Background

The Homeless Alliance of Western New York (HAWNY) has worked with its partnering organizations to administer a health assessment survey. The purpose of the survey is to provide information on clients' health, inform programmatic policy, and support funding opportunities. Survey data collection occurred between June and November of 2023, resulting in 240 completed surveys.

Primary Care Research Institute (PCRI) at the University at Buffalo developed survey questions using published reports of health assessments among individuals who have experienced homelessness, validated national survey questionnaires, and feedback from local partners providing services and case management to individuals who have experienced homelessness. Survey topics include Day-to-Day Activities, Healthcare, Mental Health, and Substance Use.

This report focuses on respondents in Rapid Rehousing (RRH), Permanent Supportive Housing (PSH), and Outreach and Shelter (OS) programs for whom we were able to obtain matched demographic data from the HAWNY Homeless Management Information System (HMIS) (n = 176). This analysis does not include survey responses from respondents for whom we could not obtain HMIS demographic data (n = 55) or who were not in RRH, PSH, or OS programs at the time of survey administration (n = 9). The first section of the report is a summary of demographic characteristics and survey responses. The second section of the report is a comparison of demographic characteristics and survey responses between respondents in RRH, PSH, and OS programs.

Section I – Participant Characteristics and Survey Reponses

Section Highlights

Lack of transportation impacts daily living

- 52% reported that lack of transportation keeps them from appointments, meetings, or work
- 47% reported that lack of transportation keeps them from getting things needed for daily living

Preventive medical care occurs regularly

- 83% reported a routine doctor's visit within the past year
- 43% reported a dental examination in the past year

Emergency room use is common

- 26% reported the emergency room as the usual place to seek healthcare when sick
- 51% went to the emergency room between 1 and 5 times in the past 12 months

Utilization of health centers is common

- 29% reported a health center as the usual place to seek healthcare when sick
- 58% went to a health center between 1 and 5 times in the past 12 months

Transportation impacts healthcare access

 52% reported they were unable to keep or manage medical appointments because of transportation

Mental health is a priority

- 61% received professional mental health counseling
- 26% received peer support for mental health

Impact of substance use

- 11% received medication for opioid use disorder
- 15% reported concern about fentanyl exposure
- 23% received professional substance use counseling
- 14% received peer support for substance use

Housing impacts mental health and substance use

- 65% reported mental health symptoms in the 12 months prior to their current housing situation
 - o 64% of those reported improvement in those symptoms since moving in
- 21% reported a negative impact of substance use in the 12 months prior to their current housing situation
 - 86% of those reported improvement since moving in

Introduction

Section I is a summary of percentages for all demographic characteristics and survey responses among respondents in RRH, PSH, and OS programs for whom we were able to obtain matched HMIS demographic data. We also compared survey responses between survey respondents included and excluded from this analysis to determine differences between those groups.

Demographic Characteristics

The average age of respondents described in this report is 42 years. Just over half (52%) are female and nearly half are either Black or African American (49%) or White (49%). Just under one in ten (9%) are Hispanic or Latino and few are veterans (3%). Over three quarters (77%) have income from any source and just over four in five (81%) have a disabling condition. Nearly all (95%) respondents have health insurance coverage (table 1). Nearly half (48%) of respondents are in PSH. Over two in five (41%) report one time on the street and 70% report less than 12 total months homeless on the street in the past three years (table 2).

Table 1: Demographic Characteristics	Percent
Age (mean)	42 y
Gender	
Male	48
Female	52
Race	
Black or African American	49
White	49
Native Hawaiian or Pacific Islander	1
American Indian Alaska Native or Indigenous	1
Hispanic/Latino	9
Veteran	3
Income from any source	77
Disabling condition	81
Health insurance coverage	95

Table 2: Homelessness experience	Percent
Housing program	
Outreach and Shelter	21
Permanent Supportive Housing	48
Rapid Re-Housing	31
Time on streets, in EH, or SH in the past three years	
One	43
Two	21
Three	9
Four or more	26
Total number of months homeless on the streets, in EH, or SH in the past three years	
Less than 12	70
More than 12	30

Participants Day-to-Day Activities

Respondents were asked questions about their difficulty with day-to-day activities, primary mode of transportation, and how a lack of transportation impacts their daily living. About one-third (31%) of respondents reported having difficulty with daily activities because of a physical, mental, emotional, or memory problem. Nearly two in five respondents reported public transportation (37%), and nearly one in five reported walking (17%) as their primary mode of transportation. Just over half (52%) of respondents reported that a lack of transportation over the past 12 months kept them from appointments, meetings, or work. Almost half (47%) of respondents reported that lack of transportation over the past 12 months kept them from getting things needed for daily living (table 3).

Table 3: Day-to-Day Activities	Percent
Difficulty with daily activities	31
Primary mode of transportation	
Bus or other public transportation	37
Walking	17
Multiple	17
Your own vehicle	15
Car rides from family or friends	7
Cab or Uber/Lyft	5
Biking	2
Something else	1
Lack of transportation kept me from (past 12 months)	
appointments, meetings, or work	52
getting things needed for daily living	47

Healthcare

Virtually all (97%) respondents reported having health insurance. Just over four in five (83%) respondents reported having a routine checkup within the past year, while about two in five (43%) reported a dental examination or cleaning within the past year. Over half (56%) of respondents reported receiving two doses of the COVID-19 vaccine. Over one-quarter (28%) reported not receiving any doses of the COVID-19 vaccine (table 4).

Table 4: Healthcare – Prevention	Percent
Has health insurance	97
Last doctor visit for a routine checkup	
Within the past year	83
Within the past 2 years	10
Within the past 5 years	4
5 or more years ago	4
Last dental examination of cleaning	
Within the past year	43
Within the last 2 years	21
Within the last 3 years	14
Within the last 5 years	15

Table 4: Healthcare – Prevention	Percent
Within the last 10 years	5
Never	3
COVID-19 vaccination	
None	28
One shot	16
Two or more shots	56

More than one-quarter of respondents reported the hospital emergency room (26%) or a doctor's office/health center (29%) as their primary source of healthcare. Over half (51%) of respondents reported visiting an emergency room, and nearly three in five (58%) reported visiting a health center between 1 and 5 times in the past 12 months. By contrast, over one-quarter (28%) and nearly one-third (30%) reported visiting an urgent care center or being hospitalized, respectively, between 1 and 5 times in the past 12 months (table 5).

Table 5: Healthcare – Utilization	Percent
Usual places to go when sick and need health care	
Multiple places	33
A doctor's office/health center	29
Hospital emergency room	26
Urgent care center	7
Don't have a usual place	5
Pharmacy in a drug/grocery store	1
Friends and family	1
Times visited doctor's office or health center (past 12 months)	
None	16
One to five	58
More than 5	27
Times visited urgent care center (past 12 months)	
None	69
One to five	28
More than 5	3
Times visited hospital emergency room (past 12 months)	
None	42
One to five	51
More than 5	7
Times hospitalized overnight (past 12 months)	
None	68
One to five	30
More than 5	2

Nearly four in five (79%) respondents reported having experience scheduling a medical appointment and nearly all reported having a working phone to call for a medical appointment (90%). More than one-quarter (29%) reported that they were unable to keep or manage a medical appointment in the past 12 months because they were busy. Over half (52%) of respondents were unable to keep or manage a medical appointment because of transportation. Under one-third of respondents reported delaying or

not getting medical care in the past 12 months because of difficulty finding a doctor that takes their health insurance (31%). About one-quarter or fewer reported delaying or not getting medical care in the past 12 months because of appointments not being available when they needed it (27%), not being able to get to the doctor's office when it was open (22%), and cost (15%). One in five (20%) respondents reported that they were unable to pay medical bills in the past 12 months (table 6).

Table 6: Healthcare – Barriers to Access	Percent
Experience scheduling a medical appointment	79
Has a working phone to call for medical appointment	90
Unable to or manage medical appointments (past 12 months) because	
you are too busy	29
of transportation	52
Delayed or didn't get medical care (past 12 months) because	
of difficulty finding a doctor that accepts your health insurance	31
appointment not available when you needed it	27
you couldn't get to doctor's office when it was open	22
of cost	15
Unable to pay medical bills (past 12 months)	20

Mental Health and Substance Use

Over three in five (61%) respondents reported receiving mental health counseling in the past 12 months. Just over one-quarter (26%) reported receiving peer counseling and 13% reported being admitted or staying inpatient for mental health symptoms (table 7).

Table 7: Mental Health	Percent
Received mental health counseling or therapy (past 12 months)	61
Received peer counseling for mental health (past 12 months)	26
Admitted or stayed inpatient for mental health symptoms (past 12 months)	13

Almost one in five (18%) respondents reported that substance use currently impacts their lives and about one in ten (11%) reported receiving medication for opioid use disorder in the past 12 months. Few (5%) reported using Narcan for revival from an overdose in the past 12 months and 15% reported concerns about fentanyl exposure. Almost one-third (30%) of respondents reported that they did not know how to access needle exchanges or safe injection resources and over half (52%) reported not needing those resources (table 8).

Nearly one-quarter (23%) of respondents reported receiving substance use counseling and 14% reported receiving peer counseling for substance use in the past 12 months. Just under one in ten (9%) reported admission or an inpatient stay for substance use over the past 12 months (table 8).

Table 8: Substance Use	Percent
Substance use currently impacts your life	
Yes	18
No	67
Don't use any substances	14

Table 8: Substance Use	Percent
Received medication for an opioid use disorder (past 12 months)	
Yes	11
No	67
Don't use opioids	21
Use Narcan to revive from overdose (past 12 months)	
Yes	5
No	91
Don't know what Narcan is	4
Concerned about fentanyl exposure	
Yes	15
No	81
Don't know what fentanyl is	4
Know how to access needle exchanges or safe injection resources	
Yes	19
No	30
Don't need needle exchange or safe injection resources	52
Received substance use counseling or therapy (past 12 months)	23
Received peer counseling for substance use (past 12 months)	14
Admitted or stayed inpatient for substance use (past 12 months)	9

Respondents were asked about their current living situation and the impact on their mental health and substance use. Nearly one-third (31%) of respondents reported spending most nights at a shelter and nearly one-third (30%) had been housed within the past year. Nearly two-thirds (65%) reported experiencing mental health symptoms in the 12 months prior to their current living situation, with 64% reporting that their symptoms improved after moving into their current living situation. Just over one in five (21%) respondents reported that substance use negatively impacted their life in the 12 months prior to their current living situation, with nearly all (86%) reporting that this improved since moving into their current living situation (table 9).

Table 9: Living Situation	Percent
Current living situation	
Spend most nights at a shelter	31
Housed within 1 year	30
Housed more than 1 year but less than 5 years	22
Housed more than 5 years	15
Spend most nights outside or at unsafe places	2
Experienced mental health symptoms in the 12 months prior to current living situation	65
Mental health symptoms since moving into current living situation	
Improved	64
Stayed the same	28
Gotten worse	8
Substance use negatively impacted your life in the 12 months prior to current living	
situation	21
Impact of substance use on your life since moving into current living situation	
Improved	86

Inclusion in the Analysis

We examined differences in survey responses between participants included in this analysis (n = 176) and those who were not (n = 64). We observed significant differences in responses for the following survey items: (1) primary mode of transportation; (2) working phone to call for medical appointments; (3) unable to pay medical bills; (4) knowledge of needle exchange or safe injection resources; (5) peer counseling for substance use; (6) inpatient stay for substance use; (7) and current living situation.

Compared to those included in the analysis, participants not included were less likely to use public transportation, their own vehicle, or car rides from family and friends as their primary mode of transportation. Participants not included in the analysis were more likely to report walking as their primary mode of transportation. Participants not included in the analysis were less likely to have a working phone to call for medical appointments and more likely to report being unable to pay medical bills in the past 12 months. They were also less likely to report that they did not need needle exchange or safe injection resources. Receiving peer counseling and inpatient admission for substance use in the past 12 months was more likely among those not included in the analysis. Finally, participants not included in the analysis were more likely to report spending most nights at a shelter or outside (table 10 – arrows indicate direction of change in survey item for respondents excluded from the primary analysis).

In summary, these results indicate that the group excluded from the primary analysis were appeared to have a higher risk profile as they were more likely to spend most night in a shelter, more reliant on walking for transportation, less likely to have a working phone, and more likely to have unpaid medical bills. This group may also have greater substance use needs as they were more likely to need safe injection resources, receive peer substance use counseling, and have an inpatient stay for substance use.

Table 10: Comparison of Survey Responses between Participants Included and Excluded from the Primary Analysis	Included N = 176	Excluded N = 65
Primary mode of transportation		
Bus or other public transportation	37	17 ↓
Walking	17	38 ↑
Multiple	17	24 ↑
Your own vehicle	15	8 ↓
Car rides from family or friends	7	3 ↓
Cab or Uber/Lyft	5	5 ↔
Biking	2	2 ↔
Something else	1	3 ↔
Has a working phone to call for medical appointment	90	73 ↓
Unable to pay medical bills (past 12 months)	20	37 ↑
Know how to access needle exchanges or safe injection resources		
Yes	19	26 ↑
No	30	44 ↑
Don't need needle exchange or safe injection resources	52	31 ↓
Received peer counseling for substance use (past 12 months)	14	25 ↑
Admitted or stayed inpatient for substance use (past 12 months)	9	23 ↑

Table 10: Comparison of Survey Responses between Participants Included and Excluded from the Primary Analysis	Included N = 176	Excluded N = 65
Current living situation		
Spend most nights at a shelter	31	69 ↑
Housed within 1 year	30	10 ↓
Housed more than 1 year but less than 5 years	22	11 ↓
Housed more than 5 years	15	3 ↓
Spend most nights outside or at unsafe places	2	6 ↑

Section II – Comparison of Rapid Rehousing, Permanent Supportive Housing, and Outreach and Shelter programs

Section Highlights

There were significant differences in demographic characteristics and survey responses by RRH, PSH, and OS programs:

- Gender: RRH respondents were more likely to be female.
- *Disabling Condition*: Nearly all PSH respondents reported disabling condition compared to just over half of RRH respondents.
- *Time on streets*: Over half of OS and RRH respondents reported one time on streets in the past 3 years. Over one-third of PSH respondents reported four times on streets.
- *COVID-19 vaccination*: RRH respondents were more like to report receiving no doses of the COVID-19 vaccine. About two-thirds of OS and PSH respondents received 2 or more shots.
- Number of doctor's office / emergency room visits: Compared to OS and RRH respondents, PSH respondents more frequently reported no visits to a doctor's office or emergency room visits in the past 12 months.
- Unable to pay medical bills: OS respondents much more frequently reported that they were unable to pay medical bills in the past 12 months.
- Mental health counseling: RRH respondents were less likely to receive mental health counseling in the past 12 months
- Substance use currently impacts your life: RRH respondents were less likely to report that substance use currently impact their life.
- Substance use counseling and peer support: RRH respondents were less likely to receive counseling and peer support for substance use.
- Mental health symptoms prior to current living situation: All OS respondents reported mental
 health symptoms in the 12 months prior to their current living situation compared to just under
 half of RRH respondents.

There were significant differences in select survey responses by demographic characteristics:

- Gender:
 - Female respondents were more likely to report more than 5 visits to doctor's office in the past 12 months.
 - Male respondents were more likely to report that substance use currently impacts their life.
- Race:

 Black/African American respondents were less likely to receive peer counseling for substance use in the past 12 months and to experience mental health symptoms in the 12 months prior to their current living situation.

• Ethnicity:

 Hispanic/Latino respondents were less like to report being unable to pay medical bills in the past 12 months and experiencing mental health symptoms in the past 12 months prior to their current living situation.

• Income:

 Respondents with income from any source were more likely to receive mental health counseling in the past 12 months.

• Disabling Condition:

Respondents with a disabling condition were more likely to receive 2 doses of COVID-19 vaccine. Respondents with a disabling condition were also more likely to receive mental health and substance use counseling in the past 12 months.

• Times on Streets:

 Respondents with more times on the streets were more likely to report that substance use currently impacts their life. Nearly two in five respondents with 4 or more times on the streets receive substance use counseling in the past 12 months.

• Number of Months on Streets:

 Respondents with more than 12 months on the street were more likely to receive substance use counseling in the past 12 months.

After accounting for differences based on demographic characteristics, the following survey items were statistically different between programs:

Healthcare - Utilization, Barriers to Access

- Number of doctor visits in the past 12 months
- Number of ER visits in the past 12 months
- Unable to pay medical bills

Substance Use

- Substance use currently impacts your life
- Substance use peer support in the past 12 months

Living Situation

Experience of mental health symptoms in the 12 months prior to current living situation

Introduction

Section II has three parts: (1) Demographic Characteristics and Survey Responses for RRH, PSH, and OS; (2) Select Survey Responses By Demographic Characteristics; and (3) Impact of Demographic Characteristics on Differences in Survey Items Between Programs. Part I provides percentages for all demographic and survey items that were statistically different between programs. Part II provides

percentages for survey items that were statistically different between programs that were also statistically different between demographic categories. Finally, Part III provides an assessment of the impact on select demographic characteristics on differences in survey responses by program.

Part I - Demographic Characteristics and Survey Responses for RRH, PSH, and OS

Demographic Characteristics by Program

RRH respondents were more likely to be female as compared to OS and PSH respondents. About two-thirds (65%) of RRH respondents and less than half of OS (41%) and PSH (48%) respondents were female. RRH respondents were also less likely to have a disabling condition (55%) compared to OS (80%) and PSH (98%) respondents. OS and RRH respondents shared a similar history of time on streets in the past three years. More than half in each group (OS - 57%, RRH - 58%) reported one time on streets in the past three years. PSH respondents were most likely (35%) to report four or more times on streets in the past three years (table 11).

Table 11: Demographic Characteristics and Homelessness Experience	Outreach and Shelter	Permanent Supportive Housing	Rapid Re- Housing
Gender			
Male	59	52	35
Female	41	48	65
Disabling condition	80	98	55
Time on streets, in EH, or SH in the past three years			
One	57	27	58
Two	13	28	17
Three	13	10	6
Four or more	17	35	19

Healthcare by Program

Compared to OS and PSH respondents, RRH respondents were less likely to report receiving two or more doses of the COVID-19 vaccine. Over one-third (37%) of RRH respondents reported receiving two or more doses compared to nearly two-thirds among OS (65%) and PSH (63%) respondents. The number of times respondents visited a doctor's office or emergency room in the past 12 months varied between different housing programs. PSH respondents were more likely to report no visits to a doctor's office (22%) compared to OS (12%) and RRH (9%) respondents. Similarly, PSH respondents were more likely to report no visits to an emergency room (55%) compared to OS (29%) and RRH (33%) respondents. Nearly half (46%) of respondents were unable to pay medical bills in the past 12 months, compared to over one in ten for PSH (14%) and RRH (12%) (table 12).

Table 12: Healthcare – Prevention, Utilization, Barriers to Access	Outreach and Shelter	Permanent Supportive Housing	Rapid Re- Housing
COVID-19 vaccination			

Table 12: Healthcare – Prevention, Utilization, Barriers to Access	Outreach and Shelter	Permanent Supportive Housing	Rapid Re- Housing
None	19	24	41
One shot	16	13	22
Two or more shots	65	63	37
Times visited doctor's office or health center (past 12 months)			
None	12	22	9
One to five	65	53	60
More than 5	24	25	31
Times visited hospital emergency room (past 12 months)			
None	29	55	33
One to five	63	41	57
More than 5	9	4	10
Unable to pay medical bills (past 12 months)	46	14	12

Mental Health, Substance Use, and Living Situation by Program

RRH respondents were less likely (46%) to receive mental health counseling in the past 12 months compared to OS (62%) and PSH (70%) respondents. RRH respondents were also less likely (6%) to report that substance use currently impacts their life compared to OS (32%) and PSH (20%) respondents. Compared to PSH and RRH respondents, OS respondents were more likely to report receiving substance use counseling (OS - 41% vs. PSH - 19%, RRH - 18%) and peer counseling (OS - 29% vs. PSH - 10%, RRH - 8%) (table 13).

Table 13: Mental Health and Substance Use	Outreach and Shelter	Permanent Supportive Housing	Rapid Re- Housing
Received mental health counseling or therapy (past 12 months)	62	70	46
Substance use currently impacts your life			
Yes	32	20	6
No	59	60	84
Don't use any substances	8	20	10
Received substance use counseling or therapy (past 12 months)	41	19	18
Received peer counseling for substance use (past 12 months)	29	10	8

Expectedly, OS respondents were more likely to report spending most nights in a shelter compared to PSH and RH respondents (OS - 86% vs. PSH - 11%, RRH 23%). All OS respondents, almost three-quarter (72%) of PSH respondents, and nearly half (49%) of RRH respondents reported experiencing mental health symptoms in the 12 months prior to their current living situation (table 14). All OS respondents reported improvement in mental health symptoms after moving into their current living situation. About two-thirds of PSH (65%) and RRH (63%) respondents reported the same.

Table 14: Living Situation	Outreach and Shelter	Permanent Supportive Housing	Rapid Re- Housing
Current living situation			
Spend most nights at a shelter	86	11	23
Housed within 1 year	8	17	66
Housed more than 1 year but less than 5 years	3	38	11
Housed more than 5 years	0	32	0
Spend most nights outside or at unsafe places	3	2	0
Experienced mental health symptoms in the 12 months prior to current living situation	100	72	49

Part II - Select Survey Responses By Demographic Characteristics

Recognizing that responses to survey questions may vary by demographic characteristics, we aimed to assess the impact of demographic characteristics on the observed differences in survey responses by program. As described in more detail above, responses to the following survey items were statistically different between programs: (1) 'COVID-19 vaccination status'; (2) 'number of doctor visits in the past 12 months'; (3) 'number of ER visits in the past 12 months'; (4) 'unable to pay medical bills'; (5) 'mental health counseling in the past 12 months'; (6) 'substance use currently impacts your life'; (7) 'substance use counseling in the past 12 months'; (8) 'substance use peer support in the past 12 months'; and (9) 'experience of mental health symptoms in the 12 months prior to current living situation'.

To determine the impact of demographic characteristics on the survey items that were statistically different between programs, we calculated the percentage of survey responses among respondents in different demographic categories for those survey items. Below are the survey items that were statistically different between demographic categories. The starred demographic characteristics are those that were also significantly different between programs.

Gender*

Responses for 'number of doctor visits in the past 12 months' and 'substance use currently impacts your life' were statistically different between genders. Compared to male respondents, female respondents were more likely to report more than 5 visits to the doctor's office in the past 12 months. Nearly two in five (37%) female respondents reported more than 5 visits to a doctor's office compared to nearly one in five (17%) male respondents. Over one quarter (27%) of male respondents reported that substance use impacts their life compared to just over one in ten (11%) female respondents (table 15).

Table 15: Survey Response Differences by Gender	Female	Male
Times visited doctor's office or health center (past 12 months)		
None	10	21
One to five	54	62
More than 5	37	17
Substance use currently impacts your life		
Yes	11	27
No	69	65
Don't use any substances	20	8

Race

Responses for 'substance use peer support in the past 12 months' and 'experience of mental health symptoms in the 12 months prior to current living situation' were statistically different between races. Compared to White respondents, Black/African American respondents were less likely receive peer counseling for substance use in the past 12 months and less likely to report experiencing mental health symptoms in the 12 months prior to their current living situation (table 16).

	Black/African	
Table 16: Survey Response Differences by Race	American	White
Received peer counseling for substance use (past 12 months)	8	19
Experienced mental health symptoms in the 12 months prior to		
current living situation	55	77

Ethnicity

Responses for 'unable to pay medical bills' and 'experience of mental health symptoms in the 12 months prior to current living situation' were statistically different between ethnicities. Compared to non-Hispanic/Latino respondents, Hispanic/Latino respondents were less likely to report being unable to pay medical bills in the past 12 months and less likely to report experiencing mental health symptoms in the past 12 months prior to their current living situation (table 17).

	Hispanic/	Non-Hispanic/
Table 17: Survey Response Differences by Ethnicity	Latino	Latino
Unable to pay medical bills (past 12 months)	0	23
Experienced mental health symptoms in the 12 months prior to		
current living situation	30	68

Income

Responses for 'mental health counseling in the past 12 months' were statistically different based on income status. About two-thirds (67%) of respondents who report income from any source received mental health counseling in the past 12 months, compared to 44% of respondents who report no income from any source (table 18).

	Income from	No income from any
Table 18: Survey Response Differences by Income	any source	source
Received mental health counseling or therapy (past 12 months)	67	44

Disabling Condition*

Responses for 'COVID-19 vaccination status', 'mental health counseling in the past 12 months', and 'substance use counseling in the past 12 months' were statistically different based on disabling condition status. Nearly two-thirds (63%) of respondents who report a disabling condition received two or more doses of the COVID-19 vaccine compared to under one-third (29%) of respondents who report no disabling condition. Respondents who report a disabling condition were more likely to receive mental

health counseling and substance use counseling in the past 12 months compared to those who report no disabling condition (table 19).

Table 19: Survey Response Differences by Disabling Condition	Disabling condition	No disabling condition
COVID-19 vaccination		
None	22	46
One shot	15	25
Two or more shots	63	29
Received mental health counseling or therapy (past 12 months)	67	39
Received substance use counseling or therapy (past 12 months)	27	10

Time on Street*

Responses for 'substance use currently impacts your life' and 'substance use counseling in the past 12 months' were statistically different based on times on street in the past three years. As the reported number of times on streets in the past 3 years increases, respondents were more likely to report that substance use currently impacts their life. Nearly two in five (38%) respondents who reported four or more times on streets in the past 3 years received substance use counseling in the past 12 months (table 20).

Table 20: Survey Response Differences by Times on Streets	One time	Two times	Three times	Four times
Substance use currently impacts your life				
Yes	10	19	25	33
No	80	59	58	51
Don't use any substances	10	22	17	15
Received substance use counseling or therapy				
(past 12 months)	13	23	17	38

Number of Months on Street

Responses for 'substance use counseling in the past 12 months' were statistically different based the number of months on the street in the past three years. Respondents who report being on the street for more than 12 months in the past 3 years were more likely to receive substance use counseling in the past 12 months compared to those who report 12 months of less on the street (table 21).

	On the street 12 months or	On the street more than 12
Table 21: Survey Response Differences by Months on the Street	less	months
Received substance use counseling or therapy (past 12 months)	19	32

We did not observe any statistical differences based on age, veteran status, or insurance status for survey items that were statistically different between programs.

Part III - Impact of Demographic Characteristics on Differences Between Programs

Demographic characteristics that have the potential to obscure significant differences in survey responses by program are those that are significantly different between both program and those survey responses. Gender, disabling condition, and times on street in the past 3 years were the only demographic characteristics observed to be significantly different between programs. Additionally, we observed significant differences by:

- Gender for:
 - 'number of doctor visits in the past 12 months'
 - 'substance use currently impacts your life'
- Disabling condition for:
 - 'COVID-19 vaccination status'
 - o 'mental health counseling in the past 12 months'
 - o 'substance use counseling in the past 12 months'
- Times on streets in the past 3 years for:
 - 'substance use currently impacts your life'
 - 'substance use counseling in the past 12 months'

When accounting for the impact of demographic characteristics on the differences in these survey response items by program, we observed the following:

Not Statistically Different:

- Differences by program for 'COVID-19 vaccination status' are no longer significantly different between programs when accounting for differences by disabling condition
- Differences by program for 'mental health counseling in the past 12 months' are no longer significantly different between programs when accounting for differences by disabling condition
- Differences by program for 'substance use currently impacts your life' are no longer significantly
 different between programs when accounting for differences by disabling condition and times
 on street in the past 12 months

Statistically Different:

- Differences by program for 'number of doctor visits in the past 12 months' are still significantly different between programs when accounting for differences by gender
- Differences by program for 'substance use currently impacts your life' are still significantly different between programs when accounting for differences by gender and times on street in the past 12 months

Finally, as noted earlier, we observed the following to be **significantly different between programs** and there was no significant variation for these items by gender, disabling condition, and times on street in the past 12 months:

• 'number of ER visits in the past 12 months'

- 'unable to pay medical bills'
- 'substance use peer support in the past 12 months'
- 'experience of mental health symptoms in the 12 months prior to current living situation'

Summary

Healthcare utilization and access shows significant variation between RRH, PSH, and OS programs. Overall, 58% and 51% of all respondents reported 1-5 visits to the doctor's office or emergency room, respectively, in the past 12 months. Based on the stratified results, the OS and RRH respondents accounted for much of this utilization. OS respondents were also three to four times more likely to report that they were unable to pay medical bills in the past 12 months.

Just under 1 in 5 respondents overall reported that substance use currently impacts their life and 14% received peer support for substance use in the past 12 months. The proportion of PSH respondents reporting about the impact of substance use was identical to the overall proportion. In contrast, OS respondents were much more likely to report that substance use currently impacts their life and that they received substance use peer support in the past 12 months.

Finally, the variation in reporting on mental health symptoms in the 12 months prior to a current living situation was pronounced between programs. Overall, about two-thirds of respondents reported that they experienced mental health symptoms in the 12 months prior to their current living situation. This was largely driven by OS respondents, all of whom reported that they experienced mental health symptoms in this timeframe.