HIC/PIT Count Data Collection Survey Manual

2024 PIT

❖ Rapid Re-housing (RRH) Project

Georgia Department of
Community Affairs

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Introduction

Guide to Completing the 2024 PIT/HIC Survey

Welcome to the Guide on How to Fill Out the 2024 Point-in-Time (PIT) and Housing Inventory Count (HIC) Survey! This guide is designed to help you navigate the survey questions effectively, ensuring accurate and valuable data collection for addressing homelessness.

Why This Matters

Understanding homelessness is crucial for providing better services and support to those in need. The PIT and HIC surveys play a vital role in shaping policies, allocating resources, and ultimately making a difference in the lives of homeless individuals and families.

Your Role as a Survey Participant

As a survey participant, your input matters. By providing clear and accurate responses to the questions in this guide, you are contributing to the larger effort to combat homelessness. Your dedication to this cause is highly appreciated.

How This Guide Works

In this guide, we will walk you through each section of the 2024 PIT/HIC survey, offering explanations, examples, and tips to help you complete it successfully. We understand that survey questions can sometimes be complex, so we aim to make this process as straightforward as possible.

Getting Started

The 2024 PIT/HIC Survey consists of four essential parts, each serving a unique purpose in collecting crucial data to combat homelessness. In this guide, we will take you through each of these parts step by step:

1. General Agency Information

❖ This section gathers basic information about your agency. It helps in identifying the agency responsible for the survey and its contact details. Think of this as setting the stage for the survey.

2. Project Information

❖ In this part, you'll provide specific details about the project or programs your agency operates. These details help to understand the scope of services provided and their impact on homelessness.

3. Inventory and PIT (Point-in-Time)

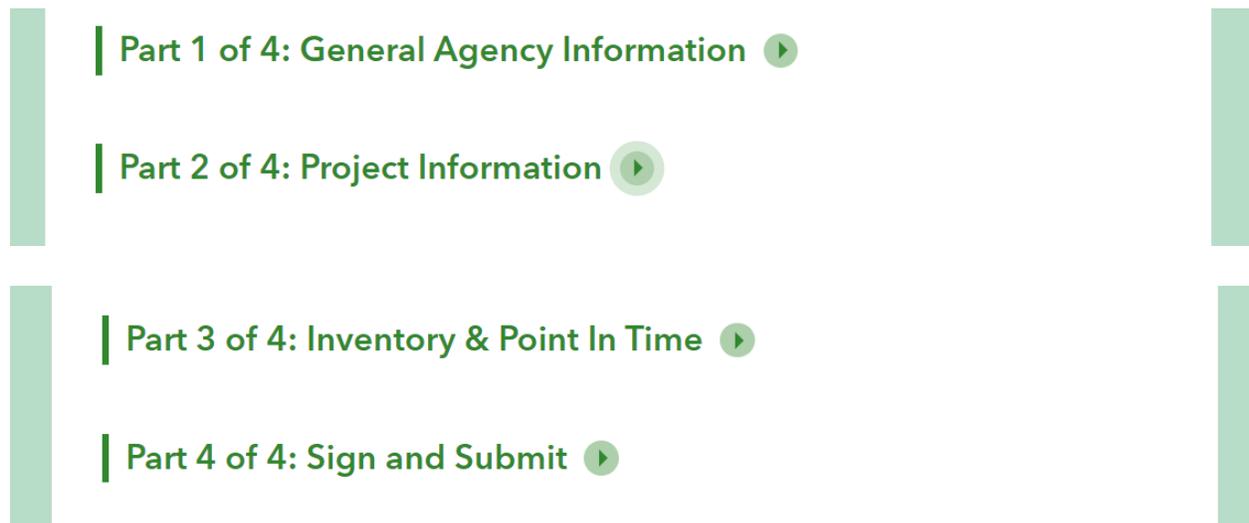❖ Here, you'll dive into the core of the survey, collecting data on 2024 PIT and HIC.

4. Sign and Submit

❖ Finally, this part involves signing and submitting the completed survey.

5. Key Terms

❖ The section will provide you with a definition of key terms used in this document.

Flow of Survey:

Part 1 of 4: General Agency Information ▶

Part 2 of 4: Project Information ▶

Part 3 of 4: Inventory & Point In Time ▶
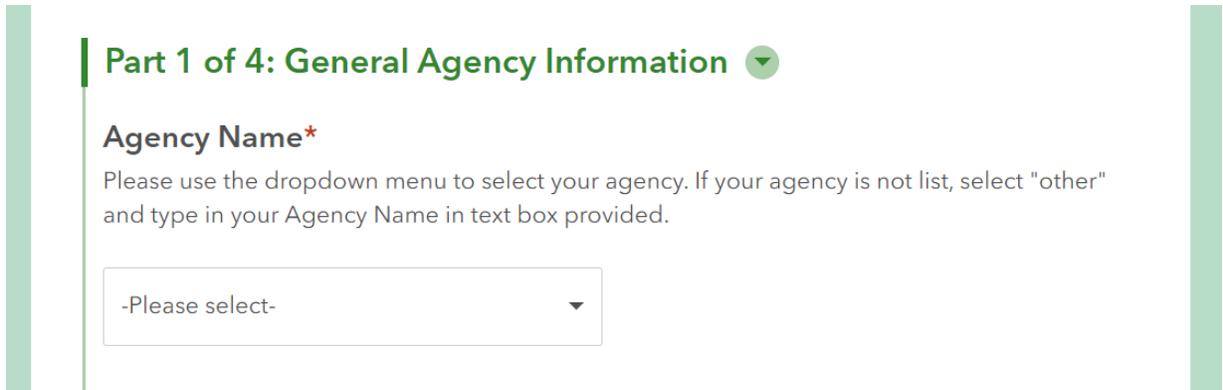
Part 4 of 4: Sign and Submit ▶

Part 1: General Agency Information

In this section we will fill out need agency information we need.

Agency Name

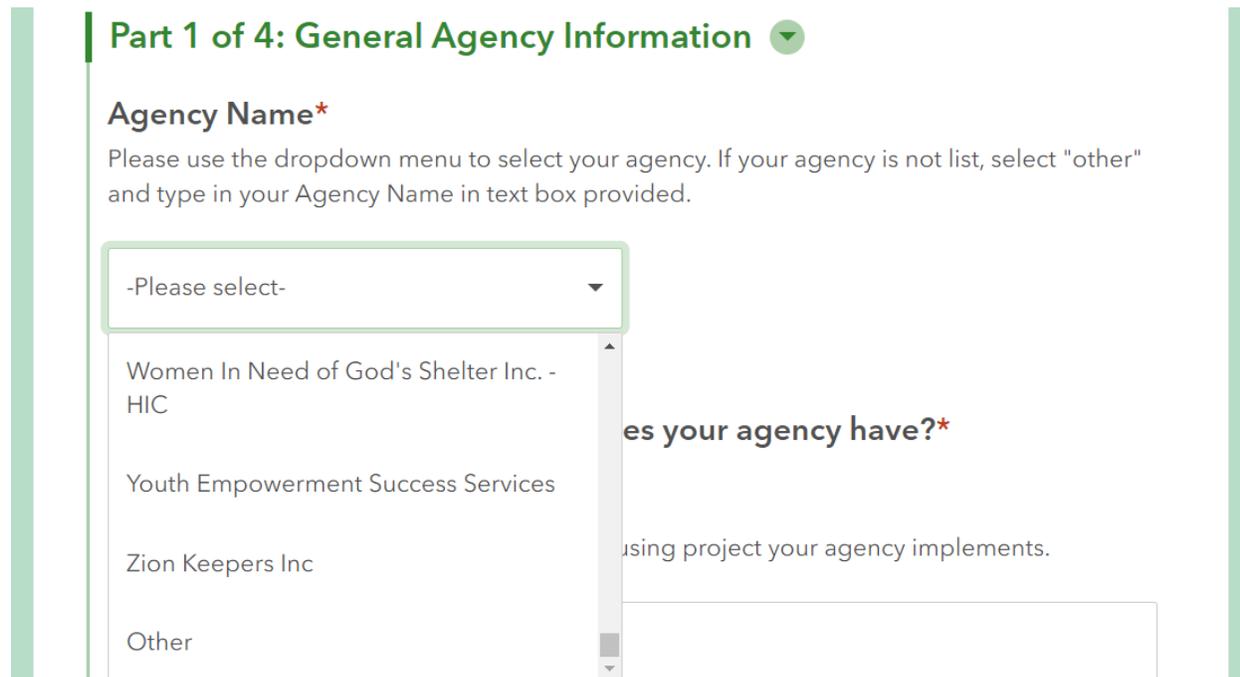- ❖ Begin by locating the dropdown menu for "Agency Name" in the survey form.

Part 1 of 4: General Agency Information ▼

Agency Name*

Please use the dropdown menu to select your agency. If your agency is not list, select "other" and type in your Agency Name in text box provided.

-Please select- ▼

- ❖ Scroll through the options available. If you find your agency name, simply click on it to select.

<mark>If your agency name is not listed, proceed to the end of the dropdown list.</mark>
<mark>Look for the option labeled **"Other."** Click on this option. After selecting "Other," a text box will appear.</mark>

Part 1 of 4: General Agency Information ▼

Agency Name*

Please use the dropdown menu to select your agency. If your agency is not list, select "other" and type in your Agency Name in text box provided.

-Please select- ▼

Women In Need of God's Shelter Inc. - HIC

Youth Empowerment Success Services

Zion Keepers Inc

Other

es your agency have?*

using project your agency implements.

❖ Type in the full name of your agency in this text box. Please ensure accuracy and use the full, official name of your agency. This allows for flexibility and ensures that all agencies, including those not pre-listed, can be accurately represented in the survey.

Which Types of Housing Project Does your Agency have?

❖ For this question, please select the specific housing types of your agency implements by ticking the checkboxes provided. <mark>However, it's crucial to note that, even if your agency operates multiple housing types of projects, a separate survey submission is required for each unique housing project your agency operates.</mark> **This means that for every distinct housing initiative Project, please submit a separate survey.**

Which types of housing projects does your agency have?*
(Check all that apply)

Please submit a separate survey for EACH housing project your agency implements.

☐ Emergency Shelter (up to 90 days)

☐ Extreme Weather (Open based on need)

☐ Hotel/ Motel Vouchers

☐ Permanent Supportive Housing

☐ Rapid Re Housing

☐ Seasonal Shelter (open daily for several months per year)

☐ Transitional Housing (90 day to 2 years stay)

Is this a Domestic Violence (DV) Agency?

- ❖ If most of your clients fall into this DV category, select "Yes."
- ❖ If your agency does not primarily serve victims/ Survivors of domestic violence, please select "No."

Is this a Domestic Violence Agency*

Please note that for the purpose of this survey, HUD has specified those whose current episode of homelessness is a result of actively fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against persons are considered to be homeless and are to be counted for this sheltered count.

○ Yes   ○ No

Agency County

- ❖ This indicates the county where the agency is located. If your project involves scattered site housing, please use the location (county) where your administrative office is based. This ensures accurate geographical data for the survey. If your agency is not involved in scattered site housing, simply input the county where your agency is located.

Agency County*

If your project is a scattered-site housing project, please enter the county of your administrative office.

-Please select- ▼

Agency Executive Director contact information.

❖ For the following questions, please provide the full name of your Agency Executive Director, along with their email address and phone number.

Agency Executive Director - Contact Information*
Enter full name below

Agency Executive Director - Contact Information*
Enter Phone Number below: (XXX)XXX-XXXX

Agency Executive Director- Contact Information*
Enter email address below

❖ This information is crucial for us to contact the agency in case any details are missing, need updating, or are found to be incorrect during the survey review process. Ensure accuracy in inputting this contact information to facilitate effective communication.

Part 2: Project Information

In this section, we will gather essential details about your project. This includes information on the project's location, target population, funding sources, project type, and whether it utilizes the Homeless Management Information System (HMIS) also known as Client Track.

Project Name

- ❖ Begin by choosing your project name from the dropdown menu. Scroll through the list of available options, and if you find your project name, click on it to select.
- ❖ If your project name is not present in the list, scroll to the bottom and choose the "Other" option. In the provided text box, type in the complete and accurate name of your project. It's crucial to input the full project name rather than just the project type to avoid confusion.

Part 2 of 4: Project Information ▼

Project Name*

Please use the dropdown menu to select your project. If your project name is not list, select "other" and type in your Project Name in text box provided.

The following question responses must all be related to this project name and project type.

Please remember to complete/ submit a separate survey for each project type your agency implements.

-Please select-   ▼

Project Address, City, Zip Code and County

- ❖ Next, provide the physical address where your project is primarily located and serves its participants. For scattered site projects with multiple locations, input the address where the majority of beds and units are situated.
- ❖ If your project serves victims of domestic violence, prioritize participant safety by using a PO Box or another anonymous address. For projects categorized as rapid rehousing (RRH), enter "TBRA" for Tenant-Based Rental Assistance or "RRH" for Rapid Rehousing.

Project Address

If your project is a scattered-site housing project, or if this projects has units at multiple locations, please enter the address where the majority of beds and units are located. Projects serving victims of domestic violence must use a PO Box or other anonymous address to ensure the safety of participants served. If tenant based or Rapid ReHousing, please enter "TBRA" or "RRH"

Project City*

If your project is a scattered-site housing project, please enter the city where the majority of the project's clients are housed.

If tenant based, enter the city of the site where most beds are located

Project Zip Code*

If your project is a scattered-site housing project, please enter the zip code where the majority of the project's clients are housed.

If tenant based, enter zip code of the site where most beds are located

Project County*

If your project is a scattered-site housing project, please enter the county where the majority of the project's clients are housed.

If tenant based, enter the county of the site where most beds are located

-Please select- ▼

Is this Project Participating Homeless Management Information System (HMIS)?

- ❖ If your project utilizes the statewide Homeless Management Information System (HMIS) known as **Client Track** in Georgia, please select "Yes" to indicate that you enter all enrollment information of clients in the Client Track database system.

Is this project participating in the Statewide Homeless Management Information System (HMIS)?*

Do you enter clients in ClientTrack? The entire project must be fully entered in HMIS to be considered participators.

○ Yes   ○ No

- ❖ If your project does not use Client Track or the statewide HMIS system to enroll clients into this project, please select "No."

Does this project verify homeless status when determining whether or not someone is eligible for the program?

For this question, specify whether your project verifies the homeless status of clients before enrolling them into the program.

- ❖ If your project verifies the homeless status before enrollment, select "Yes."
- ❖ If your project does not verify homeless status before enrollment, select "No."

Does this project verify homeless status when determining whether or not someone is eligible for the program?*

○ Yes   ○ No

Are the majority of the clients served in this project homeless according to HUD's definition?

For this question, indicate the percentage of homeless clients served by your project. Before selecting the option make sure to read the HUD definition of homelessness:

Definition:

- ❖ Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
- ❖ Has a primary nighttime residence that is a public or private place not meant for human habitation; or
- ❖ Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
- ❖ Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Are the majority of the clients served in this project homeless according to HUD's definition?*

Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
- Has a primary nighttime residence that is a public or private place not meant for human habitation;
- Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
- Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

○ Yes, all (100%) of the clients served in this program are homeless

○ Not all of the clients served in this program are homeless, but more than 50% of them are

○ Less than 50% of the clients served in this program are homeless

- ❖ If your project serves 100% of homeless clients, select "Yes" (100%).
- ❖ If your project serves more than 50% of homeless clients, select "Not all the clients served are homeless, but more than 50% are homeless."

❖ If your project serves less than 50% of homeless clients, select "Less than 50% of the clients served are homeless."

Which of these populations does this project target?

❖ This question is looking for the target populations served by your project, such as Victims of Domestic Violence, Veterans, and Persons Living with HIV/AIDS. Select the appropriate option based on the percentage of clients served in the project. If the project serves more than 75% of clients of DV victims or Person with HIV/AIDS or Veterans then select those options, else select None of these.
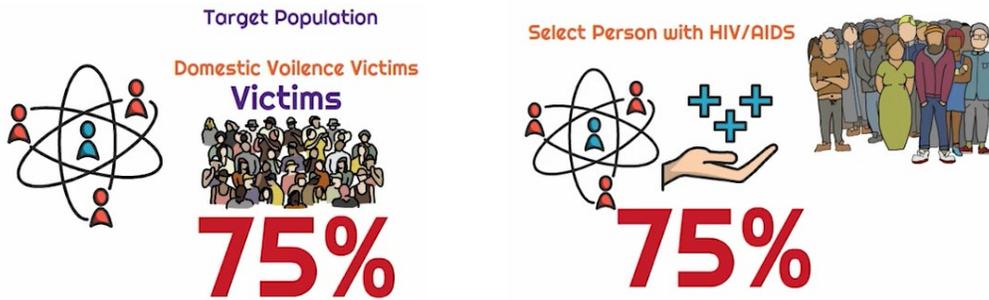
Which of these populations does this project target?*

A population is considered a "target population" if your project is designed to serve that population and at least three-fourths (75%) of the clients served by the project fits that target population description.

○ Domestic Violence Victims

○ Veterans

○ Persons living with HIV/AIDS

○ Unsure

○ None of these

❖ If your project serves more than 75% of a particular target population, select the corresponding option.

❖ If your project does not serve more than 75% of any specific target population, select "No of these". Select Unsure if you are not sure about target population.

Is this project funded through McKinney-Vento Homeless programs? (ESG, CoC, YHDP, or Special NOFO)?

❖ If your project is funded through McKinney Vento like ESG, CoC, YHDP or Special NOFO select "Yes."

❖ Once you select "Yes," you will be prompted with a question to choose the specific McKinney Vento program that funds your project. Select the appropriate as shown in the image below:

You could select Multiple only if your project is funded through multiple sources like ESG and CoC.

❖ If your project is not funded through McKinney Vento, select "No."

Is this project funded through other federal funding sources?

Is this project funded through other federal funding sources?*

○ Yes   ○ No

❖ If your project is funded through sources other than the federal programs mentioned, select "Yes."
❖ If you select "Yes," you will be prompted to choose the specific funding source from the list provided. If you can't find your funding source in the list, select **"Other,"** and type in the name of your funding source.

Is this project funded through other federal funding sources?*

● Yes   ○ No

Which of the following federal programs is this project funded?*
Check all that apply

☐ HUD: HUD/VA Supportive Housing (HUD/VASH)

☐ VA: Supportive Services for Veteran Families Program (SSVF)

☐ VA: Grant and Per Diem Program (GPD) – Bridge Housing

☐ VA: Grant and Per Diem Program (GPD) – Low Demand

☐ VA: Grant and Per Diem Program (GPD) – Hospital to Housing

☐ HUD: HOPWA - Transitional Housing (facility-based or TBRA)

☐ HUD: HOPWA – CV

☐ HUD Public and Indian Housing (PIH) programs (non-VASH), including public housing and housing choice voucher inventory that is dedicated to persons experiencing homelessness

☐ HUD: PIH (Emergency Housing Voucher)

☐ HUD: HOME

☐ HUD: HOME (ARP)

☐ Other:

❖ If your project is not funded through any of the federal programs or other sources, select "No."

What type of project is this?

For this important question, select the project type based on the details you've provided above:

What type of project is this?*

Refer to the above question response: Project Name

*Remember to complete a separate survey for EACH housing project your agency implements

- ○ Emergency Shelter (up to 90 days)
- ○ Hotel/Motel Vouchers
- ○ Permanent Supportive Housing
- ○ Rapid ReHousing
- ○ Seasonal/Winter Shelter (open several months a year)
- ○ Transitional Housing (90 days to 2 years)

Choose the project type that best aligns with the nature and duration of your project. This selection will determine the specific set of questions you'll encounter in Part 3 of the survey. Once you've made your selection, proceed to the next question in the survey.

From this point this guide works only for the following four types of projects.

1. Rapid Re-Housing.

For other project types, separate manuals are available. Please refer to the specific manual corresponding to your project type for detailed instructions and guidance during the survey.

What type of project is this?*

Refer to the above question response: Project Name

*Remember to complete a separate survey for EACH housing project your agency implements

|		
○ Emergency Shelter (up to 90 days)	○ Hotel/Motel Vouchers	○ Permanent Supportive Housing
◉ Rapid ReHousing	○ Seasonal/Winter Shelter (open several months a year)	○ Transitional Housing (90 days to 2 years)

❖ Once you Select:

Rapid Re-Housing project the survey will prompt you with specific questions for this project type.

Part 3: Rapid Re-Housing (RRH) Inventory & PIT

For the Rapid Re-Housing project, we will collect county-level data. If your RRH project covers more than one county, provide information for all counties your project serves. You don't need to submit multiple surveys for each county. Instead, the survey will prompt you to provide information for additional counties. We will guide you through the questions and the survey process.

For example, as shown in the image below, the RRH project is serving three counties: A, B, and C. We will first provide information for county A, then B, and C. After completing information for all counties, we will submit the form. The survey will allow you to fill in 5 counties at a time. If you have more than 5 counties where services are provided, complete 5 at a time and start a new survey for the remaining ones.
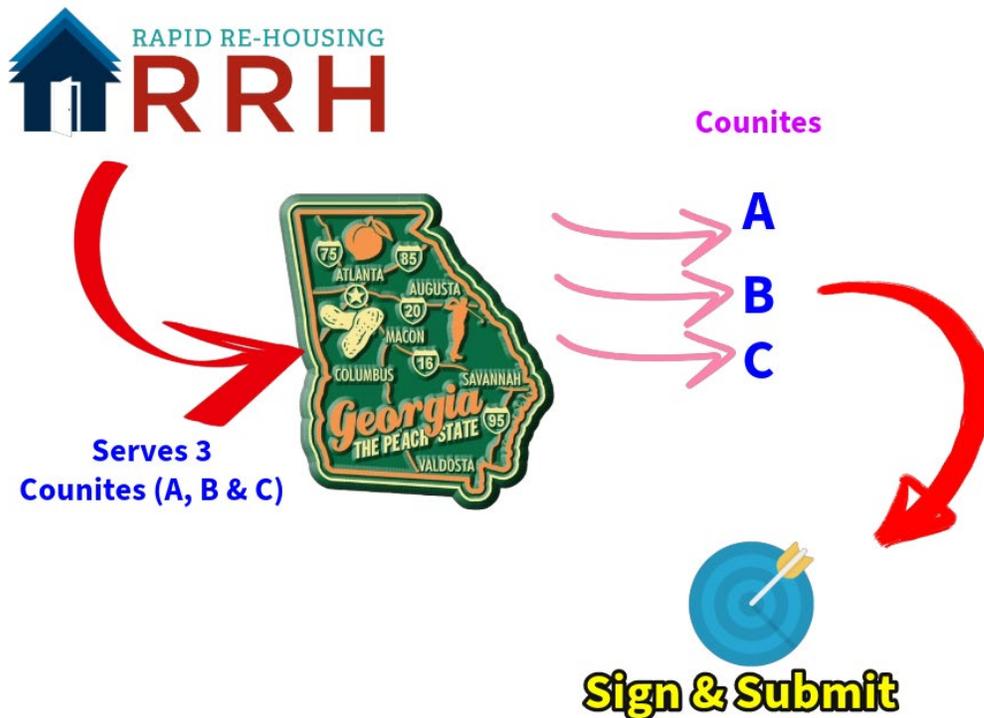
County and Zip code

❖ Choose the county from the drop-down list, and then input the zip code where the majority of your clients are housed in that county located.

County*

-Please select- ▼

Zip Code*

Please provide the zip code for the location in which the majority of the project's clients are housed within the county indicated above

12³

In general, there are three types of households we serve in the projects which are:

❖ **Households with at least one child:** This type of household is commonly referred to as a Family Household or Adult Child Household. It is characterized by the presence of at least one adult aged 18 or above and one child under the age of 18. While there can be multiple individuals in the household, it is essential that at least one member is under the age of 18.

❖ **Households without children:** This type of household is commonly known as an Adult Only Household. In this household configuration, there cannot be anyone under the age of 18. The key criterion is that all members must be 18 years of age or older. While there can be multiple individuals in the household, none of them should be below the age of 18.

Household without child ✓

❖ **Households with only children:** This type of household is characterized by the absence of individuals aged 18 or over. All members of the household must be under the age of 18. This includes various configurations such as unaccompanied children, adolescent parents with their children, adolescent siblings, and any other household compositions exclusively comprised of children. The definition ensures a clear understanding that no member in this household should be 18 years of age or older.

Under Age 18

Household with only Children

On the night of the point in time count, did your project provide housing service to households with at least one adult and one child?

- ❖ If your project has provided services to households with at least one adult and one child on the night of the count, select Yes. This is also known as family household.
- ❖ If not select No.

> On the night of the point in time count, did your project provide housing service to households with at least one adult and one child?*
>
> Households with children are also referred to as "Families"
>
> ○ Yes   ○ No

- ❖ If you select Yes, you will be prompted with the next set of questions as below.

Total number of family households in this county

- ❖ For this question input the total number of family household served during the night of the count this county for this project.

> Total number of family households in this county*
>
> [1₂³]

Total number of persons in family households

- ❖ For this question input the total number person on family household served during the night of the count this county for this project.

> Total number of persons in family households*
>
> [1₂³]

Total number of children in family households in this county

- ❖ For this question input the total number children (under age 18) in family household served during the night of the count this county for this project.

Total number of children in family households in this county*

children under age 18

> 1_2^3

Total number of young adults in family households in this county

- ❖ For this question input the total number of Young Adults (18 to 24) on family household served during the night of the count this county for this project.

Total number of young adults in family households in this county*

young adults (age 18 to 24)

> 1_2^3

## Number of adults in family households in this county

- ❖ For this question input the total number of Adults (Over 24) on family household served during the night of the count this county for this project.

Number of adults in family household in this county*

adults (over age 24)

> 1_2^3

For example, in the image shown below, there are 15 people in 5 family households, which includes 5 children under the age of 18, 4 young adults aged 18 to 24, and 6 adults aged 24 and over.

 Keep in mind that this information is specific to one county, and the project may serve multiple counties and these data are only used for illustrative purposes.
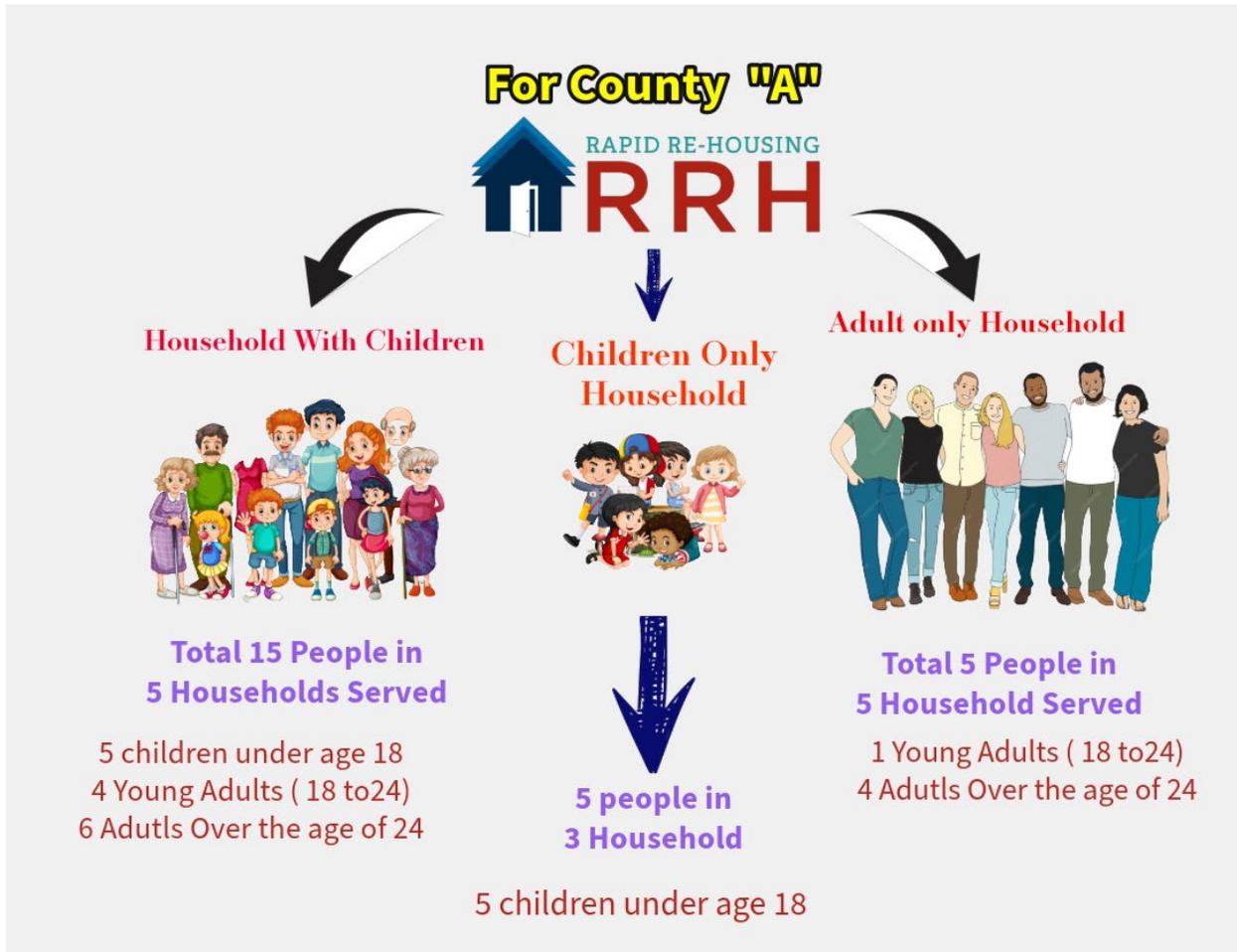
Let's fill out this data for family households. We will also use the same image data for children and adult households when we complete the family household.

On the night of the point in time count, did your project provide housing service to households with at least one adult and one child?*

Households with children are also referred to as "Families"

(●) Yes   (○) No

Total number of family households in this county*

123 5

Total number of persons in family households*

123 15

Total number of children in family households in this county*

children under age 18

123 5

Total number of young adults in family households in this county*

young adults (age 18 to 24)

123 4

Number of adults in family household in this county*

adults (over age 24)

123 6

On the night of the point in time count, did your project provide housing service to households without children?

❖ If your project has provided services to households without children on the night of the count, select Yes. This is also known as an adult only household.

❖ If not select No.

On the night of the point in time count, did your project provide housing service to households without children?*

Households without children are also referred to as "adult only" or "individuals" households

- ◯ Yes
- ◯ No

Total number of adult only households in this county

❖ For this question input the total number of adult only households served during the night of the count this county for this project.

Total number of adult only households in this county*

[1₂³]

Total number of persons in adult only households in this county

❖ For this question input the total number person on adult only households served during the night of the count this county for this project.

Total number of persons in adult only households in this county*

123

Total number of young adults in adult only households in this county

❖ For this question input the total number of Young Adults (18 to 24) on adult only household served during the night of the count this county for this project.

Total number of young adults in adult only households in this county*
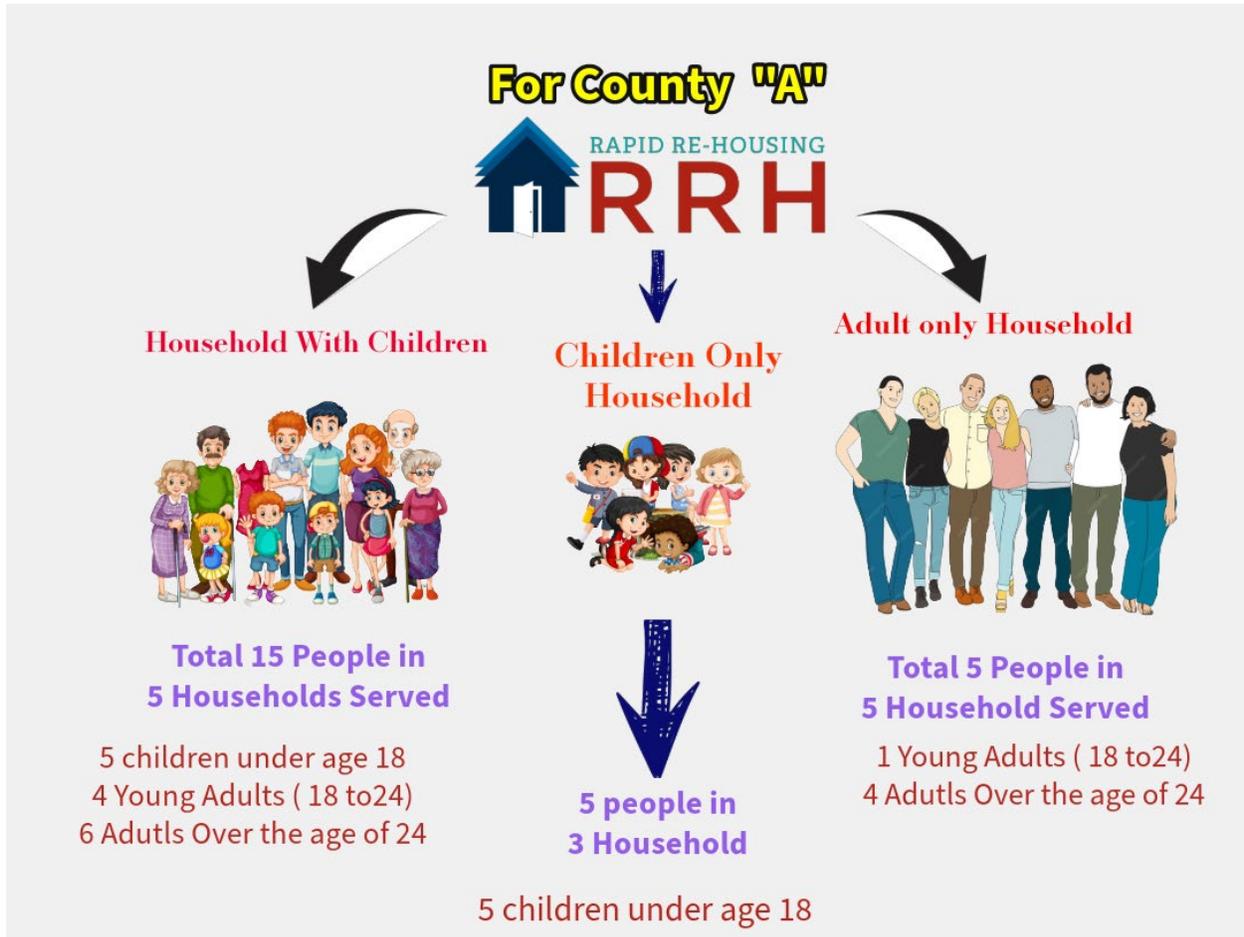
young adults (age 18 to 24)

123

Total number of adults in adult only households in this county

❖ For this question input the total number of Adults (Over 24) on adult only household served during the night of the count this county for this project.

Total number of adults in adult only households in this county*

adults (over age 24)

123

For example, referring to the image below, there are 5 households with a total of 5 people, including 1 young adult (aged 18 to 24) and 4 adults over the age of 24. We will fill in this data to illustrate. As we have already filled out family household or household with children, we will fill out Adult only household or household without children.

On the night of the point in time count, did your project provide housing service to households without children?*

Households without children are also referred to as "adult only" or "individuals" households

- ( ) Yes
- ( ) No

Total number of adult only households in this county*

123 5

Total number of persons in adult only households in this county*

123 5

Total number of young adults in adult only households in this county*

young adults (age 18 to 24)

123 1

Total number of adults in adult only households in this county*

adults (over age 24)

123 4

On the night of the count, did you provide housing services to households with only children?

- ❖ If your project has provided services to households with only children on the night of the count, select Yes. This is also known as Child only household.
- ❖ If not select No.

If you select Yes, you will be prompted with the next set of questions as below.

On the night of the count, did you provide housing services to households with only children?*

children (under age 18)

○ Yes   ○ No

Total number of child only households in this county

❖ For this question input the total number of child households served during the night of the count this county for this project.

Total number of child only households in this county*

[123]

Total number of children in child only households in this county

❖ For this question input the total number of children (Under 18) on child only household served during the night of the count this county for this project.

Total number of children in child only households in this county*

children (under age 18)

[123]

TOTAL number of people (adults and children) staying in this project/ county on the night of the point in time count?

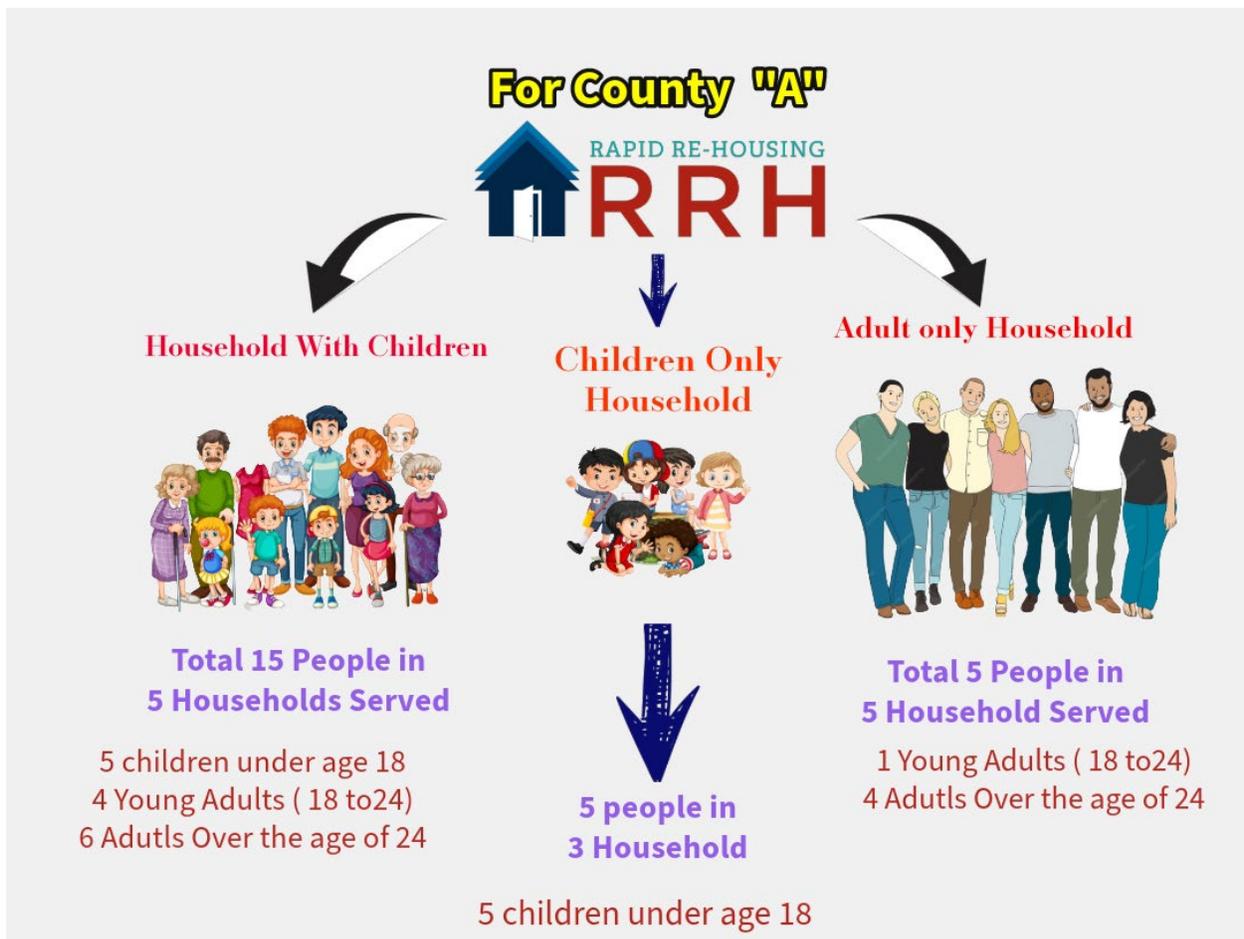❖ This question is asking for total of people that were served on the night of the count in each household type.

TOTAL number of people (adults and children) staying in this project/ county on the night of the point in time count?*

Persons in each household type should equal the total number of persons

*Review calculations

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1₂³
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❖ For this question input the total number of Adults (Over 24) on adult only household served during the night of the count this county for this project.

For Example: In the image below, you can see in the child household, there are 5 people in 3 households. We will fill in those numbers. For the total number of people served we need add all the breakdowns from each household which is 15 from Household with children, 5 from adult only household and 5 from children only household total of 25 people.

On the night of the count, did you provide housing services to households with only children?*

children (under age 18)

◉ Yes   ○ No

Total number of child only households in this county*

12³ 5

Total number of children in child only households in this county*

children (under age 18)

12³ 3

TOTAL number of people (adults and children) staying in this project/county on the night of the point in time count?*

Persons in each household type should equal the total number of persons

*Review calculations

12³ 25

Did you provide housing services to clients staying in additional counties?

❖ If your project serves more than one county where people were staying on the night of the count, you need to select "Yes" and then repeat the same process as we did just above; otherwise, select "No."

Did you provide housing services to clients staying in additional counties?*

If yes, please continue to complete inventory per county

○ Yes   ○ No

Part 4: Sign and Submit

Read the agreement and check the box.

Part 4 of 4: Sign and Submit ⊙

Agreement*

Thank you for completing the above information. Thank you for taking the time to partner with the Georgia Balance of State CoC by completing this survey as we strive to measure the prevalence of homelessness, identify resources that are currently available to address homelessness, and address the needs gap within our communities.

Review the aggreement below, select the box below indicating your agreement prior to survey submission.

If you have any questions regarding the survey, please contact DCA staff at PITcount@dca.ga.gov

☐ I have provided the most accurate information available at the time this survey was completed on behalf of my agency and did not falsify data given within this survey to the best of my knowledge. I agree to any and all follow up correspondence from DCA staff if questions arise related to mathematical discrepancies within this survey. I agree to respond to questions from DCA staff promptly.

❖ Person who is submitting the survey need to fill out this information below:

Contributor Name*

The person responsible for submitting survey on behalf of agency

Contributor- Contact Information

Enter email address below

Contributor- Contact Information*

Enter phone number below: (XXX) XXX-XXXX

❖ Finally, sign in the provided box. Do not alter the date and time of submission, as the system will automatically generate this information. Once you've completed the necessary sections and signing, click the "Submit" button to conclude the survey submission process.

Signature
Press and hold down your mouse/ clicker to draw your signature here:

🗑
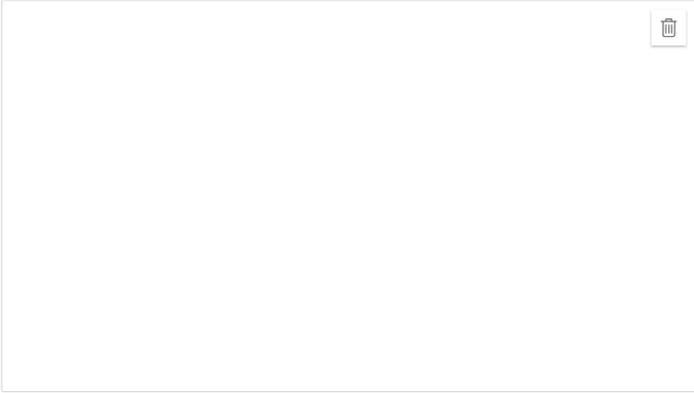
Submission Date/ Time*
Do NOT change the generated submission date/time

📅 1/22/2024 ⌄   🕐 03:32 PM ⌄

Submit

If your agency operated multiple projects, make sure submit the survey for all the projects separately.

Key Terms

These definitions do not fully correspond to the program requirements of HUD funding streams and must only be used for the purposes of the HIC and PIT.

Adults – Persons age 18 and older.

Child – Persons under age 18.

Person Experiencing Chronic Homelessness - A person who:

A. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

B. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least four separate occasions in the last 3 years where the combined length of time homeless in those occasions is at least 12 months; and

C. Has a disability.

Note: For purposes of PIT reporting:

(1) When a household with one or more members includes an adult or minor head of household who qualifies as chronically homeless, then all members of that household should be counted as a person experiencing chronic homelessness in the applicable household type table. For example, if one adult in a two adult household is identified as chronically homeless, both adults should be counted as a person experiencing chronic homelessness in the households without children category of the PIT count.

Disability – An individual with one or more of the following conditions:

A. A physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that: (1) Is expected to be long-continuing or of indefinite duration.

1. Is expected to be long-continuing or of indefinite duration;

2. Substantially impedes the individual's ability to live independently; and

3. Could be improved by the provision of more suitable housing conditions.

B. A developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); or

C. The disease of Acquired Immunodeficiency Syndrome (AIDS) or any condition arising from the etiologic agency for Acquired Immunodeficiency Syndrome.

Adults with HIV/AIDS – This population category of the PIT includes adults who have been diagnosed with AIDS and/or have tested positive for HIV.

Adults with a Serious Mental Illness (SMI) – This population category of the PIT includes adults with a severe and persistent mental illness or emotional impairment that seriously limits a person's ability to live independently. Adults with SMI must also meet the qualifications identified in the term for "disability" (e.g., "is expected to be long-continuing or indefinite duration").

Adults with a substance use disorder–This population category of the PIT includes adults with a substance abuse problem (alcohol abuse, drug abuse, or both). Adults with a substance use disorder must also meet the qualifications identified in the term for "disability" (e.g., "is expected to be long-continuing or indefinite duration").

Survivors of Domestic Violence–This population category of the PIT includes adults who are currently experiencing homelessness because they are fleeing domestic violence, dating violence, sexual assault, or stalking.

Veteran–This population category of the PIT includes adults who have served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty.

Victim Service Provider – A private nonprofit organization whose primary mission is to provide services to survivors of domestic violence, dating violence, sexual assault, or stalking. This term includes rape

crisis centers, battered women's shelters, domestic violence transitional housing programs, and other programs.

Youth – Persons under age 25. HUD collects and reports youth data based on persons under 18 and persons between ages 18 and 24.

Parenting Youth – A youth who identifies as the parent or legal guardian of one or more children who are present with or sleeping in the same place as that youth parent, where there is no person age 25 or older in the household.

Unaccompanied Youth – Unaccompanied youth are persons under age 25 who are not accompanied by a parent or guardian or any other household member age 25 or older, and who are not a parent presenting with or sleeping in the same place as his/her child(ren). Unaccompanied youth are single youth, youth couples, and groups of youth presenting together as a household.