

2017 Guam Homeless Point-In-Time Count Report

Prepared by:

Guam Homeless Coalition and

The Guam Housing and Urban Renewal Authority

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Planning Stages

We thank the GHC members from the following agencies that assisted in the planning of this year's Point-In-Time (PIT) Count: Catholic Social Services, Department of Education, Department of Labor, Department of Public Health and Social Services, Guam Community College, Guam Legal Services, Guma Mami Inc., Oasis Empowerment Center, Sanctuary Inc., The Salvation Army, University of Guam, U.S. Department of Veteran Affairs, and WestCare Pacific Islands. We especially thank Angelina Cruz from the Department of Education Head Start Program and Frank Tajeron from The Salvation Army for coordinating the recruitment and scheduling of volunteers.

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PIT Count Day

We thank everyone who volunteered their time, energy, and personal vehicles towards this endeavor. In total, there were 274 volunteers (Appendix VI).

Lastly, we thank the following businesses, organizations, and individuals that donated items which were distributed to homeless persons surveyed on the day of the Count and/or who donated food to feed the volunteers.

2017 PIT Count Report

- Academy of Our Lady of Guam
- Advance Management Inc.
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- Miracle Assembly of God Church
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- Pacific One Distributors
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Introduction

Background

As the collaborative applicant for Guam's Continuum of Care (CoC), GHURA is responsible for the administration of CoC funds and thus, provides technical assistance and guidance on its use. GHURA is in charge for the development of Consolidated Plan in consultation with the CoC to gather information to establish priority needs and goals that pertain to homelessness. GHURA continues to consult with the CoC to achieve its goals and objectives and collaborate on strategies for effectual use of funds as well as monitoring program implementation and performance.

Guam's Continuum of Care

As the local CoC, the GHC is the planning faction that coordinates housing and services for homeless individuals, families, and youth on Guam. The GHC is comprised of numerous Government of Guam agencies, non-profit organizations, businesses and individuals who work together to prevent homelessness; quickly re-house homeless individuals and families while minimizing the trauma and displacement it creates; promote access to and effect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.

Purpose of the PIT Count

The U.S. Department of Housing and Urban Development (HUD) mandates that all jurisdictions receiving Continuum of Care (CoC) Program grant funds conduct a Homeless PIT Count every odd year. However, the GHC continues to conduct an annual PIT Count on the last Friday in January not only to fulfill the HUD requirement for federal funding for a variety of homeless housing and supportive services through the CoC, but also in order to understand the changing trends, extent, and nature of homelessness on Guam. A survey tool is used to determine the number of unsheltered and sheltered homeless persons in Guam on a single night and gather information directly from individuals and families experiencing homelessness about their needs. Information is used to discover specific characteristics of our island's homeless population to include ethnicity, gender, reasons for becoming homeless, barriers to obtaining employment, and sources of income. Specific subpopulations are also identified including veterans, chronic homeless individuals and families, victims of domestic violence,

those suffering from chronic substance abuse, and those with severe mental illness. The PIT Count results and data gathered from CoC service providers is then used to inform the strategic planning efforts of the GHC to address identified needs of the homeless population and make progress toward goals to reduce, end, and prevent homelessness. This year’s Guam Homeless PIT Count was conducted on January 27, 2017.

Point-in-Time Count Summary

Summary data on the number of homeless persons identified on the day of the Count is categorized by total households and persons who are unsheltered or are residing in shelters, nighttime residence of unsheltered homeless, age, ethnicity, employment status, homeless veterans, village of unsheltered homeless, and as a final point the summary data of households and persons in emergency shelters on island. Starting this year, GHC will no longer include homeless persons in transitional housing due to HUD’s homeless definition *“Beds in institutional settings not specifically dedicated for persons who are homeless such as detox facilities, emergency rooms, jails, and acute crisis or treatment centers should not be included in the Housing Inventory Chart (HIC).* Both transitional housing shelters on island are treatment centers for persons with substance abuse problems – Lighthouse Recovery Center and Oasis Empowerment Center.

Homeless Households & Persons

The 2017 PIT Count found a total of 259 households with a combined total of 852 adults and children. Households with only adults have an average size of 1.5 while households with adults and children have an average size of 5.4. Of the 259 households identified, 55% were households with adults only. There were no children only households identified.

Figure 1: Summary of Households & Persons			
Total Households & Persons	Unsheltered	Sheltered	Total
Households with Adults only	127	15	142
Persons in Households with Adults only	198	17	215
Households with Adults and Children	100	17	117
Persons in Households with Adults and Children	567	70	637
Households with only Children	0	0	0
Persons in Households with only Children	0	0	0

Figure 1: Summary of Households & Persons			
Total Households & Persons	Unsheltered	Sheltered	Total
Total Households	227	32	259
Total Persons	765	87	852

Nighttime Residence of Homeless Households

Of the total households identified, there were 110 households or 42% with a nighttime residence described as “not adequate” due to missing walls, roof, floor, door, and/or windows. There were also 117 households or 45% found to be residing in places not meant for human habitation such as tents, abandoned buildings, and parks.

Figure 2: Detail of Nighttime Residence by Households				
Description of Nighttime Residence	Male Head of Household	Female Head of Household	Transgendered Male to Female Head of Household	Total
Not Adequate	42	68	0	110
Missing Walls	26	28	0	54
Missing Roof	24	39	0	63
Missing Floor	20	30	0	50
Missing Door	19	38	0	57
Missing Windows	28	46	0	74
Description of Nighttime Residence	Male Head of Household	Female Head of Household	Transgendered Male to Female Head of Household	Total
Not Meant for Human Habitation	82	34	1	117
Tent/Canopy	15	7	0	22
Park	10	2	0	12
Bus Stop / Shelter	4	4	0	8
Stairwell	1	2	0	3
Vehicle	2	2	0	4
Container	4	2	0	6
Abandoned Building	14	5	1	20
Beach	4	1	0	5
Workplace	8	0	0	8
Cave	0	0	0	0
Other	26	12	0	38

Homeless Persons by Age

According to this year’s Count, 350 individuals or 41% of all persons counted, inclusive of those residing in Guam’s shelters, are below the age of 18. Of those below the age of 18,

17% are between the ages from birth to 5 years old, 10% were elementary school-age, 10% were in middle school-age, and 4% were in high school-age. In addition to this, 10% of all homeless individuals are between the ages of 18 and 24 and 50% are over the age of 24.

Figure 3: Homeless Persons by Age			
Homeless By Age	Unsheltered	Sheltered	Total
Total Under 18	303	47	350
0 to 5	117	25	142
6 to 10	76	9	85
11 to 15	77	9	86
16 to 20	33	4	37
Total Between 18 and 24	80	4	84
18 to 20	36	0	36
21 to 24	44	4	48
Total Over 24	382	36	418
25 to 30	81	11	92
31 to 35	46	7	53
36 to 40	48	7	55
41 to 45	47	4	51
46 to 50	53	2	55
51 to 55	33	2	35
56 to 60	32	2	34
61 to 65	23	1	24
66 +	19	0	19
Total	765	87	852

Homeless Persons by Ethnicity

Chamorros from Guam represented the highest number of homeless persons at 47% of the total count. In addition, homeless persons from the ethnicities of the other islands of Micronesia in totality is represented 41% of the total count. These islands include Chuuk, Pohnpei, Yap, CNMI, Palau, and Kosrae.

Figure 4: Homeless Persons by Ethnicity			
Ethnic Groups	Unsheltered	Sheltered	Total
Chamorro – Guam	351	19	370
Chuukese	174	34	208
Other/Mixed	66	7	73
Pohnpeian	38	8	46
Yapese	33	0	33

Ethnic Groups	Unsheltered	Sheltered	Total
Chamorro – CNMI	32	1	33
Filipino	28	5	33
Palauan	25	0	25
Caucasian	5	8	13
Black	3	0	3
Kosraean	6	5	11
Korean	2	0	2
Japanese	1	0	1
Vietnamese	1	0	1

Unsheltered Homeless by Village

The villages of Dededo, Hagatna, Tumon, Agat and Yigo were the top five villages with the highest count of households without children. The villages of Dededo and Yigo were the top two villages with the highest count of households with children. The following figure provides a detailed breakdown of the various household categories and total number of individuals in each category by village.

Village	Households (HH) Without Children	Total Persons in HH Without Children	HH with Children	Total Persons in HH with Children	Total Households	Total Persons
Hagatna	32	39	4	15	36	54
Agana Heights	2	4	2	11	4	15
Agat	11	19	4	21	15	40
Barrigada/Tiyan	1	1	1	9	2	10
Chalan Pago	3	4	3	21	6	25
Dededo	34	64	53	313	87	377
Harmon	2	2	0	0	2	2
Inarajan	0	0	1	3	1	3
Mangilao	7	17	5	24	12	41
Piti (Nimitz Hill)	0	0	1	4	1	4
Sinajana	1	2	1	2	2	4
Tamuning	4	6	4	17	8	23
Tumon	18	19	1	6	19	25
Yigo	9	17	16	96	25	113
Yona	0	0	3	18	3	18
Total	127	198	100	567	227	765

Sheltered Homeless by Site

The following figure provides a detailed breakdown of the number of households and the total number of sheltered homeless at each of the island's emergency homeless shelters that provide temporary housing. These emergency shelters include the following:

- Alee Shelter – for women and children who are victims of domestic violence;
- Guma San Jose Emergency Homeless Shelters – for women and families with no specific sub-population such as substance abuse, disability or youth; for single men with no specific sub-population; as well as for households with children whose shelter stay is extended for up to six months with no specific sub-population;
- Sanctuary COED – for youth under the age of 25; and
- US Veterans Initiative Emergency Housing – for single male veterans only.

Figure 6: Sheltered Homeless by Site		
Emergency Shelters	Total Households	Total Persons
Alee	7	19
Guma San Jose Homeless Shelters	22	65
Sanctuary COED	0	0
US Veterans Initiative Emergency Housing	3	3

Homeless Veterans

Of the 24 homeless veterans identified this year, 16 or 66% were Chamorro and the remaining 34% comprise mixed race ethnicity, Caucasian, Black and Filipino. Nine or 37% are over age 60 years. Five or 21% of these homeless veterans are experiencing issues related to severe mental illness, substance abuse, and domestic violence.

Figure 7: Categories of Homeless Veterans			
Ethnic Breakdown of Homeless Veterans	Unsheltered	Sheltered	Total
Chamorro	15	1	16
Filipino	1	0	1
Black	2	0	2
Caucasian	1	1	2
Mixed Race	1	2	3
Sub Populations of Veterans	Sheltered	Unsheltered	Total
Severe Mental Illness	0	3	3

Substance Abuse	0	1	1
HIV	0	0	0
Domestic Violence	1	1	2

Figure 8: Age Breakdown of Homeless Veterans			
Veteran Age	Total	Veteran Age	Total
21-25	1	46-50	0
26-30	5	51-55	1
31-35	2	56-60	5
36-40	0	61-65	3
41-45	1	66+	6

Comparative Analysis

This section provides a comparative analysis of PIT Count data from 2015 through 2017 to identify demographics of Guam’s homeless, potential trends and contributing factors that influence the outcome of the PIT survey.

Homeless Households and Persons by Year

The total number of homeless households and persons identified has decreased each year from 2015 through 2017 as is evident in the data shown below. The 2017 PIT Count data reflects a significant decrease of 21.47% from the 2016 PIT Count. The number of households with only adults was found to now be higher than the number of households with adults and children. This is a contrast from the 2016 PIT Count which found an equal number of households with only adults and households with adults and children. In addition, the overall household size for both categories has increased from the 2016 PIT Count.

Figure 9: Comparison of Total Homeless Households and Persons by Year			
	2015	2016	2017
Total Households	388	317	259
Total Persons	1280	1085	852
Percentage Difference	5.6%	15.23%	21.47%

One factor contributing to the decrease in 2017 is a change in the definition of who is NOT to be included in the PIT Count. The changes exclude individuals residing in permanent supportive housing projects, in locations not listed on the Homeless Inventory Count (HIC), or in housing legitimately rented or owned, including rental housing with Rapid Re-Housing assistance. This change excluded a large number of individuals previously counted who live in the Gil Baza and Zero Down Subdivisions as well as those on Chamorro Land Trust. These areas were included in previous PIT Counts due to meeting the definition of inadequate housing. However, all residents of Gil Baza and Zero Down own the land they live on, and most residing on Chamorro Lands has legitimate land leases.

A second factor contributing to the decrease was that survey teams were not able to locate homeless individuals in known sites including newly relocated sites. Most construction projects within the village of Hagatna, which has a high number of street homeless, were completed and debris cleared which opened up space previously occupied by the street

homeless. Concurrently, Hagatna landlords were also ‘cleaning up’ their respective sites and enforcing removal actions which resulted in clusters of street homeless having to relocate to other sites. As such, the street homeless became a more mobile group seeking different sites for their sleeping site.

Third, the GHC was actively placing families with children and vulnerable individuals in housing through the Emergency Solutions Grant, or in permanent housing solutions such as public housing placements and use of Family Unification Program or shelter plus care vouchers.

Households with Adults and Children by Year

In 2017, households comprised of at least one adult and one child represented 45% of the total homeless count. This is a 15% decrease from the 2016 PIT Count which found 158 such households or 25.95% of that year’s total homeless count.

The total number of homeless persons this year was 637 with 350 or 55% comprised of minor children below age 18. This is a decrease from the 2016 PIT Count which found 858 homeless individuals (20% decrease) to include 469 children below age 18 (17% decrease). A contributing factor to the steady decrease is targeted efforts by the coalition to provide housing placement using ESG assistance initially and concentrating client efforts to seek gainful employment and/or improve earnings.

Figure 10: Comparison of Total Households with Adults and Children by Year			
	2015	2016	2017
Households with Adults and Children	187	158	117
Persons in Households with Adults and Children	932	858	637
Of these Persons, Number of Below Age 18	519	469	350

Households with Adults Only

In 2017, households comprised of adults only, either as a single adult individual or a couple, represented 55% of the total homeless count of households and 25% of total homeless persons. This is a decrease from both 2015 and 2016. Most if not all of this population is comprised of street homeless individuals.

A factor in the status quo for adult-only households can be attributed to individuals not wanting to seek permanent housing, including seeking employment or treatment as appropriate.

Figure 11: Comparison of Households with Adults Only by Year			
Total Households & Persons	2015	2016	2017
Households with Adults only	200	158	142
Persons in Households with Adults only	347	226	215

Homeless Persons by Gender Identification

Since 2015, the number of persons who identify as female has been lower than the number of persons who identify as male by less than 10%. Beginning in 2016, HUD added transgendered identification for which there was one individual. In 2017, HUD added a new option wherein individuals surveyed can opt to not identify as either male, female or transgender. However, there has been one person who identified as transgender in each of the subsequent years from 2015. Although the Coalition has not experienced challenges with housing assistance due to gender, the Coalition may have to project suitable housing placement or implement appropriate accommodations to ensure the safety of the homeless individual.

Figure 12: Homeless by Gender Identification			
	2015	2016	2017
Male	671	555	442
Female	609	529	409
Transgendered Male to Female	0	1	0
Transgendered Female to Male	0	0	0
Transgender	0	0	1
Don't identify as male, female or transgender	0	0	0
Unknown	0	0	0
Totals	1280	1085	852

Homeless Persons by Ethnicities

The highest number of homeless persons continue to be from the Chamorro and Chuukese populations. In 2015, the combined Chamorro population comprised the highest number of homeless persons followed by the Chuukese population. These numbers were reversed in 2016.

Concurrently for the 2016 PIT count, we included a subset distinguishing Chamorros from Guam and CNMI. During 2016, the homeless shelters were identifying Chamorro homeless who were residents of CNMI and relocated to Guam following government

bankruptcy and depression. The pattern continued in this year's 2017 count with the Chamorro population making up the highest number of homeless persons. Chamorros from Guam and the CNMI comprised the largest number of homeless persons with a total of 403 individuals, followed by the Chuukese population at 208. However, the current number of Chamorro homeless persons has increased by 6% from 2016 while the number of Chuukese has significantly decreased by 57% within that same time period.

Figure 13: Comparison of Homeless Persons by Ethnicity			
Ethnicity	2015	2016	2017
Chamorro – Guam	536	354	370
Chuukese	369	454	208
Multi-Racial	66	52	73
Pohnpeian	81	88	46
Filipino	42	71	33
Yapese	94	33	33
Chamorro – CNMI		26	33
Palauan	58	42	25
Caucasian	9	9	13
Kosraean	7	1	11
Black or African American	3	4	3
Korean	2	3	2
Japanese	0	2	1
Vietnamese	0	1	1
Carolinian	5	5	0
American Indian / Alaskan Native	0	0	0
Marshallese	6	0	0
Hawaiian	0	0	0
Chinese	2	0	0
Unknown	0	0	0
Total	1280	1085	852

Unsheltered Homeless by Village

In 2017, the top five villages with the largest number of homeless households were Dededo, Hagatna, Yigo, Tumon and Agat. The villages of Dededo, Yigo and Hagatna have consistently ranked in the top three over the past years. The villages of Dededo and Yigo have the highest population density on the island, and Hagatna has been primarily the street homeless capital. The village of Tumon ranked fourth in 2017 and its homeless is comprised of

most if not all adult-only households. There is a growing number of homeless families on the beach side in the village of Agat resulting in it ranking fifth this year.

However, the number of homeless persons identified has decreased in Yigo with 384 persons identified in the 2016 Count and 113 identified this year. Hagatna continues to rank third among villages with 54 persons identified this year which is comparable to the 51 persons identified in 2016. Mangilao ranked fourth with 41 persons identified this year which is an increase from the 28 persons identified in 2016. Although not among the top four villages with the most identified homeless persons, it should be noted that there were only 10 persons identified in Barrigada this year which is a significant decrease from the 31 identified in 2016.

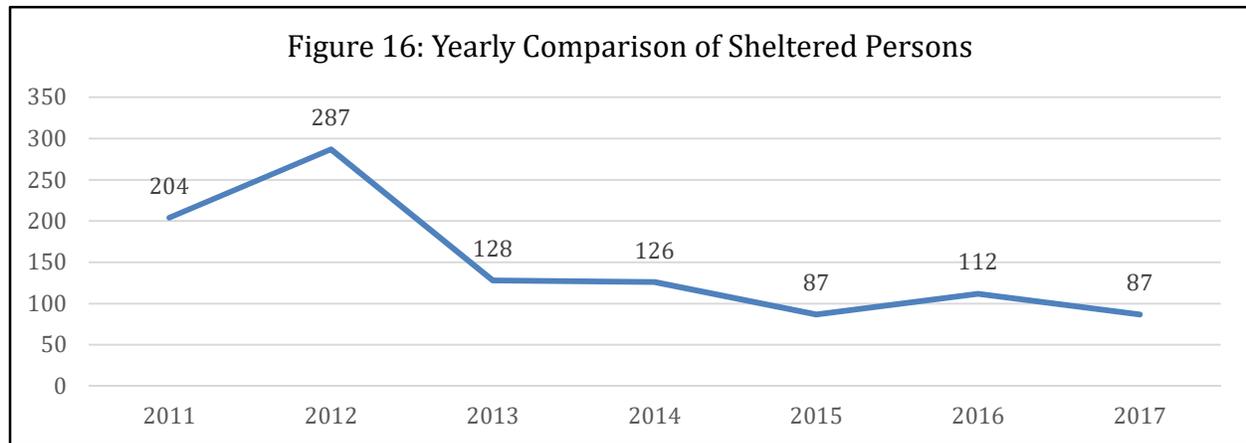
The table below reflects a comparison of the villages with the largest number of homeless households between 2015 through 2017. The figures reflect the number of homeless households and total homeless persons from that respective village.

Figure 14: Comparison of Top Five Villages for Unsheltered Homeless								
2015			2016			2017		
Village	Households	Persons	Village	Households	Persons	Village	Households	Persons
Yigo	92	407	Yigo	81	384	Dededo	87	377
Dededo	91	326	Dededo	72	306	Yigo	25	113
Mangilao	24	83	Hagatna	41	51	Hagatna	36	54
Yona	17	83	Agat	17	48	Mangilao	12	41
Hagatna	52	71	Barrigada	7	31	Agat	15	40

Sheltered Persons

In 2012, the number of sheltered persons peaked at 287 and then decreased by more than 55% the following year. Since 2013, the number of sheltered persons reflected in the annual PIT Count has fluctuated between 87 and 128. The count for 2017 was 87 sheltered homeless persons.

Figure 15: Yearly Comparison of Sheltered Homeless by Site			
Emergency Shelters	2015	2016	2017
Alee	6	17	19
Guma San Jose Main & Ordos Shelters	42	55	44
Guma San Jose Expansion Shelters	24	27	21
Sanctuary COED	1	1	0
US Vets	Not applicable	5	3
TOTAL	73	105	87



Chronically Homeless

Chronically Homeless Persons are identified in the PIT Count as persons who are homeless and live in a place not meant for human habitation, a safe haven, or in an emergency shelter; who have been living or residing in that place 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; and who has a disability. The chronically homeless population on Guam continues to be comprised predominantly of Chamorro and Chuukese ethnicities. Since 2015, the number of identified chronically homeless individuals has decreased by more than 25%. In that same period, the number of persons in chronically homeless families has decreased by more than 65%.

Figure 17: Ethnic Breakdown of Chronically Homeless Persons

Ethnic Groups	2015		2016		2017	
	Individuals	Persons in Families	Individuals	Persons in Families	Individuals	Persons in Families
Chamorro	12	75	6	14	10	36
Chuukese	5	24	6	20	7	1
Filipino	1	2	0	0	0	0
Chinese	2	0	0	0	0	0
Pohnpeian	0	0	0	2	0	0
Yapese	0	9	0	0	0	1
Kosraean	0	0	0	0	0	0
Caucasian	1	1	1	0	1	0
Black / African American	2	0	1	0	0	0
Multi-Racial	3	9	0	4	0	5
Native American	1	0	0	0	0	0
Palauan	0	5	0	0	0	0

Figure 17: Ethnic Breakdown of Chronically Homeless Persons						
Ethnic Groups	2015		2016		2017	
	Individuals	Persons in Families	Individuals	Persons in Families	Individuals	Persons in Families
Carolinian	0	1	0	0	0	0
Korean	0	0	1	0	1	0
Japanese	0	0	0	0	1	0
Total	27	126	15	40	20	44

Homeless Subpopulations

The homeless subpopulations is a subset of individuals who self-reported current conditions of diagnosis of severe mental illness, chronic substance abuse, or HIV/AIDS, or who self-identified as a veteran or victim of domestic violence. The subset of individuals with mental illness, substance abuse, and veterans have in general not varied substantially over the three-year period. These individuals are considered homeless by choice, are unemployed and not actively seeking work, and are mostly street homeless. The increase in chronically homeless individuals and families from 2016 can be attributed to families who leave shelter or temporary housing due to unemployment and not having income sufficient to pay rent. Most of these families were not actively seeking work.

Over the past three years, the following trends can be seen throughout the various homeless subpopulations:

- There number of identified persons with severe mental illness has decreased by 17% since 2015.
- The number of persons with chronic substance abuse issues has steadily increased by a little over 10% each year.
- There have been no persons identified with HIV/AIDS.
- The number of identified victims of domestic violence has decreased.
- There has been very little variance in the number of identified veterans.
- The number of chronically homeless individuals has decreased by over 18% since 2015.
- The number of chronically homeless families has decreased by almost 50% since 2015.

Figure 18: Comparison of Subpopulations for Sheltered and Unsheltered Persons									
Sub Populations	2015			2016			2017		
	Sheltered	Unsheltered	Total	Sheltered	Unsheltered	Total	Sheltered	Unsheltered	Total
Severely Mentally Ill	4	13	17	4	15	19	2	12	14
Chronic Substance Abuse	9	26	35	8	31	39	1	43	44
Persons with HIV/AIDS	0	0	0	0	0	0	0	0	0
Victims of Domestic Violence	11	11	18	12	15	27	9	5	14
Veterans	0	6	23	0	6	21	0	3	24
Chronically Homeless Households	0	58	58	0	23	23	0	8	8
Chronically Homeless Persons	0	153	153	0	55	55	0	44	44

Homeless Veterans

Guam is close to its goal of ending veteran homelessness. Although we find that there is an increase in homeless vets living in temporary shelters, successfully engaging this hard to reach population is a big step towards permanent housing placement. Veteran service providers are active participants in the Homeless Outreach Team. Eligible vets are immediately referred to the HUDVASH or SSVF programs. All others are referred to CoC-funded programs or the ESG program.

Barriers to Ending Homelessness

In order to meet the goal of preventing, reducing, and ending homelessness on our island, an analysis must be conducted of the various challenges which create barriers to moving individuals and families out of homelessness. As agencies and organizations come together, it is obvious that there are interconnected roadblocks to ending the homelessness of individuals and households being served (or housed) by the CoC Programs.

Self-Reported Reasons for Homelessness

The figure below reflects the reasons that resulted in homelessness as self-reported by 315 of the individuals surveyed. These reasons range from financial problems to fire and other disasters. The top three self-reported reasons for homelessness combine to reflect 70% of the

reasons provided include financial problems, personal choice, and unemployment. Unemployment is a major causal factor for financial problems that result in utility disconnections, evictions, and arrears in other payment obligations. The ability to rent is subsequently challenging as such arrears would have to be addressed prior to housing placement whether subsidized or unsubsidized.

Figure 19: Self-Reported Reasons for Homelessness			
Reason	Total	Reason	Total
Financial problems	82	Drug / Alcohol Abuse	12
Personal Choice	74	Medical Needs	12
Unemployment	67	Eviction	10
Other reason for Homelessness	37	Mental Health Needs	7
Domestic Violence	13	Fire/Disaster	1

Lack of Employment

Barriers to employment as self-reported by 311 of the individuals surveyed range from transportation to criminal record. Of those who responded to this survey item, 24% have issues related to transportation while 12% had issues related to childcare, inability to afford gas money or bus fare, or health conditions. Less than 10% of those who reported barriers to employment had issues related to lack of education or job skills, fees for court and police clearances, no form of identification, lack of jobs in their profession, and/or limited English proficiency.

Figure 20: Self-Reported Barriers to Employment			
Reason	Total	Reason	Total
Transportation	76	Other reason for unemployment	21
Child Care	38	No form of identification	17
Can't afford gas money or bus fare	38	Lack of job in your profession	14
Health condition	37	Limited English proficiency	10
Lack of education or job skills	27	Criminal record	9
Court and police clearance fees	24		

Lack of Transportation

Transportation is vital to resolving the homeless economic situation especially for job seekers. A significant number of street homeless cluster around feeding sites in Hagatna and Dededo, and walk to offices and other sites unless someone can transport them. Those who

have some monies would use the mass transit bus to travel between villages or to access offices for public benefits.

Most of the sheltered homeless rely on the program staff for transportation to travel but lack of funds for this purpose limits the ability of programs to provide such services to all family members which results in the inability to secure permanent housing, difficulty obtaining job training or employment, or even acquiring documents needed for different services. The cost for transporting the housed homeless is high. More vehicles are needed, transport persons must be hired, and both vehicle maintenance costs and gas prices are rising. There is a need for a model that will transport the homeless to different agencies and community services providers.

Failure to Address Health Concerns

Serious illness and disability can start a downward spiral to homelessness when individuals fail to address significant health concerns. Eventually, the loss of employment and inability to pay rent may result in eviction. Considering the 2017 PIT Count, 10% of those who self-reported reasons for homelessness identified issues related to drug or alcohol abuse, medical needs, or mental health needs. These health problems may create difficulties in accessing and maintaining stable, affordable, and appropriate housing.

Next Steps

To end homelessness in Guam, the collaboration of the island community is needed to include the government and non-government agencies, profit and non-profit organizations, faith communities, home owners, health, education, business, media, community volunteers and advocates. With the leadership of GHURA and the GHC, the different sectors have gained a better understanding of the problem. As they come together, they become agents of change.

The GHC has fully embraced a Housing First and low-barrier response across its system and all program types. That is, the GHC assists individuals experiencing homelessness through various programs to move into permanent housing without barriers to entry, using a Housing First approach. Individuals experiencing homelessness usually do not participate in programs due to requirements such as sobriety or superfluous program rules. CoC homeless assistance programs do not deny assistance based on minimum income requirements, ethnic background

or Guam's CoC currently implements a Housing First approach in one of its CoC-funded programs.

Housing First by HUD's definition is defined as **"housing offered to people experiencing homelessness without preconditions**; such as: sobriety, mental health treatment, or a minimum income threshold, or service participation requirements and in which rapid placement and stabilization in permanent housing are primary goals." Guam continues to implement this approach as one of the ways to end chronic homelessness. The CoC recognizes that some of the hardest to reach are persons who are chronically homeless. Individuals and families identified as chronically homeless in this year's PIT Count were living in the street or in a place not meant for human habitation.

Rapid rehousing

Although HUD's focus is ending chronic homelessness among veterans, the Coalition will focus its efforts on rapid rehousing of families with young children, which may include a veteran member. Although there were 24 homeless veterans, this sub-population was predominantly single male adults who was homeless by choice. The focus on rehousing families is to assure the safety of young children and to work with parents to support their children through referrals and case management services focused on obtaining and retaining employment, consistent attendance at school, and acquiring financial management skills.

The Coalition will continue to provide specific services for sub-populations for homeless with serious mental illness and drug/alcohol disorders.

Linkages

The Coalition and its partners actively pursue public assistance programs as interim source of income to support individuals and families while referrals are transmitted to the Guam Department of Labor for job seekers. However, employment barriers perceived by the homeless is the biggest obstacle to obtaining or retaining employment.

The Coordinated Entry System is an automated data collection and referral process by which homeless individuals outreached are added to a homeless management information system, and collaborative partners can access the list to conduct intake and assessment. As the

automation for this system continues to be developed, the Coalition concurrently 'manually' refer individuals to mainstream and other supportive programs based on eligibility for services.

The GHC coordinates persistent and creative outreach and engagement efforts by creating the Homeless Outreach Team (HOT) that takes the lead in conducting outreaches periodically to the street homeless and in response to referrals. GHC also has a WhatsApp group chat that enable members of various organizations to communicate or send pictures of persons experiencing homelessness that they come across. GHC's outreach strategy allows for quick identification and engagement of individuals who are experiencing homelessness, newly arrive on island or not familiar with homeless services.

Conclusion

The GHC mission is to empower individuals and families who are homeless and/or at risk of homelessness to achieve housing self-sufficiency by providing supports through awareness, education and advocacy. The annual PIT Count data is used to direct the strategic planning efforts of the GHC to develop realistic action plans to prevent, reduce and end homelessness on Guam.

Appendix I: Homeless Programs

Guam continues to implement its permanent supportive housing programs funded through CoC Homeless Assistance Program grant. The Coordinated Entry System prioritizes response actions to homeless individuals and homeless families based on the VISPDAT assessment tool ranking, programs will follow up with these referrals to confirm eligibility and placement. If there are no beds available, homeless individual/family are referred to Family Service Center Emergency Solutions Grants that provides rental and utilities assistance. Furthermore, emergency shelters, transitional housing, and permanent housing programs providing services to families with children under the age of 18 are not separated upon entering housing and continue to attend the school they are enrolled in to avoid disruption and further trauma. Additionally, program participants are provided supportive services to help in stabilizing housing and recovery for those with substance abuse issues.

- ❖ **Homeless Management Information System** – This information management system is a shared database, designed to collect and deliver timely, credible, quality data about information and services of people experiencing homelessness; an integral component in which service providers will have the ability to utilize data for accurate referral, placement, and effective case management. This program is managed by *The Salvation Army*.
- ❖ **Emergency Solutions Grant (ESG)** – Homeless individuals and families can access services through the ESG program. The Salvation Army currently manages this program to provide rental and utilities assistance. Homeless individuals/families coming directly from the street or from emergency shelters are rapidly re-housed and are provided supportive services such as case management. Persons who are at-risk of becoming homeless are assisted through the ESG homeless prevention program to avoid eviction or relocate to another permanent home while receiving support services such as case management. These support services are provided to ensure individuals and families that are receiving assistance through the ESG maintain housing stability when assistance ends.
- ❖ **FEMA Emergency Food & Shelter Program (EFSP)** – Guam receives a little over \$100,000 to provide lodging in a mass shelter or hotel, food in the form of served meals or groceries,

rental or mortgage payment, utility payment, and equipment necessary to feed or shelter people. Organizations who successfully apply for FEMA EFSP can utilize funds to provide up to one month's rent or mortgage payment to prevent eviction or foreclosure. (Note: ESG funds cannot be utilized to provide mortgage assistance.)

❖ **Services for Veterans**

- **HUD VASH** – Homeless veterans identified through the Coordinated Entry System are immediately referred to the Veteran Affairs (VA) office on Guam for the U.S. Department of Veteran Affairs (VA) Homeless Program which currently provides homeless Vets with HUD-VASH services. Those who are eligible for HUD-VASH are immediately assisted to obtain a voucher, if such voucher is available. Guam has in its inventory a total of 45 HUDVASH vouchers, a 10% increase from last year. The Veteran Affairs currently partners with GHURA to process and distribute vouchers to Veteran's who qualify. Although GHURA manages the housing assistance payments, the VA is responsible for the referral and support services. The program continues to provide ongoing clinical case management to assist Veterans to live independently in the community and work towards self-sufficiency and sustainability.
- **Supportive Services for Veterans Families (SSVF)** – WestCare Pacific Islands (WestCare) assists Guam's local veterans and their families through SSVF program to include outreach services, case management, and other benefits through the Department of Veterans Affairs such as health care, transportation, legal services, financial planning, and other services as deemed fit for eligible veterans. For vets who do not meet the minimum requirements of the HUDVASH, the VA office refers them to the SSVF program. If they have not reached housing stability, the SSVF works in conjunction with other housing providers through the CoC, the ESG program, and other subsidized housing programs to identify permanent housing placement. Therefore, WestCare provides other services to assist in the efforts of sustainability in permanent housing. The program addresses other key issues such as high risk factors for homelessness with an eviction notice, sudden loss of income, and others who may be facing condemned housing.

❖ **Emergency Shelters**

- **Guma San Jose (GSJ) Emergency Homeless Shelters** – These first of these shelters was established in June of 1990. Shelter is provided for 24-hours up to a maximum of 180. Food, case management, housing assistance, employment assistance and transportation are provided. There is a shelter for single women and families as well as a shelter for single men. Both provide emergency housing for 24-hours up to a maximum of 180 days. A third shelter provides emergency housing for households with children whose shelter stay is extended for up to six months. This program is managed by Catholic Social Service.
- **US Veterans Initiative Emergency Housing** – This Emergency Shelter is a 5- bed facility which provides temporary housing for up to 90 days for adult homeless male veterans who have been honorably discharged from the military. The Guam facility was established in December 2014. Veterans are assisted with case management and other supports necessary to obtain permanent housing upon exit from the shelter. This program was established in December 2014 and is managed by the *U.S. Vets, Hawaii*.
- **Basic Center Program for Runaway and Homeless Youth** – Sanctuary Incorporated received a grant from the Family and Youth Services Bureau for \$127,000 to operate the Basic Center Program for FY2016-2017. The Basic Center Program is designed to address the immediate needs of runaway and homeless youth and families. Youths 18 and under are the target population. The program provides food clothing, counseling and healthcare referrals. Shelter is provided for up to 21 days. Sanctuary has 4 beds dedicated to the BCP program.

❖ **Other Affordable Housing**

- **Public Housing & Housing Choice Voucher Program** – GHURA continues to administer over 2,500 Housing Choice Vouchers, or commonly known as Section 8, and 751 public housing units to include 49 project-based units to qualified low-and moderate-income families. These programs are commonly sought after for low-income housing and are preferable due to its subsidized design where families pay rent according to their annual gross income less deduction.
- **Non-subsidized rental units** – Individual and family households seeking affordable housing also have access to non-subsidized rental units. These rental units include:

- Renaissance Rentals (managed by GHURA)
- Lada Gardens, As Atdas, & Sagan Linahyan (managed by Guam Housing Corporation)
- Summer Green, Summer Homes, & Summer Towns (managed by Guam Facilities Foundation Inc.)
- Ironwood Heights (managed by Ironwood Heights, LLC)

❖ **Continuum of Care Permanent Supportive Housing Programs**

- **Housing First Rental Assistance Program** – provides Tenant-Based Rental Assistance (TRA) to homeless adults with disabilities and their families. Under the TRA, homeless adults and their families will have the opportunity to choose affordable rental housing of their choice and will utilize available supportive services to include case management, housing counseling and placement, dental, mental health care, vocational rehabilitation training, and job placement services. This program is managed by the *Guam Housing & Urban Renewal Authority*.
- **Guma Hinemlo** – provides a group home for seven homeless adults with serious mental illness. Services include case management services, counseling, psychiatric, psychological, behavior analyst, and other therapeutic services, such as occupational and physical therapy management to assist its residents develops skills and strength in areas of coping and problem solving. The program also provides educational and vocational training and assistance in finding main stream housing. This program is managed by the *Guam Behavioral Health & Wellness Center*.
- **Empowered Together** – provides four apartment units for homeless, disabled women with children, as well as supportive services and case management. The program address the issues of homelessness and recovery among women by dealing with the issues contributing to addiction such as helping clients obtain & remain in permanent housing, overcome addiction, promoting health and stabilization leading to greater self-determination. This program is managed by the *Elim Pacific Ministries*.
- **Forrester's Refuge** - provides a group home for (4) four homeless young adults between the ages of 18-24 years; with a dual diagnosis (disability / drug and alcohol disorder seeking treatment or have completed treatment). The program provides guidance in

independent living/life skills training, supportive counseling, and access to other community support. This will more effectively help young people in homeless situations refocus their lives and become contributing members of the community. This program is managed by *Sanctuary Incorporated of Guam*.

- **Y' Jahame Permanent Housing Program** – permanent housing program for homeless individuals and/or families with disabilities, with priority given to those with the longest histories of homelessness. Support services and assistance based on disability is also provided. This program is managed by the *Catholic Social Services*.

❖ **Residential Treatment Programs**

- **Oasis Empowerment Center** – Residential treatment program which provides up to six-months of residential treatment for homeless women seeking recovery. This program is managed by the *Elim Pacific Ministries*.
- **Lighthouse Recovery Center** – provides four to six months of residential treatment for men suffering from substance use disorder. Approximately 70 men with low-to-moderate income inclusive of approximately 12-14 homeless men are served annually. In addition, the Lighthouse Recovery Center provides social detoxification for men and outpatient services for men and women. The program is managed by *The Salvation Army*.

Appendix II: Other Support Services in Community

Support services are provided to the homeless population by various community agencies and organizations to include the following:

Department of Education (DOE)

The Guam DOE has committed resources to meet the requirements of the McKinney-Vento Homeless Assistance Act and support homeless families with children from preschool through grade 12. Coordination with the Guam Department of Education (GDOE) system is an important part of the CoC process to ensure homeless children who are assisted through the coordinated entry system are enrolled in early childhood education or in school, and are connected to appropriate services within the community. The appropriate GDOE divisions work together to address the issues faced by any identified homeless children in enrolling, attending and succeeding in school.

In addition, a CoC member serves as the Representative for Homeless Children on the GDOE Guam Advisory Panel for Students with Disabilities (GAPSD) which focuses on policies related to provision of services to students with disabilities and as the Homeless Children & Youth Representative on the Guam Interagency Coordinating Council (GICC) for Early Intervention Services to Young Children birth to 5 years old which works to ensure coordinated services for those with or at risk for disabilities.

DOE Guam Head Start Program

The Guam Head Start Program is a comprehensive preschool program of the Guam DOE. Head Start assists in the prevention of homelessness as they aim to increase parent engagement with the goal of positive child and family outcomes to include school readiness. In order to reach those most in need of services, Head Start makes focused efforts to actively locate and recruit homeless families with age-eligible children and then encourage and assist them in applying for admission to the program. These vulnerable children are considered categorically eligible for Head Start and thus, are prioritized for enrollment. As part of their eligibility determination, Head Start will consider a child eligible with the submission of a homeless verification from provider of direct services to the homeless. Head Start will then work the family to ensure that any other requirements are met and address any potential

barriers to the full participation of the homeless child and family. A family assessment is conducted at the beginning of the year to prioritize the needs for services and support. Needs and goals are identified for parents and children to include health referrals, referrals for parents to obtain their GED, parenting skills, referrals to housing and other mainstream services.

DOE Student Parent Community Engagement (SPCE) Project

The SPCE Project is a district-wide program of the Guam DOE which aims to assist at-risk students and their families by providing social service supports, promoting parent engagement activities, implementing the Positive Behavioral Interventions & Supports Framework and behavior intervention practices and supporting Positive Learning Centers. Within the SPCE Project, there are Support Services & Outreach Teams (SSOT) which are composed mainly of a social worker and a community program aide. The team networks with other SSOT teams, school and district level personnel, and community partners to coordinate social services, as well as provide information to families to utilize towards improving the quality of their lives. Teams service all GDOE Schools and special program sites throughout the island by providing case management and necessary support services to ensure the academic success of homeless children as permanent housing solutions are being developed.

Guam Police Department (GPD)

The GPD is the local law enforcement organization on the island of Guam. The GPD is headquartered in Tiyan, Barrigada and has four major precincts, Hagatna, Dededo, Agat and Tumon. GPD has partnered with the GHC for many years. They have provided safety training for the PIT Count volunteers. They have also provided officers to support PIT Count volunteers in high risk areas. GPD has partnered with the GHC in other major homeless outreach events such as the Passport to Services and will continue

Department of Public Health and Social Services (DPHSS)

DPHSS is the public sector agency responsible for public health, child welfare, public assistance, environmental health and aging services. Its focus is wide-ranged and encompasses assistance of tangible benefits to eligible patients and clients as well as a regulatory function to ensure the safety standards for the citizenry. Programs active in the homeless mission includes immunizations, communicable disease services, protective services and child welfare services.

Department of Labor (DOL)

DOL is the public sector agency responsible for job development and employment services for job seekers, and employer assistance. DOL also coordinates skill training programs to improve the marketability of job seekers. DOL's participation in the Coalition is to assist with addressing barriers that prevent gainful employment.

Department of Integrated Services for Individuals with Disabilities (DISID)

DISID is a public sector agency tasked with providing comprehensive planning and case management services to individuals with various disabilities and supports for their families. It also performs a regulatory function for enforcing ADA requirements and compliance.

University of Guam (UOG)

As Guam's oldest institution of higher learning, UOG is a valued partner of the GHC. UOG's School of Nursing and Health Sciences and School of Social Work has assisted with the PIT Count for the last nine years and faculty have even served as trainers for the event. Student involvement extends to other GHC outreach events as part of a practical component of the SNHS curricula for exposure to patient populations.

Guam Community College (GCC)

GCC is another one of Guam's institution of higher learning and a much valued partner of the GHC. The Allied Health department has provided the GHC with much needed volunteers for the past nine years. Allied Health instructors have even lent a hand to conduct training sessions for the PIT Count.

Big Brothers Big Sisters, Micronesian Resource Center One-Stop Shop

The Micronesian Resource Center One Stop Shop is a special project of Big Brothers Big Sisters of Guam. The purpose of the One-Stop Resource Center is to provide informational and educational resources to assist migrants from compact states as they transition to a new life on Guam. The Micronesian Resource Center One-Stop Shop will provide a range of services to empower migrants to achieve their goals and to create opportunities to contribute to the community. Services at the One-Stop Shop is delivered at Route 4 in Yona and through the Mobile Access to Information (MAI) Van that will make its way to various neighborhoods and villages. The One-Stop Shop focus services in the following areas:

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- Assistance to new arrivals through orientation services general orientation, information services on public health and public education systems
- Workforce development training and employment services utilizing DOL resources, soft-skills training, resume writing & interview skills training
- Family support initiatives that address cultural and social challenges Youth mentoring, literacy programs, parenting classes, financial literacy classes, domestic violence prevention, health & wellness information

The MRCOSS has partnered with the GHC for the past three years. They have provided multilingual staff to assist with the PIT Counts. They have also participated in the annual GHC outreach, Passport to Services. They continue to assist the GHC with special projects, notably the Governor's safe housing task force.

Appendix III: HUD Definitions

The following reflects the criteria used by HUD for defining homeless:

<p>Category 1</p>	<p>Literally Homeless</p>	<p>(1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: (i) Has a primary nighttime residence that is a public or private place not meant for human habitation; (ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or (iii) Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution</p>
<p>Category 2</p>	<p>Imminent Risk of Homelessness</p>	<p>(2) Individual or family who will imminently lose their primary nighttime residence, provided that: (i) Residence will be lost within 14 days of the date of application for homeless assistance; (ii) No subsequent residence has been identified; and (iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing</p>
<p>Category 3</p>	<p>Homeless under other Federal statutes</p>	<p>(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who: (i) Are defined as homeless under the other listed federal statutes; (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; (iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and (iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers</p>
<p>Category 4</p>	<p>Fleeing / Attempting to Flee DV</p>	<p>(4) Any individual or family who: (i) Is fleeing, or is attempting to flee, domestic violence; (ii) Has no other residence; and (iii) Lacks the resources or support networks to obtain other permanent housing.</p>

Appendix IV: Homeless Count and Survey Methodology

The PIT Count included the count of unsheltered homeless persons, and a count of all individuals residing in a homeless shelter on the day the Count was conducted. A planning committee of GHC member organizations was established and began meeting regularly from November 2016 through January 2017. The committee was led by Mr. Frank Taijeron (HMIS, The Salvation Army) who coordinated the planning efforts. The committee was responsible for all aspects of the PIT Count including: volunteer recruitment and training, team assignments, survey review and revision, solicitation of donations, public relations for the event, and review of sites to be surveyed.

The list of sites surveyed from the 2016 PIT Count was reviewed by GHC members. The site listing was sent to Village Mayors, GHC member organizations, and other service providers with knowledge of homeless sites around the island. The listing must be updated every year, as the homeless population migrates, and new sites are found. An updated listing is key to making team assignments that can most effectively reach as many homeless as possible on the day of the Count. The listing of homeless shelters to be surveyed is based on the HUD Homeless Inventory Count (HIC).

Survey Instrument

The survey instrument was reviewed by the planning committee members with consultation from the GHC membership. There were minor changes made to the form. The changes were made to improve data collection accuracy and reduce errors based on experiences from the prior PIT Count. Changes to the 2017 survey instrument included:

- For gender: added Doesn't identify as Male, Female or Transgender (HUD requirement)
- Added: for veterans: Are you currently receiving VA Health or Housing services
- Several questions were rearranged for ease of data collection and improved flow during the data collection interview.

During the 2016 PIT Count, a referral form was added to the survey. (See appendix VII: GHC Referral Form.) This form was initiated to enable referrals to be made for services such as housing, employment, substance abuse treatment, VA services, etc. for homeless individuals and families who are unsheltered. In 2016, the majority of referrals were for housing and employment services. A total of 69 referrals were collected during the Count and distributed to

the various service providers for action. The top four referrals were for housing, employment, food stamps, and transportation services.

In 2017, the referral form was used again. Volunteers were trained to use the form for homeless individuals and families who request referrals and will provide their contact information. 73 referrals were collected on the day of the Count. Referrals for housing, employment, transportation, and food stamps were the top four services requested. Referrals were sent to the various service providers for follow-up. The referral form was implemented as an additional step in the Count process to provide further assistance to homeless individuals and families.

Recruitment and Training

Volunteers were recruited through the GHC member organizations and through media advertisements in radio and the local newspapers. The volunteer coordinator emailed all former volunteers to request their continued participation. Training schedules were advertised and sent to GHC members, former volunteers, and the media.

Training was conducted at the Catholic Social Services conference room in Barrigada. The volunteer coordinator was diligent in communicating with volunteers and signing them up for training sessions. Training occurred on Jan. 13, 17, 18, 19, 20, 23, and 24. Trainers were provided by the GHC members and included the Guam Police Department, Dept. of Public Health and Social Services APS and CPS, The Salvation Army, and HMIS. Training followed previous year's formats and included:

- Purpose and importance of the PIT Count
- Definitions of homelessness by HUD
- Team member roles and responsibilities
- Personal safety
- Completion of the survey tool
- Completion of the referral form
- Appropriate attire
- Supplies needed
- Reporting of child and/or adult abuse

A thorough review of the survey tool was provided by HMIS, with focus on the importance of accuracy in completion of the tool. Common errors from previous PIT Counts were discussed, as well as the definition of homelessness. A training activity included a scenario with a “homeless individual” given a pre-developed script. Volunteers were given the opportunity to practice interview techniques and completion of the survey tool. Feedback was provided to volunteers after the scenarios. The use of scenarios continues to be an effective training activity. An additional Team Leader Training was held on January 24, 2017 from 0900-1200. The emphasis was on definitions, survey tool, sites to be surveyed, and team assignment and management. Final team listings were distributed, along with site maps. Teams were encouraged to survey their assigned areas prior to the day of the Count.

Assembling PIT Count Teams

Teams were formed during the month of January, with many teams formed through GHC member organizations/agencies. Other teams were set up during the training days. Team leader recruitment continued to be a challenge, however returning volunteers were asked to assist as Team Leaders this year. Each team was assigned a team leader, driver, and members. Teams were assigned 5 to 8 members and provided contact information. All teams were encouraged to meet prior to the Count, and to review the survey tool, and site listings. The start times of each team were provided to Team Leaders during the Team Leader Training.

Sites with known homeless individuals and families were identified using the 2016 site listing. Village mayors, and GHC member organizations familiar with homeless sites were sent the listing with a request to provide updated sites. The PIT Count planning committee ensured all sites were assigned to a team. Areas identified as needing more surveyors during the 2016 Count were provided with more teams to ensure adequate coverage.

PIT Count Procedures

The Count was held on January 27, 2017. The Salvation Army office in Tiyan was the Home Base. Volunteers reported to Home Base at their designated start times beginning at 4am. Team start times were staggered based on the location of the sites. Areas such as parks and beaches with street homeless were visited before they leave their sites at sunrise. Staggered start times assist in preventing overcrowding at Home Base. Teams signed in, received supplies including the bags for the homeless, flashlights, clipboard, GHC car magnet,

security vests, and survey forms. Teams assembled and left to their assigned sites. Checkout at Home Base was an efficient process.

Staff at Home Base assisted teams in the field as needed. Home Base communicated on a regular basis with all teams through phone or WhatsApp chat. All teams were encouraged to check in once an hour. Home Base sent staff with supplies to teams in the field periodically. After surveying their assigned sites, teams reported back to Home Base or went to other areas if teams needed support. All teams returned to Home Base and submitted their survey and referral forms. Referrals to CPS/APS, DPHSS, Behavioral Health, GPD, or TSA were facilitated when teams debriefed at home base. Site maps were updated if teams found homeless in areas not previously identified or no homeless in identified sites.

Home Base volunteers and staff reviewed surveys. Each Team Leader was responsible for reviewing the surveys with HMIS staff at Home Base. Some surveys were not completed properly and Team Leaders assisted HMIS by communicating with team members. A recommendation at the Debrief was to have all team members return to home base to check out and to ensure forms are completed appropriately.

There were 3 teams assigned to count during the evening to cover Hagatna, Tamuning, and Tumon. There were not enough volunteers assigned for the evening count, however seasoned/veteran volunteers agreed to be team leaders and members for the evening count. Evening teams need to be comprised of experienced volunteers familiar with working with the homeless. This improves the efficiency of the evening count as these volunteers are familiar with the sites.

The count of Sheltered Homeless was conducted on the same day. The staff in the shelters were trained and were responsible for completing the surveys. The completed forms were submitted to the HMIS staff for data input.

Debriefing

On February 3, 2017, the Guam Homeless Coalition held a Debriefing session with volunteers and staff who participated in the 2017 PIT Count. The Debrief was held at the Salvation Army Family Services Center in Tiyan. Overall the feedback was positive, with volunteers providing recommendations for improvement for the next Count. Positive feedback and comments included:

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- Team leader training effective.
- Veteran training separate was a positive.
- Use of WhatsApp for communication was great. Regular check-ins with teams was excellent and facilitated with the use of WhatsApp.
- Good use of the bulletin board at home base for notifications/what to follow up on.
- Approximately 311 volunteers- great support
- Home Base well organized
- Food- sufficient for volunteers
- Training dates scheduled well for UOG and GCC student involvement
- GDOE truant officers were spread out among more teams- this worked well

Recommendations/suggestions for improvement:

- Establish a deadline for accepting volunteers
- Schedule training dates earlier
- Obtain cell phone numbers from volunteers- especially for team leaders
- Limit the CPS/APS time during training. Focus more time on completing the forms and definitions of who is considered homeless.
- Facilitate the time for the presenters during training.
- Emphasize safety at the end of training- before the scenarios rather than in the beginning. Perhaps the extreme examples scare some volunteers. Give data on actual incidents that occurred.
- Include photo of team leader on WhatsApp groups. Some members had difficulty finding their teams as they did not know the team leader.
- Difficulty with incorrect email addresses, and no personal phone number- some volunteers only provided work numbers.
- Do seasoned/veteran volunteer training first. Then have them pick sites and work other volunteers around those teams.
- Some issues with lack of male volunteers on some teams.
- Need more GPD support. Ask for GPD support earlier.
- Designate specific area at home base for teams to meet; i.e. sign for team 1A, etc.

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- Have laptop computers set up earlier and more laptops to accommodate volunteers performing data entry.
- Schedule HQ volunteers in shifts
- Coordinate media coverage especially with early morning shifts surveying street homeless
- Sign-in sheets at home base need time in/out columns.
- Need to discuss number of gas coupons available. Some teams have more vehicles than other teams.
- Remind teams to speak to the Mayors. Some Mayors assisted with finding sites prior to the Count. Need better collaboration with the mayors.
- Debrief with the Mayors after the Count if they are unaware of the homeless in their villages. The Agana Heights/Sinajana and Mangilao teams met with the Mayors.
- Provide team leaders with the number counted in their area the prior year.
- Waiver forms – had difficulty at home base ensuring all volunteers had signed the form. May need more well trained volunteers at home base during the 0600 peak.
- Have all volunteers return to home base after counting as some forms not complete and needed information from the team members.
- Peak times at 0800-0900 caused congestion at home base; perhaps teams could return and check out at another area. Or have more than one area for check in?
- Need to further discuss the use of the word Homeless Count. For example, Hawaii Partners in Care – do not use the term homeless as we do in the GHC.
- Re-emphasize in training the importance of being on time and that the teams will not wait for late members.
- Need to continually add sites to the list with information from outreach teams.
- Add GMHA to the site listing.
- Team leaders- perhaps need different color shirt for ease of identification.
- Continue to discuss the importance of PIT data for funding during training sessions.
- Update location/sites by obtaining information from Passport to Services participants.
- Put GPS location on the form. Send locations throughout the year to update sites. Add use of GPS to the training.

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Overall, the debriefing was a positive experience with certificates of appreciation provided to all volunteers and donors. There were 44 teams and 311 volunteers. This was the largest volunteer force in the history of the count. The 2017 PIT Count was well planned and implemented efficiently. Without the generous support of volunteers and donors, the PIT Count would not be a success. The GHC appreciates the continued collaboration of participating organizations and individuals as we work towards the goal of ending homelessness on Guam.

Appendix V: PIT Count Day Volunteers

Abwe, Irma	Camacho, Lavina	Fabia, Natasja
Acosta, Mike	Camacho, Patrick	Fagota, Isabella
Aflague, Elizabeth	Camacho, Pauline	Flores, Juan
Aguigui, Ryan	Capati, Ana	Flores, Monaeka
Aguon, Ana	Caprini, Joe	Freddy, Janise
Aguon, Terry	Casila, Joan	Gagarin, Allen
Aiken, Antonio	Casmin, Joeann	Gamboa, Cindy
Alba, Kristina	Castro, Ramon	Garcia, Jorge
Alicto, Tina Rose	Castro-Santos, Lakretia	Garcia, Vinchenza N.
Amande, Maricor	Cauilan, Kimberly	Garrido, Devina
Anderson, Christopher	Centeno, Dores	Gay, Margarita B.
Anderson, Eugene	Cepeda, Alan	Guerrero, Jonathan
Andon, Ivenglynn	Certeza, Joseph	Guerrero, Monica
Aquino, JoBeth S.N.	Chaco, Maylani	Guzman, Stephanie
Arangle, Leonel	Charfauros, Jeremiah	Hammond, Lina
Aromin, Ray	Chargualaf, Vicente	Hartley, Rosanne
Arriola, Frances	Clark, Angelica	Hartman, Jenolyn
Arriola, Michele	Claros, Kaolanie	Hattori-Uchima, Margaret
Arroyo, Marian	Concepcion, Isalyn	Hermoso, Rosemarie
Baes, Christine	Conrad, Kimberly	Hongyee, Lourdes
Basto, Rhoda	Cordero, Jeanenne	Howard, John
Bautista, Jirrah	Cristobal, Christine	Inocentes, Roque
Bayum, Amber	Cruz, Alan	Iyechad, Aletka M.
Bean, David	Cruz, Angelina	Jabinigay, Jacky
Bearce, Adam	Cruz, Anna	James, Therese
Beyond, Angelica	Cruz, Anthony	Jasmin, Allan
Billimon, Willenda	Cruz, DianaRose	Jesus, Jocelyn
Biscoe Lee, Regine	Cruz, Dolores	Johnny, Yvonne Y.
Blas, Emilani	Cruz, Elizia	Jordan, TC
Blas, Francisco	Dan, Devon	Kachita, Bertha
Bonifacio, Jeffrey	Davis, Adrian E.	Kadusale, Glen
Borja, Joyce	De Vera, Jessica	Klitzkie, Lou
Bustamante, Bose	Dela Cruz, April	Laba, Linda
Byun, Kyun-hee	Dela Cruz, Arleen	Lai, Breanna
Cabrera, Felix	Dela Cruz, Marilyn	Latson, Antoinette
Cabrera, Suzanne L.	Deleon, Joseph	Le Velle, Kriana R.
Calvo, Diana	Dois, Delyn	Lee, Jennifer
Calvo, Elizabeth	Dolores, Kimberly	Leon Guerrero, Lolita
Calvo, Gregorio	Duarasan, Lerma	Leon Guerrero, Tina
Calvo, Kisha B.Q.	Edward, Anthon	Lizama, Cody
Calvo, Nadine	Elayada, Ofelia	Luzano, Melissa
Camacho, Esther	Elias, Sylvia	Mafnas, Norma
Camacho, Eva	Elman, Lynora	Mafnas, Rosa

2017 PIT Count Report

Manalisay, Margaret
Mangune, Bernalyn
Manibusan, April
Manibusan, Evelyn
Marcus, Arnold
Mariano, Lester
Mario, R-Leen
Marquez, Crystal
Martin, Juan
Martinez, Brandy
Martinez, Michael G.
Martinez, Tasi Anghet
McManus, Mark
Medina, Adrian
Mendez, Ana Joy PhD
Mendiola, Ricky
Meno, Annette
Meno, John
Mesa, Sandra A.
Mijares, Adriene
Mortera, Terry
Nadeau, Nicholas
Naholowa'a, Leinani
Namelo, Aileen A.
Nanoto, Nathaniel
Nededog, George
Nesmith, Chelsey
Newby, Jenny
Okada, Lynn
Okada, Zenaida
Palomo, Cathrina
Pamintuan, Angel Mar
Pangelinan, Ana
Pangelinan, Darrin
Pangelinan, Steven
Park, Sharon
Patdu, Romar
Paulino, Helene

Paulino, Tristan
Paulino, Vincent
Paulino, Yvette
Pecha, Serene
Perez, Anthony S.
Perez, Aubriana
Perez, Paula
Perez, Simeon
Peter, Leona
Petitte, Michael
Quan, Jenesse
Quenga, Britney
Quenga, Ezariah
Quichocho, Pete
Quitugua, Norma
Rafael, Alwin L.
Rai, Dan
Rai, Tinu
Raigelig, Geneffer
Ramos, Aja
Resurreccion, Chelsea
Reyes, Frank
Righetti, Gia
Rivera, Julia
Roberto, Alyssa
Roberto, Territa
Roldan, Kenneth
Sablan, Michelle
Saimon, Susyann
Salas, Alfred
San Agustin, Colleen
San Nicolas, John
Sanchez, Sherry
Sanders, Shella
Santos, Esther Marie
Santos, Jamela
Santos, Shauna
Say, Amor

Schaffeld, Amanda E.
Schwab, Gerhard
Servino, James
Sgambelluri, Salvatore
Shiroma, Regina
Simer, Tanya
Story, Layla
Sumaylo, Relida
Susuico, Francis
Tagudin, Aurea
Tajeron, Curtis
Tajeron, Frank
Tajeron, Joseph
Taimanglo, Arthur Jr.
Taitano, Alexis
Taitano, Emily
Tajalle, Geraldine
Tajalle, Zianna V.
Thompson, Erin
Tinio, Sherill
Tio, Emely
Tipples, Liezel
Toves, Erlinda
Towai, Yoni
Trinidad, Juan
Uchima, Kat
Ulloa, Anita
Urlanda, Von Carlo
Villanueva, Jasie
Villatora, Theresa
Winn, Todd C.
Wolford, Robert
Yap, Ida
Yatar, Rachel
Yoma, Suanita
Yoon, Hur Seong

Appendix VI: 2017 Point-In-Time Survey Tool

POINT IN TIME COUNT SURVEY 2017																																		
1) Interviewer:	Village:	Shelter:																																
2) Have you been interviewed for this survey today? • Yes • No	When?	• Food/Hygiene Bag																																
3) Describe your nighttime residence: <i>(Choose from ONE category only - A. Not Fixed/Not Meant for Human Habitation or B. Not Adequate)</i>																																		
A. Not Fixed / Not Meant for Human Habitation: <ul style="list-style-type: none"> • Tent / Canopy • Park • Bus stop/shelter • Stairwell • Vehicle • Container • Abandoned Building • Beach • Workplace • Cave • Other: _____ 	B: Not Adequate: "house" Missing (*you may check more than one): <ul style="list-style-type: none"> • Walls • Roof • Floor • Doors • Windows 																																	
4) Sex: • Male • Female • Transgender • Doesn't identify as Male, Female or Transgender	5) Age: _____	6) Head of Household: • Yes • No																																
7) What is your race? <i>(Check all that apply)</i>																																		
<ul style="list-style-type: none"> • (1) Chamorro – Guam • (2) Chamorro – CNMI • (3) Chuukese • (4) Pohnpeian 	<ul style="list-style-type: none"> • (5) Yapese • (6) Hawaiian • (7) Palauan • (8) Carolinian 	<ul style="list-style-type: none"> • (9) Kosraean • (10) Marshallese • (11) Filipino • (12) Japanese 																																
<ul style="list-style-type: none"> • (13) Korean • (14) Vietnamese • (15) Chinese • (16) Caucasian • (17) Black or African American • (18) American Indian/Alaskan Native • (19) Other (please specify) _____ 																																		
8) What is your Ethnicity? • Non-Hispanic/Non-Latino • Hispanic/Latino	9) Can you • Speak, • Read or • Write in English?																																	
10) Are you a U.S. military veteran? • Yes • No <i>(Check all that apply):</i> • Served as an Active Duty member of the US armed forces Are you currently receiving VA • Health or • Housing services • Yes • No • Served in an active capacity in the Reserve / National Guard																																		
11) Is anyone else living with you? • Yes • No • N/A <i>(If yes, fill out the chart in the back for the remaining members only)</i>																																		
12) Is this your first time living here? • Yes • No	13) How long have you been staying here? • Less than a month • 1 – 3 months • 4 – 11 months • 12 – 23 months • 2 – 3 years • 4 or more years <i>(If you checked 12 months or more, skip #14. If not, answer #14)</i>																																	
14) _____																																		
15) Have you lived in similar conditions or in an emergency shelter in the past 3 years? • Yes • No If yes, how many times in the past 3 years? _____ <i>(If four or more occasions, does the total equal to at least 12 months?)</i> • Yes • No)																																		
16) Are you struggling with any of the following? <i>(Check all that apply)</i>																																		
<ul style="list-style-type: none"> • Alcohol • Serious Mental Health Issues • Chronic Physical Illness • or Other Disabling Condition (Specify _____) 	<ul style="list-style-type: none"> • Illegal Drugs • Developmental Disability 	If YES, does this limit your ability to: Get or keep a job or take care of personal matters? • Yes • No <i>Examples:</i> taking care of yourself, taking medications a doctor has prescribed, taking care of your children, going shopping, or getting around in the community.																																
What are your reasons for living here? <i>(Check all that apply)</i>																																		
<ul style="list-style-type: none"> • (a) Drug / Alcohol abuse • (b) HIV / AIDs • (c) Fire / Other disasters • (d) Mental Health needs 	<ul style="list-style-type: none"> • (e) Domestic violence • (f) Medical needs • (g) Unemployment • (h) Financial problems 	<ul style="list-style-type: none"> • (i) Eviction • (j) Personal choice • (k) Other: (specify) _____ 																																
17) What services do you currently have or need? <i>(Check all that apply)</i>																																		
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Have</td> <td style="width: 50%; border: none;">Need</td> </tr> <tr> <td style="border: none;">• Alcohol/Drug Counseling/Treatment</td> <td style="border: none;">• MIP</td> </tr> <tr> <td style="border: none;">• Health Care/Medication</td> <td style="border: none;">• Medicaid</td> </tr> <tr> <td style="border: none;">• Mental Health Care/Medication</td> <td style="border: none;">• Legal Assistance</td> </tr> <tr> <td style="border: none;">• Food stamps/SNAP</td> <td style="border: none;">• Employment Services</td> </tr> <tr> <td style="border: none;">• VA Services</td> <td style="border: none;">• Educational Services</td> </tr> </table> </td> <td style="width: 50%; border: none;"> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Have</td> <td style="width: 50%; border: none;">Need</td> </tr> <tr> <td style="border: none;">• Transportation</td> <td style="border: none;">• Housing</td> </tr> <tr> <td style="border: none;">• Interpreter Services</td> <td style="border: none;">• Other: _____</td> </tr> </table> </td> </tr> </table>	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Have</td> <td style="width: 50%; border: none;">Need</td> </tr> <tr> <td style="border: none;">• Alcohol/Drug Counseling/Treatment</td> <td style="border: none;">• MIP</td> </tr> <tr> <td style="border: none;">• Health Care/Medication</td> <td style="border: none;">• Medicaid</td> </tr> <tr> <td style="border: none;">• Mental Health Care/Medication</td> <td style="border: none;">• Legal Assistance</td> </tr> <tr> <td style="border: none;">• Food stamps/SNAP</td> <td style="border: none;">• Employment Services</td> </tr> <tr> <td style="border: none;">• VA Services</td> <td style="border: none;">• Educational Services</td> </tr> </table>	Have	Need	• Alcohol/Drug Counseling/Treatment	• MIP	• Health Care/Medication	• Medicaid	• Mental Health Care/Medication	• Legal Assistance	• Food stamps/SNAP	• Employment Services	• VA Services	• Educational Services	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Have</td> <td style="width: 50%; border: none;">Need</td> </tr> <tr> <td style="border: none;">• Transportation</td> <td style="border: none;">• Housing</td> </tr> <tr> <td style="border: none;">• Interpreter Services</td> <td style="border: none;">• Other: _____</td> </tr> </table>	Have	Need	• Transportation	• Housing	• Interpreter Services	• Other: _____	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Have</td> <td style="width: 50%; border: none;">Need</td> </tr> <tr> <td style="border: none;">• Alcohol/Drug Counseling/Treatment</td> <td style="border: none;">• MIP</td> </tr> <tr> <td style="border: none;">• Health Care/Medication</td> <td style="border: none;">• Medicaid</td> </tr> <tr> <td style="border: none;">• Mental Health Care/Medication</td> <td style="border: none;">• Legal Assistance</td> </tr> <tr> <td style="border: none;">• Food stamps/SNAP</td> <td style="border: none;">• Employment Services</td> </tr> <tr> <td style="border: none;">• VA Services</td> <td style="border: none;">• Educational Services</td> </tr> </table>		Have	Need	• Alcohol/Drug Counseling/Treatment	• MIP	• Health Care/Medication	• Medicaid	• Mental Health Care/Medication	• Legal Assistance	• Food stamps/SNAP	• Employment Services	• VA Services	• Educational Services
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Have</td> <td style="width: 50%; border: none;">Need</td> </tr> <tr> <td style="border: none;">• Alcohol/Drug Counseling/Treatment</td> <td style="border: none;">• MIP</td> </tr> <tr> <td style="border: none;">• Health Care/Medication</td> <td style="border: none;">• Medicaid</td> </tr> <tr> <td style="border: none;">• Mental Health Care/Medication</td> <td style="border: none;">• Legal Assistance</td> </tr> <tr> <td style="border: none;">• Food stamps/SNAP</td> <td style="border: none;">• Employment Services</td> </tr> <tr> <td style="border: none;">• VA Services</td> <td style="border: none;">• Educational Services</td> </tr> </table>	Have	Need	• Alcohol/Drug Counseling/Treatment	• MIP	• Health Care/Medication	• Medicaid	• Mental Health Care/Medication	• Legal Assistance	• Food stamps/SNAP	• Employment Services	• VA Services	• Educational Services	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Have</td> <td style="width: 50%; border: none;">Need</td> </tr> <tr> <td style="border: none;">• Transportation</td> <td style="border: none;">• Housing</td> </tr> <tr> <td style="border: none;">• Interpreter Services</td> <td style="border: none;">• Other: _____</td> </tr> </table>	Have	Need	• Transportation	• Housing	• Interpreter Services	• Other: _____															
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• Food stamps/SNAP	• Employment Services																																	
• VA Services	• Educational Services																																	
18) Are you currently working? • Yes • No If YES, how much did you earn in the past 30 days? _____ If NO, would you be interested to work? • Yes • No Are you actively seeking employment? • Yes • No • Not Applicable																																		
19) What are your sources of income in the past 30 days? <i>(Check all that apply)</i>																																		

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- (a) Full-Time Employment
- (b) Part-Time Employment
- (c) Self-Employed
- (d) Vocational Programs
- (e) Relatives / Partners / Friends
- (f) Workman's Comp
- (g) Social Security / SSDI
- (h) Public Assistance
- (i) Employment Pension
- (j) Child Support
- (k) Spousal Support
- (l) No Income
- (m) Other (specify) _____

20) **What types of barriers do you face in obtaining a job?** (Check all that apply)

- (a) Transportation
- (b) Child care
- (c) Education / Job skill
- (d) Can't afford gas money / bus fare
- (e) Lack of jobs in your profession
- (f) Health condition
- (g) Court / Police Clearance fees
- (h) Criminal record
- (i) No form of identification
- (j) Limited English Proficiency
- (k) Other: (Specify): _____

21) Are you currently going to school? • Yes • No

22) Name of school and last grade attended _____

23) Are you receiving special education services? • Yes • No

24) **What challenges do you face in keeping your child in school?** (Check all that apply)

Enrollment

- Providing academic records from previous school
- Providing birth certificates
- Providing guardianship documents
- Providing immunization (shot) record
- Providing proof of residency - mayor's verification, utility bills, etc.
- Other _____

Attendance / Success in school

- Homework assistance / Tutoring
- Providing school uniform
- Providing school supplies
- Transportation to & from school of origin
- Transferring to current district school
- Free lunch
- Other _____

POINT IN TIME COUNT SURVEY 2017

1	Household Members	2	3	4	5	6	7	8	9	10
2	Age									
3	*Sex									
4	*Relation to Head of Household									
5	*Ethnicity									
6	*Race									
7	Can you •Speak, •Read or •Write in English?	• Yes • No								
8	Are you a US military veteran?	• Yes • No								
9	1:Active Duty 2: Active Reserve / National Guard	• 1 • 2	• 1 • 2	• 1 • 2	• 1 • 2	• 1 • 2	• 1 • 2	• 1 • 2	• 1 • 2	• 1 • 2
10	Are you receiving VA •Health or •Housing Services	• Yes • No								
11	Is this your first time homeless? (#11-13b – for Head of Household only)	• Yes • No								
12	*How long have you been staying here?									
13a	Number of times living in similar conditions or in an emergency shelter in the last 3 years									
13b	If number of times homeless is four or more times, does total of the 4 episodes equal to 12 months?	• Yes • No								
14	Do you have a Physical Disability?	• Yes • No								
15	Do you have a Developmental Disability?	• Yes • No								
16	Do you have a Severe Mental Illness?	• Yes • No								

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17	1. Alcohol 2. Drugs 3. both Alcohol & Drugs										
18	Do any of items 12-15 limit your ability to get or keep a job or take care of personal matters?	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	
19	Do you have HIV/AIDS?	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	
20	Are you a victim of Domestic Violence?	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	
21	Are you currently working?	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	
22	If NO on #21, are you interested in working?	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	
23	*What are your sources of income?										
24	Income past 30 days										
25	*What are your barriers to employment?										
26	Are you currently going to school?	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	
27	Name of school and last grade attended										
28	Are you receiving special education services?	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	• Yes • No	
29	*School Enrollment Challenges										
30	*Attendance / Success in School Challenges										
(3) Sex Answer Key: 1) Male 2) Female 3) Transgender 4) Doesn't identify as Male, Female or Transgender	(4) Relationship Answer Key: HH-Head of Household GD-Granddaughter DA-Daughter GS-Grandson SO-Son OT-Other SP-Spouse	(5) Ethnicity Answer Key: 1) Non-Hispanic/Non-Latino 2) Hispanic/Latino	(6) Race Answer Key: 1) Chamorro - Guam 2) Chamorro - CNMI 3) Chuukese 4) Pohnpeian 5) Yapese 6) Hawaiian 7) Palauan 8) Carolinian 9) Kosraean 10) Marshallese 11) Filipino 12) Japanese 13) Chinese 14) Korean 15) Vietnamese 16) Caucasian 17) Black/African American 18) American Indian/Alaskan Native 19) Other	(12) How long homeless Answer Key: 1) Less than a month 2) 1-3 months 3) 4 -11 months 4) 12 -23 months 5) 2-3 years 6) 4 + years	(23) Sources of Income Answer Key: 1) FT-Employment 2) PT-Employment 3) Self-Employment 4) Vocational Program Pension 5) Relative / Partner/ Friend 6) Workman's Compensation 7) Social Security/SSDI 8) Public Assistance 9) Child Support 10) Employment 11) Spousal Support 12) No Income 13) Other						
(25) Barriers to Employment Answer Key: 1) Transportation 2) Childcare 3) Education / Job Skill 4) Can't afford gas/bus fare 5) Lack of Job in Profession (6) Health Condition (7) Court/Police Clearance (8) Criminal Record (9) No Form of ID (10) Limited English Proficiency (11) Other	(29) School Enrollment Challenges Answer Key: 1) Providing academic records from previous schools 2) Providing birth certificates 3) Providing guardianship documents 4) Providing immunization records 5) Providing proof of residency, Mayor's verification, utility bills, etc. 6) Other	(30) Attendance / Success in School Challenges Answer Key: 1) Homework assistance / Tutoring 2) Providing school uniform 3) Transportation to & from school 4) Transferring to current district school. 5) Free lunch 6) Other									
HH with at least one adult /one child Total persons: _____ # of persons under age 18: _____ # of persons age 18-24: _____ # of persons over age 24: _____	HH without Children Total persons: _____ # of persons age 18-24: _____ Total persons over age 24: _____	HH with only children Total unaccompanied youth: _____ # of unaccompanied children under age 18: _____	Parenting Youth Households Parenting youth (under 18): _____ # of Children with parenting youth (under 18): _____ Parenting youth (18-24): _____ # of Children with parenting youth (18-24): _____								
For Official Use Only: • Referral Made Date: _____ Referral Sent to : _____				• Emergency Shelter (Individual/Family) • Permanent Supportive Housing (Individual/Family) • Other _____				• Transitional Shelter (Individual/Family) • Chronic Homeless Individual • Chronic Homeless Family			

