Madera County Homelessness Gaps Analysis

Prepared for the County of Madera by Homebase
MARCH 2023
ACKNOWLEDGEMENTS

The *Madera County Homelessness Gaps Analysis* was drafted through a review of a wide variety of local and regional data, including interviews with key collaborators. These included an environmental scan, a series of focus groups, and input from a local Steering Committee of representatives from the County of Madera. Homebase, in partnership with the County of Madera, would like to thank the members of the Steering Committee for their partnership and guidance throughout the process of developing the strategic plan. Special thanks to the many nonprofit housing and service providers; health care, faith-based, and other partners; and to the people experiencing homelessness or with recent lived expertise who shared their invaluable experience and insight. The plan would not exist without your commitment.
INTRODUCTION

The decision to develop a gaps analysis and strategic plan to prevent and end homelessness in Madera County was collectively made by the Madera County Board of Supervisors (through the leadership of the County Administrative Officer). The gaps analysis stands alongside the work of the Fresno Madera Continuum of Care (FMCoC) and other regional partners, providing a county-specific focus.

A Continuum of Care (CoC) is a communitywide planning approach to promote the goal of ending homelessness. As designated by the U.S. Department of Housing and Urban Development (HUD), a CoC provides the basis for communities to collectively plan for and provide housing resources to address the needs of homeless families and individuals in the community. Madera County is one of two counties engaged in the Fresno Madera Continuum of Care (FMCoC), encompassing both Madera and Fresno counties, as well as cities including Chowchilla, Clovis, Fresno, and Madera.

It can be challenging for two counties to be organized under one CoC, particularly when the geography and populations of the two counties may differ. While Madera County representatives participate and collaborate effectively within the FMCoC and with partner agencies and organizations, they also recognized that there was a need to more closely look at the unique circumstances of Madera County residents, recognize the strengths of the Madera system, identify the gaps that are specific to Madera County, and develop strategies customized to Madera County’s residents, resources, and network of providers.

The gaps analysis and strategic planning process for Madera County is being facilitated by Homebase, a nonprofit technical assistance provider dedicated to building community capacity to prevent and end homelessness. Homebase is guided by a Steering Committee of local experts and Madera County government agencies. The purpose of the gaps analysis is to evaluate the current system, including street outreach, shelter, and housing programs, and to identify existing system gaps. A subsequent strategic implementation plan will build upon the gaps analysis to include recommendations designed for Madera County. Both the gaps analysis and the strategic implementation plan are intended to inform policy decisions as the County and its partners work to address systemic issues and promote opportunity for all.

The efforts to build on the many successful strategies already in play in Madera County are multi-sector and supported by local, state, federal, and private funding sources. Additionally, there are other system partners serving people experiencing homelessness, including cities and nonprofit agencies, as well as mainstream programs that are not exclusively dedicated to serving people experiencing homelessness.
Each provides significant support and resources in preventing and addressing homelessness. That so many agencies and partners across the community dedicate resources as part of the system of care reflects a common interest and commitment to ending and preventing homelessness in Madera County.
VISION, MISSION, & GUIDING PRINCIPLES

STRATEGIC PLAN VISION STATEMENT

All individuals and families in Madera County can achieve housing stability and long-term self-sufficiency.

STRATEGIC PLAN MISSION STATEMENT

Rapidly connect people experiencing or at risk of homelessness with services and supports that enable them to retain and sustain stable housing and independence.

STRATEGIC PLAN GUIDING PRINCIPLES

- **Promote Collaboration and Collective Action**
  The homeless system alone cannot prevent and end homelessness. Communication, collaboration, and community engagement are vital to the success of preventing and ending homelessness in Madera County.

- **Customize Solutions**
  Effective solutions must be based on the recognition of the unique needs and strengths of each individual experiencing homelessness and customizing the housing and services through a trauma-informed, strengths-based approach.

- **Implement Low-Barrier and Housing First**
  An effective response requires that housing opportunities in Madera County reduce barriers to entry and embrace the evidence-based practice of Housing First - providing housing as quickly as possible without preconditions and providing services needed to maintain housing without participation requirements and unnecessary, non-safety-oriented rules.

- **Center Equity**
  Housing and services should be accessible to all regardless of race, ethnicity, immigration status, sexual orientation, and gender identity. Centering equity requires analyzing disparities, identifying systemic barriers to housing and services, and then targeting resources and removing barriers to ensure access for all.

- **Incorporate Lived Experience**
  People with current or past lived experience of homelessness are experts and have first-hand knowledge of what is needed to help improve the system of care. Persons with diverse lived experience need to be incorporated at all levels of planning and decision making.

- **Cultural Competency**
  Provide respect and dignity for all residents during housing and supportive service assessment and delivery. Ensure that organizations and staff are trained on topics including, implicit bias, cultural humility and sensitivity, and the root causes of homelessness.
METHODOLOGY

Homebase carried out the gaps analysis for Madera County between August 2022 and January 2023 to identify key gaps and needs to inform plans to reduce and end homelessness. The methodology to complete the gaps analysis relied on a combination of quantitative and qualitative data sources to determine existing resources and unmet needs. Quantitative methods used to assess the performance of the homeless system of care included collecting and analyzing data from housing and services providers and from local data and FMCoC annual Point-in-Time (PIT) counts of individuals experiencing homelessness in the region.

For purposes of this gaps analysis, the best available data was utilized to determine where system gaps exist and to find areas where additional data is needed to improve services, guide planning, and track equity across the system of care. Key quantitative data sources included Homeless Management Information System (HMIS) and the Point-in-Time (PIT) count.

Most housing and service providers who receive public funding are required to enter client information into HMIS, which includes data such as client demographics, housing status, disabilities, and sources of income and non-cash benefits. HMIS data serves as the chief source of information for tracking system performance such as the Department of Housing and Urban Development (HUD)-mandated System Performance Measures (SPMs) and the Longitudinal Systems Analysis (LSA). In Madera County, over the time-period of the gaps analysis, only two local providers were HMIS-participating: Community Action Partnership of Madera County (CAPMC) and Madera County Department of Social Services. Beginning at the end of January 2023, the Madera Rescue Mission became an HMIS-participating entity, enabling their data to be included in HMIS reports for 2023 and moving forward. Some data entered in HMIS by the FMCoC’s Coordinated Entry System was also used in this analysis.

The PIT count is a biennial census of sheltered and unsheltered persons within the geographic boundaries of a CoC. PIT counts are conducted during a single 24-hour period in January¹ and record demographic information about people experiencing homelessness. The Housing Inventory Count (HIC), an annual inventory of shelter beds dedicated to people experiencing homelessness and permanent housing beds dedicated to formerly homeless persons, is completed on the same date as the PIT count. Madera County data collected as part of the most recent unsheltered PIT count (2022) and HIC (2022) were used in this analysis.

¹ In 2021 and 2022 many regions, including the Fresno-Madera Continuum of Care obtained waivers to conduct their PIT and HIC counts one month later in February due to pandemic and weather impacts in January.
analysis, as were past counts. Local planning documents, CoC policies and procedures, and competition materials were also consulted to help assess the capacity of existing housing and services within the system.

To write the analysis, Homebase also relied on key qualitative data sources, including:
An in-depth review of existing reports and data about Madera County:

- Live Well Madera County Community Health Improvement Plan - 2019-2022
- Madera County Homeless Health Assessment: Access and Barriers to Care (May 2021)
- Madera County Department of Public Health CMSP’s Local Indigent Care Needs (LICN) Implementation Plan (June 2021)
- The Madera County Interagency Children and Youth Services Council 2021-2022 Annual Report
- Madera County 2022 Affordable Housing Needs Report (California Housing Partnership)
- Madera Community Hospital Community Needs Assessment Implementation Strategy FY2022-2025
- Fresno Madera Continuum of Care 2-year Aim Statements
- The demographics of the community and people experiencing homelessness including PIT, HMIS, HIC, SPMs, and US Census Bureau data; and
- Local plans, programs, efforts, and interventions already underway.

Meetings, Convenings & Presentations:

- Bi-weekly planning meetings with County of Madera staff
- Monthly Steering Committee meetings - comprised of representatives from nonprofit agencies, faith-based organizations, City and County agencies, business community, and people with lived experience of homelessness
- Presentations to the Housing for the Homeless Coalition
- Convening of 10+ direct service/front-line staff
- Convening of Board of Supervisors District staff

Focus Groups:

- Focus group comprised of faith-based organizations.
- Focus group comprised of law enforcement from Madera County, and the City of Chowchilla
- Two focus groups comprised of people with current or recent experience of homelessness.

Stakeholder Interviews:

More than 15 stakeholder interviews with representatives from County staff, law enforcement officials, community-based organizations, service providers, health care representatives, outreach organizations, educational organizations, and faith-based organizations

The gaps analysis is based on the most recent data available at the time. It represents the input of many collaborators, including the private/public sectors, homeless service providers, local advocates, behavioral health experts, jurisdictional leaders, and people with lived experience of homelessness.
An analysis of the homeless system of care would be incomplete without the direct perspective of individuals experiencing homelessness or those with recent experience of homelessness. Two focus groups and individual interviews were held with a diverse range of individuals with current or recent lived experience of homelessness, including heads of households of families experiencing homelessness. The focus groups were held at CAPMC and the Madera Rescue Mission. During the focus groups, clients discussed their experiences navigating the homeless system, the challenges of connecting with services or housing opportunities, and the impact of homelessness on their health and welfare. One focus group was held in-person while the other focus group was held virtually through Zoom video conferencing software.

A Steering Committee provided feedback on initial qualitative and quantitative data gathered, as well as provided insights on the history and current system of care in Madera County. The Steering Committee members included staff from Camarena Health, the City of Madera Housing Authority, Clearview Church, Community Action Partnership of Madera County (CAPMC), Hope House, the Madera County Administrative Office (CAO), the Madera County Department of Behavioral Health, the Madera County Department of Public Health, the Madera County Department of Social Services, the Madera County Sheriff’s Office, and the Madera Rescue Mission.

Drawing on the extensive feedback, Homebase identified 5 key priority areas for action to be considered, each described in a separate section of the report below. These areas include:

<table>
<thead>
<tr>
<th></th>
<th>Enhanced Prevention and Diversion Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Increased Safe, Affordable Housing Services</td>
</tr>
<tr>
<td></td>
<td>Strengthened Homelessness Emergency Response System</td>
</tr>
<tr>
<td></td>
<td>Robust Data Collection and Analysis</td>
</tr>
<tr>
<td></td>
<td>Coordination and Communication to Ensure Effective Use of Limited Resources</td>
</tr>
</tbody>
</table>

The following gaps analysis is divided into two main sections. First, it provides a background section that presents an overview of Madera County and the homeless system of care, including a description of individuals currently experiencing homelessness in the County, a review of existing housing stock, and a list of the many programs and systems that are working well in the County. Second, it identifies the primary gaps that exist in the system.
BACKGROUND

HISTORIC AND ECONOMIC CONTEXT

Madera County is a central California community with approximately 159,410 residents.² It encompasses two cities, as well as several unincorporated communities. The largest city is the City of Madera, which is home to 43% of county residents (67,944).³ The next largest is the City of Chowchilla, which comprises 12% of county residents (19,007). Madera County is home to many rivers (representing almost 4% of the rivers in the entire state of California), and an abundance of creeks, streams, and sloughs.⁴ While most of Madera County is in the foothills, parts of eastern Madera County are mountainous regions.

Fresno County is Madera County’s closest neighbor (and collaborator in the FMCoC). Fresno’s population is eight times larger than Madera’s population.⁵ Fresno County’s largest city, the City of Fresno, has more than six times as many residents (1,013,581) as the entire County of Madera.⁶ Madera County residents represent 14% of the region governed by the FMCoC (159,410 of 1,172,991 residents).

As a HUD-funded region, Madera County is a grantee and Madera County organizations receive grants as part of the FMCoC. Madera County represent nearly 14% of the CoC region’s general population,⁷ but less than 7% of the region’s homeless population. While Madera County successfully collaborates with the FMCoC on strategies and utilizes the Coordinated Entry System (CES), the County has its own unique profile of needs and services available.

² Quick Facts, Madera County, California, U.S. Census Bureau.
³ Quick Facts, City of Madera, California, U.S. Census Bureau.
⁴ Top streams in Madera County
⁵ Quick Facts, Fresno County, California, U.S. Census Bureau.
⁶ Quick Facts, City of Fresno, California, U.S. Census Bureau
⁷ Quick Facts, Counties of Madera, Fresno, and the State of California, U.S. Census Bureau.
The general population demographics are slightly different for Madera County as compared to Fresno County. A slightly higher percentage of Madera County residents are White and American Indian, while a slightly higher percentage of Fresno County residents are Black or African American, Asian, and Hispanic/Latino. Both counties are home to a significant number of individuals living below the poverty level compared to the state and national averages (both at approximately 12%).

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>Madera County</th>
<th>Fresno County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population that identifies as White</td>
<td>85%</td>
<td>76%</td>
</tr>
<tr>
<td>Population that identifies as Black or African American</td>
<td>4%</td>
<td>6%</td>
</tr>
<tr>
<td>Population that identifies as American Indian or Alaska Native</td>
<td>4.5%</td>
<td>3%</td>
</tr>
<tr>
<td>Population that identifies as Asian</td>
<td>3%</td>
<td>12%</td>
</tr>
<tr>
<td>Population that identifies as Native Hawaiian or another Pacific Islander</td>
<td>&lt;1%</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Population that identifies as two or more races</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Population that identifies as Hispanic of Latino</td>
<td>55%</td>
<td>60%</td>
</tr>
<tr>
<td>Individuals with disabilities</td>
<td>9%</td>
<td>9%</td>
</tr>
<tr>
<td>Individuals who are veterans</td>
<td>4%</td>
<td>3%</td>
</tr>
<tr>
<td>Individuals living below the federal poverty level (FPL)⁸</td>
<td>20%</td>
<td>19%</td>
</tr>
<tr>
<td>Individuals without health insurance</td>
<td>10%</td>
<td>9%</td>
</tr>
</tbody>
</table>

According to the U.S. Census Bureau, 72% of individuals over age 25 are high school graduates in the County of Madera and 16% of residents have a bachelor’s degree (compared to 23% in Fresno County and 35% for California).⁹ Madera County has a slightly higher median household income ($66,709) than the median for Fresno County ($61,276).¹⁰

**Housing and Housing Affordability**

The median value of a home in Madera County in 2017-2021 was $284,800 (slightly lower than Fresno County’s $288,100), but still both were higher than the national median price of a home ($244,900). The U.S. Census Bureau indicates that the median gross rent in both Madera County ($1,120 per month) and Fresno County ($1,098 per month) were both similar to the national average ($1,163 per month) in 2021.

---

⁸ The Federal Poverty Level (FPL) for a family of 4 in 2023 is $30,000, 2023 Federal Poverty Levels, Office of the Assistant Secretary for Planning and Evaluation.

⁹ QuickFacts, Counties of Madera, Fresno, and the State of California, U.S. Census Bureau.

¹⁰ Ibid.
In 2021 the U.S. Census counted 49,512 housing units available in Madera County. The vacancy rate for homeowners was only 1.2% and for renters it was 3.5%. Eighty-two percent of Madera County housing is comprised of single family units (40,611). Less than 8% of the housing units available in Madera County are studio or one-bedroom units (3,903 units), while more than 71% of the units are three- to four-bedroom units (35,188).

The majority of housing units in Madera are owner occupied (28,842), with only 29% available for renters (14,736). Of the 13,675 units that were being rented in 2021 at the time of the Census, over 62% of rental units (8,462) were rented at over $1,000 per month. Close to 40% of the County’s housing stock was built before 1979 (19,689 units). According to policymap.com, between 2011 and 2021, the change in the total number of housing units of 1% lagged behind the 4.5% increase in the Madera County general population during the same time period.

When last measured, nearly one third of all households in Madera County (33%) experience a “cost burden” for housing. The U.S. Department of Housing and Urban Development (HUD) defines cost-burdened families as those who pay more than 30% of their income for housing and may have difficulty affording necessities such as food, clothing, transportation, and medical care. Fifty percent or more of income spent on housing is considered severely cost burdened and a major risk factor for falling into homelessness. Severe cost burden is considered a high risk for homelessness because a household that is paying a significant share of their income on housing expenses is less able to handle any unexpected financial demands that may arise such as a health crisis, automotive repair, employment loss, family crisis, etc. A cost burdened household is also less likely to have the financial savings in place to cover unexpected costs that arise. As many as 15% of Madera County households were estimated to be severely cost-burdened. The cost burden falls most heavily upon the lowest income households, whose incomes are not high enough to obtain an affordable unit by these standards given the current housing market average monthly asking rent of $1,120 per month.

Cost burden is the ratio of housing costs to household income. For renters, housing cost is gross rent (contract rent plus utilities). For owners, housing cost is "select monthly owner costs," which includes mortgage payment, utilities, association fees, insurance, and real estate taxes.
According to 2015-2019 Comprehensive Housing Affordability (CHAS) data, many Madera County residents face additional housing problems that make it challenging day-to-day. Housing problems are defined as incomplete kitchen facilities, incomplete plumbing facilities, more than one person per room, or paying more than 30% of their income toward housing. The latest CHAS data from 2019 counted 44,800 households in Madera County (slightly lower than the 49,512 by 2021). In 2019, 39% of County households (17,560) had at least one of the four housing problems measured by HUD. Of those households, 60% experienced severe housing problems (with 50% or more of their income toward housing).

In California, every year each County establishes a housing plan as part of their General Plan. To determine what goes into the housing plan, they must determine how much housing is needed in the community at different affordability levels to meet the needs of local households. The housing needs are determined through a Regional Housing Needs Allocation (RHNA) for each county, including Madera.

According to Madera County’s 2022 RHNA, there are expected to be 48,048 units of housing in the County by June 30, 2023. To meet the anticipated future need for affordable housing units based on income and population factors, the RHNA for Madera County estimated that total new housing units needed in Madera County by 2032 was 12,243 new units or 60,291 total units (Fig. 1).

Of those new units needed, one out of four would need to be accessible for very low-income households (23%), with an additional 17% needed for low-income households. In 2021, 1,066 building permits were issued in Madera County.

---

22 Final Regional Housing Need Determination, Madera County, January 26, 2022.
23 Ibid.
24 Ibid.
25 Quick Facts, Madera County, California, U.S. Census Bureau.
HOMELESSNESS IN MADERA COUNTY

The principal data sources used to analyze the homeless population in Madera County include:

1. The Point-in-Time (PIT) count, which provides an estimate of the size of the homeless population during a single 24-hour period on the night designated for the count.
2. Data entered in the Homeless Management Information System (HMIS) by homeless service providers operating an emergency shelter (ES), transitional housing (TH) program, rapid rehousing (RRH) program, or permanent supportive housing (PSH) program in Madera County through the FMCoC.
3. Housing Inventory Count (HIC) reports, which provide an inventory of housing conducted annually. The reports tally the number of beds and units available on the night designated for the count by program type, and include beds dedicated to serve individuals and families who are homeless.

Homelessness in the region impacts everyone in the community. Despite effective programs and dedicated providers, the number of people experiencing homelessness in the County continues to be an issue. As mentioned above, at least one third of all Madera County residents experience a cost burden or severe cost burden for housing. When such a large proportion of income is spent on housing, any unexpected expense can lead to homelessness. Each year, hundreds of Madera County residents – neighbors, friends, and co-workers, etc. – experience a crisis that results in loss of housing, and once housing is lost, it is increasingly difficult to regain economic security and housing stability.

To best address the crisis and develop strategies to fit the unique needs of the region, it is vital to understand who is experiencing homelessness and to document the needs of the population. Every year, the FMCoC conducts a Point in Time (PIT) count that provides a snapshot of the size and characteristics of the homeless population each year on a single day. CoCs are only required to count the unsheltered population every other year (although the FMCoC includes a count of unsheltered individuals every year).

The January PIT counts can be evaluated over time to determine trends in the characteristics of people experiencing homelessness, which is a critical aspect for effective planning and performance management toward the goal of ending homelessness. In addition, data gathered from the programs that

All data in this report is taken from the Homeless Management Information System (HMIS), the Point-in-Time count (PIT) and/or Housing Inventory Count (HIC) for Madera County unless otherwise specified. PIT count reports can be found on the HUD website at https://www.hudexchange.info/programs/hdx/pit-hic/data-reports/ HUD-funded programs use a definition of homelessness mandated by the U.S. Department of Housing and Urban Development (HUD). This definition counts people as homeless when they are living in a place not meant for human habitation (such as an encampment, tent, or vehicle), emergency shelters, or transitional housing. People who are doubled up (more than one household in a unit meant for a single household) or couch surfing are not counted as homeless under this definition.
serve people experiencing homelessness provide greater insight into the number of people served in a year and help determine the effectiveness of these programs.

During the FMCoC’s most recent PIT count, which took place in February 2022, volunteers identified 278 men, women, and children experiencing homelessness in Madera County, with 128 (46%) of those people living unsheltered on the streets, in vehicles, or encampments [Fig. 2].

The overall number of people experiencing homelessness in Madera County decreased between 2022 and 2019 by 26%. Also notable is that beginning with the 2022 PIT count, there were more people experiencing homelessness living in shelters rather than living unsheltered [Fig. 3] This is an important trend for the community, ensuring that there are more people experiencing homelessness living in shelters than those living in places not meant for human habitation. We do not anticipate the trend to continue, however, as the COVID motel voucher program is set to expire soon.

The number of people who experience homelessness in a region over the course of a year is much higher than what is measured during the annual PIT count. This is, in part, because the annual PIT count only measures the number of people who are homeless on a given day and does not account for the many people who fall in and out of homelessness during the rest of the year. In addition, there are some who may not want to be counted and others who are difficult to count, especially youth, families, and those
who are in remote locations. Additionally, over the course of a year, many more children and youth experience homelessness than are captured by the annual PIT count because of the narrow definition of homelessness used by HUD for the PIT count.

Under the federal McKinney-Vento Act, schools are also required to track students experiencing homelessness, using a broader definition that also includes youth who are “doubled-up” (e.g., living with multiple families sharing the same space) or couch surfing (staying temporarily in other people’s homes). According to the homeless liaison for the Madera Unified School District, during the 2021-2022 academic year, over 750 students were identified as homeless under the McKinney-Vento definition of homelessness. The 750 represents 12.5% more students than in the 2020-2021 academic year, and 31% more students than in the 2019-2020 academic year.

Another data source that can help provide a more accurate picture of homelessness over the course of the year is the California Statewide Automated Welfare System (CalSAWS). As of February 2023, there were 737 cases of CalFresh Homeless clients presenting 603 Adults and 134 children. Of the 737 clients 358 or 48% were adults 50 years old and above.

Oftentimes, there is the misconception that people experiencing homelessness in Madera County are not from Madera County. In the 2022 PIT count, for those individuals who shared information about the county that they lived in prior to becoming homeless, 76% said that they were from Madera County. An additional 15% indicated that they had lived in Fresno County prior to becoming homeless, meaning that over 90% of the people counted as homeless in 2022 in Madera County resided in the FMCoC region before becoming homeless. [Fig. 4]

For specific demographic information for Madera County residents experiencing homelessness, the detailed data shared was provided by the FMCoC HMIS Lead.

---

28 The total number of people experiencing homelessness for all the demographic categories below do not add up to the number of people experiencing homelessness in Madera County as reported in the aggregate above (278). In many categories, the total number exceeded the total number reported in the PIT report. To avoid confusion, all demographic information provided below is represented in percentages.
**AGE**

Adults over 18 years old comprise 84% of Madera County’s homeless population. [Fig. 5] Ninety-six percent of children under 18 were in shelter, with just 4% of children experiencing unsheltered homelessness on the night of the PIT count. According to data about Madera County residents available from 2022 Homeless Management Information System (HMIS), for the 44 children living in shelters, 80% (or 35 children) reported experiencing homelessness for the first-time.

**GENDER**

The gender distribution of Madera County’s population illustrates that the majority of people experiencing homelessness identify as male. [Fig. 6] Data was insufficient to demonstrate the breakdown of gender by household type.

**RACE AND ETHNICITY**

An analysis of Madera County’s 2022 PIT count reveals distinctions in how different racial groups are represented among the homeless population compared to the general population. White individuals comprised only 63% of the homeless population (compared to 85% of the general population). At the same time, 9% of the homeless population identified as a “other” and clarified their race as “Mexican” which didn’t have a comparable category in the general population data. [Fig. 7]
An analysis of the Madera County PIT count revealed other distinctions in how different racial groups are represented among the homeless population compared to the general population. While Asian and White individuals are underrepresented in the homeless population, Black or African Americans are almost three times more likely to be in the homeless population than the general population (11% compared to 4% respectively). People identifying as two or more races are almost four times more likely to be in the homeless population than the general population (11% compared to 3%).

In the 2022 Madera County PIT count, 9% of individuals surveyed identified their race as Mexican. The U.S. Census Bureau and HUD both consider Mexican to be an ethnicity, not a race. As a result, 9% of the homeless population’s race is not considered in the general population comparison to the homeless population data.

Notably, when looking at ethnicity alone, there is an underrepresentation of individuals who identify as Hispanic or Latino in the homelessness system, with 45% identifying as Hispanic or Latino, compared to 55% in the general population [Fig. 8]. Sufficient data was not available to explain the discrepancy.


**DISABILITY STATUS**

Among all Madera County residents who accessed homeless services between in 2021 whose disability status was known, 31% of sheltered individuals experiencing homelessness reported having either a severe mental illness (SMI), substance use disorder (SUD), or physical disability, while 36% of unsheltered individuals reported having a comparable disability that impaired their daily life [Fig. 9].

![Figure 9: Madera County Homeless Population by Disability Status (2022)](image)

**THE HOMELESS SYSTEM OF CARE IN MADERA COUNTY**

Madera County and the FMCoC together have a system comprised of passionate and impactful providers dedicated to addressing homelessness. While resources are limited in Madera, the programs work diligently to divert people from homelessness wherever possible and help connect households experiencing homelessness to housing and other resources as quickly as possible.

While the FMCoC provides centralized countywide leadership and coordination for the system of care, the local work happening in Madera County has grown. For some time, the County Department of Behavioral Health was the lead agency representing Madera County at FMCoC meetings. However, Community Action Partnership of Madera County (CAPMC) was the only consistent community organization engaged in FMCoC activities, including representing the County as its regional representative. In the past five years, Madera’s representation on the FMCoC has grown, with the Department of Social Services, the County Administrative Office, and Community Action Partnership of Madera County (CAPMC) all members of the FMCoC. The growth continues, as beginning in 2023, Community Action Partnership of Madera County (CAPMC) will stand up a local Coordinated Entry process for Madera residents. Also, in 2023, the largest shelter provider in Madera County, the Madera Rescue Mission, will enter data about the residents they serve into the FMCoC’s Homeless Management Information System (HMIS), which will enable better coordination of services and housing for Rescue Mission residents.
Locally in Madera County, agencies and organizations work to serve Madera residents experiencing or at risk of homelessness. There is a large and active network of service providers and agencies working to end and prevent homelessness, to name a few:

- CAPMC offers street outreach, case management, and housing navigation. They also coordinate the PIT count for Madera County and represent Madera on the Board of the FMCoC. CAPMC also runs Shunammite Place for Madera County residents transitioning from homelessness to supportive housing and Martha Diaz Shelter for women and children experiencing domestic violence.

- The Madera County Department of Behavioral Health Services (MCDBHs) contracts with Turning Point of Central California for Hope Center and Mountain Community Wellness Centers, which provide day center services to adult and high school aged youth with behavioral health conditions. Program participants include people experiencing unsheltered homelessness. In addition, MCDBHS contracts with Turning Point to provide permanent supportive housing in Madera County for single chronically homeless individuals at Serenity Village.

- The Madera Rescue Mission offers emergency shelter to women and men experiencing homelessness. They also offer mental health respite beds to women and men with behavioral health conditions in conjunction with the Madera County Department of Behavioral Health. Recently the MCDBHS funded an additional 34 beds at the Madera Rescue Mission for individuals with mental health and substance use, co-occurring, disorders. These were funded by MHSA/BH (24) and Realignment 2011 or AB109 (10) under the Probation Department for behavioral health clients.

- The Madera County Department of Behavioral Health also has a mobile crisis care team, called C.A.R.E.S. (Crisis, Assessment, Response, & Evaluation Services), which provides 24/7, 365 days county wide coverage in partnership and via contract with Westcare, Inc. that can be called on to provide services wherever people experiencing homelessness are located. The Madera County Department of Behavioral Health also has a partnership with Westcare, Inc. to provide Mental Health Crisis Service and Outreach to people who are homeless that may be experiencing a mental health or substance abuse, co-occurring conditions. Madera County Department of Behavioral Health has also taken advantage of other funding opportunities to provide support to people experiencing behavioral health conditions, including by providing housing through No Place Like Home (NPLH).

- The Madera County Department of Social Services (DSS) provides extensive services through CalWORKs Housing Support Program, including services and housing for youth and families, including youth in the foster care system. The CalWORKs Housing Programs also include the Housing and Disability Advocacy Program (HDAP), which assists people experiencing or at risk of homelessness.
of homelessness who are likely eligible for disability benefits by providing advocacy for disability benefits as well as housing supports. HDAP has four core requirements: outreach, case management, disability benefits advocacy, and housing assistance. Housing-related financial assistance and wraparound supportive services provided by HDAP include but are not limited to interim shelter assistance, rental assistance, housing navigation, case management, security deposits, utility payments, moving costs, legal services, and credit repair.

• The Madera County Department of Social Services also provides services through the Home Safe Program, which is intended to support the safety and housing stability of individuals involved in Adult Protective Services who are experiencing, or at imminent risk of experiencing, homelessness due to elder or dependent adult abuse, neglect, self-neglect, or financial exploitation by providing housing-related assistance using evidence-based practices for homeless assistance and prevention. Additionally, the Bringing Families Home Program serves families in the child welfare system experiencing, or at risk of homelessness, by providing housing supports to increase family reunification.

• Camarena Health Center also offers a mobile health clinic that serves people experiencing homelessness. And the Madera County Department of Public Health recently received funding to provide mobile public health services starting in 2023.

• The Madera Unified School District has a homeless liaison who works to support families experiencing homelessness, including those who do not meet the narrow definition of homelessness from HUD.

• The Madera County Food Bank has an extensive volunteer community that provides food to Madera County residents in need.

• The faith-based community in Madera County also strives to provide support to people experiencing homelessness, including Clearview Church, Fourth Street Church, Valley West Christian Center, and Cornerstone Church. Saint Joachim Catholic Church operates the Holy Family Table soup kitchen, with meals seven days a week.

• Law enforcement staff from across the county, including the Sheriff’s office, the County Probation Department, and the Police Departments of the City of Madera and the City of Chowchilla each work to address homelessness in their communities.

• Policymakers from the County Board of Supervisors and City Councils and Mayors/City Managers for Madera and Chowchilla are part of the Housing the Homeless Coalition.

• Self Help Enterprises has an affordable housing community, Sugar Pine Village, that offers units to people who struggle with housing instability and homelessness. They also are proposing a new affordable housing development in Oakhurst.
The Veterans Administration provides Veterans Affairs Supporting Housing (VASH) in Madera County. Retraining the Village is a transitional housing shelter that offers support to Veterans transitioning between homelessness and permanent housing.

Since the COVID-19 pandemic, the Department of Public Health and a broad coalition of organizations and agencies have sought to develop strategic plans that address housing and homelessness. (See Live Well Madera County,\(^{29}\) the Madera County Homeless Health Assessment: Access and Barriers to Care,\(^{30}\) and the Madera County Department of Public Health CMSP’s Local Indigent Care Needs (LICN) Implementation Plan.\(^{31}\))

**Bed Availability in Madera County**

Madera County continues to struggle with a significant unsheltered population, as well as notable rates of residents who are experiencing homelessness for the first time. In the 2022 PIT count, 128 residents were found to be living unsheltered. Another 40% of Madera County residents experiencing homelessness in 2022 reported being homeless for the first-time.

Currently the region does not have enough temporary and permanent housing available to meet the need of Madera residents. For temporary housing, Madera County does not have a low-barrier housing-focused shelter anywhere in the entire region. There is year-round overnight shelter and a few other agencies that offer a small number of apartments or rooms for emergency shelter use. The County has a small shelter that serves families fleeing domestic violence.

Organizations and agencies share that they often use motel/hotel vouchers to provide temporary shelter to Madera County residents. However, a collaborative project between the Rescue Mission, CAPMC, and the County will construct a triage center at the Rescue Mission facility, which will provide six low-barrier shelter units when completed.

In 2022, the HIC data provided by the FMCoC specific to Madera County identified approximately 365 year-round beds available in the community for permanent supportive housing (PSH), rapid rehousing (RRH), transitional housing (TH), and emergency shelter (ES). Approximately 34% of the year-round beds were dedicated to some type of permanent housing and the remaining 66% were for temporary housing. Of the 365 year-round beds available in 2022, the region had 120 permanent supportive housing beds and 4 RRH “beds”\(^{32}\) (34% of all year-round beds). Additionally, the area had 241 year-round temporary

---

30 Madera County Homeless Health Assessment: Access and Barriers to Care (2021).
31 Madera County Department of Public Health CMSP’s Local Indigent Care Needs (LICN) Implementation Plan.
32 RRH is an intervention typically defined locally in the written standards and matched with a set group of participants through the Coordinated Entry prioritization. Frequently, it is used for households that need assistance locating and then getting established in a unit (security deposit, etc.) and with shorter term rental assistance and lighter touch case management than other interventions. Due to the COVID-19 pandemic, new funding made available and flexibility with existing funding streams have allowed the City/CoC to use RRH to serve individuals who would...
beds - 229 emergency shelter and 12 transitional housing (66% of all year-round beds). Of the emergency shelter beds, 12 of the 241 shelter beds (5%) are respite beds for people receiving services through the Department of Behavioral Health and another 18 beds (7%) are dedicated to women and their children who are survivors of domestic violence.

The County’s utilization rates for local emergency shelter beds and PSH are low. While Cal HSP beds had 100% utilization rate in 2022, the other sites had utilization rates ranging from 17% to 30% to 41% to 73%, indicating that much more can be done to ensure the hundreds of people homeless have access to shelter locally.

traditionally have been identified as a match for permanent supportive housing (individuals experiencing chronic homelessness) and use it as a bridge until longer term options may be identified. This option is available as a COVID-19 prevention measure and is focused on individuals who are particularly vulnerable to the virus if unsheltered. Some of the funding for this program is one-time funding so there are questions around how to ensure those that are currently housed will be able to maintain those placements or transition to PSH when the current funding expires.
GAPS AND NEEDS ANALYSIS

Madera County has a homeless system of care that is aligned with many national best practices and is made up of engaged, committed, and passionate providers and other stakeholders dedicated to preventing and ending homelessness. As a small community that is part of a larger system, many of the services and supports that people experiencing homelessness need are already provided in the County. For example, Madera County is to be commended for the level of engagement and robust services provided for people with behavioral health conditions.

Madera County is challenged, however, by the economic climate in the County, the region, and in California more generally. While availability of affordable housing is lacking throughout every county in California, the absence of affordable housing in Madera County is acute. In addition, there are other gaps in the system that prevent the community from responding as effectively and meaningfully as they could to end homelessness. Looking ahead, the community has the opportunity to build on its strong foundation in a long-lasting way. With an effort focused around key areas, the community will be well positioned to enhance and improve the current system and anticipate and address the challenges ahead. This section provides an overview of the gaps and needs of the current system in Madera County.

Stakeholders, focus group participants, and interviewees identified a number of strengths in Madera County:

- An engaged, multi-sector community of agencies and organizations that work well together.
- A supportive and collaborative CoC partnership with the FMCoC.
- Thoughtful agency leadership and engagement from the County Administrative Office, the Department of Behavioral Health Services, the Department of Public Health, and the Department of Social Services.
- Two-day centers in Madera County provide support to people experiencing homelessness who have mental health conditions to congregate during the day – Hope House and The Mountain Community Wellness Center. Hope House also provides support to youth with mental health conditions in the afternoons.
- Multiple agency and organization engagement in street outreach.
- Policy leaders who recognize the homeless crisis that exists in the region.
- An engaged community of faith-based leaders and volunteers working with people experiencing homelessness.
- Partnership with local law enforcement from the City of Madera, the City of Chowchilla, the County Sheriff, and County Probation.
- A community that has successfully leveraged different state and local funding opportunities to address homelessness.
Using data analysis and a robust stakeholder engagement process, several key gaps and needs were identified. A focused effort on the following areas could help to improve services and further strengthen the efforts to end homelessness in Madera County:

- **Enhanced Prevention and Diversion Assistance**
- **Increased Safe, Affordable Housing**
- **Strengthened Homeless Emergency Response Services**
- **Robust Data Collection and Analysis**
- **Coordination and Communication to Ensure Effective Use of Limited Resources**

**Enhanced prevention and diversion assistance**

Living without stable housing, even briefly, is a traumatizing experience, and many never recover from the physical, emotional, and financial impacts. By preventing homelessness, Madera County can help individuals and families avoid the economic, social, mental, and physical challenges that result from homelessness – often at a much lower cost than it takes to serve people after they lose their housing.

Many people who are experiencing homelessness come from households living on the economic margins who routinely face choices between housing and meeting other basic needs; many are households unable to accumulate a savings cushion. Prevention programs are necessary to counteract this prevalent instability and prevent a housing crisis from escalating further into homelessness. Effective prevention requires having adequate safety net services in place to address needs before they escalate to crises. Prevention requires that systems work together to ensure that individuals are effectively connected to mainstream resources to reduce the risk of homelessness. Many households can fall into homelessness who do not need long term support. Sometimes one-time financial assistance is all someone needs. The
high cost of housing and the level of cost burden people face can see someone have a high medical bill or car repair which can make them get behind in rent or mortgage payments for one-time. Others may experience furlough or lay-off or other work-related reductions of income that are repairable, but leave them needing short-term, one-time assistance.

**Flexible funds** have increasingly been permitted and encouraged as an allowable expense by federal, state, and County funders. Flexible funds can be used for different purposes. They can pay for costs that will result in an immediate solution of a housing crisis. They can bridge the gap while permanent housing is secured. They can cover household needs that will help people keep their housing.

**Diversion** is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing.

**Prevention** is a strategy intended to target people who are at imminent risk of homelessness (whereas diversion usually targets people as they initially enter shelter)

As a result of having so little affordable housing in Madera County compared to the need, and with a RHNA determination that more than 12,000 new affordable housing units are needed in the county over the next ten years, a concerted effort is needed in Madera to prevent additional households from becoming homeless. Prevention programs currently exist within Madera County that are addressing some of this need; however, in stakeholder interviews, focus groups, and meetings with the Housing the Homeless Coalition, the area is under-resourced given the level of need.

There are multiple ways to estimate the potential number of households who could benefit from prevention assistance. One is to look at the number of households experiencing homelessness for the first time. During the 2022 Point-in-Time Count, 80% of the Madera County FMCoC households with children who were living in shelters were experiencing homelessness for the first time. Another way to estimate the number of households who could benefit from prevention assistance is to look at the number of people who are cost burdened. One out of every three households are considered cost burdened in Madera, meaning they are paying more than 30% of their total income toward housing.

“We have a rental assistance fund with CAPMC. More funding would allow us to provide more assistance.”
Furthermore, rates of overcrowding can be a metric for the number of households who could benefit from financial assistance. Historically, Madera County has had some of the highest overcrowding of any county in California (in 2006-2010, it ranked 4\textsuperscript{th} highest in overcrowding, with 10.8% of households overcrowded).\textsuperscript{33} The RHNA for Madera County projecting overcrowding for 2023 -2032 estimated a more moderate amount of overcrowding, at 6.4%, still almost twice the national average of 3%\textsuperscript{34}. The high percent of overcrowding puts families at risk of being evicted for violating rental agreements and/or leases.

While it is difficult to pinpoint the exact dollar amount needed and the exact number of households at risk of homelessness, any increases in funding for prevention and diversion is likely to reduce the number of households who fall into homelessness in the future. The more resources that are available for prevention efforts, the less resources should be needed in the more expensive homeless response system. The United States Interagency Council on Housing (USICH) has prioritized prevention in their recently released strategic plan.\textsuperscript{35}

**INCREASED SAFE, AFFORDABLE HOUSING**

As is the case in many California communities, Madera County lacks the necessary inventory of affordable housing to keep up with demand. Ever rising housing costs rapidly outpace wages, leaving behind few options for affordable living. The selection of housing which is reserved to serve the homeless population is also below the current need. Additional units of dedicated permanent supportive housing are needed to serve the most vulnerable, while investments in affordable housing would benefit both at-risk populations and homeless households supported by rapid rehousing or housing voucher type subsidies.

Permanent housing programs, such as permanent supportive housing (PSH) and rapid rehousing (RRH), are well-established as some of the most cost-effective and successful strategies to address homelessness. These programs offer subsidized housing with the supportive services a household needs to retain that housing and attain long-term stability. Services can include case management, connections to employment and public benefits, and medical, mental health, and substance use treatment as well as transportation, childcare, and life skills. The programs tailor services to the unique needs of each household and successfully support many Madera County residents each year to permanently exit homelessness and regain self-sufficiency. Yet, there are not enough permanent housing options and related supportive services currently available to meet the need in Madera County.

\textsuperscript{33}Percent of Overcrowding, Office of Health Equity, California Department of Public Health.
\textsuperscript{34}Final Regional Housing Need Determination, Madera County, January 26, 2022.
**Affordable Housing**

Affordable housing is needed to sustainably house low-income residents within Madera County for the long term. As the cost of rent has risen faster than wages, much of the county population are financially cost-burdened, paying more than 30% of their income toward rent. Asking rents in the County increased over 3% between 2020 and 2021. Renters in Madera County need to earn over $21.00 per hour, working 40 hours per week, to afford the average monthly asking rent of $1,120 per month to avoid paying more than 30% of their income on housing. This is 1.4 times the minimum wage of $15 per hour (or 40% more per hour). Not only are households paying significant percentages of their rent at greater risk for homelessness, but the lack of affordability in the current housing market makes it virtually impossible for households currently experiencing homelessness to find stable housing. For example, a very-low-income family with a household income of $43,650 per year would need a unit with monthly asking rent of $1,212 to no longer be “cost-burdened.” Traditional housing subsidy programs, such as vouchers or rapid-rehousing assistance, compete for the same limited inventory of affordable units on the market.

The housing that exists in Madera County is skewed toward larger units. While almost 40% of the sheltered population are single individuals or couples who might be best accommodated in smaller units, less than 8% of the housing units available in Madera County are studio or one-bedroom. Housing inventory in Madera County is also largely owner-occupied, leaving only 29% of units potentially available to people renting. Still further reducing the inventory for low-income renters, almost two thirds of rental units are rented for over $1,000 per month. Given these limitations on supply, it is no surprise the rental vacancy rates in Madera run at 3.8%, lower than the California state average of 4.3% and the national average 6.1%

As a county, Madera holds a unique position to influence development of affordable housing units. This can be done through supportive policy, and strong partnership with county planning/zoning dept., local housing developers, the City of Madera Housing Authority, county economic development dept., and other key stakeholders.

---

36 [Madera County Affordable Housing Needs Report 2022], California Housing Partnership.
37 [Selected Housing Characteristics, Madera County], U.S. Census Bureau.
38 Ibid.
39 Ibid.
40 [Final Regional Housing Need Determination], Madera County, January 26, 2022.
Homeless-Dedicated Housing

Homeless-dedicated housing available in Madera County is shared across the entire FMCoC, meaning that local permanent supportive housing (PSH) units available in Madera can be filled through the entire FMCoC Coordinated Entry prioritization list, not just by Madera residents. Madera County residents account for 7% of the homeless population within the FMCoC. Based on the 2022 Housing Inventory Count, roughly 10% of the available PSH beds in FMCoC were within Madera County, only 78% of which were being utilized. More than one in five beds were available but not being used at the time of the Housing Inventory Count (HIC).

Most of the PSH beds available in Madera are dedicated to veterans. Data suggests that there is underuse of local HUD-VASH vouchers, which are exclusively dedicated to veterans experiencing homelessness and account for 44% or more of all PSH beds in Madera County. The good news is that from 2021 to 2022 the number of PSH- beds located within Madera County increased from 83 to 120 total beds with the opening of Shunammite Place. Sixteen additional beds for people with behavioral health problems who are experiencing homelessness are also available at Sugar Pine Village, through the No Place Like Home (NPLH) program. With all the growth, however, the number of PSH beds for people who are not veterans is still insufficient to meet the need.

Madera County residents served by rapid rehousing programs are currently not counted separately from the overall number Types of Housing measured in the Housing Inventory Count (HIC)

Emergency Shelter is any facility with overnight sleeping accommodations, the primary purpose of which is to provide temporary shelter for people experiencing homelessness in general or for specific populations. Shelter may include year-round emergency shelters, winter and warming shelters, navigation centers and transitional housing. These types of shelter have varying hours, lengths of stay, food service, and support services.

Transitional Housing provides temporary housing accommodations and supportive services. While many households benefit most from direct connections to permanent housing programs such as RRH or PSH (which are often more cost-effective over the long term), transitional housing can also be an effective support in the intermediary. Certain subpopulations, such as people fleeing domestic violence and transitional age youth, can meaningfully benefit from a transitional housing environment.

Rapid Rehousing provides rental housing subsidies and tailored supportive services for up to 24-months, with the goal of helping people to transition during that time to more permanent housing.

Permanent Supportive Housing provides long-term housing with intensive supportive services to persons with disabilities. These programs typically target people with extensive experiences of homelessness and multiple vulnerabilities and needs who would not be able to retain housing without significant support.
served by the FMCoC. While it is not possible to quantify the need for rapid rehousing programs in Madera County, we do know that there are only 4 dedicated RRH beds offered in the entire County. The lack of affordable housing throughout all of Madera County limits the ability of rapid rehousing programs to obtain units, as they require available and affordable rental units (unless they are project based RRH). Rapid rehousing programs are typically a best-fit solution for a high percentage of the homeless population who need help with rent and supportive services while they increase their earning potential and become more self-sufficient, able to pay rent in permanent housing within two years. The highly competitive housing market (as exemplified by the low vacancy rate) contributes to difficulty obtaining housing for those who have housing subsidies, such as rapid rehousing (or housing authority and veterans’ administration voucher programs).

**STRENGTHENED HOMELESS EMERGENCY RESPONSE SERVICES**

Ending homelessness for individuals and families who have long been homeless often requires frequent and repeated engagement over time. Outreach resources are available for people experiencing chronic, long-time, unsheltered homelessness in the current system, yet still many people are not getting connected to services and support. Part of the challenge in Madera is that there are many places along the slough and river that are hard to reach to make connections with people experiencing homelessness. In addition, when the County clears encampments along the river and other more public areas, homeless people relocate to even more remote places that are hard to find and provide outreach.

Housing-focused crisis shelters (often known as “emergency shelters”) are an important part of a community’s response to homelessness. While they help people stay safe from the dangers of living outside, they are also a valuable link to permanent housing, especially for people who have been homeless for extended periods of time and might be reluctant to engage in services. The most effective shelters are “housing focused,” meaning that they are low-barrier and tailor their services to support the household with the goal of exiting homelessness. These programs have few preconditions for admittance, such as sobriety, ID, income, etc., and limit the barriers to entry by allowing some flexibility (e.g., entry of partners and pets are allowed, storage for personal belongings are available, families can live together rather than be split by gender, and there is a flexibility of hours whenever possible). The programs typically do not require participation in services as a condition of stay, but instead offer client-focused, voluntary case management working cooperatively with the household to create an action plan to help move them into housing. This work is individualized for each client and offers flexibility with intensity and frequency, recognizing client choice with the focus on assessing barriers to housing and achieving housing stability.

“There are some long-term, hardcore, second generation persons experiencing homelessness in the encampments. It was common to grow up near bass lake without a home and now their children have grown up to be in the same situation.”

“Most individuals are scared to go to Fresno. They have support systems here; this is their home.”
Supply of emergency overnight shelter and related day services do not meet the current volume of need in Madera County and are limited by restrictions on entry and participation criteria. Access to emergency shelter and related supportive services are made more difficult by transportation challenges, and general knowledge of what is available across the area.

A **Housing First/Low Barrier** approach. Housing First is a national best practice that eliminates barriers to housing, ensuring individuals and families can exit homelessness as quickly as possible. Under a Housing First approach, people experiencing homelessness are supported in returning to housing as quickly as possible, often through supportive housing programs that have no pre-requisites, preconditions, or program participation requirements. Housing First does not mean “no rules,” but it does mean no unnecessary rules that could prevent people from entering the program.

The Housing First approach has been extremely successful in reducing the length of time households are homeless, preventing returns to homelessness, and supporting participants’ long-term stability and well-being. Research suggests Housing First program participants are 2.5 times more likely to be housed after 18–24 months than other programs.

**Overnight Emergency Shelter**

Madera County has a significant number of people experiencing long-term homelessness who require intensive engagement and support, yet there is no low-barrier overnight shelter in Madera County. The Madera Rescue Mission has beds for people but requires sobriety and participation in their activities. We heard from many community partners, including people experiencing homelessness, that they would prefer to live outside than go to the Rescue Mission. As a result, Madera County has a relatively large population of people who live outside full-time.

Some residents of the Rescue Mission reported that it was providing a valuable service for them, including providing shelter, wound care, health care, employment services, housing location, etc. Some expressed hope because they were working and saving towards moving on to independence while others expressed concern that they may not be able to find housing opportunities on fixed incomes. Shared housing is one possible solution but matches would have to made carefully to avoid putting either resident at risk (i.e., financial security or sobriety). One identified gap was separate housing for employed residents as their schedules, including early mornings, often conflict with other residents.

“There needs to be a low-barrier place that you can go at any time, at a moment’s notice.”

“The patent answer is ‘send them to the Mission.’ I don’t think the leaders know that the Mission isn’t the answer. That’s all they know. If there was another place, they could go other than the Mission.”

“This is a wonderful place. I appreciate it for what it is. I’m using it as a steppingstone to get where I need to be.”
With only one shelter for individuals and families in Madera County, it is important that the beds that are available be occupied. For Madera, while there were 229 emergency shelter beds available during the 2022 HIC, only 138 beds were being used: a low rate of utilization at only 60%. Almost 100 beds were empty, while at the same time volunteers counted 128 people living in places not meant for human habitation.

In addition to the Rescue Mission, Madera County offers limited non-congregate beds via hotel/motel vouchers for households that are not eligible for the current emergency shelter beds in the community (namely families with children). The hotel/motel vouchers are funded by COVID-relief funds, which are time-limited and not a source of emergency shelter that is sustainable. To continue a hotel/motel voucher program in Madera County, ongoing sustained funding sources will need to be identified.

**Respite Beds**

The Department of Behavioral Health has 12 dedicated beds for people with behavioral health conditions needing respite, located at the Madera Rescue Mission. These beds are funded through the state Mental Health Services Act (MHSA). For people with a substance abuse disorder who are not connected to the Department of Behavioral Health, there are fewer options.

Substance use was highlighted by focus group members as a common factor among the homeless households seen by hospitals, shelters, and emergency response workers in Madera. An estimated 38% of homeless households in Madera have substance abuse concerns as reported during the 2022 PIT count, compared to 21% statewide. Multiple local health organizations provided support to the Madera County Department of Behavioral Health Services who recently applied for a CalAIM, Round 5 BHCIP grant to construct a new, county-owned, Crisis Stabilization Unit for youth and adults and an adult Sobering Center. These two facilities have been identified as current gaps in the Crisis Continuum of Care in Behavioral Health to support the Housing the Homeless efforts and the joint efforts of the Fresno-Madera Continuum of Care.

Still, those households who are not yet ready for recovery need shelter access. Today there are few options for these individuals. Emergency shelter beds which are low barrier, without sobriety requirements or other barriers, are only available as part of the non-congregate programs.

**Day Shelter**

Currently in Madera County, the primary emergency shelter requires residents to leave the premises during the day (with some exceptions) and permits returns only in the late afternoon/early evening. Most individuals experiencing homelessness who are not employed thus need to find other places to go during daytime hours. The disruption can be a significant burden for shelter stayers, and sometimes discourages potential users from occupying the shelter beds at all. Day centers help to bridge the gap of safe places to
stay during shelter off-hours, with the ideal day center located on-site or very close by to overnight shelters, to minimize transportation burdens.

There are two-day centers in Madera County that provide support to people experiencing homelessness who have mental health conditions to congregate during the day – Hope House and The Mountain Community Wellness Center. Hope House limits the hours for adults to mornings, as they provide support to youth with mental health conditions in the afternoon. While both centers offer showers and launder rooms, access is limited to business hours. Both the Wellness Center and Hope House are vital resources in the community and are often cited by law enforcement, faith-based community members, and people experiencing homelessness as important community services. However, they used to be more available to adults. Stakeholders expressed concerns that the limitations on the hours open for adults experiencing homelessness has been a challenge. Funding for the two centers is targeted to people with mental health conditions, which also limits who can use the centers.

For individuals not able to use Hope House, they often have no central location to go during the day, no place to receive supportive services. They often need to travel for comprehensive services, sometimes out of Madera County to Fresno or Merced.

Outreach

Street and encampment outreach teams meet people where they are to provide connections to services. Many people with extensive histories of homelessness are disconnected from the network of services that could help them return to housing. They often have deep-seated trauma and negative experiences with the safety net system that may make them reluctant to engage with providers.

When outreach workers go to where people are living, they can build trust, better understand the circumstances that people are facing, and offer advice and support to help people move to more supportive environments. Outreach specialists use proven engagement techniques, such as Trauma Informed Care, Critical Time Intervention, and Motivational Interviewing, to build relationships of trust and help people connect to services and support they need to find and keep housing.

Madera County has outreach efforts that are ongoing or upcoming. On-the-ground outreach efforts to identify and connect with those experiencing unsheltered homelessness in Madera County are led by Homeless Engagement for Living Program (HELP) Center – a initiative of the Community Action Partnership of Madera County (CAPMC). In addition, the Madera County Department of Behavioral Health (MCDBH) has a mobile crisis care team, called C.A.R.E.S. (Crisis, Assessment, Response, & Evaluation

“We talk about a big open day center where people can go and maybe just hang out and get help, food, have case managers, licensed professionals to help them. Be able to refer them to other resources to get help... We need a day center open to them and be human to them and see where they are at; someone to talk with for the day.”

“We are a small County. There is no centralized source of resources for housing, insurance, or any other benefits.”
Services), which provides 24/7, 365 days county wide coverage in partnership and via contract with Westcare, Inc. that can be called on to provide services wherever people experiencing homelessness are located. Additionally, both Camarena and the Department of Public Health received resources recently to launch their own mobile outreach teams.

The gap that exists is not necessarily in outreach as an idea, but more so in the lack of a coordinated outreach program that engages all the different available outreach resources. Outreach efforts are complicated by the sheer size of the rural Madera County geography. Madera County is composed of two majors’ cities and three large unincorporated areas. The HELP team typically has 1 to 3 full time employees engaged in outreach. Their efforts today focus on known gathering points, such as the river or parking areas. (Thirty-six percent of unsheltered individuals identified during the PIT count were camping in the riverside area known as “The Slough.”) Eighty-eight percent of all outreach contacts made by CAPMC teams were made in the City of Madera, which only encompasses 43% of county residents. For the remainder of the county, additional teams and support for transportation are likely needed to compensate for the scale of the territory.

Local law enforcement also conducts outreach. However, outreach by law enforcement adds unique challenges such as mistrust of police officers and limited police jurisdictions that do not coincide with housing jurisdictions. Law enforcement teams are also currently unable to complete Coordinated Entry assessments. There were also concerns expressed by some persons with lived experienced and other stakeholders about tensions between unhoused individuals and law enforcement that persist. Some felt that law enforcement outreach should include trained, trauma-informed staff and any encampment resolution should include best practice approaches. Additionally, private groups such as faith-based organizations conduct outreach efforts, but they are not always well connected to the housing network and would benefit from collaboration with other housing assistance providers, especially through Coordinated Entry. Stakeholders from faith-based organizations shared that peer-outreach could be an especially effective tool and expressed the need for more information on housing and services to allow for referrals. They also were unaware for the most part about Coordinated Entry and how it worked. Known faith-based organizations include: Fourth Street Church, Valley West Christian Center, and ClearView Outreach who may be good candidates for stronger partnership.

“Law enforcement will arrest you if you are outdoors after 10 [pm] in Chowchilla to get you out…they take you to jail in Madera and you have no way back.”

“Have witnessed law enforcement break up camps in the middle of bad storms. The relationship with law enforcement and those near the rivers up here is hostile.”

“In reality, I wish there was something in place that someone could call with trouble and the first response was not to send law enforcement. You are putting officers and family members and the individual in a bad situation. I wish there was a service to call someone from the County. If it is something violent, then call the police. But let’s not send the cops every time. That’s not a great response.”
The Madera County Department of Behavioral Health C.A.R.E.S. Team provides mobile behavioral health support throughout the county. The MDCDBH also has a partnership with Westcare, Inc. to provide Mental Health Crisis Service and Outreach to people who are homeless that may be experiencing mental health or substance abuse, co-occurring conditions. Today, MDCDBH does not complete Coordinated Entry assessments, but may also be candidates for further training and partnership that may expand the number of unsheltered households connected to long-term housing support.

Local partners engaged in outreach stated that they know of more people experiencing unsheltered homelessness than they have the capacity to assist. It is difficult to assign a specific number to that gap. The data from the FMCoC does not enable to differentiate those in need of outreach specific to Madera County. Further exacerbating the issue is the 2022 encampment clearing that dispersed unsheltered residents, who may be congregating in less known areas where outreach teams are either unfamiliar, unaware, or unable to reach Madera County residents.

**ROBUST DATA COLLECTION AND ANALYSIS**

Sound decision-making and evaluation of outcomes both require access to reliable, valid data. Without access to such data, decision makers do not have the proper basis to make informed choices necessary to guide planning processes, prioritize resources, or evaluate and measure performance in a manner designed to increase the likelihood of preventing or ending homelessness. In addition, key funders—including state and federal governments—rely on data collected through the Point-in-Time count and System Performance Measures, to allocate limited resources. Most importantly, the inability to share real-time data about peoples’ interactions in the homeless system of care can hinder a provider’s ability to coordinate services, make referrals, and assist clients in their efforts to access stable housing.

While the FMCoC has policies and procedures in place for data collection, it is imperative that Madera County develop and implement its own expectations and systems to uphold FMCoC policies and ensure that quality Madera County information is contained within the HMIS. The responsibility extends to every HMIS-participating agency to commit the resources necessary to collect and contribute timely data accurately.

The FMCoC has a dedicated HMIS Lead (housed at the Fresno City and County Housing Authority), responsible for oversight and monitoring of the data collected in HMIS for both counties. The FMCoC also has a Coordinated Entry Lead (Poverello House), that is responsible for managing, staffing, and overseeing the entire Coordinated Entry System for individuals seeking services and housing in both counties. In a single-county CoC, this type of arrangement can function well. But for multi-county CoCs or Balance of State CoCs (where most of the counties in the state share one CoC), there can be challenges in collecting, evaluating, and sharing data that is specific to each county.

Currently the primary participant in HMIS for Madera County is CAPMC. They collect intake data, street outreach data, and data related to the shelters and housing facilities they oversee. They work with the FMCoC HMIS System Administrator. Yet they are one of only two agencies that enter data into the FMCoC HMIS for the entire county of Madera.
The primary challenges for Madera County as a member of a two-county FMCoC include:

- Few Madera County organizations/agencies enter their data about people they house or provide services for directly into the FMCoC’s HMIS (including the largest overnight emergency shelter provider and the HUD VASH system in Madera County). As a result,
  - The County does not have the ability to capture real-time vacancies in shelter or housing in the HMIS system, limiting the referral process.
  - Lack of full participation in HMIS prevents coordination of referrals from street outreach partners, institutions, or other service providers since those referrals are done outside of HMIS.
  - The annual Housing Inventory Count (HIC) and Point-in-Time Count (PIT) data from non-participating providers cannot be checked against a local database.
- Data about Madera County that is entered into HMIS may not be entered in a timely and accurate manner.
- Madera County data in the FMCoC HMIS is blended and not necessarily tracked in a manner that allows the HMIS lead to pull data for only Madera County residents, services, and housing easily or accurately.
  - Housing Inventory Count and Point-in-Time count data may not accurately reflect Madera-specific data because it is combined within the broader Fresno Madera CoC report. In addition, some projects were not included, such as CalWORKs HSP and the No Place Like Home PSH.
  - New options that are available to track metadata within the shared system such as geotagging, address of origin, county of origin etc., are not in place as part of the FMCoC’s standard policies and procedures.
- Geographic element data in HMIS is underutilized, reducing the ability to differentiate Madera County specific data. Aggregate data that is available is not consistent with sub-population data (for example, the total number of people experiencing homelessness in the 2022 PIT count was 278 individuals, but the total number of people in Madera experiencing homelessness by gender adds up to 299 individuals in 2022 data).

Limitations on data make it difficult for Madera County to monitor progress, identify specific needs, and set goals for accountability on housing initiatives. Without Madera-specific data, the County cannot create data visualizations/dashboards for system performance reviews and proactive monitoring. Moreover, the further removed data entry is from real-time – from when and how events occur – the less likely it is to be accurate.

It is important that all stakeholders have a shared commitment to ensuring that Madera County and the FMCoC obtain and preserve good quality data so that they can understand who they serve, whether they are succeeding, how and when to make changes, to ensure compliance with funders, to maintain or increase resources, and to identify real-time vacancies and effectively make referrals and coordinate care.
COORDINATION AND COMMUNICATION TO ENSURE EFFECTIVE USE OF LIMITED RESOURCES

One area where improvement could make a large difference in the effectiveness of the homeless system of care without a large investment of additional resources is coordination and communication within Madera County, between Madera County and the FMCoC, and with the public.

Coordination in Madera County

Within Madera County, there is a core group of agencies and organizations providing emergency shelter, housing, and supportive services. They are engaged, providing needed services, and meeting together and making plans to improve the system. Somehow, these efforts are not connecting to achieve the outcomes and changes the community desires. With no central coordination in the community, it is hard to bring to completion identified tasks. It is also challenging to understand what is happening in real-time, identify where there are opportunities for further collaboration, and assess when additional resources may be needed.

Various organizing bodies in Madera have created many different strategic plans to address homelessness. One of the most common critiques from amongst partners was that there is a lack of follow through on the stated objectives in each of the strategic plans. It is difficult to say who oversees the ultimate outcomes and who is to be held accountable and measure results. Improvements in communication and collaboration among the bodies could help to reduce duplication of efforts and better manage limited resources. Many stakeholders seek an actual coordinator position, some suggest housed in the County Administrative Office (CAO), who can be 100% focused on Madera County’s efforts to prevent and end homelessness.

Another complexity of the large geography of Madera County also extends to issues of jurisdictional protocol. Madera County contains varied governing bodies that sometimes work in silos, with different levels of collaboration, varying degrees of engagement with the homeless system of care etc. Currently law enforcement staff are one of the main outreach providers, whose jurisdictional territories do not align with the borders of CoC and county service geographies. Eligibility criteria for assistance are not consistent throughout programs or jurisdictions. Homeless households are often moving across invisible borders of eligibility. This results in confusion and delays in service, which frustrates both clients and workers in the field. Stakeholders highlighted the lack of protocols among jurisdictions as “a daily
headache.” Transportation across various organizations from outreach locations to day services and night shelters is left to households while support for these necessary trips to access comprehensive service is limited.

The Housing for the Homeless Coalition was created to encourage collaborative projects between the County and the City of Madera. Many stakeholders from across the region attend the meetings, which primarily focus on one single, collaborative project (they are currently collaborating on a Bridge Housing effort). Yet, the monthly meeting might be the only time information is shared across jurisdictions, allowing for better coordination of activities.

Communication, collaboration, and coordination among the jurisdictions of Madera County around policy and procedure for the region would be very helpful. Suggested areas of consideration include outreach engagements, coordinated entry contacts, data tracking by geography, regional funding strategies, and transfers to name a few.

**Coordination with the FMCoC**

For the larger CoC efforts, while some Madera County organizations and agencies attend the FMCoC, there is no consistent regular space for Madera County organizations who provide direct services or front-line support to people experiencing homelessness to meet, discuss approaches, coordinate efforts, or collaborate on what can be presented at the FMCoC meetings.

With a different geography and population, Madera County staff have different resources at their disposal, as well as a different set of challenges. Both counties would benefit from deeper collaboration between direct services providers across the two counties. For example, Fresno County has a well-organized set of 2-3 organizations conducting street outreach, who work together to ensure street outreach is offered broadly and regularly throughout the full county geography. At the same time, Madera County has Behavioral Health, Public Health and their local health center invested in mobile outreach to people experiencing homelessness. Both outreach teams might benefit from meeting quarterly with their counterparts, to ask questions, identify common challenges, and learn from one another.

Some Madera County organizations and agencies that do attend the FMCoC regular board meeting, expressed a sense that there are greater opportunities for collaboration. Some stakeholders shared that they have attended FMCoC meetings but do not feel that Madera has a place there, is recognized for its own individual challenges. They shared that there had not been any effort to include them in activities on behalf of the FMCoC, so they stopped attending meetings. From the FMCoC, there is a lack of participation from Madera County providers, so a perception that Madera County is not invested in the larger FMCoC efforts. An effort to resolve this divide and re-engage would benefit both.
Community Education

Homelessness is growing and there are many myths and misconceptions around why people are homeless and the programs and services that work best in solving the problem. Rising costs of housing, combined with wages that are not keeping pace, are among the main causes of increasing rates of homelessness. A deeper understanding of homelessness and its solutions will strengthen community support for critical next steps, as well as help begin the process of resolving some of the persistent confusion surrounding this issue within the community. The United States Interagency Council on Housing (USICH) has prioritized education on these types of myths in their recently released strategic plan.41

Some stakeholders shared that building a better understanding of the trust needed and supportive services required to support people once they are housed could help the broader community understand the need for longer term, more intensive services for them to transition to stable housing. Feedback provided from the attendees at the faith-based focus group was that while statistics and surveys can be helpful, it is really stories about people that are compelling. They shared that it is important to share with the community the stories of real people to help expand the picture beyond the normal stereotypes. They believe that people often felt compelled to act once they heard true, relevant stories of individuals and families in the community and recommended making that a part of any community education campaign.

One perception that is reportedly held by a variety of stakeholders and community members is that individuals experiencing unsheltered homelessness do not want to be housed or would not accept help, even when it is offered. However, outreach workers and homeless housing and service providers report that, in their experience, the requirements attached to some of the shelter and housing programs, such as sobriety or service participation, can act as a barrier for unsheltered participants, especially those who are chronically homeless and experiencing mental illness. Reducing barriers in housing and creating additional low-barrier opportunities can increase the likelihood of housing many of the currently service resistant unsheltered population. Outreach workers note they work to build trust and place clients with housing challenges utilizing the long-term client-centered principles of harm-reduction and trauma informed care.

In general, community education is needed to 1) ensure all community partners are aware of the breadth of resources and of referral mechanisms within the system to ensure effective and efficient communication and collaboration, and 2) that resource information is available for people at risk of or experiencing homelessness to ensure access to the system. Stakeholders within the homeless system of care are not always aware of the broader scope of what all the partners are doing, especially those who

may not be funded by the CoC like faith-based groups, hospitals, food banks, libraries, etc. However, these groups play an essential part of the system and there is an important opportunity to better communicate about the homeless assistance programs available, how to connect with the homeless response system, and best practice principles in housing programs. Core topics for training and coordination may include Coordinated Entry and Housing First principles, which can also help community partners better understand the causes and solutions to homelessness. Education at the agency level is important so that on the ground staff can more quickly connect those in need to all qualifying services. Perhaps most critically, additional community education is needed through the development of resource and outreach guides so that vulnerable community members know how to connect with assistance, and so that those that outreach on the front lines are well equipped to connect households to services.

Generally, those who are a part of the homeless system of care in Madera County feel positive about local efforts. But most recognize that the efforts lack a coordinated response, for example they don’t have weekly case management meetings to discuss a local by-name list, or other similar formal or informal regular efforts to coordinate and collaborate across organizations.
CONCLUSION

There is a tremendous amount of work happening throughout Madera County to prevent and end homelessness. Through the gaps analysis process, strengths, and achievements, as well as potential areas for growth, have been identified. Five key opportunities for improvement can guide the next step, which is to develop a detailed, action-oriented set of tailored strategies and action steps that can:

- Enhance Prevention and Diversion Assistance
- Increase Safe, Affordable Housing
- Strengthen Homeless Emergency Response Services
- Engage in Robust Data Collection and Analysis
- Coordinate and Communicate to Ensure Effective Use of Limited Resources

In each of the focus areas, the community will be able to consider short-, medium-, and long-term solutions to adopt that enhance existing efforts. As the process moves forward, Madera County can develop an action plan to build out the programs, services, and systems changes presented in this analysis.

Not all the proposed solutions can be implemented at once and each has differing levels of anticipated effort and impact. Additionally, many of these recommendations build off existing programs and resources or current efforts to improve the system while others will require new resources or creative solutions. By working together to identify the most promising and timely solutions and match resources and partners to those efforts, the county can begin to lay the foundation for future success.

At this time, the region can and should reflect on the great work that has already occurred in the community over the past ten years and come together in this moment to consider action steps to better prevent and reduce homelessness and preserve the quality of life in the Madera County for all residents moving forward.
APPENDIX A: GLOSSARY OF TERMS

At risk of homelessness is a status given to individuals and their families who have unstable housing and inadequate income and resources.42

Behavioral Health describes the connection between a person’s behaviors and the health and well-being of the body and mind.43

Bridge housing aims to immediately transition vulnerable clients out of homelessness to provide a stable experience that can facilitate placement into permanent housing.

Case management includes assessment, planning, facilitation, care coordination, evaluation and advocacy with people experiencing homelessness. Staff work with individuals and families to address their comprehensive needs to help them exit homelessness and stay housed.

Chronically Homeless is when a person has been homeless for at least a year, either 12 months consecutively or over the course of at least 4 separate occasions in the past 3 years. To be chronically homeless, the individual or head of household must also have a disability.

Continuum of Care (CoC) is the group organized to carry out the responsibilities prescribed in the CoC Program Interim Rule44 for a defined geographic area. A CoC is composed of representatives of organizations including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless Veterans, and homeless and formerly homeless persons. Responsibilities of a CoC include operating the CoC, designating and operating an HMIS, planning for the CoC (including coordinating the implementation of a housing and service system within its geographic area that meets the needs of the individuals and families who experience homelessness there), and designing and implementing the process associated with applying for CoC Program funds.

CoC Program is designed to promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and state and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.

42 See 24 C.F.R. § 576.2 for complete definition of “at risk of homelessness” under the Emergency Solutions Grant Program.
43 CDC, The Critical Need for a Population Health Approach: Addressing the Nation’s Behavioral Health During the COVID-19 Pandemic and Beyond. Available at: https://www.cdc.gov/pcd/issues/2020/20_0261.htm
44 CoC Interim Rule, https://www.hudexchange.info/resource/2033/hearth-coc-program-interim-rule/
**CoC Program Interim Rule** focuses on regulatory implementation of the CoC Program, including the CoC planning process. The CoC Program was created through the McKinney-Vento Homeless Assistance Act as amended by the HEARTH Act of 2009.\(^{45}\)

**Coordinated Entry (CE) or Coordinated Entry System (CES)** provides a centralized approach to connect the region’s most vulnerable homeless residents to housing through a single community-wide assessment tool and program matching system. Bright Point is the coordinator for the local CES.

**Cost burden** is the ratio of housing costs to household income. For renters, housing cost is gross rent (contract rent plus utilities). For owners, housing cost is "select monthly owner costs," which includes mortgage payment, utilities, association fees, insurance, and real estate taxes.

**Day center or day services** offer showers, internet access, case management, housing navigation, and other supportive services during traditional daytime hours. In most cases these services are free.

**Diversion** is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing.

**Emergency Housing Voucher (EHV)** is a program available through the American Rescue Plan Act (ARPA). Through EHV, HUD is providing 70,000 housing choice vouchers to local Public Housing Authorities (PHAs) to assist individuals and families who are homeless, at-risk of homelessness, fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, or were recently homeless or have a high risk of housing instability.

**Emergency Shelter** is any facility with overnight sleeping accommodations, the primary purpose of which is to provide temporary shelter for people experiencing homelessness in general or for specific populations. Shelter may include year-round emergency shelters, winter and warming shelters, navigation centers and transitional housing. These types of shelter have varying hours, lengths of stay, food service, and support services.

**Emergency Solutions Grants (ESG)** provides funds to assist people to quickly regain stability in permanent housing after experiencing a housing crisis and/or homelessness.

**Federal Poverty Guidelines** are issued each year by the federal Department of Health and Human Services. The guidelines are a simplification of the federal poverty thresholds and are used to determine financial eligibility for certain federal programs.

**Homeless** is defined by HUD in four categories:

---

\(^{45}\) Id.
individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who resided in an emergency shelter, or a place not meant for human habitation and who is exiting an institution where he or she temporarily resided;

(2) individuals and families who will imminently lose their primary nighttime residence;

(3) unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; and

(4) individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

**Homeless Management Information System (HMIS)** is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

**Homeless student** is defined under the McKinney-Vento Act as a child without a regular adequate residence, which includes any students living in shelters, in substandard housing, doubled up with friends or relatives because they have no other place to go and cannot afford a home. The other living arrangements included are single room hotels, cars, parks, and public places.

**Homeless system of care** is another way of describing the Continuum of Care (CoC) and the network of partners who come together to work to support people experiencing homelessness or at risk of homelessness.

**Housing and Urban Development (HUD), U.S. Department of**, is the federal agency responsible for national policy and programs that address housing needs, improve and develop communities, and enforce fair housing laws.

**Housing Choice Vouchers (HCVs), formerly known as the Section 8 program**, are long-term rental subsidies funded by HUD and administered by Public Housing Authorities that can be used to help pay for rent.

**Housing First** is a well-accepted, national, evidenced-based best practice that eliminates barriers to housing, ensuring individuals and families can exit homelessness as quickly as possible. Housing First focuses on connecting households experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or the exclusion of pets or partners. Supportive services are offered on a voluntary basis to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry.46

---

46 *What Housing First Really Means*, National Alliance to End Homelessness (NAEH).
Housing-focused shelter (also sometimes called “navigation centers”) help people connect long-term solutions to homelessness and address the barriers that keep them from becoming housed. The goal is to help people exit homelessness as rapidly as possible. Once housed, people can work on the underlying challenges that undermine their stability. Housing-Focused Shelters typically offer: admissions policies that screen-in (not screen out) households, and welcome pets, partners, and possessions; minimal rules and restrictions that focus on safety (e.g., no weapons) and ability for people to come and go, with 24-hour operations; client-centered services tailored to support a household’s ability to exit homelessness (e.g., job training, benefits enrollment); physical layout and aesthetics that include community spaces, outdoor spaces for pets, storage for possessions, mixed-gender dormitories that allow partners to request beds next to one another, and other design elements that promote a welcoming environment; staff with cultural competencies who treat residents with respect and dignity and caseloads that are kept small enough for staff to spend adequate time with each client; and co-location of benefits eligibility workers, health care, Department of Public Health, and other services. Partnerships with programs such as meals-on-wheels can assist with providing food.

Housing Inventory Count (HIC) is conducted annually to collect information about how many units of housing in the region are active and reserved for people experiencing homelessness. This includes Emergency Shelter, Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing. To be included in the HIC count, the units must be reserved for people experiencing homelessness. In addition, to be included on the HIC, any Rapid Re-Housing units must have been actively in use by a particular client on the night of the count – subsidies that are available but are not currently being used to pay rental assistance on a particular apartment are not included in the count.

Low-barrier shelters are emergency shelters that have removed most requirements/obstacles for entry into the program so that households are more likely go indoors to connect to services rather than stay on the street. For example, unhoused residents are allowed to bring their pets and possessions, to live with their partners, and do not have to exit the shelter each morning. They are not expected to abstain from using alcohol or other drugs, so long as they do not engage in these activities in common areas of the shelter and are respectful of other residents and staff.

McKinney-Vento Act is a federal statute that has a more expansive definition of homelessness than the HUD definition. The Act requires schools to track students experiencing homelessness. For public education programs up through high school, homelessness includes people experiencing homelessness under the HUD definition, but also includes youth who are couch surfing or doubled-up (e.g., with multiple families sharing the same space).

Motivational Interviewing is a client-centered, evidence-based approach used by direct service providers working with people experiencing homelessness. It allows individuals to direct their own path toward the change they seek, rather than trying to convince them of what they need to do. The provider builds trust, listens, and then acts as a guide to help the client to identify their own personal next steps.
People with lived experience is a term used to refer to people who have lived through the experience of homelessness and have first-hand knowledge of what it feels like to live unsheltered and/or to move through the homeless system of care.

Point-in-Time (PIT) count is a biennial process required of CoCs by HUD to count the number of people experiencing homelessness on a single night in January. The PIT count provides a snapshot of data available on the size and characteristics of the homeless population in a CoC over time.

Permanent Supportive Housing (PSH) provides long-term housing with intensive supportive services to persons with disabilities. These programs typically target people with extensive experiences of homelessness and multiple vulnerabilities and needs who would not be able to retain housing without significant support.

Prevention is a strategy intended to target people who are at imminent risk of homelessness (whereas diversion usually targets people as they are initially trying to enter shelter).

Rapid Rehousing (RRH) provides rental housing subsidies and tailored supportive services for up to 24-months, with the goal of helping people to transition during that time to more permanent housing.

Shared housing is a living arrangement between two unrelated people who choose to live together to take advantage of the mutual benefits it offers. Families, students, young adults, seniors, and Veterans have been using this arrangement for generations. It is now recognized as a viable option for people exiting homelessness.

Street outreach involves multi-disciplinary teams who work on the streets or in encampments to engage with people experiencing homelessness who may be disconnected or alienated from services and supports that are offered at an agency.

Supportive services include assistance applying for benefits, mental health and substance use services, outpatient health services, information and referral services, child care, education, life skills training, employment assistance and job training, housing search and counseling services, legal services, outreach services, transportation, food assistance, risk assessment and safety planning (particularly for individuals and families experiencing domestic violence), and case management services such as counseling, finding and coordinating services, and monitoring and evaluating progress in a program.

Transitional Housing (TH) provides temporary housing accommodations and supportive services. While many households benefit most from direct connections to permanent housing programs such as RRH or PSH (which are often more cost-effective over the long term), transitional housing can also be an effective support in the intermediary. Certain subpopulations, such as people fleeing domestic violence and transitional age youth, can meaningfully benefit from a transitional housing environment.

Trauma-informed care is a practice that focuses on understanding and compassion, especially in response to trauma. The practice utilizes tools that empower people to work toward stability. It recognizes a wide
range of trauma that can impact people experiencing homelessness; physical, psychological, social, and emotional trauma. It emphasizes the safety of both clients and providers.

**U.S. Census Bureau** conducts a demographic survey that measures income, poverty, education, health insurance coverage, housing quality, crime victimization, computer usage, and many other subjects. The U.S. Census data helps to understand the overall composition and conditions in each community.