# Metro Dallas Homeless Alliance Continuum of Care 2022 Homeless Count & Survey Independent Analysis



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### Overview

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

### Methodology

The official "night of record" for the Point-in-Time Count (for those sheltered and unsheltered) was February 24, 2022. However, we received approval from HUD to conduct the count of those who were experiencing unsheltered homelessness from February 24 until March 5. Street Outreach teams, defined as individuals who a)locate, contact, and provide information, referrals, and services to individuals experiencing homelessness in unsheltered spaces as part of their day-to-day job function and b)individuals who have been trained on infection control protocol in the outreach context and c)organization participates in the Dallas and Collin County CoC Street Outreach Committee. MDHA worked closely with the PIT Count Workgroup and Street Outreach Workgroup to ensure full coverage of both counties.

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

<sup>&</sup>lt;sup>1</sup> www.census.gov/quick facts accessed 4/25/21

The 2022 sheltered Count included individuals staying in a total of 67 projects comprising emergency shelters (36 different programs), transitional housing units (29 different programs), and safe havens (2 programs) on the night of 24 February based on reports received from the projects and data entered into the Homeless Management Information System (HMIS) and through contacting shelters that are not part of HMIS. Four emergency shelters and eight transitional housing organizations were located in Collin County. Individuals experiencing unsheltered homelessness (those sleeping on the streets or in other places not meant for human habitation) were counted using direct engagement and interviews. Teams walked under bridges and to other areas where encampments of unsheltered individuals experiencing homelessness had been identified. They also investigated abandoned buildings where persons experiencing homelessness may have been residing.

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

- Interviewees were asked if they had been questioned previously and, if so, they were not included more than once in the Count.
- Interviewees were asked where they slept on the night of 24 February 2022 (the official night of the Count) and were classified as experiencing unsheltered homelessness only if they slept in a place not meant for human habitation, per HUD guidelines. This assured that we did not double count someone who was included in the HMIS shelter count and that we did not include those who appeared as if they were experiencing homelessness but were not, according to HUD guidelines.
- Names of unsheltered interviewees were compared to HMIS records to ensure they were not counted during the sheltered Count.

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

All emergency shelters, transitional housing, and safe havens that are part of the CoC were contacted and inventoried. Shelter providers were trained on entering data and assessments into HMIS and given the opportunity to confirm the data assessed on the night of the Count. Shelters that do not use HMIS, such as domestic violence shelters, were asked to report their numbers on February 24, 2022. In some cases, Count US was used, in others data was manually collected and entered into an Excel file.

### **Inclement weather during the Count**

On the night of February 24, 2022, the Dallas area experienced below freezing weather (25F) and so Warming Stations in Dallas and Collin Counties were activated. Per HUD regulations, these individuals were categorized as residing in emergency shelter. While the cold was not as extreme as during Winter Storm Uri during the 2021 Point-in-Time Count, the warming centers accounted for 295 of those in emergency shelter or 6.7% of the total 2022 Point-in-Time Count and one out of eleven (12%) of the total number of persons in emergency shelters on the night of the Count.

# **2022 Key Findings**

Data collected show a total of 4,410 sheltered and unsheltered individuals experiencing homelessness (per HUD's definition<sup>2</sup>) in Dallas and Collin Counties on the night of the Count (Figure 1). Breaking down the location of those experiencing homelessness, we determined that most were in Dallas County (91%). It is important to note that, for those experiencing unsheltered homelessness on the night of 24 February, geographical assignment was determined by where they were interviewed during the day, which may be near where they seek services but not necessarily where they sleep. The same is true of the sheltered population which may move from one county to another, particularly in counties where there are a lack of shelters for specific groups. Therefore, the location of both the unsheltered and sheltered populations may not reflect where they were living before experiencing homelessness.

Persons experiencing homelessness can be found in one of four settings – places not meant for human habitation (i.e., unsheltered), emergency shelters, transitional housing, or safe havens. The locations of those experiencing homelessness by county in 2022 are shown in Figure 2. Within the total population, more than one out of every two persons experiencing homelessness (57%) were in emergency shelters on the night of the Count, with one in nine (11%) in transitional housing. In 2022, approximately 1 of 3 (31%) those experiencing homelessness were found on the streets or in other places not meant for human habitation (Figure 3). However, the Point in Time Count occurred during the Winter Storm Uri during which

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<sup>&</sup>lt;sup>2</sup> (1) Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or a place not meant for human habitation immediately before entering that institution; (3) Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; or (4) Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member. https://www.hud.gov/sites/documents/PIH2013-15HOMELESSQAS.PDF

Warming shelters were activated. Per HUD regulations, Warming Shelters were categorized as emergency shelter and thus our 2022 numbers were higher than in previous years.

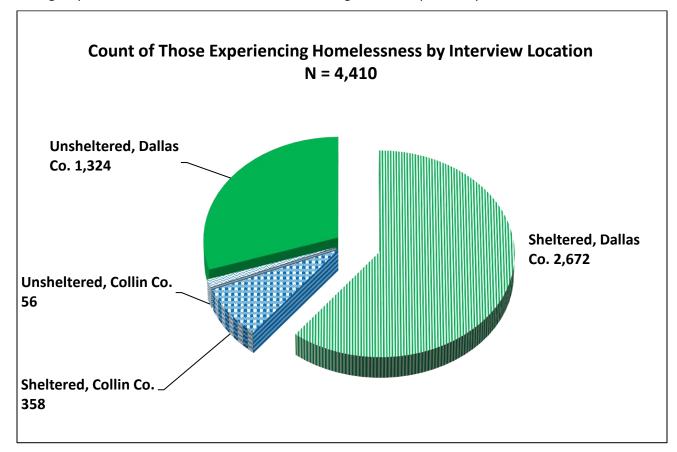


Figure 1

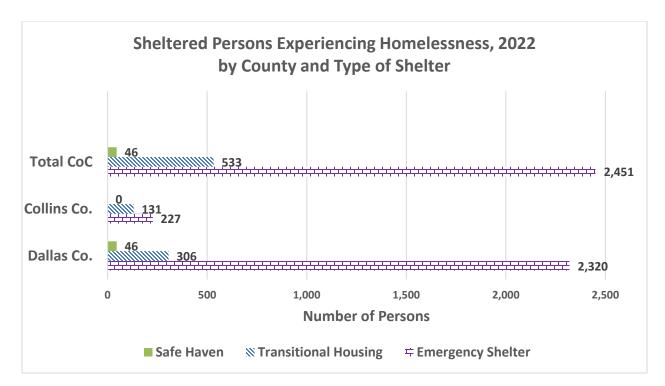


Figure 2

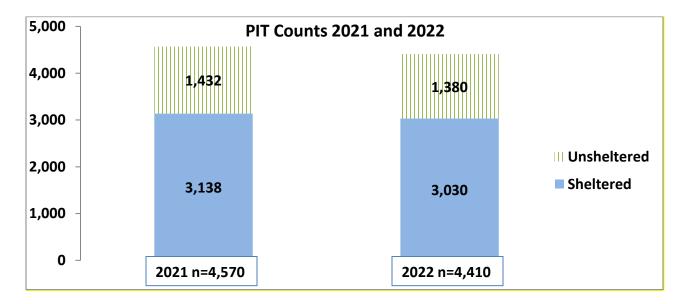


Figure 3

# **Characteristics of Those Experiencing Homelessness**

Persons experiencing homeless are classified into three household types: persons in households without children (HHWOC), persons in households with children under age 18 years (HHWC; these include families who are fleeing from domestic violence), and children-only households (under the age of 18 years). Figure 4 shows the breakdown of these groups between the sheltered and unsheltered populations while Figure 5 graphs these data in a way to show among each household type, what number/percent were in emergency shelter, transitional housing, and safe haven. One in four of sheltered persons were in households with children while, among the unsheltered, two households (total of eight persons) with children were found. Eighteen children in children only households were found among the sheltered with 14 in emergency shelter and four in transitional housing. Two children-only households were found among those who were unsheltered. Of those households with children, in sheltered situations, three of four were in emergency shelters on the night of the Count.

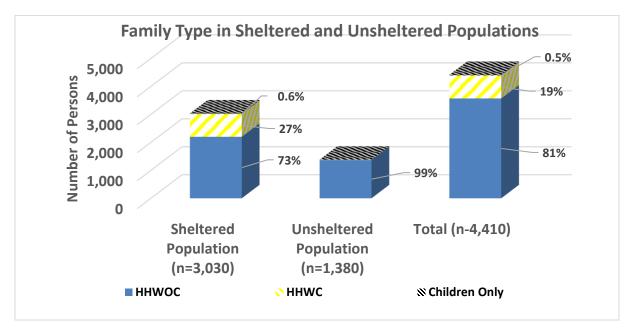


Figure 4

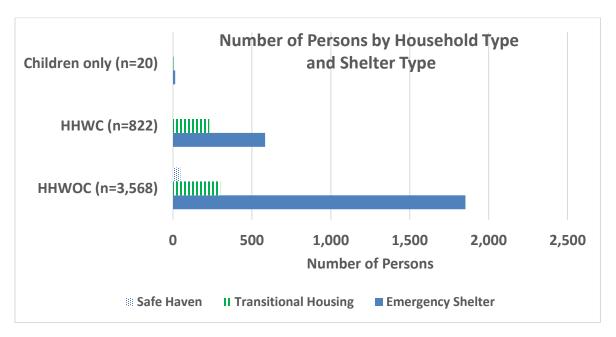


Figure 5

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

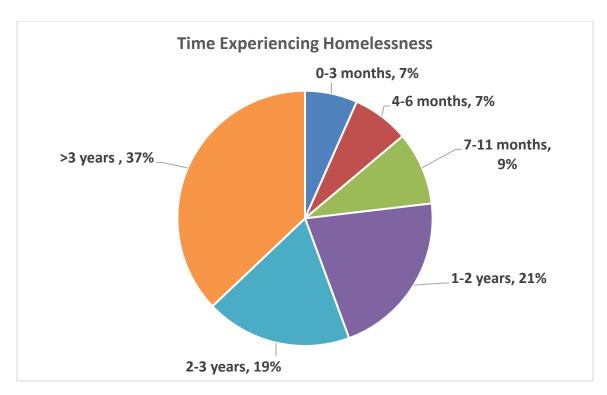


Figure 6

The age range of the total population experiencing homelessness and by sheltered or unsheltered status is shown in Figures 7a-c. In the total population, over eight of ten persons experiencing homelessness were over the age of 24. Approximately one out of eight were under the age of 18; however, all but seven of those under age 18 were in sheltered situations. The population living unsheltered was older with forty-nine out of fifty (98%) 25 years of age or older. The sheltered population experiencing homelessness was younger, due to the inclusion of children in that population. Of the 3,030 persons in safe haven, emergency shelter, or transitional housing, nearly one in five (18%) was below the age of 18 years and one out of 17 (6%) ages 18-24 years. Approximately one out of four (28%) of those under age 18 were in transitional housing.

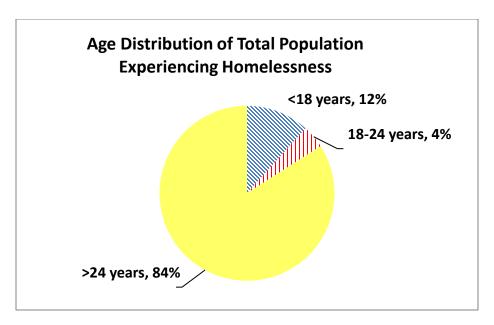


Figure 7a

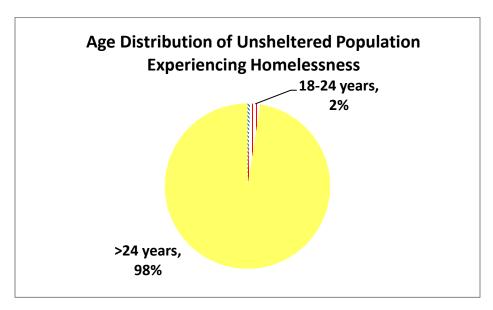


Figure 7b

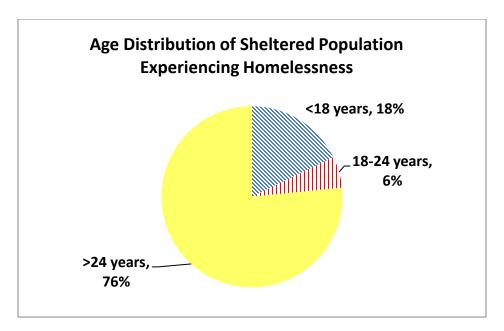


Figure 7c

# **Subpopulations**

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

- Veterans
- Individuals and families experiencing chronic homelessness<sup>3</sup>
- Individuals who are survivors of domestic violence
- Persons with HIV/AIDS
- Persons with serious mental illness

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

- Individuals experiencing chronic substance use disorder (alcohol and/or drugs)
- Unaccompanied young adults and parenting young adults

This information can be captured by HMIS for those in shelters. If data were missing, it was assumed to be negative. This may have the effect of artificially lowering percentages in a characteristic category as some of the persons with missing answers may truly have had that characteristic. For the unsheltered, these data are self-reported with not all persons answering all of the questions. Again, missing answers were assumed to be negative, potentially artificially lowering the percent of the characteristic.

Subpopulations for the total population experiencing homelessness as well as a breakdown by sheltered and unsheltered status are shown in Figure 8. Overall, nearly seven of ten persons in the total population experiencing homelessness were male with a slightly higher percentage in the unsheltered population (71%). Sixteen persons experiencing homelessness identified as transgender and twelve as gender non-conforming.

Persons who are experiencing chronic homelessness represent a particularly vulnerable population and are prioritized for permanent housing. We determined that 1009 persons over age 18 in Emergency Shelter, Safe Haven, or unsheltered met the HUD definition of chronic homelessness, nearly three out of ten of the eligible population (29%).<sup>4</sup> Chronic homelessness was higher in the unsheltered population (41% vs. 21%).

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

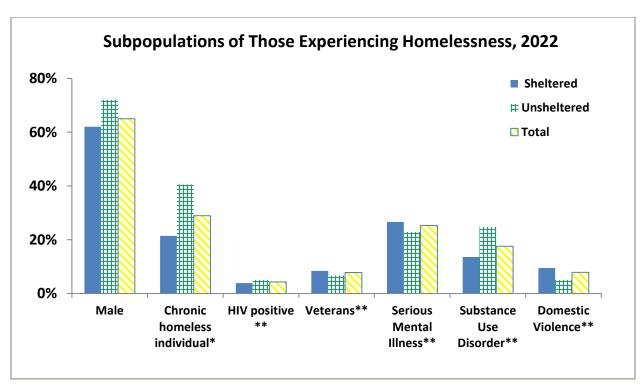


Figure 8

Another subpopulation of particular interest is veterans. This year we found approximately one in thirteen of persons experiencing homelessness were veterans (302 veterans; 7.8% of the adult population). Seven of ten veterans were in a sheltered condition. Of these 302 veterans, approximately one of four (26%) were classified as experiencing chronic homelessness and of these chronically homeless, over half (56%) were unsheltered (20%). The percent of chronic homelessness was almost three times as high among the unsheltered as among those who were in sheltered situations (48% vs. 17%).

Other subpopulations reported in the total adult population experiencing homelessness include one of four with self-reported serious mental illness (25%) and nearly one of five reporting substance use disorder (18%; alcohol and/or other drugs). Interestingly, the self-reported rate of serious mental illness was slightly higher among those in sheltered situations (27% vs. 23%)

<sup>\*</sup>sheltered individuals experiencing chronic homelessness are >18 year and in emergency shelter or safe haven

\*\*among adults only

while substance use disorder was much higher in the unsheltered population (25% vs. 14%). These conditions are self-reported, however, and may be artificially low as persons may not want to disclose their condition due to stigma.

One person experiencing homelessness in twenty-three (4%) self-reported they were HIV positive although the true percentage may be higher since many may not have been tested and therefore do not know their status or do know their status but do not want to share that information, again due to stigma. Overall, approximately one in twelve (8%) of those experiencing homelessness had experienced domestic violence.

Figures 9 and 10 graph the racial and ethnic self-classification of those experiencing homelessness in the Dallas Metropolitan area. Among the unsheltered population, the observer classified the racial/ethnic group of individuals who could not be interviewed. Within the total population experiencing homelessness, over half were Black/African American (54%) with two of five, white (38%). Five percent considered themselves multiple races and 1%, Asian. Those unsheltered were more likely to be white (52%) while those in shelters were more likely to identify as Black/African American (59%). Persons interviewed were asked if they considered themselves Hispanic and approximately one in five, with only a slight variation by location (21 of the sheltered population vs. 18% of the unsheltered population).

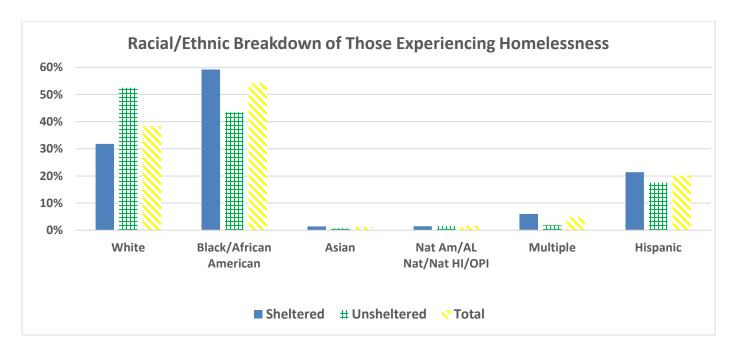


Figure 9

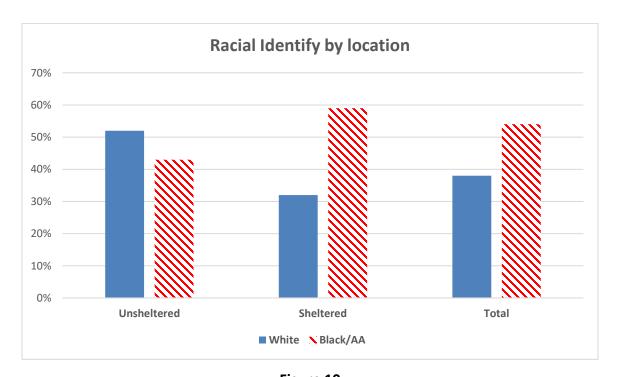


Figure 10

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

and parenting young adults. All parenting young adults were sheltered, with 32 children under the age of 18 years in these parenting young adult households. Of these 164 unaccompanied youth, 135 were in shelters and of those in emergency shelter (73), approximately one of 25 was classified as chronically homeless. There were 29 unsheltered unaccompanied youth and ten of them (one of three) was chronically homeless.

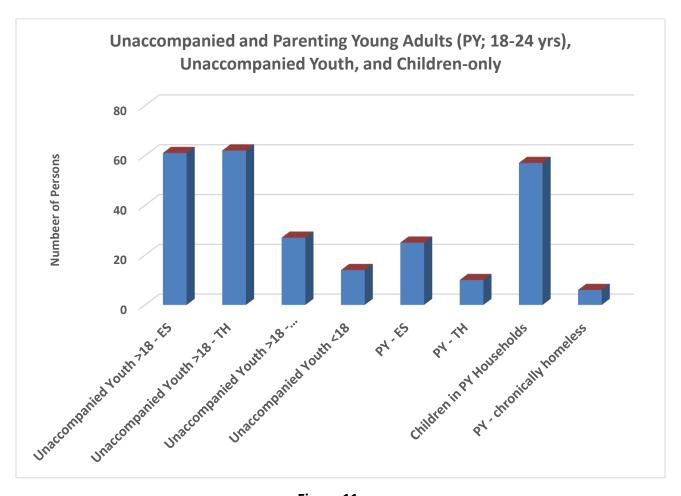


Figure 11

# Discussion

A total of 4,410 persons experiencing homelessness were counted in Dallas Metropolitan area (Dallas and Collin counties) on the night of 24 February 2022, a decrease of four percent from last year's Point in Time Count of 4.570 and the lowest total count in four years (Figure 12). This

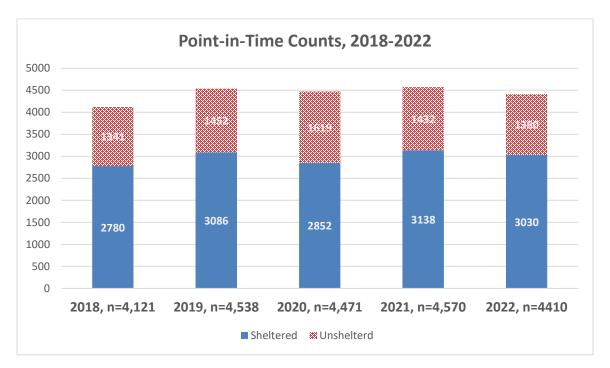


Figure 12

is despite the fact that warming centers were activated due to inclement weather, which are classified as emergency shelters. However, it is likely that those in the warming centers may not be classified as experiencing homeless should they not have sought relief. Winter Storm Uri, which occurred during the time of the 2021 Point-in-Time Count undoubtedly, increased the number of persons found in emergency shelters and while inclement weather also occurred during the 2022 Count, it was not as severe, and so it is possible that the 2022 Point-in-Time Count would have been lower except for the storm. The lingering effects of the pandemic on availability of beds in the emergency shelters because of the necessity of social distancing during the pandemic also may have affected the emergency shelter count. In addition, persons

experiencing homelessness may be reluctant to stay at a shelter due to fear of the virus.

Nevertheless, as shown in Figure 12, the numbers of those unhoused has decreased for the last four years.

Of those counted this year, 1,380 (31%) were unsheltered (staying in a place not meant for human habitation), most of whom were interviewed in Dallas County. However, it is important to note that the persons living unsheltered were classified where they were interviewed or spotted, which may not have been where they slept the night of the Count. Persons move around during the day and may congregate near services. Within the total CoC area, over half were in emergency shelters on the night of the count. Seven children were counted among the unsheltered population, two of whom were unaccompanied, in only children households. Nearly one out of four sheltered persons experiencing homelessness were under age 18.

We found that three out of four unsheltered persons reported being homeless for over one year (we could not collect this information on the sheltered population). These unhoused are likely to meet at least one of the definitions of chronic homelessness, and we found that chronic homelessness rates were high among the unsheltered (41%) and one out of 3 among the whole homeless population that could meet the HUD definition. While chronic homelessness increased dramatically from that determined by the 2021 Point-in-Time County, 2022 showed an increase overall all of the past four years (Figure 13).

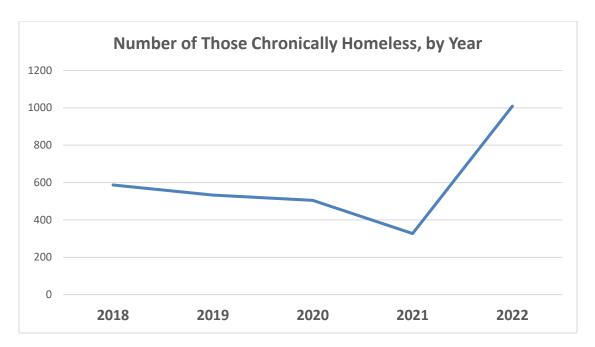


Figure 13

These persons should be high priority for housing first interventions.

Veterans are another population that are targeted for housing interventions. We found 302 self-identified veterans this year, a welcome decrease from last year's number counted of 370, and following a steady decrease in veteran homelessness since (Figure 14).

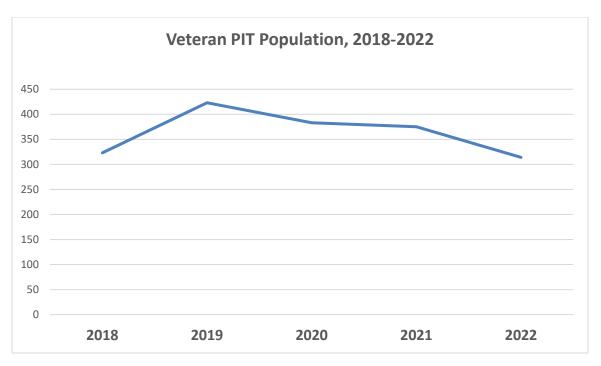


Figure 14

However, among the unsheltered veterans there was a high chronic homelessness rate (48%), and this is a population that needs to be targeted for housing first priorities. Not surprisingly, reported rates of serious mental illness (one of four) and substance use disorder (nearly one of five) were high among those unhoused. Persons who have experienced domestic violence represented one out of twelve of those enumerated in the Count, perhaps reflecting dedicated beds for this population.

As seen with many other social determinants of health, there were major racial disparities among those experiencing homelessness. While Blacks/African Americans represent not quite 24% of the composition of the total population of Dallas County<sup>5</sup>, they comprised over twice that percentage (54%) of those experiencing homelessness. This represents an issue that needs to be examined and addressed if homelessness is to be conquered in the area.

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

A total of 164 persons under age 25 were counted, a significant decrease from last year's count of 249. Fourteen were under age 18, two of whom were unsheltered. Forty-one children under age 18 years were found in 33 parenting youth households, one child with an under age 18 parent. All were in emergency shelter or transitional housing.

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