

ADVOCATES TO END HOMELESSNESS

DATA COLLECTION GUIDE FOR THE 2001 POINT-IN-TIME SURVEY OF THE HOMELESS

Prepared by:

Advocates To End Homelessness



c/o Human Services Council of Mid-Fairfield

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HISTORY AND DEVELOPMENT OF THE POINT-IN-TIME SURVEY OF THE HOMELESS

Advocates to End Homelessness (ATEH) is a consortium of city, state, and local not-for-profit agencies dedicated to strengthening the continuum of services available for greater Norwalk's homeless population and persons at risk of becoming homeless including, but not limited to, persons with AIDS, alcohol or substance abuse problems and mental health issues through the collection and dissemination of data; the sponsorship of community training sessions; efforts to attract public and private funds for services to the above-mentioned populations including the creation of housing; and the encouragement of collaboration and communication among service providers at monthly ATEH meetings. ATEH is convened by the Human Services Council of Mid-Fairfield

Data collected by the Federal government and reported in the 1990 Census of Population and Housing provides some statistical data on homelessness in the greater Norwalk area. (Note: 2000 Census data is not yet available). This data, however, does not provide information as to the causes of homelessness, what sub-populations are most at risk of becoming homeless, the services needed by homeless persons, the structure of homeless families, or the incidence of homelessness by demographics such as race, gender and age.

In an effort to better identify and quantify the root causes of homelessness in the greater Norwalk Area, ATEH developed a process for conducting an unduplicated count of the homeless. The development process included the creation of a standardized survey instrument for data collection purposes; the development of data analysis templates for use with spreadsheet, database and geographic information systems software; volunteer recruitment and training; data evaluation and analysis; and testing. Full development of the process took approximately seven months.

The survey as it exists today was first implemented in March 1997, the repeated survey in March 1999 and realized the following accomplishments:

- Forty-five (45) agencies and numerous community volunteers -- including the homeless and formerly homeless -- participated in the design and implementation of the survey.
- Over 900 hours of time was donated by volunteers to ensure the successful development and implementation of this project.
- 536 complete surveys from persons who were homeless, at risk of becoming homeless, or without permanent housing were obtained by volunteers in a five day period of time.
- An objective foundation for the uniform and periodic survey of the homeless was developed.
- The data obtained and community partnerships strengthened through the survey process helped secure a total of over \$3.5 million in Supportive Housing Program

funding for the Greater Norwalk Area Continuum of Care priority projects in fiscal years 1997 - 2000 and over \$200,000 in CDBG funds for the further development of permanent housing and support services for the homeless.

- The data obtained and community partnerships strengthened through the survey process helped leverage over \$10 million in in-kind services to support the Greater Norwalk Continuum of Care's projects over the last few years.

ATEH conducts a point in time unduplicated count of the homeless every two years. Data is collected using a standardized survey instrument during a specified five-day period by community service providers, ATEH consortium members and trained community volunteers using a uniform survey designed by ATEH. Questions on the survey target information required for completion of U.S. Department of Housing and Urban Development funding applications including the Community Development Block Grant (CDBG) and Continuum of Care programs.

Completed surveys are returned to ATEH for entry into a relational database. This database allows survey results to be viewed in database, spreadsheet or map form.

DEFINITIONS OF HOMELESSNESS

A number of definitions for the word "homeless" exist in state and Federal regulations and program planning guides. Most of the funding available to communities to create programs and housing for the homeless is Federal funding. Some of this funding may be granted directly to not-for-profit organizations for the purpose of administering a program while other types of funding passes through municipal or state organizations to not-for-profit organizations operating at the community level. In any of these cases, the general rule is this: if the funds originate at the Federal level, it is the Federal rules and definitions that apply.

According to McKinney Act and other Federal guidelines, a person is homeless if that person:

- lacks a fixed, regular and adequate nighttime residence, has a supervised emergency shelter as a primary nighttime residence;
- resides in an institution providing temporary (less than 30 days) residence for individuals in need of institutionalized living (halfway houses, drug and alcohol treatment centers, mental health) and (1) was homeless at time of entry into institution and (2) will be homeless upon discharge;
- sleeps somewhere not designed as a regular sleeping accommodation for human beings, for example -- sleeps in cars, parks, streets/sidewalks, or abandoned buildings;
- sleeps in a building that has been condemned as unfit for human habitation, e.g. living in a boarded up or abandoned building;
- is being evicted within the week and (1) has not secured a subsequent residence and (2) does not have the resources or support networks needed to obtain housing;
- is being released from transitional housing designed for the homeless;
- is a victim of domestic violence who currently lives with an abusive spouse/family member or has recently fled an abusive home;
- is being released from institutions where they have been residents for more than 30 days and (1) has not secured a subsequent residence and (2) does not have the resources or support networks needed to obtain housing; or
- was homeless prior to current HUD-assisted housing assistance and would be homeless again without that HUD assistance, e.g. HUD-supported permanent supportive housing and Shelter Plus Care certificates reserved for the homeless.

The U.S. Bureau of the Census utilizes a broader definition of homelessness in its decennial count. The Census allows the following persons to be counted as homeless:

- persons living in transient sites such as commercial campgrounds and detoxification centers; and
- persons living in hotels/motels charging less than \$12 per night per room or where greater than 50% of the units are used as housing for the homeless regardless of nightly charge.

The Supportive Housing Program, or "Continuum of Care Program", combines the McKinney Act definition with the Census definition. Thus, under Supportive Housing Program guidelines, a person may be considered homeless if he or she meets any of the above-noted criteria.

Please note that persons meeting the following criteria may **not** be counted as homeless for the purposes of eligibility for or participation in Federal programs such as the Supportive Housing Program:

- persons doubled up with other families;
- persons living in dwelling units without heat;
- persons living in dwelling units without plumbing/running water;
- persons living in illegal dwelling units (unfinished basements and attics, garages, "chop shop" units, etc.); and
- severely overcrowded units, e.g. those with greater than 1.5 persons per room.

OTHER HELPFUL DEFINITIONS AND TERMS

Mental health services are services for persons who have a psychiatric, behavioral or other mental health issue. Services may be required to properly diagnose an existing, but untreated disorder or to ensure the maintenance of treatment. Deviant behavior resulting solely from an alcohol or substance abuse problem should not be considered a mental health issue.

Alcohol and substance abuse treatment services are services for persons who are actively using drugs and/or alcohol and need treatment services, or services for persons who are in recovery and still need or would like support in their efforts to maintain sobriety.

Mentally retarded persons are persons with limited intellectual abilities or developmental problems which prevent them from functioning or reasoning on an adult level.

Persons with **physical disabilities** include persons with mobility limitations or other physical limitations or illnesses which prevent them from being able to work or live completely free of supports or special accommodations.

Victims of **mental or physical abuse** are persons who have fled housing as a result of emotional or physical beatings at the hands of someone other than a spouse, minor child, or parent (if minor child).

Victims of **domestic violence** are persons who have fled housing or might flee housing as a result of emotional or physical abuse at the hands of a spouse, minor child or parent (if minor child).

Vocation rehabilitation services are special job readiness activities and employment workshops designed for persons with disabilities, particularly for those persons who are mentally ill, dually diagnosed or physically disabled.

Emergency shelters include traditional emergency shelters, safe havens and safe houses for victims of domestic violence.

Transitional housing is a bridge for homeless persons between emergency shelter and permanent housing. Often accompanied by supportive services, transitional housing often has a maximum length of stay of 24 months.

Permanent supportive housing is housing for homeless persons with special needs or situations. Without the permanent supportive housing, the residents would likely be in emergency shelter or on the streets.

Youth who: (1) are 18 years of age and younger; (2) reside in facilities supported by the Department of Children and Families or in other shelter situations; and (3) are wards of the State or are otherwise not in the custody of their parents may be counted as a homeless household. (Please note: There is no particular category on the survey for reporting homeless youth; the birth date and age data collected in question 1 are used to sort homeless youth.)

Town where counted: _____

Last known town of permanent residence: _____

**ADVOCATES TO END HOMELESSNESS
2001 Homeless Demographic & Service Needs Survey**

Please complete one form for each client served the period March 12 - 18, 2001, who did not have permanent housing. All information is for statistical and needs documentation purposes only. Responses will be kept strictly confidential.

1. Client Identifier Information. (Information will be used to prevent duplication in count.)

/____/____/____/

Initials: First Middle Last Date of Birth Age Sex Ethnicity*

* Please classify as white (non-hispanic), black (non-hispanic), Latino/Hispanic, Asian/Pacific Islander, American Indian/Alaskan Native, or other.

2. Client has dependent minor children. Yes [] No [] If yes, ages of minor children _____

Client lives with children. Yes [] No []

If no, children live elsewhere in [] permanent housing/in [] temporary housing.

3. Client is a United States veteran. Yes [] No []

4. Please answer the following questions about the above-named client/family. Please check **all** that apply.

Service Needs.

- Client: _____ is in need of mental health services.
_____ is in need of alcohol or substance abuse treatment.
_____ is mentally retarded.
_____ is physically disabled.
_____ has AIDS or HIV.
_____ is victim of mental or physical abuse.
_____ is victim of domestic violence.
_____ is in need of vocational rehabilitation services.

Current Housing.

- Client: _____ lives in emergency shelter.
_____ lives in transitional housing.
_____ lives in permanent supportive housing for the homeless (including Shelter Plus Care for the homeless).
_____ lives in jail.
_____ lives in the street.
_____ lives in a vacant building.
_____ lives in a hospital/treatment facility.
_____ lives in overcrowded housing.
_____ is temporarily "doubled up" with friends/family.
_____ lives in sub-standard housing.

Source of Income.

- Client: _____ works.
_____ receives TFA, or _____ receives SAGA.
_____ receives social security, or _____ SSI disability.
_____ receives unemployment.
_____ has no source of income.
_____ other: _____

Previous Housing.

- Client: _____ was evicted or is being evicted from permanent housing.
_____ has recently been released from a correctional facility.
_____ was recently released from the hospital or a residential program.
_____ lost housing for financial reasons.
_____ other: _____

5. How long has client/family been homeless?
[] Less than three months. [] More than three months.

6. Does client/family have a history of homelessness? [] Yes [] No [] Unknown

COMPLETING THE SURVEY

Purpose. The purpose of the survey is two-fold: (1) to generate an unduplicated count of homeless households during a specified point-in-time; and (2) to generate an assessment of the housing and service needs of the homeless population within a specific city, town or region.

Who Should Complete the Survey. A survey should be completed by or on behalf of each household that is homeless during the specified period of the count. A household is defined as cluster of related persons who would likely be housed together if permanent housing was obtained. For example, a single mother with three minor children is one household. A married couple with no children is one household. A single adult who has no spouse and no children is a household. Please complete only one survey for each household.

How to Complete the Survey. The survey may be completed in one of two ways: (1) staff at agencies serving the homeless who have a fairly stable client base and know the answers to the questions posed by the survey may respond on behalf of their client; (2) staff or trained volunteers can sit down with the client and interview him/her to obtain answers to the questions posed by the survey. It is also possible for high-functioning clients to complete the survey themselves, however this method is not recommended due the high margin for error, incompleteness or inconsistent interpretation of questions.

Instructions for responding to survey questions are as follows:

1. Geographic Information. This information will enable data to be sorted by individual town, by Continuum of Care planning area or by region.

- a. **Town where counted.** Please indicate the name of the town in which the survey was collected in the upper left hand corner.
- b. **Last known town of permanent residence.** Please indicate the name of the last town in which the client lived in permanent housing in the upper right hand corner.

2. Client Identifier Information.

The Client Identifier is a unique series of numbers and letters used to label each survey for the purpose of preventing duplication. For the purposes of this survey, the client is the head of household. Please complete only one survey per household.

The Client Identifier consists of the following letters and numbers:

- a. **Initials.** Use one letter to represent the client's first initial, one letter to represent the client's middle initial, and one letter to represent the client's

last initial. If an initial is not known or if a client does not have an initial, e.g. a client with no middle name, use the number "0" in its place. (Please write the number "0" as shown here to easily distinguish it from the letter "o.")

- b. **Date of Birth.** Use numbers only and present in the following order: "Month Date Year." Please write out all four digits of the birth year.
 - c. **Age.** Use numbers only to represent age at time of survey completion
 - d. **Sex.** Use "M" for males and "F" for females.
 - e. **Ethnicity.** Use the follow codes to identify the ethnicity of the client completing the survey: white, non-hispanic (W); black, non-hispanic (B); Latino/Hispanic (H); Asian/Pacific Islander (A); American Indian/Alaskan Native (AI); or other (O). Please use only one ethnicity designation. (Note: These designations mirror the reporting requirements for HUD-funded programs and allow for compatibility with HUD planning software.)
3. **Family Information.** Please complete to indicate whether or not client has dependent minor children and whether those children are currently staying with the client. Dependent minor children are children under the age of 18 who are under the legal supervision/custody of the parent. Non-custodial parents, for example a parent who has financial responsibility for a child but does not care for that child, and persons who have had their parental rights terminated by the State of Connecticut are not considered to have dependent minor children for the purposes of this survey.
 4. **Veteran Status.** Please indicate is the client or any other adult member of the household is a veteran of any branch of the United States Armed Forces (Army, Navy, Air Force, or Marines.)
 5. **Specific Information about the Client Household's History and Needs.** This section is designed to gather substantive information about how and why the client became homeless and what services are needed to help that client access and maintain permanent or other non-emergency housing.

Four categories of information are collected: service needs; current housing; source of income; and previous housing. With the exception of the previous housing category, check each statement that accurately describes the client.

6. **How Long Has Client Been Homeless?** Please check one response.
7. **Does Client Have a History of Homelessness?** Please check one response.

ADVOCATES TO END HOMELESSNESS

Survey Client Examples

#1

Yolanda H. Peterson is a white woman who has been at the Norwalk Emergency Shelter the last three days. She had been living with her sister, but there wasn't enough room for both her and her son so she left. He was able to stay, but he has to sleep on the couch. She was born 7/17/56, but looks older, possibly because of years of alcohol and substance abuse. She is doing better now, having been clean for 9 months, and is seeing a psychiatrist at Norwalk Hospital, where she receives treatment for depression. Currently unemployed, Yolanda is reapplying for benefits. Yolanda and her son were living with her boyfriend in a hotel room until a few months ago, but they didn't get along once she sobered up. This is the first time she has been in a homeless shelter since 1970.

#2

Claude Jackson is a 45 year old black man, born 8/6/51, who stays at the shelter occasionally, and sometimes stays with his mother who lives in a senior housing residence. Claude has been on methadone for six months and only drinks once in a while. He shared that he had been hospitalized years ago at Fairfield Hills for a few months, but has not needed treatment since. Claude was receiving SSI, but he recently was cut off. He is appealing based on back problems, and is currently receiving general assistance. Claude was living with his wife, but they separated two months ago when the money got tight and she became abusive to him. Claude states that this is the first time he has been homeless.

#3

Juan Valquez is a 20 year old man from Puerto Rico. He states that he was born 2/14/76, and that he came to CT with his older brother five years ago. He and his brother lived in a room in a Wilton house owned by the owner of the restaurant where his brother worked. But that his older brother returned to Puerto Rico six months ago and Juan was eventually told he had to leave the rented room where they resided. Juan is not receiving any benefits, and says he does not have the proper identification to obtain any and says he does not have any money, except for the money he receives for collecting cans and doing odd jobs. He is not residing in the shelter, and will not disclose where he lives, but he says that he is homeless, and he frequents the Drop-In Center and Soup Kitchen regularly. Recently he was taken to the ER after being found injured after an apparent assault and had to be hospitalized for two days. He denies any drug use, but has often been seen in areas where drug sales are rampant and he hangs out with known drug users and dealers.

#4

Anthony S. Parker is a 27 year old white male born 1/17/72 in Norwalk who has been staying in the Shelter in Norwalk for the last two months. He is not eligible for any cash assistance and has no other income source. He needs to find a job soon because he has to pay child support. He has been divorced for two years. His wife was granted sole custody of the three children and he was ordered to pay child support. Within the past two years, Anthony has not been able to hold down a job due to his substance abuse problem. He has subsequently not paid the child support regularly and his wife is now taking him to court. Anthony has stayed with friends, moving from one friend's house to the other. He has never been homeless before.

#5

Theresa Jefferson is a 51 year old black female living in a Shelter Plus Care apartment in Norwalk. She was born on September 25, 1947. She receives a SSI payment of \$500 each month and earns a small income from a part time job. She sees a psychiatrist and a therapist regularly and is compliant with her medication. Two and a half years ago Theresa tested positive for HIV. Recently, her case manager thinks that she may have started drinking again but Theresa is denying it. She has been in this apartment for two years. Prior to that she spent 10 years living on the street.

#6

Carmen E. Cruz is a 32 year old Latino female born 10/5/66. She has four children who have been placed in foster care through DCF. Her case manager has been told by DCF that they have no intention of reuniting Carmen with her children, however Carmen feels strongly that because they are her children that she should have custody. She is currently living in a half-way house in Norwalk and has been there for the past three months while attending a partial hospital program for the dual diagnosed. She is receiving SAGA cash and has an SSI application pending. She was evicted from her apartment for not paying rent. This is the first time that she has ever been homeless.

SAMPLE 2

Town where counted: Norwalk

Last known town of permanent residence: Norwalk

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1. Client Identifier Information. (Information will be used to prevent duplication in count.)

Initials: / C / / O / / J / Date of Birth 08 06 1951 Age 47 Sex M Ethnicity B

* Please classify as white, black (non-hispanic), Latino, Asian, American Indian/Alaskan Native, or other.

- 2. Client has dependent minor children. Yes [] No [X]
Client lives with children. Yes [] No [X] If yes, ages of minor children
If no, do children have permanent housing? Yes [] No []
3. Client is a veteran. Yes [] No [X]
4. Please answer the following questions about the above-named client/family. Please check all that apply.

Service Needs.

- Client: [X] is in need of mental health services.
[X] is in need of alcohol or substance abuse treatment.
is mentally retarded.
is physically disabled.
has AIDS or HIV.
is victim of mental or physical abuse.
[X] is victim of domestic violence.
is in need of vocational rehabilitation services.

Current Housing.

- Client: [X] lives in emergency shelter.
lives in transitional housing.
lives in permanent supportive housing for the homeless (including Shelter Plus Care for the homeless).
lives in jail.
lives in the street.
lives in a vacant building.
lives in a hospital/treatment facility.
lives in overcrowded housing.
[X] is temporarily "doubled up" with friends/family.
lives in sub-standard housing.

Source of Income.

- Client: works.
receives TFA, or [X] receives SAGA.
receives social security, or SSI disability.
receives unemployment.
has no source of income.
other

Previous Housing.

- Client: was evicted from permanent housing.
has recently been released from a correctional facility.
was recently released from the hospital or a residential program.
[X] lost housing for financial reasons.
other:

- 5. How long has client/family been homeless?
[X] Less than three months. [] More than three months.
6. Does family have a history of homelessness? [] Yes [X] No [] Unknown

Town where counted: _____

Last known town of permanent residence _____

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Please complete one form for each client served the week of March 12/18, 2001, who did not have permanent housing. All information is for statistical and needs documentation purposes only. Responses will be kept strictly confidential.

1. Client Identifier Information. (Information will be used to prevent duplication in count.)

_____/_____/_____/_____/_____/_____/_____/_____
Initials: First Middle Last Date of Birth Age Sex Ethnicity*

* Please classify as white, black (non-hispanic), Latino, Asian, American Indian/Alaskan Native, or other.

2. Client has dependent minor children. Yes [] No []
Client lives with children. Yes [] No [] If yes, ages of minor children _____
If no, do children have permanent housing? Yes [] No []

3. Client is a veteran. Yes [] No []

4. Please answer the following questions about the above-named client/family. Please check **all** that apply.

Service Needs.

- Client: _____ is in need of mental health services.
- _____ is in need of alcohol or substance abuse treatment.
- _____ is mentally retarded.
- _____ is physically disabled.
- _____ has AIDS or HIV.
- _____ is victim of mental or physical abuse.
- _____ is victim of domestic violence.
- _____ is in need of vocational rehabilitation services.

Current Housing.

- Client: _____ lives in emergency shelter.
- _____ lives in transitional housing.
- _____ lives in permanent supportive housing for the homeless (including Shelter Plus Care for the homeless).
- _____ lives in jail.
- _____ lives in the street.
- _____ lives in a vacant building.
- _____ lives in a hospital/treatment facility.
- _____ lives in overcrowded housing.
- _____ is temporarily "doubled up" with friends/family.
- _____ lives in sub-standard housing.

Source of Income.

- Client: _____ works.
- _____ receives TFA, or _____ receives SAGA.
- _____ receives social security, or _____ SSI disability.
- _____ receives unemployment.
- _____ has no source of income.
- _____ other _____

Previous Housing.

- Client: _____ was evicted from permanent housing.
- _____ has recently been released from a correctional facility.
- _____ was recently released from the hospital or a residential program.
- _____ lost housing for financial reasons.
- _____ other: _____

5. How long has client/family been homeless?
[] Less than three months. [] More than three months.

6. Does family have a history of homelessness? [] Yes [] No [] Unknown

TIPS FOR CONDUCTING CLIENT INTERVIEWS

1. Introduce yourself to the client, offering your first name and a smile. Explain that you would like to ask him/her some questions to find out what kinds of services he/she needs. Tell him/her that the information he/she shares will be kept confidential and that the information will be used to try and get additional funds for housing and support services for the homeless in your community.
2. If you are interviewing clients with whom you do not normally work, you may want to have an “incentive “ gift, such as a cup of coffee, donut, personal care product, toy for a child to give to the client.
3. Speak in a soft, but clear voice. Speaking loudly may make the client feel as if he/she has no privacy.
4. Try to conduct the interview in a private manner, even if in a public place. For example, sit together in a corner or away from heavy foot traffic. Allow client to sit with his/her back to a room or cluster of people.
5. Prior to beginning to administer the survey, ask the client if he/she has already completed one and if so, where. If you can determine that the client has in fact already shared information with us, thank him/her. There is no need to obtain the information a second time.
6. Use simple questions to obtain information. For example, what is your first name? What is your last name? Do you have a middle name or initial? Try to avoid compound questions or direct orders such as tell me your first, middle and last names. Compound questions may be confusing to the client and prevent you from obtaining accurate information.
7. Use the survey as a guide for all your questions to ensure that your interview is organized, focused and complete.
8. Personalize your questions from time to time to show your client that you care. For example: "John, where are you currently living? In the shelter?" Or, "John, have you been sleeping on the street?"
9. When you have finished the survey, thank your client for his/her time. Shake his/her hand. Let him know how his/her time and cooperation will help the community.