



**City of Long Beach**  
Working Together to Serve

**Memorandum**

Date: August 20, 2018  
To: Patrick H. West, City Manager *P.H.W.*  
From: Kelly Colopy, Director of Health and Human Services *KC*  
For: Mayor and Members of the City Council  
Subject: **2017 Homeless Services Advisory Committee Annual Report**

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At its meeting of March 7, 2018, the Homeless Services Advisory Committee (HSAC) approved the attached 2017 Annual Report for distribution to the Mayor and City Council.

If you would like further information regarding this report, please call me at (562) 570-4016 or via email at [Kelly.Colopy@longbeach.gov](mailto:Kelly.Colopy@longbeach.gov).

ATTACHMENT

CC: CHARLES PARKIN, CITY ATTORNEY  
LAURA DOUD, CITY AUDITOR  
TOM MODICA, ASSISTANT CITY MANAGER/INTERIM DIRECTOR OF DEVELOPMENT SERVICES  
KEVIN JACKSON, DEPUTY CITY MANAGER  
REBECCA GARNER, ASSISTANT TO THE CITY MANAGER  
DEPARTMENT HEADS



# CITY OF LONG BEACH

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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March 12, 2018

HONORABLE MAYOR AND CITY COUNCIL

City of Long Beach, California

The Long Beach Homeless Services Advisory Committee (HSAC) respectfully submits the following annual report detailing progress on current efforts addressing the issue of homelessness in the Long Beach community. The report outlines achievements of the Long Beach Continuum of Care and recommendations for consideration by City Council to enhance the system's current capacity.

## **EXECUTIVE SUMMARY**

According to the 2017 biennial Point-In-Time count, the City of Long Beach encountered 1,863 persons who reported to be experiencing homelessness. This reflected a 21% decrease from the prior count in 2015. The City of Long Beach, Department of Health and Human Services (DHHS), Homeless Services Division (HSD) is the lead agency for the Long Beach Continuum of Care (CoC), a system of care that works in a coordinated approach to address the needs of households experiencing homelessness across the City. The HSD administers approximately \$11.5 million per year in federal, local, and private funding for homeless services. HSD serves as a pass through and monitoring entity to twelve funded agencies that provide a range of supportive services and housing in Long Beach.

Over the past year, the Long Beach CoC has been at the forefront in service coordination and community engagement including: providing services for 15,963 client contacts through the Multi-Service Center (MSC), outreaching to and engaging over 1,100 individuals experiencing homelessness on the streets, vaccinating over 560 individuals against Hepatitis A, lease up of 75 units of Veteran housing at the Villages at Cabrillo, and convening two summits to establish a strategic plan and work groups to carry out strategies to end homelessness in Long Beach. The HSAC also awarded \$15,000, from the Mayor's Fund, for motel vouchers and Homeward Bound Transportation; an important support for a significant gap in the system of care.

Despite local success in reducing homelessness significant challenges remain. These include continued low vacancy rates, high housing costs and insufficient prevention and housing resources to quickly stabilize homeless households. To address these challenges, HSAC recommends the following:

## Homeless Services Advisory Committee 2017 Annual Report

- 1) Fill the two (2) vacant seats on the committee (Districts 2 and Mayor at-large) to promote effective advisory communication with the council.
- 2) Continue collaboration with regional partners to expand upon and enhance best practices around housing and prevention services.
- 3) Continue to support the City's rapid response efforts by funding homeless outreach to increase capacity to connect persons experiencing homelessness with available services and reduce the indirect costs of homelessness.
- 4) Seek opportunities to increase mental health and substance use treatment services in the City of Long Beach.
- 5) Amend the Mayor's Fund ordinance to allow up to 10% of awarded funds to be used for administrative costs to encourage greater participation by service providers.
- 6) Make reducing homelessness and its effects a top priority and engage with county, state, and federal representatives to do the same.

### **State of Homelessness**

The Long Beach CoC, lead by the HSD, is required to conduct a biennial Point-In-Time (PIT) count as a receipt of funding from the U.S. Department of Housing and Urban Development. The PIT serves as a vital benchmark from which Long Beach can measure progress in reducing homelessness. Further, data collected during the PIT helps guide future resource allocation as it helps identify the characteristics of the local population. This information lends to enhancing system planning and program development while also testing the efficacy of programs and interventions aimed at ending homelessness. The PIT is also an opportunity to increase public awareness about homelessness as the county heavily relies on the participation of volunteers to successfully conduct a comprehensive count.

The count process involves two distinct activities: a service-based count and a street count. The service-based count is achieved by gathering data from emergency shelters, transitional housing programs, rapid rehousing, and permanent supportive housing programs serving persons experiencing homelessness in Long Beach. The street count is achieved by dividing the city into 47 mapped segments, canvassing them with community volunteers and CoC staff, and interviewing and counting unsheltered individuals.

The 2017 PIT was conducted on January 26, 2017. Over 400 community members were in attendance to assist in the street enumeration process. This was the largest number of volunteers ever recruited for a PIT, which was critical to ensuring that map segments were fully covered. Street Outreach teams canvassed the City in the days leading up to the PIT to validate Hot Spots and specialized outreach teams were dispatched to cover riverbeds, wetlands and marine areas during the PIT process. The PIT process also piloted Transitional Age Youth (TAY) special teams to rove citywide to known youth concentration areas. The 2017 PIT establishes the TAY baseline for future counts. In addition, a simultaneous digital count was piloted to capture real time data electronically during the street enumeration process. These combined efforts, along with volunteer community support, provided for the most comprehensive canvassing of the City to date.

The 2017 PIT reflects an incremental reduction in the total homeless population since 2011. The total number of people experiencing homelessness reported in the 2017 PIT was 1,863. A comparative analysis between the 2015 and 2017 Counts reflects a 21% reduction in the total number of persons experiencing homelessness. This represents the largest reduction between counts in recent history. This trend is consistent with the decreasing trend in the annual non-duplicated number of client contacts at the MSC. This decrease can be attributed to the multiple factors including the expansion of permanent housing, innovative models of outreach, and a well-coordinated system of care. Table 1 provides PIT results from 2011 to 2017. Please also see Attachment A, entitled “Biennial Homeless Count Comparison” and Attachment B, entitled “2017 Homeless Count Data”.

**Table 1: PIT Count Results in Long Beach**

| 2011  | 2013  | 2015  | 2017  |
|-------|-------|-------|-------|
| 3,164 | 2,847 | 2,345 | 1,863 |

### **Funding**

The HSD provides oversight for approximately \$11.5 million in federal, local, and private funding per year. Since 1995, the City Council has approved the annual application for CoC competitive funding from HUD. During fiscal year 2017, the City applied for and received a \$7.64 million award, which funds the HSD and its nonprofit partners to provide street outreach, coordinated entry and assessment, supportive services, transitional housing, rapid rehousing, and permanent supportive housing.

HSD also administers the following funding sources that complement the system of care: the Emergency Solutions Grant (ESG), Community Development Block Grant, HOME Investment Partnership Program, Emergency Food and Shelter Program, Homeless Veterans Initiative, Gateway Cities Council of Governments and the Mayor’s Fund. Other resources not directly overseen by the HSD but that provide enhancements to the Long Beach Continuum of Care include Veterans Affairs Supportive Housing (VASH), Supportive Services for Veteran Families (SSVF), and Set-Aside Housing Choice Vouchers through the Long Beach Housing Authority.

In February 2016, the Los Angeles County Board of Supervisors approved an action plan of 47 strategies to combat homelessness along with a one-time commitment of nearly 100 million dollars. Measure H, a voter approved ballot passed in 2017, increased the county’s sales tax by a quarter-cent, and is expected to raise approximately \$355 million annually to implement these strategies.

Shortly after the ballot Measure passed, HSD entered into negotiations with the Los Angeles County Chief Executive Office to secure a dedicated Measure H allocation for Long Beach to enhance local coordination of homeless services. HSD was successful in securing funding for four key strategies:

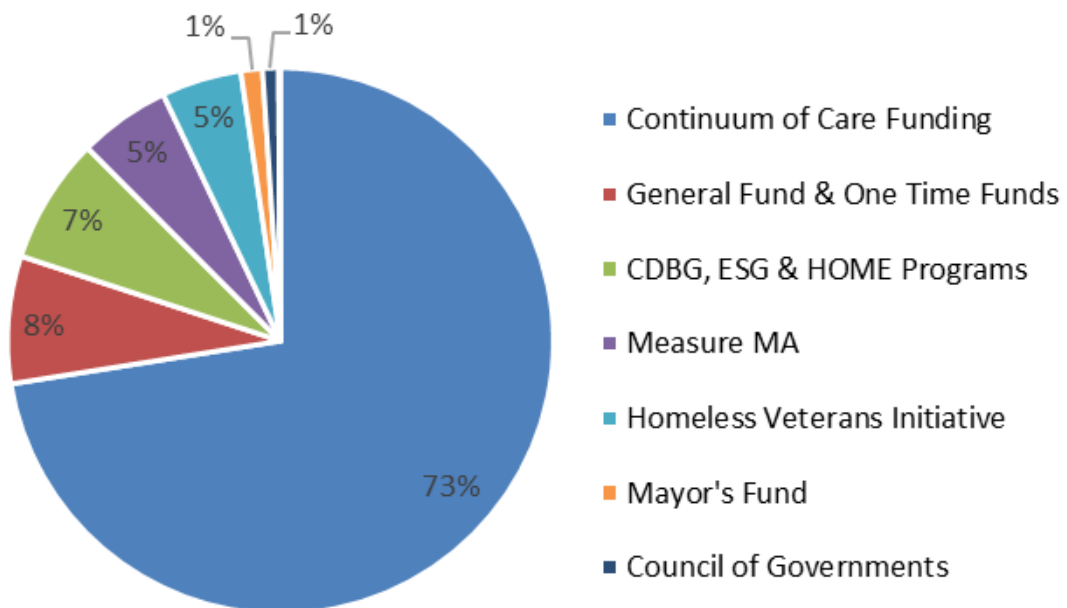
- A5, Homeless Prevention Services for Individuals
- B3, Partner with Cities to Expand Rapid Rehousing funds
- E6, Countywide Outreach System

- E7, Strengthen the Coordinated Entry System.

Combined, the City secured a total of \$1.76 million to support the aforementioned strategies and is currently in the contracting process to receive these funds. Further, the City is also working with the County for capital and operational funding for year-round shelter which will provide an additional 100 crisis and bridge housing beds. The shelter will have 24/7 access and operate under a low barrier model. HSD conducted a Request for Proposal process at the end of 2017 to subcontract out for strategies A5 and B3; two agencies were selected to administer these programs once Measure H funds have been disbursed to the City.

The City continues its commitment to supporting rapid response efforts by appropriating \$795,548 in general funds. The funds support efforts amongst the Health Department; Parks, Recreation, and Marine; and Public Works. Measure MA provides funding to the Fire Department’s Homeless Education and Response Team (HEART), a medically-staffed rapid response vehicle and team in the amount of \$471,045 and \$351,489 for the Police Department to support response efforts through its Quality of Life team in collaboration with City partners. Combined, these funding sources support programs that preserve services and housing resources that assist at-risk and homeless households achieve greater self-sufficiency and housing stability.

**Figure 1: Long Beach CoC Funding by Source**



## Community Engagement

Community education and engagement has been at the forefront of several strategies the HSD has been partaking in throughout 2017. In April 2017, the Community Connections for Homeless Solutions, a collaborative of providers including the City's HSD, convened a conference attended by over 150 persons representing Continuum of Care (CoC) funded programs, faith-based organizations, officials from city departments, concerned citizens, and non-profits serving the homeless. HSD staff shared recently released PIT results and facilitated breakout sessions to solicit community input on strategies to improve service coordination in the city.

Members of the faith community expressed a desire to extend this forum to a broader faith community. An interfaith summit was subsequently convened in October 2017 which was attended by over 80 faith-based communities located in Long Beach. These conferences led to the establishment of five work streams to address:

- 1) **Housing** – Short and long term housing solutions for individuals and families.
- 2) **Prevention** – Preventing individuals and families from becoming homeless.
- 3) **Education** – Creating community awareness and dispelling misconceptions.
- 4) **Mentoring** – Being a role model, offering support and encouraging others.
- 5) **24 X 7** – Closing the gaps in service and crisis assistance after business hours.

These breakout groups will convene in Spring 2018 to continue strategic planning and coordination efforts.

## Housing

The Long Beach CoC system continues to focus on the need to expand housing availability to homeless households. 2017 was a busy year for new project developments including the addition of a new Permanent Supportive Housing (PSH) Project for Chronically Homeless individuals as well as the opening of Anchor Place at Century Villages at Cabrillo (CVC). Anchor Place includes a mix of 120 one-, two- and three-bedroom units, including 75 reserved for veterans experiencing homelessness and 45 units for extremely low-income residents. The 75 units for veterans are subsidized through Veterans Affairs Supportive Housing (VASH) vouchers provided by the Housing Authority of the City of Long Beach (HACLB) and Housing for Health, a County of Los Angeles flexible housing subsidy program.

The lease up process for the 75 units of VASH was coordinated through the Long Beach Coordinated Entry System (CES) for Veterans. This involved a six-month planning collaborative effort that included CVC staff, Long Beach CoC providers and the Veterans Administration with a commitment to prioritizing highly impacted Veterans who were living on the streets and in transitional housing. The Vet Registry, is a by name list of all Veterans experiencing homelessness in Long Beach, and was utilized to prioritize households for Anchor Place. This process was fully supported by all partners and was carried out in a series of meetings and processes to ensure the most vulnerable Veterans were being included in the list for Anchor Place. A total of 91 referrals were submitted for the 75 units to ensure full occupancy. The Veteran Service Collaborative includes, the Department of Health and Human Services, SSVF Providers Mental Health America's

Operation Healthy Homecoming, US Veterans Initiative and 1736 Family Crisis Center, the Long Beach Veterans Administration and the Long Beach Housing Authority.

Table 2 provides the number of beds for individuals and families that are available across the City by component type for funded and unfunded partners:

**Table 2: LB CoC Homeless Shelter and Housing Resources by Number of Beds**

| Housing Type                 | Singles | Family | Total               | Funding Source / Providers  |
|------------------------------|---------|--------|---------------------|---|
| Emergency Shelter            | 161     | 100    | <b>261</b>          | ESG; Long Beach Rescue Mission; Domestic Violence Service Providers |
| Winter Shelter               | 165     | 0      | <b>165 seasonal</b> | Los Angeles County  |
| Transitional Housing         | 248     | 91     | <b>339</b>          | Long Beach CoC  |
| Permanent Supportive Housing | 1,110   | 582    | <b>1,692</b>        | Long Beach CoC; VASH (Veterans Affairs Supportive Housing)          |
| Rapid Re-Housing             | 265     | 256    | <b>521</b>          | ESG, SSVF for Veterans, Long Beach CoC                              |
| Other Permanent Housing      | 150     | 0      | <b>150</b>          | Savannah Housing (Veterans)   |
| <b>Total:</b>                |         |        | <b>3128</b>         |   |

\*Date Source: 2017 Housing Inventory Chart

## Hepatitis A

In September 2017, the State of California declared a state of emergency in order to help control the Hepatitis A outbreak and increase the supply of vaccines to meet the need. Outbreaks were confirmed in Los Angeles, San Diego and Santa Cruz and were associated with persons experiencing homelessness and/or using illicit drugs. Although there was no reported outbreak in Long Beach, much planning was done to ensure a coordinated response to prevent an outbreak amongst the local homeless population. The Homeless Services Division, Public Health Emergency Management team and other key DHHS staff convened a series of Hepatitis A POD events during the months of September, November and December and successfully vaccinated 563 individuals. PODs were located at Mental Health America’s Drop-In-Center, the Long Beach Rescue Mission, the Multi-Services Center, St. Luke’s Church, First Congregational Church and The Center. Street outreach teams in partnership with The Children’s Clinic nursing team also provided vaccinations to individuals living in encampments along the LA River Corridor.

## Mayor’s Fund Recommendation

On November 1, 2017, the Homeless Services Advisory Committee (HSAC) held a meeting to discuss a special allocation of the Mayor’s Fund. HSAC recommended that a portion of the Mayor’s Fund, in the amount of \$15,000 be allocated to Urban Community Outreach for the provision of homeless services, with the balance to remain in the Mayor’s Fund to accrue interest. Urban Community Outreach will provide relocation assistance

for homeless individuals or families seeking to be reconnected with their home town social support networks as well as provide short term motel voucher assistance in the absence of shelter availability. The total fund allocation will be used exclusively for transportation costs related to relocation assistance and motel voucher expenditures.

## **Challenges**

Despite the successes of the City of Long Beach and the CoC partner agencies in alleviating homelessness in Long Beach, significant challenges stand in the way of progress. These challenges include:

- Rental costs continue to soar in Long Beach, while the median household income has remained relatively stagnant. This is extremely challenging for households on fixed incomes.
- Low vacancy rates with limited housing choice voucher acceptance rates make finding housing difficult for over 600 Housing Choice Voucher holders. Voucher holders who do not lease up within four months of voucher issuance will lose the voucher. Once a voucher expires, candidates must restart the voucher application process.
- State law changes, such as AB 109, Proposition 47, and Proposition 57, have resulted in more people living with mental illness, criminal histories, and substance use disorders in the community without plans for housing or linkages to support networks and resources.
- The California State conservatorship system does not have the capacity or processes necessary to support the demand for long-term mental healthcare for those that are unable to function in society.
- Convincing a chronically homeless person to accept help often requires multiple outreach contacts over an extended period of time.

**Recommendations.** To address these challenges and continue to reduce the number of people experiencing homelessness in Long Beach, the HSAC recommends the following:

- Collaborate with other city agencies to study and create best practices around the issue of housing ordinances with a view to increasing the supply of low-income housing and removing obstacles to getting and keeping people housed. Agencies to collaborate with include those with the jurisdiction to study the following issues:
  - Zoning and construction regulations that impede construction of low-income housing.
  - Prioritization of 10% of affordable housing in the city for low-income individuals and families experiencing homelessness.
  - Ways to incentivize landlords to commit a percentage of their rental housing stock to subsidized housing programs. Incentives could include proportional tax credits, city-funded insurance against subsidized tenant damages, and/or fee waivers for building improvements (Implemented successfully in Nashville, TN).



## Homeless Services Advisory Committee 2017 Annual Report

- Establishment of a “Landlord Liaison Project” to track and match homeless residents with landlords who have vacancies and offer a hotline for resolving subsidized tenant issues (Implemented successfully in Seattle, WA).
- Pursue multiple avenues to prevent Long Beach residents from becoming homeless.
  - Work with the Long Beach Housing Authority (or other appropriate agency) to look at the feasibility of a “Tenants Rights” ordinance to stop no-cause evictions that subvert the intent of state limits on rental rate increases.
  - Collaborate with appropriate city agencies to study the possibility of creating a city eviction prevention fund based on the best practices such as the Supportive Services for Veteran Families (SSVF) model to provide gap rental assistance for families at imminent risk of becoming homeless but that do not yet meet HUD definition of homelessness.
- Expand the city’s homeless outreach capacity to better connect persons experiencing homelessness with available services and reduce the indirect costs of homelessness.
  - Explore avenues that would allow the city to expand the capacity of the Long Beach HSD outreach and Police Department Quality of Life teams to provide city-wide coverage across all LBPD divisions (requires 8-10 additional dedicated police officers and 4-5 additional HSD outreach staff).
  - Continue to support the Lbfd “HEART” program and expand it for city-wide coverage if it proves effective at reducing the overall cost of servicing the homeless population.
- Study options for mitigating the effects of homelessness on the community
  - Study options for sheltering homeless individuals who do not meet the requirements of traditional shelters and resort to living on the street. Models may include Portland’s Dignity Village, Los Angeles’ former Dome Village, the San Francisco Navigation Center, the San Francisco Community Transition Centers, city-managed urban campgrounds on vacant land, and converting unused city property or motels into Single Room Occupancy (SRO) units.
  - Establish a Voluntary Work Program to recruit homeless individuals for labor crews to clean up parks, streets, and city properties, earn money, and get a hot lunch and a shower.
  - Explore opportunities to partner with CoC agencies and faith-based organizations to provide shelter intakes over the weekend.
  - Increase the public’s awareness of the Mayor’s Fund and other ways they can contribute to eliminating homelessness through a strategic communications initiative that utilizes community meetings, the city’s website, newsletters and social media networks of the Mayor, Council Members, and senior city staff.

## Homeless Services Advisory Committee 2017 Annual Report

- Increase mental health and substance use treatment services in the City of Long Beach.
  - Reestablish former city drug and alcohol rehabilitation services that were returned to Los Angeles County in 2009.
  - Work with Los Angeles County Department of Health Services to secure additional supportive housing rental subsidies through the Flexible Housing Subsidy Pool.
  - Support applications for programs funded by Prop 47 savings.
- Make reducing homelessness and its effects a top priority and engage with county, state, and federal representatives to do the same.
  - Urge federal representatives and HUD to increase housing funding and reinstate funding for supportive services.
  - Petition state representatives to increase funding for addiction treatment and mental health services and hospitals.
  - Collaborate with county representatives to improve jail and foster system transition and release processes to link people exiting those systems with the housing and supportive services they need.
- Amend the Mayor's Fund ordinance to allow up to 10% of awarded funds to be used for administrative costs to encourage greater participation by service providers.

### **Conclusion**

Addressing homelessness only on the back end by attempting to house those who are already without a home will never result in an end to homelessness. Homelessness is not a single problem, but the common result of a multitude of complex problems in our society, including, but not limited to, economic hardship, lack of job skills training, mental illness, substance use disorder, physical disability, limited support networks for criminal offenders exiting the criminal justice system and young adults exiting the foster system.

Because these problems primarily affect segments of society that are underrepresented in the political system, solving them will require a great deal of courage, commitment, and sacrifice on the part of our leaders and our citizens. Because the responsibilities for addressing these problems span all levels of government and involve all sectors of the economy, strong collaboration and coordination across organizations are critical to success.

The HSAC has identified a set of recommendations in this report that are within the power of the City of Long Beach to implement.

The HSAC asks that the City Council and the citizens of Long Beach seriously consider the recommendations in this report and continue to make progress toward reducing and ultimately eliminating homelessness in the City of Long Beach.

## Homeless Services Advisory Committee 2017 Annual Report

Respectfully Submitted:

Jeffrey R. Johnson, Chair

Allison Kripp, Vice Chair

Linda Wilson

Homeless Services Advisory Committee

Attachments:

Homeless Count Comparison

Homeless Count Fact Sheet

FY 2016 Priority Listing



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 HOMELESS SERVICES DIVISION  
 BIENNIAL HOMELESS COUNT COMPARISON  
 HOMELESSNESS DATA EXCHANGE (HDX)

|  | 2013         | 2015         | 2017         | 2015 & 2017 Comparison |
|--|--------------|--------------|--------------|------------------------|
| <b>Unsheltered</b>                         | <b>1879</b>  | <b>1513</b>  | <b>1208</b>  | <b>-20%</b>            |
| <b>Sheltered</b>                           |              |              |              |                        |
| Emergency Shelter                          | 389          | 391          | 354          |                        |
| Transitional Housing                       | 555          | 416          | 301          |                        |
| Safe Haven                                 | 24           | 25           | *            |                        |
| <b>Total</b>                               | <b>968</b>   | <b>832</b>   | <b>655</b>   | <b>-21%</b>            |
| <b>Total Unsheltered &amp; Sheltered</b>   |              |              |              |                        |
|  | <b>2,847</b> | <b>2,345</b> | <b>1,863</b> | <b>-21%</b>            |
| <b>Chronic Homelessness</b>                |              |              |              |                        |
| Unsheltered                                | 910          | 731          | 539          |                        |
| Sheltered                                  | 151          | 196          | 147          |                        |
| <b>Total</b>                               | <b>1,061</b> | <b>927</b>   | <b>686</b>   | <b>-26%</b>            |
| <b>Chronic Homelessness Household Type</b> |              |              |              |                        |
| Individuals                                | 1,026        | 905          | 592          |                        |
| Adult in Families                          | 35           | 22           | 94           |                        |
| <b>Total</b>                               | <b>1,061</b> | <b>927</b>   | <b>686</b>   | <b>-26%</b>            |
| <b>Veterans</b>                            |              |              |              |                        |
| Unsheltered                                | 164          | 94           | 110          | 17%                    |
| Sheltered                                  | 363          | 214          | 208          | -3%                    |
| <b>Total</b>                               | <b>527</b>   | <b>308</b>   | <b>318</b>   | <b>3%</b>              |
| <b>Homeless Subpopulations</b>             |              |              |              |                        |
| <b>Unsheltered</b>                         |              |              |              |                        |
| Adults with a Serious Mental Illness       | 476          | 550          | 451          |                        |
| Adults with a Substance Use Disorder       | 376          | 330          | 315          |                        |
| Adults with HIV/AIDS                       | 28           | 13           | 19           |                        |
| Victims of Domestic Violence               | 101          | 108          | 141          |                        |
| <b>Sheltered</b>                           |              |              |              |                        |
| Adults with a Serious Mental Illness       | 216          | 209          | 135          |                        |
| Adults with a Substance Use Disorder       | 241          | 127          | 71           |                        |
| Adults with HIV/AIDS                       | 34           | 30           | 37           |                        |
| Victims of Domestic Violence               | 64           | 97           | 105          |                        |

\*Safe Haven project no longer in operation.  
 Homeless Subpopulations - self-reported, includes duplicate counts.

|              | 2013         | 2015         | 2017         | % of 2015   |
|--------------|--------------|--------------|--------------|-------------|
| Adults       | 2,513        | 2,090        | 1,722        | 92%         |
| Children     | 334          | 255          | 141          | 8%          |
| <b>Total</b> | <b>2,847</b> | <b>2,345</b> | <b>1,863</b> | <b>100%</b> |

### Age

|              |              |              |              |             |
|--------------|--------------|--------------|--------------|-------------|
| Under Age 18 | 334          | 255          | 141          | 11%         |
| 18 to 24     | 138          | 134          | 89           | 6%          |
| 25 to 34     | 353          | 352          | 307          | 15%         |
| 35 to 44     | 463          | 375          | 341          | 16%         |
| 45 to 54     | 860          | 658          | 451          | 28%         |
| 55 to 61     | 450          | 382          | 319          | 16%         |
| Over age 62  | 249          | 189          | 215          | 8%          |
| <b>Total</b> | <b>2,847</b> | <b>2,345</b> | <b>1,863</b> | <b>100%</b> |

### Gender - Adults

|  |              |              |              |             |
|--|--------------|--------------|--------------|-------------|
| Female                                       | 661          | 638          | 481          | 28%         |
| Male   | 1,851        | 1,446        | 1,227        | 71%         |
| Transgender                                  | 3            | 6            | 12           | 1%          |
| Does Not Identify as Male/Female/Transgender |              |              | 2            | 0%          |
| <b>Total</b>                                 | <b>2,515</b> | <b>2,090</b> | <b>1,722</b> | <b>100%</b> |

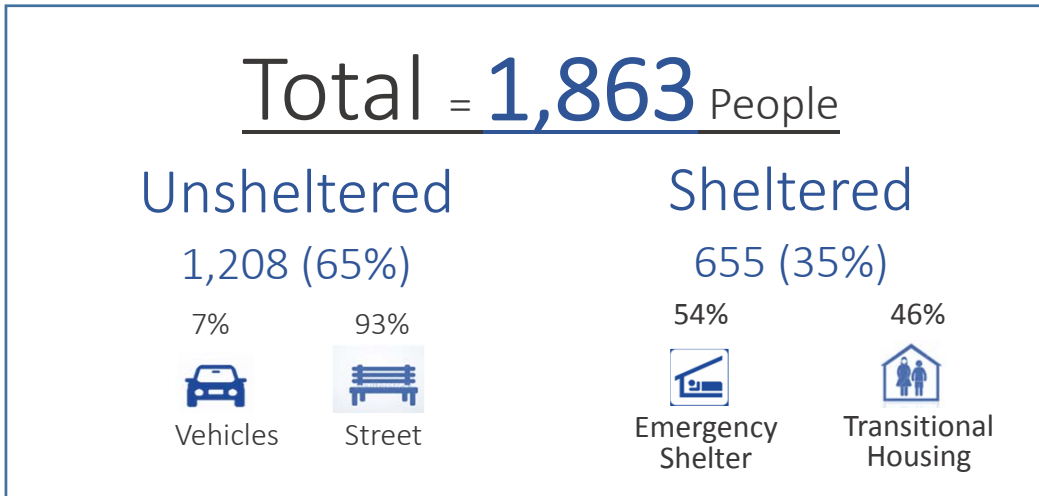
### Ethnicity - Adults

|                         |              |              |              |             |
|-------------------------|--------------|--------------|--------------|-------------|
| Non-Hispanic/Non-Latino | 2,057        | 1,620        | 1,311        | 76%         |
| Hispanic/Latino         | 458          | 470          | 411          | 24%         |
| <b>Total</b>            | <b>2,515</b> | <b>2,090</b> | <b>1,722</b> | <b>100%</b> |

### Race - Adults

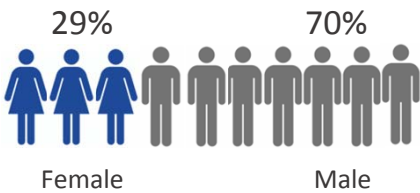
|  |              |              |              |             |
|--|--------------|--------------|--------------|-------------|
| American Indian or Alaska Native                   | 53           | 37           | 53           | 2%          |
| Asian or Native Hawaiian or Other Pacific Islander | 81           | 75           | 93           | 4%          |
| Black or African-American                          | 844          | 678          | 544          | 32%         |
| White  | 1,450        | 1,214        | 961          | 58%         |
| Multiple Races or Other                            | 87           | 86           | 71           | 4%          |
| <b>Total</b>                                       | <b>2,515</b> | <b>2,090</b> | <b>1,722</b> | <b>100%</b> |

# 2017 HOMELESS COUNT DATA



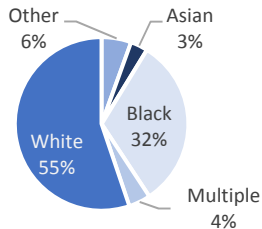
## Demographics

### Gender

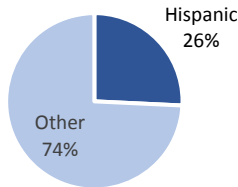


Note: 1% of those surveyed identified as transgender.

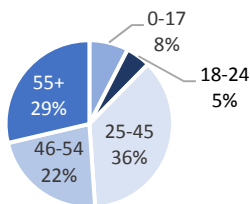
### Race



### Ethnicity

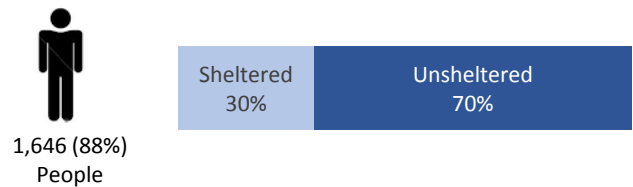


### Age

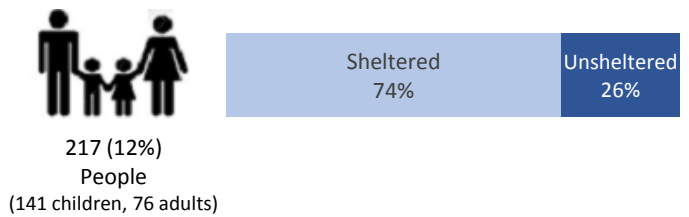


## Subpopulations

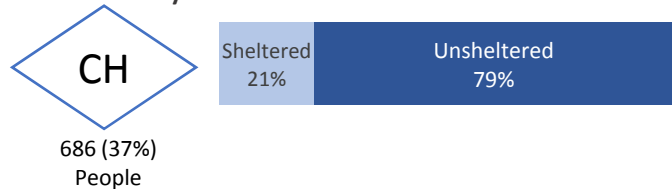
### Individuals



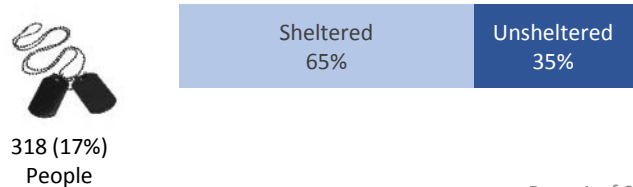
### Families



### Chronically Homeless



### Veterans



The 2017 Homeless Count was conducted on January 26, 2017 with the help of over 400 community members. Data collected during this process is based on self-report.

## Survey respondents who identified as:

LGBTQ



58 People

Students



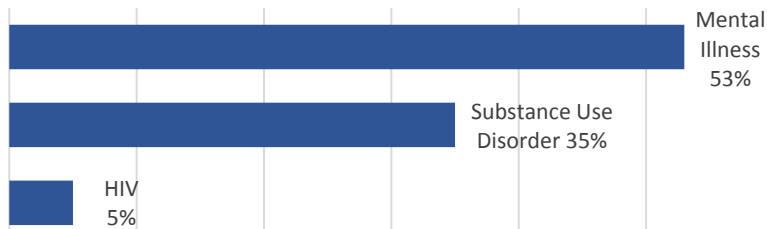
61 People

Former Foster Care

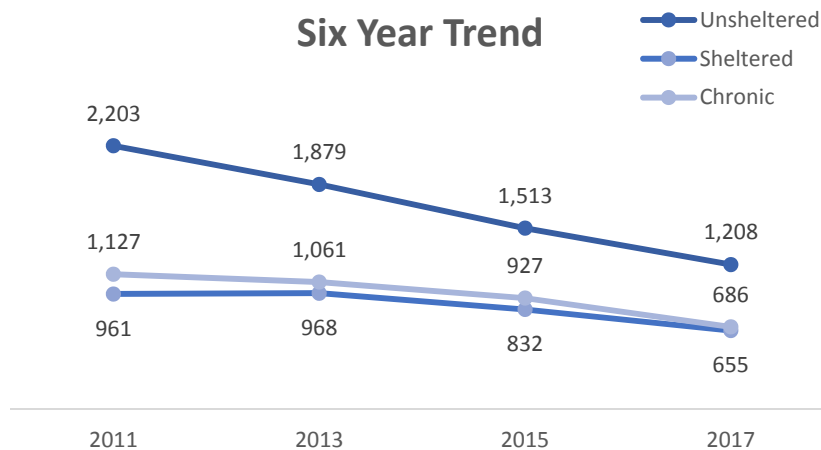


101 People

**59%** of respondents reported a disabling condition\*

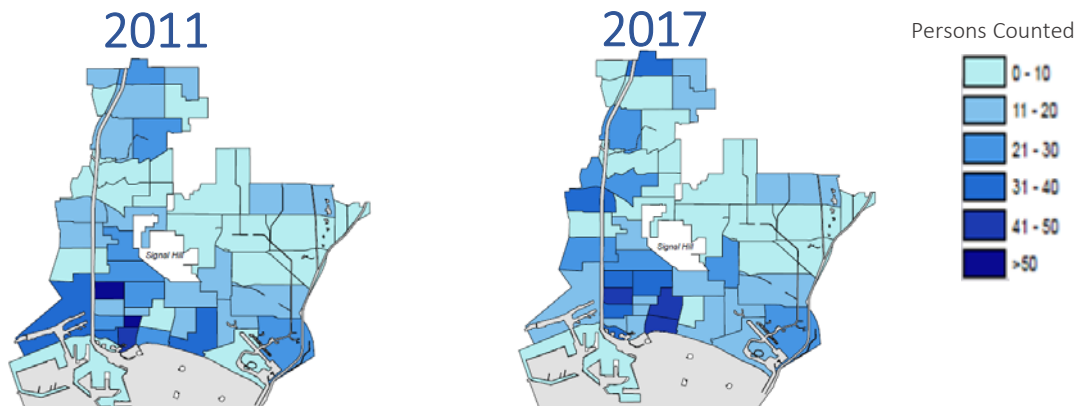


### Six Year Trend



## Map Comparison

Maps reflect data collected during the street enumeration portion of the count process.



\*Percentages reflect duplicative counts as respondents may report multiple disabling conditions.

## 2016 LONG BEACH COC PROJECT PRIORITY LISTING

| Final Rank  | Agency Name  | Project Name                                | Component Type | Total Request (HUD 100%) |
|---|--|---|----------------|--------------------------|
| 1   | Mental Health America of Los Angeles                       | SPC 05 CH                                   | PH - PSH       | \$109,050                |
| 2   | Mental Health America of Los Angeles                       | SPC 10                                      | PH - PSH       | \$97,047                 |
| 3   | United States Veterans Initiative                          | SPC 96/99                                   | PH - PSH       | \$242,360                |
| 4   | Mental Health America of Los Angeles                       | SPC 11                                      | PH - PSH       | \$97,276                 |
| 5   | United States Veterans Initiative                          | Cabrillo Plaza PHD                          | PH - PSH       | \$373,212                |
| 6   | Mental Health America of Los Angeles                       | SPC 95/00                                   | PH - PSH       | \$477,241                |
| 7   | Mental Health America of Los Angeles                       | Street to Home                              | PH - PSH       | \$871,884                |
| 8   | PATH Ventures  | Family Commons                              | PH - PSH       | \$685,120                |
| 9   | Mental Health America of Los Angeles                       | Chronic Homeless Housing - CHH              | PH - PSH       | \$403,228                |
| 10  | United States Veterans Initiative                          | CHAMPS                                      | PH - PSH       | \$277,567                |
| 11  | Catholic Charities of Los Angeles, Inc.                    | Transition in Place - Families              | PH - RRH       | \$216,769                |
| 12  | Mental Health America of Los Angeles                       | Transition in Place - Youth                 | PH - RRH       | \$207,632                |
| 13  | PATH   | Rapid Rehousing                             | PH - RRH       | \$358,220                |
| 14  | City of Long Beach Department of Health and Human Services | Homeless Management Information System HMIS | HMIS           | \$332,030                |
| 15  | Mental Health America of Los Angeles                       | Homeless Assistance Program                 | SSO - CES      | \$226,963                |
| 16  | City of Long Beach Department of Health and Human Services | MSC   | SSO - CES      | \$842,737                |
|   | - Alliance for Housing and Healing                         | - Mainstream                                |                |                          |
|   | - The Children's Clinic                                    | - Homeless Healthcare                       |                |                          |
|   | - Goodwill, SOLAC  | - Employment Services                       |                |                          |
| 17  | Interval House   | Domestic Violence Shelter                   | TH             | \$168,270                |
| 18  | 1736 Family Crisis Center                                  | Domestic Violence                           | TH             | \$489,879                |
| 19  | United States Veterans Initiative                          | Advance                                     | TH             | \$224,843                |
| 20a   | United States Veterans Initiative                          | Veterans In Progress VIP                    | TH             | \$99,033                 |
| 20b   | United States Veterans Initiative                          | Veterans In Progress VIP                    | TH             | \$150,632                |
| 21  | Harbor Interfaith Services, Inc.                           | Harbor PSH                                  | PH - PSH       | \$361,223                |
| <b>2016 CoC FINAL PRO RATA NEED:</b>                    |  |   |                | <b>\$7,312,216</b>       |
| N/A   | City of Long Beach Department of Health and Human Services | Long Beach CoC Planning                     | Planning       | \$219,366                |
| N/A   | City of Long Beach Department of Health and Human Services | Long Beach CoC UFA                          | UFA            | \$109,683                |
| <b>TOTAL 2016 CONTINUUM OF CARE APPLICATION AMOUNT:</b> |  |   |                | <b>\$7,641,265</b>       |