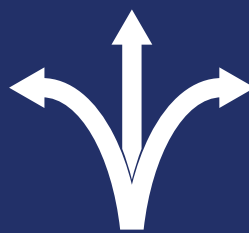# SERVICE PATHWAYS

of Homelessness Service Utilizers on Oʻahu, 2016-2020

Dec. 7, 2020

EXECUTIVE SUMMARY

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ABOUT THE REPORT

Commissioned by the City of Honolulu Mayor's Office of Housing and Partners in Care (PIC), this report describes the characteristics of individuals who used homelessness services on Oʻahu between July 1, 2016 and June 30, 2020. It also outlines differences in program types and exit destinations by these characteristics. Data consisted of Homeless Management Information System data provided by PIC. This data included program and assessment records for Oʻahu homelessness services. This reports aims to use these findings to inform homelessness services and policy on Oʻahu.

SERVICE SYSTEM

The homelessness service system on Oʻahu consists of cross-sector agencies and is coordinated by PIC, the HUD-designated Continuum of Care agency. Individuals enter the system by completing an assessment that prioritizes them for services based on vulnerability, which is assessed by prevalence of self-reported "disabling conditions" (e.g., mental illness, chronic illness, etc.). Individuals with higher scores (i.e., higher vulnerability), are prioritized for more comprehensive services, such as **permanent supportive housing services** that offer housing with wrap-a-round case management. Those with lower scores qualify for services like **rapid rehousing** that place individuals into quickly into housing with short- or medium-term rental assistance or **homeless prevention** that also provides short- or medium- term assistance to prevent individuals at-risk of losing their housing from becoming homeless. Once assessed, individuals are placed into services as they become available.

The purpose of this investigation was to understand the characteristics of homelessness service utilizers and how these characteristics are associated with program type and outcomes.
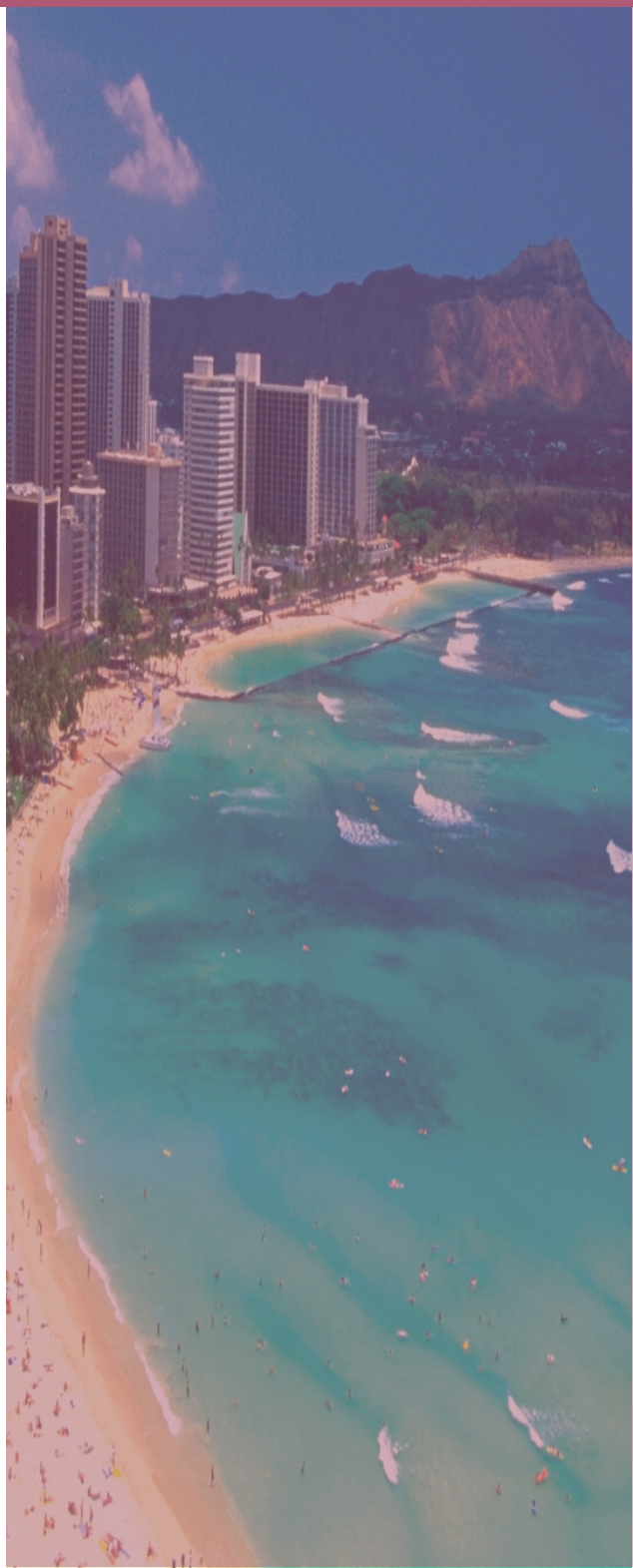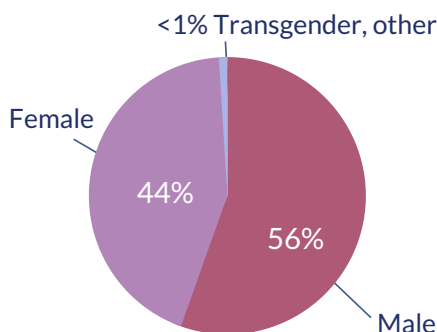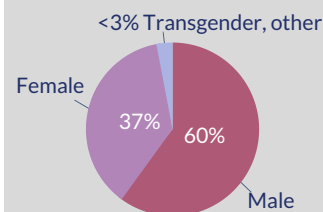
SERVICE UTILIZERS, 2016-2020

34,463 people enrolled in services or received assessment on Oʻahu between July 1, 2016 & June 30, 2020, 73% of which were adults and 27% of which were children. The majority were male, Native Hawaiian or Other Pacific Islander (NHPI), with an average adult age of 43.

Service utilizers roughly reflected the racial breakdown of individuals counted in the most recent Point-in-Time (PIT) Count (PIC, 2020) but were more likely to be female. Service utilizers were less likely than individuals in the PIT Count to report disabling conditions, like mental illness or substance use.
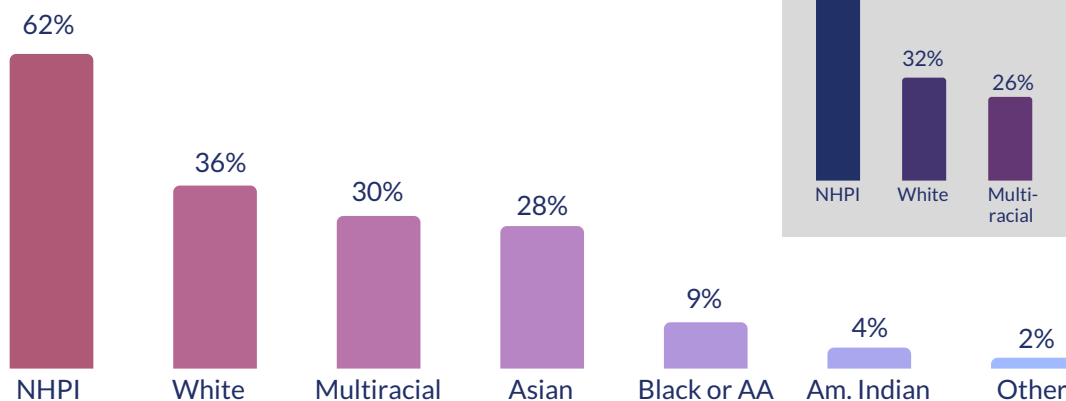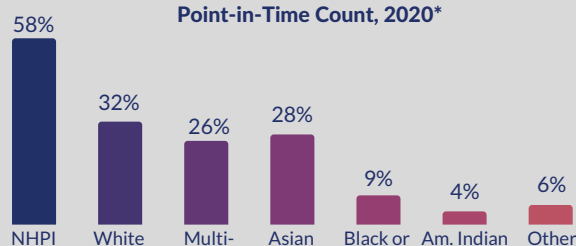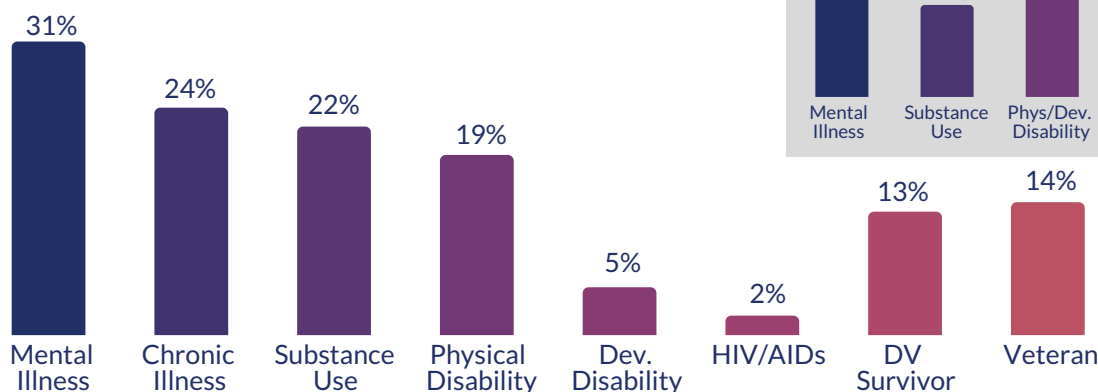
Service Utilizer Gender

Female 44%
Male 56%
<1% Transgender, other

Point-in-Time Count, 2020*

Female 37%
Male 60%
<3% Transgender, other

Service Utilizer Race

NHPI 62%
White 36%
Multiracial 30%
Asian 28%
Black or AA 9%
Am. Indian 4%
Other 2%

Point-in-Time Count, 2020*

NHPI 58%
White 32%
Multi-racial 26%
Asian 28%
Black or AA 9%
Am. Indian 4%
Other 6%

Service Utilizer Adults' Characteristics

Mental Illness 31%
Chronic Illness 24%
Substance Use 22%
Physical Disability 19%
Dev. Disability 5%
HIV/AIDs 2%
DV Survivor 13%
Veteran 14%

Point-in-Time Count Adults, 2020*

Mental Illness 36%
Substance Use 27%
Phys/Dev. Disability 40%
HIV/AIDs 2%
DV Survivor 24%
Veteran 14%
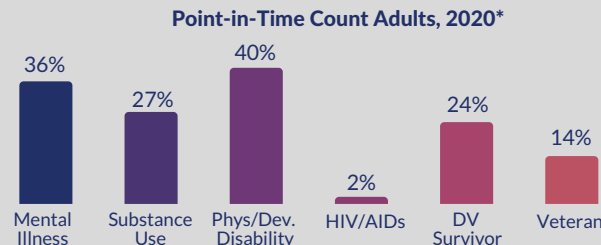
Service Utilizers by Household Type

45% of service utilizers were members of households with adults and children, compared to just 27% of individuals in the 2020 Point-in-Time Count, suggesting that households with adults and children were more likely to enroll in services than adult-only households.
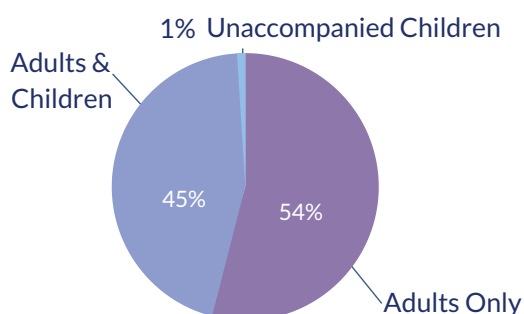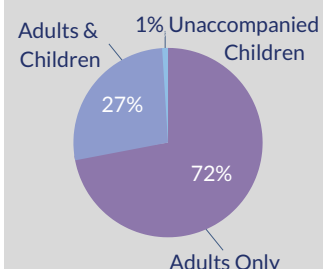
*Percentages exclude missing data. See 2020 PIT report appendices.

Adults & Children 45%
Adults Only 54%
1% Unaccompanied Children

Point-in-Time Count, 2020

Adults & Children 27%
Adults Only 72%
1% Unaccompanied Children

TYPES OF SERVICES

Legend:
- Only Children Households
- Children + Adults Households
- Adult Only Households

Bar chart values:
- Assessment: 25%
- Homeless Prevention: 19%
- Outreach: 16%
- Rapid Re-Housing: 14%
- Emergency Shelter: 12%
- Transitional Housing: 7%
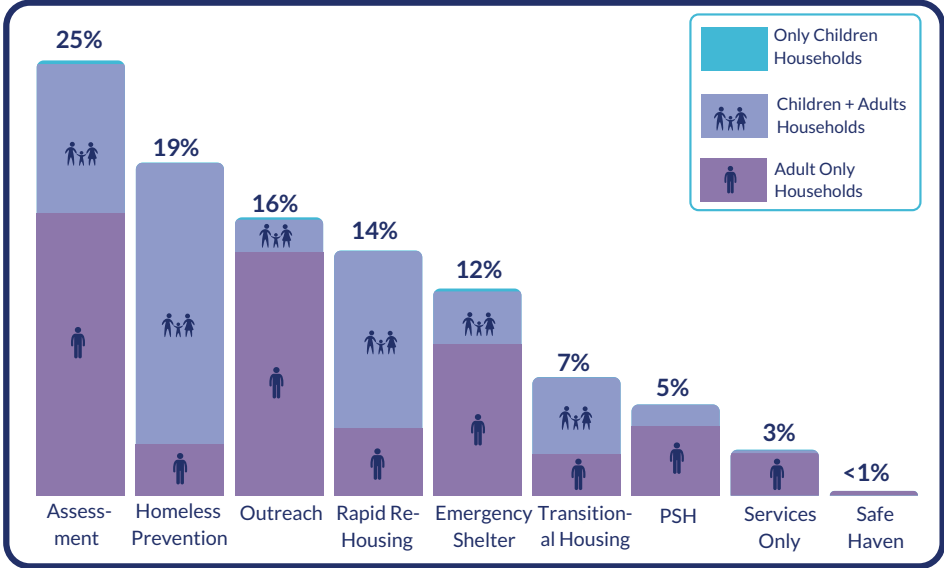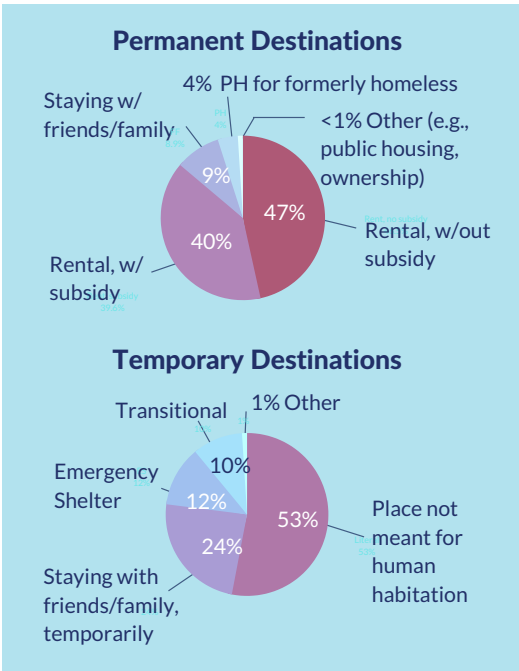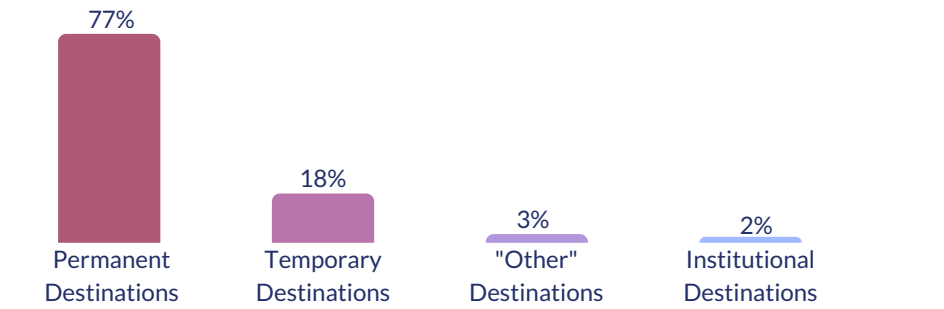- PSH: 5%
- Services Only: 3%
- Safe Haven: <1%

Of all service utilizers enrolled between July 1, 2016 and June 30, 2020, 75% were enrolled in direct services, and 25% were enrolled in assessment, awaiting placement, at latest program enrollment. The most common direct service was homeless prevention (HP), with 19% enrolled, followed by 16% enrolled in outreach, and 14% in rapid re-housing (RRH) services. Only 5% of all service utilizers were receiving permanent supportive housing (PSH). Individuals in households with adults & children were more likely to be enrolled in HP & RRH services than adult-only & children-only households.

EXIT DESTINATIONS

Of the 27,924 people who have exited, 54% had exit data available. Of those with exit data, the vast majority exited to permanent destinations. However of those individuals, only 45% received a housing subsidy or assistance upon exit (e.g., vouchers, subsidies, or PSH). Of the 18% who exited to temporary destinations, a slight majority exited to places not meant for habitation.
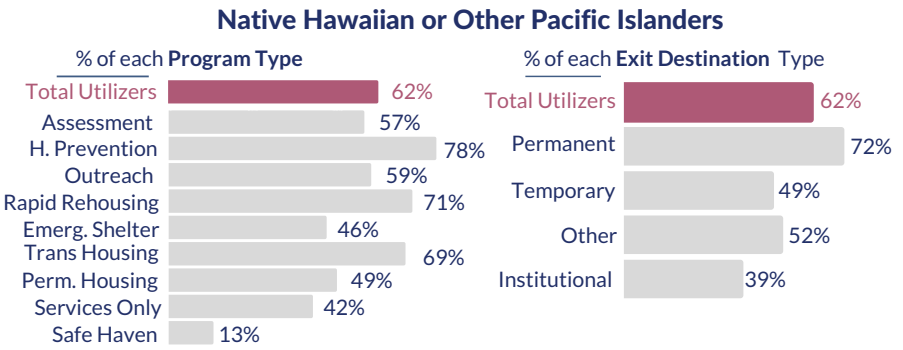
Notably, individuals in HP & RRH programs were more likely to exit to permanent destinations. Thus, families with adults & children were more likely to be enrolled in HP & RRH programs and to exit to permanent destinations than adult-only or children-only households.

Exit destination bar chart:
- Permanent Destinations: 77%
- Temporary Destinations: 18%
- "Other" Destinations: 3%
- Institutional Destinations: 2%

Permanent Destinations
- 4% PH for formerly homeless
- <1% Other (e.g., public housing, ownership)
- 47% Rental, w/out subsidy
- 40% Rental, w/ subsidy
- 9% Staying w/ friends/family

Temporary Destinations
- 1% Other
- Transitional: 10%
- Emergency Shelter: 12%
- Staying with friends/family, temporarily: 24%
- Place not meant for human habitation: 53%

RACIAL EQUITY

Individuals identifying as Native Hawaiian or Other Pacific Islander (NHPI) were over-represented in HP, RRH, & transitional housing and were under-represented in PSH. Conversely, individuals identifying as White or Asian were over-represented in PSH. Individuals identifying as NHPI also were slightly more likely to exit to permanent destinations compared to their overall representation in service utilizers and were less likely to exit to temporary, "other", or institutional destinations. Those identifying as White were more likely to exit to temporary, other, & institutional settings.

A smaller percentage of NHPI service utilizers reported disabling conditions, domestic violence, & veteran status compared to overall utilizers, whereas a larger percentage of White service utilizers reported these characteristics. Higher rates of reported disabling conditions may explain why White service utilizers were more likely to be prioritized for PSH, which requires higher vulnerability scores.

Native Hawaiian or Other Pacific Islanders

% of each **Program Type**
- Total Utilizers: 62%
- Assessment: 57%
- H. Prevention: 78%
- Outreach: 59%
- Rapid Rehousing: 71%
- Emerg. Shelter: 46%
- Trans Housing: 69%
- Perm. Housing: 49%
- Services Only: 42%
- Safe Haven: 13%

% of each **Exit Destination** Type
- Total Utilizers: 62%
- Permanent: 72%
- Temporary: 49%
- Other: 52%
- Institutional: 39%

CONCLUSIONS & IMPLICATIONS

Compared to the general homeless population, homelessness service utilizers since July 1, 2016 have been more likely to be individuals in families and to identify as female.

These findings likely reflect national and local policies that have prioritized families experiencing homelessness (Shinn & Khadduri, 2020). Indeed, Oʻahu has seen reductions in the number of homeless individuals in families since 2015 (see PIC reports).

These reductions coupled with the finding that families were more likely to exit to permanent housing suggest **Oʻahu's homelessness service system has been successful in serving families** by helping them find (or maintain) permanent housing.

These findings imply that similar results could be achieved for adult-only and children-only households if the system is provided the resources to do so. Given recent findings that unsheltered individuals are primarily comprised of newly-homeless singles (Pruitt & Barile, 2020), extending HP and RRH services to these groups may prevent them from falling (further) into homelessness.

Given the high rates of disabling conditions among individuals in adult-only households, it is imperative that PSH programs also be expanded. Only 4% of latest program enrollments were PSH enrollments, while 68% of adults without children with available data reported having at least one disabling condition.

Because HP and RRH programs are designed for people with fewer vulnerabilities, participants' high success rates in these programs may be due to their being more capable of quickly getting back on their feet. However, it stands to reason that people who are now highly vulnerable could have succeeded in HP or RRH if provided services earlier in their homelessness crises.

While individuals identifying as NHPI are over-represented in the homeless population (Pruitt & Barile, 2020), these individuals are receiving services at a rate comparable to their percentage of the homeless population, suggesting equity for this group in overall connection to services.

However, disparities exist in types of services received. Individuals identifying as NHPI are under-represented in PSH programs, while individuals identifying as White or Asian are over-represented. Given that individuals who score higher on the vulnerability assessment are prioritized for PSH, and individuals identifying as NHPI were less likely to report these conditions, it is possible that the current assessment tool may not be capturing the unique vulnerabilities and experiences of NHPIs.

A recent study suggests that the current assessment tool is biased toward vulnerabilities that people identifying as White are more likely to endorse (Wilkey et al., 2019). More research on NHPI vulnerabilities and a new assessment strategy are likely needed in order to reduce NHPI homelessness and racial disparities in services.

NEXT STEPS

We recommend extensive investment in ending and preventing homelessness for individuals in adult-only households, who make up the majority of the homeless population on Oʻahu. In particular, we suggest:
- the expansion of PSH programs for single adults with disabling conditions and
- the extension of RRH and HP to single adults who may be at-risk of or newly homeless.

Notably, an investigation of the service system's capacity for such an effort is warranted.

To free up space in these prevention programs, investment in affordable housing is needed. These programs are heavily utilized because many individuals on Oʻahu pay large percentages of their incomes to rent, leaving many people one paycheck away from homelessness. Less people living on the brink of homelessness will free up space in these programs and free up funds for PSH for more vulnerable individuals.

To reduce racial disparities in program enrollments, research is needed to understand the unique vulnerabilities of individuals identifying as NHPI. We also encourage PIC to consider using a new coordinated entry assessment tool with proven measurement invariance (i.e., shows no racial bias).

Future research should investigate service use trends over time to better understand homelessness service system outcomes, particularly exit destinations. For example, researchers should investigate if individuals and families who exit to permanent housing tend to remain housed or return to the system.

Due to the large amounts of missing exit destination data, it is possible that individuals with missing data were more likely to have exited to unsheltered destinations. Thus, the percent of positive destinations reported is likely over-estimated. We recommend PIC attempt to capture more complete exit data from all utilizers and that future research investigate unmet needs for individuals who fall out of services.