Facing Up to Homelessness

A Joint Study by
The Department of Public Affairs and Administration,
California State University, East Bay

and

The Task Force to End Hunger and Homelessness in Hayward

October, 2016

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*Dr. Stacy Wilson*  

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The Hayward Homeless Count and its Facing Up to Homelessness Report was made possible through partnership with the following outstanding organizations:

DEDICATION
This report is dedicated to Delmo Della-Dora. A champion for equality, Del was an enthusiastic and inspiring member of the Task Force to End Hunger and Homelessness, Founding Chair of its Food Access Committee, and a strong supporter of the Hayward Homeless Count.

You will not complete the work; neither are you free to desist from it.
-Pirkei Avot 2:21, Rabbi Tarfon

ACKNOWLEDGEMENTS AND APPRECIATIONS
First and foremost, the Task Force wishes to express its profound appreciation and admiration to the survey and interview participants who shared their stories, provided insights, gave recommendations, and entrusted us with this opportunity to inspire positive, sustainable solutions to address homelessness in Hayward.

To the business owners and community centers at survey sites who hosted volunteers on one or many days and facilitated connections and communication, your contribution was tremendous.

To the donors who provided financial and in-kind materials to ensure the surveys were printed, wrist bands were created, incentives were available, volunteers were fed, funds were managed, and all the other concrete costs of this effort were provided for -- Thank You Very Much!

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To each of you, many, many thanks.

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Norman Fobert
Larissa Fong
Raymond Fong
Sandra Frost
Jessica Gallucci
Michael Galvan
Brittney Gilbert
Gidalthi Gonzalez
Bob Goodwill
John Gouveia
Julie Greenfield
Marie Guillory-Jones
Jasmine Hain
Tisa Hall
Kate Hardwig
Armand Harris
Mari-Lyn Harris
Dana Harvey
Gabriel Hernandez
Frank Holland
Chuck Horner
Austin Intl
Emma Ishii
Desiree Jackson
Firdaus Jahan
Nancy Jauregui
Jeanette Johnigan
Carmen Johnston
Larry Joichin
Colleen Kamai
Daniela Keiffer
John Kelley
Kyna Kelley
Andrew Kevy
Jay Khan
David Korth
Matthew Kritscher
Christine Kuo
Kristin Land
Qiujun Liao
Audrey Lieberworth
Chris Llorente
Esmeralda Loera
Sharon Luther
Oscar Macias
Jennifer Malvoux
Tina Markovich
Veronica Martinez
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Gay McDaniel
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Sue Merrill
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Etsubdink Mulushewa
Harumi Murata
Al Murdock
Hugh Murphy
Dr. Arlene Nehring
Vi Ngo
Karen Norell
FOREWORD by Dr. Stacy Wilson, California State University, East Bay

*Through narration it is possible to obtain in-depth understandings of lived experiences and what meanings are embodied in those experiences (Kim, Jeong-Hee, 2016).*

In May 2014, the Hayward Task Force to End Hunger and Homelessness sought the assistance of California State University, East Bay, in obtaining a valid updated count of persons experiencing homelessness in Hayward. The Task Force also wanted to collect useful information to complement and expand upon data typically collected by the County of Alameda through its biennial *Point-in-Time Count of Homelessness* required by the United States Department of Housing and Urban Development.

To address those needs, a structured questionnaire was designed and pilot-tested, complemented by in-depth interviews with selected participants willing to open up and share their personal stories. The impetus for the latter design feature is that we all live storied lives that can be narrated. Through narration it is possible to obtain in-depth understandings of lived experiences and what meanings are embodied in those experiences (Kim, Jeong-Hee, 2016).

Based on our comprehensive city-wide count, we estimate that during November 2015 between 380 and 422 persons were either experiencing homelessness or were at immediate risk of becoming homeless in the City of Hayward. Of this number, about 90 percent consider Hayward their home. We are fairly certain that there are individuals and families, perhaps numbering in the thousands, who are at risk of becoming homeless within the next six months. Risk factors have been studied extensively elsewhere and are quite varied. They include impending job loss, depleted savings, home foreclosure, domestic violence, increased housing costs, two or three missed paychecks, and other unforeseen circumstances.

*Facing up to Homelessness* is intended to provide local residents and policymakers with an inside view of the lived experiences of individuals and families confronting homelessness in Hayward from their own unique perspectives. We believe that such an insider’s view of homelessness will stimulate meaningful dialogue on how Hayward can best build upon existing city–county services and outreach efforts and move toward meaningful solutions.

The effectiveness of narrative inquiry depends a great deal on the level of mutual trust between persons sharing their experiences through stories and volunteer fieldworkers recording conversations while probing for in-depth feedback through follow-up questions. Trust was established by explaining the nature and purpose of the study to prospective participants and assuring them that transcriptions of their talk would be non-judgmental and truthful.

Being truthful, though, does not mean that the language-based data were not analyzed and interpreted in terms of significance and relevance to policy formulation. Indeed, narrative inquiry necessarily entails the intentional act of interpretation. Rest assured that the conclusions, interpretations, and implications presented in this report align closely with the
data collected. Using a metaphor, the apples (interpretations) do not fall far from the trees (actual narratives). It is our hope that readers of this report will find it insightful, engaging, and provocative.
Table 1 Summary of Key Findings

<table>
<thead>
<tr>
<th>Key Finding</th>
<th>Refer. Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The 2015 November Count</strong></td>
<td></td>
</tr>
<tr>
<td>During November 2015, between 380 and 422 persons were either experiencing homelessness or were at immediate risk of becoming homeless in the City of Hayward. Of this number, about 90 percent consider Hayward their home.</td>
<td>4, 10</td>
</tr>
<tr>
<td>We are fairly certain that there are many more individuals and families, perhaps numbering in the thousands, at risk of becoming homeless within the next six months who are not reflected in our count.</td>
<td></td>
</tr>
<tr>
<td>The average number of days participants slept in a city area over a recent 30-day period was 25 days in an outdoor area; 21 days in an emergency shelter or transitional housing; 9 days in a hotel or motel; and 8 days with friends or relatives.</td>
<td>12</td>
</tr>
<tr>
<td><strong>Demographic Findings</strong></td>
<td></td>
</tr>
<tr>
<td>Males represent about 55 percent of the participants who reported demographic information, and persons aged 31 and over represent nearly two-thirds.</td>
<td>10</td>
</tr>
<tr>
<td>Hispanics represent 35 percent, White participants 25.8 percent, and African Americans 17.8 percent. The remaining ethnic groups combined represent 21.1 percent.</td>
<td>10</td>
</tr>
<tr>
<td>When compared with Hayward’s general population for census year 2010, our data suggest that African Americans might be slightly over-represented in the city’s homeless population by about 5 percentage points, and White persons by about 7 percentage points. Hispanics do not appear to be overrepresented.</td>
<td>10, 11</td>
</tr>
<tr>
<td>About half (48%) of the persons experiencing homelessness in Hayward are single, 29 percent are divorced or separated, 15 percent are either married or in a long-term relationship, and 8 percent are widowed.</td>
<td>12</td>
</tr>
<tr>
<td>Approximately 70 percent of the participants were living in Hayward prior to experiencing homelessness and housing insecurity.</td>
<td>12</td>
</tr>
</tbody>
</table>
### Table 1 Summary of Key Findings (Continued)

<table>
<thead>
<tr>
<th>Key Finding</th>
<th>Refer. Page</th>
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</thead>
<tbody>
<tr>
<td><strong>Educational Attainment</strong></td>
<td></td>
</tr>
<tr>
<td>Overall, approximately 26 percent of the participants did not graduate from high school, 30 percent received a high school diploma or a GED, 23 percent have at least some college experience, and about 21 percent earned a two-year degree or higher.</td>
<td>11</td>
</tr>
<tr>
<td>As shown in Table 3, nearly half of Hispanic persons experiencing homelessness (48%) did not graduate from high school, compared with only 15 percent of African Americans and 23 percent of White participants.</td>
<td>11</td>
</tr>
<tr>
<td><strong>Inside View of Homelessness and Housing Insecurity in Hayward</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Housing and Joblessness</strong></td>
<td></td>
</tr>
<tr>
<td>As shown in Table 4, the reasons for housing insecurity and homelessness in Hayward are quite diverse. Those reasons include income too low to meet needs (ranked 1), couldn’t find affordable housing (ranked 2), job loss (ranked 3), mental health/PTSD (ranked 4), depleted savings (ranked 5).</td>
<td>15</td>
</tr>
<tr>
<td>Although Table 4 lists rankings of individual factors, it is well understood that most contributing factors are multifaceted in that they overlap and are not independent of one another. This finding suggests that city and regional planning be macroscopic enough to tackle a range contributing factors simultaneously, while also being microscopic enough to address unique individual circumstances.</td>
<td>16</td>
</tr>
<tr>
<td>Factors that ranked high regarding joblessness include physical health, mental health, and job training needs.</td>
<td>17</td>
</tr>
<tr>
<td>175 participants stated that they could contribute to a monthly housing/rental cost if affordable housing were made available. Of that number, 101 participants indicated that they could contribute between $500 and $1,100 on a monthly basis.</td>
<td>24</td>
</tr>
</tbody>
</table>
Table 1 Summary of Key Findings (Continued)

<table>
<thead>
<tr>
<th>Key Finding</th>
<th>Refer. Page</th>
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</thead>
<tbody>
<tr>
<td><strong>Physical and Mental Health</strong></td>
<td></td>
</tr>
<tr>
<td>Of the 267 participants who answered our survey question on emotional or</td>
<td></td>
</tr>
<tr>
<td>mental health, 86.5% indicated that they had experienced emotional or mental</td>
<td></td>
</tr>
<tr>
<td>conditions while being without permanent housing. Depression (61.0%) was</td>
<td></td>
</tr>
<tr>
<td>the most-frequently reported condition. Nearly one out of every five reported</td>
<td></td>
</tr>
<tr>
<td>suicidal thoughts or actions.</td>
<td></td>
</tr>
<tr>
<td>Almost half of the participants reported pain in the back, neck or joints</td>
<td>20</td>
</tr>
<tr>
<td>and over one-third indicated dental problems.</td>
<td></td>
</tr>
<tr>
<td>More than one in every five reported conditions related to significant</td>
<td>19</td>
</tr>
<tr>
<td>weight gain or loss, foot problems, vision or hearing problems, frequent</td>
<td></td>
</tr>
<tr>
<td>headaches, high blood pressure, or breathing problems.</td>
<td></td>
</tr>
<tr>
<td>About one out of every six responders reported issues of drug, alcohol</td>
<td>20</td>
</tr>
<tr>
<td>addiction, or other substance abuse.</td>
<td></td>
</tr>
<tr>
<td><strong>Daily Activities</strong></td>
<td></td>
</tr>
<tr>
<td>Attempts to obtain money, either by working or searching for work, or by</td>
<td></td>
</tr>
<tr>
<td>collecting recyclables, were cited as an important part of a typical week</td>
<td>21</td>
</tr>
<tr>
<td>for many participants. Forty-four participants have permanent full-time or</td>
<td></td>
</tr>
<tr>
<td>part-time jobs. And 16 indicated that they panhandled.</td>
<td></td>
</tr>
<tr>
<td>Those who live in the homes of others, often rotating from place to place,</td>
<td></td>
</tr>
<tr>
<td>might engage in daily activities that conform to a more conventional lifestyle.</td>
<td></td>
</tr>
<tr>
<td>Some participants spend time with friends or family, and many spend time</td>
<td></td>
</tr>
<tr>
<td>seeking services at local agencies, organizations, and medical and church</td>
<td></td>
</tr>
<tr>
<td>facilities.</td>
<td></td>
</tr>
</tbody>
</table>
Table 1 Summary of Key Findings (Continued)

<table>
<thead>
<tr>
<th>Key Finding</th>
<th>Refer. Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Challenges and Obstacles</strong></td>
<td>21, 25</td>
</tr>
<tr>
<td>Safety concerns were expressed by many participants, which is why many choose to sleep in areas with other individuals with similar life circumstances, thereby looking out for each other. Intimate, permanent relationships are desirable, but, admittedly, are difficult to establish and maintain. Sometimes desperate people do desperate things to one another, which compromises trust and strains relationships.</td>
<td>22</td>
</tr>
<tr>
<td>Additional daily life challenges include locating a place to charge a cell phone; washing clothing; locating a place to stay warm on cold or raining days, such as in a public library; and engaging in leisurely activities such as taking a nap or reading a newspaper at a local park, attending a movie theatre, riding a bicycle, and doing volunteer work.</td>
<td>27</td>
</tr>
<tr>
<td><strong>Income</strong></td>
<td></td>
</tr>
<tr>
<td>The most frequently indicated sources of income were Social Security, Social Security Disability, and Private Disability Insurance. Eighty individuals, representing 30.0% percent of the 267 responders to this question, indicated this source of income, and 60 provided monthly amounts. Most of those who received income from those source received between $700 and $1,099 a month.</td>
<td>27</td>
</tr>
<tr>
<td>Another frequent source of income was income from a full or part-time job. The 44 individuals who indicated they worked at least part-time represented 16.5% of the 267 responders to this question. Ten of the 267 respondents indicated an income of $2,000 or more a month from this source.</td>
<td>27</td>
</tr>
</tbody>
</table>
The 2015 Hayward Count and Demographics

Based on our comprehensive city-wide count, we estimate that during November 2015 between 380 and 422 persons were either experiencing homelessness or were at immediate risk of becoming homeless in the City of Hayward. About 90 percent consider Hayward their home.

Given certain inherent limitations of our study, we are fairly certain that there are many more individuals and families, perhaps numbering in the thousands, at risk of becoming homeless within the next six months who are not reflected in our count. Risk factors have been studied extensively elsewhere and are quite varied. They include impending job loss, depleted savings, home foreclosure, domestic violence, increased housing costs, two or three missed paychecks, and other unforeseen circumstances. Deriving a more refined count of at risk homelessness would require a modified methodology and significant resources not available for the present study.

Table 2 provides a tabular view of our count for participants who reported age, gender, and ethnic identity data (n=336). When the actual total count of 380 participants is adjusted upwards to correct for our estimated undercount of 10.0 percent, a realistic count range of 380 to 422 participants results.

Males represent about 55 percent of the participants who reported demographic information, and persons aged 31 and over represent nearly two-thirds. By ethnic group, Hispanics represent 35.1 percent, White participants 25.8 percent, and African Americans 17.8 percent.

The remaining ethnic groups combined represent 21.1 percent. When compared with Hayward’s general population for census year 2010, our data suggest that African Americans might be slightly over-represented in the city’s homeless population by about 5 percentage

<table>
<thead>
<tr>
<th>Table 2</th>
<th>Estimated Count of Homelessness by Ethnic Group, Gender, and Age Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>African Am.</td>
</tr>
<tr>
<td></td>
<td>M</td>
</tr>
<tr>
<td>0–5</td>
<td>3</td>
</tr>
<tr>
<td>5–12</td>
<td>2</td>
</tr>
<tr>
<td>13–17</td>
<td>2</td>
</tr>
<tr>
<td>18–30</td>
<td>5</td>
</tr>
<tr>
<td>31–54</td>
<td>17</td>
</tr>
<tr>
<td>55+</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>36</td>
</tr>
</tbody>
</table>

*Other includes Asian, Native American and multiracial.
points, and White persons by about 7 percentage points. Hispanics do not appear to be overrepresented.

Of the families with children under 18, about 31 percent were *house surfing* with friends or relatives during the time of our count, and 26 percent were residing in a shelter or transitional housing. Only 5 families with children reported living in an unsafe outdoor area, such as a park, sidewalk, condemned building, or car during the time of our count. It is encouraging that Governor Brown’s 2016-17 Budget Act repealed the maximum family grant rule on CalWORKs participants, which for more than two decades banned additional money for any child born into a family that had been receiving such aid (*The Sacramento Bee*, June 16, 2016). Equally relevant, the state’s 2016-17 budget appropriates $2 billion in new funding to build housing for people with mental illness and to raise rates for childcare providers.

**Educational Attainment**

<table>
<thead>
<tr>
<th>Educational attainment</th>
<th>Ethnic group</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>African Am.</td>
<td>Hispanic</td>
<td>White</td>
<td>Other</td>
<td>Row Total</td>
</tr>
<tr>
<td>Did not graduate high school</td>
<td>7</td>
<td>36</td>
<td>19</td>
<td>11</td>
<td>73</td>
</tr>
<tr>
<td></td>
<td>14.6%</td>
<td>48.0%</td>
<td>22.9%</td>
<td>14.1%</td>
<td>25.7%</td>
</tr>
<tr>
<td>High school graduate or GED</td>
<td>21</td>
<td>23</td>
<td>28</td>
<td>14</td>
<td>86</td>
</tr>
<tr>
<td></td>
<td>43.8%</td>
<td>30.7%</td>
<td>33.7%</td>
<td>17.9%</td>
<td>30.3%</td>
</tr>
<tr>
<td>Some college</td>
<td>13</td>
<td>11</td>
<td>25</td>
<td>17</td>
<td>66</td>
</tr>
<tr>
<td></td>
<td>27.1%</td>
<td>14.7%</td>
<td>30.1%</td>
<td>21.8%</td>
<td>23.2%</td>
</tr>
<tr>
<td>2-Year degree or higher</td>
<td>7</td>
<td>5</td>
<td>11</td>
<td>36</td>
<td>59</td>
</tr>
<tr>
<td></td>
<td>14.6%</td>
<td>6.7%</td>
<td>13.3%</td>
<td>46.2%</td>
<td>20.8%</td>
</tr>
<tr>
<td>Totals</td>
<td>48</td>
<td>75</td>
<td>83</td>
<td>78</td>
<td>284</td>
</tr>
<tr>
<td></td>
<td>100.0%</td>
<td>100.0%</td>
<td>100.0%</td>
<td>100.0%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

This table reflects the educational attainment only of individual survey respondents rather than the total household number reflected in Table 2. Approximately 26 percent of the participants did not graduate from high school, 30 percent received a high school diploma or a GED, 23 percent have at least some college experience, and about 21 percent earned a two-year degree or higher. No differences were detected by gender. However, we did find one striking difference in educational attainment by ethnic group. As shown in Table 3 above, nearly half of Hispanic persons experiencing homelessness (48 percent) did not graduate from high school, compared with only 15 percent of African Americans and 23 percent of White participants. Those disparities translate to a difference of 34 percentage points between the Hispanic group and African Americans, and a difference of 25 percentage points between the Hispanic group and White participants.
Marital Status

About half (48%) of the persons experiencing homelessness in Hayward are single, 29 percent are divorced or separated, 15 percent are either married or in a long-term relationship, and 8 percent are widowed.

Residency

Approximately 70 percent of the participants were living in Hayward prior to experiencing homelessness and housing insecurity. There was a great deal of variation in the number of years participants reported being without permanent housing. The median number was ten years, meaning that half of the participants have been without housing for ten years or less, while the other half have been without housing for ten or more years. About 25 percent have been without housing for 2 years or less. We report the median here rather than the average because the median is less sensitive to outliers—extremely low and high numbers that skew data.

The three top ranked reasons for participants living in Hayward were family roots and ties in Hayward (#1), availability of social services and public assistance (#2), and appealing environmental city features, such as park and recreational facilities, favorable climate, multiculturalism, and a wide selection of eateries (#3).

Living Area during Recent 30-day Period.

Participants were asked to estimate the average number of days they and their families slept in various city locations during a most recent 30-day period. As reported, participants spent an average of 25 days sleeping in an outdoor area, such as a car, park, city sidewalk, or a building/physical structure; 21 days in an emergency shelter or transitional housing; 9 days in a hotel or motel; and 8 days with friends or relatives. Few participants reported sleeping some evenings at other locations, such as at a subsidized housing site or a treatment facility.

Veteran Status

During our November 2016 Count, 25 participants stated that they were veterans of the U.S. Armed Forces. Of this number, about half had combat experience. We were curious to know if veterans with combat experience were confronting mental health issues more so than veterans with no combat experience. A cross-tabulation revealed no such differences. What we did find, however was that veterans as a whole—those with and without combat experience—were slightly more likely to have suicidal thoughts or actions than non-veterans, 24 percent compared with 19.5 percent, respectively.
Foster Care Status

Thirty-eight survey participants indicated that part of their life as a youth had been spent in a Foster Care System. By ethnicity, 15 (39.0%) are White, 8 (21.0%) are Multi-racial, 6 (16.0%) are Hispanic/Latino, 5 (13.0%) are African American, 1 (3.0%) is a Native American, and 3 (8.0%) self-identified as “Other” ethnicity.
PERSONAL STORIES

Introduction

In addition to collecting general demographic data, the Hayward Task Force to End Hunger and Homelessness directed our study team to collect information on the lived experiences of persons and families confronting homelessness and housing insecurity to support long-range planning.

For the purpose of our count and study, we define as the following terms:

Homelessness: A state in which an individual or family unit does not have permanent, legal, safe, and stable living quarters.

Family unit: Individuals who, by affinity, marriage, or blood relation, comprise a consistent unit, traveling or residing together.

Stable: A person or family unit that is able to maintain or stay in legal housing for the foreseeable future.

A Person at Risk of Becoming Homeless: A potential loss of a permanent legal dwelling is imminent.

We did not count as homeless, persons or families who stated that they had the personal means, or the support means of friends and relatives, necessary to maintain current occupancy of a legal dwelling for at least three months.

To accomplish the aims of the study, quantitative and qualitative procedures were undertaken. A structured survey was administered that involved questions related to primary reasons for residing in Hayward, reasons for not having a permanent place to live, reasons preventing one from maintaining employment, physical and mental health condition, veteran status, foster care status, and sources of income. The Survey Intake Form is shown in Appendix C and the specific survey questions are delineated in Appendix D.

Qualitative procedures consisted of a focus group session and in-depth interviews with a random selection of participants who were willing to share their personal stories with survey field workers. Interview questions were organized by three themes: Present and Previous Homeless Circumstances, Weekly Routine, and Confronting Challenges and Obstacles. The specific interview questions are shown in Appendix F, and a summary of the language-based narrative data is shown in Appendix E. Our complete research procedures and methods used in this study are outlined in detail in Appendix G.

Their stories, and our interpretation of them, follow.
Present and Previous Homeless Circumstances

It is important not only to understand the range of circumstances associated with homelessness in Hayward, but also to hear directly from participants about the strategies they use in attempting to improve their living situation. We also wanted to get a better handle on the experiences of participants who were able to secure legal stable housing for long periods of time, only to find themselves without housing again.

*Reasons for Housing Insecurity and Homelessness in Hayward are Quite Diverse*

The stories that participants shared regarding housing insecurity and homelessness are quite varied. Table 4 provides a ranking of the top 12 reasons underlying homelessness, as expressed by participants.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Primary Reason</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Income too low to meet needs</td>
<td>109</td>
</tr>
<tr>
<td>2</td>
<td>Couldn’t find affordable housing</td>
<td>106</td>
</tr>
<tr>
<td>3</td>
<td>Job loss</td>
<td>101</td>
</tr>
<tr>
<td>4</td>
<td>Mental health, PTSD</td>
<td>64</td>
</tr>
<tr>
<td>5</td>
<td>Depleted savings</td>
<td>56</td>
</tr>
<tr>
<td>6</td>
<td>Can’t work due to health reasons</td>
<td>48</td>
</tr>
<tr>
<td>7</td>
<td>Loss of loved ones</td>
<td>39</td>
</tr>
<tr>
<td>8</td>
<td>Family disputes</td>
<td>34</td>
</tr>
<tr>
<td>9</td>
<td>Addiction</td>
<td>33</td>
</tr>
<tr>
<td>10</td>
<td>Domestic violence</td>
<td>26</td>
</tr>
<tr>
<td>11</td>
<td>Divorce</td>
<td>12</td>
</tr>
<tr>
<td>12</td>
<td>Home foreclosure</td>
<td>9</td>
</tr>
</tbody>
</table>

We had anticipated that Hayward would be similar to other U.S. cities, with low income, affordable housing, and job loss ranking high among factors contributing to homelessness. That mental health issues ranked fourth is further evidence of the tremendous need for increased federal and state funding for mental health. The state budget includes $2 billion in new funding to address emerging needs, including the need for housing for persons experiencing mental illness.
City Planning must be Broad-based and Microscopic

There are several things that must be kept in mind when reviewing and interpreting the data listed in Table 4. Foremost, although the table lists rankings of individual factors, it is well understood that most contributing factors are multifaceted in that they overlap and are not independent of one another. For example, of the 109 participants that listed low income as a contributing factor, nearly 70 percent also listed lack of affordable housing as a contributing factor, and more than a third listed job loss and depleted savings as contributing factors. This finding reaffirms a planning approach adopted by most cities, including Hayward, that to be effective in addressing homelessness, planning must be macroscopic enough to tackle a range of contributing factors simultaneously, while also being microscopic enough to address unique circumstances.

The term, microscopic, is used to highlight the idea that while tabular data are useful as a descriptive summary tool, one must dig deeper into the manner in which a factor is manifested in human experience. For example, the reasons for job loss are varied, the reasons for depletion of savings are varied, and the reasons for one’s inability to find affordable housing are varied.

In statistical terms, this observation is referred to as within-group variation. In regards to our study, a narrative inquiry approach meant being attentive to the unique stories that people told about their experiences regarding factors contributing to homelessness. An example related to job loss and low income is provided in Vignette 1.

<table>
<thead>
<tr>
<th>Vignette I.</th>
<th>Selected Narratives: Job Loss and Low Income</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ID 001</strong></td>
<td>I am a single woman unemployed for the second time. I have been unable to work since May 2015 due to upcoming surgery. Declining health issues decreased my income, and the lack of money to provide for basic needs and housing is causing me to be depressed, as I have no idea what I am going to do or where I am going to live.</td>
</tr>
<tr>
<td><strong>ID 852</strong></td>
<td>I have been without permanent housing for approximately five years. I quit my job due to a dispute, and my medical condition led to a divorce that resulted in a loss of my income, my children, and my housing.</td>
</tr>
<tr>
<td><strong>ID 691</strong></td>
<td>I am a 57-year-old man I had permanent housing, but then I lost my job because the company I worked for shut down. I have been couch surfing, going from one friend’s house to another. I would like to stay in Hayward, but rent prices have gotten more expensive.</td>
</tr>
</tbody>
</table>

All three persons cited in Vignette I experienced job loss resulting in a decline in income, but each of their stories is somewhat different. Planning must be informed by such differences.
Weekly Routine

Unemployment and health issues can be expected to be a part of the daily lives and weekly routines of many of those who are living their days without permanent housing.

Hayward residents who are unable to maintain a regular dwelling may suffer not only from financial and employment issues but also from physical or emotional issues that can affect their ability to obtain housing. Time spent without permanent housing can lead to multiple cumulative adverse effects. Providing access to treatment for physical or mental conditions, and or employment training or job application assistance, can be of great assistance to those who are currently without housing, or who are likely to become so.

One male interviewee said he has several challenges he has been attempting to overcome: depression, back issues, lack of social skills, and obesity. The lack of permanent housing and employment has prevented him from overcoming these challenges, and has resulted in increased weight. And depression prohibits him from engaging in relationships.

As indicated in the previous section, mental health issues were listed by survey respondents as the fourth-ranking primary reason for homelessness. Being unable to work due to health reasons was ranked 6 as the primary reason for homelessness. And job loss was reported as the third ranking cause of the lack of permanent residence.

The inability to have sufficient employment, or employment at a level that provides sufficient income to cover residential costs, is closely related to the inability to maintain permanent housing. Both of these issues affect the daily and weekly routines of the affected individuals.

*Cause of Current Lack of Employment*

<table>
<thead>
<tr>
<th>Rank</th>
<th>Cause of current unemployment</th>
<th>Responses</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Physical health</td>
<td>78</td>
<td>29.20%</td>
</tr>
<tr>
<td>2</td>
<td>Other issues</td>
<td>67</td>
<td>25.1%</td>
</tr>
<tr>
<td>3</td>
<td>Mental health</td>
<td>65</td>
<td>24.4%</td>
</tr>
<tr>
<td>4</td>
<td>Need training</td>
<td>35</td>
<td>13.1%</td>
</tr>
<tr>
<td>5</td>
<td>Not applicable. I have a steady job.</td>
<td>28</td>
<td>10.5%</td>
</tr>
<tr>
<td>6</td>
<td>Nothing available in my field</td>
<td>25</td>
<td>9.4%</td>
</tr>
<tr>
<td>7</td>
<td>History of incarceration</td>
<td>21</td>
<td>7.9%</td>
</tr>
<tr>
<td>8</td>
<td>I prefer not to work</td>
<td>11</td>
<td>4.1%</td>
</tr>
<tr>
<td>9</td>
<td>Immigration status</td>
<td>8</td>
<td>3.0%</td>
</tr>
</tbody>
</table>
Survey participants were asked about the causes of their current unemployment. Of the responders to that question, 10.5 percent indicated that they did have a steady job. It can be reasonably presumed that the income from such a job, whether full or part time, is not sufficient to cover the expense of currently available accommodations. In fact, income too low to meet needs was reported in the previous section as the first-ranked reason for homelessness.

In responding to question regarding what prevents an individual from maintaining employment, the most frequently selected response indicated issues of physical health. Other issues and mental health issues were each selected by about one-fourth of the respondents. Responders frequently selected more than one issue.

A number of survey respondents indicated other issues that prevented them from maintaining employment. Some indicated that it was their age or that they were retired. Others reported that they were providing childcare for their children or taking care of an elderly mother. Some were doing odd jobs or had occasional employment with a firm. Several reported that it is hard to find a job. One said he does look for and apply for jobs but does not get a call back. Another cited transportation as an issue. One cited a lack of education, and one said he could not read or write.

Some individuals who have not been able to maintain employment reported that they had lost previous jobs, in at least one case because the company had shut down, and that they were actively seeking employment. Others work, but do not have full time positions. Clearly the reasons are varied, and some issues might be remedied by services provided to those seeking permanent employment. Others reflect permanent or lasting conditions such as age or disability.

<table>
<thead>
<tr>
<th>Vignette II</th>
<th>Selected Narratives: What Prevents Maintaining Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ID 122</strong></td>
<td>I have a degree and am seeking a permanent position in the field of architecture, having been laid off from my previous long time position and having had only temporary spots since then.</td>
</tr>
<tr>
<td><strong>ID 852</strong></td>
<td>I lost my housing when my company shut down. I stayed with friends and benefitted from their support and the support of my church. I have obtained a job through the assistance of these folks, but may have to relocate due to the high rent prices. I would like to stay in Hayward.</td>
</tr>
<tr>
<td><strong>ID 691</strong></td>
<td>I previously had stable employment but declining issues and the need for future surgery led to my inability to work. I had found temporary employment for a while but am currently receiving unemployment benefits.</td>
</tr>
</tbody>
</table>
**Physical Health Conditions**

Certainly, many Hayward residents who have permanent homes would indicate that they or their family members have experienced physical health conditions. But individuals without housing, and with limited resources, face serious challenges in obtaining treatment and finding comfort from the painful effects of such conditions.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Physical health condition</th>
<th>Responses</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Pain or stiffness in back, neck or other joints</td>
<td>121</td>
<td>45.5%</td>
</tr>
<tr>
<td>2</td>
<td>Dental problems</td>
<td>95</td>
<td>35.6%</td>
</tr>
<tr>
<td>3</td>
<td>Significant weight gain or loss</td>
<td>67</td>
<td>25.2%</td>
</tr>
<tr>
<td>4</td>
<td>Foot problems</td>
<td>65</td>
<td>24.3%</td>
</tr>
<tr>
<td>5</td>
<td>Vision or hearing problems</td>
<td>65</td>
<td>24.3%</td>
</tr>
<tr>
<td>6</td>
<td>Frequent headaches</td>
<td>61</td>
<td>22.9%</td>
</tr>
<tr>
<td>7</td>
<td>High blood pressure</td>
<td>58</td>
<td>21.7%</td>
</tr>
<tr>
<td>8</td>
<td>Breathing problems</td>
<td>56</td>
<td>21.0%</td>
</tr>
<tr>
<td>9</td>
<td>Drug, alcohol addiction, or other substance abuse</td>
<td>46</td>
<td>17.2%</td>
</tr>
<tr>
<td>10</td>
<td>Heart problems</td>
<td>39</td>
<td>14.6%</td>
</tr>
<tr>
<td>11</td>
<td>Digestive or urinary symptoms</td>
<td>37</td>
<td>13.9%</td>
</tr>
<tr>
<td>12</td>
<td>Diabetes</td>
<td>34</td>
<td>12.7%</td>
</tr>
<tr>
<td>13</td>
<td>Other infections, physical health problems</td>
<td>34</td>
<td>12.7%</td>
</tr>
<tr>
<td>14</td>
<td>No conditions</td>
<td>33</td>
<td>12.4%</td>
</tr>
<tr>
<td>15</td>
<td>Hepatitis</td>
<td>15</td>
<td>5.6%</td>
</tr>
<tr>
<td>16</td>
<td>Cancer</td>
<td>13</td>
<td>4.9%</td>
</tr>
<tr>
<td>17</td>
<td>Sexually transmitted infections</td>
<td>2</td>
<td>0.7%</td>
</tr>
</tbody>
</table>

When planning for the provision of services, it is useful to know that almost half of the respondents reported pain in the back, neck or joints and over one-third indicated dental problems.

More than one in every five respondents reported conditions related to significant weight gain or loss, foot problems, vision or hearing problems, frequent headaches, high blood pressure, or
breathing problems. About one out of every six responders reported issues of drug, alcohol addiction, or other substance abuse. Some of those also had other conditions.

Some of the conditions might be remedied with treatment while others are likely to remain and would indicate a need for long time assistance in the provision of affordable housing, support services, and possibly part time employment opportunities.

There were 267 individuals who responded to the question regarding physical issues, most of whom provided more than one response.

*Mental or Emotional Health Conditions*

In one sense, mental or emotional issues can lead to a loss in permanent housing, yet in another sense, a lack of permanent housing can contribute to mental or emotional issues in individuals who had not previously been so affected.

Of the 267 respondents who answered the survey question on mental health, 86.5 percent indicated that they had experienced emotional or mental conditions while being without permanent housing. Only 36 (13.5%) indicated that they had had no such condition. Many individuals reported more than one condition.

As reported in the previous section, while it is not known if one’s mental health conditions predated the lack of permanent residence, Mental Health/PTSD nonetheless was the fourth ranked reason cited by survey responders for their current lack of permanent housing.

Depression was the most-frequently reported condition, indicated by 61.0 percent of those who responded and 70.6 percent of those who indicated that they had at least one mental health condition.

Even though it was the lowest ranked response for those with mental health issues, almost one out of every five who answered the survey question reported suicidal thoughts or actions.

As with other types of conditions, some might be reduced or eliminated if participants had a permanent place to call home; other conditions might predate homelessness or be associated with other factors for which public/private assistance would be needed.
Table 7. Survey Question: Please indicate any of the conditions shown below you or your family members have experienced while being without permanent housing.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Mental or emotional health condition</th>
<th>Responses</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Depression</td>
<td>163</td>
<td>61.0%</td>
</tr>
<tr>
<td>2</td>
<td>Panic attacks, nervousness, tension, feelings of terror</td>
<td>118</td>
<td>44.2%</td>
</tr>
<tr>
<td>3</td>
<td>Anger, rage, resentment, physical aggression</td>
<td>96</td>
<td>36.0%</td>
</tr>
<tr>
<td>4</td>
<td>Uneasiness in crowds, fear of open space/travel, nervousness</td>
<td>79</td>
<td>29.6%</td>
</tr>
<tr>
<td>5</td>
<td>Hostility, suspiciousness, delusions</td>
<td>61</td>
<td>22.8%</td>
</tr>
<tr>
<td>6</td>
<td>Suicidal thoughts or actions</td>
<td>52</td>
<td>19.5%</td>
</tr>
<tr>
<td>7</td>
<td>No conditions</td>
<td>36</td>
<td>13.5%</td>
</tr>
</tbody>
</table>

Daily Activities

In spite of the lack of housing, low or no income, and physical or emotional/mental conditions, those who consider Hayward their current home and are without permanent housing in Hayward spend each day doing something. Those who live in the homes of others, often rotating from place to place, might live a more conventional lifestyle.

Some of those who are homeless sleep in cars. Some have full-time or part-time jobs. Others spend time looking for work. And some spend time with friends or family. Many receive services at local agency, organization, medical, and church facilities during the week. A few are being temporarily accommodated at local housing facilities.

Some participants said attempts to obtain money, either by working or searching for work or by collecting recyclables or panhandling, were an important a part of their typical week. Food, friends and family were also important to the typical week. Many interviewees also indicated concern for safety, which is why some choose to sleep in areas with other individuals with similar conditions, “looking out for each other.” Some participants that have cars park them in areas they consider safe.

As mentioned previously, a transcription of the qualitative responses is provided in Appendix F. Those narrations provide interesting and useful information for policymakers to consider when consider viable ways to address homelessness. The following are some qualitative responses to interview questions regarding daily activities and things done for enjoyment, fun and relaxation.
Vignette III Selected Narratives Regarding: Daily Activities

| ID 403 | I go to local community centers and play ping pong, sometimes, and sometimes play basketball with others near a playground on the weekend. I like the farmer’s market where sometimes the vendors are nice and give me free food. I go to the library to hang out, read books, sleep, and charge my cell phone. |
| ID 692 | I try to collect bottles and cans and then recycle them to make a little bit of money. I use the money to purchase gas for my car where I sleep. I am aware of some shelters but am not sure how safe they are. |

Our study confirms the ongoing need for services to assist participants in obtaining work and a living wage; finding appropriate counseling and medical help; locating food, water, places to shower and wash clothing; and, of course, locating safe, affordable housing, which might mean a rented room in an existing building or private home.
Confronting Challenges and Obstacles

Introduction

Individuals and families experiencing housing insecurity and periods of homelessness face numerous challenges and obstacles on a daily basis as they attempt to improve their livelihood, well-being, and housing situation. Our study team sought to understand those challenges and obstacles more insightfully by asking questions such as:

- What challenges do you desire to overcome but have not been able to do?
- What are some of the major stumbling blocks?
- What would you like your life to look like a year or so from now?
- How do you plan to make changes in your life?
- Describe challenges and difficult situations you were successful in overcoming.
- How difficult is it to establish or maintain personal or intimate relationships that you desire?

This section summarizes what we have learned.

The nature of housing

Reducing the number of Hayward residents who are homeless and reducing the challenges and obstacles they face requires locating or increasing the number of places such individuals could call home. A home is often referred to as a dwelling-place used as a permanent or semi-permanent residence, not a temporary place to sleep. It might be a house or apartment or a room in a private home or in a facility. A new home might be found in new construction or in the conversion of buildings not currently occupied and that originally served a different purpose. It might be found by increasing the number of Hayward home owners who offer unused rooms for rent. A home might even be a small trailer or shed or even a tent. A home is a personal place where people feel that they belong.

Monthly housing affordability

In asking participants what monthly housing cost would be accessible, the Task Force hoped to define the parameters of housing affordability for the target population. Secondarily, if such a resource were available, the Task Force wanted to know if people would access it. Given this information, housing developers and policymakers could gain insights into the types of units that would address housing crises for individuals experiencing or at risk of homelessness.

While most of those who are without permanent housing in Hayward are independent individuals, some have spouses, partners, children or other family members or close friends with whom they would share a residence. Single rooms, while appropriate for most, would not be sufficient for all. Therefore, while individuals who participated in the survey supplied the
amount of rent they could pay, some may have been thinking of a single room while others with families would have need for a multi-bedroom apartment.

Table 8. Survey Question: “Given your present circumstances, what monthly housing/apartment cost would be affordable to you on a permanent basis if it were available?”

<table>
<thead>
<tr>
<th>Monthly rent</th>
<th>Responses</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>No response, or Could not pay anything</td>
<td>92</td>
<td>34.5%</td>
</tr>
<tr>
<td>Less than $100</td>
<td>3</td>
<td>1.1%</td>
</tr>
<tr>
<td>$100 to $199</td>
<td>13</td>
<td>4.9%</td>
</tr>
<tr>
<td>$200 to $299</td>
<td>12</td>
<td>4.5%</td>
</tr>
<tr>
<td>$300 to $399</td>
<td>22</td>
<td>8.2%</td>
</tr>
<tr>
<td>$400 to $499</td>
<td>24</td>
<td>9.0%</td>
</tr>
<tr>
<td>$500 to $599</td>
<td>30</td>
<td>11.2%</td>
</tr>
<tr>
<td>$600 to $699</td>
<td>21</td>
<td>7.9%</td>
</tr>
<tr>
<td>$700 to $799</td>
<td>13</td>
<td>4.9%</td>
</tr>
<tr>
<td>$800 to $899</td>
<td>11</td>
<td>4.1%</td>
</tr>
<tr>
<td>$900 to $999</td>
<td>1</td>
<td>0.4%</td>
</tr>
<tr>
<td>$1,000 to $1,099</td>
<td>10</td>
<td>3.7%</td>
</tr>
<tr>
<td>$1,100 or more</td>
<td>15</td>
<td>5.6%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>267</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

Approximately 35 percent of the participants stated that no housing/apartment cost would be affordable to them given their present circumstances, or they did not answer the question. In contrast, 175 participants stated that they could contribute to a monthly housing/rental cost if affordable housing were made available. Of that number, 101 participants indicated that they could contribute between $500 and $1,100 on a monthly basis.

Other Challenges and Obstacles

Hayward residents without permanent homes face a wide variety of challenges and obstacles from finding a safe place to sleep at night to obtaining food and maintaining connections with family and friends. For those whose health conditions and age would allow them to work, finding employment with sufficient income is a challenge. Participants also listed challenges ranging from locating a place to charge a cell phone or wash clothing to needing services for dental, medical and mental health care, and assistance in redressing discrimination due to being homeless.
Many were interviewed or surveyed at facilities that do provide some services designed to assist those without homes in meeting their daily challenges. Some individuals stated that the services were helpful, while others listed some problems related to long waiting lists or services restricted to only certain types of residents without homes, such as families or seniors.

Intimate, permanent relationships are desirable, but, admittedly, are difficult to establish and maintain. Sometimes desperate people do desperate things to one another, which can compromise trust and strain relationships among participants.

<table>
<thead>
<tr>
<th>Vignette IV.</th>
<th>Selected Narratives: Confronting Challenges and Obstacles</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CRIL 1</strong></td>
<td>I am a male facing several challenges that I am attempting to overcome: depression, back issues, lack of social skills, and obesity. The lack of permanent housing and employment has prevented me from overcoming those challenges and has resulted in increased weight. Depression prohibits me from engaging in relationships.</td>
</tr>
<tr>
<td><strong>Survey</strong></td>
<td>My greatest challenge is the high cost of rent. It is hard to find a place with children. I can't afford more than one bedroom and people will not rent a one-bedroom apartment to someone with two children.</td>
</tr>
<tr>
<td><strong>ID 691</strong></td>
<td>My life has become more positive due to active membership in a Hayward church which provides me with meals and social support and through which I have obtained a new job. But I might leave Hayward due to the cost of rent here. I would like to stay here where my friends, family and church are located. I feel that I could help others in Hayward and be with my church.</td>
</tr>
</tbody>
</table>

Churches, charities, and agencies that provide food, clothing, medical and counseling assistance, as well as assistance with job training, skill development and the application process, and other vital services, will continue to be important to low income and special Hayward residents, even if all such Hayward residents had permanent housing. But assistance in obtaining an affordable permanent home would clearly make a major change in the lives of those currently confronting the challenges and obstacles of homelessness. The following are some of the comments made by homeless interviewees regarding their attempts to overcome challenges and obstacles.

In providing the challenges they were currently facing, and assessing their success in their attempts to overcome such challenges, individuals also looked forward to where they would like their lives to be in a year.
Current Income and Sources

The amount of current income received by individuals who do not have permanent housing varies a great deal. Single individuals and those who do not have special needs for which they must pay can get along with less monthly income than those who are supporting a family.

Some sources of income are long-term or permanent, such as Social Security or disability income or that from full or part-time jobs. Others require daily searches, including odd jobs, recycling, or panhandling.

Survey respondents were asked to indicate how much of their monthly income was from these specific sources: (1) full-time or part-time job, (2) panhandling, odd jobs or recycling, (3) Social Security or disability insurance, (4) Alameda County General Assistance, (5) unemployment

<table>
<thead>
<tr>
<th>Amount</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount not provided</td>
<td>20</td>
</tr>
<tr>
<td>$1–$99</td>
<td>0</td>
</tr>
<tr>
<td>$100–$299</td>
<td>3</td>
</tr>
<tr>
<td>$300–$499</td>
<td>2</td>
</tr>
<tr>
<td>$500–$699</td>
<td>4</td>
</tr>
<tr>
<td>$700–$899</td>
<td>24</td>
</tr>
<tr>
<td>$900–$1,099</td>
<td>24</td>
</tr>
<tr>
<td>$1,100–$1,299</td>
<td>1</td>
</tr>
<tr>
<td>$1,300–$1,499</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>80</td>
</tr>
<tr>
<td>No income from this source</td>
<td>187</td>
</tr>
</tbody>
</table>
insurance, (6) family and friends, (7) alimony or child support, (8) Temporary Assistance for Needy Families.

The most frequently indicated source of income for the survey participants was Social Security, Social Security Disability, or Private Disability Insurance. Eighty individuals, representing 30 percent of the 267 responders to this question, indicated this source of income and 60 provided monthly amounts. Most of those who received income from this source received between $700 and $1,099 a month. The second most frequent source of income for the survey respondents was income from a full or part-time job. The 44 individuals who indicated they worked at least part-time represented 16.5 percent of the 267 responders to this question.

Ten of the 267 respondents indicated an income of $2,000 or more a month from this source.

<table>
<thead>
<tr>
<th>Table 10.</th>
<th>Monthly income from a full- or part-time job.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount</td>
<td>Respondents</td>
</tr>
<tr>
<td>Amount not provided</td>
<td>9</td>
</tr>
<tr>
<td>$1–$99</td>
<td>0</td>
</tr>
<tr>
<td>$100–$299</td>
<td>7</td>
</tr>
<tr>
<td>$300–$499</td>
<td>4</td>
</tr>
<tr>
<td>$500–$699</td>
<td>5</td>
</tr>
<tr>
<td>$700–$899</td>
<td>0</td>
</tr>
<tr>
<td>$900–$1,099</td>
<td>3</td>
</tr>
<tr>
<td>$1,100–$1,299</td>
<td>3</td>
</tr>
<tr>
<td>$1,300–$1,499</td>
<td>0</td>
</tr>
<tr>
<td>$1,500–$1,999</td>
<td>3</td>
</tr>
<tr>
<td>$2,000–$2,999</td>
<td>7</td>
</tr>
<tr>
<td>$3,000–$3,400</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>44</td>
</tr>
<tr>
<td>No income from this source</td>
<td>222</td>
</tr>
</tbody>
</table>

The third most frequently indicated source of income was from odd jobs or collecting recyclable items. Nearly as many respondents received monthly income from these sources as those who received money from full or part-time jobs, but the amount received was much less. Of these 42 individuals, representing 15.7 percent of the respondents, only 3 earned more than $300 a month.
Table 11. Monthly income from odd jobs or from recycling.

<table>
<thead>
<tr>
<th>Amount</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount not provided</td>
<td>14</td>
</tr>
<tr>
<td>$1–$99</td>
<td>16</td>
</tr>
<tr>
<td>$100–$299</td>
<td>9</td>
</tr>
<tr>
<td>$300–$499</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>42</td>
</tr>
<tr>
<td>No income from this source</td>
<td>225</td>
</tr>
</tbody>
</table>

The fourth most common reported source of income was the Alameda County General Assistance Program. Of the 267 respondents, 28 (10.5%) indicated that they received General Assistance.

Table 12. Monthly income from General Assistance.

<table>
<thead>
<tr>
<th>Amount</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount not provided</td>
<td>14</td>
</tr>
<tr>
<td>$100–$299</td>
<td>7</td>
</tr>
<tr>
<td>$300–$499</td>
<td>12</td>
</tr>
<tr>
<td>$500–$670</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>28</td>
</tr>
<tr>
<td>No income from this source</td>
<td>239</td>
</tr>
</tbody>
</table>

Of the remaining sources of income, 16 reported panhandling as a source, and 15 of those indicated the monthly income from panhandling was $100 or less. Family and friends supplied some income to 19 participants that was generally less than $200. Unemployment insurance was a source of income for 4 of the 267 respondents, and alimony, spousal support, child support, or Temporary Assistance for Needy Families was a source of income for only 3 respondents.
Next Steps

Our study generated a wealth of quantitative and qualitative data and our principal researchers stand ready to generate additional analyses of the data should the Hayward City Council have additional or clarifying questions. Our researchers also are available to assist in developing a research protocol that would yield a more refined estimate of Hayward residents at risk of becoming homeless with in the near future. As noted at the outset of this report, deriving a more refined count of at risk homelessness would require a modified methodology and significant resources not available for the present study.

As the Council takes additional steps to increase affordable housing for Hayward residents, many novel and fresh ideas are likely to flourish. Appendix A gathers allied data that augments our findings. Our Model Practices Synthesis, included in Appendix B, outlines creative actions taken by nearby cities and states to address a range of issues pertaining to homelessness that are likely to be insightful. Other ideas and projects are likely to originate from within Hayward’s unique and diverse community.
Appendix A: Allied Data

Data provided in Appendix A were gathered through sources outside of the Count process. The information complements our work, includes community perceptions, and illuminates a more robust picture of homelessness in Hayward.

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Images of Guillermo Castro (left) and William Hayward generously provided by the Hayward Area Historical Society.
Introduction

Homelessness in Hayward is not a new phenomenon. In the mid 1800’s Guillermo Castro received a land grant that entitled him to 27,000 acres of land in Palomares Canyons, which included most of what is now the city of Hayward. With an influx of miners arriving in the area shortly after gold was discovered in California, Castro’s rancho became the site for “squatters”.\(^1\) In 1851, after a fruitless effort in the Sonora mines, William Hayward, a miner from Massachusetts, made his way to San Francisco and eventually became one of those squatters on Castro’s property. Hayward illegally occupied that land until some of Castro’s workers discovered him and informed Castro of Hayward’s presence.\(^2\) That same year, Hayward began to work for Castro and was permitted to camp on the land until 1853 when he finally bought 60 acres of Castro’s land\(^1\). This purchase became the location for Hayward’s “frontiers retreat” where William sold liquor and other goods to miners in the area and eventually established Hayward’s Hotel.\(^2\)

OVERVIEW OF HAYWARD POPULATION

The city of Hayward, nestled in southern Alameda County, California, has a growing and diversifying population. Some of the notable socioeconomic and demographic changes in the city over the past few decades, which may be contributing factors to increased incidence of homelessness in Hayward, include:

- Between 1990 and 2015, the city of Hayward’s population increased from 111,498 to 158,289, a rate of 42.0% (Metropolitan Transportation Commission, 2016). During the same time period, the rate of population growth in Alameda County as a whole was 28.1% (Ibid.).
- As the Bay Area economy grows, the city of Hayward has seen an increase in median household income. During the period of 1990 to 2014, median household income increased at a rate of 73.9% in Hayward. Over the same time period, Alameda County saw an overall 96.5% rate of increase in median household income (U.S. Census Bureau,\(^3\)).

---


The median household income in Hayward in 2014 was $62,691, compared to $73,775 for the county as a whole (Ibid.).

The poverty rate in Hayward has seen a gradual increase over the past two decades. The rate of poverty in the city of Hayward in 1990 was 9.5% and grew to 14.5% by 2014 (MTC, 2016). Additionally, the unemployment rate in Hayward increased from 3.9% in 1990, to 15.3% in 2010 following the U.S. financial crisis from 2007 to 2008, and decreased to 7.5% in 2015 (U.S. Bureau of Labor Statistics, 2016).

Figure 2: Unemployment Trends in Hayward, California and the U.S., 1990-2015

The racial and ethnic makeup of Hayward has diversified over the past two decades. Most notably, the Hispanic or Latino population has grown from 23.4% in 1990 to 40.6% in 2014, while the White population has decreased from 61.8% in 1990 to 18.0% in 2014 (US Census Bureau, 2016, City of Hayward, 2016). Additionally, the Asian population has grown from 15.6% in 1990 to 23.6% in 2014, and the Black or African American population has grown from 9.8% to in 1990 to 11.2% in 2014 (Ibid.).
• The high school graduation rate in Hayward over the period of 2010 to 2014 was 80%, with 24% holding Bachelor’s degrees or higher (U.S. Census Bureau, 2016).
• About 4% of Hayward’s population are veterans and about 6.6% have a disability. The average per person income is $25,770.³

ALAMEDA COUNTY HOMELESS COUNT

In 2015, the Alameda County Continuum of Care, known as EveryOne Home, conducted the biannual Point in Time Count, EveryOne Counts! This report indicates that overall, the number of people experiencing homelessness throughout Alameda County has decreased about 5% (by 224 individuals) since 2013 (EveryOne Home, 2016). The report largely attributes this change to the impact of countywide efforts to secure permanent housing for individuals who are homeless.

About 59% of the Alameda County population of people experiencing homelessness is unsheltered – meaning living in a place not meant for human habitation – compared to neighboring Santa Clara County with 71% unsheltered, and San Francisco County with 61% unsheltered (Ibid.). Targeted outreach and interventions appear to be making an impact on specific subpopulations of those who are homeless (e.g. veterans, transitional aged youth, families) as each of those populations saw some decline in numbers. Chronic homelessness has remained constant, making up about 13% of the sheltered population and 22% unsheltered (Ibid). Adults with severe and persistent mental illness make up about one-third of the sheltered population and 13.5% of the unsheltered (Ibid.).

Table 1: Point in Time Count, Alameda County, 2015

<table>
<thead>
<tr>
<th>Count by Household Type and Sheltered vs. Unsheltered</th>
<th>Sheltered Count</th>
<th>Unsheltered Estimate</th>
<th>Total Homeless Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persons in Households with at Least One Adult and One Child</td>
<td>741</td>
<td>244</td>
<td>985</td>
</tr>
<tr>
<td>Persons in Households with Children Only</td>
<td>13</td>
<td>0</td>
<td>13</td>
</tr>
<tr>
<td>Persons in Households with Adults Only</td>
<td>889</td>
<td>2,153</td>
<td>3,042</td>
</tr>
<tr>
<td>Total</td>
<td>1,643</td>
<td>2,397</td>
<td>4,040</td>
</tr>
</tbody>
</table>

Source: EveryOne Home; Alameda County Community Assessment, Planning and Evaluation Unit, 2016.

In accordance with the U.S. Department of Housing and Urban Development guidelines, *EveryOne Counts!* defines residence in emergency shelters and transitional housing projects as “sheltered.” People who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans... [are] counted as unsheltered homeless persons (Ibid.).

Table 2: Demographic Characteristics of Alameda County Homeless Population, 2015

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Persons in All Household Types</th>
<th>Count</th>
<th>%</th>
<th>Estimate</th>
<th>%</th>
<th>Estimate</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persons &lt;18</td>
<td>424</td>
<td>25.8%</td>
<td>117</td>
<td>4.9%</td>
<td>541</td>
<td>13.4%</td>
<td></td>
</tr>
<tr>
<td>Persons 18-24</td>
<td>303</td>
<td>18.4%</td>
<td>111</td>
<td>4.6%</td>
<td>414</td>
<td>10.2%</td>
<td></td>
</tr>
<tr>
<td>Persons 25+</td>
<td>916</td>
<td>55.8%</td>
<td>2,169</td>
<td>90.5%</td>
<td>3,085</td>
<td>76.4%</td>
<td></td>
</tr>
<tr>
<td>Total Persons</td>
<td>1,643</td>
<td>100.0%</td>
<td>2,397</td>
<td>100.0%</td>
<td>4,040</td>
<td>100.0%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Persons in All Household Types</th>
<th>Count</th>
<th>%</th>
<th>Estimate</th>
<th>%</th>
<th>Estimate</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>864</td>
<td>48.9%</td>
<td>1,681</td>
<td>70.1%</td>
<td>2,485</td>
<td>61.5%</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>833</td>
<td>50.7%</td>
<td>696</td>
<td>29.0%</td>
<td>1,529</td>
<td>37.5%</td>
<td></td>
</tr>
<tr>
<td>Transgender Male to Female</td>
<td>5</td>
<td>0.3%</td>
<td>21</td>
<td>0.9%</td>
<td>26</td>
<td>0.6%</td>
<td></td>
</tr>
<tr>
<td>Transgender Female to Male</td>
<td>1</td>
<td>0.1%</td>
<td>0</td>
<td>0.0%</td>
<td>1</td>
<td>0.0%</td>
<td></td>
</tr>
<tr>
<td>Total Persons</td>
<td>1,643</td>
<td>100.0%</td>
<td>2,397</td>
<td>100.0%</td>
<td>4,040</td>
<td>100.0%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Persons in Households with at Least One Adult and One Child</th>
<th>Count</th>
<th>%</th>
<th>Estimate</th>
<th>%</th>
<th>Estimate</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American/Black</td>
<td>283</td>
<td>59.2%</td>
<td>105</td>
<td>43.7%</td>
<td>388</td>
<td>54.0%</td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td>9</td>
<td>1.9%</td>
<td>2</td>
<td>0.8%</td>
<td>11</td>
<td>1.5%</td>
<td></td>
</tr>
<tr>
<td>Latino</td>
<td>113</td>
<td>23.6%</td>
<td>83</td>
<td>34.5%</td>
<td>196</td>
<td>27.3%</td>
<td></td>
</tr>
<tr>
<td>Pacific Islander</td>
<td>11</td>
<td>2.3%</td>
<td>0</td>
<td>0.0%</td>
<td>11</td>
<td>1.5%</td>
<td></td>
</tr>
<tr>
<td>Multiracial</td>
<td>21</td>
<td>4.4%</td>
<td>2</td>
<td>0.7%</td>
<td>23</td>
<td>3.2%</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>41</td>
<td>8.6%</td>
<td>18</td>
<td>20.2%</td>
<td>89</td>
<td>12.5%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>478</td>
<td>100.0%</td>
<td>240</td>
<td>100.0%</td>
<td>718</td>
<td>100.0%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Persons in Adult-Only Households</th>
<th>Count</th>
<th>%</th>
<th>Estimate</th>
<th>%</th>
<th>Estimate</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American/Black</td>
<td>443</td>
<td>59.5%</td>
<td>827</td>
<td>38.4%</td>
<td>1,270</td>
<td>43.8%</td>
</tr>
<tr>
<td>American Indian</td>
<td>8</td>
<td>1.1%</td>
<td>37</td>
<td>1.7%</td>
<td>45</td>
<td>1.6%</td>
</tr>
<tr>
<td>Asian</td>
<td>22</td>
<td>3.0%</td>
<td>41</td>
<td>1.9%</td>
<td>63</td>
<td>2.2%</td>
</tr>
<tr>
<td>Latino</td>
<td>54</td>
<td>12.6%</td>
<td>154</td>
<td>7.1%</td>
<td>248</td>
<td>8.5%</td>
</tr>
<tr>
<td>Pacific Islander</td>
<td>5</td>
<td>0.7%</td>
<td>15</td>
<td>0.7%</td>
<td>20</td>
<td>0.7%</td>
</tr>
<tr>
<td>Multiracial</td>
<td>42</td>
<td>5.6%</td>
<td>92</td>
<td>4.3%</td>
<td>134</td>
<td>4.6%</td>
</tr>
<tr>
<td>White</td>
<td>127</td>
<td>17.0%</td>
<td>903</td>
<td>41.9%</td>
<td>1,030</td>
<td>35.5%</td>
</tr>
<tr>
<td>Missing</td>
<td>4</td>
<td>0.5%</td>
<td>83</td>
<td>3.9%</td>
<td>87</td>
<td>3.0%</td>
</tr>
<tr>
<td>Total</td>
<td>745</td>
<td>100.0%</td>
<td>2,152</td>
<td>100.0%</td>
<td>2,897</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

Source: EveryOne Home; Alameda County Community Assessment, Planning and Evaluation Unit, 2016.

You may note that there appears to be inconsistency between Tables 1 and 2 above. Not all respondents reflected in Table 1 answered all questions reflected in Table 2.
HOMELESSNESS IN HAYWARD SCHOOLS

The Hayward Unified School District (HUSD) provides support for homeless and at-risk students, in accordance with the federal McKinney-Vento Education of Homeless Children and Youth Assistance Act. HUSD identifies homeless children and youth as those “who lack a fixed, regular, and adequate nighttime residence”. The district works with these students to ensure they have consistent and safe access to school, and receive supportive programming to set them on a pathway for success.

Table 3: Number of HUSD Children and Youth Identified as Homeless During 2014-2015 School Year

<table>
<thead>
<tr>
<th>Living Situation</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporary shelter</td>
<td>61</td>
</tr>
<tr>
<td>Hotel or motel</td>
<td>25</td>
</tr>
<tr>
<td>Temporarily doubled up</td>
<td>558</td>
</tr>
<tr>
<td>Temporarily unsheltered</td>
<td>18</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>662</strong></td>
</tr>
</tbody>
</table>


The Alameda County Office of Education operates schools outside of HUSD, but similarly tracks and provides programs for students who are identified as homeless, as per the McKinney-Vento legislation. In Hayward, the Alameda County Office of Education runs the Community Day School, which enrolls middle and high school age students who have been expelled from the local school district. During the 2014-2015 school year three students at the Community Day School were identified as homeless. One student was living in a hotel or motel and two were temporarily doubled up. Annual average attendance at the Community Day School is between 45 and 80 students.

There are 460,000 students throughout the California State University System (CSU) and about one in ten of them is homeless according to a January 2016 study.

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5 HUSD enrollment during the 2014-2015 school year was approximately 20,000 students.
CSU East Bay recently launched Pioneers for HOPE to address this issue for local students. Case Management Coordinator, Alex Baker, is part of the university’s Care Team, which works with students facing homelessness, hunger, and other issues. Since February of 2016, 100 students in crisis have been identified. “[Homelessness] takes away their hope … many of the students that face housing and food insecurity are either depressed or have suicidal thoughts and feel they have no reason to live or continue,” Baker said. “It takes away their drive to accomplish their dreams.”

HOUSING AND HOUSING AFFORDABILITY

There is a nationwide trend toward finding permanent housing for homeless individuals. However, the process of identifying sustainable housing solutions for homeless individuals is complicated by a myriad number of factors, including shortage of housing stock, misalignment of household size and need, and the fact that landlords often do not accept housing subsidies.

For the purposes of this report, affordable housing refers to permanent, legal housing where the cost of building and or living in the unit is less expensive, either through subsidies or by design. Market rate housing refers to properties (i.e. single family home, rental apartment, condominium) that are rented or owned by people who pay market rent to lease the property, or paid market value when they bought the property. There is no subsidy for market rate housing. A rough estimate of 2015 building costs for a market-rate, good quality, 750-square foot unit with one bathroom, central heating, parking garage space, and a covered porch is $190,000.

In Hayward, there are 21,430 rental housing units of which 8.8% (1,885) are set aside as affordable housing through a variety of government subsidies and regulations (see Table 4). According to the U.S. Census, in 2015, 14.5% of Hayward’s population was living at or below the federal poverty limit. As of the first quarter of 2016, the vacancy rate for all rental housing in the San Francisco-Oakland-Hayward, California region was 3.7%.

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8 CSUEB Aims to Lower Number of Hungry, Homeless Students, www.ebtoday.com/stories/csueb-aims-to-lower-number-of-hungry-homeless-students
10 MTC and ABAG Bay Area Census: www.bayareacensus.ca.gov/cities/Hayward.htm.
12 US Census Quarterly Vacancy Rates Table 4: www.census.gov/housing/hvs/data/rates.html.
Figure 4: Average Cost Per Unit for Completed Projects in California, 2001-2011\textsuperscript{13}

Source: California Department of Housing and Community Development, 2014.

To qualify to live in an affordable unit, the household income must be under certain limits. Depending on the affordable housing property, a household must be “Low Income” (80% of area median income), “Very Low Income” (50%), and/or “Extremely Low Income” (30%).\textsuperscript{14}

Around 1,279 of the affordable units in Hayward are classified as “family” units, which, according to the Housing Authority of Alameda County and in compliance with HUD regulations, are defined as an individual or group of people with or without children.\textsuperscript{15}

Some housing complexes have household size requirements related to the number of bedrooms in a unit. For example, a single adult (household size of one) may apply for a studio or one bedroom unit, while a three-bedroom unit requires a household size of at least three. Similarly, there are maximum numbers applied, for example, a household of eight may be required to apply for a four-bedroom unit.

Currently, affordable housing residents are only required to be income eligible when they enter affordable housing. As residents stabilize in housing, incomes may rise, but there is no requirement that they move out of the affordable unit.

\textsuperscript{13} California Affordable Housing Cost Study, October 2014, \url{www.hcd.ca.gov/housing-policy-development/docs/finalaffordablehousingcoststudyreport-with-cover2.pdf}

\textsuperscript{14} US Department of Housing and Urban Development Occupancy Handbook, Chapter 5: \url{portal.hud.gov/hudportal/documents/huddoc?id=DOC_11749.pdf}

\textsuperscript{15} Housing Authority of Alameda County definition of family: \url{www.haca.net/index.php/applicants/eligibility?id=127-family}. 
Table 4: Affordable Rental Housing Complexes in Hayward as of June 2016

<table>
<thead>
<tr>
<th>Name of Complex</th>
<th>Zip Code</th>
<th>Housing Type/Restriction</th>
<th>Number of Income Restricted Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cypress Glen</td>
<td>94544</td>
<td>Family</td>
<td>53</td>
</tr>
<tr>
<td>EC Magnolia Court</td>
<td>94541</td>
<td>Disabled</td>
<td>20</td>
</tr>
<tr>
<td>Eden Issei Terrace</td>
<td>94544</td>
<td>Senior</td>
<td>98</td>
</tr>
<tr>
<td>Faith Manor Apartments</td>
<td>94544</td>
<td>Family</td>
<td>61</td>
</tr>
<tr>
<td>Glen Berry</td>
<td>94544</td>
<td>Family</td>
<td>49</td>
</tr>
<tr>
<td>Glen Eden</td>
<td>94541</td>
<td>Family</td>
<td>36</td>
</tr>
<tr>
<td>Harris Court</td>
<td>94544</td>
<td>Family</td>
<td>19</td>
</tr>
<tr>
<td>742 Harris Court</td>
<td>94544</td>
<td>Family</td>
<td>4</td>
</tr>
<tr>
<td>Hayward Senior Housing</td>
<td>94541</td>
<td>Senior</td>
<td>59</td>
</tr>
<tr>
<td>Hayward Villa</td>
<td>94544</td>
<td>Seniors</td>
<td>77</td>
</tr>
<tr>
<td>Hayward Village</td>
<td>94541</td>
<td>Senior</td>
<td>78</td>
</tr>
<tr>
<td>Huntwood Commons</td>
<td>94544</td>
<td>Family</td>
<td>39</td>
</tr>
<tr>
<td>Josephine Lum Lodge</td>
<td>94545</td>
<td>Senior</td>
<td>148</td>
</tr>
<tr>
<td>Leidig Court Apartments</td>
<td>94544</td>
<td>Family</td>
<td>16</td>
</tr>
<tr>
<td>Lord Tennyson Apartments</td>
<td>94545</td>
<td>Family</td>
<td>249</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Complex</th>
<th>Zip Code</th>
<th>Housing Type/Restriction</th>
<th>Number of Income Restricted Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majestic</td>
<td>94542</td>
<td>Family</td>
<td>80</td>
</tr>
<tr>
<td>Mayten Manor</td>
<td>94541</td>
<td>Senior &amp;/or disabled</td>
<td>30</td>
</tr>
<tr>
<td>Montgomery Plaza</td>
<td>94541</td>
<td>Senior</td>
<td>49</td>
</tr>
<tr>
<td>Olive Tree Plaza</td>
<td>94541</td>
<td>Senior &amp;/or disabled</td>
<td>25</td>
</tr>
<tr>
<td>Park Manor Apartments</td>
<td>94544</td>
<td>Family</td>
<td>80</td>
</tr>
<tr>
<td>Sara Conner Court</td>
<td>94544</td>
<td>Family</td>
<td>55</td>
</tr>
<tr>
<td>Siena Pointe Apartments</td>
<td>94541</td>
<td>Family</td>
<td>99</td>
</tr>
<tr>
<td>South Hayward BART</td>
<td>94544</td>
<td>Family &amp;/or Senior</td>
<td>150</td>
</tr>
<tr>
<td>Sycamore Square</td>
<td>94541</td>
<td>Family</td>
<td>26</td>
</tr>
<tr>
<td>Tennyson Gardens</td>
<td>94544</td>
<td>Family</td>
<td>94</td>
</tr>
<tr>
<td>The Timbers</td>
<td>94544</td>
<td>Family</td>
<td>27</td>
</tr>
<tr>
<td>Villa Springs</td>
<td>94541</td>
<td>Family</td>
<td>65</td>
</tr>
<tr>
<td>Walker Landing</td>
<td>94545</td>
<td>Family</td>
<td>77</td>
</tr>
<tr>
<td>Weinreb Place</td>
<td>94541</td>
<td>Senior</td>
<td>22</td>
</tr>
</tbody>
</table>

Total Units: 1,885  Senior Units: 736  Family: 1,279

Note: Table 4 on was assembled by referencing and cross-referencing the following sites on June 7, 10 and 11, 2016. Most complexes had no available units and some had no openings on their wait list:

a. California State Treasurer, Projects that have received Tax Credits for construction, acquisition, and/or repairs: [www.treasurer.ca.gov/ctcac/projects.asp](http://www.treasurer.ca.gov/ctcac/projects.asp)
c. Eden Housing: [www.edenhousing.org](http://www.edenhousing.org)
d. Housing Authority of Alameda County affordable housing sites: [www.haca.net/index.php/housing-programs/80-news](http://www.haca.net/index.php/housing-programs/80-news)
f. City of Hayward Affordable Housing Properties list: [www.hayward-ca.gov/sites/default/files/BMR%20-All%20Properties_15_12_0.pdf](http://www.hayward-ca.gov/sites/default/files/BMR%20-All%20Properties_15_12_0.pdf)
Of all the affordable units in Hayward, 736 units are set aside for seniors. For most senior housing, at least one member of the household must be 62 years of age or older.16 Some units are set aside for individuals with disabilities. The U.S. Department of Housing and Urban Development defines a person with a disability as “any person who has a physical or mental impairment that substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such an impairment.”17

According to the California Housing Partnership Corporation, 91% of “Very Low Income” renters pay over 30% of their incomes for rent, and 36% pay more than half of their incomes for rent.18 One widely used approach to assist people to access rental housing are subsidized voucher programs such as Section 8 Housing Choice Voucher, Veterans Affairs Supportive Housing, Shelter plus Care, Alameda County Impact, and others.

People holding a voucher pay a portion of their income toward rent, and the U.S. Department of Housing and Urban Development provides a subsidy to the landlord for the balance, based on the federal area adjusted Fair Market Rent (FMR). In Alameda County, voucher providers are reporting that many landlords have stopped accepting vouchers. Due to the current rental market, people with vouchers may be unable to find rental properties willing to accept them because “landlords are able to rent units at rates significantly above the FMR, which ... lags [behind] real market trends.”19

17 U.S. Department of Housing and Urban Development definitions for disability and fair housing: portal.hud.gov/hudportal/HUD?src=/program_offices/fair_housing_equal_opp/HousingProviders
Figure 5: Wages Earned Versus Average Rent in 2015

Figure 6: Number of households in which rent costs outpace income in Alameda County, 2014

Per: California Housing Partnership Corporation, May 2016 Alameda County Housing Report. ELI = Extremely Low Income. VLI = Very Low Income. MOD = Moderate Income.

Source: NLIHC analysis of 2014 PUMS data.

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As of January 2016, the average monthly Social Security retirement benefit is $1,341. Depending on the recipient’s work history, dependency, and/or disability status, the benefit could be slightly higher or significantly lower. Looking at home ownership, sales prices in Hayward have risen 84% since 2010.

Figure 7: Median Rents All Home Types, 2011-2015 (Alameda County)

Figure 8: Single Family Median Sales Price, 2006-2015 (Alameda County)

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In February, 2015, BAE Urban Economics published the *Alameda County HOME Consortium Analysis of Impediments to Fair Housing Choice*. It was found that home sale price escalation has severely decreased the availability of housing that is affordable. “Housing is deemed unaffordable when monthly costs (e.g., rent, mortgage payments, utilities) exceed 30 percent of the household’s monthly income.”

Further, the report stated: “For households making less than 80 percent of Area Median Income (AMI), market rental rates are unaffordable for any apartment type in 10 of 13 jurisdictions for which data were available. For buyer households ..., fewer than four percent of recent home sales ..., [or] 66 of 1,749 sales of single-family homes ... closed at a price affordable to Alameda County households making below the 80 percent AMI level. For condominium sales, only 24 of 618 recorded sales during this period – also 3.8 percent – were affordable to households making less than 80 percent AMI.”

See Table 5 for availability in Hayward. Note, SFR is Single Family Residence.

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24 BAE Urban Economics, *Alameda County HOME Consortium Analysis of Impediments to Fair Housing Choice* February, 2015, [www.acgov.org/cda/hcd/documents/2015_Alameda_County_AI_Final_2_9_15.pdf](http://www.acgov.org/cda/hcd/documents/2015_Alameda_County_AI_Final_2_9_15.pdf)
Table 5: Affordability of Market-Rate Single-Family Homes and Condominiums, 2014

<table>
<thead>
<tr>
<th>Income Level</th>
<th>Income Limit (a)</th>
<th>Maximum Affordable Sale Price (b)</th>
<th>Percent of SFRs on Market within Price Range</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>San Leandro</td>
</tr>
<tr>
<td>Extremely Low-Income (&lt;30% AMI)</td>
<td>$27,600</td>
<td>$118,141</td>
<td>1.2%</td>
</tr>
<tr>
<td>Very Low-Income (30-50% AMI)</td>
<td>$46,000</td>
<td>$203,567</td>
<td>3.6%</td>
</tr>
<tr>
<td>Low-Income (50-80% AMI)</td>
<td>$67,600</td>
<td>$303,870</td>
<td>1.8%</td>
</tr>
<tr>
<td>Median Sale Price (c)</td>
<td>$445,000</td>
<td>$435,000</td>
<td></td>
</tr>
<tr>
<td>Number of Units Sold (c)</td>
<td>167</td>
<td>241</td>
<td>57</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Income Level</th>
<th>Income Limit (a)</th>
<th>Maximum Affordable Sale Price (b)</th>
<th>Percent of Condos on Market within Price Range</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>San Leandro</td>
</tr>
<tr>
<td>Extremely Low-Income (&lt;30% AMI)</td>
<td>$27,600</td>
<td>$54,395</td>
<td>0.0%</td>
</tr>
<tr>
<td>Very Low-Income (30-50% AMI)</td>
<td>$46,000</td>
<td>$139,031</td>
<td>0.0%</td>
</tr>
<tr>
<td>Low-Income (50-80% AMI)</td>
<td>$67,600</td>
<td>$240,125</td>
<td>4.0%</td>
</tr>
<tr>
<td>Median Sale Price</td>
<td>$321,000</td>
<td>$330,000</td>
<td></td>
</tr>
<tr>
<td>Number of Units Sold</td>
<td>25</td>
<td>55</td>
<td>10</td>
</tr>
</tbody>
</table>

Notes:
(a) Income limit for a 4-person household as published by Department of Housing and Urban Development for Oakland-Fremont MSA for 2014.
(b) Represents the amount a household at each income level could afford paying no more than 30 percent of monthly income on combined mortgage principal and interest, tax, and homeowner's insurance (PTI) payments; key assumptions are as follows:
   - Annual mortgage interest rate (fixed): 5.23%
   - Annual homeowner's insurance premium: $646.91 (SFR); $495.32 (condo)
   - Down payment as % of sale price: 20.0%
   - Homeowner's Association monthly fee: $356.85 (condos only)
   - Term of mortgage (Years): 30
   - Initial property tax rate (annual): 1.0%
(c) Reflects full and verified sales of two-, three-, and four-bedroom units sold between April 1 and June 30, 2014 based on Assessor data provided by DataQuick.
(d) Median Sale Price reported for the Unincorporated County includes sales in Castro Valley and San Lorenzo; Units Sold reported for the Unincorporated County do NOT include units sold in Castro Valley and San Lorenzo; specific sale price and volume data was not available for other unincorporated communities.
Sources: HUD; Freddie Mac; CA Department of Insurance; Condo.com; DataQuick; BAE, 2014.

OTHER SERVICE PROVIDER DATA

211

211 is a three-digit telephone number assigned by the Federal Communications Commission for the purpose of providing quick and easy access to information about local health and human services. Locally, Eden Information and Referral runs this service. In 2015, there were an average of 936 calls to 211 each month from Hayward, which received approximately 1,800 referrals to services. The yearly total equaled 11,848 calls with 21,935 referrals.

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25 211 Overview, helplinecenter.org/2-1-1-community-resources/what-is-211/
26 Eden I & R monthly and annual reports, edenir.org/reports.html
During the 2015 calendar year, Eden Information and Referral received the following requests for information and referral from residents in Hayward.  

- 52% - Housing or shelter information
- 9% - Information services like libraries and the internet
- 6% - Legal services
- 4% - Food programs
- 3.5% - Public assistance programs.
- 3% - Individual and family support services.
- 2% each - Utilities information, substance abuse services, and material goods.
- 1% - Mental health treatment.

**Emergency Shelters, Transitional Housing, and Supportive Services**

In Hayward, there are several different types of emergency shelters, transitional housing, and supportive services. Family Emergency Shelter Coalition operates a 22-bed emergency shelter for families with children under age 18, as well as one transitional housing facility. Ruby’s Place is a 42-bed shelter for women with or without minor children. Magnolia House provides shelter for pregnant and postnatal women. Additionally, there are two winter shelter sites with 45 beds that open for specific weather conditions for single men and women. There are also transitional and permanent board and care, and sober living facilities for individuals with mental health or other disabilities and/or substance abuse issues. An accurate number of these facilities is difficult to determine, as some are unlicensed and do not report to a centralized system such as the County/National Homeless Management Information System database.

As a snapshot, the writers of this report have included two sets of data from two providers during the November 2015 Hayward Homeless Count, both of which were at full capacity during this period.

- Anka Behavioral Health residential treatment (two facilities): Five female clients ages 20, 22, 26, 36, and 52. Three male clients age 19, 21, and 32.
- Ruby’s Place: 23 women (age 18+), 19 girls (age range 5 months to 15 years old), and 12 boys (age range 5 months to 11 years old).

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27 City of Hayward’s 2-1-1 Top Caller Needs (Calendar Year 2015), Barbara Bernstein, Executive Director, Eden I & R.
29 Email from Jennifer Malvoux, Director of Programs, Ruby’s Place, December 10, 2015.
Surveys of Service Providers

During March and April 2016, Hayward service and shelter providers were asked a series of questions through focus groups and surveying processes to gain a better understanding of the successes and challenges they face in serving the homeless population in Hayward. The following are summaries of the survey responses, as gathered by Task Force Volunteers:

Overview of select service providers

Family Emergency Shelter Coalition – Waiting list of more than 40 families, with priority given to families that are sleeping in cars, have infant and/or in their final trimester of pregnancy. 250 people are served annually at shelter and transitional housing sites, 54 people served monthly. Average length of stay ranges from 60 days to four months.

Ruby’s Place – One-third of residents are homeless, and two-thirds of shelter-seeking individuals are victims of domestic violence who may or may not be homeless when they enter the shelter. Ruby’s Place serves 42 individuals daily, and around 200 individuals annually.

South Hayward Parish – Provides a variety of services to about 40 individuals who are homeless per month, about 250 annually.

Where do families go when they leave the shelter?

Upon leaving shelters, residents go to permanent housing, transitional housing, a hotel/motel, or move in with other family members. The number of those entering permanent housing has declined due to housing availability. Willingness to commit to permanent housing can also be an issue.

Costs associated with shelter service operation

Costs of shelters include 24/7 staffing, food, services, building costs, and administrative costs. Studies show that if people are moved directly into permanent housing (with subsidy via Rapid Re-housing) instead of a shelter or transitional housing, they avoid trauma incurred from becoming homeless – which makes shelter and transitional housing defunct. Shelters will only be available to those who are living on the streets or in their car, however, many families currently living in shelters were not out on the streets – many were living with friends, which made them ineligible for shelter services.

The quest for permanent housing

The U.S. Housing and Urban Development’s (HUD) supportive housing program funds permanent housing, transitional housing, and Rapid Re-housing with significant shifts away from funding transitional housing and shelters. Studies show that transitional housing isn’t solving homelessness. HUD Emergency Solutions Grants traditionally funded safety net services and, overall funding for this has decreased as well. Ideally, people go straight to permanent housing, but they face significant challenges, such as the cost of housing, shortage of housing, and not making enough money to cover housing costs.
Recommendations for administrative regulation and code changes
Policy recommendations from shelter and service providers included the need for more prevention/diversion funds (for food, transportation, and basic cost of living), and policies and safety net programs to keep individuals living with extended family, losing a job, or facing eviction from becoming homeless. Increased service coordination across the county was suggested, including a centralized resource hub to facilitate connections to appropriate/existing services. Policy recommendations included topics like opportunities for people to sleep in cars when no other options are available, places for people to store belongings while in transition, or going to crisis, vocational, or medical appointments.

Specifically regarding sleeping in cars, one of the providers interviewed people who requested services and stated they were living in their cars. Two of their stories are below. Names have been changed. Per City of Hayward Municipal Code

SEC. 5-7.20 PUBLIC NUISANCE: “...The existence of any of the following condition on the property is hereby declare to detrimental to public health, safety, or general welfare and thus constitutes a public nuisance, including, but not limited to: ... w. Sleeping or living in any vehicle.”

Mary rented the same little house in Hayward for 15 years. When she had to move because the owners decided to sell the place she found that she did not have enough money to rent even a studio apartment. Her car was all she had so she moved in. She doesn’t see too well and was worried about driving so she hired a young man that she knew who was also homeless to live in the car with her and drive her where she needs to go. She pays him, her auto insurance, and feeds both of them on her Social Security check.

John and Susan live in a van with their 7-year-old son and 8-month-old baby. A few months ago, both were working and living in small apartment in Hayward. The apartment was overrun with cockroaches. Nothing they could do seemed to make any difference. Worried about the health of the children, they contacted the property owner but the only response they got was an eviction notice. Their English is limited and they had no idea of their rights as tenants. They moved into the van. Susan had to quit her job to care for the children in this new situation. Now they have an eviction on their record and only one income. John take whatever secondary “cash” jobs he can find in addition to his 40 hour per week job, but the next apartment is going to be hard to find.

Healthcare
Alameda County Healthcare for the Homeless provides a mobile health van that visits various sites throughout Alameda County once or twice per month. The number of actual encounters does not include all clients who are served, as many clients refuse to provide their personal information and therefore are not entered into the service database. Additionally, they do not
include individuals who were unable to be served due to time or service limitations. In 2013, the health vans stopped providing medical and pharmaceutical services. Currently, the van provides medical social work services.\(^{30}\) Abode and Tri-City Health collaboratively provide similar services through their HOPE van at Templo de la Cruz. Service numbers were not available as of this writing.

**Table 6: Top Five South Alameda County Health Van Sites (January-April 2016)**\(^{30}\)

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Service and Medical Encounters, 2013</th>
<th>Service-Only Encounters, 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seventh Step</td>
<td>87</td>
<td>No longer in service</td>
</tr>
<tr>
<td>First United Methodist Church</td>
<td>83</td>
<td>29</td>
</tr>
<tr>
<td>Hayward Day Labor Center</td>
<td>75</td>
<td>24</td>
</tr>
<tr>
<td>El Shaddai</td>
<td>74</td>
<td>6</td>
</tr>
<tr>
<td>Cronin House</td>
<td>52</td>
<td>22</td>
</tr>
</tbody>
</table>

*Source: Alameda County Health Care for the Homeless Program, 2016.*

The highest numbers for North Alameda County Health Van Sites for the same periods were 62 in 2013 and 20 in 2016 for the City Team site.\(^{30}\) Additional medical services available to those who are homeless with or without a primary care provider or medical home in Hayward include Tiburcio Vasquez clinics, St. Rose and Eden Hospital emergency rooms, Alameda County Medical Centers, TriCity Health Centers, Medmark (methadone services), Davis Street Family Resource Center dental services, and RotaCare Bay Area medical clinic in San Leandro.

**COMMUNITY PERCEPTION OF HOMELESSNESS**

While the situation of homelessness primarily affects those experiencing it, there are real and/or perceived secondary impacts on local businesses and the community at large. To gain a better understanding of these perceptions, informal interviews were conducted with local business owners and residents in Downtown Hayward and on the Hayward Adult School Campus. Hayward Homeless Count volunteers conducted interviews on October 26 through November 21, 2015, and May 3 through May 6, 2016. The incidents mentioned in these interviews were observed by those interviewed, and the people involved may or may not have been a part of Hayward’s homeless population. The interviewers were unable to confirm the housing status of those involved in the incidents described.

**Question: What do you think about homelessness in Hayward?**

- There is a man, sits in the bus stop and pees behind the store wall.
- It really irritates me when I encounter [the same] people asking for money two- three times a day.

\(^{30}\) Email from William Quan, Alameda County Public Health, Health Care for the Homeless Program May 9, 2016.
• My business looks bad, referring to panhandling near the interviewee’s store. He also pointed out that people sleep behind his store and throw their trash around the store, which he said he is tired of cleaning up.
• The state and county may provide them [people who are homeless] with cash assistance but they have been using it to buy drugs.

**Question: Why does the situation of homelessness bother you?**
• It doesn’t.
• Why should I care what someone else does with their life?
• Why should it be ok for someone to sit around all day when everyone else has to work?
• I don’t want to clean up someone else’s mess.
• It’s a waste of talent and ability.
• I could be there too and it scares me.
• My brother died on the streets.
• No one should have to live like that.
• No one has to live like that.
• I feel like I should do something, but I don’t know what.

**Question: What should be done about homelessness?**
• Social services outreach, which should include street counseling and individual interviews to understand each person’s specific situation.
• People should also be provided with shelter and other vital needs for living until they can care for themselves.
• Address addiction issues.

**GOVERNMENT FUNDING**

During fiscal year 2017 (July 2016-June 2017), the City of Hayward will spend $220,875 on direct services to address homelessness through federally allocated Community Development Block Grant funding and City of Hayward General Fund dollars. Additional funding from both of these sources will be spent on legal services, food, job training and referrals, domestic violence supportive services, and tenant-landlord counseling services for some or all service recipients to prevent homelessness.31

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31 City of Hayward 2016-17 Community Agency Funding Program, hayward.legistar.com/LegislationDetail.aspx?ID=2691919&GUID=C757783E-20EC-4E8D-9458-B2C1B7B3FC49
Funding for rental subsidies for former foster youth and other services are allocated through Emergency Solutions Grant funding (ESG) and HOME programs. A regional consortium allocates additional CDBG, ESG, and HOME funds, some of which benefit Hayward-based services and agencies. Due to the diversified nature of the funding processes that accompany these allocations, a full accounting of government grant dollars allocated to Hayward is beyond the scope of this report.

A final consideration regarding governmental expenditures related to homelessness involves calculating city staff costs spent responding to requests for service. For example, the City Manager’s Office regularly receives request for assistance with multiple issues from individuals who are currently homeless or at risk of becoming homeless. The Hayward Police Department’s Youth and Family Services Bureau works with families facing a broad array of issues, including unemployment and other factors that can lead to homelessness. There are also costs associated with the City’s Maintenance Services Department, which cleaned out 46 homeless encampments, amounting to 460 cubic yards of material and debris during fiscal year 2015-2016.

WORKS CITED


33 City of Hayward Proposed Budget, Page 208 www.hayward-ca.gov/sites/default/files/Proposed%20FY%202017.pdf


APPENDIX B: MODEL PRACTICES

In addition to understanding the lived experiences of those who are homeless in Hayward, the Task Force to End Hunger and Homelessness also wanted to understand some of the practices utilized to address similar issues across the country. This list is meant to be illustrative and inspiring rather than exhaustive. It is hoped that policy makers can use this information to identify those practices which appear to be complementary to both the issues raised in the Count and the available resources in Hayward and the region. In so doing, sustainable solutions can be identified.

Name of Practice: Affordable Housing by Design

1. Case Study: Habitat for Humanity International
   Description of Practice: In cities across the world, Habitat for Humanity builds permanent affordable housing for families who have low-incomes through a cooperative volunteer effort. Habitat volunteers find sites, raise funds, and select a family for each new home. A selected family works side by side with Habitat and community volunteers on the construction of their new home and learns money management and other skills to maintain their housing. The family purchases the home upon completion with the help of a zero-interest mortgage provided by Habitat. Once they purchase the house, they are responsible for home maintenance and monthly payments of principal taxes, insurance and utilities. Mortgage payments are recycled to fund the construction of more houses. To ensure the continued availability of affordable housing in the community, the deeds to the properties are restricted.
   Agency/Entity Sponsoring Practice: Habitat for Humanity
   Costs: As a minimum, the home is priced at construction cost – the cost of land and infrastructure are not included in the selling price of the home to the family. Families pay monthly mortgage.
   Duration of Implementation of Practice: 1976 - Present
   Outcomes: Has been evaluated
   Who paid for it: Habitat for Humanity and homeowner
   Website Link: http://www.habitat.org/

2. Case Study: Housing First / Permanent Supportive Housing (various cities in US and Canada)
   Description of Practice: Varies by city. Target populations are individuals who are homeless with mental illness, HIV, and complex medical issues and/or have been homeless long-term. Housing First is simple: provide housing first, and then combine that housing with supportive treatment services in mental and physical health, substance abuse, education, and employment.
   Agency/Entity Sponsoring Practice: Varies by city
Costs: Not available
Duration of Implementation of Practice: 1992 - Present
Outcomes: Has been evaluated
Who paid for it: City funding (from specific taxes and city budgeting), county health department funds, state funding, Medicaid (Minnesota only) and U.S. Housing and Urban Development
Website Link: http://www.endhomelessness.org/pages/housing_first

3. Case Study: Community First! Village, Austin, TX

Description of Practice: Community First! Village is a Housing First model. Eligible individuals have been homeless for a year or more, or have had at least four episodes of homelessness in the past three years. There are currently 140 micro-homes at the Austin-based site, such as park homes, RVs and permanent guest cottages, with plans for expansion in 2016-2017. Residents share kitchens, laundry, and bathroom facilities, and have access to a medical facility for physical and mental health screening and supportive services. Community First! also offers micro-enterprise opportunities for residents to earn an income.
Agency/Entity Sponsoring Practice: Mobile Loaves & Fishes
Costs: Rent for residents ranges from $225-$360 per month
Duration of Implementation of Practice: April 2016 – Present
Outcomes: Has not been evaluated
Who paid for it: Private funding, and the only government funding is for the creation of a bus line to and from the Village
Website Link: http://mlf.org/community-first/

Name of Practice: “Wet Shelters” / “Wet Housing”

1. Case Study: Seaton House Annex Program, Toronto, Ottawa, Canada

Description of Practice: This shelter operates the Seaton House Annex Harm Reduction Program, a “wet shelter” operated in conjunction with staff from St. Michael’s Hospital on the harm reduction principle. People chronically addicted to alcohol are given one standard drink every 90 minutes, according to a prescription from their provider based on their liver function and particulars of their addiction. The program helps prevent them from harming themselves, by getting into fights or becoming unconscious and vulnerable. It also helps connect them to health care and the system. “Wet” shelters allow residents to drink in moderation so that they are willing to stay at the shelter in the morning to connect with case management and health services.
Agency/Entity Sponsoring Practice: Seaton House Annex Program, St. Michael’s Hospital and City of Toronto
Costs: $1,492 per person monthly after six months, and to $958 after 12 months
Duration of Implementation of Practice: 1997 – Present
Outcomes: Has been evaluated
Who paid for it: Provincial and city governments

2. Case Study: 1811 Eastlake, Seattle, WA
   Description of Practice: 1811 Eastlake provides “wet housing” (under a Housing First model) and supportive services to 75 men and women who are homeless with chronic alcohol addiction. Participants in this program agree to spend 30% of their income – if they have any – on rent and social services.
   Agency/Entity Sponsoring Practice: Downtown Emergency Service Center
   Costs: Not available
   Duration of Implementation of Practice: 2005 – Present
   Outcomes: Has been evaluated
   Who paid for it: City government and foundations
   Website link: [http://www.desc.org/1811.html](http://www.desc.org/1811.html)

Name of Practice: Shelter Services

1. Case Study: The Navigation Center, San Francisco, CA
   Description of Practice: The Navigation Center is a shelter designed to help people who are homeless find permanent housing. Many living in encampments, who have stayed out of shelters because they do not want to be separated from a partner, friends, or their pets. By moving people in as a group, it is thought they will trust the process more than many do in shelters. Homeless individuals and groups are able to get their immediate needs met and receive one-on-one counseling, with the goal of creating stability in their lives. No more than 75 people are assisted at any one time, and three service coordinators are on the grounds at all times.
   Agency/Entity Sponsoring Practice: City of San Francisco Human Services Agency and Episcopal Community Services
   Costs: The Navigation Center was initially supported with a $3 million donation from the San Francisco Interfaith Council – $1 million of the donation is funding the master leasing of Single Resident Occupancy units around the city for clients who transition out of the Navigation Center. The city budget commits $2.5 million a year to the continuation of the Navigation Center pilot program, which includes the cost of moving homeless clients to a new location. The Mayor of San Francisco, Ed Lee, is challenging private companies to match donations.
Name of Practice: Senior Co-Housing

1. Case Study: Home Sharing Program, New York City, NY
   Description of Practice: The New York State Foundation for Senior Citizens’ free Home Sharing Program matches seniors in need of housing with a spare room, or seniors who have a spare room with a trustworthy renter. One of the people matched must be 60 or older. This program is an affordable housing opportunity for the increasing number of seniors who are struggling to afford rent. Both hosts and guests benefit from reducing housing costs and the possibility of companionship to offset the isolation and loneliness experienced by many living alone.
   Agency/Entity Sponsoring Practice: The New York State Foundation for Senior Citizens
   Costs: Free for participants
   Duration of Implementation of Practice: 1990s - Present
   Outcomes: Has been evaluated
   Who paid for it: New York State and New York City
   Website Link: http://www.nyfsc.org/home-sharing/

Name of Practice: Legalized Homeless Encampments

1. Case Study: City of Seattle, Seattle, WA
   Description of Practice: Legalized car camping zones for people experiencing homelessness to legally park their car without fear of displacement due to long-term parking restrictions for non-residents. Legal parking zones offer services such as trash removal, portable toilets, and access to case management for a seven-day period (permit is renewable).
   Agency/Entity Sponsoring Practice: City of Seattle
   Costs: $5,269 per month, with initial start-up costs of $429 for a permit
   Duration of Implementation of Practice: February 2016 - Present
   Outcomes: Has not been evaluated
   Who paid for it: City of Seattle
2. **Case Study:** City of Seattle, Seattle, WA

**Description of Practice:** Legalized car parking lots offer services such as trash removal, portable toilets, and access to case management for a seven-day period. In addition, legalized car parking lots include access to electricity, water, communal infrastructure (i.e. cooking tent), and full-time staffing for a 30-day period.

**Agency/Entity Sponsoring Practice:** City of Seattle

**Costs:** One parking lot with 20 vehicles costs around $35,000 per month ($1,750 per vehicle), with initial start-up costs of approximately $24,689. The City of Seattle rents the parking lot from Seattle Public Utilities at a rate of $7,522 per month. 24-hour staffing on site costs amounts to almost $19,000 per month.

**Duration of Implementation of Practice:** February/March 2016 - Present

**Outcomes:** Has not been evaluated

**Who paid for it:** City of Seattle


3. **Case Study:** Dignity Village, Portland, OR

**Description of Practice:** Dignity Village is the longest-existing, city-sanctioned homeless village in the United States. This is a community of tiny homes that serve as a transitional housing option for homeless individuals. There are 43 basic dwelling structures, hosting between 50-60 residents every night. Each residence comes with a bed and a propane heater, but few are wired for electricity and they do not have hook-ups for utilities. Similarly, the units do not have running water, but there are two communal sinks, one shower and portable toilets. Residents of Dignity Village participate in microbusiness programs such as scrap metal recycling and firewood sales to cover operational costs. There is a two-year limit for persons residing at the Village.

**Agency/Entity Sponsoring Practice:** Dignity Village and City of Portland

**Costs:** Villagers pay $35 per month in their contribution to the operations budget, which covers utilities such as internet, electricity, waste removal, water and portable toilet service. The rest of the operating budget comes from microbusiness revenues and private donations.

**Duration of Implementation of Practice:** 2000 - Present

**Outcomes:** Has been evaluated

**Who paid for it:** Dignity Village

**Website Link:** [https://dignityvillage.org/](https://dignityvillage.org/)

4. **Case Study:** Eugene Safe Spots, Eugene, OR

**Description of Practice:** Eugene Safe Spots provide safe and legal places for individuals to sleep at night. Safe Spot Camps include (1) a set of rules that provide a system of support to its residents, (2) porta-potties, (3) trash and recycling service, (4) a source of drinkable water,
(5) a fire pit, (6) a small covered space for common use and meetings, (7) platforms for tents with covers for the winter months, (8) bi-monthly check-in meetings, (9) a useable address, or documentable location (not for receiving mail), and (10) an environment that makes peer and social support more of a possibility for people’s lives.

**Agency/Entity Sponsoring Practice:** Community Supported Shelters and City of Eugene

**Costs:** Material costs to construct one encampment amount to $8,400. Monthly Safe Spot operating expenses are a minimum of $890 (including trash, water, and fuel). Additional costs include overhead for office, shop, transportation expenses, and program coordination. Volunteer staff members that live in the community typically manage on-the-ground operational duties.

**Duration of Implementation of Practice:** 2015 - Present

**Outcomes:** Has been evaluated

**Who paid for it:** City of Eugene

**Website Link:** [http://communitysupportedshelters.org/eugene-safe-spots](http://communitysupportedshelters.org/eugene-safe-spots)

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**Name of Practice: Job Training and Career Pathway Opportunities**

1. **Case Study:** Downtown Streets Team, based in San Jose, CA – operating in Hayward

   **Description of Practice:** Downtown Streets Team provides individuals who are homeless and/or low-income with job training and skill development opportunities, and access to resources to help rebuild their lives. Participants receive a non-cash stipend for their work to help them cover their basic needs, and are offered case management, and employment services to find housing and a job.

   **Agency/Entity Sponsoring Practice:** Downtown Streets Team, City of Hayward, and partnering local businesses

   **Costs:** Not available

   **Duration of Implementation of Practice:** 2005 – Present. A Hayward-specific Downtown Streets Team program was initiated in June 2016.

   **Outcomes:** Has been evaluated

   **Who paid for it:** City of Hayward Community Development Block Grant funds and partnerships with local businesses

   **Website Link:** [http://streetsteam.org/](http://streetsteam.org/)

2. **Case Study:** Better Way Van Program, Albuquerque, NM

   **Description of Practice:** The City of Albuquerque and St. Martin’s Hospitality Center have partnered to sponsor a pilot program to support panhandlers’ transition to longer-term employment through work experience. A van is sent out to pick up panhandlers in the morning. They are paid $9.00 per hour to work on beautification projects and weed and litter control with oversight by the City’s Solid Waste Department. At the end of the work day, the
van takes individuals back to the St. Martin’s where they are paid in cash, and staff help connect them with services for food, temporary shelter, substance abuse, mental health issues and housing.

**Agency/Entity Sponsoring Practice:** City of Albuquerque and St. Martin’s Hospitality Center  
**Costs:** $50,000 to fund the initial pilot program  
**Duration of Implementation of Practice:** August 2015 – Present  
**Outcomes:** Has been evaluated  
**Who paid for it:** City of Albuquerque and private donations  

3. **Case Study:** Vocational Rehabilitation Program at San Francisco General Hospital, San Francisco, CA  
**Description of Practice:** Provides work and job training to 100 people recovering from mental illness annually.  
**Agency/Entity Sponsoring Practice:** San Francisco General Hospital Foundation  
**Costs:** Not available  
**Duration of Implementation of Practice:**  
**Outcomes:** Has been evaluated. Annually, approximately 10% to 15% of the program participants obtain competitive employment.  
**Who paid for it:** Private donations and foundations  
**Website Link:** [http://sfghf.org/supporters/path-recovery-employment/](http://sfghf.org/supporters/path-recovery-employment/)

4. **Case Study:** Rubicon Programs, Richmond, CA  
**Description of Practice:** Employment, housing, mental health, and other supportive services to individuals who are very low-income, especially people who are homeless or have mental illness. Offers services throughout Contra Costa and Alameda counties.  
**Agency/Entity Sponsoring Practice:** Rubicon Programs  
**Costs:** Not available  
**Duration of Implementation of Practice:** 1973 - Present  
**Outcomes:** Has been evaluated. Annual reports and performance measures are available.  
**Who paid for it:** Cities of Richmond, Alameda County, Contra Costa County, and private donations  
**Website Link:** [http://www.rubiconprograms.org/](http://www.rubiconprograms.org/)

**Name of Practice:** Homeless Outreach Teams

1. **Case Study:** San Francisco Homeless Outreach Team, San Francisco, CA  
**Description of Practice:** This multidisciplinary team serves individuals living on the streets who have severe disabilities. San Francisco Homeless Outreach Team uses a client-centered...
“whatever it takes” approach, and employs comprehensive wrap-around services to meet client needs. The program promotes harm reduction and strength-based recovery philosophies through its daily functioning, and utilizes acuity-based, data-driven, and outcomes-oriented processes to meet its goals. The program also assesses medical and behavioral crises, and refers clients to emergency care as appropriate.

**Agency/Entity Sponsoring Practice:** Collaboration between the San Francisco Department of Public Health, Human Services Agency, San Francisco Public Library, and the non-profit Public Health Foundation Enterprises

**Costs:** Not available

**Duration of Implementation of Practice:** 2004 - Present

**Outcomes:** Has been evaluated

**Who paid for it:** Combination of City, County, State, and federal funding

**Website Link:** [http://www.sfhsa.org/96.htm](http://www.sfhsa.org/96.htm)

2. **Case Study:** Collaboration of San Francisco Homeless Outreach Team (HOT) and San Francisco Public Library, San Francisco, CA

**Description of Practice:** This service line is situated at the Civic Center Main Branch with staff members who conduct outreach and offer referrals to patrons of the library who are homeless, marginally housed and/or have mentally illness. Staff members also facilitate education sessions in group or individual settings for library staff, in order to improve understanding of behaviorally vulnerable patrons of the library. Staff’s goal is to help library staff serve this group of patrons according to their needs, while helping to decrease the number and severity of incidents that require intervention from Library security staff. Staff also train Health and Safety Associates (HaSAs) who are selected from a group of library patrons who are homeless and being served by SF HOT’s case management function. These HaSAs assist the team by using their life experiences and learned engagement skills to reach out to other patrons who are homeless, in order to persuade them to accept case management and other services. In the process, HaSAs gain employment and job-seeking skills.

**Agency/Entity Sponsoring Practice:** San Francisco Department of Public Health and San Francisco Public Library

**Costs:** Not available

**Duration of Implementation of Practice:** 2009 - Present

**Outcomes:** Has been evaluated (qualitative), 24 cities use this model now

**Who paid for it:** Combination of City, County and other

**Website Link:** [http://www.ala.org/offices/extending-our-reach-reducing-homelessness-through-library-engagement-6](http://www.ala.org/offices/extending-our-reach-reducing-homelessness-through-library-engagement-6)
3. **Case Study:** Coast to Coast, Fullerton Police Department Homeless Liaison Officer Program, Fullerton, CA

**Description of Practice:** In 2012, the Fullerton Police Department partnered with Coast to Coast Foundation, a Yorba Linda-based non-profit homeless support group, to expand its services and support local residents who are homeless. Coast to Coast volunteers ride around town with department homeless liaison officers to respond to calls, conduct outreach to individuals who are homeless and provide food, clothing, shelter, transportation and medical care to those in need.

**Agency/Entity Sponsoring Practice:** Fullerton Police Department and Coast to Coast Foundation

**Costs:** Four full-time homeless liaison program officers and $50,000 to cover care costs for homeless individuals

**Duration of Implementation of Practice:** 2012 - Present

**Outcomes:** Has been evaluated

**Who paid for it:** Fullerton Police Department

**Website Link:** [http://www.cacities.org/Top/News/News-Articles/2016/May/California-City-Solutions-Fullerton-s-New-Approac](http://www.cacities.org/Top/News/News-Articles/2016/May/California-City-Solutions-Fullerton-s-New-Approac)

4. **Case Study:** The Transient Enrichment Network for Fontana (TEN-4), Fontana, CA

**Description of Practice:** In 1996, the Fontana Police Department partnered with local churches, charities and businesses to form the TEN-4 program. This network of partners reaches out to and refers individuals who are homeless to the TEN-4 centralized service center. Individuals entering this program receive support to identify permanent housing, job placement, and rehabilitation programs.

**Agency/Entity Sponsoring Practice:** Fontana Police Department

**Costs:** All costs for initial build-out and operations were covered through community donations and a network of staff volunteers. In 1998, the Fontana Police Department and city’s housing agency was awarded $94,000 from the U.S. Department of Housing and Urban Development to operate the program.

**Duration of Implementation of Practice:** 1996 – Present

**Outcomes:** Has been evaluated

**Who paid for it:** Fontana Police Department

Name of Practice: *Mental Health Outreach / Crisis Response*

1. **Case Study:** Mobile Crisis Van, Mobile Crisis Treatment Team, San Francisco, CA  
   **Description of Practice:** The Mobile Crisis Treatment Team is made up of a diverse multidisciplinary staff providing psychiatric crisis intervention services for adults located in the City and County of San Francisco. Services provided include:  
   - Emergency crisis assessment/intervention services conducted in the field  
   - Early intervention before situation escalates to critical crisis point  
   - Consultation services provided to consumers, housing and support systems, mental health providers, and other concerned parties  
   - Assistance with linkage to outpatient mental health services  
   - Involuntary psychiatric hold evaluation capacity and determination of appropriate level of care  
   - Short-term medication services  
   - Spanish, Russian, Cantonese, and Mandarin speaking staff (schedules vary)  
   - Available to all adult residents (at least 18 years old), regardless of payer source  
   **Agency/Entity Sponsoring Practice:** San Francisco Department of Public Health  
   **Costs:** Not available  
   **Duration of Implementation of Practice:** Not available  
   **Outcomes:** Has been evaluated  
   **Who paid for it:** City and County of San Francisco  

2. **Case Study:** 24-Hour Peer-Run Warm Line, San Francisco, CA  
   **Description of Practice:** Mental Health Association of San Francisco’s 24-HourPeer-Run Warm Line provides emotional support and information about mental health resources. As peers, those answering calls have also had their own mental health challenges and use that experience to help others who may be struggling now. Online chat and phone available.  
   **Agency/Entity Sponsoring Practice:** Mental Health Association of San Francisco  
   **Costs:** Not available  
   **Duration of Implementation of Practice:**  
   **Outcomes:** Has been evaluated  
   **Who paid for it:** Foundation  
   **Website Link:** [http://mentalhealthsf.org/programs/peer-run-warm-line/](http://mentalhealthsf.org/programs/peer-run-warm-line/)

3. **Case Study:** Dore Urgent Care Clinic (Mental Health), San Francisco, CA  
   **Description of Practice:** Services are available to individuals experiencing an escalating psychological crisis, which, if not immediately addressed, may result in involuntary detention or hospitalization. Dore Urgent Care Clinic provides assessment and triage in a supportive, community-based setting that is fundamentally different from a hospital-based psychiatric
environment. They can offer a phone triage and help determine whether their services are best to meet the needs presented. They can provide a crisis assessment, a comfortable recliner chair to sleep one night in, administer any current medications, provide food, laundry and shower, and someone to talk to in a comfortable, community-based, voluntary environment.

**Agency/Entity Sponsoring Practice:** Progress Foundation  
**Costs:** Not available  
**Duration of Implementation of Practice:** Not available  
**Outcomes:** Has been evaluated  
**Who paid for it:** Foundation  
**Website Link:** [http://www.progressfoundation.org/services/](http://www.progressfoundation.org/services/)

4. **Case Study:** Dore Urgent Care Clinic (Mental Health) - Crisis residential programs and transitional residential programs, San Francisco, CA  
**Description of Practice:** The work the Progress Foundation does takes place within the context of residential programs, where people cook for one another, share their experiences, and learn new coping skills. None of this would be possible without the remarkable settings provided by a collection of safe, structured, social rehabilitation residences staffed by highly trained counselors. Each of these programs is tailored to the communities they serve, each is unique, and nearly all are found in neighborhoods, rather than commercial districts or areas specifically set aside for social services agencies.  
**Agency/Entity Sponsoring Practice:** Progress Foundation  
**Costs:** Not available  
**Duration of Implementation of Practice:** 1972 – Present  
**Outcomes:** Has been evaluated  
**Who paid for it:** Foundation  
**Website Link:** [http://www.progressfoundation.org/programs](http://www.progressfoundation.org/programs)

**Name of Practice:** Health Services for the Homeless Clinics

1. **Case Study:** Alameda County Health Care for the Homeless, Alameda County, CA  
**Description of Practice:** 1) Urgent care (offered at Alameda Health System’s Same-Day Clinic and via mobile clinics); 2) Street Medicine (offered through Oakland Street Team Outreach Medical Program (STOMP), a partnership of Roots Community Health Center and HIV Education and Prevention Project of Alameda County, and by a partnership of Tri-City Health Center and Abode Services); 3) Substance use treatment (offered through Second Chance and East Oakland Recovery Center); and, 4) Specialty dental care (offered through La Clinica de la Raza and On Site Dental).  
**Agency/Entity Sponsoring Practice:** Alameda Health System and LifeLong Medical Care
2. Case Study: Tom Waddell Urban Health Center, San Francisco, CA
   Description of Practice: Tom Waddell Health Center is a large community health center and health care for the homeless program operated by the San Francisco Department of Public Health. The mission of the Tom Waddell Urban Health Center is to provide comprehensive health care for people who are homeless and other severely underserved individuals in our community. The Tom Waddell Urban Health Center and the San Francisco Department of Public Health operate under a harm reduction philosophy of care. Our aim is to optimize our patients’ health and functioning and assist them in reducing harm in their lives. Health care is delivered using a comprehensive interdisciplinary team
   Agency/Entity Sponsoring Practice: San Francisco Department of Public Health
   Costs: Not available
   Duration of Implementation of Practice: 1990s – Present
   Outcomes: Has been evaluated
   Who paid for it: San Francisco Department of Public Health

3. Case Study: Central City Concern, Portland, OR
   Description of Practice: Central City Concern is designated as a Federally Qualified Health Center. They provide integrated health and recovery assistance services for individuals who are homeless who are often alienated from mainstream health care services at clinics operating across Portland.
   Agency/Entity Sponsoring Practice: Central City Concern
   Costs: Not available
   Duration of Implementation of Practice: 1980s – Present
   Outcomes: Has been evaluated
   Who paid for it: Not available
   Website Link: http://www.centralcityconcern.org/services/health-recovery/
Name of Practice: Mobile Health Clinic

1. Case Study: Oakland Street Team Outreach Medical Program (STOMP), Oakland, CA
   Description of Practice: Oakland STOMP provides urgent care, brief social work assessments, and referrals to community resources while visiting shelters, meal programs, and other accessible locations in the community. Services are provided free of charge to people experiencing homelessness on a first-come, first-served basis.
   Agency/Entity Sponsoring Practice: Partnership of Roots Community Health Center, HIV Education and Prevention Project of Alameda County (HEPPAC)
   Costs: Not available
   Duration of Implementation of Practice: Not available
   Outcomes: Has been evaluated
   Who paid for it: Alameda County Health Care for the Homeless
   Website Link: http://rootsclinic.org/oakland-stomp/

2. Case Study: Street Outreach Services, San Francisco Community Clinic Consortium, San Francisco, CA
   Description of Practice: Traveling in a medical van to sites throughout San Francisco, doctors, nurses, outreach workers, and volunteers create “clinics without walls” at soup kitchens, on city streets, under freeway overpasses, and in parks.
   Agency/Entity Sponsoring Practice: San Francisco Community Clinic Consortium
   Costs: Not available
   Duration of Implementation of Practice: 1988 – Present
   Outcomes: Not available
   Who paid for it: Various funding streams
   Website Link: http://www.sfccc.org/street-outreach-services/

Name of Practice: Veterinary Services / Pet Services

1. Case Study: Veterinary Street Outreach Services, San Francisco Community Clinic Consortium, San Francisco, CA
   Description of Practice: Veterinary Street Outreach Services offers free veterinary care to the companion animals of San Franciscans who are homeless as a creative way of linking their human guardians with health care services. Vet SOS provides free pop-up veterinary clinics 12 times per year using volunteer staffing and a specially equipped mobile outreach van.
   Agency/Entity Sponsoring Practice: SF Community Clinic Consortium
   Costs: Not available
   Duration of Implementation of Practice: 2001 - Present
   Outcomes: Has been evaluated
Who paid for it: Various funding streams
Website Link: http://www.sfccc.org/veterinary-street-outreach-services-vetsos/

Name of Practice: Health Services for Day Laborers who are undocumented
1. Case Study: Alameda County Health Care for the Homeless, Alameda County, CA
   Description of Practice: Free health services for day laborers who are undocumented at day labor centers in Hayward, Fruitvale (Oakland), and Berkeley, CA.
   Agency/Entity Sponsoring Practice: Alameda Health System and LifeLong Medical Care
   Costs: Not available
   Duration of Implementation of Practice: Not available
   Outcomes: Has been evaluated
   Who paid for it: Alameda County
   Website Link: http://daylaborcenter.org/ or http://streetlevelhealth.org/ or http://mionline.org/what-we-do/day-laborer/

Name of Practice: Legal Services / Housing Assistance
1. Case Study: Modified Payment Program at Tenderloin Housing Clinic, San Francisco, CA
   Description of Practice: The Tenderloin Housing Clinic (THC) operates the City's largest permanent housing program for single adults who are homeless and is a leading provider of legal services to tenants who have low incomes. In 1989 THC expanded its services, and initiated the Modified Payments Program (MPP). The MPP became a successful program and continues to be a widely acclaimed model for reducing homelessness, by placing tenants in permanent housing and supporting tenants in maintaining housing through third-party rental payment assistance and money management. In 2010 the San Francisco Human Services Agency awarded a contract to THC to become the sole provider of City-funded MPP services for 900 tenants living in private and non-profit run Single Resident Occupancy hotels.
   Agency/Entity Sponsoring Practice: Tenderloin Housing Clinic, City and County of San Francisco
   Costs: Not available
   Duration of Implementation of Practice: 1980 - Present
   Outcomes: Has been evaluated
   Who paid for it: Human Services Agency
   Website Link: https://www.thclinic.org/programs/money-management.php

2. Case Study: Legal Services at Tenderloin Housing Clinic, San Francisco, CA
   Description of Practice: The Tenderloin Housing Clinic law office represents tenants with low income in San Francisco in all aspects of landlord-tenant and housing law. We primarily represent seniors, people with disabilities, and minority and immigrant families, often as
defendants in unlawful detainer actions and in affirmative lawsuits for wrongful eviction, and to address substandard housing conditions.

**Agency/Entity Sponsoring Practice:** Tenderloin Housing Clinic  
**Costs:** Not available  
**Duration of Implementation of Practice:** 1980 - Present  
**Outcomes:** Has been evaluated  
**Who paid for it:** Not available  
**Website Link:** [https://www.thclinic.org/programs/legal-programs.php](https://www.thclinic.org/programs/legal-programs.php)

3. **Case Study:** Chronicle Season of Sharing Fund, Alameda County, CA  
**Description of Practice:** The Season of Sharing, which can be used to pay for rent expenses, is a private fund made available to both income qualified Oakland residents, as well as greater Alameda County residents, to help them pay rent and housing expenses. It is operated as part of the emergency Housing Assistance and/or Critical Family Need for those with a non-recurring crisis. Individuals who apply and are found to be qualified should be able to pay housing expenses, including rent, repairs, energy bills, and other expenses.  
**Agency/Entity Sponsoring Practice:** San Francisco Chronicle (Foundation) and Alameda County Social Services  
**Costs:** Not available  
**Duration of Implementation of Practice:** 1986 - Present  
**Outcomes:** Has been evaluated  
**Who paid for it:** Not available  
**Website Link:** [www.alamedasocialservices.org/public/services/community/season_of_sharing.cfm](http://www.alamedasocialservices.org/public/services/community/season_of_sharing.cfm)

4. **Case Study:** Operation Dignity, Inc., Oakland, CA  
**Description of Practice:** Operation Dignity assists homeless veterans and their families. They provide emergency, transitional and permanent housing for homeless individuals in Alameda County, CA. Operation Dignity also offers comprehensive support services, nutritious meals and a strong peer community.  
**Agency/Entity Sponsoring Practice:** Operation Dignity  
**Costs:** Not available  
**Duration of Implementation of Practice:** 1993 - Present  
**Outcomes:** Has been evaluated  
**Who paid for it:** Operation Dignity  
**Website Link:** [http://operationdignity.org/](http://operationdignity.org/)

5. **Case Study:** Homeless Action Center, Alameda County, CA  
**Description of Practice:** Homeless Action Center (HAC) provides free public benefits advocacy to people who are homeless and/or have a mentally illness in Alameda County. In
addition to helping clients obtain sustainable income and health insurance, HAC also works with community stakeholders to reduce the harms associated with a lack of housing and healthcare. Combining professionalism and compassion, HAC provides barrier-free legal assistance to the hardest to reach populations.

**Agency/Entity Sponsoring Practice:** NGO, other  
**Costs:** Not available  
**Duration of Implementation of Practice:** 1990 – Present  
**Outcomes:** Has been evaluated  
**Who paid for it:** Not available  
**Website Link:** [http://homelessactioncenter.org/](http://homelessactioncenter.org/)

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**Name of Practice:** Transgender Women’s Services  
1. **Case Study:** A Woman’s Place, San Francisco, CA  
   **Description of Practice:** A Woman’s Place is the only 24-hour supportive residential services in San Francisco offering emergency shelter and long-term treatment programs to women and transgender women, especially catering to people who are chronically homeless and/or have special needs. Some of the specialized programs include a shelter, an 18-month transitional housing program, and a substance abuse program. Services also include health care, mental health counseling, case management services, and money management.  
   **Agency/Entity Sponsoring Practice:** A Woman’s Place  
   **Costs:** Not available  
   **Duration of Implementation of Practice:** Not available  
   **Outcomes:** Has been evaluated  
   **Who paid for it:** Not available  
   **Website Link:** [http://www.catsinc.org/a-woman-s-place.html](http://www.catsinc.org/a-woman-s-place.html)

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**Name of Practice:** Generalized Women’s Services  
1. **Case Study:** The Women’s Daytime Drop-In Center, Berkeley, CA  
   **Description of Practice:** The Women’s Daytime Drop-In Center empowers women and children to move from the streets to a home by providing ongoing and intensive counseling, case management services, daily support groups, a comprehensive children’s program, a variety of referral services, and a transitional housing program for four single parent families. Services are available at no fee to any homeless woman or child.  
   **Agency/Entity Sponsoring Practice:** The Women’s Daytime Drop-In Center  
   **Costs:** Not available  
   **Duration of Implementation of Practice:** 1987 - Present  
   **Outcomes:** Has been evaluated
Name of Practice: Drop-in Service Centers (showers, water, meal, electricity)
1. Case Study: Building Opportunities for Self-Sufficiency (BOSS) at Multi-Agency Service Center (MASC), Berkeley, CA

Description of Practice: The mission of BOSS is to help people who are homeless, poor, and have mental health issues to achieve health and self-sufficiency, and to fight against the root causes of poverty and homelessness. MASC has a hot meal in the morning, showers, a locker program, case management, computers/internet, phone charging station, and on-site staff. Services include Information & referral, health care enrollments, case management, locker program, showers and respite.

Agency/Entity Sponsoring Practice: BOSS, and NGO with various funding streams
Costs: Not available
Duration of Implementation of Practice: BOSS: 1971 – Present, MASC: 2000 - Present
Outcomes: Has been evaluated
Who paid for it: The MASC was created with funding from City of Berkeley Measure O in 2000.
Website Link: https://self-sufficiency.org/
APPENDIX C: SURVEY INTAKE FORM

Survey Worker to Read Script to Prospective Interviewees

Hello, my name is __________________ and I am assisting the Task Force to End Hunger and Homelessness to conduct a survey of individuals and families currently experiencing homelessness. (Our definition of homelessness is shown on the reverse side of this form).

This survey should only take about 15 minutes of your time. Is that okay?

No ( ) (Discontinue interview but subject will be counted)
Yes ( ) (continue)

1. May I ask where you slept last night?
   1. My home/apartment which is safe and stable (Discontinue)
   2. Permanent supportive or subsidized housing, which has no foreseeable end date. (Discontinue)
   3. Car, park, street/side walk, condemned building/physical structure, or other outdoor area (Proceed)
   4. Emergency Shelter or Transitional Housing (Proceed)
   5. Hotel or Motel and no permanent legal place to live (Proceed)
   6. My home/apartment, but I am at risk of losing this housing within the next three months because ________________________________ (Proceed)
   7. Hospital or Treatment Facility and no other permanent legal place to live (Proceed)
   8. With Friends or Relatives Temporarily but at-risk of losing this housing within the next three months because______________________________ (Proceed)
   9. City/County Jail and no other permanent legal place to live (Proceed)
   10. Other____________________ (Check definition and disqualification on the back of this form. If answer meets criteria of homelessness, proceed. If not, discontinue)

2. Has someone else asked you to complete a purple-colored survey earlier this month? (Show subject the survey)
   Yes ( ) Ok, thank you for your time (discontinue)
   No ( ) (Proceed)

3. Do you Call Hayward Home?
   No ( ) Okay, thank you for your time (discontinue)
   Yes ( ) (Proceed)

4. What is your age? ________
   If under 15, Subject will be counted but not interviewed
   If 15 or older, Review the consent form with the subject, answer questions, and ask for signature or verbal agreement
Homelessness Defined:

Homelessness is defined as a state in which an individual or family unit does not have permanent, legal, safe, and stable living quarters. Family unit refers to those, who, by affinity, marriage, or blood relation, comprise a consistent unit, traveling or residing together. The term, stable, as used in this study, means that a person or family unit is able to maintain or stay in legal housing for the foreseeable future.

Individuals or Families that do not meet the Study’s Definition of Homelessness:

By our definition, individuals or families are not at-risk of becoming homeless unless potential loss of a permanent legal dwelling is imminent. Do not count as homeless, persons or families who have the personal means, or the support means of friends and relatives, necessary to maintain current occupancy of a legal dwelling for at least three months.

Definitions of abbreviations used in Survey

TANF = Temporary Assistance for Needy Families
SSI = Social Security Insurance
SSDI = Social Security Disability Insurance

SURVEY DATE: __________________
SURVEY START TIME: ____________
SURVEY END TIME: ______________
SURVEY SITE: ___________________

HOMELESS INTERVIEW ELIGIBILITY STATUS

( ) Person is counted but is not eligible to be interviewed because he/she is under 15.

( ) Person is counted but is not eligible to be interviewed because he/she did not consent.

( ) Person is counted but is not eligible to be interviewed because subject does not appear to have the mental capacity to give informed consent, or appears to be too intoxicated.

( ) Person is counted and is eligible to be interviewed because subject is homeless, at least 15, and signed consent form or gave verbal consent

Survey Worker’s Name__________________________________________
Survey ID Number ______________________________________________
APPENDIX D: QUANTITATIVE SURVEY

5. During the past 30 days, how many nights did you sleep in:
   1. Car, Park, Street/Side walk, Condemned building/physical structure, or other Outdoor area_____
   2. Emergency Shelter or Transitional Housing____
   3. Hotel or Motel____
   4. Permanent Supportive Housing or Subsidized Housing _____
   5. Own Home or non-subsidized Housing____
   6. Hospital or Treatment Facility____
   7. With friends or relatives_____ 
   8. City/County Jail____
   9. Other_________________ (days)____
   10. Chose not to answer

6. Were you and any family members living in Hayward prior to becoming homeless?
   1. Yes
   2. No
   3. Chose not to answer

7. How long have you been living in Hayward?
   o ______ Years (please convert to years or fractions of a year (#/12))
   o Chose not to answer

8. What are your main reasons for living in Hayward? Please rank your top three reasons in order of importance.
   1. I work here **Rank:** ___
   2. Family roots and ties in Hayward **Rank:** ___
   3. Lower cost of living than most cities **Rank:** ___
   4. Educational and job training opportunities **Rank:** ___
   5. Social services and public assistance for low income and homeless families **Rank:** ___
   6. Safety reasons **Rank:** ___
   7. Appealing environmental and city features such as park and recreational facilities, good food, multiculturalism, favorable climate, and respect for human rights **Rank:** ___
   8. Other________________________________________________ **Rank:** ___
   9. Chose not to answer

9. Why do you not have a permanent place to live? Please circle all that apply.
   1. Job loss
   2. Depleted savings
   3. Couldn’t find housing I could afford
   4. Home foreclosure
   5. Domestic violence
   6. **Rank:** ___
   7. **Rank:** ___
   8. **Rank:** ___
   9. **Rank:** ___
   10. **Rank:** ___
   11. **Rank:** ___
   12. Eviction
   13. **Rank:** ___
   14. **Rank:** ___
   15. **Rank:** ___
   16. **Rank:** ___
   17. **Rank:** ___
   18. **Rank:** ___
   19. **Rank:** ___
   20. **Rank:** ___
6. Loss of Loved Ones
7. Mental health/PTSD
8. I have a Section 8 or other Voucher, but can’t find housing that will accept it
9. Immigration status
10. Unforeseen events
11. Other
12. Chose not to answer

10. Given your present circumstance, what monthly housing/apartment cost would be affordable to you on a permanent basis if it were available?

1. $ _ _ _ _.00 and I would use or take advantage of this opportunity
2. $ _ _ _ _.00 but I would not take advantage of this opportunity because
   _____________________________________________________________
3. No housing/apartment cost would be affordable to me given my present circumstances
4. Chose not to answer

11. Please indicate any physical health conditions you or any family members have experienced while being without permanent housing:

1. Heart Problems
2. Vision or Hearing Problems
3. Diabetes
4. Dental Problems
5. Digestive/Urinary symptoms
6. Hepatitis
7. Pain or Stiffness in Back, Neck, or other Joints
8. Drug, Alcohol Addiction, or Other Substance Abuse
9. Sexually-transmitted infections (e.g. herpes, gonorrhea, AIDS/HIV)
10. Other infections/physical health problems
11. No conditions
12. Chose not to answer

12. Please indicate any of the conditions shown below you or any family members have experienced while being without permanent housing:

1. panic attacks, nervousness, tension, feelings of terror
2. uneasiness in crowds, fear of open space/travel, nervousness
3. anger, rage, resentment, physical aggression
4. hostility, suspiciousness, delusions
5. depression
6. suicidal thoughts or actions
7. Other
8. No conditions
9. Chose not to answer
13. Please indicate Hayward facilities where you or your family members have received services.

1 Health Van 9 Tiburcio Vasquez
2 Church Clinic 10 Hospitals (e.g. Eden, St. Rose)
3 Planned Parenthood 11 Cherry Hill
4 School Clinic 12 John George
5 Commercial Pharmacy (e.g. Walgreens, CVS) 13 Methadone Clinic
6 Winton Wellness Center 14 Needle Exchange/Wound Care Clinic
7 La Familla 15 Chose not to answer
8 Other________________________________________

14. What is your sex/gender?

1 Male 2 Female 3 Transgender 4 Other:_________ 5 Chose not to answer

15. How would describe your sexual orientation?

1 Heterosexual 3 Bisexual
2 Homosexual 4 Other _____________ 5 Chose not to answer

16. What is your ethnicity?

1 White 6 Native American
2 Hispanic/Latino 7 Native Hawaiian
3 Asian 8 Pacific Islander
4 African American/Black 9 Other _____________________
5 Multi-racial 10 Chose not to answer

17. What is your current marital status?

1 Single, Never Married
2 Married
3 Divorced
4 Separated
5 Widowed
6 In a long-term relationship, not married
7 Chose not to answer

18. What is your highest level of education

1 Did not graduate from high school
2 High School Graduate or GED
3 Some College
4 Two-year Associate Degree or Certificate
5 Four-year Degree (B.A., B.S)
6 Postgraduate Education (M.A., M.S., PhD)
7 Chose not to answer
19. What language do you speak?
   1 Primarily or Only English
   2 English and Other: ________________________
   3 Primarily or Only Other: ____________________
   4 Chose not to answer

20. On the average, about how much of your monthly income in dollars is from the following sources?
   1 Full or Part Time Job Income $_________ (average amount received per month)
   2 Panhandling $________
   3 Odd Jobs/Recycling $________
   4 SSI, SSDI, Private Disability Insurance $________
   5 General Assistance $________
   6 Unemployment Insurance $________
   7 Family and Friends $________
   8 Alimony, Spousal Support, Child Support, TANF $________
   9 No Income from any of the above
   10 No Income from any source, I get my basic needs met through ____________________________
   11 Chose not to answer

21. If you do not work or do not have a steady job, what prevents you from maintaining employment?
   Please circle all that apply.
   1 Not Applicable, I have a steady job.
   2 Need Training
   3 Immigration Status
   4 History of Incarceration
   5 Nothing available in my field ___________________________(please specify field)
   6 Other______________________________________________
   7 Physical Health
   8 Mental health
   9 I prefer not to work
   10 Chose not to answer

22. Are you alone or accompanied by others?
   1 Homeless Adult Alone
   2 Homeless Adult with Children
   3 Homeless Adult with Spouse or Domestic Partner
   4 Homeless Adult with Spouse or Domestic Partner with children
   5 Homeless Youth 15-18 Alone or with other Minor Youth
   6 Other Accompanied Situation__________________________________________
   7 Chose not to answer

23. Are there any children with you? If so, indicate their age (only one adult answers question).
   1 Number of Children under 5 years____
   2 Number of Children 5 – 12 years____
   3 Number of Children 13 -17 years____
   4 N/A, no children
   5 Chose not to answer
24. What is the sex of children with you (only one adult answers question)?

1 Number of Females____
2 Number of Males____
3 N/A, no children
4 Chose not to answer

25. What is the ethnicity of children with you (only one adult answers question)?

1 White 6 Native American
2 Hispanic/Latino 7 Native Hawaiian
3 Asian 8 Pacific Islander
4 African American/Black 9 Other
5 Multi-racial 10 Chose not to answer

26. Are you a veteran or have you served in the military?

1 Veteran with Combat Experience
2 Veteran with no Combat Experience
3 Not a veteran of the U.S. Armed Services
4 Chose not to answer

27. Were you ever placed in a Foster Home?

1 Yes
2 Yes, currently in Foster Care system
3 No
4 Chose not to answer

**Concluding Comments:**

28. Thank you for taking the time to respond to this survey. Would you like to comment on any experiences we have not covered? What advice or recommendations do you have for city officials or policy makers that would help them to improve situations with people who are homeless or at risk of homelessness?
APPENDIX E: QUALITATIVE THEMATIC QUESTIONS

Major Theme: Present and Previous Homeless Circumstances

Anticipated Minor Themes: economic instability, psychological well-being, health condition, family circumstances, gender orientation, lived experiences.

1. Share with me how you first lost housing and how long you have been without permanent housing. I would also like to know about circumstances leading to any previous periods of being without housing. How long did each previous period last?

2. Have you seen any changes during your various periods of being without housing? Has anything improved? Has anything gotten worse? Have you seen more or less services available?

3. What things did you do to get off the streets?

4. How is being without permanent housing affecting your life and health?

5. If you’ve experienced any times where you felt mistreated because of being without stable housing, please tell me about those incidents?

Major Theme: Weekly Routine

Anticipated Minor Themes: sleeping arrangement, public and private services used, recreational activity, meal experience, job searching, and obtaining money.

6. Describe what a typical week is like for you, say from early morning each day to late in the evening.

7. Describe services and resources you believe you are eligible or entitled to receive? Are you taking advantage of those services and resources? If not, please explain why.

8. Are there services you are not receiving but would like to receive? Which ones are most important to you?

9. What do you consider when deciding where to sleep on a given night?

10. Under what circumstances would you be willing to relocate to a permanent area in Hayward if an appealing area were available?

11. Under what circumstances would you be willing to relocate to a permanent area outside of Hayward or Alameda County if an appealing area were available?

12. What do you do for enjoyment, fun, relaxation?
**Major Theme:** Confronting Challenges and Obstacles

**Anticipated Minor Themes:** motivation, planning, employment, education, health issues, family circumstances, self-esteem/self-worth, establishing goals, networking, friendships, comradery, affection, relationships, dating, love, gender bias, racism, safety issues.

13. Describe challenges you desire to overcome but have not been able to do. What are some of the major stumbling blocks?

14. What would you like your life to look like a year or so from now? How do you plan to make changes in your life?

15. Describe challenges and difficult situations you were successful in overcoming.

16. What do you do to keep yourself and others with you safe?

17. How difficult is it to establish or maintain personal or intimate relationships that you desire?

18. In what specific ways, if any, do you believe the public misunderstands people without stable housing?
APPENDIX F: SUMMARY OF NARRATIVE DATA

The following are response summaries of participants who volunteered to participate in our quantitative survey and supplied narrative responses and of those who volunteered to be interviewed using our qualitative survey. Also included are input provided by those who participated in the Focus Group that was held as a final step in refining survey questions.

CATEGORY 1: PRESENT AND PREVIOUS HOMELESS CIRCUMSTANCES

Survey Question 1. May I ask where you slept last night?

Responses of Interviewees that relate to this question:

- One of the interviewees and her son began living in temporary housing after a few days of living in her car.
- Another interviewee is currently in a shelter and had been in alternate ones for several months.
- One interviewee, who has children, has been homeless for a year and was in temporary housing at the time of the interview.
- One interviewee stated that the reference from a social worker allowed the interviewee and family to be at a shelter after staying at a motel for 3 months.
- One interviewee is currently living with his mother but they are losing the apartment.
- One interviewee said that in the previous night she had slept in her car in the Lucky Supermarket parking lot.
- Another interviewee said he sleeps in his car in the parking lot of the place where he previously worked.
- A male interviewee says he uses a park or open space.
- One male interviewee lives on the street near downtown Hayward with a buddy where he feels safer than at a shelter which he believes is not safe and where he believes that the long wait list would keep him from getting a room.
- At least four of the interviewees were currently living in temporary homeless accommodations provided by non-profit organizations.

Survey Responders:

Several survey responders checked the option called “Other” and then added these comments:

- Lost job.
- With a Friend.
- Friend’s house.
- Not Permanent - with Kids.
- Brother-in-law’s.
- Temporary only.
• Under the bridge by San Lorenzo Library, not in car.
• Green Shutter.
• Trailer.

The importance of family and friends is clear. But, the tabulation of the total responses to the quantitative survey indicates that friends and family are not available resources for many of those currently without permanent housing in Hayward.

**Survey Question 5. During the past 30 days, how many nights did you sleep in . . .?**

Interviewees:
Those individuals who were interviewed while living in temporary housing generally are able to occupy the space for a few months.

Survey Responders:
The following are the responses of those who participated in the survey and checked “Other” to Survey Question 5. Not all respondents indicated the number of days in which they were in the locations they listed in addition to other spaces they may have checked. The quantitative survey response results demonstrate that homeless persons spend their nights in a wide variety of locations.

• Back and forth.
• House in Modesto.
• Other place at risk - 30 days.
• Railroad tracks.
• Weekly motel in Las Vegas – (7 days – had responded that the rest of the month was spent outside.)
• Stable living.
• Trailer.
• Currently living with sister; was homeless for 90 days living in different motels.

**Survey Question 7. How long have you been living in Hayward?**
Survey participants supplied the number of years or months that they had been living in Hayward. The responders had been living in Hayward from a short time to many years.

• One interviewee said that he had been in a Hayward apartment with his mother for five years, but the family was being forced to leave.
• One respondent, who reported being in Hayward 26 years, added that the 26 years were "my whole life."
Regardless of the length of time in Hayward, many participants listed positive reasons for being in the city, as indicated in the responses of Survey Question 8 which follows.

**Survey Question 8. What are the main reasons for living in Hayward?**

The answers supplied by the survey responders indicate a wide variety of reasons. While some are in Hayward simply because they don’t know of another place or can’t afford to leave, many have considered Hayward to be their home even before becoming homeless, and many provided positive comments regarding the city.

Survey Responders:

Seven possible reasons were provided for the survey respondents to choose from. The survey respondents were asked to rank their top 3 reasons. In addition to selecting from the provided reasons, included here are also the reasons for living in Hayward that responders supplied after checking the category “Other.”

- Lost job here. Stayed here.
- Nowhere else to go.
- Raised here.
- Grandparents raised him in Hayward.
- It’s the only place I know.
- Stuck here, no choice, been here all my life.
- Housing apartments. “I love Hayward.”
- Not enough money to leave.
- Family / Kid’s school.
- Family.
- Friends.
- Friends in the area.
- Friend lives in Hayward.
- Like parks - good friends here.
- Weather - not as much crime.
- No particular reason.
- Room & board.
- Cheap rent.
- Availability.
- Found a spot to park at night.
- Couldn’t find anywhere else.
- Last resort.
- Alcohol and drugs.
- Public Transit.
As these responses indicate, and when connected to those who checked “Family roots and ties in Hayward”, Hayward has been or is now regarded as hometown to a large number of those who are currently homeless in Hayward. Hayward residents who are not facing homelessness would most likely similarly express several of these same reasons for living in Hayward.

**Survey Question 9. Why do you not have a permanent place to live?**

The causes of homelessness can be categorized as due to illness or disability, loss of job, low income or poor credit, rent increases or other landlord issues, domestic violence or divorce or other personal or family issues. These causes were cited by the Focus Group Participants. One individual cited the personal issue of drug addiction. Others spoke of job loss, not enough money to pay rent, family disputes or family unwillingness to accommodate them. One group member had no family at all.

Extensive responses were received from those who were interviewed and from those who completed the survey. The responses of interviewees, and of survey participants who indicated that their lack of a permanent place to live resulted from unforeseen events or other factors not listed on the survey, are presented below, arranged into categories.

**Category 1) Homelessness related to illness or disability:**

Interviewees:
- One interviewee is a single female who is unemployed, due to illness, and currently in an apartment but on the verge of becoming homeless. She had previously had stable employment. She had lost her regular job in May 2015, due to her physical condition and had one temporary position in October. She is now on unemployment benefits. She is alone, with no family or anyone to help her financially. Following surgery she may be disabled and eligible for support. She feels stress and becomes depressed and watches television and prays.
Survey Respondents:
Survey respondents who checked “Unforeseen events” or “Other” supplied the following comments related to illness or disability:

- Injured and could not work.
- Knee Replace.
- Cancer treatment.
- Health Issues.
- Hit by car, hospital bills, couldn’t afford rent.
- Injury to left leg.
- In transition, financial hardship returned a few weeks ago, not stable to/from hospital.
- Knee and leg issues.
- John George Psychiatric Hospital/sleep deprivation - did not want to put effort into finding (housing) and was lazy - low self-esteem.

Category 2) Homeless due to loss of job:

Interviewees:

- One interviewee is the provider for his family, and their only source of income, and he has had a lack of steady employment. He became unemployed and did not find a permanent job. His family lost their apartment and have been without housing for 2-3 months at a time between jobs. The company which provided him with the steadiest job that he had before he became homeless went out of business. He has been unable to find any new employment.

- Another interviewee is a male in his 50s who had permanent housing. Then he lost his job when the company shut down. He is getting help from friends and family who live in Hayward and has slept in their residences (couch surfing). His church activity provided food and led to getting a job. He would like to remain in Hayward to be near his friends, family and church, but the rent prices have increased.

- One interviewee quit his job due to a dispute and has a medical condition that also affects his life.

- One female interview stated that the first time she became homeless she had lost her job and had no income. As a result she lost her kids. She was homeless for ten months. The second time she was homeless she lost her job and was homeless for three to four months. The third time she was in an abusive marriage. She has been homeless since 2009.
Survey Respondents:
“Job loss” was one of the response options that survey participants were able to select, and no further explanations were requested for that option.

Category 3) Homelessness due to low income, late rent payment, or poor credit.

Interviewees:
- One mother, who has a young child, cannot get an apartment due to credit. She was also affected by family, since her mother put her and her son out. She had stayed in her car but is currently in a facility.
- Another interviewee was evicted due to late payment and has been able to live in temporary shelter housing at two locations.
- And one interviewee who has a family lost the apartment they were renting because there was no lease. He said that the income requirement for an apartment was three times the monthly rent, which was more than his income. He and his family had stayed at a motel and then been referred, by a social worker, to the temporary shelter in which they are currently living.

Survey respondents supplied the following comments regarding income and credit:
- Not making enough money.
- Husband died in 2013. Cannot pass background check.
- Live paycheck by paycheck.
- No money.
- Retired.
- Rent is very high
- Possibly facing eviction due to loss of income

Category 4) Homeless due to eviction from previous housing due to increased rent or other landlord or rent issues:

Interviewees:
- One interviewee is a female who is part of a 2 parent family with children. They are immigrants but their children are US citizens. They are homeless due to the landlord kicking them out of their small apartment. The landlord made renovations to the apartment and rented it out at a greatly increased price. Because of their legal status, it is difficult for this family to qualify for housing. Both parents only speak Spanish, so they have problems in finding resources.
- Another interviewee is a woman in her forties with children. She moved to the Hayward area from where she had rented a house for nine years because the owner wanted to
rent the house to his own family. She says she could have qualified for an apartment at her previous location but wanted to be in Hayward where her daughter attends school.

- One male interviewee lost his apartment which he had had for 2 ½ years until a new manager began to evict residents and rent the apartments to new residents for high rent. He is on Social Security which makes finding affordable housing difficult. He has had a year without stable housing.

Survey respondents supplied the following comments related to increased rent or other rental issues:

- Rent is very high.
- High rent.
- Rent raised
- Gave notice before having a place.
- Was unjustly evicted.
- Apartment was burglarized and complex would not give an upstairs unit.
- (Landlord) would no longer accept voucher.

*Category 5) Homeless due to violence or divorce or other personal or family issues:*

Interviewees:

- One female interviewee has been homeless for a year, due to her boyfriend’s violence and threats. The police told her to leave for her safety. She was subsequently attacked by the boyfriend, and the police referred her to a program that had no opening at the time. She has children. She couldn’t stay at one room she was renting at someone’s apartment when the landlord found out she was there. At the next room that she rented there were many drug users and some who were mean to her kids. She was referred to housing services by a case worker, and she and her children are currently in temporary housing. Before the situation with her boyfriend’s violence, she had never been homeless.

- Another interviewee has not had his own permanent home in 5 years. He stated that he has a vision impairment that affected his marriage. When he divorced about five years ago, he lost his home and went to live with his mother and sister. But an issue with his sister’s behavior caused the apartment owner to say he would evict them if the mother did not give the landlord a 30-day notice.

- One interview suffered a serious traumatic incident and safety issues which caused her to leave the apartment room she had in another city. Her son, then 22, was shot multiple times when in his car parked near her apartment. She did not have enough money to pay for vital repairs of the room, which had broken pipes and termites, and her room was robbed more than twice in the last year she was there. Often there were gang activities nearby. So she came to Hayward where she does have friends where she
can stay or eat. She has two sisters who live out of state, but has not informed them of her condition. She regards herself as homeless for the first time.

Survey respondents supplied the following comments regarding violence or divorce or other family or personal issues:

- Large Family.
- To assist son w/ regular health.
- Parole.
- Grandparents died, house sold, uncle lost house, moved out on own.
- Just for experience.
- Husband spent rent money.
- Conflict.
- Father’s death when he was born lead to poor living conditions for his family (single parent); mother and brother left him when he was 5 and he had a hard time recovering.
- Education.

As indicated by the variety of responses, there are a wide number of issues that would relate to planned efforts to prevent homelessness from occurring. Important services or facilities might include health services, employment search support, single room or low rental facilities, job training, family counseling, and other services.

**Survey Question 11. Please indicate any physical health conditions you or any family members have experienced while being without permanent housing:**

The Focus Group members cited physical health conditions they had experienced while homeless that included PTSD, difficultly in sleeping, difficulty in finding a place to fully rest, zero preventive health care, lack of concentration, no place to take a shower, effect of insects, and being sick more often. There were also a variety of responses made by interviewees or the survey participants, some involving physical disability and some associated with mental health.

**Interviewees:**

- One interviewee said being at temporary housing affects her health negatively because she doesn’t have her own space and cannot cook her own food. She later added that she has started getting migraines. She feels a lot of stress and worry.
- One interviewee has gained a lot of weight and gets headaches.
- One interviewee has suffered from depression and has the feeling of a hamster in a wheel. She has been very emotional. She said that depression is making it hard to get moving. She knows that there are clinics that will provide help, but the problem is getting there.
Survey Respondents:
These comments were provided by survey respondents who supplied comments related to “Other infections/physical health problems:”

- Prostate surgery.
- Depression.
- Bursitis.
- Swelling and walking challenges.
- Having trouble focusing mentally.
- Son has mental health issues.
- In 2011/knee/leg/leg nerve/car accident/damage.
- Left hand, (lose feeling).
- Arthritis.
- Chronic back pain – disability.
- Schizophrenia.
- Diet restrictions.
- Skin rashes.
- Diabetes, going blind, bad kidney (dialysis).
- Back problems.
- Bad shoulder.
- Insecurities stress, arthritis when it is cold; having to get warm food which costs more.
- Vision/hearing problems make it too hard to keep classes. Have dentures. This church is a blessing.
- Finding a place to shower.
- Right side disabled.

While some of the health conditions experienced by responders while being homeless are not necessarily related to their lack of a permanent residence, there is clearly a variety of health problems which could be improved by the availability of mental or physical health services.

**Survey Question 12. Please indicate any of the conditions you or any family members have experienced while being without permanent housing.**

Individuals who were Focus Group participants cited some major negative conditions. Sexual trafficking and exploitation was reported by one young female who stated she had been kidnapped and forced into prostitution. That participant was currently in a shelter situation and working on education and a positive future. A male reported being shot while homeless. Focus Group members had more negative comments about the police than did the other interviewees. The Focus Group members stated that they did not feel law enforcement personnel were trained to help them. One stated “most cops don’t give a penny about our rights.” Some participants felt that the police were harassing them and making them feel
guilty. One interviewee reported that it is important to him to be in good terms with the police, which he has been able to do.

Focus group members also reported that they were easy targets for scammers. Some feared having to wake up with a gun in their face, and one said that women get victimized. Other conditions reported by Focus Group members included having to carry weight (their possessions) all the time, no privacy, lack of work, no daily hygiene, no toothbrush, no showers in many areas, and always being blamed for something.

Interviewees:
Some interviewees reported negative experiences. Two interviewees did report positive or neutral effects of homelessness.

- In responding to an interview question which asked if she had experienced any times when she felt mistreated because of being without stable house, one interviewee said she feels mistreated due to health issues, and she uses a wheelchair and carries her necessary items. She was seriously threatened by a man who shouted abusing things at her. This has made her feel emotionally disconnected and misplaced in the society.
- One interviewee said that the lack of permanent housing affects his ability to spend time with his children. This is negative because he cannot bond with the family.
- One interviewee admitted to being attacked once or twice. He stated that it happens at night when they think he is sleeping. For that reason he spends the night near the former Bryman College, and he and other homeless individuals look out for each other so that other people do not attack them.
- On a positive side, one female stated that she is working harder for what she needs to do for her family, has less stress because she is not commuting, and she enjoys not cooking.
- The interviewee who indicated neutral effects of homelessness said that he does not tell people that he is homeless. To do so might cause embarrassment about not having a place.

Survey Respondents:
One survey participant stated that he is disappointed in himself and sometimes confronts others. Another respondent selected the response “uneasiness in crowds, fear of open space/travel, nervousness” and stated that the stress was about being stable. He also indicated that his selection of the option “depression” indicated just a little bit of depression. And one respondent simply wrote, “Why me?”

Other survey respondents gave the following detail information for “Other” regarding conditions experienced.
- Fear of being attacked.
• Overwhelmed sometimes.
• Alcoholic.
• Family member died shot by a gang member. Respondent believes a part of the reason for his death was her being homeless.
• Breast cancer.
• Anxiety.
• Learning/attention challenges.
• Worry and fear about uncertainty.
• Often depressed.

The negative experiences of respondents while being homeless include attack, or fear of being attacked, as well as other issues. This is clearly related to the responses to other questions to which respondents often mention the search for safety in choosing a place to live, associating with others, and seeking permanent accommodations.

Survey Question 21. If you do not work or do not have a steady job, what prevents you from maintaining employment?

In a discussion regarding challenges and obstacles, Focus Group members reported issues regarding finding job training, getting help with preparing a resume, and finding references required for job applications. Needed services that were discussed included a place to receive mail, a laundry, and showers.

Interviewees:
• One interviewee stated that not having an address, hygiene, clothes and resources to make a resume and conduct a job search keeps him from having a job.
• One interviewee held a degree and was seeking a permanent position in the field of architecture, having been laid off from his previous long time position and having had only temporary spots since then.
• One interviewee works in facilities maintenance on the days when the company needs him.

Survey Respondents:
Survey respondents were looking for work in a number of areas. One survey respondent selected “Nothing available in the field” and specified his field as “restaurant, retail.” Another who selected “Nothing available in the field” specified that his field is “economics.” Survey respondents supplied the following comments to the option “Other.”
• It was just hard to find a job.
• No longer able to work.
• Can only work part time, can only make so much money on SSA.
• Can’t find anything, not that easy. Changed fields and nothing is available.
- Variable work hours.
- Childcare.
- Retired.
- Need resume.
- Taking care of elderly mom.
- Childcare.
- Tired, lethargic due to being in such a small place, a van.
- Age barrier.
- Not many jobs, heroin addict.
- Education.
- Age.
- Disability – dyslexia.
- Cannot read or write.
- Transportation/personal hygiene.
- Age.
- Job Loss.
- Look for and apply for jobs but not receive call backs.
- Donations, some odd jobs with friends landscaping, but no license. Like to work for self – stubborn. Like to make own choices -hard to work with other people, -respondent doesn’t like to be told what to do. Sometimes people aren’t respectful.
- Procrastination.
- Unemployment.
- Retired.
- It was hard, I was looking.
- Can’t find work.

As indicated, those who described their inability to obtain or maintain employment includes individuals who have physical or mental disabilities or are retired or of an older age and those who have need for child care or care for another relative. Some respondents have education or language limitations. Some stated a need for application assistance, such as a resume. And some simply reported no success in their attempts to find employment.

**Interview Question 2. Have you seen any changes during your various periods without housing? Has anything improved? Has anything gotten worse? Have you seen more or less services available?**

The interviewees were asked to provide narrative answers regarding any changes that they had observed during their time of homelessness. Some of those who have been able to get temporary housing or services from the city, a charity or friends did report some improvement in their conditions. Disabilities, high rent and low income continue to be key factors in their situations.
Interviewees:

Improvements reported:

- One interviewee went to Alameda County Social Services, the Department of Family Stabilization, and was referred to temporary housing by an employment counselor. He believes that temporary housing is a safer place to be.
- One interviewee said that credit counselors provided by a service agency helped her improve her credit. She learned of the shelters from 211, and was wait-listed for one and admitted by another.
- One interviewee said that his life has become more positive due to his active membership in a Hayward church which provided him with meals and social support and through which he has obtained a new job.

No improvements at this time:

- One interviewee said he has not seen any improvement because he has no permanent housing. He stated that he believes there are less services from all agencies for those with no permanent housing. His difficulties have increased due to his loss of eyesight. This respondent now lives with his mother, and is not on the street but is facing it soon.
- One female interviewee was on a wait list and was advised to go to temporary housing by the property manager of the place she lost. She is still calling around for leads to permanent housing.
- One interviewee said that getting affordable housing is harder due to increased rents. The incomes that this interviewee and her husband make are not enough to qualify them for permanent housing.
- One interviewee said that rent cost has increased and so have the qualifications to qualify for housing. Signing up for assisted housing requires being on long waiting lists.
- One interviewee said that you can call 211 for help. But she has no success story because she is still homeless. When she had been homeless previously her father died and she was able to get a house.
- One interviewee said she has experienced changes in her emotional and physical states. She feels horrible about her current condition and is not getting any better. She has been in a wheelchair for several years. Her income is from disability insurance. She has a set of medical conditions which affect her muscles and movement as well as weakening vision, high blood pressure, hearing problems and dental complications. She was qualified for, and does get, free prescription services, so she does visit the medical clinic almost every other day. She said that her acquaintances have been very helpful as she suffers. She often feels banished from society and hopeless. She says she does see a slight increase in people getting services at facilities, but does not see vast change. This interviewee said that she is homeless due to her financial condition and has applied for jobs but not been successful. She believes that is due to her age (over 50) and her homeless condition. She has a history of office work over 20 years but has not been
able to get a job or support from others. She has applied for multiple local jobs through the government services with no success.

The personal conditions of some homeless individuals have been improved by some who have received services. And two individuals did report credit counseling or church social support that has been, or may become, associated with finding a job. But clearly the conditions continue for most, as indicated by the number of people who are homeless in the area and by their other responses to a number of the survey and interview questions.

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CATEGORY 2: WEEKLY ROUTINE

Respondents to the survey, as well as those who were interviewed, provided information on weekly experiences regarding public and private services used, recreational activities, meal experiences, job searches, and obtaining money or finding new sleeping places.

Survey Question 13. Please indicate Hayward facilities where you or your family members have received services.

and

Interview Question 7. Describe services and resources you believe you are eligible or entitled to receive. Are you taking advantage of those services and resources? If not, please explain why.

and

Interview Question 8. Are there services you are not receiving but would like to receive? Which ones are most important to you?

Many interviewees, and some of the Focus Group members, were contacted at or through facilities that provide service to people experiencing homelessness. While the interview question did not specifically ask which facilities the interviewee used, their presence at these sites indicates the use of the Family Emergency Shelter Coalition (FESCO) Banyan House, Community Resources for Independent Living (CRIL), Eden Multi Service Center, and/or the Salvation Army. Focus Group members stated that referrals from 211 are always full and there are more shelters for women than for men, and this left them with no place to go. Among their recommendations, they asked for help to get jobs so they could have their own place. Laundry services were also mentioned as needed. They discussed the many old commercial buildings that are empty and wondered why those sites can’t be reconditioned for the homeless. And they stated that some churches are doing a good job. They would like to see the city or someone coordinate the help that comes from the churches.
Interviewees:

- One interviewee stated that she uses services like food, medical services (she got a flu shot) and counseling. She attends prayer sessions at the Salvation Army where food is also distributed.
- One interviewee said that available resources were friends and the Blue Cross, as well as the Salvation Army.
- One female interviewee stated that there can be physical and verbal violence as a result of the drug use of homeless persons. She said that if they could get the drugs out of the city, things would be better.
- One female interviewee said that a dental van stays in one place for on-site dental service for only three months.
- One interviewee provided more information on the facility where he has received services. He is an active member of his church. He received meals from the church and talked to various members of the church. He thanks the support he has received from the church both spiritually and physically because, thanks to them, he has been able to obtain a job. While it has not been easy to remake his life and get back to what his life once was, he continues to take part in activities at his church and feels that he could help those that are struggling more than him. He admitted to having a hard time but at least he had family and friends to rely on.
- One male interviewee was not sure what was available. He said that in order to make money in addition to recycling, he would do odd jobs.
- Another interviewee said he does not feel entitled to anything and that others who are more unfortunate need the services. He says that he is a “fit guy” and that the services belong to those who are more in need. What would be important to him would be food and a place to sleep. He said the only thing that keeps you alive is food and rest. He does need food and a place to rest so he will be ready when he gets up the next day if the company needs him to work. He said he did get food at local shelters or soup kitchens on the weekend. This interviewee described another homeless individual who is exceptionally thin but does make it through the winter and says he “sleeps around.” The interviewee said that the thin man does not ask for assistance or complain, so “why should I?” This interviewee did state that a place to clean his clothes for free would be good. He would like to clean the clothes he has, rather than replacing them with clean ones from a shelter.
- A female interviewee said she is eligible for housing and counseling services but she is not taking advantage of all the services due to feeling intimidated by the personnel. She said she doesn’t like being put on waiting lists because they don’t call back. She is in a wheelchair and the aid she could and would like to receive is Paratransit. She currently uses BART and AC Transit, but said that Paratransit could be important to her mobility and ability to travel.
• A male interviewee said that a disability benefit program is the important service for him because he has spine pains. But he cannot get disability due to his immigration status, so he has to continue to work in construction or other jobs that cause him pain. This respondent said he would like disability services.

Survey Respondents:
Several survey respondents provided the following services regarding their response of “Other:”
• 6 persons reported receiving services at the Salvation Army.
• 2 responders reported service from Highland Hospital, and one of those added “Save Highland.”
• 7 responders reported service from churches: of them, 5 mentioned Hayward/South Hayward Parish (called SHP by one of them) and credited for showers by another. Also reported, each by one person, were New Christians Church and 3 Crosses Church. And 2 simply said “Church” or “Church food and shelter.”
• 8 responders mention health service centers: Hedco Health Care Service Center, Villa Fairmont Mental Health Center, Life Line Medical Center, Kaiser, Native American Health Center, Hayward Pediatrics, TriCity Health Center, and Bay Valley Medical Group.
• Also mentioned, each by one responder, were Abode, South County Homeless Shelter, Heavens Heroes VA Services, Walmart, “Food Center” (name not given) Second Chance and 211.
• And one respondent credited “Work” and said “People do not work but still need help.”

When asked to provide advice or recommendations to city officials or policy makers that would help them to improve situations with people who are homeless or at risk of homelessness, Question 28 survey responders provided the following remarks regarding services.
• Need more shelter or homeless resources. Does not seem to be enough in Hayward.
• More resources, housing availability.
• More programs for people that are homeless. Shelters have long waiting lists.
• Not enough info. Resource for single man taking care of kids.
• Housing for single (non-disabled) adults is hard to find.
• Improve emergency services such as beds not available. Even without a bed, preferably just out of the cold. Also more kind, compassionate, and non-judgmental workers at the service sites.
• Have more shelters. Hope their experiences help overall.
• Make more affordable housing and more section 8 available.
• Help people with low income housing.
• More shelters.
• Use old military bases that are left alone without use until large developers come in. We paid for it so we should be able to use it [the one off Winton by the airport].
• More position of free government apartments are assign to homeless people and low income people to better help homelessness and also for international students as well.
• Housing low cost.
• Open shelters, more rooms to be able to stay with family; don’t want to be separated.
• Need more affordable houses for families with children.
• Open more shelters.
• More shelters needed.

While some survey respondents and interviewees stated they were not aware of certain services, or had issues with them, there are a number of services currently provided by agencies or facilities that are being used by people experiencing homelessness. And clearly, more shelters are hoped for by survey and interviewee responders. The desire for an increase in affordable long term housing, both for single individuals and for families, is repeatedly expressed.

**Interview Question 6. Describe what a typical week is like for you, say from early morning each day to late in the evening.**

Some people who are homeless sleep in cars. Some pick up recyclables for gas and food money, and some have jobs. Others spend time looking for work. And some spend time with friends or family. As indicated in the responses to the previous questions, many interviewees receive services at Hayward facilities during the week.

One Focus Group member said he spent all day chasing money and food. Another indicated that he went to sleep not knowing if he was going to wake up. A typical week was described at the Focus group as one with “no place to go.”

Interviewees:

• One interviewee said that in the morning he looks for a safe place to park his car. Then he may hop the BART gates to get from one part of Hayward to another. He panhandles for money to buy a dollar sandwich at McDonalds, for example. He likes to hang out with his group of friends. He picks up recyclables to turn in for money. At night he will sleep in his car if he does not feel safe or the weather is not right.
• Another interviewee said that she also collects bottles and cans and recyclables and uses the money for gas for the car and a small amount of food if there is enough money to spare. At night she drives around to find a safe place to park and sleep without having the police called on her. She worries that if someone calls the police to report her, then her car would be noticed in other places more easily. Every morning she folds up her blankets, puts them in the car trunk, and gets ready for the day. She is aware of the shelters available for people to spend the night but was not sure of their safety.
She spends time with friends and family during the day, but does not spend the nights with them because she does not tell them she is homeless and doesn’t want them to learn that.

- One Interviewee, currently living with a relative, starts the day with exercise followed by breakfast. The respondent searches the internet for housing since he is soon to be losing his, and then has lunch. In the evening the respondent cooks dinner, listens to the radio, and watches television.

**Days spent at work or looking for work**

- One employed interviewee, a maintenance worker, said he thinks the hardest thing is finding a source of clean water. He is usually at work around 7:00am and can get water in the bathroom there and can use the company truck to go and get food if needed. One example of what he might buy on a workday is the McDonald’s Dollar Meals. In the end of the day he might get food from local vendors who did not sell all their perishables. When this respondent is not working and needs a place to stay during the day, he goes to the Hayward library. On the weekends he tries to get food that is provided at the local shelters or soup kitchens, because his work might interfere with him getting food there during the week. At night he looks for a place that is warm and clean, like a public building. Or he might sleep in a truck from his work if one is available.

- One interviewee said she normally spends her morning looking for work for the day. She looks for something that would make her money so that she can find a place to stay for the night. She has health problems so cannot do anything too hectic or rigorous. If she has a part time job for the moment, that is where she spends most of her day. She sees friends when she can, but that requires walking or finding a way to get to San Leandro where they are.

- A male interviewee is currently living with his daughter and so can stay in for a while in the morning, sometimes helping with housework or chores. Then he goes out and spends a lot of the day walking around looking for job applications to fill out or applying for cheap housing. Before he was with his daughter, he felt very unsafe sleeping in park benches or shelters.

- Another male interviewee starts his day by going to whatever job he has. He does construction jobs or works in a kitchen as a cook. He usually rents a room in a hotel or house, wherever he is staying that week, and rests there.

Attempts to obtain money, either by working or searching for work or by collecting recyclables, were cited as an important a part of the typical week for at least some people living homeless
in Hayward. Food, safety, friends and family were also important to the typical week of interviewees.

**Interview Question 9.** What do you consider when deciding where to sleep on a given night? and

**Interview Question 10.** Under what circumstances would you be willing to relocate to a permanent area in Hayward if an appealing area were available? and

**Interview Question 11.** Under what circumstances would you be willing to relocate to a permanent area outside of Hayward or Alameda County if an appealing area were available?

Interviewees and Focus Group members indicated that safety is an important issue in selecting where to sleep. There is a clear connection to Hayward by most of those interviewed, but relocation to another city would be considered by some, depending on issues such as safety and the area surrounding the location. In their responses to Question 8, which asked their main reasons for living in Hayward, survey respondents revealed strong associations to friends and family roots, positive attitudes toward Hayward and its opportunities and environment, and work connections for some. These factors can be assumed to have an influence on willingness to relocate in or outside of Hayward.

One Focus Group member stated that he has slept in the same spot since 2003. He does not want to relocate because he likes his spot. One said that when considering where he sleeps, the camp has to be portable. Another member said he wants to be away from troublemakers and physical violence. Another mentioned the need for privacy in selecting a spot. One would seek a place that accepts dogs as companions and that having a dog is good for safety. Regarding safety, one Focus Group member stated that having another person who is homeless nearby is also good for safety. And one said he was not interested in being relocated outside of Hayward.

Interviewees:

- One employed homeless survey interviewee provided a great deal of information on this topic. He said that he sleeps in a company truck if one is available and he has work. The shelters can be pretty full, so if he can’t sleep there he likes to be where he can be close to free food. He was not willing to sleep in someone’s home or property if it were offered for only a night because of concern for safety and being robbed. He keeps everything he owns with him. He said homeless persons do get robbed and safety is very important. He strongly thinks that the former California Air National Guard buildings on Winton Avenue by the airport should be used for the homeless. He would take a place there if he were offered it for free, even if it were not improved on, since they are not currently in use and taxpayers paid for them. He said he does not believe
people should be dying of the cold on the streets while this big base has been built and is not now used. He currently has a job where he can earn money to buy food. If he had a job near the permanent site outside the area and could use that money to buy food, and if the location were close enough to his job that he would not have to spend money on a bus, he would consider it. Since other homeless people would be moving there, he would like to be sure the place was close to homeless assistance services for those others who need it. He would relocate to any permanent residence outside of Hayward or Alameda County as long as it was safe.

- A female interviewee said she chooses where she will sleep based on the amount of money she has to pay for housing. She assesses the area to determine if the area is safe. She would relocate to any permanent residence that was safe.
- A female interviewee stated that you have to park at a business after it closes and remember to leave before 5am.
- A male interviewee said he looks for a park or bench or open space to sleep in. He has a storage spot for his possessions. He would not be willing to relocate outside of Hayward or Alameda County, but would do so if there were restrictions not allowing him to stay in Hayward, such as being kicked out of Hayward.
- A female interviewee stated that most persons she knows want to stay in Hayward because this is where their roots are. They would decline housing because of the location, for example in Tracy.
- One interviewee who has found a job, and is currently sleeping on the couches of friends, stated in response to a related question that he may leave Hayward due to the cost of rent here. He would like to stay here where his family, friends and church are located. He feels he could help others in Hayward and be with his church.

Many of those who are homeless prefer to live in Hayward. The specific conditions and locations of relocation options would clearly affect any decision to move.

**Interview Question 12. What do you do for enjoyment, fun, relaxation?**

The activities described by interviewees and Focus Group members are remarkably similar to those of persons with permanent homes. Many do enjoy interacting with others. And some clearly use facilities such as the Hayward Library or local parks.

Focus Group members said that for pleasure and enjoyment they use Google to search the web, stay in touch with friends and family on Facebook, play chess, carve wood, spend time drawing or reading interesting recipes, perform photography, or sing along to karaoke music. Some stated they were not able to go to movies, the theater, or outdoor games or to play volleyball.
In addition to the items reported as part of their typical week, some interviewees described specific activities. In addition, of course, several individuals stated that they are currently sleeping in the homes of friends or relatives, which would allow for social interaction.

Interviewees:

- A male interviewee said there were not a lot of fun things connected to being homeless, but they do get to talk to a lot of people who are homeless and to people who are concerned about the situation of the homeless. He said that the homeless can talk because there is no more shame to hide; it is in the open. He also emphasized that he goes to local community centers and plays ping pong sometimes, and sometimes plays basketball with others near a playground on the weekend. He likes the Farmer’s Market where sometimes the vendors are nice and give him free food. He also goes to the library to hang out, read books, sleep, and charge his cell phone.
- One female interviewee enjoys listening to music. She enjoys taking BART to San Francisco and going to museums or movies if she has money. She talks on the telephone to her friends and goes to parks.
- A male interviewee goes to a gym that has a Jacuzzi. He watches TV when it is available. And he says he enjoys a couple of cold beers.
- One female interviewee stated that not having money prevents her from doing things. Someone gifted her son with theme park tickets and she was able to enjoy time with him that way.

The responses of survey participants who provided written remarks indicate that they, as do many who are homeless, interact with others or with service providers and with friends.

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CATEGORY THREE– CONFRONTING CHALLENGES AND OBSTACLES

The responses of the interviewees and the Focus Group members, and a review of related responses by survey participants to specific survey questions such as Question 9 “Why do you not have a permanent place to live?” provide insight into the challenges of the broad range of Hayward homelessness.

**Interview Question 13. Describe challenges you desire to overcome but have not been able to do. What are some of the major stumbling blocks?**

Focus Group members listed a variety of obstacles they face, from finding a place to charge a cell phone to needing services for dental, medical and mental health, and discrimination due to
being homeless. Those with dogs or pets cannot locate places where dogs and pets can be accommodated, so are on the streets.

The profile of the first interviewee listed below would seem to be typical of the type of person that many members of the public might expect when they hear the word “homeless.” But he had only been homeless for the last 3 months of his lifetime when he was interviewed. There is a wide variation in the challenges not yet overcome by respondents, from physical disabilities to psychological issues to employment conditions.

Interviewees:

- A male interviewee said he is a Vietnam veteran around 60 who was once addicted to heroin and now is addicted to alcohol and tobacco. This lifestyle led him to being asked to move out of the room he had been renting from an older woman. He lost his previous house when he divorced and currently has no friends or family. He has been homeless for 3 months, and it is his first time being homeless. He is currently living on the streets. This interviewee said he feels that law enforcement and city officials would like to get rid of all homeless people and use forceful tactics against those who are homeless.

- Another male interviewee said he has several challenges he has been attempting to overcome: depression, back issues, lack of social skills, and obesity. The lack of permanent housing and employment has prevented him from overcoming these challenges, and has resulted in increased weight. And depression prohibits him from engaging in relationships.

- One interviewee said his challenges are health issues and lack of job opportunities because of his situation and always being tired. He wants to make it through the night, eat, and get over family relationship problems.

- Another interviewee reported “I can’t see. I’m disabled. It’s hard to function in society, period.”

- One said it is against a city ordinance to put up tents.

- One male interviewee provided information that once again involves diversity. He has had a major employment challenge. He is an immigrant who came to the United States in the 70’s and attended a university and got a degree. A couple of years ago he was laid off from a professional job he had held for ten years. He has had temporary jobs, some not office jobs, but hasn’t been able to get a permanent position in his field. He has attempted to better his chances of employment by registering his work in international competitions, but most such competitions and events require registration fees. In addition to the employment problem, his second challenge is to establish a better relationship with his children and their families in the area. He was previously married, is divorced, and has five children. He has been sleeping in his vehicle for months. The children have attempted to help him and have offered to have him live at their homes. He does accept money from one of his children for picking up his
grandchildren from school. He believes that his cultural heritage is what is not letting him depend on his family. He feels that focusing too much on his challenges could be the stumbling blocks to maintaining optimism and goal orientation.

Two survey responders added related comments to the final survey question, Survey Question 28, which invited them to provide advice or recommendations to city officials or policy makers that would help them to improve situations with people who are homeless or at risk of homelessness:

- High cost of rent, hard to find a place with children, can’t afford more than one bedroom, people will not rent one bedroom to someone with two children.
- It’s just rough out here without resources, real hard.

As with other issues that have been addressed, homelessness is related to lack of income and lack or resources. And there are clearly other challenges and stumbling blocks that affect the circumstances and conditions of the particular individuals.

**Interview Question 14. What would you like your life to look like a year or so from now? How do you plan to make changes in your life?**

The clear desire of most interviewees is for employment or income and permanent housing, and some interviewees stated that they are taking serious steps to achieve that.

Interviewees:

- The stated desire of one interviewee for a year or so from now is that he would like to have permanent housing and employment. He plans to make changes in his life to achieve these things by saving money. He will continue to look for resources to assist him and will leave the area if his is unsuccessful.
- Another interviewee said he wants to be able to have an apartment and permanent job and maybe go to school.
- One of the unemployed interviewees said he would continue to network with people regarding his profession and would like to be working full time and travelling. He has been attending events and meeting people and sharing his artworks and engaging in discussions. He believes such small actions make a small change in your life, and he has been maintaining his enthusiastic and optimistic thoughts well and will continue to do so.
- One respondent, in his response to Interview Question 13, said he would love to have a place to lay his head that would be secure. He would not mind renting a room in someone’s house and would like the option of renting an apartment if he could afford it. He does not like living in the streets.
As previously stated, one interviewee’s desired change is that he would like disability benefits to finally be granted after 7 years of appeals.

Most survey respondents would like increased income and permanent housing. And it is encouraging to see that some of the interviewees did indicate positive attitudes and actions in working toward that goal.

**Interview Question 15. Describe challenges and difficult situations you were successful in overcoming.**

Some interviewees have reported success in health or friendship issues. In regard to overcoming challenges, one Focus Group member stated that there is a need to focus on positive things. Another believed in confronting feelings of hopelessness with faith. One said to try to keep busy because not doing anything is depressing. A step by step process for getting through the day was recommended.

Interviewees:

- One interviewee said he has had success with cleaning and washing clothes, which he could not achieve before. He is proud of himself because he has seen minor changes in his ability to improve his condition. He noticed that he can walk without the use of his wheelchair.
- Another interviewee said he was able to get away from hostile homeless people and not get hurt. He has been able to be in good terms with the police, which is important to him. He has been successful in making friends in the homeless community where people are able to help each other. He has been able to control certain mental health issues that are challenging, like paranoia and uneasiness.
- Another interviewee also had positive results and said he has been successful in maintaining his optimistic attitude despite his current living situation. He receives a small amount of Social Security benefits that have been very helpful and enough to provide him his daily food. He is in good health, which is helping him to spend less. He has found several work related events and attends them to be influenced with professional changes and to network with people. He has not yet faced a major challenge due to being homeless, but he feels stressed by seeing the elderly on the street.
- One interviewee is a survivor who said he is still alive although he had come to the line of suicidal thoughts. He said he is better now.

While there are few responses to the specific question regarding success achieved in overcoming challenges, those who have made such progress might be invited to serve as inspirations to those who have not yet been successful in overcoming challenges.
Interview Question 16. What do you do to keep yourself and others with you safe?

Concern for safety is clearly apparent in these responses, and the interviewees indicated that they take actions accordingly.

Interviewees:
- One survey participant said he is a private person so does not have many issues to share. His privacy is a mechanism that he uses to keep himself from strangers who may attempt to hurt him mentally by belittling him regarding his situation. He carries a knife with him to keep himself safe.
- One interviewee who lives outdoors said that he and others try to inform people whom they trust of where they are in case something happens. Like other homeless do, he sets up safety precautions like signs stating that they are there. If he and other people are sleeping outside in a tent, they will try to put some sort of fence around the tent. A last resort is having some sort of weapon, but he wouldn’t want to use it. The main activity is helping others. Even though he needs help, too, it is always good to help others because they help you also.
- One interviewee said he has been sleeping in a vehicle for months. In the daytime he drives to places where lots of people are around. At night this respondent parks in the private parking lot where he previously worked. That place, and its parking lot, is open 24 hours a day, and he asks for permission to come in. He can get water and use the restroom there. He added that he is fortunate because sometimes you have to know the right people, and people you know can make a difference. There are people working around the area so he feels safe in his vehicle and can draw artwork in his vehicle.
- One female interviewee stated that there can be physical and verbal violence as a result of the drug use of homeless persons. She stated that if they could get the drugs out of the city, things would be better.
- A male interviewee said he does not go out at night because he can barely see at night.

In the responses to this specific interview questions, as to others, safety is clearly an issue to people experiencing homelessness, and there are attempts to achieve it.

Interview Question 17. How difficult is it to establish or maintain personal or intimate relationships that you desire?

It is a positive thing that many responders who are homeless can and do establish relationships, though others do not. One Focus Group member said that it is difficult to maintain personal relationships without a place of your own.
Interviewees:

- A male interviewee who has health issues said it is easier to establish relationships than you might think, but it gets tough. You have to trust even when you don’t have anything else, and the hard part is being able to trust another person. He said that it seems harder to do than it really is because you just do it.
- Another interviewee said that he does not feel that his current condition prevents him from establishing intimate relationships with others except his family. He is aggressively showing up at social events, local facilities and volunteer events. He does not spontaneously share too much information about his living conditions to others when he socializes with people who are not homeless. He believes that his behavior is due to his cultural heritage but that his pride is not letting himself be that way when he is in front of his family.
- An interviewee who goes out only in the daytime said that establishing relationships was not difficult. He said “I’m fun to be with, loving and kind. I am an ex-bartender.”
- One interviewee stated that he finds it very difficult to establish and maintain relationships because of his large size, depression, and lack of social skills. He said that when he meets people they usually take items from him. He finds that difficult because he does not have a job and has limited resources.

Since there is the indication that personal relationships are established or maintained by the people who are homeless, and some report that they are currently couch surfing/living in the homes of friends or relatives, it is possible that such relationships might serve to assist those who are homeless. It might be that those who do obtain permanent housing would be willing to maintain relationships and possibly assist those who have not yet done so.

**Interview Question 18. In what specific ways, if any, do you believe the public misunderstands people without stable housing?**

Persons experiencing homelessness do feel that they are misunderstood. Focus Group members stated that people are tired of seeing other people who are homeless. They said that society lacks compassion. And, as said by others as well, people who are homeless believe that the public thinks they are all addicts, alcoholics, and guilty of something.

Interviewees:

- One interview participant stated that he believes that the public misunderstands him because he is stigmatized as being lazy. He said he has discovered that he has to work harder to survive. He also believes that he earns fewer wages than normal persons who have housing.
Another interviewee said that people think they are all drug addicts, thieves or lazy, and that is not the case. He said that people become homeless because they lost their homes, have problems with their families, or lost loved ones; some might have been at the wrong place at the wrong time.

A male interviewee spoke of “The need.” He said that people need more than what they are able to achieve. The public doesn’t feel that people that have a need try hard enough. He said it’s not as easy as you think. Those who disregard those who have a need ought to try it sometime. He said “I am a newcomer to this situation. It is no fun. I can fend for those who don’t have.” When asked if he thought it was out of fear that people don’t give, he said “I have had it all. I always gave, and after I lost everything, no one came back to assist me.”

One interviewee has a positive attitude and does not feel that he has been mistreated by people because of his current situation. But he emphasizes “I am very fortunate that I am healthy and energetic although I am 65 today.” He stated that it would have been hard if he had had a medical condition. When he is in a job related event he does not mention his current living conditions because he is aware that people judge the stereotypes of homeless and will stay away from them. He is homeless but desperately looking for a job, which makes a difference according to him. He is aware that many homeless in Hayward are not maintaining such high optimistic spirit as much as he does.

Survey Respondents added the following comments to the final survey question, Survey Question 28, which invited them to provide advice or recommendations to city officials or policy makers that would help them to improve situations with people who are homeless or at risk of homelessness:

- Don’t be judgmental.
- There are people who are homeless in Hayward. Just because they are not acknowledged doesn’t mean they do not exist.
- More awareness of people experiencing homelessness who are not drug addicts or destroy property. People look down at them for being homeless.

And one added this praise and suggestion:

- Good job on the survey, spend a week as a homeless person.
APPENDIX G: DETAILED METHODS AND PROCEDURES

A mixed-methods descriptive research design was adopted that involved quantitative and qualitative procedures. Since the 1970s, rigorous qualitative methods have emerged from within social science-based fields of inquiry. Many social scientists find qualitative methods, such as phenomenology, ethnography, and sociolinguistics, well-suited to capture particular characteristics of human experience. Our study team believes that a mixed-methods approach that embraces qualitative research principles and procedures coupled with traditional quantitative methods would optimize study results.

Quantitative Procedures

The quantitative component entailed closed-ended survey questions to capture information typically collected by U.S. cities and counties through their point-in-time count (PIT) of people who are experiencing homelessness. Our survey was tailored to the unique characteristics of Hayward’s homeless population. A key aim was to get as close as possible to what it practically means to experience homelessness from the perspective of participants. Questions were developed based on a review of PIT’s from Alameda County and Seattle and other surveys completed in Hayward, along with a discussion with stakeholders regarding information sought through the survey process.

Following approval by the CSU East Bay Institutional Review Board, a pilot test was undertaken to identify and revise any questions found to be unclear, difficult to answer, or misunderstood. People who were experiencing homelessness were recruited as participants for the pilot study by Taskforce members who had established personal relationships with them.

Persons experiencing homelessness often lack a permanent address and might move from one location to the next on a daily, weekly, or monthly basis. Therefore, it was determined to be too difficult or practically impossible to apply a probability sampling strategy, given the range of objectives and goals of the study. Accordingly, service providers and consultants helped identify locations within city limits where it was possible for us to reach, we believe, about 92 percent of Hayward’s estimated homeless population. Participants were also provided with an opportunity to complete the quantitative survey online using the Survey Monkey application online through volunteers with tablets in the field or via their own internet connection as available. Submission of all online survey materials was monitored by a volunteer from the Eden Area League of Women voters to ensure impartiality and security.

We applied a simple statistical correction factor to adjust our count upwards by 10.0 percent. When the actual count of 380 participants was adjusted to correct for our estimated undercount, a realistic count range of 380 to 422 participants resulted. This is our best estimate of the number of persons experiencing homelessness at any time during November 2015. Appendix H outlines our sampling frame containing the locations where surveys were administered. All surveys were kept in a secure location at the Hayward City Hall, except when
they were being coded to create an electronic data file. During the coding and analysis process, all surveys were kept under lock and key in Dr. Wilson’s faculty office.

**Qualitative Procedures**

Qualitative procedures consisted of a focus group session and in-depth interviews with participants who were willing to share their personal stories with survey field workers. Interview questions were organized by three themes: Present and Previous Homeless Circumstances, Weekly Routine, and Confronting Challenges and Obstacles. The questions were worded carefully to help foster honest and reliable participant responses with as little as possible inadvertent coaching by survey workers. Some of the subthemes that emerged from the Hayward interviews included *economic instability, psychological well-being, gender bias, homelessness profiling, public and private services used and desired, comradery, establishing and maintaining personal and intimate relationships, and goal setting.*

All survey workers received training on how to (a) take useful preliminary discussion notes, (b) derive complete notes, and (c) use the procedures outlined below to construct narratives and interpretations from language-based data that would be trustworthy. The real names and photographs of homeless participants were not associated with their personal narratives unless written consent was given.

**Qualitative Procedures to Enhance Trustworthiness**

- Triangulation
- Searching for disconfirming evidence (e.g. alternative explanations)
- Engaging in Reflexivity
- Member Checking
- Collaboration
- Developing an Audit Trail
- Peer Debriefing

**Interviewing Youth Aged 15 to 17**

Minors under age 15 unaccompanied by adults were counted but not interviewed. We received authorization from the CSU East Bay Institutional Review Board to include minors in our study who were at least 15 years old. The opportunity to collect in-depth narratives on the lived experiences and challenges confronting homeless youth aged 15 to 17, and the resulting benefit in terms of informed policy and program development, far outweighed, in our judgment, any minimal level of risk that might result. If minors stated that they were in contact with a parent or legal guardian, an effort was made to obtain consent from those guardians if a telephone number was shared with the survey worker.
Requests for Assistance

Some survey and interview participants identified immediate needs. These were gathered on a separate form along with contact information. These forms were stored separately from the anonymous surveys and were directed to the most appropriate agency for service.
APPENDIX H: SURVEY SITE FRAME

This map indicates the sites where the Hayward Homeless Count was conducted (purple locations) and advertised (orange locations). It does not include actual campsites or specific street outreach sites.

An interactive version of this map can be found at: goo.gl/ZwOm4Y
### Homeless Count sites

1. Abode Street Outreach (address is approximate)
2. Building Opportunities for Self-Sufficiency (BOSS), South County Homeless Project
3. Cal Self Storage
4. Chabot College
5. Community Resources for Independent Living (CRIL)
6. California State University, East Bay (CSUEB)
7. Eden Area Multi-Service Center (One Stop Center)
8. Eden Information and Referral (Eden I & R)
9. Eden United Church of Christ - Comida para Cherryland
10. Eden Youth and Family Center (Youth Programs and Hayward Day Labor Center)
11. El Shaddai Ministries
12. Farmer’s Market
13. Family Emergency Shelter Coalition (FESCO) office
14. First United Methodist Church
15. Glad Tidings - Community Development
16. Hayward BART Station
17. Hayward Senior Center
18. Bay Area Community Services’ Wellness Center - Hedco House
19. Horizon Services Lambda Youth Group
20. La Familia
21. Life West Chiropractic College
22. Magnolia House
23. Neighborhood Church (aka 3 crosses)
24. New Hope Christian Fellowship
25. New Life Christian Church
26. Sacred Space
27. Salvation Army
28. South Hayward BART Station
29. South Hayward Parish
30. Templo de la Cruz
31. Trinity Christian Fellowship

### Sites where the Homeless Count was advertised via poster, flier, and/or business card handouts

- Alameda County Law Library
- Alameda County Women, Infants & Children (WIC) office
- All Saints Church office
- Budget Inn
- Casablanca Hotel
- Castro Valley Library
- Church of the Cross
- Command Center
- Community of Grace
- Eden Hospital Emergency Department
- Eden Multi-Service Center (Alameda County Social Services) - 1st and 3rd floors
- Extra Space Storage
- Good Shepherd Lutheran Church
- Hayward Library (Downtown and Weekes)
- Hayward Police Department
- Heritage Inn Express
- Hayward Unified School District
- Islander Motel
- Motel 6
- Parole and Public Defender's office
- Phoenix Lodge (A Street and Industrial Parkway)
- Rodeway Inn
- St. Rose Emergency Department
- Super 8
- Tiburcio Vasquez Health Center (Mission and Foothill sites)