

Metro Dallas Homeless Alliance
Continuum of Care
2021 Homeless Count & Survey
Independent Analysis



Prepared by Catherine Troisi, Ph.D., UTHealth School of Public Health

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Overview

The annual Point-In-Time Count (PIT Count) is a requirement of the U.S. Department of Housing and Urban Development (HUD) for the local Continuum of Care (CoC) funding process to obtain a snapshot census of people experiencing homelessness, unsheltered and sheltered, in our community on one night in January. As the lead agency for Dallas and Collin Continuum of Care, Metro Dallas Homeless Alliance is responsible for conducting the count.

In 2021, due to the COVID-19 pandemic, Continuums of Care (CoCs) across the nation were faced with the possibility that conducting a count of those experiencing unsheltered homelessness would not be feasible. Conducting the annual January count of individuals experiencing unsheltered homelessness requires hundreds of community volunteers. Additionally, volunteers gather in groups and approach people that may be experiencing homelessness to collect data. This activity poses challenges in preventing the spread of COVID-19. Due to these challenges, U.S. Department of Housing & Urban Development (HUD) issued waivers that allowed CoCs to opt out of conducting an unsheltered homeless count. For those that chose to move forward with the count, there were additional waivers which provided flexibilities in methodology and timing of the Count.

Metro Dallas Homeless Alliance, which covers Dallas and Collin Counties decided to move forward with conducting both the sheltered and unsheltered Count in order to assess how COVID-19 has impacted homelessness and to convey to the most vulnerable that we are still fighting to end their homelessness.

Methodology

The official “night of record” for the Point-in-Time Count (for those sheltered and unsheltered) was February 18, 2021. However, we received approval from HUD to conduct the count of those who were experiencing unsheltered homelessness from February 18 until March 3. Street

Outreach teams, defined as individuals who a)locate, contact, and provide information, referrals, and services to individuals experiencing homelessness in unsheltered spaces as part of their day-to-day job function b)individuals who have been trained on infection control protocol in the outreach context and c)organization participates in the Dallas and Collin County CoC Street Outreach Committee.

MDHA worked closely with the PIT Count Committee and Street Outreach Committee to ensure full coverage of both counties. In addition, they partnered with the County Health Department to provide access to Covid-19 testing and infection protocol training.

The MDHA CoC covers a large geographic region (1,712 sq. miles, including all of Dallas and Collin-Counties and encompassing the cities of Dallas, Irving, and Plano)¹. Due to the size of the geographic area covered by the Count and complications related to pandemic concerns, we know that not all unsheltered persons experiencing homelessness can be identified in a short period of time. (We are more confident about counting the number of those experiencing homelessness who are sheltered.) However, these results do give us a snapshot, however incomplete, of what is happening in the area.

The 2021 sheltered Count included individuals staying in a total of 59 projects comprising emergency shelters (29 different programs), transitional housing units (28 different programs), and safe havens (2 projects) on the night of 18 February based on reports received from the projects and data entered into the Homeless Management Information System (HMIS). Individuals experiencing unsheltered homelessness (those sleeping on the streets or in other places not meant for human habitation) were counted using direct engagement and interviews when possible, and observation, if not. Teams walked under bridges and to other areas where encampments of unsheltered individuals experiencing homelessness had been identified. They

¹ www.census.gov/quick facts accessed 4/25/21

also investigated abandoned buildings where persons experiencing homelessness may have been residing.

There is a danger of counting people twice or mistaking them as unsheltered when counting over multiple days, as someone on the street during the day may have been in a shelter the night before or approached twice during the two-week period. We guarded against this in three ways:

- Interviewees were asked if they had been questioned previously and, if so, they were not included more than once in the Count.
- Interviewees were asked where they slept on the night of 18 February 2021 (the official night of the Count) and were classified as experiencing unsheltered homelessness only if they slept in a place not meant for human habitation, per HUD guidelines. This assured that we did not double count someone who was included in the HMIS shelter count and that we did not include those who appeared as if they were experiencing homelessness but were not, according to HUD guidelines.
- Names of unsheltered interviewees were compared to HMIS records to ensure they were not counted during the sheltered Count.

SimTech Solutions' Counting Us software (Canton, MA), a mobile application that can be readily implemented to help count persons experiencing unsheltered homelessness, was used for the Count. The use of a mobile application survey had several advantages. Thanks to GPS mapping technology included in the mobile application, the Count execution and data could be monitored in real-time, and location of the interview recorded. Outreach Staff could be tracked while conducting surveys based on the user IDs assigned.

All emergency shelters, transitional housing, and safe havens that are part of the CoC were contacted and inventoried. Shelter providers were trained on entering data and assessments into HMIS and given the opportunity to confirm the data assessed on the night of the Count.

Shelters that do not use HMIS, such as domestic violence shelters, were asked to report their numbers on 18 February using the SimTech Solutions' Counting Us software (Canton, MA).

Winter Storm Uri

Between February 13, 2021 and 20th, Dallas and Collin Counties experienced Winter Storm Uri during which time the Count of those experiencing unsheltered homelessness was taking place. For our individuals experiencing homelessness, Warming Stations in Dallas and Collin Counties was activated. Per HUD regulations, these individuals were categorized as residing in emergency shelter. Thus our 2021 emergency shelter numbers were higher than in previous years. We believe 600 of those counted in warming shelters would have been counted among the unsheltered homeless, were it not for Winter Storm Uri.

2021 Key Findings

Data collected show a total of 4,570 sheltered and unsheltered individuals experiencing homelessness (per HUD's definition²) in Dallas and Collin Counties on the night of the Count (Figure 1). Breaking down the location of those experiencing homelessness, we determined that most were in Dallas County (90%). It is important to note that, for those experiencing unsheltered homelessness on the night of 18 February, geographical assignment was determined by where they were interviewed during the day, which may be near where they seek services but not necessarily where they sleep. The same is true of the sheltered population which may move from one county to another, particularly in counties where there are a lack of shelters for specific groups. Therefore, the location of both the unsheltered and sheltered

² (1) Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or a place not meant for human habitation immediately before entering that institution; (3) Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; or (4) Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

<https://www.hud.gov/sites/documents/PIH2013-15HOMELESSQAS.PDF>

populations may not reflect where they were living before experiencing homelessness. Due to the pandemic and differences in the methodology of conducting the Count, previous years' counts are not comparable.

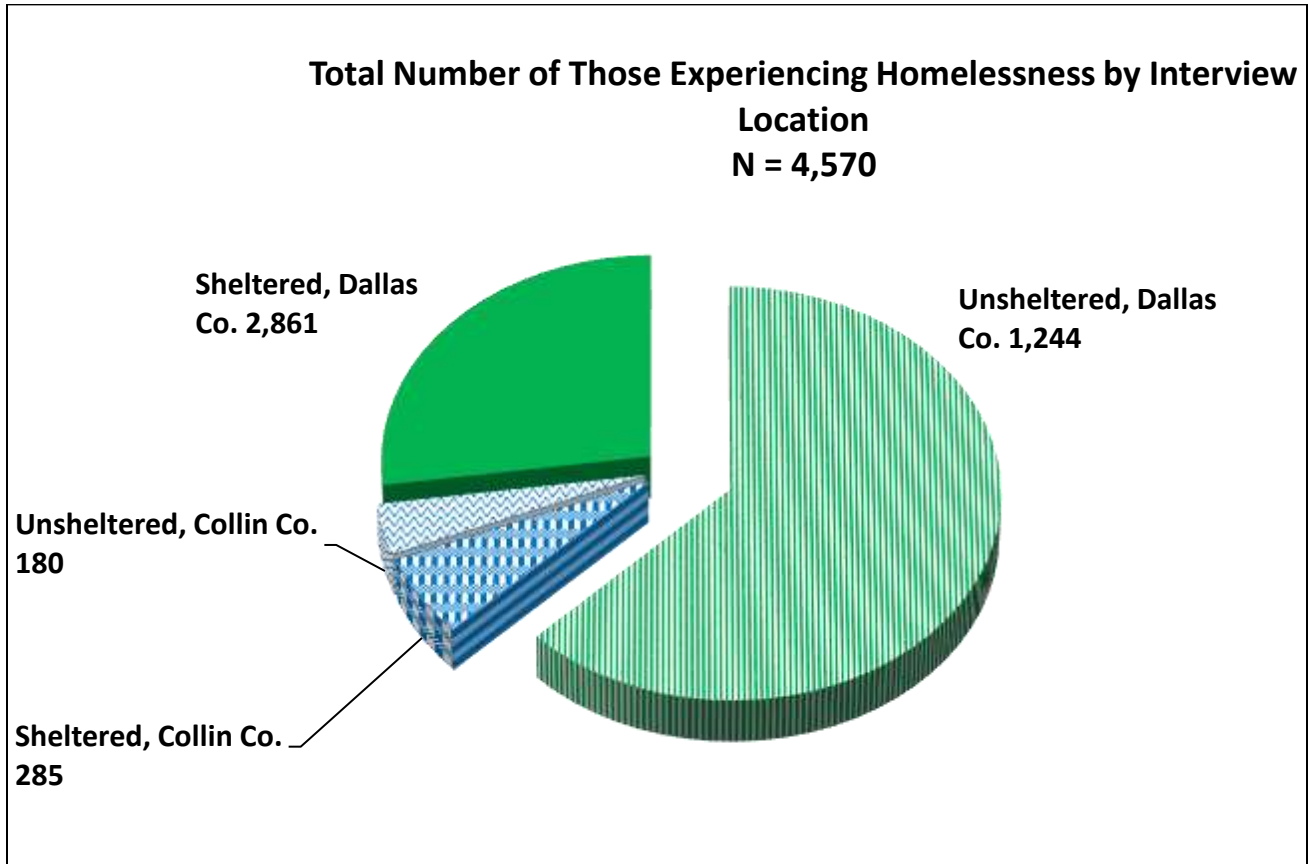


Figure 1

Persons experiencing homelessness can be found in one of four settings – places not meant for human habitation (i.e., unsheltered), emergency shelters, transitional housing, or safe havens. The locations of those experiencing homelessness by county in 2021 are shown in Figure 2. Within the total population, more than one out of every two persons experiencing homelessness (57%) were in emergency shelters on the night of the Count, with one in nine (11%) in transitional housing. In 2021, approximately 1 of 3 (31%) those experiencing homelessness were found on the streets or in other places not meant for human habitation (Figure 3). However, the Point in Time Count occurred during the Winter Storm Uri during which

Warming shelters were activated. Per HUD regulations, Warming Shelters were categorized as emergency shelter and thus our 2021 numbers were higher than in previous years.

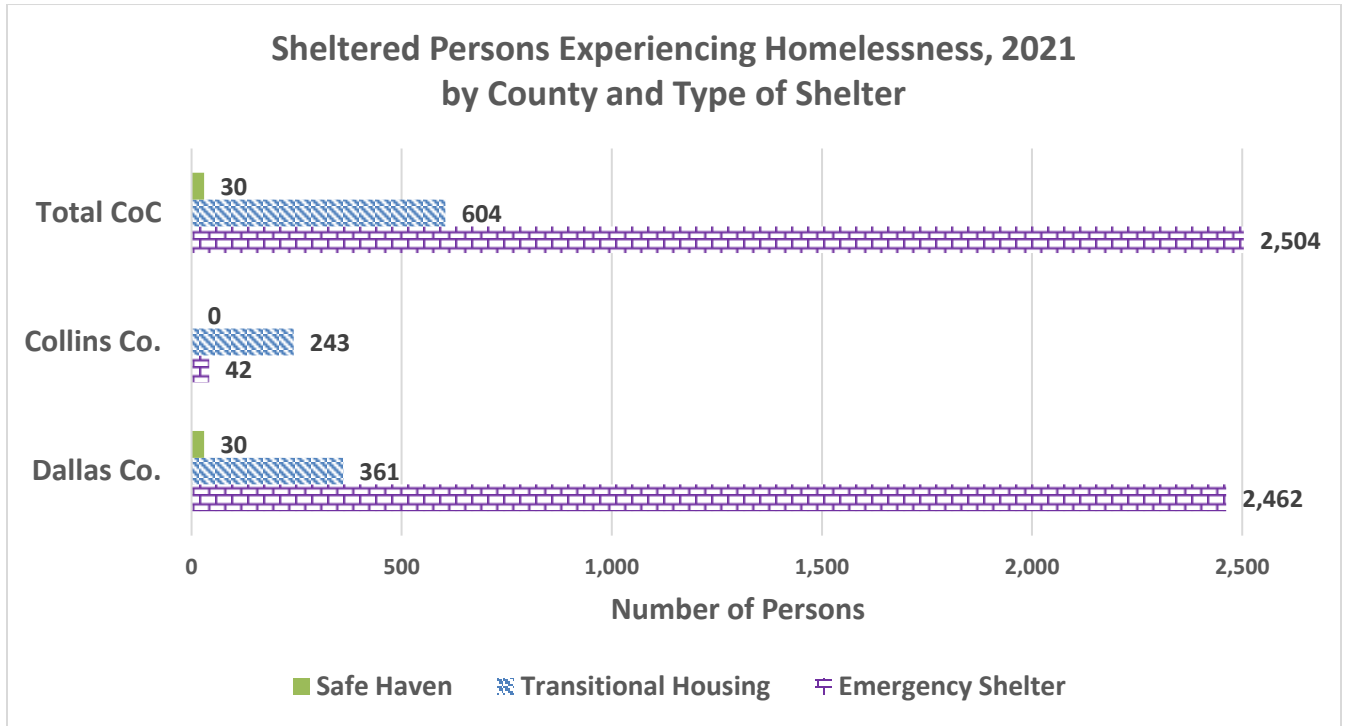


Figure 2

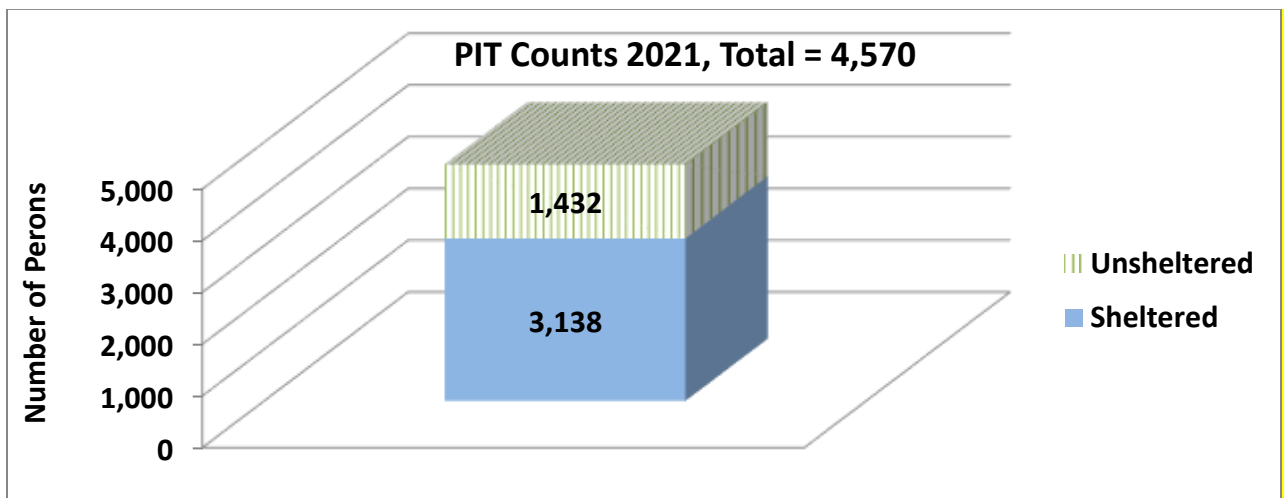


Figure 3

Characteristics of Those Experiencing Homelessness

Persons experiencing homeless are classified into three household types: persons in households without children (HHWOC), persons in households with children under age 18 years (HHWC), and children-only households (under the age of 18 years). Figure 4 shows the breakdown of these groups between the sheltered and unsheltered populations while Figure 5 graphs these data in a way to show among each household type, what number/percent were in emergency shelter, transitional housing, and safe haven. Nearly one of five (18%) of sheltered persons were in households with children while, among the unsheltered, no households with children were found. Twenty-three children-in children only households were found among the sheltered with 16 in emergency shelter and seven in transitional housing. No children-only households were found among those who were unsheltered.

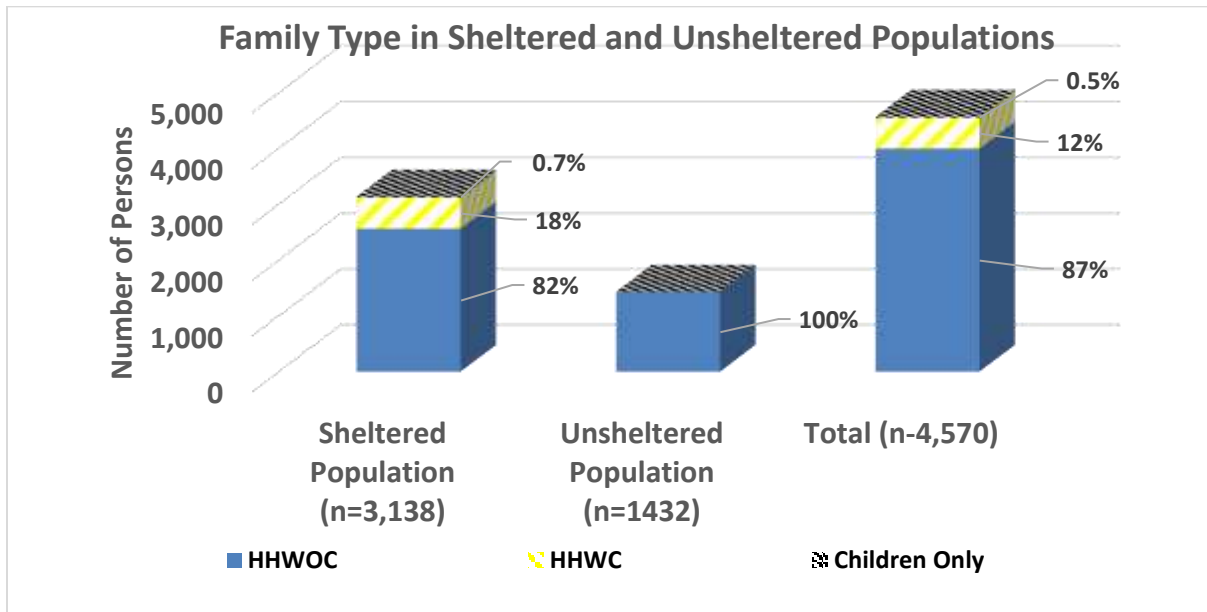


Figure 4

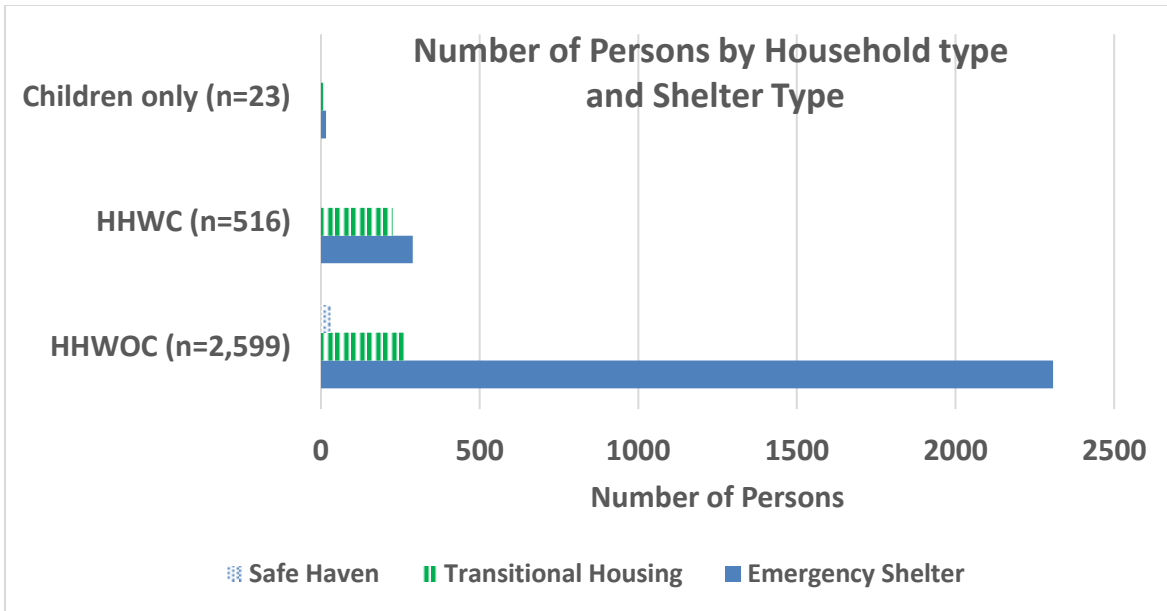


Figure 5

Nine of ten of those in households without children were in emergency shelters on the night of the Count as were over half (56%) of households with children.

For the unsheltered population, we were able to capture length of time of homelessness (Figure 6). A plurality of those unsheltered persons [approximately two of five (40%)] had been homeless for one to three years and another approximately one in three (37%), three years or longer. One out of fourteen (7%) of the unsheltered populations was been homeless for less than 3 months.

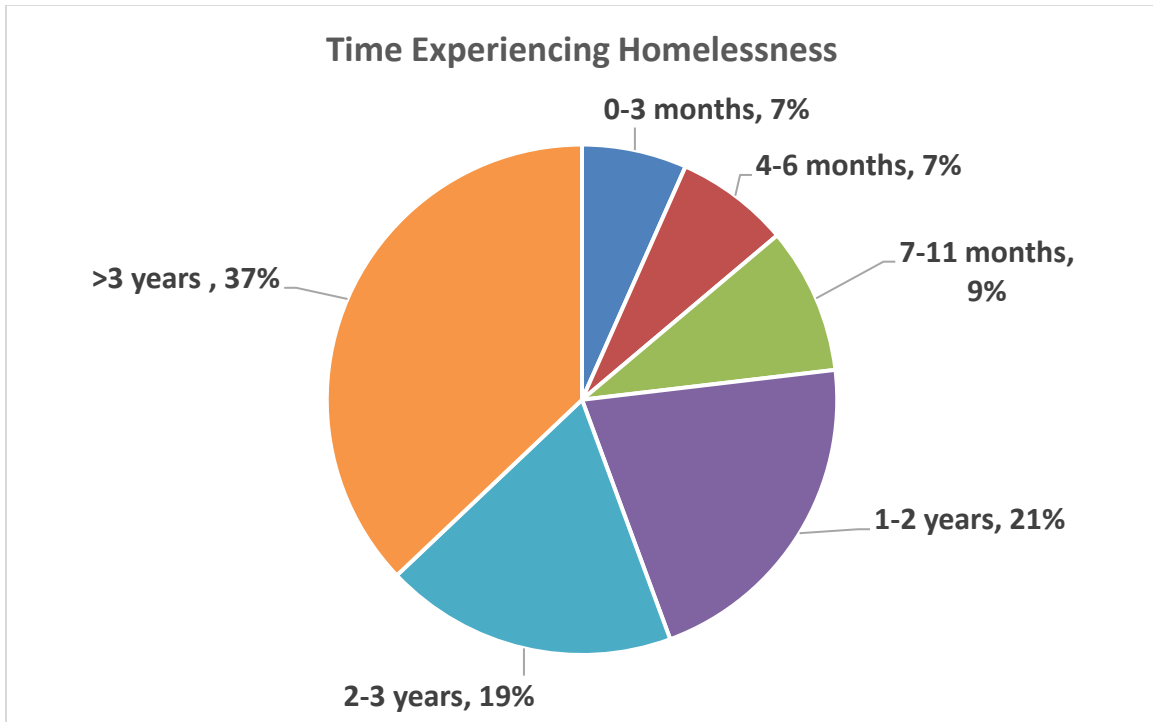


Figure 6

Subpopulations

HUD requires that certain subpopulations of persons experiencing homelessness be enumerated within the total number of persons experiencing homelessness. These subpopulations include:

- Veterans
- Individuals and families experiencing chronic homelessness³
- Individuals who are survivors of domestic violence
- Persons with HIV/AIDS

³ HUD's definition of chronic homelessness is four or more occasions of homelessness within the past three years for a total of 12 months or longer or one or more current consecutive years of homelessness. In addition, the individual must have a disabling condition which makes daily activities difficult (e.g., medical, psychological, substance abuse) and prevents them from holding a job. A chronically homeless family meets the above definition with at least one child under the age of 18 years living with his/her parent(s). For sheltered individuals, they must be staying in emergency shelter or safe haven, but not in transitional housing.

- Persons with serious mental illness
- Individuals experiencing chronic substance use disorder (alcohol and/or drugs)
- Unaccompanied young adults and parenting young adults

This information can be captured by HMIS for those in shelters. If data were missing, it was assumed to be negative. This may have the effect of artificially lowering percentages in a characteristic category as some of the persons with missing answers may truly have had that characteristic.

The age range of the total population experiencing homelessness and by sheltered or unsheltered status is shown in Figures 7a-c. In the total population, almost nine of ten persons experiencing homelessness were over the age of 24. Approximately one out of twelve were under the age of 18; however, all of those under age 18 were in sheltered situations. The population living unsheltered was older with forty-nine out of fifty (97%) 25 years of age or older. The sheltered population experiencing homelessness was younger, due to the inclusion of children in that population. Of the 3,138 persons in safe haven, emergency shelter, or transitional housing, one in eight (12%) was below the age of 18 years and one out of 17 (6%) ages 18-24 years. Approximately one out of seventeen (6%) of those under age 18 were in transitional housing.

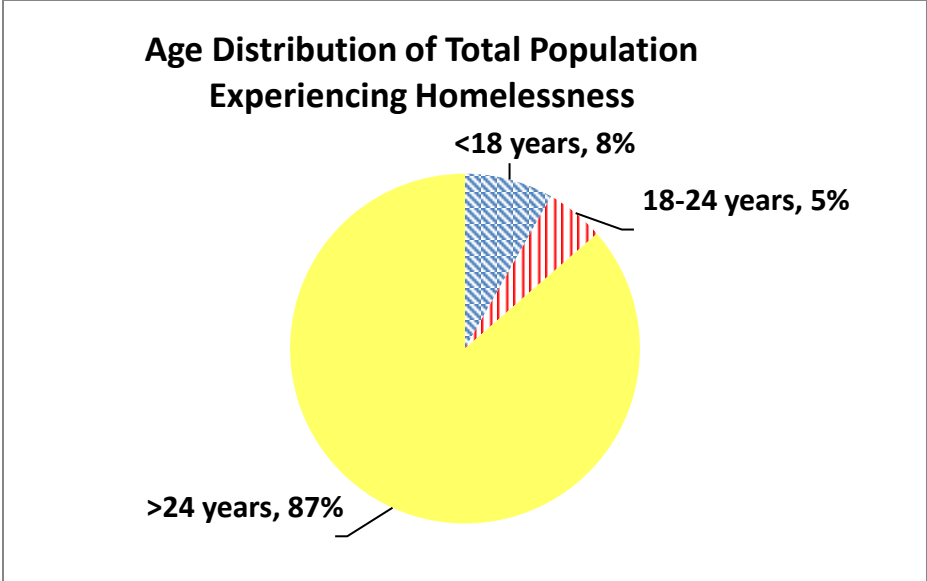


Figure 7a

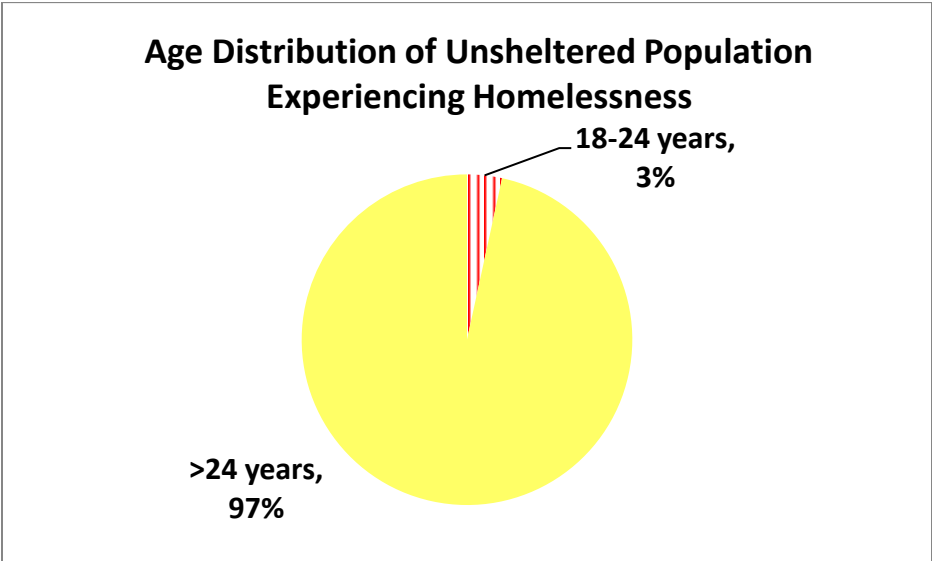


Figure 7b

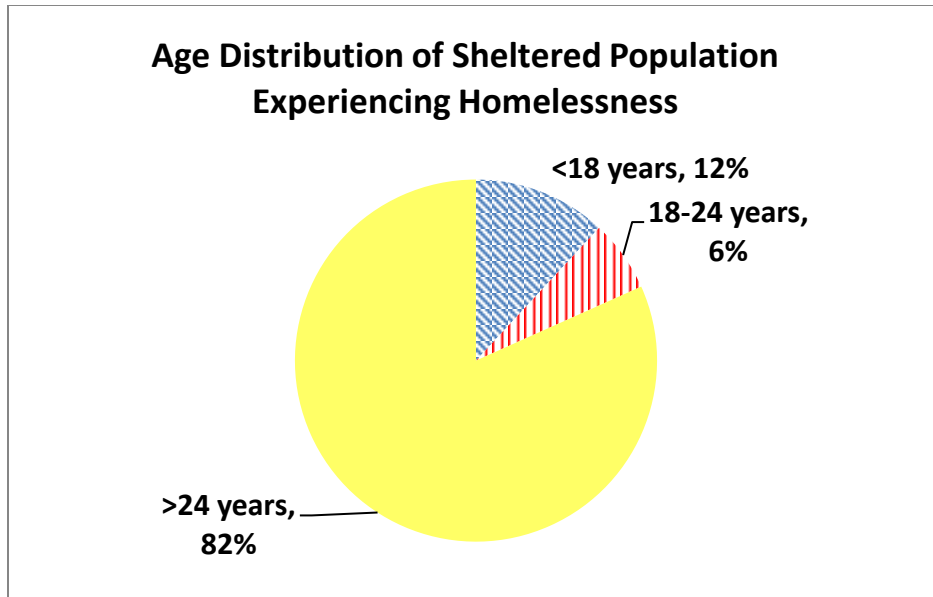


Figure 7c

Subpopulations for the total population experiencing homelessness as well as a breakdown by sheltered and unsheltered status are shown in Figure 8. Overall, over seven of ten persons in the total population experiencing homelessness were male with a slightly higher percentage in the unsheltered population (74%). Fifteen persons experiencing homelessness identified as transgender and one as non-binary.

Persons who are experiencing chronic homelessness represent a particularly vulnerable population and are prioritized for permanent housing. We determined that nearly one of eight (13%) of the total population experiencing homelessness met the HUD definition of experiencing chronic homelessness.⁴ Chronic homelessness was slightly higher in the emergency shelter population than in those who were unsheltered (14% vs. 12%), but this may reflect the activation of Warming Stations and their designation of emergency shelter.

⁴ A. Persons in transitional housing cannot be considered chronically homeless. B. Those in an situation who did not respond to questions needed to determine for chronic homelessness were considered to not be chronically homeless, thus potentially artificially lowering the percent of those who were found to be chronically homeless..

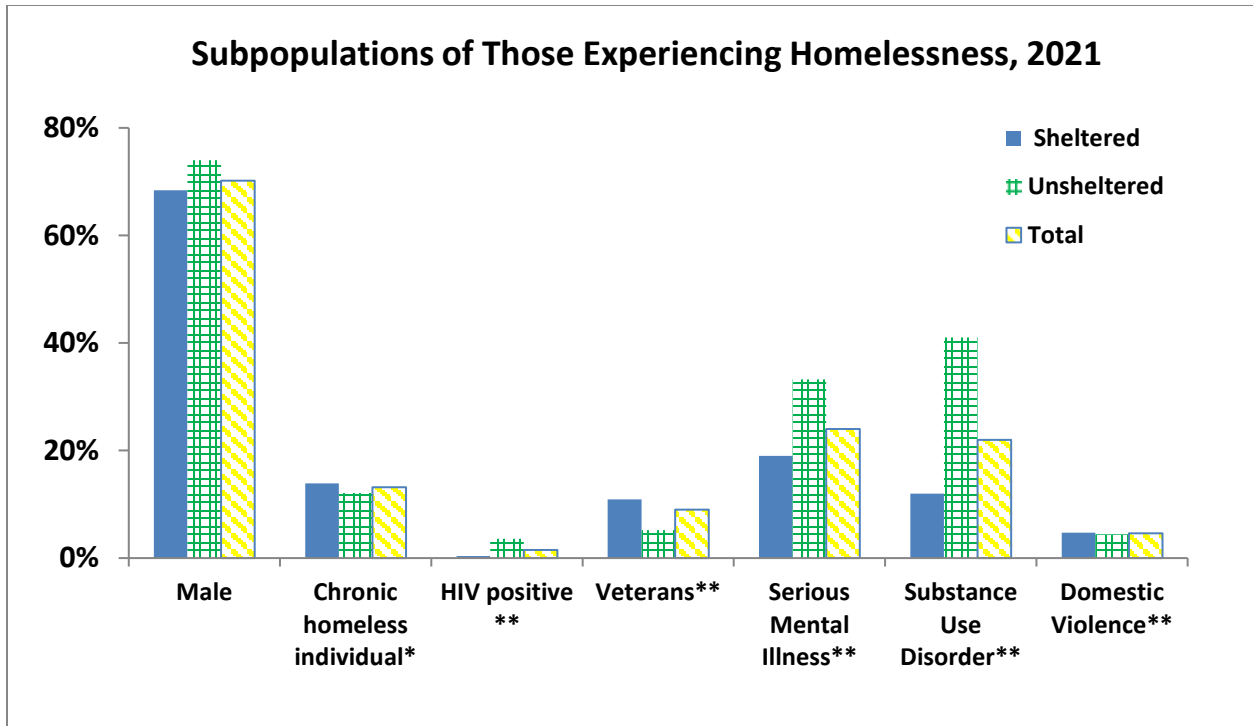


Figure 8

*sheltered individuals experiencing chronic homelessness are >18 year and in emergency shelter

**among adults only

Another subpopulation of particular interest is veterans. This year we found approximately one in eleven of persons experiencing homelessness were veterans (370 veterans; 8.8% of the adult population). There were 376 persons in veteran households. Approximately four of five veterans (80%) were in a sheltered condition. Of these 370 veterans, approximately one of eight (13%) were classified as experiencing chronic homelessness and of these chronically homeless, one of five were unsheltered (20%). However, the percent of veterans who were classified as chronically homeless did not differ between those sheltered and unsheltered (13% vs. 14%).

Other subpopulations reported in the total adult population experiencing homelessness include one of four with self-reported serious mental illness (24%) and over one of five reporting substance use disorder (22%; alcohol and/or other drugs). Not surprisingly, these rates were

higher among the unsheltered population (33% and 41%, respectively) vs. the sheltered population (19% and 12%, respectively). These conditions are self-reported, however, and may be artificially low as persons may not want to disclose their condition due to stigma.

One person experiencing homelessness in sixty-seven (1.5%) self-reported they were HIV positive although the true percentage may be higher since many may not have been tested and therefore do not know their status or do know their status but do not want to share that information, again due to stigma. Overall, approximately one in twenty (5%) of those experiencing homelessness had experienced domestic violence.

Figures 9 and 10 graph the racial and ethnic self-classification of those experiencing homelessness in the Dallas Metropolitan area. Among the unsheltered population, the observer classified the racial/ethnic group of individuals who could not be interviewed. Within the total population experiencing homelessness, over half were Black/African American (55%) with two of five, white (42%). Four percent considered themselves multiple races and 1%, Asian. Those unsheltered were more likely to be white while those in shelters were more likely to identify as Black/African American. Persons interviewed were asked if they considered themselves Hispanic and approximately one in seven did, varying by location (19% of the sheltered population vs. 2.4% of the unsheltered population).

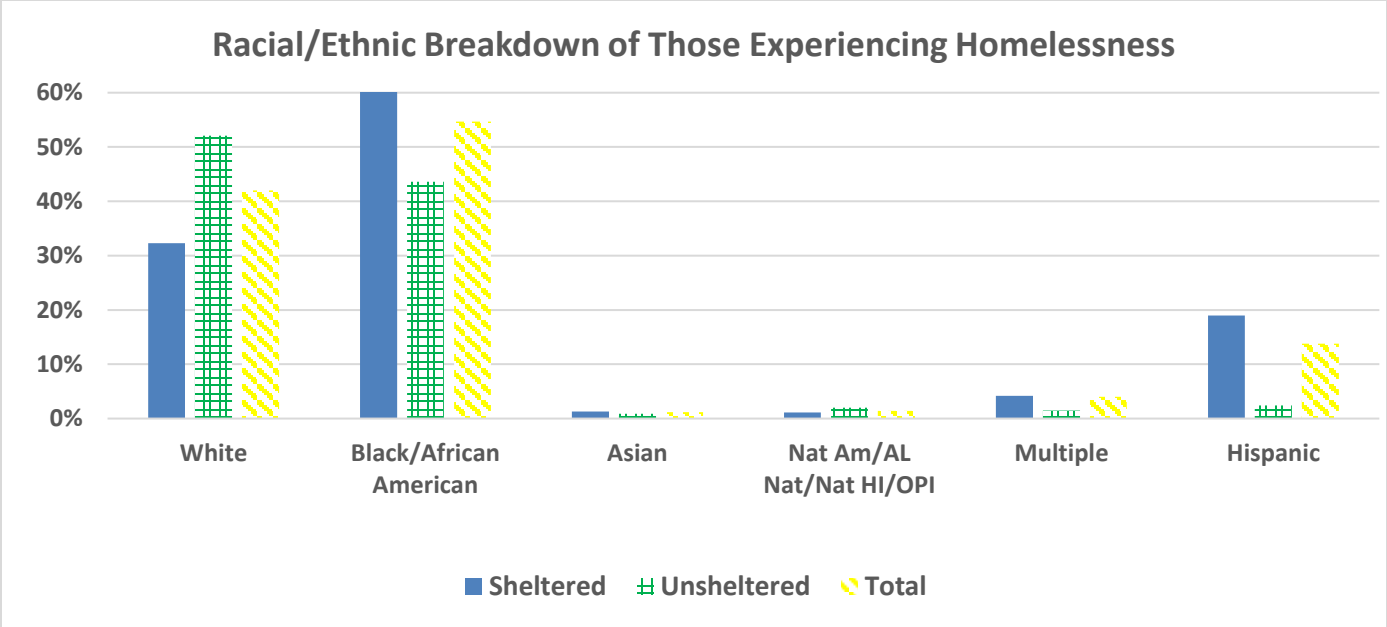


Figure 9

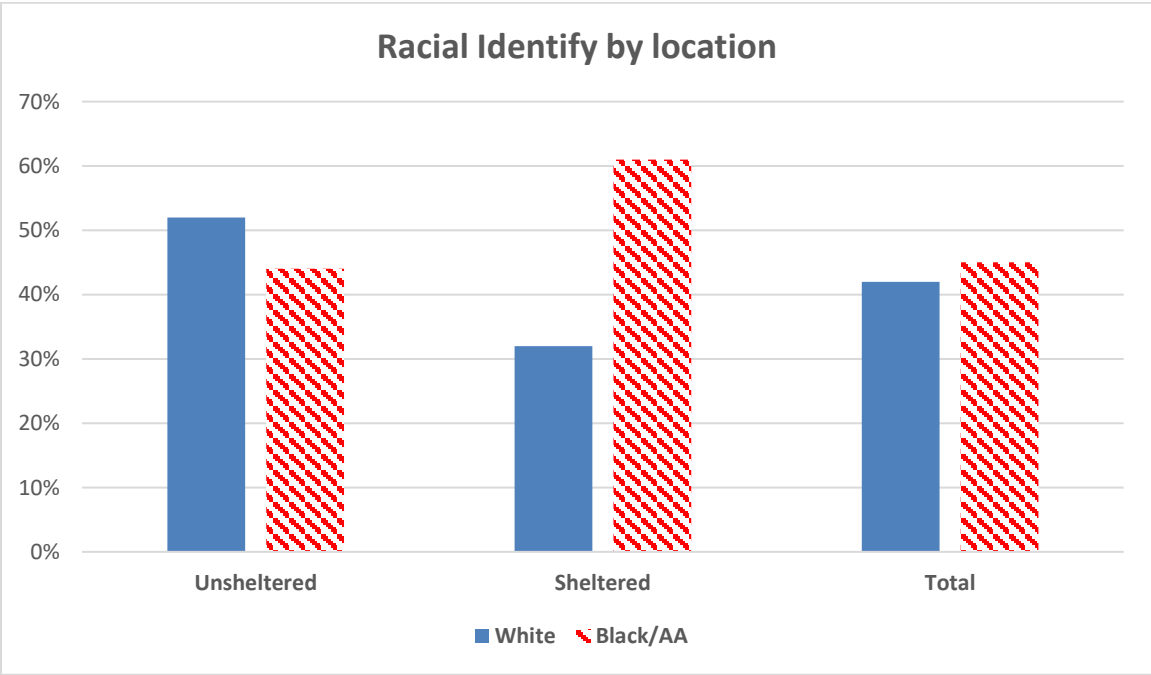


Figure 10

Finally, Figure 11 shows the number of sheltered and unsheltered young adults (ages 18-24 years) experiencing homelessness. They are further divided into unaccompanied young adults

and parenting young adults. All parenting young adults were sheltered, with 32 children under the age of 18 years in these parenting young adult households. Of the 115 unaccompanied young adults (18-24 years) who were in emergency shelter, seven (6%) were classified as chronically homeless while 5 out of 49 unsheltered unaccompanied young adults were so classified (10%).

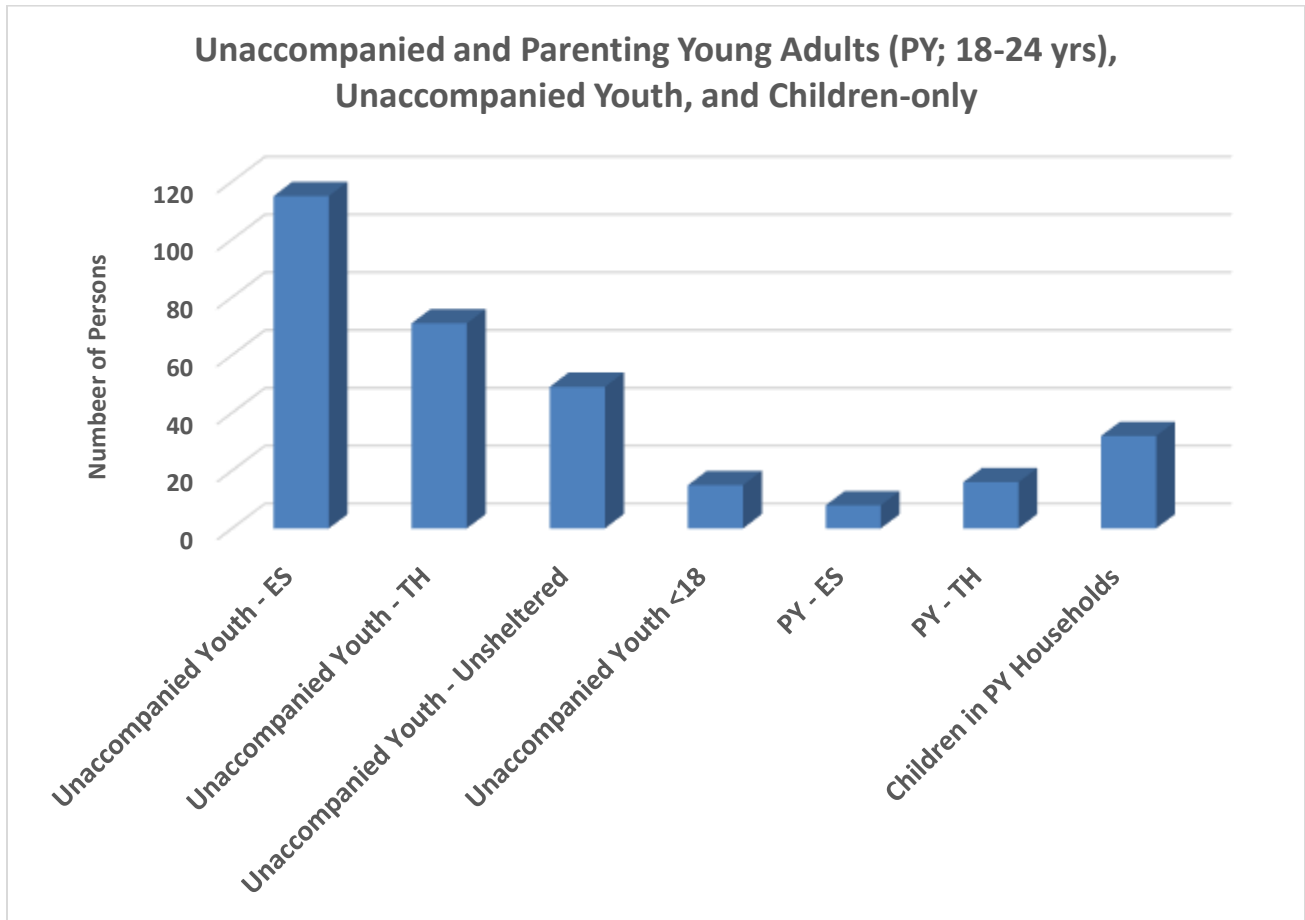


Figure 11

Discussion

A total of 4,570 persons experiencing homelessness were counted in Dallas Metropolitan area (Dallas and Collin counties). Of those counted this year, 1,432 (31%) were unsheltered (staying

in a place not meant for human habitation). Most of these unsheltered individuals (87%) were interviewed in Dallas County. However, it is important to note that the persons living unsheltered were classified where they were interviewed or spotted, which may not have been where they slept the night of the Count. Persons move around during the day and may congregate near services. Within the total CoC area, over half in emergency shelters. No children were counted among the unsheltered population, but one of every three persons in shelters were in households with children, with one in eight of the total sheltered population under age 18.

Nearly two out of every five unsheltered individuals had been homeless for three years or longer while one out of fourteen had experienced homeless for fewer than three months. We did not collect data on whether homelessness was due to the pandemic (loss of job, reduction in hours, and/or eviction) but one in four had become homeless within the last year.

As seen with many other social determinants of health, there were major racial disparities among those experiencing homelessness. While Blacks/African Americans represent not quite 24% of the composition of the total population of Dallas County⁵, they comprised over twice that percentage (55%) of those experiencing homelessness. This represents an issue that needs to be examined and addressed if homelessness is to be conquered in the area.

Subpopulation analysis showed that one out of eight of those experiencing homelessness met the HUD definition of chronic homelessness, one out of eleven self-identified as a veteran, and high rates of serious mental illness (one to four) and substance use disorder (nearly one of five) were found. A total of 249 young adults (18-24 years old) were among those experiencing homelessness. Thirty-two children under age 18 years were found in parenting youth households, all in emergency shelter or transitional housing.

⁵ <https://www.census.gov/quickfacts/fact/table/dallascountytexas,US/PST045219> accessed 4/26/21

Winter Storm Uri which occurred during the time of the Point-in-Time Count undoubtedly increased the number of persons found in emergency shelters and makes comparisons with previous years' counts unreliable. We estimate that approximately 600 of those who were counted in warming stations would have been on the streets were it not for the cold. The effect of the pandemic on availability of beds in the emergency shelters because of the necessity of social distancing during the pandemic also may have affected the emergency shelter count. In addition, persons experiencing homelessness may be reluctant to stay at a shelter due to fear of the virus. These factors make it very difficult to compare the 2021 Point-in-Time Count results with previous years' findings.

The most effective public health response to reduce community spread of COVID-19 among people experiencing homelessness and others is to ensure that all people experiencing homelessness have a safe, permanent home, where they can self-isolate or quarantine. Rapidly expanding access to housing will also improve healthcare outcomes and reduce reliance on expensive emergency services like hospital visits, thus decreasing the burden on the healthcare system and reducing costs.