

California State Assembly
HOUSING AND COMMUNITY DEVELOPMENT
AND HUMAN SERVICES



ASSEMBLY MEMBERS CHIU AND REYES
CHAIRS

Joint Informational Hearing

Wednesday, January 23, 2019
9 a.m. – State Capitol, Room 126

Homelessness in California: Federal, State, and Local Responses

BACKGROUND PAPER

Homelessness in California

California is facing a homelessness and affordable housing crisis. In 2018, on a single night in January, 129,972 people experienced homelessness in California. California has 24% of the people in the nation experiencing homelessness. Nearly half of all unsheltered people in the country were in California. Although the number of people experiencing homelessness decreased slightly since 2017, the overall number of people experiencing homelessness has risen over five percent since 2010.

The homelessness crisis is driven by the lack of affordable rental housing for lower income people. In the current market, 2.2 million extremely low-income and very low-income renter households are competing for 664,000 affordable rental units. Of the six million renter households in the state, 1.7 million are paying more than 50% of their income towards rent. The National Low Income Housing Coalition estimates that the state needs an additional 1.5 million housing units affordable to very-low income Californians.

Continuums of Care and Point in Time Counts

The number of people experiencing homelessness each year is determined by a point in time count (PIT) conducted on one night in January, by local community Continuum of Care (CoCs) (local collaborative bodies led by a county or non-profit organization, and in a few cases a city). The PIT includes people experiencing homelessness who are “sheltered” – living in temporary shelters – and those who are “unsheltered” living out in the open. The PIT is required by the U.S. Department of Housing and Urban Development (HUD) as a condition of receiving federal

funding. The PIT has limitations: it is conducted on one night of the year so it does not capture those people who cycle in and out of homelessness; it does not include people who are staying in a temporary situation; and, CoCs use different methodology to conduct their PIT, making it harder to compare data across the state.

Breakdown of homeless PIT numbers by sub-populations in California:

- 129,972 – Total people experiencing homelessness;
- 89,543 – Unsheltered people experiencing homelessness;
- 109,008 – Individuals experiencing homelessness;
- 20,964 – Families with children experiencing homelessness;
- 12,396 – Unaccompanied, youth experiencing homelessness;
- 32,668 – Individuals experiencing chronic homelessness; and,
- 10,836 – Veterans experiencing homelessness.

Homelessness across sub-populations

While certain populations, including veterans, families, and unaccompanied youth, often face higher rates of homelessness compared to the population at large, the conditions and circumstances of homelessness can vary for each of these groups, as can the services and supports that are most useful to them.

Veterans

Veterans experiencing homelessness, according to HUD's December 2018 Annual Homelessness Assessment Report to Congress, accounted for 37,878 individuals experiencing homelessness on a single night in January 2018. Of those individuals, 29% (10,836 veterans) resided in California.ⁱ According to the National Coalition for Homeless Veterans, the nation's veterans who experience homelessness are predominantly male (approximately 91% of the population), single, living in urban settings, and often suffering from mental illness, alcohol, and/or substance use disorders.ⁱⁱ While homelessness is caused by multiple, complex factors, veterans who have experienced post-traumatic stress disorder and/or substance use disorders have been found to be more at risk of experiencing homelessness, especially when those individuals lack a support network, or have difficulty obtaining employment in the civilian workforce.ⁱⁱⁱ According to HUD's January 2018 point-in-time count, 62% of veterans experiencing homelessness resided in sheltered locations while 38% resided in places not suitable for human habitation; veterans accounted for a higher percent of adults in sheltered locations (9.1%) than adults in unsheltered locations (7.9%).

Families

Homelessness looks different when it affects families with children, often consisting of young, single mothers with young children^{iv}; families with children, according to HUD, accounted for

180,000 individuals experiencing homelessness in 2018.^v Families with children experience homelessness for a number of reasons, including an inability to afford housing or conflicts with other family members. In California, 20,964 families experienced homelessness. According to HUD, 91% of families with children experiencing homelessness in the United States (164,023 individuals) in 2018 were residing in sheltered locations, and 16,390 individuals in families with children were counted in unsheltered locations, such as on the streets or in a car.

Survivors of domestic violence

For many, domestic violence can be an immediate cause of homelessness.^{vi} Oftentimes the primary concern of an individual fleeing domestic violence is safety; as such, survivors of domestic violence frequently seek refuge in transitional housing programs or even emergency shelters. On a single night in 2017, homeless services providers had more than 55,000 beds set aside for survivors of domestic violence.^{vii} Depending on the nature of the domestic violence, survivors may be in need of short- or long-term rental assistance, as well as supportive services to address trauma.

Seniors

Studies have shown that the number of seniors experiencing homelessness is also on the rise, with the number of sheltered elderly individuals increasing by 48.2% between 2007 and 2016. In 2010, seniors made up 4.1% of the nation's population experiencing homelessness; this percentage grew to 7% in 2016.^{viii} Though Social Security, Medicare, and Medicaid provide supports and services to seniors, not all seniors are able to access social safety net programs for which they may be eligible. Seniors often live on fixed incomes; faced with rising costs of housing and medical care, many seniors are forced onto the streets. And while shelters exist to serve individuals experiencing homelessness, facilities are often not equipped to provide the specialized care that seniors in need of medical care often require. Due to increased vulnerability as a result of their age and accompanying medical conditions, seniors experiencing homelessness are often susceptible to victimization.^{ix}

Unaccompanied youth

A youth experiencing homelessness is defined as a minor younger than 18 or a young adult between 18 and 24 years old who is living independently without shelter.^x On a single night in January 2018, there were approximately 36,361 unaccompanied youth experiencing homelessness under the age of 25, which represents between 7% and 10% of people experiencing homelessness as individuals.^{xi} Homelessness among youth differs from homelessness among adults and families with children, and can often include sleeping on the streets, living in cars, living in shelters, or couch surfing – which refers to the practice of moving between temporary living arrangements, often a friend or family member's couch, without a secure place to live. One in 30 adolescent minors between ages 13 and 17 experiences homelessness in a year, and roughly 25% involves couch surfing only.^{xii} Due to increased susceptibility to exploitation and violence, youth experiencing homelessness may develop substance use issues or engage in survival sex in order to find shelter or food.

Students

Additionally, students, particularly those working towards obtaining higher education, face similar issues of housing insecurity. According to a 2018 study, 10.9% of California State

University students reported experiencing homelessness one or more times over the course of the preceding 12 months. Of those students surveyed, 18% of those who had experienced homelessness identified as Black/African-American and first-generation college attendees. Reports also indicate that 45% of students throughout the nation reported housing insecurity.^{xiii}

LGBTQ youth

Recent studies have also demonstrated that youth who identify as lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ) are 120% more likely to experience homelessness than non-LGBTQ youth, and data show that up to 40% of the population of youth experiencing homelessness identifies as LGBTQ.^{xiv} While familial conflict has been reported as the most common cause of all youth homelessness, LGBTQ youth cite familial rejection of their gender identity as a primary cause of homelessness.^{xv} As a result, services and supports for LGBTQ youth tend to focus on housing and identity-related supports to address the trauma of familial rejection and homelessness.

Urban vs. rural homelessness

Perceptions of homelessness often involve individuals living on the streets, beneath freeway overpasses, or in temporary or emergency shelters. However, the conditions and characteristics of homelessness not only vary across subpopulations, they also vary geographically, particularly when contrasting urban settings to rural ones. Individuals and families in rural areas often do not experience homelessness in the same way that their counterparts located in urban and suburban areas do. Rather than living on the streets or in shelters, rural homelessness can frequently take the form of individuals or families moving between substandard, overcrowded, and/or cost-burdened housing situations, or moving in with friends or relatives. This may primarily be due to the presence of familial networks, and a lack of service providers and supports, such as shortage of affordable housing, inadequate mental health and substance abuse services, and a lack of support for victims of domestic violence.^{xvi}

Impacts of homelessness

Homelessness has been correlated with a number of negative effects that can, in turn, further hinder individuals' and families' ability to secure stable housing. According to a 2017 article in *The Journal of Law, Medicine and Ethics*:

“Poor health is simultaneously a cause and consequence of homelessness. The experience of homelessness leads to new health conditions, exacerbates existing ones, and complicates treatment options. Consequently, homeless people have high rates of chronic disease and acute illnesses, often associated with, or exacerbated by, their living situations. A considerable amount of published research on the health status and conditions of homeless persons also shows that they have a broad range of mental health and substance use needs. Greater exposure to violence, malnutrition, extreme weather, and criminal charges are additional risk factors for homeless persons, contributing to poor health outcomes and premature deaths.”^{xvii}

The conditions of homelessness can themselves make it more difficult to exit homelessness by creating barriers to the resources often necessary to obtaining income through training,

education, and employment (barriers can include limited access to transportation, computers and printers, work-appropriate clothing, facilities for showering or bathing, and the like). Lack of recent and consistent rental or other housing history can make it more difficult to obtain housing. Additionally, a number of local jurisdictions have adopted laws that create crimes related to homelessness. These laws – including bans on camping in public, panhandling in public, loitering, sitting or lying down in certain public locations, and sleeping in cars – can make individuals experiencing homelessness more vulnerable to arrest, and therefore more susceptible to fines, jail time, and possession of a criminal record.

Some of the sub-populations discussed above can be at particular risk of certain negative impacts of homelessness. For example, youth experiencing homelessness have been found to be at greater risk of commercial sexual exploitation and other forms of victimization, with LGBTQ youth facing higher rates than their heterosexual and cisgender counterparts.

Approaches to addressing homelessness

Housing First

Housing First is an approach to homelessness that prioritizes moving people quickly into permanent, affordable housing without precondition and then providing supportive services in order to help people avoid returning to homelessness. Housing First is premised on the idea that housing should not be denied to anyone, even if they are abusing alcohol or other substances. Supportive services are offered to maximize housing stability and prevent returns to homelessness, as opposed to addressing predetermined treatment goals prior to providing housing. Housing First has been shown to reduce the overall local costs incurred when localities provide social services to people where they are, rather than allowing them to continue to cycle through emergency rooms, jails, and treatment centers.

The federal government has moved to a Housing First model over the last decade that prioritizes permanent supportive housing. Chronic homelessness in the nation decreased by 27% between 2010-16 after our federal response adopted the Housing First model. California embraced a Housing First model in 2015. SB 1380 (Mitchell), Chapter 847, Statutes of 2016, created the Homeless Coordinating and Financing Council to coordinate the state's response to homelessness and required all state agencies or departments that operate programs that provide housing or housing-related services to people experiencing homelessness or at risk of homelessness to adopt guidelines and regulations to include Housing First policies.

Emergency shelters, crisis services and navigation centers

Emergency shelters and crisis services help people meet immediate survival needs by providing food, shelter, clothing, and hygiene services while connecting them to stable housing. In recent years, some local jurisdictions have opened navigation centers as a response to homelessness. In San Francisco, the navigation centers are designed to shelter residents experiencing long-term homelessness and differ from a traditional shelter in that they have few barriers to entry and intensive case management services.

Rapid re-housing

Rapid re-housing is a housing model designed to provide temporary housing assistance to people experiencing homelessness by moving them quickly out of homelessness and into permanent housing. Rapid re-housing is provided through short-term intervention to pay housing expenses – rental arrears, ongoing rent, and moving costs – and case management focused on housing stability. Rapid re-housing is a relatively new response to homelessness that became more prominent during the Great Recession. A study conducted by the Urban Institute found that rapid re-housing is a successful intervention for families. It has low barriers to entry, high placement rates, and low rates of return to shelter. However, rapid re-housing does not solve long-term housing affordability problems. After families exit rapid re-housing, many experience high rates of residential instability. Many move again or double up within a year and face challenges paying for rent and household necessities.

Permanent supportive housing:

Decades of research show that supportive housing with a Housing First requirement – a stable, affordable place to live with no limit on that stay, along with services that promote housing stability – ends homelessness among people who experience chronic homelessness. Supportive housing can lower public health costs and improve property values, and decreases recidivism in our local jails and state prisons. For these reasons, the state has invested millions of dollars in leveraging federal and local dollars to create more supportive housing.

Capacity building:

Capacity building at the local level is an important activity that helps to coordinate and improve the local response to homelessness. State funding can be used to improve local coordinated entry systems, develop homeless plans, and collect and analyze data.

Federal level – key structures and programs

Federal programs for those experiencing or at risk of homelessness generally are designed to provide housing assistance and other services such as health care, job training, or substance abuse treatment. The Departments of Health and Human Services (HHS), HUD, and Veterans Affairs (VA) are responsible for the majority of programs. HUD is the primary agency providing funding for housing, such as emergency shelters, permanent housing, and transitional housing. In addition, HUD collects data on homelessness in part to assist with service planning on the federal level. The Homeless Management Information System (HMIS) is a computerized data collection tool specifically designed to capture client-level, system-wide information over time on the characteristics and services needs of men, women and children experiencing homelessness. HMIS allows the aggregation of client-level data across homeless service agencies to generate unduplicated counts and service patterns of clients served. CoCs are required to have HMIS system with the capacity to collect unduplicated counts of individuals and families experiencing homelessness.

The U.S. Interagency Council on Homelessness is required to coordinate the federal response to homelessness and has taken several steps to coordinate efforts and promote initiatives across

federal agencies, including developing a strategic plan and criteria and benchmarks for ending homelessness, including veteran homelessness and chronic homelessness.

State-level efforts to address homelessness

A number of efforts aimed at preventing and addressing homelessness are already underway in California. These efforts vary rather widely, with differing characteristics related to: administering department/agency; eligibility requirements; populations served; focus on prevention, amelioration, and/or long-term supports and services; type of supports and services offered; and others. A document compiled by the California Homeless Coordinating and Financing Council, entitled “California State Homelessness Funding Programs” (see accompanying document), provides a table describing state homelessness programs. Below, a few key programs are highlighted.

Programs administered by the Department of Housing and Community Development (HCD)

- The ***No Place Like Home*** program provides funding to developers to acquire, design, construct, rehabilitate, or preserve permanent supportive housing for persons who are experiencing homelessness, chronic homelessness, or who are at risk of chronic homelessness, and who are in need of mental health services.
- The ***California Emergency Solutions Housing Program (CESH)*** provides funding to local CoCs to engage individuals and families experiencing homelessness who are living on the street, rapidly re-house individuals and families experiencing homelessness, help operate and provide essential services in emergency shelters for individuals and families experiencing homelessness, and prevent individuals and families from becoming homeless.
- The ***Housing for a Healthy California (HHC)*** program provides grants to developers and/or counties to create supportive housing for Medi-Cal recipients experiencing chronic homelessness. Grants can be used for long-term rental assistance, capital and operating costs, and/or capitalized operating reserves. The health care costs of individuals receiving housing will be tracked to determine the impact of supportive housing on health care costs.

One-time funding

The ***Homeless Emergency Aid Program (HEAP)*** administered by the Business, Consumer Services, and Housing Agency provides localities with flexible block grant funds to address their immediate homelessness challenges. To qualify to receive funds, a city, county or joint powers authority must declare a shelter crisis and a CoC must demonstrate collaboration with the city and county. Funding can be used for emergency housing vouchers, rapid re-housing, construction of emergency shelters, among other uses.

The ***Homeless Emergency Aid Block Grants*** provide \$500 million in one-time funding to enable local governments to respond to homelessness. Allocations are as follows:

- \$250 million to Continuums of Care based on 2017 homeless PIT count;
- \$150 million direct allocation to a city or city that is also a county with a population of 330,000 or more as of January 1, 2018; and,
- \$100 million to Continuums of Care based on their percentage of the statewide 2017 population experiencing homelessness.

Programs administered by the California Department of Social Services

The California Department of Social Services (CDSS) administers a number of programs that provide supports and services to low-income individuals and families. Some of these programs – like California Work Opportunity and Responsibility to Kids (CalWORKs) and Supplemental Security Income/State Supplemental Payment (SSI/SSP) – provide cash aid that can supplement household incomes and, as such, these programs likely operate as de facto homelessness prevention programs for a number of individuals and families by helping them to afford housing costs that otherwise might be difficult to cover. Additionally, CDSS oversees five main programs that specifically address the prevention and/or amelioration of homelessness, and serve families who receive CalWORKs, families involved with the child welfare services system, individuals with disabilities, and clients of the Adult Protective Services (APS) system. These programs are described in further detail below:

- The ***CalWORKs Homeless Assistance*** program can provide temporary and/or permanent assistance payments once per year to eligible families who receive CalWORKs. Generally, families are eligible if they are receiving or eligible for CalWORKs, are experiencing homelessness or have received a “pay rent or quit” notice, and possess under \$100 in resources. (There are certain exceptions to the once-per-year eligibility for homeless assistance including, among other specified circumstances, situations involving domestic violence and natural disasters.) Assistance under this program can include temporary and permanent benefits, and families can be eligible for both within the same year, provided the assistance is for the same instance of homelessness. Temporary assistance is offered through payments for temporary lodging costs for up to 16 consecutive days per year (with exceptions, as described above) in the amount of \$85 per day for a family with up to four members and another \$15 per day for each additional family member, up to a maximum of \$145 per day. Permanent homeless assistance can help families secure housing or avoid eviction by offering either security deposit and first month’s rent or two months of rent arrearages, provided such rent does not exceed 80% of a family’s total monthly household income.
- The ***CalWORKs Housing Support Program*** offers assistance with obtaining permanent housing and wrap-around supports to CalWORKs families who are experiencing homelessness or housing instability. This program was established by the Human Services Trailer Bill for the 2014-15 Budget^{xviii} and is currently operated in 52 counties. While these

counties have some flexibility in determining eligibility criteria, generally, families are eligible if they are receiving CalWORKs and meet the program's definition of homeless, meaning the family either lacks a fixed or regular nighttime residence (either living in a temporary shelter or a place not designed for regular sleeping accommodation) or the family is in receipt of a court-ordered judgment for eviction. The CalWORKs Housing Support Program offers financial assistance and supportive services which can include, among other things: assistance with rent, security deposits, utility payments, and moving costs; hotel and motel vouchers; case management; housing outreach and placement; legal services; and credit repair. Counties have some latitude to design programs responsive to their clients' and communities' needs, but must use evidence-based models and approaches and must collaborate with their local CoCs. Beginning in July this year, per the requirements of SB 1380 (Mitchell), Chapter 847, Statutes of 2016, counties must join other agencies and entities administering programs in existence from to July 1, 2017, in incorporating the key components of Housing First into their programs, connecting individuals and families experiencing homelessness to permanent housing as quickly as possible, and not making such housing contingent upon participation in services.

- The ***Bringing Families Home*** program is designed to assist children and families involved with the child welfare services system by: reducing the number of such families experiencing homelessness, increasing family reunification, and preventing foster care placements. This program was established by the Human Services Trailer Bill for the 2016-17 Budget^{xix}, and is state-funded with the requirement of a dollar-for-dollar county match; the Budget Act of 2016 appropriated \$10 million (General Fund) to fund the program over the three-year period of July 1, 2016, through June 30, 2019. Funds are currently allocated by CDSS to 12 county child welfare agencies.^{xx} Families are eligible if they: 1) have an open family reunification or family maintenance case with child welfare services; and, 2) are experiencing homelessness or housing instability. Priority is given first to families experiencing homelessness who are seeking reunification, next to families experiencing homelessness who have a family maintenance case and families experiencing housing instability who are seeking reunification, and finally to families experiencing housing instability who have a family maintenance case. The Bringing Families Home program uses evidence-based models and a Housing First approach, and relies on collaboration and coordination with homeless programs, child welfare services, and juvenile dependency courts. The type of housing interventions provided are tailored to meet a family's specific level of need; supports include an assessment of those needs, assistance with housing navigation or search, housing-related financial assistance, and housing stabilization services.
- The ***Housing and Disability Advocacy Program (HDAP)*** offers individuals with disabilities who are experiencing homelessness assistance in applying for disability benefit programs (including SSI/SSP) along with housing supports. HDAP, like Bringing Families Home, was established by the Human Services Trailer Bill for the 2016-17 Budget^{xxi}; the Budget Act of 2017 appropriated \$43 million (General Fund) to fund the program over the three-year period of July 1, 2017, through June 30, 2020.^{xxii} A dollar-for-dollar county match is required; CDSS allocated HDAP funding to 39 counties. Individuals with disabilities who are experiencing homelessness are eligible for HDAP services; highest priority must be given to individuals who are experiencing chronic homelessness or who rely the most heavily on state- and county-funded services. HDAP services must include four required core

components: outreach, case management, disability advocacy, and housing assistance. Participating counties provide programs that are tailored to the needs of their communities, and that utilize a Housing First approach.

- The *Home Safe* program aims to address the needs of Adult Protective Services (APS) clients who are experiencing, or at risk of experiencing, homelessness due to abuse, neglect, or financial exploitation. Home Safe was established by the Human Services Trailer Bill for the 2018-19 Budget^{xxiii}; the Budget Act of 2018 appropriated \$15 million (General Fund) to fund the program, and an evaluation of the program, over the three-year period of July 1, 2018, through June 30, 2021. Eligibility for Home Safe requires individuals to be at risk of homelessness or to have recently entered into an experience of homelessness and to need supports and services related to housing stability due to elder or dependent adult abuse, neglect, or financial exploitation; those individuals who are at risk of homelessness will be prioritized for Home Safe services. CDSS reports that allocation of Home Safe program funds to applicant tribes and county welfare departments will likely take place early this year.

Land use: Siting emergency shelters and permanent supportive housing

The most significant and universal need that must be addressed to end homelessness is the lack of safe, stable, and affordable housing. Non-profit developers face local opposition to permanent supportive housing which often can kill a project and or delay it by making it so costly it is infeasible. Local governments trying to site emergency shelters face vociferous local neighborhood opposition. Some local governments are proactively expediting production of permanent supportive housing by streamlining the approval process. In 2017, the City of Los Angeles passed an ordinance requiring that permanent supportive housing projects in which 50% of the units are restricted to people experiencing homelessness be considered a use by right. Housing that is a use by right must be approved through a ministerial process and is not subject to any discretionary actions. Projects reviewed ministerially require only an administrative review designed to ensure that they are consistent with existing general plan and zoning rules, as well as meet standards for building quality, health, and safety. A local neighborhood group has challenged the ordinance on the basis that the city did not complete the proper (CEQA) analysis on the measure.

Recently signed legislation, streamlined or expedited local approval of permanent supportive housing and emergency shelters. Last year, AB 2162 (Chiu), Chapter 753, Statutes 2018, required that 100% affordable housing projects in which 25% of the units are restricted to supportive housing be approved by right. AB 932 (Ting), Chapter 786, Statutes of 2017, allows the cities of Berkeley, Emeryville, Oakland, San Francisco, San Jose, Los Angeles, and San Diego, and the County of Santa Clara to declare a shelter crisis and adopt an ordinance for expedited approval of emergency shelters on city-owned land. The ordinance must include building standards that HCD reviews and approves. During the shelter crisis all zoning, planning, health, housing and safety standards, and procedures are suspended for emergency shelters, provided that the city has adopted and ensures compliance with minimum health and safety standards. SB 765 (Wiener), Chapter 840, Statutes of 2018, further amends this statute to exempt any action taken by a city subject to the special shelter crisis act described above to lease, convey, encumber, or provide financing to an emergency shelter.

Remaining questions

While a number of approaches to addressing homelessness in California exist, gaps remain. As the Legislature considers next steps to both reduce the number of unhoused Californians, and to prevent individuals and families from entering into homelessness in the first place, it may wish to consider the following questions:

- How can collaboration across various state and local agencies be improved to address needs?
- How, and where, should the state improve upon and expand promising and successful initiatives already undertaken?
- What benefits are to be reaped from regional collaboration in addressing homelessness, and how can the state best facilitate this?
- How can the state best work within the frameworks imposed by HUD at the federal level to meet local needs?
- How can California ensure that rural homelessness is appropriately addressed, while also combatting urban homelessness?
- How can the state adequately meet the varied needs of specific populations facing homelessness?
- How can California work to better prevent homelessness in the first place? What promising practices exist as potential models?
- How can we best collect and utilize data on homelessness at the state level, including aggregating local HMIS data?

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- ⁱ <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>
- ⁱⁱ http://nchv.org/index.php/news/media/background_and_statistics/
- ⁱⁱⁱ Ibid.
- ^{iv} <http://www.bassukcenter.org/wp-content/uploads/2015/11/Services-Matter.pdf>
- ^v <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>
- ^{vi} <https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/domestic-violence/>
- ^{vii} <https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/domestic-violence/>
- ^{viii} <https://www.hudexchange.info/resources/documents/2016-AHAR-Part-2.pdf>
- ^{ix} <https://www.latimes.com/local/lanow/la-me-ln-homeless-older-adults-20180719-story.html>
- ^x <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>
- ^{xi} Ibid.
- ^{xii} <http://voicesofyouthcount.org/brief/national-estimates-of-youth-homelessness/>
- ^{xiii} https://www2.calstate.edu/impact-of-the-csu/student-success/basic-needs-initiative/Documents/BasicNeedsStudy_phaseII_withAccessibilityComments.pdf
- ^{xiv} <https://truecolorsfund.org/our-issue/>
- ^{xv} Ibid.
- ^{xvi} <http://www.ruralhome.org/sct-initiatives/mn-rural-homelessness>
- ^{xvii} Hodge, James G., Barbara DiPietro, and Amy E. Horton-Newell. “Homelessness and the public’s health: legal responses.” *Journal of Law, Medicine and Ethics* 45 S1 (2017):28.
- ^{xviii} SB 855 (Senate Committee on Budget and Fiscal Review), Chapter 29, Statutes of 2014.
- ^{xix} AB 1603 (Assembly Committee on Budget), Chapter 25, Statutes of 2016.
- ^{xx} Kings, Los Angeles, Orange, Sacramento, San Diego, San Francisco, San Luis Obispo, Santa Clara, Santa Cruz, Solano, Sonoma, and Yolo.
- ^{xxi} AB 1603 (Assembly Committee on Budget), Chapter 25, Statutes of 2016.
- ^{xxii} The Governor’s January Budget proposal for 2019-20 includes an annual appropriation of \$25 million (General Fund) to continue HDAP.
- ^{xxiii} AB 1811 (Assembly Committee on Budget), Chapter 35, Statutes of 2018.