



SONOMA COUNTY
CONTINUUM OF CARE

SONOMA COUNTY 2025 HOMELESSNESS POINT-IN-TIME COUNT & REPORT

ABOUT THE RESEARCHER

Applied Survey Research (ASR) is a social research firm dedicated to helping people build better communities by collecting meaningful data, facilitating information-based planning, and developing custom strategies. The firm was founded in 1980 on the principle that community improvement, initiative sustainability, and program success are closely tied to assessment needs, evaluation of community goals, and development of appropriate responses.

Project Manager:

Peter Connery

Senior Data Analyst:

James Connery, John Connery, Javari Fairclough, and Alex Werner

Graphic Design and Layout:

Jamie Norton, Single Chair Studio



LOCATIONS

Central Coast:

55 Penny Lane, Suite 101
Watsonville, CA 95076
tel 831-728-1356

Bay Area:

1871 The Alameda, Suite 180
San Jose, CA 95126
tel 408-247-8319

Sacramento:

5440 Park Dr, Suite 104
Rocklin, CA 95765
tel 916-827-2811

www.appliedsurveyresearch.org

TABLE OF CONTENTS

ACKNOWLEDGEMENTS	4
INTRODUCTION	5
EXECUTIVE SUMMARY	8
POINT-IN-TIME COUNT	12
HOMELESS SURVEY FINDINGS	16
CONCLUSION	39
APPENDIX A: METHODOLOGY	41
APPENDIX B: DEFINITIONS AND ABBREVIATIONS	48

ACKNOWLEDGEMENTS

The considerable talents and efforts of many individuals helped ensure the success of this endeavor. The County of Sonoma and ASR would like to acknowledge and thank the volunteers, service providers and County and City employees who registered as volunteers for the census efforts, as well as the many community and faith-based organizations that helped to recruit volunteers. Finally, this study would not be possible without the homeless census and survey workers, survey respondents, and dozens of outreach workers whose efforts are reflected throughout this report.

FINANCIAL SUPPORT

Sonoma County Department of Health

PROJECT COORDINATORS

Nolan Sullivan Director, Sonoma County Department of Health Services	Daniel Overbury-Howland Sonoma County HMIS Coordinator, Sonoma County Department of Health Services
Michael Gause Ending Homelessness Program Manager, Sonoma County Department of Health Services	Karissa White Continuum of Care Coordinator, Sonoma County Department of Health Services

TRAINING, DEPLOYMENT & DISTRIBUTION SITES

West County Community Services, Guerneville	Caritas Family Center, Santa Rosa
Reach for Home, Healdsburg	Sonoma Emergency Operations Center, Sonoma
COTS Mary Issak Center, Petaluma	Rohnert Park City Hall, Rohnert Park

YOUTH COUNT AND SURVEY COORDINATORS

Sonoma County Department of Health Services	Community Support Network
Buckelew Programs	TLC Child & Family Services

SONOMA COUNTY HOMELESS COALITION BOARD

Caronline Banelos - City of Santa Rosa	Chris Cabral - COTS
Chris Coursey - Board of Supervisors	Jennielyn Holmes - Catholic Charities
Margaret Sluyk – Reach for Home	Kevin McDonnell - City of Petaluma
Martha Cheever - Sonoma County Community Development Commission	Benjamin Leroi - Santa Rosa Community Health
Ron Wellander - City of Sonoma	Jackie Elward – City of Rohnert Park
Jeremy Hinojos - Community Member	Maria Rico – Dry Creek Rancheria Band of Pomo Indians
Dannielle Danforth – West County Community Services	Angelica Smith – Manchester Point Arena Band of Pomo Indians
Kristi Lozinto – Ya-Ka-Ama Indian Education and Development	Stephen Zollman – City of Sebastopol
Chessy Etheridge - Community Member	

INTRODUCTION

In late January, volunteers and guides fanned out across the County of Sonoma as part of an annual effort to understand the needs, number, and circumstances of persons experiencing homelessness. Point-in-Time Counts measure the prevalence of homelessness in each community and collect information on individuals and families residing in emergency shelters and transitional housing, as well as on people sleeping on the streets, in cars, abandoned properties, or other places not meant for human habitation.

The Point-in-Time Count is the only source of nationwide data on sheltered and unsheltered homelessness and is required by U.S. Department of Housing and Urban Development (HUD) of all jurisdictions receiving federal funding to provide housing and services for individuals and families experiencing homelessness. Currently, The Sonoma County Homeless Coalition (CoC) receives approximately \$4.3 million dollars annually in federal funding, a key source of funding for the county's homeless services.

The Sonoma County Homeless Coalition reports the findings of their local Point-in-Time Count annually to HUD. This information ultimately helps the federal government to better understand the nature and extent of homelessness nationwide. Point-in-Time Census and Survey data also help to inform communities' local strategic planning, capacity building, and advocacy campaigns to prevent and end homelessness.

Sonoma County worked in conjunction with ASR to conduct the 2025 Sonoma County Homeless Point-in-Time Census and Survey. ASR is a social research firm with extensive experience in homeless enumeration and needs assessment that has worked with Sonoma County on their Point-in-Time Counts since 2009.

The Sonoma County Homeless Point-in-Time Count consists of two primary components: (1) a point-in-time enumeration of unsheltered, tents, or vehicles, and (2) a point-in-time enumeration of homeless individuals and families, such as those sleeping outdoors, on the street, or in parks and families residing in temporary shelter, including emergency shelters or transitional housing facilities.

The 2025 Sonoma County Homeless Point-in-Time Count was a comprehensive community effort. With the support of individuals with lived experience of homelessness, community volunteers, staff from various city and county departments, and law enforcement, the entire county was canvassed between the hours of 5:00 AM and 10:00 AM on January 31, 2025.

The count was a peer-informed visual count of unsheltered homeless individuals and families residing on the streets and in vehicles, makeshift shelters, encampments, and other places not meant for human habitation was conducted. Shelters and transitional housing facilities in Sonoma County's annual Housing Inventory Count (HIC) also reported the number of homeless individuals and families who occupied their facilities on the night prior to the day of the count.

A specialized count of unaccompanied children and transition-age youth under the age of 25 was conducted on the same day. This dedicated count was designed to improve the understanding of the prevalence and scope of youth homelessness. Sixteen trained youth enumerators who currently or recently experienced homelessness conducted the count in specific areas where homeless youth were known to congregate.

In the weeks following the street count, a comprehensive, close-ended survey was administered to 372 unsheltered and sheltered individuals and families. The survey gathered basic demographic details as well as information on service needs and utilization.

This report provides data regarding the number and characteristics of people experiencing homelessness in Sonoma County on a single night in January. Special attention is given to specific subpopulations, including chronically homeless persons, veterans, families, unaccompanied children under the age of 18, and transition-age youth between the ages of 18 and 25.

To better understand the dynamics of homelessness over time, results from previous years, including 2017-2024 are provided where available and applicable.

PROJECT OVERVIEW AND GOALS

ASR held planning meetings in the fall of 2024 to reflect the experience and expertise of the community with local stakeholders. Participants were drawn from City and County departments, community-based service organizations, and other interested stakeholders. They joined the 2025 Project Team (staff from Sonoma County Department of Health Services) in planning for the PIT count. These representatives were instrumental in ensuring the county's 2025 Homeless PIT Count and Survey reflected the needs and concerns of the community.

The 2025 Project Team worked toward several important project goals:

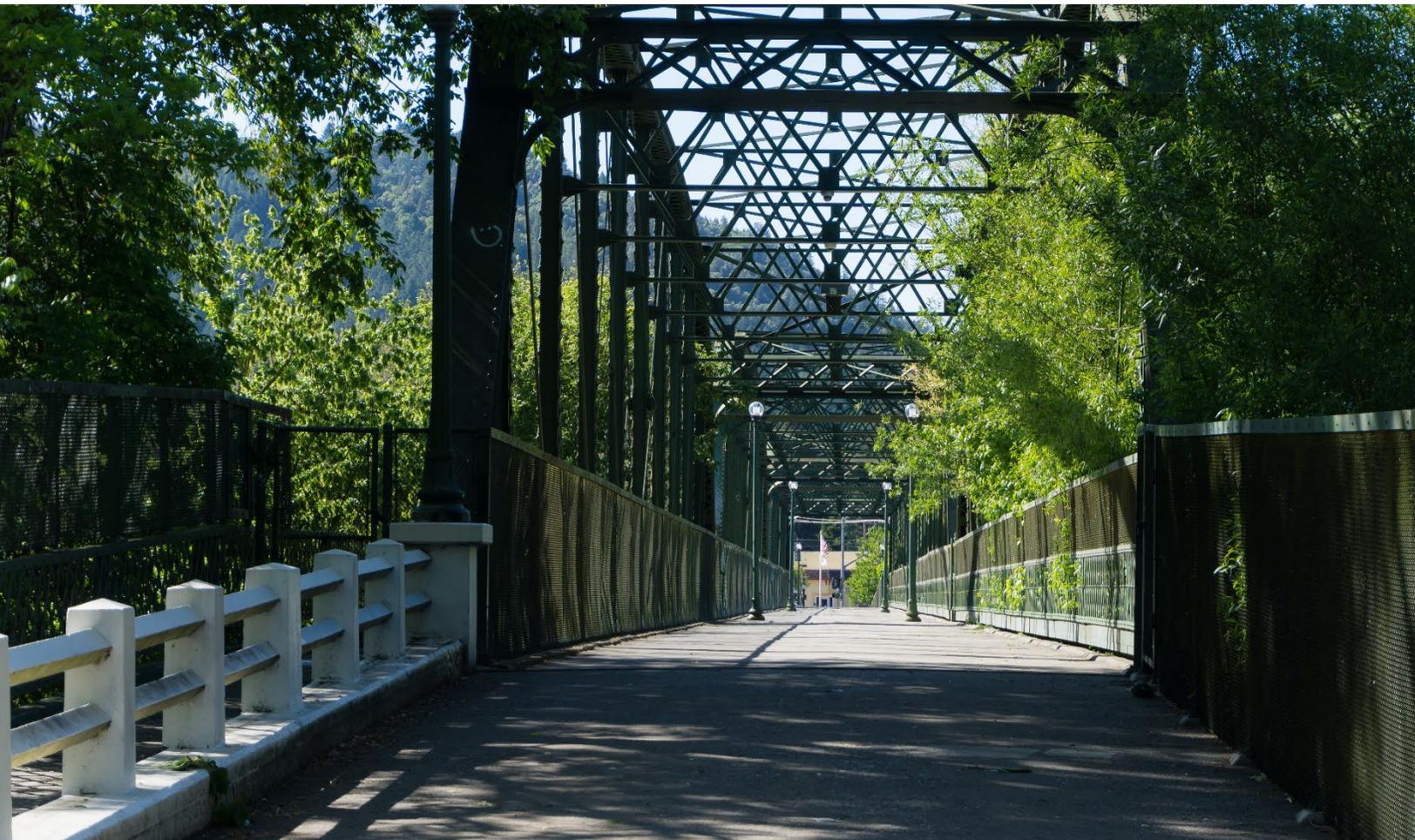
- To measure changes in the numbers and characteristics of the homeless population and to track progress toward ending homelessness.
- To assess the status of specific subpopulations, including veterans, families, unaccompanied children, transition-age youth, and those who are chronically homeless.
- To preserve current federal funding for homeless services and to enhance the ability to raise new funds.
- To improve the ability of policy makers and service providers to plan and implement services that meet the needs of the local homeless population.
- To increase public awareness of overall homeless issues and generate support for constructive solutions.



This report is intended to assist service providers, policy makers, funders, and local, state, and federal governments in gaining a better understanding of persons currently experiencing homelessness.

For the purposes of this report, the HUD definition of homelessness from Category 1 of the Hearth Act is used. This definition includes individuals and families:

- Living in a supervised publicly or privately-operated shelters designated to provide a temporary living arrangement; or
- With a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground.



SONOMA COUNTY

2025 POINT-IN-TIME COUNT & SURVEY

Every two years, typically during the last 10 days of January, communities across the country conduct comprehensive counts of the local homeless populations in order to measure the prevalence of homelessness in each local Continuum of Care.

The 2025 Sonoma County Point-in-Time Count was a community-wide effort conducted on January 31, 2025. In the weeks following the street count, a survey was administered to 372 unsheltered and sheltered individuals experiencing homelessness in order to profile their experience and characteristics.



SONOMA COUNTY
CONTINUUM OF CARE



TOTAL PERSONS EXPERIENCING HOMELESSNESS

1,952

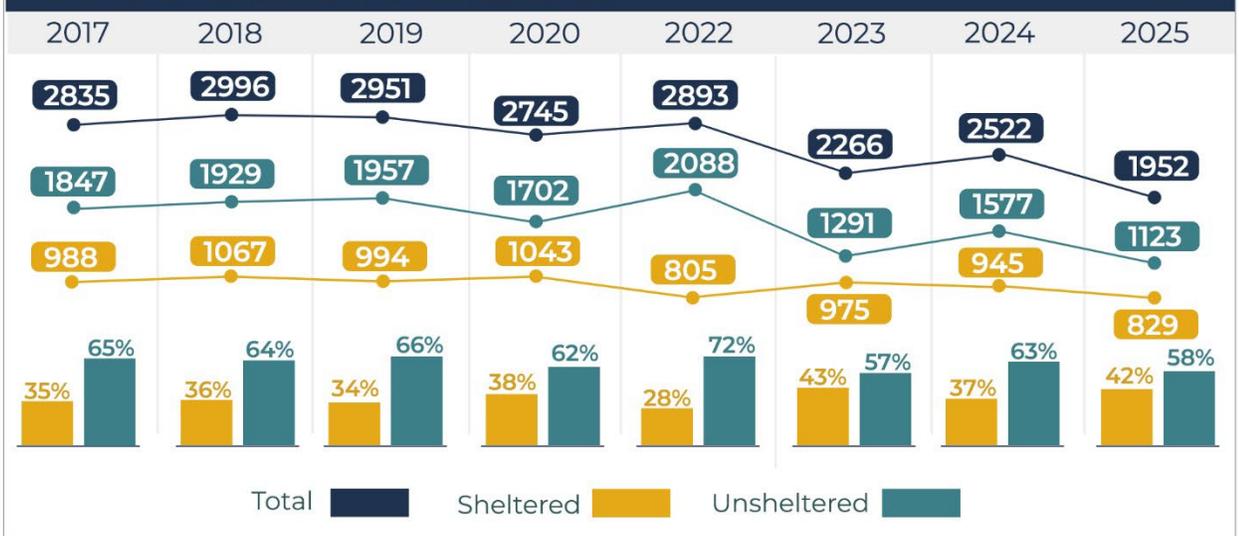


42%
Sheltered
829



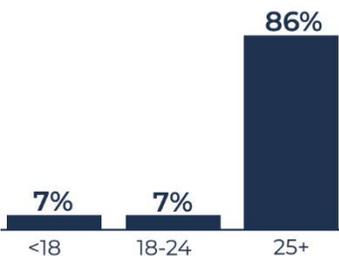
58%
Unsheltered
n=1,123

TOTAL PERSONS EXPERIENCING HOMELESSNESS

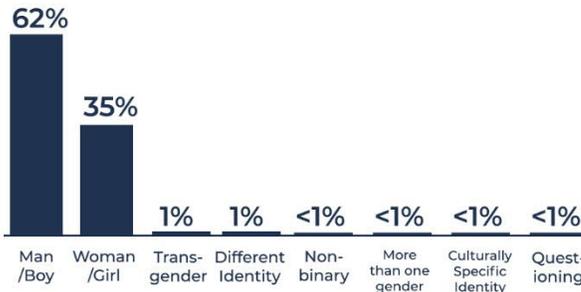


DEMOGRAPHICS

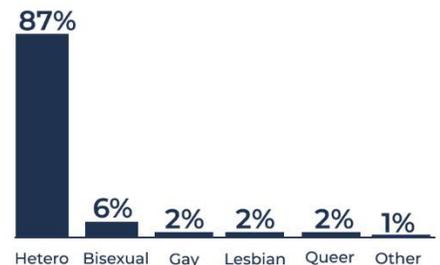
AGE



GENDER



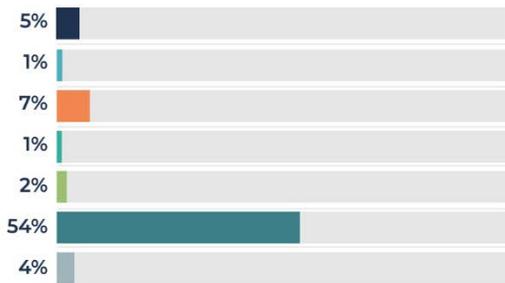
SEXUAL ORIENTATION



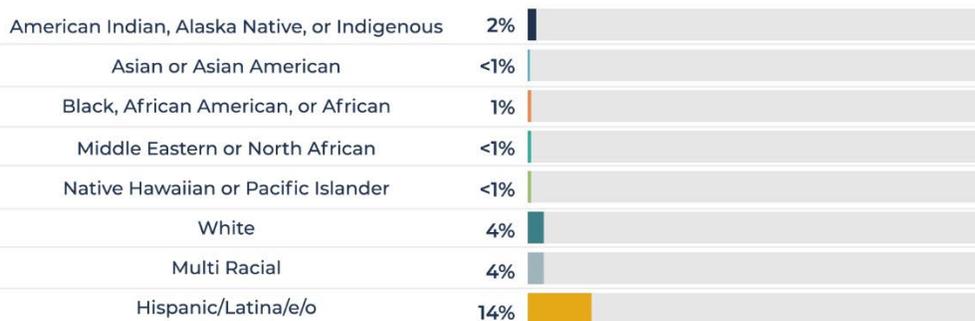


RACE/ ETHNICITY

NOT HISPANIC/LATINA/E/O

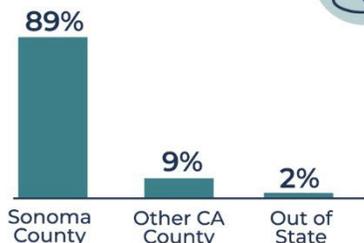


HISPANIC/LATINA/E/O

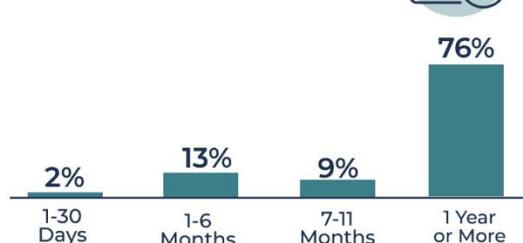


DATA PORTRAITS [□]

RESIDENCE AT TIME OF HOMELESSNESS



DURATION OF CURRENT HOMELESSNESS



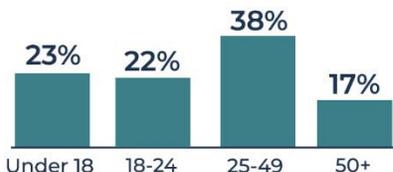
FIRST EPISODE OF HOMELESSNESS



32%

Reported their current episode of homelessness as being their first

AGE AT FIRST EPISODE OF HOMELESSNESS



PRIMARY CONDITION THAT LEAD TO HOMELESSNESS*

(Top 5 Responses)



WHAT IS KEEPING YOU FROM GETTING PERMANENT HOUSING*

(Top 5 Responses)



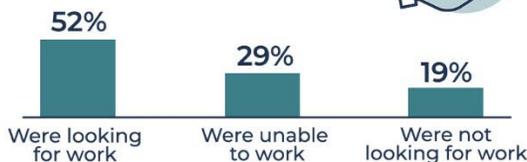
EMPLOYMENT STATUS



13%

had some form of employment

AMONG UNEMPLOYED RESPONDENTS



FOSTER CARE



21%

of survey respondents have been in the foster care system

JUSTICE SYSTEM INVOLVED



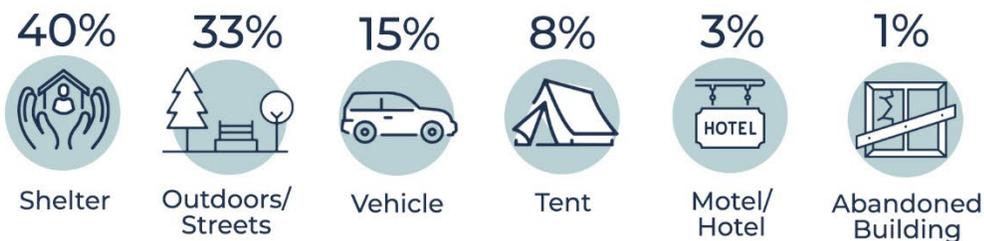
32%

of survey respondents spent one or more nights in jail/prison/ juvenile hall in the past year.

18%

on probation/parole at the start of their most recent episode of homelessness

SURVEY POPULATION BY SLEEPING ACCOMMODATION



SELF-REPORTED HEALTH ¹

Current health conditions that may affect the housing stability or employment of those experiencing homelessness.

PSYCHIATRIC OR EMOTIONAL CONDITIONS



53%

Report having a psychiatric or emotional condition

PTSD



49%

Report having Post Traumatic Stress Disorder

SUBSTANCE USE DISORDER



44%

Report having a substance use disorder

CHRONIC HEALTH CONDITION



42%

Report having a chronic health condition

PHYSICAL DISABILITY



36%

Report having a physical disability

TRAUMATIC BRAIN INJURY



23%

Report having had a TBI

HIV/AIDS RELATED ILLNESS



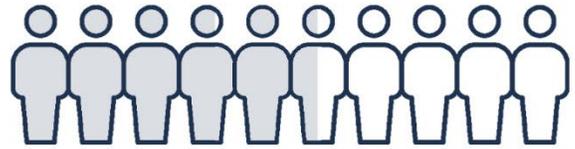
2%

Report having an HIV/AIDS related illness

DISABLING CONDITION

A disabling condition is defined by HUD as a developmental disability, HIV/AIDS, or a long-term physical or mental impairment that impacts a person's ability to live independently but could be improved with stable housing.

55%



of survey respondents report having at least one disabling condition

GOVERNMENT ASSISTANCE ¹



88%

Of survey respondents reported receiving government benefits.

SERVICES CURRENTLY ACCESSING* (TOP 5 RESPONSES)

50%



Free Meals

41%



Emergency Shelter

34%



Health Services

25%



Bus Passes

23%



Hygiene Services

REASONS FOR NOT RECEIVING GOVERNMENT ASSISTANCE* (TOP 4 RESPONSES)

21%



Applied and waiting for a response

15%



Don't think I'm eligible

14%



Paperwork too difficult

11%



Never applied

SPECIAL POPULATIONS

Total ■ Sheltered ■ Unsheltered ■

CHRONIC HOMELESSNESS



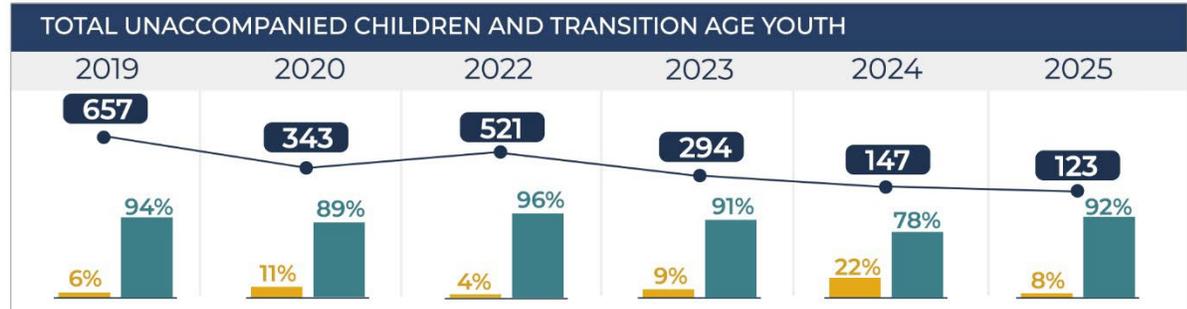
VETERANS



FAMILIES



UNACCOMPANIED CHILDREN + TAY



SUBPOPULATION DEFINITIONS

CHRONIC HOMELESSNESS

An individual with one or more disabling conditions, or a family with a head of household with a disabling condition, who:

- Has been continuously homeless for one year or more and/or;
- Has experienced four or more episodes of homelessness within the past three years.

VETERANS

Persons who have served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty.

FAMILIES

A household with at least one adult member (persons 18 or older) and at least one child member (persons under 18).

UNACCOMPANIED YOUTH YOUNG ADULTS

Youth under the age of 18 and young adults from the ages of 18 to 24 years old (TAY) who are experiencing homelessness and living without a parent or legal guardian.

□ Source: 2025 Sonoma County Homeless Survey, N=372
 * Multiple response question, percentages may not add up to 100%

Note: Some percentages have been rounded so total percentage will equal 100%.

POINT-IN-TIME COUNT

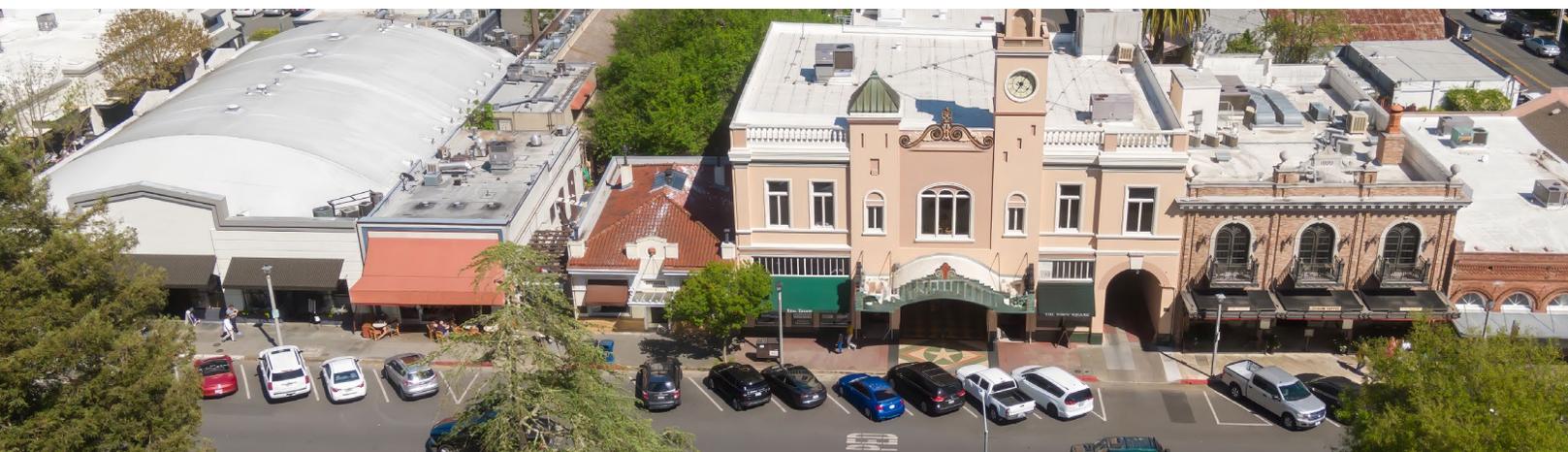
The 2025 County of Sonoma Homeless Point-in-Time Census and Survey included a complete enumeration of all unsheltered and publicly or privately sheltered homeless persons. The general street count was conducted on January 31, 2025 from approximately 5:00 AM to 10:00 AM and covered all of Sonoma County. The shelter count was conducted on the previous evening and included all individuals staying in emergency shelters, transitional housing facilities, and domestic violence shelters. The general street count and shelter count methodology were similar to those used in 2024 and previous years.

The methodology used for the 2025 Homeless Point-in-Time Census and Survey is commonly described as a “blitz and survey count” since it is conducted by a large team over a very short period of time. As this method was conducted in Sonoma County, the result was an observation-based count of individuals and families who appeared to be homeless.

The point-in-time occupancy of homeless shelters in Sonoma County was collected for the night of January 30, 2025. All shelter data were gathered either directly from the shelter or from Sonoma County’s Homeless Management Information System. All shelter occupants were listed on the HIC report that the Sonoma County Homeless Coalition submits to HUD.

The count was followed by an in-person representative survey of persons currently experiencing homelessness in Sonoma County, the results of which were used to profile and estimate the condition and characteristics of the local homeless population. Information collected from the survey was used to fulfill HUD reporting requirements and inform local service delivery and strategic planning efforts.

In a continuing effort to improve data on the extent of youth homelessness, Sonoma County also conducted a dedicated youth count similar to the youth counts that have been conducted since 2009. The dedicated youth count methodology was improved in 2017 to better ensure unaccompanied children and transition-age youth were not included in both the general street count and youth count. For more information regarding the dedicated youth count, de-duplication, and project methodology, please see [Appendix A: Methodology](#).



NUMBER AND CHARACTERISTICS OF PERSONS EXPERIENCING HOMELESSNESS IN SONOMA COUNTY

Figure 1: Total Number of Persons Experiencing Homelessness

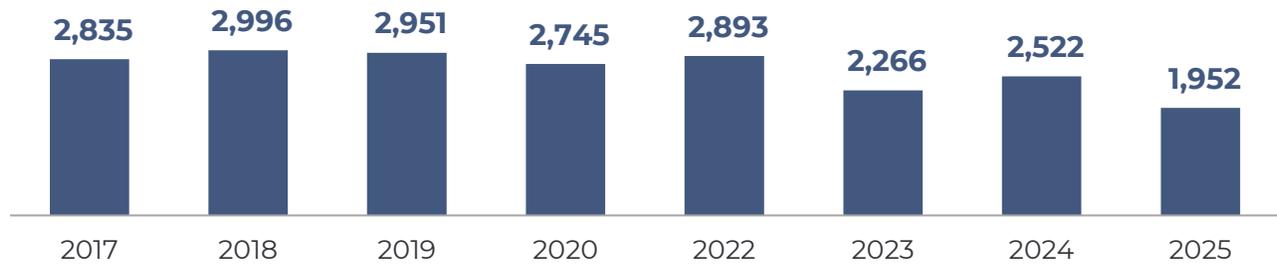
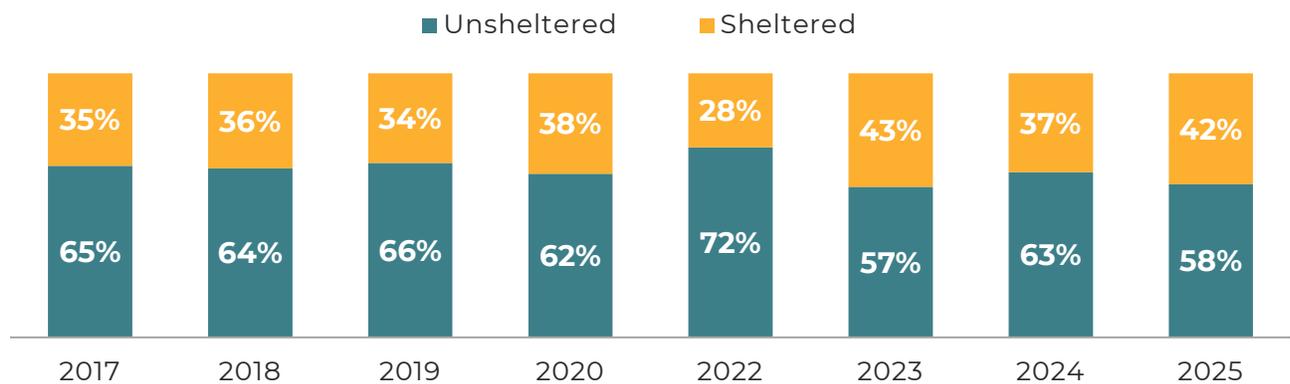


Figure 2: Total Homeless Census Population, by Shelter Status



	2017	2018	2019	2020	2022	2023	2024	2025	2024-25 % CHANGE
Sheltered	988	1,067	994	1,043	805	975	945	829	-12%
Unsheltered	1,847	1,929	1,957	1,702	2,088	1,291	1,577	1,123	-29%
Total	2,835	2,996	2,951	2,745	2,893	2,266	2,522	1,952	-23%

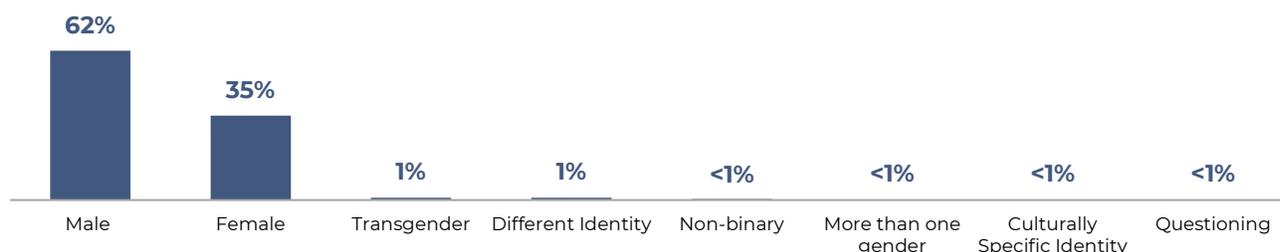
Figure 3: Total Homeless Census Population by Shelter Status and Jurisdiction

JURISDICTION	UNSHELTERED			SHELTERED			TOTAL		
	2023	2024	2025	2023	2024	2025	2023	2024	2025
North County	103	141	60	15	16	31	118	152	91
Cloverdale	9	6	7	0	3	4	9	9	11
Healdsburg	18	37	12	15	13	17	33	50	29
Town of Windsor	26	26	23	0	0	10	26	26	33
Unincorporated	50	67	18	0	0	0	50	67	18
South County	337	434	168	163	181	174	500	615	342
Cotati	9	21	0	6	10	6	15	31	6
Petaluma	157	143	88	88	97	103	245	240	191
Rohnert Park	141	205	46	69	74	65	210	279	111
Unincorporated	30	65	34	0	0	0	30	65	34
West County	143	128	137	70	49	44	213	177	181
Sebastopol	47	108	16	40	10	0	87	118	16
Unincorporated	96	20	121	30	39	44	126	59	165
Sonoma Valley	109	74	82	20	12	8	129	86	90
Sonoma	40	13	15	0	0	0	40	13	15
Unincorporated	69	61	67	20	12	8	89	73	75
Santa Rosa	599	805	676	695	664	552	1,294	1,469	1,228
Santa Rosa	465	701	588	695	664	552	1,160	1,365	1,140
Unincorporated	134	104	88	0	0	0	134	104	88
Undisclosed Location	0	0	0	12	23	20	12	23	20
Total	1,291	1,577	1,123	975	945	829	2,266	2,522	1,952

Note: Confidential beds have been included in their respective jurisdiction(s) since 2018.

Figure 4: Total Homeless Census Population by Gender

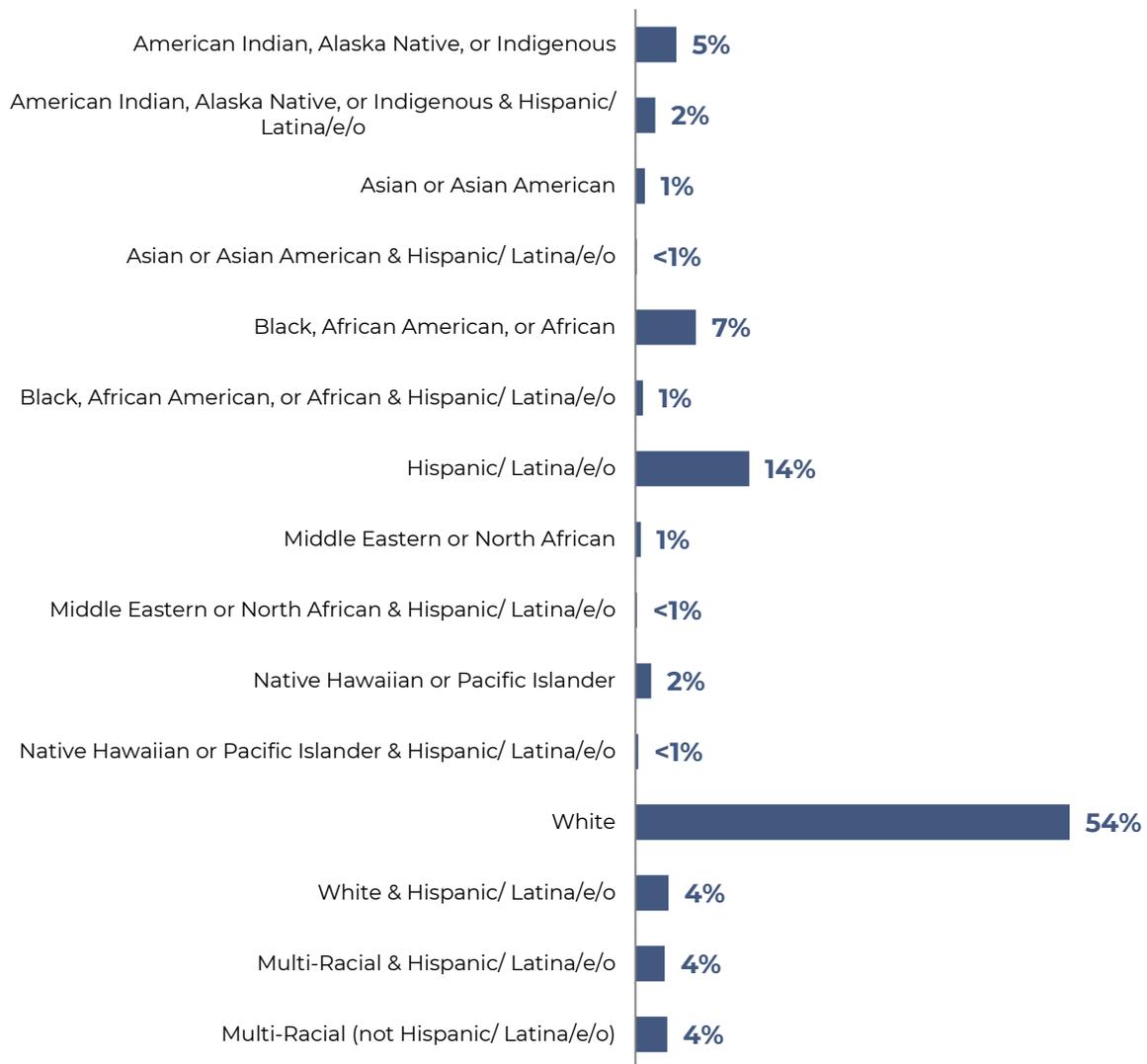
Men made up three-fifths (62%) of the persons identified during the PIT count, similar to 2024. Women were 35% of the persons identified, while transgender and different identity respondents were 1% each.



2025 N = 1,952

Note: Percentages may not add to 100 due to rounding. Transgender data were not collected prior to 2016 and Gender Non-Conforming data were not collected prior to 2018.

Figure 5: Total Homeless Census Population, by Race



2025 N = 1,952

Note: Percentages may not add up to 100 due to rounding.



HOMELESS SURVEY FINDINGS

This section provides an overview of the findings generated from the survey component of the 2025 Sonoma County Homeless Point-in-Time Census and Survey. Surveys were administered to a randomized sample of homeless individuals between January 31 and March 4, 2025.

To gain a more comprehensive understanding of the experiences of individuals and families experiencing homelessness in Sonoma County, Respondents were asked basic demographic questions including age, gender, sexual orientation, and ethnicity.

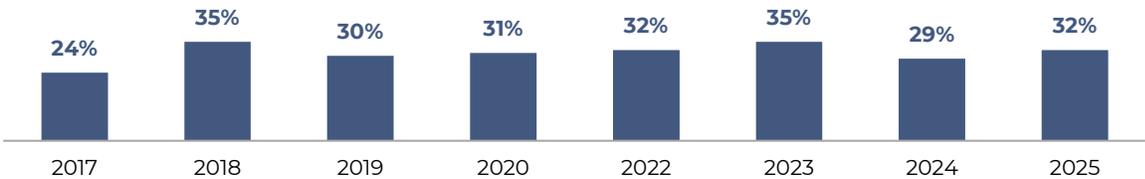
Based on a Point-in-Time Count (PIT) of 1,952 homeless persons, with a randomized survey sampling process, these 372 valid surveys would represent a confidence interval of +/- 5% with a 95% confidence level when generalizing the results of the survey to the entire estimated population of homeless individuals in Sonoma County. In other words, if the survey were conducted again, we can be 95% certain that the results would be within 5 percentage points of the current results.

In order to respect respondent privacy and to ensure the safety and comfort of those who participated, respondents were not required to complete all survey questions though they were asked to be generally responsive to all questions. Missing values were intentionally omitted from the survey results. Therefore, the total number of respondents for each question will not always equal the total number of surveys conducted. For more information regarding the survey methodology, please see [Appendix A: Methodology](#).

DURATION AND RECURRENCE OF HOMELESSNESS

Unstable living conditions, poverty, housing scarcity, and many other issues often lead to individuals falling in and out of homelessness. For many, the experience of homelessness is part of a long and recurring history of housing instability.

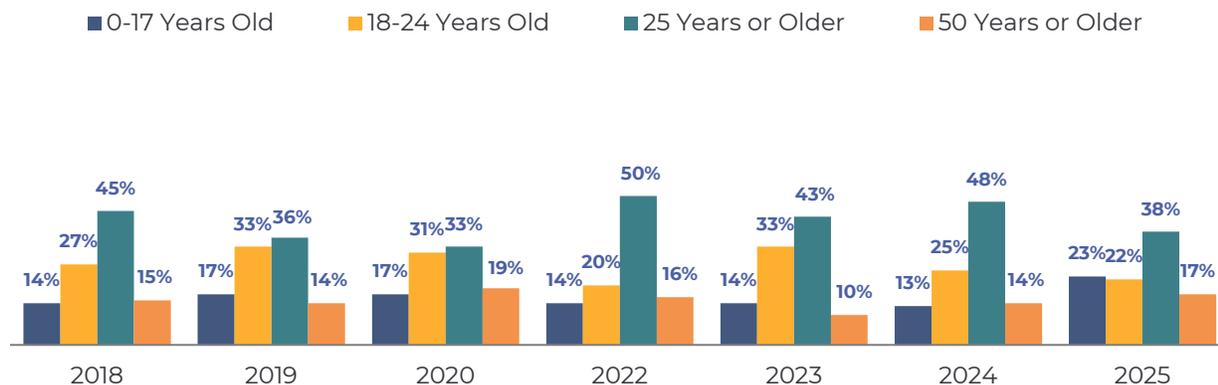
Figure 6: First Time Experiencing Homelessness (Respondents Answering “Yes”)



2017 N = 678; 2018 N = 519; 2019 N = 498; 2020 N = 444; 2022 N = 385; 2023 N = 442; 2024 N = 361; 2025 N = 363

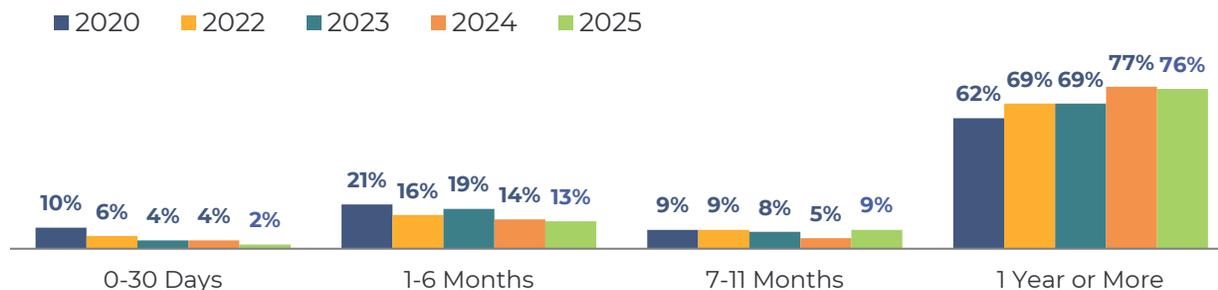
In an effort to better understand the experiences and age distribution of those experiencing homelessness, respondents were asked how old they were the first time they experienced homelessness. Since 2018, there is an emerging trend of those experiencing homelessness for the first time at age 50 or older.

Figure 7: Age at First Experience of Homelessness



2018 N = 513; 2019 N = 511; 2020 N = 435; 2022 N = 413; 2023 N = 440; 2024 N = 354; 2025 N = 361

Figure 8: Length of Current Episode of Homelessness



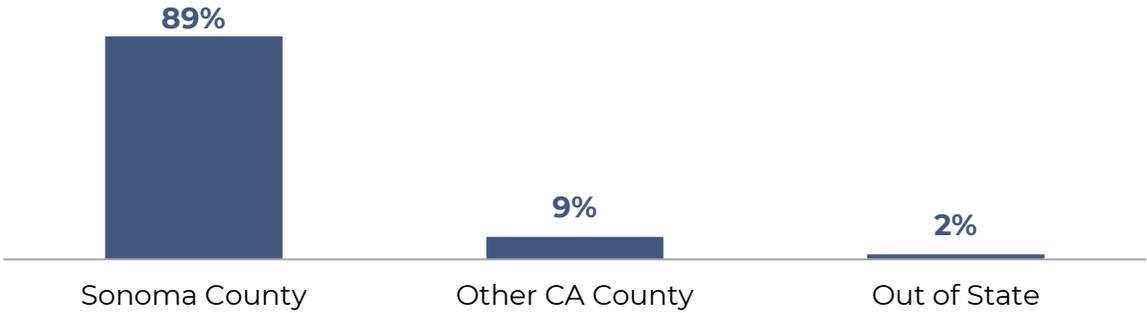
2020 N = 444; 2022 N = 420; 2023 N = 441; 2024 N = 358; 2025 N = 361



LIVING ACCOMMODATIONS

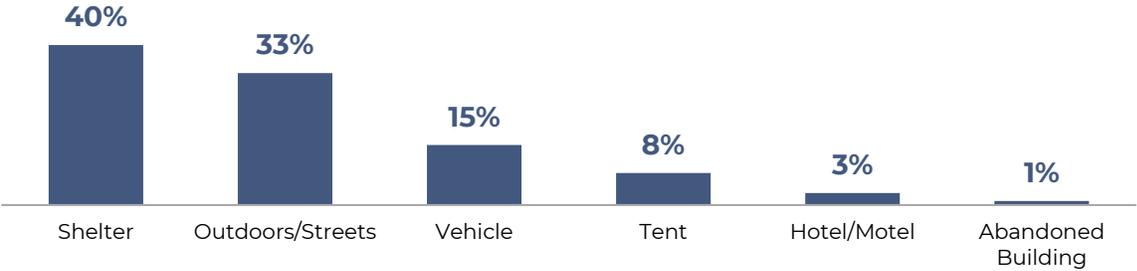
Where individuals lived prior to experiencing homelessness and where they have lived since impacts the way they seek services, as well as their ability to access support from friends or family. Previous circumstances can also point to gaps in the system of care and to opportunities for systemic improvement and homelessness prevention. Survey respondents reported many different living accommodations prior to experiencing homelessness, although most lived in or around Sonoma County with friends, family, or on their own or with a partner in a home or apartment.

Figure 9: Place of Residence at Time of Housing Loss



2025 N = 367

Figure 10: Total Homeless Population Surveyed, by Sleeping Accommodation



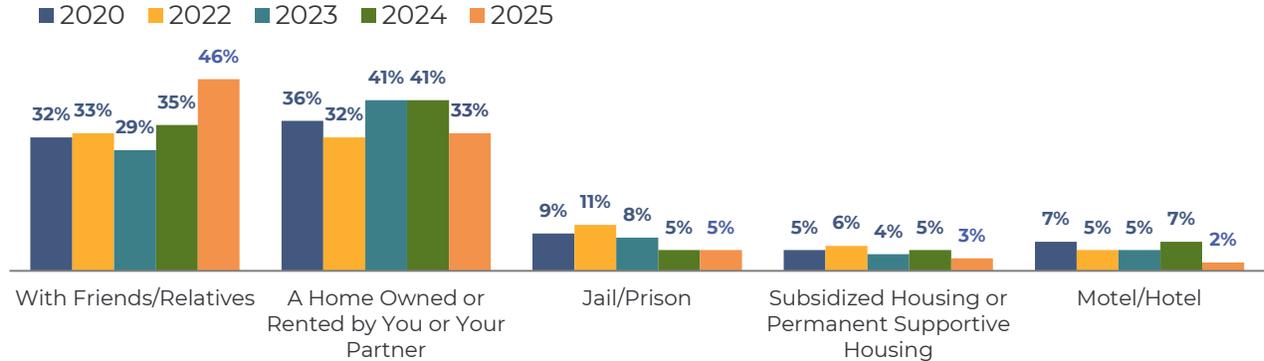
2025 N = 364



PRIOR LIVING ARRANGEMENTS

Similar to our respondents' previous place of residence, the type of living arrangements maintained by individuals before experiencing homelessness can influence knowledge of and access to various types of homeless prevention services available to help individuals maintain their housing.

Figure 11: Living Arrangements Immediately Prior to Becoming Homeless This Time (Top Five Responses)

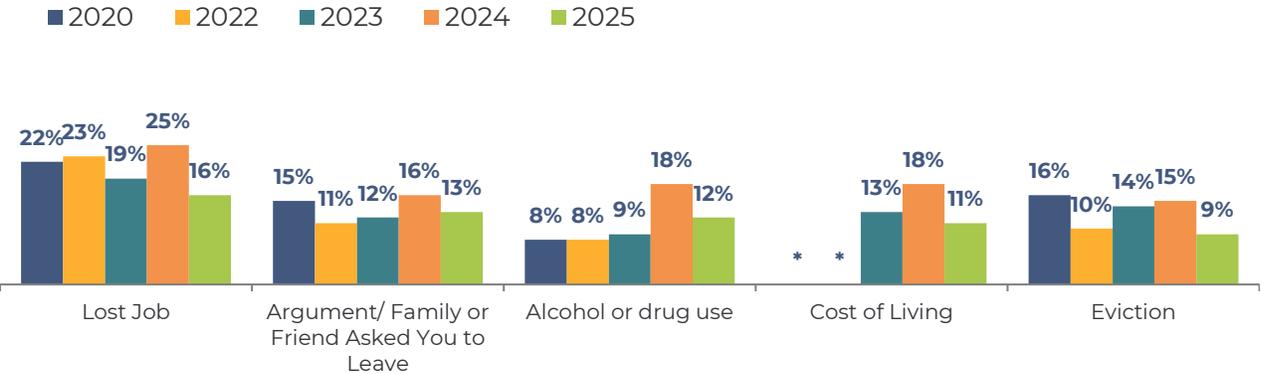


2020 N = 431; 2022 N = 396; 2023 N = 426; 2024 N = 344; 2025 N = 348

PRIMARY CAUSE OF HOMELESSNESS

The primary cause of a person or family's inability to obtain or retain housing is often difficult to pinpoint, as it is often the result of multiple, inter-related causes. An inability to secure adequate housing can also lead to or result in an inability to address other basic needs, such as healthcare and adequate nutrition. In our survey question, respondents were asked to list their self-assessed primary cause of the experience of homelessness.

Figure 12: Primary Cause of Homelessness (Top Five Responses) *



* Note: Cost of living was added as a response in 2023
 * Note: Beginning in 2025, respondents were asked only to shade one

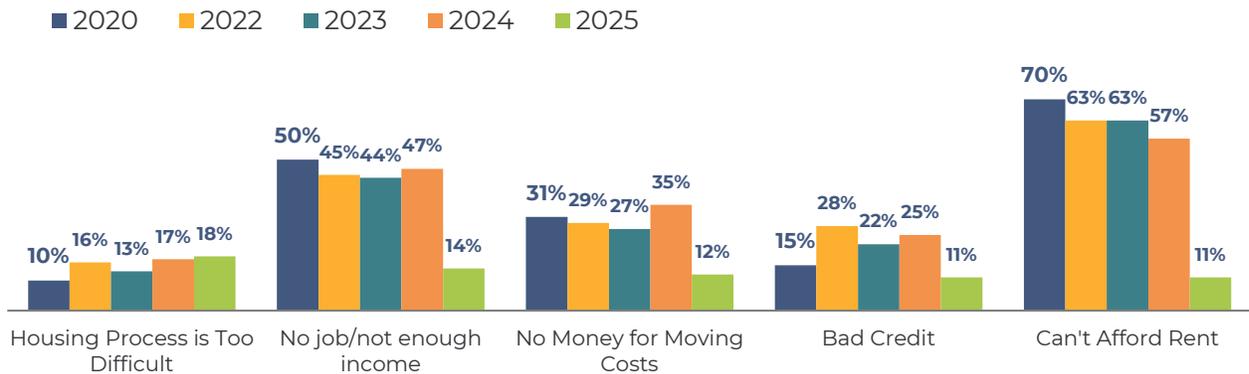
2025 PRIMARY CAUSE OF HOMELESSNESS			
Lost Job	16%	Divorce/Separation/Break Up	6%
Argument with Family or Friend	13%	Incarceration	5%
Alcohol or Drug Use	12%	Illness/Medical Problem	4%
Cost of Living	11%	Foreclosure	2%
Eviction	9%	Housefire	2%
Mental Health Issues	7%	Probation/Parole restrictions	1%
Family/Domestic Violence	6%	Aging Out of Foster Care	1%
Landlord Raised Rent	6%	Hospitalization/Treatment	1%

2020 N = 438 respondents offering 542 responses; 2022 N = 397 respondents offering 475 responses; 2023 N = 433 respondents offering 576 responses; 2024 N = 350 respondents offering 548 responses; 2025 N = 325
 * Note: Beginning in 2025, respondents were asked only to shade one

OBSTACLES TO OBTAINING PERMANENT HOUSING

When asked about the obstacles to permanent housing, the most common response amongst survey respondents was that the housing process is too difficult with 18% choosing that option. Lack of job or income was the second most common (14%), followed by difficulties affording moving costs (12%).

Figure 13: Obstacles to Obtaining Permanent Housing (Top Five Responses) *



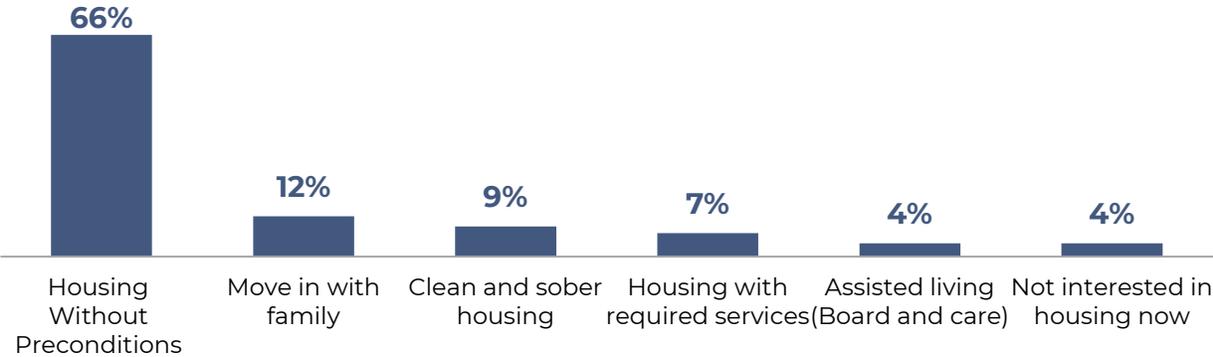
2020 N = 436 respondents giving 1,130 responses; 2022 N = 404 respondents giving 1,145 responses; 2023 N = 428 respondents offering 1,152 responses; 2024 N = 353 respondents offering 1,061 responses; 2025 N = 332
 * Note: Beginning in 2025, respondents were asked only to shade one



HOUSING TYPE DESIRED

Survey respondents most desired housing without any sort of preconditions, were it to be offered to them.

Figure 14: Survey Respondents by Housing Type Desired



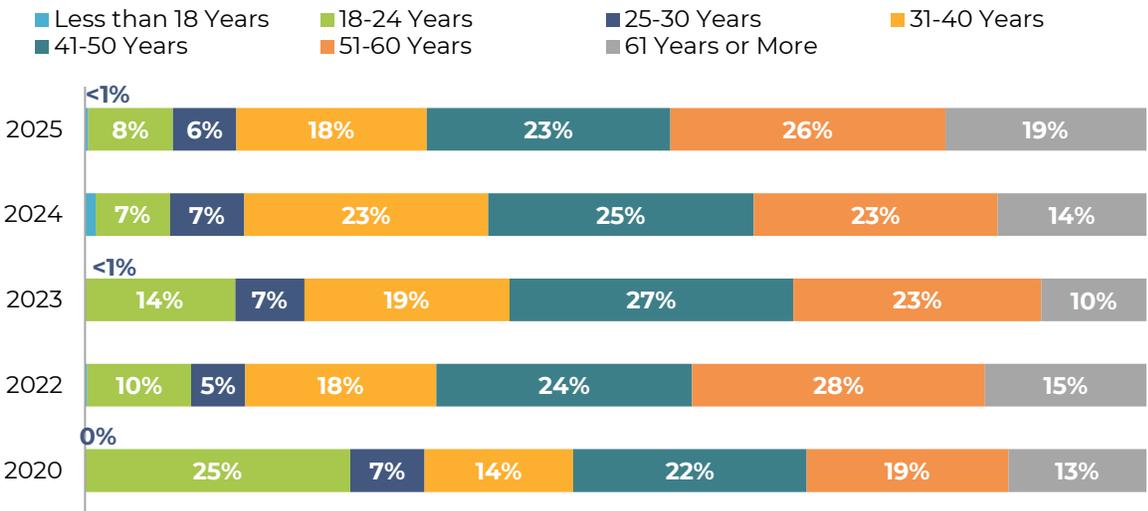
2025 N = 337
 * Note: Beginning in 2025, respondents were asked only to shade one

DEMOGRAPHIC INFORMATION

AGE

Over three-fifths of survey respondents were over the age of 41. The age group with the most respondents was 41-50 years old.

Figure 15: Survey Respondents by Age

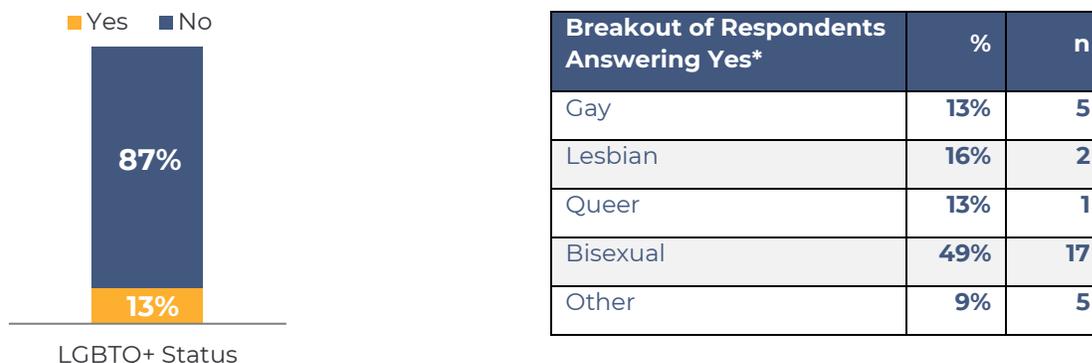


2020 N = 444; 2022 N = 428; 2023 N = 445; 2024 N = 367; 2025 N = 367
 Note: Percentages may not add up to 100 due to rounding.

LGBTQ+ STATUS

Persons identifying as LGBTQ+ (lesbian, gay, bisexual, gender non-conforming, transgender, or queer) are overrepresented in the population experiencing homelessness when compared to the general population: as of 2018, 5.6% of the US population Identified as LGBT.¹ According to the 2025 Sonoma Homeless Survey, thirteen percent (13%) of survey respondents identified as LGBTQ, up from 8% in 2024.

Figure 16: Survey Respondents by LGBTQ+ Status



LGBTQ 2025 N = 45

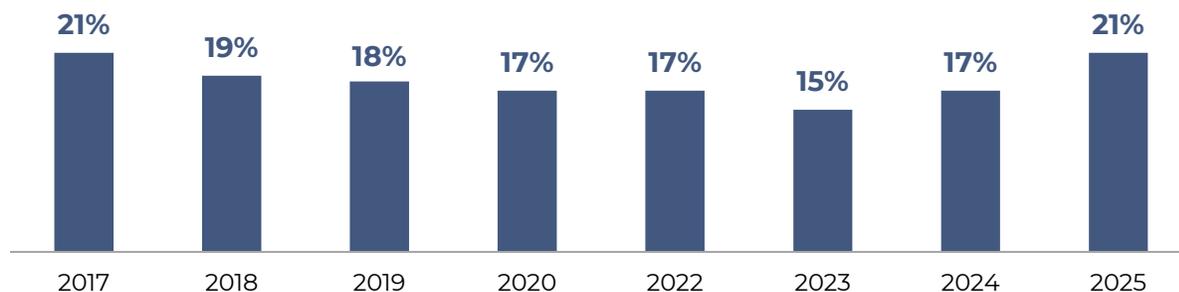
Note: Multiple response question. Percentages may not add up to 100.

* Note: Percentages may not add up to 100% due to rounding

FOSTER CARE

In California, it is estimated that 24% of foster youth experience homelessness after exiting care.² In 2025, 21% of survey respondents reported a history of foster care, similar to previous years.

Figure 17: Survey Respondents that Reported a History of Foster Care



2017 N = 645; 2018 N = 510; 2019 N = 504; 2020 N = 423; 2022 N = 408; 2023 N = 425; 2024 N = 338; 2025 N = 368

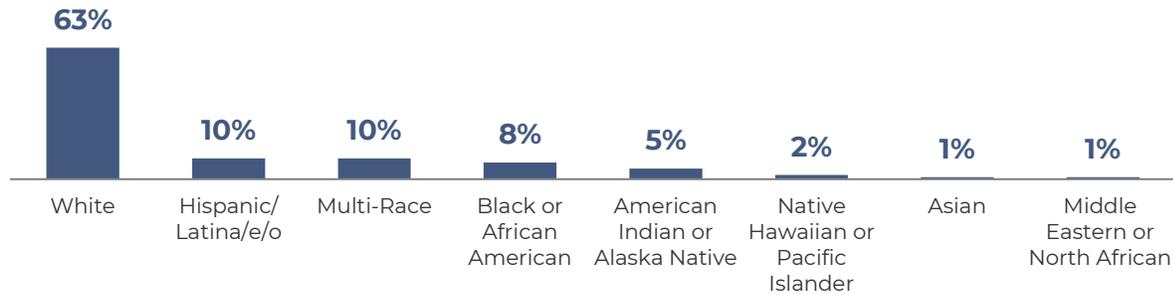
¹ Jones, J. (2021). LGBT Identification Rises to 5.6% in Latest U.S. Estimate. Gallup. Retrieved 2023 from <https://news.gallup.com/poll/329708/lgbt-identification-rises-latest-estimate.aspx>

² Broslawski, A. (2021). Foster Youth and Homelessness. Homeless Policy Research Institute. Retrieved 2023 from https://socialinnovation.usc.edu/homeless_research/foster-youth-and-homelessness/

RACE/ETHNICITY

Over half of survey respondents identified as White in 2025. Latinos and those who identify as multiracial tied for second at 10%, followed by persons identifying as Black or African American.

Figure 18: Survey Respondents by Race/Ethnicity



2025 N = 362

Note: Percentages may not add up to 100 due to rounding



GOVERNMENT SERVICES AND ASSISTANCE

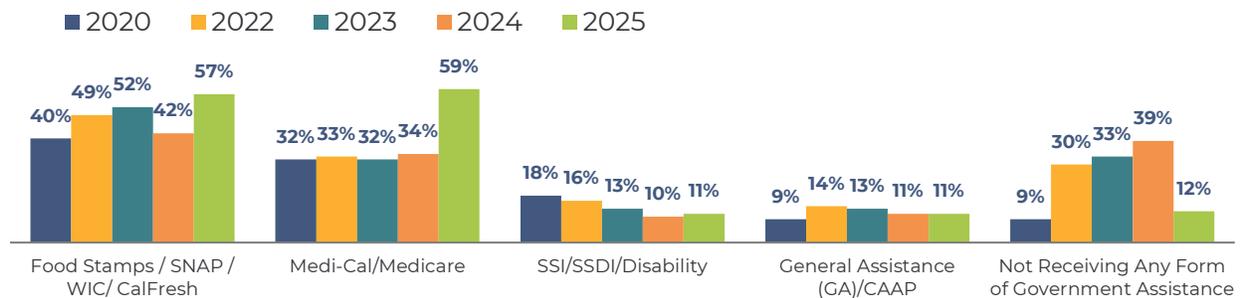
Sonoma County provides services and assistance to those currently experiencing homelessness through federal and local programs. However, many individuals and families do not apply for services, as many are not interested in receiving assistance, or believe that they are ineligible for assistance.

There are various forms of government assistance available to individuals experiencing homelessness, though usage of these supports is impacted by knowledge of services available, understanding of eligibility requirements, and perceived stigma of receiving governmental assistance, amongst others.

Fifty-seven percent (57%) of survey respondents were receiving food stamps, SNAP, WIC, and/or CalFresh assistance, an increase from 42% in 2024. Twelve percent of respondents reported not receiving any form of governmental assistance, a decrease from 39% in 2024.

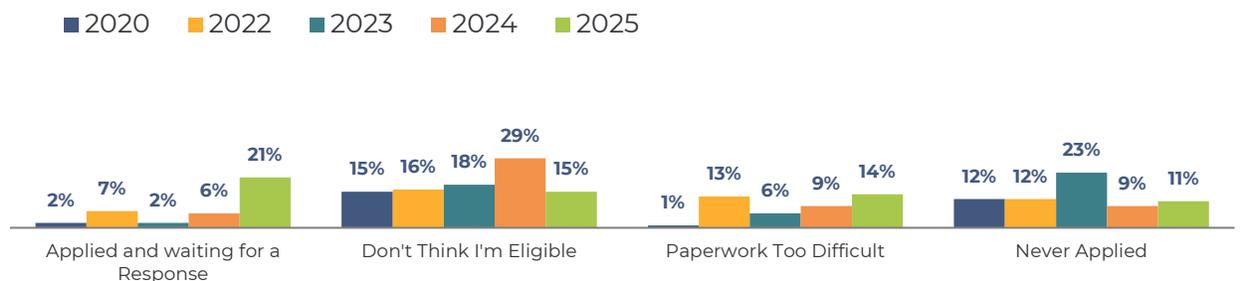
When asked why they weren't receiving any governmental assistance, 21% of respondents stated that they applied and are waiting on a response, which represents an increase from 6% in 2024.

Figure 19: Government Assistance Received (Top Five Responses)



2020 N = 419 respondents offering 600 responses; 2022 N = 397 respondents offering 631 responses; 2023 N = 445 respondents offering 686 responses; 2024 N = 359 respondents offering 533 responses; 2025 N = 372 respondents offering 615 responses
 Note: Multiple response question. Percentages may not add up to 100.

Figure 20: Reasons for Not Receiving Government Assistance (Top Five Responses)

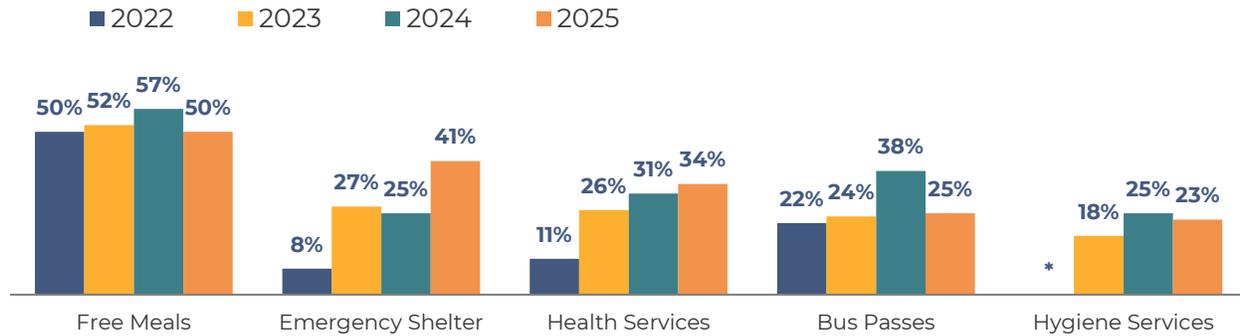


2020 N = 138 respondents offering 162 responses; 2022 N = 276 respondents offering 422 responses; 2023 N = 128 respondents offering 193 responses; 2024 N = 104 respondents offering 162 responses; 2025 N = 223 respondents offering 290 responses

SERVICES AND PROGRAMS

In addition to government assistance, there are numerous community-based services and programs made available to individuals experiencing homelessness. These services range from day shelters and meal programs to job training and healthcare.

Figure 21: Service Usage (Top Five Responses)



2022 N = 381 respondents offering 613 responses; 2023 N = 411 respondents offering 956 responses 2024 N = 319 respondents offering 833 responses; 2025 N = 372 respondents offering 950 responses

Note: Multiple response question. Percentages may not add up to 100.

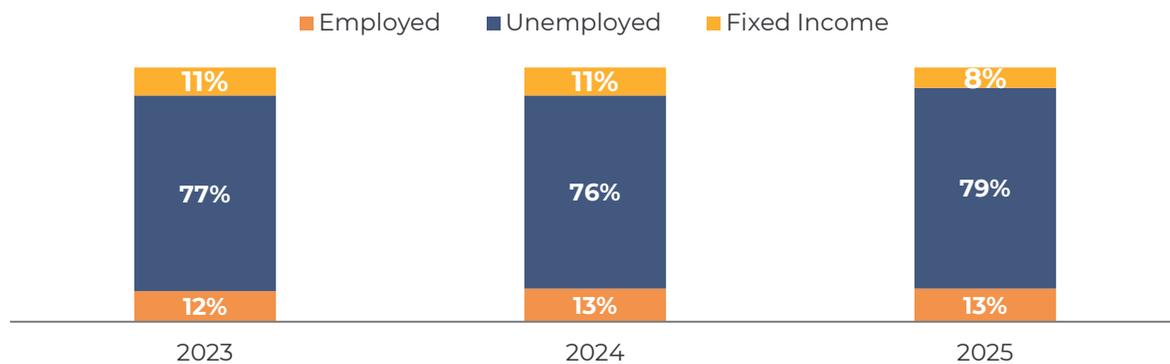
* Note: Hygiene services was added as a response option in 2023

EMPLOYMENT AND INCOME

While over three-quarters (79%) of survey respondents reported being unemployed, a small percentage reported part-time (9%), full-time (3%), or seasonal or sporadic employment (1%). Many were receiving an income, either public or private. Despite this income, data suggest that employment and income were not enough to meet basic needs.

Thirteen percent (13%) of survey respondents reported they were at least somewhat employed. This includes seasonal, part-time, and full-time employment.

Figure 22: Survey Respondents by Employment and Income



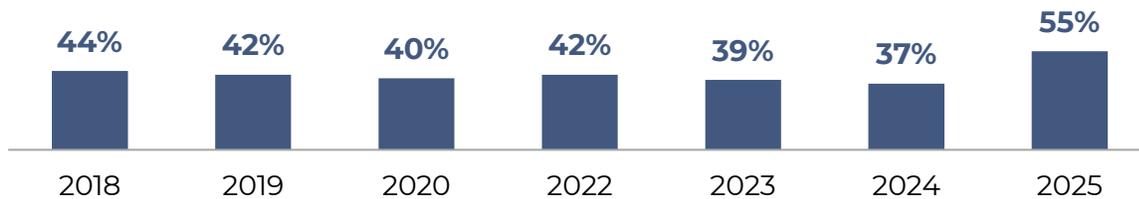
2023 Employment status N = 385; 2024 Employment status N = 340; 2025 Employment status N = 354

HEALTH

There are two main focuses when discussing the health of survey respondents. All survey respondents are asked if they are experiencing a range of health conditions. Those who indicate they are experiencing at least one of those conditions are asked follow-up questions to determine if they meet the level of HUD-disabling conditions, health conditions that prevent them from maintaining housing and/or a job.

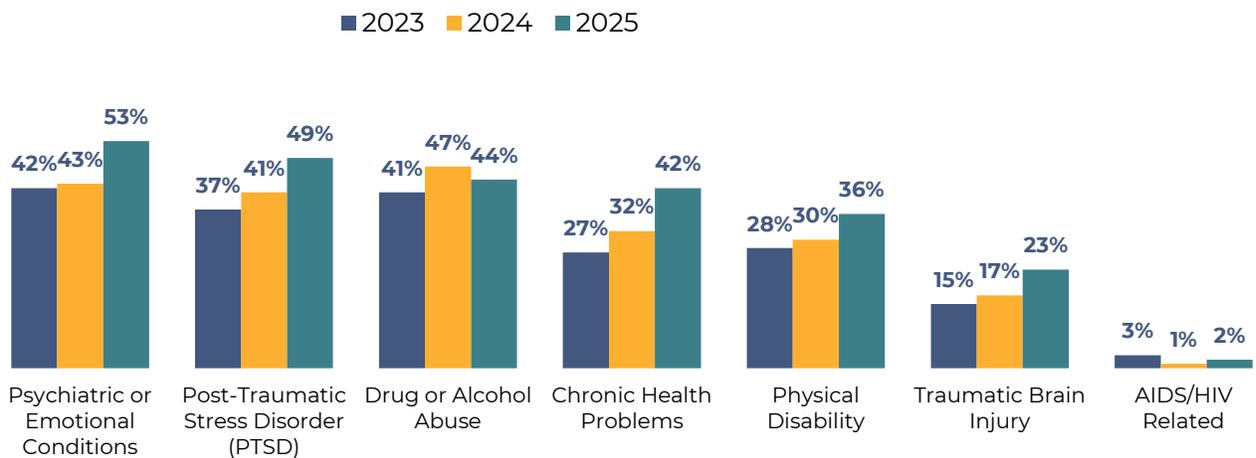
Fifty-five percent (55%) of survey respondents reported suffering from at least one HUD-disabling condition. The most common health conditions experienced by respondents were psychiatric problems (53%) and PTSD (49%), followed by drug or alcohol abuse (44%).

Figure 23: HUD Disabling Conditions



2018 N = 515; 2019 N = 520; 2020 N = 478; 2022 N = 451; 2023 N = 445; 2024 N = 361; 2025 N = 372

Figure 24: Health Conditions



2023 N = 393 - 413; 2024 N = 307 - 315; 2025 N = 354 - 361

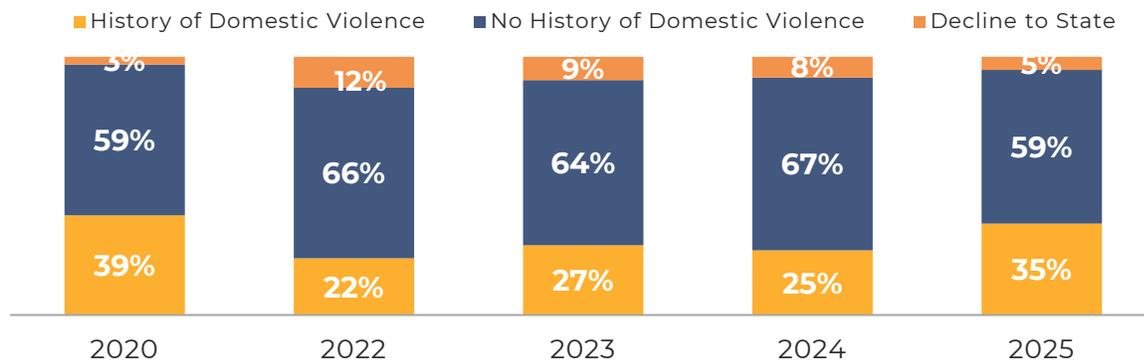
Note: Multiple response question. Percentages may not add up to 100.

DOMESTIC PARTNER VIOLENCE OR ABUSE

Histories of domestic violence and partner abuse are prevalent among individuals experiencing homelessness and is often the primary cause of homelessness for many. Survivors often lack the financial resources required for housing.

When asked if they had experienced domestic violence in their past, 35% of respondents reported having such a past. This represents an increase from 2024 (25%). Nine percent of respondents reported that they were currently experiencing domestic violence.

Figure 25: History of Domestic Violence

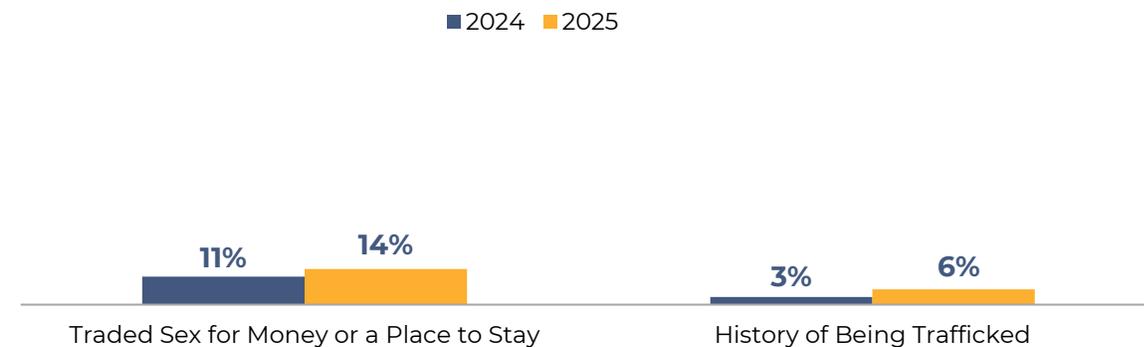


2020 N = 421; 2022 N = 403; 2023 N = 417; 2024 N = 344; 2025 N = 372
 Note: Percentages may not add up to 100 due to rounding.

SEX TRADE INVOLVEMENT

Due to their vulnerable circumstances and precarious access to basic needs, many of those experiencing homelessness have a history of being involved in the sex trade. Fourteen percent of survey respondents reported trading sex for money or a place to stay, in the past and 6% reported being trafficked in the past.

Figure 26: Sex Trade Involvement



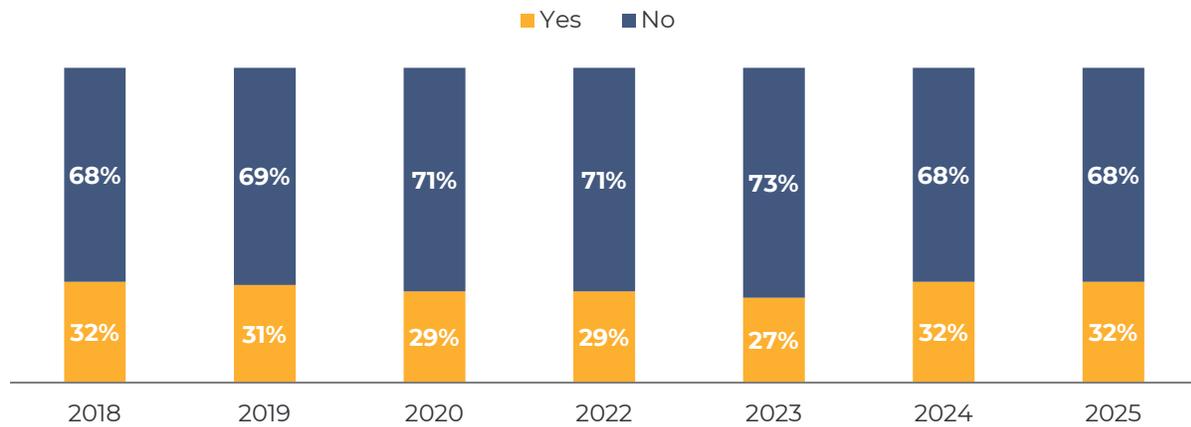
2024 Trading Sex for Money or a Place to Stay N = 344, History of Being Trafficked N = 336
 2025 Trading Sex for Money or a Place to Stay N = 360, History of Being Trafficked N = 359

CRIMINAL JUSTICE SYSTEM

Individuals without stable housing are at greater risk of criminal justice system involvement, particularly those with mental health issues, veterans, and youth.

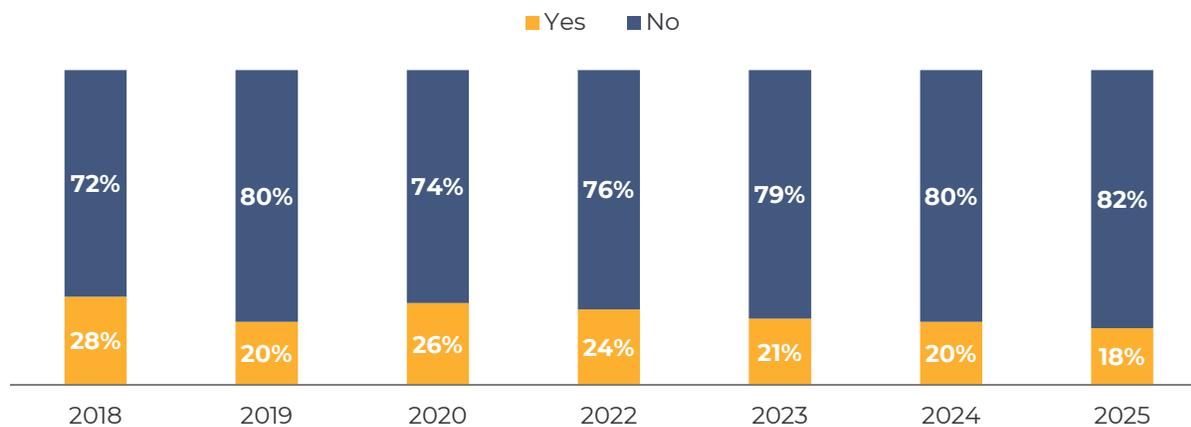
Similar to previous years, 32% of respondents reported spending a night in jail in the 12 months prior to taking the survey. Just under a quarter (21%) of respondents reported being on parole or probation at the time of the survey.

Figure 27: Spent a Night in Jail or Prison in the Last 12 Months



2018 N = 500; 2019 N = 505; 2020 N = 427; 2022 N = 391; 2023 N = 409; 2024 N = 330; 2025 N = 364
 Note: Due to rounding, percentages may not add up to 100%

Figure 28: Currently On Probation or Parole



2018 N = 488; 2019 N = 489; 2020 N = 427; 2022 N = 391; 2023 N = 420; 2024 N = 324; 2025 N = 367

HUD DEFINED SPECIAL POPULATIONS

In order to adequately address the diversity within the population experiencing homelessness, the federal government identifies four subpopulations with particular challenges or needs, including:

- Chronic homelessness among people with disabilities;
- Veterans;
- Families with children; and
- Unaccompanied children (<18) and transition-age (18-24) youth.

Consequently, these subpopulations represent important reportable indicators for measuring local progress toward ending homelessness.

The following sections examine each of these four subpopulations, identifying the number and characteristics of individuals included in the 2025 Sonoma County Homeless Point-in-Time Census and Survey.

HOUSEHOLDS EXPERIENCING CHRONIC HOMELESSNESS

The U.S. Department of Housing and Urban Development defines a chronically homeless individual as someone who has experienced homelessness for a year or longer—or who has experienced at least four episodes of homelessness totaling 12 months in the last three years—and also has a disabling condition that prevents them from maintaining work or housing. This definition applies to individuals as well as heads of household who meet the definition.

The chronically homeless population represents one of the most vulnerable populations on the street; the mortality rate for those experiencing homelessness in high income countries is three-to-eleven times higher than that of the general population.³

After decreasing from 2022 to 2023, the chronically homeless population increased 20% to 730 in 2025. Just over one-third (36%) of the chronically homeless population was sheltered.



³ Effects of Housing First approaches on health and well-being of adults who are homeless or at risk of homelessness: systematic review and meta-analysis of randomised controlled trials. (2019). *J Epidemiol Community Health*. Retrieved 2023 from chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://jech.bmj.com/content/jech/73/5/379.full.pdf

Figure 29: Total Number of Persons Experiencing Chronic Homelessness

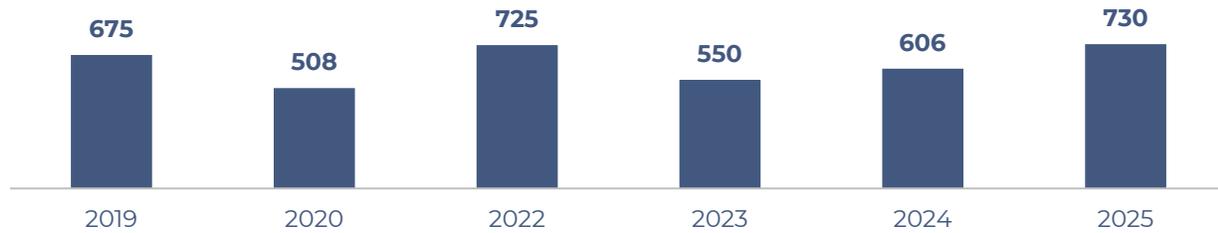


Figure 30: Chronically Homeless Census Population by Shelter Status

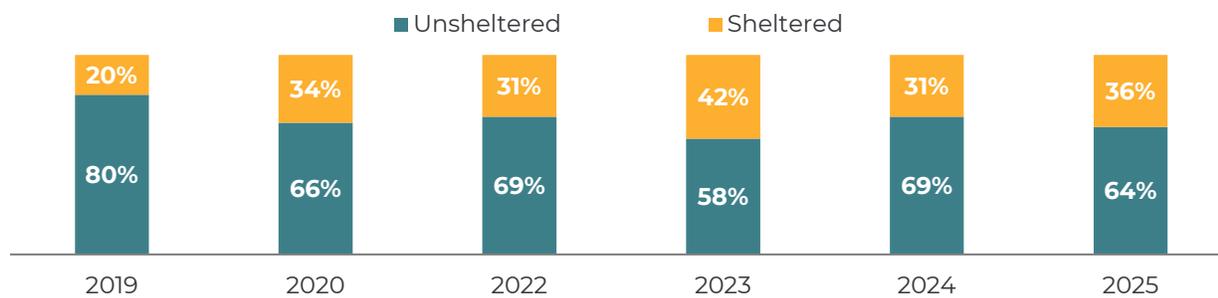
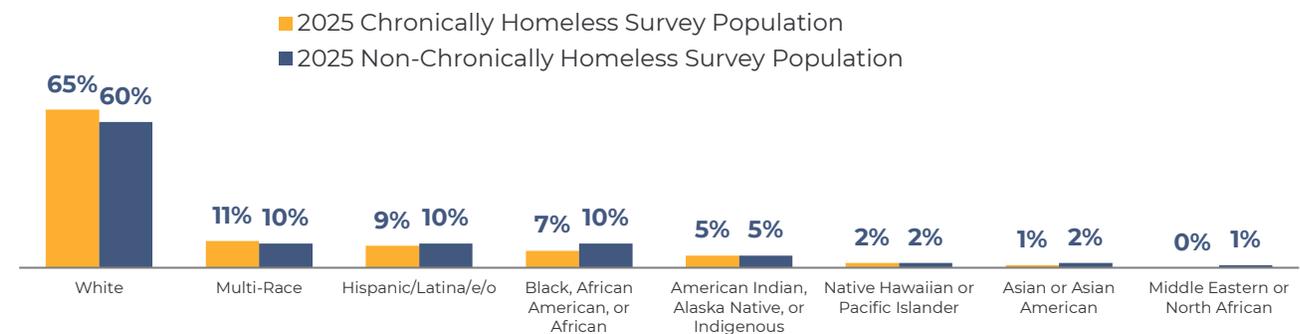


Figure 31: Number of Chronically Homeless Individuals by Shelter Status

	2019	2020	2022	2023	2024	2025	2024-25 % Change
Sheltered	138	174	224	231	189	265	40%
Unsheltered	537	334	501	319	417	465	12%
Total	675	508	725	550	606	730	20%

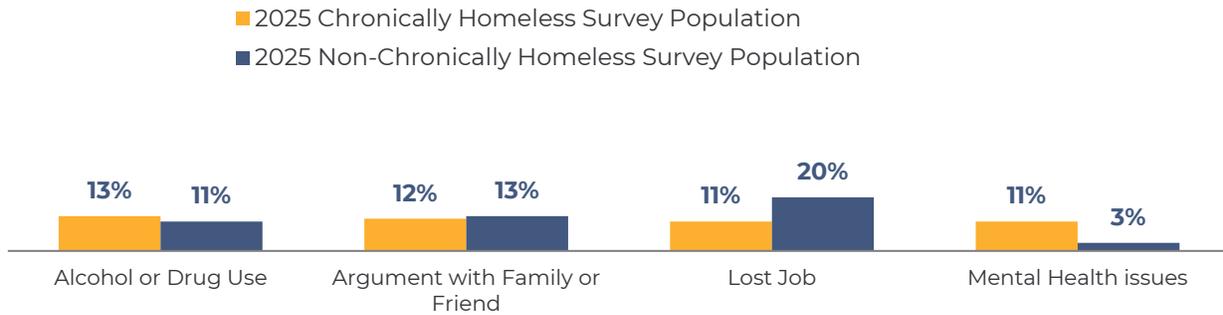
Figure 32: Chronically Homeless Survey Population by Race and Ethnicity



2025 Chronically Homeless Survey Population N =168; 2025 Non-Chronically Homeless Survey Population N = 194

The most common cause of homelessness amongst those experiencing chronic homelessness was alcohol or drug use (13%), followed by an argument with a family member or a friend (12%).

Figure 33: Primary Cause of Homelessness, Chronic and Non-Chronic Comparison (Top Four Responses)



2025 Chronically Homeless Survey Population N = 156; 2025 Non-Chronically Homeless Survey Population N = 183
 * Note: Beginning in 2025, respondents were asked only to shade one

VETERANS EXPERIENCING HOMELESSNESS

Many U.S. veterans experience conditions that place them at increased risk for homelessness. Veterans experience higher rates of Post-Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), sexual assault, and substance abuse. Veterans experiencing homelessness are more likely to live on the street than in shelters, and often remain on the street for extended periods of time.

After an increase in 2024, the number of veteran experiencing homelessness in Sonoma County decreased to 99 in 2025. Seventy-six percent of veterans were unsheltered.

Figure 34: Total Number of Veterans Experiencing Homelessness



Figure 35: Veterans Experiencing Homelessness by Shelter Status

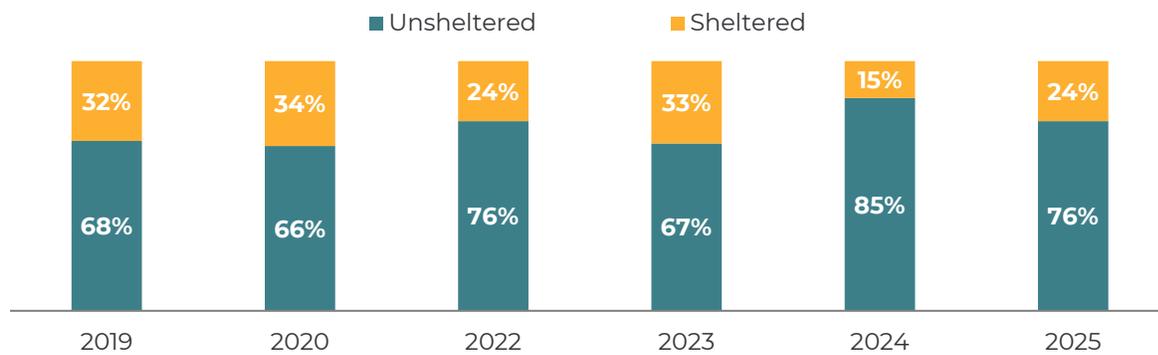
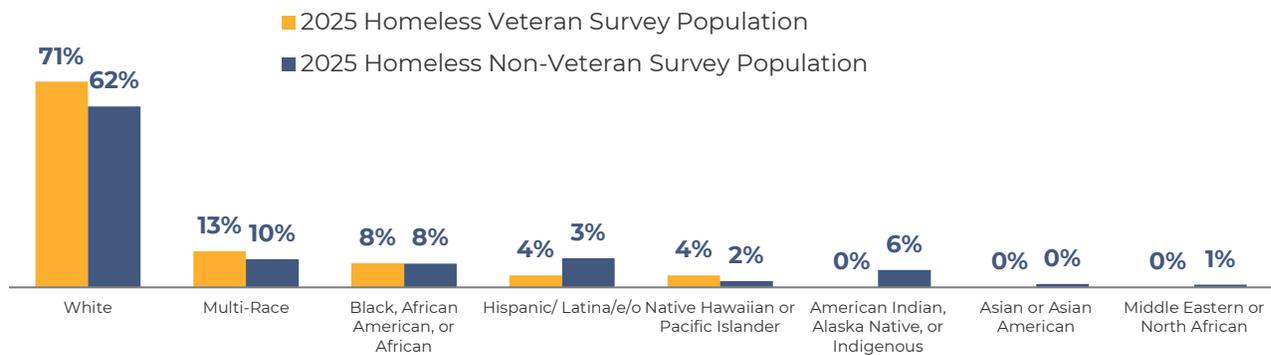


Figure 36: Number of Veterans Experiencing Homelessness by Shelter Status

	2019	2020	2022	2023	2024	2025	2024-25 % Change
Sheltered	68	47	45	36	24	24	0%
Unsheltered	142	92	146	74	138	75	-46%
Total	210	139	191	110	162	99	-39%



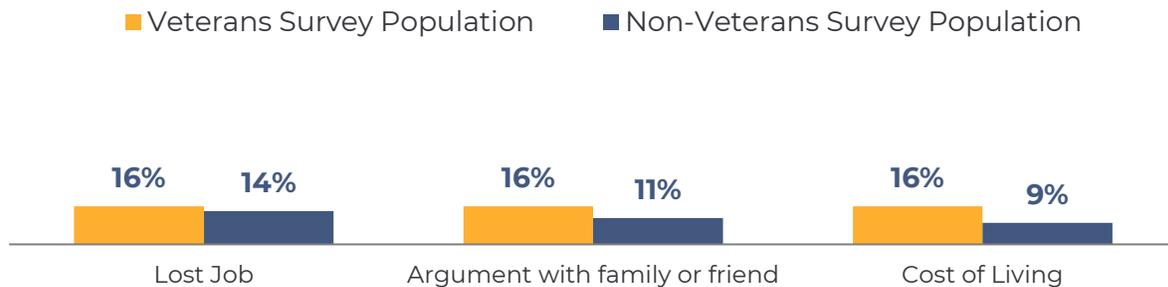
Figure 37: Veterans Experiencing Homelessness by Race/Ethnicity



2025 Homeless Veterans Survey Population N = 24; 2025 Non-Homeless Veterans Survey Population N = 329
 Note: Percentages may not add up to 100 due to rounding.

Veterans were more likely to cite loss of a job, an argument with family or a friend, and cost of living as the cause of their homelessness when compared to the non-Veteran population.

Figure 38: Primary Cause of Homelessness Among Veterans (Top Three Responses) *



2025 Homeless Veterans Survey Population N = 25; 2025 Homeless Non-Veterans Survey Population N = 335
 Note: Multiple response question. Percentages may not add up to 100.
 * Note: Beginning in 2025, respondents were asked only to shade one



FAMILIES WITH CHILDREN EXPERIENCING HOMELESSNESS

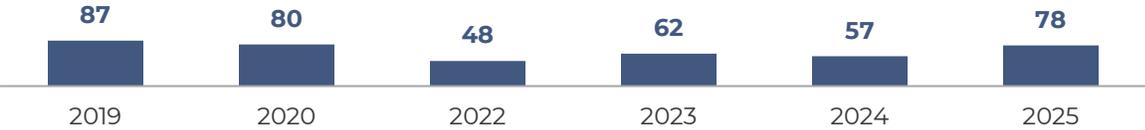
National data from 2020 suggest that 30% of all people experiencing homelessness are persons in families.⁴ Very few families experiencing homelessness are unsheltered, as public shelters serve more than 90% of homeless families in the United States; this is a significantly higher proportion of the population compared to other subpopulations, including unaccompanied children and transition-age youth. Data on families experiencing homelessness suggests that their circumstances are not much different from other families in poverty.

Nationally, the majority of homeless families are households headed by single women and families with children under the age of eighteen.⁵ Children in families experiencing homelessness have an increased incidence of illness and are more likely to have emotional and behavioral problems than children with stable living accommodations.⁶

Families experiencing homelessness can be difficult to identify and even harder to survey. Because of the wide array of supports available to them, families experiencing unsheltered homelessness frequently receive the support necessary to enter shelters or other housing options. This can lead to difficulties in surveying large numbers of families experiencing homelessness, resulting in survey data that may fluctuate more than that of other subpopulations. For example, while the local Point-in-Time (PIT) count captures families who meet HUD's definition of literal homelessness, local school districts identified 1,432 children experiencing homelessness under the McKinney-Vento Act, which uses a broader definition that includes families living doubled up or in temporary arrangements.⁷ While they're not included in the overall number, they still contribute to the overall understanding of children experiencing homeless in Sonoma County. This contrast underscores the challenges in fully capturing the scope of family homelessness. Please use caution when interpreting these results.

In 2025, there were 78 families with 209 family members experiencing homelessness in Sonoma County.

Figure 39: Total Families with Children Experiencing Homelessness, Census Population



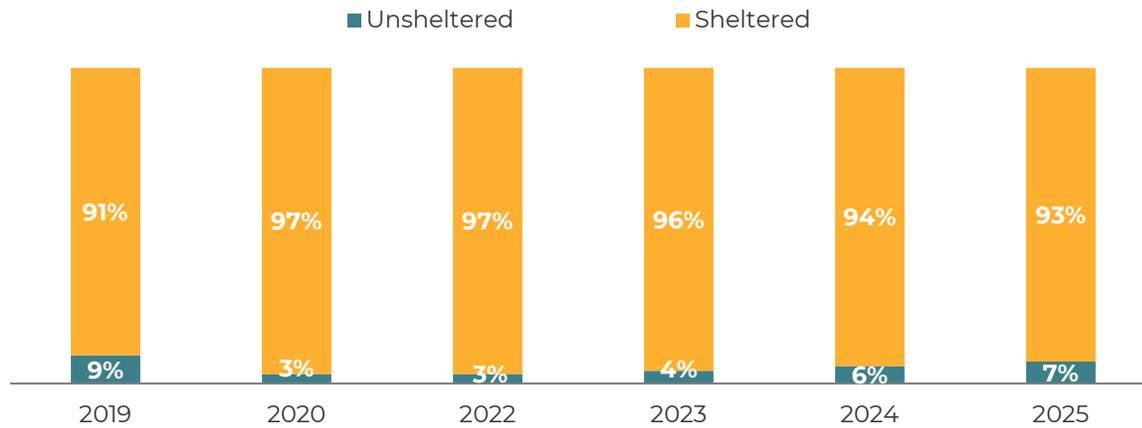
4 U. S. Department of Housing and Urban Development. (2020). The 2020 Annual Homeless Assessment Report (AHAR) to Congress. Retrieved 2023 from [chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.huduser.gov/portal/sites/default/files/pdf/2020-AHAR-Part-1.pdf](https://www.huduser.gov/portal/sites/default/files/pdf/2020-AHAR-Part-1.pdf)

5 U. S. Department of Housing and Urban Development. (2020). The 2020 Annual Homeless Assessment Report (AHAR) to Congress. Retrieved 2023 from [chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.huduser.gov/portal/sites/default/files/pdf/2020-AHAR-Part-1.pdf](https://www.huduser.gov/portal/sites/default/files/pdf/2020-AHAR-Part-1.pdf)

6 U.S. Interagency Council on Homelessness. (2015). Opening Doors. Retrieved 2015 from <http://www.usich.gov/>

7 Data Quest. California Department of Education (2024). Homeless Student Enrollment by Dwelling Type. Retrieved 2025 from <https://dq.cde.ca.gov/dataquest>

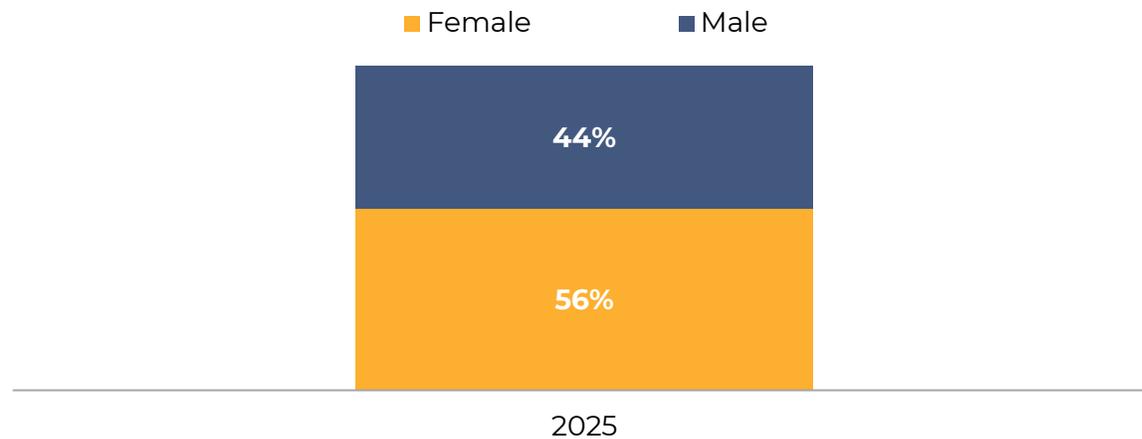
Figure 40: All Individuals in Families with Children Experiencing Homelessness by Shelter Status



	2019	2020	2022	2023	2024	2025	2024-25 % Change
Sheltered	253	227	150	194	187	194	4%
Unsheltered	26	8	5	9	11	15	36%
Total	279	235	155	203	198	209	6%

Note: Percent change is not presented due to the small number of individuals.

Figure 41: All Individuals in Families with Children Experiencing Homelessness by Gender



2019 N = 279; 2020 N = 235; 2022 N = 155; 2023 N = 203; 2024 N = 198; 2025 N = 207
 Note: Percentages may not add to 100 due to rounding.

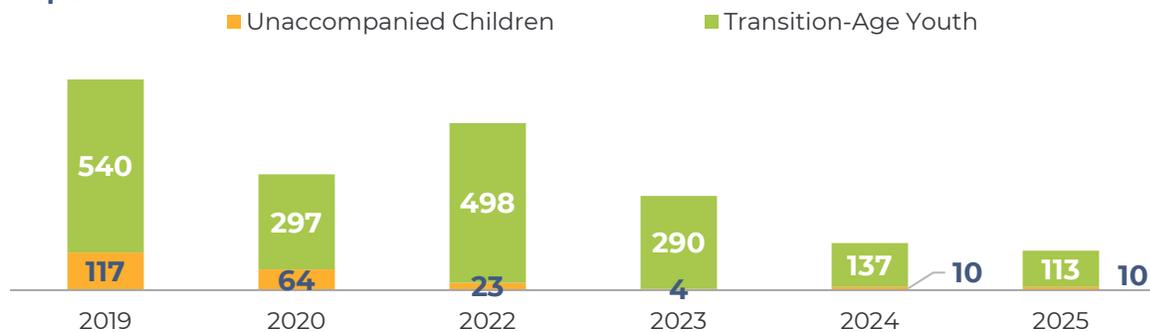
UNACCOMPANIED CHILDREN AND TRANSITION-AGE YOUTH EXPERIENCING HOMELESSNESS

Young people experiencing homelessness have a harder time accessing services, including shelter, medical care, and employment. Some reasons include the stigma of their housing situation, lack of knowledge of available resources, and a dearth of services targeted to young people.⁸

Due to the especially challenging outreach and access efforts necessary to profile the nature of youth homelessness, limited data are available on unaccompanied children and transition-age youth experiencing homelessness.

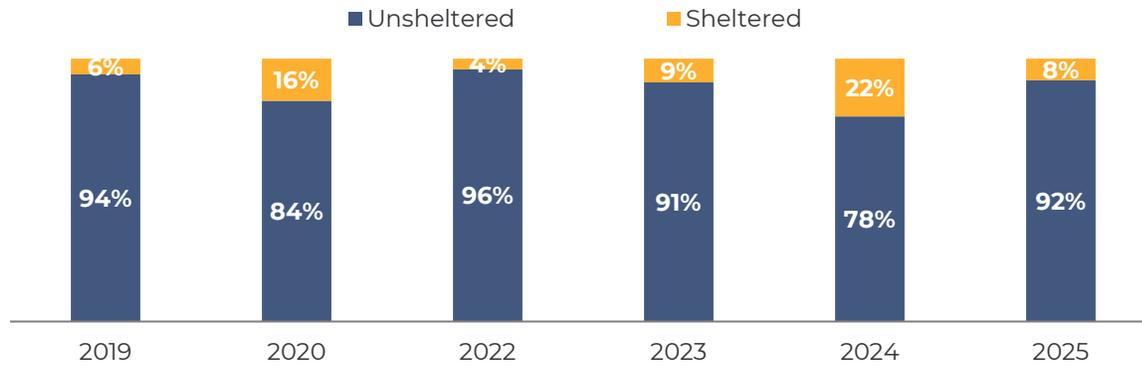
In Sonoma County, the number of children and transition-age youth continued a decrease from 2022, falling to 123 persons.

Figure 42: Total Unaccompanied Homeless Children and Transition-Age Youth Count Population



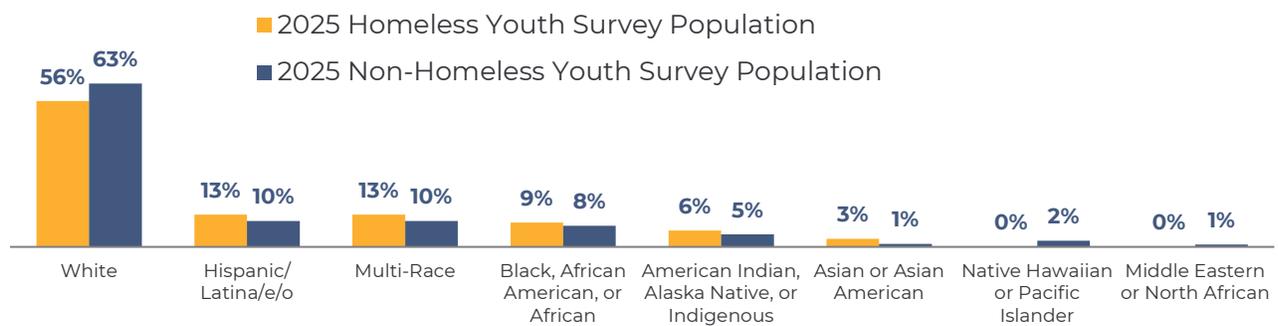
⁸ National Alliance to End Homelessness. (2022). Retrieved 2023
<https://endhomelessness.org/homelessness-in-america/who-experiences-homelessness/youth/>

Figure 43: Unaccompanied Children and Transition-Age Youth by Shelter Status



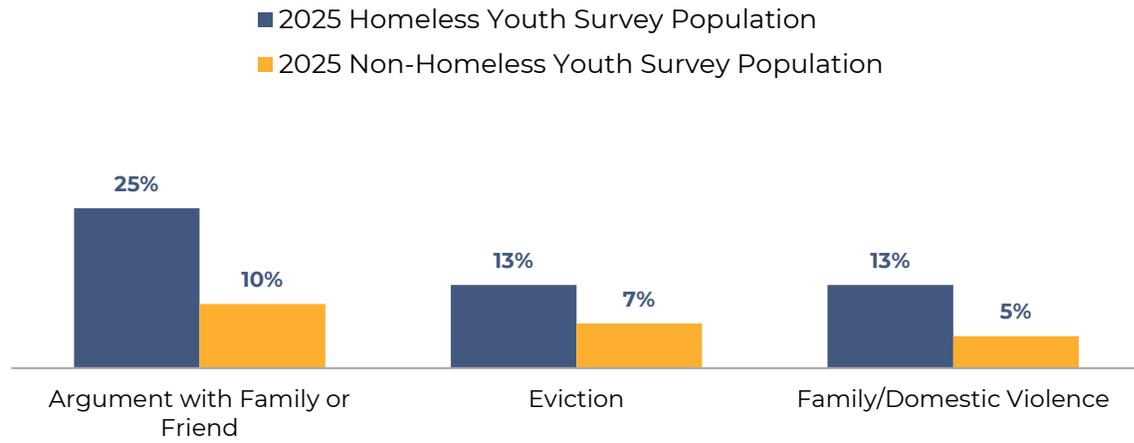
	2019	2020	2022	2023	2024	2025	2024-25 % Change
Sheltered	41	57	20	26	32	10	-69%
Unsheltered	616	304	501	268	115	113	-2%
Total	657	361	521	294	147	123	-16%

Figure 44: Unaccompanied Children and Transition-Age Youth by Race/Ethnicity



2025 Homeless Youth Survey N = 32; 2025 Non-Homeless Youth Survey N = 330
 Note: Multiple response question. Percentages may not add up to 100 due to rounding.

Figure 45: Primary Cause of Homelessness Among Unaccompanied Children and Transition-Age Youth



2025 Homeless Youth Survey Population N = 32; 2025 Non-Homeless Youth Survey Population N = 340
Note: Multiple response question. Percentages may not add up to 100.



CONCLUSION

The 2025 Sonoma County Homeless Count and Survey was performed using HUD-recommended practices for counting and surveying the homeless population. The 2025 Point-in-Time Count identified 1,952 persons experiencing homelessness in Sonoma County. This represents a decrease of 23% from the count conducted in 2023.

The 2025 Sonoma County Homeless Count and Survey revealed a diverse population with many different trends and needs. There are many valuable insights into the Sonoma County homeless population from the data collected in this report, including:

OVERALL CONCLUSIONS

- The sheltered count decreased by twelve percent and the unsheltered count decreased by twenty-nine percent.
- Eighty-nine percent of those experiencing homelessness entered into homelessness while living in Sonoma County.
- Forty-five percent of survey respondents experienced homelessness for the first time before age 25. Seventeen percent reported experiencing homelessness for the first time at age 50 or older.
- Sixteen percent of survey respondents cited job loss as the primary cause of their homelessness. Eighteen percent cited the complexity of the housing process as a barrier to securing permanent housing, while another fourteen percent pointed to a lack of employment or insufficient income as an obstacle.
- Ninety-seven percent of respondents who were unsheltered or staying in emergency shelter would move into housing if it were available. Sixty-six percent preferred housing without preconditions.

CONCLUSIONS BY SUBPOPULATIONS

Chronically Homeless

- The count of chronically homeless individuals increased 20% from 2024.

Veterans

- The number of veterans experiencing homelessness in Sonoma County decreased 39% from 162 individuals in 2024 to 99 in 2025.

Families with Children

- The number of families experiencing homelessness increased from 57 families in 2024 to 78 in 2025.

Unaccompanied Children and Transition-Age youth

- There were 10 unaccompanied children experiencing homelessness, and 113 transition age youth.

In summary, there are still many challenges to overcome in achieving the goal of eliminating homelessness in Sonoma County and in helping homeless individuals and families access necessary services and support. There are also significant successes, noticeably among subpopulations, including decreases in the numbers of Veterans experiencing homelessness and unaccompanied children and transition-age youth. While there are areas that still need more attention, the successes in reducing numbers in certain subpopulations show a path toward future reductions.

CLOSING

The 2025 Sonoma County Homeless Count and Survey provides valid and useful data that can help create a more comprehensive profile of those experiencing homelessness. The dissemination and evaluation of this effort will help the Sonoma County Homeless Coalition and all Sonoma County stakeholders continue to produce and refine constructive and innovative solutions to end homelessness and make it a rare, brief, and one-time occurrence. Through innovative and effective housing programs and services, Sonoma County remains committed to moving homeless persons into permanent housing.

Data presented in the 2025 Sonoma County Homeless Count and Survey report fulfills the Sonoma County Homeless Coalition's federal reporting requirements for Continuums of Care, and will continue to inform additional outreach, service planning, and policy decision-making by local planning bodies over the next year as Sonoma County continues to address homelessness.

APPENDIX A: METHODOLOGY

OVERVIEW

The 2025 County of Sonoma Homeless Census and Survey was performed using HUD-recommended practices and using HUD's definition of homelessness. The primary purpose was to produce a point-in-time estimate of individuals and families experiencing homelessness in Sonoma County, a region which covers approximately 1,768 square miles. The results of several components were combined to produce the total estimated number of persons experiencing homelessness on a given night. A detailed description of these components follows.

COMPONENTS OF THE HOMELESS CENSUS & SURVEY

The 2025 Point-in-Time Census and Survey had four components:

- **General Street Count:** A morning count of unsheltered homeless individuals and families on January 31, 2025. This occurred from approximately 5:00 AM to 10:00 AM and included those sleeping outdoors on the street; at bus and train stations; in parks, tents, and other makeshift shelters; and in vehicles and abandoned properties. The general street count was designed to take place before shelter occupants were released. In areas with shelters, the immediate area surrounding the shelter was prioritized to eliminate potential double counting of individuals.
- **General Shelter Count:** A nighttime count of individuals and families experiencing homelessness staying at publicly- and privately-operated shelters on the night of January 30, 2025. This included those who occupied emergency shelters, transitional housing, and safe havens. All shelter data were gathered either from Sonoma County's Homeless Management Information System or directly from the shelter.
- **Targeted Street Count of Unaccompanied Children and Young Adults:** An afternoon count of unsheltered youth and young adults on January 31, 2025. This occurred from approximately 3:00 PM to 7:00 PM and was led by special youth teams who canvassed specific areas where youth and young adults were known to congregate. Upon completion, data from this targeted count was carefully reviewed against the results from the general street count to ensure that any possible duplicate counts were removed.
- **Homeless Survey:** An in-person interview with sheltered and unsheltered individuals experiencing homelessness conducted by peer surveyors between January 31 and March 4, 2025. Data from the survey was used to refine the Point-in-Time Census estimates and then used to gain a more comprehensive understanding of the demographics and experiences of homeless individuals.

THE PLANNING PROCESS

To ensure the success and integrity of the count, many county and community agencies collaborated on community outreach, volunteer recruitment, logistical plans, methodological decisions, and interagency coordination efforts. Applied Survey Research (ASR) provided technical assistance for these aspects of the planning process. ASR has over 22 years of experience conducting homeless counts and surveys throughout California and across the nation. Their work is featured as a best practice in the HUD publication, *A Guide to Counting Unsheltered Homeless People*, as well as in the Chapin Hall at the University of Chicago publication, *Conducting a Youth Count: A Toolkit*.

COMMUNITY INVOLVEMENT

Local homeless and housing service providers and advocates were valued partners in the planning and implementation of this count. Thanks to local efforts, the count included enumerators with a diverse range of knowledge, including expertise regarding areas frequented by homeless individuals, individuals living in vehicles, and persons residing in encampments. Community partners were also key in recruiting individuals with lived experience of homelessness to participate in the street count and survey efforts.

STREET COUNT METHODOLOGY

DEFINITION

For the purposes of this study, the HUD definition of unsheltered homeless persons was used:

- *An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train stations, airport, or camping ground.*

METHODOLOGICAL IMPROVEMENTS

The 2025 street count methodology followed an established, HUD approved methodology used in the 2009, 2011, 2013, 2015, 2016, 2017, 2018, 2019, 2020, 2022, 2023, and 2024 counts, with the addition of dedicated youth outreach in each of those years. Local homeless and housing service providers and advocates were valued partners in the planning and implementation of this count.

VOLUNTEER AND GUIDE RECRUITMENT AND TRAINING

Outreach and program staff did recruitment of persons with lived experience to act as guides, and in some cases embedded reporters, in order to conduct the count in 2025. Homeless guides were paid \$20 for online training as well as \$20 per hour worked on the days of the count.

In order to participate in the count, all volunteers and guides were requested to view a 20-minute training video before the count. Training covered all aspects of the count including:

- definition of homelessness;
- how to identify homeless individuals;
- how to safely and respectfully conduct the count, how to use the smartphone app and also access the smartphone app training video;
- how to use the route maps to ensure the entirety of the assigned area was covered;
- tips to identify vehicles; and other tips to help ensure an accurate and safe count.

SAFETY PRECAUTIONS

Every effort was made to minimize potentially hazardous situations. Law enforcement agencies were notified of pending street count activity in their jurisdictions. In census tracts with a high concentration of homeless encampments, specialized teams with knowledge of those encampments were identified and assigned to those areas. Enumeration teams were advised to take every safety precaution possible, including bringing flashlights and maintaining a respectful distance from those they were counting.

LOGISTICS OF ENUMERATION

On the morning of the street count, teams of two or more persons deployed to enumerate designated areas of the county for the street count. Each team was composed of any combination of outreach workers, lived-experience guides, program staff and service-experienced community volunteers. Each team had a lead and prior to the count were provided with their assigned census tract maps, smartphone access information and training, field observation tips and guidelines, including vehicle identification criteria. Teams were instructed meet at one of the designated deployment sites to gather materials, ask last minute questions, and receive one more brief training review before their route assignments.

All accessible streets, roads, parks, and highways in the enumerated tracts were traversed by foot or car. The Sonoma County Survey 123 smartphone app was used to record the number of homeless persons observed in addition to basic demographic and location information. Dispatch center volunteers also verified that at least one person on each team had a cell phone available for their use during the count and recorded the number on the volunteer deployment assignment sheet. Teams were asked to cover the entirety of their assigned areas.

To ensure that the privacy of individuals experiencing homelessness was respected and that safety concerns were kept as a priority for enumeration teams, teams were asked to conduct observation-only counts and to not have any contact with individuals experiencing homelessness. When they encountered a structure or vehicle that they believed to be inhabited, they had the option to indicate that it was inhabited but that they didn't know the number or the demographic detail (age and gender) of its residents if this could be determined by the team. In order to determine the number of residents of these dwelling types, ASR uses the survey data from respondents who indicated they stayed in the named dwelling type. Demographic detail for those inhabitants is gathered from count data.

YOUTH STREET COUNT METHODOLOGY

GOAL

The goal of the 2025 dedicated youth count was to improve representation of unaccompanied homeless children and youth under the age of 25 in the Point-in-Time Count. Many homeless children and youth do not use homeless services, are unrecognizable to adult street count volunteers, and may be in unsheltered locations that are difficult to find. Therefore, traditional street count efforts are not as effective in reaching youth.

RESEARCH DESIGN

As in all years, planning for the 2025 supplemental youth count included homeless youth service providers and youth with lived experience of homelessness. Local service providers identified locations where homeless youth were known to congregate and recruited youth currently experiencing homelessness with knowledge of where to locate homeless youth to serve as guides for the count. Late afternoon and early evening enumeration was the ideal time recommended by advocates to conduct the youth count.

The Community Support Network, TLC Child & Family Services, Buckelew Programs, and the Sonoma County Department of Health Services Homelessness Services Division, IMDT SOUL took the lead in recruiting 7 youth to work as peer enumerators in addition to 6 youth service provider staff members who accompanied and transported the youth around the county. These teams counted homeless youth in the identified areas of Sonoma County on January 31, 2025.

Youth workers were paid \$20 per hour for their time, including time spent in training prior to the count. Youth and youth service provider staff members were trained on where and how to identify homeless youth as well as how to record the data.

DATA COLLECTION

It was determined that homeless youth would be more prominent on the street during daylight hours rather than in the early morning when the general count was conducted. The youth count was conducted from approximately 3:00 PM to 7:00 PM on January 31, 2025. Youth worked in teams of two to four, with teams coordinated by youth street outreach workers.

Both the U.S. Department of Housing and Urban Development and the United States Interagency Council on Homelessness recognize that youth do not commonly congregate with homeless adults and are not easily identified by non-youth. For this reason, these agencies accept and recommend that communities count youth at times when they can be seen rather than during traditional enumeration times.

STREET COUNT DE-DUPLICATION

Data from the supplemental youth count and general street count were compared and de-duplicated by assessing location, gender, and age.

SHELTER COUNT METHODOLOGY

GOAL

The goal of the shelter and institution count is to gain an accurate count of persons temporarily housed in shelters and other institutions across Sonoma County. These data are vital to gaining an accurate, overall count of the homeless population and understanding where homeless persons receive shelter.

DEFINITION

For the purposes of this study, the HUD definition of sheltered homelessness for Point-in-Time Counts was used. This definition includes individuals and families living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements.

RESEARCH DESIGN

The homeless occupancy of shelters in Sonoma County was collected for the night of January 30, 2025. All shelter data were gathered either directly from the shelter or from Sonoma County's Homeless Management Information System.

CHALLENGES

There are many challenges in any homeless enumeration, especially when implemented in a community as large and diverse as Sonoma County. Point-in-Time Counts are "snapshots" that quantify the size of the homeless population at a given point during the year. Hence, the count may not be representative of fluctuations and compositional changes in the homeless population seasonally or over time.

For a variety of reasons, homeless persons generally do not wish to be seen and make concerted efforts to avoid detection. Regardless of how successful outreach efforts are, an undercount of the homeless population will result, especially of hard-to-reach subpopulations such as families and youth.

The methods employed in a non-intrusive visual homeless enumeration, while academically sound, have inherent biases and shortcomings. Even with the assistance of dedicated homeless service providers, the methodology cannot guarantee 100% accuracy. Many factors may contribute to missed opportunities, for example:

- It is difficult to identify homeless persons who may be sleeping in vans, cars, recreational vehicles, abandoned buildings, or structures unfit for human habitation.
- Homeless families with children often seek opportunities to stay on private property, rather than sleep on the streets, in vehicles, or in makeshift shelters.

Even though the Point-in-Time Count is most likely to be an undercount of the homeless population, the methodology employed—coupled with the homeless survey—is the most comprehensive approach available.

SURVEY METHODOLOGY

PLANNING AND IMPLEMENTATION

A survey of individuals experiencing homelessness was conducted between January 31 and March 4, 2025 to yield qualitative data about people experiencing homelessness in Sonoma County. This data is used for the McKinney-Vento Continuum of Care Homeless Assistance funding application and are important for future program development and planning.

The survey elicited information such as gender, family status, military service, duration and recurrence of homelessness, nighttime accommodations, causes of homelessness, and access to services through open-ended, closed-ended, and multiple response questions. The survey data bring greater perspective to current issues of homelessness and to the provision and delivery of services.

Surveys were conducted by shelter providers, outreach teams, and peer survey workers with lived homeless experience. Training sessions were facilitated by Applied Survey Research, Sonoma County staff, and community partners. Potential interviewers were led through a comprehensive orientation that included project background information as well as detailed instruction on respondent eligibility, interviewing protocol, and confidentiality. Peer survey workers were compensated at a rate of \$10 per completed survey.

It was determined that survey data would be more easily obtained if an incentive gift was offered to respondents in appreciation for their time and participation. \$10 gift cards were provided as an incentive for participating in the 2025 homeless survey.

SURVEY SAMPLING

Based on a Point-in-Time Count estimate of 1,952 homeless persons, with a randomized survey sampling process, the 372 valid surveys represented a confidence interval of +/- 5% with a 95% confidence level when generalizing the results of the survey to the estimated population of individuals experiencing homelessness in Sonoma County.

The 2025 survey was administered in shelters, transitional-housing facilities, and on the street. In order to ensure the representation of transitional-housing residents, who can be underrepresented in a street-based survey, survey quotas were created to reach individuals and heads of family households living in these programs.

Strategic attempts were also made to reach individuals in various geographic locations and of various subset groups such as homeless youth, minority ethnic groups, military veterans, domestic violence survivors, and families. One way to increase the participation of these groups was to recruit peer survey workers. Since 2009, the ASR survey methodology has prioritized a peer-to-peer approach to data collection by increasing the number of currently homeless surveyors.

In order to increase randomization of sample respondents, survey workers were trained to employ an “every third encounter” survey approach. Survey workers were instructed to approach every third person they considered to be an eligible survey respondent. If the person declined to take the survey, the survey worker could approach the next eligible

person they encountered. After completing a survey, the randomized approach was resumed.

DATA COLLECTION

Care was taken by interviewers to ensure that respondents felt comfortable regardless of the street or shelter location where the survey occurred. During the interviews, respondents were encouraged to be candid in their responses and were informed that these responses would be framed as general findings, would be kept confidential, and would not be traceable to any single individual.

DATA ANALYSIS

The survey requested respondents' initials and date of birth so that duplication could be avoided without compromising the respondents' anonymity. Upon completion of the survey effort, an extensive verification process was conducted to eliminate duplicates. This process examined respondents' date of birth, initials, gender, ethnicity, length of homelessness, and consistencies in patterns of responses to other survey questions.

SURVEY CHALLENGES AND LIMITATIONS

There may be some variance in the data that individuals experiencing homelessness self-reported. However, using a peer-interviewing methodology is believed to allow the respondents to be more candid with their answers and may help reduce the uneasiness of revealing personal information. Further, service providers and county staff members recommended individuals who would be the best suited to conducting interviews and these individuals received comprehensive training about how to conduct interviews. Service providers and county staff also reviewed the surveys to ensure quality responses. Surveys that were considered incomplete or containing false responses were not accepted.

This year, we transitioned from using paper surveys to administering surveys electronically. As a result of this shift, we observed changes in response patterns for certain questions. These percentage shifts may be attributed to differences in how respondents interact with electronic surveys compared to paper formats, including variations in accessibility and response behavior. This change in format should be considered when interpreting year-over-year comparisons.

APPENDIX B: DEFINITIONS AND ABBREVIATIONS

Chronic homelessness – Defined by HUD as an unaccompanied individual or head of a family household with a disabling condition who has either continuously experienced homelessness for a year or more or has experienced at least four episodes of homelessness totaling 12 months in the past three years.

Disabling condition – Defined by HUD as a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that is expected to be long-term and impacts the individual's ability to live independently; a developmental disability; or HIV/AIDS.

Emergency shelter – Temporary accommodation for people experiencing homelessness, either in a shelter facility or through the use of stabilization rooms. Emergency shelter is short-term, usually for 180 days or fewer. Domestic violence shelters are typically considered a type of emergency shelter, as they provide safe, immediate housing for survivors and their children.

Family – A household with at least one adult and one child under the age of 18.

Homeless – Under the Category 1 definition of homelessness in the HEARTH Act, includes individuals and families living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements, or with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground.

HUD – Abbreviation for the U.S. Department of Housing and Urban Development.

Precariously housed – A person who is staying with the household because they have no other regular or adequate place to stay due to a lack of money or other means of support.

Sheltered homeless individuals – Individuals who are living in emergency shelters or transitional housing programs.

Single individual – An unaccompanied adult over the age of 18.

Transition-age youth (TAY) – Young people between the ages of 18 and 24 years old who are not accompanied by a parent or guardian.

Transitional housing – Housing in which homeless individuals may live up to 24 months and receive supportive services that enable them to live more independently. Supportive services, which help promote residential stability, increased skill level or income, and greater self-determination, may be provided by the organization managing the housing, or coordinated by that organization and provided by other public or private agencies. Transitional housing can be provided in one structure or several structures at one site, or in multiple structures at scattered sites.

Unaccompanied children – Children under the age of 18 who are not accompanied by a parent or guardian and are not a parent presenting with or sleeping in the same place as their own child(ren).

Unsheltered homeless individuals – Individuals who are living on the streets, in abandoned buildings, storage structures, vehicles, encampments, or any other place unfit for human habitation.