A Second Look at Racial Inequity in the Homeless Continuum of Care System in San Diego City and County

Racial Equality in the San Diego Continuum of Care:

What the data tell us about the incidence and outcomes in the CoC

**2019 UPDATE**

Table of Contents

[2019 UPDATE: RACIAL EQUALITY AND THE SAN DIEGO COC 2](#_Toc20254149)

[Context and Purpose 2](#_Toc20254150)

[Racial and Ethnic Profiles: Inequity, Poverty, and Homelessness – 2019 3](#_Toc20254151)

[Causes of Homelessness 3](#_Toc20254152)

[Poverty 4](#_Toc20254153)

[Access to Housing 4](#_Toc20254154)

[Health 5](#_Toc20254155)

[2019 Conclusion 6](#_Toc20254156)

[CoC NOFA Response 7](#_Toc20254157)

[Actions Taken, Actions Proposed and Associated Resources 7](#_Toc20254158)

[Actions Taken in 2018-2019 7](#_Toc20254159)

[Actions Proposed 9](#_Toc20254160)

[Racial and Ethnic Profiles: Inequity and Homelessness – 2018 11](#_Toc20254161)

[Discussion of Racial and Ethnic Profiles 12](#_Toc20254162)

[Racial Composition of the CoC Board 13](#_Toc20254163)

[Discussion of Board Composition 14](#_Toc20254164)

[Racial Equality and Access to Housing Services 14](#_Toc20254165)

[Analysis of Referral Data 14](#_Toc20254166)

[Discussion of CES Referrals by Racial Group 14](#_Toc20254167)

[Race and Housing Placement 15](#_Toc20254168)

[Discussion of Permanent Housing Outcomes 15](#_Toc20254169)

[Summary 16](#_Toc20254170)

[2018 Findings and Recommended Actions 16](#_Toc20254171)

[2018 Closing Statement 17](#_Toc20254172)

[ATTACHMENT - DATA TABLES 18](#_Toc20254173)

# 2019 UPDATE: RACIAL EQUALITY AND THE SAN DIEGO COC

## Context and Purpose

Inequality is often created and maintained by cultural, social, and economic structures without the acknowledgment of the communities in which it exists.[[1]](#footnote-1) Racial disparity and at times overt discrimination in access to housing, however, have long been recognized. [[2]](#footnote-2),[[3]](#footnote-3) A 1947 Presidential Committee on Civil Rights declared that “housing clearly illustrates the national failure to treat individuals on the basis of individual merit versus racial myth” and pointed to disparity in “Negro housing”. By the turn of the century, legislative and economic policies had been created to try to right the inequity in housing[[4]](#footnote-4). While significant efforts such as the Fair Housing Act have attempted to remedy previous discrimination and promote equality in access to housing, and testing of Fair Housing practices is evidenced,[[5]](#footnote-5) relatively little testing of potential racial disparity in homeless housing programs is found in peer-reviewed literature.[[6]](#footnote-6)

The purpose of this document is to update the brief study conducted in 2018. That study tested whether or not there was evidence of racial inequity in the San Diego City and County Continuum of Care (CoC). These inquiries explore the relative frequency of homelessness of persons in racial and ethnic subgroups in the CoC; compares referrals and outcomes in usage of CoC housing resources among racial and ethnic groups; the racial composition of the CoC Board as representatives of homeless subgroups, and draws conclusions about the likelihood of unequal treatment in CoC systems. The results of this inquiry form the foundation for proposing additional action when warranted by the evidence. Results of the study will be used to answer questions in the FY 2019 CoC Competitive Application and to inform community stakeholders of factors related to identifying, preventing, or resolving racial disparity in the CoC.

## Racial and Ethnic Profiles: Inequity, Poverty, and Homelessness – 2019

The resources used for the study in 2018 were the U.S. Census data[[7]](#footnote-7) to establish expected frequencies for racial and ethnic distribution. Data drawn from the CoC Homeless Management of Information System (HMIS) and the Coordinated Entry Systems (CES) managed by the Regional Task Force on the Homeless[[8]](#footnote-8) (RTFH) was used to establish the rates of persons in racial and ethnic found among the CoC homeless population and their participation in various aspects of the CoC housing system.

This 2019 update examines data from the American Community Survey (Survey) and the U.S. Census each including general population information and additional population subgroups and poverty rates, the local Point in Time Count (PITC), and HMIS system data. Multiple tools were used to examine the incidence of homelessness among racial and ethnic subgroups in the broader community context in comparison with the presence of the same groups among various categories of homelessness in the CoC region. Tools used in the exploration include: the National Alliance to End Homelessness (NAEH) *Racial Equity Tool;* the National Homelessness Information Project guidelines, and statistical analysis through Statistical Package for Social Sciences (SPSS) and Microsoft *EXCEL*.

Data from the *Equity Tool*

## Causes of Homelessness

The 2019 Update cannot adequately address the causes of the disparities in the rates of homelessness. Years of other research and volumes of literature have explored the causal factors and determinants of homelessness[[9]](#footnote-9). Research over the past three decades has identified dozens of factors correlated with homelessness. One study alone examines 21 interdependent factors[[10]](#footnote-10). This 2019 Update touches on three factors: poverty, access to housing, and health as examples of contributors to homelessness that go beyond race / ethnicity.

### Poverty

One question that arises when trying to understand the causes of homelessness is its correlation with poverty[[11]](#footnote-11). It is recognized that “*homelessness and poverty are inextricably linked. Poor people are frequently unable to pay for housing, food, childcare, health care, and education. Difficult choices must be made when limited resources cover only some of these necessities. Often it is housing, which absorbs a high proportion of income that must be dropped. If you are poor, you are essentially an illness, an accident, or a paycheck away from living on the streets”.*

The data show that poverty alone however, cannot explain homelessness. While rates of white persons found in poverty and homelessness data in the PITC and among the sheltered homeless are similar, rates for unsheltered families is slightly higher[[12]](#footnote-12) and poverty and homelessness data for other groups differ. The gap between the rate of poverty and the rate of homelessness indicates that other factors influence the rate of homelessness in various groups, particularly African American and Asians. Data show that homelessness in these groups are not equal to their rates of poverty.

### Access to Housing

Studies [[13]](#footnote-13) attribute access to housing as a key factor in homelessness. National reports[[14]](#footnote-14) cite a lack of affordable housing, especially for very low income households contributes to homelessness. When compounded by extremely low vacancy rates, such as those experienced in San Diego this results in housing crisis and to homelessness. Shortages in affordable housing are further exacerbated by destruction or conversion of very-low income units, such single room occupancy (SRO) housing[[15]](#footnote-15). Rental of smaller housing units (“0” or 1-bedroom units) one of the most viable options for low income households. [[16]](#footnote-16) Increasing fair market rents, partnered with decreases in actual income or in purchase power, leave thousands of people in the CoC with little access to decent, affordable housing. Some households resort to overcrowding, substandard housing, or to living in their vehicle. This is another way that people are put at risk of becoming homeless because solutions are often temporary.

A lack of affordable housing contributes to high demands on emergency response systems which could otherwise provide immediate remedy for homelessness. No state has an adequate supply of housing for low income households [[17]](#footnote-17)Like other CoCs in California jurisdictions within the thirteen CoCs in the Southern California CoC Alliance have declared shelter and housing emergencies. The demand for affordable housing or shelter options clearly exceeds the supply[[18]](#footnote-18). Although Point In Time Counts in the CoC fluctuate, the number of unsheltered homeless in the CoC over the past five years has hovered around 5,000. Long waiting lists for public housing mean that people stay shelters or inadequate housing for extended periods, sometimes years[[19]](#footnote-19). The fact that there is a link between a lack of access to housing and homelessness is clear.

With regard to access to housing, aggregate Annual Performance Report (APR) data[[20]](#footnote-20) of the racial composition for participants in to the various CoC housing types in the San Diego CoC are shown in Table1, below.

*Table 1. Racial Composition of Persons Served by Percentage, FY 2017-2018*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Racial Group | Permanent Supportive Housing | Rapid Rehousing | Rapid Rehousing For Domestic Violence | Rapid Rehousing Component of Joint Programs |
| African American | 25.5% | 28.9% | 47% | 46.3% |
| Asian | 2.5% | .69% | .34% | 42.3% |
| Native American/ Native Alaskan | 1.3% | 1.24% | 0 | .8% |
| Hawaiian / Pacific Islander | 1.3% | .83% | .34% | 1.6% |
| Mixed | 6.1% | 6.98% | 4.7% | 4.4% |
| White | 63.3% | 61.4% | 47.6% | 46% |

### Health

Housing and health are intricately linked. As the National Coalition pointed out, poverty may bring people to the edge of homelessness but health issues, accidents, or unexpected events often push people over the edge into homelessness. Access to health care, emergency assistance, or flexible social and financial supports could prevent homelessness.

The National Institute of Health and Healthcare for the Homeless project providers recognize that health problems can precede the drop into homelessness, yet others result for living on the streets or in inadequate or substandard housing. Health conditions, such as major mental illness, especially schizophrenia, AIDS, alcoholism or drug dependence, age related degenerative diseases and job-related accidental injury, exist prior to becoming homeless. A health crisis tied to these conditions can drain social and economic resources and destabilize housing. “Being very sick can lead to homelessness. If you’re sick, homelessness may make you sicker[[21]](#footnote-21)”.

The cost of health care contributes to poverty, job loss, and homelessness. Medical debt contributes to For approximately 20% of working- age Americans (ages 19 and 64) medical debt means struggling to pay their bills. An injury or health crisis can result in job loss. The downward spiral begins. Support networks weaken or subside and people end up sick, in debt and on the street.

With regard to health conditions, aggregate Annual Performance Report (APR) data[[22]](#footnote-22) for participants in various housing types in the San Diego CoC reveal that at a minimum[[23]](#footnote-23), 21% of the persons entering the general rapid rehousing program; 18% of persons entering rapid rehousing for domestic violence survivors; and 16% of those in the rapid rehousing component of joint housing programs report one or more physical or mental health conditions. Currently, entry into permanent supportive housing requires at least one adult with a diagnosed disability, 1193 unduplicated persons were served in permanent supportive housing during the data catchment period.

## 2019 Conclusion

In general, the incidence of African Americans, Native Americans and Hispanic persons in the CoC system mirrors the disparities found at the broader community levels. These group tend to be over represented in homelessness when compared to their proportion on the general community. Their rates of occurrence in homelessness and inclusion in some aspect of the CoC system are similar. Racial and ethnic disparity among persons found in homelessness and poverty exist. While evidence points to a replication of overrepresentation of these groups in homelessness, data indicate that groups are treated equitably once in the CoC system with respect to access to services, offers of housing and placement rates.

This study recounts three conditions associated with homelessness and offers examples of the descriptive data available, however, the study does not purport to analyze the relationships between these factors and their incidence in the CoC. The examples offer data that may reinforce these factors as contributing to homeless ness in the CoC and are points for further exploration.

A weaknesses in this study lies in methodology. Data used to populate the tools were drawn from non-standardized time periods. To mediate this weakness, the 2019 Update looked at results from more than one tool and compared differing time periods.

## CoC NOFA Response

The U.S. Department of Housing and Urban Development (HUD) FY 2019 Continuum of Care (CoC) Notice of funding Availability (NOFA) asks local communities that conducted a study of racial equity to determine which of the following six statements are accurate for their CoC area:

People of different races or ethnicities are more likely to receive homeless assistance.

People of different races or ethnicities are less likely to receive homeless assistance.

People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance

People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.

There are no racial or ethnic disparities in the provision or outcome of homeless assistance.

The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.

Considering the data and each of the six statements, the 2019 Update to the San Diego CoC study draws similar conclusions as those found in 2018:

*While none of the choices above fully reflect the San Diego CoC situation, it is accurate that there is an overrepresentation of minorities in the homeless population when compared with the racial distribution from reports drawn from Census data for the region. Data about clients served by the CoC as represented in HMIS and CES data, however, have relatively proportional access to assistance and similar outcomes after entering the system*.

*While racial and ethnic subgroups are overrepresented in the homeless population nationally and locally, access to care and outcomes of care in the San Diego CoC are relatively proportionate. The study, however is a catalyst for further exploration and action.*

The statement that best represents the findings for San Diego is, that given the selection of statement, the findings are inconclusive for racial and ethnic disparities.

## Actions Taken, Actions Proposed and Associated Resources

### Actions Taken in 2018-2019

The 2018 Study proposed discernable actions for addressing racial disparity in the CoC community. This section provides examples of action taken since the release of that study. This is a representative of rather than a comprehensive list; it does not contain all actions completed or underway.

1. *Help the CoC board and decision-making bodies better reflect the population served in the CoC.*

The Board recruitment and selection process was now includes

1. *Train staff and educate organizations, stakeholders, boards of directors for local and national non-profit organizations working on homelessness on the topic of racial and ethnic diversity.*

* Board presentation including executives for non-profit agencies and the public held on April 18, 2019.
* Workshop on April 25, 2019.
* Notify Membership of availability of study September 2018 and April 2019.
* Public Distribution of Study ongoing availability on RTFHSD.org 2018 NOFA page.
* CoC communication, such as volunteer recruitment flyers, websites, or other materials, include images of underrepresented groups

1. *Review coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.*

* Substantive revision to the CES system was initiated in 2019.
* Data analysis similar to that conducted in the 2018 Study is proposed for early 2020.

1. *Collect data to better understand the pattern of program use*.

* The PITC is a key data source that provides quantitative data included in the racial equity / disparity tools. The 2019 PITC employed an ‘engaged’ count that provided better opportunities for talking directly with unsheltered persons. Although not conducted as formal qualitative research, the PITC engagement helps to expose stakeholders, including decision-makers, to the experiences of diverse persons living on the street or other places not meant for human habitation.
* The CoC collects APR data for each CoC-funded project in our region. Agencies were advised[[24]](#footnote-24) that HMIS data from APR question *12.a. Race* could help inform them of potential disparities in their program and the Evaluation Advisory Committee will be looking at this data to better understand service usage.

1. *Conduct additional research to understand the scope and needs of different groups experiencing homelessness*

* Homelessness research in the CoC incudes participation from three major institutions of higher education. Collaboration among these universities identified a research agenda focused on youth. Aspects of the research are examining the racial and ethnic composition of, the housing needs, and food security of transition-aged homeless youth pursuing higher education[[25]](#footnote-25).

### Actions Proposed

Three areas of potential action are envisioned for 2019 – 2020. These are listed below with brief examples of actions in each area. Each of the areas identified for possible action could draw on local resources. At least one potential resource is provided in each of the three areas.

#### Enhanced data analysis

More thorough investigation of the available data could enhance the understanding of unintended racial disparity and ensure system equity. Examples of actions in this area include:

1. Reexamine coordinated entry processes and services provision data to understand the system responsiveness to people of different races and ethnicities experiencing homelessness;
2. Conduct statistical analysis of available data beyond descriptive statistics;
3. Consider adding qualitative data from focus groups or brief encounter engagement; or
4. Explore Racial Ethnic Representation on CoC committees and among Service Provider Staff using the *National Homeless Information Project -Staff Assessment Tool*.

Expanded community awareness

Increase community awareness through actions like:

1. Launch as media campaign about Fair Housing initiatives:
   1. Distribute the *Practice Fair Housing* brochure published by the Public Housing Authority to all CoC Housing programs and landlords where participants are housed:
   2. Publish the results of paired-applicant testing from Fair Housing Agencies;
   3. Request that the responsible entity in each sub-region issue at least one press release regarding Fair Housing or challenges; or
   4. Use social media (Twitter) to announce or provide news and information to how to foster racial and ethnic equality.
2. Collaborate with the Black Advocates Association; Black Justice Commission; National Urban League; United Pan Asian Communities Center, etc. to inform local practices and advance advocacy strategies.
3. Conduct focused recruitment for committee by persons with lived experience who self-identify as a member group underrepresented in the CoC system response structures.

#### Collaborative research

1. Five institutions of higher education have formed a group to foster collaboration on research about homelessness. Initial research is being funded by a local foundation and private donors;
2. Work with Center for Justice and Reconciliation to research correlation between domestic violence and human trafficking and race / ethnicity
3. Identify Best Practice Interventions for Youth in racial minority groups with YHDP providers

Racial Equality in the

San Diego Continuum of Care

2018 Initial Data

## Racial and Ethnic Profiles: Inequity and Homelessness – 2018

The resources used for the study in 2018 were the U.S. Census data[[26]](#footnote-26) to establish expected frequencies for racial and ethnic distribution. Data for the homeless population and participation in various aspects of the CoC housing system are drawn from the CoC Homeless Management of Information System (HMIS) and the Coordinated Entry Systems (CES) managed by the Regional Task Force on the Homeless[[27]](#footnote-27)(RTFH).

*Table 1: Racial Profile*, below, summarizes Census a quick review of the data points to disparities in the racial distribution of persons in homelessness in the regional CoC when compared with the general population of San Diego County for 2018

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Table 1: Racial Profile* |  | |  |  | |  |  |  |  |
| **Primary Race** | | **HMIS Client Count** | | | **CoC %** | | **Census %\*** | **Expected count** | **Disparity Note** |
| American Indian/Alaskan Native & White (HUD) | | 85 | | | 0.2% | |  | 0 | Not included in Census summary |
| American Indian or Alaska Native (HUD) | | 1423 | | | 2.6% | | 1.3% | 706 | CoC twice Census |
| Asian (HUD) | | 1067 | | | 2.0% | | 12.5% | 6792 | CoC only 15% of Census |
| Black or African American (HUD) | | 15023 | | | 27.6% | | 5.5% | 2989 | CoC 5 times Census |
| Native Hawaiian or Other Pacific Islander (HUD) | | 821 | | | 1.5% | | 0.6% | 326 | CoC 2.5 times Census |
| Other | | 149 | | | 0.3% | |  | 0 | Not included in Census summary |
| Other Multi-Racial | | 86 | | | 0.2% | | 4.4% | 2391 | CoC less than 4% of Census |
| SD - Middle Eastern Descent | | 11 | | | 0.0% | |  | 0 | Not included in Census summary |
| White (HUD) | | 33650 | | | 61.9% | | 75.6% | 41080 | CoC only 82% Census |
| Client doesn't know (HUD) | | 309 | | | 0.6% | |  |  | Not included in Census summary |
| Client refused (HUD) | | 608 | | | 1.1% | |  |  | Not included in Census summary |
| Data not collected (HUD) | | 469 | | | 0.9% | |  |  | Not included in Census summary |
| Missing | | 638 | | | 1.2% | |  |  |  |
| **HMIS TOTAL** | | **54,339** | | |  | |  |  | 2% incidence exceeds the 1/2 % expected occurrence of homeless in an urban area |
| **Census Total Population for San Diego County** | |  | | |  | | **3,095,342** |  |  |

*Table 2: Ethnic Profile* on the following page, displays the self-declared ethnicity of persons included in the HMIS data as compared with the Census. Because the number of cases with unknown ethic data exceeds 1,000 cases across only two categories, the table shows the disparity percentage with and without inclusion of those cases.

*Table 2: Ethnic Profile*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Ethnicity** | **Client Count** | **CoC %** | **Census %** | **Adjusted for Unknown** | **Disparity Notes Total** | **Disparity Notes Adjusted** |
| Hispanic/Latino (HUD) | 15453 | 28.4% | 33.9 | 29.4% | 80.0% | 0.87% |
| Non-Hispanic/Non-Latino (HUD) | 37069 | 68.2% | 45.5 | 70.6% | 1.5 x | 1.55 x |
| Total Ethnicity Unknown | 1180 | 2.2% |  |  |  |  |
| Known Cases | 52522 |  |  |  |  |  |

### Discussion of Racial and Ethnic Profiles

Table 1 data points to circumstances of racial disparity when comparing the racial profile of homeless persons in the CoC with that of the general population of San Diego County. Most notably, homelessness among Black or African Americans represents more than five (5.5) times their proportion of the general population; Native Hawaiian and other Pacific islanders are 2.5 times; American Indian and Native Alaskans are 2 times the proportion of the general census. Each of these three groups is over-represented in the homeless population. Conversely, three other racial groups are under-represented. The Multi-racial, Asian, and White populations occur at 4%, 15%, and 82% of the expected occurrence.

Table 2 points to a substantial disparity for non-Hispanic / Non-Latino persons as well as a measurable difference for Hispanic or Latino persons when compared with census data. Self-identified Hispanic Latino persons comprise 33.9% of the general population in the County while less than 30% are counted in the HMIS group. Non-Hispanic/ Non-Latino persons account for 45.5% of the general population, but make up over 70% of the homeless persons which translates to 1.5 times the expected rate.

Together, tables and 2 evidence inequality in the occurrence of homelessness among racial and ethnic persons. This finding mirrors what is known about homeless populations at the national level.[[28]](#footnote-28)

Also of note, the general incidence of homelessness in the CoC is substantially above the one-half to one percent rate of homelessness historically reported as expected in urban areas across the U.S[[29]](#footnote-29). The measured rate, however, falls below the more recently reported rates, especially for California where USICH reported a 24% rate of homelessness in 2017.[[30]](#footnote-30) Lack of affordable housing, low vacancy rates, military presence, and mild climates are often cited as factors contributing to the high proportion of homelessness in Southern California. Although these statements may be accurate, the data in this study does not examine causal factors and can only point to areas for additional study.

Given the disparities in racial profile, exploration of the system response to racial and ethnic subgroups is warranted.[[31]](#footnote-31)

## Racial Composition of the CoC Board

The CoC Board has thirty-one (31) seats with members elected to represent various homeless special needs populations and community sectors. The recruitment, nomination, and selection process focuses on the capacity of the potential Board member to bring necessary skills and knowledge to execute the responsibilities of the Board to various funding sources, to the RTFH as a non-profit corporation, and to the community invested in alleviating the negative impacts of homelessness. Board nomination and selection guidelines state:

*The nomination and selection of Regional Task Force on the Homeless (RTFH) Governance Board (Board) members is the prerogative of the members of the RTFH through an election process. However, given the responsibilities of the Board, there is a need for the Board to have an appropriate mix of expertise and experience. Policies and procedures must facilitate the election of those people who best meet the needs of the Board. Board members should provide an appropriate mix of skills to provide the necessary breadth and depth of knowledge and experience to meet the Board’s responsibilities and objectives.*

*The Board also aims for a composition that will appropriately represent the interests of RTFH stakeholders, the local community, and will reflect diversity in its composition by recruiting members with varied geographical, social, economic, environmental, business, and cultural backgrounds. The Board should maintain a reasonable balance with respect to age and gender.[[32]](#footnote-32)*

The current racial and ethnic composition of the Board is summarized in this chart:

|  |  |  |  |
| --- | --- | --- | --- |
| **Primary Race and Ethnicity** | **# Board Members** | **% Of Board** | **% Homeless persons served (HMIS) rounded to nearest%** |
| American Indian/Alaskan Native & White | 0 | 0.0% | 3.00% |
| Asian | 2 | 6.5% | 2.00% |
| Black or African American (HUD) | 3 | 9.7% | 28.00% |
| Native Hawaiian or Other Pacific Islander (HUD) | 1 | 0.0% | 2.00% |
| White | 24 | 77.4% | 62.00% |
| Other | 0 | 0% | 2.00% |
| **Ethnicity** |  |  |  |
| Non- Hispanic | 28 | 90.3% |  |
| Hispanic | 3 | 9.7% |  |
| **Total Members** | **31** | **100.0%** | **100.00%** |

### Discussion of Board Composition

As the chart above shows, the CoC Board composition is overwhelmingly white (77.4%), non-hispanic (90.3%) with a total of six racially diverse persons(19%). The RTFH client population while containing a white majority (62%),also holds approximately twice the number of racially diverse persons. Although historically decision-making bodies were characterized as dominated by white males, reent public and private sector efforts work to encourage greater diversity.[[33]](#footnote-33)

## Racial Equality and Access to Housing Services

Access to permanent housing in the CoC occurs through the Coordinated Entry System (CES) and the primary processes of referral to housing, participant acceptance, and housing placement. A review of data for each of these processes is included in evaluating the potential for racial disparity in the CoC system.

### Analysis of Referral Data

Participants are registered in the CES system and are referred to housing opportunities based on the participant characteristics and preferences and the profile of the housing resource. Participants and housing opportunities are matched by these factors and housing referrals are offered to the participant. Referral outcomes are listed in fours classifications: accepted, accepted on wait list, cancelled, and declined. *Table 3: CES Referrals* *by Racial Group* captures the data for housing referrals segmented by race and *Table 4: CES Referrals by Ethnicity* displays the information by ethnicity. Due to size, these tables are found on separate pages. Discussion of Tables 3 and 4 begins prior to the separate tables pages.

### Discussion of CES Referrals by Racial Group

Table 3 contains data concerned with CES referral outcomes within each racial group and aggregate outcomes for all participants referred through the CES system for housing. Referral acceptance rates for all cases (except for one case classified as ‘other”) ranges between 38.2% and 70.5%. This range includes cases where data is unknown, missing, or refused. In cases where outcome and racial group are known, the acceptance rates range narrows to 58.4% to 70.5%. The acceptance rate in the 29 cases where the participant refused to self –identify race was measured at 44.8% about 14% below the cases where participants’ race is known. Native Hawaiian /Pacific Islander, the group with the highest acceptance rate (70.5%) is drawn from 78 cases which is the smallest racial group[[34]](#footnote-34)for this data element. Two other relatively small groups, American Indian / Alaskan Native (N = 127) and Asian (N =98) hold acceptance rates of approximately 52% and 57% respectively. The largest groups, Black / African American and White comprise 35% and 58% of all cases, and hold referral acceptance rates of 57% and 62% respectively. It is noted that the proportion of homeless persons in the CoC for these groups as shown in *Table 1:Racial Profile* are 27.6% and 61.9%. Indications are that the proportion of Black / African Americans who are referred by CES to housing opportunities exceeds their relative contribution to the CoC homeless population, while whites are represented equally.

Examination of other referral outcomes (cancelled, denied, and wait listed) reveals relatively limited ranges for cases where race and outcome are known. The outcome “cancelled” ranges between 3.85% and 10.2% while the outcomes “denied” and “wait listed” have ranges of 18.37% to 29.92% and .88% and 1.4%. Simple descriptive statistics do not signal an alert for disparity in the less desirable referral outcomes (denied, cancelled).

## Race and Housing Placement

A premier goal of the CoC system is to help homeless persons sure permanent housing appropriate to their needs. Examination of this aspect of CoC outcome by racial group are essential to the assessment of potential racial disparity in the system.

*Table 5: Exits to Permanent Housing by Racial Group* , below, captures a summary of the permanent placement outcomes achieved by each racial group as compared with their proportion of the homeless population as reported in HMIS.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Primary Race** | **Exit to Permanent Housing** | **%of Exits to PH** | **% HMLS Pop** | **Comparison of Exit Outcome to % HMLS Population** |
| American Indian/Alaskan Native & White (new HUD an prior) | 187 | 2.0% | 2.6% | 76% |
| Asian (HUD) | 154 | 1.6% | 2.0% | 83.4% |
| Black or African American (HUD) | 3198 | 34.0% | 27.6% | 123.0% |
| Native Hawaiian or Other Pacific Islander (HUD) | 145 | 1.5% | 1.5% | 102.0% |
| White (HUD) | 5557 | 59.1% | 61.9% | 95.4% |
| Other | 2 | 0.0% | 0.3% | 7.8% |
| Other Multi-Racial | 1 | 0.0% | 0.2% | 6.7% |
| SD - Middle Eastern Descent | 0 | 0.0% | 0.0% | 0.0% |
| Client doesn't know (HUD) | 17 | 0.2% | 0.6% | 31.8% |
| Client refused (HUD) | 43 | 0.5% | 1.1% | 40.9% |
| Data not collected (HUD) | 60 | 0.6% | 0.9% | 73.9% |
| Missing | 41 | 0.4% | 1.2% | 37.1% |
| Total Exits to Permanent Housing | 9405 | 100.0% |  |  |

### Discussion of Permanent Housing Outcomes

A review of the data in *Table 5: Exits to Permanent Housing by Racial Group* evidences a wide range of permanent housing placement rates, from virtually no exits to permanent housing to 59% of persons in a racial group representing 59% of the successful exits to permanent housing for the CoC. When compared with the relative proportion that each racial group is found within the data set, the disparity (excluding the categories with two or less persons and cases with data missing), ranges from 76% to 123% of expected values.

In general, the trends seen in other parts of this study continues. Black/African American rates of placement are higher than their inclusion in the homeless population found in the HMIS, Asian and American Indian / Alaskan Native achievement numbers are lower than their incidence in the population, and whites are slightly below but nearly equal to the expectation.

This data suggests that issues of racial discrimination against Blacks reported in prior decades are not present in the current system.

## Summary

This study reviewed the descriptive data for the San Diego CoC from the HMIS and CES data repositories, and the U.S. Census report for 2017 for various factors distributed by racial and ethnic groups. Comparisons between the expected racial distribution based on 2017 Census data for San Diego County and the levels of representation of racial groups within the local homeless population coincides with findings of other studies, Blacks / African Americans, Native Americans and Alaskan Natives, and Hawaiian/Pacific Islanders are over-represented in the homeless population when compared with the general population distribution in a given area.

This brief study addresses key structures within the CoC system designed to move homeless persons through referral processes to successful placement in permanent housing. The study focuses on simple descriptive data, such as frequencies and ratios as preliminary indicators of potential racial disparity.

## 2018 Findings and Recommended Actions

The U.S. Department of Housing and Urban Development (HUD) has asked CoCs to classify their study findings in one of four categories:

People of different races or ethnicities are more or less likely to receive homeless assistance.

People of different races or ethnicities are more or less likely to receive a positive outcome from homeless assistance.

There are no racial disparities in the provision or outcome of homeless assistance

The results are inconclusive for racial disparities in the provision or outcome of homeless assistance.

While none of the choices above fully reflect the San Diego CoC situation, it is accurate that there is an overrepresentation of minorities in the homeless population when compared with the racial distribution from 2017 reports drawn from Census data for the region. Data about clients served by the CoC as represented in HMIS and CES data, however, have relatively proportional access to assistance and similar outcomes after entering the system.

Given the disproportionate representation of racially diverse persons in homelessness, and a CoC Board composition that does not mirror the client population distribution, there is no significant disparity in the access to services or outcomes in the assistance from the CoC . As a result, the CoC classifies our findings in category 4, the results are inconclusive for racial disparities, and notes one clarification: races or ethnicities are more / less likely to be homeless *than their occurrence in the general population.*

HUD asked CoCs to select from eleven strategic options (below) to try to address any racial disparities. The process of conducting this brief study has pricked the interest of leaders in the CoC. Five strategies in italics below have already been initiated or are being planned by CoC members.

The CoC’s board and decision-making bodies are representative of the population served in the CoC.

***The CoC has identified steps it will take to help the CoC board and decision-making bodies better reflect the population served in the CoC.***

The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.

The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups

***The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.***

The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.

The CoC has staff, committees or other resources charged with analyzing and addressing racial disparities related to homelessness.

***The CoC is educating organizations, stakeholders, boards of directors*** *for local and national non-profit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.*

***The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness***.

***The CoC is collecting data to better understand the pattern of program use for people of different***

The CoC is conducting additional research to understand the scope and needs of different races and ethnicities experiencing homelessness.

2018 Closing Statement  
While racial and ethnic subgroups are overrepresented in the homeless population nationally and locally, access to care and outcomes of care in the San Diego CoC are relatively proportionate. The study, however is a catalyst for further exploration and action.

# ATTACHMENT - DATA TABLES

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Table 3: CES Referrals by Racial group*** | |  |  |  |  |  |  |  |  |  |
| **Race** | **Accepted** | **Cancelled** | **Declined** | **Wait List** | **Not collected** | **Case Total** | **% Accepted** | **% Cancelled** | **% Declined** | **% wait list** |
| American Indian Alaskan Native (HUD +Original) | 66 | 9 | 38 | 0 | 14 | 127 | 51.97% | 7.09% | 29.92% | 0.00% |
| Asian | 56 | 10 | 18 | 0 | 14 | 98 | 57.14% | 10.20% | 18.37% | 0.00% |
| Black / African American | 1107 | 152 | 378 | 17 | 282 | 1936 | 57.18% | 7.85% | 19.52% | 0.88% |
| Native Hawaiian/ Pacific Islander | 55 | 3 | 19 | 1 |  | 78 | 70.51% | 3.85% | 24.36% | 1.28% |
| White | 1975 | 252 | 895 | 44 |  | 3166 | 62.38% | 7.96% | 28.27% | 1.39% |
| Other | 0 | 0 | 1 | 0 | 0 | 1 | 0.00% | 0.00% | 100.00% | 0.00% |
| Unknown Race | 9 | 3 | 4 | 0 | 6 | 22 | 40.91% | 13.64% | 18.18% | 0.00% |
| Refused Race | 13 | 2 | 13 | 1 | 5 | 34 | 38.24% | 5.88% | 38.24% | 2.94% |
| Not collected | 16 | 0 | 8 | 0 | 3 | 27 | 59.26% | 0.00% | 29.63% | 0.00% |
| **TOTAL** | **3297** | **431** | **1374** | **63** | **324** | **5489** | **60.07%** | **7.85%** | **25.03%** | **1.15%** |

***Table 3: CES Referrals by Racial Group, Continued. Known Cases***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Race** | **N without Missing cases** | **% Accepted Known Cases only** | **% Cancelled Known Cases only** | **% Declined Known Cases only** | **% Wait List Known Cases only** |
| American Indian Alaskan native (HUD +Original) | 113 | 58.4% | 8.0% | 33.6% | 0.0% |
| Asian | 84 | 66.7% | 11.9% | 21.4% | 0.0% |
| Black / African American | 1654 | 66.9% | 9.2% | 22.9% | 1.0% |
| Native Hawaiian/ Pacific Islander | 78 | 70.5% | 3.8% | 24.4% | 1.3% |
| White | 3166 | 62.4% | 8.0% | 28.3% | 1.4% |
| Other | 1 | 0.0% | 0.0% | 100.0% | 0.0% |
| Refused Race | 29 | 44.8% | 6.9% | 44.8% | 3.4% |
| **TOTAL** | **5125** | **63.8%** | **8.3%** | **26.6%** | **1.2%** |

***Table 4: CES Referrals by Ethnicity***

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Ethnicity** | **Accepted** | **Cancelled** | **Declined** | **Wait List** | **Not collected** | **Row Total** | **% Accepted** | **% Cancelled** | **% Declined** | **% wait list** |
| Hispanic / Latino | 917 | 122 | 328 | 22 | 224 | 1389 | 66.02% | 8.78% | 23.61% | 1.58% |
| Non-Hispanic / Non- Latino | 2360 | 307 | 1030 | 41 | 555 | 4293 | 54.97% | 7.15% | 23.99% | 0.96% |
| Unknown Ethnicity | 12 | 5 | 17 | 0 | 6 | 40 | 30.00% | 12.50% | 42.50% | 0.00% |
| **TOTAL** | 3289 | 434 | 1375 | 63 | 785 | 5722 | 57.48% | 7.58% | 24.03% | 1.10% |

***Table 4: CES Referrals by Ethnicity, Continued, Known Cases - Outcomes***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ethnicity** | **N without Missing cases** | **% Accepted Known Cases only** | **% Cancelled Known Cases only** | **% Declined Known Cases only** | **% Wait List Known Cases only** |
| Hispanic / Latino | 1165 | 78.7% | 10.5% | 28.2% | 1.9% |
| Non-Hispanic / Non- Latino | 3738 | 63.1% | 8.2% | 27.6% | 1.1% |
| Unknown Ethnicity | 34 | 35.3% | 14.7% | 50.0% | 0.0% |
| **TOTAL** | 4937 | 66.6% | 8.8% | 27.9% | 1.3% |



1. Rothman, Robert A., 2006. *Inequality & Stratification*: *Race, class, and gender* .Press.—5th ed. [↑](#footnote-ref-1)
2. A Report of the President’s Committee on Civil Rights.1947. *To Secure These Rights.* Quoted in Race Discrimination in Housing. *Yale Law Journal:* *57 (426, 1947-1948. retrieved on-line. July 2018.* [↑](#footnote-ref-2)
3. P. G. A. and M. C. G. 1959. *University of Pennsylvania Law Review.*  107 (4) p. 515-550 [↑](#footnote-ref-3)
4. Examples include: The Fair Housing Act of 1968; The Stewart B Mc Kinney Act, 1987 and Mc Kinney-Vento Act. [↑](#footnote-ref-4)
5. Yinger, J. 1986*, American Economic Review.*Measuring Racial Discrimination with Fair Housing Audits: Caught in the Act. 76 (5), p 881-893. [↑](#footnote-ref-5)
6. Pager, D. and Shepherd, Hana. 2008*. Annual Review of Sociology*. The Sociology of Racial Discrimination: in Employment, Housing, Credit, and Consumer Markets. 34. P.181-209. Retrieved Httpsz://www.annualreviews.org/doi/10.1146/annurev.soc.33.040406.131740 [↑](#footnote-ref-6)
7. U.S. Census Bureau, Census Quick Facts, 2017, San Diego County, C.A, Dept. of Commerce webpage, https://www.census.gov/quickfacts/fact/table/sandiegocountycalifornia,ca/PST045217 [↑](#footnote-ref-7)
8. The Regional Task Force on the Homeless is a 501 C (3) non-profit organization that is the HMIS Lead Agency and the CoC Collaborative Applicant responsible for operating the CES system. [↑](#footnote-ref-8)
9. Lee, Barrett. Price-Stralen, Townsand. Kanan, James. 2003. Urban Inequality: Determinants of Homelessness in Metropolitan Areas. J. Urban Affairs V 25 (3)

   Mabhala, Mzwandile. Ellahi, Basmi. Massey, Alan, et al. 2016. Understanding the Determinants of Homelessness… J. Diversity and Equality in Health and Care. V.13 (4)

   Rossi, Peter. Wright, James. 1987. Determinants of Homelessness. J. Health Affairs. V.6. (1) retrieved. <https://doi.org/10.1377/hlthaff.6.1.1987>

   Stafford, Amanda. Wood, Lisa. 2017. Tackling Disparities for People who are Homeless…Start with Social Determinants. Int. J. Environ Res Public Health.V14(12). [↑](#footnote-ref-9)
10. Mago, Vijay. Mordem, Hilary. Fritz. Charles, et al. 2013. Analyzing the Impact of Social Factor on Homelessness… BMC. Med. Inform. Decis Making. V. 13(94), retrieved on-line PMC3766254. [↑](#footnote-ref-10)
11. National Coalition for the Homeless, 2009, *Why Are People Homeless*? <https://www.nationalhomeless.org/factsheets/why.html#targetText=POVERTY,%2C%20health%20care%2C%20and%20education.&targetText=If%20you%20are%20poor%2C%20you,from%20living%20on%20the%20streets.>; [↑](#footnote-ref-11)
12. CoC Racial Equity tool data. [↑](#footnote-ref-12)
13. National Academies of Science. 2018. *Permanent Supportive Housing Evaluating the Evidence*….Addressing homelessness. <https://www.ncbi.nlm.nih.gov/books/NBK519590/> retrieved 8.15.2019 [↑](#footnote-ref-13)
14. Reports include: HUD *Research Matters*; National Alliance to End Homelessness; National Coalition; US Interagency Council [↑](#footnote-ref-14)
15. National Low Income Housing Coalition. 2018. The Gap: A shortage of Affordable Housing. Retrieved on line, Aug. 2019. <https://reports.nlihc.org/sites/default/files/gap/Gap-Report_2018.pdf> [↑](#footnote-ref-15)
16. Joint Center for Housing Studies.  [↑](#footnote-ref-16)
17. National Low Income Housing reports, 2018 [↑](#footnote-ref-17)
18. National Low Income Housing reports, 2016, 2018 [↑](#footnote-ref-18)
19. [↑](#footnote-ref-19)
20. HMIS FY2017-2018 data drawn on July 3, 2019. [↑](#footnote-ref-20)
21. Health Care for the Homeless. 2019. *Homelessness Makes You Sick*. <https://www.hchmd.org/homelessness-makes-you-sick> [↑](#footnote-ref-21)
22. HMIS FY2017-2018 data drawn on July 3, 2019. [↑](#footnote-ref-22)
23. Data for disabling conditions can be duplicated. To avoid duplication, the minimum is based on the number of persons in the category with the highest number of response only. [↑](#footnote-ref-23)
24. Two meetings open to General Membership: April 2019, June 2019 [↑](#footnote-ref-24)
25. ### SDSU Social and Economic Vulnerability Initiative (SEVI) Study. 2019. Report by Mounah Abdel-Samad, Sept. 5, 2019.

    [↑](#footnote-ref-25)
26. U.S. Census Bureau, Census Quick Facts, 2017, San Diego County, C.A, Dept. of Commerce webpage, https://www.census.gov/quickfacts/fact/table/sandiegocountycalifornia,ca/PST045217 [↑](#footnote-ref-26)
27. The Regional Task Force on the Homeless is a 501 C (3) non-profit organization that is the HMIS Lead Agency and the CoC Collaborative Applicant responsible for operating the CES system. [↑](#footnote-ref-27)
28. ## National Alliance to End Homelessness. *Racial Inequalities in Homelessness, by the Numbers, June 4, 2018* Retrieved on –line: https://endhomelessness.org/resource/racial-inequalities-homelessness-numbers.

    [↑](#footnote-ref-28)
29. Rates of homelessness in America, 2008-2009 2017 Rates by State – USICH Interactive maps. https://www.usich.gov/tools-for-action/map/#fn[]=1500&fn[]=2900&fn[]=6100&fn[]=10100&fn[]=14100&all\_types=true&year=2017&state=CA [↑](#footnote-ref-29)
30. [↑](#footnote-ref-30)
31. After removing the single case classified as “other”. [↑](#footnote-ref-31)
32. RTFHSD.org website, retrieved, July 2018. [↑](#footnote-ref-32)
33. Reference from ACLU, Business Journal, Me Too go here. [↑](#footnote-ref-33)
34. Again, after removing the single case classified as “other” [↑](#footnote-ref-34)