



ANALYSIS OF ESSEX COUNTY POPULATION EXPERIENCING HOMELESSNESS

A Review of Racial Equity Among Persons
Experiencing Homelessness

Prepared by Monarch Housing Associates

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Table of Contents

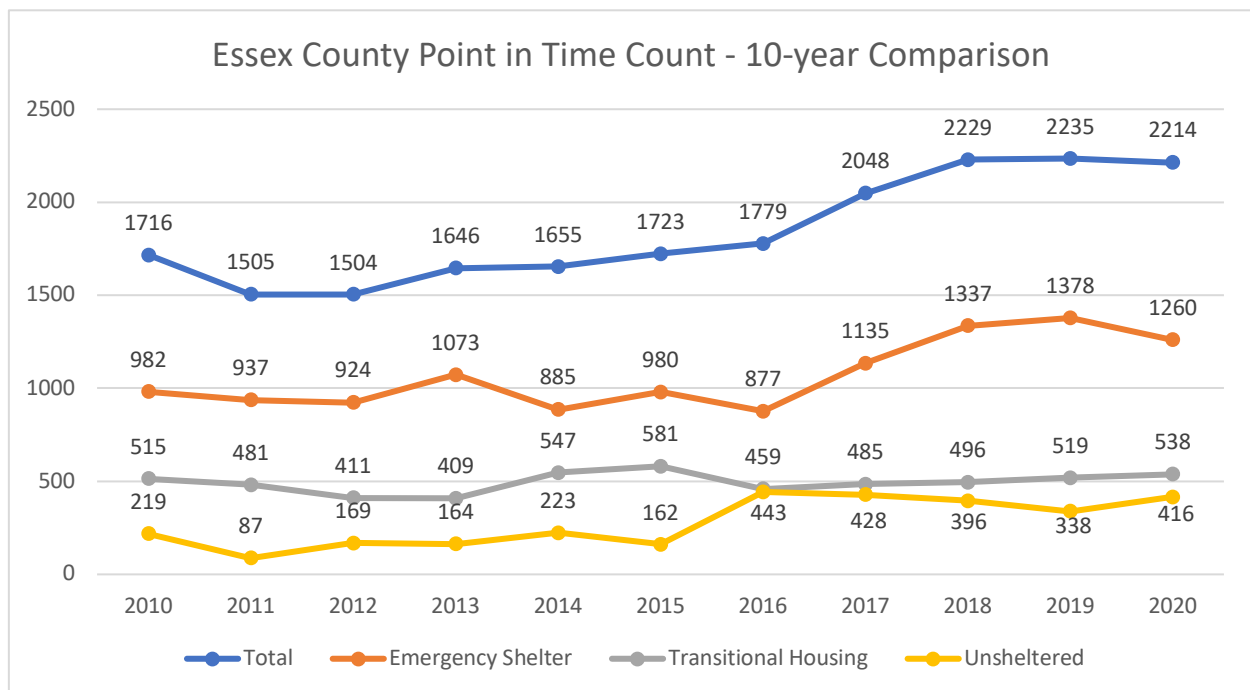
Executive Summary	4
Introduction.....	6
Data Sources	7
Findings.....	8
Characteristics	8
Experience of homelessness	8
Geography.....	9
Income	11
Special needs.....	13
Criminal justice involvement.....	15
Education	17
Health.....	18
Age ranges.....	18
Family Type	19
Special Populations	20
Outcomes	25
Length of program stay	25
Total length of homelessness.....	26
Exits to PH	27
PH Admissions.....	29
Returns to homelessness	29
Discharge Reasons.....	30
Implications and Recommendations	31
Income.....	31
Special Needs.....	32
Criminal Justice.....	33
Education.....	33
Age	34
Family Type	34
Conclusion	34
References.....	36

Executive Summary

Essex County has long worked to end homelessness within its region. In 2010, the County, in partnership with the City of Newark, released “The Road Home: A Ten Year Plan to End Homelessness in Newark and Essex County”. This document provided a blueprint to end homelessness through the implementation of strategies rooted in best practices and evidence-based practices. The comprehensive plan included:

- strategies to reduce the number of people becoming homeless through prevention,
- increase the availability of housing by creating 3000 new units of low-income housing in 10 years,
- increase coordination of services through development of a single point of entry,
- integrate continuous data quality and performance management oversight to evaluate progress,
- increase employment, training and education opportunities to enhance stability in permanent housing,
- expand community awareness of homelessness and advocate for policy changes to support efforts to end homelessness, and
- secure adequate financing to implement identified strategies.

While Essex County has made significant strides to implement the strategies identified in the Ten-Year Plan to End Homelessness, the community has not yet realized the goal of ending homelessness. In fact, as illustrated below, the number of people identified as experiencing homelessness during the annual Point in Time Count has steadily increased over the 10-year period covered by the Plan.



Communities across the country are dealing with similar trends and after careful review of data have come to understand the impact of systemic racism on not only who experiences homelessness, but also on those who are able to resolve their homelessness. The HMIS database provides extensive information regarding the characteristics of persons experiencing homelessness in Essex County. Similar to national trends, HMIS data indicate significant racial disparities in the homeless system.

An examination of HMIS data and Point in Time Data in relation to Census and community data on needs of County residents indicate significant disparities are present in the population experiencing homelessness. The report provides details about the disparities identified in the following areas:

- General population characteristics such as age, family type, veterans, victims of domestic violence and chronically homeless households
- Population characteristics connected to other sectors such as education, criminal justice, health and disabling conditions and income
- System outcomes such as connection to permanent housing, returns to homelessness and length of time homeless

In all areas, disparities were identified both in relation to census population trends and within the context of the population trends within the homeless service system. In examining the scope of disparities present and the societal factors impacting these outcomes, it is clear that sectors such as healthcare, criminal justice, education and employment/training, must be actively involved in the solutions to end homelessness. While the homeless service system cannot address the larger systemic issues of race and inequity alone, partnerships with a variety of sectors can help mitigate the impact of systemic racism within the homeless service system. Essex County has an opportunity to move the system in a direction of ending homelessness by building strategies that take into account the disparate outcomes by race and partnering with critical sectors to successfully address the needs of individuals and families experiencing homelessness.

Introduction

Communities across the country are seeing reductions in their population experiencing homelessness and special target populations through implementation of best practices to end homelessness. These practices include implementation of housing first and rapid rehousing programs, creation of coordinated assessment systems and prioritizing the most vulnerable for housing and supports. The homeless service system in Essex County, under the oversight and direction of the Continuum of Care (CoC) has worked to design a system based on best practices including housing first, rapid rehousing and a systemwide coordinated assessment process. The system has reoriented towards a housing focus as a means of achieving the goal of ending homelessness. These efforts have helped Essex County to maintain a relatively steady rate of homelessness over the last 3 years but have not been sufficient to significantly reduce the number of people experiencing homelessness in the County. While these best practices are critical in reducing the number of people experiencing homelessness in the community and an expansion of resources for program implementation are sorely needed, improving the efficacy of these practices requires a focus on racial equity and disparate experiences while also expanding resources. The field of homelessness services has come to understand the impact of trauma on behavior and system interaction and has repositioned itself to be trauma-informed in service delivery. To continue the growth of the success of best practices in ending homelessness, the system must also pivot to becoming racial justice informed in service delivery if Essex County is to see the significant reductions in homelessness these best practices were designed to achieve.

Essex county is a diverse community of about 800,000. About 40% of Essex county residents identify as Black or African American and about 42% identify as White non-Hispanic. In comparison to state and national averages, Essex County has a more diverse population with New Jersey having about 13% of the state residents identifying as Black or African American and 55% identifying as White non-Hispanic and the United States having similar rates of 12.4% and 60% respectively for Black or African American and White residents. Within the context of a highly diverse community, Essex County also is home to about 23% of the state population experiencing homelessness. According to the 2020 Point in Time Count (an annual count of people experiencing homelessness on a single night), about 72% of persons experiencing homelessness identified as Black or African American while 9.3% identified as White non-Hispanic.

The diversity in Essex County's population also coincides with the disparate impacts prevalent in the areas of health, economics, education and criminal justice involvement for communities of color. Through the course of the following report we will examine the intersections of race, homelessness, and social impacts as a means of building a robust data analysis that will inform best practice implementation to increase efficacy.

Data Sources

The analysis contained in this report is based on data pulled primarily from the sources outlined below.

- Census Data analysis – American Community Survey 1 year data analysis for New Jersey and Essex County provided community level data. ACS estimates were based on 2019 and 2018 data according to the topic and data availability.
- PIT data analysis – The annual point-in-time count provides information on characteristics and needs of people experiencing homelessness on a single night in January. The report utilizes Point-in-Time data from 2020 which took place on January 28, 2020.
- HMIS data analysis – The Homeless Management Information System provides information on the characteristics, service utilization and outcomes for persons experiencing homelessness who interact with community providers entering information in the database. HMIS provides a comprehensive review of information on persons accessing emergency shelter and transitional housing programs. Information on persons experiencing unsheltered homelessness is limited to those individuals interacting with outreach services in the community. The full scope of information for persons experiencing unsheltered homelessness is not available as no additional data collection is possible for persons not interacting with community providers entering information into HMIS. Similarly, the dataset for Permanent Supportive Housing is limited to those programs entering data into HMIS and does not reflect the full scope of permanent supportive or affordable housing available in the community.

For the purposes of this study, the HMIS data includes data entered between September 1, 2019 and August 31, 2020. Data was pulled from Emergency Shelter, Transitional Housing, Permanent Supportive Housing, Rapid Rehousing, street outreach and service only programs entering data during that time period. Data was filtered to reflect only those persons who identified experience of homelessness during the time period. Admissions to permanent housing programs between 2018 and 2020 were used as a comparative dataset for evaluating outcomes. As a further note, data for persons interacting with street outreach programs was further filtered to reflect persons in the system with episodes of contact/interaction with outreach programs during the report timeframe.

Additional data was pulled from a variety of sources for comparative purposes. Those additional sources include the following:

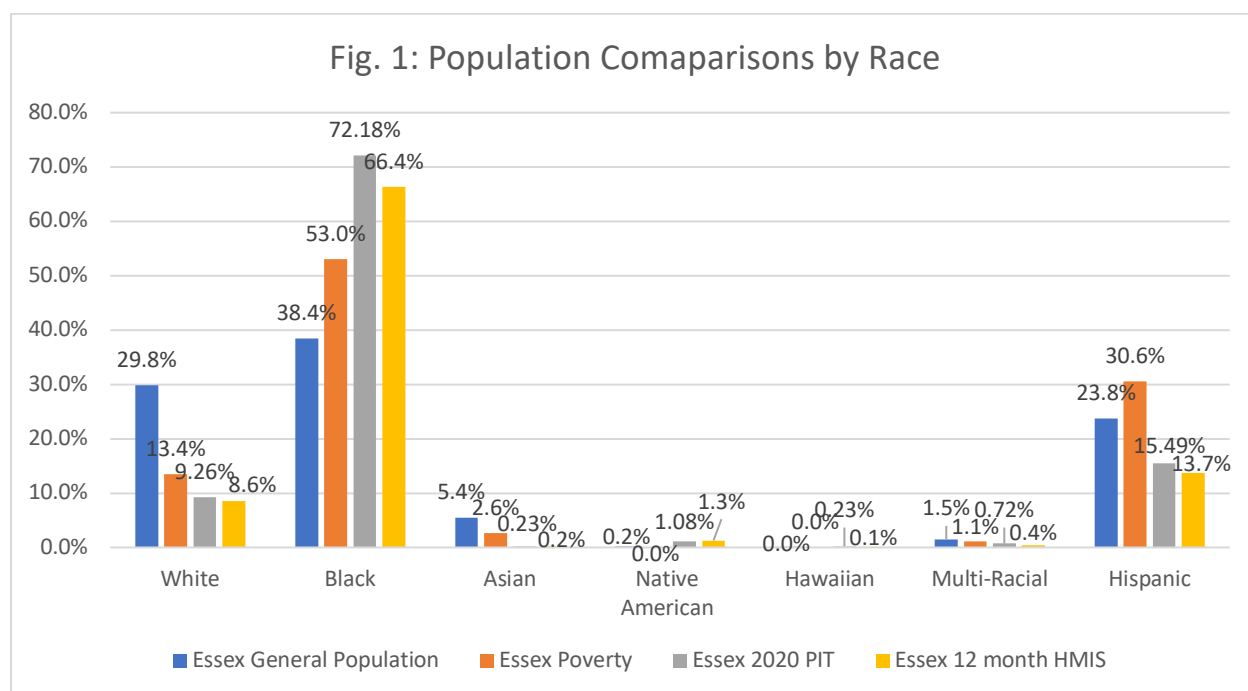
- Prosperity Now
- American Psychiatric Association

Findings

Characteristics

Experience of homelessness

Based on the 2020 Point in Time count, 2,214 men, women and children experienced homelessness on a single night in January in Essex County. About 23% of the persons identified as homelessness on the night of the PIT Count for the state of New Jersey, were in Essex County. Based on information from the Homeless Management Information System, over the course of a 12-month period (September 1, 2019 – August 1, 2020), about 5,207 men women and children experienced homelessness in Essex County. Fig. 1 illustrates the racial composition of the population experiencing homelessness from the Point in Time Count and Homeless Management Information System in comparison to the general population.



While White people make up about 29.8% of the County population and 13.4% of the County population in poverty, they make up about 9.2% of the population experiencing homelessness on a given night (PIT), and 8.6% of the population experiencing homelessness over the course of a year (HMIS). Conversely, Black people make up about 38.4% of the County population, 53% of the County population in poverty and 72.2% and 66.4% of the population experiencing homelessness on a single night and over the course of a year respectively. If poverty were the driving factor causing homelessness, one would expect the racial composition of those experiencing homelessness to be similar to the composition for those in poverty. The disparate impact illustrated in the table above indicates that poverty alone does not determine impacts of homelessness, but that race plays a significant role as well.

Geography

The majority of households identifying as homeless are located in the City of Newark, City of East Orange and Irvington Township. This is primarily due to the location of sheltering programs within Essex County. 86.5% of all sheltering programs in the County are located in the City of Newark. The remaining programs are located in East Orange (4.2%), Irvington (4.6%) and Montclair (4.6%).

Because programs providing services and shelter to persons experiencing homelessness are clustered in specific communities, we are not able to get an accurate depiction of the experience of homelessness across the county. When we examine the residence prior to becoming homelessness, we get a better sense of the experience of homelessness across the county. Table 2 illustrates the reported residence prior to homelessness as reported on the Point-in-Time Count survey and through the HMIS for the course of a year.

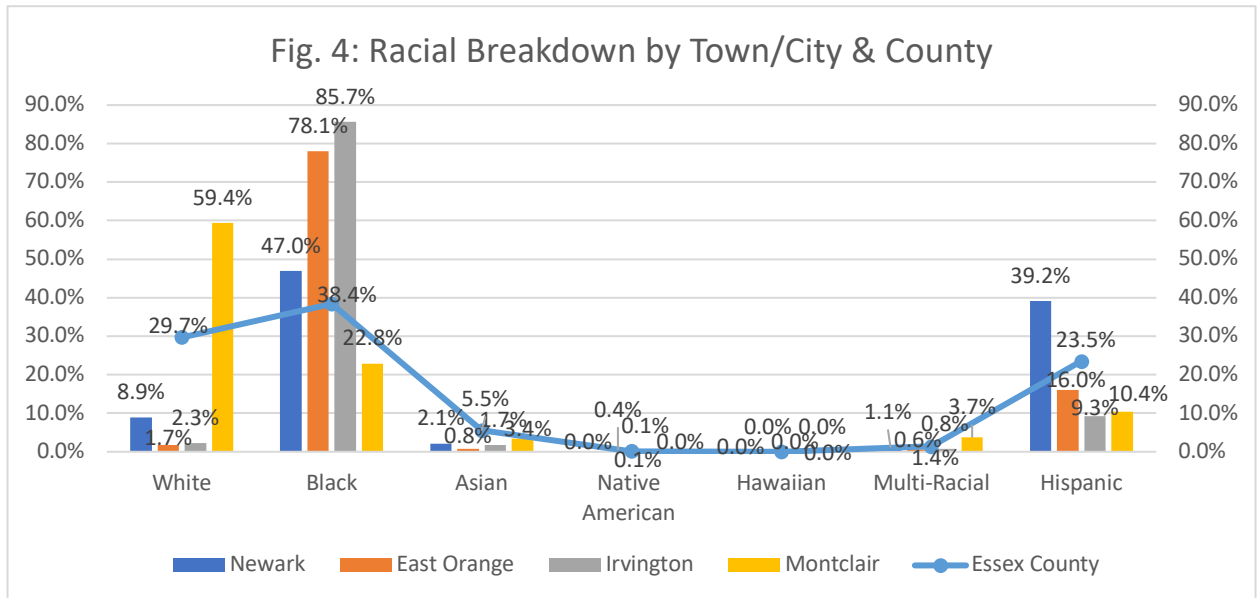
Town	PIT count	PIT %	HMIS Count	HMIS %
Belleville	5	0.3%	16	0.4%
Bloomfield	20	1.2%	41	1.0%
Caldwell Borough	0	0.0%	0	0.0%
Cedar Grove	0	0.0%	0	0.0%
City of Orange	0	0.0%	0	0.0%
East Orange	103	6.4%	181	4.6%
Essex Fells	0	0.0%	0	0.0%
Fairfield	0	0.0%	0	0.0%
Glen Ridge	0	0.0%	1	0.0%
Irvington	67	4.1%	177	4.5%
Livingston	1	0.1%	1	0.0%
Maplewood	4	0.2%	7	0.2%
Millburn	0	0.0%	0	0.0%
Montclair	22	1.4%	39	1.0%
Newark	742	45.8%	1654	42.2%
North Caldwell	0	0.0%	0	0.0%
Nutley	3	0.2%	5	0.1%
Roseland	0	0.0%	1	0.0%
Verona	0	0.0%	1	0.0%
South Orange	2	0.1%	8	0.2%
West Caldwell	0	0.0%	0	0.0%
West Orange	10	0.6%	20	0.5%
Out of County	154	9.6%	642	16.4%
No Response	486	30.0%	1090	27.8%

As illustrated in Fig. 2 above, about 16% of the population experiencing homelessness in Essex County has identified that their last permanent residence was outside of the county. Fig. 3 illustrates counties in which 10 or more households experiencing homelessness listed their prior residence.

Fig. 3: Last Permanent Address by County and Race

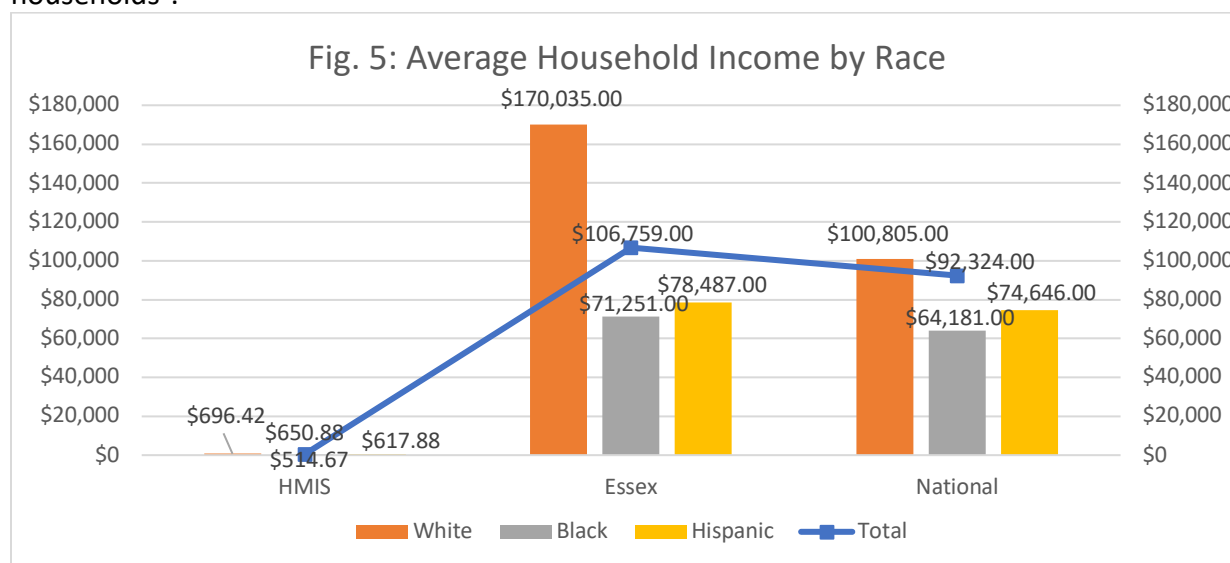
County	Homeless Households	% of Households	White Household	Black Households	Hispanic Households
Essex County	2190	58.5%	6%	76%	11%
Union County	192	5.1%	11%	60%	20%
Hudson County	138	3.7%	8%	60%	31%
Passaic County	39	1.0%	15%	51%	23%
Middlesex County	32	0.9%	25%	53%	13%
Monmouth County	29	0.8%	38%	24%	24%
Bergen County	19	0.5%	37%	37%	26%
Somerset County	17	0.5%	24%	35%	29%
New York County	13	0.3%	0%	62%	15%
Morris County	11	0.3%	36%	27%	18%
Kings County	10	0.3%	10%	70%	10%
Ocean County	10	0.3%	60%	10%	10%

Three of the four communities in Essex County where shelter beds are located are areas with larger Black and Hispanic populations. The concentration of services in select communities have racial compositions dissimilar to the overall county averages. Fig. 4 below indicates the racial composition of the communities with sheltering programs in comparison to the racial composition of the County.



Income

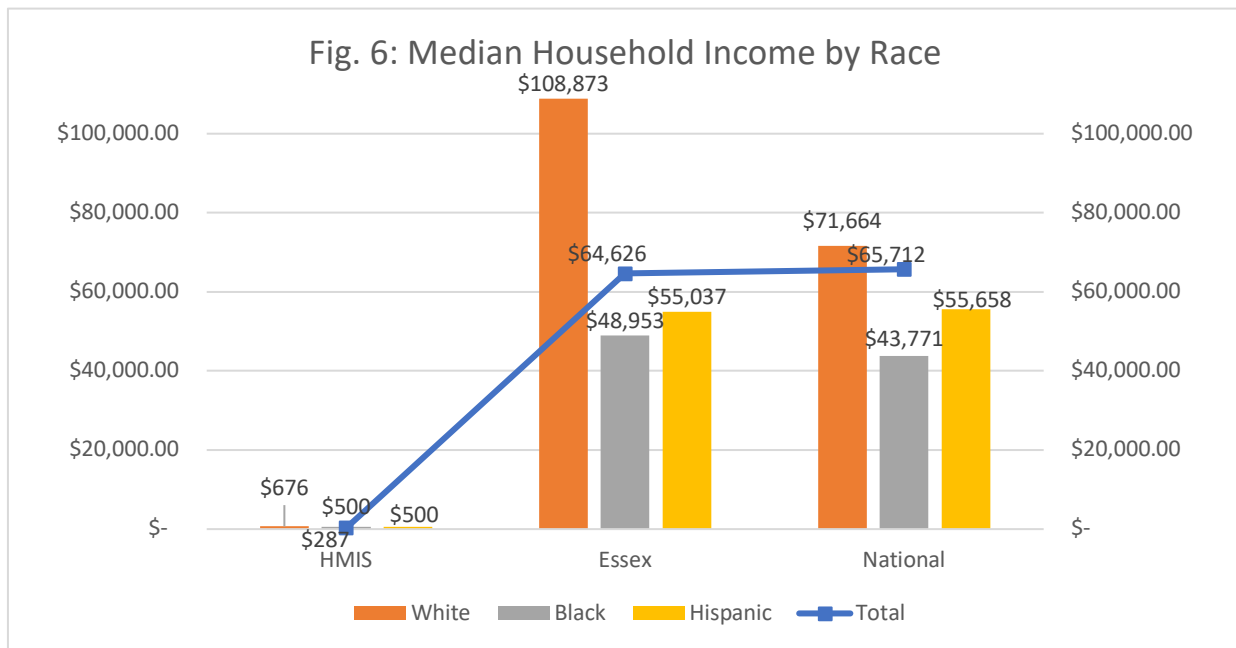
The median household income in Essex County is \$64,626. This figure is relatively equivalent to the national median income of \$65,712. While the median household incomes are roughly similar between the county and national income levels, there are significant differences when median household income is examined by race. At a national level, the median household income for White families is \$71,664 compared to \$55,658 for Hispanic/Latino families and \$43,771 for Black families. At a national level the median income for Hispanic families is 29% less than that of White families, and the median income for Black families is 64% less than that of White families. In Essex County, the disparities are larger with White, Hispanic and Black families earning a median income of \$108,873, \$55,037, and \$48,953 respectively. The median income for Hispanic families in Essex County is 98% less than that of White families while the median income of black families is 122% less than that of White families. The average incomes for White, Black and Hispanic families show similar disparities with White households in Essex County earning an average of \$170,035 as compared to the average income of Hispanic and Black households being \$78,487 and \$71,251 respectively. White families in Essex County earn an average of \$91,548 more than Hispanic families and \$98,784 more than Black families. The income gap for households is further documented by ProsperityNow which identifies an income inequality ratio of 6.65:1¹. 20.9% of Black households fall below the poverty line compared to 3.7% of White households².



¹ "Income Inequality," *Prosperity Now Scorecard* (Washington, DC: Prosperity Now, 2020). Data Source: 2013-2017 American Community Survey. U.S. Census Bureau, 2018. Retrieved September 30, 2020

² "Income Poverty Rate," *Prosperity Now Scorecard* (Washington, DC: Prosperity Now, 2020). Data Source: 2013-2017 American Community Survey. U.S. Census Bureau, 2018. Retrieved September 30, 2020

For households experiencing homelessness, the disparities between income may not be as large but continue to persist. White households reporting income in HMIS earned a median income of \$676 while Black and Hispanic households had a median income of \$500.

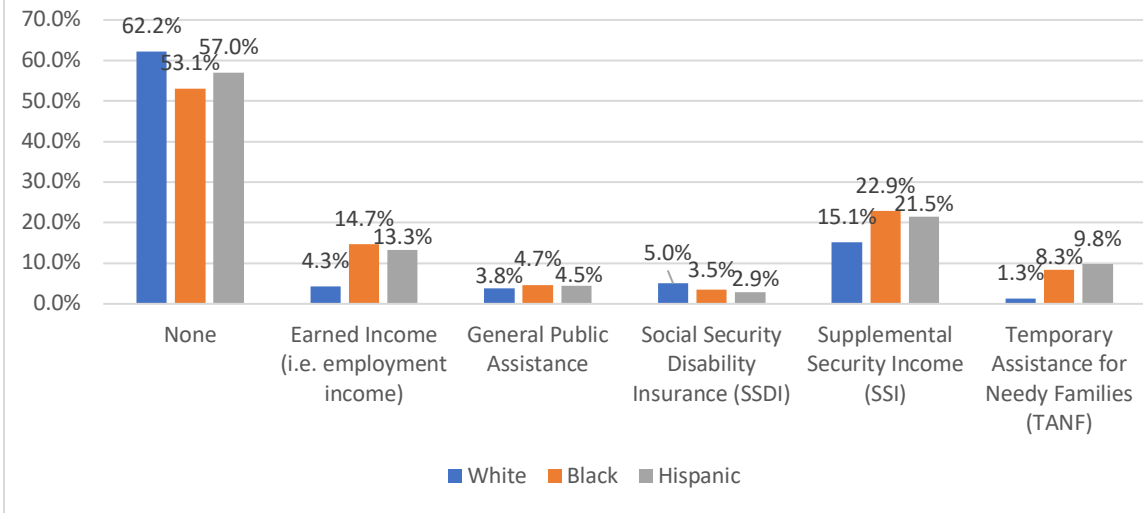


In Essex County the current Fair Market Rent is \$1,034 for a studio, \$1,218 for a 1-bedroom and \$1,483 for a 2-bedroom. At these rates, a household would need to earn \$41,360, \$48,720 and \$59,320 respectively for the current FMRs to be affordable (affordability is defined as a household paying no more than 30% of their income on housing). Based on reported income levels, about 1.5% of White households 1.1% of Black households and 1.2% of Hispanic/Latino households experiencing homelessness would be able to afford a studio or 1-bedroom apartment in Essex County.

Information on sources of income was captured for about 92% of adults entered into the HMIS database. As a note, income sources are not discreet categories so adults may report multiple income sources within the database. The top reported sources of income were No Income (47.9%), Supplemental Security Income/SSI (19%), Earned Income (11.6%), Temporary Assistance for Needy Families/TANF (6.7%), and General Public Assistance/GA (4%).

In looking at income source by race, a higher percentage of White adults experiencing homelessness (62.2%) reported no income as compared to Black adults (53.1%) and Hispanic/Latino adults (57%). Conversely, a higher percentage of Black adults (14.7%) reported earned income as compared to White adults (4.3%) and Hispanic/Latino adults (13.3%).

Fig. 7: Reported Income Source - Rate within Race



Special needs

Of the persons utilizing the homeless service system during a 12-month period, 29.1% reported having a disabling condition. This is about 16.7 percentage points higher than the number of people identified as having a disabling condition in the general population (12.4%). About 54% of White people experiencing homelessness reported a disabling condition as compared to about 30.6% of Hispanic/Latino people and 24.8% of Black people. About 53% of people reporting a disabling condition identified mental health issues as their disabling condition.

Fig. 8: Disabling Condition Reported

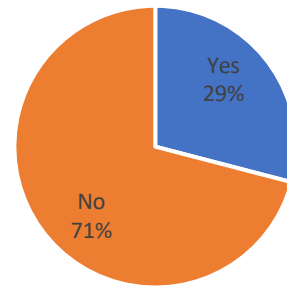
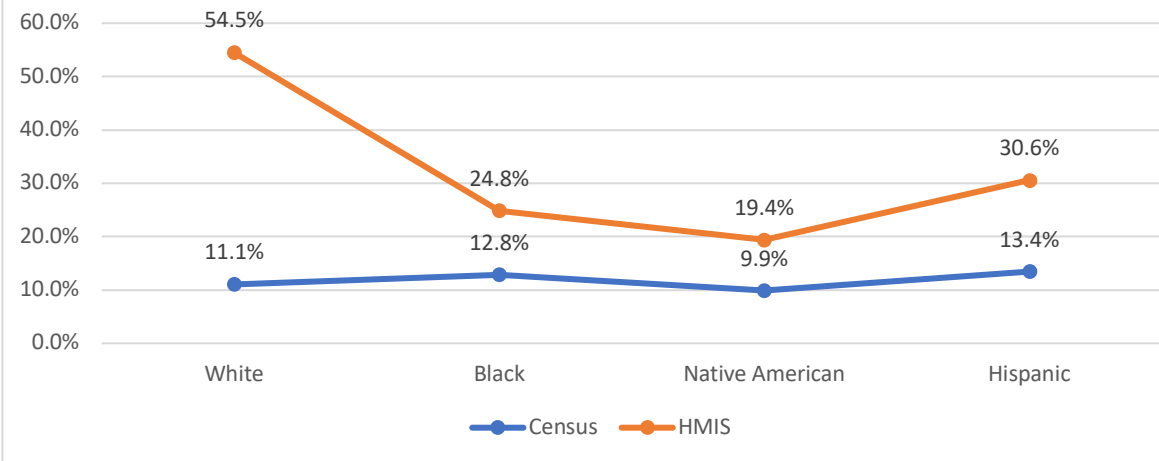
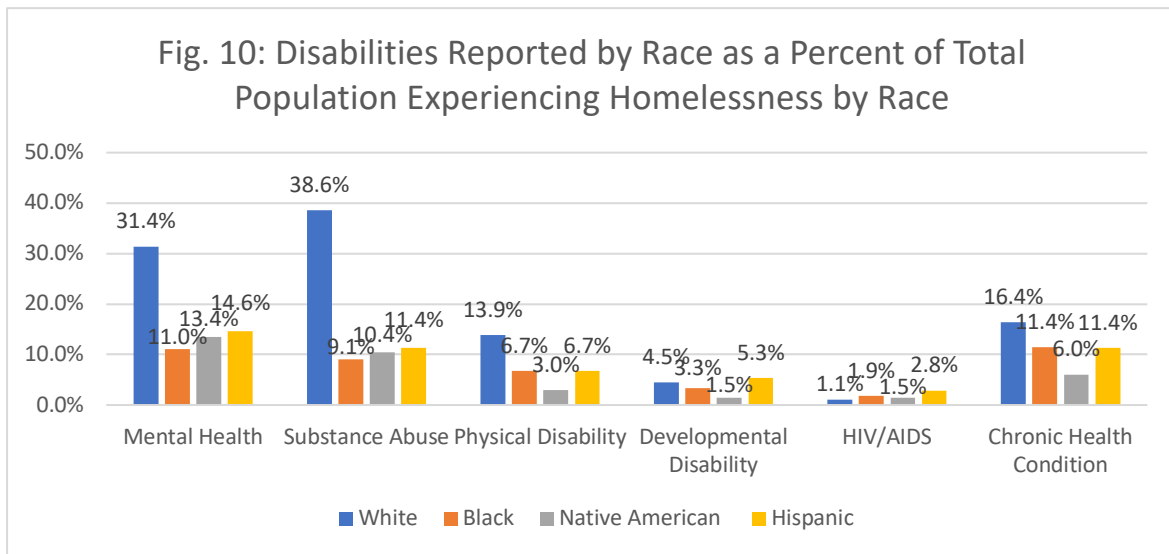


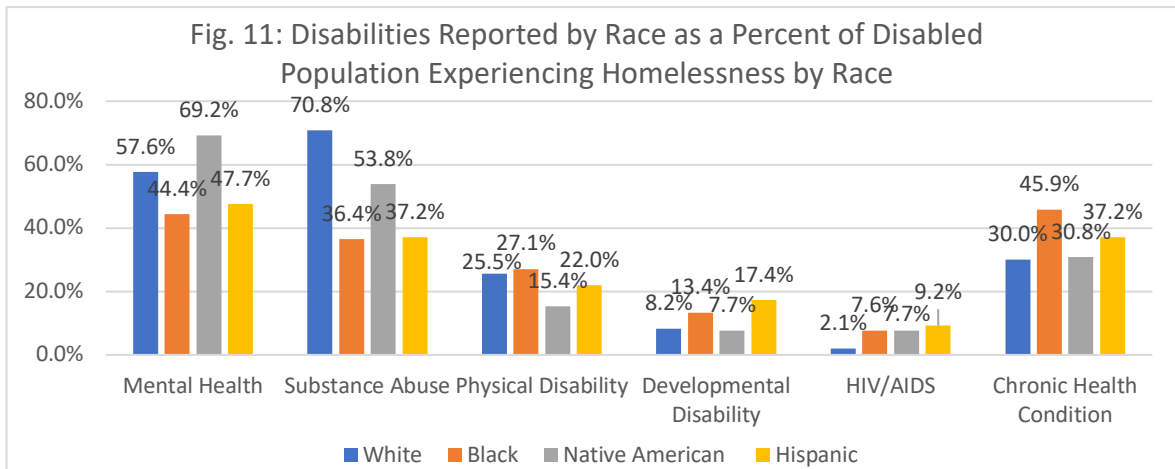
Fig. 9: Disability identified/Reported - Rate within Race



Rates of disclosing disabling conditions were lower for black people (24.8%) experiencing homelessness than for white people (54.5%). For persons experiencing homelessness, there are significant discrepancies in rates of reporting disabling conditions by race despite the fact that identified rates of disabilities are relatively similar across race among the general population in Essex County. A similar trend is found when we look at the specific disabilities reported by race. About 11% of black people identified a mental health issues, 9% identified a substance abuse issue and 11% identified chronic health conditions. For white people, about 31% identified a mental health issue, 38% identified a substance abuse issue and 16% identified a chronic health condition. The table below shows the reporting of disabling conditions as a percent of the total population experiencing homelessness by race.



Among those who disclosed a disabling condition, the difference in reporting of specific disabilities is not as large. Among black people disclosing a disabling condition, 44% reported a mental health issue, 46% reported a chronic health condition and 36% reported a substance abuse issue. Among white people disclosing a disabling condition, 57% reported a mental health issue, 30% reported a chronic health condition and 71% reported a substance abuse issue. The table below shows the reporting of disabling conditions among those that disclosed a disability.



About 24% of persons reporting a disabling condition identified receipt of SSI benefits. For black people identifying a disabling condition, about 32% were connected to SSI benefits as compared to 15.6% of white people and 22% of Hispanic/Latino people reporting a disabling condition.

About 63.9% of people reporting a disabling condition reported enrollment in Medicaid for healthcare benefits. Medicaid connection rates by race are relatively high with 72.8% of black people, 72.4% of white people and 66.5% of Hispanic/Latino people identifying a disabling condition reporting connection to Medicaid. No significant disparities were identified with relation to disabling condition, connection to Medicaid and race.

Among those reporting a disabling condition, about 12.4% entered the homeless system directly from an institution such as jail, a psychiatric hospital or a medical hospital. The majority of those entering the homeless system from an institution were released from jail (129 people, 8.5%). Among black people reporting a disability, 6.6% were released from jail as compared to 10.1% of Hispanic people reporting a disability and 19.8% of white people reporting a disability. No significant disparities were identified with relation to disabling condition, release from institution and race.

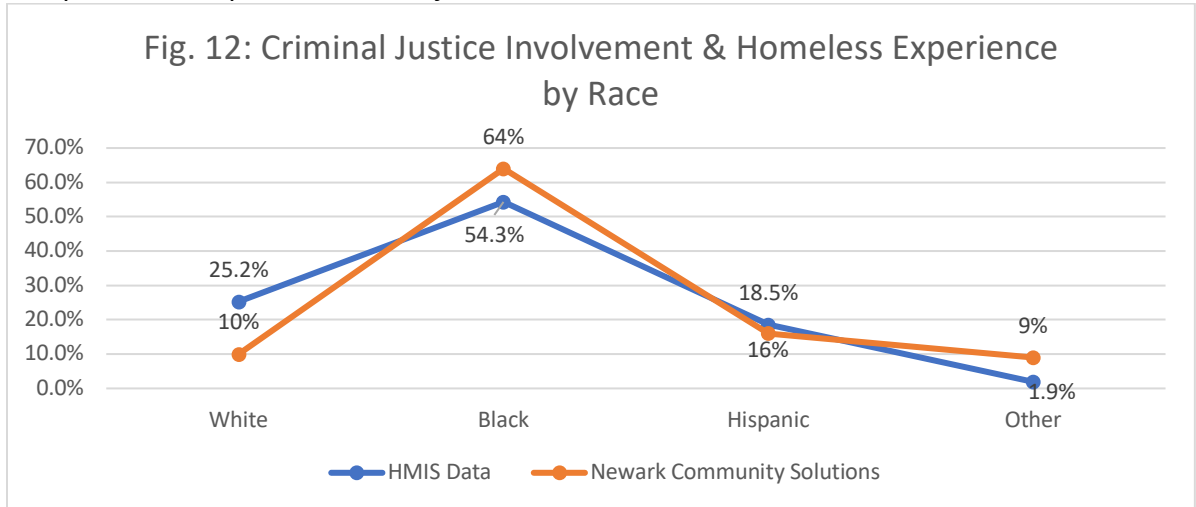
About 21.3% of people reporting a disabling condition indicated their primary cause of homelessness was related to disability or release from institution. Overall, amongst those reporting a disabling condition, about 6.9% indicated their cause of homelessness was release from jail/prison while 11.5% indicated their cause of homelessness was due to substance abuse.

About 30% of white people with a disabling condition indicated substance abuse was their cause of homelessness while 9.6% of Hispanic people and 8.8% of Black people identified substance abuse as their cause of homelessness. Similar differences were found in reports of release from jail/prison being the primary cause for homelessness. Among those reporting a disabling condition, about 11.1% of White people, 7.2% of Black people and 6% of Hispanic people identified release from jail/prison as the primary cause of homelessness.

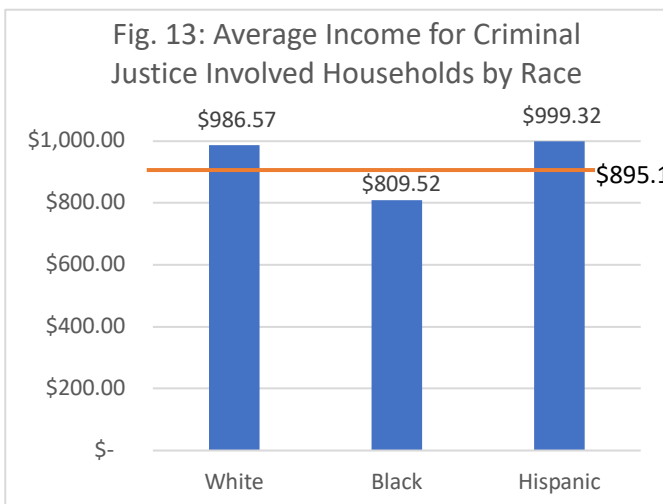
Criminal justice involvement

Out of the 5,207 individuals experiencing homelessness in Essex County over a 12-month period, 391 (7.5%) were released from an institution immediately prior to entering the homeless service system. The majority of those released from an institution (80% or 313 people) were release from jail or prison into homelessness. Among respondents reporting release from an institution, about 17.7% of White respondents, 8.1% of Hispanic respondents and 4.9% of Black respondents were released from jail into homelessness. This represents 19.8% of White adults experiencing homelessness, 11.8% of Hispanic/Latino adults experiencing homelessness and 6.8% of Black adults experiencing homelessness.

The rates of reported connection to the carceral system by race among persons experiencing homelessness are divergent from similar intersectionalities identified by programs outside of the typical homeless services. In the city of Newark, the Newark Community Solutions (NCS) program provides alternatives to incarceration through the Newark Municipal Court system. Individuals participating in the program can remain in the community through participating in alternative treatment options offered through the program. In 2019, about 24% of Newark Community Solutions program participants indicated an experience of homelessness in the prior year. The below chart identifies racial breakdown among NCS participants in comparison to reported criminal justice involvement in HMIS.



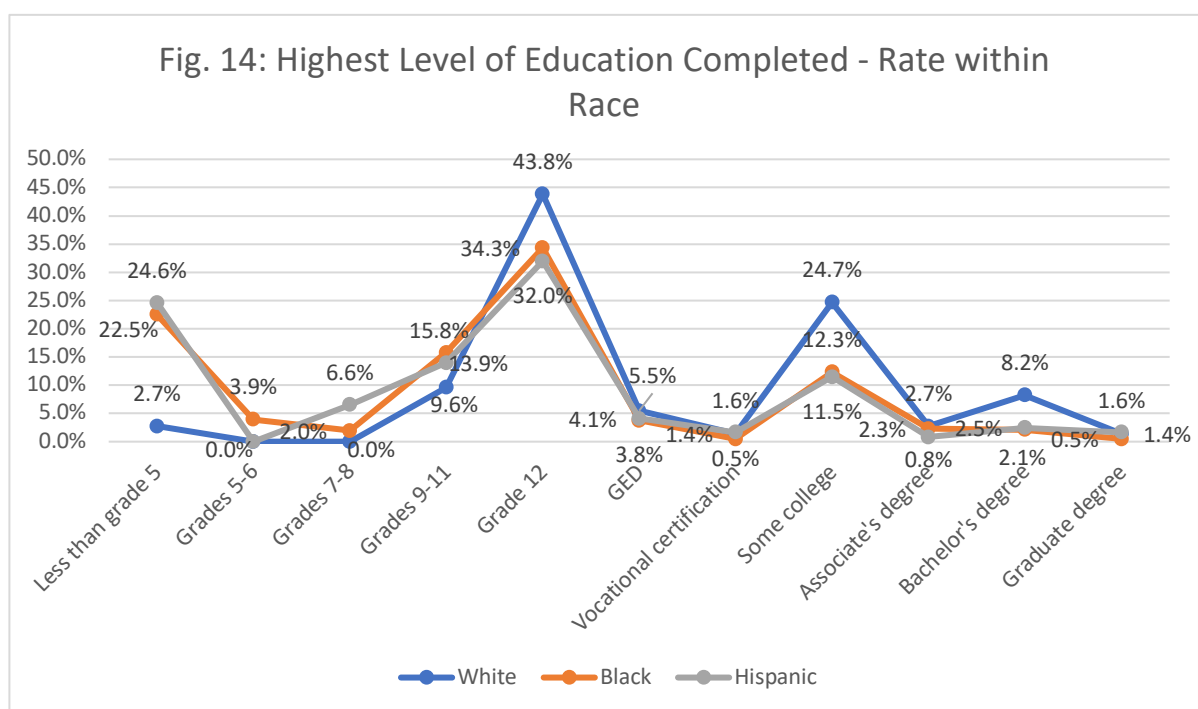
Among those released from jail prior to entering the homeless service system, the most prevalent disabling condition reported was substance abuse issues (29.1%) followed by mental health issues (18.2%). About 50.6% of White people entering homelessness from jail reported a substance abuse issue, and 32.9% reported a mental health issue. Comparatively, about 20% of Black people entering homelessness from jail reported a substance abuse issue, and 12.9% reported a mental health issue. Similarly, about 25.9% of Hispanic people entering homelessness from jail reported a substance abuse issue and 12.1% reported a mental health issue.



The average income for households reporting release from jail prior to entering the homeless service system was about \$895. This is higher than the average income of the general population experiencing homelessness which was about \$515. The table below identifies the average income by race in comparison to the total average income for those released from jail.

Education

About 76% of persons experiencing homelessness (3,953 persons) are over the age of 18. Of the adults, over 18 years of age, served in the homeless system, about 21% responded to questions regarding the highest level of education completed. Educational attainment reported by adults in the homeless service system varied by race. Within the group of adult respondents answering questions about their level of educational attainment, about 40% indicated they did not complete high school. About 44.2% of Black respondents reported not completing high school, with about 22.5% indicating their highest level of educational attainment was 5th grade. Similarly, about 45.1% of Latino/a respondents reported they did not complete high school, with about 24.6% reporting their highest level of educational attainment was 5th grade. Comparatively, about 12.3% of White respondents reported not completing high school with about 2.7% indicating their highest level of educational attainment was 5th grade.



Across all races, the greatest percentage of respondents indicated completion of high school (38.9%). About 49.3% of White respondents, 38.9% of Black respondents, and 36.1% of Hispanic/Latino respondents indicated completion of high school. 37% of White respondents reported participation in higher education (either some college, Associate's degree, Bachelor's degree, or Graduate degree). Meanwhile, 17.2% and 16.4% of Black and Hispanic/Latino respondents respectively reported participation in higher education.

Health

About 34.5% of persons experiencing homelessness indicated they did not have any insurance coverage. Amongst the general population in Essex County, about 12% of county residents did not have health insurance coverage. Lack of insurance coverage is significantly higher amongst persons experiencing homelessness than the general population.

The majority of persons experiencing homelessness were connected to Medicaid (59%). Medicaid coverage rates by race were relatively close with 60.8% of White people, 66.1% of Black people and 61.6% of Hispanic/Latino people reporting Medicaid coverage.

Medicare coverage rates did vary by race with 6.7% of White people, 2.8% of Black people and 3.4% of Hispanic/Latino people reporting connection to Medicare. These coverage rates line up with the age breakdown in each race where 8.1% of White people were over the age of 65 while 3% of Black people and 2.7% of Hispanic/Latino people are over the age of 65.

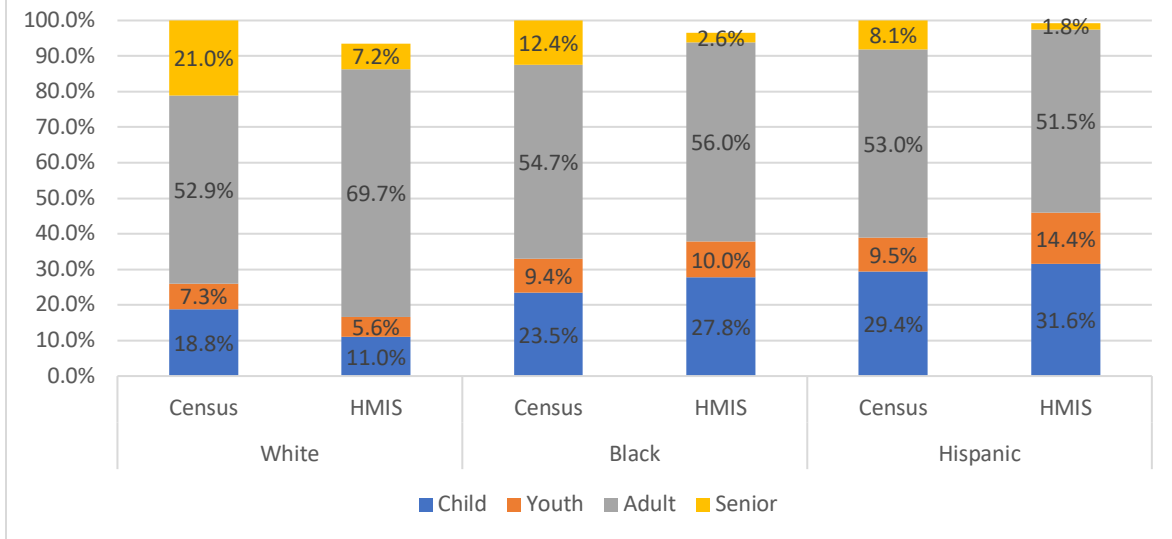
About 78 people entered the homeless service system directly from a hospital (both medical and psychiatric facilities). Of those reporting discharge from a healthcare facility prior to entering the homeless services system, about 11.5% were not connected to Healthcare insurance. About 73.1% were connected to Medicaid and 15.4% were connected VA health benefits.

About 16.3% of black people released from a healthcare facility into homelessness were not connected to insurance, as compared to 9.1% of Hispanic people and 0% of White people. Medicaid coverage rates were relatively high across race/ethnicity with 70.6% of White people, 73.5% of Black people and 81.8% of Hispanic/Latino people reporting connection to Medicaid.

Age ranges

The majority of persons experiencing homelessness in Essex County (51.3%) are between the ages of 25 and 64. About 24.1% of persons experiencing homelessness in Essex County are children under the age of 18. The rate of homelessness by age vary by race/ethnicity. The average age of White people experiencing homelessness is 43 years old compared to the average age for Black people at 34 and the average age for Hispanic/Latino people being 32 years old.

Fig. 15: Age Range by Race - Comparison of HMIS & Census Data



White people experiencing homelessness tend to be older with 7.2% of White people involved in the homeless service system being 65 and older. Comparatively, about 2.6% of Black people and 1.8% of Hispanic/Latino people are 65 and older. Conversely, Black and Hispanic households have higher rates of children experiencing homelessness. About 27.8% of Black people and 31.6% of Hispanic/Latino people are under the age of 18 compared to 11% of White people. For Black and Hispanic people, the age range distribution among persons experiencing homelessness is similar to the distribution in the general population with the exception of the number of seniors older than 65 identified. Among White people experiencing homelessness, the percent of children and seniors is lower than the percent of children and seniors in the general population.

The U.S. Department of Housing and Urban Development defines youth as persons between the age of 18 – 24. In Essex County rates of youth homelessness are highest in the Hispanic/Latino population with 14.4% being between the age of 18 and 24. Comparatively, 10% of Black people and 5.6% of White people are homeless youth.

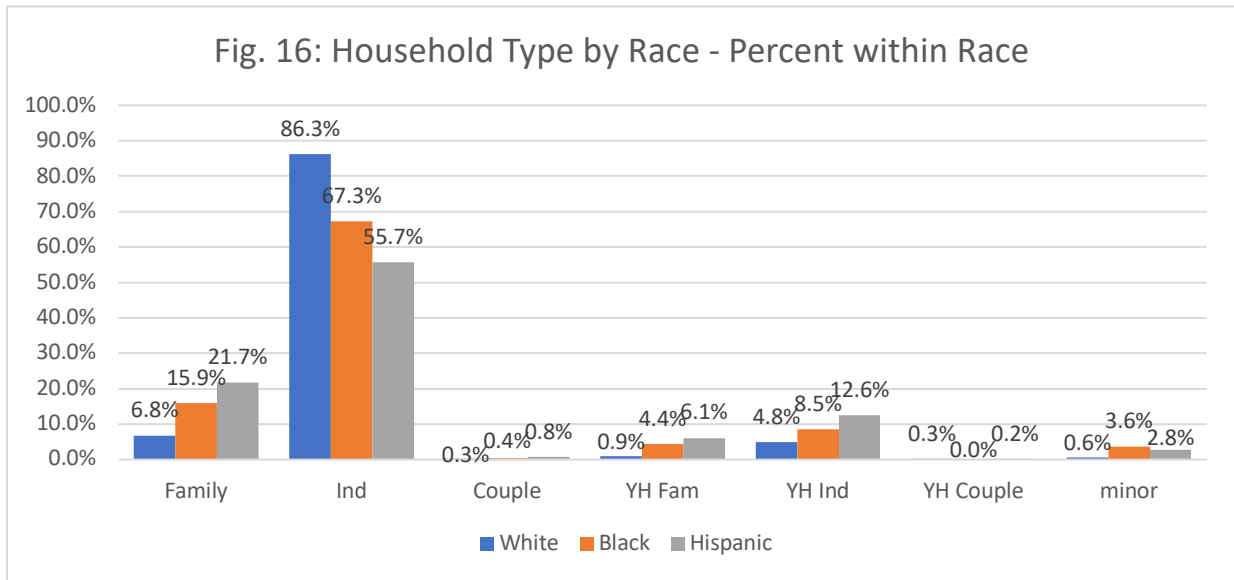
Family Type

In line with age trends by race, household types vary across race/ethnicity. About 13.5% of households in the homeless service system are families with children under the age of 18. 21.7% of Hispanic/Latino households are families with children, 15.9% of Black households and 6.8% of White households are families with children.

About 11.2% of household experiencing homelessness are youth households. Youth households are defined by the head of household being under the age of 25 and may include individual youth, unaccompanied minors, youth couples and youth families with younger

children. About 19% of Hispanic households, 13% of Black households and 6% of White households are youth households in which the head of household is under the age of 25.

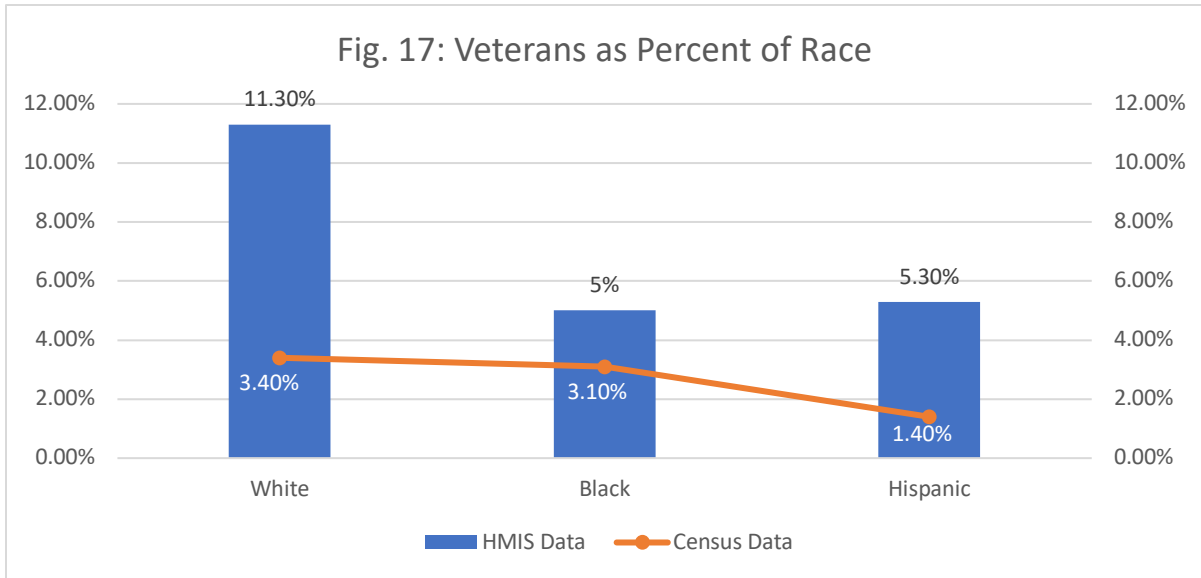
The majority of homeless households are individuals experiencing homelessness. 72.6% of all households are individuals 25 and older. 86.6% of White households, 67.7% of Black households and 56.6% of Hispanic households are individuals over the age of 25.



Special Populations

Veterans

About 5% of the adult population experiencing homelessness indicated they were a veteran. There is a higher rate of veterans among the population experiencing homelessness as compared to the general population of Essex County in which 2.7% of adults over 18 identified as veterans. For the purposes of this report veteran is defined broadly as any person who has served in the armed forces. The veteran definition used does not specify an amount of time of enrollment, participation in active war zone or type of armed service a person has joined. About 11.3% of White adults experiencing homelessness indicated they were a veteran as compared to 5% of Black adults and 5.3% of Hispanic/Latino adults. The rates of reported veteran status by race among persons experiencing homelessness differ from those reported amongst the general population of Essex County where 3.4% of White adults, 3.1% of Black adults and 1.4% of Hispanic adults are veterans.



Of the 204 veterans identified in the HMIS database, 73.5% indicated they had a disabling condition. The top reported conditions included Substance Abuse Issues (46.6%), Mental Health Issues (44.1%), and Chronic Health Conditions (43.1%). The top reported condition for White veterans was substance abuse issues (71.1%), whereas the top reported condition for Black veterans was Chronic Health Conditions (47.6%) and the top reported condition for Hispanic/Latino veterans was Mental Health Issues (50%).

About 94.6% of veterans reported connection to VA Medical Benefits or Medicaid (or some combination of the two) while about 9.3% reported no connection to health care benefits. VA medical benefits were the top reported type of medical insurance for each race with 80% of White veterans, 54% of Black veterans and 57.7% of Hispanic Veterans reporting connection to VA health insurance. Hispanic/Latino veterans reported the lowest rates of not being connected to insurance. About 7.7% of Hispanic/Latino Veterans did not have health insurance as compared to 8.7% of Black veterans and 11.1% of White veterans.

About 28.4% of veterans reported receiving VA Disability benefits. 14.7% reported receiving earned income and 3.4% reported receiving General Assistance. 30.4% of identified veterans reported they had no source of income. When broken down by race, 34.6% of Hispanic/Latino Veterans, 31.7% of Black Veterans and 26.7% of White Veterans reported no source of income. VA disability benefits were the top reported income source, 23% of Black Veterans, 33.3% of White Veterans and 34.6% of Hispanic Veterans. More Black Veterans reported earned income (19.8%) as compared to Hispanic/Latino Veterans (11.5%) and White Veterans (4.4%).

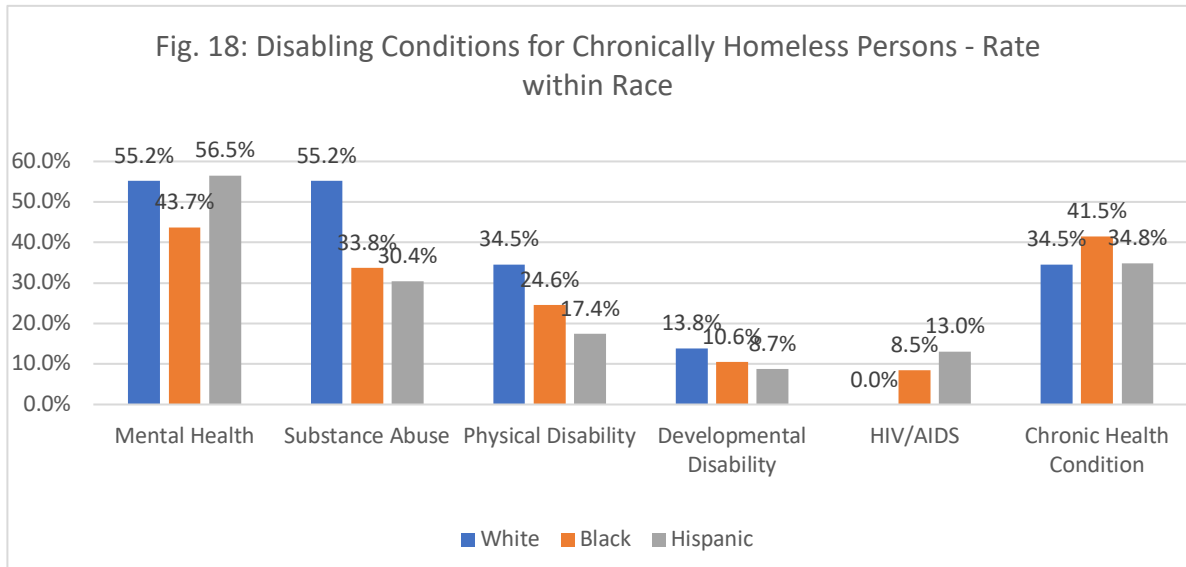
Chronically Homeless

The Department of Housing and Urban Development defines chronic homelessness as the head of household having a disabling condition and 12 months of homelessness, continuously or cumulatively between at least 4 episodes over a 3-year period. For analysis related to the

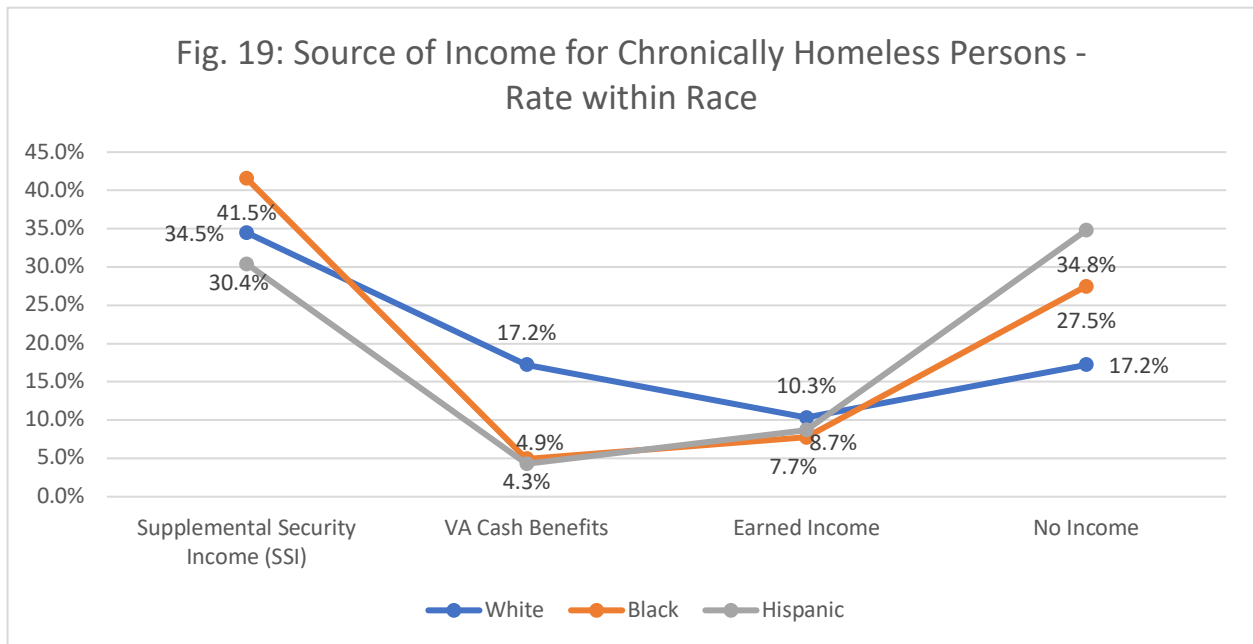
population experiencing chronic homelessness, no statistically significant differences were identified. Below is a reporting of the differences identified.

About 3.9% of persons experiencing homelessness were identified as chronically homeless based on data entered into the HMIS. The rates of chronic homelessness identified within HMIS are significantly lower than those identified at the Point in Time Count both at the local and state level. During the 2020 PIT count about 18% of the population experiencing homelessness were chronically homeless in Essex County. The local rate was in line with the statewide rate of 17% of the population experiencing homelessness being defined as chronically homeless in the State of New Jersey. The significant disparity in HMIS data and PIT data with regards to the chronically homeless population is likely due differences in unsheltered count for each dataset. Traditionally the PIT count has a more comprehensive unsheltered count as compared to HMIS. During the 2020 PIT about 52% of the identified chronically homeless population for the State of New Jersey were unsheltered. Similarly, for Essex County, about 66% of the identified chronically homeless population was unsheltered. Within the HMIS dataset used for this report, about 18% of the identified chronically homeless population was unsheltered.

Rates of chronic homelessness varied by race with 6.5% of White persons, 4.1% of Black persons, and 3.2% of Hispanic/Latino persons being identified as chronically homeless. About 47.5% of persons identified as chronically homeless reported 3 or more disabling conditions. About 62.1% of White respondents, 47.8 of Hispanic/Latino respondents and 44.4% of Black respondents reported three or more disabling conditions. The most prevalent disabling conditions reported were Mental Health issues reported by 48% of respondents (56.5% of Hispanic/Latino respondents, 55.2% of White respondents, 43.7% of Black respondents) followed by 39.6% reporting Chronic Health conditions (41.5% of Black respondents, 34.8% of Hispanic/Latino respondents and 34.5% of White respondents) and 37.1% reporting Substance Abuse Issues (55.2% of White respondents, 33.8% of Black respondents, and 30.4% of Hispanic respondents).



About 90% of chronically homeless persons reported connection to healthcare – Medicaid (63.9%), VA Medical benefits (17.3%), Medicare (9.4%). Despite high rates of connection to healthcare benefits, there are discrepancies in the connection rates by race. About 3.4% of chronically homeless white persons reported no healthcare coverage as compared to 11.3% of chronically homeless black persons and 21.7% of chronically homeless Hispanic/Latino persons. With regards to income, about 27.2% of chronically homeless persons reported to source of income. 17.2% of chronically homeless white persons, 27.5% of chronically homeless black persons and 34.8% of chronically homeless Hispanic/Latino persons reported no source of income. The most prevalent source of income reported was SSI (39.1%) followed by SSDI (11.9%) and Earned income (7.9%).

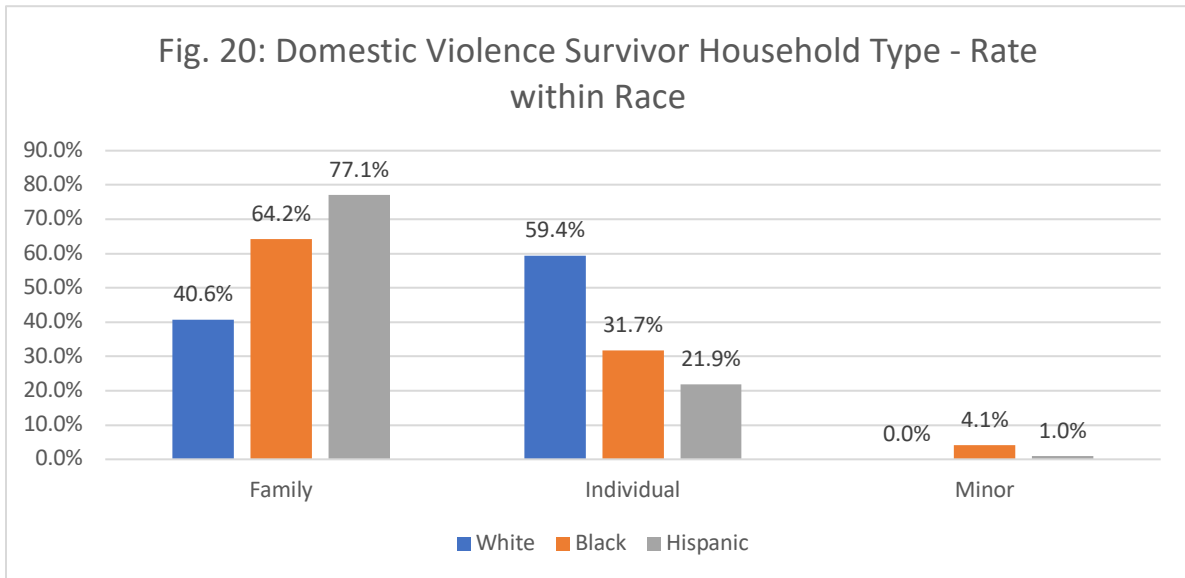


Domestic Violence Survivor

For the purpose of this report households identified as survivors of domestic violence include both those fleeing DV as well as those reporting previous experience with domestic violence. About 7.5% of persons experiencing homelessness indicated they were survivors of Domestic Violence. Higher rates of Domestic Violence are reported among persons identifying as Hispanic/Latino with 14.7% reporting DV experience as compared to 7.2% of White persons and 7% of Black persons.

About 16.9% of persons reporting DV experience indicated they had no healthcare insurance. Among Hispanic/Latino persons with a DV experience, 24.8% reported no health insurance as compared to 14.8% of Black persons and 6.3% of white persons. The most common type of health insurance was Medicaid (75.7%). About 27.1% of persons reporting a DV experience indicated they had no source of income. Broken down within race, 46.9% of white persons reporting a DV experience indicated they had no source of income as compared to 25.9% of

black persons and 22.9% of Hispanic/Latino persons reporting a DV experience. The top sources of income identified were SSI (18.9%) and Earned Income (6.4%).



About 65.2% of persons identifying a DV experience were in families with children under the age of 18. Out of those families about 10.7% were youth families where the head of household is between the age of 18 and 24. 77.1% of Hispanic persons were in families, 64.2% of Black persons and 40.6% of white persons reporting a DV experience. Youth families were most prevalent among Black persons experiencing DV with 13.6% of black persons indicating they were part of a youth household. For White persons experiencing DV, the majority were individuals. About 59.4% of white persons reporting an experience with DV were individuals, 12.5% of whom were youth between the age of 18 and 24. Comparatively, about 31.7% of black persons and 25% of Hispanic/Latino persons experiencing DV were individuals.

In line with household make up, the age ranges of persons reporting DV experiences differ by race. 50% of White persons experiencing DV were adults between the age of 25 and 64. 43.2% of Black persons and 50.5% of Hispanic/Latino persons experiencing DV were children under the age of 18.

Outcomes

As homeless service systems work through understanding the characteristics of those impacted by homelessness consideration of who experiences homelessness within the community has implications for the ways in which services are provided and provide clues to addressing up-stream social issues pushing people into experiences of homelessness. In addition to understanding the characteristics of who experiences homeless, it is equally critical to examine outcomes by race to ensure the system does not contribute to perpetuating the disparities that exist. The following section will review system outcomes and any differences by races as a means of understanding how services protect against perpetuating racial disparities.

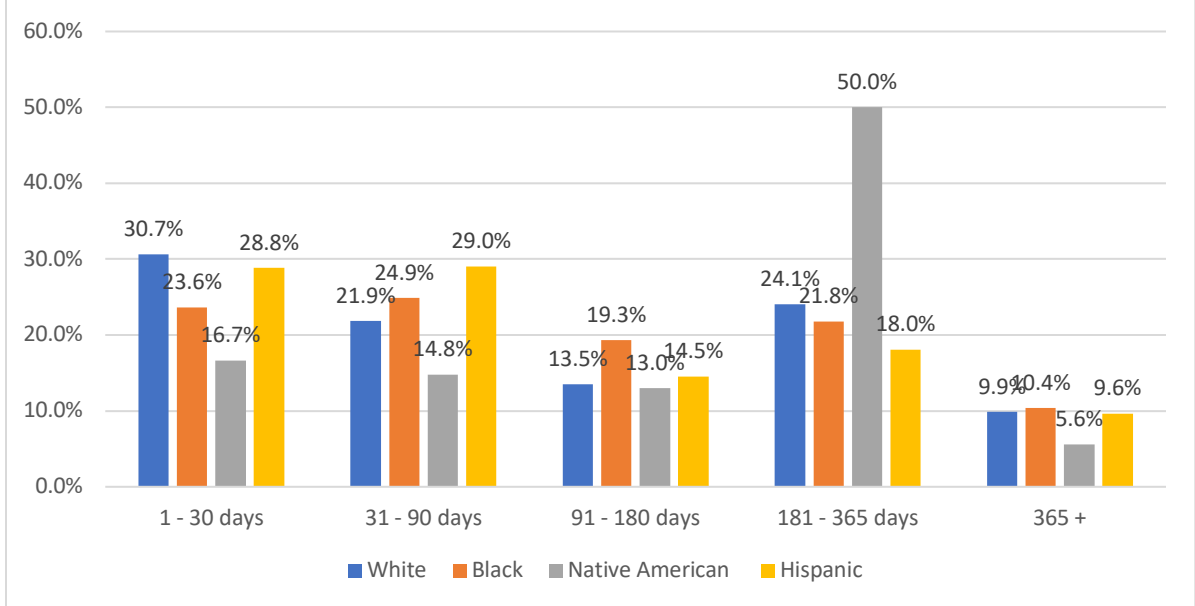
Length of program stay

Communities across the country work to reduce the length of time households remain homeless as a means of reducing trauma and associated risks that increase with continued experiencing of housing instability and homelessness. One measurement used to understand how effectively people move through the system is a review of the average length of time within programs.

About 820 individuals indicated they were on the street during the 12-month period and interacted with outreach teams in Essex County. About 59% of those on the street did not provide information about their racial background. Around 40% of respondents indicated their racial background. Of the 820 persons identified as unsheltered, 5.6% were White, 29.1% were Black, 2.8% were Native American/Alaska Native, and 2.9% were of Hispanic origin. Among White unsheltered persons, 28.3% were in program for more than 1 year as compared to Black unsheltered persons where 30.1% were in program for more than 1 year.

Over the course of a 12-month period 3276 adults and children access Emergency Shelters in Essex County. About 7% of people in shelters identified as White, 76.5% identified as Black, 14.8% identified as Hispanic, and .9% identified as Native American/Alaska Native. Among White persons in Emergency Shelter, 6.1% were in program for more than a year as compared to 8.5% of Black people and 7.8% of Hispanic/Latino people. The majority of White people in shelter (36.8%) were in program for 30 days or less whereas the majority of Black people in shelter (27.2%) and Hispanic people in shelter (30.5%) were in program for 31 – 90 days.

Fig. 21: Length of Program Stay for Unsheltered and Emergency Shelter Residents - Rates within Race



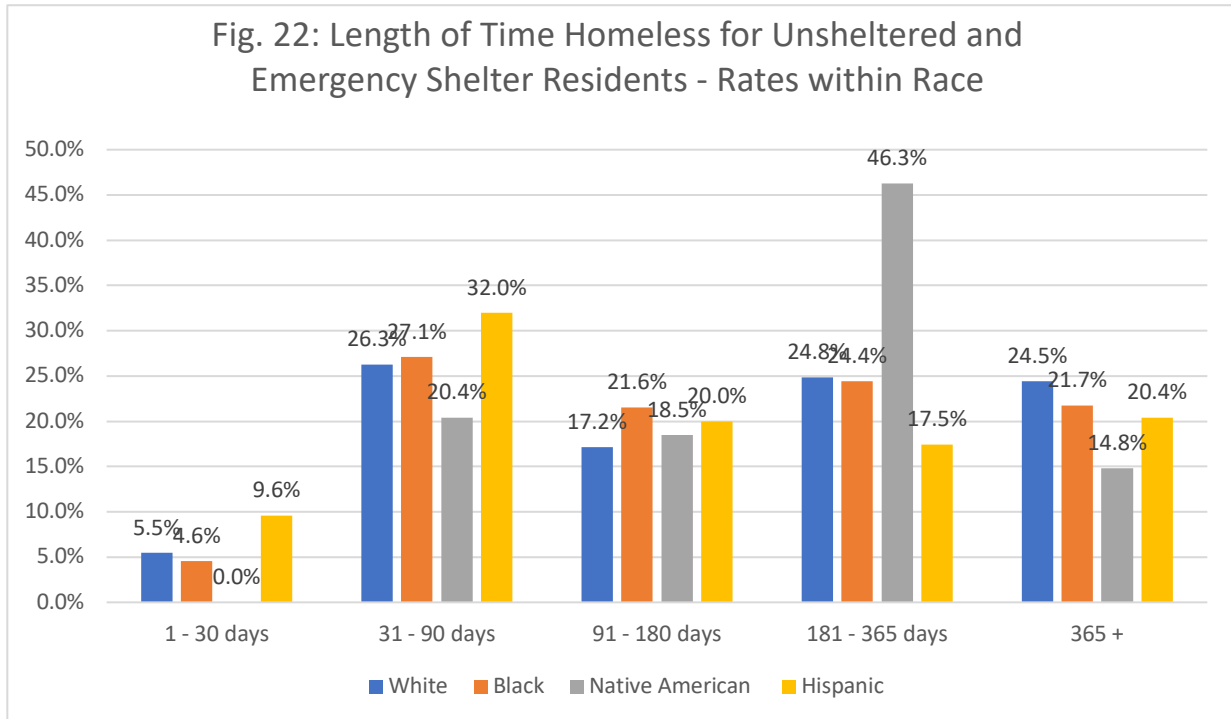
Total length of homelessness

A secondary measure of system outcomes reviews the total length of time individuals and families spend homeless. This measure includes length of stay in homeless programs along with reported length of homelessness prior to program entry. About 20% of persons experiencing homelessness over a 12-month period indicated their total length of homelessness was greater than 1 year. 19.6% identified experiencing homelessness for 1 – 3 years, .7% indicated they experienced homelessness for 3 – 5 years and .3% indicated they experienced homelessness for greater than 5 years. About 77% of those experiencing homelessness for greater than 1 year were in Emergency Shelter or on the Street. The following breakdown does not include those individuals in transitional housing as those programs are designed as 24-month programs where length of homelessness is expected to be longer in nature.

About 20% of those homeless for longer than 1 year were on the street. However, among those homeless for more than 3 years, 86% were on the street. This data suggests that persons with the longest periods of homelessness are not engaged in sheltering programs and primarily interact with outreach and service programs in the community, if at all. When examining the racial breakdown for total length of homelessness among unsheltered persons, 45% of unsheltered Black individuals were homeless for greater than 12 months as compared to 32.6% of unsheltered White individuals. However, when the length of time is parsed out more, 10.8% of unsheltered White individuals indicated a total length of homelessness greater than 3 years as compared to 6.7% of unsheltered Black individuals. Conversely, a larger percent of unsheltered Black individuals (38.5%) indicated a total length

of homelessness between 1 and 3 years as compared to the percent of unsheltered White individuals (21.7%)

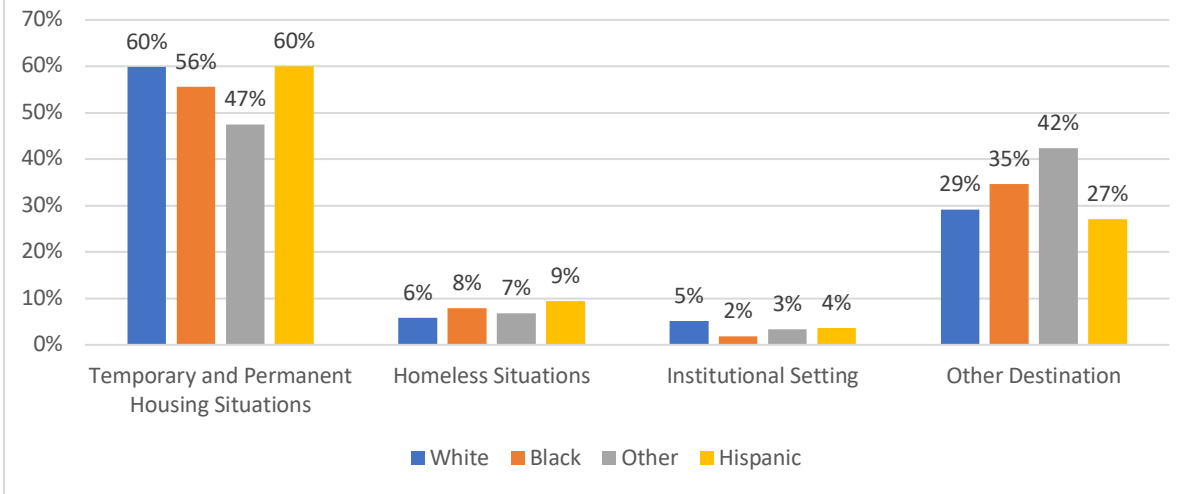
The remaining 80% of persons homeless for longer than 1 year were in emergency shelter programs. The majority (99%) of persons in emergency shelter experiencing homelessness for greater than 12-months indicated they were homeless between 1 and 3 years. About 25% of White persons in emergency shelter were homeless between 1 and 3 years as compared to 20.1% of Black persons in emergency shelter.



Exits to PH

Programs offering outreach services, emergency shelter and transitional housing in Essex County work to connect program participants with housing and supports for successful exits. Over the course of the 12-month period, 62.2% of persons served exited the system where discharge information has been recorded for them. Out of the 3240 persons exiting programs during the 12-month period, 53.2% exited to a permanent housing location while the remaining persons exited to other locations such as temporary placement, back to homelessness, to an institutional setting or other destination including those not reported.

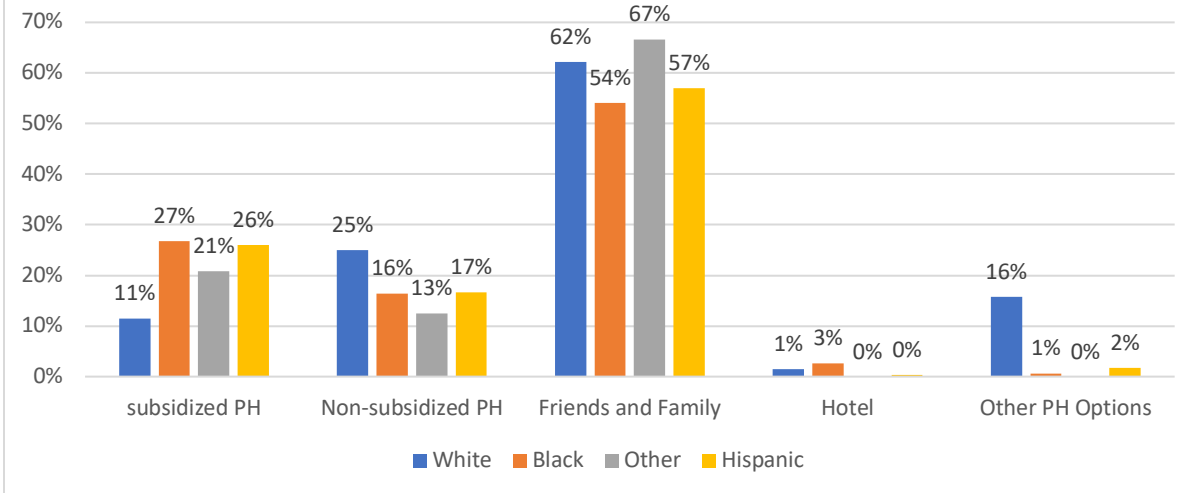
Fig. 23: Destination - Rate within Race



About 47.9% of White people, about 53.3% of Black people, and about 57.3% of Hispanic/Latino people exiting programs left to a permanent housing location. The majority of persons exiting to permanent housing (55%) moved in with friends and family upon leaving programs. About 25% exited to some form of subsidized housing and about 17.1% exited to non-subsidized housing in the community.

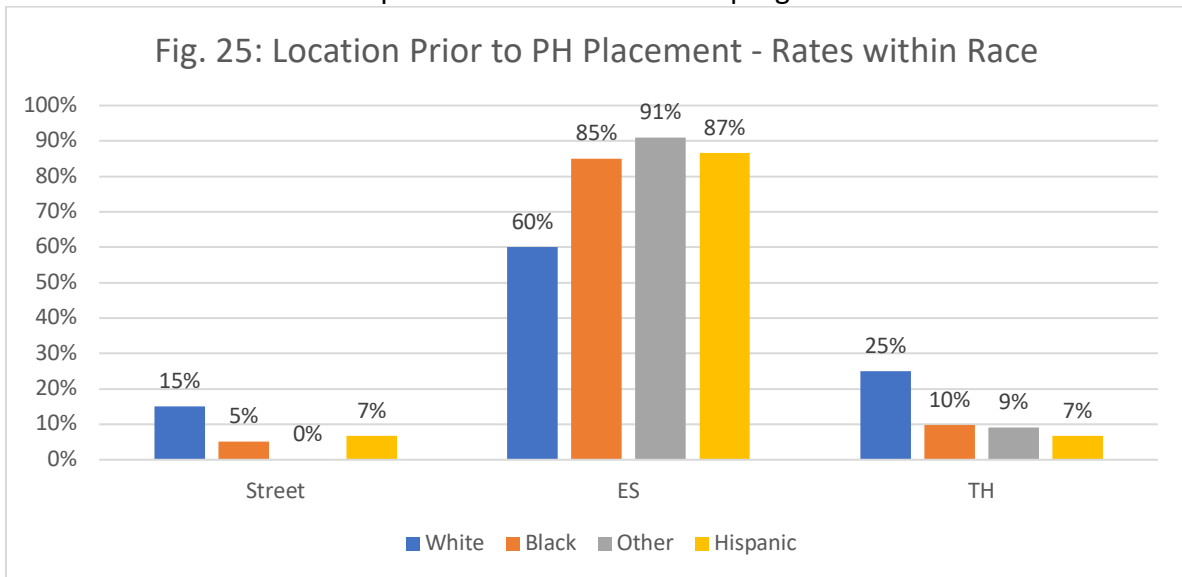
Placement and friends and family was the primary type of exit to permanent housing across racial lines with 62.1% of White persons, 56.9% of Hispanic/Latino persons and 54.1% of Black persons reporting this type of placement. Exits to non-subsidized permanent housing was the second most reported permanent housing destination for White persons (25%) whereas exits to subsidized permanent housing was the second most reported permanent housing destination for Black (26.8%) and Hispanic/Latino (26%) persons.

Fig. 24: Permanent Housing Destinations - Rates within Race



PH Admissions

We examined admission data for permanent housing programs entering data in HMIS between 2018, 2019 and 2020. Program admissions during this time period were compared to persons interacting with outreach, shelter and transitional housing programs in the same time period. During this 2 ½-year period, 1,245 people were admitted into permanent housing programs entering data in HMIS. About 31% of admissions during this timeframe were people served in homeless service programs entering information in HMIS (outreach, shelter & transitional housing). About 26% of admissions during this period were individuals utilizing emergency shelters, 3% of admissions were from persons in transitional housing and 2% of admissions were from persons in street outreach programs.



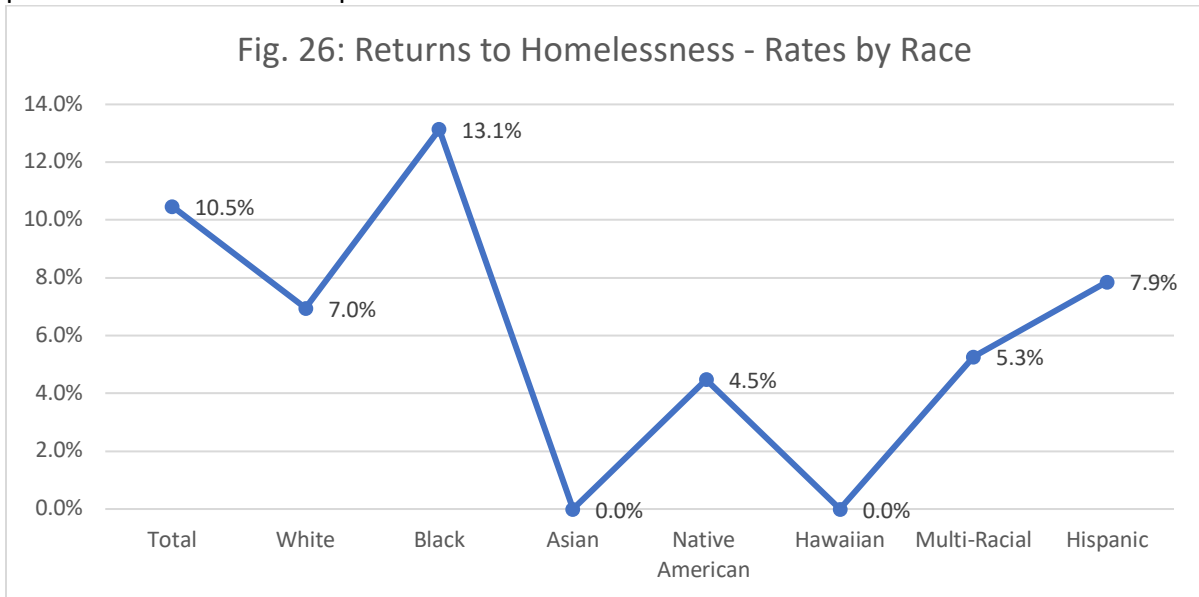
Out of the 1,245 admissions to permanent housing, 389 were persons served in other homeless projects in the County. Out of those 389 persons, 5.7% were unsheltered, 84.1% were from emergency shelter and 10.3% were from transitional housing. About 84% of the 389 persons interacting with homeless programs were Black or African American, 7.7% were Hispanic/Latino and 5.1% were White.

Among Black people admitted into permanent housing from HMIS entering programs, 85% were from emergency shelter as compared to 86% of Hispanic/Latino people and 60% of White people. About 25% of White persons admitted into permanent housing from HMIS entering programs came from transitional housing as compared to 9.8% of Black people and 6.7% of Hispanic/Latino people. About 15% of White persons admitted into permanent housing from HMIS entering programs were unsheltered prior to program entry as compared to 5.2% of Black people and 6.7% of Hispanic/Latino people.

Returns to homelessness

Returns to homelessness are measured by identifying individuals and families existing the homeless service system to permanent housing who subsequently return to shelter, street outreach or transitional housing programs at a later date. For the purposes of this report we

examined households existing the homeless system to permanent housing within the 2-year period prior to this report and identified those persons/households which returned to a homeless program during the report year. Of the 5,207 persons identified as experiencing homelessness during the 12-month period, 545 persons previously existed the system to permanent housing. This indicates about 10.5% of the population exiting homelessness to permanent housing returns. When broken down by race, about 13.1% of Black people experiencing homelessness returned to the system compared to 7.9% of Hispanic/Latino persons and 7% of White persons.



The majority of persons returning to homelessness entered Emergency Shelter programs during the report period (77.6%). About 18.2% of persons returning entered Transitional Housing programs and 4.2% returned to places not meant for human habitation, interacting with street outreach teams.

Discharge Reasons

At program exit, projects entering information in HMIS must record the reason for client discharge. During the selected 12-month period, 3,126 persons left programs within the system. Of those persons exiting programs the most prevalent reasons provided for program discharge included completion of program (24.9%), left for housing opportunity (16.7%) and reached maximum amount of time allowed in the program (8.5%).

For White persons leaving program, the top 3 reported reasons included completion of program (38.3%), unknown (17.1%) and other (10.5%). For Black persons leaving program, the top 2 reported reasons included completed program (23.1%), unknown (18.8%), and left for housing opportunity (17%). For Hispanic/Latino persons leaving program the top 3 reported reasons included completed program (26.3%), left for housing opportunity (20%) and other (16.3%)

Implications and Recommendations

Efforts to end homelessness typically revolve around strategies to increase access to housing and increase earning potential to ensure households can maintain that housing. Often additional services outside of housing navigation and employment services also support people in accessing and maintaining housing. While additional strategies do not constitute a requirement to access permanent housing, they do have significant implications in a household's ability to navigate systems and maintain housing once it has been accessed. In the following section we will examine some of the implications of the disparities identified from the HMIS data.

Income

A primary factor in ending homelessness is assisting households in earning a living wage which enables them to maintain housing. While the system seeks to connect as many households as possible to vouchers which have the ability to make all housing affordable no matter the household income level, the availability of those vouchers is limited. Given the reality that subsidized housing and rental assistance vouchers are in limited supply as compared to the number of households in need of this resource, much effort is placed into connecting households to employment and income that will sustain them in housing. The success of those employment and training programs are only as good as our understanding of those being served. Without tailored supports according to household needs, programs run the risk of providing insufficient support that does not achieve the goals hoped for. The income gap between Black and Latino families as compared to White families in the general population is widely known. While the disparity is not quite as large, a similar trend exists among households experiencing homelessness.

Some of the specific population characteristics that must be taken into consideration when working to support households experiencing homelessness in increasing their earning potential include the following:

- A significant portion of Black persons experiencing homelessness have indicated that the highest level of education completed is up to grade 5. Any strategy to assist these individuals in increasing their earning potential must also include steps to engage at the highest educational level attained and should include steps to increase the education level to one which would afford them the ability to obtain employment paying a living wage. The typical case management services available in the homeless system are not generally equipped to provide the level of support these households may need. As such, a stronger partnership with education and employment services is required to ensure households are provided the level of service according to their needs.
- While the majority of persons in the homeless system are individuals, a larger proportion of Black and Hispanic/Latino households are families with children under the age of 18 as compared to white households. Employment related services should take into consideration the specific needs of families when working to connect

- households to employment. These family specific needs can include childcare considerations, transportation considerations, job/sector flexibility related to family leave, and changes in family composition (both expansions of family/children and contractions of family composition)
- Many of the homeless service agencies in Essex County are located in the City of Newark. While these agencies may have strong ties to the community immediately surrounding them, it is important to connect households to employment services and opportunities throughout the County providing the highest level of choice in accessing employment and housing. Considerations should be made not only for the industries households are steered towards, but also the geographic regions within the county for both housing and employment opportunities.

Special Needs

For the context of this report disabling condition is broadly defined and self-identified as falling into one or more of the following categories: Mental Health issues, Substance abuse disorder, physical disability, developmental disability, HIV/AIDS, or a chronic health condition. While the presence of a disabling condition does not automatically necessitate specialized supports in system navigation or housing, an effective homeless system focused on ending homelessness will work to remove barriers to housing and provide a range of supports to enhance stability in housing for persons with these conditions. In Essex County about 29.1% of persons identified a disabling condition yet rates of reporting disability vary significantly across race and ethnicity. The American Psychiatric Association identifies that rates of mental illness in African Americans are similar to those of the general population. However, among persons experiencing homelessness, only about 11% of Black people experiencing homelessness reported mental health issues as compared to 31.4% of White people. Across the board, Black people reported disability at lower rates than White people with the exception of reporting on HIV/AIDS where 1.9% of Black people identified they had HIV/AIDS and 1.1% of White people.

The data from HMIS signals lower rates of disabling conditions for Black people experiencing homelessness but this does not provide answers as to why this phenomenon appears. This data could be the result of truly lower rates of disabling conditions for Black people experiencing homelessness, or it could signify challenges with how disabling condition information is collected. Given the broader trends of disabling conditions in the larger community in Essex County, a stronger connection to healthcare providers (both medical and mental health care) could lend to a more accurate determination of disability resulting in better connection to appropriate services when people enter the system. Improvements to data collection could include:

- Data sharing
- Partnership with medical professionals to collect information on disabling conditions
- Re-training of frontline staff to account for cultural differences in reporting when collecting information on disabling condition

- Restructuring of how & when questions around disabling conditions are administered

Criminal Justice

The HMIS has limited information regarding involvement with the criminal justice system prior to program entry. Often, past involvement with criminal justice is not identified until/if an individual is enrolled in case management and receiving supports to address barriers to stable housing. While the HMIS data does not provide a robust understanding of the intersection of homelessness and involvement with criminal justice, the limited exits to permanent housing and anecdotal information regarding the challenges of accessing housing indicate a higher prevalence of criminal justice connection than reported in HMIS. The information currently collected in HMIS does not adequately allow for a full understanding of the impact of involvement in the criminal justice system among persons experiencing homelessness. There are opportunities to expand the dataset by including questions regarding previous interaction with criminal justice in local coordinated assessment questionnaires. Additionally, programs could work to collect information regarding barriers to accessing permanent housing which may shed light on the intersection of criminal justice involvement and housing stability.

While the HMIS does not provide a complete picture regarding the impact of criminal justice involvement on experiences of homelessness and future housing stability, there is an opportunity to improve supports for persons operating within this intersection where anecdotal information suggests a gap in the current system. Connection to legal services is critical to support individuals experiencing homelessness address pending criminal justice issues and to provide support with expungements and other services that may increase their ability to access permanent stable housing. Additionally, individuals would benefit from stronger coordination between courts, jails and re-entry programs to ensure individuals without housing supports can quickly access system services upon their release from jail/prison.

Education

A significantly higher percent of black people experiencing homelessness indicated their last grade completed was less than 5th grade. An important consideration in service structure should include a review of the grade level any education & training interventions are geared towards. A stronger connection between education services at a variety of levels will enable all persons to access support to attain educational levels that will enhance their earning potential. In considering up-stream efforts to prevent homelessness, the education system could focus on providing added supports to those children at increased risk of dropping out of school prior to high school as a means of interrupting one of the pathways to homelessness.

Age

While the majority of persons experiencing homelessness are adults between the age of 25 and 64, there are pockets of discrepancies by race at the extremes of the age range. The HMIS data identifies a larger White population over the age of 65 while also showing a larger Black and Latino population under the age of 18. Effective services provided to stabilize households must take into consideration the age and subsequent prospects for those households. For example, seniors experiencing homelessness could not be expected to increase their income through employment as a means of stabilizing housing. Additionally, for seniors experiencing homelessness, services connected to physical health become more critical. Traditional homeless services are not fully equipped to address the needs of an aging population and would benefit from collaboration with senior specific services in support persons experiencing homelessness over the age of 65.

On the other end of the spectrum, there are a significant number of children and youth experiencing homelessness within the family unit. Most supports provided within the system are targeted towards the head of household and seek to stabilize those households in permanent housing. An important factor that must be a consideration in the provision of services are the specific needs of children and youth. These youth specific services include childcare, connection to education supports, and youth specific trauma informed care/counseling. In building supports to address the needs of youth experiencing homelessness, it is also important to create connections to the child welfare system as a means of interrupting the flow of youth into adult homelessness.

Family Type

The HMIS data analyzed for the 12-month period indicates Black and Hispanic/Latino households have higher rates of families with children under 18. These households have higher representation both in families where the head of household is over the age of 25 as well as in youth families where the head of household is between the age of 18 and 24. Addressing the needs of families experiencing homelessness include particular considerations such as childcare, apartment size, necessary housing cost to accommodate family size and changes in family composition. Issues such as transportation, childcare and distance between housing, employment and school can make or break stable housing placements. Additionally, heads of households must consider employment with flexibility to allow for the unavoidable changes in schedule that come with taking care of young children.

Conclusion

This report has documented some of the disparities present in the population experiencing homelessness along racial lines. While many of these disparities are the result of larger societal forces, the homeless service system remains responsible for connecting households to permanent housing and stabilizing them. This ultimately comes with the requirement that the system address the racial equity issues present and connect with appropriate sectors to mitigate the impact of structural racism. Successful reduction of the disparities present in the system requires an attention to the disparities present and connection to community

partners that are equipped to address additional needs from a different angle. There is further investigation necessary to understand the key targets in addressing racial equity in the system however from this preliminary report it is clear the racial inequity exists within the system and has an impact on outcomes.

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