

Analysis of Racial Disparities in CoC Homelessness and Housing Outcomes 2022 Report

Background and Introduction

In 2018 the MA-511 CoC conducted its first analysis of racial disparities in its homeless service system in response to the growing body of knowledge of racial disparities among people experiencing homelessness. *This is now the 5th year of the analysis.* We continue to examine the same analytical questions as in previous reports since the CoC agreed they were the most important, however, data quality continues to improve and additional questions are added each year as necessary. This year's report focuses on the following questions, but also looked specifically at data on youth households to better understand disparities among that priority population:

1. How does the racial and ethnic composition of those experiencing homelessness in the CoC compare to the general population and to those living in deep poverty (<50% FPL) in the region?
2. Are there disparities in the average length of time homeless among race and ethnic groups?
3. Are there disparities in the type of housing assistance received by race and ethnic groups (i.e., exits to permanent destinations)?
4. Are people experiencing homelessness who identify as racial or ethnic minorities more or less likely to receive a full coordinated entry assessment (VI-SPDAT), and as a result have equal access to CoC housing opportunities?
5. Are there differences in the average coordinated entry assessment scores among those in each racial and ethnic group?
6. Are there disparities among people returning to homelessness after receiving a permanent housing placement?

Racial Equity Committee Activities 2021-2022:

The CoC created a Racial Equity Committee in spring 2019 to conduct annual analyses about racial disparities and develop strategies for addressing any disparities over time. The HMIS Administrator provided data for the analysis using HMIS and Stella P data. The HMIS Administrator determined these were the most useful data sources and opted not to incorporate HUD's Racial Equity Tool this year. In October 2021, the CoC engaged with C4 Innovations and Massachusetts Housing & Shelter Alliance to evaluate the coordinated entry system with a focus on achieving more racially equitable outcomes for those who are most impacted by homelessness. While the technical assistance is ongoing, initial analysis was completed in February 2022 and presented to the full CoC membership. The evaluation included analysis of Stella P data and

surveys of coordinated entry staff, consumers, and other stakeholders. Findings were in line with prior CoC racial equity analyses, but also provided useful qualitative data and recommended action steps. Those recommendations, among others, are presented at the conclusion of this report.

Data from the HMIS Administrator and the coordinated entry analysis initiative were shared with the CoC Racial Equity Committee on May 11, 2022. The Committee reviewed the data and developed the analysis found in this report. The report and the Committee's recommended next steps were presented to the General Committee on May 19, 2022, which adopted the report.

Race and Ethnicity in the CoC – A Summary of Findings

The MA-511 CoC is comprised of 34 cities and towns in southeastern Massachusetts, including all of Plymouth County and much of Norfolk County. Communities include urban areas, such as Quincy, Brockton, and Plymouth, as well as many suburban towns. Given the geography, we used an average of county-wide census data to understand race and ethnicity for the CoC. The population in the CoC is predominantly white, but it includes significant percentages of Black, African American or African; Asian or Asian American; and Hispanic/Latin(a)(o)(x) persons.

Race:

- White: 82%
- Black, African-American or African: 9.3%

- Hispanic/Latin(a)(o)(x): 4.3%
- Non-Hispanic/Non-Latin(a)(o)(x): 78.9%

Ethnicity:

- Two or More Races: 2%
- Asian or Asian American: 6.5%
- Native Hawaiian or Pacific Islander: <0.1%
- American Indian, Alaska Native, or Indigenous: 0.3%

Question 1: How does the racial and ethnic composition of families and individuals experiencing homelessness compare to the general population in the CoC and to those living in deep poverty (<50% FPL) in the region¹?

Families

The CoC compared race and ethnicity of all families experiencing homelessness to the general population and those living in deep poverty. White families represent 30% of those experiencing homelessness, but 61% of households in deep poverty. In contrast, Black/African-American families represent 57% of homeless families, but only 17% of households living in deep poverty. Hispanic or Latin(a)(o)(x) families also experience a disparity in the CoC, representing 18% of homeless families but only 8% of families living in deep poverty. The disparity among Hispanic/Latin(a)(o)(x) young families (head of household ages 18-24) is even more significant.

¹ 2012-2016 American Community Survey 5-Year Estimates

Race/Ethnicity	MA-511 General Population Average	MA-511 Average of General Population in Deep Poverty	MA-511 Homeless Families Population	MA-511 Homeless Families: Youth
White	82%	61.1%	30%	24%
Black or African-American or African	9.3%	17.2%	57%	46%
American Indian, Alaska Native, or Indigenous	0.3%	0.3%	1%	0%
Asian or Asian American	6.5%	8.3%	1%	4%
Native Hawaiian or Pacific Islander	<0.1%	0%	<1%	2%
Multiple Races	2%	5.0%	2%	7%
Hispanic or Latin(a)(o)(x)	4%	8.3%	18%	21%

Individuals

The data show that the MA-511 CoC does experience racial disparities in terms of the number of Black/African-American, Native Hawaiian or Pacific Islander, and Hispanic/Latin(a)(o)(x) individuals who become homeless. Individuals of those race and ethnic groups are more likely to become homeless. The most significant inequity is experienced by African-American individuals who make up 9% of the general population, 17% of the population living in deep poverty, but 31% of those experiencing homelessness. This is an increase from 2021 of 5 percentage points. The percentage of individuals experiencing homelessness who are white is higher than those living in deep poverty, but still lower than the percentage of white individuals in the general public. The disparity is even greater among non-white unaccompanied homeless youth. Black/African-American and Hispanic/Latin(a)(o)(x) youth are most over-represented among youth in the CoC's system.

Race/Ethnicity	MA-511 General Population Average	MA-511 Average of General Population in Deep Poverty	MA-511 Homeless Individuals Population	MA-511 Homeless Individuals: Youth
White	82%	61.1%	65%	33%
Black, African-American or African	9.3%	17.2%	31%	50%
American Indian, Alaska Native, or Indigenous	0.3%	0.3%	<1%	1%

Asian or Asian American	6.5%	8.3%	1%	3%
Native Hawaiian or Pacific Islander	<.01%	0%	1%	6%
Multiple Races	2%	5%	2%	6%
Hispanic or Latin(a)(o)(x)	4%	8.3%	9%	20%

Question 2: Are there disparities in the average length of time homeless among race and ethnic groups?

In MA-511 there are many factors that contribute to long episodes of homelessness that intersect with race and ethnicity, including, but not limited to presence of disabilities, large family sizes, no income, limited social connections, CORI/SORI, and undocumented status.

Families

The average adjusted length of time homeless for white families is 10 months, but non-white families experience an average of 12.5 months (376 days) – or 2.5 months longer than their white counterparts. Families identifying as Hispanic or Latino have an average length of time homeless of 9.5 months, which is down by 2 months from 2021 and lower than the 12 month average for non-Hispanic/Latin(a)(o)(x) families. The disparity in length of time homeless for families is most pronounced for Black/African-American families who average 12.6 months homeless, or 2.6 months longer than white families. American Indian, Alaska Native, or Indigenous and Native Hawaiian or Pacific Islander families also had long lengths of stay but the population sizes are extremely small. Young families tend to experience shorter lengths of stay overall, and disparities among young Black/African-American families seen in previous years’ analyses have diminished. Details by race and ethnicity are below:

Race/Ethnicity	MA-511 Homeless Families Population	Average Length of Time Homeless – Families (days)	Average Length of Time Homeless – Youth Families (days)
White	37%	301	274
Black, African-American or African American Indian, Alaska Native, or Indigenous	52%	379	221
Asian or Asian American	<1%	648	NA
Native Hawaiian or Pacific Islander	<1%	137	54
	<1%	374	37

Multiple Races	2%	344	182
Hispanic or Latin(a)(o)(x)	22%	284	208
Not Hispanic or Latin(a)(o)(x)	78%	364	226

Individuals

The average length of time homeless is longest for Black/African-American individuals, with an average that is two weeks longer than White individuals. Unaccompanied homeless youth (ages 18-24) who are non-White or Hispanic/Latin(a)(o)(x) experience longer lengths of stay than their White youth counterparts.

Race/Ethnicity	MA-511 Homeless Individuals Population	Average Length of Time Homeless – Individuals (days)	Average Length of Time Homeless – Youth Individuals (days)
White	72%	220	91
Black, African-American or African American Indian, Alaska Native, or Indigenous	24%	235	132
Asian or Asian American	1%	68	243
Native Hawaiian or Pacific Islander	<1%	75	98
Multiple Races	1%	193	193
Hispanic or Latin(a)(o)(x)	9%	143	143
Not Hispanic or Latin(a)(o)(x)	91%	203	124
		222	124

Question 3: Are there disparities in the type of housing assistance received by race and ethnic groups?

This question was reviewed separately for individuals and families given the different resource availability for subpopulations. Significant state-funded rapid rehousing exists for families, but the CoC has very limited PSH for families. On the other hand, rapid rehousing for individuals is more limited in MA-511, but the majority of available PSH units target individuals.

Families

State-funded rapid rehousing (HomeBASE) is available to every homeless family in the CoC. The data this year on exits led the CoC HMIS Administrator to question the validity of the exit data.

Only 1 rapid rehousing and 1 permanent supportive housing placement was noted in HMIS, with the rest being attributed to “other subsidy types”. This is the second year in a row that the exit data appears to have been miscategorized so the HMIS Administrator will work with CoC partners to understand and improve data collection. Given these data concerns, the most helpful metric this year is the racial composition of families accessing other permanent housing subsidies because 56 families accessed those types of subsidies. Most notably, the percentages of white and black families appear to be close to what would be expected, though there does appear to be a significant disparity for Hispanic/Latin(a)(o)(x) families. Exit data for pregnant and parenting youth was very limited and, therefore, is not presented here for analysis.

Race/Ethnicity	MA-511 Homeless Families Population	% of Homeless Families Receiving RRH	% of Homeless Families Receiving PSH	% of Homeless Families Receiving Other Subsidy
White	37%	100%	0%	30%
Black, African-American or African American	52%	0%	100%	57%
American Indian, Alaska Native, or Indigenous	<1%	0%	0%	0%
Asian or Asian American	<1%	0%	0%	0%
Native Hawaiian or Pacific Islander	<1%	0%	0%	0%
Multiple Races	2%	0%	0%	4%
Hispanic or Latin(a)(o)(x)	22%	0%	0%	16%

Individuals

When looking at housing resources provided to homeless individuals, individuals accessed rapid rehousing at rates relatively in line with their representation among the homeless population. However, the data shows a disparity for those accessing PSH, with Black/African-American, Multiple Races, and Hispanic/Latin(a)(o)(x) individuals accessing it at lower rates than expected. Exit data for unaccompanied homeless youth was very limited, and therefore, is not presented here for analysis.

Race/Ethnicity	MA-511 Homeless Individuals Population	% of Homeless Individuals Receiving RRH	% of Homeless Individuals Receiving PSH
White	71%	73%	81%
Black, African- American or African American	26%	27%	17%
Indian, Alaska Native, or Indigenous	0%	0%	0%
Asian or Asian American	<1%	0%	0%
Native Hawaiian or Pacific Islander	<1%	0%	0%
Multiple Races	3%	0%	2%
Hispanic or Latin(a)(o)(x)	19%	0%	4%

Question 4: Are people experiencing homelessness who identify as racial or ethnic minorities more or less likely to receive a full coordinated entry assessment (VI-SPDAT), and as a result have equal access to CoC housing opportunities?

For both individuals and families, the Committee looked at the rates at which white and non-white households and Hispanic/Latin(a)(o)(x) and non-Hispanic/Latin(a)(o)(x) households are assessed using the VI-SPDAT. The VI-SPDAT is the tool used to assist in prioritization for the majority of the CoC’s permanent housing programs, including PSH and RRH. As such, equal access to permanent housing is dependent upon a fair and equal approach to VI-SPDAT assessment and the CoC would expect to see equal rates of assessment. For example, if 80% of white households are assessed according to coordinated entry policy, then at least 80% of non-white households should also be assessed according to CE policy.

Families

White and non-white homeless families are being assessed with the VI-SPDAT at very similar rates with non-white families receiving the VI-SPDAT at a higher rate. Since CoC PSH units for families are primarily dedicated to chronically homeless families, the CoC policy is for all families who reach 365 days of homelessness to be assessed with the VI-SPDAT. If there is equal administration of the VI-SPDAT among all race and ethnic groups of families, we should see about the same percentage of families within each racial group receiving the VI-SPDAT. Using HMIS data, 50% of white families who have been homeless for at least 365 days received the VI-SPDAT and 53% of non-white families with 365 days of homelessness received the assessment. 58% of Hispanic/Latino families receive a VI-SPDAT as expected and 51% of non-Hispanic/Latino

families do. This data shows there isn't a disparity in completion of the VI-SPDAT for families of color, but it does indicate the overall rates of completion must be improved for all families.

Individuals

In reviewing VI-SPDAT data from our HMIS system, there has been a reduction in the percentage of all individuals who are receiving the VI-SPDAT according to protocol. 58% of White individuals and 66% of non-White individuals received the VI-SPDAT assessment according to coordinated entry policy. When disaggregating by ethnicity, 59% of non-Hispanic and 73% of Hispanic individuals who should have received the VI-SPDAT did so according to policy. The CoC must improve the overall VI-SPDAT completion rates to ensure housing assistance is provided equitably.

Question 5: Are there differences in the average coordinated entry assessment score among those in each racial and ethnic group?

As a next step in the CoC's evaluation of potential disparities associated with the coordinated entry system, the CoC included this new question. It's important to understand not only the rate at which different racial and ethnic groups are assessed, but also whether there are differences in how they tend to score in those assessments. The scores are a significant factor for the type of housing households are directed toward. The CoC would expect the averages to be somewhat similar to one another, recognizing, though, that other external factors might impact different groups and lead to different average scores. Due to the variety of factors that could impact average scores (e.g., disability status, access to health and behavioral healthcare, access to nutrition and other social supports, availability of familial and social supports, etc.) the Racial Equity Committee will need to monitor this data over time and continue to analyze the results to understand whether it is evidence that the assessment tool isn't effectively measuring vulnerability equally across racial and ethnic groups. The tables below show the average VI-SPDAT scores by race and ethnicity. For families, White and Non-Hispanic/Latin(a)(o)(x) persons scored higher than all other groups, meaning that on average they are being directed toward permanent supportive housing options. For individuals, White; American Indian, Alaska Native, or Indigenous; and Non-Hispanic or Latin(a)(o)(x) individuals scored highest.

Families

Race/Ethnicity	Average VI-SPDAT Score
White	11.1
Black, African-American or African	9.4
Asian or Asian American	8.0
Multiple Races	8.7
Hispanic or Latin(a)(o)(x)	9.7
Non-Hispanic or Latin(a)(o)(x)	10.0

Individuals

Race/Ethnicity	Average VI-SPDAT Score
White	10.2
Black, African-American or African American Indian, Alaska Native, or Indigenous	8.1
Asian or Asian American	11.0
Native Hawaiian or Pacific Islander	6.0
Multiple Races	9.6
Hispanic or Latin(a)(o)(x)	9.8
Non-Hispanic or Latin(a)(o)(x)	8.9
	9.7

Question 6: Are there disparities among those returning to homelessness within 6 months of exiting the homeless system for permanent housing?

Prior reports have focused on questions relating to inequities in accessing shelter and becoming rehoused. This year the Committee added this question to further our understanding of inequities associated with maintaining housing stability after a housing placement. The table below shows returns to homelessness within 6 months of a housing placement and for returns within a 12–24-month period disaggregated by race and ethnicity. Results for families and individuals are shown separately to uncover differences among those populations. The data show that returns to homelessness among families is rare and very similar across each racial and ethnic group. Among individuals, White, Black/African-American, and Hispanic/Latin(a)(o)(x) individuals are most likely to experience a return to homelessness. All other racial categories represent very low percentages of the population, so it makes sense that White, Black, and Hispanic individuals would experience the most returns. Of note, White individuals have a slightly higher rate of return to homelessness within 6 months, but significant portions of all three groups experience returns within 12-24 months. This doesn’t suggest obvious inequities associated with returns but does suggest that the CoC adopt additional housing stabilization strategies for individuals who have been housed between 1-2 years.

Race/Ethnicity	% of MA-511 Homeless Individuals Returning in 6 mos.	% of Homeless Families Returning in 6 mos.	% of MA-511 Homeless Individuals Returning in 12-24 mos.	% of MA-511 Homeless Families Returning in 12-24 mos.
White	5%	0%	18%	1%
Black, African-American or African	2%	2%	16%	1%

American Indian, Alaska Native, or Indigenous	0%	0%	0%	0%
Asian or Asian American	0%	0%	0%	0%
Native Hawaiian or Pacific Islander	0%	0%	0%	0%
Multiple Races	0%	0%	0%	0%
Hispanic or Latin(a)(o)(x)	0%	0%	8%	2%

Summary of Qualitative Feedback

As part of the 2021 assessment of the CoC’s coordinated entry system, C4 conducted two listening sessions. One was with people with lived experience and the second was with members of the CoC’s provider community. The strengths and areas for improvement identified during the listening sessions is summarized below. Recommendations deriving from the listening sessions are included in the recommended next steps at the end of the report.

Strengths:

- Access to shelter has been a pathway to obtaining housing stability resources with cross-system partners.
- South Shore’s outreach and support provide an additional layer of support for people who require additional access to resources e.g. food, SSI, and medical.
- Utilization of the CARES Act funding was successful to solidify additional space for people experiencing homelessness during the pandemic.
- Service programs have extended policies and practices to accommodate allowing service animals in housing which has had a positive impact on the mental stability of participants.
- South Shore’s case managers have gone above and beyond to support tenants in shared housing by assisting with basic need resources such as food and medical appointments throughout the pandemic.

Areas for Improvement:

- People in shelters feel isolated and disconnected.
- People with lived experience and front-line staff feel their input isn’t valued or used to inform system change. Need to shift traditional ways of working, power dynamics, and decision-making structures.
- Lack of affordable housing increases length of time homeless and limits participant choice.
- Implicit bias and stigma around homelessness impacts how program participants are treated by housing and homelessness staff.

- There is a perception that facilities are sub-standard, and some staff are insensitive to people experiencing homelessness.
- Black and brown individuals experiencing homelessness are also disproportionately impacted by experiences with the foster care system.
- Eligibility criteria creates barriers to being housed.

General Conclusions

- For both individuals and families, poverty alone cannot explain the rates of homelessness for people of color.
- The most significant inequity is experienced by Black, African-American, or Black individuals and families, and that is also true when looking at the subset of unaccompanied and pregnant or parenting youth.
- The disparity in length of time homeless for families is most pronounced for Black, African-American, or African families who average 12.6 months homeless, or 2.6 months longer than white families.
- Black, African-American, or African and Hispanic/Latin(a)(o)(x) families and individuals access PSH at rates lower than expected.
- While the rates at which different race and ethnic groups access the VI-SPDAT assessment do not suggest disparities, this analysis does highlight the need for the overall rates of completion to be improved to ensure ongoing equal access to the CoC's permanent housing options.
- Non-white families and individuals score approximately 2 points lower on average than white households, suggesting further analysis of the effectiveness of the tool to assess across different racial and ethnic groups is warranted.

Proposed Next Steps

Racial disparities exist in the MA-511 CoC in the rates at which certain racial and ethnic groups become homeless and achieve positive housing outcomes. This analysis should continue to be repeated annually and expanded to include additional research questions to help understand disparities in assessment, access to resources, coordinated entry processes, and housing outcomes. Further, the Racial Equity Committee has identified the following initiatives to address racial disparities in the CoC's homeless services system. These initiatives were first developed in 2021 and will continue to guide the work of the Committee moving forward.

Legend

- ⊗ Action Step – considerable progress has been made and will continue to be a CoC priority
- Action Step – more work needs to be accomplished in this area and/or next steps

1. **Retrain front line case management staff to improve rates at which individuals and families receive the VI-SPDAT assessment, paying special attention to ensuring youth are assessed appropriately.**

- ⊗ The CoC has employed two youth coordinators who are trained to assess individual youth appropriately.
- ⊗ The CoC Network Manager incorporates racial equity concepts into all annual Coordinated Entry trainings.
- ⊗ An HMIS team member annually trains CoC family shelter providers on how to complete the VI-SPDAT.
- Need to develop a checks and balances system to improve rates at which both individuals and families receive and complete the VI-SPDAT assessment.

2. **Strengthen the Racial Equity Committee and embed membership throughout other CoC Committees.**

- ⊗ The CoC Network Manager continues to recruit members to participate in the Racial Equity Committee to monitor progress on action steps. C4's findings on the coordinated entry system along with the 2021 Racial Disparities Analysis were shared with the network, including Executive and General Committees.
- ⊗ Racial Equity Committee members participate in all other CoC Committees.
- Each Committee will identify racial equity strategies and report on progress at each General Committee Meeting.

3. **Consider youth status in Coordinated Entry prioritization.**

- Examine how other CoCs incorporate priorities for youth and specialized youth assessment tools that take racial disparities into account and implement improvements to our system.

4. **Evaluate COVID-19 vaccination rates among non-white and Hispanic or Latino households and implement strategies to improve those rates.**

- ⊗ Improved vaccination data collection across all shelters and outreach programs, particularly among congregate programs.
- ⊗ Continued partnerships with healthcare providers to offer ongoing education.
- ⊗ CoC staff and healthcare providers reached out to non-English speaking non-vaccinated individuals and families.
- ⊗ Materials from the Department of Public Health were distributed in multiple languages to improve rates.
- ⊗ Data collection ceased once vaccinations were available to the full public.

Note: *The Racial Equity Committee may choose to strike this initiative with the understanding that trainings must continue that explore the intersection of health and homelessness.*

5. **Expand outreach in geographic areas with higher concentrations of underrepresented groups and partner with culturally responsive community providers.**
 - ⊗ Developed a targeted list of community-based organizations for additional outreach and education materials to reduce the number of people becoming homeless for the first time. The CoC Network Manager reached out to diverse groups to offer prevention and diversion resources and invited them to participate in the CoC and become active members in its committees.
 - Create a list of outreach opportunities, including co-locations, to educate and share resources and programs with underrepresented groups. For example, co-location opportunities at food pantries, libraries and community health centers.
6. **Train homeless service staff on anti-racism, mitigating implicit bias, LGBTQ+ allyship, cultural humility, and Trauma-Informed Care.**
 - ⊗ Provided training at spring 2021 General Committee meeting from Harvard University's Project Implicit.
 - ⊗ The CoC Network Manager forwards training opportunities to network members around the intersection of racism and homelessness and is currently working with MHSA to bring both entry and managerial level trainings to CoC members.
 - Create a 2023 calendar of dedicated trainings that address these concepts in a more formalized manner.
7. **Train homeless service staff on the intersection of health and homelessness utilizing one or more of the Community Health Training Institute's health equity trainings, designed to help community members, stakeholders, organizations, and many more explore and tackle the roots of health inequities by addressing housing and other social determinants of health.**
 - ⊗ The CoC Network Manager forwards training opportunities to network members including homeless service staff on the intersection of health and homelessness.
 - Create a FY'23 calendar of dedicated trainings that address these concepts in a more formalized manner, including the trainings offered by CHTI.
8. **Identify steps to help the CoC Board and decision-making bodies (General and Executive Committees) better reflect the population served.**
 - ⊗ The CoC Network Manager has been reaching out to community-based partners and inviting them to participate in the CoC and become active members in its committees.
 - Develop a formalized recruitment plan for both boards to better reflect the population served.

- Develop a plan for integrating people with lived experience into decision making processes.
- 9. **Embed inclusive and intentional language in governance and program documents.**
 - Draft and update CoC governance and policy documents.
- 10. **Conduct a system mapping of all CoC programs to identify what policies and practices may be perpetuating inequities**
- 11. **Develop a South Shore CoC regional ‘pledge’ whereby network partners will identify industry-wide challenges and the strategies required to advance the practice of providing services and programs with a racial equity lens.**
 - Draft and post the pledge on the CoC’s website.