



## SPARC DALLAS

### Initial Findings from Quantitative and Qualitative Research

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Center for Social Innovation (C4) in Needham, MA for  
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## Background

Racial inequity persists in the United States despite significant attention to this issue over past decades. Recent assessments of the contemporary racial dynamic suggest that racism has not declined but has instead become less overt.<sup>1</sup> One manifestation of the nation's current racial realities is that people of color are disproportionately represented in the homeless population. Black people, in particular, are more likely to become homeless than people of other racial and ethnic backgrounds. Although Black people comprise 13% of the US population and 26% of those living in poverty, they account for more than 40% of the overall homeless population.<sup>2</sup> This suggests that poverty rates alone do not explain the over-representation of Black Americans in the homeless population. Furthermore, Black men remain homeless longer than White or Hispanic men.<sup>3</sup>

Homelessness reflects the failure of our social systems to serve people equally in housing, education, health care, and justice. The Center for Social Innovation (C4) launched Supporting Partnerships for Anti-Racist Communities (SPARC) in 2016 in response to overwhelming evidence that people of color were dramatically overrepresented in the nation's homeless population—across the country and regardless of jurisdiction. The SPARC initiative focuses on using mixed methods research to identify how people are experiencing the accrual of systemic racism and to leverage that knowledge towards systems transformation. The purpose of this report is to present initial findings from our work with Dallas, Texas. A national report is available online and pulls data from across all SPARC communities.<sup>4</sup>

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<sup>1</sup> Bonilla-Silva, E. (2006). *Racism without racists: Color-blind racism and the persistence of racial inequality in the United States*. New York: Rowman & Littlefield Publishers.

<sup>2</sup> US Census Bureau. (2013). Current Population Survey; Carter III, G.R. (2011). From exclusion to destitution: Race, affordable housing, and homelessness. *Cityscape*, 33-70.; US Department of Housing and Urban Development. (2015). *The 2015 Annual Homeless Assessment Report to Congress: Part 1*. Washington, DC.

<sup>3</sup> Carter III, G.R. (2011). From exclusion to destitution: Race, affordable housing, and homelessness. *Cityscape*, 33-70.; Molina-Jackson, E. (2007). Negotiating homelessness through the saliency of family ties: The personal networking practices of Latino and African American men. *J Social Distress and Homeless*, 16(4), 268-320.

<sup>4</sup> Center for Social Innovation. (2018). *SPARC Phase One Study Findings*. <http://center4si.com/wp-content/uploads/2018/03/SPARC-Phase-1-Findings-March-20181.pdf>



## Glossary of Terms

**Racism** - A system of advantage/oppression based on race. Racism is exercised by the dominant racial group (Whites) over non-dominant racial groups. Racism is more than just prejudice.

**Inequities** - Differences in outcomes between population groups that are rooted in unfairness or injustice.

**Equity** - A situation where all groups have access to the resources and opportunities necessary to eliminate gaps and improve the quality of their lives.

**Racial Equity** - “Closing the gaps” so that race does not predict one’s success, while also improving outcomes for all. Equity is distinct from equality in that it aspires to achieve fair outcomes and considers history and implicit bias, rather than simply providing “equal opportunity” for everyone. Racial equity is not just the absence of overt racial discrimination; it is also the presence of deliberate policies and practices that provide everyone with the support they need to improve the quality of their lives.”<sup>5</sup>

**Antiracism** - “An action-oriented, educational and political strategy for institutional and systemic change that addresses the issues of racism and the interlocking systems of social oppression (sexism, classism, heterosexism, ableism).”<sup>6</sup>

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<sup>5</sup>George J. Sefa Dei, *Power, Knowledge and Antiracism Education*, ed. George Sefa Dei and Agnes Calliste (Halifax: Fernwood, 2000), 13.

<sup>6</sup> Maguire, Angus. “Illustrating Equality vs. Equity.” Interaction Institute for Social Change, 13 Jan. 2016, [interactioninstitute.org/illustrating-equality-vs-equity/](http://interactioninstitute.org/illustrating-equality-vs-equity/)



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## 1. Executive Summary

Beginning in October 2016, the Center for Social Innovation (C4) partnered with the Metro Dallas Homeless Alliance and other service providers to amplify the issue of racial inequity and homelessness. This partnership included convening a town hall meeting, hosting a provider training, facilitating a planning session of community leaders, and collecting local data.

In the Dallas planning session of community leaders, stakeholders from homeless service organizations identified three “Structural Change Objectives” for our work to address racial inequity in our system, including:

1. **Strengthening opportunities for economic mobility** in communities of color in the Dallas Metro area.
2. **Folding equity measures** into the Continuum of Care’s long-term Strategic Plan to End Homelessness.
3. **Diversifying leadership and board membership** in the Continuum of Care and other service providers.

As part of the effort to better understand the intersection of racism and homelessness in Dallas, C4 worked with Metro Dallas Homeless Alliance to collect qualitative and quantitative data that would elucidate the racial dimensions of homelessness in the area. Data collection included:

1. Homeless Management Information System (HMIS) data from fiscal years 2011 to 2016.<sup>7</sup>
2. An online demographic survey of homeless service providers.
3. Qualitative research, including 23 individual interviews with people of color experiencing homelessness and three focus groups comprised of providers, stakeholders, and people experiencing homelessness.

This report presents preliminary findings from this research. In the Discussion, we present promising directions for potential systems change and further research, and in the Recommendations, we outline potential short term and long-term action steps for programs, the Metro Dallas Homeless Alliance, and the City of Dallas. We also explore the links between the data and the objectives identified by the Dallas community leaders.

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<sup>7</sup> HMIS includes client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.



## 1.1 Summary of Preliminary Quantitative Findings

- Our analyses of HMIS data from the Dallas Continuum of Care for fiscal years 2011-2016 explored the demographics of people experiencing homelessness compared to people in poverty and the general population, racial/ethnic disparities in location prior to homelessness and destination at exit, and race/ethnicity as a predictor of exit destination. Our findings include:
  - Though the Black population in Dallas constitutes 18.7% of the general population, this group is overrepresented among those living in deep poverty (30.7%) and among people experiencing homelessness (66.7%). The disparity between the percentage in poverty and those experiencing homelessness suggests that poverty alone does not explain the overrepresentation of Black people in the population experiencing homelessness.
  - On the other hand, Whites constitute 63.2% of the general population but are slightly underrepresented in the deep poverty group (49.5%) and drastically underrepresented among the homeless population (29.8%).
  - Looking at prior location of families, Black individuals in households were slightly underrepresented in group entering from “permanent housing, no subsidy.” Conversely, White and Hispanic/Latinx<sup>8</sup> individuals were slightly overrepresented in entering from the “permanent housing, no subsidy” location.
  - The most common prior living situation for young adults was “doubled up” (48.3%). Across the “doubled up” experience, race/ethnicity groups were generally proportional, though Hispanic/Latinx were slightly overrepresented. White individuals under 24 disproportionately came from the “institutional care” location.
  - Black individual adults 24 years and older were slightly overrepresented in the population that entered from doubled-up situations.
  - When looking at exit destination, Black families were slightly overrepresented in the population exiting into “permanent housing with a subsidy,” while Whites and Hispanic/Latinx families were underrepresented. In fact, logistic regressions showed that, compared to Whites, Blacks were more likely to exit into permanent housing with a subsidy at rates of 57%. Conversely, individuals identifying as Hispanic/Latinx were 32% less likely to exit into permanent housing with a subsidy.

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<sup>8</sup> Latinx is a gender neutral term used in lieu of Latino or Latina.



- Compared to White individuals, Blacks and Asians were 26% and over two times (OR=2.47,  $p<.01$ ) more likely, respectively, to exit into permanent housing without a subsidy. Hispanic/Latinx were also 26% more likely to exit into housing without a subsidy.
- Looking at exit destination of individuals under 24 years of age, Whites were considerably overrepresented in the “institutional care” group while Black young adults were underrepresented.
- Across all household type, Blacks were 23% less likely to exit into homelessness and Native Hawaiian and Other Pacific Islanders were almost three times (OR = .34,  $p<.05$ ) less likely to exit into homelessness compared to Whites. Conversely, those reporting Two or More Races were 48% more likely to exit into homelessness.

The findings point to the need for research that examines returns to homelessness, housing stability once exit to housing is documented, and the way age, gender, and other factors interact with race to impact people in intersectional ways.

## 1.2 Summary of Preliminary Qualitative Findings

Interpretation of qualitative data focused on pathways into homelessness and barriers to exiting homelessness.

1. Pathways into homelessness were often characterized relationally and involve:
  - *Network impoverishment*: It is not just that respondents were experiencing poverty —everyone they know was experiencing poverty too.
  - *Family destabilization*: Strains on social support were often deep, damaging, and exacerbated by systems’ involvement.
  - *Intimate partner violence*: Narratives of violence, particularly intimate partner violence (IPV), were common in the narratives of people we interviewed — particularly women.
  - *Health*: Instability and trauma correlated with mental health and substance use issues, while medical health issues were also common in respondents’ narratives.
2. Barriers to exiting homelessness are often systemic and include:
  - *Criminal justice involvement*: A criminal record limited housing and employment options for participants.



- *Economic immobility:* People find it difficult to secure employment that pays a housing wage.
- *Lack of quality affordable housing:* People cannot afford the increasing rent and, furthermore, feel less motivated to try due to poor housing quality.
- *Difficulty navigating the system:* People are frustrated with program requirements and find it hard to get what they need from public assistance.

### 1.3 Provider Survey

To support Dallas with its structural change objective of supporting and developing leadership of color in homeless service agencies, we also conducted research on staff demographics and needs. Through an online survey we collected data on the background of providers working in homelessness response programs and their self-reported desires for professional development. In addition, we sought to understand how people perceive the issue of race in service settings through semi-structured focus groups and interviews. Our analyses of an anonymous online survey of homeless service providers found:

- In the sample of Dallas providers surveyed who reported racial identity (n=63), 60.3% identified as White and 30.2% identified as Black; this is a stark comparison to 66.7% of the homeless population identifying as Black and 29.8% as White.
- Ten of the twelve Executive Directors and seven of the ten Administrators (defined as all administrative roles except Executive Director) identified as White. When asked to report their opinion on how the demographics of leadership reflect the people served, about half (46.9%) agreed that the race/ethnicity of senior managers reflect the race/ethnicity of clients.
- There were some race differences in reported professional development needs that might reflect lack of leadership pathways for people of color. Compared to people of color, White respondents indicated at a greater rate that they needed grant writing and fundraising skills to excel in their current position or advance their careers.
- When asked what barriers might exist when considering professional development opportunities, people of color more often indicated compensation for time and challenges fitting it into busy days. This points to a need for strategies for supporting staff with financial and scheduling concerns.

The entirety of our provider needs analysis can be found in the Appendix (Dallas Homeless Service Providers Diversity & Inclusion – Mixed Methods Findings).





## 1.4 Recommendations

Based on these data, preliminary recommendations include the following, which are detailed further in the report:

1. Design an equitable Coordinated Entry system.
2. Incorporate racial equity into grantmaking and contracting for homelessness and housing programs.
3. Include racial equity data analysis and benchmarks in strategic planning to end homelessness.
4. Support organizational development to ensure racial equity at the organizational level.
5. Encourage anti-racist program delivery.
6. Promote ongoing anti-racism training for homeless service providers.
7. Collaborate to increase affordable housing availability for all people experiencing homelessness.
8. Utilize innovative upstream interventions to prevent homelessness for people of color.
9. Investigate flexible subsidies to mitigate the effects of network impoverishment.
10. Support innovative health care strategies to meet the health and behavioral health needs of communities of color.

## 1.5 Implications

This study is grounded in the lived experience of people of color experiencing homelessness, and it offers numerous insights for policy makers, researchers, organizational leaders, and community members as they work to address homelessness in ways that are comprehensive and racially equitable. The demographics alone are shocking—the vast and disproportionate number of people of color in the homeless population in Dallas is a testament to the historic and persistent structural racism that exists in this country. Collective responses to homelessness must take such inequity into account. Equitable strategies to address homelessness must include programmatic and systems level changes, and they must seriously begin to address homelessness prevention. It is not enough to move people of color out of homelessness if the systems in place are simply setting people up for a revolving door of housing instability. Efforts must begin to go upstream into other systems—criminal justice, child welfare, foster care, education, and healthcare—and implement solutions that stem the tide of homelessness at the point of inflow. This report aims to present quantitative and qualitative findings from SPARC’s work in Dallas, examine what can be learned from these data, and begin crafting strategies to create a response to the homelessness crisis that is grounded in racial equity.



## 2. Preliminary Quantitative Research

For the purposes of this report, analysis of Dallas' HMIS data aimed to answer this initial set of research questions:

1. How do the racial demographics of people experiencing homelessness compare to those in poverty and the general population?
2. How do racial demographics of people experiencing homelessness relate to "prior living situation" at program entry?
3. How do racial demographics of people experiencing homelessness relate to "destination" at program exit?

Our team also looked at whether or not race or ethnicity were substantial predictors of destination type upon exiting the HMIS system, for example, whether or not race or ethnicity are predictors of exiting into homelessness, housing without subsidy, or housing with subsidy.

### 2.1 Preliminary Quantitative Research Findings

The following analyses used HMIS data from the Dallas Continuum of Care for fiscal years 2011-2016. Several slightly different client universes are analyzed in this report, representing a total of 23,334 unique clients with three different household statuses: 1) individuals presenting as part of a household, including heads of households (n=10,403); 2) individuals aged 24 and older (n=10,543); and, 3) individuals under 24 years of age (n=1,820). Univariate and bivariate descriptions below (Tables 1 and 2) represent all household groups. In these tables and descriptions, it is important to note that a variable associated with a head of household may apply to all members of that household, which may skew the data in that characteristics of households with more than one affiliated individual will be given more weight. Tables 3-11, alternatively, describe prior residence and exit destination for all three household groups. Logistic regressions are run on all clients with family group type included in the model as a covariate.

As shown in Table 1, a majority of the study sample (66.7%) were Black, followed by 29.8% White, 0.6% American Indian or Alaska Native (AI/AN), 0.6% Asian, 0.8% Native Hawaiian or Other Pacific Islander, and 1.8% identifying as Two or More Races. Just over eleven percent (11.2%) of clients identified as Hispanic/Latinx. The study sample was 52.5% men, 47.3% women, and 0.2% transgender. The average age was 32 years (Mean=32.32, SD=19.94) ranging from newborn to 90 years. Exactly 12% (12.0%) of individuals reported being a veteran



and 36.8% reported having a disabled condition. Note that the number of valid cases for each variable varies slightly.

Characteristic	N	Percentage
<b>Race</b>		
Black	15,485	66.7
White	6,944	29.8
American Indian or Alaska Native (AI/AN)	141	0.6
Asian	142	0.6
Native Hawaiian or Other Pacific Islander (NHOPI)	119	0.5
Two or More Races	413	1.8
<b>Ethnicity</b>		
Non-Hispanic/Non-Latinx	20,677	88.6
Hispanic/Latinx	2,608	11.2
Doesn't Know/Refused/Missing	48	.2
<b>Gender</b>		
Female	11,027	47.3
Male	12,255	52.5
Transgender (male to female)	46	.2
Transgender (female to male)	4	.0
<b>Age</b>		
Average Years (SD)	32.32	(19.94)
<b>Veterans Status</b>		
Yes	2,793	12.0
<b>Disabling Condition</b>		
Yes	8,577	36.8
No	12,218	52.4

Note: Frequencies of some characteristics may not add up to total n due to missing cases.

**How do the racial demographics of people experiencing homelessness compare to those in poverty and the general population?**

Table 2 shows a comparison, by race, of ACS general population distribution, poverty threshold distribution, and HMIS and point in time (PIT) homeless counts. Though the Black population in Dallas constitutes only 18.7% of the total population, this group is



overrepresented among people living in poverty (at both the 100% and 50% poverty threshold, at 26.0% and 30.7%, respectively) and among people experiencing homelessness by both the HMIS and PIT counts (66.7% and 60.2%, respectively). On the other hand, Whites constitute 63.2% of the total population but are underrepresented in both poverty groups (53.5% and 49.5%, respectively) and more drastically underrepresented among the homeless population counts, representing only 29.8% of the HMIS sample and 33.1% of the PIT sample. Asians are slightly underrepresented in poverty and homelessness, and individuals identifying as NHOPI (Native Hawaiian or Pacific Islander) and Two or More Races have generally proportionate representation across poverty and homelessness counts.

Individuals identifying as Hispanic/Latinx (of any race) are overrepresented in poverty counts, especially in 100% poverty group, constituting half (49.9%) of this group while only representing 33.0% of the total population. However; Hispanic/Latinx individuals were underrepresented in homelessness counts, constituting only 11.2% of the HMIS sample and 13.2% of the PIT counts.

Table 2. Total population, poverty distribution, HMIS, and PIT by race.						
Race	ACS <sup>a</sup> , %	100% poverty <sup>b</sup> , %	50% poverty <sup>c</sup> , %	HMIS, %	PIT <sup>d</sup> , %	
Black	18.7	26.0	30.7	66.7	60.2	
White	63.2	53.5	49.5	29.8	33.1	
AI/AN	0.4	0.4	0.4	0.6	0.9	
Asian	7.5	4.5	5.6	0.6	1.1	
NHOPI	0.1	0.0	0.0	0.5	0.7	
Two or More Races	2.7	3.2	3.1	1.8	4.0	
Hispanic or Latinx	33.0	49.9	40.2	11.2	13.2	

<sup>a</sup> ACS 2015 5yr Estimate  
<sup>b</sup> ACS 5yr 2015 - 100% poverty line  
<sup>c</sup> ACS 5yr 2015 - 50% poverty line (deep poverty)  
<sup>d</sup> 2016 Point in Time homelessness count

### How do racial demographics of people experiencing homelessness relate to “prior living situation” at program entry?

We sought to understand the locations of clients prior to program entry and at final program exit (if program exit occurred as of the end of FY 2016). For the purposes of this report, “program entry” is defined as the first program entry in the dataset for each individual. “Program exit” is defined by last exit in the dataset for each individual where an exit location was identified. Tables 3-5 show residence prior to program entry by race for the following



three client samples: individuals in households; individuals younger than 24 years of age, and individuals 24 years of age and older.

Table 3 below shows the distribution by race and ethnicity of the prior living situation of individuals in households. Of note, the majority (57.6%) of all cases came from an “other” category,<sup>9</sup> 16.5% came from “permanent housing, no subsidy”, and 12.1% came from a homeless situation. Black families were slightly underrepresented in the “permanent housing, no subsidy” location (61.6%). Conversely, White and Hispanic/Latinx individuals were slightly overrepresented in the “permanent housing, no subsidy” location (36.0% and 16.5%, respectively).

		Race/Ethnicity							Percent within prior living situation
		Black	White	AI/AN	Asian	NHOPI	Two or More Races	Hispanic or Latinx	
Prior living situation	Homeless	74.2%	23.2%	0.7%	0.2%	0.5%	1.2%	10.2%	12.1%
	Permanent housing, subsidy	82.5%	14.7%	1.4%	0.0%	1.4%	0.0%	7.0%	1.4%
	Permanent housing, no subsidy	61.6%	36.0%	0.5%	1.0%	0.5%	0.5%	16.5%	16.5%
	Institutional care	39.0%	51.2%	0.0%	0.0%	9.8%	0.0%	26.8%	0.4%
	Correctional facility	80.0%	0.0%	0.0%	0.0%	20.0%	0.0%	20.0%	0.0%
	Doubled up	79.2%	17.5%	0.3%	0.4%	0.7%	1.9%	10.4%	6.7%
	Transitional setting	75.7%	22.3%	0.2%	0.5%	0.0%	1.3%	10.0%	5.3%
	Other	76.9%	19.1%	0.3%	0.5%	0.5%	2.6%	13.6%	57.6%
Percent within race category		74.1%	22.5%	0.4%	0.5%	0.5%	1.9%	13.2%	100.0%

\*Percent totals across race and ethnicity will not equal 100% because ethnicity is not mutually exclusive from race.

<sup>9</sup> The high use of “Other” may be due to site-specific, programmatic data entry decisions. More research into how programs use HMIS categories is needed to better understand this finding.



Table 4 below shows the distribution by race and ethnicity of the prior living situation of individuals under 24 years of age. In contrast to individuals in households, only 1.9% came from an “other” living situation. The most common prior living situation for this group was “doubled up” (48.3%), followed by homelessness (21.3%) and institutional care (16.8%). Across the “doubled up” experience, race/ethnicity groups were generally proportional, though Hispanic/Latinx were slightly overrepresented (24.6%). Whites disproportionately came from the “institutional care” location, representing 61.1% compared to only 43.0% of this sample. Whites and Hispanic/Latinx individuals were slightly overrepresented in the homeless category. For those individuals coming from a homeless situation, White and Hispanic/Latinx individuals were underrepresented (35.4%), while Blacks were slightly overrepresented (57.6%).

Table 4.  
*Living situation prior to program entry by race for individuals under 24 years of age (N=1,825)*  
 (percent within location)\*

		Race/Ethnicity							Percent within prior living situation
		Black	White	AI/AN	Asian	NHOPI	Two or More Races	Hispanic or Latinx	
Prior living situation	Homeless	57.6%	35.4%	0.0%	1.3%	0.8%	4.9%	14.7%	21.3%
	Permanent housing, subsidy	68.8%	31.3%	0.0%	0.0%	0.0%	0.0%	12.5%	0.9%
	Permanent housing, no subsidy	60.9%	30.4%	1.4%	5.8%	0.0%	1.4%	18.6%	3.8%
	Institutional care	36.3%	61.1%	0.7%	0.0%	0.7%	1.3%	17.6%	16.8%
	Correctional facility	53.2%	42.6%	0.0%	0.0%	0.0%	4.3%	23.4%	2.6%
	Doubled up	54.0%	43.1%	0.6%	0.3%	0.6%	1.4%	24.6%	48.3%
	Transitional setting	60.5%	34.6%	1.2%	0.0%	0.0%	3.7%	14.8%	4.5%
	Other	71.4%	25.7%	0.0%	0.0%	0.0%	2.9%	16.7%	1.9%
Percent within race category		53.0%	43.0%	0.5%	0.7%	0.5%	2.3%	20.4%	100.0%

\* Percent totals across race and ethnicity will not equal 100% because ethnicity is not mutually exclusive from race.



Table 5 below shows the distribution by race and ethnicity of the prior living situation of individuals 24 years of age and older. For this group, the vast majority of individuals came from homelessness (57.4%), followed by “permanent housing, no subsidy” (11.8%) and “doubled up” (11.1%). Across prior living situations, racial and ethnic groups were relatively proportionally represented. The most significant burdens are within the “doubled up” location, where Black individuals were slightly overrepresented (68.8%) and in the “permanent housing, no subsidy” location where Hispanic/Latinx individuals were overrepresented (12.4%).

Table 5.

*Living situation prior to program entry by race for individuals 24 years of age and older (N=10,605)  
(percent within location)\**

		Race/Ethnicity							Percent within prior living situation
		Black	White	AI/AN	Asian	NHOPI	Two or More Races	Hispanic or Latinx	
Prior living situation	Homeless	62.2%	34.5%	0.8%	0.8%	0.4%	1.3%	6.8%	57.4%
	Permanent housing, subsidy	58.0%	38.8%	0.8%	0.0%	0.0%	2.4%	7.4%	2.3%
	Permanent housing, no subsidy	65.5%	31.4%	0.5%	0.5%	0.7%	1.5%	12.4%	11.8%
	Institutional care	46.4%	49.0%	1.4%	0.5%	0.3%	2.4%	6.0%	6.0%
	Correctional facility	53.9%	41.4%	0.7%	0.7%	0.4%	2.9%	12.5%	2.7%
	Doubled up	68.8%	27.6%	1.4%	0.6%	0.3%	1.3%	8.0%	11.1%
	Transitional setting	56.7%	39.0%	0.6%	0.7%	1.0%	2.0%	6.8%	7.6%
	Other	59.2%	32.0%	2.4%	0.8%	1.6%	4.0%	4.0%	1.2%
Percent within race category		61.9%	34.6%	0.8%	0.7%	0.5%	1.6%	7.7%	100.0%

\*Percent totals across race and ethnicity will not equal 100% because ethnicity is not mutually exclusive from race.



## How do racial demographics of people experiencing homelessness relate to “destination” at program exit?

Table 6 shows the distribution by race and ethnicity of the exit destination of individuals in households. The majority exit into “permanent housing, no subsidy” (39.5%) or “other” (35.6%), with 11.5% exiting into “permanent housing with a subsidy” and 10.6% exiting into a “doubled up” situation. Interestingly, very few (1.0%) individuals in this group exited into homelessness. Black individuals were overrepresented in the “permanent housing with a subsidy” group (82.3%) while Whites and Hispanic/Latinx individuals were underrepresented (14.9% and 8.7%, respectively). Race/ethnicity breakdown for “permanent housing, no subsidy” and “doubled up” were relatively proportional to the sample.

Table 6.  
Exit destination by race for individuals in households (N=9,801)  
(percent within location)\*

		Race/Ethnicity							Percent within exit destination
		Black	White	AI/AN	Asian	NHOPI	Two or More Races	Hispanic or Latinx	
Exit destination	Homeless	64.6%	34.4%	0.0%	0.0%	0.0%	1.0%	8.2%	1.0%
	Permanent housing, subsidy	82.3%	14.9%	0.3%	0.1%	0.4%	2.0%	8.7%	11.5%
	Permanent housing, no subsidy	74.4%	22.2%	0.4%	1.1%	0.5%	1.4%	14.0%	39.5%
	Institutional care	65.0%	25.0%	0.0%	0.0%	5.0%	5.0%	30.0%	0.4%
	Correctional facility	64.0%	32.0%	0.0%	0.0%	4.0%	0.0%	8.0%	0.3%
	Doubled up	70.3%	26.6%	0.4%	0.1%	1.3%	1.3%	14.2%	10.6%
	Transitional setting	18.6%	77.0%	0.0%	0.0%	0.0%	4.4%	13.2%	1.2%
	Other	71.8%	25.0%	0.5%	0.3%	0.3%	2.1%	13.7%	35.6%
Percent within race category		74.1%	22.5%	0.4%	0.5%	0.5%	1.9%	13.2%	100.0%

\* Percent totals across race and ethnicity will not equal 100% because ethnicity is not mutually exclusive from race.





Table 7 shows the distribution by race and ethnicity of the exit destination of individuals under 24 years of age. The most common exit destinations were “doubled up”(36.1%) followed by “other” (23.5%), “institutional care” (15.2%), and homelessness (11.3%). Compared to 1.0% of individuals in households (see Table 6), more individuals in this household group exited into homelessness. Very few individuals in this household group exited into permanent housing, regardless of whether it was with or without a subsidy (3.3% and 5.7%, respectively), though Black individuals were overrepresented in exiting to permanent housing while Whites were considerably underrepresented (Hispanic/Latinx individuals were also underrepresented though less considerably than Whites). Whites were considerably overrepresented (65.2%) in the “institutional care” group while Black individuals were underrepresented (33.0%).

Table 7. Exit destination by race for individuals under 24 years of age (N=1,786)  
(percent within location)\*

		Race/Ethnicity							Percent within exit destination
		Black	White	AI/AN	Asian	NHOPI	Two or More Races	Hispanic or Latinx	
Exit destination	Homeless	54.7%	39.3%	0.5%	0.5%	0.5%	4.5%	20.2%	11.3%
	Permanent housing, subsidy	70.7%	25.9%	0.0%	0.0%	0.0%	3.4%	17.2%	3.3%
	Permanent housing, no subsidy	69.6%	23.5%	0.0%	2.0%	0.0%	4.9%	16.0%	5.7%
	Institutional care	33.0%	65.2%	0.4%	0.7%	0.0%	0.7%	23.3%	15.2%
	Correctional facility	43.8%	50.0%	0.0%	0.0%	6.3%	0.0%	12.5%	0.9%
	Doubled up	55.5%	40.9%	0.6%	0.3%	0.9%	1.7%	21.3%	36.1%
	Transitional setting	61.1%	34.7%	0.0%	0.0%	1.4%	2.8%	16.7%	4.0%
	Other	53.7%	41.8%	0.5%	1.2%	0.2%	2.6%	20.0%	23.5%
	Percent within race category	53.0%	43.0%	0.5%	0.7%	0.5%	2.3%	20.4%	100.0%

\* Percent totals across race and ethnicity will not equal 100% because ethnicity is not mutually exclusive from race.



Table 8 shows the distribution by race and ethnicity of the exit destination of individuals. Compared to individuals in households and individuals under the age of 24, considerably more individuals in this household group exited into homelessness, at 22.8%, which was the most common exit destination after “other” (42.0%). Black individuals were slightly underrepresented in exiting into homelessness (57.1%) while Whites were slightly overrepresented (38.3%). Black individuals were slightly overrepresented in exiting into permanent housing (with or without a subsidy, 70.6% and 67.2%, respectively) while White and Hispanic/Latinx individuals were underrepresented.

		Race/Ethnicity							Percent within exit destination
		Black	White	AI/AN	Asian	NHOPI	Two or More Races	Hispanic or Latinx	
Exit destination	Homeless	57.1%	38.3%	1.2%	0.9%	0.2%	2.3%	8.9%	22.8%
	Permanent housing, subsidy	70.6%	26.4%	0.5%	0.8%	0.5%	1.2%	3.6%	8.1%
	Permanent housing, no subsidy	67.2%	30.9%	0.2%	0.5%	0.5%	0.7%	7.1%	13.1%
	Institutional care	50.2%	46.8%	0.9%	0.4%	0.0%	1.7%	6.4%	2.5%
	Correctional facility	73.4%	25.7%	0.0%	0.0%	0.0%	0.9%	4.6%	1.1%
	Doubled up	58.9%	36.0%	1.4%	0.8%	1.0%	1.9%	8.2%	8.2%
	Transitional setting	58.1%	39.4%	0.5%	1.0%	0.0%	1.0%	5.4%	2.1%
	Other	62.8%	34.0%	0.8%	0.5%	0.5%	1.3%	8.2%	42.0%
Percent within race category		61.9%	34.6%	0.8%	0.7%	0.5%	1.6%	7.7%	100.0%

\* Percent totals across race and ethnicity will not equal 100% because ethnicity is not mutually exclusive from race.



## 2.2 Predictors for Exit Destination

To examine the effect of race, ethnicity, and other factors on exiting into homelessness, multivariate logistic regression was conducted. Results are shown in Table 9. Using Whites as a reference group, some race categories were found to have a statistically significant association with the outcome of exiting into homelessness. Blacks were 23% less likely to exit into homelessness and Native Hawaiian and Other Pacific Islanders were almost three times (OR = .34,  $p < .05$ ) less likely to exit into homelessness compared to Whites. Conversely, those reporting Two or More Races were 48% more likely to exit into homelessness.

Age was statistically significantly associated with the outcome such that for every year older, there was a 3% decreased chance of exiting into homelessness. Using females as a reference group, males and those identifying as transgender or other gender category were less likely to enter into homelessness. Specifically, males were 61% less likely and those identifying as transgender were almost three times less likely (OR = 0.36,  $p < .05$ ) to exit into homelessness. Household status was also examined as a predictor of exiting into homelessness. Compared to individuals over 24 years of age, young adults, as well as individuals in a household, were significantly less likely to exit into homelessness. Specifically, individuals under 24 years of age were over five times less likely to exit into homelessness (OR = 0.18,  $p < .01$ ) and individuals in households were 50 times (OR = .02,  $p < .01$ ) less likely to exit into homelessness.

Variables	$\beta$	SE	Wald $\chi^2(1)$	OR (95% CI)
<b>Race</b>				
Black	-0.22	0.05	18.22*	.81 (.73-.89)
American Indian or Alaskan Native	0.26	0.24	1.17	1.29 (.81-2.06)
Asian	0.20	0.27	.56	1.22 (.73-2.05)
NHOPI	-1.08	0.48	5.10**	.34 (.13-.87)
Two or More Races	0.39	0.16	5.88**	1.48 (1.08-2.03)
<b>Ethnicity</b>				
Hispanic/Latinx	0.07	0.08	.65	1.07 (.91-1.26)
<b>Age</b>				
Male	-0.30	0.00	202.22*	.97 (.97-.97)
<b>Gender</b>				
Male	-0.46	0.05	88.308	.62 (.56-.68)
Other	-1.02	0.34	8.92*	.36 (.18-.70)
<b>Household Status</b>				
Individual under 24 years	-1.71	0.10	288.22*	.18 (.15-.22)
Individual in a household	-4.22	0.13	1092.92*	.02 (.01-.02)

Note. OR = Odds Ratio. CI = Confidence Interval. \* $p < .01$ . \*\* $p < .05$



## Predictors for Exiting into Permanent Housing/ Renting with Subsidy

A multivariate logistic regression was run to examine the effect of race, ethnicity, and other factors on exiting into permanent housing *with* a subsidy. Results are shown in Table 10. Using White as a reference group, Black individuals and individuals identifying as Two or More Races were more likely to exit into permanent housing with a subsidy at rates of 57% and 45%, respectively. Conversely, individuals identifying as Hispanic/Latinx were 32% less likely to exit into permanent housing with a subsidy. Age was not significant in the model.

Compared with females, individuals identifying as gender non-conforming (e.g. transgender) were over two times (OR=.40,  $p<.05$ ) less likely to exit into permanent housing with a subsidy. Household status was also examined as a predictor of exiting with a subsidy. Compared to individuals over the age of 24, young adults were more than two times less likely (OR=.41,  $p<.01$ ) to exit with a subsidy, yet individuals in households were 46% more likely to exit with a subsidy.

Table 10. Predictors of Exiting into Permanent Housing <i>with</i> a Subsidy among Clients in HMIS System				
Variables	$\beta$	SE	Wald $\chi^2(1)$	OR (95% CI)
<b>Race</b>				
Black	.45	.07	46.94*	1.57 (1.38-1.78)
American Indian or Alaskan Native	-.17	.39	.19	.84 (.39-1.82)
Asian	-.23	.39	.33	.80 (.37-1.7)
NHOPI	.37	.36	1.07	1.44 (.72-2.90)
Two or More Races	.37	.19	3.90**	1.45 (1.00-2.11)
<b>Ethnicity</b>				
Hispanic/Latinx	-.27	.10	7.18*	.76 (.62-.93)
<b>Age</b>				
	.001	.00	2.02	1.00 (.99-1.00)
<b>Gender</b>				
Male	.05	.05	.83	.36 (.95-1.16)
Other	-.90	.45	4.0**	.40 (.17-.98)
<b>Household Status</b>				
Individual under 24 years	-.88	.14	38.11*	.41 (.31-.55)
Individual in a household	.38	.06	40.38*	1.46 (1.30-1.65)
Note. OR = Odds Ratio. CI = Confidence Interval. * $p<.01$ . ** $p<.05$				



## Predictors for Exiting into Permanent Housing/Renting without Subsidy

A multivariate logistic regression was also run to examine the effect of race, ethnicity, and other factors on exiting into permanent housing *without* a subsidy. Results are shown in Table 11. Using Whites as a reference group, Blacks and Asians were 26% and over two times, (OR=2.47,  $p<.01$ ), respectively, more likely to exit into permanent housing without a subsidy. Hispanic/Latinx individuals were also 26% more likely to exit into housing without a subsidy. Age was statistically significant in the model, but effect size was minimal. Using females as a reference group, males had a 9% increased likelihood of exiting without a subsidy. Household status was also examined as a predictor of exiting into housing without a subsidy. Compared to individuals over the age of 24, young adults were over two times (OR=0.44,  $p<.01$ ) less likely to exit into permanent housing without a subsidy, whereas individuals in households were over four times (OR=4.59,  $p<.01$ ) more likely to exit into permanent housing without a subsidy.

Table 11. Predictors of Exiting into Permanent Housing <i>without</i> a Subsidy among Clients in HMIS System				
Variables	$\beta$	SE	Wald $\chi^2(1)$	OR (95% CI)
<b>Race</b>				
Black	.23	.05	26.08*	1.26 (1.15-1.37)
American Indian or Alaskan Native	-.37	.27	1.87	0.69 (0.41-1.17)
Asian	.91	.20	20.21*	2.47 (1.67-3.67)
NHOPI	-.02	.24	.01	0.98 (.61-1.59)
Two or More Races	-.20	.15	1.81	0.82 (.62-1.09)
<b>Ethnicity</b>				
Hispanic/Latinx	.23	.06	14.17*	1.26 (1.12-1.42)
<b>Age</b>				
	.00	.00	13.68*	1.00 (1.00-1.01)
<b>Gender</b>				
Male	.09	.04	6.05**	1.09 (1.02-1.17)
Other	.92	.73	1.60	2.52 (0.60-10.56)
<b>Household Status</b>				
Individual under 24 years	-.82	.11	51.92*	0.44 (0.35-0.55)
Individual in a household	1.52	.05	855.71*	4.59 (4.14-5.08)
Note. OR = Odds Ratio. CI = Confidence Interval. * $p<.01$ . ** $p<.05$				



## 3. Preliminary Findings from Qualitative Data

### 3.1 Summary

As of March 2018, the SPARC team has launched research in six cities. Across the country, the team has collected 148 oral histories and conducted 18 focus groups. The SPARC team collected 23 oral histories during one week in Dallas in February of 2017. These interviews were conducted entirely with people of color who were currently experiencing homelessness. All respondents were recruited at sites of service delivery in Dallas, although several respondents were unsheltered at the time of their interview. During the same week, the SPARC team also facilitated three focus groups—one for people of color experiencing homelessness, one for direct service providers of color, and one for community leaders in the housing and homeless services systems as well as adjacent systems.

In reviewing the oral history interview data, our approach was to allow themes and concepts to emerge organically from the transcripts, rather than approach the data with any set hypothesis. This method is referred to as a Grounded Theory approach.<sup>10</sup> A team of four reviewers went through each oral history transcript and developed thematic codes. The team used NVIVO software to code the transcripts and run analyses.<sup>11</sup> The majority of our analyses draw on the interviews, but we also include highlights from the focus groups to add additional depth to these findings.

Analyses focused on **pathways into homelessness** and **barriers to exiting homelessness**. We focused on these areas in order to identify potential intervention spaces. Factors that led to homelessness and barriers to exit may be similar depending on the point in time, but we distinguished these factors based on how people answered our questions (e.g., “What led you here?” vs. “What has not been helpful as you try to get housing?”).

1. Pathways into homelessness were characterized relationally and involve:
  - *Network impoverishment*: It is not just that respondents were experiencing poverty — everyone they know was experiencing poverty, too.
  - *Family destabilization*: Strains on social support were often deep, damaging, and exacerbated by systems’ involvement.

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<sup>10</sup> Charmaz, K., & Belgrave, L. (2012). Qualitative interviewing and grounded theory analysis. *The SAGE handbook of interview research: The complexity of the craft*, 2, 347-365.

<sup>11</sup> QSR International. (2012). NVivo qualitative data analysis software. Retrieved from <http://www.qsrinternational.com/product>



- *Intimate partner violence*: Narratives of violence, particularly intimate partner violence (IPV), were common in the narratives of people we interviewed — particularly women.
  - *Health*: Instability and trauma correlated with mental health and substance use issues, while medical health issues were also common in respondents’ narratives.
2. Barriers to exiting homelessness are often systemic and include:
- *Criminal justice involvement*: A criminal record limited housing and employment options for participants.
  - *Economic immobility*: People find it difficult to secure employment that pays a housing wage.
  - *Lack of quality affordable housing*: People cannot afford the increasing rent and, furthermore, feel less motivated to try due to poor housing quality.
  - *Difficulty navigating the system*: People are frustrated with program requirements and find it hard to get what they need from public assistance.

The following sections document these findings.

## 3.2 Pathways into Homelessness

### Network Impoverishment

A recurring feature of respondents’ discussions of their pathways into homelessness was that their narratives demonstrated a striking social dimension. In every SPARC community, people of color had few resources in their networks to draw on should something go wrong. We have begun to refer to this phenomenon as “network impoverishment.” People did not come to experience homelessness solely through a lack of capital; they also came to experience homelessness through fragile social networks. The fragility of these networks contained two main, interacting, weak points: lack of capital and lack of emotional support. The following quote from an interview respondent typifies how lack of capital can strain social support:

INTERVIEWER: Friends can only help so much. Have you found your friends to be helpful at all?

RESPONDENT: I have. I have really good friends. It’s pretty hard to know. Um, I have friends who tell you what you need to hear, instead of what you want to hear. So, that they steered me towards here specifically.

INTERVIEWER: So, they didn’t help you like “hey, come stay here.”

RESPONDENT: No, no because they couldn’t afford it. They – they live from paycheck to paycheck like a lot of people do.



This respondent highlights the presence of support in his social network, as his friends offer practical advice and emotional guidance. Financial limitations, however, get in the way of people offering instrumental support. As the quote above reiterates, there are limited resources in social networks to be able to take in people in need. The following quote similarly highlights this chronic lack of resources, which results in the respondent being unable to stay with her family:

I remember when my sons usually go, "mom you –" "no I am not going to come stay with you, no I am not, no I am not." I will come away and I will baby-sit my grandbabies but no I am not, because after a while I know when I stay with them about three months, "Mom, everybody in here, we got to get us a job."

Both of the above respondents made it clear that it was possible from them to stay with people — provided that they were able to support some of the (increased) costs of the household. This is a consistent pattern in the data: people were not unwilling to double up, to take people in or to live in another person's home — but they did not have the resources to accommodate the additional consumption of resources. There was no extra money anywhere in the respondent's network, and as a result, there was no flexibility in safety nets.

### **Family Destabilization**

In an impoverished social network, family may be present, but they are seen as an unreliable support because members are dealing with their own vulnerability. Family destabilization was another prominent theme in respondents' pathways into homelessness. Family destabilization was often characterized by child welfare and criminal justice systems involvement. The impacts of these systems on the lives of the people we interviewed were often interrelated, so that an experience with one system lead to experience with the other. For example, one respondent recounted her entry into foster care when she was just an infant, due to her mother's involvement with the criminal justice system:

RESPONDENT: If I walk in my aunty house right now they'll be all fine and good for about three days then one of us got to go. It usually be me, but now I know that it might be because I wasn't raised up in the same home with my family members per se, because I was in a foster home until I was like 21 years old.

INTERVIEWER: How come?

RESPONDENT: Because my mom went to jail when I was three months old and she didn't get out until I was nine. And then my mom when she did get a house and everything I started having kids and my sister was living with us and it just been like that all her life.





In the narrative above, the burden of an additional member added to the household eventually strains the family bond so that the respondent has to leave after a few days. Therefore, her aunt's house is not a reliable or permanent form of support, due to a lack of resources within the community network. This social strain is exacerbated by the separation and social isolation this respondent experienced from her family, due to her involvement in the child welfare system from such a young age. Her mother's incarceration exacerbated an already strained familial support system, while her own experiences in foster care further frayed the social ties that may have been able to provide temporary housing.

### **Intimate Partner Violence**

For several of the women of color we interviewed, intimate partner violence (IPV) characterized their experiences of social support collapse and family destabilization. Abuse perpetuated by boyfriends, husbands, and fathers was often brought up in discussions about pathways into homelessness. For instance:

INTERVIEWER: What do you think are the main factors that led you to be homeless?

RESPONDENT: Being abused. My ex had me convicted of felonies, two felonies, two misdemeanor which I had all four of them dropped. He was just totally trying to destroy me, totally trying to destroy me.

INTERVIEWER: So did you live together with him?

RESPONDENT: Yes, I sold my house, moved in with him, help him got back on his feet, helped him fix up his house, cleaned up his crib, get him a brand new car. And then it was like, "I don't need you no more I got everything I got, you know, I need," so.

INTERVIEWER: And did you leave?

RESPONDENT: By him put me in jail, you know, and I learn my lesson. You know, he kept saying that he is the man, he was control and he was the one that was abusive, he took a beer bottle hit it upside his head, I have pictures of it. He strangle me, my sister was on the phone, all this stuff. But when the police came there because he's military trained, he knew how to calm himself down and he made that known to me. I even recorded that to the police didn't matter, I was on his property. So it -- you know, I lost everything behind it.

The above respondent describes physical and financial abuse that left her without the resources to leave the relationship and secure stable housing. In addition, this particular instance of abuse highlights the relationship of IPV to systems involvement and family destabilization. Her partner pressed charges against her, which resulted in her spending time in jail. As she goes on to clarify, being incarcerated significantly hindered her ability to work and gain financial stability:

INTERVIEWER: And what would you say was the main reason that led to your first experience of homelessness?



RESPONDENT: Like I said, being incarcerated, not working, having an income coming in, being able to get into stable environment.

When women face an increased burden to provide for their families, it can make them particularly vulnerable to homelessness. One participant in our Service Provider Focus Group highlighted this increased risk factor for homelessness for women, specifically in connection to experiences of IPV:

INTERVIEWER: Okay, so my first question to the group is, uh, given your knowledge of homelessness and homeless response programs, who do you feel is at the greatest risk for homelessness?

RESPONDENT: I feel women are. And – and I say that because most women – well with the work that I've done, I kind of have seen how things look from in and out, and I say that because I was working in a program to prevent homelessness, and the reasons why things might have gone left in that program, is because either the woman, who was the head of the household, uh, either was abandoned or abused by her husband or partner, or she lost a job, or there was a illness, or just devastating things. Car repair. Childcare issues. So, those kinds of things. So, I saw that in trying to prevent homelessness, but then women were the ones that were truly affected.

## Health

When asked about their pathways into homelessness, people also discussed physical and mental health issues. Descriptions of family destabilization and violence were often deep and damaging, and people described how traumatic experiences exacerbated behavioral and mental health issues. For example, one respondent discussed how the loss of her mother led to substance use which she identified as a factor that contributed to her homelessness:

INTERVIEWER: So, do you know where things started going south? Was it – where do you think it began to go bad?

RESPONDENT: For me? It's probably after my mom died.

INTERVIEWER: Okay, and she died, you said, in '96?

RESPONDENT: Yeah.

INTERVIEWER: Why? Why was that a trigger? You know, like ...

RESPONDENT: I didn't – I started using drugs probably like a year later, I started using drugs.

INTERVIEWER: Oh Okay. You didn't have, you didn't know – you didn't have access to mental health care or someone to help you cope?

RESPONDENT: No, not then, but now I do.

People also described a relationship between medical conditions, social network impoverishment, and family destabilization. People with disabling medical and mental health conditions often rely on public safety nets for support when their own social networks are not reliable. For example:



RESPONDENT: I've been homeless off and on for maybe like five years off and on, because like I used to work but when I used to work before my knees really got bad, see right now I need knee replacements for both of my knees, so it's hard to hold a job and I would get a job because a job was never hard to find but it was hard for me to keep like, you know, lifting things, you know, standing on your feet till I just got to where I gave up on the working part so that made me like homeless because I couldn't have my own place to pay my rent. So, you know, that's why I had to do that, but you know I did get an income you know like Social Security and stuff like that but that took a while too you know.

INTERVIEWER: Took a while to begin?

RESPONDENT: Right, right. But then I got that so I had little income and I would try to get me apartment and stuff like that but you got to pay the full amount of rent because for instance, my check would be 700 something a month right okay, but if I paid rent out of that with about \$600 or something I didn't have anything to make it through rest of the month till I got tired of that. So that's how I did just to say well I guess I'll just live homeless at least that way I could be able to do something because it was hard, it was almost like impossible but I didn't have no other choice because of my circumstances ...

INTERVIEWER: And you said that you were homeless on and off for five years, so where were you in the times that you weren't homeless?

RESPONDENT: Well I tried like when I was getting my check first I was getting my apartment since I changed back there like I want to pay the rent, once I pay the rent and stuff, there's hardly no money left, I still had to live for that month, I just didn't have the money to just stay or just do that to get the apartment and the stuff. You don't have any money to do anything, you can't buy clothes and stuff or stuff that you need and you have to have food and stuff like that too you know. So you do not stay...

This respondent's narrative highlights the frustrations that come with having the motivation, but not the physical capacity, to engage in employment opportunities that could secure stable housing. It points to a failure in the public safety net to be able to support people with physical disabilities. Although he was receiving public benefits, they were not enough to cover both rent and cost of living.

Another respondent reported a similar experience; she was unable to attain labor work due to a medical condition and was finding it difficult to get other jobs:

Do you think I ain't been trying to get a job, sweetheart? I mean you know as you get older there are certain things -- well I know I can't stand up long because of my knees. Working at McDonald's, I know I can't do all that either. Lifting up boxes I can't do that either now and I am not going sit on my ass all day long.

Medical health issues that prevent people from working can also exacerbate fraying social ties – as an individual is unable to work, they are unable to sufficiently contribute to the financial needs of their family or community. The following excerpt from a respondent highlights the intersection between these cross-cutting themes, in her own pathway into homelessness:



INTERVIEWER: What happened?

RESPONDENT: Well, through this life journey of mine, I came here, me and my husband, and my children. Everything was going fine. My husband was –got ill, sick. So, his sickness began to progress. So, and plus me, of making wrong choices in life, it ended me up in prison. So, I've done prison. I went to prison in 2014. 2013. I got out in 2014...When I got released, basically I was homeless then, in a sense, because like I said, my husband, he was real, just sick. So, he was in a nursing home.

INTERVIEWER: Okay.

RESPONDENT: He was in a nursing home, and me being his wife, I couldn't – you know, I couldn't live at the nursing home with him. So, he needed assistance with a person helping taking care of him and I couldn't do that at that time, because I didn't have a stable place to live. I didn't have no job, I didn't have no income. So, I found myself just crying out to the Lord and praying, you know, Lord, what am I to do now?

In the Recommendations section, we propose short and long-term interventions at the system and program level to respond to the needs seen in respondents' pathways into homelessness.

### 3.3 Barriers to Exiting Homelessness

Factors that lead to homelessness and barriers to exit may be similar depending on the point in time. For example, intergenerational poverty, family destabilization, mental and behavioral health issues, and the impacts of trauma were often raised as barriers to exiting homelessness and features of pathways into homelessness. In our analysis, we made the distinction based on how people answered our questions (e.g., "What led you here?" vs. "What has not been helpful as you try to get housing?"). Based on our conversations with respondents, the burden of a criminal record (in particular a felony status), lack of economic mobility, lack of quality affordable housing, and difficulty navigating the systems in the city, rose to the top as significant barriers for people of color experiencing homelessness in Dallas.

#### **Criminal Justice Involvement**

Multiple interview and focus group respondents had been incarcerated and shared the burden of a criminal record. They described difficulties re-entering the community: struggling to find a job, not qualifying for certain types of assistance, rejection by landlords, and strained relationships or fraying of social networks of support.

Okay, this is what I find is a barrier. Okay, I was here. I've been here, and I had, for my homelessness situation, I had got a Dallas Housing voucher that helps you go out and you find a place, try to find a place to live and you know it's low income. Well, that didn't work for me, because they went back to - It's like you can't live, they won't rent you a place to live because



you have a felony on your background. So for me, I wasn't able to use that voucher because every place that I went to turned me down, because of the one felony that I have, which I went to prison for on my record.

A focus group participant recounted a similar barrier in accessing housing services due to their felony status:

RESPONDENT: I got out of prison. Just, I got released from prison. So, . . .

INTERVIEWER: And would you say that there are a lot of folks who you know who are released from um, uh, carceral institutions or from prisons and jails, um, and come directly to shelter?

RESPONDENT: I did. Um, I'm a prime example. Um, I did. And, um, I even got the Dallas Housing Voucher – it's called the Dallas Housing Choice Voucher where I couldn't use the voucher because of the felony that I have got charged with. So I'm still homeless.

These respondents' experiences reveal another pattern our team has begun to recognize in our analysis: even those who receive public assistance are often unable to access the benefits for which they are eligible, either due to their felony status or, as seen above, inadequate program funding.

Felony status was seen as a particularly significant obstacle. Respondents with felony statuses reported substantial difficulty attaining jobs that paid a living wage. For instance, although one respondent we interviewed is a skilled tradesman, his previous involvement with the criminal justice system prevented him from accessing employment opportunities:

I'm a welder by trade. It was a new start for me. I'd just come out here from Atlanta and hoping to start over. When I got here ... I started diligently searching for work and did all of the online things when I still had phones and all of that. And it just didn't work out for me because of my past I guess. I had been convicted of a felony in -- years back, you know, back in 2010 I think it was. I found that very hard to get my foot in the door as far as jobs go. You go to a job and they ask you, "Have you ever been convicted of a felony?" All of the sudden, they want to do a background, and then I wasn't considered for work.

Despite his motivation and capacity to find vacancies and initiate applications, his progress is blocked once questions regarding felony status come up. Because he was unable to find work that fit his qualifications and experience, this respondent eventually relied on menial and temporary work. These jobs, however, did not provide an adequate salary to make ends meet. He elaborates:

So that in itself was a failure -- trying to do the job that I was experienced at, and then eventually started going to these temp services. And these temp services is another thing where they lay



everything, so you basically gas money to get you from point A to B, and if you don't do that on a daily basis, you find -- you're constantly falling backwards. For me, I started losing things, I started having problems with my car and lost my phone, car broke down and I found myself -- for a long time, I stayed in my car. Then I finally started seeking shelter.

A focus group participant described the feelings of frustration and hopelessness that accompany previously-incarcerated folks as they seek employment and housing:

We continue to kick Black men out of society ... and we arrest Black people in inordinate numbers in our society, and what you're going to see is you're going to see Black men who cannot get in -- back into society ... When you kick people out of a society, what do you expect from those people? You expect a higher degree of recidivism because you have people who just don't give a damn. No matter what you do, no matter how good you are, you can never get back into society.

### **Economic Immobility**

Regardless of a criminal record, people discussed lack of economic mobility as a significant barrier to exiting homelessness. Respondents often had extensive job histories, but those jobs rarely paid adequately or provided full time hours. Many respondents had degrees or certifications in a variety of fields, but they were still unable to sustain employment with livable wages. The following excerpts from two different interviews summarize these issues:

INTERVIEWER: So what do you think should or could be done to change the situation and prevent homelessness from happening to people of color?

RESPONDENT: In my opinion, I think the area of jobs, jobs just not being where people of color can actually get them. It has a lot to do with a lot of people being homeless. I mean, in my opinion, it's just that the job market used to be there and now it's not. It's like we're in this continuum depression or something. It's just-- it's crazy. I mean, you've got lots to work out, you've got lots of people advertising help wanted, but nobody's actually hiring. Why? Were these people not qualified to do backbreaking work or labor or any part of that? I don't understand it.

INTERVIEWER: And you said you did get a degree in accounting.

RESPONDENT: Yes ... but it's so hard getting a job. That's what I can't understand. I mean we're now like taking -- thinking about going studying something else, you know, something hospitality or something in hotel you know because those -- the hospital is going to always be there and there's always going to be hotel. So there's like I got to re-focus and re-train my mind like, "hey just don't be stuck in accounting and do take whatever comes up." That's where I'm at now.

The first respondent continuously sees potential opportunities for employment, but these do not materialize into tangible jobs. Importantly, he emphasized not only increased availability of



jobs, but increased access to jobs for people of color, as a primary space in which change could be made to prevent homelessness. The second respondent touches on another key finding – that despite a college degree and experience in a skilled field, she was unable to secure employment and felt she needed to receive additional training in order to secure dependable employment opportunities. This touches on another important theme that emerged in respondents’ conversations regarding employment: job readiness. The employment field is changing significantly, and respondents raised the need to be trained in skills that will prepare them for jobs that are actually available and attainable. Another respondent highlighted this priority as well:

INTERVIEWER: What kind of education do you think you need?

RESPONDENT: Well basically to get our high school diploma -- well for number one to get our high school diploma and everything. And maybe -- I know some chicks up in there right now that got high school diplomas and everything, they're still up in the same situation, so.

INTERVIEWER: What else?

RESPONDENT: Let's see. Some type of -- instead of just pushing us out there, just have like a job readiness program more or less like, you know for the ones that will be looking for jobs have they be looking for jobs that we want to learn, you know, like basic skills like computers and stuff, you know.

The above respondent recognizes that having a degree is not a guarantee for employment, so he highlights the importance of receiving training in relevant skills to today’s economy, such as “computers and stuff.” Respondents also identified low wages and poor working conditions in the job opportunities that were available. It is worth noting that a few respondents cited that where they felt the most racial discrimination was in employment. The quote below from two different interview respondents we interviewed is a clear example:

INTERVIEWER: What led you to becoming homeless?

RESPONDENT: A lot of things, not trying to save money, spending money, running up my credit cards and I had people harassing me. And that took a toll on me too.

INTERVIEWER: What do you mean they were harassing you?

RESPONDENT: It was an organization, the company that I worked for. They were still harassing me. What happened was that they I couldn't do my work they like to play games it was started off as game playing and I just got tired of it they would ---

INTERVIEWER: This is at your job?

RESPONDENT: Yeah this was at the job that I worked there and I reported it to the plant manager and he told me, he said “Roxanne, this is not right.” I was taking pictures and I was taking ‘em and showing them to me, and I was telling him, “I know who did this, this girl name [Redacted Name].” I said, “she is harassing me and she is not leaving me alone.” She would spit [inaudible] she would spit on my paperwork, she would take my clipboard that I had paperwork on, she would take it and stomp her foot. That’s her way of calling me dirty because I was of color.



Respondents repeatedly made it clear that while sometimes in the world of service provision racial bias seemed nuanced or difficult to track, it was more apparent in employment and housing.

### **Affordable housing**

Another barrier to exiting homelessness was the lack of access to affordable housing. People continually spoke of experiences of discrimination when applying for affordable housing, citing bias by landlords or building managers. The following two excerpts highlight two different points in which discrimination can affect people of color's housing outcomes. One respondent describes an environment in which White applicants are given priority over Black applicants for housing vouchers, while another respondent recounts applying for housing through her Dallas Housing Authority (DHA) Voucher but was told that there were no units available once she arrived to look at the apartment:

INTERVIEWER: Um, have you seen yourself ever affected like in ways that speak to racism or discrimination in terms of accessing services? Like how has that been for you?

RESPONDENT: With vouchers. You know we get passed by by vouchers. You see certain groups of people getting vouchers than others.

INTERVIEWER: Oh really?

RESPONDENT: Yeah, and that happens. I've seen – white – yeah, the white ones get theirs real fast.

INTERVIEWER: Where do they get them from?

RESPONDENT: I don't know where they get them from. I try not to be nosey. INTERVIEWER: Didn't you get a voucher?

[RESPONDENT: I got – I got some -I work through [Redacted Program]. They own their facilities. Their housing stuff. So, I didn't have to go through that voucher thing. But yeah, if you're white you get yours a lot faster.

I took my housing, DHA voucher, over to like a place where there is mostly Hispanics. They don't want no black people around and they will not rent to you. They will say, "that apartment is already taken," before they let you try to get that apartment. Or, you didn't get approved.

A participant in our service provider focus group also touched on the problem of discrimination in housing, specifically in regard to individuals with felony status:

I think there should be something in place in systems, especially if they've been incarcerated for a crime unjust or just. It is how do we help them get back and not continue to live a lifestyle of failure and homelessness? And I don't – I don't think that happens, particularly with African-Americans because when we look at some of them are in – just there, and they come out and they get a little bit of money. But then again, here it is they- they've already been marked. And it's difficult to get housing and apartments if you have X-amount of felonies. And you get second





chance apartments, but those second-chances are not any place where we would want to live. So, they say I choose not to live there. And I might as well live homelessness and hang out on downtown Dallas.

In cases when respondents did obtain vouchers and successfully found housing, they often expressed dissatisfaction with the condition of apartments. As the provider above highlights, many individuals are only given housing options where they are forced to pay the majority of their income for a place in a “bad” neighborhood known for violence and drugs. In some cases, respondents expressed concern that they would relapse into substance use and/or homelessness because of their new housing environment. For example, one respondent had this to say:

Most places do not have anything available or they do not accept DHA vouchers or the DH voucher is not enough to cover the apartment cost. And it's just been a lot of factor. And I'm trying to get out in an area like a walker target area which is like a more of an area like [Redacted Location] or [Redacted Location] where the crime area -- they try to -- they try to angry the homeless into that type of environment. So really trying to move up in those area, I don't want to be in a area where there is lot of in and out traffic, drugs. I mean you're going to have drugs everywhere and alcohol, but I mean in a more nicer area.

The above excerpt highlights the frustration of only having access to undesirable living environments, but it also touches on the difficulty of finding housing, even with a DHA voucher. Another respondent discussed her difficulty finding a landlord to accept her housing voucher:

INTERVIEWER: How did you find out?

RESPONDENT: Go to apartments, they are going to apartments start to find section 8 apartment and seein', and my affordability amount was correct, if it matched, then I can move in they kept asking me, "What kind of voucher do you have?" I'm like, "Section 8 voucher." and I didn't know like what to say and they would have to look at my voucher and be like "Oh no we don't accept that."

INTERVIEWER: And so what kind did you have you had the regular Mobile Section 8 one?

RESPONDENT A regular one.

INTERVIEWER: Yeah regular Section 8.

RESPONDENT: Yeah regular Section 8 voucher.

INTERVIEWER: So they didn't take that one?

RESPONDENT: No lot of places didn't take it, like it all depends on the apartment.

INTERVIEWER: Okay, so they wouldn't take Section 8 tenants is what they are saying?

RESPONDENT: Yeah it all depends on the apartment...A lot of apartments, they wouldn't agree to *your* Section 8 voucher because each voucher is different. I don't have a kid, so my affordability amount will be smaller. And it also depends on zip codes. Zip codes and housing pays what they think apartments are worth, not what the apartment say they are. So a lot of apartments say, "I don't - that affordability amount is too small, it's like me losing, I will be losing



\$200, \$300 on rent then I can have somebody that pay the full amount.” So lot of apartments say no and because I don’t have a kid, my affordability amount will be small.

The above narratives suggest that housing vouchers in and of themselves are not necessarily sufficient to secure housing due to the process that calculates the affordability amount. The following respondent also describes how difficult it can be to receive a voucher in the first place:

INTERVIEWER: During that time, what services have you accessed? So let’s talk a little bit about that and what that experience was like. Accessing, applying for, and getting.

RESPONDENT: DHA, Dallas Housing Authority. I had applied for that on many occasions. First time, I was at [Redacted Program] and I slipped through the cracks through that and another housing program.

INTERVIEWER: What do you mean you slipped through the cracks?

RESPONDENT: For some reason, my name just never came up. Slipped through the cracks. Everybody else was getting their vouchers and whatever, and I am like “Okay, where is my name?” I think on that one, my case manager didn’t turn my name in to that for the first time, to DHA. The second time, under my roof, something happened with the vouchers. I had actually talked to them and she said – oh, my file got misplaced. I had talked to them and everything, and we never could get on track with that. So, I slipped through the cracks with them. So, I just said, you know what, forget that then. Then, some years later, I ended up signing back up

The issue of housing stock is especially important in the case of people with prior criminal justice system involvement, living with substance use disorders, or families with children. The ability to live in desirable neighborhoods relates to people’s perceived ability to avoid violence, exposure to drugs, and quality educational opportunities. As we look to create opportunities for people to exit homelessness it will be critical to continue to link these strategies with larger efforts to improve low-income housing accessibility and create more mixed-income neighborhoods.

### **Difficulty Navigating the System**

Respondents’ reported difficulty obtaining and using housing vouchers is in line with a larger theme that emerged in Dallas. One of the most frequently discussed barriers to exiting homelessness was a general difficulty navigating the service system. Participants felt confronted with burdensome and inequitable qualifications and requirements for services. Individuals with whom we spoke discussed the persistence it took to finally receive services and the frustration felt when waiting lists were long. For example:

INTERVIEWER: Have you ever had any trouble finding housing or getting services?



RESPONDENT: With the housing, I had trouble with that. Cause, like I said, I went to [Redacted Program] and I talked to their case workers over there and they said, "You're not eligible because you're not physically, mentally disabled or have some kind of handicap." And I said, "What's that got to do with me being homeless?" Just because I'm not sick and I'm not crazy, I'm still homeless, I need help. He said I don't fit the-- wasn't qualified, I didn't fit the criteria. So I didn't give up. I just said, at some point, somebody's going to have to help me keep going. They're going to help me because I'm not going to give up and be persistent and keep trying.

This quote touches on a particular experience which came up frequently in our interviews: the impression that folks are being tested by programs, and continuously failing to pass. Being turned away from services due to program criteria was a common feature amongst many respondents' narratives across SPARC communities. This pattern was consistent in Dallas as well. This theme was reiterated by a participant in our stakeholder focus group, who described some of the requirements for services in the programs they oversee:

Well you have to have children. So, we don't have any resources for single people that are experiencing homelessness. You have to have children. Um, you have to be willing and able to work. Um, you have to have legal custody of your children. We have to have proof that you have legal custody of your – of your children. Um, you have to be, um, open and agree to financial literacy training. Um, so those are just some of the initial qualifiers when people call and they want to be a part of our program. And then once a family is accepted, and we don't have like – there's usually a five to seven day move-in process.

As the focus group participant indicated, many programs prioritize clients in a way that leaves others having to fight particularly hard to receive the support they need to exit homelessness. In addition, people felt like program requirements were sometimes a burden that made it harder to succeed. One respondent had this to say:

RESPONDENT: I went to this other shelter and they wanted to try to entrap me in one of their programs there.

INTERVIEWER: You said, entrap you in one of their programs?

RESPONDENT: Yes, because actually some volunteers came through. They found out what my profession was. The man tried to set me up to get a job, because I was under contract with this one shelter, the work to stay program. I was contractually obligated to them to fill out that contract. They sat there and told me I could not go to work.

INTERVIEWER: Why?

RESPONDENT: Because I was working for them in their kitchen. I said, "I am not working. I don't get paid to do this. I am a volunteer." They said, "It's paying for your bed." So, really, eight hours a day, I was in that kitchen, working for them and could not go get a regular job, because I was in a work to stay program, which was paying for my bed. So they kept me trapped there.



For the above respondent, a “work to stay” program requirement barred her from finding paid employment, and therefore being able to move towards exiting homelessness. She was put in a position where she had to choose between seeking opportunities for economic mobility and securing shelter. The respondent notes her preference for obtaining a “regular job” and highlights the negative experience she had at the program by framing it as entrapment. When reflecting on the capacity of services to effectively respond to the needs of their clients, a participant in our service provider focus group had this to say:

So, you know what? What do systems do to help that? And I – I believe, personally, that we don’t do enough. We say, “Okay go out here, you have to get this, you have to get this.” It’s not available.” It’s just - unfortunately, it’s just not there. And then it’s not enough. Not enough housing. It’s not enough resources.

Both clients and providers feel an acute scarcity in resources available and see how discouraging the process can be — “go out here, you have to get this, you have to get this, this is not available.” When people feel like the system is set up to make them jump through hoops rather than support them, overcoming homelessness and sustaining housing is difficult. As Dallas reflects on new strategies to end homelessness, it will be important to incorporate these experiences into the solutions.



## 4. Discussion: Promising Directions

The sections above report SPARC's initial quantitative and qualitative findings on the experiences of homelessness of people of color in Dallas. The qualitative themes emerged from the data independent of the Structural Change Objectives selected by Dallas' SPARC working group. As mentioned in the executive summary, Dallas chose to focus on three areas of structural change:

1. Strengthening opportunities for economic mobility in communities of color in the Dallas Metro area.
2. Folding equity measures into the Continuum of Care's long-term Strategic Plan to end homelessness.
3. Diversifying leadership and board membership in the Continuum of Care and other service providers.

The research summarized in this report helps guide this work and suggests additional areas for short and long-term action. The stories we heard repeatedly demonstrated that the network impoverishment of communities make homelessness seem inevitable. In this context, how does the community strengthen these networks? What are the necessary investments to build assets in communities of color? How do the city and county return economic mobility to some of its most disenfranchised citizens? How does that work flow through an anti-racist lens so that it is strengths-focused and empowerment-based rather than paternalistic? How do systems interact to effectively serve people with medical and mental illness?

As we continue to explore the data from this initiative, we are aware that a number of research questions deserve additional attention. In the next section, we discuss the implications of our findings and highlight potential areas of future research on race and homelessness. In the final section, we identify a concrete list of recommendations.

### 4.1 Economic Mobility for Communities of Color

Economic mobility is clearly a pillar of ending homelessness but remains elusive in many communities. As was detailed in the qualitative section of this report, respondents often had a rich job history, but had a great deal of difficulty securing employment that would pay a living or housing wage. Barring a significant shift in federal or state policies regarding minimum wage, it is unlikely that our current workforce development approach will be sufficient to end homelessness. Simply put, if someone comes to experience homelessness while working for



minimum wage, transitioning to a different minimum wage job will not make a substantial difference in their life.

The SPARC team has begun to examine in greater detail what respondents had to say about their employment history and employment search. One area requiring more analysis is employment discrimination. Unsurprisingly, respondents have repeatedly reported experiencing interpersonal racism over the course of their job searches. They have also discussed the role of systemic racism in preventing them from attaining career-track jobs, reporting, for example, inequitable access to education or skill development (including vocational training).

As we continue to investigate concrete and immediate steps that we could take in order to drive change in our communities, the SPARC team has begun to look more closely at the way communities spend workforce development dollars. A potential direction to take workforce development would be to reduce the size of cohorts moving through programs and intensify the skills being acquired. For example, rather than moving 150 people through a soft skills development program it might be more beneficial to move 20 people through a UX (user experience) design code academy that is connected to a job placement possibility at several design or technology firms.

Additionally, as mentioned above, it will be important to think about what economic stabilization looks like. Our findings point to upstream intervention sites that are community-based and focused on stabilizing fragile networks through necessary infusions of capital—either through targeted subsidies, flexible emergency funding, or policies that better facilitate pooling income.

Finally, we should consider how soft skill development programs are frequently constructed around behavioral norms for professional conduct that have been established and advanced by White people. What does it mean to engage a 17-year-old Black person in a program that essentially tells them that their way of interacting the world is the wrong way?

These kinds of questions are important to consider in the construction of workforce development programs but also with regard to the ways in which we consider advancing staff of color on our teams. As we examine why certain staff members do or do not advance, an important consideration must be whether or not they are being passed over because they are not cultural matches with senior leadership. As one respondent stated, “Senior managers want to know that the people around them will think like them and respond to situations the same



way that they would. Sometimes it seems like they don't choose Black staff or staff of color to advance because they don't think we're enough like them culturally."

As we continue to break down the ways in which interpersonal and structural racism exacerbate each other, it could be helpful for programs to engage in honest dialogue about how personal bias might be enabled by structural factors. In the case of supporting people of color in their job search, it might be understanding a person's context and giving second chances, rather than saying, "They've had three weeks to get an interview and they still haven't." With regard to staff of color, it might mean re-working job descriptions rather than saying, "I'm not promoting them because they don't have a B.A.—not because they're Black."

## 4.2 Upstream and Downstream Stabilization

Our qualitative data suggest that destabilizing factors often occur well before people come to experience homelessness. Upstream stabilization may be best achieved through the development of short-term flexible subsidies. People do not always need large amounts of money, or even money that is dedicated specifically towards housing or utilities. Many respondents expressed having initial difficulty with a non-rent related financial burden. Common examples have been car repairs or food. However, without the money to pay for these non-housing areas, a crisis can rapidly develop. Respondents who cannot pay for their car repairs may be unable to get to work and subsequently lose their jobs, or those who cannot afford food for the whole household may kick adolescents or emerging adults out of the house in order to free up resources for the very young or very old.

Stabilizing these households who are on the precipice requires immediate infusions of capital. However, these subsidies have to be uniquely flexible to cover a wide range of one-time needs. This might represent expanding discretionary spending so that community members at risk of becoming homeless have access to it. Moreover, prevention approaches need to be shared among all sectors working with low income folk, so that everyone is preventing crises that lead to housing loss.

Spending models of this kind have existed for many years in the faith community. It is not uncommon for churches to step into exactly the need that is being described. Unfortunately, network impoverishment affects faith communities as well. As the broader community has less extra money, there is less ability to 'take up the collection plate' in order to meet someone's needs in crisis. In order to address the hemorrhaging of people of color into the population



experiencing homelessness it will be necessary to replenish (or establish) these kinds of community level safety-nets.

Downstream stabilization focuses on securing families or individuals in housing units that they move into after exiting the homelessness response system. In these cases, two things need to be evaluated:

1. Does doubling up make sense?
2. What supports would be necessary in order to facilitate successful family reunification (for people of all ages)?

With regard to doubling-up, we need to begin to ask whether or not (middle class, White) norms of how housing needs to function make sense for all. Communities of color that have a history of living inter-generationally or with other close family or friends may protect against homelessness. Frequently, respondents would discuss being moved into housing on a time limited subsidy knowing that they would not be able to afford the housing once the subsidy ended. We believe this situation to be one of the key drivers of the rapid cycling phenomenon seen within family homelessness. The young women of color typically heading these households are not able to secure an income that will offset the loss of the subsidy, so they rapidly come to experience homelessness again. It is possible that this process may be improved by encouraging providers to let clients direct the housing outcomes. Additionally, if subsidies were adjusted to be shallower, but longer, and families exiting the shelter were encouraged to pool their subsidies and live together, this may provide enough time to stabilize and locate employment. As these options are explored, it will be important to advocate against the “cliff effect,” or policies that cut or lessen benefits as incomes increase, so that despite new income, families end up further behind.

In addition to economic stabilization, encouraging living together allows for new networks of social support to be entrenched. Moving in this direction may help encourage supportive relationships within communities that are very frequently missing large numbers of people due to the continued predatory involvement of the criminal justice system.

This method could also assist with stabilizing youth, who could potentially return home but had not (and had no plans to) because they had been thrown out for being unable to contribute to household expenses. When subsidies can assist with rent payments or food in a meaningful way, it may be possible to negotiate their return to a stable living situation.





Finally, many respondents also expressed that family reunification was not possible for a variety of reasons, not all economic. Frequently these reasons involved significant social stress that may have begun with money, but these problems are not solved simply by subsidizing the return; the mistrust and anger that developed was real and often overwhelmed any desire to return to a stable living situation. In order to successfully facilitate reunification (and stabilize people downstream, e.g. after they had been re-housed) it will be important to provide ongoing services in the form of family therapy and other counseling in order to help heal social ruptures. While people are often able to mend these bridges on their own, the support to do so is often lacking. In order to re-house people (especially youth), we must treat their grievances not as temper tantrums but as real obstacles standing between them and a home.

### 4.3 Hispanic/Latinx

Existing literature frequently refers to the “Latino paradox” with regard to the idea that the Hispanic/Latinx population in the U.S. shares risk factors for homelessness with the Black population, but they are underrepresented, not overrepresented, among people experiencing homelessness. Despite this discussion in the literature, we have increasing reason to suspect that these theories are based on inaccurate reporting and weak methodology for counting people experiencing homelessness and/or Hispanic/Latinx people not accessing homeless services. Emerging from our research is the finding that in communities that have more intentional outreach to Hispanic/Latinx communities, numbers tend to trend upwards towards overrepresentation.

Our preliminary research suggests the need to focus our attention in meaningful and immediate ways on reaching out to Latinx communities. This will require deliberate cultivation of Spanish-speaking outreach teams made up of members of the communities that they hope to engage. Ideally, these teams would have preexisting relationships that they can leverage to build trust. Additionally, programs might begin to take steps to segregate documentation and immigration status from other components of a client’s file and hold it on a “need-to-know” basis, similarly to how HIV/AIDS information is managed under HIPPA. While this policy change would not have a legally enforceable edge, it would be a step towards building trust with clients regarding whether or not their immigration status will be shared with other staff—and to what extent the circulation of that information puts them at potential risk. Moreover, we might begin to more carefully identify what services we actually require immigration or citizenship information in order to activate. A number of services that may currently request this information may in fact not actually require it to report to funders or screen individuals in or out of services.



By limiting requests for information regarding documentation status to only those services that absolutely require it and putting strict firewalls around that information, we may begin to have better engagement with Hispanic/Latinx communities experiencing homelessness. With better engagement will come a more accurate understanding of rates of homelessness, characteristics, and needs.

#### 4.4 Trans\* People of Color

Our current understanding of the needs of trans\* (used here to refer to all trans, gender-expansive, gender-fluid, or non-binary individuals) people experiencing homelessness is similarly limited. While the SPARC team has been lucky enough to engage a number of trans\* youth and some trans\* adults in our research, we are very far from being able to characterize patterns in trans\* experiences of homelessness. While we expect that social rejection and stigma play a role in pathways into homelessness, we do not yet have enough information to suggest appropriate structural interventions.

One obstacle in the way of researching trans\* experiences of homelessness is inconsistent administrative data. While there is a great deal of anecdotal evidence around trans\* people experiencing homelessness at greater rates, there is still a dearth of data on trans\* individuals in service systems. Because of this, we are left with an inaccurate understanding of how many trans\* individuals are in need of service, and we are not able to estimate rates of disproportionality across race and gender identity. We advise programs to work diligently to capture sexual orientation and gender identity/expression (SOGIE) data so that policy decisions can be more informed.

Finally, it is important to track requests that trans\* clients are making of systems. While the SPARC team will continue to analyze the available data, we believe that the best resource available to programs and systems leaders are the voices of people who are currently utilizing services. By creating a way to track (and document responses to) requests or complaints that come from trans\* clients, systems can use the knowledge that is already there while waiting for better research to emerge.



## 5. Recommendations

There are numerous actions Metro Dallas Homeless Alliance (MDHA) and the City of Dallas can take now and plan to take in the future. SPARC's recommendations include:

1. **Design an equitable Coordinated Entry system.** Coordinated Entry organizes the Homelessness Response System with a common assessment and a prioritization method. This directs clients to the appropriate resources and allows for data-driven decision making and performance-based accountability. Continual review of data from this process for racial disparities can assess whether housing interventions are sufficiently provided to people of color who come into contact with the system. Examination of the data can also help pinpoint additional intervention need. Coordinated Entry is at the root of MDHA's response to homelessness, and racial equity should be integrated into Coordinated Entry.
2. **Incorporate racial equity into funding and contracting for homelessness and housing programs.** Funders should consider how to infuse a race explicit lens into its contracting, requiring that programs report how their work will address issues of racial equity. Specifically, it is useful to develop criteria in which racial equity is part of the evaluative process for scoring funding proposals. Funders can also play a role by evaluating the racial diversity of agency leadership. Finally, they should encourage agencies to periodically conduct internal program and policy reviews that examine disparities in outcomes based on race.
3. **Include racial equity data analysis and benchmarks in strategic planning to end homelessness.** As Dallas sets goals around program development, expanding housing capacity, and creating more housing placements, the system should be measuring impact by race and ethnicity. It will be vital to look at how race and ethnicity relate to returns to homelessness. Additionally, it may be helpful to use a formal racial equity tool in organizational decision making. All major organizational decisions, whether explicitly about race or not, should be analyzed through an internal racial equity tool that will highlight potential negative consequences to communities of color.
4. **Support organizational development to ensure racial equity at the organizational level.** Many agencies that provide human services are at a critical point of self-examination. As we continue to unpack the impact of systemic inequity on the populations we serve, the time has also come to investigate the organizational practices, structures, and cultures of serve settings that unconsciously perpetuate inequity for those same communities. Despite agencies' best intentions to promote equity and justice, many have a long way to go before their internal practices, staff and



leadership teams, resource allocation, facilities, and strategic planning reflect and advance these goals. However, promising practices exist and can be leveraged and tailored to organizations that are ready to do the work. MDHA can support agencies by providing resources to do this work and by disseminating tools and strategies.

5. **Encourage anti-racist program delivery.** SPARC’s findings suggest that programs that are strengths-focused, empowerment-based, and trauma-informed, rather than paternalistic, will best serve people of color experiencing homelessness. Programs will need to look internally to answer questions about whether or not they are inadvertently replicating systems of disenfranchisement. Performing internal systems audits and looking at program output data by race and ethnicity for disproportionality can help target the work. These philosophies might also play a key role in inter- and intra-agency equity plans.
6. **Promote ongoing anti-racism training for homeless service providers.** Government and nonprofit staff will benefit from continuous training on the intersection of race and homelessness, on bias, and on strategies to confront racism within their work. Building off of Recommendation 2 (Support Organizational Development), MDHA can host inter-agency trainings and support trainings for individual agencies. While organizational development focuses on structural change to organizations, training can focus on interpersonal skills—both for working with clients and for working with our colleagues.
7. **Collaborate to increase affordable housing availability for all people experiencing homelessness.** People in Dallas described frustration not only in the wait to receive a voucher but also in the difficult process of trying to find a landlord or apartment complex that would accept it. As the community begins to discuss how best to address homelessness through a racial equity lens, it will be necessary to discuss how people experiencing homelessness could be moved into desirable units and neighborhoods by working with landlords and developers to address issues with accepting housing vouchers.
8. **Utilize innovative upstream interventions to prevent homelessness for people of color.** Homelessness is not inevitable. The data in this report suggest that it may be possible to stabilize people well before they become homeless by identifying pathways and providing support early. Preventing homelessness is a key component of achieving the county’s goals, and the community is making efforts to improve its upstream services and homelessness prevention efforts. MDHA should continue focusing on areas where it can have the biggest impact, including targeted eviction prevention for people at risk of homelessness. Prevention also means working with the criminal justice, child welfare, and public health systems to reduce the number of people exiting into homelessness from programs and institutions within those systems.



9. **Investigate flexible subsidies to mitigate the effects of network impoverishment.** Many financial crises start as non-rent related. For many of our research participants, initial needs were for food, car repair, or bills. This suggests that for some people, flexible subsidies could be used to avert crises that spiral into homelessness. Short-term interventions of this kind can prevent or end homelessness quickly and connect people to other systems and resources, such as employment, health care, child care, and a range of services to support greater stability. It may offer a range of one-time assistance, including eviction prevention, legal services, relocation programs, family reunification, mediation, move-in assistance, and flexible grants to address issues related to housing and employment.
10. **Support innovative health care strategies to meet the needs of communities of color.** Low-income individuals may have more difficulty accessing and paying for health care in states like Texas where lawmakers have thus far declined to expand Medicaid eligibility to all families and individuals with incomes up to 138 percent of the federal poverty level. Medical and mental health needs emerged as an important feature of people's pathways into homelessness, experience of the system, and barriers to exit. The homelessness response system should collaborate with health providers to increase people's ability to access care with or without insurance.

## 6. Conclusion

We recognize that equity-based work should not be confined to specific initiatives, but rather should be the lens through which all of the work flows. As communities develop equity approaches, they do not happen in isolation, limited to one program or one response. Instead, racial equity models need to be widely spread across systems and sectors.

We look forward to working with community leaders across the cities engaged in SPARC to continue to develop and hone the skills of equity implementation. Our hope continues to be that we will someday be a nation that does not strive towards equity but has realized the vision of having these values sit at the core of what we do.



## 7. Appendix

### 7.1 Dallas Homeless Service Providers Diversity & Inclusion – Mixed Methods Findings

Every day, our nation puts the complex problem of solving homelessness into the hands of individual providers doing the work. Successfully recruiting, hiring, training, and supporting the homeless service workforce is key to ending homelessness.<sup>12</sup> Because the goal of SPARC is to fight homelessness by improving outcomes for people of color, an important question is: What are the characteristics of a workforce that best serves people of color? Advancing racial equity in programs may mean ensuring that people working in agencies, from the front desk to the boardroom, reflect the race and ethnicity of the people they serve. Through an online survey, SPARC and our Dallas partners set out to learn more about the background of providers working in homelessness response programs and their self-reported desires for professional development. In addition, we sought to better understand how people perceive the issue of race in service settings through qualitative research.

#### Methods

To learn more about the race and ethnicity of people working in housing and homeless service programs in Dallas, SPARC and the Metro Dallas Homeless Alliance administered an online survey. The survey was sent through e-mail and was open to respondents for approximately one month. Participation was voluntary, and we received 64 responses. Results of the survey are described below and suggest a preliminary picture of how the race and ethnicity of staff relate to their experience, job categories, and professional development goals. The summary of the survey results are followed by a few quotes from qualitative interview and focus group participants that shed additional light on the subject of provider race and ethnicity.

#### Results

In the sample of Dallas providers surveyed who reported racial identity (n=63), 60.3% identified as White, 30.2% identified as Black, 6.3% identified as Two or More Races, and 3.2% identified as Asian. No respondents identified as Native Hawaiian or Pacific Islander (NH/PI) or as Alaskan Native or American Indian (AN/AI). In a separate question on ethnicity, 14.1% identified as Hispanic or Latinx. Results that compare responses by race are extremely limited by the small

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<sup>12</sup> Mullen, J., & Leginski, W. (2010). Building the capacity of the homeless service workforce. *Open Health Services and Policy Journal*, 3, 101–110.



sample size, but including this information is important for a comprehensive discussion about provider race and ethnicity.

Race	Percent	Frequency
Alaskan Native or American Indian	0.0%	0
Asian	3.2%	2
Native Hawaiian or Other Pacific Islander	0.0%	0
Black	6.3%	19
White	60.3%	38
Two or More Races	6.3%	4
Ethnicity		
Hispanic or Latinx	14.1%	9
Non-Hispanic or Latinx	84.4%	54

Almost two-thirds (62.3%) identified as female and 34.4% as male; 3.1% declined to answer. The mean age of respondents was 46 (SD=12.5) years old and ranged from 24 to 69. The majority (76.6%) identified as straight or heterosexual, while 14.1% identified as lesbian, gay, bisexual; 9.4% declined to answer).

Respondents worked in emergency shelter, transitional housing, permanent housing, outreach, drop-in centers, advocacy organizations, and other specialized services. These organizations were categorized as mostly nonprofit (85.9%), as opposed to government agency (9.4%). Over a third (34.9%) of respondents were either an Administrator or Executive Director. Ten of the 12 (83.3%) Executive Directors and seven (70%) of the ten Administrators (defined as all administrative roles except Executive Director) were White. Similarly, senior managers were only 22.7% people of color compared to 77.3% White, while front line staff were only 46.3% people of color compared to 51.2% White.

Educational backgrounds were not comparable between race groups: only 15.8% of Black individuals reported holding a master’s degree compared to 47.4% of White individuals. Over twenty percent (24.2%) of respondents reported having personally experienced homelessness. In order to protect anonymity on this sensitive question, results are not presented by race.

Experienced homelessness (answered: n=62)	Percent	Frequency
Yes	24.2%	15
No	75.8%	47



We asked respondents to reflect on their current organization and report how well the race and ethnicity of frontline staff and senior managers reflect the race and ethnicity of the people they serve. Overall, the majority (84.4%) of respondents agreed or strongly agreed that the race/ethnicity of frontline staff reflect the race/ethnicity of clients. Almost half (46.9%) agreed or strongly agreed that the race/ethnicity of senior managers reflect the race/ethnicity of clients.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Sure
The race and ethnicity of frontline staff at my organization reflects the race and ethnicity of the people we serve.	39.1%	45.3%	7.8%	7.8%	0.0%
The race and ethnicity of senior managers at my organization reflects the race and ethnicity of the people we serve.	15.6%	31.3%	28.1%	17.2%	4.7%

We asked survey respondents to think about what kinds of skills they would need to 1) excel in their current position, and 2) take their career where they wanted it to go.

Overall, respondents most frequently indicated that they needed skills in written communication, financial management, time management, and data management. There was some variation despite the small sample size. Only 40.0% of people of color indicated needing grant writing compared to 84.2% of White respondents. Similarly, only 56.0% of people of color indicated needing fundraising skills compared to 89.5% of White respondents.

Skills needed to excel in current position	Total	White (n=38)	Combined PoC group (n=25)
Mental health counseling	64.1%	68.4%	56.0%
Time management	84.4%	86.8%	80.0%
Financial management	87.5%	92.1%	84.0%
Written communication	92.2%	89.5%	96.0%
Technology skills	73.4%	71.1%	76.0%
Grant writing	65.6%	84.2%	40.0%
Data management	78.1%	73.7%	84.0%
Fundraising	76.6%	89.5%	56.0%
Supervisory skills	71.9%	68.4%	76.0%
Note: Percentages are calculated with race totals as the denominator. <b>Participants could select all that apply.</b>			





We also asked respondents what skills they needed to take their career where they wanted it to go. Overall, people most frequently indicated that they need skills in time management, written communication, financial management, technology skills, and data management. While conclusions are limited based on the small sample size, there was some variation. For example, of the 92.0% of people of color indicated they needed skills in written communication compared to 84.2% of White staff. Almost three-quarters (73.7%) of White staff indicated a need for fundraising while only 52.0% of people of color indicated they needed that skill.

Skills needed to advance to career goals	Total	White (n=38)	Combined POC group (n=25)
Mental health counseling	73.4%	76.3%	68.0%
Time management	89.1%	92.1%	84.0%
Financial management	82.8%	81.6%	84.0%
Written communication	87.5%	84.2%	92.0%
Technology skills	78.1%	78.9%	76.0%
Grant writing	64.1%	71.1%	56.0%
Data management	78.1%	76.3%	80.0%
Fundraising	65.6%	73.7%	52.0%
Supervisory skills	65.6%	63.2%	68.0%
Other			
Note: Percentages are calculated with race totals as the denominator. <b>Participants could select all that apply.</b>			

The final set of questions asked providers to consider the barriers/facilitators to professional growth by answering the question, “If training or classes were offered to help you develop the skills you selected above, how important (Not a Concern, Somewhat Important, Very Important) would the below factors be to you, as you considered taking part?” The factors listed were 1) fitting it into my busy day, 2) compensation for my time, 3) support from my manager, and 4) topic relevance.

Most important to all providers was “topic relevance” (82.3% selected “very important”). To follow, two-thirds felt that “fitting it into my busy day” was also important (66.1% selected “very important”). Keeping the small sample size in mind, the importance of topic relevance and fitting trainings or classes into one’s day was fairly consistent across racial groups. There was some difference between people of color and White respondents: 80.0% of people of color compared to 52.6% of White respondents indicated that “fitting into busy days” was “very important”; 32.0% of people of color compared to 7.9% of White respondents indicated that compensation was “very important”; 72.0% of people of color indicated that support from



management was “very important” compared to only 39.5% of White staff; and 72.0% of people of color compared to only 39.% of white staff indicated that topic relevance was “very important”.

Conclusions from this survey are limited by a small sample size. The complete dataset will be made available to our Dallas partners. Despite the small sample size, the most striking finding from this survey is the underrepresentation of people of color in senior level positions. It is difficult to generalize this finding because higher level staff may have been more likely to respond to the survey. However, given the substantial number of Administrators and Executive Directors who did respond, the finding that the overwhelming majority were White is notable. Additionally, respondents reported directly through a survey item that race and ethnicity of senior management, in their opinion, does not reflect the people they serve.

## Qualitative Data

The data described above come from a non-systematic, voluntary survey of people working in housing and homelessness programs in Dallas. The sample was small, and the response rate overall or across racial and ethnic groups is unknown. However, our qualitative findings can help guide interpretation and clarify potential recommendations.

Lack of diversity in the homeless service workforce may have a negative impact on client’s experiences of services and outcomes. A few people talked about experiences of racism within programs. One respondent shared:

INTERVIEWER: Do people of color get treated differently by staff here?

RESPONDENT: It depends. I – I’m not saying all white folks. But white folks act like they’re just afraid to talk to anybody who’s Black. Just afraid of them. You get the biggest impression they’re afraid to say anything. Or deal with it. You know. They’ll say kind of feel like I can’t help you.

INTERVIEWER: They say what?

RESPONDENT: They say have him help you.

INTERVIEWER: Have him help you.

RESPONDENT: They point towards an employee that’s of color. Yeah. They don’t want to deal with you. Usually the new ones.

INTERVIEWER: The new what? New who’s?

RESPONDENT: You can tell where they just are afraid. They watch a lot of television. They watch a lot of movies.

This respondent shared a negative experience where his needs were not met by a White staff, who instead ushered him to go to an employee of color. His narrative suggests that he has observed this as a pattern and internalizes that some White staff, especially new employees, are afraid of Black people. People also noticed subtle differences in access to resources:



INTERVIEWER: I see what you are saying. Do you think people of color get treated differently by staff members? In any homeless service center, not necessarily here.

RESPONDENT: Yeah. One situation, my first day here I was greeted, welcomed in and my paperwork processed I was given a bunk. Okay two months down the line I sat right there. I am a volunteer in the kitchen as well so I watched two individuals come in, one is a man, one is a lady, they're not of color. They were greeted by the same individual. They were provided with food, upon entering, water, access to the clothes, and I sat there and I watched that and I said damn I wasn't given that opportunity. So I just looked at it. Even though it was not something – it was nothing serious but because I mean eventually I had access [it, but it was like they had me finish the intake process and they were like at distance and stuff, so I was like wow how did I miss that. It was that situation. There was another situation where I didn't have blankets and stuff like that. I accumulated it. Certain people not of color that come through, it's like magic, this shit just appears and I sit and I mean like where did the hell did this come from, how come I didn't get?

A few qualitative interviews with service users explored the Whiteness of agency leadership.

INTERVIEWER: Do you feel people of color get treated differently by staff?

RESPONDENT: You know what, that's difficult to say, because I think staff has different expectations and since staff is -- all of the upper staff in every homeless shelter in Dallas is all white, every bit of it. And most of the clients are black. Now you tell me how the white staff is going to relate to white people when they come in. Yeah, they get treated -- white people are treated differently. But then the whole bureaucracy is, I call it, the Tarzan of the ape -- Tarzan and the ape-man bureaucracy, because we have a bureaucracy where we have people -- where we have all these blacks and there's always a white person who's leading it, at the head of it, as if there's not a black person intellectually capable of doing that.

This respondent above suggests that homeless service agencies are always led by White people, while all of the clients and many of the providers are Black. His comments are striking, and resonate with the data of our survey, despite its limited sample size.

## Discussion

Our online survey of providers, focus groups, and interviews shed light on the diversity of the homeless service workforce in Dallas. Our findings describe a need for leadership to commit to racial equity, both as a lens to view client outcomes and a framework for managing and supporting the people who work for their agency. Because one of Dallas' structural change goals is professional development and leadership training for people of color, paying close attention to the real challenges providers of color face is vital. This research suggests practice and policy implications in the following areas:

- **Hiring.** If requiring a master's degree is getting in the way of hiring leadership of color, particularly Black leaders, programs should think critically about whether such a requirement is necessary.



- **Training.** Everyone in the U.S. is exposed to racism and has work to do to unlearn implicit biases. Anti-racism and diversity training should be ongoing and an understanding of microaggressions, not just for White providers but for all staff.
- **Promoting.** Continued and ongoing analysis of how staff are promoted, what salary grades they are assigned, and what opportunities for professional development they are offered should be a robust part of every program. By routinely collecting this data and analyzing it by race/ethnicity, gender identity/expression, and sexual orientation, programs can continue to drive themselves towards equitable practices.



## 7.2 Entry and Exit Location Groupings

We grouped HMIS data fields for situations at entry into the following categories for our analyses:

- 1. Homeless (Shelter + Street)**
  - a. Place not meant for human habitation
  - b. Emergency Shelter (including motel/hotel with voucher)
- 2. Permanent Housing/Renting w/ subsidy**
  - a. Rental by client with VASH subsidy
  - b. Rental by client with other ongoing subsidy
  - c. Permanent housing for formerly homeless persons
  - d. Owned by client with ongoing subsidy
- 3. Permanent Housing/Renting w/o subsidy**
  - a. Rental by client with no ongoing housing subsidy
  - b. Residential project/halfway house with no homeless criteria
  - c. Owned by client with no ongoing subsidy
- 4. Institutionalized Care**
  - a. Long-term care facility or nursing home
  - b. Substance abuse treatment facility or detox center
  - c. Foster care home or foster care group home
  - d. Hospital or other residential non-psychiatric medical facility
  - e. Psychiatric hospital or other psychiatric facility
  - f. Mental health/psychiatric, physical health, substance use treatment, foster care
- 5. Jail, prison or juvenile detention facility**
- 6. Doubled Up**
  - a. Staying or living with friends
  - b. Staying or living with family
- 7. Transitional setting**
  - a. Transitional Housing for homeless persons (including youth)
  - b. Safe Haven
  - c. Hotel/Motel (no voucher)
- 8. Other**
  - a. Other (True Other; i.e., response option was labeled "Other")
- 9. Missing data** (not included in analysis)
  - a. Client does not know
  - b. Client refused



We grouped HMIS data fields for destination at project exit into the following categories for our analyses:

- 1. Homeless (Shelter + Street)**
  - a. Place not meant for human habitation
  - b. Emergency Shelter (including motel/ hotel with voucher)
- 2. Permanent Housing/Renting w/ subsidy**
  - a. Rental by client with VASH subsidy
  - b. Rental by client with other ongoing subsidy
  - c. Permanent housing for formerly homeless persons
  - d. Owned by client with ongoing subsidy
- 3. Permanent Housing/Renting w/o subsidy**
  - a. Rental by client with no ongoing housing subsidy
  - b. Residential project/halfway house with no homeless criteria
  - c. Owned by client with no ongoing subsidy
- 4. Institutionalized Care**
  - a. Long-term care facility or nursing home
  - b. Substance abuse treatment facility or detox center
  - c. Foster care home or foster care group home
  - d. Hospital or other residential non-psychiatric medical facility
  - e. Psychiatric hospital or other psychiatric facility
  - f. Mental health/psychiatric, physical health, substance use treatment, foster care
- 5. Jail, prison or juvenile detention facility**
- 6. Doubled Up**
  - a. Staying or living with friends (permanent)
  - b. Staying or living with family (permanent)
  - c. Staying or living with friends (temporary) (option at exit only)
  - d. Staying or living with family (temporary) (option at exit only)
- 7. Transitional setting**
  - a. Transitional Housing for homeless persons (including youth)
  - b. Safe Haven
  - c. Hotel/Motel (no voucher)
- 8. Other**
  - a. Other (True Other; i.e., response option was labeled "Other")
  - b. Deceased
- 9. Missing data (not included in analysis)**
  - a. Client refused
  - b. Data not collected
  - c. No exit interview completed

