League of Women Voters of Santa Monica

Homelessness Study Guide 2016-2018

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Table of Contents

1. Introduction. ................................................................. 3
2. Methodology, Scope, and Focus of Study. ................................ 3
4. Demographics of Local & Area Homelessness. ............................ 7
5. Social and Economic Impacts of Homelessness. .......................... 16
6. Homelessness and Public Health. .......................................... 21
7. Current Approaches to Homelessness. ....................................... 23
8. Timeline- Historical Context ................................................. 31
9. Appendix A. ......................................................................... 35
   • LWV-LAC, LWVC, and LWV Positions Pertaining to Homelessness
10. Appendix B. ................................................................. 41
    • Santa Monica City Ordinances Pertaining to Homelessness
11. Appendix C. ................................................................. 54
    • Examples of Community Opinions
12. Appendix D. ................................................................. 65
    • Questions to Panel at Forum on Homelessness November 2017
13. Bibliography and Suggested Resources ................................. 69
Introduction

The League of Women Voters of Santa Monica periodically performs studies regarding topics of interest on the local level. We use these in-depth studies to form policy positions, which then permit us to support or oppose (or remain neutral) on legislative actions. In Santa Monica, a big topic of interest often cited for its high visibility is homelessness. The LWVSM does currently have a policy position on the topic of homelessness; however, the current position was adopted pre-1985. Homelessness and its impacts on Santa Monica have changed since (pre)1985. The approaches to work towards solving the issue have evolved along with the demographics, causes, and impacts.

Methodology, Scope, and Focus of Study

We are doing this study to look into the issue of homelessness to determine what we, as the LWVSM, believe to be the best practices in response to homelessness. We will determine what types of solutions we can support. We accomplish this by doing a deep dive on the issue utilizing resources from the public, private, and nonprofit sectors. We have interviewed individuals affiliated with different agencies in these different sectors, as well as researched perspectives from individuals whose lives have been touched by homelessness. We have read articles and reports from news sources, governmental agencies, and nonprofits. By participating in this study, you will get to read these same materials and summaries (or transcripts) of interviews we have done. As a group, we will answer our consensus questions and the study committee will use these answers to craft a policy position that will then be submitted to the LWVSM board for approval.

Why Now?

In Santa Monica, homelessness has been getting worse and creating a greater impact on all Santa Monicans’ lives. In fact, per the annual Santa Monica homeless count performed in January 2018, the number of homeless individuals in Santa Monica is at the highest level since the city began doing the annual count in 2009.\(^1\)\(^2\)

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Geographical Context

While our study is focused on Santa Monica, we must also acknowledge that homelessness is not only a Santa Monica problem. As we are bordered on three sides by Los Angeles, we must also consider the issue within the greater context of Los Angeles County. Although Santa Monica does have some topographic differences compared to other neighborhoods and cities in the greater Los Angeles area (such as our mild weather, beach, and mix of public transit options), homelessness does not see borders. Our problems are the problems of the greater LA area and the problems of the greater LA area are ours. Additionally, we may reference how other cities have attempted to tackle the issue of homelessness. For example, Los Angeles has a lower number of individuals experiencing homelessness than New York, but the problem has been described, at least anecdotally, to be much more visible in Los Angeles due to New York having a “right to shelter law” so a higher percentage of individuals experiencing homelessness in Los Angeles are unsheltered each night.

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3 Right to Shelter Law: New York’s Right to Shelter Law requires that every individual that is eligible for services have access to temporary emergency shelter every night. The details of eligibility for services are listed in New York State Law Title 18, Chapter II, Subchapter B, Article 1, Part 352.35
What Will This Study Examine?

Homelessness affects a wide assortment of people and has many impacts on everyone who interacts with the issue. There are so many secondary impacts of homelessness that it touches nearly all aspects of our lives. Homelessness can be approached through many lenses: public health issue, housing issue, mental health issue, educational issue, public safety issue, occupational issue, financial issue. Within the realm of homelessness, there are many intersecting problems and to examine them all to the league’s degree of thoroughness would likely take years so our committee determined a feasible scope of study. Although this study will not focus on issues outside of the scope, we may still utilize resources outside our scope of study to further inform what we need to look at.

Scope of Study

The study committee decided upon the following scope of study:

**Scope of Study**

1. A *review of the current position and identification of areas in need of update, study, or deletion*
2. An *exploration of the intersections among homelessness, affordable housing, socioeconomic factors and services such as mental health care*
3. An *analysis of initiatives to address the cycle of chronic homelessness since the original study, including the move from transitional emergency housing to permanent supportive housing*
4. The *relationship between local and regional efforts to address homelessness.*

We will explore how homelessness intersects with affordable housing, socio-economic factors, and mental health care. Is there a specific type of housing that is best suited to helping individuals and families experiencing homelessness? Do we need to focus our efforts on certain types of solutions over others? What are the reasons for homelessness? What are the impacts to the community for both those experiencing homelessness and those interacting with homeless individuals?

Through this study we have learned the approximate scale of the initiatives currently addressing homelessness. We will research the changes in demographics and the
anecdotal understanding of chronic homelessness becoming more of an issue than the previously more predominant temporary, transitional, or situational homelessness. Has the problem truly shifted to this dynamic? If so, what is needed to address the wide swaths of problems a person or family experiencing homelessness can face?

There are many governmental, quasi-governmental, and private entities that are currently working towards alleviating this issue. What agencies are involved? What do they do? What are they currently not doing that they should be? How should these different agencies work (together or individually)? How are they currently funded and how should they be funded? How much funding is actually needed? What are the fiscal impacts of homelessness?

**Current Policy Position**

**Why Does Our Current Policy Position Need to Be Updated?**

We believe our current position on homelessness is not as relevant to the issue today as it is reflective of the nature of homelessness when it was adopted (pre-1985). For example, our current position appears to suggest that homeless individuals are primarily mentally ill. This perspective makes sense when looking at the (national) historical context:

*From 1833 through 1963, mental hospitals were mostly state institutions but in 1963, Congress established medicare and medicaid, which in some ways encouraged these institutions to discharge patients so the cost of taking care of them could shift to the federal government.*

4 This caused some issues[^1] so in 1980, President Carter signed into law the Mental Health Systems Act (MHSA), a piece of legislation that provided block grants to mental health centers.[^2] However, in 1981, President Reagan repealed the MHSA, effectively shuttering mental health hospitals by eliminating their funding. Many have hypothesized that the emptying of these mental hospitals greatly contributed to homelessness since these institutions had been caring for individuals who did not have anywhere place to go, and thus became homeless. This was the beginning of the perspective that homelessness and mental illness are inextricably linked.


[^3]: [http://www.presidency.ucsb.edu/ws/?pid=45228](http://www.presidency.ucsb.edu/ws/?pid=45228)
In our initial review of our current position, we also noted that a major focus was the support of temporary, transitional, or “emergency” housing. This indicates that homelessness was viewed as a short-term or transient problem. Perhaps this is when the adjective “transient” took on a second role as a noun. If the concept of chronic or long-term homelessness existed in the 1980s, it was not on the levels that our society is currently dealing with.

8. HOMELESS (Adopted Pre--1985)

The LWVSM promotes the following:

A. Efforts by the city to expand federal, state, and county resources to provide facilities for the mentally ill.
B. Expanded use of city funds for outreach teams, whose members encourage homeless to seek and use existing services.
C. Efforts by the city to expand federal, state and county resources to provide transitional housing. Efforts by the city to coordinate area-wide approaches to solve the transitional housing needs.
D. The concept of city support for emergency housing.
E. City funding of social services for the homeless.
F. Expanded city funding for runaway youth, homeless families and those responsive to short-term type services.
G. Continued assistance of social service agencies which serve the homeless.

Current LWVSM Local Policy Position on Homelessness

Demographics of Local and Area Homelessness

The issue of persons impacted by homelessness in Santa Monica and in Greater Los Angeles is perennially and notoriously complex. Efforts to address the issue and its myriad challenges are further complicated by its multifaceted demographic. Further, the collection of demographic data is both essential and extremely challenging for each service entity involved.

The demographics of homelessness in Santa Monica and in Greater Los Angeles, are essential data in

1. Identifying clients experiencing homelessness
2. Analyzing trends in demographic changes
3. Fine tuning community resources to address homelessness
4. Anticipating community needs and challenges
Demographic data have been gathered traditionally by an annual “count”, both in Santa Monica and in Los Angeles County. While the resources to gather and develop them are moderate on the local level, data collected gain additional value when enriched by that sourced by LA County, the State of CA, and the Federal Government.

GREATER LOS ANGELES

A Joint Powers Authority of the Los Angeles County Board of Supervisors and the Los Angeles City Council and Mayor, known as the Los Angeles Homeless Services Authority (LAHSA), conducts an annual count. In January 2017, LAHSA partnered with the University of Southern California to develop a scientific method of collecting and analyzing data across Greater Los Angeles⁷.

The three-day effort involved more than 7500 volunteers collecting more than 5000 interviews, in interactions with persons on the streets and in shelters, transitional housing, hospitals, and correctional facilities, with a separate emphasis on counting, rather than sampling, the youth population, both those under 18 and ages 18-24, both sheltered and unsheltered. The project featured actual point-in-time counts, as well as demographic interviews. The collected data is available on the LAHSA website with a number of useful breakdowns, including an analysis of a Service Planning Area which includes Santa Monica (SPA5 “West LA”), as well as a breakdown of Santa Monica’s 19 Census Tracts.

In the following analysis of SPA5, nearly 79% (4,331) of the total counted are on the streets, unsheltered. Among 5,511 individuals, 691 are family members, and 5 are unaccompanied minors. The significant populations (and these categories overlap) are the chronically homeless (1,811); those experiencing serious mental illness (1,836); the ill and disabled (1,259 chronically ill, 766 disabled, 362 having suffered a brain injury); veterans (1026); and victims of domestic/intimate partner violence (1916). Less significant numbers involve chronically homeless family members (26) and HIV/AIDS sufferers (49).

For the numbers provided for Santa Monica’s Census Tracts, there is a similar percentage of unsheltered (72%), with the vast majority (466) on the streets without tents, cars, RVs, etc.
SANTA MONICA
A separate count by the City of Santa Monica covered the City in one day in January 2017, involving more than 250 citizen volunteers and City staff. Local officials are clear that while Santa Monica’s annual demographic count is “anecdotal”, and not scientific, it is reflective of trends revealed in more rigorously collected regional censuses, including that of LAHSA, which showed for SPA5 a 23% increase (from 2600 to 3192 individuals) in the street population alone in 2017. The City’s published results include valuable demographic charts tracking the issue over recent years.
The Santa Monica count totals reflect a return to the high numbers of 2009, with a 26% increase from 2016. Of the individuals counted, 63% were on the streets, unsheltered. (An analysis of the years from 2009-2017 indicates that a “flip”, with more reported individuals on the street, in vehicles and in encampments than in shelters and institutions, has increased over the past three years.).
Demographic Data

• 29% Homeless histories of 1-5 years, 36% 5+yrs
• 46% Arriving from LA County, 32% out of state
• Arriving by Bus (54%), Expo (13%), Bike/Walk (12%)
• 16% Seeking homeless services

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</tr>
</thead>
<tbody>
<tr>
<td>Street Count—Individuals</td>
<td>391</td>
<td>264</td>
<td>253</td>
<td>264</td>
<td>316</td>
<td>299</td>
<td>329</td>
<td>343</td>
<td>489</td>
</tr>
<tr>
<td>Street Count—Vehicles/Encampments</td>
<td>89</td>
<td>55</td>
<td>51</td>
<td>52</td>
<td>64</td>
<td>57</td>
<td>73</td>
<td>73</td>
<td>92</td>
</tr>
<tr>
<td>Street Count Sub-Total</td>
<td>480</td>
<td>319</td>
<td>314</td>
<td>316</td>
<td>380</td>
<td>346</td>
<td>402</td>
<td>416</td>
<td>581</td>
</tr>
<tr>
<td>Shelter &amp; Emergency Motel Count</td>
<td>428</td>
<td>420</td>
<td>424</td>
<td>426</td>
<td>392</td>
<td>388</td>
<td>329</td>
<td>304</td>
<td>335</td>
</tr>
<tr>
<td>Institution (Hospital) Count</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Institution (Jail) Count</td>
<td>5</td>
<td>1</td>
<td>2</td>
<td>6</td>
<td>5</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Shelter &amp; Institution Subtotal</td>
<td>435</td>
<td>423</td>
<td>426</td>
<td>453</td>
<td>400</td>
<td>396</td>
<td>336</td>
<td>312</td>
<td>340</td>
</tr>
<tr>
<td>Street, Shelter &amp; Institution Counts</td>
<td>915</td>
<td>742</td>
<td>740</td>
<td>759</td>
<td>780</td>
<td>742</td>
<td>738</td>
<td>728</td>
<td>921</td>
</tr>
</tbody>
</table>
In conjunction with the city-wide counts, Santa Monica demographic surveys for 2016 (133 unduplicated individuals surveyed over three nights) and 2017 (188 unduplicated individuals surveyed during daytime hours) have been broken down into percentages of gender, race, age groups (17 and over), military service, length of homelessness, previous residencies, local and public benefits received, self-reported medical conditions, and methods of transportation used to arrive in Santa Monica.

Of those counted, 65% have been homeless for more than a year; 39% have been homeless for more than a year in Santa Monica. Of particular note, less than 10% of the individuals counted reported their last permanent housing in Santa Monica, perhaps indicating that loss of affordable housing in the City is not the greatest causation of the local homeless population; the largest numbers are from elsewhere in LA County (46%) or from out of state (32%); 54% arrived by bus, in comparison to 13% by the Metro Expo Line (contradicting a misperception that the relatively new Expo Line would result in a large influx of homeless). 15% of those counted are veterans; 44% suffer from mental illness.
## Santa Monica Homeless Count

**Demographic Survey Findings**

Demographic survey data was collected in conjunction with the 2016 Homeless Count (133 unduplicated individuals surveyed over three nights) and 2017 Homeless Count (188 unduplicated individuals surveyed during daytime hours). Respondents frequently cited the following barriers to housing: unemployment, inability to afford rent/moving costs, the housing process being too difficult, and the lack of available housing.

<table>
<thead>
<tr>
<th>Year</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responses Collected</td>
<td>133</td>
<td>188</td>
<td></td>
</tr>
</tbody>
</table>

### Gender

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>74%</td>
<td>83%</td>
<td>9%</td>
</tr>
<tr>
<td>Female</td>
<td>26%</td>
<td>15%</td>
<td>-11%</td>
</tr>
<tr>
<td>Other / Refused</td>
<td>0%</td>
<td>2%</td>
<td>2%</td>
</tr>
</tbody>
</table>

### Race

<table>
<thead>
<tr>
<th>Race</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>50%</td>
<td>47%</td>
<td>-3%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>16%</td>
<td>28%</td>
<td>12%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>15%</td>
<td>4%</td>
<td>-11%</td>
</tr>
<tr>
<td>Multiple Races</td>
<td>6%</td>
<td>3%</td>
<td>-3%</td>
</tr>
<tr>
<td>American Indian / Alaskan</td>
<td>5%</td>
<td>2%</td>
<td>-3%</td>
</tr>
<tr>
<td>Don’t know / Refused</td>
<td>8%</td>
<td>16%</td>
<td>8%</td>
</tr>
</tbody>
</table>

### Hispanic

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>27%</td>
<td>16%</td>
<td>-11%</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Age

<table>
<thead>
<tr>
<th>Age</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-24</td>
<td>10%</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>25-54y</td>
<td>71%</td>
<td>61%</td>
<td>-10%</td>
</tr>
<tr>
<td>55-61</td>
<td>9%</td>
<td>12%</td>
<td>3%</td>
</tr>
<tr>
<td>62+</td>
<td>8%</td>
<td>9%</td>
<td>1%</td>
</tr>
<tr>
<td>Don’t know / Refused</td>
<td>2%</td>
<td>3%</td>
<td>1%</td>
</tr>
</tbody>
</table>

### Veteran

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>10.5%</td>
<td>15.0%</td>
<td>4.5%</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Length of homelessness in Santa Monica

<table>
<thead>
<tr>
<th>Length of Homelessness in Santa Monica</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 month</td>
<td>25%</td>
<td>29%</td>
<td>4%</td>
</tr>
<tr>
<td>1-6 months</td>
<td>19%</td>
<td>20%</td>
<td>1%</td>
</tr>
<tr>
<td>6-12 months</td>
<td>11%</td>
<td>10%</td>
<td>-1%</td>
</tr>
<tr>
<td>1-5 years</td>
<td>22%</td>
<td>17%</td>
<td>-5%</td>
</tr>
<tr>
<td>5 years or more</td>
<td>19%</td>
<td>22%</td>
<td>3%</td>
</tr>
<tr>
<td>Don’t know / Refused</td>
<td>4%</td>
<td>2%</td>
<td>-2%</td>
</tr>
</tbody>
</table>

### Length of overall homelessness

<table>
<thead>
<tr>
<th>Length of Overall Homelessness</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 month</td>
<td>10%</td>
<td>11%</td>
<td>1%</td>
</tr>
<tr>
<td>1-6 months</td>
<td>17%</td>
<td>11%</td>
<td>-6%</td>
</tr>
<tr>
<td>6-12 months</td>
<td>11%</td>
<td>10%</td>
<td>-1%</td>
</tr>
<tr>
<td>1-5 years</td>
<td>32%</td>
<td>29%</td>
<td>-3%</td>
</tr>
<tr>
<td>5 years or more</td>
<td>30%</td>
<td>36%</td>
<td>6%</td>
</tr>
<tr>
<td>Don’t know / Refused</td>
<td>0%</td>
<td>3%</td>
<td>3%</td>
</tr>
</tbody>
</table>

### Location of last permanent housing

<table>
<thead>
<tr>
<th>Location of Last Permanent Housing</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Santa Monica</td>
<td>17%</td>
<td>9%</td>
<td>-8%</td>
</tr>
<tr>
<td>Elsewhere in LA County</td>
<td>32%</td>
<td>31%</td>
<td>-1%</td>
</tr>
<tr>
<td>Another part of CA</td>
<td>16%</td>
<td>14%</td>
<td>-2%</td>
</tr>
<tr>
<td>Out of State</td>
<td>31%</td>
<td>42%</td>
<td>11%</td>
</tr>
<tr>
<td>Don’t know / Refused</td>
<td>4%</td>
<td>4%</td>
<td>0%</td>
</tr>
</tbody>
</table>

### Location prior to arriving in Santa Monica

<table>
<thead>
<tr>
<th>Location Prior to Arriving in Santa Monica</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Originated from SM</td>
<td>3%</td>
<td>5%</td>
<td>2%</td>
</tr>
<tr>
<td>Elsewhere in LA County</td>
<td>52%</td>
<td>46%</td>
<td>-6%</td>
</tr>
<tr>
<td>Another part of CA</td>
<td>12%</td>
<td>15%</td>
<td>3%</td>
</tr>
<tr>
<td>Out of State</td>
<td>29%</td>
<td>32%</td>
<td>3%</td>
</tr>
<tr>
<td>Don’t know / Refused</td>
<td>4%</td>
<td>2%</td>
<td>-2%</td>
</tr>
</tbody>
</table>

### Receiving services from a Santa Monica agency

<table>
<thead>
<tr>
<th>Receiving Services from a Santa Monica Agency</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>56%</td>
<td>54%</td>
<td>-2%</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td></td>
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</tbody>
</table>

### Receiving public benefits

<table>
<thead>
<tr>
<th>Receiving Public Benefits</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>56%</td>
<td>39%</td>
<td>-17%</td>
</tr>
<tr>
<td>No</td>
<td></td>
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</tbody>
</table>

### Self-reported medical conditions

<table>
<thead>
<tr>
<th>Self-reported Medical Conditions</th>
<th>2016</th>
<th>2017</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental health issues</td>
<td>45%</td>
<td>44%</td>
<td>-1%</td>
</tr>
<tr>
<td>Substance use disorders</td>
<td>24%</td>
<td>22%</td>
<td>-2%</td>
</tr>
<tr>
<td>Medical conditions</td>
<td>30%</td>
<td>22%</td>
<td>-8%</td>
</tr>
<tr>
<td>Co-occurring disorders</td>
<td>29%</td>
<td>20%</td>
<td>-9%</td>
</tr>
</tbody>
</table>

### Mode of transportation to Santa Monica

<table>
<thead>
<tr>
<th>Mode of Transportation to Santa Monica</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bus</td>
<td>-</td>
<td>54%</td>
</tr>
<tr>
<td>Metro Expo Line</td>
<td>-</td>
<td>13%</td>
</tr>
<tr>
<td>Biking / Walking</td>
<td>-</td>
<td>12%</td>
</tr>
<tr>
<td>Car</td>
<td>-</td>
<td>11%</td>
</tr>
<tr>
<td>Other</td>
<td>-</td>
<td>6%</td>
</tr>
<tr>
<td>Don’t know / Refused</td>
<td>-</td>
<td>4%</td>
</tr>
</tbody>
</table>
An additional source, the Santa Monica Malibu Unified School District has data for the school year 2016-2017, indicating that 100 students throughout the District were without permanent homes, including 13 students who were temporarily unsheltered during the school year.

Conclusion

With the exception of the SMMUSD data, the data developed from the annual counts are a mixture of point-in-time counts, sampling, and in-person interviews, with awareness that the numbers are more fluid than absolute. Populations vary from day to day, site to site, season by season. Much of the background information is self-reported. Some of those contacted decline to participate. Analyzing annual trends is compromised by methodology changes from year to year. There is little data available for persons considered housing insecure.
However, the consensus among professionals, locally, regionally and nationally, is that the population of persons impacted by homelessness is underreported, and that the problem is growing exponentially every year.

These data are most valuable in filling in a truer profile of the population of individuals and families experiencing homelessness, with a more complex analysis of factors that goes beyond public perceptions, and often misperceptions, of real people struggling with unique challenges.

**Social and Economic Impacts of Homelessness**

Being homeless is devastating for individuals and families who are homeless. This is obvious to anyone who has seen a homeless person sleeping on a sidewalk, which means it should be obvious to everyone. Not always as obvious, but also real, are the negative impacts of homelessness on the society in which homelessness exists. These involve both economic impacts, such as the money governments, and thus taxpayers, must spend because of homelessness, and social impacts, including those relating to public safety and those affecting a society’s sense of community. This section of this report will concern the costs of homelessness.

*The Costs of Being Homeless.*

**Living on the streets**

Of the approximately 60,000 people who on any given night live homeless in Los Angeles County, only 26% sleep in shelters, meaning that more than 40,000 will sleep in places not meant for habitation. Though some homeless people sleep in vehicles if they are lucky enough to have one, for most this means sleeping “on the streets,” which can mean on a sidewalk or in a doorway, or an encampment in a vacant lot, park or underpass, or anywhere that seems to offer refuge.

Being homeless is not healthy, nor is it safe. While many homeless people start out with health conditions, being homeless is not conducive to receiving curative care. As a result, homeless people use emergency rooms at four times the rate of other low-income people. The average age of death among the homeless population in L.A. County is 48.

Nor is it safe to be homeless, as they are much more often the victims of crime than the perpetrators. According to the Inner City Law Center, “the average homeless woman . . . experiences as much major violence in a single year as the average American woman experiences in her lifetime.”

Another cost, major but incalculable, is the psychological cost of being homeless. In surveys, homeless people often say that their most basic desire is to be treated as human beings by the housed population and government, and not be scorned and
abused as if they are less than human. At the same time, the fact of being homeless necessarily steals from a homeless individual those essential elements of “being human”—privacy, dignity, hope. What housed person can imagine what it must be like to not know where one will next relieve oneself, or have a private shower, or what it’s like not to have a safe place for one’s belongings, or not to have access to medical care with a doctor you know?

**Homeless children and their issues.**

In Los Angeles County, children comprise approximately 10% of the homeless population. These children have no resources of their own to change their status and become housed; yet being homeless as a child is a powerful predictor of future homelessness. A homeless child will not have the safety and stability that is important for human development and education.

To quote from a report from the National Coalition for the Homeless, “Homelessness has a devastating impact on children and youths’ educational opportunities. Residency requirements, guardianship requirements, delays in transfer of school records, lack of transportation, and lack of immunization records often prevent homeless children from enrolling in school. Homeless children and youth who are able to enroll in school still face barriers to regular attendance: while 87% of homeless youth are enrolled in school, only 77% attend school regularly.” (See [http://www.nationalhomeless.org/factsheets/education.html](http://www.nationalhomeless.org/factsheets/education.html) for more data.)

**Being homeless and mentally ill**

Compared to the population as a whole, a very high percentage of homeless people have mental health issues over varying severity. However, homelessness is not a necessary consequence of mental illness; it reflects a lack of care for the person with mental illness. As stated in a report by the National Coalition for the Homeless:

Despite the disproportionate number of severely mentally ill people among the homeless population, increases in homelessness are not attributable to the release of severely mentally ill people from institutions. Most patients were released from mental hospitals in the 1950s and 1960s, yet vast increases in homelessness did not occur until the 1980s, when incomes and housing options for those living on the margins began to diminish rapidly. According to the 2003 U.S. Department of Health and Human Services Report, most homeless persons with mental illness do not need to be institutionalized, but can live in the community with the appropriate supportive housing options (U.S. Department of Health and Human Services, 2003). However, many mentally ill homeless people are unable to obtain access to supportive housing and/or other treatment services. The mental health support services most needed include case management, housing, and treatment. (See [http://www.nationalhomeless.org/factsheets/why.html](http://www.nationalhomeless.org/factsheets/why.html).)
Societal Costs of Homelessness.

Financial Costs

It’s been well known, at least since a 2009 study, “Where We Sleep,” by the Economic Roundtable, that the governmental costs of providing services to a person who is homeless are greater than the costs that government would incur by housing that person in a supportive environment. The Economic Roundtable determined, after analyzing more than 10,000 cases, that the typical governmental cost for a person in supportive housing was $605 per month, while the typical governmental cost for a similar person on the streets was $2,897, five times as much. However, these figures are averages; for some demographics of homeless people the costs were considerably higher, averaging, for instance, $5,038 per month older adults with substance abuse or mental health issues. The costs are drastically less if these people, even with their significant needs for care, live in supportive housing. The higher costs include increased costs for health services (including especially emergency room visits) and increased costs for actions by law enforcement, including health services (and mental health services) provided in jails.

While the Economic Roundtable study was from a 2009, a recent (2017) RAND study (“Evaluation of Housing for Health Permanent Supportive Housing Program), using different methodology and focusing on a specific County program, found that every dollar invested in the housing program yielded approximately $1.20 in savings.

Many governmental costs that homelessness causes are not directly counted as the costs of homelessness, but rather increase other governmental budgets. For instance, according to a November 2017 City of Santa Monica staff report to the city council, of the 350 calls the Santa Monica Police Department responds to on an average day, 40 to 50 percent are homeless related. Similarly, 15 percent of the City’s fire department’s calls on an average day are homeless related.

Of course, even if all homeless people became “formerly homeless people” and were living in permanent supportive housing, there would still be governmental costs. The difference would be that those expenditures would result in better outcomes. Many of the formerly homeless would be able to once again live productive lives, with incomes and insurance coverage. These in turn would reduce governmental expenditures in a “virtuous circle.”

Perhaps the greatest lesson might be that if homelessness for any given prospective homeless person can be prevented at its inception, then governmental savings will be greatest. “An ounce of prevention is worth a pound of cure.”

Social Costs.

Public Safety
As discussed above, large amounts of public safety resources are expended in connection with homelessness, and there is a high correlation with homelessness, or having been recently homeless, and incarceration. (See https://www.ncbi.nlm.nih.gov/pubmed/18245159) This does not mean, however, that being homeless itself results in criminal activity. Many, typically about 30 percent, of homeless people have mental illnesses, and perhaps an equal number have alcohol and substance abuse problems. These are factors that independent from housing status are correlated to criminal activity, such as disorderly conduct, assault, and drug dealing. Homeless people are also more likely to be jailed for non-violent status crimes such as sleeping where it’s illegal to sleep, or quality of life crimes such as public inebriation, urinating in public, littering or jaywalking. Much police activity concerning the homeless involves responding to public calls of concern about homeless people—for instance, a call to 911 to report a homeless person passed out on the street. Of all the reasons a homeless person ends up incarcerated, few involve violence against another person.

But when there is violence committed by a homeless person, it is most often directed against another homeless person. As discussed above, the worst public safety impacts of homelessness are borne by homeless people. [Want to get data for this.]

Even when there are not actual crimes, the existence of homeless can create the perception of a lack of safety. For instance, homelessness has had a large impact on the operations of our public libraries, which can serve as “safe places” for the homeless but at the same, paradoxically, create a sense of disorder for others. According to a November 2017 City of Santa Monica staff report, most rule violations (451 of 775 in one two-week period) at the Main Library involve homeless patrons. That’s nearly three dozen violations per day.

**Community Impacts**

Of all the impacts of homelessness on society as whole, the most devastating is not financial or having to do with a particular aspect of life, but rather the impact of homelessness on the confidence of community and the sense that we live in a society that cares for each other. Without diminishing the overwhelming catastrophe that being homeless has on a homeless person, the existence of homelessness can provoke, among the housed, alternating feelings of shame, rage, pity and helplessness. At the same time, the continued scourge of the homeless epidemic, that dates back at least to the 1980s, and the ineffective response of our society to it, has become a challenge to the community’s faith in government. We live in a period of diminished confidence in our institutions, above all our public institutions, and certainly the “disorder” of homelessness contributes to that sense of community failure and fear for the future. History
shows that people don’t make the best decisions for themselves or their communities from fear.

Considerations for “Gravely Disabled” Individuals

In California since 1967, the Lanterman-Petris-Short Act has authorized the involuntary commitment and treatment of persons with specified mental health disorders for the protection of the persons so committed. Under the act, if a person, as a result of a mental health disorder, is a danger to others, or to himself or herself, or is gravely disabled, he or she may be taken into custody by a peace officer or by certain designated professional persons, and placed in a county-designated facility and state-approved facility for 72-hour treatment and evaluation (a “72-hour hold”). The law defines “gravely disabled,” to include a condition in which a person, as a result of a mental health disorder or chronic alcoholism, is unable to provide for his or her basic personal needs for food, clothing, or shelter. (Emphasis added.) If procedures are followed, a 72-hour hold can be extended up to a month and eventually include conservatorship for more than a year.

While as written the Act’s definition of “gravely disabled” would not seem to depend on a subjective determination of the desires of the subject person, in practice, and as interpreted generally by local governments and service providers, the definition generally means that a 72-hour hold will not be exercised on a homeless person who expresses his or her unwillingness to be committed, regardless of his or her ability to provide for basic needs—including, with relevance to homelessness, shelter.

A bill currently submitted to the State Assembly, AB1971 (Santiago, Chen and Friedman) would change the definition of “gravely disabled” for these purposes to include a condition in which a person, as a result of a mental health disorder or chronic alcoholism is unable to provide for his or her medical treatment. Another bill submitted to the Assembly, AB2156 (Chen) would in a similar context (one that allows for 24-hour holds), expand the definition in the Lanterman-Petris-Short Act of “gravely disabled” to include, in part, a condition in which a person, as a result of a mental health disorder, is incapable of making informed decisions about, or providing for, his or her own basic personal needs for food, clothing, shelter, or medical care without significant supervision and assistance from another person and who, as a result of being incapable of making these informed decisions, is at risk of substantial bodily harm, dangerous worsening of a concomitant serious physical illness, significant psychiatric deterioration, or mismanagement of his or her essential needs that could result in bodily harm.

Amending the law to expand the grounds upon which a person may be involuntarily committed for even brief periods is controversial. There are important issues of civil liberties at stake. Many people who are opposed to relaxing the “gravely disabled” standard, or who simply urge caution before doing so, remind us of the times when mentally ill people could be “warehoused” in substandard “mental institutions” without regard to their rights as citizens and human beings. They urge that the failure to build or provide appropriate “halfway houses” and other community-based care for the mentally
ill after the closing of the institutions a generation ago, should not be an excuse for the reintroduction of coercive care.

However, due to the frustration with our society’s inability to provide care for mentally ill people clearly unable to take care of themselves, and the resulting fact that jails have become, to a great extent, de facto mental institutions while mentally ill people are left to their own devices on the streets where they risk injury, crime and illness, there is a movement to expand the gravely disabled definition as a way of bringing mentally ill people into the “continuum of care” so that they can be housed in supportive environments that include directed services to meet their health needs. AB 1971 and AB2156 are a manifestation of this frustration.

In fact, both acts were submitted to the Assembly after the Board of Supervisors of Los Angeles County in January 2018 voted 4-1 to recommend to the legislature amending the definition of gravely disabled. The Supervisors acted with the support of mental health professionals and the L.A. County Council of the National Alliance on Mental Illness. The County’s mental health director contended that the amended language would only be clarifying the original intent of the Lanterman-Petris-Short Act. (http://www.latimes.com/local/california/la-me-5150-medical-treatment-20180418-story.html)

Critics, including Supervisor Sheila Kuehl, the lone vote against the Board of Supervisor’s recommendation, contended that without providing housing and long-term assistance, and treatment centers, changing the definition would not make people safer and might result in forced treatment in violation of civil rights.

AB1971\(^8\) was passed by the Assembly in May 2018 and sent to the Senate. AB2156\(^9\) did not make it through committee.

**Homelessness and Public Health**

Homelessness has a severe impact on health, which in turn affects our healthcare system and public health in general.

Homeless people live in stressful environments without security, such as the street or homeless shelters, where they are exposed to violence and weather. Food security is also a problem, and the food that is available is lacking in nutrition.

The living environments of homeless people make self-care difficult or impossible. Cleanliness and bathing, important practices for personal health, are difficult without reliable access to bathrooms and showers. Without cleanliness, infections can thrive and injuries do not properly heal. Additionally, without a secure place to sleep, rest

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\(^8\) [http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201720180AB1971]
\(^9\) [http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201720180AB2156]
becomes difficult and further impedes healing. Medical conditions that require careful, ongoing treatment, such as diabetes or asthma, are challenging for homeless people to manage as they need to move around unpredictably, and cannot store medications or syringes properly. Thus, homeless people frequently need urgent healthcare, and are often rotated through healthcare providers. However, health interventions are often ineffective because the patients must return to the conditions that are causing and exacerbating their medical problems.

The statistics on homelessness and health are grim. Those experiencing homelessness are three to four times more likely to die prematurely, and experience an average life expectancy as low as 41 years. People without homes have higher rates of hospitalizations for physical illnesses, mental illness, and substance abuse than other populations. When compared with the general population, people without homes have poorer physical health, including higher rates of tuberculosis, hypertension, asthma, diabetes, and HIV/AIDS, as well as higher rates of medical hospitalizations. When rates of homelessness are high, and shelters are crowded, the health disadvantages can be compounded further. Communicable diseases become a serious problem under these conditions. A disproportionate number of tuberculosis cases occur among people experiencing homelessness. In Anchorage, the homelessness problem led to an infectious outbreak of a new, virulent strain of strep bacteria which disproportionately affected people who were homeless and addicted to alcohol. In 2015, Portland’s public health officials spent months battling Shigella, an intestinal

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15 https://www.cdc.gov/tb/topic/populations/homelessness/default.htm

disease that spread through the homeless population.\textsuperscript{17} Recently, in San Diego, a hepatitis A outbreak linked to the homeless population resulted in 337 hospitalizations.\textsuperscript{18} Overall, lack of housing is a major detriment to individuals' health, which is serious on its own. But it is also a burden to the healthcare system, as well as a larger public health issue.

**Current Approaches to Homelessness in Santa Monica**

The city of Santa Monica, non-profits, and other governmental & non-governmental organizations within and around Santa Monica utilize many different models and techniques in working towards ending homelessness. Although the city is generally responsible in setting the overarching goals for the issue, there are specialized services and resources available to people experiencing homelessness. In this section, we will explore and define many of these models, providers, services, and resources.

- **The Housing First model**: a homeless assistance approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their quality of life. This approach is guided by the belief that people need basic necessities like food and a place to live before attending to anything less critical, such as getting a job, budgeting properly, or attending to substance use issues. Additionally, Housing First is based on the theory that client choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to make a client more successful in remaining housed and improving their life.\textsuperscript{19}

- **Rapid re-housing** is an intervention which rapidly connects individuals experiencing homelessness to permanent housing through a tailored package of assistance.

- **Emergency Shelter** is support for individuals and/or families in crisis or imminent danger of becoming homeless.

\textsuperscript{17} http://www.oregonlive.com/portland/index.ssf/2016/08/shigella_outbreak_in_2015_spre.html
\textsuperscript{18} http://www.sandiegouniontribune.com/news/hepatitis-crisis/
• Per the Santa Monica Housing and Economic Development, **Transitional Housing** is “Long term temporary housing (generally up to 24 months) for persons transitioning from homelessness to permanent housing.”

• Per the United States Interagency Council on Homelessness, **Permanent Supportive Housing** “is an evidence-based housing intervention that combines non-time-limited affordable housing assistance with wrap-around supportive services for people experiencing homelessness, as well as other people with disabilities.”

• Deed-restricted affordable/low income housing is commonly referred to as **“Affordable Housing.”** These are typically rental units that can only be rented at a maximum rental amount calculated to be approximately 30% of a resident’s income. The rents for these units is pegged to the annual median income (AMI) at certain percentages of the AMI, ranging from 30% AMI to 120% AMI. Santa Monica has surveyed the amount of affordable housing within the city.

The California state government requires jurisdictions within California to create plans to build a certain quantity of new housing within a specified amount of time, as determined by the **Regional Housing Needs Assessment (RHNA).** The RHNA breaks down how much housing within each affordability category is planned to be built during the time period. Per this assessment, Santa Monica should create 1,674 total units between 2014 and 2021, with 58% of them spread throughout the “affordable” categories.

• **Subsidized Housing** is generally any government sponsored economic assistance program dedicated towards helping individuals and families be able to pay for housing. Although **Section 8** is not the only program that assists individuals and families afford housing, it is very well known. Per Santa Monica’s Housing and Economic Development department, “The official name for the Section 8 Housing Program is the **Housing Choice Voucher Program** and it was established by the 1974 Housing and Community Development Act. It is the

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20 [https://www.smgov.net/Departments/HED/Housing_and_Redevelopment/Housing/Affordable_Housing/Affordable_Housing_Opportunities.aspx](https://www.smgov.net/Departments/HED/Housing_and_Redevelopment/Housing/Affordable_Housing/Affordable_Housing_Opportunities.aspx)

21 [https://www.smgov.net/uploadedFiles/Departments/HED/Housing_and_Redevelopment/Housing/Housing_Commission_Agendas/4A_Quick_Facts_and_Housing_Stock_Data_04212016.pdf](https://www.smgov.net/uploadedFiles/Departments/HED/Housing_and_Redevelopment/Housing/Housing_Commission_Agendas/4A_Quick_Facts_and_Housing_Stock_Data_04212016.pdf)

22 [https://www.smgov.net/Departments/PCD/Plans/2013-2021-Housing-Element/](https://www.smgov.net/Departments/PCD/Plans/2013-2021-Housing-Element/)

23 [https://www.smgov.net/uploadedFiles/Departments/PCD/Plans/General-Plan/Housing-Element/Regional-Housing-Needs-Assessment.pdf](https://www.smgov.net/uploadedFiles/Departments/PCD/Plans/General-Plan/Housing-Element/Regional-Housing-Needs-Assessment.pdf)
principal U.S. Department of Housing and Urban Development (HUD) program for assisting lower income persons to secure decent, safe, and sanitary housing. Assistance is provided to eligible households to be used towards renting privately owned housing within the City of Santa Monica. Program participants pay approximately 30% of their income towards rent and the Housing Authority pays the remainder.” In order to prevent those who hold the housing vouchers from being refused housing due to the source of their income, the City of Santa Monica passed an ordinance on May 12, 2015 “Ordinance Prohibiting Housing Discrimination Based On Source of Income, Including Section 8 Vouchers and Other Rent Subsidies”

- **Safe Place to Park** programs utilize partnerships with property owners to use parking lots not in use overnight as “safe” locations for people who are experiencing homelessness and living in their vehicles. We could not find an example of this program being used within the city limits of Santa Monica as there is a municipal ordinance that prohibits sleeping in a vehicle on public or private property, however “the nonprofit agency Safe Parking LA (launched) a pilot program for homeless veterans – many of whom are seniors – at the Veterans Administration campus on the border of Brentwood and West LA.”

**Safe Parking L.A.** “is a coordinating organization for the community which assists homeless individuals living in their vehicles.” Safe Place to Park programs are typically administered by small non-profits or other organizations with their own private parking lots. They are fairly small lots and there is a screening and application process.

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**City of Santa Monica/Governmental Organization Resources and Programs**

- Santa Monica’s Police Department has a special unit called the **Homeless Liaison Program** (HLP) that uses both law enforcement and social service strategies to address homeless issues, especially mental illness.

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24 [https://www.smgov.net/Departments/HED/Housing_and_Redevelopment/Housing/Section_8_Frequently_Asked_Questions.aspx#1](https://www.smgov.net/Departments/HED/Housing_and_Redevelopment/Housing/Section_8_Frequently_Asked_Questions.aspx#1)
25 [https://www.smgov.net/departments/council/agendas/2015/20150512/m20150512.pdf](https://www.smgov.net/departments/council/agendas/2015/20150512/m20150512.pdf)
26 [https://www.smgov.net/departments/council/agendas/2015/20150512/s2015051207-B-1.pdf](https://www.smgov.net/departments/council/agendas/2015/20150512/s2015051207-B-1.pdf)
28 [https://www.safeparkingla.org/about-spala/](https://www.safeparkingla.org/about-spala/)
29 [https://santamonicapd.org/hlp](https://santamonicapd.org/hlp)
Santa Monica has put together an “action plan” pertaining to homelessness. It addresses strategies and specific actions to be done to work towards ending homelessness. Additionally, the city launched a “Practical Toolkit” booklet in English and Spanish. Per the city’s FAQ on homelessness, “The City provides over $2.7 million annually to local nonprofit agencies to fund a variety of treatment, interim and permanent affordable housing options as well as mental health, substance abuse, primary health, employment, legal aid and counseling services. The City has invested in building and operating 314 permanent supportive units for homeless individuals.” The All of the city’s current initiatives pertaining to homelessness are detailed on the city’s website at https://www.smgov.net/portals/homelessness/.

Homeless Community Court is a joint project between City of Santa Monica, Los Angeles Superior Court, the L.A. County Public Defender’s Office and homeless service providers. It is a “a problem-solving court program that addresses the legal issues of homeless individuals with the purpose of connecting them to services and permanent housing.”

Within the County of Los Angeles, there is an organization that manages the continuum of care for people experiencing homelessness within the county. Per their website, “LAHSA is the lead agency in the Los Angeles Continuum of Care, which is the regional planning body that coordinates housing and services for homeless families and individuals in Los Angeles County. LAHSA coordinates and manages over $243 million annually in federal, state, county, and city funds for programs that provide shelter, housing, and services to homeless persons in Los Angeles City and County.”

Service Providers & Services Available

- Chrysalis

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30 https://cityofsantamonica.app.box.com/s/tyc43tzkkb79fopl7q5xhrzhl36ev3z7
33 https://www.smgov.net/Portals/Homelessness/content3Column.aspx?id=25145
34 https://www.lahsa.org/about
35 https://changelives.org/
○ Offers employment services including employment services such as job search assistance, resume & interview preparation, transitional jobs, wardrobe for job interviews, etc.

- **Legal Aid Foundation of Los Angeles**[^36]
  ○ Nonprofit law firm that provides legal representation and assistance to low-income people in Los Angeles County. The organization has 5 offices across the county, including one in Santa Monica. To qualify for these services, annual income must generally be below 125% of the national poverty line, or 200% in some cases. However, Santa Monica maximum annual income limits are higher than those in other parts of the county.[^37]

- **Mount Olive Lutheran Church**
  ○ Students4Students UCLA formerly Bruin Shelter[^38]
    ■ A student-run shelter for students experiencing homelessness in the greater Los Angeles area, and is the second of its kind in the entire country.

- **New Directions for Veterans**[^39]
  ○ Services and housing for homeless veterans. Part of a national commitment via the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act to end veteran homelessness. Operates four Transitional Housing Programs, a rapid re-housing and homelessness prevention program called Supportive Services for Veteran Families (SSVF), and four Permanent Supportive Housing (PSH) facilities in Los Angeles County.

- **The People Concern (formerly OPCC & LAMP)**[^40]
  ○ Non-profit headquartered in Santa Monica; combination of public and private financial support. Lamp Community is located in Los Angeles’ Skid Row.
  ○ Serves the homeless through permanent supportive housing supported by the Department of Housing and Urban Development. Provides outreach and engagement. Follows the “Housing First” model. Offers clinical

[^36]: [https://lafla.org/](https://lafla.org/)
[^37]: [https://lafla.org/help/qualify/](https://lafla.org/help/qualify/)
[^38]: [https://www.s4sla.org/](https://www.s4sla.org/)
[^39]: [https://ndvets.org/](https://ndvets.org/)
[^40]: [https://www.thepeopleconcern.org/](https://www.thepeopleconcern.org/)
outreach and field-based crisis intervention from the integrated clinical and non-clinical staff, support groups, and psychiatric care is provided. Also provides medical care, substance abuse services, and domestic violence shelter through Sojourn.

The following service providers and resources are all offered through The People Concern. Please note this is not an exhaustive list.

- **Annenberg Access Center**
  - The main point of entry for the homeless and services to individuals in Santa Monica. Provides onsite essential services: meals, clothing, mail and phone service, case management, mental health counseling, benefits assistance and medical care in the Center’s medical suite.

- **Daybreak**
  - Interim housing and day program that offers services to homeless women with a mental illness. Daybreak offers 20 semi-private bed areas, 10 emergency beds, and a holistic approach to wellness so that participants may eventually move to permanent supportive housing and regain independence.

- **The Integrated Mobile Health Team (IMHT)**
  - A traveling team that consists of a psychiatrist, mental health professionals, substance abuse experts, a physician’s assistant, a physician, case managers, and peer advocates who are trained to build trust with chronically homeless individuals.
  - City efforts are leveraged with County-funded outreach teams such as the Integrated Mobile Health Team (IMHT) and Street Medicine teams which provide medical and behavioral health care to homeless people on the streets with the purpose of linking them to appropriate housing.

- **Maryland Apartments (through a partnership with A Community of Friends)**

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41 [https://www.opcc.net/?nd=annenberg&und=71](https://www.opcc.net/?nd=annenberg&und=71)
42 [https://www.opcc.net/?nd=daybreak_day_center](https://www.opcc.net/?nd=daybreak_day_center)
43 [https://www.opcc.net/?nd=integrated_mobile](https://www.opcc.net/?nd=integrated_mobile)
45 [https://www.opcc.net/?nd=maryland_apartments](https://www.opcc.net/?nd=maryland_apartments)
- Provides 29 individuals with studio apartment units in Central City West, Los Angeles. All tenants are formerly homeless and secured housing through OPCC.

  - **Safe Haven Cloverfield Services Center**[^cloverfield]
    - Interim housing and day program that serves chronically homeless individuals who have a history of challenges connecting with service providers.

  - **SAMOSHEL (SAnta MOnicaSHELter)**[^samoshel]
    - Provides interim shelter and a broad range of programs to 70 women and men in separate living quarters. Also houses the Wellness Beds Program that provides nursing services to clients with acute or chronic medical conditions, and it is the site of OPCC’s High Need Room for clients with special challenges.

  - **SHWASHLOCK (SShowers, WASHers and LOCKers)**[^shwashlock]
    - Homeless basic hygiene needs are met along with a place to store their personal belongings.

  - **Turning Point**[^turning_point]
    - Interim housing program for 55 women and men. Case management, mental health care, linkage with medical care, and assistance in increasing income and obtaining permanent housing.

- **St. Joseph’s Center**[^stjoseph]
  - 501(c)3 nonprofit community organization service the homeless including veterans in Venice, Santa Monica, Mar Vista and Culver City
  - Programs include Outreach and Engagement; Housing including a chronic homeless program; Mental Health; Education and Vocational Training; Venice C³ a partnership between LA City, the County of Los Angeles, the Department of Health Services, the Department of Mental Health, the Department of Public Health, the Los Angeles Homeless Services Authority, Behavioral Health Services and St. Joseph Center.

- **Safe Place for Youth (SPY)**[^spf]
  - A project of Community Partners, a 501(c)3 nonprofit

[^cloverfield]: https://www.opcc.net/?nd=cloverfield&und=76
[^samoshel]: https://www.opcc.net/?nd=samoshel_location&und=74
[^shwashlock]: https://www.opcc.net/?nd=shwashlock
[^turning_point]: https://www.opcc.net/?nd=turning_point&und=89
[^stjoseph]: https://stjosephctr.org/
[^spf]: http://www.safeplaceforyouth.org/
○ Provides services and programs for youth ages 12-25 experiencing or at risk of homelessness including, but not limited to, housing referrals, case management services, showers, clothing, health screenings, dental clinic, meals, counseling & support groups, etc.

- **Step Up on Second**\(^{52}\)
  ○ A “Housing First” provider.
  ○ Provides permanent support home units for adults experiencing mental health issues who may or may not be homeless. Receives funding from public, private foundation and corporate donors. In addition to housing, this organization also provides integrated services such as vocational training.

*Locations within Santa Monica*

○ **Step Up on Second**- The organization’s first facility opened in 1994 and created 36 single resident occupancy (SRO) permanent supportive housing (PSH) units for adults experiencing mental health issues. Major funding was provided by the City of Santa Monica and tax credit funding.

○ **Step Up on Fifth** - for adults, and a number of units are for young adults experiencing homelessness and the early stages of mental health issues; 46 SRO units; City of Santa Monica gave $7.1 million in support.

○ **Daniel’s Village** - The 8 PSH units of Daniel’s Village are specifically designed for young adults experiencing homelessness and the initial symptoms of mental health issues. The City of Santa Monica provided $2.02 million, and the Mental Health Services Act of 2004 (Proposition 63) provided $1.4 million.

○ **Step Up on Colorado** – Houses 32 formerly homeless individuals in SRO PSH units. The entire building contains 34 units, but 2 are reserved for live-in staff.

○ **Upward Bound**\(^{53}\)
  ○ 501 (c)3 organization
  ○ Has additional program locations in Santa Monica, Culver City, Compton and South Los Angeles
  ○ Upward Bound House provides medium-term bridge housing on the Westside. Bridge Housing is for families in need of shelter and support, Case managers, housing locators and employment specialists work with each family to assess their unique needs and

\(^{52}\) [https://www.stepuponsecond.org/]
\(^{53}\) [https://upwardboundhouse.org/]
create a customized plan for achieving long-term stability and independence. Once in permanent housing, families build on their success with aftercare support from our programs staff and expansive network of community partners.

- Emergency Shelter – provides families in crisis short-term emergency shelter on the Westside and South Los Angeles
- Rapid Rehousing – moves families into permanent support housing; works with 20 community-based organizations to support the family
- Urban Farm Project – healthy living farm to help reduce food insecurity in the homeless population

- **Venice Family Clinic**\(^{54}\)
  - Free and low-cost, quality health care to homeless and low-income residents.

- **Volunteers of America Greater Los Angeles**\(^{55}\)
  - “Ministry of Service” based in Alexandria, VA; 501(c)3 organization
  - Serves: children, youth and families; formerly incarcerated; homeless people; older adults; people with disabilities; veterans
  - Provides eviction prevention, emergency services; transitional housing and permanent affordable housing
  - VOA maintains Lincoln Court in Venice for seniors 62 and older. They also provide housing in the great Los Angeles area for families, seniors, persons with disabilities and veterans

- **West Coast Care**\(^{56}\)
  - Provides reunification of homeless individuals with families and friends

**Timeline- Historical Context**

**1960s:** homeless people noticed in parks, beaches, open spaces of SM as federal and state institutional support for those with mental illness is decreased.

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\(^{55}\) [https://voala.org/](https://voala.org/)

\(^{56}\) [http://westcoastcare.org/](http://westcoastcare.org/)
1963: OPCC (Ocean Park Community Center) drop-in center opens in Ocean Park to support low-income people.


1980s: Turning Point emergency shelter opens (1978); as does OPCC’s Campion Counseling and Outreach Team, Daybreak Day Center and Shelter, and Step Up on Second.

1982: Westside Shelter and Hunger Coalition formed to coordinate area services for the homeless.

1989: SM provided a free email system to residents through PEN (Public Electronic Network) and 20 computer terminals were made available in the public libraries, city hall, and recreation centers so that the system was available to all. There was much discussion on PEN about the homeless ‘problem’ by residents angry about the ever-increasing homeless population. Responses were made by homeless individuals able to use the public terminals that gave perspective to their plight. This conversation influenced the city to create SHWASHLOCK.

1991: SM created a Task Force on Homelessness and engaged stakeholders to study homelessness and come up with recommendations to deal with this issue.

1993: SM began SHWASHLOCK, named for the showers, washers, and lockers available to homeless individuals.

1994: Chrysalis opens an employment development and readiness program that helps homeless people (and others) with employment. SM passes an emergency ordinance to close the parks between midnight and 5 am. Later that year SM adopts the Public Safety Initiative ordinance to focus on long term solutions to homelessness and SAMOSHEL shelter opens. SM passes an ordinance prohibiting solicitation for money or other valuables in select public areas.

2002: SM passes an ordinance prohibiting people from sitting or sleeping in storefront doorways of the downtown business district.

2004: SM created the Chronic Homeless Project (CHP) to coordinate efforts; it was an interdepartmental team with representation from the SM Police and Fire Departments,
Community and Cultural Services, the City Attorney’s Office, Housing and Economic Development, and other nonprofit service agencies. OPCC opens Safe Haven (beds) in the Access Center. SM passes an ordinance to restrict food distribution to homeless people within the city by non-city organizations.

2005: SM created a dedicated Homeless Unit under Community and Cultural Services. Its purpose was to coordinate services, manage grants to homeless service providers, and align policy and funding. This year also saw the first “point in time” homeless count for Los Angeles County, with a count estimate in late January of 88,345 homeless people, with 6860 homeless people estimated in county Service Planning Area 5 (SPA 5). Arriving at a viable number for just SM was not possible. OPCC opens Safe Haven for chronically homeless mentally ill clients.

2006: SM contracted with The Urban Institute to complete an evaluation of the current homelessness situation and make recommendations. SM also started Project Homecoming to assist homeless individuals reunite with their family.

2007: SM partners with LA County Superior Court to create the Homeless Community Court. It offers an alternative to jail for homeless individuals connected to CHP and promotes treatment services and housing. The 2nd “point in time” homeless count for Los Angeles County occurred, with a count estimate in late January of 141,737 homeless people, with 6703 homeless people estimated in county SPA 5. The 2005 and 2007 counts could not be compared due to the different methodologies used. Safe Haven expands to the OPCC Cloverfield Blvd. site.

2008: SM begins a Service Registry by name and conducts homeless interviews over 3 nights in and around the downtown. SM City Council adopts the Action Plan to Address Homelessness, which then establishes a Priority Population criteria for its homeless program. Showers previously available at the Pier are closed.

2009: SM conducts a homeless count (visual) of its own, which becomes the basis for comparison for the ongoing annual count; 915 homeless were counted, both sheltered and unsheltered. SM is sued by the Southern California of ACLU for violating the constitutional rights of homeless people.

2010: Emphasis is on Housing First and the annual count shows a decrease to 742 homeless.
2015: SM City Council sets homelessness as 1 of 5 top priorities and chooses to take a leadership role for regional efforts to address homelessness. Homelessness begins to increase locally and regionally after a relative period of stability.

2016: Measure GS and GSH in SM pass, raising money through a transaction use fee.

2017: Bruin shelter at Mt. Olive Lutheran Church opens to house college students. Measure H (sales tax hike) and Proposition HHH (bond measure), for LA County and City respectively, are approved to raise money for homelessness projects.

2018: City of Santa Monica Fiscal Year 2018-19 Action Plan. City releases “Practical Toolkit”
Appendix A

LWVLAC, LWVC, and LWVUS Positions Pertaining to Homelessness

LWVLAC
League of Women Voters of Los Angeles County- Interleague Organization
- **COUNTY** ([http://lacilo.ca.lwvnet.org/about_action.html](http://lacilo.ca.lwvnet.org/about_action.html)) [no specific position on homelessness, only position that mentions homelessness is position on “Mental Health Care” below]
  - “MENTAL HEALTH CARE (Adopted 1989) Support for an adequately funded mental health care system which provides comprehensive services to the acutely, chronically and seriously mentally ill of all ages; maintains optimal mental health services for all clients; places emphasis on meeting the needs of children; offers mental health services for the homeless; seeks additional funds for preventive services; implements a master plan to integrate services; raises awareness of critical unmet needs; and emphasizes case management.”

LWVC
League of Women Voters of California
- **STATE** [No specific position]

LWVUS
League of Women Voters
- **NATIONAL** ([https://lwvc.org/position/meeting-basic-human-needs](https://lwvc.org/position/meeting-basic-human-needs)) [No specific position on homelessness, however, certain portions of Position on Meeting Basic Human Needs touches on the issue]
  - “The League’s Position on Meeting Basic Human Needs
Statement of Position on Meeting Basic Human Needs, as Revised by the National Board, January 1989, based on positions reached from 1971 through 1988.

The League of Women Voters of the United States believes that one of the goals of social policy in the United States should be to promote self-sufficiency for individuals and families and that the most effective social programs are those designed to prevent or reduce poverty.

Persons who are unable to work, whose earnings are inadequate or for whom jobs are not available have the right to an income and/or services
sufficient to meet their basic needs for food, shelter and access to health care.

The federal government should set minimum, uniform standards and guidelines for social welfare programs and should bear primary responsibility for financing programs designed to help meet the basic needs of individuals and families. State and local governments, as well as the private sector, should have a secondary role in financing food, housing and health care programs. Income assistance programs should be financed primarily by the federal government with state governments assuming secondary responsibility.

PREVENTING AND REDUCING POVERTY

In order to prevent or reduce poverty, the LWVUS supports policies and programs designed to: increase job opportunities; increase access to health insurance; provide support services such as child care and transportation; provide opportunities and/or incentives for basic or remedial education and job training; decrease teen pregnancy; ensure that noncustodial parents contribute to the support of their children.

ACCESS TO HEALTH CARE

The LWVUS believes that access to health care includes the following: preventive care, primary care, maternal and child health care, emergency care, catastrophic care, nursing home care and mental health care as well as access to substance abuse programs, health and sex education programs, and nutrition programs.

ACCESS TO TRANSPORTATION

The LWVUS believes that energy-efficient and environmentally sound transportation systems should afford better access to housing and jobs and will continue to examine transportation policies in light of these goals.

FURTHER GUIDELINES AND CRITERIA

CRITERIA FOR INCOME ASSISTANCE

- Eligibility of all low-income individuals for assistance should be based on need. Eligibility should be established through simplified procedures such as a declaration of need, spot-checked in a manner similar to that used in checking the validity of income tax returns.
- Benefit levels should be sufficient to provide decent, adequate standards for food, clothing and shelter. Minimum income standards should be adjusted for regional differences in the cost of living and should be revised periodically to
take into account changes in the purchasing value of the dollar. Until a federal welfare program achieves an adequate level of benefits, some states will need to supplement federal payments.

- There should be increasing emphasis on cash assistance, but in-kind assistance (e.g., food stamps, housing subsidies, medical aid) should be continued to help assure that these needs are met.
- Under a revised program participants should not have their benefits reduced.
- Privacy of participants should be protected. All administrative procedures should be conducted with respect for the rights and dignity of the individuals.
- Work should be encouraged: participants’ total income should increase as earnings increase. Counseling, realistic training for actual jobs and financial incentives should be the links between job programs and income assistance.

CRITERIA FOR SUPPORTIVE SERVICES

- Supportive services should be available—but not compulsory—for participants in income assistance programs. Most important among these are child care, counseling, transportation, and family planning, health care and legal services.
- Fees for supportive services should be based on ability to pay and be free where necessary.
- Facilities and services for participants should be the same as for the general public.
- The federal government should exert leadership in setting standards for eligibility, for the quality of services and for adequate funding.
- Participants in the programs should be included in program development and implementation, and the administration of social services programs should be responsive to the needs of the people being served.
- Wherever possible, these services should be conveniently located in the neighborhood.
- Transportation systems should afford better access to housing and jobs and should also provide energy-efficient and environmentally sound transportation.
- Government programs that require recipients of assistance to engage in work-related programs would be acceptable only if the following protections are guaranteed to the participants:

  a. job training;

  b. basic education;

  c. exemptions for primary care givers;
d. supplemental support services such as child care and transportation;

e. equitable compensation to ensure that program participants earn the same wages and benefits as other employees performing similar work;

f. a disregard of some earned income for purposes of calculating benefit levels.

CRITERIA FOR HOUSING SUPPLY

The following considerations can be applied to programs and policies to provide a decent home and a suitable living environment for every American family:

● The responsibility for achieving national housing goals rests primarily with the federal government, which should:

   a. assure that our economic system is functioning to produce and maintain sufficient decent housing for citizens at all income levels;

   b. compensate for any failure or inadequacy of the system by building, financing, renting and selling homes to those citizens whose housing needs are not being met;

   c. give a variety of incentives to local jurisdictions to encourage them to provide within their boundaries an adequate supply of decent housing for low- and moderate-income groups;

   d. withhold federal funds from communities that fail to encourage such housing.

● State and local governments should assist by establishing effective agencies to aid, promote, coordinate and supplement the housing programs of the federal government and the private sector.
● Government at all levels must make available sufficient funds for housing-assistance programs.
● When families or individuals cannot afford decent housing, government should provide assistance in the form of income and/or subsidized housing.
● Government programs providing subsidies to the building, financing and insuring industries for housing for lower-income families should be evaluated in terms of units produced rather than in terms of benefits accruing to these industries.
● Government at all levels should develop policies that will assure sufficient land at reasonable cost on which to develop housing and that will assure fulfillment of other goals such as access to employment, preservation of open space, environmental cleanliness and beauty, and other aspects of a suitable living environment.

● Regional and metropolitan planning should be promoted to prevent haphazard urban growth, and housing for low- and moderate-income families should be provided as a part of all planned neighborhoods or communities.

● Lower-income families should not be segregated in large developments or neighborhoods. As their economic status improves, lower-income families should be enabled to continue to live in the same units as private tenants or as homeowners, if they are so inclined.

● Housing should be designed to meet human needs and should be built with amenities that will encourage economic integration within apartment buildings as well as within neighborhoods.

● Publicly assisted housing should be included in viable, balanced communities, with provision for quality public services and facilities, including schools, transportation, recreation, etc., that will encourage integration and stability.

● Zoning practices and procedures that will counteract racial and economic isolation should be promoted.

● State and local governments should adopt and enforce:
  
  a. uniform building codes with standards based on performance;
  
  b. housing codes to protect the health and safety of all citizens.

● State and local tax structures should be examined and revised to:
  
  a. benefit communities that build housing for lower-income families;
  
  b. encourage private owners to improve their homes;
  
  c. reduce speculative land costs.

● Government, industry and labor should encourage innovative building techniques to reduce the cost of housing production.

● Rights of tenants to negotiate for proper maintenance, management of facilities and services should be protected.

● Housing programs should be administered by individuals trained for the jobs and sympathetic with the needs of their clientele.
Citizen groups should participate in the development of publicly assisted housing programs by:

a. evaluating performance;

b. activating nonprofit sponsorships;

c. supporting legislation;

d. developing public awareness of housing discrimination and need.”
Chapter 2.69 COORDINATED DELIVERY OF SERVICES TO THE HOMELESS

2.69.010 Adoption of coordinated plan.\footnote{57}

No later than April 30, 1995, the City Council shall adopt a plan for the coordination of services provided to the homeless by the City and by social service organizations receiving City funding. The primary goal of this plan shall be to maximize the efficient and cost-effective delivery of services to a reasonable number of homeless recipients taking into account the City’s limited financial, geographical and social resources, all other demands on these resources, and services provided in neighboring communities. The plan shall be designed to:

(a) Effectively assist the homeless in returning to a self-sufficient status;

(b) Monitor the progress of individual recipients;

(c) Eliminate unnecessary duplication of services;

(d) Emphasize long-term solutions to homelessness by combining housing, counseling and job training;

(e) Provide non-housing services for approximately the same number of homeless people as can be temporarily sheltered in the City;

(f) Prevent an increase and, wherever feasible, reduce, overall City expenditures relating to homeless services; and

(g) Impose reasonable time limits on the provision of services to the same individuals. (Added by Ord. No. 1768CCS § 6, adopted 9/13/94)

2.69.020 Annual review.\footnote{58}

At least once during every twelve-month period after adoption of the coordinated plan required by Section 2.69.010\footnote{59}, the City Council shall assess

\footnote{http://www.qcode.us/codes/santamonica/view.php?topic=2-2_69-2_69_010&frames=on}

\footnote{http://www.qcode.us/codes/santamonica/view.php?topic=2-2_69-2_69_020&frames=on}

\footnote{http://www.qcode.us/codes/santamonica/view.php?cite=section_2.69.010&confidence=6}
the effectiveness of the plan in accomplishing its primary goal and various objectives, and shall evaluate the effectiveness, efficiency and cost of services to the homeless provided by the City and each social service agency receiving City funding. To aid this annual review, the City Council may commission an independent audit of City funding provided for services to the homeless. At the conclusion of the City Council’s annual review, the City Council shall make such changes in the plan as are appropriate in order to most effectively implement the plan’s primary goal and objectives and shall make related findings. (Added by Ord. No. 1768CCS § 6, adopted 9/13/94)

2.69.030 Public hearings.

In connection with the annual review required by Section 2.69.020, the City Council shall hold one or more public hearings regarding:

(a) The impact of the City’s homeless population on other residents of the City;

(b) The effectiveness of the delivery of services to the homeless by the City and various social service agencies;

(c) The cost of those services; and

(d) The changes which should be made in the plan in order to carry out its primary goal and its objectives as required under Section 2.69.010. (Added by Ord. No. 1768CCS § 6, adopted 9/13/94)

3.12.350 Sitting or lying on sidewalks or in the Promenade roadway in the Bayside District.

(a) During the hours between six a.m. and one a.m., no person shall:

(1) Sit or lie down upon a public sidewalk in the Bayside District or upon the Third Street Promenade roadway;

http://www.qcode.us/codes/santamonica/view.php?topic=2-2_69-2_69_030&frames=on
http://www.qcode.us/codes/santamonica/view.php?cite=section_2.69.020&confidence=6
http://www.qcode.us/codes/santamonica/view.php?cite=section_2.69.010&confidence=6
http://www.qcode.us/codes/santamonica/view.php?topic=3-3_12-3_12_350&frames=on

Final Draft 6.25.2018
(2) Sit or lie down upon a blanket, chair, stool, bench or any other object placed or installed on a public sidewalk in the Bayside District or the Third Street Promenade roadway; or

(3) Sit, stand, lie down upon or otherwise be present upon any planting, railing, topiary or statue placed upon or installed on a public sidewalk in the Bayside District or the Third Street Promenade roadway.

(b) The prohibition contained in this Section shall not apply to any person:

(1) Sitting or lying down on a public sidewalk or the Third Street Promenade roadway due to a medical emergency;

(2) Utilizing a wheelchair, walker or similar device to move about the public sidewalk or the Third Street Promenade roadway as the result of a disability;

(3) Sitting while operating or patronizing a commercial establishment or business conducted on the public sidewalk or Third Street Promenade roadway pursuant to a street use permit, license or other City-issued authorization;

(4) Sitting while participating in or attending a parade, festival, rally, demonstration, meeting or similar special event lawfully conducted pursuant to a City-issued permit or license on the public sidewalk or Third Street Promenade roadway;

(5) Sitting on a bollard, chair or bench located on the public sidewalk or Third Street Promenade roadway and which is supplied by a public agency;

(6) Sitting on a ledge, step or other masonry surface which borders the fountains or topiary planters on the public sidewalk or Third Street Promenade roadway;

(7) Sitting on a public sidewalk within a bus stop zone while waiting for public or private transportation; or

(8) Giving a street performance pursuant to a permit issued by the City.

(c) Any person violating this Section shall be guilty of an infraction, which shall be punishable by a fine not exceeding two hundred fifty dollars, or a misdemeanor, which shall be punishable by a fine not exceeding one thousand dollars, or by imprisonment in the County Jail for a period not exceeding six months or by both such fine and imprisonment. (Prior code § 3334; amended by Ord. No. 1860CCS § 1, adopted 8/20/96; Ord. No. 1879CCS § 1, adopted 6/10/97)
3.12.360 Obstructing pedestrian or vehicular traffic.\textsuperscript{64}

No person shall block, impede, or obstruct any public place or any entrance, exit, or approach to any place of business in or upon any public place in a manner calculated or with the intent to prevent, relay, hinder, or interfere with the free passage therealong or therethrough of any other person who is entering, occupying, or leaving any place of business, or who is performing any service or labor, or who is seeking or obtaining employment, or who is purchasing, selling, using, delivering, transporting or receiving any goods, wares, merchandise, services, entertainment, accommodations or articles, or who is attempting or seeking to do any of the foregoing, or to prevent, relay, hinder or interfere with the free passage therealong or therethrough of any vehicle or conveyance operated by or in the custody of any such other person or in which any such other person is riding or attempting to ride. (Prior code § 3334a; added by Ord. No. 165CCS, adopted 1/11/48)

3.12.370 Leaving or placing property, or other items on sidewalks, streets, streetscape, or public buildings.\textsuperscript{65}

Except as otherwise permitted by this Code or City contract, no person shall upon any public sidewalk, street, right-of-way, streetscape, public building, or other public facility:

(a) Leave any property or other item unattended for a period of longer than ten minutes;

(b) Place any property or other item(s) unless the item(s) can promptly and safely be transported or removed all at once within three minutes.

(c) Any person violating subsection (a) or (b) of this Section shall be guilty of a misdemeanor, which shall be punishable by a fine not exceeding one thousand dollars per violation, or by imprisonment in the County Jail for a period not exceeding six months, or by both fine and imprisonment; or shall be guilty of an infraction, which shall be punishable by a fine of not less than one hundred dollars but not more than two hundred fifty dollars. (Prior code § 3335; amended by Ord. No. 2047CCS § 13, adopted 7/9/02; Ord. No. 2075CCS § 11, adopted

\textsuperscript{64} \url{http://www.qcode.us/codes/santamonica/view.php?topic=3-3_12-3_12_360&highlightWords=3.12.360}

\textsuperscript{65} \url{http://www.qcode.us/codes/santamonica/view.php?topic=3-3_12-3_12_370&frames=on}

(a) No person shall block or obstruct any public sidewalk so that less than a four-foot contiguous sidewalk width is kept clear for pedestrian passage at all times. Conduct prohibited by this Section includes, but is not limited to, blocking or obstructions caused by:

(1) Placing any property, material, or other item upon any public sidewalk; or
(2) Sitting or lying down upon any public sidewalk; or
(3) Sitting or lying down upon a blanket, chair, stool, bench or any other portable object placed on a public sidewalk; or
(4) Performing sit-ups, push-ups, weight training or similar stationary exercise activity upon any public sidewalk.

(b) The prohibitions contained in this Section shall not apply to any person:

(1) Sitting or lying on a public sidewalk due to a medical emergency or as permitted by Federal, State or local law; or
(2) Sitting or lying on a public sidewalk while participating in or attending a parade, festival, rally, demonstration, meeting or activity lawfully conducted pursuant to a City-issued permit or license on the public sidewalk; or
(3) Sitting on a public sidewalk within a bus stop zone while waiting for public or private transportation.

(c) Any person violating this Section shall be guilty of an infraction, which shall be punishable by a fine not exceeding two hundred fifty dollars, or a misdemeanor, which shall be punishable by a fine not exceeding one thousand dollars, or by imprisonment in the County Jail for a period not exceeding six months or by both such fine and imprisonment. (Added by Ord. No. 2075CCS § 12, adopted 5/13/03; amended by Ord. No. 2327CCS § 1, adopted 10/26/10)

66 http://www.qcode.us/codes/santamonica/view.php?topic=3-3_12-3_12_372&frames=on
3.12.373 Driveway obstruction.67

(a) No person shall block or obstruct vehicular access to or from any driveway. Conduct prohibited by this Section includes, but is not limited to, blocking or obstructions caused by:

(1) Placing any property, material, or other item upon any public sidewalk; or
(2) Sitting or lying down upon any public sidewalk; or
(3) Sitting or lying down upon a blanket, chair, stool, bench or any other object placed on a public sidewalk; or
(4) Performing sit-ups, push-ups, weight training or similar stationary exercise activity upon any public sidewalk.

(b) The prohibitions contained in this Section shall not apply to any person sitting or lying on a public sidewalk due to a medical emergency.

(c) Any person violating this Section shall be guilty of an infraction, which shall be punishable by a fine not exceeding two hundred fifty dollars, or a misdemeanor, which shall be punishable by a fine not exceeding one thousand dollars, or by imprisonment in the County Jail for a period not exceeding six months or by both such fine and imprisonment.

(d) This Section neither applies to any vehicle that blocks or obstructs any driveway, nor prohibits enforcement of any other applicable law, including Vehicle Code Section 22651. (Added by Ord. No. 2327CCS § 2, adopted 10/26/10)

3.12.375 Sidewalk obstruction.68

No person shall place any device on a public sidewalk for displaying or distributing goods, written materials, merchandise, food, or any other item except a portable table or cart which is utilized in accordance with the following criteria:

(a) The table or cart shall be located:

(1) At least ten feet from the outer edge of any entrance of any business, including, but not limited to doors; vestibules; driveways; outdoor dining area

67 http://www.qcode.us/codes/santamonica/view.php?topic=3-3_12-3_12_373&frames=on
68 http://www.qcode.us/codes/santamonica/view.php?topic=3-3_12-3_12_375&frames=on
entries; and emergency exits, during the hours that any business on the premises is open to the public or to persons having or conducting lawful business on those premises;

(2) At least ten feet from any bus stop;
(3) At least ten feet from any street corner or a marked pedestrian crosswalk;
(4) So that a curb cut is not blocked or obstructed.

(b) The table or cart shall not be larger than four feet in width by four feet in length by three feet in height.

(c) No structures shall be attached to the table or cart. No other structure may be used to display the items. The display area, including the table or cart, shall be maintained in a neat and presentable manner. None of the items shall be displayed in an area other than upon the table or cart, including, but not limited to, in display racks on the sidewalks or in the hanging of the items from a building or fence or other structure. Any boxes or accessory items shall be stored entirely beneath the table or cart and shall not be stored or piled alongside, of, behind, or in front of the table or cart. The items may be stacked on the table or cart, provided that each stack shall not exceed the height of twelve inches. Signs may be attached to the side of or on top of the table or cart. No signs may extend higher than the top of the table or cart and no signs may be affixed to City facilities. The site shall be kept clean and all rubbish shall be deposited in proper receptacles regularly during the day and prior to departing the site each day. Two chairs may also be utilized. The chairs may be placed behind or next to (but not in front of) the table or cart.

(d) No person shall utilize sandwich board signs (“A” frames), canopies, freestanding umbrellas, tents, and similar coverings unless such use is authorized by a street use permit, license, or other City-issued authorization.

(e) The table, cart, and all the person’s other items shall be capable of being transported or removed at one time.

(f) This Section shall not apply to vendors regulated by Chapter 6.36. (Added by Ord. No. 1888CCS § 7, adopted 8/28/97; amended by Ord. No. 1949CCS § 16, adopted 7/20/99; Ord. No. 2047CCS § 14, adopted 7/9/02)
4.08.095 Prohibition against camping in public places.69

(a) No person shall camp in a prohibited public place.

(b) For the purpose of this Section:

(1) “Camp” means to erect, maintain or occupy a camp facility for the purpose of living accommodations.

(2) “Camp facility” means one or more of the following: tents, huts, other temporary physical shelters, cots, beds, sleeping bags, hammocks, or bedrolls.

(3) “Prohibited public place” means any of the following: the public parks listed in Section 4.08.091, public beaches, the Santa Monica Municipal Pier, public streets, public alleyways, public parking lots, public passageways, public rights-of-way, publicly-owned landscaped areas or greenbelts, public educational institutions including properties owned by the Santa Monica-Malibu Unified School District or Santa Monica College, or other government-owned properties located within the City of Santa Monica.

(c) The City Council may, by majority vote, establish one or more specified camping areas. Such camping areas, if any, may be located in prohibited public places, except that such camping areas shall not be located within public parks.

(d) This Section shall not take effect until March 1, 1995. (Added by Ord. No. 1768CCS § 4, adopted 9/13/94)

4.08.097 Prohibition against sitting or lying in downtown and the Main Street areas doorways at night.70

(a) No person shall sit or lie down in any entrance to a building in the downtown or Main Street areas between the hours of eleven p.m. and seven a.m. if that entrance is posted with a sign prohibiting such conduct. “Downtown” means the area bounded by and including the east side of Ocean Avenue, the north side of Wilshire Boulevard, the east side of Lincoln Boulevard, and the south side of Pico Boulevard. “Main Street area” means the area bounded by and including the west side of Neilson Way, the north side of Pico Boulevard, the east side of Main Street from Pico Boulevard to Strand Street, the north side of Strand Street to Second Street, the east side of Second Street and the City’s southern

69 http://www.qcode.us/codes/santamonica/view.php?topic=4-4_08-4_08_095&frames=on
70 http://www.qcode.us/codes/santamonica/view.php?topic=4-4_08-4_08_097&frames=on
“Entrance” means the entire area between the outer edge of an entrance to a building and the exterior door and includes the entry way, doorway or vestibule. The prohibition contained in this Section shall not apply to any person sitting or lying down in any entrance to a building due to a medical emergency.

(b) Any person violating the provisions of this Section shall be guilty of a misdemeanor which shall be punishable by a fine not exceeding one thousand dollars per violation, or by imprisonment in the County Jail for a period not exceeding six months, or by both such fine and imprisonment. (Added by Ord. No. 2056CCS § 1, adopted 10/22/02)

4.08.740 Aggressive solicitation prohibited

(a) It shall be unlawful for any person to solicit by harassing or menacing another person on a public street or sidewalk or in another place open to the public, whether publicly or privately owned.

(b) For purposes of this Article:

(1) “Solicit” means to ask another by word or gesture for money or for some other thing of value.

(2) “Solicit by harassing or menacing” means to do any of the following while soliciting:

(i) Block or impede the passage of the solicitee intentionally;

(ii) Touch the solicitee with the intent to intimidate or coerce;

(iii) Follow the solicitee, going behind, ahead or along side of him or her, with the intent to intimidate or coerce;

(iv) Threaten the solicitee, by word or gesture, with physical harm; or

(v) Abuse the solicitee with words which are offensive and inherently likely to provoke an immediate violent reaction.

(c) Any person violating the provisions of this Section shall be guilty of a misdemeanor and upon conviction shall be fined an amount not to exceed five hundred dollars or be imprisoned for a period not to exceed six months or both. (Added by Ord. No. 1741CCS § 1, adopted 5/10/94)

71 http://www.qcode.us/codes/santamonica/view.php?topic=4-4_08-4_08_740&frames=on
4.08.750 Solicitation of persons in certain locations—Prohibited.  

(a) It shall be unlawful for any person to solicit another who is in any of the following locations:

(1) In a public transportation vehicle;

(2) In the outdoor dining area of a restaurant or similar establishment which serves food for immediate consumption;

(3) Within eighty feet of an automated teller machine;

(4) In a vehicle traveling on a public street;

(5) In a public parking structure.

(b) For purposes of this section, “solicit” means to ask another by word or gesture for money or for some other thing of value.

(c) Any person violating the provisions of this section shall be guilty of a misdemeanor and upon conviction shall be fined an amount not to exceed five hundred dollars or be imprisoned for a period not to exceed six months, or both.  

(Added by Ord. No. 1758CCS § 1, adopted 8/2/94)

5.06.010 Food distribution in public parks and on the City Hall lawn.  

Persons and groups who wish to routinely distribute free meals and other food to needy people in Santa Monica are encouraged to participate in programs which provide meals indoors in conjunction with other services intended to help needy people find housing and jobs. Information on how to participate in such programs may be obtained from the Department of Community and Cultural Services.

Persons who serve or distribute food to the public in City parks or on the City Hall lawn must comply with:

(a) Applicable State health and safety standards regulating food service and distribution, including, but not limited to, the requirements of obtaining and displaying a valid permit from the Los Angeles County Department of Health for

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72 http://www.qcode.us/codes/santamonica/view.php?topic=4-4_08-4_08_750&frames=on
73 http://www.qcode.us/codes/santamonica/view.php?topic=5-5_06-5_06_010&frames=on
distributing food at a location approved by the City pursuant to State guidelines administered by Los Angeles County and guidelines adopted by the City;

(b) All applicable requirements of the City of Santa Monica’s Community Events Law; and

(c) The City’s Park Maintenance Code, which protects park facilities and foliage and ensures that the parks are a shared resource available to all members of the public.

Information about all three of these laws is available from the Department of Community and Cultural Services. (Added by Ord. No. 2055 § 1, adopted 10/22/02; amended by Ord. No. 2117CCS § 1, adopted 2/24/04)

5.06.020 Food distribution on public streets and sidewalks prohibited without City authorization.⁷⁴

No person shall distribute or serve food to the public on a public street or sidewalk without City authorization in the form of a vending permit, use permit, outdoor dining license or community event permit. However, no permit or license shall be required for a noncommercial food distribution that does not interfere with the free use of the sidewalk or street by pedestrian or vehicular traffic.

Any person violating this Section shall be guilty of a misdemeanor which shall be punishable by a fine not exceeding one thousand dollars per violation, or by imprisonment in the County Jail for a period not exceeding six months, or by both such fine and imprisonment. (Added by Ord. No. 2055 § 1, adopted 10/22/02; amended by Ord. No. 2117 § 2, adopted 2/24/04)

7.08.080 Priority projects.⁷⁵

The following projects shall be considered priority projects:

(a) Low or moderate income housing projects.
(b) Homeless shelters.
(c) Child day care facilities.
(d) Public and private nonprofit schools.

⁷⁴ http://www.qcode.us/codes/santamonica/view.php?topic=5-5_06-5_06_020&frames=on
⁷⁵ http://www.qcode.us/codes/santamonica/view.php?topic=7-7_08-7_08_080&frames=on
(e) Community service facilities.
(f) Residential housing projects.
(g) Public restrooms. (Prior code § 7187; added by Ord. No. 1451CCS, adopted 7/26/88)

9.31.130 Emergency Shelters

The purpose of these standards is to ensure that Emergency Shelters do not adversely impact adjacent parcels or the surrounding neighborhood and will be developed in a manner that protects the health, safety, and general welfare of the nearby residents and businesses while providing for the housing needs of a needy segment of the community. Emergency Shelters shall be located, developed, and operated in compliance with the following standards.

A. **Lighting.** Adequate external lighting shall be provided for security purposes. Lighting shall comply with Section 9.21.080, Lighting.

B. **Laundry Facilities.** The shelter shall provide laundry facilities or services adequate for the number of residents.

C. **Common Facilities.** The development may provide one or more of the following specific common facilities for the exclusive use of the residents and staff:
   1. Central cooking and dining room(s).
   2. Recreation room.
   3. Counseling center.
   5. Other support services.

D. **Security.** Parking and outdoor facilities shall be designed to provide security for residents, visitors and employees.

E. **Outdoor Activity.** For the purposes of noise abatement in Residential Districts, organized outdoor activities may only be conducted between the hours of 8:00 a.m. and 10:00 p.m.

F. **Emergency Shelter Provider and Services.** The agency or organization operating the shelter shall comply with the following requirements:

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1. Temporary shelter shall be available to residents for no more than 6 months with extensions up to 180 days available if the shelter operator determines that no alternative housing is available.

2. Staff and services shall be provided to assist residents to obtain permanent shelter and income. Such services shall be available at no cost to all residents of a provider’s shelter or shelters.

3. The provider shall not discriminate in any services provided.

4. The provider shall not require participation by residents in any religious or philosophical ritual, service, meeting or rite as a condition of eligibility.

5. The provider shall have a written management plan including, as applicable, provisions for staff training, neighborhood outreach, security, screening of residents to insure compatibility with services provided at the facility, and for training, counseling, and treatment programs for residents.

G. **Maximum Unit Density.** Emergency Shelters that are located in Residential Districts, when not developed in an individual dwelling unit format, shall not be subject to the underlying Zoning District’s maximum unit density standard, but the number of beds shall be limited to 3 times the maximum number of dwelling units which would otherwise be permitted on the site.

H. **Health and Safety Standards.** The shelter for the homeless must comply with all applicable federal and state standards. (Added by Ord. No. 2486CCS §§ 1, 2, adopted June 23, 2015)

**9.13.020 Land Use Regulations**

Specific Limitations:

(2) Homeless shelters with less than 55 beds are permitted by right. Homeless shelters with 55 beds or more may be permitted with application for and approval of a Conditional Use Permit.

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Appendix C

Examples of Community Opinions

Select Questions/Answers with Santa Monican who has experienced Homelessness

2. What strategies have been successful in preventing or reducing homelessness? What strategies have been unsuccessful?

Forcing people into treatment, making housing a reward, requiring compliance, enacting ordinances which effectively criminalize homelessness, shuffling people from one community to another, fining and jailing people for quality of life ‘crimes’, denying people choice, and having very low expectations of people who have fallen into homelessness are all strategies that fail to comprehensively address the situation.

The strategies that will prove to be the most effective are those that a) acknowledge there are many pathways to recovery, and b) holistically serve entire communities. They will be predicated on the premise that all those who come together to develop the strategies possess expertise necessary to the outcomes. Whether a person’s expertise comes from higher education, employment, or lived experience, it is equally valuable and must be used if we are ever to stop the runaway train into homelessness.

5. What are the major causes of homelessness? What are the intersections among homelessness, affordable housing, socioeconomic factors, and services such as mental health care?

The causes of homelessness are as varied as its victims are individual. The primary driving force today is the ever widening chasm between housing costs and people’s ability to pay. In other words, the price of renting is exploding at a far greater rate than salaries are increasing.

The relationship between homelessness, affordable housing, socioeconomic factors, and mental and physical healthcare is not at all an intersection. It is far more complicated, like a continuous circle on which the make-up of the relationship between these factors is not constant. The only constant is that there is a relationship.
13. Over the years Santa Monica has enacted many ordinances related to homelessness, to the extent you are familiar with them, what do you think about them?

Yes, I am aware of Santa Monica’s many ordinances, passed under the guise of helping, when, in my humble opinion, they have only made matters worse. If as much time was spent making life easier for our homeless folks, the community would be far less divided. Like public toilets, the lack of which leaves homeless folks no choice but to go in an alley or bush...somewhere...which angers the community and poses a public health risk. Like all the places it is illegal to sleep, the deprivation of which further compromises a person’s health. Then there are the anti-homeless bus stops which still aren’t all ADA compliant, provide no protection from the sun or rain, are very uncomfortable, and are just plain ugly. All to prevent people from having benches to sleep on.

14. What should Santa Monica be doing to address homelessness that it is not currently doing?

More community engagement/inclusion in its efforts.

15. What should the role of public safety officers be in dealing with homelessness issues?

Exactly as the SMPD is doing....having a HLP team of six officers specially trained to respond to individuals dealing with the many challenges homelessness brings.

Editorials/Opinion Pieces in Local Media

Santa Monica Mirror

- “SMa.r.t.-Homeless Crisis: Toward Solutions.” Santa Monica Mirror, 19 Jan. 2018,

Local group discusses opinions on possible solutions to homelessness. Ideas include “prefabricated tiny homes, pod housing, (and) stackable systems of
factory built components.” Supports a “housing first” model coordinated with Los Angeles County and the city of Los Angeles.


  Pastor of a local church responds to community complaints regarding church’s program to provide meals in a Santa Monica Park to people experiencing homelessness. Communicates that the church will cease serving meals beginning May 20th, 2018.


  State Senator Ben Allen describes actions he has taken or worked towards at the state level to alleviate or solve homelessness. These include a $2bn housing bond for creating supportive housing, a senate bill (SB 1380) to create the “State Homelessness Coordinating and Financing Council,” and specific programs allocated additional funding through the state budget.

Santa Monica Daily Press


  Mayor Ted Winterer discusses the current state of homelessness in Santa Monica and city council’s efforts to work on the issue.

Santa Monica Observer

- Santa Monica Observer. “Ocean Park Community Center (OPCC) Accused of Human Rights Violations.” Santa Monica Observer, 24 Nov. 2017,
Community member Michael Louis describes criticisms of former clients of The People Concern (formerly OPCC), Santa Monica’s “largest provider of (homeless) services” including examples of clients’ experiences using the provider’s services. Letter also supports passing an ordinance to set a “that would assure operating standards for homeless services providers as allowed by Senate Bill 2” as well as creating a committee to oversee temporary housing/shelters.

Social Media Posts

Facebook
Santa Monica Now (Facebook Group)
Laurie Delgado shared SheDoes’s event.

21 hrs

I believe in extending a helping hand to those in need. I believe, in pursuing the dignity of humanity. I believe in the innocence of children and abused seniors. I believe that one should never let their heart do their thinking. I believe in the goodness of humanity. I believe that true trust is like interest earned. Let’s come out and support this great cause. 🐣❤️ #VeniceShelter #SheDoes #SheDeservesaHome #MakeherSafe #SafetyMatters #HomelessnessSucks #SantaMonica #LosAngeles #SafeHome #SafeCorner #WeAreSantaMonica

#SheDoes @ Venice Community Open House

June 13, 6pm - 8pm

Westminster Elementary
1010 Abbot Kinney Blvd.

Find out more about the proposal to build temporary bridge housing at the former MTA bus yard in Venice and offer your input.

Residocracy (Facebook Group)
1. https://www.facebook.com/groups/616567778411018/permalink/1664848803582905/

Daniel Callahan
May 17 at 6:27pm

Every homeless person is someone's Brother, a Dad, a Mom, a Sister, or a Son/Daughter. It's a situation that is every parent's nightmare. Mental illness can be a cause, so can being $100 short of rent one month and finding yourself out on the street after a 3-day notice to pay, enabling a landlord to jack up the rent for the next renter. A very common practice here. With no one to turn to- It's a downhill spiral from there. Then there's substance abuse and serious addictions that compound all the factors. It's an incredibly tough situation for a City and it's residents to deal with. But we can provide a measure of help to those who seek it.

We can help the helpless, but it's tough to help the clueless. However, once a person demonstrates violence or the disregard for the law and for those around them, they need to be off the street. I would guess that there's upwards of 75,000 people on the streets of LA and the Westside on any given night. (don't give a darn what the census says, I see it with my own eyes). Sadly. approx 20% of these are the elderly. As a country- and for ANY country, it is a disgrace that elderly citizens spend their last yrs of life in this condition.

If we cannot take care of these people within our OWN City or country, I'm wondering why it is that people claim we an help the entire continent of South America and beyond. Is it the desire for votes, shallow sanctimony, wishfull thinking, or simply naivety? https://tinyurl.com/y8cmnqcd

2. Responses to
https://www.facebook.com/groups/616567778411018/permalink/1657317164336069/

Please note there are additional comments on the post linked above
Taylor Van Arsdale Per this article: Why are homeless people having babies? That seems really irresponsible.

Like · 3w

Hide 14 Replies

Abby Mahler you know what pays? sex work. you know what's expensive? birth control.

Like · 3w

Frank Lee Condoms are a pretty cheap and effective form of birth control.

Like · 3w

Abby Mahler while you are not wrong they are a) not fool proof and b) when you have no money, there are other priorities.

Like · 3w

Frank Lee I think they're rated at 98% effective (pretty good) and if someone is "getting payed" for sex work, it's a small price to pay. Sadly, I think most people simply don't care enough to be proactive.

Like · 3w
3. Responses to


Link:

https://www.facebook.com/groups/616567778411018/permalink/1657217357679383/
Michael Snider  "Alisa Orduña, senior adviser on homelessness to the Santa Monica city manager, thinks her city is lucky to be ahead of the curve with its programs dedicated to the homeless.

"Communities that didn't do that, I think, are just really overwhelmed."

She has it exactly backward. If Santa Monica didn't coddle and indulge the homeless it would not be more overwhelmed than almost anywhere in OC other than Santa Ana.

Like · 3w

Fredrick Johnson I was gonna post that, but you beat me to it. It's the same in Hollywood. Most libraries become de facto homeless shelters.

Like · 1w

Michael Snider City of LA has also given up, and did a long time ago. Leftist governance doesn't work

Like · 1w

Missy Winters Maybe we should just move all the books elsewhere and turn it into a homeless shelter. Then patrons will actually have someplace they can go read without loud, earplug-penetrating storing and body lice and the homeless will have somewhere to sleep during the day. I'm guessing the money is available, they certainly spend money on more ridiculous things.

Like · 1w · Edited

Natalie Burkholder What a BS article!!! It practically celebrates homelessness and pats city officials on the back. If you ask them, I doubt a single homeless person would say they WANT this for their lives. Not a mention in the piece about the dramatically increased crime rate, disease, and how the state's policies are affecting residents. It puts lipstick on the fact that residents are now being coerced in to taking responsibility for policies made at the state level with the addition of the granny flat for homeless people in their own backyard. Literally. And not a mention of how this affects the rest of us who are barely getting by and trying to provide a healthy, safe life for our children. I'm infuriated.

Like · 1w · Edited
Post from Santa Monica resident, Janet McLaughin (https://nextdoor.com/news_feed/?post=80700810) and select responses in thread:

Janet McLaughlin, Sunset Park–Southeast

Homeless in the library, what about the school kids?
My son went to the Ocean Park branch of the library for the first time a few days ago. He said the bathroom was full of homeless taking baths in the sink, it smelled really bad, and he felt very unsafe. He needs to meet his teacher there to study. My sister actually left her job as a librarian in Portland for similar reasons. She said her entire day was spent keeping the homeless away from all the kids that were in there unsupervised. She was constantly defusing potentially dangerous situations; not something she signed up for, nor was prepared to deal with. Is there anything we can do to make our libraries and parks safe for children again?

18 Apr · 16 neighborhoods in General

Sarah Starks, Sunset Park–Southeast · 18 Apr

We need bathroom and bathing facilities for homeless people so that there are alternatives to using public libraries, which are one of the few locations of bathrooms where anyone has a right to be due to their being public.

5 Thanks

April Arrandt, Ocean Park SE · 18 Apr

It’s true Janet

Kandace Steadham, Sunset Park–Southwest · 18 Apr

I’m a student as SMC, went to my local library, ocean park branch, and every spot was taken by a homeless person or their stuff. Not to mention the smell. Very disappointing. Sad to see all our tax dollars go to waste.

4 Thanks
Janet McLaughlin, Sunset Park–Southeast · 18 Apr
I wonder if any of the City Council has tried to take their kids to those libraries recently. All of them should be clean and safe, not just some of the branches. That's the whole purpose of having neighborhood libraries, is for children to be able to go to one close to their home.

😊 3 Thanks

Allen Chou, Sunset Park–Northwest · Edited 18 Apr
It's true that it's not against the law to smell bad, but you shouldn't cause disturbance and uneasiness in libraries in general. Strong repulsive odors are just as bad as loud noises in libraries. Why favor against people who actually want to comfortably use the facility for its intended purposes? I don't know what the best solution is, but clearly the current status is unacceptable and something needs to be done.

😊 4 Thanks

Andy K. Liberman, Pico · 18 Apr
Solution. Provide more public toilets.

😊 2 Thanks

Chas Hill, East Venice · 18 Apr
I believe the public toilets on 5th and Main or the toy district, when they were deployed, became housing and service units for prostitution. Article was in LA Times.

😊 2 Thanks
Appendix D

Questions and Comments from Audience at November 18, 2017 Forum

Audience Questions

*Please note these questions have been transcribed directly from the notecards received from the audience with no editing for content, clarity, or grammar. They questions are listed in no particular order*

- The Homeless need Healthier Diet Can we work with the Local SuperMarkets to pick up fresh Produce, Daily or Every other day they can no longer sell but, fresh enough for consumption
- Given the time and cost of crating permanent housing, are any resources being directed to create short-term temporary services that will at least provide shelter, food, and/or medical care?
- Given that the problem is regional, how will local efforts be integrated into larger models?
- As the demographics of homelessness are complex, are there strategies for prioritizing different populations?
- Mr. Maceri, OPCC is a 98.8% publically funded non profit, it has the annual revenue of about 13 million, and it’s most recent tax form shows that about 73% of the annual revenue goes to employee salaries and benefits, which means that only a fraction of your publically funded revenue actually supports the operation of the program for individuals experiencing homelessness. How do you justify that?
- How have the demographics of homelessness changed in recent years and what will be the impact on planning and strategies to address the issue?
- In your experience, what are some common misperceptions about homelessness?
- What do you understand t be the impacts of a growing population of homeless individuals and families on the local and regional economy?
- Mr. Maceri, would you support an ordinance and the establishment of an oversight committee for homeless service providers to assure and enforce minimum operational standards including the grievance procedure, program termination procedures and mandatory continuing staff training in ADA and trauma informed care? Such an ordinance and oversight committee exist in San Francisco. Legal aid is interesting in pushing for them in Santa Monica as a result of the many complaints they have been receiving from OPCC clients over the years. Would you support such an ordinance + committee?
A realtor friend of mine says one obstacle to create more rentals is the law that if a landlord wants to remove a unit from rental, he/she has to pay a large relocation fee to renter. He maintains that many homeowners would rent a small unit adjacent to house if they could avoid this later cost. What do you think of this?

There is a need for hospice care for homeless people in Santa Monica & the Westside. Is this issue being addressed + how?

How do you adapt locally to the budget changes at the federal level?

What are the top 3 root causes of homelessness and what is being done to address these?

How would you scale up housing?

1. Start with enforcing the LAW that landlords can’t refuse section 8 voucher holders. It’s not just about building.
2. If you are going to build - and allow developers the greenlight on EVERY project in S.M. then MANDATE that size+storage be increased. 300 sq ft. is absurd.

Why does the homeless housing need to be in Santa Monica? Why not Lancaster, Palmdale, Mojave? Lands cheap there and there’s plenty of it.

Doesn’t SM have transient laws on the books? Why not enforce them more vigorously?

Can you ask how many people in the audience have experienced homelessness? How many have housed a homeless person in their home? How many have stayed in a homeless shelter for more than 1 day?

How do we, who support homeless housing counter those who say “we support homeless housing just not in my neighborhood”

How can we reach an adequate supply of housing when the most vocal participants in local planning/zoning policy discussions are already comfortable housed, and are more concerned about protecting the way the city looked when they arrived, than they are with ensuring that others will have places to live?

Santa Monica is already busting at the seams where do they think they will build more housing?

What’s police procedure for dealing w/ homeless in public spaces?

Are there studies of migratory/movement patterns of homeless?

The LA Times recently reported that New York City every night gets approx. 95% of its homeless inside in shelters. But this costs something like 1.5 billion $ per year. Meas. H will provide about $350 million. Will this make a dent in our problem?

Which is a more intractable hurdle to re-housing and shelter projects:

- Institutional resistance
Community resistance
Or something else?

- Does the city of Santa Monica get federal funding for the homeless?
- The community colleges in CA do not build student housing. How do we insist they do build housing for student when in school?
- If I walk out of my office in DTSM and see a person passed out on the sidewalks, what should I do? Who should I call?
- How do you suggest civil commitments of other legal and compassionate means be used to bring chronically homeless people into the continuum of care, transitional housing, and ultimately permanent supportive housing?
- Can cities hire homeless people to do tasks like street cleaning?
- Can we have one question about children and youth?
- I’m homeless and not counted in the homeless count because I’m invisible. I can couch surf, etc. There are thousands of us in S.M. along. Your numbers are not accurate unless you find a way to count EVERYONE.
- Given that the community redevelopment agencies in California, which was the financial source to build homeless housing—where are we going to find financing for homeless housing—including homeless student housing?
- Is there an example of supportive housing on the westside?
- RE: Student 4 Student housing. Is this included in the LA County Housing/Homeless initiative?
- Unlike Canada, there is no functioning oversight of non-for-profits in the USA: the federal government delegated to the state. The state is understaff to investigate. Why have we not enacted an oversight committee for organizations that provide services to homeless? Why is there no ordinance spelling out minimum standards for homeless shelter? (Such an ordinance exists in San Francisco)
- Is the County programs
  - Where you house someone in your home (and get rent $)
  - Where you rent a parking space to a person who lives in a vehicle
    ■ Going to happen in Santa Monica?
- Sergeant Erika Aklufi, Why is the protocol when HLP receives a call about a homeless concern in a neighborhood?
  - Encampment
  - Living in vehicle
  - Trespassing
- I hear from a lot of residence that crime in SM has increased because of homelessness. Is the rise in crime due to homelessness?
- Wouldn’t federal funding be better used to build a huge commune to house, care for and educate the homeless?
- How are Santa Monica police addressing increased number of homeless in public spaces (i.e. parks, parking lot, beach, streets, etc.)?
- Is increased in homeless related to increase in crime & public safety?
- Has the new metro stop contributed to increased homeless in Santa Monica?
- I’ve been told that Culver City, Torrance, & Long Beach have way less problems with the homeless because the police hand’s aren’t tied like SM. Why can’t we follow this model?
- From my experience over the last 17 years. The homeless I’ve dealt with don’t want help. They like the life style. What does SM intend to do with them?
- Mentally ill get people off the street
- What are we going to do with the homeless that do not want help! And want to stay on the street. And creat problems. And crime. And make everyones life a living hell
- Is there a number a person should call when you see someone who appears to be in dire need of attention (not a medical emergency)
- How do we address & care for the mentally ill homeless population People that can not care for themselves Where do they go
- What will we be doing differently to eradicate the homeless from SM that we have not done in the last 30 years
- What percentage of homeless actually want help of housing?
- What to do
- $35 million free-pass (by right) to nonprofits in Santa Monica in which Non-Profits can borrow from the housing trust fund with No Notice to neighbors + No Right to be heard. Any comments?
- Why dont they have homeless on the colony in Malibu?
Bibliography & Suggested Resources

1. City of Santa Monica Homelessness Portal
   https://www.smgov.net/portals/homelessness/
2. Los Angeles Homeless Services Authority (LAHSA)- Covers Los Angeles County
   https://www.smgov.net/portals/homelessness/

Online Articles
   https://www.smgov.net/uploadedFiles/Portals/Homelessness/2017%20Info%20Item%20Homeless.pdf
   https://www.urban.org/sites/default/files/publication/46356/411410-Ending-Homelessness-in-Santa-Monica.PDF

Interviews