

2017 DC WOMEN'S NEEDS ASSESSMENT REPORT

**The Women's Task Force of the
District of Columbia Interagency Council on Homelessness**



**D.C.
WOMEN'S NEEDS
ASSESSMENT**

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INTRODUCTION

On a given night, 882 unaccompanied (single) women are experiencing homelessness in the District of Columbia. Unaccompanied women make up forty-three (43%) percent of all women and over one-quarter (26%) of all unaccompanied persons who are experiencing homelessness in the District according to the 2017 Point-in-Time (PIT) Count for the District of Columbia¹. As an individual sub-population, the experiences and needs of women who are struggling with homelessness on their own differs from those of unaccompanied men and of women who are experiencing homelessness with their families.

This assessment takes a deeper look at the characteristics, common experiences of homelessness, and the influences that have led to women’s current housing situations. The report is intended to aid DC’s efforts to identify ways to better address women’s needs, focus resources more appropriately, and continue to strengthen collaborations between women’s providers in the homeless and domestic violence systems. Women’s experiences of violence and trauma during their lifetimes and during their current experiences of homelessness highlighted in this report point to the critical need for a prompt and comprehensive response.

BACKGROUND

In the spring of 2017, the steering committee of the Women’s Task Force of the District of Columbia Interagency Council on Homelessness (ICH) together with The Community Partnership for the Prevention of Homelessness (TCP) conducted an analysis on gender and household type using data from the 2017 PIT Count. This initial examination revealed several distinct differences in experiences and characteristics between unaccompanied women and men. In particular, that unaccompanied women experience mental illness and domestic violence at far greater rates than their male counterparts do.

It is general practice to report data by household type – unaccompanied or family households – yet women make up only a quarter of the entire unaccompanied population. This unequal distribution bears out in statistically “diluting” women’s characteristics and experiences when considering the population at large. As an example, in the 2017 PIT Count, twenty percent (20%) of all unaccompanied persons reported a history of domestic violence – yet when looking at that group by gender, forty-two percent (42%) of women report this experience compared with only one percent (1%) of men.

The 2017 DC Women’s Needs Assessment is a research project conducted by The Women’s Task Force of the District of Columbia ICH. The goal of the project was to gather information on the experiences, characteristics, and needs of unaccompanied women who are experiencing homelessness or housing instability while living in the District and to use the information provided by the women surveyed to make better-informed decisions and enhance the programs that serve this population.

This report presents findings from 434 surveys collected between August 26 and September 8, 2017 from unaccompanied women who were literally homeless or who were experiencing housing instability during that time. It includes responses from women staying in: (1) Emergency Shelters (ES), Transitional Housing Programs (TH), or Safe Houses (SH) for survivors of domestic violence; (2) an unsheltered location (“on the streets”); and (3) staying with friends or with unknown people because they need a place to stay, or “couch surfing.” This is the first comprehensive assessment of the population ever completed in the District.

METHODOLOGY

Survey

A work group assembled from participating organizations of the Women’s Task Force of the ICH and other stakeholder groups developed the survey instrument in early summer 2017. The workgroup’s members included representatives from the fields of: mental health; domestic violence and trauma; women’s homeless services; academia; as well as representatives from District government agencies and funders of homeless services. The survey work group convened three times over the course of five weeks, with additional inquiry conducted by work group participants to gather recommendations from the women with whom they work. Additionally, the work group reviewed intake assessment tools, Point-in-Time Count survey questions, and survey instruments used in similar research that has been conducted in other communities. The final draft survey instrument was tested with a group of women with lived experiences of homelessness at N Street Village; recommendations made by the group were incorporated into the final paper survey (Appendix A).

The final paper survey instrument was then replicated in *Qualtrics* survey software to make available an online and app-based version². Participating organizations had the choice to administer the survey through any of these three options: pen and paper; online at a computer; or by accessing the survey on a tablet or mobile phone through the *Qualtrics* app. The paper survey instrument was produced in English, with telephone translation services available to surveyors, as needed, through the *LanguageLine Solutions*³ hotline. Translation services include all six languages that make up the District of Columbia threshold: Amharic, Chinese, French, Korean, Spanish, and Vietnamese, in addition to many others. The online and app-based survey options include another language aid built into these platforms that can automatically translate individual questions into: Spanish, French, Korean, Vietnamese, and Chinese, further aiding a surveyor to effectively engage with potential respondents.

The survey begins with four qualifying questions to screen respondents in order to target the intended population and to limit duplication. The survey was open to any person who currently identifies as a woman, regardless of sex at birth, and those who were unsure or were questioning their gender identity at the time of the survey. Instructions were given to surveyors to continue all surveys administered in women’s-only programs, irrespective of the respondent’s current gender identity.

After the qualifying questions, the survey consists of 44 multiple-choice questions and 7 self-response questions, with an additional 27 possible follow-up questions. The questions are arranged in 11 sections: 1) Basic Information and Demographics; 2) Homeless Services; 3) Access to Housing; 4) Basic Needs; 5) Trauma & Violence; 6) Physical Health; 7) Mental Health; 8) Systems Involvements; 9) Veterans; 10) Education, Income, and Employment; and 11) Feedback and Service Linkage. In order to encourage participation and increase the rate of response for individual questions, respondents were informed that the survey would be anonymous before they agreed to participate and no personally-identifying information, other than an age or birthdate, was asked of the respondent.

In addition to the survey instrument, a “Survey Response Card” (Appendix B) that lists four answer choices: a) Yes; b) No; c) Don’t Know; d) Decline, was included in surveyor kits. Surveyors were instructed to use the Survey Response Card as a tool during the section on *Violence and Trauma* and to offer it at any time during the survey where it could aid a respondent in answering a question. The Survey Response Card provided the respondent an option to point to their answer choice or say the letter instead of verbalizing an answer choice. The intent of this supplementary tool was to improve the rate of response on individual sensitive questions and for the survey overall.

A resource list that included information on general homeless services, women-specific services, and crisis hotlines was also included in surveyor kits. The Women’s Needs Assessment work group compiled the resource list to inform survey respondents about services available for mental health needs, clinics for health services, domestic violence and trafficking organizations, substance abuse centers, and many other services provided in the District of Columbia Continuum of Care. Surveyors were instructed to recommend resources at the end of every survey interaction based on experiences or needs that might have been communicated during the survey or requested from the participant (Appendix C).

Data Collection

An important component of the methodology was to select for skilled surveyors and to provide a thorough surveyor training. Staff from participating organizations were the primary surveyors. Preference was given to highly skilled staff who, in some cases, had rapport with the intended respondents (i.e. her case manager or someone who she trusts) and who were experienced in providing trauma-informed care. Participating organizations also recruited peer surveyors from their programs. Peer surveyors were women with lived experiences of homelessness who had previously provided leadership within her peer group and who would be someone other women would trust. Additionally, The Community Partnership recruited surveyors from MSW programs at local universities in order to increase capacity of some participating organizations.

Surveyors were required to participate in one of two available webinar trainings presented on August 23 and 24, 2017. The webinar trainings provided an overview of the project, stepped-through the survey instrument, trained on survey protocols, and presented methods for using a trauma-informed lens during survey interactions.

Survey administration commenced on August 26 and concluded on September 8, 2017. Surveys were conducted at fourteen (14) ES/TH/SH programs, eleven (11) drop-in centers and meal programs (including two library locations), and nine (9) street-based outreach teams. 2017 Point-in-Time population data was used to guide convenience sampling of the unsheltered and sheltered population. A complete list of participating organizations can be found in Appendix D.

Analysis

The findings presented here are self-reported responses from 434 surveys conducted through convenience sampling of unaccompanied, self-identifying women who were experiencing homelessness or housing-instability at the time of survey. The range of ages sampled are between 17 and 78. An additional 23 surveys were submitted but were eliminated due to ineligibility – such as being permanently-housed, not identifying as a woman, or experiencing homelessness with their family – or significant incompleteness.

To derive descriptive statistics of the demographics and characteristics of the sample, univariate analyses were conducted. Multivariate analyses were used to examine traits at the subpopulation level (e.g. chronically-homeless), other sub group characteristics, or when looking at data by age groups. Item non-response is excluded from all analyses.

Limitations

As in any research project, there are limitations including:

- A long survey can impact survey completion and thoroughness.
- The length of the survey made it potentially more difficult in outreach to unsheltered women.
- The qualifying questions could have been overly exclusionary or confusing.
- On questions related specifically to the experiences of services or housing, having service provider staff as surveyors may have introduced bias.

WHERE ARE WOMEN STAYING THE NIGHT?

Survey respondents were asked where they stayed most of the nights in the past 30 days and were placed in the corresponding categories:

Sheltered:

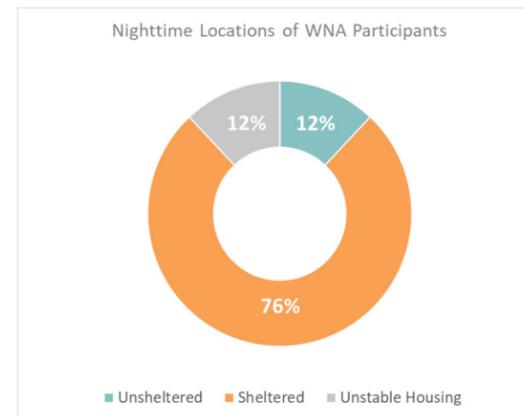
Three-quarters (76%) stayed in an Emergency Shelter, Transitional Housing, or Safe House for survivors of domestic violence.

Unsheltered:

Twelve percent (12%) of the sample population stayed in a place not meant for human habitation, this includes those staying “on the streets” or in any other place not used as a regular sleeping accommodation for humans beings, including a car, park, abandoned building, bus or train station, or camping ground.

Unstable Housing:

Twelve percent (12%) were unstably-housed most nights in the preceding month. This category includes women who were staying temporarily with friends or were staying with unknown people just because they needed a place to stay (i.e. “couch-surfing”). Women who stayed in an institutional setting, such as jail or prison, or were in some other type of residential facility, such as detox/rehab or hospitals were also included in this category.

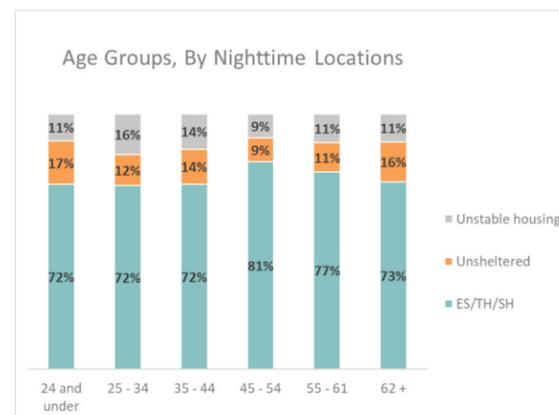


DEMOGRAPHICS

Age

Survey participants range in age from 17 to 78 years old, with a median age of 49 and 60 being the most common age. The distribution of age in the Women’s Needs Assessment sample is similar to that of women surveyed during the 2017 Point-in-Time (PIT) Count where the median age was 52.

While all age groups primarily stay in a shelter, there is some variation in the rates of usage by age groups in each of the three nighttime locations.



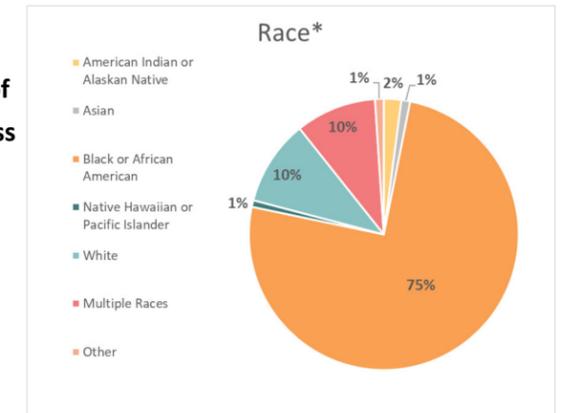
Youth (age 24 years and younger) and women 62 years or older are unsheltered at slightly higher rates than other age groups. Women between the ages of 45 – 54 years old are most likely staying in ES/TH/SH and those who are between the ages of 25 – 34 or 35 – 44 report higher rates of staying in unstable housing than other age groups.

The following sections in this report display results within each age category to highlight when similarities or differences in demographics or needs are present among different age groups of women.

Race and Ethnicity

Black or African American women make up the largest share of all unaccompanied women who are experiencing homelessness or housing instability in the District at seventy-five percent (75%). The distribution of race in the Women’s Needs Assessment is similar to that observed in the 2017 PIT Count.

Information gathered in the PIT Count and the Women’s Needs Assessment compared to official estimates for the District of Columbia indicate that Black or African American women experience higher rates of homelessness and housing instability than women of other races. As Black or African American women make up only fifty-two percent (52%) of all adult women living in the District of Columbia⁴.

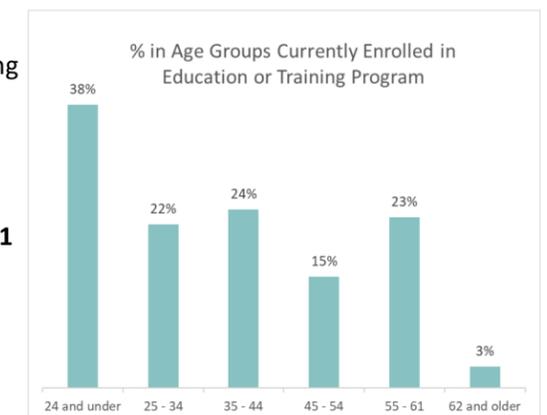


**Race categories in the chart display single race selections alone, all multiple selections of race are included in “multiple races” category.*

In addition to race, six percent (6%) of respondents selected Hispanic, Latina, Latino or Latinx.

Education

One out of five women are enrolled in an education or job training program. While youth (age 24 and under) are, predictably, enrolled at higher rates than other age groups, older women are also seeking to better educate themselves or gain new skills, including nearly **one-quarter of 35 to 44 year olds and of 55 to 61 year olds.**



Employment and Income

Employment rates of the total population of unaccompanied women are low with only **twenty-six percent (26%) of respondents currently employed** in some type of employment, including part-time, full-time, or seasonal work.

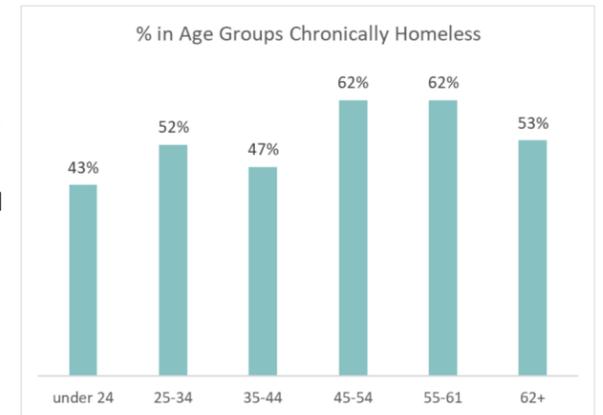
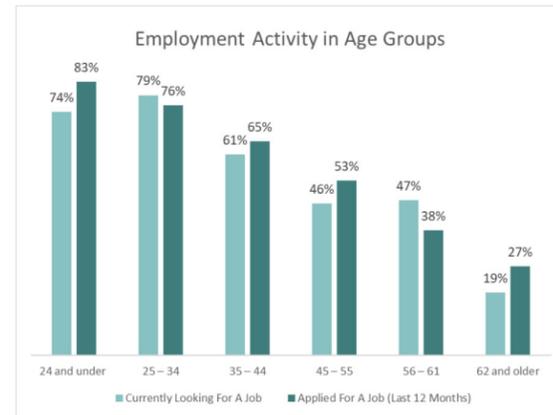
Unemployment notwithstanding, over **half of all respondents are currently seeking employment or a different job (52%)**.

Fifty-five percent (55%) of respondents have applied to a job in the past twelve months.

Not surprisingly, women under the age of 35 are most actively seeking employment, with 3 out of 4 women in that age group currently looking for a job and 4 out of 5 having applied for a job in the past twelve months.

In addition to low employment rates overall, **more than half of respondents (55%) say they are not receiving any cash income benefit**. Of those who are receiving benefits:

- Seventy percent (70%) receive either Social Security Income (SSI), Social Security Disability Income (SSDI), or both;
- Six percent (6%) have income from a pension plan;
- Five percent (5%) receive some type of disability payment (including Interim Disability Assistance and long or short-term disability payments);
- Two percent (2%) receive alimony;
- One percent (1%) receive unemployment benefits; and
- Twenty-one percent (21%) report receiving some other type of income benefit.
- Additionally, eighteen percent (18%) of women report that they are currently waiting for eligibility determination on at least one type of benefit, seventy percent (70%) of those cases are for SSI or SSDI.



Women between the ages of 45 and 61 make up the majority of women experiencing chronic homelessness. Women living on the streets are experiencing higher rates of chronic homelessness relative to the sheltered cohort with sixty percent (60%) of unsheltered women compared to fifty-four percent (54%) of those staying in ES/TH/SH.

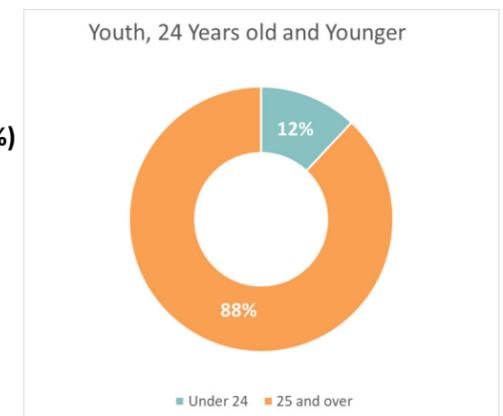
Beyond the federal definition of chronic homelessness, unaccompanied women are experiencing long durations and multiple episodes of homelessness or housing instability. **Seventy-two percent (72%) of survey participants have either been without housing for longer than a year or have had at least four episodes of a loss of housing in the past three years.**

Further, sixty-four percent (64%) of participants surveyed in unstable housing could be considered “chronically unstably-housed”, though they would not meet the federal definition of chronic homelessness.

Youth

Youth (age 24 years old and younger) make up twelve percent (12%) of survey participants. Youth participants were nearly all transition age youth (TAY), between the ages of 18 and 24 years old. Only one unaccompanied minor (under 18) participated in the survey.

- Youth are slightly more likely to be unsheltered than women in other age groups; seventeen percent (17%) of young unaccompanied women report that they are staying on the streets or in some other sort of unsheltered location;
- Forty-three percent (43%) are chronically-homeless;
- Thirty-eight percent (38%) are currently enrolled in some kind of education or training program; and
- Youth are among the age group with the highest rates of earned income, with twenty-nine percent (29%) receiving income from some type of work.



SUBPOPULATIONS

Chronically Homeless

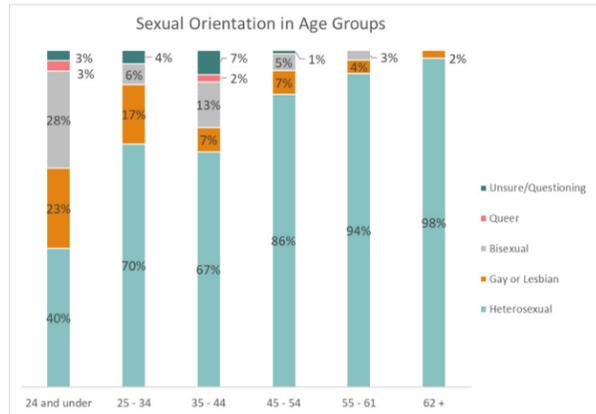
Fifty-five percent (55%) of literally homeless women surveyed in the Women’s Needs Assessment meet the definition for chronic homelessness set by the U.S. Dept. of Housing and Urban Development⁵.

Sexual Orientation

Twenty-one percent (21%) of women are gay or lesbian, bisexual, queer, unsure or questioning their sexual orientation, or are a different sexual orientation than the survey collected.

In an effort to make an inclusive sample, the survey did not specifically ask about transgender identity and was open any person who identifies as a woman. Five (5) women self-identified as transgender in their self-response answers, though this should not be considered the total number of trans women who participated in the survey. It should be assumed that the actual number of transgender women is higher than the number reported here.

- Youth survey participants (age 24 and younger) were much more likely to be a sexual orientation other than heterosexual than any other group.
- Women who are a sexual orientation other than heterosexual were more likely to be staying in a shelter or transitional housing program relative to heterosexual women; eighty-one percent (81%) compared with seventy-five percent (75%). Both groups report similar rates of living in unstable housing arrangements, with thirteen percent (13%) and twelve percent (12%) respectively.
- There are similar rates of chronicity between women who are a sexual orientation other than heterosexual and heterosexual women with fifty-three percent (53%) and fifty-five percent (55%), respectively.



Veterans

Fourteen (14) veterans participated in the Women’s Needs Assessment survey, this is comparable to the number of veterans identified during the 2017 PIT Count. As the survey was anonymous, respondents self-identified as a veteran of any U.S. Armed Force, accordingly, validation of service and discharge status is unconfirmed.

SERVICES	Currently	In the Past	Never	Unknown
Housing Assistance	1	4	7	2
V.A. Benefits or Pension	2	2	8	2
Medical Services	2	4	7	1
Dental Care	2	5	6	1
Mental Health Services	1	2	9	2

- Few female veterans report currently accessing services that they may be eligible for through the Veterans Administration, including housing assistance, benefits or pension, medical services, dental care, or mental health services.
- Only one (1) veteran reports currently accessing all of the V.A. services.
- Self-identified veterans who are not accessing these services most frequently cite ineligibility as the reason.
- Most female veterans indicated that they were staying in ES/TH/SH at the time of participation, with only one (1) staying in an unsheltered location and one (1) in an unstable housing situation.

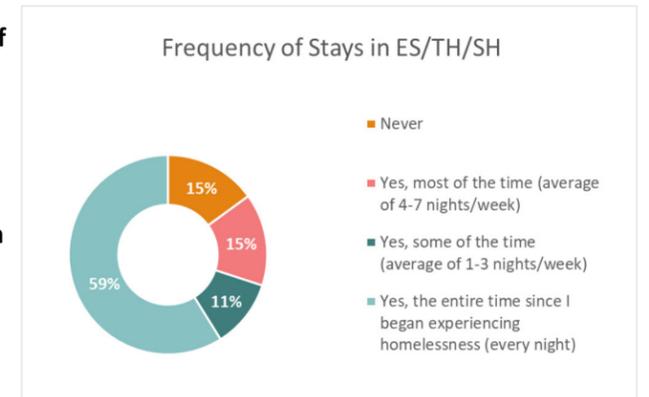
HOMELESS SERVICES AND ACCESS TO HOUSING

Frequency of Stays in Emergency Shelter, Transitional Housing, and Safe Houses

A majority of women (59%) have stayed in some type of sheltered location the entire time that they have been experiencing homelessness.

Of the unsheltered women who were surveyed, sixty-seven percent (67%) say that they have not stayed in an ES/TH/SH program at any point in the last year.

Participants who stay in shelter (at least some of the time) express similar challenges with over-crowding, waitlists, or bed availability and describe being turned away or having to wait several days before getting a bed. Maintaining employment while having to meet time constraints of shelters, including having to line up for overnight beds and abiding by a curfew, is another commonly-reported barrier communicated by a large share of survey participants. Additionally, some lesbian, gay, bisexual, transgender, or participants who are questioning their sexual orientation expressed difficulty in navigating the services landscape to find shelters that they view as safe, affirming, and with available beds.



Why don't women access shelter when they need it? (Listed in order of frequency.)

- It was too crowded
- I didn't feel safe
- Conditions were unhealthy
- I felt stressed about the situation
- Other residents don't maintain good hygiene

WOMEN'S WORDS: What are some of the difficulties you have had when accessing ES, TH, or SH/SH when it was needed?

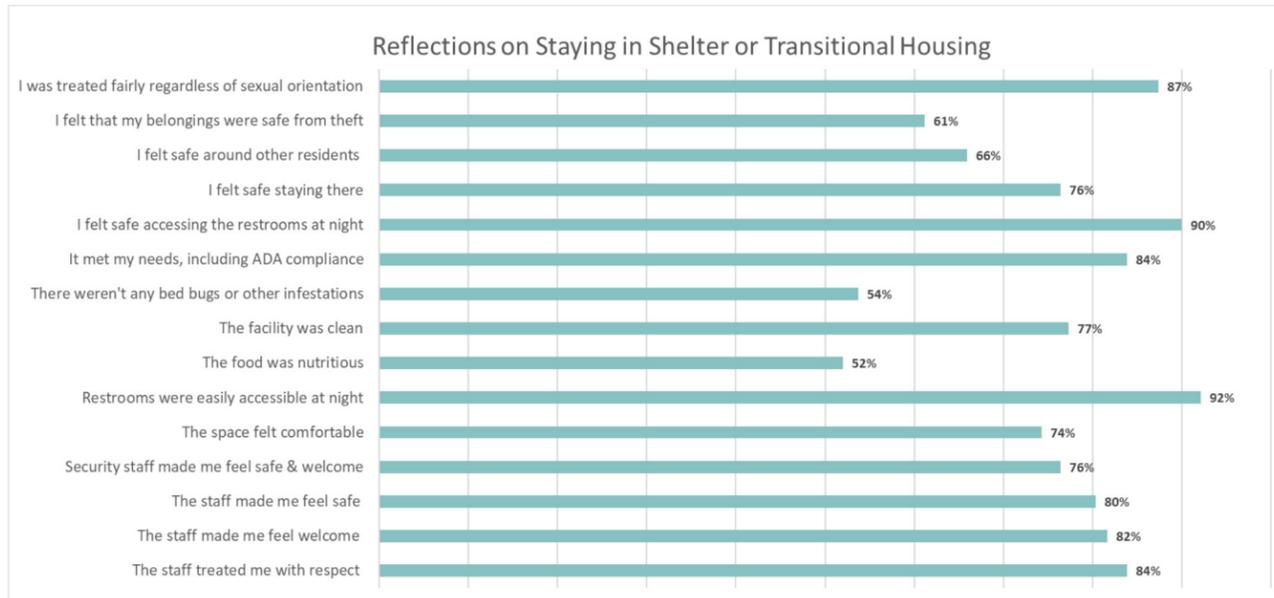
"I didn't know how to go about the process, so I thought I could call, and ask for allotted space, but you have to go and stand in line."

"My difficulties start with me not being stable and having my information together."

"No car or card for the bus so I have to walk for over an hour to get to the shelter."

Reflecting on Services in Emergency Shelter, Transitional Housing, or Safe Houses

In general, women who have stayed in an ES/TH/SH program at some point in the past year reflect positively on those services. **When asked about staff, conditions, and safety** of any of the facilities where they stayed, **three-quarters (or more) of respondents agree on most of the statements.**



- Over eighty percent (80%) of respondents agree that program staff treats them with respect, makes them feel welcome, and safe.
- LGBTQ women, in general, agree that they have been treated fairly regardless of sexual orientation by service provider staff, with only 10% of LGBTQ women disagreeing;
- Eighty-two percent (82%) of all participants feel that the facilities meet their needs; including eighty-three percent (83%) of participants who indicated a chronic health condition or disability.

A few statements were not received as favorably:

- Only about half (52%) of all women agree that foods provided to them are nutritious or that the facility was free of pests, including bedbugs (54%).
- Respondents also indicate a slight distrust of other residents with thirty-nine percent (39%) concerned about theft of their belongings in the facility and around one-third (34%) saying that they did not feel safe around other residents.

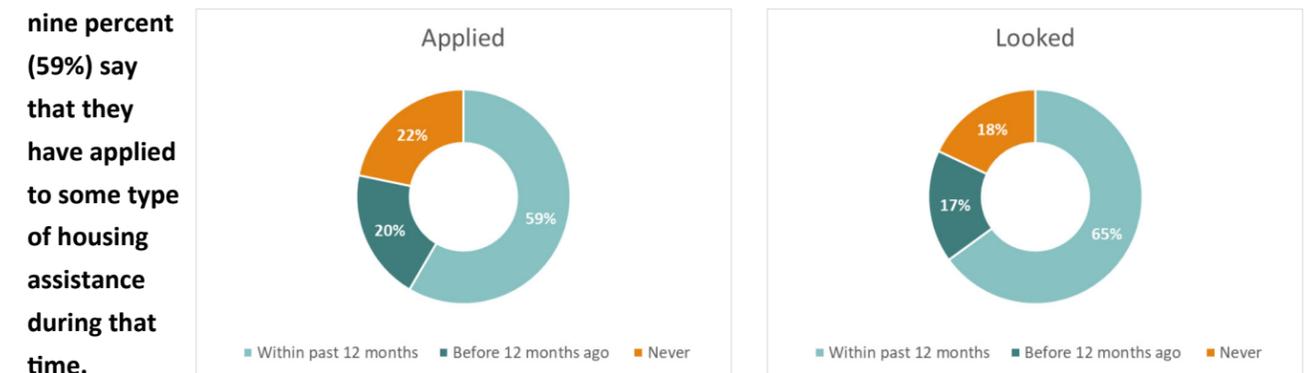
Gender Preference in Services

Women show a strong preference for specific services being provided in a setting with just women as opposed

to one that serves both men and women. **Three out of four women** indicate a preference for at least one service in a women-only setting. Health care, day services, and mental health services were the most frequent selections next to shelter and in that order.

Housing Assistance

In general, women are looking for and applying for housing assistance. In the past twelve months, **sixty-five percent (65%) of women report having looked for any type of housing assistance** (including voucher programs, rapid-rehousing, permanent supportive housing, and other permanent housing programs) and **fifty-nine percent (59%) say that they have applied to some type of housing assistance during that time.**



Women who are looking for and applying for housing resources are not doing it alone. **Seventy-three percent (73%)** say that provider staff has helped them with their search or in completing applications.

Information is crucial to getting women connected to housing resources for which they may be eligible. The most frequently reported reason that women who have not looked or applied for housing resources give is that they simply do not know what to do or where to go.

Reasons women say they haven't looked or applied for housing assistance in the past 12 months (listed in order of frequency):

1. Don't know what to do or where to go
2. Don't think I'm qualified
3. Don't have documentation
4. Too many hoops
5. Don't want housing assistance
6. Don't have the time
7. Currently on a waitlist

Housing Access in General

Women are facing both real and perceived barriers when trying to secure safe and stable housing on their own. In a selection of potential barriers to acquiring housing (whether with assistance or on their own), participants selected "Don't have time to look or apply"; "Don't know what to do or where to go"; and "Keep applying but no one gets back to me" most frequently.

Survival Sex, Rape, and Sex Trafficking

Individuals experiencing homelessness have much higher odds of engaging in survival sex than the population at large⁹. In the Women’s Needs Assessment, **twenty-nine percent (29%) of women report that they have engaged in survival sex in their lifetime**. Additionally, twenty-eight percent (28%) report that they have been forced, threatened or pressured into performing a sex act with another person and thirty-six percent (36%) of those women have been trafficked. Though these data are alarmingly high, it should be assumed that this is still an undercount of homeless women who are engaging in survival sex and those who are being trafficked.

Survival sex: Trading sex for food, money, alcohol or drugs, a place to stay, or any other goods.

Sex trafficking: Being forced, threatened, or pressured into performing a sex act where the perpetrator received payment or something of value in exchange for the act.

Substance Use

Nearly one-third (31%) of survey participants report current or past substance use. The prevalence of substance use is similar among unsheltered, sheltered, and unstably-housed women, though slightly higher among women in a sheltered location.

Eighty-seven percent (87%) of women with a history of substance abuse are survivors of emotional, physical, or sexual abuse by a parent/guardian or intimate partner/spouse. Additionally, **sixty-four percent (64%) have engaged in survival sex.**

Forty-one percent (41%) of women who report issues with substance abuse are not currently receiving any treatment. Of the women who indicate that they are currently receiving some type of treatment, in order to remain sober they primarily cite group meetings, such as Alcoholics/Narcotics Anonymous, or regular appointments with a therapist as their primary need to stay sober. Transportation to these meetings is one of the primary barriers for women with a history of substance abuse.

WOMEN’S WORDS: What supports do you need to stay in recovery?

- Meetings/sponsor/therapist
- Housing
- Transportation to meetings/appointments
- Support networks

Child Welfare System

Fourteen percent (14%) of survey participants have experiences with the child welfare system. **Over half (51%) of those women report that they “aged-out” when they turned 18; two out of three of those who aged-out report that they did not have a place to go and began experiencing homelessness or housing instability after aging-out.**

Justice System

Nearly half of all respondents (48%) have been arrested at some point in their lives, either as a juvenile, an adult, or both. Thirty-eight percent (38%) have spent time in jail or prison.

One-quarter (25%) of women have had at least one recent interaction with the police (in the past 12 months) with total average number of police encounters at 2.5 in the past year. Reasons for interactions vary, but the three most frequently selected reasons are: “I sought help from the police”, “I was stopped or detained”, and “I was arrested or held in custody”, in that order.

HEALTH AND WELLNESS

Mental Health

Seventy-two percent (72%) of survey participants self-report that they are currently experiencing at least one mental health indicator (right).

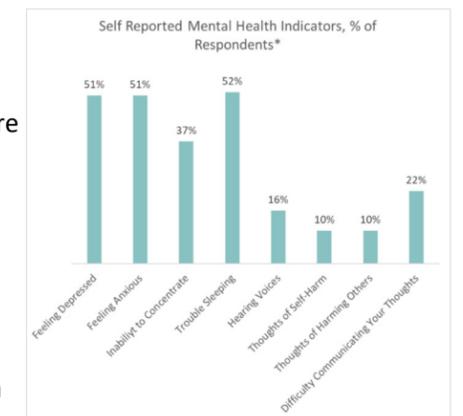
Of those who are experiencing any of those symptoms, twenty-six percent (26%) have not seen a mental health professional about the symptom(s).

Fifty-six percent (56%) of survey participants have been diagnosed by a doctor or other mental health professional with a mental health issue.

This is a higher rate of mental health diagnoses than what was disclosed in the 2017 PIT Count, where only forty-three percent (43%) of women reported a mental health diagnosis. Eighty-six percent (86%) of those who report in the Women’s Needs

Assessment that they have been diagnosed with a mental health condition also say they agree with the diagnosis.

Most women who have been diagnosed with a mental health issue have been prescribed medication



WOMEN’S WORDS: In what ways has mental illness contributed to your homelessness or housing troubles?

“I quit jobs impulsively; I get so depressed that I stay home... and lose my job”

“At one point I couldn't think or function on my own. I needed help. Living on the street with nothing, I couldn't keep appointments or present myself to someone.”

“When I am depressed and anxious I often feel like I have nowhere to turn so I can isolate and not take care of myself, beat myself up, it's like a cycle I can't get out of. Just keep beating myself up and then I don't care about anything.”

to manage that issue (91% of respondents). While most of the women say they can afford or easily get that medication (91% of respondents with a prescription), **one out of four women with prescriptions say that they are not taking their medication regularly.**

There is a high prevalence of historical experiences of emotional, physical, sexual abuse by a parent/guardian or intimate partner/spouse among women who have been diagnosed with a mental health issue; **eighty-six percent (86%) of women with a mental health diagnosis** report having at least one of those experiences.

One out of three women, including those women who did not report a mental health diagnosis, **have been hospitalized for a mental health issue at some point in the past**, either voluntarily or involuntarily.

Women with a mental health diagnosis say they prefer mental health services to be in a setting with just women – second only to shelter.

Physical Health

Women have a moderate view of their health overall. When asked to rate four main areas of health on a five-point scale (excellent, very good, good, fair, poor), “good” was the most frequently selected rating in each area.

	Physical Health	Dental Health	Vision	Hearing
24 and under	Excellent (40%)	Excellent (30%)	Excellent (33%)	Excellent (40%)
25 - 34	Good (43%)	Good (37%)	Good (39%)	Excellent / Good (37% / 37%)
35 - 44	Good (49%)	Good (52%)	Good (40%)	Good (46%)
45 - 54	Fair (35%)	Good (34%)	Fair (31%)	Good (39%)
55 - 61	Good (41%)	Good (45%)	Fair (41%)	Good (42%)
62 +	Good / Fair (31% / 31%)	Fair (32%)	Fair (36%)	Good (39%)

Not-surprisingly, perception of health varies by age group. Youth (age 24 and under) most frequently chose “excellent” in each of the four categories and “fair” being selected for any area only after the age of 45.

While most women have a good perception of their health overall, **over half of women (57%) have been diagnosed with an ambulatory, hearing, vision, or cognitive disability, or chronic medical condition.**

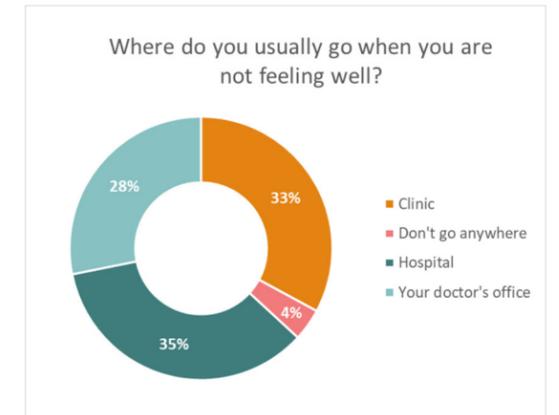
Diagnoses of disabilities and medical conditions vary by age; in general, all age groups report higher rates of cognitive disabilities and chronic medical conditions.

Notably, while youth (ages 24 years old and younger) have a high opinion of their physical health, overall, forty-four percent (44%) report having a chronic medical condition.

Access to medical care is generally high and women are using it when they need it. When asked where they go when they are not feeling well sixty-one percent (61%) usually access medical care at a clinic or their doctor’s

office. With only around one-third (35%) using hospital emergency rooms and four percent (4%) reporting that they do not go anywhere

Younger women tend to use hospital emergency rooms as healthcare at higher rates than older women do. Forty-three percent (43%) of youth and women under the age of 34 most frequently go to hospitals when they are not feeling well, compared to thirty percent (30%) of women 62 years or older.



About half (52%) of survey participants have had a Pap smear or mammogram within the past year. Of those who received abnormal test results, eighty-five percent (85%) received follow-up treatment for the abnormal results.

Treating chronic illness requires a stable environment and structure not afforded to women who are experiencing homelessness. Though women seem to be well-connected to healthcare services, **over half (54%) have been to an emergency room at least once in the past year** for reasons ranging from manageable conditions – such as blood pressure or diabetes management – to injuries sustained on the street.

Of those women with a diagnosis of a disability or chronic medical condition, **eighty-six percent (86%) report that they have a regular doctor or a clinic that they go to when they need medical care**, over three-quarters (77%) indicate that can easily get or afford their medication, and eighty-one percent (81%) say they take those medications regularly.

WHAT WOMEN SAY THEY NEED

TOP TEN RESOURCES OR SERVICES OTHER THAN HOUSING (listed in order of frequency):

1. Employment and training opportunities
2. Healthcare
3. Educational programs
4. Mental healthcare
5. Access to affordable healthy foods
6. Storage facilities for possessions
7. Legal services
8. Shelter beds/emergency shelter
9. Drug or alcohol recovery programs
10. Programs for survivors of domestic violence/intimate partner violence

WOMEN'S WORDS: What do women need?

"A place for women to run to 24/7 to escape abusive situations."

"Services for college-educated women need to build skills to reenter the workplace."

"Programs that need volunteers [sh]ould reach out to the women in shelters. It would give them more purpose in their lives and may lead to meeting people who would hire them. It may even help those with addiction or mental illness stay sober and focus on others' needs."

"Activities like yoga, music, and theater are nice. Improve the quality of programs."

"Services to help clear up debt/credit in order to be considered for an apartment."

"Classes to help with finances so I can plan for the future."

"Help paying security deposit and 1st month's rent."

"Mock interview services, laundry services, more transportation services integrated into shelter."

"A support system that listens."

"[Don't] leave out women in transitional housing, when that ends where do we go?"

CONCLUSION

Women are extremely vulnerable to continued violence against them while they are homeless. Almost two-thirds (63%) of women with histories of violence and trauma also report at least one act of violence against them during this current period of homelessness or housing instability. There is no longer a distinction (if there ever was one) between women experiencing "domestic violence" and women who are seeking safe housing because they are homeless. Women's experiences of violence or threats to their safety - including domestic and intimate partner violence (emotional, physical or sexual abuse), violence perpetrated by a parent, guardian or other relative (emotional, physical or sexual abuse), dating violence or stalking - must be addressed in order to support their individual efforts to end their homelessness.

Women are clear about what they need. They need safe housing that better meets their specific challenges of trauma, mental illness, and/or substance abuse. Housing options must include emergency shelter for when they are fleeing domestic violence or facing immediate homelessness as well as service-enriched transitional housing and permanent supportive housing to support their efforts to end their homelessness. Programs must work from a trauma-informed model and need to provide specific trauma services. To gain sustainable income, women need access to employment and training opportunities. To build solid and healthy futures, they want access to mental health services, day programs, treatment services and health care where they feel safe. Housing and services must be designed to meet the needs of all women including young women, senior women, lesbian and bisexual women, transgender women and non-binary and gender nonconforming individuals.

Without additional resources to address these critical needs, women will continue to be highly vulnerable to violence and trauma and long bouts of homelessness. This report points to real opportunities to strengthen women's homeless and domestic violence systems, offering women chances to make important changes in their lives and elevating the effectiveness of our whole system.

NOTES

¹ The Point-in-Time (PIT) Count is an annual enumeration and survey of all persons experiencing homelessness on a single night during the last ten days in January. A PIT Count is required of all communities receiving federal funds from the U.S. Dept. of Housing and Urban Development (HUD) for homeless assistance programs. To view data for the District of Columbia Continuum of Care, visit: <http://www.community-partnership.org/facts-and-figures>

² https://survey.co1.qualtrics.com/jfe/preview/SV_79A3AO17FWFKF9z?Q_CHL=preview

³ www.LanguageLine.com

⁴ U.S. Census Bureau (2016). Selected Race and Sex Characteristics, 2016 American Community Survey 1-year estimates. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_B01001B&prodType=table

⁵ <https://www.hudexchange.info/resources/documents/Defining-Chronically-Homeless-Final-Rule.pdf>

⁶ Khoury, L., Tang, Y. L., Bradley, B., Cubells, J. F., & Ressler, K. J. (2010). Substance use, childhood traumatic experience, and Posttraumatic Stress Disorder in an urban civilian population. *Depression and Anxiety*, 27(12), 1077–1086. Retrieved from: <http://doi.org/10.1002/da.20751>

⁷ Schneider, R., Baumrind, N., & Kimerling, R. (n.d.). Exposure to child abuse and risk for mental health problems in women. Retrieved from: <https://www.ncbi.nlm.nih.gov/pubmed/18064973>

⁸ <https://www.ncjrs.gov/pdffiles1/nij/grants/211976.pdf>

⁹ Ulloa, E., Salazar, M., & Monjaras, L. (2016, July). Prevalence and Correlates of Sex Exchange Among a Nationally Representative Sample of Adolescents and Young Adults. Retrieved from: <https://www.ncbi.nlm.nih.gov/pubmed/27266400>

Chronically-Homeless – An individual with a disability (physical, mental, or developmental), chronic medical condition, or chronic substance abuse (alcohol or drugs) who is either unsheltered or in an emergency shelter and who has been homeless continuously for at least 12 months, or has had at least four separate episodes of homelessness in the last 3 years, where the combined occasions total a length of time of at least 12 months.

Emergency Shelter – Any facility, the primary purpose of which is to provide temporary shelter for homeless persons in general or for specific populations of people experiencing homelessness, includes “low barrier” shelter.

Literally-homeless – An individual who lacks a fixed, regular, and adequate nighttime residence. Includes: an individual who has a primary nighttime residence that is a public or private place not meant for human habitation or is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs). Does not include individuals who are in an unstable-housing arrangement.

Point-in-Time (PIT) Count – An annual enumeration and survey of sheltered and unsheltered homeless persons on one night during the last ten days in January. A PIT Count is required by the U.S. Dept. of Housing and Urban Development for any jurisdiction receiving federal homelessness assistance funding through the Continuum of Care Program.

Safe Houses – Some emergency shelter facilities specifically for survivors of domestic violence.

Sex Trafficking – When a commercial sex act is induced by force, threats, or other coercion. This definition is consistent with the U.S. Victims of Trafficking and Violence Protection Act (TVPA) of 2002.

Survival Sex – When a person in extreme need trades sex for: food, money, alcohol or drugs, a place to stay, or any other goods.

Transitional Housing – A project that is designed to provide housing and appropriate supportive services to homeless persons to facilitate movement to independent living within 24 months, or a longer period approved by HUD.

Trauma – Any experience that causes mental or emotional stress, physical injury, or threatens one’s safety. Experiences discussed in this report include: being a victim of a crime; having been robbed or burglarized; having been assaulted or physically attacked; having been sexually assaulted; having a history of emotional, physical, or sexual abuse by an intimate partner/spouse or a parent or guardian; being forced or pressured into doing something under threat of violence; having an experience with dating violence; having been stalked; being a survivor of sex trafficking; and having to engage in survival sex.

Unaccompanied – Experiencing homelessness as a single person and not with other family members.

Unsheltered – An individual experiencing homelessness whose nighttime residence is in a public or private place not meant for human habitation, including: on the streets, in a tent/RV/car, at a bus stop or metro station, in an abandoned building, in a campground, etc.

Unstable Housing (Unstably-housed) – “Couch-surfing” or staying with friends or family due to a loss of housing or no resources. Temporary; might be on a night-to-night basis or for an extremely limited time period.

Violence – A broad term meaning an act of physical force or power, threatened or actual, against another

person that results in or has a high likelihood of resulting in injury, death, psychological harm, or any other kind of harm. Perpetrators of violence can be a domestic or intimate partner, a parent or guardian, or someone else known or unknown to the victim. Types of violence discussed in this report include: physical assault and abuse (hitting, pushing, shoving, punching, etc.), sexual assault or abuse (unwanted or forced sexual activity), emotional and psychological abuse (name-calling, keeping the victim from contacting family and friends, withholding money, preventing them from getting a job, etc.), dating violence, and stalking.

Violence, Domestic or Intimate Partner – Abusive behavior by an intimate partner or spouse. Domestic violence can be physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes any behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone. This is consistent with the definition used by the U.S. Dept. of Justice.

Violence Perpetrated by a Parent or Guardian — Abusive behavior by a parent or guardian, including physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes any behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone.

Woman – Any person whose gender identity is female, includes transgender women.

Youth – A sub-population that includes any person who is a *Transitional Age Youth* or an *Unaccompanied Minor*.

Transitional Age Youth (TAY) – A young adult who is at least 18 years old and no older than 24 year old. Any adult under the age of 25.

Unaccompanied Minor – A child under the age of 18 years old who is experiencing homelessness by themselves, without a parent or guardian.



PRE-SURVEY

"Hi! I'm insert your name here. We are conducting a survey of women today. I represent insert name of provider here and we're working with a group of other service providers and residents to learn ways to increase and improve housing and services for women in the District."

What language do you prefer or feel most comfortable communicating in?

- English
- Other (write language) _____ *Use language card and call interpretation service to continue the survey in you cannot communicate in their preferred language*

"If you chose to participate in the survey, it should only take about 20 minutes and is completely confidential. This means that I'm not going to ask your name and no one will know that you participated. Some of the questions on the survey are very personal and ask some sensitive information about your past experiences and your health. You do not have to answer any of the questions that make you uncomfortable, just let me know if you do not wish to answer and we'll move on. Also, the survey is completely voluntary, you can end it at any time."

"I know you probably get asked a lot of questions from different people. Taking this survey will help other women. We will use the results of the survey to design services and programs to meet the needs of women. We want to learn directly from women who use those services, because you know better than anyone what you need."

"We have a flyer with all of the existing services for women in this area, which you can take whether you complete a survey or not. If you complete the survey we have a small gift to thank you for helping in this process."

Would you like to participate?

- YES** *Read the following and then continue to next page:
"Great! First I will have to ask just four questions to see if we can continue to the survey"*
- NO** *Thank them for their time and offer the flier with resources, ask if they are in need of something in particular and point them to the appropriate resource*

QUALIFYING QUESTIONS – Circle result and use the following answers

DO NOT CONTINUE “Thank you for answering that, today we’re only doing surveys of single women who are experiencing homelessness or don’t have stable housing. Even though we can’t do the survey, would you like a flier with resources that might help you?” *Ask if they are looking for something in particular and point out that resource*

ELIGIBLE “Thank you for answering those questions, now we can go through the survey and once it’s finished I have a thank you gift to give you for taking time out of your day to help us.”

1. Do you identify as a woman? *If conducting surveys in a women’s service provider, always continue.*

- Yes
- Unsure/Questioning
- No *Do not continue*
- Declined

2. Have you already completed this survey this week?

- No
- Yes *Do not continue*
- Declined

3. Where have you spent most of your nights in the last 30 days? *Wait for response, and listen to what they share - then select the ONE choice closest to their answer. If asked to clarify, ask, “Have you spent more than two weeks out of the past month in the same place? If so, where was that?”*

- | | | |
|---|---|--|
| <input type="radio"/> Emergency shelter | <input type="radio"/> “Couch-surfing” or staying with friends/family due to loss of housing or no resources | <input type="radio"/> Jail/prison/detention facility |
| <input type="radio"/> Transitional housing | <input type="radio"/> With someone you don’t know because you need a place to stay | <input type="radio"/> Other _____ |
| <input type="radio"/> Safe house/safe haven | <input type="radio"/> Foster care/group home | <input checked="" type="radio"/> Your own apartment or home <i>Do not continue</i> |
| <input type="radio"/> Hotel/motel temporarily due to loss of housing | <input type="radio"/> Hospital/detox | <input type="radio"/> With parents/guardians or roommates in a permanent situation |
| <input type="radio"/> Any outside situation or place not meant as shelter (parks/sidewalks/metro station/bridge/car/RV, etc.) | <input type="radio"/> Psychiatric Facility | <input type="radio"/> Don’t know |
| | | <input type="radio"/> Declined |

4. Most of the time in the past 30 days, did you stay by yourself or did you live with others (i.e. children, parents, siblings, etc.)? *If with others, ask to describe. If respondent describes a family arrangement where they are a head of household and responsible for children/parents/siblings then they are not “single”. Staying with friends does qualify and you should continue the survey.*

- By yourself
- With others *Do not continue*
- Don’t know
- Declined

If eligible, continue survey on next page

BASIC INFORMATION AND DEMOGRAPHICS

1. Is this the first time you have been in a situation where you do not have your own housing?

- Yes *Skip to 2*
- No

1a. How many separate times has it been in the past 3 years?

- 1-3
- 4 or more
- Don’t know
- Declined

2. This time, has it been more than a year (12 months)?

- Yes
- No
- Don’t know
- Declined

3. Have you stayed in the District most of the time that you have been in this situation?

- Yes
- No
- Don’t know
- Declined

4. What is your birthdate? ___/___/___ **OR**
What is your age? _____

5. What race or ethnicity do you identify with? *Choose all that apply*

- White
- Black or African-American
- American Indian or Alaskan Native
- Asian
- Native Hawaiian or other Pacific Islander
- Hispanic or Latino/a
- Multiple Races
- Other (Specify): _____
- Don’t know
- Declined

6. Which of the following best represents your sexual orientation?

- Straight (heterosexual)
- Gay or lesbian (homosexual)
- Bisexual
- Queer
- Unsure/Questioning
- Other (specify): _____
- Don’t know
- Decline

HOMELESS SERVICES

7. During the past 12 months, have you stayed in shelter, transitional housing, or a safe haven/house in the District?

- Yes, the entire time since I began experiencing homelessness
- Yes, most of the time (average of 4 – 7 nights out of a week or equivalent)
- Yes, some of the time (average of 1 – 3 nights out of a week or equivalent)
- No *Skip to question 11*
- Don’t know
- Declined

8. Can you tell me about any difficulties you had getting a place in shelter, transitional housing, or a safe haven/house during this time? *Write response*

9. Which of these were true for you when you stayed in any of those in the past year? *Circle yes or no*

The staff treated me with respect	YES	NO	Shelter security treated me with respect	YES	NO
The staff made me feel welcome	YES	NO	The shelter was clean	YES	NO
The staff made me feel safe	YES	NO	There weren’t bedbugs or other infestations	YES	NO
The space felt comfortable	YES	NO	I felt safe around other shelter residents	YES	NO
Restrooms were easily accessible at night	YES	NO	I felt that my belongings were safe from theft	YES	NO
I felt safe accessing restrooms at night	YES	NO	I was treated fairly, regardless of sexual orientation	YES	NO
The food in the shelter was nutritious	YES	NO	The shelter was able to meet my needs	YES	NO
I felt safe in the shelter	YES	NO	(e.g. wheelchair, interpreter, aka ADA compliant)		

10. Is there anything else that you would like to tell me about the conditions or your experiences in shelter, transitional housing, or a safe house/ safe haven? *Write answer*

11. If there were any times that you did not go to a shelter, transitional housing or a safe house/ safe haven when you needed it in the past year, what were some of the reasons that you did not go? *Choose all that apply*

- Staff did not make me feel welcome
- The rules didn't work for me
- The conditions were unhealthy
- I couldn't enter with my partner or kids
- I couldn't enter with my pet
- It could not meet my needs (ADA compliant)
- It was too crowded
- I didn't feel safe
- Other residents did not maintain good hygiene
- I worried that I would come in contact with someone who would hurt me
- I felt stressed about the situation
- I just didn't like it
- Other: _____

12. In general, what services do you prefer be provided in a setting with just other women, versus a setting where men and women are together?

- Shelter
- Day programs or drop-in centers
- Meal programs
- Health clinics
- Mental health services
- Group activities
- Other _____

ACCESS TO HOUSING

13. In the past 12 months and in your lifetime, have you:

	Past 12 months	Lifetime	<i>Skip to question 14</i>		
			Never	Declined	Don't know
Looked for housing assistance? (vouchers or subsidized units)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Applied for housing assistance? (vouchers or subsidized units)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Been denied housing assistance?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lost a voucher (e.g. Section 8) or rapid rehousing because you couldn't find an apartment that met your needs/preference?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13a. In the past 12 months, has someone from an organization helped you look for/apply for housing? *Choose all that apply*

- Yes, look for housing assistance
- Yes, apply for housing assistance
- No, neither
- Don't know
- Declined

13b. Which of these apply to your current search for housing assistance?

- On a waiting list for a housing unit
- Have a housing voucher (e.g. Section 8) or rapid rehousing but cannot find housing that meets need/preference
- Neither applies to my current search
- Don't know
- Declined

14. If you have not looked/applied for housing assistance in the past 12 months, why not? *Choose all that apply*

- Don't know what to do or where to go
- Don't have the time to look or apply
- Too many hoops (too complicated)
- Don't have documentation (I.D., birth certificate, etc.)
- Don't think I'm qualified
- Been denied in the past
- Currently on a waitlist
- Don't want housing assistance
- Not applicable (has looked or applied for housing assistance)
- Other: _____

15. Have you taken the VI-SPDAT or SPDAT survey in the past? *The VI-SPDAT & SPDAT are housing assessments to determine appropriate housing for an individual experiencing homelessness.*

- Yes
 - No
 - Don't know
 - Declined
- Ask the respondent if she would be interested in learning more, after completing the survey, show her on the resource card where she can request the VI-SPDAT*

16. What are some of the difficulties that you face in getting your own housing? *Choose all that apply*

- Don't know what to do or where to go
- Don't have the time to look or apply
- Don't have access to internet to help in my search
- Don't have access to email or phone
- Don't have documentation (I.D., birth certificate, etc.)
- Discrimination or stigma from landlords
- Keep applying but no one gets back to me
- I have to focus on my health and wellbeing
- Can't find a unit that I like/is safe/good for my health and wellbeing
- I'm worried I won't be able to maintain my housing
- Other _____

BASIC NEEDS

17. How difficult is it for you to access:

	Extremely	Very	Somewhat	Not Difficult	Don't know/ Declined
A safe and clean restroom when you need it?	<input type="radio"/>				
A safe and clean shower when you need it?	<input type="radio"/>				
Healthy foods for your dietary needs (i.e. for diabetes, cholesterol)?	<input type="radio"/>				
Medicine when you need it?	<input type="radio"/>				
Birth control when you need it?	<input type="radio"/>				
<i>Check "don't know/declined" if do not need.</i>					
Pads/tampons when you need them?	<input type="radio"/>				
<i>Check "don't know/declined" if do not need.</i>					

TRAUMA & VIOLENCE

Make sure that the respondent is safe from immediate threats of violence before asking the next questions. If you feel the situation is not safe to ask questions about domestic or intimate partner violence, select "Safety concern" for questions. Offer to move to a more private location if the interview is taking place in a public area. Please use the response card.

DEFINITIONS:

Violence/physical abuse can include physical assault (hitting, pushing, shoving, etc.), sexual abuse (unwanted or forced sexual activity), and stalking.

Emotional abuse can include name-calling or putdowns, keeping a partner from contacting their family or friends, withholding money, stopping a partner from getting or keeping a job.

18. Since the start of this episode of homelessness or housing insecurity have you been:

	Yes	No	Don't know	Declined	Safety Concern
Burglarized (having someone break into your space or take your property)	<input type="radio"/>				
Robbed (having something taken by someone who threatened violence)	<input type="radio"/>				
Assaulted or physically attacked (hitting, punching, shoving, etc.)	<input type="radio"/>				
Sexually assaulted or abused (unwanted or forced sexual activity, rape)	<input type="radio"/>				
Victim of a crime because of sexual orientation/gender identity	<input type="radio"/>				
Victim of any other crime	<input type="radio"/>				
Been forced to do something because someone threatened you with violence	<input type="radio"/>				

19. In your lifetime, have you ever experienced any of the following forms of violence or abuse? *Choose all that apply*
Use the definitions provided at the beginning of the section to clarify each type of violence.

- Emotional abuse by parent, guardian, or relative
- Emotional abuse by intimate partner or spouse
- Physical abuse by parent, guardian, or relative
- Physical abuse by intimate partner or spouse
- Sexual abuse by parent, guardian, or relative
- Sexual abuse by intimate partner or spouse
- Dating violence
- Stalking
- None of the above
- Don't know
- Declined
- Safety concern**

20. Is violence currently the cause of your homelessness? *You left or were forced out of your home because you were not safe from abuse or violence: domestic, intimate partner, dating violence, stalking, emotional abuse, etc.*

- Yes
- No
- Don't know *Skip to question 21*
- Declined
- Safety concern**

20a. Do you know where you can get help? *Offer to show the respondent the DV resources on the resource list.*

- Yes
- No
- Don't know
- Declined
- Safety concern**

21. Have you ever traded sex for money, alcohol or drugs, a place to stay, food, or any other goods?

- Yes
- No
- Don't know
- Declined
- Safety concern**

22. Have you ever been forced, threatened, or pressured into performing a sex act with another person?

- Yes
- No
- Don't know *Skip to question 23*
- Declined
- Safety concern**

22a. Did the person(s) that forced you receive payment or anything of value in exchange for this act?

- Yes
- No
- Don't know
- Declined
- Safety concern**

23. If you ever experienced any type of abuse or violence, but did not receive help, what were some of the reasons that you could not get the help you needed at that time? *Choose all that apply*

- Didn't know who to contact or where to go
- Didn't know who I could trust
- Didn't have a phone to call for help
- Afraid that the abuse or violence would get worse
- Afraid that someone else would be hurt if you looked for help
- Afraid that the person hurting or abusing you would be arrested or put in jail
- Other reason _____
- Don't know
- Declined
- Safety concern**

24. Would you like to share what you need to be safe in your current situation?

Thank the respondent for sharing her experiences with you, remind her that the survey will be used to help other women and you know that it can be hard to talk about past or current trauma.

IMPORTANT: If the respondent has shared experiences of trauma and violence, help guide her through the resources that are available to her. If you feel that she is in immediate danger, call 911.

PHYSICAL HEALTH

25. How would you rate these areas of your health in general?

	Excellent	Very Good	Good	Fair	Poor	Don't know
Physical Health	<input type="radio"/>					
Dental	<input type="radio"/>					
Vision	<input type="radio"/>					
Hearing	<input type="radio"/>					

26. Have you ever been told by a medical professional that you have any of these conditions/issues?

	Yes	<i>If all in this in the box, skip to question 27</i>		
		No	Don't know	Declined
Ambulatory disability (having serious difficulty walking or climbing stairs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vision disability (blind or having serious difficulty seeing, even with glasses)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hearing disability (deaf or having serious difficulty hearing)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cognitive disability (difficulty remembering, concentrating, or making decisions)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chronic medical condition (diabetes, heart condition, asthma, cancer, HIV/AIDs etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26a. If you have any of the above:

	Yes	No	Don't know	Declined
Do you have a regular doctor or a clinic that you go to?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are you able to easily get or afford any medicine you need?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you take the medications that you need regularly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26b. What are the challenges that you face in getting appropriate treatment for your condition(s)?

27. Where do you usually go for healthcare or when you're not feeling well?

- Hospital/ER
- Clinic
- Your doctor's office
- VA medical clinic
- Don't go anywhere
- Other _____

28. In the past 12 months, have you gone to the emergency room (ER) or hospital?

- Yes
- No
- Don't know *Skip to question 29*
- Declined

28a. If yes, In the past 12 months, how many times have you been to the ER? _____ time(s)
 28b. What was (were) the primary reason(s) for going to the ER? _____
 28c. In the past 12 months, how many times have you been hospitalized as an in-patient (staying in hospital overnight not in the emergency room)? _____ time(s)
 28d. What was (were) the primary reason(s) for staying in the hospital? _____

29. Are you currently pregnant?

- Yes; how many months? _____
- No
- Don't know *Skip to question 30*
- Declined

	Yes	No	Don't know	Declined
29a. Do you go for regular check-ups?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are you able to easily get or afford any medicine and pre-natal care that you need?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29b. If no to either of the above, what are the challenges that you face in getting appropriate pre-natal care?	_____			

30. In the past 12 months have you had a mammogram or a pap smear?

- Yes
- No
- Don't know *Skip to question 31*
- Declined

30a. Did you have an **abnormal** pap smear or mammogram?
 Yes, abnormal pap smear
 Yes, abnormal mammogram
 Yes, both
 No
 Don't know
 Declined

30b. Were you able to get follow-up treatment for the abnormal results?
 Yes
 No; explain why: _____
 Don't know
 Declined

31. Do you currently or have you ever had any problems with alcohol or drugs?

- Yes
- No
- Don't know *Skip to question 32*
- Declined

31a. In the past 12 months have you:

	Yes	No	Don't know	Declined
Been to an emergency room for alcohol or drug overdose?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shared needles with other people?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Been to a detox facility or hospital for treatment of drugs/alcohol?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

31b. Are you currently in recovery or receiving treatment for alcohol or drug use?

- Yes
- No
- Don't know
- Declined

31c. If you are in recovery, what resources do you need to remain in recovery? (i.e. housing, transportation to meetings, etc.)

MENTAL HEALTH

32. Are you currently experiencing any of the following?

	Yes	No	Don't know	Declined
Feeling depressed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling anxious	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inability to concentrate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trouble sleeping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hearing voices (internal stimuli)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thoughts of self-harm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thoughts of harming others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty communicating your thoughts to others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

32a. Have any of these symptoms made it difficult for you to access or maintain housing?

- Yes
- No
- Don't know
- Declined

32b. Have you ever met with a therapist, psychiatrist, or case manager about any of those things?

- Yes
- No
- Don't know
- Declined

33. Has a therapist, doctor, or psychiatrist ever diagnosed you with a mental health issue? For example, bi-polar disorder, depression, schizophrenia, etc.

- Yes
- No
- Don't know *Skip to question 35*
- Declined

	Yes	No	Don't know	Declined
33a. Do you agree with that diagnosis?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Have you been prescribed medication?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Have you been able to get or afford the medication?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you take the medication regularly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

33b. If no to any of the above, explain: _____

34. Have you ever been hospitalized for mental health issues in the past – including against your will?

- Yes, voluntarily; _____ time(s)
- Yes, involuntarily; _____ time(s)
- No
- Don't know
- Declined

35. Are you currently or have you previously been connected to a mental health agency? Like Community Connections, MBI, or the McClendon Center?

- Yes
- No
- Don't know *Skip to question 36*
- Declined

35a. Are you on an ACT team? A community treatment team that provides a special kind of case management in which a client is seen multiple times per week by an interdisciplinary team of professionals including nurses, psychiatrists, social workers, peer specialists, and rehabilitation specialists, rather than just having one assigned case worker.

- Yes
- No
- Don't know
- Declined

36. Do you feel like you have a social support network (a group of people or friends to help you)?

- Yes
- No
- Don't know
- Declined

37. Do you often wish you had someone to talk to about your feelings or symptoms?

- Yes
- No
- Don't know
- Declined

38. What would be most helpful to you in dealing with the symptoms you just told me about?

39. In what ways has mental illness contributed to your homelessness or housing troubles?

SYSTEMS INVOLVEMENT

40. Were you ever in foster care or a group home when you were a kid?

- Yes
- No
- Don't know *Skip to question 41*
- Declined

40a. Did you “age out” of foster care or a group home when you turned 18?

- Yes
- No
- Don't know
- Declined

40b. When you aged out, did you have a stable place of your own to move into, or did you begin experiencing homelessness or “couch surfing” because you didn’t have a place to go?

- Stable housing
- Experienced homelessness or couch surfing
- Don't know
- Declined

41. At any point in your life, have you ever:

	Yes, as a Juvenile (under 18)	Yes, as an Adult (Over 18)	No	Declined	Don't know
Been arrested for any reason?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spent time in jail or prison?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

42. Have you had any interactions with the police in the past 12 months?

- Yes
- No
- Don't know *Skip to question 43*
- Declined

42a. How often did you interact with the police in the past 12 months?

- _____ *Write number of times*
- Don't know
- Declined

42b. What was the context of your police interaction(s)? *Listen to response and choose all that apply*

- I was stopped/questioned/detained
- I received a citation or ticket
- I was arrested or held in custody
- Law enforcement “raided” where I was staying
- I experienced an inappropriate or abusive interaction with an officer (i.e. physical force, sexual harassment)
- I felt like I was a criminal for being homeless
- I sought help from the police
- Someone I know committed violence against me
- Someone I don't know committed violence against me
- I filed a police report
- I filed an order of protection
- I was with a family member/friend who experienced one of the above
- Other: _____
- Declined

VETERANS

43. Have you ever served in the U.S. Armed Forces (Army, Air Force, Navy, Marine Corps, or Coast Guard)?

- Yes
- No
- Don't know *Skip to question 45*
- Declined

44a. Are you currently or have you ever received any of these services from the VA?

	Currently	<i>Write reason from list below</i>		Reason
		Received in Past	Never Received	
Housing assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____
Veteran's Administration benefits or pension	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____
Medical services (clinics, doctors, hospitals)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____
Dental care services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____
Mental health services (psychiatric)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____

Reasons for never accessing or for ending service:

- | | |
|--|-------------------------------------|
| a. Not eligible | f. Don't trust the VA |
| b. Don't know where to go or how to sign up | g. Don't like the services |
| c. Process is too complicated | h. Some other reason <i>(write)</i> |
| d. Waitlists are too long | i. Don't know |
| e. Feel (felt) unwelcome or uncomfortable accessing this service at the VA | j. Declined |

EDUCATION, INCOME & EMPLOYMENT

44. Are you currently enrolled in school or a training program?

- Yes; describe _____
- No
- Don't know
- Declined

45. Are you currently working somewhere?

- Yes; describe _____
- No
- Don't know
- Declined

46. Are you looking for a better or different job or additional work?

- Yes
- No
- Don't know
- Declined

47. Have you applied for any jobs in the last 12 months?

- Yes
- No
- Don't know
- Declined

48. Do you receive any cash benefits? *Choose all that apply*

- | | |
|--|-------------------------------------|
| <input type="radio"/> SSI (Supplemental Security Income) | <input type="radio"/> Unemployment |
| <input type="radio"/> SSDI (Social Security Disability Income) | <input type="radio"/> Workers Comp. |
| <input type="radio"/> IDA (Interim Disability Assistance) | <input type="radio"/> Other _____ |
| <input type="radio"/> Pension | <input type="radio"/> No |
| <input type="radio"/> Alimony | <input type="radio"/> Don't Know |
| <input type="radio"/> Short Term or Long Term Disability | <input type="radio"/> Declined |

49. Are you currently waiting on eligibility determination for any type of benefit mentioned above?

- Yes: _____ *Write benefit(s) type*
- No
- Don't Know
- Declined

FEEDBACK & SERVICE LINKAGES

50. In your opinion, other than housing, what are the top three things that you need to improve your situation? You can list anything you can think of that might make things easier or better for you right now, or in the future.

You may use the list below as a guide. Use the resource flier to help her locate things that might be accessible to her.

1. _____ 2. _____ 3. _____

BASIC NEEDS

Shelter beds/Emergency shelter
 Safe house/haven (safe shelter for survivors of violence)
 Access to free, clean bathrooms
 Access to free, clean showers
 Storage for personal possessions

HEALTH

Healthcare
 Mental healthcare
 Access to affordable, healthy foods

PROGRAMS

Drug or alcohol recovery programs
 Programs for survivors of domestic/intimate partner violence
 Employment and training opportunities
 Legal assistance
 Educational programs
 Access to free technology/internet
 Access to a free cell phone

RECREATION

Parks and community gardens
 Enrichment activities (music, art, theatre)

SYSTEMS

Trainings for shelter staff (trauma, conflict resolution, mental health, gender identity)
 Trauma-informed resources and services
 Police trainings (trauma, crimes against women, mental health, gender identity)

OTHER

Write in the space above

51. Is there anything else you can tell us about existing housing and services for women in the District, ideas you have to improve housing and services, or other issues in the community? *Offer to let the respondent write her response on the back of this page, otherwise document her response below or on the back of the page.*

SURVEYOR USE ONLY
 Surveyor Name: _____ Surveyor Organization: _____
 Intersection or Location of Interview: (Be specific!) _____

SURVEY RESPONSE CARD

Point to your answer or say the letter.

A. YES

B. NO

C. DON'T KNOW

**D. DECLINED
(NO ANSWER)**

WOMEN'S SERVICES IN WASHINGTON, DC

SHELTER HOTLINE
1-800-535-7252 info/transportation to shelter.

WOMEN'S SHELTER
Harriet Tubman Emergency Shelter (202) 795-9966
(DC General) 1910 Massachusetts Ave SE,
Open 7pm to 7am

Nativity Shelter (202) 487-2012
6010 Georgia Ave NW, Open 7pm to 7am

***Patricia Handy Place for Women** (202) 733-5378
810 SP St NW, Intake between 4pm to 7pm

***SOME Place for Abused & Neglected Elderly**
Ages 60 & up (202) 797-8806 x1311

HOUSING
D.C. Housing Authority (202) 535-1000
1133 North Capitol St. NE. *Only for those on waitlist*

Emergency Rental Assistance Program (ERAP)
Catholic Charities (202) 338-3100
Comm. Partnership for Prevention of Homelessness
(202) 312-5510
Greater Washington Urban League (202) 265-6200
Housing Counseling Services (202) 697-7006
Salvation Army (202) 332-5000 and (202) 678-9771
UPO (202) 238-4600

FOOD & MEAL PROGRAMS
Find food in your area - www.dcfoundation.org

Martha's Table (202) 328-8008
2114 14th St. NW, Monday – Friday, 10am-5pm

McKenna's Wagon
Sundays, 2nd & H St. NW, 5:30-6:00pm; 15th & K St.
NW, 6:00-6:30pm; Pennsylvania Ave, NW & 19th St.
NW, 5:20-5:45pm

***Miriam's Kitchen**
2401 Virginia Ave. NW (basement) every week
Western Presbyterian Church
Breakfast: Monday – Friday, 6:30am-8am
Dinner: Monday – Friday, 4:45pm-6:45pm

***So Others Might Eat (SOME)**
71 "O" St. NW
Breakfast: Every day of the week, 7-8:30am
Lunch: Every day of the week, 11am-1pm

Thrive DC
1525 Newton St. NW - St. Stephen's Episcopal Church
Breakfast: Monday – Friday, 8:30am-11am (all)
Dinner: Monday – Saturday, 3pm-6pm (women/families)

Capital Area Foodbank (202) 644-6800

DROP-IN DAY CENTERS
***Friendship Place Welcome Center** (202) 364-1419
4713 Wisconsin Ave. NW
Mon/Wed/Thurs, 8:30-11:30am & 1-3pm

***Women's Day Center at N Street** (202) 939-2976
1333 N St. NW
Monday – Friday, 7am-4pm, Sat & Sun 9am-4pm

MENTAL HEALTH
Community Connections (202) 546-1512
Comprehensive Psychiatric Emergency Program
(CPEP) (888) 793-4357 or (202) 561-7000
Dept. of Behavioral Health Hotline (888) 793-4357
McClendon Center (202) 737-6191
Neighbors Consejo (202) 234-6855

HEALTH CARE
***Unity Health Care at CCNV Shelter** (202) 508-0500
425 2nd St. NW (call first)

***Wellness Center at N Street Village** (202) 939-2076
1333 N St. NW, Tuesday & Thursday, 9am – 12pm

***SOME 60 O St. NW**
Open Access Medical Clinic, Monday – Thursday,
8-11am & 1-3pm (202) 797-8806 x1042
Open Access Dental Clinic, Monday – Friday,
8-11am & 1-3pm (202) 797-8806 x1041

SHOWERS (Call first)
***Christ House** 1717 Columbia Rd. NW (202) 328-1100

***Georgetown Ministry Center** (202) 338-8301
1041 Wisconsin Ave. NW

Mount Vernon Place United Methodist Church
900 Massachusetts Ave. NW (202) 947-9620

***N St Village Bethany Women's Center** (202) 939-2060
1333 N St. NW

***SOME 71 "O" St. NW** (202) 797-8806 x2100

Thrive DC – St. Stephen's Church (202) 737-9311
1525 Newton St. NW

Water Ministry at St. Columba's Episcopal Church
4201 Albemarle St. NW (202) 363-4119

LAUNDRY (Call first)
***N St. Village Bethany Women's Center**
1333 N St. NW (202) 939-2060

Thrive DC – St. Stephen's Episcopal Church
1525 Newton St. NW By appointment (202) 737-9311

* Indicates providers that conduct housing assessments (VI-SOAT) through DC CAHP System

WOMEN'S SERVICES IN WASHINGTON, DC

DOMESTIC/INTIMATE PARTNER VIOLENCE & TRAUMA
DC Victim Hotline 1 (844) 4HELPDC / 1(844) 443-5732

Asian Pacific Islander DV Resource Proj (202) 464-4477
Ayuda (202) 387-4848
Break the Cycle (202) 824-0707
DC Domestic Violence Hotline (800) 799-7233
DC Rape Crisis Center Hotline (202) 333-7273
Deaf Abused Women's Network (202) 861-0258 (TTY)
District Alliance for Safe Housing (202) 462-3274
DV Legal Empowerment & Appeals Prog (202) 694-8153
House of Ruth (202) 667-7001
My Sister's Place (DV) Hotline (202) 529-5991
Ramona's Way (DV) Crisis Hotline (202) 257-6790
Survivor By Survivor Hotline (trafficking) (888) 261-3655
Washington Empowered Against Violence (202) 452-9650
Women of Freedom Foundation (202) 250-1699
Nat'l Domestic Violence Hotline 1(800) 799-SAFE (7233)

DRUG USE
HIP's Drop In Center needle exchange/sexual health
905 H St. NE, Monday – Thursday, 10:30am – 5:30pm
HIP's Hotline (800) 676-4477
Substance Abuse & Detox Hotline (202) 885-6510

LGBTQ
Casa Ruby (202) 355-5155
The DC Center (202) 692-2245
N Street Village (202) 939-2056
SMYAL (202) 546-5940

LEGAL ASSISTANCE
Bread for the City (202) 265-2400
Legal Aid Society (202) 628-1181
Network for Victim Recovery of DC (202) 742-1727
Wash. Legal Clinic for the Homeless (202) 328-5500

YOUTH SERVICES
Casa Ruby (202) 355-5155
2622 Georgia Ave. NW Monday – Saturday, 12pm-6pm

Covenant House (202) 610-9600
2001 Mississippi Ave. SE

LAYC DC Safe House Drop-In* (202) 713-0475
3045 15th St. NW, Monday – Friday, 10am-6pm

Sasha Bruce Emergency Hotline (202) 547-7777
741 A 6th St. SE Monday – Friday, 8am-6pm

SMYAL (202) 546-5940
410 7th St. SE

BENEFITS & COMPENSATION
Crime Victims (202) 879-4216
Food Stamps * Interim Disability Assistance
645 H St. NE (202) 724-5506
Social Security Benefits (800) 772-1213

* Indicates providers that conduct housing assessments (VI-SOAT) through DC CAHP System

COLLABORATIVES
These collaboratives offer a range of prevention and family support services across the District.

Collaborative Solutions for Communities, Wards 1&2
3333 14th St. NW, Suite 200 (202) 518-8737
Monday – Friday, 9am - 5pm

Georgia Avenue Family Support Collaborative,
Ward 4, 4&20 Georgia Ave NW (202) 722-1815
Monday – Friday, 9am – 5:30pm

Edgewood/Brookland Family Support Collaborative,
Wards 5&6 200 K Street NW (202) 832-9400
Monday – Friday, 8:30am – 5:30pm

East River Family Strengthening Collaborative,
Ward 7 3917 Minnesota Ave. NE (202) 397-7300
Monday – Friday, 8:30am – 5:00pm

Far Southeast Family Strengthening Collaborative,
Ward 8 2041 MLK King Jr Ave. SE (202) 889-1425
Monday – Thursday, 9am-8pm, Friday, 9am-5:30pm

CELL PHONES
SafeLink Cell Phone 1 (800) 977-3768
www.safeinkaccess.com must use residential address

FREE INTERNET
29 DC Public Library locations with free internet, public computers, books for check out and more. Valid identification and proof you are living (or staying) locally is required to get a library card. www.dclibrary.org

DC SERVICES TEXT MESSAGING SERVICE
Sign up to receive message alerts about services close to you. <https://dc.hopeonresource.org/>

Calvary Women’s Services‡
Capitol Hill Group Ministry*†
Casa Ruby*†‡
Catholic Charities‡
Community Connections*†
DASH‡
DC SAFE‡
DC Public Libraries†
Friendship Place*†‡
Georgetown Ministry Center*†
House of Ruth‡
LAYC*†‡
Miriam’s Kitchen*†
N Street Village†‡
New Endeavors By W‡
Open Arms Housing‡
Pathways to Housing*
Salvation Army*‡
Thrive DC†‡
Wanda Alston Foundation‡

** Street-based Outreach*

† Drop-in Center or meal-program

‡ Shelter or Transitional Housing