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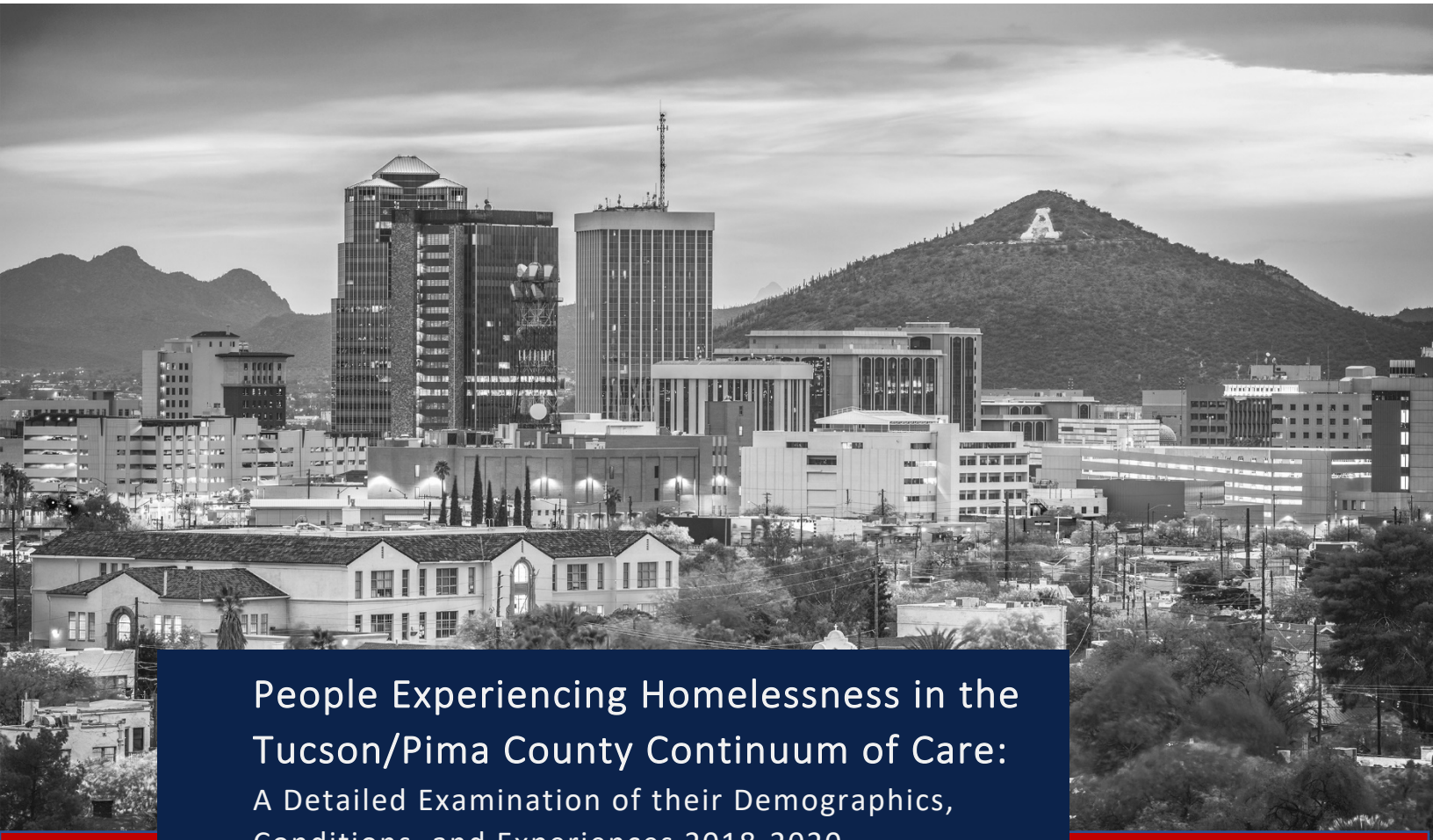

People Experiencing Homelessness in the Tucson/Pima County Continuum of Care:

A Detailed Examination of their Demographics, Conditions, and Experiences 2018-2020

TPCH
Tucson Pima Collaboration
To End Homelessness

CITY OF TUCSON

Prepared on behalf of and with funding provided by the Tucson Pima Collaboration to End Homelessness (Tucson/Pima County Continuum of Care) and the City of Tucson.

SUBMITTED BY:

Keith Gunnar Bentele

University of Arizona

Southwest Institute for Research on Women

925 N. Tyndall Avenue, Suite 209

Tucson, AZ 85721

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For additional information, contact Keith Bentele at keithb@arizona.edu.

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EXECUTIVE SUMMARY

In pursuit of a deeper understanding of the conditions and backgrounds of people experiencing homelessness in the Tucson/Pima County Continuum of Care (CoC), the Tucson Pima Collaboration to End Homelessness and the City of Tucson commissioned the University of Arizona's Southwest Institute for Research on Women (SIROW) to produce this report. This report is organized around the following research questions and comparisons:

A. Estimate of the number of people experiencing unsheltered homelessness in the Tucson/Pima County CoC in January of 2021.

The annual Point in Time Count (PIT) is one of the primary tools used to track the number of people experiencing sheltered and unsheltered homelessness. Due to the ongoing COVID-19 pandemic, in January of 2021 the "street count" component of the PIT count was cancelled. In order to provide a data-driven estimate of the number of people experiencing unsheltered homelessness researchers at SIROW constructed a multi-level model that estimates the associations between CoC-level economic factors and year-to-year changes in the rate of unsheltered homelessness. These model results were then used to predict the rate of unsheltered homelessness in 2021 in Pima County based on the levels of 5 independent variables (unemployment, poverty, the rental vacancy rate, median rent, and the homeownership rate) in Pima County in 2020. Our best estimate of the number of people experiencing unsheltered homelessness in Pima County in January of 2021 is 854 individuals.

B. Overview of changes over time in the population experiencing homelessness in Pima County.

There are two major tools that are used to collect information on both the number and characteristics of people experiencing homelessness in Pima County, the annual PIT count and the Coordinated Entry (CE) assessment. The CE assessment is completed when a person experiencing homelessness expresses an interest in services. The CE assessments are collected on an ongoing basis and can be completed multiple times by the same individual. Given the substantial differences between these two tools it is not surprising that there are significant differences between counts captured in the PIT count and the CE assessments. The number of unique individuals captured in the CE assessments in each HUD reporting year was 4 to 5 times larger than the number of people experiencing homelessness counted in the annual PIT counts. This is consistent with other studies that have found similar differences between counts collected from PIT counts when compared to administrative data.

Change in the Overall Number of People Experiencing Homelessness 2018-2020

The number of unique individuals counted annually in the CE assessments has fallen from 6705 in the 2018 HUD reporting period to 5732 in the 2020 reporting period, a 15% decrease. The total count of people experiencing homelessness captured in the PIT count fell from 1380 in January 2018 to 1324 from in January 2020, a 4% decrease.

Changes in Size of Subgroups Experiencing Homelessness 2018-2020

Using data from the CE assessments, between the 2018 reporting period and the 2020 reporting period, the proportion in various subgroups experiencing homelessness increased or decreased as follows:

Percent Change in Proportion of All People Experiencing Homelessness, 2018 to 2020			
Gender		**Age**	
Men	–4.8%	Children Under 18	+10%
Women	+6.4%	Adults 18-24	+8.4%
Transgender or Gender Non-conforming	+55%	Adults 25 or Older	–2.3%
Race/Ethnicity		**Vulnerability Score**	
White alone	+.7%	VI-score Low	–9%
Black or African American Alone	+11%	VI-score Medium	–4.4%
Asian Alone	–17%	VI-score High	+5.2%
American Indian or Alaska Native alone	–11%	Chronically Homeless	+23%
Native Hawaiian or Pacific Islander alone	+23%	Potential Domestic Violence Survivor	+5.2%
Multiple Races	–15%		
Hispanic/Latino	+5%		

Noteworthy Differences Between Counts in PIT count and CE assessments

In some cases, the picture of who is experiencing homelessness looks somewhat different depending on which data tool is being used. In particular, the proportion of women experiencing homelessness is nearly 10 percentage points higher (and the proportion of men is correspondingly nearly 10 percentage points lower) when measured using the CE assessments instead of the PIT count data. Similarly, the proportion of homeless individuals experiencing chronic homelessness is substantially larger, on the order of 9 percentage points larger, when viewed through the CE assessment data in contrast to the PIT count data.

C. Comparison of CE assessments to number served in various project types

Of central interest to service providers who serve people experiencing homelessness is the extent to which aggregate need for services and supports are being met by various programs. A rough attempt to assess this has been provided through a comparison of the annual number of individuals completing the CE assessment and the number of people served in various project types for the HUD reporting periods of 2018, 2019, and 2020.

Seeking vs. Served Overall

In the following the number of people served in various project types in a HUD reporting year is expressed as a percentage of total CE assessments for the same time period. The proportion of all

CE assessments served in any project type has hovered around 96% in recent years, while the proportion served in shelters and transitional housing has decline slightly from 64% in the 2018

reporting year to 61% in the 2020 reporting year. The proportion of all people completing CE assessments who were served in rapid re-housing increased from 31% to 35% over the same period, while the proportion served in permanent supportive housing fell from 17% to 15%.

Seeking vs. Served Subgroups

Gender: Relative to the number CE assessments, the number of men served in any project type averages around 100% compared to roughly 80% for women. Women are substantially less likely to be served in shelters and transitional housing relative to men, but are slightly more likely to be served in rapid re-housing or permanent supportive housing projects. The proportions of transgender or gender non-conforming individuals served in shelters or transitional housing or any project type increased dramatically between 2019 and 2020. Setting this important improvement aside, transgender or gender non-conforming individuals experiencing homelessness are less likely than cisgender men or women to be served in any project type, shelters or transitional housing, or rapid re-housing. However, transgender or gender non-conforming individuals are more likely on average to be served in permanent supportive housing projects relative to cisgender men or women.

Race/Ethnicity: Relative to White individuals experiencing homelessness, individuals who identify as Black or African American, Asian, or multiracial have been more likely on average to be served in any project type. Only individuals identifying as American Indian or Alaskan Native are less likely than White individuals to be served in any project type. Relative to White individuals, Black or African American individuals completing a CE assessment are more likely to be served in shelters or transitional housing projects. Relative to non-Hispanic/non-Latino Whites, Hispanic or Latino Whites, Black or African American individuals, and people with multiracial backgrounds have been more likely to be served by rapid re-housing projects in recent years. Finally nearly all racial/ethnic groups have seen a decline in the proportion of individuals served by permanent supportive housing projects. However the size of these declines varies substantially across groups with the smallest declines experiences by non-Hispanic/non-Latino Whites and multiracial individuals.

Age: Young adults, age 18-24, and adults aged 15-54 appear to engage in services at very similar rates, with the exception that young adults are more likely to be served in rapid re-housing programs. Compared to these adults who are under 55, older adults (55 and older) are much more likely to be served by any project type or shelter or transitional housing projects. And during the 2020 reporting year the proportion of adults 65 and older served increased substantially across all project types.

Chronic Homelessness: Relative to the reporting period for 2018, the proportions of people experiencing chronic homelessness served in any project types and in permanent supportive housing projects have declined. The decline in participation in permanent supportive housing projects has been the most dramatic with 16% of chronically homeless individuals served by such

projects in 2018 as compared to 5% in the 2020 reporting period. The proportion served in rapid re-housing did increase over this same period, but only from 15% to 17%.

D. Significant disparities in experiences and conditions captured in CE assessments

This section of this report summarizes disparities in responses to all 34 different questions in the CE assessment across gender, age, racial/ethnic, and service needs groups, as well as chronic homelessness and potential domestic violence survivor statuses. This section already constitutes a summary of an enormous amount of underlying information, here the major disparities and trends for all respondents and different subgroups are highlighted:

All Respondents

-The proportion reporting sleeping outside has increase in recent years rising from 52% in the 2018 reporting year to 57% in the 2020 reporting year.

-59% of all individuals completing the CE assessment answered "yes" to a question asking whether their current bout of homelessness is, "in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?"

-62% of all individuals reported that their current period of homelessness, "has been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced".

Subgroup Disparities: Gender

Relative to cisgender men and women, in response to nearly all questions transgender and gender nonconforming individuals were more likely to have had more negative experiences. Transgender men reported a higher average number of times homeless, a higher rate of both receiving health care at the ER and using crisis services, were more likely to have threatened to harm themselves or others, to have been attacked or beaten up since homeless, and to report having someone who forces or tricks them to do things. They were also more likely to report that their current homelessness was caused by the breakdown of a relationship, more likely to report chronic health issues and physical health issues that have caused them to leave a housing situation. Transgender men expressed more interest in programs serving those with HIV/AIDS, and to report that their current bout of homelessness was caused by an experience of abuse or trauma. Relative to other gender categories, transgender men were less likely to report that they were sleeping outside, and less likely to say that they are currently able to take care of basic needs.

Transgender women reported a higher rate of receiving health care at the ER, use of a crisis service, inpatient hospitalizations, and interactions with the police. They were more likely to have threatened to harm themselves or others, to have been attacked or beaten up since homeless, to have legal issues that result in incarceration, fines, or make it difficult to find housing, and to have someone who forces or tricks them to do things. Transgender women were more likely to report

risky behavior (e.g. sex work, drug running, unprotected sex, or needle sharing), to report that their current experience of homelessness was caused by the breakdown of a relationship, to

report chronic health issues, and to have physical health issues that have caused them to leave a housing situation. They were more likely to express interest in programs serving those with HIV/AIDS, to report that drinking or drugs has or will make it difficult to stay housed, that they need medications that they are not taking or are taking medications not as prescribed, and that their current homelessness was caused by abuse or trauma. Transgender women were less likely to report having meaningful daily activities that make them feel happy, or to report that they are currently able to take care of basic needs. There were a few experiences that were particularly common for transgender women. They reported an unusually high rate of ambulance trips to the hospital, very large proportions reported that they avoid getting help when sick, and that they have been removed from a housing situation due to mental health issues.

Gender non-conforming individuals reported a higher frequency of receiving health care at the ER, use of crisis services, inpatient hospitalizations, and interactions with the police. They were more likely to report having been attacked or beaten up since homeless, having legal issues that make it difficult to find housing, having someone who forces or tricks them to do things, to report risky behavior, to report that their current homelessness was caused by the breakdown of a relationship, that physical health issues that have caused them to leave a housing situation, that drinking or drugs has or will make it difficult to stay housed, that they need medications that they are not taking or are taking medications not as prescribed, and that their current bout of homelessness caused by abuse or trauma. Gender non-conforming individuals were also less likely to report that they are currently able to take care of basic needs. Gender non-conforming individuals were particularly likely to report that they have threatened to harm themselves or others, and were uniquely likely to report chronic health issues, having a housing-limiting physical disability, that they avoid getting help when sick, and that they have experienced removal from a housing situation due to mental health issues.

Subgroup Disparities: Race/Ethnicity

Across most questions, experiences varied only modestly across racial/ethnic lines. That said, a handful of disparities were evident. The rate of incarceration varied along racial/ethnic lines with Hispanic/Latino Whites, multiracial people, Black or African American individuals, and American Indian or Alaska Native individuals reporting higher rates relative to non-Hispanic/non-Latino Whites. Native Hawaiian or Pacific Islanders, in particular, reported a higher likelihood of having a housing-limiting physical disability. Asian individuals experiencing homelessness were less likely to report sleeping outside, had a lower average number of times homeless, and had the lowest rate of use of emergency services. Asian individuals completing the CE assessment were more likely to report having meaningful daily activities that make them feel happy, and expressed more interest in programs serving those with HIV/AIDS.

Subgroup Disparities: Age

rate of incarceration, frequency of talking to police and use of crisis services, reporting having threatened to harm themselves or others, having been attacked or beaten up since homeless, having legal issues that make it difficult to find housing, reports of risky behavior, reporting that current homelessness was caused by the breakdown of a relationship, reporting that drinking or drugs has or will make it difficult to stay housed, and having mental health or brain issues that have or will make it hard to live independently, and that one's current homelessness was caused by abuse or trauma. On the other hand, the following experiences were found to be more common the older the respondents were: inpatient hospitalizations, ambulance rides, report of chronic health issues, physical health issues that have caused them to leave a housing situation, and having a physical disability.

Subgroup Disparities: Severity of Service Needs, Chronic Homelessness, & DV Survivors

Individuals with higher VI-SPDAT scores reported: longer lengths of time since they lived in permanent stable housing, a higher average number of times homeless, and more frequent use of emergency services. Those with higher service needs were more likely to have threatened to harm themselves or others, to have been attacked or beaten up since homeless, to have legal issues that make it difficult to find housing, to have someone who forces or tricks them to do things, to owe money to an individual or organization, to report that their current homelessness was caused by the breakdown of a relationship, to express interest in programs serving those with HIV/AIDS, to have a physical disability, to avoid getting help when sick, to report that drinking or drugs has or will make it difficult to stay housed, to have mental health or brain issues that have or will make it hard to live independently, to need medications that they are not taking or to take medications not as prescribed, and to report that their current experience of homelessness was caused by abuse or trauma. Individuals with lower VI-SPDAT scores were more likely to report having meaningful daily activities that make them feel happy, and to report that they are currently able to take care of basic needs. These same patterns of disparities were also found among people experiencing chronic homelessness and potential survivors of domestic violence.

E. Examining the composition of identities contained within the multiple races category

Of all unique adults who completed the CE assessment in the HUD reporting years for 2018, 2019, and 2020, 5.5%, or 668 people, identified as multiracial. Of these multiracial individuals the largest proportion, 46%, identified as being both American Indian or Alaskan Native and White. 22% of these multiracial individuals identified as Black or African American and White, and the next largest proportion was the 15% who identify as American Indian or Alaskan Native and Black or African American.

Disparities Across Multiracial Identities

The detailed comparisons of CE assessment questions examined in Section D of this report were also examined for multiracial subgroups. Important disparities highlighted by these comparisons include:

-Individuals identifying as both American Indian or Alaska Native and White consistently reported a higher frequency of emergency room visits, ambulance rides, inpatient hospitalizations, and conversations with police relative to other multiracial subgroups. This indicates that that the health needs of this specific subpopulation are particularly acute.

-Individuals identifying as Black or African American and White had higher rate of incarceration relative to other multiracial subgroups.

-Another area of substantial diversity is in the area of physical health and disability. Relative to people identifying as Black or African American and White, multiracial individuals who identify as American Indian or Alaska Native and either Black or African American or White were substantially more likely to report having to leave a housing situation or program due to physical health issues.

-American Indian or Alaska Native and White individuals were substantially more likely to report chronic health issues, physical disabilities that limit housing options, mental health or brain issues, and that they are not taking medications that they should be taking, relative to other multiracial subgroups. This specific group was also more likely to report that their current period of homelessness was due to an experience of abuse or trauma.

These varied responses from individuals in different multiracial subgroups underline the diversity of conditions and experiences obscured by the broader Multiple Races category.

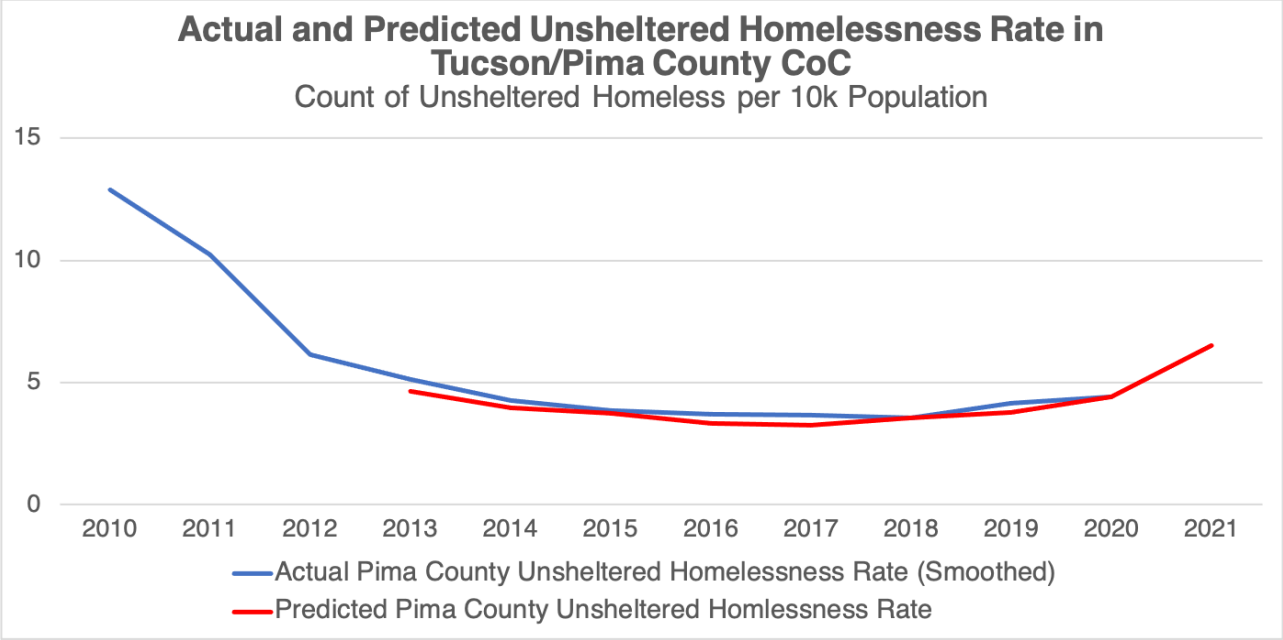
A. ESTIMATING THE NUMBER OF PEOPLE EXPERIENCING UNSHELTERED HOMELESSNESS IN PIMA COUNTY IN JANUARY 2021

The annual Point in Time count is one of the primary tools used to track the number of people experiencing sheltered and unsheltered homeless. Due to the ongoing COVID-19 pandemic, in January of 2021 the "street count" component of the Point in Time count was cancelled. While data on people experiencing sheltered homelessness was still collected, the street count is the source of the annual counts of the number of people experiencing unsheltered homelessness. In order to provide a data-driven estimate of the number of people experiencing unsheltered homelessness in the Tucson/Pima County CoC in January of 2021 researchers at the Southwest Institute for Research on Women (SIROW) have constructed a model estimating the associations between CoC-level economic factors and year-to-year changes in CoC-level unsheltered homelessness rates from 2013-2020 for a subset of major city and "other largely urban" CoCs that met particular data requirements (see **Appendix A** for details). These model results can then be used to estimate the rate of unsheltered homelessness in Pima County in 2021 based on our best estimates of the levels of the CoC-level economic factors in Pima County in 2020. Five CoC-level economic factors are included in our model: the unemployment rate, the poverty rate, the rental vacancy rate, the median rent, and the percent of homeowners in occupied units. With the exception of the unemployment rate, consistent county level estimates for the independent variables in 2020 are not yet available. The data sources used to project these variables forward to 2020 are also described in **Appendix A**.

Figure A.1 presents the rate of unsheltered homelessness in Pima County as captured by HUD-sponsored Point in Time counts conducted in January each year (in blue). These annual count data are smoothed using a three-year moving average in order to remove year-to-year variation attributable to idiosyncratic factors (such as weather, changes in count methodology, etc.) to better capture the real underlying trends in unsheltered homelessness. **Figure A.1** also presents the rate of homelessness predicted for Pima County based on the model results (in red). The model predicts both levels and changes in the actual rate of unsheltered homelessness in Pima County extremely well, with a correlation of .93 between these two series for the years 2013-2020. Since the Point in Time counts are conducted in January this model estimates the rate of unsheltered homelessness each January based on the levels of the independent variables in the previous year. In order to estimate the rate of unsheltered homelessness in January 2021, we input the levels of the 5 independent variables for Pima County in 2020. Between 2019 and 2020 four of the independent variables (unemployment, poverty, median rent, and the homeownership rate) increased, while the rental vacancy rate decreased. These changes translate into a substantial increase in the dependent variable in the model, the annual rate of unsheltered homeless people per 10,000 residents in Pima County.

This model estimates that the observed rate of unsheltered homeless individuals per 10,000 residents increased from 4.4 in 2020 (470 individuals) to 6.5 in 2021 (693 individuals). This constitutes a 47% increase in the number of individuals experiencing unsheltered homelessness between 2020 and 2021. The smoothing technique mentioned above to adjust the homelessness count data plays a dual role of both reducing variation due to artifacts and errors, but also reduces year-to-year variation due to real changes in the size of the homeless population. Given this, it is preferable to estimate the increase in the number of unsheltered homeless individuals in 2021 based on the actual count of unsheltered individuals in the 2020 street count. In January of 2020, 579 individuals experiencing unsheltered homelessness were interviewed during the street count. ***If we apply this 47% increase to this count, our best estimate of the number of unsheltered homeless individuals in Pima County in January of 2021 is 854 individuals.***

Figure A.1



Caveats

A number of caveats about this estimate are necessary to mention. This estimate is based on the "normal" relationships between labor and housing market conditions (observed in the years 2012-2019) and rates of unsheltered homelessness (observed in January of the years 2013-2020). The rate of estimated unsheltered homelessness estimated by this model for January 2021 is what we would expect to see if the normal impacts on homelessness associated with factors like unemployment were to have continued through 2020. Unfortunately, we know that 2020 was an unusual year on multiple dimensions relevant to these specific relationships. The pandemic-induced recession was unusually severe and job losses were extremely compressed in time relative to traditional recessions. In addition, the enactment of COVID-19-related eviction moratoriums in 2020 would be expected to dampen the capacity of labor and housing market conditions to

increase homelessness. Further, the response to the pandemic increased the availability of accommodations for people experiencing homelessness in many areas including the Tucson/Pima County CoC. This increased the size of the number of people experiencing sheltered homelessness and may have reduced the number of people experiencing unsheltered homelessness in ways that may be unique to 2020. Finally, the pandemic itself may have influenced the behavior and decisions of people experiencing homelessness in manners that are impossible to account for with this analytical approach. For example, individuals who might otherwise have stayed in a shelter may have stayed outdoors to avoid risk of infection in indoor spaces. Alternatively, as the availability of single occupant accommodations (in hotels for example) in response to the pandemic increased individuals who may have usually stayed outdoors may have accepted these accommodations that have not been available in the past.

B. OVERVIEW OF CHANGES OVER TIME IN THE POPULATION EXPERIENCING HOMELESSNESS

The Tucson/Pima County CoC collects information on the characteristics of people experiencing homelessness through different methods. One approach is the annual Point in Time count described in the previous section. Another tool is the Coordinated Entry (CE) assessment. When a person experiencing homelessness expresses an interest in services they are asked to complete a CE assessment which collects a wide range of information on the individual's experiences. If the individual has a family with them they complete a CE assessment for families, and if they are considered a youth they complete a CE assessment for youth. These assessments may be completed multiple times as an individual interacts with different service providers. These three assessment tools are slightly different and are housed in different datasets. For the comparisons provided here we identify unique individuals completing each of the three types of CE assessments, separately, within HUD reporting years 2018, 2019, & 2020. Since we identify unique individuals within a particular assessment tool (as opposed to unique across all assessments) it is possible that an individual could show up twice as a result of being captured in two different assessment tools (e.g. an individual does the individual assessment at one point and then later does the family assessment when with their family, or a youth ages into the adult survey within a reporting year and completes both an individual assessment and an assessment for youth that year). Big picture, this means that the totals identified via CE assessments contain slight overcounts of the number of people experiencing homelessness[1]. With that caveat in mind, the following provides comparisons of change in the total number of people experiencing homelessness overall and change over time in the size of subpopulations as captured by these different tools.

Overall Homelessness in the Tucson/Pima County CoC: 2018-2020

The comparison provided in **Figure B.1** indicates that the number of unique individuals captured in the CE assessments in a HUD reporting year is substantially larger, on the order of 4 to 5 times larger, than the number of people experiencing homelessness captured in the annual PIT count. This is expected and consistent with research which indicates that point in time counts systematically understate the true number of people experiencing homelessness, especially

[1] Using a merge function in STATA to identify individuals that appear in more than one CE assessment tool, it was found that of the 10,301 unique individuals who completed an Individual CE assessment between 10/1/2017 and 9/30/20, 343 of these individuals also completed a Family CE assessment in this period. Of the same set of 10,301 individuals, 146 also completed a Youth CE assessment. This indicates that 2.4% of the total CE assessments across the three assessment tools are a duplicate for the same individual. Looking at the total number of unique CE assessments in the 2018 HUD reporting period in Figure B.1 this suggests that the total of 6705 should be reduced by 159 individuals to roughly 6,546. These duplicate assessments have not been removed from the comparisons provided below. They represent a very small proportion of cases and are very unlikely to distort these comparisons in any systematic or substantive manner.

unsheltered homelessness[2]. One study found that the annual number of people experiencing homelessness captured in administrative data was 2.5 to 10.2 times greater than the numbers obtain via point in time counts[3]. This is not surprising for a number of additional reasons, including: 1) The PIT count is conducted on a single day and captures individuals staying in shelters and transitional housing and the people experiencing unsheltered homelessness that PIT count volunteers manage to find and interact with on that particular day. 2) The CE assessments are completed by some individuals who manage to resolve their housing insecurity with or without the assistance of services. The number of CE assessments would be expected to be larger as some individuals experiencing housing insecurity fall into and exit periods of homelessness (and therefore would not necessarily be captured in the PIT count) 3) Housing insecurity and homelessness often increases the mobility of individuals. The CE assessments are completed by some share of people experiencing homelessness who are not rooted long-term in Pima County. The PIT count would also capture some of these individuals, but the CE assessments will capture significantly more of these people experiencing homelessness who are visiting or passing through Pima County over the course of a year.

With these substantial differences in these surveys in mind, the number of unique individuals counted in the CE assessments has fallen from 6705 in the 2018 HUD reporting period to 5732 in the 2020 reporting period, a 15% decrease. The total count of people experiencing homelessness captured in the PIT count fell from 1380 in January 2018 to 1324 from in January 2020, a 4% decrease.

Homelessness in Subpopulations in the Tucson/Pima County CoC: 2018-2020

We will now turn to an examination of changes over time in the size of different subpopulations of people experiencing homelessness. There is one additional difference between these comparisons worth noting. Below the percentages of individuals belonging to various subpopulations in the two different surveys are presented. For the PIT count data these proportions are expressed as a percentage of all people experiencing homelessness captured in the PIT count (all adults and children). The CE assessment does not collect demographic data on children, so the proportions from the CE assessment are expressed as a percentage of all unique adults and heads of households (HoHs) captured in that HUD reporting year.

Subgroups: Gender

Averaging across the three years/reporting periods, more men have been experiencing homelessness then women, as expected (see **Figures B.2 & B.3**). However, the extent of this skew differs substantially across the two surveys. In this three-year period the average proportion of men is 66% in the PIT counts as compared to 56% in the CE assessments. While the reasons for this

[2] Hopper, K., Shinn, M., Laska, E., Meisner, M., and Wanderling, J. 2008. "Estimating numbers of unsheltered homeless people through plant-capture and postcount survey methods." *American Journal of Public Health*. 98(8): 1438-1442.
[3] Metraux, S. et al. 2001. "Assessing homeless population size through the use of emergency and transitional shelter services in 1998: results from the analysis of administrative data from nine US jurisdictions." 116 *Pub. Health Rep*. 344.

difference are outside of the scope of this report, it suggests that the PIT count is more likely to capture men than women than is the case with the CE assessments. The proportions of men and women experiencing homelessness have been relatively stable over time, but it is interesting to note that between 2019 and 2020 the small trends captured in these two surveys are moving in different directions. The CE assessments suggest that the proportion of women has increased modestly between 2019 and 2020, while the PIT count data suggests a modest decrease in the share of women experiencing homelessness. These data also show the well know gender disparity in unsheltered homelessness, with women comprising a much smaller share of the population of people experiencing unsheltered homelessness.

Figure B.4 displays the same trends for people experiencing homelessness who identify as transgender or gender non-conforming. Both surveys indicate growth in the very small share of people with these gender identities between 2018 and 2020. **Figure B.23** presents the percent change in the proportions of each group examined between 2018 and 2020 as captured in the CE assessments. The percent change in this very small group captured between 2018 and 2020 is rather large, a 55% increase. Whether this growth is due to an increasing share of transgender and gender non-conforming individuals experiencing homelessness or an increase in the proportion of people experiencing homelessness identifying as transgender and gender non-conforming is impossible to distinguish in these data. Regardless, one should keep in mind that this is a very small subgroup and sample variability can contribute to large swings in indicators for small populations (not driven by actual changes in the subgroup in question). In general, this consideration should lead us to have more confidence in trends captured in the larger set of CE assessments than the PIT count data.

Subgroups: Race and Ethnicity

Figures B.6, **B.7**, **B.8**, **B.9**, and **B.10**, present these three-year trends as captured by the CE assessments and the PIT counts for people experiencing homelessness who identify solely as either White, Black or African American, Asian, American Indian or Alaska Native, or Native Hawaiian or other Pacific Islander, respectively. **Figure B.11** presents these trends for people who identify as multiracial, and **Figure B.12** focuses on people who identify as Hispanic or Latino regardless of race. Let's start with a simple assessment of the racial/ethnic composition of people experiencing homelessness in Pima County. As mentioned above, due to the larger sample size, the proportions provided by the CE assessments suffer from much less sampling variability over time as compared to the PIT count. **Figure B.22** provides the three-year average of the proportion of each racial category obtained using the CE assessments and contrasts these proportions with the demographics of Pima County captured in the U.S. Census Bureau's 2019 American Community Survey. Consistent with prior research and expectations, people identifying solely as White, Asian, and Hispanic/Latino are underrepresented in the set of people experiencing homelessness relative to their share of the broader population. Those identifying as only Black or African American, American Indian or Alaska Native, Native Hawaiian or other Pacific Islander, and those with a multiracial identity are all overrepresented among people experiencing homelessness. The overrepresentation of Black or African American individuals is the largest, with

the proportion experiencing homelessness roughly three times the size of the percent of people identifying as Black or African American in Pima County.

Turning to change in the racial/ethnic composition of homelessness over time, **Figure B.23** presents the percent change in group proportions as captured in the less volatile CE assessment data. The proportion of White individuals has been largely stable over this three-year period. The proportion of Black or African American people experiencing homelessness has increased by 11%, Native Hawaiians or Pacific Islanders increased by 23%, and the proportion identifying as Hispanic or Latino increased by 5%. Three racial groups decreased as a proportion of total CE assessments over this period. The proportion of Asian individuals experiencing homelessness declined by 17%, those identifying as American Indian or Alaska Native fell 11%, and the proportion of people identifying as multiracial fell 15%.

Subgroups: Age

The PIT count data are reported for three age groups: children under 18, adults 18-24, and adults 25 and over. **Figures B.14**, **B.15**, and **B.16** present trends in the proportion of people experiencing homelessness as captured in the CE assessments and PIT count data for these age categories. Overall, both the CE assessment data and the PIT count data largely suggest stability in the proportions across these age categories over this three-year period. That said, the proportion of children experiencing homelessness increased by 10% from 10.6% in 2018 to 11.7% in 2020.

Subgroups: People Experiencing Chronic Homelessness

Figure B.18 presents trends in the proportion of people experiencing homelessness who are categorized as experiencing chronic homelessness[4]. The proportion of individuals experiencing chronic homelessness in the CE assessments is very stable over time, staying between 33-34% over this three-year period. The PIT count data on the other hand captures a 10 percentage point increase in the proportion of individuals experiencing chronic homelessness. This increase is driven almost entirely by a very substantial increase in the proportion of people experiencing unsheltered homelessness who would be characterized as chronically homeless. Again it is hard to know how much of this trend may be attributable to sample variability, but this increase is so large it suggests a strong possibility of a substantial increase in the proportion of individuals experiencing chronic homelessness among the population of people experiencing unsheltered homelessness in recent years.

[4] "'Chronically homeless'' is defined in section 401(2) of the McKinney-Vento Homeless Assistance Act, 42 U.S.C. 11360 (McKinney-Vento Act or Act), as an individual or family that is homeless and resides in a place not meant for human habitation, a safe haven, or in an emergency shelter, and has been homeless and residing in such a place for at least 1 year or on at least four separate occasions in the last 3 years. The statutory definition also requires that the individual or family has a head of household with a diagnosable substance use disorder, serious mental illness, developmental disability, posttraumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability." - *Federal Register* Vol. 80, No. 233 December 4, 2015, Rules and Regulations pg 75792.

Subgroups: Survivors of Domestic Violence

There is not a specific unique question about domestic violence in the CE assessment. Instead, in the CE assessments individuals answering "yes" to the following two questions were identified as potential domestic violence survivors: 1) "Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?" and 2) "Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?". Since these questions are broad and likely include a wide range of negative experiences above and beyond domestic violence this explains, in part, the huge difference in the proportion of domestic violence survivors captured in the CE assessments versus the PIT count in **Figure B.19**. While the comparison between these two different operationalizations of experiences of domestic violence is imperfect, both the CE assessment and PIT count data indicate modest increases in the proportion of people experiencing homelessness who are survivors of domestic violence over this period.

Severity of Service Needs

The CE assessments were also examined to see whether there have been any substantial changes in the acuity of service needs among people experiencing homelessness in recent years. **Figure B.21** presents the number of unique adults, HoHs, and youth completing the CE assessment who scored low, medium, or high on the Vulnerability Index (VI-SPDAT). Answers on the CE assessment are scored and the total score is used to guide decisions about prioritization for services. A score of 0-3 is considered low. A score of 4-7 is categorized as medium for individuals and youth, while a score of 4-10 is considered medium for families. A score of 8-17 places an individual or youth in the high category, while a score of 11-24 is considered high for families. The trends in **Figure B.21** indicate that the raw number of people at all three levels of service needs have fallen slightly (as we would expect given the overall decline in unique CE assessments presented in **Figure B.1**). However, between 2018 and 2020 the number of people categorized as having low service needs fell by 20%, the number with medium needs fell 16%, and the number with high needs fell by 8%. As a result the proportion of people experiencing homelessness who scored as high in their service needs increased from 49% in the 2018 reporting year to 51% in the 2020 reporting year, while the proportions of all people experiencing homelessness categorized as having low or medium service correspondingly fell (see **Figure B.23**).

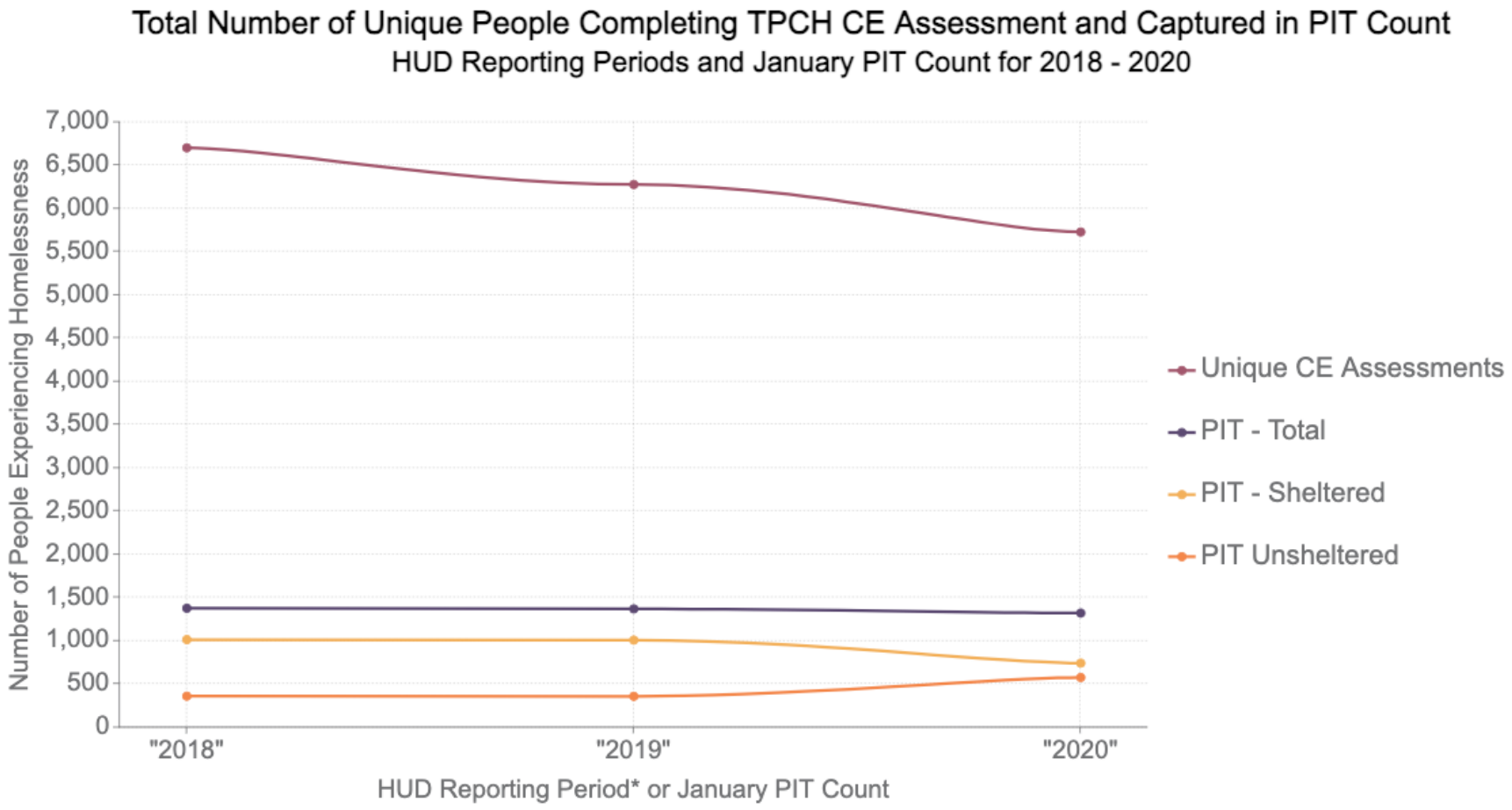
Differences Between the CE Assessments and the PIT Count Data

As has already been made clear, in some cases the picture of who is experiencing homelessness looks somewhat different depending on which data tool is being used. **Figures B.5**, **B.13**, **B.17**, display the annual difference between the proportions of people experiencing homelessness by their gender, race/ethnicity, and age categories. These differences are simply the proportion captured in the PIT count subtracted from the proportion captured in the CE assessments for each category. **Figure B.20** further simplifies these comparisons by averaging the three annual proportions provided by each survey and subtracting the average 2018-2020 proportion provided by the PIT count data from the three-year average of the proportion from the CE assessment data.

Figure B.20 indicates that the gender composition of people experiencing homelessness is quite different depending on which tool you are using. Specifically, the proportion of women experiencing homelessness is nearly 10 percentage points higher (and the proportion of men is correspondingly nearly 10 percentage points lower) when measured using the CE assessments instead of the PIT count data. Similarly, the proportion of homeless individuals experiencing chronic homelessness is substantially larger, on the order of 9 percentage points larger, when viewed through the CE assessment data in contrast to the PIT count data. The reasons why are outside of the scope of this report, but local decision makers and service providers may want to consider why women and people experiencing chronic homelessness appear to be underrepresented in the PIT count. Further, consideration might be given to the practical consequences of underrepresentation of such groups for both funding and decisions about service provision.

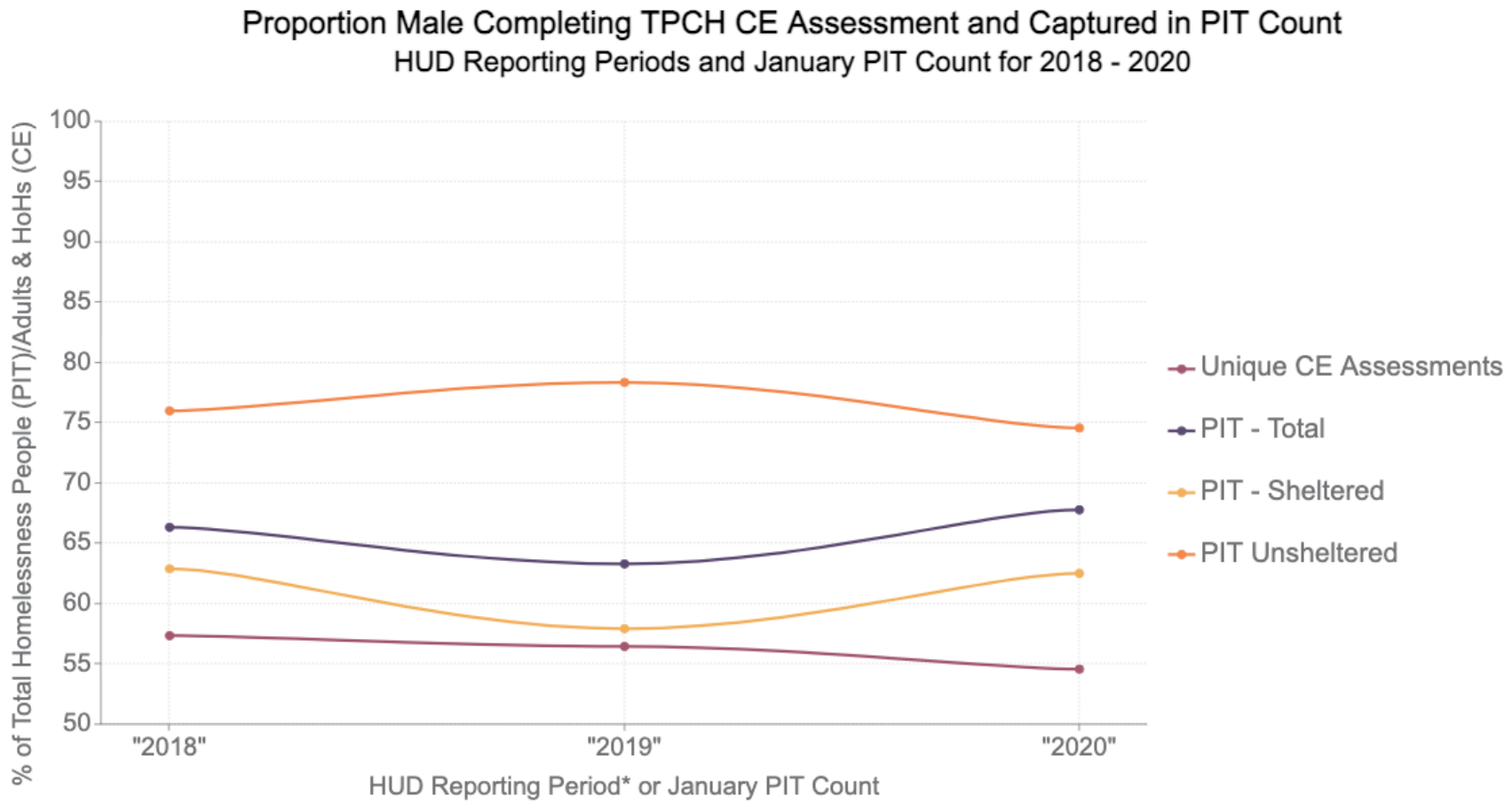
Figures B.5 and **B.13** add the additional nuance that the differences in proportions captured in the CE assessments and the PIT count were particularly large for some subgroups in the year 2020. This was especially the case for the proportions of men and women, and the proportions of Whites, American Indian or Alaska Natives, and people with multiracial identities. This could be a result a fluke due to sample variability or some idiosyncratic feature of the 2020 PIT count. Regardless, the question of whether these accentuated discrepancies between the CE assessment and the PIT count are a one-time issue or continue in the future is a dynamic worth keeping an eye on.

Figure B.1



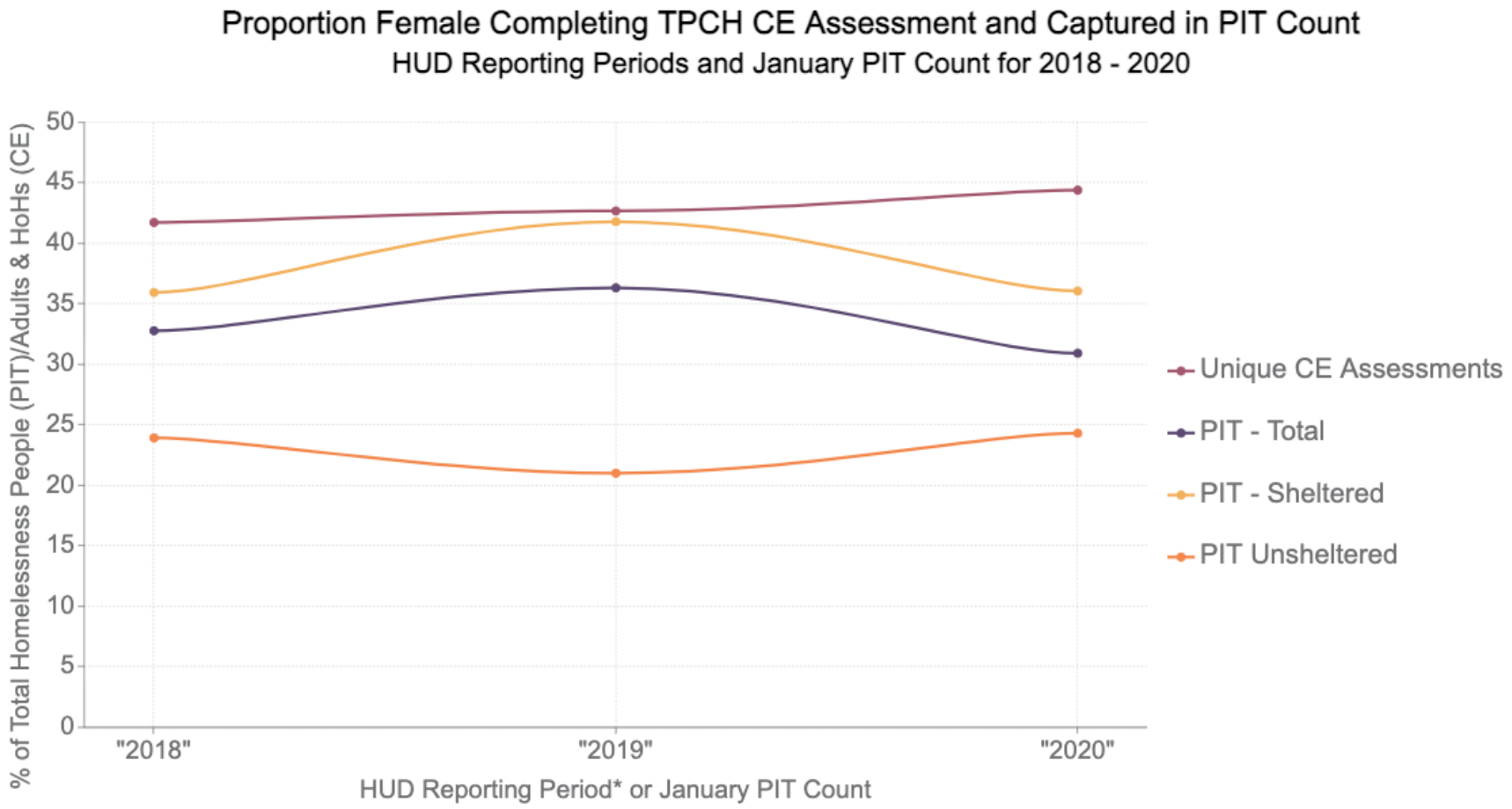
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.2



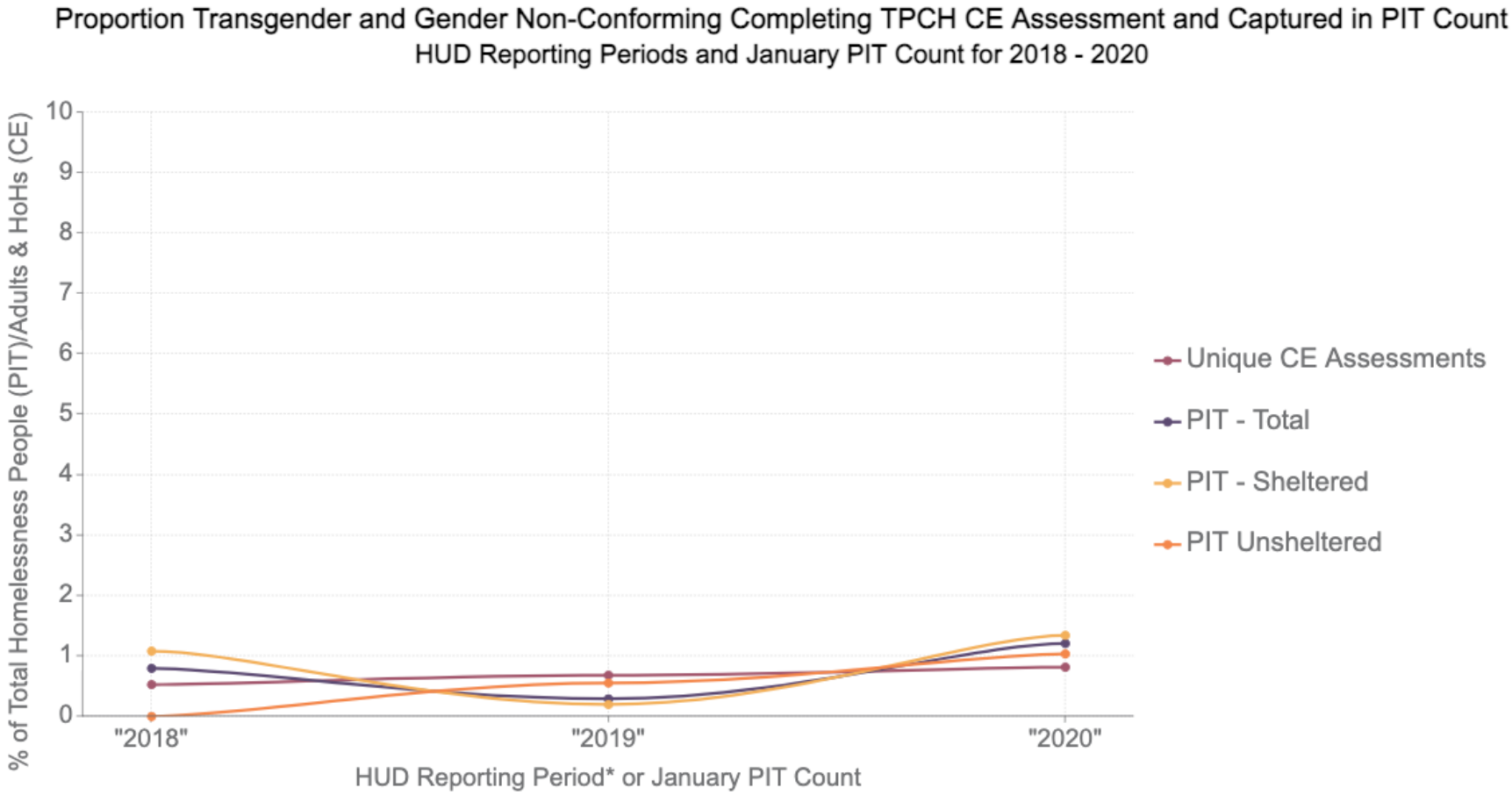
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.3



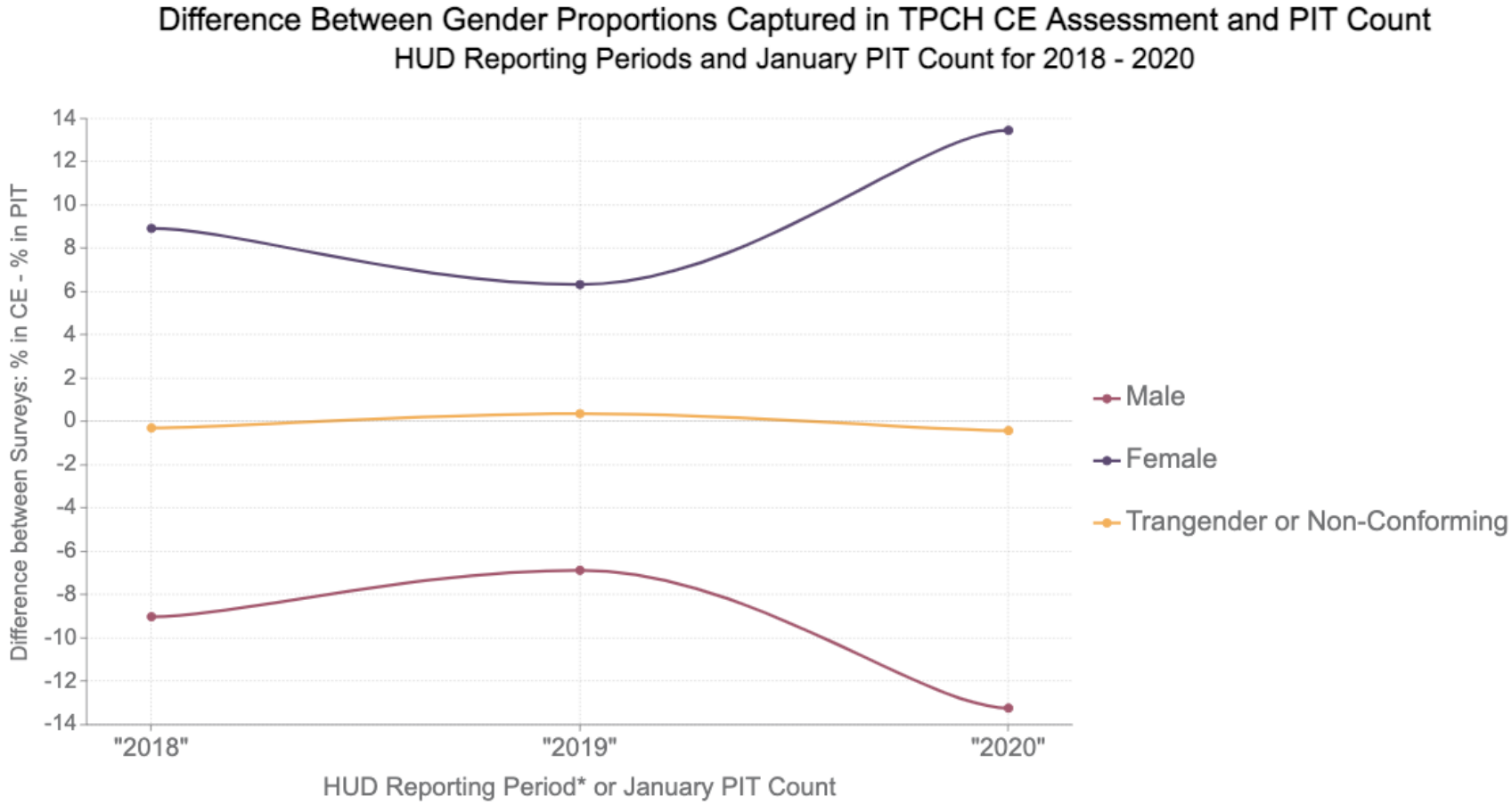
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.4



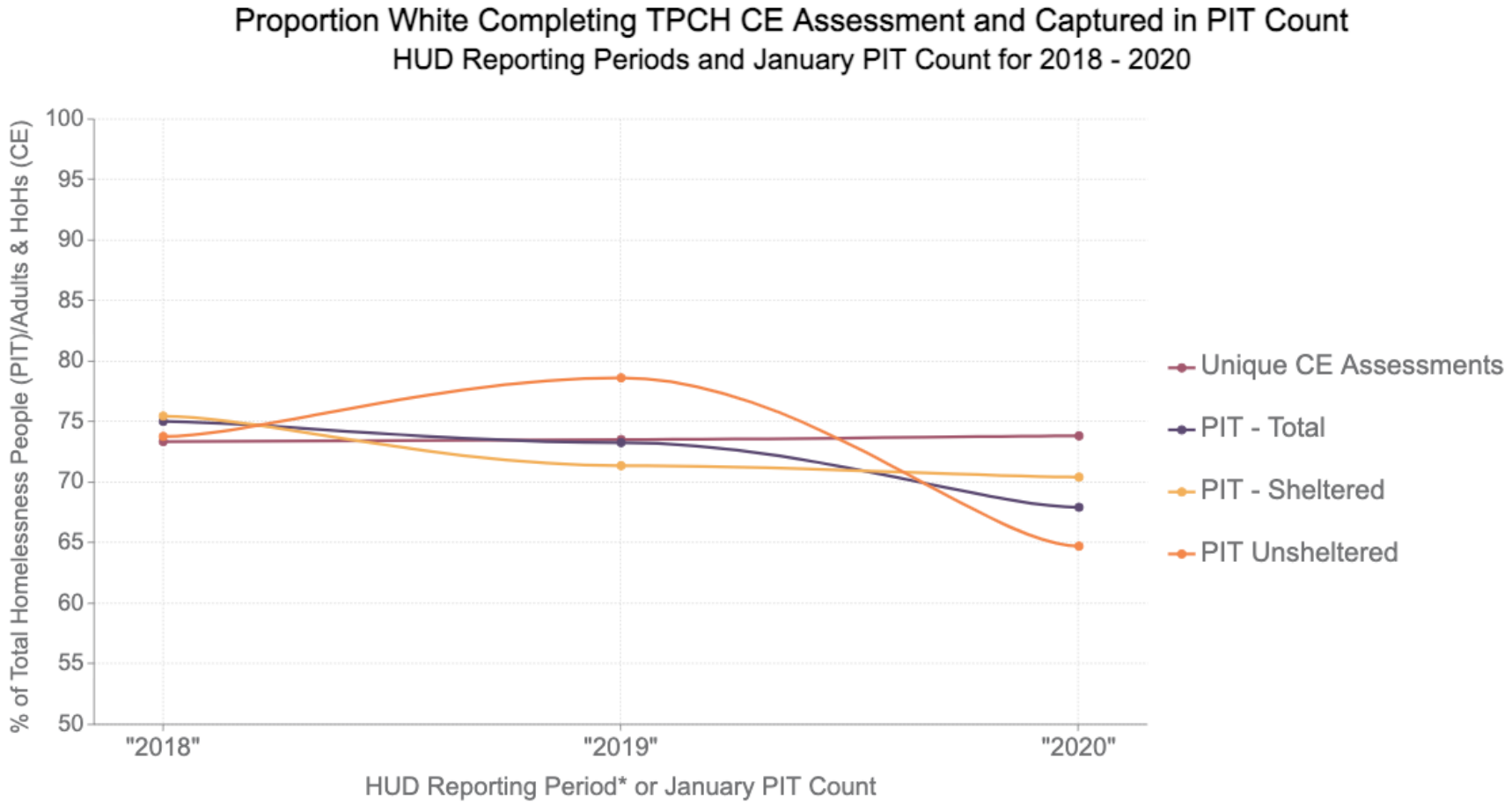
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.5



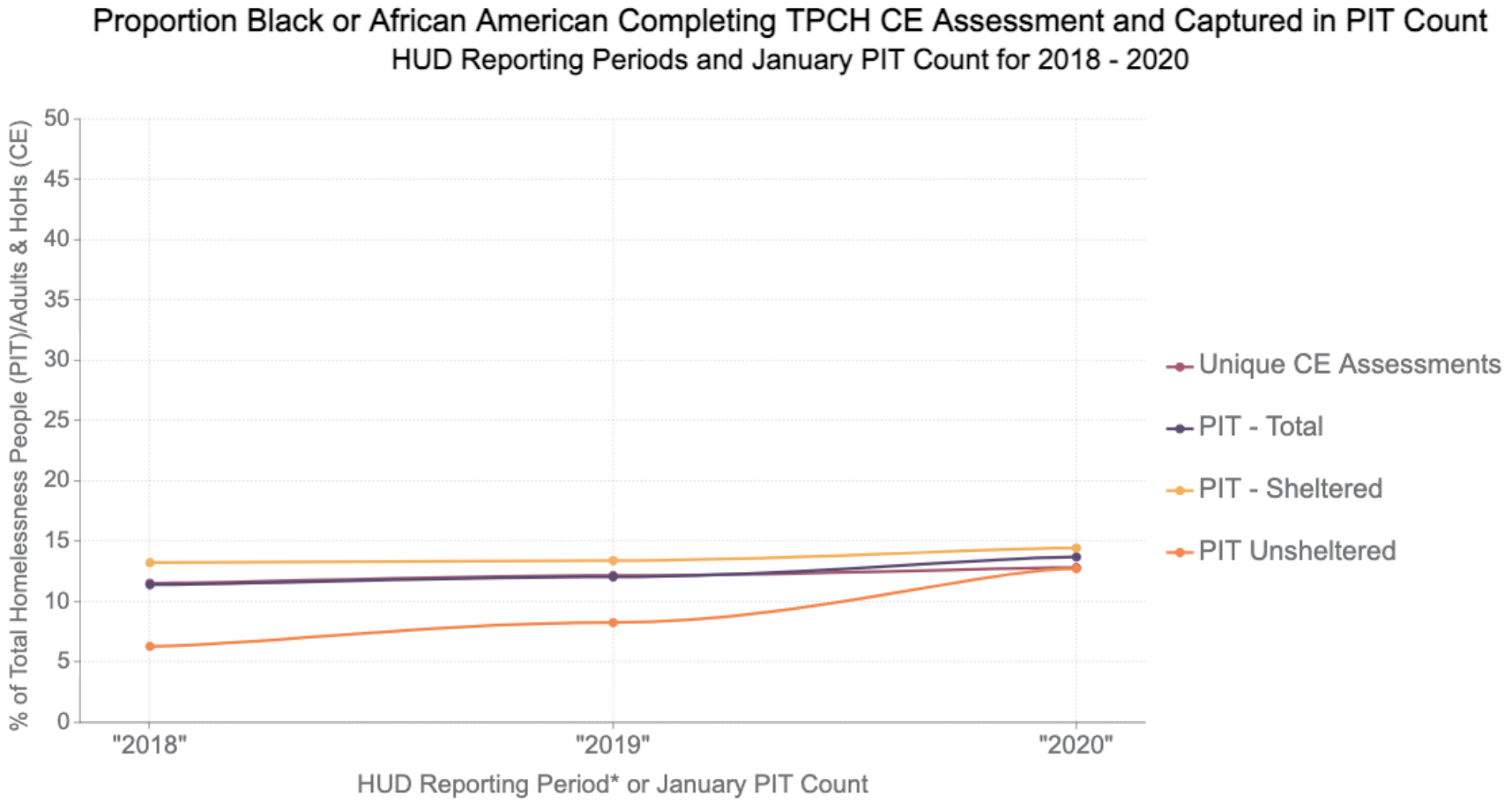
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.6



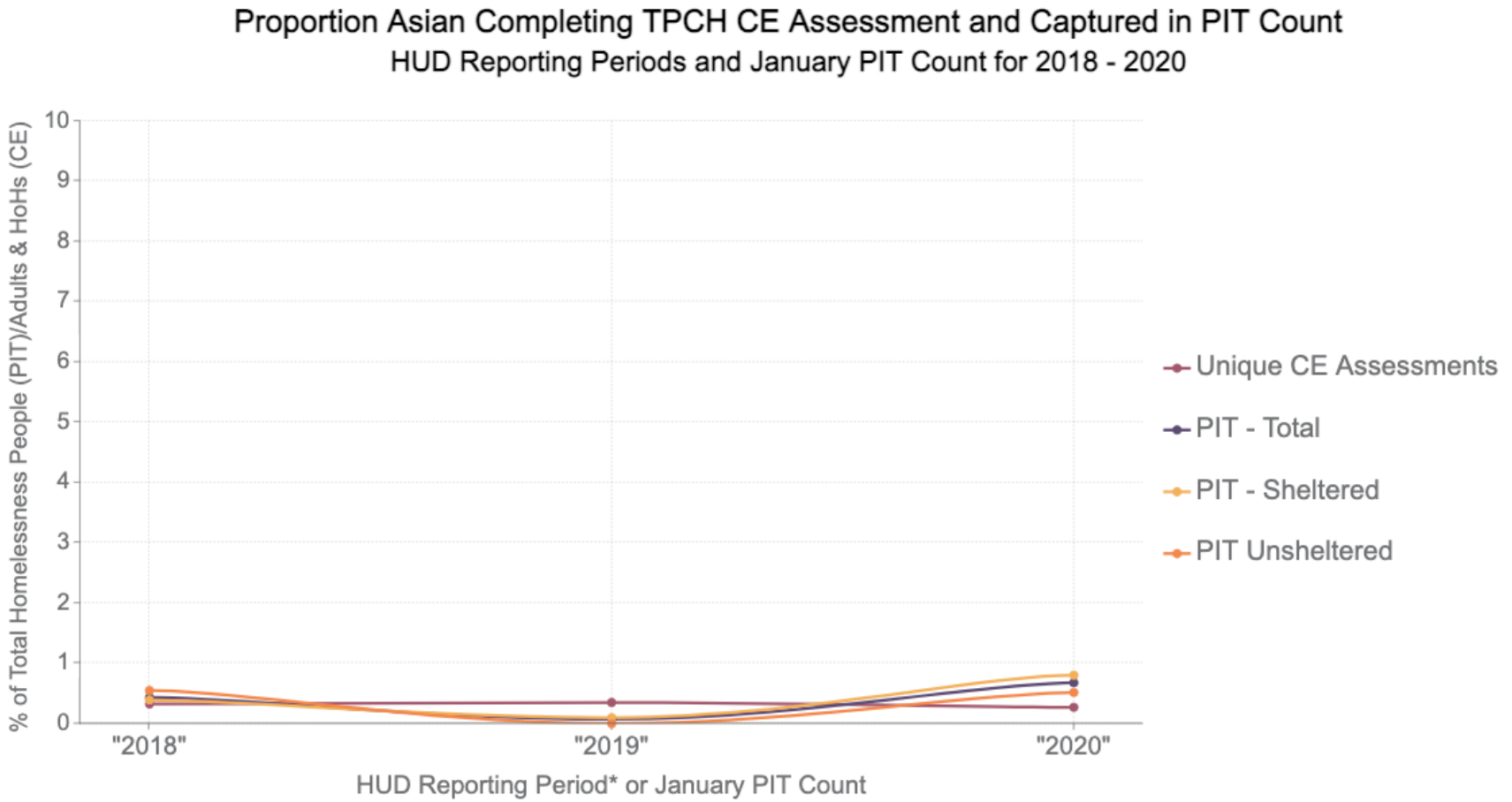
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.7



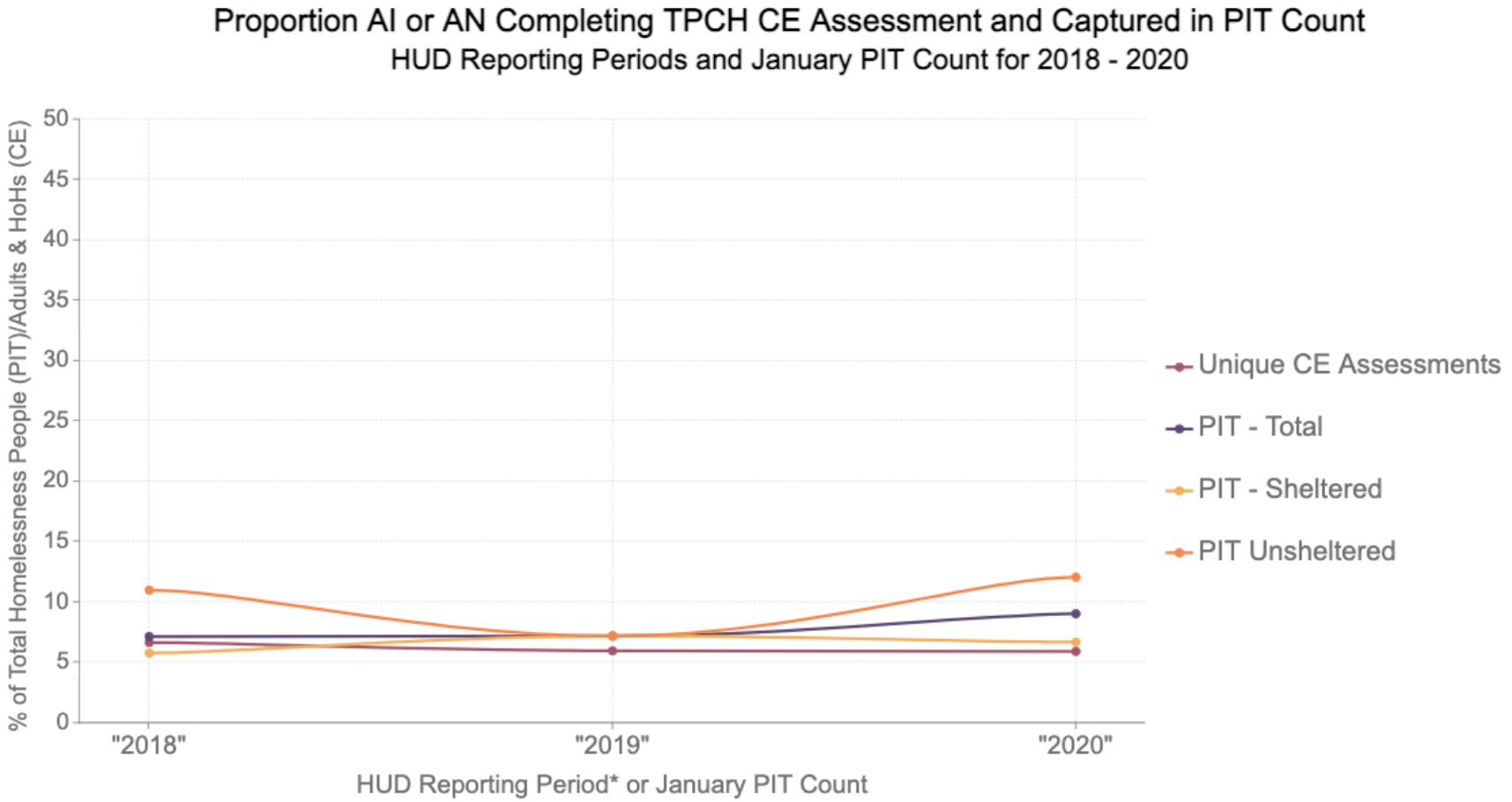
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.8



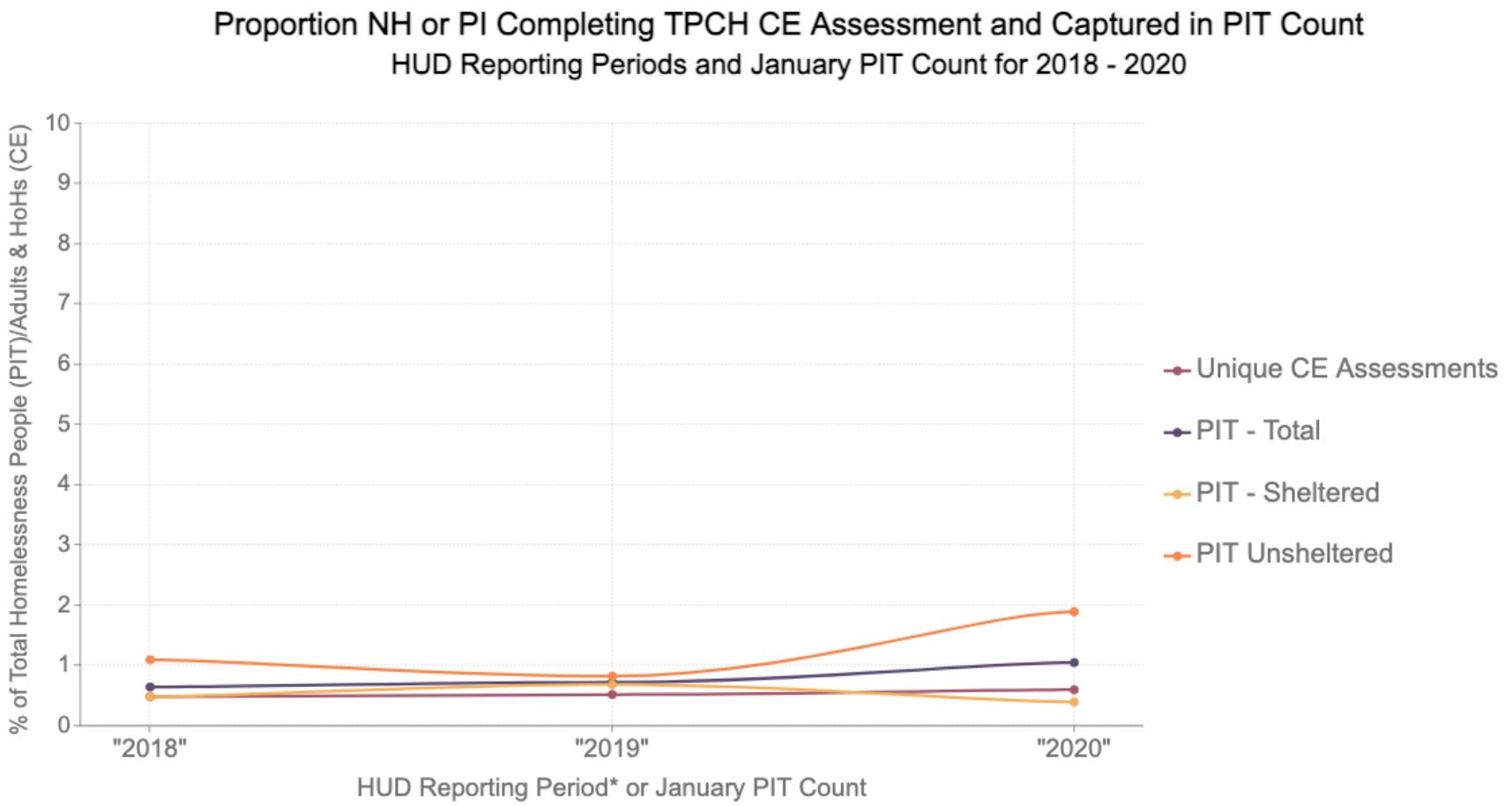
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.9



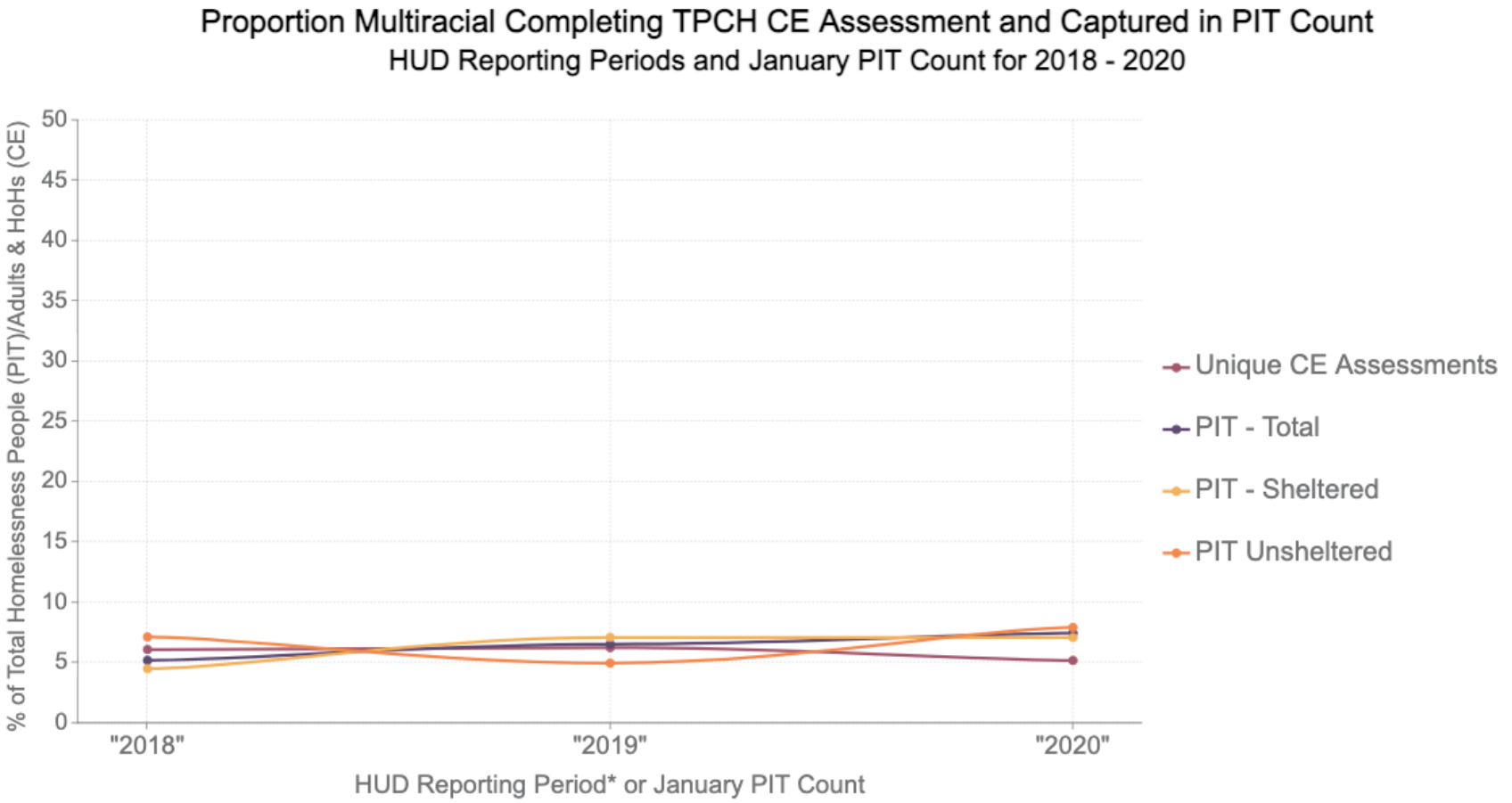
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.10



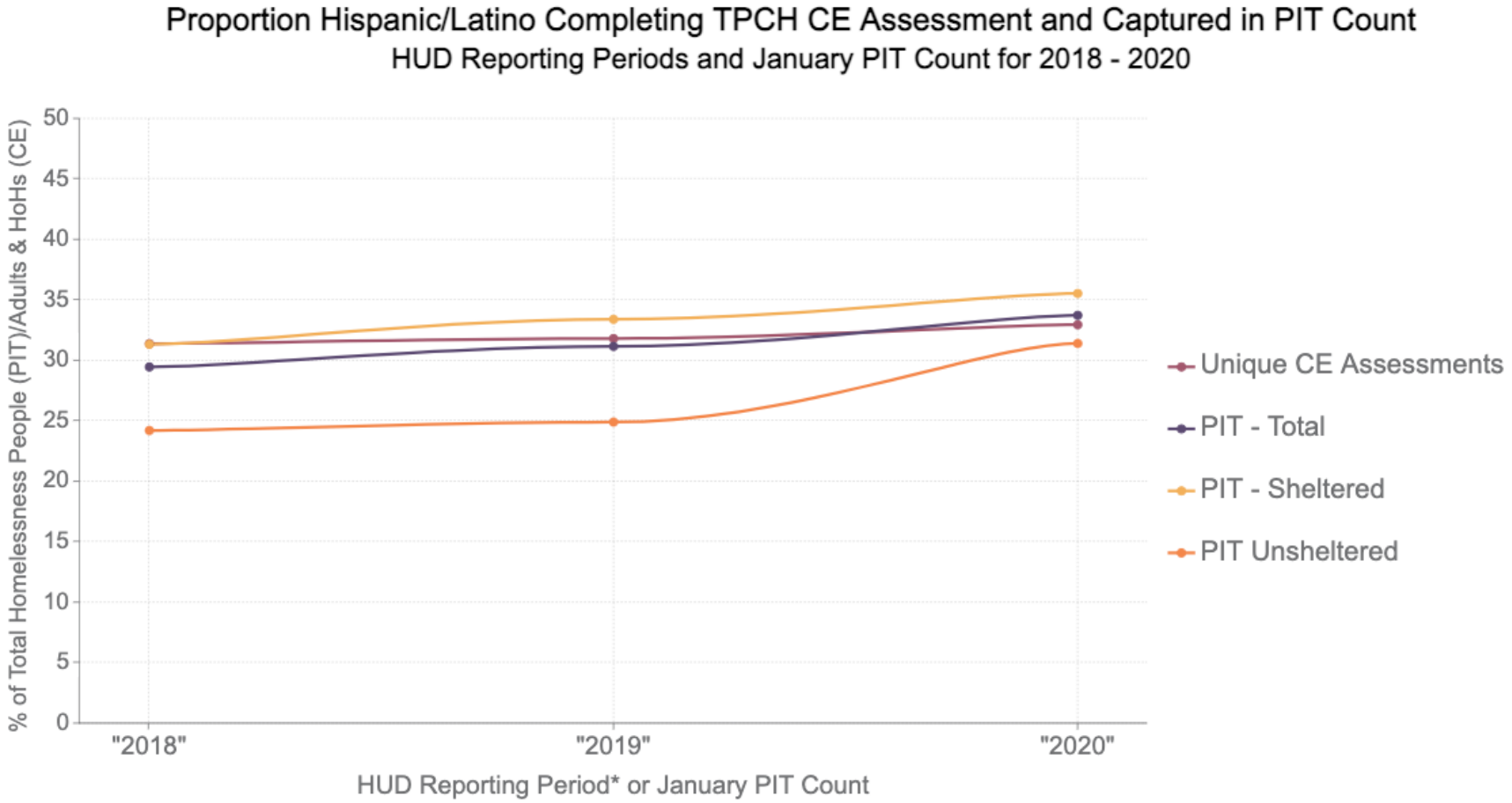
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.11



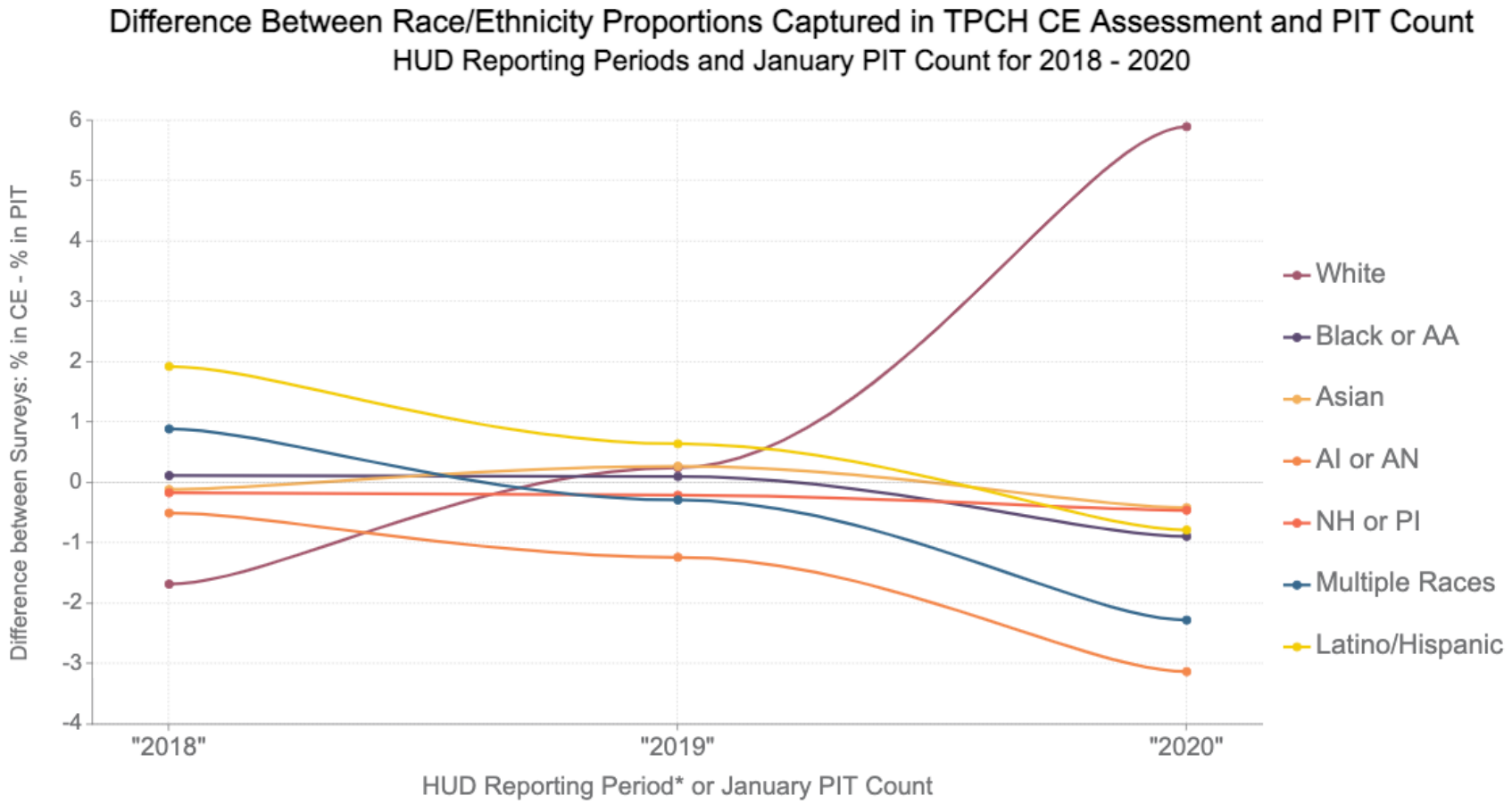
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.12



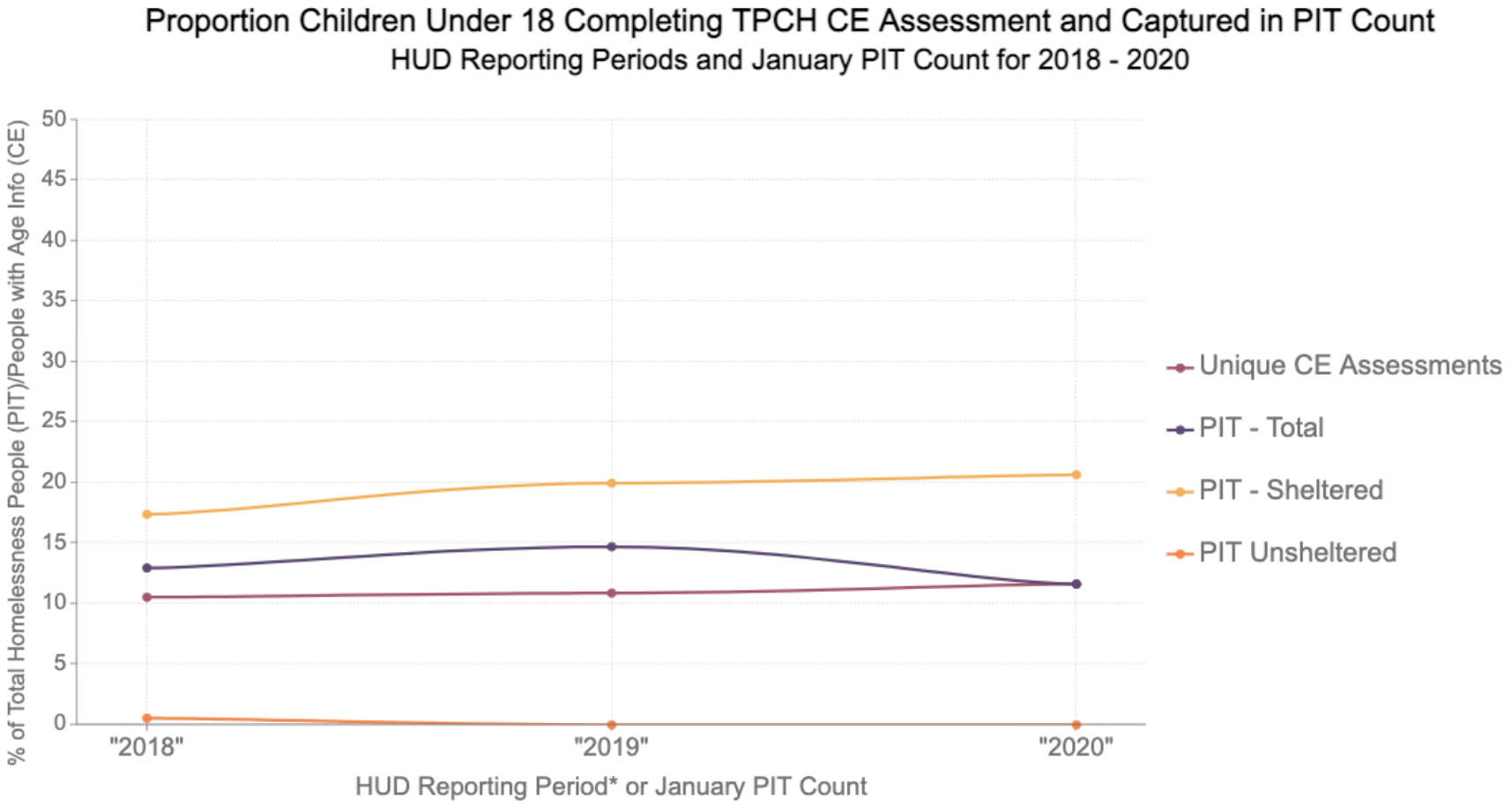
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.13



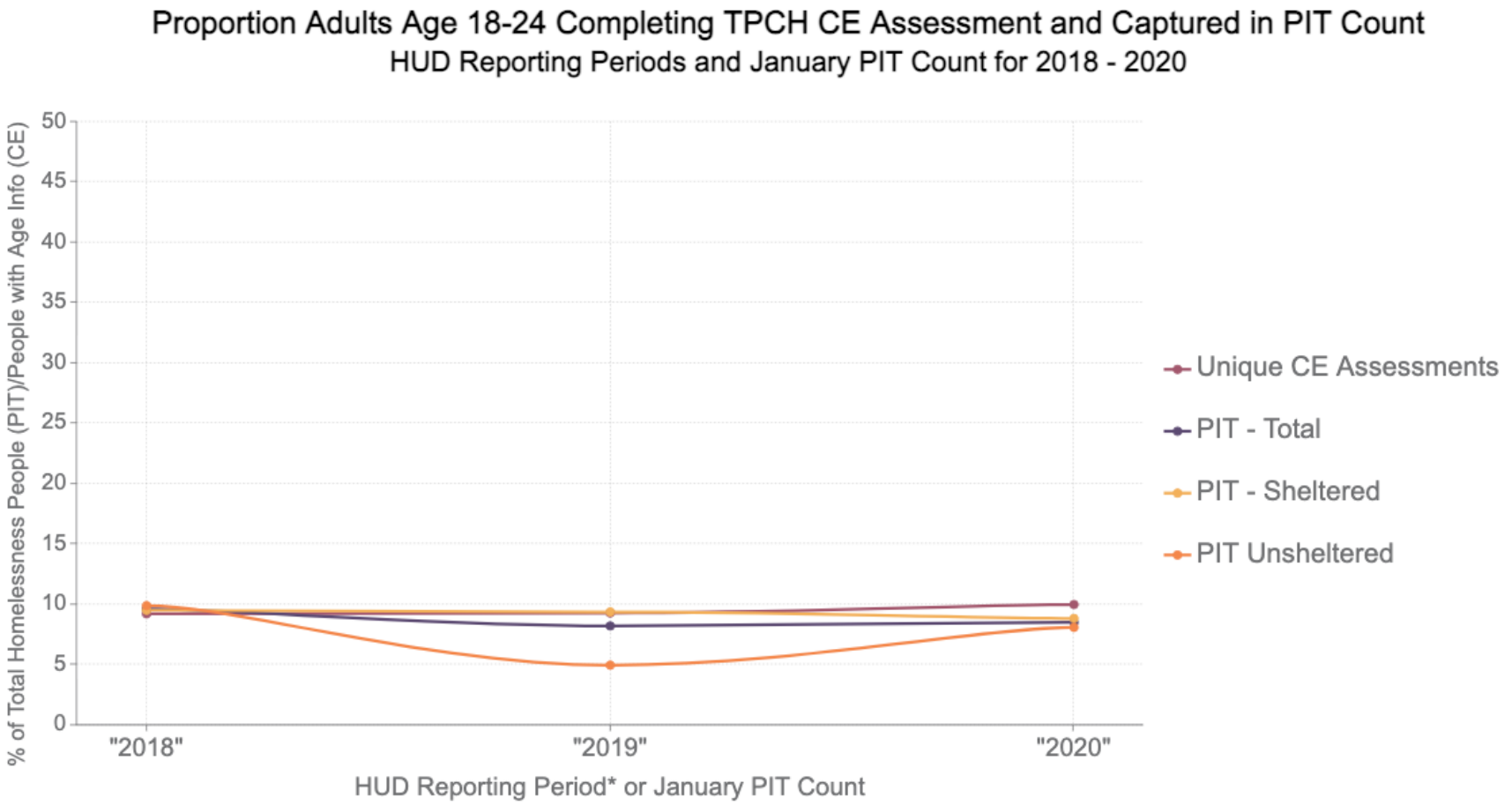
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.14



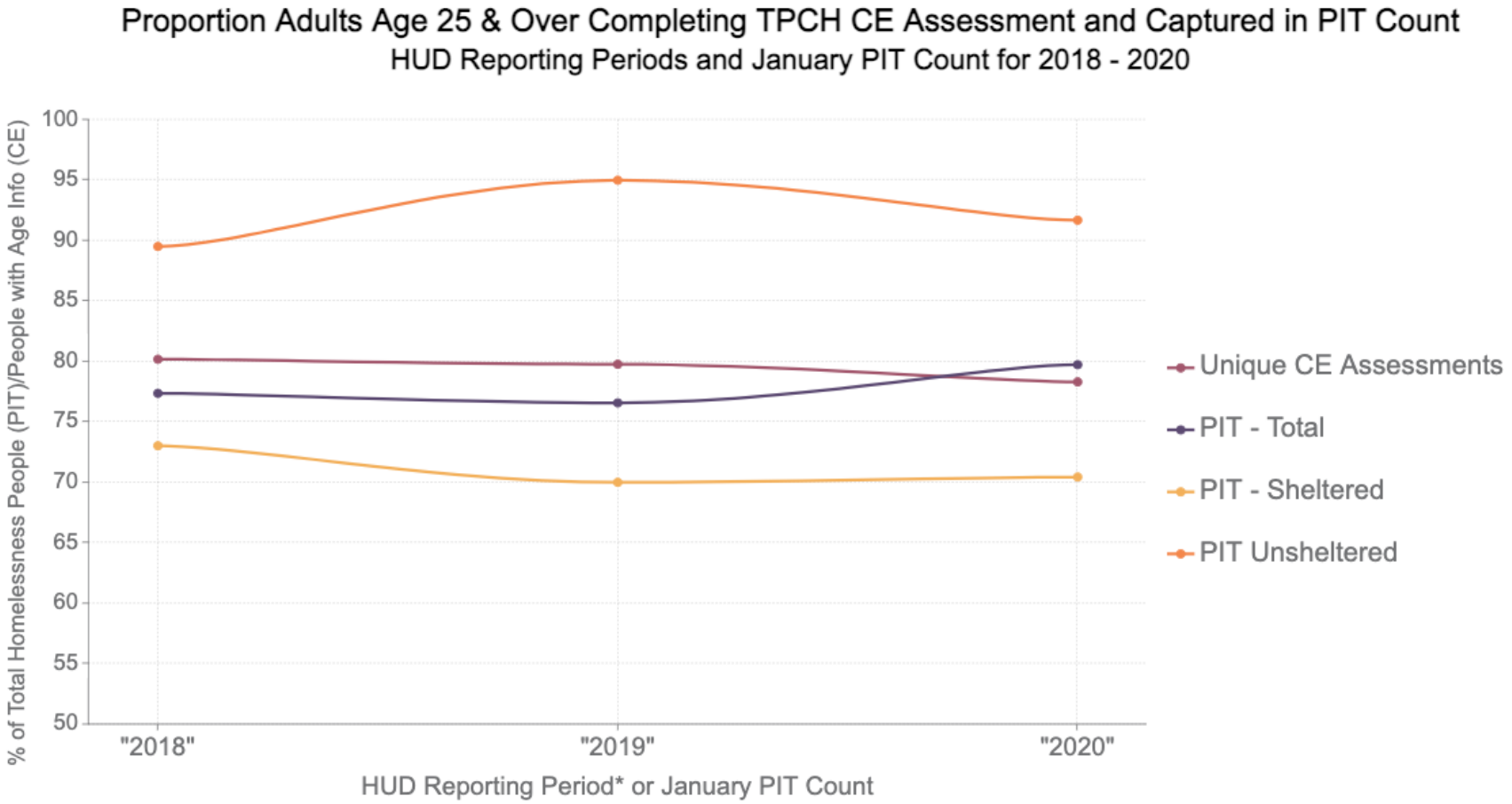
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.15



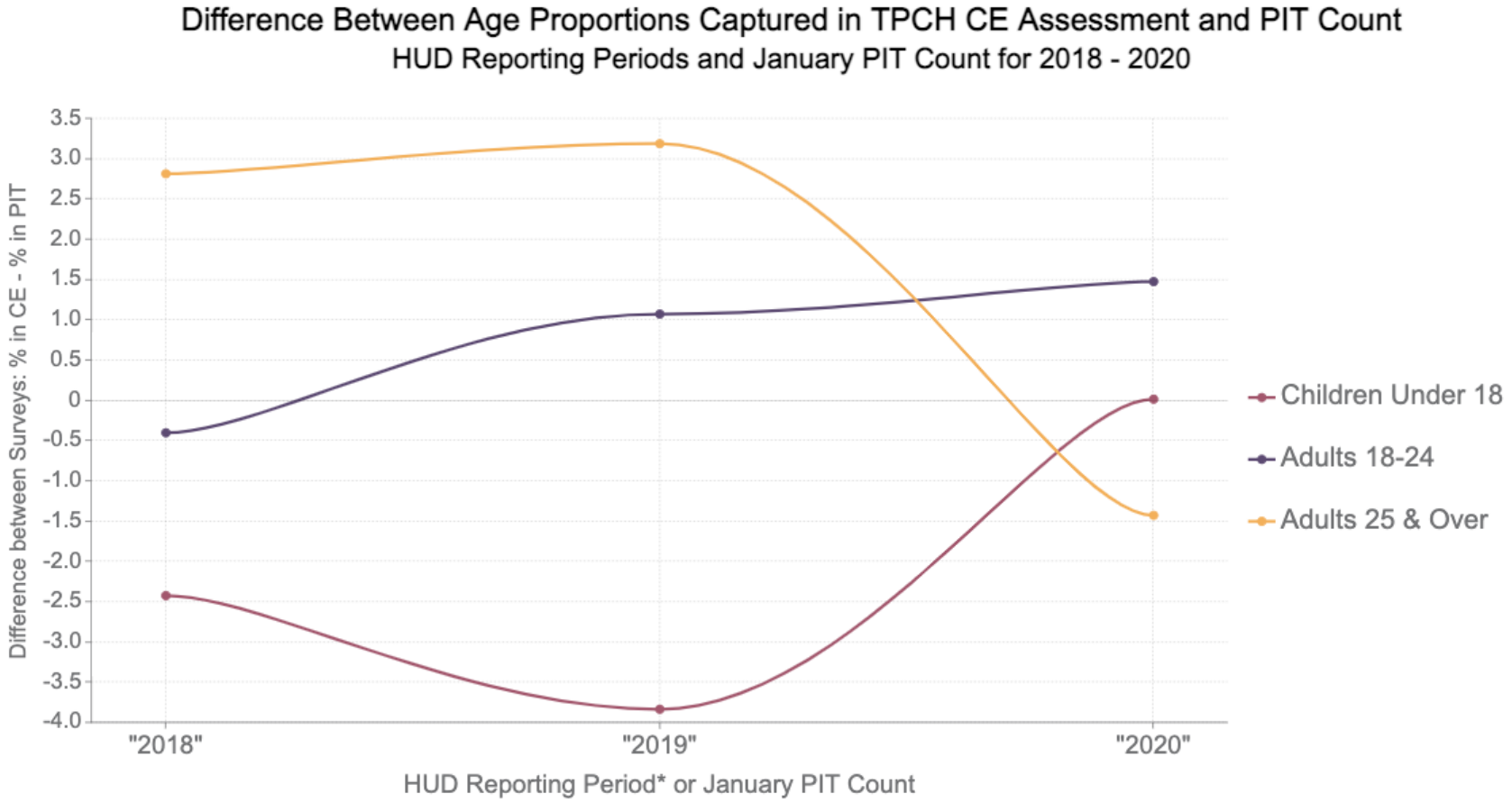
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.16



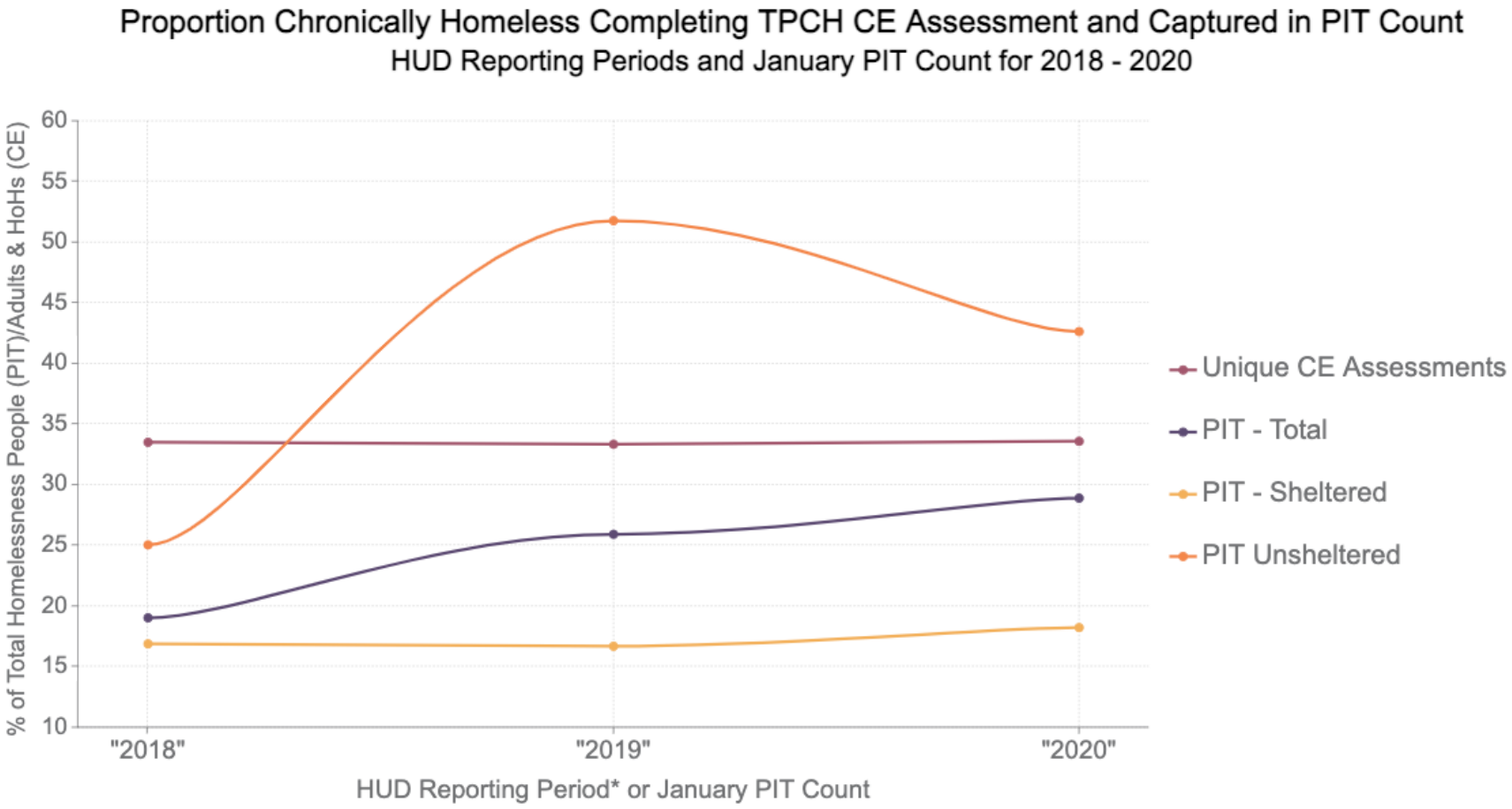
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.17



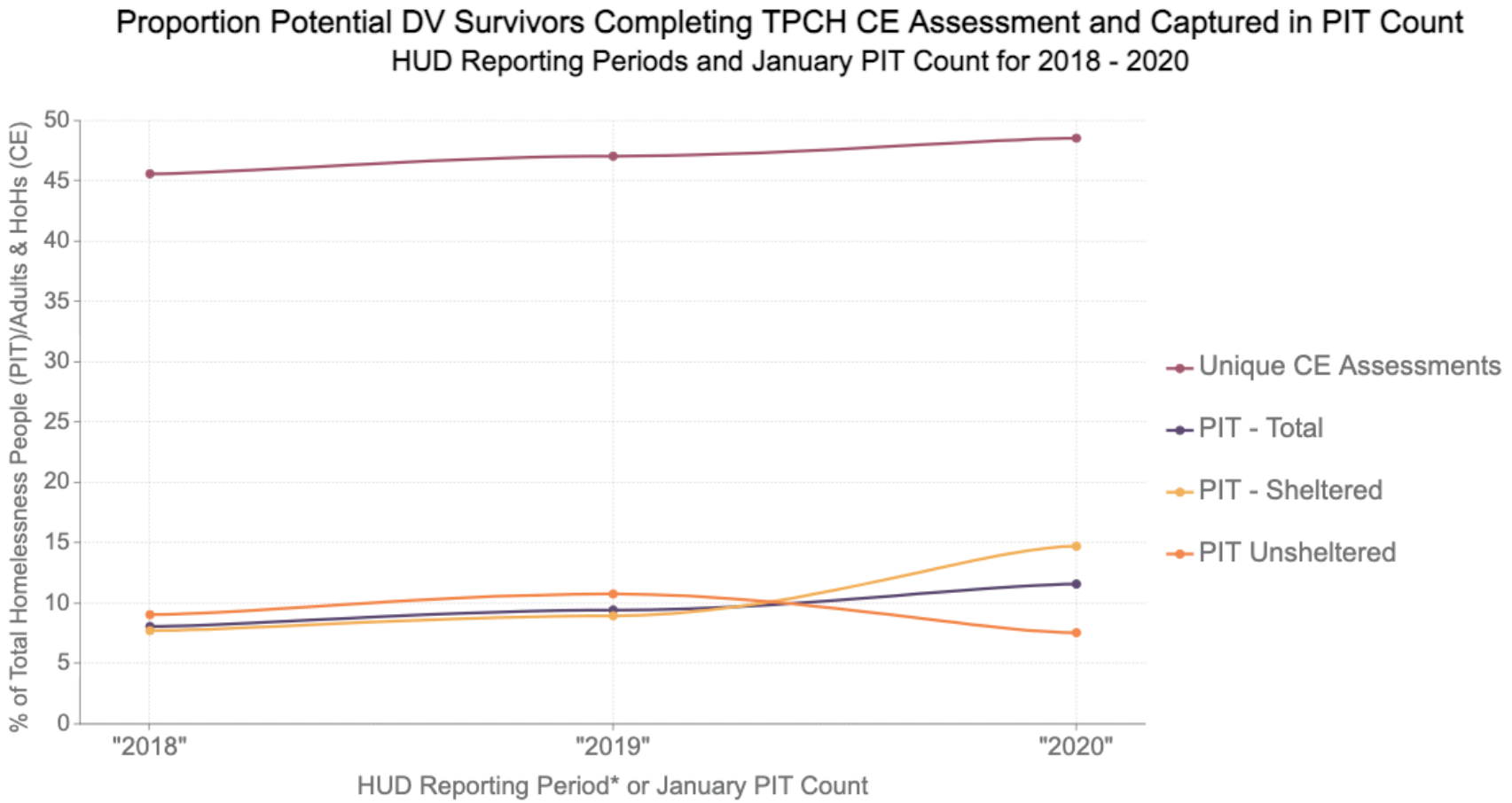
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.18



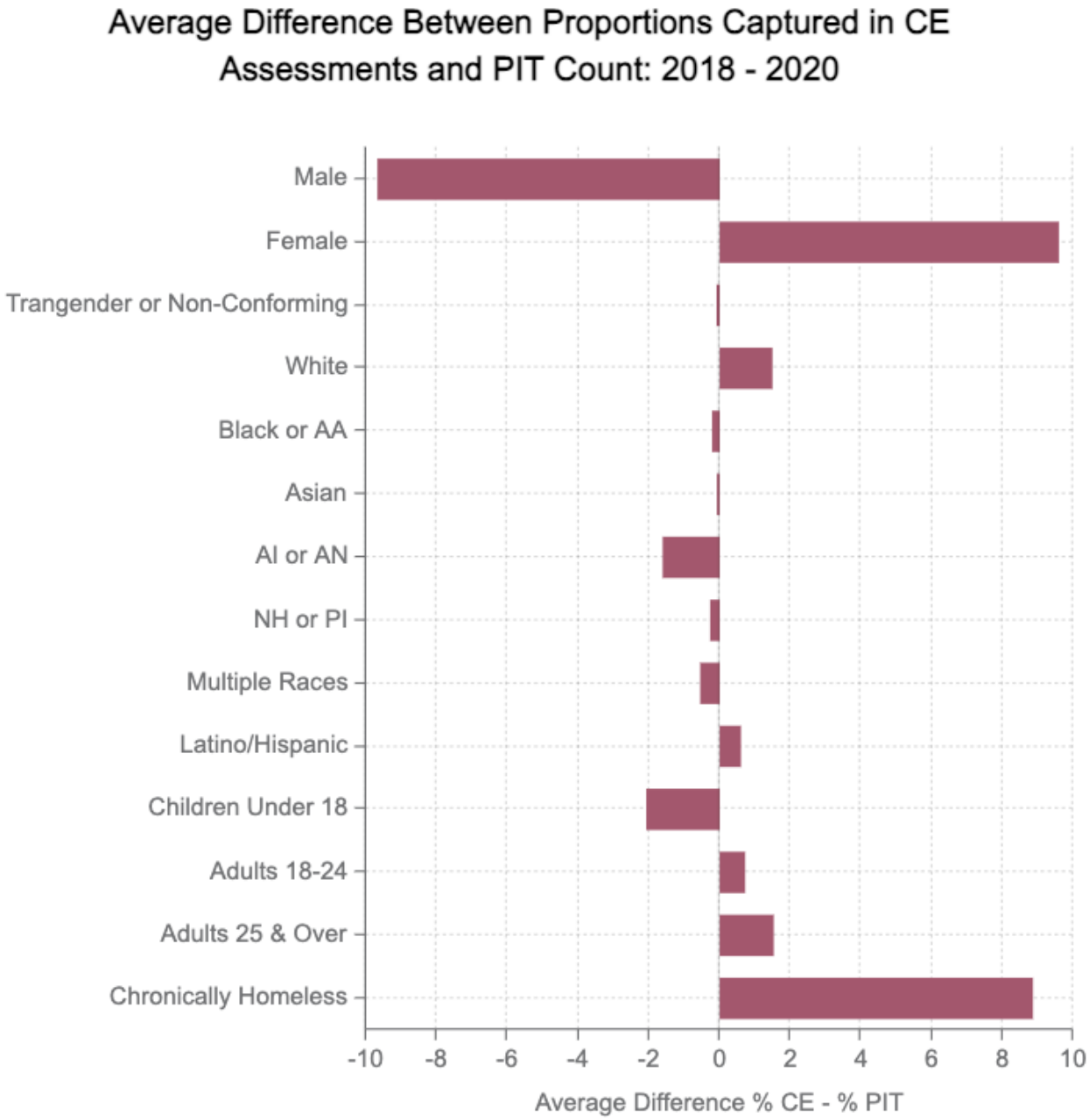
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.19*



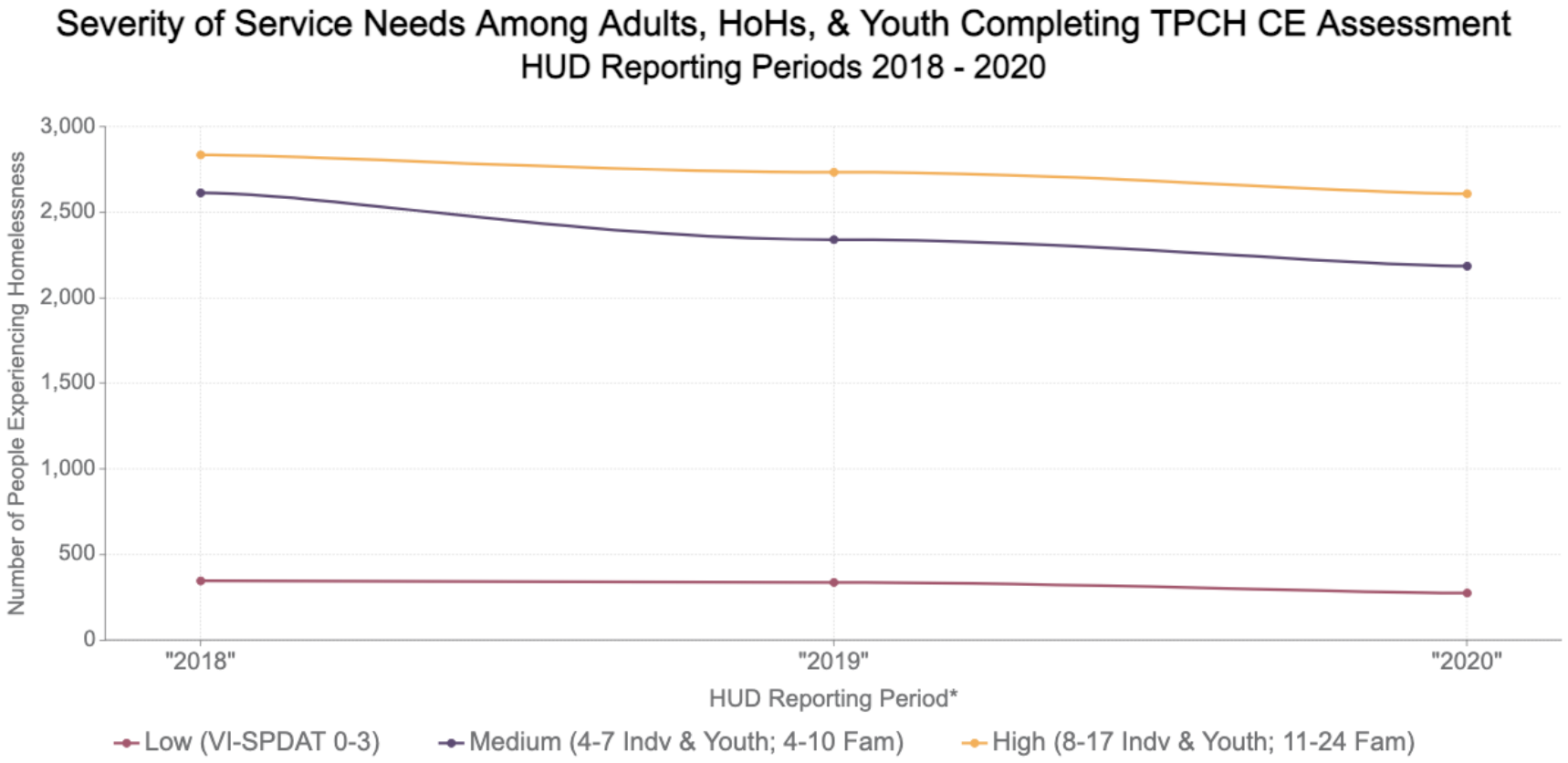
*The number of domestic violence survivors is referred to as “potential” for the CE Assessment figure as questions about abuse, trauma, and relationship breakdown are used to identify potential DV survivors in the CE data. This is compared to DV survivors identified in PIT surveys.

Figure B.20



Positive values indicate that proportions captured in CE are larger than those in the PIT Count.

Figure B.21



*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure B.22

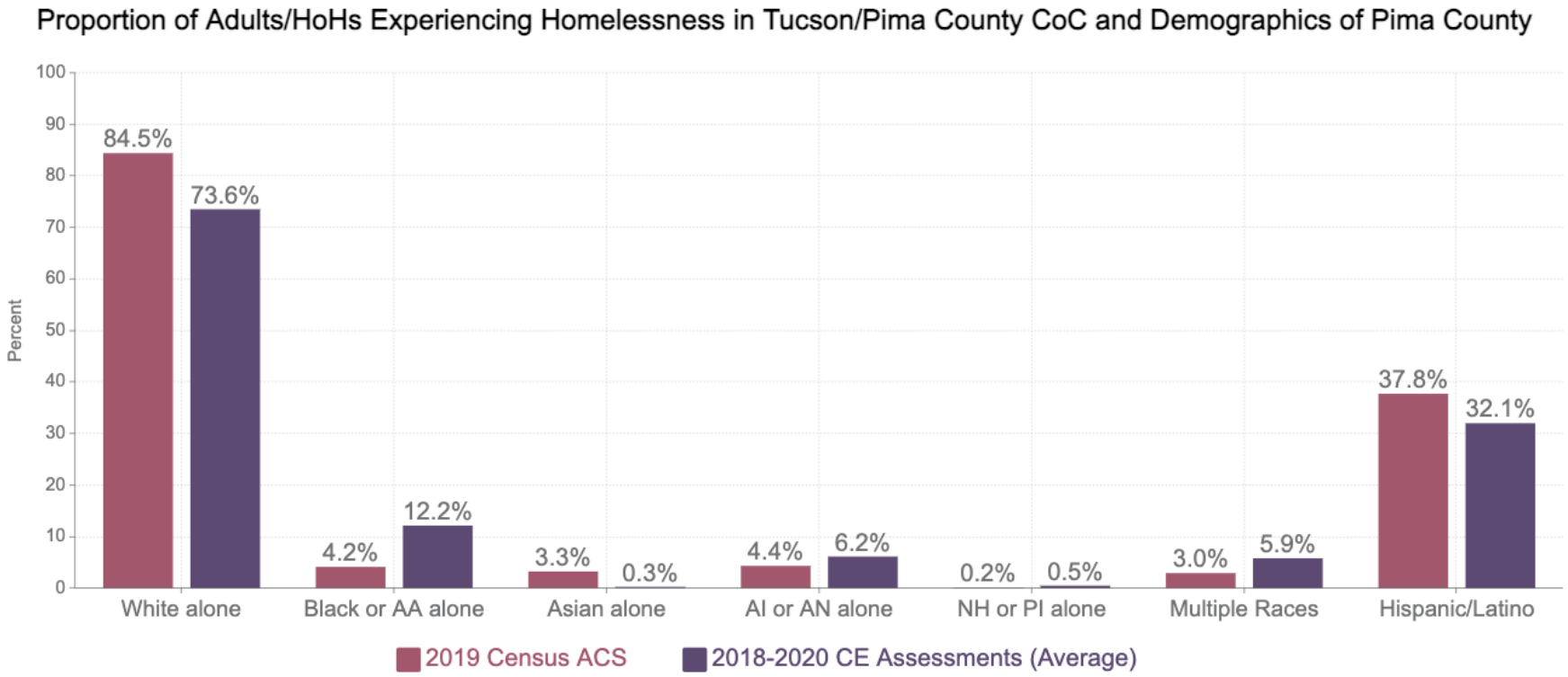
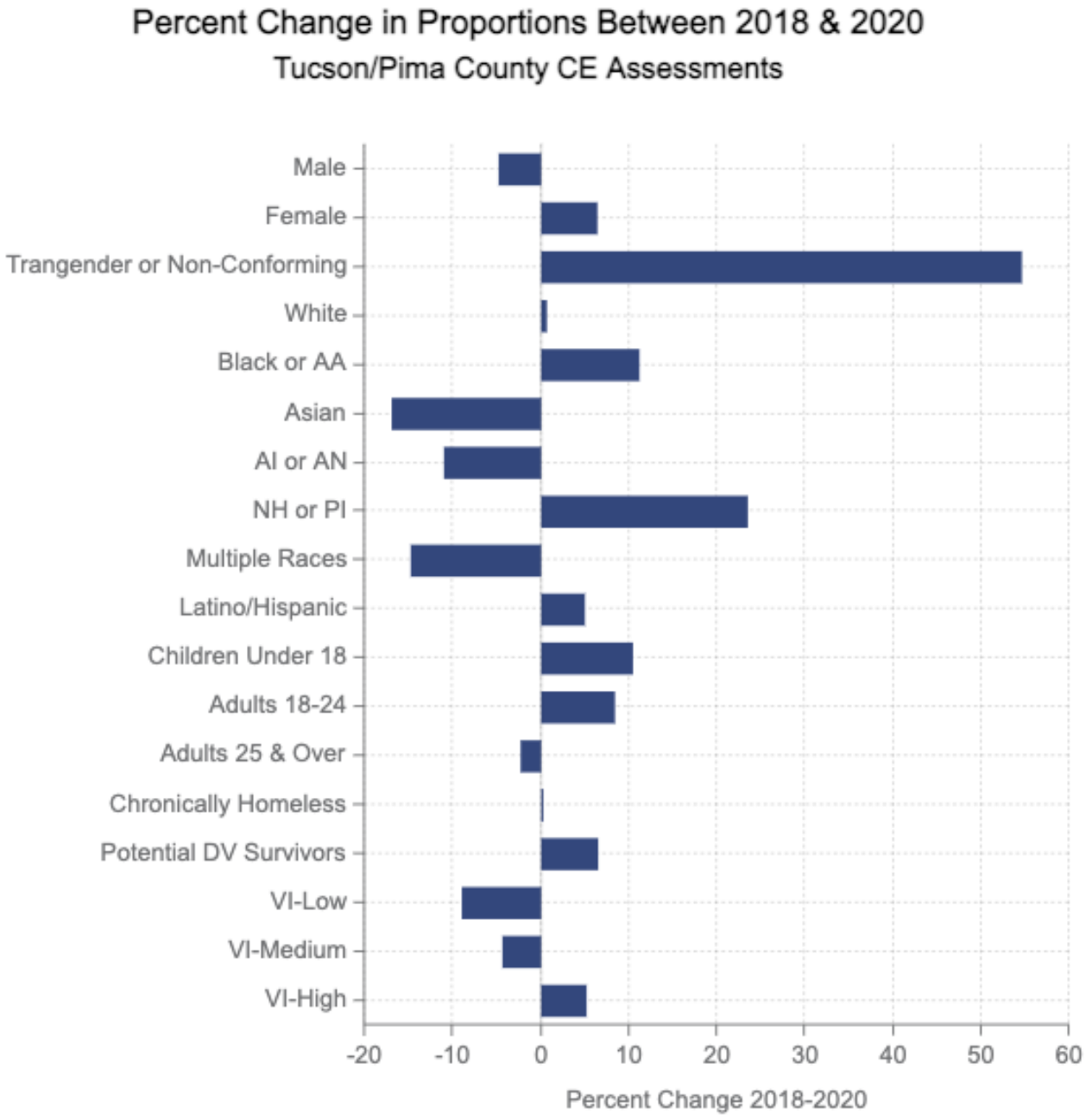

Proportion of Adults/HoHs Experiencing Homelessness in Tucson/Pima County CoC and Demographics of Pima County
Percent
100
90
80
70
60
50
40
30
20
10
0
84.5%
73.6%
4.2%
12.2%
3.3%
0.3%
4.4%
6.2%
0.2%
0.5%
3.0%
5.9%
37.8%
32.1%
White alone
Black or AA alone
Asian alone
AI or AN alone
NH or PI alone
Multiple Races
Hispanic/Latino
2019 Census ACS
2018-2020 CE Assessments (Average)

Figure B.23


Percent Change in Proportions Between 2018 & 2020
Tucson/Pima County CE Assessments
Male
Female
Trangender or Non-Conforming
White
Black or AA
Asian
AI or AN
NH or PI
Multiple Races
Latino/Hispanic
Children Under 18
Adults 18-24
Adults 25 & Over
Chronically Homeless
Potential DV Survivors
VI-Low
VI-Medium
VI-High
-20
-10
0
10
20
30
40
50
60
Percent Change 2018-2020

C. COMPARISON OF CE ASSESSMENTS TO NUMBER SERVED IN VARIOUS PROJECT TYPES

Of central interest to service providers who serve people experiencing homelessness is the extent to which aggregate need for services and supports are being met by various programs. In the following a rough attempt to assess this is provided through a comparison of the annual number of individuals completing the CE assessment and the number of people served in various project types for the HUD reporting periods of 2018, 2019, and 2020. In addition, the same comparison is provided for targeted subgroups to identify any disparities in service provision across subgroups.

Seeking vs. Served: Overall in the Tucson/Pima County CoC, 2018-2020

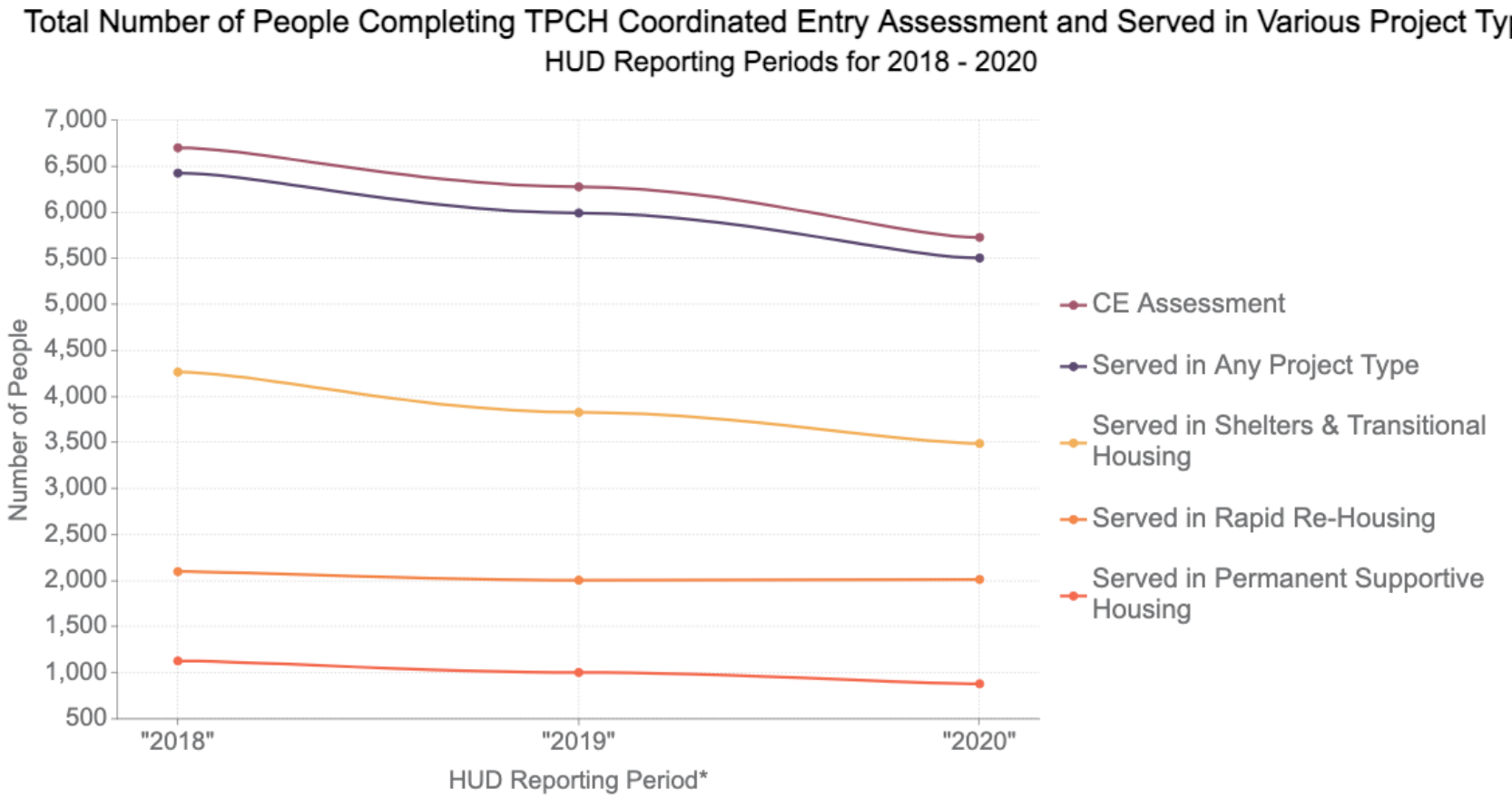
Figure C.1 below provides the total number of people (individuals, family members, and youth) who completed a CE assessment during each HUD reporting period (2018-2020) in the Tucson/Pima County CoC and the number of total people served in various project types. Since it is difficult to discern whether the proportion served is changing relative to the total completing assessments in this visualization, **Figure C.2** expresses the number served in various project types as a percent of total CE assessments. The proportion served in any project type has remained stable, while the proportion served in shelters and transitional housing has decline slightly from 64% in the 2018 reporting year to 61% in the 2020 reporting year. The proportion of all people completing CE assessments who were served in rapid re-housing increased from 31% to 35% over the same period, while the proportion served in permanent supportive housing fell from 17% to 15%.

Seeking vs. Served: Subpopulations in the Tucson/Pima County CoC, 2018-2020

Subgroups: Gender

An examination of **Figures C.3**, **C.4**, & **C.6** immediately capture substantial differences in the services engaged in by cisgender men and women experiencing homelessness. First, **Figure C.6** indicates that relative to the number CE assessments the number of men served in any project type averages around 100% compared to roughly 80% for women. What accounts for this large difference in engagement with services? These data do not address this question, but further qualitative and quantitative research may focus on this disparity. Assuming that this difference is not an artifact of differential treatment by service providers, it may be the case that women are more able on average to resolve a period of homelessness without engaging in services. It also may be the case that some women are less interested in shelter housing due to safety concerns and this may decrease their engagement with services overall if this is the only type of housing support available. Women are substantially less likely to be served in shelters and transitional housing relative to men, but are slightly more likely to be served in rapid re-housing or permanent supportive housing projects. The proportions of transgender or gender non-conforming individuals served in shelters or transitional housing or any project type have increased dramatically between 2019 and 2020. Setting this important improvement aside, transgender or gender non-conforming individuals experiencing homelessness are less likely than cisgender men or women to be served in

Figure C.1



*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure C.2

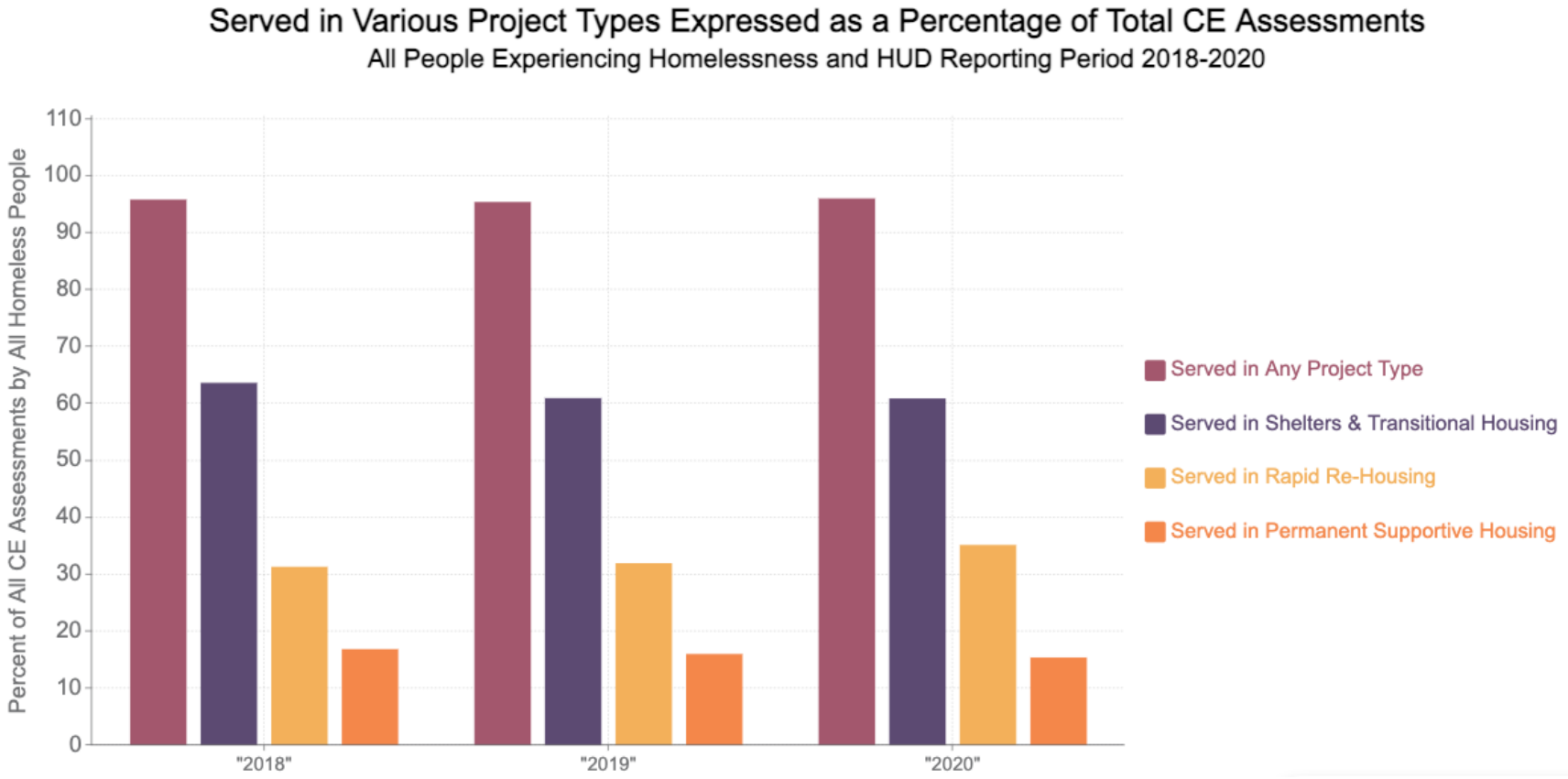
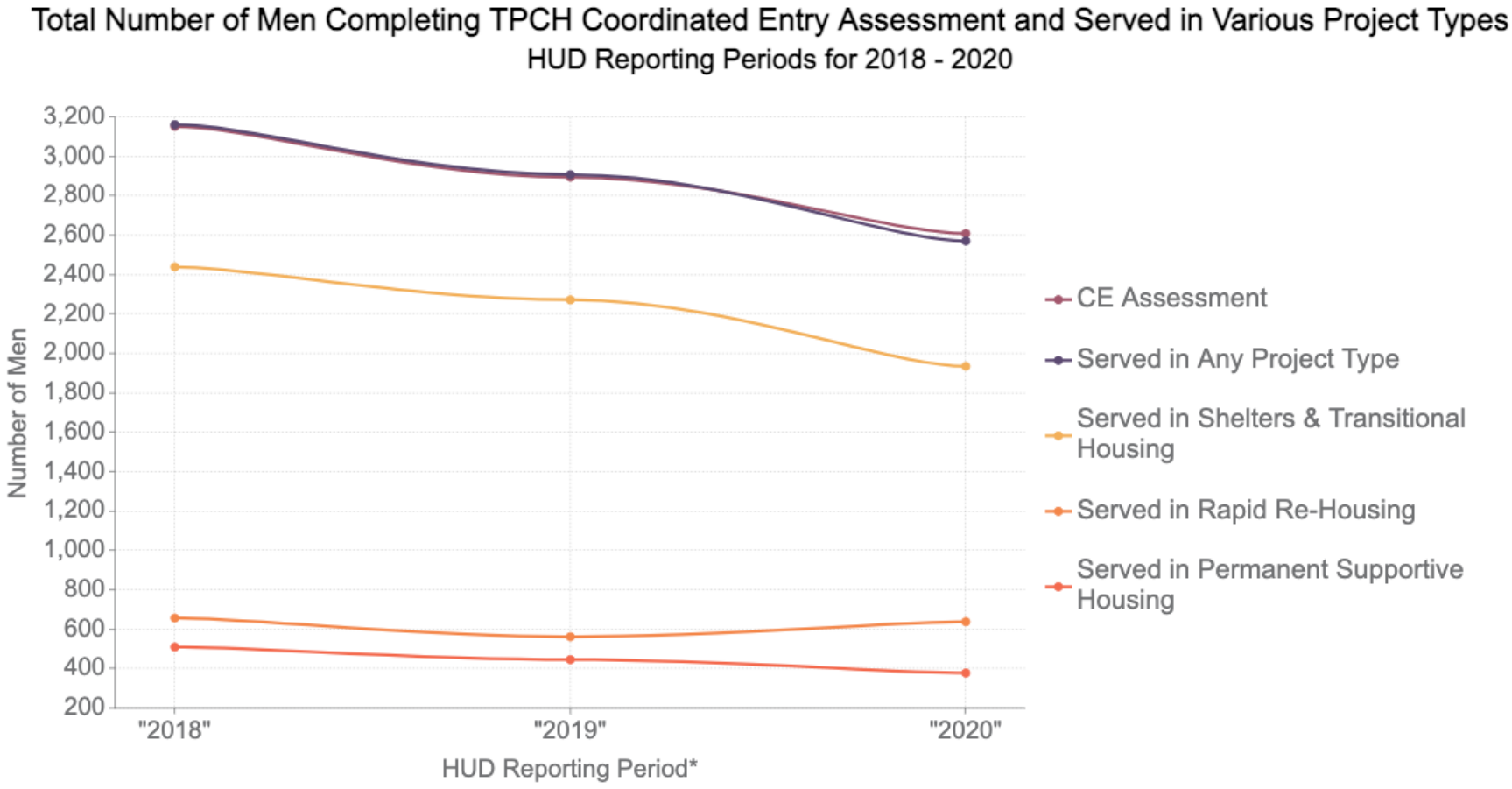
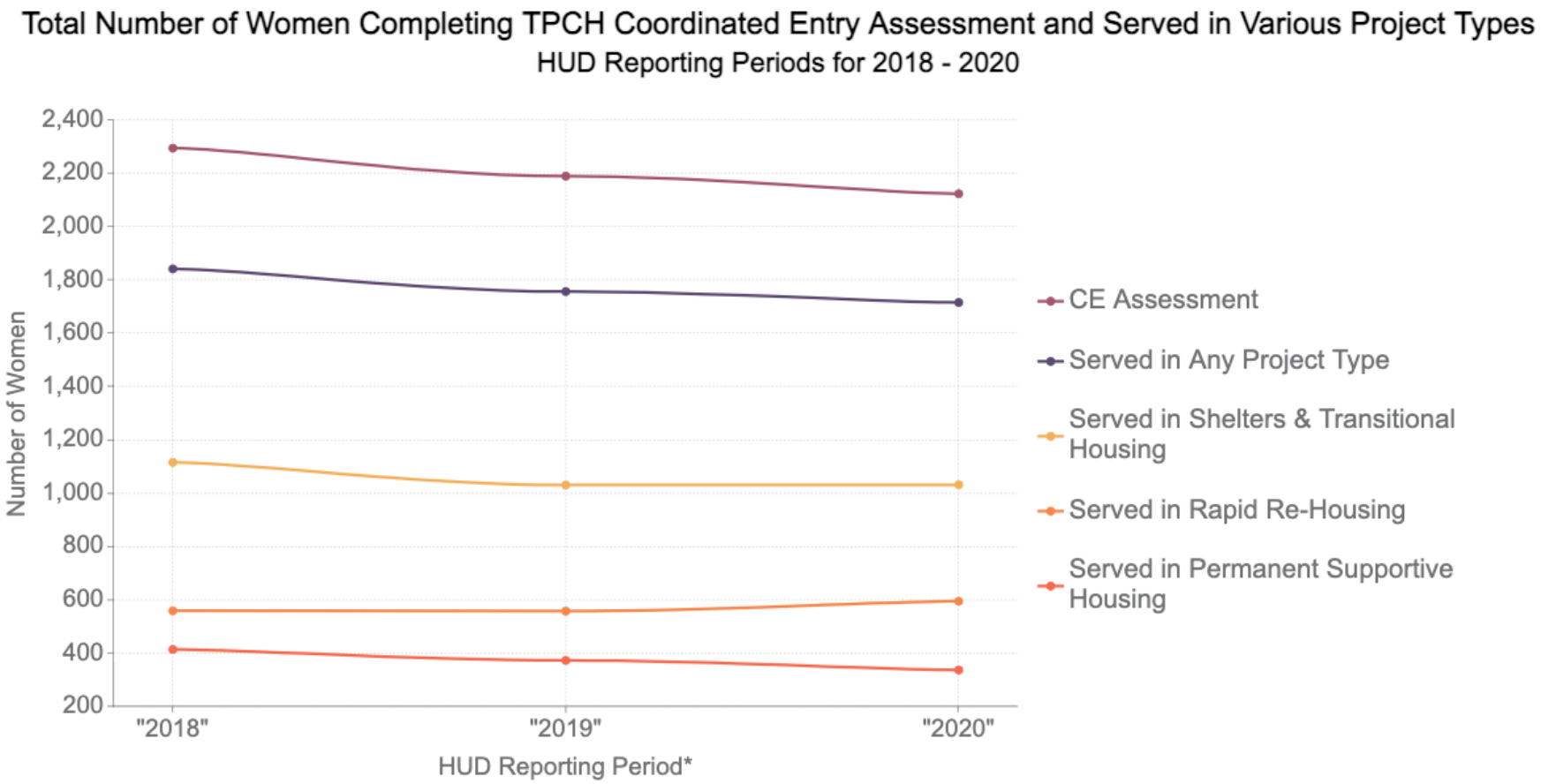

Served in Various Project Types Expressed as a Percentage of Total CE Assessments
All People Experiencing Homelessness and HUD Reporting Period 2018-2020
Percent of All CE Assessments by All Homeless People
110
100
90
80
70
60
50
40
30
20
10
0
"2018"
"2019"
"2020"
Served in Any Project Type
Served in Shelters & Transitional Housing
Served in Rapid Re-Housing
Served in Permanent Supportive Housing

Figure C.3



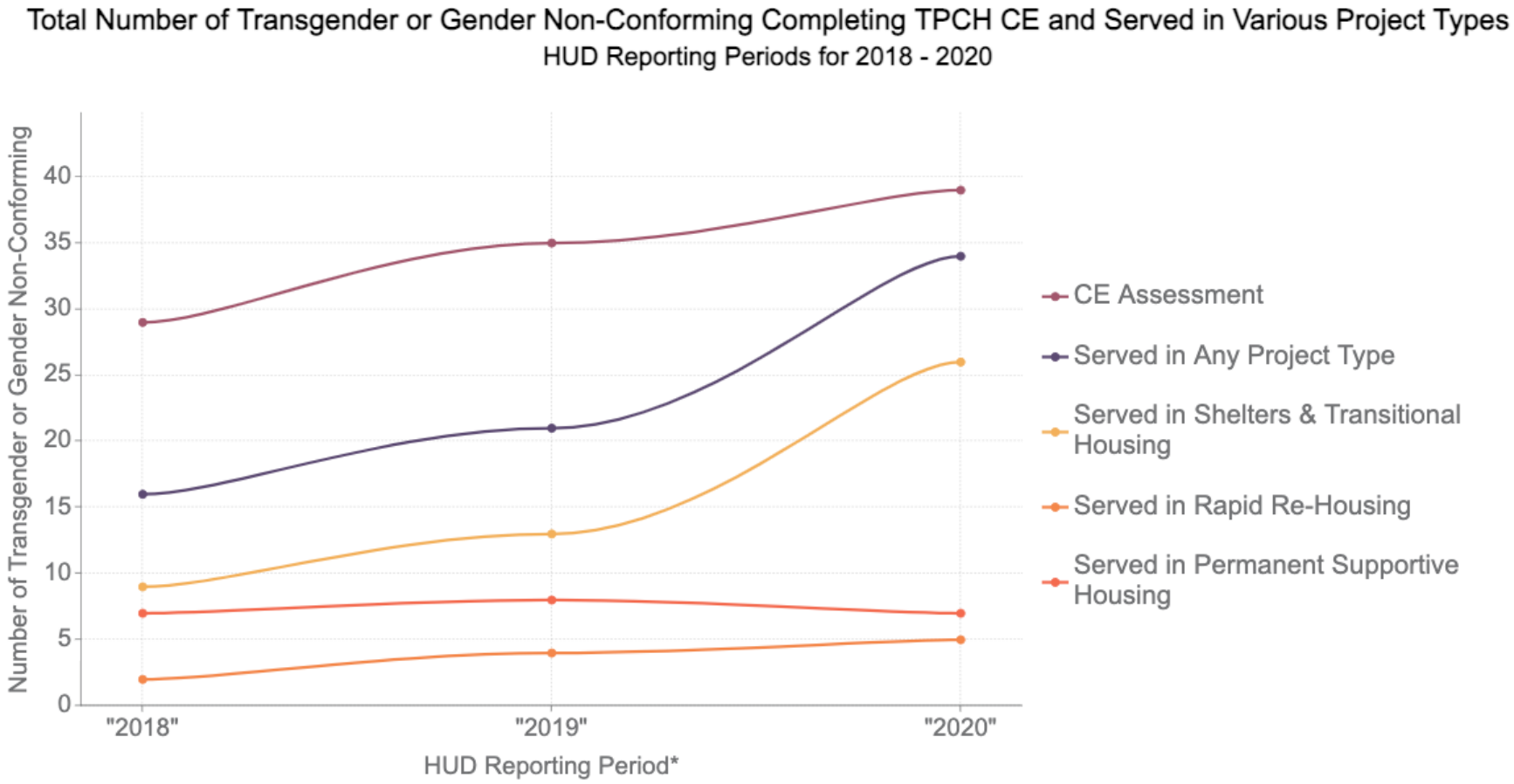
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure C.4



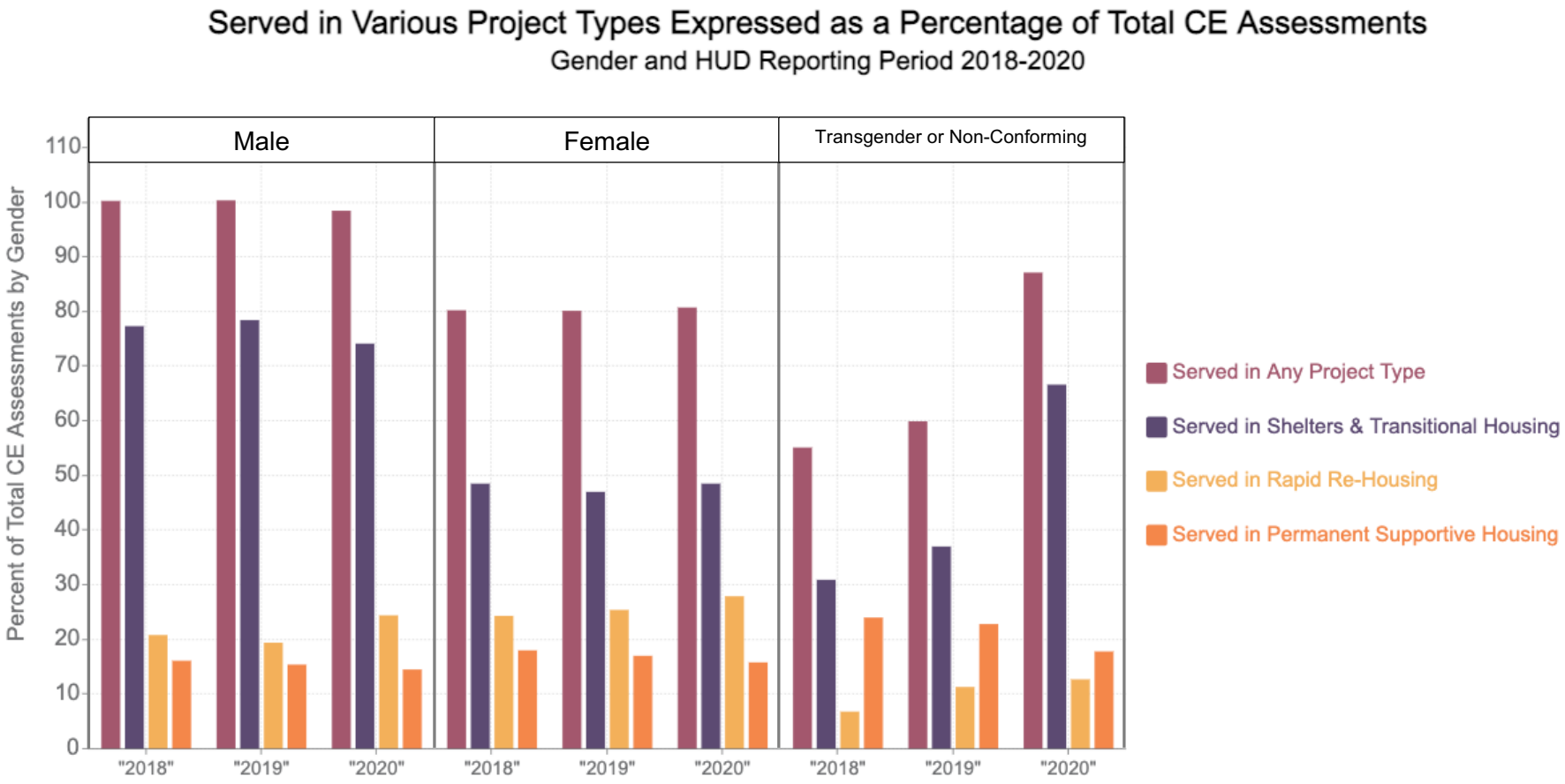
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure C.5



*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

Figure C.6


Served in Various Project Types Expressed as a Percentage of Total CE Assessments
Gender and HUD Reporting Period 2018-2020
Male
Female
Transgender or Non-Conforming
Percent of Total CE Assessments by Gender
110
100
90
80
70
60
50
40
30
20
10
0
"2018"
"2019"
"2020"
Served in Any Project Type
Served in Shelters & Transitional Housing
Served in Rapid Re-Housing
Served in Permanent Supportive Housing

any project type, shelters or transitional housing, or rapid re-housing. However, despite this, transgender or gender non-conforming individuals are more likely on average to be served in permanent supportive housing projects relative to cisgender men or women.

Subgroups: Race/Ethnicity

Figures C.7, **C.8**, **C.9**, **C.10**, **C.11**, **C.12**, **C.13**, **C.14** and **C.15** provide the proportions of individuals completing CE assessments served in various project types by race and ethnicity. **Figure C.14** indicates that for White individuals experiencing homelessness (regardless of ethnicity) degrees of engagement with various project types has been relatively stable over these three reporting years. One exception to this pattern is that the proportion of White individuals who identify as Hispanic or Latino served in permanent supportive housing projects appears to have fallen substantially between 2018 and 2020. Focusing on the proportions served in any project types, relative to White individuals experiencing homelessness, individuals who identify as Black or African American, Asian, or multiracial have been more likely on average to be served in any project type. Only individuals identifying as American Indian or Alaskan Native are less likely than White individuals to be served in any project type, and this gap is both modest and has been getting smaller in recent years. The proportions served in shelters or transitional housing are very similar across most racial/ethnic groups with the exception of Asian and Black or African American individual's experiences. The small number of Asian individuals experiencing homelessness are exceptionally likely to be served in shelters or transitional housing. Relative to White individuals, Black or African American individuals completing a CE assessment are more likely to be served in shelters or transitional housing projects. Relative to non-Hispanic/non-Latino Whites, Hispanic or Latino Whites, Black or African American individuals, and people with multiracial backgrounds have been more likely to be served by rapid re-housing projects in recent years. Finally nearly all racial/ethnic groups have seen a decline in the proportion of individuals served by permanent supportive housing projects. However the size of these declines varies substantially across groups with the smallest declines experiences by non-Hispanic/non-Latino Whites and multiracial individuals.

Subgroups: Age

The CE assessments do not collect individual level information on children in families, such as their age. We know whether there are children under 11 or under 6 in a household, but not how many at which age. Consequently, the comparisons provided in **Figures C.16**, **C.17**, **C.18**, **C.19**, and **C.20** are limited to individuals age 18 and older. Broadly speaking, young adults, age 18-24, and adults aged 15-54 appear to engage in services at very similar rates, with the exception that young adults are more likely to be served in rapid re-housing programs. Compared to these adults who are under 55, older adults (55 and older) are much more likely to be served by any project type or shelter or transitional housing projects. And during the 2020 reporting year the proportion of adults 65 and older served increased substantially in all different project types.

Subgroups: Potential Domestic Violence Survivors

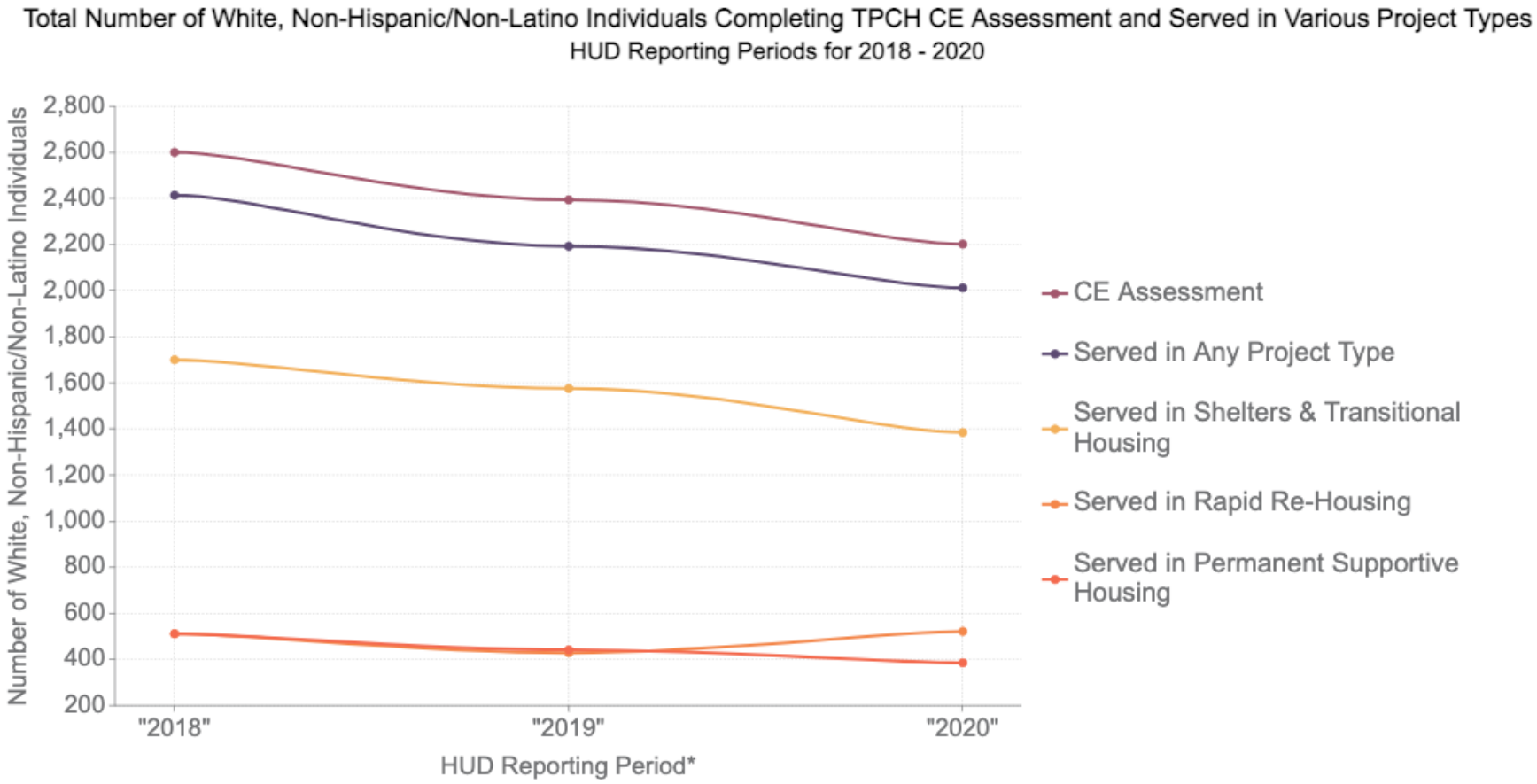
The individuals identified as potential domestic violence survivors are those who answered "yes" to both of the following two questions in the CE assessment: 1) "Is your current

homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?" and 2) "Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?". The number of HoHs who answered "yes" to both of the equivalent questions in the family CE assessment are also included in these counts. These numbers are then compared to the number of adults and HoHs served in projects who are identified as either a "domestic violence survivor and currently fleeing" and those identified as a "domestic violence survivor and not currently fleeing or unknown fleeing status". As mentioned above, these comparisons provided here are imperfect, but should give us a very rough sense of the extent of service engagement for survivors of domestic violence. Relative to **Figure C.2** which presents the proportion of all people completing CE assessments who received services, the proportions of potential domestic violence survivors receiving services appears comparatively low. However, it should be noted that due to the broader definition of potential domestic violence survivors used in the CE assessments the denominator (the number of potential DV survivors completing CE assessments) is inflated to an unknown degree. Consequently, we are limited in the conclusions we can draw from **Figure C.22** besides noting that the proportions of potential domestic violence survivors served in various project types has been stable over time. The one exception to this generalization is that there was a modest increase in the proportion served in rapid re-housing projects in reporting year 2020.

Subgroups: People Experiencing Chronic Homelessness

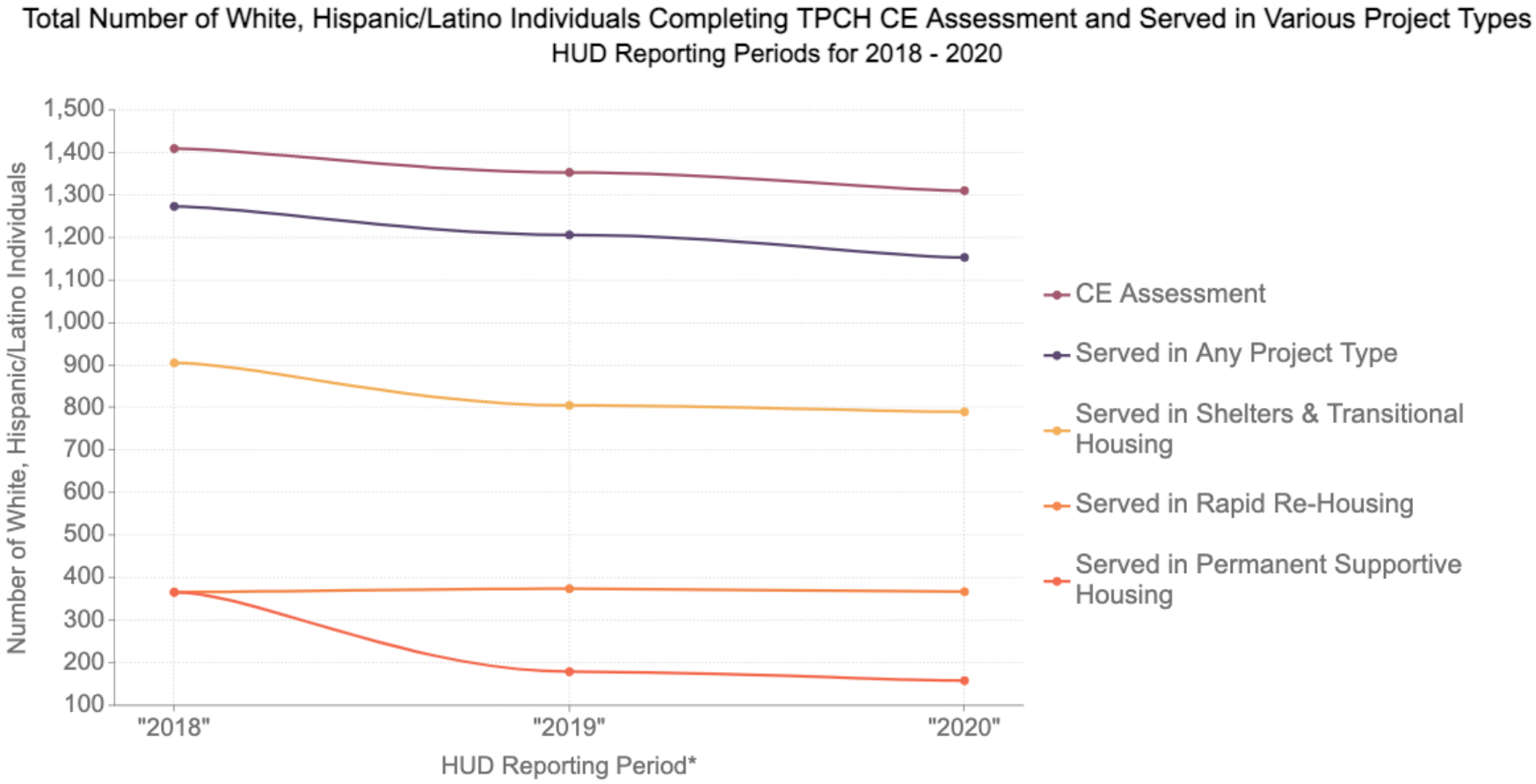
Last, **Figures C.23** and **C.24** present the degree of service engagement by people experiencing chronic homelessness. Relative to the reporting period for 2018, the proportions of people experiencing chronic homelessness served in any project types and in permanent supportive housing projects have declined. The decline in participation in permanent supportive housing projects has been the most dramatic with 16% of chronically homeless individuals served by such projects in 2018 as compared to 5% in the 2020 reporting period. The proportion served in rapid re-housing did increase over this same period, but only increased from 15% to 17%. This rather dramatic reduction in participation in permanent supportive housing projects among people experiencing chronic homelessness seems like a good subject for further inquiry.

FIGURE C.7



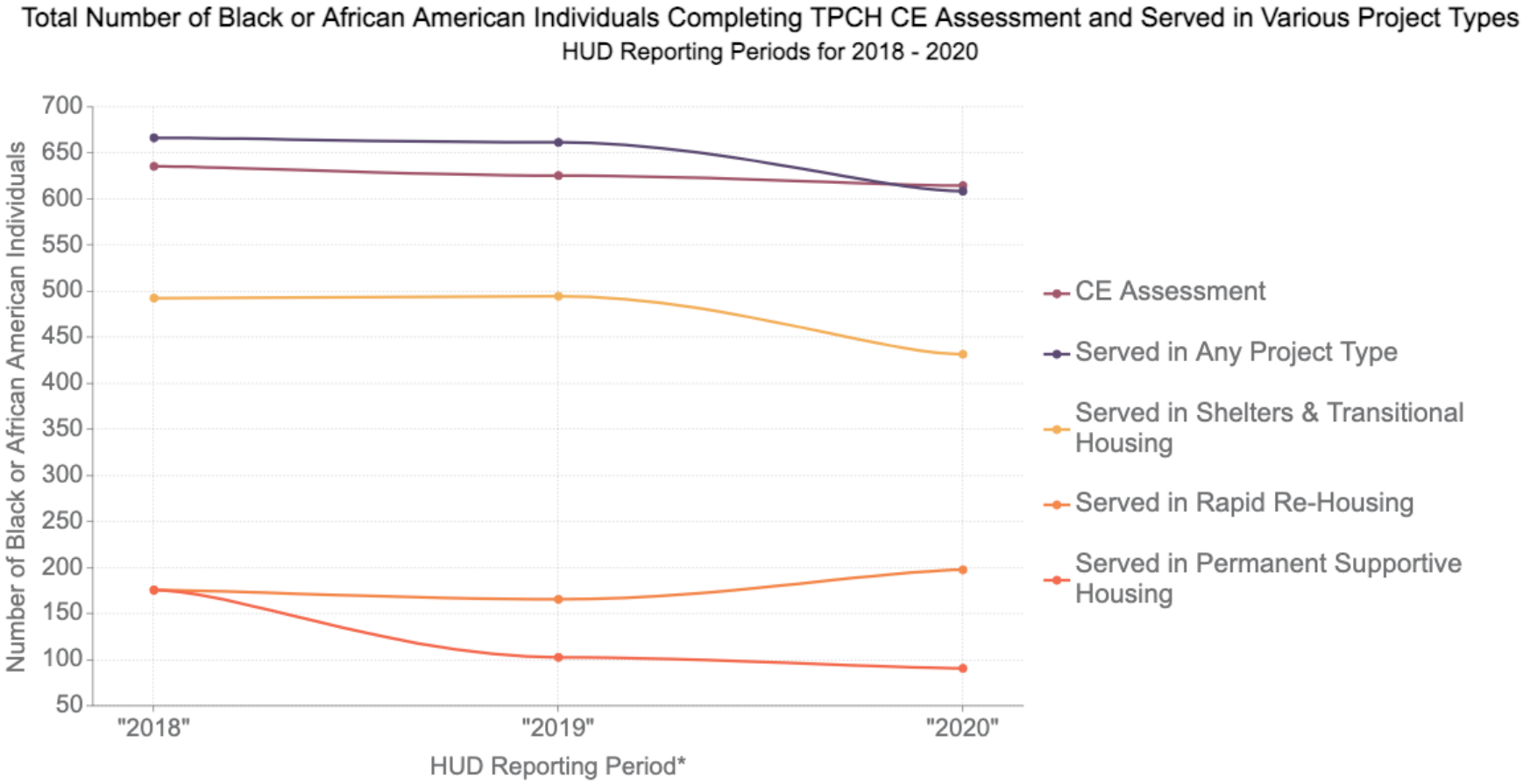
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.8



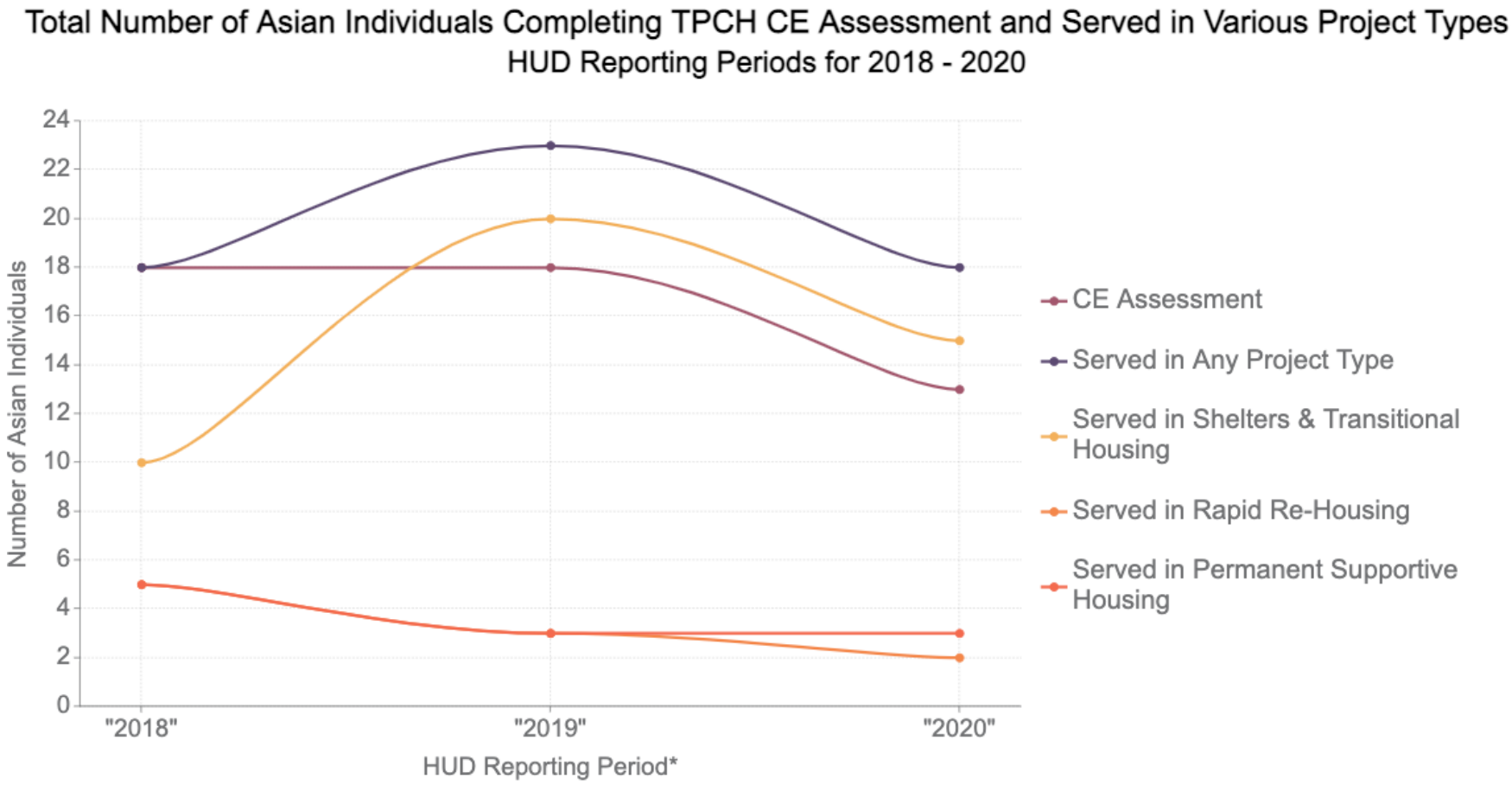
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.9



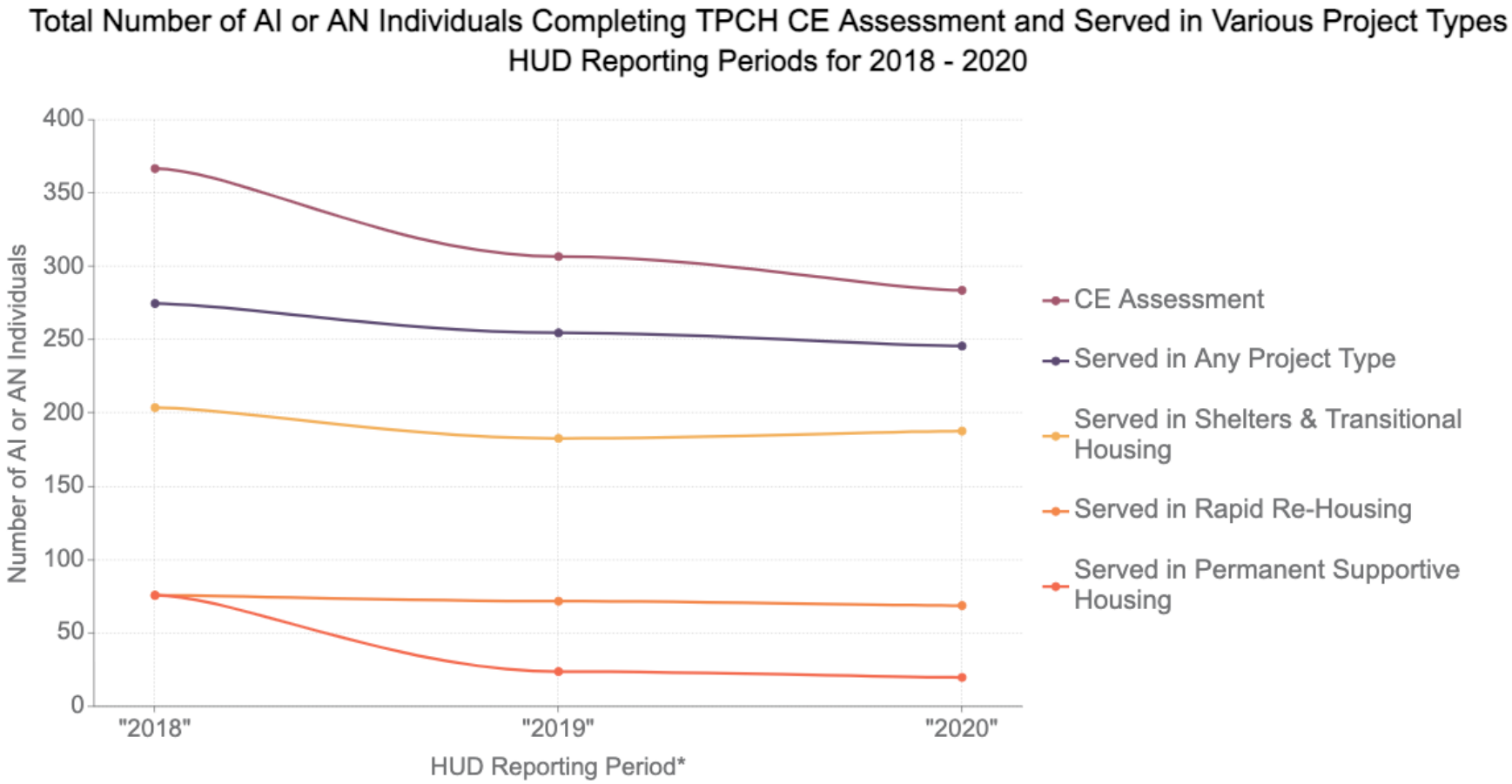
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.10



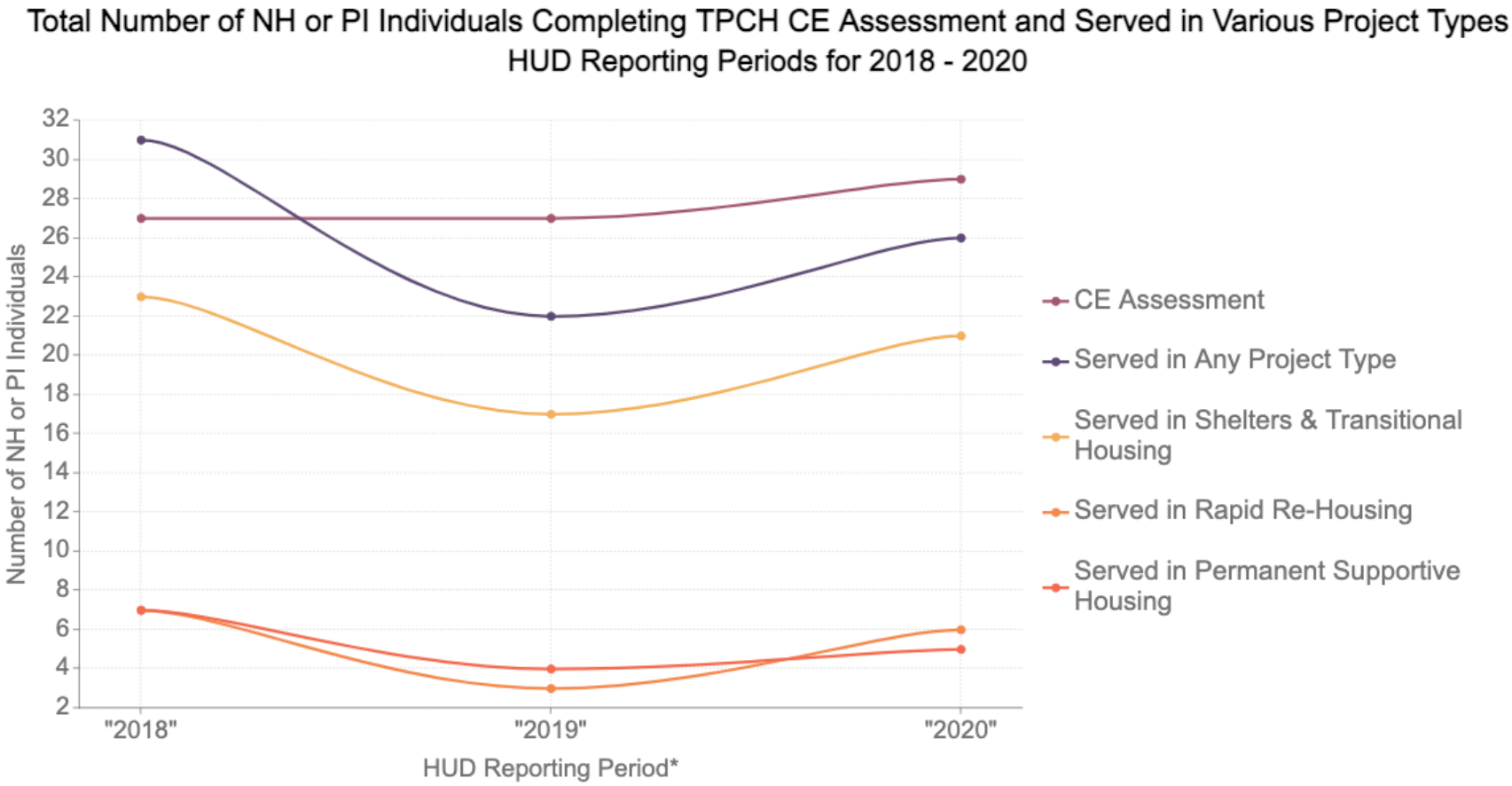
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.11



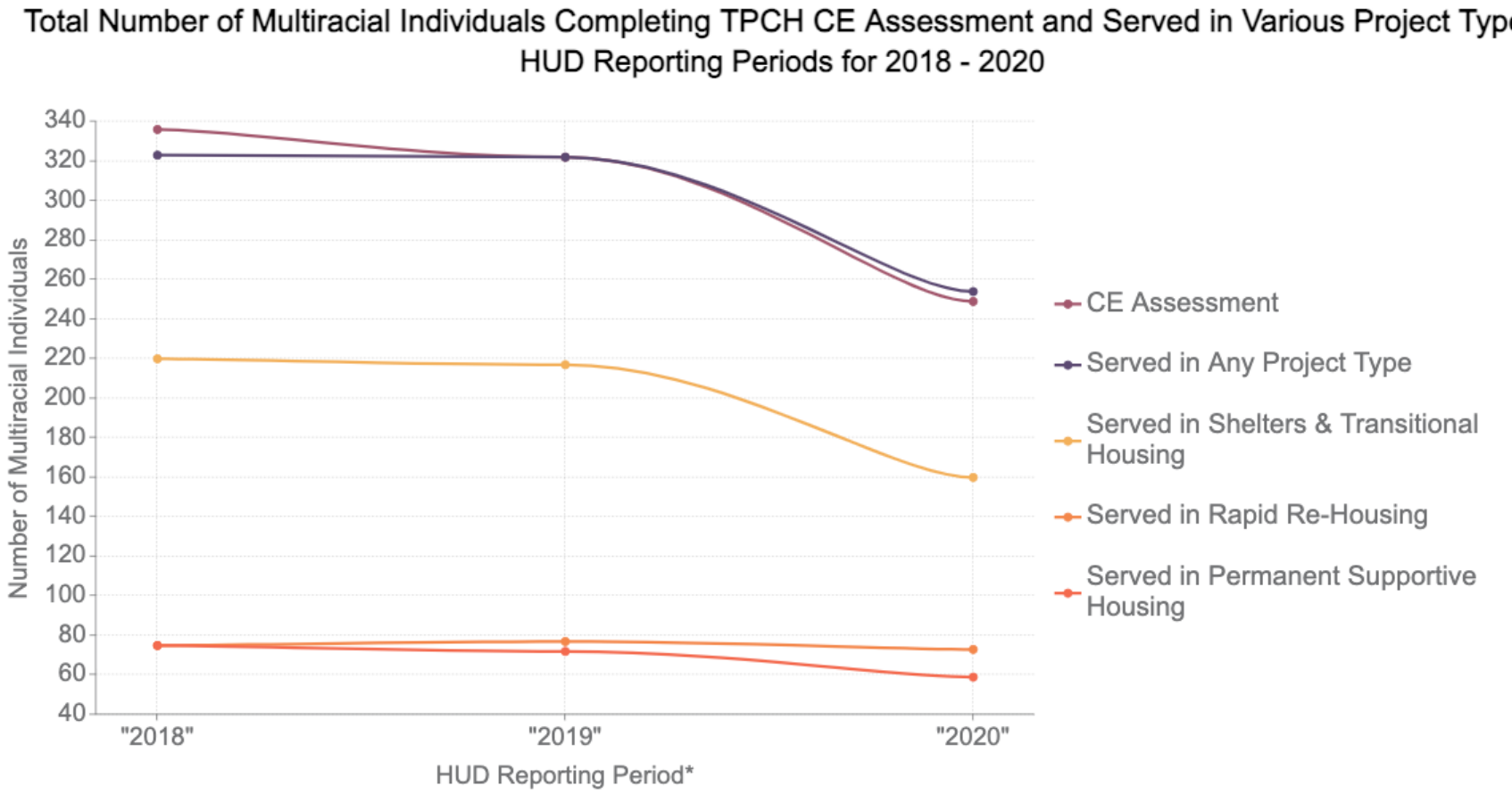
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.12



*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.13



*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.14

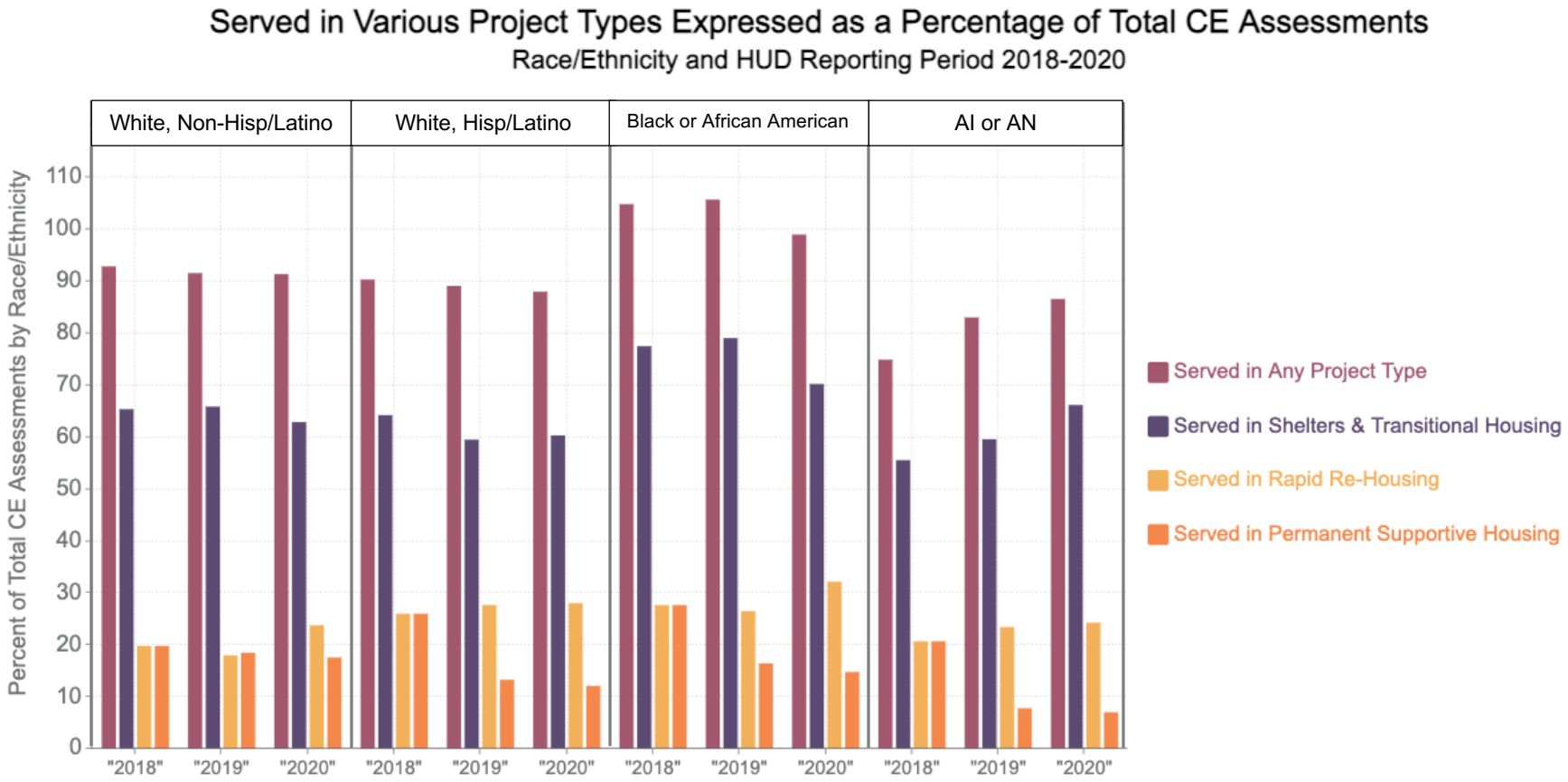

Served in Various Project Types Expressed as a Percentage of Total CE Assessments
Race/Ethnicity and HUD Reporting Period 2018-2020
White, Non-Hisp/Latino
White, Hisp/Latino
Black or African American
AI or AN
Percent of Total CE Assessments by Race/Ethnicity
0
10
20
30
40
50
60
70
80
90
100
110
"2018"
"2019"
"2020"
Served in Any Project Type
Served in Shelters & Transitional Housing
Served in Rapid Re-Housing
Served in Permanent Supportive Housing

FIGURE C.15

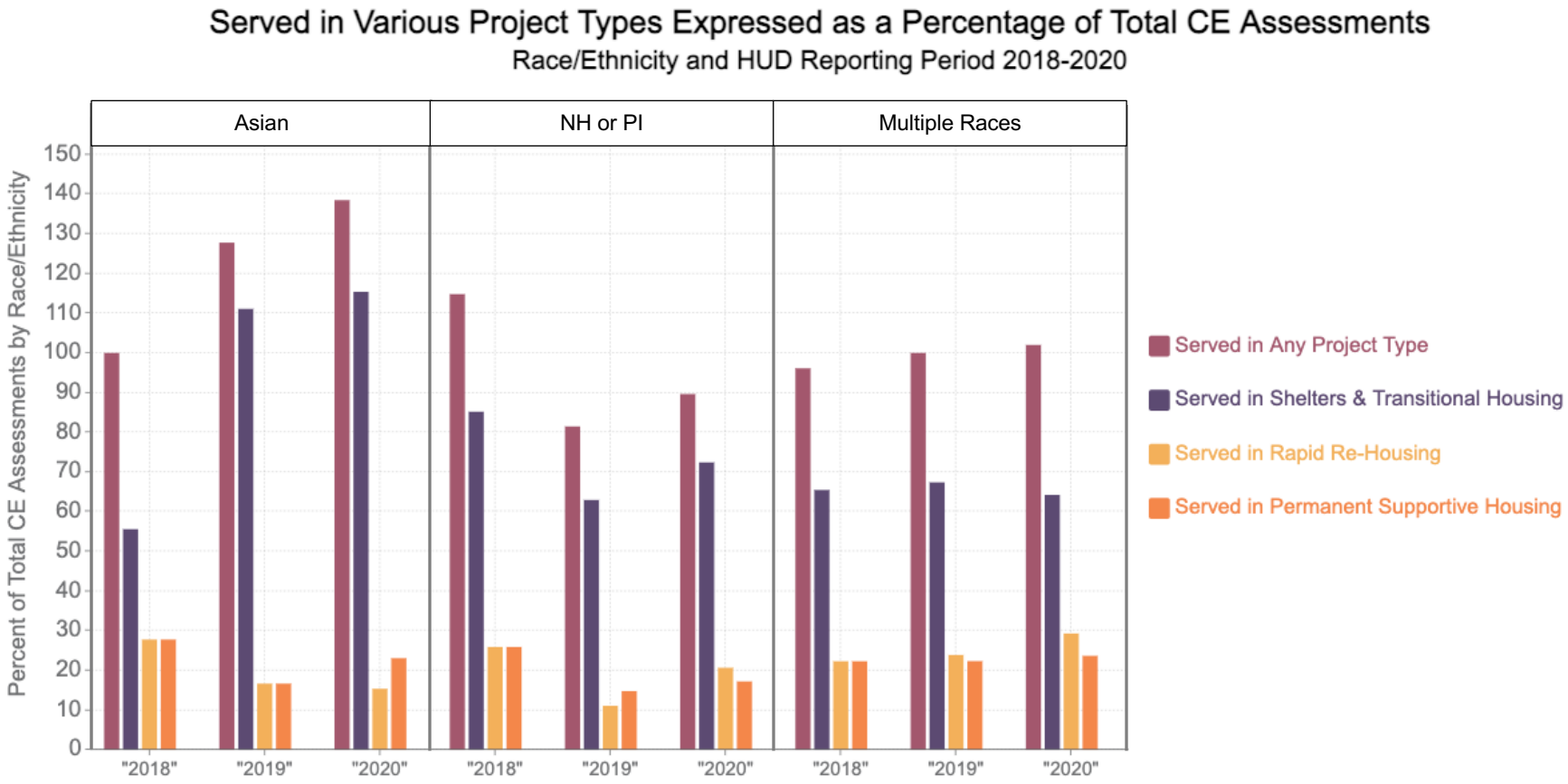
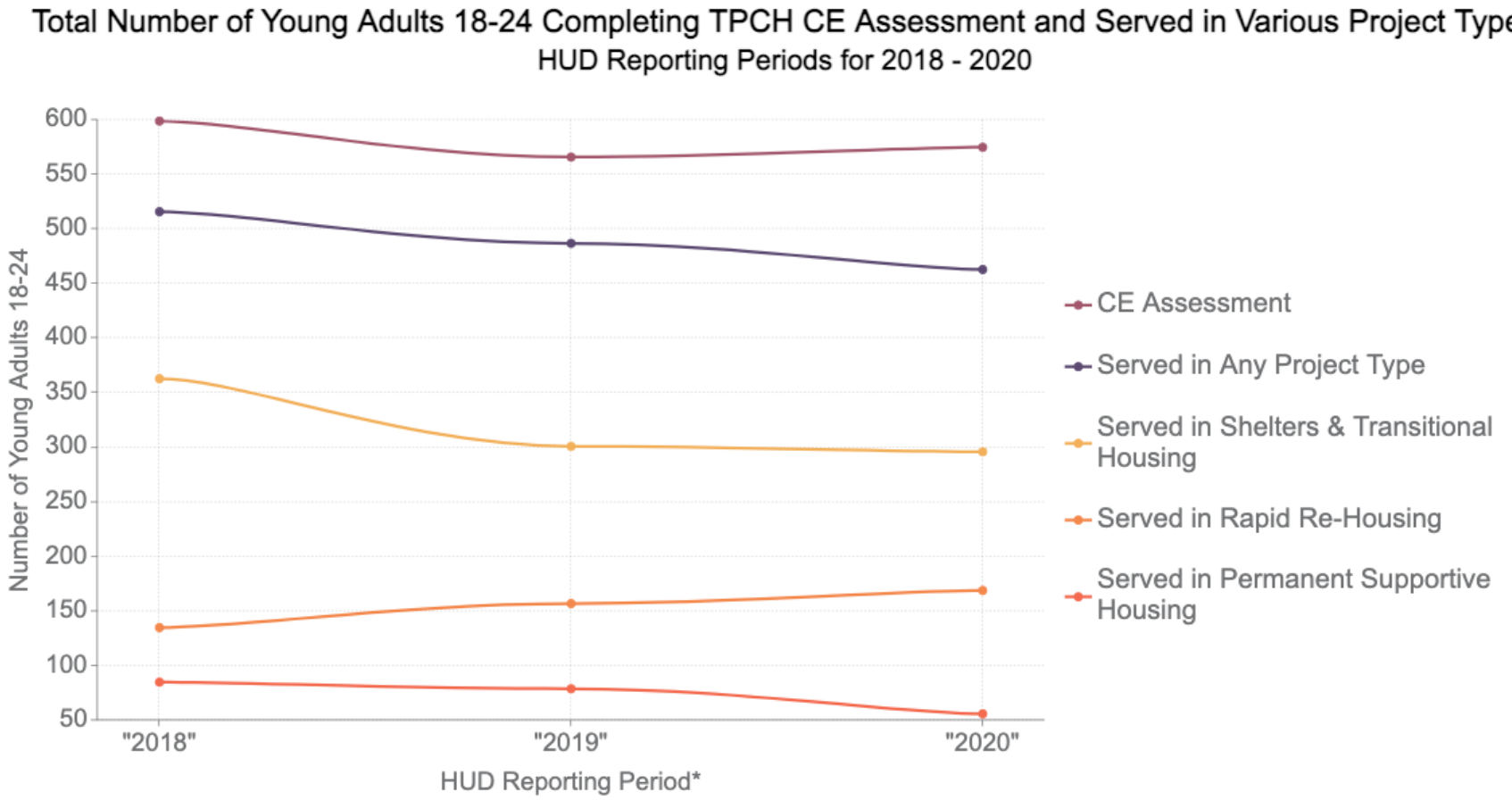
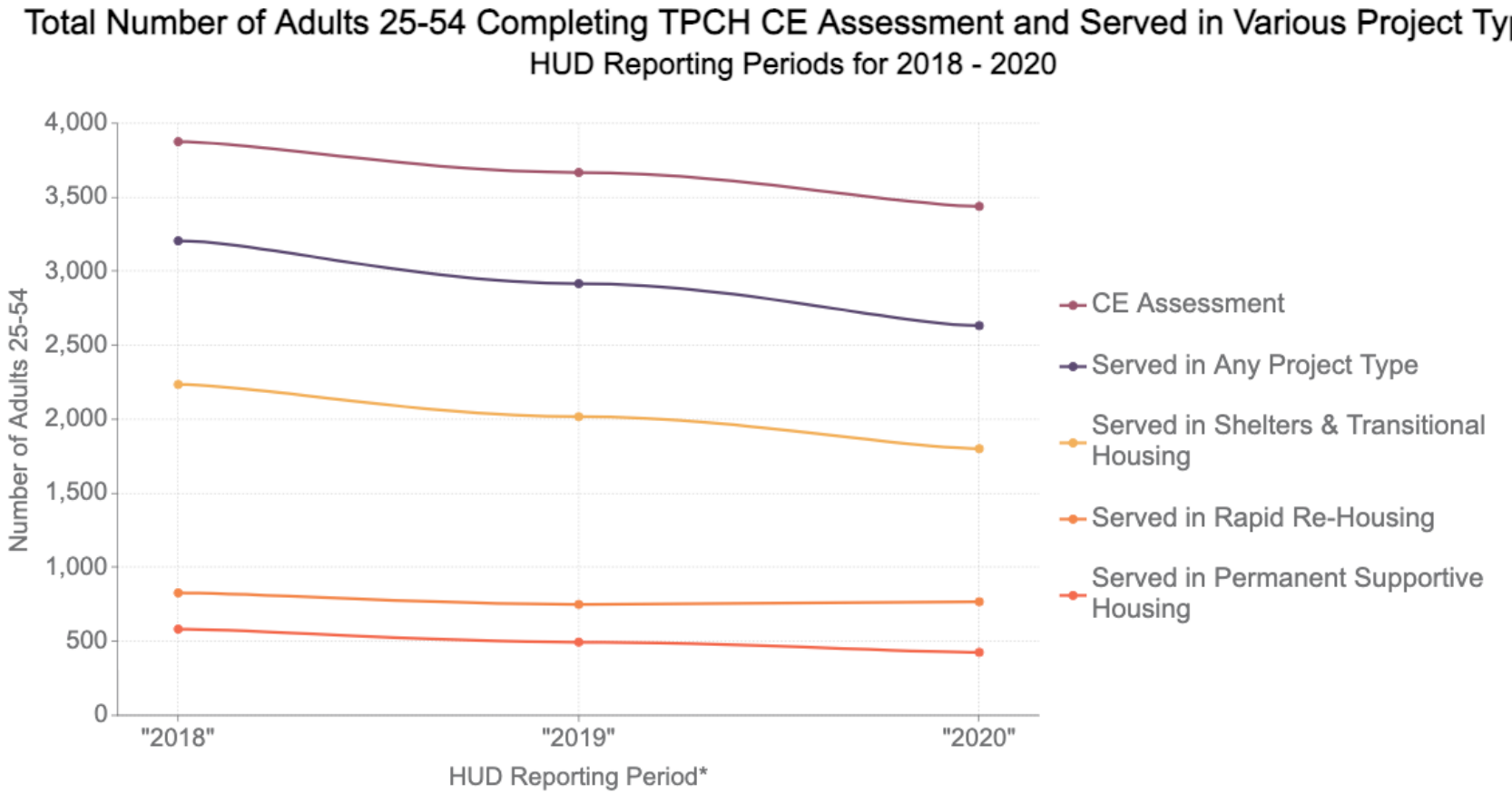

Served in Various Project Types Expressed as a Percentage of Total CE Assessments
Race/Ethnicity and HUD Reporting Period 2018-2020
Asian
NH or PI
Multiple Races
Percent of Total CE Assessments by Race/Ethnicity
150
140
130
120
110
100
90
80
70
60
50
40
30
20
10
0
"2018"
"2019"
"2020"
Served in Any Project Type
Served in Shelters & Transitional Housing
Served in Rapid Re-Housing
Served in Permanent Supportive Housing

FIGURE C.16



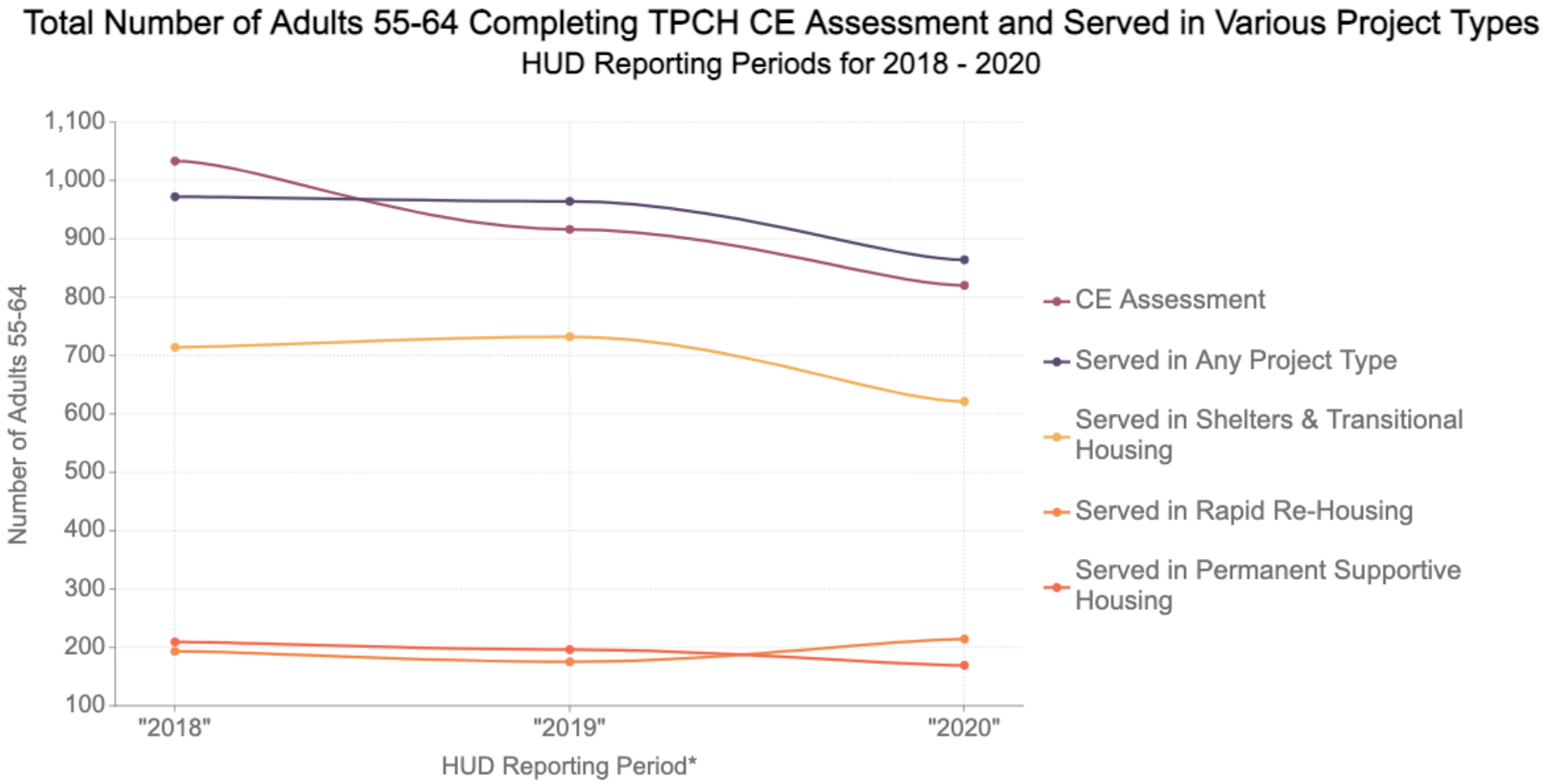
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.17



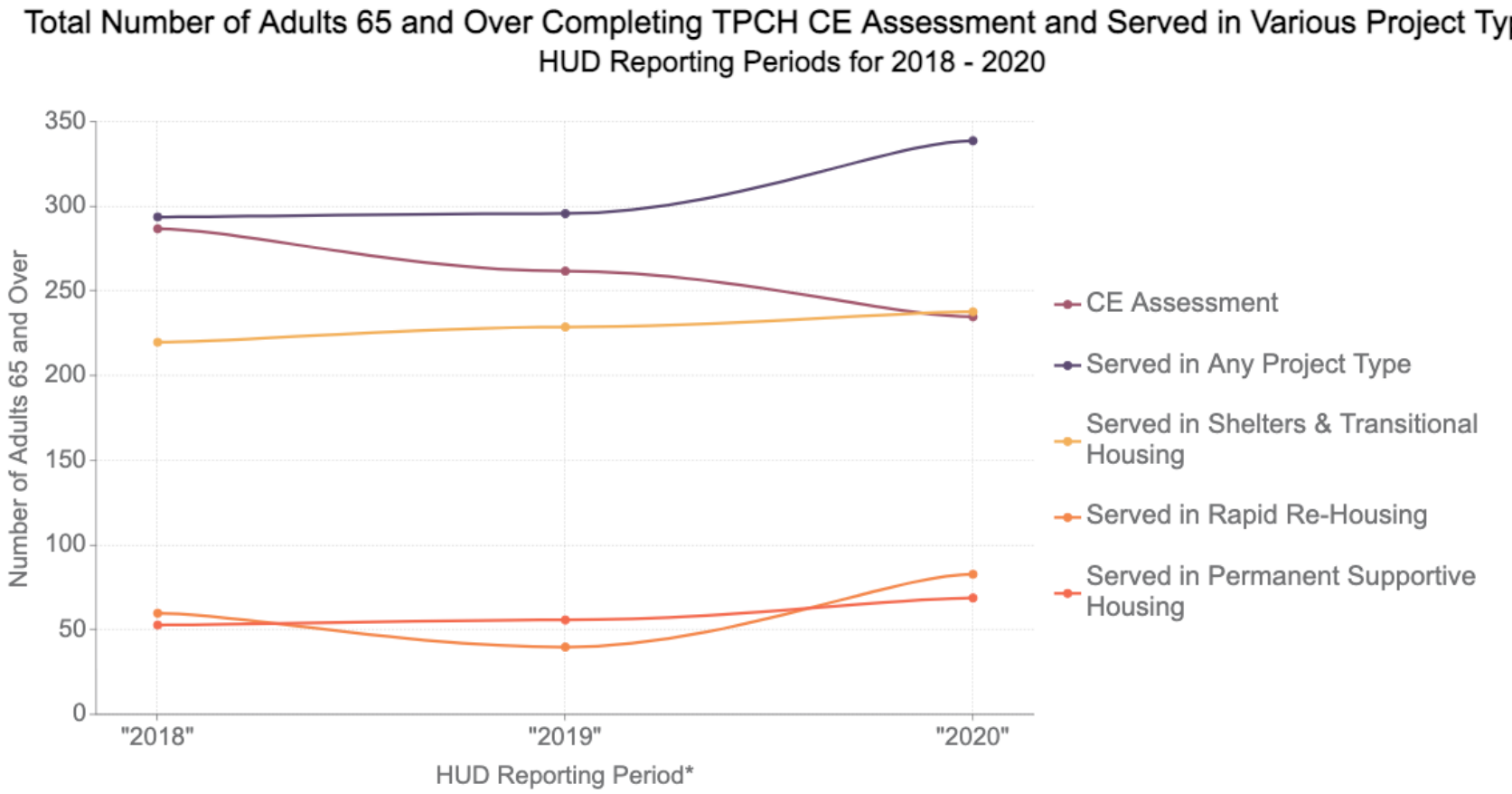
*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.18



*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.19



*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.20

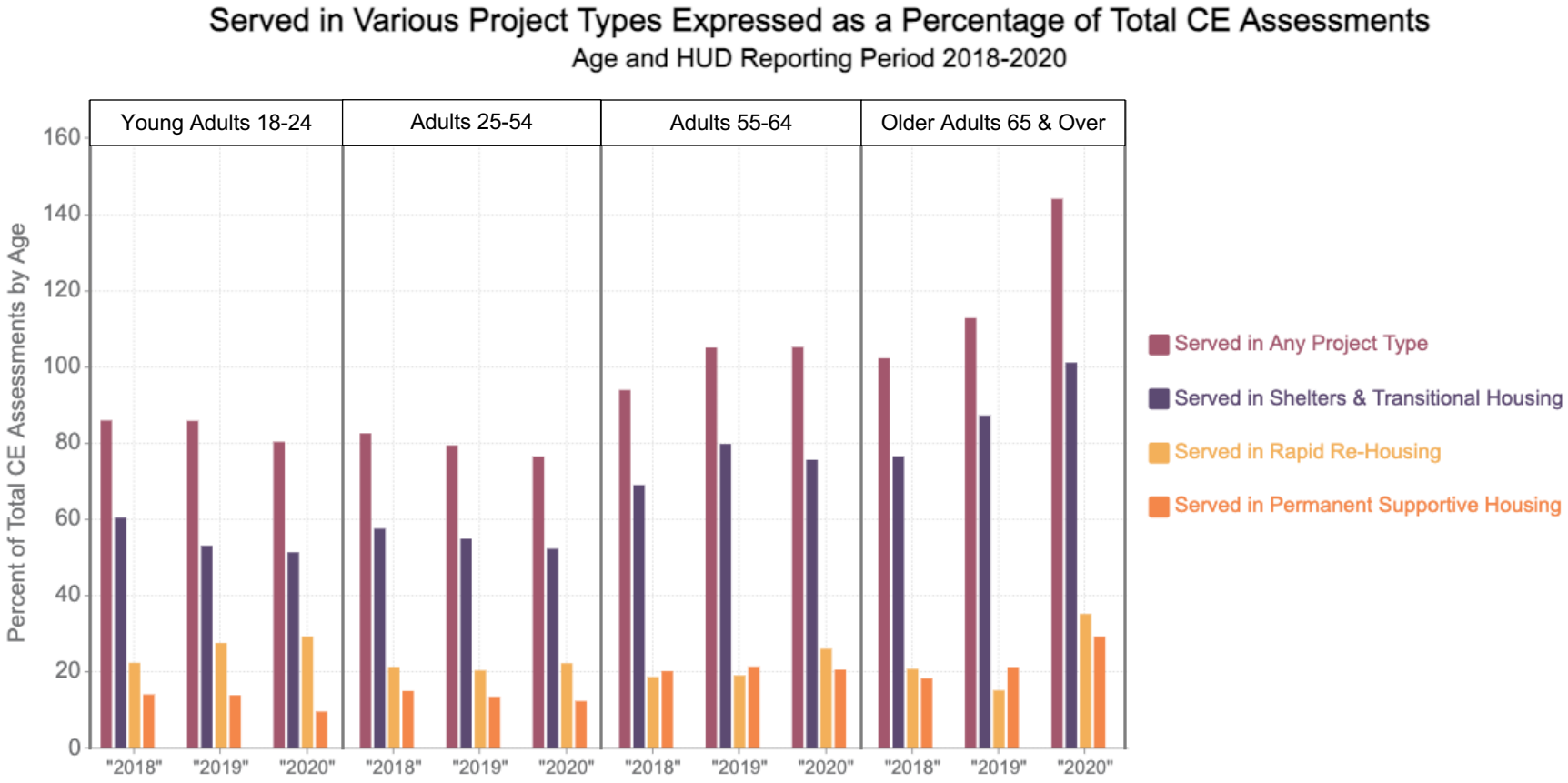
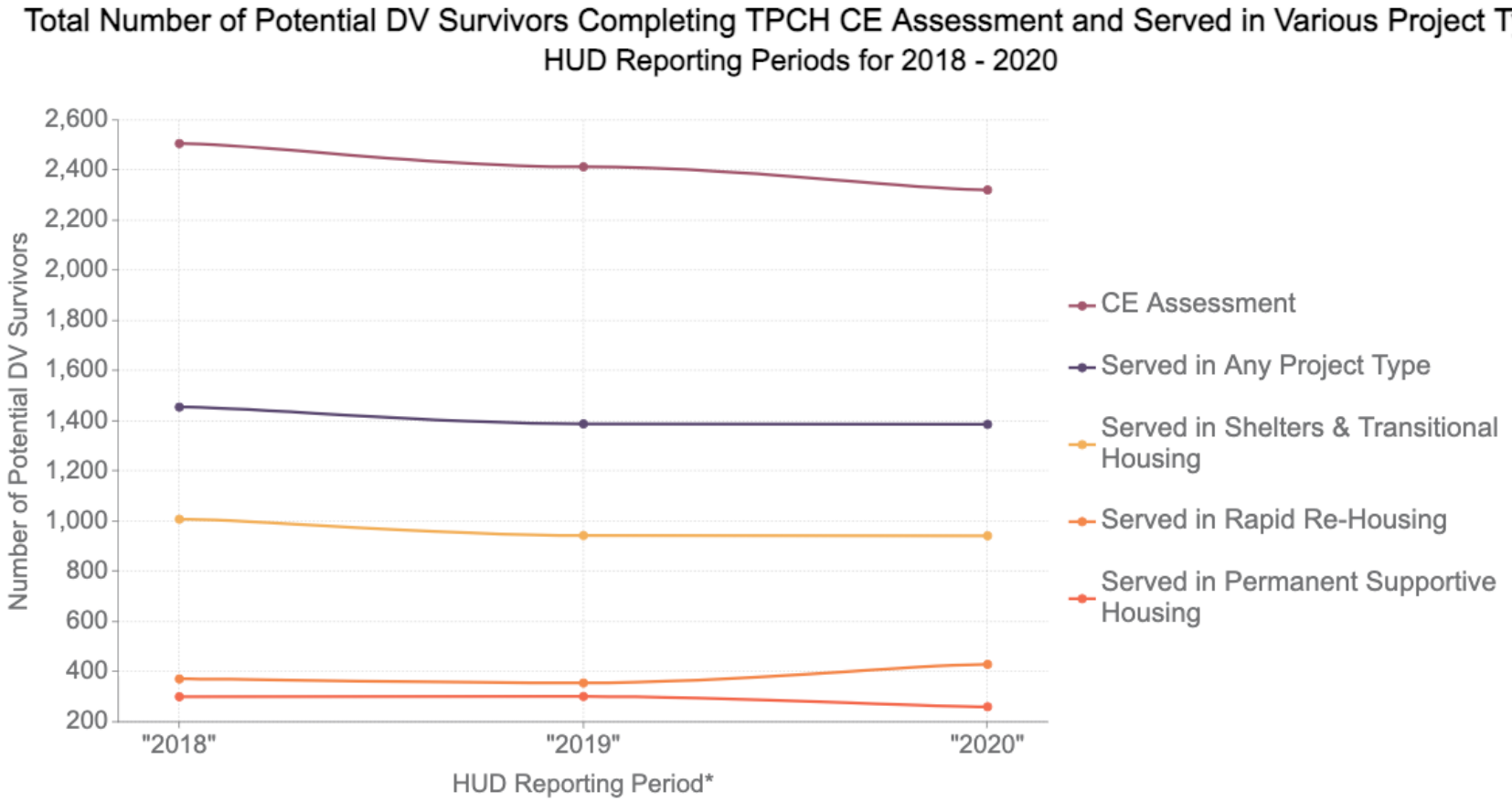

Served in Various Project Types Expressed as a Percentage of Total CE Assessments
Age and HUD Reporting Period 2018-2020
Young Adults 18-24
Adults 25-54
Adults 55-64
Older Adults 65 & Over
Percent of Total CE Assessments by Age
0
20
40
60
80
100
120
140
160
"2018"
"2019"
"2020"
Served in Any Project Type
Served in Shelters & Transitional Housing
Served in Rapid Re-Housing
Served in Permanent Supportive Housing

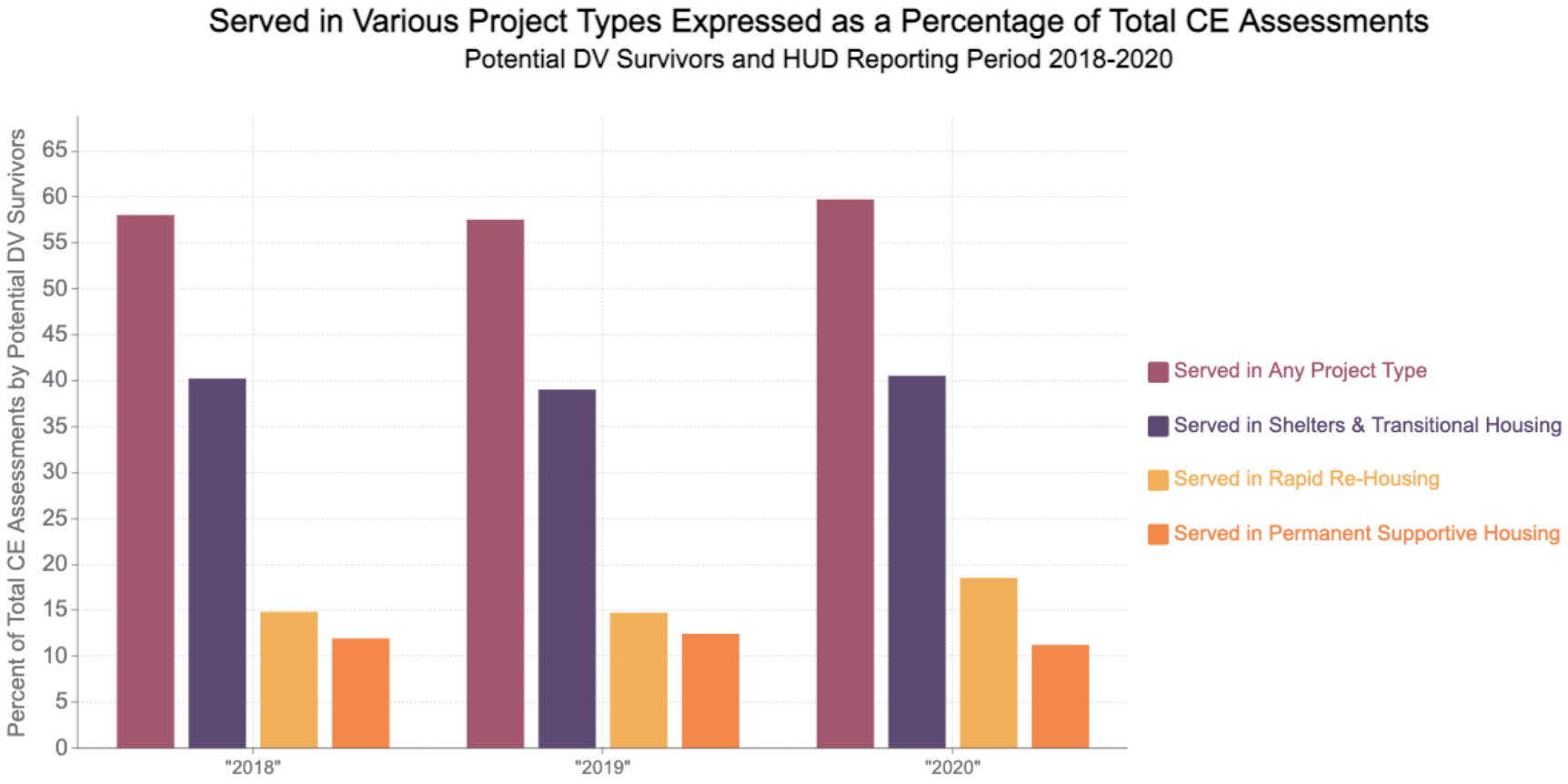
FIGURE C.21*



*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

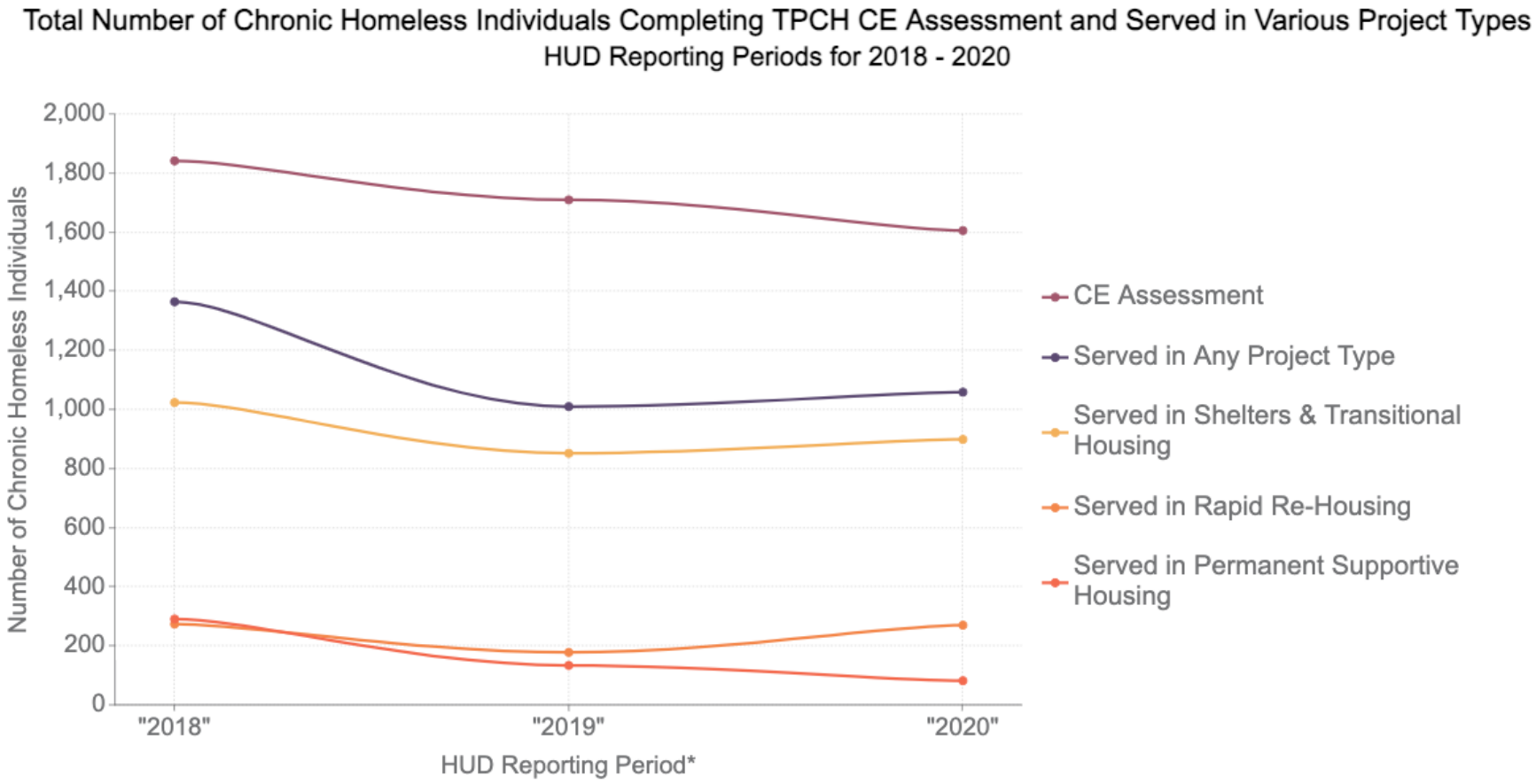
*The number of domestic violence survivors is referred to as “potential” for the CE Assessment figure as questions about abuse, trauma, and relationship breakdown are used to identify potential DV survivors in the CE data. This is compared to DV survivors who received services.

FIGURE C.22*



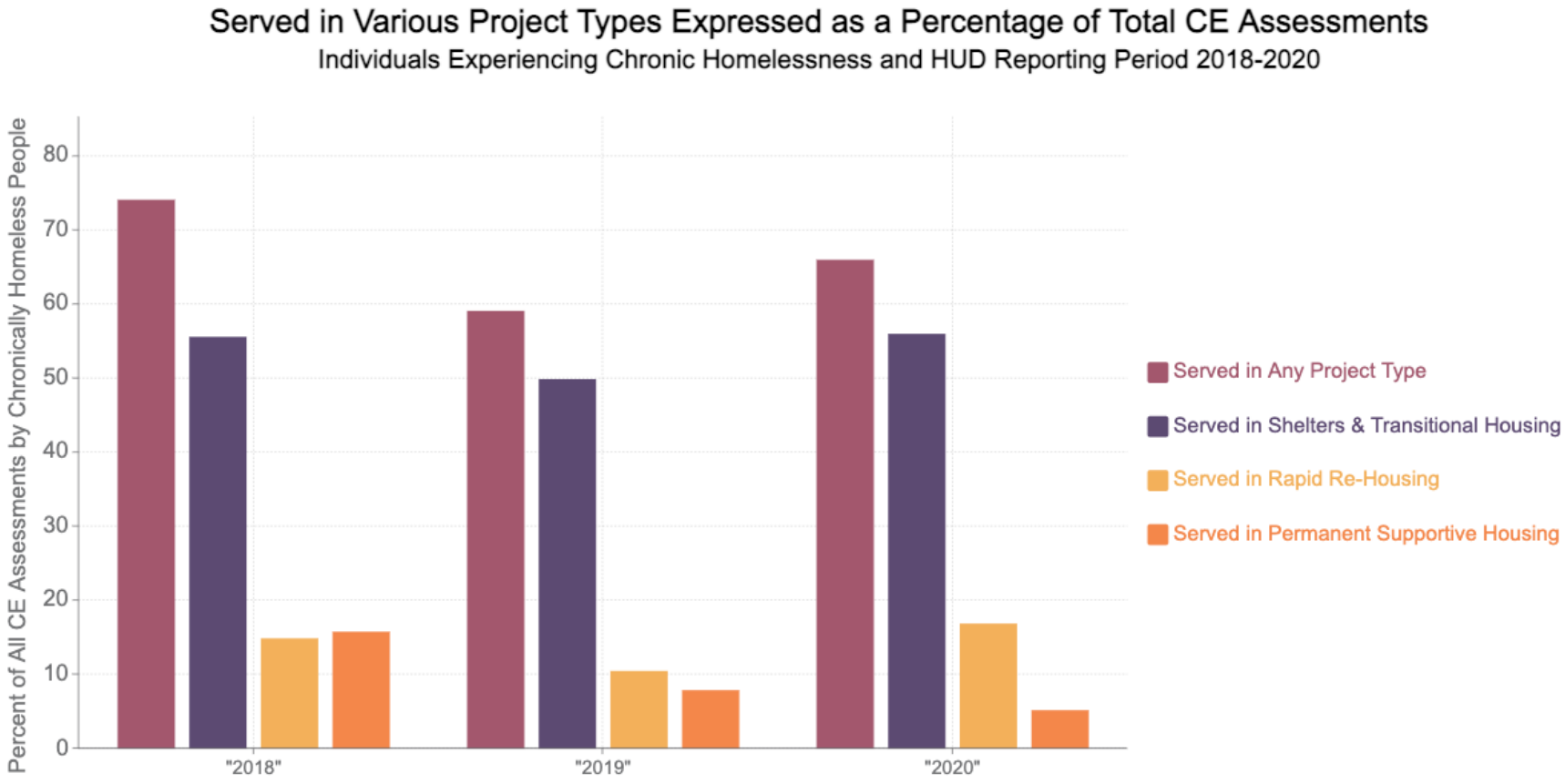
*The number of domestic violence survivors is referred to as “potential” for the CE Assessment figure as questions about abuse, trauma, and relationship breakdown are used to identify potential DV survivors in the CE data. This is compared to DV survivors who received services.

FIGURE C.23



*HUD reporting periods run from October to September of the following year. Data for "2018" are inclusive of individuals assessed or served between 10/1/2017 - 9/30/2018.

FIGURE C.24


Served in Various Project Types Expressed as a Percentage of Total CE Assessments
Individuals Experiencing Chronic Homelessness and HUD Reporting Period 2018-2020
Percent of All CE Assessments by Chronically Homeless People
0
10
20
30
40
50
60
70
80
"2018"
"2019"
"2020"
Served in Any Project Type
Served in Shelters & Transitional Housing
Served in Rapid Re-Housing
Served in Permanent Supportive Housing

D. EXAMINING DISPARITIES IN THE EXPERIENCE AND CONDITIONS OF ADULTS EXPERIENCING HOMELESSNESS

The CE assessments ask a wide range of questions about the experiences and conditions of people experiencing homelessness. The following examination of these experiences and conditions will be limited to people experiencing homelessness who completed the TPCH CE assessment for homeless individuals. The comparisons to follow will present the average responses for all respondents and various subgroups for the three-year period embraced by the HUD reporting period for 2018, 2019, and 2020 (inclusive of 10/1/2017 – 9/30/20). The CE assessment asks questions about an individual's current period of homelessness and experiences within the last six months. Given that individuals can complete this assessment repeatedly, the surveys used for these comparisons are limited to the first CE assessment a unique individual completed within each HUD reporting period for 2018, 2019, and 2020. This means that if an individual completed a CE assessment in each of the three reporting periods, the experiences captured in all three surveys would be included in these comparisons. These restrictions results in a set of roughly[5] 12,904 unique individual/reporting year observations for this three year period. Reponses to each question in the CE assessment for all respondents and by subgroups are provided in **Appendix B.** The following is organized by each section of the CE assessment and only major disparities will be noted in summary form.

Section A. History of Housing and Homelessness

Where Do You Sleep Most Frequently?

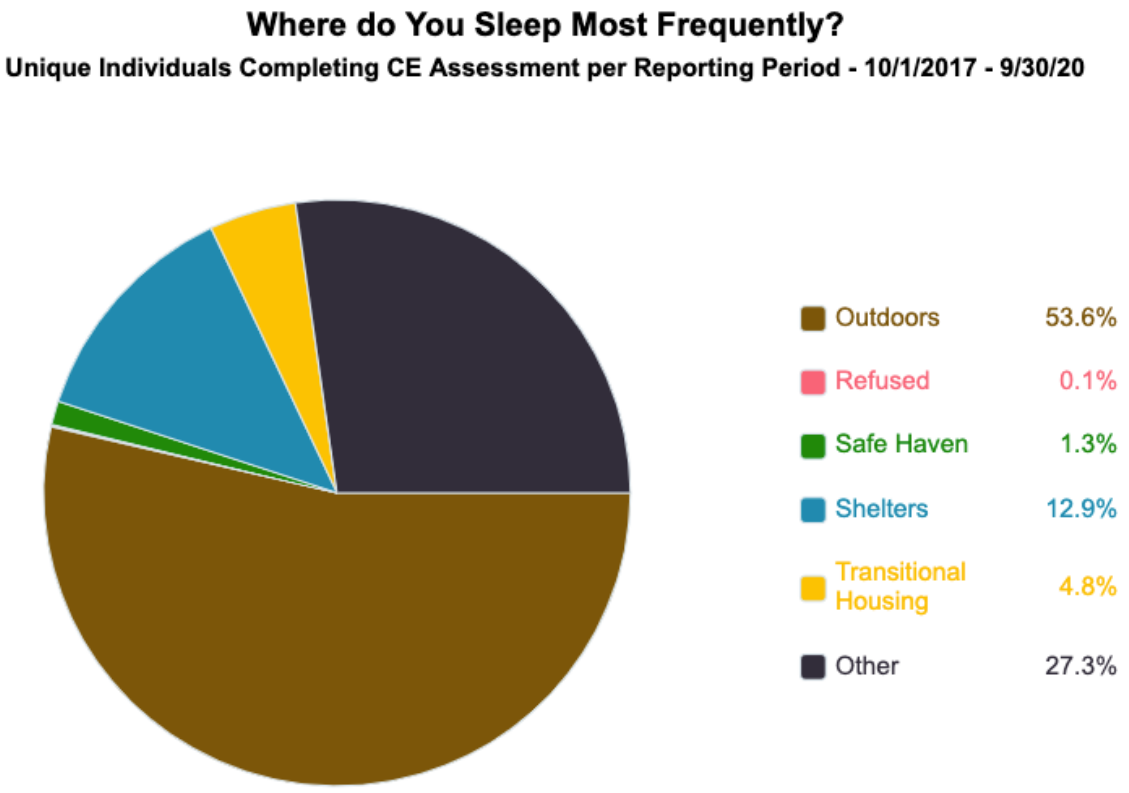
The first question on the CE assessment asks respondents where they sleep most frequently, with the response choices of: in shelters, transitional housing, a safe haven, outdoors, or other. **Figure D.1** presents the responses to this question for all unique individuals per reporting period. The largest share of responses was the 54% who reported sleeping outside most frequently. The first page of **Appendix B** provides the proportion reporting sleeping outside most frequently by all respondents, reporting year, gender identity, age, race/ethnicity, severity of service needs (as captured in vulnerability index scores), and chronic homelessness and potential domestic violence survivor statuses. The first thing to note is that the proportion reporting sleeping outside has been ticking up in recent years, rising from 52% in the 2018 reporting year to 57% in the 2020 reporting year. Variation in the proportion reporting that they are sleeping outdoors across subgroups is mostly modest in nature. Transgender men are less likely to report sleeping outside relative to other gender identities, as were Asian individuals relative to other racial/ethnic groups. The proportion sleeping outside declines with age, and increases substantially among individuals with higher VI scores. People experiencing chronic homelessness were also more likely to report sleeping outdoors most frequently.

[5] The actual number of individuals that answered each specific question will vary.

How Long Since Permanent Stable Housing?

The second question on the CE assessment asks the respondent how long has it been since you lived in permanent stable housing. **Figure D.2** presents the responses to this question for all

Figure D.1



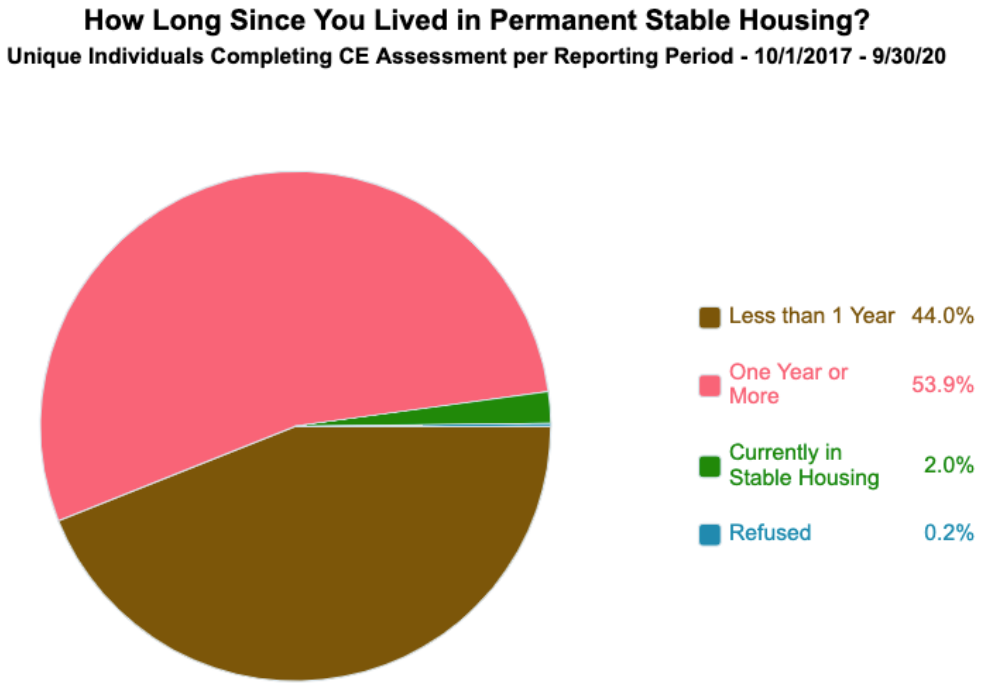
respondents and Question 2 in **Appendix B** provides the proportion reporting "one year or more" for examined subgroups. Of all unique respondents per reporting period, 54% reported that it had been one year or more since they lived in permanent stable housing. Variation across gender and racial/ethnic subgroups is modest, but the proportion reporting it being one year or more declines with age. The proportion reporting it being one year or more since permanent stable housing increases substantially among individuals with higher VI scores. And by definition, the proportion reporting one year or more is much higher among those reporting that they are experiencing chronic homelessness.

How Many Times Homeless in the Last Three Years

Question 3 asks respondents how many times they have been homeless in the last three years. The average for all respondents to this question is 3.3. Variation across gender and racial/ethnic subgroups is mostly modest, with the exceptions of transgender men who report a substantially higher average number of times homeless (4.5) relative to, for example, cisgender men (3.3). Asian individuals also stand out as having a somewhat lower rate of homelessness relative to other

racial/ethnic groups. The average number of times homeless increases substantially among individuals with higher VI scores, and is higher for those experiencing chronic homelessness and for potential domestic violence survivors.

Figure D.2



Section B. Risk

Emergency Service Use

Questions 4a – 4f in **Appendix B** ask about the number of times in the last six months the respondent has: received health care at an emergency room, taken an ambulance to the hospital, been hospitalized as an inpatient, used a crisis service, talked to the police, or were incarcerated. On every one of these questions respondents answered that they had more instances of these events if they were a person experiencing chronic homelessness, a potential domestic violence survivor, or if they had a higher vulnerability index (VI) score. Transgender men and women and gender non-conforming individuals had substantially higher rates of emergency department use for health care and use of crisis services. Transgender women and gender non-conforming individuals also had a higher rate of inpatient hospitalizations and interactions with the police. Transgender women specifically had an unusually high average rate of ambulance trips to the hospital in the last six months, 1.8, more than twice the rate for cisgender men and women. Variation in most of these experiences across racial/ethnic groups is modest, with a pattern in which Asian individuals experiencing homelessness generally report the lowest rates of these experiences. The rate of incarceration varies modestly along racial/ethnic lines with Hispanic/Latino Whites, multiracial people, Black or African American individuals, and American Indian or Alaska Native individuals reporting higher rates relative to non-Hispanic/non-Latino

Whites. The rate of incarceration, talking to police, and use of crisis services all decrease with age, while the rates of inpatient hospitalization and ambulance rides increase with age.

Risk of Harm

The CE assessment then asks whether the respondent has threatened to or tried to harm themselves or anyone else in the last year and whether they have been attacked or beat up since they've been homeless (Questions 5 & 6). People experiencing chronic homelessness, potential domestic violence survivors, and individuals with higher VI scores all were more likely to answer "yes" to these two questions. Substantially larger proportions of transgender men and women and gender non-conforming individuals answered "yes" to these questions relative to cisgender men and women. 66% of gender non-conforming individuals answered "yes" to the question about harming oneself or others, relative to 26% for cisgender men. The proportions answering "yes" to these questions also declines steadily with age.

Legal Issues

In response to a question (Question 7) about whether the individual has legal issues that may result in incarceration, fines, or that make it difficult to find housing individuals with higher VI scores, those experiencing chronic homelessness, and potential domestic violence survivors were all more likely to answer "yes". Transgender women and gender non-conforming individuals were also more likely to answer "yes". Last, the proportion answering "yes" to having legal issues declines with the age of the respondent.

Risk of Exploitation

Questions 8 and 9 ask whether anyone forces or tricks the respondent into doing things they don't want to do, or if they ever do things considered to be risky (e.g. sex for money, unprotected sex, running drugs, or sharing a needle). The same pattern we have seen so far holds as domestic violence survivors, people experiencing chronic homelessness, and those with higher VI scores were all more likely to answer "yes" to these questions. Gender non-conforming individuals and transgender men and women were more likely to answer "yes" to the question about being forced or tricked. Gender non-conforming and transgender women were more likely to report risky behavior, and the proportion reporting risky behavior declines substantially with age.

Section C. Socialization and Daily Functioning

Money Management

Respondents are asked whether anyone or any organization thinks that they own them money (Question 10). Consistent with previous questions individuals with higher VI scores, those experiencing chronic homelessness, and potential domestic violence survivors were all more likely to answer "yes" to this question. Cisgender men and women were less likely than other gender identities to answer "yes", but these differences are modest. Respondents were also asked if they get any money from a job, pension, benefit, or inheritance (Question 11). Individuals with lower VI scores were more likely to answer "yes" to this question, and the proportion answering "yes" increases dramatically with age. Gender non-conforming individuals were also substantially more likely to answer "yes" to this question.

Meaningful Daily Activity

Question 12 asks respondents whether they have planned activities each day that make them feel happy and fulfilled. The proportion of respondents answering "no" is higher among individuals with higher VI scores, people experiencing chronic homelessness, and those that are potential domestic violence survivors. Transgender women reported a comparatively low proportion of "yes" responses to this question, and Asian individuals experiencing homelessness reported a comparatively high proportion of "yes" responses.

Self Care

Respondents are asked whether they are currently able to take care of basic needs, such as bathing, changing clothes, using a restroom, and getting clean food and water (Question 13). Proportions answering "yes" to this questions are very similar across age and racial/ethnic groups. Cisgender men and women are more likely to answer "yes" compared to gender non-conforming individuals and transgender men and women. "Yes" answers also decline with increased VI scores.

Social Relationships

Question 14 asks respondents whether their current homelessness is, "in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?". The first thing to note is that the majority of all people completing CE assessments, 59%, answered "yes" to this question. The proportion answering "yes" increases substantially with higher VI scores, is higher for people experiencing chronic homelessness, and, by definition, 100% of potential domestic violence survivors answered in the affirmative. The proportion answering "yes" decreases with age, and the vast majority (70% and greater) of cisgender women, gender non-conforming individuals, and transgender men and women answered "yes" to this question. A lower proportion of cisgender men answered "yes", but even in this case 52% of these men answered in the affirmative to this question.

Section D. Wellness

Physical Health

Respondents are asked a number of questions to get at their physical health and the broader impacts of their health. Question 15 asks whether they have had to leave a housing situation due to their physical health. Question 16 askes whether they have chronic issues with their liver, kidneys, stomach, lungs or heart. For both of these questions the now familiar pattern holds, "yes" responses increase with higher VI scores, and are higher for people experiencing chronic homelessness and those that are potential domestic violence survivors. Cisgender men and women were less likely than other gender identities to answer "yes" to the quesiton about physical health causing one to leave a housing situation, and older individuals were more likely to answer "yes" to this question (but these differences are modest). "Yes" responses to the question about chronic health issues increase substantially with age, and gender non-conforming individuals were uniquely likely to answer "yes" to this question (66%). Question 17 asks about the respondent's interest in a program that serves individuals with HIV or AIDS, Question 18 asks whether they have a physical disability that limits housing options, and Question 19 asks whether

the respondent avoids getting help when they are sick or not feeling well. Again, across all of these questions individuals with higher VI scores were more likely to answer "yes" as were people experiencing chronic homelessness and potential domestic violence survivors. Transgender men and women were more interested in a program serving people living with HIV relative to other gender identities, as were Asian individuals experiencing homelessness. The proportions reporting that they have a physical disability that limits housing options increases substantially with age and varies substantially across racial/ethnic and gender groups. Individuals identifying as gender non-conforming and Native Hawaiian or Pacific Islander in particular reported higher levels of housing-limiting physical disability (26%, and 25% respectively). The proportions reporting that they avoid getting help when sick where particularly high for gender non-conforming and transgender female individuals, and the proportions answering "yes" to this question declines modestly with age. Overall, it is worth noting that 47% of all respondents answered "yes" to this question.

Substance Abuse

Question 21 asks whether drinking or drug use has resulted in the respondent getting removed from a housing situation or program, while Question 22 asks whether drinking or drug use will make it difficult to stay housed or afford housing. To both of these questions individuals with higher VI scores were more likely to answer "yes" as were people experiencing chronic homelessness and potential domestic violence survivors. Gender non-conforming individuals were more likely to answer "yes", and the proportion of "yes" responses to these two questions declines with age. Transgender women were also the most likely to answer "yes" to the question (40%) about getting removed from housing or programs due to substance use.

Mental Health

Respondents are then asked a number of questions about their mental and brain health (Questions 23 and 24). Specifically, they are asked whether they have been kicked out of a housing situation or program due to a) a mental health issue or concern, b) a past head injury, or c) a learning disability, developmental disability, or other impairment. They are then asked a general question as to whether they have any mental health or brain issues that would make it hard to live independently. As we have seen with previous questions, proportions of "yes" responses to these questions are higher for potential domestic violence survivors, people experiencing chronic homelessness, and those with higher VI scores. To varying degrees gender non-conforming and transgender men and women were more likely to answer "yes" to these questions than cisgender men and women. Gender non-conforming individuals and transgender women in particular reported higher levels of removal from a housing situation or program due to mental health issues. On average, the proportion answering "yes" to these questions also declines with age.

Medications

Respondents are then asked whether they have medications that they should be taking but are not taking (Question 25), and whether they take medications in a manner other than as prescribed or if they sell medication (Question 26). Consistent with previous questions, "yes" responses to both questions are higher from people experiencing chronic homelessness and potential domestic violence survivors and increase with higher VI scores. Compared to cisgender men and women,

gender non-conforming individuals and transgender women were also more likely to answer “yes” to these questions.

Abuse and Trauma

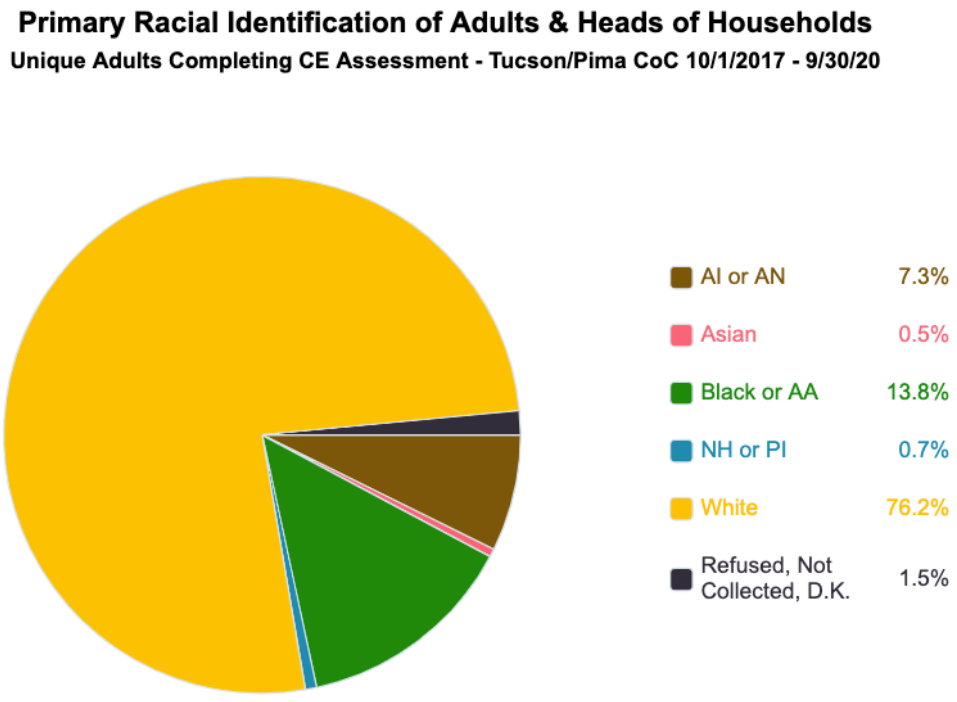
The final question on the CE assessment asks respondents if their current period of homelessness “has been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced”. Unfortunately, 62% of all respondents completing the CE assessment answered “yes” to this question. Affirmative answers to this question decline with age and increase, substantially, with the respondent’s VI score. By definition, all potential domestic violence survivors answered “yes” to this question and affirmative responses were much higher among people experiencing chronic homelessness. Majorities of all gender identities answered in the affirmative to this question, but the pervasiveness of these experiences varied substantially across gender identities. 55% of cisgender men answered “yes”, compared to 73% for cisgender and transgender women, 83% for gender non-conforming individuals, and 94% for transgender men. Unfortunately, as has been found repeatedly, experiences of abuse and trauma are extremely common among people experiencing homelessness. This is especially the case for individuals belonging to marginalized gender identities.

E. EXAMINING THE COMPOSITION OF IDENTITIES CONTAINED WITHIN THE MULTIPLE RACES CATEGORY IN CE ASSESSMENTS

In much of the current reporting required by HUD individuals who identify as having more than one racial identify find themselves lumped together in a "Multiple Races" category. While this is certainly an improvement over constraining individuals to only identifying a single race, it creates a new category that obscures the extremely diverse combinations of racial identities held by these multiracial individuals. Further, the wide diversity of experiences that these different individuals may experience are also be concealed by this categorization. This report hopes to better reveal both the actual racial composition of people experiencing homelessness falling into this Multiple Races category, and to better illuminate the diversity of experiences within this category.

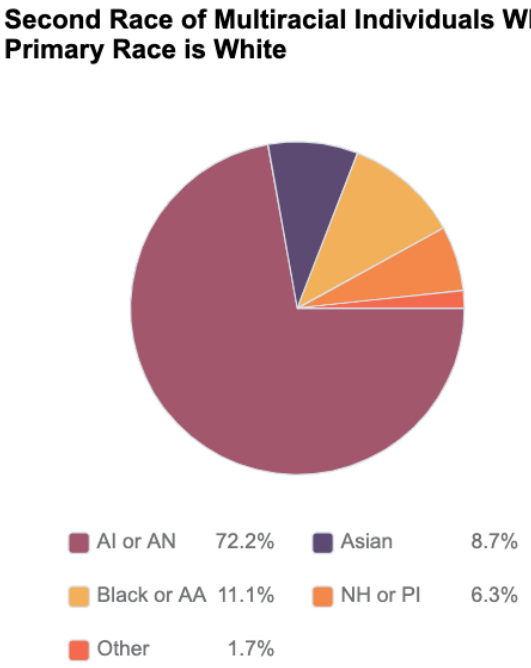
Respondents completing the CE assessment are asked to provide their "primary" and "secondary" races. Let's begin with the composition of the primary race identified by all unique adults and HoHs completing the CE assessment in the Tucson/Pima County CoC between 10/1/2017 and 9/30/20. These dates comprise three HUD reporting periods for the year 2018, 2019, and 2020. **Figure E.1** summarizes the primary races identified by a set of 12,548 unique individuals. Of these individuals 5.3%, or 668 people, identified as multiracial.

Figure E.1



Now let's examine the proportion of these individuals, within each primary race, who identified a secondary racial identity and the actual composition of these multiracial identities. Out of the

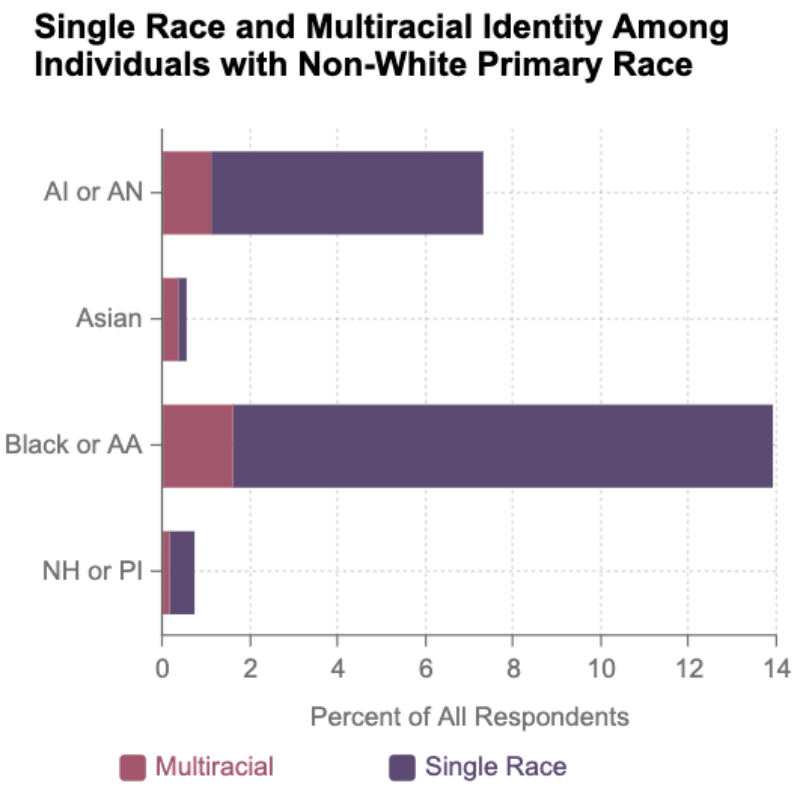
Figure E.2



majority of individuals who identified their primary race as White, 3.1% of these individuals also identified as having a second race. The second race identified by these 287 individuals is presented in **Figure E.2**.The vast majority (72%) of multiracial individuals who identified their primary race as White, also identified as American Indian or Alaskan Native. 11% identified as Black or African American and White, and 9% identified as Asian and White.

Of all people identifying their primary race as White only 3.1 % of those individuals identified a multiracial background. This was much lower than the proportions of multiracial individuals among individuals with a non-white primary racial identity. **Figure E.3** presents the

Figure E.3



proportion of individuals within each primary racial category identifying as multiracial (expressed as a percentage of all respondents). A majority, 55%, of individuals who identified Asian as their primary race also identified as multiracial. Among those who identified their primary race as Native Hawaiian or Pacific Islander, 27% identified as multiracial. Of the individuals who identified Black or African American as their primary race, 13% identified as multiracial. And 18% of those selecting American Indian or Alaskan Native as their primary race also identified as multiracial.

Figure E.4

Second Race of Multiracial Individuals Whose Primary Race is American Indian or Alaska Native

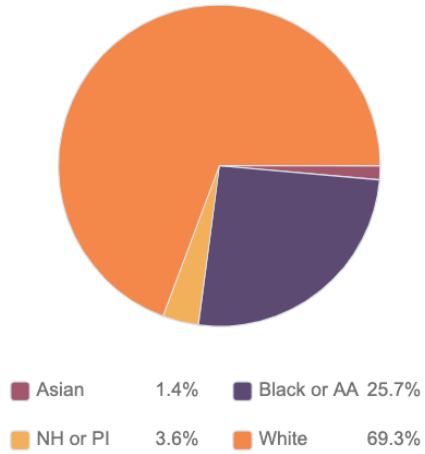


Figure E.5

Second Race of Multiracial Individuals Whose Primary Race is Asian

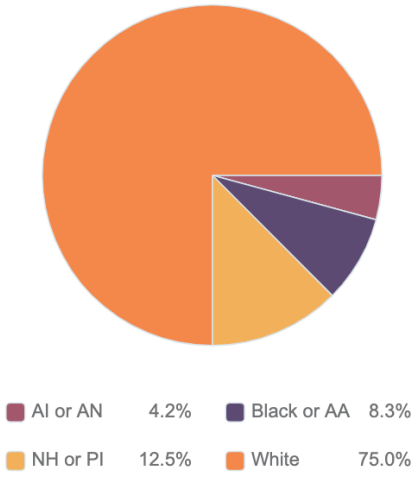


Figure E.6

Second Race of Multiracial Individuals Whose Primary Race is Black or African American

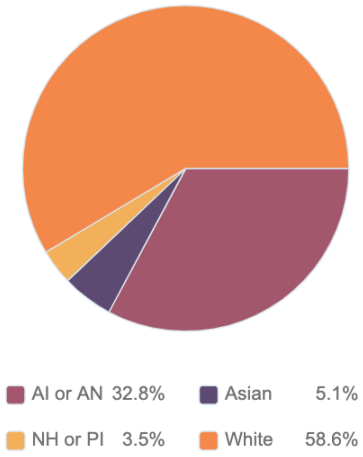
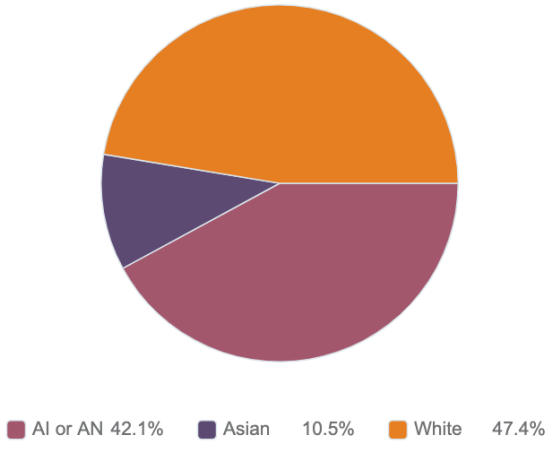


Figure E.7

Second Race of Multiracial Individuals Whose Primary Race is Native Hawaiian or Pacific Islander



Let's turn now to a closer examination of the second races identified by these multiracial individuals with non-white primary identities. **Figure E.4** provides the second racial identity of the 140 multiracial individuals whose primary race was American Indian or Alaskan Native. The vast majority of these individuals, 69%, identified White as their second race.

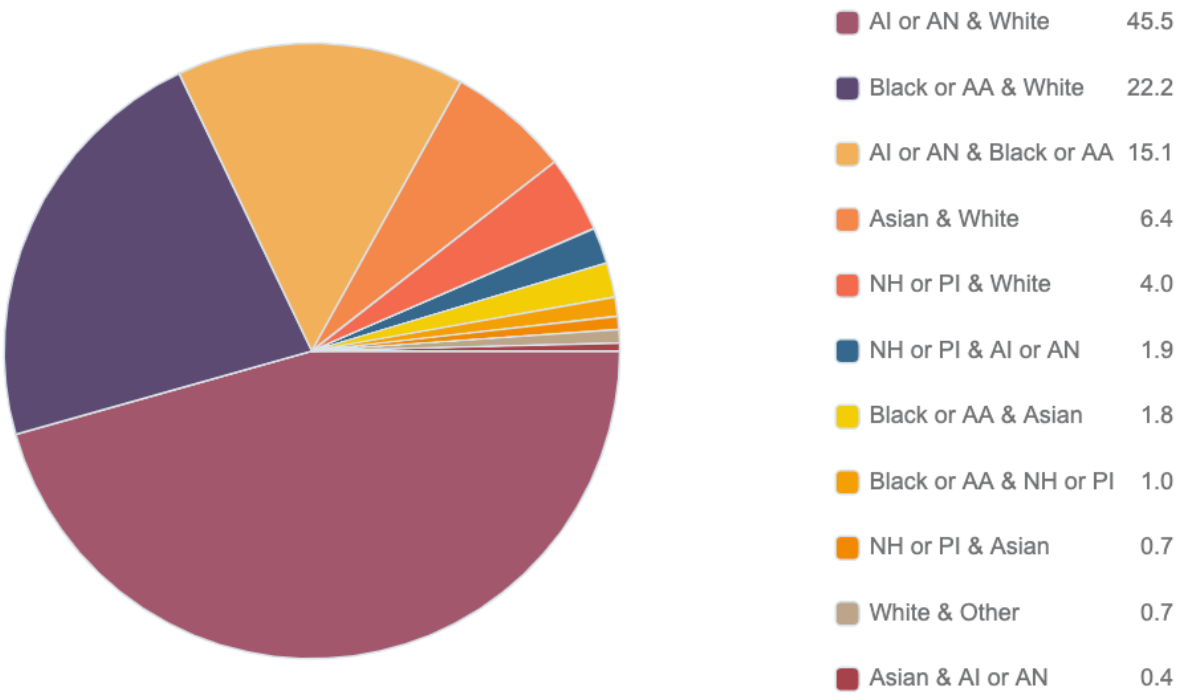
Figure E.5 provides the second race of the 24 individuals whose primary race is Asian. **Figure E.6** presents the second race of the 198 multiracial individuals who identified their primary race as Black or African American. Last, **Figure E.7** provides the second race of the 19 multiracial individuals who identified Native Hawaiian or Pacific Islander as their primary race.

Another way to examine the racial composition of individuals identified as having multiple races is to look at the prevalence of particular combinations of races irrespective of whether a particular race is identified as primary or secondary. **Figure E.8** provides this breakdown presenting the percentage of multiracial individuals identifying as belonging to particular combinations of racial backgrounds.

Figure E.8

Racial Identities of Multiracial Individuals Regardless of Primary or Secondary Race

Percent of All 668 Unique Multiracial Individuals Completing a CE Assessment - 2018-2020



The largest proportion, 46%, of unique multiracial individuals captured in CE assessment between 10/1/2017 and 9/30/20 identified as being both American Indian or Alaska Native and White. Next, 22% of multiracial individuals identified as Black or African American and White. The third largest proportion, 15%, identified as American Indian or Alaska Native and Black or African American.

Disparities Between Multiracial Subgroups?

Now that we have identified the major subgroups within the Multiple Races category, it is possible to examine whether the experiences and conditions of these subgroups are similar to one another or not. In **Appendix B** all of the questions in the CE assessment are presented broken out by various subgroups. In addition to showing rates and proportions for people with Multiple Races, presented are rates and proportion for the three major multiracial subgroups identified here:

individuals identifying as both American Indian or Alaska Native and White, Black or African American and White, and American Indian or Alaska Native and Black or African American. Examination of these subgroups experiences indicates that in some cases the experiences of these different multiracial subgroups are quite similar, while in other cases it is clear that the Multiple Races category obscures substantial diversity in the experiences of these multiracial subgroups. For example, looking at Questions 1-3 about experiences with homelessness, individuals with both Black or African American and White racial backgrounds are somewhat less likely to sleep outside relative to other multiracial individuals. In addition, individuals identifying as both American Indian or Alaska Native and White were somewhat more likely to report it being one year or more since they had stable housing relative to other multiracial subgroups.

In the Risk section (Questions 4a-4f) it is revealed that individuals identifying as both American Indian or Alaska Native and White consistently reported a higher frequency of emergency room visits, ambulance rides, inpatient hospitalizations, and conversations with police relative to other multiracial subgroups. It appears that the health needs of this specific subpopulation are particularly acute, something that warrants further investigation. This section also reveals that individuals identifying as Black or African American and White had higher rate of incarceration relative to other multiracial subgroups.

Another area of substantial diversity is in the area of physical health and disability. Relative to people identifying as Black or African American and White, multiracial individuals who identify as American Indian or Alaska Native and either Black or African American or White were substantially more likely to report having to leave a housing situation or program due to physical health issues. In an echo of the health issues identified above, American Indian or Alaska Native and White individuals were substantially more likely to report chronic health issues, physical disabilities that limit housing options, mental health or brain issues, and that they are not taking medications that they should be taking, relative to other multiracial subgroups. This specific group was also more likely to report that their current period of homelessness was due to an experience of abuse or trauma. Last, Question 26 asks about whether the respondent takes medications not as intended or sells medication. The varied responses from individuals in the different multiracial subgroups underline the diversity of conditions and experiences obscured by the broader Multiple Races category.

APPENDIX A: DATA SOURCES AND METHODOLOGY FOR STATE UNSHELTERED HOMELESSNESS ESTIMATE FOR JANUARY 2021

Dependent Variable:

The dependent variable is these analyses is the annual rate of unsheltered homeless individuals per 10,000 CoC residents as captured by HUD's annual Point in Time count (PIT). These counts are conducted within HUD-designated Continuum of Care (CoC) communities in January of each year. There are a large number of issues with, and valid critiques of, these data ranging from significantly undercounting the unsheltered population to wide variation in data collection approaches across CoCs. Despite these flaws, the PIT count data is widely used in quantitative analyses of homelessness counts as it is the best existing data we have on homelessness prevalence nationwide. In order to partially address these issues, the annual PIT count of people experiencing unsheltered homelessness is smoothed using a three-year moving average. These smoothed data provide stable trajectories of change in homeless counts which should be, at least roughly, capturing real underlying trends in the size of CoC unsheltered homeless populations. A drawback to the smoothing approach is that the magnitude of any large real year-to-year jumps in homelessness will be substantially reduced by the smoothing adjustment, which consequently reduces the size of any coefficients capturing significant associations of variables with change in homelessness counts. As such, the estimated coefficients in these analyses represent *conservative* estimates of the strength of these associations, and may consequently produce conservative estimates of the number of people experiencing unsheltered homelessness.

In 2020, there were 392 HUD-designated CoCs. These CoCs range from communities in rural counties to urban centers in the continental U.S. and include communities in U.S. territories. The effort here is intended to provide an estimate of the unsheltered population in the Tucson/Pima County CoC in 2021. As such, the universe of CoCs included in this model is restricted to CoCs most similar to Tucson/Pima County. There are 4 categories of CoCs: Largely rural (112), Largely Suburban (173), Other Largely Urban (59), and Major City (48). The Tucson/Pima County is designated as a Major City CoC. The CoC-level dataset constructed for this analysis is restricted to CoCs categorized as Other Largely Urban or Major City, and excludes CoCs located in U.S. territories.

The smoothed annual counts of unsheltered homeless individuals are adjusted for population size using U.S. Census Bureau county population estimates. However, while most CoCs have boundaries that are identical to county lines, some CoCs have unique geographical boundaries that do not correspond to other geographic units of analysis. This is an issue because if the geographic area contained within a CoC is not consistent with other geographic units of analysis (e.g. counties) then we cannot match accurate population sizes to the CoC or accurate measures of the independent variables to the CoC. In order to address this issue the subset of CoCs included in these analyses was further restricted to only include CoCs where the CoCs boundaries are identical (or nearly identical) to county boundaries. There were 107 Other Largely Urban or Major City CoCs in 2020, restricting based on correspondence of county boundaries results in a subset of 81 CoCs that were used in these analyses.

Independent Variables:

To our knowledge there is only one recent published study examining covariates of change in homelessness rates over time. Glynn & Fox (2019)[6] find that increased rental costs are associated with increases in rates of homelessness. Glynn & Fox (2019) only examined rental costs in their study. Hanratty's (2017)[7] research offers one of the best existing quantitative studies examining the impact of economic conditions on levels of homelessness. Hanratty (2017) focused on 5 local economic factors: the rental vacancy rate, the share of renters in occupied units, the median rent, the unemployment rate, and the poverty rate. In our analyses we examine rental vacancy rate, the percent of homeowners in occupied units, the median gross rent, the unemployment rate, and the poverty rate, all measured at the county/CoC-level.

Table 1. Description of Variables and Sources

Variable	Description	Source
Per capita homelessness rate	Total count homeless per 10,000 state residents; Three-year moving average.	HUD PIT count U.S. Census Bureau (Pop data)
Unemployment Rate	% of state labor force unemployed	U.S. BLS
Median Rent	Median gross rent in 2005 $*	U.S. Census ACS & Zillow
Vacancy Rate	% of rental units that are vacant	U.S. Census CPS/HVS
Homeowner Share	% of owner occupied housing units	U.S. Census CPS/HVS
Poverty Rate	% of persons below the poverty line; Two-year moving average	U.S. Census CPS/ASES

*Median gross rent is adjusted to real 2005 dollars using the BLS's CPI-U-RS series for all items.

2020 Data extensions:

Data is available for the county level unemployment rate in Pima County in 2020. For all other independent variables in these analyses we need to also estimate their levels in 2020. The following techniques were used to project these variables forward for 2020. Poverty rates for states and counties in 2020 have not been released yet, but some organizations have been

[6] Glynn, Chris & Emily B. Fox. 2019. "Dynamics of Homelessness in Urban America." *The Annals of Applied Statistics.* 13(1): 573-605.

[7] Hanratty, Maria. 2017. "Do Local Economic Conditions Affect Homelessness? Impact of Area Housing Market Factors, Unemployment, and Poverty on Community Homelessness Rates." *Housing Policy Debate.* 27(4): 640-655.

attempting to estimate levels in poverty nationally in 2020. One team[8] has published monthly estimates of U.S. poverty rates through 2020. While they do not provide state level estimates they provide monthly estimates of poverty rates in states with greater than, and less than a 35% Unemployment Insurance recipiency rate. The estimated poverty rate for individuals in states with less than a 35% UI recipiency rate increased by 5% between January and December 2020. The poverty rate for Pima County in 2020 is estimated by increasing the 2019 poverty rate by 5%.

The median rent in Pima County is drawn from the Census Bureau's American Community Survey (ACS) data for the years 2012-2019. For an estimate of median gross rent in 2020, the percent change from 2019 to 2020 is extrapolated using the rate of change in Zillow's observed rent index (ZORI) for Tucson between January and December 2020. The median rent for Pima County in 2020 is estimated by increasing the 2019 median rent by 8.6%.

The rental vacancy rate in Pima County is drawn from the Census Bureau's Housing Vacancies and Homeownership (CPS/HVS) data for the years 2012-2019. For an estimate of the rental vacancy rate in 2020, the percent change from 2019 to 2020 is extrapolated using the rate of change in the stabilized vacancy rate in Tucson provided in a Multi-Family Market report prepared by the CoStar Group[9]. The rental vacancy rate for Pima County in 2020 is estimated by decreasing the 2019 rental vacancy rate by 16.4%.

The homeownership rate in Pima County is also drawn from the Census Bureau's Housing Vacancies and Homeownership (CPS/HVS) data for the years 2012-2019. For an estimate of the homeownership rate in 2020, the percent change from 2019 to 2020 is extrapolated using the rate of change between Q4 2019 and Q4 2020 in the Tucson homeownership rate provided in reports from the National Association of Realtors[10]. The homeownership rate for Pima County in 2020 is estimated by increasing the 2019 homeownership rate by 2.3%.

Modeling Approach:

In order to estimate the level of unsheltered homelessness in the Tucson/Pima County CoC in 2021, a multi-level modeling approach was used to identify CoC/county-level economic factors significantly associated with changes in homelessness year-to-year. Within this multi-level model, we examined the association of five local economic factors (unemployment, poverty, median rent, homeownership rate, and the rental vacancy rate) with year-to-year change in the CoC-level unsheltered homelessness rate for the years 2013-2020 at the first level of the model. A preliminary step in these analyses is to

[8] Han, Jeehoon, Bruce D. Meyer, & James X. Sullivan. "Real-time Poverty Estimates During the COVID-19 Pandemic through April 2021." *Working Paper.* May 18, 2021. http://povertymeasurement.org/covid-19-poverty-dashboard/

[9] Evans, Natalie. "Multi-Family Market Report Tucson-AZ". CoStar Group. June 18, 2021.

[10] National Association of Realtors. "Commercial Real Estate Metro Market Report – Tucson AZ 2020 Q4." https://cdn.nar.realtor/sites/default/files/documents/2020-q4-commercial-real-estate-metro-market-reports-az-tucson-03-02-2021.pdf

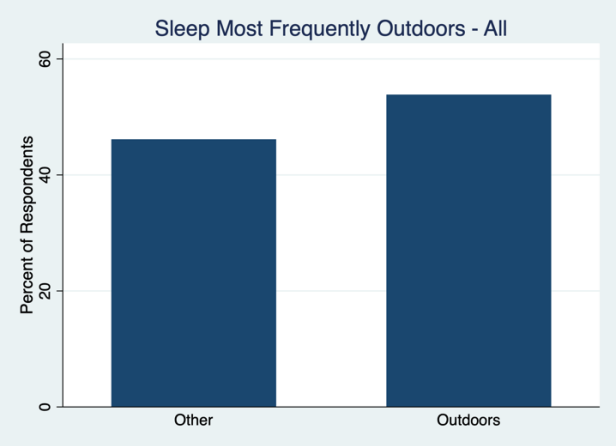
determine the specification of the time, or the growth, parameter that best describes trajectories of the dependent variable. It was found that a second order polynomial for quadratic change (the inclusion of time and time-squared in the model) was the most appropriate growth model for these data.

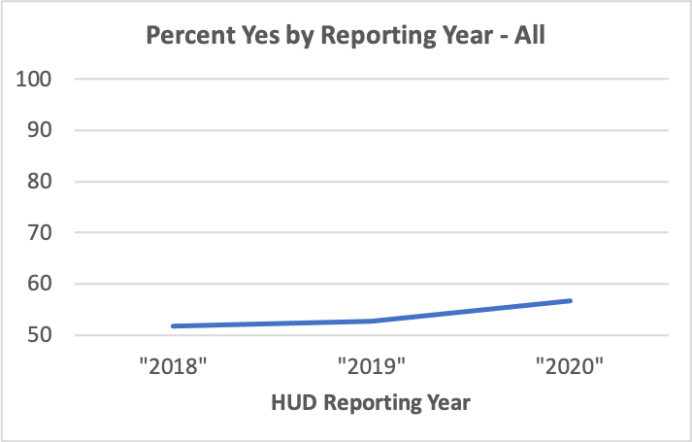
The second level of the model allows one to test whether stable CoC-level factors contribute to both initial levels of the outcome (the CoC -level rate of unsheltered homelessness in 2013) and differences in overall trajectories of change in the outcome (the slope of change in the rate of unsheltered homelessness from 2013-2020). Average CoC-level unemployment for the years 2009-2012 is added to control for the fact that states hit with higher unemployment rates during the 2007-09 recession would likely have more room for reductions in their homeless populations in the subsequent recovery. Model results confirm that states with higher average unemployment in the years 2009-2012 had higher levels of unsheltered homelessness in 2013. All models are based on a set of 648 CoC-year observations (81 CoCs, 2013-2020) and were run using STATA v16.1 .

APPENDIX B. SUMMARY OF RESPONSES TO ALL COORDINATED ENTRY ASSESSMENT QUESTIONS – OVERALL & FOR SUBGROUPS:

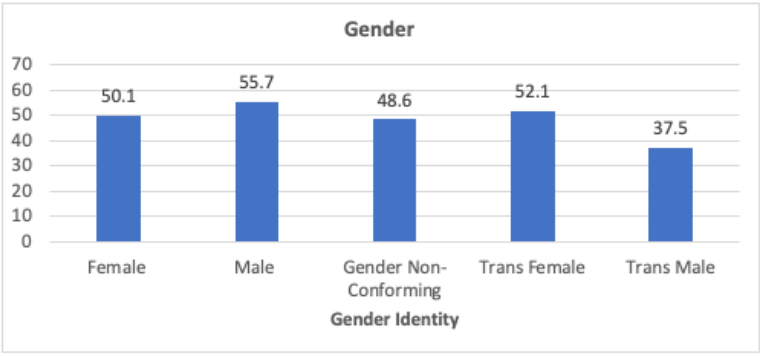
Question #1: Where do you sleep most frequently?

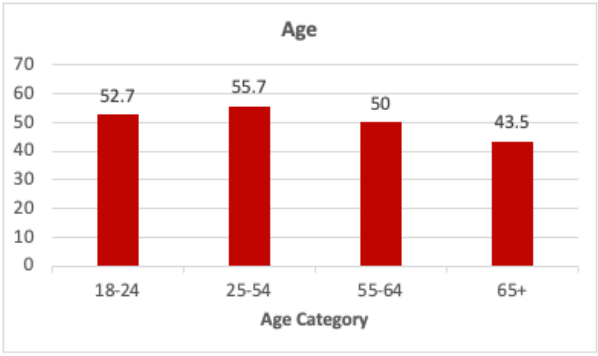
All: % Sleeping outdoors for 12,904 unique individual/HUD reporting year observations 2018-2020: **53.7%**

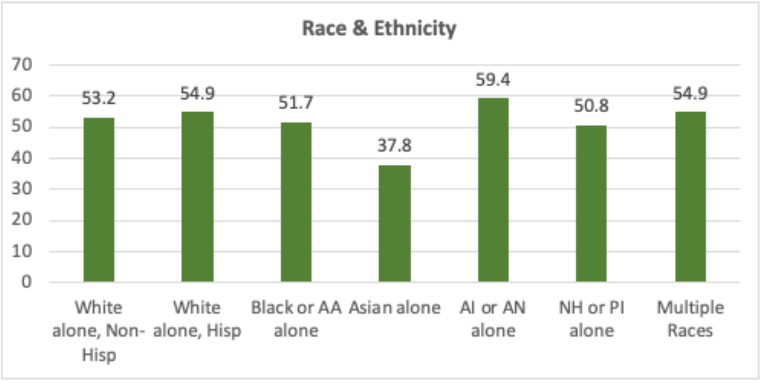


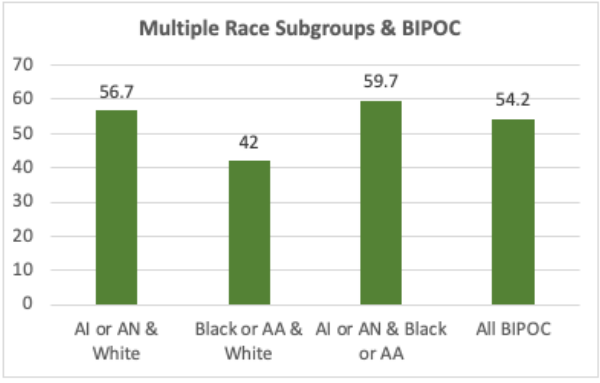


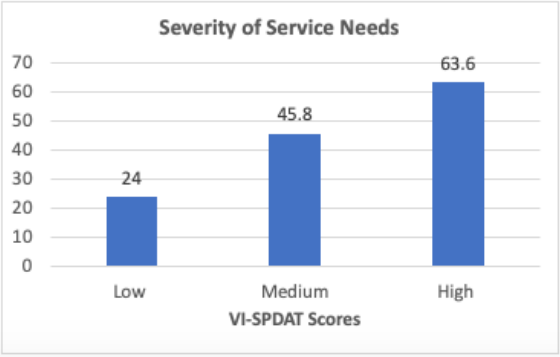
Subgroups: % sleeping outdoors most frequently

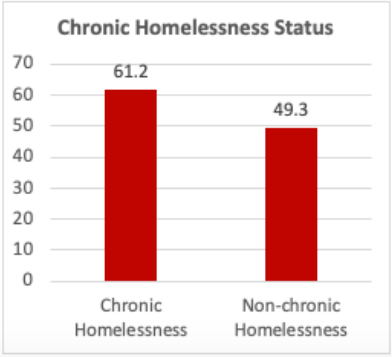


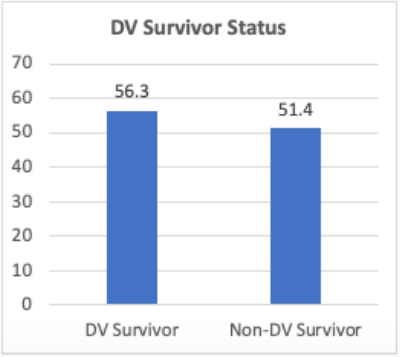






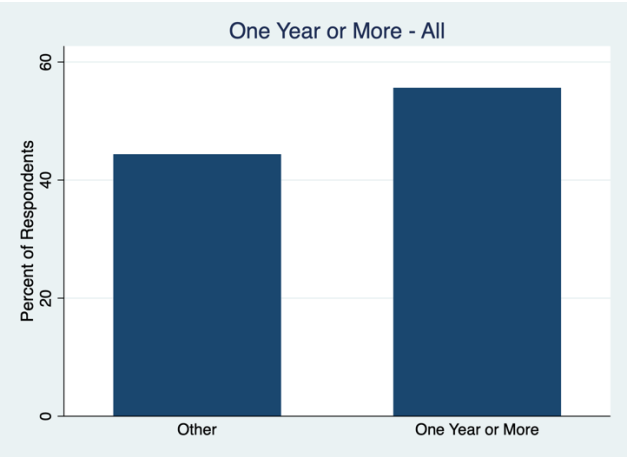


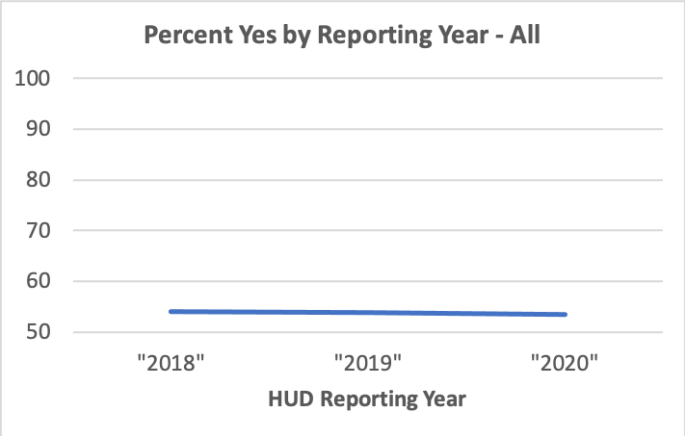




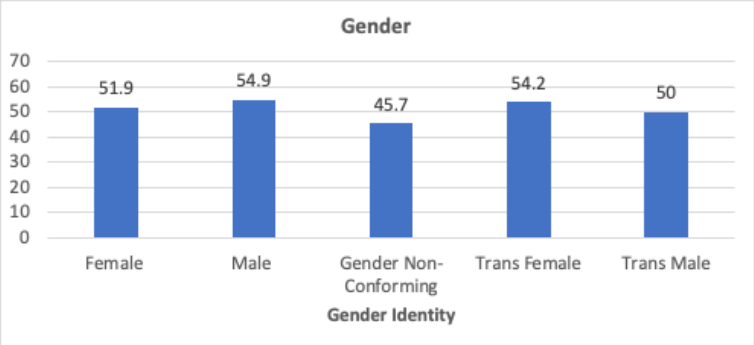
Question #2: How long since you lived in permanent stable housing?

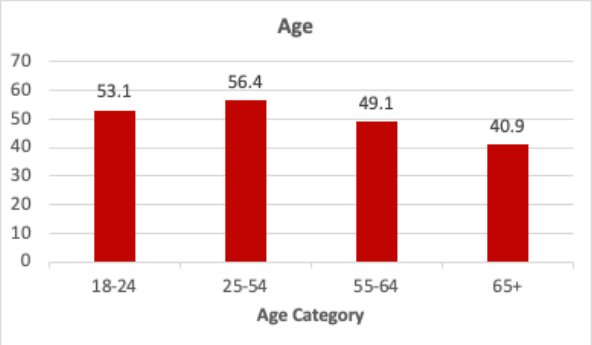
All: % One year or more for 12,904 unique individual/HUD reporting year observations 2018-2020: **53.8%**

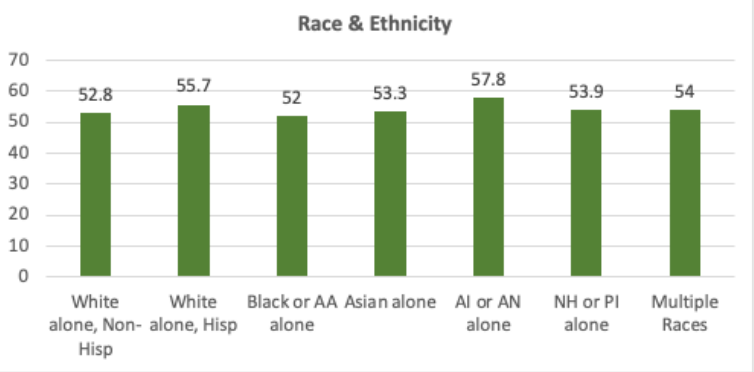


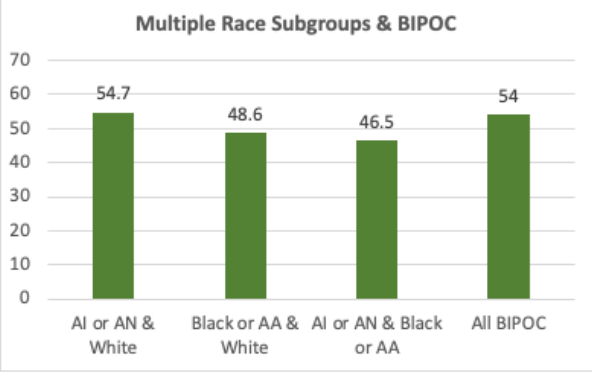


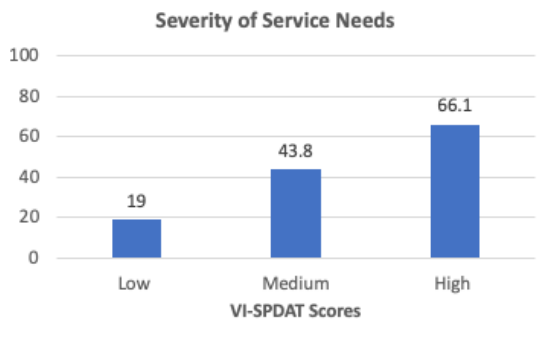
Subgroups: % without permanent stable housing for one year or more

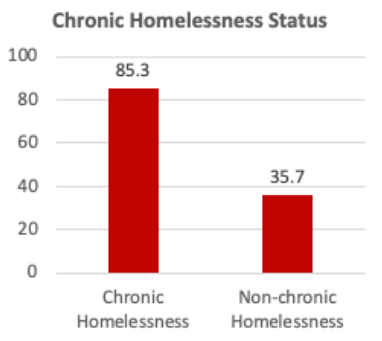


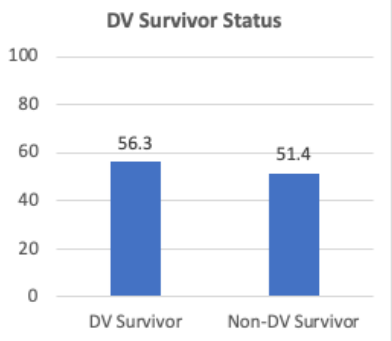






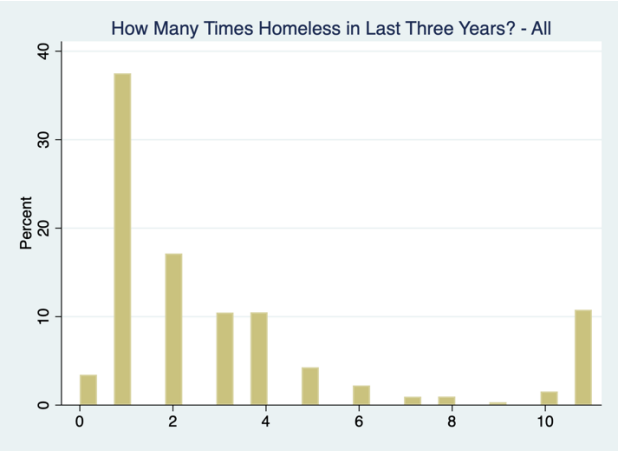


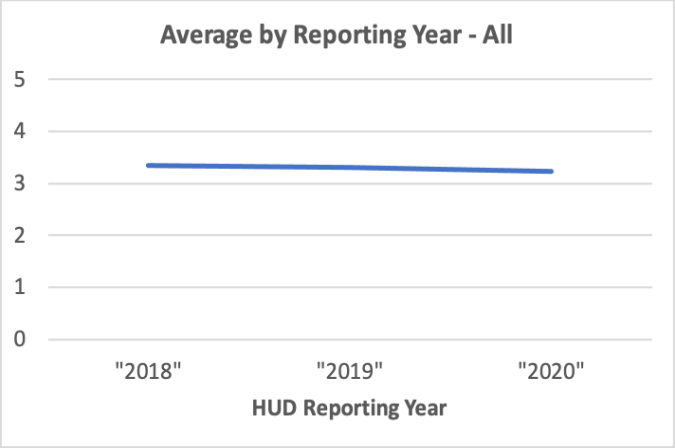




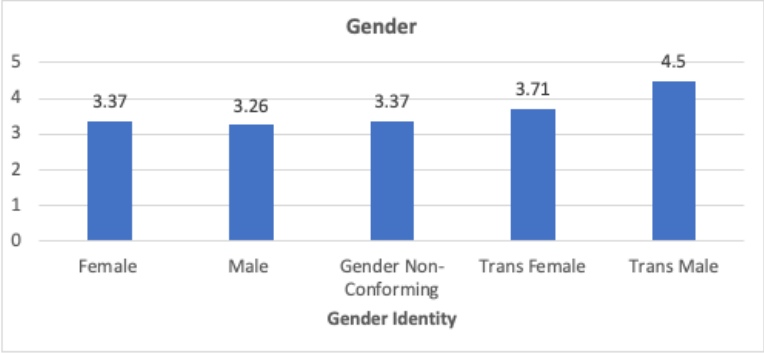
Question #3: In the last three years, how many times have you been homeless?

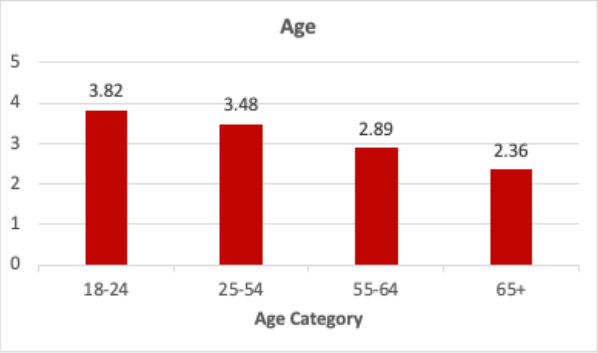
All: Average for 12,877 unique individual/HUD reporting year observations 2018-2020: **3.31**

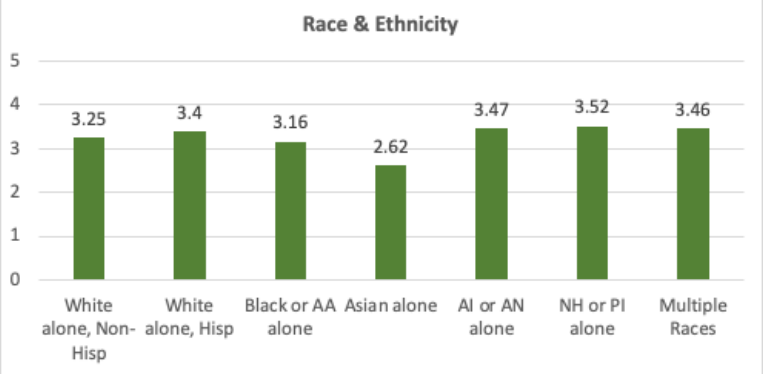


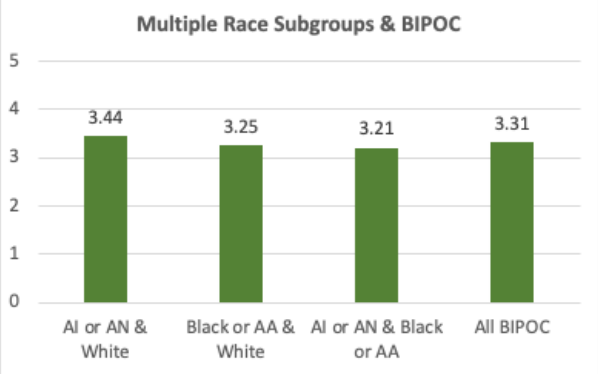


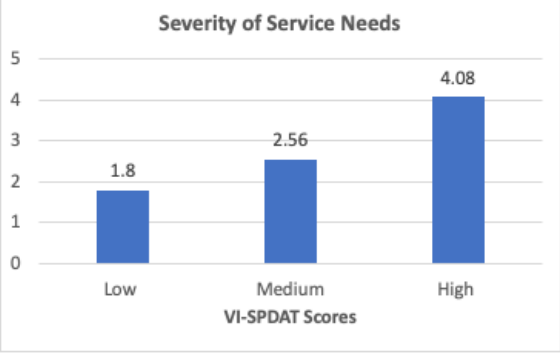
Subgroups: Average number of times homeless

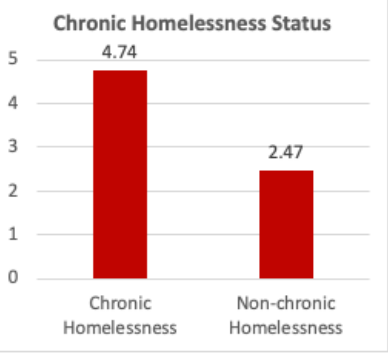


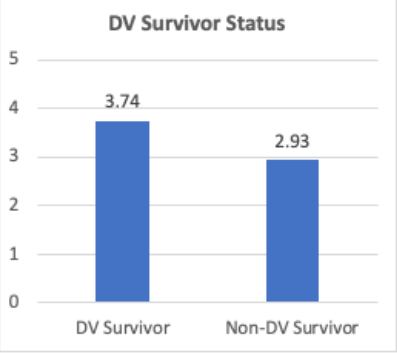






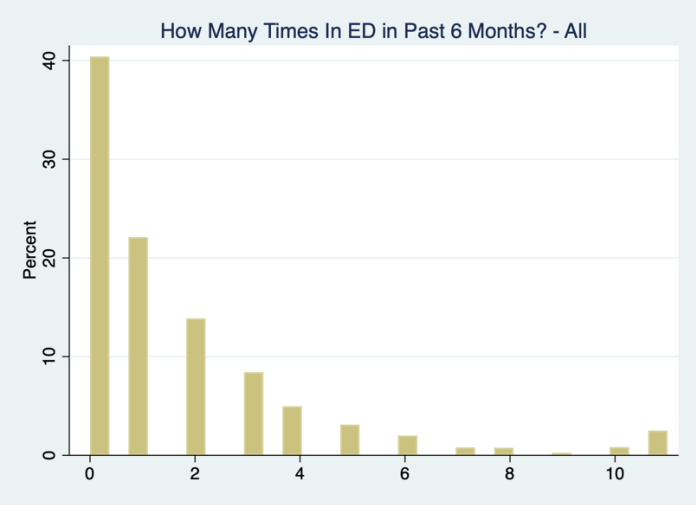


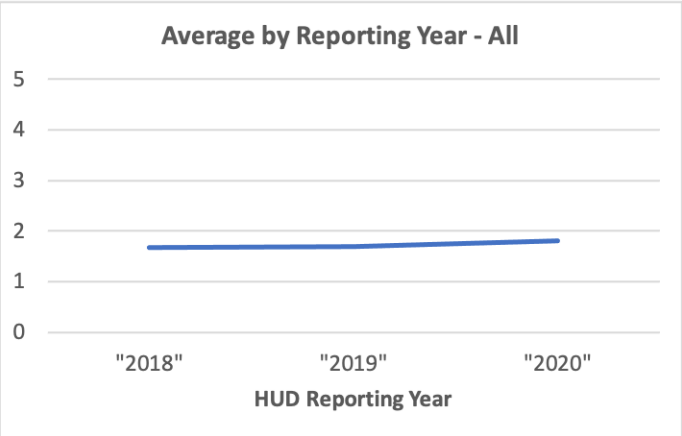




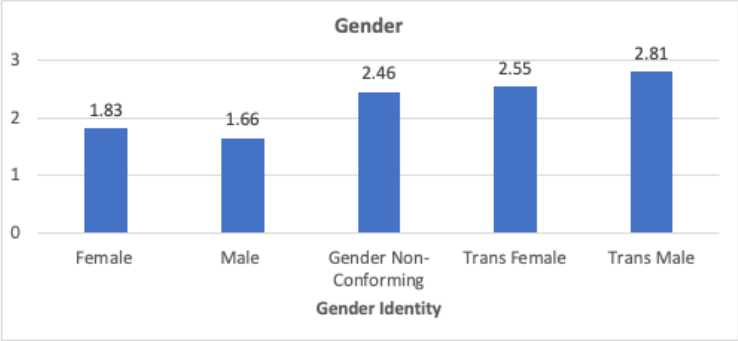
Question #4a: In the past six months how many times have you, received health care at an emergency department room?

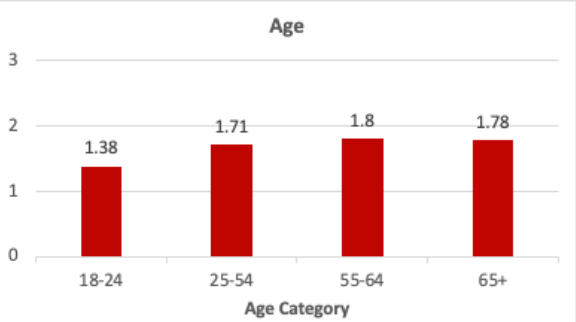
All: Average for 12,896 unique individual/HUD reporting year observations 2018-2020: **1.72**

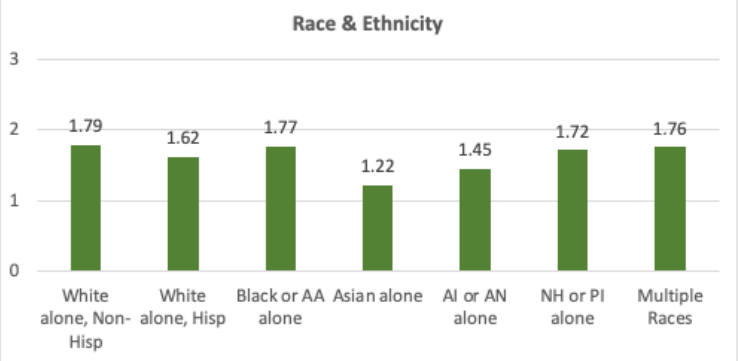


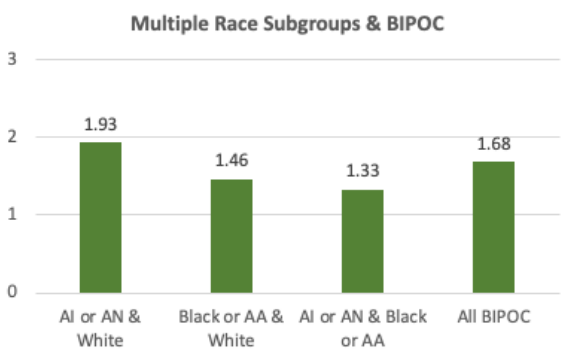


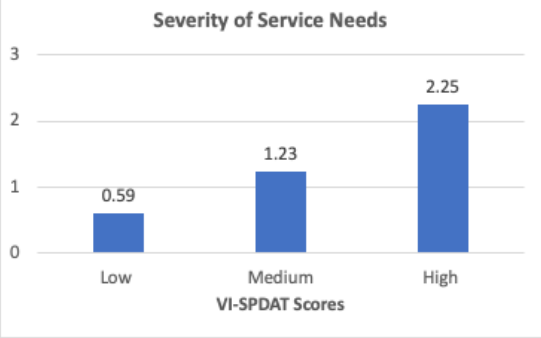
Subgroups: Average number of times received health care at an emergency department room

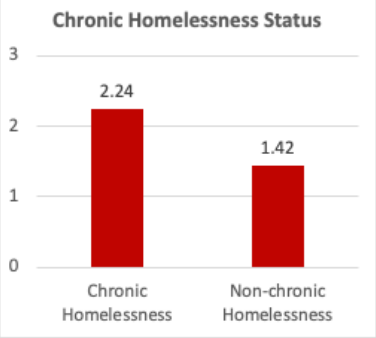


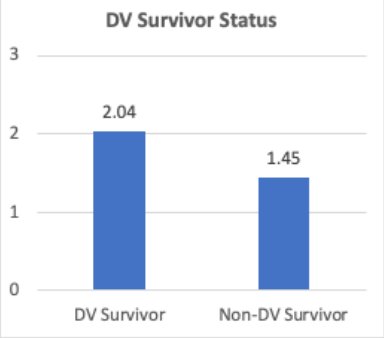






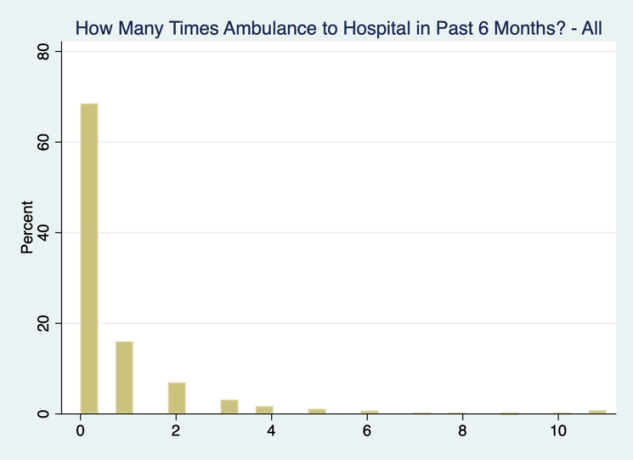


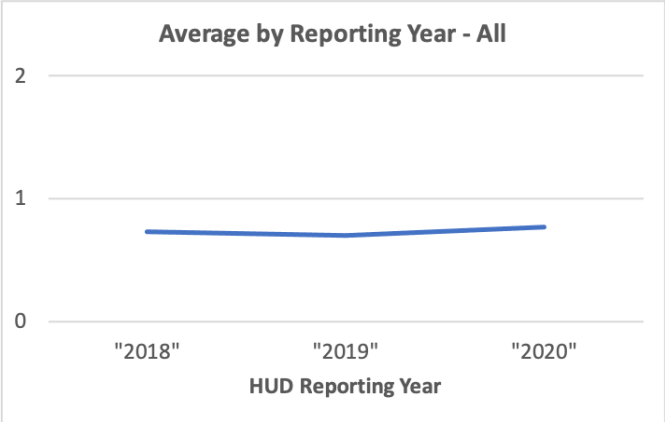




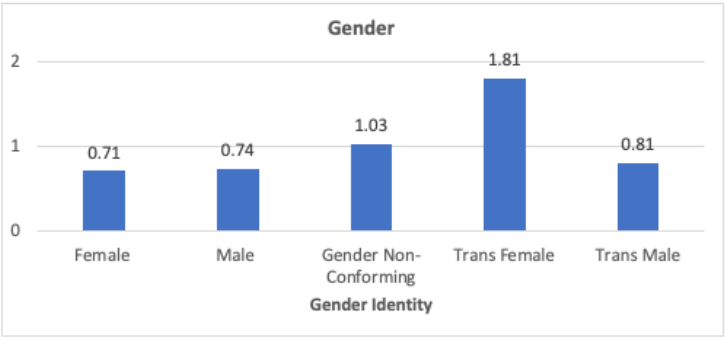
Question #4b: In the past six months how many times have you, taken an ambulance to the hospital?

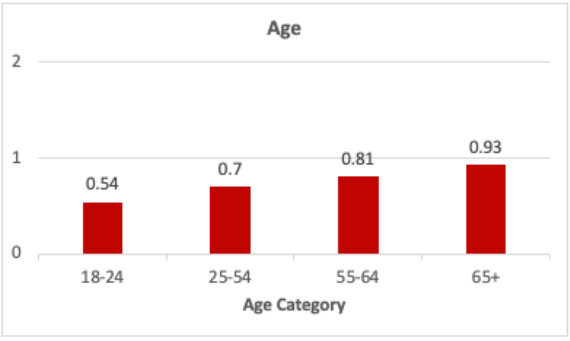
All: Average for 12,893 unique individual/HUD reporting year observations 2018-2020: **0.73**

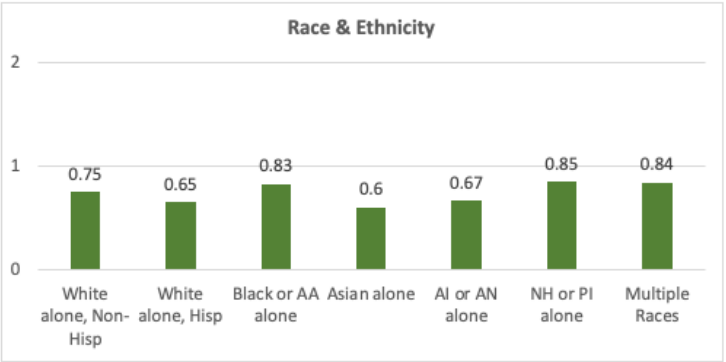


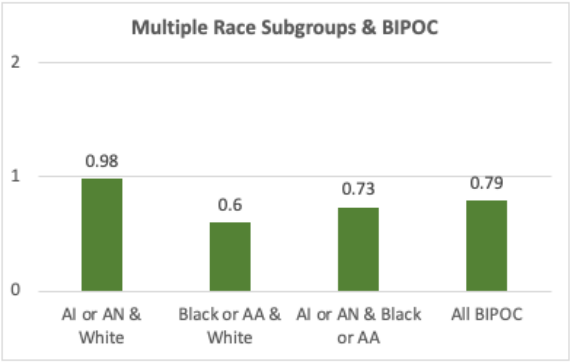


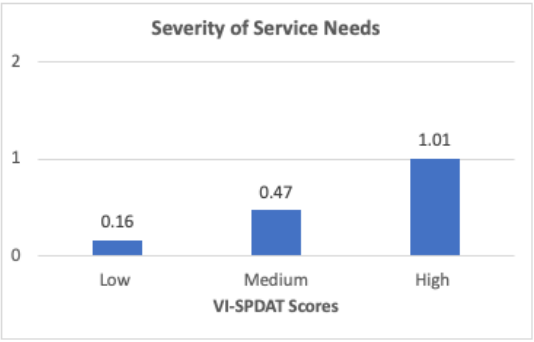
Subgroups: Average number of times taken an ambulance to the hospital

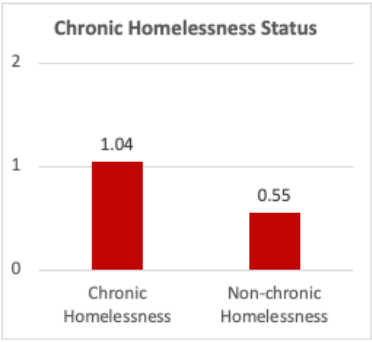


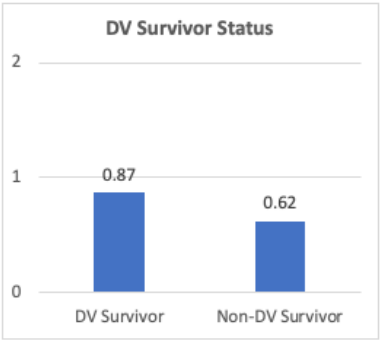






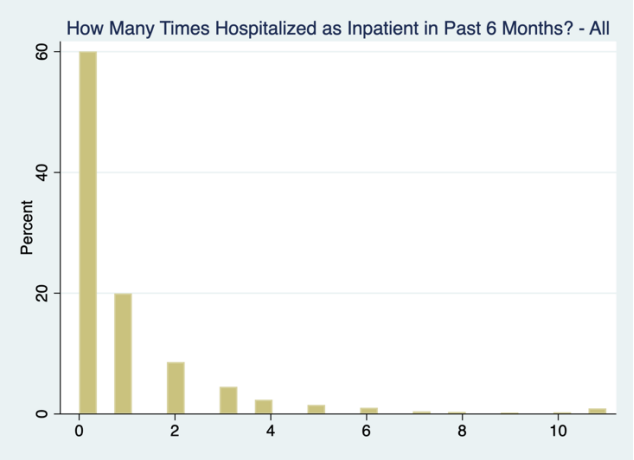


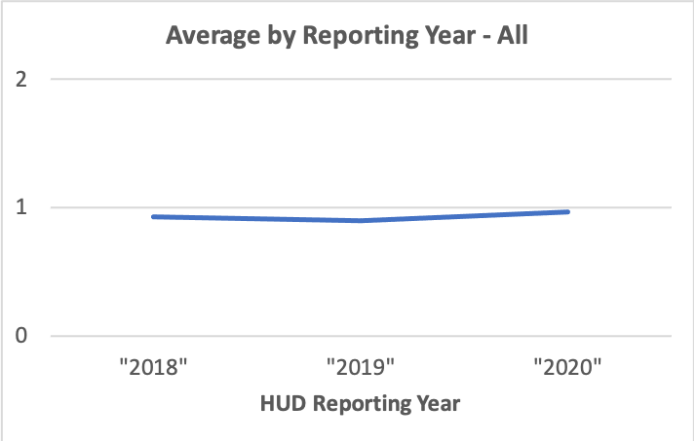




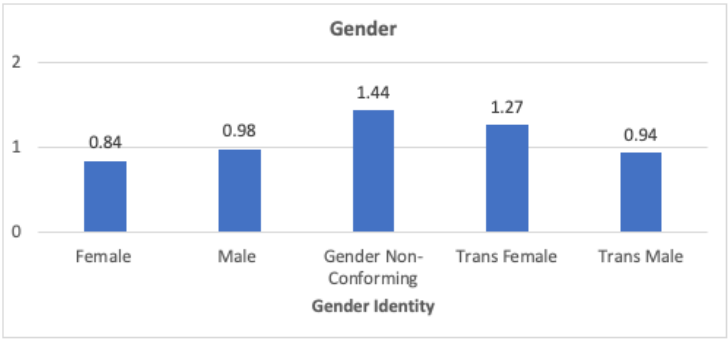
Question #4c: In the past six months how many times have you, been hospitalized as an inpatient?

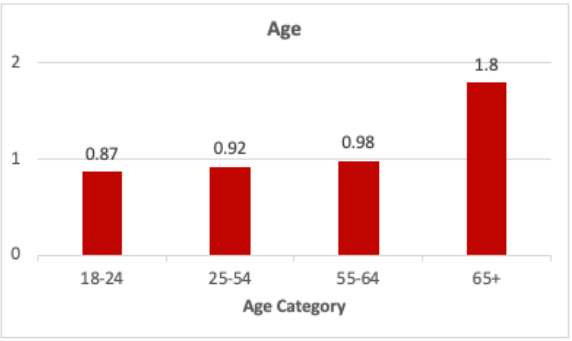
All: Average for 12,894 unique individual/HUD reporting year observations 2018-2020: **0.93**

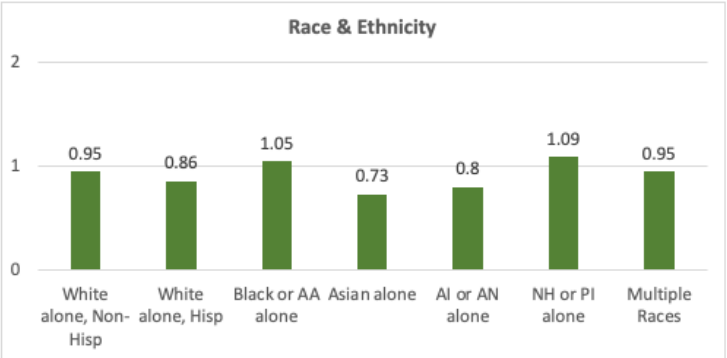


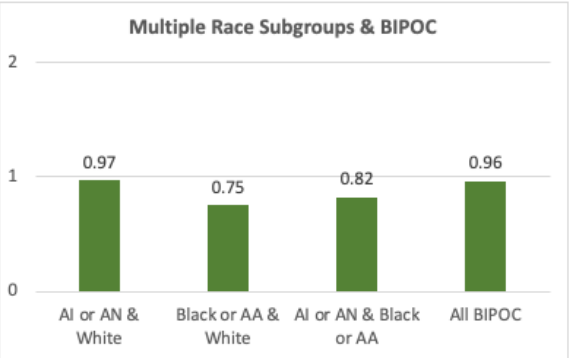


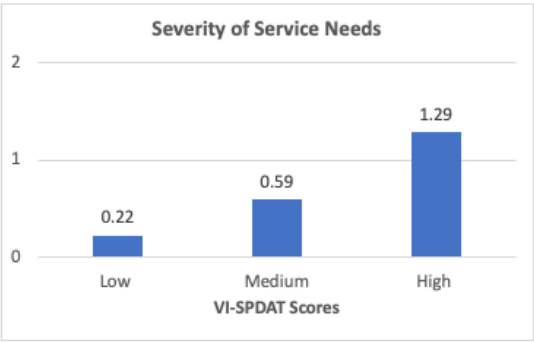
Subgroups: Average number of times hospitalized as an inpatient

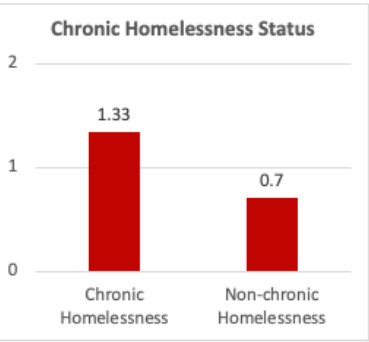


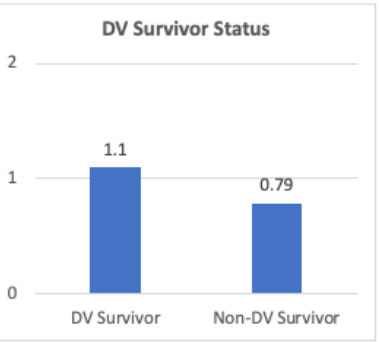






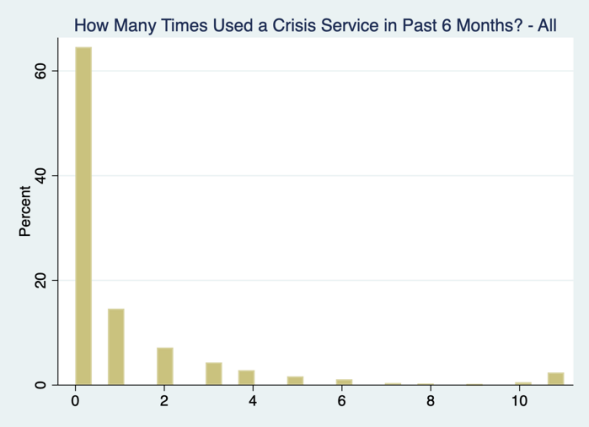


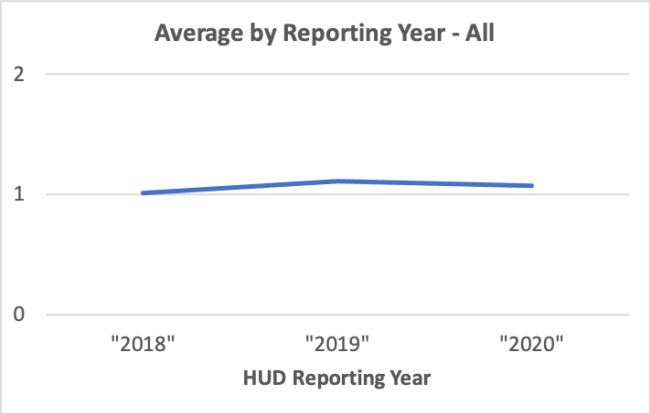




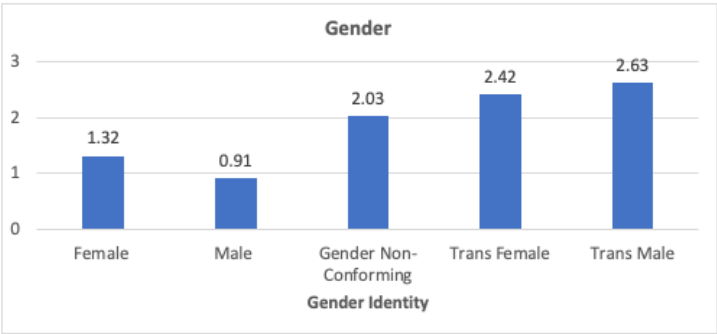
Question #4d: In the past six months how many times have you, used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?

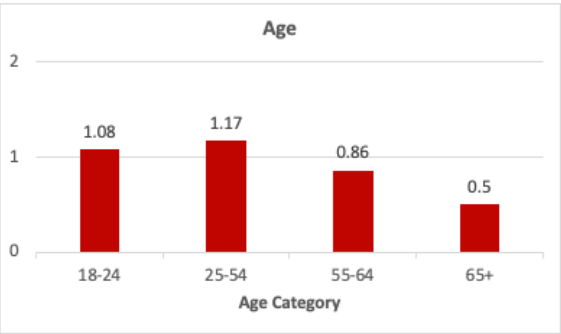
All: Average for 12,885 unique individual/HUD reporting year observations 2018-2020: **1.06**

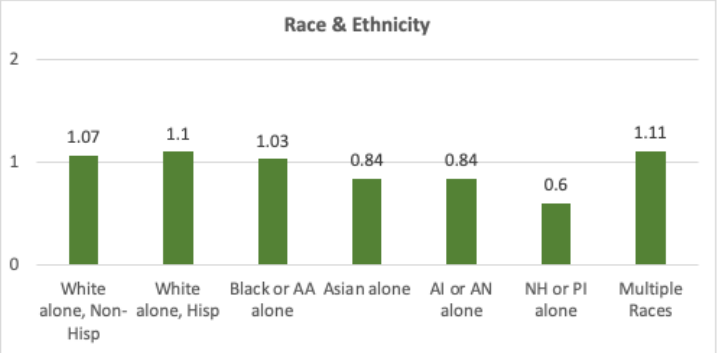


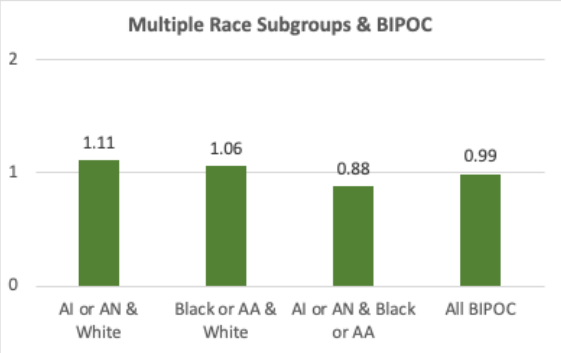


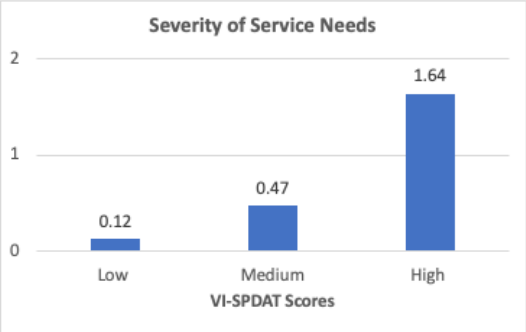
Subgroups: Average number of times used a crisis service

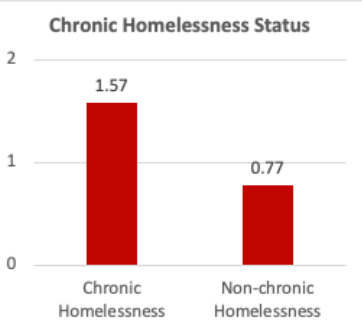


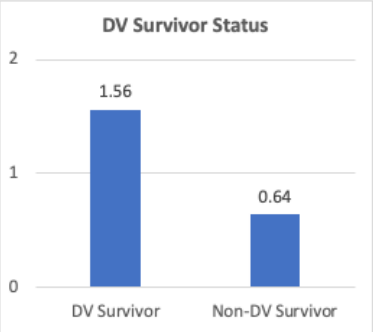






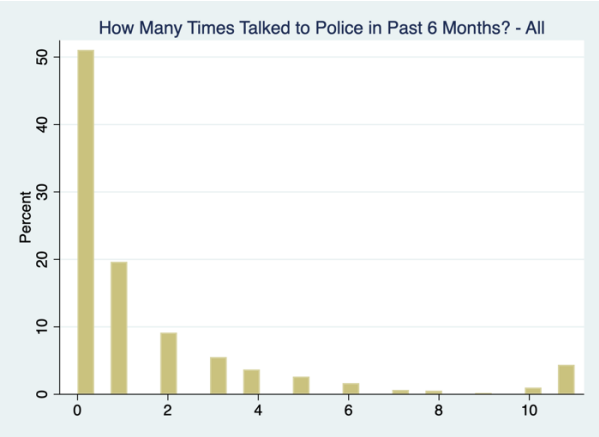


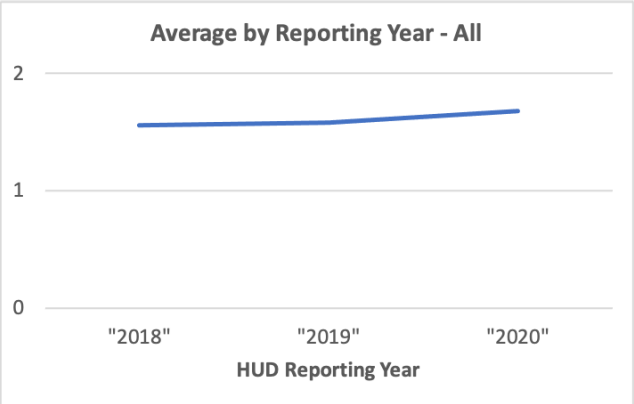




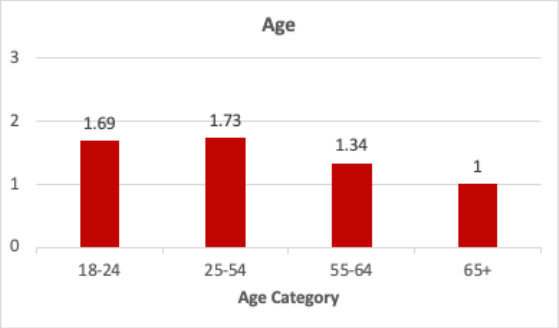
Question #4e: In the past six months how many times have you, talked to the police because you witnessed a crime, were the victim of a crime, or the alleged predator of a crime or because the police told you that you must move along?

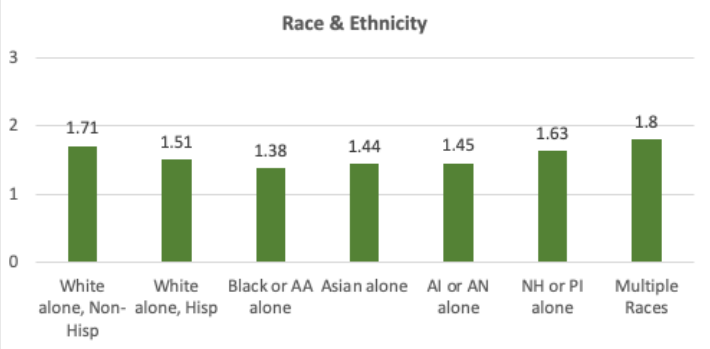
All: Average for 12,894 unique individual/HUD reporting year observations 2018-2020: **1.60**

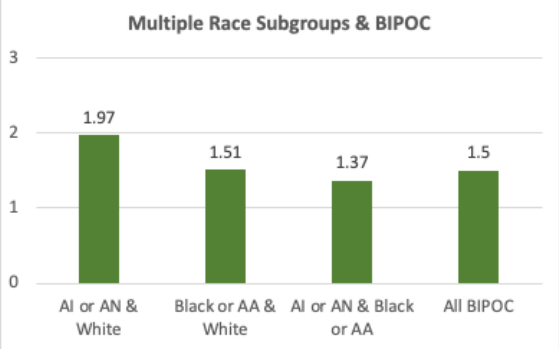


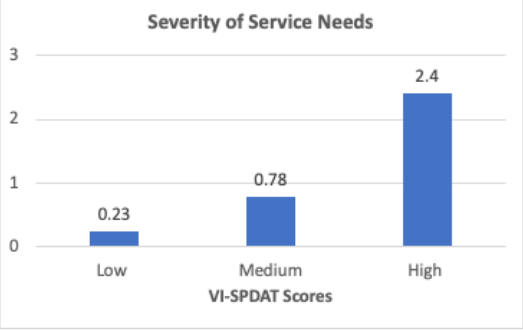


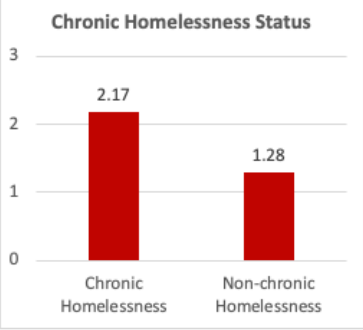
Subgroups: Average number of times talked to the police…

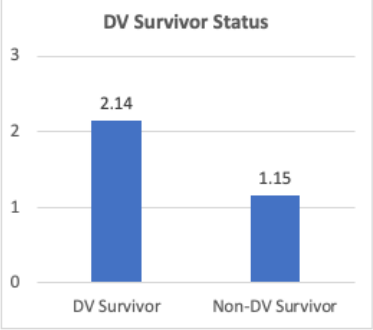






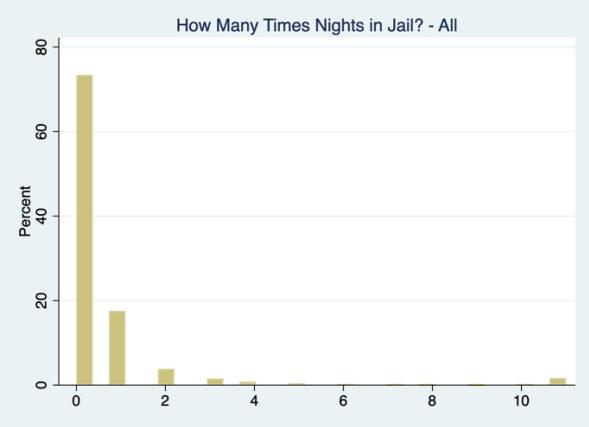


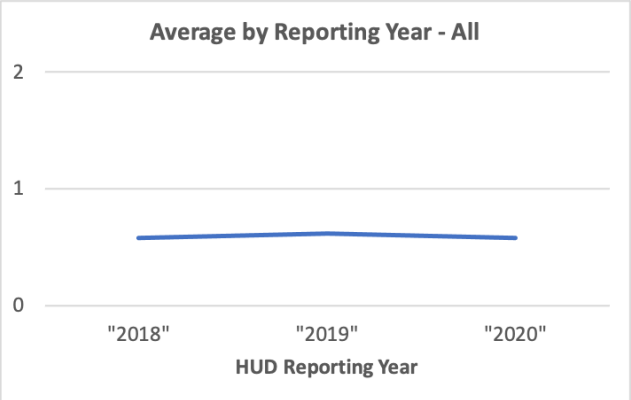




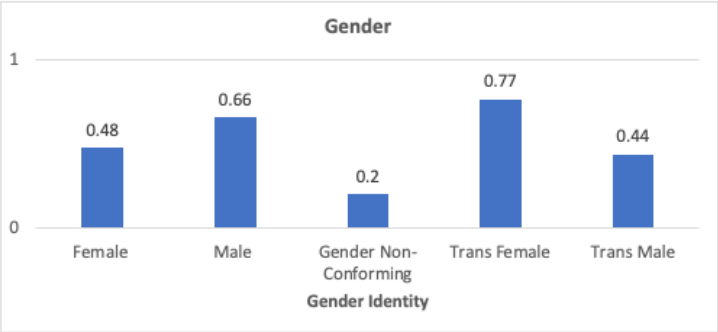
Question #4f: In the past six months how many times have you, stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like a drunk tank, a longer stay for a more serious offense, or anything in between?

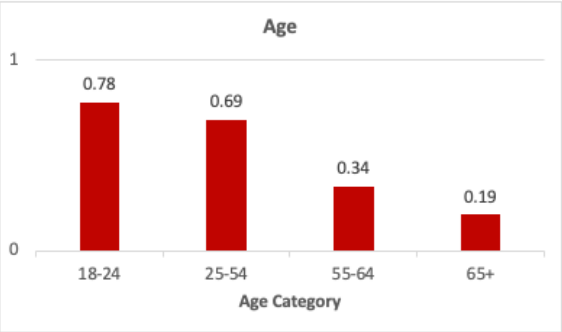
All: Average for 12,892 unique individual/HUD reporting year observations 2018-2020: **0.59**

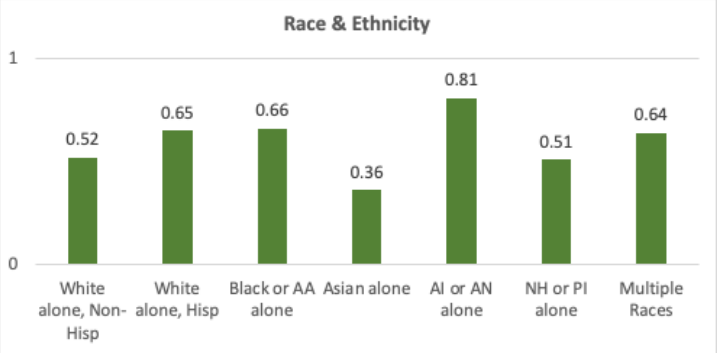


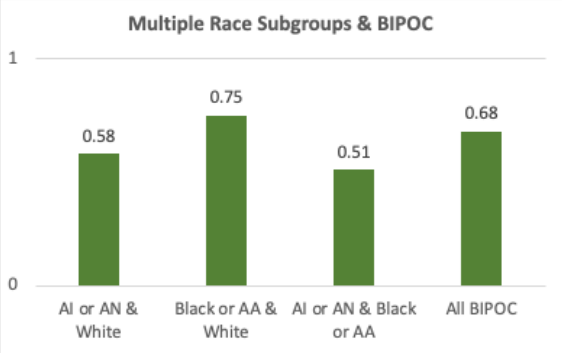


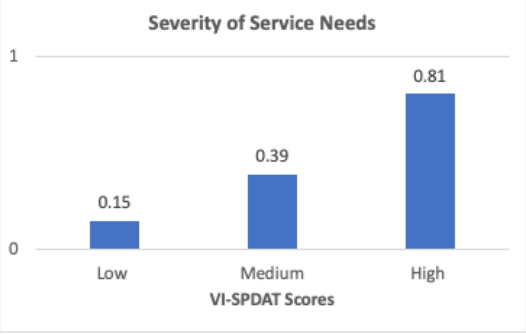
Subgroups: Average number one or more nights incarcerated

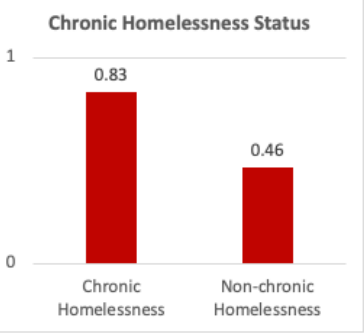


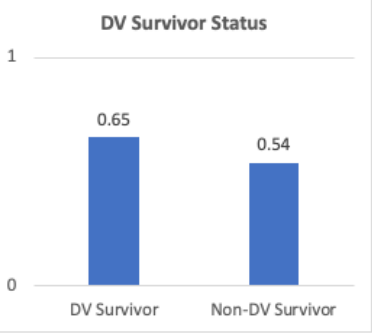






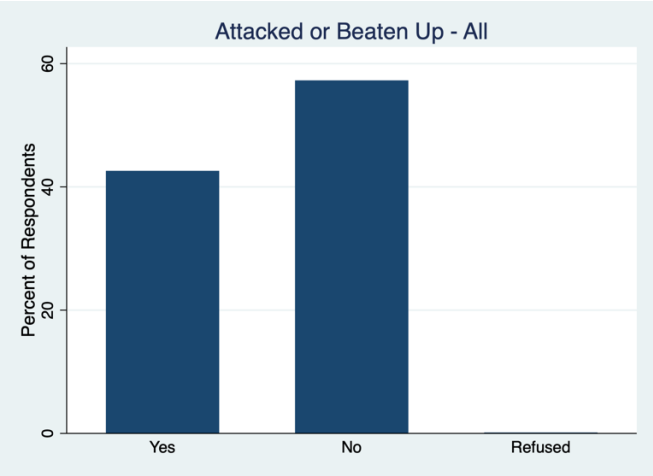


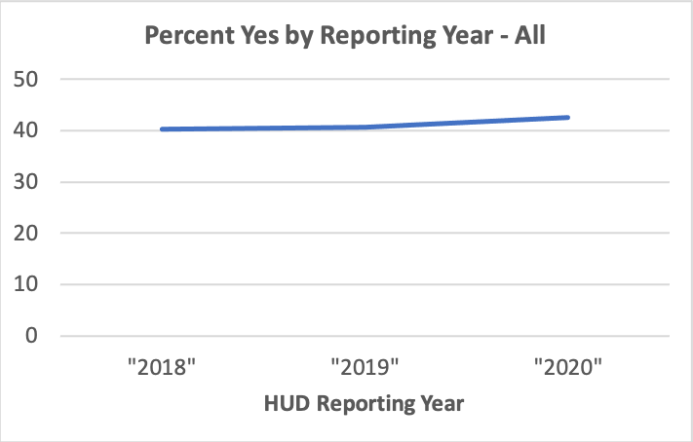




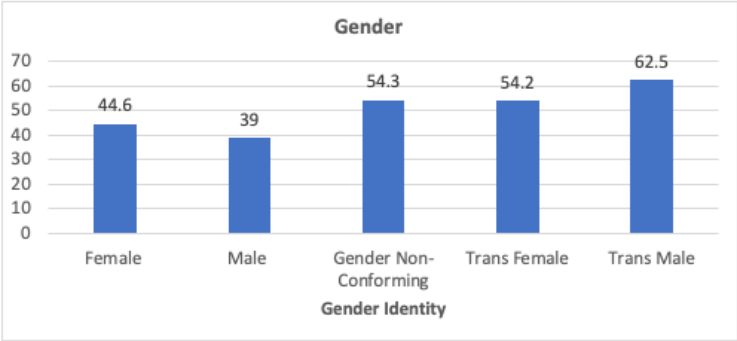
Question #5: Have you been attacked or beaten up since you've been homeless?

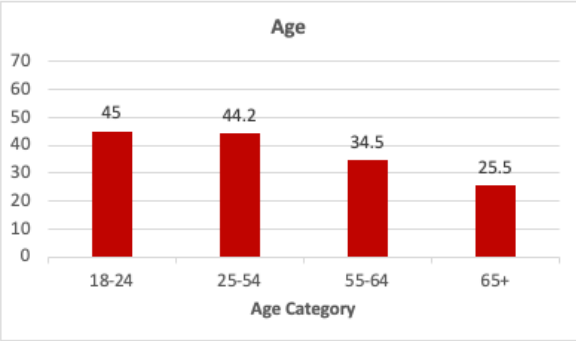
All: % Yes for 12,897 unique individual/HUD reporting year observations 2018-2020: **41.1%**

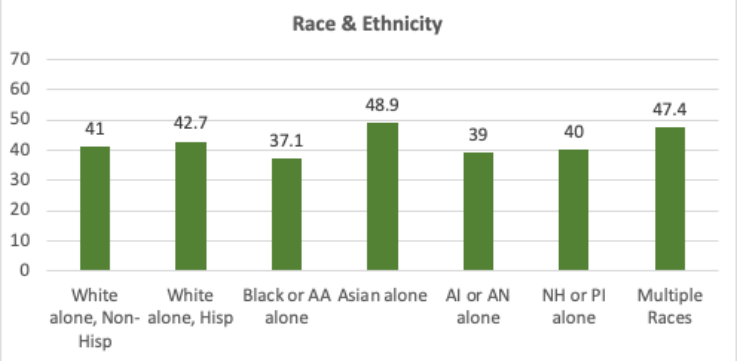


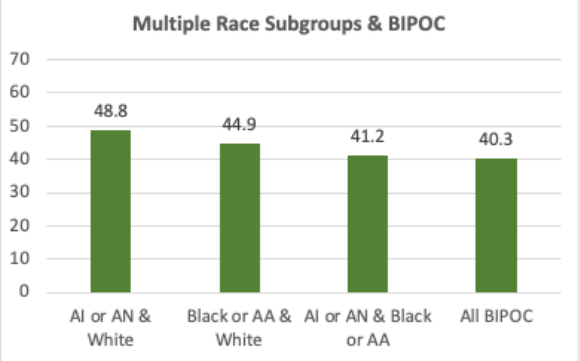


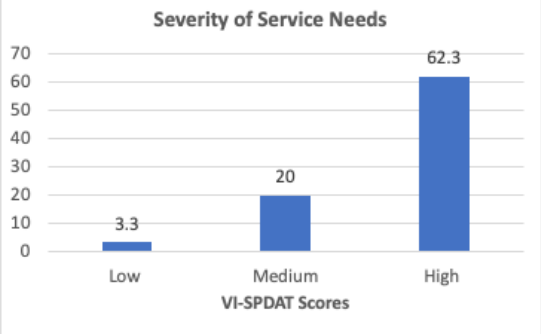
Subgroups: % Yes attacked or beaten up since you've been homeless

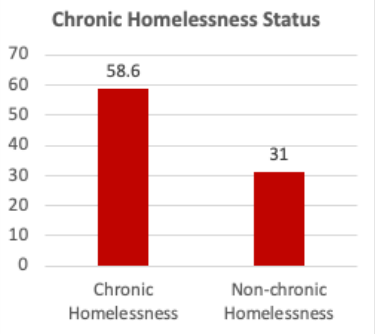


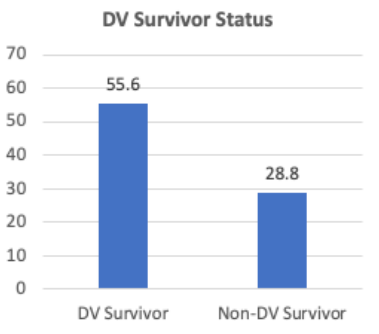






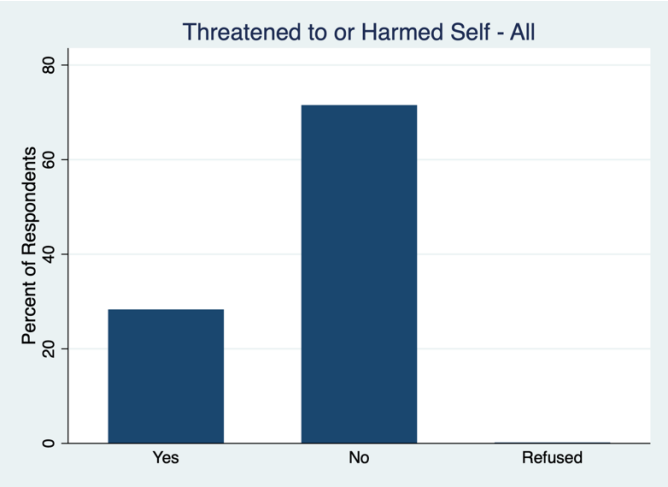


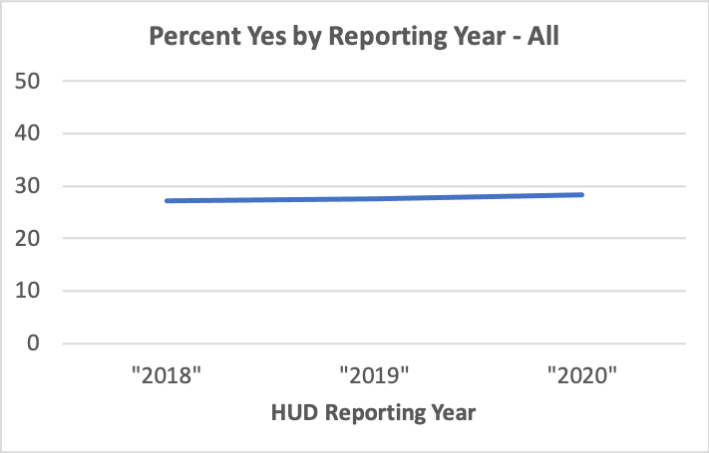




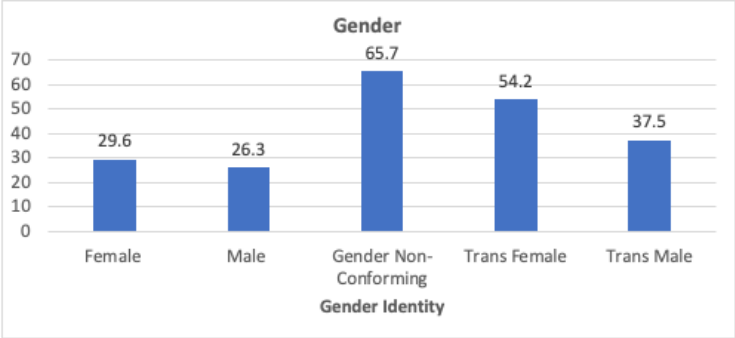
Question #6: Have you threatened to or tried to hard yourself or anyone else in the last year?

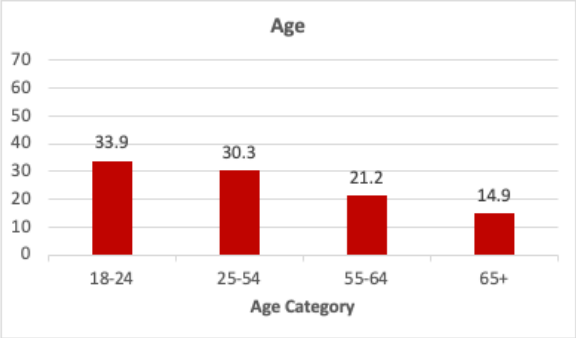
All: % Yes for 12,898 unique individual/HUD reporting year observations 2018-2020: **27.6%**

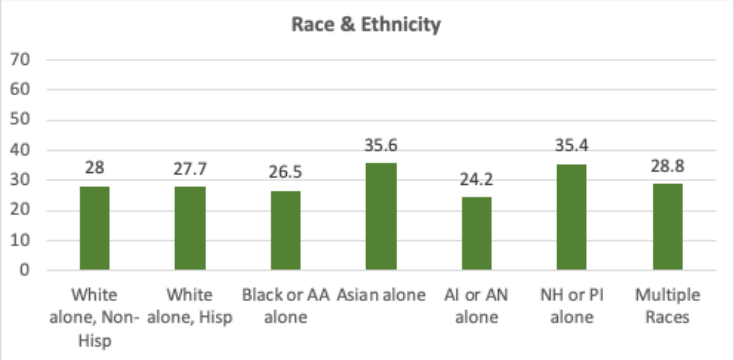


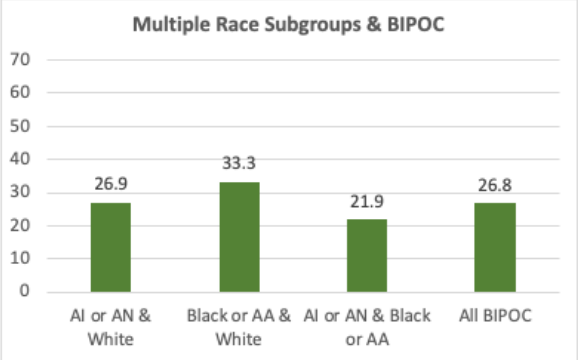


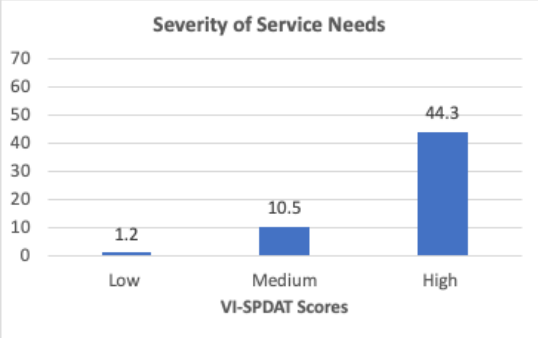
Subgroups: % Yes threatened to or harmed self in last year

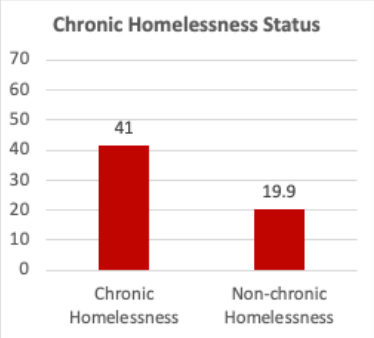


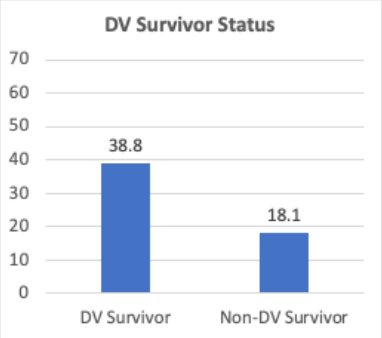






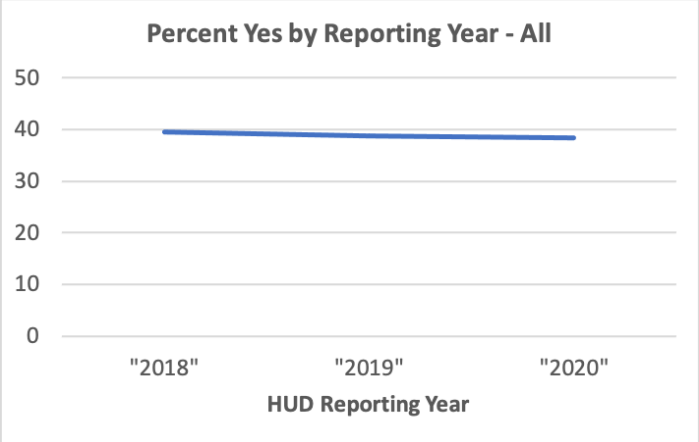




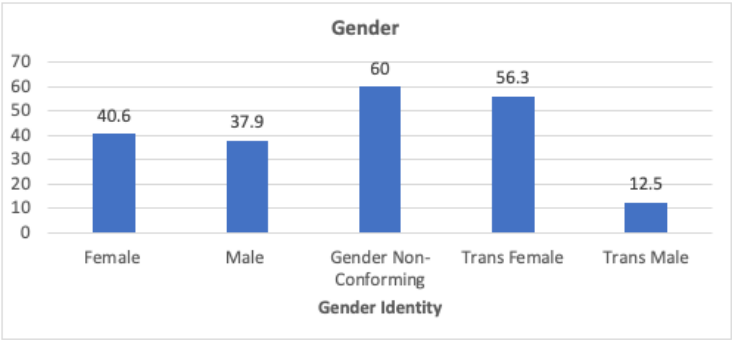


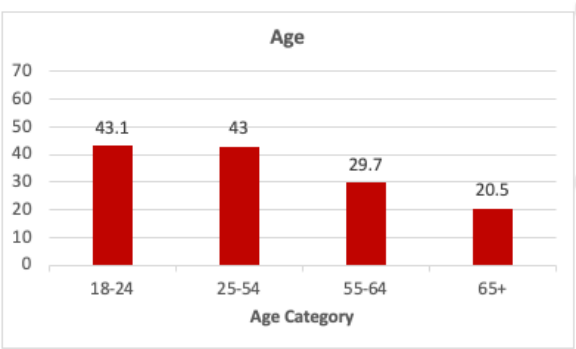
Question #7: Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?

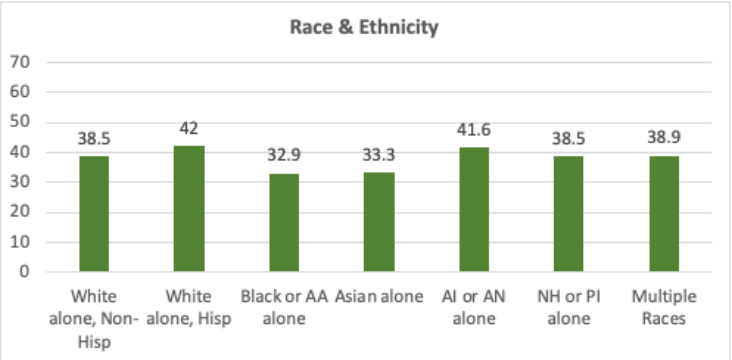
All: % Yes for 12,897 unique individual/HUD reporting year observations 2018-2020: **38.9%**

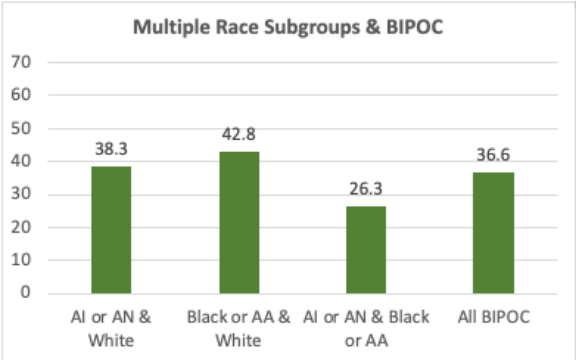


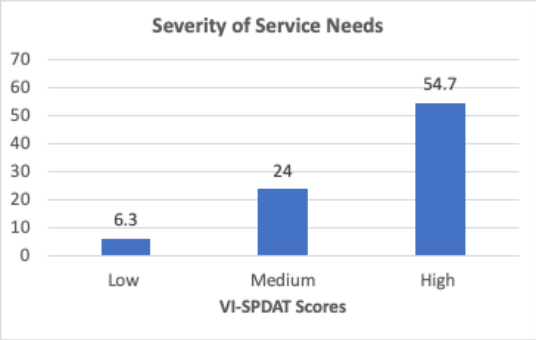
Subgroups: % Yes legal stuff going on that makes it difficult to rent

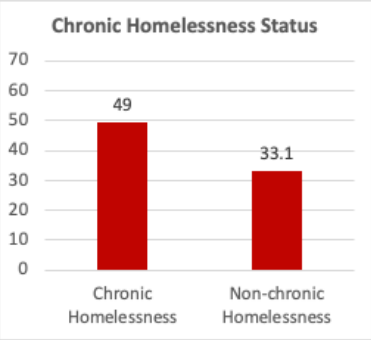


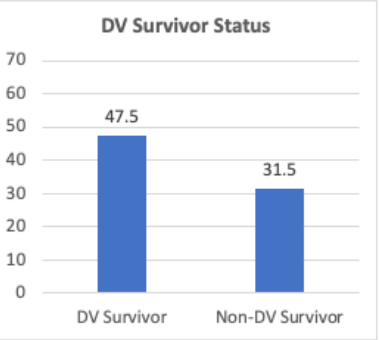






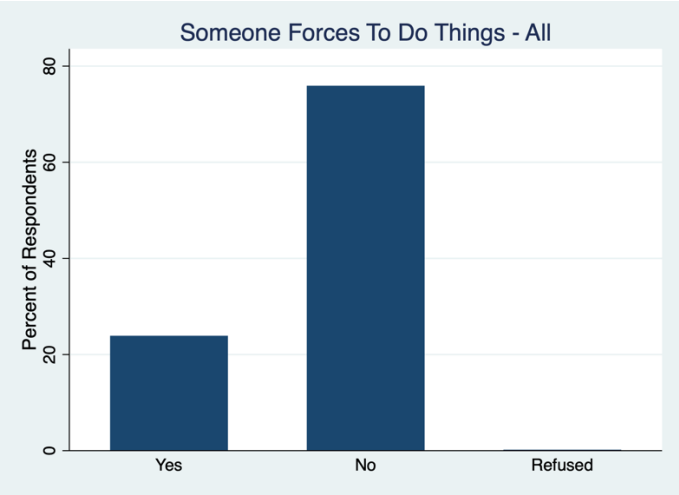


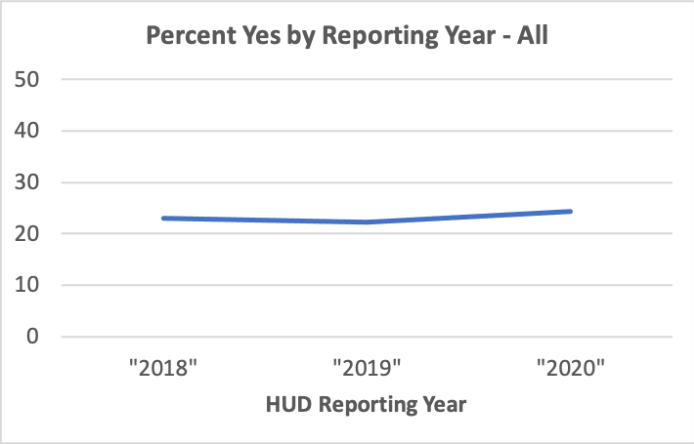




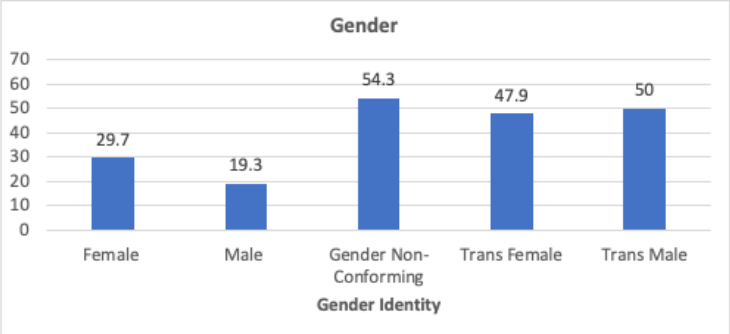
Question #8: Does anybody force or trick you to do things that you do not want to do?

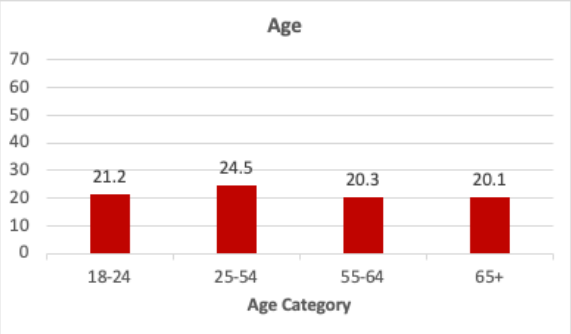
All: % Yes for 12,899 unique individual/HUD reporting year observations 2018-2020: **23.2%**

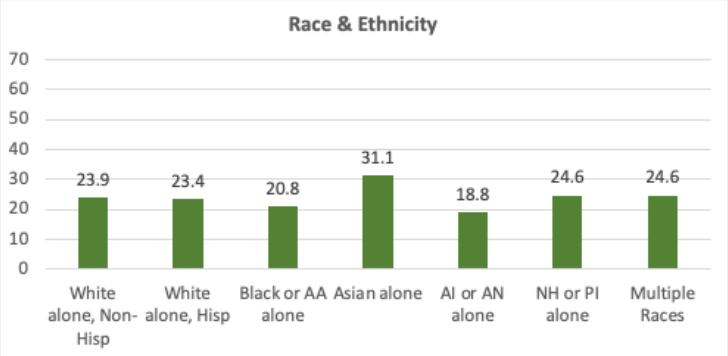


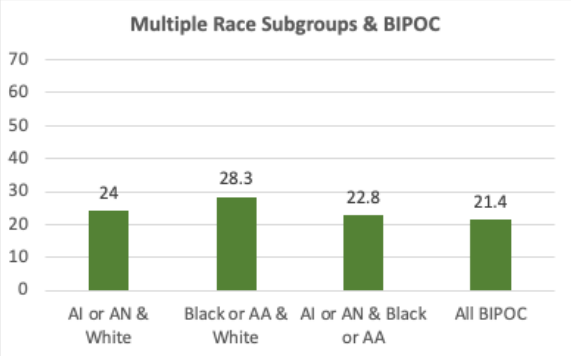


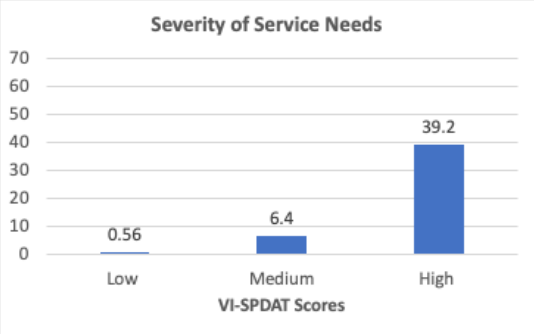
Subgroups: % Yes someone forces or tricks you

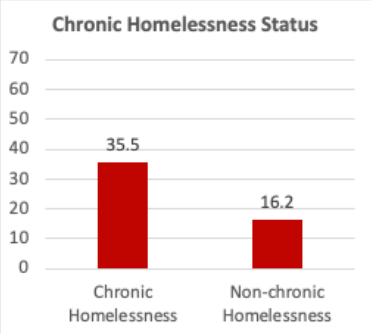


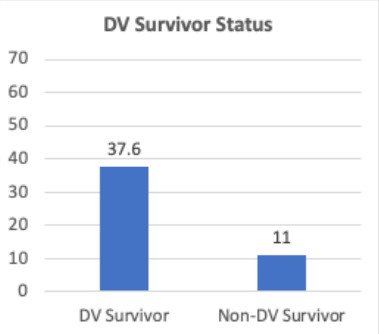






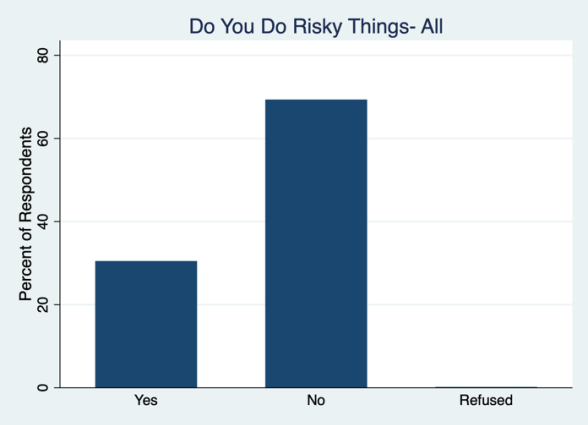


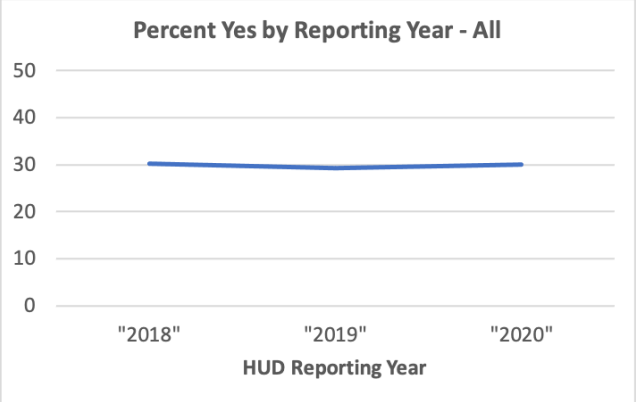




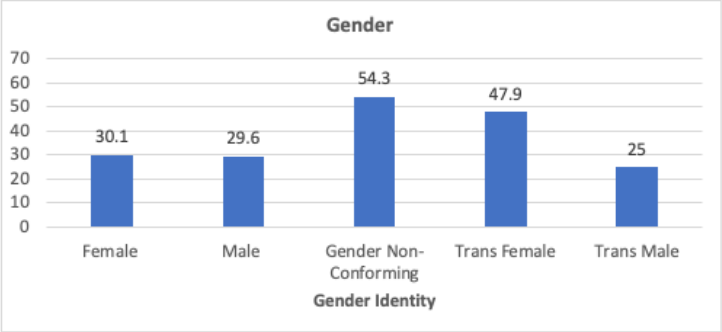
Question #9: Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't really know, share a needle, or anything like that?

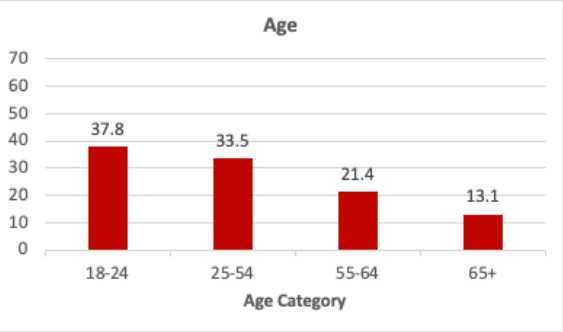
All: % Yes for 12,899 unique individual/HUD reporting year observations 2018-2020: **29.9%**

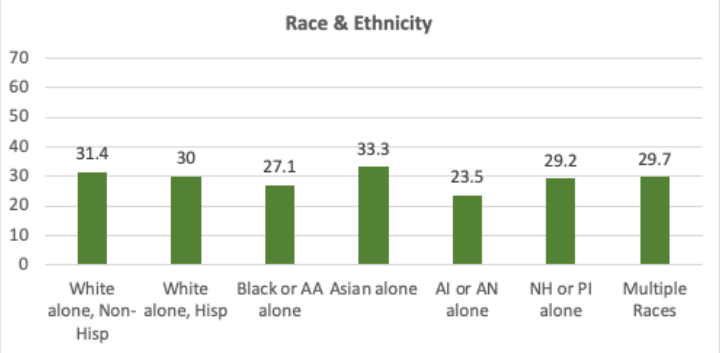


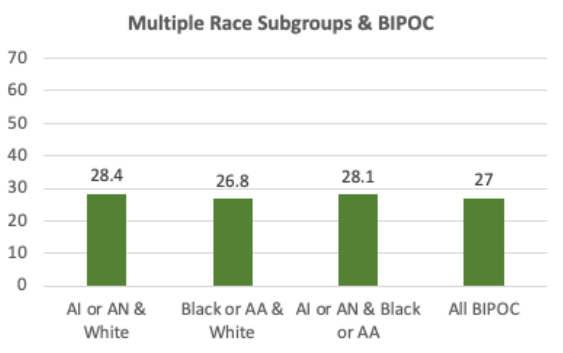


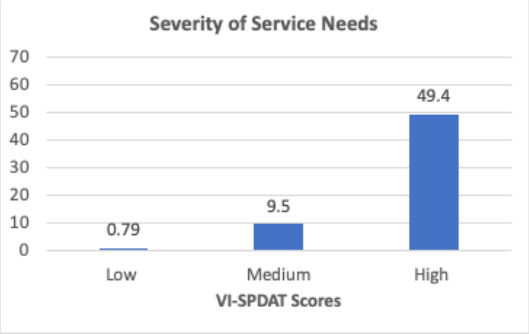
Subgroups: % Yes do things considered to be risky

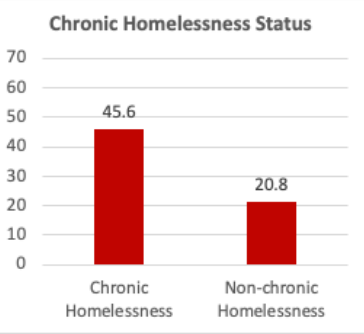


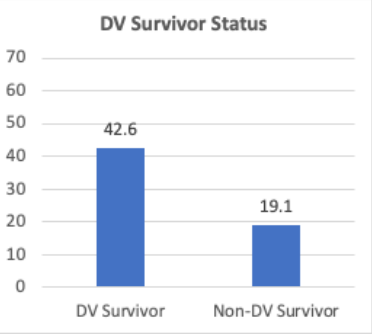






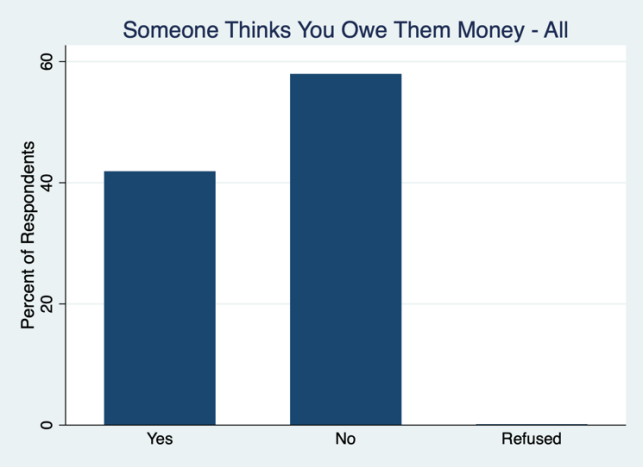


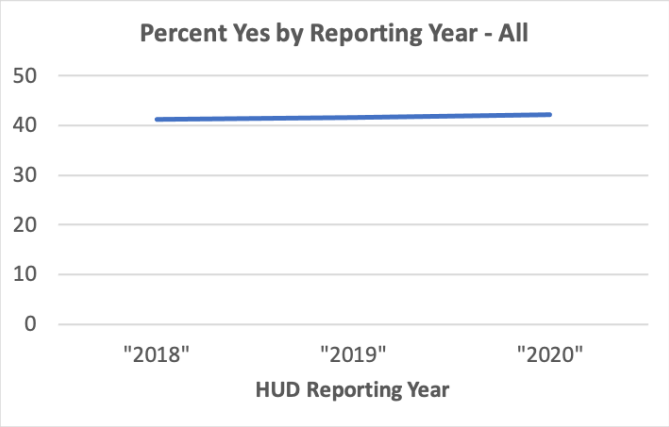




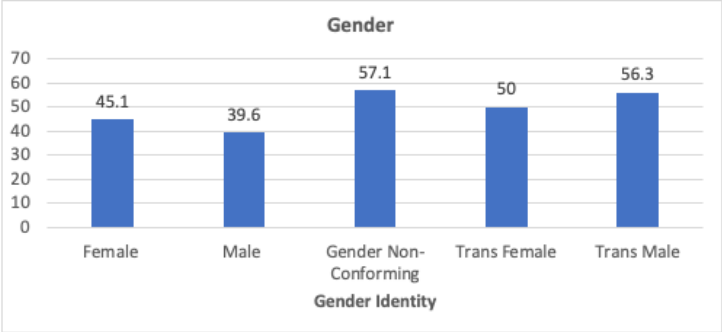
Question #10: Is there any person, past landlords, business, bookie, dealer, or government group like the IRS that thinks you owe them money?

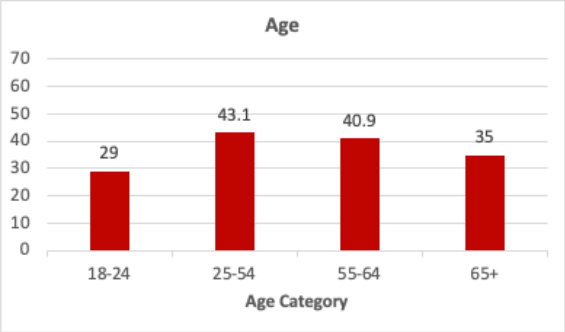
All: % Yes for 12,898 unique individual/HUD reporting year observations 2018-2020: **41.6%**

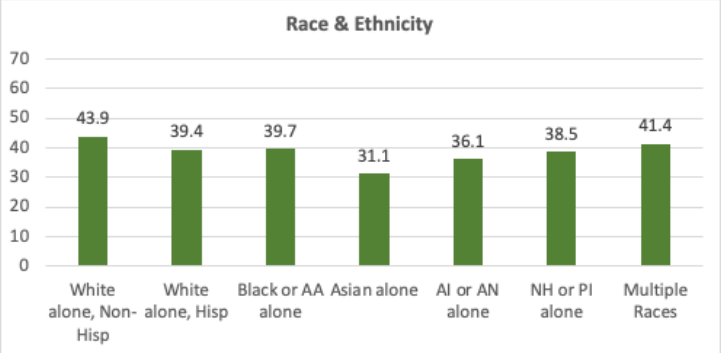


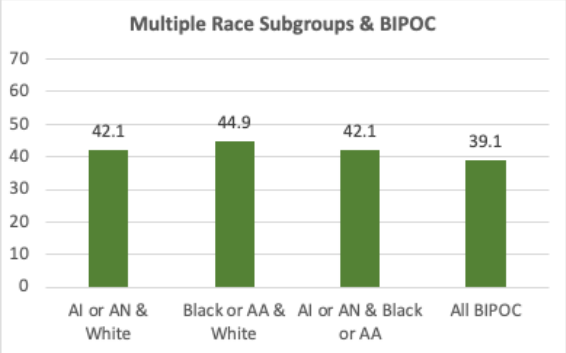


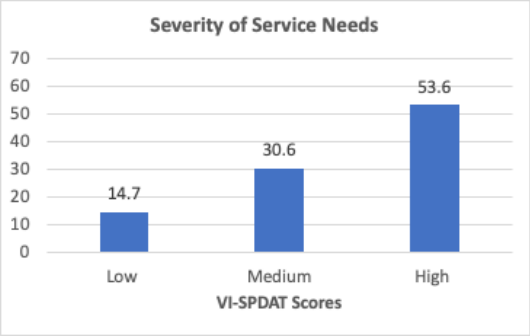
Subgroups: % Yes someone thinks I own them money

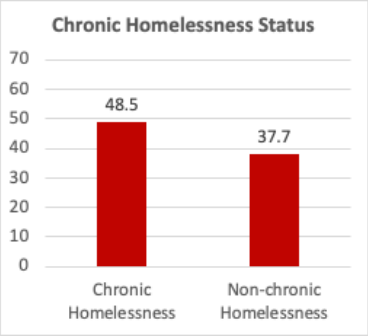


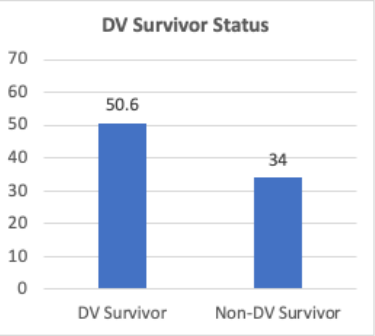






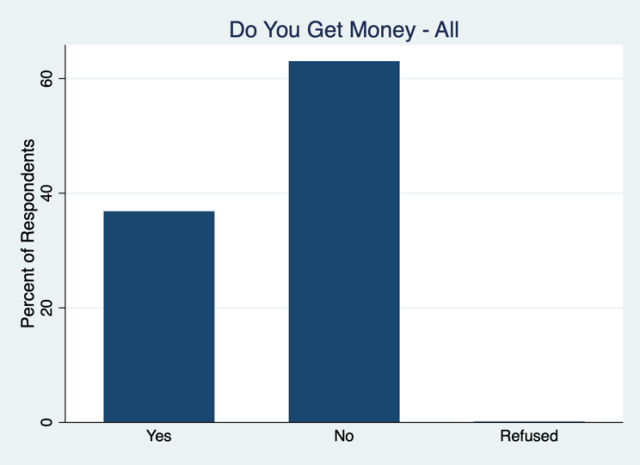


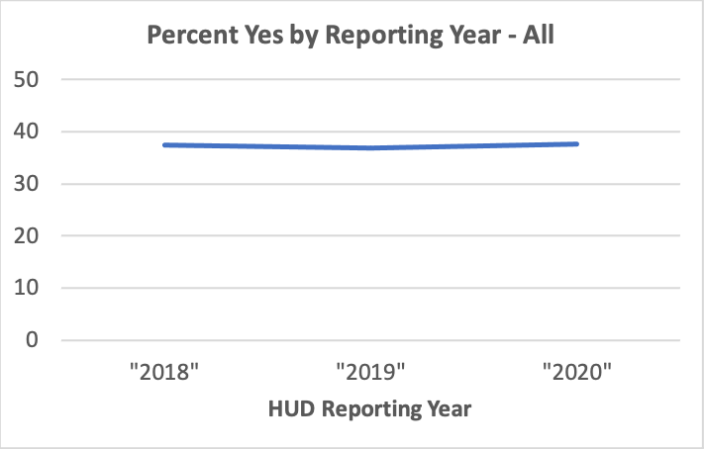




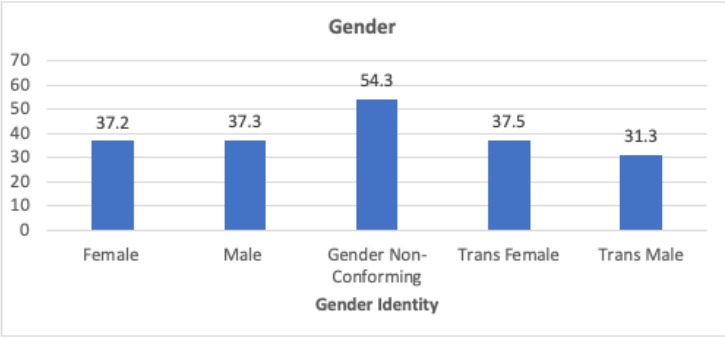
Question #11: Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?

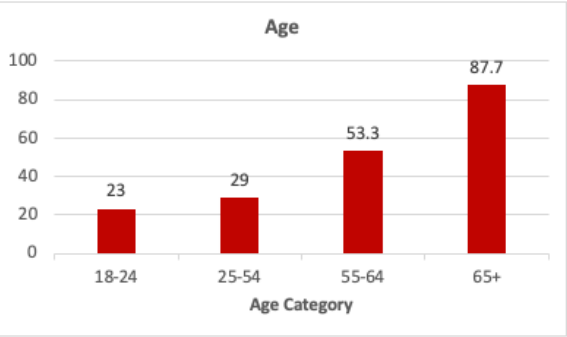
All: % Yes for 12,898 unique individual/HUD reporting year observations 2018-2020: **37.3%**

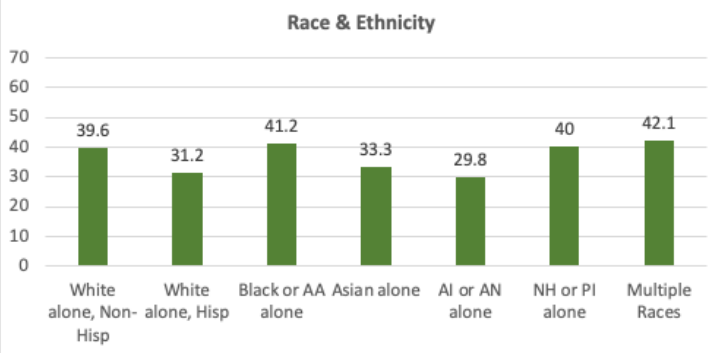


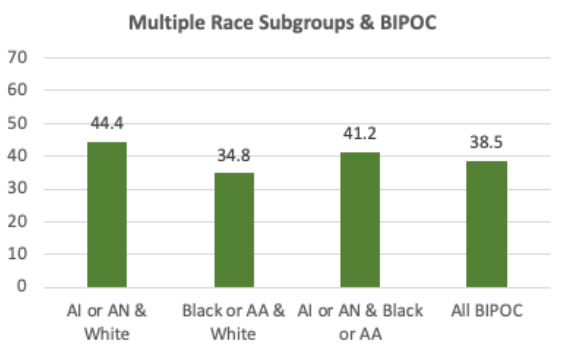


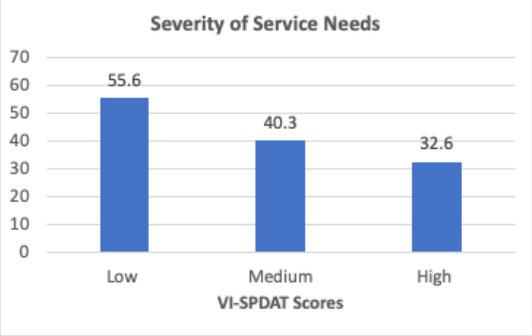
Subgroups: % Yes get any money…

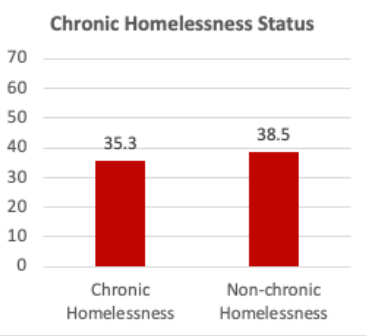


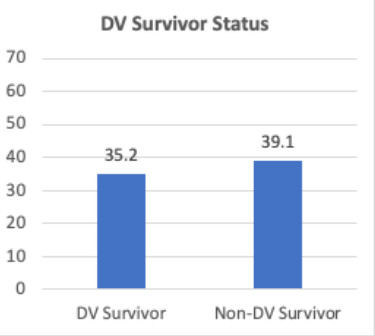






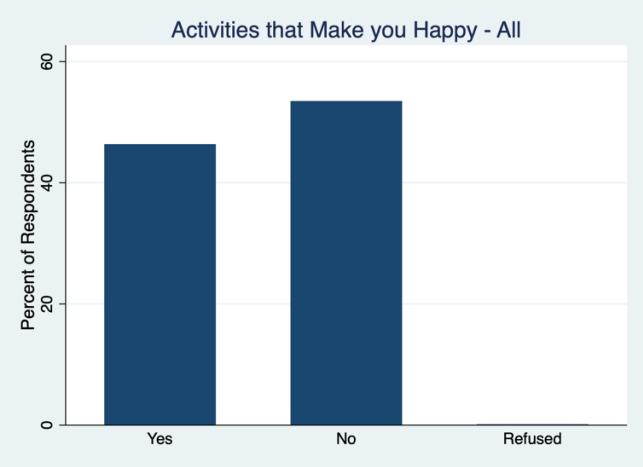


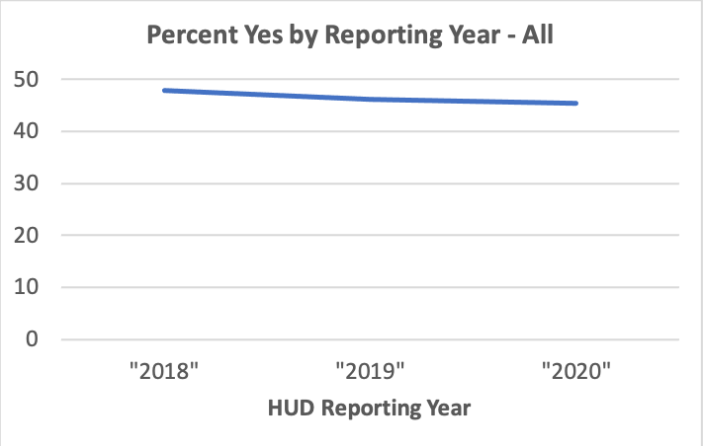




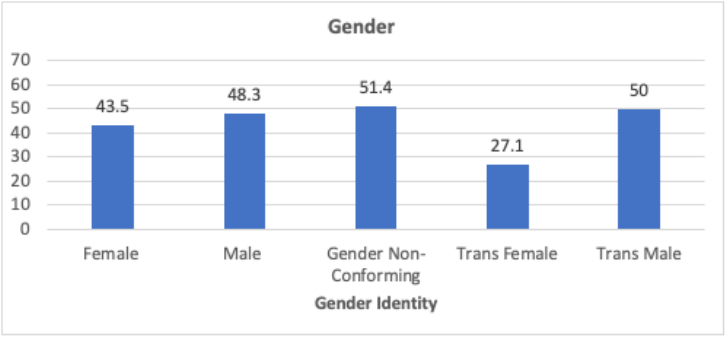
Question #12: Do you have planned activities each day other than just surviving, that make you feel happy and fulfilled?

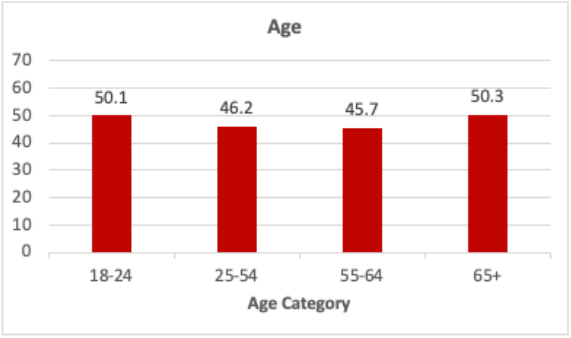
All: % Yes for 12,899 unique individual/HUD reporting year observations 2018-2020: **46.5%**

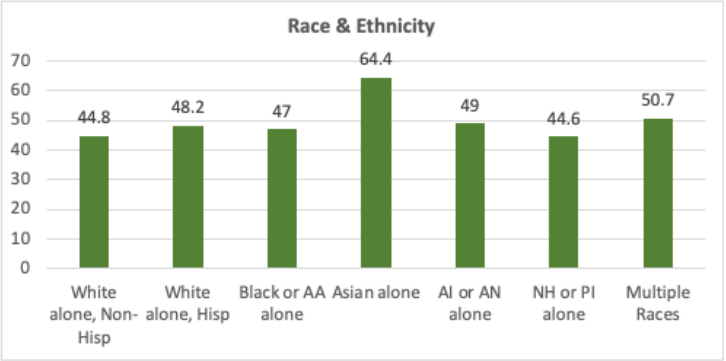


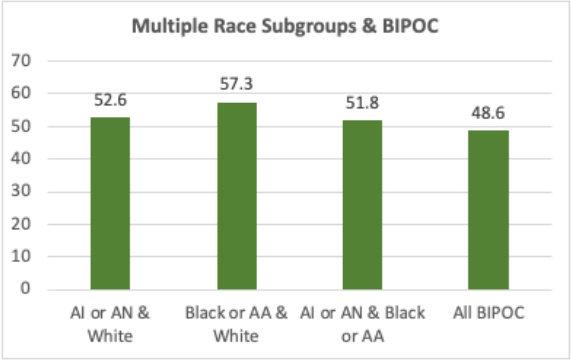


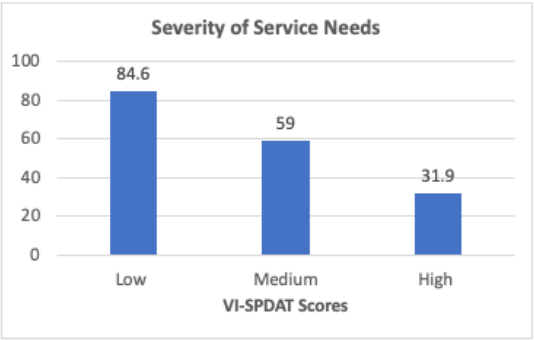
Subgroups: % Yes have planned activities that make you feel happy and fulfilled

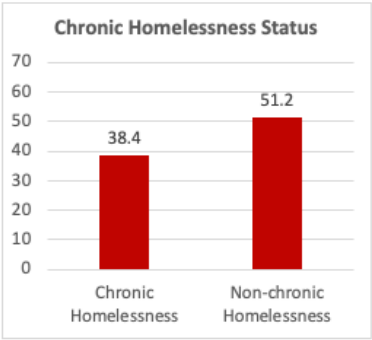


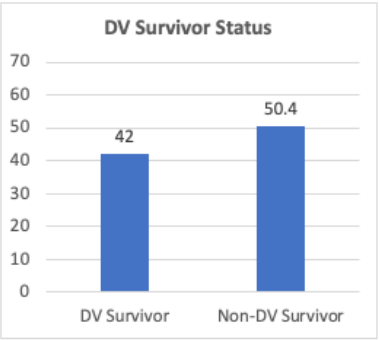






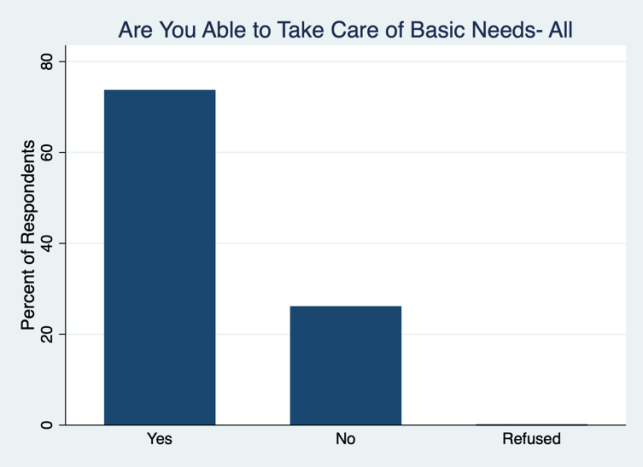


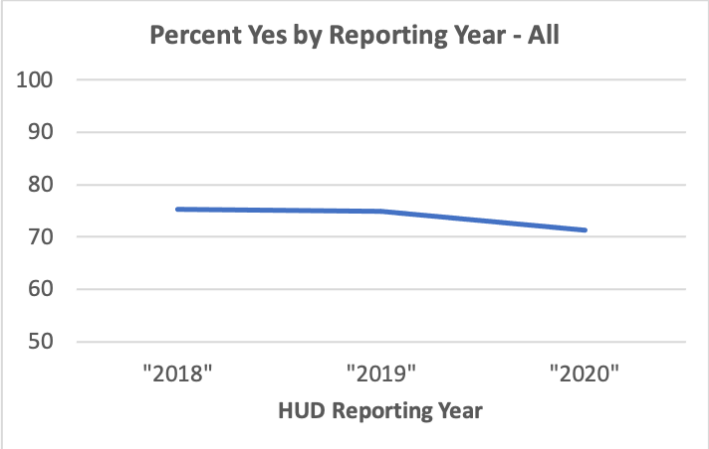




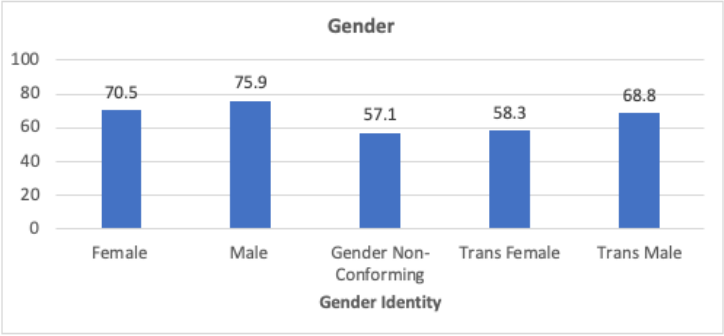
Question #13: Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?

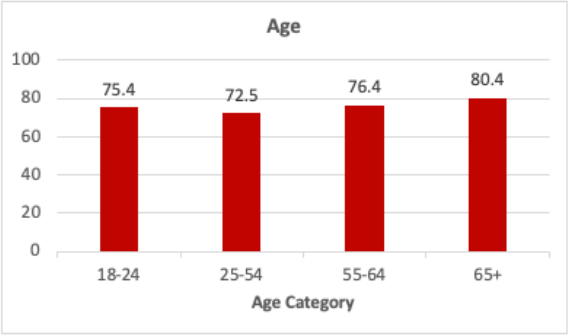
All: % Yes for 12,895 unique individual/HUD reporting year observations 2018-2020: **73.9%**

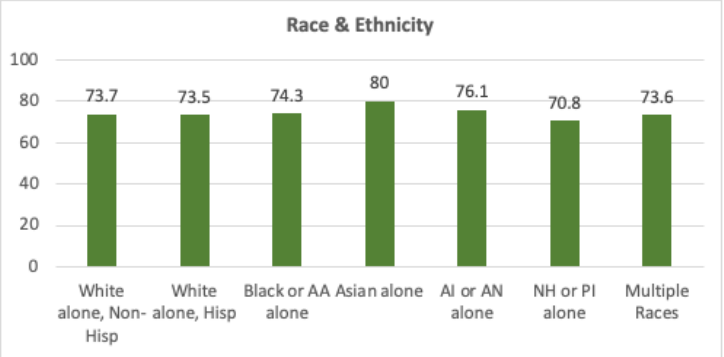


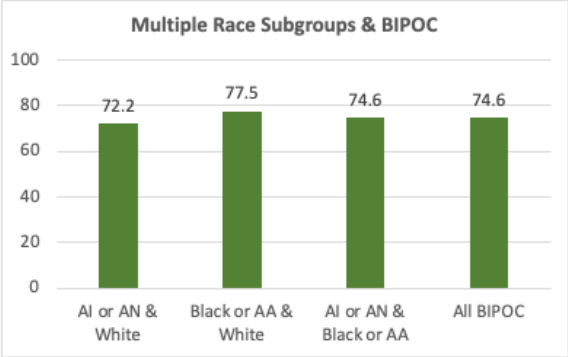


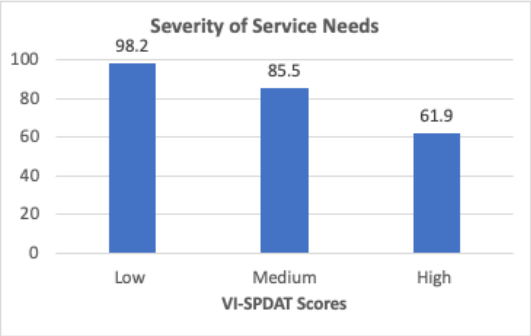
Subgroups: % Yes able to take care of basic needs

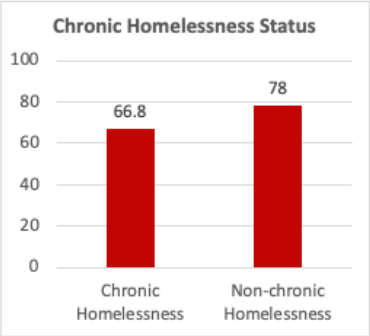


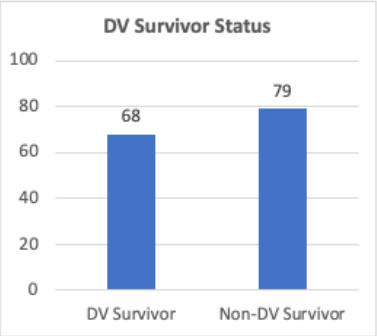






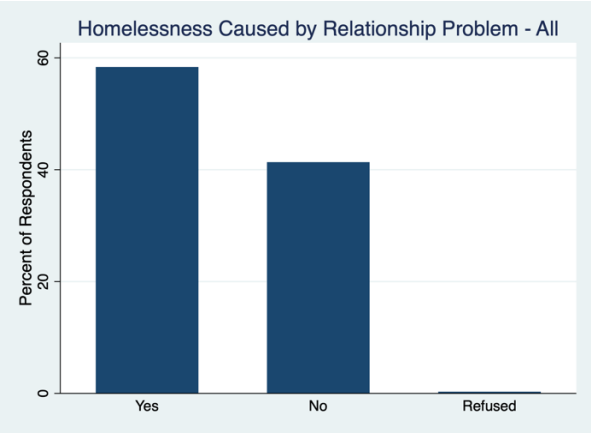


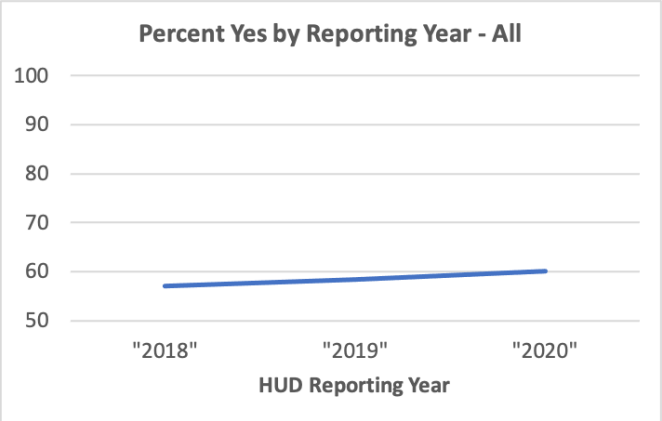




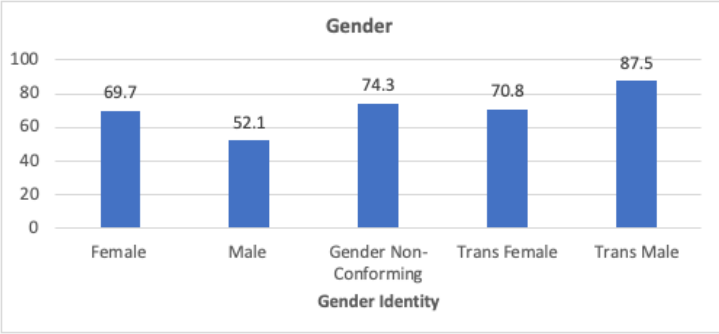
Question #14: Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?

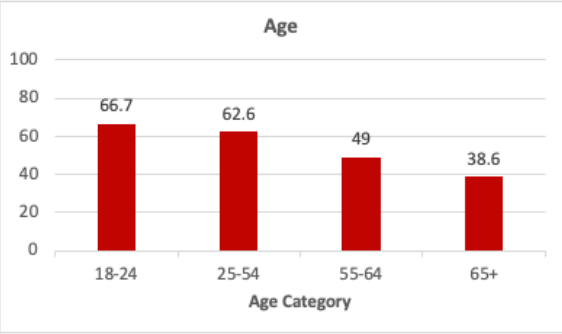
All: % Yes for 12,898 unique individual/HUD reporting year observations 2018-2020: **58.5%**

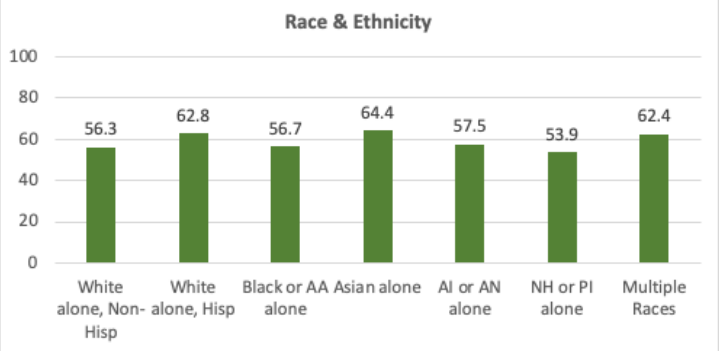


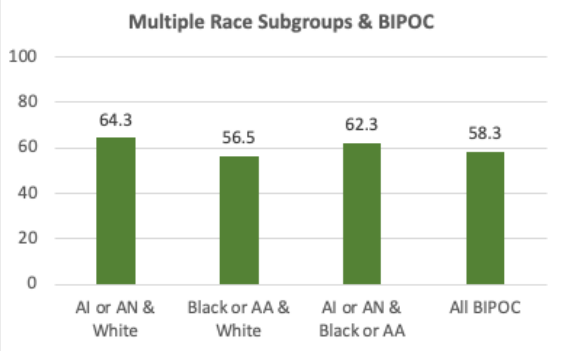


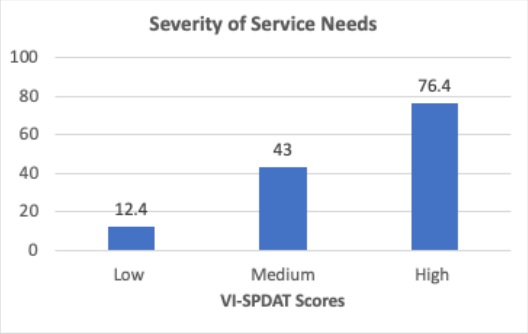
Subgroups: % Yes homelessness caused by a relationship that broke down…

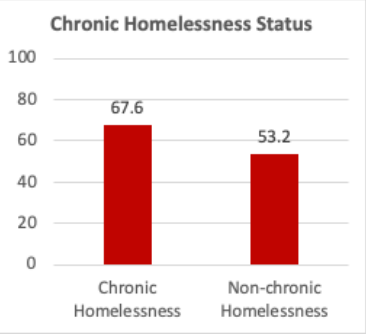


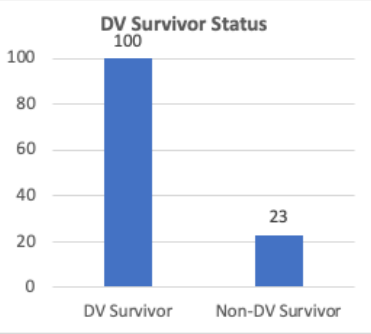






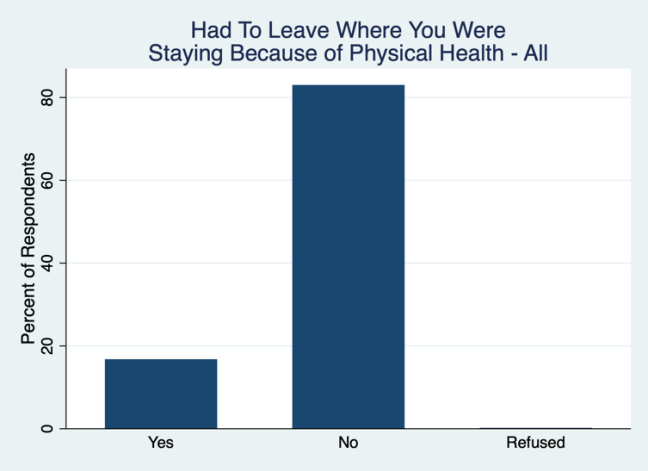


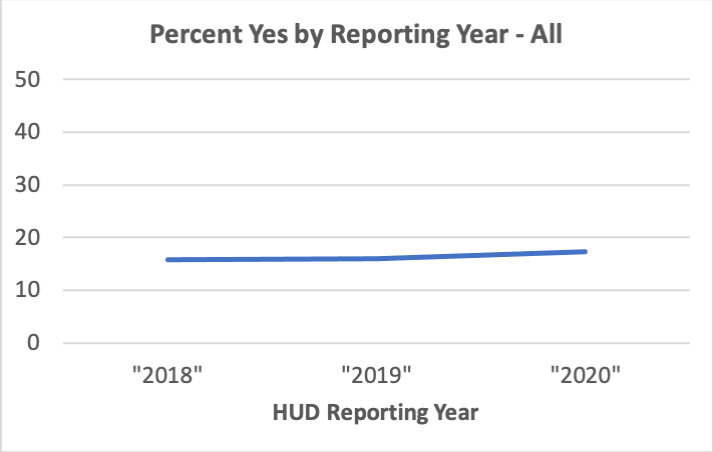




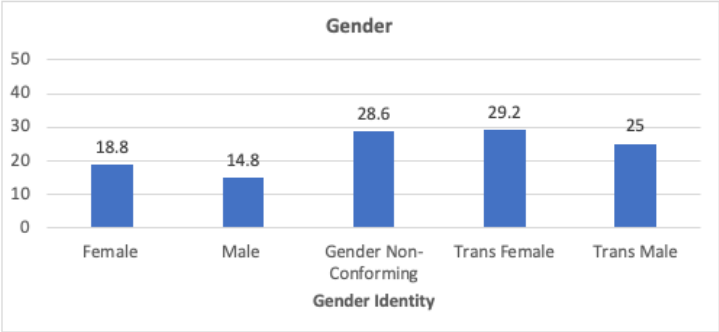
Question #15: Have you ever had to leave an apartment, shelter program, or other place you were staying because of physical health?

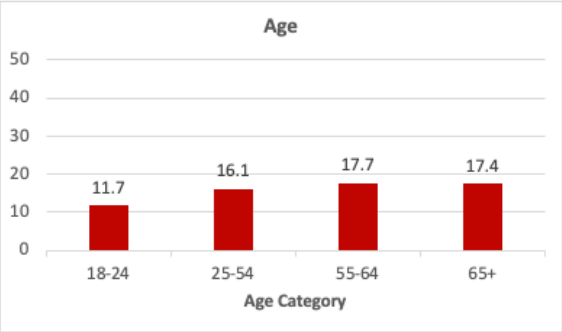
All: % Yes for 12,898 unique individual/HUD reporting year observations 2018-2020: **16.4%**

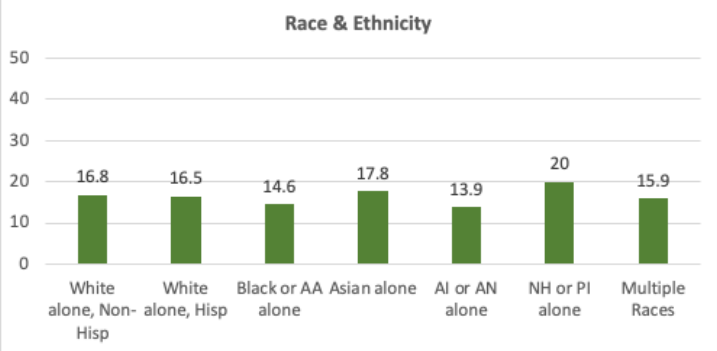


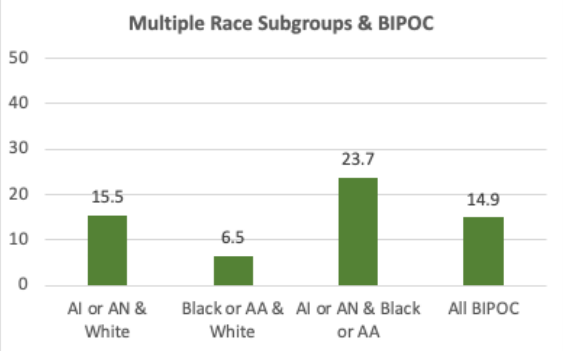


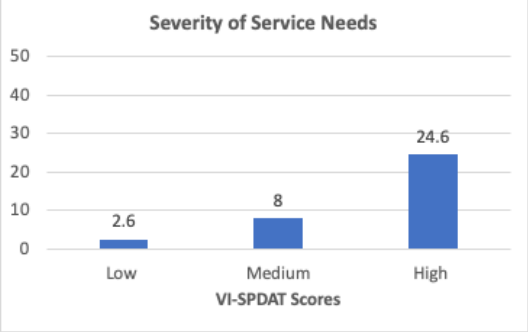
Subgroups: % Yes had to leave a living situation due to physical health

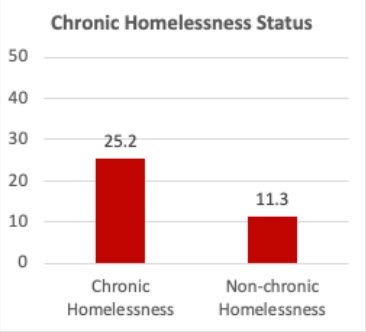


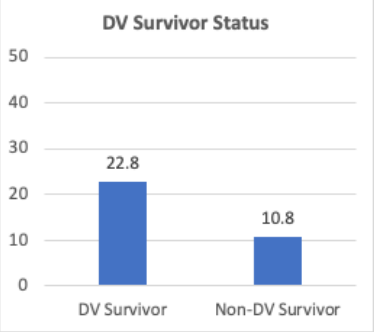






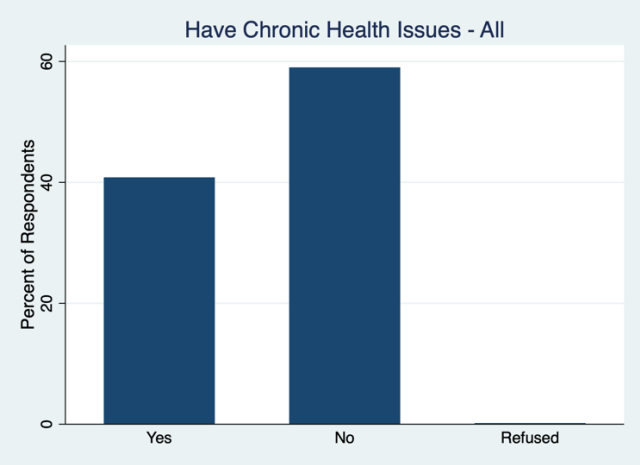


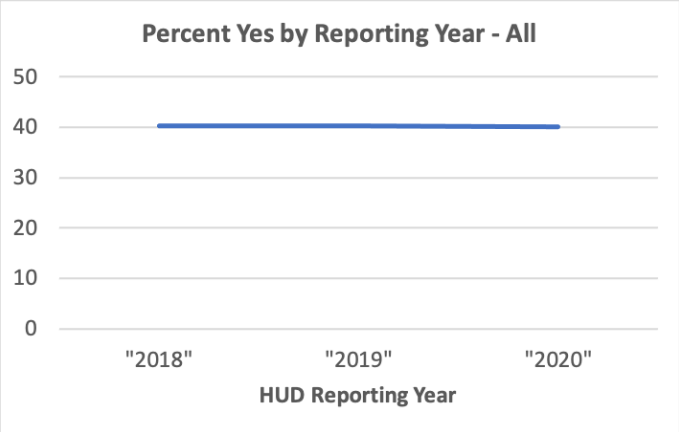




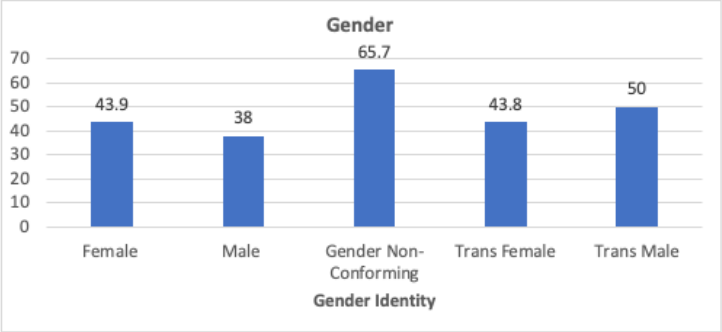
Question #16: Do you have chronic health issues with your liver, kidneys, stomach, lungs or heart?

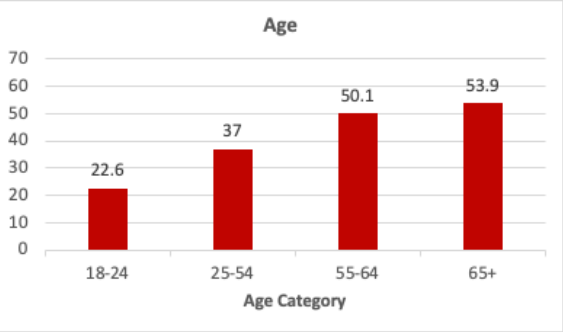
All: % Yes for 12,896 unique individual/HUD reporting year observations 2018-2020: **40.2%**

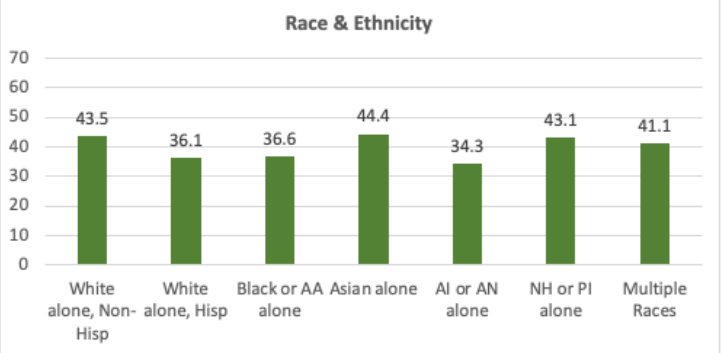


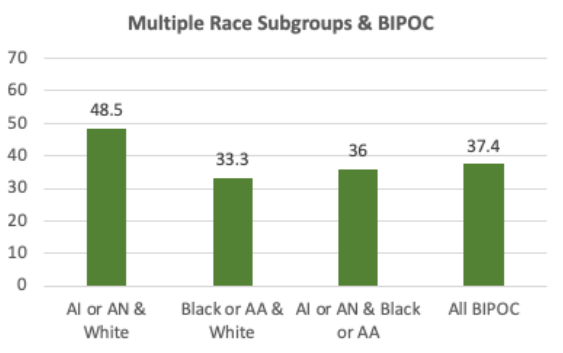


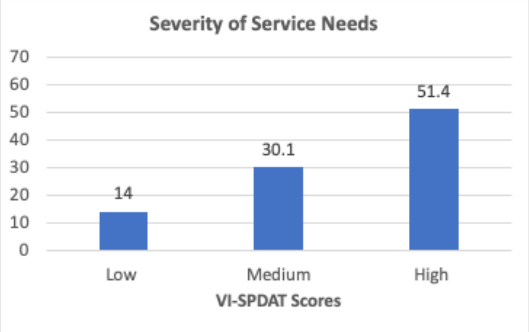
Subgroups: % Yes have chronic issues with liver, kidneys, stomach, lungs or heart

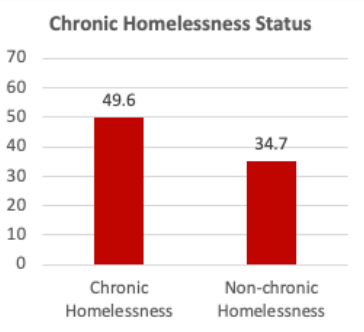


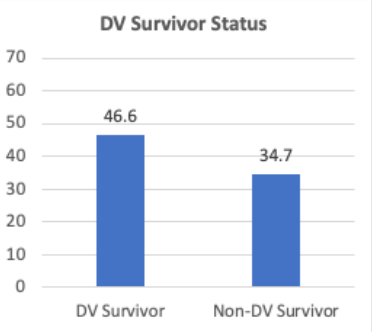






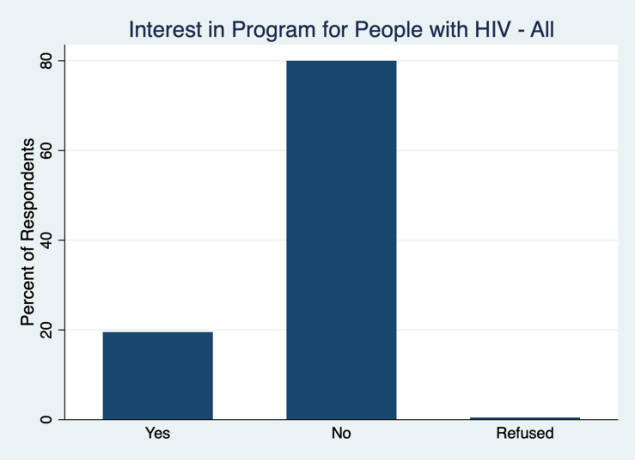


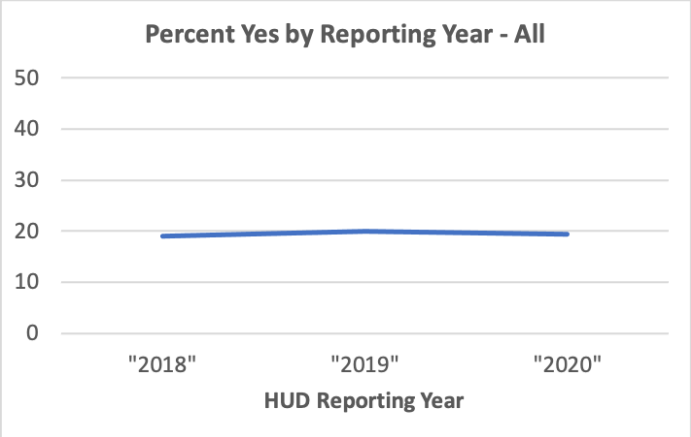




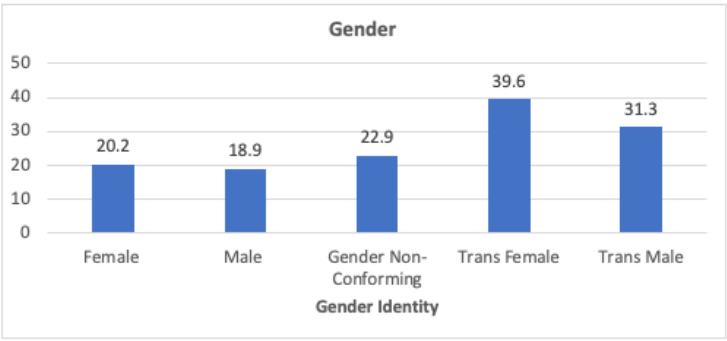
Question #17: If there was a space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?

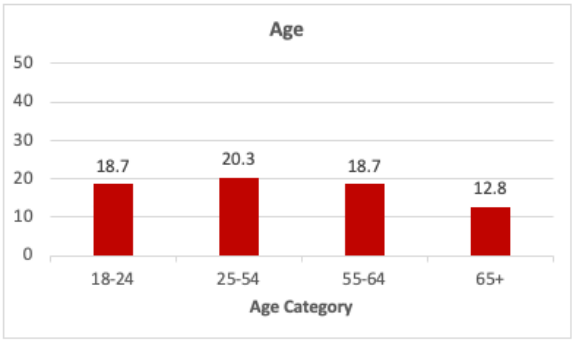
All: % Yes for 12,897 unique individual/HUD reporting year observations 2018-2020: **19.5%**

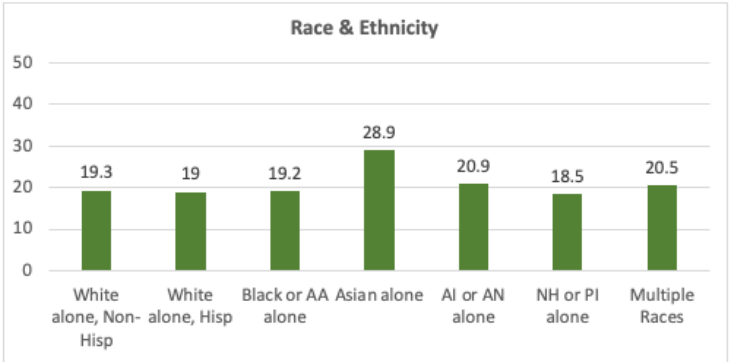


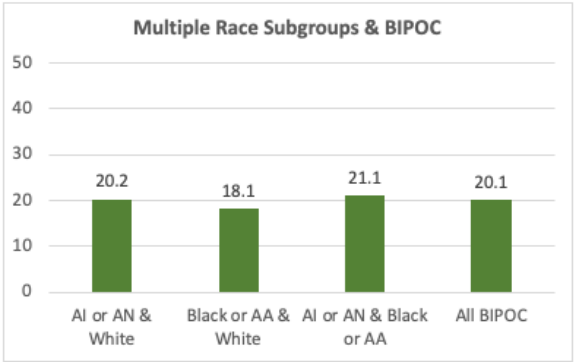


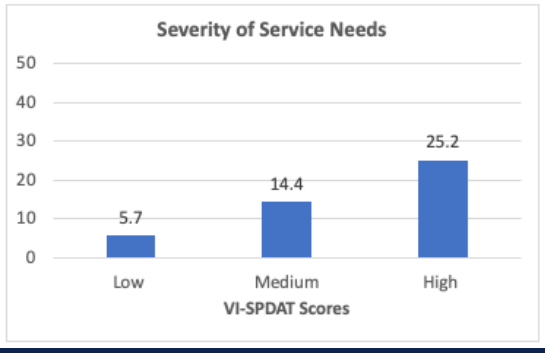
Subgroups: % Yes interest in program for people living with HIV or AIDS

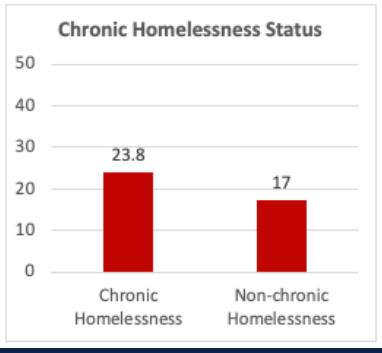


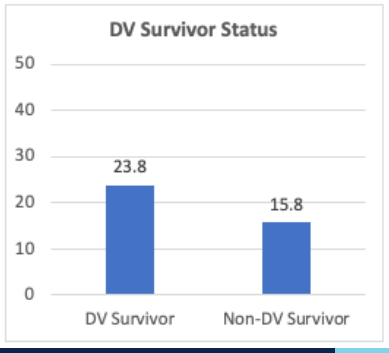






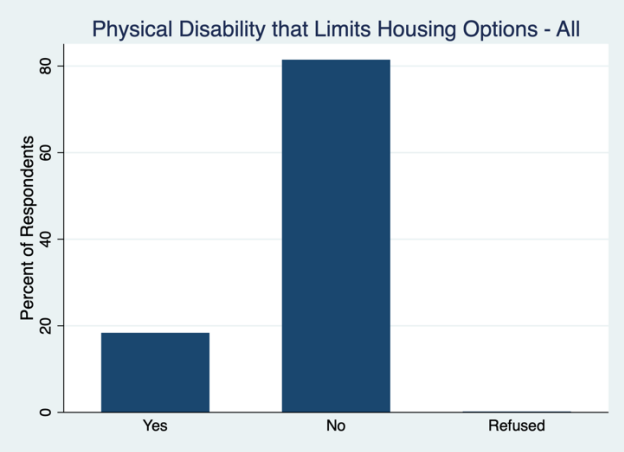


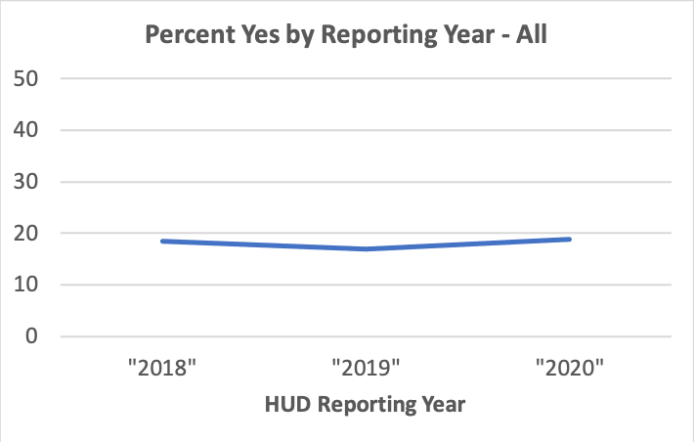




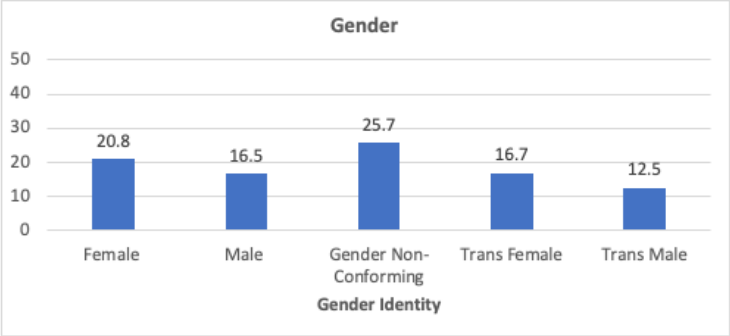
Question #18: Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?

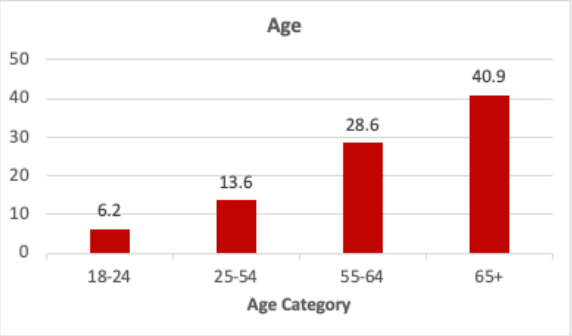
All: % Yes for 12,897 unique individual/HUD reporting year observations 2018-2020: **19.5%**

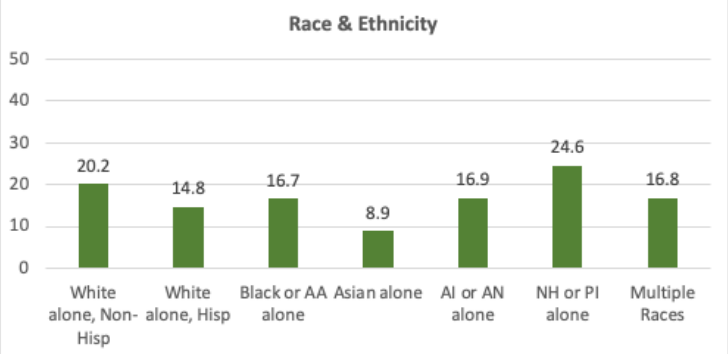


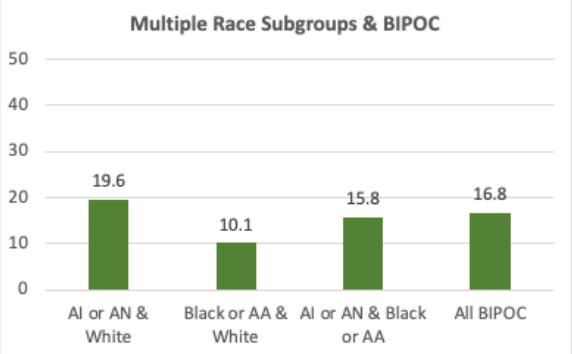


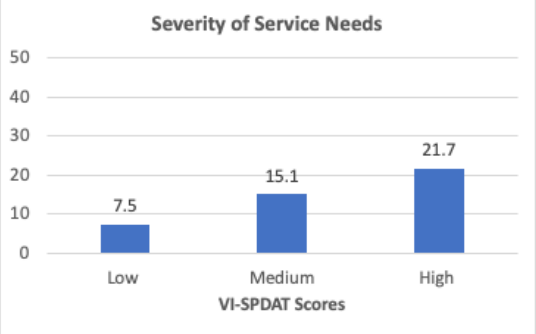
Subgroups: % Yes physical disability that limits housing option

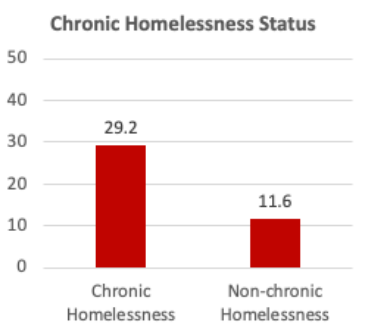


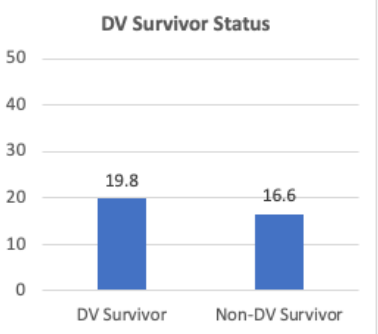






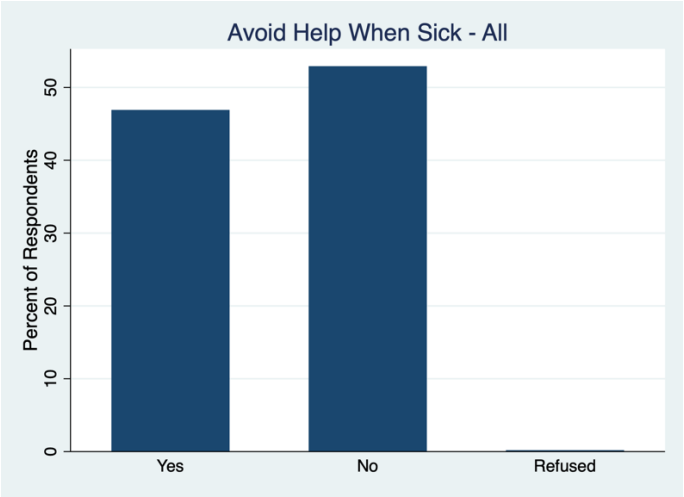


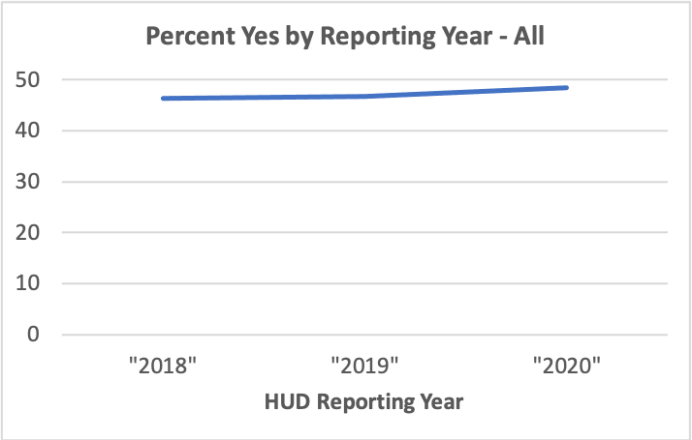




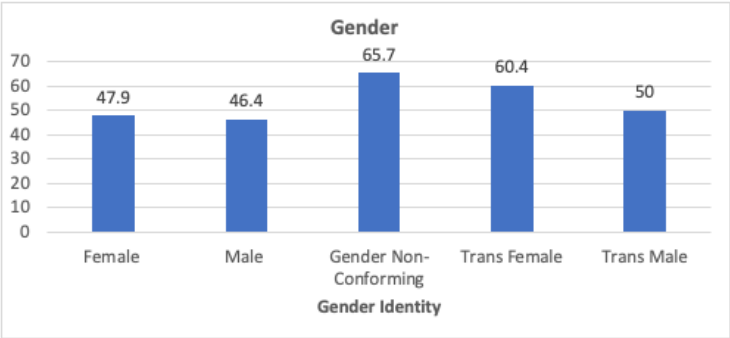
Question #19: When you are sick or not feeling well, do you avoid getting help?

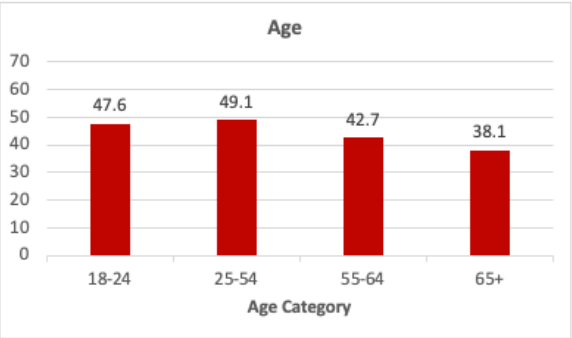
All: % Yes for 12,897 unique individual/HUD reporting year observations 2018-2020: **47.1%**

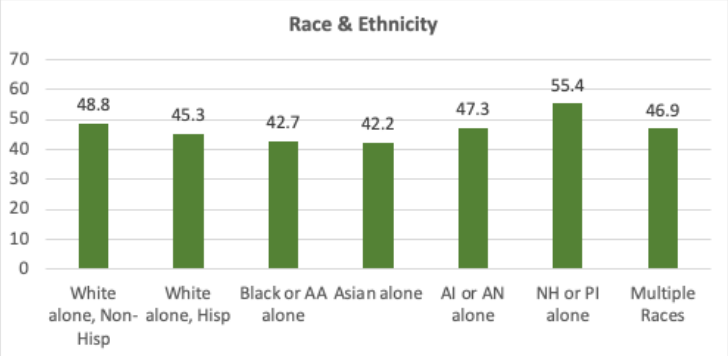


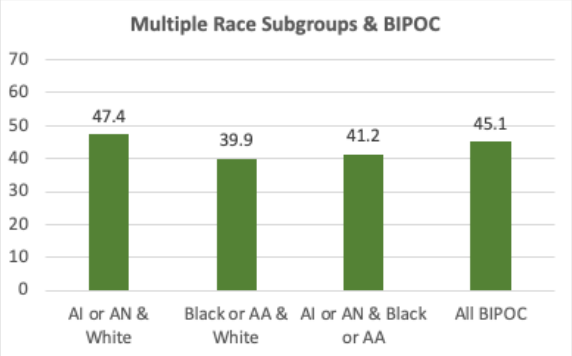


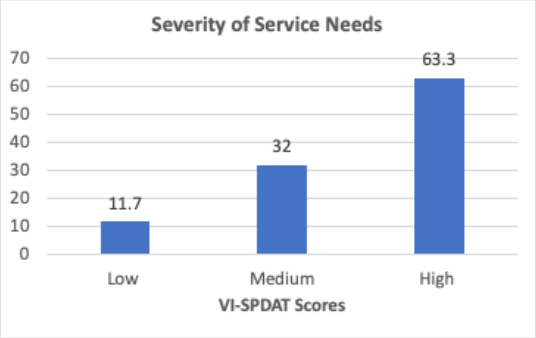
Subgroups: % Yes avoid getting help when sick

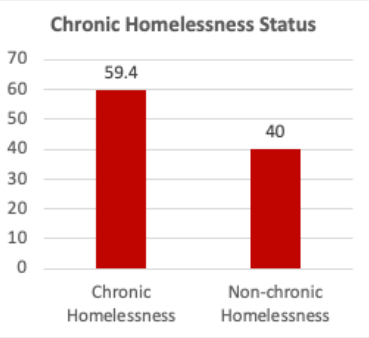


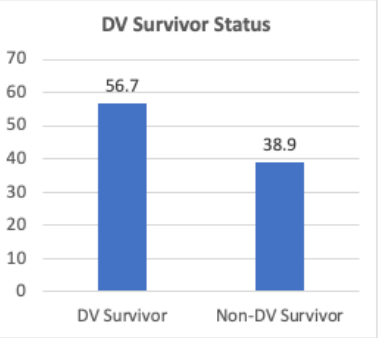






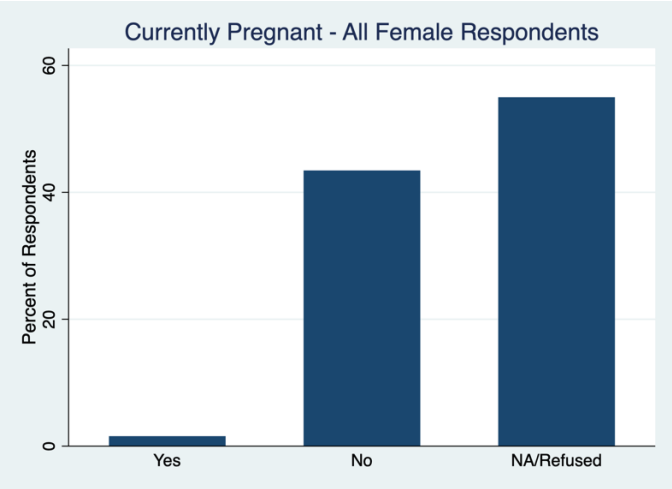


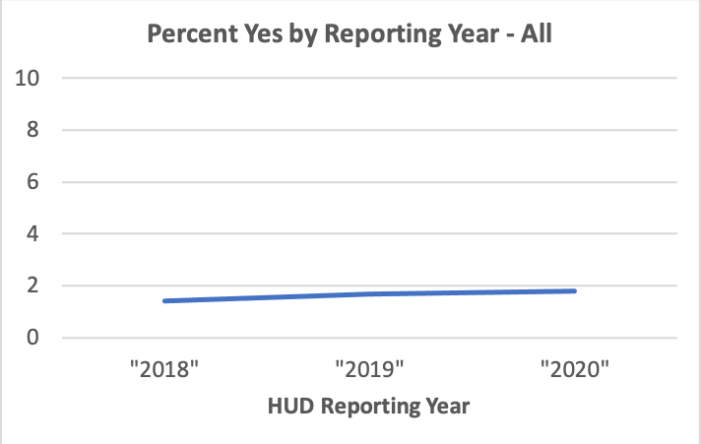




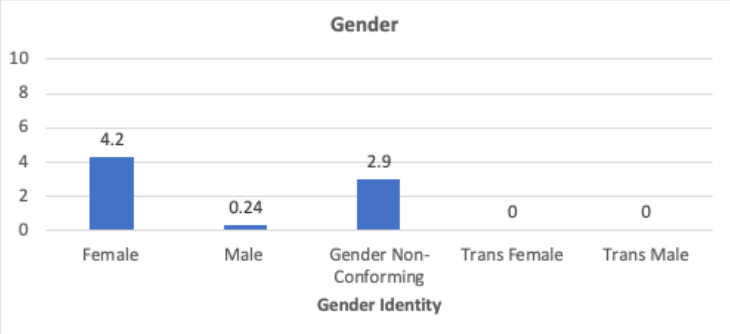
Question #20: Are you currently pregnant?

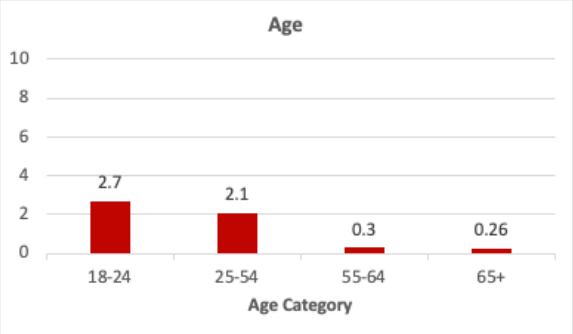
All: % Yes for 12,818 unique individual/HUD reporting year observations 2018-2020: **1.6%**

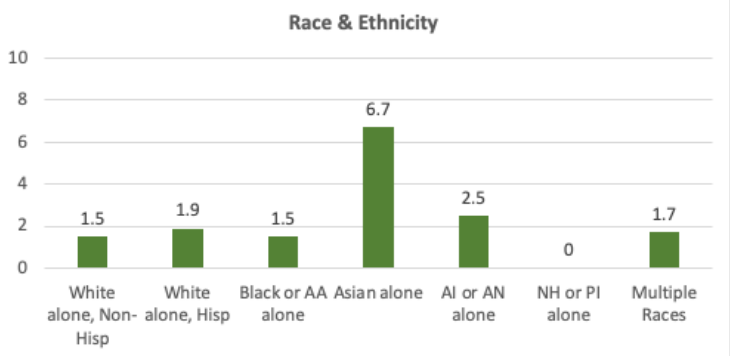


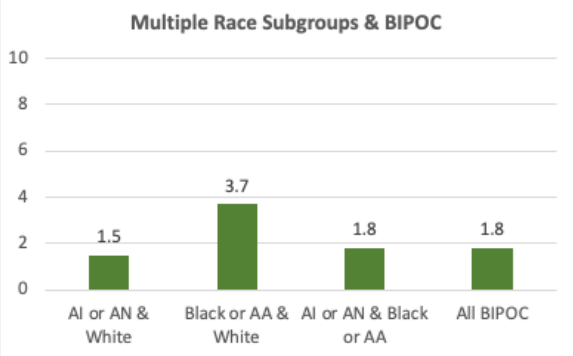


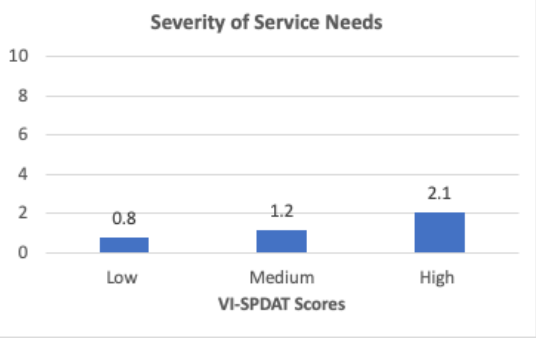
Subgroups: % Yes currently pregnant

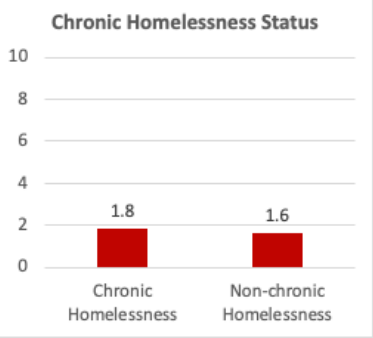


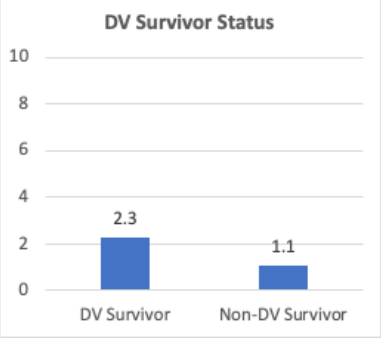






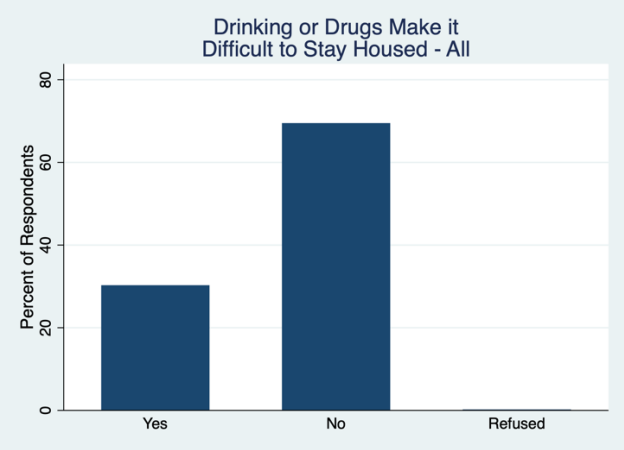


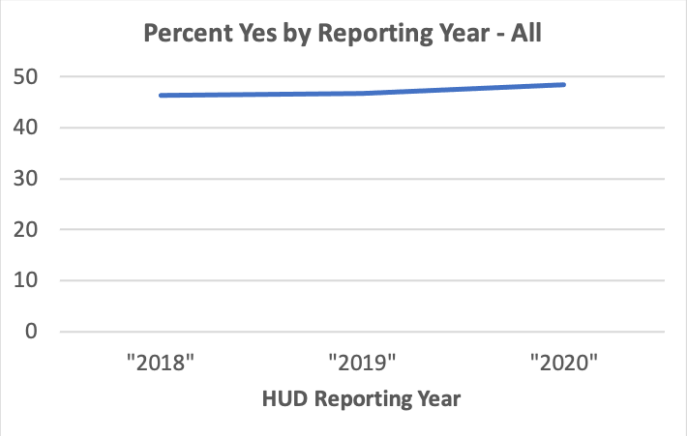




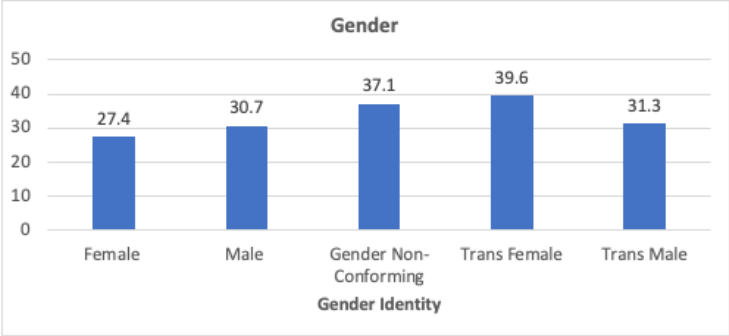
Question #21: Has your drinking or drug use led you to be kicked out of an apartment or programs where you were staying in the past?

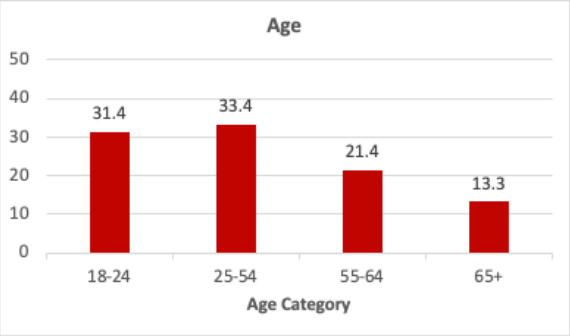
All: % Yes for 12,895 unique individual/HUD reporting year observations 2018-2020: **29.6%**

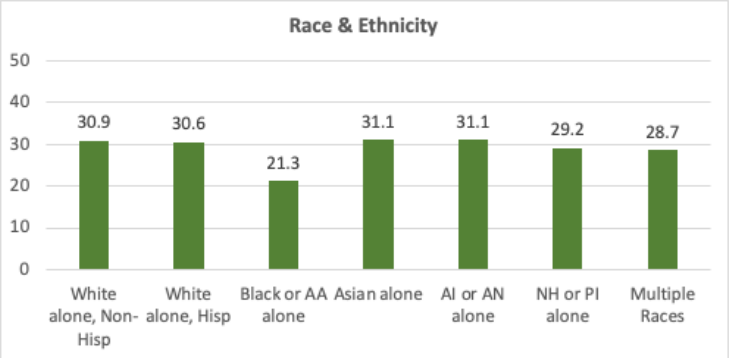


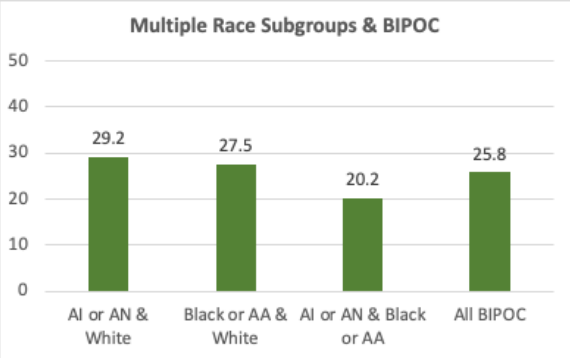


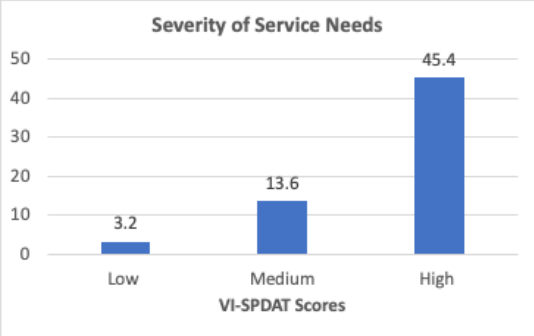
Subgroups: % Yes drinking or drug use has lead to ejection from housing

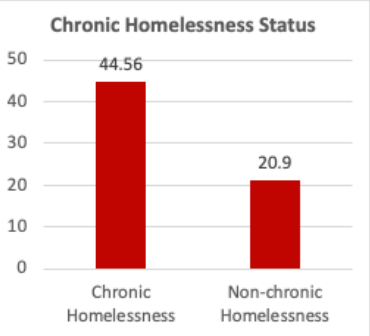


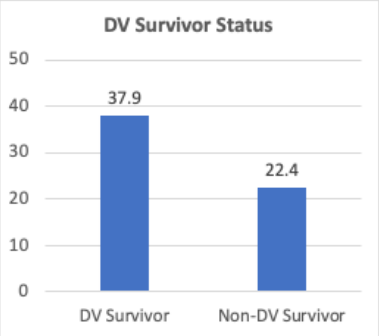






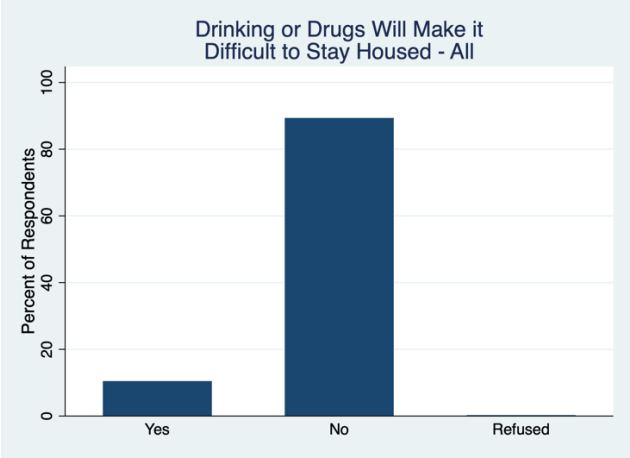


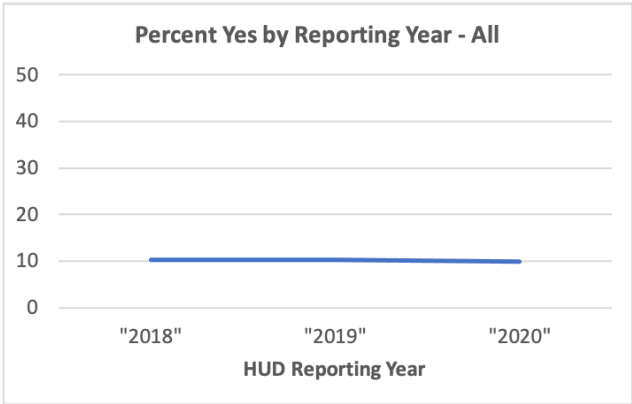




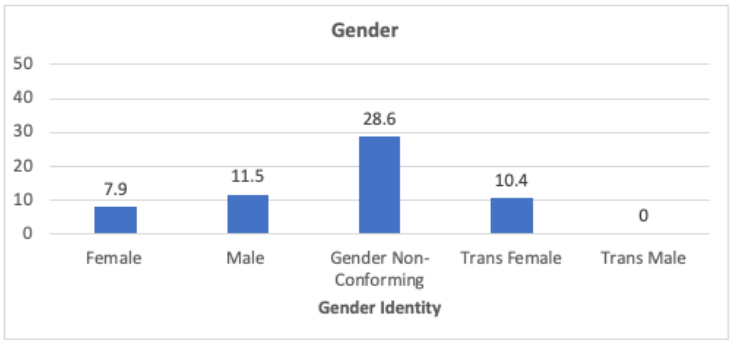
Question #22: Will drinking or drug use make it difficult for you to stay housed or afford your housing?

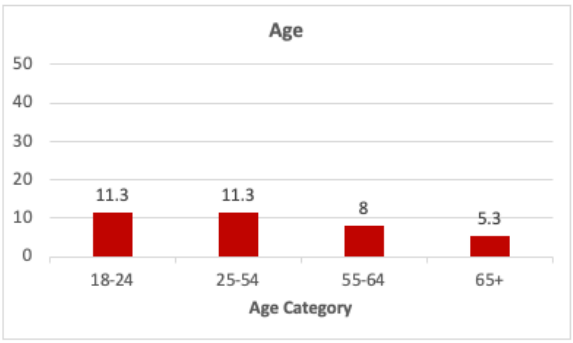
All: % Yes for 12,897 unique individual/HUD reporting year observations 2018-2020: **10.3%**

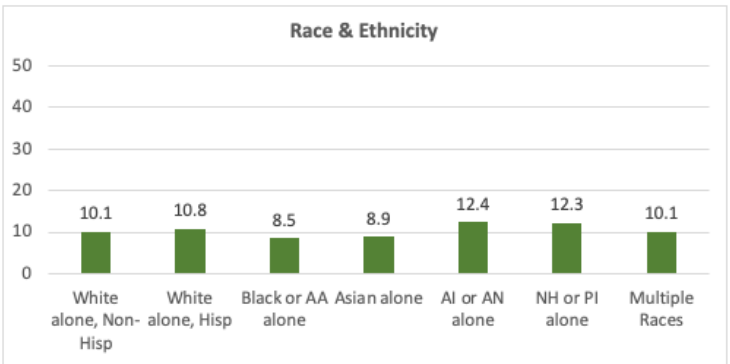


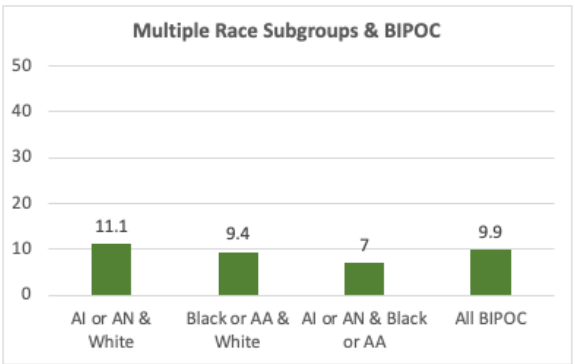


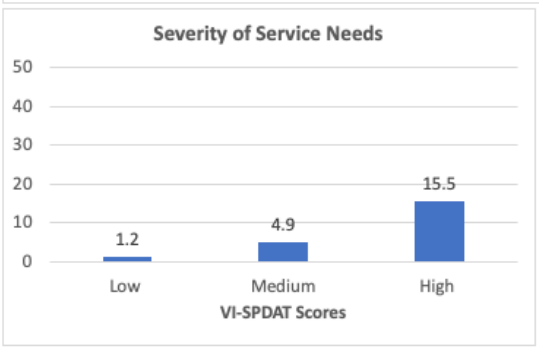
Subgroups: % Yes drinking or drug will make it difficult to stay housed

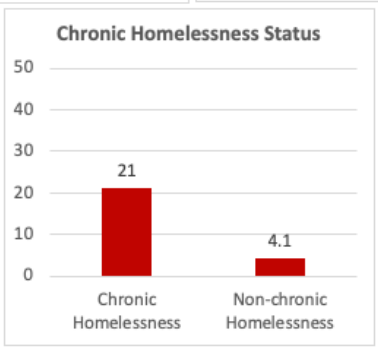


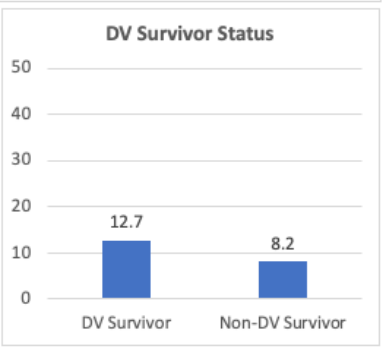






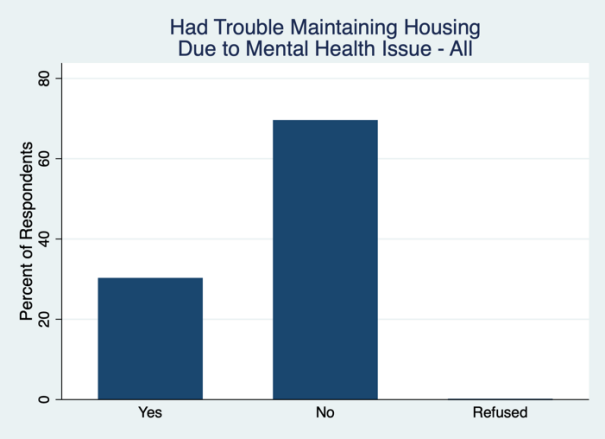


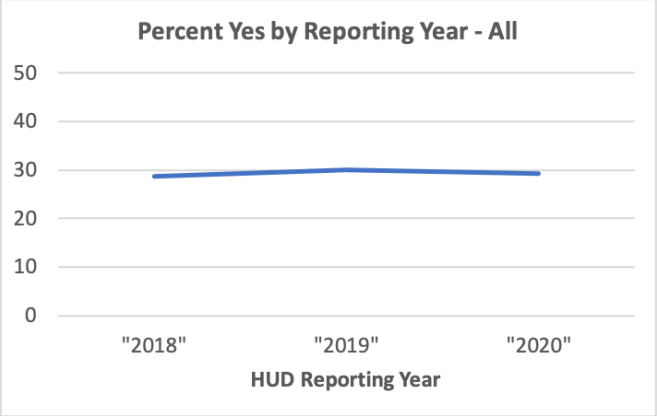




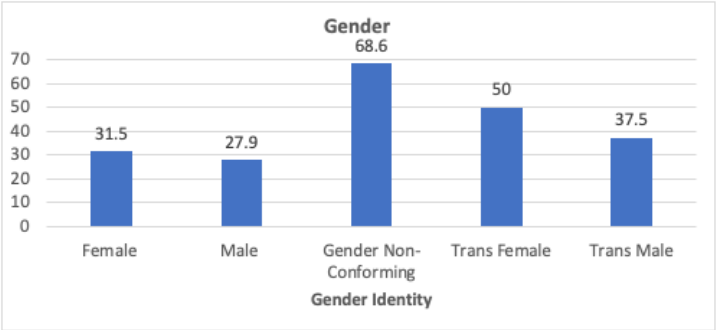
Question #23a: Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying because of: a mental health issue or concern?

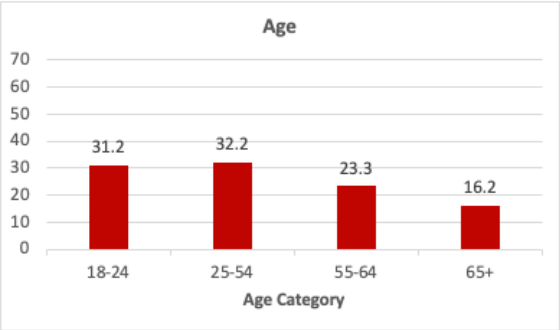
All: % Yes for 12,897 unique individual/HUD reporting year observations 2018-2020: **29.4%**

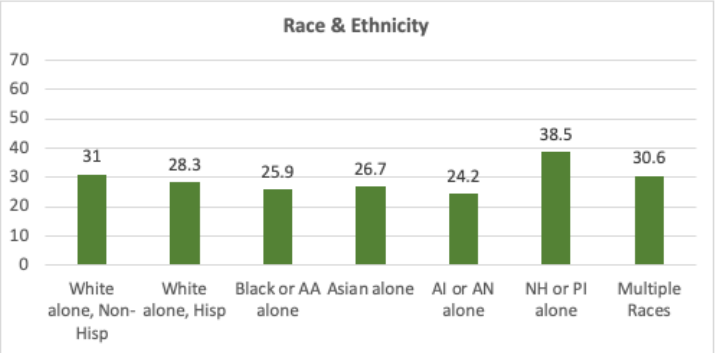


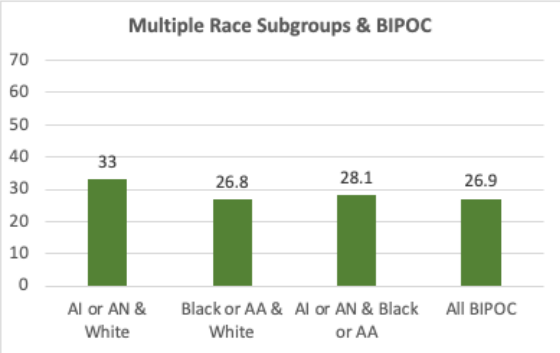


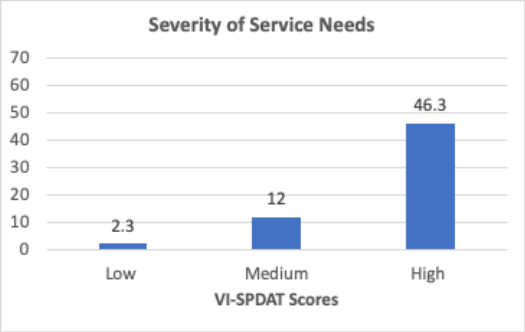
Subgroups: % Yes mental issue causing trouble with housing

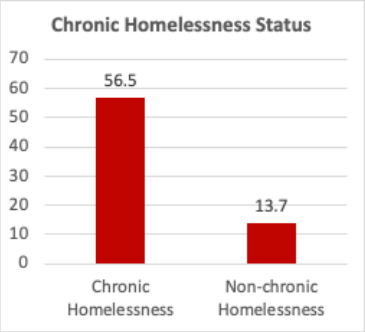


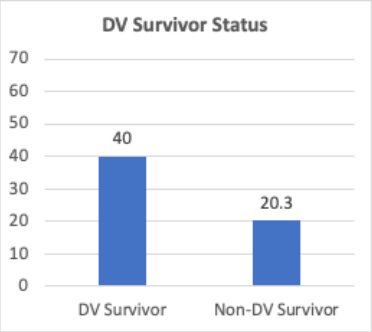






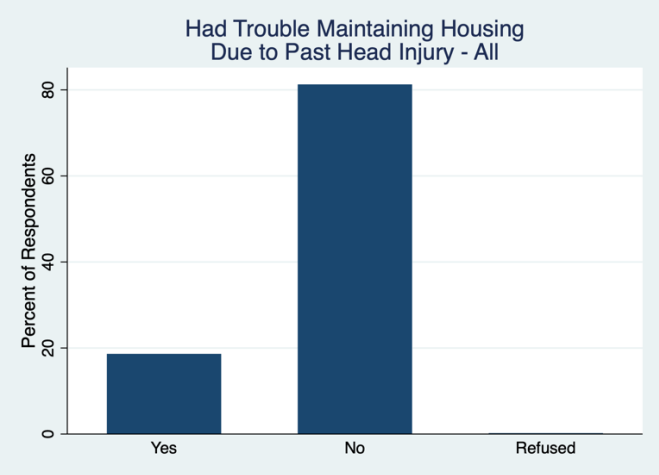


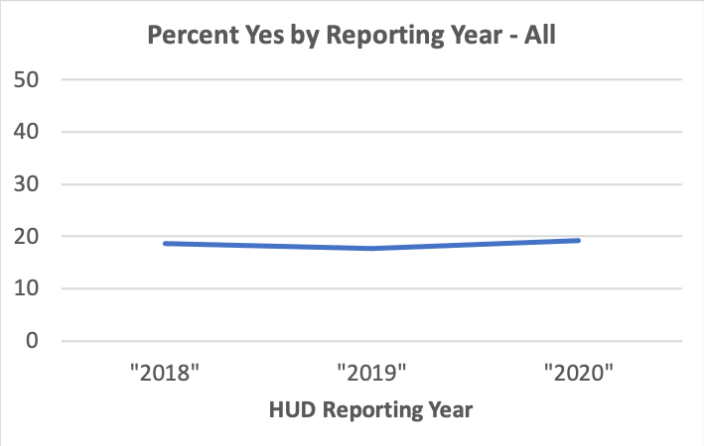




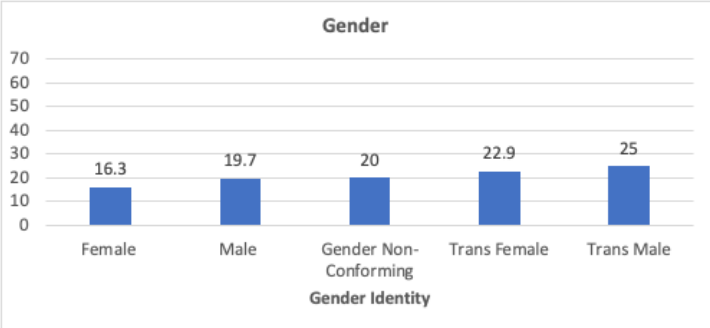
Question #23b: Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying because of: a past head injury?

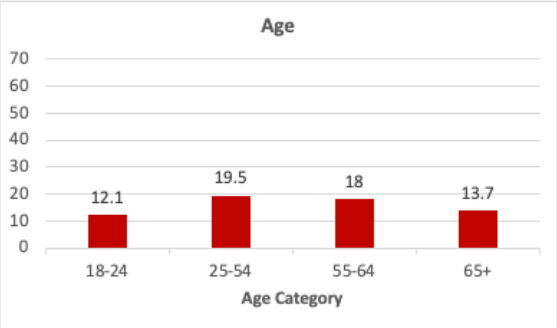
All: % Yes for 12,895 unique individual/HUD reporting year observations 2018-2020: **18.6%**

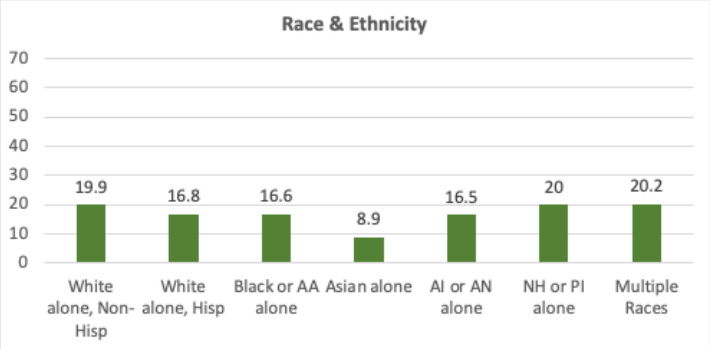


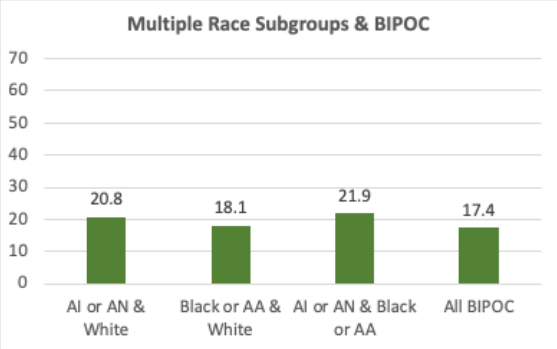


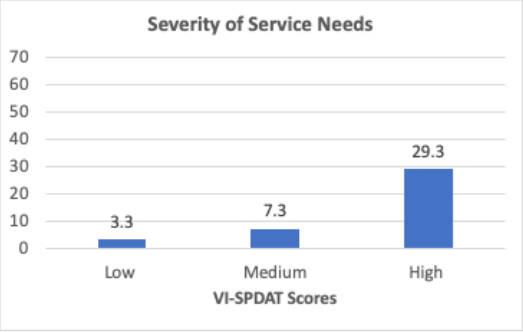
Subgroups: % Yes a past head injury causing trouble with housing

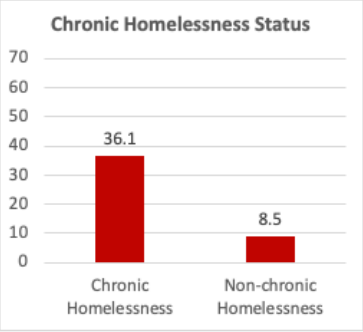


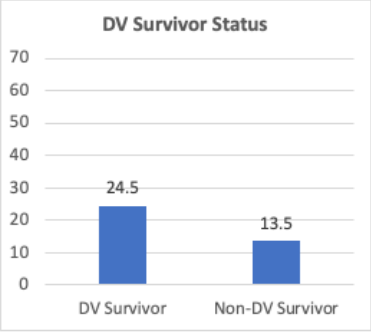






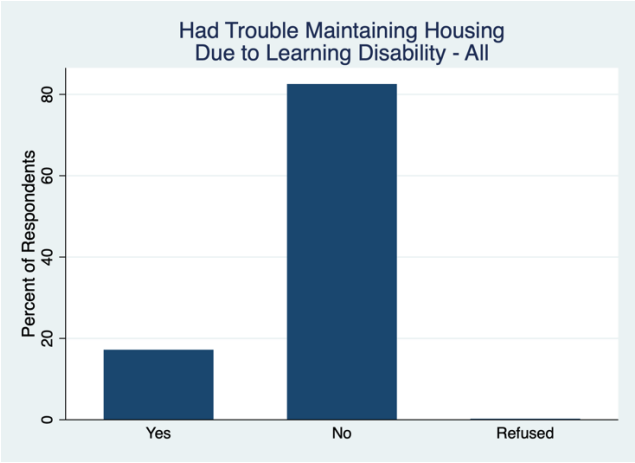


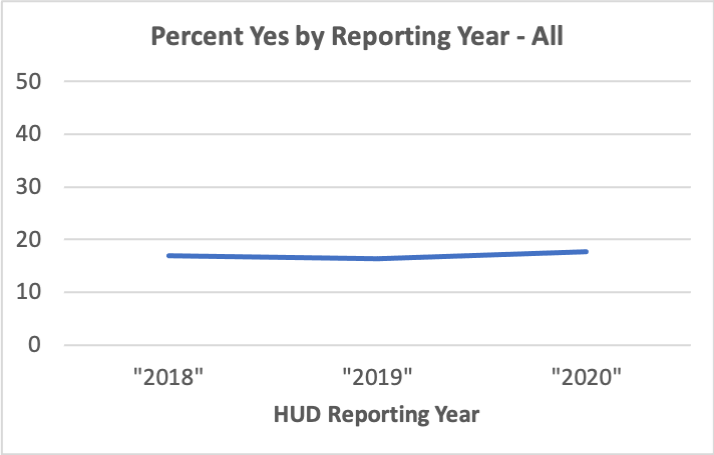




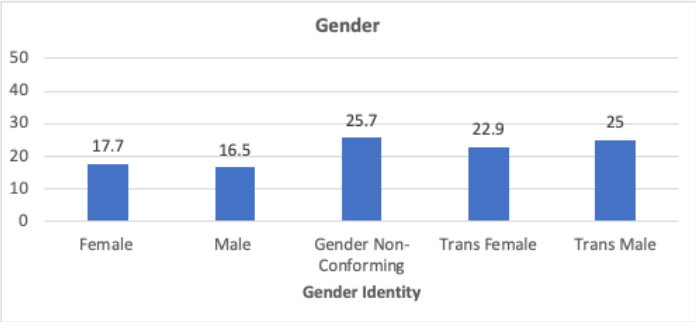
Question #23c: Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying because of: a learning disability, developmental disability, or other impairment?

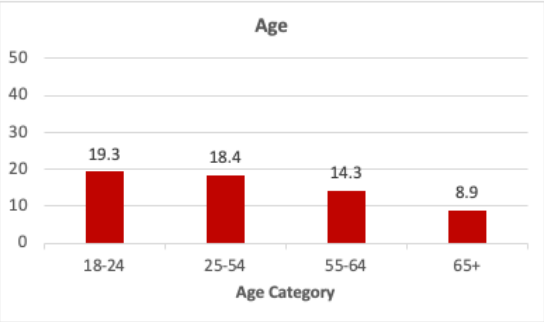
All: % Yes for 12,895 unique individual/HUD reporting year observations 2018-2020: **17.0%**

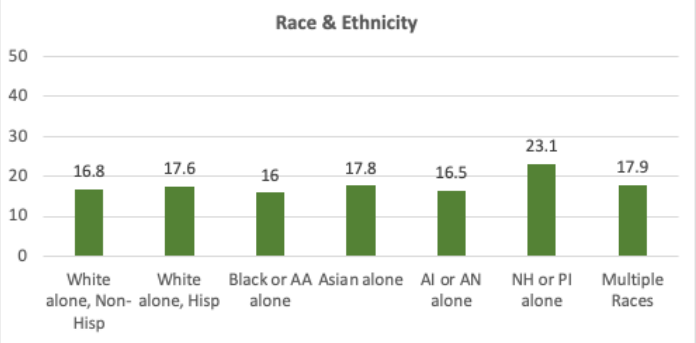


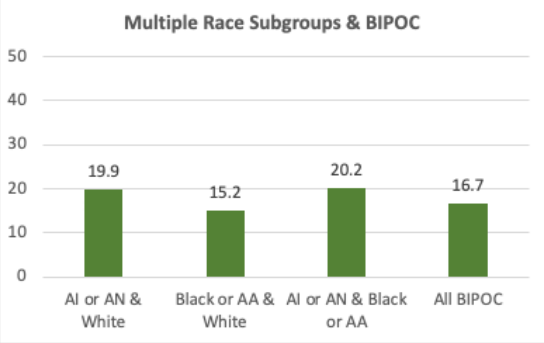


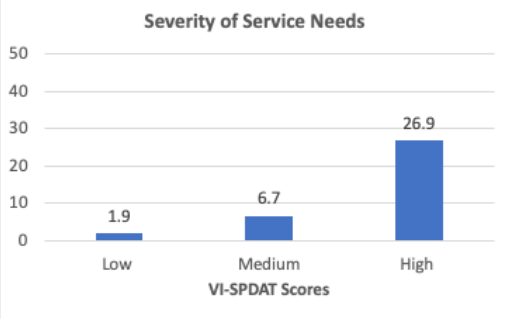
Subgroups: % Yes a past head injury causing trouble with housing

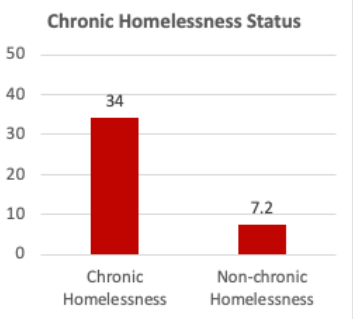


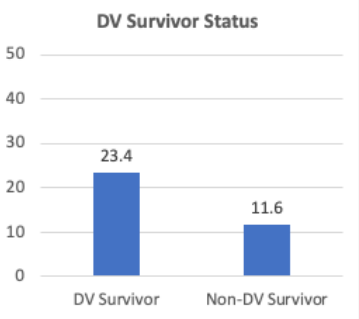






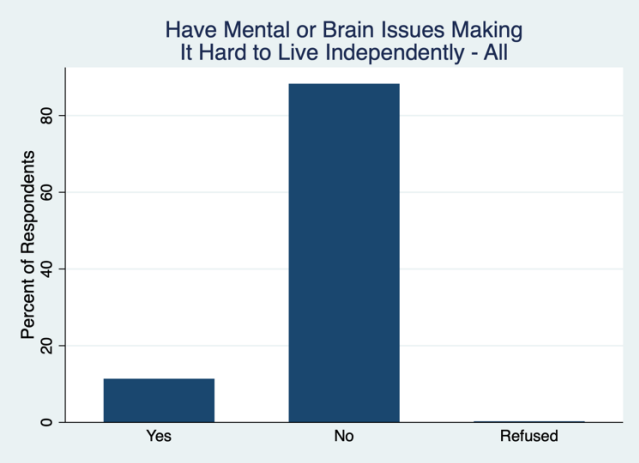


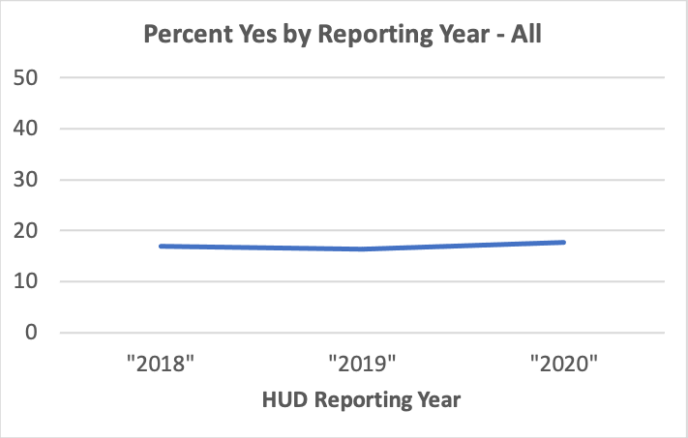




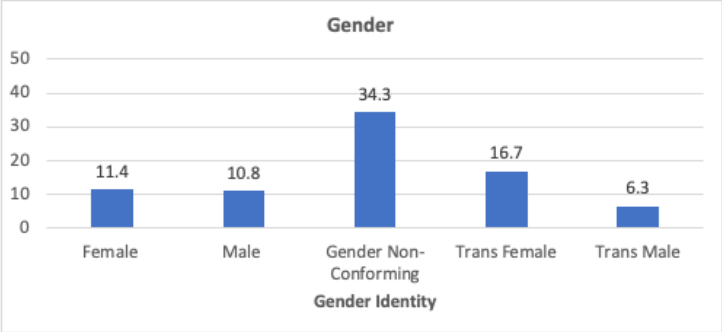
Question #24: Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?

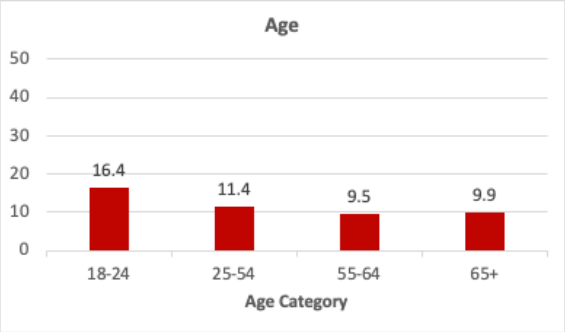
All: % Yes for 12,896 unique individual/HUD reporting year observations 2018-2020: **11.1%**

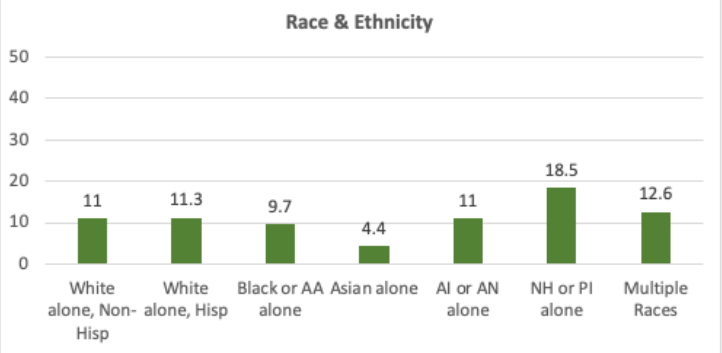


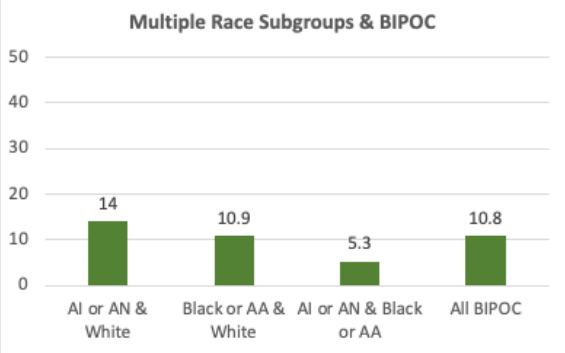


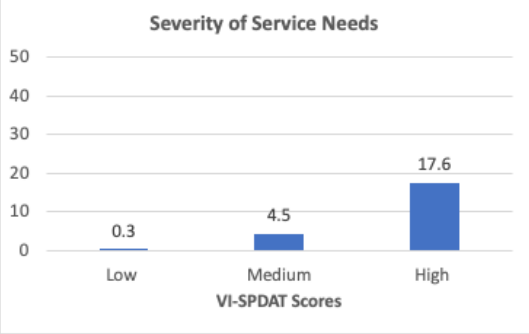
Subgroups: % Yes mental or brain issues making it hard to live independently

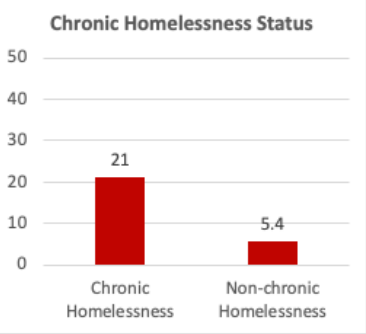


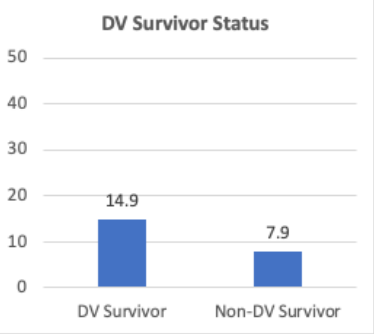






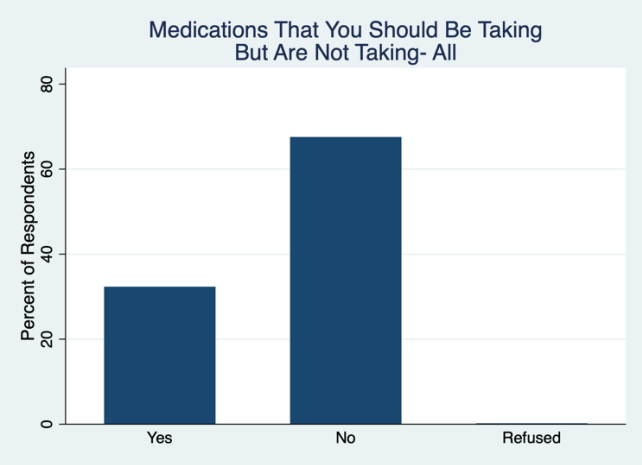


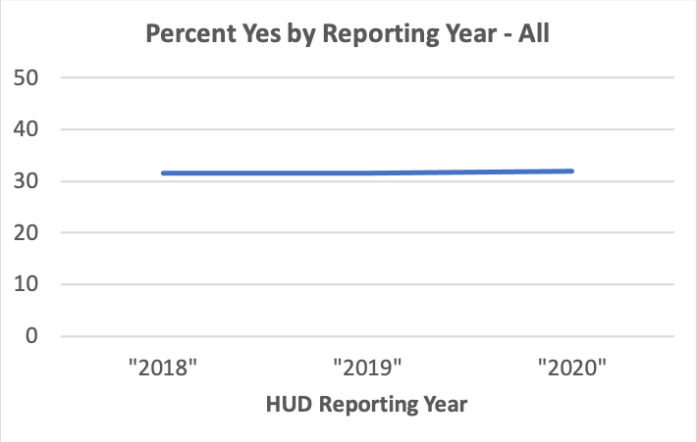




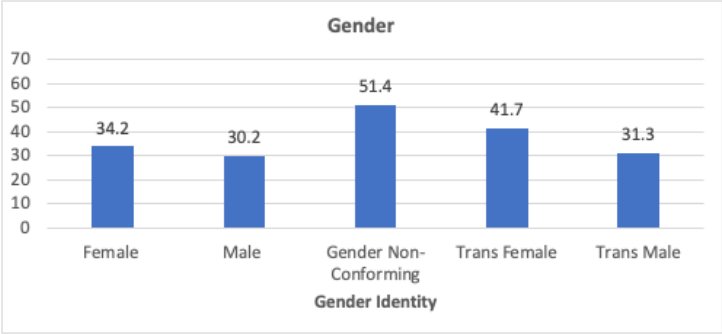
Question #25: Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?

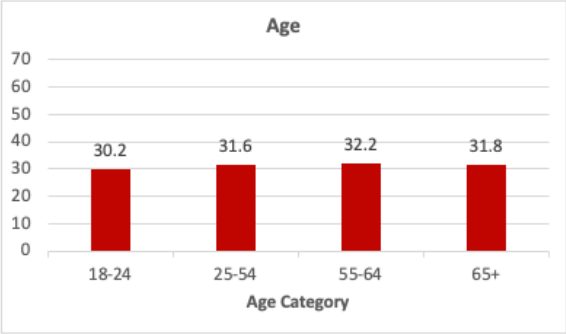
All: % Yes for 12,895 unique individual/HUD reporting year observations 2018-2020: **31.7%**

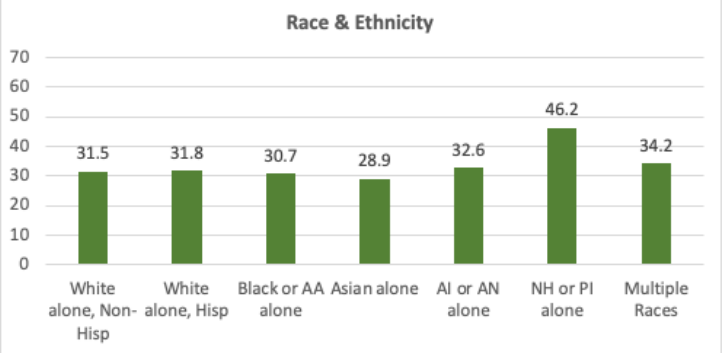


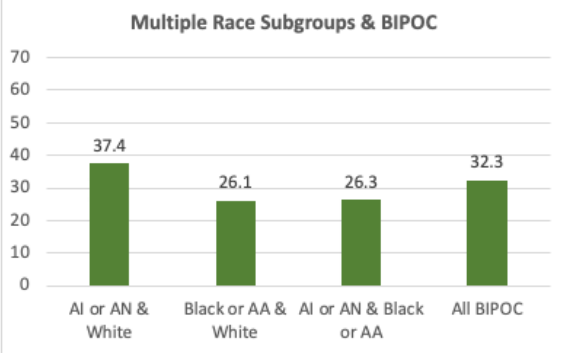


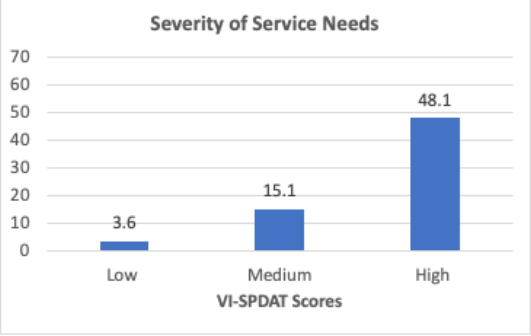
Subgroups: % Yes medications that you should be taking, but are not taking

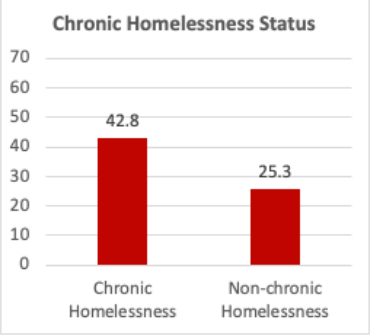


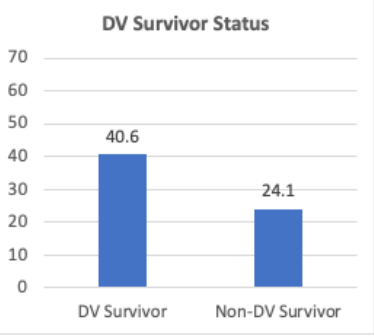






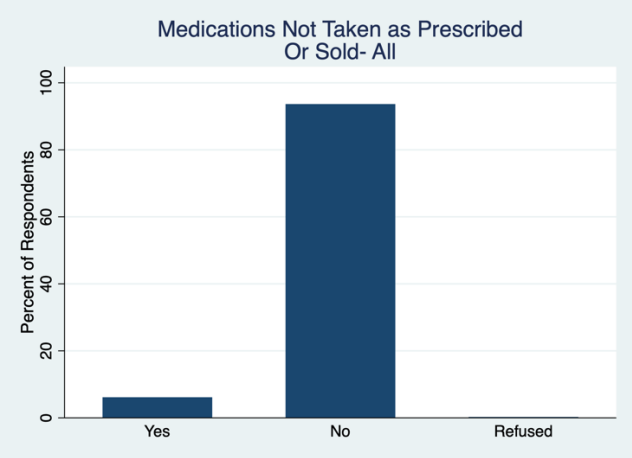


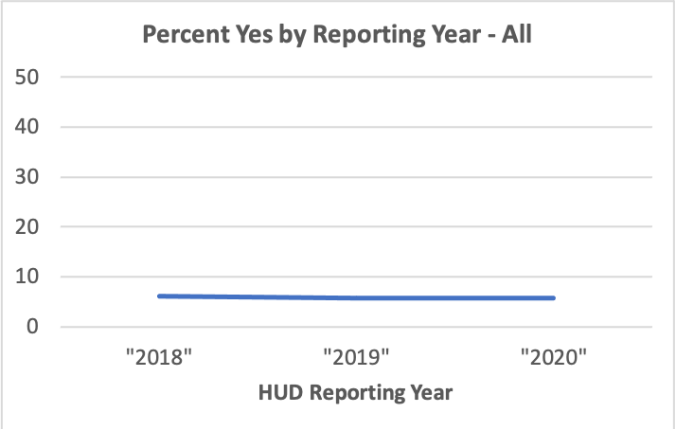




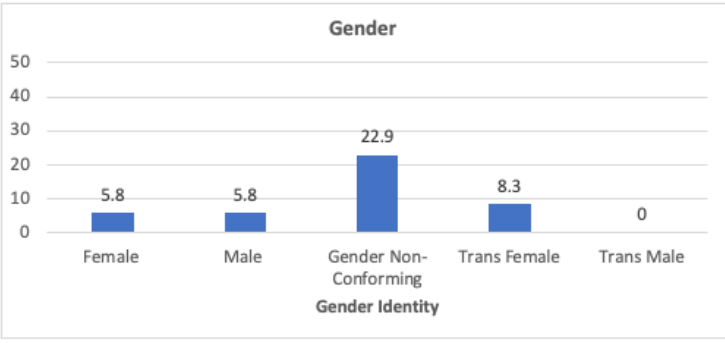
Question #26: Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?

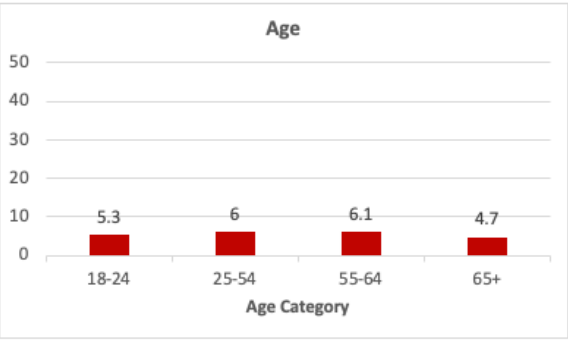
All: % Yes for 12,895 unique individual/HUD reporting year observations 2018-2020: **5.9%**

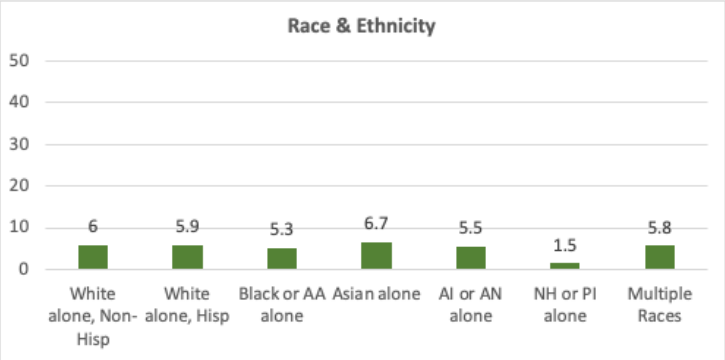


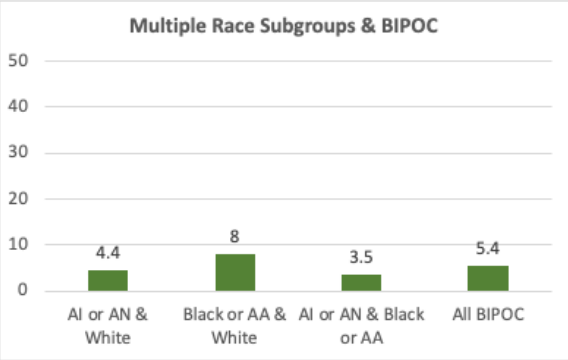


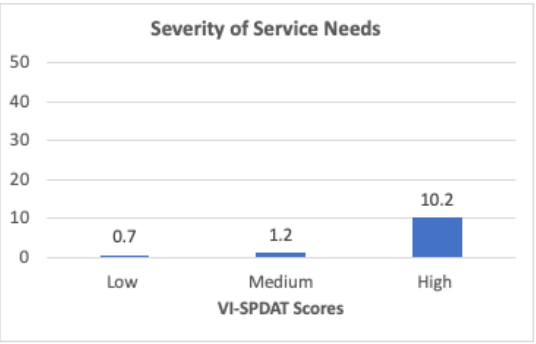
Subgroups: % Yes medications you don't take as prescribed or sell

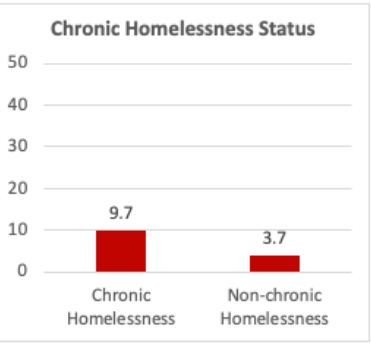


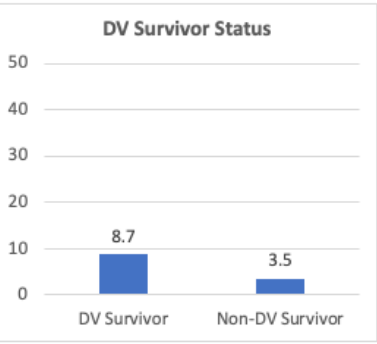






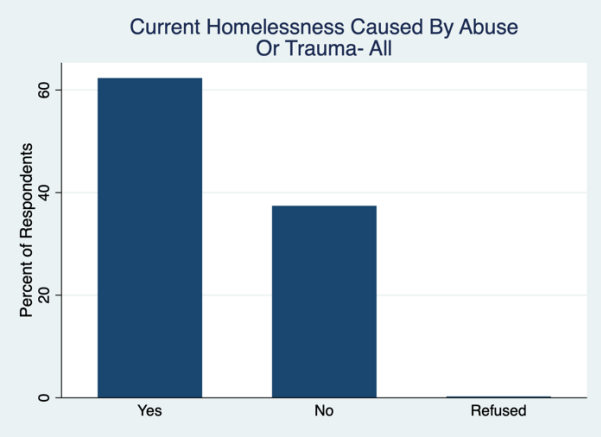


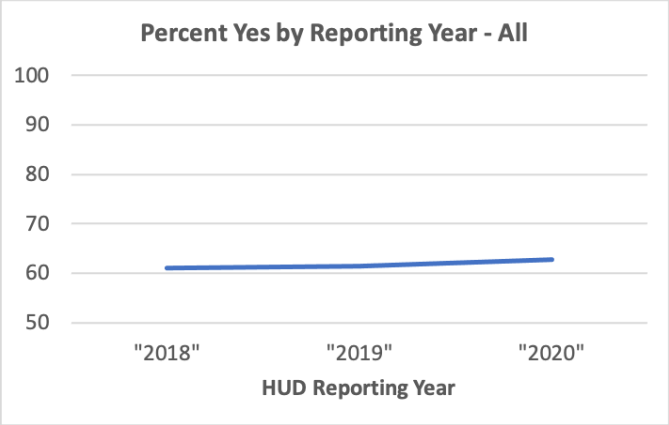




Question #27:Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?

All: % Yes for 12,895 unique individual/HUD reporting year observations 2018-2020: **61.8%**





Subgroups: % Yes current homelessness caused by abuse or trauma