San Jose/Santa Clara County, California
Response to homelessness during the COVID-19 pandemic
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PRIMARY PARTNERS IN THE COVID-19 HOMELESSNESS RESPONSE

The Santa Clara County Office of Supportive Housing oversaw noncongregate shelters in hotels, contracting with providers like Abode Services to manage operations. Abode Services managed two of the hotel sites.

The city of San Jose led the response for congregate shelters and encampments, implementing safety measures and working with providers like HomeFirst to stand up new temporary facilities.

Destination: Home and Sacred Heart Community Service ran homelessness prevention and rental assistance programs, partnering with community organizations such as Latinas Contra Cancer to get funds out to people in need.

The Valley Homeless Healthcare Program coordinated health care response in encampments, shelters, and hotels, including COVID-19 testing and vaccinations.

Santa Clara County, home to Silicon Valley, has seen widening economic inequality over the past decades as the region’s economic gains have concentrated toward the top earners while lower-income households have seen their incomes decline. The San Jose/Santa Clara City and County Continuum of Care (CoC) serves the entire county and 15 cities within it. The 2020 Point-in-Time Count found 9,605 people experiencing homelessness, 82 percent (7,922) of whom were enduring unsheltered homelessness. Despite providing permanent housing to more than fourteen thousand people between 2015 and 2019, the number of people experiencing homelessness grew during that time, and local stakeholders attributed the increase to the county’s lack of affordable housing. As one stakeholder said, “Two people become homeless for every one person we house, so our homeless count continues to grow, even with a really sophisticated model. We have a coordinated entry system, everybody is under one data system, the system itself is doing fine, but we can’t keep up with the onslaught of people who are becoming homeless.” Efforts like Measure A, a $950 million affordable housing bond that was passed in 2016, are intended to address these challenges in the coming years.

In recent years, the Santa Clara County Office of Supportive Housing—the CoC lead applicant—came together with the city of San Jose, the Santa Clara County Housing Authority, and the nonprofit Destination: Home to form a collective impact approach to homelessness prevention and assistance in the county. Each agency in this task force brings different resources and capacities to implement one coordinated plan to end homelessness. After the pandemic hit, these preestablished roles and history of deep collaboration enabled the partners to quickly mobilize a response. We spoke with respondents from five organizations involved with the response to understand the core components, successes and challenges, and lessons learned for post-pandemic homeless services.

RESPONSES TO PEOPLE ALREADY ENDURING HOMELESSNESS

At the very beginning of the pandemic, Santa Clara County created a centralized intake hotline for anyone seeking shelter. Clinical staff from the Valley Homeless Healthcare Program (VHHP) screened callers to determine their medical vulnerability to COVID-19. Based on a set of criteria, the person would then be referred either to congregate or to noncongregate shelter (e.g., hotel). The criteria evolved based on current medical guidance set by the Centers for Disease Control and Prevention and available shelter capacity. Providers stopped taking individual
referrals and found this system—plus increased collaboration between individual providers—to be more beneficial to their clients. Key partners in the response—the city, county, and health care providers for the homeless—met daily to monitor trends, shift capacity, and troubleshoot needs.

“For the city emergency operation center, we had one core value: compassion in action. We based our decisions on if it was the compassionate and right thing to do, we could figure the money and resources and people out later.”

Santa Clara County leased 13 hotels/motels across eight cities through Project Roomkey, a California-wide effort to secure hotel and motel rooms across the state to move individuals experiencing homelessness who were most vulnerable to COVID-19 to safer locations. The county contracted with homeless service providers (including Abode Services) and it used redeployed county employees to staff and run the locations. People who were determined to be vulnerable to COVID-19 because of age or medical conditions were eligible for a hotel placement. Four of the sites were run by Abode Services, which provided shelter for 200 to 350 guests during the pandemic, about half of whom were unsheltered prior to intake. Abode Services distributes food, conducts daily wellness checks to monitor symptoms, and provides general support to clients. In total, 9 of the 13 hotels were designated for this purpose. The other four were designated for isolation and quarantine for people, regardless of their housing status, who had tested positive for COVID-19 and had nowhere to safely isolate. HomeFirst also started a motel program for veterans experiencing homelessness during this time, and eventually it was able to move more than 130 veterans from motels into permanent housing.

Six of the nine hotels used to shelter people vulnerable to COVID-19 remained open as of April 2021. Efforts ramped up in early 2021 to facilitate permanent housing placements from these sites. The county offered housing problem-solving training for workers in the hotels and motels. Abode Services matched people to housing with the additional funding it received for rapid rehousing through the Coronavirus Aid, Relief, and Economic Security (CARES) Act.

People who were not eligible for a hotel room were placed in congregate shelters. At the outset of the pandemic, Santa Clara County connected health officials to shelter operators to implement public health guidelines. To address the bed shortage caused by deconcentrating spaces, the city of San Jose opened or contracted with providers to open seven new shelter sites: four in existing spaces like a convention center and three newly developed spaces, including some modular units. To quickly staff these sites, the city redeployed its own workers as “disaster workers” to provide 24/7 staffing in these places, and it contracted with providers to run these sites. One of the providers even contacted the local hotel workers’ union to hire staff who had been laid off during the pandemic. Examples of provider-operated sites included an outdoor tent shelter and a bridge housing cabin site operated by HomeFirst. Their capacity increased from seven hundred per night to about eight hundred to one thousand per night. All shelter providers in the county met twice per week to coordinate and troubleshoot any issues. California’s Office of Emergency Services also provided more than one
EMBEDDING RACIAL EQUITY IN EMERGENCY RENTAL ASSISTANCE

Destination: Home and Sacred Heart Community Service built their emergency rental assistance programs in partnership with the communities they wanted to serve, following their framework of “don’t do something for people, without people.” They engaged with community members who received the previous round of funds to plan for the next round, speaking with and surveying at least 300 people. From these conversations they learned valuable lessons about the structure of rental agreements (40 percent of the people they surveyed did not have a traditional landlord) and about barriers to filling out applications (25 percent reported being challenged by technology platforms).

As a result, they created a tenant-focused program that provided flexible assistance with fewer documentation requirements. These feedback loops ensured that future iterations of the program would be relevant and accessible to the people they were trying to reach. A staff member with Sacred Heart Community Service said:

“We didn’t work with random organizations, we worked with organizations that actually have been doing work in terms of immigrant rights, organizing, listening to folks. These are folks who have been at the frontlines of pushing for protections and support and other types of work within immigrant communities, and they’re the ones who have relationships with people in the community. So, we asked them: how do they want to see assistance, how do they want it delivered? And that pushed us to be bigger and bolder with our next phase.”

hundred trailers to the city to support safe isolation for individuals experiencing homelessness. In May 2020, the city contracted with Abode Services to operate the trailers and was able to shelter 35 individuals in them before deciding to close the site because of continuous maintenance issues.

Despite these efforts, the combined capacity of the shelters and hotels still left thousands of people outside. At the onset of the pandemic, city and county partners conducted an encampment assessment to map out areas with more than 25 people. It deployed bathroom and hygiene stations; coordinated trash service; and distributed masks, gloves, and educational materials. After learning that people faced barriers accessing food and water because of closures of community centers, soup kitchens, and restaurants, the task force began providing these resources to encampments. Several organizations tag-teamed outreach to encampments. HomeFirst delivered hot meals three days per week and also tripled the size of its outreach team, hiring clinicians, a drug and alcohol therapist, and a case manager. VHHP purchased one thousand cellphones for people enduring unsheltered homelessness so they could stay in touch and conduct telehealth appointments to better support their health.

In addition, VHHP and other health care providers conducted COVID-19 testing and later they began vaccine outreach to encampments. A VHHP clinician shared,

We saved up all of this good faith [through mass testing sites] which is really paying off with the vaccine. People are excited about the vaccine, even if they are hesitant, there’s a lot of trust. They are seeing the same people that they saw for testing come with the vaccine, and it’s great.

HOMELESS PREVENTION AND RENTAL ASSISTANCE

Destination: Home and Sacred Heart Community Service ran a homelessness prevention program prior to the pandemic that served 1,500 extremely low-income families annually, providing an average of $4,500 in financial assistance to each. In March 2020, Destination: Home secured $12 million to increase the capacity of this program, which included federal funding received by the city and county. Within three days of securing the funds, it received 32,000 calls for assistance.

The second phase of assistance came after the CARES Act passed and was targeted toward helping people who did not qualify for expanded unemployment assistance or stimulus checks, including people who are undocumented. The third and fourth phases of assistance were explicitly rental assistance, paid to the landlord or the tenant, if the landlord refused. Because these latter phases included Emergency Rental Assistance Program funds from the US Department of Treasury, the documentation requirements were more extensive. Local government funding supplemented federal resources that came with restrictions, such as to provide food for people
staying in encampments. Stakeholders involved in the rental assistance program explained how they were able to better serve people by giving them cash (instead of payments to landlords) and by expanding eligibility and decreasing burdensome documentation requirements. Each later phase was targeted more closely to people with extremely low incomes, and the fourth phase included a vulnerability assessment that focused on key factors—such as possessing an active eviction notice from a landlord—contributing to homelessness.

A key component of this community-based approach included partnerships with 70 organizations, many of whom did not traditionally offer housing or cash assistance. These partners ranged from a Black community service agency to a Korean Baptist Church, from a Latino patient health support and advocacy organization to a charter school. As trusted members of their communities, these partners brought assistance to people, ensuring they knew it was available and that it was for them. Some of these agencies helped people navigate the applications and disbursed financial assistance, while others served as referral partners. After receiving training from Destination: Home, these partners could help their clients or community members navigate tricky situations, such as having a bad relationship with their landlord or not being sure if they qualified. As a staff member of such an organization said,

> Sometimes the trauma of poverty and the stress of the pandemic . . . even getting a checklist can be overwhelming, people just shut down. It’s not that people aren’t fighting or advocating for themselves or don’t care, it’s the weight of it all that can demoralize people. Having someone on the organizational side who can walk you through the process or can be there for you, within reason, to continue to call and remind you, and who doesn’t judge you, is just helpful and kind and treats you with dignity and respect, that’s really important . . . If we didn’t have this effort and there was just a centralized system, our clients would never make it through.

Across the four phases, this program disbursed $52.7 million in assistance through August 2021 to more than sixteen thousand households, 95 percent of whom were people of color and 79 percent were extremely low income.

Separately, Abode Services operated a financial assistance program for the county during the infection surge between November and December 2020 to incentivize people to stay home and isolate if they needed to. Created as an income replacement program, this flexible assistance could be used for rent or any other expenses. More than $2 million in financial assistance was distributed through this program.

**SERVICES IN SAN JOSE/SANTA CLARA COUNTY BEYOND THE PANDEMIC**

The close collaboration among county and city government and nonprofit partners enabled a comprehensive response and demonstrated an ability to quickly and creatively tackle challenges as they arose. The pandemic response primarily focused on encampment outreach, safe isolation, deconcentrating shelters, and rent relief. And although these efforts highlighted the benefits of a centralized intake, increased services supports—including 24/7 staffing—and noncongregate shelters, each of these required increased funding levels.

> “All of these things we’re calling ‘innovations’ are just things we should have been doing all along. Let’s get people housed. Let’s push through more projects and developments. Let’s feed people more, let’s get financial assistance to people, let’s trust people with the money, and listen to them first and foremost.”

However, this record outreach and bed capacity paled in comparison with the need, particularly for the nearly eight thousand individuals who remained outside. As one stakeholder put it:

> “There’s not enough beds for people in our area, there’s never been right-to-shelter laws, we have a huge portion of unsheltered homeless, it’s like 70 or 80 percent of our homeless population is unsheltered. The infrastructure for isolation doesn’t exist, we can get hotel rooms up, we have a 9,000 homeless population, it’s just a drop in the bucket.”
And several challenges remain as providers try to move people to permanent housing without adequate resources. The investments in a coordinated and far-reaching homelessness response system will need to continue to scale in the future, particularly for developing new and preserving old affordable housing in the community. Providers said that the pandemic taught them that housing people on a broad scale is possible with the appropriate resources and dedication: “[With hotel capacity,] that’s over more than 1,000 people [who] were placed in shelter during this time period, which tells me that it is possible to do it—we just haven’t.” Even though pre-pandemic collaboration was strong, all stakeholders reported the benefit of frequent and ongoing communication throughout the pandemic. People are energized to think bigger and tackle the challenges ahead.