

Acknowledgements

The City of Upland 2012 Homeless Count is the result of a partnership between the County of San Bernardino, Department of Behavioral Health, Office of Homeless Services and the City of Upland, Redevelopment Department and Recreation & Community Services Department, along with over a dozen local community and faith-based organizations and over 40 community volunteers.

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County of San Bernardino, Department of Behavioral Health,
Office of Homeless Services

and

City of Upland, Redevelopment Department and
Recreation & Community Services Department.

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I. Executive Summary

The primary purpose of this report is to provide key findings and related recommendations based upon the information gathered through the “City of Upland 2012 Homeless Count and Survey.” The results of the Homeless Count and Survey provide the City of Upland and its community stakeholders with information that serves as the basis for three (3) important goals:

- Understanding the nature and extent of the current trends in homelessness in Upland;
- Responding to the unmet needs and gaps in services for homeless individuals and families in Upland;
- Developing local community strategies to meet the goal of eradicating homelessness in this community over the coming years.

The homeless count revealed that there are 159 persons who are homeless in the City on a given day consisting of 115 (72%) adults and 44 (28%) children that make-up 110 households. Of these persons, 92 or 58% were unsheltered, and 67 or 42% were sheltered in emergency shelter and transitional housing programs.

Of the 115 adults encountered:

- 73 (63%) were male and 42 (37%) were female;
- 57 (49%) were White, 24 (21%) were Latino, 21 (18%) were African American, 3 (3%) were Asian and 3 were Native American and 7 (6%) were identified as other;
- 30 (26%) were between the ages of 50-61, 29 (25%) were between 40-49, 27 (24%) were between 30-39, 11 (10%) were between 25-29 and another 11 between 18-24 and 6 (5%) were between 62-69;
- 33 (29%) had children living with them.

Results of the homeless survey revealed the following subpopulation information for unsheltered adults:

1. 61% are chronically homeless¹;

¹ Chronically Homeless, as defined by HUD is an unaccompanied homeless individual with a disabling condition, or a family with at least one adult member who has a disabling condition, who has either been continuously homeless for a year or more OR has had at least four (4) episodes of homelessness in the past three (3) years.” An episode of homelessness is a separate, distinct, and sustained stay in a place not meant for human habitation, on the streets in an emergency homeless shelter and/or in a HUD-defined Safe Haven. A chronically homeless person must be disabled during each episode. A disabling condition is defined as “a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions.” A disabling condition limits an individual’s ability to work or perform one or more activities of daily living.

2. 41% have physical disabilities;
3. 39% are substance abusers;
4. 37% have chronic health conditions;
5. 30% were released from a correctional institution during the 12 months prior to the survey;
6. 22% are victims of domestic violence;
7. 20% are veterans;
8. 17% have mental health issues;
9. 13% have developmental disabilities.

Other survey findings for unsheltered adults included:

10. 72% consider themselves a resident of Upland and 78% of those who consider themselves a resident have two or more specific ties to this community
11. 24% work part-time and 6% work full-time;
12. 30% have no monthly income;
13. 28% stated that the primary reason they became homeless was due to personal reasons that largely included divorce, domestic violence, and death of a spouse or parents; 15% stated as a result of loss of job; and 11% stated as a result of an injury and/or disability.

Key Findings and Recommendations

The following key findings and recommendations are provided in order to assist the City of Upland and its community stakeholders with information necessary to design and implement housing and social service strategies needed to provide the tools and means for homeless residents to become stable, productive contributors to this community.

Key Finding #1: Substantial Chronic Homeless Population

- 61% of unsheltered homeless adults are chronically homeless having lived continuously on the streets for one year or more and having a disabling condition such as a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, that limits an individual's ability to work or perform one or more activities of daily living."

Recommendation #1: Establish a Coordinated Community Outreach, Engagement, Treatment, and Permanent Supportive Housing Initiative

- identify, engage, house, and provide integrated supportive services to the most vulnerable, visible, and hardest-to-reach chronically homeless single adults and families who have been living on the streets of Upland.

Pursuing this initiative would involve the following four activities: 1) implementing a local “Street-to-Home” project; 2) obtaining Shelter Plus Care certificates in order to subsidize permanent housing for persons with disabling conditions; 3) securing HUD Veterans Affairs Supportive Housing (VASH) vouchers in order to subsidize permanent housing for veterans and immediate families; and 4) applying for HUD Continuum of Care Homeless Assistance funds for permanent supportive housing.

1. implementing a local “Street-to-Home” project

This action step will involve participation in a national movement of communities working together to find permanent homes for 100,000 of the country’s most vulnerable homeless individuals and families by July of 2013 (see www.100khomes.org).

The 100,000 Homes Campaign focuses on identifying and housing the most long-term and vulnerable individuals and families who remain trapped in homelessness and dependent on costly emergency services. The Campaign is designed to fundamentally alter our response to chronic homelessness by giving communities concrete tools and connecting the change agents with one another so no one has to innovate alone.

A working group should be formed to design and implement a local “Street-to-Home” project which will identify, engage, house, and provide integrated supportive services to the most vulnerable, visible, and hardest-to-reach chronically homeless single adults and families who have been living on the streets of Upland. A local community vulnerability index will be used to identify project participants that must meet the following local criteria before being placed into the proposed projects:

- Local Residency which will be determined by a series of questions from a local index that will focus on “ties” to the community such as having worked, gone to school, and/or family living in Upland;
- Length of time homeless on the streets in Upland should be one year or longer;

Other screening criteria for inclusion in the project should include:

- “Frequent Users of Public Services:” Public services include correctional facilities, courts, emergency health care services, inpatient care, motel vouchers, and seasonal shelter programs.
- “Frequent Service Call Generators:” These are persons who by their activity, prominent location, and level of destitution, generate the most calls for service for the police department, fire department, mental health and other outreach teams. Calls may be due to their location (church, school, shopping/dining area),

behavior, negative impact on their surroundings (trash, litter, health hazards), or community concern.

Those persons identified as “vulnerable” through the index will be prioritized for engagement and treatment by outreach workers and volunteers and will be readily re-housed as quickly as possible utilizing a variety of resources including the housing subsidy resources noted below. Potential participants must be willing to engage with the proposed program including participating in an intake and assessment that will serve as a basis for developing a service plan and working with a case manager to fulfill the goals and objectives of their particular plan in order to obtain and maintain permanent supportive housing.

2. obtaining Shelter Plus Care certificates

The City of Upland shall work with the County Office of Homeless Services to obtain Shelter Plus Care certificates from the Housing Authority of the County of San Bernardino in partnership with the County Department of Behavioral Health. These certificates will be used for Street-to-Home participants who are willing to engage in the proposed project.

Funded by the U.S. Department of Housing and Urban Development (HUD), Shelter Plus Care assists homeless individuals and families dealing with mental disabilities, chronic substance abuse, and/or infected with HIV/AIDS by providing long-term affordable rental housing and a broad range of supportive services. The goal of Shelter Plus Care is to increase the participants’ independent living skills and provide housing stability. Tenants pay no more than 30% of their adjusted monthly income for rent and the balance is subsidized by HUD.

The County Housing Authority was recently awarded 49 new Shelter Plus Care certificates through the HUD 2011 Continuum of Care Homeless Assistance Grant application process.

3. securing HUD Veterans Affairs Supportive Housing (VASH) vouchers

The City of Upland shall work with the County Office of Homeless Services to secure VASH vouchers from the Housing Authority of San Bernardino who has partnered with the VA Loma Linda Healthcare System to provide rental vouchers and supportive services to eligible veterans. The Housing Authority recently received 25 additional VASH vouchers.

The HUD-VASH program is a collaboration between the U.S. Department of Housing and Urban Development (HUD) and the U.S. Department of Veterans Affairs Supported

Housing (VASH) program to help homeless veterans and their immediate families find and maintain affordable, safe, and permanent housing in the community.

The HUD-VASH program is intended for veterans who are honorably discharged and:

- are eligible for Department of Veteran Affairs (VA) health care services;
- are chronically homeless, meaning homeless for a year or more or four or more times in the past three years;
- have a history of medical, mental health, and/or substance abuse problems that are now stabilized;
- are ready for independent housing in the community but need ongoing case management services to maintain it;
- have some type of income to pay for a portion of their housing; and
- are motivated to improve the quality of their lives by working with a VA case manager and actively participating in treatment for their conditions.

The program combines rental assistance from HUD with case management and clinical services provided by the VA at its medical centers and through other locations in local communities. Ongoing VA case management, health, and other supportive services are made available at VA Medical Centers (VAMC). The program also requires the local public housing agency (PHA) participation, which consists of applying for and managing the rental assistance vouchers.

4. applying for HUD Continuum of Care Homeless Assistance funds for permanent supportive housing.

A qualified nonprofit agency shall be identified to apply for HUD Continuum of Care Homeless Assistance Grant funds to establish at least 10 units of permanent supportive housing in Upland. A local Request for Proposals (RFP) will be released by the County Office of Homeless Services during the summer of 2012.

Permanent Supportive Housing combines affordable housing with needed social services that help households maintain housing stability. Eligible households include those that 1) have an extremely low income, which is defined as no more than 30% of the area median income; 2) have an adult member with a disabling condition that limits their ability to work or perform one or more daily life activities; and 3) have access to needed on-site and/or off-site social services in order for them to overcome barriers that prevent them from obtaining and maintaining housing.

Essential elements of Permanent Supportive Housing consist of 1) households paying no more than 30% of their household income towards rent and utilities; 2) social service providers proactively seeking to engage tenants in on-site and community-based supportive services according to consumer preference; 3) agreement that participation in such supportive services is not a condition of tenancy; and 4) service and property management strategies focused on interventions that help households maintain their

housing stability, even as they struggle with unstable personal behavior issues such as substance abuse relapse and mental health set-backs.

Key Finding #2: Significant Non-Chronic Homeless Population

- 39% of unsheltered homeless adults are not, by definition, chronically homeless yet continue to remain stuck in a long-term cycle of homelessness and dependence on costly emergency services

Recommendation #2: Implement a Housing First/Rapid Rehousing Approach

The Housing First/Rapid Rehousing Approach was recently adopted as a primary component of the County of San Bernardino's 10-Year Plan to End Homelessness. During the past decade a significant shift in strategies has occurred concerning efforts to end homelessness as evidence-based innovations have emerged to house and stabilize people successfully and reduce the costs of cycling through emergency service systems. Communities have increasingly shifted away from providing more and more shelter and transitional housing programs toward a Housing First Approach, which focuses on helping households maintain their housing whenever possible and rapidly re-housing those households that become homeless.

Such communities have adopted several guiding principles that have helped establish a distinct range of programs that include:

- providing resources (financial and support services) to help households maintain their housing whenever possible;
- minimizing the length of time people remain homeless on the streets and/or in shelters by placing them in permanent housing as soon as possible once they lose their housing;
- providing resources to help households resolve issues that contributed to their homelessness so that they can sustain their housing after becoming re-housed;
- addressing issues that contributed to a household's homelessness while in permanent housing so they can stabilize and better access community-based services and resources (i.e., budgeting, credit repair, employment, and benefits);
- Implementing a "Harm Reduction" approach to housing serial inebriates and chronic substance abusers which involves at-risk individuals in programs and practices to reduce the negative consequences of alcohol and drug use during the period of time that they are receiving services²;

²The Harm Reduction Coalition defines harm reduction as "a set of practical strategies that reduce negative consequences of drug use, incorporating a spectrum of strategies from safer use, to managed use to abstinence. Harm reduction strategies meet drug users "where they're at," addressing conditions of use along with the use itself (see <http://www.harmreduction.org/section.php?id=62>)."

- Implementing aggressive strategies toward preventing the recurrence of homelessness.

These guiding principles have helped communities establish a range of distinctive housing programs and activities that have been viewed as “best practice models” that have helped these communities realize significant reductions in their homeless population.

The City of Upland shall work with local homeless service providers and other community stakeholders to seek potential funding and other resources to support homeless prevention and rapid re-housing activities. Funding for these activities can be obtained from a variety of public and private sources including:

- Emergency Solutions Grant (ESG);
- Emergency Food and Shelter Program (EFSP)
- Community Development Block Grant (CDBG)
- Private foundation grants and other charitable giving sources

Key Finding #3: Limited Case Management and Mainstream Resource Results

- Approximately two-thirds of unsheltered homeless adults are unemployed; 30% have no monthly income; 30% were released from a correctional institution during the 12 months prior to the survey; 28% became homeless as a result of personal reasons that largely included divorce, domestic violence, and death of spouse or parents; 15% stated as a result of loss of job; and 11% stated as a result of an injury and/or disability.

Recommendation #3: Establish a coordinated, collaborative network of community and mainstream resources to create a safety net to enhance case management activities that prevent households from becoming homeless, assist homeless households with rapid re-housing and support long-term stability for households placed in permanent housing.

The most successful efforts to eradicate homelessness across the country include a strong network of community leaders and stakeholders working together to implement housing and social service strategies needed to provide the tools and means for homeless residents to become stable, productive contributors to their community. The challenge is to develop solution-oriented approaches through a well-coordinated, outcome driven social service system designed to directly meet the needs of our local homeless population. Such activities further build upon collaborative efforts among

government officials, homeless service providers, other community agencies, faith-based organizations, business enterprises, and community residents to provide service enriched program environments in which homeless persons will receive the tools necessary to achieve self-sufficiency and maintain permanent housing.

II. Homeless Count

A. Purpose

The primary purpose of the homeless count is to answer the central question “**How many homeless people are there in the City of Upland on a given day?**” The answer is 159 of which 115 (72%) were adults and 44 (28%) were children that made-up in 110 households. Of these persons, 92 or 58% were unsheltered, and 67 or 42% were sheltered in emergency shelter and transitional housing programs.

Of the 115 adults:

- 73 (63%) were male and 42 (37%) were female;
- 57 (49%) were White, 24 (21%) were Latino, 21 (18%) were African American, 3 (3%) were Asian and 3 were Native American and 7 (6%) were identified as other;
- 30 (26%) were between the ages of 50-61, 29 (25%) were between 40-49, 27 (24%) were between 30-39, 11 (10%) were between 25-29 and another 11 between 18-24 and 6 (5%) were between 62-69;
- 33 (29%) had children living with them.

B. Background Information

The U.S. Department of Housing and Urban Development (HUD), as part of its requirements for local jurisdictions to continue to receive continuum of care funding for homeless persons, asks local jurisdictional applicants to conduct a “one night point-in-time” homeless count every other year during the last 10 days of January. The County of San Bernardino is one of more than 400 jurisdictions that submit an annual application to HUD. For the last three (3) years, several agencies in the County have received more than \$7 million dollars each year as applicants.

In preparation for the next HUD required count in January 2013, the San Bernardino County Office of Homeless Services (OHS) partnered with the City of Upland to implement a pilot project homeless count that would serve as a potential model for all jurisdictions in the County next year. OHS contracted with the Institute for Urban Initiatives to execute the count and survey with the support of a public and private partnership made up of representatives from local government, faith-based organizations, and nonprofit agencies.

When was the count conducted?

The homeless count was conducted on the streets during the hours of 6 a.m. and 10 a.m. on February 22, 2012. The count was also conducted on the same day in shelters and transitional housing programs in the city.

Who was counted?

The count included those individuals who on the day of the point-in-time count fell within the U.S. Department of Housing and Urban Development (HUD) definition of a homeless person which is as follows:

“An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- (ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
- (iii) 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 place not meant for human habitation immediately before entering that institution.”

Who was not counted?

HUD does not consider the following persons to be homeless—persons who are “doubled up,” or persons who are “near homelessness—but considers them to be at-risk of homelessness. Such persons were not included in the county’s homeless count.

It is important to note that the City of Upland, like many other largely populated cities, has a substantial number of households that are at-risk of homelessness. The U.S. Census Bureau noted within a 2006 - 2010 American Community Survey data report that nine (9) percent or approximately 6,600 Upland residents were living below the poverty level. Approximately nine percent (9%) of related children under 18 were living below the poverty level and 5 percent (5%) of people 65 years old and over. Six percent (6%) of all families and 12 percent of families with a female householder and no husband present had incomes below the poverty level.

Many of these persons can become homeless because of social structural issues such as increases in rent, loss of job, and rising health care costs. In addition, personal experiences such as domestic violence, physical disabilities, mental illness, and substance abuse can cause members of a low income household or an entire

household to become homeless as well. Often, one or more of these experiences factor into a household's homeless experience.

Where was the count conducted?

The City of Upland 2012 Homeless Count consisted of two components: 1) an unsheltered count; and 2) a sheltered count. Both components included those persons who fall within the HUD definition of a homeless person, which is noted above.

C. Methodology

The process for conducting the count included the following activities: 1) establishing a key person task force; 2) distinguishing areas within the City where homeless people live; 3) identifying places where homeless people live within the identified areas; 4) identifying places where homeless people receive social services; 5) raising public awareness and community involvement; and 6) implementing the count.

1. Establishing a Key Person Task Force

A Key Person Task Force was established to help identify locations where homeless people can be found and help organize and conduct the count in Upland. The Task Force consisted of representatives of public and private organizations in Upland who were knowledgeable about homelessness and where homeless persons live and spend their time. Key persons who contributed to the project included representation from business, civic, educational, faith-based, government, neighborhood, and nonprofit organizations.

2. Distinguishing Areas within the City where Homeless People Live

The Key Person Task Force distinguished areas within the City where homeless people could be found. Those sections of the City where homeless persons were known to live or spend time were designated as green zones. Conversely, those sections of the city where homeless persons were known not to live were designated as red areas.

3. Identifying Places where Homeless People Live

The Key Person Task Force also identified specific locations where homeless people live or spend time within the designated green zones. Such places included abandoned buildings, cars, parks, and sidewalks. Known encampments were also specifically identified within green areas.

4. Identifying Places where Homeless People Receive Social Services

The Key Person Task Force also identified non-residential social service programs that serve homeless people. Such programs included packaged food distribution, meal distribution, and clothing sites including those that are operated by faith-based organizations. Other program sites included those that are known to provide social services for homeless persons.

5. Raising Public Awareness and Community Involvement

The primary purpose of raising public awareness and community involvement was to recruit volunteers to help implement the count. Raising public awareness included distributing count information flyers and materials at various public facilities, service agencies, churches, and community meetings. In addition, a project website was established and a call for volunteers appeared in the local newspaper. Community involvement included creating teams of volunteers to help count homeless persons in designated green zones on the day of the count. Volunteer teams included persons who are involved in community service or are interested in community service and persons who may have had a lot of exposure to homelessness or little exposure. As a result, community involvement may continue beyond the count and survey concerning homeless issues.

6. Implementing the Count

Unsheltered Count

The homeless count was carried out on Wednesday, February 22, 2012. A deployment headquarters was established in which project leaders coordinated all count activities during the day of the count. Street count teams were formed that included a cross-section of volunteers such as members of public agencies, community service organizations, local churches and homeless or previously homeless persons. Street count teams used their own means of transportation when necessary to get to and back from their assigned count areas. Within their areas, they travel by foot when necessary.

The count instrument that was used required counters to collect the following information from every homeless adult encountered: first initial of first name, first initial of last name, gender, ethnicity, age by code³, and state born as noted below. All information remains confidential.

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

	First Initial	Last Initial	Gender	Ethnicity	Age	State Born
Example:	J	H	F	W	6	CA

This enumeration activity created an identifier that prevents a person from being included in the final tally of the count more than once. During the enumeration, counters record the initials, gender, ethnicity, age, and state born of each individual homeless person encountered. If the same person is encountered again, counters would establish the same code. However, this person will only be counted once in the final tally.

The information for every person encountered every time was loaded into a data base and then used to code each person. For example, a homeless person may have the following code of "WTMW6CA." This means that this person's first name began with "W", last name began with "T", he was a male "M", he was White "W", his age was in the range 50-61, and he was born in California.

Number of Person	First Initial	Last Initial	Gender	Ethnicity	Age	State Born
1	J	H	F	W	6	CA
2	H	T	M	L	7	CA
3	R	K	F	L	5	TX
4	K	N	M	AA	4	CA
5	F	A	M	A	3	CA
6	J	F	M	W	5	CA
7	J	F	M	W	5	CA
8	S	G	F	L	2	NY
9	D	T	M	W	6	CA
10	O	R	M	W	7	CA

An example to illustrate how the above process worked is noted in the table above. Numbers 6 and 7 (shaded in gray) would be considered the same person. If for some reason there was doubt that numbers 6 and 7 were the same person, other collected data was used to address the doubt which included marital status and number of children with you.

This data also provided the opportunity to break down the number of homeless persons counted by gender, ethnicity, age, and state born. Generally, questions concerning

gender, ethnicity, and age are asked anyways. Thus, the questions serve two purposes—basic demographic information and duplication prevention.

The same count instrument was used to count homeless individuals encountered at various non-residential service locations throughout the city which helped prevent duplication. A designated staff person or volunteer from each service location was trained to complete the instrument.

Community volunteers were required to attend an orientation, which focused on how to use the count instrument. The orientation also focused on safety issues while conducting the street count. A packet of materials were given to each volunteer during the orientation. The materials were reviewed during the orientation and volunteers were encouraged to review the materials afterwards. Volunteers began and ended their count activities at the count deployment center. They also began the day of the count with another orientation to ensure that various activities like returning the count sheets were completed.

Sheltered Count

The sheltered count consisted of identifying all shelter, transitional housing programs, and Safe Havens within the city limits. In addition, any agencies that provide hotel/motel vouchers were also identified. Such residential sites were identified by the Key Person Task Force. The same homeless count instrument for the unsheltered count was used for sheltered persons, which helped prevent duplication. A designated staff person from each shelter and transitional housing program were asked to complete the instrument.

Those facilities that HUD specifically instructs communities not to include were not included which are

- conventional housing (including those homes in which persons are living doubled up and market rate units that happen to accept formerly homeless persons);
- Section 8 SRO, Shelter Plus Care, SHP permanent housing or other permanent housing units (even when formerly homeless persons are residents);
- medical facilities such as hospitals, psychiatric facilities, and nursing homes, residential treatment facilities, emergency foster care including foster care homes or foster care group homes, detention facilities such as jails, prisons, or juvenile detention facilities and the like in which children or youth, who because of their own or a parent's homelessness or abandonment, now reside temporarily and for a short anticipated duration;

- mental health facilities, chemical dependency facilities such as substance abuse treatment facilities and detox centers, or criminal justice facilities.⁴

⁴ See <http://www.hudhre.info/index.cfm?do=viewFagsByTopic&topicid=233#byTpc> which includes instructions for 2012 homeless counts.

III. Homeless Survey

Another main purpose for this final report is to provide a breakdown of the homeless population as required by the U.S. Department of Housing and Urban Development (HUD) as part of the annual Continuum of Care Homeless Assistance Program application. HUD requires information about the following homeless subpopulations:

- Chronically Homeless Individuals⁵;
- Chronically Homeless Families⁶;
- Persons with HIV/AIDS;
- Persons with Mental Illness;
- Substance Abusers;
- Unaccompanied Youth Under Age 18;
- Veterans; and
- Victims of Domestic Violence.

The following breakdown for each of these subpopulations is based on a survey of unsheltered homeless adults that was conducted on Friday, March 2nd and Saturday, March 3rd, 2012 and administered to 46 homeless adults living on the streets. The 46 homeless adults who were surveyed represent a 57% sample of the 81 homeless adults who were counted on the streets. The survey was administered at the same locations where homeless persons were counted. Following HUD guidelines, the information gathered through the sample was used to estimate numbers of adults that fall within each subpopulation category as noted in the table below. For example, 9 or 20% of the 46 adults surveyed answered “yes” when asked if they were a veteran of the United States Armed Forces. Thus, 16 or 20% of the 81 unsheltered adults counted were estimated to be veterans.

Table 1: Estimates of Subpopulations Based on the 2012 Homeless Count and 2012 Homeless Survey

⁵ Chronically Homeless – an unaccompanied homeless individual with a disabling condition, or a family with at least one adult member who has a disabling condition, who has either been continuously homeless for a year or more OR has had at least four (4) episodes of homelessness in the past three (3) years.” An episode of homelessness is a separate, distinct, and sustained stay in a place not meant for human habitation, on the streets in an emergency homeless shelter and/or in a HUD-defined Safe Haven. A chronically homeless person must be disabled during each episode. A disabling condition is defined as “a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions.” A disabling condition limits an individual’s ability to work or perform one or more activities of daily living.

⁶ See chronically homeless definition for families above.

Subpopulation:	#	%
Chronically Homeless Individuals	49	61
Chronically Homeless Families	0	0
Persons with HIV/AIDS	0	0
Persons with Mental Illness	14	17
Substance Abusers	32	39
Unaccompanied Youth Under Age 18	0	0
Veterans	16	20
Victims of Domestic Violence	18	22

Other survey questions were asked to identify additional subpopulations not required by HUD. Some of these subpopulation questions help identify people who meet HUD’s definition of chronic homelessness which states that “a chronically homeless person must be disabled” and a disabling condition is defined as “a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions.” The questions used are provided by HUD and listed as part of appendix B: Homeless Survey Questions.

The additional subpopulations are included in the table below. As in the table above, the information gathered through the sample was used to estimate numbers of adults that fall within each subpopulation category

Subpopulation:	#	%
Persons with Chronic Health Condition	30	37
Persons with Developmental Disabilities	11	13
Persons with Physical Disabilities	33	41

Two other subpopulations were specifically targeted through survey questions: youth between the ages of 18 and 24 and persons released from a correctional institution within the 12 months prior to the implementation of the survey.

Subpopulation:	#	%
Youth Age 18 to 24	6	7
Persons Released from Correctional Institution	24	30

Supplemental Questions

Several other questions were added to the “survey” by representatives from local public and private organizations. These questions focused on 1) Geo-History/Residency; 2) Employment/Income; and 3) Social Services.

1. Geo-History/Residency

One set of questions within this section focused on community ties to Upland.

Survey respondents were asked—Do you consider yourself a resident of Upland? Of the 46 respondents, 33 or 72% stated “yes.” When asked “How long have you been living in Upland, 32 of the 33 respondents provided the range of answers identified in the table below:

Have Lived in Upland	#	%	Have Lived in Upland	#	%
1 year or less	6	19	21 to 25 years	4	13
2 to 5 years	8	25	26 to 30 years	0	0
6 to 10 years	7	22	31 to 35 years	1	3
11 to 15 years	2	6	36 to 40 years	0	0
16 – 20 years	2	6	41 to 45 years	2	6

- Nearly half (44%) have been living in Upland for up to 5 years;
- Nearly two-thirds (66%) have been living in Upland for up to 10 years;
- Approximately three-fourths (78%) have been living in Upland for up to 20 years.

Homeless residents were asked specific questions to help determine the basis for their ties to the City of Upland. Survey respondents were considered to have specific community ties to the City of Upland if they answered “yes” to the question—Do you consider yourself a resident of Upland?—and at least one of the following “ties” questions:

- Do you have family who live in Upland?
- Do you have friends who live in Upland?
- Have you ever worked in Upland?
- Are you currently working in Upland?
- Have you ever attended school in Upland?

Of the 33 (or 72% of) respondents who considered themselves a resident of Upland

- Approximately three-fourths (76%) had two or more community ties;
- Nearly half (42%) had three or more community ties.

Ties to the City of Upland	Yes		No	
	#	%	#	%
One Community Tie	32	97	1	3
Two or More Community Ties	25	76	8	24
Three or More Community Ties	14	42	19	58
Four or More Community Ties	5	15	28	85
Five Community Ties	1	3	32	97

2. Employment/Income

The 46 survey respondents answered several questions that focused on employment and income which included the following:

a. Do you have a part-time or full-time job?

Eleven (11) or 24% of survey respondents answered “yes” of which eight (8) worked part-time and three (3) or 6% worked full-time.

b. Do you receive any of the following kinds of monthly income/benefits?

The number of survey respondents that received the following 11 pre-identified non-employment sources of income included:

- 0 respondents were receiving TANF/Cash Aid;
- 1 respondent was receiving General Relief;
- 2 respondents were receiving unemployment benefits;
- 18 (39%) respondents were receiving CalFresh/Food Stamps;
- 1 respondent was receiving MediCal;
- 0 respondents were receiving a pension;
- 0 respondents were receiving Social Security;
- 2 respondents were receiving Social Security Disability Insurance;
- 0 respondents were receiving State Disability;
- 0 respondents were receiving Workers Compensation;
- 1 respondent was receiving Veterans Benefits.

c. Do you earn income in any other way?

Nearly half (46%) or 21 survey respondents stated that they earn income in ways other than employment or public benefits. When asked to identify the other ways, the number of respondents and their answers were as follows:

- 13 (28%) respondents stated recycling;
- 3 respondents stated recycling and panhandling;

- 1 respondent stated panhandling;
- 3 respondents stated odd/temporary jobs.

d. What is your total monthly income?

Fourteen (14) or nearly one-third (30%) of survey respondents stated that they have no monthly income. Of those who have monthly income, the range of income and the number of recipients is as follows:

- 12 (26%) had a monthly income of \$1 - \$150;
- 4 (9%) had a monthly income of \$151 - \$250;
- 6 (13%) had a monthly income of \$251 - \$500;
- 7 (15%) had a monthly income of \$501 - \$1,000;
- 3 (6%) had a monthly income of more than \$1,000.

3. Social Services

The 46 survey respondents also answered several questions that focused on their access to social services which included the following:

a. What social services have you accessed during the past 12 months?

The number of survey respondents that received the following 18 pre-identified social services included:

- 0 (0%) accessed emergency shelter;
- 2 (4%) accessed job training;
- 2 (4%) accessed medical/dental care;
- 0 (0%) accessed child care;
- 22 (48%) accessed food/groceries/meals;
- 16 (35%) accessed clothing/laundry;
- 0 (0%) accessed rental assistance;
- 1 (2%) accessed life skill training;
- 1 (2%) accessed mental health care;
- 0 (0%) accessed school attendance;
- 0 (0%) accessed legal assistance;
- 1 (2%) accessed storage/lockers;
- 1 (2%) accessed housing placement;
- 2 (4%) accessed public benefits assistance;
- 1 (0%) accessed substance abuse treatment;
- 0 (0%) accessed domestic violence assistance;
- 1 (2%) accessed veterans services;
- 17 (37%) accessed showers/bathrooms.

b. What services/assistance are you currently accessing in the City of Upland?

There were 15 survey respondents for which there were no answers recorded for this question. (It should be noted that this question was open ended and did not include pre-identified choices.) Of the 31 survey respondents for which there was a recorded answer, 14 or 30% stated that they are not currently accessing services/assistance in the City of Upland.

- 7 (15%) are currently accessing food/meals;
- 3 (6%) are currently accessing churches;
- 2 (4%) are currently accessing showers;
- 2 (4%) are currently accessing food stamps;
- 1 (2%) is currently accessing a bathroom;
- 1 (2%) is currently accessing citizenship;
- 1 (2%) is currently accessing a park.

c. What services/assistance do you feel you need that you are currently not able to access?

The number of survey respondents that feel that they need access to the following 18 pre-identified social services/assistance included:

- 20 (43%) feel that they need emergency shelter;
- 13 (28%) feel that they need job training;
- 20 (43%) feel that they need rental assistance;
- 6 (13%) feel that they need life skill training;
- 21 (46%) feel that they need housing placement;
- 10 (22%) feel that they need public benefits assistance;
- 21 (45%) feel that they need medical/dental services;
- 2 (4%) feel that they need child care;
- 18 (39%) feel that they need food/groceries/meals;
- 12 (26%) feel that they need clothing/laundry;
- 4 (9%) feel that they need mental health care;
- 3 (6%) feel that they need school attendance;
- 7 (15%) feel that they need legal assistance;
- 11 (24%) feel that they need storage/lockers;
- 6 (13%) feel that they need substance abuse treatment;
- 3 (6%) feel that they need domestic violence assistance;
- 5 (11%) feel that they need veterans services;
- 21 (46%) feel that they need showers/bathrooms.

d. How many meals do you usually eat on any given day?

Forty-three (43) of the 46 survey respondents answered this question. Their responses

to the following pre-identified categories included:

- 13 (28%) stated one meal per day;
- 22 (48%) stated two meals per day;
- 8 (17%) stated three meals per day.

e. Where do you go for food when you cannot provide for yourself?

Responses to the following pre-identified categories included:

- 13 (28%) stated served meal program;
- 15 (32%) stated family/friends;
- 17 (37%) stated sack meal program;
- 15 (33%) stated outdoor feeding;
- 18 (39%) stated food bank.

In addition, 5 (11%) stated churches and 3 (6%) stated that they ask people.

f. How many times a week do you receive a served/sacked meal in Upland?

Forty-two (42) of the 46 survey respondents gave the following answers to the pre-identified categories:

- 22 (48%) stated 1 to 2 times/week;
- 1 (2%) stated 3 to 4 times/week;
- 1 (2%) stated 5 to 6 times/week;
- 2 (4%) stated at least once a day;
- 0 (0%) stated more than once a day;
- 16 (35%) stated occasionally/never.

g. What do you think is the primary reason you became homeless?

Reasons identified by survey respondents included:

- 13 (28%) stated personal reasons that largely included divorce, domestic violence, and death of a spouse or parents;
- 7 (15%) stated as a result of loss of job;
- 5 (11%) stated as a result of an injury and/or disability;
- 3 (6%) stated because of a problem with alcohol and other drugs.

h. What do you think is keeping you from obtaining permanent housing?

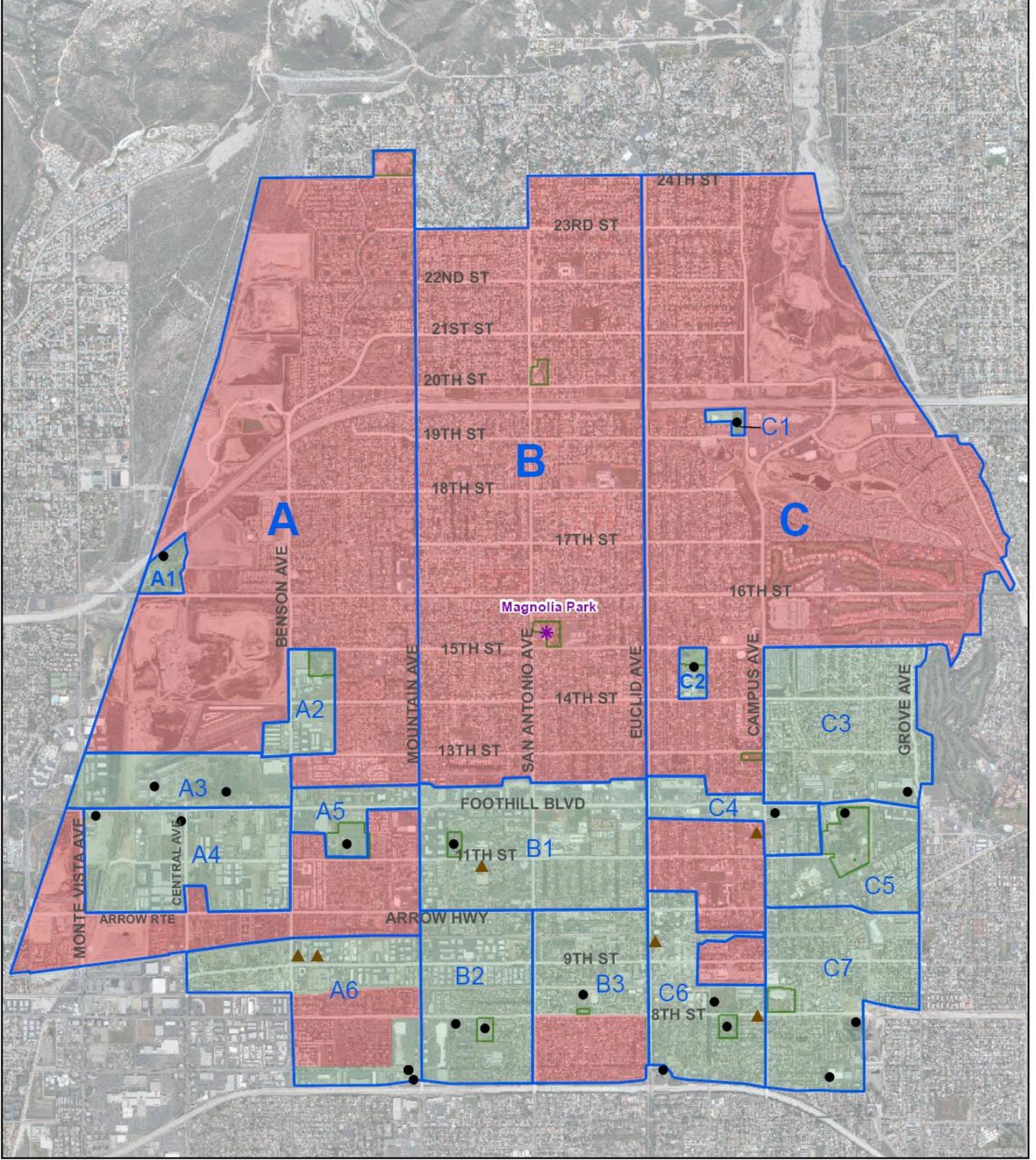
Thirty-seven (37) of the 46 survey respondents identified what they thought was keeping them from obtaining permanent housing which included:

- 28 (67%) stated no job and/or income;
- 3 (7%) stated a disability;
- 2 (4%) stated legal issues.

There were other reasons identified by only one survey respondent each that included:

- alcohol abuse;
- laziness;
- parole violations;
- no self-motivation.

Appendix A: Project Map



- Encampments/Key Locations
- ▲ Service Locations
- * Magnolia Park
- City Parks
- Count Areas
- Non-Count Areas

2012 Upland Point-in-Time Homeless Count



1 inch = 3,186 feet



Appendix B: Homeless Survey Questions

2012 CITY OF UPLAND HOMELESS SURVEY

Today's Date: _____ Interviewer: _____

Location: _____

Please record the following information about the person you are about to survey:

Gender: Female Male

Ethnicity: American Indian or Alaskan Native Asian/Pacific Islander
 Black or African-American Hispanic or Latino White Other

Age: Under age 18 18 –24 25 – 29 30 – 39 40 – 49 50 - 54 55 –59
 60 – 61 62 – 64 65 – 69 70+

Household Status: Is person a single individual or adult member of a family (check one)

If an adult member of family, how many other adults _____ and how many children _____ are part of family?

1. Have you been homeless for one year or more? yes no
2. How many times have you been homeless in the past three years?
 less than four episodes or at least four episodes (check one)
3. Do you have a physical disability? yes no don't know refused
4. Do you have a developmental disability? yes no don't know refused
5. Do you have a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis?
 yes no don't know refused
6. Have you been diagnosed with AIDS or have you tested positive for HIV?
 yes no don't know refused
7. Do you feel you have a mental health problem? yes no don't know refused
8. If yes, do you expect your mental health problem to be of long-continued and indefinite duration and substantially impair your ability to live independently?
 yes no don't know refused
9. Are you currently taking prescription medications for mental health issues?
 yes no don't know refused

10. Have you taken prescription medication for mental health issues in the last year?
 yes no don't know refused
11. Have you been hospitalized for mental health issues?
 yes no don't know refused
12. Do you have a drug or alcohol problem? yes no don't know refused
13. If yes, do you expect your drug or alcohol problem to be of long-continued and indefinite duration and substantially impair your ability to live independently?
 yes no don't know refused
14. Do you currently use any of the following drugs? - Cocaine, crack, heroin, pcp/lsd, uppers/speed, and downers/tranquilizers?
 yes no don't know refused
15. Are you a veteran of the United States Armed Forces? yes no don't know refused
16. Have you ever been a victim of domestic or intimate partner violence?
 yes no don't know refused
17. If you have been a victim of domestic or intimate partner violence, how long ago did you have this experience?
 one year or less more than a year don't know refused
18. Have you ever been a victim of violence by a parent guardian or relative?
 yes no don't know refused
19. If you have been a victim of violence by a parent guardian or relative, how long ago did you have this experience?
 one year or less more than a year don't know refused
20. During the last 12 months, were you released from a correctional institution such as a prison or jail after serving a court-order sentence?
 yes no don't know refused
21. If yes, did the correctional institution provide you with information before your release about the following (check all that apply):
 Shelter/housing opportunities social services transportation
 other: _____

Supplemental Questions

Geo-History/Residency:

22) In what city was your last permanent residence? _____

23) In what city did you sleep last night? _____

a) How long have you been sleeping in the above city? _____ months _____ years

b) Do you have family who live in the above city? Yes No

c) Do you have friends who live in the above city? Yes No

d) Have you ever worked in the above city? Yes No

e) Are you currently working in the above city? Yes No

f) Have you ever attended school in the above city? Yes No

If YES to f): Check all that apply:

Elementary Middle School/Jr. High High School College

24) Do you consider yourself a resident of Upland? Yes No

a) How long have you been living in Upland? _____ months _____ years

b) Do you have family who live in Upland? Yes No

c) Do you have friends who live in Upland? Yes No

d) Have you ever worked in Upland? Yes No

e) Are you currently working in Upland? Yes No

f) Have you ever attended school in Upland? Yes No

If YES to f): Check all that apply:

Elementary Middle School/Jr. High High School College

25) Why do you live/spend time in Upland? _____

Employment/Income:

26) Do you have a part-time or full-time job? Part-Time Yes No
(earning *minimum* wage or more) Full-Time Yes No

27) Do you receive any of the following kinds of monthly income/benefits (check all that apply):

- | | |
|------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> TANF/Cash Aid | <input type="checkbox"/> Social Security - Retirement (age 62+) |
| <input type="checkbox"/> General Relief | <input type="checkbox"/> Social Security - Disability |
| <input type="checkbox"/> Unemployment | <input type="checkbox"/> State Disability |
| <input type="checkbox"/> Cal Fresh/Food Stamps | <input type="checkbox"/> Workers Compensation |
| <input type="checkbox"/> MediCare/Medi-Cal | <input type="checkbox"/> Veterans Benefits |
| <input type="checkbox"/> (Union Pension) | <input type="checkbox"/> (Other: Please Describe) _____ |

28) Do you earn income in any other way? Yes No
a) If YES, please identify _____

29) What Is Your Total Current Monthly Income? (please check one box below)

- | | |
|------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> (No income) | <input type="checkbox"/> (\$501 - \$1000) |
| <input type="checkbox"/> (\$1 - \$150) | <input type="checkbox"/> (\$1001 - \$1500) |
| <input type="checkbox"/> (\$151 - \$250) | <input type="checkbox"/> (\$1501 - \$2000) |
| <input type="checkbox"/> (\$251 - \$500) | <input type="checkbox"/> (\$2001 +) |

Social Services

30) What social services have you accessed during the past 12 months? (check all that apply)

- | | | |
|-----------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Emergency Shelter | <input type="checkbox"/> Rental Assistance | <input type="checkbox"/> Housing Placement |
| <input type="checkbox"/> Job Training | <input type="checkbox"/> Life Skill Training | <input type="checkbox"/> Public Benefits Assistance |
| <input type="checkbox"/> Medical/Dental Care | <input type="checkbox"/> Mental Health Care | <input type="checkbox"/> Substance Abuse Treatment |
| <input type="checkbox"/> Child Care | <input type="checkbox"/> School Attendance | <input type="checkbox"/> Domestic Violence Assistance |
| <input type="checkbox"/> Food/Groceries/Meals | <input type="checkbox"/> Legal Assistance | <input type="checkbox"/> Veterans Services |
| <input type="checkbox"/> Clothing/Laundry | <input type="checkbox"/> Storage/Lockers | <input type="checkbox"/> Showers/Bathrooms |

31) What services/assistance are you currently accessing in the City of Upland?

1. _____
2. _____
3. _____

32) What services/assistance do you feel you need that you are currently not able to access?

- | | | |
|-----------------------------------------------|----------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Emergency Shelter | <input type="checkbox"/> Rental Assistance | <input type="checkbox"/> Housing Placement |
| <input type="checkbox"/> Job Training | <input type="checkbox"/> Life Skill Training | <input type="checkbox"/> Public Benefits Assistance |
| <input type="checkbox"/> Medical/Dental Care | <input type="checkbox"/> Mental Health Care | <input type="checkbox"/> Substance Abuse Treatment |
| <input type="checkbox"/> Child Care | <input type="checkbox"/> School Attendance | <input type="checkbox"/> Domestic Violence Assistance |
| <input type="checkbox"/> Food/Groceries/Meals | <input type="checkbox"/> Legal Assistance | <input type="checkbox"/> Veterans Services |
| <input type="checkbox"/> Clothing/Laundry | <input type="checkbox"/> Storage/Lockers | <input type="checkbox"/> Showers/Bathrooms |

- 33) How many meals do you usually eat on any given day? 1 2 3
- 34) Where do you go for food when you cannot provide for yourself (check all that apply)?
- | | | |
|----------------------------------------------|--------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Served meal program | <input type="checkbox"/> Sack meal program | <input type="checkbox"/> Food bank |
| <input type="checkbox"/> Family/Friends | <input type="checkbox"/> Outdoor feeding | <input type="checkbox"/> Other _____ |
- 35) How many times a week do you receive a served/sacked meal in Upland?
- | | | |
|----------------------------------------------|---------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> 1-2 times/week | <input type="checkbox"/> 3-4 times/week | <input type="checkbox"/> 5-6 times/week |
| <input type="checkbox"/> At least once a day | <input type="checkbox"/> More than once/day | <input type="checkbox"/> Occasionally/Never |
- 36) What do you think is the primary reason you became homeless? _____
-
- 37) What do you think is keeping you from obtaining permanent housing? _____
-