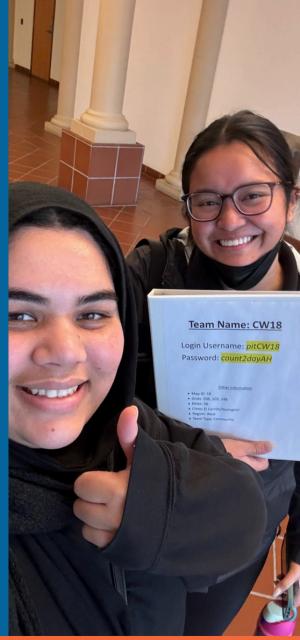
2023 ANNUAL REPORT

## CONTRA COSTA COUNTY CONTINUUM OF CARE

HEALTH HOUSING AND HOMELESS SERVICES













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## **EXECUTIVE SUMMARY**

This annual report provides a deep dive into the activities and outcomes of the Contra Costa Homeless Continuum of Care (CoC) during 2023. The CoC is made up of multiple service providers, guided by a Council appointed by the Board of Supervisors, and operated by an administrative lead. With a shared vision and clear objectives, the CoC continues to meet the needs of people in a housing crisis.

## **Numbers Served**

During 2023, the CoC served 9,632 households (14,002 individuals) reflecting a 28% increase from 2019.

- 2,132 households served in Prevention and Diversion, for households at-risk of homelessness or newly homeless and not yet engaged in CoC services
- 6,750 households served in Crisis Response programs, for households in sheltered and unsheltered sleep settings
- 1,316 households served in Permanent Housing programs, for households that had been homeless and subsequently placed into Permanent Housing that includes supportive services.

## **Outcomes**

Out of the 9,632 households served during 2023, 2,972 (31%) were able to retain, or exit to, Permanent Housing. Additional successful outcomes include:

- 86% (n = 1,835) of household enrollments in Prevention and Diversion programs exited to Permanent Housing
- 60% (n = 4,030) of household enrollments in Crisis
  Response programs exited to Temporary or Permanent
  Housing
- 10% (n = 641) of household enrollments in Crisis Response programs like street outreach entered Emergency Shelter
- 98% (n = 1,292) of household enrollments in Permanent Housing programs either retained their housing or exited to other Permanent Housing

Out of 1,292
households in
permanent
housing, 98%
were able to
retain or exit to
other
Permanent
Housing.





## CoC Budget

The CoC received over \$20 million in funding from the U.S. Department of Housing & Urban Development (HUD), a 22% increase over five years. Additional non-HUD funds, which account for 61% of the CoC budget, have increased by over \$2 million, or 10%, from fiscal year 2019–2020 to fiscal year 2022–2023.

## CoC Capacity Building

The CoC's lead administrator is Health, Housing and Homelessness Services division (H3) of Contra Costa Health. During 2023, H3 led a variety of activities that took place to build capacity within the CoC.

- Provided support to homeless service providers, including trainings, monthly meetings, development of an onboarding process for new providers and timely feedback on performance.
- Implemented specific processes or interventions to improve equity through the system of care.
- Expanded shelter and outreach capacity.
- Conducted a Community Needs Assessment focused on youth and young adults.
- HMIS data system improvements.

## CoC Successes

The CoC continued to build, strengthen and deepen partnerships and successfully house vulnerable individuals and families.

- More than 350 referrals through the Coordinated Entry System (CES) to house vulnerable individuals and families in stable long-term housing.
- Streamlined coordination with Contra Costa Health's Behavioral Health division to better serve individuals experiencing homelessness with severe mental health conditions, a population who often face higher rates of housing instability.
- In partnership with Housing Authority of Contra Costa County, successfully utilized 100% of Emergency Housing Vouchers, a pandemic era program, by housing 41 participants in 2023.
- Awarded \$1.4 million from the federal government to improve the Concord Shelter and Service Center.

## **Population Characteristics**

- Households with children: There were 1,878 households with children served in 2023, an 89% increase since 2019.
- Transition age youth (TAY), ages 18–24: TAY made up 7% of the CoC served and increased by 36% since 2019.
- Race/ethnicity: Black/African American/African households and people with multiple races were over-represented in the CoC relative to the county population (4x and 3x, respectively).
- Disabling conditions: 70% of households served in the CoC had a member with at least one disabling condition. Mental health condition was the most prevalent disability, accounting for 45% of households.
- Survivors of domestic violence: 83% of households accessing Crisis Response services had at least one household member who had experienced domestic violence.
- Sexual orientation: 3% of adults served in Crisis Response identified as LGBTQIA+ and 20% of the LGBTQIA+ population served in Crisis Response were between the ages of 18 and 24.
- Veterans: The CoC served 887 veterans in 2023 (8%) of all adults. Veteran households made up 34% of all households in Permanent Housing programs.

## EXITS TO PERMANENT HOUSING BY SUB-POPULATIONS (EXCLUDING THOSE STILL ACTIVE)

Population	From Prevention (n = 1,835)	From Crisis Response (n = 1,070)
General Population	95%	19%
Race/	Ethnicity	
Black/African American/ African (HH)	96%	22%
White (HH)	90%	17%
Multiple Races (HH)	96%	18%
Hispanic/Latinx (HH)	98%	7%
Native Hawaiian/ Other Pacific Islander (HH)	96%	17%
Asian American/Asian (HH)	94%	18%
American Indian/ Alaska Native/Indigenous (HH)	100%	10%
Other Sub	-Populations	
Veterans (Ind)	85%	36%
Households with Children (HH)	98%	39%
Survivors of Domestic Violence (Ind)	85%	23%
Households with Disabling Condition (HH)	89%	18%
Chronically Homeless (HH)	N/A	15%
LGBTQIA+ (Ind)	97%	26%

## Regional and City Data

The data suggests there is movement across the county. More people lost housing in East County (37% of households) than in Central or West, while fewer households slept in Central County (23% of households) the night prior to enrolling into programs. More people lost housing from Antioch than any other city (n=1,916), followed by Richmond (n=1,720) and Concord (n=1,284).

## Coroner's Data

An annual memorial has been hosted in Contra Costa since 2004 to acknowledge and honor people who pass away while experiencing homelessness. The coroner reported 113 people experiencing homelessness died during calendar year 2023.

## CONTRA COSTA HOMELESS CONTINUUM OF CARE (COC) OVERVIEW



The Continuum of Care (CoC) is designed to assist individuals and households experiencing a housing crisis by providing the housing and/or services needed to help households retain housing or move into transitional and permanent housing, with the goal of long-term stability. CoCs are partially funded by the U.S. Department of Housing and Urban Development (HUD) and have specific requirements. HUD rules state that the primary purpose of the CoC Program is to:

- Promote a community-wide commitment to the goal of ending homelessness.
- Provide funding for efforts by nonprofit providers, states, and local governments to re-house homeless individuals and families rapidly while minimizing the trauma and dislocation caused to homeless individuals, families, and communities as a consequence of homelessness.
- Promote access to, and effective use of, mainstream programs by individuals and families experiencing homelessness.
- Optimize self-sufficiency among individuals and families experiencing homelessness.

A Continuum of Care is comprised of multiple partners and service providers, with a single applicant to streamline the funding application process, encourage coordination of housing and service providers on a local level, and establish a more coordinated and strategic approach to address the complex needs of people experiencing homelessness.

Contra Costa County's CoC is designed to assist individuals and families who are at risk of homelessness, are currently experiencing homelessness, or were formerly homeless and in need of on-going support to sustain housing stability. The CoC relies upon community-wide planning and strategic use of resources to address homelessness and improve coordination with non-CoC resources and other local programs targeted for people experiencing homelessness.

All CoCs are required to have: 1) a CoC advisory board; 2) an administrative agency; 3) a Homeless Management Information System (HMIS) administrator; and 4) a Coordinated Entry administrator. In Contra Costa, Health, Housing, and Homeless Services division (H3) of Contra Costa Health is the entity that fulfills these CoC administrative roles. H3 is also a direct service provider.

## CoC Advisory Board

Appointed by the Contra Costa County Board of Supervisors, The Council on Homelessness (COH) is the governing board to the CoC in and serves as an advisory body to the Board of Supervisors. The COH is comprised of 19 seats designated by area of expertise or role within the CoC including affordable housing development, behavioral health, city government, educational and vocational services, faith community, funders, health care, public housing, public safety, reentry services, veteran services, workforce services as well as seats for community member, adults, and transition-age youth with lived experience of homelessness.

The COH and its committees guide the direction of the CoC and make decisions on policies and programs adopted and implemented in the CoC. The COH meets monthly for council meetings as well as various sub-committee meetings. All meetings are open to the public and the CoC encourages widespread participation, particularly of people with lived experience of homelessness.

## **Administrative Agency**

H3 provides administrative oversight, strategic guidance, fiscal management, and technical assistance to a network of communitybased agencies organized to respond to homelessness in the community. H3 applies for CoC funds and is the point of contact with HUD. During 2023, H3 conducted the following CoC administrative agency tasks:

- Applied for federal, state, and local funds and resources for CoC programming.
- Provided staffing and administrative support for COH meetings and sub-committee meetings, CoC Providers' meetings, and various community meetings.
- Identified funding for technical assistance on multiple initiatives, including:
  - Regional Action Plan
  - Plan for Accelerating Transformative Housing (PATH) Innovations Committee
  - Performance Based Contract Model plan, dashboards and technical assistance
- Planned, staffed, and implemented the 2024 Point-In-Time count and created an interactive Point-In-Time Count Story Map.
- · Created a comprehensive annual report and submitted required HUD reports including the HUD Systems Performance Measures report and the Housing Inventory Count.



## Homeless Management Information System (HMIS)

The Homeless Management Information System (HMIS) helps our CoC collect data, coordinate care, and manage operations. The HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs in Contra Costa County. H3 provides staffing and management to ensure HMIS is effectively meeting HUD requirements through the Research, Evaluation and Data (RED) team. The RED Team monitors for complete and accurate data entered by providers that are ultimately submitted to HUD in quarterly and annual reports. Additionally, the RED team provides HMIS training, data quality assessments, technical assistance, and ensures data security for all CoC-funded service providers.

Contra Costa
CoC uses the
evidencebased
Housing First
approach to
serve people
experiencing
homelessness

## Coordinated Entry System

Coordinated Entry is a centralized and coordinated process designed to streamline voluntary placement into permanent and stable housing through intake, assessment, and provision of referrals. The purpose of the county's Coordinated Entry System (CES) is to ensure that all people experiencing a housing crisis have fair and equal access to available resources and are quickly identified, assessed for, and connected to housing and homeless services based on their strengths and needs. CES facilitates the use of standardized tools and practices across the CoC, incorporates a system-wide Housing First approach, and, in an environment of scarce resources, coordinates housing support so that those with the most severe service needs are prioritized. Contra Costa's CoC has designated H3 as the provider and manager of the CES. H3 provides the staffing and administration to oversee CES.

## **Housing First**

"Housing First is an approach where homeless persons are provided immediate access to housing & then offered the supportive services that may be needed to foster long-term stability & prevent a return to homelessness. This approach removes unnecessary barriers & assumes that supportive services are more effective in addressing needs when the individual or family is housed—when the daily stress of being homeless is taken out of the equation."

—Ann Marie Oliva Director, Office of Special Needs Assistance Programs August 21, 2016.

In compliance with federal and state guidelines, Contra Costa CoC uses the evidence-based Housing First approach to serve people experiencing homelessness. Housing First establishes that a person experiencing homelessness must first be able to access a decent, safe place to live that does not limit length of stay (permanent housing) before stabilizing, improving health, reducing harmful behaviors, or increasing income. Under the Housing First approach, anyone experiencing homelessness should be connected to a permanent home as quickly as possible, and programs should remove barriers to accessing housing, such as requirements for sobriety or absence of criminal history. It is based on the "hierarchy of need": people must access necessities—like having a safe place to live and food to eat—before being able to achieve quality of life or pursue personal goals. Housing First does not mean "housing only." On the contrary, Housing First acknowledges social services and care coordination are necessary elements of housing stability and quality of life.

## COC AND COMMUNITY PARTNERSHIPS

Collaboration between CoC service providers, local jurisdictions, community members, and County agencies allows for a broader reach and wider array of services for those accessing the homeless system of care. Key partnerships are described below.

## **Encampment Abatements**

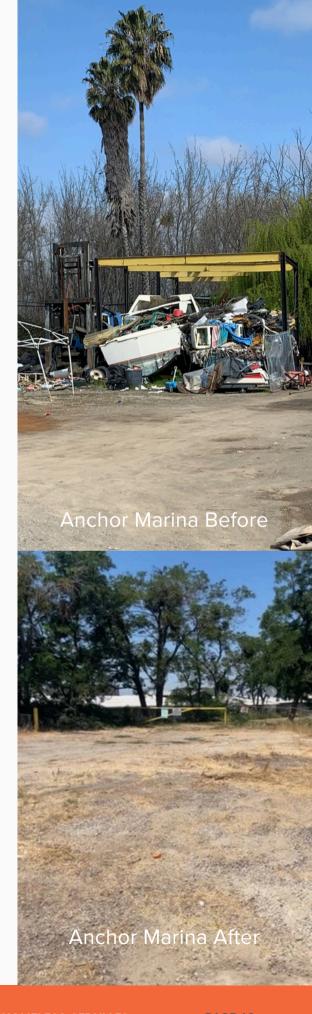
Bethel Island: In March 2023, the Department of Conservation and Development partnered with H3's Coordinated Outreach Referral and Engagement (CORE) team to connect with nearly 50 people living in RVs and on boats at the Anchor Marina in Bethel Island, which was being closed due to lack of water and sanitation services. Within three months, CORE connected with every resident and helped place 75% of the individuals into temporary or permanent housing (including emergency shelter treatment facilities, or permanent housing). A year later almost 90% of the residents (32 people) had retained their housing.

City of Richmond Encampment Resolution Funding Project: In 2022, the City of Richmond was awarded approximately a \$4.8 million Encampment Resolution Funding Round 1 (ERF-1) award to resolve the Castro/Camperland encampment using a Housing First approach. Through a multi-discipline, multi-sector collaboration that included outreach, case management, housing navigation, the encampment was resolved on June 30, 2023. Preliminary evaluation findings indicate that approximately 60% of the residents have been placed in permanent housing and a considerable portion regularly engaged in programming through the duration of the grant, including group and individual therapy and case management.

## Leveraging Mainstream Benefit Programs

H3 continued its partnership with Contra Costa Employment and Human Services Department (EHSD) through multiple state funded projects including:

- Home Safe: a prevention and housing stabilization program for older adults with an open Adult Protection Services (APS) case and who are either at-risk or experiencing homelessness.
- HousingWORKS!: an eviction prevention and rapid rehousing program for families receiving CalWORKS and are at-risk or experiencing homelessness.



- Housing, Disability, and Advocacy Program (HDAP): for individuals at-risk or currently experiencing homelessness who are eligible for General Assistance (GA) and pending Social Security Income (SSI).
- Bringing Families Home (BFH): Launched in 2023, this program provides rapid rehousing and prevention to families involved in the child welfare system at risk of or currently experiencing homelessness. Bringing Families Home provides case management, housing navigation, financial assistance, and referrals to services to increase self-determination and housing stability, as well as reduce placement in the foster care system.

## Increasing Access to Housing Vouchers

The Housing Authority of Contra Costa County (HACCC) continued to be a valuable partner, both in implementation of voucher opportunities and turnover of existing project-based permanent supportive housing units. Over 130 housing placements made through the Coordinated Entry System in 2023 (36% of all referrals to Permanent Housing via Coordinated Entry) were made through HACCC vouchers. HACCC also applied for two new sets of vouchers in 2023:

- Foster Youth for Independence (FYI): The Foster Youth for Independence (FYI) voucher program provides subsidies for current or former foster youth. HACCC collaborated with Employment and Human Services Department (EHSD) Children and Families Services (CFS) division, Health, Housing and Homeless Services (H3) and Hope Solutions, which provides housing navigation and case management services.
- Housing Stability Vouchers: HACCC and H3 were also jointly awarded 41 Housing Stability Vouchers which makes Housing Choice Vouchers (HCV) available to Public Housing Agencies (PHAs), in partnership with local Continuum's of Care and/or Victim Service Providers, for 1) households experiencing or at risk of homelessness; 2) those fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, human trafficking; or 3) veterans and families that include a veteran family member that meets one of the proceeding criteria. Referrals for the 41 Housing Stability Vouchers begin in early 2024.

## **Emergency Weather Response**

In January, our community experienced a series of heavy rainstorms that triggered the activation of the County-wide Incident Command System. H3 and community organizations worked quickly to expand the capacity for unsheltered people to come indoors, procured and distributed supplies and temporarily expanded outreach services to better connect with those who remained outdoors.

Similarly, during heat emergencies in July, the system of care worked to temporarily expand the capacity for unsheltered people to come indoors during the hottest times of the day, procured and distributed essential supplies like water and temporarily expanded outreach services to better connect with those who remained outdoors to supplies and other resources.



## California Advancing and Innovating Medi-Cal (CalAIM) Implementation

In 2023, H3 continued to partner with Contra Costa Health Plan (CCHP) to address social determinants of health and housing instability across Contra Costa by providing community support services, including respite recuperative care, post-hospitalization placements, housing transition navigation, and tenancy sustaining services, to Medi-Cal patients. In 2023, H3 hired 28 additional staff members for H3's Permanent Supportive Housing and Mobile Outreach teams through the California's Providing Access and Transforming Health (PATH) Capacity and Infrastructure Transition, Expansion, and Development (CITED) Initiative grant.

## **COC CAPACITY BUILDING**

The CoC, with the administrative support of H3, provides continuous improvement through trainings, tools, and collaboration opportunities to improve services and expand capacity across the CoC.

## **CoC Provider Meetings**

H3 continued to host monthly homeless service provider meetings, with 40 to 80 providers attending each meeting. The meetings include critical updates, presentations by guest speakers and an opportunity for service providers to share about important resources and programs. Presenters included:

- American Red Cross, Disaster Program
- Contra Costa Crisis Center
- Contra Costa EHSD CCWorks Program
- Contra Costa Health, Hazardous Materials Ombudsman
- Contra Costa Health: Healthcare for the Homeless
- The Contra Costa Sheriff's Office of Emergency Services
- Diablo Valley College Public Health Department, CHW Program
- Homebase Medi-Cal Renewal Team
- Impact Justice, Homecoming Project
- Opportunity Village/City of Antioch
- Rainbow Community Center

## CoC Provider Onboarding

As new providers joined the CoC, H3 standardized the onboarding process for new CoC-contracted providers including development of a CoC 101 training, creation of a required meeting and training checklist, and a list of key resources.

## CoC Program Models and Performance Based Contracting

H3 continued implementation of CoC-wide program models and performance standards through quarterly meetings where providers and H3 staff monitored performance and set goals for the upcoming quarter, and refined performance dashboards created by the Research, Evaluation and Data (RED) team.

## Equity

H3 and the CoC continued to identify new opportunities and implemented specific processes or interventions to improve equity.

## Race/Ethnicity

- Per HUD guidelines, as of October 1, 2023, HMIS intake forms were revised in the follow ways:
  - "Ethnicity" category was eliminated, "Hispanic/Latinx" was merged into the Race category, Middle Eastern was added as a Race option, and an additional "Other" option was created in the Race category. Per HUD guidance, to reconcile existing data with these new standards, participants who had previously noted their ethnicity as Hispanic/Latinx are now represented in the "Multiracial" category. These changes to the race/ethnicity categories will impact the ability to do trend analysis until enough data is collected under the new standards.
  - Gender options were added/renamed, with an additional option to specify their own identity; and Preferred Language was added as a question.
- The Council on Homelessness adopted a set of definitions for equity-related terms commonly used in the CoC to ensure consistent understanding.
- The newly formed Equity Committee of the Council on Homelessness focused on laying the groundwork to create accessible information, outreach, and educational materials about homeless services to engage hard-to-reach or previously unreached communities, particularly the Latinx community who disproportionately underutilizes the homeless system of care.
- Attended by over 150 CoC providers and partners, the CoC hosted training on Racial Equity and Homelessness.

## **Engaging People with Lived Experience**

- H3 created an internal policy to standardize compensation for people with lived experience engaging in H3 or CoC activities.
- H3 convened a group of People with Lived Experience (PWLE) to create a CoC-wide satisfaction survey to assess participant experiences in CoC-funded programs.
- The CoC hosted a community meeting attended by almost 50 people focused on how to better center People with Lived Experience in CoC work.

## **Funding Process**

- This year there were multiple opportunities for new agencies to learn about the CoC process and apply for funding.
- The COH Funding Committee builds the tools for the process to recommend agencies and projects to be funded by the HUD CoC funds, the largest amount of money coming into our system of care each year. The committee worked to revise the tools to highlight racial equity and engage people with a lived experience of homelessness in the process. In addition, the Review and Rank Panel making funding recommendations for HUD CoC funding was composed of a diverse range of COH members, including people with lived experience of homelessness.

[1]See CoC Budget section for more information about HUD CoC funding.



## **Shelter Capacity Expansion**

Emergency shelter, warming center and safe parking capacity expanded significantly in 2023.

- Contra Costa Health—Health, Housing and Homeless Services' Concord Warming Center increased capacity from 12 to 16 individuals; the Concord Shelter expanded from 61 to 66 beds; and the Brookside Shelter in Richmond expanded from 41 to 46 beds.
- Greater Richmond Interfaith Program (GRIP) opened a warming center with up to 20 beds for adults.
- Winter Nights Family Shelter opened a second Safe Parking program that offers a safe place to park in a supervised overnight parking lot for 25 individuals, families or couples living in a vehicle.
- Loaves & Fishes partnered with Delta Landing, the largest interim housing site in the CoC, to deliver 200 meals per day, Monday through Friday, to the residents of Delta Landing.

## **Outreach Expansion**

CORE Outreach dramatically increased capacity in 2023 including:

- Increased staffing: Added five teams, bringing the total number of teams to 19; doubled the number of dispatchers (from 2-4).
- Increased hours: Increased hours of operation from 5 to 7 days a week; and increased evening coverage, resulting in 2 all-county CORE teams operating from 4 p.m.- midnight, Monday-Friday; and expanded Martinez and Pleasant Hill team hours from part time to full time in each city.
- Increased Collaboration: Added 3 specialized CORE+ teams dedicated to medically fragile/high acuity unhoused individuals by focusing on recent hospital discharges, in-patient engagement, and street engagement in collaboration with Healthcare for the Homeless.
- Increased placements: In addition to placing clients in up to 20 Concord
  Warming center beds nightly, CORE began placing clients in beds allotted
  to CORE clients at the Greater Richmond Interfaith Program (GRIP)
  Warming Center in Richmond.

In addition, **SOS Richmond**, a non-profit focused on outreach and services for people experiencing unsheltered homelessness in West County, expanded their outreach services to include showers, laundry, work force services and trash removal at seven locations across Richmond and San Pablo.

## **Ending Youth Homelessness**

Contra Costa County was one of six Bay Area counties chosen to participate in Tipping Point Community's Youth Homelessness Project, a three-year initiative aimed at strengthening and sustaining systems that serve transitional-aged youth who are currently homeless or experiencing housing instability. As the anchor agency, H3 worked closely with local Community of Practice partners including Contra Costa Community College, First Place for Youth, Hope Solutions, Rainbow Community Center and the RYSE Center. This first year centered on conducting a community needs assessment to evaluate the strengths, needs, and challenges of youth and young adults (YYA) at risk of or experiencing homelessness in our county. Using the findings from the Community Needs Assessment, H3 and its partners will launch a strategic planning process, YYA engagement, and apply to HUD's Youth Homelessness Demonstration Program (YHDP) in 2024.



## **Data Improvements**

Data accuracy has increased from 89% to 93%, despite a 40% growth in the number of programs, and a 220% growth in the number of users over the past five years, The CoC has been able to expand the number of providers sharing data in HMIS while simultaneously improving quality of data collected and processes.

## Alignment with Federal, State, and Local Standards

- HMIS team worked to migrate data and redesign screens to support partner ability to conform to new state and federal requirements including the newly passed state Assembly Bill 977 and new federal requirements consolidating Race and Ethnicity into one question.
- HMIS Team played a critical role in supporting Contra Costa County's Regional Action Plan (RAP).

## Data Quality and Performance Monitoring

Significant enhancements to improve system functionality, data quality and streamline performance monitoring include:

- Data quality tools to improve error-checking and correction.
- On-screen warnings, user notifications, and routine use of Eva, a new HUD data quality tool.
- Routine office hours for providers to receive tailored support.
- Dashboards for performance monitoring of all CoC Program Models.
- New training platform with self-paced interactive videos, workflow guides, forms, certificates, tests, and other relevant resources. The platform bolsters the ability to monitor learner progress, ensure systemwide compliance, and foster shared responsibility.

Data accuracy has increased from 89% to 93%



## CoC SYSTEM SUCCESSES

## Behavioral Health Housing

The CoC's Coordinated Entry Team continued to collaborate with Contra Costa Health—Behavioral Health (CCH—BH) to prioritize and connect the most vulnerable individuals experiencing homelessness with severe mental health conditions to housing programs funded by the state through programs like No Place Like Home and Mental Health Services Act. These programs are designed to provide people with behavioral health needs with wraparound supportive services and permanent, affordable housing.



## Permanent Housing Referrals

In 2023, the Coordinated Entry System (CES) successfully referred over 350 households to Permanent Housing programs and projects including Permanent Supportive Housing, Rapid Rehousing, Voucher Opportunities, and other Supportive Housing. Referrals to permanent housing programs and projects are considered successful if participants are enrolled into the program and move into permanent housing. CES prioritizes households based on vulnerability and length of time homeless. Households placed in permanent housing could receive both time-limited and long-term financial support and case management, if needed, to obtain housing.

## **Emergency Housing Vouchers**

The Emergency Housing Voucher (EHV) program provided a significant opportunity for Public Housing Authorities (PHAs), Continuums of Care (CoCs), and Victim Service Providers (VSPs) to develop collaborative partnerships and strategies that effectively address the needs of vulnerable populations in their communities. Through EHV, HUD provided Housing Choice Vouchers to local PHAs to assist individuals and families who are 1) homeless, at-risk of homelessness, recently homeless or have a high risk of housing instability and 2) either fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking. The Contra Costa CoC was allotted 199 EHVs to distribute from September 2021 through September 2023. In 2022, the CoC was able to house 158 households utilizing EHVs and successfully distributed the remaining 41 in 2023. In addition to finalizing the distribution of the Emergency Housing Vouchers, the H3 Coordinated Entry Team continues to support providers and HACCC in ensuring participants who received the vouchers maintain their housing.

## Improved Interim Housing

H3 was awarded over \$1.4 million for the Concord Shelter and Service Center Roofing Project by the U.S Department of Housing and Urban Development (HUD for Fiscal Year 2024 Economic Development Initiative - Community Project Funding grant). The project will begin in late 2024 and will carry into 2025.



## **Future Initiatives and Goals**

- El Portal Place/HUMS Expansion: With support from California's Homekey program, local developers, and a one-time allocation through Measure X, the County purchased and converted a former office building to permanent supportive housing. With extra funding from HUD, H3's High Utilizers of Multiple Systems (HUMS) Permanent Supportive Housing program will expand to house 22 households at this new location, which is set to open late 2024.
- **Special NOFO:** A \$5.3 million, one-time 3-year grant to address unsheltered homelessness through the Department of Housing and Urban Development will fund housing for 28 unsheltered households through SHELTER, Inc's Thrive CCC project. The Housing Authority of Contra Costa County received a separate award of 41 new Housing Stability Vouchers to support this work.
- **Pretrial Participants:** Contra Costa County Probation Department received additional funding to provide housing navigation and case management services to participants awaiting trial with in 2024.
- **Homelessness Prevention:** Efforts to strengthen prevention services included funding new providers and securing funding to support implementing a Coordinated Prevention System model in 2024.
- Assessment Tool: In 2024, the CoC will launch a long-planned project to replace the current Coordinated Entry Housing Needs Assessment, the tool utilized in the Coordinated Entry System to prioritize housing resources. Efforts so far have been driven by in-depth engagement from a wide-range of homeless service providers and partners, people with lived experience, and other stakeholders in the community.
- Youth Homelessness Strategic Planning: In 2024, H3 and Youth with lived experience of homelessness will lead a process to develop a 6–12-month plan as part of the multi-year reimagining of how to prevent and end Youth and Young Adult homelessness in our community.
- Pet Assistance Support (PAS) Program: The California Department of Housing and Community Development Pet Assistance Support (PAS) Program awarded Delta Landing and Brookside Shelter funds for dog parks to be developed in 2024.

These new funding initiatives build on each other to meet CoC objectives through community supports, a robust infrastructure, and policy changes. Priorities include:

Expanded targeted
Prevention with
families, transition age
youth, and households
at risk of homelessness.

Expanded Interim Housing and housing focused case management to help households become document ready and reduce unsheltered homelessness.

Increased Permanent
Housing including
Permanent Supportive
Housing and access to
Housing Vouchers

## **COC BUDGET**

Budgets are prepared for each federal fiscal year (July 1 to June 30). During fiscal year 2023–2024, which overlaps with the calendar year for this annual report, HUD awarded the CoC \$19,300,140 and an additional \$1,789,609 through one-time special funding to support unsheltered homelessness. This amount represents a 22% increase over five years in HUD funding.

Additional non-HUD funds in the amount of \$21,689,934 obtained through grants and foundations provided supplemental and critical financial resources for CoC administration, planning, data management, housing, and other critical services. These non-HUD funds, which account for 51% of the CoC budget, have fluctuated by over \$13 million in the past five years, primarily due to one-time funding during the COVID-19 pandemic. During this past year, funding has stabilized and represents a 10% increase, from fiscal year 2019-2020 to fiscal year 2023–2024 (Table 1).



TABLE 1: FISCAL YEAR BUDGETS FOR 19-20 THROUGH 23-24

BUDGET	FY 19–20	FY 20-21	FY 21–22	FY 22–23	FY23-24	% CHANGE
CoC Award	\$15,857,604	\$15,239,701	\$16,296,852	\$17,318,215	\$19,300,140	+22%
Special NOFO Award*					\$1,789,609	N/A
Other government and local funding	\$19,676,057	\$25,158,000	\$28,967,000	\$33,015,872	\$21,689,934	+10%
Total Funds	\$34,862,042	\$41,454,852	\$45,815,402	\$50,334,087	\$42,779,683	+23%

Special NOFO funding is a 3 year award totaling \$5.3 million. This table reflects a third of this award.

The majority of the CoC funds are one-time, emergency funds that cannot be assured in future fiscal years.



FIGURE ONE: NUMBER OF HOUSEHOLDS AND INDIVIDUALS ACCESSING COC SERVICES, 2019–2023



## CoC PROGRAM UTILIZATION

During calendar year 2023, 9,632 unique households were served in CoC programs, with 14,002 people in those households. This represents a 28% increase in households served since 2019. During 2021, the number of households served decreased while services were limited and capacity to serve people at shelters was reduced to prevent over-crowding and the spread of COVID-19 and programs began to increase service in 2022 as COVID-19 response became more integrated in day-to-day operations. (Figure One).

The CoC has ten program models that fall under three categories based on the homeless status of those people utilizing those services:

- 1. Prevention and Diversion,
- 2. Crisis Response, and
- 3. Permanent Housing (Figure Two).

### FIGURE TWO: PROGRAM MODELS AND CATEGORIES

## **PREVENTION & DIVERSION**

For people and households who are at imminent risk of homelessness. Services include case management, conflict resolution, and financial assistance.

### **CRISIS RESPONSE**

For people and households currently experiencing literal homelessness. Services include outreach, emergency or interim shelter, basic needs, case management, referrals to financial and social benefits, housing navigation, and linkages to health and housing services.

### PERMANENT HOUSING

For people and households who were formerly experiencing homeless, many of which have disabilities and need wraparound services. Permanent housing programs include long-term housing supports, sometimes with case management.



Prevention and Diversion	Prevention*	Diversion				
Crisis Response	Emergency Shelter*	Rapid Exit	Transitional Housing*	Outreach*	Rapid Rehousing*	Support Services*
Permanent Housing	Permanent Supportive Housing*	Permanent Hou	ising without	Supports		

The program models with an asterisk (\*) are also "project types" defined by HUD.

The majority of households served in the CoC were served in Crisis Response programs designed for people experiencing homelessness in both unsheltered and emergency shelter settings (66% of household enrollments, n=6,747). Households in Prevention/Diversion and Permanent Housing made up 21% and 13% of enrollments (n=2,132 and n=1,322 respectively, Figure Three).

There was a 173% five-year increase in the number of households served in Prevention and Diversion, a 11% increase in Crisis Response, and a 43% increase in Permanent Housing (Figure Four).

FIGURE THREE: HOUSEHOLD ENROLLMENT ACROSS PROGRAM MODEL CATEGORIES, 2023

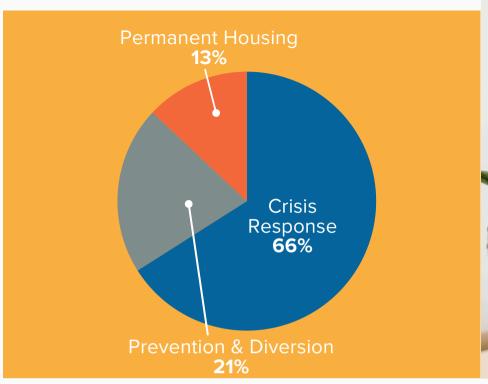




FIGURE FOUR: NUMBER OF HOUSEHOLDS SERVED, BY PROGRAM MODEL CATEGORY, 2019–2023

Prevention & Diversion					
781	957	736	1,169	2,132	
2019	2020	2021	2022	2023	

	(	Crisis Respons	е	
6,102	5,535	5,371	5,848	6,747
2019	2020	2021	2022	2023

Permanent Supportive Housing					
925	961	1005	1,166	1,322	
2019	2020	2021	2022	2023	

## POSITIVE OUTCOMES AND EXIT DESTINATIONS

ı	Permanent Housing	Temporary Settings	<b>Emergency Shelters</b>	Institutional Settings	Unsheltered Settings
•	Rental units (subsidized or not) Own home	<ul> <li>Transitional housing</li> <li>Living with family or friends on a temporary</li> </ul>	<ul> <li>Interim         housing         designated for         people         experiencing         homelessness</li> </ul>	<ul> <li>Hospitals, mental health facilities</li> <li>Rehabilition centers</li> </ul>	<ul> <li>Encampment</li> <li>Vehicles such as cars and RVs</li> <li>Uninhabitable</li> <li>buildings</li> </ul>
	Living with friends or family on permanent basis	<ul> <li>Hotel/motel not paid for by the CoC</li> </ul>	<ul> <li>Hotels/motels paid for by the CoC</li> </ul>	<ul> <li>Foster care</li> <li>Long-term care facilities</li> <li>Detention</li> </ul>	

There were 104 programs in the CoC, listed in Appendix A. These programs fall under the program models adopted by the CoC. Desired exit destination for each program model varies depending on the target population (at-risk, sheltered, or unsheltered) and expected outcomes:

There are two additional exit destination statuses:

- 1. Still active status occurs when a household has not yet exited a program. This is common for Permanent Housing programs where households remain housed and engaged in programming, and for interim housing programs where households remain unhoused and engaged in shelter or Rapid Rehousing. Households that do not engage with programming are automatically exited after 90 or 120 days, depending on the program model.
- 2. **Missing data** for exit destination occurs when households stop engaging with CoC programs without providing their next destination or sleep setting (this includes households that are auto exited). This is common for households in Crisis Response as many households may find housing on their own, may move out of the area, or may simply stop accessing CoC programs, yet continue to experience homelessness.

## Positive Outcomes from Prevention and Diversion

Prevention programs are designed for people close to losing their housing (some programs are specific to households that might lose their housing within the next two weeks). Diversion programs help households experiencing homelessness quickly exit CoC programs to permanent housing. The goal of Prevention and Diversion programs is to gain housing quickly with a Permanent Housing exit destination.

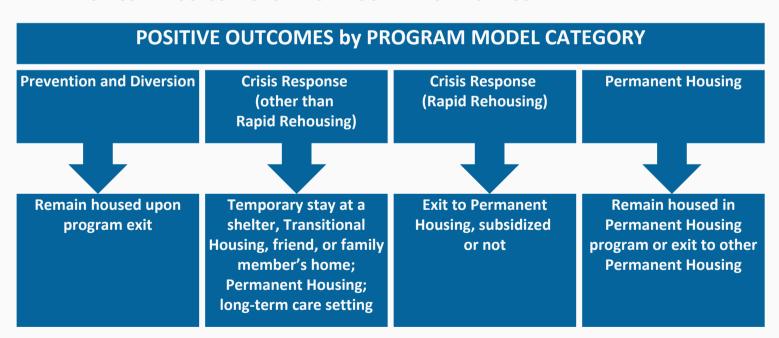
## Positive Outcomes from Crisis Response

Street Outreach and Support Services provide resources and referrals for people sleeping outside who need access to basic living necessities and referrals to housing support. Positive outcomes for Outreach and Support Services entails further engagement in the CoC at shelters and/or referrals to housing services. Missing exit destination from Outreach and Support Services is common for the many people who stop engaging with these programs without formally exiting CoC programs.

However, other program models in Crisis Response, such as Rapid Rehousing, and Rapid Exit, have a housing focus and help people experiencing homelessness achieve housing through case management and financial assistance. Data collection on exit destination is more complete for these types of programs, although some still exit the system without exit data.



TABLE TWO: POSITIVE OUTCOMES FOR EACH PROGRAM MODEL CATEGORY



## Positive Outcomes from Permanent Housing

A positive outcome for Permanent Housing is simply maintaining housing through a Permanent Housing program or exiting to other Permanent Housing destinations (these outcomes are summarized above in Table Two).

Exit destinations for households utilizing each of the program model categories are provided in Table Three. These outcomes should be judged based on the program model objectives, as described above, and should not be compared across program model categories.

TABLE THREE: EXIT DESTINATIONS FOR HOUSEHOLD ENROLLMENTS BY PROGRAM MODEL CATEGORIES, 2023

## PROGRAM MODEL CATEGORY

Prevention Diversion		Crisis Respo (other that Rapid Rehou	an	Crisis Response (Rapid Rehousing)		•		Permanent Ho	using
Permanent	86%	Permanent	16%	Permanent	38%	Permanent Housing	98%		
Housing	2%	Housing	44%	Housing	10%	Temporary Setting	1%		
Temporary	1%	Temporary	10%	Temporary	2%	Emergency Shelter	<1%		
Setting	1%	Setting	5%	Setting	3%	Institution	1%		
Emergency	1%	Emergency	9%	Emergency	13%	Unsheltered	<1%		
Shelter	10%	Shelter	31%	Shelter	35%	Still Active	n/a		
Institution	2%	Institution	21%	Institution	1%	Missing Data	1%		
Unsheltered		Unsheltered		Unsheltered					
Still Active		Still Active		Still Active					
Missing Data		Missing Data		Missing Data					

A description of each program model category is provided in the following section, along with the number of households served and demographic data during 2023. Race and gender data with less than 5% of responses has been suppressed to ensure confidentiality. The program models are listed in order of program model category (Prevention and Diversion, Crisis Response, and Permanent Housing). Crisis response has multiple program models. Data summaries are provided for those program models as well.

In addition to the housing exit destination for all enrollments, this section includes the proportion of households per program model that exited to Permanent Housing. This data run removes some of the duplication and provides a clearer understanding of housing rates for each program model.

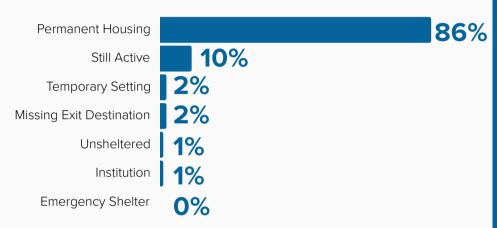
Outcomes for these program models have duplicated data because households may enter a program model multiple times during a reporting period.

## PREVENTION AND DIVERSION

Outcomes for Prevention and Diversion focus on maintaining Permanent Housing. Eighty-six percent of household enrollments in Prevention and Diversion exited to Permanent Housing, 2% exited to a Temporary Setting, and one percent or less exited to an institution, shelter, or unsheltered Settings. Ten percent were active at the time this report was generated. Two percent of households accessing Prevention/Diversion programs had missing exit data (Figure Five).

2,132
Households
Served in 2023.





86% of deduplicated households had a positive exit

## **Utilization and Demographics**

Prevention and Diversion programs provide short-term, one-time support for people at risk of homelessness or who have been homeless but recently accessed the system of care for the first time. Supports include conflict resolution between tenants and landlords or family members, financial assistance for utilities, rent, deposits, or fees related to housing, and case management.

DEMOGRAPHICS FOR THOSE SERVED IN PREVENTION AND DIVERSION IN 2023

GENDE	DER* AGE			HOUSEHOLD TYP					
Men	40%	<18 <b>41</b> %	18-24 <b>8</b> %	25–54 <b>41</b> %	55–64 <b>5</b> %	65+ <b>5</b> %	A	Adult-Only	53%
Women	60%	4170	RAC	370		Households with Children	47%		
Black/Africa	n Amer	ican					47	7%	
Hispanic/La	Hispanic/Latinx					6%			
Multi-Racial						23%			
White					13%				

<sup>\*</sup>Categories with less than 5% are not displayed throughout this report.

**CHRONIC HOMELESSNESS** 

There are no chronically homeless people in Prevention/Diversion programs.



## Prevention/Diversion Success Story

Jack (name changed to protect privacy), a Contra Costa native, became homeless in his 40's after his family died. When Healthcare for the Homeless first connected with Jack, he had been living in his car for seven years and was so ill he needed to be hospitalized. He was eventually discharged to the Phillip Dorn Respite Center and then to the Concord Shelter, where he was connected to the Housing and Disability Access Program (HDAP) program through Hope Solutions. The HDAP team worked hard to get Jack connected to consistent mental and physical health care, Social Security benefits and into housing. After two years of aftercare services, including financial support and case management, he was successfully exited from the program and living on his own.

Six months later, Jack reached back out to the HDAP team when he learned he had 60 days to leave his shared housing situation because the owner of the home he was living in died, and the family was selling the home. The HDAP team helped Jack apply for multiple affordable housing lists and also looked for other resources to prevent his return to unsheltered homelessness. Before the 60 days were up, Jack was notified that he had made it to the top of list for a project-based housing voucher in East Contra Costa County. However, because of his very low income, Jack could not afford move-in costs like security deposit, first month's rent, and moving services. Without these costs covered, Jack would be unable to take this housing opportunity and would likely return to homelessness.

His team was able to use HDAP Prevention funding to cover the security deposit and first month's rent and reached out to a few key community partners including local businesses that donated furniture and household essential items and moving service. With the support of the HDAP program, Jack's return to homelessness was prevented and he now lives in a safe, secure, affordable apartment of his own.



# With the support of the HDAP program

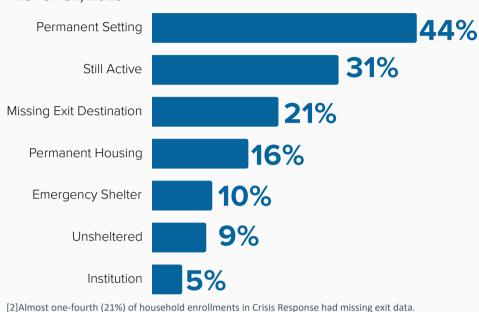
...he now lives in a safe, secure, affordable apartment of his own.

## **CRISIS RESPONSE**

Sixteen percent exited to Permanent Housing and another 44% to a Temporary Setting. Ten percent exited to Emergency Shelter, 9% to an Unsheltered Setting, and 5% to an Institutional Setting. [2] More than half of deduplicated enrollments (60%) exited to Temporary or Permanent Housing (Figure Six).

6,750
Households
Served in 2023.



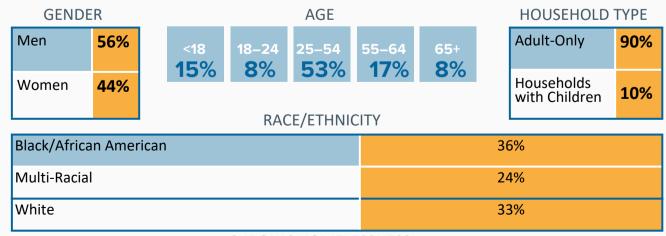


16% of deduplicated households exited to Permanent Housing

## **Utilization and Demographics**

Crisis Response includes all program models designed to serve people who are in Sheltered and Unsheltered Settings: Rapid Exit, Street Outreach, Support Services, Emergency Shelters, Transitional Housing, and Rapid Rehousing. Demographic and outcome data specific to each program model are provided in the next section. However, it is helpful to aggregate data across all program models within Crisis Response to describe households that are literally homeless.

### DEMOGRAPHICS FOR THOSE SERVED IN ALL CRISIS RESPONSE IN 2023



**CHRONIC HOMELESSNESS** 

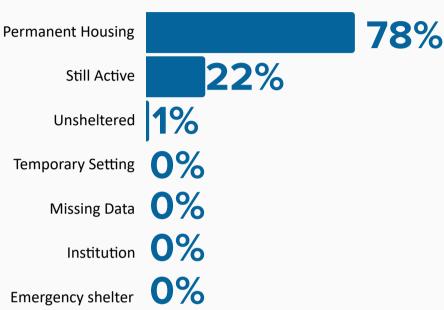
49% were Chronically Homeless.

## **CR-RAPID EXIT**

For the 185 households enrolled during 2023 in Rapid Exit, 78% exited to Permanent Housing and 1% to an Emergency Shelter. Twenty-two percent were still active at the time this report was analyzed (Figure Seven).

185
Households
Served in 2023.



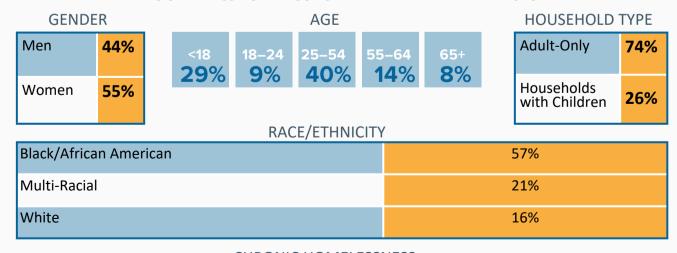


78% of deduplicated households exited to Permanent Housing

## Utilization and Demographics

Rapid Exit is a program model designed for households that are newly homeless but not yet active in the CoC to prevent entry into Crisis Response or to quickly resolve a household's homelessness once they enter a shelter, Transitional Housing situation, or an Unsheltered situation.

### DEMOGRAPHICS FOR THOSE SERVED IN RAPID EXIT IN 2023



**CHRONIC HOMELESSNESS** 

34% were Chronically Homeless.



## Rapid Exit Success Story

When Judith [name changed to protect privacy] called 211, she had been living in her car for 6 months. She had some income (\$1000/month) and wanted to move to Sacramento, as the housing was more affordable there, but couldn't come up with the deposit or first month's rent. When CORE mobile Outreach was dispatched to connect with Judith, the CORE worker quickly realized that Judith was a perfect candidate for Rapid Exit. The Rapid Exit program is for people experiencing literal homelessness enrolled in our CORE, CARE Center, or Shelter Programs who require only light touch case management, short-term stabilization services and have identified housing on their own but lack the financial means to make the transition into housing.

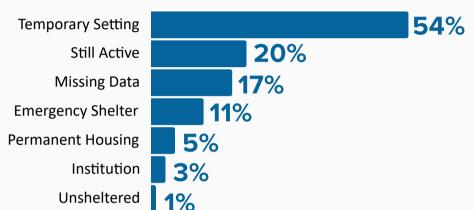
Judith found a unit within a day or two and was immediately enrolled into the Rapid Exit program. When the CORE Outreach worker called the landlord to work out the details of the deposit and first month's rent payment through the Rapid Exit program, the landlord said Judith could move in before the money even came through! Within two weeks of calling 211, Judith was housed in her own apartment. She reports that she's so happy to be housed and grateful for the support from our system of care that helped get her there.



## **CR-STREET OUTREACH**

The purpose of Street Outreach is to engage with people sleeping in Unsheltered Settings and refer them to supports that might lead to shelter, Temporary housing, or Permanent Housing. More than half (68%) had exits to Temporary Settings (54% to Temporary Settings, 11% to Emergency Shelter, and 3% to Institutional Settings). Twenty percent were still active in Outreach at the time this report was analyzed, and one percent exited back to unsheltered (Figure Eight). Less than one-fifth of household enrollments in Outreach (17%) simply stopped accessing programs in the CoC and did not provide exit data.

FIGURE EIGHT: EXIT DESTINATION FOR HOUSEHOLDS ACCESSING STREET OUTREACH, 2023



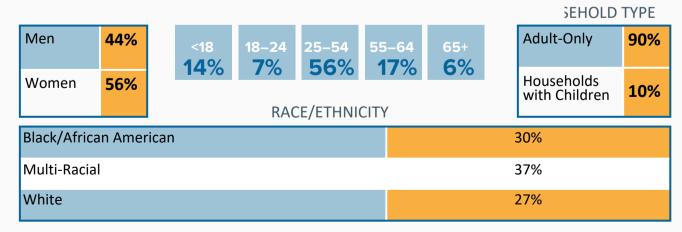
4,656
Households
Served in 2023.

5% of deduplicated households exited to Permanent Housing

## Utilization and Demographics

Street Outreach is provided in the community to link people experiencing unsheltered homelessness with basic needs (including but not limited to food, water, and hygiene kits) as well as referrals and connections to service providers within the CoC.

## DEMOGRAPHICS FOR THOSE SERVED IN STREET OUTREACH IN 2023



**CHRONIC HOMELESSNESS** 

56% were Chronically Homeless.



## Street Outreach Success Story

In 2019, the Martinez CORE Outreach team first met James [name changed to protect privacy], an elderly Contra Costa native with a long history of homelessness, at The Bay Church mobile shower program. When CORE offered support and services that day, James turned them down due to a lack of trust. Undaunted, the CORE team continued to work in the community, helping other people experiencing homelessness in Martinez. They felt confident James knew how to connect to CORE outreach if he changed his mind.

Almost four years later, James approached the CORE team at the mobile showers. Having seen CORE successfully help his friends, James was ready to place his trust in the team and ask for help. Two days later the team had James placed in a shelter and working on a long-term housing plan with the shelter Care Coordinator. Staff report that James is doing very well in the shelter and on his way to being housed. James recently reached out to CORE to offer thanks and gratitude for their work and to say, "CORE literally saved my life. Thank you!"



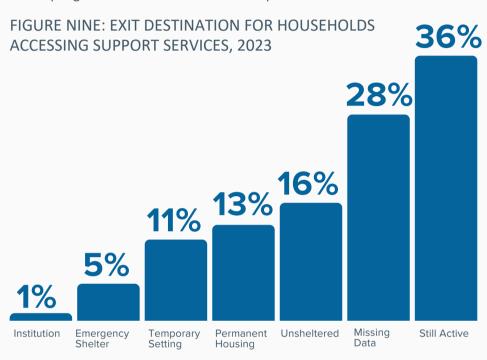
## The CORE Outreach team

met James at The Bay Church mobile shower program.

## **CR-SUPPORT SERVICES**

More than a quarter (28%) of household enrollments with Support Services during 2023 did not have exit data. About one-third (36%) were still active in Support Services when the data was analyzed. Twenty nine percent exited to Temporary or Permanent Settings (13% to permanent, 11% to Temporary, and 5% to Emergency Shelters, Figure Nine). Many people who access Support Services stop engaging with all programs in the CoC and do not provide exit data.



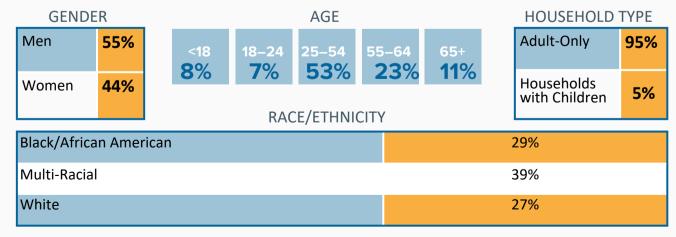


13% of deduplicated households exited to Permanent Housing

## Utilization and Demographics

Some Support Services program models provide basic needs such as meals, showers, hygiene kits, mail service, and referrals to other resources that might lead to shelter, Temporary housing, or Permanent Housing. Other Support Services focus on enrollment into benefits programs.

### DEMOGRAPHICS FOR THOSE SERVED IN SUPPORT SERVICES IN 2023



**CHRONIC HOMELESSNESS** 

35% were Chronically Homeless.



## Support Services Success Story

H3 CalAIM program staff first connected to Joe [name changed to protect privacy] in the fall of 2023 and quickly realized he needed more help than he was getting. An elderly man who had been chronically homeless since 2020, Joe was housed in mid-2023, but rent took nearly all of his social security check, he was living with a serious rodent and cockroach infestation and his health issues were getting worse. His CalAIM Care Coordinator, in partnership with an Enhanced Care Management case manager through Contra Costa Health, worked tirelessly to help bridge the gaps in his care, including finding him a mini-fridge to minimize the food theft he was experiencing from his roommates, leaving him sticky note reminders for his appointments, taking him grocery shopping, and helping him access a laundromat.

In November 2023, his case manager helped him get on a subsidized housing waitlist with Satellite Affordable Housing Associates (SAHA), knowing that he would likely be on the list for years before his name came up. In what could only be described as miraculous good luck, he was chosen for the lottery almost immediately, and placed at the top of the list.

His case manager used the CalAIM Deposit Fund to cover the move-in fees and he now lives in a safe, warm, and clean one-bedroom unit, paying less than 30% of his income as rent. He will continue to receive CalAIM Tenancy Support Services as well as connections to In Home Support Services (IHSS) and other necessary supports to help him continue to live independently in his new home. Joe says, "I am so happy to have a place to call my own!"



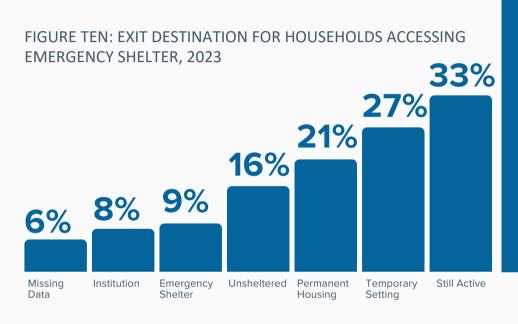
# H3 CalAIM program staff

helped Joe get on a subsidized housing waitlist with Satellite Affordable Housing Associates (SAHA).

## **CR-EMERGENCY SHELTER**

Emergency shelter aims to provide short-term and interim shelter until people find temporary or permanent housing resources. Almost half of household enrollments exited to a temporary or permanent settings (21% to Permanent Housing, 27% to Temporary). Another 9% exited to another shelter, 16% exited to unsheltered homelessness, and 8% to an institutional setting. Thirty three percent were still active at the time this report was run, and there was missing exit data for 6% (Figure Ten).

1,387
Households
Served in 2023.

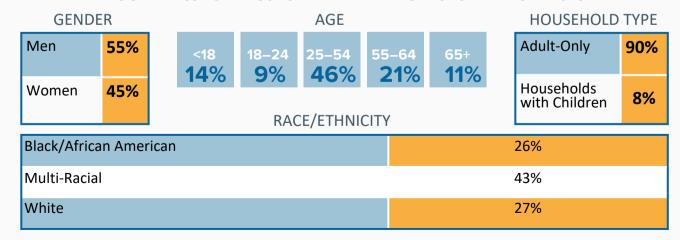


21% of deduplicated households exited to Permanent Housing

## **Utilization and Demographics**

Emergency shelters provide interim housing for people who do not have safe and healthy sleep settings. People experiencing homelessness generally come from uninhabitable locations (encampments, streets, or vehicles), are fleeing domestic violence, or have lost their temporary housing.

### DEMOGRAPHICS FOR THOSE SERVED IN EMERGENCY SHELTERS IN 2023



**CHRONIC HOMELESSNESS** 

46% were Chronically Homeless.



## **Emergency Shelter Success Story**

When Sharon [name changed to protect privacy] first arrived at the SHELTER, Inc. Mountain View family shelter, she was heavily pregnant and fleeing domestic violence. She had very low literacy due to dropping out of school in junior high, a substance-use disorder and no identification documents. Staff quickly helped her get connected to health supports including therapy, an outpatient program for substance use, and local 12 step meetings. They also worked to connect her to resources to support the entire family including CalWorks benefits, parenting classes and a driver's license. After completing a housing assessment, Sharon was placed in the housing queue for permanent supportive housing, due to her history of chronic homelessness and documented disability.

When the baby was born a few weeks later, Sharon was able to show that she was engaged with services, had support, and a safe place to live at the shelter. She was able to return to the family shelter with her newborn after giving birth. Staff supported her employment search, including helping fill out applications, coached her in advance of interviews and gave her advice on what to wear and where to get interview clothes. She secured a stable job and was focusing on her sobriety, mental health, and parenting skills when she learned that, after almost a year in shelter, she was going to move into a unit through a Permanent Supportive Housing program. Staff reports that, after overcoming many barriers, Sharon is still successfully housed, sober, working and just bought her first car.



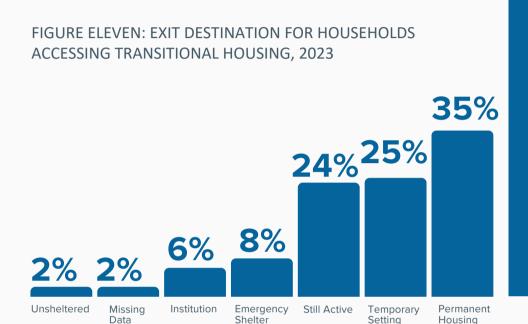
## SHELTER, Inc.

helped Sharon secure a stable job and focus on sobriety, mental health, and parenting skills.

## **CR-TRANSITIONAL HOUSING**

The primary goal of transitional housing is to move households from temporary housing to permanent housing. Thirty-five percent of household enrollments exited to permanent housing. Twenty-five percent of enrollments exited to temporary settings, 8% exited to an emergency shelter and 2% exited to unsheltered status. Twenty-four percent were still enrolled in transitional housing when the data was analyzed (Figure Eleven).

114
Households
Served in 2023.

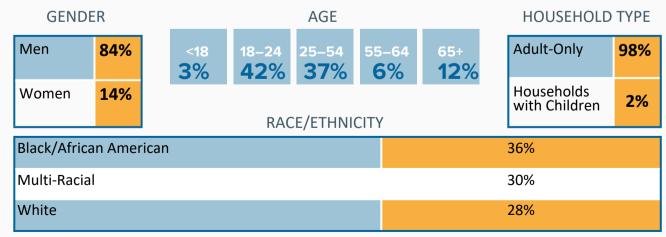


35% of deduplicated households exited to Permanent Housing

## **Utilization and Demographics**

Transitional housing provides short-term housing to get households off the streets and into more stable living environments until Permanent Housing can be established. These programs are generally focused on specific sub-populations such as Transition Age Youth (18 to 24) and veterans.

## DEMOGRAPHICS FOR THOSE SERVED IN TRANSITIONAL HOUSING IN 2023



**CHRONIC HOMELESSNESS** 

20% were Chronically Homeless.



#### Transitional Housing Success Story

When Jackie [name changed to protect privacy] first came into Calli House shelter (for transition-aged youth ages 18-24) in the winter of 2020, she had struggled with homelessness for years and she was living in her broken-down car. A long history of interpersonal violence contributed to depression, which then made it hard for her to hold a steady job, which, in turn, made it very hard to pay rent.

Jackie eventually graduated to a Transitional Housing program specially designed for transition-aged youth. Staff quickly noticed that she was still bouncing from job to job so case managers began meeting with her weekly to coach her on employment skills and connect her to the program therapist. With this extra support, she stabilized enough to get and keep a new job and started saving every month. With her new financial skills and income, she was soon able to purchase a car and secure an even better job with good benefits.

Her main goal was to have her own apartment that she could pay for independently. With a nest egg of \$12,000 socked away in the Youth Savings Program, a reliable car and stable employment, new skills and mental health support, that dream could now become a reality. When she found an apartment she could afford, staff offered to help source used household items, but Jackie turned them down because she now had the means to buy them herself! Staff reports that Jackie is loving her new apartment, has been employed for her longest stretch ever and has her sights on starting a family.



Jackie first came into

# Calli House Shelter

(for transition-aged youth ages 18-24) in the winter of 2020.

### **CR-RAPID REHOUSING**

Households enrolled in Rapid Rehousing generally work with case managers to address barriers to obtaining housing and help identify appropriate housing opportunities. Households stay enrolled in Rapid Rehousing even after a move-in date until they can sustain housing on their own without support. More than one-third (38%) of household enrollments in Rapid Rehousing exited to Permanent Housing and another 35% were still active (not yet in housing) when this report was generated. Thirteen percent exited to Unsheltered Settings, 2% to Emergency Shelters, and 3% to an Institutional Setting. There was missing exit destination for 1% of enrollments (Figure Twelve)

to Emergency Shelters, and 3% to an Institutional Setting. There was missing exit destination for 1% of enrollments (Figure Twelve).

FIGURE TWELVE: EXIT DESTINATION FOR HOUSEHOLDS ACCESSING RAPID REHOUSING, 2023

35%

10%

792
Households
Served in 2023.

38% of deduplicated households exited to Permanent Housing

#### Utilization and Demographics

2% 3%

Emergency Institution

1%

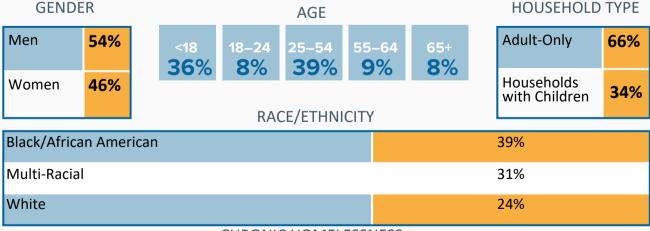
Missing

Data

Rapid rehousing integrates short-term financial assistance with services and case management to help those experiencing homelessness get quickly re-housed and stabilized.

Temporary Unsheltered Still Active

#### DEMOGRAPHICS FOR THOSE SERVED IN RAPID REHOUSING IN 2023



**CHRONIC HOMELESSNESS** 

21% were Chronically Homeless.



## Rapid Rehousing Success Story

Katrina [name changed to protect privacy], entered the Housing Works Rapid Rehousing program with unusual challenges. A single mother in her 30's, Katrina had grown up in an upper middle-class family rife with alcoholism and violence but also financial privilege. When she got connected to the Hope Solutions HousingWorks program through CalWorks, her new case managers realized that Katrina had never worked, lived on her own, paid bills or had a credit card or banking account.

Before she came into the program, Katrina's alcoholism led to her arrest, charges of assault, child endangerment, and intoxication. She ultimately lost custody of her son. Through evidence-based interventions like motivational interviewing and trauma-informed case management, the Case Manager, Employment Specialist, and Housing Navigator were able to get Katrina support with her substance use, legal issues, life skills, and employment. Shortly after entering the program, the team was able to find affordable housing and help Katrina become acclimated to living on her own.

In the year since Katrina entered the HousingWorks program, she has been able to work two jobs simultaneously, completed a "job-readiness" training program through Rubicon and maintained her housing. She has discovered new passions, including a meaningful spiritual path, met a partner that motivates her to remain sober and is working with a judicial team to regain custody of her son. As the support from the program tapered down over 15 months, Katrina was left with skills and resources she needed to support herself. She reports, "I am happy to be sober and enjoy my new 'adult' life!"



Since entering the Housing

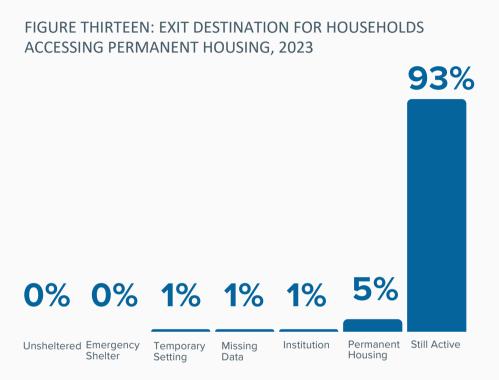
# Works Rapid Rehousing program Katrina was left with

Katrina was left with skills and resources she needed to support herself.

#### **CR-PERMANENT HOUSING**

Households in Permanent Housing programs generally stay in their housing until they can no longer live independently; 93% of households in permanent supportive housing were still enrolled at the time this report was generated. Another 5% exited to Permanent Housing (resulting in 98% remaining housed) and 1% to Temporary housing and 1% had missing exit destination data (Figure Thirteen).

1,316
Households
Served in 2023.

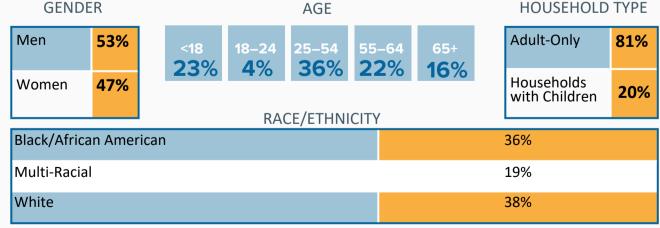


98% of deduplicated households remained in Permanent Housing

#### **Utilization and Demographics**

Permanent housing programs provide long-term financial support for housing for people who were previously homeless. Many include case management and wrap-around services. Most households stay housed in this program for many years.

#### DEMOGRAPHICS FOR THOSE SERVED IN PERMANENT HOUSING IN 2023



**CHRONIC HOMELESSNESS** 

49% were Chronically Homeless.



#### Permanent Housing Success Story

While grateful to be safely living at Delta Landing Interim Shelter after five long years of homelessness, Vincent and Kelly [names changed to protect privacy], still faced significant barriers to housing. Vincent was receiving SSI but Kelly did not qualify for a number of benefits and services, which limited their resources. With no familial support, and severe physical and mental health conditions, the couple felt hopeless about being able to get into housing.

The couple was prioritized for Permanent Supportive Housing through the Coordinated Entry system in the summer of 2022. After a few months of searching for housing, their housing navigator and case manager located a home for them. With collaboration between Bay Area Community Services Care Coordinator with Delta Landing, a case manager from SHELTER, Inc., and a Contra Costa Health Public Health Nurse, Vincent and Kelly were surrounded with the support they needed to move into a fully furnished home and connect to the resources they needed to help them stabilize, including mobility aids, linkages to discount programs for utilities, and referrals to Meals on Wheels and a local senior center.

The couple is now safely housed in their own unit and receiving the support they need. Vincent has been able to make new friends in his community, and Kelly has been working on her physical health.

"Without the support of programs like SHELTER, Inc., we would never have made it. We are so grateful and blessed to have a place to call home and support on obtaining the resources we need."—Vincent and Kelly



Without the support of programs like

# Shelter, Inc.

we would never have made it. We are so grateful and blessed to have a place to call home and support on obtaining the resources we need.

#### **DEMOGRAPHICS**

The CoC served 14,002 people in 9,632 households, all from different backgrounds, during 2023. This section of the report provides demographic data for individuals and households accessing the CoC during the report period.

#### Household Type

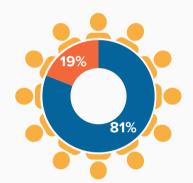
Household types in the CoC fall into three categories:

- 1. households with adults and children (under 18)
- 2. households with only adults (single or multiple adults)
- 3. unaccompanied minors (households with no adult head of household)

This section summarizes the three household types, their characteristics, their program utilization, and their outcomes.

Adult-only households made up 81% of the household enrollments in the CoC during 2023 and households with children made-up 19% (Figure Fourteen). There were 67 unaccompanied minors served at a youth program in the CoC, making up less than a tenth of a percent of all enrollments in the CoC. The number of unaccompanied minors is small and disaggregating in further analysis jeopardizes confidentiality and therefore is not included in further analyses in this report.

#### FIGURE FOURTEEN: PROPORTION OF ENROLLMENTS IN THE COC, BY HOUSEHOLD TYPE, 2023



Adult-only households experienced a 13% increase from 2019 to 2023, while households with children increased by 89% (Table Four). The increase in households with children can be largely attributed to an increase in programs serving this population. For more information, see details under "Leveraging Mainstream Benefit Programs" on page 10.

Adult-Only Households

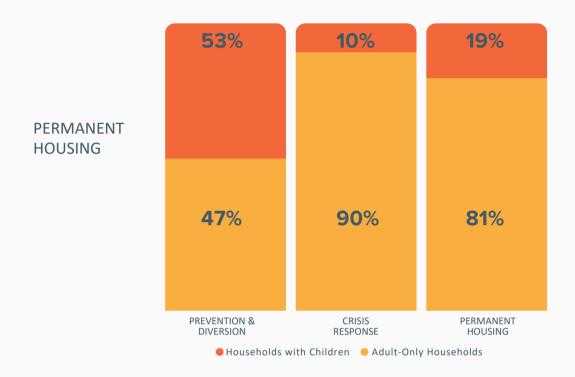
Households with Children

#### TABLE FOUR: NUMBER OF HOUSEHOLDS, BY HOUSEHOLD TYPE, SERVED IN THE COC, 2019–2023

YEAR	ADULT ONLY	ADULT WITH CHILDREN	TOTAL UNIQUE HOUSEHOLDS
2019	6,961	994	7,497
2020	6,391	1,031	7,153
2021	5,994	1,075	6,825
2022	6,651	1,314	7,723
2023	7,854	1,878	9,632
5-YR % CHANGE	13%	89%	28%

Adult-only households were the largest household type accessing all three program model categories; more than half of households served in Prevention and Diversion (53%, n=1,121), 90% among Crisis Response (n=6,089), and 81% among Permanent Housing (n=1,065, Figure Fifteen).

#### FIGURE FIFTEEN: PROGRAM MODEL CATEGORY, BY HOUSEHOLD TYPE, 2023



#### FIGURE SIXTEEN: PROGRAM MODEL CATEGORY UTILIZATION, BY HOUSEHOLD TYPE, 2023

	ADULT ONLY HOUSEHOLDS	HOUSEHOLDS WITH CHILDREN
Prevention/Diversion	13%	51%
Crisis Response	74%	36%
Permanent Housing	13%	13%

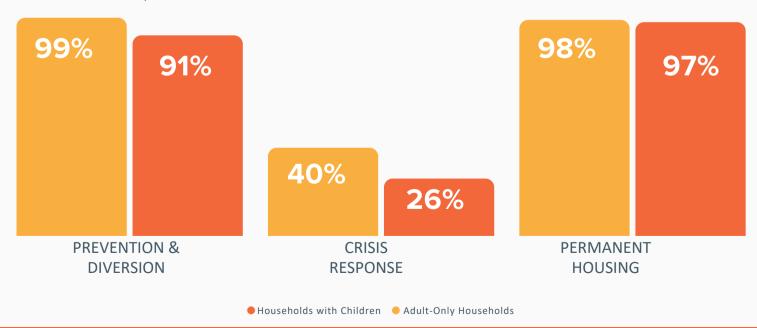
Program utilization varied considerably for households with children compared to adult-only households. A greater proportion of households with children accessed Prevention and Diversion (51% of households with children) than adult-only households (13% of adult-only households). A lower proportion of households with children (36%) accessed Crisis Response than adult-only households (74%). Rates for accessing permanent supportive housing were the same (13% of households with children and 13% of adult-only households, Figure Sixteen).



#### Exits to Permanent Housing by Household Type

Households with children had higher exit rates to Permanent Housing from all three program model categories than adult-only households during 2023. Among Prevention and Diversion, excluding still active households, households with children had a 99% exit rate to housing compared to 91% for adult-only households. Forty percent of households with children exited to Permanent Housing from Crisis Response compared to 26% of adult-only households, and 98% of households with children, compared to 97% of adult-only households, retained housing or exited to Permanent Housing from Permanent Housing programs (Figure Seventeen).

FIGURE SEVENTEEN: PERCENT OF EXITS TO PERMANENT HOUSING, OR RETAINED HOUSING, BY HOUSEHOLD TYPE, 2023



#### Age Groups

Adults ages 25 to 54 years old made-up almost half (48%) of all people accessing services in the CoC during 2023, followed by minors (ages 0 to 17, 24%). Older adults (55 to 64 years of age) made up 14%, seniors (ages 65 and older) made up 7%, and transition-age youth (TAY, 18 to 24) made up 7% (Figure Eighteen).

FIGURE EIGHTEEN: AGE DISTRIBUTION FOR ALL PEOPLE EXPERIENCING HOMELESSNESS SERVED BY THE COC, 2023



<18 **24**%

18-24 **7**% 25–54 **48**%

55–64 14% 65+ **7**%

## 5-YEAR PERCENT CHANGE

<18 **81**%

18-24 **36**%

25–54 **16**% 55-64 **13**% 65+ **71**%

Over the last four years, the CoC has experienced shifts in the number of people within most age groups. These changes reflect the CoC's prioritization to serve populations most at-risk of complications of COVID-19, with a focus on older adults and seniors and people with chronic health conditions. Programs serving households with children have also increased, resulting in more minors. There was an 81% increase among minors from 2019 to 2023, a 71% increase in the number of seniors 65+, a 36% increase among TAY, a 16% increase among 25 to 34 year-olds, and a 13% increase among 55 to 64 year-olds (Table Five).

Adults between the ages of 25 and 54 made up the largest age group accessing Crisis Response and Permanent Housing while minors under 18 made up the largest group accessing Prevention and Diversion (Table Six).

TABLE SIX: NUMBER OF EACH AGE GROUP SERVED IN PROGRAM MODEL CATEGORY, 2023

AGE GROUP	PREVENTION & DIVERSION	CRISIS RESPONSE	PERMANENT HOUSING
<18	1,914	1,258	443
18–24	351	642	74
25–54	1,892	4,426	680
55–64	251	1,455	413
65+	238	639	303

# FIGURE NINETEEN: PROGRAM UTILIZATION FOR EACH PROGRAM MODEL CATEGORY, BY AGE GROUP, 2023

AGE GROUP	PREVENTION & DIVERSION	CRISIS RESPONSE	PERMANENT HOUSING
<18	53%	35%	12%
18–24	33%	61%	6%
25–54	27%	63%	10%
55–64	12%	69%	19%
65+	20%	54%	26%

Emergency shelter, warming center and safe parking capacity expanded significantly in 2023.

- A higher proportion of minors accessed Prevention/Diversion than any other age group (53% of minors)
  due to the high utilization of the program by families with minor children and the lowest proportion
  was adults 55 to 64 year olds with 12% accessing Prevention/Diversion.
- Adults 55 to 64 year olds had the highest proportion who accessed Crisis Response (69%), followed closely by adults 25 to 54 year olds (63%) and TAY (61%). Minors had the lowest proportion access Crisis Response at 35%.
- Seniors 65 and older had the highest proportion who accessed Permanent Housing programs (26%), and TAY had the lowest (6%, Figure Nineteen).

#### Age Group Exits to Permanent Housing

Minors had the highest exit rates to, or retention in, Permanent Housing from Crisis Response than any other age group. Exits to Permanent Housing from Crisis Response ranged from 55% among minors to 24% among adults ages 25 to 54. Exits to Permanent Housing from Prevention/Diversion ranged from 92% for minors to 80% among older adults 65 and older. All household types had a housing retention rate in Permanent Housing of 97% or higher with the exception of minors; no minor clients exited to, or were retained in, Permanent Housing in 2023 (Figure Twenty).

18%
(n=1,411) of households in the CoC were Hispanic/Latinx.

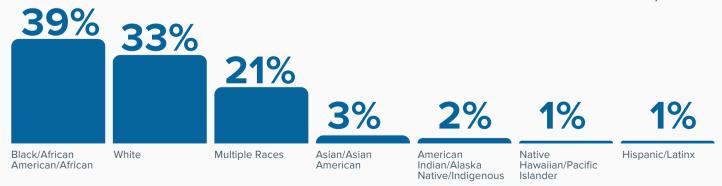
FIGURE TWENTY: PERCENT OF EXITS TO, OR RETENTION IN, PERMANENT HOUSING, BY PROGRAM MODEL CATEGORY AND AGE, 2023

AGE GROUP	PREVENTION & DIVERSION	CRISIS RESPONSE	PERMANENT HOUSING
<18	92%	55%	N/A
18–24	96%	25%	97%
25–54	97%	24%	98%
55–64	92%	32%	97%
65+	80%	40%	98%

#### Race and Ethnicity

Race and ethnicity data is generally analyzed for the head of household. Much of the data in this section is for the head of household unless otherwise stated. Race and ethnicity are separate data elements per HUD's previous definition[3]; people who are Hispanic/Latinx may self-report any race. Across all three program model categories (Prevention and Diversion, Crisis Response, and Permanent Housing), Black/African American/African households made up the largest race category (39%, n=3,925), followed closely by White households (33%, n=3,343), people with Multiple Races (21%, n=2,071), Asian/Asian American (3%, n=258), and 1% for each American Indian/Alaska Native/Indigenous and Native Hawaiian/Other Pacific Islander (n=118 and 132, respectively, Figure Twenty-one).

FIGURE TWENTY-ONE: RACIAL DISTRIBUTION OF HEADS OF HOUSEHOLDS ACROSS THE COC, 2023

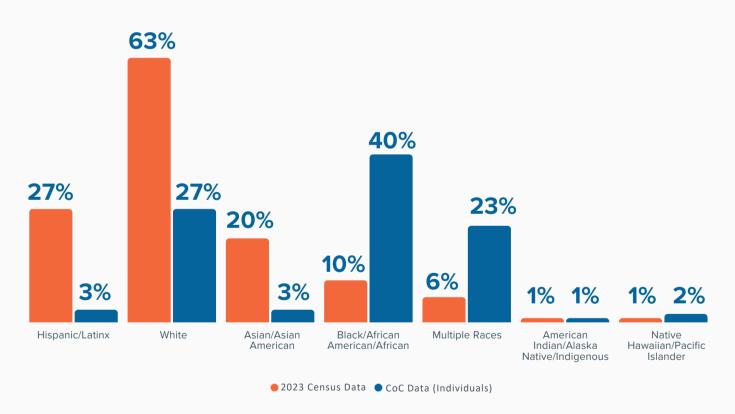


[3]See p. 13 for more details on impact of HUD changes to Race/Ethnicity categories that may impact Hispanic/Latinx and Multiple Race categories.

Compared to the racial composition of all Contra Costa residents (2023 U.S. Census estimates), White, Asian American/Asian, and Hispanic/Latinx were underrepresented in the CoC, while Black/African American/African and people with Multiple Races were over-represented. American Indian/Alaska Native/Indigenous and Native Hawaiian/Pacific Islander households were relatively equal. Census data are available for individuals and not head of households, thus the proportions in the following graphic are for individuals and does not match the head of household proportions above.

White individuals represented 63% of the county population, and only 27% of the CoC, and Asian American/Asian made up 20% of the county population and 3% of the CoC. Conversely, Black/African American/African people represented 40% of the CoC had only 10% of the county population (four times higher), and people with Multiple Races were 23% of the CoC and only 6% of the county (almost four times higher, Figure Twenty-two).

# FIGURE TWENTY-TWO: RACE DISTRIBUTION IN THE COC\* COMPARED TO 2023 COUNTY CENSUS DATA ESTIMATES

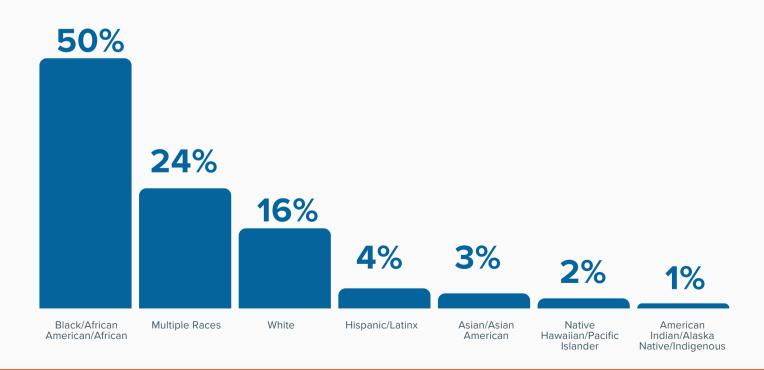


<sup>\*</sup>County census data is available at: https://www.census.gov/quickfacts/contracostacountycalifornia. Race distribution for Figures Twenty-One and Twenty-Two are different because census data is run at the individual level, not household, therefore, the CoC data was run at individual level for Figure Twenty-Two



Household type varied across races and ethnicities. American Indian/Alaska Native/Indigenous had the lowest rate of households with children (1% of households), followed by Native Hawaiian/Pacific Islander (2%) then Asian/Asian American (3%). Households with a head-of-household that was Black/African American/African had the highest proportion of households with children (50%, Figure Twenty-Three).

# FIGURE TWENTY-THREE: PROPORTION OF HOUSEHOLDS WITH CHILDREN IN THE COC, BY RACE AND ETHNICITY, 2023



# TABLE SEVEN: PROPORTION OF HOUSEHOLDS SERVED IN EACH PROGRAM MODEL CATEGORY, BY HEAD OF HOUSEHOLD'S RACE/ETHNICITY, 2023

RACE/ ETHNICITY	PREVENTION & DIVERSION	CRISIS RESPONSE	PERMANENT HOUSING
Across CoC, Regardless of Race/Ethnicity (n=9,632)	21%	66%	11%
American Indian/Alaska Native/Indigenous (n=118)	8%	81%	11%
Asian American/Asian (n=258)	32%	54%	14%
Black/African American/African (n=3,925)	27%	61%	13%
Hispanic/Latinx (n=237)[5]	46%	56%	4%
Multiple Races (n=2,071)	21%	70%	9%
Native Hawaiian/ Pacific Islander (n=132)	23%	64%	13%
White (n=3,343)	11%	73%	16%

The proportion of households accessing the three program model categories also varied by race and ethnicity distribution.

#### **Prevention and Diversion**

Hispanic/Latinx households were more likely to use Prevention and Diversion (46% of Hispanic/Latinx households), followed by Asian American/Asian (32%). American Indian/Alaska Native/Indigenous were least likely to access Prevention and Diversion (8% of households).[4]

#### **Crisis Response**

The proportion of American Indian/Alaska Native/Indigenous households who accessed Crisis Response (81%) was higher than all other races/ethnicities, followed by White (73%). Asian American/Asian households were least likely (54%).

#### **Permanent Housing**

White individuals were most likely to access Permanent Housing(16%), followed by Asian American/Asian (14%). Hispanic/Latinx households were least likely to utilize Permanent Housing programs (4%, Table Seven).

[4] This is likely an overcount due to changes in HUD data standards described on p. 13

#### **Permanent Housing Outcomes**

Permanent housing exit destinations from Prevention, Crisis Response, and Permanent Housing varied slightly across race and ethnicity. The number of households for each race with exits to Permanent Housing are provided in Table Eight.

#### **Prevention and Diversion Outcomes**

Head of households who identified as Hispanic/Latinx had the highest rates of exits to Permanent Housing from Prevention and Diversion (97%) than other race/ethnicity. American Indian/Alaska Native/Indigenous and Native Hawaiian/Other Pacific Islander had the lowest exit rate to housing from Prevention and Diversion (89% respectively).

#### **Crisis Response Outcomes**

Hispanic/Latinx households had the highest rates of exits from Crisis Response to Permanent Housing (34%) followed by Asian American/Asian households (30%). Native Hawaiian/Other Pacific Islander had the lowest (23%).

#### **Permanent Housing Outcomes**

American Indian/Alaska Native/Indigenous, Native Hawaiian/Other Pacific Islander, and Hispanic/Latinx households had the highest housing retention in Permanent Housing programs (100% respectively). White and Asian American/Asian households had the lowest rate of sustaining Permanent Housing (97%, Table Eight).

TABLE EIGHT: NUMBER AND PROPORTION OF HOUSEHOLDS WITH EXITS TO, OR RETENTION IN, PERMANENT HOUSING FROM EACH PROGRAM MODEL CATEGORY, BY RACE/ETHNICITY, 2023

RACE/ ETHNICITY	PREVENTION & DIVERSION		CRISIS RESPONSE		PERMANENT HOUSING	
American Indian/Alaska Native/Indigenous	8	89%	26	27%	13	100%
Asian American/Asian	77	93%	42	30%	34	97%
Black/African American/African	1,000	96%	649	27%	475	98%
Hispanic/Latinx [5]	107	97%	40	34%	9	100%
Multiple Races	407	95%	374	26%	182	98%
Native Hawaiian/ Pacific Islander	30	89%	19	23%	17	100%
White	315	97%	663	27%	510	97%

[5] This is likely an overcount due to changes in HUD data standards described on p. 13

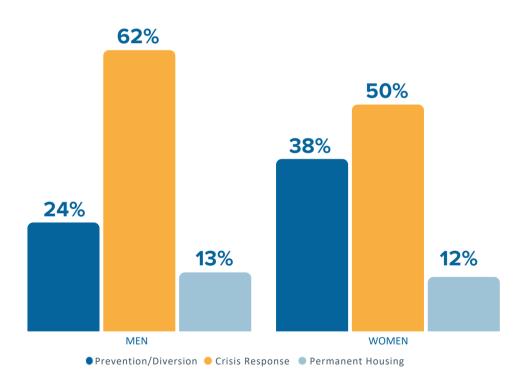
#### Gender

The CoC served slightly more men (50%) than women (49%), and less than 1% of people accessing services identified as transgender or gender non-conforming. Given the small number of people in the CoC who identified as transgender or gender non-conforming, their data was suppressed from this report and not disaggregated at the program model category to protect the confidentiality of those individuals.

Women were more likely than men to access Prevention and Diversion programs (38% of women served in the CoC compared to 24% of men served); men were more likely to access Crisis Response (62% versus 50%). Both genders accessed Permanent Housing at similar rates (12% of women and 13% of men, Figure Twenty-Four).

Women were more likely to be in households with children; 28% of women compared to 6% of men (Figure Twenty-Five).

#### FIGURE TWENTY-FOUR: PROGRAM MODEL CATEGORY, BY GENDER, 2023





#### **Permanent Housing Outcomes**

Women had better Permanent Housing rates compared to men for all program model categories. For Prevention and Diversion, 97% of women versus 89% of men exited to Permanent Housing. 30% of women in Crisis Response exited to Permanent Housing, compared to 25% of men. Nearly all women (99%) in Permanent Housing program retained housing compared to 97% of men (Figure Twenty-Six).

#### FIGURE TWENTY-FIVE: HOUSEHOLD TYPE, BY GENDER, 2023

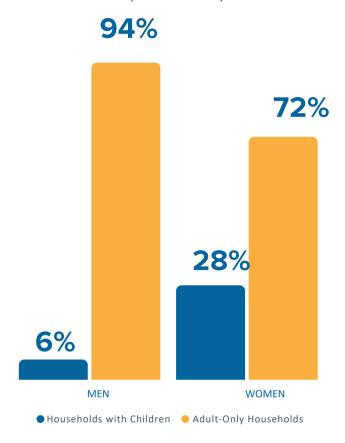
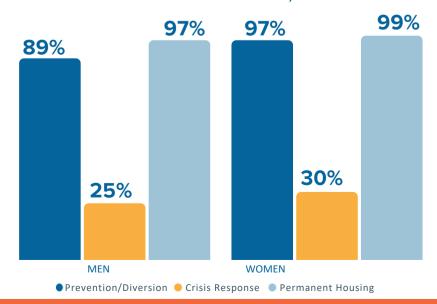


FIGURE TWENTY-SIX: PROPORTION OF HOUSEHOLDS WITH EXITS TO, OR RETENTION IN, PERMANENT HOUSING, BY PROGRAM MODEL CATEGORY AND GENDER, 2023



#### **Disabling Conditions**

Seventy percent of households across all CoC programs reported having a disabling condition. The HUD definition of a disabling condition is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug use, post-traumatic stress disorder (PTSD), or brain injury that is expected to be long-term and impacts the individual's ability to live independently, a developmental disability, or HIV/AIDS. Over three-quarters (81%) of households served in Crisis Response reported having a disabling condition, 69% of households in Permanent Housing programs, and 38% in Prevention and Diversion (Figure Twenty-seven).

Mental health was the most common disabling condition among households served in the CoC with 45% of households served having a member with a mental health condition. Over one-third of households had a chronic health condition (36%) and/or a physical disability (35%). Thirty-one percent reported a substance use disorder and another 16% reported a developmental disability (Figure Twenty-Eight).

FIGURE TWENTY-SEVEN: PROPORTION OF HOUSEHOLDS WITH AT LEAST ONE DISABLING CONDITION, BY PROGRAM MODEL CATEGORY, 2023

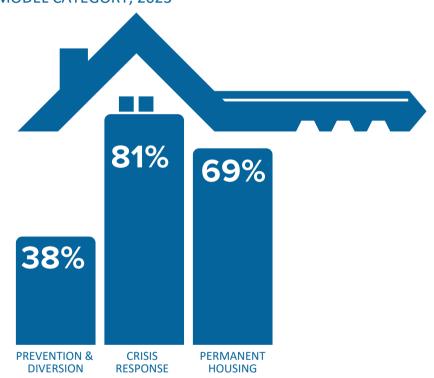


FIGURE TWENTY-EIGHT: PROPORTION OF HOUSEHOLDS WITH DISABLING CONDITIONS, 2023					
Chronic health condition	36%				
Development disability	16%				
Mental health	45%				
Physical disability	35%				
Substance use disorder	31%				

#### **Permanent Housing Outcomes**

Households for people without a disabling condition had slightly better housing rates than households with people with a disabling condition.

- From Prevention, 98% of households without a disabling condition exited to Permanent Housing compared to 90% of households with disabling conditions.
- From Crisis Response, 27% percent for those without disabling conditions exited to Permanent Housing compared to 28% of those with a disabling condition.
- From Permanent Housing, 97% of households without a disabling condition exited to Permanent Housing compared to 98% of households with a disabling condition (Figure Twenty-Nine).

FIGURE TWENTY-NINE: PROPORTION OF HOUSEHOLDS WITH EXITS TO, OR RETENTION IN, PERMANENT HOUSING, 2023

Prevention & Diversion	Crisis Response	Permanent Housing	
WITH	I DISABLING CONDI	TION	
90%	28%	98%	
WITHO	UT DISABLING CON	DITION	
98%	27%	97%	

#### Chronic Homelessness

An individual is defined by HUD as Chronically Homeless if they have a disabling condition and have lived in a shelter or place not meant for human habitation for 12 continuous months or for 4 separate occasions in the last three years (must total at least 12 months). These individuals are a subset of those with a disabling condition and were served in Crisis Response or Permanent Housing; Prevention programs do not serve Chronically Homeless individuals.

Nearly half of all households served in Crisis Response during 2023 were Chronically Homeless (49%, n=3,323).

From Crisis Response, the proportion of exits to Permanent Housing for Chronically Homeless (15%) is lower than the proportion for households who are not Chronically Homelessness (21%).

#### Survivors of Domestic Violence

History of domestic violence data is collected during program enrollment into Crisis Response programs and less consistently for people enrolling in Prevention and Diversion or Permanent Housing programs. This section includes data only on people accessing Crisis Response services.

Over two-thirds of adults (83%) who accessed Crisis Response programs reported experiencing domestic violence at some time in their lives; for women, 32% had experienced domestic violence. Over one-third of those people (39%) were fleeing domestic violence at the time they enrolled into the program.

The majority of survivors of domestic violence were women (80%); less than 1% identified as transgender or gender non-conforming. Twenty-three percent of people in Crisis Response who were survivors of domestic violence exited to Permanent Housing.

#### Sexual Orientation

Three percent of adults served in Crisis Response, identified as lesbian, gay, bisexual, transgender, or questioning/queer (LGBTQIA+). There is a large amount of missing data on sexual orientation among Prevention/Diversion and permanent and this report does not include those outcomes. Twenty percent of people who were LGBTQIA+ were between the ages of 18 and 24. Twenty-six percent of adults in Crisis Response who were LGBTQIA+ exited to Permanent Housing.



# Mom of Two Rebuilding Her Life After Overcoming Violence

Anna [name changed to protect privacy], a mom of two young boys, fled from southern California to her hometown in Contra Costa to escape an abusive relationship with her children's father. Shortly after arriving in Contra Costa, she realized her new living situation was unsafe and she was still in danger from her ex. Anna connected with Coordinated Entry and, after being quickly assessed, was referred to the New Pathway Domestic Violence Rapid Rehousing Program with SHELTER, Inc. Program staff helped Anna locate housing, get moved in, and helped with rental assistance while also helping her pursue employment to get stabilized. Coordinated Entry staff connected Anna with the educational-related resources she and her family were entitled to under the McKinney Vento Act, including help enrolling her children in school and accessing special education services within the school district.

Anna now dedicates much of her time to giving back to others who may be in a similar situation by advocating and sharing information about how to find help. Her message to others is: "There is help. People you don't know will help you because they care. There are good people in the world. The law can be upheld if you take the proper course of action. Your chosen family WILL help you. You are worthy and deserve so much."

To connect with Domestic Violence resources in Contra Costa, call STAND! For Families Free of Violence at <u>1-888-215-5555</u> or go to <u>Help for Myself</u> | <u>STAND! For Families Free of Violence</u> (standffov.org)



Through
New Pathway
Domestic Violence
Rapid Rehousing
Program and

# Shelter, Inc.

Anna now dedicates much of her time to giving back to others who may be in a similar situation.



#### **Veterans**

FIGURE THIRTY: PERCENT OF PEOPLE ACCESSING EACH PROGRAM MODEL CATEGORY WHO ARE VETERANS, 2023

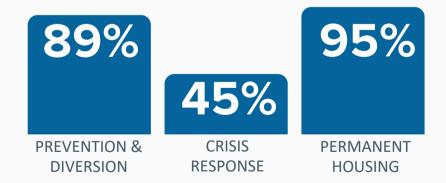


The CoC served 887 veterans during 2023 (8% of the population served). There were more veterans in Permanent Housing than in Crisis Response or Prevention and Diversion programs during 2023 (495 in Permanent Housing programs, 420 in Crisis Response, and 135 in Prevention/Diversion). Veterans made up 5% of adults served in Prevention/Diversion, 6% of adults served in Crisis Response, and 34% of adults served in Permanent Housing programs (Figure Thirty). The increase in veterans served across these programs can be attributed in part due to the Department of Veteran Affairs' continued support of Homeless Programs, such as the Supportive Services for Veteran Families and HUD-VASH programs, their 2022 initiative of placing 38,000 homeless veterans into Permanent Housing, increased outreach to the veteran community, and increased collaboration efforts between Contra Costa's Veteran Service Providers, the Coordinated Entry System, and the larger network of providers in the CoC.



Eighty-nine percent of veterans exited Prevention to Permanent Housing in 2023. Almost half (45%) of veterans in Crisis Response exited to Permanent Housing (higher than any other sub-population in the CoC). Almost all (95%) remained in their Permanent Housing program or exited to another Permanent Housing destination (Figure Thirty-one).

FIGURE THIRTY-ONE: PERCENT OF VETERANS WHO REMAIN HOUSED OR EXITED TO PERMANENT HOUSING, BY PROGRAM MODEL CATEGORY, 2023



#### HOUSING OUTCOMES SUMMARY

Nearly one-third (31%, n=2,972) of all households served in the CoC during 2023 were housed on exit or maintained housing. Outcomes across sub-populations vary for those exiting from Prevention and Diversion and those exiting from Crisis Response while the proportion of people maintaining Permanent Housing or exiting to other Permanent Housing is consistent across all sub-populations.

2,972
Households were housed during 2023; 31% of all households served.

Table Nine presents the percent of households (HH) or individuals (Ind) served during 2023 with exits to Permanent Housing from Prevention and Diversion and Crisis Response programs. This data was provided in previous sections and is now presented together for easy comparison.

The overall exit rate to Permanent Housing for the CoC from Prevention and Diversion was 95%, and 19% from Crisis Response.

Among race and ethnic groups, three groups had the highest exits to housing from Crisis Response: Black/African American/African (22%), Asian American/Asian (18%), and Multiple Races (18%). Hispanic/Latinx (7%) and American Indian/Alaska Native/Indigenous (10%) had the lowest. Among other sub-populations, Households with Children had the highest rates of exits to Permanent Housing (39%) from Crisis Response, followed by Veterans (36%). Chronically Homeless households had the lowest rates (15%, Table Nine).

TABLE NINE: HOUSED ON EXIT RATES BY SUB-POPULATIONS, 2023

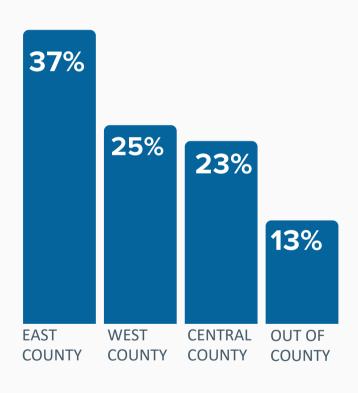
TABLE NINE. HOUSED ON EXIT KATES BY SUB-POPULATIONS, 2025							
POPULATION	FROM PREVENTION	FROM CRISIS RESPONSE					
General Population	95%	19%					
Race/Ethnicity							
American Indian/Alaska Native/Indigenous (HH)	100%	10%					
Asian American/Asian (HH)	94%	18%					
Black/African American/African (HH)	96%	22%					
Hispanic/Latinx (HH)	98%	7%					
Multiple Races (HH)	96%	18%					
Native Hawaiian/Other Pacific Islander (HH)	96%	17%					
White (HH)	90%	17%					
Other S	ub-Populations	Л					
Chronic Homeless	N/A	15%					
Households with Disabling Condition (HH)	89%	18%					
Households with Children (HH)	98%	39%					
LGBTQIA+ (Ind)	97%	26%					
Survivors of Domestic Violence (Ind)	85%	23%					
Veterans (Ind)	85%	36%					

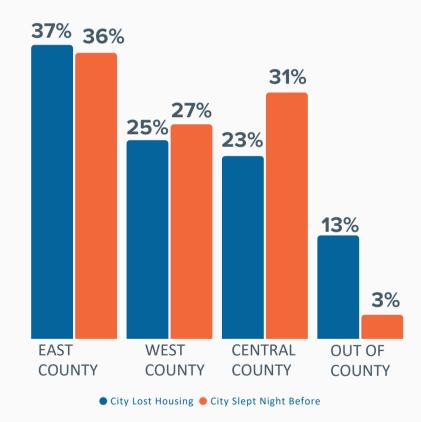
#### **REGIONAL & CITY DATA**

People experiencing homelessness were asked in which city they lost housing and in which city they slept in the night before enrollment into Crisis Response. This provides city and regional data to help understand where people lost their housing and identify a greater need for Prevention services. Thirty-seven percent (n=3,596) of households accessing Crisis Response lost their housing in East County, 25% (n=2,428) in West County, 23% (n=2,206) in Central County, and 13% (n=1,255) outside of Contra Costa County (Figure Thirty-three).

FIGURE THIRTY-THREE: PROPORTION OF HOUSEHOLDS LOSING HOUSING BY REGION, 2023

FIGURE THIRTY-FOUR: WHERE HOUSEHOLDS LOST HOUSING AND CITY WHERE SLEPT BEFORE ENROLLMENT, BY REGION, 2023





When comparing the region where households lost housing with the region they slept in the night prior to enrolling into programming, it appears there is movement across the county. The proportion of households that lost housing in West County (25%) and Central County (23%) was lower than the proportion of households that slept in those regions the night prior to program enrollment (27% and 31%, respectively) while the opposite was true in East County. The proportion of households that lost housing in East County (37%) was higher than the 36% of households that slept in East County prior to enrollment (30%, Figure Thirty-four). The city data for where households lost their housing is provided in Table Ten.

EAST COU	YTY	CENTRAL CO	UNTY	WEST COUN	NTY	OUT OF COL	JNTY
Antioch	1,916	Concord	1,284	Richmond	1,720	County Not Listed	695
Pittsburg	1,040	Martinez	359	San Pablo	372	Alameda County	266
Bay Point	276	Walnut Creek	243	El Sobrante	104	Solano County	151
Oakley	220	Pleasant Hill	196	Rodeo	83	San Francisco	88
Brentwood	216	San Ramon	94	Pinole	65	Sonoma County	23
Bethel Island	68	Danville	27	El Cerrito	59	Santa Clara	22
Discovery Bay	18	Clayton	23	Hercules	45	Santa Cruz	3
Byron	11	Pacheco	23	North Richmond	38	San Mateo	12
Knightsen	1	Lafayette	22	Crockett	31	Napa Co	7
		Alamo	9	Port Costa	8	Monterey Co	2
		Orinda	9	Kensington	3	Marin	9
		Moraga	6				
		Blackhawk	1				
		Clyde	1				
TOTALS	3,766		2,297		2,528		1,278

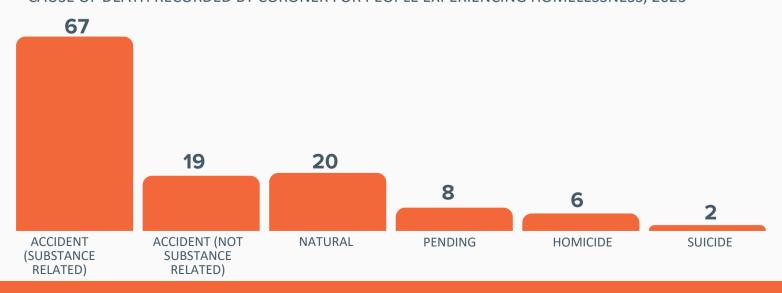


#### CAUSE OF DEATH PER CORONER

Our Continuum of Care marked Homeless Persons' Memorial Day (December 21st), with a community event to give dignity to those who lost their lives while still struggling with a housing crisis. Data from the Contra Costa County Coroner's Office is provided to H3 to identify causes and trends in death rates among individuals experiencing homelessness. The coroner reported 113 people experiencing homelessness who died during calendar year 2023.

Drug and alcohol related accidental deaths represent the highest cause of death in 2023, followed by natural causes and non-substance related accidents.

CAUSE OF DEATH RECORDED BY CORONER FOR PEOPLE EXPERIENCING HOMELESSNESS, 2023



#### **COC PROGRAM MODELS**

#### Other CoC Data

This annual report provides a comprehensive summary of the people and households that access the CoC and is meant to raise questions, identify successes, and inform future programing and policies. Additional data sources help the CoC understand the population, needs, and program successes.

#### **System Performance Measures (SPMs)**

System Performance Measures (SPMs) were established in 2015 by the U.S. Department of Housing and Urban Development (HUD) to help communities gauge their progress in preventing and ending homelessness. The seven measures focus on data captured during the federal fiscal year, October 1st through September 30th and look at entire system, not individual programs or project types. This data is used to help determine funding for the CoC at the federal level and is used at the local level to identify trends, understand impacts from program or policy changes, and to guide decision-making. One limitation is that this source does not allow for understanding differences across subpopulations.

A full report on the SPMs is published by HUD annually and is available online: <u>HUDCoCSystemPerformanceMeasures | Tableau Public</u>

#### Point-in-Time (PIT) Count

The U.S. Department of Housing and Urban Development (HUD) requires all communities receiving federal dollars for their Homeless Continuum of Care (CoC) conduct a Point-in-Time (PIT) count every other year. This count of sheltered and unsheltered people experiencing homelessness on a single night in January helps the federal government measure homelessness across the Country and can help communities plan services and programs, measure progress, and identify strengths and gaps in a community's current homelessness assistance system. Limitations include variations in methodology across communities, potentially excluding people who were not visible the night of the count and limited ability to capture survey data.

A PIT infographic and StoryMap are available on the H3 website at <u>Health, Housing and Homelessness Data</u>
<u>Reports | Contra Costa Health (cchealth.org)</u>

# **APPENDIX A: PROGRAM NAMES AND AGENCIES, 2023**

## **Emergency Shelter**

AGENCY	PROGRAM	# INDIVIDUALS	# HOUSEHOLDS
Bay Area Community Services	Opportunity Village[6]	84	66
Bay Area Community Services	Delta Landing	390	297
Bay Area Community Services	Don Brown Shelter	118	118
Contra Costa Health: H3	Brookside Shelter	124	124
Contra Costa Health: H3	Concord Shelter	183	176
Contra Costa Health: H3	Calli House	72	72
Contra Costa Health: H3	Concord Warming Center	385	384
Contra Costa Health: H3	Philip Dorn Respite Center	96	96
Greater Richmond Interfaith Program (GRIP)	GRIP Family Emergency Shelter	177	55
Greater Richmond Interfaith Program (GRIP)	GRIP Warming Center[7]	115	103
Northern California Family Center	Northern California Family Center- Emergency Shelter	31	30
SHELTER, Inc.	Mountain View Family Shelter	95	37
Trinity Center	Trinity Center Evening Program	45	45
Winter Nights Family Shelter, Inc.	Winter Nights Family Shelter	105	30

[6] New in 2023 [7] New in 2023

# Rapid Exit

AGENCY	PROGRAM	# INDIVIDUALS	# HOUSEHOLDS
Hope Solutions	Coordinated Entry Rapid Exit[8]	275	153
Hume Center	Coordinated Entry Rapid Exit[9]	32	32
Service Only (SSOs)			
City of Richmond—Encampment Resolution	Castro Encampment Transition Care Program	106	101
Contra Costa Health: H3	Concord Service Center	400	400
Contra Costa Health: H3	Cal AIM - Outside Referrals	206	195
Contra Costa Health: H3	CORE Aftercare/Non-Homeless	43	42
Greater Richmond Interfaith Program (GRIP)	West County CARE Center	643	504
Hope Solutions	Housing Navigation for Transition Age Youth	18	12
Contra Costa Health: H3	HDAP- CORE Aftercare	152	151
Hope Solutions	Emergency Housing Voucher (EHV) Housing Navigation Program	157	103
Hope Solutions	Housing Navigation for HDAP	143	143
Hope Solutions	Holistic Intervention Partnership (HIP)- Homeless[10]	35	33
Hope Solutions	Housing Navigation for HDAP Prevention	25	25

[8] Started July 2023 [9] Ended June 2023 [10] Started July 2023

## Service Only (SSOs) con't

AGENCY	PROGRAM	# INDIVIDUALS	# HOUSEHOLDS
Hope Solutions	Home Safe (Homeless)	20	18
Hope Solutions	TAY FYI Voucher Housing Navigation	11	6
Housing Consortium of the East Bay	Castro Housing Navigation Program	2	2
Hume Center	Holistic Intervention Partnership (HIP) SSO- Homeless[11]	94	90
Hume Center	Home Safe Homeless[12]	41	40
SHELTER, Inc.	HVRP Employment Services	32	32
Trinity Center	Trinity Center (CARE Center)	434	432
Trinity Center	Young Adult Program	126	126
Veterans Accession House	Legal Services for Veterans (LSV-H)	1	1
Winter Nights Family Shelter, Inc.	Winter Nights Safe Parking Program —Pittsburg	88	58
Winter Nights Family Shelter, Inc.	Winter Nights Safe Parking Program —Antioch	27	17
Transitional Housing			
Bi Bett	Uilkema House	42	42

[11] Ended June 2023 [12] Ended June 2023

Contra Costa Health: H3

Mary McGovern

33

33

# Transitional Housing con't

AGENCY	PROGRAM	# INDIVIDUALS	# HOUSEHOLDS
Contra Costa Health: H3	Pomona Apartments	22	19
Veterans Accession House	Veterans Accession House— Transitional Housing	1	1
Veterans Accession House	Veterans Accession House GPD	22	22
Street Outreach Programs			
Contra Costa Health: H3	CORE Mobile Outreach	5,713	4,658
Rapid Rehousing			
Bay Area Community Services	BACS Countywide RRH[13]	50	50
Caminar	Bringing Families Home—Rapid Rehousing—NEW in 2023	172	47
Hope Solutions	City of Concord Rapid Rehousing	42	19
Hope Solutions	HousingWorks	412	136
Hope Solutions	Parole Housing RRH Program	67	67
Hope Solutions	Probation Housing RRH Program	112	104
Hope Solutions	Probation TAY RRH	16	16
Hope Solutions	TAY Rapid Rehousing	60	36

## Rapid Rehousing con't

Catholic Charities of the East Bay—NEW

**Hope Solutions** 

AGENCY	PROGRAM	# INDIVIDUALS	# HOUSEHOLDS
Insight Housing (formerly Berkeley Food and Housing)	Insight Housing SSVF Rapid Rehousing	192	133
Lao Family Community Development	Lao Family Measure X Rapid Rehousing—NEW in 2023	1	1
SHELTER, Inc.	ESG (County) RRH	15	7
SHELTER, Inc.	ESG (State) RRH	32	10
SHELTER, Inc.	Positive Futures Rapid Rehousing	15	15
SHELTER, Inc.	REACH Plus	106	40
SHELTER, Inc.	Restored Hope for Families —NEW in 2023	22	10
SHELTER, Inc.	SSVF Rapid Rehousing	136	118
Prevention and Diversion			
Bay Area Community Resources - NEW	Family Prevention—NEW in 2023	2	1
Bay Area Community Services	Singles Prevention—NEW in 2023	2	2
Bay Area Community Services—NEW	Measure X Pilot Prevention	2	2
Caminar	Bringing Families Home— Eviction Prevention—NEW in 2023	61	16

Singles Prevention

**HDAP Prevention** 

2

27

3

29

#### Prevention and Diversion con't

AGENCY	PROGRAM	# INDIVIDUALS	# HOUSEHOLDS
Hope Solutions	Coordinated Entry Family Prevention	743	273
Hope Solutions	Holistic Intervention Partnership (HIP) Prevention[14]	31	30
Hope Solutions	Home Safe Prevention[15]	50	49
Hope Solutions	HousingWorks Eviction Prevention	18	7
Hope Solutions	Parole Housing Prevention	20	20
Hope Solutions	Probation Housing Prevention	48	47
Hume Center	Holistic Intervention Partnership (HIP) Prevention[16]	45	44
Hume Center	Home Safe Prevention[17]	59	59
Hume Center	Hume Center Diversion/Prevention[18]	39	37
Insight Housing[19]	Insight Housing Homeless SSVF Prevention	99	53
Northern California Family Center	Northern California Family Center— Prevention	40	39
SHELTER, Inc.	ESG (County) Prevention	7	5
SHELTER, Inc.	Rental Assistance (Prevention)	3,388	1,412

<sup>[14]</sup> Started July 2023 [15] Started July 2023 [16] Ended June 2023 [17] Ended June 2023 [18] Ended June 2023

#### Prevention and Diversion con't

AGENCY	PROGRAM	# INDIVIDUALS	# HOUSEHOLDS
SHELTER, Inc.	SSVF Prevention	105	66
Permanent Housing			
Contra Costa Health: Behavioral Health	Veterans Square—HOPWA Units — PSH	4	3
Contra Costa Health: Behavioral Health	Veterans Square—No Place Like Home (NPLH)—PSH	13	9
Contra Costa Health: H3	Permanent Connections—PSH	12	12
Contra Costa Health: H3	Destination Home.PSH	15	13
Contra Costa Health: H3	HUMS—PSH	33	33
Department of Veterans Affairs	HUD VASH	583	451
Hope Solutions	CoC Rental Assistance Program (RAP) Lakeside—PSH	4	4
Hope Solutions	CoC Rental Assistance Program (RAP) Ohio Street—PSH	9	7
Hope Solutions	CoC Rental Assistance Program (RAP)Tenant-Based Rental Assistance Program—PSH	430	279
Hope Solutions	CoC Rental Assistance Program (RAP)Villa Vasconcellos[20]—PSH	6	6
Hope Solutions	ACCESS—PSH	57	57

[20] Separate from RCD Villa Vasconcellos units

# Permanent Housing con't

AGENCY	PROGRAM	# INDIVIDUALS	# HOUSEHOLDS
Hope Solutions	Families in Supportive Housing (FISH)—PSH	81	23
Hope Solutions	Garden Park Apartments—PSH	70	30
Hope Solutions	Lakeside Apartments—PSH	37	13
Hope Solutions	Hacienda—PSH—NEW in 2023	29	27
Housing Authority of Contra Costa County	EHV Voucher	294	195
Housing Authority of Contra Costa County— NEW	FYI Vouchers	11	6
RCD—Choice In Aging	Berrellesa Palms	52	47
RCD—Jewish Family and Community Services	Villa Vasconcellos—HOPWA units	3	3
RCD—Jewish Family and Community Services	Villa Vasconcellos (non- HOPWA)	20	20
RCD—Lifelong Medical	Idaho Apartments—HOPWA units— PSH	12	12
RCD—Lifelong Medical	Idaho Apartments—Non- HOPWA units—PSH	17	17
RCD-Trinity	St. Pauls Commons	20	16
Satellite Affordable Housing Associates	Columbia Park Manor	2	2
SHELTER, Inc.	Permanent Turningpoint—PSH	57	22

# Permanent Housing con't

AGENCY	PROGRAM	# INDIVIDUALS	# HOUSEHOLDS
SHELTER, Inc.	Project Thrive—PSH	43	17
SHELTER, Inc.	Project Thrive 2.0—PSH	56	22
SHELTER, Inc.	Tabora Gardens—PSH	2	2
SHELTER, Inc.	Tabora Gardens (MHP/VHHP)— PSH	12	11