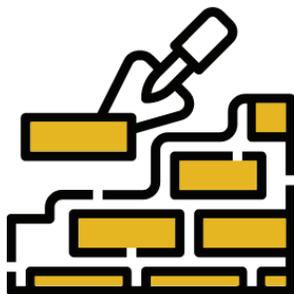
Regardless of how a deployment area is identified, the goal is for outreach teams to establish a regular presence at these locations. This means regularly visiting an area—sometimes several times a week—and becoming familiar with the specific individuals and groups that may reside or spend time in this part of the community. The assumption is that over time, individuals will become familiar with members of the outreach team and become accustomed to their regular visits. Integrative outreach teams in particular are often deployed to entrenched encampments (encampments that have existed for some time) or to locations where specific individuals with complex needs have been identified. Integrative teams sometimes visit these locations in pairs—such as nurse and a social worker—or they may attempt to establish a consistent schedule of when particular members of a team will visit a site (such as having designated days during the week when the healthcare team members visit an encampment). Sometimes these pairs are accompanied by law enforcement if the site is remote.

Targeted deployment



Active & continued engagement

Integrative coordination



Active and Continued Engagement

Whether outreach deployment occurs in the context of a rural location, downtown area, commercial district, or a city park, most outreach efforts attempt to establish rapport and trust with individuals through continual engagement over time. Accordingly, most street outreach programs, particularly those implemented by social service or healthcare organizations, adopt a *harm reduction approach* to working with individuals. This generally means taking a non-judgmental, accepting stance to a person’s various challenges, behaviors and life decisions, while at the same time helping people self-identify goals and strategies to reduce harms in their lives.

- Some outreach programs also train their staff on *motivational interviewing* techniques, which seek to empower individuals to gradually make difficult decisions in their lives. Many programs similarly train their staff to be *trauma-informed* in their engagement with clients, which means being attentive to clients’ past and current traumas.

- A guiding principle underlying these engagement approaches is that individuals experiencing homelessness may face high levels of stigma, as well as feel guilt and shame about their situation. Many people may have also experienced significant trauma and have been re-traumatized by inconsistent sources of support in the past or negative interactions with law enforcement. Accordingly, outreach teams may face hesitancy to engage with offers to help as well as be distrustful of service providers, if engagement is not implemented compassionately and at a person's own pace.
- One way that street outreach teams attempt to overcome these challenges is to become a reliable and dependable source of support for their clients. This means that visits are consistent and offers of help are realistic and tied to tangible support that the team can reasonably provide. Consistent with the practice of trauma-informed care, outreach workers are typically trained to be open, honest, and transparent in their interactions with clients.
- Outreach staff will also work with clients to ensure that they have the appropriate documentation in place to enter the specific housing program—to become “document ready.” This entails being in possession of appropriate identification (e.g., reapplying for a license at the DMV) but also verifying an individual's homelessness and possible disability statuses (i.e., having a provider fill out a verification form). This process to become document ready can take several days or weeks depending on an individual's situation and their level of regular contact with their outreach worker.

Outreach engagement will over time focus on helping clients identify a pathway out of homelessness. Indeed, outreach is sometimes described as an educational activity, in terms of providing individuals information about programs and services with which they might not otherwise be familiar. And because these pathways out of homelessness sometimes involve entry into a Continuum of Care (CoC) HUD-funded housing program, outreach activities can be geared toward getting clients prepared for their enrollment into these specialized programs.

- Outreach teams connected to the local CoC will often conduct a formal housing assessment during the early phase of the engagement process. This entails administering a standardized housing assessment used by the local CoC (one common tool used by many CoCs in California is the *VI-SPDAT; the Vulnerability Index - Service Prioritization Decision Assistance Tool*) which is often deployed electronically on a smartphone or tablet. These assessments identify the level of housing support needed by a client (often quantified by a threshold score) and can automatically enroll the individual into the community's queue for HUD-funded programs (i.e., the local Coordinated Entry System).

Because placement into a CoC program may be a prolonged process, outreach workers also help individuals safely “bridge” their time while waiting for their placement into housing. This can entail identifying and mitigating sources of harm in a client's life to help ensure a successful transition into housing. Integrative outreach teams staffed by various multidisciplinary service providers are an advantage in this regard, as they will be connected to a wide variety of resources and programs that could be leveraged to address particular situations faced by a client. These sustained engagements mean that such teams naturally have a more diverse toolkit from which to address client needs.

Sometimes described as a “whatever it takes approach,” integrative teams will implement various and flexible approaches to assist individuals address various challenges.

Integrative Coordination

As discussed above, one criticism of street outreach is that the intervention is often deployed with a narrow focus and associated with a limited set of services and supports. For example, many CoCs deploy some form of street outreach in their respective communities but many of these “street navigator” programs focus primarily, if not exclusively, on a client's housing needs (i.e., enrolling clients into the Coordinated Entry System and helping them become document ready).

While housing insecurity may be a core issue underpinning the various challenges faced by a person experiencing unsheltered homelessness, other issues may nonetheless need to be addressed more immediately, particularly if individuals face long wait times to transition into a housing program. These issues may pertain to untreated medical issues, challenges associated with substance use, an acute mental health episode, enrolling in general assistance or Medi-Cal, or other pressing needs.

- While housing navigators may have some familiarity with some of the non-housing programs and community resources that could be leveraged in these circumstances, their expertise in these various service systems tend to be limited. Consequently, a number of studies find that housing navigators tend to make few effective referral linkages to these other services.³⁹

To avoid a piecemeal approach to street outreach, a number of communities and service systems have embraced a more interdisciplinary integration of their outreach interventions with individuals experiencing homelessness.

To avoid a piecemeal approach to street outreach, a number of communities and service systems have embraced a more interdisciplinary integration of their outreach interventions with individuals experiencing homelessness. Though programs and communities have framed these joint-ventures differently (i.e., interdisciplinary or multidisciplinary teams, co-responder crisis teams, integrated outreach) generally these interventions integrate staff from multiple service systems (healthcare, mental health, housing, substance-use, legal assistance, as well as law enforcement). The goal is that integrative outreach teams have more collective expertise, experience, and social capital to leverage on behalf of clients and their various referral needs. Accordingly, integrative teams are not only able to help clients access a wider set of referral services, but members

are also more likely to be able to directly address many of the immediate needs of clients themselves.

- Most integrative outreach teams include members with expertise in mental health, physical health, substance abuse, peers with lived experience, and generalist homeless case management.
- The medical members of these teams will often deliver first aid and in particular will provide wound care to unsheltered individuals—treating serious open and infected wounds which can be a common condition faced by unsheltered individuals.
- Medical staff members will also advise on prescription use and will even deliver medication from a pharmacy for individuals to address chronic health conditions such as diabetes and heart disease. Some will also provide new prescriptions if needed as well as schedule a clinic appointment for an individual.

The deployment of these integrative teams can vary. Some will send teams of outreach staff together to an encampment, such as pairing a healthcare provider and housing navigator. While other integrative teams work in parallel efforts but are not deployed at the same time—in these situations different members of the team may be deployed to an encampment site at different times of the week. Nonetheless, integrative outreach teams also convene regular case conferencing meetings on a monthly or weekly basis to ensure that interventions, referrals, and engagement strategies are being coordinated in an effective manner.

Program Spotlight: Riverside County Continuum of Care

The Riverside County CoC has invested substantial HEAP funds toward integrative outreach efforts to various encampments throughout the county. In 2019 the CoC directed funds to an outreach organization already active in Riverside County called the Social Work Action Group (SWAG). With this additional funding, SWAG established a new integrative team that brought together an outreach specialist, a nurse practitioner, and a Certified Alcohol and Drug Counselor.⁴⁰ This new team, called the Homeless Encampment Action Team (HEAT), currently engages encampments throughout the central and southeast regions of Riverside County.⁴¹ Occasionally, a Community Services Sheriff Deputy is also part of the team when conducting outreach in remote encampments.

HEAT sometimes functions as a mobile health clinic that provides immediate and ongoing healthcare to individuals living in encampments. Because of the multidisciplinary team of providers, HEAT can also address ongoing behavioral health and substance use challenges. But the team also provides case management, housing assistance, and helps “problem solve” various challenges clients may be facing. As staff explained, while each member of the team has their own area of expertise, situations encountered at the encampment sometimes require them to assume multiple roles. For example, the nurse practitioner or substance use counselor sometimes helps outreach workers conduct intake and provide general case management as needed.

The HEAT team operates from a harm reduction perspective, seeking to work with individuals they encounter and address their immediate needs. Outreach is targeted to adults who are both living outside and meet the definition of chronically homeless, and they occasionally serve youth and families. Many of the individuals encountered by HEAT team staff are experiencing major behavioral health issues and acute health needs—most often skin infections, feet issues, respiratory issues, complications related to Hepatitis C and HIV, mental illness, and issues related to use of heroin and methamphetamine. The nurse practitioner is able to administer Suboxone, something that would normally involve a visit to an emergency room.

Community Spotlight: Riverside County

Riverside County is the fourth most populous county in California. In this spotlight, we will be discussing a HEAP-funded program that serves three key communities within Riverside County: Cities of Lake Elsinore, Wildomar, and Perris. Overall, these three communities are generally lower-income communities with a per capita income well below the Californian per capita income of \$37,000.⁴² The communities are very similar with about two thirds of the households being owner-occupied and one third being renters. These communities are disproportionately people of color, either Hispanic or Black with relatively high poverty rates and higher unemployment rates than the national rate.

According to the 2019 Point-in-Time count of homelessness, 2,811 individuals were experiencing homelessness in Riverside County.⁴³ Consistent with trends across the state, more than 72% of this population are unsheltered. The County also estimates that approximately 25% of the homeless population meet the definition of chronically homeless. Chronic substance abuse and untreated mental health conditions are significant issues for the people experiencing homelessness in California (44% and 42% respectively), as they are in California and the nation.



When describing their experience going to encampments one staff member said,

I make house calls. Last night I got a call from one of my clients who was crying because he had a huge abscess on his arm...I came in the middle of the night to check on him. I wrote up some prescriptions and then took him to the pharmacy and then back to his camp.

Besides this on-the-ground and immediate response to acute physical and mental health crises, members of the team focus on "building trust and building a therapeutic relationship" with individuals who may not have had trusting relationships in similar encounters in the past. For example, one client who is now in housing highlighted the importance of ongoing trust-building from HEAT team staff,

At first I was like, 'What's going on with these guys, they're just coming around'... I wanted the help, but then I wasn't ready for the help. I was still active in my addiction, so...I was like, 'No, no, you guys aren't gonna help me,' this and that you know. But it's crazy how they came after me, like I accepted their help after like two years of them constantly coming out like every month, like chasing me down, you know. I mean it feels good. Like, it didn't then, but now it feels good because, like everybody else gives up on you.

Once trust is established, the HEAT team can also provide housing support through other SWAG programs, some of which are also funded through HEAP. Options include housing navigation to search for an affordable unit, or immediate crisis stabilization housing such as through Martha's Village providing nine recuperative care beds for individuals who do not need hospitalization but who need to heal from an injury or illness. Further, HEAT staff can also immediately place someone into one of the six hotel rooms that they hold for their clients on an ongoing basis, or one of eight rooms at a converted convent, referred to as House LE/Wildomar. These rooms are also funded by HEAP. Program leadership explained

why HEAP funding was key to the ability to keep the hotel rooms open for clients on an as-needed basis,

I don't know any other program or funder [besides HEAP] that would say, 'You know, I am going to pay you for 100% of the property but expect it to be at 90% capacity sometimes.' This was that open-ended, flexible funding that we needed to secure the property up front. This absolutely would not have been possible without the flexibility of HEAP funding.

According to program administrators, HEAP funding was instrumental in making the HEAT team model of ongoing engagement and immediate crisis intervention possible. They said, "It's all timing. When someone's willing and wanting to accept a level of help we need to capitalize." According to the service data reported by SWAG, HEAT has engaged a total 2,669 people experiencing homelessness across nine locations during the past two years. Leveraging HEAP funds to increase the scope of the services that the outreach team could provide individuals, the intervention has helped over a thousand of these individuals exit homelessness since 2019.

Photo courtesy of SWAG



Model 3: Navigation Center

A Centered Solution Bridging Shelter and Services

While many unsheltered individuals are helped through various street outreach interventions, as described above, for some the transition into permanent housing can be a difficult process to navigate without additional support. This can be particularly hard because while waiting for a housing unit they may face many challenges that could derail their plans to exit homelessness. Accordingly, Navigation Centers support a more structured, service-rich environment from which individuals can transition into permanent housing. In function, Navigation Centers are a hybrid between a traditional shelter and a service referral center; they provide unsheltered individuals immediate respite from the elements but according to several administrators, they are also designed to be “more forward looking,” meaning that they address immediate needs and permanent housing needs to assist individuals in exiting homelessness.

Figure 3 shows the counties, including 23 jurisdictions (cities and CoCs), where HEAP funds were used to develop and/or operate a Navigation Center. In a survey conducted for this report, jurisdictions indicated that 122 Navigational Centers were operational across the state during the 2020 calendar year and served an estimated 16,6637 unsheltered individuals. It should be noted, however, that communities used the term Navigational Center more broadly in our interviews than was the case with the two other models discussed in this report. And so it is possible that not all 122 Navigation Centers align with our description of the model below as a hybrid shelter-service center. This may be reflected in the varying number of individuals that were reported as served by Navigation Centers across communities; for example, programs reported assisting between 40 to 260 individuals in 2020 (average of 152 clients per year).

The Navigation Center Model

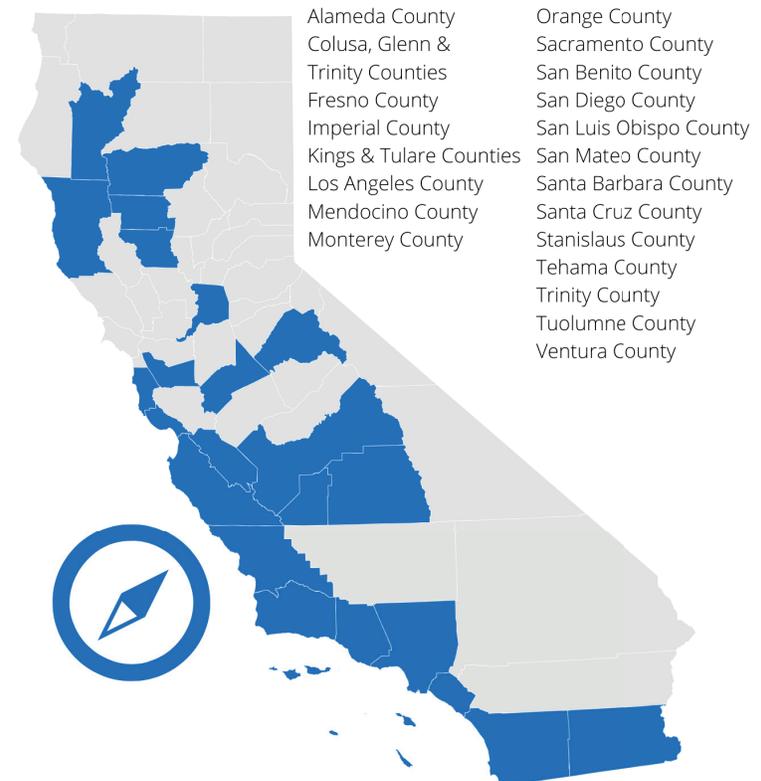
Navigation Centers can be thought of as temporary shelters that also offer a rich set of site-based services to a targeted group of people who are experiencing unsheltered homelessness. It is an intentional concentration of co-located services provided in the context of a small-to-medium size transitional shelter. This emerging center model of co-located shelter-navigation services combines

aspects from other housing interventions, such as low-barrier emergency shelters, triage centers, and site-based navigation services. As we elaborate below, Navigation Centers are low-barrier, meaning that they have few restrictions to entry.⁴⁴ As the name implies, Navigation Centers help individuals identify and navigate their own pathway out of homelessness but also provide safe space in which to make this transition. Accordingly, Navigation Centers funded by HEAP can be conceptualized as having three core components that jointly support this goal: 1) street outreach and recruitment; 2) low-barrier shelter; 3) site-based navigation services.

Street Outreach & Recruitment

Most Navigation Centers operate by a closed referral system, meaning that access and enrollment only occurs by a designated outreach team. Some Navigation Centers are integrated with various Street Outreach Teams, sometimes operated by different service providers, that are already active in the community and engaging with individuals currently living in encampments or otherwise unsheltered.

Figure 2: Counties with at least one HEAP-Funded Navigation Center



Street outreach & recruitment



Low-barrier shelter

Site-based navigation services



Outreach Teams are typically deployed to pre-identified geographic areas in the community associated with entrenched encampments or a high volume of service calls from the community. Outreach to these areas involves ongoing relationship building with people living in encampments and coordination with the broader CoC cadre of services and programs. But while Outreach Teams will work with a range of clients with a variety of needs, if they are integrated with a Navigation Center they will also function as a direct referral source for specific clients who match a pre-identified set of criteria or a specific client profile. In this context, the goal is for Outreach Teams to identify individuals whose needs match the service focus of the particular Navigation Center.

- While Navigation Centers vary in their focus, as well as how selectively they target their enrollment, they nonetheless rely on outreach staff to identify specific individuals that

are interested in entering the Navigation Center as a pathway to attaining permanent housing. These are individuals who could benefit from the added support and structure of shelter-based navigation services offered at the center.

- Some Navigation Centers are designed to work explicitly with people who are chronically homeless and may have spent prolonged periods of time on the street. In these situations, Navigation Centers sometimes provide Outreach Teams a general client profile or enrollment criteria for referral into their program, which Outreach Staff will incorporate in their assessment and referral activities. In other situations, Navigation Centers will provide Outreach Staff wider discretion as to who may benefit more from the shelter.
- Other Navigation Centers may focus on particular demographic populations identified by the community as needing targeted outreach such as unaccompanied women.
- Street Outreach staff play an important role in terms of identifying but also establishing rapport with particular clients. Individuals who have faced prolonged and chronic periods of homelessness may distrust service providers and be skeptical of housing programs. They may also be hesitant to leave an encampment site, or fear losing some of their belongings, which have offered a semblance of consistency in their lives. Outreach staff may need to have various contacts with someone before that person trusts staff enough to enter the Navigation Center.

Low-Barrier Shelter

Once clients are referred into a Navigation Center, and a designated space is verified, they are often transported directly by the Outreach Team to the site location—what some outreach staff described as a “warm hand off” to the center. At the Navigation Center, site-based staff provide referred individuals a general introduction to the program and a formal intake process. Navigation Centers are by design low-barrier, meaning that they are welcoming of partners, pets, and property, among other factors that often block individuals from accessing services.

- Navigation Centers often offer clients storage lockers or large bins to store various personal items in a secure location at the site. During intake, staff will often conduct an inventory of items with clients to ensure that items are accounted for during their time at the Navigation Center. Individuals who have experienced prolonged periods of unsheltered homelessness, and likely experienced frequent theft, are often concerned about their personal property. Individuals will also sometimes bring large quantities of items that they may be initially reluctant to discard, which staff will attempt to accommodate given the available storage capacity. Nonetheless, enrollment is often a time when individuals begin the difficult but necessary process of discarding items that they will no longer need as they begin their transition into housing.
- Some Navigation Centers also provide access to a kennel for dogs, cats, and other pets. These facilities are sometimes available onsite—such as an external kennel connected to the Navigation Center—or they are provided by a nearby organization.

Site-Based Navigation Services

Navigation Centers also have an inherent primary goal of “rapid and effective” exits to permanent housing. To achieve this goal, housing navigators or case managers are tasked with assisting individuals in identifying barriers to housing, identifying potential housing opportunities, landlord mitigation, and in some cases, ongoing housing support for a limited time beyond exit.

- Many Navigation Centers work on ensuring individuals have documents they need to attain housing and address other barriers such as issues with pets, criminal records, or credit history.
- Some Navigation Centers work closely with a nearby multi-service center to provide support, in addition to site-based care coordination or case management.

Community Spotlight: Hayward

The City of Hayward is located in Alameda County on the eastern shore of the San Francisco Bay. Housing costs in Hayward are high; median gross rent from 2015-2019 was \$1,825 and the median home value was \$581,200.⁴⁵ Median income is \$86,744, placing it among the lower-income areas of Alameda County.⁴⁶ According to the January 30, 2019 Point-in-Time Count of Homelessness in the City of Hayward, California, approximately 487 people were experiencing homelessness, a 23% increase since the prior count in 2017.⁴⁷ Consistent with trends across the state, the vast majority (76%) were unsheltered. Among single adults, 87% were unsheltered, representing the fourth largest number of unsheltered individuals across the cities in Alameda County. 76% reported being homeless for one year or more, and 56% reported having at least one disabling condition as defined by the U.S. Department of Housing and Urban Development.



- In some cases, transitional support in the form of subsidies for move-in costs or other emergency needs are provided with the goal of keeping individuals in permanent housing. This is because in many cases, individuals might attain permanent housing through the Navigation Center but might be at risk for falling back into homelessness in the short-term if small crises come up.

Program Spotlight: Hayward Navigation Center

The City of Hayward is one community that decided to invest HEAP funds toward a new Navigation Center, with the goal of targeted outreach, low barrier shelter, and housing navigation in the community. In late 2018, soon after the City of Hayward formally declared an emergency homelessness crisis, city staff put forth a proposal to use HEAP funds to develop a Navigation Center, one that would be similar in design to the Berkeley Navigation Center, a successful center within the Alameda Continuum of Care (CoC). Up to this point, Hayward only had two homeless shelters for families and women with children, but did not have adequate shelter for individuals or coupled adults without children. Staff also highlighted the need for a low-barrier, short-term shelter with care coordination to better assist individuals in more successfully transitioning into permanent housing. Within four months, the Hayward City Council had toured a navigation center in Berkeley and approved a resolution authorizing and appropriating \$3,076,340 for one-year operating costs and construction for a navigation center in Hayward.⁴⁸ \$500,000 of HEAP funding was allocated to capital expenditures, just over \$600,000 to funding outreach and other support staff positions, and \$630,000 to housing assistance and subsidies.⁴⁹ The Hayward Navigation Center opened on November 18, 2019.

Hayward staff worked closely with Berkeley staff to help develop the Hayward Navigation Center, including speaking with the operator of the Berkeley Navigation Center (STAIR Center), Bay Area Community Services (BACS). BACS has been a well-established organization in Alameda County since 1953 and in Hayward since 1975.

One key component of the Berkeley STAIR Center model is a layered outreach prioritization system model. BACS proposed to replicate this approach for the Hayward Navigation Center to target individuals

who were living in encampments located in Hayward. Staff described several layers of prioritization in outreach and engagement. In July 2019, staff proposed an initial targeted outreach approach that would be implemented by the outreach coordinators at BACS. Staff analyzed various data sources to identify 8 outreach areas of the city associated with a high volume of community calls related to homeless encampments in which public services had been dispatched (e.g., police, maintenance, fire). These areas were subsequently served by two full-time outreach-focused care coordinators who engaged in intake and assessment for fit from Monday-Friday from 8am-5pm. Staff described the ongoing outreach efforts in Hayward in terms of ongoing relationship-building,

I try to stay persistent unless I'm given a direct 'stop, leave me alone, I don't want it'...because a lot of people have had relationships that I guess you'll say have failed them...just being that constant persistent force that's going to..help you get better and wants to help see you progress and move on.

Racial Equity Lens

An additional layer of prioritization is related to addressing racial equity. In Hayward, as in most areas of the United States, there is an overrepresentation of people of color within the homeless population. Black/African American individuals make up 11% of Hayward's overall population yet 24% of Hayward's homeless population.⁵⁰ Additionally, American Indian individuals make up only 0.3% of Hayward's overall population but 7% of Hayward's homeless population. Staff recommended that the city address outreach, intake and exits out of the Navigation Center with an intentionality and awareness of the racial demographics of the homeless population in Hayward. Said one staff member, "the piece that we're intentional about is bringing people in who match the homeless population, rather than the general population." They explained that on an ongoing basis they compare these demographics of people experiencing homelessness and "constantly check our census and services to those numbers...[so that] we are serving people in roughly equitable ways." The Navigation Center is making an intentional effort to address racial equity by ensuring that the demographics of people served reflect the demographics of people needing services. According to staff, they also track racial equity in outcomes data.

They further elaborated,

We also track that on the outcomes side, which is the real test. ... Let's look at those 45 people that went into housing. What are the percentages and do they match as closely as possible to the percentages of the demographics coming in for services.

This prioritization approach was discussed and approved by the Housing and Homelessness Task Force of the Hayward City Council and then the full Hayward City Council.⁵¹

The Model

In our interviews, staff explained that the intention of the Hayward Navigation Center is to provide low-barrier, short-term shelter and services to assist individuals in obtaining permanent housing. Pre-pandemic, there were 45 beds available in ADA-accessible modular units set up in an industrial zone of Hayward. In the beginning of the pandemic, from March to September 2020, capacity was reduced by over 50% to allow for adequate social distancing. In response to this decompression, the City of Hayward installed a third residential living unit on site which increased the capacity by 11 beds during the pandemic. Once social distancing requirements are no longer in place, the capacity of the Hayward Navigation Center will be 60 beds total. Staff noted that individuals typically stay at the center for 90-120 days but may stay at the center up to 6-9 months. While staying at the center, clients have access to showers, bathrooms, storage, a community room, kitchen, an office, and one meal per day.

Care coordination services provided by three staff members include assistance with documents, employment, behavioral health, housing navigation, or other supports that are needed to be successful in housing over time. Once individuals come into the program, staff conduct the coordinated entry assessment and ensure that they are listed on the by-name list.⁵² Staff at the center highlight that the services at the center are trauma-responsive and "fundamentally harm reduction...harm reduction to the max." The low-barrier approach involves no official income requirements, no curfew, and few other requirements that individuals need to meet in order to stay at the center. Unlike traditional shelters, the navigation center is open 24 hours per day and residents may come and go as needed. The program

uses the Critical Time Intervention model, which is an evidence-based practice that involves a phased approach of focused work with clients to address needs for connections to community supports with decreasing intensity over time.⁵³

Staff noted that the needs of clients at the Navigation Center can be high, and that it is a "continual challenge to serve folks with the resources they need... given the model and the constraints around funding." This is because sometimes, clients' needs require higher than average resources that go beyond the capacity of the Center. They noted that due to limited resources, they focus on "intensively trying to make that transition [to housing] from day one" but that very often individuals need assistance beyond 90-120 days. Staff see their role as connecting individuals to services that they can continue to utilize beyond their residence at the Navigation Center and avoid the "all-inclusive" model so that individuals can "build the social, natural and community supports that they need to go beyond our services." Further, staff noted that one of the most innovative components of the model is a pool of flexible funding for individuals up to 9 months after exiting the Navigation Center. This flexible funding can support people with move-in costs, furniture, security deposits, landlord incentives, or other needs that would otherwise prevent them from entering or staying in permanent housing. Ultimately, staff emphasized that their Navigation Center is working on "creating an orientation toward housing and an empowerment focused model" that they hope shifts broader community perspectives towards a strong goal of permanent housing.

Without the timing and flexibility of HEAP, this model may have not been possible in Hayward. As one staff member said, "[Without HEAP] we would not have had the funding to put it together, and it is just a great window of opportunity." The cost of building the Navigation Center was 100% funded through HEAP, while services and rental assistance were also paid through HEAP. Further, the City of Hayward was able to leverage the funds from HEAP to identify other sources of funding for ongoing operation, including an additional \$1 million over four years from Proposition 47 grants administered by the Board of State and Community Corrections, and additional private donations.

Conclusions and Recommendations

Summary

This report explored how HEAP has helped communities across California support new programs and approaches to addressing the growing challenges of unsheltered homelessness. Specifically, the report identified three emerging and promising models associated with Safe Parking, Integrative Outreach Teams, and Navigation Centers. Based on an iterative research process of reviewing HEAP program documents, relevant scholarship, and conducting interviews with various stakeholders and clients, the report highlighted the core components of these intervention models and how they address the immediacy, but also long-term needs, associated with unsheltered homelessness in California. The report also identified three communities across the state in which one of these models is being currently successfully implemented with HEAP funding.

All three models represent interventions that are typically difficult to fund with traditional state or federal programs; they either transcend the prescribed

categories of traditional homeless services and/or they require substantial start-up costs that jurisdictions need to absorb prior to seeking external funding. Each spotlight community highlighted the importance of HEAP in these regards for being both flexible but also sizable one-time investments into a jurisdiction's homeless service system. In short, it is clear that many of these programs would not have existed these past two years, at least in their current scale, without HEAP.

The community spotlights also highlight the role that HEAP played in fostering collaborations across jurisdictions as well in giving rise to a type of cross-fertilization of new intervention models. While in each of these three communities the program model was relatively new, staff and administrators emphasized that they were not necessarily "starting from scratch," and had in fact looked to other communities in California for inspiration where the model had already been implemented in some form. In the planning process for a Navigation Center in Hayward, for example, staff looked to models in San Francisco and Berkeley to develop their own iteration of the model.

Photo courtesy of the City of Hayward/Bay Area Community Services



In all three cases, administrators discussed that they had adopted an intervention model from another jurisdiction but had modified it to meet the unique needs of their community. Administrators also indicated that without HEAP they may not have had the financial or political capital to implement the new model in their community, at least in its current scale.

We also identified some “lessons learned” from our analysis of the three program models funded by HEAP and their implementation in different communities. We conclude that:

- *Safe Parking* is a relatively scalable and cost-effective intervention compared to some other models. For example, Safe Parking programs typically do not require capital investments to prepare a site, like emergency shelters, and often leverage existing infrastructure in a community. They are also able to engage an otherwise invisible group of individuals and families who are living in their vehicles and at risk of harassment, assault, and criminalization.
- *Integrative Outreach Teams* hold promise for multidisciplinary collaboration that can increase communication between service siloes with potential for better outcomes for clients living in encampments. They also show promise in addressing immediate physical or behavioral health crises while also developing rapport that can lead to eventual permanent housing.
- *Navigation Centers* can reframe the traditional notion of a shelter. They hold promise in uplifting low-barrier, harm reduction, and trauma-informed philosophies. They provide a stable and dedicated space for resolving barriers to housing with a strong focus on assisting people in attaining permanent housing.

Insights about Addressing Unsheltered Homelessness: Policy & Research Implications

While each of the three emerging models discussed in this report highlight specific lessons learned about program development and implementation, collectively the three case studies also provide insight into the broader policy tensions, but perhaps also opportunities, of addressing unsheltered homelessness in California. Below we elaborate on five policy themes that have emerged across the multiple programs and different communities. After each theme we identify a specific policy recommendation that the authors of this report believe HCFC and other state-level stakeholders should consider in light of these findings.

Conclusion 1: Addressing immediate needs without losing focus on permanent housing

All three models discussed in this report highlight a longstanding policy tension between addressing immediate needs associated with homelessness and prioritizing long-term permanent housing solutions. Individuals experiencing homelessness undoubtedly face risks to well-being and safety—risks of harms that often worsen over time the longer individuals remain unsheltered. While such risks can be temporarily mitigated by an emergency shelter, a longstanding critique of such short-term interventions is that they are often limited in their ability to help individuals exit homelessness. In the traditional model of services, emergency services are bifurcated from long term services. Indeed, the evolution of the Housing First policy reflects, in part, a reorientation of homeless service systems to be both a temporary stopgap to the harms of unsheltered homelessness but also offer individuals pathways to permanent housing.

However, the reality of growing unsheltered homelessness in California highlights that many communities face significant shortages of shelter beds that can provide immediate respite to people otherwise sleeping outside in encampments or their vehicles for long periods of time.

The most current inventory of emergency beds suggests that most communities, prior to the pandemic, could at most shelter only one out of three people facing homelessness each night.⁵⁴

Moreover, it was clear that even before Project Roomkey—which sheltered thousands of additional vulnerable people in hotels and motels—many communities were already leveraging HEAP to increase shelter capacity in their respective homeless service systems. During the first year in which HEAP funds became available the total number of shelter beds available each night increased by 23%—the largest single-year increase in shelter beds on record for the state.⁵⁵

A review of funded projects suggests that much of the increased shelter capacity funded by HEAP was established in non-traditional shelter settings, such

as Navigation Centers, Triage or Bridge Shelters. Indeed, the three models discussed in this report are themselves emblematic of an emerging perspective that homeless interventions should attempt to address immediate needs but also identify the most direct path to permanent housing. The program models reviewed in this report are undoubtedly focused on reducing the harms of homelessness, but they are also intentionally oriented toward permanent resolutions. Safe parking programs help many individuals stay employed and more quickly accumulate resources. Outreach programs help many individuals problem-solve and self-resolve their homelessness. Navigation centers help many individuals have a more successful transition into housing. In short, it is clear that many communities have embraced an emerging perspective that homeless service systems should be both short-term and long-term in scope and that these are not mutually exclusive strategies.

Recommendation 1

Given the breadth of new programs that HEAP fostered, future state funding should continue to support innovative strategies to reduce the immediate harms of homelessness (i.e., they provide access to shelter, clean restrooms, basic healthcare services, etc.) that are also oriented toward helping individuals transition into housing. However, it should be noted that many of these emerging models, like Navigation Centers, have not been extensively studied. We recommend that HCFC staff carefully assess available outcome data from these programs to investigate the relative benefits that these models offer given a community's respective needs and resources. Information on the number of individuals helped by these interventions—in terms of successful exits to housing—as well as whether some programs may be more effective for some forms of homelessness but not others, could help jurisdictions make better informed decisions with respect to investments into their homeless service systems.

Conclusion 2: Bridging siloed services with flexible funding

One of the challenges of bridging immediate versus long-term services, as discussed above, is the fact that many of the service sectors attempting to assist individuals facing homelessness are often siloed from each other. Services addressing behavioral health, immediate and long-term health needs, substance addictions, housing, case management, among others, often represent distinct entities operating within separate systems of care. Each of the models discussed in this report reflect an effort to bridge these traditional siloes, through a range of strategies and approaches to coordinate a client's needs across sectors such as housing, behavioral health support, medical needs, and other supports.

Most explicitly, integrative outreach teams such as the HEAT team in Riverside County CoC aligned efforts and skills within one program so that people living in encampments have their needs addressed by one coordinated entity.

Further, funding streams often align with traditional siloes. For example, behavioral health care is often funded through different sources than are shelter or housing programs. The flexible nature of HEAP funding allowed jurisdictions to implement programs that expanded beyond these traditional models; these more integrative programs may have traditionally been harder to fund absent a flexible source of funding. HEAP made it possible for communities to fund an innovative model and provided “proof of concept” in order to leverage further funding from local government, other state funding, or private funding sources.

Recommendation 2

Building on the multidisciplinary momentum of some HEAP-funded initiatives, HCFC should continue to promote collaborations that bridge traditionally siloed service sectors. As part of this effort, a portion of state funds should remain as flexible as possible so that jurisdictions can combine funding from different sources to “start up” new interdisciplinary efforts that address particular community gaps in their homeless service systems. Similar to the “challenge grants” that were established in this year’s state budget for addressing issues related to encampments and family homelessness, HCFC should provide support for more interdisciplinary and integrated efforts to address a variety of challenges facing homeless service systems. However, one downside to “start up” funding is that it is often a one-time source of support; sustainability over time is also important. HCFC should explore ways to build in mechanisms for sustaining new and innovative programs that hold promise but may not align neatly within existing program models or frameworks.

Conclusion 3: Unsheltered homelessness requires a range of approaches

The variety of programs funded by jurisdictions highlights the fact that there is no panacea—no single model of intervention—for addressing unsheltered homelessness. People experiencing unsheltered homelessness represent a very broad and diverse segment of Californians, requiring a range of approaches and interventions. One person may be newly homeless and living in their car; having access to a safe place to sleep as well as a small subsidy to pay for a security deposit could help this person quickly recover into housing. In contrast, someone living in an encampment may face complex challenges related to trauma, substance use, and a history of eviction; an array of integrated support around behavioral health and housing may be required to help this person transition out

of homelessness. In short, effective and responsive homeless service systems require a range of approaches and interventions.

While different types of programs reflect the varied needs of people experiencing unsheltered homelessness in a community, they should also be responsive to the diversity of the community itself. Indeed, a broad literature points to extensive structural inequities across racial and ethnic identities—inequities that may be more pronounced in some communities. These inequities occur across a range of settings but are particularly apparent in the area of housing and homelessness. Consequently, some communities used HEAP funds to invest explicitly into diverse and culturally competent programs that uplifted the expertise of people with lived experience of homelessness and promoted racial equity. It is important that through future funding, the state incentivizes jurisdictions to be responsive to racial equity in addressing homelessness.

Recommendation 3

HEAP funded a variety of programs that reflect different ways that homelessness can be experienced and the diversity of Californians facing these challenges. HCFC should continue to promote a wider variety of approaches to addressing unsheltered homelessness. These investments into diverse programs and strategies should reflect the unique needs of each community informed by state and local data as well as stakeholder input. In addition, HCFC should continue incentivizing jurisdictions to explicitly consider racial equity across their services and housing landscape and continue to fund programs that directly work to ensure racial equity and cultural competence. This work includes, but is not limited to, analyzing where and with whom outreach and recruitment take place, the cultural competence of organizations and staff, and outcomes of individuals within and beyond programs.

Conclusion 4: Community resistance vs. buy-in is paramount

Stakeholders across every jurisdiction interviewed for this report raised the issue of local community resistance as a major obstacle to developing new programs. In particular, place-based interventions like Safe Parking Programs and Navigation Centers—programs that explicitly attempt to help individuals within specific locations—can raise significant resistance among some constituents. Stakeholders noted that there is a persistent fear among some community members that these programs may “attract more homelessness” into an area. They noted that these sentiments have motivated decisions to either

relocate programs to remote parts of a county or close down some projects altogether. It is telling that some communities initially interviewed for this report asked not to be identified for fear that “broadcasting” information about their programs may result in unwanted attention and continual resistance. Nonetheless, some stakeholders have been successful in mitigating some of this resistance by engaging in specific outreach to specific constituencies. This outreach has sometimes taken the form of organizing tours of new programs as well as inviting community members to participate as regular volunteers to a program. As discussed by some administrators, such efforts have helped get more “community buy-in” for a new program or model of service in an otherwise underserved community.

Recommendation 4

Given some of the successes some jurisdictions have had in addressing community concerns to new programs, HCFC should explore whether these community engagement strategies could be applied in other jurisdictions. This could take the form of Technical Assistance (TA) made available by HCFC specifically around issues of community engagement and education. HCFC should also consider ways to confront some of the misconceptions and stigma surrounding homelessness that underpin some of the community resistance to new homeless service programs. For example, social researchers have pointed to a persistent misperception in the U.S. that equates homelessness with “traveling strangers”—of people external to a community tapping into local resources otherwise designated for residents.⁵⁶ This common conflation of homelessness and transience has perpetuated what some researchers describe as the “magnet myth” of social services—the belief that increased expenditures on social services will attract more homeless individuals into that area.⁵⁷ This portrayal of transient homelessness is inconsistent with various findings by researchers that the majority of people facing homelessness in the U.S. have been long-time residents of the regions in which they currently reside.⁵⁸ Indeed, a recent analysis from the state’s new Homeless Data Integration (HDI) system suggests that the vast majority of individuals accessing homeless services in California are from the same community in which they are receiving assistance.⁵⁹ Consequently, HCFC should support educational campaigns that challenge these mistaken beliefs. Such efforts may help local administrators garner community support and acceptance for more interventions in their communities. Similarly, HCFC could broadcast these and other insights from the Homeless Data Integration (HDI) system more widely.

Conclusion 5: The lack of affordable housing impacts the effectiveness of programs

Another enduring challenge discussed in every community is how the lack of affordable housing ultimately affects the ability of programs to help individuals exiting unsheltered homelessness. While homelessness and affordable housing are distinct policy issues, they are nonetheless closely related challenges that

persist in nearly every community across the state. As discussed in our previous report, rising housing costs continue to be one of the strongest predictors of community-level homelessness. And as rents and housing costs in California have significantly increased during the last five years, so have the proportion of households facing perpetual risks of falling into homelessness. Interviews conducted for this report also highlight the fact that the lack of affordable housing in California makes the exit from unsheltered homelessness more difficult and prolonged.

As we heard from stakeholders across the state, many programs struggle to identify affordable housing options for their clients even in situations when an individual was able to secure stable employment and substantially increase their income. This is a critical issue to consider given the growing concerns about homelessness across the state and desire among constituents to see state dollars invested toward programs that are effective. As our first recommendation highlights, it is important for HCFC to track performance and outcomes of programs and assist communities in investing limited resources to-

ward interventions that have measurable impacts on reducing homelessness. But it is important to interpret performance metrics within the context of the broader housing affordability crisis. Even intervention approaches like Rapid Rehousing that have a strong evidence base have also been shown to be less effective in the context of tight rental market conditions.⁶⁰ While the landscape of housing in California remains unclear, particularly in the aftermath of the pandemic, the issue of housing affordability will continue to shape the outcomes and effectiveness of local homeless service systems.

Recommendation 5

While housing affordability is a complex and distinctive policy issue, HCFC should consider investigating how the stock of affordable housing options for individuals exiting unsheltered homelessness affects the performance of homeless interventions. Given the growing concern and desire to track performance measures of publicly funded homeless programs, HCFC should consider and study how these metrics should be interpreted within the broader context of current and changing housing-rental market conditions. HCFC should carefully assess how housing affordability in specific localities affects the overall effectiveness of programs and interventions targeting groups facing temporary and episodic homelessness such as Rapid Rehousing and rental assistance programs. The explicit focus of new state-led initiatives to substantially increase the stock of Permanent Supportive Housing (PSH) units across the state will undoubtedly benefit some of the most vulnerable groups experiencing housing delays (i.e., individuals experiencing chronic homelessness). But non-disabled, low-income households also face significant barriers to identifying affordable housing options in their community. Particularly for households that experienced homelessness due to a job loss, identifying affordable housing options after securing employment will be critical to ensuring stability.

The above conclusions and recommendation highlight only a few of the various lessons and insights that will be learned over time from the implementation of HEAP across California. While addressing the complex challenges of homelessness will require various policy efforts and goals—such as programs targeting prevention, housing affordability, as well as efforts to help households that have exited homelessness maintain stable housing over time—this report calls attention to the need for specific programs that address the immediate harms and risks among

people who face unsheltered homelessness. In this regard, initiatives like HEAP and other new state funding programs have been critically important by allowing communities to invest in models that utilize multi-pronged approaches to addressing the immediate and long-term needs of people who are living in unsheltered locations. In a forthcoming report in Fall 2021, the authors will explore how HEAP has similarly helped fund new programs and interventions that are addressing the unique challenges associated with youth homelessness.

Endnotes

- 1 A Continuum of Care (CoC) is a community board that coordinates local homelessness planning efforts and disperses federal funds awarded by the U.S. Department of Housing and Urban Development (HUD).
- 2 The Point-in-Time count is an enumeration of people experiencing homelessness in both sheltered and unsheltered locations. Annually, Continuums of Care (CoCs) required by the U.S. Department of Housing and Urban Development to enumerate the number of people in sheltered locations such as transitional housing, emergency shelters, and Safe Havens. Additionally, every other year CoCs must conduct a count of the number of people experiencing unsheltered homelessness.
- 3 It should be noted that HCFC allowed communities to amend their proposals for HEAP funds over time. A recent expenditure report by HCFC indicates that as of September 2020, jurisdictions had spent 58% of the \$499 million allocated. Of these expenditures, 42% were on capital improvements and 37% on services. See report: https://www.bcsh.ca.gov/hcfc/documents/2020_grants_annual_report.pdf.
- 4 Integrative Outreach Teams are sometimes also referred to as Multidisciplinary Outreach Teams.
- 5 See <https://economicrt.org/wp-content/uploads/2021/01/Locked-Out.pdf>.
- 6 According to data from Zillow's Rental Index—which aggregates median rents across various rental types within a geographic market—the nation's three most expensive rental markets are all currently in California. These include: San Jose (median rent of \$3,318 per month), San Francisco (\$3,150), and Los Angeles (\$2,614). Residents in these three metropolitan areas not only report some of the highest ratios of rent to income in the country (e.g., in Los Angeles the median rent represents 44% of the median income), but these communities represent the largest share of Californians experiencing homelessness according to the 2019 Point-in-Time count (a combined 74,000 residents in these metro areas experience homelessness on any given night). Since 2014 median rents have increased by an average of 24% in these communities; these communities also report the largest increases in homelessness during this time (about 55% of the state's total increase in homelessness between 2015 and 2019 were reported by these communities).
- 7 According to a recent report from Public Policy Institute of California (2019) 4 out of 10 Californians (36%) are currently living in or near poverty, a rate that is higher than it was a decade ago. Other studies highlight that a large proportion of households in California have difficulty finding housing that is affordable. There has been a steady decline in availability of low-cost rental units in the state over the past three decades, rental rates that are 50% higher than in the rest of the country, high income inequality, and high rates of what is referred to as "rent burden," in which 55% of renters spend more than 30% of their total income on housing (Joint Center for Housing Studies of Harvard University, 2019). The average price for a house in California is 2.5 times the national average (Zillow, 2019) making homeownership inaccessible to many Californians; the current rate of homeownership in the state is the lowest since before World War II.
- 8 Joint Center for Housing Studies of Harvard University. (2019). *Documenting the long-run decline in low-cost rental units in the US by State*. Retrieved from https://www.jchs.harvard.edu/sites/default/files/harvard_jchs_loss_of_low_cost_rental_housing_la_jeunesse_2019_0.pdf.
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- 10 Homelessness Policy Research Institute. (n.d.). *State of homelessness in California fact sheet*. Retrieved from <https://socialinnovation.usc.edu/wp-content/uploads/2020/02/Homelessness-in-CA-Fact-Sheet-v3.pdf>.
- 11 Point-in-Time Counts in the United States are typically understood to be an undercount of the true prevalence of homelessness.
- 12 In contrast to the term "unsheltered homelessness," the term "sheltered homelessness" refers to staying in an emergency shelter, transitional housing program, or Safe Haven.
- 13 Collectively, in 2020 communities in California had the capacity to provide emergency, safe haven, or transitional housing to 53,265 people year round, but it is estimated that 151,000 individuals across California experience homelessness each night (HUD, 2020).

- 14 At the time of this reporting, a detailed accounting of HEAP expenditures related to shelters and/or other types of emergency housing funded by the initiative was not available. However, an expenditure report conducted by HCFC indicated that capital improvements represented the largest expenditures of HEAP up until September 2020. And in 2019, a survey conducted by the authors with grantees about their proposals related to capital improvements indicated that a majority of jurisdictions (63%) were planning to use HEAP for either developing new emergency shelters or triage/bridge shelters. Jurisdictions also indicated plans to increase the capacity of permanent supportive housing, though this was indicated by only 26% of jurisdictions in 2019.
- 15 The most current Housing Inventory Count (HIC) report published by HUD indicates that between January 2019 and January 2020 the number of emergency shelter beds in California increased from 31,028 to 38,241 (an increase of 7,213 or 23%, since 2019). This is the largest single-year increase since HIC reports have tracked shelter capacity. It should be noted that this increase occurred prior to the pandemic and Project RoomKey, which likely resulted in an even larger increase that will be reflected in the 2021 HIC (published later this year). Including the capacity of safe haven and transitional housing programs, which can also provide temporary shelter, the total shelter capacity in 2019 was 46,306 across the state, even though approximately 151,000 individuals experienced homelessness on any given night.
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- 20 Griffith, C. (2019, August 14). *Media's use of harmful words exacerbates homelessness*. Invisible People. Retrieved from <https://invisiblepeople.tv/medias-use-of-harmful-words-exacerbates-homelessness/amp/>.
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- 22 Applied Survey Research. (2019). *King County Point-in-Time Count of persons experiencing homelessness*. Retrieved from <http://allhomekc.org/wp-content/uploads/2016/11/2017-King-PIT-Count-Comprehensive-Report-FINAL-DRAFT-5.31.17.pdf>.
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- 24 See: Wakin, M. (2005). Not sheltered, not homeless: RVs as makeshifts. *American Behavioral Scientist*, 48(8), 1013-1032; Wusinich, C., Bond, L., Nathanson, A., & Padgett, D. K. (2019). "If you're gonna help me, help me": Barriers to housing among unsheltered homeless adults. *Evaluation and Program Planning*, 7, 101673.
- 25 In July 2021, HCFC administered an online survey to all 54 grantees that had received HEAP funding, which included questions about the three program models discussed in this report (i.e., Safe Parking programs, Integrative Outreach Teams, and Navigation Centers). Researchers for this report analyzed data from approximately 81% of jurisdictions (44 out of the 54 grantees) that responded to the survey. Survey results discussed in this report were derived from self-reported data on the number of programs funded by HEAP that aligned with the three program models highlighted in the report, as well as the estimated number of individuals served by these programs during the 2020 calendar year. It is assumed that jurisdictions drew on their respective Homeless Management Information Systems (HMIS) to provide these estimates. In instances in which incomplete data were provided, the researchers imputed missing data using adjusted averages computed from other reporting communities (an adjusted average of non-missing data that also excluded outlier data points that were beyond three standard deviations).
- 26 Similarly, some programs cater their services to specific populations—such as just working with families with children or chronically homeless single adults—while others programs are more generalized and serve a broad range of individuals and families facing vehicle homelessness.
- 27 Some programs allow RVs that are broken down, while in other cases RVs must be operational in order to park.
- 28 Ellsworth, J. T. (2018). Street crime victimization among homeless adults: A review of the literature. *Victims & Offenders*, 14(1), 96-118.

- 29 In these arrangements organizations typically lease or rent-out specific parking spaces to the safe parking operator, though often at a reduced rate and mainly for liability purposes.
- 30 Safe parking program directors interviewed for this report discussed that many programs find it more strategic to offer clients just a window of time to use their program. Requiring individuals to leave the lot everyday at a specific time is both helpful for the individuals facing homeless, according to the directors interviewed, but also the surrounding community. Most programs provide a limited entry window when participants can access the lot for the night (usually starting at early evening) but also a designated time when individuals and their vehicles must leave for the day (usually by 7am the next day).
- 31 While programs often require that vehicles be functional, at least enough to enter and leave the lot, there are few restrictions that bar vehicles that have expired tags and are not registered. Nonetheless, this is often one of the first areas that case managers work with participants: to ensure that their vehicles are legal to drive on public roads.
- 32 U.S. Census. (2019). *Quick facts: San Diego County*. Retrieved from <https://www.census.gov/quickfacts/fact/dashboard/sandiegocountycalifornia/PST045219>.
- 33 San Diego Regional Task Force on the Homeless. (n.d.). *2020 We all count report*. Retrieved from <https://www.rtfhsd.org/wp-content/uploads/2020-WeAllCount-Report-10.pdf>.
- 34 In fact, Dreams approached the owners of the lot, who had been unsuccessfully trying to sell the property for several years. The abandoned lot had not been regularly used for a number of years and had become dilapidated over time. Dreams negotiated with the owner to clean up the site and regularly lease the property, which has helped reduce the crime in the area.
- 35 Other respondents similarly spoke to how safe parking locations function to reduce the harms associated with sleeping in one's car, as well as destigmatizing and decriminalizing a common survival strategy—in effect, bringing the practice “into the light,” as another client described.
- 36 U. S. Interagency Council on Homelessness. (2019). *Core Elements of Effective Street Outreach to People Experiencing Homelessness*. Retrieved from https://www.usich.gov/resources/uploads/asset_library/Core-Components-of-Outreach-2019.pdf.
- 37 Bright Research Group. (2018). *Street Medicine Models in Other Counties: White Paper*. Retrieved from <https://www.brightresearchgroup.com/wp-content/uploads/2018/10/Street-Medicine-Models-Summary-of-Findings-9.26.18.pdf>.
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- 39 Homelessness Policy Research Institute (2019). *Homeless Outreach: The Los Angeles County Context*. Los Angeles: University of Southern California. Retrieved from <https://socialinnovation.usc.edu/wp-content/uploads/2020/09/Homeless-Outreach-Literature-Review-Draft-V7.pdf>.
- 40 Some of these funds were also used to provide flexible housing support for individuals who were engaged with the HEAT team.
- 41 These regions include the City of Lake Elsinore, the City of Wildomar, the City of Perris and the unincorporated areas that are between these three cities.
- 42 U.S. Census. (2019). *Quick facts: City of Wildomar, City of Lake Elsinore, City of Perris*. Retrieved from <https://www.census.gov/quickfacts/fact/dashboard/wildomarcitycalifornia,lakeelsinorecitycalifornia/PST045219>.
- 43 Riverside County (2019). *Riverside County Homeless Point-in-Time Count and survey report*. Retrieved from <http://dpss.co.riverside.ca.us/files/pit/2019-homeless-point-in-time-count-report.pdf>.
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- 45 U.S. Census. (2019). *Quick facts: City of Hayward*. Retrieved from <https://www.census.gov/quickfacts/fact/dashboard/haywardcitycalifornia/PST045219>.
- 46 Healthy Alameda County. (2021). *Median household income 2015-2019: Hayward*. Retrieved from <http://www.healthyalamedacounty.org/indicators/index/view?indicatorId=315&localeId=132164>.
- 47 EveryOne Home. (2019). *City of Hayward homeless count and survey: Comprehensive report*. Retrieved from <https://everyone-home.org/wp-content/uploads/2019/12/2019-Hayward-Final-Report.pdf>.

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49 An additional \$1 million over four years from Proposition 47 grants administered by the Board of State and Community Corrections was also secured, along with additional private donations.

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51 Deputy City Manager, City of Hayward. (2019, July 9). *Informational report on the Hayward Housing Navigation Center and policy approach for prioritizing future Navigation Center residents*. City of Hayward, CA.

52 A by-name list in a community is a real-time list of every person experiencing homelessness, including information collected with their consent including name, housing needs, history of homelessness, and health (Community Solutions, 2021).

53 Center for the Advancement of Critical Time Intervention (n.d.). *CTI model*. New York, NY: Silberman School of Social Work. Retrieved from <https://www.criticaltime.org/cti-model>.

54 See footnote 15.

55 While the precise impact of HEAP with respect to increasing shelter capacity in CA is unclear—as statewide data on specific HEAP funded beds was currently unavailable at time of this writing—the initiative has undoubtedly contributed to the substantial development of new shelter and transitional beds reported across communities in the last two years. Indeed, collectively jurisdictions allocated 36% of their HEAP funds (total \$180 million) toward capital investments, the majority of which were associated with new emergency shelter programs and triage/navigation centers, according to initial proposals submitted to HCFC. For more information of how communities initially allocated HEAP funds see the first-year evaluation report https://www.bcsch.ca.gov/hcfc/documents/heap_annual.pdf.

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