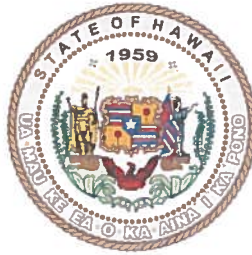


DAVID Y. IGE
GOVERNOR



OFFICE OF THE GOVERNOR
STATE OF HAWAII
STATE CAPITOL
HONOLULU, HAWAII 96813

Agenda

Hawaii Interagency Council on Homelessness (HICH)
Monday, September 21, 2020
10:00 a.m. to 12:00 p.m.

**THIS MEETING WILL BE HELD VIA TELECONFERENCE CALL OR OTHER
ALTERNATIVE MEANS OF COMMUNICATION ONLY INCLUDING BOARD MEMBERS,
STAFF, DEPUTY ATTORNEYS GENERAL, AND THE PUBLIC.**

The Governor's Twelfth Supplementary Proclamation dated August 20, 2020, suspended Chapter 92, HRS, Part I. Meetings, to the extent necessary to enable Boards to conduct meetings without any board members or members of the public physically present in the same location. Individuals should submit written testimony no later than 12:00 noon on Friday, September 18, 2020, which will be distributed to council members. You may submit written testimony via e-mail to gov.homelessness@hawaii.gov or by U.S. mail to 415 S. Beretania Street, Rm. 415 Honolulu, HI 96813.

The public and members may participate in the HICH meeting as it happens via MS Teams at https://teams.microsoft.com/l/meetup-join/19%3ameeting_Y2Q3YzdiZDMtMjE2ZS00YjExLTlhYTQyYWM4ZmI0YzhlM2Mw%40thread.v2/0?content=%7b%22id%22%3a%223847dec6-63b2-43f9-a6d0-58a40aaa1a10%22%2c%22oid%22%3a%22772bde02-f29f-4aad-9052-2be47a5dee0e%22%7d
(Please click on this link).

Alternatively, the public and members may also participate in the meeting by calling: 1-808-829-4853. When prompted, callers should enter the Meeting ID: 265 762 342#. It is requested that meeting participants change the display on their device to show their first and last name to expedite rollcall. Please keep in mind that many devices will display your cellphone number if not changed.

- I. Call to Order, Taking of the Roll
- II. Overview and Approval of Agenda (Vote)
- III. Approval of Minutes (Vote)

- a. Regular Meeting Minutes, July 13, 2020

IV. Public Testimony (One minute per testifier)

- a. Public testimony on any agenda item shall be taken at this time.

V. New Business

- a. Discussion regarding HICH recommendations regarding faith-based strategies to address homelessness, including the development of housing for individuals transitioning from homelessness.

Discussion will include information from:

- i. A presentation by Pastor Daniel Kaneshiro with The Shelter and First Assembly of God church.
- b. Discussion on strategies to address homelessness in the context of the COVID-19 pandemic.

Discussion will include information from:

- i. A presentation by the Department of Health, Behavioral Health Administration.
- ii. A presentation by Partners in Care and Bridging the Gap.

VI. Continuing Business

- a. Discussion and possible action regarding revisions to the Hawaii State Framework to Address Homelessness and ten-year strategic plan to address homelessness, including specific strategies, tactics, and metrics and examining the intersection between local initiatives and federal initiatives to address homelessness. **(Vote)**

Discussion will include information from:

- i. A presentation by Heather Henderson, Collaborative Quality Consulting.
- ii. Home Sweet Home: Hawaii's Response to Homelessness 2014-2018: Initial Assessment, December 2019 (<https://homelessness.hawaii.gov/wp-content/uploads/2020/08/HI-Eval-Initial-Assessment-8.14.20.pdf>)

VII. Permitted Interaction Group

- a. Report and discussion of the permitted interaction group established pursuant to Hawaii Revised Statutes (H.R.S.) §92-2.5 to review and recommend potential revisions to the ten-year strategic plan to end homelessness, and the Hawaii State Framework to Address Homelessness.

- b. Report and discussion of the permitted interaction group established pursuant to Hawaii Revised Statutes (H.R.S.) §92-2.5 to explore the intersection between homelessness and health, and make recommendations to the full council for action.

VIII. General Announcements

A. Chairperson and Staff Reports: July / August / September 2020

- Accomplishments / Highlights
- Planned Activities

B. Written Reports from Council Members. The following written updates are provided for the Council's consideration and review (the full write-ups for each representative will be provided):

- *Department of Human Services (DHS) and Homeless Programs Office (HPO)*
- *Department of Health (DOH)*
- *Department of Labor & Industrial Relations (DLIR)*
- *Department of Public Safety (PSD)*
- *Department of Business, Economic Development, and Tourism (DBEDT)*
- *Department of Hawaiian Home Lands (DHHL)*
- *Department of Defense (DOD)*
- *Office of Hawaiian Affairs (OHA)*
- *Department of the Attorney General*
- *Department of Education*
- *Hawaii State House of Representatives*
- *Hawaii State Senate*
- *Hawaii Public Housing Authority*
- *County of Hawaii*
- *County of Kauai*
- *County of Maui*
- *City & County of Honolulu*
- *Continuum of Care for Oahu, Partners in Care*
- *Continuum of Care for Hawaii Island*
- *Continuum of Care for Maui*
- *Continuum of Care for Kauai*
- *U.S. Department of Housing and Urban Development*
- *U.S. Department of Veteran Affairs*
- *Faith-based community*
- *Business community*

IX. Executive Session

Pursuant to H.R.S. §92-7(a), the Council may, when deemed necessary, hold an Executive Session on any agenda item without the written public notice if the Executive Session was not anticipated in advance. Any such Executive Session shall be held pursuant to H.R.S. §92-4

and shall be limited to those items described in H.R.S. §92-5(a). Discussions held in Executive Session are closed to the public.

X. Topics for Upcoming Meetings

A. Open for Council Suggestion

XI. Meeting Schedule

The following Council meetings are proposed for the 2020 calendar year:

- Monday, December 21, 2020, 10:00 a.m. to 12:00 p.m.

XII. Adjourn (Vote)

A mailing list is maintained for interested persons and agencies to receive this board's agenda and minutes. Additions, corrections, and deletions to the mailing list may be directed to the Governor's Coordinator on Homelessness (GCH) at Hawaii State Capitol, 415 S. Beretania St., Room 415, Honolulu, Hawaii 96813; Telephone (808) 586-0193 Fax (808) 586-0019; or e-mail gov.homelessness@hawaii.gov. Agendas and minutes are also available on the internet at <https://homelessness.hawaii.gov/hich/agenda-and-minutes/>

If you require special assistance, auxiliary aid and/or service to participate in this event (i.e. sign language interpreter; interpreter for language other than English, or wheelchair accessibility), please contact the GCH at (808) 586-0193 or email your request to gov.homelessness@hawaii.gov at least three (3) business days prior to the meeting. We will try to obtain the auxiliary aid/service or accommodation, but we cannot guarantee that request will be filled.

Item III.

Approval of Minutes

July 13, 2020

Hawaii Interagency Council on Homelessness (HICH)

Zoom Virtual Teleconference

Recording:

Monday, July 13, 2020

10:00 a.m. – 12:00 p.m.

Council Attendees:

Mr. Scott Morishige	Chair
Ms. Daisy Lynn Hartsfield for	Director of the Department of Human Services (DHS)
Mr. Harold Brackeen III	Administrator of the Homeless Programs Office of DHS
Ms. Yara Sutton for	Director of the Department of Health (DOH)
Ms. Shari Kimoto for	Director of the Department of Public Safety (PSD)
Mr. Dean Minakami for	Department of Business, Economic Development, and Tourism (DBEDT)
Ms. Cynthia Rezentes for	Director of the Department of Hawaiian Home Lands (DHHL)
Mr. Bruce Oliveira for	Adjutant General of the Department of Defense (DOD)
Ms. Kamaile Maldonado for	Chairperson of the Office of Hawaiian Affairs
Ms. Melissa Lewis for	Attorney General
Ms. Maigee Chang for	Hawaii State Senate
Rep. Cedric Gates	Hawaii State House of Representatives
Mr. Ben Park for	Executive Director of the Hawaii Public Housing Authority
Mr. Marc Alexander for	Mayor of the City & County of Honolulu
Ms. Sharon Hirota for	Mayor of the County of Hawaii
Ms. Lori Tzuhako for	Mayor of the County of Maui
Mr. Adam Roversi for	Mayor of the County of Kauai
Ms. Laura Thielen	Continuum of Care for the County of Honolulu
Ms. Brandee Menino	Continuum of Care for the County of Hawaii
Ms. Makana Kamibayashi	Continuum of Care for the County of Kauai
Ms. Maude Cumming	Continuum of Care for the County of Maui
Mr. Andy Taylor	U.S. Department of Veterans Affairs (VA)
Mr. Mark Chandler	U.S. Department of Housing & Urban Development (HUD), Office of Community Planning & Development
Pastor Daniel Kaneshiro	Faith-Based Representative

Absent:

Department of Labor and Industrial Relations (DLIR); Department of Education; Business Community Representative.

Staff:

Mr. Justin Limasa, Homelessness Assistant; Mr. Jason Kasamoto, Homelessness Special Assistant and Public Affairs; Ms. Emma Grochowsky, Homelessness Community Development Specialist; Ms. Lily Young, Deputy Attorney General

Special Guests:

Mr. Xan Avendaño, Harry and Jeanette Weinberg Foundation and COVID-19 Philanthropic Response Hui.

- I. **Call to Order. Taking of the Roll.** Roll taken and there was a quorum established with 20 out of 27 members. The meeting was called to order at 10:03 a.m. by the Chair.

Chair Morishige welcomed everyone and thanked the Council and staff for their patience and flexibility. The Chair reviewed several general housekeeping items related to the virtual teleconference platform. Attendees were asked to keep their device on 'mute' unless speaking, and members were asked to notify staff when leaving the meeting. The Chair explained that voting will be conducted via roll call unless otherwise specified, and members should vote verbally or using the chat feature.

The Chair acknowledged late Senator Breen Harimoto, an alternate member to the Council, for

his lifelong commitment to affordable housing and homeless services. The Chair recognized Senator Harimoto's career-long advocacy for vulnerable populations.

The Council observed a moment of silence in memory of Senator Harimoto.

- II. **Overview and Approval of Agenda.** The Chair presented the agenda for review. Ms. Hartsfield moved and Pastor. Kaneshiro seconded to approve the agenda as presented.

Votes were counted via roll call, with all members of the Council voting Aye. The motion passed unanimously.

- III. **Approval of Minutes.** The Chair reminded members that the December 16, 2019, meeting minutes were available electronically. The Chair provided time for members to review the minutes and asked if there were any additions/corrections. The Chair received confirmation from Ms. Young that the meeting agenda may be approved by a general voice vote.

Ms. Hartsfield moved and Pastor Kaneshiro second to approve the minutes as presented. Seeing no additions or corrections at this time, the Chair called the question. The motion passed unanimously.

- IV. **Public Testimony.** Chair Morishige opened the floor to public testimony. No members of the public elected to provide testimony.

Mr. Chandler's attendance was recognized as 10:19 a.m.

Mr. Malate's attendance was recognized at 10:19 a.m.

Mr. Dean Minakami's attendance was recognized at 10:19 a.m.

Quorum was amended to reflect 23 out of 27 members present.

- V. **New Business**
a. **Discussion and possible action regarding HICH recommendations regarding strategies to address homelessness in the context of the COVID-19 pandemic. (Vote)**

Presentation by the COVID-19 Philanthropic Response Hui.

The Chair introduced special guest Mr. Xan Avendano, representing the Harry and Jeanette Weinberg Foundation and the COVID-19 Philanthropic Response Hui, to share information about the group's efforts to align private sector programs with government funding for COVID-19 relief and assistance programs.

Mr. Avendano introduced himself on behalf of the COVID-19 Philanthropic Response Hui and thanked the Chair for the opportunity to collaborate with the Council. Mr. Avendano explained that the group's goal is to identify opportunities for private funders to target their funding in alignment with existing government efforts, and have met with State and County representatives to discuss alignment of new assistance programs funded using additional ESG-CV and CDBG-CV federal funds.

Discussion and Questions.

The Chair opened the floor to questions from the Council. Hearing no questions, the Chair thanked Mr. Avendano and encouraged interested parties to connect with the COVID-19 Philanthropic Response Hui or the Chair directly.

Overview of Stimulus Response Core Technical Assistance.

The Chair presented a breakdown of the various federal funds available to the State of Hawaii and the individual counties, including ESG-CV, CDBG-CV, and CARES Act funds. Technical assistance from HUD is being provided to the State of Hawaii and the City & County of Honolulu, and this technical assistance includes guidance related to leveraging other sources of federal funds, including the Coronavirus Relief Funds (CRF) through the U.S. Treasury.

The State and County technical assistance providers have held several meetings over the past month with various stakeholders, including other State agencies and philanthropic groups who are administering COVID-19 assistance programs. Guidance from HUD regarding potential waivers and exemptions for programs funded by Round 2 of ESG-CV and CDBG-CV funding will be released shortly in the *Federal Register*.

The Chair reviewed the general focus areas of the State's technical assistance, including:

1. Integrated street outreach and encampment outreach
2. Specialized shelter models
3. Targeted prevention and diversion
4. Rapid rehousing, including landlord engagement, risk mitigation, and property acquisition
5. Strengthening administrative capacity

Discussion and Questions.

The Chair opened the floor to questions from the Council.

Mr. Andy Taylor joined the meeting at 10:46 a.m.

Ms. Brandee Menino joined the meeting at 10:46 a.m.

Quorum was revised to reflect 25 out of 27 members present.

Mr. Alexander informed the Council that the City & County of Honolulu has been gathering input from various stakeholders and is focusing on aligning funding efforts with national guidance from the NAEH and USICH. To the greatest extent possible, the City & County of Honolulu will prioritize the use of ESG-CV and CDBG-CV funds to assist people who are currently experiencing homelessness. Mr. Alexander was grateful for the technical assistance providers' expertise in disaster recovery planning and thanked the Continuum of Care for its collaboration.

Ms. Hirota asked for a timetable from HUD regarding ESG-CV Round 2 waivers, and asked if separate meetings could be arranged with the BTG Administrative Board to discuss plans for the neighbor islands.

- Mr. Chandler responded that the ESG-CV program came with certain established waivers, and the national HUD office has not yet authorized additional waivers. Any additional waivers will be published in the upcoming *Federal Register*. Under the current waivers, the ESG-CV program currently cannot be used for property acquisition.
- The Chair responded that additional meetings between the technical assistance providers and the BTG Administrative Board can be scheduled.

Mr. Alexander added that it will be important to hear from the U.S. Treasury regarding property acquisition using CRF funds.

Mr. Alexander left the meeting at 10:52 a.m. Quorum was amended to reflect 24 out of 27 members present.

Review of Efforts to Develop Community-Centered Housing.

The Chair revisited the memo provided by HUD in May 2020, which outlined the minimum habitability standards for communal housing, including tiny homes, to be considered "permanent housing" under HUD guidelines. These standards included:

- Electricity/illumination in the unit available 24/7
- Plumbing/water reasonably accessible
- Heating, ventilation, and/or HVAC system
- Walls on all sides
- Smoke detector within each living space/unit
- Compliance with local building code
- For CoC PSH – program participation cannot be time-limited
- For other PH – must be long-term, but must not be considered RRH or PSH

The Chair highlighted several key determinations that may impact the development of tiny home structures for people experiencing homelessness:

- Tiny homes without self-contained kitchen and bathroom facilities do not meet HUD's Housing Quality Standards (HQS)
- Tiny homes that do not meet HUD's HQS will not be eligible for CoC rental assistance funds or TBRA under HOME or Section 8

Mr. Chandler added that HQS compliance is the key determining factor for HUD, and that this guidance is supported by HUD Headquarters.

Ms. Thielen left the meeting at 11:01 a.m. Quorum was revised to reflect 23 out of 27 members present.

Discussion and Questions.

The Chair opened the floor to questions from the Council.

Mr. Roversi asked whether HUD's required Environmental Assessments can be expedited and if other counties have had any success with this.

- Mr. Chandler explained that HUD has expedited some processes for projects using CV funds, although Environmental Assessments must still be met. Mr. Chandler also reminded recipients of the timelines for expending HUD CV funds.

Mr. Roversi wondered whether the Environmental Assessment timelines applied to projects funded with CARES Act funds. The County of Kauai was considering allocating up to \$2M for a tiny home project, but realized that the timeline might not be feasible.

- The Chair noted that CARES funds must be expended by December 30th and that any waivers to environmental or other safety regulations could have more serious implications.
- Ms. Tsuhako added that the County of Maui chose not to use HUD or Treasury funds for their tiny home project.

Ms. Hirota left the meeting at 11:11 a.m. Quorum was revised to reflect 22 out of 27 members present.

Ms. Hirota rejoined the meeting at 11:16 a.m. Quorum was revised to reflect 23 out of 27 members present.

Review of Technical Assistance and Consultation Efforts.

The Chair apprised the Council of current Technical Assistance efforts being provided to the State, Counties, and Continuum of Care related to homelessness. Areas covered by technical assistance providers include:

- Ohana Zone evaluation
- HUD Stimulus Response Core (COVID-19-related funds)
- Unsheltered homelessness (Oahu CoC)
- Youth Homelessness Demonstration Project
- HMIS
- Mayor's Challenge to End Veteran Homelessness
- National Council for Behavioral Health and Corporation for Supportive Housing (behavioral health intersection)
- LEAD National Support Bureau

In an effort to synthesize existing Technical Assistance efforts and recommendations, the Chair proposed establishing a framework for COVID-19 response on behalf of the Council. The proposed framework would emphasize the use of data, capacity building, efficient expenditure of funds, and ensuring programs have enough time to develop. The Chair also stressed the importance of considering lessons learned from previous economic recessions and the impact on both government and private sector staffing and capacity.

The Chair asked the Council to consider the following recommendations:

1. Focus on targeted outreach efforts
2. Establish and increase the availability of specialized shelters
3. Utilize and maximize RRH
4. Explore public lands, in addition to lands owned by DLNR, for community-based housing and PSH
5. Capacity building for both government and non-profit providers

Recommendations will be compiled and distributed to stakeholders who typically receive updates and reports from the Council, including the Governor, Mayors of the four counties, Senate President, and Speaker of the House.

Discussion and Questions.

The Chair opened the floor to questions from the Council.

Ms. Hartsfield asked for clarification of the types of specialized shelters being explored.

- The Chair explained that some of the specialized shelter models include medical respite, stabilization beds, and shelters to meet the needs of older individuals.

Ms. Tshako asked for clarification of the intent and purpose of the letter.

- The Chair stated that the purpose is to leverage the Council's role as an advisory body and to encourage decision-making alignment across multiple sectors.

Hearing no further questions or comments, the Chair entertained a motion to send a letter outlining the Council's priorities for COVID-19 response to stakeholders. Motion to approve was made by Ms. Tshako and seconded by Ms. Hartsfield. The Chair called for the question. The motion passed unanimously.

VI. **Continuing Business**

- a. **Discussion regarding revisions to the Hawaii State Framework to Address Homelessness and ten-year strategic plan to address homelessness, including specific strategies, tactics, and metrics and examining the intersection between local initiatives and federal initiatives to address homelessness.**

This agenda item was addressed in earlier discussions.

VII. **Permitted Interaction Group**

- a. **Report and discussion of the permitted interaction group established pursuant to Hawaii Revised Statutes (H.R.S.) §92-2.5 to review and recommend potential revisions to the ten-year strategic plan to end homelessness, and the Hawaii State Framework to Address Homelessness.**

The Permitted Interaction Group will focus on compiling the Council's COVID-19 recommendations for review at the meeting on September 21st, 2020.

- b. **Report and discussion of the permitted interaction group established pursuant to Hawaii Revised Statutes (H.R.S.) §92-2.5 to explore the intersection between homelessness and health, and make recommendations to the full council for action.**

This agenda item was addressed in earlier discussions.

VIII. **General Announcements**

A. Chairperson and Staff Reports: January / February / March / April / May / June / July 2020

The Chair shared the staff report for the period from January through July 2020 and noted that a copy of the report is included in the meeting packet. The Chair noted that the System Performance Report reflects a decrease in overall exits to permanent housing since July 2019. This may be partially due to the impacts of COVID-19 but warrants ongoing monitoring.

Ms. Rezentes reminded attendees about the DRAP funded by DHHL, and remarked that there may be a sharp increase in applications at the end of July due to the reduction of federal unemployment benefits. Ms. Rezentes suggested interested households apply early before their benefits are reduced.

Ms. Thielen rejoined the meeting at 11:29 a.m. Quorum was revised to reflect 24 out of 27 members present.

B. Written Reports from Council Members.

The following written updates are provided for the Council's consideration and review (the full write-ups for each representative will be provided):

- *Department of Human Services, Homeless Programs Office*
- *Department of Public Safety*
- *Department of Defense*

- *Department of Education*
- *Department of Health, Adult Mental Health Division*
- *Hawaii Public Housing Authority*
- *County of Hawaii*
- *City & County of Honolulu*
- *County of Kauai*
- *Continuum of Care for Oahu, Partners in Care*
- *Continuum of Care for Balance of State, Bridging the Gap*
- *U.S. Department of Veterans Affairs*
- *Faith-Based Community*

IX. **Executive Session**

Pursuant to H.R.S. §92-7(a), the Council may, when deemed necessary, hold an Executive Session on any agenda item without the written public notice if the Executive Session was not anticipated in advance. Any such Executive Session shall be held pursuant to H.R.S. §92-4 and shall be limited to those items described in H.R.S. §92-5(a). Discussions held in Executive Session are closed to the public.

The Chair stated that an Executive Session is not necessary at this time.

X. **Topics for Upcoming Meetings**

The Chair asked members to contact his office with additional suggestions for upcoming meetings. The office can be reached at 586-0193 or by e-mail at gov.homelessness@hawaii.gov.

Pastor Kaneshiro suggested that exploring land partnerships between government and faith-based providers be added to a future meeting agenda. The Chair acknowledged Pastor Kaneshiro's suggestion and will work with staff to put this on the September meeting agenda.

XI. **Meeting Schedule**

The following Council meetings are proposed for the 2020 calendar year:

- Monday, September 21, 2020, 10 a.m. to noon
- Monday, December 21, 2020, 10 a.m. to noon

XII. **Adjourn**

Chair Morishige entertained a motion to adjourn. Motion was made by Ms. Menino and seconded by Ms. Sutton. The Chair called for the question. The motion passed unanimously. The meeting was adjourned at 11:35 a.m.

MINUTES CERTIFICATION

Minutes prepared by:

Emma Grochowsky
Homelessness Community Development Specialist

Date

Approved by the Hawaii Interagency Council on Homelessness at their Regular Meeting on July 13, 2020.

☐ As Presented ☐ As Amended

Scott S. Morishige, MSW
Chair

Date

DRAFT

Item V.b.1.

Department of Health

Strategies to address homelessness in
the context of COVID-19

Isolation and Quarantine

Joshua Holmes, MPH
Behavioral Health Administration
Hawaii State Department of Health

1

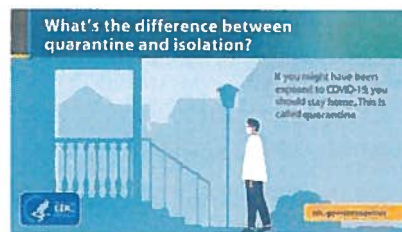
Agenda

- Define Isolation vs. Quarantine
 - Quarantine: exposed
 - Isolation: have infection
- Incubation period of COVID-19
 - Testing
 - Isolation and Quarantine
- COVID-19 Isolation and quarantine clearance
- COVID-19 IsoQ on Oahu

2

Definitions

- **Isolation:** separates sick people with a contagious disease from people who are not sick
- **Quarantine:** separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick



Source: <https://www.cdc.gov/quarantine/index.html>

3

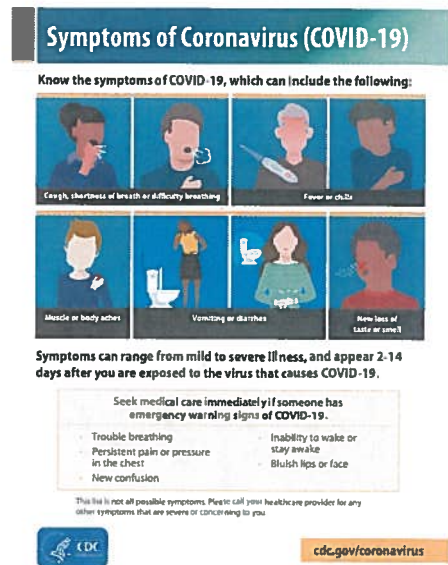
What does “isolate/quarantine safely” mean?

- Having access to own bedroom (and preferably bathroom)
- Being able to avoid close contact with family members
- Being able to quarantine/isolate for the entire required time
- Other factors to consider:
 - Living with individuals/family members of high risk
 - ≥ 65
 - Underlying physical and behavioral health issues
 - Congregate living situations

4

Incubation Period

- **Incubation period:** the time from exposure to development of symptoms
- **COVID-19:** 2-14 days
- Some people may never develop symptoms (asymptomatic) and may still be able to infect others



5

Timing of Testing

- After somebody is exposed, it is possible that it may take 14 full days to become symptomatic and test positive
- For those exposed, a negative test within 14 days of exposure does not mean they are negative
- **Ex:** If someone was exposed on day 0 and tested negative on day 3, they must continue to quarantine until day 14 and monitor their symptoms.

6

COVID-19: Isolation and Quarantine

- CDC does not recommend a test-based isolation clearance strategy
- Many individuals may continue to test positive for up to three months after infection (and after infectious period)
- Infectious period is thought to only be no longer than 10 days for mild-to-moderate cases
- Ongoing research and evaluation to determine “immunity” and duration until susceptible to re-infection

7

COVID-19: Isolation and Quarantine

Isolation Time Frame:

- 10 full days from symptom onset (or test date if asymptomatic or symptom onset date is unknown)
- Can be cleared if symptoms have been improving (if applicable and note that it does not say *resolved*)
 - Exception: no fever for 24 hours without fever reducing medication
- Limited individuals may require 20 days of isolation
 - Severe disease (eg, hypoxic)
 - Severely Immunosuppressed
 - Based on consult with infectious disease expert

8

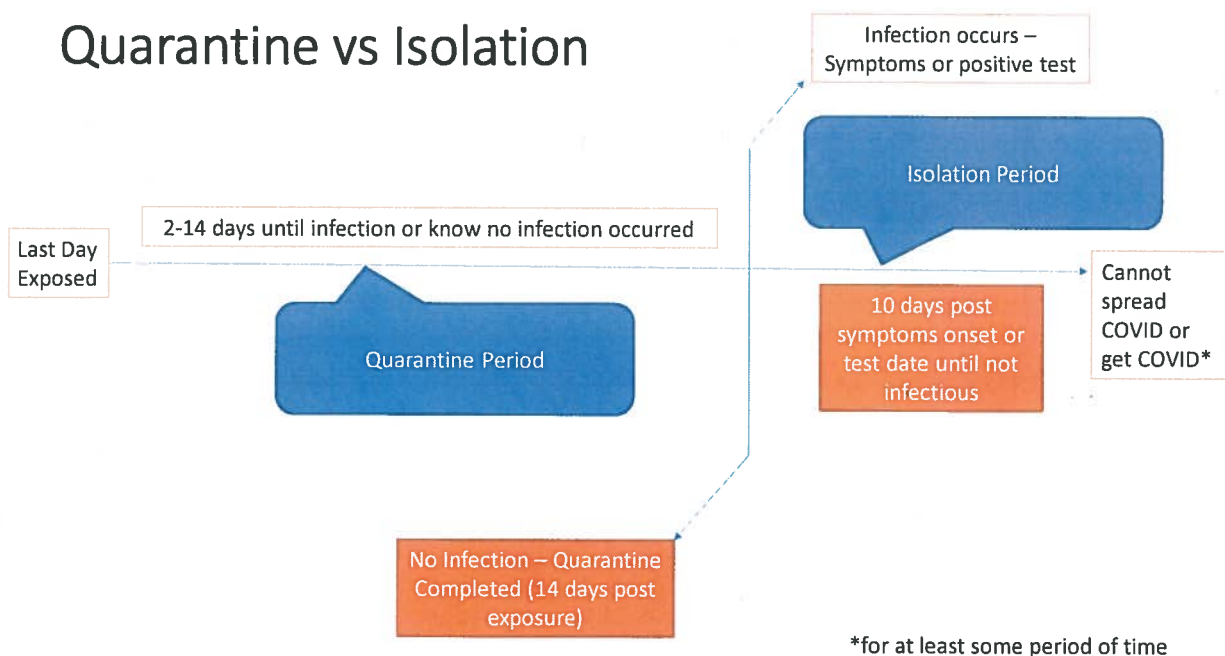
COVID-19: Isolation and Quarantine

Quarantine:

- 14 full days after the *last* day of exposure.
 - Close monitoring to assess if symptoms appear
- Those in quarantine and isolation should not leave their room/residences to prevent exposure to other susceptible individuals
 - Urgent medical appointment (eg, dialysis, chemotherapy)

9

Quarantine vs Isolation



10

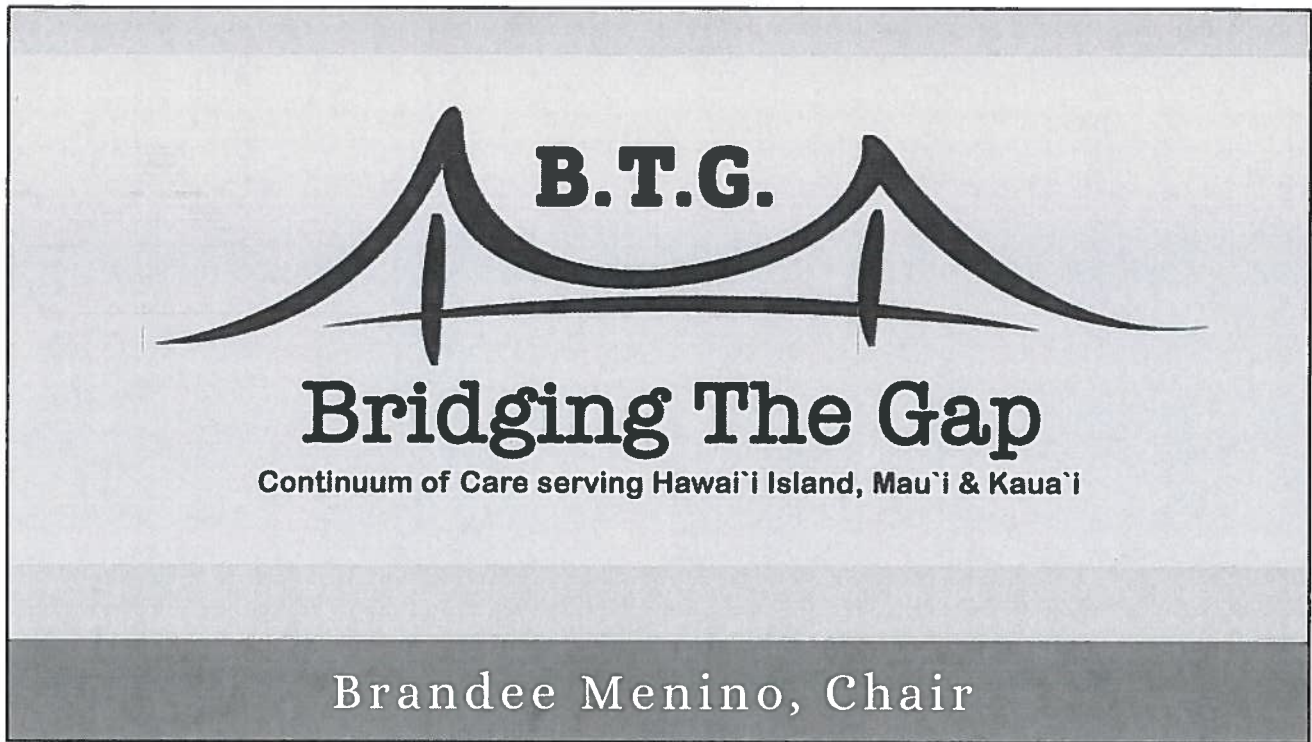
IsoQ on Oahu

- Temporary Quarantine and Isolation Center (TQIC) has been operational since April 2020
- Need a continuum within isoq to be able to respond to all needs (behavioral and physical)
- Having a centralized information line for inquiries and referrals (CARES: 832-3100)
- Several hundred hotel rooms are currently operational
- Partnering with state, county, and community organizations makes for strong response

Item V.b.ii.

Bridging the Gap

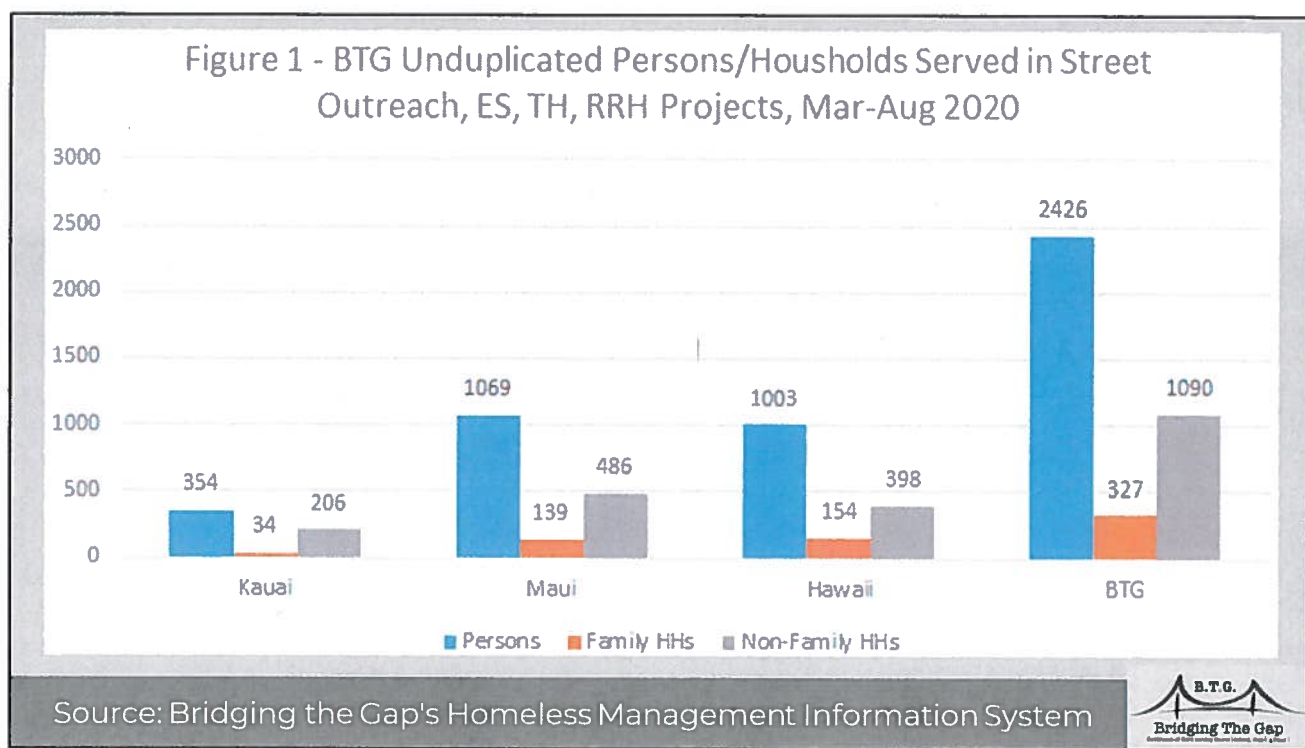
Strategies to address homelessness in
the context of COVID-19



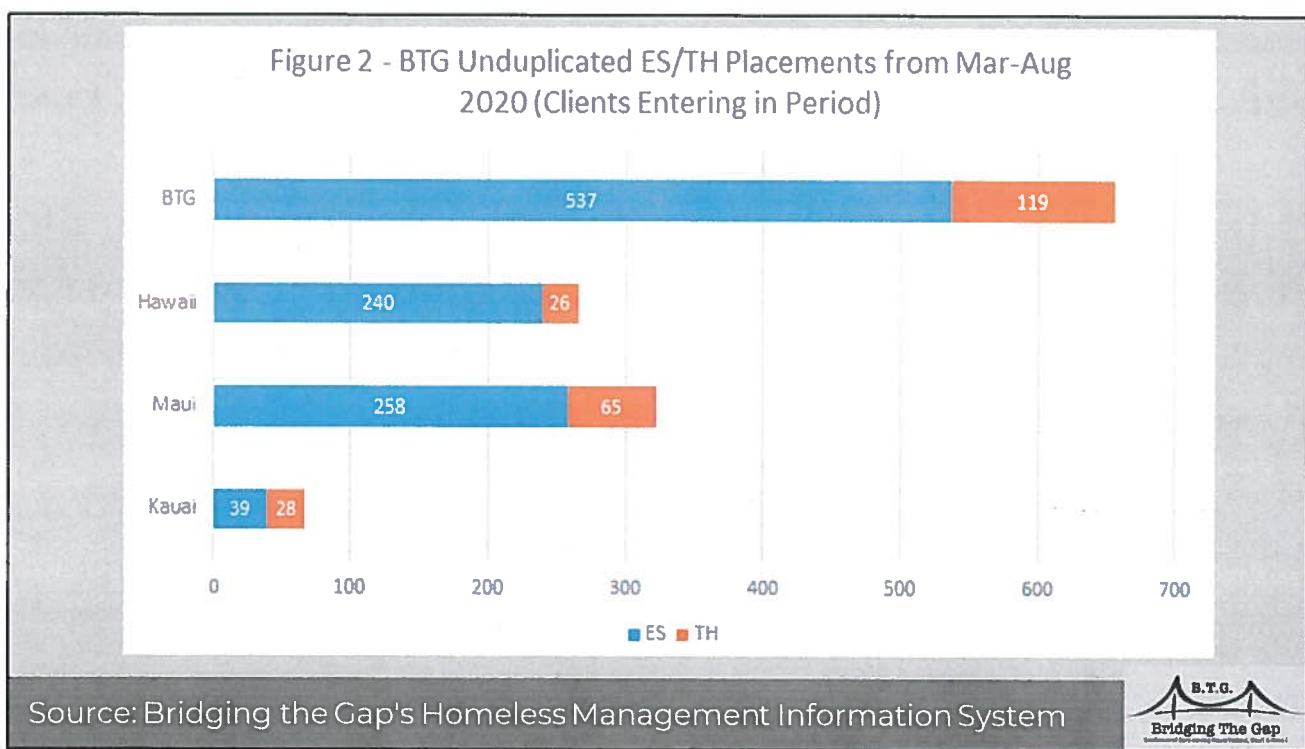
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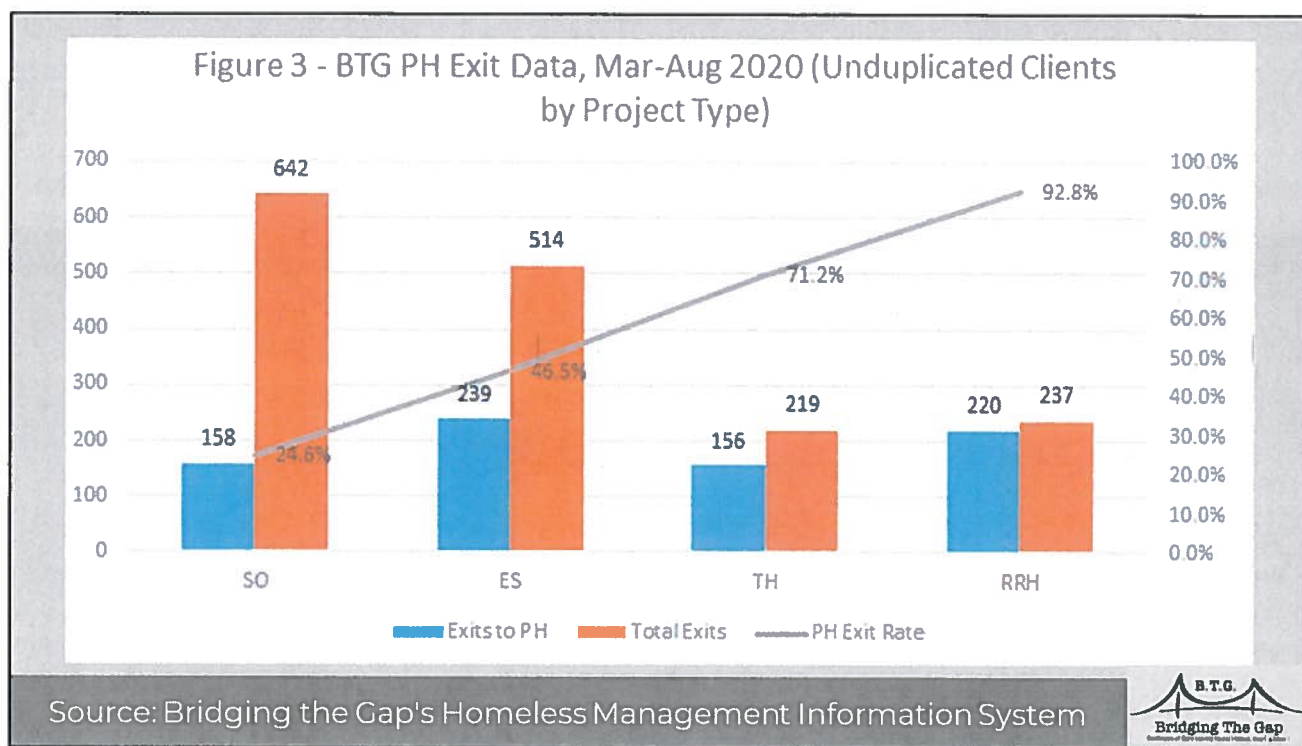
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3



4



5

BTG Kaua'i Chapter

Project Name: Kealaula

Construction Funding: \$2 million in 'Ohana Zone funds, and \$2.15 million in County funds

Services funding & Provider: Wrap around supportive services and oversight of the project are being provided by Women In Need under a \$2.3 million three-year funding agreement via DHS

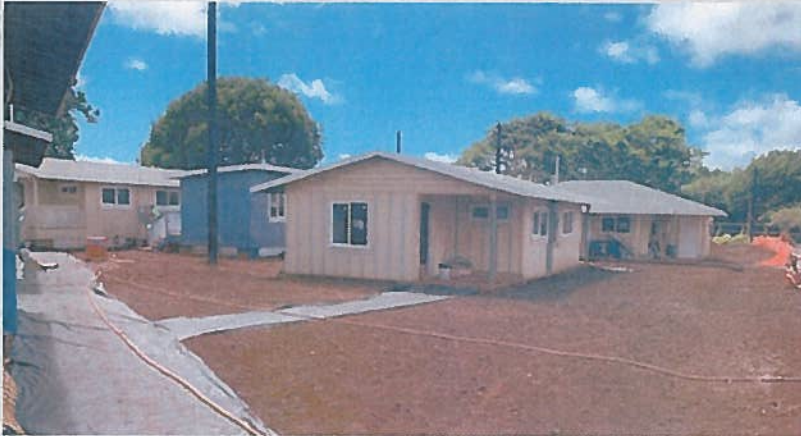
Description of project: The 28-unit project consists of eleven (11) one-bedroom duplexes (22 units), three (3) studio duplexes (6 units), and a management/ laundry building.



6

BTG Kaua'i Chapter

Project Name: Kealaula



7

BTG Maui Chapter

Project Name: Huliau

Location: County owned property in Kahului

Construction Funding: HHFDC

Services & property management funding: 'Ohana zones

Description of project: Renovations to 3 buildings; formerly UH/MCC dormitories; each building has four, 2-bedroom units.

Target population: Families Experiencing Homelessness

Anticipated opening – March 2021



8

BTG Maui Chapter



PROJECT NAME: HULIAU

AN 'OHANA ZONE PROJECT



9

BTG Maui Chapter

Project Name: Wahi Hoomalu O Wailuku

Location: County owned property in Wailuku

Construction Funding: CARES

Services & property management funding: Ohana zones

Description of project: Twenty three (23) 64 sq ft Pallets;
Emergency Shelters

Target population: Individuals experiencing homelessness who are
the highest risk for COVID



10

BTG Maui Chapter



Project Name: Wahi Hoomalu O Wailuku

- Pallets were shipped from Washington.
- Assembled and set up at a local County baseball field in Wailuku.
- Maui County Fire Dept. personnel & the Hawaii Army National Guard assembled the Pallets



11

BTG Hawaii Island Chapter

PUBLIC HEALTH IMPACTS OF COVID-19:

- Increased Outreach efforts
- Increased emergency sheltering
- Mobilized Street Medicine
- Conducted COVID-19 Testing
- Boys & Girls Club stepped up with hot meals as volunteering decreased



12

BTG Hawaii Island Chapter

INCREASED EMERGENCY SHELTERING:



- 50 micro-shelters
- Assembled by the Hawaii County Fire Dept & Hawaii Army National Guard
- Hale Hanakahi (32 micro-shelters) in Hilo
- Ka Lamaku (18 micro-shelters) in Kona



13

BTG Hawaii Island Chapter

HOMELESS OUTREACH

- COVID Info Card
- Outreach Kits - added hand sanitizers & facemasks
- Hand washing stations at encampments
- Encampment Mapping
- ID high-risk individuals
- Review expectations for micro-shelters
- COVID-19 Testing



14

BTG Hawaii Island Chapter

Pocket Sized COVID 19 Info Card

COVID-19 (CORONAVIRUS)

LIVING IN A CAMP

THINGS YOU SHOULD HAVE

- Hand sanitizer or soap and water; both are effective
- Masks. A bandana will do in a pinch but must be clean and used for this purpose only.
- Tylenol or Advil (Acetaminophen or ibuprofen)
- Water
- Electrolyte powder, like EmergenC
- Space 6 feet from others

CONTACT INFO

STREET MEDICINE

streetmedicine@hopeserviceshawaii.org
(505) 217-6502 (call/text)



info@hopeserviceshawaii.org
(505) 955-5050 (call only,
M-F 8:30-4:00)

Facebook: @hopeserviceshawaii

COVID-19 (CORONAVIRUS)

LIVING IN A CAMP: WHAT YOU NEED TO KNOW

- COVID is a coughing illness. Coughing is the main symptom-how the virus spreads.
- If you or your campmates have a new coughing illness, wear a mask, wash or sanitize your hands as much as possible, and stay away from people if you can.
- If you are coughing and have shortness of breath, go to the hospital (Call 911).
- Only go to the clinic or ER if you're really sick. Also, with more people seeking care, spaces are tight and there may be a higher risk of transmission.
- If your campmate is short of breath but won't go to the hospital, keep the pressure on. Until then, have them wear a mask and stay at least 6 feet away from others.
- Kūpuna and those with heart or lung disease are at high risk. Keep an eye on your neighbor.

ADAPTED FROM PORTLAND STREET MEDICINE ON 3/18/2020



15

BTG Hawaii Island Chapter

PUBLIC HEALTH IMPACTS OF COVID-19:



FREE SERVICES FOR PEOPLE EXPERIENCING HOMELESSNESS

In-person medical
evaluation



Telemedicine

Wound care



Connection with
detox/rehab

Prescription
delivery



Medication cost
assistance

Shelter &
housing services



Help enrolling in
insurance

(808) 217-6502



16

BTG Hawaii Island Chapter

ECONOMIC IMPACTS OF COVID-19:

- USDA Fresh Produce Boxes Distribution
- Implemented the County CDBG CV ROUND 1 & County CARES Rent, Mortgage and Non-governmental utilities assistance



17

EMERGENCY SOLUTIONS COVID – ROUND 1 GRANT

BTG Total Award: \$1,567,697

DHS HPO Admin: \$7,681 (.49%)

Ka Mana O Na Helu Admin: \$78,385 (5%)

Eligible activities: Street Outreach, Emergency Shelter, Homeless Prevention & Rapid Re-housing

Kaua'i: \$222,245

Family Life Center: Street Outreach & Homeless Prevention

Catholic Charities Hawaii: Homeless Prevention

Maui: \$592,652

Family Life Center: Homeless Prevention

KHAKO: Emergency Shelter

Hawaii Island: \$666,734

Bay Clinic, Inc: Street Outreach (including emergency health)

Hope Services Hawaii: Street Outreach, Emergency Shelter, Homeless Prevention & Rapid Re-housing



18

BRIDGING THE GAP



B.T.G.

Bridging The Gap

Continuum of Care serving Hawai'i Island, Mau'i & Kaua'i

www.btghawaii.org

Brandee Menino, Chair

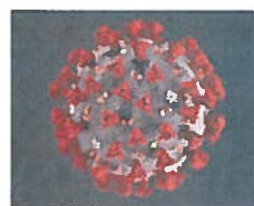
Item V.b.ii.

Partners in Care

**Strategies to address homelessness in
the context of COVID-19**



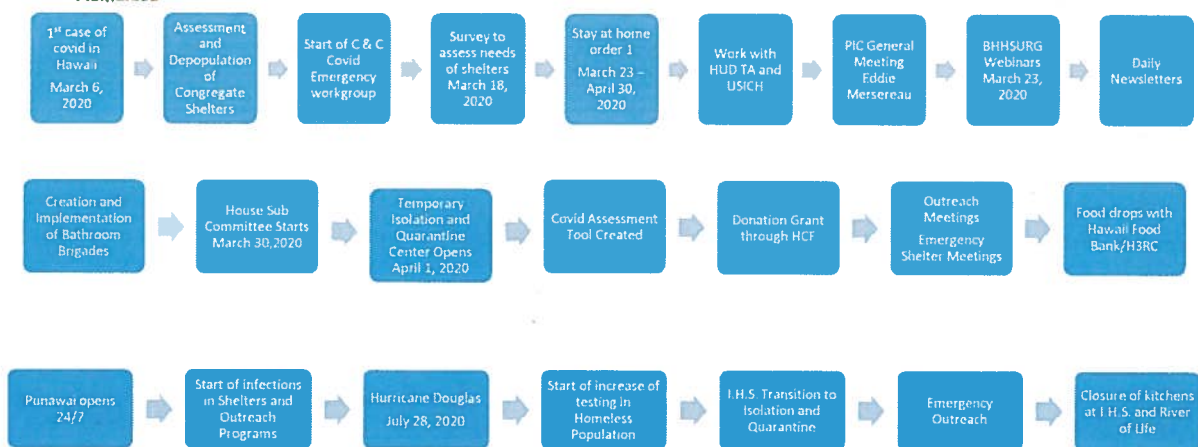
The Oahu CoC Response to COVID₁₉



1



TIMELINE



2



Communication

Getting the right people at the right table who are able to make decisions

Coordination

Ability to work on logistics and bring all resources to the table

Flexibility

Willingness to change direction based on current situation

3



Communication

Weekly Meetings with Scott

Weekly and now bi-weekly Homeless Concerns Meeting

Weekly BHHSURG Webinars

Weekly and now bi-weekly Emergency Management Meetings

Weekly and now bi-weekly outreach Meetings

Weekly and Now bi-Weekly Emergency Shelter Meetings

Weekly House Subcommittee Meetings

Flagging of HMIS files

4



Coordination

Working together to meet the needs of providers and those experiencing homelessness

- CES Touch Bases
- Increase in Landlord Engagement Program activities
- Finding and distributing resources

5



Flexibility

Adaptability to the moment

Respond to new guidelines set forth by CDC and DOH

Review protocols in different regions

Review current status constantly

6

Homeless

Education

ArcGIS Survey123 ▾ My Surveys C

My Surveys + Create a New Survey

All surveys ▾

COVID-19 Screen Tool
by PIC@Oahu

STOP THE SPREAD OF GERMS
Help prevent the spread of respiratory diseases like COVID-19

Stay at least 6 feet (about 2 arms' length) from other people.

6 ft

Click

Safe Communities

7

Homeless

Testing

PROJECT VISION
Hele for Health

Coordination of testing for both clients and staff.

Creation of testing schedule

8



Silver Linings

Better Communication

New Partnerships

Acknowledgement that we can succeed

Improved use of Coordinated Entry System

We need to continue our regular work during crisis times

Item VI.a.

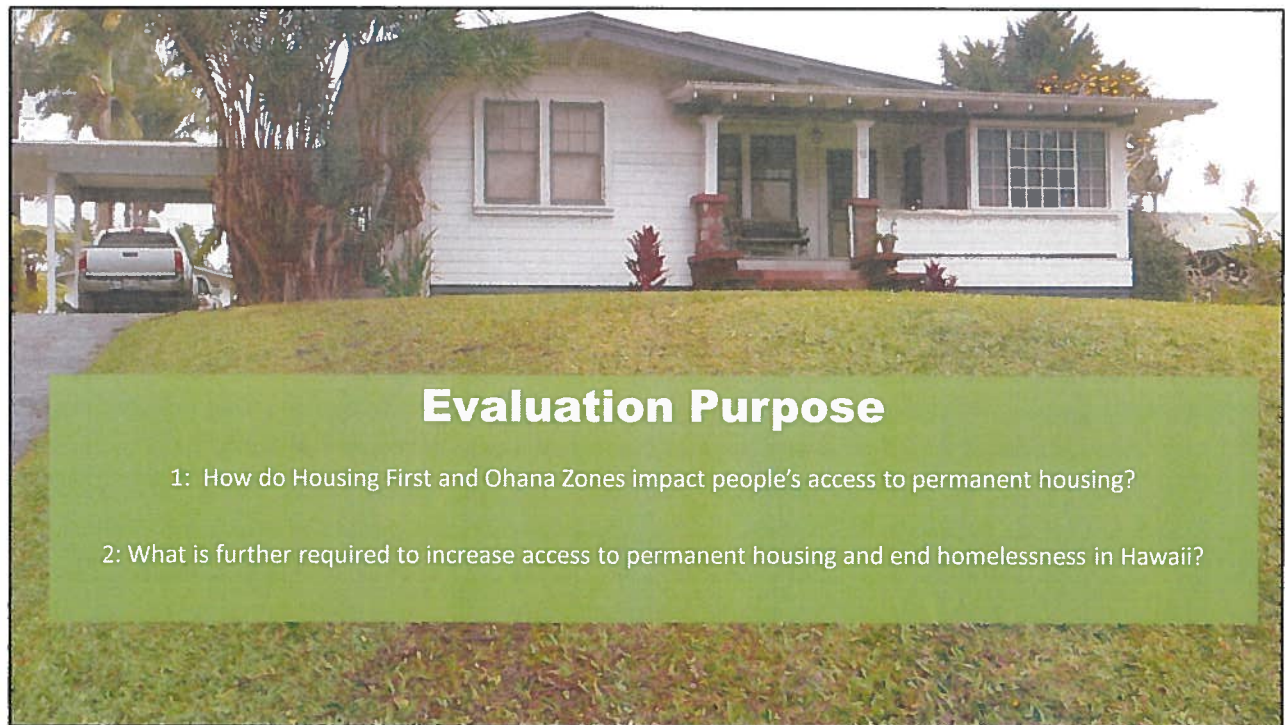
Collaborative Quality Consulting

Active Implementation Frameworks:

Next Steps to Consider



1



2

Evaluation Approach

TYPICAL

Specific focus

Partial view of the system



IMPLEMENTATION SCIENCE

Systems approach

Comprehensive view of the system



3

Active Implementation Frameworks



Implementation Stages – Stage-appropriate activities necessary for successful systems change.



Implementation Drivers – Core components that create an infrastructure that supports sustainable service delivery.



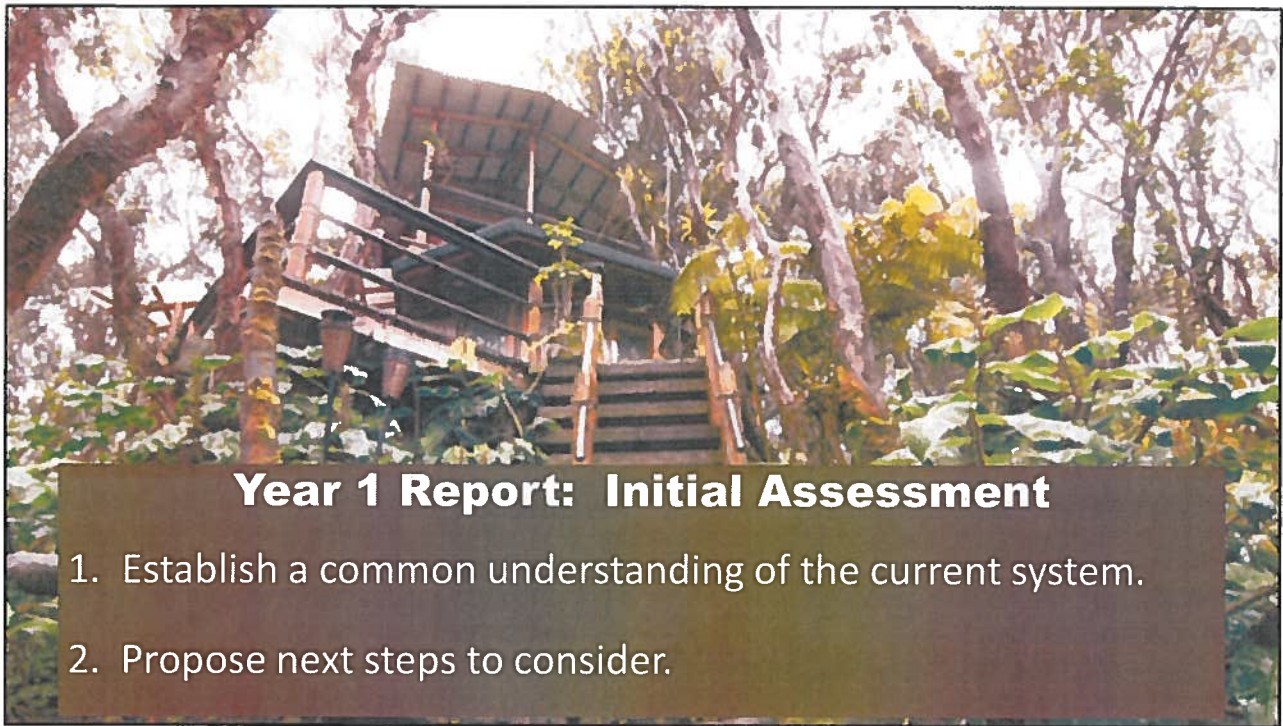
Policy-Practice Feedback Loops – Connecting policy to practice to reduce barriers.



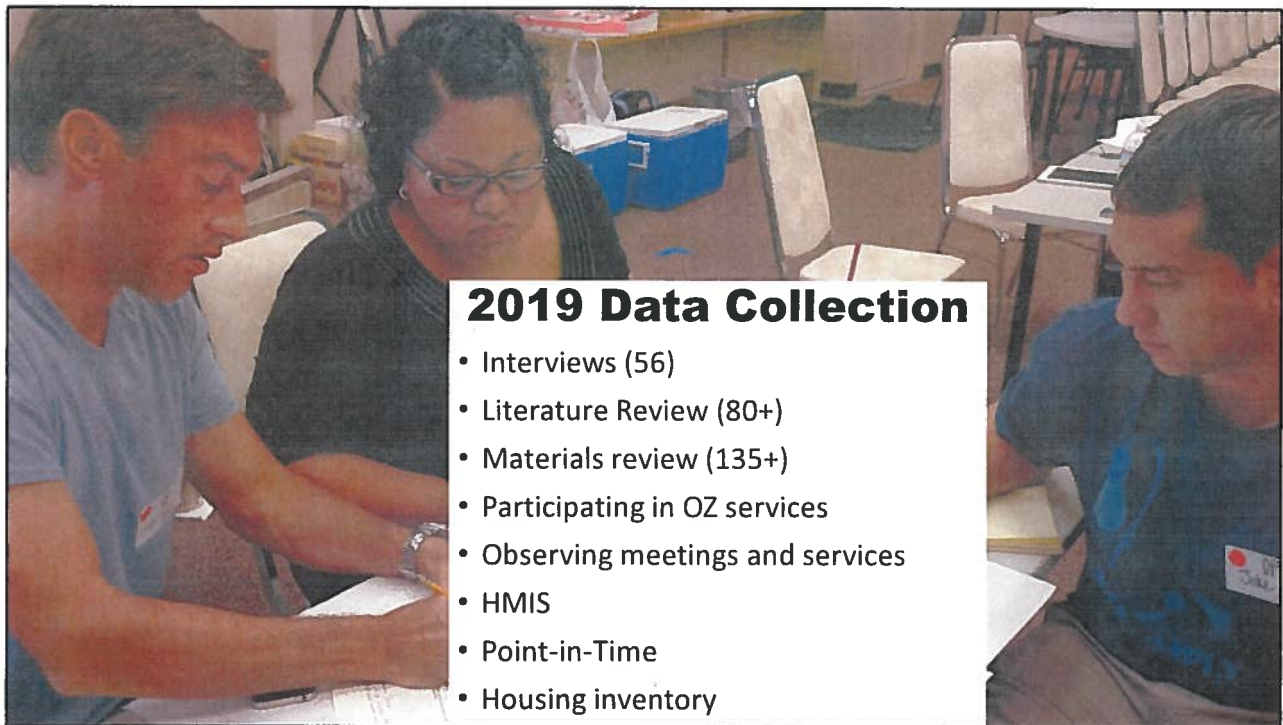
Implementation Support – Support achieves quicker, higher-quality results.

NIRN | NATIONAL IMPLEMENTATION
RESEARCH NETWORK
FRANK PORTER GRAHAM CHILD DEVELOPMENT INSTITUTE

4

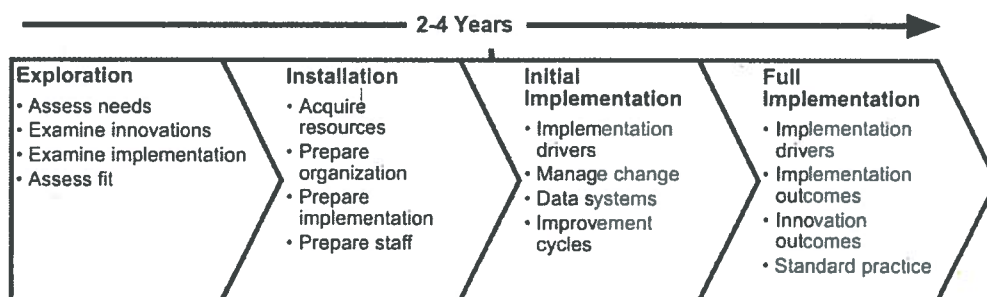


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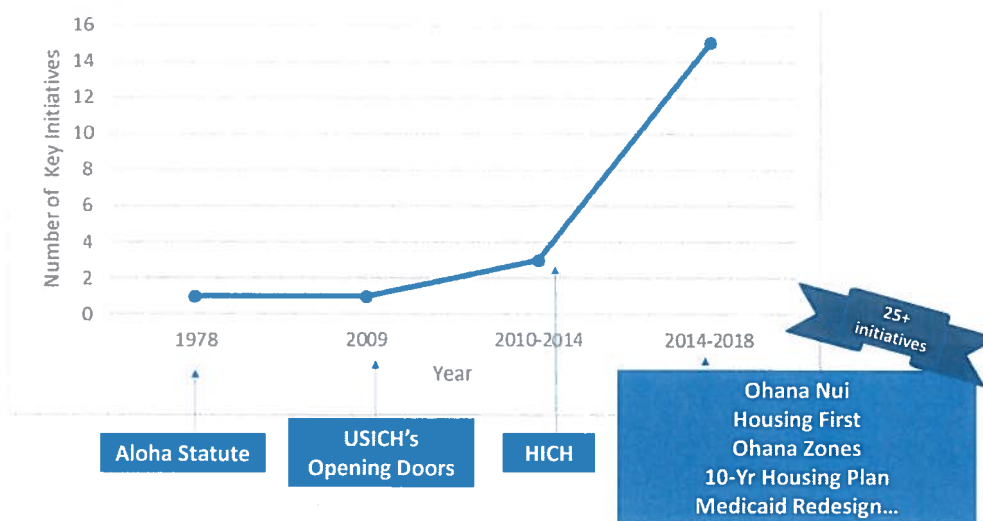
6

Implementation Stages



7

Hawaii's Homelessness-related Initiatives



8

The solution is in progress...

'Houseless' population decreasing... 19% since 2016.

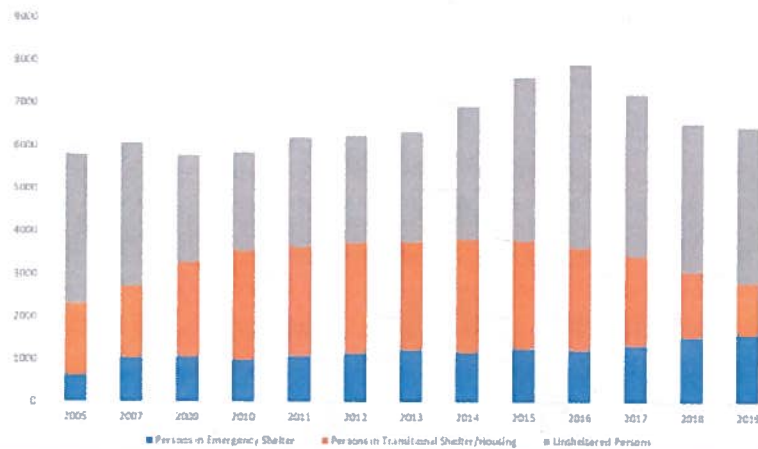
Exits to permanent housing increasing... 25% since 2016.

Permanent housing inventory more than DOUBLED (1220 to 2600 units).

Ohana Zone requirements 100% addressed.



9



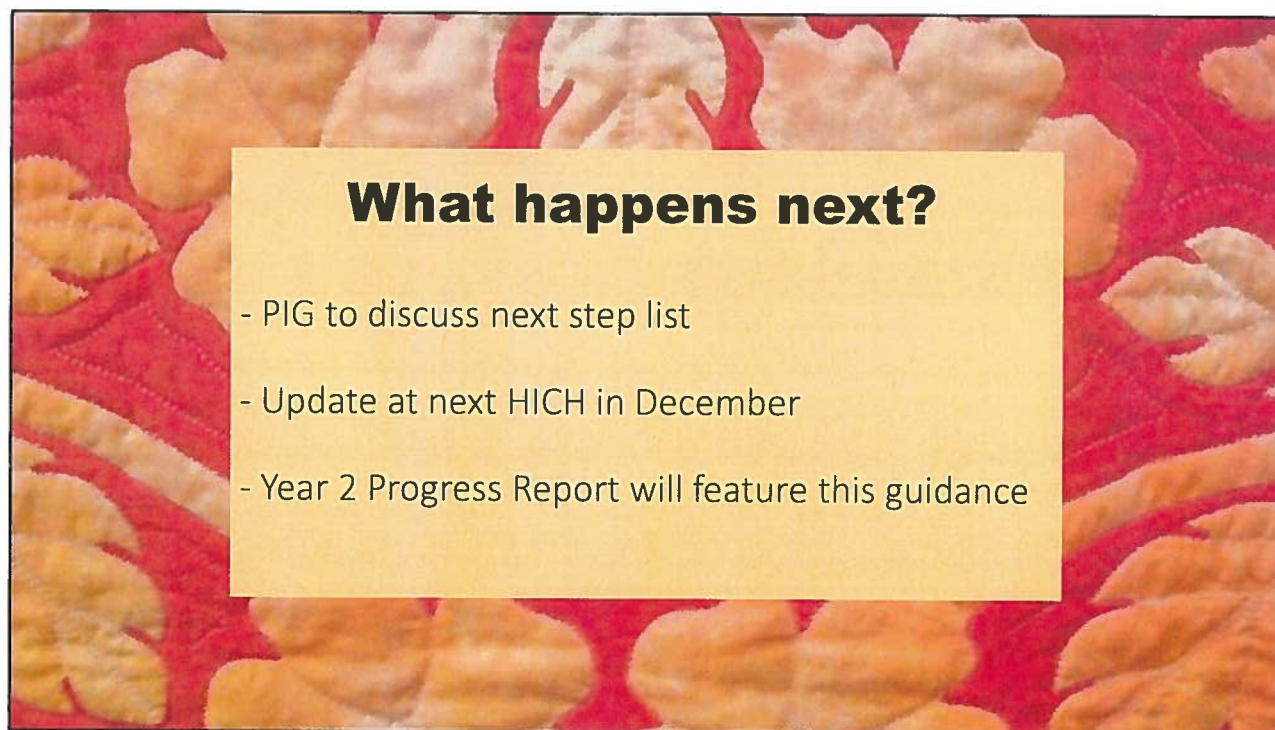
HOMELESSNESS OVER TIME (2005 — 2019)

Governor's Coordinator on Homelessness - 2020

10

Active Implementation Frameworks: Next Steps to Consider		
31		Continue to strengthen inter-divisional coordination for outreach and enforcement to clear public spaces and move people into shelter.
32		Increase Permanent Supportive Housing finance.
33		Scale Assisted Community Treatment street medicine model and build capacity to serve chronically homeless people.
34		Explore ways to engage the business community as partners in ending homelessness and turn complaints into contributions.
35		Develop more opportunities for individual enterprise for people 0-30% AMI through partnerships with artisan collectives, private industry, construction unions, and hospitality industry.
36		Raise awareness and further explore how to scale and coordinate efforts of the faith-based community, including service provision and housing development

15



What happens next?

- PIG to discuss next step list
- Update at next HICH in December
- Year 2 Progress Report will feature this guidance

16

Active Implementation Frameworks: Next Steps to Consider		
	STAGES	
1		Continue to implement the two-part strategy over the next 2-6 years – (1) Support and refine the Housing First approach in practice and (2) Continue increasing affordable housing inventory.
2		Continue to support Ohana Zones investments and adjust contracts to accommodate circumstances.
3		Scale the Ohana Zone allocation when possible.
4		Leverage evidence of improvement to develop a comprehensive communications plan to raise awareness about accomplishments and shift to a more positive key message: the solution is in progress. Proactive messaging.
5		Build on the 'Hawaii State Framework to Address Homelessness' with Ohana Nui vision and develop intersecting strategic operational plans across the spectrum of services.
6		Continue to build alignment among stakeholders with collaborative problem-solving.
7		Establish Client Rights and Fair Hearing process grievance procedures for clients receiving shelter and housing services.
8		Scale eviction prevention.
9		Scale diversion efforts in housing placement process.
10		Introduce protections for renters.

Active Implementation Frameworks: Next Steps to Consider			
11	DRIVERS	competencies	Build a shared understanding of the client process map with all stakeholders. (i.e., BESSD, CoCs, City of Honolulu, county governments, HPO, Med-QUEST, and DOH.)
			Create competency-based practitioner profiles for workers across the components of the process, and use practitioner competencies to develop a comprehensive professional development toolkit to support all Competency Drivers.
12	DRIVERS	competencies	Expand 'Peer Specialist' opportunities currently included in HPO contracts for people with lived experience of homelessness to enter the workforce as outreach and shelter workers and other service roles.
13			Establish a common understanding and language for the roles and responsibilities of all stakeholders across the homeless service system to reduce duplication of efforts and clarify domains of responsibility.
14	DRIVERS	leadership	Offer voluntary <i>ho'oponopono</i> and/or mediation services to all of those impacted by system change to resolve interpersonal conflicts and establish more positive ways to work together.
15			Build capacity for inter-jurisdictional collaborative problem-solving across all leadership structures in the system.
16	DRIVERS	leadership	Promote a balance of power and horizontal and vertical alignment in governance. Reflect on inclusion, roles and balance in leadership structures like HICH, CoC, federal, state and local governments.
17			

Active Implementation Frameworks: Next Steps to Consider		
	DRIVERS (continued)	organizational infrastructure
18		Leverage HMIS split into an opportunity to develop IT Enterprise into a Statewide Data Warehouse to integrate client data across multiple state systems that might include.
19		Finalize state’s effort to transition to the Data Warehouse with a Cooperative Agreement among all stakeholders including CoCs, state, city, and counties.
20		Develop IT solution within both Coordinated Entry Systems to access real-time inventories for: shelter, HPHA, and vouchers.
21		Align methodology for Point-in-Time Count between Bridging the Gap and Partners in Care.
22		Expand and aggregate statewide data collection: budget and services and map the data.
23		Use findings from this assessment as a discussion tool to align next steps.
24		Refine service contracts across jurisdictions.
25		Create a competency-based practice profile for leaders to develop leadership capacity with a common approach to generate further alignment among leaders.
26		Explore funding mechanisms to support providers in upgrading shelter facilities to increase client privacy.
27		Continue implementation of 16 Ohana Zones projects and resolve barriers that arise.
28		Continue to develop low-income and affordable housing by reinvigorating and expanding the 10-Year Affordable Rental Housing Plan to embrace people with all income levels.
29		Increase capacity for in-patient mental health and substance abuse treatment, and increase length of stay to address the need for specialized transitional housing
30		Leverage the impact of Ohana Nui philosophy with interdisciplinary alignment using a collective agreement.
31		Continue to strengthen inter-divisional coordination for outreach and enforcement to clear public spaces and move people into shelter.

Active Implementation Frameworks: Next Steps to Consider			
31			Continue to strengthen inter-divisional coordination for outreach and enforcement to clear public spaces and move people into shelter.
32			Increase Permanent Supportive Housing finance.
33			Scale Assisted Community Treatment street medicine model and build capacity to serve chronically homeless people.
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35			Develop more opportunities for individual enterprise for people 0-30% AMI through partnerships with artisan collectives, private industry, construction unions, and hospitality industry.
36			Raise awareness and further explore how to scale and coordinate efforts of the faith-based community, including service provision and housing development

Active Implementation Frameworks: Next Steps to Consider		
	FEEDBACK LOOPS	Explore application of Plan-Do-Study-Act cycles in current initiatives to help the homeless service system move from compliance to improvement.
	IMPLEMENTATION SUPPORT	Use materials and tools in this report to make a shared decision about priorities for continuing implementation of Housing First approach and Ohana Zones.

Item VIII a.

Chairperson and Staff Reports

HICH Staff Activities (July 2020 to September 2020)
and Systems Performance Benchmarks

Highlights of Hawaii Interagency Council on Homelessness Staff Activities

Report for July 2020 to September 2020

This report summarizes highlights of Hawaii Interagency Council on Homelessness (HICH) staff activities and publications for the months of **July 2020 through September 2020**. Please feel free to share any of this information with your agency leadership and colleagues. For more information, please contact Scott Morishige, Coordinator on Homelessness, at 586-0193 or by e-mail at scott.s.morishige@hawaii.gov.

Key Updates Regarding Homelessness and COVID-19.

Much of the effort of the Chair and Staff during this period has focused on building community capacity among service providers to respond to the changing situation during the COVID-19 pandemic. Working collaboratively with HICH members, the following key actions were undertaken:

- **Coordinated response to COVID-19 cluster at Oahu shelter.**

In August 2020, the Institute for Human Services (I.H.S.) men's shelter reported that a number of staff and clients had tested positive for COVID-19. The Department of Health (DOH), City & County of Honolulu, Department of Human Services Homeless Programs Office (HPO) and Partners in Care (PIC) worked collaboratively to respond to the situation and to support the provider and its staff. Specifically, I.H.S. temporarily transitioned to a temporary quarantine and isolation center, and DOH provided epidemiological support with testing, contact tracing, and triage of higher acuity individuals to the Temporary Quarantine and Isolation Center (TQIC). PIC, HPO, the City, and providers also conducted outreach in the areas around the shelter to offer testing to unsheltered individuals in the area and connect them to existing isolation and quarantine facilities. The City also partnered with PIC and other entities to provide meal support to unsheltered individuals when I.H.S. meal services to the public were temporarily suspended. GCH later worked together with I.H.S., DOH, and staff from Project Vision to conduct a webinar session for providers about the experiences of I.H.S. with COVID-19 and lessons learned. A recording of the webinar regarding the I.H.S. response can be found online at <https://health.hawaii.gov/bhhsurg/weekly-webinar> (see August 31, 2020 webinar recording).

- **Expansion of Isolation and Quarantine Facilities.**

The DOH and City & County of Honolulu worked together to expand the number of isolation and quarantine sites through the use of hotel facilities on Oahu. The City leased the hotel space, and DOH utilized BHA contracted providers to provide supportive wrap services for individuals placed in isolation and quarantine. The connection to isolation and quarantine is facilitated by DOH's CARES line based on an online assessment completed by individuals or providers requesting isolation/quarantine services. DOH is currently working to increase the number of isolation and quarantine sites statewide – particularly on Hawaii island and Maui – utilizing a similar partnership between DOH Behavioral Health Administration and the respective counties.

- **Convened coordination meetings to support provider outreach efforts, and facilitate information sharing among funders.** Staff also convened a series of weekly online meetings with select groups of providers and government funders to streamline communications. While initial meetings identified gaps in services, more recent meetings have served as ways to share updates and new information regarding COVID-19. Beginning in September, GCH began convening bi-weekly provider meetings in Hawaii County, and is working to begin convening similar meetings in Maui and Kauai counties.

- **Expand testing options for homeless populations.**

Staff worked with DOH and the continua of care to advocate for expanded testing options for individuals experiencing homelessness. The Chair worked to establish a relationship with Project Vision Hawaii, which was funded by the City & County of Honolulu to provide COVID-19 testing for the homeless. Project Vision was integrated into the Department of Health's continuum of care for COVID-19, and a monthly testing schedule was established for Oahu. The Chair also worked to connect Project Vision Hawaii's testing program with the POST so that testing is provided two times per week for program participants. Hawaii County also worked to establish a mobile testing program, and contacted island shelter facilities and congregate care settings to establish a regular schedule for testing.

Distribution of Personal Protective Equipment.

In collaboration with DOH and DHS, staff collected donations of PPE (e.g. masks, gloves, sanitizer, etc.) through the BHHSURG Community Resilience Hubs, and distributed these items to homeless service providers – including outreach and emergency shelter programs – statewide. The Chair and staff also worked to share information about a new PPE distribution site established by the Hawaii Emergency Management Agency (HI-EMA). A webinar sharing information about PPE resources can be found at <https://health.hawaii.gov/bhhsurg/weekly-webinar> (see September 8, 2020 webinar recording).

- **Utilization of State Ohana Zone resources to support COVID-19 response.**

The State's Ohana Zone programs have been a critical component of the homeless system response to COVID-19. To learn more, visit <https://homelessness.hawaii.gov/ohana-zone-funded-projects>. A few key examples include:

- The Honolulu Police Department's Provisional Outdoor Screening and Triage (POST) program at Keehi Lagoon Beach Park, which has the capacity to accommodate up to 150 tents for homeless individuals and provides connection to social services. Individuals can access the POST by calling the 24-hour intake line at 768-4668 (768-HONU). GCH staff also worked to establish a connection between POST and DOH isolation and quarantine sites so that homeless individuals leaving isolation can be discharged to the POST to work with providers on longer-term housing.
- Expanded shelter capacity through tiny home units in East Hawaii (Hale Hanakahi) and West Hawaii (Ka Lamaku). The tiny home units were purchased by Hawaii County as part of their existing Ohana Zone contract, and provides an additional 50 units island-wide.
- Expanded shelter capacity through hotel units in West Hawaii for vulnerable individuals with risk factors for COVID-19. The hotel units were supported through Ohana Zone funds from a contract with the Hawaii Department of Health.
- Construction of new housing for families transitioning out of homelessness on Kauai at the Pua Loke site in Lihue. Ohana Zone funds supported housing construction and will also pay for on-site case management and supportive services.
- Expanded housing capacity for seniors and households fleeing domestic violence on Oahu. Ohana Zone funds enabled the City to support two permanent supportive housing projects for vulnerable populations at separate City-owned properties.

- **Advocacy for State peer-to-peer support session facilitated by the U.S. Interagency Council on Homelessness.** In 2019, the Chair reached out to the U.S. Interagency Council on Homelessness (USICH) to advocate for a series of meetings with State homeless coordinators from different jurisdictions nationwide. As a result of the Chair's advocacy, USICH will be convening its first State-to-State peer convening on Friday, September 18th.

- **Advocacy for State law enforcement Crisis Intervention Training (CIT).**

The Chair has been working with DOH, Department of Public Safety, and DLNR to advocate for CIT for

State law enforcement officers. As a result of the Chair's advocacy, the Hawaii Health & Harm Reduction Center and NAMI Hawaii convened two cohorts of CIT for staff from the Sheriff Division and Division of Conservation and Resource Enforcement (DOCARE). Training included sessions on mental health and substance abuse, response to trauma, and a general overview of homeless services.

Reports and Plans

Staff is currently working with consulting Collaborative Quality Consulting on the development of a legislative report regarding Year 2 of the Ohana Zone program, as well as updates to the Hawaii State Framework to Address Homelessness and Ten-Year Strategic Plan to Address Homelessness. The Year 1 recommendations from the 2019 Ohana Zone evaluation form the basis of the draft updates to the framework and strategic plan.

Staffing Update

The Governor's Coordinator on Homelessness is in the process of recruitment for the Administrative Assistant on Homelessness position. Act 9, SLH 2020 also added two new unfunded Community Development Specialist positions to assist with homeless coordination. In addition, the Chair is providing supervision for a Bachelor's level and Master's level practicum student from the Myron B. Thompson School of Social Work.

Travel Reports

There was no travel that took place during this reporting period.

Ongoing Activities

The HICH Chair and staff continue to support efforts to address homelessness through a variety of activities as follows:

- **Program development and monitoring of Ohana Zone funded programs.**
The Chair and staff assisted in supporting efforts related to the program development, monitoring, and implementation of various Ohana Zone funded programs. Approximately one-third of funding for the program has been expended as of September 2020. All programs with the exception of the Kukuioia project on Hawaii island and Huliau Affordable Housing project on Maui have been implemented, and Kukuioia and Huliau are expected to launch in early 2021.
- **Participation in HUD technical assistance efforts related to unsheltered homelessness in Honolulu.**
The Chair and staff participate in regular phone calls with HUD technical assistance providers, as well as staff from the City & County of Honolulu's Office of Housing and Department of Community Services, Partners in Care Executive Director and board members, and staff from the DHS Med-QUEST Division. Technical assistance is being provided to support allocation of Emergency Solution Grant monies provided through the CARES Act.
- **Facilitation of Homeless Outreach Funders Group.** The Chair and staff facilitate regular monthly meetings of a Homeless Outreach Funders group that will convene on the third Friday of each month. The funders group includes representatives from the four counties, the U.S. Department of Veteran Affairs, the Hawaii Department of Health, Hawaii Department of Human Services, and the Office of Youth Services. The initial discussions of the group will focus on data sharing strategies, as well as capacity building efforts for service providers.
- **Support for partnerships with the healthcare and behavioral health sectors.**
The Chair and staff continued support the strengthening of partnerships between the homeless services system and the healthcare and behavioral health sectors, including participation in phone calls and in-

person meetings with consultants from the National Council for Behavioral Health and the Corporation for Supportive Housing. In addition, the Chair and staff continue to meet regularly with the Queen's Care Coalition, as well as meetings with DHS Med-QUEST Division staff tasked with implementation of the 1115 Medicaid waiver amendment for tenancy supports. Staff have also been engaged in active referrals to the Queen's Care Coalition, and assisted with coordination between shelter providers, outreach providers, and the emergency department navigation staff to facilitate better coordination of care.

- **Support for partnerships with law enforcement and the criminal justice systems.** The Chair and staff continue to meet regularly with law enforcement officers from the Honolulu Police Department, Hawaii Department of Public Safety's Sheriff Division, and the Department of Land and Natural Resource's Division of Conservation and Resource Enforcement (DOCARE). As mentioned earlier, Crisis Intervention Training (CIT) was provided for State law enforcement agencies in September 2020.
- **Coordination of homeless outreach and land management/public safety actions.** The Chair and staff continue work in collaboration with State agencies, county staff and legislators to respond to concerns about unauthorized encampments on public lands. Staff worked closely with the Hawaii Department of Transportation, Department of Hawaiian Home Lands, Department of Land and Natural Resources, and the University of Hawaii to support coordinated outreach and enforcement actions on Oahu and the neighbor islands. In particular, staff facilitated coordination with the counties of Maui, Hawaii, and Kauai to arrange enforcement of unauthorized camping/trespass on State lands in those respective counties. Staff has also begun circulating the State of Hawaii's monthly enforcement schedule to the Continua of Care. Initial enforcement efforts have focused primarily on Oahu, but enforcement actions on the neighbor islands have been shared with the County Homeless Coordinators and local CoC contacts to increase awareness of these activities.

The Coordinator also regularly receives and responds to correspondence from members of the general public via telephone, e-mail, and letters.

For more information, please contact the Governor's Coordinator on Homelessness and HICH staff at (808) 586-0193 or by e-mail at gov.homelessness@hawaii.gov.

HAWAII INTERAGENCY COUNCIL ON HOMELESSNESS SYSTEMS PERFORMANCE BENCHMARKS (SEPTEMBER 2020)

The following four performance benchmarks are used to evaluate the implementation of the Hawaii State Framework to Address Homelessness and ten-year strategic plan to end homelessness:



COUNT
Number of people experiencing homelessness according to the statewide Point in Time Count.

6,458 people
(As of June 15, 2020)



CAPACITY
Number of permanent housing beds for people experiencing homelessness in Hawaii.

4,553 beds
(2019 data)



HOUSING PLACEMENTS
The percentage of people exiting a homeless program that are placed into permanent housing.

47% housed
(As of July 2020)



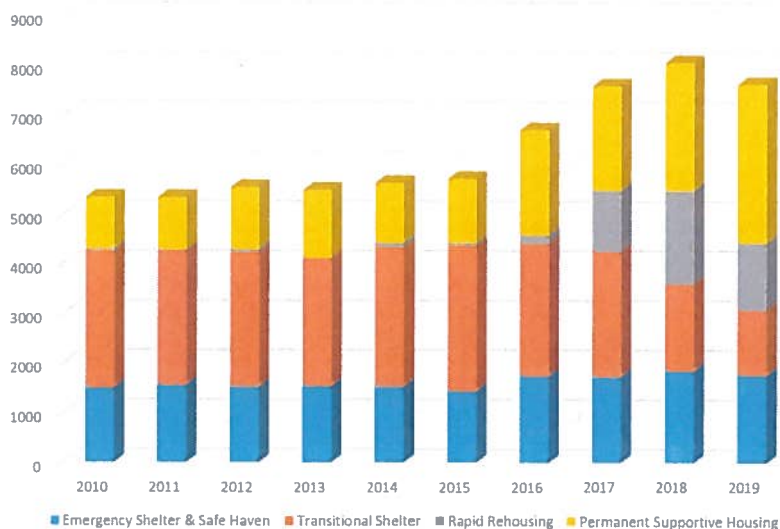
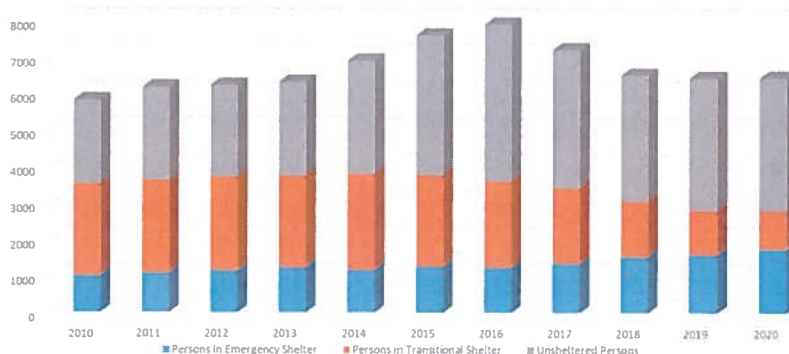
LENGTH OF STAY
The average number of days a person is enrolled in a homeless program, such as shelter.

147 days
(As of July 2020)

COUNT – ESTIMATED NUMBER OF HOMELESS PERSONS IN HAWAII

The statewide Point in Time count **decreased by 18.4% since 2016**. The number of individuals in transitional shelter has steadily declined since 2016 – from 2,387 to 1,067. Meanwhile, the number of individuals in emergency shelter has steadily increased during that same period – from 1,226 to 1,741.

The number of unsheltered individuals has decreased 15% since 2016, but still represents over half of individuals (56%) in the count and had a slight increase between 2019 and 2020.



CAPACITY – NUMBER OF BEDS FOR HOMELESS PERSONS

The number of **permanent housing beds for people experiencing homelessness increased 250% between 2014 and 2019** – from 1,298 to 4,553.

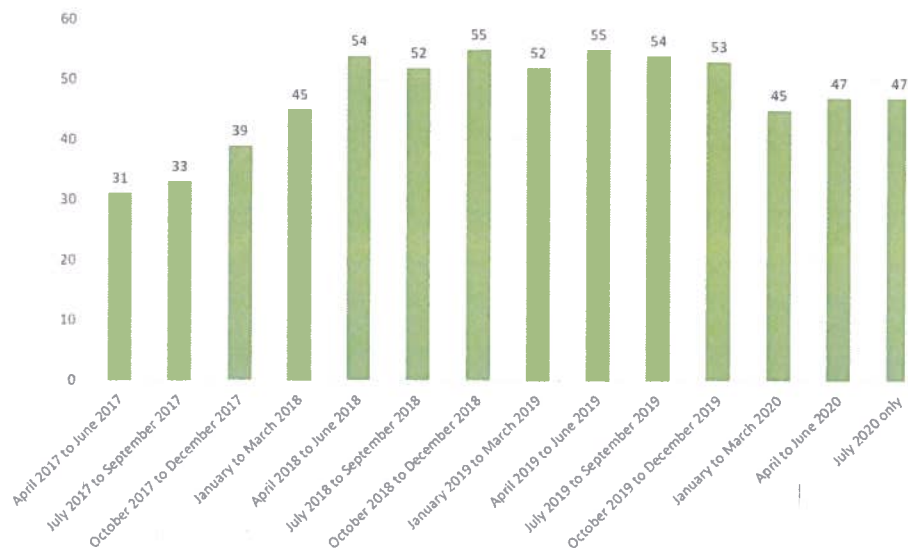
The overall number of beds in the statewide Housing Inventory Count, including shelter and permanent housing beds, increased over 43% during that same period. Housing inventory for 2020 is not yet available.

The increased capacity reflects increased levels of state, county, and federal support.

HOUSING PLACEMENTS – NUMBER OF PEOPLE WHO ARE PERMANENTLY HOUSED

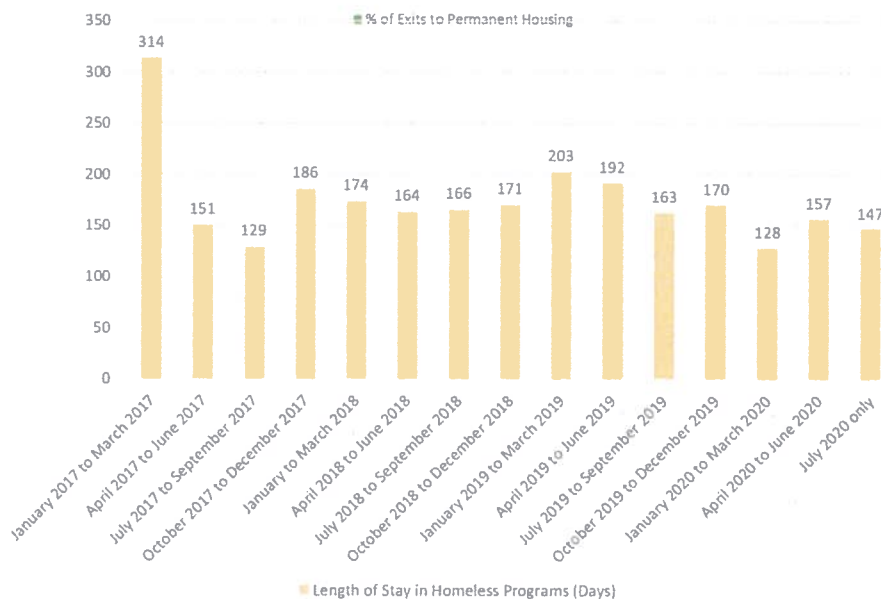
Between April 1, 2020 and June 30, 2020, 47% of individuals exited homeless programs to a permanent housing placement. The rate remained the same in July 2020.

On Oahu, the percentage of exits to permanent housing in July was 41.3%. In comparison, the percentage of exits to permanent housing for the neighbor islands was 61% during the same period.



LENGTH OF STAY – TIME SPENT IN HOMELESS PROGRAMS

Since the first quarter of the calendar year 2017, the average length of stay in homeless programs decreased from 314 days to 147 days. For the month of July 2020, the average length of stay in emergency shelter is 114 days for Oahu and 92 days for the neighbor islands. For transitional shelter, the average length of stay is 313 days for Oahu and 245 days for the neighbor islands. Length of stay is a key measure of efficiency within the homeless service system.



KEY DATA SOURCES

Data for the performance benchmarks are obtained from the following key sources:

Statewide Point in Time Count. The count is an unduplicated count of sheltered and unsheltered homeless persons on a single night in January, and is conducted annually. Data is submitted annually to the U.S. Department of Housing and Urban Development.

Housing Inventory Count. The count is an inventory of programs that provide beds dedicated to people experiencing homelessness. Data is submitted annually to the U.S. Department of Housing and Urban Development.

Homeless Management Information System (HMIS). The HMIS is a local data system used to collect client-level data for programs providing housing and services for people who are experiencing homelessness or at risk of homelessness. Data related to permanent housing placements and length of stay in homeless programs are derived from the HMIS.

For more information, please contact 586-0193 or gov.homelessness@hawaii.gov.

Item VIII b.

Written Reports from Members

Written Updates to the Hawaii Interagency Council on Homelessness
September 21, 2020— 10:00 a.m. to 12:00 p.m.
(Reports consolidated by the Office of the Governor's Coordinator on Homelessness)

Department of Business, Economic Development, and Tourism (DBEDT)

Kahului Emergency Housing

HHFDC and the County of Maui have executed an MOU for development of the project. The County has contracted an Architect and General Contractor for conversion of the former dorms into transitional housing. In addition to conversion of the former dorms, the County also plans to develop new transitional housing at the site and will be procuring a planning consultant to prepare a Master Plan. An Environmental Assessment for the project is in process. HHFDC and the County will be executing a lease from the County to HHFDC and a right-of-entry (ROE) from HHFDC to the County for the project.

Laiopua Village 9

HHFDC and the County of Hawaii have executed an MOU for development of the project and HHFDC has issued a ROE to the County. The County has completed an EA and is preparing a grading plan for the project and an access road benefitting the County's project and a future HHFDC project site. HHFDC and the County are in process of extending the ROE and revising the project's ROE and MOU to allow development of the access road.

Pua Loke Ohana Zone

HHFDC and the County of Kauai have executed an MOU for development of the project. Site work has been completed and vertical construction is underway with four buildings nearing completion. First occupancies are expected later this year.

Department of Hawaiian Home Lands (DHHL)

Department of Hawaiian Home Lands has assisted over 70 households with Rental Assistance via our DRAP (DHHL Rental Assistance Program) administered by AUW since the start of the COVID-19 pandemic. The program was expanded from 6 months of assistance to 12 months of assistance with the support of the Hawaiian Homes Commission.

Currently, DHHL is requesting assistance from HUD to determine whether security deposit/rental assistance for native Hawaiian homeless on the DHHL Wait List would jeopardize their status to accept other, more long-term vouchers, i.e. Permanent Supportive Housing, and if not to extend the DRAP program to qualified homeless individuals. Hopefully, this item will be resolved by the HICH meeting.

Department of Defense (DOD)

Hawaii Army National Guard Task Force Medical is providing medics to support the City & County of Honolulu Ke'ehi Lagoon Provisional Outdoor Screening Triage (POST) sites. Task Force Medical personnel will provide humanitarian and medical care (temperature checks, wellness checks, deliver meals) to those occupants at the Ke'ehi Lagoon POST sites to control the spread of COVID-19 in our homeless population communities.

TF-MED B Co conducted 13 medical treatments throughout the week —bringing the new aggregate data to a total of 288 medical treatments at the POST sites.

TF-MED expects to continue its partnership with the City and County of Honolulu and support the Honolulu Police Department in its efforts to control the spread of COVID-19 throughout our homeless population.

Office of Hawaiian Affairs (OHA)

The Office of Hawaiian Affairs houseless advocacy shifted with the pandemic. We've continued to advocate, when possible, for houseless people on the county level. At the moment, OHA is preparing for our 2021 Legislative Session, where we plan to continue to advocate for fundamental change for houseless people in Hawai'i.

County of Hawaii

Keolahou Emergency Shelter and Assessment Center

The County is completing the procurement process to complete renovations that will include addressing plumbing and electrical concerns, upgrading restroom facilities to include four (4) additional shower space, installation of a laundry facility, participant large storage space, bike racks and completing kitchen renovations. Work is scheduled to start in early October 2020. Upon completion of all work, the shelter will provide a total of 50 beds. HOPE Services Hawai'i is the Service Provider.

KukuiOla

On Wednesday, September 9th, the County held a quiet and intimate blessing of the site. The Design Build Contract with Tinguely Development has been finalized and pre-construction work on the site started on September 14, 2020. Upon completion, the project will have an Assessment Center, Community & Kitchen Center, Manager's Unit and 16 Emergency Shelter units. The total project design includes additional community space and an additional 48 Permanent Housing units.

Assessment Center at Ulu Wini

The work at the Assessment Center continues, offering the much-needed navigation of resources for families in West Hawai'i.

Response to COVID-19

In partnership with non-profit providers, implemented the following temporary emergency shelter units for identified unsheltered community members:

- *Financial Navigation Program:* Funded through a grant from the Cities for Financial Empowerment Fund. The remote, confidential, financial navigation is available at no cost to all community members. The "navigator" connects the community member to resources and referrals that might be helpful.
- *HOPE Express at the Holiday Inn in West Hawaii:* Shelter and case management services provided to program participants. Funding from the Department of Health and private funders. Program ended in early July 2020, relocating all the program participants to other housing opportunities in the community.
- *HOPE Express at the Kamuela Inn in Waimea:* Shelter and case management services provide to program participants. Funding from the Department of Health and private funders. Program ended in early July 2020, relocating all the program participants to other housing opportunities in the community.
- *Hale Hanakahi:* Initially opened in April 2020, under the direction of Neighborhood Place of Puna, provided 24/7 shelter operations for up 32 shelter units in East Hawai'i. Initial program

was funded by Department of Health and ended in early July 2020. In mid-August 2020, with CARES-Treasury, the County executed a contract with HOPE Services Hawai'i to provide 24/7 emergency shelter operations for singles and couples. The program is scheduled to end in December 2020.

- *Ka Lamaku*: In operations. Provides up to 18 shelter units and case management services in West Hawai'i. Opened in early July 2020 with funding from the Emergency Solutions Grant and CARES-Treasury. The project is scheduled to close at the end of the calendar year 2020.
- *CDBG – CV1 Funding*: The County, Office of Housing and Community Development, allocated \$ 300,000.00 to support a Rent Relief Program. HOPE Services Hawaii was selected to manage the program. The program was designed to ensure households are provided with financial assistance to prevent eviction and homelessness.
- *Rent and Mortgage Assistance Program*: Through CARES-Treasury Funds, allocated \$8,500,000.00 to provide financial assistance to households whose household income was impacted by a loss of employment or reduction in hours due to the COVID pandemic. Contract managed by Hawaiian Community Lending.
- *Non-government Utilities Program*: Through CARES-Treasury Funds, allocated \$1,500,000.00 to provide financial assistance to households whose household income was impacted by a loss of employment or reduction in hours due to the COVID pandemic. Contract managed by Hawaii County Economic Opportunity Council (HCEOC).

County of Kauai

Outreach

- Aug. 3-5 at 5 Beach Parks: TBRA/HCV signups, 64 applications
- Sept. 8 at Lydgate Beach: Trash cleanup, provided dumpsters, trash bags and latex gloves, encouraged the beach residents to take ownership of the area and clean up.
- Sept. 18 in Lihue: 8 agencies providing services/items such as hygiene products, bus passes, TBRA/HCV/MEDQUEST/EBT signups, reading glasses, etc.

5 Beach Encampment

As of 8/4, 296 individuals are permitted to live in those camps.

TBRA

Applied & approved for additional HOME funding. Arriving in October. Currently, maxed out with 30 vouchers issued. Waitlist at 138 applicants (253 individuals).

Kealahula Ohana Zone

Projected opening in October. 22 1-bedroom units (\$700 a month), 7 studios (\$500 a month). No security deposits.

County of Maui

Coordinated Entry System

Continually working and problem solving with the participating agencies to address individuals and families that are not being referred via the CES automated system for a variety of reasons. Holding Case Conferences to address these types of matters.

Compassionate Responses (Homeless Encampment Clean-up Efforts)

Due to COVID-19 and the CDC guidelines, the “Compassionate Responses” to address the cleaning up of homeless encampments has not occurred since early February, 2020. As several of the encampments are growing in population and presenting as a public health and safety issue, discussions are on the table to strategize the addressing of these encampments.

Other Matters:

The Maui Ohana Zone project (former UH Maui College dorms) is quickly moving forward in it’s construction. A blessing for the project, named “Huliau”, was conducted on July 14, 2020.

In response to the COVID-19 pandemic, the County purchased and erected 23 pallet tiny home units which were placed at the Waiale Community Park in early May 2020. The project, named Wahi Hoomalu O Wailuku, was to address the homeless population that are at high risk of contracting and being physically affected by the COVID-19 virus. This would include the elderly and/or individuals with pre-existing health conditions that would make them highly susceptible to the disease. The Homeless Division was tasked with the daily operations of the project to ensure that all participants were afforded a safe and sanitary place to reside while mitigating the risk of acquiring COVID-19.

City & County of Honolulu

Status of COVID-19 Response System Implementation

As outlined in the City & County of Honolulu’s Five Strategies Outlined in “Addressing Homelessness in Light of COVID-19” (published in April 2020)

- Support expanded hygiene and sanitation resources
 - The City-funded (Department of Community Services, DCS) Pūnāwai Rest Stop continues to be available 24/7
 - Unattached park comfort stations are open during normal hours with selected comfort stations open 24/7
 - Mobile hygiene facilities continue to serve gap areas and special needs
- Address resource needs of providers and city staff in a timely manner
 - Bi-weekly Homelessness Working Group, City-State-provider interagency leadership coordinating meetings: ensures communications, planning, and action around key areas of common concern
 - All efforts coordinated through the City Department of Emergency Management
- Provide quarantine/isolation facilities for those unable to self-quarantine
 - The Ka’aahi Temporary Quarantine and Isolation Center (TQIC), a City-HDOH (Hawai’i State Department of Health) partnership, has been fully operational since April and has served 194 homeless clients (as of 9/15)
 - Due to the outbreak at IHS Sumner, that facility was turned into a TQIC, going back into normal operations on 9/14
 - Additional hotel rooms have been leased to address ISOQ needs for residents of O’ahu regardless of housing status; assignment is based on medical acuity and is coordinated through Hawai’i CARES 24/7 at 832.3100; as of 9/15, 293 units total are leased with 133 units available and 113 units with 180 people occupied
 - The City contracted with a Waikiki hotel to add 130 of the 293 rooms available to HDOH for isolation/quarantine purposes
- Expand shelter capacity

- The Provisional Outdoor Screening and Triage Facility (POST), operated by HPD, funded by both City and State resources, and opened in April, continues to serve unsheltered homeless persons at Ke'ehi Lagoon Beach Park; as of 9/11, POST has served 481 unsheltered homeless persons with 46% (219 persons) positive placement rate (positive placement = exit to other shelter, treatment, relocation to continent, family reunification, and permanent housing)
- Recent average occupancy at POST has been around 70 persons with a maximum operational capacity of 150 units (each unit can accommodate up to three persons)
- POST does not require a COVID-19 test for admittance but clients must agree to testing when it is offered; POST will receive COVID-19 positive clients who have a medical clearance
- Transportation to POST (and shelters and treatment facilities) is available 24/7 coordinated through the POST line; in August 232 persons took advantage of this service; as of 9/14 transportation for COVID-19 positive clients also began coordinated through the Hawai'i CARES line (funded by DCS)
- Homelessness Prevention
 - Suspension of evictions due to inability to pay is in effect through September, although the CDC has recommended the moratorium continue through the end of the year
 - City and County of Honolulu COVID-19 Household Hardship Relief Fund (HHRF), managed by DCS, launched via AUW and the Council for Native Hawaiian Advancement
 - The majority of programs funded by ESG-CV1 were oriented toward homeless prevention programs; notice at <http://statelegals.staradvertiser.com/2020/05/13/0001279121-01/>

Other New Projects and Programs

- Homeless Veterans Virtual Conference was held on September 9-10, 2020 with the theme, "Serving Never Stops: Assisting Homeless Veterans During the Pandemic"; sponsored by the Homeless Veterans Task Force, VA, and the Mayors Challenge; over 250 people participated with a schedule which included plenaries and 11 breakout sessions; conference presentations and videos are available at <http://www.honolulu.gov/housing/veterans/hvvc.html>
- An updated version of the Homeless Help Card was released; hard copy requests can be directed to officeofhousing@honolulu.gov with softcopy available online for download (revised, August 2020)
- Several new affordable housing projects (targeting 50/60% AMI and below) were added to the city's portfolio or started, including:
 - 754 McCully Street, 10 unit property acquired under the City Department of Land Management (DLM)
 - West Loch Modular Housing Project groundbreaking, 58 units, under DLM
 - Since 2016 the City has acquired, completed or is in development to add 1,328 housing units to the City's affordable rental housing portfolio, now totaling 2,508 units, thereby doubling the number of City housing units

Working Together throughout O'ahu

Hurricane Douglas response: HOU and DCS, together with the Partners in Care, worked to coordinate outreach and evacuation of homeless persons with various City and State agencies; thank you to our many providers who went above and beyond in staffing evacuation shelters and special outreach efforts

Measuring, Learning, and Sharing

We released, *Housing in Honolulu: Analyzing the Prospect of Taxing Empty Homes* by the UCLA, Luskin School of Public Affairs (July 2020)

- Rock Bottom (by Pookela Intern Asher Uchiyama and VISTA Ryan Beckley), a three-part miniseries on homelessness was released in July
- From January 2020 until September 2020, there has been a 29% (81 fewer from 278 to 197) reduction in homeless veterans on the “by name list” and a 31% (32 fewer from 104 to 72) reduction in chronically homeless veterans on the “by name list”
- The City’s new CARES Act funding dashboard has gone live, available via OneOahu.org: <https://www.oneoahu.org/dashboard>

Mayor’s Office of Housing E-Newsletter

Stay up to date on the latest news regarding housing and homelessness. Use the following link to subscribe for free: <http://eepurl.com/g9QoDb>

Mark Your Calendars

The Annual Statewide Homeless Awareness Conference is going virtual this year: November 18-19 (Wednesday-Thursday), from 9:00 a.m. to 12:30 p.m. The four counties and the state will be leading the event, working with Bridging the Gap and Partners in Care

Continuum of Care for Oahu, Partners in Care

The last several months have seen an amazing amount of work going into providing services to those who are experiencing homelessness on Oahu during the COVID-19. We have seen that no one is immune to this sickness and with that in mind, we have worked tirelessly with providers to get them the support they need so that they can keep their doors open and their clients and staff safe and healthy. For more than 4 months, the homeless service system so almost no cases among those who experience homelessness and staff within the programs. But as the entire community felt a surge in the positive cases of COVID-19, so did the homeless community. Despite all of the problems that we saw in our system, we can also say that we have reacted to the pandemic in ways that we did not think possible. This crisis has brought out the best in many sectors including the homeless system. The fear of COVID-19 is paramount in everyone’s minds, but our providers have stayed open and adjusted to the new needs of our folks on the streets.

Punawai Rest Stop

Punawai Rest Stop changed to a 24/7 project to enable more people to access services throughout the day and night while still adhering to CDC guidelines. Our flexibility to address the closure of I.H.S. to new guests and then the closure of their kitchen and River of Life’s kitchen for several meals was met by a team approach that within 2 hours secured meals for all those who needed them. This was a coordinated effort by the City the State and Providers. Each time a different issue came up, people were brought to the table to figure out solutions. It doesn’t mean that every problem was solved, but it did show us that we are more capable together than separate.

Coordinated Entry System

The Coordinated Entry System Team switched all of their meetings to virtual and made them smaller meetings which allowed for more coverage of the By Name List and enabled referrals to continue to be

made and has improved the overall timeliness from referral to housing. We have also seen new partnerships evolve during this pandemic that were not in place prior. Our new relationship with the City and County of Honolulu Emergency Management team allowed us to utilize different resources to get food and volunteers for different projects. This was also a great relationship when Hurricane Douglas headed our way at the end of July. Through our connections with the Emergency Management team, we were able to focus much attention on those who were out on the streets during the storm. We also assisted with the staffing of some of the evacuation centers and have begun talks on adding to the resources for future storm procedures. Overall, we have seen a continuous provision of services in the homeless system and will continue to work with all of our stakeholders going forward.

Youth Homelessness Demonstration Project

The Youth Homelessness Demonstration Project will be starting up its programs starting in October. This will include an increase of housing vouchers and case management dedicated to youth on Oahu.

Domestic Violence Information System

The Domestic Violence CES and HMIS is in it's planning stages to enable better coordination among DV service providers. This will include a HMIS comparable system for the DV community so that data will be easier to collect for this vulnerable population. It will also enable DV survivors to cross over more easily to mainstream services without their privacy being impacted.

Landlord Engagement Program

The Landlord Engagement Program continued to house people and thought of creative ways to show units to potential tenants. Rather than doing walk throughs with Landlord, providers and clients, our Team made video walkthroughs to lessen contact between people.

	Total #
# of landlord partnerships (total)	29
Total # of units with clients being housed (August)	11
Total # of vacant units available (126) with Locations	141
# of occupied units Year to date	71
# of landlord complaints resolved via 24-hour hotline	11
# of service agency partnerships (August) (HCAP-Lanakila Pacific and Access to Independence)	3

Point In Time Count/PIT Count

We have completed 2 additional sub-reports from the data collected through the Point In Time Count which was completed in January 2020. These sub-reports bring different stakeholders to the table to conduct deeper data dives into a variety of statistics within the PITC and from other sources. Our first sub-report covered Veteran Homelessness and has added to the discussions that we have in the Mayors Challenge and at the recent Homeless Veterans Virtual Conference. Our second sub-report focused on Sexual and Gender Minorities and broadened our understanding of the issues facing individuals in the SGM community. This will lead to the ability to create programs geared to this demographic and will help us address their unique needs going forward. We have begun the work on our third sub-report that will focus on Native Hawaiians. We have asked for stakeholders to come to the table once again to dive deeper into the issues relating to Native Hawaiians. Our partnership with the Department of

Hawaiian Homelands will be beneficial in the development of this report. We have recently signed a Memorandum with DHHL so that programs that DHHL are involved in can include individuals and families who experience homelessness. We have also become involved with the National Coalition to End Urban Indigenous Homelessness. This group is looking at culturally appropriate programs from different communities that may assist in the continued work with individuals and families who experience homelessness and are Native Hawaiian. I have included both sub-reports here for your review. They are also available on our website along with new dashboards addressing detailing our statistics over the last several months

VETERANS 2020 SUB-REPORT

356

veterans experiencing homelessness
on O'ahu on the night of January 22, 2020



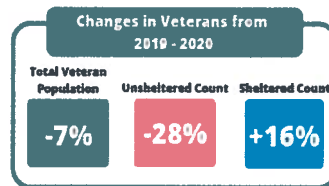
Veteran: A person who served in the United States Armed Forces, Reserves or National Guard.



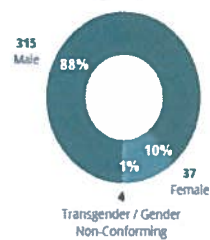
59%
Sheltered
210 individuals



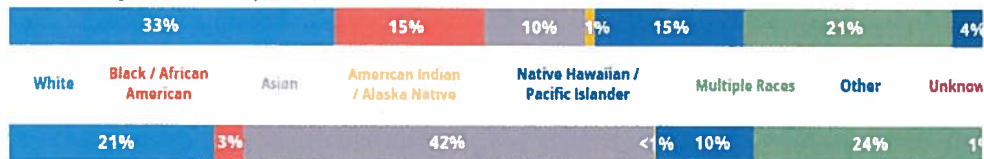
41%
Unsheltered
146 individuals



Gender



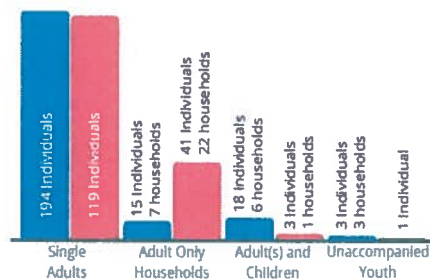
Race/Ethnicity: PIT Veteran Population



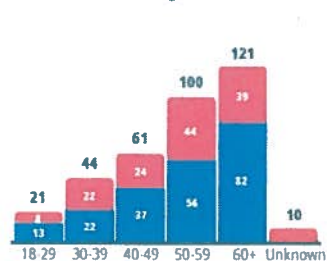
Race/Ethnicity: O'ahu Population

- 356 individuals were veterans making up 10% of the adult PIT Count population (3,716).
- The majority of veterans were sheltered (59%), male (88%), and above the age of 50.
- Whites account for the largest percentage of the veteran population, followed by Multiracial individuals.
 - Black and African American adults were over-represented by 500%
- The majority of veterans were single adults households, the unsheltered population also has a large number of adult only households.

Household



Age

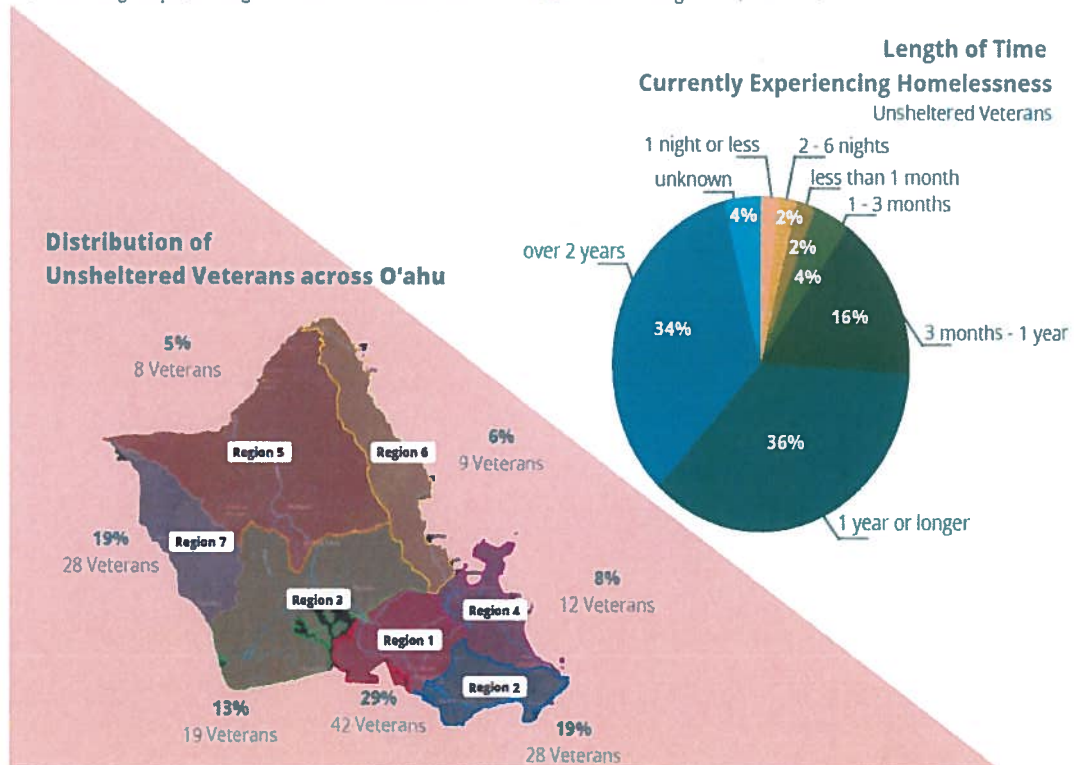


PARTNERS IN CARE - O'AHU'S CONTINUUM OF CARE, 2020 POINT IN TIME COUNT

VETERANS 2020 SUB-REPORT

Health	Veterans			PIT Count
	Sheltered	Unsheltered	Total	
Chronically Homeless	35%	56%	37%	24%
Disabling Condition	85%	72%	80%	40%
Avg number of disabling conditions	2.5	1.7	2.2	1.9
Disability	70%	47%	60%	28%
Serious Mental Health Illness	51%	43%	48%	25%
Substance Use Disorder	36%	34%	35%	18%

- The majority of the veteran population has a disabling condition. The rate of disabling conditions is over double that of the O'ahu PIT Count Population.
- Disability, Serious Mental Health Illness and Substance Use Disorder are all nearly double among the Veteran Population as compared to the O'ahu PIT Count Population.
- The majority of unsheltered veterans had currently been experiencing homelessness for an extended period of time, over 1 year.
- The largest percentage of unsheltered veterans were counted in Regions 1, 2 and 7.

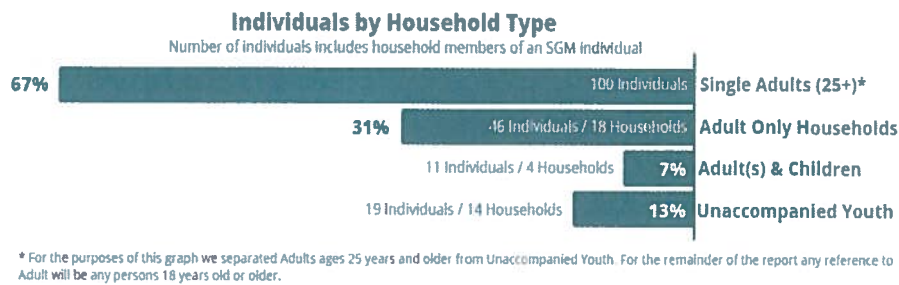


PARTNERS IN CARE - O'AHU'S CONTINUUM OF CARE, 2020 POINT IN TIME COUNT

SEXUAL & GENDER MINORITIES 2020 SUB-REPORT

The vast majority of SGM individuals were adults (99%) and the majority of adults were single adults (100 or 68%). 19% of individuals (29) were in adult only households.

2 unaccompanied minors and 17 youth were identified, the majority being unsheltered (89%).



Native Hawaiian and Pacific Islanders (NHPI) and Multiracial individuals made up the largest percentages of the SGM PIT Count population. 89% of Multiracial individuals indicated having NHP racial background. 52% of the overall SGM PIT Count population identified NHPI as either their only race or part of their multiracial background.

Race/Ethnicity: SGM PIT Count Population

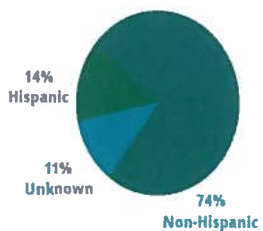


Race/Ethnicity: O'ahu Population



B / AA: Black and African American. AIAN: American Indian and Alaskan Native. NHPI: Native Hawaiian and Pacific Islander.

Hispanic Ethnicity



Comparing the percentage of each of the racial groups on O'ahu to the percentage of each of the racial groups included in the 2020 SGM PIT Count population, NHPIs were 1.4 times (or 140%) more likely to represent individuals in the SGM PIT Count population as compared to the general population of O'ahu, and AIAN while only representing a small percentage of the population are 2 times (or 200%) more likely. Conversely, Asians were 86% less likely to represent individuals in the SGM PIT Count population compared to the general population.

14% of the SGM PIT Count population indicated Hispanic ethnicity, as compared to 10% of the O'ahu population.

O'ahu population data obtained from most recent available U.S. Census data (ACS, 2018).

PARTNERS IN CARE - O'AHU'S CONTINUUM OF CARE, 2020 POINT IN TIME COUNT

SEXUAL & GENDER MINORITIES 2020 SUB-REPORT

218

Sexual & Gender Minorities experiencing homelessness on O'ahu on the night of January 22, 2020

Sexual & Gender Minorities (SGM): An umbrella term that encompasses populations included in the acronym "LGBTI" (lesbian, gay, bisexual, transgender & intersex) and individuals whose sexual orientation or gender identity varies.

This report looks at individuals who reported a gender identity different from the sex they were assigned at birth, a gender identity other than male/female, indicated a sexual orientation other than straight or indicated they were intersex. We currently do not have sufficient data on SGM individuals living in Shelters, due to different surveys used for the Shelter Population. 2020 was the first year SGM questions were asked of every individual who completed the survey, therefore we are unable to compare to previous years.



6%

Sheltered

12 individuals were staying in Emergency Shelter, Transitional Housing, or Safe Haven Programs

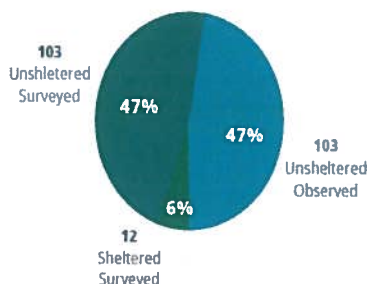


94%

Unsheltered

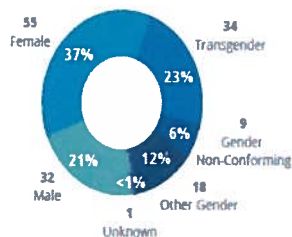
206 individuals were staying on the streets or other place not meant for human habitation

Survey & Observation Distribution

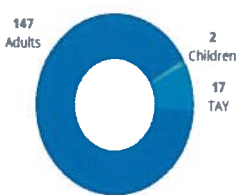


For the purposes of analysing demographics and characteristics the remainder of this report will exclude 69 observations which do not include any information apart from "other gender". The following information will look at the remaining 149 SGM individuals

Gender



Age Groups*



* There is overlap between TAY & Adults

Adults: Persons 18 years and older. TAY (Transitional Age Youth): Persons 18 - 24 years old. Children: Persons under 18 years old.

37% were female and 41% were transgender, gender non-conforming, or another gender not specified.

Transgender, gender non-conforming (GNC) and other gender individuals make up the largest portion of the SGM population. Within the PIT Count Population they account for 3%, while in Hawai'i transgender individuals account for 78% of the overall population.

Hawaii's transgender population data obtained from Report on transgender prevalence in the US by the Williams Institute (2016).

PARTNERS IN CARE - O'AHU'S CONTINUUM OF CARE, 2020 POINT IN TIME COUNT

SEXUAL & GENDER MINORITIES 2020 SUB-REPORT

This section examines characteristics of the 115 adults in 90 households surveyed as either sheltered or unsheltered in the 2020 PIT Count

Chronically Homeless: A person who is homeless and lives in a place not meant for human habitation, a safe haven or in an emergency shelter AND has been homeless for at least 1 year continuously or on at least 4 or more occasions over the past 3 years that add up to at least 12 months AND has a disability

Disabling Condition is classified as a Serious Mental Health Illness, Disability, Substance Use Disorder or living with HIV/AIDS

Serious Mental Health Illness, Substance Use Disorder and Disability are classified as a condition(s) that substantially impairs a person's daily life

Health	SGM	PIT Count
Chronically Homeless	56%	24%
Disabling Condition	68%	40%
Disability	45%	28%
Serious Mental Health Illness	50%	25%
Substance Use Disorder	32%	18%
HIV / AIDS	4%	4%

Sexual and Gender Minorities have higher rates of disabling conditions as compared to the overall homeless population.

- 56% are chronically homeless indicating that they have experienced homelessness for a long period of time while living with a disabling condition.
- Nearly half have a physical, developmental or other disability that impairs their daily life.
- Half have a serious mental health illness.

Domestic Violence is significantly higher among the SGM PIT Count population as compared to the O'ahu PIT Count population.

- 38% of SGM adults have experienced DV as compared to 13% of the overall homeless population.

Domestic Violence also plays a larger role in why SGMs are currently experiencing homelessness as compared to overall homeless population.

- 13% of SGM adults are currently fleeing DV, as compared to 4% of the overall homeless population.



1 in 2
women



1 in 5
men



1 in 5
trans & gnc

**have experienced
Domestic Violence**

Domestic Violence (DV): also commonly referred to as Intimate Partner Violence (IPV), describes physical violence, sexual violence, stalking, and/or psychological harm by a current or former partner or spouse

SEXUAL & GENDER MINORITIES 2020 SUB-REPORT

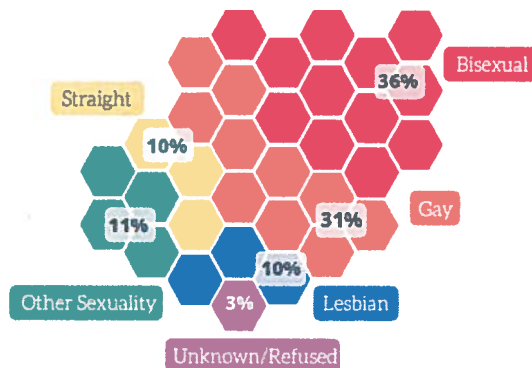
This section examines characteristics of the 103 adults in 78 households surveyed as unsheltered in the 2020 PIT Count.

More than 1/3 of the SGM population has experienced homelessness before the age of 18, indicating a history of housing instability.

Regions 1 and 7 had the largest percentage of SGM individuals with 38% and 33% respectively, followed by Region 2 and 3 with 13% and 7%.

The majority of SGM individuals identified as Bisexual (37) and Gay (32). The leading causes for factors leading to homelessness were Alcohol/Drug use and housing trouble.

Sexual Orientation



39% experienced homelessness before the age of 18

21 persons by themselves.
17 persons with their family.
1 person by themselves & with their family.
1 person refused to specify.



* Surveyed individuals may choose multiple reasons for currently experiencing homelessness

Summary & Next Steps

Transgender, gender non-conforming and other gender individuals make up a significant percentage per capita of not only the Point In Time Count Population but also close to half of the SGM Population.

Sexual and Gender Minorities have higher rates of disabling conditions as compared to the overall PIT Count Population with mental illness and substance use double. SGM individuals also have a lifetime history of domestic violence that is three times higher as compared to the overall PIT Count Population.

The lack of SGM specific questions in the Shelter population make it difficult to compare against the Unsheltered population. We suggest that the same questions be asked of the Sheltered and Unsheltered population to better understand if there are differences between them.

This report points to more information needed about our SGM and specifically our transgender, gender non-conforming, and other gender individuals, especially as it pertains to services and understanding if there is a service gap in regards to their care.

