



2023

# *GLENDALE HOMELESS COUNT*



# ACKNOWLEDGEMENTS

This report is the result of a partnership between the City of Glendale Continuum of Care (CoC) Board of Directors, Community Services & Parks Department, and Homeless Service Providers in Glendale. These entities continue to work together to plan, develop and implement the City's Continuum of Care system to provide robust homeless services programming and help house the homeless population in our Community.

The annual homeless count is dependent upon a host of community volunteers, local homeless service providers, community organizations and City staff to successfully and safely conduct the homeless count with accuracy, compassion and dignity.

**Special thanks** to City of Glendale's Information Service Department for developing the Glendale Unsheltered Homeless Count 2023 Survey and providing essential technical support before, during and after the Count.

**Special thanks** to the Glendale Police Department and the outreach teams from Ascencia and Home Again Los Angeles, who were instrumental in planning, leading, and ensuring safety for all involved during the street count.

**Special thanks** to all of the Community Volunteers who participated in the Count: Council Member Daniel Brotman, Parks Commissioner Regina Alcazar, Parks Commission President Stephen Meek, Alfred Hernandez, Alice Hamrajbaian, Alize Plancarte, Anahe Torres, Andrew Vera, Armineh Hacobian, Arsine Isayan, Brad Grote, Bryan Salazar, Carrie Prado, Rev. Cassie McCarty, Chaquitta Boyce, Christopher Pineda, Dan Murphy, Duane Ball, Gerardo Chavez, Jill Welton, Jae Eun Karen Kwak, Jill Welton, Jim Zolnowski, Joylene Wagner, Jose Pimienta, Joylene Wagner, Karen Kwak, Kora Guoyavatin, Laurel Diskin, Laurie Udit, Lerna Amiryans, Marian Smart Getts, Marlin Galvez, Mary O'Keefe, Monika Grabowski, Monique Briones, Natalie Smith, Neda Farid-Farhoumand, Nora Karakashian, Officer Aaron Kim, Officer Daniel Barolet, Officer Jimmy Mercado, Officer Kevin Lee, Officer Mark Newborg, Officer Selene Corrales, Officer Tom Onderdonk, Officer Varooj Karibyan, Pamela Flores, Phil McCollum, Raamella Eraghi, , Regina Dupree, Richmond Amoah, Robert Livraga, Robin Goldsworthy, Sara Lerma, Selina Sarafian, Sergeant Matthew Prokosch, Talar Derbedrosian, Tedy Ayala Castro, Tommie Hodge.

**Special thanks** to the Glendale Continuum of Care Board of Directors for their ongoing leadership and guidance with homeless programs: Chair Melissa Younesian, Barron Hopkins, and Lieutenant Alex Krikorian.

**Special thanks** to the following individuals and organizations for their generous donations of hygiene products, clothing, blankets, food, and COVID-19 personal protective equipment: Dignity Health – Glendale Memorial Hospital and Health Center and Shelter Partnership.

Participating Agencies and City Departments/Sections that Served as Counters: Glendale Memorial Health Center, Adult Recreation Center, Crescenta Valley Weekly, LA Family Housing, Armenian Relief Society, Ascencia, Catholic Charities of Los Angeles, City of Glendale Central Library, City of Glendale Verdugo Jobs Center, Glendale First Methodist/Sunday Lunch Program, Dignity Health, Door of Hope, Glendale Community College, Glendale Police Department, Glendale Unified School District, Glendale Youth Alliance, Home Again Los Angeles, The Salvation Army, and U.S. Department of Housing and Urban Development.







# CONTACTS

---

For additional information regarding this report please contact:

## **City of Glendale**

Community Services and Parks Department  
Human Services Division – Homeless Services  
Arsine Isayan, Homeless Programs Manager  
613 E. Broadway Room 120  
Glendale, CA 91206  
Main: 818-548-2000

## **THIS REPORT WAS PREPARED BY:**

---

**Richmond Amoah**, HMIS Administrative Associate  
Office: +1 (818) 550-4405  
[ramoah@glendaleca.gov](mailto:ramoah@glendaleca.gov)

# TABLE OF CONTENT



## 01

### Introduction

When Was the Count Conducted?  
Who was Counted?  
Who was not Counted?  
Data Limitations  
Visions and Values of Glendale  
Continuum of Care  
Local Landscape Context

## 02

### Data Methodology

Unsheltered Count  
Sheltered Count

## 03

### 2023 Homeless Count Highlights

2023 Sheltered VS Unsheltered  
Subpopulation Characteristics

## 04

### Executive Summary

Unsheltered Count & Sheltered  
Homeless Household Composition  
Race & Ethnicity  
Age & Gender Demographics

## 05

### Homeless Survey Findings

Glendale Unsheltered Homeless  
Hotspots  
Prevalence of Chronic Homelessness  
Special Subpopulations  
Understanding the Causes and  
Experiences of Homelessness Among  
Glendale Residents

## 06

### Recommendations

Next Steps

## 07

### Conclusion

Summary  
Appendix A: Definitions

# 01 Introduction

Every year City of Glendale conducts the annual Point-in-Time (PIT) homeless count of all sheltered and unsheltered populations experiencing homelessness. The purpose of the homeless count is to collect accurate data to help decision makers understand trends, measure progress, and meet needs in the Glendale community. Glendale's homeless count is part of a nationwide effort to provide a "snapshot" of homelessness on a single day each year. The U.S. Department of Housing and Urban Development (HUD) requires local jurisdictions to conduct the point-in-time homeless count every other year (usually during the last 10 days of January) to receive Continuum of Care (CoC) funding for homeless programs. As one of more than 400 jurisdictions that submit an annual application to HUD for CoC funding, City of Glendale has opted to conduct the "point in time" homeless count each year.

## WHO WAS COUNTED?

Per HUD's instructions, a person was considered homeless (and therefore counted) only when the person fell within the HUD-based definition by residing in one of the places described below:

- In places not meant for human habitation, such as cars, tents, parks, sidewalks, and abandoned buildings;
- In emergency shelters; or
- In transitional housing for homeless persons.

## WHEN WAS THE COUNT CONDUCTED?

This year's count was conducted on January 26, 2023. The unsheltered count was conducted "on the streets" from 5:30 a.m. to 9 a.m. and from 7 p.m. to 11 p.m., as well as on-site at various drop-in centers and homeless service organizations during regular hours of operation. The sheltered count was conducted on the same day at shelters and transitional housing programs throughout the City to count persons who slept in these programs on the night of January 26, 2023.

## WHO WAS NOT COUNTED?

Per HUD's instructions, a person was not considered homeless (and therefore not counted) if the person resided in one of the following places noted below:

- Medical facilities, such as hospitals, psychiatric facilities, and nursing homes;
- Jails, prisons or juvenile detention facilities;
- Chemical dependency facilities, such as substance abuse treatment facilities and detox centers;
- Foster care homes or foster care group homes.

## Data Limitations

The results of the PIT count has several limitations that should be considered when interpreting the data. One of the main limitations of the PIT count is its time constraints. Conducted on a single night in January, the PIT count may not be representative of homelessness throughout the year, and the data collected may not capture changes in homelessness over time. Another limitation of the PIT count is its potential for undercounting. The count relies on a visual count and interviews of individuals experiencing homelessness and may miss those who are hidden or sleeping in less visible places, leading to an undercount of the homeless population. Annual data is collected through the our Homeless Management Information System (HMIS) database and captures the movement of people in and out of homelessness over time. While this analysis offers context for understanding Homeless Count results and trends across time, any conclusions about the city's efforts to address homelessness solely based on these results alone are limited.



# VISION AND VALUES

## OF THE GLENDALE CONTINUUM OF CARE (COC)

The Glendale Homeless Continuum of Care (CoC) is one of the thirteen CoCs officially recognized by the U.S. Department of Housing and Urban Development (HUD) for our participation in local and regional efforts to prevent and end homelessness in Southern California. We understand the diversity of individuals and families who are homeless and their unique problems and needs require highly complex services systems. For this reason, the Glendale CoC has established a Coordinated Entry System (CES) to streamline homeless services and quick re-housing of the homeless population.

CoC has also established a CoC Board and CoC Committee that involve various groups and organizations as part of the planning process for homeless programs and services. These groups consist of local non-profit organizations (including faith-based), housing authority, local law enforcement, mental health agencies, school systems, hospitals and persons who were formerly homeless. These groups have been successful in developing strategies and putting programs in place to fill gaps in the Glendale CoC that will successfully move homeless persons through the different points in the Continuum and onto self-sufficiency.



# VISION

---

The Glendale CoC envisions a community that is effectively responding to chronic homelessness by coordinating community resources to:

1. Prevent homelessness
2. Provide housing and related support to the currently homeless
3. Prevent recidivism

## OUR VALUES

---

The Glendale CoC shares these values in our mission to end chronic homelessness:

- Providing housing opportunities for homeless persons;
- Advocating for those unable or unwilling to self-advocate;
- Engaging the participation of homeless persons;
- Asserting and maintaining the dignity of all involved;
- Preserving accountability at all levels, promoting the rights and responsibilities of all stakeholders;
- Creating a balance between service delivery and community enforcement;
- Employing community collaboration and coordination;
- Applying knowledge-based planning and decision-making;
- Assuring responsible management of resources; and
- Developing self-sufficiency and self-determination among homeless persons.





## Homeless Response System

The PIT Count provides a critical snapshot of people experiencing homelessness in our community and is useful for measuring trends over time. While the PIT is critical, it does not take into account the changes, investments, and innovations happening locally.

The local context that has impacted the findings of the 2023 PIT Count and the changes we have seen since the last count in 2022.

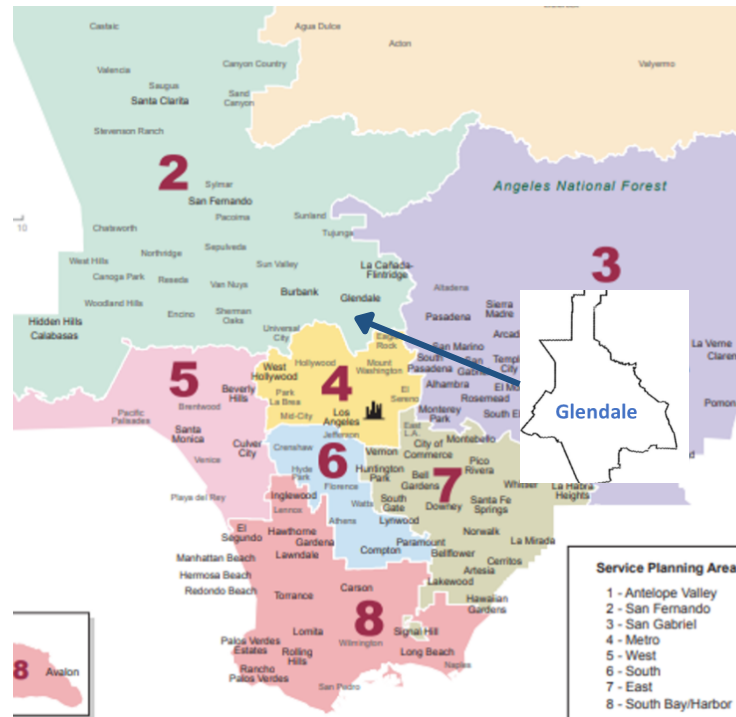
Glendale's homeless response system is a multifaceted approach that involves several key players including local Glendale Police department, non-profit organizations, and community volunteers. The system aims to address the complex issue of homelessness by providing a comprehensive range of services such as emergency shelter, outreach and engagement, case management, mental health and substance abuse treatment, job training, and permanent supportive housing.

One of the strengths of Glendale's homeless response system is its emphasis on collaboration and partnership among stakeholders. The City of Glendale works closely with non-profit organizations, faith-based groups, and community volunteers to coordinate services and leverage resources. This collaborative approach allows for a more effective response to the needs of the homeless population in the city.

Another key aspect of Glendale's homeless response system is its focus on providing permanent supportive housing. The system recognizes that homelessness is not just a lack of shelter, but a result of a range of issues such as mental illness, substance abuse, and poverty. Permanent supportive housing provides stable, long-term housing coupled with support services to address these underlying issues, which can help individuals transition out of homelessness and maintain their housing.

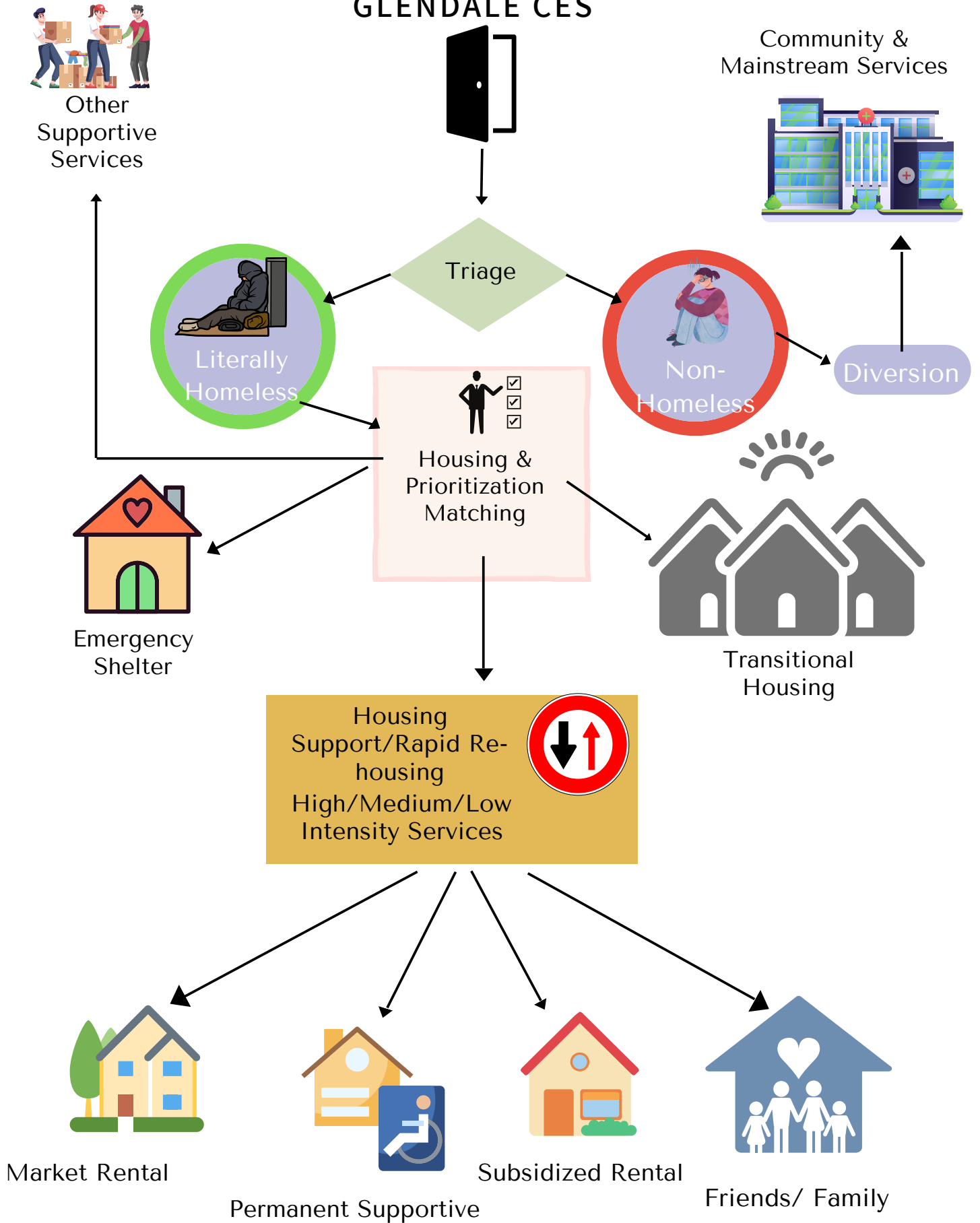
However, despite these strengths, there are also challenges in Glendale's homeless response system. One of the biggest challenges is the lack of affordable housing in the city, which can make it difficult for homeless individuals to access stable housing even with support services. Additionally, there is a shortage of mental health and substance abuse treatment resources, which can limit the effectiveness of the system in addressing these issues. Also, the lack of available Glendale CoC designated Shelter beds makes it difficult to place recently homeless Glendale residents into a dignified temporary place.

Overall, Glendale's homeless response system is a complex and evolving system that requires ongoing collaboration and adaptation to address the multifaceted issue of homelessness in the city. While there are challenges, the system has made significant strides in providing services and support to the homeless population, with a focus on permanent housing and partnership with community stakeholders.



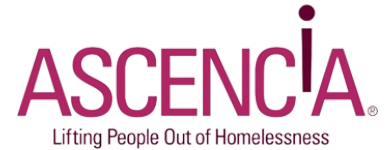


# GLENDALE CES



### **Lead Agency for Individuals: Ascencia**

Ascencia is the Glendale Coordinated Entry System (CES) lead agency for unaccompanied adults experiencing homelessness and is responsible for implementing the centralized intake and assessment system for the CoC providing first level screening, service matching, and makes final admissions decisions.



### **Lead Agency for Families with Children: Home Again Los Angeles**

Home Again Los Angeles currently serves as the lead agency for families with children experiencing homelessness and is responsible for implementing the centralized intake and assessment system for the CoC by providing first-level screening, service matching, and makes final admissions decisions.



### **Lead Agency for Domestic Violence (DV): YWCA of Glendale and Pasadena**

YWCA of Glendale and Pasadena currently serves as the Glendale CES lead agency for families or persons fleeing domestic violence, dating violence, sexual assault, and stalking, and is responsible for implementing the centralized intake and assessment system for the CoC providing first-level screening, service matching, and makes final admissions decisions.



### **Other Agencies**

All CoC Partners must utilize the Coordinated Entry System (CES) established by the CoC, unless the sub-recipient is a victim service provider. Victim service providers work directly with the YWCA of Glendale and Pasadena, the City's lead organization for DV programming. Ascencia (individuals) and Home Again Los Angeles (families with children) continuously stay in close communication with DV providers to ensure up-to-date information on housing stock, inventory, and program eligibility requirements on all programs serving homeless populations in the Glendale area are available so that clients can be placed into permanent housing as quickly as possible.

The CES Lead Agencies work with local hospitals to facilitate discharge planning for homeless patients so they do not return to the streets, prioritize frequent hospital users for placement in permanent supportive housing, and support post-discharge compliance. Providers accompany clients deemed in need of more intensive support to appointments to ensure they are properly connected to the appropriate resources they need.

The Glendale CES uses the coordinated process to match persons and households experiencing homelessness to appropriate housing resources and services in Glendale. The Glendale CES maintains a centralized list of persons and households – prioritized in accordance with the criteria established by the CES Prioritization Policy – from which participants are matched to available housing opportunities and services. All permanent supportive housing, rapid re-housing and youth-specific transitional housing vacancies are filled exclusively through the Glendale CES matching process. The Glendale CoC and all CES participating agencies comply with the equal access and nondiscrimination provisions of federal civil rights laws. A CES housing resource provider may only decline a match for permanent supportive housing, rapid re-housing, or youth-specific transitional housing if the individual or household does not meet standard program eligibility requirements.

Eligibility criteria must be documented and made available to the CES Lead Agency administrator.

# 1. 2023 Emergency Shelter Programs

Glendale CoC's Emergency shelters include the following:

## Ascencia's Emergency Housing Program

This year-round, 45-bed shelter located in Glendale provides individuals and families with children experiencing homelessness with residential services, daily meals, showers, case management, and various supportive services to transition into permanent or transitional housing destinations. Glendale CoC funding source for this ES program: Emergency Solutions Grant (ESG).

## YWCA of Glendale and Pasadena's Sunrise Village Emergency Shelter

This year-round, 16-bed domestic violence (DV) shelter at an undisclosed location provides a temporary community living environment for women and children whose safety is at immediate risk. Program services include case management, crisis intervention and counseling to assist participants with overcoming trauma and moving into permanent or transitional housing destinations. Glendale CoC funding source for this ES program: ESG.

## Glendale Youth Alliance Hotel/Motel Program (Temporary Emergency Shelter)

The Homeless Housing, Assistance, and Prevention (HHAP) funded Youth hotel/motel program in Glendale is designed to provide temporary shelter and support services to homeless youth in the city. The program provides motel vouchers to eligible youth who are experiencing homelessness, giving them access to safe and stable housing for up to 14 days. During their stay, youth are provided with case management services to address their immediate needs, as well as assistance in finding more permanent housing options. The program also offers a range of supportive services, including mental health counseling, substance abuse treatment, and employment and educational support, to help youth achieve long-term stability and success.

The goal of the program is to provide a safe and supportive environment for homeless youth, while also connecting them with the resources



## City of Glendale's Hotel/Motel Program (Temporary Emergency Shelter)

When emergency shelters are at maximum capacity, this ES program temporarily places individuals and families experiencing homelessness in hotels/motels until a shelter bed becomes available. For example, hotel/motel vouchers have helped to provide immediate safety for women and children fleeing DV while they wait for an opening at the YWCA's shelter.

Hotel/Motel vouchers have also proven to be an important "steppingstone" on the path to building rapport and trust between homeless service providers and unsheltered populations who have been resistant to services. Glendale CoC funding source for this ES program: City of Glendale's local Measure S Fund.

# 2. 2023 Transitional Housing Programs

Sheltered count data was collected on persons staying at the following two Transitional Housing (TH) programs that provide long-term housing and comprehensive services designed for the whole person and the whole family to permanently break the cycle of homelessness for this generation and the next.

## The Salvation Army's Booth Home Senior Bridge Housing

The Booth Home Senior Bridge Housing program is an interim program funded by LA County Department of Mental Health located in the City of Glendale. The program serves individuals, particularly older adults 55+. The goal of the program is to safely house older adults, and assist them with their transition into permanent housing.





## Door of Hope's Transitional Housing Program

Families with children (single mothers or fathers, two-parent families, and domestic violence survivors with their children) can live at an undisclosed location for up to two years. Door of Hope helps the families overcome the practical, emotional, and financial challenges they face and transition into permanent housing.



While both TH programs mentioned above are funded by sources outside the Glendale CoC, their vision is aligned with the Glendale CES and its goal of ending homelessness for those in the City of Glendale.

### 3. 2023 Rapid Rehousing Programs

Housing Inventory Count (HIC) data was collected from the Glendale CoC's Rapid Rehousing (RRH) programs, which are designed to quickly and safely house people experiencing homelessness in Glendale. Subpopulations served by the Glendale CoC's RRH programs include: Adults, Families, Transitional Age Youth (TAY) ranging from age 16 up to 25, and Survivors of domestic violence, dating violence, sexual assault, or stalking. RRH programs provide housing relocation and stabilization services ranging from short-term (3 month) to medium-term (12-24 months) rental assistance, as well as intensive housing search, mediation services, case management and a variety of supportive services to assist households with overcoming barriers to becoming autonomous so they can transition into permanent housing destinations.

**Glendale CoC partners providing RRH programs include:** Adventist Health Glendale Foundation, Armenian Relief Society, and Home Again LA (formerly known as Family Promise of the Verdugos).



Glendale CoC funding sources for RRH programs include: California Emergency Solutions and Housing (CESH), Emergency Solutions Grant CARES Act (ESG-CV), Homeless Housing, Assistance and Prevention (HHAP), and Los Angeles County Measure H funds .

### 4. 2023 Permanent Supportive Housing Programs

Housing Inventory Count (HIC) data was collected from the Glendale CoC's Permanent Supportive Housing (PSH) programs, which are a proven solution for the most vulnerable chronically homeless people. PSH programs end a person's homelessness by pairing housing with case management and voluntary supportive services. Connecting people to PSH places people experiencing homelessness in a better position to address additional challenges that may have contributed to their homelessness, such as obtaining employment or addressing substance use issues. The Glendale CoC ensure that the homeless individuals and families with the most severe service needs in Glendale are prioritized in PSH, which will also increase progress towards ending chronic homelessness in our community.

**Glendale CoC partners operating PSH programs include:** Ascencia (four PSH programs) and The Salvation Army (one PSH program). The CoC also operates its own CoC Rental Assistance Program.

**Glendale CoC funding source for PSH programs:** Continuum of Care (CoC) Grant.

## **Ascencia's PSH Programs:**

Ascencia provides formerly chronically homeless families and individuals with subsidized housing as well as supportive services through case management. Program participants and their case managers collaborate on developing a financial management plan, obtaining employment, and successfully maintaining their housing. On an annual basis, Ascencia operates the Next Step PSH program (8 individuals), Housing Now PSH Program (14 individuals) and the Scattered Site PSH Program (12 households) as well as leveraging City of Glendale's CoC Rental Assistance Housing Program which provides housing subsidy for up to 45 households.

Ascencia operates its own supportive housing programs and also refers clients to other providers. There is no time limit for the PSH programs offered by Ascencia, but clients frequently move out as their financial situations improve.



## **The Salvation Army's Chester Street PSH Program:**

This program provides assistance to four (4) families with children where at least one adult is disabled due to substance use. The project consists of four (4) two-bedroom apartments serving four (4) families with children. The Salvation Army staff members provide supportive services including but not limited to: ongoing case management and assessments; life skills classes; substance use counseling and support groups; employment and education assistance; mental health assessments and care as needed; and childcare for children/youth. As part of case management, participants are required to save at least 30% of their monthly income in an individual savings account.



## **5. 2023 Affordable Housing Programs**

Housing Inventory Count data was collected on participants in four affordable housing programs:

### **New Directions for Veterans (Veterans Village)**

This program provides formerly homeless veterans with a safe place to stay while they are securing permanent housing units. The priority in this program is permanent housing. In the interim, participants may take advantage of comprehensive supportive services offered such as case management, mental health services, substance use support groups, workforce development, and free legal assistance.

### **Glen Grove Apartments**

This 24-unit family building in Glendale serves low and very-low income families, some of whom are formerly homeless.

### **Gardena Avenue Apartments**

This 9-unit project consists of five one-bedroom and four two-bedroom units that serve as a residential affordable housing building for formerly homeless families.

### **Emergency Housing Voucher (EHV) Program**

This new housing voucher program funded by the American Rescue Plan (ARP) provides 225 housing vouchers through the Glendale Housing Authority (GHA) to assist people who are experiencing or at risk of homelessness; are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking; or were recently homeless. Implementation of EHV's must be done in partnership with the Glendale CoC and Victim Services Providers.

## Regional Impact

The City of Glendale has expanded its Homeless Services direct assistance budget and expedited housing placements through the CES system. However, across the region, there continues to be a drastic increase in homeless populations. This is due in part to the influx of unsheltered community members from neighboring regions.

**Of the 1,673 people served in Glendale CoC, 831 (50%) accessed services in at least one other CoC in between 1/1/2022 - 12/31/2022**



CA-600 Los Angeles City & County CoC	809
CA-606 Long Beach CoC	17
CA-607 Pasadena CoC	12
CA-602 Santa Ana, Anaheim/Orange County CoC	12
CA-601 San Diego City & County CoC	7
CA-608 Riverside City & County CoC	5
CA-604 Bakersfield/Kern County CoC	4
CA-503 Sacramento City & County CoC	4
CA-609 San Bernardino City & County CoC	3
CA-614 San Luis Obispo County CoC	2
CA-603 Santa Maria/Santa Barbara County CoC	2

**Of the 1,673 people served in Glendale CoC, 809 people (or 48%) were also served in CA-600 Los Angeles City & County CoC**

The Glendale Continuum of Care (CoC) has made significant strides in addressing homelessness in the area through the successful leasing up of Emergency Housing Vouchers (EHV). In 2021, the CoC was allocated 225 EHV's, a critical resource in the fight against homelessness. As of the latest update, 209 vouchers have been issued to homeless participants in need, and 158 of those vouchers have been successfully leased up, providing much-needed shelter and stability for formerly homeless individuals and families.

The success of the EHV program in Glendale is a testament to the hard work and dedication of local organizations and service providers, who have worked tirelessly to identify and connect eligible participants with the program. By leveraging partnerships with property owners and managers, the CoC has been able to secure affordable housing units for program participants, helping to ensure long-term success and stability.

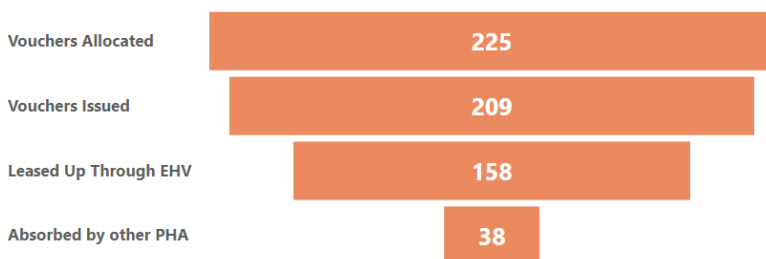
While there have been challenges along the way, including a rental market with high costs and limited availability, the Glendale CoC has been able to overcome these obstacles through creative problem-solving and collaboration. Moreover, the program's success has been recognized by other jurisdictions and housing authorities, with 38 vouchers being absorbed by outside agencies.

Overall, the Glendale CoC's successful leasing up of EHV's has made a significant impact on the local homeless population, providing crucial resources to help individuals and families transition out of homelessness and into stable housing. The program's continued success is a testament to the importance of collaborative efforts and innovative solutions in the fight against homelessness.

Glendale Emergency Housing Vouchers (EHV) Progress

Available Glendale EHV Vouchers

### Emergency Housing Voucher EHV





### Unsheltered Count

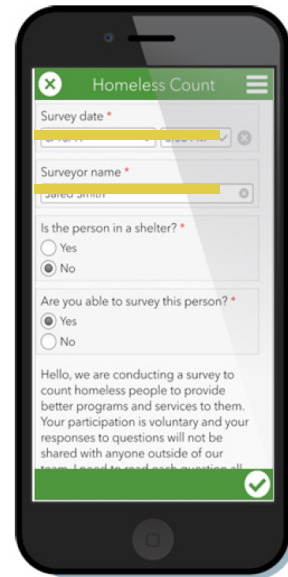
The Homeless count data is used to determine the special needs of the homeless population and subpopulation; and to substantiate the City's need for funding. The unduplicated count is meant to be confidential, and the information collected is used only to perform a count of currently homeless persons in the City of Glendale.

The homeless count utilized both interview surveys and HMIS to collect and analyze demographic information on individuals and families experiencing homelessness. The population for the homeless unsheltered count was determined by identifying geographic areas with high levels of homelessness in Glendale. A team of surveyors deployed to these areas under auspices of Glendale Police officers to conduct the interviews with the unhoused population.

**Survey Instrument:** An interview survey instrument was developed using ESRI's ArcGIS software application, Survey 123, to collect demographic information required by HUD on the unsheltered homeless population, including age, gender, race, and ethnicity. The survey also included questions about housing status, length of time homeless, and other factors contributing to homelessness. The survey instrument was designed to be culturally sensitive and to minimize any potential bias or stigmatization.

**Recruitment and Training:** Volunteers from community, partnering agencies, City officials and City Staff were trained on how to conduct the interviews in a sensitive and non-judgmental manner. The surveyors received training on how to use the survey instrument and how to collect accurate data. Surveyors were trained on how to do the head-count for unhoused persons who refused to answer any questions. Surveyors that encountered non-respondents were required to data entry of unhoused individual on the application, using "XX" / Don't Know Refused as the non-respondent's initials, enter all other data fields as "Don't know/Refused", and enter unique description of the individual. Additionally, the surveyors were instructed to offer gift bags to all unhoused persons, regardless of whether they participated in the interview based survey and offer homeless services social services cards to individuals who may be in need of housing or other services.

**Data Collection:** The surveyors conducted interviews with individuals experiencing homelessness in identified areas throughout Glendale. The interviews were conducted in various locations, including libraries, day-shelters, soup kitchens, and other service providers. Each client was given the opportunity to refuse to participate in the survey



**Data Entry and Analysis:** The data collected from the interview surveys and HMIS were entered into a database and analyzed using statistical software. The data was disaggregated by demographic characteristics, housing status, length of time homeless, and other factors contributing to homelessness. Through unique identifiers created by key demographic questions, and unique description data points any flagged duplicative surveys were removed.

HMIS is used to extrapolate and analyze missing demographic information on individuals who did not complete the interview survey. Utilizing Glendale PD Street Outreach Project on HMIS, we extrapolate missing PIT (Point-In-Time) demographic information through regression analysis. Regression analysis is a statistical method used to identify the relationship between two or more variables. In this case, the city used regression analysis to identify any correlations between the demographic information that was collected ( such as age, gender, race, etc.) and other variables such as location on HMIS. Once these correlations have been identified, the city uses them to estimate the missing demographic information for individuals encountered during the street count.

## Sheltered Count

As required by HUD, the sheltered count included the number of persons and households sleeping in emergency shelters and transitional housing programs. In addition, any persons staying in hotels or motels paid for by a third party such as the Glendale CoC and other social service providers throughout the community.

HUD encourages the use of the Homeless Management Information Systems (HMIS) data to generate sheltered counts and subpopulation data for programs with 100% of beds participating in HMIS. Thus, HMIS was used to gather the total number of occupied beds and the number of persons for each subpopulation. A “Data Collection Instrument” was used to collect the total number of occupied beds and the number of persons for each subpopulation for non-participating HMIS programs such as Victim Service Providers.

Sheltered count include only persons staying in the following programs: Transitional Housing Emergency Shelter Hotel Programs (paid for by third party. i.e. social services agencies)



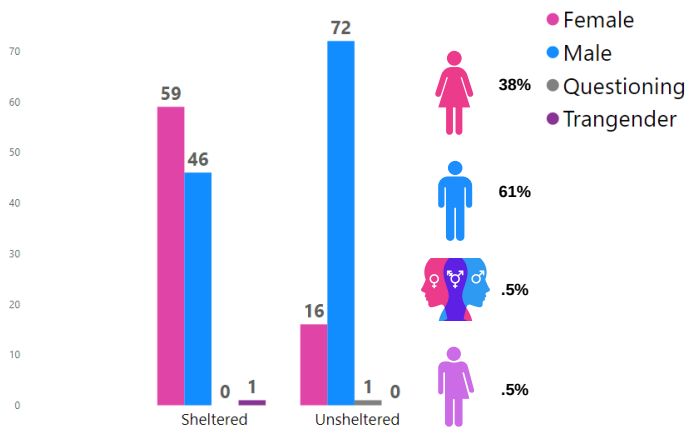
# 2023 Homeless Count Highlights



## 2023 Sheltered VS Unsheltered

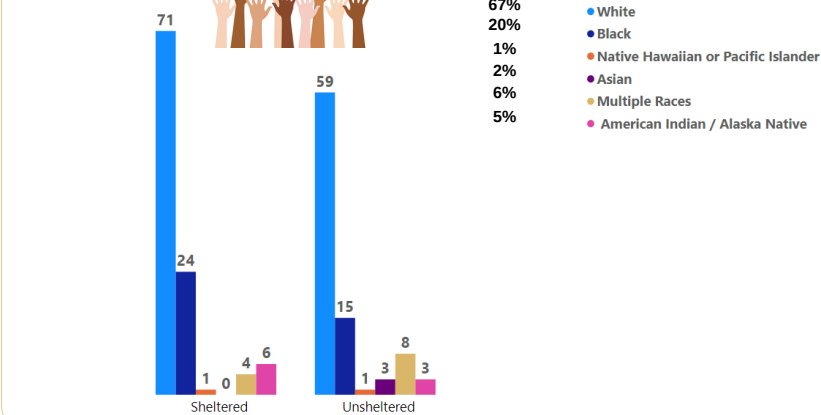


Population By Gender



Males more likely to be unsheltered--81% were unsheltered

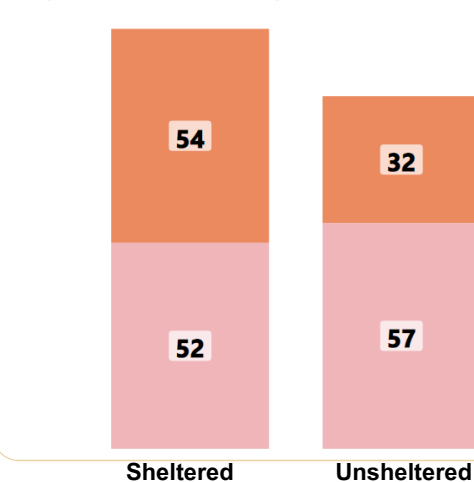
Population By Race



2 of of the 89 unsheltered persons surveyed were Armenian Males.

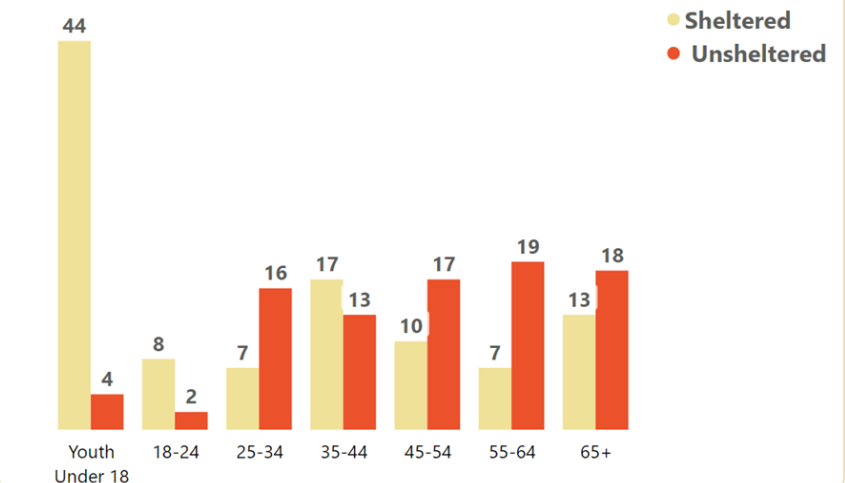
Population By Ethnicity

Hispanic/Latin(a)(o)(x) Non-Hispanic



86 out of 195 (44%) persons identified as Hispanic/Latin(a)(o)(x)

Population By Age



42% of unsheltered persons were age 55+

# Subpopulation Characteristics

## Veteran Status



Only 6 out of 195 persons surveyed (3%) were reportedly veterans. **All six were unsheltered**

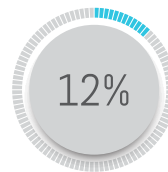
## Survivors of Domestic Violence

Comprised of both Adults and Children



60 out of 195 persons surveyed (31%) were reportedly fleeing DV survivors. Of the 60, **56 (93%) were sheltered and 4 (7%) were unsheltered**

## Chronically Homeless Persons



24 out of 195 (12%) Persons responded to being homeless for at least 12 months with a disabling condition

## Additional Homeless Populations & Self-Reported Health Conditions (Sheltered & Unsheltered N = 195)



**30 (15%)**  
Physical Disability



**30 (15%)**  
Severe Mental Illness



**20 (10%)**  
Chronic Health Condition



**13 (7%)**  
Developmental Disability



**3 (2%)**  
HIV/AIDS



**99 (51%)**  
Not applicable / Did not respond to Survey question

## Out of 89 Unsheltered Persons surveyed

### Unsheltered Sleeping Location



71% Outdoors



17% Outdoors



Abandoned Building  
1%



Bus / Train 2%



Nearby YMCA 1%



Tent 1%



Nearby Library 1%



Unknown 4%



Nearby Church 1%

### Unsheltered Became First time homeless During the Past ≤ 12 months

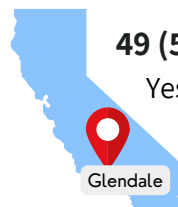


**34 (38%)**  
Yes

**43 (48%)**  
No

**12 (13%)**  
Refused

### Number of Unsheltered Respondents who became homeless in Glendale



**49 (55%)**  
Yes

**24 (27%)**  
No

**17 (18%)**  
Refused

### Unsheltered Time in the Community



**25%**  
>1YR

**19%**  
1-5YRS

**7%**  
6-10YRS

**25%**  
>10YRS

**6%**  
ENTIRE LIFE

**19%**  
DID NOT RESPOND



# Unsheltered Subpopulation Characteristics

## Criminal Justice System Involvement in the Past Year

**9 (10%)** Yes | **64 (72%)** No | **16 (18%)** Refused

**9 out of 89 (10%)**  
Unsheltered persons were released from Jail or Prison in the past 12 months



## Social security / Benefits

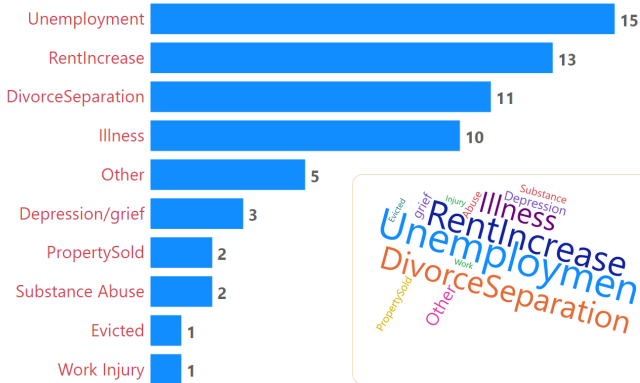
**22 (25%)** Yes | **46 (52%)** No | **21 (24%)** Refused

**22 out of 89 (25%)**  
Unsheltered persons receive disability benefits such as Social Security Income, Social Security Disability Income, or Veterans Disability Benefits



## Unsheltered Survey

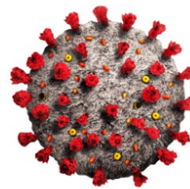
Why Did You Become Homeless?

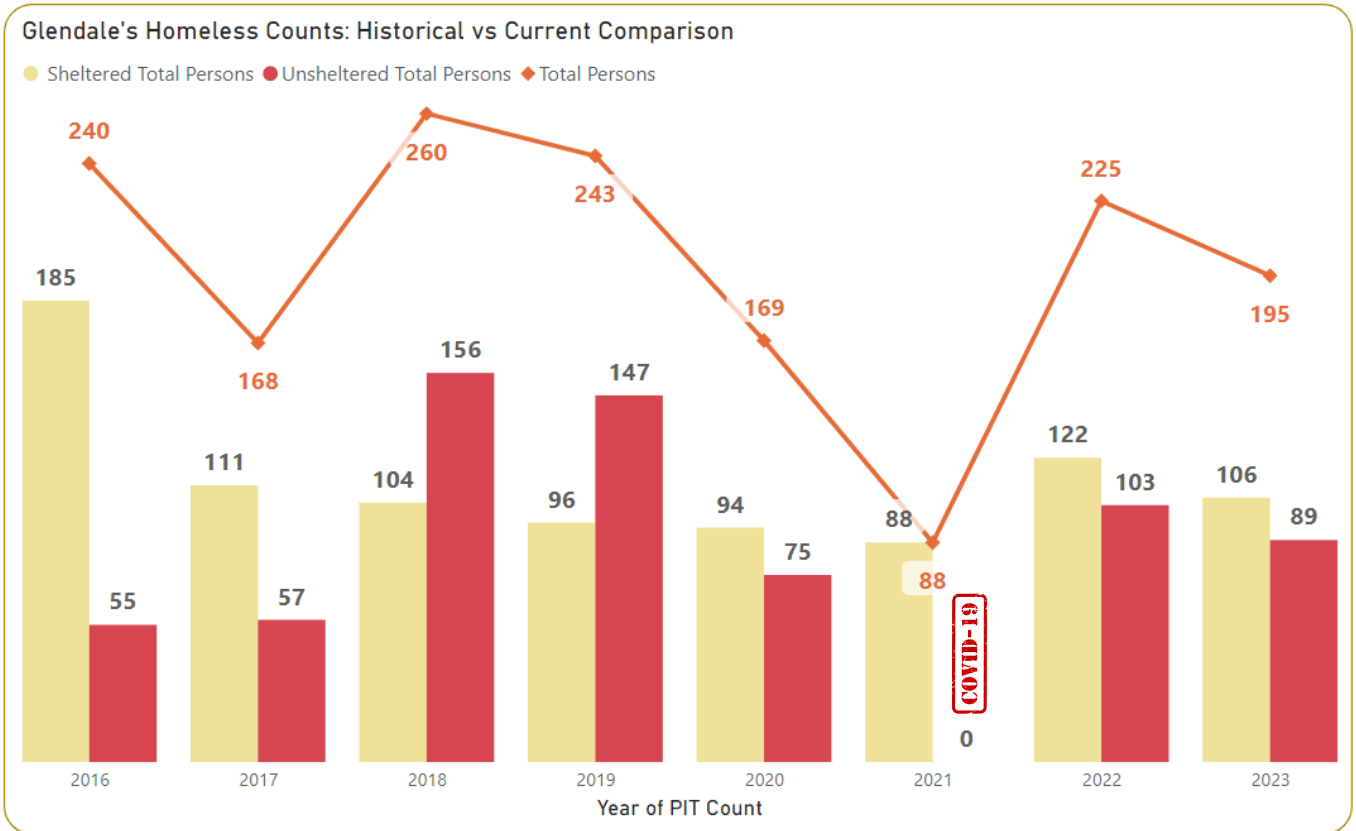


## Income Loss due to COVID-19

**16 out of 89 (18%)**  
Unsheltered persons experienced a reduction or loss of income caused by the COVID-19 pandemic

**16 (19%)** Yes | **52 (60%)** No | **21 (21%)** Did not Respond / Not Applicable

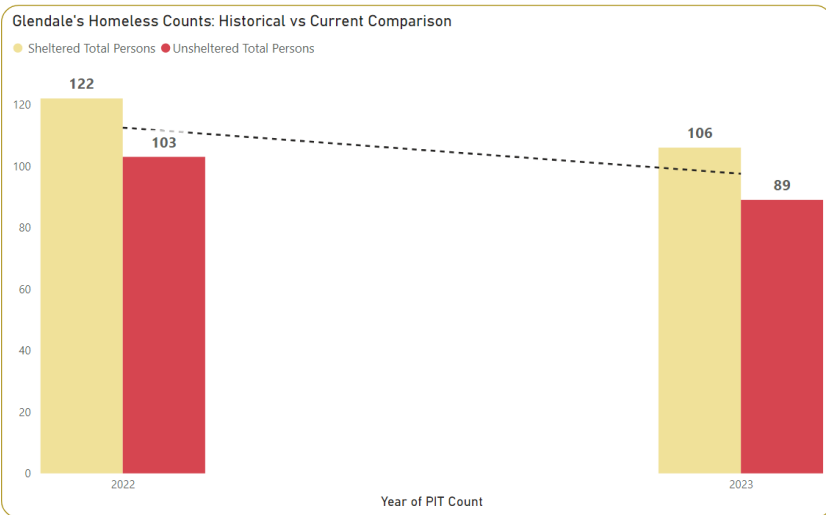




On January 26, 2023, 195 persons were homeless (sheltered and unsheltered) according to the Glendale 2023 Homeless Count and Survey Final Report. In 2021, an unsheltered homeless count was not conducted due to the COVID-19 pandemic. The latest full homeless count and subpopulation survey was completed in 2022 during which 225 persons were counted as homeless (sheltered and unsheltered). A comparison reveals that 30 less persons were counted in 2023 than in 2022, which represents a 13% decrease.

<p><b>SHELTERED</b></p> <p><b>106</b></p>	<p><b>UNSHelterED</b></p> <p><b>89</b></p>
---	--

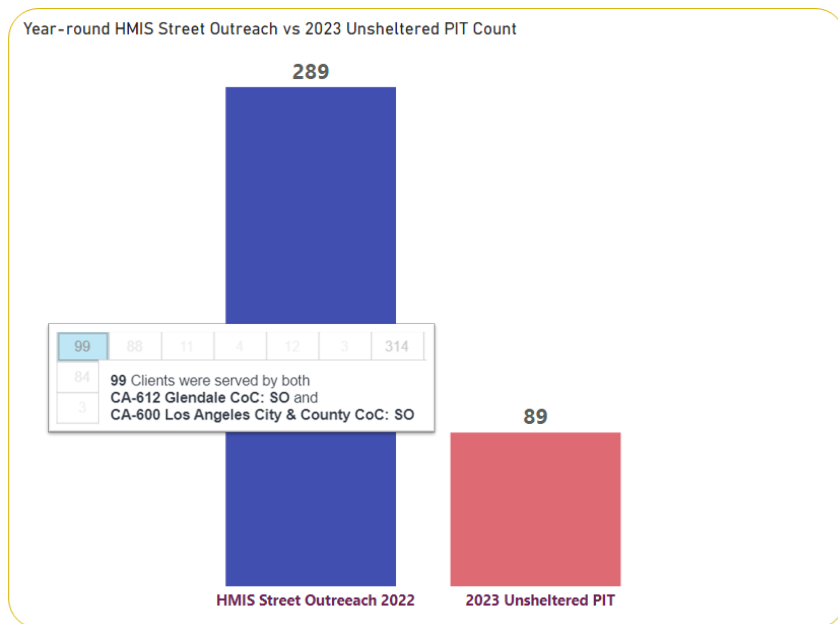
# Unsheltered and Sheltered



Of the 195 total persons counted as homeless in 2023, 89 (46% of 195) counted were unsheltered persons, and 106 (54% of 106) counted were sheltered persons.



Of 289 in that reported in Glendale Street Outreach Project, approximately 99 persons accessed services in both CA-612 Glendale CoC Street Outreach (SO) Projects and CA-600 Los Angeles City & County CoC Street Outreach (SO) projects



The analysis of the Glendale Homeless Count and Survey Final Report indicates that there was a significant decrease in the number of unsheltered homeless individuals from 2022 to 2023, with a 14% reduction in the unsheltered count. Similarly, the sheltered count in 2023 also showed a decrease of 13% from the previous year. These findings suggest that efforts to address homelessness in Glendale, such as increased access to Emergency Housing Vouchers, Interim housing and supportive housing, may be having a positive impact on reducing the number of homeless individuals in the community.

However, it is noteworthy that Glendale Police Department Street Outreach project reported a much higher number of individuals experiencing unsheltered homelessness at 289 in our year-round Homeless Management Information System (HMIS). All street outreach contacts and housing placements are documented in HMIS as an active or by-name list. Outreach workers have access to data systems to be able to input data, look up previous contacts with the person experiencing homelessness, and access information on available resources.

\*Please note, for this year's PIT count, Glendale Community College & Catholic Charities did not participate in the PIT count. Catholic of Charities' facility was shutdown due to COVID outbreak protocols so they were unable to participate in the PIT enumeration.

• Data sources : 2023 PIT Count & Glendale HMIS Database

This suggests that while the unsheltered PIT count provides an important snapshot of the homeless population on a given night, it may not capture the full extent of homelessness in the Glendale. The large number of individuals experiencing homelessness identified through the year round Street Outreach project highlights the ongoing need for resources and support to address the issue.

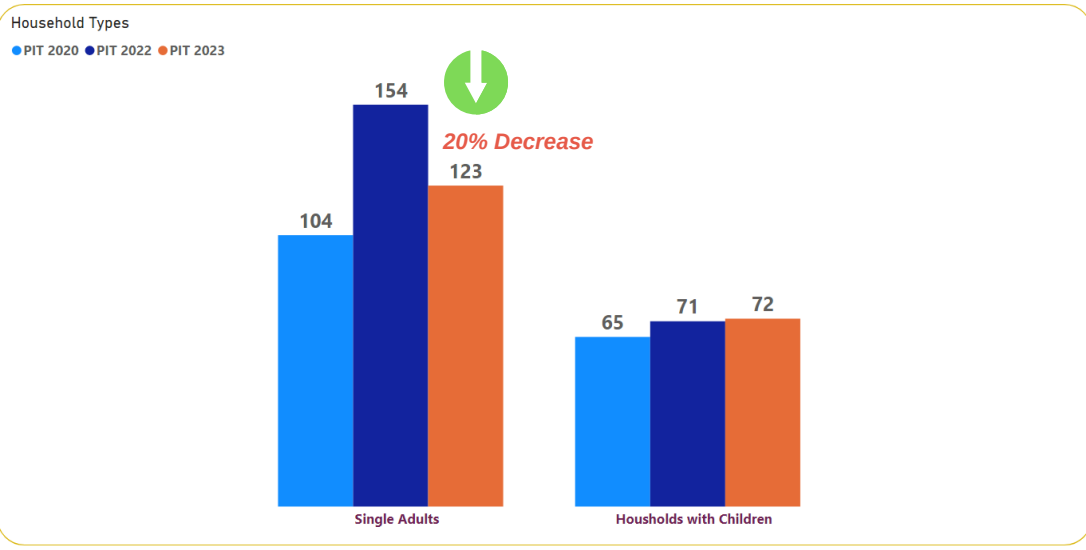
It is pertinent to note that Glendale's Street Outreach project and the community in general experience an influx of unhoused persons that migrate from City of Los Angeles to our jurisdiction, thereby increasing our homeless numbers year-round. The primary mission of the social work profession is to enhance human well-being and to help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty regardless of administrative borders so we help everyone based on severity of need and availability of resources. Nevertheless, Glendale is a smaller CoC with limited financial resources and thus can not adequately funded to handle the surge of persons that relocate to access quicker services

It is our hope that our Continuum of Care will be funded so our Street outreach efforts are systematic, coordinated, and comprehensive in a way that streamlines connection of unhoused neighbors to our coordinated entry processes. People sleeping in unsheltered locations are assessed and prioritized for assistance in the same manner as any other person assessed through the coordinated entry process. It is important to continue monitoring these trends to ensure that progress is sustained and further action can be taken as needed.





# Homeless Household Composition



2023 PIT Adult-Child Households

61% of 72 persons in Adult-Child households were female

39% of 72 persons Adult-Child households were male

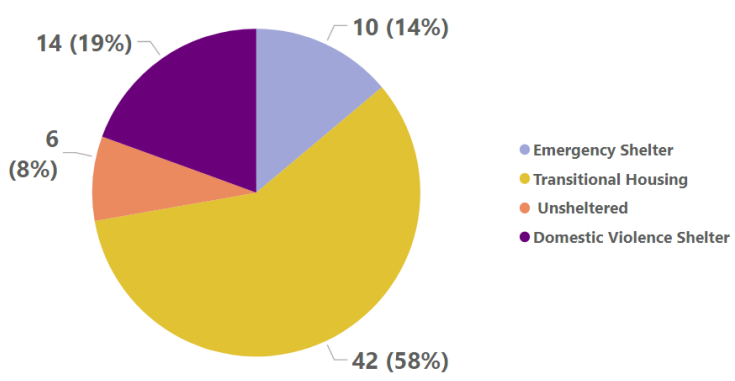
2023 PIT Single Adults

25% of 123 persons in Adult-only households were female

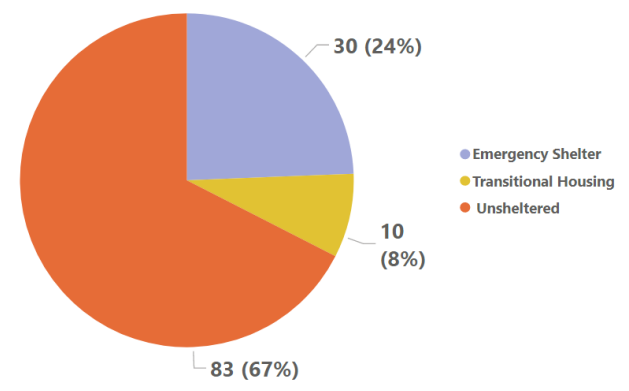
73% of 123 persons Adult-only households were male

Of the 195 total persons counted as homeless in 2023, 72 (37% of 195) counted were persons in families with children, which is a slight increase of 1% from 2022 and a 11% increase since 2020. 123 out of 195 (63%) were individuals without children, which is a 20% decrease since 2022.

2023 Households with Children



2023 Single Adults

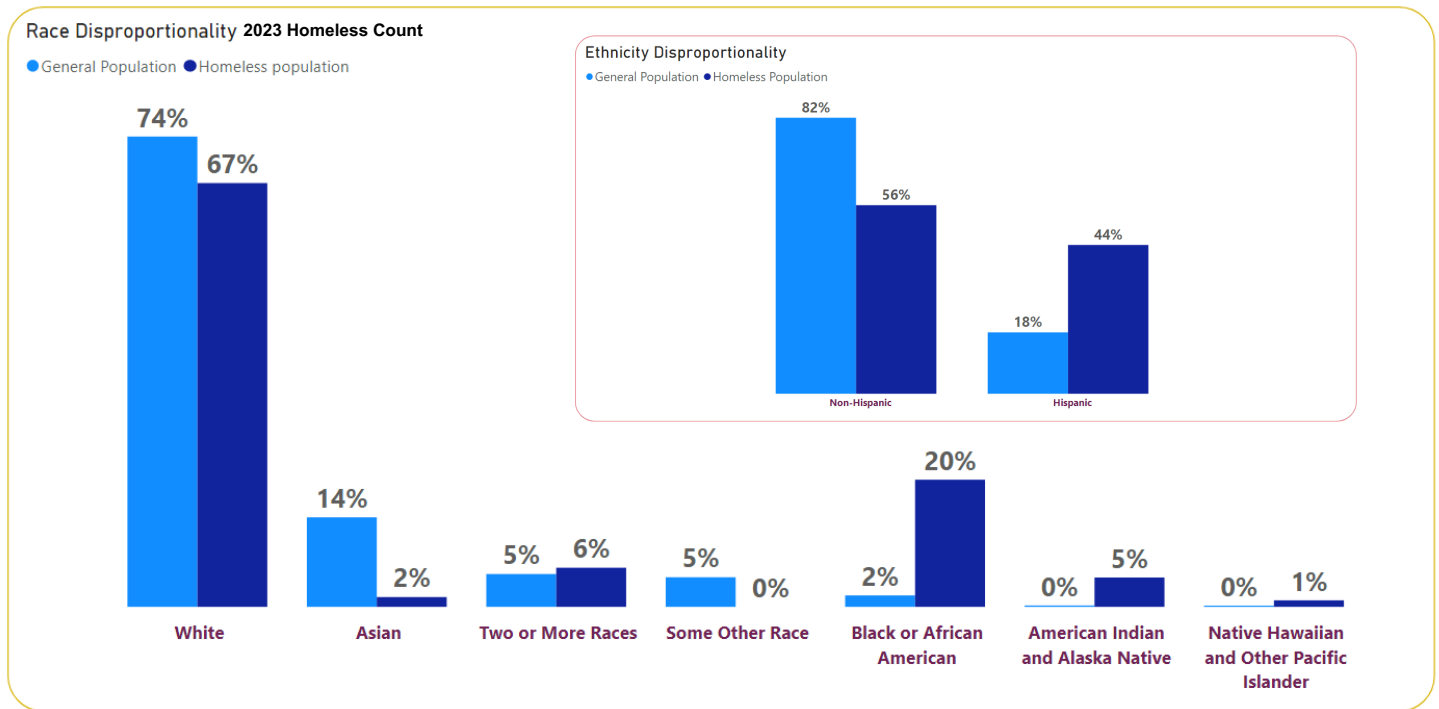


Households with Children are more likely to be in transitional housing and domestic violence shelters than in general emergency shelters or street homeless as evidenced in this year's count. Of the 64 households with children that were sheltered, only one household comprised of two adults and 4 children were in Glendale's general Emergency Shelter at Ascencia Shelter, the remainder were under hospice of Victim Service Provider's Transitional Housing and Intimate Partner Violence Shelter, YWCA.

Transitional housing programs and Domestic Violence (DV) Shelters are preferred options for DV survivors and unhoused households with women and children. Transitional Housing specifically is designed to provide longer-term support to individuals and families who are experiencing homelessness. These programs offer more than shelter; they also provide services such as counseling, job training, and childcare assistance to help families transition out of homelessness and become self-sufficient. This type of support can be particularly beneficial for families with children who may require more time and resources to stabilize their living situation. DV Shelters provide a safe and secure environment for individuals and families fleeing from abusive situations. As domestic violence is a common cause of homelessness among women and children, these shelters provide a crucial lifeline for families in crisis.

On the other hand, general emergency shelters are designed to provide temporary, short-term housing to individuals and families who are experiencing homelessness. However, families with children may face unique challenges in these shelters, such as safety concerns and lack of privacy.

# Race and Ethnicity

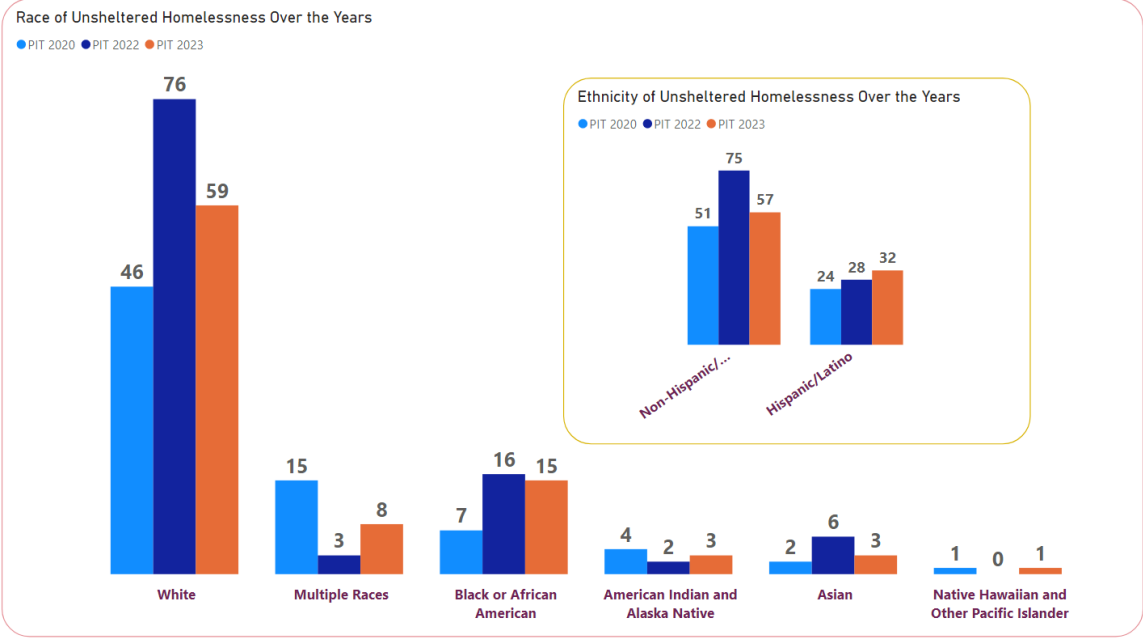


**Black/African Americans are overrepresented at a rate of 10 to 1 compared to the general population  
 Latino/Hispanics are overrepresented at a rate of 2.4 to 1 compared to the general population**

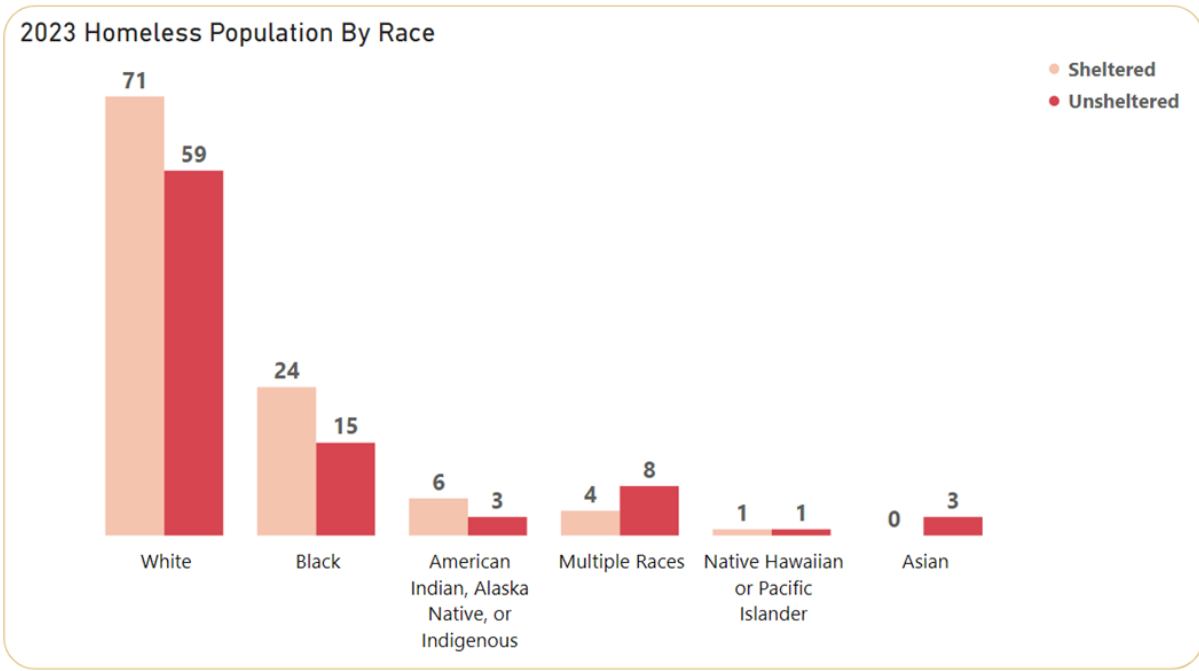
While homelessness impacts people of all ages, races, physical and cognitive abilities, ethnicities, gender identities, and sexual orientations, it disproportionately impacts some groups and populations. Compared to their overall proportion of the Glendale’s resident population, people of color are overrepresented in the homeless population.

Black/African Americans are especially overrepresented at a rate of 10 to 1 compared to the general population. Blacks/African Americans comprised 2% of the overall population in the 5-Year US Census 2020 American Community Survey and were overrepresented in 2023 PIT Count, where they comprised of 20% of 195 people who were reported as experiencing homelessness. Latinos/Hispanics also experience homelessness at a disproportionately higher rate, where persons experiencing homelessness were 44% in 2023 PIT count compared to the 18% general population residents in Glendale. For American Indian/Alaska Native/Indigenous people, the disproportionality ratio may be as high as 5 to 1.

This data comes in sharp contrast to other communities of color, specifically the Asian population, who have a lower rate of homelessness as they comprise of 14% of Glendale residents compared with only 2% of 195 persons experiencing homelessness on the night of the count.



**Key findings from our historical homeless count indicate that Black/African American unsheltered homeless population more than doubled since 2020 (14.3 increase) and the Latino/Hispanic population has increased steadily over the years, with a significant increase of 33% since 2020)**



**Race**

**130 (67%) surveyed identified as White**  
 Out of the 130, 71 (55%) were sheltered and 59 (45%) were unsheltered.  
 Out of the 59 unsheltered white, 2 (3%) identified as Armenian—3% of the unsheltered were Armenian

**39 (20%) surveyed identified as Black or African American**  
 Out of the 39, 24 (62%) were sheltered and 15 (38%) were unsheltered

**3(2%) surveyed identified as Asian**  
 All 3 (100%) were unsheltered

**12 (6%) surveyed identified as Multiple Races**  
 All 4(100%) were unsheltered

**2 (1%) surveyed identified as Native Hawaiian / Pacific Islander**  
 1(50%) was sheltered and the other 1(50%) was unsheltered

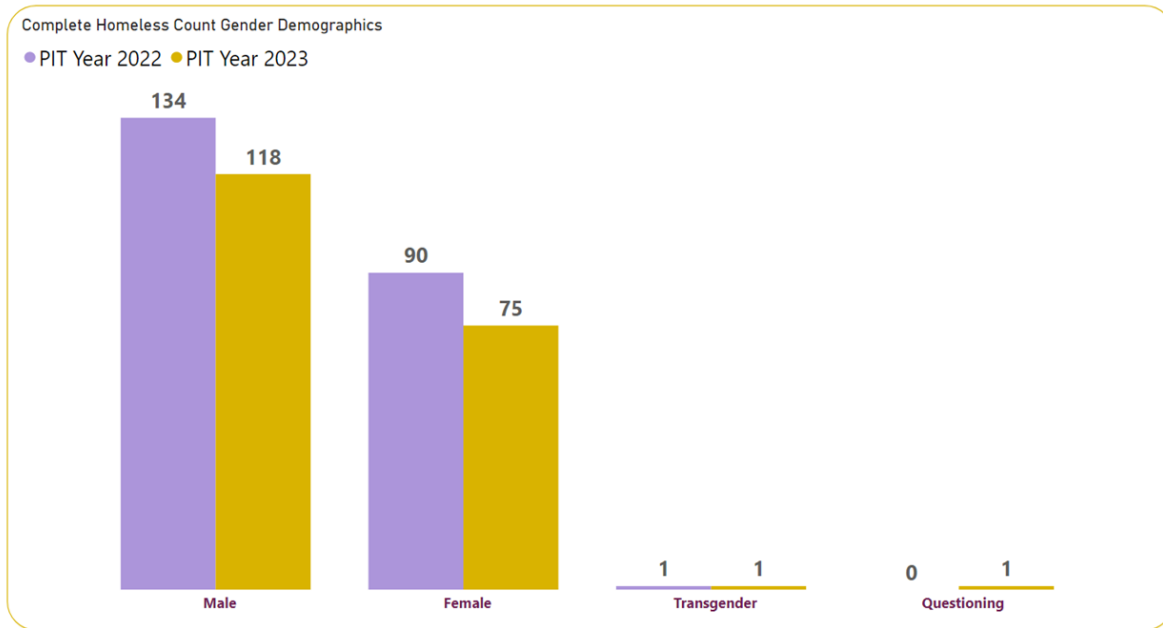
**9 (5%) surveyed identified as American Indian or Alaska Native**  
 Out of the 9, 6(67%) were sheltered and 3 (33%) were unsheltered

**Ethnicity**

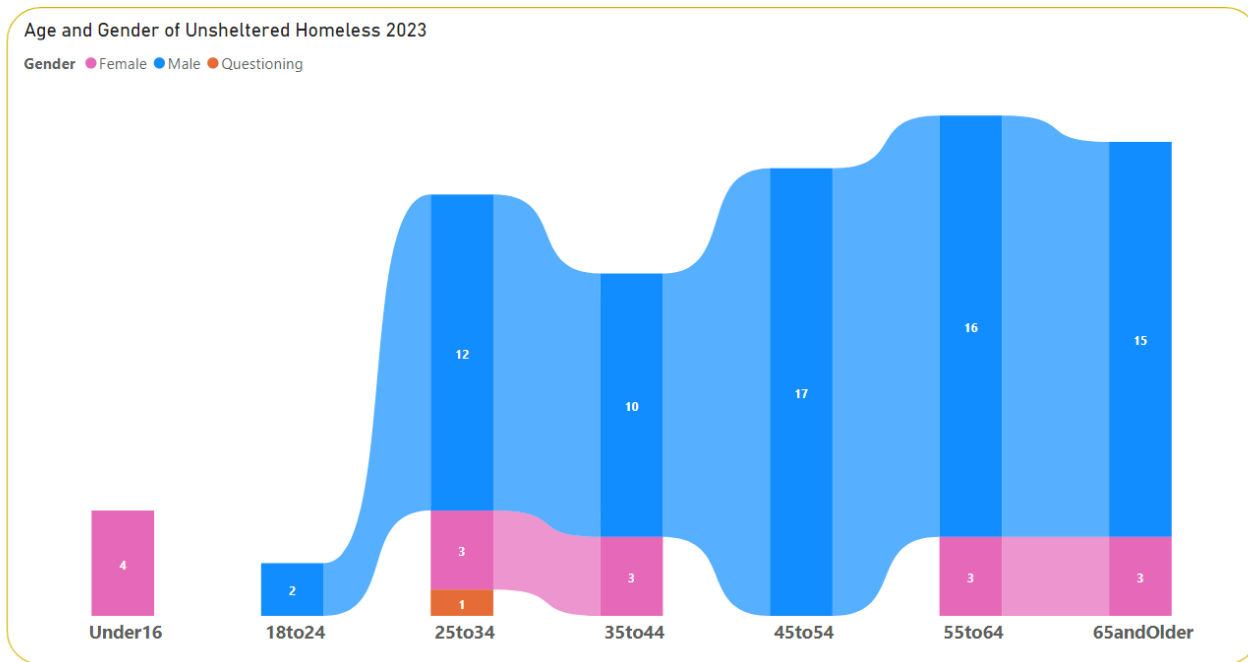
**109 (56%) persons identified as Non-Hispanic/Non-Latino**  
 Out of the 122, 62 (51%) were sheltered and 60 (49%) were unsheltered

**86 (44%) persons identified as Hispanic/Latino**  
 Out of the 81, 60 (74%) were sheltered and 21 (26%) were unsheltered

# Age & Gender Demographics



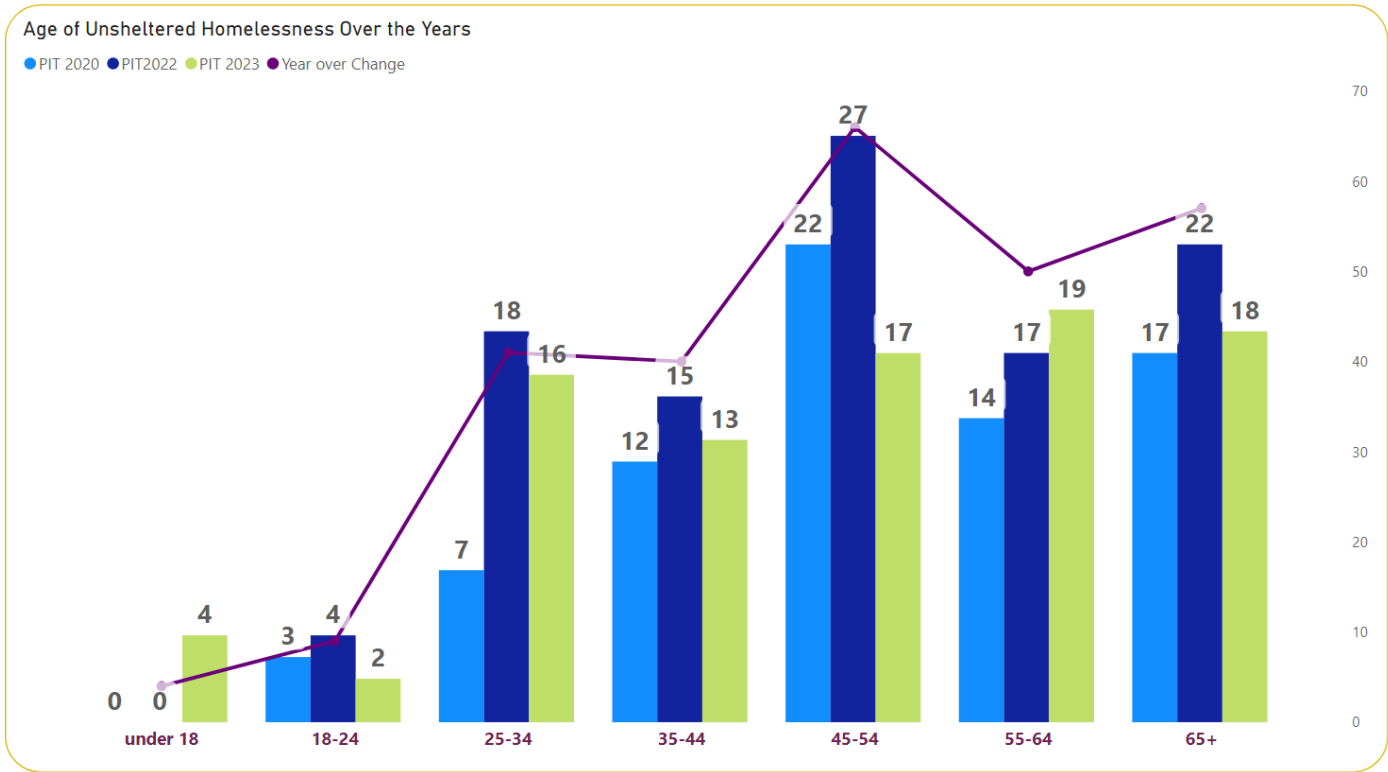
Key findings from comparisons indicate that in 2023 the homeless count showed a 27% decrease in male homeless population; a 16% decrease in the female homeless population, and the number of self-identified transgender homeless remained constant



42% of 89 the unsheltered homeless population aged 55 years and above. Of 37 people surveyed in that category, 84% were men and 16% were women.

The survey findings highlight the need for targeted interventions to address homelessness among older adults in Glendale. Programs that provide affordable housing, financial assistance for medical expenses, employment services, and social support may help to prevent homelessness among older adults. Additionally, policies that support a living wage, rent control, and social security benefits may also be effective in preventing homelessness among older adults. By addressing the root causes of homelessness, Glendale can work towards reducing homelessness and providing older adults with the support and resources necessary to maintain stable housing.

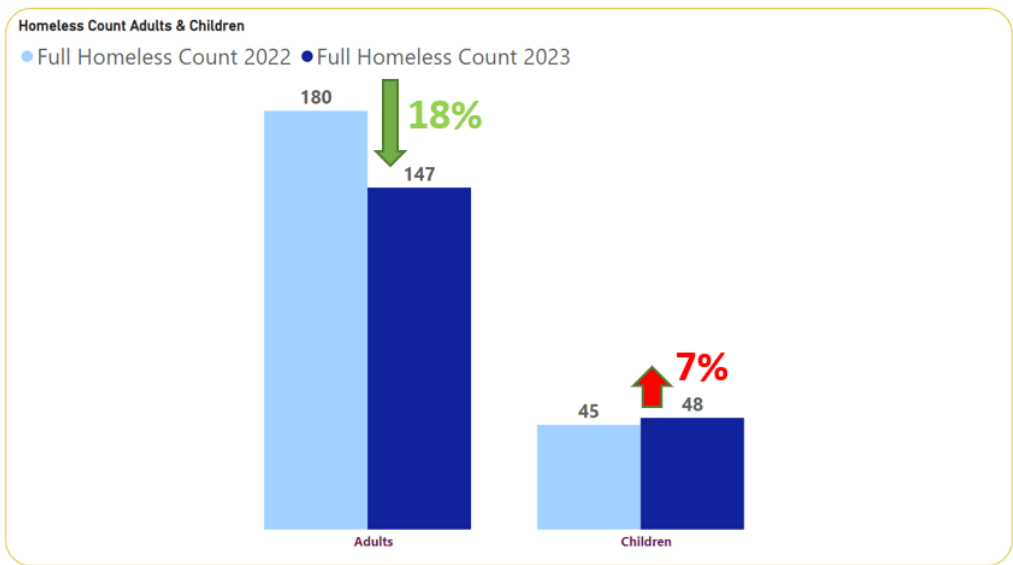




The data shows that the number of unsheltered homeless individuals aged 55-64 cohort in Glendale has increased consistently from 2020 to 2023. with a small increase from 31 in 2020 to 39 in 2022, and a slight decrease to 37 in 2023. it is still concerning that such a significant portion of the unsheltered homeless population is comprised of older adults

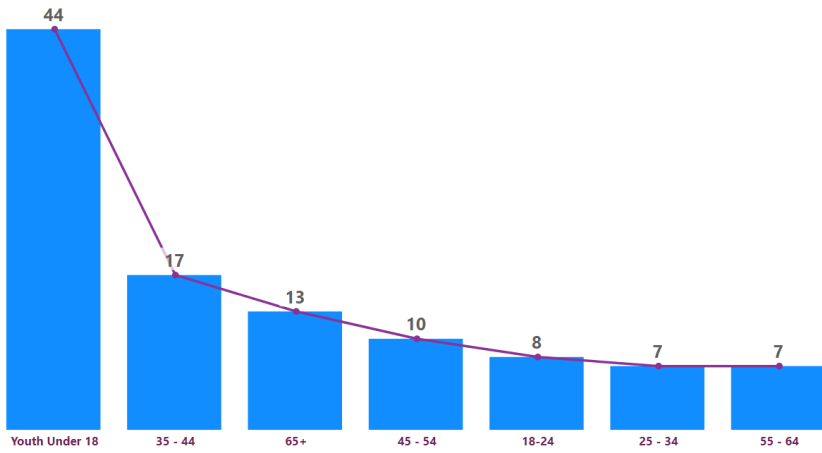
In 2020, the unsheltered homeless population aged 55 and over was 31, which accounted for approximately 41% of the total unsheltered population. In 2022, this number increased to 39, representing around 38% of the total unsheltered population. However, in 2023, the unsheltered homeless population aged 55 and over had a slight decrease to 37, which accounted for approximately 42% of the total unsheltered population. Overall, while there was a 20% increase in the proportion of unsheltered homeless individuals aged 55 and over from 2020 to 2023

**Key findings indicate a decrease in Adult homelessness by 18% since 2022 and an increase in children experiencing homelessness by 7%**



2023 Sheltered Count Age Tiers

● Sheltered Age Category ● Variance Per Age Tier



The youth under 18 make up the largest percentage of the sheltered homeless population and are primarily members of families fleeing Domestic Violence

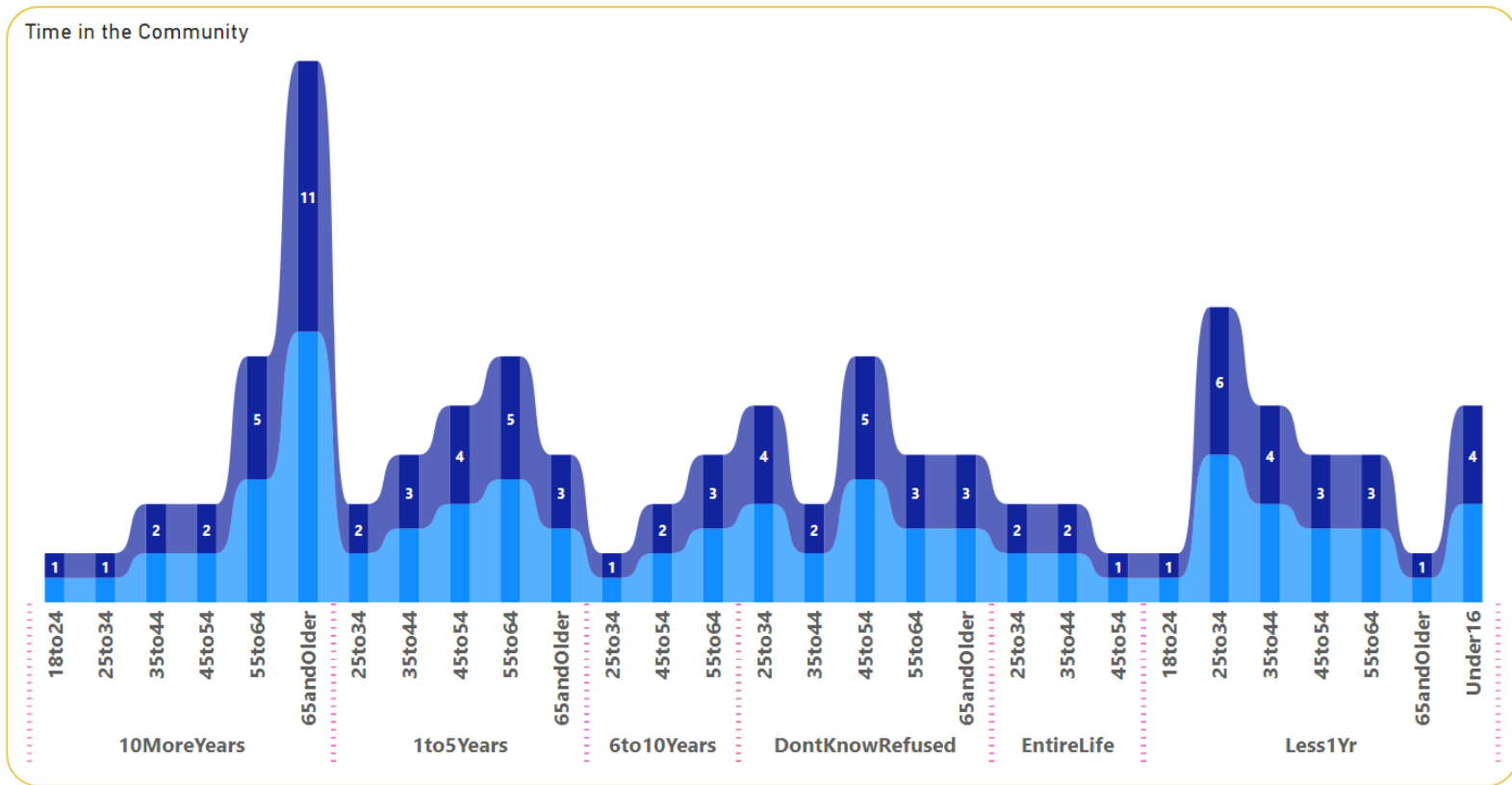
The data provided for the sheltered homeless count reveals that the youth under 18 are the largest group with 44 persons (42% of the sheltered population). This population are mostly in households that are fleeing from intimate partner violence. However, this is a cause for concern as the youth are the most vulnerable and have a long life ahead of them. This highlights the need for targeted interventions and support for homeless children, such as programs that provide child-care tutoring or after-school education. Furthermore, the relatively high percentages of older adults (65 and older) and middle-aged adults (35-44), 16% and 12% respectively, also suggest a need for specialized services for these populations, such as affordable housing and healthcare. The lower percentages of younger adults (18-24) and adults in their prime working years (25-34) suggest a need for employment assistance and other services to help these individuals transition out of homelessness. Overall, this data highlights the importance of targeted interventions and support that are tailored to the specific needs of different age groups within the homeless population.

The data shows that the sheltered homeless count is still a significant issue, with the youth being the most vulnerable group. It is essential to provide support and care to this group to prevent them from becoming chronically homeless.



# Unsheltered: Glendale Residency Survey

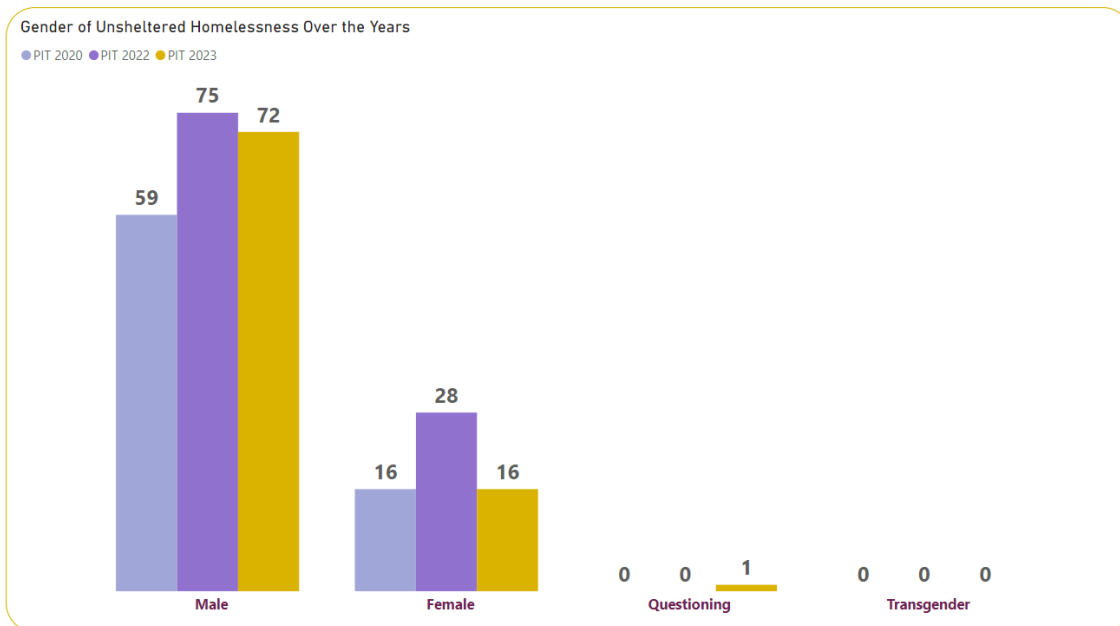
Key findings indicate 25% (22 out of 89) of the unsheltered persons have lived in Glendale for 10+ years. The 65 and older population is the key cohort that stands out from this group, with 11 out of the 22 respondents (50%) belonging to this age group.



Also, 25% (22 out of 89) unsheltered persons lived in Glendale for less than year. The 25-34 population is the key cohort that stands out from this group, with 6 out of the 22 respondents (27%) adults in their prime working years (25-34) suggest a need for employment assistance and other wraparound services to help these individuals transition out of homelessness.

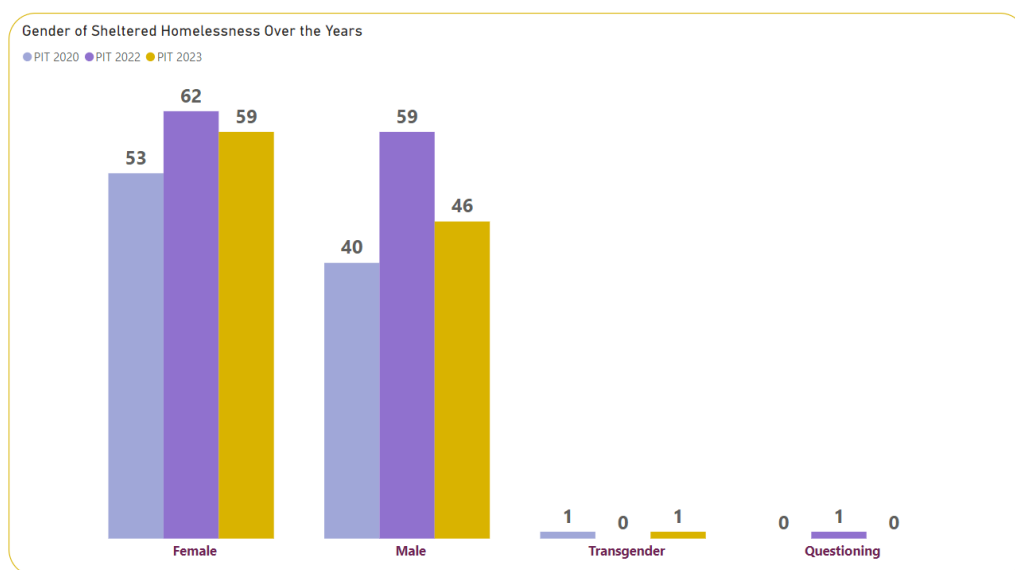


# Gender Trends: Unsheltered & Sheltered



Male individuals comprised 78% of the unsheltered homeless population in 2020, while females made up 22%. In 2022, the percentage of unsheltered males decreased to 73%, and females increased to 27%. By 2023, the unsheltered population was 81% male, 18% female, and 1% identified as questioning gender.

There has been a consistent trend of higher numbers of unsheltered males compared to females in the three years of homeless count. In 2020, unsheltered males were almost four times the number of unsheltered females, with 59 males and 16 females. In 2022, there was an increase in the number of unsheltered males compared to 2020 by 27%, from 59 to 75. The number of unsheltered females also increased by 75%, from 16 to 28. However, in 2023, the number of unsheltered males decreased by 4% from 75 to 72, while the number of unsheltered females decreased by 43% from 28 to 16.

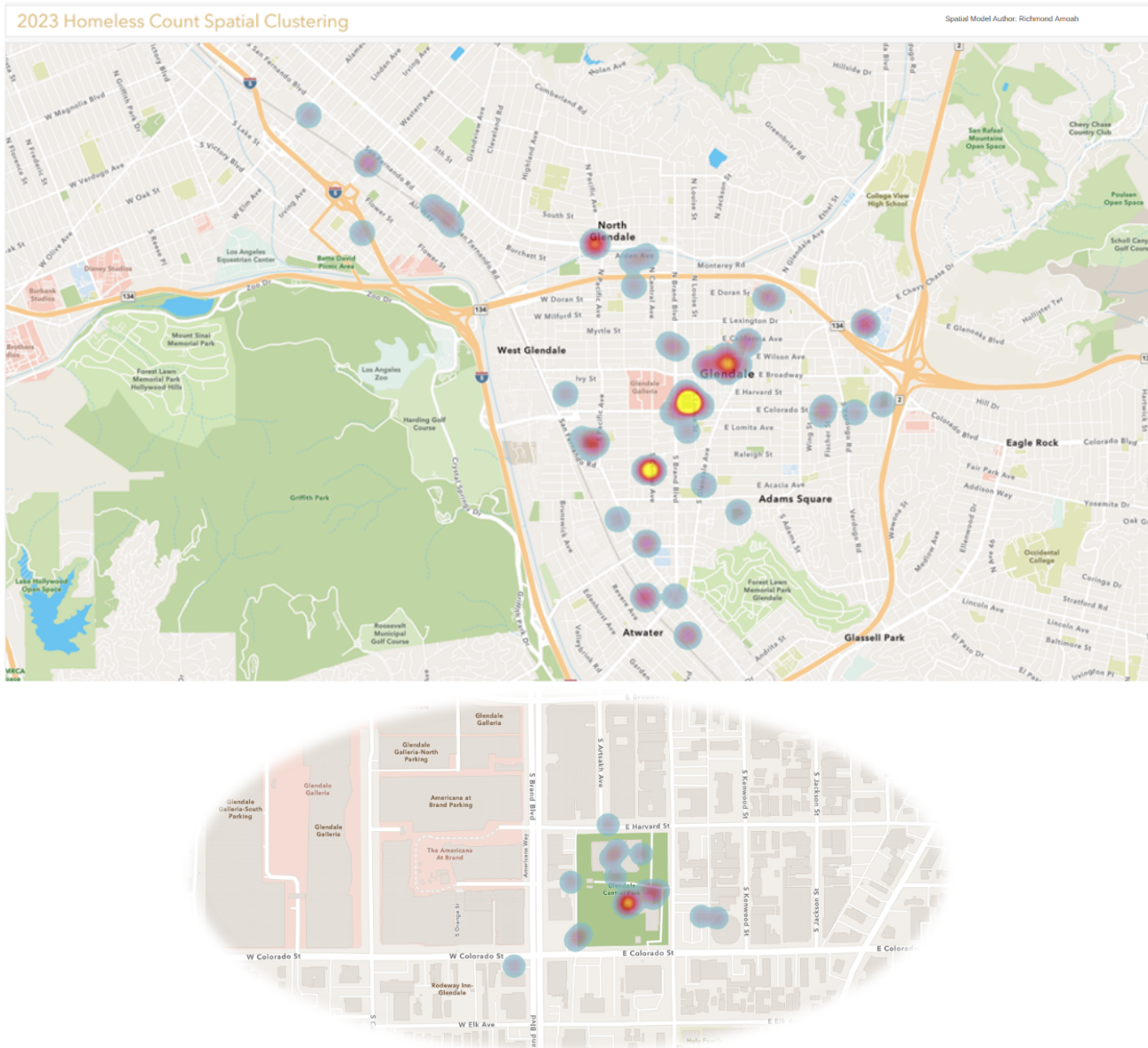


There has been a persistent trend of a higher number of females being sheltered in comparison to those counted as homeless over the past three years. While the number of males in shelter increased by 48% in 2022, it declined by 22% in 2023. On the other hand, sheltered females saw an increase of 17% in 2022, with no significant change in 2023. Overall, the sheltered count for males increased significantly in 2022 but decreased by 22% in 2023, while the sheltered count for females remained relatively stable over the three years. The sheltered count for transgender people remained constant over the three years.



## Glendale Unsheltered Homeless Hotspots

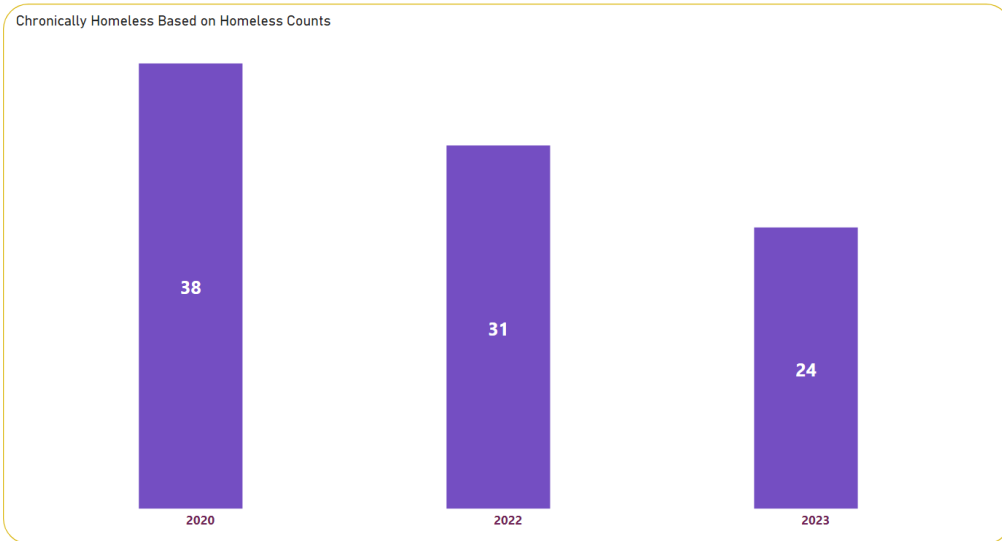
The use of geospatial modeling technology by the City of Glendale revealed a significant concentration of the unsheltered population in the Downtown area, particularly in Central Park. This finding has important implications for addressing homelessness in Glendale, as it highlights the need to focus resources and efforts on this specific area. Central Park is not only the largest green space in Downtown Glendale but also a location that offers access to vital resources for the unsheltered population, including the Central Library and the Adult Recreation Center.



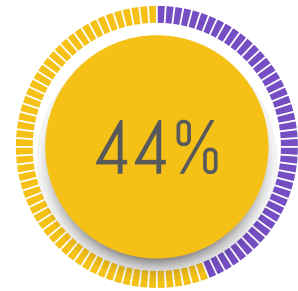
The proposed Armenian American Museum in the Central Park area also highlights the need for a comprehensive approach to homelessness in Glendale. The presence of a large cultural institution may draw more visitors to the area, which could impact the unsheltered population in various ways, such as increased scrutiny from law enforcement or pressure to leave the area. It is important for the City to engage with stakeholders, including the museum and the community, to ensure that any developments in the area are done in a way that is mindful of the needs of the unsheltered population.

By identifying Central Park as a key location of concentration, the City can target its resources and interventions to address homelessness in a more effective and efficient manner. Additionally, it highlights the need for a comprehensive and collaborative approach to addressing homelessness that takes into account the broader social and cultural context of the area.

# Prevalence of Chronic Homelessness



## HMIS Year-round Street Outreach 2022 data



126 persons were identified as chronically homeless.  
126 of 289 households

Based on the homeless count surveys we seen a steady decline of chronically homeless persons over the years, with a **18%** decrease in 2022 and a subsequent decrease of **23%** in 2023.

Per HUD’s definition, persons who fall into the “chronically homeless” category possess a disabling condition AND have experienced homelessness either continuously for at least one year; or four or more times in the last 3 years where the cumulative time homeless amounts to at least one year.

A PIT (Point-In-Time) count is a one-night snapshot of the number of homeless individuals in a given area, while a year-round count represents the total number of homeless individuals who were homeless at some point during a particular year. Therefore, it is not surprising to see a discrepancy between the number of chronically homeless persons in the PIT count of 2023 (24) and the year-round Street Outreach count of 2022 (126).

The difference in the numbers can be attributed to several factors. One possible explanation is that the PIT count is only able to capture a fraction of the total homeless population, as some chronically homeless individuals may not be present on the night of the count. Additionally, the PIT count may not include individuals who are living in places not typically associated with homelessness, such as in cars or on couches of friends or family.

On the other hand, the year-round Street Outreach count is able to capture individuals who have experienced chronic homelessness at any point during the year, regardless of their presence on the night of the PIT count. It is also possible that the year-round count includes individuals who are no longer in Glendale and are not captured in the PIT count.

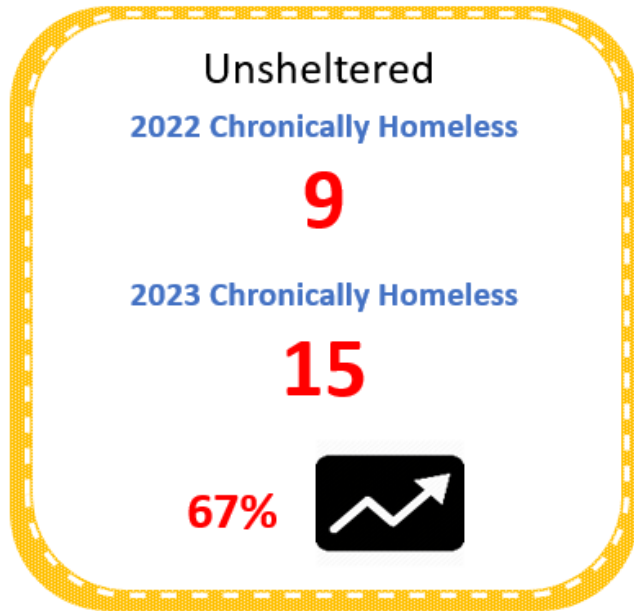
## Unsheltered Chronic Homelessness

Of the 89 unsheltered persons surveyed in the 2023 homeless count, 15 persons (17% of 89) were identified as experiencing chronic homelessness in Glendale, which is an increase of 67% since 2022.

It is worth noting that an additional 21 (24%) of the 89 unsheltered persons reported they had experienced homelessness longer than 12 months in Glendale but with no disabling conditions.

Primary Factor contributing to the increase of unsheltered chronically homeless persons in Glendale:

- Lack of designated Glendale CoC beds for referrals: Glendale shares a portion of beds with LAHSA and other federal partners. Hence, Glendale does not have authoritative priority for referrals for individuals experiencing chronic homelessness, and thus has resulted in individuals being unable to access to shelter and housing services with immediate alacrity, leading to prolonged periods of homelessness.



## Sheltered Chronic Homelessness

Of the 106 sheltered persons surveyed in the 2023 homeless count, 9 persons (8% of 106) were identified as experiencing chronic homelessness in Glendale, which is a decrease of 64% since 2022.

Factors contributing to the decrease of chronically homeless persons in Glendale's shelters:

- The increase in the number and variety of emergency shelter options (such as motel/hotel vouchers) made available due to the Coronavirus Aid, Relief, and Economic Security (CARES) Act as well as the City of Glendale's Measure S Fund; and
- The positive impact of the Glendale Homeless Outreach Team (described above) to build trust and rapport with unsheltered persons and help them overcome barriers.
- The increase in homelessness prevention and rapid rehousing programs;
- The increase in affordable housing options made available through the new Emergency Housing Voucher Program;
- The increase in coordinated efforts by the Glendale Homeless Outreach Team, a collaboration of City staff, Glendale Police Department's (GPD) Community Outreach Resources and Engagement (CORE) Bureau, and local homeless service providers, who work through the streets daily, building rapport and trust, and completing eligibility documentation and housing placements with unsheltered persons.

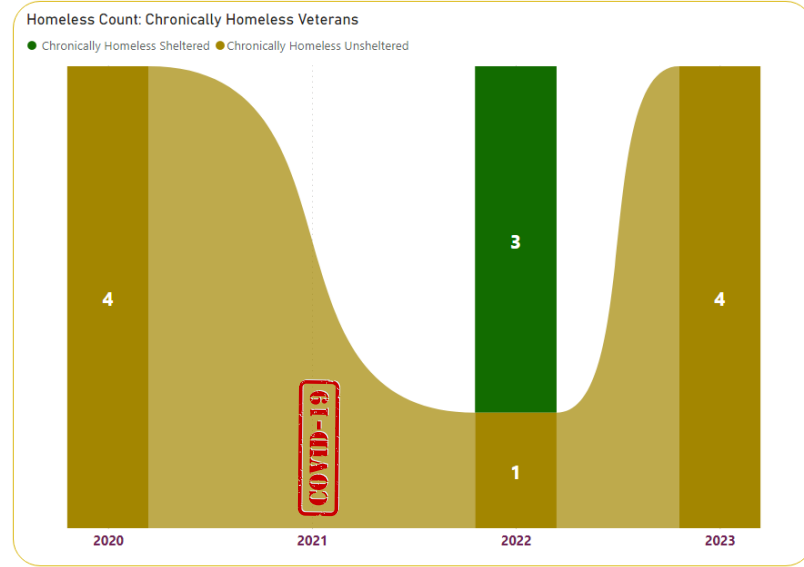
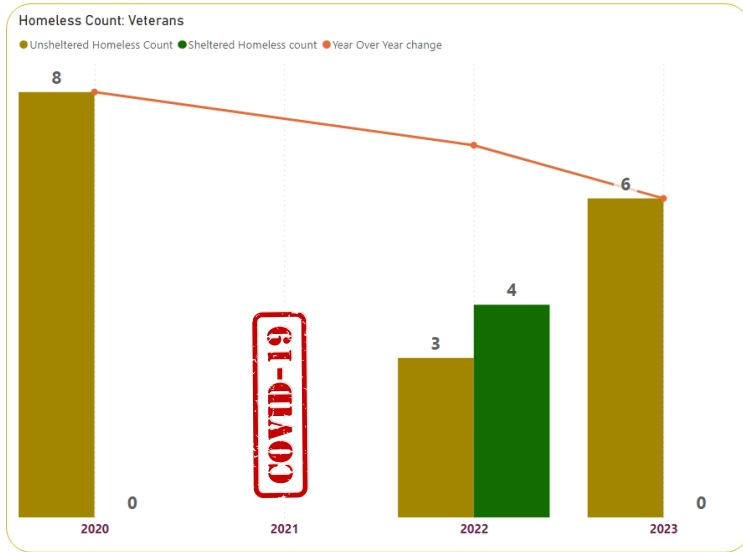


# Special Subpopulations

## Veterans



Veterans experiencing homelessness are more likely to live on the streets than in shelters and more often stay on the street for extended periods of time. They are also significantly less likely to access community health centers, instead relying on shelter-based and street outreach services for care. This year's findings support the importance of continuing to distinguish homeless persons by veteran status and the ongoing need to tailor interventions and services for this subgroup.



Over the years, there has been an overall trend of reduction in Glendale's veterans homeless population. Unsheltered Veterans decreased by 63% in 2022 since 2020, however, there were 4 new homeless veterans in our homeless response system. In 2023, unsheltered homelessness with veterans increased by 50%, since 2020, with no veterans in Glendale's Emergency Shelters / Transitional Housing Projects during the Night of the count.

The 2023 Homeless Count revealed a total of 6 homeless people that identified themselves as veterans (all six identified were unsheltered), presenting a 14% decrease from the 7 overall veterans reported on the 2022 Homeless Count. Out of the 6, 4 (66%) identified as chronically homeless and 83% or 5 persons reported to be male and 1 female. Only 1 out of the 6 ( 17%) were employed. When surveyed, 33% or 2 persons stated they became homeless due to divorce / separation, 33% or 2 persons stated due to illness. 1 or 17% persons stated due to loss of employment; and one refused to respond to this question.

Efforts to address homelessness among veterans in Glendale include partnership with The Salvation Army Veteran Employment Services. This program is aimed at assisting unemployed and underemployed veterans with a customized approach to career development. In addition, we are in partnership with the County department of Health Services, is accepting referrals for the HUD the HUD--VASH Collaborative Case Management (CCM) Pilot VASH Collaborative Case Management (CCM) Pilot program, The program pairs HUD's Housing Choice Voucher rental program, The program pairs HUD's Housing Choice Voucher rental assistance with Intensive Case Management Services for unhoused assistance with Intensive Case Management Services for unhoused veterans with veterans with Other Than Honorable discharges



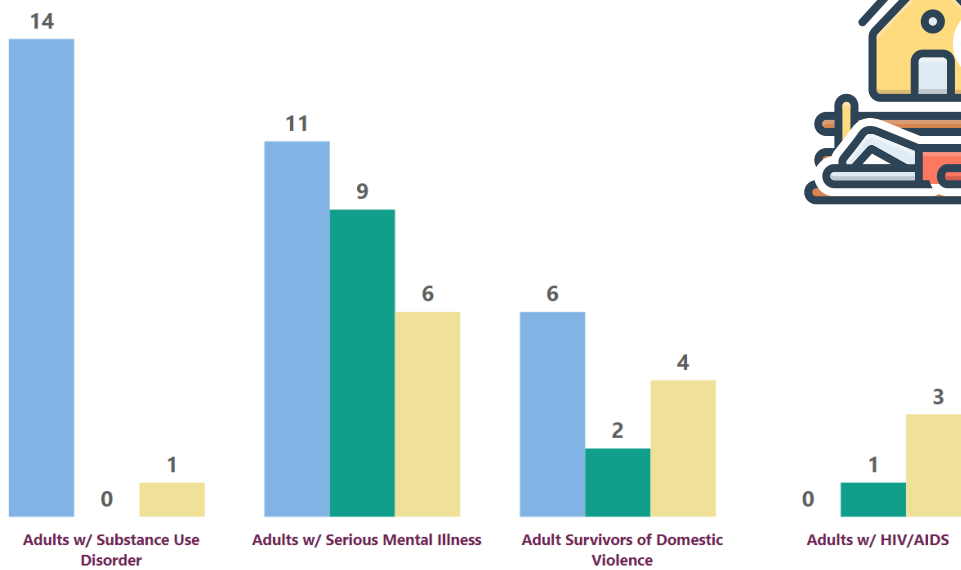
## People with Special Needs



Every year, the homeless count seeks to estimate the prevalence of certain disabilities among the homeless population. For many homeless individuals and families, health conditions are a major contributing factor in the economic crisis that leads to losing stable housing. Once left without support and resources for basic needs, even the most minor illness can escalate to more acute or chronic illness. Exposure to environmental elements and violence, along with lack of proper nutrition and preventative care often can result in more serious illness and financial strains on the community as hospitals are impacted and there are limited options for transitional housing upon discharge from hospitals.

Unsheltered Adults Special Sub-Populations Homeless Count

● PIT 2020 ● PIT 2022 ● PIT 2023



2023 Unsheltered Adults



Of 89 unsheltered persons surveyed, 85 were adults (96%)

### Unsheltered Adults:

The 2023 homeless count data for unsheltered adults in the given area provides some interesting insights. The percentage of unsheltered adults self-identifying as having a serious mental illness has decreased by 33% from 2022, with only 6 out of 89 (7%) individuals reporting such illness.

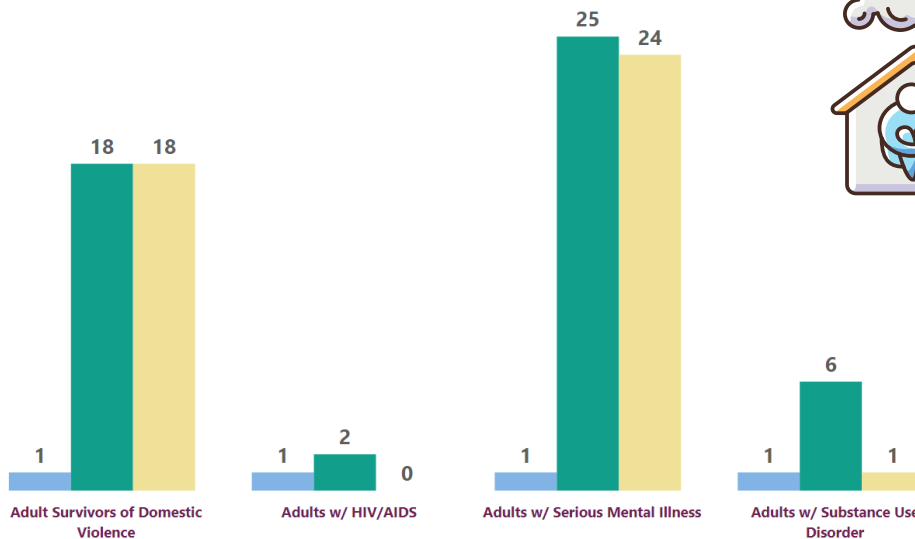
However, the data also reveals a concerning trend with an increase of 50% from 2022 in the number of unsheltered adults self-identifying as survivors of domestic violence, with 4 out of 89 (4%) individuals reporting such experiences. This could indicate a need for more support and resources for survivors of domestic violence who are experiencing homelessness.

The number of unsheltered adults who identified as HIV positive or having been diagnosed with AIDS on the date of enumeration has increased more than twice compared to the 2020 homeless count, with 3 individuals reporting such a status. This could be an alarming trend, highlighting the need for more attention and resources for individuals with HIV/AIDS who are experiencing homelessness.

Lastly, only 1 out of 89 (1%) unsheltered adult self-identified as having a substance use disorder. This is a relatively small number, but it is still an important issue that requires attention and support to ensure that individuals experiencing homelessness can receive the necessary services and treatment. Overall, the data reveals both positive and concerning trends, indicating a need for continued efforts to address homelessness and provide support for vulnerable populations.

Sheltered Adults Special Sub-Populations Homeless Count

● PIT 2020 ● PIT 2022 ● PIT 2023



2023 Sheltered Adults



Of 106 sheltered persons surveyed, 62 were adults (96%)

## Sheltered Adults:

According to the report, out of the 62 sheltered adults, 24 of them, which accounts for 39%, are reported to have a serious mental illness. This shows a slight decrease of 4% compared to the 2022 data. It is important to note that this decrease, although small, could indicate that efforts to provide mental health services to homeless individuals in Glendale are having some impact.

In addition, only one person out of the 62 sheltered adults, which accounts for 2%, is reported to have a substance use disorder. This indicates a significant decrease of 83% compared to the 2022 data. This decrease may suggest that interventions such as substance abuse treatment programs and harm reduction strategies have been effective in addressing substance use disorders among the homeless population in Glendale.

Furthermore, 18 out of the 62 individuals (30%) were reported as domestic violence survivors, which indicates that there has been no change in this aspect since 2022. This suggests that domestic violence continues to be a significant issue among the homeless population in Glendale, and interventions such as safe housing options and support services for survivors may need to be further strengthened.

Finally, no participant identified as HIV positive or having been diagnosed with AIDS on the date of enumeration. While this is a positive finding, it is important to note that HIV/AIDS continues to be a major health concern among homeless individuals across the United States. Regular testing, access to treatment, and prevention efforts should continue to be a priority in homeless service provision in Glendale.

# Understanding the Causes and Experiences of Homelessness among Glendale Residents

According to the 2023 Unsheltered Homeless Count Surveys, 34 (44%) out of 77 unsheltered respondents reportedly became homeless for the first time in the city. Overall, 49 (67%) out of 73 respondents reported becoming homeless in Glendale. The main factors that contributed to their homelessness are discussed below (note: 26 out of the 89 unsheltered persons refused to provide further information):

- **Loss of employment:** When surveyed, 15 out of 63 (24%) unsheltered respondents stated that losing their job was the primary factor that contributed to homelessness in Glendale. Barriers to stable housing are primarily economic: either they lack sustainable employment, or they have current jobs and income but are not earning enough to make ends meet.



- **Rent Increases:** The 2023 count revealed a total of 13 out of 63 (21%) unsheltered respondents stated that they “could not afford rent increase”. The soaring cost of living in California coupled with the shortage of affordable and available rental homes for extremely low-income renters in Glendale affects the surge in homelessness.



- **Divorce / Separation:** 11 out of 63 (17%) unsheltered respondents reported becoming homeless as a result of divorce / separation. While divorce itself may not be the sole cause of homelessness, it can be a pivotal factor to homelessness because it often leads to financial strain and instability, particularly for those who were dependent on their partner’s income. It also can result in the loss of a shared home, leaving one or both partners without a place to live. In some cases, the stress of divorce or separation can lead to mental health issues or substance abuse, which can further contribute to homelessness.

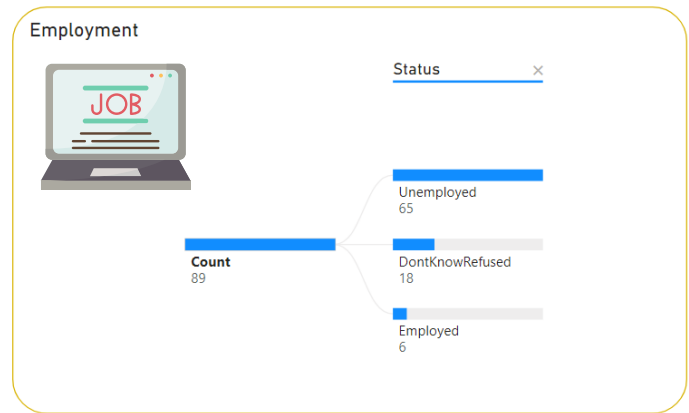


- **Unexpected illness:** 10 out of the 63 (16%) unsheltered persons surveyed reported becoming homeless as a result of “unexpected illness”. An acute physical condition may lead to homelessness; homelessness itself can exacerbate chronic medical conditions. A person can become chronically homeless the longer they remain unsheltered without stable housing, making it difficult to access treatment or preventive care.



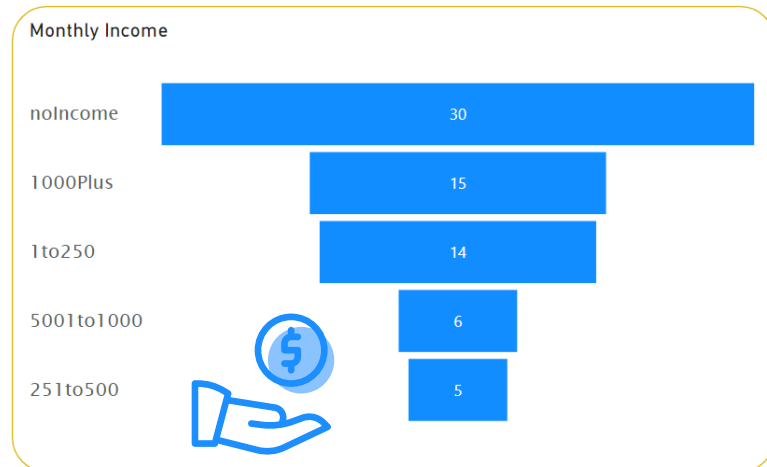
# Employment & Monthly Income Survey

Although, according to the US Bureau of Labor Statistics (2023), the unemployment rate in Glendale January 2023 was 5%, it is important to recognize that the unemployment rate represents only those who are unemployed and actively seeking employment. It does not represent all joblessness, nor does it address the types of available employment. The jobless rate for homeless survey respondents was 92%, with 65 out of 71 respondents reporting to be unemployed. 6 out of 71 (8%) of the respondents reported working full-time, part-time, or with seasonal, temporary, or sporadic employment, compared to 15% in 2022.



## Income

Income from all sources varied between employed and unemployed survey respondents, but overall income was higher among those who were unemployed. More than a third (35%) of the 65 unemployed respondents reported an income of \$250 or more per month, in comparison to 17% of the 6 who were employed. This discrepancy is further highlighted, as 22% of unemployed respondents reported making \$1,000 or more per month, compared to 0% of the employed respondents.



- 18% (12 persons) of 65 unemployed respondents reported an income of \$250 or less per month, in comparison to 33% (2 persons) of those who were employed.
- 6% (4 persons) of 65 unemployed respondents reported an income of \$251 to \$500 per month, in comparison to 17% (1 person) of those who was employed.
- 8% (5 persons) of 65 unemployed respondents reported an income of \$501 to \$1000 per month, in comparison to no person of those who were employed. 1 refused to provide employment status.
- 22% (14) of 65 unemployed respondents reported making \$1000 or more per month, compared to (0 persons) of employed respondents. 1 refused to provide employment status.
- 30 (43%) out of all 70 respondents—excluding Don't know / Refused responses— reported no income.

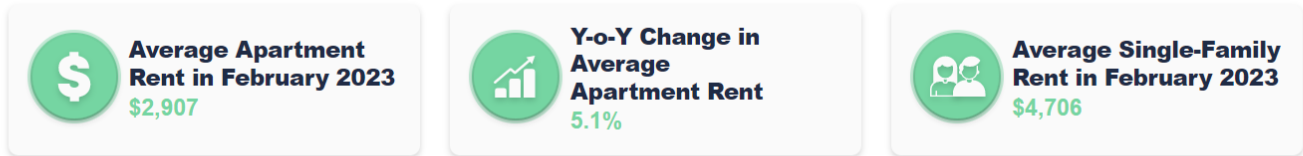




# Understanding the Causes and Experiences of Homelessness among Glendale Residents

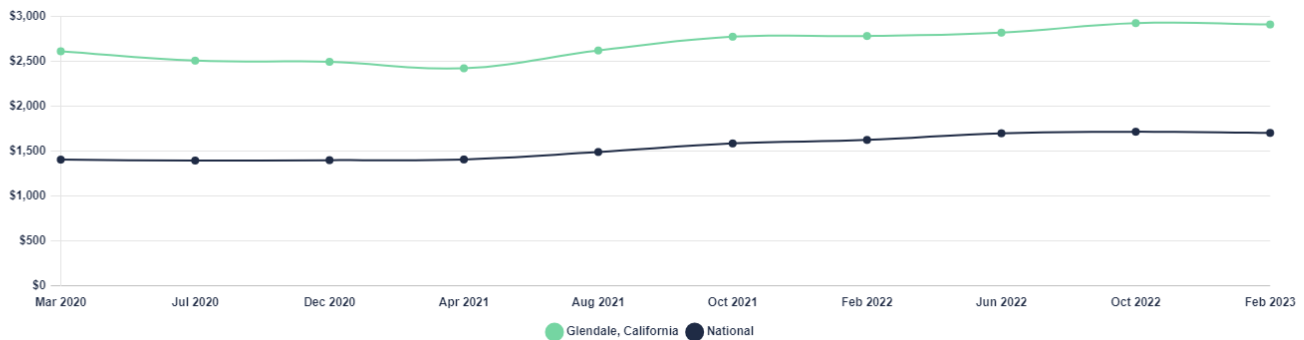
An apartment for rent in Glendale, California typically goes for \$2,907 per month, while a single-family home for rent in Glendale, California has a monthly cost of around \$4,706. Renter-occupied units make up 66% of the local housing market, while the rental vacancy rate in Glendale is at 2.7.

## Glendale, California



>>> Compared to a year ago, Glendale, California apartments have recorded a 5.1% rent increase.

## Glendale, California | Average apartment rent trend

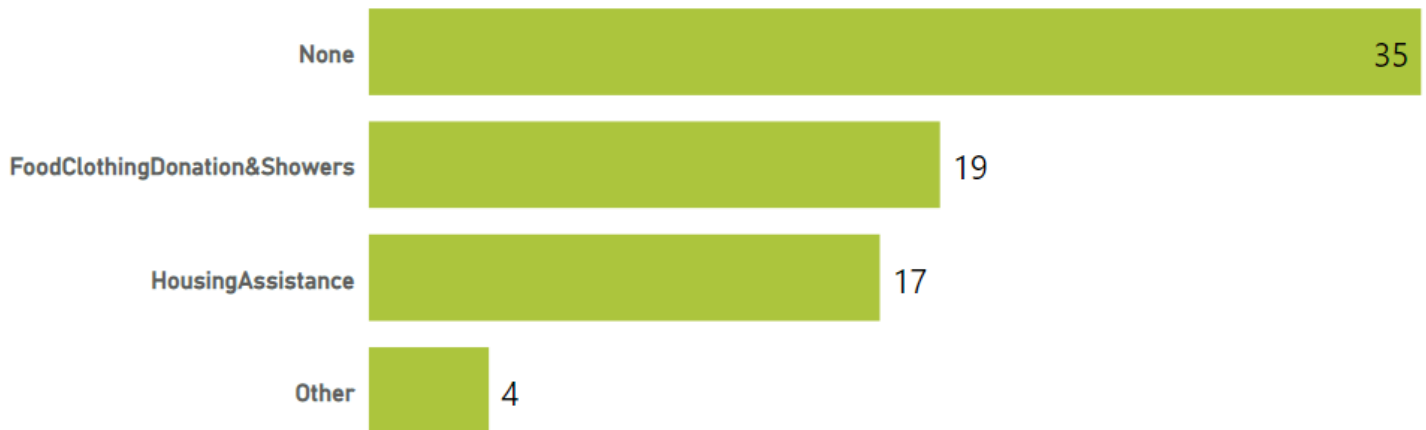


The high cost of housing in Glendale, California, is a significant factor contributing to homelessness in the area. With an average cost of \$2,907 per month for an apartment and \$4,706 per month for a single-family home, many low-income individuals and families are unable to afford stable housing. Furthermore, the high rental vacancy rate of 2.7% means that affordable housing options are limited, with few available units for those in need. This creates a competitive and challenging rental market, particularly for those with lower incomes, limited credit histories, or other barriers to accessing housing. As a result, many individuals and families are forced to rely on emergency shelters, transitional housing, or even living on the streets, perpetuating the cycle of homelessness in the community.

## **Services Programs Participants have Accessed & Recommendations for Program Improvement**

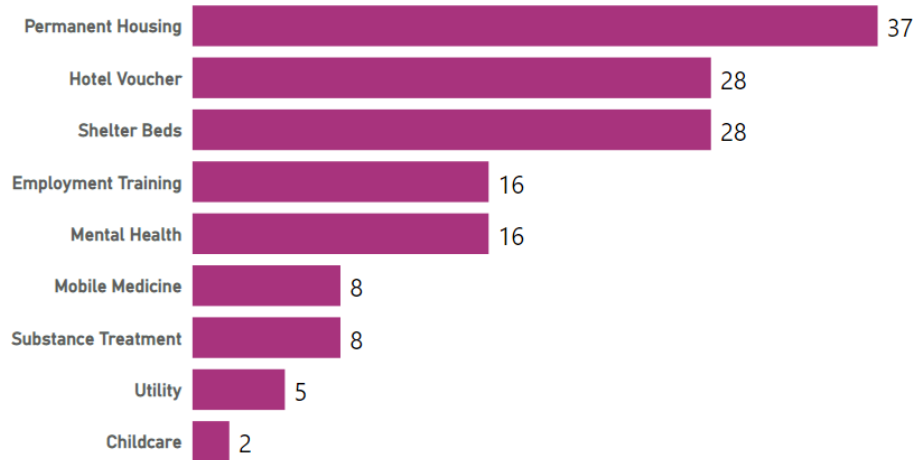
In addition to government assistance mentioned in the homeless count highlights, there are numerous community based services and programs available to individuals experiencing homelessness. These services range from drop-in resource centers and meal programs to job training and health care. One-quarter (25%) of respondents reported using free meal services, being recipients of clothing donations and had access to showers. Twenty-three (23%) of respondents reported to have received some form of housing assistance, which includes temporary shelter and case management. Five percent (5%) of respondents reported "Other" for suggestions outside the options provided, which comprised of Shelter Waiting list, Food Stamps, and General Relief. Almost half (47%) of respondents reported they are currently not receiving any homeless assistance services.

**Types of Homeless Assistance Currently Receiving from Glendale Charitable Orgs**



Participants were asked What types of services would you like to see offered in Glendale in the future? ( Multiple Selections were given to respondents) The top recommendations by the unsheltered population surveyed include the following: [See Next Page]

Types of Homeless Assistance Participants Would like To See Offered in Glendale in the future



Among the 89 unsheltered participants surveyed, there were multiple responses to the question of what types of homeless assistance services they would like to see provided.

The survey conducted among the unsheltered population in Glendale has provided valuable insights into the types of services that are most in demand. The majority of respondents have expressed a strong desire for permanent housing, with 37 ( 25%) selections. This underscores the urgent need to provide affordable and sustainable housing solutions to the unsheltered population in Glendale.

Hotel vouchers and shelter beds were also popular selections, with 28 (19%) selections each. This indicates that short-term solutions such as emergency shelter and temporary housing are also needed to address the immediate needs of the homeless population.

Respondents have also emphasized the importance of employment training and mental health services, with 16 selections each (11%). These services can provide much-needed support to individuals who are struggling with mental health issues or who need help developing the skills and resources necessary to secure and maintain employment.

Substance treatment selections and mobile medicine selections were also mentioned (10%), highlighting the need for medical and addiction support services. Respondents also identified utility and childcare selections as areas of need, although to a lesser extent (4%)

Overall, the survey results suggest that there is a critical need for a comprehensive range of services to address the complex and varied needs of the unsheltered population in Glendale. The findings can help inform the development of targeted and effective programs and policies to better serve this vulnerable population.

# 06 Recommendations

## **Recommendation 1: City Funding**

### **Use City of Glendale Measure S Funding to provide affordable housing to end homelessness in Glendale.**

The 2022 Homeless Count data shows that there is simply not enough available affordable housing in Glendale. Without a housing stock of 150-200 units, many homeless persons in our community are likely to continue to cycle in and out of homelessness. The priority now must be to expand the supply of affordable housing. The Glendale Quality of Life and Essential Services.

Protection measure, Measure S, is estimated to generate \$30,000,000 annually for the City's general fund to be used locally. The revenues generated by the Measure are used to maintain and expand funding for general governmental services including affordable housing. Measure S ensures that 100% of the \$30 million generated will stay in Glendale. Therefore, it is recommended that a portion be used to house low-income individuals experiencing homelessness in our community.

## **Recommendation 2: County Funding**

### **Continue to use County of Los Angeles Measure H Funding to prevent and end homelessness in Glendale.**

Measure H funding recommendations will invest in the solutions that have been proven to prevent and end homelessness. FY2022-2023 will be year 4 of this 10-year funding source. COVID-19 and Sales tax will impact the allocation under Measure H each year. These following services are eligible:

- Homelessness prevention services
- Comprehensive supportive services, such as mental health care and outreach
- Long term solutions like permanent housing

Measure H total funding received to date is in the amount of \$594,739 FY21-22 funding allocation is estimated to be around \$209,000. The annual allocation is based on the City's Homeless Count and determined by the Los Angeles County Board of Supervisors.

The Measure H recommendations for City of Glendale target six key areas to combat homelessness, which include: subsidized housing; coordinated outreach and shelters; case management and services; homelessness prevention; income support; and preservation of existing housing. These key areas address the 21 interconnected homeless initiative strategies eligible for Measure H funding. After a series of meetings and negotiations with the County CEO, LASHA and the Department of Health Services (DHS), the County agreed to directly allocate funding to the Glendale CoC from the following strategies (parts of strategies) listed below.

- A5- Homeless Prevention Services for Individuals (This excludes legal services and evaluation funding.)
- B3- Partner with Cities to expand Rapid Re-Housing (Allocation is only to support single adults.)
- E6-Countywide Outreach System (Allocation is based only on Multidisciplinary Outreach Team funding.)
- E7- Strengthen the Coordinated Entry System (Allocation is only to support Housing Locators and Housing Navigators.)
- E8-Enhance the Emergency Shelter System (Allocation is based only on funding for new shelter beds



### **Recommendation 3: State Funding**

**Use State of California funding - Homeless Housing, Assistance, and Prevention (HHAP) Program— to increase Interim Housing Programs and improve collaboration with Mainstream and Health Care Service Providers to quickly re-house the homeless population in Glendale. In addition, use State funds to prepare a local Homelessness Action Plan to better identify the needs and gaps in the Glendale CoC.**

The Homeless Housing, Assistance, and Prevention Program (HHAP), made available by the California Interagency Council on Homelessness (CALICH), provides recipients with one time grant funds for up to five years to support regional coordination and expand or develop local capacity to address immediate homelessness challenges. Spending must be informed by the best–practices framework focused on moving homeless individuals and families into permanent housing and supporting the efforts of those individuals and families to maintain their permanent housing. The HHAP grant program is authorized by AB101 (Chapter 159, Statutes of 2019), which was signed into law by Governor Gavin Newsom on July 31, 2019. Since 2019, the City of Glendale (City) has received a total of \$772,163 (HHAP Rounds 1 and 2) funds. The City will be applying for HHAP Round 3 funds by June 2022. A portion of the funds will be used to create a Homelessness Action Plan for the Glendale CoC. As stated in the Health and Safety Code (HSC) § 50219(c)(1-8), eligible uses may include but are not limited to:

1. Rental assistance and rapid rehousing; subject to FMR or rent comparable;
2. Operating subsidies in new and existing affordable or supportive housing units, emergency shelters, and navigation centers;
3. Landlord Incentives (including, but not limited to, security deposits and holding fees);
4. Outreach and coordination (which may include access to job programs) to assist vulnerable populations in accessing permanent housing stability in supportive housing;
5. Systems support for activities necessary to create regional partnerships and maintain homeless services and housing delivery system;
6. Delivery of permanent housing and innovative housing solutions (such as hotel and motel conversions);
7. Prevention and shelter diversion to permanent housing;
8. New navigation centers and emergency shelters based on demonstrated need;
9. Homeless Youth Population (ages 12-24); and .
10. Establish a Homelessness Action Plan

### **Recommendation 4: Veterans**

**Finish the job of ending homelessness among unsheltered veterans.**

As noted in the aforementioned veterans subpopulation section, the number of unsheltered veterans has increased by 3 in 2023. In order to finish the job, the public and private partners should continue to implement the best practices identified below.

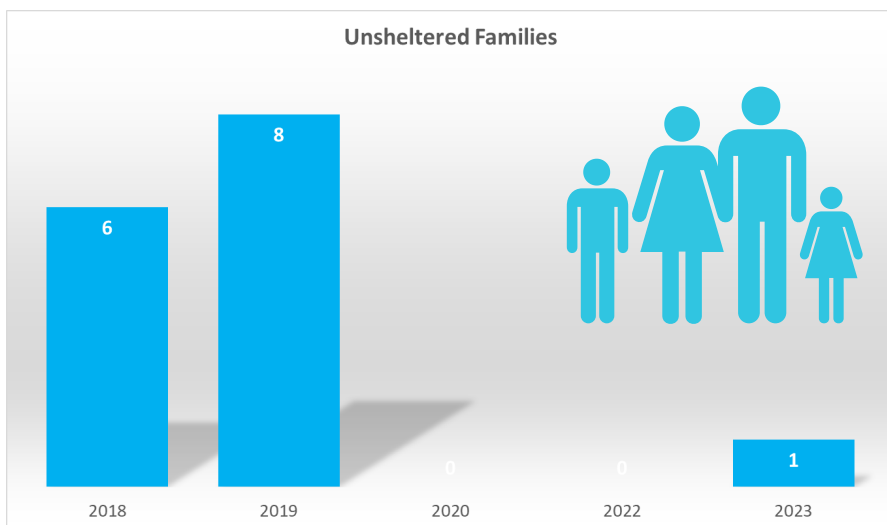


- Permanent supportive housing and a Housing First approach through the HUD-Veterans Affairs Supportive Housing (HUD-VASH) program, which combines Housing Choice Voucher (HCV) rental assistance for homeless Veterans with case management and clinical services provided by the Department of Veterans Affairs (VA). VA provides these services for participating Veterans at VA medical centers (VAMCs) and community-based outreach clinics;
- Rapid Re-Housing and a Housing First approach through the Supportive Services for Veteran Families (SSVF) Program, which provides supportive services to very low-income Veteran families that are currently in or transitioning to permanent housing. SSVF is designed to rapidly re-house homeless Veteran families and prevent homelessness for those at imminent risk due to a housing crisis; and
- City will prioritize veterans for the Shelter Plus Care (SPC) Rental Assistance Voucher program and coordinate affordable housing placements with Veterans Village.

**Recommendation 5: Children**  
**Develop, adopt, and implement a zero-tolerance policy for children living on the streets, in vehicles, and other places not meant for human habitation.**

City of Glendale functionally ended family homelessness in the City. Continuing to utilize the Emergency Housing Vouchers (EHV) to move families experiencing homelessness into affordable housing is imperative. Additionally, it is vital to continue implementing a Rapid Re-housing (RRH) approach for families that focuses resources on helping families and

individuals quickly move out of homelessness and into permanent housing. Services to support RRH include housing search and landlord negotiation, short-term financial and rental assistance, delivery of home-based housing stabilization services and connection to community support services as needed.

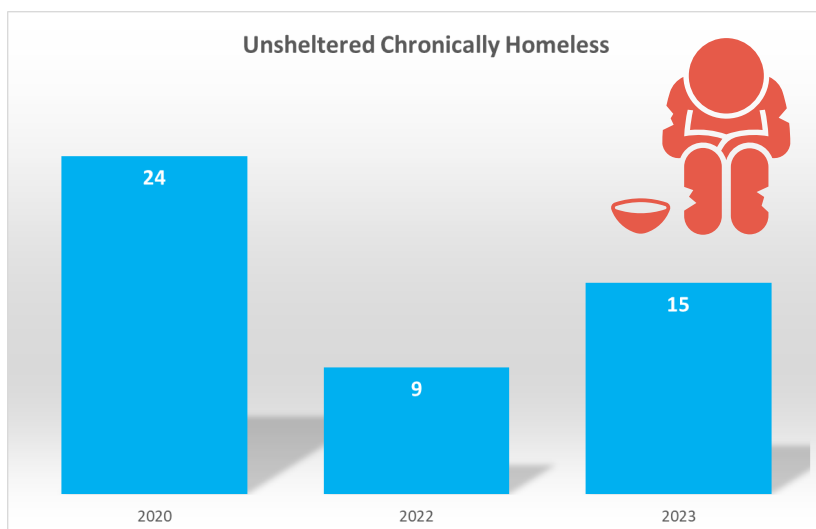


**Recommendation 6: Housing First Approach for Chronically Homeless**  
**Completely align with a Housing First Model and low-barrier approach for chronically homeless individuals and families.**

Aligning a coordinated system with a Housing First and low barrier approach will help chronically homeless households obtain and maintain permanent affordable housing, regardless of their service needs or challenges, by removing barriers that hinder them from obtaining and maintaining permanent affordable housing.

Chronically homeless persons can achieve stability in permanent housing, regardless of their service needs or challenges, if provided with appropriate levels of services. Through

this approach, barriers are removed that have hindered homeless persons from obtaining housing such as too little income or no income; active or history of substance use; criminal record, with exceptions for state mandated restrictions, and history of having been or currently a victim of domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement). Furthermore, through this approach, barriers that have hindered homeless persons from maintaining housing are removed, such as failure to participate in supportive services; failure to make progress on a service plan; loss of income or failure to improve income; and fleeing domestic violence.



## 07 Conclusion

The 2023 City of Glendale Homeless Count and Survey was a collaborative effort between City of Glendale, the Glendale Homeless Continuum of Care, homeless alumni, and community volunteers. The Count was performed using HUD-recommended practices for counting and surveying the homeless population. The project team was able to stay consistent with methods used in previous PIT counts and incorporated several enduring innovations, including HMIS data extrapolation, geospatial positioning-enabled smartphone application and interactive online route planning and management, adding value and accuracy to the effort. Additionally, the count planning team took a large step in reorienting the staffing of teams to include homeless outreach staff and persons with lived experience to complement the volunteer-centric approach used in previous years. This added valuable expertise into the street count process and will be a key component of future efforts.

Data summarized in this report provide many valuable insights about the unique and diverse experiences of homelessness in Glendale. Key insights gleaned through the Count and Survey include:

- The number of people experiencing unsheltered homelessness decreased 14% from 2022 to 2023. This decrease corresponds with a significant increase in housing and shelter resources.
- Total homelessness (sheltered and unsheltered) decreased by 13% from 2022 to 2023
- Over 44% of unsheltered (34 out of 77) respondents experienced homelessness for the first time in the past year. Data suggests the importance of earlier intervention in prevention efforts.
- The top two self-reported reasons for homelessness were economic with unemployment and Rent Increases.
- Health issues continue to be a prevalent problem with 50% having a disabling condition.
- The number of chronically homeless people decreased by 23% from 2022 to 2023, and the population was less chronically homeless in 2023 at a rate of 12% compared to 14% in 2022.

In summary, the 2023 Glendale Homeless Count and Survey provides valid and useful data that plays a critical role in developing a more comprehensive profile of those experiencing homelessness. Data presented in this report fulfill federal reporting requirements for the Continuum of Care, and will continue to inform service planning, and policy decision-making by local planning bodies over the year to come.

## Appendix A – Definitions

The Department of Housing and Urban Development (HUD) has provided additional guidance and definitions with regards to collecting data regarding disability status for the annual homeless count.

Volunteers administering the survey know that these questions must be asked of all persons being surveyed and it is completely voluntary whether persons respond to questions about disability status.

Persons surveyed are informed prior to responding to any disability question that their response is voluntary and that their refusal to respond will not result in a denial of service.

According to CPD -15-010 Notice, “no questions should be posed regarding the nature or severity of the person’s disability (e.g., medical and health information). Where information is necessary to establish that an individual fit into a particular subpopulation of homeless (e.g., chronically homeless) the individual should be apprised of the criteria and asked whether he or she meets the definition.”

These definitions do not fully correspond to the program requirements of HUD funding streams and must only be used for the purposes of the HIC and PIT.

**Adults** – Persons age 18 and older.

**Adults with HIV/AIDS** – This population category of the PIT includes adults who have been diagnosed with AIDS and/or have tested positive for HIV.

**Adults with a Serious Mental Illness (SMI)** – This population category of the PIT includes adults with a severe and persistent mental illness or emotional impairment that seriously limits a person's ability to live independently. Adults with SMI must also meet the qualifications identified in the term for “disability” (e.g., “is expected to be long-continuing or indefinite duration”).

**Adults with a Substance Use Disorder** – This population category of the PIT includes adults with a substance abuse problem (alcohol abuse, drug abuse, or both). Adults with a substance use disorder must also meet the qualifications identified in the term for “disability” (e.g., “is expected to be long-continuing or indefinite duration”).

**Coordinated Entry System (CES)** - Is a comprehensive process that enables communities to assess and prioritize homeless individuals and families for housing and other support services based on their needs and vulnerability.

**Child** – Person under age 18.

**Chronically Homeless Person** – A person who has a disabling condition and either:

1. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; or
2. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least four separate occasions in the last 3 years where the combined length of time homeless in those occasions is at least 12 months.

Note: For purposes of PIT reporting, when a household with one or more members includes an adult or minor head of household who qualifies as chronically homeless, then all members of that household should be counted as a chronically homeless person in the applicable household type table. For example, if one adult in a two adult household is identified as chronically homeless, both adults should be counted as a chronically homeless person in the households without children category of the PIT count.



**Disabling Condition** – One of the following three conditions:

1. A physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that:
  - a. Is expected to be long-continuing or of indefinite duration;
  - b. Substantially impedes the individual's ability to live independently; and
  - c. Could be improved by the provision of more suitable housing conditions.
2. A developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); or
3. The disease of acquired immunodeficiency syndrome (AIDS) or any condition arising from the etiologic agency for acquired immunodeficiency syndrome (HIV).

**Note on Development Disability:** In general, the term “developmental disability” means a severe, chronic disability of an individual that—

- is attributable to a mental or physical impairment or combination of mental and physical impairments;
- is manifested before the individual attains age 22;
- is likely to continue indefinitely;
- results in substantial functional limitations in 3 or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, economic self-sufficiency; and reflects the individual’s need for a combination and sequence of special, interdisciplinary or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.

**Emergency Housing Voucher:** is a type of rental assistance voucher provided by the U.S. Department of Housing and Urban Development (HUD) to help individuals and families who are experiencing homelessness, at risk of homelessness, or fleeing domestic violence. EHV’s are a form of short-term assistance and can be used for up to 24 months. The vouchers can be used to help pay for rent in a market-rate apartment or other approved housing unit. EHV’s are typically distributed to local housing authorities or other service providers who then administer the vouchers to eligible households.

**Parenting Youth** – A youth who identifies as the parent or legal guardian of one or more children who are present with or sleeping in the same place as that youth parent, where there is no person over age 24 in the household.

**Parole** – the release of a prisoner temporarily (for a special purpose) or permanently before the completion of a sentence, on the promise of good behavior

**Probation** – is the suspension of a jail sentence that allows a person convicted of a crime the chance to remain in the community, instead of going to jail. Probation requires that you follow certain court-ordered rules and conditions under the supervision of a probation officer.

**Survivors of Domestic Violence** – This population category of the PIT includes adults who are currently experiencing homelessness because they are fleeing domestic violence, dating violence, sexual assault, or stalking.

**Unaccompanied Youth** – Unaccompanied youth are persons under age 25 who are not accompanied by a parent or guardian and are not a parent presenting with or sleeping in the same place as his/her child(ren). Unaccompanied youth are single youth, youth couples, and groups of youth presenting together as a household.

**Veteran** – This population category of the PIT includes adults who have served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty.

**Victim Service Provider** – A private nonprofit organization whose primary mission is to provide services to survivors of domestic violence, dating violence, sexual assault, or stalking. This term includes rape crisis centers, battered women’s shelters, domestic violence transitional housing programs, and other programs.

**Youth** – Persons under age 25. HUD collects and reports youth data based on persons under 18 and persons between ages 18 and 24.