



CORONA ROAD RACE



2024 - 2025 Consolidated Annual Performance and Evaluation Report

U.S. Department of Housing and Urban Development Grants
September 2025



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CONTENTS

CR-05 - Goals and Outcomes	1
CR-15 - Resources and Investments 91.520(a)	14
CR-20 - Affordable Housing 91.520(b)	19
CR-25 - Homeless and Other Special Needs 91.220(d, e); 91.320(d, e); 91.520(c)	22
CR-30 - Public Housing 91.220(h); 91.320(j)	25
CR-35 - Other Actions 91.220(j)-(k); 91.320(i)-(j)	28
CR-40 - Monitoring 91.220 and 91.230	31
CR-45 - CDBG 91.520(c)	33
CR-50 - HOME 91.520(d)	35

Appendices

Appendix A – Public Notice.....	A
Appendix B – Summary of Citizen Participation Comments	B
Appendix C – IDIS Reports	C

CR-05 - Goals and Outcomes

Progress the jurisdiction has made in carrying out its strategic plan and its action plan.
91.520(a)

This 2024-2025 Consolidated Annual Performance and Evaluation Report (CAPER) is the City of Corona's report to the U.S. Department of Housing and Urban Development (HUD) describing the use of federal Community Development Block Grant (CDBG) and HOME Investment Partnerships (HOME) funds during the fifth program year of the 2020-2024 Consolidated Plan period. This report covers the period beginning July 1, 2024, and ending June 30, 2025.

The City receives CDBG and HOME funds from HUD on a formula basis each year, and in turn, implements housing and community development projects, and awards public service capacity building grants to nonprofit organizations for projects in furtherance of the adopted Consolidated Plan. The CDBG and HOME programs generally provide for a wide range of eligible activities for the benefit of Corona residents.

For the 2024-2025 program year, the City received \$1,097,298 of CDBG funds and \$405,215.63 of HOME funds from HUD. The City receipted \$620,507.74 of Program Income generated from prior homeownership loan payoffs. Pursuant to the 2024-2025 Action Plan approval, this Program Income was allocated to the Residential Rehabilitation Program. The total allocated resources available in the 2024-2025 Action Plan was \$2,123,021.37.

Together with other federal, state and local investments, HUD resources allowed the City and its community partners to:

- Provide fair housing services to 1,853 residents
- Bring 174 housing units into compliance with local codes
- Complete rehabilitation of health and safety improvement for 4 owner-occupied dwellings under the Residential Rehabilitation Program
- Completion of the ADA construction scope of work for the 2021-2022 Corona Senior Center Rehabilitation project
- Substantially made strides in the award and construction of Phase I Victoria Park Splash Pad project. The project construction was completed in the early part of the 2025-2026 Program Year and will to be acknowledged as completed in the 2025-2026 CAPER
- Commence construction of Phase II Sheridan Park Universal Playground project, which will be completed by December 2025
- Provide one-on-one mentoring for 16 student youth from low-income families
- Provide life-skills support to 110 low-income residents
- Provide life-skills training and housing for 15 residents starting back on the path to

self-sufficiency

- Provide nursing services for 22 developmentally disabled adults
- Provide assistance to 15 foster youths through CASA (Court Appointed Special Advocate) Program
- Provided Tenant Based Rental Assistance to 98 residents
- Under the CDBG-CV Rental/utility assistance program, a total of 230 Applications were received/processed, and 133 Households approved and funded (activity closed in program year 2023-2024)
- Under the CDBG-CV Mortgage/utility assistance program, a total of 32 Applications were received/processed, and 32 Households approved and funded (activity closed in program year 2023-2024)

Table 1 provides a summary of the five-year and one-year accomplishments for the period ending June 30, 2025, arranged by each of the Strategic Plan Goals included in the 2020-2024 Strategic Plan of the Consolidated Plan.

Comparison of the proposed versus actual outcomes for each outcome measure submitted with the consolidated plan and explain, if applicable, why progress was not made toward meeting goals and objectives. 91.520(g)

Table 1 - Accomplishments – Strategic Plan & Program Year to Date

Goal	Category	2024-2025 Amount	Indicator	Unit of Measure	5-Year Strategic Plan			2024-2025 Program Year 5		
					Expected	Actual	Percent Complete	Expected	Actual	Percent Complete
Affordable Housing	Affordable Housing	CDBG: \$100,000 HOME: \$1,218,785	Rental units constructed	Housing Unit	60	0	0.0%	0	0	0.0%
			Tenant-based rental assistance	Households	60	149	248.0%	20	98	490%
			Code Enforcement	Housing Unit	375	1,239	330.4%	75	174	232.0%
			Owner Units Rehabilitated	Housing Unit	30	12	40.0%	6	4	66.7%
Public Services	Public Services	CDBG: \$164,590	People	People	5,355	9,747	182.0%	2,001	2,031	101.5%
Community Facilities	Non-Housing Community Development	CDBG: \$613,249	Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit	People	159,595	67,820	43.0%	44,010	37,910	87.0%
				Public Facility	1	2	200.0%	1	1	100%
CDBG-CV	COVID-19 Response	CDBG-CV: \$1,651,184	People receiving emergency housing assistance	People	267	437	163.6%	0	0	0%
			Businesses	Businesses	45	8	17.8%	0	0	0%

Assess how the jurisdiction's use of funds, particularly CDBG, addresses the priorities and specific objectives identified in the plan, giving special attention to the highest priority activities identified.

The City and its housing and community development partners made progress toward many of the five-year goals.

To address homeless needs, the City focused on its Community Facilities goal during the Consolidated Plan cycle by rehabilitating a public facility for use as a low-barrier emergency shelter. Phase 1 of the rehabilitation work was funded with CDBG funds and Phase 2 work included accessibility modifications. The project is complete and has been in operation since May 31, 2023.

Continued progress in the use of the City's federal resources for Tenant Based Rental Assistance (TBRA) was made during the 2024-2025 Program Year. TBRA funds provided security deposits and rental assistance for low-income Corona residents at risk of homelessness. The Corona TBRA program expended \$1,253,516.94 from July 1, 2024 through June 30, 2025, providing assistance to 98 Corona residents. The City of Corona also used general funds to address back rent situations for applicants, which contributed to the success of this program. This program will continue during the 2025-2026 Program Year with approximately \$800,000 of HOME funds remaining. Future HOME program funding from HUD is critical for continuation of this vital program.

The 2021-2022 Corona Senior Center Rehabilitation Project was completed during the 2024-2025 program year, including construction of the necessary ADA improvements.

The City of Corona's CDBG Public Service Grant partners continued providing services under contract for the 2024-2025 program year. These programs provided critical services to low—and moderate-income residents, residents with special needs, and residents at risk of homelessness.

Individual activity expenditures and accomplishments are shown in Figure 1 and Figure 2 on the following pages.

Figure 1 – Use of CDBG and HOME Funds

Strategic Plan Goal / Activity	Source	Allocation	Spent through 6/30/25	Percent Spent
1. Affordable Housing				
^2020-21 Residential Rehabilitation Program	CDBG	\$411,526.63	\$205,933.32	50.0%
^2019-20 Residential Rehabilitation Program	HOME	\$1,189,063.74	\$56,176.00	4.7%
*Tenant-Based Rental Assistance	HOME	\$1,218,785.23	\$1,218,785.23	100.0%
Code Enforcement	CDBG	\$100,000.00	\$71,005.99	71.0%
	Subtotal	\$2,919,375.60	\$1,551,900.54	53.2%
2. Public Services				
ABC Hopes - [DIS]Abilities Life Skills Support	CDBG	\$26,318.00	\$26,318.00	100.0%
Big Brothers Big Sisters - Bigs with Badges Program	CDBG	\$26,318.00	\$26,318.00	100.0%
Fair Housing Council of Riverside County	CDBG	\$33,000.00	\$33,000.00	100.0%
Peppermint Ridge - Skilled Nursing Services	CDBG	\$26,318.00	\$20,376.15	77.4%
Starting Over Inc. - Path to SEED Program	CDBG	\$26,318.00	\$26,318.00	100.0%
Voices for Children - CASA Program	CDBG	\$26,318.00	\$26,318.00	100.0%
	Subtotal	\$164,590.00	\$158,648.15	96.4%
3. Community Facilities				
^2023-24 Community Facilities (Sheridan Park)	CDBG	\$680,941.52	\$275,544.02	40.5%
^2022-23 Community Facilities (Victoria Park)	CDBG	\$1,317,024.00	\$1,198,593.29	91.0%
	Subtotal	\$1,997,965.52	\$1,474,137.31	73.8%
4. Infrastructure				
2021-22 Corona Senior Center Rehabilitation	CDBG	\$714,229.00	\$714,229.00	100.0%
5. Planning and Administration				
CDBG Administration	CDBG	\$219,459.00	\$172,579.91	78.6%
HOME Administration	HOME	\$40,521.46	\$30,220.70	74.6%
	Subtotal	\$259,980.46	\$202,800.61	78.0%
Total for all Goals:		\$6,056,140.58	\$4,101,715.61	67.7%
<p>*All activities were approved as part of the 2024-2025 Action Plan except as otherwise noted.</p> <p>^Activity will continue to be implemented during the 2025-2026 Program Year to utilize remaining funds.</p> <p>*Activity will continue in 2025-2026 Program year with a balance forward \$860,705.41 for TBRA 2025-2026 activity.</p>				

Figure 2 – Program Year Accomplishments by Strategic Plan Goal

Strategic Plan Goal / Activity	Unit of Measure	Expected	Actual	Percent
1. Affordable Housing				
^Affordable Housing Development	Housing Units	0	0	0.0%
^2019-20 Acquisition for Affordable Housing	Housing Units	0	0	0.0%
^2019-20 Residential Rehabilitation Program (CDBG)	Housing Units	3	2	66.7%
^2019-20 Residential Rehabilitation Program (HOME)	Housing Units	3	2	66.7%
24-25 Tenant-Based Rental Assistance	Households	20	98	490.0%
Code Enforcement	Housing Units	75	174	232.0%
2. Public Services				
ABC Hopes - [DIS]Abilities Life Skills Support	People	126	110	87.3%
Big Brothers Big Sisters - Bigs with Badges Program	People	16	16	100.0%
Fair Housing Council of Riverside County	People	1,800	1,853	102.9%
Peppermint Ridge - Skilled Nursing Services	People	30	22	73.3%
Starting Over Inc. - Path to SEED Program	People	15	15	100.0%
Voices for Children - CASA Program	People	14	15	107.1%
3. Community Facilities				
^2023-24 Community Facilities (Sheridan Park)	People	21,385	0	0.0%
^2022-23 Community Facilities (Victoria Park)	People	22,625	0	0.0%
4. Infrastructure				
2021-22 Corona Senior Center Rehabilitation	Public Facility	1	1	100.0%
5. Planning and Administration				
CDBG Administration	N/A	-	-	-
HOME Administration	N/A	-	-	-
*All activities were approved as part of the 2024-2025 Action Plan except as otherwise noted. ^Activity will continue to be implemented during the 2025-2026 Program Year to utilize remaining funds.				

COVID-19 Response

In response to the COVID-19 pandemic, Congress passed the Coronavirus Aid, Relief, and Economic Security (CARES) Act and it was signed into law on March 27, 2020, authorizing \$2.2 trillion for a variety of measures to prevent, prepare for, and respond to the COVID-19 pandemic. Under the CARES Act, HUD provided a special allocation of CDBG funds to the City of Corona in the amount of \$1,670,542. The total allocation was awarded to the City by HUD in two installments, necessitating two substantial amendments to the City's 2019-2020 Action Plan, which were completed on June 3, 2020, and on November 18, 2020. The City Council approved three programs to use CDBG-CV funds to address COVID-19, through the first two amendments. During the 2021-2022 Program Year, the Corona City Council approved a third amendment to the 2019-2020 Annual Action Plan that canceled the Corona Emergency Related Activities Project (\$176,000) and reduced the Personal Protective Equipment Grant by \$100,000 allowing \$276,000 to be reprogrammed into the City's Emergency Housing Needs Assistance Program (EHNAP). During the 2022-2023 program year, the Corona City Council approved a fourth amendment to the 2019-2020 Annual Action Plan that Action Plan Amendment No. 4 reduced the remaining balance of the Personal Protective Equipment Grant program by \$86,039.38, reduced the Emergency Housing Needs Assistance (EHNAP – Mortgage) budget by \$75,363, and increased the Emergency Housing Needs Assistance Program (EHNAP – Rental) budget by \$161,402.38. It should be noted that reallocated funding was utilized and fully spent on rental assistance during 2023-2024 program year. The balance of the CARES act funding set aside for administration is being utilized to final all administrative activities and reporting. A description of the CDBG-CV funded projects include the following:

1. The Emergency Housing Needs Assistance Program (EHNAP) helps prevent eviction for renter households and prevent foreclosure for homeowner households. The maximum grant for a renter household or an owner household is \$12,000 over a maximum period of up to six (6) months. Eligibility criteria included: proof of Corona residency, documentation of low- and moderate-income status, COVID-19 impact, and inability to pay for housing and/or utility payments on their own.
2. The Personal Protective Equipment Grants for Businesses program provided grants of up to \$5,000 to eligible Corona businesses to reimburse costs for personal protective supplies and equipment (PPE) necessary to implement social distancing requirements in accordance with Federal and State guidelines.

Individual activity expenditures and accomplishments are shown in Figure 3 and Figure 4 on the following pages.

Figure 3 – Use of CDBG-CV Funds

Strategic Plan Goal / Activity	Source	Allocation	Spent through 6/30/24	Percent Spent
1. CDBG-CV Emergency Housing Needs Assistance				
Rental Assistance	CDBG-CV	\$1,023,279.38	\$1,075,982.42	105.15%
Mortgage Assistance	CDBG-CV	\$274,637.00	\$217,951.45	79.36%
	Subtotal	\$1,297,916.38	\$1,293,933.87	99.69%
3. CDBG-CV Planning, Administration, and Monitoring				
CDBG Administration	CDBG-CV	\$334,108.00	\$318,733.19	95.40%
4. CDBG-CV Business Assistance				
Personal Protective Equipment Grants for Businesses	CDBG-CV	\$38,517.62	\$38,517.62	100.00%
Total for all Goals:		\$1,670,542.00	\$1,651,184.68	98.84%
*All activities were approved as part of the 2019-2020 Action Plan Amendments for CDBG-CV and subsequent amendments to adjust allocation budgets to approved activities				

CDBG-CV funds have a six-year period of performance under the grant agreement between the City and HUD. Therefore, CDBG-CV funds must be fully spent by June 24, 2026.

Figure 4 –Accomplishments for CDBG-CV

Strategic Plan Goal / Activity	Unit of Measure	Expected	Actual	Percent
1. CDBG-CV Emergency Housing Needs Assistance				
Rental Assistance	People	180	350	194.4%
	Households	60	133	221.7%
Mortgage Assistance	People	87	87	100.0%
	Households	29	32	110.3%
3. CDBG-CV Planning, Administration, and Monitoring				
CDBG Administration	N/A	-	-	-
4. CDBG-CV Business Assistance				
Personal Protective Equipment Grants for Businesses	Businesses	45	8	17.8%
*All activities were approved as part of the 2019-2020 Action Plan and subsequent amendments to adjust allocation budgets to approved activities				

Describe how the City has evolved its system of care over the last year to address homelessness and describe the most impactful result of this change

On January 23, 2019, City Council established the Homelessness Resources Committee to work with public and private stakeholders to evaluate the homelessness issue in Corona. Through community engagement and evaluation of homeless response efforts in other regions, in November of 2019, the Committee concluded that a coordinated systems approach was needed to effectively address homelessness in Corona. A systems-oriented approach provides “whatever-it-takes” action, continuity of care, and a path to housing.

On November 21, 2019, the City hired a Housing and Homeless Solutions Manager to develop a Homeless Strategic Plan. On December 18, 2019, City Council established the Homeless Strategic Plan Ad Hoc Committee to support the strategic plan development process. During the months of December 2019 through May 2020, the Strategic Plan was developed through a highly collaborative process. Key components of the plan include Community Engagement; 2) Needs Assessment; 3) Cost Impact Analysis, and 4) Analysis of Best Practices and Models.

On June 17, 2020, the City Council adopted the Homeless Strategic Plan and approved the Homeless Program budget to develop a system of services in FY 2021. The system of services includes development of a low-barrier emergency shelter/navigation center, expansion of a motel voucher emergency shelter program to provide transitional housing for females and their families, expanded outreach and engagement services, permanent supportive housing, and tenant-based rental assistance.

Since the adoption of the Homeless Strategic Plan, the City of Corona has developed a comprehensive A-to-Z System of Services that provides support to the following priority populations:

1. Unaccompanied Chronically Homeless Individuals & Unsheltered Street Homeless Individuals
 - a. Outreach and Engagement
 - b. Low-Barrier Emergency Shelter
 - c. Navigation Center/Multi-Service Center
 - d. Permanent Supportive Housing
2. Situationally Homeless Individuals and Families
 - a. Outreach and Engagement
 - b. Low-Barrier Emergency Shelter
 - c. Workforce Development Programs
 - d. Affordable Housing

3. At-Risk of Homeless Individuals and Families
 - a. Eviction Prevention Programs
 - b. Workforce Development Programs
 - c. Utility, Food, Clothing, and Transportation Assistance Programs

To address homeless needs, the City focused on its Community Facilities goal in the Consolidated Plan by rehabilitating a public facility for use as a low-barrier emergency shelter. Phase 1 of the rehabilitation work was funded with CDBG funds and is complete; Phase 2, work including accessibility modifications are complete and a service provider is selected to operate the facility. With the completion of Phase II during the 2022-2023 program year, the Corona Harrison Shelter/Navigation Center opened its doors for service on May 31, 2023. The shelter/navigation center, also known as the Harrison Hope Center provides, 56-beds of low-barrier emergency shelter for single adult males and single adult females. The facility has an onsite full-service clinic that provides medical, behavioral health and dental services and pet accommodations.

Continued progress in the City's TBRA Program was made during the 2024-2025 Program Year. Funds were used to provide security deposits and rental assistance for Corona residents. The Corona TBRA program expended \$1,253,516.94 from July 1, 2024 through June 30, 2025. During the 2024-2025 Program Year, Tenant Based Rental Assistance was provided to 98 Corona residents. This program will continue during the 2025-2026 Program Year with approximately \$800,000 of funds remaining. As part of the TBRA program, the City allocates general funds to pay back rent to enhance the success of the Homeless Prevention Program. Future HOME program funding from HUD is critical for continuation of this vital program. TBRA expenditures and accomplishments are located in Figure 1 and Figure 2.

Describe coordination with the Continuum of Care and efforts to address the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans, and unaccompanied youth) and persons at risk of homelessness

The City of Corona Housing and Homeless Solutions Manager is the Chair of the Riverside County Continuum of Care. Accordingly, the City of Corona plays a key role in the development of policies and programs that address the needs of the homeless throughout the region. In addition, the City's Homeless Strategic Plan was developed in close collaboration with the Continuum of Care and multiple County Agencies that provide regional services and funding to prevent and end homelessness. Further, the City's Homeless

Strategic Plan established a framework for the development of a local, comprehensive system of services.

The City of Corona also partnered with the County's Housing and Workforce Solutions Department, State HCD, and Abode Communities for the development of 53 units of

permanent supportive housing (PSH). As a State HomeKey project, the Vista Dorada PSH development was possible by converting the former Ayres Hotel into 53 units of PSH. The County allocated 52 project-based vouchers along with Federal ARPA funds. These funds were combined with State funds to finance the rehabilitation work. The City provides security deposit assistance, home furnishing assistance and other support through its homeless system of services. Finally, the project includes a partnership with County Behavioral Health, who provides onsite supportive services five-days per week.

The City of Corona also allocates general funds to City Net to operate an emergency motel shelter program for homeless families with children. Up to 30 motel rooms are available to shelter homeless families. City Net provides wrap around services and works with the City's larger system of services to ensure families graduate into permanent housing.

Through this two-pronged method, the City has developed a dynamic and responsive approach to address the needs of transitionally and chronically homeless individuals and families, families with children, veterans, unaccompanied youth, persons who are at risk of homelessness, and other homeless sub-populations such as victims of domestic violence, persons with physical disabilities, persons living with mental illness and/or substance abuse and persons chronic health issues.

Describe consultation with the Continuum(s) of Care that serves the jurisdiction's area in determining how to allocate ESG funds, develop performance standards and evaluate outcomes, and develop funding, policies and procedures for the administration of HMIS

Although the City of Corona does not receive ESG funds, the City does have representation in this process because the Corona Housing and Homeless Solutions Manager is the Chair of the Riverside County Continuum of Care. By extension, the City of Corona plays a key role in the development of funding policies, performance standards and processes to evaluate outcomes for ESG, CESH, HHAP, CoC, and other funds administered through the Riverside Continuum of Care. As part of this process, the City is also involved developing policies and procedures that govern the administration of the regional HMIS and CES Systems.

At every Continuum of Care meeting, the Chair and Vice Chair work with County staff to ensure that there are committee reports from the HMIS Administrators Council, CES System Oversight Committee, Standards and Evaluation Committee, Planning Committee, Housing and Sustainability Committee, and the Youth Advisory Committee. The purpose of the committee reports is to ensure that the Riverside Continuum of Care is a high performing, outcomes-oriented system of services. Continuum of Care meetings also focus on the status of each funding source in terms of commitment and spending levels as well as achievement of outcomes and performance metrics outlined in the County of Riverside Homeless Action Plan. If there are challenges that require course correction, the Continuum of Care develops policy recommendations that are submitted to the CoC Board of Governance for approval.

The City's Housing and Homeless Solutions Manager is also a member of the CoC Board of Governance. The Board of Governance is responsible for approving policy and funding allocations to prevent and address homelessness throughout Riverside County.

CR-10 - Racial and Ethnic composition of families assisted

Describe the families assisted (including the racial and ethnic status of families assisted).
91.520(a)

Table 2 – Table of assistance to racial and ethnic populations by source of funds

Race/Ethnicity	CDBG	HOME
White	1,499	61
Black or African American	336	17
Asian	81	5
American Indian or American Native	13	1
Asian & White	1	-
Native Hawaiian/Other Pacific Islander	14	2
Other	87	16
Total	2,031	102
Hispanic	1,029	50
Not Hispanic	1,002	48

Narrative

As required in the HUD Integrated Disbursement and Information System (IDIS), Table 2 provides an aggregate of race and ethnicity data for persons and/or household housing units reported as served during the 2024-2025 program year based on accomplishment data from CDBG and HOME activities reported in IDIS. *Based on IDIS programming for the CAPER template in the eConPlanning Suite, not all Office of Management and Budget (OMB) racial / ethnic categories are represented.*

CR-15 - Resources and Investments 91.520(a)

Identify the resources made available

Table 3 - Resources Made Available

Source of Funds	Resources Made Available	Amount Expended During Program Year
CDBG	\$1,097,298	\$2,222,560.06
HOME	\$1,025,723.37	\$1,253,516.94
Total	\$2,123,021.37	\$3,476,077.00

Note: Expenditures include projects from prior Action Plan(s) that were completed during this Program Year.

Narrative

For the 2024-2025 program year, the City received \$1,097,298 of CDBG funds and \$405,215.63 of HOME funds from HUD. The City also allocated \$620,507.74 of unexpended prior year program income (PI). The total budget allocated in the 2024-2025 Action Plan included \$1,097,298 of CDBG funds and \$1,025,723.37 of HOME funds. This investment of CDBG and HOME funds was a catalyst for positive change in the community.

Identify the geographic distribution and location of investments

Table 4 – Identify the geographic distribution and location of investments

Target Area	Planned Percentage of Allocation	Actual Percentage of Allocation	Narrative Description
CDBG Target Areas	4.7%	3.3%	Code Enforcement (CDBG Funded)

Narrative

CAPER Table 4 shows the geographic distribution and location of investments in Target Areas defined by the grantee in the Consolidated Plan.

Planned Percentage of Allocation: During the 2024-2025 program year, the City funded one activity (Code Enforcement) that exclusively benefited its CDBG Target Areas. The \$100,000 planned investment represented 4.7% of the total amount of the total resources made available in Table 3 (\$2,123,021.37).

Actual Percentage of Allocation: During the 2024-2025 program year, the City spent \$71,005.99 for the Code Enforcement activities that exclusively benefited the CDBG Target Areas. This expenditure represents 3.3% of the \$2,123,021.37 of CDBG and HOME funds expended during the program year as shown in Table 3.

Leveraging

Explain how federal funds leveraged additional resources (private, state and local funds), including a description of how matching requirements were satisfied, as well as how any publicly owned land or property located within the jurisdiction that were used to address the needs identified in the plan.

All applicants for CDBG funds are strongly encouraged to leverage their CDBG request with other funding sources. The City supports applications by other entities for additional federal resources for proposed projects or programs as long as they are consistent with the City's policies, ordinances, and the Strategic Plan.

HUD provided a 100% reduction of Corona's match requirement for 2022 due to COVID-19. Ordinarily, HUD requires HOME Participating Jurisdictions (PJs) to match 25 percent of their non-administrative HOME expenditures during a Federal Fiscal Year. The City of Corona's HOME Match is shown in Table 5.

Table 5 – Fiscal Year Summary - HOME Match Report

Fiscal Year Summary – HOME Match	
1. Excess match from prior Federal fiscal year	\$8,776,574.00
2. Match contributed during current Federal fiscal year	\$0.00
3. Total match available for current Federal fiscal year (Line 1 plus Line 2)	\$8,776,574.00
4. Match liability for current Federal fiscal year	\$16,459.00
5. Excess match carried over to next Federal fiscal year (Line 3 minus Line 4)	\$8,760,115.00

Table 6 – Match Contribution for the Federal Fiscal Year

Match Contribution for the Federal Fiscal Year								
Project No. or Other ID	Date of Contrib.	Cash (non-Federal sources)	Foregone Taxes, Fees, Charges	Appraised Land/Real Property	Required Infrastructure	Site Prep., Const. Materials, Donated labor	Bond Financing	Total Match
-	-	-	-	-	-	-	-	-

Table 7 – Program Income

Program Income – Enter the program amounts for the reporting period				
1. Balance on hand at beginning of reporting period	2. Amount received during reporting period	3. Total amount expended during reporting period	4. Amount expended for TBRA	5. Balance on hand at end of reporting period
\$672,082.74	\$0.00	\$437,167.06	\$384,592.06	\$235,915.68

HOME MBE/WBE report

Minority Business Enterprises and Women Business Enterprises – Indicate the number and dollar value of contracts for HOME projects completed during the reporting period

Table 8 – Minority Business and Women Business Enterprises

	Total	Minority Business Enterprises				White Non-Hispanic
		Alaskan Native or American Indian	Asian or Pacific Islander	Black Non-Hispanic	Hispanic	
Contracts						
Number	0	0	0	0	0	0
Dollar Amount	\$0	\$0	\$0	\$0	\$0	\$0
Sub-Contracts						
Number	0	0	0	0	0	0
Dollar Amount	\$0	\$0	\$0	\$0	\$0	\$0
	Total	Women Business Enterprises		Male		
Contracts						
Number	0	0		0		
Dollar Amount	\$0	\$0		\$0		
Sub-Contracts						
Number	0	0		0		
Dollar Amount	\$0	\$0		\$0		

Minority Owners of Rental Property – Indicate the number of HOME assisted rental property owners and the total amount of HOME funds in these rental properties assisted

Table 9 – Minority Owners of Rental Property

	Total	Minority Property Owners				White Non-Hispanic
		Alaskan Native or American Indian	Asian or Pacific Islander	Black Non-Hispanic	Hispanic	
Number	0	0	0	0	0	0
Dollar Amount	\$0	\$0	\$0	\$0	\$0	\$0

Relocation and Real Property Acquisition – Indicate the number of persons displaced, the cost of relocation payments, the number of parcels acquired, and the cost of acquisition

Table 10 – Relocation and Real Property Acquisition

Parcels Acquired	0	\$0
Businesses Displaced	0	\$0
Nonprofit Organizations Displaced	0	\$0
Households Temporarily Relocated, not Displaced	0	\$0

Households Displaced	Total	Minority Property Enterprises				White Non-Hispanic
		Alaskan Native or American Indian	Asian or Pacific Islander	Black Non-Hispanic	Hispanic	
Number	0	0	0	0	0	0
Cost	\$0	\$0	\$0	\$0	\$0	\$0

CR-20 - Affordable Housing 91.520(b)

Evaluation of the jurisdiction's progress in providing affordable housing, including the number and types of families served, the number of extremely low-income, low-income, moderate-income, and middle-income persons served.

Table 11 – Number of Households

	One-Year Goal	Actual
Number of homeless households to be provided affordable housing units	20	98
Number of non-homeless households to be provided affordable housing units	6	4
Number of special-needs households to be provided affordable housing units	0	0
Total	26	102

Table 12 – Number of Households Supported

	One-Year Goal	Actual
Number of households supported through rental assistance	20	98
Number of households supported through the production of new units	0	0
Number of households supported through the rehab of existing units	6	4
Number of households supported through the acquisition of existing units	0	0
Total	26	102

Discuss the difference between goals and outcomes and problems encountered in meeting these goals.

Tables 11 and 12 reflect the City's affordable housing goals and accomplishments for the 2024-2025 program year. HUD defines affordable rental housing in Section 215(a) of the National Affordable Housing Act as housing rented at less than the fair market rent; or a rent that does not exceed 30 percent of the adjusted income of a family whose income equals 65 percent of the median income for the area, with adjustment for number of bedrooms in the unit, except that HUD may establish income ceilings higher or lower than 65 percent of the median for the area on the basis of HUD's findings that such variations are necessary because of prevailing levels of construction costs or fair market rents, or unusually high or low family incomes. In HOME-funded rental projects of five or more units, Section 215 specifies that not less than 20 percent of the units must be occupied by households earning

less than 50 percent of area median income when the project includes 5 or more HOME-assisted units. HUD defines affordable ownership housing in Section 215(b), whereby the housing does not have an initial purchase price or after-rehabilitation value that exceeds 95 percent of the median purchase price for the area, as determined by HUD or in accordance with a local market study pursuant to 24 CFR 92.254(a)(2)(iii).

During 2024-2025, the City preserved and revitalized four owner-occupied housing units by providing loans to improve the City's aging single-family housing stock as part of the Residential Rehabilitation Program implemented by the Housing and Homeless Solutions Division. The program slowed significantly in prior program years due to two factors: the pandemic and the subsequent inflationary period. With a steady reduction in the cost-of-living prices, including access to construction materials, the City has seen a gradual increase in interest in the Residential Rehabilitation program. Additionally, staff conducts targeted marketing efforts several times a year through thousands of mailers sent directly to residential properties. On average, these targeted efforts yield several inquiries.

The Tenant-Based Rental Assistance program hit good strides in accomplishments and expenditures during the 2024-2025 program year. The City's homeless services wrap-around operator was awarded a contract during the 2022-2023 program year. The Harrison shelter had its grand opening and began services May 31, 2023. In tandem with the management of the shelter, the operator also focused on establishing and training its TBRA team. Since that time, HOME TBRA Funds have supported payment of security deposits and rental assistance for Corona. As of the drafting of this CAPER, the Corona TBRA program has expended \$1,253,516.94. The program provided Tenant Based Rental Assistance to 98 residents. This program has been approved by the Corona City Council to receive HOME funds in the upcoming program year.

In 2019-2020, the City purchased a 4.82-acre surplus property from the Riverside County Transportation Commission (RCTC) at Second Street and Buena Vista for the production of new affordable housing and permanent supportive housing units. In the 2020-2021 program year, the City issued an RFP to select an affordable housing partner to develop the site. During the 2021-2022 Program Year, a developer was selected but the project was halted due to the pandemic and pandemics impacts to the financial markets and supply chains. In program year 2023-2024, negotiations restarted on the family project and PSH project; these are separate projects. Additionally, the developer started project development activities for both projects, i.e., construction design and engineering, environmental and infrastructure studies, and initiating project entitlement approvals. Negotiations led to an increase in family units from 110 to 115, including 20 units set aside to provide preference to at-risk of- or homeless households, and the PSH project will contain 25 units. The 115-unit family project will break ground in fall 2025, while the 25-unit PSH project will continue working toward completion of its funding stack by applying for tax credits in the second round of 2026.

Discuss how these outcomes will impact future annual action plans.

The progress made in the past five years was assessed and considered during the planning of the recently approved five-year 2025-2029 consolidated plan. Pending further assessment of these efforts/needs assessments and public outreach, it is anticipated that the City may opt to continue to prioritize funding for the development of affordable housing that may include permanent supportive housing or other housing options to address the needs of homeless, extremely-low income, low-income, and moderate-income residents in need of affordable housing and expand homeless prevention efforts. Additionally, with a issued NOFA (Notice of Funding Availability) for the 2021-2022 program year, the City made CDBG public service funding available to nonprofit organizations with an option to renew the grants for four additional program years to cover the remainder of the 2020-2024 Consolidated Plan period. These efforts support the Consolidated Plan, the Homeless Strategic Plan, and the City's Strategic Plan.

Include the number of extremely low-income, low-income, and moderate-income persons served by each activity where information on income by family size is required to determine the eligibility of the activity.

Table 13 – Number of Persons Served

Number of Persons Served	CDBG Actual	HOME Actual
Extremely Low-income	0	115
Low-income	1	59
Moderate-income	0	14
Total	1	188

Narrative Information

The Consolidated Plan identified a high priority need to increase the supply of affordable housing and a high priority need to preserve the supply of affordable housing. To address what HUD defines as “worst case housing need” – low-income residents who pay more than 50 percent of their income for housing costs—the City has prioritized the investment of CDBG funds and HOME funds in support of projects that increase the supply of affordable housing through housing development, particularly the project at the W. Second Street and Buena Vista Avenue, 4.82-acre site. The City also provided HOME funds in the 2024-2025 Action Plan for a tenant based rental assistance program that served 98 households.. The City has seen the success of the TBRA program and continues to fund it as a major focus in the upcoming 2025-2026 program year. The City also used previously allocated HOME funds to preserve four affordable housing units through the Residential Rehabilitation Program.

CR-25 - Homeless and Other Special Needs 91.220(d, e); 91.320(d, e); 91.520(c)

Evaluate the jurisdiction's progress in meeting its specific objectives for reducing and ending homelessness through:

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

In June of 2020, the City of Corona launched a comprehensive Homeless Strategic Plan that included an A-to-Z homeless system of services. At the time the plan was launched, the Riverside County Homeless Point in Time Count data for 2019 identified 164 unsheltered homeless living on the streets of the City. According to the most recent published data the Riverside Counties 2025 Point in Time Count, Corona homeless were identified as 108 unsheltered homeless, and 146 sheltered homeless. A total of 254 in its most recent count, a 66% increase in the City of Corona from the last count in 2023.

In terms of reaching out to homeless persons, the City of Corona utilizes a public/private outreach and engagement model to assess the needs of the homeless in Corona. The public side of the model is the Corona Police Department Homeless Outreach & Psychological Evaluation (HOPE) Team. The private side of the model is City Net, a contracted nonprofit partner that employs street outreach case managers and housing navigators. In addition, our Corona Homeless Solutions Team negotiated a contract with the County of Riverside Behavioral Health Department (RUHS-BH) to co-locate a Mobile Crisis Management Team (MCMT) in City Hall near the Police Department HOPE Team and City Net. The MCMT Team supports our public/private outreach teams when at risk and homeless clients are experiencing behavioral health issues, including mental illness, substance use disorders, and other co-occurring diagnoses. The MCMT Team can fast track behavioral health placements for detox and many other forms of treatment and services. Further, County Behavioral Health also allocated a Community Behavioral Assessment Team clinician (CBAT) to our Police Department HOPE Team. This robust public/private outreach team facilitates rapid response and connection to services and shelter through daily outreach and engagement.

As part of the outreach process, each homeless individual and/or family receives a detailed field assessment and VI-SPDAT survey to determine needs and appropriate resources. After field assessments are conducted, homeless clients are connected to a wide variety of supportive services, shelter, and permanent housing through the City's system of services as well as through other public and private partners in the community.

Addressing the emergency shelter and transitional housing needs of homeless persons

As part of Corona's Homeless Strategic Plan adoption, City Council approved the development of a comprehensive system of services, shelter, and housing. This included the development of a year-round, 24/7 low-barrier, emergency shelter/navigation center and an

expansion of the City's existing motel emergency shelter program. The shelter/navigation center is pet friendly, has a full-service onsite clinic that provides medical, behavioral health, and dental services, as well as a full-service kitchen and extra-large storage lockers. The shelter/navigation center is known as the Harrison Hope Center. There are a total of 56 beds: 20 for males, 15 for females, 5 for post hospital recuperative care, and 16 overflow beds that are used in the event of inclement weather or other emergencies as well as to provide additional bed space, if needed. The Harrison Hope Center serves single adult males and single adult females. Through a contract with the City of Corona, Mercy House Living Centers operates the Harrison Hope Center along with other homeless services program components which include a day-service transportation/meal program, 12 units of permanent supportive housing, and tenant-based rental assistance to provide homeless prevention and rapid rehousing services.

Through a contract with the City of Corona, the City's motel emergency shelter program is operated by City Net. The motel emergency shelter program is also a year-round emergency shelter program that comes with wrap around services, housing navigation, and permanent housing rental assistance programs. The motel emergency shelter program primarily serves families and couples; however, due to a State Encampment Resolution Grant, the motel program also provides emergency shelter and permanent housing resources to homeless encampment occupants living in the Santa Ana Riverbed. On average, the City provides 56 emergency shelter motel rooms every night.

Helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families and those who are: likely to become homeless after being discharged from publicly funded institutions and systems of care (such as health care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); and, receiving assistance from public or private agencies that address housing, health, social services, employment, education, or youth needs

As part of the City's A to Z homeless system of services, HOME funds have been allocated to support a Tenant-Based Rental Assistance (TBRA) Program. The TBRA Program has two components. The first component is Homeless Prevention. The second component is rental assistance for the City's shelter graduates who are ready to move into permanent housing. To maximize HUD funds and support a high functioning system, the City allocates local Measure X funding to supplement the HOME TBRA Program. For individuals and families that are behind on rent and utility bills, the Measure X funds are used to pay rent and utility arrears, and HOME TBRA funds are used to pay for future rental assistance. This successful homeless prevention program has dramatically reduced inflows into the homeless population in Corona. Local Measure X funds are also used to supplement TBRA used for shelter graduates moving into permanent housing. For example, the Measure X funds pay for landlord incentives, home furnishings, movers, credit reports, application fees, and other related costs while the TBRA funds are used to support security deposits and rental assistance. The Measure X funds are budgeted in a line item titled "whatever it takes" to facilitate crisis stabilization and successful permanent housing placements. The integration

of local city funds with HUD funds has contributed to the City's high functioning system of services.

In addition, the City's Housing and Homeless Solution Manager was re-elected to serve another two-year term as the Chair of the Riverside County Continuum of Care. In this role, the City of Corona has a major influence on and participation in all aspects of the Continuum of Care System in Riverside County. With respect to helping youth discharged from foster care and other homeless youth, the Chair was directly involved in working with the County to facilitate meetings for the development of an action plan for the HUD Youth Homelessness Demonstration Program (YHDP) Grant. Riverside County received one of the highest HUD YHDP allocations in the nation totaling \$7.4 million. As the Chair of the Continuum of Care, our Housing and Homeless Solutions Manager also sits on the Continuum of Care Board of Governance which approves all federal, state, and local funds allocated to the Continuum of Care. In this role, she and the other Board of Governance Members recently approved 7 projects which will provide transitional housing, rapid rehousing, permanent supportive housing, and supportive services only resources for homeless youth throughout the region. When the YHDP projects are launched, the City's outreach teams will collaborate with those providers to better serve homeless youth in Corona.

For homeless discharged from hospitals, the City has a partnership with Corona Regional Medical Center to support homeless discharged from the hospital for regular shelter beds and post hospital recuperative care beds. Our Shelter/Navigation Center has an onsite clinic partner, so coordination of medical and behavioral health services allows the City to ensure that those discharged from the hospital receive the care they need. Once these clients recover in recuperative care, they can transition to regular shelter beds and then to permanent housing resources provided through the City's full system of services.

The City's Housing and Homeless Solutions Manager also Chair's the Policy Advocacy Committee of the Continuum of Care. This Committee has a Working Group that is focused on reentry for justice involved homeless clients across the region. As part of this Working Group, the Riverside County Continuum of Care partnered to host the region's first Reentry Conference. The conference was a huge success bringing together public and private agencies that provide shelter, housing, employment and other services to homeless clients discharged from jails and prisons. As a result, ongoing collaborative meetings continue in our region. These efforts benefit Corona's homeless system of services.

For homeless individuals discharged from mental health facilities, the City of Corona closely collaborates with Riverside County Behavioral Health due to the MCMT and CBAT Teams that are co-located in City Hall. In most cases, the MCMT and CBAT Teams and/or the County Coordinated Entry System (CES) Teams are referring to the City's system for placement in our shelter/navigation center or motel shelter programs. For those requiring a higher level of behavioral health care, the City works with the County to provide services and treatment, especially outpatient treatment so homeless clients can continue to thrive and progress in our shelter programs and housing programs.

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again

The City's Homeless Strategic Plan includes a comprehensive needs assessment. This needs assessment concluded that the City's largest homeless subpopulation is the chronically homeless who are living with co-occurring diagnoses such as mental illness, substance abuse, health issues and physical disabilities. Calls for service data from the City's police and fire departments provide similar conclusions in terms long-term street homeless who are living with mental illness, substance abuse and health issues.

Since the City's Homeless Plan was launched, the City has partnered with the County of Riverside and Abode Communities on large hotel conversion to provide 53 units of permanent supportive housing (PSH). Funded with State HomeKey funds, County ARPA Funds, and County Project-Based Vouchers, the City was able to support the project with HOME TBRA funds to provide security deposits for this chronically homeless moving from our streets into the PSH units. In addition, the City used its local Measure X funds to provide home furnishings and essential items for all of the chronically homeless clients placed in the PSH units. The City also funded all of the outreach support through City Net who identified the chronically homeless clients who were referred to CES and the County Housing Authority for placement in this housing project (known as Vista Dorada). The City's Housing and Homeless Solutions Manager worked closely with City Net, CES staff, the County and Abode and over the span of a few months, we were able to successfully lease up 100% of the units with chronically homeless clients that had been living on the streets of Corona or who were in the City's shelter system waiting for a PSH unit.

Because the City has a robust public/private outreach team, chronically homeless are engaged on a daily basis throughout Corona. Because many of these clients have high barriers, the City's shelter and housing programs are extremely low barrier. The City's goal is to meet clients where they are but not leave them where they are. The City requires its contracted providers to use trauma informed care which is a national best practice. When combined with our low barrier programs and housing first approach, the outcomes to addressing homelessness should decline.

CR-30 - Public Housing 91.220(h); 91.320(j)

Actions taken to address the needs of public housing

There are no public housing developments in the City of Corona. The Corona Housing Authority (CHA) does not administer Section 8 and does not own HUD Public Housing.

For public housing purposes, the City is within the service area of the Housing Authority of the County of Riverside (HACR). The mission of HACR is “to transform and promote healthy, thriving communities, re-ignite hope and restore human dignity through the creation and preservation of high quality and innovative housing and community development programs which enhance the quality of life and revitalize neighborhoods to foster self-sufficiency.”

HACR converted its 469 units of public housing into project-based voucher units through HUD’s Rental Assistance Demonstration Program on October 1, 2016. The converted units are now owned by Riverside Community Housing Corp, which is the non-profit side of the Housing Authority. The inventory of 469 units includes 37 accessible units. As the population has increased in Riverside County so has the demand for accessible public housing units. As of this writing of the 2024-2025 CAPER, the Housing Choice Voucher waiting list had 141,723 registrant households, of which 70,908 of registrant households live within Riverside County, and 32,397 have registered as disabled households were these registrants may require an accessible unit.

According to the HACR Housing Choice Voucher Administrative Plan, HACR prioritizes leasing of available accessible units to households requiring such an accommodation. If a non-disabled household occupies an accessible unit, HACR has an established relocation policy that will relocate non-disabled households to standard units and facilitate access to the needed accessible unit for the disabled household. According to HACR, all accessible units are occupied by disabled households who require these units. HACR’s Reasonable Accommodation procedure specifies that any resident may submit a written request for a Reasonable Accommodation to allow full access and participation in the agency’s Housing Choice Voucher program. According to HACR, the most frequently requested reasonable accommodation is for live-in aides to occupy the unit and assist with acts of daily living.

Although there are no public housing developments located in Corona, the City supports the efforts of HACR. HACR administers the Section 8 Housing Choice Voucher program to provide rental assistance to low-income families, senior citizens, and disabled individuals. In 2024, HACR provided rental assistance to over 426 households in the City of Corona. HACR is well-positioned to increase the supply of affordable housing units in the City of Corona and throughout Riverside County.

Actions taken to encourage public housing residents to become more involved in management and participate in homeownership

HACR maintains active resident councils at all public housing developments and includes resident members on its Board of Directors. HACR constantly seeks feedback from residents on improvements and planning documents to ensure activities are meeting the needs of residents. HACR receives feedback through distributed resident surveys.

HACR maintains a home ownership program for current public housing tenants through its Homeownership Program. HACR also links its Homeownership Program with its Family Self-Sufficiency Program to help households save money for a down payment through an escrow account.

Actions taken to provide assistance to troubled PHAs

Not applicable. HACR is designated as High Performing PHA.

CR-35 - Other Actions 91.220(j)-(k); 91.320(i)-(j)

Actions taken to remove or ameliorate the negative effects of public policies that serve as barriers to affordable housing such as land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations, and policies affecting the return on residential investment. 91.220 (j); 91.320 (i)

In the development of the City's most recent Housing Element, the City evaluated significant public policies affecting affordable housing development such as land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges and growth limitations. Based on this evaluation, the City determined that it has taken all necessary steps to ameliorate the negative effects of public policies that may have been a barrier to affordable housing. Moreover, the City is actively engaged with affordable housing developers concerning the siting of affordable housing and ensuring that the entitlement process runs smoothly from inception to completion. It should also be noted that during the 2023-2024 Program Year, the city analyzed the demographics of mobile home parks to determine if a legitimate government interest exists to create a rent stabilization program. Per the findings, Council directed staff to create a rents stabilization ordinance and program. Work is under way in the current 2024-2025 PY. This action will impact approximately 1,150 Corona residents.

A barrier to affordable housing is a public policy or nongovernmental condition that constrains the development or rehabilitation of affordable housing, such as land use controls, property taxes, state prevailing wage requirements, environmental protection, cost of land and availability of monetary resources. Barriers to affordable housing are distinguished from impediments to fair housing choice in the sense that barriers are lawful and impediments to fair housing choice are usually unlawful.

Based on information gathered during community meetings, the Consolidated Plan survey, the 2013-2021 Housing Element and market analysis, the primary barriers to affordable housing in Corona were housing affordability and the lack of monetary resources necessary to develop and sustain affordable housing. The two barriers are related in the sense that demand for affordable housing exceeds the supply, and insufficient resources are available to increase the supply of affordable housing to meet demand.

For low- and moderate-income households, finding and maintaining decent affordable housing is difficult due to the high cost of housing in Corona and throughout Southern California in general.

The elimination of local Redevelopment Agencies by the State of California resulted in the loss of a crucial resource for the development and preservation of affordable housing. This was the most significant public policy change impacting affordable housing and residential investment. While there are mechanisms whereby certain affordable housing assets tied to the former Redevelopment Agencies may be utilized today, these resources are finite and

scarce. In fact, after CHA acquires property and provides development assistance for a planned 140-unit development, CHA funding will be nearly depleted. Therefore, without a recurring funding source, CHA will not have the resources to create new units, purchase affordable covenants, or rehabilitate existing units.

In the implementation of the 2024-2025 Action Plan, the City invested CDBG and HOME funds to prevent homelessness through HOME TBRA, to address homelessness through creation of a low-barrier emergency shelter, and to continue setting aside funds for the development of new affordable units to potentially include several units of permanent supportive housing at the Second and Buena Vista 4.82-acre site previously acquired with CDBG funds.

Actions taken to address obstacles to meeting underserved needs. 91.220(k); 91.320(j)

The primary obstacles to meeting the underserved needs of low- and moderate-income people include lack of funding from federal, state, and other local sources, the high cost of housing that is not affordable to low-income people and the lack of availability of home improvement financing in the private lending industry. To address these obstacles, the City invested CDBG and HOME funds through the 2024-2025 Action Plan in projects that will provide rental assistance to low- and moderate-income residents at risk of homelessness, projects that provide for community facilities rehabilitation, and public services that address special needs populations. To address underserved needs, the City allocated 100 percent of its non-administrative CDBG and HOME investments for program year 2024-2025 to projects and activities that benefit low- and moderate-income people.

Actions taken to reduce lead-based paint hazards. 91.220(k); 91.320(j)

The Residential Lead Based Paint Hazard Reduction Act of 1992 (Title X) emphasizes prevention of childhood lead poisoning through housing-based approaches. To reduce lead-based paint hazards, the City of Corona Residential Rehabilitation Program will conduct lead-based paint testing and risk assessments for each property assisted that was built prior to January 1, 1978, and will incorporate safe work practices or abatement into the scope of work as required to reduce lead-based paint hazards in accordance with 24 CFR Part 35.

Actions taken to reduce the number of poverty-level families. 91.220(k); 91.320(j)

The implementation of CDBG and HOME activities meeting the goals established in the 2020-2024 Consolidated Plan and this Annual Action Plan helped to reduce the number of poverty-level families by:

- Supporting activities that increase the supply of housing that is affordable to low- and moderate-income households;
- Supporting activities that preserve the supply of decent housing that is affordable to low- and moderate-income households;
- Supporting a continuum of housing and public service programs to prevent and

- eliminate homelessness; and
- Supporting public services for low- and moderate-income residents including those with special needs and those at-risk of homelessness offered by nonprofit organizations receiving CDBG Public Service Grants.

In addition to these local efforts, mainstream state and federal resources also contributed to reducing the number of individuals and families in poverty. Federal programs such as the Earned Income Tax Credit and Head Start provided pathways out of poverty for families who are ready to pursue employment and educational opportunities. Additionally in California, the primary programs that assist families in poverty are CalWORKS, CalFresh (formerly food stamps) and Medi-Cal. Together, these programs provided individuals and families with employment assistance, subsidy for food, medical care, childcare, and cash payments to meet basic needs such as housing, nutrition, and transportation. Other services were available to assist persons suffering from substance abuse, domestic violence, and mental illness.

Actions taken to develop institutional structure. 91.220(k); 91.320(j)

The institutional delivery system in Corona is high-functioning and collaborative—particularly the relationship between local government and the nonprofit sector comprised of a network of capable non-profit organizations that are delivering a full range of services to residents. Strong City departments anchor the administration of HUD grant programs and the housing, community and economic development activities that are implemented by the City. To further develop this structure, the City plans to retain a third party to operate the emergency shelter facility and to operate the tenant based rental assistance program.

Actions taken to enhance coordination between public and private housing and social service agencies. 91.220(k); 91.320(j)

To enhance coordination between public and private housing and social service agencies, the City invited the participation of a wide variety of agencies and organizations involved in the delivery of housing and supportive services to low- and moderate-income residents in Corona—particularly the CDBG Target Areas and as it relates to addressing homelessness. The City’s Housing and Homeless Solutions Manager is actively engaged and involved with the Continuum of Care as its Chair, helping to expand coordination regionally, sub-regionally, and within the City to address the needs of Corona residents.

Identify actions taken to overcome the effects of any impediments identified in the jurisdictions analysis of impediments to fair housing choice. 91.520(a)

Section not applicable.

CR-40 - Monitoring 91.220 and 91.230

Describe the standards and procedures used to monitor activities carried out in furtherance of the plan and used to ensure long-term compliance with requirements of the programs involved, including minority business outreach and the comprehensive planning requirements

To ensure that CDBG, CDBG-CV, and HOME funds are used efficiently and in compliance with applicable regulations, the City provides technical assistance to all subrecipients at the beginning of each program year and monitors subrecipients throughout the program year.

Technical Assistance

To enhance compliance with federal program regulations, the City provides a Notice of Funding Availability (NOFA) workshop to review the Plan goals, program requirements and available resources with potential applicants. After the Annual Action Plan is approved, a mandatory subrecipient workshop is held to review program regulations in detail, to provide useful forms and resources for documenting compliance and to review the City's compliance procedures and requirements. Additionally, individualized technical assistance and project management assistance is provided on an as-needed basis throughout the program year.

Activity Monitoring

All activities are monitored, beginning with a detailed review upon receipt of an application to determine eligibility, conformance with a National Objective and conformance with a Plan goal. This review also examines the proposed use of funds, eligibility of the service area, eligibility of the intended beneficiaries and likelihood of compliance with other federal requirements such as the National Environmental Policy Act, the System for Award Management (SAM) debarment list, prevailing wage, Minority and Women Business Enterprise, Section 3 and federal acquisition and relocation regulations, as applicable.

Subrecipients are required to submit an audit and other documentation to establish their capacity, and any findings noted in the audit are reviewed with the applicant. Eligible applications are then considered for funding. Once funded, desk monitoring includes ongoing review of required quarterly performance reports. Now that COVID-19 pandemic restrictions have subsided, (desk monitoring conducted during pandemic), the City desk monitored all six of its CDBG public service activities for the 2024-2025 program year. CDBG-CV, and HOME activities, monitoring will be conducted during the 2025-2026 Program Year to ensure compliance. These reviews include both a fiscal and programmatic review of the subrecipient's activities. The reviews determine if the subrecipient is complying with the program regulations and City contract. Areas routinely reviewed include overall administration, financial systems, appropriateness of program expenditures, program

delivery, client eligibility determination and documentation, reporting systems, and achievement toward achieving contractual goals. Following the monitoring visit, a written report is provided delineating the results of the review and any findings of non-compliance and the required corrective action. Subrecipients normally have 30 days to provide the City with corrective actions taken to address any noted findings. Individualized technical assistance is provided, as noted above as soon as compliance concerns are identified.

For CDBG capital projects, monitoring also includes compliance with regulatory agreement requirements. For HOME funded activities, annual monitoring is undertaken to ensure that for renter occupied units, household income, rents and utility allowances comply with applicable limits pursuant to the affordability covenant. For ownership units, annual monitoring of occupancy is conducted throughout the affordability period.

Citizen Participation Plan 91.105(d); 91.115(d)

Describe the efforts to provide citizens with reasonable notice and an opportunity to comment on performance reports.

In accordance with the City's adopted Citizen Participation Plan, a public notice was published in the Sentinel Weekly News on September 5, 2025, notifying the public of the availability of the Consolidated Annual Performance and Evaluation Report for a 15-day public review and comment period (September 10, 2025, through September 25, 2025). A copy of the public notices is included in Appendix A.

The CAPER was available at www.CoronaCA.gov/cdbg and at the following locations:

City Hall: City Clerk's Office
400 S. Vicentia Avenue
Corona, California 92882

Corona Public Library – Reference Desk
650 S. Main Street
Corona, California 92882

CR-45 - CDBG 91.520(c)

Specify the nature of, and reasons for, any changes in the jurisdiction's program objectives and indications of how the jurisdiction would change its programs as a result of its experiences.

The 2025-2029 Consolidated Plan – Strategic Plan included priority needs and goals consistent with those of the 2020-2024 Consolidated Plan. The City's priorities did not change as a result of implementation of 2020-2024 programs.

CDBG funds are making a significant impact on strategies to address the high priority needs. As shown in Figure 1 in section CR-05, CDBG funds are contributing to each of the Strategic Plan goals. Should any challenges arise in the implementation of CDBG-funded activities, the City will proactively identify additional opportunities to invest CDBG funds to meet Strategic Plan goals.

Affordable Housing

Using CDBG funds in 2019-2020, the City acquired land for affordable housing at Second and Buena Vista and issued an RFP during 2020-2021 to select a developer for this site. During the 2021-2022 Program Year, a developer was selected but the project was halted due to the pandemic and pandemics impacts to the financial markets and supply chains. In program year 2023-2024, negotiations restarted on the family project and PSH project; these are separate projects. Additionally, the developer started project development activities for both projects, i.e., construction design and engineering, environmental and infrastructure studies, and initiating project entitlement approvals. Negotiations led to an increase in family units from 110 to 115, including 20 units set aside to provide preference to at-risk of- or homeless households, and the PSH project will contain 25 units. Negotiations led to an increase in family units from 110 to 115, including 20 units set aside to provide preference to at-risk of- or homeless households, and the PSH project will contain 25 units. The 115-unit family project will break ground in fall 2025, while the 25-unit PSH project will continue working toward completion of its funding stack by applying for tax credits in the second round of 2026.

The City also invested CDBG funds in Code Enforcement to identify and compel private property owners to address code violations for housing units located in the CDBG Target Areas. During the 2024-2025 program year 174 housing units into compliance with local codes.

Public Services

The Fair Housing Council of Riverside provides the City with outreach, education, and enforcement activities, including landlord-tenant matters. This activity served 1,853 Corona residents. To support Services for Low-and Moderate-Income residents, The Big Brothers Big Sisters of the Inland Empire Bigs with Badges program provided a

comprehensive mentoring program for 16 Corona youths. The Peppermint Ridge skilled nursing program provided advocacy and wellness support to 22 adults with a range of developmental and intellectual disabilities. The ABC Hopes Life Skills Support Program assisted 110 residents during the program year. The Starting Over “Path to Seed” program assisted 15 residents get back on the track to self-sufficiency. Lastly, 15 foster youths were assisted through the court system via a Court Appointed Special Advocate or (CASA) to ensure their case is heard, followed up on, and results in the base case for the youth.

Community Facilities

To address homelessness, the City Council invested over \$1 million of CDBG and \$2 million in other local funds to rehabilitate a community facility to be used as a 56-bed low-barrier emergency shelter for single males, as well as a homeless solutions navigation center. The Phase 1 rehabilitation project was completed during the 2020-2021 program year. Completion of Phase 2 accessibility improvements and selection of a service provider to operate the shelter occurred during the 2022-2023 program year. The shelter opened its doors on May 31, 2023 and the activity has been marked complete in HUD’s Integrated Disbursement and Information System during the 2023-2024 program year. The program continues to thrive and assist Corona residents facing homelessness and those at risk of facing homelessness. The City plans to continue the success of this program and its service providers in future program years.

The City completed the ADA construction scope of work for the 2021-2022 Corona Senior Center Rehabilitation project. The facility has now been updated to code compliance on ADA parking lot spaces, signage, ramps, entry ways and applicable interior updates. An estimated 3,150 Corona residents frequent the Corona Senior Center on a monthly basis making this a premier destination for those seeking to stay active and social throughout their day.

Substantially made strides in the award and construction of Phase I Victoria Park Splash Pad project. The project construction was completed in the early part of the 2025-2026 Program Year and had its ribbon cutting in August of 2025. The site has been fully updated and has now expanded its amenities with the splash pad for its Corona Residents to use all year round and especially in the hot summer months. This projects expenditures will be fully drawn down on the 2025-2026 program year, and will to be acknowledged as completed in the 2025-2026 CAPER

Commence construction of Phase II Sheridan Park Universal Playground project, which will be completed providing an update playground space providing a much needed upgrade to the prior playground at the site. Corona residents will be able to enjoy the amenities and new updates as they too were part of the design process through survey and parks commission feedback. This projects expenditures will be fully drawn down in 2025-2026 program year, and will to be marked completed in the 2025-2026 CAPER

CR-50 - HOME 91.520(d)

Include the results of on-site inspections of affordable rental housing assisted under the program to determine compliance with housing codes and other applicable regulations

Maintaining HOME-assisted affordable housing is a high priority. During the program year, the City inspected the HOME-assisted property listed below to determine compliance with the housing codes and other applicable regulations. Where any deficiencies existed, the property owner and property management were notified to make repairs and City staff followed up to ensure completion.

- Meridian Apartments – 7 of 84 units are HOME units in compliance (1 manager unit)

Provide an assessment of the jurisdiction's affirmative marketing actions for HOME units. 92.351(b)

The Meridian Apartments follow an Affirmative Fair Housing Marketing Plan. During monitoring, the annual Affirmative Fair Housing Marketing Report and waitlist are reviewed to ensure compliance with HUD requirements to affirmatively further fair housing choice. Accordingly, all seven of 84 HOME units in Meridian Apartment were monitored during the 2023-24 program year, and all units were in compliance. In compliance with 24 CFR 92.251(f)(3)(i), the next inspection will be performed during the 2026-2027 program year.

Refer to IDIS reports to describe the amount and use of program income for projects, including the number of projects and owner and tenant characteristics

According to the PR-09 report for the HOME program, a total of \$30,200.70 was drawn for program administration. Accordingly, there are no owner or tenant characteristics associated with that use of program administration. Additionally, \$235,915.68 of program income was drawn for the TBRA program activity that assisted 98 Corona residents secure housing and prevented homelessness. The owner-occupant characteristics of IDIS activity 690 are: 64 of Corona Residents 0-30% AMI; 9 of Corona Residents 30-50% AMI; 20 of Corona Residents 50-60% AMI; and 5 of Corona Residents 60-80% AMI. In total, \$235,915.68 of program income was drawn during the program year.

Describe other actions taken to foster and maintain affordable housing. 91.220(k)

In the implementation of the 2024-2025 Action Plan, the City invested HOME funds to preserve and maintain affordable housing through the Residential Rehabilitation Program. Four projects were completed with HOME funds.



2024-2025
CONSOLIDATED ANNUAL PERFORMANCE AND EVALUATION REPORT
JULY 1, 2024 THROUGH JUNE 30, 2025

APPENDIX A
Public Notice



CITY OF CORONA
OFFICE OF THE CITY CLERK
NOTICE OF PUBLIC REVIEW AND COMMENT PERIOD

PUBLIC NOTICE IS HEREBY GIVEN that the City of Corona, California, will publish the draft 2024-2025 Consolidated Annual Performance and Evaluation Report (CAPER) for a 15-day public review and comment period. The CAPER is an annual progress report to the U.S. Department of Housing and Urban Development reflecting the accomplishments of the Community Development Block Grant (CDBG) and HOME Investment Partnerships (HOME) programs for funds expended during fiscal year 2024-2025 in relationship to the goals and objectives stated in the 2020-2024 Consolidated Plan and the 2024-2025 Annual Action Plan.

A copy of the draft CAPER will be available for public review during business hours starting Wednesday, September 10, 2025 and ending Thursday, September 25, 2025 at the City of Corona's City Clerk's Office located at 400 S. Vicentia Avenue, Corona. The draft CAPER may also be reviewed at the Corona Public Library, Reference Desk, located at 650 S. Main Street, Corona, or online at www.CoronaCA.gov/cdbg. The public review and comment period will conclude at 4:00 p.m. on September 25, 2025.

Residents and stakeholders are encouraged to submit written comments to Frank Perez, CDBG Consultant, via email to Frank.Perez@CoronaCA.gov or via U.S. Mail to the City Manager's Office Housing and Homeless Solutions Division, 400 S. Vicentia, Corona, CA 92882. If you have any questions regarding this notice, please contact Frank Perez, CDBG Program Consultant, at (951) 817-5715 or by email at Frank.Perez@CoronaCA.gov.

Sylvia Edwards - City Clerk

Published: September 5, 2025, Sentinel Weekly News



2024-2025
CONSOLIDATED ANNUAL PERFORMANCE AND EVALUATION REPORT
JULY 1, 2024 THROUGH JUNE 30, 2025

APPENDIX B
Summary of Citizen Participation Comments

Summary of Public Comments
Public Review and Comment Period
September 10, 2025 to September 25, 2025

Name	Comment
	[If there are any public comments during the review and comment period, they will be inserted here.]



2024-2025
CONSOLIDATED ANNUAL PERFORMANCE AND EVALUATION REPORT
JULY 1, 2024 THROUGH JUNE 30, 2025

APPENDIX C
IDIS Reports

Applicable IDIS Reports will be included on final version submitted to HUD



2024-2025
CONSOLIDATED ANNUAL PERFORMANCE AND EVALUATION REPORT
JULY 1, 2024 THROUGH JUNE 30, 2025

APPENDIX D
2025 Riverside County Point In Time Count Report



2025 RIVERSIDE COUNTY

HOMELESS POINT-IN-TIME COUNT AND SURVEY

More Than A Count



MAY 2025
Continuum of Care (CoC)



HWS HOUSING AND
WORKFORCE
SOLUTIONS
ENGAGE. ENCOURAGE. EQUIP.

TABLE OF CONTENTS

Executive Summary	3
Homeless Point-in-Time Count Highlights	5
Introduction	8
Methodology	11
Results	19
Data Analysis	32
Planning & Implementation	36
Appendix A: Glossary	48
Appendix B: City Summary Tables	50
Appendix C: Unincorporated Area Summary Tables	99
Appendix D Supervisorial District Summary Tables	110
Appendix E: Subpopulations Summary Tables	122

EXECUTIVE SUMMARY

On Wednesday, January 22, 2025, the Office of Homeless Services within the Department of Housing and Workforce Solutions (HWS) successfully led Riverside County's annual Homeless Point-in-Time (PIT) Count, in close collaboration with the Riverside County Continuum of Care (CoC), all 28 cities, the Board of Supervisors, the County Executive Office, and key departments including DPSS, RCIT, RUHS-Behavioral Health, Code Enforcement, Probation, and the Sheriff's Office.

Mandated by the U.S. Department of Housing and Urban Development (HUD), the PIT Count provides a snapshot of both sheltered and unsheltered homelessness on a single night. Sheltered data is collected from the countywide Homeless Management Information System (HMIS), while unsheltered individuals are identified through street-based outreach, service engagement, and enumeration efforts across all regions, including unincorporated areas. While the PIT Count offers valuable insight, it is not intended to capture the full scope of homelessness.

2025 PIT Count Results and Key Takeaways

The 2025 PIT Count identified 3,990 individuals experiencing homelessness—2,012 sheltered and 1,978 unsheltered. While this represents a 7% increase over the 2023 count (3,725 individuals), the rate of growth is slowing steadily year over year—down from 15% in 2022, to 12% in 2023, and now 7% in 2025.

Most notably, unsheltered homelessness decreased by 19%, while the sheltered population increased by 11%, indicating significant progress in connecting individuals to shelter. This success reflects the county's expanded housing resources and integrated system of care, including:

- Increased emergency and transitional bed capacity
- New affordable and permanent supportive housing developments
- Deployment of multidisciplinary teams offering coordinated medical, behavioral health, and housing navigation services

This reduction in unsheltered homelessness spans across key subpopulations including veterans, transitional age youth (18–24), families with children, and seniors 65+.

Ongoing Challenges

Despite these gains, the 2025 PIT Count found that 419 unsheltered individuals were experiencing homelessness for the first time, underscoring the persistent impact of economic instability, including:

- Rising rental costs and stagnant wages
- Inflation and insufficient income
- Fixed incomes among seniors and people with disabilities
- Family disruption and unemployment

EXECUTIVE SUMMARY

Over 60% of Riverside County renters now spend more than half their income on housing—highlighting the urgent need for continued investment in affordable housing and homelessness prevention.

Additional Notable Achievements

The 2025 PIT Count, paired with complementary data sources, reflects a series of additional impactful outcomes:

1. Focused, region-wide strategies to address encampment homelessness enabled by state investments such as the Encampment Resolution Funding (ERF) and the County Board of Supervisors have led to a 71% reduction in encampments across Riverside County. These efforts mobilized multidisciplinary and cross-jurisdictional teams to engage individuals residing in encampments, resulting in hundreds of our most vulnerable and hardest-to-reach individuals being connected to housing, services, and care.
2. Strategic investments in mobile street medicine teams now operating across all five supervisorial districts have significantly improved health access for unsheltered individuals by providing on-site medical and behavioral health care. Between calendar years 2023 and 2024, this initiative, alongside existing housing and other wraparound services, contributed to a 29% decrease in mortality among the unsheltered population, reflecting the power of health-housing partnerships in saving lives.
3. Through deepened collaboration with Children's Services, Probation, and youth-serving organizations, Riverside County has enhanced early access points and improved service coordination for youth. As a result, the number of young people exiting foster care into homelessness has significantly declined, supporting more stable and successful transitions into adulthood.
4. Focused strategies to centralize and prioritize referrals for families with has led to an 11% decrease in the number of families with children living on the streets. By aligning outreach, housing navigation, and system-wide prioritization, more families have been quickly connected to the shelter and supports they need to regain stability.



2025 RIVERSIDE COUNTY HOMELESS POINT-IN-TIME COUNT

On January 22, 2025, Riverside County's Continuum of Care (CoC) conducted its annual Homeless Point-in-Time Count (PITC). The count is a one-day snapshot that captures the characteristics and situations of people experiencing homelessness. The numbers below highlight findings from the count, which help identify gaps in the service delivery system and help cities and communities better understand the nature and extent of homelessness countywide.

1,978

TOTAL UNSHELTERED
COUNT

19% Decrease in Unsheltered
Homelessness

SUBPOPULATIONS



Veterans

126

36% Decrease



Transition
Age Youth

53

69% Decrease



Households
with Children

5

54% Decrease



Seniors (65+)

103

30% Decrease

SUBPOPULATIONS



Veterans

67

24% Increase



Transition
Age Youth

119

59% Increase



Households
with Children

294

124% Increase



Seniors (65+)

116

73% Increase

2,012

TOTAL SHELTERED
COUNT

SUBPOPULATIONS



Veterans

193

23% Decrease



Transition
Age Youth

172

26% Decrease



Households
with Children

299

115% Increase



Seniors (65+)

219

2% Increase

3,990

TOTAL COUNT



UNSHELTERED POINT-IN-TIME COUNT

Top 3 *Primary* Factors

Contributing to Unsheltered Homelessness Reported

1. Family Disruption



20%

2. Lack of Income



19%

3. Unemployment



12%

TOP REPORTED LIVING SITUATIONS ON THE NIGHT OF THE COUNT

(UNSHELTERED, INTERVIEW ONLY)

14%



VEHICLE

12%



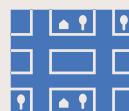
TENT/SHED

8%



ABANDONED
BUILDING

40%



STREET

17%



ENCAMPMENT

Characteristics and Barriers Among Unsheltered Individuals

(UNSHELTERED, INTERVIEW ONLY)

The top barriers to housing identified by respondents reflect local trends that align with national research findings over the past two decades.



First Time Homeless

392

(32%)



Substance Use

453

(38%)



Chronic Homelessness

668

(56%)



Mental Health Issue

304

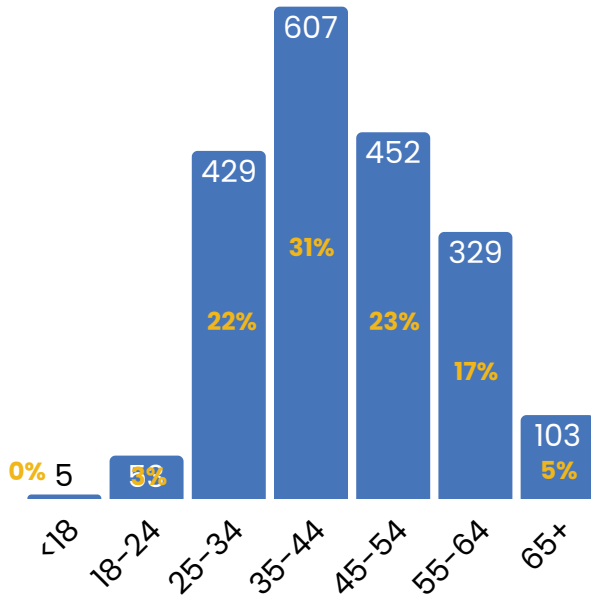
(25%)



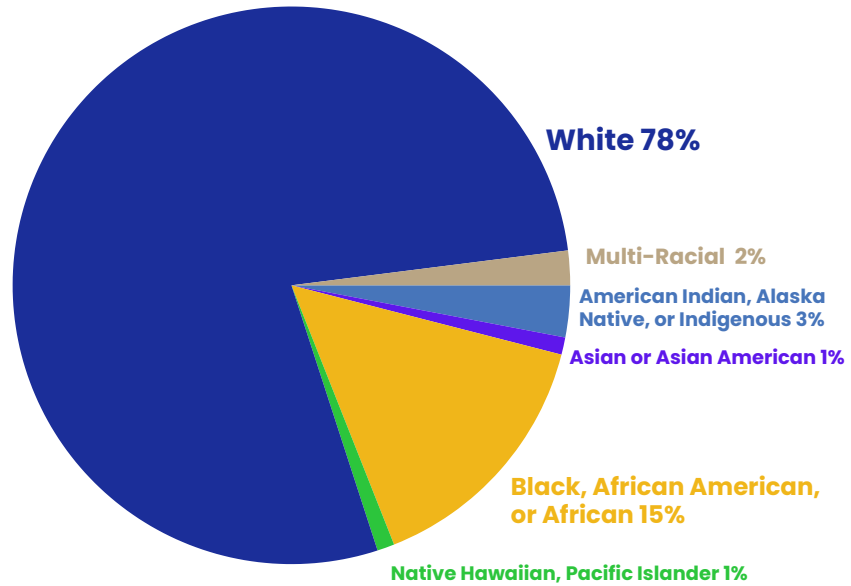
UNSHELTERED BREAKDOWN

The homeless count provides an estimate of the number of homeless persons and identifies the demographics and unique characteristics of the unsheltered population

Age



Race



Gender

71% Male
29% Female

Ethnicity



4

Foster Care

Individuals reported placement in the foster care system



869

Health Insurance

Individuals reported having health insurance coverage



304

Pet Owners

Individuals reported having a companion animal



31

Couch Surfers

Individuals reported couch surfing





INTRODUCTION

INTRODUCTION

HOMELESS POINT-IN-TIME COUNT

The Homeless Point-in-Time Count (PITC) provides vital insight into the state of homelessness at the local level. It helps counties, cities, non-profit agencies, and businesses understand where needs exist so that services and programs can be better designed, targeted, and improved.

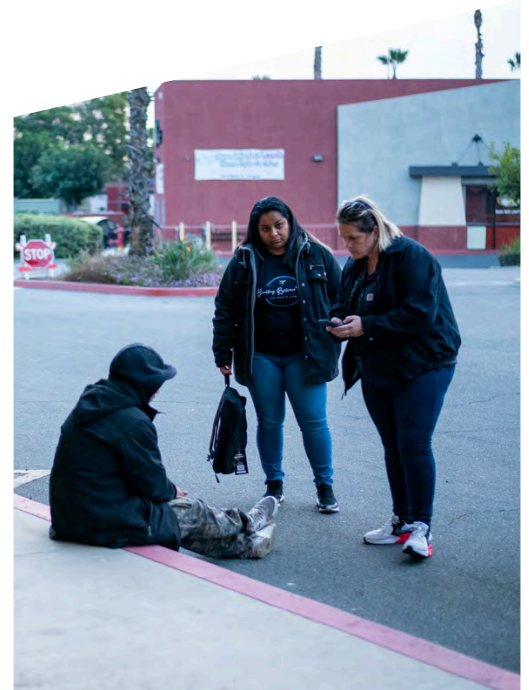
The PITC is also a federal requirement mandated by the U.S. Department of Housing and Urban Development (HUD). Each Continuum of Care (CoC) must conduct an unduplicated count of both sheltered and unsheltered individuals experiencing homelessness.

This count must follow the standards outlined in HUD's annual HIC and PITC Data Collection Notice and the Point-in-Time Count Methodology Guide.

The data collected during the count are submitted to HUD and contribute to the national Annual Homeless Assessment Report (AHAR) to Congress. While HUD requires a sheltered count every year, an unsheltered count must be conducted at least every other year, during the last 10 days of January.

THE IMPORTANCE OF THE POINT-IN-TIME COUNT

- The PITC offers a one-night “snapshot” of homelessness, capturing both sheltered and unsheltered populations
- Nationally, HUD uses PITC data to evaluate progress and allocate funding through a competitive process. CoCs receive points for demonstrating reductions in homelessness over time.
- In addition, various State of California funding opportunities assess local need based on PITC data, further underscoring its importance.



Above: PITC volunteer conducting an early morning interview

RIVERSIDE COUNTY HOMELESS POINT-IN-TIME COUNT

As the County's designated CoC lead agency, the Housing and Workforce Solutions (HWS) Department coordinates the PITC in partnership with the Riverside County CoC. The count is executed with the support of over 100 community partners, including non-profit agencies, law enforcement, city leaders, faith-based organizations, and outreach teams.

The PITC offers a valuable opportunity to better understand the characteristics of people experiencing homelessness, assess shelter and housing usage, and —most importantly— identify the services individuals need to achieve housing stability. At the local level, additional information is gathered to inform tailored strategies for vulnerable groups, raise public awareness, and guide community-based solutions. While this local data is not submitted to HUD, it plays a critical role in shaping the County's broader homelessness response.

In addition to collecting HUD-mandated information, Riverside County's 2025 PITC also captured several locally relevant data points to better understand the lived experiences and service needs of individuals experiencing homelessness. These include:

- Capturing expectant parents as well as pregnant teens (HUD only requires parenting youth information)
- Learning if unsheltered individuals have health insurance coverage
- Identifying residents experiencing housing instability who are "couch surfing" or doubled-up and living with friends or family
- Identifying individuals who have companion animals
- Providing opportunity for individuals to request post count follow up and be linked to social services
- Pinpointing reasons contributing to homelessness as described by persons themselves
- Determining if individuals released from jail or prison experience barriers in accessing housing due to their status



Above: Learning about the characteristics and needs of unsheltered individuals is a primary goal of the PITC



Above: Volunteer searching for an encampment in the early morning



Above: Couch surfing data is collected but not included in the total PITC numbers reported to HUD



METHODOLOGY

METHODOLOGY

STRATEGIC APPROACH TO THE POINT-IN-TIME COUNT

Riverside County conducts its Point-in-Time Count (PITC) in accordance with U.S. Department of Housing and Urban Development (HUD) requirements, which call for an annual count of sheltered individuals and a biennial count of unsheltered individuals. For many years, the County exceeded this standard by conducting a full unsheltered count every year. However, recognizing the significant resources required to plan and execute the count annually and the increasing availability of robust data through HMIS, the County shifted to a biennial unsheltered count beginning in 2023. This change maintained full compliance with HUD guidelines while creating space to invest more deeply in ongoing, year-round solutions.

The PITC continues to play a critical role in informing local strategies, offering a snapshot of homelessness across the County. What has changed is how it fits into a broader, more sustainable approach. Between counts, the County uses HMIS data to track trends, guide housing efforts, and coordinate services in real time. This adjustment has allowed local partners to redirect time and effort toward housing placements, service coordination, and data-driven planning, creating greater momentum toward the shared goal of ending homelessness.

UNSHELTERED COUNT

The 2025 unsheltered PITC consisted of the following activities:

1. Planning and Organizing the Unsheltered Count

The 2025 Riverside County Homeless Point-in-Time Count (PITC) was designed to ensure a comprehensive, accurate, and respectful enumeration of individuals and families experiencing homelessness. In accordance with the U.S. Department of Housing and Urban Development (HUD) requirements, the count included both sheltered and unsheltered populations using strategies that align with HUD's latest HIC and PITC Data Collection Notice and Methodology Guide.



Above: Counting team in unincorporated area of the City of Perris

METHODOLOGY

2. Planning and Implementation

The PITC was coordinated by Housing and Workforce Solutions in partnership with the Riverside County Continuum of Care (CoC). Planning efforts involved over 100 community partners, including city governments, nonprofit organizations, law enforcement, outreach workers, and faith-based groups. These partners played critical roles in identifying known encampments, recruiting and training volunteers, providing logistical support, and helping ensure the safety and effectiveness of the count.

Survey development, volunteer coordination, and deployment site logistics were all part of the preparation process. To modernize data collection and improve real-time reporting, volunteers and outreach teams used mobile devices equipped with the ArcGIS Survey123 platform. This technology allowed for efficient data capture, immediate syncing, and accurate geolocation tagging of each interaction.

3. Count Components

The 2025 Unsheltered Homeless Point-in-Time Count (PITC) was conducted through five coordinated components designed to ensure broad geographic coverage and reach across key populations. Each component supported accurate, unduplicated data collection while also creating opportunities to connect individuals with services and follow-up support.

- **Unsheltered Count:** Conducted January 22, 2025, between 5:30 a.m. to 9:30 a.m.
- **Youth Count:** Conducted concurrently with the General Count and Implemented in collaboration with youth-serving providers.
- **Unincorporated Area Count** from January 22, 2025 to January 24, 2025 between 5:30 a.m. to 9:30 a.m.
- **Service-Based Count:** Held during daytime hours at service sites from January 22, 2025, to identify individuals missed during the early morning canvassing.
- **More Than a Count Initiative:** Included efforts like More Than a Count to connect veterans, chronically homeless individuals, and pregnant mothers with immediate services and follow-up support.

CHECK-IN AT VARIOUS VOLUNTEER DEPLOYMENT SITES



Above: City of San Jacinto



Above: City of Lake Elsinore

HOMELESS POINT-IN-TIME COUNT COMPONENTS

I. Unsheltered or Street-based Count : Often referred to as simply the street count, this component focuses on a one-day, unduplicated, physical count of homeless individuals and families living on city streets, in vehicles and other places not meant for human habitation. Hundreds of volunteers help entire communities canvas their neighborhoods to enumerate homeless persons. Locations known to be frequented by unsheltered persons are identified in advance of the count and are the focus of the street count. On the PITC day, a coordinated effort sends counting teams from various deployment sites to areas specifically assigned to them, to interview and connect with people who are known to be, or who appear to be homeless. The Riverside count is conducted as a 'blitz,' meaning the areas in the incorporated areas all occur at the same time, from 5:30 AM -9:30 AM. Teams are assisted by outreach workers and law enforcement to ensure safety during the count. Given the COVID pandemic, the 2025 PITC Street Count design also included features intended to protect the health of everyone involved.

The 'known locations' count focuses on places where multiple unsheltered persons are found at other times in the year such as encampments, 'hot spots' that frequently have larger numbers of unsheltered people clustered together, and service organizations. If the identified known locations are not reached, such as service organizations that were not open during the "blitz" hours, the areas are counted on one of the seven days following. Additional screening occurs with any person contacted outside the morning of the count to ensure that the person was homeless on the count date and was not already interviewed.

II. Youth Count is a dedicated Youth Point-in-Time Count (YPITC), conducted concurrently with the General Count and Implemented in collaboration with youth-serving providers.

III. Unincorporated (non-city) Area Count is conducted over the course of up to seven days after the PITC. The Unincorporated Area Count ensures a full count by identifying unsheltered persons in (non-city) unincorporated areas that include "harder-to-reach" sites that often require more time to cover.



Above: Trained volunteers canvassing unincorporated area in Idyllwild to ensure a full count

IV. More than a count Initiative: is one of engagement and service. While collecting data is a central purpose for the PITC, Riverside County CoC recognizes the mandated PITC as an opportunity to do more than simply count unsheltered persons. The PITC is a chance to connect with unsheltered residents. On the morning of the count, the initiative works to maximize county-wide bed availability for immediate referrals by experienced street-based homeless outreach teams, county staff, and service providers assigned to provide support at every deployment site. The mobile application allows for the collection of client-level data to facilitate after care services, inclusive of housing and other social services, to individuals who request follow-up.

WHO IS COUNTED?

HUD defines unsheltered individuals as those whose primary nighttime residence is not designated for regular sleeping such as:

Tiny home and shed residents if:

- unit does not contain a kitchen, restroom or is not connected to sewer and other utilities.
- unit is on a campus maintained by an organization, such as a governmental entity, nonprofit, or religious organization, where toilets, showers, and communal food preparation or food service areas are provided.

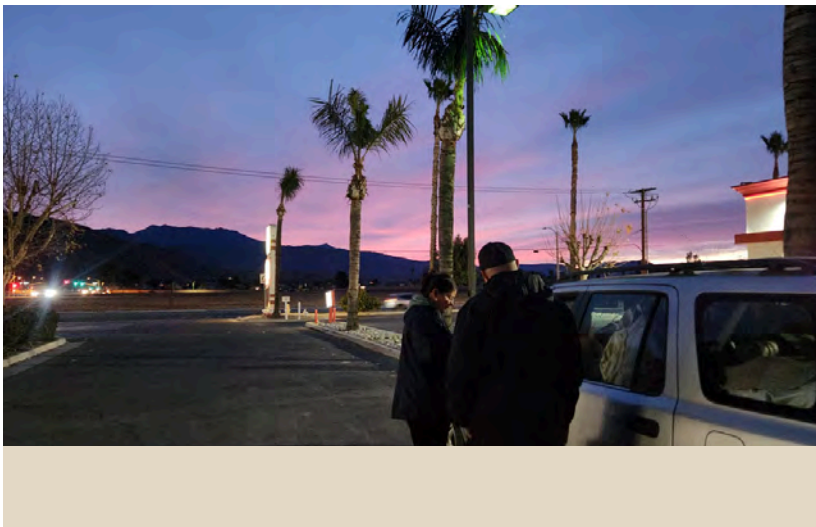
Persons living in vehicles (cars, trucks, and vans) including households sleeping in their vehicles in safe parking programs, designated areas, or on a campus maintained by a government or other entity where toilets, showers, and communal food preparation or food service areas are provided.

Persons living in recreational vehicles (RV) if the RV is:

- in disrepair (e.g., holes, broken windows, flat tires, removed or broken siding);
- does not have access to sewer, water, and electricity connections; and
- the RV parked in an unusual place, including non-RV designated lots, non-residential areas, or areas where RVs are not allowed to park.

HUD states the following may not be counted as “unsheltered”:

- Persons temporarily staying with family or friends (i.e., “doubled-up” or “couch surfing”)
- Persons living in recreational vehicles (RV) if the RV does not meet the criteria for sheltered homeless people living in RV, which is:
 - Located in mobile home park or campus advertising itself as providing temporary stays and
 - The RV is regularly connected to water, sewer and utilities or a septic system, well and generator, or the park or campus provide toilets, showers, and communal food preparation or food service areas.



Above: Trained volunteers interviewing individuals sleeping in a vehicle



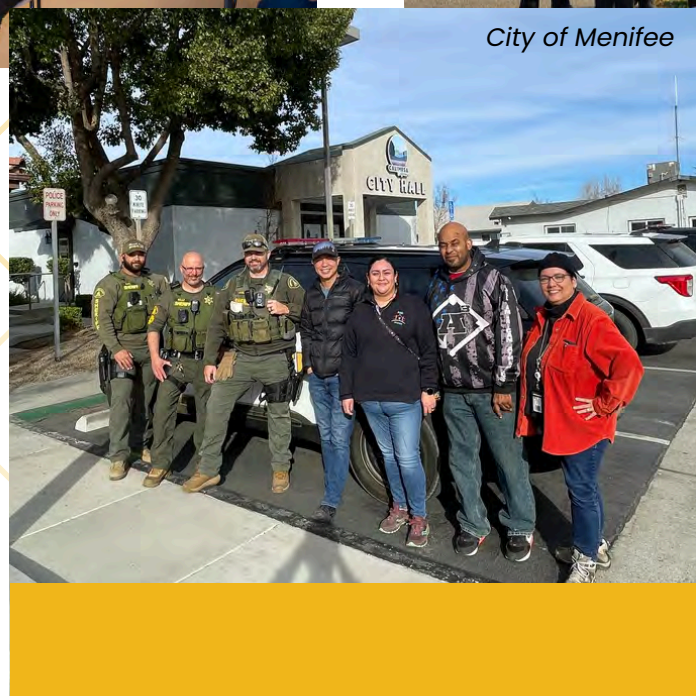
Above: Tiny Home without amenities

WHO CONDUCTS THE COUNT?

A PITC planning team partners with community stakeholders to plan and execute the count. The planning team is comprised of a PITC coordinator, a YPITC coordinator with extensive homeless youth outreach experience, and several CoC staff experienced in planning and implementing a PITC. The planning team develops a PITC plan that includes PITC promotion and awareness, survey tool development, and volunteer recruitment and training.

In the months leading to the count, a county-wide volunteer recruitment effort is implemented. Volunteers are recruited and provided with a mandatory training. Once volunteer requirements are met, volunteers are assigned to their counting location and are provided access to the Riverside County survey on the Survey123 app. On the day of the count registered and trained volunteers take to the streets to canvas their assigned neighborhoods to identify and interview unsheltered residents.

DEPLOYMENT SITE TEAMS



WHAT INFORMATION IS COLLECTED?

The survey tool collects demographic information (gender, age, race, ethnicity) and includes questions to count the number of persons from the following subpopulations:

- Chronically homeless individuals and families
- Persons living with HIV/AIDS;
- Persons with substance use disorders;
- Persons with mental illness or emotional impairment;
- Unaccompanied youth under the age of 18
- Veterans; and
- Victims of domestic violence.

Other Subpopulation Data Collected includes:

- Persons released from a correctional institution;
- Person with physical or developmental disability;
- Person with chronic health conditions;
- Seniors; and
- Transition age youth (TAY) 18–24



Volunteer completing an interview survey which collects all HUD required data

HOW IS THE INFORMATION COLLECTED?

Data was collected using a digital PITC survey developed for Riverside County and accessed through the ArcGIS Survey 123 app. The survey included all HUD-required questions and was designed to streamline the interview process. Two survey types were used:

Interview Survey: The Riverside PITC is an engaged count that attempts to connect with each person encountered during the designated PITC time periods. Volunteers complete PITC training and before deploying, they are given access to the homeless Point-in-Time count survey specifically developed for Riverside County, to be accessed by their smartphones or tablets. The digital survey form simplifies the interview experience, eliminating the need to devote time and effort to determine which questions to ask, and avoiding asking people to respond to questions clearly not applicable to their circumstances. The survey design incorporates logical data sequencing that promotes asking only for relevant information by assessing the information given in response to prior questions. For example, a person declaring an age of 17 years or less would not be asked about veteran status. This use of technology facilitates consistency in the questions asked and efficient capture of the responses to the survey. The interviewer does not need to identify which questions to ask, is prompted to ask all relevant questions, and is given language crafted to advise the person when upcoming questions cover sensitive topics such as mental health or substance use. A bag of personal items is offered as an incentive to all survey respondents to thank them for participating in the count.

Guided Observations: During the street count, there are instances where it is unsafe, impractical, or inappropriate to interview someone directly, such as individuals found in abandoned buildings, hazardous terrain, or those who are asleep or display a "Do Not Disturb" sign. In these situations, or when a person declines to participate, enumerators complete an observation survey. The observation tool guides volunteers to record visible characteristics, such as the person's apparent gender, physical description, belongings, and presence of pets. They also document detailed location information, like street names or landmarks. While some traits—like chronic homelessness status—cannot be determined through observation, the data helps reduce duplicate counts and supports targeted outreach following the count.

SHELTERED COUNT

How is the Sheltered Count Conducted?

HUD specifically states in the [HIC/PIT Count Data Collection Notice](#) that CoCs must count all individuals or families who meet the criteria of the homeless definition. This includes individuals and families “living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, hotels/motels paid for by charitable organizations, or federal, state, or local government programs for low-income individuals)” on the night designated for the count. The sheltered count also includes every person who stays overnight in an emergency shelter.

A person **is not** considered homeless if the person resides in:

- A medical facility such as hospital, psychiatric facility, and nursing home
- Jail, prison, or juvenile detention facility
- Chemical dependency facility such as substance abuse treatment facility and detox center
- Foster care home or group home



Above: Coachella Valley Rescue Mission emergency shelter beds

HOUSING INVENTORY COUNT (HIC)

The HIC is a one-night snapshot of all beds and units dedicated to serving people experiencing homelessness across Riverside County. It includes emergency shelters, transitional housing, and permanent housing programs. The count helps HUD and the CoC understand local housing capacity and guide funding decisions.

HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

HMIS is used to report bed availability and occupancy for participating programs. For those not in HMIS or with incomplete data, a standardized survey tool was used to gather equivalent information. Data included household size and subpopulation details, ensuring a complete and accurate sheltered count.



RESULTS

DEMOGRAPHICS



GENDER

- The basic gender distribution of the total unsheltered homeless persons for males (71%) and females (29%) is unchanged from 2023.
- In contrast, the gender distribution among sheltered individuals is much more balanced. In 2025, 54% of sheltered individuals were male and 46% were female, reflecting a closer alignment with the general population.



AGE

- The age distribution remained similar to previous years, with a few notable shifts. Less than 1% of individuals in the unsheltered count were children, while children made up 30% of the sheltered population. Transition-aged youth, ages 18 to 24, represented 3% of the unsheltered population—a 66% decrease from the previous count, when they made up 6%.
- Adults between the ages of 35 and 44 made up the largest portion of the unsheltered population at 31%. This was followed by adults ages 45 to 54 at 23%, and ages 25 to 34 at 22%. While this overall pattern remains similar to past counts, the 35 to 44 age group increased slightly.
- Seniors aged 65 and older made up 5% of the count. When including individuals aged 62 to 64—who were included in the senior category in the previous count—the total number of older adults rises to 201. Within this combined group, there was a slight decrease in the percentage of White individuals, a slight increase in the proportion of males, and a 4% drop in those citing income loss as the primary reason for homelessness.



RACE

- The total of 1,978 unsheltered persons in the 2025 PITC is 19% lower than the last unsheltered count of 2,441 unsheltered homeless persons. The racial makeup of those experiencing unsheltered homelessness in 2025 was 45% White, 34% Hispanic (Latino), 15% Black or African American, 3% multiracial, 2% American Indian, Alaska Native or Indigenous, with the remaining percentage identifying as Asian/Asian American or Native Hawaiian/Pacific Islander.
- In 2024, HUD updated its data standards to recognize Hispanic (Latino) as a distinct racial category rather than just an ethnicity. This change had a significant impact on reporting. In 2023, individuals who identified as Hispanic may have also been counted as White. In 2025, with the revised standards, the share of unsheltered individuals identified as White dropped to 45%, compared to 68% in 2023.
- The sheltered population followed a similar pattern in racial distribution: predominantly White, followed by Hispanic (Latino), Black or African American, and multiracial individuals, with smaller percentages identifying as American Indian/Alaska Native/Indigenous, Asian/Asian American, or Native Hawaiian/Pacific Islander.

SUBPOPULATIONS

SENIORS



- The age range for the senior group in 2025 includes persons aged 65 years and above. Like the overall unsheltered population and most subgroups, the racial distribution for seniors included more White (54%) and Hispanic Latino (28%) persons than other races (Black African American 12%; with Indigenous (2%) and multi-racial (4%) comprising the balance.
- Seniors report living on the streets (35%) and in vehicles (28%) as the dominant living situations. Living in an encampment (13%), tent or shed (10%), or abandoned building (9%) as the next most common living conditions.
- Unlike other groups, family disruption (14%) was not the leading factor reported but similar to other groups, lack of income (29%) was in the top three factors reported with eviction (6%) being the third distinct factor.
- As might be expected, physical disability (41%) and chronic health conditions (36%) were listed as the top challenges or barriers. PTSD (22%), traumatic brain injury (17%) were the next most cited challenges with substance abuse (13%), developmental disability (12%), mental health issues (9%), domestic violence (6%) and HIV AIDS (3%) completing the list.
- Given the challenges reported by seniors, the fact that 75% report having health coverage may point to an area for additional consideration. Seniors report being chronically homeless (41%), homeless for the first time (29%), having an animal companion (30%), and holding Veteran status (25%). With respect to other institutions, only 9% report jail or prison experience and none reported prior foster placement.
- The 2025 senior group includes persons ages 65 and older, while the 2023 PITC senior category included those ages 62+. When the proportion of the data for unsheltered persons ages 62–64 in 2025 is added to the data for the unsheltered persons 65+, the number of Seniors would rise to 201 (98). The characteristics of the combined group are similar to the 65+ groups, the percentage of White persons drops slightly; the proportion of males vs females increases slightly; and a lack of income as the primary factor contributing to homelessness drops by 4%. Senior 62+ unsheltered has increased by 29% from 2023 but the rate of increase in unsheltered has gone down from 47% in 2023 to 29% in 2025.

HOUSEHOLDS WITH CHILDREN



- The number of unsheltered households with children in the 2025 PITC was the smallest subgroup, consistent with prior counts.
- In 2025, five unsheltered households with children were identified, comprising 14 persons. This reflects a decrease from 2023, when eleven unsheltered households with children (23 persons) were counted.
- Efforts to house families with children and youth have contributed to an increase in the sheltered family population compared with 2023 and 2024.
- In 2025, there were 294 sheltered family households totaling 975 persons. In comparison, the 2023 PITC recorded 132 family households living in shelter. Persons in families made up 24% of the total PITC count of 3,990 in 2025.

YOUTH



- The number of unaccompanied youth experiencing homelessness shifted notably between 2023 and 2025. The number of unsheltered youth decreased by 66 percent reaching 53 in 2025, while the number of sheltered youth increased to 119. This shift suggests that more youth are being connected to shelter and support services, reducing their exposure to unsafe, unsheltered environments. The progress aligns with the expanding reach of youth-focused efforts in Riverside County, including the Youth Homelessness Demonstration Program (YHDP) and other local initiatives emphasizing prevention, rapid response, and housing-focused support.
- Unlike the broader unsheltered population, the racial composition of unaccompanied youth was more balanced. In 2025, 40 percent identified as White and 32 percent as Hispanic or Latino, while Black or African American youth made up 19 percent, and multiracial youth accounted for 2 percent. The gender distribution was also consistent with other unsheltered groups, with males comprising 66 percent and females 34 percent, reflecting a slight increase in male representation from 64 percent in 2023.
- The 2025 PITC revealed more variation in where unsheltered youth were staying. The largest group, 26 percent, reported living in vehicles—double the rate from 2023, when only 13 percent stayed in cars and nearly three times as many were found on the streets. Living arrangements were more evenly distributed in 2025, with similar numbers staying in abandoned buildings, encampments, or parks, and only slightly more still on the streets.
- Like other groups, family disruption (26%), Lack of Income (19%), and unemployment were identified as the top reasons for their homelessness. Challenges and barriers for unsheltered youth are similar to the overall unsheltered population with the notable exceptions of domestic violence, chronic health issues, traumatic brain injury, and developmental disability. Over six times the percentage of youth reported domestic violence as a barrier (13%) compared with the overall group (2%), while reports of chronic health issues (6%), traumatic brain injury (3%), and developmental disabilities (6%) pale in comparison with the overall group who reported 20%, 18%, and 14% respectively in these same categories.
- Among unsheltered youth in 2025, 35 percent were experiencing homelessness for the first time, while 32 percent met the definition of chronic homelessness, indicating they had been without housing continuously for a year or more. This distribution is consistent with 2023 and highlights the importance of early intervention before short-term instability becomes prolonged.
- When asked about prior system involvement, 29 percent of youth reported a history of incarceration. However, fewer than one percent reported previous foster care placement.

VETERANS



- Although the total unsheltered Veteran population is lower than the number in 2023, the characteristics of the unsheltered Veteran population in the 2025 PITC shows minor change from the findings of the 2023 PITC. The vast majority identified as male (90%), and had a racial distribution roughly the same as the overall unsheltered population with a White majority (57%) and substantive numbers of Black/African American (13%). HUD now lists Hispanic (Latino) as a separate race, with this change, 19% of unsheltered are reported as Hispanic (Latino).
- The largest age group continues to be ages 55-64 (33%), followed by 24% ages 45- 54, 17% ages 35-44, and another 13% ages 65+. Each of these age groups increased marginally by 1-2%, further reducing the group of youth aged 18-24 who claimed Veteran or military status (2%).
- Compared with 2023, a slightly larger percentage of unsheltered Veterans were largely found on the streets (42%), the proportion in tents is unchanged (16%), a lower percentage in encampments (10%) as opposed to 2023 (15%), or living in vehicles (13% vs 15%). A notable increase for Veterans living under a bridge from none in 2023 to 5% in 2025.
- Like other groups, family disruption (21%), lack of income (19%), and unemployment (10%) were reported as the leading factors contributing to homelessness. Eviction ties with unemployment at 10%. In 2023 No Veterans reported domestic violence or runaway as a cause, however, in 2025 3% cited domestic violence.
- Based on the total number of responses, veterans face multiple barriers with approximately 1/3 reported physical disability (31%), substance abuse (31%), and traumatic brain injury (32%) as personal barriers. The incidence of PTSD increased to 39% and was the response with the highest percentage. Although nearly a quarter of Veterans reports mental health issues as a challenge to resolving homelessness only 8% reported mental illness as a primary factor contributing to them becoming homelessness. Like other groups, most have health insurance with an increase from 72% in 2023 to 81% in 2025.
- Based on the HUD definition, 40% qualify as chronically homeless down from 49% in 2023, and 16% experienced jail or prison in the prior 12 months (down slightly from 19% in 2023).

COMPARISON OF 2023 AND 2025 FINDINGS

Although the overall unsheltered PITC count in 2025 is substantially less (-19%) than the prior unsheltered count in 2023, the demographic and subpopulation data for characteristics remains remarkably similar. The percentage of persons whose data was gathered by interview rather than observation for the 2025 unsheltered count supports the validity of the description and subsequent findings. Overall, the efforts to reduce unsheltered homelessness and increase persons living in shelter or exiting the system to a more permanent location are trending in positive directions for resolving homelessness in the Riverside County area.

DISCUSSION

Reports from prior PITC unsheltered counts looked at a few topics of interest. The following sections use a review of the district level reports to discuss these topics.

WHERE PEOPLE STAYED THE NIGHT BEFORE THE PITC

Interview responses reveal that unsheltered persons were more likely to be found on the streets (40%), or encampments (17%), in vehicles (14%) or in tents or sheds (12%) rather than in and abandoned building (8%) or in a park (4%), or other situations such as under a bridge, in a parking lot, or tiny home (3% total). There is a substantive change in the number of unsheltered persons who stayed in encampments the night before the unsheltered PITC. In 2023, 695 persons reported being in an encampment on the night before the count. This number shrank to 204 in the 2025 count. This decrease of 490 persons coming from encampments may reflect the investment if the Encampment Resolution efforts that have occurred over the past two years since the last unsheltered count.

COUCH SURFERS

In addition to the enumeration of sheltered and unsheltered persons seen in the PITC data, surveys captured other information of interest such as the number of 'couch surfers' who are marginally housed but not technically homeless. This group of 31 is composed of 11 females and 20 males, staying in 14 different cities and unincorporated areas. While the title 'couch surfer' may raise an image of a youth staying with friends, the 2025 PITC found couch surfers ranging from 19 to 72 years of age.

PRIMARY FACTORS CONTRIBUTING TO HOMELESSNESS

Fourteen primary factors identified as contributing to homelessness. The 1,202 self-reported responses in interviews identified the primary factors contributing to their homelessness as family disruption (20%), lack of income (19%), unemployment (12%) and a myriad of 'other' related factors as the primary causes including situations caused by death (19 cases); COVID and health-related issues (13 cases); accidents, fires, floods (11 cases); personal choice (14 cases); and other forms of family disruption (28 cases).

CHALLENGES AND BARRIERS TO OVERCOMING HOMELESSNESS

Interviews helped to gather information about the challenges and barriers to regaining housing once people became homeless. Individual responses could contain more than one challenge or barrier. Of the nine challenges identified, the top five barriers from unsheltered interviews include: substance abuse/substance use disorder 38%, Post Traumatic Stress Disorder (PTSD) 31%; mental health issues 25%; physical disability 24%; and chronic health condition, 20%. Other responses included traumatic brain injury 18%, developmental disability 14%, domestic violence, 7%, and HIV/AIDS, 2%. The 2023 PITC report of special subpopulations for both sheltered and unsheltered persons identified 503 persons with mental health issues or 21% of the 2,441 total persons counted. The 2025 PITC identified 631 persons (304 unsheltered and 327 adults) or 16% of the total persons counted with mental health issues. While this number increased by over 100 persons, the percentage of the subgroup compared to the total counts decreased by 5%.



Above: Trained PITC volunteer conducting an interview survey

DISCUSSION

CHALLENGES AND BARRIERS TO OVERCOMING HOMELESSNESS

A comparison of persons with substance abuse barriers shown in the total 2025 is 667 (453 unsheltered and 214 sheltered adults) or 17% of the total count while the 2023 count shows a total of 580 (24%). Again, although the total number of persons with substance abuse barriers increased between 2023 and 2025, the percentage of the total PITC homeless count decreased by 7%. This data demonstrates that the way data is compared influences the perspective on how progress is measured. Similarly, the change in the total count over time provides insight into overall progress being made.

OTHER SPECIAL INTEREST ITEMS

Over the past several unsheltered counts, a series of special interest questions arose. The items include the level of chronically homeless persons 49% (668); the number of persons experiencing homelessness for the first time 33% (392), pet owners or persons with animal companions 25% (304), persons with prior foster care placement 1% (8); those with jail or prison experience 23% (273), and persons with health care coverage 72% (869). The portion of percentages reported nationally, in excess 20%. In addition to comparisons of persons who were unsheltered on the day of the PITC, some 2025 data addresses the total number of persons who are part of key subgroups. The 2025 PITC measures chronic homelessness at 668 unsheltered persons and 286 sheltered adults or 24% of the total count.



Left: People who were interviewed were asked about the primary factors contributing to their homelessness.

AREA OF DETAILED DESCRIPTIONS

Summary pages containing the demographic details and key interview responses were created for each city, district, unincorporated area, and population of special interest. They are included in Appendix E. The summary page format is similar to the 2023 summary pages, allowing further exploration of changes between the 2023 and the 2025 unsheltered counts.

MOBILITY/ LAST KNOWN ADDRESS

A review of the responses to the 2025 PITC survey explored the level of mobility between the last known address of the respondent and the location where they were located at the time of the PITC. Responses were gathered as a string with the street address, city, and state in one field. These were separated and reclassified as in the same area (city or district), from another city within the County, from another location in California, or from another state or country. Key responses included 42 persons from other areas in California, 4 people from other countries, 39 from 12 other states, 391 within the county, 29 who did not know their former location, and the balance were from the same area. Deeper analysis in future counts could be facilitated by a change in how the data is collected using classification like what was created for this review.

LEVEL OF HOMELESSNESS

Comparison of the city-level Summary Pages helps recognize key factors between the areas, results in comments, and raises questions. Counts of unsheltered homelessness persons range from five (5) in Norco and La Quinta to a high of 614 in Riverside, while counts of sheltered persons range from zero (0) in Calimesa to a high of 473 in Riverside. Together this data creates total PITC city counts ranging from six (6) in La Quinta to 1,087 in Riverside. The five (5) largest total PITC city counts are Riverside (1,087), Indio (509), Hemet (322), Corona (254), and Murrieta (199). As a result, all but one District each have one or more of the largest counts of sheltered and unsheltered homeless persons. The largest centers of homelessness in District 1 are Riverside and Perris. Together these cities contain 59% (2,371) of the full 2025 PITC of 3,990.

In addition, PITC data shows a range of zero '0' to '49' unsheltered persons in the Census Designated Place (CDP) areas of the County. This data is included in District level summary totals and is included on a summary table for the full PITC, found in the Appendices.

PRIMARY FACTORS CONTRIBUTING TO HOMELESSNESS

People who were interviewed were asked about the primary factors contributing to their homelessness. PITC responses overall, found family disruption and lack of income as the most frequent factors contributing to homelessness. The pattern of responses in many cities also show these as the most frequent contributors. The chart below, shows cities with other factors as the primary contributors. Family disruption continues to be a high response in the self-reports from these areas as well.

AREA	FACTOR WITH MOST FREQUENT RESPONSES	SECOND MOST FREQUENT RESPONSES
Banning	Family Disruption	Substance Abuse
Blythe	Other	Lack of Income
Calimesa	Unemployment	Other
Coachella	Unemployment	Family Disruption
Corona	Other	Family Disruption
Jurupa Valley	Family Disruption	Unemployment
La Quinta	Mental Illness	Unemployment
Lake Elsinore	Lack of Income	Other
Menifee	Lack of Income	Substance Abuse
Murrieta	Other	Domestic Violence
Norco	Runaway	Domestic Violence
Riverside	Other	Lack of Income
San Jacinto	Other	Family Disruption

FIRST TIME HOMELESSNESS

People experiencing homelessness for the first time are found in each city except Palm Desert. The cities with the highest percentages of people experiencing first-time homelessness are Riverside, Hemet, Blythe, Banning, and Perris. The ages of persons reporting that they are experiencing homelessness for the first time include every age group, with the highest percentages living on the streets (38%), in vehicles (19%), or encampments (16%). The top factors contributing to their homelessness include 'other' and family disruption. In these cases, 'other' included several who experienced a death in the family, or the home where they were living being sold, or their house lost in fire among other situations.

CHRONICALLY HOMELESS PERSONS

To qualify as chronically homeless, a person must have a diagnosed disability and have experienced prolonged homelessness for more than a year, or periods of homelessness that collectively add up to 365 days. Like other groups, person who are chronically homeless are found in every district. The highest percentages of chronically homeless persons included in the unsheltered count are in Riverside, Corona, Hemet, Desert Hot Springs, and Blythe. The full count of 668 chronically homeless persons are predominantly white (47%), Hispanic (27%), or Black (14%). The living situations of the 591 chronic homeless with responses to the survey mirror the patterns for other groups with large proportions living on the street (41%), or encampments (20%) as the top locations but in comparison with other groups such as the first time homeless, a higher percentage of persons experiencing chronic homelessness are living in tents (12%) or abandon buildings (7%).

CHANGES FROM 2023 PITC

Compared with the 2023 Unsheltered count, city data point to areas with virtually no change like Calimesa (0%), and Riverside (1%) to areas with substantial change such as increases in Banning (118%); Corona (66%); and Menifee (72%) and decreases in Palm Desert (-77%); (Palm Springs (-63%), or San Jacinto (-54%). Discussions with the cities about the PITC results may help identify the factors contributing to these changes. Exploring the recent adjustments in resources like shelter beds, outreach and support services, or transportation or changes in policy such as ordinances may enhance the understanding of these PITC changes. This could also reveal opportunities to make progress on the key goals identified such as the amount of time people spend on the streets, or where an increase in crisis beds could have the greatest impact.

Individual summaries of data for each city, unincorporated area, and district are provided in the Appendices. The format for these summaries is patterned after the 2023 PITC report and as a result, offer quick references for comparison. HUD reports require a measure of demographics for each person included in the PITC. When necessary, the demographic data for age, race/ethnicity, and gender were extrapolated from the known count to ensure each person in the count is represented. Other information, such as primary factors contributing to homelessness and challenges/barriers to resolving homelessness are typically based on interview responses with notes about additional information when they are available.

DISTRICT HIGHLIGHTS

The following tables provide high-level data for each District in the County. The first table focuses on the count of unsheltered homeless persons in comparison with the most recent unsheltered count (2023). The percentage change reflects the increase or decrease in the number of unsheltered persons relative to the 2023 count. The most prominent demographic features of the unsheltered population in the area and any striking differences are noted. Three of the Districts achieved decreases in unsheltered persons ranging from 27% to 40%, while the remaining two Districts experienced increases in unsheltered persons of 7% and 12%. It is important to note that the City of Riverside, previously identified in two Districts, is now identified only in District 1. Changes in shelter bed availability also impact the distribution.

In general, unsheltered populations have larger proportions of males, ages 35-44, and identify as non-Hispanic. District 3 has a slightly older group, ages 45-54, as the largest component and has the highest proportion of non-Hispanic persons (70%). American Indian/Alaska Native/Indigenous people are noted in District 1 and District 4. These findings parallel the results of the 2023 Unsheltered count with respect to gender and age.

DISTRICT	2025 UNSHELTERED NUMBER	2023 VS. 2025 % INCREASE (+) OR DECREASE (-)	NOTES
1	807	7%	Largest portions of the unsheltered population are male (72%); ages 35-44 (31%); non-Hispanic (67%); and has the highest number of unsheltered children and the largest number of American Indian, Alaska Native, and Indigenous people (16).
	(+55)		
2	191	-27%	This area has a substantial decrease in the percentage of unsheltered persons. Largest portions of the unsheltered population are male (72%); ages 35-44 (32%); with only a slightly higher portion of non-Hispanic (53%) compared to those with Hispanic ethnicity.
	(-69)		
3	136	12%	One of the two areas with a percentage increase in unsheltered persons. It has a higher proportion of persons ages 45-54 (29%). Largest portions of unsheltered population are male (68%); ages 45-54 (29%); non-Hispanic (70%).
	(+15)		
4	454	-40%	The area with the largest decrease in unsheltered persons. The highest portions of the unsheltered population are male (70%); ages 35-44 (30%); non-Hispanic (61%); and has the second highest number of American Indian, Alaska Native, and Indigenous people (15).
	(-301)		
5	390	-29%	District 5 has a significant decrease in unsheltered persons, however like other areas, the largest portions of unsheltered population are male (70%); ages 35-44 (33%); and non-Hispanic (73%).
	(-163)		

**In 2025 geographic coordinates were used to accurately attribute the Jurupa Valley Count to Districts 1 and 2 accordingly.

DISTRICT HIGHLIGHTS

The second table of District data captures the point in time numbers of sheltered persons, as defined by HUD. Although permanent supportive housing is often reviewed as a key element for understanding homelessness, persons in permanent supportive housing are not identified as homeless for PITC purposes. The data reflects the number of persons sheltered in each District as a percentage of the overall sheltered PITC of 2,012 persons.

DISTRICT	2025 SHELTERED	PERCENT OF TOTAL SHELTERED COUNT	NOTES
1	521	26%	The vast majority 91% (473) of the district's sheltered count are in Riverside. The balance are in Perris (44) and Jurupa Valley (4).
2	223	11%	Majority of sheltered persons are in Corona (146), with the remainder in Eastvale (30), Lake Elsinore (28), Norco (16) and Jurupa Valley (3).
3	267	13%	Majority of sheltered persons are in Murrieta (185), with the remainder in Temecula (35), Wildomar (25), and Menifee (22).
4	608	30%	Majority of sheltered persons are in Indio (458), with the remainder in Palm Springs (74), Desert Hot Springs (35), Cathedral City (24), Coachella (9), Palm Desert (5), and Blythe (2).
5	393	20%	The largest portion of sheltered persons are in Hemet (184), with the remainder in Moreno Valley (99), San Jacinto (55), Banning (38), Beaumont (7), and the unincorporated area (10).

*In 2025 geographic coordinates were used to accurately attribute the Jurupa Valley Count to Districts accordingly.

DISTRICT HIGHLIGHTS

A third table of District data shows the summary of Sheltered and Unsheltered persons as the percentage of the full PITC of all persons reported, 3,990 persons. Combining sheltered and unsheltered counts, District 5 is home to one third (33%) of persons recorded in the count and District 4 contains over one quarter (27%) of persons counted.

DISTRICT	# UNSHELTERED PERSONS	# SHELTERED PERSONS	TOTAL DISTRICT COUNT	% OF TOTAL PIT COUNT
1	193	74	267	7%
2	191	197	388	10%
3	136	267	402	10%
4	454	608	1,062	27%
5	1,004	866	1,870	47%

**In 2025 geographic coordinates were used to accurately attribute the Jurupa Valley Count to Districts accordingly.*

HOMELESS POINT-IN-TIME COUNTS BY CITY (*UNSHELTERED*)

There are 28 cities within the boundaries of the Riverside CoC. No two jurisdictions are identical. The geography ranges from densely populated urban areas to remote mountains and deserts. Characteristics for individual cities, unincorporated areas, and supervisorial districts can be found in the Appendices.

City/Jurisdiction	2019	2020	2022	2023	2025
Banning	39	43	54	40	87
Beaumont	15	16	16	33	81
Blythe	48	73	79	105	72
Calimesa	16	17	8	8	8
Canyon Lake	0	0	0	0	0
Cathedral City	82	44	61	40	49
Coachella	51	78	74	67	72
Corona	164	109	110	65	108
Desert Hot Springs	45	68	48	107	81
Eastvale	0	4	6	7	0
Hemet	112	93	82	207	138
Indian Wells	2	1	0	0	0
Indio	52	83	105	108	51
Jurupa Valley	139	103	96	79	36
La Quinta	9	3	7	4	5
Lake Elsinore	66	50	35	78	38
Menifee	17	19	28	25	43
Moreno Valley	38	165	77	77	55
Murrieta	17	19	28	25	14
Norco	11	12	14	13	5
Palm Desert	23	18	26	39	9
Palm Springs	196	189	222	239	88
Perris	77	52	59	90	56
Rancho Mirage	6	12	3	3	0
Riverside (D1+2 in 2022)	439	587	513	605	614
San Jacinto	48	31	57	120	55
Temecula	59	59	28	35	37
Unincorporated District 1	45	44	24	47	79
Unincorporated District 2	44	31	27	18	4
Unincorporated District 3	65	54	48	28	32
Unincorporated District 4	98	58	45	43	27
Unincorporated District 5	9	15	8	68	26
Wildomar	13	6	7	10	10
Total	2,045	2,155	1,980	2,441	1,978



DATA ANALYSIS

DATA ANALYSIS

DEDUPLICATION

Strategies for identifying and eliminating double counting are important to the accuracy of the PITC. Using a 'blitz' approach to the street count helps to limit the potential for interviewing someone more than once. Some activities of the PITC, however, occur on more than one day.

- 1) The survey instrument incorporated screening questions that avoid duplication. After greeting the individual, interviewers asked if anyone had recently asked them questions about where they stayed on the night of the count. After confirming the person had not yet been interviewed and that the person had slept in a location that qualified them as experiencing homelessness, a verbal interview was conducted to collect the survey data.
- 2) Survey teams were assigned to conduct the count and survey in specific geographic areas, on a designated date and time.
- 3) Electronic devices with geolocation capabilities and survey start and end times enhanced the ability to identify potential duplication of files.
- 4) The survey information was used to generate a unique identifier for each survey and respondent. Records for persons who were contacted and refused to be interviewed also included a unique identifier and were further designated in the data as observed rather than interviewed.
- 5) The survey instrument also collected the surveyor's name and contact information so that contact could be made if clarification was needed.



Above: The data collected for the PITC underwent a multi-phase deduplication process

ENSURING DATA INTEGRITY

Ensuring data integrity was important to the accuracy of the PITC results. Data quality and deduplication verified:

- Persons included in the count were homeless per PITC requirements
- All persons identified as homeless in the PITC were homeless on the night the CoC designated as its PITC date
- Persons identified as homeless on the CoC's designated PITC date were not already counted
- Internal logic of the data is sound. For example, a child who was 3 years old at the time of the PITC would not logically also be a parenting youth. The record would be flagged for additional review to determine if the record should be excluded in its entirety, or simply removed from analysis of certain fields.

DEDUPLICATION PHASE 1: OUTLIERS

Data analysis team communicated with volunteers, when necessary, to seek clarification about completed interview and observed surveys. Team removed all submitted surveys plotted outside Riverside County. The data was geocoded to assign each point a city and Supervisor District.

DEDUPLICATION PHASE 2: IDENTIFYING DUPLICATE RECORDS

A multi-phase deduplication process using a Python script was applied to the records. A unique identity, generated from joining portions of data: initials of first and last name, age, gender, race, ethnicity, and birthplace assisted in identifying duplicate records. Unique identifiers, personal characteristics, time, date and location for data collection, descriptions in the records, and the name and contact information for the interviewer were also used. Surveys were assigned a record number and household members were tied together by a global identification number. The survey instrument indicated the GPS location of the surveyor's mobile device and date and time the data was captured, providing a geographic location of where the survey took place. This offered another factor to assist in deduplication. The project and global identification numbers were sorted, searched, and reviewed for possible duplication. Records subject to removal were reviewed by two people and presented to data analysis group prior to removal.

VALIDITY, RELIABILITY, AND CONFIDENCE IN THE PITC

Validity and reliability are foundational concerns in research and data analysis.

- Did the variables measure the condition intended?
- Would the results likely be consistent if the count was repeated?
- How do we know that the people counted or interviewed represent the homeless population overall?

The Riverside County PITC gathered data from the entire population. To accomplish this, the PITC engaged in multiple methods for identifying persons who were homeless, canvassed the entire geographic area, and invited everyone contacted to complete a standardized survey with trained survey-takers.

WHAT WERE THE RESULTS OF THE EFFORT TO GATHER DATA FROM EACH PERSON LIVING IN HOMELESSNESS IN THE REGION ON THE PITC DATE?

The 2025 PITC unsheltered count canvassed the entire geographic area, and the sheltered count drew data for all sheltered persons meeting the HUD definition from the centralized HMIS database. The survey design and HMIS both included data to validate a person as homeless under the HUD definition.

POPULATION ESTIMATES

There were 1,202 unsheltered persons surveyed during the PITC. The total of these persons, when added to the HMIS data for another 2,012, persons who were sheltered at the PITC is 3,214. This represents 81% of the total PITC of 3,990 persons. HUD describes having known data of approximately 80% as "ideal"^[2] and notes that extrapolation can be used even with less known data. This lends to the conclusion that overall PITC estimates are reasonable.

The variables in the PITC have different levels of known data. In general, the level of known data is higher than the unknown data. The higher the level of known data, the higher confidence we hold in using the estimate. We also know that the known data represents the minimum number of persons in the various categories and the extrapolated values represent a reasonable picture of the full group encountered during the PITC.

^[2] HUD Exchange. <https://www.hudexchange.info>. FAQ #3473

EXTRAPOLATION

Counting unsheltered persons can be challenging. A simple 'headcount' of persons who appear to be experiencing homelessness can draw on a profile of observable characteristics such as clothing, hygiene, physical location, etc. to create a tally of apparently homeless persons in the CoC. The CoC is invested in understanding more about the persons counted. Whenever possible, each person encountered during the PITC is asked if they are willing to participate in a survey that gathers demographic and other information. Not everyone will agree to participate, as a result, the PITC ends up with some amount of incomplete information about the persons counted. Even those who agree to be surveyed on the night of the count may refuse to answer some questions, while others may be in locations that can be observed but are not safely accessible.

HUD reminds CoCs to avoid deleting records or throwing out entire surveys or forms representing an individual experiencing homelessness on the night of the PITC because of missing data. HUD also does not allow CoCs to report the count of "unknown" or "missing" for basic demographics of persons included in the PITC report. HUD provides resources to help CoCs account for missing demographic data collected during their PITC. One primary method of distributing the "unknown" and "missing" into the relevant response categories is extrapolation. Extrapolation calculates the total number of persons in each category by taking the percentage of persons who are known to be in each category (i.e., who did answer) and applies those percentages to the total number of "unknown" and "missing" cases. Those totals are then added to the known cases to provide an estimate of the total number of people expected to be in each category. These numbers are reported as extrapolated counts. HUD provides an "extrapolation tool" to help in this process. During the extrapolation process, attention is given to ensure that the data is logical and applied to the relevant categories. For example, extrapolation of persons who were observed to be "over age 25" would not include children ages 0-17 years. The 2025 data analysis includes extrapolated numbers where appropriate and identifies data derived by extrapolation or interview only or all known survey data.



Above: Abandoned makeshift tent



PLANNING & IMPLEMENTATION

HOMELESS POINT-IN-TIME COUNT PLANNING & IMPLEMENTATION

COMMUNITY PLANNING MEETINGS

The plan and methods used for the Riverside County PITC, and its cities is developed through community involvement in a series of meetings held over a period of several months. Community planning meetings that convene key leaders and stakeholders, service providers, law enforcement, youth service providers, and non-profit agencies were launched in October 2024. Three monthly planning meetings with approximately 70-90 community partners in attendance were facilitated in preparation for the homeless count. The meetings were held virtually, were recorded and the recordings were posted on the PITC website.

Purpose of the Community Planning Meetings:

- Ensure an effective and accurate PITC
- Facilitate collaborative discussions on priorities, outreach and engagement strategies, location mapping, mobile survey development, and identification of deployment sites in each city
- Mobilize community partners to promote and participate in the homeless count

SELECTION OF A DATE AND TIME

HUD requires that the date and time of the PITC fall within the last 10 calendar days of January to ensure consistency across the U.S. and allow for trends to be monitored appropriately. During the colder months, unsheltered residents are more likely to access emergency shelters making it easier to count them than when they are unsheltered and moving around. In Riverside County, selection of the PITC date also takes into consideration the PITC dates of neighboring counties to avoid two counts taking place on the same day and potentially overwhelming shared resources.



Above: The PITC planning team held virtual planning meetings to discuss participation and engagement strategies



Above: An early morning count ensures volunteers will be able to engage unsheltered individuals

Right: Team at San Jacinto deployment site briefs volunteers by showing maps of the city displaying counting locations



CITY LEADERS, DEPLOYMENT SITES, AND INDIVIDUAL PLANNING SESSIONS

Homelessness impacts communities across Riverside County and the planning team's goal is to be inclusive of community-wide and cross-sectoral partnerships. The planning team depends on the participation of every city and unincorporated area to ensure a full census unsheltered PITC. City mayors and managers are engaged early and invited to designate a city point of contact for maximum participation during planning and on the morning of the count. The Riverside Sheriff's Office (RSO) Homeless Outreach Team (HOT) takes a lead role and guides planning efforts for the unincorporated area count.

In early January 2025, planning sessions to discuss individual implementation plans with every PITC city lead were scheduled. Planning sessions included city leads, assigned county coordinators, law enforcement, and street outreach team leads. During the meetings, leads shared their canvassing maps, their plans for counting teams, reviewed volunteer lists, requested additional incentives or volunteers, and shared concerns or needs leading to the PITC. Feedback from city leads about the planning sessions was helpful as it served as a way to finalize planning efforts.

Site leads are selected because of their familiarity with local homelessness, where unsheltered individuals live, where they spend their time and where many access services in their community. Additionally, site leads are familiar with city resources, local volunteer programs, and faith-based organizations allowing them to leverage resources, including volunteers, to assist on the day of the count. Leads work with the planning team to share their knowledge about homelessness in their city, obtain guidance and training about implementing HUD's definition of homeless during the count, accurately coordinate the count, create volunteer counting teams, and identify incentives and materials/supplies needed at their site.

Deployment Site Leaders work to implement a comprehensive count by:

- Identifying a deployment site to be used on the day of the count
- Collaborating with local law enforcement
- Identifying encampments and other locations where unsheltered persons live/sleep/hangout
- Creating canvassing maps and creating counting teams

COUNTY COORDINATORS

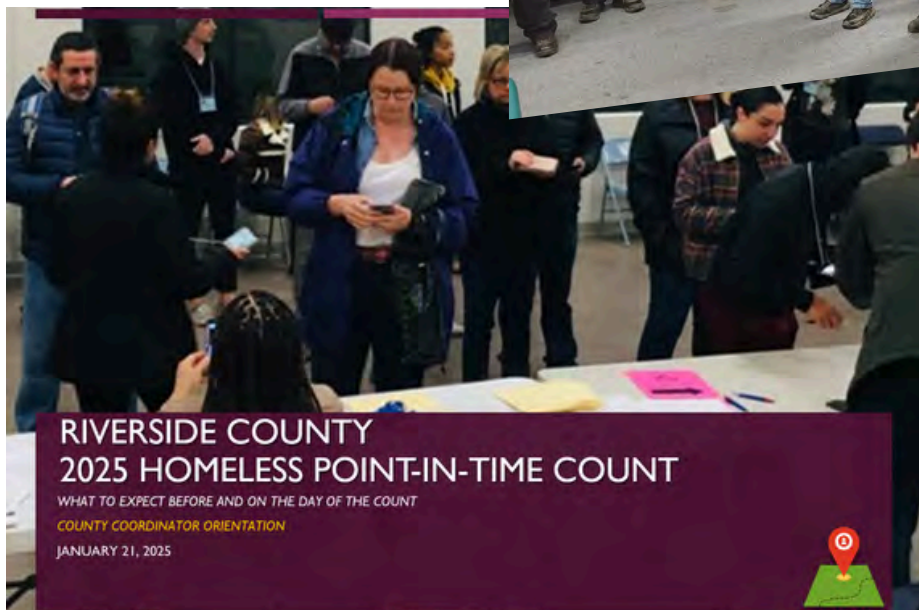
County coordinators are assigned to every deployment site to work alongside city leads and provide support on the morning of the count. The primary role of the coordinators is to ensure deployment sites conduct a concise and accurate count and ensure volunteers follow procedures. Coordinators participate in individual city planning sessions to be informed about how leaders plan to implement the PITC in their city, assist with volunteer check-in, and provide technical support related to the Survey123 app. The majority of coordinators are paid county staff with previous PITC experience.

DEPLOYMENT SITE LEADER AND COUNTY COORDINATOR ORIENTATION

All county coordinators and deployment site leaders, especially those new to the count, attend a *How to Implement the Homeless Point-in-Time Count* Orientation. The orientation includes information about how to prepare for the day of the count, a step-by-step review of the day of the count agenda, how to conduct the volunteer check-in process, and how to prepare a site for volunteers. Orientation sessions are also attended by city staff and law enforcement partners. The orientation is recorded, and all city deployment site leads, and county coordinators receive a link to access the recording to view and access as needed.



Above: Trained volunteers waiting to receive their counting team assignment in the City of San Jacinto



Above: A virtual training was held to prepare deployment site leaders for what to expect before and on the day of the Point-in-Time Count

VOLUNTEERS

Volunteer participation in the PITC is key to ensuring a coordinated and accurate count. To cover Riverside County's entire geographic area, the planning team established a goal of recruiting 800 volunteers to assist in all PITC activities including the YPITC and the More Than A Count Initiative

RECRUITMENT

The volunteer recruitment plan included:

- Designing and developing the PITC website that included a volunteer registration link
- A volunteer management system was linked to the volunteer website allowing registered volunteers to access the volunteer training and facilitated communication with volunteers
 - The system allowed planners to text volunteers with updates and reminders
- Developing a social/media marketing tool kit that included:
 - volunteer recruitment flyers for print/email
 - flyers sized for social media platforms
 - social media sample posts
 - PowerPoint slides for PITC presentations
 - PITC FAQ document
- Recruitment flyers were distributed to past PITC volunteers, local businesses, Continuum of Care partners, local colleges and universities, and school districts



Above: The PITC planning team developed volunteer recruitment fliers to be distributed throughout the community

VOLUNTEER REQUIREMENTS

All individuals interested in volunteering for the PITC are required to register to participate. The volunteer registration system provided administrators with the ability to monitor completion of volunteer requirements using qualification fields, collect signed liability/release waivers, and provide volunteers access to the required volunteer training.

VOLUNTEER ELIGIBILITY INCLUDED:

- Submit signed Liability Release form
- Participate in mandatory training
- Confirm use of smartphone or mobile device with ability to download Survey123
- Ability to walk and/or stand for an extended period
- At least 18 years old or 16-17 years old with an accompanying adult
- Willingness to follow all safety precautions discussed during the training

VOLUNTEER COMMUNICATION

To ensure effective communication, updates were generated through the registered volunteer system. Volunteers were able to email the planning team questions or specific requests. Email reminders were sent to individuals missing information or those who had not completed the volunteer requirements. If at any time a participant was no longer available to volunteer, they were able to request that their registration be removed from the list. Upon registration, volunteers were asked to select two cities where they would like to volunteer. Volunteers received their assignment including their deployment site address and check-in time two weeks prior to the count.

VOLUNTEER TRAININGS

All participating volunteers were required to receive a training to promote uniformity and ensure high-quality data collection. Volunteers completed an online training before obtaining access to the 2025 PITC survey published on ESRI Survey123. A QR code was created and provided to volunteers for quick access and to ensure the correct survey was used.

Volunteer Training Objectives:

- Understand the importance of the homeless count
- Learn how the count is implemented effectively
- What to expect and how to prepare for the count
- Learn the roles of the team
- Become familiar with the surveys and how to navigate them using the Survey123 app
- Learn how to stay safe throughout the process
- How to download and complete the survey tool accurately



Above: Virtual PITC volunteer training

VOLUNTEER PARTICIPATION

This year's count was made possible by the efforts of 879 community volunteers and agency partners, all 28 cities, along with the Department of Public Social Services (DPSS), Riverside University Health System – Behavioral Health (RUHS-BH), Riverside County Information Technology (RCIT), Code Enforcement, Probation, the Riverside Sheriff's Office, and municipal police departments. As part of its More Than A Count initiative, the County was able to fast-track vulnerable populations such as seniors, families and youth into care on the day of the count which was largely supported through both the Inland Empire Health Plan (IEHP) and Molina Healthcare. The count was coordinated by HWS' Office of Homeless Services and in partnership with the Riverside County Continuum of Care, a broad network of public and private homeless service providers across the County. Mandated by the U.S. Department of Housing and Urban Development (HUD), the Point-in-Time Count provides critical data used to assess regional needs and guide strategic planning.

INCENTIVES

The unsheltered PITC provides the community an opportunity to interact with and engage unsheltered individuals. In 2025, **2,500 incentives** were prepared and distributed to all deployment sites, youth events, and other PITC activity sites during the week of the homeless count. All incentives were sponsored by Riverside County's Housing and Workforce Solutions Office of Homeless Services. Volunteers carry incentive bags to hand out during the count to help break the ice and possibly motivate the person to respond to the survey. Incentives are also used to thank the person being interviewed for their time and responses. Incentives were packed in a sturdy backpack and included the following items:

- Beanie
- Gloves
- Socks
- Blanket
- Poncho
- Travel-sized, hygiene items:
 - Shampoo/conditioner
 - Feminine hygiene products
 - Toothbrush/toothpaste
 - Lotion
 - Soap
 - Comb
 - Shower Cap



Left: Incentive backpacks provided to any unsheltered person encountered during the PITC

Above: Backpacks included a variety of items including hygiene supplies along with clothing items to stay warm and dry

COMMUNITY RESOURCE GUIDE

As part of the *More Than A Count* initiative, all incentive backpacks included a resource guide that provided contact information to emergency shelters, Youth Opportunity Centers, and various county departments.



Community resource guide

HOMELESS YOUTH POINT-IN-TIME COUNT

The 2025 Youth Point-in-Time Count (YPITC) was a youth-centered initiative led by the Riverside County CoC Youth Team. The Youth Team is a dedicated team that works closely with the Riverside County Youth Advisory Committee (YAC) and Youth Action Board (YAB) to ensure the voices of youth are central to the planning and implementation processes. As in previous years, Operation Safe House (OSH) served as a co-lead agency in the YPITC planning efforts, with a particular focus on outreach and coordination for minors. OSH is a non-profit organization that offers emergency shelter and transitional living for youth in Riverside County. OSH focuses on serving homeless youth and youth in crisis between the ages of 11 and 24.

The YPITC followed the same methodology as the general count. However, due to the unique nature of young adults experiencing homelessness or housing instability, youth count planning meetings were facilitated to strategize and plan in the months leading up to the youth count. These planning sessions included all aspects of the youth count and worked to:

- Identify and recruit youth-friendly volunteers
- Create canvassing teams familiar with the city and unsheltered youth hot spots
- Recruit experienced individuals with strong knowledge of or who worked directly with youth experiencing homelessness to allow for easier rapport building when surveying
- Ensure that youth volunteers understood the day-to-day challenges and trends homeless youth face to be effective on the streets

YOUTH DEPLOYMENT SITES

Deployment sites are designated locations that serve as a base of operations for the street-based count. Each deployment site was led by an individual with street outreach experience and familiarity with hotspots and areas where youth tend to congregate. Site leads were assigned to coordinate activities in the same deployment site through the duration of the count to lessen the risk of duplication.

YOUTH INVOLVEMENT

In September 2023, Riverside County was awarded federal Youth Homelessness Demonstration Program (YHDP) funding. Through this funding, the Riverside County CoC successfully developed its Coordinated Community Plan (CCP) in collaboration with cross-agency partners. As part of this effort, the CoC was able to identify and recruit members to its YAB, resulting in a group of 15 active and dedicated youth leaders with lived experience.



Above: Youth Action Board Logo

YAB members were instrumental in advancing Riverside County's mission during the 2025 YPITC, where they actively participated in the More Than A Count Initiative. The CoC Youth Team strategically placed YAB members at two separate access centers to maximize countywide coverage. At the designated access centers, YAB members were responsible for identifying youth experiencing homelessness, assisting with service navigation, and recruiting additional members for the YAB.

YOUTH OPPORTUNITY CENTERS

- Indio Youth Opportunity Center (City of Indio)
- Empower Youth Opportunity Center (City of Hemet)
- Lake Elsinore Youth Opportunity Center (City of Lake Elsinore)
- Moreno Valley Youth Opportunity Center (City of Moreno Valley)
- Perries Youth Opportunity Center (City of Perris)
- Rubidoux Youth Opportunity Center (City of Riverside)



Above: Youth Opportunity Center in the City of Moreno Valley

The YPITC planning team obtained input from the Youth Advisory Committee, Youth Action Board, and the County's Youth Commission and Youth Advisory Council to coordinate the YPITC.

Location: Youth Opportunity Centers are a natural location for events and due to on-going working relationships center directors are supportive of YPITC efforts.

Promotion: An event promotion flyer is distributed to CoC partners, Youth Advisory Committee, school liaisons, and all county employees through email. Flyers are also distributed at parks, community centers, and physical street distribution. The events are promoted at committee meetings and through social media.

Vendors: The committee identified a diverse group of 7-10 vendors per event that provided housing, social services, transitional living programs, rapid rehousing, reproductive health, mental health services, domestic violence, and rehabilitation services.

Event Coordinators: Each event is assigned two event coordinators to work with the center director and plan the event. Coordinators ensure all materials including food and refreshments, volunteer sign in sheets, and vendors arrive to the site.

Orientation: An orientation is scheduled for each event and is attended by the center directors and staff, event coordinators and planning team to discuss logistics and confirm roles and responsibilities.



YOUTH COUNT PARTNERS AND SUPPORTERS

The YPITC requires the complete support and participation from community partners including youth service providers, street outreach teams, and community volunteers.

- Addiction Therapeutic Services
- Alternatives to Domestic Violence
- Aspirnet
- Building Resilience Together
- California Family Life Center (CFLC)
- Catholic Charities
- Central Neighborhood Health Foundation
- Department of Public Social Services
- Families Living with AIDS Care Center
- HomeConnect
- Housing and Workforce Solutions (HWS) Department - Community Action Partnership (CAP): Utility Bill Assistance
- Housing and Workforce Solutions (HWS) Department - Housing Authority, Special Programs Team
- Housing and Workforce Solutions (HWS) Department - Workforce Development Division
- Lamas Housing Project
- Lighthouse Baptist Church (Moreno Valley)
- Lighthouse Social Service Centers
- Molina Health Care
- Olive Crest
- Operation SafeHouse
- Partners Against Violence
- Planned Parenthood
- Planned Parenthood Oak Grove Center
- Rainbow Pride Youth Alliance
- Rise Above Defeat
- Riverside Area Rape Crisis Center
- Riverside County Department of Animal Services
- Riverside County Office of Education – Carespaces
- Riverside Life Services
- RUHS – Public Health Family Planning
- RU Health – HIV/STD Program
- Starting Over Inc.
- Trauma Recovery Center
- Youth Community Corps (YCC) Project

Youth Count Support and Donations:

- RUHS – Behavioral Health
- RUHS – Public Health
- Walden Family Services
- Martha's Village & Kitchen
- Riverside County Fleet Services
- HIV/STD Program
- AXIS Foundation
- RIVCO Facilities Management
- RUHS – PH – Family Planning Program
- Val Verde School District
- Medical Health Operational Area Coordinator (MHOAC)
- Planned Parenthood
- Inland Empire Health Plan (IEHP)
- Molina HealthCare
- La Sierra University Church
- The Litas Women's Biker Group



Above: Youth Action Board members

ACKNOWLEDGEMENTS

The CoC PITC planning team would like to express their gratitude to the people in our community, network of non-profit organizations, faith based-communities, cities, county staff (including homeless outreach teams), and law enforcement partners for their relentless support and participation in the 2025 PITC and Survey.

The CoC PITC planning team extends their gratitude to the 879 volunteers who gave their time on the day and week of the count. Conducting a full-count in the fourth largest county in California, by size, is no small endeavor. We appreciate your time and energy, as well as your compassion for our community's neighbors experiencing homelessness.

THANK YOU TO
ALL OF OUR
DEDICATED
PARTNERS AND
SUPPORTERS.
ADDRESSING
HOMELESSNESS
IS NOT
POSSIBLE
WITHOUT YOU!



We would like to acknowledge the guidance and support received from the **Board of Supervisors and District Legislative Staff and Assistants**.



A sincere thank you for the support and partnership with the **Hub for Urban Initiatives** team that led the data analysis and development of the 2025 PITC data report.



Thank you to the **Riverside County Information Technology (RCIT) team** for their assistance in creating and publishing the PITC survey tool.



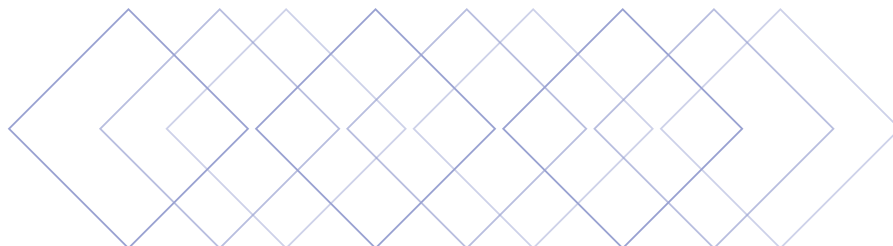
Our appreciation goes to the **County of Riverside Department of Public Health** who shared their expertise and knowledge about implementing a safe unsheltered homeless count.



We would like to acknowledge the assistance of the **Department Public Social Services (DPSS)** and their team of Public Information Specialists who assisted in promoting the homeless count in the community, a social media tool kit, and promotional materials.



A special thanks to the **County Executive Office** for their assistance with media and community engagement.



ACKNOWLEDGEMENTS (CONTINUED)

City and law enforcement leaders are vital to the success of the PITC. They are involved in all aspects of the planning, coordination, and implementation of the street-based count in their respective cities. Volunteers and staff are always appreciative to see law enforcement presence during the homeless count.

A heartfelt thank you to the city leaders, points-of-contacts, and city staff for their roles in increasing homelessness awareness by recruiting volunteers and promoting the PITC in their community. Deployment site leaders do an exceptional job coordinating all count-related activities.



Riverside County Cities Participating in the PITC:

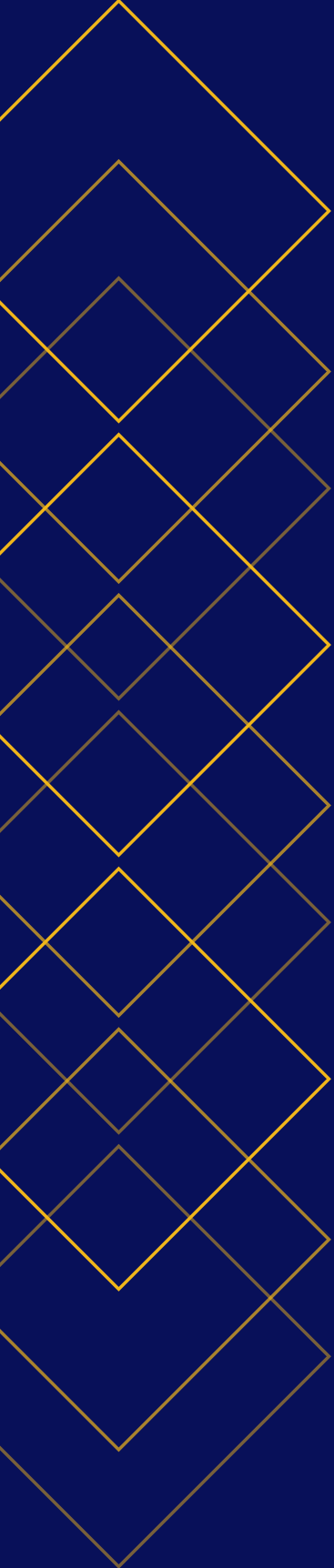
- City of Banning
- City of Beaumont
- City of Blythe
- City of Calimesa
- City of Canyon Lake
- Cathedral City
- City of Coachella
- City of Corona
- City of Desert Hot Springs
- City of Eastvale
- City of Hemet
- City of Indian Wells
- City of Indio
- City of Jurupa Valley
- City of La Quinta
- City of Lake Elsinore
- City of Menifee
- City of Moreno Valley
- City of Murrieta
- City of Norco
- City of Palm Desert
- City of Palm Springs
- City of Perris
- City of Rancho Mirage
- City of Riverside
- City of San Jacinto
- City of Temecula
- City of Wildomar

A special thanks to the **Riverside Sheriff's Office (RSO) Homeless Outreach Team**. Their committed participation in community planning meetings, coordination of the unincorporated area count, and involvement is invaluable.

Thank you to all county staff for their participation including the Department of Housing and Workforce Solution (HWS) Administrative Office and Continuum of Care Division staff that served to plan and implement the 2025 PITC.



HWS HOUSING AND
WORKFORCE
SOLUTIONS
ENGAGE. ENCOURAGE. EQUIP.



APPENDIX A GLOSSARY

GLOSSARY

RIVERSIDE COUNTY CONTINUUM OF CARE (CoC)

The planning body that coordinates county policies, strategies, and activities toward ending homelessness throughout Riverside County and its 28 cities. The CoC is a network of representatives from public and private agencies serving the homeless population, city and county representatives, law enforcement, faith-based organizations, advocates, school districts, colleges and universities, homeless and formerly homeless individuals, and other community residents.



YAC/YAB AND YOUTH COMMISSION

Youth Advisory Committee (YAC)

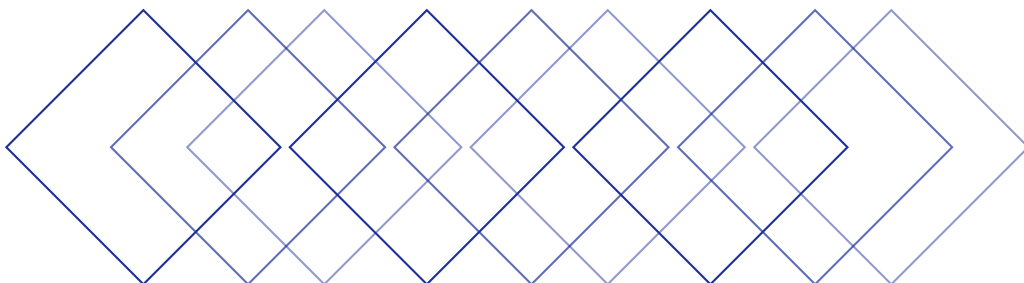
YAC is made up of 40-50 youth service providers and advises the CoC on issues and strategic planning activities related to ending youth homelessness. YAC agencies were recruited to serve during the PITC as well as to recruit youth they serve to participate in the YPITC.

Youth Action Board (YAB)

YAB is composed of homeless and formerly homeless youth between the ages of 18 and 24. YAB members share their voice to advocate for homeless youth and their input is taken into consideration in policymaking decisions of the CoC. YAB members are instrumental in helping shape policies that relate to ending youth homelessness. They serve as the experts that review and provide input on youth project applications and serve as ambassadors to strengthen relationships within the community and promote youth activism in governmental affairs. YAB members attended community planning meetings as well as participated in the street-based youth count and More Than a Count service sites.

Riverside County Youth Commission

The Riverside County Youth Commission has established itself as a strong supporter of the YPITC. Each of the 5 County Supervisorial District supports a Youth Advisory Council. The Council is intended for high school students in each district who wish to serve their communities. The Youth Commission consists of all 5 District's Youth Advisory Councils who make recommendations to the County of Riverside Board of Supervisors about youth related issues. The Commissioners agreed unanimously to support YPITC efforts.





APPENDIX B CITY SUMMARY TABLES

City of Banning		
Unsheltered	Sheltered	Total
87	38	125
Unsheltered		
Category	#	% of City US Count
Interviewed	72	83%
Observed	15	17%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	5	6%
Adults (25-34)	25	29%
Adults (35-44)	30	34%
Adults (45-54)	19	22%
Adults (55-64)	6	7%
Adults (65+)	2	2%
Ages Subtotal	87	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	1	1%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	1	1%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	14	16%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	32	37%
Middle Eastern or North African	1	1%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	1	1%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	36	41%
White & Hispanic/Latina/e/o	1	1%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	87	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	34	39%
Non-Hispanic/Latina/e/o	53	61%
Ethnicity Subtotal	87	100%
Gender (all Extrapolated per executive order)	#	%
Female	25	29%
Male	62	71%
Gender Subtotal	87	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	5	7%

Bus Station	0	0%
Encampment	11	15%
Park	2	3%
Parking Lot	0	0%
Street	29	40%
Tent/Shed	19	26%
Tiny Home (without basic amenities)	1	1%
Under Bridge	1	1%
Vehicle	4	6%
Other	0	0%
Primary Reasons for Homelessness (Interview)	#	% of Interviewed
Asked to Leave	2	3%
Domestic Violence	1	1%
Eviction	4	5%
Family Disruption	14	19%
Health Issues	1	1%
Jail Release	2	3%
Justice Involved	1	1%
Lack of Income	12	16%
Medical Discharge	0	0%
Mental Illness	3	4%
Other	9	12%
Runaway	2	3%
Substance Use Disorder	13	18%
Unemployment	10	14%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	15	21%
Domestic Violence	5	7%
HIV AIDS	5	7%
Mental Health Issue	12	17%
Physical Disability	13	18%
PTSD	20	28%
Substance Use Disorder	22	31%
Traumatic Brain Injury	11	15%
Developmental Disability	6	8%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	32	44%
First Time Homeless (self-report)	26	36%
Pet Owner	15	21%
Foster Care Experience	1	1%
Formerly Incarcerated	19	26%
Health Insurance Coverage	49	68%
Veterans (extrapolated)	2	3%

City of Beaumont		
Unsheltered	Sheltered	Total
21	7	28
Unsheltered		
Category	#	% of City US Count
Interviewed	13	62%
Observed	8	38%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	1	5%
Adults (25-34)	4	19%
Adults (35-44)	4	19%
Adults (45-54)	7	33%
Adults (55-64)	4	19%
Adults (65+)	1	5%
Ages Subtotal	21	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	0	0%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	5	24%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	15	71%
White & Hispanic/Latina/e/o	1	5%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	21	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	6	29%
Non-Hispanic/Latina/e/o	15	71%
Ethnicity Subtotal	21	100%
Gender (all Extrapolated per executive order)	#	%
Female	8	38%
Male	13	62%
Gender Subtotal	21	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	3	23%

Bus Station	0	0%
Encampment	1	8%
Park	0	0%
Parking Lot	0	0%
Street	5	38%
Tent/Shed	1	8%
Tiny Home (without basic amenities)	0	0%
Under Bridge	2	15%
Vehicle	1	8%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	0	0%
Family Disruption	3	23%
Health Issues	0	0%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	6	46%
Medical Discharge	1	8%
Mental Illness	1	8%
Other	0	0%
Runaway	2	15%
Substance Use Disorder	0	0%
Unemployment	0	0%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	2	15%
Domestic Violence	0	0%
HIV AIDS	2	15%
Mental Health Issue	5	38%
Physical Disability	2	15%
PTSD	5	38%
Substance Use Disorder	4	31%
Traumatic Brain Injury	1	8%
Developmental Disability	2	15%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	8	62%
First Time Homeless (self-report)	1	8%
Pet Owner	2	15%
Foster Care Experience	1	8%
Formerly Incarcerated	3	23%
Health Insurance Coverage	11	85%
Veterans (extrapolated)	4	31%

City of Blythe		
Unsheltered	Sheltered	Total
72	2	74
Unsheltered		
Category	#	% of City US Count
Interviewed	62	86%
Observed	10	14%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	2	3%
Adults (25-34)	10	14%
Adults (35-44)	22	31%
Adults (45-54)	15	21%
Adults (55-64)	17	24%
Adults (65+)	6	8%
Ages Subtotal	72	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	6	8%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	1	1%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	18	25%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	10	14%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	36	50%
White & Hispanic/Latina/e/o	1	1%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	72	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	12	17%
Non-Hispanic/Latina/e/o	60	83%
Ethnicity Subtotal	72	100%
Gender (all Extrapolated per executive order)	#	%
Female	24	33%
Male	48	67%
Gender Subtotal	72	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	12	19%

Bus Station	1	2%
Encampment	8	13%
Park	3	5%
Parking Lot	0	0%
Street	18	29%
Tent/Shed	7	11%
Tiny Home (without basic amenities)	0	0%
Under Bridge	2	3%
Vehicle	11	18%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	1	2%
Domestic Violence	2	3%
Eviction	2	3%
Family Disruption	10	16%
Health Issues	4	6%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	12	19%
Medical Discharge	0	0%
Mental Illness	4	6%
Other	19	31%
Runaway	0	0%
Substance Use Disorder	3	5%
Unemployment	5	8%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	10	16%
Domestic Violence	4	6%
HIV AIDS	0	0%
Mental Health Issue	10	16%
Physical Disability	14	23%
PTSD	11	18%
Substance Use Disorder	22	35%
Traumatic Brain Injury	11	18%
Developmental Disability	7	11%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	28	45%
First Time Homeless (self-report)	29	47%
Pet Owner	17	27%
Foster Care Experience	0	0%
Formerly Incarcerated	4	6%
Health Insurance Coverage	36	58%
Veterans (extrapolated)	4	6%

City of Calimesa		
Unsheltered	Sheltered	Total
8	0	8
Unsheltered		
Category	#	% of City US Count
Interviewed	5	63%
Observed	3	38%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	0	0%
Adults (25-34)	1	13%
Adults (35-44)	3	38%
Adults (45-54)	2	25%
Adults (55-64)	1	13%
Adults (65+)	1	13%
Ages Subtotal	8	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	0	0%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	0	0%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	8	100%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	8	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	0	0%
Non-Hispanic/Latina/e/o	8	100%
Ethnicity Subtotal	8	100%
Gender (all Extrapolated per executive order)	#	%
Female	3	38%
Male	5	63%
Gender Subtotal	8	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	0	0%

Bus Station	0	0%
Encampment	1	20%
Park	0	0%
Parking Lot	0	0%
Street	1	20%
Tent/Shed	0	0%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	3	60%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	0	0%
Family Disruption	1	20%
Health Issues	0	0%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	0	0%
Medical Discharge	0	0%
Mental Illness	0	0%
Other	2	40%
Runaway	0	0%
Substance Use Disorder	0	0%
Unemployment	2	40%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	2	40%
Domestic Violence	0	0%
HIV AIDS	0	0%
Mental Health Issue	1	20%
Physical Disability	1	20%
PTSD	2	40%
Substance Use Disorder	1	20%
Traumatic Brain Injury	1	20%
Developmental Disability	1	20%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	1	20%
First Time Homeless (self-report)	1	20%
Pet Owner	3	60%
Foster Care Experience	0	0%
Formerly Incarcerated	1	20%
Health Insurance Coverage	2	40%
Veterans (extrapolated)	0	0%

City of Cathedral City		
Unsheltered	Sheltered	Total
49	24	73
Unsheltered		
Category	#	% of City US Count
Interviewed	30	61%
Observed	19	39%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	0	0%
Adults (25-34)	13	27%
Adults (35-44)	18	37%
Adults (45-54)	11	22%
Adults (55-64)	5	10%
Adults (65+)	2	4%
Ages Subtotal	49	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	5	10%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	4	8%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	16	33%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	24	49%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	49	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	16	33%
Non-Hispanic/Latina/e/o	33	67%
Ethnicity Subtotal	49	100%
Gender (all Extrapolated per executive order)	#	%
Female	14	29%
Male	35	71%
Gender Subtotal	49	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	1	3%

Bus Station	0	0%
Encampment	6	20%
Park	3	10%
Parking Lot	0	0%
Street	15	50%
Tent/Shed	1	3%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	4	13%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	1	3%
Domestic Violence	0	0%
Eviction	0	0%
Family Disruption	10	33%
Health Issues	0	0%
Jail Release	0	0%
Justice Involved	1	3%
Lack of Income	7	23%
Medical Discharge	0	0%
Mental Illness	0	0%
Other	6	20%
Runaway	1	3%
Substance Use Disorder	1	3%
Unemployment	3	10%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	9	30%
Domestic Violence	2	7%
HIV AIDS	0	0%
Mental Health Issue	8	27%
Physical Disability	6	20%
PTSD	13	43%
Substance Use Disorder	10	33%
Traumatic Brain Injury	8	27%
Developmental Disability	2	7%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	11	37%
First Time Homeless (self-report)	10	33%
Pet Owner	4	13%
Foster Care Experience	0	0%
Formerly Incarcerated	7	23%
Health Insurance Coverage	25	83%
Veterans (extrapolated)	0	0%

City of Coachella		
Unsheltered	Sheltered	Total
72	9	81
Unsheltered		
Category	#	% of City US Count
Interviewed	38	53%
Observed	34	47%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	3	4%
Adults (25-34)	11	15%
Adults (35-44)	26	36%
Adults (45-54)	19	26%
Adults (55-64)	10	14%
Adults (65+)	3	4%
Ages Subtotal	72	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	1	1%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	3	4%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	56	78%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	12	17%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	72	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	56	78%
Non-Hispanic/Latina/e/o	16	22%
Ethnicity Subtotal	72	100%
Gender (all Extrapolated per executive order)	#	%
Female	15	21%
Male	57	79%
Gender Subtotal	72	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	6	16%

Bus Station	2	5%
Encampment	12	32%
Park	0	0%
Parking Lot	0	0%
Street	9	24%
Tent/Shed	5	13%
Tiny Home (without basic amenities)	0	0%
Under Bridge	2	5%
Vehicle	2	5%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	1	3%
Domestic Violence	0	0%
Eviction	1	3%
Family Disruption	7	18%
Health Issues	2	5%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	7	18%
Medical Discharge	0	0%
Mental Illness	4	11%
Other	5	13%
Runaway	1	3%
Substance Use Disorder	2	5%
Unemployment	8	21%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	8	21%
Domestic Violence	1	3%
HIV AIDS	1	3%
Mental Health Issue	8	21%
Physical Disability	7	18%
PTSD	9	24%
Substance Use Disorder	14	37%
Traumatic Brain Injury	6	16%
Developmental Disability	5	13%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	16	42%
First Time Homeless (self-report)	18	47%
Pet Owner	2	5%
Foster Care Experience	0	0%
Formerly Incarcerated	11	29%
Health Insurance Coverage	26	68%
Veterans (extrapolated)	6	16%

City of Corona		
Unsheltered	Sheltered	Total
108	146	254
Unsheltered		
Category	#	% of City US Count
Interviewed	77	71%
Observed	31	29%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	2	2%
Adults (25-34)	25	23%
Adults (35-44)	37	34%
Adults (45-54)	24	22%
Adults (55-64)	19	18%
Adults (65+)	1	1%
Ages Subtotal	108	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	2	2%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	4	4%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	10	9%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	41	38%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	1	1%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	40	37%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	10	9%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	108	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	56	52%
Non-Hispanic/Latina/e/o	52	48%
Ethnicity Subtotal	108	100%
Gender (all Extrapolated per executive order)	#	%
Female	31	29%
Male	77	71%
Gender Subtotal	108	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	9	12%

Bus Station	1	1%
Encampment	7	9%
Park	4	5%
Parking Lot	0	0%
Street	34	44%
Tent/Shed	5	6%
Tiny Home (without basic amenities)	0	0%
Under Bridge	3	4%
Vehicle	13	17%
Other	1	1%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	2	3%
Domestic Violence	1	1%
Eviction	5	6%
Family Disruption	14	18%
Health Issues	1	1%
Jail Release	6	8%
Justice Involved	1	1%
Lack of Income	7	9%
Medical Discharge	0	0%
Mental Illness	6	8%
Other	16	21%
Runaway	0	0%
Substance Use Disorder	8	10%
Unemployment	10	13%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	22	29%
Domestic Violence	10	13%
HIV AIDS	0	0%
Mental Health Issue	21	27%
Physical Disability	25	32%
PTSD	29	38%
Substance Use Disorder	30	39%
Traumatic Brain Injury	16	21%
Developmental Disability	13	17%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	47	61%
First Time Homeless (self-report)	22	29%
Pet Owner	17	22%
Foster Care Experience	2	3%
Formerly Incarcerated	27	35%
Health Insurance Coverage	60	78%
Veterans (extrapolated)	4	5%

City of Desert Hot Springs		
Unsheltered	Sheltered	Total
81	35	116
Unsheltered		
Category	#	% of City US Count
Interviewed	52	64%
Observed	29	36%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	0	0%
Adults (25-34)	13	16%
Adults (35-44)	22	27%
Adults (45-54)	24	30%
Adults (55-64)	19	23%
Adults (65+)	3	4%
Ages Subtotal	81	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	2	2%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	2	2%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	5	6%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	30	37%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	2	2%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	38	47%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	2	2%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	81	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	34	42%
Non-Hispanic/Latina/e/o	47	58%
Ethnicity Subtotal	81	100%
Gender (all Extrapolated per executive order)	#	%
Female	21	26%
Male	60	74%
Gender Subtotal	81	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	1	2%

Bus Station	0	0%
Encampment	20	38%
Park	0	0%
Parking Lot	0	0%
Street	24	46%
Tent/Shed	6	12%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	0	0%
Other	1	2%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	11	20%
Family Disruption	7	13%
Health Issues	1	2%
Jail Release	0	0%
Justice Involved	1	2%
Lack of Income	19	35%
Medical Discharge	0	0%
Mental Illness	4	7%
Other	6	11%
Runaway	0	0%
Substance Use Disorder	4	7%
Unemployment	2	4%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	13	25%
Domestic Violence	3	6%
HIV AIDS	3	6%
Mental Health Issue	18	35%
Physical Disability	12	23%
PTSD	16	31%
Substance Use Disorder	29	56%
Traumatic Brain Injury	11	21%
Developmental Disability	9	17%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	35	67%
First Time Homeless (self-report)	20	38%
Pet Owner	21	40%
Foster Care Experience	0	0%
Formerly Incarcerated	4	8%
Health Insurance Coverage	47	90%
Veterans (extrapolated)	2	4%

City of Hemet		
Unsheltered	Sheltered	Total
138	184	322

Unsheltered		
Category	#	% of City US Count
Interviewed	90	65%
Observed	48	35%

Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	5	4%
Adults (25-34)	38	28%
Adults (35-44)	43	31%
Adults (45-54)	29	21%
Adults (55-64)	15	11%
Adults (65+)	8	6%
Ages Subtotal	138	100%

Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	4	3%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	1	1%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	17	12%
Black, African American, or African & Hispanic/Latina/e/o	2	1%
Hispanic/Latina/e/o	30	22%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	1	1%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	79	57%
White & Hispanic/Latina/e/o	3	2%
Multi-Racial & Hispanic/Latina/e/o	1	1%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	138	100%

Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	37	27%
Non-Hispanic/Latina/e/o	101	73%
Ethnicity Subtotal	138	100%

Gender (all Extrapolated per executive order)	#	%
Female	38	28%
Male	100	72%
Gender Subtotal	138	100%

Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	14	16%

Bus Station	1	1%
Encampment	6	7%
Park	2	2%
Parking Lot	1	1%
Street	52	58%
Tent/Shed	3	3%
Tiny Home (without basic amenities)	0	0%
Under Bridge	2	2%
Vehicle	9	10%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	1	1%
Domestic Violence	2	2%
Eviction	7	8%
Family Disruption	17	19%
Health Issues	3	3%
Jail Release	5	6%
Justice Involved	2	2%
Lack of Income	16	18%
Medical Discharge	0	0%
Mental Illness	3	3%
Other	15	17%
Runaway	1	1%
Substance Use Disorder	9	10%
Unemployment	9	10%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	16	18%
Domestic Violence	5	6%
HIV AIDS	1	1%
Mental Health Issue	38	42%
Physical Disability	23	26%
PTSD	38	42%
Substance Use Disorder	47	52%
Traumatic Brain Injury	17	19%
Developmental Disability	14	16%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	54	60%
First Time Homeless (self-report)	35	39%
Pet Owner	23	26%
Foster Care Experience	0	0%
Formerly Incarcerated	24	27%
Health Insurance Coverage	71	79%
Veterans (extrapolated)	1	1%

City of Indio		
Unsheltered	Sheltered	Total
51	458	509
Unsheltered		
Category	#	% of City US Count
Interviewed	47	92%
Observed	4	8%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	1	2%
Adults (25-34)	14	27%
Adults (35-44)	15	29%
Adults (45-54)	12	24%
Adults (55-64)	7	14%
Adults (65+)	2	4%
Ages Subtotal	51	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	1	2%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	1	2%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	4	8%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	31	61%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	13	25%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	1	2%
Race Subtotal	51	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	32	63%
Non-Hispanic/Latina/e/o	19	37%
Ethnicity Subtotal	51	100%
Gender (all Extrapolated per executive order)	#	%
Female	18	35%
Male	33	65%
Gender Subtotal	51	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	7	15%

Bus Station	0	0%
Encampment	3	6%
Park	6	13%
Parking Lot	0	0%
Street	25	53%
Tent/Shed	4	9%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	2	4%
Other	0	0%
Primary Reasons for Homelessness - (Interview Only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	1	2%
Family Disruption	12	26%
Health Issues	1	2%
Jail Release	1	2%
Justice Involved	0	0%
Lack of Income	9	19%
Medical Discharge	0	0%
Mental Illness	1	2%
Other	7	15%
Runaway	1	2%
Substance Use Disorder	6	13%
Unemployment	8	17%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	9	19%
Domestic Violence	2	4%
HIV AIDS	0	0%
Mental Health Issue	8	17%
Physical Disability	11	23%
PTSD	6	13%
Substance Use Disorder	24	51%
Traumatic Brain Injury	7	15%
Developmental Disability	5	11%
Special Interest Questions - (Interview Only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	25	53%
First Time Homeless (self-report)	14	30%
Pet Owner	10	21%
Foster Care Experience	0	0%
Formerly Incarcerated	9	19%
Health Insurance Coverage	38	81%
Veterans (extrapolated)	4	9%

City of Jurupa Valley		
Unsheltered	Sheltered	Total
94	7	101
Unsheltered		
Category	#	% of City US Count
Interviewed	67	71%
Observed	27	29%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	0	0%
Adults (25-34)	14	15%
Adults (35-44)	29	31%
Adults (45-54)	21	22%
Adults (55-64)	24	26%
Adults (65+)	6	6%
Ages Subtotal	94	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	1	1%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	1	1%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	16	17%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	40	43%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	1	1%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	33	35%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	2	2%
Race Subtotal	94	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	41	44%
Non-Hispanic/Latina/e/o	53	56%
Ethnicity Subtotal	94	100%
Gender (all Extrapolated per executive order)	#	%
Female	27	29%
Male	67	71%
Gender Subtotal	94	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	0	0%

Bus Station	1	1%
Encampment	13	19%
Park	3	4%
Parking Lot	0	0%
Street	17	25%
Tent/Shed	19	28%
Tiny Home (without basic amenities)	0	0%
Under Bridge	2	3%
Vehicle	12	18%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	1	1%
Eviction	1	1%
Family Disruption	17	25%
Health Issues	3	4%
Jail Release	1	1%
Justice Involved	3	4%
Lack of Income	12	18%
Medical Discharge	0	0%
Mental Illness	0	0%
Other	10	15%
Runaway	0	0%
Substance Use Disorder	4	6%
Unemployment	16	24%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	14	21%
Domestic Violence	1	1%
HIV AIDS	0	0%
Mental Health Issue	4	6%
Physical Disability	10	15%
PTSD	18	27%
Substance Use Disorder	15	22%
Traumatic Brain Injury	13	19%
Developmental Disability	3	4%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	23	34%
First Time Homeless (self-report)	21	31%
Pet Owner	30	45%
Foster Care Experience	0	0%
Formerly Incarcerated	14	21%
Health Insurance Coverage	36	54%
Veterans (extrapolated)	4	6%

City of La Quinta		
Unsheltered	Sheltered	Total
5	1	6
Unsheltered		
Category	#	% of City US Count
Interviewed	5	100%
Observed	0	0%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	0	0%
Adults (25-34)	1	20%
Adults (35-44)	1	20%
Adults (45-54)	2	40%
Adults (55-64)	1	20%
Adults (65+)	0	0%
Ages Subtotal	5	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	0	0%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	0	0%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	5	100%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	5	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	0	0%
Non-Hispanic/Latina/e/o	5	100%
Ethnicity Subtotal	5	100%
Gender (all Extrapolated per executive order)	#	%
Female	3	60%
Male	2	40%
Gender Subtotal	5	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed

Abandoned Building	0	0%
Bus Station	0	0%
Encampment	3	60%
Park	0	0%
Parking Lot	0	0%
Street	2	40%
Tent/Shed	0	0%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	0	0%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	0	0%
Family Disruption	0	0%
Health Issues	0	0%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	1	20%
Medical Discharge	0	0%
Mental Illness	1	20%
Other	2	40%
Runaway	0	0%
Substance Use Disorder	1	20%
Unemployment	0	0%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	2	40%
Domestic Violence	0	0%
HIV AIDS	2	40%
Mental Health Issue	0	0%
Physical Disability	3	60%
PTSD	2	40%
Substance Use Disorder	1	20%
Traumatic Brain Injury	2	40%
Developmental Disability	2	40%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	3	60%
First Time Homeless (self-report)	1	20%
Pet Owner	2	40%
Foster Care Experience	0	0%
Formerly Incarcerated	2	40%
Health Insurance Coverage	4	80%
Veterans (extrapolated)	0	0%

City of Lake Elsinore		
Unsheltered	Sheltered	Total
38	28	66
Unsheltered		
Category	#	% of City US Count
Interviewed	31	82%
Observed	7	18%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	1	3%
Adults (25-34)	11	29%
Adults (35-44)	9	24%
Adults (45-54)	7	18%
Adults (55-64)	6	16%
Adults (65+)	4	11%
Ages Subtotal	38	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	2	5%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	5	13%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	8	21%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	21	55%
White & Hispanic/Latina/e/o	1	3%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	1	3%
Race Subtotal	38	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	11	29%
Non-Hispanic/Latina/e/o	27	71%
Ethnicity Subtotal	38	100%
Gender (all Extrapolated per executive order)	#	%
Female	11	29%
Male	27	71%
Gender Subtotal	38	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	2	6%

Bus Station	0	0%
Encampment	7	23%
Park	1	3%
Parking Lot	0	0%
Street	16	52%
Tent/Shed	4	13%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	1	3%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	1	3%
Domestic Violence	0	0%
Eviction	1	3%
Family Disruption	3	10%
Health Issues	0	0%
Jail Release	1	3%
Justice Involved	1	3%
Lack of Income	8	26%
Medical Discharge	1	3%
Mental Illness	3	10%
Other	5	16%
Runaway	0	0%
Substance Use Disorder	3	10%
Unemployment	4	13%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	6	19%
Domestic Violence	1	3%
HIV AIDS	2	6%
Mental Health Issue	9	29%
Physical Disability	8	26%
PTSD	10	32%
Substance Use Disorder	17	55%
Traumatic Brain Injury	4	13%
Developmental Disability	4	13%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	16	52%
First Time Homeless (self-report)	7	23%
Pet Owner	6	19%
Foster Care Experience	0	0%
Formerly Incarcerated	11	35%
Health Insurance Coverage	29	94%
Veterans (extrapolated)	4	13%

City of Menifee		
Unsheltered	Sheltered	Total
43	22	65
Unsheltered		
Category	#	% of City US Count
Interviewed	15	35%
Observed	28	65%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	1	2%
Adults (25-34)	9	21%
Adults (35-44)	15	35%
Adults (45-54)	10	23%
Adults (55-64)	6	14%
Adults (65+)	2	5%
Ages Subtotal	43	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	8	19%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	16	37%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	19	44%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	43	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	16	37%
Non-Hispanic/Latina/e/o	27	63%
Ethnicity Subtotal	43	100%
Gender (all Extrapolated per executive order)	#	%
Female	8	19%
Male	35	81%
Gender Subtotal	43	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	0	0%

Bus Station	0	0%
Encampment	4	27%
Park	1	7%
Parking Lot	0	0%
Street	6	40%
Tent/Shed	1	7%
Tiny Home (without basic amenities)	0	0%
Under Bridge	1	7%
Vehicle	2	13%
Other	0	0%
Primary Reasons for Homelessness - (Interview Only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	0	0%
Family Disruption	1	6%
Health Issues	0	0%
Jail Release	1	6%
Justice Involved	0	0%
Lack of Income	5	31%
Medical Discharge	0	0%
Mental Illness	1	6%
Other	2	13%
Runaway	0	0%
Substance Use Disorder	3	19%
Unemployment	2	13%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	1	7%
Domestic Violence	0	0%
HIV AIDS	0	0%
Mental Health Issue	5	33%
Physical Disability	3	20%
PTSD	2	13%
Substance Use Disorder	5	33%
Traumatic Brain Injury	4	27%
Developmental Disability	2	13%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	8	53%
First Time Homeless (self-report)	7	47%
Pet Owner	4	27%
Foster Care Experience	0	0%
Formerly Incarcerated	6	40%
Health Insurance Coverage	9	60%
Veterans (extrapolated)	1	7%

City of Moreno Valley		
Unsheltered	Sheltered	Total
55	99	154
Unsheltered		
Category	#	% of City US Count
Interviewed	48	87%
Observed	7	13%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	3	5%
Adults (25-34)	13	24%
Adults (35-44)	15	27%
Adults (45-54)	14	25%
Adults (55-64)	8	15%
Adults (65+)	2	4%
Ages Subtotal	55	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	1	2%
Asian or Asian American	1	2%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	23	42%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	10	18%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	17	31%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	3	5%
Race Subtotal	55	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	11	20%
Non-Hispanic/Latina/e/o	44	80%
Ethnicity Subtotal	55	100%
Gender (all Extrapolated per executive order)	#	%
Female	15	27%
Male	40	73%
Gender Subtotal	55	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	2	4%

Bus Station	0	0%
Encampment	5	10%
Park	4	8%
Parking Lot	0	0%
Street	17	35%
Tent/Shed	10	21%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	9	19%
Other	1	2%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	3	6%
Family Disruption	17	35%
Health Issues	1	2%
Jail Release	1	2%
Justice Involved	0	0%
Lack of Income	4	8%
Medical Discharge	0	0%
Mental Illness	3	6%
Other	14	29%
Runaway	0	0%
Substance Use Disorder	1	2%
Unemployment	4	8%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	6	13%
Domestic Violence	4	8%
HIV AIDS	2	4%
Mental Health Issue	12	25%
Physical Disability	10	21%
PTSD	12	25%
Substance Use Disorder	14	29%
Traumatic Brain Injury	6	13%
Developmental Disability	8	17%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	23	48%
First Time Homeless (self-report)	13	27%
Pet Owner	11	23%
Foster Care Experience	2	4%
Formerly Incarcerated	8	17%
Health Insurance Coverage	34	71%
Veterans (extrapolated)	4	8%

City of Murrieta		
Unsheltered	Sheltered	Total
14	185	199
Unsheltered		
Category	#	% of City US Count
Interviewed	10	71%
Observed	4	29%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	0	0%
Adults (25-34)	1	7%
Adults (35-44)	4	29%
Adults (45-54)	6	43%
Adults (55-64)	2	14%
Adults (65+)	1	7%
Ages Subtotal	14	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	2	14%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	1	7%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	2	14%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	9	64%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	14	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	2	14%
Non-Hispanic/Latina/e/o	12	86%
Ethnicity Subtotal	14	100%
Gender (all Extrapolated per executive order)	#	%
Female	4	29%
Male	10	71%
Gender Subtotal	14	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	0	0%

Bus Station	0	0%
Encampment	2	20%
Park	0	0%
Parking Lot	0	0%
Street	2	20%
Tent/Shed	2	20%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	4	40%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	2	20%
Family Disruption	0	0%
Health Issues	2	20%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	1	10%
Medical Discharge	0	0%
Mental Illness	0	0%
Other	3	30%
Runaway	0	0%
Substance Use Disorder	2	20%
Unemployment	0	0%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	3	30%
Domestic Violence	1	10%
HIV AIDS	0	0%
Mental Health Issue	1	10%
Physical Disability	3	30%
PTSD	2	20%
Substance Use Disorder	3	30%
Traumatic Brain Injury	2	20%
Developmental Disability	1	10%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	6	60%
First Time Homeless (self-report)	1	10%
Pet Owner	2	20%
Foster Care Experience	0	0%
Formerly Incarcerated	3	30%
Health Insurance Coverage	7	70%
Veterans (extrapolated)	4	40%

City of Norco		
Unsheltered	Sheltered	Total
5	16	21
Unsheltered		
Category	#	% of City US Count
Interviewed	4	80%
Observed	1	20%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	0	0%
Adults (25-34)	3	60%
Adults (35-44)	0	0%
Adults (45-54)	0	0%
Adults (55-64)	2	40%
Adults (65+)	0	0%
Ages Subtotal	5	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	1	20%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	1	20%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	3	60%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	5	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	1	20%
Non-Hispanic/Latina/e/o	4	80%
Ethnicity Subtotal	5	100%
Gender (all Extrapolated per executive order)	#	%
Female	1	20%
Male	4	80%
Gender Subtotal	5	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	1	25%

Bus Station	0	0%
Encampment	0	0%
Park	0	0%
Parking Lot	0	0%
Street	3	75%
Tent/Shed	0	0%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	0	0%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	1	25%
Eviction	0	0%
Family Disruption	1	25%
Health Issues	0	0%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	0	0%
Medical Discharge	0	0%
Mental Illness	0	0%
Other	1	25%
Runaway	0	0%
Substance Use Disorder	0	0%
Unemployment	1	25%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	1	25%
Domestic Violence	0	0%
HIV AIDS	0	0%
Mental Health Issue	0	0%
Physical Disability	0	0%
PTSD	1	25%
Substance Use Disorder	0	0%
Traumatic Brain Injury	0	0%
Developmental Disability	0	0%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	1	25%
First Time Homeless (self-report)	1	25%
Pet Owner	2	50%
Foster Care Experience	0	0%
Formerly Incarcerated	1	25%
Health Insurance Coverage	3	75%
Veterans (extrapolated)	2	50%

City of Palm Desert		
Unsheltered	Sheltered	Total
9	5	14
Unsheltered		
Category	#	% of City US Count
Interviewed	2	22%
Observed	7	78%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	0	0%
Adults (25-34)	4	44%
Adults (35-44)	3	33%
Adults (45-54)	1	11%
Adults (55-64)	1	11%
Adults (65+)	0	0%
Ages Subtotal	9	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	4	44%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	1	11%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	3	33%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	1	11%
Race Subtotal	9	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	1	11%
Non-Hispanic/Latina/e/o	8	89%
Ethnicity Subtotal	9	100%
Gender (all Extrapolated per executive order)	#	%
Female	0	0%
Male	9	100%
Gender Subtotal	9	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	1	50%

Bus Station	0	0%
Encampment	0	0%
Park	0	0%
Parking Lot	0	0%
Street	1	50%
Tent/Shed	0	0%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	0	0%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	0	0%
Family Disruption	0	0%
Health Issues	0	0%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	1	50%
Medical Discharge	0	0%
Mental Illness	0	0%
Other	1	50%
Runaway	0	0%
Substance Use Disorder	0	0%
Unemployment	0	0%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	0	0%
Domestic Violence	0	0%
HIV AIDS	0	0%
Mental Health Issue	2	100%
Physical Disability	1	50%
PTSD	0	0%
Substance Use Disorder	1	50%
Traumatic Brain Injury	0	0%
Developmental Disability	0	0%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	2	100%
First Time Homeless (self-report)	0	0%
Pet Owner	0	0%
Foster Care Experience	0	0%
Formerly Incarcerated	1	50%
Health Insurance Coverage	2	100%
Veterans (extrapolated)	0	0%

City of Palm Springs		
Unsheltered	Sheltered	Total
88	74	162
Unsheltered		
Category	#	% of City US Count
Interviewed	46	52%
Observed	42	48%
Age (all) Extrapolated	#	%
Children (≤17)	1	1%
Youth (18-24)	4	5%
Adults (25-34)	16	18%
Adults (35-44)	18	20%
Adults (45-54)	27	31%
Adults (55-64)	14	16%
Adults (65+)	8	9%
Ages Subtotal	88	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	1	1%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	1	1%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	13	15%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	15	17%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	1	1%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	56	64%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	1	1%
Race Subtotal	88	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	16	18%
Non-Hispanic/Latina/e/o	72	82%
Ethnicity Subtotal	88	100%
Gender (all Extrapolated per executive order)	#	%
Female	24	27%
Male	64	73%
Gender Subtotal	88	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	3	7%

Bus Station	2	4%
Encampment	2	4%
Park	8	17%
Parking Lot	0	0%
Street	22	48%
Tent/Shed	0	0%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	9	20%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	1	2%
Domestic Violence	3	7%
Eviction	3	7%
Family Disruption	9	20%
Health Issues	2	4%
Jail Release	0	0%
Justice Involved	1	2%
Lack of Income	10	22%
Medical Discharge	0	0%
Mental Illness	1	2%
Other	7	15%
Runaway	2	4%
Substance Use Disorder	4	9%
Unemployment	3	7%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	19	41%
Domestic Violence	7	15%
HIV AIDS	5	11%
Mental Health Issue	13	28%
Physical Disability	15	33%
PTSD	18	39%
Substance Use Disorder	13	28%
Traumatic Brain Injury	7	15%
Developmental Disability	11	24%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	3	7%
Chronically Homeless	25	54%
First Time Homeless (self-report)	14	30%
Pet Owner	8	17%
Foster Care Experience	1	2%
Formerly Incarcerated	9	20%
Health Insurance Coverage	37	80%
Veterans (extrapolated)	10	22%

City of Perris		
Unsheltered	Sheltered	Total
56	44	100
Unsheltered		
Category	#	% of City US Count
Interviewed	42	75%
Observed	14	25%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	2	4%
Adults (25-34)	13	23%
Adults (35-44)	14	25%
Adults (45-54)	10	18%
Adults (55-64)	12	21%
Adults (65+)	5	9%
Ages Subtotal	56	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	2	4%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	16	29%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	17	30%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	21	38%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	56	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	17	30%
Non-Hispanic/Latina/e/o	39	70%
Ethnicity Subtotal	56	100%
Gender (all Extrapolated per executive order)	#	%
Female	9	16%
Male	47	84%
Gender Subtotal	56	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed

Abandoned Building	1	2%
Bus Station	1	2%
Encampment	16	38%
Park	1	2%
Parking Lot	1	2%
Street	6	14%
Tent/Shed	6	14%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	9	21%
Other	1	2%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	2	5%
Domestic Violence	0	0%
Eviction	2	5%
Family Disruption	6	14%
Health Issues	1	2%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	8	19%
Medical Discharge	0	0%
Mental Illness	0	0%
Other	13	31%
Runaway	2	5%
Substance Use Disorder	1	2%
Unemployment	7	17%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	10	24%
Domestic Violence	0	0%
HIV AIDS	1	2%
Mental Health Issue	4	10%
Physical Disability	7	17%
PTSD	8	19%
Substance Use Disorder	7	17%
Traumatic Brain Injury	6	14%
Developmental Disability	4	10%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	14	33%
First Time Homeless (self-report)	23	55%
Pet Owner	13	31%
Foster Care Experience	0	0%
Formerly Incarcerated	7	17%
Health Insurance Coverage	33	79%
Veterans (extrapolated)	10	24%

City of Riverside		
Unsheltered	Sheltered	Total
614	473	1087
Unsheltered		
Category	#	% of City US Count
Interviewed	257	42%
Observed	357	58%
Age (all) Extrapolated	#	%
Children (≤17)	1	0%
Youth (18-24)	16	3%
Adults (25-34)	145	24%
Adults (35-44)	194	32%
Adults (45-54)	128	21%
Adults (55-64)	105	17%
Adults (65+)	25	4%
Ages Subtotal	614	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	12	2%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	1	0%
Asian or Asian American	10	2%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	128	21%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	194	32%
Middle Eastern or North African	5	1%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	1	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	1	0%
White	246	40%
White & Hispanic/Latina/e/o	6	1%
Multi-Racial & Hispanic/Latina/e/o	1	0%
Multi-Racial (not Hispanic/Latina/e/o)	9	1%
Race Subtotal	614	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	203	33%
Non-Hispanic/Latina/e/o	411	67%
Ethnicity Subtotal	614	100%
Gender (all Extrapolated per executive order)	#	%
Female	161	26%
Male	453	74%
Gender Subtotal	614	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	20	8%

Bus Station	5	2%
Encampment	27	11%
Park	10	4%
Parking Lot	2	1%
Street	138	54%
Tent/Shed	24	9%
Tiny Home (without basic amenities)	0	0%
Under Bridge	4	2%
Vehicle	23	9%
Other	4	2%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	3	1%
Domestic Violence	8	3%
Eviction	11	4%
Family Disruption	43	17%
Health Issues	6	2%
Jail Release	5	2%
Justice Involved	5	2%
Lack of Income	44	17%
Medical Discharge	1	0%
Mental Illness	8	3%
Other	54	21%
Runaway	5	2%
Substance Use Disorder	35	14%
Unemployment	29	11%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	51	20%
Domestic Violence	20	8%
HIV AIDS	2	1%
Mental Health Issue	74	29%
Physical Disability	67	26%
PTSD	89	35%
Substance Use Disorder	109	42%
Traumatic Brain Injury	52	20%
Developmental Disability	34	13%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	5	2%
Chronically Homeless	145	56%
First Time Homeless (self-report)	91	35%
Pet Owner	50	19%
Foster Care Experience	1	0%
Formerly Incarcerated	48	19%
Health Insurance Coverage	173	67%
Veterans (extrapolated)	42	16%

City of San Jacinto		
Unsheltered	Sheltered	Total
55	55	110
Unsheltered		
Category	#	% of City US Count
Interviewed	45	82%
Observed	10	18%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	0	0%
Adults (25-34)	7	13%
Adults (35-44)	21	38%
Adults (45-54)	14	25%
Adults (55-64)	10	18%
Adults (65+)	3	5%
Ages Subtotal	55	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	1	2%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	1	2%
Asian or Asian American	2	4%
Asian or Asian American & Hispanic/Latina/e/o	3	5%
Black, African American, or African	0	0%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	15	27%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	29	53%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	2	4%
Multi-Racial (not Hispanic/Latina/e/o)	2	4%
Race Subtotal	55	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	18	33%
Non-Hispanic/Latina/e/o	37	67%
Ethnicity Subtotal	55	100%
Gender (all Extrapolated per executive order)	#	%
Female	14	25%
Male	41	75%
Gender Subtotal	55	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	4	9%

Bus Station	0	0%
Encampment	22	49%
Park	1	2%
Parking Lot	0	0%
Street	12	27%
Tent/Shed	1	2%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	5	11%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	1	2%
Domestic Violence	3	7%
Eviction	6	13%
Family Disruption	9	20%
Health Issues	2	4%
Jail Release	1	2%
Justice Involved	0	0%
Lack of Income	7	16%
Medical Discharge	1	2%
Mental Illness	1	2%
Other	10	22%
Runaway	0	0%
Substance Use Disorder	1	2%
Unemployment	3	7%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	14	31%
Domestic Violence	4	9%
HIV AIDS	0	0%
Mental Health Issue	18	40%
Physical Disability	16	36%
PTSD	17	38%
Substance Use Disorder	19	42%
Traumatic Brain Injury	9	20%
Developmental Disability	11	24%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	24	53%
First Time Homeless (self-report)	10	22%
Pet Owner	10	22%
Foster Care Experience	0	0%
Formerly Incarcerated	18	40%
Health Insurance Coverage	31	69%
Veterans (extrapolated)	4	9%

City of Temecula		
Unsheltered	Sheltered	Total
37	35	72
Unsheltered		
Category	#	% of City US Count
Interviewed	26	70%
Observed	11	30%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18-24)	1	3%
Adults (25-34)	7	19%
Adults (35-44)	10	27%
Adults (45-54)	9	24%
Adults (55-64)	7	19%
Adults (65+)	3	8%
Ages Subtotal	37	100%
Race (all) Extrapolated	#	
American Indian, Alaska Native, or Indigenous	1	3%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	2	5%
Asian or Asian American	2	5%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	3	8%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	7	19%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	20	54%
White & Hispanic/Latina/e/o	2	5%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	37	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	11	30%
Non-Hispanic/Latina/e/o	26	70%
Ethnicity Subtotal	37	100%
Gender (all Extrapolated per executive order)	#	%
Female	10	27%
Male	27	73%
Gender Subtotal	37	100%
Living Situation - Night before the Count - (Interview Only)	#	% of Interviewed
Abandoned Building	0	0%

Bus Station	0	0%
Encampment	4	15%
Park	2	8%
Parking Lot	0	0%
Street	11	42%
Tent/Shed	2	8%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	7	27%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	1	4%
Eviction	2	8%
Family Disruption	7	27%
Health Issues	0	0%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	2	8%
Medical Discharge	0	0%
Mental Illness	1	4%
Other	7	27%
Runaway	0	0%
Substance Use Disorder	3	12%
Unemployment	3	12%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	6	23%
Domestic Violence	0	0%
HIV AIDS	1	4%
Mental Health Issue	4	15%
Physical Disability	4	15%
PTSD	10	38%
Substance Use Disorder	9	35%
Traumatic Brain Injury	7	27%
Developmental Disability	4	15%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	15	58%
First Time Homeless (self-report)	14	54%
Pet Owner	0	0%
Foster Care Experience	0	0%
Formerly Incarcerated	9	35%
Health Insurance Coverage	20	77%
Veterans (extrapolated)	4	15%

City of Wildomar		
Unsheltered	Sheltered	Total
10	25	35
Unsheltered		
Category	#	% of City US Count
Interviewed	9	90%
Observed	1	10%
Age (all) Extrapolated	#	%
Children (≤17)	0	0%
Youth (18–24)	0	0%
Adults (25–34)	4	40%
Adults (35–44)	1	10%
Adults (45–54)	2	20%
Adults (55–64)	1	10%
Adults (65+)	2	20%
Ages Subtotal	10	100%
Race (all) Extrapolated	#	%
American Indian, Alaska Native, or Indigenous	0	0%
American Indian, Alaska Native, or Indigenous & Hispanic/Latina/e/o	0	0%
Asian or Asian American	0	0%
Asian or Asian American & Hispanic/Latina/e/o	0	0%
Black, African American, or African	0	0%
Black, African American, or African & Hispanic/Latina/e/o	0	0%
Hispanic/Latina/e/o	7	70%
Middle Eastern or North African	0	0%
Middle Eastern or North African & Hispanic/Latina/e/o	0	0%
Native Hawaiian or Pacific Islander	0	0%
Native Hawaiian or Pacific Islander & Hispanic/Latina/e/o	0	0%
White	3	30%
White & Hispanic/Latina/e/o	0	0%
Multi-Racial & Hispanic/Latina/e/o	0	0%
Multi-Racial (not Hispanic/Latina/e/o)	0	0%
Race Subtotal	10	100%
Ethnicity (all) Extrapolated	#	%
Hispanic/Latina/e/o	7	70%
Non-Hispanic/Latina/e/o	3	30%
Ethnicity Subtotal	10	100%
Gender (all Extrapolated per executive order)	#	%
Female	2	20%
Male	8	80%
Gender Subtotal	10	100%
Living Situation – Night before the Count – (Interview Only)	#	% of Interviewed
Abandoned Building	0	0%
Bus Station	0	0%
Encampment	2	22%
Park	0	0%
Parking Lot	0	0%
Street	1	11%

Tent/Shed	1	11%
Tiny Home (without basic amenities)	0	0%
Under Bridge	0	0%
Vehicle	5	56%
Other	0	0%
Primary Reasons for Homelessness - (Interview only)	#	% of Interviewed
Asked to Leave	0	0%
Domestic Violence	0	0%
Eviction	2	22%
Family Disruption	4	44%
Health Issues	0	0%
Jail Release	0	0%
Justice Involved	0	0%
Lack of Income	3	33%
Medical Discharge	0	0%
Mental Illness	0	0%
Other	0	0%
Runaway	0	0%
Substance Use Disorder	0	0%
Unemployment	0	0%
Challenges / Barriers - (Interview only, not mutually exclusive)	#	% of Interviewed
Chronic Health Issue	1	11%
Domestic Violence	2	22%
HIV AIDS	0	0%
Mental Health Issue	3	33%
Physical Disability	0	0%
PTSD	1	11%
Substance Use Disorder	1	11%
Traumatic Brain Injury	0	0%
Developmental Disability	1	11%
Special Interest Questions - (Interview only)	#	% of Interviewed
Persons in Households with Children	0	0%
Chronically Homeless	2	22%
First Time Homeless (self-report)	4	44%
Pet Owner	2	22%
Foster Care Experience	0	0%
Formerly Incarcerated	3	33%
Health Insurance Coverage	6	67%
Veterans (extrapolated)	0	0%