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HOMELESSNESS IN INDIANAPOLIS 2020 Marion County Point-in-Time Count

BACKGROUND

For more than a decade, the IU Public Policy Institute (PPI) and the Coalition for Homelessness Intervention and Prevention (CHIP) have collaborated with local organizations to conduct Marion County's annual Point-in-Time (PIT) Count. As mandated by the United States Department of Housing and Urban Development (HUD), the PIT Count reports the number of individuals experiencing homelessness on a single night in January. The 2020 PIT Count took place on January 22, 2020. This report highlights key findings and takeaways from the PIT Count in order to inform policymaking and service provision.

METHODOLOGY

The methodology for the 2020 PIT Count remained similar to prior years but did include some changes. All methodology in data collection and analysis followed HUD guidelines. Two new questions were added to the survey of individuals in unsheltered homeless situations to better understand specific barriers related to pet ownership and experiences with the criminal justice system.

In order to be counted as experiencing homelessness in the PIT survey, an individual must meet HUD's definition of homelessness. This includes individuals and families lacking a fixed, regular, and adequate nighttime residence (i.e., emergency shelters or places not meant for human habitation), or individuals and families who are fleeing or attempting to flee domestic violence.

The team used paper surveys and Homeless Management Information System (HMIS) records. Survey teams were made up of volunteers as well as staff from Professional

KEY FINDINGS

Compared to 2019, the 2020 PIT Count revealed:

- The number of people experiencing homelessness increased by 1 percent to 1,588.
- The number of those in homeless shelters decreased by 4 percent.
- The number of unsheltered people increased by 77 percent.
- The number of families experiencing homelessness decreased by 12 percent.
- The number of veterans who were homeless decreased by 18 percent.
- Chronic homelessness increased by 6 percent.
- Fifty-four percent of people counted identified as Black or African American.
- Sixty-five percent of McKinney-Vento youth identified as Black or African American.
- The number of people who reported having a mental illness dropped, but the number of those reporting substance use issues rose.
- The proportion of adults reporting a felony conviction nearly doubled, from 13 percent to 24 percent.

Blended Street Outreach (PBSO). Volunteers practiced surveying and completed specific training for the PIT Count, logistics related to the day of the count, and best practices for survey administration.

Marion County was divided into 18 quadrants. Teams of PBSO staff and survey volunteers were dispatched to each quadrant to locate and survey individuals. Additionally, teams were dispatched to libraries and meal distribution sites where people experiencing homelessness are known to visit. A small number of teams were dispatched the day after the survey to specific service providers' locations to survey anyone they did not encounter the previous night.

Those who were not sheltered were counted using a mapping system based on PBSO observations during the past year. Surveys were used to count all unsheltered individuals, as well as those staying in two emergency shelters that do not utilize HMIS.

The team counted people who experienced sheltered homelessness using HMIS data and surveys of shelters that do not participate in the HMIS program. The counts included three types of shelters:

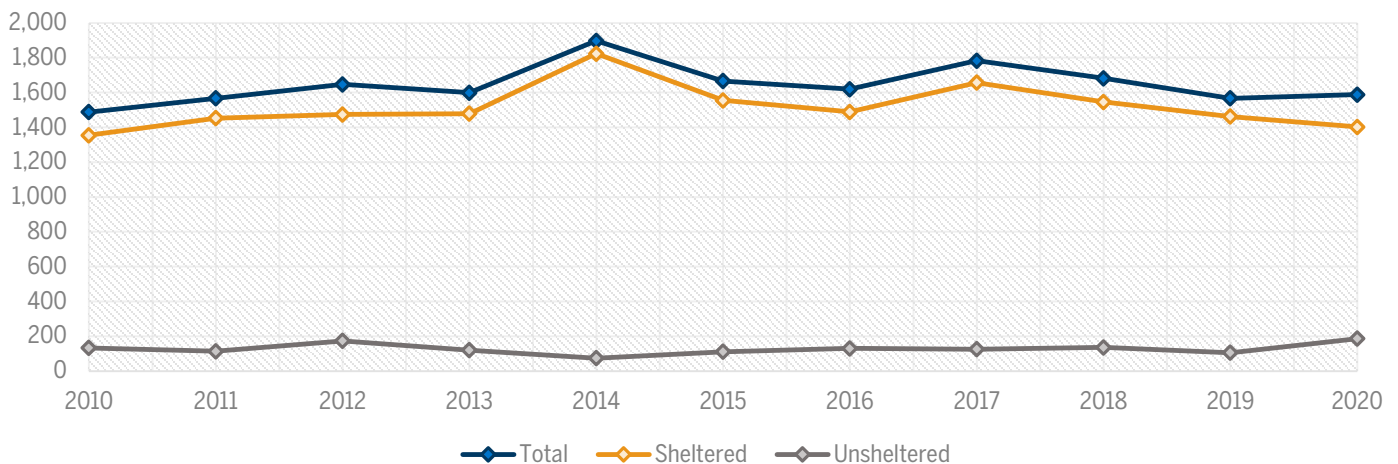
- Emergency shelters: agencies with a primary purpose of providing shelter to the homeless
- Transitional housing: locations that provide shelter and supportive services for up to 24 months
- Safe havens: locations that provide temporary supportive housing for people experiencing homelessness and complex barriers such as mental illness

The U.S. Department of Education (DOE) monitors school-age children who are in a variety of unstable housing situations, such as those who are living with friends or

relatives other than their parents. The DOE's definition of homelessness was used to analyze characteristics of school-age children experiencing homelessness in Indianapolis under the McKinney-Vento Homeless Assistance Act. Although people experiencing homelessness under DOE definitions were not included in the total count, this analysis is crucial to understand youth and family homelessness in Marion County. McKinney-Vento liaisons provided data for each school district. They commonly included the demographic information, number of siblings, and housing status of students served under the McKinney-Vento Act.

PPI researchers removed duplicate data and then analyzed the data to provide specific insight about subpopulations such as veterans, families, and those experiencing chronic homelessness. For multiple reasons, some data was incomplete or missing. For example, survey respondents may have chosen not to answer some of the questions, and oversight by staff members or volunteers could result in missing or incomplete data. Additionally, for privacy purposes or administrative reasons, several questions could not be answered by all study participants. Since each question had a different number of survey participants responding, most findings in this report are shared as percentages.

FIGURE 1. PIT Count total (2010–2020)



Note: The total PIT Count population for 2020 was 1,588. There were 1,402 sheltered individuals and 186 unsheltered individuals.

OVERALL TRENDS

On January 22, 2020, the PIT Count found 1,588 individuals experiencing homelessness in Marion County. That falls within the standard range for the past decade, from a low of 1,488 people in 2010 to a high of 1,897 in 2014 (Figure 1). Although there were more people counted in 2020 than 2019, extreme cold weather conditions last year likely resulted in a lower number. However, the difference in weather likely is not the cause of a 77 percent increase in unsheltered homelessness in 2020. That increase is still up 42 percent from the average unsheltered count from 2016–2018 when temperatures were higher.

In 2020, 88 percent of all people experiencing homelessness lived in shelters, down 4 percent from the previous year (Table 1). As with previous years, most individuals experiencing homelessness in 2020 (63 percent) stayed in an emergency shelter. Unsheltered homelessness accounted for 12 percent of the homeless population in 2020, compared with only 7 percent in 2019 (Figure 2), while 22 percent stayed in transitional housing—a slight decrease from 26 percent in 2019. Although still representing the smallest percentage, those staying in safe havens increased from 1 percent in 2019 to 3 percent in 2020.

TABLE 1. Marion County Point-in-Time Count (2016–2020)

	2016	2017	2018	2019	2020	CHANGE 2019–2020
Low temperature	23°F	37°F	27°F	-11°F	18°F	29°F
Sheltered	1,489	1,657	1,546	1,462	1,402	-4.1%
Unsheltered	130	126	136	105	186	77.1%
Total	1,619	1,783	1,682	1,567	1,588	1.3%

FIGURE 2. Percentage of total PIT Count population by location (2019 and 2020)

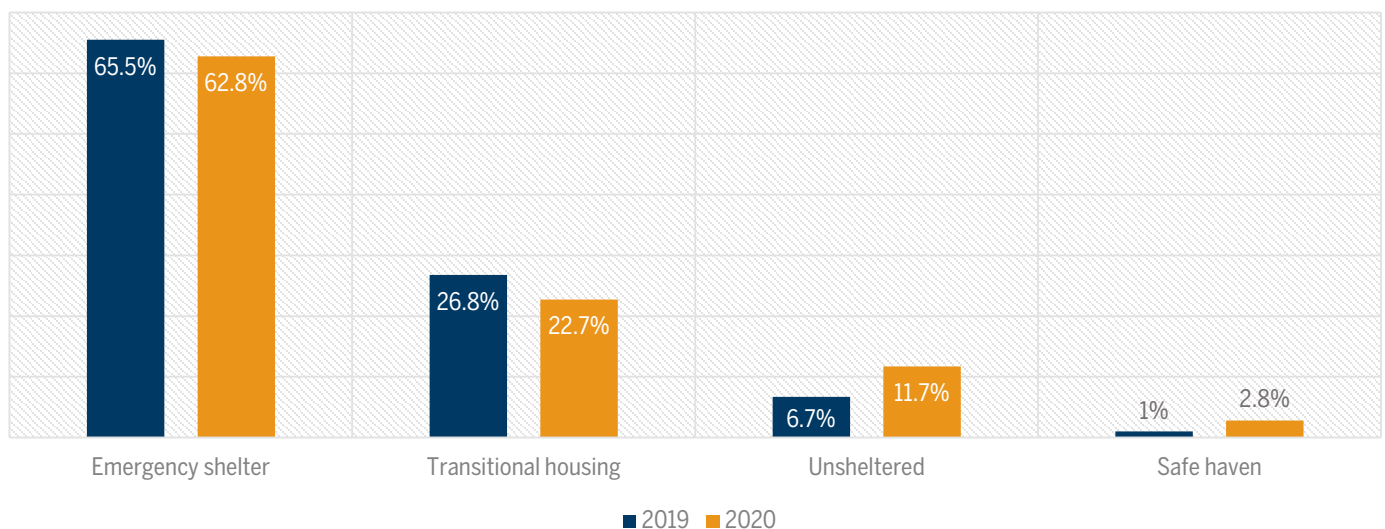
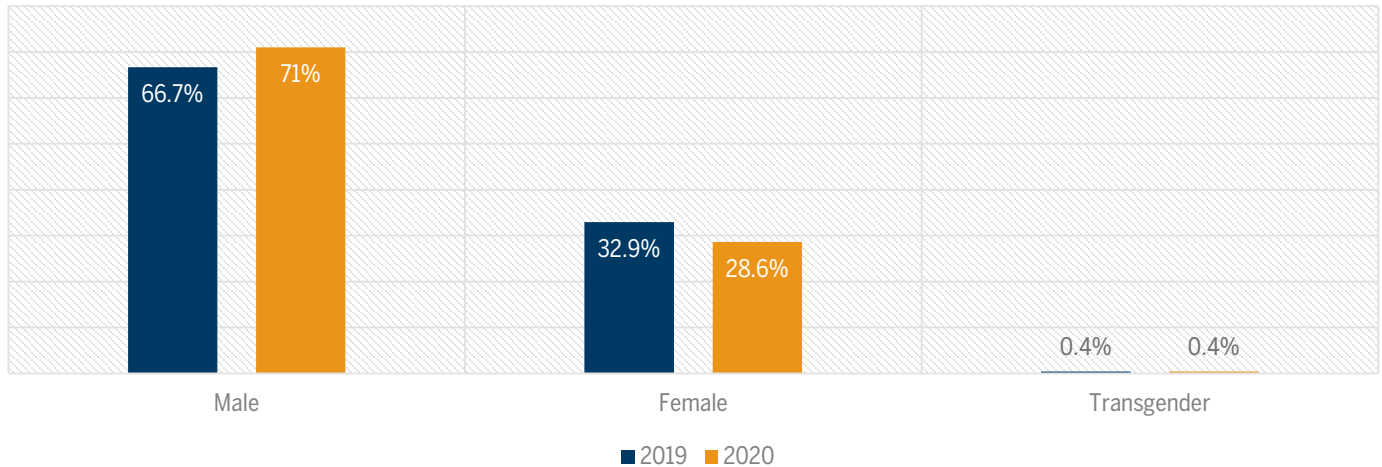


FIGURE 3. Reported gender as a percentage of the PIT Count population (2019 and 2020)



Note: Gender identity information was collected in a variety of ways following HUD guidance. Some of these methods could potentially lead to an undercount of individuals identifying as transgender or gender non-conforming. Many individuals' gender was captured through the HMIS system or volunteer observation, and some unsheltered individuals' demographic information was observed rather than self-reported. Factors such as stigma and safety concerns could affect whether an individual chooses to disclose their gender identities. Observational data entered by staff or volunteers may not match how an individual identifies.

TABLE 2. Reported gender of individuals experiencing homelessness (2020)

	EMERGENCY SHELTER	TRANSITIONAL HOUSING	SAFE HAVEN	UNSHELTERED	TOTAL
Female	309	82	4	59	454
Male	686	274	41	126	1,127
Transgender	2	4	0	1	7
Total	997	360	45	186	1,588

DEMOGRAPHICS

Consistent with previous years, 71 percent of individuals identified as male, and 29 percent identified as female in the 2020 PIT Count. Less than 1 percent identified as transgender, and no individuals identified as gender non-conforming (Figure 3). Most locations are representative of the gender distribution of the total PIT population with the notable exception of safe havens, which is disproportionately male at 91 percent (Table 2).

For the first time since 2015, individuals ages 35–49 made up the highest percentage of those experiencing homelessness, accounting for 30 percent of the homeless

population (Figure 4). That same age group also made up the largest percentage of people experiencing unsheltered homelessness at 41 percent (Figure 5).

The 2020 PIT Count also showed a 34 percent increase in the number of people age 62 and older who experience homelessness, climbing from 116 people in 2019 to 176 in 2020. Although additional research is needed to examine this increase, only 2 percent of individuals in this age group said this was their first time experiencing homelessness. That finding suggests those with existing vulnerabilities to homelessness are aging, rather than there being an increase in vulnerability for all seniors. The vast

FIGURE 4. Count of reported age of individuals experiencing homelessness (2016–2020)

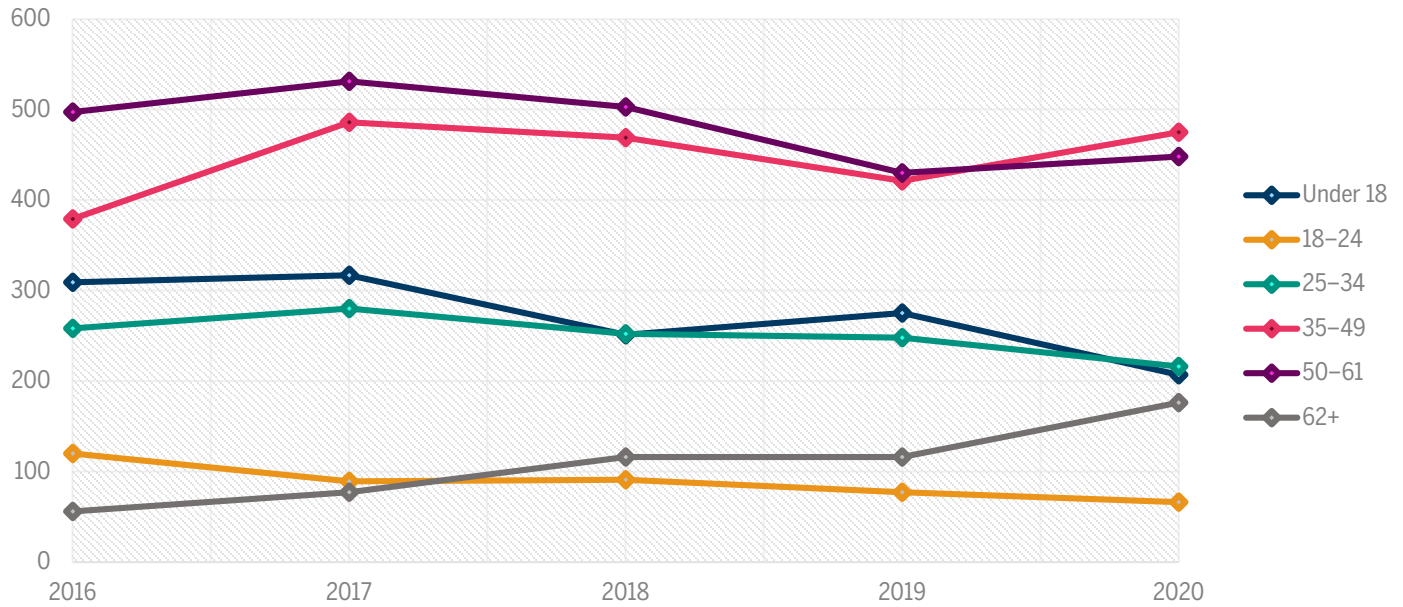
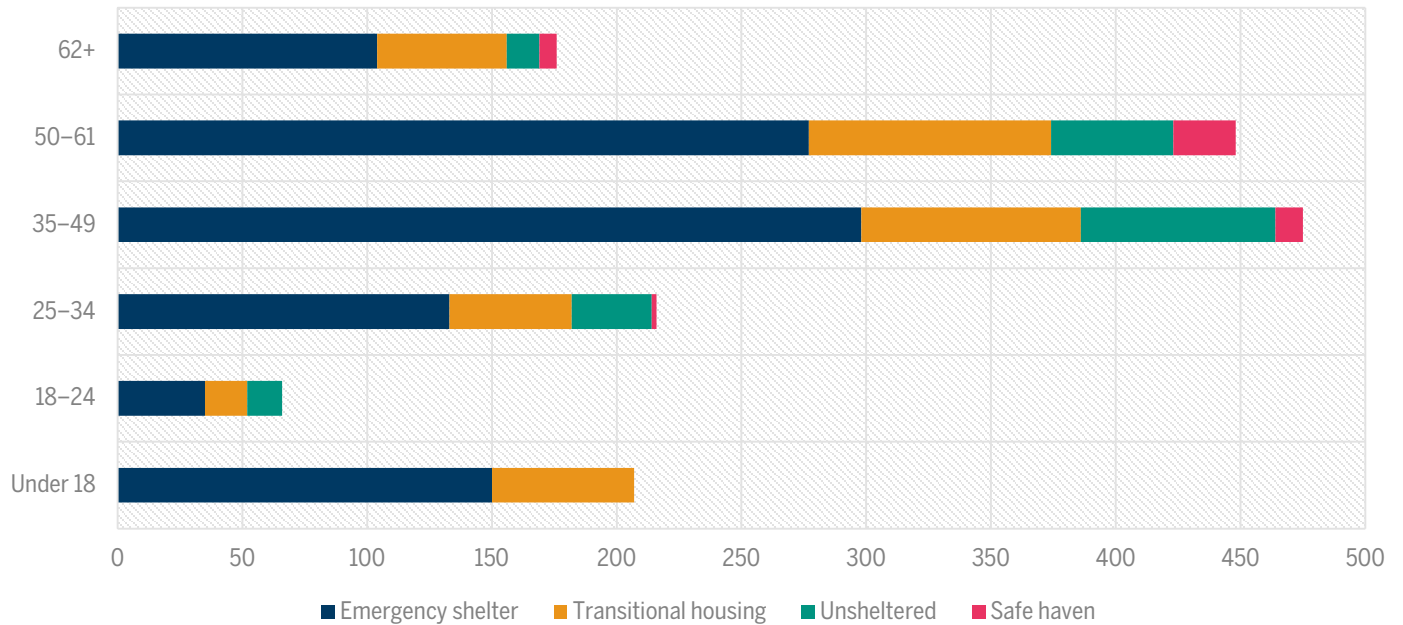


FIGURE 5. Age by location (2020)



majority—93 percent—of individuals in this group were in sheltered locations. These trends align with national data on homelessness and the elderly population.¹

Following the pattern of 2018 and 2019, individuals in the 18–24 age group represented the smallest portion of the entire population at only 4 percent. Of all children in the PIT

Count, none were unsheltered, and the number of children in shelters dropped by 25 percent (from 275 children in 2019 to 207 in 2020). The survey teams did not find any children in unsheltered locations during the 2020 PIT Count.

RACIAL DISPARITIES

Table 3 shows the race and ethnicity of individuals in the 2020 PIT Count by location. In both 2019 and 2020, Black individuals made up the majority of those experiencing homelessness, accounting for 54 percent of the homeless population in the 2020 PIT Count. White individuals made up the second largest group, with 42 percent. The Hispanic or Latinx portion of this population increased from 3 percent in 2019 to 5 percent in 2020.

Although the contrast between the proportion of Black individuals experiencing homelessness and other racial identities is less stark in 2020 than in 2019, it remains disproportionately high compared with Marion County's

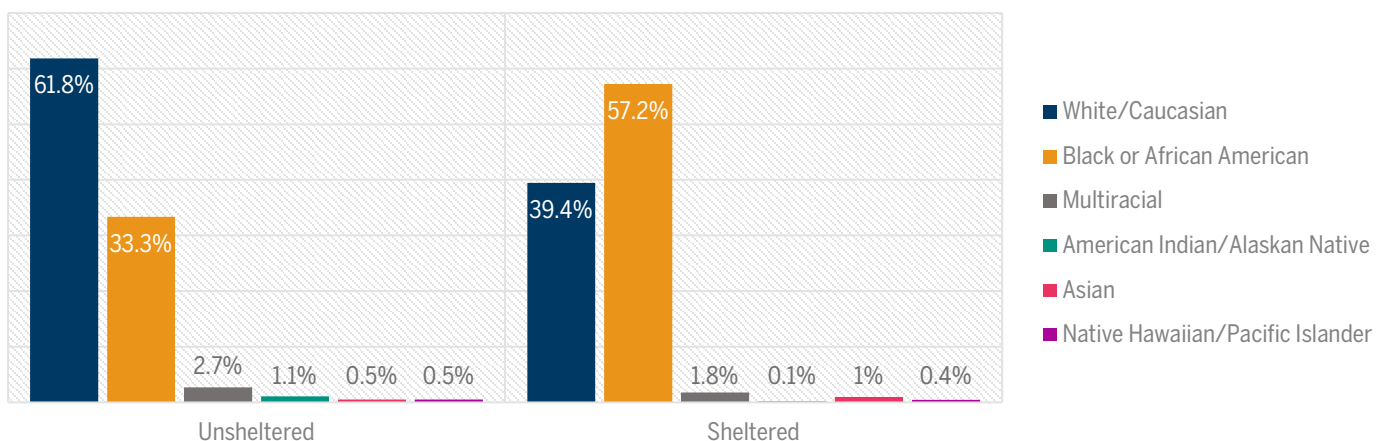
population. Only 28 percent of residents in Marion County identify as Black or African American alone. Looking at historical PIT Count data since 2015—when HUD began to capture racial demographic data—Black individuals have been consistently overrepresented in the homeless population.

As in 2019, Black people who experience homelessness were more likely to be sheltered than unsheltered in 2020. More than 57 percent of sheltered individuals identified as Black or African American, while the same was true for only 33 percent of those who were unsheltered. Sixty-two percent of unsheltered individuals identified as white (Figure 6).

TABLE 3. Reported race and ethnicity of individuals experiencing homelessness by location (2020)

	EMERGENCY SHELTER	TRANSITIONAL HOUSING	SAFE HAVEN	UNSHELTERED	2020 TOTAL	% OF TOTAL POPULATION
American Indian or Alaskan Native	1	0	1	2	4	0.3%
Asian	10	2	2	1	15	0.9%
Black or African American	575	210	17	62	864	54.4%
Multiracial	21	3	1	5	30	1.9%
Native Hawaiian or Pacific Islander	5	1	0	1	7	0.4%
White or Caucasian	385	144	24	115	668	42.1%
Total	997	360	45	186	1,588	--
Hispanic/Latinx ethnicity, [any race]	29	24	1	20	74	4.7%

FIGURE 6. Racial disparities in sheltered and unsheltered populations (2020)



COMPARISON WITH OTHER CITIES

Figure 7 displays how key comparison cities rank in terms of the disproportionate representation of Black Americans in the homeless population for 2018, the most recent year of data available. Table 4 displays additional information about the comparison cities in 2018. These cities were selected based on similarities to Indianapolis in their population size, percentage of Black residents, and characteristics of homelessness.

One feature of racial disparity stood out for Indianapolis comparison cities: location of Black individuals who experience homelessness. While most comparison cities saw more Black individuals in sheltered locations, Figure 8 shows the percentage difference in sheltered versus unsheltered Black residents is larger in Indianapolis than

TABLE 4. Black homelessness disparity rate in comparison cities (2018)²

	2018 TOTAL POPULATION (% BLACK)	PIT 2018 (% BLACK)	DISPARITY RATE
Ft. Worth, TX	15.3%	48.7%	3.2
Columbus, OH	22.2%	60.3%	2.7
Charlotte, NC	31.3%	78.6%	2.5
Jacksonville, FL	24.8%	51.2%	2.1
Indianapolis, IN	27.7%	56.2%	2.0
Nashville, TN	27.4%	42.3%	1.5

FIGURE 7. Percentage of PIT Count population identifying as Black (2015–2018)

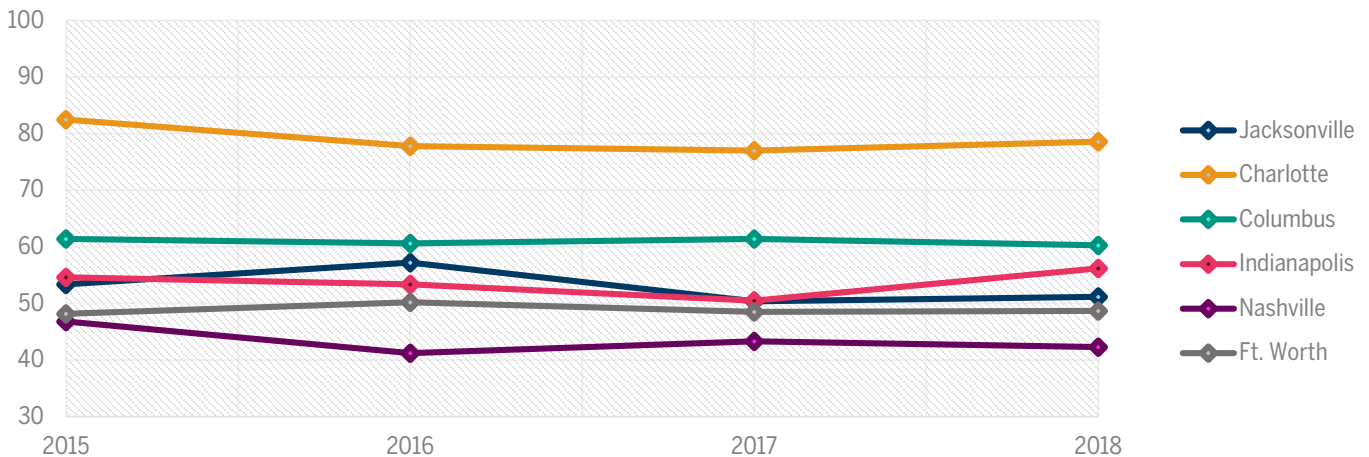
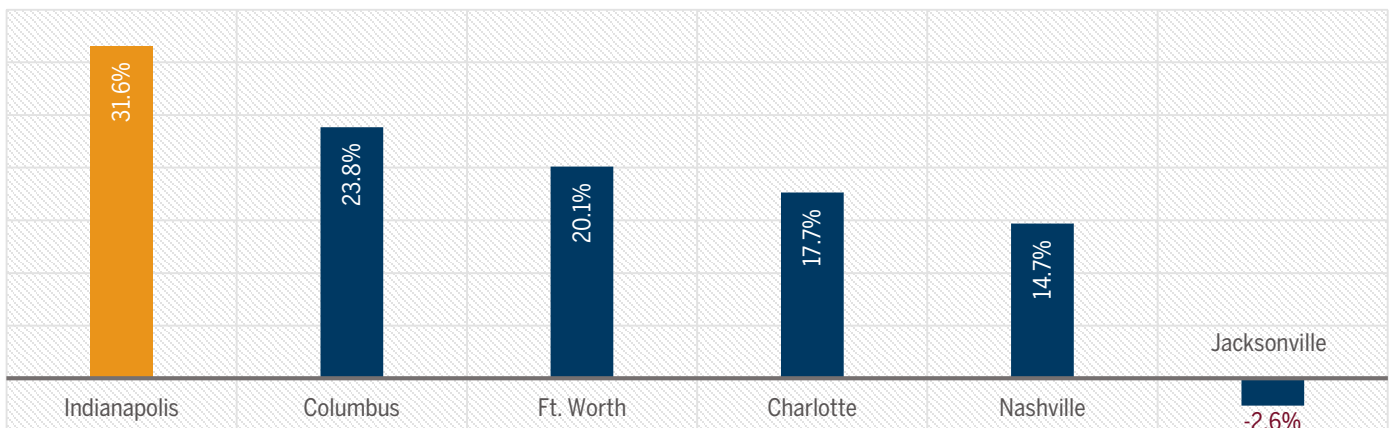


FIGURE 8. Difference between sheltered and unsheltered Black homeless population (2018)



any other comparison city. The only exception to this trend is Jacksonville, Florida, where slightly more Black residents were unsheltered.

CHRONIC HOMELESSNESS

To be considered chronically homeless, an individual must meet the following HUD criteria:

1. Has at least one disabling condition (e.g., substance use disorder, mental illness, chronic health condition, disability, etc.)
2. Has been consecutively homeless for at least one year OR has been homeless at least four times in the past three years, with a cumulative time of at least one year

When comparing the prevalence of chronic homelessness in the PIT Count, 8 percent of individuals (132 people) were identified as chronically homeless in 2020, the same as in 2019 (Table 5). On the night of the 2020 PIT Count, 52 percent of those experiencing chronic homelessness were sheltered while 48 percent were not. As displayed in Figure 9, 2019 and 2020 showed significantly fewer individuals reporting chronic homelessness than in years past.

As displayed in Figure 10, people who were chronically homeless reported having multiple disabling conditions. This can make it harder to resolve someone’s homeless situation, but having this information can help organizations

FIGURE 9. Number of chronically homeless individuals (2015–2020)

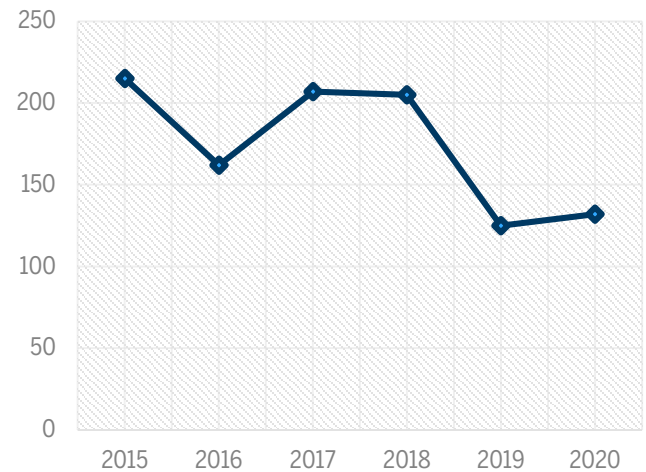
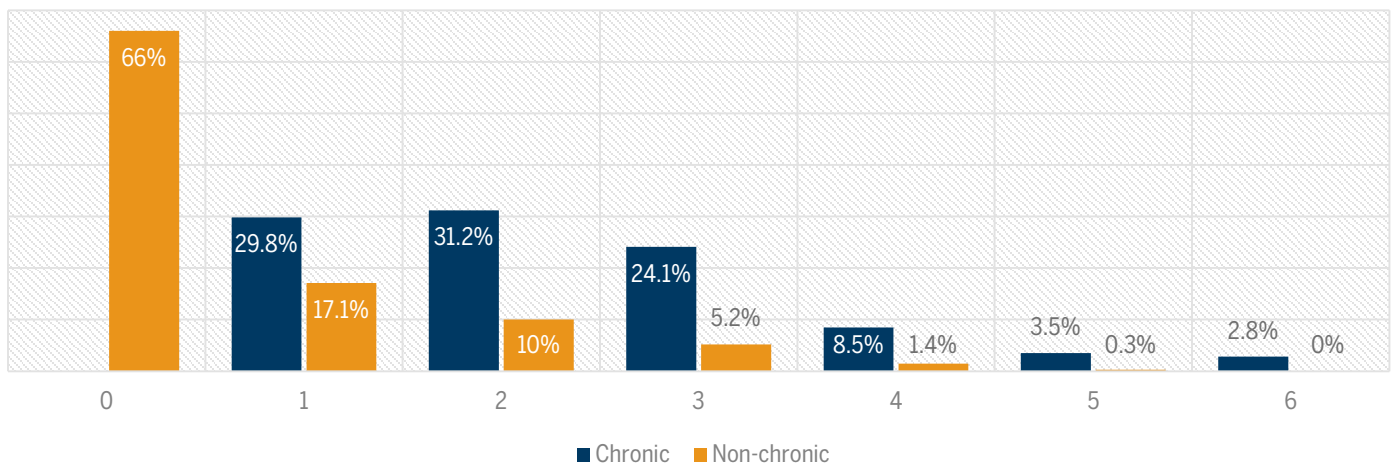


TABLE 5. Experiences of chronic homelessness by location type (2019–2020)

	2019 PIT COUNT	2020 PIT COUNT	CHANGE 2019–2020
Chronically homeless (Sheltered)	73	68	-6.8%
Chronically homeless (Unsheltered)	52	64	+23.1%
Chronically homeless (Total)	125	132	+5.6%

FIGURE 10. Number of disabling conditions reported by chronically and non-chronically homeless individuals



better understand the additional challenges these individuals face. Most chronically homeless individuals report between one and three disabling conditions, compared with an overwhelming majority of non-chronically homeless individuals who report none or just one condition.

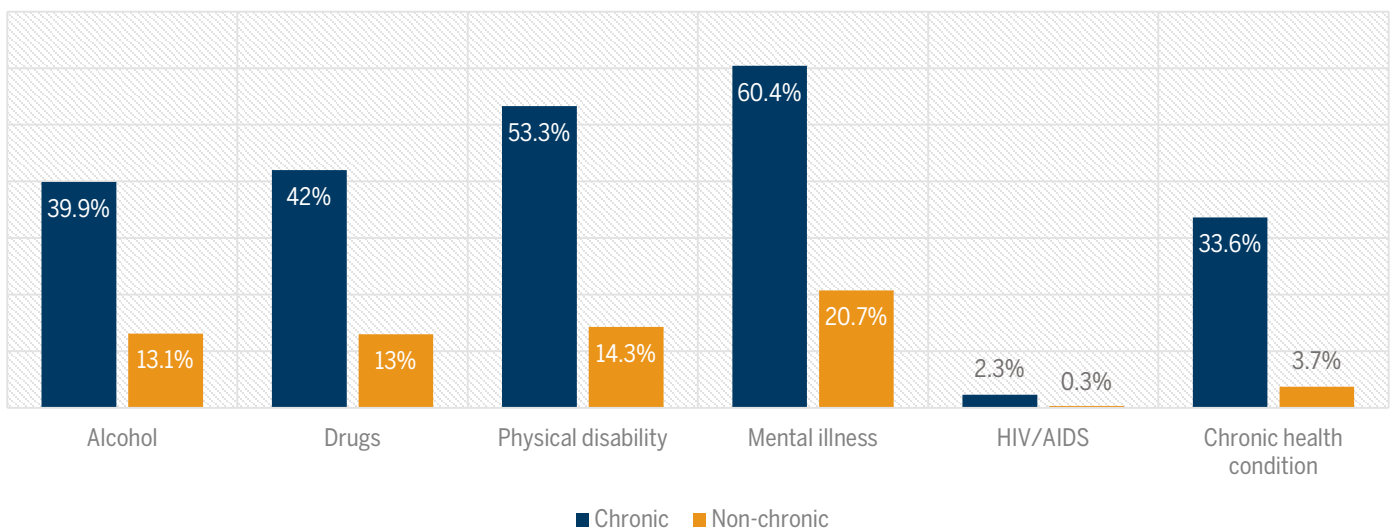
Since disabling conditions are part of the criteria to determine whether a person is chronically homeless, it is not surprising that individuals experiencing chronic homelessness reported higher percentages across all disabling conditions than non-chronic individuals. However, when ranked, both chronically and non-chronically homeless individuals experienced mental illness as the most frequently reported condition, followed by physical disability, drug abuse, alcohol abuse, chronic health conditions, and HIV/AIDS. The largest discrepancy between those experiencing chronic homelessness and non-chronically homeless individuals came in the percentage of people reporting these conditions. For the chronically homeless, 60 percent reported mental illness compared to 21 percent for the non-chronically homeless. The only disabling condition without a substantial discrepancy is HIV/AIDS, with 2 percent of chronically homeless individuals reporting having the condition compared to less than 1 percent of those who were not chronically homeless (Figure 11).

There is a racial difference for those who were chronically homeless as well. Of individuals experiencing chronic homelessness, 61 percent identify as white or Caucasian, and only 31 percent identify as Black or African American. These figures differ when looking at the racial identities of the demographics for the total PIT Count population, with 54 percent identifying as Black or African American and 42 percent identifying as white or Caucasian. Less than 10 percent of each group identified as another race (Table 6).

TABLE 6. Chronic homelessness by race (2020)

	CHRONICALLY HOMELESS (n=132)	TOTAL PIT COUNT (N=1,588)
Percent identifying as Black or African American	31%	54.4%
Percent identifying as white or Caucasian	60.6%	42.1%
Percent identifying as another race	8.4%	3.5%

FIGURE 11. Percentage of chronically homeless and non-chronically homeless individuals reporting disabling conditions (2020)



BARRIERS & DISABLING CONDITIONS

Measuring and understanding the types and number of barriers those experiencing homelessness face helps leaders plan and provide services that will be most helpful to reducing homelessness in Marion County. For the PIT Count, all data collected is self-reported by individuals experiencing homelessness. Many factors can affect whether any individual chooses to disclose a barrier, including stigma, discomfort, and relationship to the organization or person collecting the data.

When compared to 2019, 2020 data shows a decrease in the percentage of individuals who said they have a mental illness and an increase in those who reported a drug or alcohol abuse problem. Similar rates of physical disability and HIV/AIDS were reported in 2019 and 2020. There was a large decrease in reported chronic health conditions, but this could be due to changes in the number of people who responded to the question. In 2020, 7 percent of individuals reported having such a condition (Figure 12).

There were some variations in the prevalence of these conditions across specific subpopulations. For example, individuals who were unsheltered were more likely than those who were sheltered to experience all these conditions. The largest discrepancies between these two groups was in mental illness and chronic health conditions. Fifty-two percent of unsheltered individuals reported a mental illness

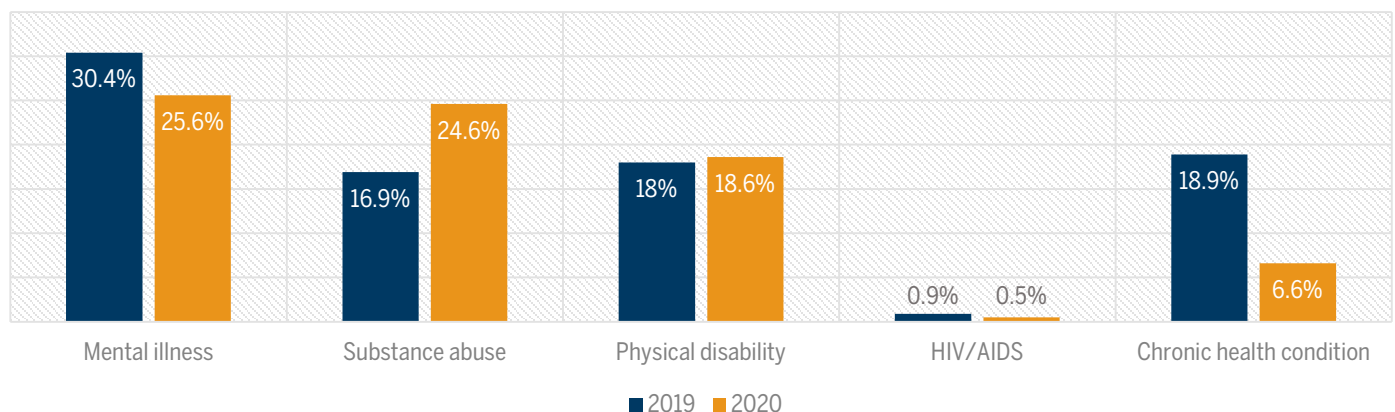
and 44 percent reported a chronic health condition. For sheltered individuals, 23 percent reported a mental illness and 3 percent reported a chronic health condition. Nearly 20 percent of men reported alcohol abuse compared with 9 percent of women. Yet 33 percent of women reported mental illness compared to 23 percent of men. Women were also more likely to report a chronic health condition than men, at 9 percent and 6 percent, respectively.

TABLE 7. Rate of chronic health conditions reported (2020)

SUBPOPULATION	RATE
Women	9%
Chronically homeless	33.6%
Unsheltered	44.1%
White/Caucasian	10.7%
Total PIT population	6.6%

Some specific discrepancies in the rate of chronic health conditions are notable. While 7 percent of people surveyed reported a chronic health condition, Table 7 shows that specific groups had significantly higher rates of chronic health conditions compared to others: women relative to men, those with longer-term homelessness relative to short-term homelessness, and white individuals relative to Black individuals.

FIGURE 12. Proportion of adults experiencing homelessness and disabling conditions (2019–2020)



Note: Additional discrepancies in rates of disabling conditions among subpopulations are discussed in later sections of this report. These percentages were calculated based on the number of people who responded to the question, rather than the entire population. The number of individuals responding to each of the disabling conditions ranged from 1,394 to 1,410, making the response rate 88 percent to 89 percent.

The more disabling conditions a person has, the harder it may be for them to secure stable housing. These individuals may also be more vulnerable during homelessness. Of the 1,561 people who answered the question about disabling conditions, 59 percent said they did not have any of the six conditions—mental illness, substance abuse (drug and/or alcohol abuse), physical disability, HIV/AIDS, or a chronic health condition—while 19 percent said they had only one. The number of individuals reporting multiple disabling conditions steadily decreased for multiple conditions (Figure 13).

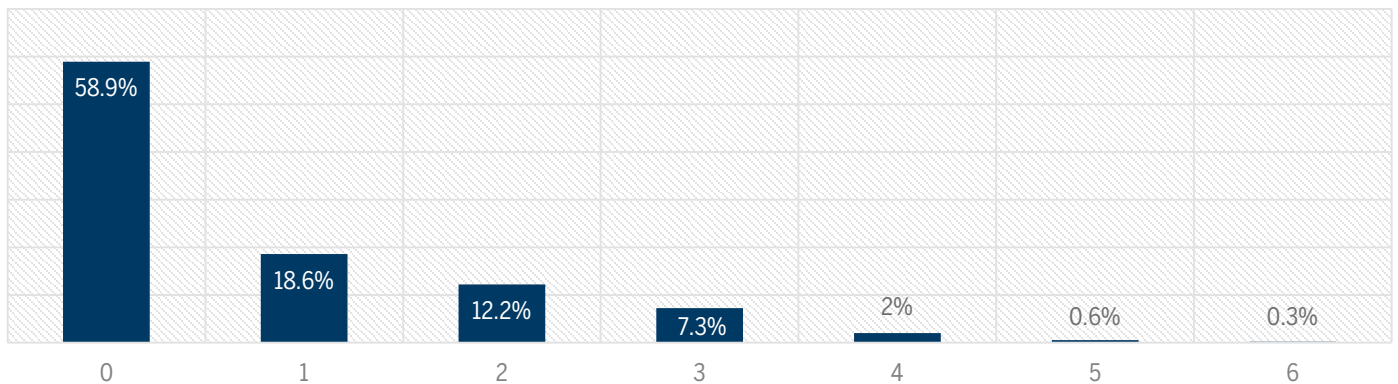
A new question for the PIT survey this year asked respondents whether they perceived any of their disabling conditions to be a significant barrier to obtaining or maintaining employment or stable housing. This specific question was only asked of those who reported at least one disabling condition. However, only 157 of those people

responded. Figure 14 displays the perceptions of those individuals by each condition and whether they think that condition is a significant housing and employment barrier. Most categories were more likely to be identified as a barrier than not.

RACIAL DISPARITIES IN BARRIERS & DISABLING CONDITIONS

There are statistically significant differences between white individuals experiencing homelessness and their Black counterparts in reported barriers and disabling conditions. As displayed in Table 8, white individuals are significantly more likely to report problems with alcohol abuse, drug abuse, mental illness, physical disability, and chronic health conditions.

FIGURE 13. Number of disabling conditions per individual (2020)



Note: n=1,561

FIGURE 14. Distribution of disabling conditions by perception of condition as a barrier (2020)

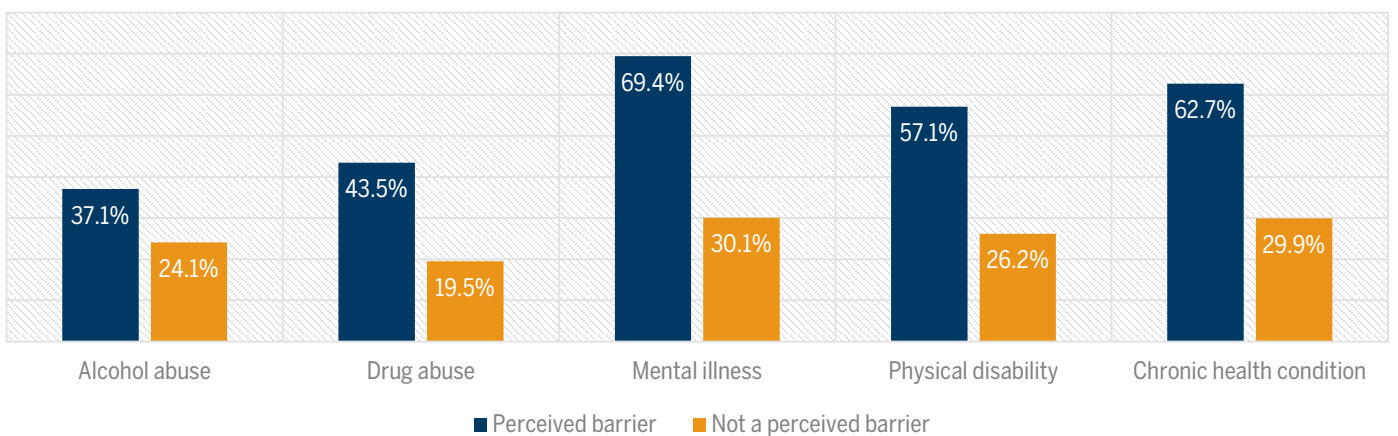


TABLE 8. Percent reporting disabling conditions by race (2020)

	ALCOHOL ABUSE	DRUG ABUSE	MENTAL ILLNESS	PHYSICAL DISABILITY	CHRONIC HEALTH CONDITION
% Black/African American with condition	13%	13.2%	20.2%	15%	3.9%
% White/Caucasian with condition	22.6%	22.1%	33.3%	25.7%	10.7%

FAMILY TRAUMA-RELATED BARRIERS

Experiences such as domestic violence and a history of foster care are barriers commonly associated with experiences of homelessness.³ In 2020, 8 percent of those counted said they were actively fleeing domestic violence on the night of the count. As Figure 15 shows, this is a decrease from 15 percent in 2019. For women experiencing homelessness, 22 percent reported they were actively fleeing domestic violence compared with just 2 percent of men. The vast majority—82 percent—of those fleeing domestic violence were in a sheltered location. There were 188 individuals who responded to the survey question of whether they had been in foster care. Of those, 26 percent indicated they had.

EDUCATION & EMPLOYMENT-RELATED BARRIERS

Educational attainment and employment are important factors that affect a person’s ability to find stable housing. They also provide a greater understanding of the potential economic and workforce development needs of individuals experiencing homelessness.

The 2020 PIT Count asked respondents about their employment status. Of the 225 people who responded, 20 percent said they were currently employed, while the remaining 80 percent said they were not (Figure 16). This is similar to the 2019 PIT Count, in which 21 percent reported being employed and 79 percent reported being unemployed. Those staying in shelters were much more likely (34 percent) to say they were employed than those who were not sheltered (7 percent). Additionally, 27 percent of women reported having a job compared to 14 percent of men. Although these measures are helpful in understanding levels of employment in the PIT Count population, individuals’ disabling conditions may affect their ability to find work.

FIGURE 15. Proportion of adults experiencing homelessness fleeing domestic violence (2019 and 2020)

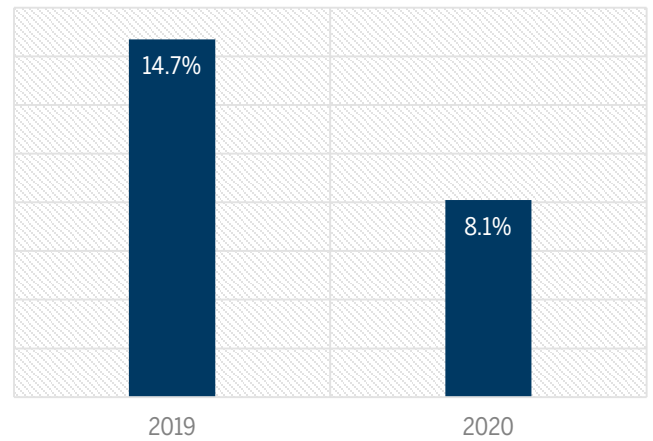
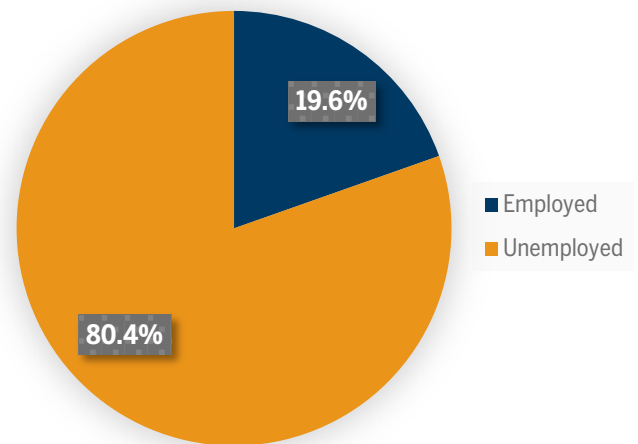
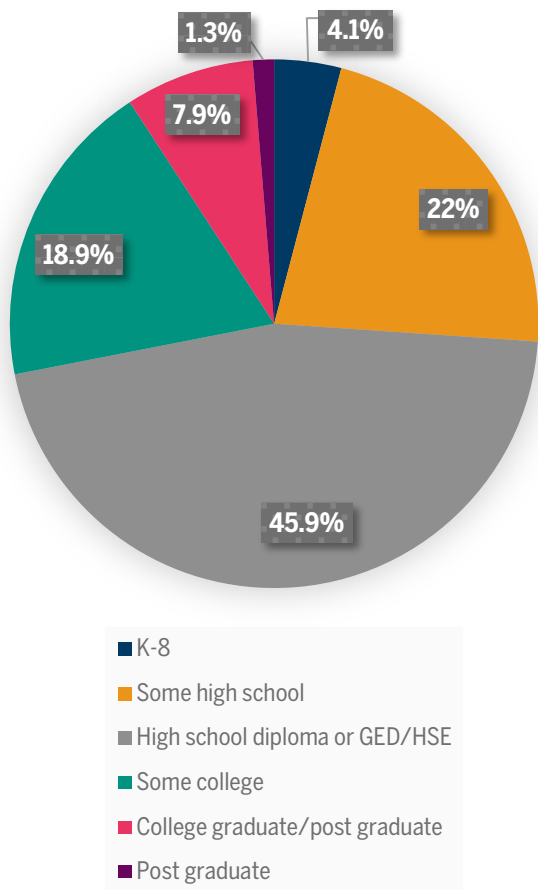


FIGURE 16. Employment status (2020)



Note: n=225

FIGURE 17. Reported educational attainment among adults (2020)



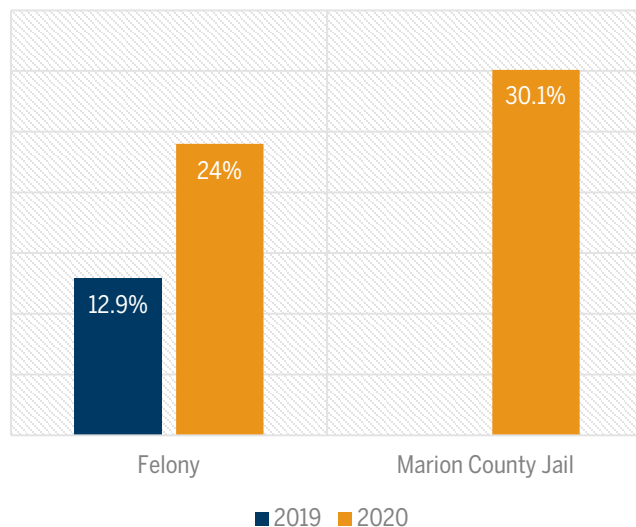
Note: n=318

Compared with 2019, rates of educational attainment in 2020 remained similar. Of the 318 adults who responded to this question, 26 percent had less than a high school diploma or high school equivalency. For 4 percent of these individuals, the highest grade they completed was in K–8, while the remaining 22 percent completed at least some high school. About 9 percent of respondents had a college degree or postgraduate degree (Figure 17).

CRIMINAL JUSTICE-RELATED BARRIERS

Recent work in Marion County aims to better understand and address the relationship between incarceration and homelessness. As mentioned earlier, an additional question regarding experiences with the Marion County Jail was added to all paper surveys used to collect data on the night of the PIT Count. Because this question was new, it cannot be compared to previous years. Of the 166 people who

FIGURE 18. Criminal justice involvement for adults (2020)



responded to the question, 30 percent indicated they spent at least one night in Marion County Jail during the past 12 months. When looking only at unsheltered individuals, that rises to 34 percent. Individuals who reported a felony conviction increased from 13 percent in 2019 to 24 percent in 2020 (Figure 18).

There was some overlap between the two criminal justice measures. There were 28 people who indicated they had both a felony conviction and had spent at least one night in Marion County Jail during the past 12 months. This group represents 19 percent of individuals who said they had a felony, and 56 percent of those who spent time in Marion County Jail. This only provides a partial picture of the level of overlap, as not all participants were asked both questions.

PET OWNERSHIP AS A BARRIER TO SHELTER

Another question added to the 2020 survey was about the relationship between pet ownership and unsheltered homelessness. Someone’s desire to remain with their pet may keep them from seeking shelter if their pet is not allowed in the shelter. Seven percent of those who responded to the question (15 individuals) said that pet ownership had prevented them from going into a shelter at some point.

FAMILY AND YOUTH

This year, the research team expanded analysis on families and children by collecting additional information on different types of families experiencing homelessness. This analysis included families with children present, those whose children were not present, families who do not have children, and unaccompanied children under 18.

It is important to note that the PIT Count and the Youth PIT Count utilize separate definitions of unaccompanied youth in their analysis. While this PIT Count identifies youth and young adults who are 24 years old or younger, most of these young people are part of families with a head of household who is at least 25 years old. In contrast, the Youth and Young Adult PIT Count exclusively focuses on all unaccompanied individuals who are both younger than 25 and who have a head of household who is also younger than 25 years old.

Table 9 displays only families with children present on the night of the count. On that night, 312 individuals in 106 different families were homeless, 15 fewer families than in 2019. Researchers found that 203 children younger than 18 were homeless with their family, all of whom were in shelters.

There were 23 families who said they had children but did not have those children with them on the night of the PIT Count. Seventy-eight percent of these families were not in shelters.

Families may also consist of adults only who are experiencing homelessness together (i.e., married couples, adult siblings, a parent with an adult child, or any number of other relationships self-identified by participants as family). The research team’s analysis uncovered 46 adult-only families on the night of the 2020 PIT Count, most of whom were not sheltered.

HOMELESSNESS UNDER MCKINNEY-VENTO

CHIP collected data from Marion County school districts on school-age youth experiencing housing instability. The U.S. DOE defines homelessness more broadly for children and families than HUD does. The McKinney-Vento Homeless Assistance Act provides students experiencing homelessness with specific services to support their academic success.

Table 10 shows the total number of young people served under the McKinney-Vento Act increased by 3 percent to 2,748 students experiencing some form of housing instability on the night of the PIT Count. Of those 2,748 children, 82 percent were doubled-up (unstable or temporarily housed with friends or relatives), 10 percent were in hotels or motels, and 6 percent were in shelters or temporary housing. Although McKinney-Vento liaisons identified eight children who were unsheltered, those children were not encountered by the PIT teams on the night of the survey.

TABLE 9. Families with children experiencing homelessness in Marion County by location (2020)

	SHELTERED	UNSHELTERED	TOTAL	CHANGE 2019–2020
Total number of households	106	0	106	-15
Number of children under 18	203	0	203	-70
Number of adults age 18+	109	0	109	-30
Chronically homeless households with children	3	0	3	-2
Persons in chronically homeless households	7	0	7	-18

TABLE 10. Marion County McKinney-Vento data for the 2020 PIT Count

HOUSING STATUS	TOTAL	% OF YOUTH	CHANGE 2019–2020
Doubled-up	2,241	81.5%	+131
Shelter/temporary housing	164	6%	-37
Hotel/motel	271	9.9%	+2
Unaccompanied/unattached	64	2.3%	-11
Unsheltered	8	0.3%	-1
Total	2,748		+3.4%

RACIAL DISPARITIES IN YOUTH HOMELESSNESS

Demographic analysis revealed racial disparities in rates of school-age students experiencing homelessness under the McKinney-Vento Act. As shown in Table 11, 65 percent of the 2,739 students who reported their race were Black or African American. Because race is reported differently across schools and townships, Latinx is displayed here as a racial category rather than an ethnicity.

TABLE 11. Reported race of McKinney-Vento youth (2020)

RACE	% OF YOUTH
Asian	0.9%
American Indian or Alaskan Native	0.1%
Black or African American	65.2%
Hispanic or Latinx	12.1%
Multiracial	6%
Native Hawaiian or Pacific Islander	<0.1%
White or Caucasian	15.7%

VETERANS*

Of the 1,436 adults responding to the question about military service on the night of the PIT Count, 16 percent reported having served in the U.S. Armed Forces. Overall, the number of veterans experiencing homelessness was down 18 percent from 2019 (Table 12), continuing a downward trend from 2015 (Figure 19).

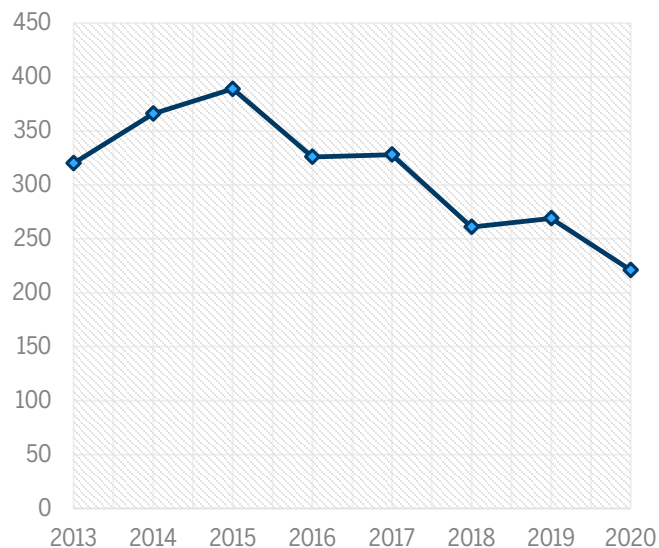
TABLE 12. Location of veterans (2019 and 2020)

	2019 PIT COUNT	2020 PIT COUNT	CHANGE 2019–2020
Sheltered	261	205	-21.5%
Unsheltered	8	16	+100%
Total	269	221	-17.8%
Percentage of adult PIT Count population (age 18+)	20.8%	16%	

In Indianapolis, 93 percent of veterans experiencing homelessness were sheltered, compared with 90 percent of non-veterans. For veterans who were sheltered, 63 percent lived in transitional housing and 30 percent were in emergency shelters. The concentration of veterans in

* Veterans experiencing homelessness are a subgroup prioritized not only by the Indianapolis Continuum of Care, but in federal efforts to address homelessness as well.⁴

FIGURE 19. Number of homeless veterans over time (2013–2020)



transitional housing likely relates to the fact that some transitional housing beds in Indianapolis are designated specifically for veterans.

Some veterans not in transitional housing may not be eligible for veteran-specific services based on their military service records.* These records could be a barrier to housing stability. To understand eligibility for such services, unsheltered individuals and a limited sample of individuals residing in emergency shelters were asked about whether they served in an active duty capacity and whether they had ever accessed medical services through the United States Department of Veterans Affairs. Of the veterans who responded to these follow-up questions, 11 indicated they did not serve in an active duty capacity and 18 indicated that they had not accessed medical services through the VA.

Veterans experiencing homelessness generally report higher rates of disabling conditions than non-veterans. For example, a higher percentage of veterans reported experiencing mental illness, physical disabilities, and drug and alcohol abuse compared with non-veterans. However, a smaller percentage of veterans reported a chronic health condition compared with non-veterans (Table 13).

* Factors such as discharge status and details of service with the U.S. armed forces can determine which types and levels of veteran-specific housing services an individual may access.⁵

TABLE 13. Disabling conditions by veteran and non-veteran status (2020)

	VETERANS	NON-VETERANS
Alcohol abuse	30.8%	15.5%
Drug abuse	30.8%	15.6%
Physical disability	33.3%	17.8%
Mental illness	37.6%	25.8%

IMPLICATIONS

UNSHeltered HOMELESSNESS

The 2020 PIT Count revealed a 77 percent increase in unsheltered homelessness compared with 2019. Extreme weather conditions in 2019 may have led to an undercount of individuals who would have otherwise been in unsheltered situations that year. However, at 186 individuals encountered in unsheltered locations, this is substantially more than what was counted in 2016–2018 when weather conditions were less severe. Based on the data collected, an explanation for this increase is not readily apparent.

Key questions moving forward:

- Why was there an increase in unsheltered homelessness in 2020?
- What factors could have contributed to this observation?
- What barriers exist in the current shelter system that may prevent people from staying in sheltered locations?
- Why is there such a higher prevalence of unsheltered individuals with disabling conditions?

RACIAL DISPARITIES

Ongoing racial disparities in the homeless population need to be addressed. The pathways into homelessness for Black residents are different than for white residents, likely due to systemic racism in housing, disparate economic and educational opportunities, and access to health care. Racial disparities in youth experiencing homelessness under McKinney-Vento could provide some clues into this experience. Additionally, the experiences of homelessness

are different between white and Black adults regarding barriers, location, and chronic homelessness, indicating that the threshold for becoming homeless may involve a higher degree of compounding barriers and risk-factors for white residents than for Black residents.

Key questions moving forward:

- How can we adapt our data collection to better capture the experiences and risk factors of Black residents experiencing homelessness?
- In what ways do our data collection systems center and focus on risk factors more prevalent for white homeless individuals and their experience of homelessness?
- If services are prioritized based on specific disabling conditions and experiences of chronic homelessness, is there a disparate racial impact on who is eligible for and accessing these services?
- What practices and programs in other communities are working to reduce the racial disparity in the homeless population? How might Indianapolis learn from and implement such practices?
- How are pathways into homelessness impacted by a person's racial identity? How might eviction trends and other systemic factors in our criminal justice, foster care, health care systems contribute to disparities in homelessness?

PUBLIC HEALTH CRISES

The COVID-19 pandemic is an urgent example of how public health crises can uniquely affect the homeless population. The way in which the COVID-19 virus is spread has raised important questions for how we best protect the health and safety of individuals experiencing homelessness as well as direct service providers. Information in this report about rates of chronic health conditions, sheltered vs. unsheltered homelessness, and other health risk factors can assist the community in planning and responding to public health issues affecting the homeless population.

Key questions moving forward:

- How will we address public health risk by reducing the number of people in shelters and on the streets by responding to homelessness as a public health issue?
- How will we manage the inherent risk of disease spreading in shelters and encampments?

- How will we prioritize and identify the health and housing needs of those particularly at risk within the homeless population (i.e., those with chronic health conditions, over the age of 60, etc.)?
- How can we work more closely with other systems, such as criminal justice, health care, foster care, to reduce discharges to the homeless shelter system?
- How do we ensure those experiencing homelessness have access to services and health care in a remote environment (i.e., teleservices and telehealth)?

DATA QUALITY

Improvements in data quality will sharpen the analysis of the PIT Count and provide more reliable and important information to decision-makers. Missing demographic information and low response rates on certain barriers limit the accuracy of our data and need to be improved.

Key questions moving forward:

- How will we address limitations in data quality in future reports?
- What types of data should be prioritized for data quality improvement?
- What steps will we implement to improve data quality on these measures for HMIS?
- What adjustments to training and quality control need to be implemented for surveyors?
- How can we standardize the way data is collected across multiple collection methods?

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INDIANA UNIVERSITY
PUBLIC POLICY INSTITUTE
 Center for Research on Inclusion & Social Policy

The Center for Research on Inclusion & Social Policy (CRISP) was created to address complex social issues and the effects of social policy through applied, data-driven, and translational research. CRISP analyzes and disseminates community-relevant research about social disparities and policy issues.

Our faculty, researchers, and analysts partner with community leaders and organizations to deliver policy guidance, unbiased research, and data-driven, objective, expert analysis to help public, private, and nonprofit sectors in Indiana and throughout the nation make important decisions that directly impact quality of life. CRISP is housed within the IU Public Policy Institute (PPI), which also supports the Center for Health & Justice Research (CHJR) and the Indiana Advisory Commission on Intergovernmental Relations (IACIR).

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101 W. Ohio Street, Suite 400
 Indianapolis, Indiana 46204

Phone: (317) 278-1305
 Email: iucrisp@iu.edu
go.iu.edu/CRISP

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AUTHORS

Kelsie Stringham-Marquis, Research Coordinator
Brendan Bow, Research Assistant
Bailee Lucas, Research Assistant
Jacob Purcell, Research Assistant

